MHDO Proposed Health Cost Survey

- 1. What is your role as it relates to accessing information from the site? (drop down or radio)
 - a. Researcher
 - b. Consumer
 - c. Provider
 - d. Insurer
 - e. Employer
 - f. Other
- 2. What is your age? (free text / number)
- 3. What is your gender? (radio button M/F)
- 4. What is your zip code? (free text)
- 5. What is your health insurance status? (drop down or radio)
 - a. My employer provides my insurance
 - b. I buy my own health insurance
 - c. MaineCare
 - d. Medicare
 - e. VA
 - f. I don't currently have health insurance
 - g. Other
- 6. What is the highest degree or level of school you have completed? If currently enrolled, mark the previous grade or highest degree received. (drop down radio)
 - a. No schooling completed
 - b. Up to 9th grade
 - c. 9th, 10th or 11th grade
 - d. 12th grade, no diploma
 - e. High school graduate high school diploma or the equivalent Some college credit, but less than 1 year
 - f. 1 or more years of college, no degree
 - g. Associate degree
 - h. Bachelor's degree
 - i. Master's degree
 - j. Professional degree
 - k. Doctorate degree
- 7. How did you hear about the Health Cost site? (drop down or radio)
 - a. Colleague
 - b. Friend
 - c. Provider
 - d. Other
- 8. Have you used the Health Cost site before? (radio button yes / no)
- 9. If yes, how many times have you used the site in the past year? (drop down or radio)

- a. one other time
- b. between 1 and 5 other times
- c. between 5 and 10
- d. more than 10
- 10. Was it easy for you to find the information you were looking for? (drop down or radio)
 - a. Extremely Easy
 - b. Moderately Easy
 - c. Slightly Easy
 - d. Neither Easy or Difficult
 - e. Slightly Difficult
 - f. Moderately Difficult
 - g. Extremely difficult
 - h. Could not find the information I wanted
- 11. In general, do you find the information on the site useful? (drop down or radio)
 - a. Extremely Useful
 - b. Moderately Useful
 - c. Slightly Useful
 - d. Not very Useful
 - e. Useless
- 12. If you find it useful, how are you using the information? (drop down or radio)
 - a. Personal health choices
 - b. Research
 - c. Advise a friend
 - d. Other
- 13. What changes would make the site more useful (check as many as apply)
 - a. Easier Navigation
 - b. Additional Information
 - c. More Explanations
 - d. Quality Information
- 14. What do you like most about the site (free text)
- 15. What do you like least about the site (free text)
- 16. Would you recommend the site to a friend / colleague? (radio yes / no)
- 17. Overall, are you satisfied with your experience on this site, dissatisfied, or neither satisfied or dissatisfied? (drop down or radio)
 - a. Extremely satisfied
 - b. Moderately satisfied
 - c. Slightly satisfied
 - d. Neither satisfied or dissatisfied
 - e. Slightly dissatisfied
 - f. Moderately dissatisfied
 - g. Extremely dissatisfied
- 18. Any other comments (free text)