

# Findings From the 2025 Massachusetts Health Insurance Survey

December 2025

Methodology Report



# Massachusetts Health Insurance Survey (MHIS) 2025

## Methodology Report

Submitted to:



Center for Health Information  
and Analysis

November 26, 2025

Prepared by SSRS:  
Susan Sherr, Vanessa Harrell,  
David Crawford, Arina Goyle, Cordelia Horch

SSRS Job # X1077



## Table of Contents

<b>OVERVIEW.....</b>	<b>4</b>
<b>A. MHIS SAMPLE DESIGN .....</b>	<b>5</b>
1. History.....	5
2. Sample Design .....	6
3. ABS Methods.....	7
Sample Frame.....	7
Geographic Stratification .....	8
Demographic Based Stratification .....	8
Targeting Demographics through Predictive Modeling.....	9
Developing the Predictive Models for the 2025 MHIS .....	10
Sample Yield and Sample Release.....	17
4. Prepaid Cell Phone Methods.....	18
Sample Frame.....	19
Sample Yield and Sample Release.....	19
Adaptive Design for Prepaid Cell Dialing .....	19
<b>B. MHIS Operational Approach .....</b>	<b>20</b>
1. ABS Operational Approach .....	20
2. Prepaid Cell Phone Operational Approach.....	22
3. Telephone Methods for Prepaid Cell Sample and ABS.....	22
Interviewer Training.....	22
Survey Fielding.....	23
Refusal Conversions .....	23
<b>C. 2025 MHIS Instrument.....</b>	<b>23</b>
1. Survey Content .....	23
2. Survey Modes and Languages.....	27
3. Survey Pretest.....	27
4. Survey Training Materials and Interviewer Training .....	28
5. MHIS Data Collection .....	29
<b>D. Data Processing and Preparation.....</b>	<b>29</b>
<b>E. Survey Response Rates .....</b>	<b>30</b>

<b>F. Survey Weights and Variance Estimation .....</b>	<b>32</b>
1. Survey Weights .....	32
Household Base Weights .....	32
Address-Based Sample Weights .....	32
Prepaid Cell Sample PPD Weights.....	35
Combined ABS and Prepaid Cell Sample Weights .....	36
Household-Level Post-Stratification .....	37
Target Person-Level Base Weights.....	38
Target Person-Level Post-Stratification .....	39
Weight Trimming.....	41
<b>References.....</b>	<b>42</b>
<b>Deliverables .....</b>	<b>43</b>
<b>About SSRS.....</b>	<b>44</b>
<b>Appendix A : Imputation of analytic variables .....</b>	<b>45</b>
<b>Appendix B : 2025 MHIS Instrument .....</b>	<b>62</b>
<b>Appendix C : 2025 MHIS Communication .....</b>	<b>165</b>
M1 – English-only.....	165
M2 – English-only.....	166
M1 – 65+ only.....	167
M2 – 65+ only.....	168
M3 – English-only and 65+.....	169
M4 – English-only and 65+.....	170
Partial Conversion – English-only .....	171
M1 – Spanish (bilingual, included English on reverse).....	172
M2 – Spanish (bilingual) .....	174
M3 – Spanish (bilingual, included English on reverse).....	175
M4 – Spanish (bilingual) .....	176
Partial Conversion – Spanish (bilingual, included English on reverse) .....	177

## OVERVIEW

The Center for Health Information and Analysis (CHIA) contracted with SSRS to conduct the 2025 Massachusetts Health Insurance Survey (MHIS), which is the 17<sup>th</sup> time the survey has been fielded. The goal of the MHIS is to document health insurance coverage, access to and use of health care, and health care affordability for the noninstitutionalized population of Massachusetts. The MHIS has been fielded periodically since 1998. Beginning in 2015, it has been fielded biennially in odd years—that is, in 2015, 2017, 2019, 2021, 2023, and 2025. From its inception in 1998 until 2007, the MHIS relied on a random-digit-dial (RDD) landline telephone sample, as shown in Table 1.<sup>1</sup> This report describes the methods used to collect and analyze the 2025 MHIS data, including an overview of changes to the survey over time. More details on prior years of the MHIS are provided in earlier versions of the MHIS Methodology Report, which are available on the [CHIA website](#).<sup>2</sup> Of most relevance is the [2023 MHIS Methodology Report](#).<sup>3</sup>

This report is organized as follows: Section A describes the MHIS sample design and Section B explains the operational approach to the MHIS. The 2025 MHIS instrument is discussed in Section C, with the instrument included in Appendix B. Data processing and preparation are described in Section D, with details about imputation in Appendix A, and survey response rates in Section E. The final section addresses the creation of the MHIS survey weights and variance estimation.

**Table 1: Overview of MHIS Design, by Year**

	Random-digit-dial Sample (RDD)			Address-based Sample (ABS)
	Landline phones	Cell Phones	Pre-paid cell phones	
1998-2007	X			
2008-2011	X	X	X	X
2014-2015, 2017	X	X	X	
2019			X	X
2021, 2023, 2025			X	X

Note: The MHIS was not fielded in 2012 or 2013. In 2015, the MHIS shifted to an every-other-year fielding and so the survey was not fielded in 2016, 2018, 2020, 2022, or 2024.

<sup>1</sup> While most of the early years of the MHIS relied on RDD landline samples, in 1998, the MHIS also included a small, in-person survey based on an ABS because of concerns that an RDD sample might produce biased estimates of the uninsurance rate in Massachusetts. In the 1998 MHIS the estimates of the uninsurance rate from the RDD landline sample and ABS were quite similar, at 7.8% and 8.2%, respectively (Roman, 2007).

<sup>2</sup> <https://www.chiamass.gov/massachusetts-health-insurance-survey/>

<sup>3</sup> <https://www.chiamass.gov/assets/docs/r/survey/mhis-2023/2023-MHIS-Methodology.pdf>

## A. MHIS SAMPLE DESIGN

### 1. History

From 2008 to 2011, the MHIS methodology was a hybrid design that included an address-based sample (ABS) combined with an RDD landline sample. The goal of the ABS was to capture households without landline phones.<sup>4</sup>

As the share of cell phone-only households continued to grow and ABS was found to be biased toward respondents with higher socioeconomic status (Link and Burks, 2013; Rapoport et al., 2012), the 2014 MHIS shifted to an RDD-only sample comprised of both landline phones and cell phones, including prepaid cell phones. Prepaid cell phones are different from a standard contract-cell phone in that customers pay as they go based on usage instead of paying a monthly fee as part of a long-term contract. Owners of prepaid cell phones are more than twice as likely to be uninsured, to have lower incomes, and to be non-White (Dutwin, 2014; McGeeney, 2015; Berzofsky et al., 2018; Goyle et al., 2022). As such, prepaid cell phone numbers were sampled at a higher rate than other cell phone numbers (i.e., oversampling prepaid cell phone numbers), which meant the number of MHIS respondents who fall within these categories is higher than would occur in a simple random sample of all cell phones (contract and prepaid). This sample design was introduced in 2014 and repeated for the 2015 and 2017 MHIS.

Unfortunately, response rates for RDD surveys dropped rapidly in the late 2010s (Lavrakas et al., 2017), making it cost-prohibitive to continue with an RDD-only sample design. As a result, the 2019 MHIS added an ABS for the first time since 2011, shifting to a hybrid design that included both the RDD samples of landline phones, cell phones and prepaid cell phones that was used in the 2017 MHIS design and an ABS. The ABS generally has a higher response rate, which helps to combat the costs associated with RDD. It also provides a high coverage rate since it uses the United States Postal Service (USPS) Delivery Sequence File (DSF), which contains all delivery point addresses serviced by the USPS.

Following the 2019 survey, and to rein in costs while also attempting to halt declining response rates and obtain adequate representation of traditionally harder-to-reach subgroups in ABS, the 2021 MHIS shifted to rely primarily on an ABS, with a small RDD sample of prepaid cell phones. Analysis of the 2021 MHIS shows that the PPD sample preforms well at reaching historically disinvested populations: the Hispanic incidence from the PPD sample was 4.3 times that of the Hispanic incidence from the ABS sample. Similarly, the incidence of people who are uninsured among the PPD sample was 3.3 times that of the incidence of people who are uninsured from

---

<sup>4</sup> Non-telephone households will, by definition, be missed in all RDD samples.

the ABS. Despite low response rates, the sample of prepaid cell phones was continued to bolster the representation of individuals from historically disinvested populations. The same design was employed in both 2023 and 2025.

The MHIS has long relied on stratified random samples to obtain more representative samples of Massachusetts residents across key attributes. For example, the 2014 to 2019 MHIS design divided the RDD landline sample into three strata for higher, middle, and lower income based on telephone exchanges to oversample households living in low- and middle-income areas and target individuals from historically disinvested populations (e.g., low-income and uninsured residents). With the shift to the ABS sample in 2019, it was possible to add additional levels of sample stratification based on address for the ABS sample. Thus, in the second wave of 2019 MHIS, the ABS sampling approach added strata based on predictive models using external data (as described in the ‘ABS Methods’ section below) to identify and sample households based on key demographic and economic attributes of interest to CHIA. The 2021, 2023, and 2025 MHIS continued to incorporate such predictive models, although the modeling and the resulting stratification were updated based on the inclusion of previous cycles’ MHIS data. This process is explained in the ‘ABS Methods’ section below. For details about prior cycles’ methods, please reference the respective methodology reports.

## 2. Sample Design

In line with previous years, the goal of the 2025 MHIS was to obtain a representative sample of Massachusetts residents by key demographic and economic attributes and the eight Health Service Regions (HSR) of Massachusetts. As described above, to efficiently achieve this goal, the 2025 MHIS relies on a hybrid design with an ABS and an RDD prepaid cell phone sample, identical to the design used in the 2023 MHIS.

To maximize the total number of interviews completed, optimize the number of interviews completed with key demographic and economic subgroups, and monitor survey costs, the 2025 MHIS, like prior years of the MHIS, continued to incorporate an adaptive design. Surveys are frequently designed with a great deal of uncertainty about key parameters, such as the yield.<sup>5</sup> Adaptive survey design is a strategy for dealing with this uncertainty by making use of data collected during early phases of the survey to inform decisions made about the sample design in later phases. To this end, most of the ABS for the 2025 MHIS was released in two waves, divided equally and projected to achieve 4,710 interviews, with representative samples for key demographic and economic subgroups. Typically, this strategy allows a thorough evaluation of

---

<sup>5</sup> Yield is the number of sample pieces (e.g., phone numbers for RDD samples and addresses for ABS) fielded to obtain one completed interview.



the first wave to inform the sample design and order sample for the second wave. However, the tight timeline required for the 2025 MHIS necessitated specifying the design for Wave 2 and ordering all the sample before the field period began. Nevertheless, the SSRS methodological team still analyzed the performance of the first wave to assess the efficacy of data modeling and evaluate the study's response rates. As a result of the evaluation a small, supplemental third wave of the ABS was released alongside the second wave to account for additional needed interviews. The third wave was expected to yield an additional 160 interviews, for a projected total of 4,710 ABS completes. The prepaid cell sample was released in multiple waves throughout the data collection period, with a target of 600 completed prepaid cell phone interviews. The final goal for the 2025 MHIS was to gather 5,310 total interviews.

**Table 2: Projected Completes by Wave**

	Projected Completes Original Design	Projected Completes Revised Design
Wave 1	2,356	2,320 <sup>A</sup>
Wave 2	2,463	2,230
Wave 3	-	160
<b>ABS Total</b>	<b>4,819</b>	<b>4,710</b>
Prepaid	600	600
<b>Total</b>	<b>5,419</b>	<b>5,310</b>

A. Calculated as part of the Wave 1 sample performance review.

### 3. ABS Methods

#### Sample Frame

The 2025 MHIS utilized a hybrid design with ABS being the predominant frame. The ABS was selected via probability sampling methods, and SSRS' sister company, Marketing Systems Group (MSG), supplied all the sample. Sample was generated from the United States Postal Service (USPS) Computerized Delivery Sequence File (CDSF). The CDSF is a computerized file that contains information on all delivery addresses serviced by the USPS, except for general delivery.<sup>5</sup> The CDSF is updated weekly and contains home and apartment addresses as well as Post Office boxes and other types of addresses for mail delivery. The sample was selected from all residential records apart from addresses coded as vacant, seasonal (vacation), and PO boxes other than those defined as OWGM (only way to get mail), which avoids duplication of Massachusetts residents in the sample selection.



### Geographic Stratification

The geographic strata for 2025 MHIS were based on the eight Health Service Regions (HSR) of Massachusetts (Table 3). The sample plan is designed to ensure proportionate completes within each of these health service regions. In the interest of oversampling key demographic subgroups, the sample was further stratified based on the predicted demographics as discussed in the next section.

**Table 3: Estimated Distribution by HSR from the ABS Sample in 2025 MHIS**

Targeted Subgroups	Estimated Incidence	Population Benchmark Source - Claritas	Estimated Survey Completes
1 Western	11.77%	12.04%	554
2 Central	11.29%	11.51%	531
3 Northeast	19.85%	20.66%	934
4 Metro West	11.85%	9.78%	559
5 Metro Boston	24.89%	23.99%	1,172
6 Metro South	11.80%	12.21%	556
7 Southcoast	3.82%	5.38%	180
8 Cape and Islands	4.74%	4.43%	224

### Demographic Based Stratification

While providing excellent coverage, in practice, ABS designs have been shown to fall short with non-white, lower income, and younger populations (Link and Burks, 2013; Rapoport, Dutwin, & Sherr, 2012; Goyle, Sherr, Park, & Loveridge, 2022). To improve sample representativeness and achieve the Commonwealth's objectives, SSRS developed a stratified ABS design with strategic oversamples of households predicted to have certain attributes. With this aim, the sample design incorporated stratification by both geography and demographics of interest.

Within ABS, sample groups of interest are typically targeted via indicator flags such as Asian or Hispanic surname flags, through census demographics to identify areas that are high density enclaves for certain demographic groups, and through predictive modeling that uses indicator flags and census demographics among other appended variables. The stratified design used for the 2025 MHIS employed all these techniques to yield a representative sample of Massachusetts residents. As with 2021 and 2023 MHIS, in addition to stratification by the 8 HSRs, the ABS sample strata were defined based on predictive models to identify and sample households predicted to have key demographic attributes. A general overview of the data modeling process and the steps undertaken to produce the suggested model-based stratification for 2025 MHIS are described below.

### *Targeting Demographics through Predictive Modeling*

Previous research has demonstrated the value of using external data to build predictive models of household attributes such as demographics, spoken languages, and even attitudinal metrics (Djangali et al., 2019; Dutwin, 2020; McPhee et al., 2019). The process begins by appending external data from commercial and geographic sources such as the 2021 Census Planning Database<sup>6</sup> to a portion of previously collected survey data (referred to as the “prior survey” data) to create the “training” dataset. The external data are then used to build models that predict self-reported survey outcomes in that training dataset. The external data serve as independent variables (referred to as “predictors” in this report) in the prediction models, while the self-reported attributes (demographic and economic attributes, etc.) in the prior survey data serve as the dependent variables (referred to as “targeted attributes” in this report). The targeted attributes are household characteristics that are likely to be strong predictors of harder-to-reach households. The predictive models are then evaluated on a “test” dataset, which is usually comprised of the portion of prior survey data that has not been used as the training dataset. Based on this evaluation, the predictor variables and prediction models that were used to identify the sampling strata for each targeted attribute are determined.

Based on the analytical goals of the 2025 MHIS, which were the same as for the 2021 and 2023 MHIS, the predictive models for the 2025 MHIS sought to identify targeted attributes that could be used to oversample the following types of harder-to-reach households:

1. Households with children (0-17)
2. Households with young adults (18-29)
3. Households with non-White and/or Hispanic members
4. Households with low-income families (<139 FPL/ <\$35,000)
5. Households with uninsured individuals (either at the time of survey or at any point in the past 12 months)
6. Households with MassHealth

In operationalizing the predictive models for these harder-to-reach household subgroups, multiple targeted attributes (dependent variables) were tested.

Oversampling households with the above listed attributes also required identifying sample households that did not share these attributes so they could be assigned to a different sampling stratum and undersampled per the goals of the 2025 MHIS. For instance, the 2025 MHIS did not seek to oversample households with adults aged 65+, so it was critical to identify those households so they could be sampled at a lower fraction compared with households with the targeted attributes.

---

<sup>6</sup> The Census Planning Database contains select operational, housing, demographic, and socio-economic statistics from the 2010 Census and the American Community Survey (ACS) 5-year files.

In the final stratification, all sample households for the 2025 MHIS were assigned to one of a set of mutually exclusive sampling strata, with sampling ratios assigned to increase the likelihood of completing interviews with harder-to-reach households.

### *Developing the Predictive Models for the 2025 MHIS*

Since the 2023 MHIS successfully utilized a predictive model-based approach to identify, target, and reach Black residents, households with children, Hispanic residents, Asian American residents, and low-income residents, the goal for the 2025 MHIS was to replicate the successful models while also attempting to boost the incidence for uninsured respondents.

The process for developing the predictive models for the targeted attributes in the 2025 MHIS ABS entailed the following nine steps:

1. All available external data from voter registration databases, consumer databases, Marketing Systems Group (MSG) database information (which provided sample and surname flags), and Census Planning Database (PDB) data (which provided population attributes at the Census block group level), were acquired.
2. The training dataset was created using SSRS's proprietary ABS Database and half of the ABS data collected for 2023 MHIS. The other half of the data collected for the 2023 MHIS was used to test the predictive models (described below). The SSRS ABS Database is maintained by the advanced methods team and archives sampling data, survey responses, and paradata from previous SSRS-administered ABS data collections. At the time of the 2023 MHIS sample design, the proprietary database included data for over 1.8 million U.S. addresses sampled for approximately 20 previous SSRS ABS data collections on a variety of topics conducted between 2019 and 2023, which generated over 150,000 survey responses. The database contains multiple tables, some at the person level and others at the address level. For each person and /or address, SSRS maintains up to 780 data points, including: demographic, behavioral, and psychographic attributes appended from voter files and commercial marketing databases; responses to survey items; disposition information; and flags related to any data collection experiments (e.g., experiments with incentive levels, envelope types, etc.) implemented for the project. Because of the large volume of data accumulated over time, SSRS ABS Database includes a substantial number of survey responses from rare or harder-to-reach subgroups such as young adults, persons without college degrees, non-Internet-users, the uninsured, and members of detailed racial or ethnic categories. This allows SSRS to develop nuanced machine-learning models to identify address characteristics that are associated with a high likelihood that a person in the target subpopulation resides there.
3. Each address in the training and test data was matched to commercially available external data for that address. As the external data matches are based on characteristics

associated with the address at an earlier time, there could be measurement error in the data match for addresses with changes in occupancy.

4. Analysis files were built for the training data and the 2023 test data with observations for each address-data match combination. This meant creating separate observations within each address for each person- from the external data match (e.g., voter registration information). Each address-person observation was treated as a separate observation in the files. Addresses without any external commercial data matches were excluded from the data files for the development of the predictive models. The outcome variables in the ABS database training data were the self-reported attributes of the survey respondent rather than a selected individual target person due to the data collection methods in the ABS database.
5. Predictions were developed for the targeted attributes that are likely to be related to the harder-to-reach household subgroups outlined above using two approaches:
  - a. In the first approach, a machine learning algorithm called random forest was used to generate predictive models for each targeted attribute where the dependent variable for each model is the self-reported respondent characteristics (e.g., respondent self-reports as Asian; respondent lives in a household with children under 18, etc.) and the independent variables are the external data appended to the ABS training database. The goal of the random forest was to identify the best predictors and a classification model using those predictors for each targeted attribute for the individuals in the training data. Predicted probabilities for each of these targeted attributes were then estimated on the 2023 MHIS test data to evaluate the accuracy of the predictive models. A person-address record was classified as having a particular characteristic (e.g., Hispanic) if the random forest model assigned a probability of being that characteristic above a pre-determined threshold.
  - b. The second approach used two additional external data sources to create flags for each address that identified households likely to have one or more of the targeted attributes. These flags differ from the modeled predictions generated from the random forests because they are based on single external indicator variables rather than predictive models. The two external data sources for these flags are from MSG and the 2021 Census Planning Database (CPDB). MSG appends data flags to the ABS frame. The CPDB contains population level data at the Census Block Group (CBG) level. MSG provides several different types of variables for an address including surname flags, household composition indicators, and household-level demographic variables. Surname flags identify sample addresses with matched external data that indicates that it is likely that someone at the address has a surname associated with a particular subgroup. For instance, a person at an address linked with a common Asian surname such as 'Lee' or 'Yang' would be assigned a value of 1 for the predicted indicator of being

Asian based on the Asian surname flag. Similarly, other Sample frame flags use information on the likely presence of children and young adults at the address to create flags for households that include children and flags for households that include young adults, based on the presence of the sample frame variable. The CBG data identify geographic areas by density of certain subgroup attributes in 2021, such as the proportion of households in a particular CBG with African American members. Based on the geographic characteristics of their address, an address located in a CBG with a high proportion of Asian households would be assigned a value of 1 for the CBG-based Asian flag. Similarly, a person with an address in a high proportion Black/African American CBG would be assigned a value of 1 for the CBG-based indicator of being Black/African American.

6. All possible approaches to identifying households with the targeted attributes (i.e., the random forest model-based predictions, the flags appended by MSG, and the CBG-based indicators) were then evaluated using the 2023 MHIS test data. The incidence and coverage for target attributes were compared with those obtained from the models used for the 2023 MHIS.
  - a. The predictive models developed in the training data were at the person level. To evaluate them in the context of the 2023 MHIS ABS test data for households, the individual-level predictions were aggregated up to the household level. For example, if any member of a household in the combined ABS Database and 2023 MHIS ABS training data was predicted to be Hispanic, the household was flagged as “Predicted to be Household with Hispanic members”.

To assess the accuracy of the predictive models as well as the non-modeled indicators for the 2023 MHIS test data, the predicted attributes of each address were compared to the actual reported attributes of the 2023 MHIS target person at that address. The incidence for a targeted attribute is the share of MHIS addresses in the test file that are predicted to have that attribute and actually have a target person with that attribute. Coverage is the proportion of the MHIS addresses in which the target person has a particular attribute that they are predicted to have by the model. The higher the incidence for a predictive indicator, the more efficient the stratification of the sample based on that predictive indicator was at reaching the population with the attribute. The higher the coverage for a subgroup of addresses with a targeted attribute, the greater the proportion of the total population with that attribute that is included in the stratum based on that predictive indicator. Incidence and coverage are typically at odds with each other, so finding the best balance is key. An assignment model may have a good incidence (if, for example, 75% of the addresses the model predicts to be Hispanic are Hispanic), but poor coverage (if, for example, the model only predicts Hispanic for 10% of the entire Hispanic population). That suggests that while a stratum could be oversampled based on predictive indicators (for example, predicted to be Hispanic), the representativeness of that

stratum would nevertheless be poor if the coverage of the targeted attribute is low. The process involved evaluating each predictor and targeted attribute independently on incidence and coverage. Predictors that were judged to be ineffective at predicting a particular target attribute were excluded from further use and are not part of the sampling strata.

Table 4 lists the predictive indicators that were evaluated for the 2025 MHIS. The 'Assessment' column indicates whether the predictive indicator was retained, discarded, or added to the 2025 MHIS stratification scheme in comparison to 2023. In the assessment column, "discarded" identifies those indicators that were used in the 2023 stratification scheme but not in the 2025 scheme because they did not add any additional value in identifying the targeted subgroup. "Retained" identifies those indicators that were the same as the 2023 stratification scheme. Those marked as "Not added" were predictive indicators that were evaluated but did not add any value beyond other predictive indicators. "Added" indicates those predictive indicators that were evaluated and did add value beyond other predictive indicators by increasing the incidence, coverage, or both, for the targeted household subgroup. The only change made in 2025 was the addition of 'Likely MassHealth Flagged ZIP Codes' as a predictor variable to identify households with MassHealth.

**Table 4: Assessment of Predictive Indicators by Targeted Household Attribute**

Targeted Household Subgroup	Predictive Indicator	Assessment
Asian	Vietnamese Surname Flag	Not added
Asian	Korean Surname Flag	Not added
Asian	Asian Language Interview Predictive Model	Not added
Asian	Asian Surname Flag	Not added
Asian	Self-reported Asian Predictive Model	Retained
Asian	High Density Asian Block Group Flag	Not added
Hispanic	Spanish Language Interview Predictive Model	Retained
Hispanic	High Density "Other Language" Block Group Flag	Not added
Hispanic	Hispanic Surname Flag	Retained
Hispanic	Self-reported Hispanic Predictive Model	Retained
Hispanic	High Density Hispanic Block Group Flag	Not added
Black/African American	Self-reported Black/African American Predictive Model	Retained
Black/African American	High Density Black/African American Block Group Flag	Retained
Low Income	No High School Diploma Predictive Model	Not added
Low Income	Low Income (Household income $\leq$ 139% FPL) Predictive Model	Retained



<b>Low Income</b>	Low Income (Household income < \$35,000) Predictive Model	Not added
<b>Uninsured</b>	Uninsured Predictive Model	Retained
<b>Uninsured</b>	Not U.S. Citizen Predictive Model	Not added
<b>Household with Child (Age 0-17)</b>	Presence of Child (Age 0-11) Predictive Model	Retained
<b>Household with Child (Age 0-17)</b>	Presence of Teen (Age 12-17) Predictive Model	Retained
<b>Household with Child (Age 0-17)</b>	Presence of Child (Age 0-17) Sample Frame Flag	Not added
<b>Household with Young Adult (Age 18-29)</b>	Presence of Young Adult (Age 18-29) Predictive Model	Not added
<b>Household with Young Adult (Age 18-29)</b>	Presence of Young Adult Sample (Age 18-29) Frame Flag	Not added
<b>Household with Elderly Adult (Age 65+)</b>	Presence of Elderly Adult (Age 65+) Predictive Model	Retained
<b>Household with Elderly Adult (Age 65+)</b>	Presence of Elderly Adult (Age 65+) Sample Frame Flag	Retained
<b>Household with MassHealth</b>	Likely MassHealth Flagged ZIP Codes	Added

7. After evaluating each predictive indicator independently, combinations of indicators were examined. For instance, the incidence and coverage of an “Asian” attribute was evaluated for the Asian surname flag alone and when combined with other indicators. The goal was to determine which indicator variables could be combined to form the mutually exclusive final stratification for the 2025 MHIS. If there was significant overlap in the households the predictors identify, the indicator with the better incidence and coverage was used. However, if they identified different households, indicators were combined. Based on this analysis, we created a set of mutually exclusive (hierarchical) strata and re-assessed the incidence and coverage of the aggregate strata. The goal was to keep each stratum as homogenous as possible for efficient oversampling or undersampling of the targeted subgroups. This strata formation thus comprised the following steps:

- a. The predictive indicator variables that passed the assessment for targeting each household subgroup were combined into a stratum designed to primarily target that group. For example, the stratum targeting households with Hispanic members were defined as all addresses meeting any one of the following criteria:
  - Address was flagged as a Hispanic household if any individual in the household was predicted via the random forest model as Hispanic.
  - Address was flagged as a Hispanic household if any individual in the household was predicted via the random forest model as a Spanish speaker.
  - Address was flagged as a Hispanic household if external data linked to the address included anyone with a Hispanic surname.



- b. Once the final strata were determined, the next step was to create possible stratification schemes for combining the predictive strata into a single hierarchical stratification variable. For each stratification scheme considered, strata that had a high incidence and were unlikely to overlap with other targeted household subgroups were placed higher up in the hierarchy.
  - c. The final stratification variable (under all evaluated stratification schemes) included two residual strata for addresses that: (1) match external data but were not predicted to be associated with households containing members with the targeted attributes, or (2) did not match to external data.
  - d. Once the alternate stratification schemes for the strata hierarchy were built, incidences and coverage across all the strata (e.g., what is the total incidence of “Asian-identified targets” under the stratification scheme) were reassessed. At this step, the incidences and coverage were based on all ABS completes in 2023 MHIS (i.e., not just those matched to the external data). The stratification schemes tested the hierarchy that maximized the incidence of the key targeted household attribute, including attributes not identified through a single stratum (e.g., uninsured) for that scheme.
  - e. The sampling fractions with each stratification scheme were then adjusted within each stratum to boost representation, while controlling the unequal weighting effect. When more cases are sampled from the frame disproportionately, more cases also need to be weighted differently from each other to create a weighted sample representative of the population. Widely different weights can lead to a high design effect or the loss in statistical efficiency of the final estimates.
  - f. The final stratification scheme was thus one that best controlled the design effect while also maximizing the incidence of the key targeted attributes.
8. The 2025 MHIS ABS sample was “scored” using the final predictive indicators selected based on how they fared with the 2023 MHIS ABS test data. “Scoring” is the process of applying the predictive models to a new set of data (the ABS for the 2025 MHIS) to generate a prediction for each address.
9. Using these predictions and the predetermined stratification scheme, the final sampling stratification variable was developed for the 2025 MHIS.

Table 5 enumerates the strata for the 2025 MHIS. The number of the stratum reflects the hierarchy of assignment to the stratum. An address that met the criteria for multiple strata was assigned the lowest numbered stratum.

Table 6 shows the final relative sampling fractions used for drawing the 2025 MHIS sample based on the evaluation described above.

**Table 5: Stratification Groups for 2025 MHIS**

Targeted Attribute	Predictor	Stratum
Household with Elderly Adult (Age 65+)	Age 65+ Predictive Model	Stratum 1
Household with Elderly Adult (Age 65+)	Age 65+ Flag	Stratum 1
Household with MassHealth	Flagged ZIP Codes	Stratum 2
Hispanic	Self-reported Hispanic Predictive Model	Stratum 3
Hispanic	Spanish Language Interview Predictive Model	Stratum 3
Hispanic	Hispanic Surname Flag	Stratum 3
Black/African American	High Density Black/African American Block Group Flag	Stratum 4
Black/African American	Self-reported Black/African American Predictive Model	Stratum 4
Asian	Self-reported Asian Predictive Model	Stratum 5
Household with Child (Age 0-17)	Presence of Child/Teen Predictive Model	Stratum 6
Low Income/Uninsured	Self-reported LT 139% FPL Predictive Model	Stratum 7
Low Income/Uninsured	Self-reported Uninsured Predictive Model	Stratum 7
Residual Addresses	No match on external data	Stratum 8
Residual Addresses	Match on external data	Stratum 9

**Table 6: Strata Sampling fractions**

Stratum	Stratum Description	Relative Sampling Fraction		
		Wave 1	Wave 2	Wave 3
1	Age 65+	0.59	0.71	1.00
2	MassHealth	1.81	1.99	1.80
3	Hispanic/Spanish Language	1.60	1.56	1.71
4	Black/African American	1.38	1.15	1.14
5	Asian	0.61	0.62	0.47
6	Child	0.65	0.65	0.57
7	Low Income/Not Insured	0.84	0.72	0.39
8	Residual Unmatched	1.05	0.79	0.46
9	Residual Matched	0.75	0.69	0.60

The designs for Waves 1 and 2 of the study followed the stratification scheme outlined in Table 5. While Wave 2 maintained the general goals of Wave 1, the design was adjusted to increase the sample size for Hispanic and Black/African American respondents. This was achieved by modifying the relative sampling fractions used to draw the sample. In addition, as mentioned previously, a small third wave was added to increase the overall targeted completes.

The final sample design crossed the modeling-based strata with the eight HSRs to ensure representative sampling of the HSRs. Table 7 shows the estimated incidence of each of the targeted household attributes, i.e. the estimated proportion of a given attribute within the 2023 MHIS test sample, under the final sample design, as well as the incidence in 2023 and the population benchmark for comparison. The estimates for the final proportion of targeted household attributes with the proposed modeling scheme are calculated by considering the response rate and incidence of the targeted household attribute within each demographic based and geographic based stratum, along with the sampling fraction for the stratum.

**Table 7: Estimated Survey Incidence and Estimated Survey Completes for Targeted Household Attributes from the ABS in 2025 MHIS by Wave**

Targeted Attribute	Pop. Benchmark Source-ACS 2023	Incidence 2023	Est. Incidence 2025 MHIS Wave 1	Est. Survey Completes Wave 1 (n=2,320)	Est. Incidence 2025 MHIS Wave 2	Est. Survey Completes Wave 2 (n=2,230)	Est. Incidence 2025 MHIS Wave 3	Est. Survey Completes Wave 3 (n=160)	Actual Incidence 2025	Actual Survey Completes Total (n=4,762)
Black/AA	6.5%	5.2%	5.9%	137	6.0%	134	6.0%	10	4.8%	216
Hispanic	13.1%	6.7%	8.4%	195	8.5%	190	8.0%	13	7.5%	355
Asian	7.0%	6.8%	7.5%	174	7.2%	161	6.4%	10	7.3%	323
Age 18-29	15.2%	10.3%	11.1%	258	10.4%	232	9.0%	14	11.0%	473
Uninsured	2.4%	0.7%	0.8%	19	0.8%	18	0.7%	1	0.8%	37
Low income (<139 FPL)	14.8%	7.3%	8.5%	197	8.7%	194	8.6%	14	10.2%	484

### Sample Yield and Sample Release

The yield of the study was estimated to be 13.5:1. Most of the sample was released in two waves, divided equally across the waves. A small supplemental third wave was released alongside wave 2. Early survey yields from Wave 1 were tracking higher than projected, particularly among key populations of interest, including Black/African American and Hispanic respondents. To ensure there were enough completed interviews for these populations, as well as to meet the overall targeted completes, we added Wave 3, which followed the same mailing and timeline as Wave 2. Due to the higher yield seen in wave 1, estimated target completed interviewers were also revised to better reflect the observed yield. The supplemental wave's primary purpose was to secure the additional completes needed to meet the ABS target.

Table 8 displays the household counts from the sample frame, the CDSF, the estimated survey completes at the time of sampling, and the actual survey completes by HSR.

**Table 8: CDSF Household Counts, Expected Total Sample Size, and Estimated ABS Completes**

HSR	Households	Sample	Estimated Survey Completes	Actual Survey Completes
1 Western	328,760	6,662	554	612
2 Central	304,617	6,270	531	524
3 Northeast	573,639	12,931	934	1,007
4 Metro West	273,270	5,927	559	588
5 Metro Boston	674,657	15,704	1,172	1,146
6 Metro South	340,639	6,912	556	470
7 Southcoast	138,329	2,979	180	198
8 Cape and Islands	133,109	2,728	224	217
Total	2,767,020	60,113	4,710	4,762

## 4. Prepaid Cell Phone Methods

Prepaid cell phone numbers are associated with cell phones that are “pay as you go” and do not require a contract. Prepaid numbers have been found to be more likely used by Hispanic people, people with lower education, people with lower income, and other related groups who are often underrepresented in general population samples (e.g., the uninsured; Dutwin, 2014; McGeeney, 2015; Berzofsky et al., 2018; Goyle et al., 2022). These are key demographic groups that tend to be underrepresented in ABS designs.

The 2025 MHIS continued the design from 2021 and 2023, where we exclusively used prepaid cell phones for the RDD portion of the study and all other interviews were conducted from the ABS frame. Such a hybrid design enhances the representativeness of the overall sample and brings total completed interviews with households from underrepresented groups closer to desired targets. Table 9 below shows the estimated incidence and estimated completes for 2025 MHIS from the prepaid cell sample and actual incidences and completes.

**Table 9: Estimated Incidence and Survey Completes for Targeted Subgroups from the Prepaid Cell Sample**

Targeted Subgroups	Estimated Incidence	Estimated Completes (n=600)	Actual Incidence	Actual Completes (n=603)
African American	17.5%	105	18.2%	110
Hispanic	25.1%	151	23.7%	143
Asian	5.9%	35	3.8%	23
Uninsured	2.5%	15	4.3%	26
Low income (<139% FPL)	34.5%	206	36.5%	220
Age 18-29	12.4%	74	12.9%	78

### *Sample Frame*

SSRS' sister company, Marketing Systems Group (MSG), supplied the prepaid cell sample for the 2025 MHIS, as it has for prior rounds of the MHIS.

### *Sample Yield and Sample Release*

Based on an estimated 160:1 yield for the prepaid cell sample; it was anticipated that 96,000 sample pieces would be needed to achieve the target 600 completes for this sample. Response on the prepaid cell sample was lower than originally predicted, so additional sample was needed. In all, 149,518 pieces of prepaid cell samples were needed, for a yield of 249:1.

### *Adaptive Design for Prepaid Cell Dialing*

For the prepaid cell phone sample, the 2025 MHIS used a model-based adaptive design to reduce outbound dialing costs while maintaining yield and the representativeness of the responding sample. Using data from previously completed prepaid cell samples, SSRS developed a random forest model predicting the outcomes of later call attempts based on the outcomes of the first few call attempts. Specifically, for any cases that did not respond to the first 3 call attempts, this model predicted "response propensity" (RP) conditional on continued dialing—that is, the probability that a response would eventually be obtained if interviewers continued dialing that case. Model predictors included the status codes, call durations, and other paradata from the first 3 call attempts.

