

























## 12. Respondent's basic information

1. Gender: 1.  Male 2.  Female
2. Marital Status: 1.  Married 2.  Unmarried
3. Education Level: 1.  Below elementary school 2.  Junior high school 3.  High school (vocational)  
4.  University (associate degree) 5.  Graduate school or above
4. Age: 1.  50-54 years 2.  55-59 years 3.  60-64 years 4.  65-69 years 5.  70-74 years  
6.  75-79 years 7.  80 years and above
5. Occupation: 1.  Military/Public Service/Education 2.  Service Industry 3.  Manufacturing Industry  
4.  Agriculture, Forestry, Fishing, and Animal Husbandry  
5.  Other (including retired)
6. Annual Household Income (NT\$): 1.  Below 300,000 2.  310,000 - 700,000  
3.  710,000 - 1,200,000 4.  1,210,000 - 2,200,000  
5.  2,210,000 - 3,000,000 6.  Above 3,010,000
7. Religious Belief: 1.  Buddhism 2.  Taoism (including Yiguandao)  
3.  Christianity (including Catholicism) 4.  Other \_\_\_\_\_
8. Do you have any of the following diseases? (Multiple selections allowed)
  1.  hypertension 2.  Hyperlipidemia 3.  Heart disease
  4.  Cerebrovascular disease (stroke) 5.  Uremia
  6.  Diabetes Mellitus 7.  Chronic obstructive pulmonary disease (COPD)
  8.  Liver cirrhosis 9.  Cancer 10.  Other \_\_\_\_\_
9. Have you ever had a significant medical history with hospitalization records?  
 No  
 Yes (please continue selecting from the options below) (Multiple selections allowed)
  1.  Acute myocardial infarction (severe) 2.  Coronary artery bypass surgery
  3.  End-stage renal disease 4.  Severe disability after stroke
  5.  Cancer (severe) 6.  Paralysis (severe)

7.  Major organ transplant or hematopoietic stem cell transplant

8.  Other \_\_\_\_\_

10. Do you personally have any of the following insurance policies?

No

Yes (please continue selecting from the options below) (Multiple selections allowed)

1.  Insurance of Critical illness 2.  Insurance of Severe specific illness

3.  Insurance of Critical disease 4.  General medical insurance

11. Do you personally have the National Health Insurance Critical-Disease Certificate Card?

No  Yes

**This questionnaire is now complete. Thank you for being so patient in filling it out!**