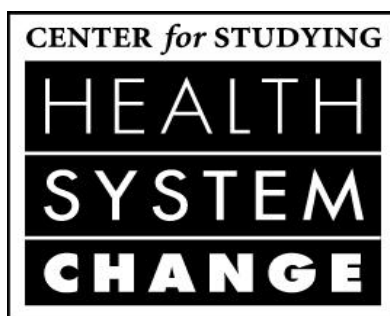


**Community Tracking Study
Household Survey Methodology Report
2007 (Round FIVE)**

APPENDICES



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Appendices to Technical Publication No.

72

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APPENDIX A

ROUND FIVE SURVEY INSTRUMENT

**Community Tracking Study
Round 5 Household Survey**

"For ease of documentation, we have added a suffix of '1' to question numbers asked about the FIU informant, and a suffix of '2' to question numbers asked about additional adults in the FIU (self response module). In the actual CATI program, the question numbers for the FIU informant have no suffix, and the question numbers for the self response module have a suffix equal to the person number of the respondent."

INTRODUCTIONS

FOR THOSE SENT LETTER: REVISED TO REFLECT CHANGE IN FOCUS AND TO INCLUDE ADDITIONAL INFORMATION ON ONE SCREEN.

>paa3< Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. We recently sent your household a letter describing the study. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

YES..... 1 [goto]
NO 0 [goto]
==>

CONTENT: The interview includes questions about your and your family's health and your views about the quality and cost of health care.

SPONSOR: The study is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company. The RWJF website is www.rwjf.org.

LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.

CONTACT: If you would like to find out more about the study or the foundation, you can call [Leonie Infantry] at [1-877-843-7953].

CONFIDENTIALTY: The survey is confidential and you don't have to answer any questions you don't want to.

SELECTION: Your telephone number was scientifically selected by a computer to represent many others in your community.

TYPE <g> TO CONTINUE ==> [goto]

FOR SAMPLE NO LETTER: REVISED TO REFLECT CHANGE IN FOCUS AND TO INCLUDE ADDITIONAL INFORMATION ON ONE SCREEN.

>s2<

Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

YES..... 1 [goto]
NO 0 [goto]
==>

CONTENT: The interview includes questions about your and your family's health and your views about the quality and cost of health care.

SPONSOR: The study is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company. The RWJF website is www.rwjf.org.

LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.

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CONFIDENTIALTY: The survey is confidential and you don't have to answer any questions you don't want to.

SELECTION: Your telephone number was scientifically selected by a computer to represent many others in your community.

TYPE <g> TO CONTINUE ==> [goto]

FOR REFUSAL PREPAYS

>pap1< Hello, my name is _____, calling from Mathematica. Last week, we sent a letter to your household about a study to understand how changes in health care are affecting people. . As a token of our commitment, we enclosed \$5.

Got check, continue 1
Did not receive check 2 [goto pap3]
CALL BACK 3 [goto callback]
==>

>pap2< I hope the letter answered your questions about our research study.

PAUSE, AND ANSWER ANY QUESTIONS. IF NO QUESTIONS, CONTINUE

I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.

TYPE <g> TO CONTINUE

CALL BACK 1 [goto callback]
==> [goto a2]

>pap3< I'm calling to ask you to take part in a major health care study, and I'd like to resend you \$5 for helping us with the survey. By sharing your concerns and opinions about health care, you will help answer important questions about how changes in health care are affecting the well being of adults and children in your community.

IF NECESSARY ADD: The interview will only take 30 to 40 minutes.

I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.

TYPE <g> TO CONTINUE [goto code_s1]

==>

>code_s1<

CONTINUE WITH INTERVIEW

SPEAKER IS 18 OR OLDER 1 [goto phone_ck]
WILL CALL SOMEONE 18 OR OLDER
TO THE PHONE 2
..... **CALLBACK**
NO PERSON 18 OR OLDER HOME NOW 3
CALLBACK 10

PROBLEM

PROBABLE MENTAL IMPAIRMENT 5
LANGUAGE BARRIER 6 [goto lang]
SUPERVISOR REVIEW..... 11

REFUSAL

HOUSEHOLD REFUSAL 7
HUNG UP DURING INTRODUCTION 12

INELIGIBLE

NO PERSON 18 OR OLDER
LIVES IN THE HOUSEHOLD..... 4
NOT A RESIDENCE (BUSINESS/
NON-RESIDENCE/GROUP QUARTERS/
INSTITUTION/VACATION HOME)..... 8

===>

**INSERTED IN EACH INTRO SCREEN TO FACILITATE ACCESS FOR INTERVIEWERS
SINCE THEY OFTEN STUMBLE DURING INTROS.**

>lang< <1> SPANISH
 ASIAN
 <2> CHINESE
 <3> JAPANESE
 <4> KOREAN
 <5> UNKNOWN ASIAN
 <6> OTHER ASIAN SPECIFY
 EUROEPAN/SLAVIC
 <7> FRENCH
 <8> GERMAN
 <9> ITALIAN
 <10> POLISH
 <11> PORTUGESE
 <12> RUSSIAN
 <13> UNKNOWN EUROPEAN/SLAVIC
 OTHER
 <14> OTHER LANGUAGE SPECIFY

>phone_ck< Before we start this interview, is [phone number] used for. . .

 home use 1
 business and home use, or 2
 business use only? [ineligible] 3

a. DEMOGRAPHICS AND SCREENING

>hhld< What are the first names of the people who live here. Begin with one of the people who owns or pays most of the rent for this home, and then other people in the household. Be sure to include yourself and any students away at college.

- INTERVIEWER:** 1) IF R. IS RELUCTANT TO GIVE FIRST NAMES: We are asking for first names because the survey includes questions about the health care of family members. The only reason we need first names is so we'll have some way to tell family members apart. If you'd rather not give names, we can take relationships or some other way to tell family members apart.
- 2) Persons who reside at a vacation residence, in institutions, or in other group quarters (10 or more unrelated persons living together) are not eligible.

[fill NAME] [HOUSEHOLDER GOES HERE] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

VACATION HOME, INSTITUTION,
GROUP QUART [Ineligible] v
NO OTHER HOUSEHOLD MEMBERS n
DELETE A HOUSEHOLD MEMBER x
UNDELETE A HOUSEHOLD MEMBER u
MORE THAN 8 HOUSEHOLD MEMBERS e [goto emo1]
====> [goto more]

>more<

Have I missed any babies or small children, anyone who usually lives here but is away at present traveling, in school, or in a hospital, or any foster children, lodgers, boarders, and roommates?

IF YES: What are their first names?

IF NO: CODE "n"

ENTER TEXT FOR ADDITIONAL PERSONS, WITH A MAXIMUM OF 8 PER HOUSEHOLD

PROBE IF R. ASKS ABOUT STUDENTS: Include household members less than 23 years old who are away at school or college, regardless of whether they are living in a dorm or off-campus apartment.

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

- NO OTHER HOUSEHOLD MEMBERS n
- DELETE A HOUSEHOLD MEMBER x
- UNDELETE A HOUSEHOLD MEMBER u
- MORE THAN 8 `HOUSEHOLD MEMBERS e [goto emo1]
- ====> [goto bmo1]

FOR ALL SAMPLE:

>emo1<

You've told me about eight people that live in this household. Do any other people live in this household?

- YES..... 1
- NO OTHER PEOPLE IN HOUSEHOLD
- n
- [goto bmo1]**
- ====>

>emo2<

How many of those additional people are 18 years old or older?

- |_|_|_|
- (0-99)
- ====>

>em3< How many of those additional people are under 18?

____|____|
(0-99)
====>

>head< Who owns or pays most of the rent on this house? (READ LIST IF NECESSARY;
ENTER CODE FOR PERSON MENTIONED FIRST).

HEAD? NAME RELATIONSHIP SEX AGE
[fill NAME] 1
[fill NAME] 2

>bmo1< In what month and year was [fill HOUSEHOLDER] born?

**INTERVIEWER: (1) REMEMBER THAT THIS IS THE HOUSEHOLDER.
(2) R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE.
(3) IF R. IS RELUCTANT: This information is needed only to understand
differences in health care for people in different age groups.**

JAN 1
FEB 2
MARCH 3
APRIL 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d [goto age1]
====>

>byr1< [no erase]

____|____| MONTH
(112)

____|____|____|____| YEAR
(1880-1984)
====> [goto SEX1]

>age1< What is (his/her/your) age?

INTERVIEWER: (1) REMEMBER THAT THIS IS THE HOUSEHOLDER.
(2) R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE.
(3) IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.
(4) If R. STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS AND CHILDREN.

|__| |__| |__| YEARS OLD
(16-120)

18 OR OLDER a
LESS THAN 18 c
==>

>SEX1< . . . and is [fill HOUSEHOLDER] male or female?

INTERVIEWER: CODE WITHOUT ASKING IF KNOWN

MALE m
FEMALE f
==>

test: **IF age1 ge 16 AND age1 lt 23 goto col1; else goto grd1**

>col1< [Is HOUSEHOLDER/are you] a full-time student?

PROBE: The definition of a full-time student should be based on [fill NAME's] school.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

>grd1<

What is the highest grade or year of school [fill HOUSEHOLDER/you] completed?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: CODE NUMBER OF YEARS OF SCHOOL. IF TECHNICAL SCHOOL OR SOME COLLEGE, REPEAT QUESTION AND ENTER WHAT RESPONDENT CONSIDERS HIGHEST GRADE OR YEAR OF SCHOOL. IF R. GIVES DEGREE, CODE AS FOLLOWS:

- 12—HIGH SCHOOL OR GED
- 14—ASSOCIATES DEGREE OR JUNIOR COLLEGE
- 16—BA/BS 17—MA/MS 18—MBA/MPH/MPA
- 19—JD/LAW 20—MD/PHD

|__| |__| GRADE COMPLETED
(0-20)

DON'T KNOW d
REFUSED r
==>

>mil1<

[IF age ge 18 and lt 65] [Is fill HOUSEHOLDER/Are you] on active duty in the military at this time?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

>bmo2<

In what month and year was [SECOND PERSON'S NAME] born?

IF R. IS UNCERTAIN PROBE FOR BEST ESTIMATE.

PROBE IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.

- JAN 1
- FEB 2
- MARCH 3
- APRIL 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

DON'T KNOW d [goto age2]
====>

>byr2<

[no erase]

|_|_| MONTH (1-12)

|_|_|_| YEAR
(1880-2002) 1

DON'T KNOW d [goto age2]
====> [goto SEX2]

>age2<

What is [SECOND PERSON'S NAME'S] age?

INTERVIEWER:

- (1) CODE "0" IF LESS THAN SIX MONTHS.
- (2) CODE "1" IF LESS THAN ONE YEAR BUT MORE THAN SIX MONTHS
- (3) IF RESPONDENT IS UNCERTAIN, PROBE FOR BEST ESTIMATE
- (4) IF RESPONDENT IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.
- (5) IF R STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS AND CHILDREN.

|_|_|_|_| YEARS OLD
(0-120)

18 OR OLDER a
LESS THAN 18 c
====>

>SEX2<

. . . and is [SECOND PERSON'S NAME] male or female?

INTERVIEWER: CODE WITHOUT ASKING IF KNOWN

MALEm
FEMALEf
====>

test:

[if age2 ge 16 and lt 23 goto col2; else goto test grd2]

>col2<

Is [fill NAME] a full-time student?

PROBE: The definition of a full-time student should be based on [fill NAME's] school.

YES..... 1
NO 0

DON'T KNOW d
====>

>test grd2< [if age2 lt 18 goto rel2]

>grd2< What is the highest grade or year of school [fill NAME] completed?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: CODE NUMBER OF YEARS OF SCHOOL. IF TECHNICAL SCHOOL OR SOME COLLEGE, REPEAT QUESTION AND ENTER WHAT RESPONDENT CONSIDERS HIGHEST GRADE OR YEAR OF SCHOOL. IF R. GIVES DEGREE, CODE AS FOLLOWS:

- 12—HIGH SCHOOL OR GED
- 14—ASSOCIATES DEGREE OR JUNIOR COLLEGE
- 16—BA/BS 17—MA/MS 18—MBA/MPH/MPA
- 19—JD/LAW 20—MD/PHD

|__| |__| GRADE COMPLETED
(0-20)

DON'T KNOW d
REFUSED r
==>

>mil2< [IF age2 ge 18 and lt 65] Is [fill NAME] on active duty in the military at this time?

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

>rel2< How is [fill NAME] related to [fill HOUSEHOLDER]?

- HUSBAND 1
 - WIFE 2
 - DOMESTIC PARTNER/SIGNIFICANT OTHER..... 14
 - OWN SON/DAUGHTER..... 3
 - ADOPTED SON/DAUGHTER¹ 13
 - STEP SON/DAUGHTER 4
 - GRAND SON/DAUGHTER 5
 - PARENT 6
 - BROTHER/SISTER..... 7
 - SON/DAUGHTER-IN-LAW..... 8
 - MOTHER/FATHER-IN-LAW..... 9
 - OTHER RELATIVE 10
 - FOSTER CHILD..... 11
 - NON RELATIVE/UNMARRIED PARTNER..... 12
- ====>

Repeat bmo2-rel2 for each person.

test: [if any person is ≥ 18 and relationship to householder is <7> <8>, <9>, <10> or <12> and at least one person, other than householder or spouse, is ≥ 14 and different sex from (this/these) persons; goto mar2; else goto test after sps2.

>mar2< Is [fill NAME] married to anyone who currently lives here?

INTERVIEWER: CODE "NO" FOR COHABITEE

- YES..... 1
 - NO 0 [goto next person or next test]
- ====>

>sps2< To whom is [fill NAME] married?

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

¹Adopted child is treated the same as child for all questions, except ethnicity (which is skipped for own child).

- ====>
- tests: (1) Verify that spouses are at least 14 years of age (NOTE: rule was modified to reflect same sex partner relationship).
- (2) Repeat for each person ge 18 and relationship to householder is <7>, <8>, <9>, <10> or <12>.
- (3) If any person lt 18 and relationship to householder is not equal to <3>, <4>, <11>, or <13> then goto par2; else goto family formation.

>par2< Is anyone who lives here the parent or guardian of [fill NAME]?

YES..... 1

NO 0 [goto next child or next test]

====>

>who2< Who is [fill NAME]'s parent or guardian?

CODE ONLY ONE

INTERVIEWER: IF CHILD HAS TWO PARENTS/GUARDIANS CODE MOTHER OR FEMALE GUARDIAN.

[fill NAME] 1

[fill NAME] 2

[fill NAME] 3

[fill NAME] 4

[fill NAME] 5

[fill NAME] 6

[fill NAME] 7

[fill NAME] 8

====>

Repeat for others meeting test before par2.

Form interviewing units using the following rules:²

²The interviewing unit is defined to reflect an insurance unit, including the household head, spouse, and their dependent children up to but not including age 18, or up to but not including age 23 if they are in school. This definition represents conventional practice in the private insurance market and is similar to the filing unit used by Medicaid and state subsidized insurance programs. The census family (U.S. Bureau of the Census, 1992) sometimes comprises more people than the insurance family. Examples of people typically included in the same census unit, but in different insurance units, are adult children and their families living in

- (1) If no one other than householder or householder and spouse is 18 and older, then the household consists of one family.
- (2) Assign persons whose relationship to householder is parent, and any children linked to them, to a separate family.
- (3) Assign persons whose relationship to householder is mother/father-in-law, and any children linked to them, to a separate family.
- (4) Assign additional married persons, and any children linked to them, to a separate family.
- (5) If any remaining (unmarried) person's relationship to householder is child or step-child, he or she is 18 to 22, and a full time student, assign that person, and any children linked to that person, to householder's family.
- (6) Assign any remaining, unmarried persons 18 and older who are not full time students (and any children linked to them) to separate family units.
- (7) If householder or householder's spouse is under 18 and not a student, then he or she and his or her spouse and/or children are eligible. The householder and spouse (if under 18) should be treated as adult(s) during the interview.
- (8) Exclude a person as ineligible if:
 - (1) Person is unmarried full-time student, 16-22 years of age, and is not a child or ward of householder.
 - (2) Person is under 18, not a householder, relationship to householder is not equal to spouse or child, and no one in household is parent or guardian.
 - (3) Person is active military; however that person can act as survey informant for family interview, and his or her income should be included in income module.
- (9) Exclude interviewing unit as ineligible if all persons 18 and older assigned to the unit are active military.

the homes of their parents; adult siblings living together; and parents living in the home of their adult children. These persons will form separate interviewing units.

Child Random Selection

If the FIU includes no children <18, go to last_ck; else, if the FIU has one child <18, select that child; else, if the FIU includes >1 child <18, select one child at random.

>last_ck< Before we go any further, let's review the list I have of all of the household members.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HOUSEHOLD MEMBERS WITH RESPONDENT

THE HOUSEHOLD ROSTER CANNOT BE CHANGED AFTER THIS SCREEN

<n> OK AS IS
<c> CHANGE ROSTER

>resp< **INTERVIEWER: ENTER THE [r]HIGHLIGHTED[n] NUMBER OF PERSON WITH WHOM YOU'RE SPEAKING (I.E. "BEST RESPONDENT").**

R5: I would like to speak to the person most knowledgeable about your health insurance.

IF RESPONDENT NOT KNOWN ASK: With whom am I speaking?

A PERSON WITH AN * IN FRONT OF THEIR NAME IS NOT ELIGIBLE.

IF YOU ARE TALKING TO A HOUSEHOLD MEMBER WHO IS NOT ELIGIBLE TO BE INTERVIEWED, ASK FOR AN ELIGIBLE HOUSEHOLD MEMBER.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HH MEMBERS WITH RESPONDENT

#	NAME	RELATION	SEX	AGE	FAM	STATUS
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	1
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	2
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	3
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	4
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	5
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	6
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	7
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	8

==>

b. HEALTH INSURANCE

>bbeg< We would like to conduct the rest of the interview with you. We will be sending you a check for \$20 for helping us with the survey.

INTERVIEWER: NOTE ONLY ONE CHILD IS SELECTED PER FAMILY

READ IF NECESSARY: My name is [INTERVIEWER NAME]. I am calling about the Community Tracking Study. The purpose of the Community Tracking Study is to see how changes in health care are affecting people.

TYPE <g> TO CONTINUE ===>

>b1< Next, I will list several types of health insurance or health coverage obtained through jobs, purchased directly, or from government programs. For each one, please tell me if (you/either of you/any of you) are currently covered by that type of plan.

>b1a<

Are READ NAMES covered by a health insurance plan from any current or former employers or unions. [CPS]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBES:

- (1) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.
- (2) Include health insurance plans provided by colleges and universities to students.

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

- NONE/NO ONE/NO OTHER RESPONSES n
- NEED TO DELETE A RESPONSE x

- DON'T KNOW d
- REFUSED r
- ====>

>b1b<

Are READ NAMES covered by a health insurance plan bought on your or their own? [BRFQ]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBES:

- (1) Include insurance plans purchased through a professional association or trade groups.
- (2) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accident.

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r

==>

>b1c<

Are READ NAMES covered by a health insurance plan provided by someone who does not live in this household. [CPS]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBE: Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accidents.

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

- NONE/NO ONE/NO OTHER RESPONSES n
- NEED TO DELETE A RESPONSE x

- DON'T KNOW d
- REFUSED r

==>

>b1d< Are READ NAMES covered by Medicare, the health insurance plan for people 65 years old and older or persons with certain disabilities. [CPS]

IF YES: Who is covered?

PROBE: Include HMO plans, Medicare Advantage plans, as well as the traditional Medicare plan.

INTERVIEWER: INCLUDE IF COVERED BY PART A OR PART B.

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

====>

>test bld< **[IF PERSON IS GE 65 AND NOT COVERED BY MEDICARE goto b1d1; ELSE goto ble]**

>b1d1< PERSON AGE 65 AND **NOT** COVERED BY MEDICARE ASK: I noted that [fill NAME] is [fill AGE], but is not covered by Medicare. Is that correct or did I make a mistake?

CORRECT 1
TO CORRECT MEDICARE 2 [:jb b1d]
TO CORRECT AGE 3 [:jb [INSERT AGE FIELD]]

====>

>b1ex< IF STATE ONLY OFFERS MEDICAID: Are READ NAMES covered by Medicaid, the government assistance program that pays for health care?

YES..... 1 [goto b1e]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test b1f1]

>b1ey< IF STATE OFFERS OTHER SUBSIDIZED PROGRAMS AS WELL AS MEDICAID: Are READ NAMES covered by any of the following government assistance programs that help pay for health care: [Medicaid/fill STATE NAME; fill STATE SPECIFIC PLANS, INCLUDING CHIP], IF YES; Which program is that?

CODE ALL THAT APPLY

Medicaid/fill STATE NAME..... 1 [goto b1e]
fill STATE SPECIFIC PLANS, INCLUDING CHIP
[BLANK IF NO STATE PROGRAM] 2 [goto b1h]

NO ONE COVERED/NO MORE CODES n [goto test b1f1]

SOMEONE COVERED, DON'T KNOW
WHICH PLAN d [goto b1e];
FOLLOW MEDICAID ATTRIBUTE SEQUENCE IF
CAN'T IDENTIFY PROGRAM NAME, fill Medicaid.

REFUSED r [goto test b1f1]
DELETE A CODE x
====>

>b1e<

Are READ NAMES covered by [Medicaid/ill STATE NAME]?

CODE ALL THAT APPLY

[fill NAME] 1
 [fill NAME] 2
 [fill NAME] 3
 [fill NAME] 4
 [fill NAME] 5
 [fill NAME] 6
 [fill NAME] 7
 [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r
 ===> [goto b1f]

>b1h<
CHIP?

Are READ NAMES covered by fill STATE SPECIFIC PLANS, INCLUDING

CODE ALL THAT APPLY

[fill NAME] 1
 [fill NAME] 2
 [fill NAME] 3
 [fill NAME] 4
 [fill NAME] 5
 [fill NAME] 6
 [fill NAME] 7
 [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r
 ===>

>b1f< Are READ NAMES covered by TRICARE, VA, CHAMP-VA, or some other military health care. [NHIS]

IF YES: Who is covered?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====>

>test b1f1< [IF b1f = NO ONE, goto b1g; ELSE goto b1f1]

>b1f1< Which plan is that-- TRICARE STANDARD, TRICARE PRIME, TRICARE EXTRA, Tricare for life, VA, CHAMP-VA, or some other military health plan?

INTERVIEWER: CODE ALL THAT APPLY

TRICARE STANDARD 1
TRICARE PRIME 2
TRICARE EXTRA 3
TRICARE FOR LIFE 4
VA 5
CHAMP-VA 6
OTHER [SPECIFY] 7

DON'T KNOW TYPE d
REFUSED r
====>

PERMITS IHS AND OTHER PLANS TO BE REPORTED.

>b1g< Are READ NAMES covered by the Indian Health Service. IF YES: Who is covered?

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

==>

>test b1i1< **If all family members covered by some type of health insurance goto test b2, else goto b1i1.**

>bli1< Are READ NAMES covered by a health insurance plan that I have not mentioned. IF YES: What is the name of the plan?

YES [SPECIFY]..... 1
NO 0 [goto test blij]

DON'T KNOW d
REFUSED r
==>

>bli2< Who is covered by [fill NAME SPECIFIED]?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES 0
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test b1j< **[IF A FAMILY MEMBER WAS NOT COVERED UNDER SOME PLAN, goto bij; ELSE goto test b2]**

>bij< **INTERVIEWER:** READ FOR FIRST PERSON ONLY (According to the information we have, [fill NAME] does not have health care coverage of any kind). Does (he/she) have health insurance or coverage through a plan I might have missed?

INTERVIEWER: REVIEW PLANS IF INFORMANT IS UNSURE.

- NO/NOT COVERED BY ANY PLAN 0
 - HEALTH INSURANCE PLAN FROM A
CURRENT OR PAST EMPLOYER/
UNION/SCHOOL 1
 - A HEALTH INSURANCE PLAN BOUGHT ON
HIS/HER OWN/PROF. ASSN. 2
 - A PLAN BOUGHT BY SOMEONE WHO
DOES NOT LIVE IN THIS HOUSEHOLD 3
 - MEDICARE 4
 - MEDICAID/STATE NAME 5
 - CHAMPUS/CHAMP-VA, TRICARE, VA,
OTHER MILITARY 6
 - INDIAN HEALTH SERVICE 7
 - [fill STATE PLAN] 8
 - OTHER PLAN [SPECIFY] 9

 - DON'T KNOW d
 - REFUSED r
- ====> [goto NEXT UNINSURED PERSON OR goto test b2]

>test b2< **IF AT LEAST ONE FAMILY MEMBER IS PRIVATELY INSURED (b1a, b1b, or b1c ge1) AND IS NOT COVERED BY MEDICARE (b1d) GO TO b2; ELSE, goto Test b401].**

>b2<

In how many different health plans (obtained through current or past employers) (is/are) [READ NAMES BELOW WITH * IN FRONT] enrolled?

PROBE: Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

|____| PLANS
(1-3)

0.....0 [go back to b1 and correct]

DON'T KNOW.....d

REFUSED.....r

====>

>b231<

Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. [NHIS]

In whose name is this plan?³

INTERVIEWER: CODE NON-SPECIFIED POLICY HOLDER IN "OTHER."

[fill NAME] 1

[fill NAME] 2

[fill NAME] 3

[fill NAME] 4

[fill NAME] 5

[fill NAME] 6

[fill NAME] 7

[fill NAME] 8

OTHER [SPECIFY] 9

DON'T KNOW.....d

REFUSED.....r

====>

³The program lists and allows all persons in the household 18 and over, plus the householder and spouse regardless of age, to be named as policyholder.

>test b24< [if b2 gt <1>, goto b241; else goto test b25]. It is unnecessary to ask b241 if the family has only one plan because coverage was obtained in b1a, b1b, or b1c.

>b241< Who is covered by POLICY HOLDER'S NAME plan? NOTE: SINCE WE ARE NOT GETTING PLAN NAMES, I DIFFERENTIATED PLANS BY POLICY HOLDER. THERE ARE ALMOST NO PERSONS WITH MULTIPLE PRIVATE POLICIES UNDER THE SAME POLICY HOLDER.

[READ ASTERISKED NAMES IF NECESSARY.]

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

====>

>test b25< [if b1b ge <1> or b1c ge <1> goto b251; else store <1> in b251 and goto b291]. This question does not need to be asked if the only private plans are employer-based.

>b251< Was this plan originally obtained through a current or past employer or union?

YES..... 1 [goto b291]
NO 0

DON'T KNOW d
REFUSED r

====> [goto b271]

b271< Was this plan obtained through a state or federal government program that helps pay insurance coverage?

YES..... 1 [goto b281]
NO 0 [goto b291]

DON'T KNOW d [goto b281]
REFUSED r
====> [goto b291]

>b281< Do you recall the name of the program?

PROBE: Some programs that help provide health insurance include [fill STATE PROGRAMS].

[fill STATE PROGRAMS] 1
OTHER [SPECIFY] 9

DON'T KNOW d
REFUSED r
====>

>b291< Did READ ASTERISKED NAMES enroll in this plan in the past 12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in this plan in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

IF RESPONDENT SAYS HE/SHE STAYED WITH THE SAME PLAN DURING OPEN ENROLLMENT, CODE NO.

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
NO ONE..... n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
===>

>b291conf1< Just to confirm: you/[fill name] enrolled in this plan sometime in the past 12 months, and were **not** enrolled in this plan prior to that enrollment?

New enrollment in last 12 months 1
Not new enrollment 2[goto b291]

>b361< Is this plan an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
===>

>ngi1< Does this health plan pay for at least some of the cost of prescription medicines prescribed by the doctor?

- YES 1
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====>

>test b311< [if b251 ne <1> goto b311; else, if b251 <eq> 1 and policy holder is listed in b231, go to b31111; else, go totestb40]

NOTE THAT A POLICY HOLDER ONLY HAS TO BE LISTED IN B231; THE INFORMANT DOES NOT HAVE TO BE THE POLICY HOLDER.

NOTE: CONSOLIDATED ESI AND NON-GROUP QUESTIONS

ESI PLANS:

>b3111< For coverage through this plan, does anyone in the family pay all of the premium or cost, some of the premium or cost, or none of the premium or cost?

PROBE: Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.

- YES, PAY ALL OF PREMIUM/COST 1
 - YES, PAY SOME OF PREMIUM/COST 2
 - YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM OR COST 3
 - NO, PAY NONE OF THE COST 0 [goto CDHP1]

 - DON'T KNOW d [goto CDHP1]
 - REFUSED r [goto CDHP1]
- ====>

>b31121@at<: How much is (POLICYHOLDER's NAME) premium for health insurance through (your/his/her) employer?

PROBE: Your best estimate of the amount (POLICYHOLDER NAME) pays for coverage each pay period would be fine.

- NONE 0

 - \$|_|_|_|_|_|
 - \$(10-9997) [goto b31121@p]

 - DON'T KNOW d
 - REFUSED r
- ====> [gotoCDHP1]

>b31121@p< INTERVIEWER: CODE TIME PERIOD.

- WEEK 1
 - EVERY OTHER WEEK 2
 - TWICE A MONTH 3
 - MONTH 4
 - QUARTER 5
 - SEMI-ANNUAL 6
 - ANNUAL 7
- ====>

CDHP11. A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. Does this health plan have a deductible?

PROBE: IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY: 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.

If the R asks whether in-network or out-of network, say in-network.

- YES 1
- NO 0 [goto CDHP31]
- DON'T KNOW d [goto CDHP31]
- REFUSED r [goto CDHP31]

====>

CATI INSERT INDIVIDUAL IF ONE PERSON IS COVERED AND FAMILY IF MORE THAN ONE PERSON IS COVERED (INDIVIDUAL VERSUS FAMILY COVERAGE SHOULD BE BASED ON b241).

CDHP21. Is the annual (individual/family) deductible less than (\$1,100/\$2,200) or more than (\$1,100/\$2,200)?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

[TEST: IF CDHP21 IS MORE THAN (\$1,100/\$2,200) GO TO CDHP2aF1; ELSE GO TO CDHP31]

>CDHP2aF1< IF INDIVIDUAL: Is the annual deductible from \$1,100 to under \$2,000, from \$2000 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

IF FAMILY: Is the annual deductible from \$2,200 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network

CDHP31 [ESI ONLY] Some employers offer flexible spending accounts that allow employees to set aside pre-tax dollars of their own money that can be used to reimburse them for health care expenses incurred during the year. A similar type of account is sometimes available for child care expenses, as well. (Do you/Does POLICY HOLDER) currently participate in a flexible spending account to obtain reimbursement for health expenses? (Commonwealth/EBRI modified)

YES..... 1
 NO 0

 DON'T KNOW d
 REFUSED r

CDHP4. Some health plans offer a special type of savings account that can be used to pay for medical expenses. These plans are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts).

Does health plan have a special account or fund you can use to pay for medical expenses?

YES..... 1
 NO 0

 DON'T KNOW d
 REFUSED r

CDHP5. Now I'm going to read you a list of different types of information that some health plans provide to the people they insure. For each one, please tell me if your health plan provides this information or not.

- a. Background information on doctors in the plan
- b. Information comparing what local doctors charge for the same service
- c. Information comparing what local hospitals charge for the same service
- d. Information comparing the quality and performance of local doctors
- e. Information comparing the quality and performance of local hospitals

YES..... 1
 NO 0

 DON'T KNOW d
 REFUSED r

b381< Does POLICY HOLDER'S employer offer more than one health insurance plan to its employees?

- YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====> [goto test b40]

>b311< **NON-EMPLOYER AND NON-UNION PLANS:**

How much is the insurance premium for this policy?

- NONE 0

 - \$|_|_|_|_|_|
 - \$(10-9997) [goto b321]

 - DON'T KNOW d
 - REFUSED r
- ====> [goto CDHPNG1]

>b321< INTERVIEWER: CODE TIME PERIOD.

- WEEK 1
 - EVERY OTHER WEEK 2
 - TWICE A MONTH 3
 - MONTH 4
 - QUARTER 5
 - SEMI-ANNUAL 6
 - ANNUAL 7
- ====>

CDHPNG1. A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. Does this health plan have a deductible? If YES, ASK CDHPNG2; IF NO, DK, OR RF, GO TO CDHPNG4

- YES..... 1
- NO 0 [goto CDHPNG4]

- DON'T KNOW d [goto CDHPNG4]
- REFUSED r [goto CDHPNG4]

PROBE: IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY: 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.

CATI INSERT INDIVIDUAL IF ONE PERSON IS COVERED AND FAMILY IF MORE THAN ONE PERSON IS COVERED (INDIVIUDAL VERSUS FAMILY COVERAGE SHOULD BE BASED ON b241).

CDHPNG2. Is the annual (individual/family) deductible less than (\$1,100/\$2,200) or more than (\$1,100/\$2,200)?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

[TEST [IF CDHPNG2 is more than (\$1,100/\$2,200) GO TO CDHPNG2A; ELSE GO TO CHDPNG4]

CDHPNG2A. IF INDIVIDUAL: Is the annual deductible from \$1,100 to under \$2,000, from \$2000 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

IF FAMILY: Is the annual deductible from \$2,200 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network

CDHPNG4 Some health plans offer a special type of savings account that can be used to pay for medical expenses. These plans are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal care accounts, Personal medical funds, or Choice funds.

Does this health plan have a special account or fund you can use to pay for medical expenses?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

CDHP5. Now I'm going to read you a list of different types of information that some health plans provide to the people they insure. For each one, please tell me if POLICY HOLDER'S health plan provides this information or not.

- a. Background information on doctors in the plan
- b. Information comparing what local doctors charge for the same service
- c. Information comparing what local hospitals charge for the same service
- d. Information comparing the quality and performance of local doctors
- e. Information comparing the quality and performance of local hospitals

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

>test b40< IF b2>1 (MORE THAN ONE PRIVATE PLAN), ASK b231-CDHP5 FOR SECOND PLAN; IF b2=3, ASK 231-CDHP5 FOR THIRDPLAN; ELSE IF ANY FAMILY MEMBER HAS MILITARY COVERAGE (b1f ge<1>) AND AT LEAST ONE PERSON WITH MILITARY COVERAGE IS NOT COVERED BY SOME OTHER HEALTH PLAN, goto b41; ELSE goto test b51]

>b41< Did [fill NAMES OF PERSONS COVERED (b1f1)] enroll in [NAME OF PLAN] in the past 12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [fill PLAN] after [fill DATE]?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

IF RESPONDENT SAYS HE/SHE STAYED WITH THE SAME PLAN DURING OPEN ENROLLMENT, CODE NO.

[fill NAME] 1
[fill NAME] 2
NO ONE n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====> [goto test b51]

>test b51< Medicare [if b1d ge <1> goto b54R5; else goto test b61]

>B54R5< People who qualify for Medicare can obtain their medical coverage for things like doctor or hospital care in different ways. Which of the following describes (your/NAME's) Medicare coverage?