This model was applied to assign an RP score to each case in the MHIS prepaid sample that passed the third call attempt without yet having responded. At that point, any cases with RP scores below a prespecified "cut point" were no longer dialed, while other cases with higher RP scores continued to be called up to a maximum of 4 dials. The rationale for this approach is to direct the remaining dialing effort towards those cases for which it is most likely to be successful, while reducing effort for those that are unlikely to eventually yield a completed survey.

The RP models used for the 2023 MHIS surveys were able to predict the outcomes of later call attempts with high accuracy. The use of highly accurate RP models allows us to stop dialing early for some cases while minimizing the reduction in the completion rate (and therefore any reduction in sample representativeness), since very few of the cases that were stopped early would ever have responded.

The goal was to target approximately a 20% reduction in the total number of dials relative to the standard protocol of 4 dial attempts. In all, 51,311 cases were evaluated, of which 47,249 were stopped at 3 calls. Out of the cases that continued to 4 calls, 0.4% of the cases became completed interviews.

One concern for prepaid cell phone dialing is that respondents will not answer calls from numbers that may appear to be spam. SSRS utilizes a variety of strategies to minimize the chance that the number being used to call potential respondents is identified as spam, spoofing, or a sales call. Specifically, the reputation management team at SSRS partners with the telecom providers as well as an industry-leading white-listing service, Numeracle, to register, monitor, and retire outbound numbers periodically or when flagged to reduce the chance of being marked as spam, spoofing, or sales calls. Numeracle is a whitelisting vendor who provides registration and monitoring services to give outbound numbers the best chance in both displaying the intended information to recipients and allowing calls to go through without being blocked as spam. The whitelisting process takes a minimum of three weeks, which is why SSRS always requests ample phone numbers for the duration of the MHIS. Numeracle also provides monitoring services and provides regular reporting of numbers that are likely flagging as spam. These numbers are then retired. In addition, they work directly with carriers to clean numbers that are flagged to reduce the likelihood that it will be flagged as spam. The SSRS receives daily health reports about all active caller IDs, and a dedicated team ensures every project is kept as 'clean' as possible and mitigates spam ratings by cycling in fresh caller IDs after high-volume dialing has taken place.

## **B. MHIS Operational Approach**

### **1. ABS Operational Approach**

Sample was released in three waves, with waves 2 and 3 fielding concurrently. Each wave followed the contact protocol described below. Dates of the mailings by wave can be found in Table 10.

1. All sample members received an initial invitation letter that included a \$1 bill in a visible cash envelope, except those in the aged 65+ stratum. Those in the aged 65+ stratum did not receive a cash pre-incentive. The letter requested that the respondent complete the survey online and included a link that directed web respondents to log on to a .gov URL ([www.mahealthsurveys.gov](http://www.mahealthsurveys.gov)), where they could review materials regarding the purpose of the survey. Upon choosing 'Take the Survey/Complete la Encuesta' they were redirected

to the SSRS Confirmit Survey, where they were instructed to enter the unique user ID provided in the mailing materials. The letter alerted those without Internet access to call a toll-free 1-800 number to conduct the survey by phone with a live interviewer. All mailings to cases in stratum 2, which were predicted to be Hispanic, also received a Spanish version of the invitation letter (on the back side of the letter). All other letters had a sentence in a box in Spanish with the survey URL and the 1-800 number. Respondents in stratum 6, age 65+, received the same letter but no incentive was included, since these demographics tend to respond at a higher rate. The letter was printed in two colors and mailed with a live stamp to increase the likelihood that it would be opened and read.

2. Between 3-7 days after the initial invitation letter was sent, all households in the ABS received a postcard reminder. The postcard also provided the 1-800 number for call-in surveys, as well as Spanish content for the Hispanic/Latino stratum.
3. Approximately a week after the postcard mailing, all remaining nonrespondents were sent a reminder letter that was the same as the initial invitation letter but without the \$1 incentive. As with other mailings, the Hispanic/Latino stratum were sent a bilingual version.
4. About a week after the reminder letter, a reminder postcard was sent to all remaining nonrespondents. As with other mailings, the Hispanic/Latino stratum was sent a bilingual version.
5. In the first wave, and coinciding with the final reminder postcard, a text message invitation was sent to all remaining nonrespondents for whom a cell phone number could be matched to the sampled address. Due to a very low response rate from the text messages, text messages were not sent to subsequent waves.
6. Finally, a partial conversion letter was sent to any cases that had started the survey but did not complete it. Cases that had started the survey in Spanish received a bilingual version of the letter, while those that had started in English received an English-only version. All partial conversion letters included a \$1 bill in a visible cash envelope and an offer of a \$10 post-incentive for completed interviews.



**Table 10: Contact Protocol Dates by Wave**

Mailing	Wave 1	Waves 2/3
Initial Invitation	1/8/25	3/3/25
Postcard	1/14/25	3/10/25
Letter Reminder	1/21/25	3/17/25
Postcard Reminder	1/28/25	3/24/25
Text Message Reminder	1/30/25	N/A
Partial Conversion Letter	2/10/25	3/27/25

## 2. Prepaid Cell Phone Operational Approach

The protocol for the prepaid cell sample for the 2025 MHIS was as follows: All sample members received an initial call plus up to 3 callbacks. As described above, a model was used to predict “response propensity” (RP) to determine whether a sampled phone number would receive a fourth call. Sample members who initially refused to complete the survey were offered the opportunity to be re-contacted at a more convenient time to complete the survey. Bilingual interviewers were available for participants who wished to conduct the interview in Spanish. As part of the survey introduction, all sample respondents were offered a \$10 post-incentive if they completed the interview. If a voicemail was left, the message also included the offer of a \$10 post-incentive.

Additionally, Prepaid cell phone sample members who were included in the first wave were sent a text message inviting them to complete the survey on the web. Those who agreed were texted a web link to complete the survey. All remaining non-respondents were subsequently called using the protocol described above. Due to a low response rate to the text invites, text messages were not sent to subsequent waves of Prepaid cell phone sample.

## 3. Telephone Methods for Prepaid Cell Sample and ABS

The telephone methods were the same for the Prepaid Cell sample and for respondents from the ABS who chose to call in to complete the survey by telephone, with the same group of interviewers conducting the telephone interviews with sample members from both groups.

### *Interviewer Training*

Prior to commencement of the study, and as necessary throughout the fielding process, SSRS project directors:

- Briefed and trained each interviewer on the issues specific to the study.
- Explained the study's overall objectives, specific procedures, and questionnaire content to interviewers.

- Provided FAQs and scripts for all respondent questions in English and Spanish.
- Monitored interviewers for the duration of the project and provided feedback when necessary.

### *Survey Fielding*

The following steps were taken to conduct the telephone interviews to maximize telephone response rates:

- Instituted a call rule of three or four calls, based on the adaptive design.
- Varied the times of day and the days of week when call-backs were made (differential call rule).
- Explained the purpose of the study and stated as accurately as possible the expected length of the interview.
- Permitted respondents to set the schedule for a call-back, allowing them to return the interviewer's call on a toll-free number.
- Provided a clear and early statement that the call was not a sales call.
- Informed respondents about the survey results' potential benefits to their communities.

### *Refusal Conversions*

SSRS has a core group of specially trained and highly experienced callback specialists and refusal converters who called back all initial refusals to the telephone survey on this project and attempted to persuade the respondent to complete the interview. Cases where a call attempt resulted in a respondent or household refusal, termination, or other break-off were attempted again after a period of at least seven days.

## **C. 2025 MHIS Instrument**

### **1. Survey Content**

The MHIS questionnaire begins by establishing that the household is in Massachusetts, and therefore is included in the survey sample frame. The survey then asks for a person aged 18 or older who can answer questions about the health insurance coverage of the members of the household. That respondent is then asked a series of questions that are used to create a full roster of every individual in the household by age and sex assigned at birth, as well as by education and work status, when age appropriate. People temporarily living away from home (including college students) are included in their usual household. People living in group quarters (e.g., dormitories, nursing homes, and shelters) are excluded from the study as the focus is on the noninstitutionalized population of the state.

**Table 11: Summary of Topic Areas Covered in the 2023 MHIS, by Household Members**

Topics	All Household Members	Target Household Member
Age, gender, education, and employment	X	X
Race/ethnicity		X
Marital status		X
Nativity and citizenship status		X
Family income		X
Health insurance coverage		X
Health insurance		X
Availability of employer sponsored health insurance		X
Health status		X
Access to and use of health care, including mental health care and care for substance use disorder)		X
Quality of health care		X
Health care affordability		X
Household homeownership	X	X
Household internet use	X	X
Household telephone status	X	X

From the full roster, one household member is randomly selected by the computer program to be the “target” person for the household. A series of questions then establish the relationship between all household members with individual selected as the “target.” All other detailed information is also collected for the “target” person, including socioeconomic characteristics and insurance status. Basic demographic and socioeconomic information, including age, race/ethnicity, gender identity, sexual orientation, education, and employment are also collected. Table 11 summarizes the questions covered in the 2025 MHIS for all members of the household and for the household member selected as the “target” individual for the survey. The 2025 MHIS instrument is included in Appendix B.

The content of the MHIS continued to change in response to shifts in topic priorities for CHIA as well as to maintain a reasonable survey length. Tables 12 and 13 below list the modifications to the 2025 MHIS questionnaire.

Table 12: New Questions

Question Number	Question Text
HH0	{Web/CATI: The/My} first questions are about you and your household.
D5b	Just to confirm, {you were/{TARGET} was} assigned {male/female} at birth and {you/they} now identify as a {{girl/boy}/{woman/man}}. Is that correct?
S12e	{Were you/Was {TARGET}} ever the guardian of any of {your/their} siblings living in this household?
S12f	Were any of {your/{TARGET}'s} siblings in this household ever {your/{TARGET}'s} guardian?
H4e	The Health Connector is Massachusetts' health insurance Marketplace. It helps individuals, families, and small businesses find health insurance that meets their needs and fits their budget. The Health Connector is different from MassHealth, but they do share an application. Had {you/{TARGET}/{TARGET}'s parent(s)} heard of the Health Connector before?
HS1a	How much {have you/has {TARGET}/have {TARGET}'s parent(s)} heard about the Massachusetts Health Connector being available for state residents in need of health insurance?
A2e	About how long has it been since {you/{TARGET} last saw a regular primary care provider for a routine check-up? A routine check-up is a visit <b>not</b> for an illness or problem.
A5ab	{Web/CATI: Next is a list of care providers. Please indicate/Next, I'm going to read you a list of care providers. Please tell me} how many times in the past 12 months {you/{TARGET}} received care from...[INSERT]
A6aa	Which one category best describes the facility where {you/{TARGET}} most recently received care for {mental health/substance use/mental health or substance use}?
A7a	In the past 12 months, did {you/{TARGET}} see an eye doctor, optometrist, or ophthalmologist (someone who prescribes eyeglasses)?
A10c(a-m)	Was that for: Primary care, Mental health, substance use, Other type of care
A10e	At any time in the past 12 months, {have you/has {TARGET}/have {TARGET}'s parent(s)} had problems with any of the following: [INSERT]
D16b	What language would {you/{TARGET}/{TARGET}'s parent(s)} feel most comfortable speaking with {your/{TARGET}'s} doctor or nurse?
D16c	In which language would {you/{TARGET}/{TARGET}'s parent(s)} feel most comfortable reading medical or health care instructions?
A11fa	What types of medical services led to those medical bills that are being paid over time? [INSERT]
A11k	{Do you/Does {TARGET}/Do you and your family/Does {TARGET} and their family} currently have any medical bills that {you are/{TARGET} is/you and your family are/{TARGET} and their family are} unable to pay at all?
A11j	In the past 12 months, {have you/has {TARGET}/have you and your family/has {TARGET} and their family} {Web/CATI: done any of the following?/{INSERT}}

HH\_E1d

{Have you/Have you or any member of your family aged 16 or older/Has {TARGET} or any member of {TARGET}'s family aged 16 or older/Has any member of {TARGET}'s family aged 16 or older} had difficulty finding or keeping a job in the past 12 months?

**Table 13: Deleted Questions**

Question Number	Question Text
H4d	Did {you/{TARGET}/{TARGET}'s parent(s)} know that MassHealth is starting to review the eligibility of all members this year?
H9	Thinking back to the last time {you/{TARGET}} had health insurance, what type of health insurance did {you/{TARGET}} have?
E1a	{Do you/Does {TARGET}} work in a setting where health care is provided to patients as a member of the clinical, non-clinical, pharmaceutical, or administrative staff?
E1aa	Did {you/{TARGET}} ever work in a setting where health care is provided to patients as a member of the clinical, non-clinical, pharmaceutical, or administrative staff?
A6ca	Thinking about {your/TARGET's} most recent appointment for an alcohol or substance use disorder, did {you/TARGET/TARGET's parent(s)} pay the entire cost of the appointment out-of-pocket? This might include payments you made in cash or from special accounts {you/they} may have for health care spending, such as Flexible Spending Accounts, Health Savings Accounts, or Health Reimbursement Arrangements.
A6cb	Why didn't {you/TARGET/TARGET's parent(s)} have to pay the entire cost of the appointment out-of-pocket?
A6cc	Why did {you/TARGET/TARGET's parent(s)} {pay out of pocket / go to a free or sliding scale clinic} for {your/their} most recent appointment?
A10	Thinking about all the care that {you have/TARGET has} received in the past 12 months, was any of that care through a telehealth appointment?
A10a	Thinking about {your/TARGET's} most recent in-person visit, why did {you/TARGET} go in-person instead of using a telehealth appointment?
A10aa	Thinking about {your/TARGET's} most recent in-person visit, what type of care did {you/they} receive?
A10b	For {your/{TARGET}'s} telehealth appointments in the past 12 months, what type of care did {you/they} receive?

## 2. Survey Modes and Languages

The 2025 MHIS was programmed in a computer assisted interviewing (CAI) platform that supports two modes of data collection - computer assisted telephone interview (CATI) and computer assisted web interview (CAWI). The advantage of having only one instrument in a CAI program that supports both modes is that respondents can start the interview in one mode and continue in the other, if they choose to, preventing any duplicate records. Another important advantage, from a data management perspective, is that the data are stored in single database and no data harmonization is required later. In total, 4,566 interviews were completed on the web while 799 were completed on the phone. Following the text message invites sent to the first wave of Prepaid cell phone sample, 9 interviews from the Prepaid cell phone sample frame were completed on the web, all in English.

The 2025 MHIS was offered in English and Spanish for both CATI and web. In total, 122 interviews were completed in Spanish – 71 on the phone with bilingual interviewers and 51 self-administered on the web.

## 3. Survey Pretest

The pretest for the 2025 MHIS included both CATI and web interviews. The purpose of the pretesting was to evaluate whether new questions were flowing well with the existing instrument and whether respondents comprehended questions as intended by the research team. The web pretest also evaluated the usability of the web instrument, particularly related to any new questions since 2023.

The CATI pretest was comprised of 5 interviews conducted on December 13<sup>th</sup> and 15<sup>th</sup>, 2024. CATI pretest respondents were prepaid cell phone respondents from Massachusetts and were sampled specifically for the pretest.

SSRS also conducted 5 web cognitive interviews between December 13<sup>th</sup> and 20<sup>th</sup>, 2024. Three of the participants took the web survey on a computer, and two took the survey on a smartphone. All five interviews were completed in English. Respondents for the IDIs were MHIS 2023 respondents who agreed to be recontacted for future studies.

Recordings of the interviews were uploaded to a secure FTP site for CHIA's review.

The survey was generally well received. The CATI interviews averaged 34 minutes (minimum length: 28 minutes; maximum length: 47 minutes). The cognitive interviews cannot be used to gauge time as the moderator probes throughout the interview. Most participants indicated the respondent burden was acceptable and would participate in such a survey even if not compensated.

**Table 14: Demographic Characteristic of the Pretest Targets**

Demographics	CATI Respondent	CATI Target	Web Respondent	Web Target
Sex at birth – Male	2	2	0	1
Sex at birth – Female	3	3	5	4
Gender – Male	1	3	0	1
Gender – Female	0	2	4 <sup>A</sup>	4
Less than 18	0	0	0	0
18-25	1	1	0	0
26-64	3	3	3	3
65+	1	1	2	2
Insured (target)	N/A	5	N/A	5
Uninsured (target)	N/A	0	N/A	0

A. The gender of the respondent for one case was not collected since gender is only collected for the target, who was another household member.

All suggested updates to verbiage, formatting, and question content were outlined in a memo to CHIA and were addressed before the start of the data collection.

#### 4. Survey Training Materials and Interviewer Training

Interviewers received both written materials and formal training for conducting this survey. The written materials were provided prior to the beginning of the field period and included:

1. A briefing document that contained information about the goals of the study, the overall study protocol, the meaning and pronunciation of key terms, clarification of any potential points of respondent confusion, and other problems that could be anticipated ahead of time, as well as strategies for addressing them.
2. The questionnaire.
3. A script to use when leaving messages on answering machines.
4. Contact information for project personnel.

Call center supervisors and interviewers were given the opportunity to walk through each question in the questionnaire using a test program. Interviewers were given instructions to help them maximize participation and ensure accurate data collection. They were instructed to encourage participation by emphasizing the social importance of the project and to reassure respondents that the information they provided was confidential.

Interviewers were monitored during the first several nights of interviewing and were provided with feedback where appropriate to improve interviewer technique and clarify survey questions. The interviewer monitoring process was repeated periodically during the field period.



## 5. MHIS Data Collection

Data collection for the 2025 MHIS began on January 9, 2025, (mailing occurred on January 8, 2025) and was completed on April 8, 2025. During this period, 4,762 interviews were completed from the ABS, and 603 interviews were completed from the prepaid cell phone sample.

Table 15 shows the number of interviews completed by mode and sample type.

The MHIS took an average of 25.0 minutes to complete. More specifically, the phone interviews took an average of 43.7 minutes and the web-based surveys took an average of 21.8 minutes.

**Table 15: Completed Interviews by Mode and Sample Type**

	ABS	Prepaid Cell Sample	Total
CATI	205	594	799
Web	4,557	9	4,566
<b>Total</b>	<b>4,762</b>	<b>603</b>	<b>5,365</b>

## D. Data Processing and Preparation

Two data files were produced and delivered to CHIA – a raw unedited data file from the CATI and CAWI surveys, and a target person-level data file that included all data elements collected for the target person along with data on the characteristics of the target’s family and household. Ranges and logic checks were used to check the data during the data collection process for both CATI and CAWI. Additional data checks were implemented as part of the data file development work, checking for consistency across variables and family members, and developing composite measures of family and household characteristics.

In past years, constructed variables were included in the final data file at the conclusion of data collection. However, in 2025, due to schedule constraints, SSRS created constructed variables as part of the interim data file for CHIA’s review. This change allowed both SSRS and CHIA to review the constructed variables during data collection, which subsequently allowed both teams to complete their final review more efficiently after the conclusion of data collection.

Missing values for key demographic variables for the target and target’s household members, such as age, race/ethnicity, health and disability status, and family income were replaced through hot-deck imputation procedures (Myers, 2011).<sup>7</sup> Missing values were also imputed for a group of analytic variables that were needed for the reports on the 2025 MHIS data. For the variables for which imputed data were created, the data files include both the original variable

<sup>7</sup> The hot decking was done in SPSS. Additional details on the imputation procedures are provided in Appendix A.

(with missing values) and a new variable that includes the imputed values for cases that had missing values. In general, the percentage of respondents who answered “don’t know” or refused for any given question was quite low. As observed in the past, item nonresponse for income questions remained the highest, at roughly 9.6%.

## **E. Survey Response Rates**

Response rates are one method used to assess the quality of a survey, as they provide a measure of how successfully the survey obtained responses from the sample. The American Association of Public Opinion Research (AAPOR) has established standardized methods for calculating response rates (AAPOR, 2008). Overall response rates achieved for the ABS and cell phone sample and the overall survey sample are reported below.

AAPOR Response Rate #3 was calculated for this study. Response Rate #3 is generally defined as the number of households in which an interview was completed, divided by the estimated number of eligible households in the sample.

In estimating the response rate for the MHIS, AAPOR defines four categories of sample records:

1. Eligible, completed interview
2. Eligible, no interview
3. Unknown if eligible
4. Not eligible

Cases in which no interview was attained from an eligible household include RDD sample members who refused to be interviewed, ABS members who did not respond, RDD and ABS sample members who broke off the interview part way through, as well as any other sample record that was determined to be a household (e.g., an answering machine indicated that it was a household and not a business). AAPOR’s category #3 includes all sample records for which eligibility is unknown, such as sample records that result in a “no answer” (continuous ringing with no answering machine) or mail that is delivered but no actions are taken. Finally, cases were defined as not eligible if they were not in Massachusetts, the mail was returned as undeliverable, or the address was not a residential address. In calculating a response rate, an eligibility quotient to this category is applied. This is a percentage of the sample records in the category that was estimated to be eligible households.

Final response rates for the 2025 MHIS are summarized in Table 16. The response rate for the ABS was 10.6 percent. While this is a low, it is in line with what is observed in other state health surveys. To review response rates from another state level health surveys, please see the CHIS

Report 4 2021-2022 Response Rates.<sup>8</sup> The response rate for the prepaid cell phone sample was 1.2 percent. This response rate is very low, but it should be noted that phone response rates continue to decline, and this sample of prepaid cell phone was aimed at harder-to-reach populations. The overall response rate, including both the ABS and prepaid cell phone samples, was 3.9 percent.

While low, the 2025 MHIS response rate does not imply inaccurate estimates, as a survey with a low response rate can still be representative of the sample population, though the risk of nonresponse bias is higher.<sup>9</sup> Other factors beyond response rates are also important, such as levels of bias, levels of missing data, and similarity to other research findings.<sup>10</sup> It should be noted however that the low response rate of the 2025 MHIS may carry with it more risks and potential errors than federal government surveys that have much larger sample sizes. While survey weighting (described in the section below) aims to mitigate potential sources of bias, such as nonresponse bias, it is likely that some bias may remain.

**Table 16: Response Rates for 2008-2025 MHIS**

Year	ABS	RDD – Landline Telephone	RDD Cell Phone and/or Prepaid Cell Phone <sup>A</sup>	Overall Phone	Overall Response Rate
2008	29.2%	42.0%	N/A <sup>B</sup>	42.0%	33.4%
2009	39.2%	49.6%	N/A <sup>B</sup>	49.6%	42.2%
2010	38.1%	39.2%	N/A <sup>B</sup>	39.2%	41.1%
2011	35.4%	42.3%	N/A <sup>B</sup>	42.3%	37.3%
2014	N/A	32.4%	27.7%	30.9%	30.9%
2015	N/A	22.1%	29.5%	24.6%	24.6%
2017	N/A	22.5%	16.1%	18.8%	18.8%
2019	20.7%	26.1%	7.0%	16.5%	19.6%
2021	13.2%	N/A <sup>B</sup>	2.2%	2.2%	6.5%
2023	13.6%	N/A <sup>B</sup>	1.4%	1.4%	5.8%
2025	10.6%	N/A <sup>B</sup>	1.2%	1.2%	3.9%

A. In 2021, 2023, and 2025, the cell phone sample was limited to prepaid cell phone numbers.

B. N/A indicates that the sample type was not applicable for the given year.

<sup>8</sup> CHIS Report 4 2021-2022 Response Rates: [https://healthpolicy.ucla.edu/sites/default/files/2023-09/chis\\_2021\\_2022\\_methodologyreport4\\_responserates\\_final\\_09112023.pdf](https://healthpolicy.ucla.edu/sites/default/files/2023-09/chis_2021_2022_methodologyreport4_responserates_final_09112023.pdf)

<sup>9</sup> Groves, RM. Nonresponse Rates and Nonresponse Bias in Household Surveys. *Public Opinion Quarterly*. 2006; 70(5): 646–75; Jonathon, R, Halbesleben, B, Whitman, M. Evaluating Survey Quality in Health Services Research: A Decision Framework for Assessing Nonresponse Bias. *Health Services Research*. 2013; 48(3):913–30; Brick, JM. The Future of Survey Sampling. *Public Opinion Quarterly*. 2011; 75(5): 872–88.

<sup>10</sup> American Association of Public Opinion Research. Response Rates - An Overview.

<https://www.aapor.org/Education-Resources/For-Researchers/Poll-Survey-FAQ/Response-Rates-An-Overview.aspx>

## F. Survey Weights and Variance Estimation

### 1. Survey Weights

The survey data were weighted to adjust for differential sampling probabilities, to reduce biases due to differences between respondents and nonrespondents (nonresponse bias), and to address gaps in coverage in the survey frame (coverage bias). Survey weights can reduce the effect of nonresponse and coverage gaps on the reliability of the survey results (Keeter et. al., 2000, 2006; Groves 2006). Overall, the procedure executed for this study follows the two-step procedure detailed in Kalsbeek and Agans (2008), which is to first correct for any disproportionate probabilities of selection (base weighting), such as oversampling based on targeted household characteristics, and then to balance the sample to match official statistics for persons living in Massachusetts on metrics such as age and gender (post-stratification weighting).

In developing weights for the MHIS, the survey data were weighted first at the household level and then at the target-person level.

#### *Household Base Weights*

The base weighting process corrects for disproportionate probabilities of selection at the household level. The base weight was calculated differently depending on whether the respondent was contacted through the prepaid cell sample (PCS) or via address-based sample (ABS). Because the two samples were drawn from separate, but overlapping, frames, it was necessary to first calculate base weights for each sample separately, and then combine the samples.

#### *Address-Based Sample Weights*

For the ABS portion, the household base weight began with a stratification weight that adjusts for sampling fractions across design strata. This effectively “undoes” any over- or under-sampling. The stratification weight,  $WS$ , can be expressed as  $WS_i = N_i/n_i$  where  $N_i$  is the size of the sample frame in stratum  $i$  and  $n_i$  is the amount of sample drawn from stratum  $i$ . The MHIS strata were created by crossing the nine hierarchical sampling strata (Predicted to be Asian, Predicted to be Hispanic or Spanish-speaking, etc.) with the eight Massachusetts HSR sampling strata, yielding 72 weighting strata. All the addresses within each of the 72 weighting strata have the same stratification weight.

Table 17 shows the nine sampling strata for MHIS 2025.

**Table 17: Sampling Strata**

Stratum	Stratum Description
1	Age 65+
2	MassHealth
3	Hispanic/Spanish Language
4	Black/African American
5	Asian
6	Child
7	Low Income/Not Insured
8	Residual Unmatched
9	Residual Matched

Next, as with past cycles of the MHIS, the household weights are adjusted for unknown residential status and non-residential (i.e., ineligible) addresses. Weights for addresses with unknown residential status and non-residential addresses are set to zero after this calculation. The residential status adjustment applied to the weights for addresses classified as “unknown residential status” reflects the share of addresses of unknown status that were likely to be eligible for the survey. The adjustment,  $ABSA1F_i$ , is computed as follows:

$$ABSA1F_i = \begin{cases} \left( \sum_{i \in RES} WS_i + \sum_{i \in UNK\_RES} p_{res} \times WS_i \right) / \sum_{i \in RES} WS_i, & \text{if } i \in RES \\ 0, & \text{if } i \in UNK\_RES, NON\_RES \end{cases}$$

where RES denotes addresses identified as residential, UNK\_RES denotes addresses with unknown residential status, and NON\_RES denotes non-residential addresses.  $WS_i$  is the stratification weight described above, and  $p_{res}$  is the estimated proportion of eligible residential addresses among those with unknown residential status.  $p_{res}$  was calculated separately for each of the eight Massachusetts Health Regions sampling strata.

The new weight,  $ABSA1W_i$ , was computed as:

$$ABSA1W_i = ABSA1F_i \times WS_i$$

for all known residential households.

The second adjustment in the household base weight for the ABS accounts for known residential households that did not complete the survey.

This weight,  $ABSA2W_i$ , was computed as:

$$ABSA2W_i = ABSA2F_i \times ABSA1W_i$$

where  $ABSA2F_i$  is the household nonresponse adjustment factor computed as

$$ABSA2F_i = \begin{cases} \sum_{i \in HR, HNR} ABSA1W_i / \sum_{i \in HR} ABSA1W_i, & \text{if } i \in HR \\ 0, & \text{if } i \in HNR \end{cases}$$

where HR is the set of household respondents and HNR is the set of household nonrespondents. Household respondents are cases where household status was confirmed and the survey was completed. Household nonrespondents are cases where household status was confirmed, but no survey was completed. This adjustment was performed on the sample as a whole.<sup>11</sup>

The third household base weight adjustment calibrates the responding sample to the low response score (LRS) from the Census Planning Database in order to address the potential for additional, unmeasured factors driving nonresponse to the MHIS that are captured by the Census-modeled LRS.<sup>12</sup> A five-category variable was created that divides census block groups into quintiles based on the LRS. Then the household weights were calibrated to match the occupied household distribution from the Census Planning Database for Massachusetts block groups.

This weight,  $ABSA3W_i$ , was computed as:

$$ABSA3W_i = ABSA3F_{gi} \times ABSA2W_i$$

The low response score calibration adjustment,  $ABSA3F_{gi}$ , is computed as:

$$ABSA3F_{gi} = N_g / \sum_{i \in g} ABSA2W_i$$

where  $g$  denotes the low response score quintile and  $N_g$  is the number of occupied housing units in quintile  $g$ . This adjustment helps reduce nonresponse bias based on potentially unmeasured characteristics that are common to address-based studies.

<sup>11</sup> A classification model was run to determine if there was variability in response rate by sample frame variables available for both respondents and nonrespondents. The model suggested there were no meaningful differences in response rates by cell. Therefore, nonresponse adjustments were computed for the full sample.

<sup>12</sup> Chandra Erdman, Nancy Bates, The Low Response Score (LRS): A Metric to Locate, Predict, and Manage Hard-to-Survey Populations, Public Opinion Quarterly, Volume 81, Issue 1, 1 March 2017, Pages 144–156, <https://doi.org/10.1093/poq/nfw040>

### Prepaid Cell Sample PPD Weights

The PPD base weight adjustments follow a similar structure as the ABS weights. The adjustment of the PPD base weights began with a design weight that is applied to all of the sample,  $WD$ , and can be expressed as  $WD_i = N_i/n_i$  where  $N_i$  is the size of the PCS frame in zip code  $i$  and  $n_i$  is the amount of PCS drawn from zip code  $i$ .

There was then an adjustment made to that weight for unknown eligibility status and ineligible phone numbers within the PPD. Ineligible cases are those that are non-working phones, or working phones that are out of state or belong to a child. The unknown cases are working phones where no information was able to be gathered to determine eligibility. Weights for those with unknown eligibility and ineligible phone numbers were set to zero. The eligibility adjustment for the known eligible sample,  $PPDA1F_i$ , was computed as follows:

$$PPDA1F_i = \begin{cases} \left( \sum_{i \in ELIG} WD_i + \sum_{i \in UNK\_ELIG} p_{elig} \times WD_i \right) / \sum_{i \in ELIG} WD_i, & \text{if } i \in ELIG \\ 0, & \text{if } i \in UNK\_ELIG, NON\_ELIG \end{cases}$$

where  $ELIG$  denotes phone numbers identified as eligible,  $UNK\_ELIG$  denotes phone numbers with unknown eligibility status, and  $NON\_ELIG$  denotes ineligible phone numbers, and  $p_{elig}$  is the estimated proportion of eligible phone numbers among those with unknown eligibility status.

The adjusted weight,  $PPDA1W_i$ , was computed as:

$$PPDA1W_i = PPDA1F_i \times WD_i$$

Next, a nonresponse adjustment was computed to account for eligible phone numbers where no survey was completed.

This weight,  $PPDA2W_i$ , was computed as:

$$PPDA2W_i = PPDA2F_i \times PPDA1W_i$$

where  $PPDA2F_i$  is the prepaid cell phone nonresponse adjustment factor computed as

$$PPDA2F_i = \begin{cases} \sum_{i \in HR, HNR} PPDA1W_i / \sum_{i \in HR} PPDA1W_i, & \text{if } i \in PR \\ 0, & \text{if } i \in PNR \end{cases}$$

where  $PR$  is the set of PPD respondents and  $PNR$  is the set of PPD nonrespondents. PPD respondents are cases where eligibility status was confirmed, and the survey was completed.



PPD nonrespondents are cases where eligibility status was confirmed, but no survey was completed. This adjustment was applied to the full PPD.<sup>13</sup>

### Combined ABS and Prepaid Cell Sample Weights

Because the two samples were drawn from separate, but overlapping, frames, they must be combined with a composite adjustment that downweights cases in the overlap. Not every ABS household contains an individual with a prepaid cell phone, so the compositing adjustment was limited to ABS where one or more prepaid cell phones is present and the entirety of the PPD, where, by definition, everyone has a prepaid cell phone. For the remainder of the ABS, the adjustment was simply 1.

The overlapping frame adjustment,  $OFAF_i$  is computed as

$$OFAF_i = \begin{cases} 1/PPD_i, & i \in PPD \cup ABS(PPD) \\ 1, & i \in ABS(\sim PPD) \end{cases}$$

where  $PPD_i$  is the number of adults in the household who have a prepaid cell phone.  $PPD_i$  was capped at 3 so that we do not have very large weights at this stage.

The final ABS weight,  $ABSA4W_i$ , was computed as:

$$ABSA4W_i = OFAF_i \times ABSA3W_i$$

The final PPD base weight was computed as

$$PPDA3W_i = OFAF_i \times PPDA2W_i$$

The final composite household-level base weight,  $BWHH_i$ , is therefore:

$$BWHH_i = \begin{cases} WS_i \times ABSA1F_i \times ABSA2F_i \times ABSA3F_{gi} \times OFAF_i, & i \in ABS \\ WD_i \times PPDA1F_i \times PPDA2F_i \times OFAF_i, & i \in PPD \end{cases}$$

A final adjustment was made so that the distribution of cases in households with a prepaid cell phone is in its proper proportion relative to the ABS frame size in MA. This information was obtained from a question in the survey that is asked of respondents in the ABS sample. This adjustment makes it so that the sum of the final composite household-level base weights of households with a prepaid cell phone, regardless of which frame they were sampled from, total the estimated number of households in the ABS frame containing one or more prepaid cell phones.

<sup>13</sup> A classification model was run to determine if there was variability in response rate by sample frame variables available for both respondents and nonrespondents. The model suggested there were no meaningful differences in response rates by cell. Therefore nonresponse adjustments were computed for the full sample.

$$FBWHH_i = \begin{cases} BWHH_i, i \in ABS(\sim PPD) \\ (BWHH_i) \times \left( \sum_{i \in ABS(PPD)} ABSA3W_i / \sum_{i \in PPD \cup ABS(PPD)} BWHH_i \right), i \in PPD \cup ABS(PPD) \end{cases}$$

### Household-Level Post-Stratification

With the household-level base weight applied, the sample was post-stratified to known household parameters based on the 2023 U.S. Census Bureau's American Community Survey (ACS)<sup>14</sup> and area characteristics obtained from Claritas<sup>15</sup>. The latter included population density quintiles, based on the population per square mile in each zip code, and Massachusetts HSR, as defined by zip code.

The benchmarks used for post-stratification are based on the noninstitutionalized household population of Massachusetts for the following parameters: presence of children in the household, number of adults in the household, highest level of education attained by a member of the household, homeownership, population density based on the population per square mile in each zip code (divided into quintiles), Massachusetts HSR, household home access to the internet, and household composition.

**Table 18: Household-Level Weighting Benchmarks and Weights**

Parameter	Value Label	Benchmark (%)	Unweighted Sample (%)	Weighted Sample (%)
Presence of children in household	No	72.3%	83.0%	74.0%
	Yes	27.7%	17.0%	26.0%
Number of adults in household	1	33.8%	35.5%	33.0%
	2	49.4%	48.5%	50.0%
	3	10.9%	10.3%	10.9%
	4 or more	5.9%	5.8%	6.0%
Population density in zip code	Quintile 1	20.2%	18.8%	20.4%
	Quintile 2	20.2%	20.4%	20.2%
	Quintile 3	20.1%	20.6%	19.8%
	Quintile 4	20.5%	21.4%	20.6%
	Quintile 5	19.1%	18.9%	19.1%
Region	Western MA	12.0%	13.5%	11.9%
	Central MA	11.6%	11.1%	11.7%

<sup>14</sup> Steven Ruggles, Sarah Flood, Sophia Foster, Ronald Goeken, Jose Pacas, Megan Schouweiler and Matthew Sobek. IPUMS USA: Version 11.0 [dataset]. Minneapolis, MN: IPUMS, 2021. <https://doi.org/10.18128/D010.V11.0>.

