



2025 Vermont Household Health Insurance Survey:

December 9, 2024

**Prepared for:
Vermont Department of Health**

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I. Survey Lead-in Statement, Introduction, Respondent Selection

INTERVIEWER PERSUADER STATEMENT

GENERAL RELUCTANCE:

Your participation in this survey is very important. We are doing this study on behalf of the Vermont Department of Health to help the state learn more about health insurance for Vermont residents and their access to care. That's why it is so important to hear from your household.

STUDY LENGTH

The study will take about 25 minutes, depending on the size of your household. Will you help us?

HOW WAS I SELECTED

Your telephone number was selected at random. For our results to be accurate, it is very important that we interview all the people selected at random. Your participation will make this study more accurate. Will you help us?

If you would like to find out more about our study or if you would like to opt out of future calls, you can visit vthealthsurvey.com or call 1-800-293-1538 ext. 1800.

LEAD-IN STATEMENT

LEAD

Hello. My name is _____ and I'm calling on behalf of the Vermont Department of Health.

We are working on a study about health care and health insurance in Vermont. Will you help us?

First, is this a residence?

INTS READ AS NEEDED: Your participation counts for a lot because you represent many others in your community. Your information is strictly confidential. This is not a sales call.

- 11 YES
- 15 NOT NOW, CALL BACK [Wait - Schedule Time]
- 17 OTHER
- 19 CONTACT ONLY
- 21 BUSINESS
- 23 LANGUAGE
- 25 INFIRM
- 27 GROUP QUARTERS, INSTITUTION (DORMS)
- 29 WRONG NUMBER
- 31 HANG UP
- 33 NOT AVAILABLE DURING DATA COLLECTION PERIOD
- 88 WILL NOT HELP, HOUSEHOLD REFUSAL
- 89 WANT MORE INFORMATION ABOUT STUDY

INFORMATION SCREEN FOR INTERVIEWERS
INFOQ

GENERAL RELUCTANCE:

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ASK ONLY IF % OF RESPONDENTS AGE 65 EXCEEDS % IN POPULATION
AGESCRN

Is anyone who primarily lives in your household under the age of 65?

1 YES

2 NO (THANK & TERM)

8 DK (THANK & TERM)

9 REF (THANK & TERM)

RES1

Is this a...

MESSAGE TO INTERVIEWER: READ OPTIONS AND SELECT ONE

- 1 Private residence where SOMEONE lives at least 6 months of the year
- 2 Vacation residence or vacation rental? (THANK AND TERM)
- 3 An institutional residence? (THANK AND TERM)
- 4 A group home? (THANK AND TERM)
- 7 An unhoused person
- 5 NONE OF THESE (THANK AND TERM)
- 6 DO NOT LIVE IN VERMONT (THANK AND TERM)
- 8 DON'T KNOW (THANK AND TERM)
- 9 REFUSED (THANK AND TERM)

RES2

Is your primary residence located in Vermont?

- 1 YES
- 2 NO (THANK AND TERM)
- 8 DK (THANK AND TERM)
- 9 REF (THANK AND TERM)

PHONE1

Did I reach you on a cell phone?

PROMPT: By cellular telephone we mean a telephone that is mobile and usable outside of your neighborhood.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK IF PERSON IS ON A CELL PHONE (PHONE1 = YES)

PHONE3

Are you 18 years of age or older?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

**ASK OF THOSE ON A CELL PHONE
PHONE2**

Your safety is important to me. Are you in a location where talking on the phone might distract you or jeopardize your safety and/or confidentiality?

IF YES: I will arrange to call you at another time. Is there a better time I can reach you?

INTS: IF RESPONDENT INDICATES THERE IS A BETTER NUMBER TO REACH THEM, SELECT OPTION 3

Thank you and goodbye.

- 1 YES (R GIVES SPECIFIC TIME)
- 2 NO (R DOES NOT GIVE SPECIFIC TIME)
- 3 CALL BACK AT A DIFFERENT NUMBER

- 8 DK
- 9 REF

SEL1

I'd like to talk with the adult who knows the most about the HEALTH INSURANCE coverage of the people living there.
Is that you?

PROMPT: This would include the type of health insurance coverage, where each person gets their health insurance, and how much is paid for the health insurance.

- 1 YES, SPEAKING
- 3 NO, SOMEONE ELSE
- 5 WANT MORE INFORMATION ABOUT STUDY

- 8 DK
- 9 REF

FND1

Is there someone who can help you answer the questions?

IF NO, GET A TIME WHEN THEY MIGHT BE AVAILABLE AND
SCHEDULE A CALLBACK

- 1 YES
- 3 NO (CALLBACK)
- 8 DK
- 9 REF

SELR

Is this person available now?

- 1 YES (ASK RPH)
- 2 SPEAKING (ASK PH2)
- 3 NOT AVAILABLE NOW - SCHEDULE CALLBACK
- 4 OTHER
- 5 LANGUAGE
- 6 INFIRM
- 7 UNAVAILABLE DURING DATA COLLECTION
- 9 REF

RPH

Hello. My name is _____ and I'm calling on behalf of the Vermont Department of Health.

We are working on a study about health care and health insurance in Vermont.

Do you have some time to answer some questions for me?

INTS READ AS NEEDED: Your participation counts for a lot because you represent others and are important to understanding community needs. Your information is strictly confidential. This is not a sales call.

IF ASKED: The survey will take about 25 minutes depending on answers.

MESSAGE TO INTERVIEWER: READ AS NECESSARY

- 1 YES
- 5 NO, NOT A GOOD TIME (SCHEDULE CALLBACK)
- 7 WANT MORE INFORMATION ABOUT STUDY
- 9 REF

PH2

Could you answer some questions for me now?

- 1 YES
- 5 NO, NOT A GOOD TIME - SCHEDULE CALLBACK
- 7 WANT MORE INFORMATION ABOUT STUDY
- 9 REF

**STATEMENT OF IMPLIED CONSENT
INTO**

T:

Thank you. I want to assure you that this study is confidential and the results of this study will be reported in combined form only.

If there are questions you do not wish to answer, let me know and we will skip them.

All calls are recorded.

My supervisor may listen in to evaluate my performance if that is all right with you.

- 1 PROCEED WITH STUDY
- 5 NOT A GOOD TIME, CALL BACK
- 9 REFUSED

**PERSUADER STATEMENT FOR INITIAL REFUSALS
PER**

GENERAL RELUCTANCE:

Your participation in this survey is very important. We are doing this study on behalf of the Vermont Department of Health to help the state learn more about health insurance for Vermont residents and their access to care. That's why it is so important to hear from your household.

STUDY LENGTH

The study will take about 25 minutes, depending on the size of your household. Will you help us?

HOW WAS I SELECTED

Your telephone number was selected at random. For our results to be accurate, it is very important that we interview all the people selected at random.

Your participation will make this study more accurate. Will you help us?

If you would like to find out more about our study or if you would like to opt out of future calls, you can visit vthealthsurvey.com or call 1-800-293-1538 ext. 1800.

- 1 AGREES TO COOPERATE
- 3 NOT A GOOD TIME, CALL BACK
- 4 RESPONDENT SOFT REFUSAL
- 5 RESPONDENT HARD REFUSAL
- 6 HOUSEHOLD SOFT REFUSAL
- 8 HOUSEHOLD HARD REFUSAL

MESSAGE LEFT ON ANSWERING MACHINE DISPOSITIONS
ANMACH

LEAVE MESSAGE ON IDENTIFIED RESIDENTIAL ANSWERING MACHINES
ON THE 1st and 3rd ATTEMPTS

Hello. My name is _____ and I'm calling on behalf of Vermont Department of Health.

We are working on a study about health care and health insurance in Vermont.

Another interviewer will be contacting your household in the next few days.

If you would like to find out more about our study or if you would like to opt out of future calls, you can visit vthealthsurvey.com or call 1-800-293-1538 ext 1800.

Thank you and goodbye.

INTS CODING FOR ANSWERING MACHINES

1 IDENTIFIED RESIDENTIAL ANSWERING MACHINE (YOU KNOW FOR CERTAIN)

2 UNKNOWN IF RESIDENTIAL ANSWERING MACHINE

II. Household Level Information

Q00

First we need to know a little about your household.

PROMPT IF RELUCTANT: We need this information to assure all Vermont residents are represented in the study.

Thank you for your patience.

HHQ01 (Q2)

Which county do you live in?

- 10 Addison
- 11 Bennington
- 12 Caledonia
- 13 Chittenden
- 14 Essex
- 15 Franklin
- 16 Grand Isle
- 17 Lamoille
- 18 Orange
- 19 Orleans
- 20 Rutland
- 21 Washington
- 22 Windham
- 23 Windsor
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

THESE ARE THE MOST COMMON TOWNS, OTHERS WILL BE ENTERED IN COMMENTS AND CODED

HH01a (Q3)

Which city or town do you live in?

[ASK FOR NEAREST TOWN FOR RURAL RESIDENTS].

- 10 BARRE TOWN
- 11 BENNINGTON
- 12 BRATTLEBORO
- 13 BURLINGTON
- 14 COLCHESTER
- 15 ESSEX TOWN
- 16 ESSEX JUNCTION, CITY OF ESSEX JUNCTION
- 17 HARTFORD
- 18 HINESBURG
- 19 JERICHO
- 20 MIDDLEBURY
- 21 MILTON
- 22 MONTPELIER
- 23 NEWPORT CITY
- 24 RICHMOND
- 25 RUTLAND
- 26 SHELBURNE
- 27 SOUTH BURLINGTON
- 28 SPRINGFIELD
- 29 ST. ALBANS
- 30 ST. JOHNSBURY
- 31 WATERBURY
- 32 WILLISTON
- 33 BARRE CITY
- 34 POULTNEY
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

HH02 (Q4)

What is your zip code?

INTS: ENTER LAST 4 DIGITS ONLY

INTS: IF ZIP CODE THEY GIVE YOU DOES NOT BEGIN WITH 0 ENTER 9998

5001-5999 ENTER NUMBER

8888 DK

9999 REF

**IDENTIFICATION OF HOUSEHOLD MEMBERS FOR SURVEY QUESTIONS
HHCOMP**

How many people currently live or stay at your household?

PROMPT: Include in this number, children, foster children, roomers, or housemates not related to you, college students living away while attending college and members of the armed forces, including National Guard members who are deployed but typically live in your household.

Do not include people who live or stay at another place most of the time, people in a correctional facility, nursing home, or residential facility, or people in the armed forces stationed somewhere else.

INTS: IF 9 OR MORE ASK: Is this a dorm or some other type of group quarters where people live together who are not related?

CODE AS 11 IF YES

INTS IF THEY REFUSE:

We need this information to ensure all people living in Vermont are represented in the study.

I want to reassure you that this study is completely confidential. Any potentially personally identifying information, like names or phone numbers, are never shared. All your information will always be combined with the responses we receive from thousands of other Vermont households.

Would you be willing to share with me the number of people living in your household?

1 - 8 ENTER NUMBER

9 9 OR MORE

10 GROUP QUARTERS, INSTITUTE (TERMINATE)

10 REFUSE TO SAY (TERMINATE)

HHCMP1

IF HHCOMP > 1

Next, it is important for us to know a little bit about the people living in your household so that we can understand how their health insurance works.

First, I'll need a way to refer to each person in the household. If you could, please give me some way to identify each of them one at a time. We could use first names or any other label as long as you can tell household members apart throughout the survey.

I'll ask for them one at a time.

IF HHCOMP = 1

Next, it is important for us to know a little bit about you so that we can understand how your health insurance works

[PRESS ENTER TO CONTINUE]

HHNAME

THIS IS PERSON [NUMBER] OF [HHCOMP]

FOR FIRST PERSON ASK:

Please tell me the first name of the person who owns or rents this house or apartment. Let me know if this is you

FOR ALL OTHERS ASK:

Please tell me (your name)/the name of the next member of the household.

INTS: IF THIS IS THE RESPONDENT ENTER "You"

INTS: ENTER THE NAME OF THE PERSON BELOW

IF RELUCTANT: If you'd rather not give names, just provide some way that you can tell household members apart.

PRESS ENTER AFTER ENTERING NAME

III. Person Level Demographics

DEM01

Next, I am going to ask a few questions about each member in the household.

IF A 1 PERSON HOUSEHOLD

Next, I am going to ask a few questions about you.

AGE1

What is PERSON's age?

MESSAGE TO INTERVIEWER: ENTER AS WHOLE NUMBER

0 IF UNDER ONE YEAR OLD

1 TO 96 ENTER AGE OF PERSON

97 97 OR GREATER

98 DK

99 REF

**ASK OF THOSE INDICATING DK OR REF TO AGE1
AGE2**

Can you tell the approximate age? Is it...
(READ RESPONSES)

IF STILL DK OR REF ASK: Is this a child or an adult?
IF AN ADULT SELECT 35
IF A CHILD SELECT 9

INTS: DO YOUR BEST TO GET THEM TO IDENTIFY AS A CHILD OR AND
ADULT

3 0 - 5 years old (ENTER 3)
9 6 - 13 years old (ENTER 9 - CHILD)
15 14 - 18 years old (ENTER 15)
21 19 - 23 years old (ENTER 21)
26 24 - 29 years old (ENTER 26)
F35 30 - 44 years old (ENTER 35)
50 45 - 64 years old (ENTER 50 - ADULT)
70 65 - 84 years old (ENTER 70)
85 85 years or older (ENTER 85)

GEND

What was PERSON's sex at birth? Was it male or female?

