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Survey Questionnaire Documentation

**Georgia State University
Georgia Health Insurance Survey**

**Final Survey Instrument and Survey Variable
Documentation**

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About This Document

This document contains the questions asked during the Georgia State University Health Policy Center 2008 Health Insurance Survey. The document is designed to be used with the data set that is provided along with this document.

In referencing the survey data, the variable names in the survey are set to match the variable names found in this document. In cases where variable names are different from that found in the survey it has been noted in parentheses.

The data set also contains a number of variables that were assigned by the CATI program or were derived using other survey variables. These computed variables have also been included in this documentation to provide data users with their definitions and category values (where appropriate). Such variables will be noted as computed with the phrase **COMPUTED VARIABLE** following the variable and its description. A description of which survey variables went into the computation of a computed variable is also included.

There were several questions that lead the respondent into different sections in the survey. These are not included in the final data set. These are noted as “not included in data set” in this document.

Finally, several variables were asked at the family level within the survey to save time during the interview. These variables have been modified or transposed into person level variables. These are noted as “Transposed variable” and the person level category labels found in the data set are noted.

The spreadsheet “GA HIS Data Dictionary.xls” is the companion documentation to this survey document. This spreadsheet provides a quick reference to the survey variables and the page number from this document on which the question or variable can be found.

DATA SET NOTE: In some cases a variable will have a value of zero. In most cases this means that the household member was not asked this question or for computed variables, a value was not assigned because it was not applicable to the household member. In these cases, a value of zero should be considered missing. Please consult the category values to determine if zero is a valid response.

I. Survey Lead-in Statement, Introduction, Respondent Selection

Interviewer persuader statement

We are doing this study on behalf of the Georgia Health Policy Center at Georgia State University to help the state evaluate the health insurance coverage and health insurance needs of Georgia residents.

Your interview will count for a lot because your household represents many others in your community. For our results to be valid and useful, it is very important that we interview the people we select.

The study should take about 15 to 20 minutes, depending on the size of your household.

Your telephone number was randomly generated by a computer program.

All of the information you provide will be kept strictly confidential. Your answers will be combined with those of others **WITHOUT** your name or phone number.

The study is being sponsored by the Georgia Health Policy Center at Georgia State University. If you would like to find out more about our study, you can call Dr. Brian Robertson of Market Decisions at 1-800-293-1538 ext 102. or Dr. Angela Snyder of the Georgia Health Policy Center at 404-413-0285.

Lead

Lead in statement

(not included in data set)

Hello, I'm _____ calling for the Georgia Health Policy Center at Georgia State University. We are doing an important 15-20 minute study to learn about health insurance coverage and the health insurance needs of Georgia residents. Your household was selected at random. will you help us? First, is this a residence?

INTS READ AS NEEDED: your participation counts for a lot because you represent many others in your community. Your information is strictly confidential. This is not a sales call.

- 11 YES, THIS IS A RESIDENCE
- 15 CALL BACK [Wait - Schedule Time]
- 17 OTHER
- 19 CONTACT ONLY
- 21 BUSINESS
- 23 LANGUAGE (GOTO VERLENG)
- 25 INFIRM (GOTO VERRES)
- 27 GROUP QUARTERS, INSTITUTION (DORMS)
- 29 WRONG NUMBER
- 31 HANG UP
- 33 RESPONDENT NOT AVAILABLE DURING DATA COLLECTION PERIOD
- 88 HOUSEHOLD REFUSAL
- 89 WANT MORE INFORMATION ABOUT STUDY

INFOQ

Information screen for interviewers (not included in data set)

GENERAL RELUCTANCE

Your participation in this study is very important. The purpose of the survey is to find out how many Georgians have health insurance and how they get their health insurance. We need to know more about health insurance coverage in Georgia to better guide state policy and programs.

All of the information you provide will be kept strictly confidential.

We are doing this study on behalf of the Georgia Health Policy Center at Georgia State University

STUDY LENGTH? The study will take about 15 to 20 minutes, depending on the size of your household.

HOW WAS I SELECTED? Your telephone number was selected at random. Your participation will make this study more accurate.

If you would like to find out more about our study, you can call Dr. Brian Robertson of Market Decisions at 1-800-293-1538 ext 102. or Dr. Angela Snyder of the Georgia Health Policy Center at 404-413-0285.

[ENTER <1> TO CONTINUE]

RES1

(not included in data set)

Is this a...

- 1 Private residence where SOMEONE lives at least 6 months of the year?
- 2 Vacation residence or vacation rental?
- 3 An institutional residence?
- 4 A group home?

8 DK

9 REFUSED

RES2

(not included in data set)

Does at least one person under the age of 65 live in this household?

1 YES

2 NO

8 DK

9 REF

IF NO: Thank you. We are only interviewing households with at least one person who has not yet reached age 65.

PHONE1

Did I reach you on a cell phone?

IF YES ASK: IS THIS THE ONLY PHONE THAT YOUR HOUSEHOLD USES FOR TELEPHONE CALLS OR DO YOU ALSO HAVE A LANDLINE?

- 1 YES, CELL PHONE ONLY PHONE (CONTINUE)
- 2 YES, CELL PHONE BUT WE HAVE A LANDLINE (TERMINATE)
- 3 NO, NOT A CELL PHONE, LANDLINE (CONTINUE)

8 DK

9 REF

SEL1

(not included in data set)

I'd like to talk with the adult in the household who knows the most about the health insurance coverage and health care of the people living there. Is that you?

- 1 YES, SPEAKING
- 3 NO, SOMEONE ELSE
- 5 WANT MORE INFORMATION ABOUT STUDY

- 8 DK
- 9 REF

FND1

(not included in data set)

Is there someone who can help you answer the question?

IF NO, GET A TIME WHEN THEY MIGHT BE AVAILABLE AND SCHEDULE A CALLBACK

- 1 YES
- 3 NO (CALLBACK)

- 8 DK
- 9 REF

SELR

(not included in data set)

Is this person available now?

- 1 YES (ASK RPH)
- 2 SPEAKING (ASK PH2)
- 3 NOT AVAILABLE NOW - SCHEDULE CALLBACK
- 4 OTHER
- 5 LANGUAGE
- 6 INFIRM
- 7 UNAVAILABLE DURING DATA COLLECTION

- 9 REF

RPH

(not included in data set)

Hello, I'm _____ calling for the Georgia Health Policy Center at Georgia State University. We are doing an important to learn about health insurance coverage and the health insurance needs of Georgia residents.

Do you have some time to answer some questions for me?

INTS READ AS NEEDED: Your participation counts for a lot because you represent many others in your community. Your information is strictly confidential. This is not a sales call.

IF ASKED: The survey will take about 15 to 20 minutes depending on answers.

- 1 YES
- 5 NO, NOT A GOOD TIME (SCHEDULE CALLBACK)
- 7 WANT MORE INFORMATION ABOUT STUDY

- 9 REF

PH2

(not included in data set)

Could you answer some questions for me now?

- 1 YES
- 5 NO, NOT A GOOD TIME - SCHEDULE CALLBACK
- 7 WANT MORE INFORMATION ABOUT STUDY

- 9 REF

INTO

Statement of implied consent (not included in data set)

Thank you. I want to assure you that this study is confidential and the results of this study will be reported in combined form only.

You will not personally gain anything from completing this survey, however your participation will help the state evaluate the health insurance coverage and health insurance needs of Georgia residents.

If there are questions you do not wish to answer, let me know and we will skip them.

My supervisor may listen in on calls to evaluate my performance if that is all right with you.

- 1 PROCEED WITH STUDY
- 5 NOT A GOOD TIME, CALL BACK
- 9 REFUSED

PER

Persuader statement for initial refusals (not included in data set)

We are doing this study on behalf of the Georgia Health Policy Center at Georgia State University to help the state evaluate the health insurance coverage and health insurance needs of Georgia residents. Your interview will count for a lot because your household represents many others in your community.

The study will take about 15 to 20 minutes, depending on the size of your household.

Your telephone number was randomly generated by a computer program. All of the information you provide will be kept strictly confidential. Your answers will be combined with those of others.

If you would like to find out more about our study, you can call Dr. Brian Robertson of Market Decisions at 1-800-293-1538 ext 102. or Dr. Angela Snyder of the Georgia Health Policy Center at 404-413-0285.

- 1 AGREES TO COOPERATE
- 3 NOT A GOOD TIME, CALL BACK
- 5 SOFT REFUSAL (RESPONDENT KNOWN)
- 6 SOFT REFUSAL (HOUSEHOLD)
- 7 HARD REFUSAL (RESPONDENT KNOWN)
- 8 HARD REFUSAL (HOUSEHOLD)
- 9 FINAL REFUSAL CONVERSION ATTEMPT

ANMACH

Message left on answering machine dispositions (not included in data set)

INTS: LEAVE MESSAGE ON IDENTIFIED RESIDENTIAL ANSWERING MACHINES
ON THE 1st and 7th ATTEMPTS.