- 1 Regular Medicare
- 2 A Medicare HMO plan
- 3 Or another type of Medicare health plan
- 8 DK
- 9 RF

PROBES:

1) With a Medicare HMO plan, you must generally receive care from HMO doctors. Otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency

(2) In addition to regular Medicare and Medicare HMOs, Medicare now offers other types of health plans that are not HMOs. These are sometimes referred to as Medicare Advantage plans.

INTERVIEWER INSTRUCTION: IF THE RESPONDENT FEELS THAT HIS OR HER MEDICARE COVERAGE DOES NOT FIT INTO THESE THREE CATEGORIES OR DOESN'T KNOW, CODE DK.

TEST: IF B54R5=2 OR 3, GO TO b54rx; else ask b54supp:

>B54supp< Medicare supplemental or Medigap policies are designed to cover the costs of doctor visits or hospital care that are not covered by Medicare. (Are you/Is NAME) covered by a supplemental Medigap policy (you/NAME) bought on (your/his/her) own or through a previous or current employer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

TEST: IF PERSON HAS MEDICAID (b1ex <eq> 1), go to b57; ELSE ASK b54rx. Only Medicaid beneficiaries should be skipped over b54rx; persons who have state plans should be asked the question.

b54rx (Do you/Does NAME) have prescription drug coverage through Medicare Part D? People get this type of coverage either through a Medicare health plan, such as a Medicare HMO, that covers prescription drugs, or through a separate Medicare prescription drug plan.

YES..... 1[goto b57]
NO 0[goto testb54mg]

DON'T KNOW d[goto testb54mg]
REFUSED..... r[goto testb54mg]

>TEST 54mg<IF b54rx=NO or DK, or RF AND B1A=1 or B1C =1 [PERSON HAS COVERAGE THROUGH A PRIVATE PLAN] GO TO b54mg; ELSE GO TO b57

b54mg (Does your/Does NAME's) health plan from a current or former employer or union pay for at least some of the cost of prescription medicines?

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED r

>b57< Did [fill NAMES OF MEDICARE ENROLLEES] enroll in [Medicare] in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [Medicare] in the past 12 months?

CODE ALL THAT APPLY

- [fill NAME] 1
 - [fill NAME] 2
 - [fill NAME] 3
 - [fill NAME] 4
 - [fill NAME] 5
 - [fill NAME] 6
 - [fill NAME] 7
 - [fill NAME] 8
 - NONE/NO ONE/NO OTHER RESPONSES n
 - NEED TO DELETE A RESPONSE x

 - DON'T KNOW d
 - REFUSED r
- ====>

>test b61< ALL MEDICAID RECIPIENTS goto b64 [If b1ex <eq> 1 or b1ey eq <1> or <d>) goto b64; else goto test b70.]

NOTE: Deleted b61, b62 and b63.

>b64< Under (Medicaid/STATE NAME) (are/is) [fill NAMES] signed up with an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

NOTE: Deleted b65a, b65b, and b66

>b67< Did [fill NAMES OF MEDICAID BENEFICIARIES] enroll in [STATE NAME/Medicaid] in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in (STATE NAME/Medicaid) in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8
NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====>

>b57c< [IF B57 ge<1>] Just to confirm: you enrolled in this plan sometime in the past 12 months, and were **not** enrolled in this plan prior to that enrollment?

NEW ENROLLMENT IN LAST 12 MONTHS..... 1
NOT A NEW ENROLLMENT..... 2[CHANGE b57]

>b69prem< Does anyone in the family pay anything for the coverage through (STATE NAME/Medicaid)? Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay. [MEPS]

PROBE: Some (Medicaid/STATE NAME) health insurance plans charge policyholders a premium or fee to receive insurance coverage. This payment, which is made monthly or according to some other time period, is not the same as a copayment or deductible.

YES [go to b69prem2].....	1
NO	0
DON'T KNOW	d
REFUSED.....	r
====> [goto testb70]	

>b69prem2< How much does your family pay for [STATE NAME/Medicaid] coverage? [MEPS]

PROBES: (1) Is that per year, per month, per week, or what? (2) Your best estimate would be fine.

NONE	0
\$ _ _ _ _ _	
\$(10-9997)	[goto b69prem3]
DON'T KNOW	d
REFUSED.....	r
====> [goto testb70]	

>b69prem3< INTERVIEWER: CODE TIME PERIOD.

WEEK	1
EVERY OTHER WEEK	2
TWICE A MONTH.....	3
MONTH.....	4
QUARTER	5
SEMI-ANNUAL	6
ANNUAL	7
====> [goto btestb70]	

>test b70< **ASKED IF ANY PERSON HAS A STATE PLAN, INCLUDING CHIP, OR OTHER PLAN AND NO PRIVATE PLANS. [If b1a, b1b, and b1c ARE NOT COVERING PERSON i, AND PERSON i HAS COVERAGE BY b1h or b1i1, FOR ANY PERSON I go to b75; else, go to test b80].**

>b75<

Is [fill NAME OF STATE PROGRAM]an HMO, that is, a Health Maintenance Organization?

PROBE: WITH an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

==>

NOTE: Deleted b75a, b75b, and b76

>b77<

Did [fill NAMES OF PLAN MEMBERS] enroll in [NAME OF STATE PROGRAM] in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NO ONE AFTER [fill DATE]/NO ONE ELSE..... n

DON'T KNOW d
REFUSED..... r

==>

>b78prem< SCHIP/OTHER STATE PROGRAM PREMIUM

Does anyone in the family pay anything for the coverage through (NAME OF STATE/SCHIP PROGRAM)? Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay.[MEPS]

PROBE: Some (NAME OF STATE/SCHIP PROGRAM) health insurance plans charge policy holders a premium or fee to receive insurance coverage. This payment, which is made monthly or according to some other time period, is not the same as a copayment or deductible.

- YES [go to b78prem2]..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- ====> [goto testb80]

>b78prem2< How much does your family pay for [NAME OF STATE/SCHIP PROGRAM] coverage? [MEPS]

PROBES: (1) Is that per year, per month, per week, or what? (2) Your best estimate would be fine.

- NONE 0
 - \$|_|_|_|_|_|_|
 - \$(10-9997) [goto b78prem3]
 - DON'T KNOW d
 - REFUSED r
- ====> [goto testb80]

>b78prem3< INTERVIEWER: CODE TIME PERIOD.

- WEEK 1
 - EVERY OTHER WEEK 2
 - TWICE A MONTH 3
 - MONTH 4
 - QUARTER 5
 - SEMI-ANNUAL 6
 - ANNUAL 7
- ====> [goto testb80]

CURRENTLY UNINSURED

>test b80< **[IF ONE OR MORE FAMILY MEMBERS IS CURRENTLY UNINSURED, goto b80 FOR FIRST PERSON; ELSE goto TEST b85]**

>b801< At any time during the past 12 months [was fill NAME/were you] covered by [Medicaid/fill STATE NAME], [fill STATE PROGRAM], or a health insurance plan obtained through work, a union, or purchased directly?

- YES..... 1 [goto b81]
- NO 0

- DON'T KNOW d
- REFUSED r

====> [goto NEXT UNCOVERED PERSON or test b85]

>b81< Just before becoming uninsured, what type of health insurance coverage did ([fill NAME]/you) have? Was it . . .

INTERVIEWER: CODE ONLY ONE.

- a health insurance from an employer or union or purchased directly from insurance company 1 [goto b83]
 - Medicaid/fill state name..... 2 [goto b83]
 - [fill state plan]..... 3 [goto b83]

 - Champus, Champ-VA, Tricare, VA, or other military coverage 4
 - Indian health service 5
 - NONE 0

 - DON'T KNOW d
 - REFUSED r
- ====> [goto next uncovered person or test b85]

>b83<

In what month did [fill NAME'S/your] health insurance coverage under this plan stop?

- JAN..... 1
 - FEB..... 2
 - MARCH..... 3
 - APRIL..... 4
 - MAY..... 5
 - JUNE..... 6
 - JULY..... 7
 - AUGUST..... 8
 - SEPT..... 9
 - OCT..... 10
 - NOV..... 11
 - DEC..... 12

 - DON'T KNOW..... d
 - REFUSED..... r
- ==>

>b84<

Why did [fill NAME]'s health insurance coverage stop?

INTERVIEWER: CODE ALL THAT APPLY; READ RESPONSES IF NECESSARY.

- LOST JOB OR CHANGED EMPLOYERS..... 1
 - SPOUSE/PARENT LOST JOB OR CHANGED EMPLOYERS..... 2
 - GOT DIVORCED OR SEPARATED/ DEATH OF SPOUSE OR PARENT..... 3
 - BECAME INELIGIBLE BECAUSE OF AGE/ LEFT SCHOOL..... 4
 - EMPLOYER STOPPED OFFERING COVERAGE..... 5
 - CUT BACK TO PART TIME/ BECAME TEMPORARY EMPLOYEE..... 6
 - BENEFITS FROM EMPLOYER/ FORMER EMPLOYER RAN OUT..... 7
 - COULDN'T AFFORD TO PAY THE PREMIUMS..... 8
 - INSURANCE PLAN RAISED COST OF PREMIUMS... 9
 - INSURANCE COMPANY REFUSED COVERAGE..... 10
 - OR SOMETHING ELSE [SPECIFY]..... 11

 - NONE/NO ONE/NO OTHER RESPONSES..... n
 - NEED TO DELETE A RESPONSE..... x

 - DON'T KNOW..... d
 - REFUSED..... r
- ==> [goto next uncovered person or test b85]

CURRENTLY INSURED

>test b85< [IF ONE OR MORE FAMILY MEMBERS ARE CURRENTLY INSURED AND COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b851; ELSE goto TEST b90]

>b851< During the month just before [fill NAME]’s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did [you/he/she] have? Was it . . .

INTERVIEWER: CODE ONLY ONE.

- Private insurance from an employer or union or directly purchased from an insurance company 1
 - [Medicaid/fill state name]..... 2
 - [fill state plan] 3
 - Champus, Champ-VA, Tricare or other military coverage 4
 - Indian health service 5
 - a different Medicare plan⁴ [SUPPRESS IF PERSON LT 65] 6
 - or did (he/she/you) not have any health insurance coverage 0]
 - NOT APPLICABLE [NEWBORN/FOREIGN COVERAGE] 7
 - DON'T KNOW d [
 - REFUSED r [
- ==>

>test b861< [IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b861; ELSE goto TEST b881]

⁴Can capture prior coverage of Medicare beneficiaries who had changes in last 12 months here.

>b861<

Were [fill NAMES OF OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO] covered under this plan?

CODE ALL THAT APPLY

[fill NAME] 1
 [fill NAME] 2
 [fill NAME] 3
 [fill NAME] 4
 [fill NAME] 5
 [fill NAME] 6
 [fill NAME] 7
 [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r
 ===>

>test b881< [If b851 eq <1> and current coverage is private (bla, blb or blc) go to b881; ELSE goto test b852]

>b881<

Why did [fill NAME/you] change insurance plans at that time?

CODE ALL THAT APPLY.

OWN/SPOUSE/PARENT CHANGE JOB 1
 EMPLOYER OFFERINGS CHANGED 2
 CURRENT PLAN IS LESS EXPENSIVE 3
 CURRENT PLAN HAS BETTER SERVICES:
 PREFERRED DOCTORS, BETTER QUALITY,
 CONVENIENT LOCATION, ETC. 4
 OTHER [SPECIFY] 5

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r
 ===>

>test b852< [IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, AND WHO WERE NOT CITED IN b851 or b861, ASK b852; ELSE goto TEST b902].

>b852< During the month just before [fill NAME]'s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did [you/he/she] have? Was it . . .

INTERVIEWER: CODE ONLY ONE.

- private insurance from an employer or union or directly purchased from an insurance company 1
- [Medicaid/fill state name] 2
- [fill state plan] 3
- CHAMPUS, CHAMP-VA, TRICARE or other military coverage 4
- Indian health service 5
- a different Medicare plan [SUPPRESS IF PERSON LT 65] 6
- or did (he/she/you) not have any health insurance coverage 0 [goto next insured person whose coverage began LT 12 months ago or test b90]

- DON'T KNOW d [goto next insured person whose coverage began LT 12 months ago or test b90]

- REFUSED r [goto next insured person whose coverage began LT 12 months ago or test b90]

====>

>test b882< [If b852 eq <1> and current coverage is private (bla, blb or blc) go to b882; ELSE goto test b902]

>b882< Why did [fill NAME/you] change insurance plans at that time?

CODE ALL THAT APPLY.

OWN/SPOUSE/PARENT CHANGED JOB..... 1
EMPLOYER OFFERINGS CHANGED.....2
CURRENT PLAN IS LESS EXPENSIVE..... 3
CURRENT PLAN HAS BETTER SERVICES:
PREFERRED DOCTORS, BETTER QUALITY,
CONVENIENT LOCATION, ETC. ⁵..... 4
OTHER [SPECIFY]..... 5

DON'T KNOW..... d
REFUSED..... r
====>

>test b90< IF NON-GROUP POLICY IN FIU (b1b>=1 AND B251 NE 1) and policy holder is <65, GO TO NGI2A; ELSE, If anyone in FIU <65, GO TO NGI1; ELSE GO TO B951.

NGI1. Some people buy health insurance on their own, rather than through an employer, union, or government program. In the past three years, that is, since (month, yr), have you or [insert other adults in FIU] ever tried to buy health insurance on your own?

YES..... 1
NO 0 [goto b951]

DON'T KNOW..... d [goto b951]
REFUSED..... r [goto b951]

NGI2. When you [or INSERT OTHER ADULTS IN FIU] tried to buy health insurance on your own, did any company turn you down, charge a higher price because of health problems, or exclude a specific health problem?

YES..... 1 [goto NGI3]
NO 0 [goto NGI3]

DON'T KNOW..... d [goto NGI3]
REFUSED..... r [goto NGI3]

⁵Frequency for particular services is too low to justify burden and cost of separate coding.

NGI2A [FIU HAS NON-GROUP POLICY]: In the past three years, that is, since (month, yr), has any health insurance company from which you tried to buy health insurance ever turned you down, charged a higher price because of health problems, or excluded a specific health problem? [GO TO NGI4] (YES, NO, DK, RF)

YES..... 1 [goto NGI4]
 NO 0 [goto NGI4]

DON'T KNOW d [goto NGI4]
 REFUSED..... r [goto NGI4]

NGI3. Did you [or INSERT OTHER ADULTS IN FIU] end up buying a health insurance policy on your own?

YES..... 1 [goto NGI4]
 NO 0 [goto b951]

DON'T KNOW d [goto b951]
 REFUSED..... r [goto b951]

NGI4@mo. In what month and year did you [or INSERT OTHER ADULTS IN FIU] buy (this/your current) health insurance policy?

- | | |
|-----------|----------|
| (1) JAN | (7) JULY |
| (2) FEB | (8) AUG |
| (3) MARCH | (9) SEPT |
| (4) APRIL | (10) OCT |
| (5) MAY | (11) NOV |
| (6) JUNE | (12) DEC |
- (d) DON'T KNOW (r) REFUSED ___ YEAR ___

PROBE: Your best estimate is fine. INSERT "this" IF NGI3=1 AND "your current" IF NGI2A WAS ASKED

TEST: IF NGI2A WAS ASKED (CURRENT NON-GROUP HOLDER), GO TO b951; else go to NGI5

NGI5. For how many months did you [or INSERT OTHER ADULTS IN FIU] keep this health insurance policy?

- <1-36>
- <d> DON'T KNOW
 <r> REFUSED

>b951< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.⁶

PROBE: CODE 7 IF R. SAYS THE STATEMENT DOES NOT APPLY.

- STRONGLY AGREE 1
- SOMEWHAT AGREE..... 2
- NEITHER AGREE NOR DISAGREE 3
- SOMEWHAT DISAGREE 4
- STRONGLY DISAGREE 5

- NOT APPLICABLE..... 7

- DON'T KNOW d
- REFUSED r

c. RESOURCE USE DURING THE LAST 12 MONTHS

>c101< Since [DATE 12 MONTHS AGO], were [fill NAMES OF FAMILY MEMBERS] a patient in a hospital overnight?

PROBE: DO NOT INCLUDE ANY OVERNIGHT STAYS IN THE EMERGENCY ROOM.

- YES..... 1 [goto c11]
- NO 0

- DON'T KNOW d
- REFUSED r
- ====> [goto test c20]

>c11< Who was in a hospital overnight? (Anyone else?)

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

⁶Source: Royal, Kenneth, et al, **The Gallup Arizona Health Care Poll**. P.18, The Gallup Organization, 1995. Distributions by coverage available.

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

===>

>test c121< [ASK FOR EACH PERSON WITH A HOSPITAL STAY]

>c121< How many different times did [fill NAME] stay in any hospital overnight or longer during the past 12 months?

PROBE: Your best estimate is fine.

|__|__| TIMES
(1-20)

DON'T KNOW d
REFUSED r

===>

>test c131< [if (FEMALE AND GE 12 AND LE 45) or (CHILD LE 1) goto c131; else goto c151]

>c131< FEMALE, 12-45 YEARS OLD: [Were any of these hospital stays/was this hospital stay] for delivery of a baby?

CHILD: Did [fill CHILD LE 1] stay in the hospital overnight at birth?

YES..... 1 [goto c141]
NO 0

DON'T KNOW d
REFUSED r
==> [goto c151]

>c141< Have you included this hospitalization in the number of hospital stays you gave me for [fill NAME]?

PROBE: Was [fill NAME's] stay in the hospital overnight for delivery.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

>c151< [For how many of the [fill c121] times [fill NAME] stayed in the hospital] (was/were) (he/she/you) admitted through the emergency room?

|__|__| TIMES
(0-20)

DON'T KNOW d
REFUSED r

NOTE: NUMBER MUST BE LE # ADMISSIONS IN c121.
==>

>c161< [For [fill NAME]'s [fill c121] hospital stay(s) during the past 12 months,] how many nights was (he/she) in the hospital altogether?

____|____|____| NIGHTS
(1-366)

DON'T KNOW d
REFUSED r
===>

NOTE: c161 MUST BE GE c121; ELSE VERIFY.

REPEAT FOR OTHER FAMILY MEMBERS WITH HOSPITAL STAYS. THEN ASK REMAINING RESOURCE USE QUESTIONS FOR EACH FAMILY MEMBER, BEGINNING WITH INFORMANT.

>test c20< **SELECT WORDING BASED ON WHETHER PERSON HAD ER VISIT RESULTING IN HOSPITAL ADMISSION**

>c211< ER/HOSPITAL ADMISSION: [The next questions are about [fill NAME]⁷. Not counting [fill NAME]'s [fill c151] emergency room visits you told me about, [have/has] [fill NAME] gone to a hospital emergency room in the past 12 months to get medical treatment?

NO ER/HOSPITAL ADMISSION: [The next questions are about [fill NAME]].¹ During the past 12 months, [have/has] [fill NAME] gone to a hospital emergency room to get medical treatment?

PROBE: Count all visits to the ER, including visits where you received a brief exam, but were sent elsewhere.

YES..... 1 [goto c221]
NO 0

DON'T KNOW d
REFUSED r
===> [goto c311)

⁷Delete phrase for one person family.

>c221<

[Again, not counting the [fill 151] emergency room visits you told me about,]
During the past 12 months, how many times has [fill NAME] gone to a hospital
emergency room?

PROBE: Count all visits to the ER, including visits where [fill NAME] received a
brief exam, but were sent elsewhere.

PROBE: Your best estimate is fine.

|__|__| TIMES
(1-20)

DON'T KNOW d [goto c231]
REFUSED r
===> [gotoc311]

>c231<

Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

1..... 1
2-3..... 2
4-9..... 3
10 - 12..... 4
13 OR MORE 5
DON'T KNOW d
REFUSED r
===>

>c311<

Since [insert MONTH/YEAR 12 months ago], about how many times has [fill
NAME] seen a doctor? [IF ER OR HOSPITAL VISIT: Do not count doctors seen
while an overnight patient in a hospital or in the emergency room.]

PROBES: (1) Include osteopathic doctors and psychiatrists.
(2) Include outpatient visits and outpatient surgeries.
(3) Exclude dentists visits, chiropractor visits, and telephone calls to
doctors.
(4) Your best estimate is fine.

NO/NONE 0 [goto c331]

|__|__| VISITS [goto c331]
(1-96)

DON'T KNOW d [goto c321]
REFUSED r [gotoc331]
===>

>c321<

Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

- 1..... 1
- 2-3..... 2
- 4-9..... 3
- 10 - 12..... 4
- 13 OR MORE..... 5

DON'T KNOW..... d []

REFUSED..... r

====>

>c331<

[Not counting [fill NAME'S] [fill c311 or 321] doctor visits you already told me about,] has [fill NAME] seen a nurse practitioner, physician's assistant, [or midwife] during the last 12 months?

IF YES: How many times has [fill NAME] seen a nurse practitioner, physician's assistant [or midwife] during the last 12 months?

- PROBES:**
- (1) Your best estimate will be fine.
 - (2) Include times you got a shot, but did not see the doctor.
 - (3) Do not include visits where [FILL NAME] saw only a registered nurse.

NO/NONE..... 0

|_|_| VISITS..... (1-96)

DON'T KNOW..... d [goto c341]

REFUSED..... r

====> [go to c811]

>c341<

Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

- 1..... 1
- 2-3..... 2
- 4-9..... 3
- 10 - 12..... 4
- 13 OR MORE..... 5

DON'T KNOW..... d

REFUSED..... r

====>

c. UNMET NEED

>c811< [INFORMANT SELF RESPONSE] Next, during the past 12 months, was there any time when you didn't get the medical care you needed?

INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>c821< [INFORMANT SELF RESPONSE] And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test c831< [IF c811 EQ <1> OR <d> OR c821 EQ <1> or <d> goto c831; ELSE goto c841]

>c831< [INFORMANT SELF RESPONSE] Did you not get the medical care you needed or have delays getting medical care you needed for any of the following reasons?

CODE ALL THAT APPLY.

- Worry about the cost 1
- The doctor or hospital wouldn't accept your health insurance 2
- Your health plan wouldn't pay for the treatment 3
- You couldn't get an appointment soon enough..... 4
- You couldn't get there when the doctor's office or clinic was open..... 5
- It takes too long to get to the doctor's office or clinic from your house or work..... 6
- You couldn't get through on the telephone 7
- You were too busy with work or other commitments to take the time 8
- You didn't think the problem was serious enough..... 9
- Or any other reason I haven't mentioned [SPECIFY] 0

-
- NONE CITED/NO OTHER RESPONSES n
 - NEED TO DELETE A RESPONSE x

 - DON'T KNOW d
 - REFUSED r
- ==>

>c841< During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?⁸

- YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ==>

>test c93< [ASK c22...c842...FOR NEXT PERSON⁹; THEN gotoc92]

⁸Source: NHIS, AAU.111

⁹Include unmet need (k811...k831) for child, substituting child's home for second person.

>c92<

During the past 12 months, about how much did (you/your family) spend out-of-pocket for medical care? Do not include the cost of dental care, health insurance premiums, or any costs that are paid by your health insurance.

PROBES: (1) Your best estimate is fine.

(2) Include out-of-pocket expenses for prescription drugs, co-payments, and deductibles, but do not include health insurance premiums, dental costs, or any other costs paid by your health insurance.

READ CATEGORIES IF NECESSARY.

NONE 0

\$ |__|__|,|__|__|__|
(10-96,000)

DON'T KNOW d [goto c93]

REFUSED r

====> [gotoc94]

>c93<

Would that be less than \$500, \$500 to less than \$2,000, \$2,000 to less than \$3,000, \$3,000 to less than \$5,000, or \$5,000 or more?

READ CATEGORIES IF NECESSARY.

NONE 0

LESS THAN \$500 1

\$500 TO \$1,999 2

\$2,000 TO \$2,999 3

\$3,000 TO \$4,999 4

\$5,000 OR MORE 5

DON'T KNOW d

REFUSED r

====>

>c94<

During the past 12 months, (have you/has your family) had any problems paying medical bills?

YES..... 1 [goto c95]

NO 0

DON'T KNOW d

REFUSED r

====> [gotoRC1]

>c95< Because of problems paying medical bills during the past 12 months, (have you/has your family)...

INTERVIEWER: REPEAT STEM IF NECESSARY

PROGRAMMER NOTE: ROTATE c95a-c95g

	YES	NO	DON'T KNOW	REFUSED
a. Been contacted by a collection agency?	1	0	d	r
b. Had problems paying for other necessities?	1	0	d	r
c. Put off major purchases, such as a new home or car?	1	0	d	r
d. Had to take money out of savings?	1	0	d	r
e. Had to borrow?	1	0	d	r
f. Thought about filing for bankruptcy	1	0	d	r
f1. IF YES: Did you file for bankruptcy	1	0	d	r
g. Been denied medical care by a doctor or other provider	1	0	d	r

[INSERT YOU IF SINGLE PERSON FIU; ELSE INSERT YOUR FAMILY]

>C96< Was the medical condition(s) or event(s) that caused the medical bills your family had difficulty paying... (CODE ALL THAT APPLY)

- An accident or injury..... 1
- An illness..... 2
- A medical test or surgical procedure 3
- A birth of a child 4
- Routine health care 5
- Something else (SPECIFY) 6

<d> DON'T KNOW <r> REFUSED <x> DELETE A CODE <n> NO MORE CODES

>C97< Was the person who was treated for these (INSERT- medical problems IF c96=1-3,6) /birth of a child IF c96= 4/routine health care IF c96=5) covered by health insurance or was this person uninsured at the time services were received?

- COVERED 1
- UNINSURED..... 0 [goto c99]
- DON'T KNOW d [goto c99]
- REFUSED..... r [goto c99]

>C98< Did (your/this person's) health insurance plan cover a little, some, or most of the cost of these medical services?

- A LITTLE 1
- SOME 2
- MOST 3

- DON'T KNOW d
- REFUSED r

>c99< Did the doctor's office, hospital, or other provider where (you/your family) owe(d) money offer any of the following assistance? (ROTATE AND CODE ALL THAT APPLY)

- a. Offer to discount the bill
- b. Inform you about free care
- c. Inform you about public assistance
- d. Suggest a payment plan
- e. Suggest you take out a loan to pay a bill
- f. Refer you to another provider?

<1> YES <0> NO <d> DON'T KNOW <r> REFUSED

>C100< When did (you/your family) first get these medical bills? Was it within the last year, from 1 to 2 years ago, from 2 to 5 years ago, or more than 5 years ago?

- LAST YEAR 1
- 1 TO 2 YEARS AGO 2
- 2 TO 5 YEARS AGO 3
- MORE THAN 5 YEARS AGO 4

- DON'T KNOW d
- REFUSED r

>C101_2< How much (do you/does your family) currently owe in medical bills?

- <0-90000>
- <d> DON'T KNOW
- <r> REFUSED

PROBE IF DOESN'T KNOW EXACT AMOUNT:

>C101a< Is it less than \$2,000, from \$2,000 to less than \$5,000, from \$5,000 to less than \$10,000, from \$10,000 to less than \$20,000, or more than \$20,000?

- LESS THAN 2,000 1
- 2,000 TO LESS THAN 5,000..... 2
- 5,000 TO LESS THAN 10,000..... 3
- 10,000 TO LESS THAN 20,000..... 4
- 20,000 OR MORE 4

- DON'T KNOW d
- REFUSED r

>C102< During the past 12 months, how much of (your/your family's) medical bills have you paid off? Would you say none, a little, some, most or all of your medical bills?

- NONE 1
- A LITTLE..... 2
- SOME 3
- MOST 4
- ALL 5 [goto RC1]

- DON'T KNOW d
- REFUSED r

>C103< When do you expect to pay off your current medical bills? Would you say within the next year, within the next two to three years, within the next five years, or longer than that?

- NEXT YEAR..... 1
- TWO TO THREE YEARS..... 2
- FIVE YEARS..... 3
- LONGER THAN FIVE YEARS 4

- DON'T KNOW d
- REFUSED r

IN-STORE RETAIL CLINICS

>RC1< An in-store health clinic is a medical clinic that is located inside a retail store like CVS, Walgreens, Target or Wal-Mart. Have you (or INSERT NAMES OF OTHER FIU MEMBERS) **ever** had a medical visit at an in-store health clinic? Do not include pharmacies that only offer flu vaccinations once a year or eye care.

- YES..... 1
- NO 0 [goto RC5]

- DON'T KNOW 1 [goto RC5]
- REFUSED..... 1 [goto RC5]

>RC1a< Have you (or INSERT NAMES OF OTHER FIU MEMBERS) used an in-store health clinic in a retail chain during the **past 12 months**?

- YES..... 1
- NO 0 [goto RC5]

- DON'T KNOW d [goto RC5]
- REFUSED..... r [goto RC5]

>RC2< Please think of the last time you or a family member used an in-store health clinic in a retail chain. What was the primary purpose of that visit?

ROTATE a-e THEN f. (CODE ALL THAT APPLY):

- a. A new illness or symptom such as sore throat, strep throat, ear infection or skin rash 1
- b. Vaccination such as a flu shot or tetanus shot 2
- c. Physical exam for school, camp or employment 3
- d. Care for an ongoing or chronic condition like diabetes 4
- e. Prescription renewal..... 5
- f. Other (SPECIFY) 6

- DON'T KNOW d
- REFUSED..... r

>RC3<

I'm going to read several reasons why some people choose in-store health clinics. For each one, please tell me whether it was a major factor, a minor factor, or not a factor in choosing an in-store clinic for the most recent visit.

ROTATE

- a. I/we do not have a regular source of medical care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- b. I/we did not have to make an appointment
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- c. The cost was lower than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- d. The location was more convenient than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- e. The clinic hours were more convenient than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED

CATI: IF ANY FIU MEMBER IS INSURED BY ANY PLAN GO TO RC4; ELSE GO TO RC5

>RC4<

Did your health insurance plan pay for none, part, or all of the cost of the most recent visit to the in-store clinic?

- NONE OF THE COST 1
- PART OF THE COST..... 2
- ALL OF THE COST..... 3

- DON'T KNOW d
- REFUSED..... r

ONSITE WORPLACE HEALTH CLINICS

>RC5< Have you (or INSERT NAMES OF OTHER FIU MEMBERS) **ever** used an onsite health clinic at your or (SPOUSE'S) workplace?

- YES..... 1
- NO 0 [goto d101]

- DON'T KNOW d [goto d101]
- REFUSED..... r [goto d101]

>RC5a< Have you (or INSERT NAMES OF OTHER FIU MEMBERS) used an onsite health clinic a workplace during the **past 12 months**?

- YES..... 1
- NO 0 [goto d101]

- DON'T KNOW d [goto d101]
- REFUSED..... r [goto d101]

>RC6< Please think of the last time you or a family member used an onsite health clinic at a workplace. What was the primary purpose of that visit?

ROTATE a-e THEN f. (CODE ALL THAT APPLY):

- a. To treat an injury that was work related?
- b. Vaccination such as a flu shot or tetanus shot?
- c. A new illness or symptom such as sore throat, strep throat, ear infection or skin rash?
- d. A physical exam for employment, school, or camp?
- e. Care for an ongoing or chronic condition like diabetes?
- f. Prescription renewal?
- g. Some other reason [SPECIFY]

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED..... r

>rc7<

I'm going to read several reasons why some people choose onsite health clinics. For each one, please tell me whether it was a major factor, a minor factor, or not a factor in choosing an onsite clinic for the most recent visit.

ROTATE

- a. I/we do not have a regular source of medical care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- b. I/we did not have to make an appointment
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- c. The cost was lower than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- d. The location was more convenient than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED
- e. The clinic hours were more convenient than another source of care
 - 1 MAJOR FACTOR
 - 2 MINOR FACTOR
 - 3 NOT A FACTOR
 - d DON'T KNOW
 - r REFUSED

d. USUAL SOURCE OF CARE/PATIENT TRUST

BEGIN WITH FAMILY INFORMANT

>USC< The next questions are about places people go to for their health problems.

>d101< Is there a place that [you/fill NAME] **usually** go(es) to when (you/he/she) (is/are) sick or need(s) advice about your health?

PROBE: IF R. IS UNSURE IF ONE PLACE OR MORE THAN ONE PLACE:
When [fill NAME] is sick or needs advice about (his/her/you) health,
does (he/she/you) go to one place or more than one place?

YES..... 1 [goto d111]
NO, THERE IS NO PLACE 0 [goto test d301]
NO, THERE IS MORE THAN ONE PLACE 3 [goto d111]

DON'T KNOW d [goto test d301]
REFUSED r [goto test d301]
==>

>d111< If (d101 = 1) then read:
What kind of place is it--a doctor's office, an HMO, a hospital outpatient clinic,
some other clinic or health center, an emergency room, or some other place?

Else (d101 = 3) read:
What kind of place (do/does) [you/fill NAME] go to most often--a doctor's office,
an HMO, a hospital outpatient clinic, some other clinic or health center, an
emergency room, or some other place?

DOCTOR'S OFFICE 1
HMO 2
HOSPITAL OUTPATIENT CLINIC 3
OTHER CLINIC OR HEALTH CENTER 4
HOSPITAL EMERGENCY ROOM 5
SOME OTHER PLACE 6

DON'T KNOW d
REFUSED r
==>

>sn1< IF UNINSURED: At this place, (do you/does fill NAME) pay full price for medical care or [do you /does fill NAME] pay a lower amount based on what [you/fill NAME] can afford to pay?

FULL PRICE 0
LOWER AMOUNT 1

DON'T KNOW d
REFUSED r
====>

>d121< When (you/fill [NAME]) go(es) there, do(es) (you/he/she) usually see a doctor, a nurse, or some other type of health professional?

INSTRUCTION: IF R. SAYS DOCTOR AND NURSE, CODE DOCTOR.

DOCTOR 1 [goto d121spec]
NURSE 2 [goto d131]
OTHER [SPECIFY] 3 [goto d131]

DON'T KNOW d [gototestd301]
REFUSED r [gototestd301]
====>

>d121spec< Primary care doctors, such as general or family doctors, general internists, or pediatricians, treat a variety of illnesses and give preventive care. Specialists are doctors like surgeons, heart doctors, and others who specialize in one area of health care.

Is the doctor (you/fill [NAME]) usually see a primary care doctor or a specialist?

INTERVIEWER INSTRUCTION: GENERAL INTERNISTS ARE PRIMARY CARE DOCTORS; INTERNISTS WHO SUBSEQUENTLY SPECIALIZE IN A PARTICULAR AREA OF CARE ARE SPECIALISTS.

PRIMARY DOCTOR 1
SPECIALIST 2
DON'T KNOW d
REFUSED r
====>

>d131< Do(es) [you/fill NAME] usually see the same (doctor/nurse/provider) each time (you/he/she) go(es) there?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

END ROTATION

>test d301< [IF MORE THAN ONE PERSON; REPEAT d10n...-d131n... FOR EACH PERSON.]

