The Commonwealth Fund ACA Tracking Survey, July-September 2013

INTRODUCTION:
Hello, I am ____ calling for SSRS. We are conducting an important national opinion 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. Could you please tell me how many adults between ages 19 and 64 live in your household? Please include yourself and all the adults ages 19 to 64 who live with you.

__________ # ADULTS AGE 19-64 (RANGE1-10)
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)

(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
(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

AGE. 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 = 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 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)

**BASE: ALL QUALIFIED RESPONDENTS**

SEX. RECORD RESPONDENTS SEX (ASK ONLY IF NECESSARY)

1. Male
2. Female

(Biennial Trend 2010 Q1)

**BASE: ALL RESPONDENTS**

Q1. Overall, how would you rate the quality of health care you have received in the last 12 months? Would you say it is excellent, very good, good, fair or poor?

1. Excellent
2. Very Good
3. Good
4. Fair
5. Poor
6. (DO NOT READ) Have not received health care in past 12 months
7. (DO NOT READ) Neither good nor poor/Mixed/It depends on type of care
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

(Source: Biennial 2010, 2012 Q2, Quality of Care 2006 Q5)

**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
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

(Biennial 2010, 2012 Q3, 2008 International Survey Q1005)

**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)
BASE: ALL QUALIFIED RESPONDENTS
[PN: IF Q.2=1 OR 3 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

(NHIS)

Q5. In the past 12 months did you have trouble finding a general doctor who would see you?

1 Yes
2 No
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused
COST RELATED ACCESS PROBLEMS

(Biennial Trend 2001 Q9 modified, 2003 Q8 modified, 2005 Q15, 2007 Q10 with modified programming instruction, 2010 Q9)
Item a: Modified to reflect Gen. Pop.
BASE: ALL QUALIFIED RESPONDENTS
Q8. In the LAST 12 MONTHS, was there any time when you (INSERT ITEM) because of the COST?

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

[PN: RANDOMIZE ITEMS A-D]

a.  Did not fill a prescription for medicine or skipped a medication
b.  SKIPPED a medical test, treatment or follow-up recommended by a doctor
c.  Had a medical problem but DID NOT go to a doctor or clinic
d.  Did not see a specialist when you or your doctor thought you needed one

(Biennial Trend 2001 D2, 2003 D2, 2005 D2, 2007 D2, 2010 D2, 2012 D2)
BASE: ALL QUALIFIED RESPONDENTS
D2.  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

(Biennial 2012 and Gen Pop 2012)

**BASE: ALL QUALIFIED RESPONDENTS**

D3. Are you the parent or guardian of any children or stepchildren 25 years of age or younger?

(IF YES, FOLLOW UP WITH: Is this just one child or do you have more than one child 25 years of age or younger?)

1 Yes, just one child
2 Yes, more than one child
3 No children age 25 or younger
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

**BASE: RESPONDENTS WITH CHILDREN, AGE 25 YEARS OF AGE OR YOUNGER (D3=1,2)**

(INSERT “Is this child or step child” IF D3=1)
(INSERT “Are any of these children or stepchildren” and show interviewer note IF D3=2)

D3a. (Is this child or step child/Are any of these children or stepchildren) age 18 or older?

(IF YES, FOLLOW UP WITH: Is this just one child or do you have more than one child age 18 to 25?)

1 Yes, just one child
2 Yes, more than one child
3 No children age 18 to 25
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

(ASK EVERYONE)
STATE. In what State do you reside?
(DO NOT READ LIST)

__________ (LIST OF STATES)
9 (DO NOT READ) Refused
PERSONAL CURRENT INSURANCE COVERAGE AND RECENT TIME UNINSURED

(Biennial Trend 2001 Q20, 2003 Q10, 2005 Q17, 2007 Q12, 2010 Q12, 2012 Q14)

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: DISPLAY ITEM E]

(PN: INSERT ‘FIRST’ FOR ITEM A; CAPITALIZE ‘ARE’ FOR ITEMS B-E)

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. Private health insurance offered through an employer or union. This could be insurance through a current job, your job or someone else’s job.
b. A private health insurance plan that you bought yourself
c. (Medicaid/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
e. Health insurance through ANY other source, including military or veteran’s coverage
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

Q15. 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?) or in someone else’s name?

