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The
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FUND

Affordable, quality health care. For everyone.

March 9, 2015
MarketplaceSurveyWave3QNAIRE.doc
Job # N1084

The Commonwealth Fund ACA Tracking Survey, March-May 2015

SCREENER FOR RECONTACTS FROM M1098 (Both LL and cell) DELETED

SCREENER FOR EXCEL, PRESCREENED SAMPLE (Both LL and cell):

INTRO_EX1:

Hello, my name is_____ calling for SSRS. We are conducting an important national study about health care.

(IF NECESSARY: Our questions are for research purposes only and your answers are strictly confidential.)

(IF NECESSARY: I want to assure you we are not selling anything.)

VOICEMAIL MESSAGE (IF LANDLINE SAMPLE, LEAVE MESSAGE ON THIRD CALL ATTEMPT. IF CELL PHONE SAMPLE LEAVE MESSAGE ON FIRST CALL ATTEMPT): I am calling for SSRS. We are conducting a national study about health care. This is NOT a sales call. We will try to reach you again.



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PRESCREENED EXCEL CELL PHONE SAMPLE:

CELL1_EX. So that I can ask you the right questions, could you please tell me if you are less than 19 years old, between the ages of 19 and 64, or older than 64?

- | | | |
|---|------------------------------|---------------------|
| 1 | Less than 19 years (0 to 18) | THANK AND TERMINATE |
| 2 | 19 to 64 years | GO TO CELL3_EX |
| 3 | Older than 64 (65 or older) | THANK AND TERMINATE |
| R | Refused | THANK AND TERMINATE |

[PN: IF THIS IS THE FIRST REFUSAL AT CELL1_EX THIS SHOULD BE TREATED AS AN INITIAL REFUSAL]

CELL3_EX. (INTERVIEWER: ONLY IF RESPONDENT ASKS ABOUT INCENTIVE: At the end of the survey, we would like to send you \$5 in appreciation of your time.)
Before we continue, are you driving (OPTIONAL: and unable to complete the survey)?

- | | | |
|---|---|---------------------|
| 1 | Continue, on cell phone and not driving | GO TO AGE_EX |
| 2 | Respondent is driving/cannot continue | SET UP CALL BACK |
| R | Refused | THANK AND TERMINATE |

[PN: IF THIS IS THE FIRST REFUSAL AT CELL3_EX THIS SHOULD BE TREATED AS AN INITIAL REFUSAL]

PRESCREENED EXCEL LANDLINE SAMPLE

[INTERVIEWER: PLEASE CONFIRM PERSON ON THE LINE IS AN ADULT]

HH19TO64_EX. So that I can ask you the right questions, could you please tell me how many adults between ages 19 and 64 live in your household, including yourself?

- _____ # ADULTS AGE 19-64 (RANGE 0-10)
- 11 11 or more adults 19 to 64 in HH
DD (DO NOT READ) Don't know
RR (DO NOT READ) Refused

(PN: IF HH19TO64_EX=0, TERMINATE AS TQHH19TO64_EX)

[PN: IF THIS IS THE FIRST REFUSAL AT HH19TO64_EX THIS SHOULD BE TREATED AS AN INITIAL REFUSAL]



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(ASK SC1 EX IF HH19TO64 EX=1)

SC1_EX. May I please speak to the adult who is between the ages of 19 and 64?

- | | | |
|---|----------------------------------|----------------------------------|
| 1 | Continue with current respondent | GO TO AGE_EX |
| 2 | New respondent coming to phone | RE-READ INTRO_EX1 AND ASK SC1_EX |
| 3 | New respondent not available | SCHEDULE CALL BACK |
| R | (DO NOT READ) Refused | TERMINATE RECORD AS RQSC1_EX |

(ASK SC2 EX IF HH19TO64 EX=2+,DD,RR)

(PN: ASK MALE 50% OF THE TIME, ASK FEMALE 50% OF THE TIME, ALLOW FOR PERCENT TO CHANGE)

SC2_EX. May I speak with the youngest (male/female) who is between the ages of 19 to 64 and is now at home?

- | | | |
|---|---------------------------------------|---------------------------------|
| 1 | Continue with current respondent | GO TO AGE_EX |
| 2 | New respondent coming to phone | RE-READ INTRO AND RE-ASK SC2_EX |
| 3 | New respondent not available | GO TO SC3_EX |
| 4 | No (male/female), age 19 to 64, in HH | GO TO SC3_EX |
| R | (DO NOT READ) Refused | TERMINATE AS RQSC2_EX |

(PN: INSERT OPPOSITE GENDER FROM SC2_EX)

SC3_EX. May I speak with the youngest (female/male) who is between the ages of 19 to 64 and is now at home?

- | | | |
|---|---------------------------------------|---|
| 1 | Continue with current respondent | GO TO AGE_EX |
| 2 | New respondent coming to phone | RE-READ INTRO AND RE-ASK SC3_EX |
| 3 | New respondent not available | SCHEDULE CALL BACK |
| 4 | No (female/male), age 19 to 64, in HH | SCHEDULE CALL BACK WITH (MALE/FEMALE) ASKED FOR IN Q.SC3_EX |
| R | (DO NOT READ) Refused | TERMINATE, RECORD AS RQSC3_EX |

(Biennial Trend 2007 D3, 2010 AGE, 2012 AGE, modified)

AGE_EX. What is your age?

(INTERVIEWER NOTE: RECORD EXACT AGE AS TWO-DIGIT CODE.)

_____ (RECORD AGE) (Range 12-97)

RR (DO NOT READ) Refused

IF AGE_EX = 18 OR UNDER AND CELL PHONE SAMPLE TERMINATE AND RECORD AS TQAGE_EX



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IF AGE_EX= 18 OR UNDER AND LANDLINE SAMPLE, RE-ASK HH19TO64_EX ONE TIME. DO NOT RE-ASK, TERMINATE AND RECORD AS TQAGE_EX THE SECOND TIME

IF AGE_EX = 19-64 GO TO INS_EX1

IF AGE_EX = 65 OR OLDER AND CELL PHONE SAMPLE TERMINATE AND RECORD AS TQAGE_EX

IF AGE_EX = 65 OR OLDER AND LANDLINE SAMPLE, RE-ASK HH19TO64_EX ONE TIME. DO NOT RE-ASK, TERMINATE AND RECORD AS TQAGE_EX THE SECOND TIME

IF AGE_EX= R AND CELL PHONE SAMPLE GO TO INS_EX1

IF AGE_EX = R AND LANDLINE SAMPLE GO TO SC4_EX

(ASK SC4_EX IF LL SAMPLE AND AGE=R)

SC4_EX. So could you please tell me if you are (READ LIST)?

- | | | |
|---|----------------------------------|---|
| 1 | Under age 19 | RE-ASK HH19TO64_EX ONE TIME,
DO NOT RE-ASK TERMINATE
RECORD AS TQSC4_EX IF
SECOND TIME |
| 2 | Between the ages of 19 to 64, or | GO TO INS_EX1 |
| 3 | Age 65 or older | RE-ASK HH19TO64_EX ONE TIME,
DO NOT RE-ASK TERMINATE
RECORD AS TQSC4_EX IF
SECOND TIME |
| R | (DO NOT READ) Refused | TERMINATE RECORD AS
RQSC4_EX |

READ: First, we have a few questions about your health insurance coverage.

(ASK IF AGE_EX=19 TO 64 OR SC4_EX=2)

INS_EX1. Do you currently have health insurance?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(ASK INS_EX2 IF INS_EX1=1)

INS_EX2. How do you obtain your health insurance? Is it through your or your spouse's employer or union, Medicare, Medicaid, or in some other way such as through the marketplace or through coverage you've purchased on your own?

(INTERVIEWER NOTE: EMPLOYER INSURANCE COULD BE THROUGH THE RESPONDENT'S CURRENT OR FORMER JOB OR SOMEONE ELSE'S JOB.)

(INTERVIEWER NOTE: SELECT CODE 3 IF THE RESPONDENT IS COVERED THROUGH MEDICAID.

SELECT CODE 4 IF THE RESPONDENT IS COVERED THROUGH THE MARKETPLACE OR A PRIVATE PLAN BOUGHT DIRECTLY FROM A HEALTH PLAN/INSURANCE COMPANY.)

- 1 Your or your spouse's employer or union
- 2 Medicare (IF NECESSARY: This is the government program that pays health care bills for people over age 65 and for some disabled people)
- 3 Medicaid
- 4 Some other way
- 0 (DO NOT READ) Uninsured
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

INS_EX3, INS_EX4 AND INS_EX5 DELETED

CONTINUE TO SEX IF INS_EX1=2 OR INS_EX2= 1, 3, 4, 0

ELSE TERMINATE



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ASK IF RDD LL OR RDD CELL:

INTRODUCTION:

Hello, my name is _____ calling for SSRS. We are conducting an important national study about health care.

(IF NECESSARY: Our questions are for research purposes only and your answers are strictly confidential.)

(IF NECESSARY: I want to assure you we are not selling anything.)

VOICEMAIL MESSAGE (IF LANDLINE SAMPLE, LEAVE MESSAGE ON THIRD CALL ATTEMPT. IF CELL PHONE SAMPLE LEAVE MESSAGE ON FIRST CALL ATTEMPT): I am calling for SSRS. We are conducting a national study about health care. This is NOT a sales call. We will try to reach you again.

CELL PHONE SAMPLE:

CELL1. So that I can ask you the right questions, could you please tell me if you are less than 19 years old, between the ages of 19 and 64, or older than 64?

- | | | |
|---|------------------------------|---------------------|
| 1 | Less than 19 years (0 to 18) | THANK AND TERMINATE |
| 2 | 19 to 64 years | GO TO CELL3 |
| 3 | Older than 64 (65 or older) | THANK AND TERMINATE |
| R | Refused | THANK AND TERMINATE |

CELL3. (INTERVIEWER: ONLY IF RESPONDENT ASKS ABOUT INCENTIVE: At the end of the survey, we would like to send you \$5 in appreciation of your time.)

Before we continue, are you driving (OPTIONAL: and unable to complete the survey)?

- | | | |
|---|---|---------------------|
| 1 | Continue, on cell phone and not driving | GO TO AGE |
| 2 | Respondent is driving/cannot continue | SET UP CALL BACK |
| R | Refused | THANK AND TERMINATE |

LANDLINE SAMPLE:

[INTERVIEWER: PLEASE CONFIRM PERSON ON THE LINE IS AN ADULT]

HH19TO64. So that I can ask you the right questions, could you please tell me how many adults between ages 19 and 64 live in your household, including yourself?

