

*These specifications will be programmed into Centurion to create one seamless data collection instrument to accommodate both modes (Web and CATI). Respondents cannot have access to both versions at the same time (e.g., the online version if the telephone interview is also occurring simultaneously in real time).

Attachment 3f NHCIS Multi-Mode Study (10 minutes)

Form approved
OMB No. 0920-0214
Approval Expires 08/31/2014

**2013 National Health Interview Survey Follow-Back Survey on the
Affordable Care Act
Web and CATI Instrument Specifications***

Sponsored by the National Center for Health Statistics,
Centers for Disease Control and Prevention
Conducted by the United States Census Bureau
Questionnaire Version (5.7): January 15, 2013

- SECTION 1: LOCATE ELIGIBLE 2012 NHIS SAMPLE ADULT RESPONDENT.....
 - SECTION 2: CONFIRM IDENTITY OF ELIGIBLE RESPONDENT.....
 - SECTION 3: INFORMED CONSENT.....
 - SECTION 4: FINANCIAL BURDEN OF MEDICAL CARE.....
 - SECTION 5: HEALTH STATUS.....
 - SECTION 6: ACCESS & UTILIZATION OF HEALTH CARE.....
 - SECTION 7: HEALTH INSURANCE.....
 - SECTION 8: PREVENTIVE SERVICES.....
 - SECTION 9: FAMILY FOOD SECURITY.....
 - SECTION 10: SMOKING.....
 - SECTION 11: MARITAL & EMPLOYMENT STATUS.....
 - SECTION 12: CONTACT INFORMATION.....
- CALLBACK & ANSWERING MACHINE SCRIPTS.....

The following public burden estimate statement must be available as a CATI and Web screen.

Assurance of Confidentiality (NOTICE): Information collected on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence and will only be used for statistical purposes by employees or agents of NCHS. No information that would identify an individual or establishment will be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (44 USC 3501 note). If any federal employee, contractor, or agent knowingly shares identifiable information collected under this pledge of confidentiality with a person not entitled to have it, he or she can be fined up to \$250,000, and/or imprisoned for up to 5 years.

Congress authorized the NHIS data collection in Section 306 of the Public Health Service Act (42 USC 242m(d)). Public reporting burden of this collection of information is estimated to average about 15-20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports, Clearance Officer; Paperwork Reduction Project (0920-0214), 1600 Clifton Rd., MS D-24, Atlanta, GA 30333.

Data collection conducted under contract to the CDC by the United States Census Bureau.

TEXT FORMAT KEY

Yellow highlighted text:

Help screen text

Blue highlighted text:

Update or pre-fill with pertinent variable name, information, or data from the 2012 NHIS.

[TEXT IN ALL CAPS & BRACKETS]: Programmer instructions for the 2013 Follow-Back Survey, or text fills.

Text in Italics

Information or examples that telephone interviewers need to read to 2013 Follow-Back CATI respondents. For web respondents, this text will appear on the screen to read him/herself.

TEXT IN ALL CAPS & ITALICS:

Instructions to interviewers or response options that should not be read, only selected if applicable

PRELOADED DATA FROM 2012 NHIS VARIABLES TO USE IN THE 2013 FOLLOW-BACK SURVEY:

2012 NHIS VARIABLE NAME	2012 NHIS VARIABLE NAME DESCRIPTION	VARIABLE TYPE	# OF CHARACTERS
	Interview month		
	Interview year		
	Sample adult name (F, M, L)		
	Sample adult age and DOB		
	Sample adult sex		
	Household roster (names, DOB, sex)		

SECTION 1:
Locate Eligible 2012 NHIS Sample Adult Respondent

[IF THIS IS AN INTERVIEWER-INITIATED FIRST CALL OR FOLLOW-UP CALL WITHOUT AN APPOINTMENT, GO TO INTRO_A;

IF THIS IS AN INTERVIEWER-INITIATED FOLLOW-UP CALL WITH APPOINTMENT, GO TO INTRO_B;

IF THIS IS A RESPONDENT-INITIATED CALL TO TOLL-FREE NUMBER IN RESPONSE TO ADVANCE MAILING, EMAIL OR VOICE MAIL, GO TO ANSWER_C]

Scenario A: Interviewer-initiated first call or follow-up call without appointment

INTRO_A ***IF AT ANY TIME THE PERSON WHO PICKS UP THE PHONE ASKS WHY WE'RE LOOKING FOR THE PERSON WITH AT NAME OR THOSE CHARACTERISTICS, RESPOND WITH: "We're conducting a survey on health care cost and utilization among people who share the same or similar characteristics, such as age or gender." DO NOT, UNDER ANY CIRCUMSTANCES, INDICATE IN ANY WAY THAT SOMEONE IN THAT HOUSEHOLD, INCLUDING THE SA, PREVIOUSLY PARTICIPATED IN THE NHIS.***

Hello, my name is _____. I'm calling on behalf of the CDC's National Center for Health Statistics or N-C-H-S.

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS, GENDER, AND AGE ARE KNOWN: "May I please speak to the [FEMALE/MALE] whose [NAME IS/INITIALS ARE] _____ and who is about [ESTIMATED AGE] years old?"]

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS AND AGE ARE KNOWN: "May I please speak to the person whose [NAME IS/INITIALS ARE] _____ and who is about [ESTIMATED AGE] years old?"]

[IF ONLY THE 2012 SAMPLE ADULT'S NAME OR INITIALS ARE KNOWN: "May I please speak to [NAME/"a person whose initials are _____"]?"]

[IF ONLY THE 2012 SAMPLE ADULT'S GENDER AND AGE ARE KNOWN: "May I please speak to the [MALE/FEMALE] adult who is about [ESTIMATED AGE] years old?"]

[IF ONLY GENDER IS KNOWN: "How many [MALES/FEMALES] live in your household?" IF ONLY ONE PERSON OF THE SAMPLE ADULT GENDER, SAY: "May I please speak to [HIM/HER]?"]

[IF ONLY AGE IS KNOWN: "Does someone live in your household who is about [ESTIMATED AGE] years old?" IF YES, SAY: "Is there anyone else of that age in your household?" IF ONLY ONE PERSON OF APPROXIMATE SAMPLE ADULT AGE, SAY: "May I please speak to the person who is about [ESTIMATED AGE] years old?"]

1 *I AM THAT PERSON*
Skip Instructions: go to [PHONE]

- 2 *YES, LET ME GET HIM OR HER*
Skip Instructions: go to [INTRO_A]
- 3 *LET ME GO GET AN ADULT*
Skip Instructions: go to [INTRO_A]
- 4 *NO, THAT PERSON HAS MOVED OR HAS A NEW PHONE NUMBER*
Skip Instructions: go to [LOC_A]
- 5 *NO, THAT PERSON HAS DIED*
Skip Instructions: go to [DECEASED]
- 6 *AM/VM INDICATES BUSINESS*
Skip Instructions: go to [SALZ_BUS]
- 7 *HUDI (HANG UP DURING INTRODUCTION)*
- 8 *RESPONDENT WANTS A COPY OF THE ADVANCE LETTER MAILED*
Skip Instructions: go to [M1_NAME]
- 9 *RESPONDENT SAYS THEY WILL CALL TOLL-FREE LINE AFTER
REVIEWING THE SURVEY WEBSITE OR ADVANCE LETTER*
Skip Instructions: go to [EXIT]
- 10 *RESPONDENT SAYS TO CALL BACK AT A LATER TIME*
Skip Instructions: go to [CALBK]
- 11 *RESPONDENT INDICATES THIS IS A BUSINESS LINE*
Skip Instructions: go to [SALZ_BUS]
- 12 *PERSON ON THE PHONE SAYS SAMPLE ADULT IS INCAPABLE*
Skip Instructions: go to [DIFF_Q]
- 97 *REFUSED*
Skip Instructions: go to [UNKNOWN]
- 99 *DON'T KNOW*
Skip Instructions: go to [UNKNOWN]

Scenario B: Interviewer-initiated follow-up call with appointment

INTRO_B

IF AT ANY TIME THE PERSON WHO PICKS UP THE PHONE ASKS WHY WE'RE LOOKING FOR THE PERSON WITH AT NAME OR THOSE CHARACTERISTICS, RESPOND WITH: "We're conducting a survey on health care cost and utilization among people who share the same or similar characteristics, such as age or gender." DO NOT, UNDER ANY CIRCUMSTANCES, INDICATE IN ANY WAY THAT SOMEONE IN THAT HOUSEHOLD, INCLUDING THE SA, PREVIOUSLY PARTICIPATED IN THE NHIS.

