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# Health Insurance Marketplace Survey

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**Language: English**

**Reference Period: Since November 15, 2014**

Each item has been labeled to indicate the domain, construct source, and CAHPS or other survey indicator for this review process; the lists below provide the abbreviations used. For example, if a question is labeled: **(IS/F,T/HP5-AM-m1)**, it means this question is from the Information Seeking domain, the construct came from the Focus Groups and Technical Expert Panel, and the question wording is a modified version of the CAHPS Health Plan 5.0 Adult Medicaid Question #1. The headings in this survey are meant for respondent navigation, not domain headings.

## **Marketplace Domain Name**

AP=Application Process

TC=Premium Tax Credit Eligibility

IS=Information Seeking

CuC=Cultural Competence

EP=Health Plan Enrollment Process

GR=Global Ratings

CM=Case Mix Adjusters

RC=Respondent Characteristics

SP=Specialized Services

*All the questions have a domain label.*

## **Construct Source**

L=Lit Review

F=Focus Groups

S=Stakeholder Interviews

T=Technical Expert Panel

C=Centers for Medicare & Medicaid Services

CI1=Cognitive Interview Round 1

CI2=Cognitive Interview Round 2

OMB60 = OMB 60 Day Comment Period

OMB30 = OMB 30 Day Comment Period

FT = Field Test

*Questions that don't have a construct source were included because they came from the CAHPS Health Plan 5.0 survey. For example, we included global ratings and case mix adjuster questions because they are a CAHPS convention.*

**Survey Indicator**

HP5-AM-Q# = [CAHPS Health Plan 5.0, Adult Medicaid](#), Question #

HP5-AM-mQ# = [CAHPS Health Plan 5.0, Adult Medicaid](#), modified Question #

HP4-AS-mQ# = [CAHPS Health Plan 4.0, Adult Supplemental](#), modified Question #

HP5-AS-mQ# = CAHPS Health Plan 5.0, Adult Supplemental, modified Question #

These are new CAHPS questions that are not in public documentation yet.

CG2-AS-mQ# = [CAHPS Clinician & Group 2.0, Adult Supplemental](#), modified Question #

H-mQ = [Hospital CAHPS](#), Modified Question #

OMH-4302-Q# = [HHS Office of Minority Health ACA Section 4302 Data Collection Standards](#),  
Question #

ACS-P-Q# = [American Community Survey \(ACS\)](#) – Person Section - Question #

NHBS-Q# = [2010 National HIV Behavioral Surveillance System](#) – Question #

M-ACO-Q# = [2014 Medicare Provider Satisfaction Survey – Items for ACOs Participating in Medicare Initiatives](#) – Question #

*Questions that don't have a survey indicator are new questions written for the Marketplace Survey.*

# OVERVIEW MARKETPLACE SURVEY DOMAINS

## I. APPLICATION PROCESS

- Have health insurance through the Marketplace in 2014
- Gave or updated information about the people in your family who wanted health insurance
- Easy to give or update information about the people in your family
- Giving/updating information about the people in your family took longer than expected
- Mode used to give/update information about the people in your family
- Told should update Marketplace about changes to household income or family size
- Easy to understand how to update Marketplace about changes to household income or family size

## II. PREMIUM TAX CREDIT ELIGIBILITY

- Gave or updated information about household income
- Easy to find out if could get help paying for health insurance
- Giving/updating information about household income took longer than expected
- Qualify for Medicaid
- Marketplace help pay for health insurance
- Told could appeal decision about how much have to pay for health insurance

## III. INFORMATION SEEKING ON THE WEBSITE

- Visited the Marketplace website
- Had to wait to get what you needed because of problems on website
- Got information you needed
- Why did not get information needed
- Easy to understand the information
- What information was hard to understand
- Information as helpful as you thought it should be

## IV. INFORMATION SEEKING OVER THE PHONE

- Called the Marketplace Call Center
- Got information or help you needed
- Why did not get information or help needed
- Easy to understand the information
- What information was hard to understand
- Call Center as helpful as you thought they should be
- Spoke to a person
- Call Center staff treat you with courtesy and respect

## V. INFORMATION SEEKING IN-PERSON

- Met in person with anyone from an organization that helps people get health insurance through Marketplace
- Got information or help you needed
- Why did not get information or help needed
- Easy to understand the information
- What information was hard to understand
- Persons you met with as helpful as you thought they should be