Hello, my name is _____ and I am calling on behalf of the
Georgia Health Policy Center at Georgia State University. We are conducting an important
study to learn about health insurance coverage in Georgia.
Another interviewer will be contacting your household in the next few days.

If you have any questions about the survey or need to
verify it as legitimate, please feel free to call:
Dr. Brian Robertson at 1-800-293-1538, extension 102.

Thank you and goodbye.

INTS CODING FOR ANSWERING MACHINES

- 1 IDENTIFIED RESIDENTIAL ANSWERING MACHINE
- 2 UNKNOWN IF RESIDENTIAL ANSWERING MACHINE

II. ID Variables

respid **(computed variable)**

Resident ID
Unique Identifier assigned to each person

familyid **(computed variable)**

Family ID
ID number assigned to families. All members of the family will have the Family ID Number

hhid **(computed variable)**

Household ID
ID number assigned to households. All members of the household will have the Household ID Number

HHflag **(computed variable)**

Flag for Person who is Head of the Household
This variable identifies the head of household. Use this flag for selecting cases for household level analysis

1 = Select for Household Analysis

famhflag **(computed variable)**

Flag for Person who is Head of the Family Unit
This variable identifies the head of each family unit. Use this flag for selecting cases for family level analysis

1 = Select for Family Analysis

person
(computed variable)

Person in the household

Respflag
(computed variable)

Flag for Person who was interviewed
This variable identifies the head of each family unit.

1 = Select for Respondent

fstrata
(computed variable)

Sample Strata

- 1 North Rural
- 2 South Rural
- 3 Suburban Atlanta
- 4 Urban Atlanta
- 5 All Other Metro Areas
- 6 Over Sample - North Rural
- 7 Over Sample - South Rural
- 8 Over Sample - Suburban Atlanta
- 9 Over Sample - Urban Atlanta
- 10 Over Sample - All Other Metro Areas

nstrata
(computed variable)

Region

- 1 North Rural
- 2 South Rural
- 3 Suburban Atlanta
- 4 Urban Atlanta
- 5 All Other Metro Areas

III. Household Level Information

Q00

(not included in data set)

First we need to know a little about your household.

PROMPT IF RELUCTANT:

We need this information to assure that we represent all Georgia residents. Thank you for your patience.

ENTER <1> TO CONTINUE

HHQ01 1, HHQ01 2, HHQ01 3, HHQ01 4, HHQ01 5

(not included in data set)

In what Georgia County is your home located?

[WILL SEE A LIST OF COUNTIES BASED ON THE STRATA]

County

(computed variable) *This variable is computed from fips and HHQ01_1 to HHQ01_5*

County of Residence

120 Banks	165 Warren	261 Long
121 Butts	166 White	262 Lowndes
122 Catoosa	167 Whitfield	263 Macon
123 Chattooga	168 Wilkes	264 Marion
124 Clarke	220 Appling	265 McDuffie
125 Dade	221 Atkinson	266 Miller
126 Dawson	222 Bacon	267 Mitchell
127 Elbert	223 Baker	268 Montgomery
128 Fannin	224 Baldwin	269 Pierce
129 Floyd	225 Ben Hill	270 Pulaski
130 Franklin	226 Berrien	271 Quitman
131 Gilmer	227 Bleckley	272 Randolph
132 Gordon	228 Brantley	273 Schley
133 Greene	229 Brooks	274 Screven
134 Habersham	230 Bulloch	275 Seminole
135 Hall	231 Burke	276 Stewart
136 Hancock	232 Calhoun	277 Sumter
137 Haralson	233 Camden	278 Talbot
138 Hart	234 Candler	279 Tattnall
139 Heard	235 Charlton	280 Taylor
140 Jackson	236 Clay	281 Telfair
141 Jasper	237 Clinch	282 Terrell
142 Lamar	238 Coffee	283 Thomas
143 Lincoln	239 Colquitt	284 Tift
144 Lumpkin	240 Cook	285 Toombs
145 McIntosh	241 Crawford	286 Treutlen
146 Meriwether	242 Crisp	287 Turner
147 Monroe	243 Decatur	288 Upson
148 Morgan	244 Dodge	289 Ware
149 Murray	245 Dooly	290 Washington
150 Oconee	246 Early	291 Wayne
151 Oglethorpe	247 Echols	292 Webster
152 Pickens	248 Emanuel	293 Wheeler
153 Pike	249 Evans	294 Wilcox
154 Polk	250 Glascock	295 Wilkinson
155 Putnam	251 Glynn	296 Worth
156 Rabun	252 Grady	320 Barrow
157 Spalding	253 Irwin	321 Bartow
158 Stephens	254 Jeff Davis	322 Carroll
159 Taliaferro	255 Jefferson	323 Cherokee
160 Towns	256 Jenkins	324 Coweta
161 Troup	257 Johnson	325 Douglas
162 Union	258 Lanier	326 Fayette
163 Walker	259 Laurens	327 Forsyth
164 Walton	260 Liberty	328 Henry

County (continued)

(computed variable) *This variable is computed from fips and HHQ01_1 to HHQ01_5*

County of Residence

329 Newton	520 Bibb	528 Houston
330 Paulding	521 Bryan	529 Jones
331 Rockdale	522 Chatham	530 Lee
401 Clayton	523 Chattahoochee	531 Madison
402 Cobb	524 Columbia	532 Muscogee
403 DeKalb	525 Dougherty	533 Peach
404 Fulton	526 Effingham	534 Richmond
405 Gwinnett	527 Harris	535 Twiggs

HH02

What is your zip code?

INTS: ENTER ALL 5 DIGITS

30000-39999 ENTER NUMBER

88888 DK

99999 REF

HH03

Do you own or rent the house or apartment where you currently live?

1 OWN

2 RENT

8 DK

9 REF

HHLIVE

How long have you lived in Georgia?

ENTER YEARS AND MONTHS

HH04

How many telephone numbers do you have in your household?

IF MORE THAN ONE:

Do not include cell phones or numbers used for computers, faxes or modems. How many of these are residential numbers?

1 TO 6 ENTER NUMBER OF LINES

7 7 OR MORE LINES

8 DON'T KNOW

9 REF

HH05

Was there anytime in the last 12 months that you did not have a working telephone for one week or longer? Please think about only phones in your house and not any cell phones you or others may have.

1 YES

2 NO

8 DK

9 REF

HH05a

Asked of those who experienced an interruption in telephone service

For how many months of the past 12 months did you not have a working telephone for one week or longer?

0 LESS THAN ONE MONTH

1 - 12 ENTER NUMBER OF MONTHS

98 DK

99 REF

Phone5

Excluding students living away at school, do you or any other members of your household have a working cellular phone number?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

Phone6

Of all the phone calls that you or any other members of your household receive, about how many are received on a cell phone? Would you say...
(READ RESPONSES)

- 1 All or almost all calls
- 2 More than half
- 3 Less than half or
- 4 Very few or none

- 8 DK
- 9 REF

HHCOMP

Identification of household members for survey questions (not included in data set)

Now I need to find out how many people live or stay in your household. This includes family, boarders, roommates and anyone else who lives there most of the year. Including yourself, how many people are in your household?

INTS: Include those temporarily absent such as traveling, or in the hospital.
DO NOT include those living elsewhere such as those on military duty
BUT DO INCLUDE at school for more than 6 months of the year.

INTS: IF 9 OR MORE ASK: Is this a dorm or some other type of group quarters where people live together who are not related?
CODE AS 11 IF YES

- 0 NO ONE
- 1 – 8 ENTER NUMBER
- 9 9 OR MORE

- 98 DK
- 99 REF
- 11 GROUP QUARTERS, INSTITUTE (TERMINATE)

hhtot

(computed variable) *This variable is computed from HHCOMP*

Number of People in Household

famsize

(computed variable)

Number of People in Family

HHCMP1

(not included in data set)

Please give me just the FIRST NAMES of the people who are living in your household. I'll ask for the names one at a time.

INTS: IF THEY ARE UNCOMFORTABLE ABOUT GIVING NAMES: If you would prefer, just give me a label that will allow you to identify each person when I ask questions about them.

[PRESS 1 TO CONTINUE]

CNAME

(not included in data set)

FOR 1ST PERSON

Please tell me the first name of the person who OWNS/RENTS this house or apartment. Let me know if this is you.

FOR OTHER PEOPLE

Please tell me (your name)/the name of the next member of the household.