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

Q15a. Does (your this) health plan offer coverage for dependents including children and/or spouses?

1. Yes
2. No
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused
Q16. During the last 12 months – since (INSERT MONTH) 2012 – 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
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

Q17. Before you were insured, how long did you go without insurance?

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
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

Q18. How long have you been without insurance?

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
D (DO NOT READ) Don’t know
R (DO NOT READ) Refuse
INSURANCE DIFFICULTIES AND COMPLEXITIES

(Biennial Trend 2005 Q34, 2007 Q24 with modified Punch 1 label, 2010 Q22)

ASK IF NOW INSURED (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 OR Q11=2)

Q19a. Thinking again about YOUR PERSONAL health insurance coverage, how long have you had your main health plan? (READ LIST ONLY IF NECESSARY)

(IF RESPONDENT VOLUNTEERS A YEAR, CODE APPROPRIATELY; CLARIFY IF NECESSARY)

1. Less than 12 months
2. One year to less than two years
3. Two years to less than three years
4. Three or more years
D (DO NOT READ) Don't know
R (DO NOT READ) Refused


BASE: NOW INSURED (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 OR Q11=2)

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

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

Q21. Now thinking about (your current 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?

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


**BASE: ALL QUALIFIED RESPONDENTS**

Q22. During the last 12 months, were there times when you had problems paying or were unable to pay for medical bills? (IF NECESSARY: This can include bills for another family member.)

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


**BASE: ALL QUALIFIED RESPONDENTS**

Q23. In the last 12 months, were you ever contacted by a collection agency about owing money for medical bills? (IF NECESSARY: This can include bills for another family member.)

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


**BASE: CONTACTED IN THE LAST 12 MONTHS BY A COLLECTION AGENCY ABOUT OWING MONEY FOR MEDICAL BILLS (Q23=1)**

Q24. Did your bill get sent to a collection agency because of a billing mistake or because you were unable to pay the bill?

1. Billing mistake
2. Unable to pay the bill
D (DO NOT READ) Don't know
R (DO NOT READ) Refused

**BASE: ALL QUALIFIED RESPONDENTS**

Q25. Over the last 12 months, have you had to change your way of life significantly in order to pay medical bills? (IF NECESSARY: This can include bills for another family member.)

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

(Biennial Trend 2005 Q42a modified Q wording, 2007 Q33 modified Q wording, 2010 Q30, 2012 Q33)

**BASE: ALL QUALIFIED RESPONDENTS**

Q26. Do you currently have any medical bills you are paying off over time? This could include medical bills you are paying off by credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from this year or previous years. (IF NECESSARY: This can include bills either for yourself or another family member)

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

BASE: NOW INSURED (Q10a=1 OR Q10b=1 OR Q10c=1 OR Q10d=1 OR Q10e=1 OR Q11=2)

Q29. Do you pay ALL of the premium for your MAIN health plan, 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.)

(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?)

1   Pay premium in full (All)
2   Pay premium in part (Some)
3   Pay nothing
D   (DO NOT READ) Don’t know
R   (DO NOT READ) Refused


BASE: ANSWERS PREMIUM QUESTION AND HAS FAMILY (Q29=1,2 OR 3 AND (D2=1,2 OR D3=1,2))

Q.30. 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

**BASE: PAYS ALL OR SOME OF PREMIUM (Q29=1,2)**

Q31. How often are premium payments made on this plan? (READ LIST ONLY IF NECESSARY)

1. Once a week
2. Every two weeks or twice a month
3. Once a month OR
4. Once a year?
5. (DO NOT READ) Some other timing
6. (DO NOT READ) Don’t know
7. (DO NOT READ) Refused

(Biennial Trend 2005 Q51, 2007 Q40, 2010 Q37, 2012 Q40)

**BASE: PAYS PREMIUM WEEKLY (Q31=1)**

Q32. About how much do you pay every week in premiums on this plan including any amount deducted from a paycheck? Do you pay…(READ LIST)?