Hello, my name is _____. I'm calling on behalf of the CDC's National Center for Health Statistics. We spoke with someone at this phone number earlier [TODAY/THIS WEEK/THIS MONTH] who asked us to call back at this time.

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS, GENDER, AND AGE ARE KNOWN: "Is the [FEMALE/MALE] whose [NAME IS/INITIALS ARE] _____, and who is about [ESTIMATED AGE] years old available?"]

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS AND AGE ARE KNOWN: "Is the person whose [NAME IS/INITIALS ARE] _____ and who is about [ESTIMATED AGE] years old available?"]

[IF ONLY THE 2012 SAMPLE ADULT'S NAME OR INITIALS ARE KNOWN: "Is [NAME/a person whose initials are _____] available?"]

[IF ONLY THE 2012 SAMPLE ADULT'S GENDER AND AGE ARE KNOWN: "Is the [MALE/FEMALE] adult who is about [ESTIMATED AGE] years old available?"]

[IF ONLY AGE IS KNOWN: "Is an adult who is about [ESTIMATED AGE] years old available?"]

[IF GENDER IS KNOWN: "Is a [MALE/FEMALE] adult available?"]

[IF NO INFORMATION IS KNOWN: "Is the person I previously spoke to available?"]

1 *I AM THAT PERSON*

Skip Instructions: go to [PHONE]

2 *YES, LET ME GET HIM OR HER*

Skip Instructions: go to [INTRO_A]

3 *LET ME GO GET AN ADULT*

Skip Instructions: go to [INTRO_A]

4 *NO, THAT PERSON HAS MOVED OR HAS A NEW PHONE NUMBER*

Skip Instructions: go to [LOC_A]

5 *NO, THAT PERSON HAS DIED*

Skip Instructions: go to [DECEASED]

6 *AM/VM INDICATES BUSINESS*

Skip Instructions: go to [SALZ_BUS]

7 *HUDI (HANG UP DURING INTRODUCTION)*

8 *RESPONDENT WANTS A COPY OF THE ADVANCE LETTER MAILED*

Skip Instructions: go to [M1_NAME]

9 *RESPONDENT SAYS THEY WILL CALL TOLL-FREE LINE AFTER REVIEWING THE SURVEY WEBSITE OR ADVANCE LETTER*

Skip Instructions: go to [EXIT]

10 *RESPONDENT SAYS TO CALL BACK AT A LATER TIME*

Skip Instructions: go to [CALBK]

11 *RESPONDENT INDICATES THIS IS A BUSINESS LINE*

Skip Instructions: go to [SALZ_BUS]

12 *PERSON ON THE PHONE SAYS SAMPLE ADULT IS INCAPABLE*

Skip Instructions: go to [DIFF_Q]

97 *REFUSED*

Skip Instructions: go to [UNKNOWN]

99 *DON'T KNOW*

Skip Instructions: go to [UNKNOWN]

Scenario C: Respondent-initiated call to toll-free number in response to advance mailing, email or voice mail

ANSWER_C

ANSWER THE PHONE AND SAY THE FOLLOWING OR SIMILAR:

Hello, this is the call center for the CDC's National Center for Health Statistics. my name is _____ . How may I assist you?

AFTER RESPONDENT INDICATES HE OR SHE IS CALLING ABOUT THE FOLLOW-BACK SURVEY, SAY:

Thank you for your interest in the survey and for taking the time to call us to participate. Let me first collect some basic information from you.

FNAME_C

What is your first name?

_____ *ENTER NAME*

97 *REFUSED*

99 *DON'T KNOW*

MNAME_C

What is your middle name or initial?

_____ *ENTER MIDDLE NAME OR INITIAL*

97 *REFUSED*

99 *DON'T KNOW*

LNAME_C

What is your last name?

_____ *ENTER LAST NAME*

97 *REFUSED*

99 *DON'T KNOW*

TITLE_C

What is your title?

_____ *ENTER TITLE*

97 *REFUSED*

99 *DON'T KNOW*

DOB_C What is your date of birth?
[IF MONTH_C OR DAY_C OR YEAR_C IN (97, 99, 997, 9999):
It is critical that we know your [MONTH/DAY/YEAR] of birth.

MONTH_C *ENTER MONTH*
 ___ [VALID RANGE: 1 THROUGH 12]
 97 *REFUSED*
 99 *DON'T KNOW*
[ADD RANGE CHECK]

DAY_C *ENTER DAY*
 ___ [VALID RANGE: 1 THROUGH 31]
 97 *REFUSED*
 99 *DON'T KNOW*
[ADD RANGE CHECK; ALLOW FOR EXTRA DAY IN LEAP YEARS]

YEAR_C *ENTER YEAR*
 ___ [VALID RANGE: 1900 THROUGH 2000]
 9997 *REFUSED*
 9999 *DON'T KNOW*
[ADD RANGE CHECK]

AGE_YR What is your age?
 ___ *ENTER AGE* [VALID RANGE: 018 THROUGH 125]
 997 *REFUSED*
 999 *DON'T KNOW*
[ADD RANGE CHECK]

SEX_C Are you male or female?
 1 *MALE*
 2 *FEMALE*
 7 *REFUSED*
 9 *DON'T KNOW*

ROSTER_C [COMPUTER DISPLAYS HOUSEHOLD ROSTER FROM 2012 NHIS;
INCLUDE NAMES, ALIASES, GENDER, AGE, DOB FOR ALL HH MEMBERS;
OFFSET SAMPLE ADULT INFORMATION AT TOP OF LIST, IN ALL CAPS]

COMPARE RESPONDENT INFORMATION TO HOUSEHOLD ROSTER

*1 RESPONDENT DEMOGRAPHICS MATCH UP WITH THOSE OF THE
 SA*

Skip Instructions: go to [V0]

2 *DEMOGRAPHICS MATCH UP WITH SOMEONE ELSE IN THE SA'S HOUSEHOLD*

Skip Instructions: go to [INTRO_C]

3 *DEMOGRAPHICS DO NOT MATCH UP WITH ANYONE IN THE HOUSEHOLD*

Skip Instructions: go to [IN_EXIT]

INTRO_C

IF AT ANY TIME THE PERSON WHO PICKS UP THE PHONE ASKS WHY WE'RE LOOKING FOR THE PERSON WITH AT NAME OR THOSE CHARACTERISTICS, RESPOND WITH: "We're conducting a survey on health care cost and utilization among people who share the same or similar characteristics, such as age or gender." DO NOT, UNDER ANY CIRCUMSTANCES, INDICATE IN ANY WAY THAT SOMEONE IN THAT HOUSEHOLD, INCLUDING THE SA, PREVIOUSLY PARTICIPATED IN THE NHIS.

