According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-1247**. The time required to complete this information collection is estimated to average **15 minutes per participant**, 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. **Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns Matthew Yuen at Matthew.Yuen@cms.hhs.gov or 410-786-1596.**

Marketplace OE Survey

Introduction:

This is a national survey of adults being conducted on behalf of the U.S. Department of Health and Human Services. The U.S. Department of Health and Human 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 individual answers will remain confidential and reported only in aggregate.

Screening Questions:

To begin with, you will first be asked some questions about yourself, your health insurance, and your general health.

- S1. [DG2] Just to confirm your age, in what year were you born? _____ IF year < 1954 OR year > 2002 OR DK OR REF -> **TERMINATE**
- S2. [DG11] In what state do you reside? IF not FFM or partnership state OR REF -> **TERMINATE**

[TERMINATE- Arkansas, California, Colorado, Connecticut, DC, Idaho, Kentucky, Maryland, Massachusetts, Minnesota, Nevada, New Mexico, New York, Oregon, Rhode Island, Vermont, Washington]

S3. [DG12] What is your zip code?

9 Prefer not to answer -> TERMINATE

- S4. [DMG1] When it comes to healthcare and health insurance do you usually make decisions on your own, with someone else's help, or do you rely on someone else to make those decisions for you?
 - 1 I make those decisions on my own without talking to anyone else
 - 2 I make those decisions on my own, but talk with others about it
 - 3 I make those decisions with someone else's help
 - 4 I rely on someone else to make those decisions for me -> TERMINATE
 - 8 Don't know -> **TERMINATE**
 - 9 Prefer not to answer -> **TERMINATE**

S5. [ING1] Do you currently have health insurance?

- 1 Yes
- 2 No -> GO TO Q1
- 8 Don't know -> **TERMINATE**
- 9 Prefer not to answer -> TERMINATE

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- S6. [ING2] How do you currently get health insurance to cover your hospital expenses or doctor's visits? Do you get it through...?
 - 1 Your current or former employer -> **TERMINATE**
 - 2 Your spouse or partner's current or former employer -> TERMINATE
 - 3 {SHOW IF S1>1993} Your parents' health plan -> TERMINATE
 - 4 A plan you purchase on your own, directly from a health insurance company -> **TERMINATE**
 - 5 A COBRA health insurance plan -> **TERMINATE**
 - 6 A plan you purchased through the Health Insurance Marketplace or HealthCare.gov -> GO TO S7
 - 7 Medicare for people 65 or older, or with certain disabilities-> **TERMINATE**
 - 8 (INSERT STATE MEDICAID NAME) -> TERMINATE
 - 9 TRICARE, VA, or Veteran's Health Insurance -> **TERMINATE**
 - 97 Other: Specify -> **TERMINATE**
 - 98 Don't know -> **TERMINATE**
 - 99 Prefer not to answer -> **TERMINATE**
- S7. [ING3] How long has it been since you first purchased your health plan through the Health Insurance Marketplace?
 - 1 Less than 1 year (you purchased in 2019)
 - 2 1 year (you purchased in 2018)
 - 3 2 years (you purchased in 2017)
 - 4 3 years (you purchased in 2016)
 - 5 4 years (you purchased in 2015)
 - 6 5 years (you purchased in 2014)
 - 8 Don't know
 - 9 Prefer not to answer

Health Status and Health Insurance Perceptions:

- Q1. [ISG1] How satisfied would you say you are with your current health insurance situation? (Flip scale)
 - 1 Very satisfied
 - 2 Somewhat satisfied
 - 3 Somewhat dissatisfied
 - 4 Very dissatisfied
 - 8 Don't know
 - 9 Prefer not to answer

Q2. [HSG3] Thinking about your own health status these days, would you say it is: (Flip scale)

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 8 Don't know
- 9 Prefer not to answer
- Q3. [HSG2] Do you have any chronic health conditions that require ongoing care, such as arthritis, chronic pain, high blood pressure, diabetes, or heart disease?
 - 1 Yes
 - 2 No
 - 8 Don't know
 - 9 Prefer not to answer
- Q4. [PG5] Given everything in your life these days, how important is it to you to have health insurance?
 - 1 Very important
 - 2 Somewhat important
 - 3 Not too important
 - 4 Not at all important
 - 8 Don't know
 - 9 Prefer not to answer

Q5. [ING3] [IF S5=2]: How long have you been without health insurance?

