



HNHC Survey Topline

This study was conducted for The Commonwealth Fund via telephone and web by SSRS, an independent research company. Interviews were conducted from June 22 – September 14, 2016 among High Needs High Cost (HNHC) respondents (N=1805) and non-HNHC respondents (N=1204) age 18+. The margin of error for total respondents is +/-3.06%, +/-2.77% for HNHC respondents, and +/-3.38% for non-HNHC at the 95% confidence level.

More information about SSRS can be obtained by visiting www.ssrs.com

SC-01. Has a doctor, nurse, or other health professional EVER told you that you (have/had)?

a. Asthma, lung disease or emphysema

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	13	39	10
No, have not been told	86	60	89
Don't know	*	*	*
Refused	*	*	*

b. Depression, anxiety or other mental health problems

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	20	56	16
No, have not been told	80	43	84
Don't know	*	*	*
Refused	*	1	*

c. Diabetes requiring insulin

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	6	28	4
No, have not been told	94	72	96
Don't know	*	*	-
Refused	*	*	*

d. Heart failure or heart attack

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	5	28	3
No, have not been told	95	72	97
Don't know	*	*	-
Refused	*	*	-

e. A stroke

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	4	24	1
No, have not been told	96	76	98
Don't know	*	*	*
Refused	*	*	-

f. Chronic kidney disease or kidney failure

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	3	15	1
No, have not been told	97	85	99
Don't know	*	*	*
Refused	-	-	-

g. Cancer, not including skin cancer

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have been told	6	23	5
No, have not been told	94	76	95
Don't know	*	*	-
Refused	*	*	-

SC-02. Do you now have any health problems that require you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	9	60	4
No	91	40	96
Don't know	-	-	-
Refused	-	-	-

SC-03. Because of a health or memory problem, do you have any difficulty preparing meals, shopping for groceries, making telephone calls, or taking medication?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	5	43	1
No	95	56	99
Don't know	*	*	*
Refused	*	*	*

SC-04. Because of a health or memory problem, do you have any difficulty getting across a room, dressing, bathing, eating, getting in and out of bed, or using the toilet?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	5	38	1
No	95	61	99
Don't know	*	*	-
Refused	*	*	-

HE-1. Do you have health insurance?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	85	87	85
No	14	12	15
Don't know	*	1	*
Refused	*	*	*

(ASK IF HE-1=1) BASE: AGE 18-64

SC-05. Is your **MAIN** health insurance through Medicare, the government program that pays health care bills for people over age 65 and for some disabled people?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	1569	882	687
Yes	9	53	5
No	88	45	92
Don't know	2	2	2
Refused	*	*	*

ACCESS

HN-01. How easy or difficult is it to get medical care in the evenings, on weekends, or on holidays without going to the hospital emergency room? Is it...?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
NET: Easy	51	35	53
Very easy	23	15	24
Somewhat easy	28	20	29
NET: Difficult	36	56	34
Somewhat difficult	19	21	19
Very difficult	17	35	15
Never needed care in the evenings, weekends, or holidays	8	4	8
Don't know	5	4	5
Refused	*	*	*

HN-02. During the past two years, how many times have you gone to a hospital emergency room about your own health? This includes emergency room visits that resulted in a hospital admission.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
None	64	34	68
Once	18	18	17
2 to 4 times	14	31	12
5 or more times	4	15	3
More than once but don't know exact number	*	1	*
Don't know	*	1	*
Refused	*	*	-

(ASK IF HN-02=2,3,4,5 USED ER IN THE PAST 2 YEARS)

HN-03. The last time you went to the hospital emergency room, was it for a condition that you thought could have been treated in a doctor's office or a clinic?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	1519	1144	375
Yes	38	29	41
No	59	68	57
Don't know	2	3	2
Refused	*	*	*

HN-04. During the past two years, have you ever talked with a medical professional by video or on a computer or tablet instead of going to see them in person?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	5	8	5
No	95	92	95
Don't know	*	*	*
Refused	*	*	-

(IF HN-04=1)

HN-05. Did the video visit meet all, some, or none of your needs?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	194	139	55
All of my needs	50	35	53
Some of my needs	29	38	27
None of my needs	14	19	13
Don't know	7	8	7
Refused	*	-	*

HN-06. In the past two years, have you:

a. Emailed any health professional with a medical question?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	12	15	12
No	87	85	88
Do not have internet	*	1	*
Don't know	*	*	*
Refused	-	-	-

b. Viewed online or downloaded your health information, such as your tests or laboratory results?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	26	23	26
No	74	76	74
Do not have internet	*	1	*
Don't know	*	*	*
Refused	-	-	-

