



Topline

***Kaiser Family Foundation
Survey of Non-Group Health Insurance Enrollees***

June 2014

METHODOLOGY

The Kaiser Family Foundation (KFF) *Survey of Non-Group Health Insurance Enrollees* is the first in a series of surveys examining the views and experiences of people who purchase their own health insurance, either directly from an insurance company or through a state or federal Health Insurance Exchange created by the Affordable Care Act (ACA). The survey was designed and analyzed by researchers at KFF. Social Science Research Solutions (SSRS) collaborated with KFF researchers on sample design and weighting, and supervised the fieldwork.

The survey was conducted by telephone from April 3 through May 11, 2014 among a nationally representative random sample of 742 adults who purchase their own insurance. Computer-assisted telephone interviews conducted by landline (333) and cell phone (409, including 219 who had no landline telephone) were carried out in English and Spanish by SSRS. Respondents were considered eligible for the survey if they met the following criteria:

- Between the ages of 18-64
- Currently covered by health insurance that they purchase themselves
- Not covered by health insurance through an employer, COBRA, Medicare, Medicaid, or the U.S. military or VA
- If purchase insurance from a college or university, the insurance covers health services received both within and outside the university setting
- If a small business owner, the health insurance they purchase is only for themselves and/or their family, and does not cover non-related employees of their business
- If purchase from a trade association, respondent pays the entire premium themselves
- Respondent was able to answer a question about whether insurance was purchased directly from an insurance company, from a state or federal health insurance marketplace, or through a health insurance agent or broker (Q35 in questionnaire)

Because the study targeted a low-incidence population, the sample was designed to increase efficiency in reaching this group, and consisted of three parts: (1) respondents reached through RDD landline and cell phone dialing to previously uncalled (“fresh”) sample (N=179); (2) respondents reached by re-contacting those who indicated in a previous RDD survey that they either purchased their own insurance or were uninsured (N=186); (3) respondents reached as part of the SSRS Omnibus survey (N=377), a weekly, nationally representative RDD landline and cell phone survey. All RDD landline and cell phone samples were generated by Marketing Systems Group. The “fresh” sample was designed to oversample areas with a lower-income population in order to complete more interviews with respondents who were uninsured prior to the ACA open enrollment period (since being uninsured is negatively correlated with income).

A multi-stage weighting process was applied to ensure an accurate representation of the national population of non-group enrollees ages 18-64. The first stage of weighting involved corrections for sample design, including accounting for the low-income oversample used in the “fresh” sample, the likelihood of non-response for the re-contact sample, number of eligible household members for those reached via landline, and a correction to account for the fact that respondents with both a landline and cell phone have a higher probability of selection. In the second weighting stage, demographic adjustments were applied to account for systematic non-response along known population parameters. No reliable administrative data were available for creating demographic weighting parameters for this group, since the most recent Census figures could not account for the changing demographics of non-group insurance enrollees brought about by the ACA this year. Therefore, demographic benchmarks were derived by compiling a sample of all respondents ages 18-64 interviewed on the SSRS Omnibus survey during the field period (N=4,312) and weighting this sample to match the national 18-64 year-old population based on the 2013 U.S. Census Current Population Survey March Supplement parameters for age, gender, education, race/ethnicity, region, population density, marital status, and phone use. This sample was then filtered to include respondents qualifying for the current survey, and the weighted demographics of this group were used as post-stratification weighting parameters for the “fresh” sample (including gender, age, education, race/ethnicity, marital status, income, and population density). A final adjustment was made to the full sample to adjust for previous insurance status (estimated based on the combined “fresh” and omnibus samples), to address the possibility that the criteria used in selecting the prescreened sample could affect the estimates for previous insurance status.

Weighting adjustments had a minor impact on the overall demographic distribution of the sample, with the biggest adjustments being made based on age (this is common in all telephone surveys, as younger respondents are the most difficult to reach and convince to participate). Weighted and unweighted demographics of the final sample are shown in the table below.

		Unweighted % of total	Weighted % of total
Age	18-25	13%	20%
	26-34	13	17
	35-44	13	17
	45-54	21	19
	55-64	37	25
	Refused	2	2
Gender	Male	47	50
	Female	53	50
Education	Less than high school graduate	5	8
	High school graduate	31	32
	Some college	23	25
	Graduated college	24	20
	Graduate school or more	14	11
	Technical school/other	3	3
	Refused	1	1
Race/Ethnicity	White, non-Hispanic	69	63
	Black, non-Hispanic	13	13
	Hispanic	10	13
	Other/Mixed	6	10
	Refused	2	2
Self-reported health status	Excellent	24	24
	Very good	33	31
	Good	28	30
	Fair	11	11
	Poor	4	3
	Don't know/refused	*	1
Plan Type	Exchange plans	46	48
	ACA-compliant, non-Exchange plans	17	16
	Compliant, unknown if Exchange	3	3
	Non-compliant plans	33	31
	Unknown if compliant	1	1

All statistical tests of significance account for the effect of weighting. The margin of sampling error (MOSE) for results based on the total sample is plus or minus 4 percentage points. For subgroups the margin of sampling error is higher.

Kaiser Family Foundation Survey of Non-Group Health Insurance Enrollees

NOTES FOR READING THE TOPLINE:

- Percentages may not always add up to 100 percent due to rounding
- Values less than 0.5 percent are indicated by an asterisk (*)
- "Vol." indicates a response was volunteered by the respondent, not offered as an explicit choice
- Questions are presented in the order asked; question numbers may not be sequential

MAIN QUESTIONNAIRE

(See pages 34-36 for exact screener questions asked)

(ROTATE VERBIAGE IN PARENS)

2. As you may know, a health reform bill, also known as the Affordable Care Act and sometimes referred to as Obamacare, was signed into law in 2010. Given what you know about the health reform law, do you have a generally (favorable) or generally (unfavorable) opinion of it? (GET ANSWER THEN ASK: Is that a very [favorable/unfavorable] or somewhat [favorable/unfavorable] opinion?)

	Total
Very favorable	25
Somewhat favorable	22
Somewhat unfavorable	13
Very unfavorable	30
Don't know/refused	9

(ROTATE Q.3 AND Q.4 WITH Q.5 AND Q.6)

3. So far, would you say you and your family have personally benefited from the health reform law, or not?

	Total
Yes, have benefited	34
No, have not benefited	62
Don't know/refused	4

4. In what ways would you say you have benefited from the health reform law? (RECORD RESPONSE VERBATIM. RECORD UP TO THREE RESPONSES. DO NOT PROBE IF ONLY 1 RESPONSE GIVEN)

Based on total who say they have benefitted from the health reform law; n = 266

	Total
Lower cost health care/insurance free/affordable	49
Access to health care/expansion of health insurance/expansion of benefits (NET)	45
Able to get insurance	30
Better access to care/medication	11
Extension of dependent coverage	4
Ability to keep insurance	*
Able to get coverage for pre-existing condition	8
Improved coverage	6
Peace of mind/financial protection	4
More choice/ability to choose between plans	4
Preventive services benefit/free checkups/women's health/birth control	2
Able to quit/change jobs/retire early	1
Medical loss ratio/insurance must give me a rebate or credit	*
Other	10
Don't know/refused	11

