# 2007 Health Tracking Household Survey Restricted Use File: User's Guide (Release 1)



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# 2007 Health Tracking Household Survey Fact Sheet

	Survey Details				
Sample	17,797 people in 9,407 families in the contiguous U.S., representing the civilian noninstitutionalized population. The sample is nationally representative based on random digit dialing. (Unlike previous years of the survey, there is no clustering of the sample in 60 communities.)				
Time period	April 2007 – January 2008				
Content	[Some items are available only on the Restricted Use File.] Household composition Health insurance coverage Use of health services Health expenses and bills Unmet needs Usual source of care Affordable medical care for the uninsured  Satisfaction with health care  Health status, adult chronic conditions, height and weight, smoking behavior Perceptions of care delivery and quality Consumerism and health information seeking Patient activation  Employment and employer health insurance offerings Earnings and family income Ethnicity, race, and U.S. citizenship				
Differences between the 2003	Demographic characteristics  The clustering of the sample in 60 sites was changed to a national sample only,				
(Round Five) surveys	and the overall sample size was reduced.  There were also a number of changes in the variables included on the data files:  • Variables that were added: See Section 2.2.1.1 of this user's guide.  • Variables that were dropped: See Section 2.2.1.2 of this user's guide.				
Terminology	The Household Survey has been conducted since 1996-97.  "Round One" refers to the 1996-97 survey.  "Round Two" refers to the 1998-99 survey.  "Round Three" refers to the 2000-01 survey.  "Round Four" refers to the 2003 survey.  "Round Five" refers to the 2007 survey.				
	Types of Estimates				
Geographic areas represented	These data are designed to allow the user to calculate nationally representative estimates.				
Estimates for 2007	These data can be used for calculating cross-sectional estimates for 2007.				
Change estimates	The data from all five years of the survey (1996-97, 1998-99, 2000-01, 2003, and 2007) can be combined to calculate change over time.				
Pooled estimates	To benefit from increased sample size, data from multiple years of the survey can be combined to calculate a single "pooled" estimate.				

(continued...)

# 2007 Health Tracking Household Survey Fact Sheet (continued)

	Using the Data Files
Obtaining the data files and documentation	The data files and documentation are available through the Health and Medical Care Archive at the Inter-University Consortium for Political and Social Research (ICPSR). The web site is <a href="https://www.icpsr.umich.edu">www.icpsr.umich.edu</a> .
	The Public Use File can be downloaded at no cost directly from the ICPSR web site. The Restricted Use File is available to approved users only and is available at no or nominal fee. ICPSR provides the restricted data file on CD. To obtain permission to use the Restricted Use File, users must comply with conditions listed in the Household Survey Restricted Data Use Agreement, such as limiting data access to people specified in the agreement and destroying the data upon completion of the specified research project. Copies of the agreement and a description of the application process are available from the ICPSR web site.
Software requirements	Because the Household Survey has a complex sample design, most commonly used statistical software packages will not estimate standard errors correctly. The software recommended for analysis of the Household Survey data is SUDAAN, which accommodates the main features of the sample design. Chapter 4 of this user's guide explains how to use SUDAAN to calculate standard errors correctly. Not all software with the ability to analyze data from surveys with complex sample designs is able to accommodate the design of the Household Survey. For example, Stata and SAS are able to generate correct standard error estimates for site-specific estimates but not national estimates. Although Stata and SAS can account for some features of the sample design for national estimates, the fact that they cannot account for all of the major ones means that the standard error estimates will differ from those generated by SUDAAN (for national estimates). Those who are interested in using software other than SUDAAN for national estimates should consult Chapter 4 of this user's guide, as well as HSC Technical Publication No. 40, which describes the effect of using different statistical software packages to analyze the survey data. For those who decide to use Stata or SAS, Chapter 4 of this user's guide describes the most appropriate way to calculate standard errors given the limitations of those packages for analysis of Household Survey data.
Differences between the Public Use File and the Restricted Use File	The Public Use File contains less detailed information than the Restricted Use File in order to preserve the confidentiality of the survey respondents. The two files contain the same number of observations, but the Public Use File has fewer variables, some of which have undergone more extensive editing than those on the Restricted Use File. The Restricted Use File contains, state, and county-level identifiers for each observation, while the Public Use File contains identifiers only for U.S. Census Region. In addition, there are a number of analytic variables that are available only on the Restricted Use File. See Appendix B for a complete list of variables on the public and restricted versions of the data file.
Contacting the CTS help desk	ctshelp@hschange.org

#### **PREFACE**

Since 1995, the Center for Studying Health System Change (HSC) has been funded by the Robert Wood Johnson Foundation to conduct periodic surveys and site visits to provide information on how the health care system is changing, as well as the effects of those changes on people. Known collectively as the Community Tracking Study (CTS), these data collection activities have included site visits to 12 metropolitan areas as well as nationally representative surveys of households, physicians, health plans and employers (the latter two surveys have been discontinued).

The 2007 Health Tracking Household Survey is the fifth household survey to be conducted as part of these data collection activities, and is the successor to the CTS Household Surveys that were conducted in the four previous rounds. The survey provides nationally representative cross-sectional estimates of health insurance coverage, access to care, perceptions of care delivery and the quality of care, the use of health services, and other topics. This user's guide gives researchers the information necessary for using the restricted use version of the data file containing information from the 2007 Household Survey.

Data collection for the 2007 Household Survey began in April 2007 and was completed in January 2008. Earlier versions of the survey were conducted in 1996-97, 1998-99, 2000-01, and 2003. While the earlier surveys were based on representative samples of 60 communities, the 2007 survey was based strictly on a nationally representative sample. Each survey was designed to allow separate cross-sectional estimates of the U.S. civilian noninstitutionalized population. Researchers can use each year of the CTS Household Survey for separate cross-sectional analyses or combine the years to study changes in the health care system over time.

This user's guide presents background information about the 2007 Household Survey, explains how to select samples and weight variables, and discusses the correct approach to estimating variances. This discussion is followed by a description of variable construction and editing and other information about the data file. The appendices contain useful background information, such as the survey questions and detailed instructions on variance estimation. The codebook (2007 *Health Tracking Household Survey Restricted Use File: Codebook*) provides more detail on the data file, including frequencies and definitions of variables.

#### **ACKNOWLEDGMENTS**

The Center for Studying Health System Change (HSC) would like to express its great appreciation to its contractors, Mathematica Policy Research, Inc. (MPR) and Social and Scientific Systems, Inc. (SSS), for their collaboration in the production of this user's guide and the accompanying codebook and data file.

#### OBTAINING AND USING THE RESTRICTED USE FILE

In order to obtain and use this Restricted Use File, researchers must apply for access to the data and agree to the strict terms and conditions contained in the 2007 Health Tracking Household Survey Restricted Use Data Agreement. Information about the application process and the data use agreement are available from the ICPSR website (www.icpsr.umich.edu).

Before applying to use the 2007 Health Tracking Household Survey Restricted Use File, researchers should consider whether the Public Use File would serve their analytic needs. The public use and restricted use versions differ in the amount of geographic detail provided, and the confidentiality masking applied to some variables. The Restricted Use File contains state and county-level identifiers for each observation, while the Public Use File does not include any state or county identifiers. Lastly, there are a number of analytic variables that are available only on the Restricted Use File. See Appendix B for a complete list of variables on the public and restricted versions of the data file.

Information on the Public Use File is available in 2007 Health Tracking Household Survey Public Use File: User's Guide and 2007 Health Tracking Household Survey Public Use File: Codebook, available from the ICPSR web site (www.icpsr.umich.edu).

#### **OBTAINING TECHNICAL ASSISTANCE**

Information on the 2007 Health Tracking Household Survey can be obtained through the HSC Internet home page at <a href="http://www.hschange.org">http://www.hschange.org</a>. The Restricted Use File and the latest documentation are available through the Health and Medical Care Archive at the Inter-university Consortium for Political and Social Research at <a href="http://www.icpsr.umich.edu">http://www.icpsr.umich.edu</a>.

Technical assistance on issues related to the data file can be obtained by contacting the CTS Help Desk by e-mail at ctshelp@hschange.org or fax (202-863-1763).

#### VISIT THE HSC WEB SITE

www.hschange.org

For users of the Household Survey data files, the HSC Web site can be a valuable resource. In addition to the HSC technical publications and descriptions of the different data collection activities, it has these useful features.

*CTSonline user-specified tables.* CTSonline is an interactive Web-based system that allows users to request a wide variety of tables with Household Survey estimates. Launched in June 2002, the system has results for both the Household Survey and the Physician Survey.

Lists of papers published from the public use and restricted use data files. In the section of the Web site that discusses the public and restricted use data, you can view a list of journal articles that have been published by users of the public use and restricted use data files. If you have a paper based on the survey data that is not included on the list, please let us know by sending an email to CTSonline@hschange.org.

*Email list for updates on the survey data.* If you would like to receive email announcements when new versions of the survey data files are released, go to the Web site and click on "Sign up for email alerts." Then fill out the sign-up form and check the box specific to <u>CTS email</u>.

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#### **CHAPTER 1**

#### OVERVIEW OF THE 2007 HEALTH TRACKING HOUSEHOLD SURVEY

This guide is intended to assist researchers in using the 2007 Health Tracking Household Survey (HTHS) Restricted Use File. The 2007 HTHS is the successor to the Community Tracking Study (CTS) Household Surveys that were conducted between 1996 and 2003. The CTS and Household Survey are funded by the Robert Wood Johnson Foundation and conducted by the Center for Studying Health System Change (HSC). Additional documentation and detailed information on the file layout and content are available in 2007 Health Tracking Household Survey Restricted Use File: Codebook. Information about other aspects of the CTS is available from HSC at <a href="www.hschange.org">www.hschange.org</a>. Technical assistance on issues related to the data file may be obtained by contacting the CTS Help Desk by e-mail at ctshelp@hschange.org or fax (202-863-1763).

#### 1.1. OBJECTIVES OF THE COMMUNITY TRACKING STUDY

The Community Tracking Study (CTS) has been the core research effort of the Center for Studying Health System Change (HSC), a nonpartisan policy research organization in Washington, D.C., that is funded in part by the Robert Wood Johnson Foundation (RWJF) and is affiliated with Mathematica Policy Research, Inc. HSC's mission is to inform health care decision makers about changes in the health care system at the local and national levels, as well as how such changes will affect people. Since 1995, HSC has conducted five rounds of household and physician surveys; an employer survey was conducted for the first round but discontinued for subsequent rounds. In addition, HSC conducted six rounds of interviews with health care leaders in 12 communities.

The first four rounds of CTS surveys were focused on 60 nationally representative communities stratified by region, community size, and whether metropolitan or nonmetropolitan. In addition, the CTS examined 12 of the 60 communities in depth by conducting site visits and using survey samples large enough to draw conclusions about health system change in each community. The 12 communities make up a randomly selected subset of sites that are metropolitan areas with more than 200,000 people (as of July 1992).

For the fifth round of the household and physician surveys the community-based design was replaced by a national-sample design, although site visits continue to focus on the 12 communities (6 rounds of site visits have been completed, with the latest occurring in 2007). To reflect the change from a community-based to national sample, the round five Household Survey is referenced in this report as the 2007 Health Tracking Household Survey, or Household Survey.

#### 1.2. THE HOUSEHOLD SURVEYS

The 2007 Household Survey represents the fifth in a series of nationally representative surveys funded by the Robert Wood Johnson Foundation and conducted under the direction of HSC. The four prior surveys were conducted in 1996-97, 1998-99, 2000-01, and 2003. Mathematica Policy Research, Inc. (MPR) was the primary contractor for survey designs, instrument development, sample designs and implementation, most of the interviewing, weighting, and variance estimation. Social and Scientific Systems, Inc. (SSS) was instrumental in converting the raw survey data into a data file suitable for analysis. HSC, SSS, and MPR collaborated to prepare the documentation for the CTS Household Survey Restricted Use File.

The Household Survey instruments covered a wide variety of topics, including health insurance coverage, access to care, use of health services, health status, experiences with the delivery of health care, consumer engagement, use of healthcare information, and demographic information. A family informant provided information on insurance coverage, health care use, usual source of care, and general health status of all family members. This informant also provided information on family income as well as employment, earnings, employer-offered insurance plans, and race/ethnicity for all adult family members. Each adult in the family (including the informant) responded through a self-response module (SRM) to questions regarding unmet needs, assessments of the quality of care, consumer engagement, satisfaction with physician choice, use of health information, physician choice, and detailed health questions. The SRM included mostly subjective questions that could not be answered reliably by proxy respondents. The family informant responded on behalf of children regarding unmet needs, satisfaction with physician choice, and use of healthcare information. A Spanish version of the instrument was used when appropriate. The survey instruments used in each round of the Household Survey have included similar but not identical questions. More substantial changes were made to the 2007 Household Survey questionnaire than in prior years of the survey. A more detailed description of these changes to the survey questionnaire for 2007 can be found in the survey methodology report (Strouse et al., 2009), also available on the HSC website, (www.hschange.org).

Interviews for 17,797 individuals from 9,407 family insurance units (FIUs) were completed between April 2007 and January 2008.<sup>2</sup>

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<sup>&</sup>lt;sup>1</sup> In families with more than one child under age 18, one child was randomly selected for inclusion in the survey.

<sup>&</sup>lt;sup>2</sup> The family insurance unit (FIU) is based on groupings of people typically used by insurance carriers. It includes an adult household member, spouse, and dependent children up to age 18 (or age 18-22 if the child is in school). A more detailed definition of the FIU is presented in Chapter 2.

# 1.3. CHANGES IN SAMPLE DESIGN FOR THE ROUND FIVE HOUSEHOLD SURVEY

Several changes were made to the sample design of the fifth round of the Household Survey. This section summarizes these changes. A more detailed description of the sample design changes and methodology for Round Five can be found in the 2007 Household Survey Methodology Report (Strouse et al., 2009), also available on the HSC website, (www.hschange.org).

The first three rounds of the Household Survey were administered to households in the 60 CTS communities, which were designed to be nationally representative, and to an independent national sample of households, referred to as the "national supplement." The purpose of the supplemental sample was to increase the precision of national estimates. The national supplement was dropped for round four after analyses indicated that dropping the supplement would not reduce the range of analytic questions that the survey could address. Each of the first three rounds of the Household Survey included about 60,000 people in 33,000 FIUs; round four consisted of 46,587 people in 25,419 FIUs.

For rounds two through four, part of the sample was selected from telephone numbers included in the prior round (overlap sample) and part from telephone numbers selected for the first time (new sample). The purpose of the overlap sample was to increase the precision of estimates of change between rounds, increase response rates, and reduce data collection costs. In addition, a small field sample was included to represent households with no or intermittent landline telephone access. For the first four rounds of the survey, domestic partners (same-sex partners or unmarried partners) formed separate FIUs.

For round five, HSC replaced the 60-site community-based design with a design to produce only national estimates, which allowed for substantial reductions in sample size due to the elimination of clustering at the site level. Overall, 17,797 people in 9,407 FIUs were interviewed in round five. In addition, the overlap sample was dropped in the absence of the community samples from the prior round; the field component was deleted to reduce cost, and unmarried *domestic* partners were included in the same FIU.

#### 1.4. THE HOUSEHOLD SURVEY RESTRICTED USE AND PUBLIC USE FILES

Two versions of the Health Tracking Household Survey data are available to researchers: the Restricted Use File and the Public Use File. The *Restricted Use File* may only be used under the conditions listed in the *Health Tracking Household Survey Restricted Use Data Agreement*. This agreement provides details on ownership of the data, when the data may be accessed and by whom, how the data may be used and reported, the data security procedures that must be implemented, and the sanctions that will be imposed in the case of data misuse. Researchers must specifically apply to the Inter-university Consortium for Political and Social Research (ICPSR) for use of the Restricted Use File. Copies of the agreement and a description of the application process are available from the ICPSR web site at www.icpsr.umich.edu.

The Restricted Use File is provided to researchers for use on only a specific research project (new applications would be required for subsequent analyses) and for a limited time, after which

all copies of the data must be destroyed. Moreover, researchers using the Restricted Use File may be required to undertake costly or inconvenient security measures.

The Public Use File is also available from ICPSR. Researchers need not specifically apply for use of the Public Use File. It is suitable for most researchers who wish to perform analysis at the national level. The Public Use File does not contain any county information. The Public Use File contains observations on the same individuals and families as the Restricted Use File.

The Public Use and Restricted Use versions differ in the amount of geographic detail provided and the confidentiality masking applied to some variables. The Restricted Use File contains state and county-level identifiers for each observation, while the Public Use File contains only region and metropolitan area identifiers. In addition, there are a number of analytic variables that are available only on the Restricted Use File, including adult chronic conditions and U.S. citizenship. See Appendix B for a complete list of variables on the public and restricted versions of the data file.

#### **CHAPTER 2**

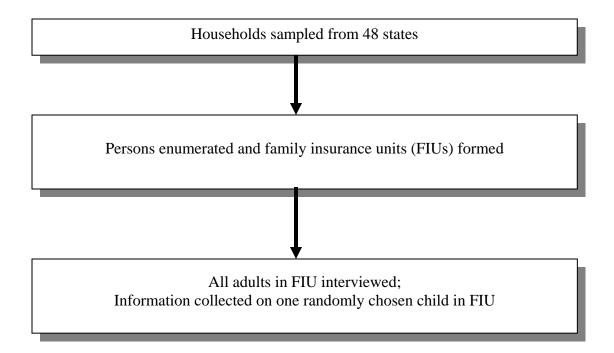
# THE STRUCTURE AND CONTENT OF THE 2007 HEALTH TRACKING HOUSEHOLD SURVEY

There were several steps involved in conducting the 2007 Household Survey, as shown in Figure 2.1. This chapter describes those steps and also includes information on the survey questions and final sample counts.

Households were randomly selected from the 48 states in the continental United States. This national sample of households is stratified by region but essentially uses simple random sampling techniques within strata.

FIGURE 2.1

OVERVIEW OF 2007 HOUSEHOLD SURVEY PROCEDURES



#### 2.1. CONDUCTING THE HOUSEHOLD SURVEY

The 2007 Household Survey used a sample that was derived by randomly selecting households using Random Digit Dialing techniques. Once we contacted the selected households, we determined the composition of each household, grouped household members into family insurance units (FIUs), and obtained information on each adult in each FIU. If an FIU contained one child, we collected information about him or her. If an FIU contained two or more children, we collected information about one randomly selected child. The interview process is described below.

#### 2.1.1. Households

At the beginning of the interview, a household informant was identified (typically the person who answered the phone, if it was an adult) and queried about the composition of the household.<sup>3</sup> The person who owned or rented the home was identified as the head of the household, or the householder. People who usually live in the household but who were temporarily living elsewhere, including college students, were included in the household. Note that not all household members are included on the data file (see Section 2.1.4.).

#### 2.1.2. Family Insurance Units

Individuals in the household were grouped into family insurance units (FIUs).<sup>4</sup> An FIU reflects family groupings typically used by insurance carriers, which differ from groupings defined by the Bureau of the Census.<sup>5</sup> An FIU is also similar to the filing unit used by Medicaid and state-subsidized insurance programs. The FIU includes an adult household member, his or her spouse, if any, and any dependent children 0-17 years of age or 18-22 years of age if a full-time student (even if living outside the household). In previous rounds of the Household Survey, domestic partners (same-sex partners and other unmarried partners) formed separate FIUs. In round five, domestic partners are put into the same FIU since many health insurance policies now cover them.

All FIUs were selected to participate in the remainder of the interview as long as there was at least one civilian adult in the unit.<sup>6</sup> In each FIU, one informant was responsible for providing the bulk of the information about the family and its members. Figure 2.2 shows how one household of seven people could be divided into three FIUs. In this example, the head's spouse is the household informant because he/she answered the telephone and is familiar with the

<sup>&</sup>lt;sup>3</sup>Note that the household informant was identified only for the purpose of obtaining information to be used in identifying family insurance units. The household informant is not identified on the data file. Designation of the household informant in one survey had no bearing on the designation of the household informant in a subsequent survey.

<sup>&</sup>lt;sup>4</sup> FIUs were constructed using information collected in the current survey. The structure of the FIUs in the previous survey, if available, had no bearing on the FIUs in the current survey.

<sup>&</sup>lt;sup>5</sup>The Census Bureau's definition of a family includes all people related to the head of the household either by blood or marriage; it is often larger than an FIU.

<sup>&</sup>lt;sup>6</sup>For the Household Survey, individuals who were not on active military duty at the time of the interview were considered to be civilians.

composition of the household. Because he/she is also familiar with the health care of his/her family members, he/she is also the informant for the first FIU (F1). The head's father is the informant for family unit two (F2), and the unrelated boarder responds for him- or herself (F3). The head's daughter is the randomly selected child in F1, and the head's son is not in the survey.<sup>7</sup>

FIGURE 2.2
EXAMPLE OF FIUs IN A HYPOTHETICAL HOUSEHOLD

FIU	Members of Household	Included in Survey	Household Informant	Family Informant
	Head of Household	~		
F1	Head of Household's Spouse	•	<b>&gt;</b>	<b>~</b>
1.1	Head of Household's Daughter	•		
	Head of Household's Son			
F2	Head of Household's Father	~		<b>~</b>
Γ2	Head of Household's Mother	•		
F3	Unrelated Boarder	~		<b>&gt;</b>

#### 2.1.3. Individuals

In addition to providing information about his or her FIU, each family informant was asked questions about his or her own health care situation and experiences. Other civilian adults in the FIU were similarly interviewed. In FIUs containing more than one child, information on one randomly selected child was collected. "Child" was defined as an unmarried individual younger than 18. As stated above, full-time college students (age 18-22), even if they were living away from home at the time of the survey, were listed as household members and were included in their parents' FIU. These students were treated as adults in the survey; that is, they were asked all the questions asked of adults and could not be the randomly selected child. Selection of children in 2007 was random within an FIU.

<sup>&</sup>lt;sup>7</sup>The distinction between an FIU and a Census family can also be illustrated by Figure 2.2. Family insurance units F1 and F2 together would constitute a Census family unit.

#### 2.1.4. Individuals Excluded from the File

The computerized survey instrument imposed a maximum of eight persons per household to be included in the survey. All members of responding households were identified by the household informant, but in the rare instance of households exceeding eight persons, the interviewers were instructed to list all adults in the household first and then as many children as possible before reaching the maximum. However, the fact that a household member was enumerated does not necessarily mean that the person ended up on the survey data file. As mentioned, in families with more than one child under age 18, one child was randomly selected for the survey. Any children not selected were left out of the survey but are represented statistically by the children who are in the survey.

Some household members were classified as ineligible and therefore not included on the file. To avoid giving unmarried full-time college students (age 18-22) multiple chances of selection, they were excluded from sampled dwellings in which their parents did not reside. Similarly, unmarried children under age 18 with no parent or guardian in the household were also excluded. Adults on active military duty were also classified as ineligible. Families in which all adults were active duty military personnel were considered ineligible for the survey and were excluded from the survey.

Some of the families listed by, but not including, the household informant did not respond to the interview. Nonresponding families were excluded from the file but are statistically represented by responding families. Adult family members who did not respond to the Self-Response Module were included on the file as long as the core interview contained a large enough set of responses for them.

#### 2.2. HOUSEHOLD SURVEY QUESTIONS

Respondents to the survey were questioned about the following:

- Household composition
- Health insurance coverage
- Use of health services
- Health expenses and bills
- Unmet needs
- Usual source of care
- Affordable medical care for the uninsured
- Satisfaction with health care
- Health status, adult chronic conditions, height and weight, and smoking behavior
- Perceptions of care delivery and quality
- Consumerism and health information seeking
- Patient activation
- Employment and employer health insurance offerings
- Earnings and family income
- Ethnicity, race, and U.S. citizenship
- Demographic characteristics

Not all questions were asked of all respondents. Table 2.1 shows the topics covered in the survey and who, according to the hypothetical household in Figure 2.2, responded to the questions under each section.

#### 2.2.1. Differences in Survey Content and Data Files Across Rounds

There are a number of changes, as described below, between the 2003 and 2007 Household Survey questionnaires. See the user's guides for the 1998-99 Household Survey for information on the differences between the 1996-97 (Round One) and 1998-99 (Round Two) surveys. Likewise, see the user's guides for the 2000-01 Household Survey for information on the differences between the 1998-99 (Round Two) and 2000-01 (Round Three) surveys. The user's guides for 2003 Household Survey contains information on the differences between the 2000-01 (Round Three) and 2003 (Round 4) surveys. You can also refer to Appendix B for a complete list of variables that are available for each year of the public use and restricted use data files.

#### 2.2.1.1. Added Variables

There were a considerable number of questions added to the 2007 Household Survey. The following is a list of the variables that are new for 2007, most of which are a result of the new survey questions.

- Indicator for high level of nonresponse in SRM.: SRM\_NR.
- Language of interview: LANGINTX. (Restricted Use File only)
- Census region: CENSUS.
- Deductible, flexible spending account, health savings account, and health plan information for employer-sponsored insurance: ESDEDB1 3, ESDEDI1 3, ESDEDF1 3 (Restricted Use File only), and ESDEDA1 3, ESIFLX1 ESIFLX3, ESIHSA1 3, EINFDR1 3, EDRCHG1 3, EHSPCH1 3, EDRQUA1 3, EHSPQU1 3.
- Deductible, health savings account, and health plan information for nongroup insurance: NGDEDB1 – 3, NGDEDI1 – 3, NGDEDF1 – 3 (*Restricted Use File only*), and NGDEDA1 – 3, NGHSA1 – 3, NINFDR1 – 3, NDRCHG1 – 3, NHSPCH1 – 3, NDRQUA1 – 3, NHSPQU1 – 3.
- Type of Medicare coverage and Medigap coverage, including coverage of prescription medicines: MCRTYPE, MEDIGAP, MCRPVRX, and MCRPRTD.
- Premium payments for Medicaid and State plans: MCDPRMF and STPRMF.
- Information on purchasing a nongroup plan: NGTRY, NGPRBLM, NGPRB3Y, NGPURCH, NGPURMN, NGPURYR, and NGNMON.
- Additional questions on problems with paying medical bills: BPOWNA and BPOWNB
   (Restricted Use File only), BPOWNX (Public Use File only), BRTHINK, BRPTEVR,
   CAREDEN, BP\_ACC, BP\_ILL, BP\_TEST, BP\_BRTH, BP\_ROUT, BP\_OTH, BP\_INS,

- BP\_COVR, BPDSCNT, BPFREE, BPPUBL, BPPPLN, BPLOAN, BPREFR, BPWHEN, BPAMTPD, and BPWHNPY.
- Use and choice of in-store retail clinic: ISCILL, ISCVAC, ISCEXAM, ISCCHRN, ISCRX, ISCOTH (Restricted Use File only), and ISCEVR, ISC12M, ISCUSC, ISCAPPN, ISCCST, ISCLOC, ISCHRS, and ISCCOVR.
- Use and choice of onsite workplace health clinic: OWCCHRN, OWCOTH (Restricted Use File only), and OWCEVR, OWC12M, OWCWRK, OWCVAC, OWCILL, OWCEXAM, OWCRX, OWCUSC, OWCAPPN, OWCCST, OWCLOC, and OWCHRS.
- Satisfaction with physicians: UDRINFO and UDRFOLW.
- Time between making appointment and seeing doctor: WTAPPX (Restricted Use File only), WTAPXX (Public Use File only), and MAKEAPP.
- Quality of care: CQEXPLN, CQTIME, CQRSPCT, CQDIET, CQEXRCS, CQMNTOR, CQFOLW, and CQSIDE.
- Questions on consumer engagement for chronic condition sample: CCEACTV, CCERESP, CCEKWRX, CCEFOLW, CCEPRDR, CCETDIF, CCEACTN, CCEKNOW, CCEOPTN, CCEPRNT, CCESTYL, CCEPRBM, and CCESTRS.
- Questions on consumer engagement for non-chronic condition sample: NCEACTV, NCERESP, NCEKWRX, NCEFOLW, NCEPRDR, NCETDIF, NCEACTN, NCEKNOW, NCEOPTN, NCEPRNT, NCESTYL, NCEPRBM, and NCESTRS.
- Seek consumer information for own health and for health of another adult: CIWEB, CIFRND, CITV, CIBOOK, CINWSP, CIOTHR, CIALT, CITALK, CIMAINT, CITREAT, ACIWEB, ACIFRND, ACITV, ACIBOOK, ACINWSP, ACIOTHR, and ACIALT.
- Use of information technology: ITWEB, ITOFTN, ITCNTCT, ITRX, ITAPPN, ITDISC, ITSEE, ITRMNDR, ITOTHER, and ITALLOW.
- Consumer shopping to look for and choose a personal doctor: CSDLOOK, CSDFIND, CSDREFR, CSDINS, CSDBOOK, CSDFRND, CSDTV, CSDWEB, CSDSOTH, CSDCMPQ, CSDQUSE, CSDCOST, CSDRCMN, CSDREPU, CSDWAIT, CSDLOC, CSDNETW, and CSDFOTH.
- Consumer shopping to look for and choose a specialist: CSSNUM, CSSWHEN, CSSFIND, CSSCHOI, CSSOSRC, CSSREFR, CSSINS, CSSBOOK, CSSFRND, CSSTV, CSSWEB, CSSSOTH, CSSCMPQ, CSSQUSE, CSSCOST, CSSRCMN, CSSREPU, CSSWAIT, CSSLOC, CSSNETW, and CSSFOTH.
- Consumer shopping to look for and choose a procedure place: ANYPROC, CSPRLOC, CSPWHEN, CSPFIND, CSPCHOI, CSPOSRC, CSPREFR, CSPINS, CSPBOOK,

CSPFRND, CSPTV, CSPWEB, CSPSOTH, CSPCMPQ, CSPQUSE, CSPCOST, CSPREPU, CSPRCMN, CSPWAIT, CSPLOC, CSPNETW, CSPFOTH.

- Additional questions about Hispanic origin: ORIGMEX, ORIGPR, ORIGCUB, ORIGDOM, ORIGSAL, ORIGOCA, ORIGOSA, and ORIGOTH. (Restricted Use File only)
- Birth place of parents and spouse's parents: USPAR and USSPPAR.

#### 2.2.1.2. Dropped Variables

Below is a list of variables that were dropped from the 2007 Household Survey data files. Except for the administrative variables, the imputation flags, and the weights/sampling variables, all the variables were dropped because they were associated with questions that were dropped from the 2007 survey.

- Household and person identifiers for reinterviews: In previous years of the survey, part of the sample was selected from telephone numbers included in the prior round (overlap sample) and households were reinterviewed. Because of changes to the sample design for the 2007 survey, there is no overlap sample with round four. (*Restricted Use File only*)
- SITE. In previous years of the survey, SITE identified 60 nationally representative communities stratified by region, community size, and whether metropolitan or non-metropolitan area. For round five, the community-based sample design was replaced by a national sample design. Therefore, SITE has been dropped.
- Some state and county code variables: STABBRX (*Public Use File only*), FIPSTX (*Public Use File only*), and FIPSCNTY (*Restricted Use File only*).
- Sources of information on private plans (booklet, website): PBKLET1 3 and PWEB1 –
   3. (Restricted Use File only)
- Coverage of pre-existing conditions for nongroup plans: PVHIPM1 3 and PVCVPX1 –
   (Restricted Use File only)
- Many of the managed care attributes of private plans: PRVSIG1 3, PVSIG1P 3P, PRVREF1 3, PVREF1P 3P, PRVLST1 3, PVLST1P 3P, PRVPAY1 3, PVPAY1P 3P, and PRVBOT1 3.
- Most of the variables for Medicare coverage: MCRSIGN, MCRSIGP, MCRREF, MCRREFP, MCRLST, MCRLSTP, MCRHMO, MCRHMOP, MCRHJOB, MCRPAY, MCRPAYP, FMCRSUP, MCRSUP, and MCRSUPJ.
- Policyholder number for state plan: STPHD.
- Previous insurance was an HMO: PREHMO.

- Attributes of last emergency room visit: ERCHOSE (Restricted Use File only), ERLSTVS, ERCNTAC, ERUSEDR, ERTRYDR, EROTHPL, and ERADMIT.
- Visits to medical professionals: DRTNPRM and MPVISNX.
- Surgical procedures: SURGN, SURGNTX, and SURGOPX.
- Any mental health care use: MENTAL.
- Unmet need for specific services (other than prescription medicines): UMETDR, UMETDRX, UMETSP, UMETSPX, UMETTST, UMETTSX, UMETPRC, and UMETPRX.
- Change in usual source of care and reasons for changing: USCCHG, USCRCHG, USCRHLH, and USCROTH.
- Reasons why person hasn't used place offering affordable medical care: AFFRSON and AFFRSN1 12.
- Patient trust in physician: DRNOREF, DRMETND, DRINFLU, and DRUNNEC.
- Attitudes about seeking medical care: DRFEELB and DRAVOID.
- CAHPS questions on health plan satisfaction: GETREFR, REQAPRVA, GETAPRVA, REQPWRK, PAPRWRKA, BNFSAFX, and RATING.
- Person number of family member who took child to doctor: TAKEID.
- Last physician visit and satisfaction: LSTAPPX and LSTRAVX (*Restricted Use File only*), LSTAPPXX and LSTRAVXX (*Public Use File only*), SICKCR, CHKASIK, CHECKUP, DRORSP, LSTYPE, VISCUR, LSTUSC, LSTOER, LSTAPP, LSTWATX, LSTHOR, LSTLISN, and LSTEXPL.
- Payment method and amount at last visit for uninsured: UNINFEE and UNINPAY. (*Restricted Use File only*).
- Mental health status: FLCALM4, FLDOWN4, and HAPPY.
- Variables from the "symptom response" questions about recent health
  problems/symptoms, the health care sought for one of those problems, and that problem's
  effect on the ability to do usual activities: SYNECK, SYBRETH, SYFAINT, SYBLUR,
  SYHACHE, SYCOUGH, SYSAD, SYANXTY, SYHIP, SYANKLE, SYWEAK,
  SYLUMP, SYURINE, SYHEAR, SYCHEST, SYLINK, SYMAPPR, SYMPREG,
  SYMTODR, DRSEE, DRTALK, DRCALL, DRNEED, DRCNTAC, DRTRYGO,
  SYMLMT, SYMLMTD, SYMMISS, SYMMSSD, and SICKLVE. (Restricted Use File
  only)

- Children with special health care needs: KRXUSE, KRXUSEX, KRXUSEY, KMORE, KMOREX, KMOREY, KLIMIT, KLIMITX, KLIMITY, KTHERA, KTHERAX, KTHERAY, KCOUNS, KCOUNSX, KCOUNSY, and CSHCN. (Restricted Use File only, except CSHCN)
- Employer offers choice of HMO and non-HMO plan: EMPHMO, EMPBOTH, OFRHMO, OFRNHMO, and OFRBOTH.
- Relative cost of other plans offered by employer: EMPLESS, EMPSAME, CHGPLDR, and CHGPLRX. (*Restricted Use File only*)
- Weights and sampling variables for estimates that can no longer be made because of changes in the sample design. (See Appendix B for a complete list.)

#### 2.3. HOUSEHOLD SURVEY ADMINISTRATION AND PROCESSING

The survey was administered by telephone, using computer-assisted telephone interviewing technology. Although the majority of the respondents were selected using list-assisted random-digit-dialing sampling methodology, families without working telephones were represented in the sample as well. The survey was fielded between April 2007 and January 2008. The total number of completed interviews consisted of 9,407 FIUs and 17,797 individuals. The overall response rate for FIUs was 43.5 percent.

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<sup>&</sup>lt;sup>8</sup> For more details on survey sampling and operations, refer to the *Health Tracking Household Survey Methodology Report*, 2007. That report is available as HSC Technical Publication #72 (www.hschange.org).

# TABLE 2.1 SOURCE OF DATA FOR INDIVIDUALS, BY QUESTION TOPIC

(Illustrative household described in Figure 2.2)

Family Insurance Unit Member	Household Composition (Sec. A)	Insurance Coverage (Sec. B)	Service Use/ Expenses and Bills (Sec. C)	Unmet Needs (Sec. C)	Usual Source of Care/ Affordable Medical Care (Sec. D)	Satisfaction with Health Care (Sec. E)	General Health Status (Sec. E)	Specific Health Status Information/ Height and Weight (Sec. E)	Risk/Smoking /Perceptions of Care Delivery and Quality (Sec. E)	Consumerism and Health Information Seeking (Sec. E)	Patient Activation (Sec. E)	Employ- ment/ Earnings/ Employer Plans (Sec. F)	Family Income (Sec. G)	Ethnicity/ Race/ Citizen- ship (Sec. G)
						First Fa	mily Insura	nce Unit						
Family Informant	Н	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1
Spouse	Н	F1	F1	SRM	F1	SRM	F1 and SRM	SRM	SRM	SRM	SRM	F1	F1	F1
Randomly Selected Child	Н	F1	F1	F1	F1	F1	FC or F1	FC or F1	Not Asked	FC or F1	Not Asked	Not Asked	F1	Not Asked
Other Children	Н	Data not ava	Data not available – Not randomly selected child.											
						Second I	Family Insur	ance Unit						
Family Informant	Н	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2
Spouse	Н	F2	F2	SRM	F2	SRM	F2 and SRM	SRM	SRM	SRM	SRM	F2	F2	F2
						Third Fa	amily Insura	ance Unit						
Unrelated Adult	Н	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3

#### Notes:

I	H	Data provided by the household informant (typically person who answers the telephone, if adult).
F	Fi	Data provided by family informant for family insurance unit "i".
SR	RM	Data provided by the individual adult family member via the Self-Response Module questions.
Fi and	l SRM	Data on general health status provided by the family informant and each individual adult family member via the Self-Response Module. In constructing the variable GENHLH, the SRM response was used when available. Otherwise, the family informant's response was used.
F	'C	Data provided by adult who took randomly selected child to last doctor visit. Skip questions if that adult not in family.
FC or	Fi	Data provided by adult who took randomly selected child to last doctor visit. Use family informant if that adult not in family.

#### **CHAPTER 3**

#### USING THE HOUSEHOLD SURVEY RESTRICTED USE FILE

This chapter explains how to choose the appropriate weight variable for national estimates according to the various "analytic scenarios" possible under each unit of analysis.

#### 3.1. CHOOSING A WEIGHT VARIABLE

Weights were constructed to produce national estimates for individuals and FIUs<sup>9</sup>. Three analysis weights, summarized in Table 3.1, are available in both public and restricted use files for round five. Person-level analyses are discussed in Section 3.1.1 and FIU-level analyses in Section 3.1.2.

#### 3.1.1. Person-Level Analyses

Most researchers will probably use the person, or individual, as the unit of analysis. The Household Survey Restricted Use File is a person-level file, consisting of one data record for each person in the Household Survey sample.

The person-level weight for analyses of the round five survey data is WTPER4. There was no unit nonresponse adjustment needed for the survey interview questions since an FIU informant responded on behalf of all FIU informants. A second person-level weight, WTSRM4, was constructed for analyses of the responses to the Self Response Module (SRM) questions. This weight adjusts for complete nonresponse to the SRM (1,588 people), in addition to high levels of missing information from the SRM (103 people). The WTSRM4 weight variable is applicable only to persons who, either through proxy or self-response, completed the SRM questionnaire. Table 3.2 lists the SRM variables.

#### 3.1.2. FIU-Level Analyses

In addition to the individual, the FIU can also be the unit of analysis because the Household Survey collects information on the FIU and about multiple people in the FIU. On the data file, information that pertains to the family as a whole (for example, family income) is assigned to the records of each member of the family. (Chapter 5 explains how to prepare an FIU-level data file from the person-level Restricted Use File.) WTFAM4 is the family-level weight for making national estimates with round five data.

<sup>&</sup>lt;sup>9</sup> For more details on the definitions and construction of the Household Survey weight variables, refer to the Health Tracking Household Survey Methodology Report, 2007. The report is available as HSC Technical Publication #72 (www.hschange.org).