>test sn2< [IF NO UNINSURED IN FIU SKIP TO test e10 IF sn1 =1 FOR ANY MEMBER OF FIU, GO TO sn4 ELSE, GO TO sn2]

>sn2< Thinking of the area where you live, is there a place that offers affordable medical care for people without health insurance?

YES..... 1 [goto sn3]
NO 0

DON'T KNOW d
REFUSED r
==> [goto test e10]

>sn3< Is that place a doctor's office, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

DOCTOR'S OFFICE 1
HOSPITAL OUTPATIENT CLINIC 3
OTHER CLINIC OR HEALTH CENTER 4
HOSPITAL EMERGENCY ROOM 5
SOME OTHER PLACE 6

DON'T KNOW d
REFUSED r
==>

>sn4< How long [does/would] it take you to get to [IF sn1 EQUALS 0: INSERT PLACE NAMED IN D11, ELSE INSERT PLACE FROM sn3: the doctor's office, the HMO, the hospital outpatient clinic, the clinic or health center, the hospital emergency room, that place]?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD. ENTER TIME PERIOD ON NEXT SCREEN

|_|_|_| TIME [goto sn4per]
(1-240)

DON'T KNOW d
REFUSED r
==> [goto sn5]

>sn4per< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS sn4]

MINUTES..... 1
HOURS..... 2
==>

>sn5<

During the last 12 months, have you (or has anyone in your family) seen a physician or other health professional at [PLACE NAMED IN D111 OR sn3] when you did not have health insurance?

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

====>

QUALITY OF CARE AND RISK BEHAVIORS

THIS SECTION WILL BE COMPLETED FOR INFORMANT AND CHILD AND (EXCEPT FOR FAMILY LEVEL QUESTIONS) IS INCLUDED IN SELF-RESPONSE MODULE FOR OTHER ADULTS.

>test e10< **[IF FAMILY HAS HAD ANY PROVIDER, OR HOSPITAL VISITS IN LAST 12 MONTHS (c101 = 1, or c211 = 1, or 1 ≤ c311 ≤ 96, or 1 ≤ c321 ≤ 5, or 1 ≤ c331 ≤ 96, or 1 ≤ c341 ≤ 5) goto e101, ELSE goto e121]**

>eSAT< The next questions are about your satisfaction with health care.
ENTER <g> TO CONTINUE ===>

>e101< All things considered, are you satisfied **or** dissatisfied with [(the health care you have received/the health care you and your family have received)] **during the last 12 months?**

PROBE: If you did not receive services that you felt you needed, please consider that too.

- SATISFIED 1 [goto e111]
 - DISSATISFIED 2 [goto e111]
 - NEITHER SATISFIED NOR DISSATISFIED 3

 - DON'T KNOW d
 - REFUSED r
- ===> [goto e121]

>e111< Would that be very (dis)satisfied or somewhat (dis)satisfied?

- VERY 1
 - SOMEWHAT 2

 - DON'T KNOW d
 - REFUSED r
- ===>

>e12<

Now I would like to ask you about satisfaction with your **choice** of doctors.

First, primary care doctors, such as family doctors, [pediatricians],¹⁰ or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with the **choice** you personally have for primary care doctors?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

SATISFIED 1 [goto e13]
 DISSATISFIED 2 [goto e13]
 NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
 REFUSED r
 ==> [goto e141]

>e13<

Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
 SOMEWHAT 2

DON'T KNOW d
 REFUSED r
 ==>

>e14new<

In the past 12 months, did you or a doctor think you needed to see a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.

YES..... 1 [goto CAHPS12]
 NO 0

DON'T KNOW d
 REFUSED r
 ==> [goto test e15a]

>CAHPS12<

In the last 12 months, did (you/NAME) see a specialist?

YES..... 1
 NO 0

¹⁰Exclude for adults.

DON'T KNOW d
 REFUSED r
 ==>

>e15< Are you satisfied or dissatisfied with the **choice** you have for specialists?

SATISFIED 1 [goto E15_1]
 DISSATISFIED 2 [goto E15_1]
 NEITHER SATISFIED NOR DISSATISFIED 3

 DON'T KNOW d
 REFUSED r
 ==> [goto test e1512]

>E15_1< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
 SOMEWHAT 2

 DON'T KNOW d
 REFUSED r
 ==>

>test e1512< IF d121spec = 1 and CAHPS12=1, go to e1512;else go to test e15a

>e1512< In the last 12 months, how often did your usual doctor seem informed and up-to-date about the care you got from specialists? Source: CAHPS

NEVER 1
 ALMOST NEVER 2
 SOMETIMES 3
 USUALLY 4
 ALMOST ALWAYS 5
 ALWAYS 6
 NO USUAL DOCTOR 7
 MY SPECIALIST IS MY USUAL DOCTOR 8

 DON'T KNOW d
 REFUSED r

Test: IF RESPONSE IS REFUSED, NO USUAL DOCTOR, OR SPECIALIST IS MY USUAL DOCTOR, GO TO teste15a; ELSE CONTINUE WITH e1513

>e1513<. After going to the specialist, did your usual doctor talk with you about what happened at the visit (with the specialist)? (Source: Starfield, Primary Care Assessment Tool)

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>test e15a< (c311 ge 1 OR c321 ge 1) GO TO CAHPSLANG; else go to test e161

>CAHPSLANG<In the last 12 months, how often did you have a hard time *speaking with or understanding* a doctor or other health providers because you spoke different languages—never, sometimes, usually or always?

NEVER 1
SOMETIMES 2
USUALLY..... 3
ALWAYS 4

DON'T KNOW d
REFUSED..... r
====>

>test e161< [IF PERSON HAS HAD ANY PHYSICIAN VISITS IN LAST 12 MONTHS ($1 \leq C311 \leq 96$ OR $1 \leq C321 \leq 5$), gotoCAHPS5; ELSE, goto e401]

>CAHPS5< In the last 12 months, not counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic?

YES..... 1 [goto E261R5@day]
NO 0

DON'T KNOW d
REFUSED..... r
====> [goto e40]

>E261R5@day< Thinking of the last time you made an appointment at a doctor's office or clinic, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: (1) CODE "0" FOR SAME DAY.

(2) ACCEPT MOST CONVENIENT TIME PERIOD.

___ (0-31) DAYS OR ___ (1-20) WEEKS OR ___ (1-5) MONTHS

DON'T KNOW d

REFUSED r

>e40< Now, I have a question about (your/his/her) health. ¹¹

In general, would you say your health is:

Excellent 1

Very Good 2

Good 3

Fair or 4

Poor 5

DON'T KNOW d

REFUSED r

====>

¹¹SF-12™ Standard US Version 1.0, Copyright 1994 The Health Institute; New England Medical Center. Distributed by: Medical Outcomes Trust. For Spanish speaking respondents, an interviewer-administered version of the U.S.-Spanish SF-12 was reviewed and approved by the New England Medical Center (agreement 10/26/97).

ADULT CHRONIC CONDITIONS FOR FIU INFORMANT.

>cc1< **[IF FEMALE, AGE 50 OR UNDER]** The next questions are about your health during the past two years. During the past two years, have you had a baby?

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED r
- ===>

>cc2c< **[IF FEMALE]** During the past two years, have you seen a doctor or health care professional for abnormal uterine bleeding?

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED r

>cc3@b< Has a doctor or health professional ever told you that you had diabetes or high blood sugar?

- YES..... 1[goto cc3@bb]
- NO 0

- DON'T KNOW d
- REFUSED r

>cc3@bb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for diabetes or high blood sugar?

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED r

>cc3@c< Has a doctor or health professional ever told you that you had arthritis?

- YES..... 1[goto cc3@cb]
- NO 0

- DON'T KNOW d
- REFUSED r

>cc3@cb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for arthritis?
YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc3@d< Has a doctor or health professional ever told you that you had asthma?

YES..... 1[goto cc3@db]
NO 0

DON'T KNOW d
REFUSED..... r

>cc3@db< **IF YES:** During the past two years, have you seen a doctor or other health care professional for asthma?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@e< Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?

YES..... 1[goto cc3_2@eb]
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@eb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@g< Has a doctor or health professional ever told you that you had hypertension or high blood pressure?

YES..... 1[goto cc3_2@gb]
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@gb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@i< Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?

YES..... 1[goto cc3_2@ib]
NO 0

DON'T KNOW d
REFUSED..... r

>cc3_2@ib< **IF YES:** During the past two years, have you seen a doctor or other health care professional for coronary heart disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc5@c< Has a doctor or health professional ever told you that you had skin cancer?

YES..... 1[goto cc5@cb]
NO 0

DON'T KNOW d
REFUSED..... r

>cc5@cb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc5@h< Has a doctor or health professional ever told you that you had cancer other than skin cancer?

YES..... 1[goto cc5@hb]
NO 0

DON'T KNOW d
REFUSED..... r

>cc5@hb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for that cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc5f4< **IF FEMALE or MALE AGE 50 OR UNDER GOTO cc6e. IF MALE AGE OVER 50:** Has a doctor or health professional ever told you that you had a benign prostate disease or a large prostate that was not prostate cancer?

YES..... 1[goto cc5@f4b]
NO 0

DON'T KNOW d
REFUSED..... r

>cc5@f4b< **IF YES:** During the past two years, have you seen a doctor or other health professional for benign prostate disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>cc6@e< Has a doctor or health professional ever told you that you had depression?

YES..... 1[goto cc6@eb]
NO 0

DON'T KNOW d
REFUSED r

>cc6@eb< **IF YES:** During the past two years, have you seen a doctor or other health care professional for depression?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>cc7< During the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

====>

QUALITY OF CARE

>testccq< [if seen a doctor during the past two years for abnormal uterine bleeding, diabetes, arthritis, asthma, COPD, hypertension, CHD, skin cancer, other cancer, benign prostate disease, or depression, go to CCQ1, ELSE GO TO CE2] Note that word program doesn't have question numbers for past two years questions.

CCQ1. Do you see only one doctor or more than one doctor for treatment of [INSERT PATIENT'S CHRONIC DISEASE(S)]?

ONE 1[goto CCQ3]
MORE THAN ONE 2[goto CCQ2]

DON'T KNOW d[goto CCQ3]
REFUSED r[goto CCQ3]

CCQ2. Which of the following statements best describes how well the different doctors you see for [INSERT PATIENT'S CHRONIC CONDITION(S)] coordinate your care? By care coordination, we mean how well do your doctors work together to manage your health care.

- My care is not coordinated at all..... 1
- My care is coordinated some of the time 2
- My care is coordinated most of the time 3
- My care is coordinated all of the time 4

- DON'T KNOW d
- REFUSED r

CCQ3. Next, I will read some statements about experiences with your health care providers. These are the doctors, nurses, therapists, pharmacists and others who help you manage your condition(s). Please tell me whether you strongly agree, agree, disagree or strongly disagree with each statement. When discussing your condition and its treatment with your health care providers, did they...

INTERVIEWER: IF R. SAYS THERE WAS ONLY ONE PROVIDER, YOU CAN SUBSTITUTE "HE" OR "SHE." READ STEM ONLY AS NECESSARY.

- A. Explain things in a way you could understand
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4
 - Not applicable 5

- DON'T KNOW d
- REFUSED r

- B. Spend enough time with you
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4
 - Not applicable 5

- DON'T KNOW d
- REFUSED r

- C. Treat you with respect and dignity
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4
 - Not applicable 5

- DON'T KNOW d
- REFUSED r

- D. Help you set specific goals to improve your diet
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly disagree4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r

- E. Help you set specific goals for exercise
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly disagree4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r

- F. Teach you how to monitor your condition(s) so you could tell how you are doing
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly disagree4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r

CCQ4. Do you strongly agree, agree, disagree or strongly disagree with the following statement. When I am prescribed a new medication, I read about the possible side effects.

- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly disagree4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r

CCQ5. In the last 6 months, did you receive a phone call from any of your health care providers to see how you were doing without you calling them first? By health care provider we mean doctor, nurse, therapist, pharmacist and others who help you manage your condition.

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED..... r

NOTE: CONTINUE WITH CONSUMER ENGAGEMENT QUESTIONS (CE1) FOR CHRONIC CONDITION SUB-SAMPLE

CONSUMER ENGAGEMENT

CE1. Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with each statement as it applies to you personally. Your answers should be what are true for you. If the statement does not apply to you, just let me know and we will move on to the next one. The first/next one is...

RANDOMIZE

1. Taking an active role in my own health care is the most important factor in determining my health and ability to function.
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4
 - Not applicable [do not read] 5

 - DON'T KNOW d
 - REFUSED..... r

2. When all is said and done, I am the person who is responsible for managing my health condition(s).
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4
 - Not applicable [do not read] 5

 - DON'T KNOW d
 - REFUSED..... r

3. I know what each of my prescribed medications does.
 - Strongly agree..... 1
 - Agree 2

- Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
4. I am confident that I can follow through on medical treatments I need to do at home.
 Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
5. I am confident I can tell my health care provider concerns I have even when he or she does not ask.
 Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
6. I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.
 Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
7. I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health condition(s).
 Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r

8. I understand the nature and causes of my health condition(s).
- | | |
|------------------------------------|-------|
| Strongly agree..... | 1 |
| Agree | 2 |
| Disagree | 3 |
| Strongly disagree | 4 |
| Not applicable [do not read] | 5 |
|
DON'T KNOW |
d |
| REFUSED..... | r |
9. I know the different medical treatment options available for my health condition(s).
- | | |
|------------------------------------|-------|
| Strongly agree..... | 1 |
| Agree | 2 |
| Disagree | 3 |
| Strongly disagree | 4 |
| Not applicable [do not read] | 5 |
|
DON'T KNOW |
d |
| REFUSED..... | r |
10. I know how to prevent further problems with my health condition(s).
- | | |
|------------------------------------|-------|
| Strongly agree..... | 1 |
| Agree | 2 |
| Disagree | 3 |
| Strongly disagree | 4 |
| Not applicable [do not read] | 5 |
|
DON'T KNOW |
d |
| REFUSED..... | r |
11. I have been able to maintain the lifestyle changes for my health that I have made.
- | | |
|------------------------------------|-------|
| Strongly agree..... | 1 |
| Agree | 2 |
| Disagree | 3 |
| Strongly disagree | 4 |
| Not applicable [do not read] | 5 |
|
DON'T KNOW |
d |
| REFUSED..... | r |
12. I am confident I can figure out solutions when new situations or problems arise with my health condition(s).
- | | |
|------------------------------------|---|
| Strongly agree..... | 1 |
| Agree | 2 |
| Disagree | 3 |
| Strongly disagree | 4 |
| Not applicable [do not read] | 5 |

DON'T KNOW d
REFUSED r

13. I am confident that I can maintain lifestyle changes like diet and exercise even during times of stress.

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4
Not applicable [do not read] 5

DON'T KNOW d
REFUSED r

****GO TO e521***

NON-CHRONIC CONDITION SAMPLE

CE2. Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you disagree strongly, disagree, agree, or agree strongly with each statement as it applies to you personally. Your answers should be what is true for you. If the statement does not apply to you, just let me know and we will move on to the next one. The first one/next one is...

RANDOMIZE

1. When all is said and done, I am the person who is responsible for managing my health.

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4
Not applicable [do not read] 5

DON'T KNOW d
REFUSED r

2. Taking an active role in my own health care is the most important factor in determining my health and ability to function.

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4
Not applicable [do not read] 5

DON'T KNOW d
REFUSED r

3. I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
 Not applicable [do not read]5
- DON'T KNOW d
 REFUSED r
4. I know what each of my prescribed medications does.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
 Not applicable [do not read]5
- DON'T KNOW d
 REFUSED r
5. I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
 Not applicable [do not read]5
- DON'T KNOW d
 REFUSED r
6. I am confident that I can tell a doctor concerns I have, even when he or she does not ask.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
 Not applicable [do not read]5
- DON'T KNOW d
 REFUSED r
7. I am confident that I can follow through on medical treatments I may need to do at home.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
 Not applicable [do not read]5

- DON'T KNOW d
 REFUSED r
8. I understand the nature and causes of my health problems.
 Strongly agree 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
9. I know the different medical treatment options available for my health conditions.
 Strongly agree 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
10. I have been able to maintain the lifestyle changes for my health that I have made.
 Strongly agree 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
11. I know how to prevent problems with my health.
 Strongly agree 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5
- DON'T KNOW d
 REFUSED r
12. I am confident I can figure out solutions when new situations or problems arise with my health.
 Strongly agree 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 Not applicable [do not read] 5

DON'T KNOW d
REFUSED r

13. I am confident that I can maintain lifestyle changes, like diet and exercise, even during times of stress.

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4
Not applicable [do not read] 5

DON'T KNOW d
REFUSED r

>e521< Now, please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statement. I'm more likely to take risks than the average person.

INTERVIEWER: (1) NEITHER AGREE NOR DISAGREE IS NOT READ, BUT IS CODED IF OFFERED.

(2) PROBE BY ASKING: In general, . . . OR Whatever you think of as risks . . .

STRONGLY AGREE 1
AGREE 2
NEITHER AGREE NOR DISAGREE 3
DISAGREE 4
STRONGLY DISAGREE 5

DON'T KNOW d
REFUSED r
==>

>e601< These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?

YES 1 [goto e611]
NO 0

DON'T KNOW d
REFUSED r
==> [goto BRFSS10]

>e611< Do you now smoke cigarettes every day, some days or not at all?

EVERYDAY 1
SOME DAYS 2
NOT AT ALL 3

DON'T KNOW d
REFUSED r
==>

>BRFSS10< About how much do you weigh without shoes? (BRFSS12.10)

INTERVIEWER NOTE: ROUND UP FRACTIONS

<80 - 500> POUNDS

DON'T KNOW d
REFUSED r
==>

>BRFSS11< About how tall are you without shoes? (BRFSS12.11)

INTERVIEWER NOTE: ROUND DOWN FRACTIONS

<3-7> FEET

AND/OR

<1-11> INCHES

DON'T KNOWd

REFUSED..... r

==>

Consumer Information Seeking

>CI1< During the past 12 months, did you look for or get information about a **PERSONAL** health concern:

RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

- a. On the internet
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

- b. From friends or relatives
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

- c. From TV or radio
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

- d. From books or magazines
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

- e. From newspapers
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

- f. From somewhere else other than doctor (SPECIFY)
 - Health care professional (NON-PHYSICIAN)
 - Health care organization
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r

IF YES TO ANY, GO TO CI2; ELSE GO TO CI5

>CI2< [IF YES TO CI1] Did you later talk with a doctor or other health care professional about any of the information you found, or didn't you happen to do this? (Pew, 2006)

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CI3< [IF YES TO CI1] Did any of the health information you found change your overall approach to maintaining your health? (Pew, 2006)

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CI4< [IF YES TO CI1] Did any of the health information you found help you to better understand how to treat an illness or condition?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CI5< During the past 12 months, did you look for or get information about a health concern for **another adult**, such as a friend or family member:

RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

- a. On the internet
YES..... 1
NO 0

DON'T KNOW d
REFUSED r

- b. From friends or relatives
YES..... 1
NO 0

DON'T KNOW d
REFUSED r

- c. From TV or radio
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- d. From books or magazines
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- e. From newspapers
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- f. From somewhere else other than doctor (SPECIFY)
 - Health care professional (NON-PHYSICIAN)
 - Health care organization
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

INFORMATION TECHNOLOGY

>IT1< Do you ever go on line to use the Internet or World Wide Web? (modified Pew, HINTS)

YES..... 1
NO 0 [goto IT3b]

DON'T KNOW d [goto IT3b]
REFUSED..... r [goto IT3b]

>IT2< In general, how often do you go online- several times a day, about once a day, 3-5 days a week, 1 to 2 days a week, once every few weeks, or less often than that? [modified KFF, PEW 2003]

SEVERAL TIMES A DAY 1
ABOUT ONCE A DAY..... 2
3 TO 5 DAYS A WEEK..... 3
1 TO 2 DAYS A WEEK..... 4
ONCE EVERY FEW WEEKS 5
LESS OFTEN..... 6

DON'T KNOW d
REFUSED r

>IT3< IF YES TO IT1: Some doctor's offices allow patients to contact them by email or by going to a web site on the Internet. During the past 12 months, have you used email or gone to a web site to contact a doctor or doctor's office about your personal health needs?

YES..... 1
NO 0 [goto IT3B]
NEVER SEE DOCTORS 2 [goto IT3b]

DON'T KNOW d [goto IT3B]
REFUSED r [goto IT3b]

>IT3a< Did you use e-mail or a web site ...

ROTATE a-e and then ask f

a. To renew a prescription

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

- b. To schedule an appointment
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

- c. To discuss a health problem with a physician, nurse or other health care provider
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

- d. To see the results of diagnostic tests or your medical history
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

- e. To get reminders for upcoming appointments
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

- f. Anything else [SPECIFY]
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

[GOTO CS1]

IT3b. **[DO NOT DISPLAY IF IT1=1 OR IT3=1]** Some doctor's offices allow patients to contact them by email or by going to a web site on the Internet. To the best of your knowledge, do any of the doctors or doctors' offices you visit for your personal health needs allow patients to contact them by e-mail or by going to a web site?

- YES..... 1
- NO 0
- NEVER SEE DOCTORS..... 2
- DON'T KNOW d
- REFUSED r

CONSUMER SHOPPING

>CS1< A personal doctor is the health provider you see most often and who knows you best. During the past 12 months did you look for a new personal doctor?

- YES..... 1
- NO 0 [goto testCS9]

- DON'T KNOW d [goto testCS9]
- REFUSED r [goto testCS9]

>CS2< Did you find a personal doctor?

- YES..... 1
- NO 0 [goto testCS9]

- DON'T KNOW d [goto testCS9]
- REFUSED r [goto testCS9]

>CS3< Which of the following sources did you use in looking for a new personal doctor?

- A. Recommendation of another doctor or health care provider
- B. Information from your health insurance plan
- C. Books, magazines or newspapers
- D. Friends or relatives
- E. TV or radio
- F. The Internet
- G. Anything else [SPECIFY]

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF NO SOURCES MENTIONED, GO TO CS8

>CS4< Did any of the sources you used provide information that compared the cost of care charged by different doctors?

- YES..... 1
- NO 0 [goto CS6]

- DON'T KNOW d [goto CS6]
- REFUSED r [goto CS6]

>CS5< Did you use this information in choosing a personal doctor?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CS6< Did any of the sources you used provide information that compared the quality and performance of different doctors?

YES..... 1
NO 0 [goto CS8]

DON'T KNOW d [goto CS8]
REFUSED r [goto CS8]

>CS7< Did you use this information in choosing a personal doctor?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CS8< I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing a personal doctor.

- a. The cost of care
- b. The recommendation of another doctor
- c. The reputation of the personal doctor providing the care
- d. Short wait time for appointments
- e. Location of the personal doctor's practice
- f. The doctor is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>testcs9< [if CAHPS12=1, GO TO CS9; ELSE GO TO CS20]

>CS9< You mentioned earlier that you have seen a specialist. During the past 12 months, have you seen only one specialist or more than one specialist?

- ONE 1
- MORE THAN ONE 2
- DID NOT SEE A SPECIALIST 0 [goto CS20]

- DON'T KNOW d
- REFUSED r

>CS10< **(IF MORE THAN ONE, READ:** Please think about the last specialist you saw.)
Did you first see this specialist during the last 12 months or did you first see this specialist more than 12 months ago?

- MORE THAN 12 MONTHS AGO 1 [goto CS20]
- LESS THAN 12 MONTHS AGO 2

- DON'T KNOW d
- REFUSED r

>CS11< Did your personal doctor refer you to this specialist or did you find this specialist in some other way?

- REFERRED BY DOCTOR 1
- SOME OTHER WAY 2 [goto CS14]

- DON'T KNOW d [goto CS14]
- REFUSED r [goto CS14]

IF REFERRED

>CS12< Did your personal doctor give you a choice of specialists or recommend only one specialist?

- CHOICE 1
- ONLY ONE 2

- DON'T KNOW d
- REFUSED r

>CS13< Besides the referral from your personal doctor, did you use any other sources of information in looking for the specialist?

- YES, USED OTHER SOURCES 1
- NO, ONLY DOCTOR REFERRAL.....2 [goto TESTCS19]

- DON'T KNOW d [goto TESTCS19]
- REFUSED..... r [goto TESTCS19]

>CS14< Did you use any of the following sources in looking for the specialist?

- a. Recommendation of a doctor or health care provider who is not your personal doctor
- b. Information from your health insurance plan
- c. Books, magazines or newspapers
- d. Friends or relatives
- e. TV or radio
- f. The Internet
- g. Anything else [SPECIFY]

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF ANY SOURCES CODED YES, GO TO CS15; ELSE GO TO TESTCS19

>CS15< Did any of the sources you used provide information that compared the cost of care charged by different doctors?

- YES..... 1
- NO0 [goto CS17]

- DON'T KNOW d [goto CS17]
- REFUSED..... r [goto CS17]

>CS16< Did you use this information in choosing a specialist?

- YES..... 1
- NO0

- DON'T KNOW d
- REFUSED..... r

>CS17< Did any of the sources you used provide information that compared the quality and performance of different doctors?

YES..... 1
 NO 0 [goto TESTCS19]

DON'T KNOW d [goto TESTCS19]
 REFUSED r [goto TESTCS19]

>CS18< Did you use this information in choosing a specialist?

YES..... 1
 NO 0

DON'T KNOW d
 REFUSED r

TESTCS19 IF CS12=1 OR CS11=2, GO TO CS19;ELSE GO TO CS20

>CS19< I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this specialist.

- a. The cost of medical care and treatment
- b. The recommendation of your personal doctor (**SKIP IF NO REFERRAL**)
- c. The reputation of the specialist
- d. Short wait time for an appointment
- e. Location of the specialist's practice
- f. The specialist is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>CS20< In the past 12 months, have you had any type of surgical or non-surgical procedure?

PROBE: Do not include routine blood work, X-rays, or mammograms.

PROBE: By non-surgical procedure, we mean things like a biopsy, colonoscopy, MRI, etc.

INTERVIEWER: IF IN DOUBT, INCLUDE THE PROCEDURE. OUR GOAL IS TO BE AS BROAD AS POSSIBLE, IN DEFINING PROCEDURES TO TEST FOR CONSUMER SHOPPING.

YES..... 1
 NO 0 [goto TESTe12c]

DON'T KNOW d [goto TESTe12c]
 REFUSED r [goto TESTe12c]

>CS21< If you had more than one procedure in the last 12 months, please think about the last procedure you had. Was the procedure performed in a hospital, a clinic, a doctor's office, or somewhere else?

- HOSPITAL 1
- CLINIC 2
- DOCTOR'S OFFICE 3
- SOMEWHERE ELSE (SPECIFY)..... 4

- DON'T KNOW d
- REFUSED r

>CS22< Was the first time you had a procedure performed at this INSERT PLACE during the last 12 months or more than 12 months ago?

- MORE THAN 12 MONTHS AGO 1 [goto TESTe12c]
- LESS THAN 12 MONTHS AGO 2

- DON'T KNOW d
- REFUSED r

>CS23< Was the INSERT PLACE recommended by the doctor performing the procedure or did you choose the place some other way?

- RECOMMENDED BY DOCTOR 1
- SOME OTHER WAY 2 [goto CS26]

- DON'T KNOW d [goto CS26]
- REFUSED r [goto CS26]

IF RECOMMENDED BY DOCTOR

>CS24< Did your doctor give you a choice of places to have the procedure or recommend only this one place?

- CHOICE 1
- ONLY ONE 2

- DON'T KNOW d
- REFUSED r

IF RECOMMENDED BY DOCTOR

>CS25< Besides your doctor's recommendation, did you use any other sources of information in looking for a place to have the procedure?

YES..... 1
NO 0 [goto TESTCS31]

DON'T KNOW d [goto TESTCS31]
REFUSED..... r [goto TESTCS31]

>CS26< Which of the following sources did you use in looking for the INSERT PLACE where you had the procedure?

- a. Recommendation from a doctor or other health care provider other than the one performing the procedure
- b. Information from your health insurance plan
- c. Books, magazines or newspapers
- d. Friends or relatives
- e. TV or radio
- f. The Internet
- g. Anything else (SPECIFY)

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF NO SOURCES MENTIONED, GO TO TESTCS31

>CS27< Did any of the sources you used provide information that compared how much different local INSERT PLACES are paid for similar services?

YES..... 1
NO 0 [goto CS29]

DON'T KNOW d [goto CS29]
REFUSED..... r [goto CS29]

>CS28< Did you use information from these reports in choosing a place to have the procedure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>CS29< Did any of the sources you used provide information that compared the quality and performance of local INSERT PLACES?

YES..... 1
NO 0 [goto TESTCS31]

DON'T KNOW d [goto TESTCS31]
REFUSED..... r [goto TESTCS31]

>CS30< Did you use information from these reports in choosing a place to have the procedure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

TESTCS31 IF CS24 =1 OR CS23=2, GO TO CS31, ELSE GO TO test e12c

>CS31< I am going to read several factors that some people consider in choosing a place to have a procedure. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this place to have your procedure.

- a. The cost of medical care and treatment
- b. The reputation of the INSERT PLACE
- c. Your doctor's recommendation
- d. Short wait time for an appointment
- e. Location of the INSERT PLACE
- f. The INSERT PLACE is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>test e12c< [IF FAMILY HAS CHILD GOTO k12, ELSE goto test e801]

>k12< Next, I would like to ask you about satisfaction with your **choice** of doctors for [fill CHILD'S NAME].

First primary care doctors, such as pediatricians, family doctors, or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with your **choice** of primary care doctors for [fill CHILD'S NAME]?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

- SATISFIED 1 [goto k13]
- DISSATISFIED 2 [goto k13]
- NEITHER SATISFIED NOR DISSATISFIED 3

- DON'T KNOW d
- REFUSED r
- ====> [goto k14new]

>k13< Would that be very (dis)satisfied or somewhat (dis)satisfied?

- VERY 1
- SOMEWHAT 2

- DON'T KNOW d
- REFUSED r
- ====>

>k14new< During the past 12 months, did you or a doctor think [fill CHILD'S NAME] needed to see a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.

- YES..... 1 [goto kCAHPS12]
- NO 0

- DON'T KNOW d
- REFUSED r
- ====> [goto test k16I]

>kCAHPS12< In the last 12 months, did (CHILD'S NAME) see a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>k15< Are you satisfied or dissatisfied with your **choice** of specialists for [fill CHILD'S NAME]?

SATISFIED 1 [goto K15a]
DISSATISFIED 2 [goto K15a]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto **test k16I**]

>K15a< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>test k16I< **[IF CHILD HAD GE ONE PHYSICIAN VISIT(S) IN LAST 12 MONTHS (1 ≤ c 31 ≤ 96 or 1 ≤ c 32 ≤ 5), goto CAHPS5k; ELSE gotoBRFSS10K]**

>CAHPS5k< In the last 12 months, not counting the times you needed health care right away, did you make any appointments for [CHILD'S] health care at a doctor's office or clinic?

YES..... 1 [goto E261R5k]
NO 0

DON'T KNOW d
REFUSED r
====> [goto BRFSS10K]

>E261R5k< Thinking of the last time you made an appointment at a doctor's office or clinic for CHILD, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: (1) CODE "0" FOR SAME DAY.

(2) ACCEPT MOST CONVENIENT TIME PERIOD.

SAME DAY 0

___ (0-31) DAYS OR ___ (1-20) WEEKS OR ___ (1-5) MONTHS

DON'T KNOW d

REFUSED r

>BRFSS10K< About how much does CHILD weigh without shoes? (BRFSS12.10)

INTERVIEWER NOTE: ROUND UP FRACTIONS

<10 - 300> POUNDS

DON'T KNOW d

REFUSED r

====>

>BRFSS11K< About how tall is CHILD without shoes? (BRFSS12.11)

INTERVIEWER NOTE: ROUND DOWN FRACTIONS

<1-7> FEET

AND/OR

<1-11> INCHES

DON'T KNOW d

REFUSED r

====>

>k40< In general, would you say [fill NAME]'s health is:

Excellent 1

Very Good 2

Good 3

Fair 4

Poor 5

DON'T KNOW d

REFUSED r

====>

CONSUMER INFORMATION SEEKING FOR CHILD

>CIC1< During the past 12 months, did you (or your husband/wife/partner IF MARRIED) look for or get information about a health concern for CHILD'S NAME?

RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

- a. On the internet
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- b. From friends or relatives
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- c. From TV or radio
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- d. From books or magazines
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- e. From newspapers
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- f. From somewhere else other than doctor (SPECIFY)
 Health care professional (NON-PHYSICIAN)
 Health care organization

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES TO ANY GO TO CIC2; ELSE GO TO IT4

>CIC2< [IF YES TO ANY RESPONSES IN CIC1] Did you later talk with a doctor or other health care professional about any of the information you found about CHILD'S NAME, or didn't you happen to do this?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CIC3< [IF YES TO ANY RESPONSES IN CIC1] Did any of the health information you found change your overall approach to maintaining CHILD'S NAME health?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CIC4< [IF YES TO ANY RESPONSES IN CIC1] Did any of the health information you found help you to better understand how to treat an illness or condition for CHILD'S NAME?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

INFORMATION TECHNOLOGY FOR CHILD

>IT4< During the past 12 months, have you used email or gone to a web site to contact a doctor or doctor's office about [INSERT CHILD'S NAME]'s health needs?

YES..... 1
NO 0 [goto IT4b]
NEVER SEE DOCTORS 2 [goto IT4b]

DON'T KNOW d [goto IT4b]
REFUSED r [goto IT4b]

>IT4A< Did you use e-mail or a web site ...

ROTATE a-e and then ask f

- a. To renew a prescription
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- b. To schedule an appointment
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- c. To discuss a health problem with a physician, nurse or other health care provider
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- d. To see the results of diagnostic tests or [INSERT CHILD NAME]'s medical history
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- e. To get reminders for upcoming appointments
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- f. Anything else [SPECIFY]
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

>IT4b<

[DO NOT DISPLAY IF IT4A WAS ASKED] To the best of your knowledge, do any of the doctors or doctors' offices you visit for [INSERT CHILD'S NAME]'s health needs allow patients to contact them by e-mail or by going to a web site?

- YES..... 1
- NO 0
- NEVER SEE DOCTORS..... 2

- DON'T KNOW d
- REFUSED..... r

>test e801< **[IF THERE ARE OTHER ADULTS (≥ 18) IN FAMILY BESIDES INFORMANT GOTO e80t; ELSE goto f10]**

>e80t<

Now, I have one question about the health of ([fill NAME]/other adults in your family). NOTE: SUBSTITUTE "Other adults in your family" IF TWO OR MORE OTHER ADULTS.

>e802<

In general, would you say [fill NAME]'s health is:

- Excellent 1
 - Very Good..... 2
 - Good..... 3
 - Fair..... 4
 - Poor 5

 - DON'T KNOW d
 - REFUSED..... r
- ==> [REPEAT FOR EACH ADULT; THEN goto f10]

f. EMPLOYMENT (ASKED FOR EACH ADULT 18 YEARS OF AGE AND OLDER)

>f10< This next series of questions is about jobs and earnings. Answers to these questions are particularly important to our survey because they help explain whether people can afford the health care they need.