_____ # ADULTS AGE 19-64 (RANGE 0-10)

- 11 11 or more adults 19 to 64 in HH
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

(PN: IF HH19TO64=0, TERMINATE AS TQHH19TO64)



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(ASK SC1 IF HH19TO64=1)

SC1. May I please speak to the adult who is between the ages of 19 and 64?

- | | | |
|---|----------------------------------|---------------------------|
| 1 | Continue with current respondent | GO TO AGE |
| 2 | New respondent coming to phone | RE-READ INTRO AND ASK SC1 |
| 3 | New respondent not available | SCHEDULE CALL BACK |
| R | (DO NOT READ) Refused | TERMINATE RECORD AS RQSC1 |

(ASK SC2 IF HH19TO64=2+,DD,RR)

(PN: ASK MALE 50% OF THE TIME, ASK FEMALE 50% OF THE TIME, ALLOW FOR PERCENT TO CHANGE)

SC2. May I speak with the youngest (male/female) who is between the ages of 19 to 64 and is now at home?

- | | | |
|---|---------------------------------------|------------------------------|
| 1 | Continue with current respondent | GO TO AGE |
| 2 | New respondent coming to phone | RE-READ INTRO AND RE-ASK SC2 |
| 3 | New respondent not available | GO TO SC3 |
| 4 | No (male/female), age 19 to 64, in HH | GO TO SC3 |
| R | (DO NOT READ) Refused | TERMINATE AS RQSC2 |

(ASK SC3 IF SC2 =3,4)

(PN: INSERT OPPOSITE GENDER FROM SC2)

SC3. May I speak with the youngest (female/male) who is between the ages of 19 to 64 and is now at home?

- | | | |
|---|---------------------------------------|--|
| 1 | Continue with current respondent | GO TO AGE |
| 2 | New respondent coming to phone | RE-READ INTRO AND RE-ASK SC3 |
| 3 | New respondent not available | SCHEDULE CALL BACK |
| 4 | No (female/male), age 19 to 64, in HH | SCHEDULE CALL BACK WITH (MALE/FEMALE) ASKED FOR IN Q.SC3 |
| R | (DO NOT READ) Refused | TERMINATE, RECORD AS RQSC3 |

(Biennial Trend 2007 D3, 2010 AGE, 2012 AGE, modified)

(ASK IF CELL3=1 OR SC1=1 OR SC2=1 OR SC3=1)

AGE. What is your age?

(INTERVIEWER NOTE: RECORD EXACT AGE AS TWO-DIGIT CODE.)

_____ (RECORD AGE) (Range 12-97)
RR (DO NOT READ) Refused



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IF AGE = 18 OR UNDER AND CELL PHONE SAMPLE TERMINATE AND RECORD AS TQAGE

IF AGE = 18 OR UNDER AND LANDLINE SAMPLE, RE-ASK HH19TO64 ONE TIME.
DO NOT RE-ASK, TERMINATE AND RECORD AS TQAGE SECOND TIME

IF AGE = 19-64 GO TO SEX

IF AGE = 65 OR OLDER AND CELL PHONE SAMPLE TERMINATE AND RECORD AS TQAGE

IF AGE = 65 OR OLDER AND LANDLINE SAMPLE, RE-ASK HH19TO64 ONE TIME.
DO NOT RE-ASK, TERMINATE AND RECORD AS TQAGE SECOND TIME

IF AGE = R AND CELL PHONE SAMPLE GO TO SEX

IF AGE = R AND LANDLINE SAMPLE GO TO SC4

(ASK SC4 IF RDD LL SAMPLE AND AGE=R)

SC4. So could you please tell me if you are (READ LIST)?

- | | | |
|---|----------------------------------|---|
| 1 | Under age 19 | RE-ASK HH19TO64 ONE TIME,
DO NOT RE-ASK TERMINATE
RECORD AS TQSC4 IF SECOND
TIME |
| 2 | Between the ages of 19 to 64, or | GO TO SEX |
| 3 | Age 65 or older | RE-ASK HH19TO64 ONE TIME,
DO NOT RE-ASK TERMINATE
RECORD AS TQSC4 IF SECOND
TIME |
| R | (DO NOT READ) Refused | TERMINATE RECORD AS RQSC4 |



(Biennial 2007 D1; ACA Tracking Surveys 2013, 2014)

BASE: ALL QUALIFIED RESPONDENTS

SEX. RECORD RESPONDENTS SEX (ASK ONLY IF NECESSARY)

- 1 Male
- 2 Female

(Biennial Trend 2007 Q2; ACA Tracking Surveys 2014Q1)

BASE: ALL RESPONDENTS

Q1. How confident are you that if you become seriously ill you will be able to afford the care you need? Are you very confident, somewhat confident, not too confident, or not at all confident?
(ENTER ONE ONLY)

- 1 Very confident
- 2 Somewhat confident
- 3 Not too confident
- 4 Not at all confident
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Surveys 2014 Q1a)

BASE: ALL RESPONDENTS

Q1a. How confident are you that if you become seriously ill, you will be able to get high quality care when you need it? Are you very confident, somewhat confident, not too confident, or not at all confident?
(ENTER ONE ONLY)

- 1 Very confident
- 2 Somewhat confident
- 3 Not too confident
- 4 Not at all confident
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Source: Biennial 2010, 2012 Q2, Quality of Care 2006 Q5; ACA Tracking Surveys 2013, 2014 Q2)

BASE: ALL QUALIFIED RESPONDENTS

Q2. Do you have a regular doctor you usually go to when you are sick or need health care?

- 1 Yes
- 2 No
- 3 (DO NOT READ) Has more than one regular doctor
- 4 (DO NOT READ) No but has physician assistant or nurse practitioner
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(Biennial 2010, 2012 Q3, 2008 International Survey Q1005; ACA Tracking Surveys 2013, 2014 Q3)

BASE: NO REGULAR DOCTOR OR DON'T KNOW or REFUSED (Q2=2,D,R)

Q3. Is there one doctor's group, health center, or clinic you usually go to for most of your medical care?

(INTERVIEWER NOTE: Please do not include the hospital emergency room.)

- 1 Yes, have a usual place for medical care
- 2 No, do not have a usual place for medical care
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Trend: Gen Pop 2011 and 2012 Q10; ACA Tracking Surveys 2013, 2014 Q4)

BASE: ALL QUALIFIED RESPONDENTS

[PN: IF Q.2=1 OR 3 OR 4, OR Q3=1 DO NOT DISPLAY RESPONSE CODE 08]

Q4. Where do you usually go when you are sick or need health care? (READ LIST UNTIL ENDORSED)

- 01 Doctor's office or private clinic
- 02 Community health center or other public clinic
- 03 Hospital outpatient department
- 04 Hospital emergency room
- 05 Urgent care center
- 06 Retail clinic
- 07 Some Other Place
- 08 (DO NOT READ) No regular place of care
- 09 (DO NOT READ) Never needed care
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

Q5. DELETED

Q8. DELETED



(Biennial Trend 2001 D2, 2003 D2, 2005 D2, 2007 D2, 2010 D2, 2012 D2; ACA Tracking Surveys 2013 QD2, 2014 Q5)

BASE: ALL QUALIFIED RESPONDENTS

Q5. Are you currently married, living with a partner, divorced, separated, widowed, or have you never been married?

- 1 Married
- 2 Living with a partner
- 3 Divorced
- 4 Separated
- 5 Widowed
- 6 Never married
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

Q6 DELETED

BASE: ALL QUALIFIED RESPONDENTS

Q7. In what State do you reside?
(DO NOT READ LIST)

- 1 _____ (LIST OF STATES)
- R (DO NOT READ) Refused

(PN: CREATE 'STATE' VARIABLE; IF RESPONDENT PROVIDES STATE FOR Q 7 STATE=RESPONSE IN Q7, IF LANDLINE SAMPLE AND RESPONDENT REFUSED Q7, USE SAMPLE STATE, IF CELL PHONE SAMPLE AND RESPONDENT REFUSED, STATE=UNKNOWN)

(PN: USE MARKETPLACE NAME PROVIDED IF STATE= CA, CO, CT, DC, HI, ID, KY, MD, MA, MN, NV, NM, NY, OR, RI, VT, WA)



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AWARENESS OF ACA INSURANCE OPTIONS

(ACA Tracking Surveys October and December 2013 CW-1, 2014 Q8 modified)

BASE: ALL QUALIFIED RESPONDENTS

(INSERT TEXT “also known as...” IN PARENS IF STATE IS KNOWN AND STATE HAS MARKETPLACE NAME)

Q8. Under the health reform law, also known as the Affordable Care Act, there are marketplaces in each state where people who do not have affordable health insurance through a job, can shop and sign up for health insurance.

“Are you aware of these marketplaces also known as Health Care DOT gov or [(INSERT STATE MARKETPLACE NAME) in your state]”.

INTERVIEWER NOTE: If respondent says “do you mean Obamacare”, then say: “It is sometimes referred to as Obamacare.”)

- 1 Yes, I am aware
- 2 No, I am not aware
- D (DO NOT READ) Don’t know enough to say
- R (DO NOT READ) Refused

(ACA Tracking Surveys October and December 2013 CW-2, 2014 Q9a modified)

BASE: ALL QUALIFIED RESPONDENTS

(INSERT TEXT IN PARENS IF STATE IS KNOWN AND STATE HAS MARKETPLACE NAME)

Q9a. Many people without affordable health insurance through a job may be eligible for financial help to pay for their health insurance in these marketplaces also known as Health Care DOT gov or [(INSERT STATE MARKETPLACE NAME) in your state]”. Are you aware that financial assistance for health insurance is available under the reform law?

(INTERVIEWER NOTE: If respondent says “do you mean Obamacare”, then say: “It is sometimes referred to as Obamacare.”)

- 1 Yes, I am aware
- 2 No, I am not aware
- D (DO NOT READ) Don’t know enough to say
- R (DO NOT READ) Refused



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(ACA Tracking Surveys October and December 2013 CW-2a, 2014 Q9b modified)

BASE: ALL QUALIFIED RESPONDENTS

Q9b. People who go to the marketplaces may also find out that their income makes them eligible for Medicaid in some states under the reform law. Are you aware that the health care reform law makes Medicaid available to more Americans in some states?

(INTERVIEWER NOTE: If respondent says “do you mean Obamacare”, then say: “It is sometimes referred to as Obamacare.”)

- 1 Yes, I am aware
- 2 No, I am not aware
- D (DO NOT READ) Don't know enough to say
- R (DO NOT READ) Refused



PERSONAL CURRENT INSURANCE COVERAGE

(Modified Biennial Trend 2001 Q20, 2003 Q10, 2005 Q17, 2007 Q12, 2010 Q12, 2012 Q14; ACA Tracking Surveys 2013 MODIFIED, 2014 Q10 modified)

BASE: ALL QUALIFIED RESPONDENTS

[PN: IF STATE=CALIFORNIA INSERT: "Medi-Cal"]

[PN: IF Q10a=2 D or R AND Q10b=2, D or R AND Q10c=2, D OR R AND Q10d=2, D or R AND Q10e=2,D,R: DISPLAY ITEM F]

(PN: INSERT 'FIRST' FOR ITEM A; CAPITALIZE 'ARE' FOR ITEMS B-F)

Q10. 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: IF RESPONDENT IS 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.)