2 FEMALE
1 MALE

8 DK
9 REF

NTGEND

How does PERSON describe their gender identity?

MESSAGE TO INTERVIEWER: READ AND SELECT ONE

- 1 Female
- 2 Male
- 3 Non-binary
- 4 Uses a different term (SPECIFY)

- 8 DK
- 9 REF

ASK OF THOSE 16 AND OLDER

NTGEND2

Does PERSON consider themselves transgender?
(READ AS NEEDED)

IF ASKED ABOUT DEFINITION OF TRANSGENDER: Some people describe themselves as transgender when their gender identity is different than the sex they were assigned at birth. Their gender expression can be masculine, feminine, fluid, and/or not binary.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK OF THOSE 16 AND OLDER
NTGEND1

Which of the following best represents PERSON's sexual orientation?

PROMPT: READ IF NECESSARY: We ask this question in order to better understand the health and health care needs of people with different sexual orientations.

INTS: PLEASE SAY THE NUMBER BEFORE THE TEXT RESPONSE.
RESPONDENT CAN ANSWER WITH EITHER THE NUMBER OR THE
TEXT/WORD. IF THE RESPONDENT DOES NOT UNDERSTAND THE
QUESTION TOPIC, CODE AS 8

MESSAGE TO INTERVIEWER: READ RESPONSES INCLUDING NUMBER OF
RESPONSE AND SELECT ONE

- 10 1 Gay or Lesbian
- 11 2 Heterosexual
- 12 3 Bisexual or Pansexual
- 13 4 Queer
- 14 5 Questioning
- 15 6 Asexual
- 16 7 Two-Spirit/Indiqueer (only provide if race = American Indian or Alaska Native)
- 95 Uses a different term (SPECIFY)
- 98 DK
- 99 REF

ASK OF THOSE 18 AND OLDER
MAR

Is PERSON...

INT: CODE CIVIL UNIONS ARE CURRENTLY MARRIED

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE

- 1 Currently married (INCLUDING CIVIL UNION)
- 2 Widowed
- 3 Separated
- 4 Divorced
- 5 Never been married
- 6 Member of an unmarried couple

- 8 DK
- 9 REF

ASK OF THOSE 17 AND OLDER
EDU

What was the highest grade in school that PERSON has completed or the highest degree PERSON received?

MESSAGE TO INTERVIEWER: READ IF NEEDED:

- 1 LESS THAN HIGH SCHOOL
- 2 HIGH SCHOOL/GED
- 3 SOME COLLEGE/JUNIOR COLLEGE/ASSOCIATES DEGREE/TECHNICAL DEGREE
- 4 4 YEAR COLLEGE (BACHELORS DEGREE)
- 5 GRADUATE DEGREE (MASTERS/MA, MS)
- 6 GRADUATE DEGREE (PHD/MD/JD)

- 8 DK
- 9 REF

NRACE1

Which of the following would you say describes PERSON's racial or ethnic identity? I'm going to read a list of options. For each please tell me if that applies to PERSON.

INTS: IF YOU ENTER AS OTHER PROBE FOR SPECIFIC DETAILS

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 10 American Indian or Alaska Native
- 11 Asian
- 12 Black or African American
- 13 Hispanic or Latino/a/x
- 14 Middle Eastern or Northern African
- 15 Native Hawaiian or Pacific Islander
- 16 White
- 95 Some other category (SPECIFY)
- 98 DK
- 99 REF

**ASK OF THOSE SELECTING AMERICAN INDIAN OR ALASKA NATIVE IN NRACE1 (10)
NRACE2**

You mentioned that PERSON's racial or ethnic identity includes American Indian or Alaska Native. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 6 Abenaki
- 1 American Indian
- 2 Alaska Native
- 3 Canadian Inuit, Metis, or First Nation
- 4 Indigenous Mexican, Central American, or South American
- 5 Other American Indian or Alaska Native
- 8 DK
- 9 REF

**ASK OF THOSE SELECTING ASIAN IN NRACE1 (11)
NRACE3**

You mentioned that PERSON's racial or ethnic identity includes Asian. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 10 Asian Indian
- 11 Cambodian
- 12 Chinese
- 13 Communities of Myanmar
- 14 Filipino/a
- 15 Hmong
- 16 Japanese
- 17 Korean
- 18 Laotian
- 19 South Asian
- 20 Vietnamese
- 95 Some other Asian
- 98 DK
- 99 REF

ASK OF THOSE SELECTING BLACK OR AFRICAN AMERICAN IN NRACE1 (12)

NRACE4

You mentioned that PERSON's racial or ethnic identity includes Black or African American. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 1 African American
- 2 Afro-Caribbean
- 3 Ethiopian
- 4 Somali
- 5 Some other African American
- 6 Some other Black
- 8 DK
- 9 REF

ASK OF THOSE SELECTING HISPANIC OR LATINO/A/X IN NRACE1 (13)
NRACE5

You mentioned that PERSON's racial or ethnic identity includes Hispanic or Latino/a/x. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 5 Puerto Rican
- 6 Caribbean
- 1 Central American
- 2 Mexican
- 3 South American
- 4 Some other Hispanic or Latino/a/x
- 8 DK
- 9 REF

**ASK OF THOSE SELECTING MIDDLE EASTERN OR NORTHERN AFRICAN
IN NRACE1 (14)**

NRACE6

You mentioned that PERSON's racial or ethnic identity includes Middle Eastern or Northern African. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 1 Middle Eastern
- 2 Northern African
- 8 DK
- 9 REF

**ASK OF THOSE SELECTING NATIVE HAWAIIAN OR PACIFIC ISLANDER IN
NRACE1 (15)**

NRACE7

You mentioned that PERSON's racial or ethnic identity includes Native Hawaiian or Pacific Islander. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 1 CHamoru or Chamorro
- 2 Marshallese
- 3 Communities of the Micronesian Region
- 4 Native Hawaiian
- 5 Samoan
- 6 Soe other Pacific Islander
- 8 DK
- 9 REF

ASK OF THOSE SELECTING WHITE IN NRACE1 (16)

NRACE8

You mentioned that PERSON's racial or ethnic identity includes White. Does that include...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 1 Eastern European
- 2 Slavic
- 3 Western European
- 4 Other White
- 8 DK
- 9 REF

BORN1

Was PERSON born in the United States?

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE NOT BORN IN THE UNITED STATES...

BORN2

For how many years has PERSON lived in the United States?

0 LESS THAN ONE YEAR

1 - 96 ENTER NUMBER OF YEARS

97 97 OR MORE YEARS

98 DK

99 REF

IV. Family Unit Formation

ASK OF ALL BUT THE HEAD OF HOUSEHOLD
FAM1

What is PERSON's relationship to HEAD OF HOUSEHOLD ?

- 11 HUSBAND
- 12 WIFE
- 13 DOMESTIC PARTNER/CIVIL UNION PARTNER
- 14 CHILD, SON OR DAUGHTER - OWN/ADOPTED
- 15 STEPCHILD
- 16 FOSTER CHILD
- 17 GRANDCHILD
- 18 PARENT
- 19 MOTHER-IN-LAW/FATHER-IN-LAW
- 20 GRANDPARENT
- 21 BROTHER/SISTER
- 22 SON-IN-LAW/DAUGHTER-IN-LAW
- 23 STEP PARENT
- 24 STEP BROTHER/STEP SISTER
- 25 OTHER RELATIVE
- 26 NON RELATIVE/COHABITEE/ROOM-MATE/RENTER
- 99 DK OR REF

*ASK OF THOSE 18+ INDICATING THEY WERE MARRIED EXCEPT SPOUSE
OF HEAD OF HOUSEHOLD*
FAM2

Is/Are PERSON married to anyone who currently lives here or to someone
outside the household?

IF YES ASK: Which member of the household are they married to?

PERSON AGE GENDER (1=M 2=F) MARRIED? (1 = YES)

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

18 PERSON MARRIED TO SOMEONE OUTSIDE THE HH

77 PERSON IS NOT MARRIED/MARRIED TO SOMEONE UNDER 16

98 DK

99 REF

*ASK OF THOSE < 18 AND NOT CHILDREN OF THE PRIMARY FAMILY IN
THE HOUSEHOLD*

FAM3

Is anyone living here the parent or guardian of PERSON?

IF YES: Which member of the household?

PERSON	AGE
10 PERSON 1	
11 PERSON 2	
12 PERSON 3	
13 PERSON 4	
14 PERSON 5	
15 PERSON 6	
16 PERSON 7	
17 PERSON 8	
18 NO ONE IN HH IS THE PARENT/GUARDIAN	
98 DK	
99 REF	

ASK OF ALL CHILDREN WHO ARE NOT WARDS OF SOMEONE IN THE HH
TO FAM03 (ANY ANSWER > 17)

FAM3a

Who in the household is the main person taking care of PERSON?

- | PERSON | AGE |
|--------------------------------------|-----|
| 10 PERSON 1 | |
| 11 PERSON 2 | |
| 12 PERSON 3 | |
| 13 PERSON 4 | |
| 14 PERSON 5 | |
| 15 PERSON 6 | |
| 16 PERSON 7 | |
| 17 PERSON 8 | |
| 97 NO ONE IN HH TAKING CARE OF CHILD | |
| 98 DK | |
| 99 REF | |

**ASK OF THOSE WITH MORE THAN ONE FAMILY UNIT
UNITSCRN**

For the rest of the interview I'll ask you to give me health related information about everyone you listed. If there is anyone in the household you think you couldn't answer these questions about, please let me know now.

INTS: SELECT MEMBERS RESPONDENTS INDICATED THEY ARE NOT FAMILIAR WITH.

THEY MUST BE FAMILIAR WITH THE HEAD OF HOUSEHOLD!

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

18 FAMILIAR WITH EVERYONE

V. Insurance Coverage

INS01

Next, I am going to ask about different types of health insurance coverage.

By this I mean any program or plan that pays any part of hospital and doctor bills. For example, Medicare, Medicaid also known as Green Mountain Care, Dr. Dynasaur, Immigrant Health Insurance plan, or private insurance through an employer, private insurance purchased directly from an insurance company or private insurance purchased through Vermont's health insurance marketplace also known as Vermont Health Connect or the health insurance exchange.

Please do not include any health insurance plan that covers only ONE type of service like plans for dental care, cancer or prescription drugs.

PROMPT IF NEEDED:

Medicare is a NATIONAL health insurance program for people 65 years and older and for certain people with disabilities.

Medicaid provides health care coverage for low-income Vermonters from all walks of life. This includes working families, children, pregnant women, single adults, seniors and more. This includes Green Mountain Care and the Dr. Dynasaur program that provides coverage for children in low income families.

PRESS ENTER TO CONTINUE

INS02A-D

Are/is PERSON covered by ANY type of health insurance?

IF YES ASK: Is that...?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

- 10 Private health insurance (THRU EMPLOYER OR COMPANY LIKE BLUE CROSS AND BLUE SHIELD)
- 11 Medicare
- 12 Medicaid or Green Mountain Care
- 13 Dr, Dynasaur
- 14 Immigrant Health Insurance Plan
- 16 Military, Veterans, TRICARE or CHAMPVA
- 95 Some other type of insurance? [SPECIFY]
- 90 HEALTH CARE SHARE MINISTRY, MEDI SHARE
- 18 VT HEALTH CONNECT, HEALTH INSURANCE EXCHANGE, OBAMACARE
- 93 THROUGH THE STATE NOT AS STATE EMPLOYEE
- 94 SSI/SSDI/WELFARE/DISABILITY
- 21 INDIAN HEALTH SERVICES
- 97 NO INSURANCE COVERAGE
- 98 DK/REF

Coverage Verification Variables

ASK OF ALL INDICATING NO INSURANCE, DK, OR REF TO INS02
INS03

Just to be sure I have this right, PERSON does not have health insurance coverage. Is this correct?

IF PERSON IS COVERED BY INDIAN HEALTH SERVICES:

While covering health care expenses, Indian Health Services is not considered insurance so we do not consider this as insurance for the purposes of this survey

INTS: USE AS NEEDED:

Health insurance is any program or plan that anyone gets through employment or that anyone pays for directly, as well as any government programs like Medicare and the Vermont Health Connect that help pay medical bills.

INTS: IF THE RESPONDENT KNOWS THIS PERSON HAS HEALTH INSURANCE BUT DOESN'T KNOW ANY OTHER DETAILS, PLEASE SELECT 5.