- Persons you met with treat you with courtesy and respect

## VI. HEALTH PLAN ENROLLMENT

- Who is covered by health plan
- Considered services covered and how much you have to pay
- Easy to understand services covered and how much you have to pay
- Try to find out which health plans had doctors or hospitals you wanted
- Easy to understand which health plans had doctors or hospitals you wanted
- Try to find out which health plans covered prescription medicines you needed
- Easy to understand which health plans covered prescription medicines you needed
- Chose a health plan through Marketplace
- Enrolled in same health plan in 2014
- Easy to choose a health plan

## VII. SPECIALIZED SERVICES

- Easy to find out which health plans offer physical, occupational, or speech therapy you needed
- Easy to find out which health plans offer home health care services you needed

## VIII. CULTURAL COMPETENCE

- Need interpreter
- How often got an interpreter
- Forms available in preferred language
- Forms available in preferred format, such as large print or braille

## GLOBAL RATINGS

- Rating of information–Web
- Rating of information–Phone
- Rating of information–In-Person
- Rating of Health Insurance Marketplace
- Recommend Marketplace to friends and family

## RESPONDENT CHARACTERISTICS

- Rating of overall health
- Rating of overall mental or emotional health
- Got care for 2 or more health problems or conditions that each lasted for at least a year
- Are you deaf
- Are you blind
- Difficulty concentrating, remembering, or making decisions because of a physical, mental, or emotional condition
- Difficulty walking or climbing stairs
- Difficulty dressing or bathing because of a physical, mental, or emotional condition
- Difficulty doing errands alone because of a physical, mental, or emotional condition
- Age
- Sex
- Education status
- Employment status
- Ethnicity
- Race

- Preferred Language
- Proficiency of English language skills
- Covered by health insurance at any time in 2014
- Confidence in understanding health insurance terms
- Someone help you complete this survey
- How did someone help you complete this survey

Domain Overview Note: The Domain Overview is meant to provide a quick overview of what is measured in this survey. It is NOT meant to list hypothesized composite items. There are a mix of screener, assessment/composite, and single items listed under each domain. It also does NOT list out every item but rather is meant to cover unique constructs. For example, if there is a screener item and an assessment item that measure the same construct, then the assessment item is listed.

## Introduction

We are asking you to complete this survey because you contacted {INSERT MARKETPLACE NAME} to learn about your health insurance options since November 15, 2014. You might have used the website, sent an application by mail, called the toll free Call Center, or met with someone in person. This survey asks about your experiences with {INSERT MARKETPLACE NAME}, also known as Obamacare or {INSERT MARKETPLACE URL}, which was created by the Affordable Care Act.

## Survey Instructions

Answer each question by marking the box next to your answer.

You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

<sup>1</sup>  Yes

<sup>2</sup>  No → **If No, go to #1**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is 0938-1221. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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**Giving Information to Learn About Your Health Insurance Options**

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The following questions ask about your experiences giving information to learn about your health insurance options through {INSERT MARKETPLACE NAME} since November 15, 2014. You might have used the website, sent an application by mail, called the toll free Call Center, or met with someone in person.

1. Did you have health insurance through {INSERT MARKETPLACE NAME} at any time in 2014? **(AP/FT,T)**  
<sup>1</sup> Yes  
<sup>2</sup> No
  
2. Since November 15<sup>th</sup>, did you give or update information about yourself or the people in your family who wanted health insurance through {INSERT MARKETPLACE NAME}? **(AP/T,CI2)**  
<sup>1</sup> Yes  
<sup>2</sup> No → **If No, go to #6**
  
3. Was it easy to give or update information about yourself or the people in your family who wanted health insurance? **(AP/T,CI2)**  
<sup>1</sup> Yes, definitely  
<sup>2</sup> Yes, somewhat  
<sup>3</sup> No
  
4. Did giving or updating information about yourself or the people in your family take longer than you expected? **(AP/L,S,T,CI2)**  
<sup>1</sup> Yes, definitely  
<sup>2</sup> Yes, somewhat  
<sup>3</sup> No
  
5. How did you give or update information about yourself or the people in your family? **Mark one or more. (AP/T,CI1,CI2)**  
<sup>1</sup> On {INSERT MARKETPLACE NAME}'s website  
<sup>2</sup> By mail  
<sup>3</sup> On the phone  
<sup>4</sup> In person

6. Household income can be your income or the income from people in your family. Since November 15<sup>th</sup>, did you give or update information about your household income to see if you or the people in your family could get help paying for health insurance through {INSERT MARKETPLACE NAME}? (TC/T)

