Voice-of-Customer Surveys for HealthCare.gov

Page-Level Survey

| Layout | | |
|---------------|--|--|
| <text></text> | Was this page helpful? I found this page helpful because the content on the page (check all that apply): had the information I needed was trustworthy was up-to-date was written well other Other: Next >> | Was this page helpful? What can we do to improve this page? Enter feedback here Submit |

Questions

- 1. Was this page helpful?
 - Yes
 - No

[IF Q1 RESPONSE is YES]

- 2. I found this page helpful because the content on the page: (check all that apply)
 - Had the information I needed
 - Was trustworthy
 - Was up-to-date
 - Was written clearly
 - Other: _____
- 3. What can we do to improve this page?

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0379. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

- 2. I did not find this page helpful because the content on the page: (check all that apply)
 - a. Had too little information
 - b. Had too much information
 - c. Was confusing
 - d. Was out-of-date
 - e. Other: _____
- 3. What can we do to improve this page?