**PMI Survey Draft**

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| When you get a prescription medicine, the pharmacy usually gives you a leaflet with information about the medicine. The information may add to what your health care provider told you about the medicine and can help you recognize if you are having a side effect from the medicineA number of suggestions have been made to make these leaflets easier to use. One idea is to standardize the design and information presented in the leaflets so that they are only one-page long and look the same for every prescription medicine. This might make the most important information about your medicine easier to find because it will be in the same place in every leaflet.  |
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| \*\*PMI/CMI Examples (10,000 foot view)\*\* |
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**SURVEY QUESTIONS**

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| By standardizing the leaflets you receive with your prescription medicine to make it easier to use, the costs of the change could be passed on to consumers like you. |
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| 1. How much would your household be willing to pay each year to receive the proposed (standardized) changes to the leaflet? If your household would not be willing to pay for these changes, please enter 0.
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| 1. You answered that your household would not be willing to pay for the proposed changes. How much would your household be willing to pay each year to avoid the proposed changes? If your household would not be willing to pay to avoid the changes, please enter 0.
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| 1. Suppose instead that the proposed changes could be made without passing the cost on to consumers like you. Would you prefer to receive the leaflet in the standardized format instead of what the pharmacy usually provides?

□ Yes□ No□ I do not have a preference |

**ADDITIONAL (NON CONTINGENT VALUATION QUESTIONS)**

1. In the past 30 days, have you used a prescription medicine? Include only those products prescribed by a health professional such as a doctor or dentist. [NHANES]
	1. Yes
	2. No
	3. I don’t know
2. When you have questions about your prescription medicine, how often do you take the following actions? Please check only the sources that apply to you.

□ I have never taken a prescription medicine or had a question about a prescription medicine I was taking. **Go to question 6.**

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| --- | --- | --- | --- | --- | --- |
|  | Always | Often | Sometimes | Occasionally | Never |
| Talk to a physician | □ | □ | □ | □ | □ |
| Talk to a pharmacist | □ | □ | □ | □ | □ |
| Read the leaflet that comes with the medicine | □ | □ | □ | □ | □ |
| Use the internet | □ | □ | □ | □ | □ |
| Other | □ | □ | □ | □ | □ |

1. What type of health insurance do you have now?
	1. A plan through my employer
	2. A plan I purchased myself
	3. Medicare/Medicaid/Other Government Program
	4. Other type of insurance
	5. I do not have health insurance
	6. I don’t know or prefer not to answer
2. How confident are you in filling out medical forms by yourself? [BRIEF; Health Literacy]
	1. Extremely
	2. Quite a bit
	3. Somewhat
	4. A little bit
	5. Not at all

**DMPP ADDITIONAL SURVEY QUESTIONS**

Instructions: Until now, you answered questions about the leaflets that you get from a pharmacy along with most prescription medicines. In this section, you will be asked to answer three questions about a specific kind of leaflet that you get from a pharmacy along with some prescription medications.

Medication Guides tell you about certain high-risk drugs and how to take them safely.

They also tell you about:

▪ The risks and side effects of a drug

▪ What you should do if you are having an adverse (or harmful) reaction to a drug

▪ The benefits of taking a drug

▪ And, when to stop taking a drug

Here is an example of a Medication Guide.

[*insert Medication Guide prototype*]

Please think about the Medication Guides that you have received from a pharmacy when completing questions 8, 9, and 10.

To give your answers, simply click on one of the buttons below each question.

8. Have you ever received a Medication Guide with any of your prescription medicine?

1. Yes
2. No
3. I don’t know

Note: If the respondent answers “Yes” to question 8, the survey continues to questions 9 and 10. If the respondent answers “No” or “I don’t know” to question 8, the survey ends. Also, be sure to disable (or not use) any “BACK” or “PREVIOUS” button in this section of the survey so that participants will not have a chance to return to a previous item once they’ve completed it.

9. How easy to read are the Medication Guides that you have received from a pharmacy along with your prescription medicines?

1. Very easy
2. Somewhat easy
3. About average
4. Somewhat difficult
5. Very difficult

10. How easy to understand are the Medication Guides that you have received from a pharmacy along with your prescription medicines?

1. Very easy
2. Somewhat easy
3. About average
4. Somewhat difficult
5. Very difficult