<sup>1</sup>  Yes

<sup>2</sup>  No → **If No, go to #12**

7. When you gave or updated your household income information, was it easy to find out if you or the people in your family could get help paying for health insurance? (TC/T)

<sup>1</sup>  Yes, definitely

<sup>2</sup>  Yes, somewhat

<sup>3</sup>  No

8. Did giving or updating your household income information take longer than you expected? (TC/L,S,T)

<sup>1</sup>  Yes, definitely

<sup>2</sup>  Yes, somewhat

<sup>3</sup>  No

9. Since November 15<sup>th</sup>, did you or the people in your family qualify for {INSERT MEDICAID NAME}, the program in your state that provides health plan coverage for some low-income persons, families and children, pregnant women, and persons with disabilities? (TC/T)

<sup>1</sup>  Yes → **If Yes, go to #11**

<sup>2</sup>  No

<sup>3</sup>  Don't know

10. Since November 15<sup>th</sup>, did {INSERT MARKETPLACE NAME} help you or the people in your family pay for your health insurance? (TC/T)

<sup>1</sup>  Yes

<sup>2</sup>  No

<sup>3</sup>  Don't know

11. To appeal means to tell someone at {INSERT MARKETPLACE NAME} that you think the decision is wrong, and ask for a fair review of the decision. Since November 15<sup>th</sup>, were you told by {INSERT MARKETPLACE NAME} that you could appeal if you disagreed with the decision about how much you would have to pay for your health insurance? **(TC/L,T)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No

12. Since November 15<sup>th</sup>, were you told by {INSERT MARKETPLACE NAME} that you should update them about changes to your household income or the number of people in your family? **(AP/CI1)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No → **If No, go to #14**

13. Was it easy to understand how to update {INSERT MARKETPLACE NAME} about changes to your household income or the number of people in your family? **(AP/CI1)**

- <sup>1</sup>  Yes, definitely  
<sup>2</sup>  Yes, somewhat  
<sup>3</sup>  No

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### Looking for Information on the Marketplace Website

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The following questions ask about your experiences when you visited {INSERT MARKETPLACE NAME}'s website since November 15, 2014.

14. Since November 15<sup>th</sup>, did you visit {INSERT MARKETPLACE NAME}'s website {INSERT MARKETPLACE URL}? **(IS/T)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No → **If No, go to #22**

15. Since November 15<sup>th</sup>, how often did you have to wait to get what you needed because of problems on {INSERT MARKETPLACE NAME}'s website? **(IS/OMB60)**

- <sup>1</sup>  Never  
<sup>2</sup>  Sometimes  
<sup>3</sup>  Usually  
<sup>4</sup>  Always

16. Since November 15<sup>th</sup>, how often did you get the information you needed from {INSERT MARKETPLACE NAME}'s website? (IS/F,T/HP4-AS-mPW2)

- <sup>1</sup>  Never
- <sup>2</sup>  Sometimes
- <sup>3</sup>  Usually
- <sup>4</sup>  Always → **If Always, go to #18**

17. Were any of the following a reason why you did **not** get the information you needed from {INSERT MARKETPLACE NAME}'s website? **Mark one or more.** (IS/F,T/HP4-AS-mCS1)

Did not get the information  
because

- |   |                            |
|---|----------------------------|
| a) You could not find the information you needed  | 1 <input type="checkbox"/> |
| b) The information was hard to understand   | 1 <input type="checkbox"/> |
| c) The website was confusing  | 1 <input type="checkbox"/> |
| d) It was hard to find out how to get help  | 1 <input type="checkbox"/> |
| e) The website was too complicated  | 1 <input type="checkbox"/> |
| f) The information the website gave you was inconsistent or wrong                                       | 1 <input type="checkbox"/> |
| g) The information was not in the language you prefer   | 1 <input type="checkbox"/> |
| h) You could not find the same health plan you had in 2014  | 1 <input type="checkbox"/> |
| i) The website was not working correctly  | 1 <input type="checkbox"/> |
| j) The website did not work well with the special equipment or software you use because of a disability | 1 <input type="checkbox"/> |
| k) Some other reason  | 1 <input type="checkbox"/> |

*Please specify:* \_\_\_\_\_

18. Since November 15<sup>th</sup>, how often was it easy to understand the information on {INSERT MARKETPLACE NAME}'s website? (IS/L,S,T/HP4-AS-mPW3)

- <sup>1</sup>  Never
- <sup>2</sup>  Sometimes
- <sup>3</sup>  Usually
- <sup>4</sup>  Always → **If Always, go to #20**