RELATIONSHIP WITH PERSONAL DOCTOR OR NURSE

HN-07. Is there one doctor or nurse you usually go to when you are sick or need health care?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes, have a regular doctor	71	81	70
Yes, have a regular nurse	3	3	3
Yes, a physician assistant	1	2	1
Yes, but have more than one regular doctor or nurse	1	2	1
No	24	11	25
Don't know	*	*	*
Refused	*	*	*

(IF HN-07=5, 8, 9)

HN-08. Is there one doctor's group, health center or clinic you usually go to for most of your medical care?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	448	190	258
Yes	50	60	50
No	49	39	49
Don't know	1	1	1
Refused	-	-	-

HN-07/HN-08 COMBO TABLE: Do you have a regular doctor/nurse/PA/place?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	88	95	87
No	12	5	12
Don't know	*	*	*
Refused	-	-	-

(IF REGPLACE=1, 2, 3, 4)

HN-08a. In the past 12 months, did you personally go to this doctor/nurse/place for any reason?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2807	1738	1069
Yes	76	89	75
No	23	11	25
Don't know	*	*	*
Refused	*	-	*

(IF REGPLACE=1, 2, 3, 4)

HN-10. In the past 12 months, did you delay getting care with your regular doctor/nurse/the medical staff you see because...

a. You didn't have transportation

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2807	1738	1069
Yes	6	22	4
No	94	78	96
Don't know	*	*	-
Refused	*	-	*

b. The doctor's office/nurse's office/place of care wasn't open when you could get there

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2807	1738	1069
Yes	14	24	13
No	86	76	87
Don't know	*	1	*
Refused	*	-	*

c. You couldn't get an appointment soon enough

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2807	1738	1069
Yes	18	29	17
No	81	70	83
Don't know	*	1	*
Refused	*	*	-

(IF REGPLACE=1, 2, 3, 4)

HN-11. In the past 12 months, when you contacted your doctor's office or clinic/usual place of care with a medical question, how often did you get an answer that same day? Would you say it was...

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2807	1738	1069
Always	42	41	43
Usually	25	25	25
Sometimes	17	21	17
Never	6	11	6
Never tried to contact	7	2	8
Don't know	1	1	1
Refused	*	*	*

(IF HN-8a=1)

HN-12. In the past 12 months, when you needed care or treatment, how often did your regular doctor/nurse/the medical staff you see (INSERT ITEM) Would you say it was...?

a. Know important information about your medical history

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2387	1558	829
Always	69	68	69
Usually	18	17	18
Sometimes	9	11	9
Never	2	4	2
Don't know	1	1	1
Refused	*	*	*

b. Involve you as much as you want in decisions about your treatment or care

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2387	1558	829
Always	74	66	75
Usually	15	16	15
Sometimes	7	13	7
Never	3	4	2
Don't know	1	1	1
Refused	*	*	*

c. Listen carefully to you

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	2387	1558	829
Always	75	71	76
Usually	14	15	14
Sometimes	7	11	7
Never	2	3	2
Don't know	1	*	1
Refused	*	*	*

POST-HOSPITALIZATION

HN-13. During the past two years, were you a patient in the hospital overnight? Do not include an overnight stay in the emergency room.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	18	48	14
No	82	52	85
Don't know	*	1	*
Refused	*	*	-

(IF HN-13=1)

HN-14. After you left the hospital, did you get the help, information, and services you needed to help maintain your health and well-being? (IF YES, ASK: Did you get all of the help you needed or some of the help you needed?)

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	1050	865	185
Yes, all the help needed	79	74	80
Yes, some of the help needed	15	17	14
No, did not get any	6	8	5
Don't know	1	1	1
Refused	*	*	-

(IF HN-13=1 AND REGPLACE=1,2,3,4)

HN-16. After you left the hospital, did the doctors or staff at the place where you usually get medical care seem informed and up-to-date about the care you received in the hospital?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	1011	840	171
Yes	82	83	82
No	16	15	16
I did not see a/my doctor after leaving the hospital	*	*	*
Don't know	1	2	1
Refused	*	*	-

SOCIAL ISOLATION, LONELINESS AND BEHAVIORAL HEALTH SUPPORT

HN-17. Is someone available to help you if you need and want help?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	90	86	91
No	9	12	9
Don't know	1	1	*
Refused	*	*	*

The next few questions are about how you feel about different aspects of your life. For each one, tell me how often you feel that way.

