

Section name	Item name	Question Text	Code Frame	Question Routing	Question Source Link	Requestor
Intro	BOX INT1	IF PROXY FLAG=1, GO TO PROXYINT, ELSE, GO TO INTRO_1			n/a	N/A - Operational
	INTRO_1	NO CONTACT Hello, may I please speak to [SP]? My name is [TI_NAME] and I'm calling from NORC at the University of Chicago on behalf of the Medicare Current Beneficiary Survey. How are you today? I am calling because you are a [recent/current] participant in the Medicare Current Beneficiary Survey. We are contacting MCBS respondents to participate in a new short telephone survey called MCBS Pulse. This special opinion survey about your experiences with Medicare and the health care system. We sent you a letter in the mail about this survey. Do you recall receiving the letter? [IF YES, RECEIVED THE LETTER:] Great! As the letter mentioned, the survey will take about 20 minutes of your time and will be completed over the phone. Would you be available to do the interview now or can we schedule a time for me to call back and do it at your convenience? [IF NO, DID NOT RECEIVE THE LETTER:] The letter explained the importance of this survey to help Medicare understand how it can improve healthcare experiences for Medicare enrollees like you. The survey will take about 20 minutes of your time and will be completed over the phone. Would you be available to do the interview now or can we schedule a time for me to call back and do it at your convenience? This call may be recorded or monitored. INBOUND CALL Thank you for calling, this is [TI_NAME] for NORC at the University of Chicago with the MCBS Pulse Survey, how may I help you? This call may be recorded or monitored PARTIAL COMPLETE / CALLBACK Hello, my name is [TI_NAME] and I'm calling from NORC at the University of Chicago on behalf of the Medicare Current Beneficiary Survey. I am calling because you are a [recent/current] participant in the Medicare Current Beneficiary Survey. We are contacting MCBS respondents to participate in a new short telephone survey called MCBS Pulse. We previously spoke about sharing your your experiences with Medicare and the health care system. Are you available now to continue? This call may be recorded or monitored.	(01) CONTINUE WITHOUT RECORDING (02) CONTINUE WITH RECORDING (03) CONFIRM BUSINESS (04) OUT OF SCOPE (06) ANSWERING MACHINE (07) R WILL CALL 800 LINE/VERIFY WEBSITE (09) SUPERVISOR REVIEW (15) TEST SAMPLE (17) DROPPED CELL CALL (20) GOVERNMENT CELL CALL (21) DON'T WANT TO USE MINUTES TO DO SURVEY	(01) INTRO_2 (02) INTRO_2 (03) - (21) END	n/a	N/A - Operational

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	PROXYINT	Hello, my name is [TI NAME] from NORC [at the University of Chicago] and I am calling on behalf of the Medicare Current Beneficiary Survey regarding a study about ways Medicare can improve the services it provides to Medicare enrollees. I'd like to speak with [PROXY NAME]. Are they available? [IF AVAILABLE:] Recently, [SP] was sent a letter explaining that someone would contact them for an interview. [SP] indicated that they would not be able to participate but gave me your name as the person most knowledgeable about their healthcare. Because [SP] is irreplaceable in this study, if they are unable to complete the interview, we still want to allow them to have a role in improving Medicare. You can participate on behalf of [SP] and allow for [SP]'s health care experiences to help guide Medicare policies now and in the future. Would you be available to do the interview now or can we schedule a time for me to call back and do it at your convenience? This call may be recorded or monitored.	(01) CONTINUE WITHOUT RECORDING (02) CONTINUE WITH RECORDING (03) CONFIRM BUSINESS (04) OUT OF SCOPE (06) ANSWERING MACHINE (07) R WILL CALL 800 LINE/VERIFY WEBSITE (09) SUPERVISOR REVIEW (15) TEST SAMPLE (17) DROPPED CELL CALL (20) GOVERNMENT CELL CALL (21) DON'T WANT TO USE MINUTES TO DO SURVEY	(01) INTRO_2 (02) INTRO_2 (03) - (21) END	n/a	N/A - Operational
	INTRO_2	[As the letter mentioned/The letter explained that] we want to learn about your experience with Medicare. Whether you have Medicare yourself or you are helping someone you care for who has Medicare, your answers will help us understand how well Medicare works. When you share your thoughts with us, it helps us do a better job serving Medicare members and their families. Your privacy is important to us. Taking this survey is your choice. Your answers will be kept private to the extent permitted by law, as prescribed by the Privacy Act of 1974. The information you provide is combined with information provided by many others and only used to describe Medicare beneficiaries as a group. No information that could identify you individually is ever publicly released. Your Medicare benefits will not be affected in any way by your survey responses or participation. This survey takes about 20 minutes to finish. Some people may finish faster. Your answers will help make Medicare better. Do you agree to participate in this interview now or can we schedule a time for me to call back and do it at your convenience? [IF R INDICATES THEY WANT SOMEONE PRESENT OR NEED HELP ANSWERING QUESTIONS:] If you'd like, you can have a friend or family member present on the call during the interview to help you answer some questions. Or you can select someone to provide us with your information on your behalf if you don't think you will be able to complete the interview.	(01) CONTINUE INTERVIEW NOW (02) SCHEDULE INTERVIEW USING CASE MANAGEMENT SYSTEM (03) PROXY NEEDED (04) DO NOT CONTINUE INTERVIEW	(01) CELLSAFE (02) END & SCHEDULE (03) END & COLLECT NAME/CONTACT INFORMATION FOR ASSISTANT/PROXY (04) END & RECORD DISP	n/a	N/A - Operational