Note: Total adds up to more than 100% because multiple responses accepted

3/4. Combo Table based on total

	Total
Have benefitted from the health reform law	34
Lower cost health care/insurance free/affordable	17
Access to health care/expansion of health insurance/expansion of benefits	15
Able to get insurance	10
Better access to care/medication	4
Extension of dependent coverage	1
Ability to keep insurance	*
Able to get coverage for pre-existing condition	3
Improved coverage	2
Peace of mind/financial protection	--
More choice/ability to choose between plans	2
Preventive services benefit/free checkups/women's health/birth control	1
Able to quit/change jobs/retire early	1
Medical loss ratio/insurance must give me a rebate or credit	*
Other	3
Don't know/refused	4
Have not benefitted from the health reform law	62
Don't know/refused	4

(ROTATE Q.3 AND Q.4 WITH Q.5 AND Q.6)

5. So far, would you say you and your family have been negatively affected by the health reform law, or not?

	Total
Yes, negatively affected	29
No, not negatively affected	66
Don't know/refused	5

6. In what ways would you say you have been negatively affected by the health reform law? (RECORD RESPONSE VERBATIM. RECORD UP TO THREE RESPONSES. DO NOT PROBE IF ONLY 1 RESPONSE GIVEN)

Based on total who say they have been negatively affected by the health reform law; n = 219

	Total
Cost (NET)	60
Premiums/cost of insurance are too high/have gone up	37
Costs went up/expensive/unaffordable (general)	21
Deductibles/co-pays/out-of-pocket costs are too high/have gone up	11
Opposed to individual mandate/fines/forced coverage	16
Cut to benefits/less options/choices (general)	13
Policy cancellations (includes employer canceled plans/dropped spouse/family coverage)	11
Lost job/hours cut/declining income/bad for business	7
Can't see the doctor I want/less choice of doctors	5
Don't qualify for government help/haven't been helped by it	2
Taxes/having to pay for other people's coverage	2
Website/enrollment problems	2
Insurance plan changed (general)	1
Privacy concerns	1
Other	14
Don't know/refused	7

Note: Total adds up to more than 100% because multiple responses accepted

5/6. Combo Table based on total

	Total
Have been negatively affected by the health reform law	29
Cost (NET)	17
Premiums/cost of insurance are too high/have gone up	11
Deductible/co-pays/out-of-pocket costs are too High/have gone up	3
Costs went up/expensive/unaffordable (general)	6
Opposed to individual mandate/fines/forced coverage	4
Cut to benefits/less options/choices (general)	4
Policy cancellations (includes employer canceled plans/dropped spouse/family coverage)	3
Lost job/hours cut/declining income/bad for business	2
Can't see the doctor I want/less choice of doctors	1
Don't qualify for government help/haven't been helped by it	1
Taxes/having to pay for other people's coverage	*
Website/enrollment problems	*
Insurance plan changed (general)	*
Privacy concerns	*
Other	4
Don't know/refused	2
Have not been negatively affected by the health reform law	66
Don't know/refused	5

7. As far as you know, does the health care law provide financial help to low and moderate income Americans who don't get insurance at work to help them purchase coverage, or not?

	Total
Yes, law does this	68
No, law does not do this	20
Don't know/refused	13

(SCRAMBLE Q.8, Q.9, Q.10)

(ROTATE VERBIAGE IN PARENS)

8. Thinking about your own experience, do you think the health care law has made it (easier) or (harder) for you to shop and compare health plans, or has it not made much difference?

	Total
Easier	34
Harder	20
No difference	42
Never tried before/no previous experience (vol.)	1
Don't know/refused	3

(ROTATE VERBIAGE IN PARENS)

9. Thinking about your own experience, do you think the health care law has made it (easier) or (harder) for you to find an affordable health plan, or has it not made much difference?

	Total
Easier	35
Harder	23
No difference	39
Never tried before/no previous experience (vol.)	1
Don't know/refused	2

(ROTATE VERBIAGE IN PARENS)

10. Thinking about your own experience, do you think the health care law has (increased) or (decreased) the health plan choices available to you, or has it not made much difference?

	Total
Increased choices	33
Decreased choices	20
No difference	44
Never tried before/no previous experience (vol.)	1
Don't know/refused	2

[READ IF RESPONDENT HAS SIGNED UP FOR COVERAGE THAT HASN'T STARTED YET (Q.S2=1): The next set of questions are about your health insurance coverage. For these questions, please think about the plan that you have signed up for that will begin to cover you in the next month. If you feel you are unable to answer any of these questions, just let me know and we'll move on to the next one.]

12. How would you rate your overall health insurance coverage – excellent, good, not so good or poor?

	Total
Excellent	23
Good	53
Not so good	10
Poor	8
Don't know/refused	6

13. In general, do you feel well-protected by your health insurance plan, or do you feel vulnerable to high medical bills?

	Total
Feel well-protected by your health insurance plan	60
Feel vulnerable to high medical bills	34
Don't know/refused	5

14. Would you say your health insurance is an excellent value, good value, only a fair value or a poor value for what you pay for it?

	Total
Excellent value	19
Good value	37
Only a fair value	23
Poor value	16
Don't pay directly/don't know how much it costs (vol.)	2
Don't know/refused	3

30. Generally, how confident are you that you have enough money or health insurance to pay for the usual medical costs that you and your family require? Are you very confident, somewhat confident, not too confident, or not at all confident?

	Total
Very confident	30
Somewhat confident	39
Not too confident	18
Not at all confident	11
Don't know/refused	2

31. How confident are you that you would have enough money or health insurance to pay for a major illness, such as a heart attack, cancer, or a serious injury that required hospitalization? Are you very confident, somewhat confident, not too confident, or not at all confident?

	Total
Very confident	22
Somewhat confident	35
Not too confident	22
Not at all confident	19
Don't know/refused	1

(SCRAMBLE ITEMS a-g)

15. Thinking about your current health insurance plan, how satisfied are you with each of the following? What about (INSERT)? (READ 1ST TIME, THEN AS NECESSARY: Are you very satisfied, somewhat satisfied, somewhat unsatisfied, or very unsatisfied?) [INTERVIEWER NOTE: IF R SAYS "I HAVE NO COPAY" OR "THERE IS NO DEDUCTIBLE" ASK IF THEY ARE SATISFIED WITH THE FACT THAT THERE IS NO COPAY OR DEDUCTIBLE]

a. The premium you have to pay each month for your health insurance coverage

	Total
Very satisfied	30
Somewhat satisfied	34
Somewhat unsatisfied	13
Very unsatisfied	19
Don't know/refused	3

b. Your annual deductible, that is the amount you have to pay yourself before insurance will start paying any part of your medical bills

	Total
Very satisfied	27
Somewhat satisfied	35
Somewhat unsatisfied	16
Very unsatisfied	17
Don't know/refused	5

c. The copay, or amount you have to pay out of your own pocket when you visit a doctor

	Total
Very satisfied	36
Somewhat satisfied	36
Somewhat unsatisfied	14
Very unsatisfied	10
Don't know/refused	5

d. The amount you have to pay out of your own pocket when you fill a prescription

	Total
Very satisfied	33
Somewhat satisfied	36
Somewhat unsatisfied	9
Very unsatisfied	14
Don't know/refused	8

e. The choice of primary care doctors available under your plan

	Total
Very satisfied	45
Somewhat satisfied	36
Somewhat unsatisfied	7
Very unsatisfied	7
Don't know/refused	4

f. The choice of hospitals available under your plan

	Total
Very satisfied	43
Somewhat satisfied	37
Somewhat unsatisfied	7
Very unsatisfied	5
Don't know/refused	7

g. The choice of specialists, such as cardiologists and orthopedists, available under your plan

	Total
Very satisfied	35
Somewhat satisfied	35
Somewhat unsatisfied	8
Very unsatisfied	7
Don't know/refused	15

(ROTATE 1-4/4-1)

16. How easy or difficult is it for you to afford to pay the cost of your health insurance each month? (READ LIST)

	Total
Very easy	24
Somewhat easy	33
Somewhat difficult	28
Very difficult	12
Don't pay directly/cost is zero/haven't paid first premium yet (vol.)	2
Don't know/refused	2

17. How well do you feel you understand what health care services your plan covers and what it doesn't? Would you say you understand it very well, somewhat well, not too well, or not well at all?