<sup>15</sup> <https://claritas.com/>

	Northeast MA	20.7%	20.7%	21.0%
	Metro West	9.8%	11.8%	9.7%
	Metro Boston	23.9%	24.2%	23.8%
	Metro South	12.2%	9.9%	12.1%
	Southcoast	5.4%	4.4%	5.2%
	Cape and Islands	4.4%	4.4%	4.6%
Homeownership	Owns home	62.3%	69.1%	63.5%
	Does not own home	37.7%	30.9%	36.5%
Highest Household Education	Less than high school	4.2%	2.6%	4.0%
	High school graduate	15.9%	10.3%	15.2%
	Some college	20.9%	11.7%	20.3%
	College+	58.9%	75.4%	60.5%
Home Internet Access	No Access	4.1%	1.0%	3.3%
	Access	95.9%	99.0%	96.7%
Household Composition	1 Adult, No Children	29.3%	34.5%	30.0%
	2 Adults, No Children	31.6%	40.1%	32.7%
	3 or more Adults, No Children	11.4%	8.3%	11.3%
	1 Adult, Children	4.5%	1.0%	3.0%
	2 Adults, Children	17.7%	8.3%	17.3%
	3 or more Adults, Children	5.4%	7.8%	5.6%

### Target Person-Level Base Weights

The target person-level base weight was calculated by adjusting the final household-level weight, after post-stratification raking, to account for the different probabilities of selection for the target in the household.

The only differential probability of selection is based on the number of people in the household. The probability of selection as the target within a household is inversely related to the number of people in the household.

The final person-level base weight,  $BWP$ , can be expressed as  $BWP = WHH \times P$  where  $WHH$  is the final household weight and  $P$  is the number of people in the household, capped at 5.

$P$  was capped at 5 to control for very high weights at this stage of the weighting.

### Target Person-Level Post-Stratification

The benchmarks used for post-stratification for the target person in the household were based on the noninstitutionalized population of Massachusetts for the following parameters: age by sex, Massachusetts HSR, education for targets 18 and over and parental education for targets under 18, race/ethnicity, employment status for targets 18 and over, marital status for targets 18 and over, presence of target's parents in household for targets under 18, population density based on the population per square mile in each zip code (divided into quintiles), nativity status, and homeownership status by race/ethnicity.

The person-level benchmarks for education, employment, and marital status were different depending on whether the target was under or over 18. For adults, the benchmark was the target's status and was based on 2023 ACS estimates. For targets under 18, education was the highest education level attained by the adult(s) in the target's household and was based on the combined 2022–2023 National Survey of Children's Health (NSCH).<sup>16</sup> For employment and marital status, targets under 18 were included in a single group of 0–17-year-olds for the benchmarks.

The presence of target's parents for targets under 18 benchmark were: target's age 18 or over, target's age 0–5 with 0 parents present, target's age 0–5 with 1 parent present, target's age 0–5 with 2 parents present, target's age 6–11 with 0 parents present, target's age 6–11 with 1 parent present, target's age 6–11 with 2 parents present, target's age 12–17 with 0 parents present, target's age 12–17 with 1 parent present, target's age 12–17 with 2 parents present. It was based on the combined 2021–2022 NSCH since the NSCH data did not yet have an updated estimate for 2022–2023 for this variable.

The population density and Massachusetts Health Region benchmarks were obtained from Claritas. Remaining benchmarks were based on 2023 ACS estimates.

**Table 19: Target Person-Level Weighting Benchmarks and Weights**

Parameter	Value Label	Benchmark (%)	Unweighted Sample (%)	Weighted Sample (%)
Gender by Age	Male 0-5	3.1%	1.3%	3.1%
	Male 6-11	3.3%	1.7%	3.1%
	Male 12-17	3.7%	1.6%	3.5%
	Male 18-29	7.6%	4.8%	7.3%
	Male 30-49	13.2%	9.7%	13.2%
	Male 50-64	9.8%	11.2%	9.8%
	Male 65+	8.2%	15.5%	8.6%

<sup>16</sup> National Survey of Children's Health, Health Resources and Services Administration, Maternal and Child Health Bureau. <https://mchb.hrsa.gov/data/national-surveys>

	Female 0-5	2.9%	1.3%	2.8%
	Female 6-11	3.2%	1.4%	3.1%
	Female 12-17	3.5%	1.5%	3.1%
	Female 18-29	7.3%	5.5%	7.4%
	Female 30-49	13.5%	12.3%	13.7%
	Female 50-64	10.4%	13.8%	10.7%
	Female 65+	10.2%	18.4%	10.5%
<b>Race/ ethnicity</b>	White, non-Hispanic	66.1%	77.8%	67.7%
	Black, non-Hispanic	6.5%	4.6%	6.0%
	Other, non-Hispanic	6.6%	2.6%	6.1%
	Hispanic	13.6%	9.5%	13.0%
	Asian, non-Hispanic	7.2%	5.6%	7.3%
<b>Nativity status</b>	Born in the U.S.	78.7%	84.8%	79.5%
	Not born in the U.S.	21.1%	15.2%	20.5%
<b>Education</b>	Age 18+, Less than high school	6.9%	3.1%	6.5%
	Age 18+, High school graduate	18.9%	13.1%	18.9%
	Age 18+, Some college	17.3%	20.5%	17.4%
	Age 18+, College+	37.2%	54.4%	38.5%
	Age 0-17, Highest Education of Parent - Less than high school	1.1%	0.3%	0.8%
	Age 0-17, Highest Education of Parent - High school graduate	3.2%	0.8%	2.7%
	Age 0-17, Highest Education of Parent - Some college	2.3%	0.7%	2.1%
	Age 0-17, Highest Education of Parent - College+	13.1%	7.1%	13.1%
	Age 0-17	19.7%	8.9%	18.7%
	Married	40.3%	44.6%	41.4%
<b>Marital Status</b>	Not Married	40.0%	46.5%	39.9%
	Age 0-17	19.7%	8.9%	18.7%
<b>Employment status</b>	Employed	53.5%	52.2%	53.9%
	Not Employed	26.7%	38.8%	27.4%
	Age 18+	80.3%	91.1%	81.3%

<b>Presence of parents</b>	Age 0-5, 0 Parents	0.2%	0.1%	0.2%
	Age 0-5, 1 Parent	0.9%	0.4%	0.8%
	Age 0-5, 2 Parents	5.0%	2.2%	4.9%
	Age 6-11, 0 Parents	0.3%	0.0%	0.1%
	Age 6-11, 1 Parent	1.4%	0.7%	1.4%
	Age 6-11, 2 Parents	4.7%	2.5%	4.7%
	Age 12-17, 0 Parents	0.2%	0.1%	0.2%
	Age 12-17, 1 Parent	1.9%	1.2%	1.7%
	Age 12-17, 2 Parents	5.0%	1.9%	4.7%
<b>Region</b>	Western MA	11.6%	13.5%	11.4%
	Central MA	11.6%	11.1%	11.7%
	Northeast MA	21.5%	20.7%	21.7%
	Metro West	10.2%	11.8%	10.5%
	Metro Boston	23.5%	24.2%	23.4%
	Metro South	12.6%	9.9%	12.6%
	Southcoast	5.1%	4.4%	5.0%
	Cape and Islands	3.8%	4.4%	3.9%
<b>Population density in zip code</b>	Quintile 1	20.0%	20.0%	19.8%
	Quintile 2	20.2%	20.4%	20.5%
	Quintile 3	20.1%	19.6%	20.5%
	Quintile 4	19.8%	19.6%	19.6%
	Quintile 5	19.9%	20.3%	19.7%
<b>Homeownership by Race/Ethnicity</b>	Own, White, non-Hisp	50.6%	58.1%	51.7%
	Own, Black, non-Hisp	2.9%	2.1%	2.6%
	Own, Other, non-Hisp	3.5%	1.5%	3.4%
	Own, Hispanic	5.4%	3.9%	5.2%
	Own, Asian, non-Hisp	4.8%	3.6%	4.9%
	Rent, White, non-Hisp	15.6%	19.7%	16.0%
	Rent, Black, non-Hisp	3.6%	2.5%	3.3%
	Rent, Other, non-Hisp	3.1%	1.1%	2.6%
	Rent, Hispanic	8.1%	5.6%	7.8%
	Rent, Asian, non-Hisp	2.4%	2.0%	2.4%

### Weight Trimming

To minimize the potential impact of very large weights on survey estimates, the weights were trimmed at 2nd and 98th percentiles, then adjusted so that the final weights sum to the population of Massachusetts.

## References

- American Association for Public Opinion Research (2008). *Standard Definitions: Final Dispositions of Case Codes and Outcome Rates for Surveys*, 5<sup>th</sup> edition. Lenexa, Kansas: AAPOR.
- Berzofsky, M.E., Scruggs, C.B., Lu, B., Speizer, H., and Sahr, T. (2019). "Improving representation in telephone-based health care access surveys requires purposeful efforts to include prepaid cell phone users." *Journal of Clinical Epidemiology*. Vol 1098, 143-144.
- Brick, J.M., et al. (2002). "Estimating residency rates for undetermined telephone numbers." *Public Opinion Quarterly*, 66, 18-39.
- Commonwealth of Massachusetts, Department of Economic Research. *Unemployment Rates in Massachusetts*. <https://www.mass.gov/info-details/unemployment-rates-in-massachusetts>
- Deming, W. E. (1943). *The Statistical Adjustment of Data*. New York: J. Wiley and Sons.
- Dutwin, D. (2014). "Cell Phone Sampling." A webinar of the American Association for Public Opinion Research, January 22, 2014. Available at [www.aapor.org](http://www.aapor.org).
- Dutwin, D. (2012). "Cell Phone Sampling." Short course presented at the national conference of the American Association for Public Opinion Research, Boston, MA.
- Dutwin, D. Sherr, S., Langdale, K., and Long, S. (2017). *Findings from the 2017 Massachusetts Health Insurance Survey Methodology Report*, Center for Health Information and Analysis. December 2017.
- Fu, J., Hughes, T., Park, R., and Engle-Bauer, M. (2023, May). "Impacts of Transition Statements in Survey Questions on Survey Break-off: Evidence from a Survey Experiment." Presented at the AAPOR 2023 Conference, Philadelphia, PA.
- Goyle, A., Sherr, S., Park, R., and Loveridge, C. (2022, May). "Have Your Cake and Eat it Too: The Utility of a Prepaid Sample Component in Bolstering the Representativeness of an Address-Based Sample Design." Presented at the AAPOR 2022 Conference, Chicago, IL.
- Groves, R.M. (2006). "Nonresponse rates and nonresponse bias in household surveys." *Public Opinion Quarterly* 70, 5, 646-75.
- Kalsbeek, W., and Agans, R. (2008). "Sampling and weighting in household telephone surveys." In *Advances in Telephone Survey Methodology* (Lepkowski, J., Tucker, C., Brick, J., de Leeuw, E., Japac, L., Lavrakas, P., Link, M., and Sangster, R., eds). Hoboken, NJ: J. Wiley and Sons.
- Keeter, S., et al. (2000). "Consequences of reducing nonresponse in a large national telephone survey." *Public Opinion Quarterly*, 64, 2, 125-48.
- Keeter, S., et al., (2006). "Gauging the impact of growing nonresponse on estimates from a national RDD telephone survey." *Public Opinion Quarterly*, 70, 5, 759-779.
- Kish, L. (1992). "Weighting for Unequal Pi." *Journal of Official Statistics*, Vol. 8, No. 2, 1992, pp. 183-200.



- Lavrakas P. J., Benson G., Blumberg S., Buskirk T., Cervantes I. F., Christian L., Dutwin D., Fahimi M., Fienberg H., Guterbock T., Keeter S., Kelly J., Kennedy C., Peytchev A., Piekarski L., and Shuttles C. (2017). "Report From the AAPOR Task Force on: The Future of U.S. General Population Telephone Survey Research."
- Link, Michael W. and Burks, A. T. (2013). "Leveraging auxiliary data, differential incentives, and survey mode to target hard-to-reach groups in an address-based sample design." *Public Opinion Quarterly* 77, 3, 696-713.
- McGeeney, K. 2015. "Appending a Prepaid Phone Flag to the Cell Phone Sample." *Survey Practice*, 8 (4). <https://doi.org/10.29115/SP-2015-0021>.
- Myers, T.A. (2011) "Goodbye, Listwise Deletion: Presenting Hot Deck Imputation as an Easy and Effective Tool for Handling Missing Data." *Communication Methods and Measures*, 5, 297-310.
- Modeled estimates (with standard errors) of the percent distribution of household telephone status for adults aged 18 and over, by state: United States, 2017, National Health Interview Survey Early Release Program
- Modeled estimates (with standard errors) of the percent distribution of household telephone status for children under age 18, by state: United States, 2017, National Health Interview Survey Early Release Program
- Rapoport, R., Sherr, S., and Dutwin, D. (2012). "Does ethnically stratified address-based sample result in both ethnic and class diversity; case studies in Oregon and Houston." Presented at the annual conference of the American Association of Public Opinion Research in Orlando, FL; May 2012.
- Roman, A.M. (2007). "Survey of Insurance Status 2007, Methodological Report." Report to the Massachusetts Division of Health Care Finance and Policy.
- Ruggles, S., Genadek, K., Goeken, R., Grover, J., and Sobek, M., Integrated Public Use Microdata Series: Version 7.0 [dataset]. Minneapolis: University of Minnesota, 2017. <https://doi.org/10.18128/D010.V7.0>.
- Triplett, T., Long, S.K., Dutwin, D., and Sherr, S. (2011). "Massachusetts Health Insurance Survey Methodology Report, Survey Years 2008, 2009, 2010, 2011."

## Deliverables

SSRS delivered to the research team at CHIA:

- Interim dataset in SAS format, on April 30, 2025.
- Final dataset in SAS format, including weights, on August 8, 2025.
- Final methodology report, on September 30, 2025.

## About SSRS

SSRS is a full-service survey and market research firm managed by a core of dedicated professionals with advanced degrees in the social sciences. Service offerings include SSRS Opinion Panel, SSRS Opinion Panel Omnibus Survey, and other Online Solutions, and SSRS Text Message Panel, as well as custom research programs – all driven by a central commitment to methodological rigor. The SSRS team is renowned for its multimodal approach, as well as its sophisticated and proprietary sample designs. Typical projects for the company include complex strategic, tactical, and public opinion initiatives in the U.S. and in more than 40 countries worldwide. SSRS is research, refined. Visit [www.ssrs.com](http://www.ssrs.com) for more information.

**Forward thinking  
research.**

## Appendix A : Imputation of analytic variables

Missing data are ubiquitous throughout social science research and can be found in almost all large survey datasets. Replacing the missing values with plausible substitutes (imputation) occurred for survey data in the United States as early as the 1930s. A wide variety of techniques have been developed since that time. Hot deck imputation has emerged as a general and widely used technique for analysis in the presence of missing data.

Hot deck imputation sorts data by user-entered variables and takes data from the “nearest neighbor” and imputes it into a missing case. This procedure can then produce a series of more “complete” datasets which can then be used for analysis.

The hot deck imputation of analytic variables was performed using the `hotdeck()` function from the VIM package (v 6.2.2)<sup>17</sup> in R (v 4.3.0). Table A.1 provides the list of variables for which we imputed values for missing data. Because of the number of variables to be imputed, imputation was done in multiple batches, as outlined in Table A.2. Variables were limited and constrained where necessary to avoid contradictory imputed values (for example, imputed age groups were reconciled with imputed single years of age). For the sake of consistency, the imputation procedures for the variables used in weighting followed similar guidelines as in prior waves of this study.

**Table A.1: Imputation of Analytic Variables**

Question/Variable	Missing	Total Responses	Percent Missing
Target had health insurance with unmet need	1	1098	0.1%
SOGI_sex_at_birth	56	5365	1.0%
Target's age range	34	5365	0.6%
Target's immediate family's highest completed level of education	20	5365	0.4%
Zip code	9	5365	0.2%
Target's race/ethnicity	124	5365	2.3%
Target's gender identity	66	5365	1.2%
Target is transgender	478	5301	9.0%
Target's sexual orientation	249	4887	5.1%
Target's citizenship status	15	5365	0.3%
Family income as percentage of Federal poverty level (four categories)	516	5365	9.6%
Family income as percentage of Federal poverty level (nine categories)	516	5365	9.6%

<sup>17</sup> Kowarik A, Templ M (2016). “Imputation with the R Package VIM.” *Journal of Statistical Software*, 74(7), 1–16. [doi:10.18637/jss.v074.i07](https://doi.org/10.18637/jss.v074.i07).

Target uses the internet at least occasionally	3	799	0.4%
Any member of the HH has access to the internet at home	3	799	0.4%
Target's insurance status for all of the past 12 months	63	5365	1.2%
Four category insurance status	18	5365	0.3%
Target was uninsured at any point in the past 12 months	38	5365	0.7%
Target was insured at any point in the past 12 months	38	5365	0.7%
Target was insured for less than 6 of the past 12 months	38	5365	0.7%
Target was insured for 6 or more of the past 12 months	38	5365	0.7%
Target was insured at the time of the survey and for the past 2 years	294	5365	5.5%
Target was insured at the time of the survey and for the past 5 years	294	5365	5.5%
Target was uninsured at any point in the past 12 months	38	5365	0.7%
Target was uninsured for less than 6 of the past 12 months	38	5365	0.7%
Target was uninsured for 6 or more of the past 12 months	38	5365	0.7%
Target has been uninsured for the past 12 months or more	38	5365	0.7%
Target was uninsured at the time of the survey but was insured at some point in the past 12 months	38	5365	0.7%
Target's health insurance covers mental health	1478	5302	27.9%
Target's health insurance covers alcohol or substance abuse	2618	5302	49.4%
Any of Target's immediate family went without coverage at any time in the past 12 months	12	3139	0.4%
Target transitioned from being uninsured to being insured	152	5365	2.8%
Target transitioned from one type of insurance to another	152	5365	2.8%
Target was uninsured because the cost of insurance is too high	4	63	6.3%
Target's health insurance has a deductible	313	3567	8.8%
Amount of Target's annual deductible	533	2691	19.8%
Target/Target's parent(s) have heard of Health Connector	22	5365	0.4%
Extent to which Target/Target's parent(s) have heard about Health Connector	8	3646	0.2%
Target's health status	4	5365	0.1%
Target's activities are limited due to health concerns	7	5365	0.1%
Target's health/disability status	7	5365	0.1%
Target has a chronic health condition	14	5365	0.3%
Target's self-assessed mental health status	5	5326	0.1%
Target had a usual source of care other than the ER	23	5365	0.4%
Target has a regular primary care provider	12	5365	0.2%
Target received care from a general doctor or specialist in the past 12 months	6	5365	0.1%
Target received care from a general doctor in the past 12 months	30	5365	0.6%

Target received care from a nurse practitioner or physician assistant in the past 12 months	70	5365	1.3%
Target visited a doctor, nurse practitioner or physician assistant for preventive care in the past 12 months	13	4676	0.3%
Target received care from a specialist in the past 12 months	40	5365	0.7%
Target received care from a mental health professional in the past 12 months	6	5326	0.1%
Target saw a dentist or hygienist in the past 12 months	6	5365	0.1%
Target saw an eye doctor in the past 12 months	5	5365	0.1%
Target took prescription medications in the past 12 months	5	5365	0.1%
Target has received care for an alcohol or substance abuse disorder in the past 12 months	4	5053	0.1%
Where Target received most recent care for mh/sub	7	1251	0.6%
Target visited the ER in the past 12 months	4	5365	0.1%
Target visited the ER more than once in the past 12 months	4	5365	0.1%
Target received care from an urgent care clinic in the past 12 months	65	5365	1.2%
Target visited the ER for a non-emergency condition	11	1203	0.9%
Target visited the ER because they were unable to get an appointment with their doctor/clinic	31	363	8.5%
Target visited the ER because they needed care after normal hours at their doctor's office/clinic	11	363	3.0%
Target visited the ER because they owed money to their doctor's office/clinic	26	363	7.2%
Target visited the ER because the ER was more convenient	23	363	6.3%
Target visited the ER because the previous provider closed	26	363	7.2%
Target's most recent emergency room visit was for a physical health reason	10	1203	0.8%
Target's most recent emergency room visit was for a mental health reason	10	1203	0.8%
Target's most recent emergency room visit was for a substance abuse disorder	10	1203	0.8%
Target did not fill a prescription for medication because of cost in the past 12 months	9	5365	0.2%
Target did not get a routine check-up in the past 12 months	10	5365	0.2%
Target did not get needed doctor care because of cost in the past 12 months	9	5365	0.2%
Target did not get needed care from a nurse practitioner, physician assistant, or midwife because of cost in the past 12 months	15	5365	0.3%

Target did not get needed specialist care because of cost in the past 12 months	12	5365	0.2%
Target did not get needed mental health care or counseling because of cost in the past 12 months	42	5326	0.8%
Target did not get needed dental care because of cost in the past 12 months	16	5365	0.3%
Target did not get needed alcohol or substance abuse care or treatment because of cost in the past 12 months	21	5053	0.4%
Target did not get needed vision care because of cost in the past 12 months	11	5365	0.2%
Target did not get needed medical equipment because of cost in the past 12 months	17	5365	0.3%
Any of Target's immediate family members are in fair or poor health	11	2918	0.4%
Any of Target's immediate family limited because of physical, mental, or emotional problems	11	2582	0.4%
Any of Target's immediate family have a chronic health condition	7	4653	0.2%
Target did any work for pay during the previous week	3	2236	0.1%
Target worked for pay at a job or business the previous week	3	4949	0.1%
Primary reason Target did not work the previous week	4	2180	0.2%
Target or their immediate family worries that food will run out before they can afford to buy more	6	5365	0.1%
The food that the Target or their immediate family buys doesn't last long enough	11	5365	0.2%
Target or their immediate family have been hungry but couldn't afford to buy food	8	5365	0.1%
Target or their immediate family got emergency food from a church, food pantry, food bank, or other community program	9	5365	0.2%
How often Target or their immediate family worries about having a steady place to live	3	5365	0.1%
Target or their immediate family has had problems paying rent/mortgage over the past 12 months	8	5365	0.1%
Target or their immediate family has had problems paying for utilities over the past 12 months	8	5365	0.1%
Target or their immediate family has had problems paying credit card or other bills over the past 12 months	10	5365	0.2%
Target or their immediate family has had problems paying for health insurance over the past 12 months	10	5365	0.2%
Target or their immediate family has had problems paying for prescriptions over the past 12 months	9	5365	0.2%

Target has difficulty finding or keeping job in last 12 months	24	5365	0.4%
Target was unable to get an appointment with a doctor due to problems with their insurance	1	5365	0.0%
Target was unable to get an appointment with a doctor because they weren't accepting new patients	5	5365	0.1%
Target was unable to get an appointment with a doctor as soon as they thought one was needed	7	5365	0.1%
Target was unable to get an appointment with a specialist as soon as they thought one was needed	10	5365	0.2%
Target was unable to get to an appointment due to transportation issues	3	5365	0.1%
Target has had problems getting an appointment for primary care	3	1599	0.2%
Target has had problems getting an appointment for mental health	56	1599	3.5%
Target has had problems getting an appointment for substance use	58	1526	3.8%
Target has had problems getting a specialist appointment for mental health	40	1349	3.0%
Target has had problems getting a specialist appointment for substance use	40	1294	3.1%
Target has had problems getting a specialist appointment for other type of care	2	1349	0.1%
Target has had problems using health insurance at doctor for primary care	9	656	1.4%
Target has had problems using health insurance at doctor for mental health	13	656	2.0%
Target has had problems using health insurance at doctor for substance use	17	631	2.7%
Target has had problems using health insurance at doctor for other type of care	7	656	1.1%
Target has had problems as new patient at doctor for primary care	11	1041	1.1%
Target has had problems as new patient at doctor for mental health	23	1041	2.2%
Target has had problems as new patient at doctor for substance use	26	996	2.6%
Target has had problems as new patient at doctor for other type of care	22	1041	2.1%
Target has had problems with transportation to healthcare for primary care	6	207	2.9%



Target has had problems with transportation to healthcare for mental health	6	207	2.9%
Target has had problems with transportation to healthcare for substance use	9	197	4.6%
Target has had problems with transportation to healthcare for other type of care	6	207	2.9%
Target has had problems with limit on number of visits	5	5365	0.1%
Target has had problems with limit on number of visits for other type of care	2	103	1.9%
Target has had problems with office permanently closed	8	5365	0.1%
Target has had problems getting prescription because pharmacy permanently closed	2	5365	0.0%
Target went without care because the care wasn't covered by their health plan	131	1051	12.5%
Target went without care because the copay or coinsurance was too high	131	1051	12.5%
Target went without care because it had to be paid as part of their deductible	131	1051	12.5%
Target went without care because they weren't sure if the care was covered	131	1051	12.5%
Target went without care because they weren't sure of the care's cost	131	1051	12.5%
Target went without care for another reason	131	1051	12.5%
Target did not get needed mental health care in last 12 months	11	5320	0.2%
Target did not get needed alcohol or substance abuse care in last 12 months	22	5059	0.4%
Target and immediate family's out of pocket spending was \$1,000 or more	264	5197	5.1%
Target and immediate family's out of pocket spending was \$3,000 or more	264	5197	5.1%
Target or immediate family had problems paying ER bills	3	5365	0.1%
Target or immediate family had problems paying ER bills	9	624	1.4%
Target or immediate family had problems paying on-going treatment bills	9	624	1.4%
Target or immediate family had problems paying medical test or surgical procedure bills	13	624	2.1%
Target or immediate family had problems paying bills from the birth of a child	14	624	2.2%
Target or immediate family had problems paying dental bills	9	624	1.4%
Target or immediate family had problems paying prescription bills	9	624	1.4%

Target or immediate family had problems paying Mental or behavioral health bills	12	624	1.9%
Target or immediate family had problems paying bills for something else	14	624	2.2%
Any of Target's immediate family did not fill a prescription for medication because of cost in the past 12 months	3	3026	0.1%
Any of Target's immediate family did not get needed doctor care because of cost in the past 12 months	5	3075	0.2%
Any of Target's immediate family did not get needed nurse practitioner, physician assistant, or midwife care because of cost in the past 12 months	8	3126	0.3%
Any of Target's immediate family did not get needed specialist care because of cost in the past 12 months	6	3034	0.2%
Any of Target's immediate family did not get needed mental health care or counseling because of cost in the past 12 months	19	3020	0.6%
Any of Target's immediate family did not get needed dental care because of cost in the past 12 months	5	2942	0.2%
Any of Target's immediate family did not get needed alcohol or substance abuse care or treatment because of cost in the past 12 months	10	2875	0.3%
Any of Target's immediate family did not get needed vision care because of cost in the past 12 months	6	3072	0.2%
Any of Target's immediate family did not get needed medical equipment because of cost in the past 12 months	8	3128	0.3%
Target or immediate family has medical bills being paid over time	13	5365	0.2%
Medical bills paid over time are under \$2,000	4	617	0.6%
Medical bills paid over time are between \$2,000 and \$8,000	4	617	0.6%
Medical bills paid over time are over \$8,000	4	617	0.6%
Medical bills paid over time are from within the last year	4	617	0.6%
Medical bills paid over time are from 1 to 5 years ago	4	617	0.6%
Medical bills paid over time are from over 5 years ago	4	617	0.6%
Medical bills incurred while insured are for care not covered by their health plan	7	590	1.2%
Medical bills incurred while insured are for co-payments or co-insurance for care covered by their health plan	12	590	2.0%
Medical bills incurred while insured are for care that was part of their deductible	12	590	2.0%
Target paid entire cost of mental health appointment	4	1251	0.3%
Entire cost of mental health appointment was not paid out-of-pocket because insurance covered some or all of the cost	1	1025	0.1%

Entire cost of mental health appointment was not paid out-of-pocket because it was free	1	1025	0.1%
Entire cost of mental health appointment was not paid out-of-pocket because discounted or sliding scale	1	1025	0.1%
Entire cost of mental health appointment was not paid out-of-pocket because a family member paid	1	1025	0.1%
Entire cost of mental health appointment was not paid out-of-pocket for another reason	1	1025	0.1%
Went to free or sliding scale clinic for their most recent appointment because provider does not accept any insurance	3	227	1.3%
Went to free or sliding scale clinic for their most recent appointment because insurance plan not accepted	3	227	1.3%
Went to free or sliding scale clinic for their most recent appointment because not sure how to find provider who accepts insurance	6	265	2.3%
Went to free or sliding scale clinic for their most recent appointment because too much hassle to use insurance	6	265	2.3%
Went to free or sliding scale clinic for their most recent appointment because unable to get appointment as soon as needed	6	265	2.3%
Went to free or sliding scale clinic for their most recent appointment because problem using insurance	6	265	2.3%
Went to free or sliding scale clinic for their most recent appointment because apps don't accept insurance	6	265	2.3%
Went to free or sliding scale clinic for their most recent appointment for another reason	6	265	2.3%
Respondent has a working cell phone	1	5365	0.0%
Respondent or another adult in their HH uses a prepaid cell phone	12	4685	0.3%
Number of adults using prepaid cell phones in the household	168	1208	13.9%
Target's level of English proficiency	4	993	0.4%
Target and immediate family's out of pocket spending was more than 5% of income	245	4723	5.2%
Target and immediate family's out of pocket spending was more than 10% of income	44	936	4.7%
Target or Target's parents have HAS to pay for medical expenses	58	5302	1.1%
Target or Target's parents have HRA to pay for medical expenses	105	5302	2.0%
Target or Target's parents have FSA to pay for medical expenses	84	5302	1.6%

Target or Target's parents have other type of account to pay for medical expenses	79	5302	1.5%
How long has it been since Target last saw regular pcp for routine check-up	10	5365	0.2%
Target has had problems with limit on number of visits for primary care	2	103	1.9%
Target has had problems with limit on number of visits for substance use	2	96	2.1%
Target has had problems with limit on number of visits for mental health	3	103	2.9%
Target has had problems with office permanently closed for primary care	5	255	2.0%
Target has had problems with office permanently closed for mental health	13	255	5.1%
Target has had problems with office permanently closed for substance use	14	247	5.7%
Target has had problems with office permanently closed for other type of care	9	255	3.5%
Target has had problems getting prescription because pharmacy permanently closed for primary care	1	43	2.3%
Target has had problems getting prescription because pharmacy permanently closed for mental health	5	43	11.6%
Target has had problems getting prescription because pharmacy permanently closed for substance use	5	39	12.8%
Target has had problems getting prescription because pharmacy permanently closed for other type of care	4	43	9.3%
Target has had problems obtaining information from health plan about coverage	11	5365	0.2%
Target has had problems obtaining information from provider about care	10	5365	0.2%
Target has had problems resolving a bill with health plan	7	5365	0.1%
Target has had problems resolving a bill with provider	11	5365	0.2%
Target has had problems obtaining authorization from health plan for needed care	12	5365	0.2%
Target or immediate family had problems paying bills from ambulance or other transport	11	624	1.8%
Target had medical bills paid overtime due to emergency care	12	617	1.9%
Target had medical bills paid overtime due to chronic condition treatment	10	617	1.6%

Target had medical bills paid overtime due to test or surgical procedure	7	617	1.1%
Target had medical bills paid overtime due to birth of a child	13	617	2.1%
Target had medical bills paid overtime due to dental care	13	617	2.1%
Target had medical bills paid overtime due to prescription drugs	16	617	2.6%
Target had medical bills paid overtime due to mental/behavioral health care	13	617	2.1%
Target had medical bills paid overtime due to ambulance or transportation	15	617	2.4%
Target had medical bills paid overtime due to other type of service	10	617	1.6%
Target is unable to pay medical bills	11	5365	0.2%
Target have cut back or used savings to pay medical bills in the past 12 months	2	915	0.2%
Target have borrowed or used credit cards to pay medical bills in the past 12 months	3	915	0.3%
Target have contacted by collections about medical bills in the past 12 months	6	915	0.7%
Target have declared bankruptcy because of medical bills in the past 12 months	6	915	0.7%
What language would Target feel most comfortable speaking with Target's doctor or nurse	6	993	0.6%
In which language would Target feel most comfortable reading medical or health care instructions	5	993	0.5%

**Table A.2: Variables used in each batch of imputations**

Sort Variable Description	Imputed Variable Description
Sampling strata Language of interview	Target's sex assigned at birth
Sampling strata Language of interview Target's sex (imputed)	Target's age
Sampling strata Target's sex (imputed) Target's age (imputed)	Education level of most educated family member

Sampling strata	Target's zip code
Target's sex (imputed)	
Target's age (imputed)	
Highest family education (imputed)	
Zip code quartile (percent white)	Target's race/ethnicity
Target's sex (imputed)	
Target's age (imputed)	
Highest family education (imputed)	
Target's sex (imputed)	Target's gender identity
Target's race/ethnicity (imputed)	Target's transgender status
Target's age (imputed)	Target's sexual orientation
Highest family education (imputed)	
Zip code quartile (percent college or above)	Target's education
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Zip code quartile (percent native-born)	Target's nativity status
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Zip code quartile (percent native-born)	Target's citizenship status
Target's nativity status (imputed)	
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Zip code quartile (percent renters)	Household Tenure
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's nativity status (imputed)	
Highest family education (imputed)	
Zip code quartile (percent employed)	Target's employment status
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Target's education (imputed) for adults	

Zip code quartile (percent below poverty line)	Family income relative to poverty
Zip code quartile (median household income)	
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Household Tenure (imputed)	
Highest family education (imputed)	
Zip code quartile (percent below poverty line)	Family income relative to poverty (detailed)
Zip code quartile (median house value)	
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Household Tenure (imputed)	
Family income relative to poverty (imputed)	
Zip code quartile (percent household internet access)	Target's internet access measures
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Household Tenure (imputed)	
Family income relative to poverty (imputed)	
Zip code quartile (percent uninsured)	Target's health insurance coverage at the time of the survey
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Any workers in family	
Household Tenure (imputed)	
Family income relative to poverty (imputed)	
Zip code quartile (percent uninsured)	Target's health insurance coverage (four-category)
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Any workers in family	
Household Tenure (imputed)	
Family income relative to poverty (imputed)	
Target's health insurance coverage at the time of the survey (imputed)	
Zip code quartile (percent uninsured)	Measures of Target's health insurance coverage over the last 12 months
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Family income relative to poverty (imputed)	
	Mental health/substance use coverage



Target's health insurance coverage at the time of the survey (imputed)	
Zip code quartile (percent uninsured)	Target's other health insurance coverage measures: transitions, reasons for uninsurance; characteristics of insurance; type of insurance
Target's age (imputed)	
Target's sex (imputed)	
Target's race/ethnicity (imputed)	
Target's health insurance coverage at the time of the survey (imputed)	
Family income relative to poverty (imputed)	
Target's sex (imputed)	Health Connector Awareness
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed) for children	
Target's education (imputed) for adults	
Target's type of insurance (imputed)	
Family income relative to poverty (imputed)	
Target's sex (imputed)	Target's health, mental health, disability, chronic condition measures
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Family income relative to poverty (imputed)	
Target's sex (imputed)	Target's health care access and use measures
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed) for children	
Target's education (imputed) for adults	
Target's health & disability status (imputed)	
Family income relative to poverty (imputed)	
Target's sex (imputed)	Target's unmet need (due to cost) measures
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's health & disability status (imputed)	
Family income relative to poverty (imputed)	
Highest family education (imputed) for children	
Target's education (imputed) for adults	
Target's sex (imputed)	Target's other ER measures
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's health & disability status (imputed)	

ER visit status (imputed)	
Target's sex (imputed)	Family health & disability status
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's health & disability status (imputed)	
Number of family members	
Target's sex (imputed)	Target's SDOH
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's health & disability status (imputed)	
Family income relative to poverty (imputed)	
Highest family education (imputed)	
Zip code quartile (percent below poverty line)	Family SDOH Family medical bills, problem paying, unmet need, and OOP spending measures Target's medical bills paid off over time
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Family health & disability status (imputed)	
Family income relative to poverty (imputed)	
Highest family education (imputed)	
Zip code quartile (percent below poverty line)	Target's problems getting care and reasons for going without care
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's health & disability status (imputed)	
Family income relative to poverty (imputed)	
Highest family education (imputed) for children	
Target's education (imputed) for adults	Timing of target medical bills being paid off over time; reason for medical bills being paid off over time; amount of medical bills
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Bills paid off over time (imputed)	
Family health & disability status (imputed)	Cost-sharing at last BH visit; reasons for cost-sharing at last BH visit
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's type of insurance (imputed)	
Family income relative to poverty (imputed)	

Target's sex (imputed)	Respondent's cell phone status
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Household's internet access (imputed)	
Family income relative to poverty (imputed)	
Target's sex (imputed)	Household cell phone status
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Number of family members	
Family income relative to poverty (imputed)	
Respondent's cell phone status (imputed)	
Target's age (imputed)	Any prepaid cell phone in household
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Respondent's cell phone status (imputed)	
Household cell phone status (imputed)	
Family income relative to poverty (imputed)	
Target's race/ethnicity (imputed)	Number of prepaid cell phones in household
Highest family education (imputed)	
Number of family members	
Any adult 18-64 in HH (imputed)	
Family income relative to poverty (imputed)	
Any prepaid cell phone in household (imputed)	
Target's sex (imputed)	Language barriers for Target
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed) for children	
Target's education (imputed) for adults	
Family income relative to poverty (imputed)	
Survey language	
Target's sex (imputed)	Percentage of income used for out-of-pocket spending on health care
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Highest family education (imputed)	
Family income relative to poverty (imputed)	
Family health & disability status (imputed)	

Target's sex (imputed) Target's age (imputed) Target's race/ethnicity (imputed) Family income relative to poverty (imputed) Target's health insurance coverage at the time of the survey (imputed)	Special health spending account for Target
Target's sex (imputed) Target's age (imputed) Target's race/ethnicity (imputed) Target's health & disability status (imputed) Highest family education (imputed) for children Target's education (imputed) for adults Family income relative to poverty (imputed) Target has regular PCP (imputed)	Time since Target had routine check-up
Target's sex (imputed) Target's age (imputed) Target's race/ethnicity (imputed) Family income relative to poverty (imputed) Target's health & disability status (imputed) Highest family education (imputed) for children Target's education (imputed) for adults Target's problems getting care due to limit (imputed)	Target's problems getting PCP, mental health, or substance abuse care due to limit on number of appointments
Target's sex (imputed) Target's age (imputed) Target's race/ethnicity (imputed) Family income relative to poverty (imputed) Target's health & disability status (imputed) Highest family education (imputed) for children Target's education (imputed) for adults Target's problems getting care due to provider closing (imputed)	Target's problems getting PCP, mental health, substance abuse, or other care due to provider closing
Target's sex (imputed) Target's age (imputed) Target's race/ethnicity (imputed) Family income relative to poverty (imputed) Target's health & disability status (imputed) Highest family education (imputed) for children	Target's problems getting PCP, mental health, substance abuse, or other care due to pharmacy closing; Target's problems with plan or provider administration

Target's education (imputed) for adults	
Target's problems getting care due to pharmacy closing (imputed)	
Target's sex (imputed)	Type of bills paid over time and impacts of medical bills
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Bills paid off over time (imputed)	
Highest family education (imputed)	
Target's health & disability status (imputed)	
Zip code quartile (percent below poverty line)	
Family income relative to poverty (imputed)	Target's preferred language
Target's sex (imputed)	
Target's age (imputed)	
Target's race/ethnicity (imputed)	
Target's level of English proficiency (imputed)	
Family income relative to poverty (imputed)	
Survey language	

## Appendix B : 2025 MHIS Instrument

### SECTION: WEB INTRO

*Ask if: Web R (MODE=Web)*

#### **WEBINTRO0.** (Web)

Welcome to the 2025 Massachusetts Health Insurance Survey. This survey is being conducted by the Center for Health Information and Analysis (CHIA), an agency of the Commonwealth of Massachusetts. SSRS, an independent research firm, is administering the survey for the Commonwealth of Massachusetts. You were randomly selected to participate in this survey to represent many households like yours.