IF ONLY ONE PERSON

ENTER 1 TO CONTINUE

ENTER NAME AS "YOU" ON NEXT SCREEN

IF THERE ARE MORE THAN 8 PEOPLE – ON THE 8th PERSON

For this survey, I will only be asking about 8 people in the household. Of those who you have not mentioned, who had the most recent birthday?

INTS: IF THE RESPONDENT IS NOT THE HEAD OF HOUSEHOLD THEN ALWAYS PUT THEM AS THE SECOND PERSON

FOR THE RESPONDENT, ENTER THE NAME AS "YOU."

IF THERE ARE NO MORE PEOPLE, THEN SELECT NO MORE PEOPLE

1 SELECT TO ENTER PERSON'S NAME

2 NO MORE PEOPLE

HHNAME

(not included in data set)

INTS: ENTER THE NAME OF THE PERSON HERE

INTS: IF THIS IS THE RESPONDENT, ENTER "YOU"

IF RELUCTANT: If you'd rather not give names, just provide some way that you can tell household members apart.

ENTER NAME AND PRESS ENTER:

IV. Person Level Demographics

(Asked about each household member)

DEM01

(not included in data set)

Next, I am going to ask a few questions about each member in the household.

[PRESS 1 TO CONTINUE]

I:

key 1

GEND

(includes imputed values)

Are/is FILL NAME male or female?

[INTERVIEWER: CODE WITHOUT ASKING IF DISCERNABLE BY NAME OR VOICE FOR RESPONDENT.]

1 Male
2 Female

8 DK
9 REF

AGE1

And FILL NAME's age on her/his/your last birthday?

[INTERVIEWER: ENTER AS WHOLE NUMBER. IF PARTIAL YEAR IS GIVEN, SUCH AS WITH A CHILD, ROUND TO LAST BIRTHDAY]

0 IF UNDER ONE YEAR OLD
1 TO 96 ENTER AGE OF PERSON
97 97 OR GREATER

98 DK
99 REF

AGE2

**Ask of those indicating dk or ref to age01
(not included in data set)**

We would like to get a rough estimate of the age of each person living in the household.
{ Are/is you/she/he }

[INTERVIEWER: READ LIST]

- 10 0 - 5 years old
- 11 6 - 13 years old
- 12 14 - 18 years old
- 13 19 - 23 years old
- 14 24 - 29 years old
- 15 30 - 44 years old
- 16 45 - 64 years old
- 17 65 - 84 years old
- 18 85 years or older
- 98 DK
- 99 REF

Agecat1

(computed variable) *Computed from age1 and age2*

Age of Resident

- 1 0 - 17
- 2 18 - 34
- 3 35 - 49
- 4 50 - 64

Agecat2

(computed variable) *Computed from age1 and age2*

Age of Resident

- 1 0 - 17
- 2 18 - 64

Agecat3

(computed variable) *Computed from age1 and age2*

Age of Resident– Medicaid Analysis

- 1 0 - 18
- 2 19 - 64

Agecat4

(computed variable) *Computed from age1 and age2*

Age of Child

- 1 0 - 5
- 2 6 - 10
- 3 11 - 17

Agecat5

(computed variable) *Computed from age1 and age2*

Age of Child – Medicaid Analysis

- 1 0 - 5
- 2 6 - 10
- 3 11 - 18

MAR

Ask of those 16 and older

Are/is FILL NAME
(READ RESPONSES)

- 1 Currently married
- 2 Widowed
- 3 Separated
- 4 Divorced
- 5 Never been married
- 6 Living with a partner

- 8 DK
- 9 REF

EDU

Ask of those 18 and older

What was the highest grade in school that FILL NAME have/has completed?

READ ONLY IF NECESSARY:

- 10 Never attended school or only attended kindergarten
 - 11 Grades 1 through 8 (Elementary)
 - 12 Grades 9 through 11 (Some high school)
 - 13 Grade 12 or GED (High school graduate)
 - 14 College 1 year to 3 years (Some college or technical school)
 - 15 College 4 years or more (College graduate)
 - 16 Post Graduate, Professional Degree
-
- 98 Don't know/Not sure
 - 99 Refused

INSCH1

Ask of those age 18-24

Is/Are FILL NAME
a full-time high school or college student?

[INTERVIEWER: THE DEFINITION OF A FULL-TIME SHOULD BE AS
DEFINED BY THIS PERSON'S SCHOOL.]

- 1 YES
 - 2 NO
-
- 8 DK
 - 9 REF

ETHN

(includes imputed values)

Is FILL NAME Hispanic or Latino?

- 1 YES
 - 2 NO
-
- 8 DK
 - 9 REF

PRACE

(computed variable) *Computed from RACE and RACE1*

Primary Race Calculated from Race and Race1

- 10 White
- 11 Black or African American
- 12 Asian
- 13 Native Hawaiian or Other Pacific Islander
- 14 American Indian, Alaska Native
- 95 Other (SPECIFY)

- 97 NO MORE
- 98 DK
- 99 REF

RACE

Which of the following would you say
is _____'s race?

(READ RESPONSES - SELECT ALL MENTIONED BY RESPONDENT)

- 10 White
- 11 Black or African American
- 12 Asian
- 13 Native Hawaiian or Other Pacific Islander
- 14 American Indian, Alaska Native
- 95 Other (SPECIFY)

- 97 NO MORE
- 98 DK
- 99 REF

RACE1 to RACE3

Ask of those indicating more than one race in RACE

This is a multiple response variable.

Which one of these groups would you say best represents your/his/her race?

- 10 White
- 11 Black or African American
- 12 Asian
- 13 Native Hawaiian or Other Pacific Islander
- 14 American Indian, Alaska Native
- 95 Other (SPECIFY)

- 98 DK
- 99 REF

BORN

In what country was FILL NAME born?
(DO NOT READ)

40 UNITED STATES	76 England
41 PUERTO RICO	77 Ethiopia
42 OTHER U.S. TERRITORY	78 Europe
43 CAMBODIA	79 France
44 CANADA	80 Greece
45 CHINA	81 Guatemala
46 CUBA	82 Haiti
47 DOMINICAN REPUBLIC	83 Guyana
48 EL SALVADOR	84 India
49 ETHIOPIA	85 Indonesia
50 GERMANY	86 Iran
51 INDIA	87 Israel
52 JAMAICA	88 Italy
53 JAPAN	89 Malaysia
54 KOREA	90 Nigeria
55 LAOS	91 Pakistan
56 LIBERIA	92 Panama
57 MEXICO	93 Peru
58 PHILIPPINES	94 Portugal
59 RUSSIA, BOSNIA, KOSOVO, YUGOSLAVIA	100 Romania
60 SOMALIA	101 Samoa
61 SUDAN	102 South Africa
62 THAILAND	103 South America
63 TOGO	104 Spain
64 TIBET	105 Sri Lanka
65 VIETNAM	106 Sweden
66 Australia	107 Taiwan
67 Austria	108 Trinidad
68 Africa	109 Ukraine
69 Asia	110 Venezuela
70 Barbados	111 West Indies
71 Brazil	112 Zimbabwe
72 Cayman Islands	995 OTHER
73 Columbia	COUNTRY
74 Denmark	998 DK
75 Ecuador	999 REF

NYEARSUS

(computed variable) *Computed from YEARSUS1 and YEARSUS2*

How many years has person lived in the U.S.?

1 1 year or less

98 DK

99 REF

YEARSUS

Ask if person was not born in US

(not included in data set)

When did FILL PERSON come to live in the U.S.?

(INTERVIEWER SHOULD SELECT ONE METHOD OF ENTRY)

IF PERSON GIVES YEAR - SELECT 1

IF PERSON GIVES NUMBER OF YEARS AGO - SELECT 2

1 ENTER YEAR PERSON CAME

2 ENTER NUMBER OF YEARS AGO PERSON CAME

8 DK

9 REF

YEARSUS1

(not included in data set)

ENTER YEAR IN WHICH PERSON CAME TO THE US

1900 - 2008 ENTER YEAR

YEARSUS2

(not included in data set)

ENTER NUMBER OF YEARS AGO PERSON CAME TO THE US

1 ONE YEAR OR LESS

2-96 ENTER NUMBER OF YEARS AGO

97 97 OR MORE YEARS AGO

AGECHK

**Ask if everyone in family is 65 or older
(not included in data set)**

I noticed that none of the household members you have mentioned are under the age of 65. Is this correct?

IF NO, ASK: Of the people you mentioned who is under 65?

