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Pre-Exposure Survey for Medicare Plan Finder Study

Questions for all experimental conditions

1.	Medicare is a health insurance program for people age 65 or older or who are younger and have some disabilities or End Stage Renal Disease. Have you ever had to pick a Medicare insurance plan for yourself or for someone close to you? Check all that apply.			
		Yes, I have had to pick a Medicare plan for myself		
		Yes, I have had to pick a Medicare plan for someone else		
		No, I have not had to pick a Medicare plan		
2.		12 months, how often did you use the Internet to look for health or medical a for yourself or someone else?		
		Once a week or more		
		Once a month		
		Every few months		
		Less often		
3.	When was medical car	the last time you used the Internet to look for information about health or re?		
		Within the last week		
		Within the last month		
		Within the last year		
		Over a year ago		
		Never		
4.	_	12 months, how often have you used the Internet to look for advice or about doctors, hospitals, or health insurance plans?		
		Once a week or more		
		Once a month		
		Every few months		
		Less often		

5.	How much attention do you pay to information about health or medical topics on the Internet?			
			A lot	
			Some	
			A little	
			Not at all	
6.	Information comparing different doctors, hospitals, or health insurance plans is available in different places. For example, it might be given out at work, come to your home by mail, appear in a newspaper or magazine, or be found on the Internet. In the past 12 months, do you remember seeing any information comparing different doctors, hospitals or health plans?			
		YES		
		NO →	IF NO, GO TO #7	
		Not sur	re	
6a.	Did you see any information comparing the quality among different doctors in the past 12 months, or not?			
		YES		
		NO		
		Not sur	re	
6b.	Did you see any information comparing the quality among different hospitals in the past 12 months, or not?			
		YES		
		NO		
		Not sur	re	
6c.	Did you see any information comparing the quality among different health plans in the past 12 months, or not?			
		YES		
		NO		
		Not sur	re	

Use the scale provided to indicate how much you agree or disagree with each of the following statements about your health and interactions with your health care provider (that is, your primary care doctor).

7.	When all is said and done, I am the person who is responsible for managing my health condition.		
		Strongly disagree	
		Somewhat disagree	
		Neither agree nor disagree	
		Somewhat agree	
		Strongly agree	
8.	_	tive role in my own health care is the most important factor in determining my ility to function.	
		Strongly disagree	
		Somewhat disagree	
		Neither agree nor disagree	
		Somewhat agree	
		Strongly agree	
9.		nt that I can take actions that will help prevent or minimize some symptoms or ociated with my health condition.	
		Strongly disagree	
		Somewhat disagree	
		Neither agree nor disagree	
		Somewhat agree	
		Strongly agree	
10.	I am confider health proble	nt that I can tell when I need to go get medical care and when I can handle a m myself.	
		Strongly disagree	
		Somewhat disagree	

		Neither agree nor disagree
		Somewhat agree
		Strongly agree
11.	I am confident not ask.	I can tell my health care provider concerns I have even when he or she does
		Strongly disagree
		Somewhat disagree
		Neither agree nor disagree
		Somewhat agree
		Strongly agree
12.	I am confident	that I can follow through on medical treatments I need to do at home
		Strongly disagree
		Somewhat disagree
		Neither agree nor disagree
		Somewhat agree
		Strongly agree
13.	How confident care?	are you that you can identify when it is necessary for you to get medical
		Not at all confident
		Somewhat confident
		Confident
		Very confident
14.	How frequently to cover?	do you bring to your doctor visits a list of questions or concerns you want
		Never
		Sometimes
		Usually
		Always

15.	In general, how would you rate your overall health?
	□ Excellent
	□ Very good
	□ Good
	□ Fair
	□ Poor
16. heal	In the last 12 months, how many times did you go to a doctor's office or clinic to ge th care for yourself?
	□ None
	\square 2
	\square 3
	□ 4
	□ 5 to 9
	□ 10 or more times

These last questions are about you and will help us to describe all the people we interview.