TABLE 3.1 2007 HOUSEHOLD SURVEY WEIGHTS

LEVEL OF ANALYSIS	NATIONAL ESTIMATE
PERSON	WTPER4
SELF RESPONSE MODULE	WTSRM4
FIU	WTFAM4

## TABLE 3.2

## SELF RESPONSE VARIABLES

Variable name	Description
Section B: Health In	
MCHOICE	Willingness to accept limited choice to save money
	Use During the Last 12 Months
UNMET	Did not get needed medical care
PUTOFF	Delayed getting needed services
PUTOFR0-	, , ,
PUTOF21	Reasons for delaying or not getting needed services
UMETMDC	Can't afford needed prescription medicines
Section E: Satisfacti	on, Health Status, and Perceptions of Health Care Quality
DRCHOCX	Satisfaction with choice of primary care doctors
SPNEED	Needed a specialist
SPSEEN	Saw a specialist in last 12 months
SPCHOCX	Satisfaction with choice of specialists
UDRINFO	Usual doctor up-to-date on care from specialist
UDRFOLW	Usual doctor ask about your specialist visit
MAKEAPP	Make doctor appointment in last 12 months
WTAPPX	Appointment lag time, category
WTAPXX	Appointment lag time, category
DIFFLNG	Different language than health care practitioner
HAVBABY	Had a baby in last two years
UTRNBLD	Saw doctor for abnormal uterine bleeding
DIABET	Diabetes
DIABETX	Saw doctor for diabetes
ARTHRS	Arthritis
ARTHRSX	Saw doctor for arthritis
ASTHMA	Asthma
ASTHMAX	Saw doctor for asthma
COPD	Chronic obstructive pulmonary disease
COPDX	Saw doctor for chronic obstructive pulmonary disease
HYPTENY	Hypertension
HYPTENX	Saw doctor for hypertension
HRTDIS HRTDISX	Coronary heart disease Saw doctor for coronary heart disease
SKNCAN	Skin cancer
SKNCANX	Saw doctor for skin cancer
PRSBGN	Benign prostate disease
PRSBGNX	Saw doctor for benign prostate disease
CANCER	Cancer other than skin cancer
CANCERX	Saw doctor for cancer other than skin cancer
DPRESN	Depression
DPRESNX	Saw doctor for depression
MEDPROB	Any doctor visit for serious medical problem
TAKRISK	Risk-taker
SMKEVR	Smoked 100 or more cigarettes in lifetime
SMKNOW	Current level of smoking

	T
Variable name	Description
BMIX	Body mass index, continuous, ages 18 and older
BMICAT	Body mass index, categories, ages 21 and older
CQEXPLN	Health provider, explain things well
CQTIME	Health provider, spend enough time
CQRSPCT	Health provider, treat you with respect
CQDIET	Health provider, set goals to improve diet
CQEXRCS	Health provider, set goals for exercise
CQMNTOR	Health provider, teach how to monitor condition
CQFOLW	Health provider, call you in last 6 months
CQSIDE	Read side effects for new prescriptions
Section E: Consun	ner engagement - For chronic condition sample
CCEACTV	Chronic, active role in own health care
CCERESP	Chronic, responsible for managing health condition
CCEKWRX	Chronic, know prescription doses
CCEFOLW	Chronic, do followup treatments at home
CCEPRDR	Chronic, tell concerns to health provider
CCETDIF	Chronic, tell when need to get health care
CCEACTN	Chronic, can act to prevent symptoms
CCEKNOW	Chronic, understand cause of health condition
CCEOPTN	Chronic, know different treatment options
CCEPRNT	Chronic, know different treatment options  Chronic, know how to prevent further problems
CCESTYL	
	Chronic, maintain lifestyle changes
CCEPRBM	Chronic, find solution for new problems
CCESTRS	Chronic, maintain lifestyle changes under stress
	ner engagement - For non-chronic condition sample
NCERESP	Nonchronic, responsible for managing health condition
NCEACTV	Nonchronic, active role in own health care
NCEACTN	Nonchronic, can act to prevent symptoms
NCEKWRX	Nonchronic, know prescription doses
A CEEE TE	
NCETDIF	Nonchronic, tell when need to get health care
NCEPRDR	Nonchronic, tell concerns to health provider
NCEPRDR NCEFOLW	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home
NCEPRDR NCEFOLW NCEKNOW	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition
NCEPRDR NCEFOLW NCEKNOW NCEOPTN	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options
NCEPRDR NCEFOLW NCEKNOW	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes
NCEPRDR NCEFOLW NCEKNOW NCEOPTN	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consum	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consum	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from friends  Own health info, from TV or radio
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from TV or radio  Own health info, from TV or radio  Own health info, from books or magazines
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK CINWSP	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  mer information seeking  Own health info, internet  Own health info, from friends  Own health info, from TV or radio  Own health info, from books or magazines  Own health info, from newspaper
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK CINWSP CIOTHR	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from friends  Own health info, from TV or radio  Own health info, from books or magazines  Own health info, other than doctor
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK CINWSP CIOTHR CIALT	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from friends  Own health info, from TV or radio  Own health info, from books or magazines  Own health info, other than doctor  Own health info, from alternative sources
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK CINWSP CIOTHR CIALT CITALK	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from TV or radio  Own health info, from books or magazines  Own health info, other than doctor  Own health info, from alternative sources  Own health info, discuss findings with doctor
NCEPRDR NCEFOLW NCEKNOW NCEOPTN NCESTYL NCEPRNT NCEPRBM NCESTRS Section E: Consun CIWEB CIFRND CITV CIBOOK CINWSP CIOTHR CIALT	Nonchronic, tell concerns to health provider  Nonchronic, do followup treatments at home  Nonchronic, understand cause of health condition  Nonchronic, know different treatment options  Nonchronic, maintain lifestyle changes  Nonchronic, know how to prevent health problems  Nonchronic, find solution for new problems  Nonchronic, maintain lifestyle changes under stress  ner information seeking  Own health info, internet  Own health info, from friends  Own health info, from TV or radio  Own health info, from books or magazines  Own health info, other than doctor  Own health info, from alternative sources

Variable name	Description
	Description Other health info interest
ACIWEB	Other health info, internet
ACIFRND	Other health info, from friends
ACITV	Other health info, from TV or radio
ACIBOOK	Other health info, from books or magazines
ACINWSP	Other health info, from newspaper
ACIOTHR	Other health info, other than doctor
ACIALT	Other health info, from alternative sources
Section E: Inform	
ITWEB	Ever use the internet
ITOFTN	Internet, how often go online
ITCNTCT	Internet, contact doctor by email or web site
ITRX	Internet, renew prescription
ITAPPN	Internet, schedule appointment
ITDISC	Internet, discuss health problem with provider
ITSEE	Internet, see diagnostic test results
ITRMNDR	Internet, get appointment reminder
ITOTHER	Internet, other
ITALLOW	Internet, doctor allow contact by email or web site
Section E: Consu	mer shopping
CSDLOOK	Look for new personal doctor
CSDFIND	Find a new personal doctor
CSDREFR	Seek doctor, recommendation
CSDINS	Seek doctor, health insurance plan information
CSDBOOK	Seek doctor, books or newspaper
CSDFRND	Seek doctor, friend or relative
CSDTV	Seek doctor, TV or radio
CSDWEB	Seek doctor, the Internet
CSDSOTH	Seek doctor, other
CSDCMPQ	Seek doctor, source give quality comparison
CSDQUSE	Seek doctor, use quality comparison to choose
CSDCOST	Choose doctor, cost of care
CSDRCMN	Choose doctor, recommendation
CSDREPU	Choose doctor, reputation
CSDWAIT	Choose doctor, wait time for appointments
CSDLOC	Choose doctor, location of practice
CSDNETW	Choose doctor, in health plan network
CSDFOTH	Choose doctor, other
CSSNUM	Specialist, see one or more in last 12 months
CSSWHEN	Specialist, first see more/less than 12 months ago
CSSFIND	Specialist, own doctor refer or find another way
CSSCHOI	Specialist, referred to one or given choice
CSSOSRC	Specialist, use sources besides referral
CSSREFR	Seek specialist, other doctor recommend
CSSINS	Seek specialist, bealth insurance plan information
CSSBOOK	Seek specialist, headth insurance plan information  Seek specialist, books or newspaper
CSSFRND	Seek specialist, friend or relative
CSSTV	Seek specialist, TV or radio
CSSWEB	Seek specialist, 1 v of radio
CSSSOTH	Seek specialist, the internet  Seek specialist, other
COSSOIL	Seek specialist, other

Variable name	Description
CSSCMPQ	Seek specialist, source give quality comparison
CSSQUSE	Seek specialist, use quality comparison to choose
CSSCOST	Choose specialist, cost of care
CSSRCMN	Choose specialist, own doctor recommend
CSSREPU	Choose specialist, reputation
CSSWAIT	Choose specialist, wait time for appointments
CSSLOC	Choose specialist, location of practice
CSSNETW	Choose specialist, in health plan network
CSSFOTH	Choose specialist, other
ANYPROC	Procedure, had any in past 12 months
CSPRLOC	Procedure, at hospital, clinic or office
CSPWHEN	Procedure place, first time more/less than 12 months ago
CSPFIND	Procedure place, doctor refer or find another way
CSPCHOI	Procedure place, referred to one or given choice
CSPOSRC	Procedure place, use sources besides referral
CSPREFR	Seek procedure place, other doctor recommend
CSPINS	Seek procedure place, health insurance plan information
CSPBOOK	Seek procedure place, books or newspaper
CSPFRND	Seek procedure place, friend or relative
CSPTV	Seek procedure place, TV or radio
CSPWEB	Seek procedure place, the Internet
CSPSOTH	Seek procedure place, other
CSPCMPQ	Seek procedure place, source give quality comparison
CSPQUSE	Seek procedure place, use quality comparison to choose
CSPCOST	Choose procedure place, cost of care
CSPREPU	Choose procedure place, reputation
CSPRCMN	Choose procedure place, own doctor recommend
CSPWAIT	Choose procedure place, wait time for appointments
CSPLOC	Choose procedure place, location
CSPNETW	Choose procedure place, in health plan network
CSPFOTH	Choose procedure place, other

#### 3.2 Estimating Changes

Round 5 data can be treated as an independent sample when estimating changes in an attribute between any two rounds of the Household Survey. The user can use point and variance estimates from round 5 and any other round and compare as independent estimates. It is not necessary to combine the data, though that may be the easiest approach.

# **3.2.1.** Samples, Weights, and Variance Estimation When Combining Multiple Years of Data

National estimates based on the 2007 Household Survey require the person-level weight WTPER4, WTSRM4 for SRM analysis, or WTFAM4 for family-level analysis. In addition, there are certain sample design variables that should be used for correct variance estimation, as indicated in Chapter 4. If you are calculating national estimates by combining the 2007 data with other years, you should run all your regression models in the same way that you would for

2007, i.e., using the same weight for making national estimates and sample design variables for all years. The relevant weight and sample design variables for national estimates, from the combined 60 site and supplemental sample, were given identical variable names for rounds one, two, and three. Only the 1996-1997 Household Survey contained a Self Response Module with the corresponding person-level weight, WTSRM4, for making national estimates.

Calculation of national estimates by combining the 2007 data with the 2003 Household Survey data require the weight WTPER6 for person-level analysis or WTFAM6 for family-level analysis from the 2003 data. This is a result of the change in the sample design for 2003. These weight variables will have to be renamed to WTPER4 and WTFAM4, respectively, in your combined data set. There is no need to rename the sample design variables when combining 2007 data with data from previous years.

#### CHAPTER 4

#### **DERIVING APPROPRIATE VARIANCE ESTIMATES**

Some element of uncertainty is always associated with sample-based estimates of population characteristics because the estimate is not based on the full population. This sampling error is generally measured in terms of the standard error of the estimate, or its sampling variance. Estimates of the standard errors are necessary to construct confidence intervals around estimates and to conduct hypothesis tests.

Like many other large national surveys, the Household Survey sample design employs stratification, clustering, and oversampling to provide the basis for making national estimates. <sup>11</sup> These data therefore require specialized techniques for estimating sampling variances. This chapter discusses the use of specialized statistical software to estimate standard errors that account for the sample design.

#### 4.1. THE LIMITATION OF STANDARD STATISTICAL SOFTWARE

The Household Survey has a national-sample design and design-based sampling variance, meaning the sampling variance estimate is a function of the sampling design and the population parameter being estimated. The round five Household Survey was designed to produce only national estimates.

Departures from a simple random sample design result in a "design effect," which is defined as the ratio of the sampling variance (*Var*) given the actual survey design to the sampling variance of a hypothetical simple random sample (*SRS*) with the same number of observations. Thus:

 $Deff = \underbrace{Var(actual\ design\ with\ n\ cases)}_{Var(SRS\ with\ n\ cases)}$ 

A design effect equal to 1.0 means that the design did not increase or decrease the sampling variance relative to a simple random sample. A design effect of greater than 1.0 means that the design increased the sampling variance; that is, it caused the estimate to be less precise. The standard error of an estimate can be expressed as the standard error from a simple random sample with the same number of observations, multiplied by the square root of the design effect.

<sup>&</sup>lt;sup>10</sup> The sampling variance, which is the square of the standard error, is a measure of the variation of an estimator attributable to having sampled a portion of the full population of interest using a specific probability-based sampling design. The classic population variance is a measure of the variation among the population, whereas a sampling variance is a measure of the variation of the *estimate* of a population parameter (for example, a population mean or proportion) over repeated samples. While the population variance is a constant, independent of any sampling issues, the sampling variance becomes smaller as the sample size increases. The sampling variance is zero when the full population is observed, as in a census.

<sup>&</sup>lt;sup>11</sup> We do not recommend that Household Survey data be used to produce national estimates of age, sex, race, Hispanic ethnicity, or educational level, as these were the variables used in the poststratification adjustments of the weights; therefore, they represent population counts from external sources (the Bureau of the Census) and not the survey itself.

#### 4.2. SPECIFYING THE SAMPLE DESIGN FOR SUDAAN

The Household Survey data file contains a set of fully adjusted sampling weights and information on analysis parameters (that is, stratification and analysis clusters) necessary for estimating the sampling variance for a statistic. When you run one of the specialized software programs, you should specify the appropriate analysis weight (see Chapter 3) as well as the stratification and clustering variables. Table 4.1 provides guidelines for the design variables to specify in SUDAAN statements for different types of estimates. Sample SUDAAN code is included in Appendix C. The design variables to specify in Stata and SAS survey procedures are discussed in Section 4.3.

The following paragraphs explain what is contained in each of the design variables.

The DESIGN statement, found in the first row of Table 4.1, tells the program the nature of the sampling strategy; that is, whether the sample was selected with replacement (where units can be selected more than once) or without replacement; and whether the selection probabilities were equal across all sampling units. Specifying a with-replacement design (DESIGN=WR) implies that with-replacement sampling can be assumed at the first stage of selection. This is used when analyzing round five data alone. Specifying a without-replacement design and unequal probabilities of selection (DESIGN=UNEQWOR) assumes that the first stage units were selected without replacement and with unequal probabilities. The UNEQWOR specification also assumes equal probabilities of selection at subsequent stages in the sampling process. This is used when analyzing combined rounds of data.

The NEST statement, found in the second row of Table 4.1, tells the program which variables contain the sampling structure; that is, the stratification and clustering variables. For national estimates using round five data, the first stage sampling stratum variable (PSTRATA) has been set to a constant value. For national estimates, it is also necessary to specify a second-stage sampling stratum variable, SECSTRA, which has 5 values for the four census regions and the nonmetropolitan area.

As stated above, you must also specify the clustering variable(s) in the NEST statement. For national estimates, the first stage PSU variable (PPSU) is specified between the first- and second-stage stratification variables. PPSU is set to a value of 1. For national estimates, it is also necessary to specify in the NEST statement a second-stage clustering variable (NFSUX) after the second-stage stratification variable.

In order for the program to account for without-replacement design in its variance estimates, two more statements must be specified: the TOTCNT statement and the JOINTPROB statement. Because the national estimates for round five only assume with-replacement sampling, the TOTCNT and JOINTPROB statements are not specified when making those estimates. For the national estimates using combined years of data, the TOTCNT statement is specified as: PSTRTOT3 \_ZERO \_ \_MINUS1 \_ \_ZERO\_. These last three terms are reserved SUDAAN keywords. The keyword \_ZERO \_ means either that the corresponding NEST variable (in this case SECSTRA) is a stratification variable or that it is a final level of sampling and therefore has no variance contribution. The keyword \_MINUS1\_ means that the corresponding NEST variable (in this case NFSUX) should be treated as with-replacement sampling. For national estimates, PSTRTOT3 specifies the variable containing population counts (in this case the number of regions in the sampling stratum) at the first stage of selection.

For the national estimates, the JOINTPROB statement is specified as the variables: P1X P2X P3X P4X P5X P6X P7X, which together represent the matrix containing single and joint inclusion probabilities as described above.

In SUDAAN, the default denominator degrees of freedom can be overridden using the DDF option. We recommend that you use this option (setting DDF to 6500) when running significance tests on national estimates. In SUDAAN, the default denominator degrees of freedom is the difference between the number of PSUs and the number of first stage strata, which is appropriate for most surveys.

TABLE 4.1

GUIDELINES FOR SPECIFICATION
OF DESIGN VARIABLES IN SUDAAN
FOR THE 2007 HOUSEHOLD SURVEY

SUDAAN Statements	National Estimates Round 5 only	National Estimates Combined rounds
DESIGN=	WR	UNEQWOR
NEST	STRATUM NFSUX	PSTRATA PPSU SECSTRA NFSUX
TOTCNT	Not Applicable	PSTRTOT3 _ZEROMINUS1ZERO_
JOINTPROB	Not Applicable	P1X P2X P3X P4X P5X P6X P7X
WEIGHT	WTPER4 WTFAM4 WTSRM4	WTPER4 WTFAM4 WTSRM4
DDF=	Not Applicable	6500

#### 4.3. USE OF OTHER STATISTICAL SOFTWARE BESIDES SUDAAN

SUDAAN is currently the commonly used statistical software package that can produce variance estimates correctly for national estimates in the 2007 Household Survey. Nevertheless, there still may be situations where researchers would like to use other software packages besides SUDAAN. For example, some people might not have access to SUDAAN or might be interested in statistical procedures that are not available in SUDAAN.

Beginning with version 10 of Stata, additional survey design options have become available. This includes two stage and without replacement design, which will more closely approximate the design of national estimates for rounds 1 through 4. However, the implementation of the first stage without replacement design is different from the implementation in SUDAAN. SUDAAN uses the Yates-Grundy-Sen formula that requires selection probabilities for all PSUs within each stratum, called the joint probabilities. Stata uses a single finite population correction factor for each PSU. Consequently, while it is possible to at least come close to matching the variance estimates from SUDAAN, the exact details have not been explored and are left to the user to determine.

In general, the first (primary) stage strata are PSTRATA and the sampling units are PPSU. Second stage strata are SECSTRA and the sampling units are NFSUX. The finite population correction factor for the first stage units is PSTRTOT3. The second stage should be treated as with replacement.

Stata version 10 also has additional options for handling certainty strata, that is strata with a single PSU. See the options for *singleunit* for the available options. Several strata have a single PSU in round 1 through 4. This is by design, as certain cities are the only one in their stratum. The certainty option is the most anti-conservative, as these will not contribute to the variance.

The round 5 data can be fully estimated using any version of Stata that has survey design capabilities. Furthermore, round 5 data does not have overlap with data from any previous rounds and can be treated as an independent sample when doing change estimates.

#### 4.3.1. Obtaining and Using Sampling Parameters for Other Software Packages

Sampling parameters for use with Stata and SAS are provided on the Household Survey public use and restricted use data files for 2007. Table 4.3 shows which parameters should be used for which types of estimates, and Appendix D provides specific examples of how those parameters are used in Stata and SAS. These sampling parameters were constructed directly from the SUDAAN parameters that are described in Section 4.2.

TABLE 4.2

SUMMARY OF SOFTWARE VARIANCE ESTIMATION CAPABILITIES FOR THE 2007 HOUSEHOLD SURVEY

	Optimal sampling assumption	Analysis population	Ability to produce correct variance estimates for the Household Survey		
Estimates with 2007 Household Survey			SUDAAN	STATA version 10	SAS special procedures for the analysis of complex survey data
National estimates Round 5 only	WR	Full population	yes	yes	yes
National estimates Combined rounds	WOR	Full population	yes	yes <sup>b</sup> (with caution)	no, but acceptable <sup>c</sup> (with caution)

WR = with replacement WOR = without replacement

<sup>&</sup>lt;sup>a</sup> This column also applies to other statistical software packages that use Taylor series linearization procedures for variance estimation and can accommodate WR sample selection but have no or limited ability to accommodate WOR sample selection.

<sup>&</sup>lt;sup>b</sup>Stata uses a single finite population correction factor for each PSU. The exact details have not been explored and are left to the user to determine.

<sup>&</sup>lt;sup>c</sup> Previous research has determined that the variance estimates from Stata (version 8) and SAS are "conservative" in that they decrease the likelihood of finding a result to be statistically significant. The report, Schaefer et al. (2003), is available from the HSC web site (<a href="www.hschange.org">www.hschange.org</a>). Researchers should note that whether a particular estimate is being overstated or understated by Stata and SAS (relative to SUDAAN) cannot be known with certainty without specifically calculating that estimate under the two sampling assumptions (WR and WOR).

## TABLE 4.3

### GUIDELINES FOR SPECIFICATION OF DESIGN VARIABLES IN STATA AND SAS FOR THE 2007 HOUSEHOLD SURVEY

Stata Statements	SAS Statements	National Estimates
strata	stratum	STRATAWR
psu	cluster	PSUWRX
pweight	weight	WTPER4 WTFAM4 WTSRM4

#### **CHAPTER 5**

#### VARIABLE CONSTRUCTION AND EDITING

The HTHS Restricted Use File contains three types of variables: unedited variables, edited variables, and constructed variables created from edited or unedited variables. <sup>12</sup> This chapter provides a general description of the types of constructed and edited variables in the file as well as additional details on selected variables. The chapter also explains how to manipulate the person-level file to construct analytical variables at other levels, such as the family level.

The information in this chapter supplements the information provided in the "Description" and "Universe" fields of the file's codebook. Users are encouraged to review this information along with the information provided in Appendix A of this manual for a better understanding of the questionnaire structure, skip patterns, and other characteristics of the variables reported on the file.

#### **5.1. EDITED VARIABLES**

The Household Survey data were collected via computer-assisted telephone interviewing (CATI). The CATI editing functions included consistency checks and editing of some skip patterns and outlier values. This section describes the editing that followed the Household Survey CATI data collection, which included logical editing, imputation of missing values, and editing for confidentiality. Verbatim text responses were also reviewed and edited.

#### 5.1.1. Logical Editing

Logical editing was performed to resolve inconsistencies among related variables and skip patterns. For example, question c221(ERUSENX), pertaining to number of emergency room visits without hospital admission, was not asked if a person had not gone to a hospital emergency room. If the survey respondent had not gone to a hospital emergency room, the value for ERUSENX was changed from missing to "0" to indicate that the respondent did not have any emergency room visits. In another example, employment-related questions like f101(HAVEBUS, did the respondent have a business) and f111(WRKPAY, did the respondent work for pay), should have been asked only of respondents age 18 or over. If this information was included for individuals under 18, the responses were changed to "logical skip." Logical editing also included review and resolution of outlier values by recoding either to an appropriate valid value or to a value of "-9 Not Ascertained."

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<sup>&</sup>lt;sup>12</sup>In general, unedited variables are those which contain the original response to a single questionnaire item.

### **5.1.2. Imputation of Missing Values**

Missing values for selected variables were imputed using unweighted and weighted sequential hot-deck imputation. <sup>13</sup> In addition, some variables, such as race and ethnicity, had at least some missing responses filled in by using the race and ethnicity of other family or household members. Variables were selected for imputation according to their level of missing data and analytic importance. Table 5.1 lists the variables selected for imputation.

An imputation flag is included for most variables with imputed values. A value of "1 Yes" for the imputation flag indicates that the value of the corresponding variable was imputed. The imputation flags for the following variables have not been provided on the file for confidentiality reasons:

- Total number of hospital stays (HSPSTYN)
- Total number of hospital stays admitted through the emergency room (HSPERX)
- Total number of nights in the hospital (HSPNITX)
- Total number of visits to doctor (DRVISNX) and to other medical providers (MPVISNX)
- Income (FAMINCX)
- Race and ethnicity (HISPAN, RACNEWX, and RACETHX)
- U.S. citizenship (CITIZEN)
- Hispanic origin or descent (ORIGMEX, ORIGPR, ORIGCUB, ORIGDOM, ORIGSAL, ORIGOCA, ORIGOSA, and ORIGOTH)

Between 0.01 percent and 3.8 percent of the values for these variables were imputed, except for FAMINCX, for which 23.6 percent of the values were imputed, and CITIZEN, for which 17.0 percent of the values were imputed.

<sup>&</sup>lt;sup>13</sup>In sequential hot-deck imputation, persons with missing values, or "recipients," are linked to persons with available values, or "donors," to fill in the missing data. The donors and recipients are first grouped into strata and then sorted within each stratum using classification/sort variables such as age, gender, and education. The number of strata is limited by a minimum donor to recipient ratio that must be satisfied within each stratum. Donors are then sequentially linked to recipients based on their proximity within the stratum as determined by the sort variables. In weighted hot-decking, donor and recipient weights are used to help determine the assignment of donors to recipients so that means and proportions calculated using the imputed data will equal means and proportions obtained using only donor data.

### VARIABLES SELECTED FOR IMPUTATION

Description	Variable Name
Section A:	
Education	HIGRADX
Section B:	
Characteristics of private health insurance plans (imputation performed at the plan level)	PRVHMO1, PRVHMO2, PRVHMO3
Medicaid and state insurance plans (imputation performed at the plan level)	MCDHMO, STHMO
Section C:	
Hospital use	HSPSTYN, HSPERX, HSPNITX
Emergency room visits	ERUSENX
Doctor and other medical practitioner visits	DRVISNX, MPVISNX
Section E:	
General health condition	GENHLH
Section F:	
Hours worked	HRSWKX
Type of employer	EMPTYPX
Firm size	FIRMSZX
Hourly wage	WAGEHRX
Whether employer offers insurance, whether person is eligible, and whether more than one plan is offered	EMPOFER, ELIGIB, EMPMULT, OFFERED, OFRMULT
Section G:	
Family income	FAMINCX
Race and ethnicity	HISPAN, RACNEWX, RACETHX
Origin or descent	ORIGMEX, ORIGPR, ORIGCUB, ORIGDOM, ORIGSAL, ORIGOCA, ORIGOSA, ORIGOTH
U.S. citizenship	CITIZEN

### **5.1.3.** Editing for Confidentiality

Data in the Restricted Use File have been manipulated or edited to ensure the confidentiality of survey respondents while maximizing the scope of data released to the user. This type of editing consisted of such steps as excluding variables and constructing new variables based on the original ones. All cases of editing for confidentiality are described in the file's codebook either in the "Format" field (which indicates the top- and/or bottom code values) or the "Description" field. Variables subjected to confidentiality editing have been assigned names ending with "X."

### 5.1.3.1. Variable Exclusion

In constructing this data set, we were careful to remove the obvious direct identifiers such as names and addresses.

### 5.1.3.2. Masking of Minimum and Maximum Values

Extreme and relatively rare cases that fell at the top or bottom of a distribution were recoded to a lower/higher value, referred to as "top-" or "bottom-coding." For example, the variable corresponding to question grd1 (HIGRADX, highest grade completed) reflects the use of both top- and bottom-coding. Reported values greater than 18 have been combined into a single category, "19: (top code)." Values less than 7 have been combined into another category, "6: (bottom code)."

### **5.1.3.3.** Constructing New Variables for Confidentiality

When survey questions identified relatively rare populations, a new variable was constructed, combining the separate small groups into a smaller number of larger groups. For example, the variables FOTHPUB and OTHPUBX, which indicate coverage by either a state insurance plan or the Indian Health Service, were constructed by combining the responses to two questions, b1g (Indian Health Service) and b1h (state insurance). Similarly, the variable UNINPLX, which corresponds to a single question, b81, was constructed by combining the categories of Medicaid, state, and military coverage into a single category (2 Medicaid/state/military).

### **5.1.4. Editing Verbatim Responses**

For several questionnaire items, interviewers and/or respondents were allowed to provide "other" verbatim responses when none of the existing response categories seemed to apply. These verbatim responses are excluded from the Restricted Use File. They were reviewed and coded into an appropriate existing or new categorical value. For example, for question b84 (reason uninsured), additional categories were created to describe some of the verbatim responses to that question. For insurance plan information, multiple variables may have been recoded on the basis of verbatim response information. For example, if the name of a private insurance plan was reported as "Virginia Medicaid," then the corresponding private insurance variables were set to "-1 Inapplicable," and the corresponding Medicaid variables were coded appropriately.

### 5.2. CONSTRUCTED VARIABLES

In addition to variables that were constructed for confidentiality reasons (see Section 5.1), constructed variables include the following:

- Household Survey administration variables, such as identifiers, counters, and family/household composition variables
- Weights and other sampling variables
- Other variables constructed for analytical value. These range from relatively straightforward variables that combine one or more original question items for the convenience of analysts (for example, the lag time associated with making a doctor appointment, which were converted from various time units to days) to more complex variables such as hierarchical ones describing current and previous insurance coverage.

Constructed variables are indicated in the file's codebook by a value of "N/A" in the "Question" field. Information on how they were constructed appears in the "Description" field.

### 5.3. IDENTIFICATION, COUNTER, AND SITE VARIABLES

Not all variables on the Restricted Use File were obtained directly from survey respondents via the Household Survey CATI questions. Additional variables include identifiers (person, family, household, and other identifiers), household composition variables, geographic indicators, and other survey administration variables.

#### **5.3.1.** Identification Variables

The identifier and related flag variables are described in Table 5.2. Table 5.3 shows persons in a hypothetical household to illustrate the relationship between the identifier and flag variables on the Restricted Use File. In this example, the head of household's spouse is the family informant for the first FIU, the head of household's father is the family informant for the second FIU, and the unrelated boarder is the informant for the third FIU, of which he/she is the only member.

### **5.3.2.** Counter Variables

Counter variables are included in the file to make it easier to understand the file structure and sample population. The variable NSFAM indicates the total number of eligible responding FIUs in the household – in other words, the number of unique values of CSIDX that share the record's HHIDX. NSPER indicates the total number of eligible/selected responding persons in the record's FIU (unique values of PERSIDX on the file for the CSIDX identified on that record). Likewise, the variables NADULT and NAGE65 indicate, respectively, the total number of eligible responding adults and the total number of eligible responding persons age 65 or over in the family.

Additional counter variables provide information on all persons, including non-respondents and ineligibles, in responding households. These variables – NFAM, NPERX and NKID – indicate the total number of families within the household, persons within the family, and children within the family, respectively, for responding households. The difference between NSPER and NPERX, for example, is that the latter includes nonrespondents, nonselected children (including children with no parent or guardian in the household), and full-time military personnel, who are not included on the file and therefore not reflected in the value for NSPER.

### 5.3.3. County and Census Region Variables

The 2007 Household Survey Restricted Use File contains a variable for county. The variable FIPSCODE is the FIPS state code combined with the 3-digit FIPS county code. The Restricted Use File also contains the variable REGION for identifying the U.S. Census Bureau region.

TABLE 5.2 ADDITIONAL INFORMATION ON IDENTIFICATION VARIABLES

Variable	Additional Information
HHIDX	HHIDX is the 7-digit identifier for the household. There are 8,228 unique values of HHIDX on the file. Values for HHIDX are randomly assigned.
CSIDX	CSIDX is the 8-digit identifier for the family insurance unit, or FIU. The first 7 digits of CSIDX are equal to HHIDX. There are 9,407 unique values of CSIDX on the file.
PID	PID is the 1-digit number assigned to each person within the household. Its values range from 1 to 8.
PERSIDX	PERSIDX is the unique 9-digit identifier assigned to each person. There are 17,797 unique values of PERSIDX, which identify the 17,797 records on the file. PERSIDX was constructed by concatenating the variables CSIDX and PID.
KIDID KIDFLAG	KIDID is the 1-digit person number (PID) of the randomly selected child in each FIU. The variable KIDID is equal to the variable PID on the record corresponding to the randomly selected child. The flag variable KIDFLAG, which indicates the randomly selected child, has a value of 1 on the record of the randomly selected child and a value of 0 for all other persons in the FIU. A person could have been chosen as the randomly selected child if he/she was under age 18 and not married or the head of the household, defined as the person who owns or rents the home.
RESPID RSPFLAG	RESPID is the 1-digit person number (PID) of the informant for each FIU. The variable RESPID is equal to the variable PID on the record corresponding to the family informant. The flag variable RSPFLAG, which indicates the family informant, has a value of 1 on the record of the family informant and a value of 0 for all other persons in the FIU.
CENSID	CENSID is the 1-digit number assigned to each "census-defined" family within a household. The variable was constructed on the basis of the commonly used U.S. Census Bureau definition of a family, which is generally a broader definition than that used to define the CTS FIU. Specifically, a census family includes all people in the household related by blood or marriage. A unique census family on the file is defined by the combination of the variables HHIDX + CENSID. There are 8,414 unique census families (i.e., unique values of HHIDX + CENSID) on the file. Unless otherwise indicated, the term "family" used in this document or in the file's codebook refers to the FIU rather than the census-defined family.

TABLE 5.3

PERSONS IN A HYPOTHETICAL HOUSEHOLD WITH IDENTIFIER AND FLAG VARIABLES

#### Value of Identifier/Flag Variable Record Corresponding to Person HHIDX **CSIDX** PID **CENSID RESPID RSPFLAG KIDID KIDFLAG** FIU # 1 Head of Household 1000001 10000010 0 2 3 0 1 1 Head of Household's 1000001 10000010 Spouse 2 2 3 0 1 Head of Household's Daughter: Randomly Selected Child 10000010 1000001 3 1 2 0 3 1 Head of Household's Son: Not Included in Survey FIU # 2 Head of Household's Father 1000001 10000011 1 0 5 5 -1 Head of Household's 1000001 10000011 0 Mother 6 1 5 -1 0 **FIU #3**

2

7

0

-1

Unrelated Boarder

1000001

10000012

7

#### 5.4. FAMILY AS THE UNIT OF ANALYSIS

Survey questions solicited information at the person-, family-, and household-level. Rather than providing a hierarchical file, we have chosen to provide the survey data as a simple, rectangular file with person-level data only. We anticipate little interest in household-level analysis and so do not include household-level weights with the Restricted Use File. However, because some researchers want to conduct analyses at the FIU level, the following section explains how a family-level file can be easily extracted from the person-level file.

### 5.4.1. Preparing a Family-Level Data File

The variable CSIDX is the eight-digit identifier for the FIU. The first seven digits are equal to the household id (HHIDX), while the last digit is a unique number assigned to each family within the household. There are a total of 9,407 family insurance units on the Restricted Use File.

Table 5.4 displays two hypothetical family insurance units. The first, CSIDX 10000010, contains three persons, a father, a mother, and a randomly selected 14-year-old daughter. The second, CSIDX 10000020, consists of a married couple. Family-level variables in the example include the family identifier (CSIDX), a counter for the number of persons in the family (NPERX), and total family income (FAMINCX). Person-level variables include the person identifier (PID), age (AGEX), general health status (GENHLH), gender (SEX), relationship to the head of household (RELATEX), and an FIU flag variable (FIUFLAG). Note that there are a total of five persons in the first family (NPERX=5), two of which were nonselected children excluded from the Restricted Use File.

TABLE 5.4
TWO HYPOTHETICAL FAMILY INSURANCE UNITS

FIU Member	CSIDX	PID	NPERX	AGEX	GENHLH	FAMINCX	SEX	RELATEX	FIUFLAG
Family Informant	10000010	1	5	43	1	64885	1	0	1
Spouse	10000010	2	5	41	4	64885	2	2	0
Daughter	10000010	3	5	14	5	64885	2	3	0
Family Informant	10000020	1	2	57	2	46500	2	0	1
Spouse	10000020	2	2	56	3	46500	1	1	0

### 5.4.1.1. Example 1: Creating a Family-Level File

To analyze a family-level characteristic such as total family income (FAMINCX), you would need to select one record from each family or, one unique value of CSIDX. As with all family-level variables, all members of the family are assigned the same value. Thus, the first, the last, or any record of a single family member is suitable to create a subset of records to represent families. The variable FIUFLAG was constructed specifically for this purpose. Selecting records with FIUFLAG=1 will produce a family-level file consisting of the family informants' records.

### 5.4.1.2. Example 2: Summarizing Person-Level Responses to the Family-Level

An alternate method of producing a family-level file is to summarize person-level responses and produce a single family record. In this example, a variable is produced that counts the number of persons in the family in fair or poor health (FAIRPOOR) by using the general health status variable, GENHLH, which has the following values: 1=Excellent, 2=Very Good, 3=Good, 4=Fair, and 5=Poor. The variable is constructed by 1) reading the person-level Restricted Use File, 2) testing each family member's response to the general health status indicator GENHLH, and 3) keeping one record for the family after processing the last person's record. The family-level file and the FAIRPOOR variable produced from the person records of the two hypothetical families are displayed in Table 5.5.

TABLE 5.5
FAMILY-LEVEL FILE

CSIDX	NPERX	FAMINCX	FIUFLAG	FAIRPOOR
10000010	5	64885	1	2
10000020	2	46500	1	0

### 5.5. ADDITIONAL DETAILS ON SELECTED SURVEY VARIABLES

Table 5.6, organized by survey and questionnaire section, provides "helpful hints" about variables (singly or in sets), discusses a variable's relationship with other variables, and suggests when to use a specific variable. This information supplements the variable-specific details contained in the file's codebook.

### ADDITIONAL INFORMATION ON VARIABLES

Variable	Additional Information		
Survey Administration and Section A Variables: Demographic Characteristics and Household Composition			
RELATEX	The variable RELATEX indicates the relationship of the person on this record to the head of the household, for whom RELATEX has a value of 0. The head of the household is defined as the person who owns or rents the home.		
	Section B Variables: Health Insurance Coverage		
INSTYPE	The variable INSTYPE is a constructed variable that summarizes the person's insurance coverage status as of the interview date. This variable was constructed hierarchically by assigning a person to the first applicable category in the following sequence:  1		

Variable	Additional Information
[All variables for private plans]	Each family could report up to three private insurance plans. All verbatim responses for insurance plan names were reviewed, and all related insurance variables were then recoded if necessary. For example, review of some of the verbatim information on the name of the private plan indicated that the plan was actually a public plan (e.g., Medicaid, CHAMPUS, etc.). For these cases, the corresponding public plan variables were recoded as appropriate, and the private plan variables were recoded to "-1 Inapplicable." The private plans were not renumbered, so some persons may have values of "-1" for the private plan 1 variables but nonmissing values for the private plan 2 variables.
PRVHLD1 – 3	Question b231 is used to identify the policy-holders for the private insurance plans. In the 2007 and 2003 surveys, the policy-holder can be anyone in the household who is age 18 or older. In previous rounds of the survey, only people who were privately insured and/or age 65 or older could be policy-holders for private insurance plans.
ESICST1 ESICST2 ESICST3 ESPRM1X ESPRM2X ESPRM3X PVPRM1X PVPRM1X PVPRM2X PVPRM3X	These variables provide information on health insurance premium costs for the private insurance plans. Strouse, Touzani, and Hall (2004) examine the accuracy of the survey responses and conclude that the information on premium payments for non-group plans (PVPRM1X, PVPRM2X, PVPRM3X) is reliable enough for use in analyses but that the information on premium contributions for employer-sponsored plans should be used with caution. Specifically, the contributions for employer-sponsored plans "should not be used for point estimates," but "with the appropriate statistical adjustments, the data may be very useful for analytic model estimation." Data users are encouraged to read the full report for more details on the accuracy of the survey responses.
STHMO STHMOP STIN1Y ST12M STPRMF	Questions b71 – b78prem3 are asked only for families in which someone is not covered by private insurance but is covered by a state plan (question b1h) or other health insurance plan (question b1i1). If anyone has a state plan (b1h), then questions b71 – b78prem3 refer to that plan. Otherwise, questions b71 – b78prem3 refer to the other health insurance plans (b1i1).
PRVHMO1-3 MCDHMO STHMO	A number of variables identify aspects of the respondents' insurance plans as to whether the person must sign up with a primary care doctor. These variables were imputed at the plan level.

Variable	Additional Information
UNINR12- UNINR14	The variables UNINR12-UNINR14 were constructed after reviewing the verbatim responses to question b84, for which respondents could specify other reasons why health insurance stopped.
PREINS	The variable PREINS was constructed only for currently insured persons whose coverage began within the past 12 months. It indicates the person's coverage just prior to the current coverage. Category 2 includes persons with Medicaid, military and any other public insurance coverage, including state or I.H.S. plans.
PRECOV	The variable PRECOV was constructed for all persons and indicates the person's coverage just prior to the current coverage (or the most recent coverage if the person is currently uninsured). Persons were assigned hierarchically to PRECOV categories. Category 1 includes persons with Medicaid, military and any other public insurance coverage, including state or I.H.S. plans. The category N/A consists of most of the persons in the following two groups: newborns and persons with health insurance from a foreign source.
CHGINS6 CHGINS7	The variables CHGINS6 and CHGINS7 were constructed after reviewing verbatim responses to question b881, in which other reasons for changing insurance plan were reported. Persons answered question b881 only if they responded that they had enrolled in their health plan within the past 12 months. Persons with CHGINS7=1 said they stayed with the same plan but are required to re-enroll annually. For analytic purposes, these persons should not be considered to have undergone an actual change in insurance coverage.
MCHOICE	Question b951 (MCHOICE) asks whether the person would be willing to accept a limited choice of physicians/hospitals in order to save out-of-pocket costs. This question was answered by the family informant and other adult family members who completed the SRM. It was not asked of the randomly selected child.

Variable	Additional Information			
	Section C Variables: Health Care Resource Use and Unmet Need			
Many of the questions on use of health care resources are reported as continuous variables. In order to protect confidentiality of respondents, all of these continuous variables (except HSPSTYN) were top-coded, collapsing the highest values into a single value. The file's codebook indicates the level at which each variable was top-coded. As described in Section 5.1, many of the imputation flags for the variables on health care resource use have not been provided for confidentiality reasons.				
UNMET PUTOFF PUFOFR1- PUTOF21	Questions c811-c831, describing unmet medical need and reasons (UNMET, PUTOFF, PUFOFR1-PUTOF21), were answered by the family informant and other adults who completed the SRM. For the randomly selected child, these questions were answered by the family informant.			
PUTOFR8 – 9 PUTOF10 – 13 PUTOF15 – 19 PUTOF21	The variables PUTOFR8 - PUTOF21 (except PUTOF14 and PUTOF20) were constructed after reviewing the verbatim responses to question c831, for which respondents could specify other reasons for postponing or not receiving medical care.			
MEDCSTA, MEDCSTB, BPOWNA, BPOWNB	The variables MEDCSTA and MEDCSTB (questions c92 and c93) indicate the total out-of-pocket medical costs for the family. The variables BPOWNA and BPOWNB (questions c101_2 and c101a) indicate the total amount currently owed in medical bills for the family.			
Section D Variables: Usual Source of Care and Patient Trust in Physician				
AFFTRAV AFFSEEN	Questions sn4, sn4per, and sn5 are asked for families in which anyone is uninsured and either of the following is true: any uninsured family member is paying less than full price at his/her usual source of care (question sn1) or there is a local place offering affordable medical care for the uninsured (question sn2). If the former is true, then questions sn4 – sn5 refer to that usual source of care. If the latter is true, then questions sn4 – sn5 refer to the local place offering affordable medical care.			