- 1 CORRECT - NOT COVERED BY INSURANCE (GOTO INS03a)
- 2 NOT CORRECT IS COVERED BY INSURANCE (GOTO INS02)
- 5 THIS PERSON HAS INSURANCE BUT DOES NOT KNOW DETAILS
- 8 DK
- 9 REF

ASK IF PERSON ON PHONE DOES NOT KNOW ABOUT HEALTH
INSURANCE STATUS OF HEAD OF HOUSEHOLD (INS03 = 5,8,9)
INS03HHSKIP

I'm sorry but for this survey we need to speak with the person who knows about
the health care coverage of the person who owns or rents the home.

We need to speak with someone who knows if PERSON has health coverage.

Is there some who can help me?

- 1 YES, THE PERSON IS AVAILABLE NOW (GOTO INS01)
- 2 YES, PERSON IS NOT AVAILABLE NOW (SCHEDULE CALLBACK)
- 3 NO ONE KNOWS ABOUT PERSON (THANK AND TERMINATE)
- 8 DK (THANK AND TERMINATE)
- 9 REF (THANK AND TERMINATE)

ASK OF THOSE INDICATING YES TO INS03
INS03a

Does anyone else pay for PERSON's bills when they seek medical care?

IF YES ASK: who pays their medical expenses?

IF NO ASK: do you or other family members pay out of pocket?

Do you pay with your own money?

- 26 PAYS OUT OF POCKET WITH OWN MONEY
- 22 FAMILY PAYS OUT OF POCKET FOR ANY BILLS
- 25 THROUGH FREE CLINICS, FREE MEDICAL SERVICES
- 27 CHARITY ORGANIZATIONS, CHURCH
- 31 INDIAN HEALTH SERVICES
- 20 WORKERS COMPENSATION FOR SPECIFIC INJURY/ILLNESS
- 21 EMPLOYER PAYS FOR BILLS, BUT NOT AN INSURANCE POLICY
- 23 HEALTH INSURANCE (GOTO INS02)
- 40 ALTERNATIVE TO HEALTH INSURANCE, MEDICAL COST SHARING,
MEMBERSHIP PROGRAM,
DISCOUNT CARDS
- 95 OTHER (SPECIFY)
- 97 HAVE NO MEDICAL BILLS
- 98 DK
- 99 REF

ASK OF THOSE INDICATING THEY RECEIVE INSURANCE THROUGH SSI, THROUGH THE STATE, THROUGH WELFARE, OR THROUGH DISABILITY TO INS02

INS02a

How did PERSON apply for or receive the health insurance through the state? Did they obtain this insurance through Medicare, Medicaid, Vermont Health Connect, or some other way?

INTS: NEARLY ALL PEOPLE COVERED MENTIONING THESE PROGRAMS WILL BE COVERED BY MEDICAID.

IF THEY MENTION THE MILITARY: - SELECT 1 AND CODE AS 16 MILITARY IN INS02.

IF THEY MENTION THEY ARE GETTING THROUGH A PRIVATE COMPANY OR MENTION THE NAME OF AN INSURANCE COMPANY - SELECT 1 AND CODE INS02 AS 10 PRIVATE INSURANCE

IF THEY MENTION THEY GET INSURANCE AS A STATE EMPLOYEE, SPOUSE OR CHILD OF STATE EMPLOYEE, STATE RETIREE- SELECT 1 AND CODE INS02 AS 10 PRIVATE INSURANCE

IF THEY DO NOT MENTION ANY OF THESE - SELECT 2.

- 1 WILL GO BACK AND CORRECT TYPE OF INSURANCE
- 2 NO THIS IS CORRECT/NO FURTHER INFORMATION

NOTE UNLESS THERE IS A CLEAR INDICATION OTHERWISE ALL CASES WHERE RESPONDENT INDICATES THEY GET COVERAGE THROUGH SSI/ WELFARE, THROUGH THE STATE, OR THROUGH DISABILITY WILL BE TREATED AS IF THEY ARE COVERED UNDER MEDICAID OR MEDICARE BASED ON AGE FOR THE REMAINDER OF THE SURVEY

ASK OF THOSE INDICATING THEY RECEIVE INSURANCE THROUGH VERMONT'S HEALTH INSURANCE MARKETPLACE, VT HEALTH CONNECT, ALSO KNOWN AS THE VT HEALTH EXCHANGE,
INS02B

Vermont's health insurance marketplace, known as Vermont Health Connect is where Vermont residents can go to find health insurance. It also provides a way for residents to know whether they qualify for health insurance through Medicaid or through a private health insurance plan for which a monthly premium is paid. (By "premium" we mean your monthly insurance bill)

Do you know if PERSON is enrolled in Medicaid, also known as Green Mountain Care or Dr. Dynasaur or is PERSON is enrolled in a private health plan?

READ PROMPTS AS NEEDED:

Offered by the State of Vermont's Green Mountain Care program, Medicaid and Dr. Dynasaur are part of a family of low-cost and free health coverage programs for Vermonters.

The PRIVATE health plans available through Vermont Health Connect are organized into four "metal" categories: Bronze, Silver, and Gold, and Platinum. Catastrophic coverage is also available for residents under the age of 30, or who meet certain hardship conditions.

PROMPT: By "premium" we mean your monthly insurance bill.

- 1 PERSON ENROLLED IN MEDICAID OR DR. DYNASAUR
- 3 PERSON ENROLLED IN PRIVATE HEALTH INSURANCE PLAN
- 7 PERSON ENROLLED IN OTHER TYPE OF INSURANCE (GOTO INS02)
- 8 UNSURE

Medicare and Medicaid Questions For Verifications

MEDICARE CHECK FOR THOSE 65 AND OLDER ASK OF ALL 65 AND OLDER WHO DID NOT INDICATE MEDICARE COVERAGE

INS04

I noticed that PERSON is 65 or older and you indicated this person was NOT covered by Medicare.

READ AS NEEDED:

Medicare is federal health insurance for people 65 or older and people with disabilities and is run by the Social Security Administration. Medicare is different from Medicaid.

Is this correct?

- 1 YES – NOT COVERED BY MEDICARE
- 2 NO – PERSON IS COVERED BY MEDICARE

- 8 DK
- 9 REF

Medicare Check to Determine if Private Insurance is a Medicare Supplement

ASK OF ALL 65 AND OLDER AND INDICATED COVERED BY PRIVATE INSURANCE

NNINS05

You indicated PERSON<FILL1> covered by private insurance. Is this private insurance policy a PRIVATE Medicare supplement, a Medicare savings program, a Medicare Advantage Plan that helps pay your Medicare premiums or lowers your out of pocket costs OR is this another type of private insurance?

PROMPT: Medicare supplements such as plans offered by AARP, Blue Cross and Blue Shield, or MVP that help cover expenses not paid by PERSON's Medicare.

PROMPT: Medicare Advantage is an all in one alternative to Original Medicare. These bundled plans include Part A, Part B, and usually Part D. Most plans offer extra benefits that Original Medicare doesn't cover like vision, hearing, dental, and more.

PROMPT: Instances of private health insurance plans that ARE NOT Medicare supplements OR a Medicare Advantage Plan include those a person may receive if you are still working or receive from your employer as a part of your retirement.

- 1 MEDIGAP PLAN (ALSO CALLED "SUPPLEMENTAL INSURANCE")
- 2 MEDICARE SAVINGS PROGRAM (ALSO CALLED "QMB" "SLMB" "QI-1")
- 3 MEDICARE ADVANTAGE PLAN
- 4 NOT MEDICARE, ANOTHER TYPE OF PRIVATE INSURANCE

- 8 DK
- 9 REF

Medicare Verification

*ASK OF THOSE INDICATED COVERED BY MEDICARE (THOUGH NOT
DUALY COVERED BY MEDICAID AND MEDICARE) AND YOUNGER THAN
65*

INS06

Just to verify, is a PERSON covered by national MEDICARE, covered through the state's MEDICAID program or by both?

INTS: READ AS NEEDED: Medicare is a national health insurance program for people 65 years and older and for certain people with disabilities.

Offered by the State of Vermont's Green Mountain Care program, Medicaid and Dr. Dynasaur are part of a family of low-cost and free health coverage programs for Vermonters.

- 1 YES COVERED BY MEDICARE ONLY
- 2 COVERED BY BOTH MEDICARE AND MEDICAID (Including Green Mountain Care and Dr. Dynasaur)
- 3 COVERED BY MEDICAID ONLY (Including Green Mountain Care and Dr. Dynasaur)
- 8 DK
- 9 REF

Medicaid Verification

*ASK OF THOSE INDICATED COVERED BY MEDICAID (THOUGH NOT
DUALY COVERED BY MEDICAID AND MEDICARE) AND 65 AND OLDER*
INS08

Just to verify, is PERSON covered by the STATE MEDICAID program, covered through the national MEDICARE program, or by both?

INTERVIEWERS READ AS NEEDED:

Medicare is federal health insurance for people 65 or older and people with disabilities and is run by the Social Security Administration. Medicare is different from Medicaid.

Medicaid or Green Mountain Care is a state program that pays for medical insurance for certain individuals and families with low incomes and resources. It's for certain eligible seniors 65 or older and people who are blind or disabled.

- 1 COVERED BY MEDICAID ONLY
- 2 COVERED BY BOTH MEDICARE AND MEDICAID
- 3 COVERED BY MEDICARE ONLY
- 8 DK
- 9 REF

*ASK OF THOSE INDICATED COVERED BY MEDICARE AND 65 AND NOT
INDICATING PRIVATE INSURANCE COVERAGE*

NNINS09

Does PERSON have another insurance that helps pay your Medicare premiums or lowers your out of pocket costs when you go to the Doctor?

IF YES ASK: Is that...

MESSAGE TO INTERVIEWER: **READ RESPONSES AND SELECT ONE**

PROMPT: Medicare supplements such as plans offered by AARP, Blue Cross and Blue Shield, or MVP that help cover expenses not paid by Medicare.

PROMPT: Medicare Advantage is an all in one alternative to Original Medicare. These bundled plans include Part A, Part B, and usually Part D. Most plans offer extra benefits that Original Medicare doesn't cover like vision, hearing, dental, and more.

- 1 Medigap plan (also called "supplemental insurance")
- 2 Medicare savings program (also called "qmb" "slmb" "qi-1")
- 3 Medicare advantage plan
- 4 DOES NOT HAVE OTHER MEDICARE INSURANCE

- 8 DK
- 9 REF

*IF A PERSON IS IDENTIFIED AS HAVING A MEDICARE SUPPLEMENT, WE
ASK THEM THE SET OF QUESTIONS WE ALSO ASK THOSE WITH PRIVATE
HEALTH INSURANCE (BEGINNING AT INSP06) TO GET ADDITIONAL
INFORMATION ABOUT THE SUPPLEMENT*

VI. Private Insurance and Medicare Supplement Follow-up

ASK OF ALL INDICATED COVERED BY PRIVATE INSURANCE AND IF MORE THAN ONE PERSON IS COVERED BY PRIVATE INSURANCE

INSP01

A policy holder is the person who obtains their insurance through an employer, school, or a retirement plan. They may also purchase it directly through Vermont Health Connect. It may cover others in the family besides themselves.

Are the people you indicated previously as covered by private health insurance ALL covered under the SAME health insurance plan?

IF YES: Are they all covered by your health plan or by another member of the family (which member)?

IF NO: Which members of your family are policy holders for a private health insurance plan?

INTS: THIS LIST WILL NOT INCLUDE THOSE WITH A MEDICARE SUPPLEMENT SO IF THEY PICK SOMEONE NOT ON THE LIST:

PROMPT: For this question, do not include those with a Medicare Supplement. We will ask about these supplements shortly.

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8
- 97 NO ONE IN HH IS A POLICY HOLDER
- 98 DK
- 99 REF

IF DK, REF WILL BE TREATED AS A SEPARATE POLICY HOLDER AND ASK PRIVATE INSURANCE QUESTIONS

INTS: ONCE YOU HAVE ASSIGNED THE POLICY HOLDERS YOU WILL GO TO THE CARD SORT. MOVE THE CARDS OF THOSE WHO ARE NOT POLICY HOLDERS TO THE STACK OF THE CORRECT POLICY HOLDER.

ASK OF ALL INDICATED AS POLICY HOLDERS
INSP03

These next questions are about PERSON's private insurance.

Is PERSON's health insurance provided through Blue Cross and Blue Shield of Vermont, MVP, the Vermont Health Plan, or some other company?

INS: ASK FOR A SPECIFIC INSURANCE COMPANY
IF BC/BS ASK: Is this Blue Cross Blue Shield of Vermont?

