# Health Reform Monitoring Survey www.urban.org/hrms

# Quarter 3 2019 Questionnaire

NOTE: The format of the questions in this document do not necessarily reflect the format used in the web-based survey.

This survey focuses on your health and health care experiences. While you may have completed a similar survey a few months ago, your participation in this survey is important to help us get the latest information on how well the US health care system is working. Your responses to the survey will be kept confidential.

Q1. In general, would you say your health is:

Excellent	1
Very good	2
Good	3
Fair	4
Poor	5

Q2. Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

\_\_\_\_\_ Number of days

Q3. Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

\_\_\_\_\_ Number of days

Q3A. Do you have a physical or mental condition, impairment, or disability that affects your daily activities OR that requires you to use special equipment or devices, such as a wheelchair, TDD or communication device?

Yes 1 No 2

Q3B. Do you currently have a health condition that has lasted for a year or more or is expected to last for a year or more?

This could be a physical health condition (such as arthritis, asthma, cancer, dementia, diabetes, heart disease, high cholesterol, hypertension or stroke), a behavioral health or mental health condition, or a developmental disability.

Yes, one condition	1
Yes, more than one condition	2
No	3

Q3C. In the past 12 months, since September 2018, did you receive Supplemental Security Income (SSI), which provides cash assistance payments to low-income aged, blind and disabled persons, or Social Security Disability Income (SSDI), which provides cash assistance payments to disabled adults with longer work histories? If you're not sure, please make your best guess. Do not include benefits received by a family member.

Yes, I received Supplemental Security Income (SSI)	1
Yes, I received Social Security Disability Income (SSDI)	2
Yes, I received both SSI and SSDI	3
No	4

Q4. Is there a place that you usually go to when you are sick or need advice about your health?

I have one place I usually go	1
I have more than one place I usually go	2
I do NOT have a place I usually go	3

Q5. About how long has it been since you last visited a doctor or other health care provider for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

Within the past year	1
One or more years ago	2
Never	3

Q6. In answering the following questions, please think about your experiences obtaining health care in the past 12 months, that is, since September 2018:

	Yes	No	Did not need care
a. Did you have trouble finding a doctor or other	1	2	3
health care provider who would see you?			
b. Were you told by a doctor's office or clinic that	1	2	3
they would not accept you as a new patient?			
c. Were you told by a doctor's office or clinic that	1	2	3
they do not accept your health care coverage?			
d. Did you have trouble getting an appointment at	1	2	3
a doctor's office or clinic as soon as you thought			
you needed one?			

# [IF Q6A=1]

Q6F. Which of the following types of providers did you have trouble finding? Check all that apply.

A general doctor

- A specialist. A specialist is a medical doctor who focuses on a particular class of patients (such 2 as women), specializes in a particular medical disease or problem (such as heart disease), or focuses on a particular technique (such as surgery).
- Q7. The next question asks about your health insurance or health coverage plans. In answering this question, please exclude plans that pay for only one type of service (such as nursing home care, accidents, family planning, or dental care) and plans that only provide extra cash when hospitalized.

Are you currently covered by any of the following types of health insurance or health coverage plans?

		Covered	Not Covered	Not Sure
a.	Insurance through a current or former employer or union (of yours or another family member's). This would include COBRA coverage	1	2	3
b.	Insurance purchased directly from an insurance company (by you or another family member). This would include coverage purchased through an exchange or marketplace, such as Healthcare.gov [IF THE RESPONDENT IS IN A STATE WITH STATE-SPECIFIC NAMES, INSERT [or (INSERT PROGRAM NAME)]]	1	2	3
C.	Medicare, for people 65 and older, or people with certain disabilities	1	2	3
d.	Medicaid, Medical Assistance (MA), the Children's Health Insurance Program (CHIP) or any kind of state or government-sponsored assistance plan based on income or a disability. You may know this type of coverage as [IF THE RESPONDENT IS IN A STATE WITH STATE- SPECIFIC NAMES INSERT PROGRAM NAME].	1	2	3
e.	TRICARE or other military health care, including VA health care	1	2	3
f.	Indian Health Service	1	2	3
g.	Any other type of health insurance coverage or health coverage plan	1	2	3

1

### [IF "COVERED" NOT SELECTED FOR ANY ITEMS IN Q7]

Q8. Does this mean you currently have no health insurance or health coverage plan? In answering this question, please exclude plans that pay for only one type of service (such as, nursing home care, accidents, family planning, or dental care) and plans that only provide extra cash when hospitalized.

