

IUQ010pre The next questions are about health insurance and your use of the health care system.

INTERVIEWER: HIT ENTER TO CONTINUE

IUQ010 During the last 12 months, how many months did you have health insurance?
IUQ010 FMT_NUMERIC.

(INTERVIEWER: IF NO INSURANCE DURING 12 PRECEDING MONTHS, ENTER "0".)

<0-12> MONTHS (If 0, skip to IUQ012. If 12, skip to IUQ020_R2. Otherwise, go to IUQ015.)

<d> DON'T KNOW (Skip to IUQ015)

<r> REFUSED (Skip to IUQ015)

IUQ012 If you wanted to, could you be covered by health insurance through a job or through a household family member's job? That is, do you or a household family member parent or spouse have an employer that offers health insurance?

IUQ012 FMT_IUQ012_.

<1> EMPLOYER (EITHER YOURS OR FAMILY MEMBER'S) OFFERS HEALTH INSURANCE **(SKIP TO IUQ014)**

<2> EMPLOYER (EITHER YOURS OR FAMILY MEMBER'S) **DOES NOT OFFER HEALTH INSURANCE (GO TO IUQ013)**

<d> DON'T KNOW **(GO TO IUQ013)**

<r> REFUSED **(GO TO IUQ013)**

IUQ013 Did you consider purchasing individual health insurance through the health care program, known as the "Affordable Care Act" or "Obamacare," that allows many individuals to purchase subsidized insurance through the Marketplace?

Would you say yes, but it was too expensive because you did not qualify for a subsidy, yes, but it was too expensive even with a subsidy, you were not eligible to purchase through the marketplace, or you did not consider purchasing coverage through the Marketplace?

IUQ013 FMT_IUQ013_.

(INTERVIEWER: HAND CARD)

<1> YES, BUT IT WAS TOO EXPENSIVE BECAUSE I DID NOT QUALIFY FOR A SUBSIDY **(SKIP TO IUQ100)**

<2> YES, BUT IT WAS TOO EXPENSIVE EVEN WITH A SUBSIDY **(SKIP TO IUQ100)**

<3> I WAS NOT ELIGIBLE TO PURCHASE THROUGH THE MARKETPLACE **(SKIP TO IUQ100)**

<4> I DID NOT CONSIDER PURCHASING COVERAGE THROUGH THE MARKETPLACE **(SKIP TO IUQ100)**

<d> DON'T KNOW (**SKIP TO IUQ100**)
 <r> REFUSED (**SKIP TO IUQ100**)

IUQ014 Why don't you have health insurance coverage from that employer? You are not eligible for the health insurance plan, it is too expensive and you cannot afford the premiums, or you do not think it is worth it?

IUQ014 FMT_IUQ014_.

<1> I AM NOT ELIGIBLE FOR THE HEALTH INSURANCE PLAN (**SKIP TO IUQ100**)
 <2> IT IS TOO EXPENSIVE – CANNOT AFFORD THE PREMIUMS (**SKIP TO IUQ100**)
 <3> I DO NOT THINK IT IS WORTH IT (**Skip to IUQ100**)
 <d> DON'T KNOW (**SKIP TO IUQ100**)
 <r> REFUSED (**SKIP TO IUQ100**)

IUQ015 Do you currently have health insurance?

IUQ015 FMT_YES_NO.

<1> YES (**GO TO IUQ020_R2**)
 <2> NO (**GO TO IUQ020_R2**)
 <d> DON'T KNOW (**SKIP TO IUQ100**)
 <r> REFUSED (**SKIP TO IUQ100**)

IUQ020_R2 What kinds of health insurance or health care coverage do you have now, or did you have during the last 12 months? In answering this question, please EXCLUDE plans that pay for only one type of service, such as nursing home care, accidents, family planning, or dental care, and plans that only provide extra cash when hospitalized.

(INTERVIEWER: HAND CARD. ENTER ALL THAT APPLY.)