- 15 CIGNA
- 16 BLUE CROSS AND BLUE SHIELD OF VERMONT
- 40 BLUE CROSS AND BLUE SHIELD (OTHER PLANS)
- 17 CONNECTICUT GENERAL LIFE INSURANCE
- 18 MVP HEALTH PLAN
- 19 MVP INSURANCE COMPANY
- 22 AETNA
- 24 ANTHEM, ANTHEM BLUE CROSS
- 32 GREAT WEST
- 36 UNITED HEALTH CARE
- 95 OTHER PROVIDER (SPECIFY)
- 90 HEALTH CARE SHARE MINISTRY, MEDI SHARE
- 50 VERMONT HEALTH CONNECT, VERMONT HEALTH INSURANCE EXCHANGE
- 11 MEDICARE
- 80 MEDICARE SUPPLEMENT
- 12 MEDICAID, DR DYNASAUR, GREEN MOUNTAIN CARE
- 93 THROUGH THE STATE, SOCIAL SERVICES SSI/WELFARE, DISABILITY
- 98 DK/REF

ASK OF THOSE INDICATING COVERAGE SOURCE IS BLUE CROSS OR MVP BUT NOT A MEDICARE SUPPLEMENT
INSP04A

Was this health insurance coverage obtained through the Vermont's health insurance marketplace, Vermont Health Connect also known as the Vermont health insurance exchange?

PROMPT FOR BC/BS: If you enrolled through VT Health Connect, you will see the Vermont Health Connect Logo in the upper right hand corner of your insurance card.

PROMPT FOR MVP: If you enrolled through VT Health Connect, you will see the VT Health Connect Logo on the back of your insurance card at the bottom.

READ AS NEEDED:

These plans are organized into four "metal" categories: Bronze, Silver, and Gold, and Platinum. Catastrophic coverage is also available for residents under the age of 30, or who meet certain hardship conditions.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK OF THOSE INDICATING COVERAGE SOURCE VT HEALTH CONNECT OR THE EXCHANGE
INSP04B

Please think about the insurance PERSON purchased through Vermont Health Connect.

Is PERSON 's HEALTH INSURANCE provided through Blue Cross and Blue Shield of Vermont or MVP?

- 1 Blue Cross and Blue Shield
- 2 MVP
- 3 SOME OTHER COMPANY
- 8 DK
- 9 REF

INSP06

Is PERSON's health insurance through...

MESSAGE TO THE INTERVIEWER: READ RESPONSES AND SELECT ONE

PROMPT: This includes insurance coverage from an employer, through a business, a family business or farm, through a labor union, or some other employer based plan.

PROMPT IF MORE THAN ONE KIND OF INS: To clarify, I mean a private insurance policy.

- 1 PERSON's work, or a union, association, or trust
- 2 Someone else's work, or a union, association, or trust
- 3 Some other source

- 8 DK
- 9 REF

*ASK OF ALL INDICATED AS POLICY HOLDERS AND NOT COVERED BY
PLAN THROUGH EMPLOYER/LABOR UNION BUT DO NOT ASK OF THOSE
WITH A PLAN THROUGH THE EXCHANGE*

INSP09

Is PERSON's insurance provided through...

MESSAGE TO THE INTERVIEWER: READ RESPONSES AND SELECT ONE

IF THROUGH STATE, ASK: Is this through the state's Medicaid program or
Green Mountain Care?

IF YES CODE AS 91

- 12 COBRA or a former employer,
- 13 A retirement plan,
- 14 A school, college, or university,
- 20 Purchased through Vermont's health insurance marketplace, Vermont Health
Connect
- 15 Purchased directly from an insurance company or the premium paid out of
pocket
- 95 OTHER (SPECIFY)
- 91 MEDICAID OR GREEN MOUNTAIN CARE
- 40 IMMIGRANT HEALTH INSURANCE PLAN
- 82 MILITARY, VETERANS, OR TRICARE
- 51 DR. DYNASAUR
- 92 DISABILITY
- 93 THROUGH THE STATE (BUT NOT AS A STATE EMPLOYEE)
- 94 SSI/SSDI/WELFARE
- 98 DK
- 99 REF

ASK IF PERSON HAS A PLAN THROUGH THE EXCHANGE
INSP60

Did PERSON receive financial help or tax credits also known as premium tax credits or advance premium tax credits or APTC to pay for the health insurance plan PERSON purchased through Vermont Health Connect?

PROMPT: Financial assistance is provided to certain people to help them pay their monthly premiums. The amount is based on you and your family's income.

PROMPT: By "premium" we mean your monthly insurance bill.

- 1 YES
- 2 NO
- 3 DID NOT PURCHASE THROUGH VT HEALTH CONNECT
- 8 DK
- 9 REF

ASK OF ALL INDICATED AS POLICY HOLDERS
INSP20

What is the monthly premium paid for PERSON's health insurance?

IF THEY HAVE A PLAN THROUGH VERMONT HEALTH CONNECT
This would be the amount paid after financial help is applied

PROMPT: The premium is the amount paid each month for health insurance coverage. This is the amount that would be taken out of a paycheck or the amount paid directly to the insurance company every month.

AS NEEDED: If you let me know the amount taken out of each paycheck and how often you/this person get(s) paid then I can calculate the amount.

0 NONE, DO NOT PAY MONTHLY PREMIUM

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATED AS POLICY HOLDERS
INSP25

How much is the deductible for everyone covered under this health insurance?

READ FIRST TIME:

This is the amount you must pay every year for medical care BEFORE the insurance begins to pay the bills. Please do not include premium expenses.

0 NONE, NO DEDUCTIBLE

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

IF LESS THAN \$500, READ:

Is this the amount paid for medical care BEFORE the insurance begins to pay medical bills? The deductible is NOT the same as co-payments that have to be paid for every visit to the doctor or emergency room or for certain prescriptions. This is usually based on a calendar year.

IF THEY ARE UNSURE:

The health insurance deductible will be listed in the materials provided by the health insurance company.

PROMPT: By "premium" we mean your monthly insurance bill

ASK OF ALL INDICATED AS POLICY HOLDERS
NNINSP29

Does PERSON have...

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

PROMPT: A Flexible Spending Account (FSA) is an employer-sponsored benefit that lets you set aside pre-tax money to pay for qualified medical expenses and dependent care:

PROMPT: A Health Savings Account (HSA) is a tax-advantaged medical savings account available to taxpayers who are enrolled in a High Deductible Health Plan. The money in the account can only be spent for health care and can grow from year to year.

PROMPT: A Health Reimbursement Account (HRA) is an account funded by an employer that employees can use for qualified health care expenses.

- 1 A Flexible Spending Account or FSA
- 2 A Health Savings Account or HSA
- 3 A Health Reimbursement Account or HRA
- 7 NONE OF THESE
- 8 DK
- 9 REF

ASK OF ALL INDICATING THEY HAVE AN FSA IN NNINSP29 (1)
NNINSP29I

How much did PERSON contribute to their FSA account during the past 12 months?

0 NONE, DO NOT PAY MONTHLY PREMIUM

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATING THEY HAVE AN FSA IN NINSP29 (1) WITH AN
EMPLOYER SPONSORED PLAN (INSP06 = 1 OR 2)
NNINSP29J

How much did PERSON's employer contribute to their FSA account during the past 12 months?

0 NONE

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATING THEY HAVE AN HSA IN NNINSP29 (2)
INSP29A

How much did PERSON contribute to their HSA account during the past 12 months?

0 NONE, DO NOT PAY MONTHLY PREMIUM

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATING THEY HAVE AN HSA IN NINSP29 (2) WITH AN
EMPLOYER SPONSORED PLAN (INSP06 = 1 OR 2)
INSP29B

How much did PERSON's employer contribute to their HSA account during the past 12 months?

0 NONE

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATING THEY HAVE AN HRA IN NNINSP29 (3)
INSP29D

How much did PERSON's employer contribute to their HRA during the past 12 months?

0 NONE

1 - 99996 ENTER NUMBER OF DOLLARS

99997 ENTER FOR \$99997 OR MORE

99998 ENTER FOR DK

99999 ENTER FOR REFUSE

ASK OF ALL INDICATING THEY HAVE AN FSA, HSA, AND/OR HRA IN
NNINSP29
INSP29E

During the past 12 months, were there any health care bills PERSON had to pay
that were NOT covered by the <FSA/HSA/HRA>?

- 1 YES
- 2 NO
- 8 DK
- 9 REF

ASK IF YES TO INSP29E
INSP29G

Were those health care bills paid for by...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 1 You or your family,
- 2 Your employer,
- 4 Financial assistance program at a hospital or clinic,
- 3 Someone else? (SPECIFY), or
- 5 Not paid
- 8 DK
- 9 REF

ASK IF YES TO INSP29E
INSP29H

What was the amount of the health care bills not covered by Persons'
FSA/HSA/HRA>?

0 NONE

1 - 99996 ENTER NUMBER OF DOLLARS

99997 \$99997 OR MORE

99998 DK
99999 REF

INSP30

Can dependents be covered under PERSON'S health insurance?

PROMPT: Even if <PERSON is not currently married or has children, does the health plan have an option to cover dependents?

1 YES

2 NO

8 DK

9 REF

ASK IF THEY INDICATED THAT PRIVATE INSURANCE WAS THROUGH STATE OF VERMONT MEDICAID, DR. DYNASAUR, PLAN, SSI, WELFARE, DISABILITY TO INSP03 – ASK FOR EACH PERSON LISTED UNDER POLICY INSP05

Earlier you stated that PERSON's insurance was provided through the state, through SSI, or through disability coverage.

Just to check again, is PERSON covered by...

MESSAGE TO THE INTERVIEWER: READ AND SELECT ONE

- 12 Medicaid, Green Mountain Care, or Dr. Dynasaur
- 50 Private health insurance through Vermont Health Connect, The health exchange
- 10 Another type of PRIVATE health insurance
- 16 Military, Veterans, or TRICARE
- 11 Medicare, or
- 96 Some other type of health insurance (SPECIFY)
- 40 IMMIGRANT HEALTH INSURANCE PLAN
- 93 THROUGH THE STATE (BUT NOT AS STATE EMPLOYEE)
- 94 SSI/SSDI/WELFARE/DISABILITY
- 98 DK
- 99 REF

VII. Medicaid Insurance Follow-up Questions

Q42x

For these next questions, please think about the household members that are currently covered by Medicaid, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan.

ASK IF PERSON IS COVERED BY MEDICAID, GREEN MOUNTAIN CARE OR DR. DYNASAUR OR THE IMMIGRANT HEALTH INSURANCE PLAN

M16

How long has PERSON had health insurance through the Medicaid program, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan?

PROMPT: That is, how long has it been since PERSON first enrolled in the state program they are currently enrolled in?

PROMPT: How long have you been continuously covered under Medicaid, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan?

INTS: ENTER IN NUMBER OF MONTHS

- 1 ONE MONTH OR LESS
- 2 - 60 ENTER NUMBER OF MONTHS
- 61 MORE THAN 5 YEARS

- 97 DOES NOT HAVE MEDICAID
- 98 DK
- 99 REF

ASK OF ALL HOUSEHOLDS WITH ANY RESIDENT COVERED THROUGH ANY MEDICAID PROGRAM – MEDICAID, GREEN MOUNTAIN CARE, DR. DYNASAUR, IMMIGRANT HEALTH INSURANCE PLAN
MCSAT01

For these next questions, I would like to know how you would rate the quality of the health insurance provided by Medicaid, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan for anyone in your household with such coverage.

How would you rate the choice of doctors and other providers available?

MESSAGE TO THE INTERVIEWER: READ AND SELECT ONE

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair, or
- 5 Poor?
- 7 DID NOT RECEIVE CARE
- 8 DK
- 9 REF

ASK OF ALL HOUSEHOLDS WITH ANY RESIDENT COVERED THROUGH ANY MEDICAID PROGRAM – MEDICAID, GREEN MOUNTAIN CARE, DR. DYNASAUR, IMMIGRANT HEALTH INSURANCE PLAN
NMCSAT06

Has anyone in your home wanted to see a health care provider for care but their Medicaid, Green Mountain Care, Dr. Dynasaur, or Immigrant Health Insurance Plan did not cover it?

IF YES ASK: What type of care?

MESSAGE TO THE INTERVIEWER: READ AND SELECT ALL MENTIONED

- 10 Primary care,
- 11 Dental Care,
- 12 Substance use treatment,
- 13 Mental health care,
- 14 Vision care,
- 15 Long term care or
- 95 Some other type of care? (SPECIFY)
- 97 NO INSTANCE WHERE INSURANCE DID NOT COVER
- 98 DK
- 99 REF

VIII. Questions of Those who are Uninsured

ASK OF THOSE INDICATED AS UNINSURED IN INS02

INSU01

(READ FIRST TIME)

These next questions ask about those without health insurance.

How long has PERSON been without health insurance?

- 1 ONE MONTH OR LESS
- 2 - 60 ENTER NUMBER OF MONTHS
- 61 MORE THAN 5 YEARS

- 97 NEVER HAD HEALTH INSURANCE
- 98 DK
- 99 REF

INSU02 (Q50)

How does cost rate as the reason why PERSON is not currently covered by insurance? Would you say it is....