INT: MAKE A NOTE OF WHO IS UNDER 65, THEIR ACTUAL AGE, AND PROCEED

1 Yes

2 No

8 DK

9 REF

V. Family Unit Formation

SETUNIT

(not included in data set)

INTS: THIS VARIABLE INITIALIZES THE FAMILY UNITS. IF THERE ARE PROBLEMS IN ASSIGNMENT AT THE END, YOU'LL COME BACK HERE AND GO THROUGH THE SECTION AGAIN

ENTER 1 TO CONTINUE

npchk

(computed variable) *Computed from Fam1, fam2, fam3, age1, mar, insch1. See Survey Technical Documentation for family unit assignment criteria.*

NEW FAMILY UNIT OF PERSON

- 1 FAMILY1
- 2 FAMILY2
- 3 FAMILY3
- 4 FAMILY4
- 5 FAMILY5
- 6 FAMILY6
- 7 FAMILY7
- 8 FAMILY8

FAM1

Ask of all but the head of household

What is FILL NAME (r/'s) relationship to FILL HEAD OF HOUSEHOLD?

0 Head of household

11 Husband (spouse)

12 Wife (spouse)

14 Child, Son or Daughter - Own/Adopted

15 Stepchild

16 Foster Child

17 Grandchild

18 Parent

19 Mother-in-law/Father-in-law

20 Grandparent

21 Brother/Sister

22 Son-in-law/Daughter-in-law

23 Step parent

24 Step brother/step sister

25 Other Relative

26 Non Relative/Cohabitee, room-mate, or renter. Domestic partner

99 DK/REF

FAM2

**Ask of those 16+ indicating they were married except spouse of head of household
(not included in data set)**

*The values in the data set refer to the person in the household to which the person is married.
For example, a "10" indicates they are married to person 1 – the head of household, 11 to
person 2, and so on.*

Is/Are FILL NAME married to anyone who currently lives here
or to someone outside the household?

IF YES ASK: Which member of the household are they married to?

PERSON AGE GENDER (1=M 2=F) MARRIED? (1 = YES)

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

18 PERSON MARRIED TO SOMEONE OUTSIDE THE HH

77 PERSON IS NOT MARRIED

98 DK

99 REF

FAM3

**Ask of those < 18 and not children of the primary family in the household
(not included in data set)**

The values in the data set refer to the person in the household which serves as the guardian. For example, a “10” indicates that person 1 is the guardian– the head of household, 11 to person 2, and so on.

Is anyone living here the parent or guardian of FILL NAME?

INTS: SOMEONE UNDER 16 CANNOT BE THE GUARDIAN

IF YES: Which member of the household?

- | PERSON | AGE |
|--------|-------------------------------------|
| 10 | PERSON 1 |
| 11 | PERSON 2 |
| 12 | PERSON 3 |
| 13 | PERSON 4 |
| 14 | PERSON 5 |
| 15 | PERSON 6 |
| 16 | PERSON 7 |
| 17 | PERSON 8 |
| 18 | NO ONE IN HH IS THE PARENT/GUARDIAN |
| 98 | DK |
| 99 | REF |

FAM3a

Ask of all children who are not wards of someone in the hh to fam03 (any answer > 16)

The values in the data set refer to the person in the household which serves as the main care giver. For example, a “10” indicates that person 1 is the guardian– the head of household, 11 to person 2, and so on.

Who in the household is the main person taking care of FILL NAME?

PERSON AGE

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

97 NO ONE IN HH TAKING CARE OF CHILD

98 DK

99 REF

UNITSCRN

**Ask of those with more than one family unit
(not included in data set)**

For the rest of the interview I'll ask you to give me health related information about everyone you listed.

If there is anyone in the household you think you couldn't answer these questions about, please let me know now.

INTS: SELECT MEMBERS RESPONDENTS INDICATED THEY ARE NOT FAMILIAR WITH.

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 77 NO MORE
- 18 FAMILIAR WITH EVERYONE

VI. Insurance Coverage

INS01

(not included in data set)

The next questions will be about HEALTH INSURANCE. By this I mean any program or plan that pays any part of hospital or doctor bills. For example, Medicare, Medicaid, PeachCare for Kids, Military or Veterans benefits, private insurance through a company like Blue Cross.

IF NEEDED: It includes health insurance that anyone gets through employment or that anyone pays for directly, as well as any government programs like Medicare and Medicaid that help pay medical bills.

Medicare is a NATIONAL health insurance program for people 65 years and older and for certain people with disabilities.

Traditional Medicaid, and PeachCare for Kids are insurance programs offered through the STATE OF GEORGIA for persons with incomes below a certain limit or with certain disabilities.

PeachCare for Kids is a part of the State Children's Health Insurance Program and is coverage provided to children 18 and younger in families with incomes below a certain limit.

ENTER <1> TO CONTINUE

insure

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

This variable categorizes each resident into 1 insurance category. If resident is dually covered by more than 1 insurance Medicare takes precedence over Medicaid which takes precedence over private insurance which takes precedence over military insurance.

Primary Type of Insurance Coverage (Medicare takes precedence over Medicaid)

- 1 Private Health Insurance
- 2 Medicare
- 3 Medicaid
- 4 PeachCare
- 5 Military or Veterans
- 6 Uninsured

Insnone

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person uninsured?

- 1 Yes
- 2 No

INSMCARE

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person covered by Medicare?

- 1 Yes
- 2 No

INSMIL

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is Person Covered by Military Insurance

- 1 YES
- 2 NO

INSMCAID

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person covered under Medicaid?

- 1 Yes
- 2 No

INSPCARE

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person covered under PeachCare?

- 1 Yes
- 2 No

INSMCALL

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person covered under Medicaid or PeachCare?

- 1 Yes
- 2 No

INSIHS

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is Person Covered by Indian Health Services

- 1 YES
- 2 NO

INSPRIV

(computed variable) *Computed from ins02_1,ins02_2,ins02_3,ins02_4*

Is person covered by private insurance?

- 1 Yes
- 2 No

POLICYH
(computed variable)

Is person policy holder of private health insurance?

- 1 YES
- 2 NO - COVERED UNDER SOMEONE ELSE'S POLICY

INS02
(not included in data set)

Is **FILL NAME** covered by ANY type of health insurance? (HIS AGE:)

IF YES ASK: Which of the following types of insurance is this person covered by?
(READ RESPONSES AND SELECT ALL MENTIONED)

- 10 Private health insurance (such as thru Employer, Blue Cross, etc)
- 11 Medicare
- 12 Medicaid
- 13 Peach Care (**show if younger than 19**)
- 16 Military, Veterans, or TRICARE (formally known as CHAMPUS)
- 17 Indian Health Service
- 95 Some other type of insurance (SPECIFY)

- 19 AMERIGROUP (WILL CODE AS MEDICAID/PEACH CARE)
- 20 PEACH STATE (WILL CODE AS MEDICAID/PEACH CARE)
- 21 WELL CARE (WILL CODE AS MEDICAID/PEACH CARE)
- 22 GEORGIA FAMILIES (WILL CODE AS MEDICAID/PEACH CARE)
- 93 THROUGH THE STATE (BUT NOT AS STATE EMPLOYEE)
- 94 SSI/SSDI/WELFARE/DISABILITY
- 97 NO INSURANCE COVERAGE
- 98 DK/REF

NOTE – we provided categories for Amerigroup, Peach State, Well Care, and Georgia Families in case respondent believes this is their type of insurance – we treated these people as covered by state sponsored health insurance throughout the survey to make sure they get asked appropriate follow-up questions.

INS031

**Ask if person receives care through Indian health service
(not included in data set)**

You've just told me FILL NAME receives services through the Indian Health Service but does not have any HEALTH INSURANCE. Is this correct?

INTS: USE AS NEEDED:

The Indian Health Service is responsible for providing health services to Native Americans and Alaskan Natives. However, it is not considered health insurance

- 1 YES - ONLY HAVE CARE THROUGH INDIAN HEALTH SERVICE
- 2 NO - NOT COVERED THOUGH INDIAN HEALTH SERVICE (SKP INS02)
- 3 NO - HAS INDIAN HEALTH SERVICE AND HEALTH INSURANCE (SKP INS02)

- 8 DK
- 9 REF

INS031a

(not included in data set)

The Indian Health Service is not considered health insurance in this survey. As we proceed, please consider that FILL NAME does not have any type of health insurance.

PROMPT; The Indian Health Service simply provides some health care but is STILL not considered health insurance

ENTER <1> TO CONTINUE

INS03

**Ask of all indicating no insurance, dk, or ref to ins02
(not included in data set)**

You indicated FILL NAME is not covered by health insurance,
is this correct?

INTS: USE AS NEEDED:

Health insurance is any program or plan that anyone gets through
employment or that anyone pays for directly, as well as any government
programs like Medicare and Medicaid that help pay medical bills.

PROMPT: Again, the Indian Health Service is not Insurance.