<1> EMPLOYER OR UNION SPONSORED PLAN [**GOTO IUQ021**]
 <2> PRIVATE INDIVIDUALLY PURCHASED HEALTH PLAN [**GOTO IUQ025**]
 <3> MEDICARE, FOR PEOPLE 65 OR OLDER OR PEOPLE WITH CERTAIN DISABILITIES [**GOTO IUQ030**]
 <5> MEDICAID, MEDICAL ASSISTANCE, MA, BADGER CARE, BADGER CARE PLUS [**GOTO IUQ030**]
 <6> HIRSP: HEALTH INSURANCE RISK SHARING PLAN - WISCONSIN OR FEDERAL [**GOTO IUQ030**]
 <8> INDIAN HEALTH SERVICE [**GOTO IUQ030**]
 <9> MILITARY CARE (TRICARE/VA/CHAMP-VA) [**GOTO IUQ030**]
 <10> OTHER PLAN (SPECIFY) [**GOTO IUQ025**]

<d> DON'T KNOW [goto IUQ025]
 <r> REFUSED [goto IUQ025]

HIT "x" TO EXIT

NOTE: Only IUQ020_R2_A through IUQ020_R2_C contain responses and were kept in the SAS dataset.

IUQ020_R2_A	FMT_IUQ020_R2_.
IUQ020_R2_B	FMT_IUQ020_R2_.
IUQ020_R2_C	FMT_IUQ020_R2_.
IUQ020_R2_D	FMT_IUQ020_R2_.
IUQ020_R2_E	FMT_IUQ020_R2_.
IUQ020_R2_F	FMT_IUQ020_R2_.
IUQ020_R2_G	FMT_IUQ020_R2_.
IUQ020_R2_H	FMT_IUQ020_R2_.
IUQ020_R2_OTHER	FMT_CHAR R2_.

IUQ021 Do you get the Employer or Union Sponsored Plan coverage through your own job or from a family member's insurance plan?

IUQ021 FMT_IUQ021_.

<1> YOUR OWN JOB OR EMPLOYER
 <2> A FAMILY MEMBER'S JOB OR EMPLOYER
 <3> OTHER

<d> DON'T KNOW
 <r> REFUSED

[ALL RESPONSES AT IUQ021 GO TO IUQ023]

IUQ023 Was your job based coverage purchased through the SHOP, Small Business Health Options Program?

IUQ023 FMT_YES_NO.

<1> YES (IF IUQ020_R2 = 2, 10, d, or r GO TO IUQ025, ELSE SKIP TO IUQ026)

<2> NO (IF IUQ020_R2 = 2, 10, d, or r GO TO IUQ025, ELSE SKIP TO IUQ030)

<d> DON'T KNOW (IF IUQ020_R2 = 2, 10, d, or r GO TO IUQ025, ELSE SKIP TO IUQ030)

<r> REFUSED (IF IUQ020_R2 = 2, 10, d, or r GO TO IUQ025, ELSE SKIP TO IUQ030)

IUQ025 The next questions ask about the health care program, known as the Affordable Care Act or "Obamacare." As you may know, the health care law creates health insurance exchanges or marketplaces where people can shop for insurance on Healthcare.gov. Some people can get financial help in the form of a tax credit from the federal government to buy a health insurance policy through these marketplaces.

Did you or a family member buy your private health insurance plan from this Marketplace, healthcare.gov?

IUQ025 FMT_YES_NO.

- <1> YES (**GO TO IUQ026**)
- <2> NO (**SKIP TO IUQ030**)
- <d> DON'T KNOW (**GO TO IUQ026**)
- <r> REFUSED (**GO TO IUQ026**)

IUQ026

Do you know what kind of health plan you have? Bronze, silver, gold, platinum, catastrophic or are you not sure?

IUQ026 FMT_IUQ026_.

- <1> BRONZE
- <2> SILVER
- <3> GOLD
- <4> PLATINUM
- <5> CATASTROPHIC
- <d> DON'T KNOW
- <r> REFUSED

IUQ027

Did you or your family member get a federal tax credit or subsidy to help with or reduce the costs of buying your health insurance plan?

IUQ027 FMT_YES_NO.

- <1> YES
- <2> NO
- <d> DON'T KNOW
- <r> REFUSED

IUQ030

Does your health insurance plan, including any supplemental coverage you might have, cover all of the costs, some of the costs, or none of the costs associated with prescription medications?

IUQ030 FMT_ALL_SOME_NONE.

- <1> ALL
- <2> SOME
- <3> NONE (**SKIP TO IUQ040**)
- <d> DON'T KNOW
- <r> REFUSED

IUQ035

Is this prescription drug coverage through your regular plan or through a supplemental insurance program for prescription drug coverage?

(INTERVIEWER: ENTER ALL THAT APPLY)

- <1> REGULAR PLAN

<2> SUPPLEMENTAL, MEDICARE PART D
 <3> SUPPLEMENTAL, WISCONSIN SENIOR CARE
 <4> SUPPLEMENTAL, OTHER (SPECIFY)

<d> DON'T KNOW
 <r> REFUSED

HIT 'x' TO EXIT

NOTE: Only IUQ035_R2_A through IUQ035_R2_C contain responses and were kept in the SAS dataset.