(INTERVIEWER: IF RESPONDENT TRIES TO SAY THE TYPE OF INSURANCE 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. Please just tell me "no" if you don't have this type)

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

- a. Health insurance offered through an employer or union. This could be insurance through a current or former job, your job or someone else's job.
- b. Medicaid [IF STATE SPECIFIC NAME FOR MEDICAID IS NOT MEDICAID INSERT: also known in your state as [state specific Medicaid program]]
- c. A health insurance plan that you signed up for through a health insurance marketplace also known as Health Care DOT gov or [(INSERT STATE MARKETPLACE NAME) in your state]", created by the Affordable Care Act. (INTERVIEWER NOTE: If respondent says do you mean Obamacare, then say: "It is sometimes referred to as Obamacare.")
INTERVIEWER NOTE: If respondents says they have selected or enrolled in a plan but that it has not yet gone into effect, code them as "Yes")
- d. A health insurance plan that you bought directly from an insurance company.
- e. Medicare, the government program that pays health care bills for people over age 65 and for some disabled people
- f. Health insurance through ANY other source, including military or veteran's coverage



*(Biennial Trend 2001 Q25, 2003 Q13, 2005 Q20, 2007 Q15, 2010 Q16, 2012 Q19;
ACA Tracking Surveys 2013, 2014 Q11)*

**BASE: NOT COVERED BY ANY INSURANCE OR UNDESIGNATED (Q10a=2,D,R
AND Q10b=2, D,R AND Q10c=2, D,R AND Q10d=2, D,R AND Q10e=2, D,R AND
Q10f=2,D,R)**

Q11. Does this mean that you personally have NO health insurance now that would cover your doctor or hospital bills?

- 1 I do NOT have health insurance
- 2 I HAVE some kind of health insurance
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Biennial Trend 2001 Q24 modified, 2003 Q12, 2005 Q19 modified, 2007 Q14, 2010 Q15, 2012 Q18; ACA Tracking Surveys 2013 Q15, 2014 Q12)

BASE: HAS EMPLOYER-BASED INSURANCE (Q10a=1)

(IF Q5=1 INSERT: "your spouse's name" AND SHOW CODE 2)

(IF Q5=2 INSERT: "your partner's name" AND SHOW CODE 2)

(IF AGE=19-25 INSERT: "your parent's name" AND SHOW CODE 3)

Q12. Is the employer or union health insurance that you have in your name (your spouse's name/your partner's name/your parent's name,) or in someone else's name?

(ENTER ONE ONLY)

- 1 Own name
- 2 Spouse's/Partner's name
- 3 Parent's name
- 4 Someone else's name
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q16-Q18. DELETED

(ACA Tracking Survey 2014 Q12b)

BASE: HAS EMPLOYER-BASED INSURANCE (Q10a=1)

Q12b. How long have you had health insurance through this employer?

(READ LIST.)

- 1 Three months or less
- 2 Four months to less than 1 year
- 3 1 year to less than 2 years
- 4 2 years to less than 3 years
- 5 3 or more years
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(NEW)

BASE: Has Medicaid and Marketplace coverage (Q10b=1 and Q10c=1)

Q12c. You said that you have both, Medicaid and a private health insurance plan you purchased through the marketplace. Is your main health insurance Medicaid, or a private health plan you purchased through the marketplace, or are you uncertain about what type of plan you have?

- 1 Medicaid
- 2 A private health plan you purchased through the marketplace
- 3 Uncertain whether it is Medicaid or a private health plan
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: Has Medicaid and Medicare (Q10b=1 and Q10e=1).

Q12d. You said that you have both Medicaid and Medicare. Can I confirm that you have both Medicaid and Medicare coverage?

- 1. Yes, have both Medicaid and Medicare coverage
- 2. No, have Medicaid only
- 3. No, have Medicare only
- 4. Uncertain whether I have Medicaid or Medicare or both.
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q13, modified skip)

BASE: HAS MEDICAID (10b =1 and Q10c=2,D,R AND Q10E=2,D,R) OR Q12c=1 OR Q12d=2

Q13. How long have you had Medicaid? (READ LIST)

(IF NECESSARY, "Please provide your best estimate if you are not sure how long you have had Medicaid).

- 1 Three months or less
- 2 Four months to less than 1 year
- 3 1 year to less than 2 years
- 4 2 years or more
- D (DO NOT READ) Don' t know
- R (DO NOT READ) Refused



(NEW)

BASE: HAS HAD MEDICAID FOR FOUR MONTHS TO LESS THAN ONE YEAR

(Q13=2)

Q13a. Did you get your Medicaid coverage on or after January first, 2015?

- 1 Yes, got Medicaid on/after January 1, 2015
- 2 No, got Medicaid before January 1, 2015
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: HAS MARKETPLACE (Q10C=1 AND Q10B=2,D,R) OR q12c=2

Q14. How long have you had a health plan you bought through the marketplace?

(ENTER ONE ONLY)

READ LIST

(IF NECESSARY, "Please provide your best estimate if you are not sure how long you have had your marketplace plan).

- 1 Three months or less
- 2 Four months to less than 1 year
- 3 1 year to less than 2 years
- 4 (DO NOT READ) 2 years or more
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: HAS HAD HEALTH PLAN THROUGH THE MARKETPLACE FOR FOUR MONTHS TO LESS THAN ONE YEAR (Q14=2)

Q14a. Did your health coverage through the marketplace begin on or after January first, 2015?

- 1 Yes, health coverage through marketplace began on/after January 1, 2015
- 2 No, health coverage through marketplace began before January 1, 2015
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q15 DELETED



ACCESSING THE MARKETPLACES

(October and December ACA Tracking Surveys 2013 CW-3, 2014 Q16)

BASE: ALL QUALIFIED RESPONDENTS

(IF Q10b=1 INSERT “Can I confirm - you have”)

Q16. As I mentioned, under the health reform law, also known as the Affordable Care Act, there are marketplaces in each state where people who do not have affordable health insurance through a job, can shop and sign up for health insurance. These marketplaces have been available since October 2013 (Can I confirm – you have visited/ Have you ever visited) a marketplace to shop for health insurance? This could be on the Internet, by phone, or in person

- 1 Yes
- 2 No
- 3 (DO NOT READ) Someone else (e.g., spouse) went to marketplace to shop for respondent’s/family’s health insurance
- D (DO NOT READ) Don’t know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q16a, responses modified)

BASE: DID NOT VISIT MARKETPLACE TO SHOP AND AWARE OF MARKETPLACE

IF (If Q16=2) AND (Q8=1)

(PN: ASK ITEM a FIRST AND ITEM i LAST; RANDOMIZE ITEMS b-f; IF ITEM a=1, DO NOT ASK ITEMS b-f)

(PN: IF UNINSURED (Q11=1,D,R), DO NOT ASK ITEM a)

Q16a. You said that you have not visited the marketplace to shop for health insurance. What are the reasons you did not visit the marketplace? Is it because (INSERT ITEM)?

(READ AS NEEDED: Was this a reason you didn’t visit the marketplace?)

- 1 Yes
 - 2 No
 - D Don’t Know
 - R Refused
-
- a. You already have health insurance.
 - b. You went someplace else to look for health insurance coverage
 - c. You didn’t think you would be eligible for health insurance
 - d. You didn’t think you could afford health insurance
 - e. You don’t think you need health insurance
 - f. You have been too busy
 - i. Of some other reason [SPECIFY]



(ACA Tracking Survey 2014 Q19 modified)

BASE: Marketplace visitors (If Q16=1, 3)

(IF q16=3 INSERT 'or did someone else')

Q16b. Did you (or did someone else) visit the marketplace once or more than one time, since they opened in October 2013?

(IF RESPONDENT SAYS MORE THAN ONCE, ASK: About how many times did you visit the marketplace altogether? Your best estimate is fine)

- 01 Once/one time
- 02 More than once _____ (RANGE = 2-50)
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

Q16bb DELETED

Q17 DELETED

Q18, Q18A, Q18B HAVE BEEN MODIFIED AND MOVED TO AFTER Q26A.

Q 19 DELETED

(ACA Tracking Surveys Oct. and Dec. 2013, CW-4, 2014 Q20)

BASE: MARKETPLACE VISITORS (IF Q16=1)

(ROTATE 1-4/4-1)

(ROTATE SAME ORDER FOR Q20, Q21, Q22, Q23a, 28a, 36c)

(DO NOT ROTATE ITEMS a-b)

Q20. You said that you visited the marketplace to shop for health insurance at least once since they opened for the first time in October 2013. Thinking about your most recent visit, how easy or difficult was it to find (INSERT ITEM)?
Would you say that it was...

(READ LIST)

- 1 Very easy
 - 2 Somewhat easy
 - 3 Somewhat difficult
 - 4 Very difficult
 - N (DO NOT READ) Impossible
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
- a. A plan with the type of coverage you need
 - b. A plan you could afford



(ACA Tracking Surveys October and December, 2013, CW-5, 2014 Q21a-c and 2014 Q22)

BASE: MARKETPLACE VISITORS (IF Q16=1)

(ROTATE 1-4/4-1)

(ROTATE SAME ORDER FOR Q20, Q21, Q22, Q23a, 28a, 36c)

(SCRAMBLE ITEMS A-D)

Q21. And thinking about your most recent visit to shop for health insurance, how easy or difficult was it to compare the (INSERT ITEM) of different insurance plans? Would you say it was...?

(READ LIST)

- 1 Very easy
- 2 Somewhat easy
- 3 Somewhat difficult
- 4 Very difficult
- N (DO NOT READ) Impossible
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

- a. Benefits covered
- b. Premium costs
- c. Potential out of pocket costs from deductibles and co-pays
- d. Doctors, clinics, and hospitals included in the coverage

Q22 MOVED INTO Q21d
Q23 AND Q23a DELETED

(ACA Tracking Surveys October and December 2013, CW-7, 2014 Q24)

BASE: MARKETPLACE VISITORS (IF Q16=1)

(INSERT PARENS IF STATE IS KNOWN AND STATE HAS MARKETPLACE NAME)

Q24. Again, thinking about your most recent visit to shop for health insurance, overall, how would you describe your experience in trying to get health insurance through the marketplace (also known as INSERT STATE MARKETPLACE NAME) in your state? Would you say that your experience was ...?