Variable	Additional Information			
	Section E Variables: Health Care Satisfaction and Health Status			
CRSAFX	The variable CRSAFX was constructed from questions e101 and e111 and describes satisfaction with health care received during the past 12 months. These two family-level questions were only asked of the family informant and were not included in the SRM.			
DRCHOCX SPNEED SPCHOCX	Questions e12-E15_1, describing satisfaction with the choice of primary care doctor and specialist (DRCHOCX, SPNEED and SPCHOCX), were asked of the family informant and other adults who completed the SRM. The family informant answered for the randomly selected child.			
GENHLH	The variable GENHLH indicates the person's general health status. Questions e40, e802 and SRM question e40_sr2 were asked for all adults. For the randomly selected child, the question k40 was answered by the adult family member who accompanied the child to the last physician visit or the family informant.			
TAKRISK SMKEVR SMKNOW	Questions e521, e601, and e611 (on risk-taking and smoking behavior) were asked only of the family informant and other adult family members who completed the SRM questions e52_sr2, e60_sr2, and e61_sr2. They were not asked for the randomly selected child.			
BMIX BMICAT	Each adult responded for him/herself about weight (in pounds) and height (in feet and inches) when asked questions BRFSS10 and BRFSS11 or SRM questions BRFSS10_sr2 and BRFSS11_sr2. For the randomly selected child, the questions BRFSS10K and BRFSS11K were answered by the adult family member who accompanied the child to the last physician visit or the family informant. Weight and height information were used to calculate BMI (body mass index) according to the formula:  BMI = { (weight in lbs.) / [ (height in inches)² ] } * 703  The variable BMIX contains the BMI values, top-coded at 40.0 and bottom-coded at 18.0.  The variable BMICAT simply indicates the BMI categories for individuals age 21 and over. It does not provide any additional information beyond that provided by the variable BMIX.  Underweight if BMI < 18.5  Normal if BMI is 18.5 – 24.9  Overweight if BMI is 25.0 – 29.9  Obese if BMI is 30.0 or above			

Variable	Additional Information		
Section F Variables: Employment			
Questions in this se	ection were asked of all persons in the household who were 18 years of age or older.		
WAGEHRX	The variable WAGEHRX was constructed using the responses to questions f131, f301, f321, f331. These questions were only minimally edited. A sizable number of cases had either extremely large or small values. Users should be cautious in using this variable and may want to reconstruct WAGEHRX as a categorical range variable rather than as a continuous variable. WAGEHRX only has a positive value for adults who responded yes to question f111, which asks if the person did any work last week for pay (or profit); for all other cases, it has a value of "-1 Inapplicable."		
EMPOFER- EMPMULT	Questions f501-f541 (EMPOFER-EMPMULT), on insurance offered by employers, were asked only of persons who were employed (excluding self-employed), who were not policyholders of employer/union-based plans, and who were less than 65, even if they did not use the health insurance benefits offered by their employer. All other persons were assigned a value of "-1 Inapplicable."		
ELUNINS4	For the variable ELUNINS4, categories 4-6 were constructed after reviewing the verbatim response to question f521, for which respondents could specify other reasons for not participating in the employer's health insurance plan.  The universe for f521 in the 2007 and 2003 surveys: Work for government or private employer (f201), not policy holder for employer/union based plan (b231, b251), less than 65 years old, employer or union offers health insurance plan (f501), eligible to participate in own employer's health insurance plan (f511), and <i>not covered by a plan from any other employer</i> (b1a, b1c).  In previous rounds of the survey, this variable is named ELUNINS and the universe for f521is: Work for government or private employer (f201), not policy holder for employer/union based plan (b231, b251), less than 65 years old, employer or union offers health insurance plan (f501), eligible to participate in own employer's health insurance plan (f511), and <i>uninsured</i> .		
INELIGR	For the variable INELIGR, categories 11-13 were constructed after reviewing the verbatim response to question f531, for which respondents could specify other reasons why they were ineligible for employer's health insurance plan.		
OFFERED, OFRMULT	The constructed variables OFFERED and OFRMULT can be used for analyses of employment related insurance for the entire employed population. The variables were constructed using variables from Sections B and F for all persons age 18 and over, including self-employed persons and the working elderly.		

Variable	Additional Information			
Section G Variables: Family Income and Race				
FAMINCX CENSINX	There are two income variables on the Restricted Use File. The first, FAMINCX, represents the total income reported for the FIU, which is the entity identified by the variable CSIDX. The second income variable, CENSINX, represents the total income reported for the census family, which is the entity identified by the variables HHIDX + CENSID. For confidentiality reasons, cases with CENSINX values greater than \$150,000 were masked by top-coding to a value of \$150,000. Because values of FAMINCX for these FIUs could be combined to obtain a value of more than \$150,000 and thus violate the confidentiality masking, FAMINCX for these FIUs was assigned a value of "-5." Both of these income variables may reflect income for person(s) in the FIU who are not represented on the data file.			
POVLEV	The variable POVLEV is a constructed variable that indicates the U.S. Census Bureau 2006 family income poverty threshold for the size of the census family on this record (identified by HHIDX + CENSID). A poverty index variable can be constructed as the ratio of the census family income, CENSINX, to the census poverty threshold, POVLEV.			
RACNEWX RACETHX	The variable RACNEWX was constructed from the responses to question g22n1. For example, a respondent is coded as "White only" in RACNEWX only if s/he chose the race category "White" and no other race categories for question g22n1. The specific responses within the category "All other" (1,410 people) cannot be provided because of concern for the confidentiality of the survey respondents.  The variable RACETHX was constructed from the variables HISPAN (question g201) and RACNEWX. A response of Hispanic ethnicity was coded as RACETHX = 4 Hispanic, i.e., categories 1-3 are all non-Hispanic. For example, a respondent is coded as "White only, nonHispanic" in RACNEWX only if s/he was not Hispanic (according to HISPAN) and chose the race category "White" and no other race categories for question g22n1. The specific responses within the category "All other nonHispanic" (970 people) cannot be provided because of concern for the confidentiality of the survey respondents.			
Section H Variables: Interview Closing				
telephone availabil Question h30 was i	ection reflect information from the interview closing questions, including the household's ity and service history. Responses to these questions were used to construct the survey weights. modified in the 2003 and 2007 survey to explicitly exclude cell phones; this change is reflected the variable PHNOTHX to PHNOTH4X.			
	Weights and Sampling Variables			
Weights and sampl	ling variables are described in Chapters 2, 3, and 4.			

#### **CHAPTER 6**

#### FILE DETAILS

This chapter provides an overview of the file content and technical specifications for programmers. It also describes the variable naming and coding conventions that were used on the file and that appear in the file's codebook.

### 6.1. FILE CONTENT AND TECHNICAL SPECIFICATIONS

The 2007 Health Tracking Household Survey Restricted Use File contains 17,797 person records. The unique record identifier and sort key is the variable PERSIDX. Variables are positioned on the file in the following order:

- Survey administration variables: this group includes identifiers, geographic indicators, and other variables associated with conducting the Household Survey
- Variables from Sections A-H of the Household Survey questionnaire: Variables are ordered within each section by related questionnaire item number
- Weights and sampling variables

The Restricted Use File is provided as an ASCII-formatted file with the following technical specifications:

Data set name: CTSR5HR1.TXT

Number of observations: 17,797 Number of variables: 546 Logical record length: 1265

The file contains a two-byte carriage return/line feed at the end of each record. When you are converting to a PC-SAS file, use the LRECL option to specify the record length to avoid the default PC-SAS record length. If the RECFM=V option is used, the LRECL option must be specified as the logical record length (1265). If RECFM=F is used, the LRECL value must be specified as the logical record length plus two (1267). Note that if the RECFM option is omitted, then the default option of RECFM=V will be used, and LRECL must be specified as the logical record length (1265).

The record layout for this file is provided in the file's codebook.

#### 6.2. VARIABLE NAMING CONVENTIONS

In general, a variable name reflects the content of the variable. For the following groups of variables, a naming convention was used to provide additional information on variable content:

- *Imputation Flags*. These flags indicate whether a record has an imputed value for the corresponding variable. The flag variable has the same name as the variable it describes, and includes the prefix "\_." For example, \_HIGRADX is the imputation flag corresponding to the variable HIGRADX. Refer to Chapter 5 for more information on imputation and other types of editing procedures used on the file.
- *Private Insurance Plan Variables*. Each family could report up to three private insurance plans, which are described by a series of variables, PRVHLDi through NHSPQUi, which correspond to questions b231-CDHPNG5. The same questions were asked for each of the plans, so there is one set of these variables for each plan, and the variable name suffix "i" has a value of 1-3 indicating the plan number. (See Chapter 5 for information on coding of these variables when fewer than three plans were reported.)
- *Medicare and Medicaid Coverage Variables*. These variables, MCRTYPE-MCDPRMF, correspond to questions b54-b69. All include the string "MCR" and "MCD," respectively, in the name.
- *State Insurance Coverage Variables*. The variables that correspond to questions b75-b78 (STHMO-STPRMF) all have the variable name prefix "ST" (preceded by "\_" on imputation flag variables).
- *Uninsured Variables*. The variables that correspond to questions b80-b84 (UNINCOV-UNINR14) all have the prefix "UN" in the name.
- Reasons for Not Getting or Postponing Medical Care. Variables for question c821 and c831 (PUTOFF, PUTOFR0-PUTOF21), which describe the reason(s) for not getting or for postponing medical care, all have the variable name prefix "PUTOF."
- Weights. The prefix "WT" is present for all weight variables.
- *Masked Variables*. All variables that were masked for confidentiality reasons end with the value "X." (However, not all variables that end in "X" were masked.) The variable descriptions contained in the file's codebook indicate whether the variable was masked and provide brief details as to the type of masking performed.

### 6.3. VARIABLE CODING CONVENTIONS

The following coding conventions are used on the file:

-1 Inapplicable: Question was not asked due to skip pattern.

-5 Suppressed for

Confidentiality: Value suppressed to preserve confidentiality.

-7 Refused: Question was asked and respondent refused to

answer

-8 Don't Know: Question was asked and respondent did not

know the answer.

-9 Not Ascertained: Value was not assigned for any other reason.

### Appendix A

The Health Tracking Household Survey Instrument

## COMMUNITY TRAKING STUDY ROUND 5 HOUSEHOLD SURVEY

"For ease of documentation, we have added a suffix of '1' to question numbers asked about the FIU informant, and a suffix of '2' to question numbers asked about additional adults in the FIU (self response module). In the actual CATI program, the question numbers for the FIU informant have no suffix, and the question numbers for the self response module have a suffix equal to the person number of the respondent."

#### INTRODUCTIONS

## FOR THOSE SENT LETTER: REVISED TO REFLECT CHANGE IN FOCUS AND TO INCLUDE ADDITIONAL INFORMATION ON ONE SCREEN.

>paa3<

Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. We recently sent your household a letter describing the study. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

YES1 [got	to]
NO0 [ <mark>got</mark>	

- CONTENT: The interview includes questions about your and your family's health and your views about the quality and cost of health care.
- SPONSOR: The study is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company. The RWJF website is www.rwjf.org.
- LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.
- CONTACT: If you would like to find out more about the study or the foundation, you can call [Leonie Infantry] at [1-877-843-7953].
- CONFIDENITALTY: The survey is confidential and you don't have to answer any questions you don't want to.
- SELECTION: Your telephone number was scientifically selected by a computer to represent many others in your community.

TYPE <g> TO CONTINUE ===> [goto]

## FOR SAMPLE NO LETTER: REVISED TO REFLECT CHANGE IN FOCUS AND TO INCLUDE ADDITIONAL INFORMATION ON ONE SCREEN.

>s2< Hello, this is NAME, with the Community Tracking Study, a nationwide study to understand how changes in health care are affecting people. As a token of appreciation, we'll send you and each adult in your family who participates in the interview \$20. I need to speak with an adult in the household who is familiar with the health care of family members. Would that be you?

YES1	goto
NO0	[goto

- CONTENT: The interview includes questions about your and your family's health and your views about the quality and cost of health care.
- SPONSOR: The study is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company. The RWJF website is www.rwjf.org.
- LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.
- CONTACT: If you would like to find out more about the study or the foundation, you can call [Leonie Infantry] at [1-877-843-7953], ext 6040.
- CONFIDENITALTY: The survey is confidential and you don't have to answer any questions you don't want to.
- SELECTION: Your telephone number was scientifically selected by a computer to represent many others in your community.

TYPE <q> TO CONTINUE ===> [qoto]

### **FOR REFUSAL PREPAYS**

>pap1<	Hello, my name is, calling from Mathematica. Last week, we sent a letter to your household about a study to understand how changes in health care are affecting people. As a token of our commitment, we enclosed \$5.
	Got check, continue
>pap2<	I hope the letter answered your questions about our research study.
	PAUSE, AND ANSWER ANY QUESTIONS. IF NO QUESTIONS, CONTINUE
	I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.
	TYPE <g> TO CONTINUE</g>
	CALL BACK

>pap3< I'm calling to ask you to take part in a major health care study, and I'd like to resend you \$5 for helping us with the survey. By sharing your concerns and opinions about health care, you will help answer important questions about how changes in health care are affecting the well being of adults and children in your community.

IF NECESSARY ADD: The interview will only take 30 to 40 minutes.

I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.

TYPE <g> TO CONTINUE [goto code\_s1]

===>

### >code\_s1<

C	ONTINUE WITH INTERVIEW		
	SPEAKER IS 18 OR OLDER		[goto phone ck]
	WILL CALL SOMEONE 18 OR OLDER		10 1 – 1
	TO THE PHONE	2	
	NO PERSON 18 OR OLDER HOME NOW		
	CALLBACK		
	CALLDACK	10	
_	DOD! EM		
P	ROBLEM	_	
	PROBABLE MENTAL IMPAIRMENT		
	LANGUAGE BARRIER		[goto lang]
	SUPERVISOR REVIEW	11	
R	EFUSAL		
	HOUSEHOLD REFUSAL	7	
	HUNG UP DURING INTRODUCTION	12	
II	NELIGIBLE		
	NO PERSON 18 OR OLDER		
	LIVES IN THE HOUSEHOLD	1	
	NOT A RESIDENCE (BUSINESS/		
	NON-RESIDENCE/GROUP QUARTERS/	_	
	INSTITUTION/VACATION HOME)	8	
	===>		

# INSERTED IN EACH INTRO SCREEN TO FACILITATE ACCESS FOR INTERVIEWERS SINCE THEY OFTEN STUMBLE DURING INTROS.

>lang<	<1> SPANISH
J	ASIAN
	<2> CHINESE
	<3> JAPANESE
	<4> KOREAN
	<5> UNKNOWN ASIAN
	<6> OTHER ASIAN SPECIFY
	EUROEPAN/SLAVIC
	<7> FRENCH
	<8> GERMAN
	<9> ITALIAN
	<10> POLISH
	<11> PORTUGESE
	<12> RUSSIAN
	<13> UNKNOWN EUROPEAN/SLAVIC OTHER
	<14> OTHER LANGUAGE SPECIFY
>phone_ck<	Before we start this interview, is [phone number] used for
	Home use

#### **DEMOGRAPHICS AND SCREENING** a.

>hhld<

What are the first names of the people who live here. Begin with one of the people who owns or pays most of the rent for this home, and then other people in the household. Be sure to include yourself and any students away at college.

- INTERVIEWER: 1) IF R. IS RELUCTANT TO GIVE FIRST NAMES: We are asking for first names because the survey includes questions about the health care of family members. The only reason we need first names is so we'll have some way to tell family members apart. If you'd rather not give names, we can take relationships or some other way to tell family members apart.
  - 2) Persons who reside at a vacation residence, in institutions, or in other group quarters (10 or more unrelated persons living together) are not eligible.

[fill NAME] [HOUSEHOLDER GOES HERE]	1
[fill NAME]	2
[fill NAME]	3
[fill NAME]	4
[fill NAME]	5
[fill NAME]	
[fill NAME]	7
[fill NAME]	
VACATION HOME, INSTITUTION,	
GROUP QUART [Ineligible]	V
NO OTHER HOUSEHOLD MEMBERS	n
DELETE A HOUSEHOLD MEMBER	X
UNDELETE A HOUSEHOLD MEMBER	u
MORE THAN 8 HOUSEHOLD MEMBERS	e
	[goto emo1]
===> [goto more]	-

- m	$\sim$	rn.	
211	เด	155	

Have I missed any babies or small children, anyone who usually lives here but is away at present traveling, in school, or in a hospital, or any foster children, lodgers, boarders, and roommates?

IF YES: What are their first names?

IF NO: CODE "n"

ENTER TEXT FOR ADDITIONAL PERSONS, WITH A MAXIMUM OF 8 PER HOUSEHOLD

PROBE IF R. ASKS ABOUT STUDENTS: Include household members less than 23 years old who are away at school or college, regardless of whether they are living in a dorm or off-campus apartment.

[fill NAME]	1
[fill NAME]	2
[fill NAME]	3
[fill NAME]	
•	
VACATION HOME, INSTITUTION,	
GROUP QUART [Ineligible]	V
NO OTHER HOUSEHOLD MEMBERS	
DELETE A HOUSEHOLD MEMBER	x
UNDELETE A HOUSEHOLD MEMBER	u
MORE THAN 8 HOUSEHOLD MEMBERS	e
	[goto emo1]
===> [goto bmo1]	

#### FOR ALL SAMPLE:

>emo1< You've told me about eight people that live in this household. Do any other people live in this household?

YES	
NO OTHER PEOPLE IN HOUSEHOLD	
	n
[goto bmo1]	

>emo2< How many of those additional people are 18 years old or older?

```
|__|_
(0-99)
===>
```

>em3<	How many of those additional people are under 18?
	 (0-99) ===>
>head<	Who owns or pays most of the rent on this house? (READ LIST IF NECESSARY; ENTER CODE FOR PERSON MENTIONED FIRST).
	HEAD? NAME RELATIONSHIP SEX AGE [fill NAME]
>bmo1<	In what month and year was [fill HOUSEHOLDER] born?
INTERVIEWE	(2) R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE. (3) IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.  JAN
	MAY
>byr1<	[no erase]      MONTH (112)       YEAR (1880-1984) ===> [goto SEX1]

### >age1< What is (his/her/your) age? INTERVIEWER: (1) REMEMBER THAT THIS IS THE HOUSEHOLDER. (2) R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE. (3) IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups. (4) If R. STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR **UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS** AND CHILDREN. \_\_|\_\_| YEARS OLD (16-120)18 OR OLDER......a LESS THAN 18......c ===> >SEX1< ... and is [fill HOUSEHOLDER] male or female? **INTERVIEWER:** CODE WITHOUT ASKING IF KNOWN MALE.....m FEMALE ......f IF age1 ge 16 AND age1 lt 23 goto col1; else goto grd1 test: [Is HOUSEHOLDER/are you] a full-time student? >col1< PROBE: The definition of a full-time student should be based on [fill NAME's] school. YES ......1

NO .......

DON'T KNOW ......d
REFUSED .....r

===>

>grd1< What is the highest grade or year of school [fill HOUSEHOLDER/you] completed?

PROBE FOR REFUSALS: I understand that these questions may be sensitive.

We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: CODE NUMBER OF YEARS OF SCHOOL. IF TECHNICAL SCHOOL OR SOME COLLEGE, REPEAT QUESTION AND ENTER WHAT RESPONDENT CONSIDERS HIGHEST GRADE OR YEAR OF SCHOOL. IF R. GIVES DEGREE, CODE AS FOLLOWS:

	12—HIGH SCHOOL OR GED 14—ASSOCIATES DEGREE OR JUNIOR COLLEGE 16—BA/BS 17—MA/MS 18—MBA/MPH/MPA 19—JD/LAW 20—MD/PHD
	GRADE COMPLETED (0-20)
	DON'T KNOWd  REFUSEDr ===>
>mil1<	[IF age ge 18 and It 65] [Is fill HOUSEHOLDER/Are you] on active duty in the military at this time?
	YES
	DON'T KNOWd  REFUSEDr

>bmo2< In what month and year was [SECOND PERSON'S NAME] born?

### IF R. IS UNCERTAIN PROBE FOR BEST ESTIMATE.

PROBE IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.

FEBMARCH	
OCT NOV DEC	9 10 11 12 d [goto age2]
no erase]	
MONTH	(1-12)
YEAR (1880-2002) 1	
DON'T KNOW	d [goto age2]

===> [goto SEX2]

>byr2<

>age2<	What is [SECOND PERSON'S NAME'S] age?
	INTERVIEWER: (1) CODE "0" IF LESS THAN SIX MONTHS.
	(2) CODE "1" IF LESS THAN ONE YEAR BUT MORE THAN SIX MONTHS
	(3) IF RESPONDENT IS UNCERTAIN, PROBE FOR BEST ESTIMATE
	(4) IF RESPONDENT IS RELUCTANT: This information is needed only understand differences in health care for people in different age groups.
	(5) IF R STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS AND CHILDREN.
	YEARS OLD (0-120)
	18 OR OLDERa LESS THAN 18c ===>
>SEX2<	and is [SECOND PERSON'S NAME] male or female?
	INTERVIEWER: CODE WITHOUT ASKING IF KNOWN
	MALEm FEMALEf ===>
test:	[if age2 ge 16 and It 23 goto col2; else goto test grd2]
>col2<	Is [fill NAME] a full-time student?
	<b>PROBE:</b> The definition of a full-time student should be based on [fill NAME's] school.
	YES
	DON'T KNOWd REFUSEDr
	===>

to

### >test grd2< [if age2 lt 18 goto rel2]

>grd2< What is the highest grade or year of school [fill NAME] completed?

**PROBE FOR REFUSALS:** I understand that these questions may be sensitive. We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: CODE NUMBER OF YEARS OF SCHOOL. IF TECHNICAL SCHOOL OR SOME COLLEGE, REPEAT QUESTION AND ENTER WHAT RESPONDENT CONSIDERS HIGHEST GRADE OR YEAR OF SCHOOL. IF R. GIVES DEGREE, CODE AS FOLLOWS:

	12—HIGH SCHOOL OR GED 14—ASSOCIATES DEGREE OR JUNIOR COLLEGE 16—BA/BS 17—MA/MS 18—MBA/MPH/MPA 19—JD/LAW 20—MD/PHD
	GRADE COMPLETED (0-20)
	DON'T KNOWd  REFUSEDr ===>
>mil2<	[IF age2 ge 18 and It 65] Is [fill NAME] on active duty in the military at this time?
	YES
	DON'T KNOW

	HUSBAND       1         WIFE       2         DOMESTIC PARTNER/SIGNIFICANT OTHER       14         OWN SON/DAUGHTER       3         ADOPTED SON/DAUGHTER       4         GRAND SON/DAUGHTER       5         PARENT       6         BROTHER/SISTER       7         SON/DAUGHTER-IN-LAW       8         MOTHER/FATHER-IN-LAW       9         OTHER RELATIVE       10         FOSTER CHILD       11         NON RELATIVE/UNMARRIED PARTNER       12	
Repeat bmo2-rel2 for each person.		
test:	[if any person is $\geq$ 18 and relationship to householder is <7> <8>, <9>, <10> or <12> and at least one person, other than householder or spouse, is $\geq$ 14 and different sex from (this/these) persons; goto mar2; else goto test after sps2.	
>mar2<	Is [fill NAME] married to anyone who currently lives here?	
	INTERVIEWER: CODE "NO" FOR COHABITEE	
	YES	
>sps2<	To whom is [fill NAME] married?	
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8         ===>	

How is [fill NAME] related to [fill HOUSEHOLDER]?

>rel2<

Adopted child is treated the same as child for all questions, except ethnicity (which is skipped for own child).

tests:	(1) Verify that spouses are at least 14 years of age (NOTE: rule was modified to reflect same sex partner relationship).
	(2) Repeat for each person ge 18 and relationship to householder is <7>, <8>, <9>, <10> or <12>.
	(3) If any person lt 18 and relationship to householder is not equal to <3>, <4>, <11>, or <13> then goto par2; else goto family formation.
>par2<	Is anyone who lives here the parent or guardian of [fill NAME]?
	YES
	===>
>who2<	Who is [fill NAME]'s parent or guardian?
	CODE ONLY ONE
	INTERVIEWER: IF CHILD HAS TWO PARENTS/GUARDIANS CODE MOTHER OR FEMALE GUARDIAN.
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8         ===>

Repeat for others meeting test before par2.

Form interviewing units using the following rules: 15

- (1) If no one other than householder or householder and spouse is 18 and older, then the household consists of one family.
- (2) Assign persons whose relationship to householder is parent, and any children linked to them, to a separate family.
- (3) Assign persons whose relationship to householder is mother/father-in-law, and any children linked to them, to a separate family.
- (4) Assign additional married persons, and any children linked to them, to a separate family.
- (5) If any remaining (unmarried) person's relationship to householder is child or step-child, he or she is 18 to 22, and a full time student, assign that person, and any children linked to that person, to householder's family.
- (6) Assign any remaining, unmarried persons 18 and older who are not full time students (and any children linked to them) to separate family units.
- (7) If householder or householder's spouse is under 18 and not a student, then he or she and his or her spouse and/or children are eligible. The householder and spouse (if under 18) should be treated as adult(s) during the interview.
- (8) Exclude a person as ineligible if:
  - (1) Person is unmarried full-time student, 16-22 years of age, and is not a child or ward of householder.
  - (2) Person is under 18, not a householder, relationship to householder is not equal to spouse or child, and no one in household is parent or guardian.
  - (3) Person is active military; however that person can act as survey informant for family interview, and his or her income should be included in income module.
- (9) Exclude interviewing unit as ineligible if all persons 18 and older assigned to the unit are active military.

Household Survey

<sup>&</sup>lt;sup>15</sup>The interviewing unit is defined to reflect an insurance unit, including the household head, spouse, and their dependent children up to but not including age 18, or up to but not including age 23 if they are in school. This definition represents conventional practice in the private insurance market and is similar to the filing unit used by Medicaid and state subsidized insurance programs. The census family (U.S. Bureau of the Census, 1992) sometimes comprises more people than the insurance family. Examples of people typically included in the same census unit, but in different insurance units, are adult children and their families living in the homes of their parents; adult siblings living together; and parents living in the home of their adult children. These persons will form separate interviewing units.

#### **Child Random Selection**

If the FIU includes no children <18, go to last\_ck; else, if the FIU has one child <18, select that child; else, if the FIU includes >1 child <18, select one child at random.

>last\_ck< Before we go any further, let's review the list I have of all of the household members.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HOUSEHOLD MEMBERS WITH RESPONDENT

THE HOUSEHOLD ROSTER CANNOT BE CHANGED AFTER THIS SCREEN

<n> OK AS IS
<c> CHANGE ROSTER

>resp< INTERVIEWER: ENTER THE [r]HIGHLIGHTED[n] NUMBER OF PERSON

WITH WHOM YOU'RE SPEAKING (I.E. "BEST

RESPONDENT").

R5: I would like to speak to the person most knowledgeable about your health insurance.

IF RESPONDENT NOT KNOWN ASK: With whom am I speaking?

A PERSON WITH AN \* IN FRONT OF THEIR NAME IS NOT ELIGIBLE.

IF YOU ARE TALKING TO A HOUSEHOLD MEMBER WHO IS NOT ELIGIBLE TO BE INTERVIEWED, ASK FOR AN ELIGIBLE HOUSEHOLD MEMBER.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HH MEMBERS WITH RESPONDENT

#	NAME	RELATION	SEX	AGE	FAM	STATUS
		[fill NAME][RELAT	ΓΙΟΝSHIP	] [Sex][A	GE]	1
		[fill NAME][RELAT	ΓΙΟΝSHIP	] [Sex][A	GE]	2
		[fill NAME][RELA]	ΓΙΟΝSΗΙΡ	] [Sex][A	GΕ]	3
		[fill NAME][RELA]	<b>FIONSHIP</b>	] [Sex][A	GΕ[	4
		[fill NAME][RELAT	<b>FIONSHIP</b>	] [Sex][A	GE]	5
		[fill NAME][RELAT	<b>FIONSHIP</b>	] [Sex][A	GE]	6
		[fill NAME][RELAT				
		[fill NAME][RELAT				
		===>			•	

#### b. HEALTH INSURANCE

>bbeg< We would like to conduct the rest of the interview with you. We will be sending you a check for \$20 for helping us with the survey.

INTERVIEWER: NOTE ONLY ONE CHILD IS SELECTED PER FAMILY

READ IF NECESSARY: My name is [INTERVIEWER NAME]. I am calling about the Community Tracking Study. The purpose of the Community Tracking Study is to see how changes in health care are affecting people.

TYPE <g> TO CONTINUE ===>

>b1< Next, I will list several types of health insurance or health coverage obtained through jobs, purchased directly, or from government programs. For each one, please tell me if (you/either of you/any of you) are currently covered by that type of plan.

>b1a< Are READ NAMES covered by a health insurance plan from any current or former employers or unions. [CPS]

IF YES: Who is covered?

**INTERVIEWER:** DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

#### PROBES:

- (1) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.
- (2) Include health insurance plans provided by colleges and universities to students.

[fill NAME]	1
[fill NAME]	
[fill NAME]	7
[fill NAME]	
NONE/NO ONE/NO OTHER RESPONSES	n
NEED TO DELETE A RESPONSE	x
DON'T KNOW	d
REFUSED	r

>b1b< Are READ NAMES covered by a health insurance plan bought on your or their own? [BRFQ]

IF YES: Who is covered?

**INTERVIEWER:** DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

#### **PROBES:**

- (1) Include insurance plans purchased through a professional association or trade groups.
- (2) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accident.

[fill NAME]	1
[fill NAME]	2
[fill NAME]	
[fill NAME]	
[fill NAME]	
[fill NAME]	6
[fill NAME]	7
[fill NAME]	
NONE/NO ONE/NO OTHER RESPONSES	n
NEED TO DELETE A RESPONSE	x
DON'T KNOW	d
REFUSED	r

>b1c< Are READ NAMES covered by a health insurance plan provided by someone who does not live in this household. [CPS]

IF YES: Who is covered?

**INTERVIEWER:** DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

**PROBE:** Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accidents.

[fill NAME]	1
[fill NAME]	
[fill NAME]	3
[fill NAME]	
[fill NAME]	
[fill NAME]	6
[fill NAME]	7
[fill NAME]	8
NONE/NO ONE/NO OTHER RESPONSES	
NEED TO DELETE A RESPONSE	X
DON'T KNOW	
REFUSED	r
>	

>b1d< Are READ NAMES covered by Medicare, the health insurance plan for people 65 years old and older or persons with certain disabilities. [CPS]

IF YES: Who is covered?

**PROBE:** Include HMO plans, Medicare Advantage plans, as well as the traditional Medicare plan.

**INTERVIEWER:** INCLUDE IF COVERED BY PART A OR PART B.

#### **CODE ALL THAT APPLY**

[fill NAME]	1
[fill NAME][fill NAME]	2
[fill NAME]	
[fill NAME]	4
[fill NAME]	
[fill NAME]	6
[fill NAME]	
[fill NAME]	8
NONE/NO ONE/NO OTHER RESPONSES	n
NEED TO DELETE A RESPONSE	X
DON'T KNOW	d
REFUSED	r
===>	

# >test bld< [IF PERSON IS GE 65 AND NOT COVERED BY MEDICARE goto b1d1; ELSE goto ble]

>b1d1< PERSON AGE 65 AND **NOT** COVERED BY MEDICARE ASK: I noted that [fill NAME] is [fill AGE], but is not covered by Medicare. Is that correct or did I make a mistake?

CORRECT	1
TO CORRECT MEDICARE	2 [:jb b1d]
TO CORRECT AGE	
	FIELD]]

===>

>b1ex<	IF STATE ONLY OFFERS MEDICAID: Are READ NAMES covered by Medicaid, the government assistance program that pays for health care?
	YES
	DON'T KNOWr REFUSEDr ===> [goto test b1f1]
>b1ey<	IF STATE OFFERS OTHER SUBSIDIZED PROGRAMS AS WELL AS MEDICAID: Are READ NAMES covered by any of the following government assistance programs that help pay for health care: [Medicaid/fill STATE NAME; fill STATE SPECIFIC PLANS, INCLUDING CHIP], IF YES; Which program is that?
	CODE ALL THAT APPLY
	Medicaid/fill STATE NAME1 [goto b1e] fill STATE SPECIFIC PLANS, INCLUDING CHIP [BLANK IF NO STATE PROGRAM]2 [goto b1h]
	NO ONE COVERED/NO MORE CODESn [goto test b1f1]
	SOMEONE COVERED, DON'T KNOW WHICH PLANd [goto b1e] FOLLOW MEDICAID ATTRIBUTE SEQUENCE IF CAN'T IDENTIFY PROGRAM NAME, fill Medicaid.
	REFUSEDr [goto test b1f1] DELETE A CODEx ===>

>b1e<	Are READ NAMES covered by [Medicaid/fill STATE NAME]?
	CODE ALL THAT APPLY
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8
	NONE/NO ONE/NO OTHER RESPONSESn NEED TO DELETE A RESPONSEx
	DON'T KNOWd  REFUSEDr ===> [goto b1f]
>b1h<	Are READ NAMES covered by fill STATE SPECIFIC PLANS, INCLUDING CHIP?
	CODE ALL THAT APPLY
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8
	NONE/NO ONE/NO OTHER RESPONSESn NEED TO DELETE A RESPONSEx
	DON'T KNOWd REFUSEDr ===>

>b1f<	Are READ NAMES covered by TRICARE, VA, CHAMP-VA, or some other military health care. [NHIS]
	IF YES: Who is covered?
	CODE ALL THAT APPLY
	[fill NAME]       1         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8         NONE/NO ONE/NO OTHER RESPONSES       n         NEED TO DELETE A RESPONSE       x         DON'T KNOW       d         REFUSED       r         ===>
>test b1f1<	[IF b1f = NO ONE, goto b1g; ELSE goto b1f1]
>b1f1<	Which plan is that TRICARE STANDARD, TRICARE PRIME, TRICARE EXTRA, Tricare for life, VA, CHAMP-VA, or some other military health plan?
	INTERVIEWER: CODE ALL THAT APPLY
	TRICARE STANDARD       1         TRICARE PRIME       2         TRICARE EXTRA       3         TRICARE FOR LIFE       4         VA       5         CHAMP-VA       6         OTHER [SPECIFY]       7         DON'T KNOW TYPE       d         REFUSED       r

## PERMITS IHS AND OTHER PLANS TO BE REPORTED.

>b1g< Are READ NAMES covered by the Indian Health Service. IF YES: Who is covered?

[fill NAME]	1
[fill NAME]	2
[fill NAME]	
NONE/NO ONE/NO OTHER RESPONSES	n
NEED TO DELETE A RESPONSE	x
DON'T KNOW	
REFUSED	r
>	

>test b1i1<	If all family members covered by some type of health insurance goto test b2, else goto b1i1.
>bli1<	Are READ NAMES covered by a health insurance plan that I have not mentioned. IF YES: What is the name of the plan?
	YES [SPECIFY]
	DON'T KNOWd REFUSEDr ===>
>bli2<	Who is covered by [fill NAME SPECIFIED]?
	CODE ALL THAT APPLY
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8
	NONE/NO ONE/NO OTHER RESPONSESn NEED TO DELETE A RESPONSEx
	DON'T KNOWr REFUSEDr

# >test b1j< [IF A FAMILY MEMBER WAS NOT COVERED UNDER SOME PLAN, goto bij; ELSE goto test b2]

>bij< INTERVIEWER: READ FOR FIRST PERSON ONLY (According to the

information we have, [fill NAME] does not have health care coverage of any kind). Does (he/she) have health insurance or

coverage through a plan I might have missed?

INTERVIEWER: REVIEW PLANS IF INFORMANT IS UNSURE.

NO/NOT COVERED BY ANY PLAN0
HEALTH INSURANCE PLAN FROM A
CURRENT OR PAST EMPLOYER/
UNION/SCHOOL1
A HEALTH INSURANCE PLAN BOUGHT ON
HIS/HER OWN/PROF. ASSN2
A PLAN BOUGHT BY SOMEONE WHO
DOES NOT LIVE IN THIS HOUSEHOLD3
MEDICARE4
MEDICAID/STATE NAME5
CHAMPUS/CHAMP-VA, TRICARE, VA,
OTHER MILITARY6
INDIAN HEALTH SERVICE7
[fill STATE PLAN]8
OTHER PLAN [SPECIFY]9
DON'T KNOWd
REFUSEDr
===> [goto NEXT UNINSURED PERSON OR goto test b2]

>test b2< IF AT LEAST ONE FAMILY MEMBER IS PRIVATELY INSURED (b1a, b1b, or b1c ge1) AND IS NOT COVERED BY MEDICARE (b1d) GO TO b2; ELSE, goto Test b401].

>b2< In how many different health plans (obtained through current or past employers) (is/are) [READ NAMES BELOW WITH \* IN FRONT] enrolled?

**PROBE:** Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.

**INTERVIEWER:** DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PLANS (1-3)	
0	0 [go back to b1 and correct]
DON'T KNOW REFUSED	

>b231< Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. [NHIS]

In whose name is this plan?<sup>16</sup>

INTERVIEWER: CODE NON-SPECIFIED POLICY HOLDER IN "OTHER."

fill NAME	
[fill NAME]	2
[fill NAME]	
OTHER [SPECIFY]	
DON'T KNOW	
REFUSED	r
===>	

<sup>&</sup>lt;sup>16</sup>The program lists and allows all persons in the household 18 and over, plus the householder and spouse regardless of age, to be named as policyholder.

- >test b24< [if b2 gt <1>, goto b241; else goto test b25]. It is unnecessary to ask b241 if the family has only one plan because coverage was obtained in b1a, b1b, or b1c.
- > b241 < Who is covered by POLICY HOLDER'S NAME plan? NOTE: SINCE WE ARE NOT GETTING PLAN NAMES, I DIFFERENTIATED PLANS BY POLICY HOLDER. THERE ARE ALMOST NO PERSONS WITH MULTIPLE PRIVATE POLICIES UNDER THE SAME POLICY HOLDER.

[READ ASTERISKED NAMES IF NECESSARY.]

[fill NAME]	1
[fill NAME]	2
[fill NAME]	3
[fill NAME]	
[fill NAME]	
[fill NAME]	
[fill NAME]	7
[fill NAME]	
NONE/NO ONE/NO OTHER RESPONSES	
NEED TO DELETE A RESPONSE	X
DON'T KNOW	
REFUSED	r
===>	

- >test b25< [if b1b ge <1> or b1c ge <1> goto b251; else store <1> in b251 and goto b291]. This question does not need to be asked if the only private plans are employer-based.
- >b251< Was this plan originally obtained through a current or past employer or union?

YES	1 [goto b291]
NO	0
DON'T KNOW	
DON'T KNOW	
REFUSED	r
===> [goto b271]	

b271<	Was this plan obtained through a state or federal government program that helps pay insurance coverage?
	YES
	DON'T KNOW
>b281<	Do you recall the name of the program?
PROI	<b>3E:</b> Some programs that help provide health insurance include [fill STATE PROGRAMS].
	[fill STATE PROGRAMS]1 OTHER [SPECIFY]9
	DON'T KNOW

>b291<
Did READ ASTERISKED NAMES enroll in this plan in the past 12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in this plan in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

IF RESPONDENT SAYS HE/SHE STAYED WITH THE SAME PLAN DURING OPEN ENROLLMENT, CODE NO.

CODE ALL THAT APPLY

[fill NAME]	1
[fill NAME]	
NO ONE	
NEED TO DELETE A RESPONSE	
DON'T KNOW	
REFUSED	1
===>	

>b291conf1< Just to confirm: you/[fill name] enrolled in this plan sometime in the past 12 months, and were **not** enrolled in this plan prior to that enrollment?

New enrollment in last 12 months	1			
Not new enrollment	2	[goto	b291]	l

>b3611< Is this plan an HMO, that is, a Health Maintenance Organization?

**PROBE:** With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES	 
NO	C
DON'T KNOW	C
REFUSED	 
===>	

>ngi1<	Does this health plan pay for at least some of the cost of prescription medicines prescribed by the doctor?
	YES
	DON'T KNOWd REFUSEDr ===>
>test b311<	[if b251 ne <1> goto b311; else, if b251 <eq> 1 and policy holder is listed in b231, go to b31111; else, go totestb40]</eq>
NOTE THAT	A POLICY HOLDER ONLY HAS TO BE LISTED IN B231; THE INFORMANT DOES NOT HAVE TO BE THE POLICY HOLDER.
NOTE: CONS	SOLIDATED ESI AND NON-GROUP QUESTIONS
>b3111<	<b>ESI PLANS:</b> For coverage through this plan, does anyone in the family pay all of the premium or cost, some of the premium or cost, or none of the premium of cost?
	PROBE: Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.
	YES, PAY ALL OF PREMIUM/COST
	DON'T KNOWd [goto CDHP1] REFUSEDr [goto CDHP1] ===>
	<: How much is (POLICYHOLDER's NAME) premium for health insurance through his/her) employer?
	PROBE: Your best estimate of the amount (POLICYHOLDER NAME) pays for coverage each pay period would be fine.
	NONE0
	\$    \$(10-9997)[goto b31121@p]
	DON'T KNOWd  REFUSEDr ===> [gotoCDHP1]

>b31121@p< INTERVIEWER: CODE TIME PERIOD.

WEEK	
EVERY OTHER WEEK	2
TWICE A MONTH	3
MONTH	4
QUARTER	5
SEMI-ANNUAL	6
ANNUAL	7

CDHP11. A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. Does this health plan have a deductible?

PROBE: IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY: A co-pay is payment for a doctor visit or other medical service and a deductible is the amount you pay before your insurance plan will start paying any part of your medical bills.

If the R asks whether in-network or out-of network, say in-network.

1
0 [goto CDHP31]
d [goto CDHP31]
r [goto CDHP31]

# CATI INSERT INDIVIDUAL IF ONE PERSON IS COVERED AND FAMILY IF MORE THAN ONE PERSON IS COVERED (INDIVIDUAL VERSUS FAMILY COVERAGE SHOULD BE BASED ON b241).