(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 $10
2. $10 to under $30
3. $30 to under $60
4. $60 to under $100
5. $100 to under $125
6. $125 to under $175 OR
7. $175 or more
8. (DO NOT READ) Don’t know
9. (DO NOT READ) Refused
(Biennial Trend 2005 Q52, 2007 Q41, 2010 Q38, 2012 Q41)

**BASE: PAYS PREMIUM EVERY TWO WEEKS OR TWICE A MONTH (Q31=2)**

Q33. About how much do you pay every two weeks or twice a month in premiums on this plan including any amount deducted from a paycheck? Do you pay...(READ LIST)?

(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 $20
2. $20 to under $60
3. $60 to under $125
4. $125 to under $200
5. $200 to under $250
6. $250 to under $350 OR
7. $350 or more
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused


**BASE: PAYS PREMIUM MONTHLY (Q31=4)**

Q34. About how much do you pay every month in premiums on this plan including any amount deducted from a paycheck? Do you pay...(READ LIST)?

(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
Q36. About how much do you pay every year in premiums on this plan including any amount deducted from a paycheck? Do you pay…(READ LIST)?

(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 $500  
2 $500 to under $1,500  
3 $1,500 to under $3,000  
4 $3,000 to under $4,500  
5 $4,500 to under $6,000  
6 $6,000 to under $8,000 OR  
7 $8,000 or more  
D (DO NOT READ) Don’t know  
R (DO NOT READ) Refused

Q39. 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 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)

BASE: HEALTH PLAN HAS A DEDUCTIBLE (Q39=1)

Q40. 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)

BASE: DON’T KNOW OR REFUSED DEDUCTIBLE (Q.40= D or R)

Q41. 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
(Trend: Gen Pop 2011 Q62 Modified)
**BASE: ALL QUALIFIED RESPONDENTS**

Q42. In the past 12 months, about how much have you and your family spent out-of-pocket for medical treatments or services that were **not** covered by insurance? This would include spending on prescription medicine, dental and vision care, and medical treatments or tests by a doctor or another health professional, including co-payments, or deductibles. Please do not include what you may have paid for insurance premiums.

(IF RESPONDENT IS ONLY WILLING TO GIVE A RANGE, RECORD THE LOWER END OF THE RANGE)

(IF RESPONDENT SEEMS UNSURE OF TERM “OUT OF POCKET”, SAY: “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. It does not include the premium you may pay for your insurance coverage.)

(INTerviewer note: Respondent can include all “out of pocket” expenses, regardless of who actually pays for them, and includes co-payments or coinsurance payments.)

_______ (RECORD NUMBER) (RANGE 0-100,000)

999998 (DO NOT READ) Don’t know

999999 (DO NOT READ) Refused

(Trend: Gen Pop 2011 Q63 modified)
**BASE: IF Q42 IS DON’T KNOW/REFUSED (99998 OR 99999)**

Q43. Your best guess is fine. Would you say...(READ LIST)?

01 None
02 $1 to under $500
03 $500 to under $1000
04 $1,000 to under $2000
05 $2,000 to under $3000
06 $3,000 to under $5000
07 $5,000 to under $8000
08 $8000 or more

DD (DO NOT READ) Don’t know

RR (DO NOT READ) Refused
HEALTH STATUS AND CHRONIC CONDITIONS


BASE: ALL QUALIFIED RESPONDENTS

Q44. 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?