[INTERVIEWER: READ LIST]

- 1 Absolutely the only reason (GOTO INSU03X)
- 2 One of the main reasons
- 3 One reason among several
- 4 Not much of a factor
- 8 DK
- 9 REF

ASK OF THOSE INDICATED AS UNINSURED IN INS02
INSU03A-D

INSU03

What are the main reasons that PERSON is not currently covered by any insurance plan?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

PROMPT: Was there any other reason?

PROMPT: IF ELIGIBILITY FOR MEDICAID- PROBABLY NOT ELIGIBLE DUE TO INCOME ASK: Why do you feel that way?

- 61 APPLIED - APPLICATION WAS DENIED
- 60 APPLIED - WAITING TO HEAR
- 18 COST - COSTS TOO MUCH
- 11 CUT HOURS - EMPLOYER CUT PERSON BACK TO PART TIME/TEMPORARY STATUS
- 62 DON'T WANT OR NEED - RARELY SICK
- 70 DON'T WANT OR NEED TO BE ON PUBLIC ASSISTANCE
- 17 ELIGIBILITY - LOST MEDICAID BECAUSE OF AGE
- 20 ELIGIBILITY - LOST MEDICAID BECAUSE OF INCOME OR SOME OTHER REASON
- 66 ELIGIBILITY FOR MEDICAID- NOT DISABLED
- 35 ELIGIBILITY FOR MEDICAID- PROBABLY NOT ELIGIBLE DUE TO INCOME
- 23 ELIGIBILITY FOR MEDICAID - PROBABLY NOT ELIGIBLE FOR SOME OTHER REASON (SPECIFY WHY DO YOU FEEL THAT WAY?)
- 13 EMPLOYER OFFER - DOES NOT OFFER COVERAGE
- 65 FAMILIAR - DON'T KNOW WHERE OR HOW TO APPLY
- 63 FAMILIAR - NOT FAMILIAR WITH THE MEDICAID PROGRAM OR VT HEALTH CONNECT
- 10 LOST JOB - PERSON WITH HEALTH INSURANCE LOST JOB/CHANGED EMPLOYERS
- 68 PAPERWORK - TOO MUCH TROUBLE/PAPERWORK
- 69 UNCOMFORTABLE PROVIDING INFORMATION TO THE GOVERNMENT
- 95 OTHER (SPECIFY)
- 97 NO REASON IN PARTICULAR
- 98 DK
- 99 REF

insu03x

Next, I am going to read some possible reasons why PERSON may no longer have health insurance coverage.

For each, please let me know if it is a reason PERSON does not have health insurance coverage.

ASK IF UNINSURED AND THEY DID NOT RESPOND 10 PERSON WITH HEALTH INSURANCE LOST JOB TO INSU03

insu03a

PERSON lost their job.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

ASK IF UNINSURED AND THEY DID NOT RESPOND 11 EMPLOYER CUT PERSON BACK TO PART TIME/TEMPORARY STATUS TO INSU03

insu03b

PERSON is no longer eligible for insurance through an employer because of a reduction in the number of hours PERSON works.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

ASK IF UNINSURED AND THEY DID NOT RESPOND 12 EMPLOYER
STOPPED OFFERING COVERAGE TO INSU03
insu03c

PERSON's employer stopped offering health insurance.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE INDICATED AS UNINSURED IN INS02
insu03d

Our family could no longer afford the cost of the premiums for health insurance
through PERSON's employer

PROMPT: Is this a reason PERSON no longer has health insurance?

PROMPT: By "premium" we mean your monthly insurance bill.

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE INDICATED AS UNINSURED IN INS02
insu03e

PERSON lost coverage or became ineligible for Medicaid, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE INDICATED AS UNINSURED IN INS02
insu03g

PERSON is not interested in insurance.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE INDICATED AS UNINSURED IN INS02
insu03k

PERSON is eligible for free care from a local hospital or health clinic.

PROMPT: Is this a reason PERSON no longer has health insurance?

1 YES

2 NO

8 DK

9 REF

**ASK OF THOSE INDICATING YES TO INSU03e OR ANSWERED
NINSU03M**

You indicated that PERSON lost their coverage or became ineligible for Medicaid, Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan.

Was it due to any of the following reasons...

**MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL
MENTIONED**

- 10 Information was requested and our family could not provide it
- 11 There was too much documentation required
- 12 The right documentation was not submitted
- 13 Our family didn't know what information they needed to provide
- 14 Our family didn't know how to get the information that was requested
- 15 Our family didn't know how to submit the information or who to send it to
- 16 Loss of Medicaid coverage since March 31, 2023
- 97 NONE OF THESE
- 98 DK
- 99 REF

**ASK OF THOSE INDICATED AS UNINSURED IN INS02
INSU03N**

Has PERSON been screened within the last six months for eligibility for Medicaid, also known as Green Mountain Care, Dr. Dynasaur, or the Immigrant Health Insurance Plan or screened for eligibility for private insurance through Vermont's health insurance marketplace, Vermont Health Connect?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

IX. Enrollment in Medicaid or Insurance through VT Health Connect

ASK THIS SECTION IF THERE ARE ONE OR MORE UNINSURED RESIDENTS

MCA04

What are the reasons that members of the household have not enrolled in Medicaid (Green Mountain Care or Dr. Dynasaur, the Immigrant Health Insurance Plan, or private health insurance through Vermont's health insurance marketplace, Vermont Health Connect?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

PROBE FOR SPECIFICS AND DETAILS - ARE THERE ANY OTHER REASONS?

- 23 APPLIED - APPLICATION WAS DENIED
- 22 APPLIED - WAITING TO HEAR
- 41 COST - COSTS TOO MUCH
- 17 DON'T WANT OR NEED - RARELY SICK
- 18 DON'T WANT OR NEED HEALTH INSURANCE
- 16 DON'T WANT OR NEED TO BE ON PUBLIC ASSISTANCE
- 45 ELIGIBILITY - IMMIGRANT HEALTH INSURANCE PLAN - AGED OUT OF
OR BEYOND POST-PARTUM PERIOD
- 31 ELIGIBILITY - LOST MEDICAID BECAUSE OF AGE
- 44 ELIGIBILITY - LOST MEDICAID BECAUSE OF INCOME OR SOME OTHER
REASON
- 43 ELIGIBILITY - NOT DISABLED
- 14 ELIGIBILITY - PROBABLY NOT ELIGIBLE DUE TO INCOME
- 24 ELIGIBILITY - PROBABLY NOT ELIGIBLE FOR SOME OTHER REASON
- 13 FAMILIAR - DON'T KNOW WHERE OR HOW TO APPLY
- 42 FAMILIAR - NOT FAMILIAR WITH IMMIGRANT HEALTH INSURANCE PLAN
- 12 FAMILIAR - NOT FAMILIAR WITH THE MEDICAID PROGRAM OR VT
HEALTH CONNECT
- 15 PAPERWORK - TOO MUCH TROUBLE/PAPERWORK
- 52 UNCOMFORTABLE PROVIDING INFORMATION TO THE GOVERNMENT
- 95 OTHER (SPECIFY)
- 97 NO REASON IN PARTICULAR
- 98 DK
- 99 REF

CHINS04j

When was the last time your family looked at the cost of health insurance for those currently without coverage?

MESSAGE TO INTERVIEWER: READ RESPONSES

- 1 Since this summer
- 2 Within the past year
- 3 One to two years ago
- 4 Two to three years ago
- 5 Three to four years ago
- 6 Five or more years ago
- 7 NEVER
- 8 DK
- 9 REF

INSU21

At any time During the prior 12 months, did any of the uninsured members of your household apply for health insurance through Medicaid, also known as Green Mountain Care, Dr. Dynasaur, the Immigrant Health Insurance Plan, or apply for private insurance through Vermont's health insurance marketplace, Vermont Health Connect?

- 1 YES
- 2 NO, DID NOT APPLY
- 8 DK
- 9 REF

ASK IF HH APPLIED FOR HEALTH INSURANCE
INSU22

Did the uninsured members of the household apply for...

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

- 1 Medicaid Green Mountain Care or Dr. Dynasaur
- 3 Private Health Insurance through Vermont Health Connect
- 4 Immigrant Health Insurance Program
- 7 SOME OTHER INSURANCE (SPECIFY)
- 8 DK
- 9 REF

ASK IF HH APPLIED FOR HEALTH INSURANCE
INSU23

What happened with the application(s)?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED

- 10 STILL WAITING TO HEAR
- 11 THE APPLICATION WAS ACCEPTED
- 12 THE APPLICATION WAS DENIED
- 13 STILL NEED TO SEND IN APPLICATION
- 15 COSTS TOO MUCH (DID NOT ENROLL BECAUSE OF COST)
- 21 NEED TO SUBMIT ADDITIONAL INFORMATION
- 16 DECIDED NOT TO ENROLL (SPECIFY: WHY?)
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

X. Interruptions in Coverage

ASK OF THOSE COVERED BY ANY TYPE OF INSURANCE

INSW01

Next, I'd like to ask you about any gaps in having health insurance.
Please think about those that CURRENTLY have insurance.
Has everyone had insurance FOR ALL of the past 12 months?

IF NO, ASK: Who did not have insurance within the past 12 months?

INTS: SELECT ALL WHO HAVE NOT HAD INSURANCE

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 EVERYONE HAD INSURANCE
- 98 DK
- 99 REF

*ASK OF ALL HOUSEHOLD MEMBERS INDICATED AS HAVING A GAP IN
HEALTH INSURANCE COVERAGE IN INSW01...*

INSW02

For how long was PERSON without health insurance, even if that gap in
coverage was longer than 12 months?

INTS: ENTER IN NUMBER OF MONTHS

- 1 ONE MONTH OR LESS
- 2 - 60 ENTER NUMBER OF MONTHS
- 61 MORE THAN 5 YEARS

- 97 NEVER HAD HEALTH INSURANCE PRIOR TO CURRENT COVERAGE
- 98 DK
- 99 REF

**ASK OF THOSE WITH A GAP IN HEALTH INSURANCE
INSW03A-E**

Can you please tell me the main reason that PERSON did not have health insurance at that time?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

PROMPT: Was there any other reason?

IF THEY SAY THEY ARE NOT ELIGIBLE FOR MEDICAID ASK: Why is this?

- 61 APPLIED - APPLICATION WAS DENIED
- 60 APPLIED - WAITING TO HEAR
- 18 COST - COSTS TOO MUCH
- 11 CUT HOURS - EMPLOYER CUT PERSON BACK TO PART TIME/TEMPORARY STATUS
- 62 DON'T WANT OR NEED - RARELY SICK
- 70 DON'T WANT OR NEED TO BE ON PUBLIC ASSISTANCE
- 17 ELIGIBILITY - LOST MEDICAID BECAUSE OF AGE
- 20 ELIGIBILITY - LOST MEDICAID BECAUSE OF INCOME OR SOME OTHER REASON
- 66 ELIGIBILITY - NOT DISABLED
- 35 ELIGIBILITY - PROBABLY NOT ELIGIBLE DUE TO INCOME
- 23 ELIGIBILITY - PROBABLY NOT ELIGIBLE FOR SOME OTHER REASON (SPECIFY WHY DO YOU FEEL THAT WAY?)
- 13 EMPLOYER OFFER - DOES NOT OFFER COVERAGE
- 65 FAMILIAR - DON'T KNOW WHERE OR HOW TO APPLY
- 63 FAMILIAR - NOT FAMILIAR WITH THE MEDICAID PROGRAM OR VT HEALTH CONNECT
- 10 LOST JOB - PERSON WITH HEALTH INSURANCE LOST JOB/CHANGED EMPLOYERS
- 68 PAPERWORK - TOO MUCH TROUBLE/PAPERWORK
- 69 UNCOMFORTABLE PROVIDING INFORMATION TO THE GOVERNMENT
- 95 OTHER (SPECIFY)
- 97 NO REASON IN PARTICULAR
- 98 DK

ASK OF THOSE WITH A GAP IN HEALTH INSURANCE

INSW11

Was the gap in health insurance coverage caused by Medicaid enrollment that ended after March 31, 2023.

1 YES

2 NO

8 DK

9 REF

ASK OF THOSE WITH A GAP IN HEALTH INSURANCE INSW01

INSW05

What type of health insurance did PERSON have PRIOR to their current coverage?

MESSAGE TO INTERVIEWER: READ AND SELECT UP TO THREE RESPONSES

10 Private health insurance through an employer

15 Private health insurance bought directly from an insurance company

20 Private health insurance purchased through Vermont's health insurance marketplace (also known as Vermont Health Connect, the health insurance exchange).

11 Medicaid, Green Mountain Care, Dr. Dynasaur,

40 The Immigrant Health Insurance Plan

12 Medicare

16 Military, Veterans, or TRICARE (formally known as CHAMPUS)

95 Some other type of insurance (SPECIFY)

97 NO INSURANCE COVERAGE

98 DK/REF

ASK OF THOSE WITH A GAP IN HEALTH INSURANCE
INSW07

During the gap in health insurance coverage did PERSON...