====>

>f101< (Next), Do(es) [fill NAME] have a business or farm?

INTERVIEWER: CODE "YES" IF R. SAYS HE/SHE IS SELF-EMPLOYED.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

====>

>f111< Last week, did [fill NAME] do any work (either) for pay (or profit)?¹²

INTERVIEWER: CODE "YES" IF R. WAS ON VACATION FROM HIS/HER JOB.

YES..... 1 [goto f121]
NO 0

DON'T KNOW d
REFUSED r

====> [goto NEXT PERSON or g10]

>f121< Last week did [fill NAME] have more than one job (or business), including part time, evening, or weekend work?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

====>

¹²Include parenthetical phrases if f101=1.

>f131<

ONE JOB (F121 = 0): How many hours per week (do you/do(es) [fill NAME]) usually work at this job?¹³

MORE THAN ONE JOB (F121 ne 0): On (your [fill NAME]'s) main job, that is, the job where (he/she/you) work(s) the most hours, how many hours per week (do you/do(es) [fill NAME]) usually work?

PROBE: If (you/[fill NAME]) usually works overtime hours include them.

|__|__| HOURS WORKED
(0-96)

HOURS VARY 97 [goto 13x1]

DON'T KNOW d

REFUSED r

==> [goto test f141]

NOTE: Test will verify values less than 20 hours.

>13x1<

(Do you/Does [fill NAME]) usually work more than 35 hours per week or less than 35 hours per week (at this job/at the job where (he/she/you) work(s) the most hours)?

MORE 1

LESS..... 2

DON'T KNOW d

REFUSED r

==>

>testf141<

[IF f121 eq <1> goto f141; ELSE goto f201]

>f141<

How many hours per week (do you/do(es) [fill NAME]) usually work at (his/her/your) other jobs?

PROBE: If [fill NAME] worked overtime hours include them.

|__|__| HOURS WORKED AT OTHER JOBS
(0-96)

HOURS VARY/CAN'T ESTIMATE 97

DON'T KNOW d

REFUSED r

¹³Note shift from last week to usual week for hours and earnings.

====>
 >f201< [On (his/her/your) main job], (is/are) [fill NAME/you] employed by a private company, is (is/are) (you/he/she) a federal, state, or local government employee, self-employed, or working without pay in a family business or farm?

INTERVIEWER: CODE NOT-FOR-PROFIT/FOUNDATION AS PRIVATE COMPANY.

NOTE: PARENTHETICAL PHRASE USED IF MORE THAN ONE JOB

PRIVATE COMPANY 1
 FEDERAL GOVERNMENT 2
 STATE GOVERNMENT 3
 LOCAL GOVERNMENT 4
 SELF-EMPLOYED 5
 FAMILY BUSINESS OR FARM..... 6

DON'T KNOW
 REFUSED
 ====>

>f211< [On (your/his/her) main job], about how many people are employed at the location where [fill NAME] work(s)?

PROBES: (1) How many people work for your employer in the building or buildings in the factory, store, or office complex where you work?

(2) Your best estimate is fine.

ONE 1
 2-4..... 2
 5-9..... 3
 10-24..... 4
 25-49..... 5
 50-99..... 6
 100-249..... 7
 250-499..... 8
 500-999..... 9
 1000 OR MORE 10

DON'T KNOW d
 REFUSED r
 ====>

>test f221< [IF f201 eq 2, 3, or 4 goto f241] TEST SKIPS f221 FOR GOVERNMENT EMPLOYEES.

>f221< [Does (your\his\her) employer/Do(es) fill NAME] operate in more than one location?

NOTE: Fill is for self-employed and farmers.

YES..... 1 [goto f231]
NO 0

DON'T KNOW d
REFUSED r
==> [goto f241]

>f231< About how many people are employed by (fill NAME/your employer) at all locations?

PROBE: Your best estimate is fine.

ONE 1
2-4..... 2
5-9..... 3
10-24..... 4
25-49..... 5
50-99..... 6
100-249..... 7
250-499..... 8
500-999..... 9
1000 OR MORE 10

DON'T KNOW
REFUSED
==>

>f241< What kind of business or industry is this?

PROBE: What do they make or do there?

SPECIFY..... 1
DON'T KNOW d
REFUSED r
==>

>f251< Are you a member of either a labor union or an employee association like a union? [SIPP, CNTRC]

YES..... 1 [goto f261]
NO 0

DON'T KNOW d
REFUSED r
====> [goto f301]

>f261< Are you covered by a union or employee association contract? [SIPP, EMPLOC]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>f301< For (your/his/her) (main) job, what is the easiest way for you to report (his/her/your) total earnings: hourly, per week, every two weeks, twice a month, monthly, or annually?

PROBES: (1) I understand these questions may be sensitive. We are asking them to find out whether people can afford the health care they need.

(2) **INTERVIEWER:** IF R. RESPONDS IN A NON-SPECIFIED PAY PERIOD, CONVERT TO MONTHLY OR ANNUAL.

HOURLY 1
PER WEEK 2
BI-WEEKLY/EVERY TWO WEEKS 3
TWICE MONTHLY 4
MONTHLY 5
ANNUAL 6

DON'T KNOW d [goto f331]
REFUSED r [goto test f401]
====>

>f321<

Hourly: What is [fill NAME]’s hourly rate of pay on this job?

Weekly, Monthly: What are [fill NAME]’s usual [fill f301 RATE] earnings on this job, before taxes or other deductions?

Bi-Weekly, Twice Monthly: What are [fill NAME]’s usual earnings per pay period on this job, before taxes or other deductions?

Annual: What is [fill NAME]’s annual salary in this job, before taxes and other deductions?

PROBES: (1) I understand that these questions may be sensitive. We are asking these questions to find out whether people can afford the health care they need.

(2) IF RESPONDENT ASKS: Include overtime pay, tips, or commissions that you usually receive on this job.

\$ |__|__|__|_|.|__|__| HOURLY
(3.00 to 300.00)

\$ |__|__|__|_|_|_|_|_|.|__|__|__|_| OTHER PAY PERIODS
(20-500,000)

DON’T KNOW d [goto f331]
REFUSED r [goto test f401]
===> [goto test f341]

>f331<

Which of the following ranges is closest to ([fill NAME]’s)/your) annual salary, before taxes and other deductions? -- less than \$10,000, \$10,000 to \$14,000, \$14,000 to \$20,000, \$20,000 to \$30,000, or more than \$30,000?

LESS THAN \$10,000 1
\$10,000 - \$14,000 2
\$14,001 - \$20,000 3
\$20,001 - \$30,000 4
MORE THAN \$30,000 5

DON’T KNOW d
REFUSED r
===>

>test f341<

[TEST FOR OUTLIERS:]

HOURLY: LE 5.00; GE 100.00
WEEKLY: LE 50; GE 5000.00
BI-WEEKLY: LE 100; GE 10,000
TWICE MONTHLY: LE 100; GE 10,000
MONTHLY: LE 200; GE 20,000
ANNUALLY: LE 3,000; GE 200,000]

>f341< I recorded that ([fill NAME's]/your) usual earnings on this job are
 \$[INSERT f321] per [INSERT f301]. Is that correct?
 YES..... 1 [goto test f401]
 NO :jb f321
 ==>

>test f401< **[IF PERSON IS POLICY HOLDER FOR EMPLOYER-BASED PLAN [PERSON LISTED IN b231 AND b251 = 1] AND HAS MORE THAN ONE JOB [f121=1], goto f401; ELSE goto test f50]**

>f401< Is [fill PERSON NAME]'s health insurance with [fill INSURANCE PLAN NAME] from (his/her/your) main job or business?
 YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED r
 ==> goto next person or g10

>test f50< **[IF PERSON IS NOT SELF-EMPLOYED (f201 = 1, 2, 3 or 4) AND IS NOT A POLICY HOLDER FOR AN EMPLOYER/UNION BASED PLAN (PERSON NOT LISTED IN b231, OR IF LISTED, b251 1) AND IS LT 65 YEARS OLD, goto f501; ELSE goto NEXT PERSON OR g10]**¹⁴ The questions for workers who decline own employers's coverage are **not** asked of policy holders.

>f501< Does (your/[fill NAME]'s) employer or union offer a health insurance plan to any of its employees?
INTERVIEWER: THIS QUESTION APPLIES TO [fill NAME's] LOCATION.
 YES..... 1 [goto test f5011]
 NO 0
 DON'T KNOW d
 REFUSED r
 ==> [goto test f611]

>TEST5011< [IF f261=1, go to f5011;else go to f511]

¹⁴Skipped self-employed.

>f5011< Is the health insurance plan offered by [fill NAME'S] employer or union?

EMPLOYER.....1
UNION.....2
BOTH [FILL EMPLOYER IN FOLLOWING QUESTIONS].....3
DON'T KNOW [GO TO NEXT PERSON OR G10]
REFUSED [GOTO test f611]

>f511< (Are you/Is [fill NAME]) eligible to participate in (his/her/your) employer's health insurance plan?

YES..... 1 [goto test f521]
NO 0 [goto f531]

DON'T KNOW d [goto test f611]
REFUSED r [goto test f611]
====>

>test f521< **[IF PERSON HAS INSURANCE COVERAGE UNDER AN EMPLOYER/UNION BASED PLAN (NAMED UNDER BIA OR BIC), goto f541; ELSE goto f521].**

>f521< (Are you/Is [fill NAME]) not participating in (his/her/your) employer's health insurance plan because the plan costs too much, because (he/she/you) do(es) not need health insurance, or for some other reason? (CODE MAIN REASON.)

COSTS TOO MUCH 1
DON'T NEED HEALTH INSURANCE 2
OTHER (SPECIFY)..... 3

DON'T KNOW d
REFUSED r
====> [goto f541]

>f531< (Are you/Is [fill NAME]) ineligible because (you/he/she) (have/has) not worked long enough, because (you/he/she) (don't/doesn't) work enough hours, because (you/he/she) (are/is) on-call, because of medical problems, or for some other reason? [CODE ONLY ONE]

HAVEN'T WORKED LONG ENOUGH 1
DON'T WORK ENOUGH HOURS..... 2
ON-CALL 3
MEDICAL PROBLEM..... 4
OTHER [SPECIFY] 5

DON'T KNOW d
REFUSED r
====>

>f541<

Does (your/[fill NAME]'s) employer offer only one health insurance plan or more than one health insurance plan to its employees?

- ONE PLAN..... 1
 - MORE THAN ONE PLAN..... 2

 - DON'T KNOW d
 - REFUSED..... r
- ==>

[goto NEXT PERSON or g10]

G. FAMILY INCOME

>g10< The next questions are about income that (your family [insert names if multiple family household]) received during (2006). During (2006), what was your family's total income from all sources, before taxes and other deductions?

NOTE: CHANGE IN YEAR.

PROBES:

- (1) We are asking these questions to find out whether people can afford the health care they need.
- (2) Total income includes wages and salaries from jobs, net income from farms or businesses, interest or dividends, pensions or social security, income from rental property, estates, or trusts, public assistance or welfare, social security, child support, and other sources.
- (3) Your best estimate would be fine.
- (4) Include the (2006) income of all current family members, (including active military), even if you weren't living together then.

NONE 0

\$ |__|__|__|,|__|__|__|
(10 - 999999)

\$1,000,000 OR MORE 7

DON'T KNOW d [goto g11]

REFUSED r

==> [goto test g20]

>g11< Which of the following income ranges is closest to your family's (2006) total income from all sources?

PROBE: Your best estimate would be fine.

- Less than \$5,000..... 1
 - \$5,000 to less than \$10,000 2
 - \$10,000 to less than \$20,000 3
 - \$20,000 to less than \$30,000 4
 - \$30,000 to less than \$40,000 5
 - \$40,000 to less than \$50,000 6
 - \$50,000 to less than \$100,000 7
 - Over \$100,000 8

 - DON'T KNOW d
 - REFUSED r
- ====>

>test g20< **[REPEAT g201-g311 FOR EACH PERSON; HOWEVER, SKIP FOR INFORMANT'S OWN CHILD OR GRANDCHILD.]**

>g201< (Do you/Does [fill NAME] consider (yourself/himself/herself) to be of Hispanic origin?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to find out whether people can afford the health care they need.

- YES [go to g201orig] 1
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====> go to g22n1

>g201ORIG< What is (your/his/her) origin or descent?

INTERVIEWER: CODE ALL THAT APPLY

- Mexican 1
- Puerto Rican 2
- Cuban 3
- Dominican 4
- Salvadoran 5
- Other Central American 6
- Other South American 7
- Or some other area [SPECIFY] 8

- DON'T KNOW d
- REFUSED r

>g22n1< I'm going to read you a list of five race categories. Please choose one or more races that (you/he/she) consider(s) (yourself/himself/herself) to be.

INTERVIEWER: (1) READ ALL CATEGORIES . CODE UNLISTED, RESPONDENT-OFFERED CATEGORIES IN "OTHER"

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand different health care problems and needs people have.

PROBE IF R ANSWERS HISPANIC OR LATINO: Would that be white (Hispanic/latino) black (Hispanic/latino) or something else?

INTERVIEWER: CODE ALL RACES

White..... 1
African American or Black 2
American Indian or Alaska Native 3
Asian..... 4
Native Hawaiian or other Pacific Islander 5
OTHER [SPECIFY]

DON'T KNOW d
REFUSED r
===>

>g301< (Are you/Is he/Is she/Is NAME) a citizen of the United States?

YES..... 1 [goto g311]
NO 0 [goto g321]

DON'T KNOW d
REFUSED r
===>goto g321

>g311< (Were you/Was he/Was she/Was NAME) born a citizen of the United States or did you become a citizen of the US through naturalization?

BORN 1 [goto NEXT]
PERSON OR S9]
NATURALIZED 2

DON'T KNOW d
REFUSED r
===>goto g321

>g321<

When did (you/NAME) come to live in the United States?

[CODE YEAR OR NUMBER OF YEARS AGO]
PROGRAMMER: CHECK THAT YEAR OR NUMBER OF YEARS AGO IS NOT BEFORE BIRTH

|_|_|_|_| YEAR

|_|_|_|_| NUMBER OF YEARS AGO
(0-AGE)

DON'T KNOW d
REFUSED r
==>

>S9<

Were either or both of your parents born outside the 50 states (or the District of Columbia)?

No, both my parents were born in the 50 states. 0
Yes, one of my parents was born outside the 50 states. 1
Yes, both of my parents were born outside the 50 states 2

DON'T KNOW d
REFUSED r

>S9a<

Were either or both of [SPOUSE/PARTNER]'s parents born outside the 50 states (or the District of Columbia)?

No, both [SPOUSE]'s parents were born in the 50 states 0
Yes, one [SPOUSE]'s parents was born outside the 50 states 1
Yes, both [SPOUSE]'s parents were born outside the 50 states 2

DON'T KNOW d
REFUSED r

>test g23<

**[IF FAMILY HAS MORE THAN ONE ADULT, goto NEXT PERSON OR g23;
ELSE goto test h10]**

>g23<

INTERVIEWER: THERE WILL BE A SELF RESPONSE MODULE FOR THIS CASE

<g> CONTINUE
==>

h. CLOSING (FIU)

>h10< As a token of our appreciation for your help, we would like to send you a check for \$20). Could you please give me your and your full name and address?

PROBE: Your name and address are confidential and will only be used if we call you for another interview.

READ AFTER NAME AND ADDRESS OBTAINED: Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

YES..... 1
NO 0

<Enter First Name>
<Enter Last Name>
<Enter Street Address>
<Enter City/State>
<Enter Zip Code>

DON'T KNOW
REFUSED
==> [

>h30< Not counting any cellular telephones, are there any other telephone numbers in this household besides [number] that people receive calls on?

PROBE: We need this information so that households are correctly represented in our sample.

PROBE: Please exclude telephone lines used only for computer modems or faxes.

IF YES: How many additional phone numbers do you have?

.....0 [goto h32]

|__| OTHER TELEPHONE NUMBERS
(1-4)

REFUSED..... r [goto end]
==>

>h31< (Is this/Are these) other phone number(s)for

Home use..... 1
Business and home use 2
Business use only 3
DON'T KNOW d
REFUSED r
====>

>h32< During the past 12 months, was there any time when you did not have a working telephone in your household for two weeks or more?

YES..... 1 [goto h33]
NO 0

DON'T KNOW d
REFUSED r
====> [goto end]

>h33< For how many of the past 12 months did you not have a working telephone?

|__| |__| MONTHS
(0-12)

DON'T KNOW d [goto end]
REFUSED r [goto end]
====>

>h34< What was the main reason you did not have telephone services? [Keeter, POQ, Summer 1995, P. 203]

COST 1
MOVED [COST NOT MENTIONED] 2
PERSONAL PREFERENCE 3
SERVICE NOT AVAILABLE 4

DON'T KNOW d
REFUSED r
====>

>test< [IF NO SELF RESPONSE MODULE OR SECONDARY FAMILY, goto fin;
ELSE goto next_person]

>next_person< I would also would like to speak with [fill NAME]. I need to ask (him/her/them) questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$20 for helping us with the survey. Can I speak with READ NAMES now?

#	NAME	RELATION	FAM	STATUS	SEX	AGE
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	1
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	2
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	3
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	4
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	5
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	6
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	7
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	8

====>

IF NECESSARY ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

SPEAKING TO RESPONDENT - ENTER NUMBER

CALLBACK c [goto callback]
REFUSED r [goto refused]
====>

>test< IF SELF RESPONSE MODULE GOTO INTRODUCTION FOR SELF-RESPONSE IF SECONDARY FAMILY GOTO INTRODUCTION FOR SECONDARY FAMILY

>next_person< [SELF RESPONSE MODULE I would also like to speak with [fill NAME]. I need to ask (him/her) questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$20 for helping us with the survey. Can I speak with READ NAMES now?

IF NECESSARY ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

SPEAKING TO RESPONDENT – ENTER NUMBER1

CALLBACK C ¹⁵
LANGUAGE PROBLEM.....l
REFUSED..... r
SUPERVISOR REVIEW..... S
==>

<fin> Thank you again for your time and interest in this important survey.

This concludes the survey unless you have a brief comment you would like to add.

comments [specify] c
interview complete g
==>

¹⁵THESE QUESTION SEQUENCES ARE ONLY SHOWN IN THE CATI PROGRAM.

SELF RESPONSE MODULE

>slf1<

My name is _____. I am calling about the telephone survey that [fill NAME] participated in on [fill DATE OF INTERVIEW]. Most of the interview has already been completed by [fill NAME] I have a few questions about your health and opinions, that will only take about 10 minutes. As a token of our appreciation, we will send you insert amount for helping us with the study

IF NECESSARY READ PROBE: We are doing this study to see how changes in health care are affecting people. We need to interview you as well as [fill NAME] because some of the questions ask for people's opinions about their own health and health care.

SPONSOR: The project is sponsored by The Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care.

ENTER STATUS FOR [fill NAME]

WILL COMPLETE SELF RESPONSE SECTION 1

RESPONDENT WILL ACT AS PROXY FOR [fill NAME]

[fill NAME] IS CHRONICALLY ILL 2

[fill NAME] IS AWAY AT SCHOOL 3

[fill NAME] SPEAKS NEITHER ENGLISH
NOR SPANISH 4

[fill NAME] WON'T DO SELF-RESPONSE SECTION 5

====>

>b93_sr2< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.¹⁶

PROBE: CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

STRONGLY AGREE 1
SOMEWHAT AGREE..... 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE..... 7
DON'T KNOW d
REFUSED r
====>

>c81_sr2< Next, during the past 12 months, was there any time when you didn't get the medical care you needed?

INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>c82_sr2< And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test c83_sr2< [IF c81_sr2 EQ <1> OR <d> OR c82_sr2 EQ <1> OR <d> goto c83sr1;

¹⁶Source: Royal, Kenneth, et al., The Gallup Arizona Health Care Poll. P.18, The Gallup Organization, 1995. Distributions by coverage available.

>c83sr1< **ELSE goto c84_sr2]**
 Did you not get the medical care you needed or have delays in getting the medical care you needed for any of the following reasons?

CODE ALL THAT APPLY

- Worry about the cost 1
- The doctor or hospital wouldn't accept your health insurance..... 2
- Your health plan wouldn't pay for the treatment 3
- You couldn't get an appointment soon enough..... 4
- You couldn't get there when the doctor's office or clinic was open..... 5
- It takes too long to get to the doctor's office or clinic from your house or work..... 6
- You couldn't get through on the telephone 7
- You were too busy with work or other commitments to take the time 8
- You didn't think the problem was serious enough..... 9
- Or any other reason I haven't mentioned [SPECIFY] 0
- NONE CITED/NO OTHER RESPONSES n
- NEED TO DELETE A RESPONSE x

- DON'T KNOW d
- REFUSED r
- ====>

>c84_sr2< During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED r

>e12_sr2< Now I would like to ask you about satisfaction with your **choice** of doctors.

First primary care doctors, such as family doctors, [pediatricians,]¹⁷ or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with the **choice** you personally have for primary care doctors?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

SATISFIED 1 [goto e13_sr2]
DISSATISFIED 2 [goto e13_sr2]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto e14_sr2]

>e13_sr2< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>e14_sr2< In the past 12 months, did you or a doctor think you needed to see a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.

YES..... 1 [goto cahps121]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test e15a_sr2]

¹⁷Exclude for adults.

>cahps121< In the last 12 months, did (you/NAME) see a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>e15_sr2< Are you satisfied or dissatisfied with the **choice** you have for specialists?

SATISFIED 1 [goto test E15a_sr2]
DISSATISFIED 2 [goto test E15a_sr2]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto test e1512_sr2]

>E15a_sr2< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>test e1512_sr2<if d121spec2 = 1 and CAHPS121=1, go to e1512_sr2;else go to test e15a_sr2

>e1512_sr2< In the last 12 months, how often did your usual doctor seem informed and up-to-date about the care you got from specialists? (Source: CAHPS)

NEVER 1
ALMOST NEVER 2
SOMETIMES 3
USUALLY 4
ALMOST ALWAYS 5
ALWAYS 6
NO USUAL DOCTOR 7 [goto teste15a_sr2]
MY SPECIALIST IS MY USUAL DOCTOR 8 [goto teste15a_sr2]

DON'T KNOW d
REFUSED r [goto teste15a_sr2]

>e1513_sr2< After going to the specialist, did your usual doctor talk with you about what happened at the visit (with the specialist?). (Source: Starfield, Primary Care Assessment Tool)

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>test e15a_sr2< c312 or c322 ge 1 GO TO CAHPSLANG_sr2; else, go to test e16_sr2

>CAHPSLANG_sr2< In the last 12 months, how often did you have a hard time speaking with or understanding a doctor or other health providers because you spoke different languages? Never, sometimes, usually or always?

NEVER 1
SOMETIMES 2
USUALLY 3
ALWAYS 4

DON'T KNOW d
REFUSED r
===>

>test e16_sr2< [IF PERSON HAS HAD PHYSICIAN VISITS IN LAST 12 MONTHS (1 ≤ c31_sr2 ≤ 96 OR 1 ≤ c32_sr2 ≤ 5), goto CAHPS5_sr2; ELSE goto test e40_sr2]

>CAHPS5_sr2< In the last 12 months, not counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic?

YES..... 1 [goto E261R5_sr2]
NO 0

DON'T KNOW d
REFUSED r
===> [goto e40_sr2]

>E261R5_sr2< Thinking of the last time you made an appointment at a doctor's office or clinic, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: (1) CODE "0" FOR SAME DAY.

(2) ACCEPT MOST CONVENIENT TIME PERIOD.

SAME DAY 0

___ (0-31) DAYS OR ___ (1-20) WEEKS OR ___ (1-5) MONTHS

DON'T KNOW d

REFUSED r

>e40_sr2< Now, I have a few questions about your health.

In general, would you say your health is:

Excellent 1

Very Good 2

Good 3

Fair or 4

Poor 5

DON'T KNOW d

REFUSED r

====>

>n1a< **[IF FEMALE AND AGE 50 OR UNDER]**

The next questions are about your health during the past two years. During the past two years, have you had a baby?

YES 1

NO 0

DON'T KNOW d

REFUSED r

>nn2c_sr2< **[IF FEMALE]** During the past two years, have you seen a doctor or health care professional for abnormal uterine bleeding?

YES 1

NO 0

DON'T KNOW d

REFUSED r

>nn3_sr2@b< Has a doctor or health professional ever told you that you had diabetes or high blood sugar?

YES..... 1 [goto nn3_sr2@bb]
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@bb< IF YES: During the past two years, have you seen a doctor or other health care professional for diabetes or high blood sugar?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@c< Has a doctor or health professional ever told you that you had arthritis?

YES..... 1 [goto nn3_sr2@cc]
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@cc< **IF YES:** During the past two years, have you seen a doctor or other health care professional for arthritis?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@d< Has a doctor or health professional ever told you that you had asthma?

YES..... 1 [goto nn3_sr2@dd]
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@dd<**IF YES:** During the past two years, have you seen a doctor or other health care professional for asthma?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>nn3_sr2@e< Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?

YES..... 1 [goto nn3_sr2@ee]
NO 0

DON'T KNOW d
REFUSED r

>nn3_sr2@ee< **IF YES:** During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>nn3_sr2@g< Has a doctor or health professional ever told you that you had hypertension or high blood pressure?

YES..... 1 [goto nn3_sr2@gg]
NO 0

DON'T KNOW d
REFUSED r

>nn3_sr2@gg< **IF YES:** During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>nn3_sr2@i< Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?

YES..... 1 [goto nn3_sr2@ii]
NO 0

DON'T KNOW d
REFUSED r

>nn3_sr2@ii< **IF YES:** During the past two years, have you seen a doctor or other health care professional for coronary heart disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>nn5_sr2@c< Has a doctor or health professional ever told you that you had skin cancer?

YES..... 1 [goto nn5_sr2@cc]
NO 0

DON'T KNOW d
REFUSED r

>nn5_sr2@cc< **IF YES:** During the past two years, have you seen a doctor or other health care professional for skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>nn5_sr2@h< Has a doctor or health professional ever told you that you had cancer other than skin cancer?

YES..... 1 [goto nn5_sr2@hh]
NO 0

DON'T KNOW d
REFUSED r

>nn5_sr2@hh< **IF YES:** During the past two years, have you seen a doctor or other health care professional for that cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>n5f4_sr2< **IF FEMALE or MALE AGE 50 OR UNDER GOTO nn6_sr2e. IF MALE AGE OVER 50:** Has a doctor or health professional ever told you that you had benign prostate disease or a large prostate that was not prostate cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>n5f4ee_sr2< **IF YES:** During the past two years, have you seen a doctor or other health professional for benign prostate disease?

>nn6_sr2@e< Has a doctor or health professional ever told you that you had depression?

YES..... 1 [goto nn6_sr2@ee]
NO 0

DON'T KNOW d
REFUSED..... r

>nn6_sr2@ee< **IF YES:** During the past two years, have you seen a doctor or other health care professional for depression?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>nn7_sr2< During the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

QUALITY OF CARE

>testccq_sr2< [if seen a doctor during the past two years for abnormal uterine bleeding, diabetes, arthritis, asthma, COPD, hypertension, CHD, skin cancer, other cancer, benign prostate disease, or depression, go to CCQ1_sr2, ELSE GO TO CE2_sr2

>CCQ1_sr2< Do you see only one doctor or more than one doctor for treatment of [INSERT PATIENT'S CHRONIC DISEASE(S)]?

- ONE 1 [goto CCQ3_sr2]
- MORE THAN ONE 0 [goto CCQ2_sr2]

- DON'T KNOW d [goto CCQ3_sr2]
- REFUSED r [goto CCQ3_sr2]

>CCQ2_sr2< Which of the following statements best describes how well the different doctors you see for [INSERT PATIENT'S CHRONIC CONDITION(S)] coordinate your care? By care coordination, we mean how well do your doctors work together to manage your health care.

- My care is not coordinated at all 1
- My care is coordinated some of the time 2
- My care is coordinated most of the time 3
- My care is coordinated all of the time 4

- DON'T KNOW d
- REFUSED r

>CCQ 3_sr2< Next, I will read some statements about experiences with your health care providers. These are the doctors, nurses, therapists, pharmacists and others who help you manage your condition(s). Please tell me whether you strongly agree, agree, disagree or strongly disagree with each statement. When discussing your condition and its treatment with your health care providers, did they...

INTERVIEWER: IF R. SAYS THERE WAS ONLY ONE PROVIDER, YOU CAN SUBSTITUTE "HE" OR "SHE."

- A. Explain things in a way you could understand
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly Disagree..... 4
 - Not applicable 5

 - DON'T KNOW d
 - REFUSED r

- B. Spend enough time with you
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly Disagree.....4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r
- C. Treat you with respect and dignity
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly Disagree.....4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r
- D. Help you set specific goals to improve your diet
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly Disagree.....4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r
- E. Help you set specific goals for exercise
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly Disagree.....4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r
- F. Teach you how to monitor your condition(s) so you could tell how you are doing
- Strongly agree..... 1
 - Agree2
 - Disagree3
 - Strongly Disagree.....4
 - Not applicable 5
- DON'T KNOW d
- REFUSED..... r

>CCQ4_sr2< Do you strongly agree, agree, disagree or strongly disagree with the following statement. When I am prescribed a new medication, I read about the possible side effects. (HP.QBB11.NC)

- Strongly agree..... 1
- Agree 2
- Disagree 3
- Strongly Disagree..... 4
- Not applicable 5

- DON'T KNOW d
- REFUSED..... r

>CCQ5_sr2< In the last 6 months, did you receive a phone call from any of your health care providers to see how you were doing without you calling them first? By health care provider we mean doctor, nurse, therapist, pharmacist and others who help you manage your condition. (ICICE.DIAF.29.MC)

- YES..... 1
- NO 0

- DON'T KNOW d
- REFUSED..... r

NOTE: CONTINUE WITH CONSUMER ENGAGEMENT QUESTIONS (CE1) FOR CHRONIC CONDITION SUB-SAMPLE

CONSUMER ENGAGEMENT

>CE1_sr2< Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with each statement as it applies to you personally. Your answers should be what is true for you. If the statement does not apply to you, just let me know and we will move on to the next one.

RANDOMIZE

1. Taking an active role in my own health care is the most important factor in determining my health and ability to function.
 - Strongly agree..... 1
 - Agree 2
 - Disagree 3
 - Strongly disagree 4

 - DON'T KNOW d
 - REFUSED..... r

2. When all is said and done, I am the person who is responsible for managing my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
3. I know what each of my prescribed medications does.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
4. I am confident that I can follow through on medical treatments I need to do at home.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
5. I am confident I can tell my health care provider concerns I have even when he or she does not ask.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
6. I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r

7. I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
8. I understand the nature and causes of my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
9. I know the different medical treatment options available for my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
10. I know how to prevent further problems with my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
11. I have been able to maintain the lifestyle changes for my health that I have made.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r

12. I am confident I can figure out solutions when new situations or problems arise with my health condition(s).
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r
13. I am confident that I can maintain lifestyle changes like diet and exercise even during times of stress.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r

****GO TO e52_sr2****

NON-CHRONIC CONDITION SAMPLE

>CE2_sr2< Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you Strongly agree, agree, disagree, or strongly disagree with each statement as it applies to you personally. Your answers should be what is true for you. If the statement does not apply to you, just let me know and we will move on to the next one.

RANDOMIZE

1. When all is said and done, I am the person who is responsible for managing my health.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
 DON'T KNOW d
 REFUSED r
2. Taking an active role in my own health care is the most important factor in determining my health and ability to function.
- Strongly agree..... 1
 Agree 2
 Disagree 3
 Strongly disagree 4
- DON'T KNOW d
 REFUSED r

3. I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED r
4. I know what each of my prescribed medications does.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED r
5. I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED r
6. I am confident that I can tell a doctor concerns I have, even when he or she does not ask.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED r
7. I am confident that I can follow through on medical treatments I may need to do at home.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED r

8. I understand the nature and causes of my health problems.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED..... r
9. I know the different medical treatment options available for my health conditions.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED..... r
10. I have been able to maintain the lifestyle changes for my health that I have made.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED..... r
11. I know how to prevent problems with my health.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED..... r
12. I am confident I can figure out solutions when new situations or problems arise with my health.
- Strongly agree..... 1
 Agree2
 Disagree3
 Strongly disagree4
- DON'T KNOW d
 REFUSED..... r

13. I am confident that I can maintain lifestyle changes, like diet and exercise, even during times of stress.

- Strongly agree..... 1
- Agree 2
- Disagree 3
- Strongly disagree 4

- DON'T KNOW d
- REFUSED r

**** CONTINUE WITH e52_sr2****

>e52_sr2< Now, please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statement. I'm more likely to take risks than the average person.

INTERVIEWER: (1) NEITHER AGREE NOR DISAGREE IS NOT READ, BUT IS CODED IF OFFERED

(2) PROBE BY ASKING: In general, . . .
OR: Whatever you think of as risks . . .

- STRONGLY AGREE..... 1
 - AGREE 2
 - NEITHER AGREE NOR DISAGREE 3
 - DISAGREE 4
 - STRONGLY DISAGREE 5

 - DON'T KNOW d
 - REFUSED r
- ==>

>e60_sr2< These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?

- YES..... 1[goto e61_sr2]
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ==> [goto BRFSS10_sr2]

>e61_sr2< Do you now smoke cigarettes every day, some days or not at all?

EVERYDAY 1
SOME DAYS..... 2
NOT AT ALL 3

DON'T KNOW d
REFUSED..... r
====>

>BRFSS10_sr2< About how much do you weigh without shoes? (BRFSS12.10)

INTERVIEWER NOTE: ROUND UP FRACTIONS

<80 - 500> POUNDS

DON'T KNOW d
REFUSED..... r
====>

>BRFSS11_sr2< About how tall are you without shoes? (BRFSS12.11)

INTERVIEWER NOTE: ROUND DOWN FRACTIONS

<3-7> FEET

AND/OR

<1-11> INCHES

DON'T KNOW d
REFUSED..... r
====>

Consumer Information Seeking

>CI1_sr2< During the past 12 months, did you look for or get information about a **PERSONAL** health concern: (Source: RAND CA Survey)

RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

a. On the internet
YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

- b. From friends or relatives
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- c. From TV or radio
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- d. From books or magazines
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- e. From newspapers
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- f. From somewhere else other than doctor (SPECIFY)
 - Health care professional (NON-PHYSICIAN)
 - Health care organization
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

IF YES TO ANY, GO TO CI2_sr2; ELSE GO TO CI5_sr2

- >CI2_sr2< [IF YES TO CI1_sr2] Did you later talk with a doctor or other health care professional about any of the information you found, or didn't you happen to do this? (Source: Pew 2006)
- YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r

>CI3_sr2< [IF YES TO CI1_sr2] Did any of the health information you found change your overall approach to maintaining your health? (Source: modified, Pew, 2006)

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CI4_sr2< [IF YES TO CI1_sr2] Did any of the health information you found help you to better understand how to treat an illness or condition?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CI5_sr2< During the past 12 months, did you look for or get information about a health concern for **another adult**, such as a friend or family member:

RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

- a. On the internet
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- b. From friends or relatives
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- c. From TV or radio
YES..... 1
NO 0

DON'T KNOW d
REFUSED r
- d. From books or magazines
YES..... 1
NO 0

DON'T KNOW d
REFUSED r

- e. From newspapers
- YES..... 1
 NO 0
- DON'T KNOW d
 REFUSED r
- f. From somewhere else other than doctor (SPECIFY)
 Health care professional (NON-PHYSICIAN)
 Health care organization
- YES..... 1
 NO 0
- DON'T KNOW d
 REFUSED r

INFORMATION TECHNOLOGY

>IT1_sr2< Do you ever go on line to use the Internet or World Wide Web?