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
D (DO NOT READ) Don't know
R (DO NOT READ) Refused
(Biennial Trend 2007 Q56 with modified programming instruction, 2010 Q54 modified, 2012 Q60)
(item a: Biennial Trend 2007 Q56a, 2010 Q54a, 2012 Q60a)
(item b: Biennial Trend 2007 Q56b-c modified, 2010 Q54b modified, 2012 Q60b)
(item c: (Biennial Trend 2001 Q68 modified, 2003 Q48 modified, 2005 Q70, 2007 Q56d, 2010 Q54c, 2012 Q60c)
(item d: Biennial Trend 2001 Q68 modified, 2003 Q48 modified, 2005 Q70, 2007 Q56e, 2010 Q54d, 2012 Q60d)
(item e: Biennial 2010 Q54e, 2012 Q60e)
(item f: new)
(item g: new)

**BASE: ALL QUALIFIED RESPONDENTS**

PN: FOR FIRST ITEM INSERT: “first”
PN: FOR REMAINING ITEMS INSERT: “what about”

Q45. Has a doctor told you that you have any of the following health problems or conditions?  (First/What about) (INSERT ITEM)?  (READ AS NECESSARY: Has a doctor told you that you have that?)

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

[RANDOMIZE ITEMS A-G]

a.  Hypertension or high blood pressure
b.  Heart disease
c.  Diabetes
d.  Asthma, emphysema, or lung disease
e.  High cholesterol
f.  Depression or anxiety
g.  Kidney problems
INDIVIDUAL MARKET

(Biennial Trend 2005 Q82 modified, 2007 Q66, 2010 Q69, 2012 Q77)

BASE: ALL EXCEPT IF HAS INDIVIDUAL INSURANCE (Q.10b=2, D OR R)

PN: INSERT CURRENT MONTH

Q47. Some people buy health insurance on their OWN – that is, not through any employer, union, or government program. In the past three years – since [INSERT MONTH] 2010 – have you ever TRIED to buy health insurance on your own?

1. Yes, tried to buy
2. No, have not
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

(Biennial Trend 2001 Q43, 2005 Q83, 2007 Q67, 2010 Q70, 2012 Q78)

BASE: CURRENTLY COVERED BY PRIVATE HEALTH INSURANCE PLAN BOUGHT BY SELF IN LAST THREE YEARS OR TRIED TO BUY IT IN PAST THREE YEARS (Q.10b=1 AND Q.19a=1,2 OR 3) OR (Q.47=1)

PN: IF Q.10b=1 AND Q.19a=1,2) INSERT: “You mentioned you have insurance you bought on your own” FOR ITEM A

Q48. (You mentioned you have insurance you bought on your own) How difficult was it to find (INSERT ITEM)? Was it very difficult, somewhat difficult, not too difficult, or not at all difficult?

1. Very difficult
2. Somewhat difficult
3. Not too difficult
4. Not at all difficult
5. (DO NOT READ) Impossible
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

[KEEP ITEMS IN ORDER]

a. A plan with the type of coverage you need
b. A plan you could afford
(Trend: Gen Pop 2011 and 2012 Q80, Modified)
BASE: CURRENTLY COVERED BY PRIVATE HEALTH INSURANCE PLAN BOUGHT BY SELF IN LAST THREE YEARS OR TRIED TO BUY IT IN PAST THREE YEARS (Q.10b=1 AND Q.19a=1,2 OR 3 OR Q.47=1)
Q50. How easy or difficult was it to compare the (INSERT ITEM) of different insurance plans? Would you say it was…(READ LIST)?

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

[KEEP ITEMS A-C IN ORDER]

a. Benefits covered
b. Premium costs
c. Potential out of pocket costs from deductibles and co-pays

(Biennial Trend 2005 Q84, 2007 Q68, 2010 Q71, 2012 Q79)
BASE: CURRENTLY COVERED BY PRIVATE HEALTH INSURANCE PLAN BOUGHT BY SELF IN LAST THREE YEARS OR TRIED TO BUY IT IN PAST THREE YEARS (Q.10b=1 AND Q.19a=1,2 OR 3 OR Q.47=1)
Q51. Did any company turn you down, charge a higher price because of your health or exclude a specific health problem when you tried to buy coverage on your own?

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

(Biennial Trend 2001 Q44, 2005 Q85, 2007 Q69, 2010 Q72, 2012 Q80)
BASE: TRIED TO BUY HEALTH INSURANCE ON OWN IN PAST THREE YEARS (Q47=1)
Q52. Did you end up buying a health insurance plan on your own?