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS, GENDER, AND AGE ARE KNOWN: "We are looking for the [FEMALE/MALE] whose [NAME IS/INITIALS ARE] _____ and who is about [ESTIMATED AGE] years old." Is [HE/SHE] available?]

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS AND AGE ARE KNOWN: "We are looking for the person whose [NAME IS/INITIALS ARE] _____ and who is about [ESTIMATED AGE] years old." Is [HE/SHE] available?]

[IF THE 2012 SAMPLE ADULT'S NAME OR INITIALS ARE KNOWN: "We're looking for [SAMPLE ADULT NAME]. Is that person available?"]

[IF ONLY THE 2012 SAMPLE ADULT'S GENDER AND AGE ARE KNOWN: "We're looking for the [MALE/FEMALE] who is about [ESTIMATED AGE]. Is [HE/SHE] available?"]

[IF ONLY GENDER IS KNOWN AND SA GENDER IS DIFFERENT THAN RESPONDENT GENDER: "We are looking for the [MALE/FEMALE] adult who lives in your household? "Is [HE/SHE] available?"]

[IF ONLY GENDER IS KNOWN AND SA GENDER IS THE SAME AS RESPONDENT GENDER: "We are looking for the other [MALE/FEMALE] adult who lives in your household? "Is [HE/SHE] available?"]

[IF ONLY AGE IS KNOWN: "We're looking for the adult who is about [ESTIMATED AGE] years old. Is that person available?"]

1 *I AM THAT PERSON*

Skip Instructions: go to [PHONE]

2 *YES, LET ME GET HIM OR HER*

Skip Instructions: go to [INTRO_A]

3 *LET ME GO GET AN ADULT*

Skip Instructions: go to [INTRO_A]

4 *NO, THAT PERSON HAS MOVED OR HAS A NEW PHONE NUMBER*

Skip Instructions: go to [LOC_A]

5 *NO, THAT PERSON HAS DIED*

Skip Instructions: go to [DECEASED]

6 *AM/VM INDICATES BUSINESS*

Skip Instructions: go to [SALZ_BUS]

7 *HUDI (HANG UP DURING INTRODUCTION)*

8 *RESPONDENT WANTS A COPY OF THE ADVANCE LETTER MAILED*

Skip Instructions: go to [M1_NAME]

9 *RESPONDENT SAYS THEY WILL CALL TOLL-FREE LINE AFTER
REVIEWING THE SURVEY WEBSITE OR ADVANCE LETTER*

Skip Instructions: go to [EXIT]

10 *RESPONDENT SAYS TO CALL BACK AT A LATER TIME*

Skip Instructions: go to [CALBK]

11 *RESPONDENT INDICATES THIS IS A BUSINESS LINE*

Skip Instructions: go to [SALZ_BUS]

12 *PERSON ON THE PHONE SAYS SAMPLE ADULT IS INCAPABLE*

Skip Instructions: go to [DIFF_Q]

97 *REFUSED*

Skip Instructions: go to [UNKNOWN]

99 *DON'T KNOW*

Skip Instructions: go to [UNKNOWN]

PHONE Are you speaking on a landline or cell phone?

1 LANDLINE

2 CELL PHONE

7 REFUSED

9 DON'T KNOW

Skip Instructions: <1> go to [V0]; <2,7,9> go to [DRIVE]

DRIVE Are you currently driving a car or other motorized vehicle?

*EVEN IF THE RESPONDENT IS USING A HANDS-FREE DEVICE WHILE DRIVING, YOU
MUST END THE CALL*

1 NO

2 YES

3 R PREFERS DIFFERENT NUMBER

4 WRONG TIME ZONE

Skip Instructions: <1> go to [V0]; <2, 3, 4> go to [CALBK]

CALBK I will call you back at another time. What day and time is convenient for you?
1 Agrees to call back
2 Refuses call back
3 Asks if web survey available

Skip Instructions: <1> go to [CB_DATE]; <2,3> go to [WEB_OFFER]

CB_DATE ENTER DAY

__ [VALID RANGE: 1 THROUGH 31]
97 REFUSED
99 DON'T KNOW

[ADD RANGE CHECK; ALLOW FOR EXTRA DAY IN LEAP YEARS]

ENTER MONTH

__ [VALID RANGE: 1 THROUGH 12]
97 REFUSED
99 DON'T KNOW

[ADD RANGE CHECK]

CB_TIME ENTER TIME

__:__ [FORMAT: HH:MM]
97 REFUSED
99 DON'T KNOW

CB_AMPM ENTER AM OR PM

1 AM
2 PM
7 REFUSED
9 DON'T KNOW

NUMBER At which number would you like me to call you?

1 SAME NUMBER [PRE-LOAD NUMBER]
2 DIFFERENT NUMBER; __ RECORD [ADD LINE TO ALLOW RECORDING
OF NEW NUMBER; FORMAT: XXX-XXX-XXXX]
7 REFUSED
9 DON'T KNOW

CELL_TZ In what time zone are you located?

1 KEEP SAME TIME ZONE
2 ATLANTIC
3 EASTERN STANDARD
4 CENTRAL STANDARD
5 STANDARD MOUNTAIN
6 US STANDARD MOUNTAIN (ARIZONA)
7 PACIFIC STANDARD
8 ALASKAN STANDARD
9 HAWAIIAN STANDARD

- 97 *REFUSED*
- 99 *DON'T KNOW*

Skip Instructions: <1-99> go to [CB_EXIT]

SALZ_BUS We are interviewing only private residences. Thank you very much. [END CALL]

M1_NAME *TO SEND A LETTER TO THE PERSON ANSWERING THE PHONE SAY:*
 In order to send you a letter, I will need to collect your name and mailing address. The letter will contain a toll-free number that you may call to complete the interview at your convenience.

READ IF NECESSARY: If you feel uncomfortable giving me your name, I can send the letter to "Resident".)

- M1_NAME Name:
- M1_Street1 Street1:
- M1_Street2 Street2:
- M1_City City:
- M1_State State:
- M1_Zip Zip:
- 1 Terminate the interview
- 7 *REFUSED*
- 9 *DON'T KNOW*

Skip Instructions: <1-9> go to [EXIT]

LOC_A Do you know what their new telephone number is?

- 1 *RESPONDENT CAN PROVIDE A NUMBER*
- 2 *NO TELEPHONE*
- 7 *REFUSED*
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [LOC_AA]; <2-9> go to [LOC_F]

LOC_AA *ENTER NUMBER*
 _____ [FORMAT: XXX-XXX-XXXX]
 97 *DON'T KNOW*
 88 *NONE*
 97 *REFUSED*
 99 *DON'T KNOW*

LOC_B Is that a landline or cell phone number?

- 1 *LANDLINE*
- 2 *CELL*
- 7 *REFUSED*
- 9 *DON'T KNOW*

LOC_C Does this person have any other number where they might be reached?