MESSAGE TO INTERVIEWER: **READ RESPONSES AND SELECT ALL MENTIONED**

- 1 Think about applying for Medicaid
- 2 Apply for Medicaid
- 3 NEITHER
- 8 DK
- 9 REF

XI. Dental and Vision Insurance and Care

INSD01

These next questions ask about dental insurance and dental care.

Is anyone now covered by an insurance plan that pays for routine dental care, such as cleanings and fillings?

IF YES: Who is that?

PROMPT: For example, Vermont Medicaid, also known as Green Mountain Care or Dr. Dynasaur, often pays for routine dental care for members who have full Medicaid benefits. People may also have private dental insurance, like through Northeast Delta Dental.

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH HAS DENTAL INSURANCE
- 98 DK
- 99 REF

NDENTAL01

Has PERSON been to a dentist appointment in the last 12 months?

1 YES

2 NO

8 DK

9 REF

ASK IF NO TO DENTAL01

NDENTAL02

What are some of the reasons that PERSON has not been to the dentist in the last 12 months?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

10 DON'T HAVE A REGULAR DENTIST

11 CAN'T FIND A DENTIST WHO IS ACCEPTING NEW PATIENTS

12 CAN'T FIND A DENTIST WHO ACCEPTS MY INSURANCE

13 IT'S TOO FAR AWAY / TRANSPORTATION ISSUES

14 IT COSTS TOO MUCH

15 AFRAID OF GOING TO THE DENTIST

16 DON'T FEEL LIKE I NEED TO GO TO THE DENTIST

17 NO DENTAL INSURANCE

95 OTHER (SPECIFY)

98 DK

99 REF

INSV01

Is anyone now covered by an insurance plan that pays for routine vision care including regular eye exams?

IF YES: Who is that?

PROMPT: For example, Vermont Medicaid, also known as Green Mountain Care or Dr. Dynasaur, often pays for routine vision care like eye examinations for members who have full Medicaid benefits. People may also have private health insurance that pays for routine vision care like eye examinations.

PROMPT: This includes any coverage you may have through your health insurance or through a separate plan.

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH HAS VISION INSURANCE
- 98 DK
- 99 REF

XII. Visits to Physical and Mental Health Providers and Point of Medical Care

DOCV00

Next, I would like to ask about visits to doctors' offices and medical care.

This includes visits to doctors and other health care providers such as physician's assistants, nurse practitioners, or anyone else you might go to for medical care. It includes anytime that care was provided by telehealth services through your computer, laptop, tablet or cell phone.

Do not include things such as getting a flu shot through work or checking your blood pressure at a pharmacy, if a person hospitalized overnight or in hospital emergency room.

PROMPT: Telehealth is a service delivered through technology that allowed your provider to see and hear you, and you to see and hear your provider or visits where you talked to your doctor/health care provider over the phone.

PRESS ENTER TOI CONTINUE

DOCV01

How many times did PERSON see a doctor or health care provider in person or through telehealth services during the past 12 months?

PROMPT: Did PERSON see or speak with a doctor or health care provider about their health, not counting when he may have stayed overnight in the hospital? Your best guess is fine.

PROMPT: This does not include instances such as getting a flu shot through work or checking their blood pressure at the pharmacy.

- 0 NONE
- 1 - 96 ENTER NUMBER OF VISITS
- 97 97 OR MORE
- 98 DK
- 99 REF

ASK OF THOSE WITH AT LEAST ONE VISIT IN DOCV01
DOCV02

How many of those times were for strictly routine check-ups or preventive care, that is when PERSON was not sick?

PROMPT: Routine and preventive care includes any treatment not related to illness or injury and can include pre-natal care, vaccinations, physicals, check-ups, and follow-up visits.

- 0 NONE
- 1 - 96 ENTER NUMBER OF VISITS
- 97 97 OR MORE

- 98 DK
- 99 REF

NDOCV20

How long does it usually take to travel to the household's usual place for routine medical care?

IF THE HOUSEHOLD DOES NOT GO TO THE DR. OR HAVE USUAL SOURCE OF CARE THEN ASK: If someone in the household needed urgent care, how long would it take to travel to see a doctor or other health care provider?

PROMPT: You best estimate is fine.

1 - 240 ENTER NUMBER OF MINUTES

241 > 4 HOURS

995 IT VARIES

997 NO TIME, USE TELEHEALTH SERVICES

998 DK

999 REF

DOC144

During the past 12 months, was anyone unable to get an appointment at the doctor's office or clinic as soon as one was needed?

IF YES ASK: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

DOC147

During the past 12 months, did anyone choose not to go to the doctor because they could not afford the co-pay or deductible?

IF YES ASK: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

DOCV12

During the past 12 months did you or anyone in the household seek medical care in a hospital emergency room for any reason?

PROMPT: Do not include any visits to walk in treatment centers.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

DOCV15

During the past 12 months did anyone in the household seek treatment for substance use?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK OF HOUSEHOLD WITH MEMBERS RECEIVING SUBSTANCE MISUSE CARE

DOCV16

Did those seeking care experience any problems accessing this care?

IF YES ASK: What types of problems?

- 10 INSURANCE WOULD NOT COVER ANY OF COST
- 11 INSURANCE WOULD NOT COVER ENOUGH OF THE COST
- 12 LONG WAIT TIME TO GET AN APPOINTMENT
- 13 HAD TO TRAVEL LONG DISTANCES TO ACCESS CARE
- 14 NOT ABLE TO FIND A PROVIDER AT ALL
- 15 NOT ABLE TO FIND A PROVIDER ACCEPTING PATIENTS
- 95 OTHER (SPECIFY)
- 97 NO, DID NOT EXPERIENCE ANY PROBLEMS
- 98 DK
- 99 REF

DOCV17

During the past 12 month did anyone in the household seek mental health care?

PROMPT: Mental health and physical health are very closely connected. Mental health plays a major role in your ability to maintain good physical health. Mental illnesses, such as depression and anxiety, affect your ability to participate in healthy behaviors.

- 1 YES
- 2 NO
- 8 DK
- 9 REF

ADD TO ASK ABOUT MENTAL HEALTH
ASK OF HOUSEHOLD WITH MEMBERS RECEIVING MENTAL HEALTH CARE
DOCV17a

Did those seeking care experience any problems accessing this care?

IF YES ASK: What types of problems?

- 10 INSURANCE WOULD NOT COVER ANY OF COST
- 11 INSURANCE WOULD NOT COVER ENOUGH OF THE COST
- 12 LONG WAIT TIME TO GET AN APPOINTMENT
- 13 HAD TO TRAVEL LONG DISTANCES TO ACCESS CARE
- 14 NOT ABLE TO FIND A PROVIDER AT ALL
- 15 NOT ABLE TO FIND A PROVIDER ACCEPTING PATIENTS
- 95 OTHER (SPECIFY)
- 97 NO, DID NOT EXPERIENCE ANY PROBLEMS
- 98 DK
- 99 REF

TELE02

In the past 12 months have you or anyone else in your family used health care by phone, computer or video or other telehealth?

Please do not include any times you or others emailed a doctor or nurse for advice, scheduled or changed an appointment or renewed a prescription.

IF YES ASK: What types of care did you or other family members receive through telehealth?

PROMPT: Telehealth is a service delivered through technology that allowed your provider to see and hear you, and you to see and hear your provider or visits where you talked to your doctor/health care provider over the phone.

- 1 YES (SPECIFY)
- 2 NO
- 3 DK
- 8 REF

ASK IF YES TO TELE02

TELE03

Why did you or others in your household choose to use telehealth services?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

- 10 EASIER OR FASTER TO SEE PROVIDER
- 11 WAIT TIME FOR IN PERSON IS TOO LONG
- 12 OTHERWISE NOT ABLE TO GET APPOINTMENT
- 13 TOO FAR FROM HOME/WORK
- 14 SAVES TIME
- 15 HAVE A HEALTH OR SAFETY REASON (IE IMMUNOCOMPROMISED) THAT PREVENTS ME FROM GOING IN PERSON
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

XIII. Prescription Drug Expenses

RXU03

Which category best represents the amount that PERSON pays per month out of pocket for prescription drugs that PERSON uses on a regular basis?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE RESPONSE

- 10 Less than \$50
- 11 \$50 to \$99
- 12 \$100 to \$199
- 13 \$200 to \$299
- 14 \$300 to \$399
- 15 \$400 to \$499
- 16 \$500 to \$599
- 17 More than \$600
- 18 ONLY KNOW HOW MUCH ANNUALLY (ASK RXU04)
- 97 Does not take medications regularly

- 98 DK
- 99 REF

ASK IF PERSON CAN ONLY PROVIDE ANNUAL AMOUNT SPENT
RXU04

How much does PERSON spend annually on prescription drugs used on a regular basis?

- 10 \$10 or less
- 11 - 99996 ENTER DOLLAR AMOUNT
- 99997 \$99,997 OR MORE

- 8 DK
- 9 REF

XIV. Medical Expenses and Health Care Barriers

EXP01

Over the last 12 months, about how much has your household had to pay OUT OF POCKET for:

Your family's prescription medications.

Please include all "out of pocket" expenses, regardless of who actually pays for them, and also include any co-payments or coinsurance payments.

PROMPT: Out of pocket expenses are the amount of money paid that is NOT covered by any insurance or special assistance you might have. It DOES NOT include the premium you may pay for your insurance coverage any HSA or health savings account contributions.

PROMPT: By "premium" we mean your monthly insurance bill.

PROMPT: If you had to say, what would you estimate? Your best guess is fine.

0	NOTHING
1 - 99996	ENTER DOLLARS
99997	\$99,997 OR MORE
99998	DK
99999	REF

NEXP04

Dental care.

PROMPT: Over the last 12 months, about how much has your household had to pay "out of pocket" for...

PROMPT: If you had to say, what would you estimate? Your best guess is fine.

PROMPT: Out of pocket expenses are the amount of money paid that is NOT covered by any insurance or special assistance you might have. It DOES NOT include the premium you may pay for your insurance coverage.

PROMPT: By "premium" we mean your monthly insurance bill.

0	NOTHING
1 - 99996	ENTER DOLLARS
99997	\$99,997 OR MORE
99998	DK
99999	REF

NEXP05

Vision care.

PROMPT: Over the last 12 months, about how much has your household had to pay "out of pocket" for...

PROMPT: If you had to say, what would you estimate? Your best guess is fine.

PROMPT: Out of pocket expenses are the amount of money paid that is NOT covered by any insurance or special assistance you might have. It DOES NOT include the premium you may pay for your insurance coverage.

PROMPT: By "premium" we mean your monthly insurance bill.

0	NOTHING
1 - 99996	ENTER DOLLARS
99997	\$99,997 OR MORE
99998	DK
99999	REF

EXP02a

Mental health care.

PROMPT: Over the last 12 months, about how much has your household had to pay "out of pocket" for...

PROMPT: If you had to say, what would you estimate? Your best guess is fine.

PROMPT: Out of pocket expenses are the amount of money paid that is NOT covered by any insurance or special assistance you might have. It DOES NOT include the premium you may pay for your insurance coverage.

PROMPT: By "premium" we mean your monthly insurance bill.

PROMPT: Mental health expenses would also include any expenses for substance misuse.

0	NOTHING
1 - 99996	ENTER DOLLARS
99997	\$99,997 OR MORE
99998	DK
99999	REF

EXP03

All OTHER medical expenses, including for doctors, hospitals, and tests. This would include common medical expenses such as over the counter medications, first aid materials, and so on.

PROMPT: Over the last 12 months, about how much has your household had to pay
"out of pocket" for...

PROMPT: If you had to say, what would you estimate? Your best guess is fine.

PROMPT: Out of pocket expenses are the amount of money paid that is NOT covered by any insurance or special assistance you might have. It DOES NOT include the premium you may pay for your insurance coverage.

PROMPT: By "premium" we mean your monthly insurance bill.

0	NOTHING
1 - 99996	ENTER DOLLARS
99997	\$99,997 OR MORE
99998	DK
99999	REF

HC01

During the past 12 months, was there any time when anyone in the household needed any of the following but didn't get it because they could not afford it?

HCB07

Routine medical care that that was needed?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCBO2 (Q59)

Medical care from a doctor or surgery?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCBO4

Mental health care or counseling?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCBO5 (Q59b)

Dental care including checkups?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCBO5a

A diagnostic test such as a CAT scan, MRI, lab work, or x-ray that was recommended by a doctor or other care provider?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

HCBO3 (Q60)

Prescription Medicines?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get them because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCBO5c

During the past 12 months, was there any time that you or anyone in the household skipped doses or took smaller amounts of their prescription drugs to make them last longer?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

HCB06

During the past 12 months, did anyone in the household receive any SINGLE medical bill for more than \$500 that had to be paid out-of-pocket?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

ASK FOR EACH PERSON WITH A SINGLE BILL OF MORE THAN \$500

NHCB06a

Did a Flexible Savings Account, Health Savings Account, or Health Reimbursement Account cover any amount of PERSON's bill?