- 1 YES IS CORRECT - NOT COVERED BY INSURANCE
- 2 NO NOT CORRECT - IS COVERED BY INSURANCE

- 8 DK
- 9 REF

INS03a

**Ask of those indicating yes to INS03 or INS031
(not included in data set)**

Does anyone else pay for your/their bills when you (they) seek medical care?

IF YES ASK: who pays their medical expenses?

IF NO ASK: do you or other family members pay out of pocket?

Do pay with your own money?

- 20 Workers compensation for specific injury/illness
- 21 Employer pays for bills, but not an insurance policy
- 22 Family member pays out of pocket for any bills
- 26 Pays out of pocket with their own money
- 27 Indian Health Service
- 23 THROUGH HEALTH INSURANCE - ANY TYPE (GOTO INS02)
- 25 THROUGH FREE CLINICS, FREE MEDICAL SERVICES
- 95 OTHER (SPECIFY)
- 97 NONE, NO MEDICAL BILLS
- 98 DK
- 99 REF

INS02a

**Ask of those indicating they receive insurance through SSI, through the state, through welfare, or through disability to ins02
(not included in data set)**

How did FILL NAME apply for or receive the health insurance through the state?

INTS: NEARLY ALL PEOPLE COVERED MENTIONING THESE PROGRAMS WILL BE COVERED BY MEDICAID.

IF THEY MENTION THE MILITARY:

- SELECT 1 AND CODE AS 16 MILITARY IN INS02

IF THEY MENTION THEY ARE GETTING THROUGH A PRIVATE COMPANY OR MENTION THE NAME OF AN INSURANCE COMPANY

- SELECT 1 AND CODE AS 10 PRIVATE INSURANCE IN INS02

IF THEY MENTION THEY GET INSURANCE AS A STATE EMPLOYEE, SPOUSE OR CHILD OF STATE EMPLOYEE, OR AS A STATE RETIREE

- SELECT 1 AND CODE AS 10 PRIVATE INSURANCE IN INS02

IF THEY DO NOT MENTION ANY OF THESE

- SELECT 2

1 WILL GO BACK AND CORRECT TYPE OF INSURANCE

2 NO THIS IS CORRECT/NO FURTHER INFORMATION

NOTE: UNLESS THERE IS A CLEAR INDICATION OTHERWISE, ALL CASES WHERE RESPONDENT INDICATES THEY GET COVERAGE THROUGH SSI WELFARE, THROUGH THE STATE, THROUGH DISABILITY WILL BE TREATED AS IF THEY ARE COVERED UNDER MEDICAID FOR THE REMAINDER OF THE SURVEY

Medicare and Medicaid Questions For Verifications

INS04

Medicare check for those 65 and older

**Ask of all 65 and older who did not indicate Medicare coverage
(not included in data set)**

I noticed that FILL NAME is 65 or older and you indicated this person was NOT covered by Medicare. Is this correct?

- 1 YES IS CORRECT - NOT COVERED BY MEDICARE
- 2 NO IS NOT CORRECT - PERSON IS COVERED BY MEDICARE

- 8 DK
- 9 REF

INS05

**Medicare check to determine if private insurance is a Medicare supplement
Ask of all 65 and older and indicated covered by private insurance
(not included in data set)**

You indicated FILL NAME is covered by private insurance. Is this private insurance policy a PRIVATE Medicare supplement such as Blue Cross Senior Blue or other plans that help cover expenses not paid by Medicare OR is this a separate private health insurance plan?

IF YES, ASK: What is the name of this Medicare supplement?

IF SUPPLEMENT: Is this ONLY a plan under Medicare Part D which is used to pay ONLY for prescription drugs? CODE AS PART D

10 AARP

11 Aetna

13 Blue Cross/Senior Blue/Security Blue

76 PART D - MEDICARE PART D Prescription Drug Plan

95 OTHER MEDICARE SUPPLEMENT (SPECIFY)

97 NO, THIS IS PRIVATE INSURANCE ONLY, NOT A SUPPLEMENT

98 DK/REF

Medicare Verification

INS06

**Ask of those indicated covered by Medicare (though not dually covered by Medicaid and Medicare) and Younger than 65
(not included in data set)**

Just to verify, is **FILL NAME** covered by national MEDICARE, or are they covered through the state's MEDICAID program including Peach Care, or by both MEDICARE and MEDICAID?

INTS: READ AS NEEDED

Medicare is a NATIONAL health insurance program for people 65 years and older and for certain people with disabilities.

Traditional Medicaid, and PeachCare for Kids are insurance programs offered through the STATE OF GEORGIA for persons with incomes below a certain limit or with certain disabilities.

PeachCare for Kids is a part of the State Children's Health Insurance Program and is coverage provided to children 18 and younger in families with incomes below a certain limit.

- 1 YES COVERED BY MEDICARE ONLY
- 2 COVERED BY BOTH MEDICARE AND MEDICAID (Including Peach Care)
- 3 COVERED BY MEDICAID ONLY (Including Peach Care)
- 8 DK
- 9 REF

INS07

**Ask if they now indicate Medicaid coverage in ins06 ask:
(not included in data set)**

Are/is FILL NAME covered by?
(READ RESPONSES)

Is FILL NAME covered by...?

12 Medicaid

13 Peach Care (show if less than 19)

95 Some other type of insurance (SPECIFY)

19 AMERIGROUP (WILL CODE AS MEDICAID/PEACH CARE)

20 PEACH STATE (WILL CODE AS MEDICAID/PEACH CARE)

21 WELL CARE (WILL CODE AS MEDICAID/PEACH CARE)

22 GEORGIA FAMILIES (WILL CODE AS MEDICAID/PEACH CARE)

93 THROUGH THE STATE (BUT NOT AS STATE EMPLOYEE)

94 SSI/SSDI/WELFARE/DISABILITY

98 DK

99 REF

Medicaid Verification

INS08

**Ask of those indicated covered by Medicaid (though not dually covered by Medicaid and Medicare) And 65 and older
(not included in data set)**

Just to verify, is **FILL NAME** covered by the **STATE MEDICAID** program including or are they covered through the **NATIONAL MEDICARE** program for those 65 and older, or by both **MEDICAID** and **MEDICARE**?

Medicare is a **NATIONAL** health insurance program for people 65 years and older and for certain people with disabilities.

Traditional Medicaid, and PeachCare for Kids are insurance programs offered through the **STATE OF GEORGIA** for persons with incomes below a certain limit or with certain disabilities.

PeachCare for Kids is a part of the State Children's Health Insurance Program and is coverage provided to children 18 and younger in families with incomes below a certain limit.

- 1 COVERED BY MEDICAID ONLY
- 2 COVERED BY BOTH MEDICARE AND MEDICAID
- 3 COVERED BY MEDICARE ONLY
- 8 DK
- 9 REF

Follow-up MEDICARE Question to determine if they have a supplement

INS09

Ask of those indicated covered by Medicare and 65 and not indicating private insurance coverage

(not included in data set)

Does FILL NAME have a PRIVATE Medicare supplement such as Blue Cross Senior Blue or other plan to help cover expenses not paid by Medicare?

IF YES, ASK: What is the name of this Medicare supplement?

IF SUPPLEMENT: Is this is ONLY a plan under Medicare Part D which is used to pay ONLY for prescription drugs? CODE AS PART D

10 AARP

11 Aetna

13 Blue Cross/Senior Blue/Security Blue

76 PART D - MEDICARE PART D Prescription Drug Plan

95 OTHER MEDICARE SUPPLEMENT (SPECIFY)

97 NO MEDICARE SUPPLEMENT

98 DK

99 REF

IF YES – TREAT AS COVERED BY PRIVATE INSURANCE AND ASK PRIVATE INSURANCE QUESTIONS, BUT TREAT INDIVIDUAL AS A SEPARATE POLICY HOLDER

VII. Private Insurance

Note: for private health insurance, we group people together into policies. Once this is done we then ask a series of questions about each policy.

INSP01

**Ask OF ALL INDICATED COVERED BY PRIVATE INSURANCE AND
IF MORE THAN ONE PERSON IS COVERED BY PRIVATE INSURANCE
(not included in data set)**

Are the people you indicated above as covered by private insurance
ALL covered under the SAME health insurance plan?

IF YES: Who is the policy holder for this plan?

IF NO: Which members of the household are policy
holders for a private health insurance plan?