- 1 *YES*

- 2 *NO*
- 7 *REFUSED*
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [LOC_D]; <2-9> go to [LOC_F]

LOC_D What is that telephone number?
 — *ENTER NUMBER* [FORMAT: XXX-XXX-XXXX]
 88 *NONE*
 97 *REFUSED*
 99 *DON'T KNOW*

Skip Instructions: <97-99> go to [LOC_F]; else go to [LOC_E]

LOC_E Is that a landline or cellular telephone number?
 1 *LANDLINE*
 2 *CELL*
 7 *REFUSED*
 9 *DON'T KNOW*

LOC_F What is their name?
 — *ENTER VERBATIM RESPONSE* [ALLOW UP TO 50 CHARACTERS]
 97 *REFUSED*
 99 *DON'T KNOW*

Skip Instructions: go to [LOC_EXIT]

UNKNOWN Do you know anyone who would be able to tell us how to get in contact with this person?
 1 *YES*
 2 *NO*
 7 *REFUSED*
 9 *DON'T KNOW*

Skip Instructions: <1> go to [INFNAM]; <2-9> go to [EXIT]

INFNAM What is their name?
 — *ENTER VERBATIM RESPONSE* [ALLOW UP TO 50 CHARACTERS]
 97 *REFUSED*
 99 *DON'T KNOW*

Skip Instructions: <1-99> go to [INFNUM]

INFNUM What is [INFNAM/that person's] number?
 — *ENTER NUMBER* [FORMAT: XXX-XXX-XXXX]
 88 *NONE*
 97 *REFUSED*
 99 *DON'T KNOW*

Skip Instructions: <97-99> go to [LOC_EXIT]

DIFF_Q What difficulty does [SA NAME] have that prevents [HIM/HER] from participating?
1 Hearing difficulty
2 Speech difficulty
3 Cognitive barrier
4 Physical barrier
7 REFUSED
9 DON'T KNOW

Skip Instructions: <1,2,4,9> go to [WEB_OFFER]; <3, 7> go to [PROXY]

PROXY Is an adult available who knows about [SA NAME]'s health and healthcare who can answer questions on [HIS/HER] behalf?

- 1 YES, CURRENTLY ON PHONE
- 2 NOT CURRENTLY AVAILABLE [GO TO PROXNAM]
- 7 REFUSED
- 9 DON'T KNOW

Skip Instructions: <1> go to [PROXINT]; <2> go to [PROXNAM]; <7,9> go to [EXIT]

PROXINT Because [SA NAME] cannot be interviewed and you are knowledgeable about [HIS/HER] health and healthcare, the CDC would like to interview you in [HIS/HER] place. Please keep in mind that these questions are written to be asked of [SA NAME] directly, so answer the questions as if they were being asked of [HIM/HER].

- 1 Agrees to continue
- 2 Doesn't have time right now
- 3 Refused

Skip Instructions: <1> go to [VSANAME]; <2> go to [CALBK]; <3> go to [EXIT]

PROXNAM What is their name?

- ___ ENTER VERBATIM RESPONSE [ALLOW UP TO 50 CHARACTERS]
- 97 REFUSED
- 99 DON'T KNOW

Skip Instructions: <1-99> go to [PROXNUM]

PROXNUM What is [INFNAM/that person's] number?

- ___ ENTER NUMBER [FORMAT: XXX-XXX-XXXX]
- 88 NONE
- 97 REFUSED
- 99 DON'T KNOW

Skip Instructions: <97-99> go to [LOC_EXIT]

WEB_OFFER We have a web-based survey available. [WOULD YOU LIKE TO / CAN HE/SHE] complete the survey using the web?

- 1 YES
- 2 NO

Skip Instructions: <1> go to [WEB_INST]; [if <2> and SA on the phone] go to [EXIT]; [if <2> and person other than SA on the phone] go to [PROXY]

WEB_INST We can email or mail a letter to you with directions on completing the survey via web. Which would you prefer?

1 EMAIL WEB LETTER
2 MAIL WEB LETTER

Skip Instructions: <1> go to [WL_EMAIL]; <2> go to [WL_MAIL]

WL_EMAIL What is [YOUR / HIS/HER] email address? _____@_____._____

1 Continue [GO TO WL_EXIT]
7 Refused to give information

Skip Instructions: <1> go to [WL_EXIT]; <7> go to <EXIT>

WL_MAIL What is [YOUR / HIS/HER] mailing address?
ADDRESS COLLECTION GRID

1 Continue [GO TO WL_EXIT]
7 Refused to give information

Skip Instructions: <1> go to [WL_EXIT]; <7> go to <EXIT>

WL_EXIT [YOU / HE/SHE] will be receiving the letter in the next week or two. It will contain information about our web survey. It also contains a toll free number that [YOU / HE/SHE] may call at any time with any questions [YOU / HE/SHE] may have. Thank you for your time. Have a nice day.
TERMINATE CALL

EXIT Thank you for your time. Have a nice day. *TERMINATE CALL*

CB_EXIT Thank you for your time. We look forward to speaking with you on [CB_DATE] at [CB_TIME] [CB_AMPM]. *TERMINATE CALL*

IN_EXIT Those are all the questions I have. You are not eligible for this survey. I'd like to thank you on behalf of the CDC's National Center for Health Statistics for the time and effort you've spent answering these questions.
TERMINATE CALL

LOC_EXIT Thank you for providing this contact information. We will try to contact [HIM/HER]. Thanks for your time and have a nice day.
TERMINATE CALL THEN SET CALLING RULES TO

- IMMEDIATELY DIAL THE NUMBER ENTERED AT LOC_AA
- THEN TRY THE NUMBER ENTERED AT LOC_D IF LOC_AA IS NOT SUCCESSFUL

DECEASED I'm sorry to hear that. I do not need to continue. Thank you, and please accept my condolences. Goodbye. *TERMINATE CALL*

**SECTION 2:
Confirm Identity of Eligible Respondent**

[RESPONDENT SELF-ADMINISTERED WEB INSTRUMENT (RS-AWI) BEGINS HERE]

VSANAME

[DISPLAY PRELOADS AND ALLOW EDITING OF THE DATA IN EACH FIELD BELOW VSA_TITLE THROUGH VSA_SUFFIX AS NEEDED]

We want to make sure our records are correct. Is your name [PRE-LOADED TITLE, FIRST NAME, MIDDLE NAME/INITIAL, LAST NAME, SUFFIX]?

- 1 YES
- 2 NOT EXACTLY, MAKE CORRECTION [ALLOW EDITS TO PRE-LOADED FIELDS]
- 3 NO
- 7 [PHONE CATI: REFUSED/RS-AWI: "PREFER NOT TO ANSWER"]
- 9 DON'T KNOW

VSA_TITLE	Title:	^I_SATITLE
VSA_FNAME	First Name:	^I_SAFNAME
VSA_MNAME	Middle Name:	^I_SAMNAME
VSA_LNAME	Last Name:	^I_SALNAME
VSA_SUFFIX	Suffix:	^I_SASUFFIX

Skip Instructions: <1,2, 7,9> go to [VSADOB]; <3> go to [FNAME_V]

VSADOB

What is your date of birth?

[DISPLAY PRELOADS AND ALLOW EDITING OF THE DATA IN EACH FIELD BELOW VSAMO THROUGH VSAYR AS NEEDED]

- 9997 [PHONE CATI: REFUSED/RS-AWI: "PREFER NOT TO ANSWER"]
- 9999 DON'T KNOW

VSAMONTH	Month:	^I_SAMONTH
VSADAY	Day:	^I_SADAY
VSAYR	Year:	^I_SAYEAR

Skip Instructions: go to SEX_C

FNAME_V

What is your first name?

- ___ ENTER VERBATIM RESPONSE [ALLOW UP TO 50 CHARACTERS]
- 97 [PHONE CATI: REFUSED/RS-AWI: "PREFER NOT TO ANSWER"]
- 99 DON'T KNOW

MNAME_V

What is your middle name or initial?