HN-18. How often do you feel that you lack companionship?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Hardly ever	68	48	70
Some of the time	19	27	18
Often	12	23	11
Don't know	1	1	1
Refused	1	1	*

HN-19. How often do you feel left out?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Hardly ever	72	49	75
Some of the time	20	28	19
Often	6	21	5
Don't know	1	1	1
Refused	1	1	1

HN-20. How often do you feel isolated from others?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Hardly ever	75	50	78
Some of the time	16	27	15
Often	8	22	7
Don't know	*	*	1
Refused	*	*	*

HN-21. In the past two years, have you ever experienced emotional distress such as anxiety or great sadness which you found difficult to cope with by yourself?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	30	53	27
No	70	46	72
Don't know	*	1	*
Refused	*	*	*

(IF HN-21=1)

HN-22. When you felt this way, how often did you get an appointment for counseling or treatment as soon as you wanted?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	1179	876	303
Always	22	24	21
Usually	9	14	8
Sometimes	13	18	12
Never	48	37	50
Did not seek help	8	6	9
Don't know	*	1	*
Refused	*	*	*

AFFORDABILITY

HN-23. In the past 12 months, about how much have you and your family spent for medical treatments or services that were not covered by insurance or reimbursed?

This would include what you paid for prescription medicines, hospitalizations, medical and dental care, but does not include premiums. Your best estimate is fine.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Less than \$100	30	28	30
\$100 to less than \$500	21	18	22
\$500 to less than \$1,000	13	11	13
\$1,000 to less than \$3,000	15	14	15
\$3,000 to under \$5,000	7	8	7
\$5,000 or more	8	11	7
Don't know	5	9	5
Refused	1	2	1

HN-24. In the past 12 months, have you ever skipped doses or not filled a prescription for your medications because of the cost?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	12	28	10
No	86	70	88
All prescription medications are covered by insurance	*	*	*
Do not use prescriptions	2	*	2
Don't know	*	1	-
Refused	-	-	-

MATERIAL HARDSHIP QUESTIONS

HN-25. In the past 12 months, has there ever been a time you were worried or stressed about...

a. Having enough money to pay your rent or mortgage

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	26	45	24
No	73	54	75
Not applicable	1	1	1
Don't know	*	*	-
Refused	*	*	*

b. Having enough money to pay your gas, oil, or electric bill

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	25	51	22
No	75	48	78
Don't know	*	*	*
Refused	*	*	-

c. Having enough money to buy nutritious meals

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	21	44	18
No	79	55	82
Don't know	*	*	*
Refused	-	-	-

(IF Z-7=65+ OR Z-7a=4) or ((Z-7=18-64 OR Z-7A=1,2,3,5) AND HE-1=1, D. R)

HN-26. Now I would like to ask you about any health insurance you CURRENTLY have that helps pay for the cost of health care. I'm going to read a list of a few types of health insurance, and I'd like you to tell me which of these you have, if any.

- a. Health insurance offered through an employer or union. This could be insurance through a current or former job, your job or someone else's job.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	51	24	53
No	34	65	31
Don't know	1	1	1
Refused	*	1	*
Not asked question – said uninsured	14	10	14

- b. Medicaid [IF STATE SPECIFIC NAME FOR MEDICAID IS NOT MEDICAID INSERT: also known in your state as [state specific Medicaid program]]

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	17	40	15
No	67	48	69
Don't know	2	2	2
Refused	*	1	*
Not asked question – said uninsured	14	10	14

- c. A health insurance plan that you signed up for through a health insurance marketplace also known as Health Care DOT gov or [(INSERT STATE MARKETPLACE NAME) in your state]", created by the Affordable Care Act.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	11	16	11
No	72	69	72
Don't know	3	5	2
Refused	1	*	1
Not asked question – said uninsured	14	10	14

- d. A health insurance plan that you bought directly from an insurance company.

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	16	21	16
No	68	66	68
Don't know	2	3	1
Refused	*	1	*
Not asked question – said uninsured	14	10	14

- e. (PN: IF SC-05=1 AUTOCODE HN-26E=1) Medicare, the government program that pays health care bills for people over age 65 and for some disabled people

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	23	61	19
No	62	27	66
Don't know	1	1	1
Refused	*	*	*
Not asked question – said uninsured	14	10	14

- f. Health insurance through ANY other source, including military or veteran's coverage

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	3009	1805	1204
Yes	9	13	8
No	76	76	76
Don't know	1	1	1
Refused	*	1	*
Not asked question – said uninsured	14	10	14

HIGH NEED SECTION

- HN-27. In the past 12 months, did you visit more than one doctor's office or use more than one kind of health care service, such as physical therapy, or community service, such as home health care or transportation services?