Enter your secure access code in the box below. The code is printed on the invitation you received in the mail. If you agree to participate in this survey, click Start.

*Ask if: Web R (MODE=Web)*

#### **WEBINTRO1.** (Web)

First, we'd like to tell you about the survey. It asks about health, access to health, and health insurance. If you agree to participate, you will be asked to answer this survey online. It takes about 20 minutes. It may take less time for smaller households. {If SAMPTYPE=Cell: We will send you a \$10 gift card to thank you if you complete this survey.}

This survey is voluntary and confidential. You have the right to participate or not participate. Your decision will not impact your health insurance, health care, or relationship with any state or federal agency.

Next, we'd like to tell you about your rights in participating. There are no direct benefits for participating. However, your answers will be combined with those of many others to guide legislators and policymakers to provide high quality, affordable health care for Massachusetts' residents.

Risks to you in taking this survey are minimal. Some questions may make you feel uncomfortable. If that happens, you can skip the question or stop the survey at any time. To the best of our ability your answers will remain confidential, meaning we will not use the information you provide in any way that could identify you. With any online related activity, however, the risk of a breach of confidentiality is possible. Know that we take every precaution to minimize such risk by storing your answers on secure servers in secure facilities.

*Ask if: Web R (MODE=Web)*

#### **WEBINTRO1B.** (Web)

On this page is the contact information of the people responsible for the research. There are also phone numbers to call if you want to withdraw or to contact the Institutional Review Board (IRB).

The IRB is the body that oversees the protection of study participants. There is also a webpage where you can see how we reported on data from prior surveys.

The people responsible for the research are Dr. Zi Zhang and Vanessa Harrell.

Dr. Zi Zhang

Center for Health Information and Analysis

501 Boylston Street

Boston, MA 02116

617-701-8100

[Data.Notice@chiamass.gov](mailto:Data.Notice@chiamass.gov)

Vanessa Harrell

SSRS

Senior Research Director

1 Braxton Way, Suite 125

Glen Mills, PA 19342

[vharrell@ssrs.com](mailto:vharrell@ssrs.com)

For questions about the survey or to withdraw, please call Vanessa Harrell at SSRS. She can be reached at [vharrell@ssrs.com](mailto:vharrell@ssrs.com) or 484-840-4311. After completing the survey, you may withdraw while the survey is open. After all surveys are complete and data have been processed, your information may not be able to be removed.

For questions or concerns before, during or after your participation regarding your rights as a participant, to obtain information or offer input, you may contact the USM Office of Research Integrity and Outreach at 207-780-4517 or email [usmorio@maine.edu](mailto:usmorio@maine.edu). Information for participants can also be found on this [website](#).

For information about this survey, click [here](#).

PROGRAM: DISPLAY SECURE ACCESS CODE AS R TYPES IT IN. GO TO HELP.  
ERROR MESSAGE: IF SECURE ACCESS CODE IS NOT RECOGNIZED, DISPLAY: "This secure access code is not valid. Please reenter. If you are unable to access the survey, please email us at [Data.Notice@chiamass.gov](mailto:Data.Notice@chiamass.gov)."

*Ask if: Web R (MODE=Web)*

**HELP.** (Web)

Move forward or backward in the survey using the Next and Back buttons. Do not use your browser's buttons or menus while taking the survey.

Please answer each question by selecting the item or category that best describes your response. Then click the Next button to go to the next question.

If you are unable to answer a particular question, you may click the Next button to advance to the next question.

To select responses in questions with buttons, click on the button beside your response. If a question asks for a text response, click on the box and begin typing.



If you have any questions, you may contact us at [Data.Notice@chiamass.gov](mailto:Data.Notice@chiamass.gov).

PROGRAM: IN ADDITION TO THIS SCREEN, ALSO DISPLAY THE TEXT FROM “HELP” AT ANY POINT DURING THE SURVEY IF R CLICKS ON THE “NEED ASSISTANCE LINK.” GO TO WSC1.

*Ask if: Web R breaks off from web survey*

**SUSPEND.** (Web)

Your answers have been saved. When you return to continue the survey, you will need to enter the 7-digit Secure Access Code found on the materials we sent.

PROGRAM: END

*Ask if: Web R resumes survey and enters his/her access code*

**SUSPEND\_RESUME.** (Web)

Welcome back to the Massachusetts Health Insurance Survey. Click the “Next” button to go where you left off.

PROGRAM: GO TO THE NEXT UNANSWERED QUESTION.

### **\*END\* SECTION: WEB INTRO**

### **SECTION: CATI INTRO**

CALLER ID = MA HEALTH SURVEY

Display local MA phone number.

*Ask if: CATI outbound to PPD if voicemail (MODE=CATI and o/b and SAMPTYPE=CELL)  
LEAVE VOICEMAIL ON CALL 1<sup>ST</sup>, 3<sup>RD</sup>, AND 4<sup>TH</sup> CALL*

**OBVOICEMAIL.** (CATI)

Hello, I’m calling from SSRS on behalf of the Center for Health Information and Analysis, an agency of the Commonwealth of Massachusetts for an important study about health care and health insurance in Massachusetts. Your number was randomly selected from phone numbers in Massachusetts. {If SAMPTYPE=Cell: We will send you a \$10 gift card to thank you if you complete this survey.} We will call you again and hope to reach you at a time that is more convenient for you.

*Ask if: CATI outbound to PPD if phone is picked up (MODE=CATI and o/b and SAMPTYPE=CELL) OR*

*Other adult in HH available to talk (IDENTIFY\_ADULT2=1) OR  
Other adult knows about health insurance for HH members (ALTR=1)*

**CATIINTRO1.** (CATI)

Hello. My name is \_\_\_\_\_. I am calling from SSRS on behalf of the Commonwealth of Massachusetts.

(INTERVIEWER: IF YOU REACH A CHILD, ASK TO SPEAK TO AN ADULT AND REINTRODUCE YOURSELF.)

I would like to tell you about the 2025 Massachusetts Health Insurance Survey. This survey is being done by the Center for Health Information and Analysis, an agency of the Commonwealth of Massachusetts. {If SAMPTYPE=Cell: We will send you a \$10 gift card to thank you if you complete this survey.}

For quality assurance, this call will be recorded.

PROGRAM: GO TO CELL1.

*Ask if: CATI inbound if phone is picked up (MODE=CATI and i/b)*

**CATIINTRO1a.** (CATI)

Hello, thank you for calling SSRS regarding the 2025 Massachusetts Health Insurance Survey. This survey is being conducted by the Center for Health Information and Analysis, an agency of the Commonwealth of Massachusetts.

For quality assurance, this call will be recorded.

PROGRAM: GO TO CELL1.

**VOICEMAIL TO BE SET UP BY TELEOPS, NOT QRE.**

Hello and thank you for calling SSRS regarding the study about health care and health insurance in Massachusetts conducted by the Center for Health Information and Analysis, an agency of the Commonwealth of Massachusetts. We are unable to take your call right now but if you leave us a voicemail with your name, phone number, and best time to reach you, one of our interviewers will call you back. If you have it available, please also give us the secure access code from your letter, so we can have your case open and ready to start when we call you back. Thank you for your interest in this important study.

*Ask if: Cell phone sample R (SAMPTYPE=Cell)*

**CELL1.** (CELL1) (CATI)

Just so that {Web/CATI: we/I} can ask you the right questions, could you please tell {Web/CATI: us/me} if you are less than 18 years old, 18 to 25, 26 to 64, or 65 or older?

- |    |   |                   |
|----|---|-------------------|
| 1  | Less than 18                                      | GO TO TERM1       |
| 2  | 18 to 25  | CONTINUE TO CELL2 |
| 3  | 26 to 64  | CONTINUE TO CELL2 |
| 4  | 65 or older                                       | CONTINUE TO CELL2 |
| 98 | {Web/CATI: I don't know/(DO NOT READ) DON'T KNOW} | GO TO TERM1       |
| 99 | (DO NOT READ) REFUSED                             | GO TO TERM1       |
| 97 | Web blank   | GO TO TERM1       |

*Ask if: Cell phone sample R and age is 18+ (CELL1=2, 3, 4)*

**CELL2.** (CELL2) (CATI)

What is your ZIP code?

{Web/CATI: If you have more than one residence, please tell us the zip code of your primary residence.})(IF NEEDED: If you have more than one residence, please tell me the zip code of your primary residence.}}

- |       |  |              |
|-------|--|--------------|
| _____ | (ENTER ZIP CODE)                       | GO TO CELL3  |
| 2     | (DO NOT READ) OUTSIDE OF MASSACHUSETTS | GO TO CELL2a |
| 98    | (DO NOT READ) DON'T KNOW               | GO TO CELL2a |
| 99    | (DO NOT READ) REFUSED                  | GO TO CELL2a |
| 97    | Web blank                              | GO TO CELL2a |

RANGE: HARD: MA ZIP CODE. SEE APPENDIX A.

ERROR MESSAGE: THIS ZIP CODE IS INCORRECT, PLEASE VERIFY AND REENTER. IF ZIP CODE CONTINUES TO BE INCORRECT, SELECT "OUTSIDE OF MASSACHUSETTS")

*Ask if: Cell phone sample R and residence is outside MA, or zip is RF or DK (CELL2=2, 98, 99, 97)*

**CELL2a.** (CELL2a) (CATI)

Is your home located in Massachusetts?

- |    |                          |             |
|----|--------------------------|-------------|
| 1  | Yes                      | GO TO CELL3 |
| 2  | No                       | GO TO TERM2 |
| 98 | (DO NOT READ) DON'T KNOW | GO TO TERM2 |
| 99 | (DO NOT READ) REFUSED    | GO TO TERM2 |
| 97 | Web blank                | GO TO TERM2 |

*Ask if: MODE=CATI AND (Cell phone sample R and home is in MA (SAMPTYPE=CELL and (CELL2=valid MA zip or CELL2a=1)) OR returned I/B ABS)*

### CELL3. (CELL3) (CATI)

Before we continue, are you driving?

- |    |   |               |
|----|---|---------------|
| 1  | Not driving                               | GO TO INTRO2  |
| 2  | Driving                                   | GO TO DRIVING |
| 3  | (IF VOLUNTEERED) THIS IS NOT A CELL PHONE | SEE PRG       |
| 99 | (DO NOT READ) REFUSED                     | GO TO EXIT2   |

PROGRAM: IF CELL3=3 AND SAMPTYPE=CELL, GO TO TERM3.

*Ask if: All CATI*

### INTRO2. (CATI)

Before we continue, I'd like to tell you more about the survey.

It asks about health, access to health, and health insurance. You were randomly selected to participate in this survey to represent many households like yours. If you agree to participate, you will be asked to answer this survey over the phone. It takes about 25 minutes. It may take less time for smaller households. {If SAMPTYPE=Cell: If you complete the survey, we will send you a \$10 gift card to thank you for participating.}

This survey is voluntary and confidential. You have the right to participate or not participate. Your decision will not impact your health insurance, health care, or relationship with any state or federal agency.

Next, I'd like to tell you about your rights in participating. There are no direct benefits for participating. However, your answers will be combined with those of many others to guide legislators and policymakers to provide quality and affordable health care for Massachusetts' residents.

Risks to you in taking this survey are minimal. Some questions may make you feel uncomfortable. If that happens, you can skip the question or stop the survey at any time. To the best of our ability your answers will remain confidential, meaning we will not use the information you provide in any way that could identify you. With any online related activity, however, the risk of a breach of confidentiality is possible. Know that we take every precaution to minimize such risk by storing your answers on secure servers in secure facilities.

PROGRAM: GO TO INTRO3

*Ask if: All CATI*

### INTRO3. (CATI)

Before we start, I can give you contact information of the people responsible for the research. I can also give you the phone numbers of people to call if you want to withdraw or to contact the

Institutional Review Board or IRB. The IRB is the body that oversees the protection of study participants. I can also give you a webpage where you can see how we reported on data from prior surveys. Would you like this information?

(IF NEEDED. DO NOT READ ALL CONTACT INFO, PROVIDE ONLY CONTACTS REQUESTED.

The people responsible for the research are Dr. Zi Zhang and Vanessa Harrell.

Dr. Zi Zhang

Center for Health Information and Analysis

501 Boylston Street

Boston, MA 02116

617-701-8100

[Data.Notice@chiamass.gov](mailto:Data.Notice@chiamass.gov)

Vanessa Harrell

SSRS

Senior Research Director

1 Braxton Way, Suite 125

Glen Mills, PA 19342

[vharrell@ssrs.com](mailto:vharrell@ssrs.com)

For information about this survey, go to [www.chiamass.gov/massachusetts-health-insurance-survey](http://www.chiamass.gov/massachusetts-health-insurance-survey).

For questions or concerns before, during or after your participation regarding your rights as a participant, to obtain information or offer input, you may contact the USM Office of Research Integrity and Outreach at 207-780-4517 or email [usmorio@maine.edu](mailto:usmorio@maine.edu). Information for participants can also be found at <https://usm.maine.edu/orio/irb-information-for-research-participants/>.

For questions about the survey or to withdraw, please call Vanessa Harrell at SSRS. Her phone number is 484-840-4311. After completing the survey, you may withdraw while the survey is open. After all surveys are complete and data have been processed, your information may not be able to be removed.

Do you agree to start the survey?

- |   |     |         |
|---|-----|---------|
| 1 | Yes | SEE PRG |
| 2 | No  | END     |

PROGRAM: IF SAMPTYPE=CELL, GO TO S2, ELSE (SAMPTYPE=ABS) GO TO WSC1.

**\*END\* SECTION: CATI INTRO**

## **SECTION: LOCATION AND R IDENTIFICATION**

*Ask if: ABS sample R on the web or CATI (SAMPTYPE=ABS)*

**WSC1.** (WSC1) (Web, CATI)

Are you completing the survey for {Web/CATI: this address/ADDRESS FROM SAMPLE}?  
{Web/CATI: ADDRESS FROM SAMPLE}

- |    |                            |             |
|----|----------------------------|-------------|
| 1  | Yes, that is my address    | GO TO WSC2  |
| 2  | No, that is not my address | GO TO EXIT1 |
| 99 | (DO NOT READ) REFUSED      | GO TO EXIT2 |
| 97 | Web Blank                  | GO TO EXIT2 |

*Ask if: R is completing survey for sampled address (WSC1=1)*

**WSC2.** (WSC2) (Web, CATI)

Do **you** live or stay at {Web/CATI: this address/ADDRESS FROM SAMPLE}?  
{Web/CATI: ADDRESS FROM SAMPLE/}

{Web/CATI: Select "Yes" if you...

-usually live or stay at this address, or

-have no other permanent place to live or stay and currently live or stay at this address, even for short time./(SELECT YES IF RESPONDENT USUALLY LIVES OR STAYS AT THIS ADDRESS, OR HAVE NO OTHER PLACE TO LIVE OR STAY AND CURRENTLY LIVE OR STAY AT THIS ADDRESS, EVEN FOR A SHORT TIME.)}

- |    |                 |             |
|----|-----------------|-------------|
| 1  | Yes             | GO TO WSC2b |
| 2  | No              | GO TO WSC4  |
| 99 | (CATI: REFUSED) | GO TO EXIT2 |
| 97 | Web Blank       | GO TO EXIT2 |

*Ask if: R lives/stays at that address (WSC2=1)*

**WSC2b.** (WSC2b) (Web, CATI)

Is this address your main residence, a second home or a vacation home?

- |    |                       |             |
|----|-----------------------|-------------|
| 1  | Main residence        | GO TO WSC3  |
| 2  | Second home           | GO TO TERM2 |
| 3  | Vacation home         | GO TO TERM2 |
| 99 | (DO NOT READ) REFUSED | GO TO EXIT2 |
| 97 | Web Blank             | GO TO EXIT2 |

*Ask if: Sampled address is R's main residence (WSC2b=1)*

**WSC3.** (WSC3) (Web, CATI)

Are you at least 18 years old?

- |    |                       |                       |
|----|-----------------------|-----------------------|
| 1  | Yes                   | GO TO S2              |
| 2  | No                    | GO TO IDENTIFY_ADULT# |
| 99 | (DO NOT READ) REFUSED | GO TO EXIT2           |

97 Web Blank

GO TO EXIT2

PROGRAM: IF MODE=WEB, GO TO IDENTIFY\_ADULT1, ELSE GO TO IDENTIFY\_ADULT2.

*Ask if: R does not live/stay at address (WCS2=2)*

**WSC4.** (WSC4) (Web/CATI)

Does anyone live or stay at {web/CATI: this address/ADDRESS FROM SAMPLE}?

{Web/CATI: ADDRESS FROM SAMPLE/}

{Web/CATI: Select "Yes" if anyone...

-usually lives or stays at this address, or

-have no other permanent place to live or stay and currently live or stay at this address, even for short time.)/(SELECT YES IF ANYONE USUALLY LIVES OR STAYS AT THIS ADDRESS, OR HAVE NO OTHER PLACE TO LIVE OR STAY AND CURRENTLY LIVE OR STAY AT THIS ADDRESS, EVEN FOR A SHORT TIME.))

1	Yes	GO TO IDENTIFY_ADULT#
2	No	GO TO WSC5
99	(DO NOT READ) REFUSED	GO TO EXIT2
97	Web Blank	GO TO EXIT2

PROGRAM: IF MODE=WEB, GO TO IDENTIFY\_ADULT1, ELSE (CATI) GO TO IDENTIFY\_ADULT2.

*Ask if no one lives at the sampled address (WSC4=2)*

**WSC5.** (WSC5) (Web/CATI)

Is {web/CATI: this address/ADDRESS FROM SAMPLE} a residential address, a business address, or both?

{Web/CATI: ADDRESS FROM SAMPLE/}

1	Residential	GO TO TERM2
2	Business	GO TO TERM2
3	Both Residential and Business	GO TO TERM2
99	(DO NOT READ) REFUSED	GO TO EXIT2
97	Web Blank	GO TO EXIT2

*Ask if: Web R is not 18+ (MODE= web and WSC3=2) OR*



*Web R does not live at address but someone does (MODE=web and WSC4=1) OR  
Web R is less than 18 (MODE=web and (S6a<18 or S6a1=1))*

**IDENTIFY\_ADULT1.** (Web)

Please follow the instructions provided in the materials we mailed and give these materials to an adult who lives or stays at {ADDRESS FROM SAMPLE}. Thank you.

PROGRAM: END AND RESET RECORD.

*Ask if: CATI R is not 18+ (MODE=CATI and WSC3=2) OR  
CATI R does not live at address but someone does (MODE=CATI and WSC4=1) OR  
CATI R is less than 18 (MODE=CATI and (S6a<18 or S6a1=1))*

**IDENTIFY\_ADULT2.** (IDENTIFY\_ADULT2) (CATI)

Is there an adult who lives or stays at this address?

- |    |                       |                        |
|----|-----------------------|------------------------|
| 1  | Yes                   | GO TO IDENTIFY_ADULT2a |
| 2  | No                    | GO TO EXIT6            |
| 99 | (DO NOT READ) REFUSED | GO TO EXIT2            |

*Ask if: There is an adult who lives at this address (IDENTIFY\_ADULT2=1)*

**IDENTIFY\_ADULT2a.** (IDENTIFY\_ADULT2a) (CATI)

Are they currently available to talk?

- |    |                       |                  |
|----|-----------------------|------------------|
| 1  | Yes                   | GO TO CATIINTRO1 |
| 2  | No                    | GO TO EXIT2b     |
| 99 | (DO NOT READ) REFUSED | GO TO EXIT2      |

*Ask if: ABS sample R who confirmed residence in MA and is at least 18+ (WSC3=1) OR  
Cell phone sample R on CATI and not driving (MODE=CATI and SAMPTYPE=CELL and CELL3=1) (saw INTRO3) OR Cell phone sample R on web and lives in MA (MODE=web and SAMPTYPE=CELL and CELL2 is valid ZIP or CELL2a=1)*

**S2.** (S2) (Web, CATI)

Can you answer questions about health insurance for people in your household?

- |    |                          |             |
|----|--------------------------|-------------|
| 1  | Yes                      | GO TO S4    |
| 2  | No                       | SEE PRG     |
| 98 | (DO NOT READ) DON'T KNOW | SEE PRG     |
| 99 | (DO NOT READ) REFUSED    | GO TO EXIT2 |
| 97 | Web Blank                | GO TO EXIT2 |

PROGRAM:

IF S2=2 , 98, or 97 AND SAMPTYPE=CELL, GO TO EXIT5,  
IF S2=2, 98 AND MODE=CATI AND SAMPTYPE=ABS, GO TO S3.  
ELSE (MODE=WEB), GO TO EXITS3

*Ask if: CATI R does not know about health insurance for people in HH, or RF, or DK and sample is ABS (MODE=CATI and S2=2, 98 and SAMPTYPE=ABS)*

**S3.** (S3) (Web, CATI)

Is another adult available who could answer questions about health insurance?

- |    |                          |             |
|----|--------------------------|-------------|
| 1  | Yes                      | SEE PRG     |
| 2  | No                       | SEE PRG     |
| 98 | (DO NOT READ) DON'T KNOW | GO TO EXIT5 |
| 99 | (DO NOT READ) REFUSED    | GO TO EXIT2 |
| 97 | Web Blank                | GO TO EXIT2 |

**PROGRAM:**

IF S3=1 AND MODE=CATI, GO TO ALTR  
 IF S3=1 AND MODE=WEB, GO TO EXITS3  
 IF S3=2 AND MODE=CATI, GO TO EXIT2b  
 IF S3=2 AND MODE=WEB, GO TO EXIT5

*Ask if: Another person is available to answer questions about health insurance and mode is CATI (S3=1 and MODE=CATI)*

**ALTR.** (ALTR) (CATI)

May I please speak with this person?

- |    |                          |                  |
|----|--------------------------|------------------|
| 1  | Yes                      | GO TO CATIINTRO1 |
| 2  | Not available            | GO TO EXIT2b     |
| 98 | (DO NOT READ) DON'T KNOW | GO TO EXIT5      |
| 99 | (DO NOT READ) REFUSED    | GO TO EXIT2      |

**\*END\* SECTION: LOCATION AND R IDENTIFICATION**

**SECTION: TERMINATE SCREENS**

*Ask if: Cell phone sample R and age is less than 18, DK, or RF (CELL1 = 1, 98, 99, 97)*

**TERM1.** (CATI)

Thank you. We are only interviewing people who are 18 years old or older.

**PROGRAM: END**

*Ask if: Home is outside MA, DK, or RF (CELL2a = 2, 98, 99, 97) OR  
 not R's main residence (WSC2b=2, 3) OR  
 unoccupied/non res (WSC5=1, 2, 3)*

**TERM2.** (Web, CATI)

We are only interviewing people whose main residence is in Massachusetts, so these are all the questions {Web/CATI: we/I} have for you today. Thank you.

PROGRAM: END

*Ask if: Cell phone sample R but did not reach cell (SAMPTYPE=cell and CELL3=3)*

**TERM3.** (CATI)

We are only interviewing cell phone lines at this time. Thank you.

PROGRAM: END

*Ask if: R is driving (CELL3=2)*

**DRIVING.** (CATI)

For safety reasons, I cannot continue the interview. Someone will call you back at a later time. Thank you.

PROGRAM: END

*Ask if: Not completing for sampled address (WSC1=2)*

**EXIT1.** (Web, CATI)

The Massachusetts Health Insurance Survey needs to collect information about: {ADDRESS FROM SAMPLE}. Because you have indicated that you are not completing the survey for that address, we do not need any further information at this time. Thank you.

PROGRAM: END

*Ask if:*

*ABS sample R refuses or does not answer address confirmation (WSC1=99, 97) OR  
refuses or does not answer if lives/stays at address (WSC2=99, 97) OR  
refuses or does not answer if main residence (WSC2b=99, 97) OR  
refuses or does not answer if 18+ (WSC3=99, 97) OR  
refuses or does not answer if anyone lives/stays at address (WSC4=99, 97) OR  
refuses or does not answer if address is residential or commercial (WSC5=99, 97) OR  
refuses to indicate if adult lives in HH (IDENTIFY\_ADULT2=99) OR  
refuses to indicate if adult in HH is available to talk (IDENTIFY\_ADULT2a=99) OR  
ABS sample R and refuses to indicate if reached on cell phone (ABSCCELL=99) OR  
(cell phone sample R or ABS sample R reached on cell) and refuses to indicate if driving  
(CELL3=99) OR  
refuses or does not answer if can answer Q about health insurance for HH (S2=99, 97) OR  
refuses or does not answer if other adult can answer Q about health insurance for HH (S3=99,  
97) OR  
refuses or does not answer if can speak to alt adult (ALTR=99, 97) OR  
Refuses, doesn't know, or does not answer # of people in HH (S4=98, 99, 97)*

**EXIT2.** (Web, CATI)

Unfortunately, {Web/CATI: we/I} cannot continue the interview without that information. Thank you.

PROGRAM: CODE CASE AS REFUSAL AND END.

*Ask if: Adult not available and CATI (IDENTIFY\_ADULT2a=2 and mode=CATI)*

**EXIT2b.** (CATI)

Please give the materials we mailed to the adult who lives or stays at this address and can answer questions about health insurance. Thank you.

PROGRAM: END

*Ask if: Cell phone sample R and cannot answer or does not know about health insurance (SAMPTYPE=CELL and S2=2, 98)*

**EXIT5.** (CATI)

{Web/CATI: We/I} are only interviewing people who can answer questions about health insurance for people in their household, so these are all the questions {Web/CATI: we/I} have for you today. Thank you.

PROGRAM: END

*Ask if: No adult live at this address (IDENTIFY\_ADULT2=2)*

**EXIT6.** (Web, CATI)

These are all the questions I have for you today, thank you.

PROGRAM: END

*Ask if: Web R cannot answer or doesn't know about health insurance for all members in HH (S2=2, 98 and MODE=web)*

**EXITS3.** (Web)

We'd like to talk with the adult who can answer questions about health insurance for all people in the household. Please provide them with the materials that were sent so that they may participate in the survey. Thank you.

IF S3=2, BLANK AND MODE=WEB, PLEASE LEAVE RECORD OPEN FOR RE  
ACCESS

PROGRAM: END

**\*END\* SECTION: TERMINATE SCREENS****SECTION: HOUSEHOLD DEMOGRAPHICS**

[NEW QUESTION FOR 2025]

*Ask if: All*

**HH0.**

{Web/CATI: The/My} first questions are about you and your household.

[MOVED IN 2025]

*Ask if: ABS CATI or web*

**L1a. (L1a)**

First, {web/CATI: we are/I am} going to ask you questions about telephone usage in your household.

Do you, yourself, have a working cell phone?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

[MOVED IN 2025]

*Ask if: R does not have a working cell phone, or DK, RF, or leaves blank (L1a=2, 98, 99, 97)*

**L1b. (L1b)**

Do any adults in your household have a working cell phone?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

[MOVED IN 2025]

*Ask if: Cellphone in HH (L1a=1 or L1b=1)*

**L2. (L2)**

Do you or any adults in your household use a prepaid plan for a cellphone?

Prepaid plans, also known as pay-as-you-go or no-contract phone, are plans where the user pays for a specific amount of data usage or minutes in advance.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

[MOVED IN 2025]

*Ask if: (R or adult in HH uses a prepaid plan (L2=1) or Prepaid Cell Phone sample)*

**L2a.** (L2a)

{Including you, how/How} many adults in your household use a prepaid plan?

(IF NEEDED: Prepaid plans, also known as pay-as-you-go or no-contract phone, are plans where the user pays for a specific amount of data usage or minutes in advance.)

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM: INSERT "Including you, how" IF L1a=1, ELSE INSERT "How".

[MOVED IN 2025]

*Ask if: CATI respondents*

**INT1NEW.** (INT1NEW)

Do you or any member of your household have access to the internet at home? This could be internet access by paying a cell phone company or an internet service provider.

1 Yes

2 No

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

[MOVED IN 2025]

*Ask if: All*

**D10.** (D10)

Next we have a question about your residence. Is your residence:

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

1 Owned by or being bought by you or someone in your household

2 Rented

3 Occupied without payment of rent

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

**\*END\* SECTION: HOUSEHOLD DEMOGRAPHICS**

## SECTION: ENUMERATION

*Ask if: R is able to answer questions about health insurance for HH members (S2=1)*

**S4.** (S4) (Web, CATI)

Including yourself, how many people currently live or stay in your household?

{Web/CATI: /(PROBE:)} **Include** in this number all children, foster children, related family members, roomers, or housemates not related to you, college students living away while attending college and National Guard members who are deployed.

{Web/CATI: /(PROBE:)} **Do not include** people who live or stay at another place most of the time, such as people in a correctional facility, nursing home, or residential facility, or people in the regular Armed Forces living somewhere else.

_____ people	GO TO S4a
98 {CATI}{DO NOT READ) Don't know	GO TO EXIT2
99 (DO NOT READ) REFUSED	GO TO EXIT2
97 Web Blank	GO TO EXIT2

PROGRAM: FOR WEB, INSERT PULL DOWN MENU.  
RANGE: HARD: 1-50

*Ask if: Two or more people in HH (S4>=2)*

**S4a.** (Web, CATI)

{Web/CATI: We/I} need some general information about the people in this household so that one person can be picked at random to talk about health insurance coverage.

PROGRAM: GO TO S6a

*Ask if: All (from this point forward, refers to all who passed screener)*

**S6a.** (S6a) (Web, CATI)

{Starting with yourself, what/What} is your age?

Age: _____	SEE PRG
998 (DO NOT READ) DON'T KNOW	GO TO S6a1
999 (DO NOT READ) REFUSED	GO TO S6a1
997 Web Blank	GO TO S6a1

{Web/CATI: /(IF RESPONDENT REFUSES OR DOESN'T KNOW, SAY: We understand your reluctance to give your age, but this information is confidential. It will not be used to identify you. It is very important that we gather this information accurately to help improve health insurance for Massachusetts residents.)}



PROGRAM: IF AGE IS LESS THAN 18 (S6a<18) AND MODE=WEB, GO TO IDENTIFY\_ADULT1,  
IF AGE IS LESS THAN 18 (S6a<18) AND MODE=CATI, GO TO IDENTIFY\_ADULT2,  
ELSE GO TO S6aa.

RANGE: HARD: 1-110

ERROR MESSAGE: IF LEFT BLANK IN WEB, DISPLAY "We understand your reluctance to give your age, but this information is confidential. It will not be used to identify you. It is very important that we gather this information accurately to help improve health insurance for Massachusetts residents."

*Ask if: R refuses, doesn't know, or leaves blank age (S6a=998, 999, 997)*

**S6a1.** (S6a1) (Web, CATI)

{Web/CATI: Are you?/Could you please tell me if you are...}

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

1	Less than 18 years of age	SEE PRG
2	18 to 25 years of age	GO TO S6aa
3	26 to 64 years of age	GO TO S6aa
4	65 years of age or older	GO TO S6aa
98	(DO NOT READ) DON'T KNOW	GO TO EXIT2
99	(DO NOT READ) REFUSED	GO TO EXIT2
97	Web Blank	GO TO EXIT2

PROGRAM: IF AGE IS LESS THAN 18 (S6a1=1) AND MODE=WEB, GO TO IDENTIFY\_ADULT1,  
IF AGE IS LESS THAN 18 (S6a1=1) AND MODE=CATI, GO TO IDENTIFY\_ADULT2.

*Ask if: R is 18+ (S6a>=18 or S6a1=2, 3, or 4)*

**S6aa.** (S6aa) (Web, CATI)

What was your sex assigned at birth?

{Web/CATI: /READ LIST. ENTER ONE ONLY.}

1	Male
2	Female
6	Intersex
7	Unspecified
8	Not listed {Web/CATI: (please specify)/SPECIFY:}
9	I am not sure / don't know
10	I choose not to answer
98	{Web/CATI: /(DO NOT READ) DON'T KNOW

- 96 {Web/CATI: I don't know what this question is asking/  
(DO NOT READ) DON'T KNOW WHAT THIS  
QUESTION IS ASKING}  
99 {Web/CATI: /(DO NOT READ) REFUSED  
97 Web blank

*Ask if: R is 18+ (S6a>=18 or S6a1=2, 3, or 4)*

**S9a.** (S9a) (Web, CATI)

What is the **highest level** of school that you have completed or the highest degree you have received?

- 1 Less than high school (grades 1-11, grade 12 but no diploma)
- 2 High school graduate or equivalent (e.g. GED)
- 3 Some college but no degree (including 2 year occupational or vocational programs)
- 4 Associate's Degree (not occupational or vocational programs)
- 5 College graduate (e.g., BA, AB, BS)
- 6 Postgraduate (e.g., MA, MS, MEng, Med, MSW, MBA, MD, DDs, PhD, JD, LLB, DVM)
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: R is 18+ (S6a>=18 or S6a1=2, 3, or 4)*

**S9aa.** (S9aa) (Web, CATI)

Are you currently working for pay?

- 1 Yes, working
- 2 No, not working
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF MORE THAN ONE PERSON IN HH, LOOP THROUGH S6b-y, S6b1b-y, S7b-y and S9b-y FOR NUMBER OF PEOPLE IN HOUSEHOLD (S4-1), ELSE GO TO ROSTERCHECK1.

*Ask if: Two or more people in HH (S4>=2),*

**S6b-y.** (S6b-y) (Web, CATI)

You mentioned {S4} people currently live or stay at your household.

What is the next person's age? Your best guess is fine.

{Web: Please enter a whole number in the space below}

Current Age: \_\_\_\_\_

00 Less than 1 year old

GO TO S7b-y

GO TO S7b-y

998 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW} GO TO S6b1b-y  
 999 (DO NOT READ) REFUSED GO TO S6b1b-y  
 997 Web Blank GO TO S6b1b-y

{Web/CATI: /(IF RESPONDENT REFUSES OR DOESN'T KNOW, SAY: We understand your reluctance to give your household members' ages, but this information is confidential. It will not be used to identify them. It is very important that we gather this information accurately to help improve health insurance for Massachusetts residents.)}

PROGRAM: ALLOW UP TO 25 PEOPLE.LOOP S6

RANGE: HARD: 1-110

ERROR MESSAGE: IF LEFT BLANK IN WEB, DISPLAY "We understand your reluctance to give your household members' ages, but this information is confidential. It will not be used to identify them. It is very important that we gather this information accurately to help improve health insurance for Massachusetts residents."