- ___ ENTER VERBATIM RESPONSE [ALLOW UP TO 50 CHARACTERS]
- 97 [PHONE CATI: REFUSED/RS-AWI: "PREFER NOT TO ANSWER"]
- 99 DON'T KNOW

LNAME_V

What is your last name?

- ___ ENTER VERBATIM RESPONSE [ALLOW UP TO 50 CHARACTERS]
- 97 [PHONE CATI: REFUSED/RS-AWI: "PREFER NOT TO ANSWER"]
- 99 DON'T KNOW

TITLE_V What is your title?
 — *ENTER VERBATIM RESPONSE [ALLOW UP TO 10 CHARACTERS]*
 97 [PHONE CATI: *REFUSED/RS-AWI: "PREFER NOT TO ANSWER"*]
 99 *DON'T KNOW*

DOB_V What is your date of birth?
 [IF MONTH OR DAY OR YEAR IN (97, 99, 997, 9999)]
 It is critical that we know your [MONTH/DAY/YEAR] of birth.

ENTER MONTH
 — [VALID RANGE: 1 THROUGH 12]
 97 [PHONE CATI: *REFUSED/RS-AWI: "PREFER NOT TO ANSWER"*]
 99 *DON'T KNOW*
[ADD RANGE CHECK]

ENTER DAY
 — [VALID RANGE: 1 THROUGH 31]
 97 [PHONE CATI: *REFUSED/RS-AWI: "PREFER NOT TO ANSWER"*]
 99 *DON'T KNOW*
[ADD RANGE CHECK; ALLOW FOR EXTRA DAY IN LEAP YEARS]

ENTER YEAR
 ___ [VALID RANGE: 1900 THROUGH 2000]
 9997 [PHONE CATI: *REFUSED/RS-AWI: "PREFER NOT TO ANSWER"*]
 9999 *DON'T KNOW*
[ADD RANGE CHECK]

AGE_V What is your age?
 — [VALID RANGE: 018 THROUGH 125]
 997 [PHONE CATI: *REFUSED/RS-AWI: "PREFER NOT TO ANSWER"*]
 999 *DON'T KNOW*
[ADD RANGE CHECK]

SEX_V Are you male or female?
 1 *MALE*
 2 *FEMALE*
 7 [PHONE CATI: *REFUSED / RS-AWI: "PREFER NOT TO ANSWER"*]
 9 *DON'T KNOW*

V0 Around [MONTH] of last year, did someone [**FILL BASED ON COMPLETION MODE OF 2012 NHIS**: VISIT YOUR HOME AND CONDUCT THE NATIONAL HEALTH INTERVIEW SURVEY / CONDUCT THE NATIONAL HEALTH INTERVIEW SURVEY OVER THE TELEPHONE] with you?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

SECTION 3: Informed Consent

INTRO_IC Thank you for completing the National Health Interview Survey last year. As you might recall, at that time we mentioned that we might re-contact you. The Census Bureau is conducting this follow-up survey to help the CDC learn how the health care system is currently working for you.

CONSENT Before we continue, I'd like you to know that taking part in this research is voluntary. You may choose not to answer any question you don't wish to answer, or end the interview at any time with no impact on the benefits you may receive. On average, the survey will take about 15 minutes to complete. We are required by Federal law to develop and follow strict procedures to protect the confidentiality of your information and use your answers only for statistical research. I can describe these laws if you wish. [In appreciation for your time, we will send you [\$10/\$20] after you complete the interview.] In order to review my work, this call will be recorded and my supervisor may listen as I ask the questions. I'd like to continue now unless you have any questions.

READ IF NECESSARY: The Public Health Service Act is Title 42 of the US Code, Section 242k. The collection of information in this survey is authorized by Section 306 of this Act. Through the National Center for Health Statistics, the confidentiality of your responses is assured by Section 308d of this Act and by the Confidential Information Protection and Statistical Efficiency Act. Would you like me to read the Confidential Information Protection provisions to you?

IF RESPONDENT WOULD LIKE TO HEAR PROVISIONS, READ: The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws, only those NCHS employees, our specially designated agents including the US Census Bureau, and our full research partners who must use your personal information for a specific reason can see your answers. Everyone else who uses this data can do so only after all information that could identify you and your family is removed. By law, every employee of the National Center for Health Statistics, the US Census Bureau, and their agents and contractors who work on this survey has taken an oath and is subject to a jail term of up to 5 years, a fine of up to \$250,000, or both, if he or she willingly discloses ANY identifiable information about you or your household members.

- 1 *ACCEPT, CONTINUE TO SURVEY*
- 2 *DECLINE, EXIT SURVEY*

**SECTION 4:
Financial Burden of Medical Care**

WFQ001 The first question is about money that you or your family spent out of pocket on medical care. We do NOT want you to count health insurance premiums, over the counter drugs, or costs that you will be reimbursed for.

IN THE PAST 12 MONTHS, about how much did you spend for medical care and dental care?

- 0 *NOTHING*
- 1 *LESS THAN \$500*
- 2 *\$500 - \$1,999*
- 3 *\$2,000 - \$2,999*
- 4 *\$3,000 - \$4,999*
- 5 *\$5,000 OR MORE*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ002 IN THE PAST 12 MONTHS did you have problems paying or were unable to pay any medical bills?

Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ003 Do you currently have any medical bills that are being paid off over time?
This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from earlier years as well as this year.

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: [<1,2,7,9> and WFQ002=2] go to [WFQ005]; else go to [WFQ004]

WFQ004 Do you currently have any medical bills that you are unable to pay at all?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ005 If you get sick or have an accident, how worried are you that you will be able to pay your medical bills? Would you say you are very worried, somewhat worried, or not at all worried?

- 1 *VERY WORRIED*
- 2 *SOMEWHAT WORRIED*
- 3 *NOT AT ALL WORRIED*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]

**SECTION 5:
Health Status**

- WFQ006 Would you say your health in general is excellent, very good, good, fair, or poor?
- 1 *EXCELLENT*
 - 2 *VERY GOOD*
 - 3 *GOOD*
 - 4 *FAIR*
 - 5 *POOR*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ007 About how long has it been since you last saw or talked to a doctor or other health care professional about your own health?
Include doctors seen while a patient in a hospital.
DO NOT READ ANSWER CHOICES—SELECT BASED ON RESPONDENT'S ANSWER; IF ANSWER UNCLEAR, READ CHOICES
- 0 *NEVER*
 - 1 *6 MONTHS OR LESS*
 - 2 *MORE THAN 6 MONTHS, BUT NOT MORE THAN 1 YEAR AGO*
 - 3 *MORE THAN 1 YEAR, BUT NOT MORE THAN 2 YEARS AGO*
 - 4 *MORE THAN 2 YEARS, BUT NOT MORE THAN 5 YEARS AGO*
 - 5 *MORE THAN 5 YEARS AGO*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ008 About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.
DO NOT READ ANSWER CHOICES—SELECT BASED ON RESPONDENT'S ANSWER; IF ANSWER UNCLEAR, READ CHOICES
- 0 *NEVER*
 - 1 *6 MONTHS OR LESS*
 - 2 *MORE THAN 6 MONTHS, BUT NOT MORE THAN 1 YEAR AGO*
 - 3 *MORE THAN 1 YEAR, BUT NOT MORE THAN 2 YEARS AGO*
 - 4 *MORE THAN 2 YEARS, BUT NOT MORE THAN 5 YEARS AGO*
 - 5 *MORE THAN 5 YEARS AGO*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ009 DURING THE PAST 12 MONTHS, were you prescribed medication by a doctor or other health professional?
- 1 *YES*
 - 2 *NO*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]