**19. What information on {INSERT MARKETPLACE NAME}'s website was hard to understand?  
Mark one or more. (IS/L,S,T/HP4-AS-mPW4)**

Hard to understand

- a) How to get help paying for your health insurance 1
- b) Important deadlines 1
- c) Benefits and coverage for doctor or specialist visits 1
- d) Benefits and coverage for prescription drugs 1
- e) Benefits and coverage for prenatal care or childbirth 1
- f) How much you would have to pay for each health plan 1
- g) How much you would have to pay out-of-pocket for health care services in each health plan 1
- h) Which doctors are in each health plan 1
- i) What you would have to pay if you used a doctor outside of the health plan 1
- j) How to figure out your family size or household income 1
- k) Which doctors in each health plan have offices that are accessible for people with disabilities 1
- l) How to find a health plan that meets your family's needs 1
- m) Something else 1

*Please specify:* \_\_\_\_\_

\_\_\_\_\_

**20. Since November 15<sup>th</sup>, how often was the information on {INSERT MARKETPLACE NAME}'s website as helpful as you thought it should be? (IS/F,T/CG2-AC-m24)**

- 1  Never
- 2  Sometimes
- 3  Usually
- 4  Always

**21.** We want to know your rating of {INSERT MARKETPLACE NAME}'s website, {INSERT MARKETPLACE URL}, that you visited since November 15, 2014. Using any number from 0 to 10, where 0 is the worst website possible and 10 is the best website possible, what number would you use to rate {INSERT MARKETPLACE NAME}'s website? **(GR/HP5-AM-m26)**

- 0 Worst website possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best website possible

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### Getting Information over the Phone

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The following questions ask about your experiences when you called {INSERT MARKETPLACE NAME}'s customer service Call Center since November 15, 2014.

**22.** Since November 15<sup>th</sup>, did you call {INSERT MARKETPLACE NAME}'s customer service Call Center? **(IS/T)**

- <sup>1</sup>  Yes
- <sup>2</sup>  No → **If No, go to #31**

**23.** Since November 15<sup>th</sup>, how often did you get the information or help you needed when you called {INSERT MARKETPLACE NAME}'s customer service Call Center? **(IS/F,T/HP5-AM-m22)**

- <sup>1</sup>  Never
- <sup>2</sup>  Sometimes
- <sup>3</sup>  Usually
- <sup>4</sup>  Always → **If Always, go to #25**

**24.** Were any of the following a reason why you did **not** get the information or help you needed when you called {INSERT MARKETPLACE NAME}'s customer service Call Center? **Mark one or more. (IS/F,T/HP4-AS-mCS1)**

Did not get the information or help needed because

- a) They were unable to answer your questions 1
- b) Was on hold too long 1
- c) You had to call several times before you could speak with someone 1
- d) You waited too long for someone to call you back 1
- e) No one called you back 1
- f) The information they gave you was inconsistent or wrong 1
- g) They did not have the information you needed 1
- h) The information they gave you was hard to understand 1
- i) You could not talk to someone in the language you prefer 1
- j) They were unable to find the same health plan you had in 2014 1
- k) The Call Center had problems with the website when you called 1
- l) There was no video relay service available for persons who are deaf 1
- m) Some other reason 1

*Please specify:* \_\_\_\_\_

\_\_\_\_\_

**25.** Since November 15<sup>th</sup>, how often was it easy to understand the information you got when you called {INSERT MARKETPLACE NAME}'s customer service Call Center? **(IS/L,S,T/HP4-AS-mPW3)**

- 1  Never
- 2  Sometimes
- 3  Usually
- 4  Always → **If Always, go to #27**

26. What information was hard to understand when you called {INSERT MARKETPLACE NAME}'s customer service Call Center? **Mark one or more. (IS/L,S,T/HP4-AS-mPW4)**

Hard to understand

- a) How to get help paying for your health insurance 1
- b) Important deadlines 1
- c) Benefits and coverage for doctor or specialist visits 1
- d) Benefits and coverage for prescription drugs 1
- e) Benefits and coverage for prenatal care or childbirth 1
- f) How much you would have to pay for each health plan 1
- g) How much you would have to pay out-of-pocket for health care services in each health plan 1
- h) Which doctors are in each health plan 1
- i) What you would have to pay if you used a doctor outside of the health plan 1
- j) How to figure out your family size or household income 1
- k) Which doctors in each health plan have offices that are accessible for people with disabilities 1
- l) How to find a health plan that meets your family's needs 1
- m) Something else 1