	Total
Very well	35
Somewhat well	40
Not too well	15
Not well at all	8
Don't know/refused	1

18. How well do you feel you understand how much you would have to pay when you visit a doctor or health care provider? Would you say you understand it very well, somewhat well, not too well, or not well at all?

	Total
Very well	47
Somewhat well	36
Not too well	11
Not well at all	5
Don't know/refused	2

19. Thinking about your current health plan, approximately how much do you pay per month for your health insurance premium, that is the amount you pay to be covered by health insurance?

	Total
Less than \$1 per month	6
\$1-\$200	36
\$201-\$500	21
\$501+	15
Don't know	18
Refused	4

20. Is the amount you pay for coverage just for yourself, or does it also include coverage for other members of your family?

	Total
Just for self	58
Other members of your family	40
Don't know/refused	1

21. How many people, including yourself, are covered by this health care plan?

Based on total who say amount paid for coverage includes other family members; n = 264

	Total
2	46
3	22
4	24
5	3
6	2
7	--
8+	1
Don't know/refused	3

22. How many of those people are children under age 19?

Based on total who say amount paid for coverage includes other family members; n = 264

	Total
None	50
1	28
2	20
3	1
4	--
5	--
6	1
7	--
8+	--
Don't know/refused	*

23. As far as you know, are you personally getting financial help from the government, such as a premium tax credit or premium assistance, to help pay your monthly premium for health insurance, or not?

	Total
Yes, getting financial assistance	27
No, not getting financial assistance	70
Don't know/refused	4

24. Do you happen to know the amount of the premium subsidy or tax credit, that is the amount the government is paying towards your health insurance?

Based on total who are getting financial assistance; n = 199

	Total
\$200 or less	22
\$201-\$500	19
\$501+	11
Don't know	47
Refused	2

25. Do you think you would have been able to afford to buy health insurance without this financial assistance, or not?

Based on total who are getting financial assistance; n = 199

	Total
Yes	18
No	81
Don't know/refused	1

23/25. Combo table based on total

	Total
Getting financial assistance	27
Would have been able to afford to buy health insurance w/out it	5
Would not have been able to afford to buy health insurance w/out it	22
Not getting financial assistance	70
Don't know/refused	4

26. Did you apply for or attempt to get government financial assistance to pay for your health insurance, or not?

Based on total who are not getting financial assistance; n = 516

	Total
Yes	17
No	82
Don't know/refused	1

27. Do you know why you were not able to get financial assistance from the government to help pay your insurance premium? Was it because your income was too high to qualify, you didn't have the right documentation to verify your income, or for some other reason?

Asked of those who applied for financial assistance and are not getting it (sample size insufficient to report)

23/26/27. Combo table based on total

	Total
Getting financial assistance	27
Not getting financial assistance	70
Applied for/attempted to get it	12
Income was too high to qualify	6
Didn't have the right documentation to verify income	*
Just applied/still in process/did not get an answer yet (vol.)	1
Other reason	2
Did not apply for/attempt to get it	57
Don't know/refused	4

28. Thinking about your CURRENT insurance plan, what is the amount of your annual deductible for medical care, that is the amount you have to pay yourself before your insurance plan will start paying any of your medical bills? (IF NECESSARY: If your plan has separate deductibles for services received from providers inside and outside the plan's network, please tell me the in-network deductible.) [IF NECESSARY: If your plan has separate deductibles for different types of services, please think about the deductible that applies to most services.]

	Total
\$0/No deductible	9
\$1-\$999	13
\$1000-\$2499	9
\$2500-\$4999	12
\$5000+	16
Don't know	37
Refused	4

29. Is that a FAMILY deductible, meaning you must spend that amount on your entire family's medical care before the insurance company begins to pay, or is it a PER PERSON deductible, meaning that you must spend that amount on care for any one person before the insurance company will begin to pay for that person's care?

Based on total who pay an annual deductible and say amount paid for coverage includes other family members; n = 158

	Total
Family deductible	55
Per person deductible	42
Don't know/refused	3

(SCRAMBLE ITEMS a-e)

32. How worried are you, if at all, about each of the following things? What about (INSERT NEXT ITEM)? [READ 1ST TIME, THEN AS NECESSARY: Are you very worried, somewhat worried, not too worried, or not at all worried that [ITEM]?)

	Very worried	Somewhat worried	Not too worried	Not at all worried	Don't know/refused
a. Your insurance company will raise your premiums so much you will no longer be able to afford your health insurance	36	26	19	18	1
b. Your income will go down and you won't be able to afford the cost of your current insurance coverage	28	25	22	24	1
c. You won't be able to afford the prescription drugs you need	19	24	28	28	1
d. You won't be able to afford the health care services you need	30	28	21	20	*
e. Your income will change and you will no longer be eligible for financial help to pay for insurance <i>(based on total who are getting financial help; n = 199)</i>	30	24	22	23	1

IF NO STATE EXCHANGE NAME, INSERT "the federal health insurance marketplace created by the 2010 health care law"

IF STATE EXCHANGE NAME, INSERT "your state's health insurance marketplace, also known as (INSERT STATE SPECIFIC NAME)"

34. Overall, do you have a favorable or unfavorable opinion of (the federal health insurance marketplace created by the 2010 health care law/your state's health insurance marketplace, also known as [INSERT STATE-SPECIFIC NAME])? (GET ANSWER THEN ASK: Is that a very [favorable/unfavorable] or somewhat [favorable/unfavorable] opinion?)

	Total
Very favorable	22
Somewhat favorable	32
Somewhat unfavorable	17
Very unfavorable	19
Don't know/refused	10

IF STATE EXCHANGE NAME, INSERT "or (INSERT STATE SPECIFIC NAME)"

35. Did you purchase your current health insurance plan directly from an insurance company, from the marketplace known as healthcare.gov (or [INSERT STATE-SPECIFIC MARKETPLACE NAME]), or through an insurance agent or broker?

	Total
Directly from an insurance company	28
From healthcare.gov (or STATE SPECIFIC MARKETPLACE NAME)	43
Through an insurance agent or broker	29

IF STATE EXCHANGE NAME, INSERT "or (INSERT STATE SPECIFIC NAME)"

36. Do you know if the plan you purchased through an agent or broker was a plan from the health insurance marketplace known as healthcare.gov (or [INSERT STATE-SPECIFIC MARKETPLACE NAME]), or was it a plan purchased directly from an insurance company and not through an exchange or marketplace?

Based on total who purchased current health insurance plan through an insurance agent/broker; n = 227

	Total
Plan purchased from a state or federal marketplace	20
Plan purchased directly from an insurance company	65
Don't know/refused	16

35/36. Combo table based on total

	Total
Directly from an insurance company (including through broker)	47
From marketplace (including through broker)	48
From insurance agent/broker, unknown if marketplace or not	5

IF NO STATE EXCHANGE NAME, INSERT "healthcare.gov"

IF STATE EXCHANGE NAME, INSERT "(INSERT STATE SPECIFIC NAME)"

37. Did you consider buying insurance DIRECTLY from a private insurance company, or did you only consider buying insurance through the marketplace known as (healthcare.gov/[INSERT STATE-SPECIFIC NAME])?