INTS: PRIVATE INSURANCE PLANS CAN BE PROVIDED THROUGH AN EMPLOYER,
A RETIREMENT PLAN, A SCHOOL, OR PURCHASED DIRECTLY

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

87 SOMEONE OUTSIDE HH IS THE POLICY HOLDER

97 NO ONE IN HH IS A POLICY HOLDER

98 DK

99 REF

***IF DK OR REFUSE – TREAT EACH INDIVIDUAL AS A SEPARATE POLICY HOLDER
AND ASK PRIVATE INSURANCE QUESTIONS***

INSP02

**Ask of all indicated as policy holders and if more than one person is covered by private insurance
(not included in data set)**

Next, I need to know which members of the household are covered by each of these private health insurance plans.

Who is covered under FILL NAME's policy?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

IF DK OR REFUSE – TREAT EACH INDIVIDUAL AS A SEPARATE POLICY HOLDER AND ASK PRIVATE INSURANCE QUESTIONS

VERIFY THAT ALL COVERED BY PRIVATE INSURANCE ARE LINKED TO A POLICY HOLDER

INSP02a

Ask of all indicated as covered by private insurance and not linked to a specific policy from insp02

(not included in data set)

The following household members do not have a policy holder listed for their private insurance:

Are any of these household members covered under FILL NAME's policy?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NONE
- 98 DK
- 99 REF

NINSP03

**Ask of all indicated as policy holders
(not included in data set)**

Is FILL NAME 's PRIVATE HEALTH INSURANCE provided through Aetna Health, Blue Cross, Cigna Healthcare, or some other company?

INS: ASK FOR A SPECIFIC INSURANCE COMPANY

- 12 MEDICAID, PEACHCARE FOR KIDS
- 19 AMERIGROUP
- 20 PEACH STATE
- 21 WELLCARE
- 22 GEORGIA FAMILIES
- 30 Aetna Health Inc
- 31 Blue Cross, Blue Shield
- 32 CIGNA
- 33 United Health Care, UHC
- 34 Golden Rule
- 35 AARP
- 36 Alliance
- 37 Anthem
- 38 Assurant
- 39 Athens
- 40 Beech Street
- 41 CBCA
- 42 Coventry
- 43 Evergreen
- 44 First Health
- 45 GEHA
- 46 Health One
- 47 Humana
- 48 Kaiser
- 49 Mail Handler's
- 50 PHCS
- 51 Principal
- 52 Secure Health
- 53 Southcare
- 54 State Merit
- 55 United Health Care, UHC
- 70 Tricare, Military
- 80 MEDICARE, MEDICARE SUPPLEMENT
- 94 SSI, WELFARE, DISABILITY, SOCIAL SERVICES, THE STATE
- 95 OTHER PROVIDER
- 98 DK, REF

Note; we add this check in other states in instances where the state contracts through private health insurance providers (people on Medicaid may think they have Blue Cross if Blue Cross is administering the plan). If there is this possibility we'll just need to identify the private providers and we can use this verification question.

NINSP04

For those companies flagged as potentially misidentified private insurance coverage when coverage is through state program

Does FILL NAME have insurance through the state of Georgia Medicaid or Peach Care program?

You may know these programs as Amerigroup, Peach State, Well Care, or Georgia Families.

INTS:

Traditional Medicaid, and PeachCare for Kids are insurance programs offered through the STATE OF GEORGIA for persons with incomes below a certain limit or with certain disabilities.

PeachCare for Kids is a part of the State Children's Health Insurance Program and is coverage provided to children 18 and younger in families with incomes below a certain limit.

1 YES

2 NO

8 DK

9 REF

NINSP06

Ask of all indicated as policy holders

Is FILL NAME's plan provided through YOUR OR SOMEONE ELSE'S EMPLOYER?

PROMPT: This includes insurance coverage from an employer, and also through a labor union, through your business, a family business or farm, or some other employer based plan?

1 YES

2 NO

8 DK

9 REF

NINSP07

Ask of all indicated as policy holders and covered by plan through employer/labor union

Does the employer or labor union pay for half or more of the cost of this plan?

1 YES

2 NO, PAYS LESS THAN HALF

8 DK

9 REF

NINSP08

Ask of all indicated as policy holders and covered by plan through employer/labor union

Does the employer or labor union offer a choice of more than one health plan?

1 YES

2 NO

8 DK

9 REF

NINSP09

Ask of all indicated as policy holders and not covered by plan through employer/labor union

Is FILL NAME (r/s) insurance provided through...
(READ RESPONSES)

PROMPT: IF THROUGH STATE, ASK: Is this through the state's Medicaid program?

- 1 Employer
- 12 COBRA or a former employer
- 13 A retirement plan
- 14 A school, college, or university
- 15 Plan purchased directly or the premium paid out of pocket
- 92 DISABILITY
- 93 THROUGH THE STATE
- 94 SSI, SSDI, WELFARE
- 95 OTHER
- 98 DK
- 99 REF

NINSP09a

Is private insurance provided through...

PROMPT: IF THROUGH STATE, ASK: Is this through the state's Medicaid program?

- 1 Employer
- 12 COBRA or a former employer
- 13 A retirement plan
- 14 A school, college, or university
- 15 Plan purchased directly or the premium paid out of pocket
- 92 DISABILITY
- 93 THROUGH THE STATE
- 94 SSI, SSDI, WELFARE
- 95 OTHER
- 98 DK
- 99 REF

NINSP11

Has the amount paid in copays for medical services or the deductible paid out of pocket increased during the past three years?

IF YES ASK: Is that the copay, the deductible, or both?

PROMPT: A copay is the amount you pay when you visit a doctor or other medical care provider

- 1 YES, COPAY
- 2 YES, DEDUCTIBLE
- 3 YES, BOTH
- 4 NO
- 5 HAD INSURANCE LESS THAN 3 YEARS
- 6 DO NOT PAY COPAY OR DEDUCTIBLE
- 8 DK
- 9 REF

NINSP12

Does FILL NAME 's health insurance plan cover at least some of the cost of prescription drugs?

- 1 YES
- 2 NO, BUT HAVE OTHER COVERAGE
- 3 NO
- 8 DK
- 9 REF

NINSP13

Does this health insurance plan include a deductible?

PROMPT: A deductible is the amount of money that you have to pay out of your own pocket each year before your insurance will pay for any services.

- 1 YES
- 2 NO

- 8 DK
- 9 REF

NINSP14

How much is that deductible?
Please do not include premium expenses.

IF LESS THAN \$100, READ:

Is this the amount you pay each time you visit a health care provider or is this the amount you pay BEFORE your insurance begins to pay your medical bills?

IF NOT THE ANNUAL DEDUCTIBLE, READ:

What is the amount you pay BEFORE your insurance begins to pay your medical bills? Please do not include the amount you pay when you go to the emergency room.

0 - 9996 ENTER NUMBER OF DOLLARS

9997 \$9997 OR MORE

9998 DK

9999 REF

CNINSP14

How much is that deductible?

- 1 < \$100
- 2 \$100 - \$999
- 3 \$1000+
- 8 DK-REF

NINSP15

Ask if deductible is > \$1000 to insp11

Does FILL POLICY HOLDER have a Health Savings Account or HSA?

PROMPT: a health savings account is a tax-advantaged medical savings account available to taxpayers who are enrolled in a High Deductible Health Plan (HDHP). The money in the account can only be spent for health care and can grow from year to year.

1 YES

2 NO

8 DK

9 REF

NINSP16

Use any number from 1 to 10 with 1 being the worst health plan ever and 10 being the best health plan ever, how would you rate this current plan?

1 WORST PLAN EVER

10 BEST PLAN EVER

98 DK

99 REF

INSP05

Ask if they indicated that private insurance was through state of Georgia Medicaid, Peachstate, Peachcare for kids< wellcare< Amerigroup – ask for each person listed under policy

(not included in data set)

Earlier you stated that FILL NAME 's insurance was provided through Georgia's Medicaid or PeachCare for Kids/Amerigroup/Peach State/Well Care/Georgia Families.

WILL SHOW UP AS NEEDED

Amerigroup, Peach State, Well Care and Georgia Families are the health plans that people on Medicaid or PeachCare for Kids sign up to receive services. In answering the following questions please consider any person covered under these types of insurance as covered by Medicaid or Peach Care

Just to check again, is FILL NAME covered by...(READ RESPONSES)

12 Medicaid

13 PeachCare for Kids

10 Private Insurance

95 Some other type of insurance (SPECIFY)

19 AMERIGROUP (WILL CODE AS MEDICAID/PEACHCARE FOR KIDS)

20 PEACH STATE (WILL CODE AS MEDICAID/PEACHCARE FOR KIDS)

21 WELLCARE (WILL CODE AS MEDICAID/PEACHCARE FOR KIDS)

22 GEORGIA FAMILIES (WILL CODE AS MEDICAID/PEACHCARE FOR KIDS)

93 THROUGH THE STATE (BUT NOT AS STATE EMPLOYEE)

94 SSI/SSDI/WELFARE/DISABILITY

97 NO INSURANCE COVERAGE

98 DK/REF

VIII. Medicaid Insurance Follow-up Questions

Q42x

(not included in data set)

T:

For these next questions, please think about the household members that are currently covered by Medicaid or PeachCare for Kids.