*Please specify:* \_\_\_\_\_

27. Since November 15<sup>th</sup>, how often was {INSERT MARKETPLACE NAME}'s customer service Call Center as helpful as you thought it should be? **(IS/F,T/CG2-AC-m24)**

- 1  Never
- 2  Sometimes
- 3  Usually
- 4  Always

28. Since November 15<sup>th</sup>, did you speak to a person when you called {INSERT MARKETPLACE NAME}'s customer service Call Center? **(IS/CI1)**

- 1  Yes
- 2  No → **If No, go to #30**

**29.** Since November 15<sup>th</sup>, how often did {INSERT MARKETPLACE NAME}'s customer service Call Center staff treat you with courtesy and respect when you called? **(IS/L,F/HP5-AM-m23)**

- <sup>1</sup> Never
- <sup>2</sup> Sometimes
- <sup>3</sup> Usually
- <sup>4</sup> Always

**30.** We want to know your rating of {INSERT MARKETPLACE NAME}'s customer service Call Center that you called since November 15<sup>th</sup>, 2014. Using any number from 0 to 10, where 0 is the worst customer service Call Center possible and 10 is the best customer service Call Center possible, what number would you use to rate {INSERT MARKETPLACE NAME}'s customer service Call Center? **(GR/HP5-AM-m26)**

- 0 Worst customer service Call Center possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best customer service Call Center possible

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### Getting Information In Person

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The following questions ask about your experiences when you met in person with anyone from an organization that helps people get health insurance through {INSERT MARKETPLACE NAME}, since November 15, 2014.

**31.** Since November 15<sup>th</sup>, did you meet in person with anyone from an organization that helps people get health insurance through {INSERT MARKETPLACE NAME}? **(IS/T)**

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #39**

**32.** Since November 15<sup>th</sup>, how often did you get the information or help you needed when you met in person with someone about getting health insurance from {INSERT MARKETPLACE NAME}? **(IS/F,T/HP5-AM-m22)**

- <sup>1</sup>  Never
- <sup>2</sup>  Sometimes
- <sup>3</sup>  Usually
- <sup>4</sup>  Always → **If Always, go to #34**

**33.** Were any of the following a reason why you did **not** get the information or help you needed when you met in person with someone about getting health insurance from {INSERT MARKETPLACE NAME}? **Mark one or more. (IS/F,T/HP4-AS-mCS1)**

Did not get the information  
or help needed because

- |   |                                       |
|---|---------------------------------------|
| a) There was not enough time  | <sup>1</sup> <input type="checkbox"/> |
| b) They did not have the information you needed                     | <sup>1</sup> <input type="checkbox"/> |
| c) The information they gave you was hard to understand             | <sup>1</sup> <input type="checkbox"/> |
| d) The information they gave you was inconsistent or wrong          | <sup>1</sup> <input type="checkbox"/> |
| e) You could not talk or sign to someone in the language you prefer | <sup>1</sup> <input type="checkbox"/> |
| f) They were unable to find the same health plan you had in 2014    | <sup>1</sup> <input type="checkbox"/> |
| g) The person you met with had problems with the website            | <sup>1</sup> <input type="checkbox"/> |
| h) Some other reason  | <sup>1</sup> <input type="checkbox"/> |

*Please specify:* \_\_\_\_\_

\_\_\_\_\_

**34.** Since November 15<sup>th</sup>, how often was it easy to understand the information you got when you met in person with someone about getting health insurance from {INSERT MARKETPLACE NAME}? **(IS/L,S,T/HP4-AS-mPW3)**

- <sup>1</sup>  Never
- <sup>2</sup>  Sometimes
- <sup>3</sup>  Usually
- <sup>4</sup>  Always → **If Always, go to #36**

**35. What information was hard to understand when you met in person with someone about getting health insurance from {INSERT MARKETPLACE NAME}? Mark one or more. (IS/L,S,T/HP4-AS-mPW4)**

Hard to understand

- a) How to get help paying for your health insurance 1
- b) Important deadlines 1
- c) Benefits and coverage for doctor or specialist visits 1
- d) Benefits and coverage for prescription drugs 1
- e) Benefits and coverage for prenatal care or childbirth 1
- f) How much you would have to pay for each health plan 1
- g) How much you would have to pay out-of-pocket for health care services in each health plan 1
- h) Which doctors are in each health plan 1
- i) What you would have to pay if you used a doctor outside of the health plan 1
- j) How to figure out your family size or household income 1
- k) Which doctors in each health plan have offices that are accessible for people with disabilities 1
- l) How to find a health plan that meets your family's needs 1
- m) Something else 1