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	CELLSAFE	SHOW IF CELL PHONE If you are not in a place where you can safely talk on the phone and answer my questions, I could call you back at a later time.	(01) CONTINUE (02) R UNABLE TO CONTINUE (03) NOT A CELL PHONE	(01) SPPROXY (02) SAFECB (03) SPPROXY	n/a	N/A - Operational
	SAFECB	SHOW IF CELL PHONE For your safety, we will call you back at another time.	(01) NOT SAFE - SET GENERAL CALL BACK (02) R REQUESTS SPECIFIC CALL BACK TIME (03) CALL BACK AT ANOTHER NUMBER REQUESTED (04) WRONG TIME ZONE (05) Go Back to CELLSAFE	(01)-(04) END (05) CELLSAFE	n/a	N/A - Operational
	SPPROXY	WILL THIS INTERVIEW BE CONDUCTED WITH THE SAMPLE PERSON OR WITH A PROXY?	(01) SAMPLE PERSON (02) PROXY	(01) HEALTHINS (02) CAREGIVR	n/a	N/A - Operational
	CAREGIVR	Are you currently taking care of (SP) or helping (SP) make healthcare decisions?	(01) Yes (02) No (95) Don't know (97) Refuse	(01) HEALTHINS (02) END (95) END (97) END	n/a	N/A - Operational
	HEALTHINS	As you (may) know, Medicare beneficiaries can enroll in either Original Medicare or a Medicare Advantage plan, such as an HMO (Health Maintenance Organization) and PPO (Preferred Provider Organization). According to our records, [you are/(SP) is] currently enrolled in [Medicare/a Medicare Advantage Plan that might be called (CMS MEDICARE MANAGED CARE PLAN NAME)]. Has this information changed?	(01) YES, INFORMATION HAS CHANGED (02) NO, INFORMATION HAS NOT CHANGED (95) Don't know (97) Refuse	(01) WHYWRNG (02) USUAL (95) USUAL (97) USUAL	MCBS	N/A - Operational

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	WHYWRNG	How has this information changed? SELECT ONLY ONE. IF MORE THAN ONE RESPONSE IS APPLICABLE, SELECT THE RESPONSE THAT IS CLOSEST TO THE TOP OF THE LIST.	(01) ENROLLED IN DIFFERENT MEDICARE ADVANTAGE PLAN (02) DOESN'T THINK PLAN IS A MEDICARE ADVANTAGE PLAN (03) NO LONGER IN ANY MEDICARE ADVANTAGE PLAN (04) SP NEVER COVERED BY OR ENROLLED IN ANY MEDICARE ADVANTAGE PLAN (05) SP NO LONGER ENROLLED IN MA PLAN <u>OR</u> ORIGINAL MEDICARE (95) Don't know (97) Refuse	(01)-(04) USUAL (05) END (95) USUAL (97) USUAL	MCBS	N/A - Operational
	USUAL	Is there a particular doctor or other health professional, or a clinic [you/(SP)] usually [go/goes] to when [you are/(SP) is] sick or for advice about [your/(SP)'s] health?	(01) Yes (02) No (95) Don't know (97) Refuse	(01) PHYSINT (02) MEDINT (95) MEDINT (97) MEDINT	MCBS	N/A - Operational
Trust in physician	PHYSINT	The next questions are about how much you trust [your/(SP)'s] doctor or health professional. For each statement, please tell us how much you agree or disagree.	(01) CONTINUE	PHY_TR1	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	PHY_TR1	Sometimes [your/(SP)'s] doctor or health professional cares more about what is easy for them than about [your/(SP)'s] medical needs. Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	PHY_TR2	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	PHY_TR2	[Your/(SP)'s] doctor or health professional is thorough and careful. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	PHY_TR3	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator

