Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
Heading	YOUR FORMER PRESCRIPTION DRUG PLAN	Heading	YOUR FORMER PRESCRIPTION DRUG PLAN
Directions	**We are sending you this survey because we believe you recently left, switched or were dropped by a prescription drug plan.**	Directions	**We are sending you this survey because we believe you recently left or were dropped by a prescription drug plan, or switched prescription drug plans.**
1	Our records show that you used to belong to [PLAN NAME], but no longer belong to that plan. Is that right? □ Yes □ No □ If No, go to #3	1	Our records show that you used to belong to [PLAN NAME], but no longer belong to that plan. Is that right? □Yes □ If Yes, go to Question 2 □I left or was dropped by a plan but it was not [PLAN NAME] □ Go to Question 2 □No, I did not belong to [PLAN NAME] □No, I still belong to [PLAN NAME] If you answered No to Question 1, please stop and return the survey. You DO NOT have to complete the survey.

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
2	Did you move outside of the area where [PLAN NAME] was available? □ Yes If Yes, Please stop and return the survey □ No If No, go to #6	2	Did you have to leave or switch [PLAN NAME] for any of the following reasons? □ I moved outside of the area where the plan was available □ I was dropped by the plan □The plan was cancelled or discontinued in my area □ The plan was changed by the organization that provides my insurance (such as an employer or a union) PLEASE READ: If you checked any of the reasons above, please stop and return the survey. You DO NOT have to complete the survey. o None of the above --> If you did not choose any of the reasons in Question 2 please continue to Question 3
3	Do you still belong to [PLAN NAME]? □ Yes If Yes, Please stop and return this survey □ No Dropped		Dropped

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
4	Did you recently leave, switch, or were you dropped by a prescription drug plan? ? Yes ? No If No, Please stop and return this survey		Dropped
5	What is the name of the prescription drug plan you recently left, switched or were dropped by? (Please print) _____ __ Please think of this plan as you answer the questions in this survey.		Dropped
Heading	**GETTING INFORMATION OR HELP FROM YOUR FORMER PRESCRIPTION DRUG PLAN**	Heading	**GETTING INFORMATION OR HELP FROM YOUR FORMER PRESCRIPTION DRUG PLAN**
Directions	**These questions ask about your experience with your former prescription drug plan.**		**These questions ask about your experience with your former prescription drug plan. As you answer the rest of the questions in this survey, please think only of your former plan.**

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
6	Customer service is information you get from staff about what is covered and how to use the plan. Did you ever try to get information or help from [PLAN NAME]'s customer service? Yes No If No, go to #8	3	Customer service is information you get from staff about what is covered and how to use the plan. Did you ever try to get information or help from [PLAN NAME]'s customer service? Yes No If No, go to #5
7	How often did the plan's customer service give you the information or help you needed? Never Sometimes Usually Always I did not try to get information or help from the plan's customer service	4	How often did the plan's customer service give you the information or help you needed? Never Sometimes Usually Always I did not try to get information or help from the plan's customer service
8	Did you ever try to get information from the plan about which prescription medicines were covered? Yes No If No, go to #10	5	Did you ever try to get information from the plan about which prescription medicines were covered? Yes No If No, go to #7

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
9	How often did the plan give you all the information you needed about which prescription medicines were covered? □ Never □ Sometimes □ Usually □ Always □ I did not try to get information about which prescription medicines were covered	6	How often did the plan give you all the information you needed about which prescription medicines were covered? □ Never □ Sometimes □ Usually □ Always □ I did not try to get information about which prescription medicines were covered
10	Did you ever try to get information from the plan about how much you would have to pay for a prescription medicine? □ Yes □ No If No, go to #12	7	Did you ever try to get information from the plan about how much you would have to pay for a prescription medicine? □ Yes □ No □ If No, go to #9
11	How often did the plan give you all the information you needed about how much you would have to pay for a prescription medicine? □ Never □ Sometimes □ Usually □ Always □ I did not try to get information about how much I would have to pay for a prescription medicine	8	How often did the plan give you all the information you needed about how much you would have to pay for a prescription medicine? □ Never □ Sometimes □ Usually □ Always □ I did not try to get information about how much I would have to pay for a prescription medicine