Based on total who purchased current health insurance plan from state/federal marketplace; n = 340

	Total
Considered buying DIRECTLY from a private insurance company	26
Only considered buying through the marketplace known as (healthcare.gov/STATE SPECIFIC NAME)	70
Don't know/refused	4

38. What is the **main** reason you decided to purchase insurance through the health insurance marketplace rather than directly from a private insurance company? (RECORD RESPONSE VERBATIM)

Asked of those who purchased current health insurance plan from state/federal marketplace and considered buying directly from a private insurance company (sample size insufficient to report)

35/36/37/38. Combo table based on total

	Total
Current plan is marketplace plan (including those purchased through broker)	48
Considered buying directly from private insurance company, but didn't because...	13
The cost/was cheaper	4
For the subsidy	1
Was easier	1
For better coverage/benefits	1
Didn't think would qualify for private insurance	1
Had pre-existing condition	1
Referred by broker/agent/assister	1
Plans/choices available	*
Other	3
Only considered buying through the marketplace	34
Current plan purchased directly from an insurance company (including through broker)	47
Purchased from a broker, not sure if exchange coverage or not	5

IF NO STATE EXCHANGE NAME, INSERT "healthcare.gov"

IF STATE EXCHANGE NAME, INSERT "(INSERT STATE SPECIFIC NAME)"

39. Did you consider buying insurance from the health insurance marketplace known as (healthcare.gov/[INSERT STATE-SPECIFIC NAME]), or did you only consider buying insurance directly from a private insurance company?

Based on total who purchased current health insurance plan directly from an insurance company; n = 369

	Total
Considered buying from health insurance marketplace	32
Only considered buying directly from a private insurance company	62
Don't know/refused	5

40. What is the main reason you decided to purchase insurance directly from a private company rather than through the health insurance marketplace? (RECORD RESPONSE VERBATIM)

Based on total who purchased current health insurance plan directly from an insurance company and considered buying from health insurance marketplace; n = 121

	Total
The cost/was cheaper	20
Already had insurance/extended previous insurance	13
Website/enrollment problems/negative experience with marketplace	11
Was easier	8
Trust insurance company more than marketplace	8
For better coverage/benefits/more options	4
Opposed to government intrusion/involvement	4
Would not qualify for subsidy	3
Didn't want to have to switch doctors	3
Done by phone not internet	2
Didn't think would qualify to purchase on exchange	1
To avoid coverage interruptions	*
Other	17
Don't know/refused	5

35/36/39/40. Combo table based on total

	Total
Current plan purchased directly from an insurance company (including through broker)	47
Considered buying from health insurance marketplace, but didn't because...	15
The cost/was cheaper	3
Already had insurance/extended previous insurance	2
Website/enrollment problems/negative experience with marketplace	2
Was easier	1
Trust insurance company more than marketplace	1
For better coverage/benefits/more options	1
Opposed to government intrusion/involvement	1
Would not qualify for subsidy	*
Didn't want to have to switch doctors	*
Done by phone not internet	*
Didn't think would qualify to purchase on exchange	*
To avoid coverage interruptions	*
Other	3
Only considered buying directly from a private insurance company	29
Current plan is marketplace plan (including those purchased through broker)	48
Purchased from a broker, not sure if exchange coverage or not	5

42. Approximately how many different health insurance plans did you consider when you purchased your coverage? Just one plan, between 2 and 5 plans, between 6 and 10 plans, or more than 10 plans?

	Total
Just one plan	25
Between 2 and 5 plans	59
Between 6 and 10 plans	7
More than 10 plans	5
Don't know/refused	4

47. Did someone help you enroll in health insurance or did you complete the enrollment process on your own?

	Total
Someone helped you enroll	49
Completed the enrollment process on your own	49
Don't know/refused	1

IF NO STATE EXCHANGE NAME, INSERT "the federal health insurance exchange"

IF STATE EXCHANGE NAME, INSERT "(INSERT STATE SPECIFIC NAME)"

48. Who was that person? Was it a family member or friend, a representative from (the federal health insurance exchange/[INSERT STATE EXCHANGE NAME]), a health insurance broker or agent, a community or county health worker, or someone else?

Based on total who had someone help them enroll in health insurance; n = 374

	Total
A health insurance broker or agent	34
A representative from (the federal health insurance exchange/STATE SPECIFIC NAME)	26
Family member or friend	22
A community or county health worker	9
Someone else	8
Don't know/refused	1

Note: Total may add up to more than 100% because multiple responses accepted

47/48. Combo table based on total

	Total
Someone helped you enroll in health insurance	49
A health insurance broker/agent	17
A representative from the federal/state health insurance exchange	13
Family member/friend	11
A community/county health worker	5
Someone else	4
Completed the enrollment process on your own	49
Don't know/refused	1

(SCRAMBLE a-c)

49. Thinking about all of the time you spent on the process of shopping and signing up for health insurance, did you spend any part of this process (INSERT 1ST ITEM), or not? What about (INSERT NEXT ITEM)? [IF NECESSARY: Did you spend any part of the health insurance shopping and enrollment process (ITEM), or not?]

	Yes	No	Don't know/ refused
a. On the internet	55	44	*
b. On the phone	48	52	1
c. In person with someone helping you sign up for coverage	36	63	1

(SCRAMBLE IN SAME ORDER AS Q.49)

50. Thinking about the total time you spent shopping and signing up for coverage, how many hours did you spend (INSERT)? [IF NECESSARY FOR ITEM a: If you had trouble accessing a website, please include the time you spent actively engaged in trying to log on or set up an account.] [IF NECESSARY FOR ITEM b: If you had trouble getting through to speak with someone on the phone, please include the time you spent on hold or waiting for someone to respond.]

Item a based on total who spent any part of the shopping/enrollment process on the internet; n = 417

Item b based on total who spent any part of the shopping/enrollment process on the phone; n = 402

Item c based on total who spent any part of the shopping/enrollment process in person with someone helping; n = 282

a. On the internet

	Total
Less than 1 hour	18
At least 1 hour but less than 3 hours	31
At least 3 hours but less than 5 hours	22
At least 5 hours but less than 10 hours	17
10 hours or more	11
Don't know/refused	

b. On the phone

	Total
Less than 1 hour	34
At least 1 hour but less than 3 hours	40
At least 3 hours but less than 5 hours	12
At least 5 hours but less than 10 hours	5
10 hours or more	7
Don't know/refused	2

c. In person with someone helping you sign up for coverage

	Total
Less than 1 hour	34
At least 1 hour but less than 3 hours	43
At least 3 hours but less than 5 hours	10
At least 5 hours but less than 10 hours	4
10 hours or more	4
Don't know/refused	4

49a/50a. Combo table based on total

	Total
Spent any part of the shopping/signing up for health insurance process on the internet	55
Less than 1 hour	10
At least 1 hour but less than 3 hours	17
At least 3 hours but less than 5 hours	12
At least 5 hours but less than 10 hours	9
10 hours or more	6
Did not spend any part of the shopping/signing up for health insurance process on the internet	44
Don't know/refused	*

49b/50b. Combo table based on total

	Total
Spent any part of the shopping/signing up for health insurance process on the phone	48
Less than 1 hour	16
At least 1 hour but less than 3 hours	19
At leaset 3 hours but less than 5 hours	6
At least 5 hours but less than 10 hours	2
10 hours or more	3
Did not spend any part of the shopping/signing up for health insurance process on the phone	52
Don't know/refused	1