Amerigroup, Peach State and Well Care are the health plans that people on Medicaid or PeachCare for Kids sign up to receive services. In answering the following questions please consider any person covered under these types of insurance as covered by Medicaid or Peach Care.

Georgia Families is a program that delivers health care services to members of Medicaid and PeachCare for Kids. In answering the following questions please consider any person covered under Georgia Families as covered by Medicaid or Peach Care.

ENTER <1> TO CONTINUE

NOTE: we can add a question on premiums and ask of all HH members on a state sponsored HI program as an additional check to determine that the respondent has identified the correct program. We'll need to know what the premium amounts are for each program.

Q42x1

Ask of households with children between 6 and 18

How much do you pay in premiums EACH month for the child or children in your household on Medicaid or PeachCare for Kids?

PROMPT: A premium is the monthly payment you make for insurance regardless of whether you use it.

PROMPT: This includes Amerigroup, Peach State, WellCare and Georgia Families

- 0 NONE, NO PREMIUM
- 98 DK
- 99 REF

NQ42x2

Is FILL NAME 's Medicaid/PeachCare provided through...
(READ RESPONSES)

PROMPT: Most people enrolled in Georgia's Medicaid and PeachCare for Kids programs are managed by private care management organizations

- 1 Amerigroup
- 2 Peach State
- 3 WellCare
- 6 GEORGIA FAMILIES
- 10 Blue Cross
- 11 Social Security, SSI
- 12 Humana
- 13 GA Better Health
- 14 DFCS
- 15 Medicaid
- 16 Medicare
- 17 AARP
- 18 Through the State
- 19 Community Care
- 95 Some other organization
- 98 DK
- 99 REF

MC16

Ask of each person on any medicaid program

How long ago did FILL NAME enroll in FILL PROGRAM and become eligible for benefits?

INTS: ROUND WEEKS TO THE NEAREST MONTH BY ROUNDING DOWN

- 1 Less than One Month Ago
- 2 ENTER PERIOD IN NUMBER OF MONTHS
- 3 ENTER PERIOD IN NUMBER OF YEARS

- 8 DK
- 9 REF

MC16a

1 – 97 ENTER NUMBER

98 DK
99 REF

NMC16

(computed variable) *Computed from MC16*

How long ago did person enroll in Medicaid/PeachCare and become eligible for benefits?

- 1 < 1 month ago
- 2 1 - 3 months ago
- 3 4 - 6 months ago
- 4 7 - 9 months ago
- 5 10 - 12 months ago
- 6 13 - 24 months ago
- 7 25 - 36 months ago
- 8 37 - 48 months ago
- 9 49 - 60 months ago
- 10 > 5 years ago
- 98 DK
- 99 REF

Q42

Ask of all identified as covered through -any state sponsored health insurance program

If Medicaid or PeachCare for Kids were no longer available for members of your household, would they be able to get private health insurance coverage?

PROMPT: This includes Georgia Families, Amerigroup, Peach State, and WellCare.

(READ RESPONSES)

- 1 Definitely Yes
- 2 Probably Yes
- 3 Probably Not
- 4 Definitely Not
- 8 DK
- 9 REF

Q43 1 to Q43 3

**Ask of all identified as covered through any state-sponsored health insurance program
This is a multiple response variable.**

How did the family find out about Medicaid and PeachCare for Kids in Georgia?

PROMPT: How else did you find out about the Medicaid, PeachState or PeachCare for Kids program?

- 10 MAIL, THROUGH THE MAIL
- 13 WELFARE OFFICE, SOCIAL WELFARE, WIC, WIC OFFICE
- 16 TELEPHONE, 1-888-GA-ENROLL, GA-PEACH
- 20 WEBSITE - GEORGIA FAMILIES, PEACHCARE
- 21 HEALTH FAIR, COMMUNITY EVENT
- 22 COMMUNITY GROUPS, ADVOCACY GROUPS, CHURCH
- 23 RETAIL STORES - RITE AID, BOSCO'S, GIANT
- 24 SCHOOL, CHILDREN'S SCHOOL
- 30 PERSON - FRIEND, FAMILY, WORD OF MOUTH, OTHER CHILDREN
- 31 TV, RADIO, NEWSPAPER ADVERTISEMENT
- 32 EMPLOYER
- 33 WEBSITE - GENERAL, OWN RESEARCH
- 34 TRANSFERRED FROM ANOTHER STATE
- 35 ADOPTION SERVICE, FOSTER CHILDREN ARRIVE WITH COVERAGE
- 50 HOSPITAL
- 51 SOCIAL SERVICES
- 52 GOVERNMENT OFFICE - GENERAL
- 54 DIVISION OF FAMILY AND CHILDREN SERVICES, DFCS
- 57 DOCTOR, AT OFFICE OF HEALTH CARE PROVIDER
- 58 LAWYER, ATTORNEY
- 60 INSURANCE DEPARTMENT, GEORGIA FAMILIES OFFICE
- 66 HEALTH DEPARTMENT
- 95 OTHER
- 98 DK, REF

Q44 1 to Q44 3

**Ask of all identified as covered through any state-sponsored health insurance program
This is a multiple response variable.**

Where did the family actually apply for Medicaid or PeachCare for Kids?
At what location and which agency or organization?

PROBE FOR DETAILS

PROMPT: Was there anywhere else? (MAY HAVE APPLIED AT MORE THAN ONE LOCATION)

- 10 MAIL, THROUGH THE MAIL
- 13 WELFARE OFFICE, SOCIAL WELFARE, WIC, WIC OFFICE
- 16 TELEPHONE, 1-888-GA-ENROLL, GA-PEACH
- 20 WEBSITE, ONLINE - NOT SPECIFIC
- 21 HEALTH FAIR, COMMUNITY EVENT
- 22 COMMUNITY GROUPS, ADVOCACY GROUPS, CHURCH
- 23 RETAIL STORES - RITE AID, BOSCO'S, GIANT
- 24 SCHOOL, CHILDREN'S SCHOOL
- 50 HOSPITAL
- 51 SOCIAL SERVICES
- 52 GOVERNMENT OFFICE - GENERAL
- 54 DIVISION OF FAMILY AND CHILDREN SERVICES, DFCS
- 57 DOCTOR, AT OFFICE OF HEALTH CARE PROVIDER
- 60 INSURANCE DEPARTMENT, GEORGIA FAMILIES OFFICE
- 66 HEALTH DEPARTMENT
- 70 WEBSITE GEORGIA FAMILIES WEBSITE
- 71 WEBSITE PEACHCARE FOR KIDS
- 95 OTHER
- 98 DK, REF
- 99 REF

Q45

Ask of all identified as covered through any state-sponsored health insurance program

Was there anything that made the family consider NOT enrolling members of the family in Medicaid or PeachCare for Kids?

PROMPT: Were there barriers that made you think about NOT enrolling those in the family that are currently covered by Medicaid or PeachCare for Kids?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

OQ45_1 to OQ45_2

Ask of those saying “yes” to q45

This is a multiple response variable.

What were the barriers that made you consider NOT enrolling?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 10 CAN'T READ FORMS, TROUBLE READING FORMS
- 21 COST ISSUES, OUT OF POCKET COSTS, COULD NOT AFFORD
- 22 DENIED APPLICATION, SAID NOT QUALIFIED
- 11 DIRECTIONS ON FORMS UNCLEAR, HARD TO UNDERSTAND
- 23 DOCTOR, OTHER PROVIDER REFUSED TO ACCEPT MEDICAID
- 12 INCOME - NOT QUALIFIED BECAUSE MAKE TOO MUCH
- 13 LANGUAGE DIFFICULTIES, FORMS NOT IN MY LANGUAGE
- 24 LOST APPLICATION, STAFF LOST APPLICATION
- 26 MEDICAID WON'T COVER SOME EXPENSES, COSTS
- 14 NEEDED HELP IN FILLING OUT APPLICATION FORMS
- 15 QUESTIONS HARD TO ANSWER, UNDERSTAND
- 16 STAFF MADE IT DIFFICULT, DIFFICULTIES WITH STAFF, NO HELP
- 17 STIGMA, SHAME OF APPLYING/EMBARRASSED TO APPLY
- 18 TOO MUCH PAPERWORK, FORMS, ASK TOO MANY QUESTIONS
- 19 TOOK TOO LONG, TOO MUCH TIME TO APPLY
- 20 ASSUMED APPROVALS WERE NEEDED FOR TREATMENT
- 21 ASSUMED THERE WERE DELAYS IN GETTING APPROVALS/APPOINTMENTS
- 22 NOT FAMILIAR WITH THE PROGRAM
- 95 OTHER (SPECIFY)
- 98 DK
- 99 REF

Q46

Ask of all identified as covered through any state-sponsored health insurance program

How easy was it to enroll in Medicaid or PeachCare for Kids?
Would you say it was..