**SECTION 6:
Access and Utilization of Health Care**

- WFQ010 Is there a place that you USUALLY go to when you are sick or need advice about your health?
- 1 YES
 - 2 THERE IS NO PLACE
 - 3 THERE IS MORE THAN ONE PLACE
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

Skip Instructions: <1,3> go to [WFQ011]; else go to [WFQ012]

- WFQ011 [IF WFQ010=1: "What kind of place is it - a clinic, doctor's office, emergency room, or some other place?"
[IF WFQ010=3: "What kind of place do you go to most often - a clinic, doctor's office, emergency room, or some other place?"]
DO NOT READ ANSWER CHOICES—SELECT BASED ON RESPONDENT'S ANSWER; IF ANSWER UNCLEAR, READ CHOICES
- 1 CLINIC OR HEALTH CENTER
 - 2 DOCTOR'S OFFICE OR HMO
 - 3 HOSPITAL EMERGENCY ROOM
 - 4 HOSPITAL OUTPATIENT DEPARTMENT
 - 5 SOME OTHER PLACE
 - 6 DOESN'T GO TO ONE PLACE MOST OFTEN
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

Skip Instructions: <6> go to [WFQ012]; else go to [WFQ013]

- WFQ012 What is the main reason you do not have a usual source of medical care?
DO NOT READ ANSWER CHOICES—SELECT BASED ON RESPONDENT'S ANSWER; IF ANSWER UNCLEAR, READ CHOICES
- 01 DOESN'T NEED A DOCTOR/HAVEN'T HAD ANY PROBLEMS
 - 02 DOESN'T LIKE/TRUST/BELIEVE IN DOCTORS
 - 03 DOESN'T KNOW WHERE TO GO
 - 04 PREVIOUS DOCTOR IS NOT AVAILABLE/MOVED
 - 05 TOO EXPENSIVE/NO INSURANCE/COST
 - 06 SPEAK A DIFFERENT LANGUAGE
 - 07 NO CARE AVAILABLE/CARE TOO FAR AWAY, NOT CONVENIENT
 - 08 PUT IT OFF/DIDN'T GET AROUND TO IT
 - 09 OTHER
 - 97 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 99 DON'T KNOW

Skip Instructions: <01-99> go to [WFQ025]

- WFQ013 IN THE PAST 12 MONTHS, did you visit your usual provider for a check-up or routine care?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ014 IN THE PAST 12 MONTHS, when you made an appointment for a check-up or routine care with your usual provider, how often did you get an appointment as soon as you needed? Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ015 IN THE PAST 12 MONTHS, how often did this provider explain things in a way that was easy to understand?

READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ016 IN THE PAST 12 MONTHS, how often did this provider listen carefully to you?

READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ017 IN THE PAST 12 MONTHS, how often did this provider seem to know the important information about your medical history?

READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ018 IN THE PAST 12 MONTHS, how often did this provider show respect for what you had to say?

READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ019 IN THE PAST 12 MONTHS, how often did this provider spend enough time with you?
READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ020 IN THE PAST 12 MONTHS, did this provider order a blood test, x-ray, or other test for you?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ021]; <2,7,9> go to [WFQ022]

WFQ021 IN THE PAST 12 MONTHS, when this provider ordered a blood test, x-ray, or other test for you, how often did someone from this provider's office follow up to give you the results?
READ IF NECESSARY: Would you say never, sometimes, usually, or always?

- 1 *NEVER*
- 2 *SOMETIMES*
- 3 *USUALLY*
- 4 *ALWAYS*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ022 Health care providers may ask during routine checkups about health-related behaviors like alcohol use. At your last routine checkup with this provider, did a doctor or other health professional ask you in person or on a form if you drink alcohol?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ023 At your last routine checkup, were you asked in person or on a form how much you drink?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

- WFQ024 At your last routine checkup, were you offered advice about what level of drinking is harmful or risky to your health?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ025 These next questions ask about which types of doctors you may have seen in the past year. DURING THE PAST 12 MONTHS have you seen or talked to...
...A general doctor who treats a variety of illnesses (a doctor in general practice, family medicine, or internal medicine)?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ026 ...A doctor who specializes in women's health (an obstetrician/gynecologist)?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- Universe:** Female Sample Adults
- WFQ027 ...An optometrist, ophthalmologist (AHF-thal-MOL-oh-jist), or eye doctor (someone who prescribes eyeglasses)?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ028 ...A mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ029 ...A medical doctor who specializes in a particular medical disease or problem (other than obstetrician/gynecologist, psychiatrist, or ophthalmologist (AHF-thal-MOL-ohjist))?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ030 DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they would not accept you as a new patient?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ031 DURING THE PAST 12 MONTHS, were you told by a doctor's office or clinic that they did not accept your health care coverage?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ032 DURING THE PAST 12 MONTHS, have you DELAYED seeking medical care because of worry about the cost?
Please do not include dental care in your answer.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ033 DURING THE PAST 12 MONTHS, was there any time when you needed medical care but DID NOT GET IT because you couldn't afford it?
Please do not include dental care in your answer.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ034 DURING THE PAST 12 MONTHS, was there any time when you needed dental care but didn't get it because you couldn't afford it?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ035 DURING THE PAST 12 MONTHS, was there any time you needed to see a specialist for care but did not get the care because you couldn't afford it?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ036 The next questions are about prescription medicine. DURING THE PAST 12 MONTHS, was there any time when you needed prescription medicines but didn't get them because you couldn't afford them?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ037 DURING THE PAST 12 MONTHS, are any of the following true for you?
... You skipped medication doses to save money.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ038 *READ IF NECESSARY:* DURING THE PAST 12 MONTHS, are any of the following true for you?
... You took less medicine to save money.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ039 *READ IF NECESSARY:* DURING THE PAST 12 MONTHS, are any of the following true for you?
... You delayed filling a prescription to save money.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ040 *READ IF NECESSARY:* DURING THE PAST 12 MONTHS, are any of the following true for you?
... You asked your doctor for a lower cost medication to save money.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*
- WFQ041 *READ IF NECESSARY:* DURING THE PAST 12 MONTHS, are any of the following true for you?
... You bought prescription drugs from another country to save money.
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

WFQ042 *READ IF NECESSARY:* DURING THE PAST 12 MONTHS, are any of the following true for you?

...You used alternative therapies to save money.

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

**SECTION 7:
Health Insurance**

WFQ043 The next questions are about health insurance. Include health insurance obtained through employment or purchased directly, as well as government programs like Medicare and Medicaid that provide medical care or help pay medical bills.

What kinds of health insurance or health care coverage do you have? **INCLUDE** those that pay for only one type of service (nursing home care, accidents, or dental care). **EXCLUDE** private plans that only provide extra cash while hospitalized. Do you have...

SELECT ALL THAT APPLY.

- 01 Private health insurance
- 02 Medicare
- 03 Medi-Gap
- 04 Medicaid
- 05 Military health care (Tricare/Va/Champ-Va)
- 06 Indian Health Service
- 07 Other type of health plan
- 08 Single service plan (e.g., dental, vision, prescriptions)
- 09 No coverage of any type
- 97 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 99 *DON'T KNOW*

Skip Instructions: if response contains <1,3> go to [WFQ045]; if response contains <7> go to [WFQ044]; if response contains <9> go to [WFQ047]; else go to [WQF046]

WFQ044 What is the name of your plan?
Name of plan: _____

WFQ045 Which one of these categories best describes how this plan was obtained?