49c/50c. Combo table based on total

	Total
Spent any part of the shopping/signing up for health insurance process in person with someone helping you sign up for coverage	36
Less than 1 hour	12
At least 1 hour but less than 3 hours	15
At leaset 3 hours but less than 5 hours	4
At least 5 hours but less than 10 hours	2
10 hours or more	2
Did not spend any part of the shopping/signing up for health insurance process in person with someone helping you sign up for coverage	63
Don't know/refused	1

(SCRAMBLE ITEMS d-h)

IF NO STATE EXCHANGE NAME, INSERT "healthcare.gov"

IF STATE EXCHANGE NAME, INSERT "(INSERT STATE SPECIFIC NAME)"

(ROTATE 1-4/4-1)

52. Thinking about when you signed up for your current health plan, how easy or difficult was it for you to (INSERT)? (READ LIST. ENTER ONE ONLY)

	Very easy	Somewhat easy	Somewhat difficult	Very difficult	Not applicable (VOL)	Don't know/refused
d. Compare the copays and deductibles you would have to pay when you use health services	32	37	18	9	2	2
e. Compare the monthly premium you would have to pay for coverage	38	35	16	7	2	2
g. Compare the doctors, hospitals, and other health care providers you could see under each plan	28	36	21	9	3	3

Items f & h based on total who purchased current plan from state or federal marketplace; n = 340

	Very easy	Somewhat easy	Somewhat difficult	Very difficult	Not applicable (VOL)	Don't know/refused
f. Figure out if your income qualifies you for financial assistance	33	31	16	13	4	4
h. Set up an account with the health insurance marketplace (healthcare.gov/STATE MARKETPLACE NAME)	32	27	19	14	3	5

(SCRAMBLE ITEMS a-e)

53. Please tell me how important each of the following factors was in choosing your current health plan over the other choices available. What about (INSERT)? [READ FIRST TIME, THEN AS NECESSARY: Was this extremely important, very important, somewhat important, or not too important in your choice of plans?]

Based on total who considered more than 1 plan or didn't say how many plans they considered; n = 571

	Extremely important	Very important	Somewhat important	Not too important at all	Not important at all (VOL)	Don't know/refused
a. The monthly premium costs	31	45	18	3	*	2
b. The deductibles and copays you have to pay when you use services	26	45	21	4	*	3
c. The choice of doctors and hospitals available	25	39	25	9	*	2
d. The range of benefits or a specific benefit covered	22	40	26	8	*	3
e. Recommendations from friends or family	6	19	25	43	5	2

53a. Of those things you said were extremely important, which was the MOST important factor that made you choose your current health plan over the other choices available? Was it...?

53/53a. Most Important Summary Table based on total who considered more than 1 plan or didn't say how many plans they considered; n = 571 (note: includes those who said only one factor was "extremely important")

	Total
The monthly premium costs	17
The deductibles and copays	10
The choice of doctors and hospitals	11
The range of benefits or a specific benefit covered	9
Recommendations from friends or family	2
None of these are extremely important	47
Combination/all	3
None of these/something else	*
Don't know/refused	1

55. Regardless of when you purchased or signed up for your current health plan, did your coverage under the plan take effect BEFORE January 1, 2014 or did it take effect ON or AFTER January 1, 2014?

Based on total who have purchased their plan outside the state/federal marketplace, excluding those who have signed up for coverage that hasn't started yet; n = 388

	Total
Before Jan 1, 2014	63
On or after Jan 1, 2014	36
Don't know/refused	1

S2/35/36/55. Combo Table based on total

	Total
ACA compliant plans (brought through state/federal marketplace, recently signed up but coverage hasn't started yet, or coverage took effect on or after Jan 1, 2014)	68
Non-ACA compliant plans (coverage took effect before Jan 1, 2014)	31
Undetermined	1

56. How long have you been covered by your current health insurance PLAN? [IF NECESSARY: If you switched plans with the same insurer, this may be less time than you have been covered by your current insurance company.]

Based on total whose coverage took effect before Jan 1, 2014 or they dk/ref when it took effect; n = 254

	Total
Less than 6 months	8
6 months to less than a year	13
One year to less than 2 years	11
2 years or more	66
Don't know/refused	1

55/56. Combo Table based on total

	Total
Plan took effect before Jan 1, 2014 or dk/ref	32
Been covered less than 6 months	3
Been covered 6 months to less than a year	4
Been covered one year to less than 2 years	4
Been covered 2 years or more	21
Don't know/refused	*
Plan took effect on or after Jan 1, 2014 (including thos who recently signed up and who purchased through a state/federal exchange)	68

(ROTATE VERBIAGE IN PARENS)

57. Is the monthly premium amount you now pay for health insurance (higher) than you were paying one year ago, (lower) than you were paying one year ago, or the same as you were paying one year ago?

Based on total who have been covered by the same plan for 1 year or more; n = 199

	Total
Higher	44
Lower	9
The same as you were paying one year ago	44
Don't know/refused	2

(ASK Q.58 IF Q.57 = 1 OR 2)

58. Can you tell me approximately how much you were paying for your monthly health insurance premium one year ago?

Based on total who have been covered by the same plan for 1 year or more and say premium was higher or lower than what they now pay; n = 114

	Total
\$1-\$201	28
\$201-\$500	29
\$501+	21
Don't know	19
Refused	3

59. To the best of your knowledge, is your current health plan a bronze, silver, gold or platinum plan?

Based on total in ACA compliant plans; n = 488

	Total
Bronze	21
Silver	29
Gold	7
Platinum	7
None of these (vol)	4
Don't know	30
Refused	1

60. Before you began coverage under your CURRENT health insurance plan, were you covered by a DIFFERENT plan you purchased yourself, were you covered by an employer, by COBRA, did you have Medicaid or other public coverage, or were you uninsured? [IF NECESSARY: We're asking about your insurance status immediately before you began coverage under your current plan.] [IF NECESSARY: If respondent has signed up for coverage but it hasn't started yet, say "This question would be about your CURRENT health insurance status"]

	Total
Was uninsured	42
Covered by a different plan you purchased yourself	21
Covered by an employer	19
Had Medicaid or other public coverage	8
Covered by COBRA	3
Covered by parents (vol.)	2
Covered by family member (non-specific) (vol.)	*
Military/VA (vol.)	*
Same coverage/no change (vol.)	1
Had coverage from some other source	1
Don't know/refused	2

61. How long were you uninsured before you began purchasing health insurance on your own? (READ LIST IF NECESSARY. ENTER ONE ONLY)

Based on total who were previously uninsured; n = 282

	Total
Less than three months	7
3 months to less than 1 year	16
1 year to less than 2 years	9
2 years to less than 5 years	23
5 years or more	44
Don't know/refused	1

62. What is the **main** reason you were uninsured before you began purchasing health insurance on your own? (DO NOT READ LIST. ENTER ONE ONLY)

Based on total who were previously uninsured; n = 282

	Total
Too expensive	49
Self-employed/no access to employer coverage	15
Didn't think you needed coverage	13
Unemployed/in-between jobs	5
Didn't know how to get it	4
Couldn't get coverage due to poor health/illness/age	3
Job did not offer insurance	2
Other	8
Don't know/refused	2

63. Did you decide to buy your own health insurance because of the health care law, or do you think you would have gotten insurance anyway, even without the law? (ENTER ONE ONLY)

Based on total in ACA compliant plans who were previously uninsured; n = 228

	Total
Got insurance because of the law	69
Would have gotten it anyway	29
Don't know/refused	2

(ROTATE VERBIAGE IN PARENS)

64. Do you think the range of health care services covered under your current insurance plan are (better), (worse), or about the same as your previous plan?