- CDHP21. Is the annual (individual/family) deductible less than (\$1,100/\$2,200) or more than (\$1,100/\$2,200)?
- PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

[TEST: IF CDHP21 IS MORE THAN (\$1,100/\$2,200) GO TO CDHP2aF1; ELSE GO TO CDHP31]

>CDHP2aF1< IF INDIVIDUAL: Is the annual deductible from \$1,100 to under \$2,000, from \$2000 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

IF FAMILY: Is the annual deductible from \$2,200 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

CDHP31	[ESI ONLY] Some employers offer flexible spending accounts that allow employees to set aside pre-tax dollars of their own money that can be used to reimburse them for health care expenses incurred during the year. A similar type of account is sometimes available for child care expenses, as well. (Do you/Does POLICY HOLDER) currently participate in a flexible spending account to obtain reimbursement for health expenses? (Commonwealth/EBRI modified)
	YES
	DON'T KNOWd REFUSEDr
CDHP4.	Some health plans offer a special type of savings account that can be used to pay for medical expenses. These plans are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts).
	Does health plan have a special account or fund you can use to pay for medical expenses?
	YES
	DON'T KNOWd REFUSEDr
CDHP5.	Now I'm going to read you a list of different types of information that some health plans provide to the people they insure. For each one, please tell me if your health plan provides this information or not.
	<ul> <li>a. Background information on doctors in the plan</li> <li>b. Information comparing what local doctors charge for the same service</li> <li>c. Information comparing what local hospitals charge for the same service</li> <li>d. Information comparing the quality and performance of local doctors</li> <li>e. Information comparing the quality and performance of local hospitals</li> </ul>
	YES
	DON'T KNOWd REFUSEDr

b381<	Does POLICY HOLDER'S employer offer more than one health insurance plan to its employees?
	YES
	DON'T KNOWd  REFUSEDr  ===> [goto test b40]
>b311<	NON-EMPLOYER AND NON-UNION PLANS:
	How much is the insurance premium for this policy?
	NONE0
	\$  <u> _ </u> \$(10-9997)[goto b321]
	DON'T KNOWd  REFUSEDr ===> [goto CDHPNG1]
>b321<	INTERVIEWER: CODE TIME PERIOD.
	WEEK       1         EVERY OTHER WEEK       2         TWICE A MONTH       3         MONTH       4         QUARTER       5         SEMI-ANNUAL       6         ANNUAL       7         ===>
CDHPNG1.	A deductible is the amount you have to pay before your insurance plan will start paying any part of your medical bills. Does this health plan have a deductible? If YES, ASK CDHPNG2; IF NO, DK, OR RF, GO TO CDHPNG4
	YES
	DON'T KNOW d [goto CDHPNG4] REFUSEDr [goto CDHPNG4] ===>

PROBE: IF RESPONDENT CONFUSES DEDUCTIBLE AND CO-PAY: A co-pay is payment for a doctor visit or other medical service and a deductible is the amount you pay before your insurance plan will start paying any part of your medical bills.

CATI INSERT INDIVIDUAL IF ONE PERSON IS COVERED AND FAMILY IF MORE THAN ONE PERSON IS COVERED (INDIVIUDAL VERSUS FAMILY COVERAGE SHOULD BE BASED ON b241).

CDHPNG2. Is the annual (individual/family) deductible less than (\$1,100/\$2,200) or more than (\$1,100/\$2,200)?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

[TEST [IF CDHPNG2 is more than (\$1,100/\$2,200) GO TO CDHPNG2A; ELSE GO TO CHDPNG4]

CDHPNG2A. IF INDIVIDUAL: Is the annual deductible from \$1,100 to under \$2,000, from \$2000 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network.

IF FAMILY: Is the annual deductible from \$2,200 to under \$3,000, from \$3,000 to under \$5,000, or \$5,000 or more?

PROBES: (1) Your best guess is fine. (2) If the R asks whether in-network or out-of network, say in-network

CDHPNG4

VEC

Some health plans offer a special type of savings account that can be used to pay for medical expenses. These plans are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal care accounts, Personal medical funds, or Choice funds.

Does this health plan have a special account or fund you can use to pay for medical expenses?

YES	I
NO	0
	-
DON'T KNOW	d
REFUSED	r

- CDHP5. Now I'm going to read you a list of different types of information that some health plans provide to the people they insure. For each one, please tell me if POLICY HOLDER'S health plan provides this information or not.
  - a. Background information on doctors in the plan
  - b. Information comparing what local doctors charge for the same service
  - c. Information comparing what local hospitals charge for the same service
  - d. Information comparing the quality and performance of local doctors
  - e. Information comparing the quality and performance of local hospitals

YES	
NO	
	-
DON'T KNOW	d
REFUSED	

>test b40< IF b2>1 (MORE THAN ONE PRIVATE PLAN), ASK b231-CDHP5 FOR SECOND PLAN; IF b2=3, ASK 231-CDHP5 FOR THIRDPLAN; ELSE IF ANY FAMILY MEMBER HAS MILITARY COVERAGE (b1f ge<1>) AND AT LEAST ONE PERSON WITH MILITARY COVERAGE IS NOT COVERED BY SOME OTHER HEALTH PLAN, goto b41; ELSE goto test b51]

>b41< Did [fill NAMES OF PERSONS COVERED (b1f1)] enroll in [NAME OF PLAN] in the past 12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [fill PLAN] after [fill DATE]?

**INTERVIEWER:** DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

IF RESPONDENT SAYS HE/SHE STAYED WITH THE SAME PLAN DURING OPEN ENROLLMENT, CODE NO.

[fill NAME]	
[fill NAME]	
NO ONE	
NEED TO DELETE A RESPONSE	
DON'T KNOW	d
REFUSED	r
===> [goto test b51]	

#### >test b51< Medicare [if b1d ge <1> goto b54R5; else goto test b61]

>B54R5< People who qualify for Medicare can obtain their medical coverage for things like doctor or hospital care in different ways. Which of the following describes (your/NAME's) Medicare coverage?

- 1 Regular Medicare
- 2 A Medicare HMO plan
- 3 Or another type of Medicare health plan
- 8 DK
- 9 RF

#### PROBES:

- 1) With a Medicare HMO plan, you must generally receive care from HMO doctors. Otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency
- (2) In addition to regular Medicare and Medicare HMOs, Medicare now offers other types of health plans that are not HMOs. These are sometimes referred to as Medicare Advantage plans.

INTERVIEWER INSTRUCTION: IF THE RESPONDENT FEELS THAT HIS OR HER
MEDICARE COVERAGE DOES NOT FIT INTO THESE
THREE CATEGORIES OR DOESN'T KNOW, CODE DK.

#### TEST: IF B54R5=2 OR 3, GO TO b54rx; else ask b54supp:

Medicare supplemental or Medigap policies are designed to cover the costs of
doctor visits or hospital care that are not covered by Medicare. (Are you/Is
NAME) covered by a supplemental Medigap policy (you/NAME) bought on
(your/his/her) own or through a previous or current employer?

YES	1
NO	
	-
DON'T KNOW	d
REFUSED	

TEST: IF PERSON HAS MEDICAID (b1ex <eq> 1), go to b57; ELSE ASK b54rx. Only Medicaid beneficiaries should be skipped over b54rx; persons who have state plans should be asked the question.

b54rx (Do you/Does NAME) have prescription drug coverage through Medicare Part D?

People get this type of coverage either through a Medicare health plan, such as a

Medicare HMO, that covers prescription drugs, or through a separate Medicare

prescription drug plan.

YES	1 [goto b57]
	0 [goto testb54mg]
	10 01
DON'T KNOW	d [goto testb54mg]
REFUSED	r [goto testb54mg]

>TEST 54mg	<if [person="" a="" and="" b1a="1" b1c="1" b54mg;="" b54rx="NO" b57<="" coverage="" dk,="" else="" go="" has="" or="" p="" plan]="" private="" rf="" through="" to=""></if>
b54mg	(Does your/Does NAME's) health plan from a current or former employer or union pay for at least some of the cost of prescription medicines?
	YES
	DON'T KNOWd REFUSEDr
>b57<	Did [fill NAMES OF MEDICARE ENROLLEES] enroll in [Medicare] in the past 12 months, that is, after [fill DATE]?
	IF MORE THAN ONE PERSON, ASK: Who enrolled in [Medicare] in the past 12 months?
	CODE ALL THAT APPLY
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8
	NONE/NO ONE/NO OTHER RESPONSESn NEED TO DELETE A RESPONSEx
	DON'T KNOWd REFUSEDr ===>

>test b61<	ALL MEDICAID RECIPIENTS goto b64 [If b1ex <eq> 1 or b1ey eq &lt;1&gt; or <d>) goto b64; else goto test b70.]</d></eq>
	NOTE: Deleted b61, b62 and b63.
>b64<	Under (Medicaid/STATE NAME) (are/is) [fill NAMES] signed up with an HMO, that is, a Health Maintenance Organization?
	<b>PROBE:</b> With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]
	YES
	DON'T KNOWd REFUSEDr ===>
	NOTE: Deleted b65a, b65b, and b66
>b67<	Did [fill NAMES OF MEDICAID BENEFICIARIES] enroll in [STATE NAME/Medicaid] in the past 12 months, that is, after [fill DATE]?
	IF MORE THAN ONE PERSON, ASK: Who enrolled in (STATE NAME/Medicaid) in the past 12 months?
	INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       4         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8
	NONE/NO ONE/NO OTHER RESPONSESn NEED TO DELETE A RESPONSEx
	DON'T KNOWd  REFUSEDr ===>
>b57c< [II	B57 ge<1>] Just to confirm: you enrolled in this plan sometime in the past 12 months, and were <b>not</b> enrolled in this plan prior to that enrollment?
	NEW ENROLLMENT IN LAST 12 MONTHS1 NOT A NEW ENROLLMENT2 [CHANGE b57]

>b69prem< Does anyone in the family pay anything for the coverage through (STATE NAME/Medicaid)? Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay. [MEPS]

PROBE: Some (Medicaid/STATE NAME) health insurance plans charge policyholders a premium or fee to receive insurance coverage. This payment, which is made monthly or according to some other time period, is not the same as a copayment or deductible.

YES [go to b69prem2]NO	0
DON'T KNOW  REFUSED  ===> [goto testb70]	
r [goto toolor o]	

>b69prem2< How much does your family pay for [STATE NAME/Medicaid] coverage? [MEPS]

PROBES: (1) Is that per year, per month, per week, or what? (2) Your best estimate would be fine.

NONE	0
\$  _  \$(10-9997)	[goto b69prem3]
DON'T KNOW REFUSED==> [goto testb70]	

>b69prem3< INTERVIEWER: CODE TIME PERIOD.

WEEK	
EVERY OTHER WEEK	2
TWICE A MONTH	3
MONTH	4
QUARTER	5
SEMI-ANNUAL	6
ANNUAL	7
===> [goto btestb70]	

>test b70<
ASKED IF ANY PERSON HAS A STATE PLAN, INCLUDING CHIP, OR OTHER PLAN AND NO PRIVATE PLANS. [If b1a, b1b, and b1c ARE NOT COVERING PERSON i, AND PERSON i HAS COVERAGE BY b1h or b1i1, FOR ANY PERSON I go to b75; else, go to test b80].

>b75<	Is [fill NAME OF STATE PROGRAM]an HMO, that is, a Health Maintenance Organization?			
	<b>PROBE:</b> WITH an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]			
	YES			
	DON'T KNOWd  REFUSEDr ===>			
	NOTE: Deleted b75a, b75b, and b76			
>b77<	Did [fill NAMES OF PLAN MEMBERS] enroll in [NAME OF STATE PROGRAM] in the past 12 months, that is, after [fill DATE]?			
	IF MORE THAN ONE PERSON, ASK: Who enrolled in the past 12 months?			
	INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.			
	[fill NAME]       1         [fill NAME]       2         [fill NAME]       3         [fill NAME]       5         [fill NAME]       6         [fill NAME]       7         [fill NAME]       8         NO ONE AFTER [fill DATE]/NO ONE ELSE       n         DON'T KNOW       d         REFUSED       r         ===>			

### >b78prem< SCHIP/OTHER STATE PROGRAM PREMIUM

Does anyone in the family pay anything for the coverage through (NAME OF STATE/SCHIP PROGRAM)? Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay.[MEPS]

PROBE: Some (NAME OF STATE/SCHIP PROGRAM) health insurance plans charge policy holders a premium or fee to receive insurance coverage. This payment, which is made monthly or according to some other time period, is not the same as a copayment or deductible.

	[go to b78prem2]	
DON REF	I'T KNOW USED > [goto testb80]	d

>b78prem2< How much does your family pay for [NAME OF STATE/SCHIP PROGRAM] coverage? [MEPS]

PROBES: (1) Is that per year, per month, per week, or what? (2) Your best estimate would be fine.

NONE	0
\$    \$(10-9997)	[goto b78prem3]
DON'T KNOW	d
REFUSED	r
===> [goto testb80]	

>b78prem3< INTERVIEWER: CODE TIME PERIOD.

WEEK	
EVERY OTHER WEEK	2
TWICE A MONTH	3
MONTH	4
QUARTER	5
SEMI-ANNUAL	6
ANNUAL	7
===> [goto testb80]	

## **CURRENTLY UNINSURED**

>test b80<	[IF ONE OR MORE FAMILY MEMBERS IS CURRENTLY UNINSURED, goto b80 FOR FIRST PERSON; ELSE goto TEST b85]
>b801<	At any time during the past 12 months [was fill NAME/were you] covered by [Medicaid/fill STATE NAME], [fill STATE PROGRAM], or a health insurance plan obtained through work, a union, or purchased directly?
	YES
	DON'T KNOWd REFUSEDr
	===> [goto NEXT UNCOVERED PERSON or test b85]
>b81<	Just before becoming uninsured, what type of health insurance coverage did ([fill NAME]/you) have? Was it
	INTERVIEWER: CODE ONLY ONE.
	a health insurance from an employer or union or purchased directly from insurance company

DON'T KNOW ......d REFUSED .....r

===> [goto next uncovered person or test b85]

>b83<	In what month did [fill NAME'S/your] health insurance coverage under this plan stop?			
	JAN1			
	FEB			
	MARCH3			
	APRIL4			
	MAY5			
	JUNE6			
	JULY7			
	AUG8			
	SEPT9			
	OCT10			
	NOV11			
	DEC12			
	DON'T KNOWd			
	REFUSEDr			
	===>			
	·			
>b84<	Why did [fill NAME]'s health insurance coverage stop?			
	INTERVIEWER: CODE ALL THAT APPLY; READ RESPONSES IF NECESSARY.			
	LOST JOB OR CHANGED EMPLOYERS1			
	SPOUSE/PARENT LOST JOB OR			
	CHANGED EMPLOYERS2			
	GOT DIVORCED OR SEPARATED/			
	DEATH OF SPOUSE OR PARENT3			
	BECAME INELIGIBLE BECAUSE OF AGE/			
	LEFT SCHOOL4			
	EMPLOYER STOPPED OFFERING COVERAGE5			
	BECAME TEMPORARY EMPLOYEE6			
	BENEFITS FROM EMPLOYER/			
	FORMER EMPLOYER RAN OUT7			
	COULDN'T AFFORD TO PAY THE PREMIUMS8			
	INSURANCE PLAN RAISED COST OF PREMIUMS9			
	INSURANCE COMPANY REFUSED COVERAGE10			
	OR SOMETHING ELSE [SPECIFY]11			
	NONE/NO ONE/NO OTHER RESPONSES			
	NONE/NO ONE/NO OTHER RESPONSESn			
	NEED TO DELETE A RESPONSEx			
	DON'T KNOWd			
	REFUSEDr			
	===> [goto next uncovered person or test b85]			
	> [Agric tiext affice/seled belock of feet pool			

#### **CURRENTLY INSURED**

# >test b85< [IF ONE OR MORE FAMILY MEMBERS ARE CURRENTLY INSURED AND COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b851; ELSE goto TEST b90]

>b851< During the month just before [fill NAME]'s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did [you/he/she] have ? Was it ...

#### **INTERVIEWER:** CODE ONLY ONE.

Private insurance from an employer or union	
or directly purchased from an insurance company	1
[Medicaid/fill state name]	2
[fill state plan]	3
Champus, Champ-VA, Tricare	
or other military coverage	4
Indian health service	5
a different Medicare plan <sup>17</sup>	
[SUPPRESS IF PERSON LT 65]	6
or did (he/she/you) not have any health	
insurance coverage	0
NOT APPLICABLE	
[NEWBORN/FOREIGN COVERAGE]	7
DON'T KNOW	
REFUSED	r
===>	

>test b861< [IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b861; ELSE goto TEST b881]

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<sup>&</sup>lt;sup>17</sup>Can capture prior coverage of Medicare beneficiaries who had changes in last 12 months here.

>b861< Were [fill NAMES OF OTHER CURRENTLY INSURED FAMILY MEMEBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO] covered under this plan?

#### **CODE ALL THAT APPLY**

[fill NAME]	1
[fill NAME][fill NAME]	2
[fill NAME]	3
[fill NAME]	
[fill NAME]	5
[fill NAME]	6
[fill NAME]	7
[fill NAME]	
NONE/NO ONE/NO OTHER RESPONSES	n
NEED TO DELETE A RESPONSE	X
DON'T KNOW	
REFUSED	r
===>	

# >test b881< [If b851 eq <1> and current coverage is private (bla, blb or blc) go to b881; ELSE goto test b852]

>b881< Why did [fill NAME/you] change insurance plans at that time?

CODE ALL THAT APPLY.

OWN/SPOUSE/PARENT CHANGE JOB	1
EMPLOYER OFFERINGS CHANGED	2
CURRENT PLAN IS LESS EXPENSIVE	3
CURRENT PLAN HAS BETTER SERVICES:	
PREFERRED DOCTORS, BETTER QUALITY,	
CONVENIENT LOCATION, ETC	4
OTHER [SPECIFY]	5

>test b852< [IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, AND WHO WERE NOT CITED IN b851 or b861, ASK b852; ELSE goto TEST b902].

>b852< During the month just before [fill NAME]'s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did [you/he/she] have ? Was it ...

### **INTERVIEWER:** CODE ONLY ONE.

Private insurance from an employer or union or directly purchased from an insurance company1 [Medicaid/fill state name]	
insurance coverage0	[goto next insured person whose coverage began LT 12 months ago or test b90]
DON'T KNOWd [goto next insured person whose coverage began LT 12 month	s ago or test b90]
REFUSEDr [goto next insured person whose coverage began LT 12 month ===>	s ago or test b90]

>test b882< [If b852 eq <1> and current coverage is private (bla, blb or blc) go to b882; ELSE goto test b902]

<sup>&</sup>lt;sup>18</sup>Can capture prior coverage of Medicare beneficiaries who had changes in last 12 months here.

>0002<	why did [iiii NAME/you] change insurance plans at that time?
	CODE ALL THAT APPLY.
	OWN/SPOUSE/PARENT CHANGE JOB
	DON'T KNOWd REFUSEDr ===>
>test b90< is <65, GO	IF NON-GROUP POLICY IN FIU (b1b>=1 AND B251 NE 1) and policy holder TO NGI2A; ELSE, If anyone in FIU <65, GO TO NGI1; ELSE GO TO B951.
NGI1.	Some people buy health insurance on their own, rather than through an employer, union, or government program. In the past three years, that is, since (month, yr), have you or [insert other adults in FIU] ever tried to buy health insurance on your own?
	YES
	DON'T KNOWd [goto b951] REFUSEDr [goto b951]
NGI2.	When you [or INSERT OTHER ADULTS IN FIU] tried to buy health insurance on your own, did any company turn you down, charge a higher price because of health problems, or exclude a specific health problem?
	YES
	DON'T KNOW d [goto NGI3] REFUSED r [goto NGI3]

 $<sup>^{19}</sup>$  Frequency for particular services is too low to justify burden and cost of separate coding.  $_{\rm A-51}$   $_{\rm Round\ Five\ (2007),\ Release\ 1}$ 

NGI2A	[FIU HAS NON-GROUP POLICY]: In the past three years, that is, since (month, yr), has any health insurance company from which you tried to buy health insurance ever turned you down, charged a higher price because of heath problems, or excluded a specific health problem? [GO TO NGI4] (YES, NO, DK, RF)			
	YES NO		1 [go 0 [go	oto NGI4] oto NGI4]
NGI3.	Did you [or INSERT of policy on your own?	OTHER ADULTS IN F	IU] end up buying a	health insurance
NGI4@mo.		ear did you [or INSER] alth insurance policy?	Γ OTHER ADULTS	IN FIU] buy
	<ul><li>(1) JAN</li><li>(2) FEB</li><li>(3) MARCH</li><li>(4) APRIL</li><li>(5) MAY</li><li>(6) JUNE</li></ul>	(7) JULY (8) AUG (9) SEPT (10) OCT (11) NOV (12) DEC		
	(d) DON'T KNOW	(r) REFUSED	YEAR	
PROBE: You WAS ASKED	r best estimate is fine.	. INSERT "this" IF NGI	3=1 AND "your curr	ent" IF NGI2A
TEST: IF NGI NGI5	2A WAS ASKED (CU	RRENT NON-GROUP	HOLDER), GO TO	b951; else go to
NGI5.	For how many months did you [or INSERT OTHER ADULTS IN FIU] keep this health insurance policy?			
	<1-36>			
	<d> DON'T KNOW <r> REFUSED</r></d>			

>b951< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.<sup>20</sup>

PROBE: CODE 7 IF R. SAYS THE STATEMENT DOES NOT APPLY.

STRONGLY AGREE	
SOMEWHAT AGREE	2
NEITHER AGREE NOR DISAGREE	3
SOMEWHAT DISAGREE	4
STRONGLY DISAGREE	5
NOT APPLICABLE	7
DON'T KNOW	d
REFUSED	r

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<sup>&</sup>lt;sup>20</sup>Source: Royal, Kenneth, et al, **The Gallup Arizona Health Care Poll**. P.18, The Gallup Organization, 1995. Distributions by coverage available.

#### c. RESOURCE USE DURING THE LAST 12 MONTHS

>c101< Since [DATE 12 MONTHS AGO], were [fill NAMES OF FAMILY MEMBERS] a patient in a hospital overnight? PROBE: DO NOT INCLUDE ANY OVERNIGHT STAYS IN THE EMERGENCY ROOM. YES ......1 [goto c11] NO ....... DON'T KNOW ......d REFUSED .....r ===> [goto test c20] >c11< Who was in a hospital overnight? (Anyone else?) [fill NAME]......1 [fill NAME]......2 [fill NAME]......3 [fill NAME]......4 [fill NAME]......5 [fill NAME]......6 [fill NAME]......7 [fill NAME]......8 NONE/NO ONE/NO OTHER RESPONSES.....n NEED TO DELETE A RESPONSE .....x DON'T KNOW ......d REFUSED .....r >test c121< [ASK FOR EACH PERSON WITH A HOSPITAL STAY] >c121< How many different times did [fill NAME] stay in any hospital overnight or longer during the past 12 months? **PROBE:** Your best estimate is fine. \_\_|\_\_| TIMES (1-20)DON'T KNOW ......d REFUSED .....r

>test c131<	[if (FEMALE AND GE 12 AND LE 45) or (CHILD LE 1) goto c131; else goto c151]
>c131<	FEMALE, 12-45 YEARS OLD: [Were any of these hospital stays/was this hospital stay] for delivery of a baby?
	CHILD: Did [fill CHILD LE 1] stay in the hospital overnight at birth?
	YES
	DON'T KNOW
>c141<	Have you included this hospitalization in the number of hospital stays you gave me for [fill NAME]?
	PROBE: Was [fill NAME's] stay in the hospital overnight for delivery.
	YES
	DON'T KNOWr REFUSEDr
>c151<	[For how many of the [fill c121] times [fill NAME] stayed in the hospital] (was/were) (he/she/you) admitted through the emergency room?
	TIMES (0-20)
	DON'T KNOWd REFUSEDr
	NOTE: NUMBER MUST BE LE # ADMISSIONS IN c121.

>c161<	[For [fill NAME']s [fill c121] hospital stay(s) during the past 12 months,] how many nights was (he/she) in the hospital altogether?				
	NIGHTS (1-366)				
	DON'T KNOWd REFUSEDr ===>				
	NOTE: c161 MUST BE GE c121; ELSE VERIFY.				
_	R OTHER FAMILY MEMBERS WITH HOSPITAL STAYS. THEN ASK RESOURCE USE QUESTIONS FOR EACH FAMILY MEMBER, BEGINNING MANT.				
>test c20<	SELECT WORDING BASED ON WHETHER PERSON HAD ER VISIT RESULTING IN HOSPITAL ADMISSION				
>c211<	ER/HOSPITAL ADMISSION: [The next questions are about [fill NAME] <sup>21</sup> . Not counting [fill NAME]'s [fill c151] emergency room visits you told me about, [have/has] [fill NAME] gone to a hospital emergency room in the past 12 months to get medical treatment?				
	NO ER/HOSPITAL ADMISSION: [The next questions are about [fill NAME]]. <sup>1</sup> During the past 12 months, [have/has] [fill NAME] gone to a hospital emergency room to get medical treatment?				
	<b>PROBE:</b> Count all visits to the ER, including visits where you received a brief exam, but were sent elsewhere.				
	YES				
	DON'T KNOWd  REFUSEDr ===> [goto c311)				

<sup>&</sup>lt;sup>21</sup>Delete phrase for one person family.

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>c221<	[Again, not counting the [fill 151] emergency room visits you told me about,] During the past 12 months, how many times has [fill NAME] gone to a hospital emergency room?			
	PROBE:	Count all visits to the ER, including visits where [fill NAME] received a brief exam, but were sent elsewhere.		
	PROBE:	Your best estimate is fine.		
	 (1-20)	TIMES		
	REFUS	KNOW d [goto c231] SED r gotoc311]		
>c231<	Would you	say one, two or three, four to nine, ten to twelve, or thirteen or more?		
	2-3 4-9 10-12 . 13 OR DON'T			
>c311<	NAME] se	ert MONTH/YEAR 12 months ago], about how many times has [fill en a doctor? [IF ER OR HOSPITAL VISIT: Do not count doctors seen vernight patient in a hospital or in the emergency room.]		
	PROBES:	<ul><li>(1)Include osteopathic doctors and psychiatrists.</li><li>(2)Include outpatient visits and outpatient surgeries.</li><li>(3)Exclude dentists visits, chiropractor visits, and telephone calls to doctors.</li><li>(4)Your best estimate is fine.</li></ul>		
	NO/NC	0 [goto c331]		
	<u>                                    </u>	_  VISITS [goto c331]		
		KNOWd [goto c321] SEDr [goto c331]		

>c321<	Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?
	1
>c331<	[Not counting [fill NAME'S] [fill c311 or 321] doctor visits you already told me about,] has [fill NAME] seen a nurse practitioner, physician's assistant, [or midwife] during the last 12 months?
	<b>IF YES:</b> How many times has [fill NAME] seen a nurse practitioner, physician's assistant [or midwife] during the last 12 months?
	PROBES: (1)Your best estimate will be fine. (2)Include times you got a shot, but did not see the doctor. (3)Do not include visits where [FILL NAME] saw only a registered nurse.
	NO/NONE0
	VISITS (1-96)
	DON'T KNOW
>c341<	Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?
	1

C.	UNMET NEED			
>c811<	[INFORMANT SELF RESPONSE] Next, during the past 12 months, was there any time when you didn't get the medical care you needed?			
	INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.			
	YES			
	DON'T KNOWd REFUSEDr ===>			
>c821<	[INFORMANT SELF RESPONSE] And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?			
	YES			
	DON'T KNOWd REFUSEDr ===>			
>test c831<	[IF c811 EQ <1> OR <d> OR c821 EQ &lt;1&gt; or <d> goto c831; ELSE goto c841]</d></d>			

>c831< [IN	FORMANT SELF RESPONSE] Did you not get the medical care you needed or have delays getting medical care you needed for any of the following reasons?  CODE ALL THAT APPLY.  Worry about the cost
>c841<	You didn't think the problem was serious enough9 Or any other reason I haven't mentioned [SPECIFY]

>test c93< [ASK c22...c842...FOR NEXT PERSON<sup>23</sup>; THEN gotoc92]

===>

DON'T KNOW ......d REFUSED .....r

<sup>&</sup>lt;sup>22</sup>Source: NHIS, AAU.111

<sup>&</sup>lt;sup>23</sup>Include unmet need (k811...k831) for child, substituting child's home for second person.

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>c92< During the past 12 months, about how much did (you/your family) spend out-of-pocket for medical care? Do not include the cost of dental care, health insurance premiums, or any costs that are paid by your health insurance.

**PROBES:** (1) Your best estimate is fine.

(2) Include out-of-pocket expenses for prescription drugs, co-payments, and deductibles, but do not include health insurance premiums, dental costs, or any other costs paid by your health insurance.

RFA	D.C.	ATE	GOR	IFS II	F NF	CESS	ARY
$1 \times L \cap$	$\mathbf{U}$	/\ I <b>L</b>	$\circ$	1 - 0 1	111	$o_{\perp}o_{\odot}$	/NI \ I .

NONE	0
\$   _,   (10-96,000)	
DON'T KNOW	
===> [gotoc94]	I

>c93< Would that be less than \$500, \$500 to less than \$2,000, \$2,000 to less than \$3,000, \$3,000 to less than \$5,000, or \$5,000 or more?

### READ CATEGORIES IF NECESSARY.

NONE	C
LESS THAN \$500	1
\$500 TO \$1,999	2
\$2,000 TO \$2,999	3
\$3,000 TO \$4,999	4
\$5,000 OR MORE	
DON'T KNOW	
REFUSED	1
===>	

>c94< During the past 12 months, (have you/has your family) had any problems paying medical bills?

YES	1 [goto c95]
NO	
DON'T KNOW	d
REFUSED	r
===> [gotoRC1]	

>c95< Because of problems paying medical bills during the past 12 months, (have you/has your family)...

**INTERVIEWER: REPEAT STEM IF NECESSARY** 

PROGRAMMER NOTE: ROTATE C95A-C95G

	YES	NO	DON'T KNOW	REFUSED
a. Been contacted by a collection agency?	1	0	d	r
b. Had problems paying for other necessities?	1	0	d	r
c. Put off major purchases, such as a new home or car?	1	0	d	r
d. Had to take money out of savings?	1	0	d	r
e. Had to borrow?	1	0	d	r
f. Thought about filing for bankruptcy	1	0	d	r
f1. IF YES: Did you file for bankruptcy	1	0	d	r
<ul> <li>g. Been denied medical care by a doctor or other provider</li> </ul>	1	0	d	r

## [INSERT YOU IF SINGLE PERSON FIU; ELSE INSERT YOUR FAMILY]

>C96<	Was the medical condition(s) or event(s) that caused the medical bills your family
	had difficulty paying (CODE ALL THAT APPLY)

An accident or injury	1
An illness	2
A medical test or surgical procedure	3
A birth of a child	4
Routine health care	5
Something else (SPECIFY)	

**CODES** 

>C97< Was the person who was treated for these (INSERT- medical problems IF c96=1-3,6) /birth of a child IF c96= 4/routine health care IF c96=5) covered by health insurance or was this person uninsured at the time services were received?

COVERED	
	0 [goto c99]
	. [3]
DON'T KNOW	d [goto c99]
REFUSED	

;	>C98<	Did (your/this person's) health insurance plan cover a little, some, or most of the cost of these medical services?
		A LITTLE
		DON'T KNOWr
;	>c99<	Did the doctor's office, hospital, or other provider where (you/your family) owe(d money offer any of the following assistance? (ROTATE AND CODE ALL THAT APPLY)
		<ul> <li>a. Offer to discount the bill</li> <li>b. Inform you about free care</li> <li>c. Inform you about public assistance</li> <li>d. Suggest a payment plan</li> <li>e. Suggest you take out a loan to pay a bill</li> <li>f. Refer you to another provider?</li> </ul>
	<1> \	/ES <0> NO <d> DON'T KNOW <r> REFUSED</r></d>
;	>C100<	When did (you/your family) first get these medical bills? Was it within the last year, from 1 to 2 years ago, from 2 to 5 years ago, or more than 5 years ago?
		LAST YEAR
		DON'T KNOWd REFUSEDr

>C101_2<	How much (do you/does your family) currently owe in medical bills?
	<0-90000> <d> DON'T KNOW <r> REFUSED</r></d>
	PROBE IF DOESN'T KNOW EXACT AMOUNT:
>C101a<	Is it less than \$2,000, from \$2,000 to less than \$5,000, from \$5,000 to less than \$10,000, from \$10,000 to less than \$20,000, or more than \$20,000?
	LESS THAN 2,000
	DON'T KNOWd REFUSEDr
>C102<	During the past 12 months, how much of (your/your family's) medical bills have you paid off? Would you say none, a little, some, most or all of your medical bills?
	NONE
	DON'T KNOWd REFUSEDr
>C103<	When do you expect to pay off your current medical bills? Would you say within the next year, within the next two to three years, within the next five years, or longer than that?
	NEXT YEAR
	DON'T KNOWd REFUSEDr

# **IN-STORE RETAIL CLINICS**

>RC1<	An in-store health clinic is a medical clinic that is located inside a retail store like CVS, Walgreens, Target or Wal-Mart. Have you (or INSERT NAMES OF OTHER FIU MEMBERS) <b>ever</b> had a medical visit at an in-store health clinic? Do not include pharmacies that only offer flu vaccinations once a year or eye care.  YES
	DON'T KNOWd [goto RC5] REFUSEDr [goto RC5]
>RC1a<	Have you (or INSERT NAMES OF OTHER FIU MEMBERS) used an in-store health clinic in a retail chain during the <b>past 12 months</b> ?
	YES
>RC2<	Please think of the last time you or a family member used an in-store health clinic in a retail chain. What was the primary purpose of that visit?
ROTA	ATE a-e THEN f.: CODE ALL THAT APPLY
	<ul> <li>a. A new illness or symptom such as sore throat, strep throat, ear infection or skin rash</li> <li>b. Vaccination such as a flu shot or tetanus shot</li> <li>c. Physical exam for school, camp or employment</li> <li>d. Care for an ongoing or chronic condition like diabetes</li> <li>e. Prescription renewal</li> <li>f. Other (SPECIFY)</li> </ul>
	YES
	DON'T KNOWd REFUSEDr

>RC3< I'm going to read several reasons why some people choose in-store health clinics. For each one, please tell me whether it was a major factor, a minor factor, or not a factor in choosing an in-store clinic for the most recent visit. **ROTATE** I/we do not have a regular source of medical care MAJOR FACTOR 1 2 MINOR FACTOR 3 **NOT A FACTOR** d DON'T KNOW **REFUSED** I/we did not have to make an appointment b. MAJOR FACTOR 2 MINOR FACTOR 3 NOT A FACTOR DON'T KNOW d **REFUSED** The cost was lower than another source of care C. **MAJOR FACTOR** 1 2 MINOR FACTOR 3 NOT A FACTOR DON'T KNOW d **REFUSED** d. The location was more convenient than another source of care MAJOR FACTOR 2 MINOR FACTOR **NOT A FACTOR** 3 DON'T KNOW d **REFUSED** The clinic hours were more convenient than another source of care e. MAJOR FACTOR 2 MINOR FACTOR 3 **NOT A FACTOR** DON'T KNOW d **REFUSED** CATI: IF ANY FIU MEMBER IS INSURED BY ANY PLAN GO TO RC4; ELSE GO TO RC5 >RC4< Did your health insurance plan pay for none, part, or all of the cost of the most recent visit to the in-store clinic? NONE OF THE COST......1 PART OF THE COST......2 ALL OF THE COST ......3

DON'T KNOW ......d
REFUSED .....r

# **ONSITE WORPLACE HEALTH CLINICS**

>RC5<	Have you (or INSERT NAMES OF OTHER FIU MEMBERS) <b>ever</b> used an onsite health clinic at your or (SPOUSE'S) workplace?
	YES
	DON'T KNOWd [goto d101] REFUSEDr [goto d101]
>RC5a<	Have you (or INSERT NAMES OF OTHER FIU MEMBERS) used an onsite health clinic a workplace during the <b>past 12 months</b> ?
	YES
	DON'T KNOWd [goto d101] REFUSEDr [goto d101]
>RC6<	Please think of the last time you or a family member used an onsite health clinic at a workplace. What was the primary purpose of that visit?
RC	OTATE a-e THEN f. :
	<ul> <li>a. To treat an injury that was work related?</li> <li>b. Vaccination such as a flu shot or tetanus shot?</li> <li>c. A new illness or symptom such as sore throat, strep throat, ear infection or skin rash?</li> <li>d. A physical exam for employment, school, or camp?</li> <li>e. Care for an ongoing or chronic condition like diabetes?</li> <li>f. Prescription renewal?</li> <li>g. Some other reason [SPECIFY]</li> </ul>
	YES
	DON'T KNOWr

>rc7< I'm going to read several reasons why some people choose onsite health clinics. For each one, please tell me whether it was a major factor, a minor factor, or not a factor in choosing an onsite clinic for the most recent visit.

#### **ROTATE**

- a. I/we do not have a regular source of medical care
  - 1 MAJOR FACTOR
  - 2 MINOR FACTOR
  - 3 NOT A FACTOR
  - d DON'T KNOW
  - r REFUSED
- b. I/we did not have to make an appointment
  - 1 MAJOR FACTOR
  - 2 MINOR FACTOR
  - 3 NOT A FACTOR
  - d DON'T KNOW
  - r REFUSED
- c. The cost was lower than another source of care
  - 1 MAJOR FACTOR
  - 2 MINOR FACTOR
  - 3 NOT A FACTOR
  - d DON'T KNOW
  - r REFUSED
- d. The location was more convenient than another source of care
  - 1 MAJOR FACTOR
  - 2 MINOR FACTOR
  - 3 NOT A FACTOR
  - d DON'T KNOW
  - r REFUSED
- e. The clinic hours were more convenient than another source of care
  - 1 MAJOR FACTOR
  - 2 MINOR FACTOR
  - 3 NOT A FACTOR
  - d DON'T KNOW
  - r REFUSED

#### d. USUAL SOURCE OF CARE/PATIENT TRUST

## **BEGIN WITH FAMILY INFORMANT**

- >USC< The next questions are about places people go to for their health problems.
- >d101< Is there a place that [you/fill NAME] **usually** go(es) to when (you/he/she) (is/are) sick or need(s) advice about your health?

**PROBE:** IF R. IS UNSURE IF ONE PLACE OR MORE THAN ONE PLACE: When [fill NAME] is sick or needs advice about (his/her/you) health, does (he/she/you) go to one place or more than one place?

YES	1 [goto d111]
NO, THERE IS NO PLACE	
NO, THERE IS MORE THAN ONE PLACE	
DON'T KNOWd [goto tes	st d301]
REFUSEDr [goto tes	st d301]
===>	

## >d111< If (d101 = 1) then read:

What kind of place is it--a doctor's office, an HMO, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

### Else (d101 = 3) read:

What kind of place (do/does) [you/fill NAME] go to most often--a doctor's office, an HMO, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

DOCTOR'S OFFICE	
HMO	2
HOSPITAL OUTPATIENT CLINIC	3
OTHER CLINIC OR HEALTH CENTER	4
HOSPITAL EMERGENCY ROOM	5
SOME OTHER PLACE	6
DONUT KNIOW	۔
DON'T KNOW	
REFUSED	r
===>	

>sn1<	IF UNINSURED: At this place, (do you/does fill NAME) pay full price for medical care or [do you /does fill NAME] pay a lower amount based on what [you/fill NAME] can afford to pay?
	FULL PRICE
	DON'T KNOWd REFUSEDr ===>
>d121<	When (you/fill [NAME]) go(es) there, do(es) (you/he/she) usually see a doctor, a nurse, or some other type of health professional?
	INSTRUCTION: IF R. SAYS DOCTOR AND NURSE, CODE DOCTOR.
	DOCTOR
	DON'T KNOWd [goto test d301]  REFUSEDr [goto test d301]  ===>
>d121spec<	Primary care doctors, such as general or family doctors, general internists, or pediatricians, treat a variety of illnesses and give preventive care. <u>Specialists</u> are doctors like surgeons, heart doctors, and others who specialize in one area of health care.
	Is the doctor (you/fill [NAME]) usually see a primary care doctor or a specialist?
	INTERVIEWER INSTRUCTION: GENERAL INTERNISTS ARE PRIMARY CARE DOCTORS; INTERNISTS WHO SUBSEQUENTLY SPECIALIZE IN A PARTICULAR AREA OF CARE ARE SPECIALISTS.
	PRIMARY DOCTOR       1         SPECIALIST       2         DON'T KNOW       d         REFUSED       r         ===>
> d131<	Do(es) [you/fill NAME] usually see the same (doctor/nurse/provider) each time (you/he/she) go(es) there ?
	YES
END RO	·

>test d301<	[IF MORE THAN ONE PERSON; REPEAT d10nd131n FOR EACH PERSON.]
>test sn2<	[IF NO UNINSURED IN FIU SKIP TO test e10 IF sn1 =1 FOR ANY MEMBER OF FIU, GO TO sn4 ELSE, GO TO sn2]
>sn2<	Thinking of the area where you live, is there a place that offers affordable medical care for people without health insurance?
	YES
	DON'T KNOW
>sn3<	Is that place a doctor's office, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?
	DOCTOR'S OFFICE
	DON'T KNOWd REFUSEDr ===>
>sn4<	How long [does/would] it take you to get to [IF sn1 EQUALS 0: INSERT PLACE NAMED IN D11, ELSE INSERT PLACE FROM sn3: the doctor's office, the HMO the hospital outpatient clinic, the clinic or health center, the hospital emergency room, that place]?
	INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD. ENTER TIME PERIOD ON NEXT SCREEN
	TIME [goto sn4per] (1-240)
	DON'T KNOWd  REFUSEDr ===> [goto sn5]
>sn4per<	ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS sn4]
	MINUTES

>sn5<	During the last 12 months, have you (or has anyone in your family) seen a physician or other health professional at [PLACE NAMED IN D111 OR sn3] when you did not have health insurance?
	YES
	DON'T KNOW

## **QUALITY OF CARE AND RISK BEHAVIORS**

THIS SECTION WILL BE COMPLETED FOR INFORMANT AND CHILD AND (EXCEPT FOR FAMILY LEVEL QUESTIONS) IS INCLUDED IN SELF-RESPONSE MODULE FOR OTHER ADULTS.