I do NOT have health insurance	1
I HAVE some kind of health insurance	2

[IF Q7G=1 OR Q8=2] Q8B. What type of health insurance do you have? [TEXT BOX]

## [IF AT LEAST ONE ITEM IN GRID FOR (Q7A - Q7G = 1("COVERED") OR Q8=2)]

Q8C. As you may know, state and federal health insurance marketplaces can be used to shop for health insurance and compare prices and benefits. These marketplaces can also be used to enroll in Medicaid, Medical Assistance or the Children's Health Insurance Program (CHIP). You may know the marketplace as Healthcare.gov [IF THE RESPONDENT IS IN A STATE WITH STATE-SPECIFIC NAMES, INSERT [or (INSERT PROGRAM NAME)]. You may have seen a website or materials with the following marketplace logo[s].

# [INSERT HEALTHCARE.GOV LOGO AND RELEVANT STATE MARKETPLACE LOGO, IF ANY]

Is your current coverage a health insurance plan through the marketplace? You may have completed the enrollment process yourself or had someone else do it for you.

Yes, I am enrolled in a health insurance plan through the marketplace	1
No, I am not enrolled in a health insurance plan through the marketplace	2

### [IF Q8C=1]

Q8E. Is your health insurance plan through the marketplace a private health insurance plan? If it is a private plan, it would be a plan in one the following categories: bronze; silver; gold; platinum; or catastrophic (this is only available for those under 30 years old or those with a "hardship exemption").

Yes, it is a private plan	1
No, it is not a private plan	2
Don't know	3

[IF (Q7B=1 OR Q7C=1 OR Q7D=1 OR Q7G=1 OR Q8=2) AND Q7A NE 1 AND Q7E NE 1 AND Q8E NE 1] Q8H. We know that it can sometimes be difficult to answer questions on type of health insurance coverage in surveys. It might help to see the program logo[s] for some coverage options in your state.

[INSERT MEDICAID, CHIP, OTHER PUBLIC PROGRAM LOGOS]

Is your current coverage a health insurance plan through one of these programs? You may have completed the enrollment process yourself or had someone else do it for you.

Yes, I am enrolled in a health insurance plan through one of those programs	1
No, I am not enrolled in a health insurance plan through one of those programs	2

[IF ((COVERED SELECTED FOR ONLY ONE ITEM IN Q7B, Q7C, Q7D, Q7F, OR Q7G) AND Q7A NE 1 AND Q7E NE1) OR (Q8=2)] Q23A. What is the name of your health insurance plan? It would be helpful if you could write down the name of the health plan as it appears on your health plan card. HEALTH PLAN NAME: [TEXT BOX]

[IF (COVERED SELECTED FOR MORE THAN ONE ITEM IN Q7B, Q7C, Q7D, Q7F, OR Q7G) AND Q7A NE 1 AND Q7E NE 1] Q23B. What is the name of the plan for your main source of health insurance coverage? It would be helpful if you could write down the name of the health plan as it appears on your health plan card. HEALTH PLAN NAME: [TEXT BOX]

Q10. Thinking about your health insurance coverage over the past 12 months, how many months were you insured since September 2018? Your best estimate is fine.

I was insured all 12 months	1
I was insured 6 to 11 months	2
I was insured 1 to 5 months	3
I did not have health insurance at all over the past 12 months	4

# [IF Q10=1]

Q10B. Have you had the same type of health insurance or health coverage plan for all of the past 12 months? That is, since September 2018?

Yes 1 No 2

# [IF "COVERED" SELECTED FOR ANY ITEM IN Q7 OR Q8=2]

Q10H. Thinking about the future, how confident are you that you will be able to keep your current health insurance coverage in the coming year?