Based on total who have been covered by current plan for 6 months or less and who were not previously uninsured; n = 291

	Total
Better	28
Worse	26
About the same	42
Don't know/refused	4

(ROTATE VERBIAGE IN PARENS)

65. Compared with your previous health plan, do you think your current plan offers you (more) financial protection, (less) financial protection or about the same level of financial protection if you need health care?

Based on total who have been covered by current plan for 6 months or less and who were not previously uninsured; n = 291

	Total
More	26
Less	26
About the same level	43
Don't know/refused	5

(ROTATE VERBIAGE IN PARENS)

67. Do you think your current plan offers you (more) choice or (less) choice of primary care doctors than your previous plan, or is it about the same?

Based on total who have been covered by current plan for 6 months or less and who were not previously uninsured; n = 291

	Total
Less	27
More	13
About the same	56
Don't know/refused	4

(ROTATE VERBIAGE IN PARENS)

67a. Do you think your current plan offers you (more) choice or (less) choice of specialists, such as cardiologists and orthopedists, than your previous plan, or is it about the same?

Based on total who have been covered by current plan for 6 months or less and who were not previously uninsured; n = 291

	Total
Less	24
More	12
About the same	56
Don't know/refused	8

(ROTATE VERBIAGE IN PARENS)

68. Do you think your current plan offers you (more) choice or (less) choice of hospitals than your previous plan, or is it about the same?

Based on total who have been covered by current plan for 6 months or less and who were not previously uninsured; n = 291

	Total
Less	18
More	14
About the same	63
Don't know/refused	5

(ROTATE VERBIAGE IN PARENS)

INSERT "after tax credits" IF Q.23 = 1

69. Is the monthly premium amount you pay (after tax credits) for your CURRENT plan (higher) or (lower) than what you paid for your previous plan, or is it about the same?

Based on total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves; n = 129

	Total
Higher	39
Lower	45
About the same	17
Don't know/refused	--

70. Can you tell me approximately how much your monthly health insurance premium was under your previous plan?

Based on total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves and say their previous premium was higher or lower, or the same; n = 129

	Total
\$1-\$200	17
\$201-\$500	40
\$501+	32
Don't know	11
Refused	1

71. How many people, including yourself, were covered under your previous health care plan?

Based on total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves and give a premium amount for their prior plan; n = 116

	Total
1	41
2	25
3	10
4+	24
Don't know/refused	--

71a. How many of those people were children under age 19?

Asked of total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves and give a premium amount for their prior plan and say prior plan covered more than 1 person (sample size insufficient to report)

(ROTATE VERBIAGE IN PARENS)

72. Is the amount of your annual deductible under your CURRENT plan (higher) or (lower) than the deductible under your previous plan, or is it about the same? [IF NECESSARY: Deductible is the amount you have to pay yourself before your insurance plan will start paying any part of your medical bills.]

Based on total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves; n = 129

	Total
Higher	32
Lower	32
About the same	31
Don't know/refused	5

73. Can you tell me approximately what your annual deductible was under your previous plan?

Based on total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves and annual deductible was higher/lower/about the same; n = 122

	Total
\$0/No deductible	6
\$1-\$999	8
\$1000-\$2499	25
\$2500-\$4999	19
\$5000+	24
Don't know	17
Refused	*

74. Under your previous plan, was that a FAMILY deductible, meaning you had to spend that amount on your entire family's medical care before the insurance company began to pay, or was it a PER PERSON deductible, meaning that you had to spend that amount on care for any one person before the insurance company would begin to pay for that person's care?

Asked of total who have been covered by current plan for 6 months or less and who were previously covered by a different plan that they purchased themselves and say annual deductible was higher/lower/about the same and previous plan covered more than 1 person and the deductible amount was \$1+ (sample size insufficient to report)

INSERT "In the past 12 months" IF Q.56 = 3 OR 4

INSERT "Since you've had your current health plan" IF Q.56 = 1, 2, D, OR R OR NOT ASKED

INSERT "or another family member covered by your plan" IF Q.20 = 2

75. (In the past 12 months,/Since you've had your current health plan), have you [or another family member covered by your plan] (INSERT), or not?

Based on total excluding those who have signed up for coverage that hasn't started yet; n = 685

	Yes, have	No, have not	Don't know/refused
a. Visited a doctor or other health care provider for routine medical care or a check-up	52	47	1
b. Visited a doctor or other health care provider for a specific illness or injury	37	63	1
c. Been a patient in a hospital	14	86	1
d. Filled a prescription	54	45	1

INSERT "over the past twelve months" IF Q.56 = 3 OR 4

INSERT "since you've had your current health plan" IF Q.56 = 1, 2, D, OR R OR NOT ASKED

INSERT "or another family member covered by your plan" IF Q.20 = 2

76. Was there a time [over the past twelve months/ since you've had your current health plan] when you [or another family member covered by your plan] needed medical care, but did not get it because of the cost, or not?

Based on total excluding those who have signed up for coverage that hasn't started yet; n = 685

	Total
Yes, there was	14
No, there was not	84
Don't know/refused	1

79. In the past 12 months, have you been told by an insurance company that a health plan you were covered by was being cancelled, or not?

	Total
Yes, have	15
No, have not	84
Was told that it was being cancelled but later told I could keep it (vol.)	*
Don't know/refused	1

80. Do you happen to remember what month that was? (IF NECESSARY: when you found out your health plan was being cancelled)?

Based on total who have been told by an insurance company that their health plan was being cancelled; n = 125

	Total
January, 2014	7
February, 2014	7
March, 2014	5
April, 2013	2
May, 2013	1
June, 2013	--
July, 2013	1
August, 2013	1
September, 2013	15
October, 2013	22
November, 2013	10
December, 2013	11
Don't know/refused	18

81. Did the insurance company tell you that your plan was being cancelled because of the health care law sometimes called Obamacare, did they tell you it was being cancelled for some other reason, or did they not tell you the reason it was being cancelled?

Based on total who have been told by an insurance company that their health plan was being cancelled; n = 125

	Total
Because of the health care law	66
For some other reason	14
Did not tell the reason	18
Don't know/refused	2

79/81. Combo table based on total

	Total
Told by an insurance company that their health plan was being cancelled	15
Was told it was because of the health care law	10
Was told it was for some other reason	2
Did not tell the reason	3
Was not told by an insurance company that their health insurance was being cancelled	84
Was told it was being cancelled but later told they could keep it	*
Don't know/refused	1

DEMOGRAPHICS:

S14. Interviewer: record gender. If unclear ask: What is your gender?

	Total
Male	50
Female	50

Z-7 What is your age?

Z-7a Could you please tell me if you are ...?

	Total
18-29	29
30-49	35
50-64	35
Refused	*

D1. In general, would you say your health is excellent, very good, good, fair, or poor?

	Total
Excellent	24
Very good	31
Good	30
Fair	11
Poor	3
Don't know/refused	1

D2. Does any disability, handicap, or chronic disease keep you from participating fully in work, school, housework, or other activities?

	Total
Yes	14
No	85
Don't know/refused	1

INSERT "or another family member covered by your plan" If current plan covers other family members

D3. In general, the term "pre-existing condition" is used by insurance companies to describe an illness or medical condition that a person had before they began looking for insurance. For example, if you were looking to buy health insurance but had a history of asthma, diabetes or high blood pressure, those would be considered pre-existing conditions, along with illnesses such as cancer. Given that definition, would you say that you (or another family member covered by your plan) would be considered to have a "pre-existing condition" of some sort, or not?

