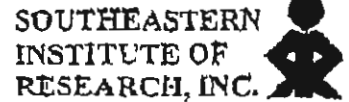


2001 VA Health Access Survey

SIR # 5847 (RGS)



Sample Goals:

- North (400)
- Central (400)
- Eastern (400)
- Northwest (400)
- Southwest (400)

**VIRGINIANS' ACCESS TO HEALTH INSURANCE AND HEALTH CARE SERVICES**

Questionnaire # \_\_\_\_\_  
( . )

Start time: \_\_\_\_\_

Hello. This is (Your Name) from Southeastern Institute of Research, a national marketing research company. We are conducting a survey for The Virginia Health Care Foundation, a private, non-profit organization dedicated to improving Virginians' access to primary and preventive health care.

1. Are you the male/female head of your household?

- (Go to Q. 3) ← Yes 01
- No 02
- (Go to Q. 2) ← DK 03

2. May I please speak with the male or female head of your household?

- (Repeat Intro) ← Yes, you may 01
- (Schedule CB: \_\_\_\_\_) ← No, not here 02
- (Terminate Q. 2) ← No/Refused 03

3. Our study is about concerns of The Health Care Foundation such as health care coverage, views on health care reform, problems with accessing health care and employment experiences that may affect your household's ability to get the health care it needs – and since each individual's needs can be different, I will be repeating questions for each member of your household.

Counting yourself, how many people live in your house or apartment?

0 1 2 3 4 5 6 7 8 9 10 11 12+

(Terminate Q. 3) ← DK/Refused

4. And, what are their first names -- along with yours, age, gender and race, so that we can talk about each separately. Starting with the oldest and finishing with the youngest, what is the first one's name, age, gender and race?

| <u>Name</u> | <u>Age</u> | <u>Gender</u> | <u>Race</u> |     |
|-------------|------------|---------------|-------------|-----|
| Oldest      | _____      | M F           | _____       | 1   |
| _____       | _____      | M F           | _____       | 2   |
| _____       | _____      | M F           | _____       | 3   |
| _____       | _____      | M F           | _____       | 4   |
| _____       | _____      | M F           | _____       | 5   |
| _____       | _____      | M F           | _____       | 6   |
| _____       | _____      | M F           | _____       | 7   |
| _____       | _____      | M F           | _____       | 8   |
| _____       | _____      | M F           | _____       | 9   |
| _____       | _____      | M F           | _____       | 10  |
| _____       | _____      | M F           | _____       | 11  |
| Youngest    | _____      | M F           | _____       | 12+ |
| _____       | _____      | M F           | _____       |     |
| _____       | _____      | M F           | _____       |     |
| _____       | _____      | M F           | _____       |     |
| _____       | _____      | M F           | _____       |     |
| _____       | _____      | M F           | _____       |     |

5. Are all of the individuals currently living in your household related or are some of them unrelated?

- (Go to Q. 7) ← All are related 01  
 Some are unrelated 02  
 DK/Refused 03

6. How many are unrelated?

0 1 2 3 4 5 6 7 8 9 10+

7. Are there other members of your household who usually live there, but are currently away at school, in a hospital or traveling but will be returning in the near future?

- (Go to Q.8) ← Yes 01  
 No 02  
 (Go to Q.9) ← DK 88

7a. How many members of your household are usually home, but are currently away?

- One 01  
 Two 02  
 DK/Refused 88  
 (Go to Q.9) ← No Answer 99

8. And what are their names, ages, gender, and race?

| Name  | Age   | Gender | Race  |
|-------|-------|--------|-------|
| _____ | _____ | M F    | _____ |
| _____ | _____ | M F    | _____ |
| _____ | _____ | M F    | _____ |

9. (RE-READ LIST OF NAMES GIVEN IN Q.'S 4 & 8 AND ASK:) Is there anyone I have missed?

- (Go to Q. 9a) ← Yes 01  
 (Go to Q. 11) ← No/DK 02

9a. How many members of your household have I missed?