Very confident	1
Somewhat confident	2
Not too confident	3
Not at all confident	4

[IF NO ITEMS IN GRID FOR Q7A-Q7G=1("COVERED") AND Q8=1]

Q10F. Which of these are reasons that you do not have health insurance?

l do not want health insurance	1
The cost of health insurance is too high / I cannot afford health insurance	2
I do not know how to find information on available health insurance options	3
I had trouble finding information on available health insurance options	4
I am in the process of enrolling in a health insurance plan or waiting for my health insurance	5
coverage to start	

# [IF "COVERED" SELECTED FOR ANY ITEM IN Q7 OR Q8=2]

Q9. The next question asks you to rate your satisfaction with your current health insurance coverage on several different factors. Would you say you are very satisfied, somewhat satisfied, neither satisfied or dissatisfied, somewhat dissatisfied, or very dissatisfied with your current health insurance coverage in terms of:

		Very Satisfied	Somewhat Satisfied	Neither Satisfied or Dissatisfied	Somewhat Dissatisfied	Very Dissatisfied
1.	The range of health care services available?	1	2	3	4	5
2.	Your choice of doctors and other providers?	1	2	3	4	5
3.	The premium that you pay for the coverage?	1	2	3	4	5
4.	The share of the costs that you pay when you use doctors or other providers who are not in your health plan's provider network?	1	2	3	4	5
5.	The protection that your coverage provides against high medical bills?	1	2	3	4	5

# [IF Q7A =2,3 OR REFUSED]

Q11. Earlier you reported that you do not currently have health insurance coverage through an employer (either yours or a family member's). If you wanted to, could you be covered by health insurance through your job or through a family member's job? That is, does your employer or a family member's employer offer health insurance that could cover you?

Employer (either yours or family member's) offers health insurance	1
Employer (either yours or family member's) does NOT offer health insurance	2
Not employed	3

Q12. Thinking about your health care experiences over the past 12 months, that is, since September 2018 was there any time when you needed any of the following but didn't get it because you couldn't afford it?

	Yes	No
Prescription drugs	1	2
Medical care	1	2
To see a general doctor	1	2
To see a specialist A specialist is a doctor who focuses on a particular class of patients (such as children) or on a specific disease (such as heart disease) or on a particular technique (such as surgery)	1	2
To get medical tests, treatment, or follow-up care	1	2
Dental care	1	2
Mental health care or counseling	1	2
Treatment or counseling for alcohol or drug use	1	2

Q13. For this question, think about your health care experiences over the past 12 months, that is, since September 2018. Did you or anyone in your family have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home, or home care. For this study, we're interested in your immediate family, which would include you, your spouse (if applicable), and any children or stepchildren under 19 who are living with you.

Yes	1
No	2

Q13A. Do you or anyone in your family currently have any medical bills that are being paid off over time? This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals, physicians, or other health care providers. The bills can be from earlier years as well as this year.

Yes 1 No 2

Q14A. To better understand the affordability of health care, we're interested in your family's income, which would include your income plus the income of your spouse (if applicable) and any children or stepchildren under 19 who are living with you.

Your family size (including you) is...

One person	1
Two people	2
Three people	3
Four people	4
Five people	5
Six people	6

Seven people	7
Eight people	8
Nine people	9
Ten or more people	10

# [IF Q14A=1-10]

Q14B. Please mark the category that best describes your family's total income over the last year before taxes and other deductions. Your best estimate is fine.

Response item 1 Response item 2 Response item 3 Response item 4

Q14A answer	Response item 1	Response item 2	Response item 3	Response item 4
	At or below 138%	Above 138% and	At or above 250% and	400% or more
		less than 250%	less than 400%	
One person	At or below	Above \$17,300 and	At or above \$31,300	At or above
	\$17,300	less than \$31,300	and less than \$50,000	\$50,000
Two people	At or below	Above \$23,400 and	At or above \$42,300	At or above
	\$23,400	less than \$42,300	and less than \$67,700	\$67,700
Three people	At or below	Above \$29,500 and	At or above \$53,400	At or above
	\$29,500	less than \$53,400	and less than \$85,400	\$85,400
Four people	At or below	Above \$35,600 and	At or above \$64,400	At or above
	\$35,600	less than \$64,400	and less than \$103,000	\$103,000
Five people	At or below	Above \$41,700 and	At or above \$75,500	At or above
	\$41,700	less than \$75,500	and less than \$120,700	\$120,700
Six people	At or below	Above \$47,800 and	At or above \$86,500	At or above
	\$47,800	less than \$86,500	and less than \$138,400	\$138,400
Seven people	At or below	Above \$53,900 and	At or above \$97,600	At or above
	\$53,900	less than \$97,600	and less than \$156,100	\$156,100
Eight people	At or below	Above \$60,000 and	At or above \$108,600	At or above
	\$60,000	less than \$108,600	and less than \$173,800	\$173,800
Nine people	At or below	Above \$66,100 and	At or above \$119,700	At or above
	\$66,100	less than \$119,700	and less than \$191,400	\$191,400
Ten or more	At or below	Above \$72,200 and	At or above \$130,700	At or above
people	\$72,200	less than \$130,700	and less than \$209,100	\$209,100

[IF Q14B=1]

Q14C. Was your family's total income over the last year at or below {FILL}? Your best estimate is fine.