1  Yes
2  No
D  (DO NOT READ) Don't know
R  (DO NOT READ) Refused
(Biennial Trend 2007 Q70, 2010 Q73 modified, 2012 Q81)

**BASE: DID NOT BUY HEALTH INSURANCE ON OWN (Q52=2)**

(Randomize Code 1 – 6; Always Ask Code 7 Last)

Q53. What is the main reason you did not buy the plan? (Read List)

1. The premium was too expensive
2. The plan did not cover a pre-existing condition
3. The plan did not cover the services you needed
4. The deductibles and/or co-pays were too high
5. You gained health insurance through another source
6. You were turned down because of your health
7. Was there another reason? (Specify)__________

D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

**HEALTH REFORM**

(New)

**BASE: ALL QUALIFIED RESPONDENTS**

Q55. This fall, under the health reform law, there will be new marketplaces in each state where insurance companies will sell private health plans. People who do not have affordable health benefits through a job, can go to these new marketplaces and shop for a health plan. Are you aware of these new marketplaces?

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

(New)

**BASE: ALL QUALIFIED RESPONDENTS**

Q56. Many people without affordable health benefits through a job will be eligible for financial help to pay for their health insurance in these new marketplaces. Are you aware that financial assistance is available for health insurance under the reform law?

1. Yes
2. No
D (DO NOT READ) Don’t know enough to say
R (DO NOT READ) Refused
(New)

**BASE: IS AWARE OF THE MARKETPLACES OR FINANCIAL HELP (Q.55=1 OR Q.56=1)**

If Q55 AND Q56=1 INSERT: “these new marketplaces to buy health insurance and financial help to pay for it?”

If Q55=1 AND Q56=2 INSERT: “these new marketplaces to buy health insurance?”

If Q55=2 AND Q56=1 INSERT: “this new financial help to pay for insurance”

If MARRIED (D2=1) INSERT: “or your spouse’s” AT ITEM G

Q58. Where have you heard about (these new marketplaces to buy health insurance and financial help to pay for it?/ these new marketplaces to buy health insurance?/this new financial help to pay for insurance?) Have you heard about it from (INSERT ITEM)

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

(SCRAMBLE; ALWAYS ASK ITEM K LAST)

- a. Friends, coworkers, or family members
- b. Television
- c. Radio
- d. A newspaper or magazine
- e. Internet website, Facebook, Twitter or other social media
- f. Text or emails
- g. Your (or your spouse’s) employer
- h. Your doctor, your health clinic, hospital or another health care provider
- i. Church, synagogue, mosque, community center or social club
- j. A letter from an insurance company
- k. In another way (SPECIFY)__________
**Base: All Qualified Respondents**

Q59. How likely are you to go to this new marketplace in your state to buy a health plan and find out if you are eligible for financial help to pay for your plan? Would you say you are... (READ LIST):

1. Very likely
2. Somewhat likely
3. Somewhat unlikely
4. Very unlikely
5. (DO NOT READ) Haven’t decided yet
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

**Base: Very or Somewhat Likely to Go to Marketplaces (Q59=1,2)**

Q60. You said you are likely to go to this new marketplace to buy health insurance and find out about any financial help. You will be able to do this in person, by phone, or on the Internet. What would be your preferred way of contacting these new marketplaces? (READ LIST)

(interviewer note: if respondent says ‘it depends on where the office is located,’ ask for respondent’s preference regardless of the location)

1. The internet
2. Over the phone
3. In person
4. (DO NOT READ) Other
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

**Base: All Qualified Respondents**

Q61. Currently, in most states, insurance companies can deny coverage to people who have a preexisting health condition, or charge them more money, or refuse to cover the condition in their insurance policy. Starting next year, all insurers are banned from these practices. Were you aware of this change?