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	PHY_TR3	You trust [your/(SP)'s] doctor or health professional to choose the best medical treatments for [you/(SP)]. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	PHY_TR4	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	PHY_TR4	[Your/(SP)'s] doctor or health professional is honest and tells you about all the different treatment options for [your/(SP)'s] condition. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	PHY_TR5	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	PHY_TR5	Overall, you trust [your/(SP)'s] doctor or health professional. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	MEDINT	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
Trust in medical profession	MEDINT	The next questions are about how much you trust doctors and healthcare workers in general. For each statement, please tell us how much you agree or disagree.	(01) CONTINUE	MED_TR1	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	MED_TR1	Sometimes doctors and health professionals care more about what is easy for them than about their patients' medical needs. Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	MED_TR2	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	MED_TR2	Doctors and health professionals are thorough and careful. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	MED_TR3	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator

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	MED_TR3	You trust doctors and health professionals to choose the best medical treatments. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	MED_TR4	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	MED_TR4	A doctor or health professional would never mislead you about anything. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	MED_TR5	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	MED_TR5	Overall, you trust doctors and health professionals. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	TRUSTINT	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
Trust in CMS	TRUSTINT	The next questions are about how much you trust [Medicare/[your/(SP)'s] Medicare Advantage insurance company].	(01) CONTINUE	CMS_TR1	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	CMS_TR1	[Medicare/[Your/(SP)'s] Medicare Advantage insurance company] cares more about saving money than about getting [you/(SP)] the treatment [you/they] need. Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	CMS_TR2	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	CMS_TR2	You feel like you need to double check everything [Medicare/[your/(SP)'s] Medicare Advantage insurance company] company does. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	CMS_TR3	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator

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	CMS_TR3	You believe [Medicare/[your/(SP)'s] Medicare Advantage insurance company] will pay for everything it is supposed to, even really expensive treatments. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	CMS_TR4	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	CMS_TR4	If you have a question, you believe [Medicare/[my/(SP)'s] Medicare Advantage insurance company] will give you a straight answer. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	CMS_TR5	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
	CMS_TR5	Overall, you trust [Medicare/[my/(SP)'s] Medicare Advantage insurance company]. [PROBE IF NECESSARY: Would you say you strongly agree, agree, are neutral, disagree, or strongly disagree?]	(01) Strongly agree (02) Agree (03) Neutral (04) Disagree (05) Strongly disagree (95) Don't know (97) Refuse	PREAUTHINT	https://pmc.ncbi.nlm.nih.gov/articles/PMC1262715/	Office of the Administrator
Experience with pre-authorization	PREAUTHINT	The next questions are about [your/(SP)'s] experiences with prior authorization. Prior authorization means that your healthcare provider requests approval from your insurer before you receive a treatment, service, or prescription medicine.	(01) CONTINUE	PREAUTH	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
	PREAUTH	In the past 12 months, did [your/(SP)'s] insurer require prior authorization before [you/(SP)] could get a treatment, service, or medicine that [your/(SP)'s] doctor recommended for [you/them]? [IF NEEDED: Sometimes your insurance company needs you or your doctor to share information about your medical care ahead of time to make sure a treatment, service, or medicine will be covered. This is referred to as "prior authorization"]	(01) Yes (02) No (95) Don't know (97) Refuse	(01) AUTHTYPE (02) EOB (95) EOB (97) EOB	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D