[IF Q14A=1]: \$12,500 [IF Q14A=2]: \$17,000 [IF Q14A=3]: \$21,400 [IF Q14A=4]: \$25,800 [IF Q14A=5]: \$30,200 [IF Q14A=6]: \$34,600 [IF Q14A=7]: \$39,100 [IF Q14A=8]: \$43,500 [IF Q14A=9]: \$47,900 [IF Q14A=10]: \$52,300

> Yes 1 No 2

#### [IF (Q14A=2-10 OR REFUSED) AND Q13=1]

Q13B. Earlier you reported that you or someone in your family had problems paying or was unable to pay medical bills in the past 12 months. Were any of those medical bills for your own health care?

Yes 1 No 2

### [IF ANY ITEM IN Q7A-G=1 OR Q8=2]

Q15A. A deductible is the amount you have to pay before your health insurance or health coverage plan will start paying your medical bills. What is the annual deductible per person under your health insurance or health coverage plan? Your best estimate is fine.

\$ \_\_\_\_\_ for the year

I do not have a deductible	1
Not sure of amount	2

[IF Q15A="NOT SURE OF AMOUNT" OR REFUSED]

Q15B. It would be helpful to have a rough estimate of your deductible. Was it:

Less than \$1,350	1
\$1,350 to less than \$2,700	2
\$2,700 or more	3

#### [IF Q15A>=1,350 OR Q15B=2 OR 3]

TQ102E. How confident are you that you could pay for medical care up to the annual deductible of your current health plan in the event of a major medical expense?

Very confident	1
Somewhat confident	2
Not too confident	3
Not at all confident	4

Q16A. In the past 12 months, about how much have you and your family spent out-of-pocket for health care costs that were not covered by your health insurance or health coverage plan? Your best estimate is fine.

This would not include any premiums you pay for your health insurance or any health care costs that you will be reimbursed for.

\$ \_\_\_\_\_ for the year

No out-of-pocket costs1Not sure of amount2

[IF Q16A="NOT SURE OF AMOUNT" OR REFUSED]

Q16B. Would you say the out-of-pocket health care costs for you and your family were:

Less than \$500	1
\$500 to \$999	2
\$1,000 to \$1,499	3
\$1,500 to \$1,999	4
\$2,000 to \$2,999	5
\$3,000 to \$3,999	6
\$4,000 to \$4,999	7
\$5,000 to \$5,999	8
\$6,000 to \$6,999	9
\$7,000 to \$7,999	10
\$8,000 to \$8,999	11
\$9,000 to \$9,999	12
\$10,000 or more	13

TQ67. Over the past 12 months, that is, since September 2018, was there any time when you or anyone in your family had problems paying or were unable to pay the premium for a health insurance plan? A premium is a fixed amount of money people pay to have health coverage. It is often a monthly payment. It does not include copays or other expenses such as prescription costs.

Yes, had problems paying the premium	1
Yes, unable to pay the premium	2
No	3

### [IF (Q14A=2-10 OR REFUSED) AND (TQ67=1 OR 2)]

TQ67A. Was that your health insurance plan or a health insurance plan that would have covered you?

Yes 1 No 2

Q17. Are you currently working for pay or self-employed?

Yes, working for pay	1
Yes, self-employed	2

No, not working

[IF Q17=1 OR 2]

Q17A. How many hours per week do you usually work at your current job? (If you have more than one job, please answer for the job in which you usually work the most hours.)

3

\_\_\_\_\_ hours per week

### [IF Q17=1]

Q17B. Counting all the locations where your employer operates, are there fewer than 50 people or 50 people or more working for your employer? (If you have more than one job, please answer for the job in which you usually work the most hours). Your best guess is fine.

Fewer than 50 workers	1
50 workers or more	2

TQ114B. The next few questions focus on the Medicaid program, which provides health insurance coverage to low-income adults, children, pregnant women, elderly adults and people with disabilities. [You may know this program as [IF THE RESPONDENT IS IN A STATE WITH STATE-SPECIFIC NAMES INSERT PROGRAM NAME]].