>test e10<	[IF FAMILY HAS HAD ANY PROVIDER, OR HOSPITAL VISITS IN LAST 12 MONTHS (c101 = 1, or c211 = 1, or $1 \le c311 \le 96$ , or $1 \le c321 \le 5$ , or $1 \le c331 \le 96$ , or $1 \le c341 \le 5$ ) goto e101, ELSE goto e121]
>eSAT<	The next questions are about your satisfaction with health care.
	ENTER <g> TO CONTINUE ===&gt;</g>
>e101<	All things considered, are you satisfied <b>or</b> dissatisfied with [(the health care you have received/the health care you and your family have received)] <b>during the last 12 months</b> ?
	<b>PROBE:</b> If you did not receive services that you felt you needed, please consider that too.
	SATISFIED
	DON'T KNOWd  REFUSEDr ===> [goto e121]
>e111<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY
	DON'T KNOWd REFUSEDr ===>

	First, primary care doctors, such as family doctors, [pediatricians], <sup>24</sup> or general practitioners, who treat a variety of illnesses and give preventive care.
	Are you satisfied or dissatisfied with the <b>choice</b> you personally have for primary care doctors?
	<b>PROBE:</b> Most people go to a primary care doctor first when they have a sickness or injury they have not had before.
	SATISFIED
	DON'T KNOW
>e13<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY1 SOMEWHAT2
	DON'T KNOWd REFUSEDr ===>
>e14new<	In the past 12 months, did you or a doctor think you needed to see a specialist?
·	PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.
	YES
	DON'T KNOWd  REFUSEDr ===> [goto test e15a]

Now I would like to ask you about satisfaction with your **choice** of doctors.

>e12<

<sup>&</sup>lt;sup>24</sup>Exclude for adults. Household Survey

>CAHPS12<	In the last 12 months, did (you/NAME) see a specialist?
	YES
	DON'T KNOWr REFUSEDr
>e15<	Are you satisfied or dissatisfied with the <b>choice</b> you have for specialists?
	SATISFIED
	DON'T KNOWd  REFUSEDr ===> [goto test e1512]
>E15_1<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY1 SOMEWHAT2
	DON'T KNOWd REFUSEDr ===>
>test e1512<	IF d121spec = 1 and CAHPS12=1, go to e1512;else go to test e15a
>e1512<	In the last 12 months, how often did your usual doctor seem informed and up-to-date about the care you got from specialists? Source: CAHPS
	NEVER       1         ALMOST NEVER       2         SOMETIMES       3         USUALLY       4         ALMOST ALWAYS       5         ALWAYS       6         NO USUAL DOCTOR       7         MY SPECIALIST IS MY USUAL DOCTOR       8
	DON'T KNOWd REFUSEDr

Test: IF RESPONSE IS REFUSED, NO USUAL DOCTOR, OR SPECIALIST IS MY USUAL DOCTOR, GO TO teste15a; ELSE CONTINUE WITH e1513

>e1513<.	After going to the specialist, did your usual doctor talk with you about what happened at the visit (with the specialist)? (Source: Starfield, Primary Care Assessment Tool)
	YES
	DON'T KNOWd REFUSEDr
>test e15a<	(c311 ge 1 OR c321 ge 1) GO TO CAHPSLANG; else go to test e161
>CAHPSLAN	G <in 12="" <i="" a="" did="" hard="" have="" how="" last="" months,="" often="" the="" time="" you="">speaking with or understanding a doctor or other health providers because you spoke different languages—never, sometimes, usually or always?</in>
	NEVER1
	SOMETIMES2 USUALLY3
	ALWAYS4
	DON'T KNOWd
	REFUSEDr ===>
>test e161<	[IF PERSON HAS HAD ANY PHYSICIAN VISITS IN LAST 12 MONTHS (1 $\leq$ C311 $\leq$ 96 OR 1 $\leq$ C321 $\leq$ 5), gotoCAHPS5; ELSE, goto e401]
>CAHPS5<	In the last 12 months, <u>not</u> counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic?
	YES1 [goto E261R5@day] NO0
	DON'T KNOWd
	REFUSEDr ===> [goto e40]

>E261R5@day< Thinking of the last time you made an appointment at a doctor's office or clinic, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

**INTERVIEWER:** (1) CODE "0" FOR SAME DAY.

	(2) ACCEPT MOST CONVENIENT TIME PERIOD.
	(0-31) DAYS OR (1-20) WEEKS OR (1-5) MONTHS
	DON'T KNOWd REFUSEDr
>e40<	Now, I have a question about (your/his/her) health. 25
	In general, would you say your health is:
	Excellent       1         Very Good       2         Good       3         Fair or       4         Poor       5
	DON'T KNOWd REFUSEDr

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<sup>&</sup>lt;sup>25</sup>SF-12<sup>TM</sup> Standard US Version 1.0, Copyright 1994 The Health Institute; New England Medical Center. Distributed by: Medical Outcomes Trust. For Spanish speaking respondents, an interviewer-administered version of the U.S.-Spanish SF-12 was reviewed and approved by the New England Medical Center (agreement 10/26/97).

# ADULT CHRONIC CONDITIONS FOR FIU INFORMANT.

>cc1<	[IF FEMALE, AGE 50 OR UNDER] The next questions are about your health during the past two years. During the past two years, have you had a baby?
	YES
	DON'T KNOWd REFUSEDr ===>
>cc2c<	[IF FEMALE] During the past two years, have you seen a doctor or health care professional for abnormal uterine bleeding?
	YES
	DON'T KNOWd REFUSEDr
>cc3@b<	Has a doctor or health professional ever told you that you had diabetes or high blood sugar?
	YES1[goto cc3@bb] NO0
	DON'T KNOWd REFUSEDr
>cc3@bb<	IF YES: During the past two years, have you seen a doctor or other health care professional for diabetes or high blood sugar?
	YES
	DON'T KNOWd REFUSEDr
>cc3@c<	Has a doctor or health professional ever told you that you had arthritis?
	YES1[goto cc3@cb] NO0
	DON'T KNOWd REFUSEDr

>cc3@cb<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for arthritis?
	YES
	DON'T KNOWd REFUSEDr
>cc3@d<	Has a doctor or health professional ever told you that you had asthma?
	YES
	DON'T KNOWd REFUSEDr
>cc3@db<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for asthma?
	YES
	DON'T KNOWd REFUSEDr
>cc3_2@e<	Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?
	YES
	DON'T KNOWd REFUSEDr
>cc3_2@eb<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?
	YES
	DON'T KNOWd REFUSEDr

>cc3_2@g<	Has a doctor or health professional ever told you that you had hypertension or high blood pressure?
	YES1[goto cc3_2@gb] NO0
	DON'T KNOWd REFUSEDr
>cc3_2@gb<	IF YES: During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure? YES
	DON'T KNOWd REFUSEDr
>cc3_2@i<	Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?
	YES1[goto cc3_2@ib] NO0
	DON'T KNOWd REFUSEDr
>cc3_2@ib<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for coronary heart disease?
	YES
	DON'T KNOWd REFUSEDr
>cc5@c<	Has a doctor or health professional ever told you that you had skin cancer?
	YES1[goto cc5@cb] NO0
	DON'T KNOWd REFUSEDr

>cc5@cb<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for skin cancer?
	YES
	DON'T KNOWd REFUSEDr
>cc5@h<	Has a doctor or health professional ever told you that you had cancer other than skin cancer?
	YES1[goto cc5@hb] NO0
	DON'T KNOWd REFUSEDr
>cc5@hb<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for that cancer?
	YES
	DON'T KNOWd REFUSEDr
>cc5f4<	IF FEMALE or MALE AGE 50 OR UNDER GOTO cc6e. IF MALE AGE OVER 50: Has a doctor or health professional ever told you that you had a benign prostate disease or a large prostate that was not prostate cancer?
	YES
	DON'T KNOWd REFUSEDr
>cc5@f4b<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health professional for benign prostate disease?
	YES
	DON'T KNOWd REFUSEDr

>cco@e<	Has a doctor or health professional ever told you that you had depression?
	YES1[goto cc6@eb] NO0
	DON'T KNOWr
>cc6@eb<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for depression?
	YES
	DON'T KNOWd REFUSEDr
>cc7< During	the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?
	YES
===>	DON'T KNOWd REFUSEDr
QUALITY OF	CARE
>testccq<	[if seen a doctor during the past two years for abnormal uterine bleeding, diabetes, arthritis, asthma, COPD, hypertension, CHD, skin cancer, other cancer benign prostate disease, or depression, go to CCQ1, ELSE GO TO CE2] Note that word program doesn't have question numbers for past two years questions.
CCQ1.	Do you see only one doctor or more than one doctor for treatment of [INSERT PATIENT'S CHRONIC DISEASE(S)]?
	ONE
	DON'T KNOWd[goto CCQ3] REFUSEDr[goto CCQ3]

CCQ2.	Which of the following statements best describes how well the different doctors you see for [INSERT PATIENT'S CHRONIC CONDITION(S)] coordinate your care? By care coordination, we mean how well do your doctors work together to manage your health care.  My care is not coordinated at all	
	DON'T KNOWd REFUSEDr	
CCQ3.	Next, I will read some statements about experiences with your health care providers. These are the doctors, nurses, therapists, pharmacists and others who help you manage your condition(s). Please tell me whether you strongly agree, agree, disagree or strongly disagree with each statement. When discussing your condition and its treatment with your health care providers, did they	
INTERVIEWER: IF R. SAYS THERE WAS ONLY ONE PROVIDER, YOU CAN SUBSTITUTE "HE" OR "SHE." READ STEM ONLY AS NECESSARY.		
	A. Explain things in a way you could understand Strongly agree	
	REFUSED	
	C. Treat you with respect and dignity Strongly agree	

	D. Help you set specific goals to improve your diet Strongly agree
	E. Help you set specific goals for exercise Strongly agree
	F. Teach you how to monitor your condition(s) so you could tell how you are doing Strongly agree
CCQ4.	Do you strongly agree, agree, disagree or strongly disagree with the following statement. When I am prescribed a new medication, I read about the possible side effects.  Strongly agree

CCQ5.	pro cai	the last 6 months, did you receive a phone call from any of your health care oviders to see how you were doing without you calling them first? By health re provider we mean doctor, nurse, therapist, pharmacist and others who help u manage your condition.	
		YES	
		DON'T KNOWd REFUSEDr	
NOTE: CONT		JE WITH CONSUMER ENGAGEMENT QUESTIONS (CE1) FOR CHRONIC ONDITION SUB-SAMPLE	
CONSUMER	EN	GAGEMENT	
CE1.	ab stre	lext, I will read some statements that people sometimes make when they talk bout their health. Please tell me whether you strongly agree, agree, disagree, or trongly disagree with each statement as it applies to you personally. Your nswers should be what are true for you. If the statement does not apply to you, ast let me know and we will move on to the next one. The first/next one is	
RANDOMIZE			
	1.	Taking an active role in my own health care is the most important factor in determining my health and ability to function.  Strongly agree	
	2.	When all is said and done, I am the person who is responsible for managing my health condition(s).  Strongly agree	
	3.	I know what each of my prescribed medications does.  Strongly agree	

	Disagree
	DON'T KNOWd REFUSEDr
4.	I am confident that I can follow through on medical treatments I need to do at home.  Strongly agree
	DON'T KNOWd REFUSEDr
5.	I am confident I can tell my health care provider concerns I have even when he or she does not ask.  Strongly agree
	DON'T KNOWd REFUSEDr
6.	I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.  Strongly agree
	DON'T KNOWd REFUSEDr
7.	I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr

8.	I understand the nature and causes of my health condition(s).  Strongly agree
	Not applicable [do not read]5  DON'T KNOW
9.	I know the different medical treatment options available for my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
10.	I know how to prevent further problems with my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
11.	I have been able to maintain the lifestyle changes for my health that I have made.  Strongly agree
	DON'T KNOWd REFUSEDr
12.	I am confident I can figure out solutions when new situations or problems arise with my health condition(s).  Strongly agree

		DON'T KNOWd REFUSEDr		
	13	I am confident that I can maintain lifestyle changes like diet and exercise even during times of stress.  Strongly agree		
		DON'T KNOWd REFUSEDr		
****GO TO e5	21*	**		
NON-CHRON	IIC (	CONDITION SAMPLE		
CE2.	ab or an	ext, I will read some statements that people sometimes make when they talk bout their health. Please tell me whether you disagree strongly, disagree, agree, agree strongly with each statement as it applies to you personally. Your aswers should be what is true for you. If the statement does not apply to you, st let me know and we will move on to the next one. The first one/next one is		
RANDOMIZE				
	1.	When all is said and done, I am the person who is responsible for managing my health.  Strongly agree		
		DON'T KNOWd REFUSEDr		
	2.	Taking an active role in my own health care is the most important factor in determining my health and ability to function.  Strongly agree		
		REFUSEDr		

3.	I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health.  Strongly agree
	Not applicable [do not read]5  DON'T KNOWd  REFUSEDr
4.	I know what each of my prescribed medications does.  Strongly agree
5.	I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.  Strongly agree
6.	I am confident that I can tell a doctor concerns I have, even when he or she does not ask.  Strongly agree
7.	I am confident that I can follow through on medical treatments I may need to do at home.  Strongly agree

	DON'T KNOWd REFUSEDr
8.	I understand the nature and causes of my health problems.  Strongly agree
	DON'T KNOWd REFUSEDr
9.	I know the different medical treatment options available for my health conditions.  Strongly agree
	DON'T KNOWd REFUSEDr
10.	I have been able to maintain the lifestyle changes for my health that I have made.  Strongly agree
	DON'T KNOWd REFUSEDr
11.	I know how to prevent problems with my health.  Strongly agree
	DON'T KNOWd REFUSEDr
12.	I am confident I can figure out solutions when new situations or problems arise with my health.  Strongly agree

Not applicable [do not read]	5
DON'T KNOWREFUSED	
13. I am confident that I can maintain life even during times of stress.	estyle changes, like diet and exercise
Strongly agree	1
Agree	2
Disagree	
Strongly disagree	4
Not applicable [do not read]	
DON'T KNOW	d
REFUSED	

>e521<	Now, please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statement. I'm more likely to take risks than the average person.		
	INTERVIEWER: (1) NEITHER AGREE NOR DISAGREE IS NOT READ, BUT IS CODED IF OFFERED.		
	(2) PROBE BY ASKING: In general, OR Whatever you think of as risks		
	STRONGLY AGREE       1         AGREE       2         NEITHER AGREE NOR DISAGREE       3         DISAGREE       4         STRONGLY DISAGREE       5		
	DON'T KNOWd  REFUSEDr ===>		
>e601<	These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?		
	YES		
	DON'T KNOWd  REFUSEDr ===> [goto BRFSS10]		
>e611<	Do you now smoke cigarettes every day, some day or not at all?		
	EVERYDAY       1         SOME DAYS       2         NOT AT ALL       3		
	DON'T KNOWd  REFUSEDr ===>		
>BRFSS10<	About how much do you weight without shoes? (BRFSS12.10)		
	INTERVIEWER NOTE: ROUND UP FRATIONS		
	<80-500> POUNDS		
	DON'T KNOWd REFUSEDr ===>		

>BRFSS11<	About how tall are you without shoes? (BRFSS12.11)
	INTERVIEWER NOTE: ROUND DOWN FRATIONS
	<3-7> FEET
	AND/OR
	<1-11> INCHES
	DON'T KNOWd REFUSEDr

# **Consumer Information Seeking**

>CI1< During the past 12 months, did you look for or get information about a **PERSONAL** health concern:

# RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

a.	On the internet YES	
	DON'T KNOW	
b.	From friends or relatives YESNO	
	DON'T KNOWREFUSED	
C.	From TV or radio YESNO	
	DON'T KNOWREFUSED	
d.	From books or magazines YES	
	DON'T KNOWREFUSED	
e.	From newspapers YESNO	
	DON'T KNOWREFUSED	
f.	From somewhere else other than doctor (SPECIFY) Health care professional (NON-PHYSICIAL	
	Health care organization YES NO	
	DON'T KNOWREFUSED	
IF YES TO ANY,	GO TO CI2; ELSE GO TO CI5	

>CI2< about any of the	-	YES TO CI1] Did you later talk with a doctor or other health care professional information you found, or didn't you happen to do this? (Pew, 2006)
		YES
		DON'T KNOWd REFUSEDr
>Cl3<		YES TO CI1] Did any of the health information you found change your overall broach to maintaining your health? (Pew, 2006)
		YES
		DON'T KNOWd REFUSEDr
>Cl4<	-	YES TO CI1] Did any of the health information you found help you to better derstand how to treat an illness or condition?
		YES
		DON'T KNOWd REFUSEDr
>Cl5<		ring the past 12 months, did you look for or get information about a health neern for <b>another adult</b> , such as a friend or family member:
RANDOMIZ	ZE C	ORDER OF a-e AND CODE ALL THAT APPLY
	a.	On the internet YES
		DON'T KNOWd REFUSEDr
	b.	From friends or relatives YES
		DON'T KNOWd REFUSEDr
	C.	From TV or radio YES1

	NO	0
	DON'T KNOW	
d.	From books or magazines YESNO	
	DON'T KNOW	
e.	From newspapers YESNO	
	DON'T KNOW	
f.	From somewhere else other than doctor (SPECIFY) Health care professional (NON-PHYSICIA Health care organization YES	1
	DON'T KNOW	

# **INFORMATION TECHNOLOGY**

>IT1<	Do you ever go on line to use the Internet or World Wide Web? (modified Pew, HINTS)
	YES
	DON'T KNOW d [goto IT3b] REFUSED r [goto IT3b]
>IT2<	In general, how often do you go online- several times a day, about once a day, 3-5 days a week, 1 to 2 days a week, once every few weeks, or less often than that? [modified KFF, PEW 2003]
	SEVERAL TIMES A DAY       1         ABOUT ONCE A DAY       2         3 TO 5 DAYS A WEEK       3         1 TO 2 DAYS A WEEK       4         ONCE EVERY FEW WEEKS       5         LESS OFTEN       6
	DON'T KNOWd REFUSEDr
>IT3<	IF YES TO IT1: Some doctor's offices allow patients to contact them by email or by going to a web site on the Internet. During the past 12 months, have you used email or gone to a web site to contact a doctor or doctor's office about your personal health needs?
	YES
	DON'T KNOW d [goto IT3b] REFUSED r [goto IT3b]
>IT3a<	Did you use e-mail or a web site
ROTATE a-	e and then ask f
	a. To renew a prescription YES1 NO0
	DON'T KNOWd REFUSEDr

	b.	To schedule an appointment YES1 NO0	
		DON'T KNOWd REFUSEDr	
	C.	To discuss a health problem with a physician, nurse or other health care provider YES	
		DON'T KNOWd REFUSEDr	
	d.	To see the results of diagnostic tests or your medical history YES	
		REFUSEDr	
	e.	To get reminders for upcoming appointments YES1 NO0	
		DON'T KNOWd REFUSEDr	
	f.	Anything else [SPECIFY] YES	
		DON'T KNOWd REFUSEDr	
ото cs1]			
T3b.	cor you per	O NOT DISPLAY IF IT3 WAS ASKED] Some doctor's offices allow patients ntact them by email or by going to a web site on the Internet. To the best of ur knowledge, do any of the doctors or doctors' offices you visit for your ersonal health needs allow patients to contact them by e-mail or by going to eb site?	
		YES	
		DON'T KNOWd REFUSEDr	
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CONSUMER : >CS1<	A personal doctor is the health provider you see most often and who knows you best. During the past 12 months did you look for a new personal doctor?
	YES
	DON'T KNOWd [goto test CS9] REFUSEDr [goto test CS9]
>CS2<	Did you find a personal doctor?
	YES
	DON'T KNOWd [goto test CS9] REFUSEDr [goto test CS9]
>CS3<	Which of the following sources did you use in looking for a new personal doctor?
	<ul> <li>A. Recommendation of another doctor or health care provider</li> <li>B. Information from your health insurance plan</li> <li>C. Books, magazines or newspapers</li> <li>D. Friends or relatives</li> <li>E. TV or radio</li> <li>F. The Internet</li> <li>G. Anything else [SPECIFY]</li> </ul>
	(1) YES (0) NO (d) DON'T KNOW (r) REFUSED
IF NO SOURC	CES MENTIONED, GO TO CS8
>CS4<	Did any of the sources you used provide information that compared the cost of care charged by different doctors?
	YES
	DON'T KNOWd [goto CS6] REFUSEDr [goto CS6]

>CS5<	Did you use this information in choosing a personal doctor?
	YES
	DON'T KNOWd REFUSEDr
>CS6<	Did any of the sources you used provide information that compared the quality and performance of different doctors?
	YES
	DON'T KNOWd [goto CS8] REFUSEDr [goto CS8]
>CS7<	Did you use this information in choosing a personal doctor?
	YES
	DON'T KNOWd REFUSEDr
>CS8<	I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing a personal doctor.
	<ul> <li>a. The cost of care</li> <li>b. The recommendation of another doctor</li> <li>c. The reputation of the personal doctor providing the care</li> <li>d. Short wait time for appointments</li> <li>e. Location of the personal doctor's practice</li> <li>f. The doctor is in my health plan's provider network</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) MAJOR	FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED
>testcs9< [if	f CAHPS12=1, GO TO CS9; ELSE GO TO CS20]

>CS9<	months, have you seen only one specialist or more than one specialist?
	ONE
	DON'T KNOWd REFUSEDr
>CS10<	( <b>IF MORE THAN ONE, READ</b> : Please think about the last specialist you saw.) Did you first see this specialist during the last 12 months or did you first see this specialist more than 12 months ago?
	MORE THAN 12 MONTHS AGO1 [goto CS20] LESS THAN 12 MONTHS AGO2
	DON'T KNOWd REFUSEDr
>CS11<	Did your personal doctor refer you to this specialist or did you find this specialist in some other way?
	REFERRED BY DOCTOR
	DON'T KNOWd [goto CS14] REFUSEDr [goto CS14]
IF REFERREI >CS12<	D Did your personal doctor give you a choice of specialists or recommend only one
70012	specialist?
	CHOICE
	DON'T KNOWd REFUSEDr

>CS13<	Besides the referral from your personal doctor, did you use any other sources of information in looking for the specialist?
	YES, USED OTHER SOURCES1 NO, ONLY DOCTOR REFERRAL
	DON'T KNOWd [goto TESTCS19] REFUSEDr [goto TESTCS19]
>CS14<	Did you use any of the following sources in looking for the specialist?
	<ul> <li>a. Recommendation of a doctor or health care provider who is not your personal doctor</li> <li>b. Information from your health insurance plan</li> <li>c. Books, magazines or newspapers</li> <li>d. Friends or relatives</li> <li>e. TV or radio</li> <li>f. The Internet</li> <li>g. Anything else [SPECIFY]</li> </ul>
(1)	YES (0) NO (d) DON'T KNOW (r) REFUSED
IE ANV SO	
II ANT 30	URCES CODED YES, GO TO CS15; ELSE GO TO TESTCS19
>CS15<	URCES CODED YES, GO TO CS15; ELSE GO TO TESTCS19  Did any of the sources you used provide information that compared the cost of care charged by different doctors?
	Did any of the sources you used provide information that compared the cost of
	Did any of the sources you used provide information that compared the cost of care charged by different doctors?  YES
>CS15<	Did any of the sources you used provide information that compared the cost of care charged by different doctors?  YES
>CS15<	Did any of the sources you used provide information that compared the cost of care charged by different doctors?  YES
>CS15<	Did any of the sources you used provide information that compared the cost of care charged by different doctors?  YES

>0317<	and performance of different doctors?
	YES
	DON'T KNOWd [goto test CS19] REFUSEDr [goto test CS19]
>CS18<	Did you use this information in choosing a specialist?
	YES
	DON'T KNOWd REFUSEDr
TESTCS19 IF	CS12=1 OR CS11=2, GO TO CS19;ELSE GO TO CS20
>CS19<	I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this specialist.
	<ul> <li>a. The cost of medical care and treatment</li> <li>b. The recommendation of your personal doctor (SKIP IF NO REFERRAL)</li> <li>c. The reputation of the specialist</li> <li>d. Short wait time for an appointment</li> <li>e. Location of the specialist's practice</li> <li>f. The specialist is in my health plan's provider network</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) MAJOR F	ACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED
>CS20<	In the past 12 months, have you had any type of surgical or non-surgical procedure?
	<b>E:</b> Do not include routine blood work, X-rays, or mammograms. <b>E:</b> By non-surgical procedure, we mean things like a biopsy, colonoscopy, MRI, etc.
	R: IF IN DOUBT, INCLUDE THE PROCEDURE. OUR GOAL IS TO BE AS OSSIBLE, IN DEFINING PROCEDURES TO TEST FOR CONSUMER
onor i mo.	YES
	DON'T KNOWd [goto TESTe12c] REFUSEDr [goto TESTe12c]

>CS21<	last procedure you had. Was the procedure performed in a hospital, a clinic, a doctor's office, or somewhere else?
	HOSPITAL       1         CLINIC       2         DOCTOR'S OFFICE       3         SOMEWHERE ELSE (SPECIFY)       4
	DON'T KNOWd REFUSEDr
>CS22<	Was the first time you had a procedure performed at this INSERT PLACE during the last 12 months or more than 12 months ago?
	MORE THAN 12 MONTHS AGO1 [goto TEST e12c] LESS THAN 12 MONTHS AGO2
	DON'T KNOWd REFUSEDr
>CS23<	Was the INSERT PLACE recommended by the doctor performing the procedure or did you choose the place some other way?
	RECOMMENDED BY DOCTOR1 SOME OTHER WAY2 [goto CS26]
	DON'T KNOWd [goto CS26] REFUSEDr [goto CS26]
IF RECOMME >CS24<	ENDED BY DOCTOR  Did your doctor give you a choice of places to have the procedure or recommend only this one place?
	CHOICE
	DON'T KNOWd REFUSEDr

>CS25<	Besides your doctor's recommendation, did you use any other sources of information in looking for a place to have the procedure?
	YES
	DON'T KNOWd [goto TESTCS31] REFUSEDr [goto TESTCS31]
>CS26<	Which of the following sources did you use in looking for the INSERT PLACE where you had the procedure?
	<ul> <li>a. Recommendation from a doctor or other health care provider other than the one performing the procedure</li> <li>b. Information from your health insurance plan</li> <li>c. Books, magazines or newspapers</li> <li>d. Friends or relatives</li> <li>e. TV or radio</li> <li>f. The Internet</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) YE	S (0) NO (d) DON'T KNOW (r) REFUSED
IF NO SOURC	CES MENTIONED, GO TO TESTCS31
>CS27<	Did any of the sources you used provide information that compared how much different local INSERT PLACES are paid for similar services?
	YES
	DON'T KNOWd [goto CS29] REFUSEDr [goto CS29]
>CS28<	Did you use information from these reports in choosing a place to have the procedure?
	YES
	DON'T KNOWd REFUSEDr

IF RECOMMENDED BY DOCTOR

>CS29<	Did any of the sources you used provide information that compared the quality and performance of local INSERT PLACES?
	YES
	DON'T KNOWd [goto TESTCS31]  REFUSEDr [goto TESTCS31]
>CS30<	Did you use information from these reports in choosing a place to have the procedure?
	YES
	DON'T KNOWd REFUSEDr
TESTCS31 IF	CS24 =1 OR CS23=2, GO TO CS31, ELSE GO TO test e12c
>CS31<	I am going to read several factors that some people consider in choosing a place to have a procedure. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this place to have your procedure.
	<ul> <li>a. The cost of medical care and treatment</li> <li>b. The reputation of the INSERT PLACE</li> <li>c. Your doctor's recommendation</li> <li>d. Short wait time for an appointment</li> <li>e. Location of the INSERT PLACE</li> <li>f. The INSERT PLACE is in my health plan's provider network</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) MAJOR F	ACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

# >test e12c< [IF FAMILY HAS CHILD GOTO k12, ELSE goto test e801]

>k12<	Next, I would like to ask you about satisfaction with your <b>choice</b> of doctors for [fill CHILD'S NAME].
	First primary care doctors, such as pediatricians, family doctors, or general practitioners, who treat a variety of illnesses and give preventive care.
	Are you satisfied or dissatisfied with your <b>choice</b> of primary care doctors for [fill CHILD'S NAME]?
	<b>PROBE:</b> Most people go to a primary care doctor first when they have a sickness or injury they have not had before.
	SATISFIED
	DON'T KNOWd  REFUSEDr ===> [goto k14new]
>k13<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY1 SOMEWHAT2
	DON'T KNOW
>k14new<	During the past 12 months, did you or a doctor think [fill CHILD'S NAME] needed to see a specialist?
	PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.
	YES
	DON'T KNOWd  REFUSEDr ===> [goto test k16l]

>kCAHPS12<	In the last 12 months, did (CHILD'S NAME) see a specialist?
	YES
	DON'T KNOW
>k15<	Are you satisfied or dissatisfied with your <b>choice</b> of specialists for [fill CHILD'S NAME]?
	SATISFIED
	DON'T KNOW
>K15a<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY1 SOMEWHAT2
	DON'T KNOWr REFUSEDr
	[IF CHILD HAD GE ONE PHYSICIAN VISIT(S) IN LAST 12 MONTHS ≤ 96 or 1 ≤ c 32 ≤ 5), goto CAHPS5k; ELSE gotoBRFSS10K]
>CAHPS5k<	In the last 12 months, <u>not</u> counting the times you needed health care right away did you make any appointments for [CHILD'S] health care at a doctor's office or clinic?
	YES
	DON'T KNOWr REFUSEDr ===> [goto BRFSS10K]

>E261R5k<	Thinking of the last time you made an appointment at a doctor's office or clinic for CHILD, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?
	INTERVIEWER: (1) CODE "0" FOR SAME DAY.
	(2) ACCEPT MOST CONVENIENT TIME PERIOD.
	SAME DAY 0
_	_ (0-31) DAYS OR (1-20) WEEKS OR (1-5) MONTHS
	DON'T KNOWd REFUSEDr
>BRFSS10<	About how much does CHILD weight without shoes? (BRFSS12.10)
	INTERVIEWER NOTE: ROUND UP FRATIONS
	<10-300> POUNDS
	DON'T KNOWd REFUSEDr ===>
>BRFSS11<	About how tall is CHILD without shoes? (BRFSS12.11)
	INTERVIEWER NOTE: ROUND DOWN FRATIONS
	<1-7> FEET
	AND/OR
	<1-11> INCHES
	DON'T KNOWd REFUSEDr ===>
>k40<	In general, would you say [fill NAME]'s health is:
	Excellent       1         Very Good       2         Good       3         Fair       4         Poor       5
	DON'T KNOWr REFUSEDr

### **CONSUMER INFORMATOIN SEEKING FOR CHILD**

>CIC1< During the past 12 months, did you (or your husband/wife/partner IF MARRIED) look for or get information about a health concern for CHILD'S NAME?

	ORDER OF a-e AND CODE ALL THAT APPLY On the internet YES	
	DON'T KNOWREFUSED	
b.	From friends or relatives YESNO	
	DON'T KNOWREFUSED	
C.	From TV or radio YES	
	DON'T KNOWREFUSED	
d.	From books or magazines YESNO	
	DON'T KNOWREFUSED	
e.	From newspapers YESNO	
	DON'T KNOWREFUSED	
f.	From somewhere else other than doctor (SPECIFY) Health care professional (NON-PHYSICIA Health care organization	N)
	YES	
IF YES TO ANY	DON'T KNOW REFUSED GO TO CIC2; ELSE GO TO IT4	
" I FO 10 VIAI	00 10 0102, LLUL 00 10 117	

>CIC2<	[IF YES TO ANY RESPONSES IN CIC1] Did you later talk with a doctor or other health care professional about any of the information you found about CHILD'S NAME, or didn't you happen to do this?
	YES
	DON'T KNOWd REFUSEDr
>CIC3<	[IF YES TO ANY RESPONSES IN CIC1] Did any of the health information you found change your overall approach to maintaining CHILD'S NAME health?
	YES
	DON'T KNOWd REFUSEDr
>CIC4<	[IF YES TO ANY RESPONSES IN CIC1] Did any of the health information you found help you to better understand how to treat an illness or condition for CHILD'S NAME?
	YES
	DON'T KNOWd REFUSEDr
INFORMAT	ION TECHNOLOGY FOR CHILD
>IT4<	During the past 12 months, have you used email or gone to a web site to contact a doctor or doctor's office about [INSERT CHILD'S NAME]'s health needs?
	YES
	DON'T KNOW d [goto IT4b] REFUSED r [goto IT4b]

### ROTATE a-e and then ask f

a.	To renew a prescription YES
	DON'T KNOWd REFUSEDr
b.	To schedule an appointment YES
	DON'T KNOWd REFUSEDr
C.	To discuss a health problem with a physician, nurse or other health care provider YES
	DON'T KNOWd REFUSEDr
d.	To see the results of diagnostic tests or [INSERT CHILD NAME]'s medical history YES
	DON'T KNOWd REFUSEDr
e.	To get reminders for upcoming appointments YES
	DON'T KNOWd REFUSEDr
f.	Anything else [SPECIFY] YES
	DON'T KNOWd REFUSEDr

>IT4b<	[DO NOT DISPLAY IF IT4A WAS ASKED] To the best of your knowledge, do any of the doctors or doctors' offices you visit for [INSERT CHILD'S NAME]'s health needs allow patients to contact them by e-mail or by going to a web site?
	YES
	DON'T KNOWd REFUSEDr
>test e801<	[IF THERE ARE OTHER ADULTS (≥ 18) IN FAMILY BESIDES INFORMANT GOTO e80t; ELSE goto f10]
>e80t<	Now, I have one question about the health of ([fill NAME]/other adults in your family). NOTE: SUBSTITUTE "Other adults in your family" IF TWO OR MORE OTHER ADULTS.
>e802<	In general, would you say [fill NAME]'s health is:
	Excellent       1         Very Good       2         Good       3         Fair       4         Poor       5         DON'T KNOW       d         REFUSED       r         ===> [REPEAT FOR EACH ADULT; THEN goto f10]

f. EMPLO	DYMENT (ASKED FOR EACH ADULT 18 YEARS OF AGE AND OLDER)
>f10<	This next series of questions is about jobs and earnings. Answers to these questions are particularly important to our survey because they help explain whether people can afford the health care they need.
	===>
>f101<	(Next), Do(es) [fill NAME] have a business or farm?
	INTERVIEWER: CODE "YES" IF R. SAYS HE/SHE IS SELF-EMPLOYED.
	YES
	DON'T KNOWd REFUSEDr ===>
>f111<	Last week, did [fill NAME] do any work (either) for pay (or profit)? <sup>26</sup>
	INTERVIEWER: CODE "YES" IF R. WAS ON VACATION FROM HIS/HER JOE
	YES
	DON'T KNOWd REFUSEDr ===> [goto NEXT PERSON or g10]
>f121<	Last week did [fill NAME] have more than one job (or business), including part time, evening, or weekend work?
	YES
	DON'T KNOW

Household Survey

<sup>&</sup>lt;sup>26</sup>Include parenthetical phrases if f101=1.

>f131< <b>ONE JOB (F121 = 0):</b> How many hours per week (do you/do(es) [fill I usually work at this job? <sup>27</sup>	
	MORE THAN ONE JOB (F121 ne 0): On (your [fill NAME]'s) main job, that is, the job where (he/she/you) work(s) the most hours, how many hours per week (do you/do(es) [fill NAME]) usually work?
	PROBE: If (you/[fill NAME]) usually works overtime hours include them.
	HOURS WORKED (0-96)
	HOURS VARY97 [goto 13x1]
	DON'T KNOW
	NOTE: Test will verify values less than 20 hours.
>13x1<	(Do you/Does [fill NAME]) usually work more than 35 hours per week or less than 35 hours per week (at this job/at the job where (he/she/you) work(s) the most hours)?
	MORE
	DON'T KNOWr ===>
>testf141<	[IF f121 eq <1> goto f141; ELSE goto f201]
>f141<	How many hours per week (do you/do(es) [fill NAME]) usually work at (his/her/your) other jobs?
	PROBE: If [fill NAME] worked overtime hours include them.
	HOURS WORKED AT OTHER JOBS (0-96)
	HOURS VARY/CAN'T ESTIMATE97
	DON'T KNOW

<sup>&</sup>lt;sup>27</sup>Note shift from last week to usual week for hours and earnings.

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>f201< [On his/her/your) main job], (is/are) [fill NAME/you]employed by a private company, (is/are) (you/he/she) a federal, state, or local government employee, self-employed, or working without pay in a family/business farm?

INTERVIEWER: CODE NOT-FOR-PROFIT/FOUNDATION AS PRIVATE COMPANY.

### NOTE: PARENTHETICAL PHRASE USED IF MORE THAN ONE JOB

PRIVATE COMPANY	1
FEDERAL GOVERNMENT	2
STATE GOVERNMENT	3
LOCAL GOVERNMENT	4
SELF-EMPLOYED	5
FAMILY BUSINESS OR FARM	6
DON'T KNOW	
REFUSED	r
===>	

>f211< [On his/her/your) main job], about how many people are employed at the location where [fill NAME] work(s)?

**PROBES:** (1) How many people work for your employer in the building or buildings in the factory, store, or office complex where you work?

(2)Your best estimate is fine.

ONE	
2-4	2
5-9	3
10-24	4
25-49	5
50-99	6
100-249	7
250-499	8
500-999	9
1000 OR MORE	10
DON'T KNOW	d
REFUSED	
===>	

	EMPLOYEES.
>f221<	[Does (your/his/her) employer/Do)es) fill NAME] operate in more than one locations?
	NOTE: Fill is for self-employed and farmers.
	YES
	DON'T KNOW
>f231<	About how many people are employed by (fill NAME/your employer) at all locations?
PROBE: Your best estimate is fine.	
	ONE       1         2-4       2         5-9       3         10-24       4         25-49       5         50-99       6         100-249       7         250-499       8         500-999       9         1000 OR MORE       10
	DON'T KNOWr REFUSEDr ===>
>f241<	What kind of business or industry is this?
	PROBE: What do they make or do there?
	SPECIFY1
	DON'T KNOWr REFUSEDr

>test f221< [IF f201 eq 2, 3, or 4 goto f241] TEST SKIPS f221 FOR GOVERNMENT

>f251<	Are you a member of either a labor union or an employee association like a union? [SIPP, CNTRC]	
	YES	
	DON'T KNOW	
>f261<	Are you covered by a union or employee association contract? [SIPP, EMPLOC]	
	YES	
	DON'T KNOWd REFUSEDr ===>	
>f301<	For (your/his/her) (main) job, what is the easiest way for you to report (his/her/your) total earnings: hourly, per week, every two weeks, twice a month, monthly, or annually?	
	PROBES: (1) I understand these questions may be sensitive. We are asking them to find out whether people can afford the health care they need.	
	(2) <b>INTERVIEWER:</b> IF R. RESPONDS IN A NON-SPECIFIED PAY PERIOD, CONVERT TO MONTHLY OR ANNUAL.	
	HOURLY	
	===>	

>f321< **Hourly:** What is [fill NAME]'s hourly rate of pay on this job?

**Weekly, Monthly:** What are [fill NAME]'s usual [fill f301 RATE] earnings on this job, before taxes or other deductions?

**Bi-Weekly, Twice Monthly:** What are [fill NAME]'s usual earnings per pay period on this job, before taxes or other deductions?

**Annual:** What is [fill NAME]'s annual salary in this job, before taxes and other deductions?

- **PROBES:** (1) I understand that these questions may be sensitive. We are asking these questions to find out whether people can afford the health care they need.
  - (2) IF RESPONDENT ASKS: Include overtime pay, tips, or commissions that you usually receive on this job.

\$    .   H (3.00 to 300.00)	OURLY
\$ <u>  _ </u> ,  . (20-500,000)	_  OTHER PAY PERIODS
DON'T KNOW REFUSED ===> [goto test f341]	

>f331< Which of the following ranges is closest to ([fill NAME's]/your) annual salary, before taxes and other deductions? -- less than \$10,000, \$10,000 to \$14,000, \$14,000 to \$20,000, \$20,000 to \$30,000, or more than \$30,000?

#### >test f341< [TEST FOR OUTLIERS:]

HOURLY: LE 5.00; GE 100.00
WEEKLY: LE 50; GE 5000.00
BI-WEEKLY: LE 100; GE 10,000
TWICE MONTHLY: LE 100; GE 20,000
MONTHLY: LE 200; GE 20,000]
ANNUALLY: LE 3,000; GE 200,000]

>f341< I recorded that ([fill NAME's]/your) usual earnings on this job are		
	\$[INSERT f321] per [INSERT f301]. Is that correct?	
	YES	
>test f401<	[IF PERSON IS POLICY HOLDER FOR EMPLOYER-BASED PLAN [PERSON LISTED IN b231 AND b251 = 1] AND HAS MORE THAN ONE JOB [f121=1], goto f401; ELSE goto test f50]	
>f401<	Is [fill PERSON NAME]'s health insurance with [fill INSURANCE PLAN NAME] from (his/her/your) main job or business?	
	YES	
	DON'T KNOWd  REFUSEDr  ===> goto next person or g10	
>test f50<	[IF PERSON IS NOT SELF-EMPLOYED (f201 = 1, 2, 3 or 4) AND IS NOT A POLICY HOLDER FOR AN EMPLOYER/UNION BASED PLAN (PERSON NOT LISTED IN b231, OR IF LISTED, b251 □ 1) AND IS LT 65 YEARS OLD, goto f501; ELSE goto NEXT PERSON OR g10] <sup>28</sup> The questions for workers who decline own employers's coverage are <b>not</b> asked of policy holders.	
>f501< Does (your/[fill NAME]'s) employer or union offer a health insurance plan of its employees?		
	of its employees?	
	of its employees?  INTERVIEWER: THIS QUESTION APPLIED TO [fill NAME's] LOCATION.	
	INTERVIEWER: THIS QUESTION APPLIED TO [fill NAME's] LOCATION.  YES	

<sup>&</sup>lt;sup>28</sup>Skipped self-employed. Household Survey

>f5011<	Is the health insurance plan offered by [fill NAME'S] employer or union?
	EMPLOYER
>f511<	(Are you/Is [fill NAME]) eligible to participate in (his/her/your) employer's health insurance plan?
	YES
	DON'T KNOWd [goto test f611]  REFUSEDr [goto test f611]  ===>
>test f521<	[IF PERSON HAS INSURANCE COVERAGE UNDER AN EMPLOYER/UNION BASED PLAN (NAMED UNDER BIA OR BIC), goto f541; ELSE goto f521].
>F521<	(Are you/Is [fill NAME]) not participating in (his/her/your) employer's health insurance plan because the plan costs too much, because (he/she/you) do(es) not need health insurance, or for some other reason? (CODE MAIN REASON.)
	COSTS TOO MUCH
	DON'T KNOWd  REFUSEDr ===> [goto f541]
>f531<	(Are you/Is [fill NAME]) ineligible because (you/he/she) (have/has) not worked long enough, because (you/he/she) (don't/doesn't) work enough hours, because (you/he/she) (are/is) on-call, because of medical problems, or for some other reason? [CODE ONLY ONE]
	HAVEN'T WORKED LONG ENOUGH
	DON'T KNOWd  REFUSEDr ===>

>f541<	Does (your/[fill NAME]'s) employer offer only one health insurance plan or more than one health insurance plan to its employees?		
	ONE PLAN	1	
	MORE THAN ONE PLAN	2	
	DON'T KNOW	d	
	REFUSED	r	
	===>		

[goto NEXT PERSON or g10]

#### G. FAMILY INCOME

>g10<

The next questions are about income that (your family [insert names if multiple family household]) received during (2006). During (2006), what was your family's total income from all sources, before taxes and other deductions?