1. Yes
2. No
D. (DO NOT READ) Not sure, Don’t know
R (DO NOT READ) Refused
(New)

**BASE: ALL QUALIFIED RESPONDENTS**

Q62. Under the health reform law, many Americans will become eligible for Medicaid next year. The Supreme Court has allowed states to choose whether to expand Medicaid to cover more of their residents. Do you generally favor or oppose making Medicaid available to more residents in your state? (GET ANSWER, THEN ASK: Is that strongly favor/oppose or somewhat favor/oppose”)

1 Strongly favor
2 Somewhat favor
3 Somewhat oppose
4 Strongly oppose
5 (DO NOT READ) Unable to answer if favor or oppose (Specify why)
D (DO NOT READ) Don’t know enough to say
R (DO NOT READ) Refused

(New)

**BASE: ALL QUALIFIED RESPONDENTS**

Q62a. Do you know whether your state has decided to expand Medicaid under the health reform law?

1 Yes, decided to expand
2 Yes, decided against expanding
D No, do not know what state decided
R (DO NOT READ) Refused

(New)

**BASE: RESPONDENT KNOWS WHAT STATE DECIDED ABOUT MEDICAID EXPANSION**

(Q62a=1,2)

(ASK Q.62b IF Q.62a=1 OR 2)

Q62b. Do you generally favor or oppose your state's decision on whether to expand Medicaid? (GET ANSWER, THEN ASK: Is that strongly favor/oppose or somewhat favor/oppose”)

1 Strongly favor
2 Somewhat favor
3 Somewhat oppose
4 Strongly oppose
D (DO NOT READ) Don’t know enough to say
R (DO NOT READ) Refused
**NEW**

**BASE: ALL QUALIFIED RESPONDENTS**

Q63. Are you aware that starting next year all Americans will be required to have health insurance?

1. Yes, I am aware
2. No, I was not aware
D. (DO NOT READ) Don’t know
R. (DO NOT READ) Refused

**TREND: GEN POP 2011 Q84 MODIFIED, 2012**

**BASE: ALL QUALIFIED RESPONDENTS**

Q64. Under the health reform law, children up to the age of 26 can stay on or enroll in their parent’s health plans if they include dependent coverage. Are you aware of this option?

1. Yes
2. No
8. (DO NOT READ) Don’t know
9. (DO NOT READ) Refused

**TREND: GEN POP 2011 W2_77_1 MODIFIED, 2012**

**BASE: AGE<26 OR D3a=1,2**

PN: SHOW CODE ‘N’ IF AGE>25 or AGE=RR AND D3a=1,2
PN: IF AGE IS LESS THAN 26 INSERT: “have you stayed on or enrolled in your parent’s health plan?”
PN: IF (AGE IS GREATER THAN 25 or AGE=RR) AND D3a=1 INSERT: “has your adult child, age 18 to 25 stayed on or enrolled in your health plan?”
PN: IF (AGE IS GREATER THAN 25 or AGE=RR) AND D3a=2 INSERT: “have any of your adult children, age 18 to 25 stayed on or enrolled in your health plan?”

Q65. In the last 3 years (have you stayed on or enrolled in your parent’s health plan/ has your adult child, age 18 to 25 stayed on or enrolled in your health plan/have any of your adult children, age 18 to 25 stayed on or enrolled in your health plan?)

1. Yes
2. No
N. (DO NOT READ) Not insured/Have not had health insurance during the past three years.
D  (DO NOT READ) Don’t know
R  (DO NOT READ) Refused
FACTUALS AND DEMOGRAPHICS

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


**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) (VOLUNTEERED) Disabled
07 (DO NOT READ) (VOLUNTEERED) Student
08 (DO NOT READ) (VOLUNTEERED) Other (homemaker, etc.)
DD (DO NOT READ) Don’t know
RR (DO NOT READ) Refused


**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

**BASE: SELF-EMPLOYED (D6=1)**

D7. Do you work by yourself, do you employ other people, or do you work with other people?

1. Just self
2. Employ other people
3. Work with other people
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

(Biennial Trend 2010 D8, 2012 D8)

**BASE: SELF-EMPLOYED (D6=1)**

D8. Do you own your own business or professional practice?