*Ask if: R doesn't know, refused, or leaves blank age for HH member (S6b-y=998, 999, 997)*

**S6b1b-y.** (S6b1b-y) (Web, CATI)

{Web/CATI: Is this person.../Could you please me if this person is...}

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

1	Less than 18 years of age	GO TO S7b-y
2	18 to 25 years of age	GO TO S7b-y
3	26 to 64 years of age	GO TO S7b-y
4	65 years of age or older	GO TO S7b-y
98	{Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}	GO TO S7b-y
99	(DO NOT READ) REFUSED	GO TO S7b-y
97	Web Blank	GO TO S7b-y

*Ask if: Two or more people in HH (S4>=2)*

**S7b-y.** (S7b-y) (Web, CATI)

What was this {child/person}'s sex assigned at birth?

{Web/CATI: /READ LIST. ENTER ONE ONLY.}

1	Male
2	Female
6	Intersex
7	Unspecified
8	Not listed {Web/CATI: (please specify)/SPECIFY: }

- 98 {Web/CATI: /(DO NOT READ) DON'T KNOW
- 96 {Web/CATI: I don't know what this question is asking/  
(DO NOT READ) DON'T KNOW WHAT THIS  
QUESTION IS ASKING}
- 99 {Web/CATI: I don't want to answer/(DO NOT READ) REFUSED
- 97 Web blank

PROGRAM:

IN THE QUESTION TEXT:

IF PERSON BEING ASKED ABOUT IS BELOW 12 (S6b-y<12) OR LESS THAN 18 YEARS OF AGE (S6b1b-y=1), DISPLAY "child", ELSE DISPLAY "person"

*Ask if: Two or more people in HH and HH member is 18 or older (S4>=2 and (S6b-y>=18 or S6b1b-y=2, 3 or 4))*

**S9b-y.** (S9b-y) (Web, CATI)

What is the highest level of school that this person has completed or the highest degree this person has received?

- 1 Less than high school (grades 1-11, grade 12 but no diploma)
- 2 High school graduate or equivalent (e.g. GED)
- 3 Some college but no degree (including 2 year occupational or vocational programs)
- 4 Associate's Degree (not occupational or vocational programs)
- 5 College graduate (e.g., BA, AB, BS)
- 6 Postgraduate (e.g., MA, MS, MEng, MEd, MSW, MBA, MD, DDS, PhD, JD, DVM)
- 98 {Web/CATI: /(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: Two or more people in HH and HH member is 16 or older (S4>=2 and (S6b-y>=16 or S6b1b-y=2, 3 or 4))*

**S9bb-yy.** (S9bb-yy) (Web, CATI)

Is this {child/person} currently working for pay?

- 1 Yes, working
- 2 No, not working
- 98 {Web/CATI: /(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF LESS THAN 18 (S6b-y<18 OR S6b1b-y=1), DISPLAY "child",  
ELSE DISPLAY "person".

GO TO ROSTERCHECK1.

*Ask if: Two or more people in HH (S4>=2)*

**RosterCheck1.** (ROSTERCHECK1) (Web, CATI)

{Web/CATI: We'd/I'd} like to confirm the information you just provided {about members of your household}. Is the following correct?

{Web/CATI: /(DO NOT READ) Please read through the grid and confirm the sex and age for each member of the household. If age or sex is missing, say "Not Provided."}

Household members	Sex Assigned at Birth	Age
You:	IF S6aa=1, DISPLAY "Male", IF S6aa=2, DISPLAY "Female", IF S6aa=6, DISPLAY "Intersex", IF S6aa=7, DISPLAY "Unspecified Sex", IF S6aa=8, 9, or 10, DISPLAY "Sex not specified"  ELSE LEAVE BLANK	IF S6a= 18-110, INSERT AGE (S6a), IF S6a1=2, 3, or 4: "18 or older", ELSE LEAVE BLANK
Person 2-25:	IF S7b-y=1, DISPLAY "Male" IF S7b-y=2, DISPLAY "Female" IF S7b-y=6, DISPLAY "Intersex", IF S7b-y=7, DISPLAY "Unspecified Sex", IF S7b-y=8, 9, or 10, DISPLAY "Sex not specified",  ELSE LEAVE BLANK	IF S6b-y=0-110, INSERT AGE (S6b-y), IF S6b1b-y=1, DISPLAY "Less than 18", ELSE (S6b1b-y=2, 3 or 4) DISPLAY "18 or older", ELSE LEAVE BLANK.

{Web/CATI: If this is not correct, click the Back button below and adjust information as necessary.}/{IF NOT CORRECT, GO BACK AND ADJUST INFORMATION.}}

PROGRAM: INSERT ROW FOR EACH MEMBER.

IF S4>1, DISPLAY "about members of your household".

AFTER HOUSEHOLD ROSTER SECTION IS COMPLETED RANDOMLY SELECT ONE PERSON TO BE THE TARGET.

*Ask if: All*

**S10.** (S10) (Web, CATI)

{{You have/The following person has} been randomly selected from your household{./:}}

{The person who is {AGE} and was assigned {SEX} at birth./ The person who is {AGE}.}

PROGRAM:

IF S4=1 OR (S4>=2 AND TARGET=1), DISPLAY "You have been randomly selected from your household."

ELSE DISPLAY

"The following person has been randomly selected from your household:

{The person who is {AGE} and was assigned {SEX} at birth./ The person who is {AGE}.}"

IF TARGET IS NOT RESPONDENT, FILL IN SEX AND AGE:

SEX:

IF S7b-y=1, DISPLAY "male",

IF S7b-y=2, DISPLAY "female",

IF S7b-y=6, DISPLAY "intersex",

IF S7b-y=7, DISPLAY "The person who is {AGE}.",

IF S7b-y=8, DISPLAY "The person who is {AGE}.",

ELSE DISPLAY "The person who is {AGE}."

IF AGE IS NOT MISSING, DISPLAY "who is {AGE}}:

AGE:

IF S6b-y=1-110, INSERT AGE "(S6b-y) years old",

IF S6b-y=0, INSERT "who is less than one year of age,"

IF S6b1b-y=1 OR S10aa=1, DISPLAY "Less than 18",

ELSE (S6b1b-y=2, 3 or 4 OR S10aa=2, 3, or 4) DISPLAY "18 or older",

ELSE AGE IS MISSING.

IF PERSON SELECTED IS RESPONDENT, DISPLAY "your", ELSE DISPLAY "this person's".

IF PERSON SELECTED IS RESPONDENT, AND ONLY ONE PERSON IN HH (S4=1), GO TO h1, ELSE GO TO S12a.

IF PERSON SELECTED IS NOT RESPONDENT, AND AGE IS REFUSED, DON'T KNOW, OR MISSING (S6b1b-y=98, 99, 97), GO TO EXITS10.

IF SELECTED PERSON IS NOT REPENDENT, GO TO S10a.

*Ask if: Target's age is refused, don't know or missing (S6b1b-y=98, 99, 97)*

**S10aa.** (S10aa) (Web, CATI)

Unfortunately, no age was provided for this person. Because age is a critical piece of information, {Web/CATI: we/I} cannot proceed with the interview without that information.  
{Web/CATI: Is this person.../Could you please me if this person is...}

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

- 1 Less than 18 years of age
- 2 18 to 25 years of age
- 3 26 to 64 years of age
- 4 65 years of age or older
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IF AGE IS REFUSED, DON'T KNOW, OR BLANK (S10aa=98, 99, 97), GO TO EXITS10, ELSE GO TO S10a.

*Ask if: Person selected is target and age is refused, don't know or missing (S10aa=98, 99, 97)*

**EXITS10.** (Web, CATI)

Unfortunately, age is a critical piece of information, {Web/CATI: we/I} cannot proceed with the {Web/CATI: survey/interview}. Thank you.

*Ask if: Person selected is target*

**S10a.** (S10a, S10aName) (Web, CATI)

So that {Web/CATI: we/I} can refer to this person throughout the survey, what is the first name or a nickname of the person who was selected?

{Web/CATI: We are only asking for this information so this person can be referred to throughout the survey./(IF NEEDED: We are only asking for this information so this person can be referred to throughout the survey.)

- 1 Name or nickname: \_\_\_\_\_
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF REFUSED OR WEB BLANK (S10a=99, 97) DISPLAY "We will refer to this person as "Person X" for the remainder of the survey." WRITE "Person X" IN S10aName.

REQUIRE AT LEAST 2 CHARACTERS BE ENTERED. PLEASE PREVENT R FROM USING "YOU" AS NICKNAME.

*Ask if: Respondent is taking Spanish language version of survey.*

**S10ab.** (S10ab) (Web, CATI)



¿Qué pronombre prefiere esta persona? (English: (DO NOT SHOW): What pronoun does this person prefer?)

- 1 Él
- 2 Ella
- 3 Elle
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 96 {Web/CATI: I don't know what this question is asking/(DO NOT READ) DON'T KNOW WHAT THIS QUESTION IS ASKING}
- 99 {Web/CATI: I don't want to answer /(DO NOT READ) REFUSED}
- 97 Web blank

PROGRAM: Based on responses above, pipe in gendered pronouns for Target as needed throughout the survey. The -e form should follow the same patterns of orthographic changes as the feminine (-a), but using -e instead. Note that words like "el/la ciclista" that are spelled the same in masculine and feminine would also not change in -e. Examples:

- -o: él, latino, el niño, el director, el ciclista (if S10ab=1, 98, 96, 97, or 99)
- -a: ella, latina, la niña, la directora, la ciclista (if S10ab=2)
- -e : elle, latine, le niño, le directore, le ciclista (if S10ab=3)

If the respondent chooses 96-99 (don't know, refused, etc.), use masculine (-o) pronouns.

#### **\*END\* SECTION: ENUMERATION**

#### **SECTION: TARGET DEMOGRAPHICS**

[MOVED IN 2025]

Ask if: All

**D0.**

{Web/CATI: Next are/Now I'd like to ask} a few general questions to describe {you/{TARGET}}.

PROGRAM: INSERT "Are you" IF TARGET IS RESPONDENT, ELSE INSERT "Is {TARGET}"

Ask if: Person selected is 16 or older (S6b-y>=16 or S6b1b-y=2, 3 or 4) and more than one person in HH (S4>1)

**S11.** (S11) (Web, CATI)

{Are you/Is {TARGET}} currently...

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

- 1 Married
- 2 Living with partner
- 3 Divorced
- 4 Separated
- 5 Widowed
- 6 Never Married

- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF SELECTED PERSON IS RESPONDENT, DISPLAY "Are you", ELSE DISPLAY "Is {TARGET}".

IF ONE PERSON HOUSEHOLD, (S4 =1) DO NOT SHOW CODE 2, LIVING WITH PARTNER.

[MOVED IN 2025]

Ask if: All

**D1. (D1)**

{Are you/Is {TARGET}} Hispanic or {Web:Latino/a/e/x | CATI: Latino or Latina}?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "Are you" IF TARGET IS RESPONDENT, ELSE INSERT "Is {TARGET}"

SPANISH VERSION: Use response from gender pronoun question earlier in the survey to display correct gender-conjugated form: {hispano o latino/hispana o latina/hispane o latine}

[MOVED IN 2025]

Ask if: All

**D2. (D2\_1, D2\_2, D2\_3, D2\_4, D2\_5, D2\_6, D2\_7, D2\_7\_OS, D2\_8, D2\_8\_OS, D2\_9, D2\_9\_OS, D2\_98, D2\_99, D2\_97)**

Which one or more of the following would you say is {your/{TARGET}'s} race?

{Web/CATI: Check all that apply./ READ LIST IF NECESSARY. CHECK ALL THAT APPLY.}

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or Other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Hispanic/{Web:Latino/a/e/x | CATI: Latino or Latina}
- 7 {Web/CATI: {My/{TARGET}'s} race is not listed {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 8 {Web/CATI: {My/{TARGET}'s} race is not listed {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 9 {Web/CATI: {My/{TARGET}'s} race is not listed {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) I choose not to answer
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s"

[MOVED IN 2025]

*Ask if: Target has more than one race (more than one of the following is set to 1: D2\_1, D2\_2, D2\_3, D2\_4, D2\_5, D2\_6, D2\_7, D2\_7\_OS, D2\_8, D2\_8\_OS, D2\_9, D2\_9\_OS) OR (identified as Hispanic or {Latino/Latina} (D1 = 1) AND one of the following is 1: D2\_1, D2\_2, D2\_3, D2\_4, D2\_5, D2\_7, D2\_7\_OS, D2\_8, D2\_8\_OS, D2\_9, D2\_9\_OS)*

**D3. (D3)**

Which one of these groups would you say best represents {your/{TARGET}'s} race?

{Web/CATI: / READ LIST.}

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or Other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Hispanic/{Web:Latino/a/e/x | CATI: Latino or Latina}
- 7 {D2\_7\_OS}
- 8 {D2\_8\_OS}
- 9 {D2\_9\_OS}
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) I choose not to answer
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s"

ONLY INCLUDE RESPONSES FROM D2.

SHOW "6: Hispanic/Latino/a/e/x" IF D1=1 OR D2\_6=1.

SPANISH VERSION: Use response from gender pronoun question earlier in the survey to display correct gender-conjugated form: {Hispano/latino, Hispana/latina, Hispane/ latine}

PN: Please add D1/D2/D3 to the fonefile

[MOVED IN 2025]

*Ask if: All*

**D12. (D12)**

{Were you/Was {TARGET}} born in the United States?

- 1 Yes
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "Were you" IF TARGET IS RESPONDENT, ELSE INSERT "Was {TARGET}"

[MOVED IN 2025]

*Ask if: Target was not born in the US (D12=2)*

**D13.** (D13)

{Are you/Is {TARGET}} a citizen of the United States?

- 1 Yes
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "Are you" IF TARGET IS RESPONDENT, ELSE INSERT "Is {TARGET}"

[MOVED IN 2025]

*Ask if: All*

**D5.** (D5\_1, D5\_2, D5\_3, D5\_4, D5\_5, D5\_6, D5\_98, D5\_96, D5\_99, D5\_97, D5\_6\_OS)

What is your/{TARGET}'s gender?

{Web/CATI: Check all that apply./(DO NOT READ, ALLOW MULTIPLE.)}

Web/CATI: /INTERVIEWER NOTE: (DO NOT READ) 98 – "Don't know" means the respondent doesn't know their/the target's gender, 96 – "I don't know what this question is asking" means the respondent is unfamiliar with the question and/or response options.

- 1 {Woman/Girl}
- 2 {Man/Boy}
- 3 Non-binary
- 4 Agender/No gender
- 5 Questioning
- 6 Not listed {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 98 I don't know {my/TARGET's} gender
- 96 I don't know what this question is asking
- 99 {Web/CATI: I don't want to answer/(DO NOT READ) REFUSED }
- 97 Web blank

PROGRAM: IF LESS THAN 18 (S6a-y<18 OR S6a1b-y=1), DISPLAY "Girl"/"Boy", ELSE DISPLAY "Woman"/"Man".

MAKE RESPONSES 98, 96, AND 99 EXCLUSIVE SELECTIONS.

[MOVED IN 2025]

Ask if: Target aged 18+ (TAGE>=18 OR TAGE2=2, 3, 4)

**D5a. (D5a)**

{Are you/Is {TARGET}} transgender?

- 1 Yes
- 2 No
- 98 {Web/CATI: I don't know if {I am/{TARGET} is} transgender/(DO NOT READ) Don't know
- 96 (DO NOT READ) I don't know what this question is asking
- 99 {Web/CATI: I don't want to answer/(DO NOT READ) I don't want to answer}
- 97 Web blank

{Web/CATI: /(IF RESPONDENT REFUSES OR DOESN'T KNOW, SAY: We understand your reluctance to answer if {you are/TARGET is} transgender, but this information is confidential. It will not be used to identify you. It is important that we gather this information accurately to help improve health insurance for Massachusetts residents.)}

{Web/CATI: /INTERVIEWER NOTE: (DO NOT READ) 98 – “Don’t know” means the respondent doesn’t know their/the target’s gender, 96 – “I don’t know what this question is asking” means the respondent is unfamiliar with the question and/or response options.}

PROGRAM: INSERT “you”/“you are” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}”/“{TARGET} is”

[NEW QUESTION IN 2025]

Ask if: Sex at birth and gender identity do not match but target is not transgender ((S7b-y=1 and D5=1) or (S7b-y=2 and D5=2)) and D5a=2

**D5b. (D5b)**

“Just to confirm, {you were/{TARGET} was} assigned {male/female} at birth and {you/they} now identify as a {{girl/boy}/{woman/man}}. Is that correct?”

- 1 Yes, that is correct
- 2 No, that is not correct
- 98 {Web/CATI: I don't know if /(DO NOT READ) Don't know
- 99 {Web/CATI: I don't want to answer/(DO NOT READ) I don't want to answer}
- 97 {Web blank

PROGRAM:

DISPLAY “you were/you” IF TARGET IS RESPONDENT,

ELSE DISPLAY “{TARGET} was/they”.

IF LESS THAN 18 (S6a-y<18 OR S6a1b-y=1), DISPLAY “girl”/“boy”,

ELSE DISPLAY “woman”/“man”.

IF S7b-y=1, DISPLAY “male”,

IF S7b-y=2, DISPLAY “female”.

IF D5=1, DISPLAY “girl/woman”,

IF D5=2, DISPLAY “boy/man”.

[MOVED IN 2025]

Ask if: Target aged 18+ (TAGE>=18 OR TAGE2=2, 3, 4)

**D6. (D6)**

Which of these describes {your/{TARGET}'s} sexual orientation?

{Web/CATI: Check all that apply./ ALLOW MULTIPLE.}

{Web/CATI: /INTERVIEWER NOTE: (DO NOT READ) 98 – “Don’t know” means the respondent doesn’t know their/the target’s gender, 96 – “I don’t know what this question is asking” means the respondent is unfamiliar with the question and/or response options.}

- 1 Straight or heterosexual
- 2 Lesbian or gay
- 3 Bisexual
- 7 Pansexual
- 4 Queer
- 5 Questioning
- 6 Not listed {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 98 {Web/CATI: I/You} don’t know {web/CATI: {my/TARGET's} / your/TARGET's} sexual orientation
- 96 {Web/CATI: I/You} don’t know what this question is asking
- 99 {Web/CATI: I/You} don’t want to answer
- 97 Web blank

PROGRAM: INSERT “your” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}'s”  
MAKE RESPONSES 98, 96, AND 99 EXCLUSIVE SELECTIONS.

[MOVED IN 2025]

Ask if: Respondent is taking the English version of survey

**D14. (D14)**

{Do you/Does {TARGET}/Do {TARGET}'s parent(s) or guardian(s)} speak a language other than English at home?

- 1 Yes
- 2 No
- 98 {Web/CATI: Don’t know/(DO NOT READ) DON’T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “Do you” IF TARGET IS RESPONDENT,  
INSERT “Does {TARGET}” IF (TAGE >18 OR TAGE2= 2, 3, or 4),  
ELSE INSERT “Do {TARGET}'s parent(s) or guardian(s)”.

IF RESPONDENT IS ANSWERING SPANISH VERSION OF SURVEY, PROGRAM D14 = 1 AND DO NOT ASK.

[MOVED IN 2025]

*Ask if: A language other than English is spoken at home or respondent is taking Spanish version of survey (D14=1)*

**D16. (D16)**

How well {do you/does {TARGET}/do {TARGET}'s parent(s) or guardian(s)} speak English?

- 1 Very well
- 2 Well
- 3 Not well
- 4 Not well at all
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web blank

PROGRAM: INSERT "you" if TARGET is Respondent, INSERT "do {TARGET}'s parent(s) or guardian(s)" if Target aged <18, ELSE "does {TARGET}".

*Ask if: Target is respondent*

**S12a. (S12a\_1 to S12a\_25) (Web, CATI)**

It would be helpful to know the relationship between you and the other members of your household.

How is the {person assigned {SEX} at birth {who is {AGE}}/the person who is {AGE}} related to you? Are they your...

- 01 Spouse (wife / husband) (SHOW IF MARRIED OR SEPARATED OR UNKNOWN S11=1, 4, 97, 98, 99, DO NOT SHOW IF S6b-y<13)
- 02 Unmarried partner / significant other (SHOW IF LIVING WITH A PARTNER OR UNKNOWN S11=2, 97, 98, 99, DO NOT SHOW IF S6b-y<13)
- 03 Child / stepchild / foster child / ward
- 06 Child of unmarried partner (SHOW IF LIVING WITH A PARTNER OR UNKNOWN S11=2, 97, 98, 99)
- 04 Parent / stepparent / foster parent / guardian (SHOW IF TAGE <26 OR TAGE2=1 OR 2)
- 05 Sibling / Stepsibling / Half-sibling (SHOW IF TAGE<26 OR TAGE2=1 OR 2)
- 10 Other relative
- 14 Other non-relative
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank



PROGRAM:

SEX:

```
IF S7b-y=1, DISPLAY "male",
IF S7b-y=2, DISPLAY "female",
IF S7b-y=6, DISPLAY "intersex",
IF S7b-y=7, DISPLAY "the person who is {AGE}.",
IF S7b-y=8, DISPLAY "the person who is {AGE}."
ELSE DISPLAY "the person who is {AGE}."
```

IF AGE IS NOT MISSING, DISPLAY "who is {AGE}}:

AGE:

```
IF S6b-y=1-110, INSERT AGE "(S6b-y) years old",
IF S6b-y=0, INSERT "who is less than one year of age,"
IF S6b1b-y=1 OR S10aa=1, DISPLAY "Less than 18",
ELSE (S6b1b-y=2, 3 or 4 OR S10aa=2, 3, or 4) DISPLAY "18 or older",
ELSE AGE IS MISSING.
```

*Ask if: Target is not respondent and target is child (TAGE<26 OR TAGE2=1 OR 2)*

**S12b.** (S12b\_1 to S12b\_25) (Web, CATI)

It would be helpful to know the relationship between {S10aName} and the other members of your household.

How {are you/{is the person assigned {SEX} at birth {who is {AGE}}/the person who is {AGE}}} related to (S10aName)? Are (you/they) the...

- 04 Parent / stepparent / foster parent/ guardian
- 15 Unmarried partner or significant other of the {child's/their} parent
- 01 Spouse (wife / husband) (SHOW IF (TAGE >=16 OR TAGE2=2, 3 OR 4, DO NOT SHOW IF S6b-y<13) AND MARRIED OR SEPARATED OR UNKNOWN S11=1, 4, 98, 99, 97)
- 02 Unmarried partner / significant other (SHOW IF (TAGE >=16 OR TAGE2=2, 3 OR 4, DO NOT SHOW IF S6b-y<13) AND LIVING WITH A PARTNER OR UNKNOWN S11=2, 98, 99, 97)
- 03 Child / stepchild (SHOW IF (TAGE>=16 OR TAGE2=2, 3 OR 4) AND HOUSEHOLD MEMBER AGE <26)
- 05 Sibling / Stepsibling / Half-sibling
- 10 Other relative
- 14 Other non-relative
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

DISPLAY "child's" IF (TAGE<18 OR TAGE2=1), ELSE DISPLAY "their".

SEX:

IF S7b-y=1, DISPLAY "male",  
 IF S7b-y=2, DISPLAY "female",  
 IF S7b-y=6, DISPLAY "intersex",  
 IF S7b-y=7, DISPLAY "the person who is {AGE}.",  
 IF S7b-y=8, DISPLAY "the person who is {AGE}.",  
 ELSE DISPLAY "the person who is {AGE}."

AGE:

IF S6b-y=1-110, INSERT AGE "(S6b-y) years old",  
 IF S6b-y=0, INSERT "who is less than one year of age,"  
 IF S6b1b-y=1 OR S10aa=1, DISPLAY "Less than 18",  
 ELSE (S6b1b-y=2, 3 or 4 OR S10aa=2, 3, or 4) DISPLAY "18 or older",  
 ELSE AGE IS MISSING.

*Ask if: Target is not respondent and target is adult*

**S12b.** (S12b\_1 to S12b\_25) (Web, CATI)

It would be helpful to know the relationship between {S10aName} and the other members of your household.

How {are your/is {the person assigned {SEX} at birth {who is {AGE}/the person who is {AGE}}}  
 related to (S10aName)? Are (you/they) the...

- 01 Spouse (wife / husband) (SHOW IF MARRIED OR SEPARATED OR UNKNOWN S11= 1, 4, 97, 98, 99)
- 02 Unmarried partner / significant other (SHOW IF LIVING WITH A PARTNER OR UNKNOWN S11=2, 97, 98, 99)
- 03 Child / stepchild / foster child / ward
- 06 Child of unmarried partner (SHOW IF LIVING WITH A PARTNER OR UNKNOWN S11=2, 97, 98, 99)
- 04 Parent / Stepparent / foster parent / guardian (SHOW IF TAGE<26 OR TAGE2=1 OR 2)
- 05 Sibling / Stepsibling / Half-sibling (SHOW IF TAGE<26 OR TAGE2=1 OR 2)
- 10 Other relative
- 14 Other non-relative
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IF ASKING ABOUT RELATIONSHIP BETWEEN RESPONDENT AND TARGET, DISPLAY "your/you", ELSE DISPLAY "the person assigned {SEX} at birth {who is {AGE}} and "they".

SEX:

IF S7b-y=1, DISPLAY "male",

```

IF S7b-y=2, DISPLAY "female",
IF S7b-y=6, DISPLAY "intersex",
IF S7b-y=7, DISPLAY "the person who is {AGE}.",
IF S7b-y=8, DISPLAY "the person who is {AGE}."
ELSE DISPLAY "the person who is {AGE}."

```

IF AGE IS NOT MISSING, DISPLAY "who is {AGE}}:

AGE:

```

IF S6b-y=0-110, INSERT AGE "(S6b-y) years old",
IF S6b1b-y=1 OR S10aa=1, DISPLAY "Less than 18",
ELSE (S6b1b-y=2, 3 or 4 OR S10aa=2, 3, or 4) DISPLAY "18 or older",
ELSE AGE IS MISSING.

```

NOTE THAT FOR PROGRAMMING PURPOSES, THE 2 S12b-y QUESTIONS WILL BE COMBINED AS IT GREATLY SIMPLIFIES THE PROGRAMMING OF THE ROSTER CHECK. THE ONLY IMPACT OF THIS CHANGE IS THE ORDER OF RESPONSE OPTION #4 IN THE SECOND QUESTION.

*Ask if: HH is more than one person (S4>1)*

**RosterCheck2.** (ROSTERCHECK2) (Web, CATI)

{Web/CATI: We'd/I'd} like to confirm the information you just provided about the relationship of the members of your household to {you/S10a}. Is the following correct?

PROGRAM: INSERT THE SELECTED PERSON IN ROW 1. THEN EVERY OTHER HH MEMBERS.

INSERT A ROW FOR EACH MEMBER OF HOUSEHOLD, STARTING WITH TARGET SHOWING RESPONSES FROM:

Household Member	Sex at Birth (S6aa or S7b-y)	Age (S6a-y)
{you/S10aName}	IF S6aa or S7b-y=1, DISPLAY "Person assigned male at birth", IF S6aa or S7b-y=2, DISPLAY "Person assigned female at birth", IF S6aa=6, DISPLAY "Person assigned intersex at birth",	IF S6a-y= 18-110, INSERT AGE (S6a-y), IF S6a1=2, 3, or 4 OR S6b1b-y=2, 3 or 4 OR S10aa=2, 3, or 4: "18 or older", ELSE LEAVE BLANK

	IF S6aa=7, DISPLAY "Person", IF S6aa=8, 9, or 10, DISPLAY "Person",  ELSE LEAVE BLANK	
{Your/{S10a}'s} IF S12a-y=1, DISPLAY "Spouse (wife / husband)", IF S12a-y=2, DISPLAY "Unmarried partner / significant other", IF S12a-y=3, DISPLAY "Child / stepchild / foster child / ward", IF S12a-y=4, DISPLAY "Parent / Stepparent / foster parent / guardian", IF S12a-y=5, DISPLAY "Sibling / Stepsibling / Half-sibling", IF S12a-y=6, DISPLAY "Child of unmarried partner", IF S12a-y=10, DISPLAY "Other relative", IF S12a-y=14, DISPLAY "Other non-relative", IF S12a-y=15, DISPLAY "Unmarried partner of significant other	IF S6aa or S7b-y=1, DISPLAY "Person assigned male at birth" IF S6aa or S7b-y=2, DISPLAY "Person assigned female at birth" IF S6aa=6, DISPLAY "Person assigned intersex at birth", IF S6aa=7, DISPLAY "{Person/Child}", IF S6aa=8, 9, or 10, DISPLAY "{Person/Child}",  ELSE LEAVE BLANK	IF S6a-y= 18-110, INSERT AGE (S6a- y), IF S6a1 OR S6b1b- y=1 OR S10aa=1, INSERT "less than 18 years old", IF S6a1 OR S6b1b- y=2, 3 or 4 OR S10aa=2, 3, or 4, INSERT "18 or older", ELSE LEAVE BLANK

of the child's parent", ELSE LEAVE BLANK		
---	--	--

Is this information correct?

- 1 Yes
- 2 No

PROGRAM: IF NO, ALLOW PULL DOWN FOR S12 ANSWER CATEGORIES AND display "Please update the relationships if necessary".

SEX:

- IF S7b-y=1, DISPLAY "Person assigned male at birth",
- IF S7b-y=2, DISPLAY "Person assigned female at birth",
- IF S7b-y=6, DISPLAY "Person assigned intersex at birth",
- IF S7b-y=7, DISPLAY "the person who is {AGE}.",
- IF S7b-y=8, DISPLAY "the person who is {AGE}."
- ELSE DISPLAY "the person who is {AGE}."

*Ask if: Target is child ((TAGE<18 OR TAGE2=1) AND ((has less than 2 parents in HH AND there is another adult in the HH) OR (if R is only adult in HH (ADLTCNT=1) and S12b-y NE 4))*

**S12c.** (S12c (Web, CATI)

Are any {other} members of your household the legal guardian or caretaker of {TARGET}?

- 1 Yes GO TO S12d
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 CATI ONLY: (DO NOT READ) REFUSED
- 97 BLANK

INSERT "other" IF AT LEAST ONE PARENT IN HH.

*Ask if: Target has guardian or parent in HH (S12c=1)*

**S12d.** (S12d (Web, CATI)

Which household member (or members) is {TARGET}'s legal guardian or caretaker?  
(DO NOT READ, ALLOW MULTIPLE)

- 01 You
- 02 Household member 2
- 03 Household member 3

- 04 Household member 4
- 05 Household member 5
- 06 Household member 6
- 07 Household member 7
- 08 Household member 8
- 09 Household member 9
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 CATI ONLY: (DO NOT READ) REFUSED
- 97 BLANK

PROGRAM: SHOW HOUSEHOLD MEMBERS WHO ARE NOT PARENT S12a-y NE 4 AND AGE IS >=16.

ALL HH MEMBERS CODED AS GUARDIAN SHOULD BE UPDATED TO = 04 IN S12a/S12b.

SEX:

- IF S7b-y=1, DISPLAY "person assigned male at birth",
- IF S7b-y=2, DISPLAY "person assigned female at birth",
- IF S7b-y=6, DISPLAY "person assigned intersex at birth",
- IF S7b-y=7, DISPLAY "person",
- IF S7b-y=8, DISPLAY "person",
- ELSE DISPLAY "person"

[NEW QUESTION FOR 2025]

*Ask if: Target is between 18 and 26 (18<TAGE<26 OR TAGE2=2) AND AT LEAST ONE OTHER HH MEMBER IS SIBLING AND IS BELOW 26 ((S12b =5 OR S12a=5) AND S6<26 OR S6B1=1 OR 2) AND THERE ARE NO PARENTS IN HH (S12b NE 04 OR 15).*

S12e. {Were you/Was {TARGET}} ever the guardian of any of {your/their} siblings living in this household?

- 01 Yes
- 02 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

DISPLAY "Were you/your" IF RESPONDENT IS TARGET,  
ELSE DISPLAY "Was {TARGET}/their".

[NEW QUESTION FOR 2025]

*Ask if: S12e = 2, 98, 99, 97 OR Target is under 18 (TAGE<18 OR TAGE2= 2) AND AT LEAST ONE OTHER HH MEMBER IS SIBLING AND IS BELOW 26 ((S12b =5 OR S12a=5) AND S6<26 OR S6B1=1 OR 2) AND THERE ARE NO PARENTS IN HH (S12b NE 04 OR 15).*

S12f. Were any of {your/{TARGET}'s siblings in this household ever {your/{TARGET}'s} guardian?

- 01 Yes
- 02 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

DISPLAY "your/your" IF RESPONDENT IS TARGET,  
ELSE DISPLAY "{TARGET}'s/{TARGET}'s".

**SETUP1:**

**P.N. - Create the following variables to be used in remainder of survey:**

**HH\_COUNT** – Number of people in household (S4).

**TMARR** – 1 if TARGET is living with a spouse/partner; 0 otherwise.

**TPAR** – 1 if TARGET is parent of child <26 in household; 0 otherwise.

**TAGE** – TARGET's age.

**TAGE2** –

- 1 if TARGET's age S6b1(a-y) or S10aa=1 Less than 18
- 2 if TARGET's age S6b1(a-y) or S10aa=2 18 years of age to 25
- 3 if TARGET's age S6b1(a-y) or S10aa=3 26 to 64 years of age
- 4 if TARGET's age S6b1(a-y) or S10aa=4 65 and older.

NOTE: FOR THE REMAINING OF THE QUESTIONNAIRE, CONDITIONS BASED ON AGE ARE USING TAGE OR TAGE2. THE FOLLOWING ARE DECISIONS WHEN TAGE AND TAGE2 DO NOT PERFECTLY LINE UP.

TAGE>=16 OR TAGE2=2, 3, or 4

TAGE>=1 OR TAGE2=1, 2, 3, or 4

TAGE>11 OR TAGE2=2, 3, or 4

TAGE<16 OR TAGE2=1

**TFEM** – 0 if TARGET's sex assigned at birth is male (S6aa=1 OR S7b-y=1); 1 if TARGET's sex assigned at birth is female (S6aa=2 OR S7b-y=2); 2 otherwise.

**TFAM\_COUNT** –

IF ((TAGE<26 OR TAGE2=1 OR 2) & TMARR=0 & TPAR=0 & S12f=2, 97, 98, 99:  
TFAM\_COUNT=1;

IF (TAGE<26 OR TAGE2=1 OR 2) & TMARR=0 & TPAR=0:  
TARGET+PARENTS+SIBLINGS<26 FROM ROSTER (S12b-y=04 OR 15 OR 05);

IF (TAGE<26 OR TAGE2=1 OR 2) & (TMARR=1 OR TPAR=1): TARGET+SPOUSE (S11=1 OR 2)+CHILDREN<26 FROM ROSTER (S12b-y=3);

IF (TAGE=>26 OR TAGE2=3 or 4): TARGET+SPOUSE (S11=1 OR 2)+CHILDREN<26 FROM ROSTER (S12b-y=3).

ADLTCOUNT – Number of people in HH who are 18 or older (S6a-y>=18 OR S6b1b-y=2, 3 or 4).

SET THE FOLLOWING VARIABLES (RPAR AND RMARR):

IF TARGET IS UNDER 26 AND IS NOT MARRIED AND NOT A PARENT ((TAGE<26 OR TAGE2=1 OR 2) AND TMARR=0 AND TPAR=0) AND:

IF THE RESPONDENT INDICATED BEING THE PARENT OF THE TARGET AT S12 (S12\_01=04) OR S12d=1, RPAR=1

–ELSE RPAR=0.

IF –RESPONDENT IS SPOUSE OR UNMARRIED PARTNER OF THE TARGET (S12\_1=1 OR 2)

OR

–RESPONDENT IS PARENT OF THE TARGET AND THERE IS ANOTHER PERSON IN HH WHO IS PARENT OR UNMARRIED PARTNER OF CHILD'S PARENT (RPAR=1 AND (ANY 1 OF S12\_2 THROUGH S12\_25=04 OR 15)), RMARR=1

OR

–RESPONDENT IS NOT PARENT AND THERE IS ONE PERSON IN HH WHO IS PARENT AND RESPONDENT IS THE UNMARRIED PARTNER OF CHILD'S PARENT (RPAR<>1 AND (ANY ONE OF S12\_2 THROUGH S12\_25=4) AND S12\_1=15), RMARR=1

–ELSE RMARR=0.