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
12	Did you ever need written information from the plan in a language other than English? Yes No If No, go to #14	9	Did you ever need written information from the plan in a language other than English? Yes No If No, go to #11
13	How often did the plan give you written information in a language other than English? Never Sometimes Usually Always I did not need written information in a language other than English	10	How often did the plan give you written information in a language other than English? Never Sometimes Usually Always I did not need written information in a language other than English
Heading	**GETTING INFORMATION OR HELP FROM YOUR FORMER PRESCRIPTION DRUG PLAN**	**Heading**	**GETTING INFORMATION OR HELP FROM YOUR FORMER PRESCRIPTION DRUG PLAN**
14	Did a doctor ever prescribe a medicine for you that the plan did not cover? Yes No	11	Did a doctor ever prescribe a medicine for you that the plan did not cover? Yes No
15	How often was it easy to use the plan to get the medicines your doctor prescribed? Never Sometimes Usually Always I did not use the plan to get any prescription medicines	12	How often was it easy to use the plan to get the medicines your doctor prescribed? Never Sometimes Usually Always I did not use the plan to get any prescription medicines

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
16	Did you ever use the plan to fill a prescription at a local pharmacy? Yes No If No, go to #18	13	Did you ever use the plan to fill a prescription at a local pharmacy? Yes No If No, go to #15
17	How often was it easy to use the plan to fill a prescription at a local pharmacy? Never Sometimes Usually Always I did not use the plan to fill a prescription at a local pharmacy	14	How often was it easy to use the plan to fill a prescription at a local pharmacy? Never Sometimes Usually Always I did not use the plan to fill a prescription at a local pharmacy
18	Did you ever use the plan to fill any prescriptions by mail? Yes No If No, go to #20	15	Did you ever use the plan to fill a prescription at a local pharmacy? Yes No If No, go to #15
19	How often was it easy to use the plan to fill prescriptions by mail? Never Sometimes Usually Always I did not use the plan to fill a prescription by mail	16	How often was it easy to use the plan to fill prescriptions by mail? Never Sometime Usually Always I did not use the plan to fill a prescription by mail

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
20	Using any number from 0 to 10, where 0 is the worst prescription drug plan possible and 10 is the best prescription drug plan possible, what number would you use to rate the plan? □ 0 Worst prescription drug plan □ 1 possible □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Best prescription drug plan possible	17	Using any number from 0 to 10, where 0 is the worst prescription drug plan possible and 10 is the best prescription drug plan possible, what number would you use to rate the plan? □ 0 Worst prescription drug plan □ 1 possible □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Best prescription drug plan possible
Heading	**REASONS YOU LEFT YOUR FORMER PRESCRIPTION DRUG PLAN**	**Heading**	**REASONS YOU LEFT YOUR FORMER PRESCRIPTION DRUG PLAN**
Directions:	People leave, switch or drop a prescription drug plan for different reasons. These questions are about reasons you may have had for switching, leaving, or dropping [PLAN NAME]. In this survey we use the words “did you leave” to ask about why you left, dropped. or switched from your former prescription drug plan.	Directions:	People leave, drop, or switch prescription drug plans for different reasons. These questions are about reasons you may have had for switching, leaving, or dropping [PLAN NAME].