- 1 Less than six months
- 2 Six months to less than one year
- 3 One year to less than two years
- 4 Two years or longer
- 8 Don't know
- 9 Prefer not to answer

- Q6. [ING4] **[IF S5=2]:** Have you ever had a health plan through the Health Insurance Marketplace or HealthCare.gov?
 - 1 Yes
 - 2 No
 - 8 Don't know
 - 9 Prefer not to answer
- Q7. [ING4] **[IF S5=2]:** What is the **main** reason you do not currently have health insurance? (RANDOMIZE)
 - 1 I am disabled
 - 2 I am unemployed
 - 3 I can't afford it/It is too expensive
 - 4 I can't get Medicaid/I was dropped from Medicaid
 - 5 I don't need it
 - 6 I don't qualify for it
 - 7 I have a pre-existing condition
 - 8 I never thought about it
 - 9 My employer/spouse's employer does NOT offer health insurance
 - 10 My employer/spouse's employer offers health insurance but it is too expensive
 - 11 My medical bills are not high/I'm in good health
 - 97 Other (specify)
 - 98 Don't know
 - 99 Prefer not to answer

Q8. [BG8] [IF S5=2] Do you plan to get health insurance within the next year?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

Q9. [ING4] [IF S6=6]: What is the main reason you decided to get health insurance? (RANDOMIZE)

- 1 The law required that I have health insurance
- 2 I did not want to pay the fine for not having health insurance
- 3 I need insurance in case I get sick and need care
- 4 I have a medical condition
- 5 I need insurance for preventative care to stay healthy
- 6 Healthcare costs are too expensive without coverage
- 7 The health insurance plan is affordable
- 97 Other (specify)
- 98 Don't know
- 99 Prefer not to answer

Q10. [DMG4] How familiar are you with the following:

(RANDOMIZE)	Very familiar	Somewhat familiar	Somewhat unfamiliar	Very unfamiliar	Don't know	Prefer not
a. [DMG4] The Health Insurance Marketplace						
b. [DMG4] Healthcare.gov						

The next set of questions will ask about some of your opinions and experiences.

Q11. [BG1] In the past 90 days, have you done any of the following:

_			•	1	
	(RANDOMIZE)	Yes	No	Don't	Prefer
				know	not to
					answer
a.	[BG1] [IF S5=2]: Considered buying health insurance				
b.	[BG1] [If Marketplace insured]: Considered changing health				
	insurance plans				
С.	[BG1] Researched health insurance plans				
d.	[BG1] Attempted to purchase a new health insurance plan				
e.	[BG1] Contacted an agent or broker to help you find health				
	insurance				
f.	[BG1] Shopped online for health insurance				
g.	[BG1] Looked into or inquired about Medicaid or government				
	insurance programs				
h.	[BG1] [IF S6 = 6]: Purchased a health insurance plan				
i.	[BG1] [IF S6 = 6]: Changed from one insurance plan to another				
j.	[BG1] [IF S6 = 6 & S7 = 2-6]: Updated your Marketplace				
	application				

Q12. [BG6] The next set of questions will ask about some of your opinions and experiences.

	(RANDOMIZE)	Yes	No	Don't know	Prefer not to answer
a.	[BG6] [IF 11f = YES]: You mentioned that you shopped online for health insurance. Did you use HealthCare.gov to shop?				
b.	[BG6] [IF 11h = YES]: You mentioned that you purchased a health insurance plan. Did you use HealthCare.gov to purchase your plan?				
C.	[BG6] [IF YES for ANY of 11a – 11j]: Did you call the Marketplace Call Center to get help with questions or with applying for health insurance?				
d.	[BG6] [IF YES for ANY of 11a – 11j]: Did you go to someone local for in-person assistance when applying for health insurance through the Marketplace?				

Q13. [ING4] **[IF S5=2 and ANY of 11c-11f = YES]:** Thinking about the last time you looked for health insurance on your own, why did you ultimately decide not to purchase a plan? **Randomize**

- 1 The premium was too high
- 2 The out of pocket costs
- 3 The deductible
- 4 The copayments
- 5 I was unsatisfied with the benefits covered
- 6 There was no financial assistance available
- 7 My doctors were not covered in the network
- 8 I couldn't decide between plans
- 9 There were not enough plans available
- 10 The process to purchase a plan was confusing
- 97 Other (specify)
- 98 Don't know
- 99 Prefer not to answer

Knowledge and Attitudes about the Health Insurance Marketplace:

Q14. [AWG2]Have you recently seen, heard or read anything about the Health Insurance Marketplace or HeathCare.gov? This could be from the news, advertisements, or anything you've researched on your own.