*Please specify:* \_\_\_\_\_  
 \_\_\_\_\_

**36. Since November 15<sup>th</sup>, how often were the persons you met with about getting health insurance from {INSERT MARKETPLACE NAME} as helpful as you thought they should be? (IS/F,T/CG2-AC-m24)**

- 1  Never
- 2  Sometimes
- 3  Usually
- 4  Always

**37. Since November 15<sup>th</sup>, how often did the persons you met with about getting health insurance from {INSERT MARKETPLACE NAME} treat you with courtesy and respect? (IS/L,F/HP5-AM-m23)**

- 1  Never
- 2  Sometimes
- 3  Usually
- 4  Always

**38.** We want to know your rating of the in-person assistance you got to help you use {INSERT MARKETPLACE NAME}'s services since November 15, 2014. Using any number from 0 to 10, where 0 is the worst in-person assistance possible and 10 is the best in-person assistance possible, what number would you use to rate the assistance you got when you met in person with someone about getting health insurance from {INSERT MARKETPLACE NAME}? **(GR/HP5-AM-m26)**

- 0 Worst in-person assistance possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best in-person assistance possible

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### Choosing a Health Plan

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The following questions ask about your experience choosing a health plan through {INSERT MARKETPLACE NAME} since November 15, 2014. This could include choosing a new health plan or choosing the same health plan you had in 2014.

**39.** Since November 15<sup>th</sup>, were you looking for health insurance for yourself through {INSERT MARKETPLACE NAME}? **(EP/C)**

- <sup>1</sup>  Yes
- <sup>2</sup>  No

**40.** Since November 15<sup>th</sup>, were you looking for health insurance for another family member, such as a spouse or child, through {INSERT MARKETPLACE NAME}? **(EP/C)**

- <sup>1</sup>  Yes
- <sup>2</sup>  No

**41.** Since November 15<sup>th</sup>, did you consider the services covered by the health plans available to you through {INSERT MARKETPLACE NAME} and how much you would have to pay? **(EP/L,S,T)**

- <sup>1</sup>  Yes
- <sup>2</sup>  No → **If No, go to #43**

42. Since November 15<sup>th</sup>, how often was it easy to understand the services covered by the health plans available to you and how much you would have to pay? (EP/L,S,T)

- <sup>1</sup> Never
- <sup>2</sup> Sometimes
- <sup>3</sup> Usually
- <sup>4</sup> Always

43. Since November 15<sup>th</sup>, did you try to find out which health plans available to you through {INSERT MARKETPLACE NAME} had the doctors or hospitals you wanted? (EP/L,S,T)

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #45**

44. Since November 15<sup>th</sup>, how often was it easy to understand which health plans had the doctors or hospitals you wanted? (EP/L,S,T)

- <sup>1</sup> Never
- <sup>2</sup> Sometimes
- <sup>3</sup> Usually
- <sup>4</sup> Always

45. Since November 15<sup>th</sup>, did you try to find out which health plans available to you through {INSERT MARKETPLACE NAME} covered the prescription medicines you needed? (EP/OMB30)

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #47**

46. Since November 15<sup>th</sup>, how often was it easy to understand which health plans covered the prescription medicines you needed? (EP/OMB30)

- <sup>1</sup> Never
- <sup>2</sup> Sometimes
- <sup>3</sup> Usually
- <sup>4</sup> Always

47. Special therapy includes physical, occupational, or speech therapy. Since November 15<sup>th</sup>, did you need any special therapy? (SP/C/HP5-AS-CC11)

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #49**

**48.** Since November 15<sup>th</sup>, was it easy to find out which health plans available to you through {INSERT MARKETPLACE NAME} offered the physical, occupational, or speech therapy services you needed? **(SP/C/HP5-AS-mCC12)**

- <sup>1</sup> Yes, definitely
- <sup>2</sup> Yes, somewhat
- <sup>3</sup> No

**49.** Home health care or assistance means home nursing, help with bathing or dressing, and help with basic household tasks. Since November 15<sup>th</sup>, did you need someone to come into your home to give you home health care or assistance? **(SP/C/HP5-AS-CC13)**

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #51**

**50.** Since November 15<sup>th</sup>, was it easy to find out which health plans available to you through {INSERT MARKETPLACE NAME} offered home health care services you needed? **(SP/C/HP5-AS-mCC14)**