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
21	Did you leave the plan because you found out that someone had signed you up for the plan without your permission? □ Yes □ No	18	Did you leave the plan because you found out that someone had signed you up for the plan without your permission? □ Yes □ No
22	Did you leave the plan because you were accidentally taken off the plan (or because of some other paperwork or clerical error)? □ Yes □ No	19	Did you leave the plan because you were accidentally taken off the plan (or because of some other paperwork or clerical error)? □ Yes □ No
23	A premium is the amount that you pay to have prescription medicine coverage from a prescription drug plan. Some prescription drug plans charge a premium to people on Medicare who are enrolled in that prescription drug plan. Did you leave the plan because the monthly premium for prescription medicine coverage went up? □ Yes □ No	20	Some Medicare beneficiaries have to pay their prescription drug plan a monthly fee out of their own pocket for coverage for prescription medicines. Did you leave the plan because the monthly fee that the plan charges to provide coverage for prescription medicines went up? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
24	Did you leave the plan because you stopped paying the monthly premium for the plan? □ Yes □ No If No, go to #26	21	Did you leave the plan because you stopped paying the monthly fee for coverage for prescription medicines? □ Yes □ No □ If No, go to #23
25	Why did you stop paying the monthly premium for the plan? □ I stopped paying the monthly premium because I could not afford it □ I stopped paying the monthly premium because I was unhappy with the plan □ I stopped paying the monthly premium for some other reason	22	Why did you stop paying the the plan's monthly fee? □ I stopped paying the monthly fee because I could not afford it □ I stopped paying the monthly fee because I was unhappy with the plan □ I stopped paying the monthly fee for some other reason
26	A formulary is the list of prescription medicines covered by a prescription drug plan. Did you leave the plan because of a change in the formulary? □ Yes □ No	23	Prescription drug plans have a list of the prescription medicines that the plan will cover. Did you leave the plan because they changed the list of prescription medicines they cover? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
27	Did you leave the plan because you hit the temporary limit (also called the “coverage gap” or “donut hole”) when you had to pay all of the costs of your prescription medicines up to a yearly limit? □ Yes □ No		Dropped
28	Did you leave the plan because the dollar amount you had to pay each time you filled or refilled a prescription went up? □ Yes □ No	24	Did you leave the plan because the dollar amount you had to pay each time you filled or refilled a prescription went up? □ Yes □ No
29	Did you leave the plan because you found a prescription drug plan that costs less? □ Yes □ No	25	Did you leave the plan because you found a prescription drug plan that costs less? □ Yes □ No
30	Did you leave the plan because a change in your personal finances meant you could no longer afford the plan? □ Yes □ No	26	Did you leave the plan because a change in your personal finances meant you could no longer afford the plan? □ Yes □ No
31	Did you leave the plan because the plan refused to pay for a medicine your doctor prescribed? □ Yes □ No	27	Did you leave the plan because the plan refused to pay for a medicine your doctor prescribed? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
32	Did you leave the plan because you had problems getting the medicines your doctor prescribed? □ Yes □ No	28	Did you leave the plan because the plan refused to pay for a medicine your doctor prescribed? □ Yes □ No
33	Did you leave the plan because it was difficult to get brand name medicines? □ Yes □ No	29	Did you leave the plan because it was difficult to get brand name medicines? □ Yes □ No
34	Did you leave the plan because you were frustrated by the plan's approval process for medicines your doctor prescribed that were not on their formulary? □ Yes □ No	30	Did you leave the plan because you were frustrated by the plan's approval process for medicines your doctor prescribed that were not on the plan's list of medicines that the plan covers? □ Yes □ No
35	Did you leave the plan because you did not know whom to contact when you had a problem filling or refilling a prescription? □ Yes □ No	31	Did you leave the plan because you did not know whom to contact when you had a problem filling or refilling a prescription? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
36	Did you leave the plan because it was hard to get information from the plan -- like which prescription medicines were covered or how much a specific medicine would cost? □ Yes □ No	32	Did you leave the plan because it was hard to get information from the plan -- like which prescription medicines were covered or how much a specific medicine would cost? □ Yes □ No
37	Did you leave the plan because you were unhappy with how the plan handled a question or complaint? □ Yes □ No	33	Did you leave the plan because you were unhappy with how the plan handled a question or complaint? □ Yes □ No
38	Did you leave the plan because you could not get the information or help you needed from the plan? □ Yes □ No	34	Did you leave the plan because you could not get the information or help you needed from the plan? □ Yes □ No
39	Did you leave the plan because their customer service staff did not treat you with courtesy and respect? □ Yes □ No	35	Did you leave the plan because their customer service staff did not treat you with courtesy and respect? □ Yes □ No
Heading	**OTHER REASONS FOR LEAVING YOUR FORMER PRESCRIPTION DRUG PLAN**	**Heading**	**OTHER REASONS FOR LEAVING YOUR FORMER PRESCRIPTION DRUG PLAN**