- One 01  
 Two 02  
 Three 03  
 DK 88  
 (Go to Q. 10) ← No Answer 99

9b. Who by first name, gender and race have I missed?

| Name  | Age   | Gender | Race  |
|-------|-------|--------|-------|
| _____ | _____ | M F    | _____ |
| _____ | _____ | M F    | _____ |
| _____ | _____ | M F    | _____ |

10. How do you/and your family usually pay for health care?

- Private health insurance 01  
 Public health programs (i e. public health clinics/Medicaid) 02  
 Out-of-pocket/cash 03

Other (specify)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 DK 88  
 No Answer 99

11. Now we have some questions about (Name's/your) access to health care.

Is there a particular clinic, hospital, doctor's office or other place that (Name/you) usually (goes/go) to for health care?

- (Go to Q. 12) ← Yes 01  
 (Go to Q. 13) ← No 02  
 (Go to Q. 13a) ← Not applicable, never gone for health care 03  
 (Go to Q. 16) ← DK 88  
 (Go to Q. 16) ← No Answer 99

12. What kind of place (does/do) (she/he/you) go to for health care? (DO NOT READ LIST - PROBE FOR WHICH TYPE - CODE INTO ONE OF THE FOLLOWING)

- Private Doctor's office (solo or group practice) or private clinic that is not part of a hospital 01
- Franchised private clinic (e.g. Medfirst, Urgent Care) 02
- PUBLIC clinic that is part of a university hospital like MCV or UVA (like A.D. Williams Clinic) 03
- PRIVATE clinic that is part of a university hospital like MCV or UVA (like Nelson Clinic) 04
- City or county public health clinic 05
- Free or other non-profit clinic like Planned Parenthood, Fan Free Clinic, Crossover Health Clinic 06
- Veterans' Administration Hospital (like McGuire Hospital) 07
- Army or Navy hospital (like Fort Lee or Fort Belvoir) 10
- University hospital EMERGENCY ROOM like MCV or UVA 11
- Private hospital EMERGENCY ROOM (like St. Mary's or Henrico Doctors) 12
- Home visit by health care provider 13
- Somewhere else (specify)  [specify]
- DK 88
- No Answer 99

(Go to Q. 14)

13. Many people do not have a place to get regular health care. What would you say is the primary reason (she/he/you) (does/do) not have a place to go for health care? (DO NOT READ RESPONSES)

- Hasn't been able to find a health care provider 01
- Previous health care provider no longer available 02
- Goes to a number of different health care providers depending on what's wrong 03
- Recently moved to the area 04
- No health insurance 05
- Can't afford health care 06
- Religious reasons 07
- Doesn't need/hasn't been sick/no reason to seek health care 10
- Too busy/not enough time 11
- Doesn't like doctors 12
- Something else (specify) \_\_\_\_\_ [specify]
- DK 88
- No Answer 99

(Go to Q. 16)

13a. Why (does/do) (she/he/you) not get health care?

- Doesn't like doctors 01
- Afraid of being nagged about health behaviors (smoking, drinking, etc.) 02
- Costs too much 03
- No health insurance 04
- Hasn't been sick/no reason to seek health care 05
- Something else (specify) \_\_\_\_\_ [specify]
- DK 88
- No Answer 99

(Go to Q. 19)

14. (Does/Do) (she/he/you) usually see the same person when (she/he/you) (goes/go) to this place (home/this/your routine health care place)?

- Yes 01
- No 02
- DK 88
- No Answer 99

15. Overall, how would you rate the quality of care (she/he/you) receive (fill s) from (her/his/your) regular health care provider? (READ RESPONSES)

- Excellent 01
- Very Good 02
- Good 03
- Fair 04
- Poor 05
- DK 88
- No Answer 99

16. Within the last 12 months, how many times (has/have) (she/he/you) visited any clinic, hospital, doctor's office, or other place to receive health care?

(Go to Q. 17)

- (Go to Q. 16a) ← DK 88
- (Go to Q. 16a) ← No Answer 99

16a. Would you be able to say if it was once a year or twice a year, or more likely three to six times, or seven or more?