Several states are considering requiring nonelderly adults without disabilities to work, to be looking for work, or to be participating in a work-related activity (such as school, job training, or volunteering) in order to keep their health insurance through Medicaid. This is sometimes called "Medicaid work requirements."

These adults would typically have to work or participate in work-related activities for at least 80 hours per month to keep their coverage, unless they are exempt and the work requirement does not apply to them. While the exemptions vary across the states, most states would exempt adults who are primary caregivers for a child or disabled family member and adults who have a physical or mental disorder that prevents them from working.

How much have you heard about the proposed Medicaid work requirements for nondisabled adults?

A lot	1
Some	2
Only a little	3
Not at all	4

TQ114. Based on what you know, would you [randomize: support or oppose / oppose or support] Medicaid work requirements for nondisabled adults in your state?

[IF ASKED IF THEY SUPPORT OR OPPOSE THIS CHANGE, ORDER ITEMS 1-5; IF ASKED IF THEY OPPOSE OR SUPPORT THIS CHANGE, ORDER ITEMS 5-1]

1

Strongly support

Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

[IF TQ114 = 1 OR 2]

[RANDOMIZE ORDER OF ITEMS 1-4]

TQ114E\_1. Which of the following was most important in your support for Medicaid work requirements?

People who can work should work.	1
Medicaid should only be available to those who need it most.	2
Work requirements would reduce Medicaid spending.	3
Working can improve a person's health and well-being.	4
Other (specify): [TEXT BOX]	5

[IF TQ114 = 4 OR 5]

[RANDOMIZE ORDER OF ITEMS 1-4]

TQ114E\_2. Which of the following was most important in your opposition to Medicaid work requirements?

Low-wage jobs are often unstable and unpredictable.	1
Finding and keeping a job can be hard.	2
Everyone needs health insurance coverage.	3
Not everyone who needs an exemption to the work requirements will get	4
an exemption.	
Other (specify): [TEXT BOX]	5

TQ114F. Under the proposed Medicaid work requirements for nondisabled adults, there would be three groups of adults:

- 1. Adults who are exempt from the work requirements and keep their Medicaid coverage
- 2. Adults who meet the work requirements and keep their Medicaid coverage
- 3. Adults who fail to meet the work requirements and lose their Medicaid coverage

Adults could fail to meet the work requirements because they are not aware of the work requirements, not willing to meet the work requirements, or not able to meet the work requirements. Reasons for not being able to meet the work requirements might include family obligations, physical or mental health issues, unpredictable hours at their job, limited transportation, or a lack of jobs or work-related activities available in their community.

Which do you think is likely to be the most common reason people would fail to meet the work requirements?

Because they are not aware of the work requirements	1
Because they are not willing to meet the work requirements	2
Because they are not able to meet the work requirements	3

[IF (TQ114=1 OR 2) AND TQ114F=2, RANDOMLY ASSIGN TO DOV\_TQ114G=1 OR 2]

[IF (TQ114 = 1 OR 2) AND TQ114F = 2 AND DOV\_TQ114G = 1]

TQ114G\_1. If you learned that the most common reason people failed to meet the work requirements was because they were not aware of them, would you be more likely to oppose Medicaid work requirements?

Yes, more likely to oppose1No, my opinion would not change2

### [IF (TQ114 = 1 OR 2) AND TQ114F = 2 AND DOV\_TQ114G = 2]

TQ114G\_2. If you learned that the most common reason people failed to meet the work requirements was because they were not able to meet them, would you be more likely to oppose Medicaid work requirements?

Yes, more likely to oppose1No, my opinion would not change2

[IF (TQ114 = 4 OR 5) AND (TQ114F = 1 OR 3)]

TQ114G\_3. If you learned that the most common reason people failed to meet the work requirements was because they were not willing to meet them, would you be more likely to support Medicaid work requirements?

Yes, more likely to support1No, my opinion would not change2

[IF ("COVERED" SELECTED FOR ANY ITEM IN Q7 OR Q8 = 2)]

TQ159. With your health plan, is there a special account or fund that can be used to pay for medical expenses? The accounts 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 Flexible Spending Accounts.

Yes 1 No 2 Not sure 3

### [IF ("COVERED" SELECTED FOR ANY ITEM IN Q7 OR Q8 = 2)]

TQ160. Do you or anyone in your family have a Flexible Spending Account for health expenses? These accounts are offered by some employers to allow employees to set aside pre-tax dollars of their own money for their use throughout the year to reimburse themselves for their out-of-pocket expenses for health care. With this type of account, any money remaining in the account at the end of the year, following a short grace period, is lost to the employee.