	Total
Yes, someone has pre-existing condition	38
No, no one has pre-existing condition	60
Don't know/refused	1

Z-2. Are you: (READ LIST)

	Total
Single, that is never married	34
Single, living with a partner	9
Married	40
Separated	2
Widowed	3
Divorced	11
Refused	1

Z-4. Currently, are you yourself employed full-time, part-time, or not at all? (INTERVIEWER NOTE: If respondent asks to define "full-time" please define as 30 or more hours per week)

	Total
Full-time	46
Part-time	23
Not employed	31
Retired	7
A homemaker	6
A student	7
Temporarily unemployed	9
Disabled/handicapped	2
Other	1
Refused	--

D6. Are you self-employed, or do you work for someone else? (IF R SAYS THEY HAVE MULTIPLE JOBS: "Thinking about the job you spend the most time at...")

Based on total who are employed; n = 501

	Total
Self-employed	35
Work for someone else	64
Don't know/refused	1

Z-4/D6. Combo Table based on total

	Total
Employed	69
Self-employed	24
Work for someone else	44
Not employed	31
Refused	--

(ROTATE 1-2)

Z-11a Generally speaking, do you usually think of yourself as: NOTE: If respondent gives answer such as: "conservative, liberal, vote for best man" Probe: Would that be Republican, Democrat, or independent?

	Total
A Republican	17
A Democrat	34
An independent	40
Other	1
None/no affiliation	*
Don't know/refused	7

(PN: ROTATE ITEMS IN PARENS IN SAME ORDER AS D8)

D10. Do you LEAN more towards the (Republican Party) or the (Democratic Party)?

Based on total who do not consider themselves Republicans or Democrats; n = 348

	Total
Republican	21
Democratic	30
Independent/don't lean to either party	23
Other party	1
Don't know/refused	12

Z-11a/D10. Leaned Party Table based on total

	Total
Republican	17
Lean Republican	10
Independent/don't lean	12
Lean Democrat	15
Democrat	34
Other	7
Don't know/refused	6

(ROTATE 1-5/5-1)

D4. Generally speaking, would you describe your political views as...?

	Total
Very conservative	13
Somewhat conservative	21
Moderate	27
Somewhat liberal	20
Very liberal	13
Don't know/refused	6

D12. Do you consider yourself to be a supporter of the Tea Party movement, or not?

	Total
Yes, supporter of Tea Party movement	14
No, not a supporter of Tea Party movement	74
Don't know/refused	12

D13. Are you registered to vote at your present address, or not?

	Total
Yes	74
No	26
Don't know/refused	1

Z-8 What is the last grade of school you completed? (DO NOT READ LIST)

	Total
Less than high school graduate	8
High school graduate	32
Some college	25
Graduated college	20
Graduate school or more	11
Technical school/other	3
Refused	1

Z-10 Are you of Hispanic origin or background?

	Total
Yes	13
No	87
Don't know/refused	*

CO-1 Were you born in the United States, the island of Puerto Rico, or in another country?

Based on total Hispanics; n = 72

	Total
United States	60
Puerto Rico	--
Another country	36
Don't know/refused	4

Z-10/CO-1 Combo Table based on total

	Total
Hispanic	13
Born in the United States	8
Born in Puerto Rico	--
Born in another country	5
Non-Hispanic	87
Don't know/refused	*

Z-11 Would you consider yourself to be White, Black or of some other race? If "other" say: "I'm not referring to your nationality. I just want to know if you consider yourself white or black." If respondent won't pick one, then enter code for "OTHER"

Race/Ethnicity Summary Table based on total

	Total
White non-Hispanic	63
Black non-Hispanic	13
Hispanic	13
Asian	4
Native American	1
Native Hawaiian	*
Mixed	4
Other	*
Don't know/refused	2

D17. How many dependent children do you have, if any? [INTERVIEWER NOTE: If respondent asks to clarify what “dependent children” means, say “Any child who is dependent on you for support, or who you claim as a dependent on your tax return”]

	Total
None	65
1	15
2	13
3	3
4	1
5	*
6	*
7+	*
Don't know/refused	1

If family size could not be calculated from previous questions, the following questions were asked:

D18. Besides yourself, how many people are in your family, meaning your spouse and any dependent children? [INTERVIEWER NOTE: If respondent asks to clarify what “dependent children” means, say “Any child who is dependent on you for support, or who you claim as a dependent on your tax return”]

D19. Does anyone else, such as a parent, claim you as a dependent on their tax return? *(asked of those under age 30 who are not married and not employed)*

D20. Is the parent or person who claims you as a dependent married, or not? (INTERVIEWER NOTE: If R says their parents are married but not to each other, code as “1: Married”) (INTERVIEWER NOTE: If the R is not claimed by their parent, ask about the person claiming them as a dependent) *(asked of those who say someone else claims them as a dependent)*

D21. Besides yourself, how many other dependent children (do/does) your (parents/parent) have? (INTERVIEWER NOTE: If the R is not claimed by their parent, ask about the person claiming them as a dependent) *(asked of those who say someone else claims them as a dependent)*

FPL QUESTION

FAMILY SIZE VARIABLE CALCULATED AS FOLLOWS:

IF Q.Z-2=3: FamilySize= {2+D17}

IF Q.Z-2=1-2 OR 4-6: FamilySize= {1+ D17}

IF Q.D18=(0-16): FamilySize = {1 +D18}

IF Q.D18=D,R: FamilySize = {2}

IF Q.D19=1: FamilySize = {1+ ("2" IF Q.D20=1 OR "1" IF Q.D20=2, D, R) +(Q.D21 OR "0" IF Q.D21=DD OR RR)}

IF Q.D19=2: FamilySize = {1}

IF Q.D19=D, R: FamilySize = {2}

	100%	AMT1 (138%)	AMT2 (250%)	AMT3 (400%)
FamilySize	Poverty guideline			
1	\$11,490	\$16,000	\$29,000	\$46,000
2	\$15,510	\$21,000	\$39,000	\$62,000
3	\$19,530	\$27,000	\$49,000	\$78,000
4	\$23,550	\$32,000	\$59,000	\$94,000
5	\$27,570	\$38,000	\$69,000	\$110,000
6	\$31,590	\$44,000	\$79,000	\$126,000
7	\$35,610	\$49,000	\$89,000	\$142,000
8	\$39,630	\$55,000	\$99,000	\$159,000
9	\$43,650	\$60,000	\$109,000	\$175,000
10	\$47,670	\$66,000	\$119,000	\$191,000
11	\$51,690	\$71,000	\$129,000	\$207,000
12	\$55,710	\$77,000	\$139,000	\$223,000

(IF FAMILYSIZE=1, INSERT FIRST VERBIAGE IN PARENS "PERSONAL" AND DO NOT INSERT BRACKETS)
 (IF MARRIED OR HAS CHILDREN OR IS A DEPENDENT (Z-2=3 OR D17=1+ OR D18=1+ OR D17=1), INSERT SECOND VERBIAGE IN PARENS "FAMILY" AND INSERT BRACKETS)
 (IN BRACKETS: INSERT "AND your spouse" IF married [Q.Z-2=3], INSERT "and your dependent children" if any dependent children [Q.D17=1+], INSERT "AND your spouse and/or any dependent children" [Q.D18=1-17, R], [PN: INSERT "AND your {parents/parent}" if claimed [D19=1], INSERT "AND any other dependent children of your {parents/parent}" if parents have other children [D21=1+], INSERT "AND your {parents/parent} AND/OR any other dependent children of your {parents/parent}" IF don't know [D21=D, R OR D21=D, R]
 (INSERT FIRST VERBIAGE IN "{}" IF D20=1; INSERT SECOND VERBIAGE IN "{}" IF D20=2, D, R)