- 1 YES (ASK NHCB06B)
- 2 NO
- 8 DK
- 9 REF

ASK IF YES TO NHCB06a

NHCB06b

How much of the bill did it cover?

PROMPT: How much of PERSON's bill was covered by a Flexible Savings Account, Health Savings Account, or Health Reimbursement Account?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE

- 1 Less than half
- 2 About Half
- 3 More than half
- 4 All of the bill
- 8 DK
- 9 REF

HCB10

During the last 12 months, were there times that there were problems paying for medical bills for anyone in your family ?

- 1 YES
- 2 NO
- 8 DK
- 9 REF

HCB10a

During the past 12 months, has fear of medical debt impacted you or anyone in the household when making decisions about whether to seek medical care?

- 1 YES (ASK HCB10B)
- 2 NO
- 8 DK
- 9 REF

ASK IF YES TO HCB10A
HCB10B

What type of medical care did you or your family NOT seek due to fear of medical debt?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED BY RESPONDENT

- 10 EMERGENCY OR URGENT CARE
- 11 PRIMARY CARE
- 12 DENTAL CARE
- 13 VISION RELATED CARE
- 14 OB/GYN RELATED CARE
- 15 MENTAL HEALTH RELATED CARE
- 40 SUBSTANCE USE RELATED CARE
- 16 HOSPICE / LONG-TERM CARE
- 17 CARE FOR CHILDREN AND/OR DEPENDENT(S)
- 18 VACCINATION(S)
- 19 OTHER OUTPATIENT OR ONGOING MEDICAL CARE
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

HCB11a

In the past 12 months, have you owed money for medical-related expenses that is now past due, likely to become past due, or will be paid through a payment plan or other financial assistance?

1 YES (ASK HCB11B)

2 NO

8 DK

9 REF

ASK IF YES TO HCB11A

HCB11b

Which of the following are the bills and/or medical debt owed to?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

1 A hospital,

2 A clinic or doctor's office,

3 An emergency room,

4 An urgent care center,

5 An outpatient specialty center, or

6 Someone else (SPECIFY)

8 DK

9 REF

HCB13

During the past 12 months, have any of the following happened to your family because of medical bills? Was your household...

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

- 1 Unable to pay for basic necessities like food, heat or rent
- 2 Used up all or most of savings
- 3 Had large credit card debt or had to take a loan or debt against the home
- 4 Filed for medical bankruptcy

- 7 NONE OF THESE
- 8 DK
- 9 REF

BA01

Has anyone in the household ever delayed or not gotten PHYSICAL, MENTAL or DENTAL health care because they could not find a doctor or other health care provider or a health care provider was not available at the time they needed care?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

ASK IF YES TO BA01

BA01a

What type of care did PERSON delay or not get?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED

- 10 DENTAL CARE INCLUDING CHECKUPS
- 11 DIAGNOSTIC TEST (CAT SCAN, MRI, LAB WORK, OR X-RAY)
- 12 EMERGENCY ROOM CARE'
- 13 HOSPITAL CARE/HOSPITAL STAY
- 14 MEDICAL CARE FOR AN ILLNESS/CONDITION (FLU, ASTHMA)
- 15 MEDICAL CARE FOR AN INJURY OR POISONING
- 16 MENTAL HEALTH CARE OR COUNSELING
- 17 OUTPATIENT CARE (DAY SURGERY)
- 18 PRESCRIPTION MEDICINES
- 19 REHABILITATION SERVICES
- 20 ROUTINE OR PREVENTIVE MEDICAL CARE (CHECKUP, WELL BABY)
- 21 SERIOUS MEDICAL CONDITION (PNEUMONIA)
- 22 SURGERY
- 35 SUBSTANCE ABUSE TREATMENT OR COUNSELING

- 95 OTHER (SPECIFY)
- 97 NOTHING
- 98 DK
- 99 REF

BAMC01

Has anyone in your household ever delayed or not gotten care because they could not find or did not know a doctor or other health care provider who accepts their insurance?

IF YES: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

ASK IF YES TO BAMC01

BAMC01a

What type of care did PERSON delay or not get?

PROMPT: Was there any other type of care?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED

- 10 DENTAL CARE INCLUDING CHECKUPS
- 11 DIAGNOSTIC TEST (CAT SCAN, MRI, LAB WORK, OR X-RAY)
- 12 EMERGENCY ROOM CARE
- 13 HOSPITAL CARE/HOSPITAL STAY
- 14 MEDICAL CARE FOR AN ILLNESS/CONDITION (FLU, ASTHMA)
- 15 MEDICAL CARE FOR AN INJURY OR POISONING
- 16 MENTAL HEALTH CARE OR COUNSELING
- 17 OUTPATIENT CARE (DAY SURGERY)
- 18 PRESCRIPTION MEDICINES
- 19 REHABILITATION SERVICES
- 20 ROUTINE OR PREVENTIVE MEDICAL CARE (CHECKUP, WELL BABY)
- 21 SERIOUS MEDICAL CONDITION (SPECIFY)
- 22 SURGERY
- 35 SUBSTANCE ABUSE TREATMENT OR COUNSELING

- 95 OTHER (SPECIFY)
- 97 NOTHING
- 98 DK
- 99 REF

ASK OF ALL

BAMC05

During the past 12 months, did anyone in your household ever delayed or not get PHYSICAL, MENTAL, or DENTAL health care because changes in their health insurance plan resulted in their doctor no longer accepting their health insurance?

IF YES: Who is that?

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

97 NO ONE IN HH

98 DK

99 REF

ASK IF YES TO BAMC05

BAMC05a

What type of care did PERSON not get?

PROMPT: Was there any other type of care?

MESSAGE TO INTERVIEWER: SELECT ALL MENTIONED

- 10 DENTAL CARE INCLUDING CHECKUPS
- 11 DIAGNOSTIC TEST (CAT SCAN, MRI, LAB WORK, OR X-RAY)
- 12 EMERGENCY ROOM CARE
- 13 HOSPITAL CARE/HOSPITAL STAY
- 14 MEDICAL CARE FOR AN ILLNESS/CONDITION (FLU, ASTHMA)
- 15 MEDICAL CARE FOR AN INJURY OR POISONING
- 16 MENTAL HEALTH CARE OR COUNSELING
- 17 OUTPATIENT CARE (DAY SURGERY)
- 18 PRESCRIPTION MEDICINES
- 19 REHABILITATION SERVICES
- 20 ROUTINE OR PREVENTIVE MEDICAL CARE (CHECKUP, WELL BABY)
- 21 SERIOUS MEDICAL CONDITION (SPECIFY)
- 22 SURGERY
- 35 SUBSTANCE ABUSE TREATMENT OR COUNSELING

- 95 OTHER (SPECIFY)
- 97 NOTHING
- 98 DK
- 99 REF

BA06

Is there a service and/or benefit that you or other family members need that is not currently covered by health insurance?

IF YES ASK: What service would that be?

- 1 YES (SPECIFY)
- 2 NO
- 8 DK
- 9 REF

XV. General Health Status and Chronic Conditions

HSTAT01 – SECTION INTRODUCTION

These next questions are about the physical and mental health of members of the household.

HSTAT02

Would you say PERSON's health, in general, is...

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE

- 1 Excellent
- 2 Very Good
- 3 Good
- 4 Fair, or
- 5 Poor

- 8 DK
- 9 REF

MAWD01

These next questions are about the physical and mental condition of members of the household.

Some people who are deaf or have serious difficulty hearing use assistive devices to communicate by phone.

Is anyone in the household deaf or have serious difficulty hearing?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

MAWD02

Is anyone in the household blind or have serious difficulty seeing, even when wearing glasses?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

MAWD03

Because of a physical, mental, or emotional condition does anyone in the household have serious difficulty concentrating, remembering, or making decisions?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

MAWD04

Does anyone in the household have serious difficulty walking or climbing stairs?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

MAWD05

Does anyone in the household have difficulty dressing or bathing?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

MAWD06

Because of a physical, mental, or emotional condition, does anyone in the household have difficulty doing errands alone such as visiting a doctor's office or shopping?

IF YES ASK: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

HCDISP04

How often, if ever, have you personally experienced discrimination or prejudice in your health care encounters based on your race, ethnicity, sexual orientation or gender identity or any disability you may have?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE

- 1 Often
- 2 Sometimes
- 3 Rarely
- 4 Never
- 8 DK
- 9 REF

XVI. Employment

EMP01

We are almost done with the survey. This next series of questions is about jobs and employment.

PROMPT: Answers to these questions are important because they help us understand about health issues and sources of health insurance. Also, I want to emphasize that the information you provide will be kept confidential and will only be used in combined form.

ASK OF THOSE 18 AND OLDER

EMP02

Is PERSON currently...

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ALL MENTIONED

10 Self-employed

11 Employed by the military

12 Employed by someone else

13 An unpaid worker for a family business or firm

14 Unemployed and looking for work, or

95 Something else? (SPECIFY)

15 NOT EMPLOYED AND NOT LOOKING FOR WORK OUTSIDE THE HOME

16 RETIRED

17 UNABLE TO WORK DUE TO A DISABILITY

21 STAY AT HOME CAREGIVER

22 GOING TO SCHOOL

98 DK

99 REF

*ASK OF THOSE 18 AND OLDER AND GOING TO SCHOOL, KEEPING
HOUSE, RETIRED, OTHER TO EMP02*
EMP03

Do/Does PERSON typically work for pay?

- 1 YES
- 2 NO
- 8 DK
- 9 REF

ASK OF THOSE 18 AND OLDER AND EMPLOYED
EMP05

For the job PERSON works the most hours, what is the total number of hours
PERSON usually works per week?

- 1-96 ENTER NUMBER
- 97 97 OR MORE HOURS
- 98 DK
- 99 REF

ASK OF THOSE 18 AND OLDER AND EMPLOYED
EMP06

On this job, is PERSON employed by a private company or business or a government agency?

INTERVIEWER: CODE NOT-FOR-PROFIT/FOUNDATION AS PRIVATE COMPANY.

IF EMPLOYED BY A SCHOOL COLLEGE OR UNIVERSITY, CLARIFY WHETHER THIS IS A STATE OR PRIVATE COLLEGE OR UNIVERSITY OR A PRIVATE OR PUBLIC SCHOOL

- 10 PRIVATE COMPANY
- 11 GOVERNMENT AGENCY
- 12 MILITARY DUTY
- 13 SELF-EMPLOYED
- 14 FAMILY-BUSINESS OR FARM - NOT SELF-EMPLOYED
- 15 PUBLIC ELEMENTARY, MIDDLE, JUNIOR, HIGH SCHOOL
- 16 PUBLIC COLLEGE OR UNIVERSITY
- 17 PRIVATE ELEMENTARY, MIDDLE, JUNIOR, HIGH SCHOOL
- 18 PRIVATE COLLEGE OR UNIVERSITY
- 95 OTHER (SPECIFY)

- 98 DK
- 99 REF

ASK OF THOSE EMPLOYED BY A PRIVATE COMPANY
EMP07

IF SELF EMPLOYED:

Which industry most closely describes PERSON's business?

IF THEY WORK FOR SOMETHING ELSE

Thinking about the employer PERSON works for, which industry most closely describes the employer's main business

MESSAGE TO INTERVIEWER: READ RESPONSES AS NEEDED

- 10 AGRICULTURE, FARMING, FORESTRY AND FISHING
- 11 CONSTRUCTION
- 12 EDUCATION
- 13 HEALTH CARE
- 14 LEISURE AND HOSPITALITY
- 15 MINING AND MANUFACTURING
- 16 SERVICE INCLUDING PROFESSIONAL AND RELATED SERVICES
- 17 RETAIL AND WHOLESALE TRADES/SALES
- 95 SOMETHING ELSE? (SPECIFY)
- 98 DK
- 99 REF

ASK OF THOSE EMPLOYED BY A GOVERNMENT AGENCY OR PUBLIC SCHOOL
EMP08

Does PERSON work for the federal government, state government, a local government such as a county or city, a local public school, or a state college or university?

- 1 FEDERAL GOVERNMENT
- 2 STATE GOVERNMENT
- 3 LOCAL GOVERNMENT
- 5 PUBLIC ELEMENTARY, MIDDLE, JUNIOR, HIGH SCHOOL
- 6 PUBLIC COLLEGE OR UNIVERSITY
- 7 OTHER (SPECIFY)
- 8 DK
- 9 REF

NNEMP09

About how many people are employed by this employer, at all locations?

MESSAGE TO INTERVIEW: READ RESPONSES IF NEEDED

- 19 1 PERSON
- 10 2-4
- 11 5-9
- 12 10-25
- 13 26-50
- 14 51-100
- 15 101-200
- 16 201-500
- 17 501-1,000
- 18 1,001 & OVER
- 98 DK
- 99 REF

XVII. Employer Sponsored Insurance

ASK OF EMPLOYED THAT ARE NOT POLICY HOLDER OR EMPLOYER PLAN, IN THE MILITARY OR SOLE PROPRIETORSHIP
EMP12

READ FIRST TIME:

Next, I am going to ask a few questions about health insurance that may be offered by employers.