- Once a year 01
- Twice a year 02
- Three to six times 03
- Seven or more 04
- Not gone in the last year 05
- DK 88
- No Answer 99

17. How long has it been since (her/his/your) last visit to a clinic, hospital, doctor's office or other place to receive health care? (READ ONLY IF NECESSARY)

- Within the last 3 months 01
- 3 to 6 months ago 02
- 6 months to 1 year ago 03
- 1 to 2 years ago 04
- 2 to 4 years ago 05
- 4+ years ago 06
- Never 07
- DK 88
- No Answer 99

18. Within the past year, was there a time when (she/he/you) needed health care, but (was/were) unable to get it?

- (Go to Q. 18a) ← Yes 01
- No 02
- DK 88
- (Go to Q. 19) ← Refused/No Answer 99

18a. What was the primary reason that (she/he/you) (was/were) unable to get health care when needed? (DO NOT READ RESPONSES)

- Transportation difficulties 01
- Could not afford it 02
- Didn't have time to see a doctor 03
- Didn't know where to go to get it 04
- Could not get an appointment when needed 05
- Couldn't get off work/school 06
- Something else (specify) \_\_\_\_\_
- DK 88
- Refused 99

19. Now we have some questions to ask about (name's/your) use of other health care providers. (Does/do) (she/he/you) regularly go to a dentist?

- (Go to Q. 20) ← Yes 01
- No 02
- DK 88
- (Go to Q. 22) ← No Answer 99

20. When was the last time (she/he/you) received dental care from a dentist or dental hygienist? (READ RESPONSES ONLY IF NECESSARY)

- (Go to Q. 21) ← Within the last 3 months 01
- 3 to 6 months ago 02
- 6 months to 1 year ago 03
- 1 to 2 years ago 04
- 2 to 4 years ago 05
- 4+ years ago 06
- Never 07
- DK 88
- (Go to Q. 21) ← No Answer 99

20a. What is the primary reason that (she/he/you) (does/do) not go to the dentist more frequently? (DO NOT READ RESPONSES)

- Feel no need to go 01
- Afraid of the dentist 02
- Very difficult to get an appointment 03
- Don't have time 04
- Costs too much 05
- Can't get off work/school 06
- Travel/transportation difficulties 07
- Have child care problems 08
- Too many other expenses 09
- Personality conflict with dentist or staff 10
- Too young - just a kid 11
- Only go when sick or have a problem ~ have not needed to 12
- Other (specify) \_\_\_\_\_
- DK 88
- No Answer 99

(Go to Q. 22)

21. People go to the dentist for many reasons, what was the main reason for (her/his/your) last visit with a dentist? (DON'T READ - CODE INTO APPROPRIATE CATEGORY)

- Emergency 01
- Periodic check-up 02
- Filling 03
- Teeth cleaning 04
- Extraction 05
- Orthodontics 06
- Gum treatment 07
- Denture work 08
- Crowns/bridges 09
- Implants 10
- Other (specify) \_\_\_\_\_
- DK 88
- No Answer 99

22. Within the past year, was there a time when (you/he/she) needed dental care but were unable to get it?

- (Go to Q. 23) ← Yes 01
- No 02
- DK 88
- (Go to Q. 24) ← Refused/No Answer 99

23. What was the primary reason that (you/he/she) were unable to get dental care when you needed it?

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\*\*\* REPEAT Q'S 11 - 23 FOR EACH PERSON IN THE HOUSEHOLD \*\*\*

24. How do you (/and your family) usually pay for dental care?

- Private dental insurance 01
- Public dental programs (i.e. public health clinics/Medicaid) 02
- Out-of-pocket/cash 03
- (Go to Q. 28) ← Don't use dental care 04
- DK 88
- (Go to Q. 27) ← No Answer 99

25-26. How else do you (/and your family) pay for dental care? (DO NOT READ RESPONSES YOU MAY CODE UP TO 3 RESPONSES)

- Private dental insurance 01
- Public dental programs (i.e. public health clinics/Medicaid) 02
- Out-of-pocket/cash 03
- (Go to Q. 28) ← Don't use dental care 04
- DK 88
- (Go to Q. 27) ← No Answer 99

27. Approximately how much did you (and your family) spend on dental care last year, including any premiums you paid for dental insurance? Was it: (READ RESPONSES)

- Nothing 01
- Less than \$100 02
- \$100 - \$200 03
- \$201 - \$300 04
- \$401 - \$500 05
- \$501 - \$1,000 06
- More than \$1,000 07
- DK 88
- No Answer 99

28. Now on a different topic. . . Please think about the hospital emergency department you would use if you or a family member needed emergency care. How many minutes would it take for you to get to this hospital emergency department?