D22. To help us describe the people who took part in our study, it would be helpful to know which category best describes your (personal/family) income last year before taxes. [Family income only includes income from you yourself, (AND your spouse), (and your dependent children) (AND your spouse and/or any dependent children), (AND your {parents/parent}), (AND any other dependent children of your {parents/parent}), (AND/OR any other dependent children of your {parents/parent})]. Was your total (personal/family) income in 2013 from all sources, and before taxes, less than (AMOUNT 1), at least (AMOUNT 1) but less than (AMOUNT 3) or (AMOUNT 3) or more? [INTERVIEWER: IF RESPONDENT REFUSES: Your responses are strictly confidential and are not attached to any identifying information. It is important for us to know this information to help us describe people who took part in our study.] [INTERVIEWER: IF RESPONDENT SAYS THEY ARE NOT SURE, PROBE: Can you estimate?]

D22a. Is that less than (AMOUNT 2) or (AMOUNT 2) or more? (INTERVIEWER NOTE: PLEASE READ NUMBER AMOUNTS SLOWLY AND CAREFULLY)¹

	Total
Less than (138%)	32
At least (138%) but less than (400%)	37
At least (138%) but less than (250%)	21
At least (250%) but less than (400%)	15
At least (138%) but less than (400%), unspecified	1
(400%) or more	20
Don't know/refused	11

REGION

	Total
Northeast	17
North Central	24
South	34
West	26

METRO STATUS

	Total
Urban	26
Suburban	53
Rural	21

¹ In order to group people according to income as a percentage of the federal poverty level (FPL), which is tied to an individual's income as well as the size of their family, respondents were first asked a series of questions to determine their family size. These results were then used to plug different dollar values into a question about last year's family income. Self-reported income on the survey was lower than we expected for this group. Research has shown that respondents tend to under-report their income in surveys (see, for example, Moore et. al "Income Measurement Error in Surveys: A Review," available at <http://beta.census.gov/srd/papers/pdf/sm97-05.pdf>). The fact that respondents were asked about their income in the previous year may also be a factor in the lower-than-expected self-reported values. Since this group includes many people who are self-employed or own a small business, their incomes are likely to fluctuate more than people with employer coverage, so prior year's income may not necessarily match up with current income.

SCREENER

S0. Confirm ages 18-64

OMNIBUS RESPONDENTS WERE READ QUESTIONS HE-1 AND HE-2, OTHER RESPONDENTS WERE READ QUESTION S1

HE-1 Do you have health insurance?

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

(IF HE-1=D,R TERMINATE)

(IF HE-1=2 GO TO S10)

HE-2 How do you obtain your health insurance? Is it...?

- 1 Through your or your spouse's employer
- 2 Directly from a health plan or insurance company or a state or federal marketplace
- 3 Through public programs, such as Medicare or Medicaid
- 4 Not currently insured (vol.)
- 5 Other
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused/prefer not to answer

(IF HE-2=1,3,D,R TERMINATE)

(IF HE-2=5 GO TO S3)

(IF HE-2=4 GO TO S10)

S1. (Thinking about how you get your health insurance/And just to confirm): I am going to read a few common types of health insurance. For each one, please tell me "yes" if you currently have it and "no" if you don't. How about [INSERT]?

- 1 Yes, currently have it
- 2 No, do not have it
- 3 You do not have any kind of health insurance
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused/prefer not to answer

- a. A health plan you get through an employer or union, or through a family member's employer or union
- b. [State Medicaid Plan Name], also called Medicaid
- c. Medicare
- d. A military health care plan, such as TRI-CARE, CHAMPUS, or CHAMP-VA
- e. A plan you purchased yourself either from an insurance company or a state or federal marketplace like healthcare.gov or [IF STATE MARKETPLACE: INSERT STATE-SPECIFIC NAME]
- f. (IF 18-25) A plan through one of your parents
- g. Some other kind of insurance I haven't already mentioned (SPECIFY): _____

(IF S1a OR S1b OR S1c OR S1d=1 OR S1f = 1, TERMINATE)

(IF S1e=1 GO TO S10)

(ASK S2 IF ALL ITEM S1a THROUGH S1g = 2,D,R OR IF ANY ITEM S1a THRU S1g=3)

S2. Have you signed up for or purchased health insurance coverage that will begin in the next month, either through an insurance company or a state or federal marketplace like healthcare.gov or [IF STATE MARKETPLACE: INSERT STATE-SPECIFIC NAME]?

INTERVIEWER NOTE: IF RESPONDENT SAYS THEY STARTED THE PROCESS OF SIGNING UP BUT HAVEN'T COMPLETED IT, CODE AS 2. IF THEY SAY THEY HAVE SIGNED UP FOR COVERAGE BUT HAVEN'T PAID THEIR FIRST PREMIUM YET, CODE AS 1.]

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

(IF S2=1 GO TO S11)

(IF S2=2, D, OR R, TERMINATE)

(ASK S3 IF S1g=1 OR HE-2=5):

S3. Is that a plan you purchased directly from an insurance company, through a health insurance broker, or from a state or federal health insurance marketplace like healthcare.gov or [IF STATE MARKETPLACE: INSERT STATE-SPECIFIC NAME], or not?

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

(ASK S4 IF S3 = 2 or D or R)

S4. Is it a plan purchased through a trade association, or not?

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

(IF Q.S4 = 2 OR D OR R, TERMINATE)

(ASK Q.S5 IF Q.S4 = 1)

S5. Do you pay the entire premium yourself, or not?

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

(IF Q.S5 = 2 OR D OR R, TERMINATE)

(ASK Q.S10 IF Q.S1e = 1 OR Q.S3 = 1 OR Q.S5 = 1)

S10. Do you purchase your health insurance coverage from a college or university where you or your spouse are enrolled as a student?

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

(ASK Q.S10a IF Q.S10=1)

S10a. Does your insurance cover health services received outside the university setting, or is it only good for services received on the college or university campus?

- 1 Covers health services received outside the university setting
- 2 Only good for services received on the college or university campus
- D (DO NOT READ) Don't know

R (DO NOT READ) Refused

(IF Q.S10a = 2 OR D OR R, TERMINATE AS TQS10a)

(IF Q.S10a = 1, GO TO Q.S14)

(ASK Q.S11 IF Q.S2 = 1 OR Q.S10 = 2, D, OR R OR Q.S10a = 1)

S11. Are you or your spouse a small business owner, or not?

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

(ASK Q.S11a IF Q.S11 = 1)

S11a. Is the health insurance that you purchase for yourself part of a plan that also covers non-related employees of your business, or is the plan just for yourself and your family?

- 1 Also covers non-related employees of your business
- 2 Just for yourself and your family
- D (DO NOT READ) Don't know
- R (DO NOT READ) Refused

(IF Q.S11a = 1 OR D OR R, TERMINATE)

(ASK Q.S12 IF Q.S11 = 2, D, OR R OR Q.S11a = 2)

S12. Is the health insurance that you purchase yourself an extension of coverage that you previously got through an employer, commonly called COBRA?

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

(IF Q.S12 = 1 OR D OR R, TERMINATE)



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