1. Yes (INTERVIEWER: includes those who own a business jointly with others)
2. No
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused

(Biennial Trend 2010 D9, 2012 D9)

**BASE: OWN THEIR OWN BUSINESS AND NOT SELF-EMPLOYED WORKING ALONE (D8=1 AND D7=2,3,D,R)**

D9. Do you currently offer health insurance to your employees?

1. Yes
2. No
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused
**BASE: EMPLOYED FULL- OR PART-TIME OR OWN BUSINESS (D4=1,2 OR D8=1)**

PN: IF D7=1, Gen in CODE 1 AND DO NOT ASK D10
PN: IF D.8=1 INSERT: “own”
PN: IF D4=1,2 AND D8 =2, D OR R INSERT: “work for in your main job”

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

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

**NEW**

**BASE: OWN BUSINESS WITH FEWER THAN 50 EMPLOYEES (D.8=1 AND D.10=1,2,3)**

D10a. Under the health reform law, small businesses with fewer than 50 employees are eligible to buy health insurance for their employees through a new marketplace in your state that is for small businesses only. How familiar are you with these new marketplaces? (READ LIST)

1. Very familiar
2. Somewhat familiar
3. Not too familiar
4. Not at all familiar
D (DO NOT READ) Don’t know enough to say
R (DO NOT READ) Refused

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

D11. About how much do you make an hour? Is it ..(READ LIST)?

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

1. Less than $10 per hour
2. $10 to less than $15 per hour
3. $15 to less than $20 per hour, OR
4. $20 or more per hour
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused


**BASE: EMPLOYED BY SOMEONE ELSE AND DO NOT HAVE INSURANCE FROM OWN EMPLOYER (D.6=2, D OR R AND (Q.10a=2, D, R OR Q.15=2,3,4))**

D.14. Does YOUR employer offer health insurance to ANY employees?

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


**BASE: EMPLOYER OFFERS INSURANCE AND NOT INSURED BY EMPLOYER IN OWN NAME (D14=1)**

D15. Are you eligible to participate in your employer’s health plan?

1. Yes
2. No
(Trend: Gen Pop 2011 and 2012 Q94)

**BASE: FULL OR PART TIME WORKER AND CURRENTLY UNINSURED, AND IS ELIGIBLE TO PARTICIPATE IN EMPLOYER’S HEALTH PLAN (D.4=1,2 AND Q.11=1 AND D.15=1)**

D16. Can you please tell me why you decided **not** to participate in your employer’s health plan? (READ LIST)

(RANDOMIZE CODES 1-3, ALWAYS ASK CODE 4 LAST)

1. Plan was too expensive
2. The benefits offered in the plan were not adequate
3. You didn’t think you needed insurance
4. Something else (SPECIFY)__________
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused


**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)
(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?

1  Record answer (limit to 15)
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 AND PARENTHH)
(ASK IF PARENT/GUARDIAN OF ANY CHILDREN IN HH)

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

11  ____________________ (RECORD NUMBER 0- ANSWER AT CHILDHH)
DD  (DO NOT READ) Don’t know
RR  (DO NOT READ) Refused

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

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
6 Other (SPECIFY) ____________
D (DO NOT READ) Don't know
R (DO NOT READ) Refused


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

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

PN: Calculate FamSize variable as following:

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

If Q.D2=1,2 and PARENTHH>0, FamSize=2+PARENTHH
If Q.D2=3-6, D, R AND PARENTHH>0, FamSize=1 + PARENTHH

(ASK EVERYONE)
(IF NOT MARRIED AND HAS NO CHILDREN Q.D2=3-6, D, R AND PARENTHH=0, DD, RR),
INSERT FIRST VERBIAGE IN PARENS “PERSONAL”)
(IF MARRIED OR HAS CHILDREN ((Q.D2=1, 2 AND PARENTHH=0, DD, RR OR(Q.D2=1,2 and
PARENTHH>0, FamSize=2+PARENTHH) OR((Q.D2=3-6, D, R AND PARENTHH>0), INSERT
SECOND
VERBIAGE IN PARENS “FAMILY”)
(IF MARRIED/PARTNERED (Q.D2=1,2): INSERT “AND your (spouse if D2=1/partner if D2=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
D (DO NOT READ) Don't know
R (DO NOT READ) Refused