IUQ035_A	FMT_IUQ035_.
IUQ035_B	FMT_IUQ035_.
IUQ035_C	FMT_IUQ035_.
IUQ035_D	FMT_IUQ035_.
IUQ035_OTHER	FMT_CHAR.

IUQ040

Does your insurance plan cover all of the costs, some of the costs, or none of the costs associated with preventive dental services including oral exam, cleaning, sealant, etc.?

IUQ040 FMT_ALL_SOME_NONE.

<1> ALL (SKIP TO IUQ050)
 <2> SOME (GO TO IUQ042)
 <3> NONE (GO TO IUQ042)

<d> DON'T KNOW
 <r> REFUSED

IUQ042

If your insurance plan did not cover all of the costs, was this because you have a separate dental plan or you do not have any dental coverage?

IUQ042 FMT_IUQ042_.

<1> HAVE A SEPARATE DENTAL PLAN
 <2> DO NOT HAVE ANY DENTAL COVERAGE

<d> DON'T KNOW
 <r> REFUSED

IUQ050

Does your health insurance plan cover all of the costs, some of the costs, or none of the costs associated with other preventive services for adults, like checkups, immunizations, and screenings?

IUQ050 FMT_ALL_SOME_NONE.

<1> ALL
 <2> SOME
 <3> NONE

<d> DON'T KNOW
 <r> REFUSED

IUQ070

Does your plan require you to sign up with a certain primary care doctor, group of doctors, or a certain clinic that you must go to for all of your routine care?

IUQ070 **FMT_YES_NO.**

<1> YES
<2> NO

<d> DON'T KNOW
<r> REFUSED

IUQ100 In the last 12 months, have you used the internet to seek information or advice on your health, or that of your family?

IUQ100 **FMT_YES_NO.**

<1> YES
<2> NO

<d> DON'T KNOW
<r> REFUSED

IUQ105 In the last 12 months, have you telephoned a health care professional to discuss a health problem or question related to yourself or your family?

IUQ105 **FMT_YES_NO.**

<1> YES
<2> NO

<d> DON'T KNOW
<r> REFUSED

IUQ110 In the last 12 months, have you emailed a health care professional to discuss a health problem or question related to yourself or your family?

IUQ110 **FMT_YES_NO.**

<1> YES
<2> NO

<d> DON'T KNOW
<r> REFUSED

IUQ115 How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?

Would you say never, rarely, sometimes, often or always?

IUQ115 **FMT_FREQ_IUQ115_.**

INSURANCE, ACCESS, UTILIZATION (IUQ)

<1> NEVER
 <2> RARELY
 <3> SOMETIMES
 <4> OFTEN
 <5> ALWAYS

<d> DON'T KNOW
 <r> REFUSED

IUQ120 Do you have a usual place where you go when you feel sick or need advice about your health?

IUQ120 **FMT_IUQ120_**
IUQ120_OTHER **FMT_CHAR.**

(INTERVIEWER: HAND CARD)

<1> YES, I USUALLY GO TO A HOSPITAL EMERGENCY ROOM
 <2> YES, I USUALLY GO TO A HOSPITAL OUTPATIENT DEPARTMENT
 <3> YES, I USUALLY GO TO A CLINIC OR DOCTOR'S OFFICE
 <4> YES, I USUALLY GO TO A COMMUNITY HEALTH CENTER
 <5> YES, I USUALLY GO TO SOME OTHER PLACE (SPECIFY)
 <6> NO, I DON'T HAVE A USUAL PLACE OF CARE **(Skip to IUQ140)**

<d> DON'T KNOW
 <r> REFUSED

IUQ125 What is the name of the health facility you usually go to when you feel sick or need advice about your health and in what town/city is this facility located?

IUQ125_A **FMT_CHAR.**
IUQ125_B **FMT_CHAR.**

NAME: _____

TOWN/CITY: _____

<d> DON'T KNOW
 <r> REFUSED

IUQ130 When you go to this health facility and see a doctor, do you usually see the same physician?

IUQ130 **FMT_YES_NO.**

<1> YES
 <2> NO **(SKIP TO IUQ140)**

<d> DON'T KNOW
 <r> REFUSED

IUQ137 What is the specialty of the doctor you usually see?