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

Q15. [AWG6] Have you received any emails in the last 90 days from HealthCare.gov that included information about the Health Insurance Marketplace or HealthCare.gov?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

- Q16. [IBG10] **[IF YES to Q15]:** Which of the following best describes what you typically did with these emails from HealthCare.gov?
 - 1 I read the emails
 - 2 I only read the subject line, but not the content, of the emails
 - 3 I did not read the emails
 - 8 Don't know
 - 9 Prefer not to answer
- Q17. [AWG4] **[IF Q14 = YES]:** Based on what you've seen, read or heard, would you say that the Marketplace at HealthCare.gov is talked about mostly in a positive way, a negative way, or a neutral way?
 - 1 In a positive way
 - 2 In a negative way
 - 3 In a neutral way
 - 8 Don't know
 - 9 Prefer not to answer

Q18. [PG6] Overall, do you have a favorable or unfavorable impression of the Health Insurance Marketplace?

- 1 Very favorable
- 2 Somewhat favorable
- 3 Somewhat Unfavorable
- 4 Very Unfavorable
- 8 Don't know
- 9 Prefer not to answer
- Q19. [KG7] To the best of your knowledge, are each of the following phrases that describe specific features of the Health Insurance Marketplace or HealthCare.gov true or false? If you are unsure or haven't heard enough to say, please indicate this.

(RA	ANDOMIZE)	True	False	Don't know	Prefer not to answer
a.	[KG7] The Health Insurance Marketplace or				
	HealthCare.gov was open during Open Enrollment this year as a place to buy insurance for 2020				
b.	[KG7] Most people in the US are required to have health				
	insurance coverage or they will have to pay a fine				
C.	[KG7] Each year there is an Open Enrollment period during				
	which you can buy a health plan or switch to a different				
	health plan in the Marketplace				
d.	[KG7] At the Health Insurance Marketplace, you can find				
	out if you are eligible to get savings that will make your				
	monthly health insurance premiums more affordable				
e.	[KG7] There are other websites where you can enroll in a				
	Marketplace health plan other than HealthCare.gov				

- Q20. [KG7] To the best of your knowledge, what is the last day of Open Enrollment for the upcoming year the time in which you can buy or change your health insurance plan in the Health Insurance Marketplace for 2020?
 - 1 December 15, 2019
 - 2 December 31, 2019
 - 3 January 31, 2020
 - 4 February 15, 2020
 - 5 March 31, 2020
 - 6 I can buy or change plans at any time during the year
 - 7 Unsure/Haven't heard
 - 98 Don't know
 - 99 Prefer not to answer
- Q21. [AWG2] Before today, have you heard of www.HealthCare.gov?
 - 1 Yes
 - 2 No -> **GO to Q26**
 - 8 Don't know -> GO to Q26
 - 9 Prefer not to answer -> GO to Q26
- Q22. [BG5] Have you ever visited www.HealthCare.gov?
 - 1 Yes
 - 2 No -> GO to Q26
 - 8 Don't know -> GO to Q26
 - 9 Prefer not to answer -> GO to Q26

Q23. [BG5] **[IF YES to Q22]:** Have you visited www.HealthCare.gov in the past year?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer
- Q24. [BG10] [IF YES to Q22]: Did you set up an account at www.HealthCare.gov?
 - 1 Yes
 - 2 No -> GO to Q26
 - 8 Don't know -> GO to Q26
 - 9 Prefer not to answer -> **GO to Q26**

Q25. [BG10] **[IF YES to Q24]:** Did you fill out an application on www.HealthCare.gov?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

Q26. [BG8] How likely are you to go to www.HealthCare.gov in the future?

- 1 Very likely
- 2 Somewhat likely
- 3 Somewhat unlikely
- 4 Very unlikely
- 8 Don't know
- 9 Prefer not to answer

Q27. [BG8] Please indicate how likely you are to do each of the following.

(RAND	OMIZE)	Very likely	Somewhat likely	Somewhat unlikelv	Very unlikely	Don't know	Prefer not to answer
a.	[BG8] I plan to visit HealthCare.gov with the next 3-6 months						
b.	[BG8] I plan to call the Marketplace Call Center within the next 3-6 months						
C.	[BG8] I plan to talk to a local assistor or navigator within the next 3-6 months						
d.	[BG8] I plan to talk to a health insurance agent or broker within the next 3-6 months						
e.	[BG8] [IF S5=2] I plan to sign up for health insurance through the Health Insurance Marketplace at Healthcare.gov						

Satisfaction with Marketplace Insurance:

Q28. **[BG10] [IF S6=6]:** Earlier you indicated that you had purchased your health insurance through the Health Insurance Marketplace. Did you renew your plan for 2020?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

Q29. [ISG1] [IF S6=6]: How satisfied would you say you are with your current plan overall?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat unsatisfied
- 4 Very unsatisfied
- 8 Don't know
- 9 Prefer not to answer

Q30. [ISG1] [IF Q6=1]: How satisfied would you say you were with your previous health plan through the Marketplace overall?