NOTE: CHANGE IN YEAR.

### **PROBES:**

- (1) We are asking these questions to find out whether people can afford the health care they need.
- (2) Total income includes wages and salaries from jobs, net income from farms or businesses, interest or dividends, pensions or social security, income from rental property, estates, or trusts, public assistance or welfare, social security, child support, and other sources.
- (3) Your best estimate would be fine.
- (4) Include the (2006) income of all current family members, (including active military), even if you weren't living together then.

NONE	0
\$ <u>        ,       </u>	<u>  </u>
\$1,000,000 OR MORE	7
DON'T KNOW REFUSED ===> [goto test g20]	d [goto g11] r

>g11<	Which of the following income ranges is closest to your family's (2006) total income from all sources?
	PROBE: Your best estimate is fine.
	Less than \$5,000       1         \$5,000 to less than \$10,000       2         \$10,000 to less than \$20,000       3         \$20,000 to less than \$30,000       4         \$30,000 to less than \$40,000       5         \$40,000 to less than \$50,000       6         \$50,000 to less than \$100,000       7         Over \$100,000       8
	DON'T KNOWd REFUSEDr ===>
>test g20<	[REPEAT g201-g311 FOR EACH PERSON; HOWEVER, SKIP FOR INFORMANT'S OWN CHILD OR GRANDCHILD.]
>g201<	(Do you/Does [fill NAME] consider (yourself/himself/herself) to be of Hispanic origin?
	PROBE FOR REFUSALS: I understand that these questions may be sensitive We are asking these questions to find out whether people can afford the health care they need.
	YES
	DON'T KNOWd  REFUSEDr ===> go to g22n1
>g201ORIG<	What is (your/his/her) origin or descent?
INTERVI	EWER: CODE ALL THAT APPLY
	Mexican       1         Puerto Rican       2         Cuban       3         Dominican       4         Salvadoran       5         Other Central American       6         Other South American       7         Or some other area [SPECIFY]       8
	DON'T KNOWd REFUSEDr
II 1 11 C	A 124 Bound Fire (2007) B 1 1

>g22n1< I'm going to read you a list of five race categories. Please choose one or more races that (you/he/she) consider(s) (yourself/himself/herself) to be.

INTERVIEWER: (1) READ ALL CATEGORIES. CODE UNLISTED, RESPONDENT-OFFERED CATEGORIES IN "OTHER"

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand different health care problems and needs people have.

PROBE IF R ANSWERS HISPANIC OR LATINO: Would that be white (Hispanic/latino) black (Hispanic/latino) or something else?

INTERVIEWER: CODE ALL RACES

	White
	DON'T KNOW
>g301<	(Are you/Is he/Is she/Is NAME) a citizen of the United States?
	YES
	DON'T KNOWd  REFUSEDr ===>goto g321
>g311<	(Were you/Was he/Was she/Was NAME) born a citizen of the United States or did you become a citizen of the US through naturalization?
	BORN[goto NEXT PERSON OR S9] NATURALIZED2
	DON'T KNOW

>y321<	when did (you/NAME) come to live in the Officed States?			
	[CODE YEAR OR NUMBER OF YEARS AGO] PROGRAMMER: CHECK THAT YEAR OR NUMBER OF YEARS AGO IS NOT BEFORE BIRTH			
	_ _ _  YEAR			
	NUMBER OF YEARS AGO (0-AGE)			
	DON'T KNOWd REFUSEDr ===>			
>S9<	Were either or both of your parents born outside the 50 states (or the District of Columbia)?			
	No, both my parents were born in the 50 states			
	DON'T KNOWd REFUSEDr			
>S9a<	Were either or both of [SPOUSE/PARTNER]'s parents born outside the 50 states (or the District of Columbia)?			
	No, both [SPOUSE]'s parents were born in the 50 states 0 Yes, one [SPOUSE]'s parents was born outside the 50 states 1 Yes, both [SPOUSE]'s parents were born outside the 50 states2			
	DON'T KNOWd REFUSEDr			
>test g23<	[IF FAMILY HAS MORE THAN ONE ADULT, goto NEXT PERSON OR g23; ELSE goto test h10]			
>g23<	INTERVIEWER: THERE WILL BE A SELF RESPONSE MODULE FOR THIS CASE			
	<g>CONTINUE</g>			

#### h. CLOSING (FIU)

# >test h10< [IF DID NOT RECEIVE PRE-PAYMENT, goto h10; IF RECEIVED PRE-PAYMENT AND REINTERVIEW, goto h20; ELSE, goto h30]

>h10< As a token of our appreciation for your help, we would like to send you a check for (\$20). Could you please give me your full name and address?

**PROBE:** Your name and address are confidential and will only be used if we call you for another interview.

**READ AFTER NAME AND ADDRESS OBTAINED:** Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

YES	
<enter first="" name=""> <enter last="" name=""> <enter address="" street=""> <enter city="" state=""> <enter code="" zip=""></enter></enter></enter></enter></enter>	
DON'T KNOW REFUSED	

>h30< Not counting any cellular telephones, are there any other telephone numbers in this household besides [number] that people receive calls on?

**PROBE:** We need this information so that households are correctly represented in our sample.

**PROBE:** Please exclude telephone lines used only for computer modems or faxes.

IF YES: How many additional phone numbers do you have?

0	0 [goto h32]
OTHER TELEPHONE NUMBERS (1-4)	
REFUSEDr [got	to end]

>h31<	Is this line used for business purposes only?
	Home use
>h32<	During the past 12 months, was there any time when you did not have a working telephone in your household for two weeks or more?
	YES
	DON'T KNOWd REFUSEDr ===> [goto end]
>h33<	For how many of the past 12 months did you not have a working telephone?
	MONTHS (0-12)
	DON'T KNOWd [goto end] REFUSEDr [goto end] ===>
>h34<	What was the main reason you did not have telephone services? [Keeter, POQ, Summer 1995, P. 203]
	COST
	DON'T KNOWd REFUSEDr ===>

## >test< [IF NO SELF RESPONSE MODULE OR SECONDARY FAMILY, goto fin; ELSE goto next\_person]

>next\_person<

I would also would like to speak with [fill NAME]. I need to ask (him/her/them) questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$20 for helping us with the survey. Can I speak with READ NAMES now?

#	NAME	RELATION	FAM	STATUS	SEX AGE

[fill NAME][RELATIONSHIP] [Sex][AGE] 1 [fill NAME][RELATIONSHIP] [Sex][AGE] 2 [fill NAME][RELATIONSHIP][Sex][AGE] 3 [fill NAME][RELATIONSHIP][Sex][AGE] 4 [fill NAME][RELATIONSHIP][Sex][AGE] 5 [fill NAME][RELATIONSHIP][Sex][AGE] 6 [fill NAME][RELATIONSHIP][Sex][AGE] 7 [fill NAME][RELATIONSHIP][Sex][AGE] 8

IF NECESSARY ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

#### SPEAKING TO RESPONDENT - ENTER NUMBER

## >test< IF SELF RESPONSE MODULE GOTO INTRODUCTION FOR SELF-RESPONSE IF SECONDARY FAMILY GOTO INTRODUCTION FOR SECONDARY FAMILY

>next person<

[SELF RESPONSE MODULE I would also like to speak with [fill NAME]. I need to ask (him/her) questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$20 for helping us with the survey. Can I speak with READ NAMES now?

IF NECESSARY ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

SPEAKING TO RESPONDENT - ENTER NUMBER1

CALLBACK	c <sup>29</sup>
LANGUAGE PROBLE	
REFUSED	r
SUPERVISOR REVIEW	
===>	

<fin> Thanks you again for your time and interest in this important survey.

This concludes the survey unless you have a brief comment you would like to add.

comments [specify]	C
interview complete	9
===>	

<sup>&</sup>lt;sup>29</sup> THESE QUESTION SEQUENCES ARE ONLY SHOWN IN THE CATI PROGRAM.

## **SELF RESPONSE MODULE**

>slf1<	My name is I am calling about the telephone survey that [fill NAME] participated in on [fill DATE OF INTERVIEW]. Most of the interview has already been completed by [fill NAME] I have a few questions about your health and opinions, that will only take about 10 minutes. As a token of our appreciation, we will send you insert amount for helping us with the study
	<b>IF NECESSARY READ PROBE:</b> We are doing this study to see how changes in health care are affecting people. We need to interview you as well as [fill NAME] because some of the questions ask for people's opinions about their own health and health care.
	SPONSOR: The project is sponsored by The Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care.
	ENTER STATUS FOR [fill NAME]
	WILL COMPLETE SELF RESPONSE SECTION1
	RESPONDENT WILL ACT AS PROXY FOR [fill NAME]  [fill NAME] IS CHRONICALLY ILL
	Ifill NAMEI WON'T DO SELF-RESPONSE SECTION 5

===>

>b93\_sr2< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.<sup>30</sup>

PROBE: CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

STRONGLY AGREE	1
SOMEWHAT AGREE	2
NEITHER AGREE NOR DISAGREE	3
SOMEWHAT DISAGREE	4
STRONGLY DISAGREE	5
NOT APPLICABLE	7
DON'T KNOW	d
REFUSED	r
===>	

>c81\_sr2< Next, during the past 12 months, was there any time when you didn't get the medical care you needed?

INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.

YES	1
NO	
DON'T KNOW	d
REFUSED	r
===>	

>c82\_sr2< And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?

YES	1
NO	0
	•
DON'T KNOW	d
REFUSED	
===>	

>test c83\_sr2< [IF c81\_sr2 EQ <1> OR <d> OR c82\_sr2 EQ <1> OR <d> goto c83sr1; ELSE goto c84\_sr2]

<sup>&</sup>lt;sup>30</sup>Source: Royal, Kenneth, et al., The Gallup Arizona Health Care Poll. P.18, The Gallup Organization, 1995. Distributions by coverage available.

>c83sr1< Did you not get the medical care you needed or have delays in getting the medical care you needed for any of the following reasons?

#### CODE ALL THAT APPLY

Worry about the cost	1
The doctor or hospital wouldn't accept your	
health insurance	2
Your health plan wouldn't pay for the treatment	3
You couldn't get an appointment soon enough	4
You couldn't get there when the doctor's office or	
clinic was open	5
It takes too long to get to the doctor's office or clinic	
from your house or work	6
You couldn't get through on the telephone	7
You were too busy with work or other commitments	
to take the time	
You didn't think the problem was serious enough	9
Or any other reason I haven't	
mentioned [SPECIFY]	
NONE CITED/NO OTHER RESPONSES	
NEED TO DELETE A RESPONSE	X
DON'T KNOW	
REFUSED	r
===>	

>c84\_sr2< During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?

YES	
NO	0
DON'T KNOW	d
REFUSED	r

>e12_sr2<	Now I would like to ask you about satisfaction with your <b>choice</b> of doctors.
	First primary care doctors, such as family doctors, [pediatricians,] <sup>31</sup> or general practitioners, who treat a variety of illnesses and give preventive care.
	Are you satisfied or dissatisfied with the <b>choice</b> you personally have for primary care doctors?
	<b>PROBE:</b> Most people go to a primary care doctor first when they have a sickness or injury they have not had before.
	SATISFIED
	DON'T KNOWd  REFUSEDr ===> [goto e14_sr2]
>e13_sr2<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY1 SOMEWHAT2
	DON'T KNOWd REFUSEDr ===>
>e14_sr2< In	the past 12 months, did you or a doctor think you needed to see a specialist?
	PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.
	YES
	DON'T KNOW

<sup>&</sup>lt;sup>31</sup>Exclude for adults.

>cahps121<	In the last 12 months, did (you/NAME) see a specialist?
	YES
	DON'T KNOWd  REFUSEDr ===>
>e15_sr2<	Are you satisfied or dissatisfied with the <b>choice</b> you have for specialists?
	SATISFIED
	DON'T KNOWd  REFUSEDr ===> [goto test e1512_sr2]
>E15a_sr2<	Would that be very (dis)satisfied or somewhat (dis)satisfied?
	VERY
	DON'T KNOWd  REFUSEDr ===>
>test e1512_	sr2 <if and="" cahps121="1," d121spec2="1" e1512_sr2;else="" e15a_sr2<="" go="" td="" test="" to=""></if>
>e1512_sr2<	In the last 12 months, how often did your usual doctor seem informed and up-to-date about the care you got from specialists? (Source: CAHPS)
	NEVER       1         ALMOST NEVER       2         SOMETIMES       3         USUALLY       4         ALMOST ALWAYS       5         ALWAYS       6         NO USUAL DOCTOR       7 [goto teste15a_sr2]         MY SPECIALIST IS MY USUAL DOCTOR       8 [goto teste15a_sr2]
	DON'T KNOWd REFUSEDr [goto teste15a_sr2]

>e1513_sr2<	After going to the specialist, did your usual doctor talk with you about what happened at the visit (with the specialist?). (Source: Starfield, Primary Care Assessment Tool)
	YES
	DON'T KNOWd REFUSEDr
>test e15a_sı	c2< c312 or c322 ge 1 GO TO CAHPSLANG_sr2; else, go to test e16_sr2
>CAHPSLAN	G_sr2< In the last 12 months, how often did you have a hard time speaking with or understanding a doctor or other health providers because you spoke different languages? Never, sometimes, usually or always?
	NEVER       1         SOMETIMES       2         USUALLY       3         ALWAYS       4
	DON'T KNOWd REFUSEDr ===>
>test e16_sr2	!< [IF PERSON HAS HAD PHYSICIAN VISITS IN LAST 12 MONTHS (1 ≤ c31_sr2 ≤ 96 OR 1 ≤ c32_sr2 ≤ 5), goto CAHPS5_sr2; ELSE goto test e40_sr2]
>CAHPS5_sr2	2< In the last 12 months, not counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic?
	YES
	DON'T KNOWr REFUSEDr ===> [goto e40_sr2]

>E261R5\_sr2< Thinking of the last time you made an appointment at a doctor's office or clinic, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor? **INTERVIEWER:** (1) CODE "0" FOR SAME DAY. (2) ACCEPT MOST CONVENIENT TIME PERIOD. \_ (0-31) DAYS OR \_\_\_\_\_ (1-20) WEEKS OR \_\_\_\_\_ (1-5) MONTHS DON'T KNOW ......d REFUSED .....r >e40\_sr2< Now, I have a few questions about your health. In general, would you say your health is: Excellent......1 Verv Good ......2 Good......3 Fair or ......4 DON'T KNOW ......d REFUSED .....r >n1a< [IF FEMALE AND AGE 50 OR UNDER] The next questions are about your health during the past two years. During the past two years, have you had a baby? YES ......1 NO ......0 DON'T KNOW ......d REFUSED .....r [IF FEMALE] During the past two years, have you seen a doctor or health care >nn2c\_sr2< professional for abnormal uterine bleeding? YES ......1 NO ......0

DON'T KNOW ......d REFUSED ......r

>nn3_sr2@b<	Has a doctor or health professional ever told you th blood sugar?	nat you had diabetes or high
	YES	
	DON'T KNOWREFUSED	
>nn3_sr2@bb	IF YES: During the past two years, have you seer professional for diabetes or high blood sugar?	n a doctor or other health care
	YES	
	DON'T KNOWREFUSED	
>nn3_sr2@c<	Has a doctor or health professional ever told you th	nat you had arthritis?
	YES	
	DON'T KNOWREFUSED	
>nn3_sr2@cc<	IF YES: During the past two years, have you seen professional for arthritis?	a doctor or other health care
	YES	
	DON'T KNOWREFUSED	
>nn3_sr2@d<	Has a doctor or health professional ever told you th	nat you had asthma?
	YESNO	
	DON'T KNOWREFUSED	

professional for asthma?
YES
DON'T KNOWr
>nn3_sr2@e< Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?
YES
DON'T KNOWr
>nn3_sr2@ee< <b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?
YES
DON'T KNOWr
>nn3_sr2@g <has a="" blood="" doctor="" ever="" had="" health="" high="" hypertension="" or="" pressure?<="" professional="" td="" that="" told="" you=""></has>
YES
DON'T KNOWr
>nn3_sr2@gg< <b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure?
YES
DON'T KNOWd REFUSEDr

>nn3\_sr2@dd<**IF YES:** During the past two years, have you seen a doctor or other health care

>nn3_sr2@i<	Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?
	YES
	DON'T KNOWd REFUSEDr
>nn3_sr2@ii<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health care professional for coronary heart disease?
	YES
	DON'T KNOWd REFUSEDr
>nn5_sr2@c<	Has a doctor or health professional ever told you that you had skin cancer?
	YES
	DON'T KNOWd REFUSEDr
>nn5_sr2@cc<	IF YES: During the past two years, have you seen a doctor or other health care professional for skin cancer?
	YES
	DON'T KNOWd REFUSEDr
>nn5_sr2@h<	Has a doctor or health professional ever told you that you had cancer other than skin cancer?
	YES
	DON'T KNOWd REFUSEDr

>nn5_sr2@hh	IF YES: During the past two years, have you seen a doctor or other health care professional for that cancer?
	YES
	DON'T KNOWd REFUSEDr
>n5f4_sr2<	IF FEMALE or MALE AGE 50 OR UNDER GOTO nn6_sr2e. IF MALE AGE OVER 50: Has a doctor or health professional ever told you that you had benign prostate disease or a large prostate that was not prostate cancer?
	YES
	DON'T KNOWd REFUSEDr
>n5f4ee_sr2<	<b>IF YES:</b> During the past two years, have you seen a doctor or other health professional for benign prostate disease?
>nn6_sr2@e<	Has a doctor or health professional ever told you that you had depression?
	YES
	DON'T KNOWd REFUSEDr
>nn6_sr2@ee-	< IF YES: During the past two years, have you seen a doctor or other health care professional for depression?
	YES
	DON'T KNOWd REFUSEDr
>nn7_sr2<	During the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?
	YES
	DON'T KNOWd REFUSED r

## **QUALITY OF CARE**

>testccq_sr2<	e [if seen a doctor during the past two years for abrodiabetes, arthritis, asthma, COPD, hypertension, benign prostate disease, or depression, go to CCCE2_sr2	CHD, skin cancer, other cancer,
>CCQ1_sr2<	Do you see only one doctor or more than one doc PATIENT'S CHRONIC DISEASE(S)]?	ctor for treatment of [INSERT
	ONE MORE THAN ONE	1[goto CCQ3_sr2] 2[goto CCQ2_sr2]
	DON'T KNOWd[g REFUSEDr[g	
	Which of the following statements best describes he you see for [INSERT PATIENT'S CHRONIC CONIcare? By care coordination, we mean how well do manage your health care.	DITION(S)] coordinate your
	My care is not coordinated at all	2 3
	DON'T KNOWREFUSED	
>CCQ 3_sr2<	Next, I will read some statements about experience providers. These are the doctors, nurses, therapis help you manage your condition(s). Please tell me agree, disagree or strongly disagree with each state condition and its treatment with your health care provided the statement with your health with your health care provided the statement with your health with your health your health with your health yo	sts, pharmacists and others who e whether you strongly agree, atement. When discussing your
INTERVIEWE "HE" OR "SHE		ER, YOU CAN SUBSTITUTE
	A. Explain things in a way you could understand Strongly agree	2 3 4
	DON'T KNOWREFUSED	

B.	Spend enough time with you Strongly agree
	DON'T KNOWd REFUSEDr
C.	Treat you with respect and dignity Strongly agree
D.	REFUSED
	DON'T KNOWd REFUSEDr
E.	Help you set specific goals for exercise Strongly agree
F.	REFUSED
	REFUSEDr

>CCQ4_sr2<	Do you strongly agree, agree, disagree or strongly disagree with the following statement. When I am prescribed a new medication, I read about the possible side effects. (HP.QBB11.NC)  Strongly agree
>CCQ5_sr2<	In the last 6 months, did you receive a phone call from any of your health care providers to see how you were doing without you calling them first? By health care provider we mean doctor, nurse, therapist, pharmacist and others who help you manage your condition. (ICICE.DIAF.29.MC)
	YES1
	NO0
	DON'T KNOWd REFUSEDr
NOTE: CON	TINUE WITH CONSUMER ENGAGEMENT QUESTIONS (CE1) FOR CHRONIC CONDITION SUB-SAMPLE
CONSUMER	ENGAGEMENT
>CE1_sr2<	Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with each statement as it applies to you personally. Your answers should be what is true for you. If the statement does not apply to you,
	just let me know and we will move on to the next one.
RANDOMIZE	

	DON'T KNOWd REFUSEDr
2.	When all is said and done, I am the person who is responsible for managing my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
3.	I know what each of my prescribed medications does.  Strongly agree
	DON'T KNOWd REFUSEDr
4.	I am confident that I can follow through on medical treatments I need to do at home.  Strongly agree
	DON'T KNOWd REFUSEDr
5.	I am confident I can tell my health care provider concerns I have even when he or she does not ask.  Strongly agree
	DON'T KNOWd REFUSEDr
6.	I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.  Strongly agree

	Strongly disagree4  Not applicable [do not read]5
	DON'T KNOWd REFUSEDr
7.	I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
8.	I understand the nature and causes of my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
9.	I know the different medical treatment options available for my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
10.	I know how to prevent further problems with my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr

	11. I have been able to maintain the lifestyle changes for my health that I have made. Strongly agree
	Strongly disagree4 Not applicable [do not read]5
	DON'T KNOWr
	12. I am confident I can figure out solutions when new situations or problems arise with my health condition(s).  Strongly agree
	DON'T KNOWd REFUSEDr
	13. I am confident that I can maintain lifestyle changes like diet and exercise even during times of stress.  Strongly agree
	DON'T KNOWd REFUSEDr
****GO TO e	52_sr2***
NON-CHRON	NIC CONDITION SAMPLE
>CE2_sr2<	Next, I will read some statements that people sometimes make when they talk about their health. Please tell me whether you Strongly agree, agree, disagree, or strongly disagree with each statement as it applies to you personally. Your

**RANDOMIZE** 

answers should be what is true for you. If the statement does not apply to you,

just let me know and we will move on to the next one.

	Agree
	DON'T KNOWd REFUSEDr
2.	Taking an active role in my own health care is the most important factor in determining my health and ability to function.  Strongly agree
	DON'T KNOWd REFUSEDr
3.	I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health.  Strongly agree
	DON'T KNOWd REFUSEDr
4.	I know what each of my prescribed medications does.  Strongly agree
	DON'T KNOWd REFUSEDr
5.	I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.  Strongly agree
	REFUSEDr

6.	I am confident that I can tell a doctor concerns I have, even when he or she does not ask.  Strongly agree
	DON'T KNOWd REFUSEDr
7.	I am confident that I can follow through on medical treatments I may need to do at home.  Strongly agree
8.	I understand the nature and causes of my health problems.  Strongly agree
9.	I know the different medical treatment options available for my health conditions.  Strongly agree
10.	I have been able to maintain the lifestyle changes for my health that I have made.  Strongly agree

	Agree Disagree Strongly disagree.	vent problems with r	2 3 4	
	arise with my heal Strongly agree Agree Disagree Strongly disagree. Not applicable [do		2 3 4 5	
	even during times Strongly agree Agree Disagree Strongly disagree.		2 3 4	
			-	
**** CONTINU	JE WITH e52_sr2***			
>e52_sr2<	•		v agree, agree, disagree, or strongly m more likely to take risks than the	
	INTERVIEWER: (1)	NEITHER AGREE IS CODED IF OFF	NOR DISAGREE IS NOT READ, BUERED	JT
	(2)	PROBE BY ASKIN OR: Whatever you	IG: In general, u think of as risks	
		EE		
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	NEITHER AGREE NOR DISAGREE3 DISAGREE4 STRONGLY DISAGREE5
	DON'T KNOW
>e60_sr2<	These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?
	YES1[goto e61_sr2] NO0
	DON'T KNOWd  REFUSEDr ===> [goto BRFSS10_sr2]
>e61_sr2<	Do you now smoke cigarettes every day, some days or not at all?
	EVERYDAY       1         SOME DAYS       2         NOT AT ALL       3
	DON'T KNOWr REFUSEDr
>BRFSS10_sr	2< About how much do you weight without shoes? (BRFSS12.10)
	INTERVIEWER NOTE: ROUND UP FRATIONS
	<80-500> POUNDS
	DON'T KNOWr REFUSEDr
>BRFSS11_sr	2< About how tall are you without shoes? (BRFSS12.11)
	INTERVIEWER NOTE: ROUND DOWN FRATIONS
	<3-7> FEET
	AND/OR
	<1-11> INCHES

DON'T KNOW	 d
REFUSED	

### **Consumer Information Seeking**

>CI1\_sr2< During the past 12 months, did you look for or get information about a **PERSONAL** health concern: (Source: RAND CA Survey)

## RANDOMIZE ORDER OF a-e AND CODE ALL THAT APPLY

a.	On the internet YESNO	
	DON'T KNOWREFUSED	
b.	From friends or relatives YESNO	
	DON'T KNOWREFUSED	
C.	From TV or radio YESNO	
	DON'T KNOWREFUSED	
d.	From books or magazines YESNO	
	DON'T KNOWREFUSED	
e.	From newspapers YES NO	
	DON'T KNOWREFUSED	
f.	From somewhere else other than doctor (SPECIFY) Health care professional (NON-PHYSICIA Health care organization YES	-

		NO0
		DON'T KNOWd REFUSEDr
IF YES TO AN	NY,	GO TO Cl2_sr2; ELSE GO TO Cl5_sr2
>Cl2_sr2<	pro	YES TO CI1_sr2] Did you later talk with a doctor or other health care fessional about any of the information you found, or didn't you happen to do ? (Source: Pew 2006)
		YES
		DON'T KNOWd REFUSEDr
		S TO CI1_sr2] Did any of the health information you found change your overall roach to maintaining your health? (Source: modified, Pew, 2006) YES
		DON'T KNOWd REFUSEDr
>CI4_sr2<		YES TO CI1_sr2] Did any of the health information you found help you to ter understand how to treat an illness or condition? YES
		DON'T KNOWd REFUSEDr
>Cl5_sr2<		ring the past 12 months, did you look for or get information about a health ocern for <b>another adult</b> , such as a friend or family member:
RANDOMIZ	ZE C	ORDER OF a-e AND CODE ALL THAT APPLY
	a.	On the internet YES
		DON'T KNOWd REFUSEDr
	b.	From friends or relatives YES
		DON'T KNOWd

		REFUSE	)		r	
	C.		or radio			
			NOW			
	d.	YES	ks or magazines			
			NOW			
	e.		spapers			
			NOW			
	f.	YES	ewhere else othe Health care pro Health care org	fessional (NON anization	i-PHYSICÍAN) 1	
			NOW D			
INFORMA	ATIO	N TECHNO	DLOGY			
>IT1_sr2<	Do	you ever g	go on line to use t	the Internet or	World Wide Web?	
					1[goto IT2_sr2] 0[goto IT3b_sr2]	
					d [goto IT3b_sr2] r [goto IT3b_sr2]	
>IT2_sr2<	5 0	days a weel	, ,	eek, once eve	ral times a day, about once a c ry few weeks, or less often tha	•
			TIMES A DAY			
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>IT3_sr2<	by	3 TO 5 DAYS A WEEK
		rsonal health needs?
		YES       1[goto IT3a_sr2]         NO       0[goto IT3b_sr2]         NEVER SEE DOCTORS       2[goto IT3b_sr2]
		DON'T KNOW d [goto IT3b_sr2] REFUSED r [goto IT3b_sr2]
>IT3a_sr2<	Dio	d you use e-mail or a web site
ROTATE a-e	and	I then ask f
	a.	To renew a prescription YES1 NO0
		DON'T KNOWd REFUSEDr
	b.	To schedule an appointment YES1 NO0
		DON'T KNOWd REFUSEDr
	C.	To discuss a health problem with a physician, nurse or other health care provider YES
		DON'T KNOWd REFUSEDr
	d.	To see the results of diagnostic tests or [INSERT CHILD NAME]'s medical history YES

		DON'T KNOWd REFUSEDr
	e.	To get reminders for upcoming appointments YES
		DON'T KNOWd REFUSEDr
	f.	Anything else [SPECIFY] YES
		DON'T KNOW
contact them by email or by going to a web site on the Internet your knowledge, do any of the doctors or doctors' offices you		O NOT DISPLAY IF IT3 WAS ASKED] Some doctor's offices allow patients to ntact them by email or by going to a web site on the Internet. To the best of ur knowledge, do any of the doctors or doctors' offices you visit for your resonal health needs allow patients to contact them by e-mail or by going to a b site?
		YES
		DON'T KNOWd REFUSEDr
CONSUMER	SHO	OPPING
>CS1_sr2<		personal doctor is the health provider you see most often and who knows you st. During the past 12 months did you look for a new personal doctor?
		YES
		DON'T KNOW d [goto testcs9_sr2] REFUSED r [goto testcs9_sr2]
>CS2_sr2<	Dic	you find a personal doctor?
		YES
		DON'T KNOW d [goto testcs9_sr2] REFUSED r [goto testcs9_sr2]

>CS3_sr2<	Which of the following sources did you use in looking for a new personal doctor?						
	<ul> <li>A. Recommendation of another doctor or health care provider</li> <li>B. Information from your health insurance plan</li> <li>C. Books, magazines or newspapers</li> <li>D. Friends or relatives</li> <li>E. TV or radio</li> <li>F. The Internet</li> <li>G. Anything else [SPECIFY]</li> </ul>						
	(1) YES (0) NO (d) DON'T KNOW (r) REFUSED						
IF NO SOUR	CES MENTIONED, GO TO CS8_sr2						
>CS4_sr2<	Did any of the sources you used provide information that compared the cost care charged by different doctors?	of					
	YES	·2]					
	DON'T KNOWd [goto CS6_sr2] REFUSEDr [goto CS6_sr2]						
>CS5_sr2<	Did you use this information in choosing a personal doctor?						
	YES						
	DON'T KNOWd REFUSEDr						
>CS6_sr2<	Did any of the sources you used provide information that compared the quali and performance of different doctors?	ty					
	YES	2]					
	DON'T KNOWd [goto CS8_sr2] REFUSEDr [goto CS8_sr2]						
>CS7_sr2<	Did you use this information in choosing a personal doctor?						
	YES						

	DON'T KNOWd REFUSEDr
>CS8_sr2<	I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing a personal doctor.
	<ul> <li>a. The cost of care</li> <li>b. The recommendation of another doctor</li> <li>c. The reputation of the personal doctor providing the care</li> <li>d. Short wait time for appointments</li> <li>e. Location of the personal doctor's practice</li> <li>f. The doctor is in my health plan's provider network</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) MAJOR F	ACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED
>testcs9_sr2	< [if CAHPS121=1, GO TO CS9_sr2; ELSE GO TO CS20_sr2]
>CS9_sr2<	You mentioned earlier that you have seen a specialist. During the past 12 months, have you seen only one specialist or more than one specialist?
	ONE
	DON'T KNOWd REFUSEDr
>CS10_sr2<	(IF MORE THAN ONE, READ: Please think about the last specialist you saw.) Did you first see this specialist during the last 12 months or did you first see this specialist more than 12 months ago?
	MORE THAN 12 MONTHS AGO1 [goto CS20_sr2] LESS THAN 12 MONTHS AGO2
	DON'T KNOWd REFUSEDr
>CS11_sr2<	Did your personal doctor refer you to this specialist or did you find this specialist in some other way?
	REFERRED BY DOCTOR1 SOME OTHER WAY2 [goto CS14_sr2]
	DON'T KNOWd [goto CS14_sr2] REFUSEDr [goto CS14_sr2]

>CS12_sr2<	Did your personal doctor give you a choice of specialists or recommend only one specialist?
	CHOICE
	DON'T KNOWd REFUSEDr
>CS13_sr2<	Besides the referral from your personal doctor, did you use any other sources of information in looking for the specialist?
	YES, USED OTHER SOURCES1 NO, ONLY DOCTOR REFERRAL2 [goto TESTCS19_sr2]
	DON'T KNOWd [goto TESTCS19_sr2] REFUSEDr [goto TESTCS19_sr2]
>CS14_sr2<	Did you use any of the following sources in looking for the specialist?
	<ul> <li>a. Recommendation of a doctor or health care provider who is not your personal doctor</li> <li>b. Information from your health insurance plan</li> <li>c. Books, magazines or newspapers</li> <li>d. Friends or relatives</li> <li>e. TV or radio</li> <li>f. The Internet</li> <li>g. Anything else [SPECIFY]</li> </ul>
(1) YE	S (0) NO (d) DON'T KNOW (r) REFUSED
IF ANY SOUF	RCES CODED YES, GO TO CS15_sr2; ELSE GO TO TESTCS19_sr2
>CS15_sr2<	Did any of the sources you used provide information that compared the cost of care charged by different doctors?
	YES
	DON'T KNOWd [goto CS17_sr2] REFUSEDr [goto CS17_sr2]

>CS16_sr2<	Did you use this information in choosing a specialist?
	YES
	DON'T KNOWd REFUSEDr
>CS17_sr2<	Did any of the sources you used provide information that compared the quality and performance of different doctors?
	YES
	DON'T KNOWd [goto testCS19_sr2] REFUSEDr [goto testCS19_sr2]
>CS18_sr2<	Did you use this information in choosing a specialist?
	YES
	DON'T KNOWd REFUSEDr
>TESTCS19_ CS20_s	sr2< IF CS12_sr2=1 OR CS11_sr2=2, GO TO CS19_sr2;ELSE GO TO r2
>CS19_sr2<	I am going to read several factors some people consider in choosing a doctor. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this specialist.
	<ul> <li>a. The cost of medical care and treatment</li> <li>b. The recommendation of your personal doctor (SKIP IF NO REFERRAL)</li> <li>c. The reputation of the specialist</li> <li>d. Short wait time for an appointment</li> </ul>
	<ul><li>e. Location of the specialist's practice</li><li>f. The specialist is in my health plan's provider network</li><li>g. Anything else (SPECIFY)</li></ul>
(1) MAJOR F	ACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

INTERVIEWE	non-surgical procedure, we mean things like a biopsy, colonoscopy, MRI, etc. R: IF IN DOUBT, INCLUDE THE PROCEDURE. OUR GOAL IS TO BE AS POSSIBLE, IN DEFINING PROCEDURES TO TEST FOR CONSUMER
	YES
>CS21_sr2<	If you had more than one procedure in the last 12 months, please think about the last procedure you had. Was the procedure performed in a hospital, a clinic, a doctor's office, or somewhere else?  HOSPITAL
>CS22_sr2<	Was the first time you had a procedure performed at this INSERT PLACE during the last 12 months or more than 12 months ago?  MORE THAN 12 MONTHS AGO
>CS23_sr2<	Was the INSERT PLACE recommended by the doctor performing the procedure or did you choose the place some other way?  RECOMMENDED BY DOCTOR

>CS20\_sr2< In the past 12 months, have you had any type of surgical or non-surgical

**PROBE:** Do not include routine blood work, X-rays, or mammograms.

procedure?

IF RECOMME	ENDED BY DOCTOR
>CS24_sr2<	Did your doctor give you a choice of places to have the procedure or recommend only this one place?
	CHOICE
	DON'T KNOWd REFUSEDr
IF RECOMME	ENDED BY DOCTOR
>CS25_sr2<	Besides your doctor's recommendation, did you use any other sources of information in looking for a place to have the procedure?
	YES
>CS26_sr2<	Which of the following sources did you use in looking for the INSERT PLACE where you had the procedure?
	<ul> <li>a. Recommendation from a doctor or other health care provider other than the one performing the procedure</li> <li>b. Information from your health insurance plan</li> <li>c. Books, magazines or newspapers</li> <li>d. Friends or relatives</li> <li>e. TV or radio</li> <li>f. The Internet</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) YE	S (0) NO (d) DON'T KNOW (r) REFUSED
IE NIG GOLIDA	DEC MENTIONED OF TO TESTODAL OF

#### IF NO SOURCES MENTIONED, GO TO TESTCS31\_sr2

>CS27\_sr2< Did any of the sources you used provide information that compared how much different local INSERT PLACES are paid for similar services?

YES	1
	0 [goto CS29_sr2]
DON'T KNOW	d [goto CS29_sr2]
	r [goto CS29_sr2]

>CS28_sr2<	Did you use information from these reports in choosing a place to have the procedure?
	YES
	DON'T KNOWd REFUSEDr
>CS29_sr2<	Did any of the sources you used provide information that compared the quality and performance of local INSERT PLACES?
	YES
	DON'T KNOWd [goto CS31_sr2] REFUSEDr [goto CS31_sr2]
>CS30_sr2<	Did you use information from these reports in choosing a place to have the procedure?  YES
	DON'T KNOWd REFUSEDr
>TESTCS31_	sr2< IF CS24_sr2 = 1 OR CS23=2, GO TO CS31_sr2, ELSE GO TO test e16c
>CS31_sr2<	I am going to read several factors that some people consider in choosing a place to have a procedure. For each one, please tell me if it was a major factor, minor factor, or not a factor in choosing this place to have your procedure.
	<ul> <li>a. The cost of medical care and treatment</li> <li>b. The recommendation of your personal doctor (SKIP IF NO REFERRAL)</li> <li>c. The reputation of the specialist</li> <li>d. Short wait time for an appointment</li> <li>e. Location of the specialist's practice</li> <li>f. The specialist is in my health plan's provider network</li> <li>g. Anything else (SPECIFY)</li> </ul>
(1) MAJOR F	FACTOR (2) MINOR FACTOR (3) NOT A FACTOR (d) DK (r) REFUSED

# >test e16c< [IF THIS PERSON ACCOMPANIED CHILD ON LAST VISIT INCLUDE CHILD'S LAST VISIT QUESTIONS.] [k16-IT4b]

>h10\_sr2< As a token of our appreciation for your help, we would like to send you a check for \$20. Could you please give me your full name and address?