(READ LIST)

- 1 Excellent
- 2 Good
- 3 Fair, or
- 4 Poor
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



(ACA Tracking Surveys, December 2013, modified CW3c)

BASE: MARKETPLACE VISITORS (IF Q16=1)

CW-3c. When you shopped for health insurance, did you ever receive any personal assistance to help you select an insurance plan? This could have included calling a telephone hotline, or getting help from an insurance broker, navigator, or in some other way.

- 1 Yes, received personal assistance
- 2 No, did not receive personal assistance
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey, December MODIFIED CW-7a, 2014 Q25 modified)

BASE: VISITED MARKETPLACE MORE THAN ONCE (ASK IF Q16b= 2)

(ROTATE 1-3/3-1; include rotate variable in data file)

Q25. You said that you visited the marketplace to shop for health insurance more than once since they opened. Thinking about your most recent shopping experience compared to the first time you shopped, did your experience in trying to get health insurance through the marketplace (also known as (INSERT STATE MARKETPLACE NAME) in your state (READ LIST)...?

- 1 Improve
- 2 Stay about the same
- 3 Get worse
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



III. ENROLLING IN A HEALTH PLAN

Q26A MOVED UP FROM AFTER Q26

(NEW)

BASE: Marketplace visitors and not currently covered with Marketplace or Medicaid coverage ((q16=1,3) AND (q13=D,R OR q13 IS NOT ASKED) AND (q14=D,R OR Q14 IS NOT ASKED))

Q26a. Are you currently enrolled in either a private health plan that you got through the marketplace, or in Medicaid?

(INTERVIEWER NOTE: If respondent says 'yes,' clarify if they currently enrolled in a 'private health plan' (CODE 1), 'Medicaid coverage' (CODE 2), currently enrolled in health insurance but don't know if it's a private plan or Medicaid' (CODE 4))

- 1 Yes, currently enrolled in a private health plan
- 2 Yes, currently enrolled in Medicaid
- 3 No, not currently enrolled in a private plan or Medicaid coverage}
- 4 (DO NOT READ) Yes, currently enrolled in health insurance through the Marketplace, not sure if it's a private plan or Medicaid
- 5 (DO NOT READ) Yes, enrolled in a private plan but did not get it through the marketplace
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(ACA Tracking Survey, December MODIFIED, 2014 Q26 modified)

BASE: Marketplace visitors but do not have current coverage through the marketplace (Q 26a=3, 5, D, R)

(IF Q16=3, SHOW: "or did someone else ever get" and "for you or your family"

Q26. Thinking over the last two years, when you visited the marketplace did you ever get) (or did someone else ever get) a private health plan or Medicaid coverage (for you or your family)?

(INTERVIEWER NOTE: If respondent says 'yes,' clarify if they got a 'private health plan' (CODE 1), 'Medicaid coverage' (CODE 2), got a health insurance but don't know if it's a private plan or Medicaid' (CODE 4))

- 1 Yes, got a private health plan
- 2 Yes, got Medicaid coverage
- 3 No, did not (get a private plan or Medicaid coverage)
- 4 (DO NOT READ) Yes, got health insurance, not sure if it's a private plan or Medicaid
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



Q26a MOVED TO BEFORE Q26

(NEW)

BASE: CURRENTLY HAVE PRIVATE PLAN OR MEDICAID (Q26a=1,2,4)

Q26b. How long have you have you had [If private health plan Q26a=1: health insurance through a private health plan that you purchased through the marketplace? (IF NECESSARY: This can include more than one plan)] [If Medicaid Q26a=2; your Medicaid coverage?] [If Q26a=4, this health insurance?]

(READ LIST)

- 1 3 months or less
- 2 4 months or more.
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

BASE: HAVE PRIVATE PLAN OR MEDICAID FOR FOUR MONTHS OR MORE (Q26b=2)

Q26bb. Did you get (IF Q26a=1: your health coverage through the marketplace) (IF Q26a=2: your Medicaid coverage) (IF Q26a=4: this health insurance) on or after January first, 2015?

- 1 Yes, got coverage on/after January 1, 2015
- 2 No, got coverage before January 1, 2015
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q27 AND Q27A HAVE BEEN MOVED UP FROM LATER AND MODIFIED

(ACA Tracking Survey 2014 Q26b modified)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN (Q26A=1) OR HAS MARKETPLACE PLAN AS MAIN PLAN (q14=1,2,3,4)

Q27. Do you receive financial assistance to help pay for your health plan?

- 1 Yes, receive financial assistance
- 2 No, do not receive financial assistance
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



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(ACA Tracking Survey 2014 Q27a modified base)

**BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN (Q26A=1) OR
(q14=1,2,3, 4)**

Q27a. Health plans are sold at four different levels of coverage: bronze, silver, gold, and platinum. And some people including young people under 30 may be able to purchase a catastrophic plan. What level of coverage do you have? Do you have a...?

(READ LIST. ENTER ONE ONLY)

- 1 Bronze plan
- 2 Silver plan
- 3 Gold plan
- 4 Platinum plan or a
- 5 Catastrophic plan



INSURANCE COVERAGE PRIOR TO MARKETPLACE OR MEDICAID

(ACA Tracking Survey 2014 Q18 modified)

BASE: CURRENTLY HAS MARKETPLACE COVERAGE OR MEDICAID FOR LESS THAN 2 YEARS (Q26a = 1,2,4 or q13=1,2,3 or q14=1,2,3,4)

Q18. Before you got your marketplace or Medicaid coverage, were you uninsured or did you have health insurance?

- 1 Uninsured
- 2 Had health insurance
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q18a modified)

BASE: INSURED WHEN OBTAINED COVERAGE (If Q18=2)

ASK ITEM B IF Q18=2 AND (Q26a=2,4 OR Q13=1,2,3)

ASK ITEM D IF Q18=2 AND (Q26a=1,4 OR Q14=1,2,3, 4)

Q18a. What type of health insurance did you have prior to getting your Marketplace or Medicaid coverage? Did you have (INSERT ITEM)?

(INTERVIEWER: IF RESPONDENT TRIES TO SAY THE TYPE OF INSURANCE 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. Please just tell me "no" if you did not have this type)

PLEASE SHOW THIS INTERVIEWER NOTE IF Q18=2 AND (Q26a=2,4 OR Q13=1,2,3)(INTERVIEWER: IF RESPONDENT SAYS THAT THEY HAD A DIFFERENT MEDICAID BEFORE THEIR CURRENT MEDICAID SAY: And what type of health insurance did you have before getting any Medicaid coverage?)

PLEASE SHOW THIS INTERVIEWER NOTE IF Q18=2 AND (Q26a=1,4 OR Q14=1,2,3, 4 (INTERVIEWER: IF RESPONDENT SAYS THAT THEY HAD A DIFFERENT MARKETPLACE PLAN BEFORE THEIR CURRENT MARKETPLACE PLAN SAY: And what type of health insurance did you have before getting any health plan through the marketplace?)

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

- a. Health insurance offered through an employer or union. This could be insurance through a current or former job, your job or someone else's job.
- d. Medicaid [IF STATE SPECIFIC NAME FOR MEDICAID IS NOT MEDICAID INSERT: also known in your state as [state specific Medicaid program]



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- b. A health insurance plan that you signed up for through a health insurance marketplace (also known as INSERT STATE MARKETPLACE NAME in your state or) Healthcare DOT gov, created by the Affordable Care Act.
(INTERVIEWER NOTE: If respondent says do you mean Obamacare, then say: "It is sometimes referred to as Obamacare.")
- c. A health insurance plan that you bought directly from an insurance company.
- e. Health insurance through ANY other source, including military or veteran's coverage

(ACA Tracking Survey 2014 Q18b)

BASE: UNINSURED WHEN OBTAINED MARKETPLACE OR MEDICAID (If Q18=1)

Q18b. At the time you got your marketplace or Medicaid coverage how long had you been uninsured?

(READ LIST ONLY IF NECESSARY)

- 1 Three months or less
- 2 Four months to six months
- 3 Seven months to 11 months
- 4 One to two years
- 5 More than two years
- 6 (DO NOT READ) Never had health insurance
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: CURRENTLY HAS MEDICAID, HAD MARKETPLACE BEFORE

Q19. You said that you had Marketplace coverage prior to enrolling in Medicaid. When you switched to Medicaid, were you able to keep seeing your doctors from your prior plan? Would you say you were able to keep seeing all of your doctors, some of your doctors, or were you unable to keep seeing any of your doctors from your prior plan?

- 1 Was able to keep seeing all of my doctors under my Medicaid plan.
- 2 Was able to keep seeing some of my doctors under my Medicaid plan.
- 3 Wasn't able to keep seeing any of my doctors under my Medicaid plan.
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(NEW)

BASE: CURRENTLY HAS MARKETPLACE COVERAGE AND HAD MEDICAID BEFORE (Q18a d=1)

Q19a. You said that you had Medicaid coverage prior to obtaining your marketplace plan. When you switched to your marketplace plan, were you able to keep seeing your doctors from your prior plan? Would you say you were able to keep seeing all of your doctors, some of your doctors, or were you unable to keep seeing any of your doctors from your prior plan?

- 1 Was able to keep seeing all of my doctors under my Marketplace plan.
- 2 Was able to keep seeing some of my doctors under my Marketplace plan.
- 3 Wasn't able to keep seeing any of my doctors under my Marketplace plan.
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: HAS MARKETPLACE OR MEDICAID AND ANSWERS Q18 (Q18=1,2)

ROTATE CODES 1-4/4-1, INCLUDE ROTATE VARIABLE IN DATA FILE

Q19aa. [IF Q18=2 INSERT Since you switched] [IF Q18=1 INSERT Since you gained] your insurance how satisfied are you with the doctors covered by your new insurance? Would you say you are...?

(READ LIST. ENTER ONE ONLY)

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Not very satisfied
- 4 Not at all satisfied
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: HAS MARKETPLACE OR MEDICAID AND ANSWERS Q18 (Q18=1,2)

(ROTATE CODES 1 AND 3)

19b. [IF Q18=2 INSERT Since you switched] [IF Q18=1 INSERT Since you gained] health insurance, would you say your ability to get the health care that you need has (improved), stayed the same, or (gotten worse)?

(READ LIST)

- 1 (Improved)
- 2 Stayed the same
- 3 (Gotten worse)
- 4 (DO NOT READ) I have not tried to get care
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(NEW)

BASE: OBTAINED MARKETPLACE COVERAGE BUT IS NOT CURRENTLY ENROLLED (Q26=1 AND Q26a=3)

(SCRAMBLE ITEMS a-f. ASK g LAST)

Q26c. You said you previously got a health plan through the marketplace, but you are not currently enrolled in a plan through the marketplace. Why are you no longer enrolled in your marketplace plan? Is it because...INSERT ITEM

(READ AS NEEDED: Was this a reason you did not renew your coverage?)