## HEALTH INSURANCE- TARGET PERSON

**\*P.N #1– THROUGHOUT Q’NAIRE WHEN THE INSERT LANGUAGE IS REFERRING TO THE TARGET’S PARENT:**

**IF TARGET IS <18 YEARS OLD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET’S PARENT, THE INSERT SHOULD FOLLOW THE INSERTS FOR “RESPONDENT”.**

**IF TARGET IS <18 YEARS OLD AND RESPONDENT IS NOT TARGET’S PARENT, THE INSERT SHOULD BE “TARGET’S PARENT...”**

*Ask if: Family is more than 1 person (TFAM\_COUNT>1)*

### **FAMCONFIRM.**

For some of the questions in the survey we will be asking about {your/{TARGET}}’s family that is living with {you/TARGET}. For the purposes of the survey, we will use:

- “spouse” to include both married and unmarried partners
- “children” to include biological children, stepchildren, adopted children, foster children, or children of an unmarried partner
- “parent” to include biological parent, stepparent, parent through adoption, foster parent, or guardian, as well as any unmarried partner of a parent (IF TARGET IS LESS THAN 18 (TAGE<18) OR IS LESS THAN 26 AND IS NOT MARRIED AND NOT PARENT (TAGE<26 OR TAGE2=1 AND TMAR=0 AND TPAR=0))

We are defining family as all related family members who are living with {you/{TARGET}}.

INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT {TARGET}.

Ask All

HIntro. (HIntro)

{Web/CATI: The/My} next questions ask about health insurance.

*Ask if: All*

### **H0. (H0)**

The Health Connector is Massachusetts’ health insurance Marketplace. It helps individuals, families, and small businesses find health insurance that meets their needs and fits their budget. The Health Connector is different from MassHealth, but they do share an application. Had {you/{TARGET}}/{TARGET}’s parent(s)} heard of the Health Connector before?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON’T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “Have you” IF TARGET IS RESPONDENT,

INSERT "Have you" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "Have TARGET's parent(s)" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "Has {TARGET}".

*Ask if: Target is aware of Health Connector (H0 = 1)*

**H0a.** (H0a)

How much {have you/has {TARGET}/have {TARGET}'s parent(s)} heard about the Massachusetts Health Connector being available for state residents in need of health insurance?

- 1 A lot
- 2 Some
- 3 Only a little
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web blank

PROGRAM: INSERT "have you" IF TARGET IS RESPONDENT,  
 INSERT "have you" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "have TARGET's parent(s)" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "as {TARGET}".

*Ask if: All*

**H1.** (H1b, H1c, H1d, H1h, H1i, H1q, H1k, H1l, H1m, H1f)

{Web/CATI: Please tell us if {you/{TARGET}} currently {have/has} any of the following types of health insurance./I am going to read you a list of different types of health insurance. Please tell me if {you/{TARGET}} currently {have/has} any of the following types of health insurance.}

Please exclude any health insurance plans that cover only **one** type of service, like plans for dental care or prescription drugs.

{Do you/Does {TARGET}} currently have...

{Web/CATI: /(READ LIST.)}

{Web/CATI: /(IF RESPONDENT ASKS TO SKIP THROUGH INSURANCE QUESTIONS, SAY:) I'm sorry, but I have to read all of the health insurance categories.}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

- b. health insurance through {your/{TARGET}'s} work or union? {Web/CATI: / (PROBE:)} This health insurance could be through COBRA through a former employer, or a retiree benefit.
- c. health insurance through someone{ else's} work or union? {Web/CATI: / (PROBE:)} This health insurance could be through COBRA through a former employer, or a retiree benefit.
- d. Medicare? {Web/CATI: /(PROBE:)} Medicare is the health insurance for persons 65 years old and over or persons with disabilities. For many people this is a red, white and blue card.
- h. MassHealth or Medicaid? {Web/CATI: /(PROBE:)} This is a Massachusetts program for low- and moderate-income individuals, families with children, seniors, and people with disabilities. You may know it as MassHealth Standard, CommonHealth, Family Assistance, CarePlus, or MassHealth Premium Assistance. {You/{TARGET}} may have coverage under MassHealth through a health insurance plan.

Please **exclude** MassHealth Limited which provides emergency health services to people who have an immigration status that keeps them from getting more services.

- i. ConnectorCare? {Web/CATI: /(PROBE:)} ConnectorCare is available through the Health Connector for low- and moderate-income adults. ConnectorCare plans have no deductibles. {You/{Target}} would have coverage through a health insurance plan and the health insurance card would also say "ConnectorCare."
- q. a Health Connector Plan? A Health Connector plan is a private health insurance plan purchased through the Health Connector web page. The plan name may be called silver, gold, bronze, or platinum. {You/{Target}} may or may not have a federal subsidy to reduce {your/their} premium.
- k. a qualifying student health insurance plan? {Web/CATI: /(PROBE:)} A QSHIP is a health insurance plan that is available through {your/{Target}'s} college or university.
- l. health insurance bought directly from a health insurance company by {you/{Target}}? {Web/CATI: /(PROBE:)} For example, bought directly from Blue Cross Blue Shield or another company or bought through a health insurance broker.
- m. health insurance bought directly from a health insurance company by someone else? {{Web/CATI: /(PROBE:)}For example, bought directly from Blue Cross Blue Shield or another company or bought through a health insurance broker.}
- f. Veteran's Affairs, Military Health, TRICARE or CHAMPUS?

PROGRAM:

SHOW EACH ITEM ON SEPARATE SCREEN.

ASK ITEMS b, i, and l if (TAGE>=16OR TAGE2=2, 3, or 4)

FOR H1c, DISPLAY "else" ONLY IF TAGE>=16.

ASK ITEM m IF H1l AND H1b AND H1c < 1 >. IF ITEM l IS NOT ASKED, DISPLAY "For example, bought directly from Blue Cross Blue Shield or another company or bought through a health insurance broker."

ASK ITEM k if TAGE>=16 OR TAGE2=2 OR 3 AND <=64 AND H1b AND H1c < 1 >

INSERT “you/have/do you” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}/has/does”.  
 FOR H1q, INSERT “you/You” IF TARGET IS RESPONDENT, INSERT “you/TARGET” IF  
 RESPONDENT IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT  
 “TARGET’S parent(s)/TARGET” IF RESPONDENT IS CHILD (TAGE<18 OR TAGE2=1) AND  
 RESPONDENT NE PARENT, ELSE INSERT (TARGET/TARGET).  
 PLACE INTRO ON THE SCREEN WITH THE FIRST INSURANCE TYPE  
 STOP ASKING SERIES IMMEDIATELY AFTER H1h IF ANY H1b THROUGH H1h =1, OR AFTER  
 FIRST YES (=1) RESPONSE AFTER H1h.

*Ask if: Target did not report any insurance or refused or don’t know or does not answer (ALL IN  
 H1=2, or null, or 98, 99, 97)*

**H2.** (H2\_1, H2\_2, H2\_3, H2\_4, H2\_5, H2\_6, H2\_7, H2\_7\_OS, H2\_8, H2\_98, H2\_99, H2\_97)  
 {Do you/ Does {TARGET}} currently have any other type of health insurance?  
 {Web/CATI: Check all that apply./(DO NOT READ, ALLOW MULTIPLE.)}

- 1 Workers compensation for specific injury/illness
- 2 Employer pays bills, but not a health insurance policy
- 3 Family member pays out of pocket for any bills
- 4 Other non-health insurance payment source
- 5 Indian Health Service (IHS)
- 6 Free Care/Health Safety Net/Medical Hardship
- 9 MassHealth Limited
- 7 Other health insurance {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 8 No other health insurance
- 98 {Web/CATI: I don’t know/(DO NOT READ) DON’T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “Do you” if TARGET IS RESPONDENT, ELSE INSERT “Does {TARGET}”.  
 MAKE H2\_8 MUTUALLY EXCLUSIVE.

*Ask if: Target has workers compensation, MassHealth Limited, employer pays bills, family pays  
 out of pocket, or has other non insurance payment source (H2\_1=1 OR H2\_2=1 OR H2\_3=1 OR  
 H2\_4=1 OR H2\_9=1 ONLY)*

**H2b.**

For the purposes of this survey, we’ll assume that {you do/{TARGET} does} not have health  
 insurance.

PROGRAM:

INSERT “you do” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET} does”.  
 NOW GO TO H6

*Ask if: Target reported no insurance or refused or don't know (H2\_1-7 = 0, OR H2\_98=1, OR H2\_99=1, OR H2\_97=1, OR H2\_8=1)*

**H3. (H3)**

Just to be sure {Web/CATI: /I have this right}, {you do/{TARGET} does} not have health insurance. Is that correct?

- 1 Correct, {I/they} do not
- 2 Incorrect, {I/they} have health insurance
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

INSERT "you do/I" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} does/they".

*Ask if: Not correct, target has health insurance (H3 = 2)*

**H3a. (H3a, H3a\_OS)**

What health insurance do {you/they} have?

{Web/CATI: /(DO NOT READ, ENTER ONE ONLY.)}

{Web/CATI: /(PROBE:)} If you can, it might be helpful to look at {your/their} health insurance card to help identify the type of health insurance.

- 02 Health insurance through {your/{TARGET}'s} work or union
- 03 Health insurance through someone{ else}'s work or union
- 04 Medicare
- 08 MassHealth or Medicaid
- 09 ConnectorCare
- 22 Health Connector Plan
- 12 Health insurance bought directly from a health insurance company by {you/{TARGET}}
- 13 Health insurance bought directly by someone else
- 06 Veteran's Affairs, Military Health, TRICARE or CHAMPUS
- 11 Student health plan
- 05 Railroad Retirement Plan
- 07 Indian Health Service (IHS)
- 14 Free Care/Health Safety Net/Medical Hardship
- 15 Workers compensation for specific injury/illness
- 16 Employer pays for bills, but not a health insurance policy
- 17 Family member pays out of pocket for any bills
- 18 Other non-health insurance payment source
- 96 Other health insurance {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 98 {Web/CATI: I don't know/(DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED

## 97 Web Blank

PROGRAM: INSERT "you/your" IF TARGET IS RESPONDENT, ELSE INSERT "they/their/{TARGET}'s/{TARGET}".

DISPLAY RESPONSE OPTIONS 02 AND 12 IF TAGE >=16 OR TAGE2=2, 3, or 4.

DISPLAY "else" FOR OPTION 3 ONLY IF TAGE>=16.

*Ask if: R does not know, refuses, or leaves blank the type of health insurance target has (H3a = 98, 99, 97)*

### **H3b.** (H3b)

When {you/they} receive care from a doctor, health clinic, or hospital, does anyone else pay for some or all of {your/their} medical bills?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you/your" IF TARGET IS RESPONDENT, ELSE INSERT "they/their"

*Ask if: Target receives Free Care/Health Safety Net/Medical Hardship or Indian Health Service (H2\_5=1 OR H2f=1 OR H3a = 07, 14)*

### **H3c.** (H3c)

{Web/CATI: You selected that/I understand that} {you receive/{TARGET} receives} services through the {Indian Health Service/(Free Care/Health Safety Net/Medical Hardship)}. In addition to this, does anyone else pay for {your/{TARGET}'s} bills when {you/they} receive care from a doctor, health clinic, or hospital?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF H2\_5=1 or H3a=7, DISPLAY "Indian Health Service", ELSE DISPLAY "Free Care/Health Safety Net/Medical Hardship"

INSERT "you receive/your/you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} receives/{TARGET}'s/they".

*Ask if: No one else pays for bills or refuses or does not know or does not answer (H3c = 2, 98, 99, 97)*

**H3d.**

For the purposes of this survey, {Indian Health Service/(Free Care/Health Safety Net/Medical Hardship)} is not considered comprehensive health insurance. For our survey, we'll assume that {you do/{TARGET} does} not have health insurance.

PROGRAM:

IF H2\_5=1 or H3a=7, DISPLAY "Indian Health Service", ELSE DISPLAY "Free Care/Health Safety Net/Medical Hardship"

INSERT "you do" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} does".

NOW GO TO Q.H6

*Ask if: Someone else pays for medical bills (Q H3b=1 OR H3c = 1)*

**H4. (H4, H4\_OS)**

And who is that?

{Web/CATI: /(DO NOT READ, ENTER ONE ONLY.)}

- 02 Health insurance through {your/{TARGET}'s} work or union
- 03 Health insurance through someone{ else}'s work or union
- 04 Medicare
- 08 MassHealth or Medicaid
- 09 ConnectorCare
- 22 Health Connector Plan
- 12 Health insurance bought directly from a health insurance company by {you/{TARGET}}
- 13 Health insurance bought directly by someone else
- 06 Veteran's Affairs, Military Health, TRICARE or CHAMPUS
- 11 Student health plan
- 05 Railroad Retirement Plan
- 07 Indian Health Service
- 14 Free Care/Health Safety Net/Medical Hardship
- 15 Workers compensation for specific injury/illness
- 16 Employer pays for bills, but not a health insurance policy
- 17 Family member pays out of pocket for any bills
- 18 Other non-health insurance payment source
- 96 Other health insurance {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_
- 98 {Web/CATI: I don't know/(DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your/you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s/{TARGET}".

DISPLAY RESPONSE OPTIONS 02 AND 12 ONLY IF TAGE >=16 OR TAGE2=2, 3, or 4.

DISPLAY “else” FOR OPTION 3 ONLY IF TAGE>=16.

*Ask if: H0=2 AND (H1\_i=1 OR H1\_q=1 OR (H3a=09 or 22) or (H4=09 or 22))*

**H0b.** (H0b)

The Health Connector is Massachusetts' health insurance Marketplace. It helps individuals, families, and small businesses find health insurance that meets their needs and fits their budget. The Health Connector is different from MassHealth, but they do share an application. Had {you/{TARGET}/{TARGET}'s parent(s)} heard of the Health Connector before?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “Have you” IF TARGET IS RESPONDENT,  
INSERT “Have you” IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND  
RESPONDENT IS TARGET'S PARENT,  
INSERT “Have TARGET's parent(s)” IF RESPONDENT IS NOT TARGET'S PARENT AND  
(TAGE<18 OR TAGE2=1),  
ELSE INSERT “Has {TARGET}”.

*Ask if: Target is aware of Health Connector (H0c = 1)*

**H0c.** (H0c)

How much {have you/has {TARGET}/have {TARGET}'s parent(s)} heard about the Massachusetts Health Connector being available for state residents in need of health insurance?

- 1 A lot
- 2 Some
- 3 Only a little
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web blank

PROGRAM: INSERT “have you” IF TARGET IS RESPONDENT,  
INSERT “have you” IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND  
RESPONDENT IS TARGET'S PARENT,  
INSERT “have TARGET's parent(s)” IF RESPONDENT IS NOT TARGET'S PARENT AND  
(TAGE<18 OR TAGE2=1),  
ELSE INSERT “as {TARGET}”.



Ask if: Indian Health Service, OR Free Care/Health Safety Net/Medical Hardship OR Workers compensation for specific injury/illness OR Employer pays for bills, but not an insurance policy OR Family member pays out of pocket for any bills OR Other Non Insurance Payment Source (H4 = 07 OR 14-18)

#### H4a.

For purposes of this survey, we'll assume {you do/{TARGET} does} not have health insurance.

PROGRAM: INSERT "you do" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} does".  
NOW GO TO Q.H6

H4d deleted 2025

## SETUP2

**P.N.: CREATE VARIABLES FOR INSURANCE STATUS to use in rest of survey**

#### TINS:

- 1 TARGET is insured (H1b-q OR H2 = 7 OR  
H3a = 02-06, 08-13, 22, 96 OR H4 = 02-06, 08-13, 22, 96)
- 0 NOT insured [(ALL IN H1=2, or null, or 98, 99, 97) AND ((H2a=1 OR H2b=1 OR H2c=1  
OR H2d=1 OR H2e=1) AND H2f<>1) AND H3 = 1, 97, 98, 99] OR H3a = 7, 15-18, 98,99,  
97 OR H3c = 2, 98, 99, 97 OR H4 = 07, 14-18, 98, 99, 97

#### TESI:

- 1 TARGET has insurance through their employer. H1b=1 OR h3a=2 OR h4=2
- 0 otherwise

Ask if: Target is insured (TINS=1)

#### H5. (H5)

[{Have you/Has {TARGET}} **had health insurance** for all of the past 12 months?]  
[Has {TARGET} had health insurance since they were born?]

By the past 12 months, we mean from {today's date+1}/2024 to today.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF (TAGE $\geq$ 1 OR TAGE2=1, 2, 3, or 4) USE 1<sup>ST</sup> VERBIAGE IN BRACKETS.  
 IF TAGE<1 USE 2<sup>ND</sup> VERBIAGE IN BRACKETS AND DO NOT SHOW “By the past 12 months, we mean from {today’s date+1}/2024 to today”.  
 INSERT “Have you” IF TARGET IS RESPONDENT, ELSE DISPLAY “Has {TARGET}”

*Ask if: Target has had insurance for all of the past 12 months and is over the age of 1 (H5=1 and (TAGE $\geq$ 1 or TAGE2=1,2,3,or 4)*

**H5a.** (H5a)

How many years has it been since {you were/{TARGET} was} last uninsured?

{Web/CATI: /(READ LIST IF NECESSARY.)}

{Web/CATI: Please include any time {you were/{TARGET} was} uninsured, regardless of how long {you/they} were without insurance./IF NEEDED: Please include any time {you were/{TARGET} was} uninsured, regardless of how long {you/they} were without insurance.}

- 1 1 year
- 2 2 years
- 3 3 years
- 4 4 years
- 5 5 years
- 6 More than five years
- 7 Never uninsured
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “you were” IF TARGET IS RESPONDENT, ELSE DISPLAY “{TARGET} was”.

IF TARGET IS CHILD, AND SELECTED ANSWER (1-5) IS GREATER THAN TAGE, PLEASE SHOW ERROR MESSAGE: “Your response is greater than {TARGET}’s reported age, please verify your answer or click “Next” to continue.”

*Ask if: Target is insured and was at some point uninsured (TINS=1 AND H5a<>7) OR target is under the age of 1 and has not been insured since birth (tage<1 and h5=2)-*

**H6a.** (H6a)

{Were you/Was {TARGET}} uninsured just before {you/{TARGET}} obtained {your/their} current health insurance or did {you/{TARGET}} have some other type of health insurance?

- 1 {Web/CATI: /(DO NOT READ)}Uninsured just before {I/{TARGET}} obtained current health insurance
- 2 {Web/CATI: /(DO NOT READ)}Had some other type of health insurance
- 3 {Web/CATI: /(DO NOT READ)} Always had the same coverage
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}

99 (DO NOT READ) REFUSED  
97 Web Blank

PROGRAM: INSERT "Were you/you/your/I" IF TARGET IS RESPONDENT, ELSE DISPLAY "Was {TARGET}/{TARGET}/their".

*Ask if: Target is uninsured at time of survey (TINS=0) OR target is insured at time of survey but has had periods of uninsurance in the past 12 months (H5=2)*

**H6. (H6)**

How many months during the past 12 months {were you/was {TARGET}} **without health insurance?**

By the past 12 months, we mean from {today's date+1}/2024 to today.

\_\_\_\_\_ months  
00 Less than 1 month  
98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}  
99 (DO NOT READ) REFUSED  
97 Web Blank

PROGRAM: INSERT "were you" IF TARGET IS RESPONDENT, ELSE INSERT "was {TARGET}".  
RANGE: HARD 1-12

*Ask if: Target is uninsured (TINS=0)*

**H7. (H7, H7\_CYY, H7\_CMM, H7\_WYY, H7\_WMM)**

How long has it been since {you/{TARGET}} had any health insurance?

{Web/CATI: You may answer in years, months, or years and months./(PROBE FOR MONTHS IF LESS THAN 2 YEARS.)}

CATI  
01 ANSWER GIVEN IN YEARS \_\_\_\_\_ # (0-110) YEARS  
02 ANSWER GIVEN IN MONTHS \_\_\_\_\_ # (0-24) MONTHS  
00 LESS THAN 1 MONTH  
03 NEVER HAD COVERAGE  
98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}  
99 (DO NOT READ) REFUSED

WEB  
01 \_\_\_\_\_ # of years  
02 \_\_\_\_\_ # of months  
03 Never had coverage  
00 Less than 1 month  
97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}".  
RANGE:

HARD: IF YEARS IS MISSING, MONTHS RANGE IS 0-24, ELSE MONTHS RANGE IS 0-11

<p><i>Ask if: Target is uninsured (TINS=0)</i></p>
--

**H8.** (H8a, H8b, H8c, H8d, H8e, H8f, H8g, H8h, H8i, H8j, H8j\_OS)

{Web/CATI: Next is/I'm going to read} a list of reasons that people sometimes give for why they don't have health insurance. Please {Web/CATI: indicate/tell me} if these are reasons that {you do/{TARGET} does} not have health insurance.

{Web/CATI: /How about...}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. The person in family who had health insurance lost job or changed employers
- b. The person in family who had health insurance is no longer part of the family because of divorce, separation or death
- c. Family member's employer does not offer coverage or not eligible for employer's coverage
- d. Lost eligibility for MassHealth
- e. Cost is too high
- g. Don't need health insurance
- h. Don't know how to get health insurance
- i. The person in the family who had health insurance traded health insurance for another benefit or higher pay
- j. Some other reason for not having health insurance {Web/CATI: (please specify)/(SPECIFY:)}\_\_\_\_\_

PROGRAM: INSERT "you do" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} does".  
SCRAMBLE ITEMS WITH j ALWAYS LAST.

H9 deleted 2025

PROGRAM: INSERT "you/your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/{TARGET}'s".

ASK ITEMS 02, 05, 09, 10, 11, 12 IF (TAGE>=16 OR TAGE2=2, 3, or 4)

*Ask if: Target has private insurance – through his/her work or union, through Health Connector Plan, ConnectorCare, or through health insurance bought from an insurance company (H1b=1, H1q=1, H1i=1, OR H1l=1) OR (H3a=2, 9, 22, OR 12) OR (H4=2, 9, 22, OR 12)*

*IF INSURED THROUGH SOMEONE ELSE (H1c = 1, H3a=3, or H4=3) OR (H1m = 1, H3a = 13, or H4 = 13) AUTO-POPULATE H1ba=1 AND DO NOT ASK.*

**H1ba.** (H1ba)

Does {the health insurance through {your/{TARGET}'s} work or union/the health insurance through someone else's work or union/the ConnectorCare plan/the Health Connector plan/the health insurance bought directly from a health insurance company} cover more than one person?

- 1 Yes, (family policy)
- 2 No (individual policy)
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

IF H1b=1 or H3a=2 or H4=2, DISPLAY "the health insurance through {your/{TARGET}'s} work or union"

IF H1i=1 or H3a=9 or H4=9, DISPLAY "the ConnectorCare plan"

IF H1q=1 or H3a=22, DISPLAY "the Health Connector plan"

IF H1l=1 or H3a=12 or H4=12, DISPLAY "the health insurance bought directly from a health insurance company"

INSERT "your" if TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s".

IF INSURANCE IS THROUGH SOMEONE ELSE, (H1c OR H1M=1, SET H1ba=1 WITHOUT ASKING THE QUESTION.

*Ask if: Target has private insurance – through his/her work or union, through Health Connector Plan, ConnectorCare, or through health insurance bought from an insurance company (H1b=1, H1c=1, H1q=1, H1i=1, H1l=1, OR H1m=1) OR (H3a=2, 3, 9, 22, 12, OR 13) OR (H4=2, 3, 9, 22, 12, OR 13)*

**H5aa.** (H5aa)

A deductible is the amount {you/{TARGET}/{TARGET}'s parent(s)} must pay out of {your/their} own pocket each year before health insurance begins paying for health care services. Does {your/{TARGET}'s} health insurance have a deductible?

- 1 Yes
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you/your/your" IF TARGET IS RESPONDENT,

INSERT "you/your/{TARGET}'s" IF (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "{TARGET}'s parent(s)/their/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET}/their/{TARGET}'s".

*Ask if: Health insurance has deductible (H5aa=1) and has a family or individual policy (H1ba=1 or 2)*

**H5ab.** (H5ab)

Is the annual deductible for medical care for this {family} plan less than \${1,650/3,300} or \${1,650/3,300} or more?

If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

- 1 No, it is less than \${1,650/3,300}
- 2 Yes, it is \${1,650/3,300} or more
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

IF ONLY ONE PERSON COVERED BY THE PLAN (H1ba=2), INSERT "1,650", ELSE INSERT "3,300"

INSERT "family" IF H1ba=1A.

**NEW QUESTION 2025:**

*Ask if: Target is insured (TINS=1)*

**H4e.** (H4e\_a, H4e\_b, H4e\_c, H4e\_d)  
 {Do you/Does {TARGET}/Do {TARGET}'s parent(s)} have a special account or fund {you/{TARGET}/{TARGET}'s parent(s)} can use to pay for {your/their/{TARGET}'s} medical expenses?

- a. Health Savings Account (HSA)
- b. Health Reimbursement Account (HRA)
- c. Flexible Spending Account (FSA)
- d. Another type of account, such as a Personal Care Account, Choice funds, or some other type of personal medical fund.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

INSERT "Do you/you/your" IF TARGET IS RESPONDENT  
 INSERT "Do you/you/{TARGET}'s" IF RESPONDENT IS TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 INSERT "Do {TARGET}'s parent(s)/{TARGET}'s parent(s)/{TARGET}" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "Does {TARGET}/{TARGET}/their".  
 DISPLAY AS GRID.

[NEW QUESTIONS FOR 2023]

Ask if: Target is insured (TINS=1)

**H5ac/H5ad.** (H5ac, H5ad)

Does {your/{TARGET}'s} health insurance cover any visits for the care or treatment of:

- d. alcohol or substance use problems, such as visits for therapy, rehab, or acute residential treatment or detox programs?
- c. mental health problems, such as visits for individual or group therapy, specialty outpatient services, medication management or inpatient treatment?

- 1 Yes
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s".  
 SHOW IN GRID FOR WEB, AS INDIVIDUAL QUESTIONS FOR CATI.

## EMPLOYMENT

Ask if: Target is 16 or older (TAGE>=16 OR TAGE2=2, 3, or 4)

**E0.**

{Web/CATI: The next questions ask about employment./My next questions ask about employment.}

Ask if: Target is 16 or older (TAGE>=16 OR TAGE2=2, 3, or 4)

**E0a.** (E0a)

Last week, did {you/{TARGET}} work for pay at a job or business?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: Target did not work for pay at a job or business last week, (E0a=2)*

**E0b.** (E0b)

Last week, did {you/{TARGET}} do **any** work for pay, even for as little as one hour?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: Target did not do any work for pay last week, (E0b=2)*

**E0c.** (E0c)

What is the main reason {you/{TARGET}} did not work last week? {Web/CATI: Were you/Was {TARGET}.../}

{Web/CATI: Main reason is the most important reason./(IF NEEDED, SAY: Main reason is the most important reason.)}

- 1 Taking care of house or family
- 2 On a planned vacation
- 3 Not able to find a job
- 4 Going to school (student)
- 5 Retired
- 6 Disabled
- 7 Unable to work temporarily
- 8 On layoff
- 9 On strike
- 10 On family or maternity leave
- 11 Off season
- 12 Sick
- 91 Not working for some other reason
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

E1a deleted 2025

E1aa deleted 2025

## **HEALTH STATUS**



Ask if: All

**HS0.**

{Web/CATI: The/My} next questions are about {your/{TARGET}'s} health. Remember that your answers to these questions and all other questions are confidential.

Ask if: All

**HS1.** (HS1)

Would you say that in general {your/{TARGET}'s} health is excellent, very good, good, fair, or poor?

{Web/CATI: /PROBE: Remember that your answers to this question and all other questions are confidential.}

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT ELSE  
INSERT "{TARGET}'s".

[DELETED 2023, RETURNED 2025]

Ask if: Age is greater than 1 (TAGE>1) or TAGE2=1, 2, 3, or 4

**HS1a.** (HS1a)

Would you say that in general {your/{TARGET}'s} mental health is excellent, very good, good, fair, or poor?

{Web/CATI: /PROBE: Remember that your answers to this question and all other questions are completely confidential.}

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT ELSE  
INSERT "{TARGET}'s".

*Ask if: All*

**HS2. (HS2)**

{Are you/Is {TARGET}} limited in any way in {your/their} activities because of a physical, mental, or emotional problem?

{Web/CATI: /PROBE:} Remember that your answers to this question and all other questions are confidential.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "Are you/your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/their".

*Ask if: All*

*Source: CHIS*

**HS3. (HS3)**

{Do you/Does {TARGET}} currently have a health condition that has lasted for a year or more or is expected to last for a year or more? This could be a physical health condition (such as arthritis, asthma, cancer, dementia, diabetes, heart disease, high cholesterol, hypertension or stroke), a behavioral/mental health condition, or a developmental disability. Do not include dental conditions. {Web/CATI: /PROBE: Remember that your answers to this question and all other questions are confidential.}

- 1 Yes, one condition
- 2 Yes, more than one condition
- 3 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "Do you" IF TARGET IS RESPONDENT  
INSERT "Does TARGET" IF PERSON ASKING ABOUT IS "TARGET PERSON"

**ACCESS, USE AND COST**

*Ask if: All*

**A1. (A1)**

{Web/CATI: The following/My next} questions ask about {your/{TARGET}'s} recent health care experiences.

Is there a place where {you/{TARGET}} usually {go/goes} when {you/they} are sick or when {you/they} need advice about {your/their} health?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your/you/go" IF TARGET IS RESPONDENT,  
ELSE INSERT "{TARGET}'s/{TARGET}/goes/they/their)".

*Ask if: Target goes to specific place for care (A1 = 1)*

**A2.** (A2, A2\_OS)

What kind of place is it? {Web/CATI: /Is it...?}

{Web/CATI: /(READ LIST. ENTER ONE ONLY)}

- 1 A doctor's office or private clinic
- 2 A community health center or other public clinic
- 3 A hospital outpatient department
- 4 A hospital emergency room
- 5 An urgent care center that is not part of a community health center
- 6 {Web/CATI: Some other place (please specify)/Or, some other place? (SPECIFY:)}
- 7 {Web/CATI: {I don't/{TARGET} doesn't} go to one place most often/(DO NOT READ) Doesn't go to one place most often}
- 98 {Web/CATI: I don't know/(DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "I don't" IF TARGET IS RESPONDENT), ELSE INSERT "{TARGET} doesn't".

[NEW QUESTION FOR 2023]

*Ask if: All*

**A2d.** (A2d)

{Do you/Does {TARGET}} have a regular primary care provider?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “Do you” IF TARGET IS RESPONDENT), ELSE INSERT “Does {TARGET}”.

[NEW QUESTION FOR 2025]

*Ask if: All*

**A2e.** (A2e)

About how long has it been since {you/{TARGET}} last saw a regular primary care provider for a routine check-up? A routine check-up is a visit **not** for an illness or problem.

- 1 One year ago or less
- 2 A year to less than 2 years ago
- 3 2 to less than 5 years ago
- 4 5 years ago or more
- 5 Never
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}”.

*Ask if: All*

**A3.** (A3)

The next questions are about the health care {you/{TARGET}} received in the past 12 months.

In the past 12 months, how many times did {you/{TARGET}} receive care in a hospital emergency room?

By the past 12 months, we mean from {today's date+1}/2024 to today.

{Web/CATI: Your best guess is fine.}/(READ LIST. ENTER ONE ONLY.)

- 0 None
- 1 1 time
- 2 2 times
- 3 3 times
- 4 More than 3 times
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}”.

*Ask if: Target received care in ER in past 12 months (A3=1, 2, 3, 4)*

**A3a.** (A3a)

The last time {you/{TARGET}} went to a hospital emergency room, was it for a condition that {you/{TARGET}}/{TARGET}'s parent(s) thought could have been treated by a regular doctor if they had been available?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT OR (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "{TARGET}'s parent(s)" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET}".

*Ask if: Condition could have been treated by regular doctor (A3a=1)*

**A3b.** (A3ba, A3bb, A3bc, A3bd)

{Web/CATI: Next is a list of reasons why some people/I'm going to read you a list of reasons why people sometimes} go to the emergency room.

{Web/CATI: Please indicate/Please tell me} if any of these were important reasons for {your/{TARGET}'s} last visit to a hospital emergency room.

{Web/CATI: /Was this an important reason?}

- 1 Yes
  - 2 No
  - 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- a. {You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get an appointment at the doctor's office or clinic as soon as {you/{TARGET}}/they thought one was needed
  - b. {You/{TARGET}} needed care after normal operating hours at the doctor's office or clinic
  - c. {You/{TARGET}}/{TARGET}'s parent(s) owed money to the doctor's office or clinic
  - d. It was more convenient to go to the hospital emergency room
  - e. {Your/TARGET's} previous provider was no longer available due to the office or clinic closing

PROGRAM: INSERT "your/You were/you" IF TARGET IS RESPONDENT,  
 INSERT "{TARGET}'s/You were/{TARGET}}/you" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "{TARGET}'s/{TARGET}'s parent(s) was/they/{TARGET}" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET}'s/{TARGET} was/{TARGET}".

DISPLAY AS GRID.

*Ask if: Target received care in ER in past 12 months (A3=1, 2, 3, 4)*

**A3c.** (A3ca, A3cb, A3cc, A3cd)

What type of condition did {you/TARGET} have, the last time {you/{TARGET}} went to a hospital emergency room?

{Web/CATI: Check all that apply./READ LIST. CHECK ALL THAT APPLY.}

- a. A condition related to physical health
- b. A condition related to mental health
- c. A condition related to alcohol or substance use disorder
- d. Some other reason (please specify) \_\_\_\_\_

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}".

ASK ITEM b IF (TAGE>1 OR TAGE2=1, 2, 3, or 4)

ASK ITEM c IF (TAGE>11 OR TAGE=2 OR 3)

*Ask if: All*

**A4.**

For the next several questions, {Web/CATI: we/I} want to ask you about health care that {you/{TARGET}} received through an office or clinic. Please do not include care received when {you were/{TARGET} was} hospitalized overnight or in hospital emergency rooms. Please include in-person visits and telehealth appointments. Telehealth appointments are when care is provided by phone, video, text, app, or chat instead of in-person.

PROGRAM: INSERT "you/you were" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/{TARGET} was".

[NEW QUESTION IN 2025 – A5ab]

*Ask if: All*

**A5/A5aa/A5ab/A6.** (A5, A5aa, A5ab, A6)

{Web/CATI: Next is a list of care providers. Please indicate/Next, I'm going to read you a list of care providers. Please tell me} how many times in the past 12 months {you/{TARGET}} received care from...

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

{Web/CATI: Your best guess is fine./IF NEEDED: Your best guess is fine.}

- A5. a general doctor who treats a variety of illnesses? For example, a doctor {or pediatrician} in general practice, family medicine or internal medicine.

- A5aa. a nurse practitioner or physician assistant{, or midwife}?
- A6. a specialist? Specialists are doctors like surgeons, heart doctors, OB/GYN, allergy doctors, skin doctors and others who specialize in one area of health care.
- A5ab. A provider at an Urgent Care Clinic, not including care at an emergency room or from {your/{TARGET}'s} regular primary care provider.

- 0 None
- 1 1 time
- 2 2 times
- 3 3 times
- 4 More than 3 times
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}".  
 IF (TAGE<18 OR TAGE2=1), INSERT "or pediatrician".  
 IF (TFEM=1 OR 2) AND S6 OR S6(b-y)>=12, INSERT ", or midwife".  
 SHOW AS GRID.

*Ask if: Target received care from doctor or NP or PA (A5=1, 2, 3, 4 OR A5aa=1, 2, 3, 4)*

**A5a. (A5a)**

For this question, {Web/CATI: I/we} want you to think about all the times {you/{TARGET}} received care from a general doctor, nurse practitioner or physician assistant{, or midwife} in the past 12 months. {Was this visit/Were any of those visits} with a general doctor, nurse practitioner or physician assistant{, or midwife} for a check-up, physical examination or for other preventive care? Please exclude any visits with a provider at an Urgent Care Clinic.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}".  
 IF ONLY A5 = 1 OR A5A = 1, INSERT "Was this visit"; IF A5 AND A5aa=1 OR A5=2-4 OR A5aa=2-4 INSERT "Were any of those visits".  
 INSERT ", or midwife" ONLY IF (TFEM = 1 OR 2) AND Q.S6 OR Q.S6(b-j) >=12.

*Ask if: Target is over the age of 1 (TAGE>1 OR TAGE2=1, 2, 3, or 4)*

**A6b. (A6b)**

In the past 12 months, did {you/{TARGET}} receive care from a mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

Please include in-person visits and telehealth care provided by phone, video, text, app, or chat, as well as by providers through services like BetterHelp and Talkspace.

Please do not include care received when {you were/{TARGET} was} hospitalized overnight or in hospital emergency rooms.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you/you were" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/{TARGET} was".