**PROBE:** Your name and address are confidential and will only be used if we call you for another interview.

**READ AFTER NAME AND ADDRESS OBTAINED:** Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

YES	1
NO	
DON'T KNOW	
REFUSED	r
===>	

# Appendix B

List of Variables in the Household Survey Public Use and Restricted Use Data Files by Year

str. Public Use ehold Composes yes es yes es yes es yes	yes yes yes yes yes	Public Use  Ides Secti  yes  yes  yes  yes  yes	Restr. Use on A) yes yes yes yes	yes yes yes yes	yes yes yes yes	yes yes yes yes yes	Restr. Use
es yes es yes es yes yes	yes yes yes yes yes	yes yes yes	yes yes yes	yes yes	yes yes	yes yes	yes yes
es yes es yes	yes yes yes yes	yes yes	yes yes	yes yes	yes yes	yes yes	yes yes
es yes	yes yes yes	yes	yes	yes	yes	yes	yes
	yes yes		· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
es yes	yes	yes	yes	yes	yes	yes	
							yes
	VAC						
	yes						
			yes				
			yes				
					yes		
					yes		
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes
es yes	yes	yes	yes	yes	yes	yes	yes yes
	es yes	ss         yes         yes           ss         yes         yes	es yes yes yes	yes  yes  yes  yes  yes  yes  yes  yes	yes  yes  yes  yes  yes  yes  yes  yes	yes  yes  yes  yes  yes  yes  yes  yes	yes  yes  yes  yes  yes  yes  yes  yes

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
		Household identified as needing										
SPANISH	CV	Spanish interview	yes	yes	yes	yes	yes	yes				
LANGINTX	CV	Language of interview, edited										yes
SITEFLG	CV	Whether in augmented site sample	yes	yes	yes	yes	yes	yes				
SITE	CV	Site identifier, site sample	yes									
SITEID	CV	Site identifier, augmented site sample	yes	yes	yes	yes	yes	yes				
STABBR	CV	State abbreviation		yes								
STABBRX	CV	State abbreviation	yes		yes		yes		yes			
FIPST	CV	FIPS state code		yes								
FIPSTX	CV	FIPS state code	yes		yes		yes		yes			
FIPSCNTY	CV	FIPS county code		yes		yes		yes		yes		
FIPSCODE	CV	FIPS state + county code		yes								
MFIPS	CV	Modified FIPS state + county code		yes		yes		yes				
REGION	CV	Census region									yes	yes
MSACAT	CV	Metropolitan area categories	yes									
FAMTYPX	CV	Family type	yes									
PRIMUNT	CV	Family contains head of household	yes									
RELFAM	CV	Person in family is related to head of household	yes									
ННТҮРЕ	CV	Household structure	yes	yes	yes	yes	ves	yes	yes	yes	yes	yes
AGEX	a301 or age1	Age	yes									
SEX	a401 or sex1	Gender	yes	yes	yes	yes	ves	yes	yes	yes	yes	yes
FTSTUD	a501 or col1	Full time student	yes									
HIGRADX	a601 or grd1	Education	yes									
RELATEX	a802 or rel2	Relationship to head of household	yes									
SPSID	a901 or sps2	Spouse person number	yes									
PARENT	a903 or who2	Parent/guardian person number	yes									

**Section B: Health Insurance** 

Insurance cov	erage											
FPRVJOB	b1a	Covered by private insurance through job	yes									
PRIVJOB	bla	Covered by private insurance through	yes									

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	2003	2007	
name	number		Public Use	Restr. Use								
		job										
FPRVDIR	b1b	Covered by private insurance bought directly	yes									
PRIVDIR	b1b	Covered by private insurance bought directly	yes									
FPRVOTH	b1c	Covered by private insurance through others	yes									
PRIVOTH	b1c	Covered by private insurance through others	yes									
FMCARE	b1d	Covered by Medicare	yes									
MCARE	b1d	Covered by Medicare	yes									
FMCAID	b1e	Covered by Medicaid	yes									
MCAID	b1e	Covered by Medicaid	yes									
FMILINS	b1f	Covered by military plan	yes									
MILINS	b1f	Covered by military plan	yes									
FOTHPUB	CV	Covered by state insurance or I.H.S.	yes									
OTHPUBX	CV	Covered by state insurance or I.H.S.	yes									
FOTHINS	b1i2	Covered by plan not mentioned	yes									
OTHINS	b1i2	Covered by plan not mentioned	yes									
UNINSUR	b1j or bij	Uninsured	yes									
INSTYPE	CV	Current insurance type hierarchical	yes									
Private plans												
NPRIV	b2	Number of private plans in family	yes									
Private plan	number 1		Ų		Ų.		<u> </u>				<u> </u>	
PRVHLD1	b231	Private plan 1, policyholder	yes									
PRVINS1	b241	Private plan 1, covered	yes									
PRVJOB1	b251	Private plan 1, through job	yes									
PBKLET1	b26a	Private plan 1, plan information in booklet								yes		
PWEB1	b26b	Private plan 1, plan information on website								yes		
PRV1Y1	b291	Private plan 1, enrolled in last 12 months	yes									

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2003		2	007
name	number		Public Use	Restr. Use								
PRV12M1	b291	Private plan 1, enrolled in last 12 months	yes									
ESICST1	b31111	Private plan 1 (empspons.), paying partial cost							yes	yes	yes	yes
ESPRM1X	CV	Private plan 1 (empspons.), monthly premium							yes	yes	yes	yes
ESDEDA1	CDHP11	ESI plan 1, have deductible?									yes	yes
ESDEDB1	CDHP21	ESI plan 1, more/less than minimum annual deductible										yes
ESDEDI1	CDHP2aF1	ESI plan 1, individual deductible										yes
ESDEDF1	CDHP2aF1	ESI plan 1, family deductible										yes
ESIFLX1	CDHP31	ESI plan 1, offer flexible spending account									yes	yes
ESIHSA1	CDHP4	ESI plan 1, offer health savings account									yes	yes
EINFDR1	CDHP5a	ESI plan 1, provide doctor background									yes	yes
EDRCHG1	CDHP5b	ESI plan 1, compare doctor charges									yes	yes
EHSPCH1	CDHP5c	ESI plan 1, compare hospital charges									yes	yes
EDRQUA1	CDHP5d	ESI plan 1, compare doctor quality									yes	yes
EHSPQU1	CDHP5e	ESI plan 1, compare hospital quality									yes	yes
PVPRM1X	CV	Private plan 1 (not empspons.), monthly premium	yes									
NGDEDA1	CDHPNG11	Nongroup plan 1, have deductible?									yes	yes
NGDEDB1	CDHPNG21	Nongroup plan 1, more/less than minimum annual deductible										yes
NGDEDI1	CDHPNG2A	Nongroup plan 1, individual deductible										yes
NGDEDF1	CDHPNG2A	Nongroup plan 1, family deductible										yes
NGHSA1	CDHPNG4	Nongroup plan 1, offer health savings account									yes	yes
NINFDR1	CDHPNG5a	Nongroup plan 1, provide doctor background									yes	yes
NDRCHG1	CDHPNG5b	Nongroup plan 1, compare doctor charges									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2003		2007	
name	number		Public Use	Restr. Use								
NHSPCH1	CDHPNG5c	Nongroup plan 1, compare hospital charges									yes	yes
NDRQUA1	CDHPNG5d	Nongroup plan 1, compare doctor quality									yes	yes
NHSPQU1	CDHPNG5e	Nongroup plan 1, compare hospital quality									yes	yes
PRVRX1	ngi1	Private plan 1 (not empspons.), coverage of prescription medicines								yes		yes
PVHIPM1	ngi2	Private plan 1 (not empspons.), higher premium for pre-existing conditions								yes		
PVCVPX1	ngi3	Private plan 1 (not empspons.), family has pre-existing conditions not covered								yes		
PRVSIG1	b331	Private plan 1, sign up with doctor	yes									
PVSIG1P	b331	Private plan 1, sign up with doctor	yes									
PRVREF1	b341	Private plan 1, need referral	yes									
PVREF1P	b341	Private plan 1, need referral	yes									
PRVLST1	b351	Private plan 1, list of doctors	yes									
PVLST1P	b351	Private plan 1, list of doctors	yes									
PRVHMO1	b361	Private plan 1, HMO plan	yes									
PVHMO1P	b361	Private plan 1, HMO plan	yes									
PRVPAY1	b371	Private plan 1, pay without referral	yes									
PVPAY1P	b371	Private plan 1, pay without referral	yes									
PRVMOR1	b381	Employer 1 offers more than one plan	yes									
PRVBOT1	b391	Employer 1 offers HMO and nonHMO	yes									
Private plan i	number 2											
PRVHLD2	b232	Private plan 2, policyholder	yes									
PRVINS2	b242	Private plan 2, covered	yes									
PRVJOB2	b252	Private plan 2, through job	yes									
PBKLET2	b26a	Private plan 2, plan information in booklet								yes		
PWEB2	b26b	Private plan 2, plan information on website								yes		
PRV1Y2	b292	Private plan 2, enrolled in last 12	yes									

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2003		2007	
name	number		Public Use	Restr. Use								
		months										
PRV12M2	b292	Private plan 2, enrolled in last 12 months	yes									
ESICST2	b31111	Private plan 2 (empspons.), paying partial cost							yes	yes	yes	yes
ESPRM2X	CV	Private plan 2 (empspons.), monthly premium							yes	yes	yes	yes
ESDEDA2	CDHP11	ESI plan 2, have deductible?									yes	yes
ESDEDB2	CDHP21	ESI plan 2, more/less than minimum annual deductible										yes
ESDEDI2	CDHP2aF1	ESI plan 2, individual deductible										yes
ESDEDF2	CDHP2aF1	ESI plan 2, family deductible										yes
ESIFLX2	CDHP31	ESI plan 2, offer flexible spending account									yes	yes
ESIHSA2	CDHP4	ESI plan 2, offer health savings account									yes	yes
EINFDR2	CDHP5a	ESI plan 2, provide doctor background									yes	yes
EDRCHG2	CDHP5b	ESI plan 2, compare doctor charges									yes	yes
EHSPCH2	CDHP5c	ESI plan 2, compare hospital charges									yes	yes
EDRQUA2	CDHP5d	ESI plan 2, compare doctor quality									yes	yes
EHSPQU2	CDHP5e	ESI plan 2, compare hospital quality									yes	yes
PVPRM2X	CV	Private plan 2 (not empspons.), monthly premium	yes									
NGDEDA2	CDHPNG11	Nongroup plan 2, have deductible?									yes	yes
NGDEDB2	CDHPNG21	Nongroup plan 2, more/less than minimum annual deductible									-	yes
NGDEDI2	CDHPNG2A	Nongroup plan 2, individual deductible										yes
NGDEDF2	CDHPNG2A	Nongroup plan 2, family deductible										yes
NGHSA2	CDHPNG4	Nongroup plan 2, offer health savings account									yes	yes
NINFDR2	CDHPNG5a	Nongroup plan 2, provide doctor background									yes	yes
NDRCHG2	CDHPNG5b	Nongroup plan 2, compare doctor charges									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
NHSPCH2	CDHPNG5c	Nongroup plan 2, compare hospital charges									yes	yes
NDRQUA2	CDHPNG5d	Nongroup plan 2, compare doctor quality									yes	yes
NHSPQU2	CDHPNG5e	Nongroup plan 2, compare hospital quality									yes	yes
PRVRX2	ngi1	Private plan 2 (not empspons.), coverage of prescription medicines								yes		yes
PVHIPM2	ngi2	Private plan 2 (not empspons.), higher premium for pre-existing conditions								yes		
PVCVPX2	ngi3	Private plan 2 (not empspons.), family has pre-existing conditions not covered								yes		
PRVSIG2	b332	Private plan 2, sign up with doctor	yes									
PVSIG2P	b332	Private plan 2, sign up with doctor	yes									
PRVREF2	b342	Private plan 2, need referral	yes									
PVREF2P	b342	Private plan 2, need referral	yes									
PRVLST2	b352	Private plan 2, list of doctors	yes									
PVLST2P	b352	Private plan 2, list of doctors	yes									
PRVHMO2	b362	Private plan 2, HMO plan	yes									
PVHMO2P	b362	Private plan 2, HMO plan	yes									
PRVPAY2	b372	Private plan 2, pay without referral	yes									
PVPAY2P	b372	Private plan 2, pay without referral	yes									
PRVMOR2	b382	Employer 2 offers more than one plan	yes									
PRVBOT2	b392	Employer 2 offers HMO and nonHMO	yes									
Private plan r	umber 3											
PRVHLD3	b233	Private plan 3, policyholder	yes									
PRVINS3	b243	Private plan 3, covered	yes									
PRVJOB3	b253	Private plan 3, through job	yes									
PBKLET3	b26a	Private plan 3, plan information in booklet								yes		
PWEB3	b26b	Private plan 3, plan information on website								yes		
PRV1Y3	b293	Private plan 3, enrolled in last 12	yes									

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
		months										
PRV12M3	b293	Private plan 3, enrolled in last 12 months	yes									
ESICST3	b31111	Private plan 3 (empspons.), paying partial cost							yes	yes	yes	yes
ESPRM3X	CV	Private plan 3 (empspons.), monthly premium							yes	yes	yes	yes
ESDEDA3	CDHP11	ESI plan 3, have deductible?									yes	yes
ESDEDB3	CDHP21	ESI plan 3, more/less than minimum annual deductible										yes
ESDEDI3	CDHP2aF1	ESI plan 3, individual deductible										yes
ESDEDF3	CDHP2aF1	ESI plan 3, family deductible										yes
ESIFLX3	CDHP31	ESI plan 3, offer flexible spending account									yes	yes
ESIHSA3	CDHP4	ESI plan 3, offer health savings account									yes	yes
EINFDR3	CDHP5a	ESI plan 3, provide doctor background									yes	yes
EDRCHG3	CDHP5b	ESI plan 3, compare doctor charges									yes	yes
EHSPCH3	CDHP5c	ESI plan 3, compare hospital charges									yes	yes
EDRQUA3	CDHP5d	ESI plan 3, compare doctor quality									yes	yes
EHSPQU3	CDHP5e	ESI plan 3, compare hospital quality									yes	yes
PVPRM3X	CV	Private plan 3 (not empspons.), monthly premium	yes									
NGDEDA3	CDHPNG11	Nongroup plan 3, have deductible?									yes	yes
NGDEDB3	CDHPNG21	Nongroup plan 3, more/less than minimum annual deductible									-	yes
NGDEDI3	CDHPNG2A	Nongroup plan 3, individual deductible										yes
NGDEDF3	CDHPNG2A	Nongroup plan 3, family deductible										yes
NGHSA3	CDHPNG4	Nongroup plan 3, offer health savings account									yes	yes
NINFDR3	CDHPNG5a	Nongroup plan 3, provide doctor background									yes	yes
NDRCHG3	CDHPNG5b	Nongroup plan 3, compare doctor charges									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
NHSPCH3	CDHPNG5c	Nongroup plan 3, compare hospital charges									yes	yes
NDRQUA3	CDHPNG5d	Nongroup plan 3, compare doctor quality									yes	yes
NHSPQU3	CDHPNG5e	Nongroup plan 3, compare hospital quality									yes	yes
PRVRX3	ngi1	Private plan 3 (not empspons.), coverage of prescription medicines								yes		yes
PVHIPM3	ngi2	Private plan 3 (not empspons.), higher premium for pre-existing conditions								yes		
PVCVPX3	ngi3	Private plan 3 (not empspons.), family has pre-existing conditions not covered								yes		
PRVSIG3	b333	Private plan 3, sign up with doctor	yes									
PVSIG3P	b333	Private plan 3, sign up with doctor	yes									
PRVREF3	b343	Private plan 3, need referral	yes									
PVREF3P	b343	Private plan 3, need referral	yes									
PRVLST3	b353	Private plan 3, list of doctors	yes									
PVLST3P	b353	Private plan 3, list of doctors	yes									
PRVHMO3	b363	Private plan 3, HMO plan	yes									
PVHMO3P	b363	Private plan 3, HMO plan	yes									
PRVPAY3	b373	Private plan 3, pay without referral	yes									
PVPAY3P	b373	Private plan 3, pay without referral	yes									
PRVMOR3	b383	Employer 3 offers more than one plan	yes									
PRVBOT3	b393	Employer 3 offers HMO and nonHMO	yes									
Military plan												
MILIN1Y	b411 or b41	Military plan, enrolled in last 12 months	yes									
MIL12M	b411 or b41	Military plan, enrolled in last 12 months	yes									
Medicare												
MCRSIGN	b51	Medicare, sign up with doctor	yes									
MCRSIGP	b51	Medicare, sign up with doctor	yes									

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
MCRREF	b52	Medicare, need referral	yes									
MCRREFP	b52	Medicare, need referral	yes									
MCRLST	b53	Medicare, list of doctors	yes									
MCRLSTP	b53	Medicare, list of doctors	yes									
MCRHMO	b54	Medicare, HMO plan	yes									
MCRHMOP	b54	Medicare, HMO plan	yes									
MCRHJOB	b55c	Medicare HMO, through job	yes									
MCRPAY	b56	Medicare, pay without referral	yes									
MCRPAYP	b56	Medicare, pay without referral	yes									
MCRTYPE	B54R5	Type of Medicare coverage									yes	yes
MEDIGAP	B54supp	Covered by Medicare supplemental or Medigap policy									yes	yes
MCRPVRX	b54mg	Private plan cover at least some Rx costs									yes	yes
MCRPRTD	b54rx	Rx coverage through Medicare Part D									yes	yes
MCRIN1Y	b57	Medicare, enrolled in last 12 months	yes									
MCR12M	b57	Medicare, enrolled in last 12 months	yes									
	b59	Covered by Medicare supplemental policy	yes									
	b59	Covered by Medicare supplemental policy	yes									
	b59a or 59a1	Medicare, supplemental through job	yes									
	b59b	Medicare, supplemental premium	yes	yes								
	b59c	Medicare, supplemental premium unit	yes	yes								
Medicare and M	<b>1edicaid</b>											
FMCRMCD	b60	Covered by Medicare and Medicaid	yes	yes								
MCRMCD	b60	Covered by Medicare and Medicaid	yes	yes								
Medicaid					•				•		•	
MCDSIGN	b61	Medicaid, sign up with doctor	yes	yes								
MCDSIGP	b61	Medicaid, sign up with doctor	yes	yes								
MCDREF	b62	Medicaid, need referral	yes	yes								
MCDREFP	b62	Medicaid, need referral	yes	yes								
MCDLST	b63	Medicaid, list of doctors	yes	yes								

Variable	Question	Description	199	96-97	19:	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
MCDLSTP	b63	Medicaid, list of doctors	yes	yes								
MCDHMO	b64	Medicaid, HMO plan	yes									
MCDHMOP	b64	Medicaid, HMO plan	yes									
MCDPAY	b66	Medicaid, pay without referral	yes	yes								
MCDPAYP	b66	Medicaid, pay without referral	yes	yes								
MCDIN1Y	b67	Medicaid, enrolled in last 12 months	yes									
MCD12M	b67	Medicaid, enrolled in last 12 months	yes									
MCDPRMF	b69prem	Medicaid, any premium paid									yes	yes
Other state pl	ans and other i	insurance plans not mentioned			,							
STPHD	b71	State/other plan, policyholder number	yes									
STSIGN	b72	State/other plan, sign up with doctor	yes	yes								
STSIGP	b72	State/other plan, sign up with doctor	yes	yes								
STREF	b73	State/other plan, need referral	yes	yes								
STREFP	b73	State/other plan, need referral	yes	yes								
STLST	b74	State/other plan, list of doctors	yes	yes								
STLSTP	b74	State/other plan, list of doctors	yes	yes								
STHMO	b75	State/other plan, HMO plan	yes									
STHMOP	b75	State/other plan, HMO plan	yes									
STPAY	b76	State/other plan, pay without referral	yes	yes								
STPAYP	b76	State/other plan, pay without referral	yes	yes								
STIN1Y	b77	State/other plan, enrolled in last 12 months	yes									
ST12M	b77	State/other plan, enrolled in last 12 months	yes									
STPRMF	b78prem	State/other plan, any premium paid									yes	yes
Uninsured												
UNINCOV	b80 or b801	Uninsured, covered anytime in last 12 months	yes									
UNINPLX	b81	Uninsured, covered in last 12 months, type of insurance plan	yes									
UNINHMO	b82	Uninsured, covered in last 12 months, insurance plan was HMO	yes									

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
UNINSR1	b84	Reason uninsured: lost job/changed employers	yes									
UNINSR2	b84	Reason uninsured: spouse/parent lost/changed job	yes									
UNINSR3	b84	Reason uninsured: divorced/death of spouse/parent	yes									
UNINSR4	b84	Reason uninsured: ineligible, age/left school	yes									
UNINSR5	b84	Reason uninsured: employer stop offering coverage	yes									
UNINSR6	b84	Reason uninsured: became part time/temporary	yes									
UNINSR7	b84	Reason uninsured: benefits from employer ran out	yes									
UNINSR8	b84	Reason uninsured: cannot afford premiums	yes									
UNINSR9	b84	Reason uninsured: insurance plan raised premiums	yes									
UNINR10	b84	Reason uninsured: insurance co. refused coverage	yes									
UNINR11	b84	Reason uninsured: uninsured, other reason	yes									
UNINR12	b84	Reason uninsured: ineligible/lost public assistance	yes									
UNINR13	b84	Reason uninsured: failed to re-enroll	yes									
UNINR14	b84	Reason uninsured: unhappy with plan	yes									
UNINMCD	b84a	Believe eligible for Medicaid							yes	yes		
Previous heal	th insurance											
PREINS	b851	Type of previous insurance		yes								
PREINSX	b851	Type of previous insurance	yes									
PREHMO	b871	Previous insurance an HMO	yes									
PRECOV	CV	Previous insurance type hierarchical		yes								
PRECOVX	CV	Previous insurance type hierarchical	yes									

Variable	Question	Description	19	96-97	19	98-99	20	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
CHGINS1	b881	Change insurance, own/spouse job change	yes									
CHGINS2	b881	Change insurance, employer offerings changed	yes									
CHGINS3	b881	Change insurance, current plan less expensive	yes									
CHGINS4	b881	Change insurance, current plan better services	yes									
CHGINS5	b881	Change insurance, other	yes									
CHGINS6	b881	Change insurance, eligibility status changed	yes									
CHGINS7	b881	Change insurance, not an actual change	yes									
HMOEVR	b921 or b901	Ever enrolled in an HMO	yes									
HMOYRSX	CV	Years enrolled in HMO	yes									
Non-groups p	lans											
NGTRY	NGI1	Nongroup plan, try to buy in last 3 years									yes	yes
NGPRBLM	NGI2	Nongroup plan, problem trying to purchase									yes	yes
NGPRB3Y	NGI2A	Nongroup plan, have policy and problem trying to purchase									yes	yes
NGPURCH	NGI3	Nongroup plan, purchased on own									yes	yes
NGPURMN	NGI4_mo	Nongroup plan, month purchased										yes
NGPURYR	NGI4_yr	Nongroup plan, year purchased										yes
NGNMON	NGI5	Nongroup plan, number of months covered									yes	yes
Preferences	<u>.</u>											
MCHOICE	b951	Willingness to accept limited choice to save money	yes									
Insurance der	nial				,				,			
DENIANY	b98	Anyone in family denied health insurance because of poor health	yes	yes								

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	003	2	2007
name	number		Public Use	Restr. Use								
DENHLH	b99	Person denied health insurance because of poor health	yes	yes								

#### **Section C: Resource Use and Unmet Need**

Hospital and	emergency ro	om							-		•	
HSPSTYN	c121	Number of overnight hospital stays	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
HSPNODX	CV	Number of overnight hospital stays, excluding childbirth	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
HSPERX	c151	Number of hospital stays admitted thru emergency room	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
HSPNITX	c161	Total nights spent in hospital	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
ERUSENX	c221	Number of emergency room visits without hospital admission	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
TOTERX	CV	Total number of emergency room visits	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
ERLSTVS	er1	Last ER visit: for accident/injury vs. other							yes	yes		
ERCNTAC	er3	ER visit not for accident/injury: contacted health professional							yes	yes		
ERUSEDR	er4	ER visit not for accident/injury: health professional said go to ER							yes	yes		
ERTRYDR	er5	ER visit not for accident/injury: tried to contact health professional							yes	yes		
EROTHPL	er6	ER visit not for accident/injury: could get treatment somewhere else							yes	yes		
ERCHOSE	er8	ER visit not for accident/injury: reason for not going to non-ER place								yes		
ERADMIT	er9	ER visit not for accident/injury: resulted in overnight hospital stay							yes	yes		
Physicians an	d other medic	cal professionals				<u> </u>						
DRVISNX	c311	Number of doctor visits	yes	yes	yes	yes	yes	yes	yes	yes	yes	yes
DPHYEXM	c3p1	Any visits for routine preventive care			yes	yes	yes	yes	yes	yes		
DRTNPRM	c3c1	Any visits for check-up for ongoing health problem			yes	yes	yes	yes	yes	yes		

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
MPVISNX	c331	Number of medical professional visits	yes									
Surgery	•		1		•						•	
SURGNX	c421	Total number of surgeries	yes									
SURGNTX	c431	Number of surgeries with overnight hospital stay	yes									
SURGOPX	CV	Number of outpatient surgeries	yes									
Mental health	l								1			
MENTAL	c511	Any mental health visits	yes									
Home health	care											
NURCARE	c521	Any home health visits	yes	yes								
Preventive ser	vices		•				•		•		'	
FLUSHOT	c531	Had flu shot	yes	yes	yes	yes	yes	yes				
MAMMGM	c611	Ever had a mammogram	yes	yes	yes	yes	yes	yes				
MAMLASX	c621	Time since last mammogram	yes	yes	yes	yes	yes	yes				
Unmet need	•		1		•						•	
UNMET	c811	Did not get needed medical care	yes									
PUTOFF	c821	Postponed needed medical care	yes									
PUTOFR1	c831	Postponed care, worry about cost	yes									
PUTOFR2	c831	Postponed care, would not accept the insurance	yes									
PUTOFR3	c831	Postponed care, health plan would not pay	yes									
PUTOFR4	c831	Postponed care, could not get appointment soon	yes									
PUTOFR5	c831	Postponed care, can not be at clinic when open	yes									
PUTOFR6	c831	Postponed care, takes too long to get to doctor	yes									
PUTOFR7	c831	Postponed care, could not get through on telephone	yes									
PUTOFR8	c831	Postponed care, wait in the office too long	yes									
PUTOFR9	c831	Postponed care, don't know where to	yes									

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
		go										
PUTOF10	c831	Postponed care, can't get referral from doctor	yes									
PUTOF11	c831	Postponed care, other related to health system	yes									
PUTOF12	c831	Postponed care, change in health insurance	yes									
PUTOF13	c831	Postponed care, other insurance- related problems	yes									
PUTOF14	c831	Postponed care, no time/too busy	yes									
PUTOF15	c831	Postponed care, can't get off work	yes									
PUTOF16	c831	Postponed care, transportation problems	yes									
PUTOF17	c831	Postponed care, caring for family members	yes									
PUTOF18	c831	Postponed care, too sick	yes									
PUTOF19	c831	Postponed care, bad experience with doctor	yes									
PUTOF20	c831	Postponed care, didn't think serious enough	yes									
PUTOF21	c831	Postponed care, too lazy/procrastinated	yes									
PUTOFR0	c831	Postponed care, other reason to put off care	yes									
UMETDR	unmet2	Unmet need, saw doctor							yes	yes		
UMETDRX	unmet2a	Unmet need, postponed seeing doctor							yes	yes		
UMETSP	unmet3	Unmet need, referred to specialist							yes	yes		
UMETSPX	unmet3a	Unmet need, action after specialist referral							yes	yes		
UMETTST	unmet4	Unmet need, doctor ordered tests							yes	yes		
UMETTSX	unmet4a	Unmet need, action after tests ordered							yes	yes		
UMETPRC	unmet5	Unmet need, doctor ordered medical procedure							yes	yes		
UMETPRX	unmet5a	Unmet need, action after medical procedure ordered							yes	yes		
UMETMDC	c841	Can't afford needed prescription			†		yes	yes	yes	yes	yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
		medicines										
GETMED	c90	Easier or harder to get medical care	yes	yes								
Out-of-pocket	costs											
MEDCSTA	CV	Out-of-pocket medical costs		yes								
MEDCSTB	CV	Out-of-pocket medical costs		yes								
MEDCSTX	CV	Out-of-pocket medical costs	yes	-	yes	-	yes		yes	<u> </u>	yes	
Problems pay	ing medical bil	lls	yes		yes		yes		yes		768	
BILLPRB	c94	Any problems paying medical bills							yes	yes	yes	yes
BILLCOL	c95a	Medical bills, contacted by collection agency							yes	yes	yes	yes
BILLNEC	c95b	Medical bills, problems paying for other necessities							yes	yes	yes	yes
BILLMAJ	с95с	Medical bills, postponed major purchases							yes	yes	yes	yes
BILLSAV	c95d	Medical bills, used savings							yes	yes	yes	yes
BILLBOR	c95e	Medical bills, borrowed							yes	yes	yes	yes
BRTHINK	c95f	Medical bills, consider filing for bankruptcy									yes	yes
BRPTEVR	c95f1	Medical bills, did you file for bankruptcy									yes	yes
CAREDEN	c95g	Medical bills, been denied medical care									yes	yes
BP_ACC	C96_1	Bill problem, accident/injury									yes	yes
BP_ILL	C96_2	Bill problem, an illness									yes	yes
BP_TEST	C96_3	Bill problem, medical test/procedure									yes	yes
BP_BRTH	C96_4	Bill problem, birth of a child									yes	yes
BP_ROUT	C96_5	Bill problem, routine health care									yes	yes
BP_OTH	C96_6	Bill problem, other									yes	yes
BP_INS	C97	Bill problem, insured or uninsured									yes	yes
BP_COVR	C98	Bill problem, how much covered by health plan									yes	yes
BPDSCNT	c99a	Bill problem, any offer to discount the bill									yes	yes
BPFREE	c99b	Bill problem, inform you about free					1				yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
		care										
BPPUBL	с99с	Bill problem, inform about public assistance									yes	yes
BPPPLN	c99d	Bill problem, suggest a payment plan									yes	yes
BPLOAN	c99e	Bill problem, suggest you take out a loan									yes	yes
BPREFR	c99f	Bill problem, refer you to another provider									yes	yes
BPWHEN	C100	Bill problem, when receive first medical bill									yes	yes
BPOWNA	C101_2	Bill problem, amount owed in medical bills										yes
BPOWNB	C101a	Bill problem, amount medical bills, category										yes
BPOWNX	CV	Bill problem, amount medical bills, category									yes	
BPAMTPD	C102	Bill problem, amount paid in past 12 months									yes	yes
BPWHNPY	C103	Bill problem, when pay off medical bills									yes	yes
In-store retail	clinic				•		,		•		•	
ISCEVR	RC1	Ever use in-store health clinic									yes	yes
ISC12M	RC1a	In-store clinic, used in past 12 months									yes	yes
ISCILL	RC2a	In-store clinic, new illness or symptom										yes
ISCVAC	RC2b	In-store clinic, vaccination										yes
ISCEXAM	RC2c	In-store clinic, physical exam										yes
ISCCHRN	RC2d	In-store clinic, care for chronic condition										yes
ISCRX	RC2e	In-store clinic, prescription renewal										yes
ISCOTH	RC2f	In-store clinic, other										yes
ISCUSC	RC3a	In-store clinic, no regular source of care									yes	yes
ISCAPPN	RC3b	In-store clinic, no need to make an appointment									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
ISCCST	RC3c	In-store clinic, cost lower than other source of care									yes	yes
ISCLOC	RC3d	In-store clinic, location more convenient									yes	yes
ISCHRS	RC3e	In-store clinic, hours more convenient									yes	yes
ISCCOVR	RC4	In-store clinic, did insurance pay cost									yes	yes
Onsite workp	lace health clin	nic										
OWCEVR	RC5	Ever use onsite workplace health clinic									yes	yes
OWC12M	RC5a	Workplace clinic, used in past 12 months									yes	yes
OWCWRK	RC6a	Workplace clinic, treat work related injury									yes	yes
OWCVAC	RC6b	Workplace clinic, vaccination									yes	yes
OWCILL	RC6c	Workplace clinic, new illness or symptom									yes	yes
OWCEXAM	RC6d	Workplace clinic, physical exam									yes	yes
OWCCHRN	RC6e	Workplace clinic, care for chronic condition										yes
OWCRX	RC6f	Workplace clinic, prescription renewal									yes	yes
OWCOTH	RC6g	Workplace clinic, other										yes
OWCUSC	RC7a	Workplace clinic, no regular source of care									yes	yes
OWCAPPN	RC7b	Workplace clinic, no need to make an appointment									yes	yes
OWCCST	RC7c	Workplace clinic, cost lower than other source of care									yes	yes
OWCLOC	RC7d	Workplace clinic, location more convenient									yes	yes
OWCHRS	RC7e	Workplace clinic, hours more convenient									yes	yes

Section D: Usual Source of Care and Patient Trust in Physician

Usual source of	of care											
USCARE	d101	Has usual source of care	yes									
USCTYPE	d111	Usual source of care – type of place	yes									

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
USCPAY	sn1	If uninsured: paying full vs. reduced price at usual source of care							yes	yes	yes	yes
USCPROF	d121	Type of provider at usual source of care	yes									
USCDTYP	d121spec	Usual source, PCP or spec?									yes	yes
USCSAME	d131	See same provider at usual source of care	yes									
USCCHG	d141	Any change in usual source in the last 12 months	yes									
USCRCHG	d151	Reason for change in usual source of care	yes									
USCRHLH	d161	Insurance reason for change in usual source of care			yes	yes	yes	yes	yes	yes		
USCROTH	d171	Other reason for change in usual source of care			yes	yes	yes	yes	yes	yes		
USCNOR1	d201	Reason for change: seldom/never sick	yes	yes								
USCNOR2	d201	Reason for change: recently moved into the area	yes	yes								
USCNOR3	d201	Reason for change: usual source not available	yes	yes								
USCNOR4	d201	Reason for change: no insurance	yes	yes								
USCNOR5	d201	Reason for change: other reason	yes	yes								
Place offering	g affordable me	edical care (for families with any uninsure	ed member	rs)								
AFFRDCR	sn2	Any place offering affordable medical care							yes	yes	yes	yes
AFFDTYP	sn3	Type of place offering affordable medical care								yes		yes
Reduced-prio	e usual source	of care / place offering affordable medica	l care (for	families w	ith any unii	nsured men	nbers)					
AFFTRAV	CV	Travel time								yes		yes
AFFSEEN	sn5	Any visit in past 12 months							yes	yes	yes	yes
AFFRSON	sn6	Reason not visiting: whether any reason given							yes	yes		
AFFRSN1	sn6	Reason not visiting: no need							yes	yes		
AFFRSN2	sn6	Reason not visiting: stigma							yes	yes		

Variable	Question	Description	19	96-97	199	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
AFFRSN3	sn6	Reason not visiting: not eligible							yes	yes		
AFFRSN4	sn6	Reason not visiting: too far away							yes	yes		
AFFRSN5	sn6	Reason not visiting: wait too long							yes	yes		
AFFRSN6	sn6	Reason not visiting: needed services not available							yes	yes		
AFFRSN7	sn6	Reason not visiting: poor quality care							yes	yes		
AFFRSN8	sn6	Reason not visiting: bad neighborhood							yes	yes		
AFFRSN9	sn6	Reason not visiting: no transportation							yes	yes		
AFFRN10	sn6	Reason not visiting: language barrier							yes	yes		
AFFRN11	sn6	Reason not visiting: hours not convenient							yes	yes		
AFFRN12	sn6	Reason not visiting: other reason							yes	yes		
Patient trust i	n physician											
DRNOREF	d311	Agreement: Doctor may not refer when needed	yes									
DRMETND	d321	Agreement: Doctor puts medical needs first	yes									
DRINFLU	d331	Agreement: Doctor influenced by insurance company rules	yes									
DRUNNEC	d341	Agreement: Doctor might perform unnecessary tests or procedures	yes									
Attitudes abou	ut medical care	e			<u>.</u>		<u> </u>		<u> </u>			
DRFEELB	d351	True or false: Visit doctor as soon as feeling bad							yes	yes		
DRAVOID	d361	True or false: Avoid doctors							yes	yes		

Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Satisfaction wi	ith health care												
CRSAFX	CV	Satisfaction with family's health care	yes										
Satisfaction wi	Satisfaction with choice of physicians												
DRCHOCX	CV	Satisfaction with choice of primary care doctors	yes										
SPNEED	e141, k14	Needed a specialist	yes										

Description	19	96-97	19	98-99	20	00-01	2	2003	2	007
	Public Use	Restr. Use								
Saw a specialist in last 12 months					yes	yes	yes	yes	yes	yes
Satisfaction with choice of specialists	yes									
Usual doctor up-to-date on care from specialist									yes	yes
Usual doctor ask about your specialist visit									yes	yes
health plan					-					
Make doctor appointment in last 12 months									yes	yes
Appointment lag time, category										yes
Appointment lag time, category									yes	
Different language than health care practitioner							yes	yes	yes	yes
Problem getting referral to specialist							yes	yes		
Needed health plan approval, adults							yes	yes		
Problem waiting for health plan approval, adults							yes	yes		
Had to fill out health plan paperwork							yes	yes		
Problem filling out health plan paperwork, adults							yes	yes		
Satisfaction: amount paying for health care							yes	yes		
Rating for the health plan					yes	yes	yes	yes		
Person number of family member who took child to doctor	yes									

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
SICKCR	e161, k16	Visited doctor for health problem	yes									
CHKASIK	e181, k18	Had visit for health problem, any preventive care	yes									
CHECKUP	e201, k20	No visit for health problem, any preventive care	yes									
Last physician	n visit		•		•				•		•	
DRORSP	e221, k22	Saw doctor or specialist for last visit	yes									
LSTYPE	CV	Last visit, sickness or preventive	yes									
VISCUR	CV	Last visit, under current insurance plan	yes									
LSTUSC	e241	Last visit, to usual place	yes	yes	yes	yes			yes	yes		
LSTUSCA	e241	Last visit, to usual place, adults					yes	yes				
LSTOER	E241	Last visit, to an emergency room	yes	yes	yes	yes			yes	yes		
LSTOERA	E241	Last visit, to an emergency room, adults					yes	yes				
LSTAPP	e251	Last visit, had appointment	yes	yes	yes	yes			yes	yes		
LSTAPPA	e251	Last visit, had appointment, adults					yes	yes				
LSTAPPX	CV	Last visit, time until appointment	yes	yes		yes				yes		
LSTAPPXX	CV	Last visit, time until appointment	yes	yes	yes				yes			
LSTATAX	CV	Last visit, time until appointment, adults			, , , ,			yes	7			
LSTATAXX	CV	Last visit, time until appointment, adults					yes					
LSTWATX	CV	Last visit, waiting time in doctor's office	yes									
LSTRAVX	CV	Last visit, travel time	yes	yes		yes		yes		yes		
LSTRAVXX	CV	Last visit, travel time	yes	yes	yes		yes		yes			
LSTHOR	e301, k30	Thoroughness of the exam	yes									
LSTLISN	e311, k31	How well doctor listened	yes									
LSTEXPL	e321, k32	How well doctor explained	yes									
UNINFEE	e331	Physician charge for most recent visit								yes		
UNINPAY	e341	Amount paid for most recent visit				<u> </u>		<u> </u>		yes		
Health status	•											
GENHLH	CV	General health condition	yes									

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
LMTMACT	e411	Limited in moderate activities	yes	yes	yes	yes	yes	yes				
LMTSTR	e421	Limited in climbing stairs	yes	yes	yes	yes	yes	yes				
PHYLESS	e431	Accomplished less because of physical health	yes	yes	yes	yes	yes	yes				
PHYACT	e441	Physical health limited work	yes	yes	yes	yes	yes	yes				
EMOLESS	e451	Accomplished less because of emotional problems	yes	yes	yes	yes	yes	yes				
EMOACT	e461	Emotional problems limited work	yes	yes	yes	yes	yes	yes				
PAININT	e471	Pain interfered with work	yes	yes	yes	yes	yes	yes				
LMTSOC	e481	Physical health or emotional problems interfered socially	yes	yes	yes	yes	yes	yes				
FLCALM	e491	Felt calm and peaceful	yes	yes	yes	yes	yes	yes				
FLCALM4	e491	Felt calm and peaceful, not imputed							yes	yes		
ENERGY	e501	Had a lot of energy	yes	yes	yes	yes	yes	yes				
FLDOWN	e511	Felt downhearted and blue	yes	yes	yes	yes	yes	yes				
FLDOWN4	e511	Felt downhearted and blue, not imputed							yes	yes		
PCS12	CV	SF-12 Physical Component Summary	yes	yes	yes	yes	yes	yes				
MCS12	CV	SF-12 Mental Component Summary	yes	yes	yes	yes	yes	yes				,
Happiness			•		•		,		•		•	
HAPPY	gss157	Overall level of happiness					yes	yes	yes	yes		
Chronic cond	itions (adults)											
HAVBABY	cc1	Had a baby in last two years				yes		yes		yes		yes
ACNE	cc2a	Saw doctor for acne				yes		<u> </u>		-		
HDACHE	cc2b	Saw doctor for headaches				yes						
UTRNBLD	cc2c	Saw doctor for abnormal uterine bleeding				yes		yes		yes		yes
ALCHPRM	cc2d	Saw doctor for alcohol related problems				yes						
CATRCT	cc3a	Cataracts				yes						
CATRCTX	cc3a	Saw doctor for cataracts				yes						
DIABET	cc3b	Diabetes				yes		yes		yes		yes
DIABETX	cc3b	Saw doctor for diabetes				yes		yes		yes		yes

Variable	Question	Description	199	96-97	19	98-99	20	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
ARTHRS	сс3с	Arthritis				yes		yes		yes		yes
ARTHRSX	сс3с	Saw doctor for arthritis				yes		yes		yes		yes
RHARTHR	c3AC	Rheumatoid arthritis				yes						
ASTHMA	cc3d	Asthma				yes		yes		yes		yes
ASTHMAX	cc3d	Saw doctor for asthma				yes		yes		yes		yes
COPD	сс3е	Chronic obstructive pulmonary disease				yes		yes		yes		yes
COPDX	сс3е	Saw doctor for chronic obstructive pulmonary disease				yes		yes		yes		yes
ATLFBR	cc3f	Atrial fibrillation				yes						
ATLFBRX	cc3f	Saw doctor for atrial fibrillation				yes						
HYPTEN	cc3g	Hypertension				yes		yes		yes		yes
HYPTENX	cc3g	Saw doctor for hypertension				yes		yes		yes		yes
HICHOL	cc3h	High cholesterol				yes						
HICHOLX	cc3h	Saw doctor for high cholesterol				yes						
HRTDIS	cc3i	Coronary heart disease						yes		yes		yes
HRTDISX	cc3i	Saw doctor for coronary heart disease						yes		yes		yes
ATHRSCL	cc4a	Atherosclerosis				yes						
ATHRSCX	cc4a	Saw doctor for atherosclerosis				yes						
ISCHMC	cc4b	Ischemic heart disease				yes						
ISCHMCX	cc4b	Saw doctor for ischemic heart disease				yes						
ANGINA	cc4c	Angina				yes						
ANGINAX	cc4c	Saw doctor for angina				yes						
CABG	c4ae	Angioplasty				yes						
CHF	cc4d	Congestive heart disease				yes						
CHFX	cc4d	Saw doctor for congestive heart disease				yes						
DIURTC	c4af	Ever taken diuretics for heart condition				yes						
STROKE	cc4e	Stroke				yes						
STROKEX	cc4e	Saw doctor for stroke				yes						
BRTCAN	cc5b	Breast cancer				yes						
BRTCANX	cc5b	Saw doctor for breast cancer				yes						
SKNCAN	cc5c	Skin cancer				yes		yes		yes		yes