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
Directions	**Not included.**		**Every year Medicare evaluates all Medicare prescription drug plans and gives each plan a quality rating. The ratings are referred to as the Medicare star or plan ratings. The ratings provide Medicare beneficiaries information on the quality of services a plan provides.**
	Not included.	36	Did you leave the plan because it got a low Medicare star rating? □ Yes □ No
	Not included.	37	Did you leave the plan because you found another plan with a higher Medicare star rating? □ Yes □ No
	Not included.	38	In the past year, did you think about the Medicare star or plan ratings when making a decision about enrolling in a prescription drug plan? □ Yes □ No
40	Did you leave [PLAN NAME] because it wasn't what you expected? □ Yes □ No		Dropped

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
41	Did you leave the plan because a doctor or pharmacist told you that another plan had better benefits or coverage for prescription medicines? □ Yes □ No		Dropped
42	Did you leave the plan because a family member or friend told you that another prescription drug plan was a better plan? □ Yes □ No	39	Did you leave the plan because a family member or friend told you that another prescription drug plan was a better plan? □ Yes □ No
43	Did you leave the plan because you saw a commercial or advertisement for a prescription drug plan you thought you would like better? □ Yes □ No	40	Did you leave the plan because you saw a commercial or advertisement for a prescription drug plan you thought you would like better? □ Yes □ No
44	Did you leave the plan because you found another plan that better met your prescription needs? □ Yes □ No	41	Did you leave the plan because you found another plan that better met your prescription needs? □ Yes □ No
45	Did you leave the plan because you take very few prescription medicines and don't need a prescription drug plan? □ Yes □ No	42	Did you leave the plan because you take very few prescription medicines and don't need a prescription drug plan? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
46	What was the one most important reason you left [PLAN NAME]? (please print) _____ _____ ____	43	What was the one most important reason you left [PLAN NAME]? (Check one) ? Financial or cost reasons ? Problems getting prescription drugs through the plan ? Problems getting information from the plan about prescription drugs ? Switched to another plan that offers better benefits or coverage ? Another reason. Please specify: _____ _____
Heading	**YOUR EXPERIENCE WITH INSURANCE AGENTS, BROKERS, OR PLAN REPRESENTATIVES**	**Heading**	**YOUR EXPERIENCE WITH INSURANCE AGENTS, BROKERS, OR PLAN REPRESENTATIVES**
47	Different kinds of people sell health insurance. Insurance may be sold by independent insurance agents or brokers who don't work for the health plan OR by plan representatives who work directly for the plan. Did an insurance agent, broker, or plan representative ever call you without your asking them to, to tell you about insurance for prescription medicines? ? Yes ? No	44	Different kinds of people sell health insurance. Insurance may be sold by independent insurance agents or brokers who don't work for the health plan OR by plan representatives who work directly for the plan. Did an insurance agent, broker, or plan representative ever call you without your asking them to, to tell you about insurance for prescription medicines? ? Yes ? No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
48	Did an insurance agent, broker, or plan representative ever visit your home you without your asking them to, to tell you about insurance for prescription medicines? □ Yes □ No	45	Did an insurance agent, broker, or plan representative ever visit your home without your asking them to, to tell you about insurance for prescription medicines? □ Yes □ No
49	Did you decide to leave [PLAN NAME] because of information you got from an insurance agent, broker, or plan representative? □ Yes □ No	46	Did you decide to leave [PLAN NAME] because of information you got from an insurance agent, broker, or plan representative? □ Yes □ No
50	Did an insurance agent or broker give you any information that was not correct? □ Yes □ No If No, go to #52	47	Did an insurance agent, broker, or plan representative give you any information that was <u>not</u> correct? □ Yes □ No□ If No, go to #49