[MOVED IN 2025]

*Ask if: Target is over the age of 11 (TAGE>11 OR TAGE2=2, 3, or 4)*

**A6c.** (A6c)

In the past 12 months, did {you/{TARGET}} receive care from a medical professional for an alcohol or substance use disorder?

Please include in-person visits and telehealth care provided by phone, video, text, app, or chat, as well as by providers through services like BetterHelp and Talkspace.

Please do not include care received when {you were/{TARGET} was} hospitalized overnight or in hospital emergency rooms.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you/you were" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/{TARGET} was".

[NEW QUESTION IN 2025]

*Ask if: Target had a mental health or substance use visit (A6b=1 or A6c=1)*

**A6aa.** Which one category best describes the facility where {you/{TARGET}} most recently received care for {mental health/substance use/mental health or substance use}?

- 1. Office of a therapist, psychologist, psychiatrist, or a social worker.
- 2. General medical clinic or doctor's office, including primary care providers.
- 3. School's health or counseling center.



4. Community Mental Health Centers or Certified Community Behavioral Health Clinics.
5. Day treatment or intensive outpatient treatment facility.
6. Residential treatment center.
7. Veterans Affairs Medical Center (VAMC) or other VA healthcare facility
8. Multi-setting mental health facility, which provides mental health services in 2 or more settings, including inpatient, outpatient, or residential care.
9. Detoxification program.
10. Opioid Treatment Program.
11. Community health clinics.
12. Telehealth, such as care provided by phone, video, text, app, or chat, as well as by providers through services like BetterHelp and Talkspace.
- 13 Other (Specify:\_\_\_\_\_)

**PROGRAM:**

INSERT "you" IF RESPONDENT IS TARGET,

ELSE INSERT "{TARGET}".

INSERT "mental health" IF A6b=1 and A6c ne 1.

INSERT "substance use" IF A6b ne 1 and A6c=1.

INSERT "mental health or substance use" IF A6b=1 and A6c=1.

ONLY SHOW OPTIONS 9 AND 10 IF A6c=1.

*Ask if: Target had a mental health or substance use visit (A6b=1 or A6c=1)*

**A6ba. (A6ba)**

Thinking about {your/TARGET's} most recent appointment with a {mental health professional/medical professional for the care or treatment of an alcohol or substance use disorder/mental health professional or a medical professional for the care or treatment of an alcohol or substance use disorder}, did {you/TARGET/TARGET's parent(s)} pay the entire bill for the appointment out-of-pocket? This might include payments made in cash or from special accounts {you/they} may have for health care spending, such as Flexible Spending Accounts, Health Savings Accounts, or Health Reimbursement Arrangements.

1 Yes

2 No

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

**PROGRAM:**

- INSERT "your/you/you" IF TARGET IS RESPONDENT.
- INSERT "{TARGET}'s/you/you" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,
- INSERT "{TARGET}'S/{TARGET}'s parent(s)/they" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),
- ELSE INSERT "{TARGET}'s/{TARGET}/they"
- INSERT "mental health professional" IF A6b=1 and A6c ne 1.
- INSERT "medical professional for the care or treatment of an alcohol or substance use disorder" IF A6b ne 1 and A6c=1.

- INSERT "mental health professional or a medical professional for the care or treatment of an alcohol or substance use disorder" IF A6b=1 and A6c=1.

Ask if: Target didn't pay in full for mental health visit (A6ba = 2)

**A6bb.** (A6bb)

Why didn't {you/{TARGET}/{TARGET}'s parent(s)} have to pay the entire cost of the appointment out-of-pocket?

{Web/CATI: Check all that apply./READ LIST IF NECESSARY. CHECK ALL THAT APPLY.}

- 1 Insurance covered some or all of the cost (SHOW ONLY IF TARGET WAS INSURED AT ANY TIME IN PAST 12 MONTHS: H5=1 OR H6<12 or or H6=97, 98, 99)
- 2 It was free
- 3 It was discounted or at a sliding scale clinic
- 4 A family member, friend, or someone else paid
- 5 Other (please specify)
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED

**PROGRAM:**

- INSERT "you" IF TARGET IS RESPONDENT.
- INSERT "you" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,
- INSERT "{TARGET}'s parent(s)/" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),
- ELSE INSERT "{TARGET}"

Ask if: ((A6ba=1 OR A6bb=2, 3, or 4) AND A6bb NE 1) AND (H5=1 OR (H6<12 OR H6=97, 98, 99))

**A6bc.** (A6bc)

Why did {you/{TARGET}/{TARGET}'s parent(s)} {pay out of pocket / go to a free or sliding scale clinic} for {your/their} most recent appointment?

{Web/CATI: Check all that apply./ READ LIST IF NECESSARY. CHECK ALL THAT APPLY.}

- 1 {Your/TARGET's} provider does not accept any health insurance
- 2 {Your/TARGET's} insurance plan is not accepted by {your/TARGET's} preferred provider
- 3 —
- 4 {You weren't/TARGET wasn't/TARGET's parent(s) weren't} sure how {your/TARGET's} insurance works for mental health
- 5 It wasn't worth the hassle to try to use health insurance
- 6 Unable to get appointment using {your/TARGET's} health insurance as soon as {you/TARGET/TARGET's parent(s)} thought it was needed
- 7 {You/TARGET/TARGET's parent(s)} tried using {your/TARGET's} insurance with this or another provider but ran into a problem (such as the claim was denied, or ran out of visits)
- 8 —

- 9—  
 10—  
 11 Apps like BetterHelp, TherapyChat, and DoMental do not accept insurance.  
 12—  
 13 Some other reason {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_  
 98 (DO NOT READ) DON'T KNOW  
 99 (DO NOT READ) REFUSED

**PROGRAM:**

Offer "{You/TARGET} didn't have insurance at the time {you/TARGET} needed care" if they had any insurance gap in past 12 months (H5=2 OR H6>=0).

IF TARGET IS RESPONDENT INSERT "You/your".

IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT, INSERT "TARGET/You/Your".

IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT TARGET'S PARENT, INSERT "TARGET's parent(s)/their".

ELSE INSERT "TARGET".

If A6bb's response was:

"It was free" or "It was discounted or sliding scale clinic" (A6bb=2 OR 3), display "go to a free or sliding scale clinic"

"A family member paid" (A6bb=4), display "pay out of pocket"

IF A6BB=2 or 3, ONLY DISPLAY REPSONSES 3-13, ELSE DISPLAY ALL RESPONSES

A6c moved 2025

A6ca deleted 2025

A6cb deleted 2025

A6cc deleted 2025

Ask if: Target is over the age of 1 (TAGE>1 OR TAGE2=1, 2, 3, or 4)
---

**A6da. (A6da)**

Thinking about the past 12 months, was there any time that {you/{TARGET}/{TARGET}'s parent(s)} did not get mental health care or counseling that {you/{TARGET}} needed?

- 1 Yes, there was a time {you/{TARGET}} did not get needed care
- 2 No, there was not a time {you/{TARGET}} did not get needed care
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

- INSERT "you/you" IF TARGET IS RESPONDENT.
- INSERT "you/{TARGET}" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

- INSERT "{TARGET}'s parent(s)/{TARGET}" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),
- ELSE INSERT "{TARGET}"

Ask if: Target is over the age of 11 (TAGE>11 OR TAGE2=1, 2, 3, or 4)

**A6db.** (A6db)

Also thinking about the past 12 months, was there any time that {you/{TARGET}/{TARGET}'s parent(s)} did not get care for alcohol or substance use disorder that {you/{TARGET}} needed?

- 1 Yes, there was a time {you/{TARGET}} did not get needed care
- 2 No, there was not a time {you/{TARGET}} did not get needed care
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

- INSERT "you/you" IF TARGET IS RESPONDENT.
- INSERT "you/{TARGET}" IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,
- INSERT "{TARGET}'s parent(s)/{TARGET}" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),
- ELSE INSERT "{TARGET}"

Ask if: All

**A7.** (A7)

In the past 12 months, did {you/{TARGET}} see a dentist or a dental hygienist?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}".

[NEW QUESTION FOR 2025]

Ask if: All

**A7a.** (A7a)

In the past 12 months, did {you/{TARGET}} see an eye doctor, optometrist, or ophthalmologist (someone who prescribes eyeglasses)?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM: INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}”.

A10 deleted 2025

A10a deleted 2025

A10aa deleted 2025

A10b deleted 2025

*Ask if: All*

**A8. (A8)**

In the past 12 months, did {you/{TARGET}} take any drugs or medications that were prescribed to {you/them}?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT “{TARGET}/them”.

*Ask if: All*

**A9. (A9a, A9j, A9c, A9d, A9e, A9f, A9g, A9h, A9i)**

Thinking about the past 12 months, was there any time that because of cost, {you/{TARGET}}/{TARGET}'s parent(s) did...

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- b. not get a routine check-up for {you/{TARGET}} (a visit not for an illness or problem)?
- a. not fill a prescription for medicine needed for {you/{TARGET}}?
- j. not get doctor care that {you/{TARGET}} needed?
- c. not get care from a nurse practitioner or physician assistant {or midwife} that {you/{TARGET}} needed?

- d. not get specialist care that {you/{TARGET}} needed? {Web/CATI: /(IF NEEDED:)} Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors and others who specialize in one area of health care.
- e. not get mental health care or counseling that {you/{TARGET}} needed ?
- f. not get dental care that {you/{TARGET}} needed?
- g. not get alcohol or substance use disorder care or treatment that {you/{TARGET}} needed?
- h. not get vision care that {you/{TARGET}} needed?
- i. not get medical equipment that {you/{TARGET}} needed?

PROGRAM: INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}"  
 FOR A9a ONLY, IN THE QUESTION, IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT "you", ELSE INSERT "{TARGET}'s parent(s)".  
 ASK ITEM e IF (TAGE>1 OR TAGE2=1, 2, 3, or 4)  
 ASK ITEM g if (TAGE>11 OR TAGE2=2, 3, or 4)  
 IF (TFEM=1 OR 2) AND S6 OR S6(b-y)>=12, INSERT "or midwife".  
 SCRAMBLE.

*Ask if: (TARGET is insured at the time of the survey but uninsured at some point in the past 12 months (H5=2) OR uninsured at the time of the survey but insured at some point in the past 12 months (TINS=0 AND H6<12))) AND at least one unmet need (any A9a-i=1)*

**A9a2.** (A9a2)

Thinking about the last time {you/{TARGET}} went without needed care because of cost, was it during a time that {you/they} had health insurance?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF A9=1 TO ANY AND TINS=1 AND H5=1 GEN IN CODE 1  
 INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/they".

*Ask if: Target had at least one unmet need (any A9a-i=1) AND was at a time when target had health insurance (H5=1 or A9a2=1)*

**A9aa.** (A9aa\_1, A9aa\_2, A9aa\_3, A9aa\_4, A9aa\_5, A9aa\_6, A9aa\_6\_OS, A9aa\_98, A9aa\_99, A9aa\_97)

The last time {you/{TARGET}} went without needed care because of cost was it because of any of the following?

{Web/CATI: Check all that apply./ READ LIST. CHECK ALL THAT APPLY.}

- 1 The care was not covered by {your/their} health plan

- 2 The co-payment or co-insurance for the care under {your/their} health plan was too high
- 3 The care had to be paid for as part of the deductible under {your/their} health plan
- 4 {You weren't/{TARGET} wasn't/{TARGET}'s parent(s) wasn't} sure whether the care was covered by {your/their} health plan
- 5 {You weren't/{TARGET} wasn't/{TARGET}'s parent(s) wasn't } sure how much the care would cost
- 6 Something else {Web/CATI: (please specify)/(SPECIFY:)}\_\_\_\_\_
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you/your/you weren't" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/their/{TARGET} wasn't".

FOR A9aa\_4 and A9aa\_5 ONLY, IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT "You weren't", ELSE INSERT "{TARGET}'s parent(s) wasn't".

Ask if: All
-------------

**A9ba.** (A9ba)

{Web/CATI: Next are problems some people experience when they try to get health care. Please indicate/Next, I'm going to read you problems some people experience when they try to get health care. Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get an appointment at a doctor's office or clinic as soon as {you/{TARGET}/{TARGET}'s parent(s) or guardian} thought one was needed.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IN THE QUESTION:

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,  
 INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s)}/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

IN THE RESPONSES:

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}".

[NEW QUESTION FOR 2025]

Ask if: A9ba=1

**A10ca.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use

PROGRAM:

SHOW AS GRID. SCRAMBLE.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

Ask if: All

**A9bb.** (A9bb)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get an appointment with a specialist as soon as {you/{TARGET}/{TARGET}'s parent(s)} thought one was needed.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:



IN THE QUESTION:

INSERT “you have/you/your” IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET’S PARENT,  
 INSERT “{TARGET}’s parent(s) has/{TARGET}’s parent(s)/{TARGET}’s” IF RESPONDENT IS NOT TARGET’S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT “{TARGET} has/{TARGET}/{TARGET}’s”.  
 INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET’S PARENT.

IN THE RESPONSES:

INSERT “you were/you” IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET’S PARENT,  
 INSERT “{TARGET}’s parent(s) was/{TARGET}’s parent or guardian/{TARGET}’s IN OPTION C” IF RESPONDENT IS NOT TARGET’S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT “{TARGET} was/{TARGET}’s/{TARGET}”.

[NEW QUESTION FOR 2025]

Ask if: A9bb=1

**A10cb.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON’T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

a.—

- b. Mental health
- c. Substance use
- d. Other type of care

PROGRAM:

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY “you” IF RESPONDENT IS TARGET.

ELSE DISPLAY “{TARGET}”.

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

Ask if: All

**A9bc.** (A9bc)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}’s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}’s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}’s parent(s) was} told by a doctor’s office or clinic that they weren’t accepting patients {IF TINS=1, with {your/{TARGET}’s} type of health insurance./IF TINS=0, without health insurance.}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

**IN THE QUESTION:**

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s)/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

**IN THE RESPONSES:**

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}'".

**[NEW QUESTION FOR 2025]**

*Ask if: A9bc=1*

**A10cc.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use
- d. Other type of care

**PROGRAM:**

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}'".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

*Ask if: All*

**A9bd.** (A9bd)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.  
 {Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} told by a doctor's office or clinic that they weren't accepting new patients.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

**IN THE QUESTION:**

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s)}/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

**IN THE RESPONSES:**

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),  
 ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}'".

[NEW QUESTION FOR 2025]

Ask if: A9bd=1

**A10cd.** Was that for:

- 1 Yes
  - 2 No
  - 98 (DO NOT READ) DON'T KNOW
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- 
- a. Primary care
  - b. Mental health
  - c. Substance use
  - d. Other type of care

**PROGRAM:**

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

*Ask if: All*

**A9bh.** (A9bh)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get to an appointment at a doctor's office or clinic because of transportation issues.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

**IN THE QUESTION:**

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s}/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

**IN THE RESPONSES:**

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}'".

[NEW QUESTION FOR 2025]

*Ask if: A9bh=1*

**A10ch.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use
- d. Other type of care

PROGRAM:

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

Ask if: All
-------------

**A9bk.** (A9bk)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to schedule an appointment because {you/TARGET} reached the limit on the number of visits that health insurance would cover.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IN THE QUESTION:

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s}/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

IN THE RESPONSES:

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}".

[NEW QUESTION FOR 2025]

Ask if: A9bk=1

**A10ck.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use
- d. Other type of care

PROGRAM:

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

Ask if: All

**A9bl.** (A9bl)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get an appointment because {your/TARGET's} previous provider was no longer available because their office or hospital closed permanently.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IN THE QUESTION:

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s)}/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

IN THE RESPONSES:

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}".

[NEW QUESTION FOR 2025]

Ask if: A9b1=1

**A10cl.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use
- d. Other type of care

PROGRAM:

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

Ask if: All

**A9bm.** (A9bm)

{Web/CATI: Please indicate/Please tell me} if {you have/{TARGET} has}/{TARGET}'s parent(s) has} had these problems in the past 12 months {when trying to get health care for {TARGET}}.

{Web/CATI: /Has this happened to {you/{TARGET}/{TARGET}'s parent(s)} in the past 12 months?}

{You were/{TARGET} was/{TARGET}'s parent(s) was} unable to get a prescription filled because {your/{TARGET}'s} pharmacy closed permanently.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IN THE QUESTION:

INSERT "you have/you/your" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) has/{TARGET}'s parent(s)/{TARGET}'s" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} has/{TARGET}/{TARGET}'s".

INSERT {when trying to get health care for {TARGET}} IF TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT.

IN THE RESPONSES:

INSERT "you were/you" IF TARGET IS RESPONDENT OR TARGET IS LESS THAN 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS TARGET'S PARENT,

INSERT "{TARGET}'s parent(s) was/{TARGET}'s parent or guardian/{TARGET}'s IN OPTION C" IF RESPONDENT IS NOT TARGET'S PARENT AND (TAGE<18 OR TAGE2=1),

ELSE INSERT "{TARGET} was/{TARGET}'s/{TARGET}'".

[NEW QUESTION FOR 2025]

Ask if: A9bm=1

**A10cm.** Was that for:

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Primary care
- b. Mental health
- c. Substance use
- d. Other type of care

PROGRAM:

SHOW AS GRID. SCRAMBLE, BUT KEEP D (OTHER TYPE OF CARE) AT BOTTOM.

DISPLAY "you" IF RESPONDENT IS TARGET.

ELSE DISPLAY "{TARGET}'".

ONLY SHOW OPTION C IF TARGET IS AGED 11 OR OLDER (TAGE>11 OR TAGE2=2, 3, or 4)

[NEW QUESTION FOR 2025]

Ask if: All

**A10e.** At any time in the past 12 months, {have you/has {TARGET}/have {TARGET}'s parent(s)} had problems with any of the following:

- 1 Yes
- 2 No



- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Obtaining information from {your/{TARGET}'s} health plan about {your/{TARGET}'s} coverage (such as, the provider network, plan deductible, benefits covered, or the prescription drugs covered).
- b. Obtaining information from a provider or provider's office about {your/{TARGET}'s} health care, such as test results.
- c. Resolving a medical bill or payment for care with {your/{TARGET}'s} health plan.
- d. Resolving a medical bill or payment for care with a provider or provider's office.
- e. Obtaining authorization from {your/{TARGET}'s} health plan for health care {you/{TARGET}/{TARGET}'s parents} thought {you/{TARGET}} needed.

PROGRAM:

DISPLAY "have you/your" IF TARGET IS RESPONDENT,  
 DISPLAY "have you/{TARGET}'s" IF TARGET IS UNDER 18 (TAGE<18 OR TAGE2=1) AND  
 RESPONDENT IS TARGET'S PARENT,  
 DISPLAY "have {TARGET}'s parent(s)/{TARGET}'s/{TARGET}'s parent(s)" IF TARGET IS  
 UNDER 18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT TARGET'S PARENT,  
 ELSE DISPLAY "has {TARGET}/{TARGET}'S".

[NEW QUESTION FOR 2025]

*Ask if: A language other than English is spoken at home or respondent is taking Spanish version of survey (D14=1)*

D16b.

What language would {you/{TARGET}/{TARGET}'s parent(s)} feel most comfortable speaking with {your/{TARGET}'s} doctor or nurse?

- 1 English
- 2 Spanish
- 3 Portuguese
- 4 Chinese
- 6 Haitian
- 7 Sign Language, such as ASL
- 8 French
- 9 Vietnamese
- 10 Russian
- 11 Arabic
- 12 My language is not listed (please specify: \_\_\_\_\_)
- 99 I choose not to answer
- 98 I am not sure / don't know

PROGRAM:

DISPLAY "you/your" IF RESPONDENT IS TARGET,

DISPLAY "you/{TARGET}'s" IF TARGET IS <18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT,  
 DISPLAY "{TARGET}'s parent(s)/{TARGET}'s" IF TARGET IS <18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT PARENT,  
 ELSE DISPLAY "{TARGET}/{TARGET}'s".

[NEW QUESTION FOR 2025]

*Ask if: A language other than English is spoken at home or respondent is taking Spanish version of survey (D14=1)*

**D16c.** In which language would {you/{TARGET}/{TARGET}'s parent(s)} feel most comfortable reading medical or health care instructions?

- 1 English
- 2 Spanish
- 3 Portuguese
- 4 Chinese (traditional)
- 5 Chinese (simplified)
- 6 Haitian
- 8 French
- 9 Vietnamese
- 10 Russian
- 11 Arabic
- 12 My language is not listed, please specify: \_\_\_\_\_
- 99 I choose not to answer
- 98 I am not sure / don't know

PROGRAM:

DISPLAY "you/your" IF RESPONDENT IS TARGET,  
 DISPLAY "you/{TARGET}'s" IF TARGET IS <18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT,  
 DISPLAY "{TARGET}'s parent(s)/{TARGET}'s" IF TARGET IS <18 (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT PARENT,  
 ELSE DISPLAY "{TARGET}/{TARGET}'s".

## **BACKGROUND**

D0 moved 2025

D1 moved 2025

D2 moved 2025

D3 moved 2025

D5 moved 2025

D5a moved 2025

D6 moved 2025

D14 moved 2025

D16 moved 2025

D17 deleted 2025

## **FAMILY**

*Ask if: TFAM\_COUNT>=2*

### **F0.**

When answering the following question, think of the family, where family includes {you/{TARGET}} and all related family members who are living with {you/{TARGET}}.

INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT {TARGET}.

*Ask if: All*

### **A11c. (A11c)**

In the past 12 months, did {you/{TARGET}}/you and your family/{TARGET} and their family/{TARGET}'s family} have any problems paying or were {you/{TARGET}}/you and your family/{TARGET} and their family/{TARGET}'s family} unable to pay any medical bills?

This would include doctor or hospital bills, dentist bills, bills for prescription drugs, nursing home bills, or home care bills.

Please include any bills {you have/{TARGET} has/you and your family have/{TARGET} and their family have/{TARGET}'s family has} had problems paying in the past 12 months, even if the initial bill was incurred more than 12 months ago.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

### **PROGRAM:**

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT “you/you have”,  
ELSE INSERT “{TARGET}/{TARGET} has”.

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "you and your family/you and your family have",  
AND TARGET IS CHILD (TAGE<18 OR TAGE2=1), INSERT "{TARGET}'s family/{TARGET}'s family have"

ELSE INSERT "{TARGET} and their family/{TARGET} and their family have".

*Ask if: Target or family had problems paying medical bills (A11c=1)*

**A11e.** (A11ea, A11eb, A11ec, A11ed, A11ee, A11ef, A11eg, A11eh, A11eg\_OS)

What types of medical services led to those medical bills?

{Web/CATI: /Was it...}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. Emergency care
- b. An on-going treatment for a chronic or long-term health condition or health problem
- c. A medical test or surgical procedure
- d. The birth of a child
- e. Dental care
- f. Prescription drugs
- g. Mental or behavioral health care
- i. Ambulance or other medical transportation
- h. For some other type of medical service {Web/CATI: (please specify)}/{(SPECIFY:)} \_\_\_\_

PROGRAM:

SCRAMBLE A-I, ASK H LAST.

*Ask if: ALL*

**A11f.** (A11f)

{Do you/Does {TARGET}/Do you and your family/Does {TARGET} and their family} currently have any medical bills that are being paid over time?

This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT "Do you",

ELSE INSERT "Does {TARGET}".

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "Do you and your family",

ELSE INSERT "Does {TARGET} and their family".

[NEW QUESTION IN 2025]

*Ask if: Target or family has medical bills being paid over time (A11f=1)*

**A11fa.** (A11faa, A11fab, A11fac, A11fad, A11fae, A11faf, A11fag, A11fah, A11fag\_OS)

What types of medical services led to those medical bills that are being paid over time?

{Web/CATI: /Was it...}

1 Yes

2 No

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

- a. Emergency care
- b. An on-going treatment for a chronic or long-term health condition or health problem
- c. A medical test or surgical procedure
- d. The birth of a child
- e. Dental care
- f. Prescription drugs
- g. Mental or behavioral health care
- i. Ambulance or other medical transportation
- h. For some other type of medical service {Web/CATI: (please specify)/(SPECIFY:)} \_\_\_\_\_

PROGRAM:

SCRAMBLE A-I IN SAME ORDER AS A11e, ASK H LAST.

*Ask if: Target or family has medical bills being paid over time (A11f=1)*

**A11.** (A11)

Are the medical bills being paid off over time for care that was received when {you/{TARGET}/you and your family/{TARGET} and their family} **did not have** health insurance, when {you/{TARGET}/you and your family/{TARGET} and their family} **did have** health insurance, or are the bills for care from **both** when {you/{TARGET}/you and your family/{TARGET} and their family} did not have health insurance and when {you/{TARGET}/you and your family/{TARGET} and their family} did have health insurance?

- 1 Did not have health insurance
- 2 Had health insurance
- 3 Both

- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

```
IF TFAM_COUNT=1
  AND TARGET IS RESPONDENT, INSERT "you",
  ELSE INSERT "{TARGET}".
IF TFAM_COUNT>1
  AND TARGET IS RESPONDENT, INSERT "you and your family",
  ELSE INSERT "{TARGET} and their family".
```

*Ask if: Target or family has medical bills being paid over time (A11f=1)*

**A11h.** (A11h)

{Web/CATI: How much are the medical bills that are being paid off over time?/Was it...}

{Web/CATI: (READ LIST. ENTER ONE ONLY.)}

- 1 Less than \$2,000
- 2 \$2,000 to under \$4,000
- 3 \$4,000 to under \$8,000
- 4 \$8,000 to under \$10,000
- 5 \$10,000 or more
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: Bills occurred when had health insurance or both when did not and had health insurance (A11=2, 3)*

**A11hc.** (A11hca, A11hcb, A11hcc)

For this question, think about the medical bills that are being paid off over time that are from the period in which {you/{TARGET}/you and your family/{TARGET} and their family} had health insurance. Were any of those medical bills for...

- 1 Yes
  - 2 No
  - 98 (DO NOT READ) DON'T KNOW
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- 
- a. care that was not covered by a health insurance plan?
  - b. co-payments or co-insurance for care under a health insurance plan?
  - c. care that had to be paid for as part of the deductible under a health insurance plan?

PROGRAM:

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT "you",  
ELSE INSERT "{TARGET}".

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "you and your family",  
ELSE INSERT "{TARGET} and their family".

SCRAMBLE

*Ask if: Target or family has medical bills being paid over time (A11f=1)*

**A11i.** (A11i)

When {were you/was {TARGET}/were you and your family/were {TARGET} and their family} first unable to pay the medical bills that are being paid off over time? Was it...

- 1 Within the last year
- 2 A year to less than 2 years ago
- 3 2 to less than 5 years ago
- 4 5 years ago or more
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT "were you",  
ELSE INSERT "was {TARGET}".

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "were you and your family",  
ELSE INSERT "were {TARGET} and their family".

[NEW QUESTION FOR 2025]

*Ask if: All*

**A11k.** (A11k)

{Do you/Does {TARGET}/Do you and your family/Does {TARGET} and their family} currently have any medical bills that {you are/{TARGET} is/you and your family are/{TARGET} and their family are} unable to pay at all?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT “Do you” AND “you are”,

ELSE INSERT “Does {TARGET}” AND “{TARGET} is”.

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT “Do you and your family” AND “you and your family are”,

ELSE INSERT “Does {TARGET} and their family” AND “{TARGET} and their family are”.

[DELETED 2023, RETURNED 2025]

*Ask if: Target or family had problem paying medical bills in past 12 months or has medical bills that are being paid over time (A11c = 1 OR A11f = 1)*

**A11j.** (A11ja, A11jb, A11jc, A11jd)

In the past 12 months, {have you/has {TARGET}/have you and your family/has {TARGET} and their family} {Web/CATI: done any of the following?/{INSERT}}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

- a. cut back on savings or had to take money out of savings to pay medical bills
- b. had to borrow or take on credit card debt to pay medical bills
- c. been contacted by a collection agency about owing money for medical bills
- d. had to declare bankruptcy because of medical bills

PROGRAM

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT “have you”,

ELSE INSERT “has {TARGET}”.

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT “have you and your family”,

ELSE INSERT “has {TARGET} and their family”.

SCRAMBLE

**FAMILY**

**MEMBERS**

*Ask if: Family is more than 1 person (TFAM\_COUNT > 1)*

**HH\_FA0.** (HH\_FA0)

The next questions focus on the members of {your/{TARGET}'s} family. That is {FAMCONFIRM}.



*Ask if: Target had health insurance for all of the past 12 months or refuses, doesn't know, or does not answer (H5=1, 98, 99, 97) & TFAM\_COUNT > 1*

**HH\_FA2.** (HH\_FA2)

Did any members of {your/{TARGET}'s} family **go without** health insurance at any time in the past 12 months?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s"

*Ask if: Target did not report unmet needs due to cost or refused, didn't know, or did not respond (A9a-A9i =2, 98, 99, 97) AND TFAM\_COUNT>1*

**HH\_FA2b.** (HH\_FA2ba, HH\_FA2bc, HH\_FA2bcc, HH\_FA2bd, HH\_FA2be, HH\_FA2bf, HH\_FA2bg, HH\_FA2bh, HH\_FA2bi)

Earlier we asked if there was any time in the past 12 months that {you/{TARGET}/{TARGET}'s parent(s)} did not get certain types of health care that {you/{TARGET}} needed because of cost. For this question, please think about the health care of the members of {your/{TARGET}'s} family.

Are there any members of {your/{TARGET}'s} family who did...

- 1 Yes
  - 2 No
  - 98 (DO NOT READ) DON'T KNOW
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- 
- a. not fill a prescription for medicine for themselves?
  - c. not get doctor care that they needed?
  - cc. not get care from a nurse practitioner or physician assistant {or midwife} that they needed?
  - d. not get specialist care that they needed? (Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors and others who specialize in one area of health care.)
  - e. not get mental health care or counseling that they needed?
  - f. not get dental care that they needed?
  - g. not get alcohol or substance use disorder care or treatment that they needed?
  - h. not get vision care that they needed?
  - i. not get medical equipment that they needed?

PROGRAM: INSERT "you/you/your/your" IF TARGET IS RESPONDENT

ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT "you/{TARGET}/{TARGET}'s/{TARGET}'s",

ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT PARENT,  
 INSERT "{TARGET}'s parent(s)}/{TARGET}://{TARGET}'s/{TARGET}'s",  
 ELSE INSERT "{TARGET}://{TARGET}://{TARGET}'s/{TARGET}'s".

IF (TFEM=1 OR 2) AND S6 OR S6(b-y)>=12, INSERT ", or midwife".  
 ONLY DISPLAY ITEMS NOT UNMET AT A9.

[DELETED 2023, RETURNED 2025]

Ask if: All

**HH\_E1d.** (HH\_E1d)

{Have you/Have you or any member of your family aged 16 or older/Has {TARGET} or any member of {TARGET}'s family aged 16 or older/Has any member of {TARGET}'s family aged 16 or older} had difficulty finding or keeping a job in the past 12 months?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

IF TARGET IS RESPONDENT,

AND AT LEAST ONE OTHER FAMILY MEMBER IS 16 OR OLDER, DISPLAY "Have you or any member of your family aged 16 or older"

ELSE DISPLAY "Have you"

ELSE TARGET (IS NOT RESPONDENT) IS 16 OR OLDER, DISPLAY "Has {TARGET} or any member of {TARGET}'s family aged 16 or older",

ELSE DISPLAY "Has any member of {TARGET}'s family aged 16 or older"

Ask if: All

**A11L.** (A11La, A11Lb, A11Lc, A11Ld, A11Le)

At any time in the past 12 months, {have you/has {TARGET}/have {TARGET}'s parent(s)} {or any member of {your/their} family}

- 1 Yes
  - 2 No
  - 98 (DO NOT READ) DON'T KNOW
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- a. fallen behind in paying rent or mortgage?
  - b. had problems paying for utilities?
  - c. fallen behind in paying credit card or other bills?
  - d. had problems affording health insurance?

- e. had problems affording prescription medications?

**PROGRAM:**

INSERT "you" IF TARGET IS RESPONDENT,  
 ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT,  
 INSERT "you",  
 ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS NOT PARENT,  
 INSERT "{TARGET}'s parent(s)",  
 ELSE INSERT "{TARGET}".

IF 2 OR MORE PEOPLE IN FAMILY (TFAM\_COUNT>1),  
 AND (TARGET IS RESPONDENT OR (TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND  
 RESPONDENT IS PARENT)), INSERT "or any member of your family", ELSE INSERT "or any  
 member of their family".

**Ask if: All**

**HH\_HE7.** (HH\_HE7a, HH\_HE7b, HH\_HE7c, HH\_HE7d, HH\_HE7e, HH\_HE7f)

How often do the following statements describe {you/{TARGET}/{TARGET}'s parent(s)} {or any  
 member of {your/their} family} in the past 12 months?

- a. {I worry/{TARGET} worries/We worry/They worry} that food will run out before there is  
 money to buy more
- b. The food {I buy/{TARGET} buys/We buy/they buy} doesn't last long enough
- c. {I have/{TARGET} has/We have/They have} been hungry but couldn't afford enough food
- d. {I/{TARGET}/We/They} got emergency food from a church, food pantry, food bank, or other  
 community program

1. Always
2. Often
3. Sometimes
4. Rarely
5. Never
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

IN THE QUESTION TEXT:

INSERT "you" IF TARGET IS RESPONDENT,  
 ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT,  
 INSERT "you", ELSE INSERT "{TARGET}'s parent(s)".  
 ELSE INSERT "{TARGET}".

IF 2 OR MORE PEOPLE IN FAMILY (TFAM\_COUNT>1),

AND TARGET IS RESPONDENT OR TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT “or any member of your family”, ELSE INSERT “or any member of their family”.

IN THE RESPONSE CATEGORIES:

IF TFAM\_COUNT=1,

AND TARGET IS RESPONDENT, INSERT “I worry/I buy/I have/I”,

ELSE IF (TAGE>18 OR TAGE2=2, 3, or 4) INSERT “{TARGET}/{TARGET} worries/{TARGET} buys/{TARGET} has/{TARGET}”,

IF TFAM\_COUNT>1,

AND TARGET IS RESPONDENT OR TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT “We worry/We buy/We have/We”

ELSE INSERT “They worry/They buy/They have/They”.

*Ask if: All*

**HH\_HE1.** (HH\_HE1)

How often {do you/does {TARGET}/do {TARGET}'S parent(s)} {or any member of {your/their} family} worry about having a steady place to live?

{Web/CATI: /READ LIST IF NECESSARY.}

1. Always
2. Often
3. Sometimes
4. Rarely
5. Never

98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM:

INSERT “do you” IF TARGET IS RESPONDENT,

ELSE IF TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT “do you”, ELSE INSERT “do {TARGET}'s parent(s)”.

ELSE INSERT “does {TARGET}”.

IF 2 OR MORE PEOPLE IN FAMILY (TFAM\_COUNT>1),

AND TARGET IS RESPONDENT OR TARGET IS CHILD (TAGE<18 OR TAGE2=1) AND RESPONDENT IS PARENT, INSERT “or any member of your family”, ELSE INSERT “or any member of their family”.

*Ask if: Target is in excellent, very good, or good health or RF, DK, or does not answer (HS1=1, 2, 3, 98, 99, 97) and TFAM\_COUNT>1*

**HH\_HS1.** (HH\_HS1)

Earlier we asked if {you are/{TARGET} is} in excellent health, very good health, good health, fair health, or poor health. For this question, please think about the health of the members of {your/{TARGET}'s} family. Are there any members in {your/{TARGET}'s} family who are in **fair** or **poor** health?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you are/your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET} is/{TARGET}'s".

*Ask if: Target is not limited in any way because of a physical, mental, or emotional problem, or RF, DK, or does not answer (HS2=2, 98, 99, 97) and TFAM\_COUNT>1*

**HH\_HS2.** (HH\_HS2)

Are any members of {your/{TARGET}'s} family limited in any way in their activities because of a physical, mental, or emotional problem?

{Web/CATI: /PROBE:} Please note that your answers to this question and all other questions are confidential.

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s".

*Ask if: Target has no chronic conditions or respondent says don't know / refused / web blank on this question (HS3 = 3, 97, 98, 99) and TFAM\_COUNT>1*

**HH\_HS3.** (HH\_HS3).

Do any members of {your/{TARGET}'s} family currently have a health condition that has lasted for a year or more or is expected to last for a year or more? This could be a physical health condition (such as arthritis, asthma, cancer, dementia, diabetes, heart disease, high cholesterol, hypertension or stroke), a behavioral/mental health condition, or a developmental disability. Do not include dental conditions.

{Web/CATI: /PROBE: Remember that your answers to this question and all other questions are confidential.}

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW

99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM: INSERT “you” IF TARGET IS RESPONDENT, ELSE INSERT {TARGET}'s.  
If TARGET has 1+ CC (HS3 = 1, 2), DO NOT ASK and assign as 1 (Yes).

## INCOME

Ask if: All
-------------

### IN1. (IN1)

{Web/CATI: The/My} next questions are about income. This information is important because it helps the Commonwealth understand how to make health care more affordable.