- <sup>1</sup> Yes, definitely
- <sup>2</sup> Yes, somewhat
- <sup>3</sup> No

**51.** Since November 15<sup>th</sup>, did you choose a health plan through {INSERT MARKETPLACE NAME}? **(EP/T)**

- <sup>1</sup> Yes
- <sup>2</sup> No → **If No, go to #54**

**52.** Were you enrolled in that health plan in 2014? **(EP/FT,T)**

- <sup>1</sup> Yes
- <sup>2</sup> No
- <sup>3</sup> Don't Know

**53.** Since November 15<sup>th</sup>, was it easy to choose a health plan? **(EP/L,S,T/HP5-AM-m25)**

- <sup>1</sup> Yes, definitely
- <sup>2</sup> Yes, somewhat
- <sup>3</sup> No

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**Language Services**

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The following questions ask about language services you may have received through {INSERT MARKETPLACE NAME} since November 15<sup>th</sup>, 2014.

**54.** An interpreter is someone who helps you talk with others who do not speak your language. Since November 15<sup>th</sup>, did you need an interpreter to help you speak with anyone about getting health insurance from {INSERT MARKETPLACE NAME}? **(CuC/S,T/HP5-AS-mNew\_Q#)**

<sup>1</sup>  Yes

<sup>2</sup>  No → **If No, go to #56**

**55.** Since November 15<sup>th</sup>, when you needed an interpreter to help you speak with anyone about getting health insurance from {INSERT MARKETPLACE NAME}, how often did you get one? **(CuC/S,T/HP5-AS-mNew\_Q#)**

<sup>1</sup>  Never

<sup>2</sup>  Sometimes

<sup>3</sup>  Usually

<sup>4</sup>  Always

**56.** Since November 15<sup>th</sup>, did you fill out any forms for {INSERT MARKETPLACE NAME}? **(CUC/CI2)**

<sup>1</sup>  Yes

<sup>2</sup>  No → **If No, go to #60**

**57.** Since November 15<sup>th</sup>, how often were the forms that you had to fill out through {INSERT MARKETPLACE NAME} available in the language you prefer? **(CuC/S,T/CG2-AS-mHL32)**

<sup>1</sup>  Never

<sup>2</sup>  Sometimes

<sup>3</sup>  Usually

<sup>4</sup>  Always

**58.** Since November 15<sup>th</sup>, did you need the forms in a different format, such as large print or braille? **(CuC/OMB30/HP5-AM-m24)**

<sup>1</sup>  Yes

<sup>2</sup>  No → **If No, go to #60**

**59.** Since November 15<sup>th</sup>, how often were the forms that you had to fill out available in the format you needed, such as large print or braille? (CuC/OMB30/CG2-AS-mHL32)

- <sup>1</sup> Never
- <sup>2</sup> Sometimes
- <sup>3</sup> Usually
- <sup>4</sup> Always

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**Overall Rating of Your Health Insurance Marketplace**

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**60.** Using any number from 0 to 10, where 0 is the worst health insurance marketplace possible and 10 is the best health insurance marketplace possible, what number would you use to rate {INSERT MARKETPLACE NAME} since November 15<sup>th</sup>? (GR/HP5-AM-m26)

- 0 Worst health insurance marketplace possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health insurance marketplace possible

**61.** Would you recommend {INSERT MARKETPLACE NAME} to your friends and family? (GR/CII/H-m22)

- <sup>1</sup> Yes, definitely
- <sup>2</sup> Yes, somewhat
- <sup>3</sup> No

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## About You

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**62.** In general, how would you rate your overall health? **(RC/HP5-AM-27)**

- <sup>1</sup> Excellent
- <sup>2</sup> Very good
- <sup>3</sup> Good
- <sup>4</sup> Fair
- <sup>5</sup> Poor

**63.** In general, how would you rate your overall **mental or emotional** health? **(RC/HP5-AM-28)**

- <sup>1</sup> Excellent
- <sup>2</sup> Very good
- <sup>3</sup> Good
- <sup>4</sup> Fair
- <sup>5</sup> Poor

**64.** In the last 12 months, did you get care for 2 or more health problems or conditions that each lasted for at least a year? **(RC/FT)**

- <sup>1</sup> Yes
- <sup>2</sup> No

**65.** Are you deaf or do you have serious difficulty hearing? **(RC/OMB60/ACS-P-17a,OMH-4302-5)**

- <sup>1</sup> Yes
- <sup>2</sup> No

**66.** Are you blind or do you have serious difficulty seeing, even when wearing glasses?  
**(RC/OMB60/ACS-P-17b,OMH-4302-5)**