- 1 Yes
 - 2 No
 - D Don't Know
 - R Refused
-
- a. You gained some other type of health insurance
 - c. You missed the deadline to sign up for coverage
 - d. Your health plan premium was too expensive
 - e. Your deductible or co-pays were too high
 - f. You couldn't get the health care you needed
 - g. Of some other reason [SPECIFY]

(NEW)

BASE: CURRENTLY HAS MARKETPLACE PRIVATE PLAN AND HAS HAD IT SINCE BEFORE JAN 2015 (Q26A=1 AND Q26BB=2, D, R) OR Q14A=2,D,R OR Q14=3,4

Q26d. Thinking back over the time you have had your marketplace coverage, have you had the same plan the whole time or have you changed plans?

- 1 Same plan
- 2 Changed Plans
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND HAS SAME PLAN (Q26d=1)

Q26e. Did you recently have the option to change plans?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



(NEW)

**BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND
CHANGED PLANS OR HAD OPTION TO CHANGE (Q26D=2 OR Q26E=1)**

26f. Over the time you have had a health plan through the marketplace, has the amount you have to pay in premiums for your (IF 26E=1 INSERT health plan/IF 26D=2 INSERT health plans) increased, decreased, or did it stay about the same?

- 1 Increased
- 2 Decreased
- 3 Stayed about the same
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

**BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND
CHANGED PLANS OR HAD OPTION TO CHANGE (Q26D=2 OR Q26E=1)**

Q26g. A deductible is the amount you have to pay before your insurance plan will start paying any of your medical bills. Does your marketplace plan have a deductible?

(IF Respondent confuses deductible and co-pay, say: A co-pay is the payment for a doctor visit or other medical service and a deductible is the amount you pay before your insurance plan will start paying any part of your medical bills)

- 1 Yes
- 2 No
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

**BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND
CHANGED PLANS OR HAD OPTION TO CHANGE AND MARKETPLACE
PLAN HAS A DEDUCTIBLE (Q26g=1)**

Q26h. Over the time you have had a health plan through the marketplace, has your deductible amount) increased, decreased or has it stayed about the same?

- 1 Increased
- 2 Decreased
- 3 Stayed about the same.
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



(NEW)

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND CHANGED PLANS OR HAD OPTION TO CHANGE AND MARKETPLACE PLAN DOES NOT HAVE A DEDUCTIBLE (Q26g=2)

Q26hh. Over the time you have had a health plan through the marketplace, have you ever had a deductible?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND CHANGED PLANS OR HAD OPTION TO CHANGE (Q26D=2 OR Q26E=1)

Q26i Over the time you have had a health plan through the marketplace, have the co-pays or co-insurance for doctor visits increased, decreased, or did they stay about the same?

(IF Respondent confuses deductible and co-pay, say: A co-pay is the payment for a doctor visit or other medical service and a deductible is the amount you pay before your insurance plan will start paying any part of your medical bills)

- 1 Increased
- 2 Decreased
- 3 Stayed about the same
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused

(NEW)

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND CHANGED PLANS OR HAD OPTION TO CHANGE (Q26D=2 OR Q26E=1)

Q26j. Over the time you have had a health plan through the marketplace, have the co-pays or co-insurance for prescription drugs increased, decreased, or did they stay about the same?

- 1 Increased
- 2 Decreased
- 3 Stayed about the same
- D (DO NOT READ) Don't Know
- R (DO NOT READ) Refused



(NEW)

(SCRAMBLE ITEMS A-E. ASK F LAST)

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND HAS SAME PLAN AND HAD OPTION TO CHANGE (Q26E=1)

Q26k. You said you had the option to change plans recently. What are the reasons you kept the same plan?

Was it because...INSERT ITEM

(READ AS NEEDED: Was this a reason you re-enrolled in the same plan?)

- 1 Yes
 - 2 No
 - D Don't Know
 - R Refused
-
- a. You are satisfied with your plan
 - b. You like your doctors and didn't want to change
 - c. It was easier to stay in your plan.
 - f. Of some other reason [SPECIFY]

(NEW)

(SCRAMBLE ITEMS A-E) ASK F LAST

BASE: COVERED BY MARKETPLACE PLAN SINCE BEFORE JAN 2015 AND CHANGED PLANS (Q26D=2)

Q26l. What are the reasons why you changed plans? Was it because...INSERT ITEM

(READ AS NEEDED: Was this a reason you enrolled in a new plan?)

- 1 Yes
 - 2 No
 - D Don't Know
 - R Refused
-
- a. Your old plan was no longer being offered
 - b. Your new plan has a lower premium than your old plan
 - c. Your new plan has a lower deductible than your old plan
 - d. Your new plan has more of the doctors or hospitals you want
 - f. of some other reason..(SPECIFY)

Q27 Q27A HAVE BEEN MOVED UP TO AFTER q26B



(ACA Tracking Survey 2014 Q27b)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN FOR 3 MONTHS OR LESS OR ENROLLED BEFORE JAN 2015 AND CHANGED PLANS

((q26a=1,4 and (q26B=1 or q26BB=1)) OR (q14=1 OR q14A=1) OR (q26D=2)

Q27b. While choosing your new plan, what was the most important factor in your decision about which plan to select? Would you say it was...?

(READ LIST. ENTER ONE ONLY)?

(RANDOMIZE CODES 1-3)

- 1 The amount of the premium
- 2 The amount of the deductible and other copayments
- 3 That your preferred doctor, health clinic or hospital is included in your plan's network
- 5 (DO NOT READ) Signed up through insurance company directly (Did not formally select a plan)
- 7 Other [SPECIFY] _____
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q27c DELETED

(ACA Tracking Survey 2014 Q27d)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN FOR 3 MONTHS OR LESS OR ENROLLED BEFORE JAN 2015 AND CHANGED PLANS ((Q26a=1,4 and (q26B=1 or q26BB=1)) OR (q14=1 OR q14A=1) OR (Q26d=2)

Q27d. Some health plans provide more limited choices for doctors, clinics, and hospitals and charge lower premiums than plans with a larger selection of doctors and hospitals. While choosing your new plan, did you have the option of choosing a less expensive plan with fewer doctors or fewer hospitals?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q27d1)

BASE: OPTION OF PURCHASING LESS EXPENSIVE PLAN (IF Q27d=1)

Q27d1. Did you select the less expensive plan with fewer doctors or hospitals?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(ACA Tracking Surveys October and December 2013 CW-10, 2014 Q27e MODIFIED)

BASE: CURRENTLY HAVE MARKETPLACE OR MEDICAID COVERAGE AND HAVE HAD IT FOR 3 MONTHS OR LESS OR HAVE MARKETPLACE COVERAGE BEFORE JAN 2015 AND CHANGED PLANS (Q26b=1 OR Q26BB=1) OR (q13=1 or Q13A=1) OR (q14=1 OR Q14A=1) OR (Q26d=2)

Q27e. Does the plan you recently obtained or your new Medicaid coverage include all, some, or none of the doctors that you **wanted** OR do you not know which doctors are included on your plan?

(ENTER ONE ONLY)

(INTERVIEWER NOTE: IF THE RESPONDENT SAYS THAT PLAN INCLUDES AT LEAST ONE DOCTOR, PLEASE SELECT CODE 2)

- 1 All of the doctors you wanted
- 2 Some of the doctors you wanted
- 3 None of the doctors you wanted
- D Don't know which doctors are included on plan/through Medicaid
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q27f)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID (MEDICAID <2 YEARS) YEARS (Q26A=1,2,4) or Q13=1,2,3 OR Q14=1,2,3, 4

Q27f. Over the time that you have had your health coverage through the marketplace or Medicaid, have you used this coverage to visit a doctor, hospital, or other health care provider, or to pay for prescription drugs?

- 1 Yes
- 2 No
- 3 (DO NOT READ) Plan has not yet gone into effect
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q27g)

BASE: HAS USED NEW HEALTH INSURANCE PLAN (Q27f=1)

Q27g. Prior to getting this coverage, would you have been able to access and/or afford this care?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Gen Pop 2011, 2012 Q15 MODIFIED, ACA Tracking Survey 2014 Q28)



**BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID
(MEDICAID <2 YEARS) (Q26A=1,2,4) OR Q13=1,2,3 OR Q14=1,2,3,4**

Q28. Over the time that you have had your health coverage through the marketplace or Medicaid, have you tried to find a new primary care doctor or general doctor?

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Gen Pop 2011,2012 Q16, ACA Tracking Survey 2014 Q28a)

BASE: TRIED TO FIND NEW DOCTOR (IF Q28 = 1)

(ROTATE SAME ORDER FOR Q20, Q21, Q22, Q23a, 28a, 36c)

Q28a. How easy or difficult was it for you to find a new primary care doctor or general doctor? Was it...?

(READ LIST. ENTER ONE ONLY)

- 1 Very easy
- 2 Somewhat easy
- 3 Somewhat difficult
- 4 Very difficult, or
- 5 Could you not find a doctor
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Gen Pop 2011 Q17; ACA Tracking Survey 2014 Q28b)

BASE: TRIED TO FIND A NEW DOCTOR (IF Q28=1 AND Q28a = 1,2,3,4, D, R)

Q28b. How long did you have to wait to get your first appointment to see this doctor? Were you able to get your appointment (READ LIST. ENTER ONE ONLY)

- 1 Within one week
- 2 In 8 to 14 days
- 3 In 15 days to 30 days
- 4 After more than 30 days to 6 weeks
- 5 After more than 6 weeks
- 6 (DO NOT READ) Have not tried to make an appointment
- 7 (DO NOT READ) Have not been able to get/or still waiting for an appointment
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(Gen Pop 2011 Q19 MODIFIED; ACA Tracking Survey 2014 Q29)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID (MEDICAID <2 YEARS) (Q26A=1,2,4) OR Q13=1,2,3 OR Q14=1,2,3, 4

Q29. Over the time that you have had your health coverage through the marketplace or Medicaid, have you seen or needed to see any specialist doctors? By Specialist we mean doctors like surgeons, heart or allergy doctors that specialize in one area of health care.

- 1 Yes
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q 29a. DELETED

(Gen Pop 2011 Q20 modified skip (ACA Tracking Survey 2014 Q29b)

BASE: NEEDED TO SEE SPECIALIST (IF Q29=1)

Q29b. How long did you have to wait to get your first appointment to see this specialist? Were you able to get your appointment?
(READ LIST. ENTER ONE ONLY)

[INTERVIEWER NOTE: IF RESPONDENT SAYS HAS SEEN MORE THAN ONE SPECIALIST, ASK ABOUT THE MOST RECENT TIME]
[INTERVIEWER NOTE: IF RESPONDENT HAS SEEN SPECIALIST BEFORE "First appointment refers to the first appointment since you got your new health plan."]