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
51	What kind of information was not correct? □ What the plan covered □ What the plan would cost you □ Which pharmacies were covered by the plan □ Some other information (Please print) _____ □ I did not get any information that was not correct	48	What kind of information was not correct? Please check all that apply. □ What the plan covered □ What the plan would cost you □ Which pharmacies were covered by the plan □ Some other information (please print) _____ _____
Heading	**ABOUT YOU**	Heading	**ABOUT YOU**
52	In general, how would you rate your overall health? □ Excellent □ Very good □ Good □ Fair □ Poor	49	In general, how would you rate your overall health? □ Excellent □ Very good □ Good □ Fair □ Poor
53	In general, how would you rate your overall mental health? □ Excellent □ Very good □ Good □ Fair □ Poor	50	50. In general, how would you rate your overall mental health? □ Excellent □ Very good □ Good □ Fair □ Poor

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
54	In the last 12 months, how many different prescription medicines did you fill or have refilled? □ None □ 1 to 2 medicines □ 3 to 5 medicines □ 6 or more medicines	51	In the last 12 months, how many different prescription medicines did you fill? (Don't count the same prescriptions twice) □ None □ 1 to 2 medicines □ 3 to 5 medicines □ 6 or more medicines
55	In the past 12 months, have you seen a doctor or other health provider 3 or more times for the same condition or problem? □ Yes □ No □□ If No, go to #57	52	In the past 12 months, have you seen a doctor or other health provider 3 or more times for the same condition or problem? □ Yes □ No-->If No, go to #54
56	Is this a condition or problem that has lasted for at least 3 months? □ Yes □ No	53	Is this a condition or problem that has lasted for at least 3 months? □ Yes □ No
57	Do you now need or take medicine prescribed by a doctor? □ Yes □ No If No, go to #59	54	Do you now need or take medicine prescribed by a doctor? □ Yes □ No □ If No, go to #56
58	Is this to treat a condition that has lasted for at least 3 months? □ Yes □ No	55	Is this to treat a condition that has lasted for at least 3 months? □ Yes □ No

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
59	Has a doctor ever told you that you had any of the following conditions? a. A heart attack? □ Yes □ No b. Angina or coronary heart disease? □ Yes □ No c. A stroke? □ Yes □ No d. Cancer, other than skin cancer? □ Yes □ No e. Emphysema, asthma or COPD (chronic obstructive pulmonary disease)? □ Yes □ No f. Any kind of diabetes or high blood sugar? □ Yes □ No	56	Has a doctor ever told you that you had any of the following conditions? a. A heart attack? □ Yes □ No b. Angina or coronary heart disease? □ Yes □ No c. Hypertension of high blood pressure? □ Yes □ No d. Cancer, other than skin cancer? □ Yes □ No e. Emphysema, asthma or COPD (chronic obstructive pulmonary disease)? □ Yes □ No f. Any kind of diabetes or high blood sugar? □ Yes □ No
60	What is your age? □ 18 to 24 □ 25 to 34 □ 35 to 44 □ 45 to 54 □ 55 to 64 □ 65 to 74 □ 75 to 79 □ 80 to 84 □ 85 or older	57	What is your age? □ 18 to 24 □ 25 to 34 □ 35 to 44 □ 45 to 54 □ 55 to 64 □ 65 to 74 □ 75 to 79 □ 80 to 84 □ 85 or older
61	Are you male or female? □ Male □ Female	58	Are you male or female? □ Male □ Female