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	AUTHTYPE	Was this prior authorization for... [Select all that apply] A drug administered in a hospital, doctor's office, or clinic? A prescription drug from a pharmacy? A visit to a health care provider? A treatment, procedure, or surgery? Imaging services? Durable medical equipment? Medical transport? Dental services? Or some other treatment or service?	(01) A drug administered in a hospital, doctor's office, or clinic (02) A prescription drug from a pharmacy (03) A visit to a health care provider (04) A treatment, procedure, or surgery (05) Imaging services (06) Durable medical equipment (07) Medical transport (08) Dental services (09) Other (95) Don't know (97) Refuse	BOX PA1	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
	BOX PA1	IF AUTHTYPE=9/ OTHER, GO TO AUTHTYPEO ELSE GO TO BOX PA2.				N/A - Operational
	AUTHTYPEO	What was this other treatment or service?	Write-in response	BOX PA2	MCBS	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
	BOX PA2	IF AUTHTYPE=1/A DRUG ADMINISTERED IN A HOSPITAL, DOCTOR'S OFFICE, OR CLINIC, GO TO XXXXSKIP, ELSE GO TO BOX PA3.			Original	N/A - Operational
	XXXXSKIP	In the past 12 months, did [you/(SP)] go without any drug administered in a hospital, doctor's office, or clinic because of the prior authorization process?	(01) Yes (02) No (03) Still waiting on approval (95) Don't know (97) Refuse	XXXXDELY	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
	XXXXDELY	In the past 12 months, did the prior authorization delay [you/(SP)] getting any drug administered in a hospital, doctor's office, or clinic?	(01) Yes (02) No (95) Don't know (97) Refuse	XXXXPAY	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D

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	XXXXPAY	What was the outcome of [your/(SP)'s] prior authorization(s) for [SERVICE TYPE] in a hospital, doctor's office, or clinic in the past 12 months? Did [your/(SP)'s] insurer... ...Approve all prior authorizations for [SERVICE TYPE] ...Deny at least one prior authorization for for [SERVICE TYPE] ...or, [are you/is (SP)] still waiting to resolve at least one prior authorization for [SERVICE TYPE] IF SP RECEIVED RECEIVED A [SERVICE TYPE] THAN WHAT WAS REQUESTED, SELECT "Insurance DENIED at least one prior authorization for a drug administered in a hospital, doctor's office, or clinic" IF PRIOR AUTHORIZATION HAS NOT RESOLVED YET, SELECT "Waiting to resolve at least one prior authorization for [SERVICE TYPE]" IF SP WAS LATER REIMBURSED FOR A CLAIM, SELECT "Insurance APPROVED all prior authorizations for [SERVICE TYPE]"	(01) Insurance APPROVED all prior authorizations for a drug administered in a hospital, doctor's office, or clinic (02) Insurance DENIED at least one prior authorizations for a drug administered in a hospital, doctor's office, or clinic (03) SP still waiting to resolve at least one prior authorization for a drug administered in a hospital, doctor's office, or clinic (95) Don't know (97) Refuse	XXXXSUBST	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
	XXXXSUBST	In the past year, did the prior authorization process cause you to get a different [SERVICE TYPE] from what your doctor originally recommended?	(01) Yes (02) No (95) Don't know (97) Refuse	If other [SERVICE TYPE] are selected, go to XXXXSKIP. Otherwise, go to EOB	Original	Office of the Administrator, Center for Medicaid & Medicaid Innovation, Center for Medicare Parts C & D
Beneficiary health literacy	EOB	The next questions have to do with [your/(SP)'s] health insurance statements. These statements are sometimes called "Explanation of Benefits" or "Medicare Summary Notices". Not including the time spent reviewing statements as part of [your/(SP)'s] participation in the MCBS, how often do you look at [your/(SP)'s] health insurance statements? Would you say always, often, sometimes, rarely, or never?	(01) Always (02) Often (03) Sometimes (04) Rarely (05) Never (95) Don't know (97) Refuse	(01) EOBEASY (02) EOBEASY (03) EOBEASY (04) EOBEASY (05) APPEAL (95) APPEAL (97) APPEAL	Original	CMS Health IT Ecosystem Team
	EOBEASY	How easy or difficult is it for you to understand these health insurance statements? Would you say it's very easy, easy, neither easy nor difficult, difficult, or very difficult?	(01) Very easy (02) Easy (03) Neither easy nor difficult (04) Difficult (05) Very difficult (95) Don't know (97) Refuse	(01) EOBSERV (02) EOBSERV (03) EOBSERV (04) EOBSERV (05) EOBSERV (95) APPEAL (97) APPEAL	https://files.kff.org/attachment/Topline-Survey-of-Consumer-Experiences-with-Health-Insurance.pdf	CMS Health IT Ecosystem Team