- YES..... 1[goto IT2_sr2]
 NO 0[goto IT3b_sr2]
- DON'T KNOW d [goto IT3b_sr2]
 REFUSED r [goto IT3b_sr2]
 ==>

>IT2_sr2< In general, how often do you go online- several times a day, about once a day, 3-5 days a week, 1 to 2 days a week, once every few weeks, or less often than that? (Source: modified KFF-10, Pew, 2003)

- SEVERAL TIMES A DAY 1
 ABOUT ONCE A DAY 2
 3 TO 5 DAYS A WEEK..... 3
 1 TO 2 DAYS A WEEK..... 4
 ONCE EVERY FEW WEEKS 5
 LESS OFTEN..... 6
- DON'T KNOW d
 REFUSED r

>IT3_sr2< IF YES TO IT1: Some doctor's offices allow patients to contact them by email or by going to a web site on the Internet. During the past 12 months, have you used email or gone to a web site to contact a doctor or doctor's office about your personal health needs?

- YES..... 1[goto IT3a_sr2]
- NO 0[goto IT3b_sr2]
- NEVER SEE DOCTORS..... 2[goto IT3b_sr2]

- DON'T KNOW d[goto IT3b_sr2]
- REFUSED..... r [goto IT3b_sr2]

>IT3a_sr2< Did you use e-mail or a web site ...

ROTATE a-e and then ask f

- a. To renew a prescription
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- b. To schedule an appointment
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- c. To discuss a health problem with a physician, nurse or other health care provider
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- d. To see the results of diagnostic tests or [INSERT CHILD NAME]'s medical history
 - YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED..... r

- e. To get reminders for upcoming appointments
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
 - f. Anything else [SPECIFY]
 - YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- ====> [GOTO CS1_sr2]

>IT3b_sr2< [DO NOT DISPLAY IF IT3 WAS ASKED] Some doctor's offices allow patients to contact them by email or by going to a web site on the Internet. To the best of your knowledge, do any of the doctors or doctors' offices you visit for your personal health needs allow patients to contact them by e-mail or by going to a web site?

- YES..... 1
- NO 0
- NEVER SEE DOCTORS 2
- DON'T KNOW d
- REFUSED r

CONSUMER SHOPPING

>CS1_sr2< A personal doctor is the health provider you see most often and who knows you best. During the past 12 months did you look for a new personal doctor?

- YES..... 1
- NO 0[goto testcs9_sr2]
- DON'T KNOW d[goto testcs9_sr2]
- REFUSED r [goto testcs9_sr2]

>CS2_sr2< Did you find a personal doctor?

- YES..... 1
- NO 0[goto testcs9_sr2]
- DON'T KNOW d[goto testcs9_sr2]
- REFUSED r [goto testcs9_sr2]

>CS3_sr2< Which of the following sources did you use in looking for a new personal doctor?

- A. Recommendation of another doctor or health care provider
- B. Information from your health insurance plan
- C. Books, magazines or newspapers
- D. Friends or relatives
- E. TV or radio
- F. The Internet
- G. Anything else [SPECIFY]

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF NO SOURCES MENTIONED, GO TO CS8_sr2

>CS4_sr2< Did any of the sources you used provide information that compared the cost of care charged by different doctors?

YES..... 1
 NO 0[goto testCS6_sr2]
 DON'T KNOW d[goto CS6_sr2]
 REFUSED r [goto CS6_sr2]

>CS5_sr2< Did you use this information in choosing a personal doctor?

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED r

>CS6_sr2< Did any of the sources you used provide information that compared the quality and performance of different doctors?

YES..... 1
 NO 0[goto testCS8_sr2]
 DON'T KNOW d[goto CS8_sr2]
 REFUSED r [goto CS8_sr2]

>CS7_sr2< Did you use this information in choosing a personal doctor?

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED r

>CS8_sr2< I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing a personal doctor.

- a. The cost of care
- b. The recommendation of another doctor
- c. The reputation of the personal doctor providing the care
- d. Short wait time for appointments
- e. Location of the personal doctor's practice
- f. The doctor is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>testcs9_sr2< [if CAHPS121=1, GO TO CS9_sr2; ELSE GO TO CS20_sr2]

>CS9_sr2< You mentioned earlier that you have seen a specialist. During the past 12 months, have you seen only one specialist or more than one specialist?

- NONE 0 [goto CS20_sr2]
- ONE 1
- MORE THAN ONE 2

- DON'T KNOW d
- REFUSED r

>CS10_sr2< (IF MORE THAN ONE, READ: Please think about the last specialist you saw.) Did you first see this specialist during the last 12 months or did you first see this specialist more than 12 months ago?

- MORE THAN 12 MONTHS AGO 1 [goto CS20_sr2]
- LESS THAN 12 MONTHS AGO 2

- DON'T KNOW d
- REFUSED r

>CS11_sr2< Did your personal doctor refer you to this specialist or did you find this specialist in some other way?

- REFERRED BY DOCTOR 1
- SOME OTHER WAY 2 [goto CS14_sr2]

- DON'T KNOW d [goto CS14_sr2]
- REFUSED r [goto CS14_sr2]

IF REFERRED

>CS12_sr2< Did your personal doctor give you a choice of specialists or recommend only one specialist?

- CHOICE 1
- ONLY ONE 2

- DON'T KNOW d
- REFUSED r

>CS13_sr2< Besides the referral from your personal doctor, did you use any other sources of information in looking for the specialist?

- YES – USED OTHER SOURCES 1
- NO – ONLY DOCTOR REFERRAL 2 [goto testCS19_sr2]

- DON'T KNOW d [goto testCS19_sr2]
- REFUSED r [goto testCS19_sr2]

>CS14_sr2< Did you use any of the following sources in looking for the specialist?

- a. Recommendation of a doctor or health care provider who is not your personal doctor
- b. Information from your health insurance plan
- c. Books, magazines or newspapers
- d. Friends or relatives
- e. TV or radio
- f. The Internet
- g. Anything else [SPECIFY]

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF ANY SOURCES CODED YES, GO TO CS15_sr2; ELSE GO TO TESTCS19_sr2

>CS15_sr2< Did any of the sources you used provide information that compared the cost of care charged by different doctors?

- YES 1
- NO 0 [goto CS17_sr2]

- DON'T KNOW d [goto CS17_sr2]
- REFUSED r [goto CS17_sr2]

>CS16_sr2< Did you use this information in choosing a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>CS17_sr2< Did any of the sources you used provide information that compared the quality and performance of different doctors?

YES..... 1
NO 0 [goto testCS19_sr2]

DON'T KNOW d [goto testCS19_sr2]
REFUSED r [goto testCS19_sr2]

>CS18_sr2< Did you use this information in choosing a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>TESTCS19_sr2< IF CS12_sr2=1 OR CS11_sr2=2, GO TO CS19_sr2;ELSE GO TO CS20_sr2

>CS19_sr2< I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this specialist.

- a. The cost of medical care and treatment
- b. The recommendation of your personal doctor (**SKIP IF NO REFERRAL**)
- c. The reputation of the specialist
- d. Short wait time for an appointment
- e. Location of the specialist's practice
- f. The specialist is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>CS20_sr2< In the past 12 months, have you had any type of surgical or non-surgical procedure?

PROBE: Do not include routine blood work, X-rays, or mammograms.

PROBE: By non-surgical procedure, we mean things like a biopsy, colonoscopy, MRI, etc.

INTERVIEWER: IF IN DOUBT, INCLUDE THE PROCEDURE. OUR GOAL IS TO BE AS BROAD AS POSSIBLE, IN DEFINING PROCEDURES TO TEST FOR CONSUMER SHOPPING.

YES..... 1
NO 0 [goto test e16c]

DON'T KNOW d [goto test e16c]
REFUSED r [goto test e16c]

>CS21_sr2< If you had more than one procedure in the last 12 months, please think about the last procedure you had. Was the procedure performed in a hospital, a clinic, a doctor's office, or somewhere else?

HOSPITAL 1
CLINIC 2
DOCTOR'S OFFICE 3
SOMEWHERE ELSE (SPECIFY)..... 4

DON'T KNOW d
REFUSED r

>CS22_sr2< Was the first time you had a procedure performed at this INSERT PLACE during the last 12 months or more than 12 months ago?

MORE THAN 12 MONTHS AGO 1 [goto test e16c]
LESS THAN 12 MONTHS AGO 2

DON'T KNOW d [goto test e16c]
REFUSED r [goto test e16c]

>CS23_sr2< Was the INSERT PLACE recommended by the doctor performing the procedure or did you choose the place some other way?

RECOMMENDED BY DOCTOR 1
SOME OTHER WAY 2 [goto CS26_sr2]

DON'T KNOW d [goto CS26_sr2]
REFUSED r [goto CS26_sr2]

IF RECOMMENDED BY DOCTOR

>CS24_sr2< Did your doctor give you a choice of places to have the procedure or recommend only this one place?

- CHOICE 1
- ONLY ONE 2

- DON'T KNOW d
- REFUSED r

IF RECOMMENDED BY DOCTOR

>CS25_sr2< Besides your doctor's recommendation, did you use any other sources of information in looking for a place to have the procedure?

- YES..... 1
- NO 0 [goto CS31_sr2]

- DON'T KNOW d [goto CS31_sr2]
- REFUSED r [goto CS31_sr2]

>CS26_sr2< Which of the following sources did you use in looking for the INSERT PLACE where you had the procedure?

- a. Recommendation from a doctor or other health care provider other than the one performing the procedure
- b. Information from your health insurance plan
- c. Books, magazines or newspapers
- d. Friends or relatives
- e. TV or radio
- f. The Internet
- g. Anything else (SPECIFY)

(1) YES (0) NO (d) DON'T KNOW (r) REFUSED

IF NO SOURCES MENTIONED, GO TO TESTCS31_sr2

>CS27_sr2< Did any of the sources you used provide information that compared how much different local INSERT PLACES are paid for similar services?

- YES..... 1
- NO 0 [goto CS29_sr2]

- DON'T KNOW d [goto CS29_sr2]
- REFUSED r [goto CS29_sr2]

>CS28_sr2< Did you use information from these reports in choosing a place to have the procedure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>CS29_sr2< Did any of the sources you used provide information that compared the quality and performance of local INSERT PLACES?

YES..... 1
NO 0 [goto CS31_sr2]

DON'T KNOW d [goto CS31_sr2]
REFUSED..... r [goto CS31_sr2]

>CS30_sr2< Did you use information from these reports in choosing a place to have the procedure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED..... r

>TESTCS31_sr2< IF CS24_sr2 = 1 OR CS23=2, GO TO CS31_sr2, ELSE GO TO test e16c

>CS31_sr2< I am going to read several factors that some people consider in choosing a place to have a procedure. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this place to have your procedure.

- a. The cost of medical care and treatment
- b. The recommendation of your personal doctor (**SKIP IF NO REFERRAL**)
- c. The reputation of the specialist
- d. Short wait time for an appointment
- e. Location of the specialist's practice
- f. The specialist is in my health plan's provider network
- g. Anything else (SPECIFY)

(1) MAJOR FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

>test e16c< **[IF THIS PERSON ACCOMPANIED CHILD ON LAST VISIT INCLUDE CHILD'S LAST VISIT QUESTIONS.] [k16-IT4b]**

>h10_sr2< As a token of our appreciation for your help, we would like to send you a check for \$20. Could you please give me your full name and address?

PROBE: Your name and address are confidential and will only be used if we call you for another interview.

READ AFTER NAME AND ADDRESS OBTAINED: Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

APPENDIX B
ADVANCE MATERIALS

ADVANCE LETTER

Dear Resident:

I am writing to encourage your participation in the Community Tracking Survey, a telephone survey about your health and health care. A member of the study team will be contacting you within the next two weeks to interview you and the other adults in your household. **Each person who completes the survey will receive \$20¹⁸ as a token of our appreciation.** We have also enclosed \$5 to thank you in advance for your time.

The Robert Wood Johnson Foundation (RWJF), the nation's largest charitable organization devoted to improving the nation's health and health care, sponsors the Community Tracking Study. The Foundation is not associated with any political party or private company. It supports non-partisan research that helps inform our nation's leaders about health care problems and ways they might be solved. Since 1996, RWJF has funded the Community Tracking Study to study how America's health care system is changing and how these changes affect people. These questions are especially important today. As you probably know, our health care system is under great strain, with rapidly rising costs and over 40 million Americans lacking health insurance.

Please be assured that all information you provide will be kept strictly confidential, and your name will not be associated with any of the answers. If you would like to schedule the interview yourself, please call 1-800-385-8047 toll-free and ask for Pat Licodo.

The attached fact sheet explains more about the study and the types of questions we will be asking. Thank you for your time and efforts concerning this important study.

Sincerely,

Risa Lavizzo-Mourey, M.D., M.B.A.

¹⁸ The amount was changed to \$40 during the survey.

ALTERNATIVE ADVANCE LETTER TESTED DURING SURVEY

Dear Resident:

In the last decade, the country has witnessed dramatic changes in health care, including a rapid increase in health care costs. Yet, little systematic information exists about how these changes are affecting American families and their access to affordable, high quality care. We are conducting survey interviews throughout the country to answer many questions. But the most important ones are:

- **Are people obtaining affordable health care that meets their needs?**
- **What can be done to help people whose needs are not being met?**
- **How are the changes in health care affecting the quality of care people receive?**

The study is sponsored by **The Robert Wood Johnson Foundation**, the nation's largest philanthropy devoted exclusively to improving health and health care. The Foundation supports training, education, research and projects that demonstrate effective ways to deliver health services, especially for the most vulnerable among us. The Robert Wood Johnson Foundation created the Center for Studying Health System Change to help us understand how all these changes are affecting families in communities throughout the U.S. The Community Tracking Study began in 1996 and is one of the few ongoing, long term assessments of the nation's health care system.

Your household has been selected to participate in the next phase of the study. While we understand how busy you are, we are asking for your help with a telephone interview that will take about 30 minutes for most people.

As a token of our appreciation for your contribution to this important research project, we are enclosing \$5, and we will send *you and each other adult member of your household* an additional **\$20¹⁹** for completing the interview.

Of course, all of the information you provide will be kept strictly confidential. Your name will not be associated with your answers. Your answers will be combined with thousands of others, and only overall findings will be presented.

If you would like to know more about our project, you can visit the web site of the Center for Studying Health System Change (www.hschange.org), the organization that is analyzing the results for us. If you would like to know more about The Robert Wood Johnson Foundation and our commitment to improving the health and health care of all Americans, you can visit our web site at www.rwjf.org.

An interviewer from **Mathematica**, the research organization helping us with the survey, will be calling soon to set up an interview. Or, if you would like to schedule the interview yourself, we have a convenient toll free number you can call (**1-800-385-8047**).

If you have any questions about the study, please feel free to call Leonie Infantry at the Robert Wood Johnson Foundation at 1-877-843-7953, extension 6040.

¹⁹ Increased to \$40 later in the survey.

Your household's participation in this survey will help us understand how changes in health care are continuing to affect people's lives. I hope that we can count on your help.

Sincerely,

Risa Lavizzo-Mourey, M.D., M.B.A.

RLM: pb

REFUSAL CONVERSION LETTER

Dear «First_Name_Letter» «Last_Name_Letter»:

One of our interviewers called your household recently about an important research study. I realize that you are very busy and that it is difficult to explain this study during a brief telephone call. I have enclosed a check for \$40 for you and your family as a token of appreciation for your help. By participating in a half hour interview, you will help us understand how changes in health care are affecting people's lives. If you decide you don't want to participate, you can tear up the check. But before you decide, please take a minute to read this letter about health care in the United States.

Why are we doing this study?

Health care is changing and no one really knows what these changes will mean for people. We are trying to answer important questions such as:

- Are people obtaining affordable health care that meets their needs?
- What can be done to help people whose needs are not being met?
- How are the changes in health care affecting the quality of care people receive?

Who is sponsoring this study?

The study is sponsored by The Robert Wood Johnson Foundation, a non-partisan, non-profit organization that helps states and communities improve the health care of their citizens. Foundation projects have trained doctors and nurses, helped children get vaccinated against diseases, and helped states make health insurance more available.

Why don't you just interview somebody else?

For surveys to be scientifically valid, they must represent the public. Your telephone number was scientifically selected from lists of possible telephone numbers in your area. We cannot replace your household with another household.

Will you keep my information confidential?

Yes, absolutely. Everyone working on this study is required by law to protect the confidentiality of respondents. Individual responses are never published in reports. They are combined with the responses of others and only overall findings are published.

Who will be calling my household?

Some time during the next few weeks, you will be called by an interviewer from Mathematica, an independent research organization conducting the survey. You can schedule the interview yourself by calling our convenient toll free number (**1-800-385-8047**). I sincerely hope that you will help us with this important study.

Sincerely,

Karen A. CyBulski
Study Director

FLYER ACCOMPANYING ADVANCE LETTER



HEALTH CARE IN THE UNITED STATES TODAY



One dollar out of every seven is spent on health care.



For those with company-provided health insurance, the average employee contribution has risen 143 percent since 2000.



Over 40 million Americans are without health care, roughly one out of seven Americans under age 65.

What the Community Tracking Study does



We will ask questions about your health and health insurance, doctor and hospital visits, problems you may have getting the care you need, and your views on health care.

We combine your answers with answers from thousands of other people, making sure that no one person's answers can be identified from the data we compile.

Our findings appear on the web site for the Community Tracking Study (www.hschange.org), in published articles, in the media, and at conferences.

Data from previous rounds of the Community Tracking Study have informed policymakers in Washington, DC and in state governments around the country on Americans' experiences with and opinions about the health care system.

Who we are and who will collect the data



The Robert Wood Johnson Foundation is a non-profit organization that works to improve the health and health care of people in this country. The foundation is not associated with any political party or private company. Our Web Site is www.rwjf.org. If you have questions about the study, call us at 1-877-843-7953, extension 6040, and ask for Leonie Infantry.

We have hired Mathematica Policy Research to conduct your interview. One of their interviewers will call you shortly. If you want to schedule an appointment for the survey, please call 1-800-385-8047, toll free, and ask for Pat Licodo.



●● **We've been trying to reach you!** ●●

We are doing an important national survey sponsored by the Robert Wood Johnson Foundation (RWJF). RWJF is dedicated to improving health care in the United States, and needs to know your opinions and experiences about health care and health insurance.

We will pay each adult in your household \$40 for completing a telephone interview.

Please call our toll-free number, 1-800-385-8047 and ask for Pat Licodo.



Community Tracking Study

MATHEMATICA

Policy Research, Inc.

We will pay each adult in your household \$40 for completing a telephone interview.

We would greatly appreciate your help.

Help us study important issues to improve our Nation's health care system!

APPENDIX C

INTERVIEW TRAINING MANUAL

CONTENTS

Chapter	Page
I.	INTRODUCTION TO THE STUDY .....3
A.	INTRODUCTION TO THE PROJECT .....3
B.	STUDY STAFF .....4
C.	SAMPLE DESIGN AND SELECTION PROCEDURES.....5
D.	DATA COLLECTION .....5
II.	CONTACTING HOUSEHOLDS AND PERSUADING RESPONDENTS.....8
A.	CONTACTING HOUSEHOLDS .....8
1.	Preparations before contacting the household .....8
2.	Reviewing case information .....8
3.	Preparing to make the call.....8
4.	Introduction.....8
5.	Answering Respondent’s Questions .....9
B.	OTHER CATI PROCEDURES .....10
1.	Handling Unexpected Results and Using Supervisor Review .....10
2.	Scheduling Appointments .....10
3.	Other CATI Issues .....10
4.	Handling Different Categories of Respondents .....11
III.	MAINTAINING COOPERATION, AVOIDING AND CONVERTING REFUSALS12

A. GAINING AND MAINTAINING COOPERATION	13
1. Communicate the Importance of the Study.....	13
2. Avoid negative approaches	13
3. Establish Rapport	14
4. Pacing an Interview.....	14
5. Probing Techniques	15
B. REFUSAL AVOIDANCE	16
1. Soft Refusals	17
2. Firm Refusals	18
3. Ineffective Approaches to Refusal Avoidance	18
C. REFUSAL CONVERSION.....	19
1. Reason for Callbacks	19
2. Importance of Documentation	19
3. Encouragement for the Interviewer	19
D. ADDITIONAL INFORMATION ABOUT REFUSALS	20
E. CONFIDENTIALITY.....	19
IV. QUESTION BY QUESTION REVIEW	22
EXHIBIT I – LETTER.....	62
EXHIBIT II-- CATI INTRODUCTIONS AND STATEMENTS.....	63
EXHIBIT III -- FREQUENTLY ASKED QUESTIONS (FAQS).....	65

I. INTRODUCTION TO THE STUDY

A. INTRODUCTION TO THE PROJECT

The U.S. healthcare system continues to undergo many changes. These changes affect people's health insurance and their health care. We want to find out about these changes by asking a cross-section of people in America about their health insurance and their health care.

The Robert Wood Johnson Foundation (RWJF), located in Princeton, NJ was established as a national philanthropy over 30 years ago. Since that time, it has awarded over \$3 billion in grants in support of its mission to improve the health and health care of all people in the United States. RWJF emphasizes support of training, education, research, and other activities that help promote better health.

In 1995, the RWJF decided to invest in a very large study, called The Community Tracking Study (CTS), to try to understand how the organization of health care in the U.S. is changing and how these changes are affecting people. In order to assemble a team of healthcare experts, RWJF created *The Center for Studying Health System Change* (HSC). The Center is located in the Washington, DC office of Mathematica Policy Research (MPR) and is affiliated with MPR.

The CTS takes an in-depth look at healthcare changes that are occurring throughout the United States by focusing on two key questions:

1. How is the organization of the health system changing--how are hospitals, physicians, insurers, public health agencies, and safety net providers changing, and what are the forces driving these organizational changes?
2. How do these changes affect people--how are insurance coverage, access to health care, use of services, costs, quality and satisfaction changing over time and are some groups of people doing better or worse than others?

In the first four rounds of the CTS, conducted between 1998 and 2003, data to answer these questions came from surveys of people in households, and of physicians, insurers, and employers in communities that were representative of the nation. For these household surveys, we interviewed over 32,000 families that included nearly 50,000 adults and over 10,000 children. In addition, surveys were conducted with 12,350 physicians and over 22,000 employers each time. Results from these surveys are already being used to understand how changes in health care are affecting us.

The CTS covers a range of topics, including: Health Insurance Coverage, Use of Healthcare Resources, Usual Source of Care, Quality of Care and Risk Behaviors, Shopping for Health Care, Employment, and Family Income and Demographics.

More information about The Robert Wood Johnson Foundation can be found on their website at www.rwjf.org. More information about the Community Tracking Study can be found on HSC's website at www.hschange.com. CTS on-line allows you to obtain customizable tables using prior CTS data. To use this resource go to ctsonline.s-3.com/HHsurvey.asp.

In previous rounds of the CTS, many of the participants had participated in an earlier survey. This made the contacting process easier for interviewers, because many of the families had some understanding of the purpose of the survey.

The survey on which you will be working is the fifth Community Tracking Study household survey (CTS-5). In this round, we will be interviewing about 10,000 randomly selected families, and we will **not** be contacting previous participants. The challenge for telephone interviewers will be to introduce the study quickly and professionally, identify a household respondent, and get the interview started. Interviewers will also need to work to overcome respondents' objections and stress the importance of the study, as these two elements are vital to success.

B. STUDY STAFF

The Community Tracking Study, for which you are being trained, is being conducted by Mathematica Policy Research. Members of the study team are listed below.

Survey Department Staff:

Barbara Carlson: Project Director

Karen CyBulski: Survey Director

Tom Barton: Assistant Survey Director

Jason Markesich: Survey Operations Center Manager, Princeton, NJ

Jackie Donath: Lead Supervisor

Margie Rosa, Ellen Siegel: Trainers

Staff from the Center for Studying Health System Change

Peter Cunningham: Senior Researcher

Jim Reschovsky: Senior Researcher

Cate Corey: Analyst

C. SAMPLE DESIGN AND SELECTION PROCEDURES

1. Population to be Studied

Our sample will consist of households, and is designed to represent the civilian non-institutionalized population of the U.S. We are not surveying people living in institutions, such as nursing homes, military barracks, prisons, people living in group homes or dormitories, or people who are contacted in vacation homes, if they have primary residences elsewhere.

People living in institutions have specialized health problems and their health care is delivered under unique delivery systems that are beyond the scope of this study. We will not survey active members of the military, but can survey a household that has military members in it. If you are unsure whether the place you contacted is an institution, or group or vacation residence, ask your supervisor for help.

2. Sample Selection

The sample is being selected by a Random Digit Dial (RDD) process. A Random Digit Dial Sample, or “RDD Sample” is a list of telephone numbers randomly generated by a computer. For this study, numbers will be selected from the entire country. We have processes to pre-screen numbers that might be businesses, or other non-residential numbers, but these processes do not catch all non-residential numbers. Part of your job will be to screen out non-residential numbers. After the first week of sample release, most of these ineligible cases will be screened out. All of the household surveys will be conducted by Computer Assisted Telephone Interview (CATI).

3. Advance letter

An advance letter (Exhibit A) will be sent to the households for which we are able to match an address with a telephone number. The letters will have a \$5 bill enclosed. You will be given a copy of this advance letter, and you should always keep it at hand for quick reference. If respondents do not remember receiving a letter, you may read it to them, but you should not mention the \$5 bill unless the respondent makes reference to it first. Your introduction will include a reference to the letter, but the more important purpose of the call is to complete the interview, so do not put too much emphasis on whether or not the sample member received the letter.

D. DATA COLLECTION

1. Insurance Family Units Within Households

Once you have contacted an adult in a household, you will obtain information about the age, sex, education, military status, and relationships of household members. The program will use this information to form what we call “family insurance units (FIUs).” The FIU includes the householder (the person or persons who own or rent the dwelling), his or her spouse, and dependent children up to age 18, or age 23 if they are full-time students.

This definition of the family unit is similar to that used by private insurance companies, Medicaid, and other government programs that provide health insurance. There is no need for you to focus too much on the FIU process—it is basically trying to put people in a household into an insurance unit that a private or government insurer would cover. An employer providing health insurance to a family would typically extend that coverage to the employee’s spouse and children under 18, but would not cover children aged 30, nor would they typically cover the parents of the employee.

Some households will contain more than one family unit. Additional family units will be formed to include other household members, such as adult children, parents, or unrelated people (such as boarders) who may be living there. For example, if a household consists of a married couple, their baby, and a boarder, the computer will form two family units for this household: one unit would include the married couple and their baby; the second unit would include the boarder.

The formation of FIUs is complex, but you should be relieved to know that FIUs will be formed automatically for you by the computer program. MPR has used this program for other surveys, including previous rounds of the household survey, so it is very well tested. The important thing to remember is that some households, about 10 percent, will have more than one family unit, and in these cases the program will give you instructions about which family unit to interview first.

2. Interviewing Members of the Family Unit

The survey includes questions about each adult in the family unit and (if there are minor children in the family unit) one randomly-selected child who is under 18. An adult knowledgeable about the health care experiences of the people living in the household—called the “informant”—will answer for himself/herself and will answer some questions about other family members.

The survey includes some questions on opinions and events that even close family members cannot easily answer. For these questions, we will ask each additional adult in the family to answer for himself/herself in a brief “self-response module” at the end of the informant’s interview. If necessary, a callback will be scheduled for the self-response module.

For the previous rounds of the household survey this procedure was very successful, as we obtained self-response data from over 95 percent of sampled adults. As in previous rounds, we are paying all adult respondents \$20 to do the survey. The interview with the informant will take about 30 to 40 minutes—a bit longer for larger families. Self-response interviews will average 10 to 15 minutes.

About half of the family units will have one adult, so the average length of the interview for these families will be about half an hour. Most of the remaining family units will have two adults—typically a husband and wife—and will last on the average about 10 minutes longer. About five percent of the interviews will have three adults and will average between 50 and 60 minutes. Based on past experience using family units, we expect that few families will have more than three adults per family unit, since additional adults typically form their own FIUs.

3. Specialized terms in the interview

Premiums—payments people make for health insurance coverage

Co-pays—payments people make as part of charge for doctor’s visit and prescription

Deductibles—payments people make before the insurer pays anything. Until the deductible is reached, the patient pays 100% of the health costs.

“Out-of-Pocket” expenses- everything a patient pays for health care, including co-pays and deductibles, but EXCLUDING PREMIUMS.

Enrollment: joining an insurance plan for the first time

Re-enrollment: continuing an insurance plan that is already in effect.

We will be asking questions about whether people enrolled in a particular plan in the last 12 months. When we ask if a person has enrolled in a plan in the last 12 months, we mean a new enrollment of a person who was not on the plan before.

Most health insurance plans have a re-enrollment period, typically one month, in which existing plan members are asked if they wish to continue their enrollment in the plan. This continuation of enrollment, or re-enrollment, is often interpreted by respondents as “enrolling” in the last 12 months. If in fact they have been on the plan before, this is a re-enrollment. Whenever someone reports an enrollment in the last 12 months, we will ask a follow-up question to confirm that this is really an enrollment and not a re-enrollment.

II. CONTACTING HOUSEHOLDS AND PERSUADING RESPONDENTS

This chapter discusses contacting households, being persuasive in gaining initial cooperation, and procedures to follow in the CATI system. We will use the term “respondent” to identify the household adult to whom you are speaking. That respondent may be the family informant, or another adult in the household.

A. CONTACTING HOUSEHOLDS

1. *Preparations before contacting the household*

All interviewers are required to have a solid understanding of the purpose of the study and the procedures we are using, so that they can be fully prepared to address respondent questions or concerns in an accurate and professional manner. Interviewers should be confident of their ability to address the objections that people are most likely to have. Before you make a call, you should: review the FAQs, review the case information, be thoroughly familiar with the survey instrument, and be prepared to complete the interview once someone answers.

2. *Reviewing case information*

It is extremely important that you read all available notes on the case. Be sure you have read any notes from previous contact attempts, as those notes will help you to complete the case. Review the entire case and, if it is a partial complete, see what remains to be done. Check for an unfinished FIU, a completed FIU with an SRU to complete, or some other combination.

3. *Preparing to make the call*

As you prepare to make the call remember that you need to be ready to take control from the moment someone answers. There will be a few cases where there are two or more people you may want to ask for—if one person is not there, be sure to ask for the other person. Once you dial the number, remember to focus entirely on the call. Do not let anyone, not even a supervisor, distract you from your conversation with the respondent.

4. *Introduction*

Be comfortable with your introduction, as this will ensure that it goes smoothly, and will help you set the tone for the interview. Practice until you can read the introduction in a conversational manner. Some interviewers are often so concerned about people hanging up the phone before they hear the entire introduction that they rush the introduction. This generally results in more hang-ups, as the rushed introduction is interpreted as a telemarketing call.

Rushing through an introduction gives an impression of lack of confidence and may also cause the listener to misunderstand. Present your introduction in a calm and steady manner, then try to go right into the screener without hesitating or asking for permission.

You should try not to project any concerns about the length of the interview, or about the types of questions asked. This can be reflected in your voice and may cause the respondent to decline the interview. Keep a positive attitude and assume the respondent will cooperate. Make every effort to sound professional and credible at all times.

During general training we place a heavy emphasis on reading questions verbatim. This is crucial when asking the survey questions, but not necessary when you read the introduction. You have the flexibility to tailor your introduction, but you *must* give your name and the name of the study. Your instincts and sales skills during the first 10-20 seconds of the call are probably more important than the actual words you use when trying to convince respondents that the study is worth their time.

5. Answering Respondent's Questions

During the introduction, some respondents may ask for additional information. You should always be ready to answer questions as they arise. Listen to the question and answer only what is asked. Your answers should always be clear and concise. When responding to respondents' questions:

- ***Listen carefully.*** Be certain to listen carefully to a respondent's question, so you can understand, and respond directly to the point being made point. Respondents deserve a clear, accurate answer, given in a manner that communicates your recognition that the *question is important*.
- ***Be polite under all circumstances.*** Sometimes the way you answer questions makes the difference between gaining and losing the cooperation of a hesitant respondent.
- ***Be concise and efficient.*** Answer the respondent's question directly and concisely. Do not offer extra information, as this may be misunderstood and confuse the respondent. If you do not know the answer to a question, admit that you do not know.
- ***Know your material so you can be confident.*** It is especially important for you to be alert and to have ready responses when you encounter a reluctant respondent. Your voice and manner will convey your level of confidence and skill . Hesitation on your part may give the respondent an opportunity to cut in and terminate the interview.
- ***The importance of your voice.*** Generally, once someone starts an interview with you, they will be willing to finish it. To help ensure this, maintain an enthusiastic and interested tone during the interview. If you do not sound interested, there is no reason for the person on the other end of the phone to be interested. Take care to avoid a monotonous tone. Tone and inflection can greatly enhance your success as an interviewer.
- ***Remember to "take yes for an answer"!*** The entire household interview can and will be completed in the first call to a household. Go right into the first question of the survey when the respondent says something like "OK," or "go ahead."

B. OTHER CATI PROCEDURES

1. *Handling Unexpected Results and Using Supervisor Review*

Interviewers who have questions about the status or coding of a particular case should consult a supervisor. You should not put a case into supervisor review status without the permission of a supervisor or monitor. The name of the supervisor or monitor should be recorded in the notes. **Do not try to manipulate the call scheduler by setting appointments based on your instincts. Follow the standard procedures and let the scheduler do its work.**

2. *Scheduling Appointments*

You should always try to complete an interview the first time you contact a respondent. Sometimes, however, this is not possible and you must schedule an appointment to call the respondent back. Below are a few procedures to keep in mind when scheduling appointments:

- ***Always suggest a couple of times to call back.*** Here are a few examples of things you might say: “Would days or evenings be better? We’ll work with you to get this completed.” or “Would a weekend call be better than a day call? We’ll call when it is convenient for you.”
- ***You do NOT have to have an exact day or time to set a call back.*** If the respondent tells you to “call back sometime next week,” use the computer to set the callback appropriately.
- ***All callbacks require a note. There is no exception to this*** Well-written, clear notes will help the next interviewer to follow up on a case without any difficulty. Some households will need a real team effort to complete. Please take the time to write clear, complete notes—they should contain all the information you would want to see if the case came up to you.
- ***Do not schedule an appointment unless you have spoken to a respondent.*** Interviewers, usually with the best of intentions, will look at a pattern of “no contact” calls and decide on their own to schedule an appointment for a day and time that they think has not been tried yet. **This causes havoc with the call scheduler, and with algorithms developed specifically for this study about when to retire cases that have consecutive numbers of no-contact calls.** You should schedule appointments only as you have been trained to do.

