**Supplementary Table S1. List of assessed food groups and scoring of the dietary questionnaire.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Frequency of consumptiona | | | | | |
| Food groups | 1 | 2 | 3 | 4 | 5 | 6 |
| Meat (no sausage or cold meats) | 0 | 1 | 2 | 2 | 1 | 0 |
| Sausages and cold meats | 0 | 1 | 2 | 2 | 1 | 0 |
| Fish | 1 | 2 | 2 | 1 | 0 | 0 |
| Potatoes | 2 | 1 | 0 | 0 | 0 | 0 |
| Pasta products | 2 | 1 | 0 | 0 | 0 | 0 |
| Rice | 2 | 1 | 0 | 0 | 0 | 0 |
| Salad and raw vegetables | 2 | 1 | 0 | 0 | 0 | 0 |
| Vegetables, cooked | 2 | 1 | 0 | 0 | 0 | 0 |
| Fruits | 2 | 1 | 0 | 0 | 0 | 0 |
| Chocolate | 0 | 0 | 1 | 1 | 2 | 2 |
| Cake, pastry | 0 | 0 | 1 | 1 | 2 | 2 |
| Salty snacks, chips, pretzel sticks | 0 | 0 | 1 | 1 | 2 | 2 |
| Wholemeal, brown, and crispbread | 2 | 1 | 0 | 0 | 0 | 0 |
| Oats, muesli, cornflakes | 2 | 2 | 1 | 1 | 0 | 0 |
| Eggs | 0 | 1 | 2 | 2 | 2 | 2 |

a*1* nearly daily, *2* several times per week, *3* about once a week, *4* several times per month, *5* once per month or less, *6* never. *Sum score ≤ 13* unhealthy diet, *sum score 14 /15* normal diet, *sum score ≥ 16* healthy diet. Analysis distinguished only between unhealthy and not unhealthy diet.

**Supplementary Table S2. Alcohol consumption.**

|  |  |  |
| --- | --- | --- |
| **I Questions** | | |
| **Q1**. How much beer, wine and spirits did you drink over the **last weekend**, i.e. Saturday **and** Sunday? |  | a) Beer |\_|\_|.|\_| Liter  b) Light beer |\_|\_|.|\_| Liter  c) Non-alcoholic beer |\_|\_|.|\_| Liter  d) Wine and sparkling wine |\_|\_|.|\_| Liter  e) Spirits (**number of glasses** of 0.02 Liter) |\_|\_| Glasses |
| **Q2.** How much beer, wine and spirits did you drink on the last working day? If this day was a Friday, please consider Thursday. |  | a) Beer |\_|\_|.|\_| Liter  b) Light beer |\_|\_|.|\_| Liter  c) Non-alcoholic beer |\_|\_|.|\_| Liter  d) Wine and sparkling wine |\_|\_|.|\_| Liter  e) Spirits (**number of glasses** of 0.02 Liter) |\_|\_| Glasses |
| **II Calculation of total alcohol consumption** | | |
| [ 40 g \* (Q1a + 5 \* Q2a) + 22 g \* (Q1b + 5 \* Q2b)  + 3 g \* (Q1c + 5 \* Q2c)  + 100 g \* (Q1d + 5 \* Q2d)  + 6.2 g \* (Q1e + 5 \* Q2e)] / 7 |  | Beer (Liter) Light beer (Liter) Non-alcoholic beer (Liter) Wine (Liter) Spirits (0.02 Liter) |
| **III Categorization** | | |
| Men > 40g/day  Women > 20g/day |  | High alcohol consumption High alcohol consumption |