- 01 Through employer, union, or professional association
- 02 Purchased directly
- 03 Through school
- 04 Through a parent
- 05 Through a state/local government or community program
- 06 Other
- 97 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 99 *DON'T KNOW*

- WFQ046 IN THE PAST 12 MONTHS, was there any time when you did NOT have ANY health insurance or coverage?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ047]; <2,7,9> go to [WFQ048]

- WFQ047 IN THE PAST 12 MONTHS, about how many months were you without coverage?
- 0 *LESS THAN ONE MONTH*
 - 1-12 *1-12 MONTHS WITHOUT COVERAGE*
 - 97 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 99 *DON'T KNOW*

- WFQ048 In regard to your health insurance or health care coverage, how does it compare to a year ago? Is it better, worse, or about the same?
- 1 *BETTER*
 - 2 *WORSE*
 - 3 *ABOUT THE SAME*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ049 If you or anyone in your family had to buy a health plan on your own with no help from your employer, how confident are you that you would be able to obtain affordable coverage. Would you say very confident, somewhat confident, not to confident, not confident at all?
- 1 *VERY CONFIDENT*
 - 2 *SOMEWHAT CONFIDENT*
 - 3 *NOT TOO CONFIDENT*
 - 4 *NOT CONFIDENT AT ALL*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ050-A A health insurance premium is...
- 1 *WHAT A PERSON PAYS WHEN THEY GO TO A MEDICAL APPOINTMENT*
 - 2 *WHAT A PERSON PAYS AFTER INSURANCE PAYS FOR PART OF THE COST OF MEDICAL SERVICES*
 - 3 *WHAT A PERSON PAYS EACH MONTH TO HAVE HEALTH INSURANCE*
 - 4 *THE BEST INSURANCE A HEALTH INSURANCE COMPANY OFFERS*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ050-B If a health insurance premium is subsidized based on income, that means that...
- 1 *THE PREMIUM AMOUNT DEPENDS ON THE TYPE OF MEDICAL SERVICES RECEIVED*

- 2 THE PREMIUM AMOUNT DEPENDS ON THE FAMILY'S INCOME, THAT IS, THE INCOME OF EVERYONE IN THE FAMILY THAT USES THE INSURANCE
- 3 THE PREMIUM AMOUNT DEPENDS ON HOW HEALTHY THE FAMILY IS
- 4 THE PREMIUM AMOUNT DEPENDS ON WHAT TYPE OF INSURANCE PLAN I BUY
- 5 THE PREMIUM AMOUNT DEPENDS ON THE INCOME OF THE HEALTH INSURANCE COMPANY
- 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
- 9 DON'T KNOW

- WFQ050-C Have you heard of the Health Insurance Marketplace?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

- WFQ050-D Have you heard of health insurance exchanges?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

- WFQ050-D DURING THE PAST 3 MONTHS, did you look into purchasing health insurance through an exchange set up by your state?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

**SECTION 8:
Preventive Services**

- WFQ051 These next questions are about your lifestyle and use of preventive services. DURING THE PAST 12 MONTHS, did a doctor or other health professional RECOMMEND that you BEGIN or CONTINUE to do any type of exercise or physical activity?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]
 - 9 DON'T KNOW

- WFQ052 DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your diet?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: REFUSED / RS-AWI: "PREFER NOT TO ANSWER"]

WFQ053 DURING THE PAST 12 MONTHS, have you had your blood pressure checked by a doctor, nurse, or other health professional?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ054 DURING THE PAST 12 MONTHS, have you had your blood cholesterol checked by a doctor, nurse, or other health professional?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ055 DURING THE PAST 12 MONTHS have you had a Pap smear or Pap test?
READ IF NECESSARY: A Pap smear or Pap test is a routine test for women in which the doctor examines the cervix, takes a cell sample from the cervix with a small stick or brush, and sends it to the lab.

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Universe: Female Sample Adults

WFQ056 DURING THE PAST 12 MONTHS have you had a Mammogram?
READ IF NECESSARY: A mammogram is an x-ray of each breast to look for breast cancer.

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Universe: Female Sample Adults

WFQ057 DURING THE PAST 12 MONTHS, have you had any test done for colon cancer?
READ IF NECESSARY: Colon cancer tests include blood stool tests, colonoscopy and sigmoidoscopy. A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. A sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems.

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

- WFQ058 Have you had a fasting test for high blood sugar or diabetes DURING THE PAST 12 MONTHS?
- 1 YES
 - 2 NO
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

**SECTION 9:
Family Food Security**

- WFQ059 These next questions are about whether you were always able to afford the food you needed in the last 30 days. Below are several statements that people have made about their food situation. For these statements, please tell us whether the statement was often true, sometimes true, or never true for you or your family in the last 30 days.

The first statement is:

"We worried whether our food would run out before we got money to buy more." Was that often true, sometimes true, or never true for your family IN THE LAST 30 DAYS?

- 1 *OFTEN TRUE*
- 2 *SOMETIMES TRUE*
- 3 *NEVER TRUE*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

- WFQ060 "The food that we bought just didn't last, and we didn't have money to get more."
READ IF NECESSARY: Was that often true, sometimes true, or never true for your family in the last 30 days?

- 1 *OFTEN TRUE*
- 2 *SOMETIMES TRUE*
- 3 *NEVER TRUE*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

- WFQ061 "We couldn't afford to eat balanced meals."
READ IF NECESSARY: Was that often true, sometimes true, or never true for your family in the last 30 days?

- 1 *OFTEN TRUE*
- 2 *SOMETIMES TRUE*
- 3 *NEVER TRUE*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1,2> or [<3,D,R> and [WFQ059 in <1,2> or WFQ060 in <1,2>]] go to [WFQ062]; else go to [WFQ069]

- WFQ062 IN THE LAST 30 DAYS, did you or other adults in your family ever cut the size of your meals or skip meals because there wasn't enough money for food?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ063]; else go to [WFQ064]

WFQ063 IN THE LAST 30 DAYS, how many days did this happen?
Number of days: _____ [*SELECT FROM DROP-DOWN LIST*]

WFQ064 IN THE LAST 30 DAYS, did you ever eat less than you felt you should because there wasn't enough money for food?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ065 IN THE LAST 30 DAYS, were you ever hungry but didn't eat because there wasn't enough money for food?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ066 IN THE LAST 30 DAYS, did you lose weight because there wasn't enough money for food?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1> or [<2,R,D> and [WFQ062 or WFQ064 or WFQ065=<1>]] go to [WFQ067]; else go to [WFQ069]

WFQ067 IN THE LAST 30 DAYS, did you or other adults in your family ever not eat for a whole day because there wasn't enough money for food?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ068]; else go to [WFQ069]

WFQ068 IN THE LAST 30 DAYS, how many days did this happen?
Number of days: _____ [*SELECT FROM DROP-DOWN LIST*]

SECTION 10:

Smoking

WFQ069 These next few questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your ENTIRE LIFE?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ070]; else go to [WFQ073]

WFQ070 Do you NOW smoke cigarettes every day, some days or not at all?

- 1 Every day
- 2 Some days
- 3 Not at all
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

Skip Instructions: <1,2,3> go to [WFQ071]; else go to [WFQ073]

WFQ071 DURING THE PAST 12 MONTHS, have you stopped smoking for more than one day BECAUSE YOU WERE TRYING TO QUIT SMOKING?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

WFQ072 DURING THE PAST 12 MONTHS, has a doctor or other health professional talked to you about your smoking?

- 1 YES
- 2 NO
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

SECTION 11: Marital & Employment Status

WFQ073 We're almost finished with the interview. This next section asks general questions about your household.