Yes	1
No	2
Not sure	3

TQ161. In answering the following questions, please think about your experiences obtaining behavioral health care in the past 12 months. This would include mental health care or counseling from a psychiatrist, psychologist, psychiatric nurse, clinical social worker, therapist, or other mental health professional, or from a general doctor or primary care physician. It would also include treatment or counseling for alcohol or drug use.

	Yes	No	Did not need care
a. Did you have trouble finding a behavioral health provider who would see you?	1	2	3
b. Were you told by a behavioral health provider's office or clinic that they would not accept you as a new patient?	1	2	3
c. Were you told by a behavioral health provider's office or clinic that they do not accept your health care coverage?	1	2	3
d. Did you have trouble getting an appointment at a behavioral health provider's office or clinic as soon as you thought you needed one?	1	2	3

TQ162. In answering the following questions, please think about your experiences obtaining dental care in the past 12 months. This would include dental care from all types of dentists, such as orthodontists, oral surgeons, and all other dental specialties, as well as dental hygienists.

	Yes	No	Did not need
			care
a. Did you have trouble finding a dentist or other	1	2	3
dental provider who would see you?			
b. Were you told by a dentist's office that they	1	2	3
would not accept you as a new patient?			
c. Were you told by a dentist's office that they do	1	2	3
not accept your health care coverage?			
d. Did you have trouble getting an appointment at	1	2	3
a dentist's office as soon as you thought you			
needed one?			

# [IF Q4=1 OR 2]

TQ57A. The next questions focus on your experiences getting health care.

Earlier you reported that there was [IF Q4=1: a place] [IF Q4=2: more than one place] you usually go when you are sick or need advice about your health. [IF Q4=1: What kind of place do you usually go to?] [IF Q4=2: What kind of place do you usually go to most often?]

Clinic or health center

Doctor's office or HMO	2
Hospital emergency room	3
Hospital outpatient department	4
Urgent care clinic	5
Retail store care clinic	6
Some other place (please specify): [TEXT BOX]	7

### [IF (Q4=1 OR 2) AND TQ57A NE 3]

TQ57H. Do you have a person at [IF Q4=1: your usual place of care] [IF Q4=2: the usual place of care you go most often] that you think of as your personal doctor or health care provider?

Yes, one person	1
Yes, more than one person	2
No	3

# [IF TQ57H=1 OR 2]

TQ57H\_2. Is [IF TQ57H=1: your personal provider] [IF TQ57H=2: the personal provider that you see most often] a doctor or some other type of health care provider?

Doctor	1
Some other type of health care provider	2
Not sure	3

#### [IF TQ57H=1 OR 2]

TQ57H\_3. How long have you been going to [IF TQ57H=1: your personal provider] [IF TQ57H=2: the personal provider that you see most often]?

Less than 1 year	1
1 to 5 years	2
5 years or more	3

### [IF TQ57H=1 OR 2]

TQ57K. Is [IF TQ57H\_2=1: your personal doctor] [IF TQ57H\_2=2 OR 3 OR REFUSED: your personal health care provider] male or female?

Male	1
Female	2

[IF TQ57H=1 OR 2]

TQ57L. Is [IF TQ57H\_2=1: your personal doctor] [IF TQ57H\_2=2 OR 3 OR REFUSED: your personal health care provider] Spanish, Hispanic, or Latino?

Yes, Spanish, Hispanic, or Latino	1
No	2

#### [IF TQ57H=1 OR 2]

TQ57M. Do you consider [IF TQ57H\_2=1: your personal doctor] [IF TQ57H\_2=2 OR 3 OR REFUSED: your personal health care provider] to be the same race as you are?

Yes	1
No	2

[IF TQ57H=1 OR 2]

[ORDER OF ITEMS IS RANDOMIZED]

 $\left[ {\sf QUESTIONS \ SPLIT \ ACROSS \ 3 \ GRIDS \ WITH \ 6 \ TO \ 7 \ ROWS \ IN \ EACH \ GRID} \right]$ 

TQ570. Are each of the following statements about your [IF TQ57H\_2=1: personal doctor/ IF TQ57H\_2=2 OR 3 OR REFUSED: personal health care provider] never true, rarely true, sometimes true, often true, or always true?