**Supplementary Table S3. Characteristics of individuals who were excluded from analysis.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Private insurance |  | Co- insured |  | Switched for non-monetary reasons |  | “Do not know”a | Missing |
| N | 625 |  | 377 |  | 198 |  | 482 | 270 |
| Age (years) (SD) | 47.5 (12.6) |  | 48.4 (11.7) |  | 41.3 (11.5) |  | 51.5 (14.6) | 47.7 (14.5) |
| Male sex (%) | 406 (65.0) |  | 17 (4.5) |  | 91 (46.0) |  | 232 (48.1) | 129 (52.9) |
| Education (%) |  |  |  |  |  |  |  |  |
| Basic school | 149 (23.8) |  | 234 (62.1) |  | 96 (48.5) |  | 346 (71.9) | 141 (59.5) |
| Secondary school | 131 (21.0) |  | 91 (24.1) |  | 42 (21.2) |  | 78 (16.2) | 45 (19.0) |
| Higher school | 345 (55.2) |  | 52 (13.8) |  | 60 (30.3) |  | 57 (11.9) | 51 (21.5) |
| Income/1000 | 3.1 (1.5) |  | 1.6 (0.8) |  | 2.1 (1.0) |  | 1.9 (0.9) | 1.8 (1.1) |
| No. of morbidities > 0 (%) | 22 (3.5) |  | 24 (6.4) |  | 7 (3.5) |  | 48 (10.0) | 18 (7.8) |
| Lifestyle (%) |  |  |  |  |  |  |  |  |
| Physical inactivity | 240 (38.4) |  | 200 (53.1) |  | 98 (49.5) |  | 289 (60.0) | 138 (61.3) |
| Unhealthy diet | 194 (31.0) |  | 99 (26.3) |  | 70 (35.4) |  | 158 (32.8) | 86 (38.4) |
| Smoking | 140 (22.4) |  | 69 (18.3) |  | 62 (31.2) |  | 141 (29.3) | 85 (35.6) |
| Alcohol | 161 (25.8) |  | 56 (14.9) |  | 38 (19.2) |  | 97 (20.1) | 43 (18.9) |
| BMI | 26.4 (4.0) |  | 27.3 (5.4) |  | 26.5 (4.9) |  | 27.6 (4.6) | 27.3 (4.7) |

Data are mean (standard deviation) or n (%). *SQB* = status quo bias, *Alcohol* = high alcohol consumption, *Morbidity* = prevalence of type-2 diabetes, stroke, and myocardial infarction, DM = Deutsche Mark, German currency until 2002.

a Individuals who stated to “do not know” how much lower the monthly rate would have to be in order to make them switch from their current health insurance provider to an alternative health insurance provider.

The group of individuals who switched for non-monetary reasons was younger than the other excluded groups, but also slightly older than individuals who switched for monetary reasons (Table 1). Individuals with private insurance have a higher income than other excluded and not excluded groups. In line with income, individuals with private insurance had the highest proportion of individuals with higher school education. The group of individuals who were co-insured had the lowest mean income. All these descriptive results are plausible and driven by a systematic selection owing to the German health care system.

**Supplementary Table S4. Subgroup analysis.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Covariates | Physical inactivity | Unhealthy diet | Smoking | Alcohol |  | Sum of unhealthy behaviors | BMI |
|  | OR [95% CI] | OR [95% CI] | OR [95% CI] | OR [95% CI] |  | IRR [95% CI] | β [95% CI] |
| ***Age ≤ 50 years*** |  |  |  |  |  |  |  |
| SQB (0−3)a | 1.24 [1.07; 1.45] | 1.04 [0.90; 1.21] | 1.10 [0.94; 1.28] | 1.05 [0.87; 1.27] |  | 1.06 [1.00; 1.13] | 0.35 [0.02; 0.68] |
| ***Age > 50 years*** |  |  |  |  |  |  |  |
| SQB (0−3)a | 1.20 [1.05; 1.37] | 1.04 [0.89; 1.22] | 0.94 [0.78; 1.13] | 1.02 [0.87; 1.21] |  | 1.04 [0.98; 1.11] | 0.28 [0.00; 0.56] |

All regression models have been adjusted for age, sex, education, income, satisfaction with current insurance plan, and morbidity, *Morbidity* = prevalence of type-2 diabetes, stroke, and myocardial infarction. Results are reported as odds ratios (OR) for the logistic regression results and as incidence rate ratios (IRR) for the Poisson regression results. Ordinary least square regression (OLS) results are reported as *β* coefficients. Every OR or IRR above 1 represents an increased risk of showing the unhealthy expression of the respective lifestyle factor. Likewise, an estimate larger than zero with regard to BMI in the OLS model represents a higher BMI.

a Very low SQB (Participants who had switched their health insurance for monetary reasons since 1996) = 0, low SQB (Participants who stated switching costs lower or equal to the estimated margin) = 1, high SQB (Participants who stated switching costs higher than the estimated margin) = 2, very high SQB (Participants who would not switch health insurance irrespective of potential rate reductions) = 3.