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
SKNCANX	сс5с	Saw doctor for skin cancer				yes		yes		yes		yes
LNGCAN	cc5d	Lung cancer				yes						
LNGCANX	cc5d	Saw doctor for lung cancer				yes						-
CLNCAN	cc5e	Colon cancer				yes						
CLNCANX	сс5е	Saw doctor for colon cancer				yes						-
PRSCAN	cc5f	Prostate cancer				yes						-
PRSCANX	cc5f	Saw doctor for prostate cancer				yes						
PRSBGN	c5f4	Benign prostate disease				yes		yes		yes		yes
PRSBGNX	c5f4	Saw doctor for benign prostate disease				yes		yes		yes		yes
CANCER	cc5h	Cancer other than skin cancer						yes		yes		yes
CANCERX	cc5h	Saw doctor for cancer other than skin cancer						yes		yes		yes
HERNIA	ссба	Hernia				yes						
HERNIAX	ссба	Saw doctor for hernia				yes						
ULCER	ссбь	Ulcer				yes						
ULCERX	ссбь	Saw doctor for ulcer				yes						
GASTRS	сс6с	Gastritis				yes						
GASTRSX	сс6с	Saw doctor for gastritis				yes						
HIV	cc6d	HIV or AIDS				yes						
HIVX	cc6d	Saw doctor for HIV or AIDS				yes						
DPRESN	сс6е	Depression				yes		yes		yes		yes
DPRESNX	сс6е	Saw doctor for depression				yes		yes		yes		yes
MEDPROB	cc7	Any doctor visit for serious medical problem						yes		yes		yes
Symptom resp	onse module											
SYNECK	srm1a	Back or neck pain								yes		
SYBRETH	srm1b	Shortness of breath								yes		
SYFAINT	srm1c	Fainting or loss of consciousness								yes		
SYBLUR	srm1d	Difficulty seeing								yes		
SYHACHE	srm1e	Headaches								yes		
SYCOUGH	srm1f	Cough								yes		
SYSAD	srm1h	Depression			1					yes		

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	2003	2	2007
name	number		Public Use	Restr. Use								
SYANXTY	srm1i	Anxiety								yes		
SYHIP	srm1j	Pain in hip/knee/leg								yes		
SYANKLE	srm1k	Sprained ankle								yes		
SYWEAK	srm1m	Fatigue								yes		
SYLUMP	srm1q	Lump in breast								yes		
SYURINE	srm1u	Difficulty urinating								yes		
SYHEAR	srm1v	Difficulty hearing								yes		
SYCHEST	srm1w	Chest pain								yes		
SYLINK	CV	Health problem used in questions srm2a – srm9a								yes		
SYMAPPR	CV	When health problem first appeared								yes		
SYMPREG	srm2c	Problem is associated with pregnancy								yes		
SYMTODR	srm3	Saw health professional about problem								yes		
DRSEE	srm4	How soon saw health professional								yes		
DRTALK	srm5	Telephoned health professional about problem								yes		
DRCALL	srm6	How soon telephoned health professional								yes		
DRNEED	srm7a	Needed medical visit instead of phone call								yes		
DRCNTAC	srm7b	Needed to contact health professional								yes		
DRTRYGO	srm7c	Tried to see health professional								yes		
SYMLMT	srm8	Problem limited usual activities								yes		
SYMLMTD	srm8a	Number of days limited in usual activities								yes		
SYMMISS	srm9	Missed work because of problem								yes		
SYMMSSD	srm9a	Number of days of work missed								yes		
SICKLVE	srm10	Have sick leave as job benefit								yes		
Smoking												
TAKRISK	e521	Risk-taker	yes									
SMKEVR	e601	Smoked 100 or more cigarettes in lifetime	yes									
SMKNOW	e611	Current level of smoking	yes									

Variable name	Question number	Description	199	96-97	1998-99		2000-01		2003		2007	
			Public Use	Restr. Use								
SMKNUM	e621	Smoke everyday: number of cigarettes per day	yes	yes	yes	yes	yes	yes				
SMKDAYS	e631	Smoke some days: number of days smoked in past month	yes	yes	yes	yes	yes	yes				
SMKNDAY	e641	Smoke some days: number of cigarettes per day	yes	yes		yes		yes				
SMKNDAX	e641	Smoke some days: number of cigarettes per day	yes	yes	yes		yes					
SMKQUIT	e651	How long since quitting smoking	yes	yes	yes	yes	yes	yes				-
SMKTRYQ	e661	Tried to quit in last 12 months	yes	yes	yes	yes	yes	yes				
SMKADV	e671	Doctor's advice to quit smoking	yes	yes	yes	yes						-
Body mass inc	dex		•		<u>'</u>				1		-	
BMIX	CV	Body mass index, continuous, ages 18 and older							yes	yes	yes	yes
BMICAT	CV	Body mass index, categories, ages 21 and older							yes	yes	yes	yes
Chronic cond	itions (childre	n)										
KACNE	ee2a	Saw doctor for acne				yes						
KHDACHE	ee2b	Saw doctor for headaches				yes						,
KEARINF	ee2c	Saw doctor for four or more ear infections				yes		yes				
KEARTUB	ee3	Ever had tube placed in ears				yes						
KSCKLE	ee4a	Sickle cell disease				yes						
KSCKLEX	ee4a	Saw doctor for sickle cell disease				yes						
KTB	ee4b	Tuberculosis				yes						
KTBX	ee4b	Saw doctor for tuberculosis				yes						
KASTHMA	ee4c	Asthma				yes		yes				
KASTHMX	ee4c	Saw doctor for asthma				yes		yes				
KADHA	ee4d	Attention deficit hyperactivity disorder (ADHD)				yes		yes				
KADHAX	ee4d	Saw doctor for ADHD				yes		yes				
KDIABT	ee4e	Diabetes				yes						

Variable	Question number	Description	1996-97		1998-99		2000-01		2003		2007	
name			Public Use	Restr. Use								
KDIABTX	ee4e	Saw a doctor for diabetes				yes						
KMORECR	ee5	Child needs more medical care than is usual						yes				
KLONGCR	ee5a	Child's high health care needs last at least 12 months						yes				
Children with	special health	care needs					ļ				<u> </u>	
KRXUSE	scsn1	Child needs prescription medicine								yes		
KRXUSEX	scsn1a	Prescription needed because of health condition								yes		
KRXUSEY	scsn1b	Condition lasting at least 12 months								yes		
KMORE	scsn2	Child needs more services than is usual								yes		
KMOREX	scsn2a	Services needed because of health condition								yes		
KMOREY	scsn2b	Condition lasting at least 12 months								yes		
KLIMIT	scsn3	Child is limited in ability to do usual things								yes		
KLIMITX	scsn3a	Limited ability because of health condition								yes		
KLIMITY	scsn3b	Condition lasting at least 12 months								yes		
KTHERA	scsn4	Child needs special therapy								yes		
KTHERAX	scsn4a	Therapy needed because of health condition								yes		
KTHERAY	scsn4b	Condition lasting at least 12 months								yes		
KCOUNS	scsn5	Child needs treatment/counseling for emotional/developmental/behavioral problem								yes		
KCOUNSX	scsn5a	Treatment needed because of health condition								yes		
KCOUNSY	scsn5b	Condition lasting at least 12 months								yes		
CSHCN	CV	Child has special health care need							yes	yes		
Consumer inf	ormation seeki	ing			<u> </u>		<u> </u>		,		<u>.</u>	
GETINF1	ra34, ra34c	Obtained health information on the internet					yes	yes				
GETINF2	ra34, ra34c	Obtained health information from					yes	yes				
	1	II.									1	

Variable	Question number	Description	199	96-97	19	98-99	2000-01		2003		2007	
name			Public Use	Restr. Use								
		friends										
GETINF3	ra34, ra34c	Obtained health information from TV or radio					yes	yes				
GETINF4	ra34, ra34c	Obtained health information from books or magazines					yes	yes				
GETINF5	ra34, ra34c	Obtained health information from other source (excluding doctor, health care professional, or health care organization)					yes	yes				
GETINF6	ra34, ra34c	Obtained health information from health care professional (not doctor)					yes	yes				
GETINF7	ra34, ra34c	Obtained health information from health care organization					yes	yes				
DRINF	ra36, ra36c	Mentioned medical information to doctor					yes	yes				
TESTINF	ranew, newrac	Doctor acted because of patient information					yes	yes				
Quality of car	e											
CQEXPLN	CCQ3A	Health provider, explain things well									yes	yes
CQTIME	CCQ3B	Health provider, spend enough time									yes	yes
CQRSPCT	CCQ3C	Health provider, treat you with respect									yes	yes
CQDIET	CCQ3D	Health provider, set goals to improve diet									yes	yes
CQEXRCS	CCQ3E	Health provider, set goals for exercise									yes	yes
CQMNTOR	CCQ3F	Health provider, teach how to monitor condition									yes	yes
CQFOLW	CCQ4	Health provider, call you in last 6 months									yes	yes
CQSIDE	CCQ4	Read side effects for new prescriptions									yes	yes
Consumer en	gagement - For	chronic condition sample										
CCEACTV	CE1_1	Chronic, active role in own health care									yes	yes
CCERESP	CE1_2	Chronic, responsible for managing health condition									yes	yes
CCEKWRX	CE1_3	Chronic, know prescription doses									yes	yes
CCEFOLW	CE1_4	Chronic, do followup treatments at									yes	yes

Variable name	Question number	Description	19	96-97	1998-99		2000-01		2003		2007	
			Public Use	Restr. Use								
		home										
CCEPRDR	CE1_5	Chronic, tell concerns to health provider									yes	yes
CCETDIF	CE1_6	Chronic, tell when need to get health care									yes	yes
CCEACTN	CE1_7	Chronic, can act to prevent symptoms									yes	yes
CCEKNOW	CE1_8	Chronic, understand cause of health condition									yes	yes
CCEOPTN	CE1_9	Chronic, know different treatment options									yes	yes
CCEPRNT	CE1_10	Chronic, know how to prevent further problems									yes	yes
CCESTYL	CE1_11	Chronic, maintain lifestyle changes									yes	yes
CCEPRBM	CE1_12	Chronic, find solution for new problems									yes	yes
CCESTRS	CE1_13	Chronic, maintain lifestyle changes under stress									yes	yes
Consumer en	gagement - For	r non-chronic condition sample			Ļ				ļ			
NCERESP	CE2_1	Nonchronic, responsible for managing health condition									yes	yes
NCEACTV	CE2_2	Nonchronic, active role in own health care									yes	yes
NCEACTN	CE2_3	Nonchronic, can act to prevent symptoms									yes	yes
NCEKWRX	CE2_4	Nonchronic, know prescription doses									yes	yes
NCETDIF	CE2_5	Nonchronic, tell when need to get health care									yes	yes
NCEPRDR	CE2_6	Nonchronic, tell concerns to health provider									yes	yes
NCEFOLW	CE2_7	Nonchronic, do followup treatments at home									yes	yes
NCEKNOW	CE2_8	Nonchronic, understand cause of health condition									yes	yes
NCEOPTN	CE2_9	Nonchronic, know different treatment options									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
NCESTYL	CE2_10	Nonchronic, maintain lifestyle changes									yes	yes
NCEPRNT	CE2_11	Nonchronic, know how to prevent health problems									yes	yes
NCEPRBM	CE2_12	Nonchronic, find solution for new problems									yes	yes
NCESTRS	CE2_13	Nonchronic, maintain lifestyle changes under stress									yes	yes
Consumer inf	ormation seeki	ing										
CIWEB	CI1_a	Own health info, internet									yes	yes
CIFRND	CI1_b	Own health info, from friends									yes	yes
CITV	CI1_c	Own health info, from TV or radio									yes	yes
CIBOOK	CI1_d	Own health info, from books or magazines									yes	yes
CINWSP	CI1_e	Own health info, from newspaper									yes	yes
CIOTHR	CI1_f	Own health info, other than doctor									yes	yes
CIALT	CI1_g	Own health info, from alternative sources									yes	yes
CITALK	CI2	Own health info, discuss findings with doctor									yes	yes
CIMAINT	CI3	Own health info, change approach to health									yes	yes
CITREAT	CI4	Own health info, help understand how to treat illness									yes	yes
ACIWEB	CI5_a	Other health info, internet									yes	yes
ACIFRND	CI5_b	Other health info, from friends									yes	yes
ACITV	CI5_c	Other health info, from TV or radio									yes	yes
ACIBOOK	CI5_d	Other health info, from books or magazines									yes	yes
ACINWSP	CI5_e	Other health info, from newspaper									yes	yes
ACIOTHR	CI5_f	Other health info, other than doctor									yes	yes
ACIALT	CI5_g	Other health info, from alternative sources									yes	yes
Information t	echnology											

Variable	Question	Description	199	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
ITWEB	IT1	Ever use the internet									yes	yes
ITOFTN	IT2	Internet, how often go online									yes	yes
ITCNTCT	IT3	Internet, contact doctor by email or web site									yes	yes
ITRX	IT3a_a	Internet, renew prescription									yes	yes
ITAPPN	IT3a_b	Internet, schedule appointment									yes	yes
ITDISC	IT3a_c	Internet, discuss health problem with provider									yes	yes
ITSEE	IT3a_d	Internet, see diagnostic test results									yes	yes
ITRMNDR	IT3a_e	Internet, get appointment reminder									yes	yes
ITOTHER	IT3a_f	Internet, other									yes	yes
ITALLOW	IT3b	Internet, doctor allow contact by email or web site									ves	yes
Consumer sh	opping										<i>y</i> es	y es
CSDLOOK	CS1	Look for new personal doctor									yes	yes
CSDFIND	CS2	Find a new personal doctor									yes	yes
CSDREFR	CS3A	Seek doctor, recommendation									yes	yes
CSDINS	CS3B	Seek doctor, health insurance plan information									yes	yes
CSDBOOK	CS3C	Seek doctor, books or newspaper									yes	yes
CSDFRND	CS3D	Seek doctor, friend or relative									yes	yes
CSDTV	CS3E	Seek doctor, TV or radio									yes	yes
CSDWEB	CS3F	Seek doctor, the Internet									yes	yes
CSDSOTH	CS3G	Seek doctor, other									yes	yes
CSDCMPQ	CS6	Seek doctor, source give quality comparison									yes	yes
CSDQUSE	CS7	Seek doctor, use quality comparison to choose									yes	yes
CSDCOST	CS8a	Choose doctor, cost of care									yes	yes
CSDRCMN	CS8b	Choose doctor, recommendation									yes	yes
CSDREPU	CS8c	Choose doctor, reputation									yes	yes
CSDWAIT	CS8d	Choose doctor, wait time for appointments									yes	yes

Variable	Question	Description	199	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
CSDLOC	CS8e	Choose doctor, location of practice									yes	yes
CSDNETW	CS8f	Choose doctor, in health plan network									yes	yes
CSDFOTH	CS8g	Choose doctor, other									yes	yes
CSSNUM	CS9	Specialist, see one or more in last 12 months									yes	yes
CSSWHEN	CS10	Specialist, first see more/less than 12 months ago									yes	yes
CSSFIND	CS11	Specialist, own doctor refer or find another way									yes	yes
CSSCHOI	CS12	Specialist, referred to one or given choice									yes	yes
CSSOSRC	CS13	Specialist, use sources besides referral									yes	yes
CSSREFR	CS14a	Seek specialist, other doctor recommend									yes	yes
CSSINS	CS14b	Seek specialist, health insurance plan information									yes	yes
CSSBOOK	CS14c	Seek specialist, books or newspaper									yes	yes
CSSFRND	CS14d	Seek specialist, friend or relative									yes	yes
CSSTV	CS14e	Seek specialist, TV or radio									yes	yes
CSSWEB	CS14f	Seek specialist, the Internet									yes	yes
CSSSOTH	CS14g	Seek specialist, other									yes	yes
CSSCMPQ	CS17	Seek specialist, source give quality comparison									yes	yes
CSSQUSE	CS18	Seek specialist, use quality comparison to choose									yes	yes
CSSCOST	CS19a	Choose specialist, cost of care									yes	yes
CSSRCMN	CS19b	Choose specialist, own doctor recommend									yes	yes
CSSREPU	CS19c	Choose specialist, reputation									yes	yes
CSSWAIT	CS19d	Choose specialist, wait time for appointments									yes	yes
CSSLOC	CS19e	Choose specialist, location of practice									yes	yes
CSSNETW	CS19f	Choose specialist, in health plan network									yes	yes

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	2003	2	2007
name	number		Public Use	Restr. Use								
CSSFOTH	CS19g	Choose specialist, other									yes	yes
ANYPROC	CS20	Procedure, had any in past 12 months									yes	yes
CSPRLOC	CS21	Procedure, at hospital, clinic or office									yes	yes
CSPWHEN	CS22	Procedure place, first time more/less than 12 months ago									yes	yes
CSPFIND	CS23	Procedure place, doctor refer or find another way									yes	yes
CSPCHOI	CS24	Procedure place, referred to one or given choice									yes	yes
CSPOSRC	CS25	Procedure place, use sources besides referral									yes	yes
CSPREFR	CS26a	Seek procedure place, other doctor recommend									yes	yes
CSPINS	CS26b	Seek procedure place, health insurance plan information									yes	yes
CSPBOOK	CS26c	Seek procedure place, books or newspaper									yes	yes
CSPFRND	CS26d	Seek procedure place, friend or relative									yes	yes
CSPTV	CS26e	Seek procedure place, TV or radio									yes	yes
CSPWEB	CS26f	Seek procedure place, the Internet									yes	yes
CSPSOTH	CS26g	Seek procedure place, other									yes	yes
CSPCMPQ	CS29	Seek procedure place, source give quality comparison									yes	yes
CSPQUSE	CS30	Seek procedure place, use quality comparison to choose									yes	yes
CSPCOST	CS31a	Choose procedure place, cost of care									yes	yes
CSPREPU	CS31b	Choose procedure place, reputation									yes	yes
CSPRCMN	CS31c	Choose procedure place, own doctor recommend									yes	yes
CSPWAIT	CS31d	Choose procedure place, wait time for appointments									yes	yes
CSPLOC	CS31e	Choose procedure place, location									yes	yes

Variable	Question Description number		19	96-97	19	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
CSPNETW	CS31f	Choose procedure place, in health plan network									yes	yes
CSPFOTH	CS31g	Choose procedure place, other									yes	yes

Section F: Employment and Employer Insurance Offering

Employment												
HAVEBUS	f101	Have a business or farm	yes									
WRKPAY	f111	Worked for pay last week	yes									
WORK2ND	f121	Worked more than one job last week	yes									
HRSWKX	f131	Hours per week at (main) job	yes									
HRSWKB	f13x1	Work more/less than 35 hrs wk									yes	yes
HRWK2NX	f141	Hours per week at second job	yes									
EMPTYPX	f201	Type of employer	yes									
FIRMSZX	CV	Number of employees at all locations	yes									
WAGEHRX	CV	Hourly wage	yes									
INDSTRY	CV	Type of industry	yes									
INUNION	f251	Member of union								yes		yes
CVUNION	f261	Covered by union contract								yes		yes
Employer insu	rance offering											
INSMJOB	f401	Get insurance from main job	yes									
EMPOFER	f501	Employer/union offers insurance	yes									
WHOOFER	f5011	Health insurance offered by employer vs. union								yes		yes
ELIGIB	f511	Employer insurance, eligibility	yes									
ELUNINS	f521	Employer insurance, reason for not participating (if eligible and uninsured)	yes	yes	yes	yes	yes	yes				
ELUNINS4	f521	Employer insurance, reason for not participating (if eligible)							yes	yes	yes	yes
INELIGR	f531	Employer insurance, reason ineligible	yes									
EMPMULT	f541	Employer offers multiple plans	yes									
ЕМРНМО	f551	Employer offers an HMO plan	yes									
EMPBOTH	f561	Employer offers nonHMO plan	yes									
OFFERED	CV	Employer insurance offer	yes									

Variable	Question	Description	19	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
OFRMULT	CV	Employer offers multiple plans	yes									
OFRHMO	CV	Employer offers an HMO plan	yes									
OFRNHMO	CV	Employer offers nonHMO plan	yes									
OFRBOTH	CV	Employer offers HMO and nonHMO	yes									
EMPLESS	f611	Employer offers plan with lower premium								yes		
EMPSAME	f621	Employer offers plan with same premium								yes		
CHGPLDR	f63a1	Cost of doctor visit in employer's plan								yes		
CHGPLRX	f63b1	Cost of prescription in employer's plan								yes		

**Section G: Income and Race** 

Family income	e											
FAMINCX	CV	Annual family income	yes									
CENSINX	CV	Annual Census family income	yes									
POVLEV	CV	Census family poverty level	yes									
Race, ethnicity	y, and U.S. citize	nship									-	
HISPAN	g20 or g201	Hispanic origin	yes									
ORIGMEX	g201ORIG_1	Hispanic origin, Mexican										yes
ORIGPR	g201ORIG_2	Hispanic origin, Puerto Rican										yes
ORIGCUB	g201ORIG_3	Hispanic origin, Cuban										yes
ORIGDOM	g201ORIG_4	Hispanic origin, Dominican										yes
ORIGSAL	g201ORIG_5	Hispanic origin, Salvadoran										yes
ORIGOCA	g201ORIG_6	Hispanic origin, other Central American										yes
ORIGOSA	g201ORIG_7	Hispanic origin, other South American										yes
ORIGOTH	g201ORIG_8	Hispanic origin, other										yes
RACEX	CV	Race	yes	yes	yes	yes	yes	yes				
RACEREX	CV	Race, with separate Hispanic ethnicity	yes	yes	yes	yes	yes	yes				
RACNEWX	CV	Race, 2003 question							yes	yes	yes	yes
RACETHX	CV	Race, 2003 question, with separate Hispanic ethn.							yes	yes	yes	yes
CITIZEN	g301	U.S. citizen								yes		yes
BORNCTZ	g311	Born a U.S. citizen								yes		yes

Variable	Question	Description	19	96-97	19	98-99	20	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
YRSUSX	CV	Number of years in the U.S.								yes		yes
USPAR	S9	Parents born outside 50 states									yes	yes
USSPPAR	S9a	Spouse's parents born outside 50 states									yes	yes

Section H: Closing

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
PHNOTHX	h30	Number of other telephone numbers in household	yes	yes	yes	yes	yes	yes				
PHNOTH4X	h30	Number of other telephone numbers in household, excluding cell phones							yes	yes	yes	yes
PHNOTHR	h31	Reason for other telephone numbers	yes									
NOPHN	h32	No working telephone for 2 or more weeks	yes									
NOPHNMX	h33	Number of months with no working telephone	yes									
		Weights	s and Sam	pling Varia	bles				1			
FSUX	CV	See user's guide discussion of estimation.	yes									
NFSUHX	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
NFSUX	CV	See user's guide discussion of estimation.	yes									
PPSU	CV	See user's guide discussion of estimation.	yes									
PPSUH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
PSTRATA	CV	See user's guide discussion of estimation.	yes									
PSTRATAH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
PSTRHWR	CV	See user's guide discussion of estimation.					yes	yes				
PSTRTOTH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
PSTRTOT3	CV	See user's guide discussion of estimation.	yes									

Variable	Question	Description	19	96-97	19	98-99	200	00-01	2	2003	2	007
name	number		Public Use	Restr. Use								
PPSUHWRX	CV	See user's guide discussion of estimation.					yes	yes				
PSUWRX	CV	See user's guide discussion of estimation.					yes	yes	yes	yes	yes	yes
P1H – P7H	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
P1X – P7X	CV	See user's guide discussion of estimation.	yes									
SECSTRA	CV	See user's guide discussion of estimation.	yes									
SECSTRAH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes				
SITE_STR	CV	See user's guide discussion of estimation.	yes									
STRATAWR	CV	See user's guide discussion of estimation.					yes	yes	yes	yes	yes	yes
STRATUM	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes			yes	yes
WTFAM1	CV	Family weight, site est., augmented site sample	yes	yes	yes	yes	yes	yes				
WTFAM2	CV	Family weight, national est., site sample	yes									
WTFAM3	CV	Family weight, national est., supplemental sample	yes	yes	yes	yes	yes	yes				
WTFAM4	CV	Family weight, national est., combined sample	yes	yes	yes	yes	yes	yes			yes	yes
WTFAM5	CV	Family weight, national est., augmented site sample			yes	yes	yes	yes				
WTFAM6	CV	Family weight, site est., site sample							yes	yes		
WTPER1	CV	Person weight, site est., augmented site sample	yes	yes	yes	yes	yes	yes				
WTPER2	CV	Person weight, national est., site sample	yes									
WTPER3	CV	Person weight, national est., supplemental sample	yes	yes	yes	yes	yes	yes				
WTPER4	CV	Person weight, national est., combined sample	yes	yes	yes	yes	yes	yes			yes	yes

Variable	Question	Description	19	96-97	199	98-99	200	00-01	2	003	2	007
name	number		Public Use	Restr. Use								
WTPER5	CV	Person weight, national est., augmented site sample			yes	yes	yes	yes				
WTPER6	CV	Person weight, site est., site sample							yes	yes		
WTSITE	CV	See user's guide discussion of estimation.	yes	yes								
WTSRM1	CV	SRM weight, site est., augmented site sample	yes	yes								
WTSRM2	CV	SRM weight, national est., site sample	yes	yes								
WTSRM3	CV	SRM weight, national est., supplemental sample	yes	yes								
WTSRM4	CV	SRM weight, national est., combined sample	yes	yes							yes	yes
WTSYM2	CV	Symptom weight, national est., site sample								yes		
WTSYM6	CV	Symptom weight, site est., site sample								yes		
	•		Imputation	n Flags								
_ELIGIB	CV	Imputation flag for ELIGIB	yes									
_EMOACT	CV	Imputation flag for EMOACT	yes	yes	yes	yes	yes	yes				
_EMOLESS	CV	Imputation flag for EMOLESS	yes	yes	yes	yes	yes	yes				
_EMPBOTH	CV	Imputation flag for EMPBOTH	yes									
_EMPHMO	CV	Imputation flag for EMPHMO	yes									
_EMPMULT	CV	Imputation flag for EMPMULT	yes									
_EMPOFER	CV	Imputation flag for EMPOFER	yes									
_EMPTYPX	CV	Imputation flag for EMPTYPX	yes									
_ENERGY	CV	Imputation flag for ENERGY	yes	yes	yes	yes	yes	yes				
_ERUSENX	CV	Imputation flag for ERUSENX	yes									
_FIRMSZX	CV	Imputation flag for FIRMSZX	yes									
_FLCALM	CV	Imputation flag for FLCALM	yes	yes	yes	yes	yes	yes				
_FLDOWN	CV	Imputation flag for FLDOWN	yes	yes	yes	yes	yes	yes				
_GENHLH	CV	Imputation flag for GENHLH	yes									
_HIGRADX	CV	Imputation flag for HIGRADX	yes									
_HRSWKX	CV	Imputation flag for HRSWKX	yes									
_LMTMACT	CV	Imputation flag for LMTMACT	yes	yes	yes	yes	yes	yes		<u> </u>		
_LMTSOC	CV	Imputation flag for LMTSOC	yes	yes	yes	yes	yes	yes				

Variable name	Question number	Description	19	1996-97		1998-99		2000-01		2003		2007	
			Public Use	Restr. Use									
_LMTSTR	CV	Imputation flag for LMTSTR	yes	yes	yes	yes	yes	yes					
_MCDHMO	CV	Imputation flag for MCDHMO	yes										
_MCDLST	CV	Imputation flag for MCDLST	yes	yes									
_MCDPAY	CV	Imputation flag for MCDPAY	yes	yes									
_MCDREF	CV	Imputation flag for MCDREF	yes	yes									
_MCDSIGN	CV	Imputation flag for MCDSIGN	yes	yes									
_MCRHMOP	CV	Imputation flag for MCRHMOP	yes										
_MCRLSTP	CV	Imputation flag for MCRLSTP	yes										
_MCRPAYP	CV	Imputation flag for MCRPAYP	yes										
_MCRREFP	CV	Imputation flag for MCRREFP	yes										
_MCRSIGP	CV	Imputation flag for MCRSIGP	yes										
_MCS12	CV	Imputation flag for MCS12	yes	yes	yes	yes	yes	yes					
_MENTAL	CV	Imputation flag for MENTAL	yes										
_NURCARE	CV	Imputation flag for NURCARE	yes	yes									
_OFFERED	CV	Imputation flag for OFFERED	yes										
_OFRBOTH	CV	Imputation flag for OFRBOTH	yes										
_OFRHMO	CV	Imputation flag for OFRHMO	yes										
_OFRMULT	CV	Imputation flag for OFRMULT	yes										
_OFRNHMO	CV	Imputation flag for OFRNHMO	yes										
_PAININT	CV	Imputation flag for PAININT	yes	yes	yes	yes	yes	yes					
_PCS12	CV	Imputation flag for PCS12	yes	yes	yes	yes	yes	yes					
_PHYACT	CV	Imputation flag for PHYACT	yes	yes	yes	yes	yes	yes					
_PHYLESS	CV	Imputation flag for PHYLESS	yes	yes	yes	yes	yes	yes					
_PRVHMO1	CV	Imputation flag for PRVHMO1	yes										
_PRVHMO2	CV	Imputation flag for PRVHMO2	yes										
_PRVHMO3	CV	Imputation flag for PRVHMO3	yes										
_PRVLST1	CV	Imputation flag for PRVLST1	yes										
_PRVLST2	CV	Imputation flag for PRVLST2	yes										
_PRVLST3	CV	Imputation flag for PRVLST3	yes										
_PRVPAY1	CV	Imputation flag for PRVPAY1	yes										
_PRVPAY2	CV	Imputation flag for PRVPAY2	yes										
_PRVPAY3	CV	Imputation flag for PRVPAY3	yes										

Variable	Question	Description	1996-97		1998-99		2000-01		2003		2007	
name	number		Public Use	Restr. Use								
_PRVREF1	CV	Imputation flag for PRVREF1	yes									
_PRVREF2	CV	Imputation flag for PRVREF2	yes									
_PRVREF3	CV	Imputation flag for PRVREF3	yes									
_PRVSIG1	CV	Imputation flag for PRVSIG1	yes									
_PRVSIG2	CV	Imputation flag for PRVSIG2	yes									
_PRVSIG3	CV	Imputation flag for PRVSIG3	yes									
_STHMO	CV	Imputation flag for STHMO	yes									
_STLST	CV	Imputation flag for STLST	yes	yes								
_STPAY	CV	Imputation flag for STPAY	yes	yes								
_STREF	CV	Imputation flag for STREF	yes	yes								
_STSIGN	CV	Imputation flag for STSIGN	yes	yes								
_WAGEHRX	CV	Imputation flag for WAGEHRX	yes									

# Appendix C

Sample SUDAAN
Procedure Statements

#### SAMPLE SUDAAN PROCEDURE STATEMENTS

There are a number of releases of the SUDAAN software, running on several different platforms. Although the same procedure statements are used, there can be enhancements or subtle differences from one release to the next, particularly in reading and writing external data files. The statements displayed in the examples in this appendix are tailored for SUDAAN Release 10.0.0, SAS-Callable for Windows. The user should take this into consideration when using these examples or parts of these examples verbatim.

The example procedures represent relatively simple, straightforward applications. The options (various parameters, test statistics, etc.) in the sample programs may not be suitable for all your needs. Likewise, particular types of analyses may require options that are not displayed in the sample program statements. Our intention is not to suggest analytical approaches but to provide the key parameters that capture the relevant characteristics of the sample design. These parameters are found in the SUDAAN *design*, *weight*, *nest*, *totcnt*, and *jointprob* statements. In addition, the examples are limited to simple descriptive procedures for producing means or percentages. The same sample design parameters used for descriptive procedures are used for more complex estimation procedures such as regression or logit.

The user is encouraged to review the table in Chapter 3, which indicate the appropriate weights for person- and family-level analyses. Table 4.1 from Chapter 4 explains how to choose the design variables appropriate for each type of estimate.

The following five examples are provided:

- 1. Person-level estimates
  - 1.1 National estimates for 2007
  - 1.2 National estimates for the self response
  - 1.3 National estimates from multiple rounds (2003 and 2007)
- 2. Family-level estimates
  - 2.1 National estimates for 2007
  - 2.2 National estimates from multiple rounds (2003 and 2007)

Preprocessing or recoding may be required for some variables because of missing or nonpositive data. Missing data in Household Survey files are assigned an applicable negative value (ex.: "-9 Not Ascertained," see Section 6.3 - Variable Coding Conventions). Classification (SUBGROUP) variables with zero or negative values will be treated by SUDAAN as missing and dropped from the procedure. This does not hold true for analysis variables (VAR) where zero or negative values are valid. Records with zero weights will automatically be excluded from estimates produced in SUDAAN procedures.

In using SUDAAN, the full sample should be processed even when analyses are limited to subgroups or subpopulations. This is to ensure the correct computation of the sampling variance. The SUDAAN statement SUBPOPN should be used to identify the specific analytic subpopulation of interest. The sampling variance estimates SUDAAN computes may be wrong if the file is reduced to a specific subpopulation prior to running the procedure.

The SUDAAN examples for national estimates use the DDF option, which overrides the default denominator degrees of freedom. In SUDAAN, the default denominator degrees of freedom is the difference between the number of PSUs and the number of first stage strata, which is appropriate for most surveys. We included the DDF option to provide researchers with an approximation of the true degrees of freedom that will be valid for most significance tests. The DDF for the full sample is also appropriate for analyses of subpopulations, because the full design is being utilized in the sampling variance computation.

#### 1. Person-Level Estimates

The examples in this section are appropriate for person-level analyses.

#### 1.1 National Estimates for 2007

This example estimates the mean number of doctor visits (DRVISNX) and hospital stays (HSPSTYN) by race/ethnicity (RACETHX). Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R5PER, consists of all 17,797 people in the 2007 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX).

```
proc descript data=r5per design=uneqwor ddf=6500;
   nest pstrata ppsu secstra nfsux / missunit;
   totcnt pstrtot3 _zero_ _minus1_ _zero_;
   jointprob p1x p2x p3x p4x p5x p6x p7x;
   weight wtper4;
   subgroup racethx;
   levels 4;
   var drvisnx hspstyn;
   rformat racethx racethx.;
   print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
   rtitle "National Estimates";
```

## 1.2 National Estimates from the Self Response Sample

This example estimates the proportion of adults and children who did not receive the medical care needed during the past 12 months (UNMET). The estimates are stratified by race/ethnicity (RACETHX) and include standard errors, population counts, and design effects in the output. The input file, R5PER, consists of all 17,797 people in the 2007 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads only the 16,106 observations for the self response sample; the other 1,691 observations are skipped because the weight variable WTSRM4 is nonpositive.

```
proc descript data=r5per design=uneqwor ddf=6500;
   nest pstrata ppsu secstra nfsux / missunit;
   totcnt pstrtot3 _zero_ _minus1_ _zero_;
   jointprob plx p2x p3x p4x p5x p6x p7x;
   weight wtsrm4;
   subgroup racethx;
   levels 4;
   var unmet;
   rformat racethx racethx.;
   print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
   rtitle "National Estimates, Self Response Sample";
```

## 1.3 National Estimates from Multiple Rounds (2003 and 2007)

This example combines data from 2007 (Round Five) and 2003 (Round Four) to calculate pooled means for three variables. Specifically, it estimates the mean number of doctor visits (DRVISNX), emergency room visits (ERUSENX), and hospital stays (HSPSTYN) for the Medicare enrollee subpopulation. Estimates are produced separately for the 2007 sample, the 2003 sample, and the combined sample from both rounds. Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R45PER, consists of 64,384 people (all 46,587 people in the 2003 sample and all 17,797 people in the 2007 sample). It is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads all 46,587 observations because the weight variable WTPER4 is nonpositive for all observations.

```
proc descript data=r45per design=uneqwor ddf=6500;
    subpopn mcare=1 / name="Medicare Enrollees";
    nest pstrata ppsu secstra nfsux / missunit;
    totcnt pstrtot3 _zero_ _minus1_ _zero_;
    jointprob p1x p2x p3x p4x p5x p6x p7x;
    weight wtper4;
    subgroup round;
    levels 2;
    tables round;
    var drvisnx hspstyn erusenx;
    rformat round round.;
    print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
    rtitle "Combined Round 4/Round 5 National Estimates";
```

#### 2. Family-Level Estimates

The following examples are based on the use of a family-level input file. The user is encouraged to review the discussion in Section 5.4 from Chapter 5, which provides suggestions for converting a person-level file to the family level and on summarizing person-level responses at the family level.

#### 2.1 National Estimates for 2007

This example produces percentage estimates displaying the family informant's satisfaction with health care (CRSAFX), for families with any Medicaid coverage. Standard errors of the percentages, population counts, and sample design effects are also included in the output. The input file, R5FAM, consists of all 9,407 families in the 2007 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX).

```
proc crosstab data=r5fam design=uneqwor ddf=6500;
   nest pstrata ppsu secstra nfsux / missunit;
   totcnt pstrtot3 _zero_ _minus1_ _zero_;
   jointprob p1x p2x p3x p4x p5x p6x p7x;
   weight wtfam4;
   subgroup fmcaid crsafx;
   recode fmcaid=(0 1);
   levels 2 5;
   tables fmcaid*crsafx;
   rformat crsafx crsafx.;
   print nsum wsum rowper serow deffrow / style=nchs
        wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
   rtitle "Family-Level National Estimates";
```

## 2.2 National Estimates from Multiple Rounds (2003 and 2007)

This example combines data from 2007 (Round Five) and 2003 (Round Four) to calculate a pooled mean. Specifically, it produces percentage estimates displaying the family informant's satisfaction with their choice of a primary care physician, grouped into 5 categories (DRCHOCX). Estimates are produced separately for the 2007 sample, the 2003 sample, and the combined sample from both rounds. Standard errors, population counts, and design effects are also included in the output. The weight WTFAM6 in the 2003 data will have to be renamed to WTFAM4 to be consistent with the 2007 data. The input file, R45FAM, consists of 34,826 families (all 25,419 families in the 2003 sample and all 9,407 families in the 2007 sample). It is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads all 34,826 observations because the weight variable WTFAM4 is nonpositive for all observations.

```
proc crosstab data=r45fam design=uneqwor ddf=6500;
   nest pstrata ppsu secstra nfsux / missunit;
   totcnt pstrtot3 _zero_ _minus1_ _zero_;
   jointprob p1x p2x p3x p4x p5x p6x p7x;
   weight wtfam4;
   subgroup round drchocx;
   levels 2 5;
   tables round*drchocx;
   rformat round round.;
   rformat drchocx drchocx.;
   print nsum wsum rowper serow deffrow / style=nchs
       wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
   rtitle "Combined Round 4/Round 5 National Estimates";
```

# Appendix D Sample Stata and SAS Statements

#### SAMPLE STATA AND SAS STATEMENTS

This appendix provides basic person-level examples to illustrate the use of Stata and SAS with the "with-replacement" (WR) parameters (see Chapter 4, Table 4.3). Data analysis at the family level is analogous.

There are a number of releases of Stata and SAS software, running on several different platforms. Although the same statements are used, there can be enhancements or subtle differences from one release to the next. The statements displayed in the examples in this appendix are tailored for Stata SE 8.2 and SAS 9.2. Newer releases of the Stata software may have more capabilities to accommodate the sample design of the 2007 Household Survey and could produce results closer to SUDAAN results.

The user is encouraged to review the table in Chapter 3, which indicate the appropriate weights for person- and family-level analyses. Table 4.3 from Chapter 4 explains how to choose the design variables appropriate for national estimates.

The following three person-level examples are provided:

- 1. National estimates for 2007
- 2. National estimates for the self response sample
- 3. National estimates from multiple rounds (2007 and 2003)

In using Stata and SAS, the full sample should be processed even when analyses are limited to subgroups or subpopulations. This is to ensure the correct computation of the sampling variance. The sampling variance estimates may be wrong if the file is reduced to a specific subpopulation.

#### 1. National Estimates for 2007

This example estimates the mean number of doctor visits (DRVISNX) and hospital stays (HSPSTYN) by race/ethnicity (RACETHX). Standard errors of the means and population counts are also included in the output. The input file, R5PER, consists of all 17,797 people in the 2007 sample.

```
Stata
  use "c:\data\r5per.dta";
  svyset [pweight=wtper4], strata(stratawr) psu(psuwrx);
  svymean drvisnx hspstyn, by(racethx) obs size deft;

SAS
  proc surveymeans data=r5per nobs sumwgt mean stderr;
  domain racethx;
  stratum stratawr;
  cluster psuwrx;
  weight wtper4;
  format racethx racethx.;
  var drvisnx hspstyn;
  title 'National Estimates';
```

## 2. National Estimates for the Self Response Sample

This example estimates the proportion of adults and children who did not receive the medical care needed during the past 12 months (UNMET). The estimates are stratified by race/ethnicity (RACETHX) and include standard errors and population counts in the output. The input file, R5PER, consists of all 17,797 people in the 2007 sample. Stata and SAS read only the 16,106 observations for the self response sample; the other 1,691 observations are skipped because the weight variable WTSRM4 is nonpositive.

```
Stata
  use "c:\data\r5per.dta";
  svyset [pweight=wtsrm4], strata(stratawr) psu(psuwrx);
  svymean unmet, by(racethx) obs size deft;

SAS
  proc surveymeans data=r5per nobs sumwgt mean stderr;
  domain racethx;
  stratum stratawr;
  cluster psuwrx;
  weight wtsrm4;
  format racethx racethx.;
  var unmet;
  title 'National Estimates, Self Response Module';
```

## 3. National Estimates from Multiple Rounds (2007 and 2003)

This example combines data from 2003 (Round Four) and 2007 (Round Five) to calculate pooled means for three variables. Specifically, it estimates the mean number of doctor visits (DRVISNX), emergency room visits (ERUSENX), and hospital stays (HSPSTYN) for the Medicare enrollee subpopulation. Estimates are produced separately for the 2003 sample, the 2007 sample, and the combined sample from both rounds. Standard errors of the means, population counts, and sample design effects are also included in the output. The weight WTPER6 in the 2003 data will have to be renamed to WTPER4 to be consistent with the 2007 data. The input file, R45PER, consists of 64,384 people (all 46,587 people in the 2003 sample and all 17,797 people in the 2007 sample). Stata and SAS read all 46,587 observations because the weight variable WTPER4 is nonpositive for all observations.

```
Stata
  use "c:\data\r45per.dta";
  svyset [pweight=wtper4], strata(stratawr) psu(psuwrx);
  svymean drvisnx hspstyn erusenx, subpop(mcare) obs size deft;
  svymean drvisnx hspstyn erusenx, by(round) subpop(mcare) obs size deft;

SAS
  proc surveymeans data=r45per(where=(mcare=1)) nobs sumwgt mean stderr;
  domain round;
  stratum stratawr;
  cluster psuwrx;
  weight wtper4;
  var drvisnx hspstyn erusenx;
  format round round.;
  title 'National Estimates, Combined Round 4/5 Sample';
```