- 1 Very satisfied
- 2 Somewhat satisfied
- 3 Somewhat unsatisfied
- 4 Very unsatisfied
- 8 Don't know
- 9 Prefer not to answer

Q31. **[ISG1] [IF S6=6]:** How satisfied are you with the following aspects of your current health plan?

(RANDOMIZE)	Very satisfied	Somewhat satisfied	Somewhat unsatisfied	Very unsatisfied	Don't know	Prefer not
a. [ISG1] Choice of doctors						
b. [ISG1] Monthly premium amount						
c. [ISG1] Out-of-pocket costs						
d. [ISG1] Coverage for healthcare services						
e. [ISG1] Customer service						
f. [ISG1] The process of making the premium payment						
g. [ISG1] Your deductibles						

Q32. [ISG1] **[IF Q6=1]:** How satisfied were you with the following aspects of your previous health plan through the Marketplace?

(RANDOMIZE)	Very satisfied	Somewhat satisfied	Somewhat unsatisfied	Very unsatisfied	Don't know	Prefer not
h. [ISG1] Choice of doctors						
i. [ISG1] Monthly premium amount						
j. [ISG1] Out-of-pocket costs						
k. [ISG1] Coverage for healthcare services						
I. [ISG1] Customer service						
m. [ISG1] The process of making the premium payment						
n. [ISG1] Your deductibles						

Q33. [ING6] **[IF S6=6]:** Do you currently receive a premium credit (or help paying monthly premiums) through the Health Insurance Marketplace? This is sometimes called a subsidy.

- 1 Yes
- 2 No
- 8 Don't know
- 9 Prefer not to answer

Demographics:

- Q34. [B1]Many people have cell phones that they use only for occasional calls while other people use them to take all their calls. Which of the following best describes you?
 - 1 I don't have a cell phone
 - 2 I use my landline for most of my calls, but also have a cell phone
 - 3 I use my cell phone for most of my calls, but also have a landline
 - 4 I use them both about equally
 - 5 I don't have a landline
 - 8 Don't know
 - 9 Prefer not to answer
- Q35. [IUG4]How often do you access the internet on your own or with someone else's help?
 - 1 Daily or almost daily
 - 2 Once or twice a week
 - 3 Once or twice a month
 - 4 A few times a year
 - 5 Don't use the internet
 - 8 Don't know
 - 9 Prefer not to answer

Q36. [DG1] What is your gender?

- 1 Male
- 2 Female
- 9 Prefer not to answer

Q37. [DG4]What is your race or ethnic background? Please identify all of the categories that apply to you? *Select all that apply.*

- 1 White
- 2 Black or African American
- 3 Asian
- 4 American Indian or Alaska Native
- 5 Native Hawaiian or other Pacific Islander
- 8 Other (specify)
- 9 Prefer not to answer

Q38. [DG3] Are you Hispanic or Latino?

- 1 Yes
- 2 No
- 9 Prefer not to answer

Q39. [DG5] What is the highest level of education you have completed?

- 1 Grade school or less
- 2 Some high school
- 3 Graduated high school/GED
- 4 Some college but did not graduate
- 5 Vocational/Technical school/Associates degree
- 6 Graduated four year college
- 7 Post graduate degree (e.g., PhD or Master's degree)
- 9 Prefer not to answer

Q40. [DG6]What is your marital status?

- 1 Married
- 2 Never married/single
- 3 Separated
- 4 Divorced
- 5 Widowed
- 9 Prefer not to answer
- *Q41.* [DG9]What is your current employment status? (Select one.)
 - 1 Employed full time -> GO to Q43
 - 2 Employed part time -> GO to Q43
 - 3 Retired -> GO to Q43
 - 4 Unemployed and looking for work
 - 5 Self-employed -> GO to Q43
 - 6 Disabled -> GO to Q43
 - 7 Not in the labor force (student, homemaker, etc.) -> GO to Q43
 - 97 Other (specify) -> GO to Q43
 - 99 Prefer not to answer -> GO to Q43
- Q42. [DG8]How many dependent children under the age of 19 live in your household?
 - 98 Prefer not to answer
- Q43. [DG7]Including yourself, how many immediate family members live in your home?
 - 98 Prefer not to answer

Q44. [DG10]What is your total household income? If you are living with parents, a roommate, or other relatives, please include the income for only yourself and your spouse, if applicable.

- 1 Less than \$15,000 2 \$15,000 to under \$2 \$15,000 to under \$25,000
- 3 \$25,000 to under \$50,000
- 4 \$50,000 to under \$75,000
- 5 \$75,000 to under \$100,000
- 6 \$100,000 to under \$150,000
- 7 \$150,000 to under \$200,000 8 \$200,000 or more
- 98 Don't know
- 99 Prefer not to answer