- \_\_\_\_\_ (number of minutes)
- 87+ minutes 87
  - DK 88
  - Refused 99

29. During the past year, did you or anyone in your household have any of the following problems getting health care?

|  | Yes | No | DK | NA |
|--|-----|----|----|----|
| Could not get an appointment when needed               | 01  | 02 | 98 | 99 |
| The regular doctor's office was closed                 | 01  | 02 | 98 | 99 |
| Doctors in the area were not taking new patients       | 01  | 02 | 98 | 99 |
| There was no doctor in the area                        | 01  | 02 | 98 | 99 |
| Someone was turned away from the emergency room        | 01  | 02 | 98 | 99 |
| There was no transportation                            | 01  | 02 | 98 | 99 |
| Someone didn't know where to go to receive health care | 01  | 02 | 98 | 99 |
| Office hours were not convenient                       | 01  | 02 | 98 | 99 |

30. Within the last year, have you (or someone else in your family) had to make special arrangements to pay for health care because you could not afford it out of pocket?

- (Go to Q. 30a) ← Yes 01
  - No 02
  - DK 88
  - No Answer 99
- (Go to Q. 31)

30a. What arrangements did you make? (DO NOT READ)

- Worked out a payment plan 01
- Bills were reduced or forgiven 02
- Re-mortgaged home 03
- Didn't pay 04
- Other (specify) \_\_\_\_\_
- DK 88
- No Answer 99

31. At any time during the past twelve months, did you (or any member of your family that lives in your household) get a prescription, but then, did NOT get it filled because it would cost too much?

- Yes 01
- No 02
- DK 88
- No Answer 99

32. At any time during the past twelve months, did (you/anyone in your household) take a smaller than prescribed dosage because of the cost of the medication?

- Yes 01
- No 02
- DK 88
- No Answer 99

33. These next questions are about government health insurance programs. Medicare is a Social Security insurance program for the disabled and elderly. (Are you/Is anyone in your family living in this household) covered by the part of Medicare that pays for hospital bills?

(Go to Q. 33a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

33a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

34. (Are you/Is anyone in your family living in this household) covered by part B of Medicare, which pays for doctor's bills? This is the part of Medicare for which someone must pay a certain amount each month.

(Go to Q. 34a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

34a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

35. (Are you/Is anyone in your family living in this household) covered by a Medicare supplement insurance policy from a private insurance company?

(Go to Q. 35a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

35a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

36. (Are you/Is anyone in your family living in this household) covered by CHAMPUS, which covers both active duty and retired career military personnel; or by CHAMP-VA, which covers disabled veterans?

(Go to Q. 36a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

36a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

37. (Are you/Is anyone in your family living in this household) covered by MEDICAID, which pays for medical care for persons in financial need?

(Go to Q. 37a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

37a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

38. Are you/Is anyone in your household covered by the Children's Medical Security Insurance Program or CMSIP?

(Go to Q. 38a) ← Yes 01  
 No 02  
 DK 88  
 No Answer 99

38a. Who?

1 2 3 4 5 6 7 8 9 10 11 12+  
 Everyone 97

39. (Are you/Is anyone in your family living in this household) now covered by any kind of private or group health insurance?

(IF NEEDED: Besides government programs such as Medicaid and Champus, people also get health insurance through their jobs or union, through other private groups, or directly from an insurance company. A variety of types of plans are available, including health maintenance organizations (HMOs).)

- (Go to Q. 39a) ← Yes 01
- No 02
- (Go to Q. 44) DK 88
- No Answer 99

39a. Who is covered by this type of insurance?

- 1 2 3 4 5 6 7 8 9 10 11 12+
- Everyone 97

40. (REPEAT Q. 41-44 FOR ALL NAMES IN Q. 39a) Is this policy through a current employer or union, through COBRA, through a retirement plan, or was it purchased directly from an insurance company or HMO?

PROBES: COBRA provides continuation of benefits for former employees or their dependents for some period of time, usually 18 or 36 months, after termination of employment.