Does the place where PERSON works at offer health insurance as a benefit to any of its employees?

PROMPT: Does the job offer health insurance?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK OF THOSE INDICATING YES TO EMP12
EMP15a1

Can dependents be covered under that health insurance?

PROMPT: This could include a spouse or any children

PROMPT: Even if PERSON does not have any dependents, we are still interested in whether a dependent could be covered through this insurance.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

ASK OF THOSE INDICATING YES TO EMP12
EMP13

Why was coverage not taken?

INTS: ENTER ALL MENTIONED BY RESPONDENT
PROMPT: Were there any other reasons?

- 13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH
- 16 COST - LESS EXPENSIVE TO HAVE MEDICAID, GREEN MOUNTAIN CARE, DR.
DYNASAUR
- 19 COVERAGE NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 14 DOES NOT NEED HEALTH INSURANCE
- 35 ENROLLMENT - NOT SURE HOW TO ENROLL
- 24 INCENTIVE - EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE
- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH
- 11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK
- 12 INELIGIBLE - MEDICAL PROBLEMS
- 30 JOB STATUS - LOST JOB/TEMPORARILY NOT AT WORK
- 32 JOB STATUS - QUIT JOB
- 15 OTHER INSURANCE COVERAGE - MEDICARE, MEDICAID, GREEN MOUNTAIN CARE
MILITARY
- 21 OTHER INSURANCE COVERAGE - PRIVATE INSURANCE - BETTER PLAN
- 22 OTHER INSURANCE COVERAGE - PRIVATE INSURANCE - LESS EXPENSIVE
- 25 SELF-EMPLOYED
- 27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER (VERIFY!)
- 95 OTHER (SPECIFY)
- 97 NO REASON
- 98 DK/REF

ASK OF THOSE INDICATING YES TO EMP12
EMP13FR

Are any of the following reasons why PERSON did not enroll in a health plan offered by the employer?

*ASK OF THOSE INDICATING YES TO EMP12 AND NOT INDICATING 10
INELIGIBLE - HASN'T WORKED LONG ENOUGH TO EMP13*
EMP13F

PERSON has not worked for their employer long enough to qualify for health insurance benefits.

PROMPT: Is this a reason for not taking health insurance coverage through the employer or labor union?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

*ASK OF THOSE INDICATING YES TO EMP12 AND NOT INDICATING 11
INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK TO EMP13*
EMP13G

PERSON works too few hours to qualify for health insurance.

PROMPT: Is this a reason for not taking health insurance coverage through the employer or labor union?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

*ASK OF THOSE INDICATING YES TO EMP12 AND NOT INDICATING 13
WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH TO EMP13*
EMP13H

The health insurance offered through PERSON's employer costs too much.

PROMPT: Is this a reason for not taking health insurance coverage through the employer or labor union?

1 YES

2 NO

8 DK

9 REF

*ASK OF THOSE INDICATING YES TO EMP12 AND NOT INDICATING 19
COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS TO
EMP13*
EMP13i

The health insurance offered through PERSON's employer does not meet PERSON's needs in terms of what type of health care is covered.

PROMPT: Is this a reason for not taking health insurance coverage through the employer or labor union?

1 YES

2 NO

8 DK

9 REF

ASK IF INDICATE IT COST TOO MUCH TO EMP13 or EMP13H
EMP13J

Did PERSON check Vermont's health insurance marketplace, Vermont Health Connect, to see if the cost of their employer-sponsored insurance meets the marketplace definition of affordable?

- 1 YES
- 2 NO
- 8 DK
- 9 REF

ASK OF THOSE INDICATING YES EMP12
EMP15

If PERSON had the option, how likely would PERSON be to enroll in their employer's health insurance plan?

MESSAGE TO INTERVIEWER: READ RESPONSES AND SELECT ONE

- 1 Definitely
- 2 Very Likely,
- 3 Somewhat Likely, (ASK OEM15)
- 4 Not Very Likely, or (ASK OEM15)
- 5 Not at all Likely? (ASK OEM15)
- 6 NOT APPLICABLE
- 8 DK
- 9 REF

ASK OF THOSE ANSWERING SOMEWHAT LIKELY, NOT VERY LIKELY, OR NOT AT ALL LIKELY TO EMP15

OEM15

What is the reason PERSON is not likely to enroll in the employer's health insurance plan?

13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH

16 COST - LESS EXPENSIVE TO HAVE MEDICAID, GREEN MOUNTAIN CARE, DR.

DYNASAUR

19 COVERAGE NOT ACCEPTABLE, DOES NOT MEET NEEDS

14 DOES NOT NEED HEALTH INSURANCE

35 ENROLLMENT - NOT SURE HOW TO ENROLL

24 INCENTIVE - EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE

10 INELIGIBLE - HASN'T WORKED LONG ENOUGH

11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK

12 INELIGIBLE - MEDICAL PROBLEMS

30 JOB STATUS - LOST JOB/TEMPORARILY NOT AT WORK

32 JOB STATUS - QUIT JOB

15 OTHER INSURANCE COVERAGE - MEDICARE, MEDICAID, GREEN MOUNTAIN CARE,

MILITARY

21 OTHER INSURANCE COVERAGE - PRIVATE INSURANCE - BETTER PLAN

22 OTHER INSURANCE COVERAGE - PRIVATE INSURANCE - LESS EXPENSIVE

25 SELF-EMPLOYED

27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER (VERIFY!)

95 OTHER (SPECIFY)

97 NO REASON

98 DK/REF

XVIII. Family Income

INCOME QUESTIONS WILL BE ASKED OF ALL PEOPLE AGE 14 AND OLDER **NINC01 – INTRODUCTION TO SECTION**

The next questions are about income that your members of the household received during 2024.

PROMPT:

This information helps explain whether people can afford the health insurance and health care they need. Your information is strictly confidential and will be kept private.

PRESS ENTER TO CONTINUE

ASK OF EACH INDIVIDUAL AGE 14 AND OLDER **NINC02**

During the entire year of 2024, what was PERSON'S total income before taxes, including money from jobs, investments, social security, retirement income, child support, unemployment payments, public assistance and so on.

PROBE FOR MILD RESISTANCE: Answers to questions on earnings are important because they help explain whether people can afford the health care they need. Also, the information you provide will be kept confidential and will only be used in summary reports and will not be combined with other information that could identify you in any way.

FOR DK OR HESITATION: If you do not know exactly, your best guess is fine.
VERIFY IF LESS THAN \$5,000 OR GREATER THAN \$500,000

ENTER:

8 FOR DK

9 FOR REF

0 FOR NONE

10 FOR \$10 OR LESS

999,999 FOR \$1 MILLION OR MORE

**ONLY ASK THOSE WHO DON'T KNOW OR REFUSED INC02
NINC03 (Q84)**

It is important to understand incomes so we can better understand insurance coverage and concerns about insurance.

Which of the following income ranges is closest to PERSON'S 2024 total income from all sources?

INTERVIEWER: PROBE: Your best estimate would be fine

- 10 Under \$10,000
- 12 \$10,000 to less than \$20,000
- 13 \$20,000 to less than \$25,000
- 14 \$25,000 to less than \$30,000
- 15 \$30,000 to less than \$35,000
- 16 \$35,000 to less than \$40,000
- 17 \$40,000 to less than \$50,000
- 18 \$50,000 to less than \$60,000
- 19 \$60,000 to less than \$80,000
- 20 \$80,000 to less than \$100,000
- 21 Over \$100,000

- 98 DK
- 99 REF

XIX. Survey Close

GETEMAIL

That's it!

If you provide your email I will arrange to send your \$10 reward for completing the survey.

These rewards are processed by a service called BHN Rewards which allows you to choose a from a variety of store e-gift cards.

IF THEY ASK: This includes Walmart, Target or CVS.

READ AS NEEDED

Your email address will be kept confidential and used only to distribute your reward.

You should receive the reward in the next few weeks.

- 1 GIVES EMAIL
- 2 DOES NOT HAVE EMAIL (GOTO GETADD)
- 3 DOES NOT WANT HONORARIUM (GOTO GETLETTER)

NEWEMAIL

ENTER EMAIL ADDRESS GIVEN BY CLIENT - VERIFY THE EMAIL BEFORE CONTINUING

GETADD

If you can provide your name and address, I can arrange to have the incentive mailed to you.

You should receive the incentive in a few weeks.

- 1 WILL GIVE NAME AND ADDRESS
- 2 WILL NOT GIVE NAME AND ADDRESS (GOTO GETLETTER)

GETADD2

ENTER NAME AND ADDRESS
VERIFY BEFORE PROCEEDING

**ASK IF HOUSEHOLD SENT A PRE-NOTIFICATION LETTER
GETLETTER**

By the way, do you recall receiving a letter about this survey?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

THNX

That is the conclusion of this interview for your household.

If you would like more information about Medicaid or to learn how to obtain insurance through Vermont's insurance marketplace, Vermont Health Connect, visit VermontHealthConnect.gov or call 1-855-899-9600.

Thanks again and good-bye.

Deletions

HH02a

How many years have you lived in Vermont?

TGEND

What is PERSON's gender identity? How does PERSON describe their gender identity?

INSP21

Has this amount increased or decreased since MAY 2021 or has the monthly premium stayed the same?

MCSAT02

How would you rate the range of services covered by Medicaid, Green Mountain Care or Dr. Dynasaur?

INSU03L

Is the reason PERSON does not have health insurance related to the COVID-19 pandemic?

INSU05

Thinking back to the last time PERSON had health insurance, what type of insurance did PERSON have?

CHINS04

Next I would like to ask you about specific reasons why the uninsured members of the household have chosen not to enroll in health insurance through Medicaid also known as Green Mountain Care and Dr. Dynasaur.

CHINS04a

We don't think we would be eligible for it because our employer offers health insurance.

CHINS04b

We don't think we would be eligible because my household makes too much money.

CHINS04c

We would be concerned about being able to see the doctors or health care providers we

CHINS04d

Our household wouldn't want to be receiving government assistance or be on Medicaid.

CHINS04e

The uninsured members of our household don't really need health insurance.

CHINS04g

Our household would worry that the costs would be too high.

CHINS04h

We would be concerned about the quality of care.

CHINS04i

We would be concerned that health care professionals would treat me or my family differently.

INSU09

There are certain requirements based on age and income for eligibility to enroll in Medicaid, also known as Green Mountain Care or Dr. Dynasaur .

If members of your household were eligible to enroll in these programs, how much interest would there be in enrolling members of the household? Would you say the household would be...

INSU23a

What was the reason the application was denied?

INSW03F

Were any of the changes that resulted in a gap in health insurance related to the COVID-19 pandemic?

INSW07

During the gap in health insurance coverage did PERSON

DOCV02a

How many visits were with a specialist?

PROMPT: Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors and others who specialize in one area of health care.

DOCV03

Is there one TYPE of place that everyone living in the household usually goes when they are sick or need medical attention?

DOCV07

Is there a place that PERSON usually goes when sick or in need of medical attention?

If care is provided by telehealth please think of the type of place that is providing care.

DOCV30

During the past 12 months, did anyone visit a walk-in, or urgent care facility when they were sick or injured?

DOCV13

I'm going to read you a list of reasons why some people go to the emergency room.

Please tell me if any of these were important reasons for a visit to a hospital emergency room.

RXU01

These next questions are about prescription medications. Does anyone take prescription drugs on a regular basis?

RXU02

How many different types of prescription drugs does FILL NAME take on a regular basis?

COVID01

These next questions are specifically about the COVID-19 pandemic.

COVID02

Has PERSON experienced any of the following changes in employment due to COVID?

COVID03

Did PERSON maintain health insurance coverage while unemployed?

COVID04

How did they maintain health insurance during that time?

EMP08a

Is PERSON's company headquartered in Vermont or outside the state?

EMP08b

Does PERSON work remotely for the company or is there an office of the company based in VT for which PERSON works?

INC01a

I need to know the family income for the family that includes the following members of the household. Please consider only the following people when thinking about income.

The government considers the people included in a family unit based upon their age, marital status, whether they have children, and whether they are a full time student.

INC02

During the entire year of 2020, what was the total income for THIS FAMILY before taxes, including money from jobs, investments, social security, retirement income, child support, unemployment payments, public assistance, COVID relief payments from the Federal Government and so on.

INC03 (Q84)

It is important to understand incomes so we can better understand insurance coverage and concerns about insurance.

INC04

Was 2024 typical year for THIS FAMILY in terms of income?

INC05

Was THIS FAMILY's income higher or lower than usual?

AGAN

In the future, Vermont may be interested in gathering more information on health insurance issues May we contact you again in the future on some of these issues?