- <sup>1</sup> Yes
- <sup>2</sup> No

**67.** Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions? **(RC/OMB60/ACS-P-18a,OMH-4302-5)**

- <sup>1</sup> Yes
- <sup>2</sup> No

**68. Do you have serious difficulty walking or climbing stairs? (RC/OMB60/ACS-P-18b,OMH-4302-5)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No

**69. Because of a physical, mental, or emotional condition, do you have difficulty dressing or bathing? (RC/OMB60/ACS-P-18c,OMH-4302-5)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No

**70. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? (RC/OMB60/ACS-P-19,OMH-4302-5)**

- <sup>1</sup>  Yes  
<sup>2</sup>  No

**71. What is your age? (RC/HP5-AM-33)**

- <sup>1</sup>  18 to 24 years  
<sup>2</sup>  25 to 34  
<sup>3</sup>  35 to 44  
<sup>4</sup>  45 to 54  
<sup>5</sup>  55 to 64  
<sup>6</sup>  65 to 74  
<sup>7</sup>  75 or older

**72. What is your sex? (RC/CI1/OMH-4302-3)**

- <sup>1</sup>  Male  
<sup>2</sup>  Female

**73. What is the highest grade or level of school that you have completed? (RC/HP5-AM-35)**

- <sup>1</sup>  8th grade or less  
<sup>2</sup>  Some high school, but did not graduate  
<sup>3</sup>  High school graduate or GED  
<sup>4</sup>  Some college or 2-year degree  
<sup>5</sup>  4-year college graduate  
<sup>6</sup>  More than 4-year college degree

**74. What best describes your employment status? Mark only ONE. (RC/OMB60/NHBS-DM6)**

- <sup>1</sup> Employed full-time
- <sup>2</sup> Employed part-time
- <sup>3</sup> A homemaker
- <sup>4</sup> A full-time student
- <sup>5</sup> Retired
- <sup>6</sup> Unable to work for health reasons
- <sup>7</sup> Unemployed
- <sup>8</sup> Other

**75. Are you Hispanic, Latino/a, or Spanish origin? (RC/OMB60/M-ACO-77)**

- <sup>1</sup> Yes, Hispanic, Latino/a, or Spanish origin
- <sup>2</sup> No, not of Hispanic, Latino/a, or Spanish origin → **If No, go to #77**

**76. Which group best describes you? (RC/OMB60/M-ACO-78)**

- <sup>1</sup> Mexican, Mexican American, Chicano
- <sup>2</sup> Puerto Rican
- <sup>3</sup> Cuban
- <sup>4</sup> Another Hispanic, Latino, or Spanish Origin

**77. What is your race? Mark one or more. (RC/CI1/OMH-4302-2)**

- <sup>1</sup> White
- <sup>2</sup> Black or African American
- <sup>3</sup> American Indian or Alaska Native
- <sup>4</sup> Asian Indian
- <sup>5</sup> Chinese
- <sup>6</sup> Filipino
- <sup>7</sup> Japanese
- <sup>8</sup> Korean
- <sup>9</sup> Vietnamese
- <sup>10</sup> Other Asian
- <sup>11</sup> Native Hawaiian
- <sup>12</sup> Guamanian or Chamorro
- <sup>13</sup> Samoan
- <sup>14</sup> Other Pacific Islander

**78. What is your preferred language? (RC,CuC/T,C,OMB60/CG2-AS-CU22)**

- English → **If English, go to #80**
- Spanish
- Chinese
- Other

*Please specify:* \_\_\_\_\_

**79. How well do you speak English? (RC,CuC/T,C,OMB60/OMH-4302-4)**

- Very well
- Well
- Not well
- Not at all

**80. Did you have health insurance in the United States at any time between January 1<sup>st</sup> and December 31<sup>st</sup>, 2014? (RC/T,C)**

- Yes
- No

**81. How confident are you that you understand health insurance terms? (RC/OMB30)**

- Not at all confident
- Slightly confident
- Moderately confident
- Very confident

**82. Did someone help you complete this survey? (RC/HP5-AM-38)**

- Yes
- No → **Thank you. Please return the completed survey in the postage-paid envelope.**

**83. How did that person help you? Mark one or more. (RC/HP5-AM-39)**

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way

*Please print:* \_\_\_\_\_

\_\_\_\_\_

**Thank you.**

**Please return the completed survey in the postage-paid envelope.**