	Never	Rarely	Sometimes	Often	Always
	true	true	true	true	true
1. I trust my [IF TQ57H_2=1: doctor/IF	1	2	3	4	5
TQ57H_2=2 OR 3 OR REFUSED: provider].			-		
2. I would recommend my [IF TQ57H_2=1:	1	2	3	4	5
doctor/IFTQ57H_2=2 OR 3 OR REFUSED:					
provider] to family and friends.					
3. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] tells me the					
truth, even if it is bad news.					
4. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] cares about me					
as a person.					
5. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] puts my health					
and well-being above keeping down my					
health plan's costs.					
6. I'm comfortable talking with my [IF	1	2	3	4	5
TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR					
REFUSED: provider] about personal					
problems related to my health.					
7. My [IF тQ57H_2=1: doctor/ IF тQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] treats me with					
courtesy and respect.					
8. Му [IF TQ57H_2=1: doctor/ IF TQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] asks me about					
my goals for my health.					
9. I have confidence in the medical care	1	2	3	4	5
provided by my [IF TQ57H_2=1: doctor/IF					
TQ57H_2=2 OR 3 OR REFUSED: provider].					
10. I follow my [IF TQ57H_2=1: doctor's/ IF	1	2	3	4	5
TQ57H_2=2 OR 3 OR REFUSED: provider's]					
advice.					
11. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2	1	2	3	4	5
OR 3 OR REFUSED: provider] is thorough and					
careful.					

12. My [IF TQ57H_2=1: doctor's/IF TQ57H_2=2 OR 3 OR REFUSED: provider's] medical decisions are influenced by how much money they can make.	1	2	3	4	5
13. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] listens carefully to what I have to say.	1	2	3	4	5
14. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] interrupts me when I am talking.	1	2	3	4	5
15. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] takes my questions and concerns seriously.	1	2	3	4	5
16. My [IF TQ57H_2=1: doctor/IF TQ57H_2=2 OR 3 OR REFUSED: provider] talks with me about things in my life that cause me worry or stress.	1	2	3	4	5
17. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] explains things in a way that is easy for me to understand.	1	2	3	4	5
18. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] involves me in decisions about my medical care.	1	2	3	4	5
19. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] asks me about any concerns I have with my medical care.	1	2	3	4	5
20. My [IF TQ57H_2=1: doctor/ IF TQ57H_2=2 OR 3 OR REFUSED: provider] spends enough time with me.	1	2	3	4	5

[RANDOMLY ASSIGN TO DOV\_TQ57P=1, 2, 3, OR 4] [RANDOMLY ASSIGN TO DOV\_TQ57P\_ORDER=1 OR 2]

TQ57P. The next question focuses on the overall health care system.

[IF DOV\_TQ57P=1: Do you agree or disagree with the following statement?

"I trust the health care system."

[IF DOV\_TQ57P\_ORDER=1, ORDER STRONGLY AGREE TO STRONGLY DISAGREE; IF DOV\_TQ57P\_ORDER=2, ORDER STRONGLY DISAGREE TO STRONGLY AGREE]

Strongly agree	1
Somewhat agree	2
Neither agree nor disagree	3
Somewhat disagree	4

[IF DOV\_TQ57P=2: How much do you trust the health care system?

5]

[IF DOV\_TQ57P\_ORDER=1, ORDER A GREAT DEAL TO NOT AT ALL; IF DOV\_TQ57P\_ORDER=2, ORDER NOT AT ALL TO A GREAT DEAL]

A great deal	1
A lot	2
Somewhat	3
A little	4
Not at all	5]

[IF DOV\_TQ57P=3: Is the following statement [IF DOV\_TQ57P\_ORDER=1: never true, rarely true, sometimes true, often true, or always true] [IF DOV\_TQ57P\_ORDER=2: always true, often true, sometimes true, rarely true, never true]?

"I trust the health care system."

[IF DOV\_TQ57P\_ORDER=1, ORDER NEVER TRUE TO ALWAYS TRUE; IF DOV\_TQ57P\_ORDER=2, ORDER ALWAYS TRUE TO NEVER TRUE]

Never true	1
Rarely true	2
Sometimes true	3
Often true	4
Always true	5]

[IF DOV\_TQ57P=4: Is the following statement [IF DOV\_TQ57P\_ORDER=1: never true, rarely true, sometimes true, often true, or always true] [IF DOV\_TQ57P\_ORDER=2: always true, often true, sometimes true, rarely true, never true]?