- Current employer or union 01
- COBRA 02
- Retirement plan 03
- Directly purchased from insurance company or HMO 04
- DK 88
- Refused 99

41. Who is the insurance carrier for this plan?

- Trigon/Blue Cross/Blue Shield 01
- Blue Cross/Blue Shield of the National Capital Area (Capital Care) 02
- Sentara 03
- Cigna 04
- NYLCARE (formerly HealthPlus) 05
- Prudential 06
- Aetna 07
- Travelers 10
- Metropolitan 11
- QualChoice 12
- Optimum Choice 13
- MD IPA 14
- U.S. HealthCare 15
- Kaiser Permanente 16
- Southern Health 17
- Chartered 18
- Golden Rule 19

Other (specify)

- \_\_\_\_\_ [specify]
- DK 88
- Refused 99

42. Does the policy holder's employer make a contribution toward the monthly payment?

- Yes 01
- No 02
- DK 88
- No Answer 99

43. What type of service or care does the plan pay for?

- Comprehensive care (pays for physician visits, hospitalization, and prescription drugs) 01
- Catastrophic care only 02
- Dental care only 03
- AIDS care only 04
- Cancer treatment only 05
- Hospitalization only 06
- Long term care only (nursing home care) 07
- Disability insurance (cash payments when unable to work for health reasons) 10
- Other (specify) \_\_\_\_\_ [specify]
- DK 88
- NA/Ref 99



44. Some people change health insurance policies. During the past 12 months, were (you/any of your family members) covered by any other health insurance plans besides the ones that you just told me about?

- (Go to Q. 44a) ← Yes 01
  - No 02
  - DK 88
  - No Answer 99
- (Go to Q. 45)

44a. Who was covered by another health plan?

- 1 2 3 4 5 6 7 8 9 10 11 12+
- Everyone 97

45. According to my information, (Name/you) (Is/are) not currently covered by any government or private health insurance that covers medical care. Is that correct?

- (Go to Q. 45a-47) ← Yes 01
  - No 02
  - DK 88
  - No Answer 99
- (Go to Q. 50)

45a. Are you currently a resident in Fairfax County?

- Yes 01
  - No 02
  - DK 88
  - No Answer 99
- (Go to Q. 47)

45b. Is your child uninsured?

- Yes 01
  - No 02
  - DK 88
  - No Answer 99
- (Go to Q. 50)

46. (RESIDENTS OF FAIRFAX COUNTY WITH UNINSURED CHILDREN, ASK:) Is your child enrolled in the Medical Care for Children Partnership?

- (Go to Q. 47) ← Yes 01
- (Go to Q. 46a) ← No 02
- (Go to Q. 47) ← DK 88
- (Go to Q. 47) ← No Answer 99

46a. Why not?

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47. What would you say is the main reason why (Name/you) (does/do) not have health insurance?

- Never thought about getting health insurance 01
- Decided not to get it because healthy, little sickness, don't need 02
- Decided not to get it because don't believe in it 03
- Decided not to get it because can't afford it 04
- Decided not to get it because dissatisfied with previous insurance 05
- Employer does not offer health insurance 06
- Tried to get but rejected because unemployed 07
- Tried to get but rejected because poor health, current illness 10
- Tried to get but rejected because of age 11
- Other (specify) [specify]
- (Go to Q. 54) ← Have full insurance 77
- DK 88
- Refused 99

48. How long (has/have) (she/he/you) been uninsured?

- Less than 1 year 01
  - (# of years) 02
  - Never been insured 77
  - DK 88
  - Refused 99
- (Go to Q. 54)

49. How much could you afford to pay each month for health care insurance?

\_\_\_\_\_

50. At any time during the last 12 months (was/were) (she/he/you) covered by Medicaid or any other public or private type of insurance?

- (Go to Q. 51) ← Yes 01
- No 02
- (Go to Q. 54) DK 88
- No Answer 99

51. What type of health insurance coverage did (she/he/you) have?

- Medicaid 01
- Medicare 02
- Champus, Champ-VA or other military coverage 03
- School/Student insurance 04
- Other (private coverage) 05
- (Go to Q. 54) None - did not really have any 06
- DK 88
- No Answer 99

52. For how many of the past 12 months (was/were) (she/he/you) covered by this plan?

- \_\_\_\_\_ (# of months) □
- DK 88
- No Answer 99

53. What was the main reason (she/he/you) lost coverage?

- Lost job 01
- Left/quit job 02
- Spouse died 03
- Was divorced 04
- Retired 05
- No longer eligible for parent's policy coverage 06
- Insurance canceled 07
- No long affordable 10
- Employer stopped offering it 11
- DK 88
- Refused 99

54. Now we'd like to get your views on some possible changes in the health care system. As you may know, the state of Virginia is looking at making some changes in the system.