IUQ137 **FMT_IUQ137.**

INSURANCE, ACCESS, UTILIZATION (IUQ)**IUQ137_OTHER FMT_CHAR.**

- <1> INTERNAL MEDICINE
- <2> FAMILY PRACTICE
- <3> OBSTETRICS/GYNECOLOGY
- <4> OTHER SPECIALIST (SPECIFY)

- <d> DON'T KNOW
- <r> REFUSED

IUQ140 Sometimes people take fewer medicines than their doctors prescribed, or they don't have their prescription filled right away.

At any time during the last 12 months, have you taken less medicine than your doctor prescribed or not had your prescription filled **because of the cost?**

IUQ140 FMT_YES_NO.

- <1> YES
- <2> NO

- <d> DON'T KNOW
- <r> REFUSED

IUQ170 In the last 12 months, how many different **times** have you seen a mental health professional such as a psychologist, psychiatrist, counselor, or psychiatric nurse about a personal problem or a problem with alcohol or drugs?

IUQ170 FMT_NUMERIC.

<0-76> TIMES DURING PREVIOUS YEAR

- <d> DON'T KNOW
- <r> REFUSED

IUQ180 In the last 12 months, how many different **times** did you go to a hospital emergency room for medical treatment for yourself?

IUQ180 FMT_NUMERIC.

<0-76> TIMES DURING PREVIOUS YEAR

- <d> DON'T KNOW
- <r> REFUSED

IUQ190 In the last 12 months, how many different **times** were you a patient in a hospital for at least one night or longer?

IUQ190 FMT_NUMERIC.

<0> NO TIMES **(skip to IUQ220)**
 <1-76> TIMES DURING PREVIOUS YEAR

- <d> DON'T KNOW **(skip to IUQ220)**
- <r> REFUSED **(skip to IUQ220)**

INSURANCE, ACCESS, UTILIZATION (IUQ)

IUQ200 How would you rate the quality of the care you received when you were most recently a patient in a hospital for at least one night or longer **during the last year?**

Would you say it was excellent, very good, good, fair or poor?

IUQ200 FMT_EVGGFP.

<1> EXCELLENT
 <2> VERY GOOD
 <3> GOOD
 <4> FAIR
 <5> POOR

<d> DON'T KNOW
 <r> REFUSED

IUQ220 How long has it been since you last saw a doctor or health care provider for a routine physical exam, check-up or screening procedure?

**IUQ220_N FMT_NUMCAT.
 IUQ220_U FMT_FREQ.**

<0> NEVER **(SKIP TO IUQ260pre)**
 <1-76> ENTER NUMBER **(Go to IUQ230)**

<d> DON'T KNOW **(Go to IUQ225)**
 <r> REFUSED **(Skip to IUQ230)**

<1> DAYS **(Skip to IUQ230)**
 <2> WEEKS **(Skip to IUQ230)**
 <3> MONTHS **(Skip to IUQ230)**
 <4> YEARS **(If more than 1 year, skip to IUQ260pre. Otherwise skip to IUQ230)**

IUQ225 Has it been never, 6 months or less, more than 6 months but no more than 1 year ago, more than 1 year ago but no more than 3 years ago or more than 3 years ago?

IUQ225 FMT_IUQ225_255_.

<1> NEVER **(Skip to IUQ260pre)**
 <2> 6 MONTHS OR LESS **(Go to IUQ230)**
 <3> MORE THAN 6 MONTHS BUT NO MORE THAN 1 YEAR AGO **(GO TO IUQ230)**
 <4> MORE THAN 1 YEAR BUT NO MORE THAN 3 YEARS AGO **(Skip to IUQ260pre)**
 <5> MORE THAN 3 YEARS AGO **(Skip to IUQ260pre)**

<d> DON'T KNOW **(Skip to IUQ260pre)**
 <r> REFUSED **(Skip to IUQ260pre)**

INSURANCE, ACCESS, UTILIZATION (IUQ)

IUQ230 How would you rate the quality of the care you received when you last saw a doctor or health care provider for a routine physical exam, check-up, or screening procedure during the last year?

Would you say it was excellent, very good, good, fair or poor?

IUQ230 FMT_EVGGFP.

- <1> EXCELLENT
- <2> VERY GOOD
- <3> GOOD
- <4> FAIR
- <5> POOR

- <d> DON'T KNOW
- <r> REFUSED

IUQ260pre The next questions are about your **overall** level of satisfaction with quality and access to health care.