- 1 Within one week
- 2 In 8 to 14 days
- 3 In 15 days to 30 days
- 4 After more than 30 days to 6 weeks
- 5 After more than 6 weeks
- 6 (DO NOT READ) Have not tried to make an appointment
- 7 (DO NOT READ) Have not been able to get/or still waiting for an appointment
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(ACA Tracking Surveys October and December 2013, CW-11, 2014 Q30)

BASE: CURRENTLY ENROLLED IN MARKETPLACE OR MEDICAID FOR 3 MONTHS OR LESS (Q26B=1 OR Q26BB=1) OR (Q13=1 OR Q13A=1) OR (Q14=1 OR Q14A=1)

(ROTATE 1-4/4-1)

(ROTATE SAME ORDER FOR Q30, Q 31C)

Q30. Overall, how optimistic are you that your new health insurance is going to improve your ability to get the health care that you need? Are you...?

(READ LIST. ENTER ONE ONLY)

- 1 Very optimistic
- 2 Somewhat optimistic
- 3 Not very optimistic
- 4 Not at all optimistic
- 5 (DO NOT READ) Depends
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 Q31a)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID(MEDICAID <2 YEARS) (Q26A=1,2,4) OR Q13=1,2,3 OR Q14=1,2,3,4

(ROTATE VERBIAGE IN PARENS AND RESPONSE OPTIONS IN SAME ORDER)

Q31a. Since obtaining Medicaid or health coverage through the marketplace, would you say you are (better off now) or (worse off now) than you were before you had this coverage, or has there been no effect?

(ENTER ONE ONLY)

- 1 Better off
- 2 Worse off
- 3 Had no effect
- 4 (DO NOT READ) Too soon to tell
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q31b. DELETED



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(ACA Tracking Survey 2014 Q31c)

**BASE: NOW INSURED OR CURRENTLY ENROLLED IN MARKETPLACE PLAN OR
MEDICAID (Q26A=1,2,4 or**

(Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 OR Q10f=1) OR Q11=2)

(ROTATE 1-4/4-1)

(ROTATE SAME ORDER FOR Q30, Q 31C)

Q31c. Overall, how satisfied are you with your health insurance? Would you say you are...?

(READ LIST. ENTER ONE ONLY)

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Not very satisfied
- 4 Not at all satisfied
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q32 DELETED



IV. NOT ENROLLING IN A HEALTH PLAN

(ACA Tracking Surveys October and December 2013 CW-12 MODIFIED; 2014 Q33)

BASE: VISITED MARKETPLACE BUT DID NOT SELECT COVERAGE (Q16=1 AND Q26=3)

(SCRAMBLE ITEMS a-g; ALWAYS ASK ITEM h LAST)

Q33. Can you tell me why you did not obtain a private health insurance plan or Medicaid coverage when you visited the marketplace? Was it because (INSERT ITEM)?

(READ AS NEEDED: Was this a reason why you didn't select a health insurance plan or enroll in Medicaid?)

- 1 Yes
- 2 No
- D Don't know
- R Refused

- a. You found the process of enrolling in a plan difficult or confusing
- b. You didn't know where to get help to sign up
- c. You were not eligible to enroll in Medicaid or for financial assistance
- d. You could not find a plan with the type of coverage you need
- e. You could not find a plan you could afford
- f. You obtained health insurance through another source
- g. You decided you didn't need health insurance
- h. Of some other reason (Specify)

Q34 DELETED

Q19 DELETED



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*(Biennial Trend 2001 Q27, 2003 Q17, 2005 Q25, 2007 Q19, 2010 Q20, 2012 Q23;
ACA Tracking Surveys 2013 Q21, 2014 Q35)*

**BASE: NOW INSURED OR CURRENTLY ENROLLED IN MARKETPLACE PLAN OR
MEDICAID (Q26A=1,2,4 or (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1
OR Q10e=1 OR Q10f=1) OR Q11=2)**

(PN: IF YES TO ONLY ONE (Q10a-Q10e) INSERT: “your health insurance coverage”)

IF YES TO MORE THAN ONE (Q10a-Q10e) INSERT: “all the health insurance you have combined”)

IF Q26=1,2,4 or Q26b=1 INSERT: “your health insurance coverage”

(PN: SHOW CODE 7 IF Q.26=1,2,4)

Q35. Now thinking about (your health insurance coverage/all the health insurance you have combined), how would you rate it? Would you say it is excellent, very good, good, fair, or poor?
(ENTER ONE ONLY)

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 6 (DO NOT READ) Too soon to tell
- 7 (DO NOT READ) Currently uninsured/new plan has not yet taken effect
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q22-Q26 DELETED



2015 TAX SEASON

(NEW)

BASE: ALL RESPONDENTS

Q35aa. Now on a different topic, do you file federal income taxes?

- 1. Yes
- 2. No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: FILE FEDERAL INCOME TAXES (Q35aa=1)

Q35aaa. Have you started to work on your 2014 taxes?

- 1. Yes
- 2. No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: WORKING ON 2014 Taxes Q35aaa=1

Q35aaaa. Starting in tax year 2014, everyone is required to show that they have health insurance on their tax returns. How easy or difficult has it been for you to complete this section of your taxes? Is it ...READ LIST

- 1. Very easy
- 2. Somewhat easy
- 3. Somewhat difficult
- 4. Very difficult
- 5. (DO NOT READ) I have not started working on my taxes or filed my taxes yet/I don't file my own taxes
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(NEW)

BASE: WORKING ON TAXES AND RECEIVE FINANCIAL ASSISTANCE FOR MARKETPLACE COVERAGE (Q35aaa=1 and q27=1)

Q35bb. You said that you are receiving financial assistance for the health plan you obtained through the marketplace. Are you aware that all recipients of such financial assistance must fill out a special tax form?

(IF NECESSARY: The financial assistance is called premium tax credits.)

(IF NECESSARY: The special tax forms are called 1095A forms and the Federal government has been mailing these out with information about how to file returns).

- 1. Yes
- 2. No
- 3. (DO NOT READ) I have not started working on my taxes or filed my taxes yet/I don't file my own taxes
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(NEW)

BASE: IS AWARE OF TAX FORM FOR PREMIUM TAX CREDITS q35bb=1

Q35bbb. How easy or difficult has it been for you to complete this form? Is it ... (READ LIST)..?

- 1. Very easy
- 2. Somewhat easy
- 3. Somewhat difficult
- 4. Very difficult
- 5. (DO NOT READ) I have not started working on my taxes or filed my taxes yet/I don't file my own taxes
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

INDIVIDUAL COVERAGE

Q35b AND Q35c DELETED



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AFFORDABILITY AND QUALITY OF INSURANCE

(Biennial Trend 2001 Q50, 2003 Q30, 2005 Q47, 2007 Q37, 2010 Q34, modified to ask of ALL insured, 2012 Q37; ACA Tracking Surveys 2013 Q29, 2014 Q36 modified)

BASE: NOW INSURED OR CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID (Q26A=1,2,4 or (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 or Q10f=1) OR Q11=2

Q36. Now I want to ask you some questions about what you pay for your health insurance. Do you pay ALL or SOME of the premium for your MAIN health plan, or do you pay nothing to have this health insurance?

(PN: SHOW NOTE BELOW IF Q.26=1,2,4)

(IF RESPONDENT SAYS THAT THEY HAVE NOT STARTED PAYING THE PREMIUM YET, ASK "Will you pay ALL of the premium your health plan, pay SOME of the premium, or will you pay nothing to have this health insurance plan (through the Marketplace)?")

(IF RESPONDENT SAYS THEY ARE COVERED BY SOMEONE ELSE'S INSURANCE, SAY: Do you happen to know if the main policyholder pays ALL, SOME or NOTHING to have that health insurance plan?)

(IF RESPONDENT SAYS THEY PAY NOTHING, SAY: Is that because the main policyholder pays ALL, SOME or NOTHING to have that health insurance plan)

- 1 Pay all or some of the premium
- 2 Pay nothing
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Underinsured Tracking Survey, Sept 2014 CW11a)

BASE: PAYS NOTHING FOR PLAN OR DK/REF (IF Q36=2, D, R)

Q36_1. Does someone else in your family pay a premium for your MAIN health plan?

(INTERVIEWER NOTE: This premium amount includes money deducted from a paycheck, as well as money paid directly to the insurance company. If you receive government financial assistance, this amount is just the amount that you are responsible for paying.)

- 1 Yes
- 2 No
- D Don't know
- R Refused



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*(Biennial Trend 2001 Q51, 2003 Q31, 2005 Q48, 2007 Q38, 2010 Q35, 2012 W38;
ACA Tracking Surveys 2013 MODIFIED Q30, 2014 Q36a)*

**BASE: ANSWERS PREMIUM QUESTION AND HAS FAMILY (Q36=1,2 AND
Q5=1,2)**

(IF Q36=1 OR 2, INCLUDE VERBIAGE IN PARENS)

Q.36a. Is this (premium amount just for you, that is,) coverage for a single person,
or is it for a family plan?

(INTERVIEWER NOTE: Code any insurance that covers more than just the
respondent alone as a family plan "2")

(INTERVIEWER NOTE: Even if the respondent does not pay for the premium,
probe to find if the coverage is for single person or family.)

- 1 Own coverage only/Individual plan
- 2 Family plan (includes plans that cover spouse, children and any others)
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(Biennial Trend 2005 Q53, 2007 Q42, 2010 Q39, 2012 Q42; ACA Tracking Surveys 2013 Q34, 2014 Q36b)

BASE: PAYS ALL OR SOME OF PREMIUM (Q36=1 OR 36 1=1)

IF Q36=1, insert "do you pay"

IF Q36_1=1, insert "does someone else in your family pay"

Q36b. About how much (do you/does someone else in your family pay) pay every month in premiums on this plan including any amount deducted from a paycheck? Do you pay...?

(PN: SHOW NOTE BELOW IF Q.26=1,2,4)

(IF RESPONDENT SAYS THAT THEY HAVE NOT STARTED PAYING THE PREMIUM YET, ASK "How much will you pay every month in premiums on this plan including any amount deducted from a paycheck? Will you pay...?")

(READ LIST. ENTER ONE ONLY)?

(IF NECESSARY, READ: This amount is the premium you pay for the whole plan, even if it also covers other family members.)