3. *Other CATI Issues*

- We will allow proxy interviews for the SRUs.
- Be sure to code call-ins from respondents as such. We want to track how many completed interviews came from call-ins.
- For this study, probe “don’t know” answers once before coding as such. Use your probing skills to try to get the respondent to give you his/her best estimate. Sometimes respondents want to be very precise and would prefer to say they don’t know if they are not 100 percent confident of the accuracy of their answer. You may need to stress that their best estimate is fine, and that we would rather have a good estimate than a “don’t know.”

If the respondent has no idea of the answer, however, “don’t know” is the best response. If a respondent is unable to respond on scale (i.e., cannot decide between somewhat satisfied and somewhat dissatisfied) to the initial question, you should probe. If, after an appropriate probe, the respondent is still unable to answer on scale, you should code “don’t know” and go to the next question.

- If you are asked medical questions by the respondent, you should explain that you have no medical training. You are not expected to act as a doctor, nurse or other health professional on this study.

4. Handling Different Categories of Respondents

You will be interviewing people representing a cross-section of Americans, and are likely to encounter one or all of the following challenges:

- **Language Barriers** We have Spanish-speaking interviewers available; however, you may encounter people whose main language is neither English nor Spanish. In these cases, you should try to conduct the interview with a family member who speaks English. If you are having difficulty communicating with the household, notify your supervisor and we will attempt to find an interviewer who can speak the primary language of that household.
- **Literacy** Some respondents may have low literacy levels. If you find that you have to repeat questions, be patient and helpful. Remember that we are asking the respondent to give up his or her time to help us with the study.
- **Age** Older people represent an increasing percentage of the U.S. population and are an important part of our study. First, we want to emphasize that you should not make assumptions about people based on their age. Older respondents, like respondents of all ages, have different levels of education, comprehension, tolerance and patience. Being older means only that one has lived more years, it does not mean that one automatically loses the ability to function well. However, keep the following points in mind when interviewing older respondents:
 - Do not address the respondent by first name. Once you have identified older respondents by name, use a more respectful form of address, such as “ma’am” or “sir.”
 - Adapt your pace and diction to suit the respondent. Adjust the speed at which you read the questions to suit the respondent. Speak clearly. Even a slight hearing impairment can result in difficulty understanding soft consonants and syllables.
 - Be patient and sensitive. Do not read too quickly, probe too soon and, above all, do not suggest answers to the respondents because you are

anxious to move on. Give the respondent time to think and wait for him or her to answer. If a respondent is clearly fatigued or distressed, offer to call back and complete the interview later.

- **Cognitive Limitations.** If it becomes apparent to you during the interview that the respondent is cognitively limited, ask a supervisor for assistance and, if he or she is not available, terminate the interview by thanking the respondent and saying “those are all my questions.” Make clear notes about the situation. These notes should include whether or not the respondent lives alone. Although this problem is more prevalent with the elderly, these procedures also apply to younger persons who appear to have cognitive impairments.
- **Hearing Impairments.** MPR has hearing enhanced equipment. If a respondent cannot hear you very well, say you will call back using equipment that will amplify the sound of your voice.

III. maintaining cooperation, AVOIDING and CONVERTING REFUSALS

This chapter provides guidance on gaining and maintaining cooperation from the respondents, as well as the best techniques for refusal avoidance and refusal conversion. MPR has worked on many surveys over the years, and the information that follows is based on those years of experience.

A. GAINING AND MAINTAINING COOPERATION

As a telephone interviewer on CTS-5, you are the representative of both MPR, the HSC, and the Robert Wood Johnson Foundation. As such, you must conduct yourself in a responsible, self-assured, and professional manner. A respondent's cooperation and the amount of effort that (s)he is willing to devote to the interview is based not only on his/her interest in the topic, but also on the interviewer's style, manner, language, knowledge of the subject material, and sensitivity to the respondent's situation or point of view. We provide below important guidelines to help you gain and maintain respondent cooperation.

1. *Communicate the Importance of the Study*

There is no substitute for transmitting to the respondent that you personally believe that this study is important. Households get many telephone calls, many from telemarketers and solicitors. The *Do Not Call* registry has eliminated many of these calls for households that are registered. Some households you call will think you are trying to sell something, and will tell you that they are the *Do Not Call* list. You will have to explain that this is not a sales or solicitation call, but a research call, and is not covered by the *Do Not Call* rules.

You must break through the "clutter" of the other phone calls that households get and convince the respondent that what you are doing is important – you are conducting an important healthcare research study and you need the householder's help. When you persuade the person on the other end that you believe the study is important, you can often get a "fair hearing" from the respondent and get him or her to consider completing the survey.

2. *Avoid negative approaches*

Interviewers need to avoid the tendency to be apologetic, timid, or defensive, as this gives the wrong impression to the person on the other end of the phone. Some respondents will interpret that as an indication that you don't believe in what you are doing, and may even think that you are deceiving them. Lack of understanding by respondents is often a factor in their initial reluctance to participate in the survey. Do not approach the call as if you are worried that you are bothering someone. You are doing important work, and you need to convey that to the respondent. There is no substitute for a professional, knowledgeable, and confident voice speaking with the expectation of success.

As mentioned earlier, you should not assume anything about the respondent's willingness to cooperate, but should make sure you are well-versed in your introduction and that you have familiarized yourself with appropriate responses to commonly-asked questions.

3. *Establish Rapport*

Rapport can be defined as a *harmonious* relation. To establish rapport, introduce yourself and emphasize that you are calling from a research organization and not from a firm soliciting sales. If the

respondent seems hesitant, you should 1) assure them that their responses are completely anonymous, 2) take time to convince them of the importance of the study, and 3) project confidence and professionalism.

While you are "in character" as an interviewer, you are to be non-judgmental, noncommittal, and objective. You should act in a neutral manner so that the respondent feels comfortable answering the questions truthfully and completely. The questionnaire is designed to elicit a free flow of ideas and opinions. Respondents need the freedom to say what they feel and think, without being influenced by anything the interviewers might say.

Another good way to establish rapport is to use reinforcements. Reinforcements are words you add to keep the conversation going, and can add to the rapport between you and the respondent. However, you must be very careful not to be judgmental if you use these. Good reinforcements to use include, "Okay" and "Thank you." Always avoid responses such as— "Oh, really?" "Wow!" "Oh, boy." "You've got me beat." "Great answer." Remember that nothing in your words or manner should imply criticism, surprise, approval, or disapproval of either the questions or the answers.

4. *Pacing an Interview*

The pace or the rate of progressing an interview can be a powerful tool. In general, you want an even pace throughout the interview. However, sometimes you will need to increase the pace and at other times you'll want to decrease it. The overall pace has to match the needs of the respondent. Some respondents, like those who have difficulty hearing, need you to speak slowly. On the other hand, people in an active urban environment may become bored with a slower pace, and may want you to speak a little faster. You can usually get the sense of pace for the survey with the respondent by the way they speak. If they seem impatient, try to speed it up.

There are some places in the survey where you will want to adjust your pace for maximum results. One effective interviewer technique involves getting right into the interview. Because this is a common place for respondents to quit or hang up, don't pause for long at the end of the introduction—read the first question right away.

Some interviewers make the mistake of speeding up at the end of an interview because they are getting tired and no longer have the patience they had in the beginning. Respondents can feel this and often interpret it as a lack of interest. They can feel your restlessness and will often just quit.

There are other places where you may ask the respondent a question that needs some thought before they can give an answer. In this case you may need to slow your pace so you can get an accurate

response. Sometimes you simply need to wait for a response from the respondent. You should always be aware that a slow, droning pace for all respondents is likely to result in many hang-ups, and you should work hard to monitor your tone and pace.

5. *Probing Techniques*

Here are a few things that will help you master the art of probing.

Do not try to explain the question or define any terms unless you are provided a definition in a probe.

If a respondent does not seem to understand a question, repeat it slowly and clearly. Give the respondent time to think about the question. If different respondents ask you to define the same term over and over, bring this to the attention of your supervisor.

Don't leave a question until you have an adequate answer, unless you realize the respondent is getting very annoyed. Sometimes a respondent will give a general answer instead of the specific one you need. Probing can help the respondent give you an adequate answer, as in the following example:

Interviewer: "How much do you weigh without shoes?"

Respondent: "I'm not sure."

Interviewer: "What's your best guess?"

Respondent: "Somewhere between 180 and 190 pounds."

Interviewer: "What number between 180 and 190 would you like me to record as your weight?"

Respondent: "I guess the last time I checked it was about 187."

Don't accept "I don't know" as an answer without probing at least once. When you ask a question, people often say "I don't know" just to give themselves time to formulate their ideas. A good probe for this situation would be to say, "Well, what do you think?" or "What is your opinion?" If the question deals with facts, an approximation is better than no answer at all, so you might say, "What's your best guess?" or "Approximately...?" to convey the notion that 100% accuracy is not required.

Watch for irrelevant answers. Some people talk a lot, but not about the topic at hand. Irrelevant answers can be interesting, but interviewers must make sure the respondent deals with the question that was asked.

Watch for vague answers. Some respondents find it hard to verbalize and may have difficulty expressing their ideas. You can help them say what they mean with probes such as these:

- "Tell me what you have in mind"

- "Could you be a little more specific?"
- "Can you tell me what you mean by that?"

Watch for ambiguous answers. Certain terms may mean different things to different people. Always ask yourself whether you are sure what a respondent meant by an answer. You could ask, "What do you have in mind when you say ____?" or "How are you defining the term ____?"

Give the respondent the time they need. There is great value in silence during a telephone interview. You may find that by keeping quiet and letting the respondent ramble, he or she will be able to think about the question longer and give a more accurate answer. That period of silence may also allow the respondent to expand upon, or clarify a previously inadequate answer.

Know when to stop probing. You should stop probing when:

- You have obtained the necessary information
- You have encouraged the respondent to clarify the meaning of his/her own words so that we know exactly what he/she had in mind
- The respondent becomes irritated or annoyed
- The respondent has nothing more to say

B. REFUSAL AVOIDANCE

Regardless of how good you are at interviewing or how well you are trained, there will be times when respondents refuse to complete an interview. Many things can cause an initial refusal, and few of them have to do with you, so don't take any refusal personally. The best defense against the discouragement of refusals is to realize that the rejection is usually an expression of the respondent's own stress, fear, or resistance and not a negative judgment of your competence.

You need to respond promptly to any and all concerns or objections the respondent might have. This is the time to use your powers of persuasion. Research has shown the highest completion rates occur at the initial contact and decline with each call thereafter. Unless it is really impossible for the respondent to talk to you when you first call, you should try to convince the person to conduct the interview right then, or to schedule it for later. Project a confident and reassuring manner while conveying a genuine interest in the respondent.

Many, perhaps most, of the people you call will never have heard of Mathematica Policy Research or the Robert Wood Johnson Foundation. You should not be surprised if some people meet your initial contact with resistance. However, if you encounter resistance, you should establish rapport as quickly as you possibly can, and make the respondent feel that his/her

participation is important, and stress the importance of research into health care and health insurance. In addition, you should emphasize that:

- This is an important study about health care and health insurance.
- The data will be kept confidential; no names or identifying information will ever be released or associated with answers.
- The sample was scientifically selected; we cannot replace the respondent's household with another household, and this makes the respondent's household vital to the success of the study.

1. *Soft Refusals*

In any survey, there are always some respondents who are reluctant to participate. The interviewer is the major influence on the motivation of the respondent and on the quality of the responses received. If you are interested and enthusiastic these feelings will be transmitted to the respondent with positive effects.

When you first sense some reluctance on the part of the respondent, try to identify why he/she is refusing. If you can identify the problem and supply an answer, chances are that you can persuade the respondent to participate in the study. Below are a few common reasons for refusing surveys and suggested responses:

- ***Time*** When time is raised as an issue, stress how hard we will work to meet the respondent's needs. Stress that you can do the survey in parts, if necessary. Let them know that we can call 7 days a week and that they can call in at their convenience.
- ***Confidentiality*** This may be an issue in getting started with the interview or with specific questions in the survey. It is possible that the respondent is willing to participate in the survey but is unwilling to discuss certain subjects such as finances. If this happens, reassure him/her that all answers are kept in strictest confidence, and that names will not be linked to any data collected, analyzed, or published in a final report. If the respondent is still unwilling to answer certain questions, gracefully accept their decision, and enter "refused" for those questions.
- ***"Not interested"*** This is a very common comment. See the FAQs and below for more detailed discussion on how to handle this.

You should review the FAQ sheet and be ready to address the respondent's concerns about starting or continuing with the study. If you find that you are not getting anywhere with the respondent, try to

hang up before you get a final “no.” Ask the sample member to think about it and arrange a callback time. Write a clear note and indicate what you think would be the best approach to e the problem. Consider suggesting another interviewer if you think that might be more effective.

2. *Firm Refusals*

If you are unable to persuade the respondent to consent to interview, accept the refusal as courteously and graciously as possible and thank the person for his or her time. Do not pressure, argue with, or otherwise alienate the respondent. Your goal should be to leave the door open for someone else to contact the individual and secure cooperation. The more courteous and professional the interviewer is when engaging a respondent who ultimately refuses, the better our chances of refusal conversion. Always remember not to take refusals personally.

If a respondent becomes angry, try to calm him or her down. Try to use the reason for his or her anger as part of your reassurance. For example, if the respondent is angry about the lack of affordable health insurance, you might say: "I understand how you might feel that way. Doing this research study will help us understand these issues."

No matter how unpleasant or insulting a respondent may be, you must remain courteous and polite, and must never respond in like manner. However, there is no requirement that the interview continue under such circumstances, since it is unlikely that accurate data could be obtained. Terminate the interview with a brief remark, such as, "Thank you for your time," "I'm sorry to have bothered you," etc.

Whenever you end a refusal call, write a clear note documenting who refused, what the tone of the conversation was, and what were the principal objections. Such notes are vital to the refusal converter who will be calling later. In CATI, you will be routed to a refusal screen that will ask the main reason for a refusal. You will also be able to code a recommendation to a supervisor that the case be finalized. This code should be used sparingly—generally only in cases where respondents threaten legal action or are verbally abusive to the interviewer.

3. *Ineffective Approaches to Refusal Avoidance*

Many interviewers use ineffective approaches in their initial refusal avoidance attempts. One approach that rarely works is when a respondent says that s/he is not interested, and the interviewer responds by saying: "May I ask why not?" There are two problems with this approach:

1. The interviewer has now transferred control of the engagement process to the respondent. By asking a question, the interviewer now must wait for a response from someone who just told them they were not interested.
2. It is very easy for the respondent to answer "Because I'm not, that's why!" and hang up the phone.

A better approach is to emphasize the importance of the study, telling the respondent that this is a research study trying to find out healthcare issues, that it is an important study, and that we need this

person's help. Once again, the more you can transmit to the respondent that you yourself are invested in making the study a success, the more likely the person is to respond positively.

Another approach to the "not interested" comment is to bring up a potential objection and address it. For this study, you might say: "If you are worried about confidentiality, let me tell you about some of our procedures." While this may not be the reason the sample member is hesitant, it might get the sample member to identify what the problem is.

The FAQs list a number of alternatives for handling the "not interested" comment. Study them and decide what would work best for you. Always be ready with an approach to this "not interested" response.

C. REFUSAL CONVERSION

1. Reason for Callbacks

If we do not call back to try to convert refusals, there is a chance that our results will be skewed towards people who like to do surveys or who are interested in the particular topic. These people may answer the questions differently from people who initially refuse to participate in a research study. In order to make sure that this does not happen, we need to call back and make every effort to convert the sample members who initially refused.

When sample members refuse, MPR policy is to have a "cooling off" period and then try to convert refusals. Refusal conversion techniques are not magical – they are the same techniques as those of any good interviewer.

2. Importance of Documentation

Refusal converters are calling cases where the respondent has been contacted and there was a refusal. The refusal converter must analyze the situation and determine the most likely way of turning the initial "no" into a "yes".

Good notes are very helpful to the refusal converter. If the note explains clearly but concisely who refused and why, the converter has a head start in addressing the respondent's concerns. If the case is a break-off, indicating that the respondent did begin the survey, the converter could consider starting with a thank you and then making the point that the time already invested in the survey would be wasted if we didn't spend a little more time to finish.

3. *Encouragement for the Interviewer*

Do not get discouraged. You will encounter people who are reluctant or who refuse to be interviewed. Again, if you do get a refusal, **do not take it personally**. If you find yourself getting discouraged, talk to a supervisor. They will always have some general advice, and they may have some useful tips because your co-workers may be going to them with the same problems. It is also a good idea just take a break so that you would be able to approach the next introduction with enthusiasm.

D. ADDITIONAL INFORMATION ABOUT REFUSALS

Who can refuse? Any adult member of the household can refuse for the household.

What constitutes a refusal? Lack of consent to a callback is a refusal. You do not have to have an exact day or time of a callback, but the respondent must have assented to a callback. If, for example, they say to you in a rushed tone, "Some other time, OK?" and hang up the phone, they have given consent. If they tell you that they are not interested, and you try refusal avoidance, and they say "no thanks," and you are in the process of asking them to reconsider when they hang up, this is a refusal. They have **not** given you consent for a callback.

Regular Refusals and HUDI (Hung up During Introduction). If you engage with the respondent and they understand the reason for the call and refuse, it is a regular refusal. If the person does not say anything and hangs up, this is a HUDI even if they have heard the entire introduction. While there is always going to be some judgment here, the key is whether the respondent understands what the call is about. If they do understand the nature of the call, it is a regular refusal.

No Conversion Attempt. Do not attempt to convert/avoid a refusal if you suspect that doing so will cause someone to be unsafe. Bring these situations to your supervisor's attention. Below is an example of a case not to convert. The notes are from Round 1:

I spoke with M., the wife, and she was very nice. She had done the main core and explained to her husband about the survey. She felt that it was a very important survey to participate in but he got very angry at her and started yelling at her and told her how many times have I told you not to give any information over the phone. M. also said that A, her husband is very ignorant and uneducated and does not hold a conversation with anyone and does not like to listen to anyone. She felt bad and wanted to return the check because she could not get her husband to participate. I told her no that the check was for her time and participation and to go and cash the check and use the money for herself. She thanked me. Also she said to please not call her home again because she said her husband would get extremely angry and carry on because he is a stubborn man and will never do anything good.

E. CONFIDENTIALITY

MPR follows strict procedures for assuring and maintaining confidentiality. Those respondents who receive the advance letter will receive information about the confidentiality of the data they provide. As an interviewer, you will have to assure the respondents of our commitment to confidentiality.

Telephone interviewers must be prepared to describe these procedures in full detail if needed, or to answer any related questions raised by respondents. For example, if asked about confidentiality, the interviewer will explain that the answers will be combined with those of others and presented in summary form only. Interviewers who have a thorough understanding of confidentiality measures and can state these clearly and confidently have a much better chance of persuading a respondent to complete the survey.

The following safeguards are routinely employed by MPR to ensure confidentiality:

- All employees at MPR sign a confidentiality pledge (Exhibit I.1) that emphasizes the importance of confidentiality and sets forth the obligations of staff.
- Access to sample selection data with personal identifying information is limited to those who have direct responsibility for selecting the sample.
- Identifying information is maintained in a separate file from interview data. The files are linked only by a sample identification number.
- Access to link-files containing sample identification numbers connecting the research data and the respondents' identification is limited to a few key researchers who have a need to know this information.
- Access to any hard-copy documents is strictly limited. Physical precautions include use of locked files and cabinets, shredders for discarded materials, and interview control procedures.

IV. QUESTION-BY-QUESTION REVIEW OF THE INSTRUMENT

Now we will go through the entire survey, module by module, discussing the content of each module, as well as the flow of the overall instrument. The survey instrument reflects carefully chosen questions, probes, and answer choices, based on existing validated measures, methodological research, expert consultation, and careful testing of the questions. Remember that it is critical that you read each question and its answer choices exactly as they are written.

As we go through the questionnaire, we will be referring to what we call the “question-by-question guide” or QxQ— a detailed explanation of key points, definitions, and probes for each question. The QxQ is intended to provide clarification for any uncertainties you or the respondent might have about the questions.

MODULE A: INTRODUCTION AND SCREENING

Content: This section introduces the study and answers respondents’ questions, emphasizes that each person interviewed will earn \$20 for participating in the survey, identifies the household informant, and enumerates the household members.

Response Level: Questions in this module are asked of the family informant

Key Points: Identifying the family informant. The “informant” is an adult familiar with the health care of the people who live in the household. Also note that you must be sure that the household is correctly enumerated before going on to the B Section. You must also be sure you accurately code the person you are talking to. Once you get past this section, you will not be allowed to go back to it.

NOTE: We are **not** interviewing (1) people who live in group homes or institutions such as nursing homes, dormitories, or prisons; (2) people staying at their vacation residence; or (3) people who are currently staying at the household but have a usual place of residence elsewhere. Ask your supervisor for help if you have questions about eligibility.

These questions reiterate the introduction and responses to questions you will see on your CATI screens. The program identifies the best respondent for the survey, namely: “An adult who lives in the household and is familiar with the health care of family members”.

- s1 This is the introduction. There are two versions: one for households that received an advance letter, and one for households that did not.

- a3 This screen provides answers to commonly asked questions. It is the same for all samples. Please note that you are not to mention the \$5 to any respondent. If a respondent asks if the letter contained the \$5 bill, you may confirm that, but you may not mention it on your own. We will be sending re-mails when requested, and may be sending additional letters as we match phone numbers and addresses. Many of these will not include a \$5 bill. Even for those that do, another household member may have taken the \$5, so do not assume that the person you are talking to received it.

Phone_ck This question asks what use this particular phone serves in the household. Only if it is used for business only will the case screen out.

HOUSEHOLD COMPOSITION

As we enumerate the household members, we will list the first names of everyone “living or staying” at the household. If a respondent has a question about what “living or staying here” means, your response should be “whatever it means to you.”

Hhld This is the household composition screen. This question asks for the first names of all persons usually living or staying in the household. You begin by recording the name of a household member who actually owns or pays rent for the home. Be sure to include the household respondent’s name. If two people have the same first name, include a middle initial or initial of the last name. No one usually living or staying in the household is excluded from this question. The type of household members varies, but can include spouses, unmarried children, married children, grandchildren, parents, other relatives, and lodgers or other non-related persons. If there are more than eight household members, enter <e>. Use code <n> when all members of the household have been listed.

It will make everyone’s life easier if the respondent provides first names for all members of the household. As a very last resort please use relationships to refer to household members. Remember you may have to call this household back and the names that you fill on this screen will be used for callbacks and for fills throughout the CATI instrument.

More This question acts as a probe to be sure babies and other persons are not excluded.

YOU MUST READ THIS QUESTION VERBATIM, EVEN IF THE RESPONDENT HAS TOLD YOU S/HE LIVES ALONE OR HAS TOLD YOU EXACTLY HOW MANY PEOPLE ARE IN THE

HOUSEHOLD. YOU MAY ASK THE RESPONDENT FOR HIS OR HER PATIENCE, BUT YOU MAY NOT CHANGE THE WORDING OF THE QUESTION.

emo1 This question is asked only of households with eight or more members.

emo2-emo3 These questions determine how many of the additional household members are adults and how many are children

hhld Once you get the names of each member of the household, you will get basic demographic data that will allow family insurance units (FIU's) to be formed.

Head This asks who owns or pays most of the rent in the household. Note that the *respondent* does not have to be the *householder*.

bmo1- Enter the month and year (using all four digits for the year)

byr1

age1 If the respondent does not know a household member's birth year, the you will be skipped to age1 to enter the respondent's best estimate of the householder's age.

sex1 If you know the householder's gender, you may enter it without asking.

col1 Householders younger than 23 years old are asked if they are full-time students. The definition of full-time status should be that of the householder's school.

grd1 Record the number of years of school the householder completed. Note that we want the number of years of school completed. Probe for years if the response is "some college" or "technical school." Sometimes respondents answer with a degree. An additional probe on the screen explains the relationship between academic degrees and years of schooling.

Mil1 Consider the householder to be on active military duty if he or she is in uniform and is working in service full-time at any location (i.e., locally or away in any foreign country.) Householders aged 65 and older are not asked this question.

Questions will be repeated for everyone on the household roster, with question numbers moving up by one, i.e. bmo2, sex 2, etc.

rel2 Pay close attention to what the respondent says here and be sure to code the answer accurately. The rest of the interview depends on the accuracy of this information.

Relationships to the householder are generally based upon the definitions used by the U.S. Census. Note that 14 is “domestic partner/significant other”. Because more insurance companies are providing health insurance in these relationships, we have included this code. This code is designed to cover these relationships whether the partners are of the same sex or different sexes. Unrelated adults who are not in a relationship with one another but are living in the same household will be recorded as (12) Non-Relative/Roommate. If the respondent SAYS the relationship is a common-law marriage, code the case as husband/wife; however, keep in mind that “living together” doesn’t count as a common-law marriage, and would be coded as 14.

Great-grandchildren should be recorded under Grandchild (5)

Half brothers and half sisters under Sibling (7)

Roomers and hired hands under Non-Relative/Roommate (12)

An adopted child (if offered by the respondent) is coded adopted son/daughter (13)

The relationship question is repeated for each member of the household.

mar2 We ask if anyone aged 18 or older, who is not coded as the householder’s spouse, child, or parent, is married to anyone else in the household.

sps2 Enter the person number to whom the selected household member is married.

par2 For any child in the household who is under 18 years of age and is not coded as the householder’s own/adopted child, stepchild, or foster child, this question determines the child’s parent or guardian so the child is assigned to the correct family unit.

who2 This question obtains the name of the parent or guardian identified in par2.

Demographic and relationship questions are repeated for each household member. After you obtain information on the demographic characteristics and relationships of household members, the computer will use a three-step process to select family members about whom questions will be asked:

Step 1: “Family units” will be formed based on the background information you enter on each individual within the household. A family unit generally reflects the system used by the insurance industry. As we discussed, the insurance industry’s “family unit” includes the householder (described above), the householder’s spouse or domestic partner (if any), and dependent children up to age 18, or up to age 23 if they are in school (even if they are not living at home at the time of the survey).

Additional family units will be formed to include other household members, such as adult children, grandparents or unrelated people (such as boarders) who may be living there. We expect that about 10 percent of the households will have more than one family unit.

For these family units to be formed correctly, it’s very important that you record accurately the age, sex, marital status and student status of all household members, as well as household members’ relationships to each other. After all the needed information is collected, a summary screen will show the names of all household members and the “family unit” they are in.

Step 2: If there are multiple family units within the household, you will begin by interviewing the family unit of the person with whom you are speaking. The CATI program will set up callbacks for any additional family units.

Step 3: Within the family unit, the computer will select the individuals about whom the survey is to be conducted. These individuals will be the householder, the householder’s spouse (if any), any children 18 to 23 who are full-time students, and one randomly-selected child under 18 (if applicable). *The computer will display these individuals’ names at the beginning of the next section.*

Last_ck—Review the list of all members. **Please take the time to do this at this point! Note that the roster cannot be changed once you move ahead.**

Focus on the following:

- (1) Since there are some important questions in the remainder of the interview which are based on age and sex, glance at those two columns for errors you may have made while entering the responses. Be sure to check, for example, that Male = m, Female = f. For age, make sure you have not entered 81 instead of 18, or 06 instead of 60. *A quick glance at this information will give you the opportunity to use the >jb< or> b< command to go back and correct the information.*

- (2) *Each person in the household is delineated by a code from 1-8. These codes appear in the far left hand column. Before leaving this screen, you must enter the code of the person to whom you are speaking if he or she is an eligible respondent. That person is the family informant, who will be asked the remaining questions for his or her family unit, except for the questions in the self-response module, which will be asked of each adult. Persons with an asterisk (*) beside their name are not eligible to be respondents.*

resp This screen will also show you which household members are not eligible to be respondents for the main interview.

Bbeg This screen provides information on the people about whom the informant will be interviewed. There is one screen for each family unit. Once again, please be sure you are talking to the person that you code you are talking to.

MODULE B: HEALTH INSURANCE

Content: This module includes questions on current insurance coverage and changes in coverage during the 12 months prior to the interview. The questions apply to the family unit (each adult and the randomly selected child under 18). This module:

- Determines current health insurance coverage by asking about various types of private and public plans— private health insurance from a current or past employer, purchased directly from an insurance company, or from a plan purchased by someone outside the household; Medicare; Medicaid or other state-sponsored health insurance plans; CHAMPUS/CHAMPVA, TRICARE or some other military plan; Indian Health Service; or no current health insurance coverage.

- Verifies insurance coverage or lack thereof for anyone reported as uninsured

- Asks about coverage during the last 12 months and verifies if the person reports enrollment in any plan in the last 12 months
 - If currently uninsured, asks if any coverage in the last 12 months, the type of plan, and why it was stopped
 - If insured with current coverage for less than 12 months, asks about principal coverage, the type of plan, who was covered by the principal plan, and why the plan changed
- Asks about preferences between cost savings and choice in selecting health insurance plans

The questions in this section are organized primarily by health insurance plan, rather than by person, to minimize the number of questions that must be asked. Logical tests are used to skip respondents over questions that do not apply to them. Probes are added to verify lack of coverage for the uninsured, and CATI displays are built in, showing types of plans and persons assigned to them, in order to aid interviewers in verifying coverage. Changes in coverage, gaps in coverage, and reasons for loss of coverage are asked for the uninsured and insured who had not been continuously covered during the past 12 months.

Response Level: The family informant is asked all of the questions in this section except for one question on preferences between being able to choose physicians and hospital and cost savings. This question is asked of each adult, and adults other than the informant are asked this question in the self-response module.

- b1 Introduction to the health insurance module. You will tell the respondent that you will be asking about coverage by various types of health insurance plans (obtained through employers, purchased directly, or from government programs) for members of the family.
- b1a The first question asks about coverage from a health insurance plan from a **current or past employer or union**. Most families receive their health insurance through employers or unions. If the answer is “Yes,” ask, “Who is covered?” Enter the person number of all family members who are covered. Enter <n> when you have finished. Use <x> to delete a response.

Note the instructions and probes:

- We ask about military coverage later in this section, so do not include it here.
- Also note that we do not ask about medigap and supplemental coverage offered to Medicare recipients. We do not want to capture private insurance

from Medicare recipients because Medicare is still their PRIMARY carrier. If all family members are 65 and older, the question will be skipped. However, you can have a family where one person is 65 or older and receiving Medicare but has a spouse who is under 65 and receiving private coverage through a job.

- Students who are less than 23 years old will be included with their parent's unit. Note that some universities provide limited health insurance coverage to students. These plans should be included, as some graduate students or older undergraduates, who are not employed by the university but who have limited health insurance coverage through these plans, will be in the survey.
 - COBRA plans should also be included here.
 - Do not include plans that provide only one type of service, such as accident, vision, dental, or nursing home coverage, should not be included. Usually, these plans are riders or additions to full service plans, so this should rarely come up as a question
- b1b This question asks about coverage from a health insurance plan **purchased directly**. Include any type of group plan which is purchased through a professional association or trade group.

Again, if the answer is "yes" and there is more than one person in the family, ask who is covered.

- b1c This question asks about coverage from a plan **purchased by someone who does not live in this household**. For example, a parent may purchase a plan for a newly-married daughter and her husband or a divorced parent may purchase a plan to cover their non-custodial child(ren).
- b1d This question asks about coverage from **Medicare**.

Medicare - Refers to the Federal health insurance coverage most common for persons 65 years and over. In certain rare situations, people under 65 may be covered because of disability benefits (SSI). People receiving Medicare may also receive other benefits, including supplemental private coverage, Medicaid, or military coverage benefits. However, Medicare is the primary insurer. The program is designed so that persons covered by Medicare are asked about Medicaid and supplemental private benefits in a separate series of questions.

Some Medicare beneficiaries use their Medicare coverage at HMOs (also known as Medicare advantage plans). This question is intended to include Medicare HMOs as well as traditional

Medicare coverage. Because of the new prescription drug benefit of Medicare (Part D), some respondents may not be able to distinguish between having Medicare coverage and having a *prescription drug plan* under Medicare.

bld1 This is a verification question if any person in the family unit who is 65 years old or older, and who is not listed as receiving Medicare, was not a mistaken omission. There is a very small number of persons 65 and older who are not receiving Medicare.

b1ex- This question asks about coverage under Medicaid.

bley

Medicaid — Refers to a medical assistance program that provides health care coverage to low-income and disabled persons. The Medicaid program is a joint federal-state program which is administrated by the states. Some states use names other than Medicaid, and these names *will automatically be displayed on the CATI screen*.

b1e Within a family unit, it is possible that only some members will be covered by Medicaid. For example, children may be covered by Medicaid and adults excluded from coverage. Pregnant mothers may have coverage during the pregnancy and up to one month after birth, and then, depending on their family situation, they may become ineligible. Accept the answers given to you by the family informant. Enter the person numbers of those who are covered.

b1h Asks about coverage under other state- specific plans.

b1f The question asks about coverage provided by the military. Definitions of specific terms follow:

Military Health Care--Refers to health care available to active duty personnel and their dependents; in addition, the VA provides medical assistance to veterans of the Armed Forces, particularly those with service-connected ailments.

TRICARE — (Pronounced “Try Care”) Several military health plans are offered to active duty personnel, their families, and retirees. Choices offered under TRICARE are varied and include health maintenance plans, as well as other plans with a range of managed care and indemnity options.

VA-- (Pronounced V-A) The VA provides medical assistance to veterans of the Armed Forces, particularly those with service-connected ailments.

CHAMP-VA--(Pronounced Champ V-A) (Comprehensive Health and Medical Plan of the Veterans Administration) provides health care for the spouse, dependents, or survivors of a veteran who has a total, permanent, service-connected disability.

b1f1 The question obtains the type of military coverage offered family members. Most responses will be obvious. However, some respondents may not recognize that they have TRICARE or may not be sure whether it is TRICARE Standard, Extra, Prime or For Life. TRICARE Standard is the fee-for-service option. It is the same as CHAMPUS. TRICARE Extra is the preferred provider option. In TRICARE Prime, military treatment facilities (MTFs) are the principal source of health care. There are no enrollment fees for active duty families in TRICARE Prime. If the respondent has TRICARE, but is unsure whether it is standard, extra, or prime, code standard. If the respondent describes a form of military coverage that is not listed, record it under "other."

b1g This question asks about coverage by the Indian Health Service. Only Native Americans in tribal settings are covered by this type of insurance. Enter the person numbers of those who are covered.

bli1 This question asks about coverage from some other state-sponsored or public program that has not been mentioned. The purpose is to capture any programs that were missed in b1h, either because the name by which the respondent knows a program is different from the ones that were pre-coded or because there are additional programs that were missed. This question is only asked if there are family members who were not covered by any of the previously mentioned plans.

bli2 Asks who is covered by any program specified in bli1.