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	EOBSERV	In the past 12 months, did you notice any medical services listed on [your/(SP)'s] insurance statements that [you/(SP)] did not receive?	(01) Yes (02) No (95) Don't know (97) Refuse	PORTPROV	Original	Center for Program Integrity
Electronic medical records	PORTPROV	Have [your/(SP)'s] healthcare providers ever offered [you/(SP)] a way to see [your/their] medical records online, like through a patient portal? [IF NEEDED: This includes any doctor, dentist, eye doctor, lab, hospital, or other healthcare provider [you have/(SP) has] visited.]	(01) Yes (02) No (95) Don't know (97) Refuse	PORTINS	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	PORTINS	Have [your/(SP)'s] insurers ever offered [you/(SP)] a way to see [your/their] medical records online, like through a patient portal? [IF NEEDED: This includes Medicare, Medicare Advantage plans, Medigap plans, dental and vision insurance, or any other health insurance [you have/(SP) has].]	(01) Yes (02) No (95) Don't know (97) Refuse	BOX EHR1	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	BOX EHR1	If PORTPROV = 1 or PORTINS = 1 then GO TO PORTUSE, else GO TO PRIV				N/A - Operational
	PORTUSE	In the past 12 months, how many times did you use [your/(SP)'s] online medical records or patient portal?	(01) 0 times (02) 1 to 2 times (03) 3 to 5 times (04) 6 to 9 times (05) 10 or more times (95) Don't know (97) Refuse	(01) PRIV (02) PORTEASY (03) PORTEASY (04) PORTEASY (05) PORTEASY (95) PRIV (97) PRIV	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	PORTEASY	How easy or difficult was it to understand the health information in [your/(SP)'s] online medical records or patient portal? Would you say it was very easy, easy, neither easy nor difficult, difficult, or very difficult?	(01) Very easy (02) Easy (03) Neither easy nor difficult (04) Difficult (05) Very difficult (95) Don't know (97) Refuse	PRIV	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team

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	PRIV	When you think about [your/(SP)'s] electronic medical records and personal health information, how concerned are you that someone who shouldn't have access might see [your/(SP)'s] private records and information? Would you say you're very concerned, somewhat concerned, not too concerned, or not at all concerned?	(01) Very concerned (02) Somewhat concerned (03) Not too concerned (04) Not at all concerned (95) Don't know (97) Prefer not to answer	TECHINT	https://files.kff.org/attachment/Topline-KFF-Health-Tracking-Poll-January-2019	CMS Health IT Ecosystem Team
Use of wearable technology	TECHINT	The next questions are about technology and [your/(SP)'s] health.	(01) CONTINUE	TECHWEAR	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	TECHWEAR	In the past 12 months, [have you/has (SP)] used an electronic wearable device to monitor or track your health or activity? For example, a Fitbit, Apple Watch, or a pedometer? INCLUDE BOTH SMART AND NON-SMART WEARABLE DEVICES (SUCH AS A BASIC PEDOMETER).	(01) Yes (02) No (95) Don't know (97) Refuse	SHAREPROV	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	SHAREPROV	Would you be willing to share health data from [your/SP's] wearable device with... [your/their] health care provider?	(01) Yes (02) No (95) Don't know (97) Refuse	SHAREINS	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	SHAREINS	Would you be willing to share health data from [your/SP's] wearable device with... [your/their] insurance providers?	(01) Yes (02) No (95) Don't know (97) Refuse	SHAREFAM	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
	SHAREFAM	Would you be willing to share health data from [your/SP's] wearable device with... [your/their] family, friends, or caregiver?	(01) Yes (02) No (95) Don't know (97) Refuse	AIPROV	https://hints.cancer.gov/docs/Instruments/HINTS6-AnnotatedEnglishInstrument.pdf	CMS Health IT Ecosystem Team
Artificial Intelligence	AIPROV	The next question is about artificial intelligence, or AI, being used in healthcare. How would you feel if [your/(SP)'s] health care provider relied on AI to do things like diagnose disease and recommend treatments for [your/(SP)'s] medical care? Would you feel very comfortable, somewhat comfortable, somewhat uncomfortable, or very uncomfortable?	(01) Very comfortable (02) Somewhat comfortable (03) Somewhat uncomfortable (04) Very uncomfortable (95) Don't know (97) Refuse	TOOLSINT	https://www.pewresearch.org/wp-content/uploads/sites/20/2023/02/PS_20_23.02.22_AI-health_TOPLINE.pdf	CMS Health IT Ecosystem Team
Tools offered by Medicare	TOOLSINT	The next few questions are about healthcare management tools. How interested would you be in the following tools if Medicare offered them?	(01) CONTINUE	IDEA1	Original	CMS Health IT Ecosystem Team