	HNHC
<i>Base</i>	1805
Yes	53
No	47
Don't know	*
Refused	*

(IF HN-27=1)

- HN-28. Does a health care professional, other than your regular doctor, help you to manage your care or treatment from different doctors or care providers?

	HNHC
<i>Base</i>	996
Yes	58
No	41
Don't know	1
Refused	*

(IF HN-28=1 AND REGPLACE=1,2,3,4)

HN-28a. Is this person in your regular doctor's office/nurse's office/place of care, or outside your regular doctor's office/nurse's office/place of care?

	HNHC
<i>Base</i>	563
In your regular (doctor's office/nurse's office/place of care)	31
Outside	68
Don't know	1
Refused	*

(IF HN-28=1)

HN-29. Do you think the person who helps you with managing your care is informed and up-to-date about the care you get from other doctors or health providers?

	HNHC
<i>Base</i>	572
Yes, definitely	73
Yes, somewhat	17
No	7
Don't know	2
Refused	*

(IF HN-27=1)

HN-30. In the past 12 months, was there ever a time when you received conflicting advice from different doctors or health care professionals?

	HNHC
<i>Base</i>	996
Yes	32
No	67
Don't know	*
Refused	*

(IF HN-27=1 AND REGPLACE=1,2,3,4)

HN-31. In the past 12 months, how often did your regular doctor or place of care seem informed and up-to-date about the care you got from other doctors or health providers?

	HNHC
<i>Base</i>	970
Always	52
Usually	21
Sometimes	18
Never	7
Don't know	1
Refused	*

HN-32. How confident are you that you can control and manage most of your health problems?

	HNHC
<i>Base</i>	1805
Very confident	34
Confident	45
Not very confident	14
Not at all confident	6
Don't know	1
Refused	*

SUPPORT FROM FAMILY, COMMUNITY SERVICES AND OTHER RESOURCES

(IF SC-4=1)

HN-33. Earlier you mentioned that you have some difficulty at home getting across a room, dressing, bathing, or eating. How often do you have someone helping you with any of these activities?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	652	643	9
Always	21	25	2
Usually	12	14	3
Sometimes	42	37	62
Never	25	23	34
Don't know	*	*	-
Refused	*	*	-

(IF HN-33=1-3)

HN-34. Who most often helps you?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	465	458	7
A family member or relative	78	77	85
Friends or neighbors	8	9	-
A home health aide, nurse, or other health professional	10	12	3
Someone else	4	2	12
Don't know	*	*	-
Refused	-	-	-

(IF SC-3=1)

HN-35. Earlier you mentioned that you have some difficulty preparing meals, shopping for groceries, making telephone calls, or taking medication. How often do you have someone helping you with any of these activities?

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	736	726	10
Always	33	37	11
Usually	15	14	21
Sometimes	31	32	27
Never	19	17	30
Don't know	2	*	11
Refused	*	*	-

(IF HN-35=1-3)

HN-36. Who most often helps you with these activities? (READ LIST)

	Total Sample	HNHC	Non-HNHC
<i>Base</i>	582	576	6
A family member or relative	76	73	100
Friends or neighbors	12	14	-
A home health aide, nurse, or other health professional	8	10	-
Someone else	1	1	-
Don't know	*	1	-
Refused	*	*	-

HN-37. In the past 12 months, was there a time you DID NOT receive the help and services that you needed because of the cost?

	HNHC
<i>Base</i>	1805
Yes	25
No	74
Don't know	*
Refused	-

HN-40. Overall, now and when looking to the future, how concerned are you that you are or will be a burden to your family or friends?

	HNHC
<i>Base</i>	1805
Very concerned	28
Somewhat concerned	30
Not very concerned	14
Not at all concerned	26
Don't know	1
Refused	*

HN-38. Are you a part of an **in-person** support or self-help group where people with similar health conditions meet to share ideas, advice, and provide emotional support and encouragement?

	HNHC
<i>Base</i>	1805
Yes	13
No	86
Don't know	*
Refused	*

(IF HN-38=2)

HN-38A. Do you think an in-person support group would be helpful to you?

	HNHC
<i>Base</i>	1562
Yes	27
No	66
Don't know	7
Refused	*

HN-39. Are you a part of an **online community** where people with similar health conditions meet to share ideas, advice, and provide emotional support and encouragement?

	HNHC
<i>Base</i>	1805
Yes	12
No	87
Don't know	*
Refused	*

(IF HN-39=2)

HN-39A. Do you think an online support group would be helpful to you?

	HNHC
<i>Base</i>	1602
Yes	20
No	74
Don't know	5
Refused	*