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
62	What is the highest grade or level of school that you have completed? □ 8th grade or less □ Some high school, but did not graduate □ High school graduate or GED □ Some college or 2-year degree □ 4-year college graduate □ More than 4-year college degree	59	What is the highest grade or level of school that you have completed? □ 8th grade or less □ Some high school, but did not graduate □ High school graduate or GED □ Some college or 2-year degree □ 4-year college graduate □ More than 4-year college degree
63	Are you of Hispanic or Latino origin or descent? □ Yes, Hispanic or Latino □ No, not Hispanic or Latino	60	Are you of Hispanic or Latino origin or descent? □ Yes, Hispanic or Latino □ No, not Hispanic or Latino
64	What is your race? Please mark one or more. □ White □ Black or African-American □ Asian □ Native Hawaiian or other Pacific Islander □ American Indian or Alaska Native	61	What is your race? Please mark one or more. □ White □ Black or African-American □ Asian □ Native Hawaiian or other Pacific Islander □ American Indian or Alaska Native
65	What language do you mainly speak at home? □ Chinese □ English □ Russian □ Spanish □ Vietnamese □ Some other language (Please print) _____ __	62	What language do you mainly speak at home? □ Chinese □ English □ Russian □ Spanish □ Vietnamese □ Some other language (please print) _____ _

Question Number	2010 Version: PDP_Pilot	Question Number	2013 Version: 2PDP Survey
66	Did someone help you complete this survey? □ Yes □ No If No, Go to #68	63	Did someone help you complete this survey? □ Yes □ No If No, Go to #65
67	How did that person help you? Please mark one or more. □ Read the questions to me □ Entered the answers I gave □ Answered the questions for me □ Translated the questions into my language □ Helped in some other way (Please print) _____ __	64	How did that person help you? Please mark one or more. □ Read the questions to me □ Entered the answers I gave □ Answered the questions for me □ Translated the questions into my language □ Helped in some other way (please print) _____ __
68	The Medicare Program is trying to learn more about the health care or services provided to people with Medicare. May we contact you again about the health care services that you received? □ Yes □ No	65	The Medicare Program is trying to learn more about the health care or services provided to people with Medicare. May we contact you again about the health care services that you received? □ Yes □ No

Description of Change	Comments
No change to wording.	
Changed word order/added underlining for emphasis.	
Findings from the field test indicate that some beneficiaries had difficulty navigating the front end questions. We expanded the response options in question 1 to make it easier to screen out as well as identify beneficiaries who truly didn't disenroll voluntarily.	

Description of Change	Comments
Findings from the field test indicate that some beneficiaries had difficulty navigating the front end questions. We re-worded question 2 and expanded the response options to make it easier to navigate this question and to better identify and screen out beneficiaries who truly didn't disenroll voluntarily.	
Dropped this question to improve navigation and to make it easier to screen out beneficiaries who did not disenroll voluntarily (this question was folded into the response options for question 1).	

Description of Change	Comments
Dropped this question to improve navigation and to make it easier to screen out beneficiaries who did not disenroll voluntarily (this question was folded into the response options for question 1).	
Dropped this question as it did not seem to include navigation of the survey.	
No change to wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to wording.	
Changed wording order in the first sentence and dropped the last sentence to reduce reading burden.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
Shortened and revised question wording to make it easier to understand based on findings from cognitive interviews (avoid using the term "premium" and instead describe what a premium is).	

Description of Change	Comments
Revised question wording to make it easier to understand based on findings from cognitive interviews.	
Revised question wording to make it easier to understand based on findings from cognitive interviews.	
Revised question wording to make it easier to understand based on findings from cognitive interviews (avoid using the word "formulary").	

Description of Change	Comments
Dropped based on findings from field test (item with low endorsement).	
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
Revised question wording to make it easier to understand based on findings from cognitive interviews (avoid using the word "formulary").	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to wording.	

Description of Change	Comments
New text.	
New Item added upon request from CMS.	
New Item added upon request from CMS.	
New Item added upon request from CMS.	
Dropped based on findings from field test (item with low endorsement).	

Description of Change	Comments
Dropped based on findings from field test (item with low endorsement).	
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
Revised item to make it a close-ended item (created response options from open ended responses from the field test).	
No change to wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
Dropped the last response option added instruction to the question for clarity.	
No change to wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
Added instructions based on findings from cognitive interviews.	
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
Changed option c from "Stroke" to "Hypertension or high blood pressure."	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	
No change to item wording.	

Description of Change	Comments
No change to item wording.	
No change to item wording.	
No change to item wording.	