**Medicare Advantage Regional Outreach Experiment Survey (Online)**

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**Introduction**

This survey is being conducted on behalf of the Centers for Medicare and Medicaid Services. The Centers for Medicare and Medicaid Services is the government agency responsible for initiatives to improve the health of all Americans. It regularly sponsors research to help evaluate the healthcare Americans receive. Your participation in this survey is anonymous and voluntary. Your answers will remain confidential. Please click “next” to start the survey.

**Screening Questions**

1. [DG12] What is your zip code?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prefer not to answer -> **TERMINATE**

Not one of the experimental or control zip codes -> **TERMINATE**

*QUOTAS: n=800 in experimental zip codes and n=800 in control zip codes; need at least some representation from all 40 markets (does not need to be proportional, however)*

1. [DG2] To confirm your age, please enter the 4-digit year in which you were born.

\_\_\_\_\_ -> if less than 65 years old or over 75 -> **TERMINATE**

Don’t know-> **TERMINATE**

Prefer not to answer-> **TERMINATE**

1. [DG1] Are you:
	* Male
	* Female
	* Prefer not to answer
2. [DMG1] When it comes to your health insurance coverage and health care services do you usually:
* Make those decisions on your own without talking to anyone else
* Make those decisions on your own but talk with others about it
* Make those decisions with someone else’s help
* Rely on someone else to make those decisions for you -> **TERMINATE**
* Don’t know -> **TERMINATE**
* Prefer not to answer -> **TERMINATE**
1. [ING1] Do you currently have Medicare?
	* Yes
	* No -> **TERMINATE**
* Don’t know -> **TERMINATE**
* Prefer not to answer -> **TERMINATE**
1. [ING2] [If YES to Q5]: There are different ways that people can get Medicare coverage. Please select the option that best describes how you get your hospital (Part A) and doctor (Part B) costs covered in **2018**.
* I have a plan directly through Medicare – sometimes called traditional Medicare, Original Medicare, or an 80/20 plan
* I have a plan through a private insurance company like an HMO or PPO, also called Medicare Advantage -> **GO to S9**
* Don’t know -> **TERMINATE**
* Prefer not to answer -> **TERMINATE**
1. [ING6] [If Original Medicare in S6]: Do you have a supplemental plan, also called Medigap, that helps cover the health care costs that Original Medicare doesn’t cover, like copayments, coinsurance, and deductibles?
	* Yes
	* No
* Don’t know
* Prefer not to answer
1. [ING5] [If Original Medicare in S6]: Do you have a prescription drug plan (Part D)?
* Yes
* No
* Don’t know
* Prefer not to answer
1. [ING2] [If Medicare Advantage in S6]: To confirm, your Medicare Advantage plan is a provided by an independent insurance company, which means you typically show a health plan card from this insurance company when you visit the doctor’s office or hospital. Do you use a health plan card from a private insurance company for these types of visits?
* Yes
* No
* Don’t know
* Prefer not to answer

 S10. [ING2] Do you have health insurance through your job or your spouse’s job?

* Yes -> **TERMINATE**
* No
* Don’t know -> **TERMINATE**
* Prefer not to answer -> **TERMINATE**

 S11. [ING2] Do you have health insurance coverage through any of the following? *Select all that apply*

* Medicaid or state assistance -> **TERMINATE**
* VA or Veterans’ health insurance - > **TERMINATE**
* Railroad health insurance **-> TERMINATE**
* End-stage renal disease (ESRD) health insurance **-> TERMINATE**
* None of the above
* Don’t know **-> TERMINATE**
* Prefer not to answer **-> TERMINATE**

QUOTAS: n=480 in each group have Original Medicare from S6 and n=320 in each group have Medicare Advantage from S6

**Familiarity/Perceptions of Medicare Advantage**

1. [DMG4] [If Original Medicare]: Prior to today, have you heard of Medicare Advantage Plans?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer
2. [DMG4a] How familiar are you with Medicare Advantage as an option for how to receive your Medicare?
	* Very familiar
	* Somewhat familiar
	* Not very familiar
	* Not at all familiar
	* Don’t Know
	* Prefer not to answer
3. [PG6] Overall how favorable is your impression of Medicare Advantage plans?
	* Very favorable
	* Somewhat favorable
	* Somewhat unfavorable
	* Very unfavorable
	* Don’t know
	* Prefer not to answer

**Campaign Exposure**

1. a-d

|  |  |  |
| --- | --- | --- |
|  | 4a. [AWG5] Have you recently seen, read or heard anything about Medicare Advantage plans? | 4b. [AWG2B] If yes, was that in an advertisement, a news piece or article, or both?  |
|  | Yes | No | Don’t know | Prefer not to answer  | Advertisement | News/article | Both |
| On television |  |  |  |  |  |  |  |
| On the radio |  |  |  |  |  |  |  |
| In the mail |  |  |  |  |  |  |  |
| On the Internet |  |  |  |  |  |  |  |
| In a newspaper or magazine |  |  |  |  |  |  |  |
| Through word of mouth  |  |  |  |  | N/A |

4c. [AWG2A] [IF select “Advertisement” for Radio in 4b]: You said you heard an advertisement for Medicare Advantage on the radio. Please briefly describe what you heard. Be as specific as possible when describing the advertisement.

4d. [AWG2A] [IF selected “Advertisement” for Internet in 4b]: You said you saw an advertisement for Medicare Advantage on the Internet. Please briefly describe what you saw. Be as specific as possible when describing the advertisement.