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	IDEA1	A secure digital health record system that allows [you/(SP)] to access all [your/their] medical information from doctors, hospitals, and insurance companies in one place. Would you be extremely interested, very interested, somewhat interested, a little interested, or not at all interested?	(01) Extremely interested (02) Very interested (03) Somewhat interested (04) A little interested (05) Not at all interested (95) Don't know (97) Refuse	IDEA1B	Original	CMS Health IT Ecosystem Team, Office of Communications
	IDEA1B	A digital Medicare ID card on [your/(SP)'s] phone that works for check-ins at the doctor's office, shows [your/(SP)'s] benefits, and lets [you/(SP)] share [your/their] health information with doctors. Would you be extremely interested, very interested, somewhat interested, a little interested, or not at all interested?	(01) Extremely interested (02) Very interested (03) Somewhat interested (04) A little interested (05) Not at all interested (95) Don't know (97) Refuse	MAHAINT	Original	CMS Health IT Ecosystem Team, Office of Communications
MAHA	MAHAINT	The next questions are about "Make America Healthy Again," or MAHA.	(01) CONTINUE	MAHAHRD	n/a	N/A - Operational
	MAHAHRD	Have you heard about the term <i>Make America Healthy Again (MAHA)</i> ?	(01) Yes (02) No (95) Don't know (97) Refuse	(01) MAHAKNOW (02) END (95) END (97) END	https://ygo-assets-websites-editorial-emea.yougov.net/documents/Health_and_Nutrition_Policy_poll_results_1.pdf	Office of the Administrator (Dr. Oz), Office of Program Operations & Local Engagement (OPOLE)
	MAHAKNOW	How much do you know about <i>Make America Healthy Again</i> ? Would you say you know a great deal, quite a bit, a little, or nothing?	(01) A great deal (02) Quite a bit (03) A little (04) Nothing (95) Don't know (97) Refuse	(01) MAHAOPN (02) MAHAOPN (03) MAHAOPN (04) END (95) END (97) END	https://ygo-assets-websites-editorial-emea.yougov.net/documents/Health_and_Nutrition_Policy_poll_results_1.pdf	Office of the Administrator (Dr. Oz), Office of Program Operations & Local Engagement (OPOLE)
	MAHAOPN	Do you have a favorable or an unfavorable opinion of <i>Make America Healthy Again</i> ? Would you say your opinion is very favorable, somewhat favorable, neutral, somewhat unfavorable, or very unfavorable?	(01) Very favorable (02) Somewhat favorable (03) Neutral (04) Somewhat unfavorable (05) Very unfavorable (95) Don't know (97) Refuse	END	https://ygo-assets-websites-editorial-emea.yougov.net/documents/Health_and_Nutrition_Policy_poll_results_1.pdf	Office of the Administrator (Dr. Oz), Office of Program Operations & Local Engagement (OPOLE)

Section name	Item name	Question Text	Code Frame	Question Routing	Question Source Link	Requestor
	END	I would like to thank you for your time and cooperation during this interview. You have made a very important contribution to the Medicare program and all of its beneficiaries by sharing [your/(SP's)] experiences and opinions.	(01) CONTINUE	END SURVEY	MCBS	N/A - Operational