(PROBE DON'T KNOW: Your best guess is fine)

- 1 Less than \$40
- 2 \$40 to under \$125
- 3 \$125 to under \$250
- 4 \$250 to under \$400
- 5 \$400 to under \$500
- 6 \$500 to under \$700 OR
- 7 \$700 or more
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Gen Pop 2011, 2012 Q58, ACA Tracking Surveys 2014 Q36c)

BASE: PAYS ALL OR SOME OF PREMIUM (Q36=1 or Q36 1=1)

(ROTATE SAME ORDER FOR Q20, Q21, Q22, Q23a, 28a, 36c)

(IF Q36=1 INSERT: you)

(IF Q36_1=1 INSERT: the person paying the premium)

Q36c. How easy or difficult is it for (you/the person paying your premium) to afford the premium costs for your health insurance?

(READ LIST)

- 1 Very easy
- 2 Somewhat easy
- 3 Somewhat difficult
- 4 Very difficult
- N (DO NOT READ) Impossible
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



Q36 DELETED

(Biennial Trend 2003 Q43, 2005 Q60, 2007 Q46, 2010 Q43, 2012 Q46; ACA Tracking Surveys 2013 Q39, 2014 Q37)

BASE: NOW INSURED OR CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID (Q26A=1,2,4 or (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 or Q10f=1) OR Q11=2

Q37. [IF Q26g=2,D,R: "A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. Does your health plan have a deductible?"]

[IF Q26g=1: "Can I confirm that your health plan has a deductible?"]

(PN: SHOW NOTE BELOW IF Q.26=1,2,4)

(IF RESPONDENT SAYS HE/SHE IS CURRENTLY UNINSURED, ASK: "Does your new health plan through the Marketplace have a deductible?")

(IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY, SAY: A co-pay is payment for a doctor visit or other medical service and a deductible is the amount you pay before your insurance plan will start paying any part of your medical bills.)

- 1 Yes
- 2 No
- 3 (DO NOT READ) Yes, for going outside the network
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Biennial Trend 2005 Q61, 2007 Q47, 2010 Q44, 2012 Q47; ACA Tracking Surveys 2013 Q40, 2014 Q38)

BASE: HEALTH PLAN HAS A DEDUCTIBLE (Q37=1)

Q38. What is your annual deductible per person?
(READ LIST ONLY IF NECESSARY)

(IF PERSON ASKS WHETHER IN-NETWORK OR OUT-OF-NETWORK, SAY:
in-network)

(PROBE DON'T KNOW: Your best guess is fine)

- 1 Less than \$100
- 2 \$100 to under \$500
- 3 \$500 to under \$1,000
- 4 \$1,000 to under \$2,000
- 5 \$2,000 to under \$3,000
- 6 \$3,000 to under \$5,000 OR
- 7 \$5,000 or more per person
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(Gen. Pop. 2012; ACA Tracking Surveys 2013 Q41, 2014 Q39)

BASE: DON'T KNOW OR REFUSED DEDUCTIBLE (Q.38= D or R)

Q39. Your best guess is fine, would you say your annual deductible is less than \$1,000 or \$1,000 or more per person?

- 1 Less than \$1000
- 2 \$1000 or more
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

Q.42-Q43. DELETED

HEALTH STATUS AND CHRONIC CONDITIONS

(Biennial Trend 2001 Q66, 2003 Q46, 2005 Q68, 2007 Q54, 2010 Q52, 2012 Q58; ACA Tracking Surveys 2013 Q44, 2014 Q40)

BASE: ALL QUALIFIED RESPONDENTS

Q40. On a slightly different topic...In general, how would you describe your own health? Would you say it is excellent, very good, good, fair, or poor?
(ENTER ONE ONLY)

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(Biennial Trend 2007 Q56 with modified programming instruction, 2010 Q54 modified, 2012 Q60; ACA Tracking Surveys 2013 Q45, 2014 Q41)

(item a: Biennial Trend 2007 Q56a, 2010 Q54a, 2012 Q60a; Marketplace 2013)

(item b: Biennial Trend 2007 Q56b-c modified, 2010 Q54b modified, 2012 Q60b; Marketplace 2013)

(item c: (Biennial Trend 2001 Q68 modified, 2003 Q48 modified, 2005 Q70, 2007 Q56d, 2010 Q54c, 2012 Q60c; Marketplace 2013)

(item d: Biennial Trend 2001 Q68 modified, 2003 Q48 modified, 2005 Q70, 2007 Q56e, 2010 Q54d, 2012 Q60d; Marketplace 2013)

(item e: Biennial 2010 Q54e, 2012 Q60e; Marketplace 2013)

(item f: ; Marketplace 2013)

(item g: ; Marketplace 2013)

BASE: ALL QUALIFIED RESPONDENTS

(PN: FOR FIRST ITEM INSERT: "first")

(PN: FOR REMAINING ITEMS INSERT: "what about")

(SCRAMBLE ITEMS a-f)

Q41. Has a doctor or another health professional told you that you have any of the following health problems or conditions? (First,/What about) (INSERT ITEM)?

(READ AS NECESSARY: Has a doctor or another health professional told you that you have that?)

- 1 Yes
 - 2 No
 - D (DO NOT READ) Don't know
 - R (DO NOT READ) Refused
-
- a. Hypertension or high blood pressure
 - b. Heart disease
 - c. Diabetes
 - d. Asthma, emphysema, or lung disease
 - e. High cholesterol
 - f. Depression or anxiety

Q47-Q53 DELETED

Q61 DELETED

Q42, Q42a, Q42b, Q43, Q44 DELETED



FACTUALS AND DEMOGRAPHICS

Finally, I have a few more questions so we can describe the people who took part in our survey...

(Biennial Trend 2001 D4, 2003 D4, 2005 D4, 2007 D4, 2010 D4, 2012 D4; ACA Tracking Surveys 2013, 2014 D4)

BASE: ALL QUALIFIED RESPONDENTS

D4. Are you now employed full-time, part-time, are you retired, are you unemployed but looking for work, or are you not employed for pay?

(INTERVIEWER NOTE: Employed full-time is defined as 30 hours or more per week. If less than 30 hours, code as part-time)

(IF RESPONDENT SAYS THEY ARE SELF-EMPLOYED, PROBE WITH: "Are you self-employed working full-time hours or part-time hours?")

- 01 Employed full-time
- 02 Employed part-time
- 03 Retired
- 04 Unemployed, but looking for work
- 05 Not employed for pay
- 06 (DO NOT READ) Disabled
- 07 (DO NOT READ) Student
- 08 (DO NOT READ) Other (homemaker, etc.)
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

(Biennial Trend 2001 D5, 2003 D5, 2005 D6, 2007 D6, 2010 D6, 2012 D6; ACA Tracking Surveys 2013, 2014 D6)

BASE: EMPLOYED FULL OR PART-TIME (D4=1,2)

D6. Are you now SELF employed or are you employed by someone else?

(IF RESPONDENT HAS MORE THAN ONE JOB, READ: Please think about your MAIN job, where you work the most hours)

- 1 Self-employed
- 2 Employed by someone else
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



(ACA Tracking Survey 2014 Q32 modified)

BASE: CURRENTLY ENROLLED IN MARKETPLACE PLAN OR MEDICAID OR HAS MARKETPLACE OR MEDICAID FOR LESS THAN 2 YEARS (Q26A=1,2,4 OR Q13=1,2,3 OR Q14=1,2,3, 4) AND D4=1,2

(SCRAMBLE ITEMS a-e)

Q32. Over the time you have had Medicaid or health insurance through the marketplace, have you considered making any of the following lifestyle changes? Have you considered...INSERT ITEM

- 1 Yes
- 2 No
- 3 (DO NOT READ) Haven't thought about it
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

- a. Switching jobs
- b. Reducing the number of hours you work during the week
- c. Starting your own business
- d. Retiring before age 65
- e. Going back to school.

D6a, D7, D8, D9, D9a, D9b, D9c DELETED

(Biennial Trend 2003 D6, 2005 D8, 2007 D8 modified, 2010 D10 modified response cats, 2012 D10 modified response cats; ACA Tracking Surveys 2013, 2014 D10)

BASE: EMPLOYED FULL- OR PART-TIME (D4=1, 2)

D10. Including all its locations and worksites, not just your own, about how many people are employed by your company or organization? Just stop me when I get to the right category. Would you say there are...?
(READ LIST. ENTER ONE ONLY)

- 1 10 employees or less
- 2 11 to less than 25 employees
- 3 25 to less than 50 employees
- 4 50 to less than 100 employees
- 5 100 to less than 500 employees
- 6 500 to less than 1,000 employees
- 7 1,000 or more employees?
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

D11 DELETED

D14a, D14b, D14c DELETED



D15 DELETED

D16 DELETED

(Biennial Trend 2003 D15, 2005 D15, 2007 D15, 2010 EDUC, 2012 EDUC; ACA Tracking Surveys 2013, 2014 EDUC)

BASE: ALL QUALIFIED RESPONDENTS

EDUC. What is the last grade or class that you completed in school?
(DO NOT READ LIST; PROBE FOR CLARITY IF NECESSARY)

- 1 Less than high school (grades 1-11, grade 12 but no diploma)
- 2 High school graduate or equivalent (e.g. GED)
- 3 Some college but no degree (incl. 2 year occupational or vocational programs)
- 4 College graduate (e.g. BA, AB, BS)
- 5 Postgraduate (e.g. MA, MS, MEng, Med, MSW, MBA, MD, DDs, PhD, JD, LLB, DVM)
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Biennial 2012 HH1; Marketplace 2013)

(PN: FOR LANDLINE SAMPLE, RANGE SHOULD START WITH RESPONSE IN HH19TO64)

BASE: ALL QUALIFIED RESPONDENTS

HH1. How many people, including yourself, live in your household?

(INTERVIEWER NOTE: HOUSEHOLD MEMBERS INCLUDE PEOPLE WHO THINK OF THIS HOUSEHOLD AS THEIR PRIMARY PLACE OF RESIDENCE, INCLUDING THOSE WHO ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR AWAY AT SCHOOL. THIS INCLUDES INFANTS, CHILDREN AND ADULTS.)

_____ (ENTER NUMBER) (RANGE: 1-10)

- 97 11 or more
- 99 Don't know/Refused



(ASK IF HH1>1 OR RR)

(PN: GEN IN '0' IF HH1=1)

CHILDHH. How many children, under age 19, are living in your household?

_____ (ENTER NUMBER) (RANGE 0- (HH1-1))

D (DO NOT READ) Don't know

R (DO NOT READ) Refused

(ASK IF CHILDHH > 0)

(ASK IF KIDS IN HH)

PARENT. Are you the parent or guardian of any of those children, or not?

1 Yes

2 No

D (DO NOT READ) Don't know

R (DO NOT READ) Refused

(ASK IF PARENT=1)

(IF CHILDHH=1 AND PARENT=1, GEN IN 1 FOR PARENTHH)

(ASK IF PARENT/GUARDIAN OF ANY CHILDREN IN HH)

PARENTHH. Of how many of these children are you the parent or guardian?