1:

IF (TAGE<26 OR TAGE2=1 OR 2) & TPAR=0 & RESPONDENT IS PARENT AND  
RESPONDENT IS MARRIED (RPAR=1 AND RMARR=1), INSERT:

IF HH\_COUNT IS GREATER THAN TFAM\_COUNT INCLUDE VERBIAGE IN  
PARENS.

{Web/CATI: We're/I'm} interested in your family income, that is your income **plus** the income of your immediate family. ({web/CATI: We/I} only want you to consider your spouse and the children **under 26** who are living with you for the remaining questions.) For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024 did you or any of your immediate family members receive any income from wages or salary?

2:

IF (TAGE<26 OR TAGE2=1 OR 2) & TMARR=0 & TPAR=0 & RESPONDENT IS PARENT AND  
RESPONDENT IS NOT MARRIED (RPAR=1 AND RMARR=0), INSERT:

IF HH\_COUNT IS GREATER THAN TFAM\_COUNT INCLUDE VERBIAGE IN  
PARENS.

{Web/CATI: We're/I'm} interested in your family income, that is your income **plus** the income of your immediate family. ({web/CATI: We/I} only want you to consider the children **under 26** who are living with you for the remaining questions.) For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024 did you or any of your immediate family members receive any income from wages or salary?

3:

(IF (TAGE <26 OR TAGE2=1 OR 2) & TMARR=0 & TPAR=0 & RESPONDENT IS NOT PARENT  
(RPAR=0) & TFAM\_COUNT>1, INSERT:

IF HH\_COUNT IS GREATER THAN TFAM\_COUNT INCLUDE VERBIAGE IN  
PARENS.

{Web/CATI: We're/I'm} interested in {TARGET}'s family income, that is the income from his/her parent(s) **plus** the income of any immediate family. ({web/CATI: We/I} only want you to consider parent(s) and siblings **under 26** who are living with {TARGET} for the remaining questions.) For

these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024, did any of {TARGET}'s immediate family members receive any income from wages or salary?

4:

IF TMARR=1 & TFAM\_COUNT>2, INSERT:

IF HH\_COUNT IS GREATER THAN TFAM\_COUNT INCLUDE VERBIAGE IN PARENS.

{Web/CATI: We're/I'm} interested in {your/{TARGET}'s} family income, that is {your/ {TARGET}'s} income **plus** the income of {your/their} immediate family. ({web/CATI: We/I} only want you to consider {your/their} spouse and the children **under 26** who are living with {you/{TARGET}} for the remaining questions.) For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024, did {you/{TARGET}} or any of {your/their} immediate family members receive any income from wages or salary?

INSERT "your/you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/their".

5:

IF TMARR=1 & TFAM\_COUNT = 2, INSERT:

{Web/CATI: We're/I'm} interested in {your/{TARGET}'s} family income. {Web/CATI: We/I} only want you to consider {your/{TARGET}'s} income **plus** the income of {your/their} spouse for the remaining questions. For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024, did {you/{TARGET}} or any of {your/their} immediate family members receive any income from wages or salary?

INSERT "your/you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/their".

6:

IF TMARR=0 & TPAR=1 & TFAM\_COUNT>=2, INSERT:

{Web/CATI: We're/I'm} interested in {your/{TARGET}'s} family income. {web/CATI: we/I} only want you to consider {your/{TARGET}'s} income **plus** the income of the children **under 26** who are living with {you/{TARGET}} for the remaining questions. For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024, did {you/{TARGET}} or any of {your/their} immediate family members receive any income from wages or salary?

INSERT "your/you" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}/their".

7:

IF RESPONDENT IS TARGET AND (TAGE>=16 OR TAGE2=2, 3, or 4) & TMARR=0 & TPAR=0 and TFAM=>2, INSERT:

IF HH\_COUNT IS GREATER THAN TFAM\_COUNT INCLUDE VERBIAGE IN PARENS.

{Web/CATI: We're/I'm} interested in your family income, that is the income from you **plus** the income of any immediate family. ({web/CATI: We/I} only want you to consider parent(s) and siblings **under 26** who are living with you for the remaining questions.) For these questions, I'd like you to think back to 2024. During 2024, did any of your immediate family members receive any income from wages or salary?

8:

IF TFAM\_COUNT=1, INSERT:

For these questions, {Web/CATI: we'd/I'd} like you to think back to 2024. During 2024, did {you/{TARGET}} receive any income from wages or salary?  
 INSERT "you" IF TARGET IS RESPONDENT, ELSE INSERT {TARGET}.

- 1 Yes
- 2 No
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "you" IF TARGET IS REPSONDENT, ELSE INSERT "{TARGET}'.

*Ask if: All*

**IN2.** (IN2a, IN2b, IN2c)

During 2024, did {you/{TARGET}/you or members of your immediate family/{TARGET} or members of their immediate family} immediate family} receive ...

- 1 Yes
  - 2 No
  - 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
  - 99 (DO NOT READ) REFUSED
  - 97 Web Blank
- a. any dividend income or any interest income from bonds, money market accounts, CDs or other investments?
  - b. social security benefits or any type of cash assistance?
  - c. income from any other sources, such as self-employment, alimony, child support, contributions from family or others, unemployment compensation, worker's compensation or veteran's payments, pensions, disability benefits, or anything else? If you received a 2024 Massachusetts tax rebate, do not include this amount.

PROGRAM: DON'T SCRAMBLE.

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT "you",  
 ELSE INSERT "{TARGET}/they".

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "you or members of your immediate family/you or someone in your immediate family",  
 ELSE INSERT "{TARGET} or members of their immediate family/they or someone in their immediate family".

*Ask if: All*

**IN3.** (IN3)



Thinking about all the different sources of income {you/{TARGET}/you and your immediate family/{TARGET} and their immediate family} received in 2024, what was the combined total income from all sources before taxes and other deductions?

{Web/CATI: /(PROBE:)} Your best estimate is fine.

\$\_\_\_\_\_ AMOUNT (Do not enter commas)  
 1000096 {Web/CATI: /(DO NOT READ)} No income  
 1000095 {Web/CATI: /(DO NOT READ)} \$1,000,000 or more  
 1000098 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}  
 1000099 (DO NOT READ) REFUSED  
 1000097 Web Blank

PROGRAM IF TFAM\_COUNT=1  
 AND TARGET IS RESPONDENT, INSERT "you",  
 ELSE INSERT "{TARGET}/they".  
 IF TFAM\_COUNT>1  
 AND TARGET IS RESPONDENT, INSERT "you and your immediate family/you or someone in your immediate family",  
 ELSE INSERT "{TARGET} and their immediate family/they or someone in their immediate family".  
 RANGE: HARD: \$1-\$999,999

*Ask if: R does not know, refused, or leave blank the income amount (IN3 = 98, 99, 97)*

**IN3a. (IN3a)**

Was it under {AMT5 FOR FAMILY SIZE} or was it {AMT5 FOR FAMILY SIZE} or more?

{Web/CATI: /(PROBE:)} Your best estimate is fine.

1 Under \${AMT5}  
 2 \${AMT5} or more  
 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}  
 99 (DO NOT READ) REFUSED  
 97 Web Blank

*Ask if: Income was below AMT5 (IN3a = 1)*

**IN4. (IN4)**

{Web/CATI: /Now, just stop me when I get to the right category.} Was {your/{TARGET}'S} total {family} income...

{Web/CATI: /(IF NEEDED:) The computer gives me different income values for the question depending on the size of your family.}

{Web/CATI: /(PROBE:)} Your best estimate is fine.

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

- 1 Less than \${AMT1}
- 2 \${AMT1} to under \${AMT1A}
- 3 \${AMT1A} to under \${AMT2}
- 4 \${AMT2} to under \${AMT3}
- 5 \${AMT 3} to under \${AMT4}
- 6 \${AMT 4} to under \${AMT5}
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s".  
 IF TFAM\_COUNT > 1, INSERT "family".  
 NOW GO TO Q.IN6

*Ask if: Income was above AMT5 (IN3a = 2)*

**IN5. (IN5)**

{Web/CATI: /Now, just stop me when I get to the right category.} Was {your/{TARGET}'S} total {family} income...

{Web/CATI: /(IF NEEDED:) The computer gives me different income values for the question depending on the size of your family.}

{Web/CATI: /(PROBE:)} Your best estimate is fine.

{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

- 1 \${AMT5} to under \${AMT6}
- 2 \${AMT6} to under \${AMT7}
- 3 \${AMT7} to under \${AMT8}
- 4 \${AMT8} or more
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: INSERT "your" IF TARGET IS RESPONDENT, ELSE INSERT "{TARGET}'s".  
 IF TFAM\_COUNT > 1, INSERT "family".

2024 Poverty Guidelines, rounded to nearest thousand*									
Famsize:	100%	139%	150%	200%	250%	300%	400%	500%	600%
	AMT1	AMT1A	AMT2	AMT3	AMT4	AMT5	AMT6	AMT7	AMT8
1	\$15,000	\$21,000	\$23,000	\$30,000	\$38,000	\$45,000	\$60,000	\$75,000	\$90,000
2	\$20,000	\$28,000	\$31,000	\$41,000	\$51,000	\$61,000	\$82,000	\$102,000	\$123,000
3	\$26,000	\$36,000	\$39,000	\$52,000	\$65,000	\$77,000	\$103,000	\$129,000	\$155,000

4	\$31,000	\$43,000	\$47,000	\$62,000	\$78,000	\$94,000	\$125,000	\$156,000	\$187,000
5	\$37,000	\$51,000	\$55,000	\$73,000	\$91,000	\$110,000	\$146,000	\$183,000	\$219,000
6	\$42,000	\$58,000	\$63,000	\$84,000	\$105,000	\$126,000	\$168,000	\$210,000	\$252,000
7	\$47,000	\$66,000	\$71,000	\$95,000	\$118,000	\$142,000	\$189,000	\$237,000	\$284,000
8	\$53,000	\$73,000	\$79,000	\$105,000	\$132,000	\$158,000	\$211,000	\$264,000	\$316,000
9	\$58,000	\$81,000	\$87,000	\$116,000	\$145,000	\$174,000	\$232,000	\$291,000	\$349,000
10	\$63,000	\$88,000	\$95,000	\$127,000	\$159,000	\$190,000	\$254,000	\$317,000	\$381,000
11	\$69,000	\$96,000	\$103,000	\$138,000	\$172,000	\$207,000	\$275,000	\$344,000	\$413,000
12	\$74,000	\$103,000	\$111,000	\$148,000	\$186,000	\$223,000	\$297,000	\$371,000	\$445,000
13	\$80,000	\$111,000	\$119,000	\$159,000	\$199,000	\$239,000	\$318,000	\$398,000	\$478,000
14	\$85,000	\$118,000	\$128,000	\$170,000	\$213,000	\$255,000	\$340,000	\$425,000	\$510,000
15	\$90,000	\$126,000	\$136,000	\$181,000	\$226,000	\$271,000	\$362,000	\$452,000	\$542,000
16	\$96,000	\$133,000	\$144,000	\$192,000	\$239,000	\$287,000	\$383,000	\$479,000	\$575,000
17	\$101,000	\$141,000	\$152,000	\$202,000	\$253,000	\$303,000	\$405,000	\$506,000	\$607,000

\*Source: U.S. Department of Health & Human Services

#### PROGRAM:

CREATE VARIABLE FPL AS FOLLOWS:

OVERWRITE FPL UNTIL IT DOESN'T WRITE ANYMORE.

IF IN3=98, 99, 97, SET FPL=99

IF (IN3<AMT1A OR IN4=1, 2), SET FPL=1 (Less than 139% FPL)

IF (IN3>=AMT1A OR IN4=3), SET FPL=2 (139-149)

IF (IN3>=AMT2 OR IN4=4), SET FPL=3 (150-199)

IF (IN3>=AMT3 OR IN4=5), SET FPL=4 (200-249)

IF (IN3>=AMT4 OR IN4=6), SET FPL=5 (250-299)

IF (IN3>=AMT5 OR IN5=1), SET FPL=6 (300-399)

IF (IN3>=AMT6 OR IN5=2), SET FPL=7 (400-499)

IF (IN3>=AMT7 OR IN5=3), SET FPL=8 (500-599)

IF (IN3>=AMT8 OR IN5=4), SET FPL=9 (600% or greater)

CREATE VARIABLE INC AS FOLLOWS:

IF REPORTED ZERO, IN3=96: INC=0

IF REPORTED AN AMOUNT IN IN3 INC=REPORTED AMOUNT

IF REPORTED \$1M OR MORE IN IN3, IN3=95 INC=1000000

IF REPORTED RANGE IN IN4 AS UNDER ANY AMTX INC=AMTX

IF REPORTED RANGE IN IN5 AS UNDER ANY AMTX, INC=AMTX

IF REPORTED RANGE IN IN5 AS AMT8 OR MORE, IN5=4, INC=AMT8

CREATE VARIABLE CUTOFF5 AND CUTOFF10 AS FOLLOWS:  
THEN CUTOFF5=INC\*.05 & CUTOFF10=INC\*.10

*Ask if: All*

**IN6\_INT.**

{Web/CATI: The/My} next question is about the health care costs that {you/{TARGET}}/you and your immediate family/{TARGET} and their immediate family} had in the past 12 months.

"Out of pocket" is the amount of money you pay that is not covered by any health insurance or special assistance that you might have. It does not include any premiums that you pay for your health insurance or any health care costs that will be reimbursed. When answering this question please include:

- Costs for prescription medicines,
- Dental and vision care,
- Other medical expenses, including for doctors, hospitals, tests and equipment in your estimate.
- Any co-pays and co-insurance and costs that are covered by a flexible spending account.
- Costs that are owed for care received in the past 12 months but have not yet been paid.

PROGRAM:

IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT "you",

ELSE INSERT "{TARGET}/they".

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT "you and your immediate family/you or someone in your immediate family",

ELSE INSERT "{TARGET} and their immediate family/they or someone in their immediate family".

IF INCOME IS ZERO (INC=0) OR UNDETERMINED SKIP TO IN6b AND SHOW ALL RANGES.

*Ask if: Income is not 0 (INC>0)*

**IN6. (IN6)**

Was the "out of pocket" spending for health care in the past 12 months for {you/{TARGET}}/you and your immediate family/{TARGET} and their immediate family} less than \${CUTOFF5} or \${CUTOFF5} or more?

{Web/CATI: /(PROBE:)} Your best estimate is fine.

- 1 Less than \${CUTOFF5}
- 2 At \${CUTOFF5} or more
- 3 {Web/CATI: Did not use care/(DO NOT READ) DID NOT USE CARE}
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM: IF TFAM\_COUNT=1

AND TARGET IS RESPONDENT, INSERT “you”,  
ELSE INSERT “{TARGET}/they”.

IF TFAM\_COUNT>1

AND TARGET IS RESPONDENT, INSERT “you and your immediate family/you or someone in your immediate family”,  
ELSE INSERT “{TARGET} and their immediate family/they or someone in their immediate family”.

IF TFAM\_COUNT > 1, INSERT “or member of {your/their} immediate family”

INCLUDE AS HOVER-OVER FOR “out of pocket” spending: “Out of pocket” is the amount of money you pay that is not covered by any health insurance or special assistance that you might have. It does not include any premiums that you pay for your health insurance or any health care costs that will be reimbursed. When answering this question please include:

- Costs for prescription medicines,
- Dental and vision care,
- Other medical expenses, including for doctors, hospitals, tests and equipment in your estimate.
- Any co-pays and co-insurance and costs that are covered by a flexible spending account.
- Costs that are owed for care received in the past 12 months but have not yet been paid.

*Ask if: Out of pocket costs were at CUTOFF5 or more (IN6=2)*

**IN6a.** (IN6a)

Was the “out of pocket” spending for health care less than \${CUTOFF10} or \${CUTOFF10} or more?

{Web/CATI: /(PROBE:)} Your best estimate is fine.

- 1 Less than \${CUTOFF10}
- 2 At \${CUTOFF10} or more
- 98 {Web/CATI: Don’t know/(DO NOT READ) DON’T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

PROGRAM:

INCLUDE AS HOVER-OVER FOR “out of pocket” spending: “Out of pocket” is the amount of money you pay that is not covered by any health insurance or special assistance that you might have. It does not include any premiums that you pay for your health insurance or any health care costs that will be reimbursed. When answering this question please include:

- Costs for prescription medicines,
- Dental and vision care,
- Other medical expenses, including for doctors, hospitals, tests and equipment in your estimate.
- Any co-pays and co-insurance and costs that are covered by a flexible spending account.
- Costs that are owed for care received in the past 12 months but have not yet been paid.

*Ask if: (CUTOFF5 is between \$200 and \$4,999 and IN6=1) OR (CUTOFF10 is between \$200 and \$4,999 (200<CUTOFF10<4,999) AND IN6a=1, 2) OR CUTOFF10 is undetermined (CUTOFF10=missing)*

**IN6b.** (IN6b) Was the “out of pocket” spending for health care...

{Web/CATI: Your best estimate is fine./IF NEEDED: Your best estimate is fine.}  
{Web/CATI: /(READ LIST. ENTER ONE ONLY.)}

- 1 Less than \$200
- 2 \$200 to under \$500
- 3 \$500 to under \$1,000
- 4 \$1,000 to under \$3,000
- 5 \$3,000 to under \$5,000
- 6 \$5,000 or more
- 98 {Web/CATI: Don't know/(DO NOT READ) DON'T KNOW}
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

**PROGRAM:**

IF CUTOFF10<\$200, SET IN6b=1 AND DO NOT ASK.

IF CUTOFF10>=\$5,000, SET IN6b=6 AND DO NOT ASK.

IF CUTOFF IS \$200 TO \$4,999, ONLY SHOW THE RANGES ARE APPLICABLE.

IF IN6=1, THEN DO NOT DISPLAY ANY RESPONSE CATEGORIES WHERE  
THE LOWER NUMBER OF THE BRACKET IS GREATER THAN CUTOFF5.

IF IN6=2 AND:

IN6A=1, THEN DO NOT DISPLAY ANY RESPONSE CATEGORIES WHERE THE  
LOWER NUMBER OF THE BRACKET IS GREATER THAN CUTOFF10

IN6A=2, THEN DO NOT DISPLAY ANY RESPONSE CATEGORIES WHERE THE  
HIGHER NUMBER OF THE BRACKET IS LESS THAN CUTOFF10

IF NO CUTOFF SHOW ALL RANGES

INCLUDE AS HOVER-OVER FOR "out of pocket" spending: "Out of pocket" is the amount of money you pay that is not covered by any health insurance or special assistance that you might have. It does not include any premiums that you pay for your health insurance or any health care costs that will be reimbursed. When answering this question please include:

- Costs for prescription medicines,
- Dental and vision care,
- Other medical expenses, including for doctors, hospitals, tests and equipment in your estimate.
- Any co-pays and co-insurance and costs that are covered by a flexible spending account.
- Costs that are owed for care received in the past 12 months but have not yet been paid.

D12 moved 2025

D13 moved 2025

**HOUSEHOLD**

L1a moved 2025

L1b moved 2025

L2 moved 2025

L2a moved 2025

INT1NEW moved 2025

D10 moved 2025

## CLOSING

*Ask if: All*

### **X1.** (X1)

For future studies, we may follow-up with some survey participants to gather more in-depth information on their health care experiences in Massachusetts. Could we contact you again to ask a few more questions?

- 1 Yes
- 2 No
- 98 (DO NOT READ) DON'T KNOW
- 99 (DO NOT READ) REFUSED
- 97 Web Blank

*Ask if: R is ok for recontact (X1=1)*

### **X2.** (PII\_X1Name, PII\_X1Email, PII\_X1Phone)

Thank you. Please provide your name, email address and best phone number on which to reach you.

{Web/CATI: /(RECORD ALL INFORMATION ACCURATELY.)}

{Web/CATI: /(INTERVIEWER NOTE: RESPONDENTS CAN REFUSE ANY OF THESE FIELDS. THE PROGRAM WILL ALLOW YOU TO LEAVE BLANKS.)}

Name: \_\_\_\_\_  
99 (DO NOT READ) REFUSED  
97 Web Blank

Email address: \_\_\_\_\_  
99 (DO NOT READ) REFUSED  
97 Web Blank

Phone number: \_\_\_\_\_

99 (DO NOT READ) REFUSED

97 Web Blank

PROGRAM: ADD VALIDATION FOR EMAIL (@) AND PHONE NUMBER (10 digits).

*Ask if: Phone number provided. PII\_X1Phone NE 99 or 97.*

**X2aa.** (X2aa)

Is the phone number you provided a cell phone number?

1 Yes

2 No

99 (DO NOT READ) REFUSED

97 Web blank

*Ask if phone number is cell phone. X2aa=1.*

**X2ab.** (X2ab)

Do we have permission to text you? Messaging and data rates may apply.

1 Yes

2 No

99 (DO NOT READ) REFUSED

97 Web blank

*Ask if: SAMPTYPE=CELL AND MODE=CATI*

**X2a.** We would like to send you a \$10 gift card to thank you for your participation in this survey. Can you please provide your address so we can mail you the gift card?

IF NEEDED: This information will only be used to mail you the gift card.

INTERVIEWER: CONFIRM ADDRESS INFORMATION BEFORE CONTINUING

1 Name: \_\_\_\_\_

2 Street: \_\_\_\_\_

3 City: \_\_\_\_\_

4 State: \_\_\_\_\_

5 Zip code: \_\_\_\_\_

9 (DO NOT READ) Respondent does not want the \$10 gift card.

*Ask if: SAMPTYPE=ABS and selected as a partial conversion (OR SAMPTYPE=Cell AND MODE=Web)*

**X2b.** We would like to send you a \$10 electronic gift card as a thank you for completing the survey. Can you please provide your email address?



This information will only be used to email you the gift card.

INTERVIEWER: CONFIRM EMAIL ADDRESS INFORMATION BEFORE CONTINUING.

Email: \_\_\_\_\_

9 I do not want to receive the \$10 e-gift card.

99 (DO NOT READ) REFUSED

97 Web blank

<i>Ask if: All</i>
--------------------

**X3.**

{Web/CATI: Thank you for completing the Massachusetts Health Insurance Survey./ That was my last question. If you'd like, I can provide you with the phone numbers for MassHealth or the Health Connector.}

{Web/CATI: /(IF NEEDED:

For MassHealth, call 1-800-841-2900

For Connector Care through the Health Connector, call 1-877-623-6765

## Appendix C : 2025 MHIS Communication

### M1 – English-only



Center for Health Information and Analysis  
An Agency of the Commonwealth of Massachusetts

Massachusetts Resident  
<address1> <address2>  
<city>, <state> <zip> <zip+4>

<date>

Dear Massachusetts Resident,

Your household has been randomly selected for this year's **Massachusetts Health Insurance Survey**.

This important survey is conducted by the Commonwealth of Massachusetts. It collects information from Massachusetts residents about health and issues they may have getting health care. Your responses will represent many other households like yours, and the results may help people in your community.

We are not selling anything or asking for money. To thank you in advance for your participation, we are enclosing a \$1 bill. This small gift is for you to keep whether or not you decide to participate.

---

#### Complete the Survey Online

This survey should be completed by an adult in your household aged 18 or older who can answer questions about healthcare for everyone in the household.

**1.** Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](https://mahealthsurveys.gov/mhis)



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

---

If you do not have access to the internet or would prefer to complete the survey over the phone, please call **1-888-656-8909**.

On behalf of the Commonwealth of Massachusetts, thank you for your participation.

Sincerely,

Dr. Zi Zhang  
Deputy Executive Director for Research  
Center for Health Information and Analysis

*Para completar la encuesta en español, visite [mahealthsurveys.gov/mhis](https://mahealthsurveys.gov/mhis), o si no tiene acceso a Internet, llame al 1-888-656-8909 para hacer la encuesta por teléfono.*

## M2 – English-only



Center for Health Information & Analysis  
*An Agency of the Commonwealth of Massachusetts*

**Please don't miss your opportunity to participate in the  
Massachusetts Health Insurance Survey!**

About a week ago, we mailed you a letter asking you to participate in this survey. You may recall a \$1 bill as a small token of our appreciation. If you or someone in your household already responded, thank you!

If not, please have an adult aged 18 years or older in your household go to the website listed below to complete the survey.

**1.** Access the survey by typing the URL OR  
scanning the QR code from your mobile device.

**mahealthsurveys.gov/mhis**



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

If you prefer to complete over the phone,  
call us at **1-888-656-8909**. Thank you.

*Para completar la encuesta en español, visite  
[www.mahealthsurveys.gov/mhis](http://www.mahealthsurveys.gov/mhis), o si no  
tiene acceso a Internet, llame al 1-888-656-  
8909 para hacer la encuesta por teléfono.*

## M1 – 65+ only

---



### Center for Health Information and Analysis An Agency of the Commonwealth of Massachusetts

Massachusetts Resident

<date>

<address1> <address2>

<city>, <state> <zip> <zip+4>

Dear Massachusetts Resident,

Your household has been randomly selected for this year's **Massachusetts Health Insurance Survey**.

This important survey is conducted by the Commonwealth of Massachusetts. It collects information from Massachusetts residents about health and issues they may have getting health care. Your responses will represent many other households like yours, and the results may help people in your community.

We are not selling anything or asking for money.


---

#### Complete the Survey Online

This survey should be completed by an adult in your household aged 18 or older who can answer questions about healthcare for everyone in the household.

**1.** Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](https://mahealthsurveys.gov/mhis)



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

---

If you do not have access to the internet or would prefer to complete the survey over the phone, please call 1-888-656-8909.

On behalf of the Commonwealth of Massachusetts, thank you for your participation.

Sincerely,



Dr. Zi Zhang  
Deputy Executive Director for Research  
Center for Health Information and Analysis

Para completar la encuesta en español, visite [mahealthsurveys.gov/mhis](https://mahealthsurveys.gov/mhis), o si no tiene acceso a Internet, llame al 1-888-656-8909 para hacer la encuesta por teléfono.

## M2 – 65+ only



Center for Health Information & Analysis  
*An Agency of the Commonwealth of Massachusetts*

**Please don't miss your opportunity to participate in the  
Massachusetts Health Insurance Survey!**

About a week ago, we mailed you a letter asking you to participate in this survey. If you or someone in your household already responded, thank you!

If not, please have an adult aged 18 years or older in your household go to the website listed below to complete the survey.

**1.** Access the survey by typing the URL OR scanning the QR code from your mobile device.

**mahealthsurveys.gov/mhis**



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

If you prefer to complete over the phone,  
call us at **1-888-656-8909**. Thank you.

*Para completar la encuesta en español, visite  
[www.mahealthsurveys.gov/mhis](http://www.mahealthsurveys.gov/mhis), o si no tiene  
acceso a Internet, llame al 1-888-656-8909  
para hacer la encuesta por teléfono.*

## M3 – English-only and 65+



Center for Health Information & Analysis  
An Agency of the Commonwealth of Massachusetts

Massachusetts Resident

<date>

<address1> <address2>

<city>, <state> <zip>-<zip+4>

Dear Massachusetts Resident,

This is a reminder to complete the Massachusetts Health Insurance Survey.

### Your participation is important!

This important survey collects information from Massachusetts residents about health and issues they may have getting health care. Your household was randomly selected to represent many other households like yours. The results may help people in your community.

### What do you need to do?

Please have an adult in your household aged 18 or older complete this survey in the next few days. This person should be able to answer questions about healthcare for everyone in the household.

1. Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



2. Click or tap the survey icon.



3. Enter your secure access code.

<XXXXXX>

If you do not have access to the internet or would prefer to complete the survey over the phone, please call 1-888-656-8909.

On behalf of the Commonwealth of Massachusetts, thank you for your participation.

Sincerely,

Dr. Zi Zhang  
Deputy Executive Director for Research  
Center for Health Information and Analysis

Para completar la encuesta en español, visite [mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis) o si no tiene acceso a Internet, llame al 1-888-656-8909 para hacer la encuesta por teléfono.

## M4 – English-only and 65+



Center for Health Information & Analysis  
*An Agency of the Commonwealth of Massachusetts*

This is your **final reminder** to complete the  
**Massachusetts Health Insurance Survey**.  
Complete your survey today! Your opinions matter.

1. Access the survey by typing the URL OR  
scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



2. Click or tap the survey icon.



3. Enter your secure access code.

<XXXXXX>

If you prefer to complete over the phone,  
call us at **1-888-656-8909**.

If you already completed, thank you!

*Para completar la encuesta en español,  
visite [www.mahealthsurveys.gov/mhis](http://www.mahealthsurveys.gov/mhis), o si  
no tiene acceso a Internet, llame al **1-888-  
656-8909** para hacer la encuesta por  
teléfono.*

## Partial Conversion – English-only



### Center for Health Information and Analysis An Agency of the Commonwealth of Massachusetts

Massachusetts Resident

<date>

<address1> <address2>

<city>, <state> <zip>-<zip+4>

Dear Massachusetts Resident,

A few weeks ago, an adult in this household started the **Massachusetts Health Insurance Survey** but was not able to finish it. If you are not the person who started the survey, please give this letter to that person.

We know your time is valuable. However, we encourage you to just take a few minutes to answer the rest of the questions on the survey. **We are offering a \$10 gift card as a thank you for completing the survey.**

---

#### What do you need to do?

1. Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



2. Click or tap the survey icon.



3. Enter your secure access code.

<XXXXXX>

---

#### Your participation is important!

This important survey collects information from Massachusetts residents about health and issues they may have getting health care. Your household was randomly selected to represent many other households like yours. The results may help people in your community.

---

On behalf of the Commonwealth of Massachusetts, thank you for your participation.

Sincerely,

Dr. Zi Zhang  
Deputy Executive Director for Research  
Center for Health Information and Analysis

Para completar la encuesta en español, visite  
[www.mahealthsurveys.gov/mhis](http://www.mahealthsurveys.gov/mhis).



## M1 – Spanish (bilingual, included English on reverse)



## Centro de Información y Análisis sobre la Salud

*Una agencia de la Commonwealth de Massachusetts*

Residente de Massachusetts

<date>

<address1> <address2>

<city>, <state> <zip>-<zip+4>

Estimado(a) residente de Massachusetts:

Su hogar fue seleccionado al azar para participar en la **encuesta sobre seguros médicos de Massachusetts** correspondiente a este año.

La Commonwealth de Massachusetts lleva a cabo esta importante encuesta. Recopila información de los residentes de Massachusetts sobre la salud y los problemas que pueden enfrentar para obtener atención médica. Sus respuestas representarán a muchos otros hogares como el suyo y los resultados podrían ayudar a las personas de su comunidad.

No vendemos nada ni estamos pidiendo dinero. Para agradecerle de antemano por su participación, adjuntamos un billete de \$1. Esta pequeña gratificación es para usted, independientemente de que decida participar o no.

### Cómo completar la encuesta en línea

La encuesta debe ser completada por un adulto de su hogar que tenga 18 años o más y que pueda responder preguntas sobre la atención médica de todos los integrantes de su hogar.

**1.** Para acceder a la encuesta, escriba la URL  
O escanee el código QR en su dispositivo móvil.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Haga clic en el ícono de la encuesta o presiónelo.



**3.** Su código de acceso seguro es.

<XXXXXX>

Si no tiene acceso a Internet o preferiría contestar la encuesta por teléfono, llame al **1-888-656-8909**.

Le agradecemos su participación en nombre de la Commonwealth de Massachusetts.

Atentamente,

Dr. Zi Zhang  
Director Ejecutivo Adjunto para Investigación  
Centro de Información y Análisis sobre la Salud

Center for Health Information and Analysis 501 Boylston Street, Suite 5100, Boston, MA 02116 T: 617. 701. 8100 [www.chiamass.gov](http://www.chiamass.gov)

## M2 – Spanish (bilingual)



Center for Health Information and Analysis  
An Agency of the Commonwealth of Massachusetts

Participate in the **Massachusetts Health Insurance Survey!**

**1.** Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

If you prefer to complete over the phone, call us at **1-888-656-8909**.

If you already completed, thank you!

¡Complete la **Encuesta sobre seguros médicos de Massachusetts!**

**1.** Para acceder a la encuesta, escriba la URL O escanee el código QR en su dispositivo móvil.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Haga clic en el ícono de la encuesta o presiónelo.



**3.** Su código de acceso seguro es.

<XXXXXX>

Si prefiere contestar la encuesta por teléfono, llame al **1-888-656-8909**.

Si ya ha completado, ¡gracias!

## M3 – Spanish (bilingual, included English on reverse)



Centro de Información y Análisis sobre la Salud  
Una agencia de la Commonwealth de Massachusetts

Residente de Massachusetts

<date>

<address1> <address2>

<city>, <state> <zip> <zip+4>

Estimado(a) residente de Massachusetts:

Este es un recordatorio para completar la encuesta sobre seguros médicos de Massachusetts.

### ¡Su participación es importante!

Esta importante encuesta recopila información de los residentes de Massachusetts sobre la salud y los problemas que pueden enfrentar para obtener atención médica. Su hogar fue seleccionado para representar a muchos otros hogares como el suyo. Los resultados pueden ayudar a las personas de su comunidad.

### ¿Qué debe hacer?

Pídale a un adulto de su hogar que tenga 18 años o más que complete esta encuesta en los próximos días. Esta persona debe poder responder preguntas sobre la atención médica de todos los integrantes del hogar.

**1.** Para acceder a la encuesta, escriba la URL  
O escanee el código QR en su dispositivo  
móvil.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Haga clic en el ícono  
de la encuesta o  
presiónelo.



**3.** Su código de  
acceso seguro es.

<XXXXXX>

Si no tiene acceso a Internet o preferiría contestar la encuesta por teléfono, llame al **1-888-656-8909**.

Le agradecemos su participación en nombre de la Commonwealth de Massachusetts.

Atentamente,

Dr. Zi Zhang

Director Ejecutivo Adjunto para Investigación

Centro de Información y Análisis sobre la Salud

Center for Health Information and Analysis 501 Boylston Street, Suite 5100, Boston, MA 02116 T: 617. 701. 8100 [www.chiamass.gov](http://www.chiamass.gov)

## M4 – Spanish (bilingual)



Center for Health Information and Analysis  
An Agency of the Commonwealth of Massachusetts

This is your **final reminder** to complete the **Massachusetts Health Insurance Survey**. Complete your survey today! Your opinions matter.

**1.** Access the survey by typing the URL OR scanning the QR code from your mobile device.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Click or tap the survey icon.



**3.** Enter your secure access code.

<XXXXXX>

If you prefer to complete over the phone, call us at **1-888-656-8909**.

If you already completed, thank you!

Este es su **último recordatorio** para completar **la encuesta sobre seguros médicos de Massachusetts**. Complete la encuesta hoy! Sus opiniones son importantes.

**1.** Para acceder a la encuesta, escriba la URL O escanee el código QR en su dispositivo móvil.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Haga clic en el ícono de la encuesta o presiónelo.



**3.** Su código de acceso seguro es.

<XXXXXX>

Si prefiere contestar la encuesta por teléfono, llame al **1-888-656-8909**.

Si ya ha completado, ¡gracias!

## Partial Conversion – Spanish (bilingual, included English on reverse)



**Centro de Información y Análisis sobre la Salud**  
Una agencia de la Commonwealth de Massachusetts

Residente de Massachusetts

<date>

<address1> <address2>

<city>, <state> <zip>-<zip+4>

Estimado(a) residente de Massachusetts:

Hace unas semanas, una persona adulta de su familia empezó la Encuesta sobre seguros médicos de Massachusetts, pero no la pudo terminar. Si usted no es esa persona, le pedimos que le entregue esta carta a quien corresponda.

Sabemos que su tiempo es valioso. Pero le animamos a que se tome unos minutos para responder el resto de las preguntas de la encuesta. **{Considere la posibilidad de completar la encuesta. / Como agradecimiento por completar la encuesta, le ofrecemos una tarjeta de regalo \$10.}**

¿Qué debe hacer?

**1.** Para acceder a la encuesta, escriba la URL  
O escanee el código QR en su dispositivo  
móvil.

[mahealthsurveys.gov/mhis](http://mahealthsurveys.gov/mhis)



**2.** Haga clic en el icono  
de la encuesta o  
presiónelo.



**3.** Su código de  
acceso seguro es.

<XXXXXX>

**¡Su participación es importante!**

Esta importante encuesta información de los residentes de Massachusetts sobre la salud y los problemas que pueden enfrentar para obtener atención médica. Su hogar fue seleccionado para representar a muchos otros hogares como el suyo. Los resultados pueden ayudar a las personas de su comunidad.

Le agradecemos su participación en nombre de la Commonwealth de Massachusetts.

Atentamente,

Dr. Zi Zhang  
Director Ejecutivo Adjunto para Investigación  
Centro de Información y Análisis sobre la Salud

Center for Health Information and Analysis 501 Boylston Street, Suite 5100, Boston, MA 02116 T: 617.701.8100 [www.chiamass.gov](http://www.chiamass.gov)