First of all, how satisfied are you that (your/you and your family's) health care needs are being met... would you say you are: very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?

- (Go to Q. 55) Very satisfied 01
- Somewhat satisfied 02
- Not very satisfied 03
- Not at all satisfied 04
- (Go to Q. 54a) DK 88
- No Answer 99

54a. What is your main reason for being less than satisfied with the way your health care needs are being met?

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

55. And how satisfied are you with how well the health care system here in Virginia is meeting the needs of all the citizens of Virginia.. are you: very satisfied, somewhat satisfied, not too satisfied, or not at all satisfied?

- Very satisfied 01
- Somewhat satisfied 02
- Not very satisfied 03
- Not at all satisfied 04
- DK 88
- No Answer 99

56. Do you worry a great deal, a lot, not much, or not at all that you will lose your health insurance coverage in the next two years?

- A great deal 01
- A lot 02
- Not much 03
- Not at all 04
- Don't have coverage 05
- DK 88
- No answer 99

57. Has concern about losing your health insurance ever kept you (or your spouse) from taking or looking for another job?

- Yes, self 01
- Yes, spouse 02
- Yes, both 03
- No 04
- DK 88
- No answer 99

58. Overall, how do you feel about your present health insurance plan and the benefits it provides? Would you say you are.

- Very satisfied 01
- Somewhat satisfied 02
- Somewhat dissatisfied 03
- Very dissatisfied 04
- DK 88
- No answer 99

**TO BE ASKED OF ALL ADULT (21+) HOUSEHOLD MEMBERS**

59. What is the highest grade of school or year of college (Name/you) completed?

- Less than high school graduate 01
- High school graduate 02
- Some college 03
- College graduate 04
- Some graduate school 05
- Graduate or professional degree 06
- DK 88
- No answer 99

60. (Is/Are) (she/he/you) on active duty in the military at this time?

- Yes 01
- No 02
- DK 88
- No Answer 99

61.. (Is/Are) (She/he/you) currently employed full time

- Yes 01
- No 02
- DK 88
- No Answer 99

61a. (IF NO: (Is/Are) (She/he/you) employed part-time, laid off, retired, going to school, keeping house, or what?)

- Full-time employed 01
- (Go to Q. 62) Part-time employed 02
- With a job but temporarily out 03
- Unemployed, laid off, looking for work 04
- Retired 05
- (Go to Q. 72) In school 06
- Keeping house 07
- (Other) 08
- DK/Refused 99

62. (Does/Do) (she/he/you) get paid an hourly rate or (is/are) (she/he/you) on a salary?

- Wage 01
- Salary 02
- DK 88
- Refused 99

63. What kind of business or industry (does/do) (she/he/you) work for?

PROBE: What was the main product or service produced by the branch or part of the company (she/he/you) work (fill s) for?

INSTRUCTIONS: If this person worked for two or more employers last week, enter the one for whom he or she worked the most during the past week.

- Agriculture, forestry and fishing 01
- Mining 02
- Construction 03
- Manufacturing 04
- Transportation, communications, and other public utilities 05
- Wholesale and retail trade 06
- Finance, insurance and real estate 07
- Services (non-professional) 10
- Professional and related services 11
- Public administration 12
- Other (specify) \_\_\_\_\_ [specify]
- DK 88
- No answer 99

64. Is this a seasonal job?

PROBE: Is this a job that only gets filled during certain parts of the year?

- Yes 01
- No 02
- DK 88
- No Answer 99

65. On this job, (is/are) (she/he/you) employed by a private company, federal, state, or local government, self-employed, or working without pay in a family business or farm?

- Private company/Not-for-profit/foundation 01
- Federal Government 02
- State Government 03
- Local Government 04
- Self employed 05
- Working without pay in family business 06
- DK 88
- No answer/refused 99

66. Thinking about the location where (she/he/you) work (fill s), about how many people are employe there?

PROBE: How many people work for (her/his/your) employer in the building or buildings in the factory, store, or office complex where (she/he/you) work (fill s)?

