United Power
Survey of Health Insurance Experiences

The new federal Affordable Health Care Act mandates that states draft legislation concerning how health insurance will be purchased in the future. Our organization, along with other members of United Power for Action and Justice, is currently reviewing the health care situation in Illinois. We need your help with our research. Please complete this short survey about your recent experience in Illinois' health care marketplace. If you prefer, you can complete the survey on-line at http://www.surveymonkey.com/s/PG6L7P5

This survey will take approximately three minutes to complete. Your information will be combined with others to help United Power identify the most common problems consumers experience that need to be corrected in health reform legislation. If you are willing to share your own story or get involved please let us know below (side 2). Thank you in advance for taking the time to make sure that the national health reform implementation works for Illinois residents.

1. What is your family size?
   ___Single – 1 adult
   ___Couple – 2 adults
   ___Family with children – at least 1 adult and 1 child

2. What United Power organization are you a member of? ____________________________________

3. What type(s) of health insurance do your family members have? Please check all that apply:
   ___No health insurance
   ___Employer sponsored/Group insurance
   ___Medicare (include Medicare with supplemental insurance)
   ___Individual coverage
   ___Medicaid
   ___AllKids
   ___FamilyCare
   ___Health Savings Account

4. Considering the past five years, have you or a member of your family encountered the following problems with health insurance? Check all that apply
   ___Lost insurance (perhaps due to change in job status)
   ___Dropped by insurance carrier
   ___Large increase in premium costs
   ___Large increase in deductible amount
   ___Decrease on covered health care costs or services
   ___Large increase in prescription drug costs
   ___Decrease in prescription coverage
   ___Denied health insurance
   ___Unable to afford desired amount of insurance coverage
   ___Reasonable insurance claim denied
   ___Unable to get questions about coverage answered
   ___Other (Please describe) ________________________________________________
5. *Do you know someone who has experienced any of the following problems with health insurance?*

___ Lost insurance (perhaps due to change in job status)
___ Dropped by insurance carrier
___ Large increase in premium costs
___ Large increase in deductible amount
___ Decrease on covered health care costs or services
___ Large increase in prescription drug costs
___ Decrease in prescription coverage
___ Denied health insurance
___ Unable to afford desired amount of insurance coverage
___ Reasonable insurance claim denied
___ Unable to get questions about coverage answered
___ Other (Please describe) ___________________________________________________________

6. *Would you be willing to share your own health care story as part of our efforts to press for consumer-friendly health care reform in Illinois?*

___ Yes  ___ No

If you would be interested in sharing your story OR get involved with United Power’s efforts in health care, please provide your name and preferred form of contact.

Name: __________________________________________________________________________

E-mail: __________________________________________________________________________

Phone: __________________________________________________________________________

Please use this space to share any additional experiences with the current health insurance marketplace or comments you have.

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*When completed, please return this survey to your organization's United Power leadership team or mail to:*

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