How many people including yourself, currently live in your household?

- ___ *ENTER NUMBER OF PEOPLE*
- 97 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 99 *DON'T KNOW*

WFQ074 How many children under age 18 currently live in your household?

- ___ *ENTER NUMBER OF CHILDREN UNDER 18*

- 97 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
99 *DON'T KNOW*

- WFQ075 Are you now married, widowed, divorced, separated, never married, or living with a partner?
- 1 *MARRIED*
 - 2 *WIDOWED*
 - 3 *DIVORCED*
 - 4 *SEPARATED*
 - 5 *NEVER MARRIED*
 - 6 *LIVING WITH PARTNER*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- WFQ076 Are you currently enrolled in school?
- 1 *YES*
 - 2 *NO*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

WFQ077 The next few questions are about employment.

DURING THE PAST 12 MONTHS, has there been a change in your employment status?

- 1 *YES*
- 2 *NO*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
- 9 *DON'T KNOW*

- WFQ078 Which of the following best describes what you were doing LAST WEEK? Were you...
- 1 Employed (select this option if you held a job but were on vacation or any type of short-term, temporary leave)
 - 2 Unemployed
 - 3 Retired (from any job; you will be able to indicate whether you are working during your retirement)
 - 4 On extended leave (e.g. medical, family, or maternity leave, etc.)
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

Skip Instructions: <1,4> go to [WFQ080]; <2> go to [WFQ081]; <3> go to [WFQ079]; else go to [WFQ082]

- WFQ079 Are you working for pay more than 1 hour per week during your retirement?
- 1 *YES*
 - 2 *NO*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

Skip Instructions: <1> go to [WFQ080]; else go to [WFQ082]

WFQ080 Approximately how many hours do you usually work per week?
 — *NUMBER OF HOURS [SELECT FROM DROP-DOWN LIST]*
 97 [PHONE CATI: *REFUSED* / RS-AWI: “*PREFER NOT TO ANSWER*”]
 99 *DON'T KNOW*
Skip Instructions: go to [WFQ082]

WFQ081 Are you currently looking for work?
 1 *YES*
 2 *NO*
 7 [PHONE CATI: *REFUSED* / RS-AWI: “*PREFER NOT TO ANSWER*”]
 9 *DON'T KNOW*
Skip Instructions: go to [ADVNOT]

WFQ082 DURING THE PAST 12 MONTHS, have you had a period of unemployment?
 1 *YES*
 2 *NO*
 7 [PHONE CATI: *REFUSED* / RS-AWI: “*PREFER NOT TO ANSWER*”]
 9 *DON'T KNOW*

**SECTION 12:
Contact Information**

ADVNOT Thank you. We're almost finished.

Do you remember seeing an email or advance letter notifying you about this survey?
IF RESPONDENT SAYS ONLY “YES” ASK ABOUT EACH ONE SEPARATELY.

- 1 *YES, EMAIL*
- 2 *YES, ADVANCE LETTER*
- 3 *YES, BOTH EMAIL AND LETTER*
- 4 *NO*
- 5 *OTHER, _____ ENTER RESPONSE*
- 7 [PHONE CATI: *REFUSED* / RS-AWI: “*PREFER NOT TO ANSWER*”]
- 9 *DON'T KNOW*

Skip Instructions:
PHONE CATI: go to [PHONDEV]
RS-AWI: go to [WEBDEV]

PHONDEV Did you complete this survey on a landline or cell phone?
 1 *LANDLINE*
 2 *CELL PHONE*
 7 *REFUSED*
 9 *DON'T KNOW*

Skip Instructions: go to [RECONT]

- WEBDEV On what kind of device did you complete this survey?
- 1 Computer (e.g., PC or Mac desktop or laptop)
 - 2 Smartphone
 - 3 Tablet
 - 4 Other, please specify _____ *ENTER RESPONSE*

- RECONT Since we are interested in how health changes over time, we may be re-contacting you in the future. How would you prefer to complete future surveys? Would you like...
- 1 A questionnaire sent in the mail
 - 2 An email with a link to an internet questionnaire that you can fill out on the online
 - 3 A telephone interview
 - 4 Something else _____ *ENTER RESPONSE*
 - 5 No preference
 - 7 [PHONE CATI: *REFUSED/DOES NOT WANT TO PARTICIPATE IN THE FUTURE* / RS-AWI: "*PREFER NOT TO PARTICIPATE IN FUTURE SURVEYS*"]
 - 9 *DON'T KNOW*

Skip Instructions: <7> go to [CLOSING]; <5, 9> go to [CONTACT]; else go to [MODESEL]

- MODESEL What makes this your preferred choice to complete future surveys?.
- [IF RS-AWI, DISPLAY ONLY ANSWER CHOICES 1-3. IF PHONE CATI, DISPLAY ALL ANSWER CHOICES IN ALL CAPS AND ITALICS]
- 1 Convenience
 - 2 Faster time
 - 3 Other, please specify _____
 - 4 *DOESN'T HAVE INTERNET ACCESS*
 - 5 *DOESN'T USE/FEEL COMFORTABLE USING COMPUTERS*
 - 7 [PHONE CATI: *REFUSED* / RS-AWI: "*PREFER NOT TO ANSWER*"]
 - 9 *DON'T KNOW*

- CONTACT Please provide phone number, e-mail and address information where you can be reached.
ENTER RESPONSES...
- DAYTIME PHONE NUMBER _____
- EVENING PHONE NUMBER _____
- E-MAIL ADDRESS _____
- VERIFY E-MAIL _____
- ADDRESS NUMBER/STREET _____
- CITY/TOWN _____
- STATE ____ *SELECT FROM DROP-DOWN LIST*
- ZIP CODE _____

CLOSING

Those are all the questions [IF PHONE CATI: “I” / IF RS-AWI: “we”] have. [IF PHONE CATI: “I would” / IF RS-AWI: “we would”] like to thank you on behalf of the CDC’s National Center for Health Statistics for the time and effort you’ve spent answering these questions. If you have any questions about this survey, you may call my supervisor toll-free at [NUMBER]. If you have questions about your rights as a survey participant, you may call the chairperson of the NCHS Research Ethics Review Board at 1-800-223-8118 and say you are calling about protocol XXXX-XX. Thank you again.

CALLBACK & ANSWERING MACHINE SCRIPTS

NO CONTACT YET:

Hello. I'm calling on behalf of the CDC's National Center for Health Statistics. We are conducting a survey on health, the health care system, and insurance. Should you be eligible to participate, we will send you \$10 after you complete the interview in appreciation for your time. If you would like to participate right away, please call our toll-free number, at [NUMBER]. Thank you.

RE-CONTACT WITH ELIGIBLE SA (NO APPOINTMENT):

Hello. I am calling on behalf of the CDC's National Center for Health Statistics regarding a survey about health, the health care system, and insurance. When we spoke previously about this important study, you requested that we call you back. I'm sorry that we've missed you. We'll try to contact you again soon but please feel free to return our call anytime at [NUMBER]. In appreciation for your time, we will send you \$10 after you complete the interview. Thank you.

SCHEDULED INTERVIEW APPOINTMENTS:

Hello. I am calling on behalf of the CDC's National Center for Health Statistics regarding a survey about health, the health care system, and insurance. When we spoke previously about this important study, you requested that we call you back at this time. I'm sorry that we've missed you. We'll try to contact you again soon but please feel free to return our call anytime at [NUMBER]. In appreciation for your time, we will send you \$10 after you complete the interview. Thank you.