1. [AWG5] Have you recently received any emails that included information about Medicare Advantage?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer

**Knowledge about Medicare Advantage**

1. [KG7] Please indicate if you believe each of the following statements is true or false. If you are not sure, please select “I don’t know.” If you have not heard anything, please select “I haven’t heard.” **[RANDOMIZE ORDER OF STATEMENTS]**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | True | False | I don’t know  | I haven’t heard | Prefer not to answer |
| a. All Medicare Advantage plans have a cap on out of pocket costs  |  |  |  |  |  |
| b. All Medicare Advantage plans are health plans from private companies  |  |  |  |  |  |
| c. Medicare Advantage plans combine your hospital, doctor, and prescription drug benefits into a single plan  |  |  |  |  |  |

1. [PG9] Please indicate whether you agree or disagree with the following statements about Medicare Advantage plans. **[RANDOMIZE ORDER OF STATEMENTS]**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Somewhat Agree | Somewhat Disagree | Strongly disagree | Don’t know  | Prefer not to answer  |
| a. With Medicare Advantage you can choose the coverage that’s right for you |  |  |  |  |  |  |
| b. Medicare advantage plans include extra benefits like hearing, vision, and dental coverage  |  |  |  |  |  |  |
| c. 4 out of 5 people pay a premium of less than $50 per month for their Medicare Advantage plans  |  |  |  |  |  |  |

**Medicare Advantage decision-making**

1. [BG1] During the last Open Enrollment period, did you [or the person who helps you] review your insurance coverage to see if there were going to be changes in the monthly premiums, deductibles, co-payments, or other out of pocket expenses?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer
2. [BG1] During the last Open Enrollment period, did you [or the person who helps you] review your insurance coverage to see if the kinds of treatment, drugs and services covered will meet your health care needs?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer
3. [BG1] Did you (or the person who helps you) compare your plan with other plans that are available?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer
4. [BG1] [If Original Medicare in S6]: Have you (or the person who helps you) recently considered Medicare Advantage as an option for your health insurance?
	* Yes -> **Go to Q13**
	* No -> **Go to Q12**
	* Don’t know **-> Go to Q14**
	* Prefer not to answer **-> Go to Q14**
5. [ISG4] [If NO to Q11]: Why didn’t you consider Medicare Advantage plans as an option for your health insurance? *Select all that apply*
	* I am satisfied with my current plan
	* I don’t know enough about Medicare Advantage plans
	* My healthcare provider or doctor is not covered by Medicare Advantage plans
	* There are not enough/any Medicare Advantage plans in my area
	* I was previously on a Medicare Advantage plan and was not satisfied with it
	* Other (Specify)
	* Don’t know
	* Prefer not to answer
6. [DMG4A] [If YES to Q11]: How seriously did you consider Medicare Advantage as an option for your healthcare?
	* Very seriously
	* Seriously
	* Somewhat seriously
	* Not very seriously
	* Don’t know
	* Prefer to answer
7. [BG11] [If YES, DK, or Refuse to Q11]: What, if anything, did you do to learn more about Medicare Advantage plans? *Select all that apply*
	* I did not do anything to learn more about Medicare Advantage plans
	* I looked at the *Medicare and You* Handbook
	* I called 1-800-MEDICARE
	* I went to Medicare.gov
	* I went to another website
	* I spoke to an insurance broker
	* I spoke to friends or family
	* Other, specify
	* Don’t know
	* Prefer not to answer
8. [BG1] [If Original Medicare]: Did you switch to a Medicare Advantage plan for 2019?
	* Yes -> **Go to Q17**
	* No
	* Don’t know
	* Prefer not to answer
9. [BG8] [If Original Medicare in S6 & Q15 = No]: How likely are you to switch to a Medicare Advantage plan in the future?
	* Very likely
	* Somewhat likely
	* Somewhat unlikely
	* Very unlikely
	* Don’t know
	* Prefer not to answer

**Demographics**

1. [IUG4] How often do you use the Internet on your own or with someone else’s help?
	* Daily or almost daily
	* Once or twice a week
	* Once or twice a month
	* Only a few times a year
	* Don’t use the internet
	* Don’t know
	* Prefer not to answer
2. [HSG3] Compared to other people who are the same age as you, do you consider your health to be:
	* Excellent
	* Very good
	* Good
	* Fair
	* Poor
	* Don’t know
	* Prefer not to answer
3. [DG6] What is your current marital status?
	* Married
	* Divorced
	* Separated
	* Widowed
	* Single, never married
	* Don’t know
	* Prefer not to answer
4. [DG5] What is the highest level of education that you have completed?
	* Grade school or less
	* Some high school
	* Completed high school/GED
	* Vocational/technical school
	* Some college/ 2 years or less
	* Some college/ more than 2 years
	* Graduated college
	* Post-graduate degree (e.g., PhD or Master’s degree)
	* Don’t know
	* Prefer not to answer
5. [DG3] Are you Hispanic or Latino?
	* Yes
	* No
	* Don’t know
	* Prefer not to answer
6. [DG4] What is your racial or ethnic background? Please check all that apply.
	* White
	* Black
	* Asian
	* American Indian or Alaska Native
	* Native Hawaiian or other Pacific Islander
	* Other (specify)
	* Don’t know
	* Prefer not to answer
7. [DG10] What is the annual income of your household before taxes and deductions?
	* Less than $10,000
	* $10,000 to less than $15,600
	* $15,600 to less than $21,000
	* $21,00 to less than $25,000
	* $25,000 to less than $35,000
	* $35,000 to less than $50,000
	* $50,000 to less than $75,000
	* $75,000 or more?
	* Don’t know
	* Prefer not to answer