Bij This question verifies whether any person in the family unit who was not listed as being covered by any insurance plan is in fact uninsured. All of the health insurance plans previously listed are included as answer categories. Interviewers should read the answer categories if the informant seems to be unsure. The question will be repeated for any person in the family unit who does not have insurance coverage. The phrase "according to

the information we have” is in parentheses because it should only be read for the first person in the family who appears to be uninsured. When asking about additional people who may be uninsured, ignore the phrase in parentheses and simply ask “Does (name) have health insurance or coverage through a plan I might have missed?”

- b2 Most families have only one health insurance plan; however about 15 percent are expected to have more than one private plan; the most common reason is that a husband and wife have separate plans through their employers. The family informant is asked how many different health plans were obtained through different sources; the program will fill the source--current or past employers, purchased directly, or provided by someone not living in the household--based on previously reported answers. *It is particularly important to get the correct answer for this question because the answer determines how many sets of questions on private health insurance plans will be asked.*
- b231 This question ascertains the name of the policy holder for each plan listed. Even when multiple family members are covered, there is usually only one person who is the policy holder. The program will list adults in the family who were recorded as having private plans, and persons 65 and older, since they may have private plans that cover other family members. If the policy holder is not listed (for example, if a plan is held by someone not in the family unit, code in “other”).
- b241 This question is asked only if the family has more than one private health insurance plan. If the family has only one plan, then the persons covered were identified earlier.
- b251 This question asks if the plan listed was originally obtained through a current or past employer or union. It will only be asked if the current plan was purchased directly or provided by someone outside of the family.
- b271 This question asks respondents whose coverage was not obtained through an employer or union if the coverage was from a government program.
- b281 This question obtains the name of the government program from b271. CATI will fill the names of programs in the respondent’s state.
- b291 This question determines if the coverage for each plan was continuous for the last 12 months. Note that if more than one family member was covered by the plan, you should ask who enrolled in the past 12 months. Some health plans, programs, or employers have

specific times during which individuals may select a different health plan or decide to remain with a current plan. These periods are called “open enrollment.” Do not confuse “deciding to stay with the same plan during an open enrollment period” with “enrolling in the plan”. If the respondent says he or she stayed with the same plan during open enrollment, code <n>.

b291conf This will confirm that this was a new enrollment, and not a re-enrollment in a plan the sample member was already in.

b361 This question asks if the plan is an HMO. If the informant is unsure, read the probe.

ngi1 This question asks if the health plan pays for at least some of the cost of medicines prescribed by the doctor and will be asked of almost all plans.

The following will be asked for employer-sponsored and non-group plans:

b31111 This question is asking whether the FIU pays any of the health insurance premium. The premium is the amount that is paid for the health insurance. It does not include the cost of any co-payments, co-insurance, or deductibles anyone in the family may have had to pay. If the respondent is unsure about whether the family pays all of the premium or some of the premium, code response option “3”.

b31121 If the FIU pays any portion of the premium, the amount paid is obtained in this question. You will put in both an amount and a time period. Some respondents get health insurance premiums deducted weekly, some bi-weekly or monthly. Record the amounts and time period as the informant gives them to you.

CDHP1. Asks about a deductible. A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. If the respondent asks about in-network versus out, we want the in-network amount.

Read probe as appropriate.

PROBE IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY: 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.

CDHP2, CDHP2a— Asks amount of the deductible. The deductible amounts that are filled will be different for individual and family policies. If the informant says s/he does not know, you will ask a follow-up question about estimates. DO NOT OVERPROBE: If the R is having trouble, you can say: Your best guess is fine

CDHP3 Asked of employer-sponsored plans. Asks about flexible spending plans and whether the sample member currently has such an account. The sample member must have a flexible spending account to code this question yes. If the employer offers such a plan, but the sample member(s) do not participate, code no.

CDHP4 This asks about special types of savings accounts that can be used to pay for medical expenses. The question here asks if the health plan has such an account. The respondent of policy holder does not have to have such an account to code yes, because the question asks if the health plan has such an account.

CDHP5 Asks about different types of information that some health plans provide to the people they insure.

b381 This question asks if the employer offers more than one health insurance plan to its employees.

b311-CDHPNG5 – This is the same series of questions as b31111-CDHP5, but is asked if the FIU has a non-employer or non-group health plan

b41 This question determines if this coverage was continuous for the entire year. It is similar to the question asked for private coverage. If the answer is no, there will be a follow-up question similar to that for b291.

B54R5 This question asks about the type of Medicare coverage. Use probes as appropriate.

1) With a Medicare HMO plan, you must generally receive care from HMO doctors. Otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency

(2) In addition to regular Medicare and Medicare HMOs, Medicare now offers other types of health plans that are not HMOs. These are sometimes referred to as Medicare Advantage plans.

B54supp Medicare supplemental question.

b54rx Asks about prescription coverage under Medicare. Note that this can be under the new Medicare Part D plan, or under a Medicare HMO plan.

Note that only Medicaid beneficiaries should be skipped over b54rx; persons who have state plans should be asked the question.

b54mg Asks about coverage from a current or former employer or union that pays for some of the cost of prescription medicines.

b57- This question identifies Medicare recipients who have been enrolled in their plans for less than a year. Do not count a decision to continue in the same plan during an open enrollment period as enrollment. Again, there will be a follow-up question to confirm if the informant says the person was enrolled for less than one year.

b64 Families in which person members receive Medicaid and have no private plans are asked if they are in an HMO

b67 These questions, which are asked about Medicaid plans, are similar to those asked about private health insurance coverage.

B69 prem and b69 prem2-prem3—questions about how much of a premium, if any, is paid for the Medicaid plan.

B75-78 prem3—These questions are similar to those asked about private insurance plans. They cover other state programs besides Medicaid.

- b80 This question is asked about each currently uninsured family member and is used to determine whether he or she had insurance coverage at any time during the past 12 months.
- b81 Currently uninsured persons who lost their health insurance coverage during the last 12 months are asked what type of health insurance coverage the person had JUST prior to becoming uninsured. Code only one answer. If the person had more than one type of coverage during the year, ask him or her what plan he or she had JUST prior to becoming uninsured.
- b83 This question ascertains the month (during the past year) that the previous coverage stopped. Enter the number listed next to the month.
- b84 This question determines why the previous coverage stopped. It is only asked of currently uninsured persons who lost their coverage during the last 12 months.

It is not necessary to read the responses here; you should fit the respondent's answers into the coded categories, coding all the reasons that apply. Most people will fit into the first three categories.

Examples:

A person who lost his or her insurance coverage when he or she was terminated will be coded 1.

A person who loses employer-paid coverage due to divorce will be coded 3.

The questions in this next series are designed to determine prior health insurance coverage, if any, for family members who are currently insured but have been insured under their current plan(s) for less than a year. The answer categories reflect the type of coverage asked throughout the questionnaire. Code only one answer. Choose option <0> to indicate that the person was not covered by any plan during the month before his or her current coverage began. Note that option <3> is blank if the state does not offer any insurance plans and <6> is blank if the person is less than 65 years of age.

- b851 This first question asks for the type of coverage prior to current one.
- b861 This question asks if other currently insured family members (whose coverage began less than 12 months ago) were covered under this plan. By identifying all family members covered by a previously held plan, we only have to ask plan-level questions once.
- b881 The question asks about the reason for changing insurance plans. It is not necessary to read the answer categories; rather, you should code the respondent's answer into these categories. Code all of the answers that apply.
- b852 This question is asked about other currently insured family members whose coverage began less than 12 months ago, who were not covered by the first plan. The program will identify such persons for you.
- b882 This question only applies to families that had two different policies
- NGI1 This question captures whether anyone in the FIU tried to buy health insurance on their own, rather than through an employer, union, or government program. If yes, you will get follow-up questions on this topic
- NGI2. or NGI2A-- IF YES TO NGI1: This question wants to know if any company turned the R down, charged a higher price because of health problems, or excluded a specific health problem
- NGI3. This question asks if anyone in the FIU has bought a health insurance policy on their own. Make sure you do not include government-assisted health insurance or insurance purchased through their employer.
- NGI4 This question asks for the month and year the policy was purchased. If an R is unsure when they purchased the policy, you can probe the R to recall whether it was at the beginning, middle, or end of the year. You might be able to narrow it down to a few months. Otherwise you can use PROBE: Your best estimate is fine.
- NGI5. This question asks for the number of months the FIU had the policy. If the R is having trouble calculating the number of months, probe: In what month and year did your policy

end? If they can tell you the month the policy ended you can calculate the number of months.

b951 (SR) This question is asked here only of the family informant; it is included in the self-response module for other adults in the family. The respondent is asked to rate his or her level of agreement on a 1 to 5 scale, with “1” being the strongest level of agreement.

Read the question slowly to ensure the respondent clearly hears the options. Remember that we are asking the respondent’s opinion here; there are no right or wrong answers. Note that you should code “7” if the respondent states that the question does not apply to him or her.

MODULE C: HEALTH CARE RESOURCE USE, UNMET NEEDS, PROBLEMS PAYING MEDICAL BILLS, USE OF RETAIL CLINICS DURING THE LAST 12 MONTHS

This section covers a variety of topics. Asking people about their use of health care resources one category at a time has been shown to improve the accuracy of reporting. The informant is asked all questions about himself /herself and the randomly selected child, if there is one. The informant is also asked questions about any other adult in the family unit. They are not asked the questions on unmet needs or delays in getting medical care. Other adults are asked these unmet needs questions directly in the self-response module.

The reference period for the following questions is “during the last 12 months.” If the interview date is August 14, 2007, then the reference period is from August 15, 2006 to August 14, 2007. Resource use is asked by category of health care--i.e., hospitalizations, emergency room use, physician encounters, and selected non-physician encounters. The informant is also asked to estimate out-of-pocket medical expenditures. The section then asks if the family has had problems paying medical bills, with a positive answer leading to follow-up questions. The section concludes with a series of questions about use of retail chain and at-work clinics.

c101 An event is considered a “hospital stay” if the person spent at least one night in the hospital. If a person is admitted and released on the same day, do not count this as an overnight stay. If the person spent the night in the hospital emergency room, do not count this as a “hospital stay.” Exclude any overnight stays where family members stay with an admitted person. Exclude overnight stays in an outpatient clinic. The date 12 months prior to the interview date automatically appears in the question.

c11 This question asks for the first name(s) of any family member who stayed in the hospital overnight. Remember to read the probe “anyone else?”

- c121 This question determines the number of different hospital stays for each family member hospitalized during the past year. Again, a “hospital stay” refers to a hospital admission that resulted in at least one overnight stay in the hospital. The question refers to separate stays of one or more nights in a hospital, not the total number of nights in the hospital. If a person is moved from one hospital to another hospital, it would be counted as 2 stays. Record the number of times. Read the probe to encourage the informant to give his or her best estimate, if necessary.
- c131 This question is asked about any female between 12 and 45 years of age or any child less than 1 year old. For an adult female, the question determines if any of the hospital stays were for the delivery of a baby. For a child, the question determines if the (or any) hospital stay was at birth. The CATI program will select the correct wording.
- c141 If “yes” to c131, this questions asks if the hospital stay was included in the previous number of hospital stays reported earlier (in question c121).
- c151 For those family members who had a hospital stay in the last 12 months, this question determines the number of times he or she was admitted through the emergency room. Enter the number. The program will verify that the number of times is less than or equal to the number of hospital admissions in c121.
- c161 For those family members who had a hospital stay in the last 12 months, this question determines the total number of nights he or she stayed in the hospital over the entire 12 months. The informant is asked to estimate the number of nights for each stay and then sum the nights across stays. The question is restricted to the number of nights spent in the hospital after admission. Be sure that the informant does not include or count days in the hospital.

The remaining resource questions are asked for each family member.

- c211 This question determines if any family member, beginning with the informant, has used a hospital emergency room to get medical treatment during the last 12 months. If the informant has told you about an emergency room visit in the previous questions on hospital stays, a phrase will appear before the main question that says “not counting the emergency room visits you told me about...” A simple yes/no answer is recorded.

- c221 For those family members who visited an emergency room in the last 12 months (from c211), this question determines the number of times they have gone to the emergency room. Accept the informant's best estimates.
- c231 If the informant answers "don't know" to the previous question, this question is asked as a prompt for an estimate. The informant is asked to pick from five different ranges. Often informants who aren't exactly sure of something can choose from a range.
- c311 This question asks the informant to report the number of times each family member has seen a doctor during the last 12 months. Include primary care doctors and specialists, such as osteopathic doctors (D.O.s) and psychiatrists. Also include doctors seen during outpatient visits at clinics. Exclude doctors seen while an overnight patient in the hospital, or doctors seen in an emergency room. Also exclude dentist visits and telephone calls to doctors. The date 12 months prior to the interview date automatically appears in the question.

Doctor visits potentially have the highest frequency of resource use over the past 12 months. The informant may need extra time to think back over the past year to estimate the number of doctor visits. Respondents sometimes forget about visits and under-report the number of doctor visits. Pause and encourage the informant to think back, but encourage the **best estimate** when they cannot remember precise numbers.

Also review the two decision rules below:

- (1) **Two or more doctors seen on same visit**--If two or more doctors are seen on the **same** visit, each doctor seen counts as a separate visit. Situations of this kind may occur when a person visits a clinic where he/she sees doctors with different specialties; for example, a dermatologist in one office and an internist in another office. It might also occur when a person visits his/her family doctor who, in the course of the same visit, calls in a specialist to examine or treat the person.

- (2) **Doctors and assistants seen on same visit**--A visit in which the person sees both a doctor and one or more non-physician assistant(s) who work under **this** doctor's supervision should be counted as only **one** doctor visit. For example, if the person sees a nurse and then the doctor who supervises that nurse, count this as only one visit.

Finally, remember that this is not a yes/no answer. If the person has not seen a doctor, code "0" to indicate that.

- c321 If the informant answers “don’t know” to the previous question, this question is asked as a prompt for an estimate. The informant is asked to pick from five different ranges. Often informants who aren’t exactly sure of something can choose from a range.
- c331 This question determines the number of times each family member has seen a nurse practitioner, physician’s assistant, or midwife during the last 12 months. Typical visits include pregnant mothers seen by midwives, family members who see nurses for immunizations or allergy shots, or patients receiving various types of therapy. The program will exclude doctor visits reported in the previous question. Note: psychiatrist visits are reported in c311 and psychologists and other mental health visits are reported here in c331. Do not include any previous doctor visits reported. Exclude home care visits, dental visits and alternative medical providers such as acupuncturists or herbalists. Also exclude telephone calls to providers.
- c341 If the informant answers “don’t know” to the previous question, this question is asked as a prompt for an estimate. The informant is asked to pick from five different ranges. Often informants who aren’t exactly sure of something can choose from a range.

The next series of questions is about unmet needs for health care during the last 12 months. The informant is asked these questions about himself/ herself first, and then about the randomly-selected child (if applicable). Other adults in the family unit (if any) are asked these questions directly in the self-response module.

- c811 (SR)The purpose of the question is to ascertain if the family member did not get any needed medical care for any reason during the last 12 months. Do not include dental care.
- c821 (SR)The purpose of the question is to ascertain if the family member postponed or had any delays in getting needed medical care for any reason during the last 12 months. This is a YES/NO question. We are just interested in if medical care was postponed or delayed. The reason the person postponed or delayed getting medical care is not relevant for this question; that will be captured in c831.
- c831 (SR)For any family member whose answer was “yes” or “don’t know” to the previous questions on not getting or delaying needed care, the purpose of this question is to ascertain the reasons for not getting needed care (c811) or the reasons for delays in getting care (c821). Code all reasons that apply. Read the response categories slowly to respondent, pausing at the end of each one. Enter “yes” responses as you read the categories. Code all that apply.

c841 (SR)The purpose of the question is to ascertain if the family members did not get needed prescriptions filled because of lack of money in the past 12 months.

c92 The purpose of this question is to provide an estimate of out-of-pocket expenditures paid by the family during the past year. Include expenses for prescription drugs and co-pays. For example, if the person pays \$10 co-pay for each office visit (and the insurance company pays the rest), you should include the \$10 as an out-of-pocket expenditure. Please note the following exclusions:

- Dental care
- Health insurance premiums
- Any costs paid by health insurance
- Medicare, Medicaid or other types of public programs

Some respondents may need time to answer. Give the respondent time to think, and accept their best estimate.

- c93 If the informant answers “don’t know” to the previous question, this question is asked as a prompt for an estimate. The informant is asked to pick from five different ranges. Often informants who aren’t exactly sure of something can choose from a range.
- c94 This question wants to find out if the FIU had problems, or did not have enough money to pay medical bills during the past 12 months. This is a YES/NO response. For this question, the reason that they had problems paying medical bills is not relevant.
- c95 This question contains bullet items that get at whether the FIU had adverse effects or had to forego other things because of problems paying medical bills. Again, be reminded that the time frame is “during the past 12 months”.

INTERVIEWER: REPEAT STEM IF NECESSARY

C96 For this question, code the underlying reason or event that caused the FIU to owe money for medical bills. There could be multiple reasons so CODE ALL THAT APPLY. If the reason(s) given cannot fit into the categories, code six (6) OTHER and specify what it is /they are.

C97 This question wants to find out if the person who was treated for these incidents in which the FIU owed medical bills, had health insurance or did NOT have health insurance.

C98 This question asks the degree to which the health insurance plan covered the cost of these medical services: a little, some, or most of PROBE: If the R does not give a listed response, re-read the choices, or use another appropriate standard probe.

C99a-f These questions ask if the healthcare provider somehow suggested ways to mitigate the medical costs and/or alternative ways to pay. Read each question and code as appropriate. This is a CODE ALL THAT APPLY. The order of the questions will be rotated, so they will not occur in the same order for all interviews.

C100 How long ago did the FIU get these medical bills? Code within a specified range. NOTE: If exactly two years ago, code: from 2 to 5 years ago

C101 This question asks for the current amount the FIU owes in medical bills. An exact answer is desired; however, we have a range probe built into the question, so do NOT

OVERPROBE: If the R cannot give you an exact answer, code don't know and the following probe will appear:

Is it less than \$2,000, from \$2,000 to less than or equal to \$5,000, greater than \$5,000 to less than or equal to \$10,000, greater than \$10,000 to less than or equal to \$20,000, or greater than \$20,000?

C102 This question asks the degree to which the medical bills have been paid off in the past 12 months: none, a little, some, most, or all. PROBE: If the R does not give a listed response, re-read the choices, or use another appropriate standard probe. For example, if the R says "a lot", an appropriate probe would be to re-read the responses.

C103 This question quantifies the expectations of the length of time: "within the next year, within the next two to three years, within the next five years, or longer than that" when the FIU's current medical bills will be paid off. Only refer to the medical bill dollar amount in question c101. Code the response at the lowest year level. For example, if a person says that they will have their current medical bills paid off in three years, the correct code is "within the next two to three years", NOT "within the next five years", even though the three years is contained within this second answer choice.

RC1. This question asks if the FIU has ever used an in-store health clinic in a retail chain like CVS, Walgreen's, Target or Wal-Mart. NOTE: The listed drugstores are examples, and are not the only ones – any similar health clinic in a pharmacy or retail chain is acceptable, but note that it must be a clinic, not just a pharmacy. **We do not want to answer "yes" to this question if the respondent only uses this retail store to fill prescription, or to get a flu vaccination once a year, or to get only eye care.**

RC1a. This is a follow-up question to RC1 and asks if the FIU has used an in-store health clinic in retail chain in the past 12 months. Make sure you stress the time frame (past 12 months) to the R.

RC2a-f. These questions ask for the purposes of the FIU's in-store health clinic visit. Ask each question in turn and code.

RC3 a-e. These questions ask if different reasons were a major factor, a minor factor, or not a factor in choosing a retail clinic. Again, if the R gives a response that is not a listed one, probe by re-reading the response options again or using another standard probe.

RC4. This question asks if health insurance plan paid none, part, or all of the cost of the most recent visit to the retail clinic. If the FIU has more than one health insurance plan, consider the plan used for the most recent visit to a retail clinic.

RC5 and RC5a- these questions are very similar to RC1 and RC1a, but about an onsite health clinic at a workplace, not a retail clinic.

Rc6a-g—These are similar to RC2a-f, but about onsite health clinics at a workplace.

Rc7a-3-- These are similar to RC3a-e, but about onsite health clinics at a workplace

MODULE D: USUAL SOURCE OF CARE/PATIENT TRUST

The following questions ask the informant about each family member's usual source of health care. If someone in the family does not have health insurance, questions are asked about the cost and availability of care for that family member.

d101 The question asks if each family member has a usual source of health care. As noted, emphasize the word USUALLY in the question. If the person is unsure if they have a usual source of care, read the probe. Respondents sometimes have trouble answering this question if they go to more than one place for care, or if they are infrequent health care users.

d111 For any family member who is reported to have at least one usual source of care (from d101), the purpose of this question is to ascertain the kind of place the usual source of care is. If a family member has more than one usual source of care, this question refers to the source of care used **most** often. Do not accept a respondent's answer until s/he has heard all the answer categories. **Many people will immediately answer "yes" to doctor's office, but another answer may be more accurate.**

Definitions for the answer categories follow:

Doctor's Office--An office maintained by a doctor or a group of doctors practicing together; generally, the patient makes an appointment to see a particular physician.

Health Maintenance Organization (HMO)--A clinic, staffed by physicians, nurses, and technicians for the sole use of members of the HMO.

Hospital Outpatient Clinic--A facility connected with a hospital, providing health and medical services (including health **education** and health maintenance, preventive services, diagnosis, treatment, and rehabilitation) to individuals who receive services from the hospital but do not require hospitalization or institutionalization. Examples of outpatient clinics include well-baby clinics; obesity clinics; eye, ear, nose, and throat clinics; family planning clinics; alcohol and drug abuse clinics; physical therapy clinics; and radiation therapy clinics.

Other Clinic or Health Center-- Includes company/industrial clinics operated for employees; a school clinic operated for students; a military-based clinic, a drug abuse clinic, a family planning clinic, a walk-in center, an Indian Health clinic, or a Community Health Center.

Hospital Emergency Room--A unit of a hospital where persons may receive medical care, usually of an urgent nature.

Some Other Place--Any usual source of health care not provided in categories 1 through 5.

sn1 The R will get this question **only** IF UNINSURED

This question asks if the FIU either pays full price or receives a deduction from a specified total a provider has charged for health care services. The discount should be an amount agreed upon by the R and the provider.

d121 For any family member who has a usual source of care (from d101), this question determines what type of health professional is seen. The choices are either a doctor, nurse, or other (specify type). If two types of health professionals are usually seen, choose the more senior health professional. For example, if the patient sees both a doctor and nurse, choose *doctor*.

d121spec This question asks the type of doctor, either primary care or specialist, the FIU members usually see. If the R needs clarification on what type of doctors these are, USE THE DEFINITIONS: Primary care doctors, such as general or family doctors, general internists, or pediatricians, treat a variety of illnesses and give preventive care. Specialists are doctors like surgeons, heart doctors, and others who specialize in one area of health care.

INTERVIEWER INSTRUCTION: GENERAL INTERNISTS ARE PRIMARY CARE DOCTORS; INTERNISTS WHO SUBSEQUENTLY SPECIALIZE IN A PARTICULAR AREA OF CARE ARE SPECIALISTS.

If the R says they see a primary care doctor and also a specialist, stress the word *usually* and let the R make the decision.

d131 For any family member who has a usual source of care (from d101), the purpose of this question is to determine if the same provider is usually seen at the usual source of care. Even if a patient has a usual source of care, the patient may see a different health professional each time he or she visits.

sn2 This YES/NO question asks whether the R thinks the area where they live offers affordable medical care for people without health insurance, The area where the R lives is “whatever it means to the R” Do not try to define any mile radius or boundary to the R.

sn3 When a Respondent answers ‘Yes’ to the previous question sn2, this question asks what type of place it is. If the R needs clarification, use the definitions above.

sn4 This question asks how long it takes to get to the place that offers medical care. Record the time in either in hours or minutes, whatever is convenient for the R. If the R uses several modes of transportation, record the time it takes to get to the place using the mode most often used. For example, if the R says that it takes 45 minutes when he/she walks but it only takes 9 minutes when he/she takes the bus. Find out from the R which mode of travel is used more often, and enter that time.

sn4per This is the screen in which you enter the time period. Again, enter either hours or minutes

sn5 This question asks if anyone in the FIU has seen a physician or other health professional at the place during the last 12 months when no one had health insurance.
INTERVIEWER: Be mindful that you are asking about *the last 12 months*.

MODULE E: SATISFACTION, HEALTH STATUS (SF12), CHRONIC CONDITIONS, CONSUMER ENGAGEMENT, AND RISK BEHAVIORS

This section covers a variety of topics related to health status and satisfaction with health care. The section will ask about some chronic medical conditions, and about how well coordinated care is (if any family member saw more than one doctor). If the adult does report one or more chronic medical conditions, a series of questions about how much the family member is “engaged” in his or her own health care will be asked of a sub-sample of respondents.

Respondents will also be asked questions about medical information they seek and how they make decisions about how and where to have medical procedures done. Since most of the questions are subjective, or ask about experiences that would be difficult for even close family members to answer, they are structured for self-response. However, an adult informant (parent or guardian) will respond for the randomly selected child.

LEVEL OF SATISFACTION QUESTIONS

A series of satisfaction questions begins at e101 and ends at e151. The reference period for these questions is “during the last 12 months.” They are subjective questions about various aspects of health care. There is one global, family-level question. If there is a child in the family unit, the informant will respond on behalf of that child. All other adults are asked these questions directly in the self-response module.

e101 The program will select the correct wording, based on family size. Review the probe indicating that the respondent should consider services he or she felt were needed but were not received.

e111 Questions in this section use a technique called “unfolding”. First we ask if the respondent is satisfied or dissatisfied. Then, we ask for level of satisfaction or dissatisfaction--very or somewhat. Many respondents will answer both questions after you ask the first, i.e., they will say “very satisfied” or “somewhat dissatisfied”. If this is the case, enter the response second question without asking it. Use the NEITHER SATISFIED NOR DISSATISFIED answer only if the respondent offers it.

e121- (SR) Read the question. This question asks the level of satisfaction the R has with their primary care doctor(s). Note the probe indicating that a primary care doctor is defined as the one you call first in the case of sickness or injury.

e131 (SR) This questions probes for a more detailed account of satisfaction or dissatisfaction.

e141 (SR)Read the question determining if the respondent or a doctor thought the R needed to see a specialty doctor over **the past 12 months**. For this question, there is no requirement

that the person has to have seen a specialty doctor. Stress “*during the past 12 months*”. Note the probe listing examples of specialty doctors.

CAHPS12 (SR) Asked only if the family member needed or has seen a specialist.

e151 (SR) Read the question as worded, asking about the level of satisfaction with the choice of specialty doctors. Examples of specialty doctors are in question ‘e141new’

These next questions address the individual’s experiences with his/her health plan. Most of the questions deal with the family member’s opinion on referrals, paperwork associated with their health plan, and payment for services. Once again, the time frame for these questions is” in the past 12 months”.

e1512 (SR) This question asks if their usual doctor seems informed and up-to-date about the care they got from specialists in the last 12 months.

e1513 (SR). This question addresses whether their usual doctor tries to find out details of the specialty doctor visit

CAHPSLANG (SR) This question addresses whether there was a language barrier between the R and the doctor that made it difficult to *speak with or understand* the doctor or other health providers. If a R says that their doctor speaks a different language, but he/she does not have trouble understanding PROBE by re-reading the question and emphasizing the part about *having a hard time*.

CAHPS5 (SR) This question is asking specifically if the R made any appointment in the last 12 months for their health care at a doctor’s office or clinic.

The R should exclude care that they needed right away. Let the respondent define what ‘care that they needed right away’ is. PROBE with : ‘Whatever it means to you.’

E261R5 (SR) This question is asking for the length of time between the date on which the appointment was made and the actual appointment of their last doctor’s office or clinic visit. INTERVIEWER: Code “0” for same day. Accept the most convenient time period given.

e401 (SR) This question asks about overall health status. The five-point scale (1-5) is rated from excellent to poor. Read the answer categories to the respondent.

ADULT CHRONIC CONDITIONS

The next series of questions asks about whether the respondent has any of a series of chronic health conditions. These are set up on the CATI screen using “forms-based design” techniques. Several questions appear on one screen and you record a response for each line on the screen. A question mark on the screen will indicate which condition you are to ask about next. For each condition, code the response.

The time frame for most of the root chronic conditions questions is “ever,” i.e., “Has a doctor or health professional *ever* told you that you had cataracts, diabetes, arthritis, etc. For every positive response, we follow up with “During the past two years, have you seen a doctor or other health care professional for ...” Because of the different time frames, it is important to re-read the root questions, including the time frame after every follow-up item. You may change an answer on the chronic conditions screen by entering an <x>.

Be sure you know how to pronounce each condition. Pronunciation guides appear on the screen. **DO NOT** define conditions for respondents. Definitions of the conditions are provided below for interviewer information—They are NOT to be read to respondents.

cc1 (SR) Women aged 50 or younger are asked if they have had a baby during the **past two years**. This question refers to live births, not pregnancies. Code “Yes” ONLY if the respondent has delivered a baby in the past two years. Include normal childbirth (delivery of baby through the birth canal) and caesarean section (surgical operation for delivering a baby by cutting through the mother’s abdominal and uterine walls). If the respondent is currently pregnant, code “No”. If the respondent miscarried, had an abortion, or did not have a live birth, also code “No”.

For the first four chronic conditions, we ask if the respondent has seen a doctor or health care professional during the past two years. If the respondent has the condition but **has not seen a medical professional**, code “No”.

cc2c (SR) Women are asked about abnormal uterine bleeding. Uterine bleeding is bleeding in-between menstrual periods, abnormally heavy periods, and bleeding in post-menopausal

women, except those who are not taking hormone replacement therapy. Uterine or vaginal bleeding can occur in women who no longer experience menstrual periods. Let the respondents determine what is abnormal for them. If “uterine” is unclear to the respondent, you may clarify with “vaginal bleeding or bleeding from the vagina”.

For the remaining chronic conditions, we ask if a doctor or other health professional ever told the respondent that he/she had the condition. For each “yes” response, we follow up with a question that asks if during the past two years the respondent has seen a doctor for the condition. Again remember to code “**No**” if the respondent has the condition but has **not** seen a medical professional for it.

cc3b (SR) Diabetes (**di-&-’bE-tEz, di-&-’bE-t&s**) or high blood sugar is a condition where the body has difficulty producing or regulating insulin in the blood, resulting in higher than normal blood sugar levels. Patients with diabetes may have been prescribed insulin, or may be on a special diet to control their blood sugar.

Code “yes” for respondents had “gestational diabetes” during a pregnancy.

cc3c (SR) Arthritis (**är-’thrl-t&s**) is marked by degeneration of the cartilage and bone of joints. Severe pain or stiffness in the joints (Knuckles, knees, hips, etc.) that sometimes becomes worse when walking, exercising, or standing up.

cc3d (SR) Asthma (**’ax-ma**) is a condition of allergic origin that is marked by continuous or outbursts of labored breathing accompanied by wheezing, by a sense of constriction in the chest, and often by attacks of coughing or gasping. Asthma is often treated with inhaled medication such as steroids.

cc3e (SR) Respondents who do not have asthma are asked if they have chronic obstructive pulmonary disease (COPD). This is a disease that results in inflammation or irritation of the lungs. It is also known as emphysema or chronic (long-lasting) bronchitis. Symptoms include shortness of breath and wheezing.

cc3g (SR) Hypertension (**hi-p&r-ten(t)-sh&n**) or high blood pressure includes pregnancy-induced high blood pressure.

cc3i (SR) Coronary heart disease is also known as ischemic heart disease or coronary artery disease. It is a disease of the heart that results from hardening or clogging of the arteries surrounding the heart. Symptoms include chest pain and shortness of breath.

cc5c (SR) Skin cancer includes any of the following: actinic keratosis (AK), basal cell carcinoma, malignant melanoma, or squamous cell carcinoma.

cc5h (SR) Respondents are asked about cancer other than skin cancer.

Cc6e (SR) Depression is a so-called mood disorder that results in a persistent lowering of mood that is more severe than normal, transient feelings of sadness. It can include feeling sad or blue that is out of proportion to any particular life event that may have caused the feelings. Types of depression include dysthymia or chronic depression and major depression. In addition to depressed mood, symptoms of depression include trouble sleeping, changes in eating patterns, or feeling numb or empty. Code "yes" if respondents say they have had depression or major depression. Code "NO" if the patient says they have bipolar disorder or manic depression.

cc7 (SR) Asks about seeing a doctor or health care professional for a serious medical condition that has limited the person's ability to do daily activities.

QUALITY OF CARE

testccq The questions in the next series are related to the quality of care received. If the respondent saw a doctor during the past two years for abnormal uterine bleeding, diabetes, arthritis, asthma, COPD, hypertension, CHD, skin cancer, other cancer, benign prostate disease, or depression

CCQ1. This question asks if the R saw only one doctor or more than one doctor for treatment of the R's chronic disease.

CCQ2. If the answer to CCQ1 is “more than one”, you will get this question. This question has the R describe how well he/she thinks his/her health care is coordinated when there is more than one doctor involved. PROBE: By care coordination, we mean how well do the doctors work together to manage health care. Remember that you do not interpret subjective questions for the respondent.

CCQ3. The next statements are about experiences with respondents’ health care providers. These are the doctors, nurses, therapists, pharmacists and others who help manage their condition. INTERVIEWER: Read the statement and record the level of agreement or disagreement, whether they strongly agree, agree, disagree or strongly disagree with the statement.

Be very cautious about the scales. These scales should be consistent across CCQ and the CE1, and E521, but note that the scale order may differ in different interviews. In other words, one interview might start with “agree strongly, agree, ...” while another might start with “disagree strongly, disagree...” **Be very careful to code accurately on these questions.**

Do not interpret subjective questions for the respondent. If R says there was only one provider, you may substitute “he or “she”

CCQ4. This question gauges the respondent’s level of agreement or disagreement with the statement, “When I am prescribed a new medication, I read about the possible side effects.”

PROBE: For this question the respondent should only consider possible side effects that they read about themselves.

PROBE: If a respondent says that the doctor, doctor’s office staff, pharmacist or other health care professional reads the possible side effects to them, they should *not* consider that as reading about the side effects.

