NCI/Office of Communications and Public Liaison

# **APPENDIX 1A**

CUSTOMER SERVICE AND DEMOGRAPHIC QUESTIONS

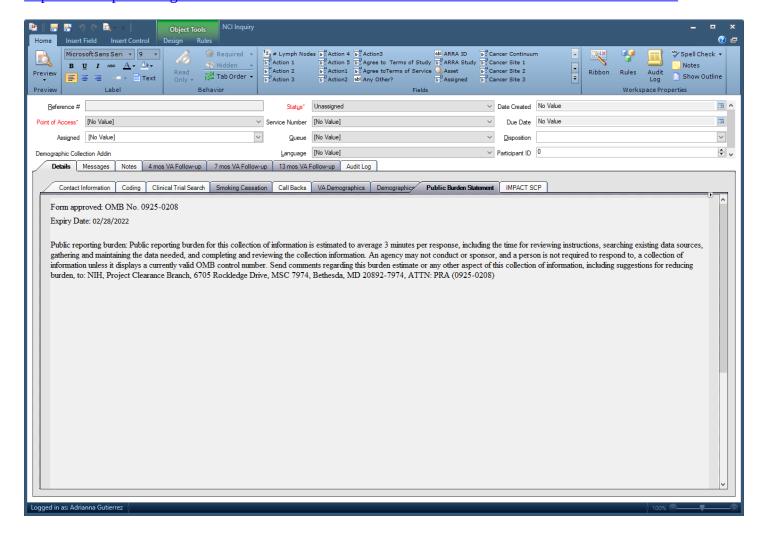
#### **Customer Service Questions**

The Public Burden statement for the phone demographics is on the workspace pictured below, here are the actual demographics questions:

https://livehelp.cancer.gov/ci/documents/detail/5/1/12/d20f5cee1379622717570b0dd5ba13012e07435c

The VA Demographics share the public burden statement, which is on the workspace above, here is the actual VA survey:

https://livehelp.cancer.gov/ci/documents/detail/5/6/12/3d59acc925ccbfd3f780e854ed1be3795a3be5a7



#### **Questions:**

- Have you used service before?
- How did you find our Service?
- Zip Code?

#### **Demographic Survey Questions**

#### What is your age?

- O Age (Text box)
- o Callers age 96 or older
- o Don't know
- o Refusal
- Did not ask
- o Exempt

#### What is your Gender?

- o Male
- o Female
- O Don't know
- o Refusal
- o Did not ask
- o Exempt

#### Which of These Categories Best Describes You?

- o Hispanic or Latino
- o Not Hispanic or Latino
- O Don't know
- o Refusal
- o Did not ask
- o Exempt

#### Which of These Categories Best Describes You? You can select more than one:

- O American Indian or Alaska Native
- o Asian
- o Black or African American
- o Native Hawaiian or Other Pacific Islander
- o White
- O Don't know
- o Refusal
- o Did not ask
- o Exempt

What Is the Highest Level of Education You Have Completed?

Customer Service and Demographic Questions Grade school Some high school High school graduate Some college College graduate Post-graduate Not sampled Don't know Refusal Did not ask Exempt Is There a Place You Usually Go to When You are Sick or Need Advice About Your Health? Yes No 0

- Don't Know
- Refused
- Did not ask
- Exempt

What Kind of Place Do You Go Most Often?

- A doctor's office
- A clinic, health center, or hospital clinic
- The emergency room, or
- Some other place
- No one place
- Valid skip
- Don't know
- Refused
- Did not ask
- Exempt

In the Last 12 Months, Did You Have Any Kind of Healthcare Coverage, Including Health Insurance, Prepaid Plans Such As HMOs or Government Plans Such as Medicare?

- Yes 0
- No
- Don't know

- o Refused
- o Did not ask
- o Exempt

Would You Say You Had This Coverage During All 12 Months or Less Than 12 Months?

- o All 12 months
- o Less than 12 months
- o Valid Skip
- O Don't know
- Refused
- o Did not ask
- o Exempt

Which Type of Coverage Did You Have?

- O Was it public, such as Medicare, Medicaid, or other government plans?
- O Was it private, such as an HMO, Blue Cross, Kaiser, Aetna?
- O Or, was it both public and private?
- o Valid skip
- O Don't know
- o Refused
- o Did not ask
- o Exempt

The final questions are about your family income. I understand that this is sensitive information and I would like to stress again that all of the information you provide is confidential.

What Was Your Total Household Income from All Sources Before Taxes Last Year? Just Stop Me When I Get to the Right Category

- o Less than \$10,000
- o \$10,000 to \$19,000
- o \$20,000 to \$29,000
- o \$30,000 to \$39,000
- o \$40,000 to \$59,000
- o \$60,000 to \$79,000
- o \$80,000 or more
- O Don't know
- o Refused
- Did not ask
- o Exempt

Including Yourself, How Many People Living in Your Household are Supported by This Total Household Income?

- o Total People (Text box)
- O Don't know
- o Refused
- O Did not ask
- o Exempt