"I do not trust the health care system."

[IF DOV\_TQ57P\_ORDER=1, ORDER NEVER TRUE TO ALWAYS TRUE; IF DOV\_TQ57P\_ORDER=2, ORDER ALWAYS TRUE TO NEVER TRUE]

Never true	1
Rarely true	2
Sometimes true	3
Often true	4
Always true	5]

TQ147B. The next few questions focus on proposals for expanding health insurance coverage.

One approach would give some or all Americans the option of enrolling in a government-run health insurance plan that would be similar to Medicare. Medicare is a federal health insurance program for people 65 and older and for people with certain disabilities. This strategy for expanding health insurance coverage is sometimes called a "public option."

This new government-run plan would not replace the other health insurance options that are currently available, but would instead be an additional option. People would pay a premium based on their income to buy into the government-run plan. The government-run plan would have lower premiums and out-of-pocket costs than most private health insurance plans. Would you [support] or [oppose] a public option?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

TQ147C. Another approach to expand health insurance coverage would enroll all Americans in a single government-run health insurance plan that would be similar to Medicare. This would be done as part of a new national health insurance program. This strategy is sometimes called "Medicare for All."

This new program would replace the current health insurance system with a single government-run health plan, with little or no role for private insurance. Instead of paying premiums, taxpayers would cover the costs of this national health insurance program. Would you [support] or [oppose] Medicare for All?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

[IF (TQ147B = 1 OR 2) AND (TQ147C = 1 OR 2)]

TQ147F. If you had to choose one approach to expanding health insurance coverage, would you prefer Medicare for All with little or no role for private insurance, or the public option with private insurance available for those who want it?

Medicare for All with little or no role for private insurance	1
A public option that keeps private insurance available for those who want it	2

TQ163. The next questions focus on proposals to make health insurance coverage more affordable for people who buy a health plan directly from an insurance company through the marketplaces. Marketplaces are websites where people can shop for health insurance and compare prices and benefits.

Currently, most people with low or moderate incomes (below about \$50,000 for a single adult and [RANDOMLY ASSIGN: about \$100,000 for a family of four / about \$85,000 for a family of three]) who buy a health plan through the marketplaces can get a subsidy to reduce their premium costs. These subsidies are sometimes referred to as premium tax credits. The dollar amount of the subsidy is calculated to ensure people do not have to pay more than a certain percentage of their income for their health plan.

Do you support or oppose the current subsidies that reduce premium costs for people with low or moderate incomes who buy a health plan through the marketplaces?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

# [IF TQ163 = 1 OR 2]

TQ163A. Would you support or oppose increasing the amount of the subsidies to provide an additional reduction in the premium costs for people with low or moderate incomes who buy a health plan through the marketplaces?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

# [IF TQ163 = 1 OR 2]

TQ163B. Would you support or oppose expanding subsidies to reduce premium costs to all people who buy a health plan through the marketplaces regardless of their income?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

TQ164. Currently, some people with low or moderate incomes who buy a health plan through the marketplaces also get subsidies that reduce the out-of-pocket costs (deductibles, copayments, and coinsurance) they pay when they receive health care services and reduce the maximum amount they would need to pay out-of-pocket in a given year under their health plan.

Do you support or oppose the current subsidies that reduce out-of-pocket costs for people with low or moderate incomes who buy a health plan through the marketplaces?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3

Somewhat oppose	4
Strongly oppose	5

[IF TQ164 = 1 OR 2]

TQ164A. Would you support or oppose increasing the amount of these subsidies to provide an additional reduction in the out-of-pocket costs for people with low or moderate incomes who buy a health plan through the marketplaces?

Strongly support	1
Somewhat support	2
Neither support nor oppose	3
Somewhat oppose	4
Strongly oppose	5

QFollowup. Based on your responses to the survey, you may be eligible to participate in a 20-minute follow-up telephone interview to learn more about your health care experiences. If you are selected for a follow-up interview, your first name, phone number, some of your survey responses, and some of your characteristics (such as age, gender, and race/ethnicity) will be shared with the researcher who will be conducting these interviews. Responding yes to this question does not guarantee you will be contacted, and if you are, you will have the opportunity to decide whether or not you want to participate. Would you be interested in being contacted to hear more about the follow-up interviews?

Yes 1 No 2