PROBE: If the respondent says “ I can’t read”, code “NOT APPLICABLE”

CCQ5. This question asks “ In the last 6 months, did you receive a phone call from any of your health care providers to see how you were doing without you calling them first?”

If the R needs clarification on what is meant by health care provider: USE THE PROBE: By health care provider we mean doctor, nurse, therapist, pharmacist and others who help you manage your condition.

CODE "Yes" If the R received a home visit in place of a phone call as long as the purpose is to see how the R is doing.

CODE "No" If the health care provider called the R for a purpose not related to seeing how he/she was doing (e.g. an appointment reminder phone call).

Each respondent will be asked either CE1 (for those without chronic conditions, or CE2 (for those with one or more chronic conditions).

CE1 or CE2. INTERVIEWER: Read the statement and record the level of agreement or disagreement whether they strongly agree, agree, disagree or strongly disagree with the statement. Do not interpret subjective questions to the respondent.

e521 Read the statement and record the level of agreement or disagreement. Respondents may initially respond by saying, "well, it depends." If this happens, stress generality with a probe such as "well, overall" or "in general." As previously mentioned, do not interpret subjective questions for the respondent. If there is a pause or an expression of confusion, simply re-read the statement or question. If R asks, what do you mean by 'risks'? Use the standard probe, "whatever it means to you".

QUESTIONS ON CIGARETTE SMOKING AND OTHER TOBACCO USE

Now we begin a series of self-response questions regarding cigarette smoking. The series determines if the person ever smoked at least 100 cigarettes in their lifetime; whether they currently smoke; if yes, how many cigarettes they smoke and on how many days during the last 30 they have smoked

e601 (SR) Self-explanatory.

e611 (SR) Family members who said they've smoked at least 100 cigarettes in their entire life are asked this question: how often they now smoke--everyday, some days or not at all.

BRFSS10 (SR) This question asks the R's weight without shoes. INTERVIEWER: Record the weight in pounds. If the R gives the weight in another format (e.g. kilogram), ask them to say how much that is in pounds. You should also ROUND UP FRACTIONS. For example, if the respondent says he/she weights 145 1/2 pounds, you should round up to 146 pounds.

BRFSS11 (SR) This question asks the R's height without shoes. INTERVIEWER: Record the height either in feet or inches. If the R gives the weight in another format (e.g. centimeters), ask them to say how much that is in feet or inches. You should also ROUND DOWN FRACTIONS, for example if the respondent says he/she is 5 feet 9 1/2 inches tall. You should round down to 5 feet 9 – inches. Also note that someone who is 5 feet exactly is coded with a 5 in feet and a blank in inches. An entry of zero will be rejected.

CI1 (SR). This question asks if the respondent looked for, or got information about a PERSONAL health concern during the past 12 months from a variety of sources. If the R got information from somewhere other than their doctor, SPECIFY whether it was a HEALTH CARE PROFESSIONAL (NON-PHYSICIAN) or a HEALTH CARE ORGANIZATION

INTERVIEWER: This question is only referring to information that the respondent got about a PERSONAL health concern, not a health concern for family, friends or others.

CI2 (SR). [IF YES TO CI1] This question wants to find out if the respondent followed up and spoke with a doctor or other health care professional regarding the information they obtained about a personal health concern.

CI3 (SR) [IF YES TO CI1] This question wants to find out if, based on the information he/she obtained, the respondent's overall approach to maintaining their health changed. PROBE: Whatever "change" means to you.

CI4 (SR). [IF YES TO CI1] This question asks if any of the health information R found helped R to better understand how to treat an illness or condition.

CI5 (SR). This question asks if during the past 12 months, R looked for, or get information about a health concern for another adult, such as a friend or family member.

INTERVIEWER: This question refers only to information that the respondent got about a health concern for someone else, not himself or herself.

IT1 (SR). This question asks if the R ever goes online to use the Internet or World Wide For this question, Code “Yes” regardless of the reason the R went online, whether it was for medical research or other reason(s), or where they got online (e.g. home, work, school, etc.)

IT2 (SR). This question wants to know, in general, how often the R goes online. Again, the reason for the R going online is not relevant for this question.

PROBE: If the R gives you an answer that is not one of the categories, re-read the answer choices.

PROBE: If the R says that some weeks he/she is online everyday and other weeks only a couple days, say: “In general...”

IT3 (SR). IF YES TO IT1: This question asks if during the past 12 months, the R used email or went to a website to contact a doctor or doctor’s office about his/her personal health needs.

IT3a (SR). This question asks if the R used e-mail or a web site to renew a prescription, set an appointment, or inquire about different health activities.

IT3b (SR). This question wants to know if any of the doctors or doctors’ offices the R has visited for personal health needs allow patients to contact them by e-mail or by going to a website

CONSUMER SHOPPING

Questions CS1 – CS8 refer to issues when dealing with a personal doctor.

CS1 (SR). This question asks if during the past 12 months the R looked for a new personal doctor. DEFINITION: A personal doctor is the health provider the R sees most often and who knows them best. This should be a personal doctor whom the R found within the past 12 months, even if the R is currently seeing him/her. Code "YES" in this situation. Remember to stress *the past 12 month* time frame.

CS2 (SR). This question wants to know if the R actually found a personal doctor. If the R is currently seeing a new personal doctor that he/she found by looking in the past 12 months, confirm with the R: "Is this the new personal doctor you found when looking in the past 12 months?"

CS3 (SR) This is a series of YES/NO questions that want to find out if the R used each source when looking for a new personal doctor. If necessary, re-read the stem of the question. INTERVIEWER: Remember, we are still talking about *the past 12 month* time frame.

Information received from a health insurance plan pamphlet: record "YES" in the response category "Information from your health insurance plan", NOT in the category "books, magazines or newspapers" (i.e. If Blue Cross sends out a monthly newsletter which shows new doctors available R and R contacts the personal doctor based on that, CODE: "Information from your health insurance plan").

CS4 (SR) This asks if any source used in CS3, provided information that compared the cost of care charged by different doctors. The comparison can be for any number of different doctors, and can be in dollar amounts or percentages.

COMPARISON EXAMPLE #1: Doctor A charges \$150, Doctor B charges \$100, Doctor C charges \$210 for an office visit

COMPARISON EXAMPLE #2: If the standard rate for an office visit is \$250. Doctor A charges 20% less, Doctor B charges 10% less, Doctor C charges 30% less for an office visit.

CS5 (SR). A YES/NO question asking whether the information he/she obtained was used in choosing a personal doctor. This question refers to the comparative information related to the costs.

CS6 (SR). Similar to question CS4, this question asks whether any of the sources used provided information that compared the quality and performance of different doctors. If the R asks what you mean by quality and performance, use “Whatever it means to you.”

CS7 (SR). This question wants to know if the R used the quality and performance comparison (question CS6) when choosing a personal doctor.

CS8 (SR). This is a series of opinion-related questions asking if several things were a major factor, minor factor, or not a factor in choosing a personal doctor.

Questions CS9 – CS19 refer to issues when dealing with a specialist.

CS9 (SR). INTERVIEWER: You will only get this question if the R said “Yes” to seeing a specialist. This question wants to know if the R has seen only one specialist or more than one specialist during the past 12 months.

INTERVIEWER: Code “More than one” if a R saw multiple specialists for one health problem or multiple health problems. For example, if a R saw two different cancer specialists, CODE: “more than one”. You would also code: “more than one” if a R saw a cancer specialist and a gastrointestinal specialist”.

CS10 (SR). (IF MORE THAN ONE, READ: Please think about the last specialist you saw.) If the R saw more than one specialist, ask if it was during the last 12 months or more than 12 months ago.

CS11 (SR). This question wants to know whether the R’s personal doctor referred him/her to this specialist or if the R found this specialist in some other way.

CS12 (SR). This question wants to know if the personal doctor gave the R information on one specialist or gave R a choice of specialist. If the personal doctor gave the R a list of choices but said, “I recommend this particular doctor”, CODE this as a “choice”, not “only one”.

CS13 (SR) This YES/NO question simply wants to know if any other sources of information besides the doctor referral were used in looking for the specialist.

CS14. (SR) This series of YES/NO questions ask specifically whether the particular source was used. If the R says that he/she has a friend or relative who is a doctor, CODE: "Recommendation of a doctor or health care provider". Do NOT code it as a "friend or relative."

CS15 (SR) Similar to CS4 about comparing cost of care.

CS16 (SR). This question asks if the R used this information in choosing a specialist

CS17 (SR). This question is similar to question CS15, asking whether the sources used provided information comparing different specialists in terms of quality and performance.

CS18 (SR). This question wants to know if the R used the quality and performance comparison (question CS17) when choosing a specialist.

CS19 (SR). This is a series of opinion-related questions asking if several things were a major factor, minor factor, or not a factor in choosing this specialist.

CS20 (SR) This question wants to know if the R has had any type of surgical or non-surgical procedure.

PROBE: Do not include routine blood work, X-rays, or mammograms.

PROBE: By non-surgical procedure, we mean things like a biopsy, colonoscopy, MRI, etc.

INTERVIEWER: IF IN DOUBT, INCLUDE THE PROCEDURE. OUR GOAL IS TO BE AS BROAD AS POSSIBLE IN DEFINING TO TEST FOR CONSUMER SHOPPING.

CS21 (SR). This question wants to know where the procedure was performed— in a hospital, a clinic, a doctor's office, or somewhere else. If the R has had more than one procedure in the last 12 months, please ask the R to think about the last procedure he/she had.

CS22 (SR) This question wants to know the first time the R had a procedure performed at the place identified in CS21

CS23 (SR) This question wants to know if the place identified in CS21 was recommended by the doctor performing the procedure, or if the R chose the place in some other way.

CS24 (SR) This question wants to know if the doctor gave the R a choice of places to have the procedure or recommended only this one place. If the doctor gave the R a list of choices but said, I recommend this one particular place, CODE this as a “choice”, not “only one”.

CS25 (SR) This question wants to know if the R used any other sources of information in looking for a place to have the procedure besides their doctor’s recommendation.

CS26 (SR) This question asks whether the R used any of the listed sources to find the place where he/she had the procedure.

PROBE: If R uses a friend or relative who is a doctor or health care provider, CODE: “Recommendation from a doctor or other health care provider” NOT friend or relative.

CS27 (SR) This question asks if any of the sources used provided information that compared how much different local places are paid for similar services. Code “yes” whether the information was provided verbally or in writing.

CS28 (SR) This question wants to know if the R used the information from these reports in choosing a place to have the procedure.

CS29 (SR) This question wants to know if any of the sources used provided information that compared the quality and performance of local places.

CS30 (SR) This question wants to know if the R used information from these reports in choosing a place to have the procedure.

CS31 (SR) This is a series of opinion-related questions asking if several things were a major factor, minor factor, or not a factor in choosing a place to have a procedure.

SATISFACTION AND PROCESS OF CARE QUESTIONS FOR A SAMPLED CHILD

The following questions are asked if a family has at least one sampled child.

k12-This question wants to know whether the R is satisfied or dissatisfied with the choice of primary care doctors for their child. The respondent should think of all sources of primary care doctors (such as hospitals, clinics, etc.).

If R is unclear on primary care doctor, PROBE: Most people go to a primary care doctor first when they have a sickness or injury that they have not had before.

k13 This question records the level of satisfaction or dissatisfaction— either very or somewhat.

k14 Determines if the child saw a specialist in the last 12 months. Refer to the probe for examples of “specialist” doctors. Specialists include such doctors as surgeons, allergists, obstetricians, gynecologists,, orthopedists, cardiologists and dermatologists

kCAHPS12Asked only if the child needed or has seen a specialist (i.e. answered yes to k14).

k15 Same as the choice of specialty doctor satisfaction question asked of adults. This is asked for the selected child.

K15a Again this question records the level of satisfaction or dissatisfaction with the choice of specialist either very or somewhat.

This Q copied from above(KC)

CAHPS5k This question is asking specifically if the R made any appointment in the last 12 months for[CHILD’s] care at a doctor’s office or clinic.

The R should exclude care that [CHILD] needed right away. Let the respondent define what 'care that they needed right away' is.

E261R5k This question wants to know how long the R had to wait between the time they made the appointment and the day the child actually saw the doctor.

BRFSS10K (BRFSS12.10) This question asks how much [CHILD] weighs without shoes

INTERVIEWER: ROUND UP FRACTIONS

BRFSS11K (BRFSS12.11) This question asks for the approximate height of [CHILD] without shoes.

INTERVIEWER: ROUND DOWN FRACTIONS

k40 Same as question e401. This question refers to the sampled child.

CONSUMER INFORMATION SEEKING FOR CHILD

CIC1. These are the same series of questions as CI section for adults, but are asked about the child. The CIC2-4 questions will also be asked if there are any Yes answers to CIC1.

IT4. These are the same IT questions asked of adults, but are asked about the child.

e80t This question asks about the general health of one or more other adults in the family. Ratings are 1-5 from excellent to Poor

INTERVIEWER: ([fill NAME] OR SUBSTITUTE "Other adults in your family" IF TWO OR MORE OTHER ADULTS.

e802 TOM, not sure how to handle this. Combine q numbers?

MODULE F: EMPLOYMENT AND EARNINGS

The following questions ask about employment and earnings for each adult 18 years of age and older who is listed as part of the family insurance unit. The questions are asked of the family informant.

- f10 The introduction reminds individuals about the importance of the answers to these questions, since employment status and earnings help to explain whether people can afford the health care they need.
- f101 This question determines if each adult family member has a business or farm; questions asked of self-employed people are worded differently from others. Rely on the respondent's definition of whether he or she has a business or farm. However, please note that we have provided definitions below:

Business--A business exists when one or more of the following conditions are met:

- a. Machinery or equipment of substantial value in which the person has invested capital is used by him/her in conducting the business. Hand rakes, manual lawn mowers, hand shears, and the like would not meet the "substantial value" criteria.
- b. An office, store, or other place of business is maintained.
- c. There is some advertisement of the business or profession by listing it in the classified section of the telephone book, displaying a sign, distributing cards or leaflets, or otherwise publicizing that a particular kind of work or service is being offered to the general public.

Consider the selling of newspapers, cosmetics, and the like as a business if the person buys the newspapers, magazines, cosmetics, etc., directly from the publisher, manufacturer, or distributor, sells them to the consumer, and bears any losses resulting from failure to collect from the consumer. Otherwise, consider it as working for pay (job) rather than a business.

Do **not** consider domestic work in other persons' homes, casual work such as that performed by a craft worker or odd-job carpenter or plumber as a business. This is considered as wage work. Whether or not the person is considered as having a job is explained above.

Do **not** consider the sale of personal property as a business.

f111 This question determines if the individual did any work **last week** for pay or profit. For **pay** means employed for wages, salary, or commissions. For **profit** means money as the result of self-employment. It is very unlikely that you will have to probe on this question. However, we have provided definitions below:

Employee for wages, salary, or commission-- Working for a private or government employer for wages, salary, commission, or other compensation such as tips, piece-rates, or pay-in-kind. This category also includes **paid** work for settlement houses, churches, union, and other nonprofit organizations, and work for private organizations doing contract work for government agencies.

Self-Employed--Persons working for profit or fees in their **own** business, shop, office, farm, etc. **Include** persons who have their own tools or equipment and provide services on a contract, subcontract, or job basis-- persons such as carpenters, plumbers, independent taxicab operators, or independent truckers. This does **not** apply to superintendents, foremen, managers, or other executives hired to manage a business or farm, salesmen working for commission, or officers of corporations. Those persons are considered as employees of private companies.

f121 This question determines if the individual had more than one job (or business) last week. It includes full-time, part-time, evening and weekend work.

f131 This question asks for the number of hours per week the person *usually* works at this job. If he or she *usually* works overtime hours, include those hours in the *total* number of hours. *Half hours* should be *rounded to the nearest whole hour*. If the person's schedule of work is erratic, ask the respondent to give his or her best estimate.

If the person works at more than one job, the program automatically provides an alternative question which asks for the number of hours per week the person works at his or her *main* job--the one the person works at for the most hours.

If the person's hours vary so much from one week to the next that they are unable to estimate, code <97>.

- 13x1 If you coded <97> to the previous question because the person's work schedule was too varied to estimate usual hours, this question determines if the person usually works more or less than 35 hours per week. This enables us to determine whether the person is a full-time or part-time worker.
- f141 For those working at more than one job (or business), this question determines the number of hours per week *usually* worked at jobs other than the main one. The hours for the main job were reported in f131. Round hours to the nearest whole hour.
- f201 The question determines the type of employer for the person's main job. The program will fill the appropriate language based on answers to previous questions. Note that a not-for-profit organization or a foundation is coded as a private company. Read the answer categories only if necessary.
- f211 Please note that this questions asks for the *number of employees at the location where the person works*— that is, the building or buildings in the factory, store, or office where he or she works. The answer is coded into broad categories, so an exact response is not necessary.
- f221 This question asks if the employer operates in more than one location. It will not be asked if the employer is a local, state, or federal government. The question will read employer or use an alternative fill for those who are self-employed or farmers.
- f231 If there is more than one location, this question asks for the *total number of employees at all locations*. Explain that the respondent's best estimate is satisfactory.
- f241 This open-ended question refers to the *type of business or industry* in which the individual is employed at his or her main job. We do not want the name of the company; rather, we need a *description of the main product or service produced by the branch or part of the company for which this individual worked*. Try to get a clear description of what the employer makes or does--for example, pencil manufacturer, wholesale grocery, retail bookstore, road construction, shoe repair service. The words "manufacturer," "wholesale," "retail," "construction," and "repair service" show the general function. The

words “pencil,” “grocery,” “bookstore,” “road,” and “shoe” describe the specific product or service performed.

f251 This question asks if respondent is a member of either a labor union or an employee association like a union

f261 This question asks if R is covered by a union or employee association contract

f301 This question determines the easiest way to report the person’s earnings: hourly, weekly, bi-weekly/every two weeks, twice monthly, monthly, and annually. A probe is provided for respondents who are concerned about confidentiality. In the unlikely case that the respondent offers a time period that is not listed, ask for monthly or annual earnings.

f321 The computer program selects the appropriate time period based on the answer to the previous question.

All questions refer to *how much the person usually earns before deductions*.

If the person is paid by piece rate (pay is based on the number of items produced), ask for *Usual* earnings per whatever time period the respondent chooses (week, month, year, etc.).

Again the importance of the question is explained and the respondent is reminded

about confidentiality. The respondent should include overtime pay/commissions and tips that are usually received.

f331 This question is a probe to get an estimate in broad categories if the respondent could not provide a specific answer to the previous question.

f341 If you entered an amount that is extremely high or low, the program will ask you to verify it. If the amount is not correct, it must be corrected by backing up to the earnings question.

- f401 If the person is a policy holder for an employer-based plan and has more than one job, this question determines if the person's insurance plan is from his/her main job or business.
- f501 If the person was not listed as the policyholder of an employer/union based plan, is under 65 (not on Medicare), and is employed, we ask here whether the person's employer or union offers health insurance to its employees.
- f511 If the employer or union offers health insurance, this question asks if this person is eligible to participate in the health insurance plan.
- f521 This question is asked if the person is uninsured but his or her employer offers a health insurance plan for which the person is eligible. It determines the main reason the person is not participating in his/her employer's health insurance plan. Code only the **MAIN** reason.
- f531 The question is asked to determine why the person is ineligible for insurance through his or her employer. Code only one answer here.
- f541 This question determines how many insurance plans are offered to employees; this question and the two that follow are skipped for employer-based plans we asked about earlier in the interview.

FAMILY INCOME AND DEMOGRAPHICS

This section asks about family income and the individual demographics of family members.

The first question asks for total income; if the respondent cannot estimate family income, then we ask for income in broad categories.

- g10 The question asks for the family's total income from all sources for 2006, before taxes and other deductions. See probe (2) for a list of sources. Information on income, as well as employment, is important in understanding whether people can afford the health care they need. If necessary, emphasize "before taxes and other deductions."

Note that the names of family members will be specified if the family was part of a multiple family household; otherwise the program will simply reference the “family.” The question includes several probes, designed to allay concerns about the purpose of the question, confidentiality, the definition of the components of income, and our willingness to accept estimates.

Review the content of the four probes carefully. Note that those family members active in the military are included in the estimate of family income, even though we are not including them in any of the questions about individual persons. Although the survey is about the “civilian non-institutionalized population”, we want to include income from all family members contributing to the household.

g11 This question is a probe for respondents answering “Don’t Know” in g10. It provides a choice of ranges of family income for those unable to provide a single number as an estimate. Encourage the respondent by assuring them that their best estimate is fine. Read the categories until one is selected.

g201 This question asks about ethnicity (Hispanic/non-Hispanic) (of R, or HOUSEHOLD MEMBER)

PROBE FOR REFUSALS:

I understand that these questions may be sensitive. We are asking these questions to help understand different healthcare problems and needs people have.

g201ORIG If yes to g201, this question asks for R’s or FAMILY MEMBER’s origin or descent

INTERVIEWER: Read and code as appropriate.

g22n1 This question asks for race of R or FAMILY MEMBER (CORRECT?)

INTERVIEWER: 1. Read all of the five race categories. Ask the R to code all races that apply. CODE as “Other” any responses that do not fit one of the five categories given

2. A number of respondents who have said “yes” to the Hispanic question may repeat “Hispanic” or “Latino” when asked about race. Probe by asking: “Would that be White Hispanic/Latino, African American Hispanic/Latino, or something else?”

g301 This question asks about US citizenship.

g311If g301 is yes, this question asks if born or naturalized citizen.

g321If answer to >g311< is "naturalized", this question asks when they came to live in the United States.

INTERVIEWER: You may code either the year or the number of years since they came.

S9—Asks if either or both parents of respondent and spouse were born outside of the United States. This question is being asked because there is research suggesting that interactions between doctors and patients can vary according to background, including how long families have been in the United States. We are using a narrow definition of the United States that does NOT include Puerto Rico, Guam, the U. S. Virgin Islands, and other U.S. territories.

CLOSING

We may be contacting a sample of CTS5 households in two years for another survey to understand how changes in health care and health insurance affected people, and would like to send them an advance letter.. We also need addresses to pay monetary incentives to households. In this section we also obtain information on other telephones owned by the household and interruptions in telephone service; these data are needed for statistical purposes to assure that the survey results are representative.

h10 (SR)The name and address information will be used to move the respondent's incentive payment. Be sure to capitalize the first letter of the first name, last name, street, and city.

h30 This question determines if there are ANY other telephone numbers in this household besides the one called for the survey. If so, it asks for the number. Note that the actual telephone numbers are not recorded.

h31 This question determines the type of usage (home, business and home, or business) the other phone numbers are used for. Again, this information is used only for statistical purposes.

h31a This question tries to find out how many of the telephone lines in the household are used for business purposes only

h32 This question determines if there was any time during the past 12 months when there was NO working telephone in the household.

h33 This question is asked if there was a “yes” answer to h32. It determines for how many of the past 12 months the household was without a working telephone.

h34 This question determines the main reason the household did not have a working telephone.

next_person This screen in the transition screen for other household interviews, either self-response person modules or other family member interviews. All eligible respondents will be shown on this screen.

SELF-RESPONSE MODULE

Key Points:

The introduction to the self-response module: The self-response module is introduced twice: once to the family informant and then to the other adult to whom it is to be administered.

To informant: I need to speak with him because it is hard to get opinions on how people feel about their own health from someone else, even if it is a family member.

To respondent: I need to ask you these questions because it is hard to ask other people, even family members, about how you feel about your health.

INTERVIEWER: It is important that you read these introductions clearly and, if necessary, include the text provided in the interview that explains why the adult should respond for himself/herself.

Length: Be sure to emphasize that the self-response module will take only ten minutes to administer. If the family informant does not focus on this information he or she may tell the other adult that the interview will take as long as the main interview. This could result in a refusal to complete the self-response module.

The questions in the self-response module include opinions and recall of events that the informant is unlikely to know. The topics are summarized below. Since all of the questions were asked earlier, we have not repeated the question-by-question specifications.

Preferences between cost savings and freedom of choice in choosing health insurance plans

Unmet need in obtaining medical services

Opinions concerning various aspects of trust between doctors and patients

Satisfaction with choice of physicians

Questions about the last visit to the doctor during the past 12 months

Health status (SF-12)

Chronic conditions

Cigarette smoking

Questions about child's last visit to the doctor(if this person took the sampled child to the doctor on that visit)

EXHIBIT I -- LETTER

Dear Resident:

In the last decade, the country has witnessed dramatic changes in health care, including a rapid increase in health care costs. Yet, little systematic information exists about how these changes are affecting American families and their access to affordable, high quality care. We are conducting survey interviews throughout the country to answer many questions. But the most important ones are:

Are people obtaining affordable health care that meets their needs?

What can be done to help people whose needs are not being met?

How are the changes in health care affecting the quality of care people receive?

The study is sponsored by **The Robert Wood Johnson Foundation**, the nation's largest philanthropy devoted exclusively to improving health and health care. The Foundation supports training, education, research and projects that demonstrate effective ways to deliver health services, especially for the most vulnerable among us. The Robert Wood Johnson Foundation created the Center for Studying Health System Change to help us understand how all these changes are affecting families in communities throughout the U.S. The Community Tracking Study began in 1996 and is one of the few ongoing, long-term assessments of the nation's health care system.

Your household has been selected to participate in the next phase of the study. While we understand how busy you are, we are asking for your help with a telephone interview that will take about 30 minutes for most people.

As a token of our appreciation for your contribution to this important research project, we are enclosing \$5, and we will send *you and each other adult member of your household* an additional **\$20** for completing the interview.

Of course, all of the information you provide will be kept strictly confidential. Your name will not be associated with your answers. Your answers will be combined with thousands of others, and only overall findings will be presented.

If you would like to know more about our project, you can visit the web site of the Center for Studying Health System Change (www.hschange.org), the organization that is analyzing the results for us. If you would like to know more about The Robert Wood Johnson Foundation and our commitment to improving the health and health care of all Americans, you can visit our web site at www.rwjf.org.

An interviewer from **Mathematica**, the research organization helping us with the survey, will be calling soon to set up an interview. Or, if you would like to schedule the interview yourself, we have a convenient toll free number you can call (**1-800-385-8047**). If you have any questions about the study, please feel free to call Leonie Infantry at the Robert Wood Johnson Foundation at 1-877-843-7953, extension 6040.

Your household's participation in this survey will help us understand how changes in health care are continuing to affect people's lives. I hope that we can count on your help.

Sincerely,

Risa Lavizzo-Mourey, M.D., M.B.A.

EXHIBIT II

CATI INTRODUCTIONS AND STATEMENTS

Here are the cati introductions:

FOR THOSE WITH NO LETTER

Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

FOR THOSE SENT LETTER

>paa3<Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. We recently sent your household a letter describing the study. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

In addition to the introduction, the screen will also contain brief statements to help you respond quickly to common objections.

Using the Statements: You won't necessarily need to read each of the bulleted statements, and you do not have to read these verbatim. Experiment and see what works best for you. It is important, though, to know your lines and to deliver them with confidence.

CONTENT: The interview includes questions about your health, your family's health and your views about the quality and cost of health care.

SPONSOR: The study is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company. The RWJF website is www.rwjf.org.

LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.

CONTACT: If you would like to find out more about the study or the foundation, you can call [Leonie Infantry] at [1-877-843-7953].

CONFIDENTIALITY: The survey is confidential and you don't have to answer any questions you don't want to.

SELECTION: Your telephone number was scientifically selected by a computer to represent many others in your community.

Ad Libbing: Always have something to say. If you're at a loss for words, use filler phrases to avoid "dead air" with the respondent. One approach is to "recycle" the respondent's own question to stall for time. For example, if the respondent says "why are you doing this survey" get accustomed to saying "well, the reason we're doing the survey is..." Other stock phrases are "I see, I can understand that," "yes, I see how you could feel that way," and "yes, we know how busy people are these days..."

EXHIBIT III

COMMUNITY TRACKING STUDY FREQUENTLY ASKED QUESTIONS (FAQS)

WHAT'S THIS ABOUT?

This study is about your health insurance, your health care and the way you feel about it. We need your help to understand what people think about health care in America.

We are trying to find answers to questions like: what types of health plans work best for different families? how satisfied are people with their insurance plans and doctors? can people really afford the health care they need?

WHAT IS THE RWJ FOUNDATION?

The Robert Wood Johnson Foundation is a non-profit organization that works just to improve health care in this country. The foundation is not associated with any political party or private company.

Since 1972, the foundation has given more than \$3 billion in grants to help

- train doctors and nurses
- make sure children get their shots against diseases
- citizen groups fight illegal drugs in their neighborhoods
- meet health needs of the elderly and
- communities and state governments make changes in health insurance and health care.

WHO ARE YOU? WHO IS THIS MATHEMATICA ON MY CALLER ID AND ANSWERING MACHINE MESSAGE?

I work for Mathematica; we are part of the Robert Wood Johnson Foundation research team. Our company has been in business for over 35 years. Our Web site is www.mathematica-mpr.com .

HOW DO I KNOW WHO YOU ARE?

I work for Mathematica Policy Research, part of the Robert Wood Johnson research team. Our website is mathematica-mpr.com.

I can give you the website address of the Robert Wood Johnson Foundation (www.rwjf.org) or the Center for Studying Health Systems Change (www.hschange.com). These websites give you important information about the study.

If you would like I can call you back in a few days, after you get a chance to look at the websites.

WILL YOU GIVE ME RESULTS OF THE SURVEY?

Results of this round of the study will be put on the following Web site: www.hschange.com. The results of the first four rounds can be found there.

I'M NOT INTERESTED

This is the most common objection to most surveys. There are many potential ways to handle this, but you must do two things: 1. *Say something.* 2. *Say something fast.*

Suggested Answer 1:

Let me tell you two things to get you interested. One: we will pay \$20 to every adult in the household who participates. Two: This is an important research study about your health care. Now....

Suggested Answer 2:

Please hear me out on this. I'm are not selling anything and won't ask you for money. This is a research study designed to understand what health coverage and health care Americans have. I would really appreciate your help, and every adult in the household will get \$20 for participating.

Suggested Answer 3:

I know you get a lot of calls about surveys, but this is different. This is research about American health care, which affects everybody, even people who are very healthy and rarely see a doctor.

Suggested Answer 4:

Let me tell you a couple of things and ask you to think about them. Health care accounts for \$1 in every \$7 spent in the US. Because it is so important, we need to understand as much as possible about it. The best way to do that is to ask a scientifically selected sample of people living in the United States about their health care. We selected you, and we need your help. You will receive \$20 for your participation, as will all adults in your household who participate.

Suggested Answer 5:

Would you like to know who is sponsoring this research? The Robert Wood Johnson Foundation. They have contributed over \$3 billion in the last 35 years to try to improve health care. They have spent money to:

train doctors and nurses

help children get their shots against diseases

help meet health care needs of the elderly

They need to hear from the people they are trying to help, so they do important research studies like this, and that's why I am asking you to participate.

Suggested Answer 6:

I'm asking for a minute of your time to try to get you interested. Health care and health insurance are big issues in America, and we want to know your opinions about them. If you aren't insured, or aren't happy with the care you are getting, we want to know that. If you are insured and are happy with your care, we want to know that too.

Suggested Answer 7:

Let me assure you that this research is important. Health care affects nearly everyone in the country. We want to know what types of health plans work best for young families, older people, individual adults, and children. I need your help, and am personally asking you to do this study with me.

I AM ON THE DO NOT CALL LIST

I understand. Did you know that calls for purely research purposes are not covered by the "Do Not Call" list restrictions. This is a research call—we are not selling or marketing anything, and we are not asking, and will not ask you for money. This is important research and we are working hard to find out the current health care and health insurance status of Americans. We need your help. We will pay \$20 to every adult in this household for that help.

HOW DID YOU GET MY NUMBER? IT'S UNLISTED

We use a computer to generate phone numbers. Then we screen those numbers to eliminate business and non-working numbers.. We did not get your number from any commercial or non-profit list of any kind. We will not put your name on any mailing list, and we won't sell it to anyone. We need all households who are selected to respond to get results that reflect everyone's opinions.

CONFIDENTIALITY

Your name will not be linked with your answers, and your answers will be combined with those from other people from around the country.

We will not be asking for last names in the survey. We only need your last name to put on the check. Your answers and your check information will be in two different files, so even the researchers will not know your last name.

We all know that confidentiality is a big issue these days. We have been in business for over 35 years, and our company is very careful to keep all data we gather confidential. We never use confidential data for any purpose other than research. I was required to sign a confidentiality pledge when I took this job, and I take it seriously.

CAN YOU MAIL IT TO ME?

The phone survey is much shorter than the mail survey would be. A paper survey would have lots of questions you would not need to answer, but you would still have to read them all to see if they apply to you. We've programmed the computer to ask only the questions each person needs to answer, so it would take you a lot less time. I'm here to help you get through the survey quickly. Let me ask...

CAN I DO IT ON THE WEB?

The questionnaire is designed for a lot of different situations, and we want to make sure we ask you only the questions that apply to you. If you do it on your own, you might go down a path that asks unnecessary questions. I'm here to help you get through it quickly. Let me ask...

I DON'T HAVE TIME

Try to put this into one of three categories: "not now" problem, a "busy person" problem or a "not worth my time" problem.

"Not Now" Problem

A "not now" problem means the person on the other end of the phone is very stressed due to things happening right then, and needs to get off the phone in order to deal with things that need her/his attention. This can be something very pressing (child crying, lots of people talking in the background) or can be less acute (dinner needs to be ready in 30 minutes and I need to get started). If this is the situation, you need to try to get off the phone quickly but leave a good impression.

I'm calling on behalf of the Community Tracking Study, we'll call back at a more convenient time for you. Thank you."

"Busy Person" Problem

This is an issue of scheduling. The person can do it, and will do it, if we can work with them to get it done.

I understand. Can we get started now and see how far we get. If you can't finish, the computer will pick up where we left off. Let me ask you...

Would day or evening be a better time to call back? We also call on weekends. Would that be a better time? We appreciate your help, and will work with you to get this done..

"Not Worth My Time" Problem.

This is really a form of a "not interested" problem. Review those answers for an appropriate response

I'M HEALTHY/TOO SICK/TOO OLD/YOU DON'T WANT ME

We still need your help. You are not (too healthy/too sick/too old) for this study, and we really want you to participate. We need to hear from all sorts of people young and old, people with families, people living alone because health care affects all of us in different ways. Health care has changed so much in recent years and we need to know how people like you are being affected by these changes.

If we don't hear from people like you, your experiences and results will be under-represented. We want an accurate picture of health care and health insurance issues in America. We need all households selected to respond so we can get results that reflect everyone's opinion.

I DON'T KNOW THE ANSWERS TO THINGS LIKE THIS

There are no right or wrong answers. We really need you to participate so you can help represent other people in the country who have similar experiences and opinions. Many people have excellent coverage and are satisfied with their doctors and hospitals. Others don't have any health insurance or can't get the care they need. We want to hear from all kinds of people.