_____ (RECORD NUMBER 0- ANSWER AT CHILDHH)

DD (DO NOT READ) Don't know

RR (DO NOT READ) Refused

(Biennial Trend 2001 d20, 2003 D16 modified, 2005 D16, 2007 D16, 2010 HISP, 2012 HISP; Marketplace 2013)

BASE: ALL QUALIFIED RESPONDENTS

HISP. Are you, yourself, of Latino or Hispanic origin or descent, such as Mexican, Puerto Rican, Cuban, or some other Latin American background?

1 Yes

2 No

D (DO NOT READ) Don't know

R (DO NOT READ) Refused



(Biennial Trend 2001 D21, 2003 D17 modified, 2005 D17, 2007 D17, 2010 RACE, 2012 RACE; Marketplace 2013)

BASE: ALL QUALIFIED RESPONDENTS

RACE. What is your race? Are you white, black or African American, Asian, American Indian or Alaska Native, or Native Hawaiian or other Pacific Islander? You may select more than one race.
(ACCEPT MULTIPLE RESPONSES)

- 1 White
- 2 African American/Black
- 3 Asian
- 4 American Indian or Alaska Native
- 5 Native Hawaiian or other Pacific Islander
- 7 Other (SPECIFY) _____
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Marketplace 2013)

QUESTIONS D18 AND D20 HAVE BEEN REPLACED WITH THE INCOME QUESTIONS BELOW

PN: Calculate FamSize variable as following:

IF Q.5 =1, 2 AND PARENTHH=0,DD,RR, FamSize=2
IF Q.5 D2=3-6,D,R AND PARENTHH=0,DD, RR, FamSize=1

If Q.5 =1,2 and PARENTHH>0, FamSize=2+PARENTHH
If Q.5 =3-6,D, R AND PARENTHH>0, FamSize=1 + PARENTHH

(ASK EVERYONE)

(IF NOT MARRIED AND HAS NO CHILDREN Q.5 =3-6,D,R AND PARENTHH=0,DD, RR), INSERT FIRST VERBIAGE IN PARENS "PERSONAL" (IF MARRIED OR HAS CHILDREN ((Q.5 =1, 2 AND PARENTHH=0,DD,RR OR(Q.5 =1,2 and PARENTHH>0, FamSize=2+PARENTHH) OR(If Q.5 =3-6,D, R AND PARENTHH>0), INSERT SECOND VERBIAGE IN PARENS "FAMILY")

(IF MARRIED/PARTNERED (Q.5 =1,2): INSERT "AND your (spouse if Q5 =1/partner if Q5 =2)"

(IF HAVE CHILDREN (PARENTHH>0): INSERT "and your (IF PARENTHH=1 INSERT child/IF PARENTHH>1, INSERT children) under age 19 who (IF PARENTHH=1, INSERT 'is'/IF PARENTHH>1 INSERT 'are') living in your household"

D18. To help us describe the people who took part in our study, it would be helpful to know which category best describes your (personal/family) income last year before taxes.

[Family income includes income from you yourself, (AND your (spouse/partner)), (and your (child/children) under age 19 who (is/are) living in your household).



Is your total annual (personal/family) income from all sources, and before taxes, less than (AMOUNT 1), at least (AMOUNT 1) but less than (AMOUNT 3) or (AMOUNT 3) or more?

(INTERVIEWER NOTE: PLEASE READ NUMBER AMOUNTS SLOWLY AND CAREFULLY)

(INTERVIEWER NOTE: RESPONDENT COULD BE THE PARENT OR GUARDIAN OF CHILDREN LIVING IN THE HOUSEHOLD)

(PROBE DON'T KNOW: Your best guess is fine)

- 1 Less than (AMOUNT 1)
- 2 At least (AMOUNT 1) but less than (AMOUNT 3)
- 3 (AMOUNT 3) or more
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ASK D.18a IF D18=2)

D.18a. Is that less than (AMOUNT 2) or (AMOUNT 2) or more?

(INTERVIEWER NOTE: PLEASE READ NUMBER AMOUNTS SLOWLY AND CAREFULLY)

PROBE DON'T KNOW: Your best guess is fine

- 01 Less than (AMOUNT 2)
- 02 (AMOUNT 2) or more
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

(ASK D.18b IF D18=1)

D.18b. Is that less than (AMOUNT 0) or (AMOUNT 0) or more?

(INTERVIEWER NOTE: PLEASE READ NUMBER AMOUNTS SLOWLY AND CAREFULLY)

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

- 01 Less than (AMOUNT 0)
- 02 (AMOUNT 0) or more
- DD (DO NOT READ) Don't know
- RR (DO NOT READ) Refused

(PN: QUESTIONS D18, D18a, and D18b REFER TO THE TABLE BELOW)



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	AMT 0 (100%)	AMT1 (138%)	AMT2 (250%)	AMT3 (400%)
FamilySize	Poverty guideline			
1	\$11,670	\$16,000	\$29,000	\$47,000
2	\$15,730	\$22,000	\$39,000	\$63,000
3	\$19,790	\$27,000	\$49,000	\$79,000
4	\$23,850	\$33,000	\$60,000	\$95,000
5	\$27,910	\$39,000	\$70,000	\$112,000
6	\$31,970	\$44,000	\$80,000	\$128,000
7	\$36,030	\$50,000	\$90,000	\$144,000
8	\$40,090	\$55,000	\$100,000	\$160,000
9	\$44,150	\$61,000	\$110,000	\$177,000
10	\$48,210	\$67,000	\$121,000	\$193,000
11	\$52,270	\$72,000	\$131,000	\$209,000
12	\$56,330	\$78,000	\$141,000	\$225,000

POVERTY LEVELS MODIFIED, 2014 LEVELS USED HERE

(Marketplace 2013, ACA Tracking Survey 2014 d17)

BASE: NON HISPANIC (Q.HISP=2, D, OR R)

D17. Were you born in the United States?

- 1 Yes
- 2 No, other country
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(Biennial 2012 BIRTH_HISP; Marketplace 2013, ACA Tracking Survey 2014 birth_hisp)

BASE: ALL HISPANICS (Q.BIRTH_HISP IF Q.HISP=1)

BIRTH_HISP. Were you born in the United States, on the island of Puerto Rico, or in another country?

- 1 U.S.
- 2 Puerto Rico
- 3 Another country
- R (DO NOT READ) Refused



(ACA Tracking Survey 2014 years_us)

BASE: NOT BORN IN THE U.S (D17=2,D,R OR BIRTH_HISP=2,3, R)

YEARS_US. About how many years have you lived in the United States?

- 1 Less than 1 year
- 2 1 to 4 years
- 3 5 to 10 years
- 4 More than 10 years
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 immigration)

BASE: NOT BORN IN THE U.S. (D17=2,D,R OR BIRTH_HISP=3, R)

IMMIGRATION. Are you a citizen of the United States?

- 1 Yes
- 2 No
- 3 Application pending
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 immigration2)

BASE: NOT A CITIZEN (IMMIGRATION=2, 3, D, R)

IMMIGRATION2. Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

[INTERVIEWER NOTE IF NEEDED: "People usually call this a 'Green Card' but the color can also be pink, blue, or white."]

- 1 Yes
- 2 No
- 3 Application pending
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ACA Tracking Survey 2014 lang)

BASE: CONDUCTED INTERVIEW IN SPANISH (CURLANG=SPANISH)

LANG. Would you say you can carry on a conversation in English, both understanding and speaking – very well, pretty well, just a little, or not at all?
(ENTER ONE ONLY)

- 1 Very well
- 2 Pretty well
- 3 Just a little
- 4 Not at all
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused



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(Biennial Trend 2007 D25, 2010 D18, 2012 D18; Marketplace 2013, modified base, ACA Tracking Survey 2014 d21)

BASE: ALL CITIZENS (IMMIGRATION=1 OR D17=1 OR BIRTH_HISP=1,2)

D21. Some people are registered to vote and others are not. Are you currently registered to vote?

- 1 Yes, registered
- 2 No, not registered
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(KFF 2003; Biennial Trend 2003 D24, 2005 D24, 2007 D27, 2010 D20, 2012 D20; Marketplace 2013, ACA Tracking Survey 2014 d23)

BASE: ALL QUALIFIED RESPONDENTS

D23. In politics today, do you consider yourself a Republican, a Democrat, an Independent, or something else?

- 1 Republican
- 2 Democrat
- 3 Independent
- 4 Something else
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ASK IF LANDLINE SAMPLE)

L1. Now thinking about your telephone use...Does anyone in your household, including yourself, have a working cell phone?

- 1 Yes, respondent or someone in household has cell phone
- 2 No
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ASK IF CELL PHONE SAMPLE)

C1. Now thinking about your telephone use, is there at least one telephone INSIDE your home that is currently working and is not a cell phone?

- 1 Yes, has a home telephone
- 2 No, no home telephone
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(ASK EVERYONE)

ZIP. What is your zip code?

- _____ ENTER ZIPCODE
RR (DO NOT READ) Refused



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(P.N. PLEASE ADD VERIFICATION SCREEN FOR INTERVIEWERS TO CHECK ZIP CODE ENTERED)

INTERVIEWER ONLY: Did respondent provide the following 5 digit zip code?
(INSERT ZIP CODE)

- 1 Yes (CONTINUE)
- 2 No (RE-ASK ZIP)

INCENTIVE INFORMATION COLLECTION

FOR INTERVIEWER (RDD CELL PHONE SAMPLE AND PRE-SCREENED EXCEL CELL SAMPLE ONLY):

INT1. DO NOT READ. Did respondent request money for using their cell phone minutes?

- 1 Yes, requested money
- 2 No, did not request money – GO TO THANK AND END INTERVIEW

(ASK RDD CELL PHONE RESPONDENTS WHO REQUESTED FOR):

We'd like to send you \$5 for your time. Can I please have your full name and a mailing address where we can send you the money?

INTERVIEWER NOTE: If R does not want to give full name, explain we only need it so we can send the \$5 to them personally.

- 1 [ENTER FULL NAME] – INTERVIEWER: PLEASE VERIFY SPELLING
- 2 [ENTER MAILING ADDRESS]
- 3 [City]
- 4 [State]
- 5 CONFIRM ZIP from above
- R (VOL.) Respondent does not want the money

INC_Rec1 and INC_Rec2 DELETED

(READ TO ALL)

THANK AND END INTERVIEW: That completes the interview. Thank you very much for your time and cooperation. Have a nice day/evening.

PN: PLEASE INCLUDE THE FOLLOWING IN THE DATA SET:

- 1) CENSUS REGION
- 2) LANGUAGE OF INTERVIEW
- 3) RURAL/URBAN CODE
- 4) OVERSAMPLING STRATA CODE