- Fewer than 5 01
- 5 to 9 02
- 10 to 24 03
- 25 to 49 04
- 50 to 99 05
- 100 to 249 06
- 250 to 400 07
- 500 to 999 11
- 1000 or more 12
- DK 88
- Refused 99

67. Does (her/his/your) employer operate in more than this one location?

- (Go to Q. 69) ← Yes 01
- No 02
- DK 88
- (Go to Q. 69) ↗ No Answer 99

68. About how many people are employed by (her/his/your) employer at all locations?

- Fewer than 5 01
- 5 to 9 02
- 10 to 24 03
- 25 to 49 04
- 50 to 99 05
- 100 to 249 06
- 250 to 400 07
- 500 to 999 11
- 1000 or more 12
- DK 88
- Refused 99

69. Is (her/his/your) insurance coverage provided through this employer?

- (Go to Q. 70a) ← Yes 01
- No 02
- DK 88

(Go to Q. 70) ← No Answer 99

70. Does (her/his/your) employer or union offer a health insurance plan to any of its employees?

- (Go to Q. 70a) ← Yes 01
- No 02
- DK 88

(Go to Q. 75) ← No Answer 99

70a. How many health insurance plans are offered?

- \_\_\_\_\_ (Enter #) 01
- Seven or more 02
- DK 88
- No Answer 99

**IF EMPLOYER OFFERS INSURANCE, BUT PERSON DOESN'T HAVE INSURANCE OR HAS IT NOT THROUGH THE EMPLOYER, ASK: (71) OTHERWISE GO TO Q. 73)**

71. Why (is/are) (she/he/you) not covered by the employer's health insurance plan?

- Ineligible, has not worked long enough 01
- Ineligible, not enough hours per week 02
- Ineligible, medical problems 03
- Have insurance through spouse's employer 04
- Have other health insurance 05
- Would have to pay too much/costs too much 06
- Don't need health insurance 07
- Other (specify) \_\_\_\_\_ [specify]
- DK 88
- Refused 99

**(REPEAT Q'S 60 - 71 FOR ALL PERSONS 21+ YEARS OLD)**

72. What is your marital status? Are you:

- Married 01
- Widowed 02
- Divorced 03
- Separated 04
- or, Single 05
- (DK) 88
- (Refused) 99

73. (MULTI PERSON HOUSEHOLDS) Which of these income groups represent your total income for the past 12 months? Include all income, such as wages, salaries, social security or retirement, welfare, help from relatives, rent from property, etc. Is it:

(ONE PERSON HOUSEHOLDS) Which of these income groups represent your total income for the past 12 months? Include all income, such as wages, salaries, social security or retirement, welfare, help from relatives, rent from property, etc. Is it:

- Less than \$7,500 01
- \$7,500 to 10,000 02
- \$10,000 to 14,900 03
- \$14,900 to 20,000 04
- \$20,000 to 30,000 05
- \$30,000 to 50,000 06
- \$50,000 or more 07
- DK 88
- Refused 99

74. In what independent city or county do you live?

\_\_\_\_\_ (city or county)   
 DK 88  
 Refused 99

75. At any time during the past 12 months has your household not had a telephone?

(Go to Q. 75a) ← Yes, at some time had no phone 01

No, had phone continuously 02  
 DK 88

(Go to Q. 77) \_\_\_\_\_ No Answer 99

75a. For how many months did you not have telephone service?

\_\_\_\_\_ (# of months) 01  
 DK 88  
 No Answer 99

76. What was the main reason you didn't have telephone service?

- Cost, could not afford it 01
- Moved (cost not mentioned) 02
- Personal preference, didn't want one 03
- Service not available 04
- DK 88
- No Answer 99

77. And how many different telephone numbers do you have in this household?

\_\_\_\_\_ (Enter #) 01  
 DK 88  
 No Answer 99

Interviewer \_\_\_\_\_ Male 01

Date: \_\_\_\_\_ Female 02

Time End: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Elapsed Time: \_\_\_\_\_

Length of interview: \_\_\_\_\_

Interviewer ID: \_\_\_\_\_

Area code: \_\_\_\_\_

Phone Number: \_\_\_\_\_