INTERVIEWER: HIT ENTER TO CONTINUE

IUQ260_R2 Sometimes people have problems getting health care when they need it. During the last 12 months, was there any time that you felt that you needed medical care or surgery but did not get it?

IUQ260_R2 FMT_YES_NO.

- <1> YES **(Go to IUQ265)**
- <2> NO **(Skip to IUQ270)**

- <d> DON'T KNOW **(Skip to IUQ270)**
- <r> REFUSED **(Skip to IUQ270)**

IUQ265 What was the main reason you didn't get the health care you needed?

IUQ265 FMT_IUQ265_.
IUQ265_OTHER \$FMT_CHAR.

(INTERVIEWER: HAND CARD)

- <1> I couldn't afford health care
- <2> My insurance company wouldn't approve, cover or pay for care
- <3> My insurance company required a referral but I couldn't get one
- <4> The doctor (or clinic) refused to accept my insurance plan
- <5> Medical care was too far away
- <6> It was too expensive to get to health care
- <7> I couldn't get there when the doctor's office was open
- <8> It took too long to get an appointment
- <9> I couldn't get through on the telephone to make an appointment
- <10> The waiting list was too long

INSURANCE, ACCESS, UTILIZATION (IUQ)

<11> Other (Specify)

<d> DON'T KNOW

<r> REFUSED

IUQ270 In the past 12 months, did you experience **delay** in obtaining any type of health care?

IUQ270 FMT_YES_NO.

<1> YES

<2> NO (Skip to IUQ280)

<d> DON'T KNOW (Skip to IUQ280)

<r> REFUSED (Skip to IUQ280)

IUQ275 What was the main reason for the difficulty or delay in obtaining health care?

IUQ275 FMT_IUQ275_.

(INTERVIEWER: HAND CARD)

<1> I couldn't afford health care

<2> My insurance company wouldn't approve, cover or pay for care

<3> My insurance company required a referral but I couldn't get one

<4> The doctor refused to accept my insurance plan

<5> Medical care was too far away

<6> It was too expensive to get to health care

<7> I couldn't get there when the doctor's office was open

<8> It took too long to get an appointment

<9> I couldn't get through on the telephone to make an appointment

<10> The waiting list was too long

<11> Other (Specify)

<d> DON'T KNOW

<r> REFUSED

IUQ280 Overall, how would you rate the quality of the health care you received during the last 12 months?

Would you say it was excellent, very good, good, fair, poor or you did not receive any care?

IUQ280 FMT_EVGGFP.

<1> EXCELLENT

<2> VERY GOOD

<3> GOOD

<4> FAIR

<5> POOR

<6> NOT APPLICABLE (DID NOT RECEIVE ANY CARE)

<d> DON'T KNOW

<r> REFUSED

INSURANCE, ACCESS, UTILIZATION (IUQ)

IUQ290 Overall, how satisfied were you with **the way** health care services were provided during the last 12 months?

Were you very satisfied, somewhat satisfied, neither satisfied nor dissatisfied, somewhat dissatisfied, very dissatisfied or you did not receive any care?

IUQ290 FMT_SATIS_5CAT.

- <1> VERY SATISFIED
- <2> SOMEWHAT SATISFIED
- <3> NEITHER SATISFIED NOR DISSATISFIED
- <4> SOMEWHAT DISSATISFIED
- <5> VERY DISSATISFIED
- <6> NOT APPLICABLE (DID NOT RECEIVE ANY CARE)

- <d> DON'T KNOW
- <r> REFUSED

IUQ300 I want to hear you read as many words as you can from this list. Begin with the first word and read aloud. When you come to a word you cannot read, do the best you can or say, 'blank' and go onto the next word.

IUQ300 FMT_NUMERIC.

INTERVIEWER: HAND CARD AND RECORD THE NUMBER OF CORRECT PRONUNCIATIONS

IF THE RESPONDENT TAKES MORE THAN FIVE SECONDS ON A WORD, POINT TO THE NEXT WORD, IF NECESSARY, TO MOVE THE SUBJECT ALONG. IF THE SUBJECT BEGINS TO MISS EVERY WORD, HAVE HIM OR HER PRONOUNCE ONLY KNOWN WORDS.

Menopause

Antibiotics

Exercise

Jaundice

Rectal

Anemia

Behavior

<0-7> CORRECT PRONUNCIATIONS

- <d> DON'T KNOW
- <r> REFUSED

INSURANCE, ACCESS, UTILIZATION (IUQ)