(ASK D.18b IF D18=2)
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
D (DO NOT READ) Don't know
R (DO NOT READ) Refused

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

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<th>AMT2 (250%)</th>
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</table>
(Biennial Trend 2007 D25, 2010 D18, 2012 D18)

**BASE: ALL QUALIFIED RESPONDENTS**

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


**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

(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)

RECONTACT INFORMATION COLLECTION

BASE: UNINSURED OR IN DIRECT PURCHASE MARKET (Q.11=1 OR Q.10B=1)
RECON. This interview is part of a long-range study of the impact of important health insurance issues in your community. I want to emphasize that your answers are completely confidential and your name will not be used, nor will any information be released that will permit people to identify you. We are hoping to recontact people who have completed this survey in a few months to ask a few more questions about the topics we discussed tonight and will be offering a $25 incentive to anyone who completes the second survey as well. Would it be ok if we recontacted you in a few months to discuss these issues further with you?

1 Yes
2 No
D (DO NOT READ) Don’t know
R (DO NOT READ) Refused
IF RECON=1 GO TO CURPHN
IF RECON=2, D OR R AND CELL PHONE SAMPLE GO TO INT1
IF RECON=2, D OR R AND LANDLINE SAMPLE GO TO **THANK AND END INTERVIEW**

(ASK CURPHN IF RECON=1)
PN: INSERT TELEPHONE NUMBER USED TO REACH RESPONDENT
CURPHN. I have the telephone number we reached you on today as (INSERT TELEPHONE NUMBER) Is that the telephone number we can use to reach you in a few months?

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

(ASK PHN IF CURPHN = 2, D, R)
PHN. Can you give me the telephone number that you would prefer us to use?

_________(ENTER TELEPHONE NUMBER)
D (DO NOT READ) Don’t Know
R (DO NOT READ) Refused

(ASK ALTPHN IF RECON=1)
ALTPHN. Are there any other phone numbers we could reach you at if we need to get in contact with you with instructions or questions? This might be a cell phone number.

_________(ENTER TELEPHONE NUMBER)
D (DO NOT READ) Don’t Know
R (DO NOT READ) Refused

(ASK RECON_ADDRESS IF RECON=1)
RECON_ADDRESS. And can I please have your full name and a mailing address so that we can send you an invitation and a small gift prior to our next survey?

1 [ENTER FULL NAME] – INTERVIEWER: PLEASE VERIFY SPELLING
2 [ENTER MAILING ADDRESS]
3 [City]
4 [State]
5 CONFIRM ZIP from Zip, if provided
R (DO NOT READ) Refused
ASK EMAIL IF RECON=1

EMAIL. Do you have an email address that we could use to contact you?
(IF NECESSARY: Since we won’t be recontacting you for several months, we want to make sure that we can get back in touch with you in case your phone number or address changes.)

__________(ENTER EMAIL ADDRESS)
R (DO NOT READ) Refused

INCENTIVE INFORMATION COLLECTION

FOR INTERVIEWER (RDD CELL PHONE 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 CELL PHONE RESPONDENTS WHO REQUESTED FOR MONEY AND WAS NOT ASKED RECON_ADDRESS):
We’d like to send you $10 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 $10 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

PN - CREATE RECONSTATUS VAR COUNTER, PLEASE COUNT NUMBER OF TYPES OF INFORMATION PROVIDED (FOR EXAMPLE, COUNTER =1 IF CURPHN=1 AND D,R OR MISSING PHN, ALTPHN, RECON_ADDRESS, EMAIL; COUNTER =2 IF CURPHN=1 AND PHONE NUMBER PROVIDED IN PHN AND D,R OR MISSING ALTPHN, RECON_ADDRESS, EMAIL)

(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