- 1 Very Easy
- 2 Somewhat easy
- 3 Somewhat difficult, or
- 4 Very difficult?

- 8 DK
- 9 REF

OQ46 1 to OQ46 3

Ask of those saying somewhat or very difficult to q46
This is a multiple response variable.

Why do you say that? What could have been done to make the enrollment process easier?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 10 CAN'T READ FORMS, TROUBLE READING FORMS
- 11 DIRECTIONS ON FORMS UNCLEAR, HARD TO UNDERSTAND
- 12 INCOME - NOT QUALIFIED BECAUSE MAKE TOO MUCH
- 13 LANGUAGE DIFFICULTIES, FORMS NOT IN MY LANGUAGE
- 14 NEEDED HELP IN FILLING OUT APPLICATION FORMS
- 15 QUESTIONS HARD TO ANSWER, UNDERSTAND
- 16 STAFF MADE IT DIFFICULT, DIFFICULTIES WITH STAFF, NO HELP
- 17 STIGMA, SHAME OF APPLYING , EMBARRASSED TO APPLY
- 18 TOO MUCH PAPERWORK, FORMS, ASK TOO MANY QUESTIONS
- 19 TOOK TOO LONG, TOO MUCH TIME TO APPLY
- 21 COST ISSUES, OUT OF POCKET COSTS, COULD NOT AFFORD
- 22 DENIED APPLICATION, SAID NOT QUALIFIED
- 23 DOCTOR, OTHER PROVIDER REFUSED TO ACCEPT MEDICAID
- 24 LOST APPLICATION, STAFF LOST APPLICATION
- 26 MEDICAID WON'T COVER SOME EXPENSES, COSTS
- 30 ASSUMED APPROVALS WERE NEEDED FOR TREATMENT
- 31 ASSUMED THERE WERE DELAYS IN GETTING APPROVALS, APPOINTMENTS
- 32 NOT FAMILIAR WITH THE PROGRAM
- 95 OTHER
- 98 DK
- 99 REF

Q47

Ask of all identified as covered through any state-sponsored health insurance program

Did your household experience any problems when enrolling in Medicaid or PeachCare for Kids?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QQ47 1 to QQ47 3

Ask of those saying yes to q47

This is a multiple response variable.

What were these problems?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 10 CAN'T READ FORMS, TROUBLE READING FORMS
- 11 DIRECTIONS ON FORMS UNCLEAR, HARD TO UNDERSTAND
- 12 INCOME - NOT QUALIFIED BECAUSE MAKE TOO MUCH
- 13 LANGUAGE DIFFICULTIES, FORMS NOT IN MY LANGUAGE
- 14 NEEDED HELP IN FILLING OUT APPLICATION FORMS
- 15 QUESTIONS HARD TO ANSWER, UNDERSTAND
- 16 STAFF MADE IT DIFFICULT, DIFFICULTIES WITH STAFF, NO HELP
- 17 STIGMA, SHAME OF APPLYING , EMBARRASSED TO APPLY
- 18 TOO MUCH PAPERWORK, FORMS, ASK TOO MANY QUESTIONS
- 19 TOOK TOO LONG, TOO MUCH TIME TO APPLY
- 20 BILLED FOR EXPENSES MEDICAID SHOULD HAVE COVERED
- 21 COST INCREASES, INCREASE IN PREMIUMS, OUT OF POCKET COSTS
- 22 DENIED APPLICATION, SAID NOT QUALIFIED
- 23 DOCTOR, OTHER PROVIDER REFUSED TO ACCEPT MEDICAID
- 24 LOST APPLICATION, STAFF LOST APPLICATION
- 25 LOST COVERAGE, NO LONGER HAVE MEDICAID
- 26 MEDICAID WON'T COVER SOME EXPENSES, COSTS
- 27 CHANGING PROGRAMS CHANGES COVERAGE
- 95 OTHER
- 98 DK
- 99 REF

Q49

Ask of all identified as covered through any state-sponsored health insurance program

Has your household experienced any problems since they have been enrolled?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

OQ49 1 to OQ49 3

Ask of those saying yes to q49

This is a multiple response variable.

What were these problems?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 10 CAN'T READ FORMS, TROUBLE READING FORMS
- 11 DIRECTIONS ON FORMS UNCLEAR, HARD TO UNDERSTAND
- 12 INCOME - NOT QUALIFIED BECAUSE MAKE TOO MUCH
- 13 LANGUAGE DIFFICULTIES, FORMS NOT IN MY LANGUAGE
- 14 NEEDED HELP IN FILLING OUT APPLICATION FORMS
- 15 QUESTIONS HARD TO ANSWER, UNDERSTAND
- 16 STAFF MADE IT DIFFICULT, DIFFICULTIES WITH STAFF, NO HELP
- 17 STIGMA, SHAME OF APPLYING , EMBARRASSED TO APPLY
- 18 TOO MUCH PAPERWORK, FORMS, ASK TOO MANY QUESTIONS
- 19 TOOK TOO LONG, TOO MUCH TIME TO APPLY
- 20 BILLED FOR EXPENSES MEDICAID SHOULD HAVE COVERED
- 21 COST INCREASES, INCREASE IN PREMIUMS, OUT OF POCKET COSTS
- 22 DENIED APPLICATION, SAID NOT QUALIFIED
- 23 DOCTOR, OTHER PROVIDER REFUSED TO ACCEPT MEDICAID
- 24 LOST APPLICATION, STAFF LOST APPLICATION
- 25 LOST COVERAGE, NO LONGER HAVE MEDICAID
- 26 MEDICAID WON'T COVER SOME EXPENSES, COSTS
- 27 CHANGING PROGRAMS CHANGES COVERAGE
- 95 OTHER
- 98 DK
- 99 REF

Q48 1 to Q48 3

**Ask of all identified as covered through any state sponsored health insurance program
This is a multiple response variable.**

Based on your experiences, what could the state of GEORGIA have done to better communicate with your household about enrollment?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 11 MAKE DIRECTIONS EASIER TO UNDERSTAND
- 12 INCOME - CHANGE INCOME REQUIREMENTS
- 13 LANGUAGE DIFFICULTIES, OFFER FORMS IN OTHER LANGUAGES
- 14 HELP IN FILLING OUT APPLICATION FORMS, PAPERWORK
- 16 STAFF, IMPROVE ATTITUDE, BETTER SERVICE,
- 18 SIMPLIFY PAPERWORK, FORMS
- 19 REDUCE TIME TO PROCESS APPLICATION
- 27 ELIGIBILITY, BETTER INFORMATION, PUBLICIZE WHO IS ELIGIBLE
- 28 INFORM PEOPLE ABOUT ELIGIBILITY, WHO IS ELIGIBLE
- 29 INFORM PEOPLE ABOUT PROGRAMS, IN GENERAL
- 30 INFORMATION PROVIDE THROUGH SERVICE AGENCIES
- 31 INFORMATION PROVIDE THROUGH DOCTORS, OTHER PROVIDERS
- 32 STAFF COMMUNICATION, RETURN CALLS, ANSWER QUESTIONS
- 33 STAFF NEEDS TO BE MORE UNDERSTANDING OF PEOPLE'S SITUATION
- 34 BETTER INFORMATION ABOUT COVERAGE, LIMITS OF COVERAGE
- 35 PROVIDE MORE INFO ABOUT WHO ACCEPTS PROGRAMS
- 36 RE-ENROLLMENT REMINDERS; SIMPLIFY RE-ENROLLMENT
- 95 OTHER
- 97 NOTHING
- 98 DK
- 99 REF

ins03a1

Does anyone else pay for person's bills when they go to a doctor or hospital?

- 20 Workers compensation for specific injury, illness
- 21 Employer pays for bills, but not an insurance policy
- 22 Family member pays out of pocket for any bills
- 23 THROUGH HEALTH INSURANCE
- 25 THROUGH FREE CLINICS, FREE MEDICAL SERVICES
- 26 Pays out of pocket with their own money
- 27 CHARITY ORGANIZATIONS, CHURCH
- 28 Credit Cards, just accrue Debt
- 29 Military
- 95 OTHER
- 97 NO MEDICAL BILLS, DO NOT GO TO DOCTOR
- 98 DK
- 99 REF

IX. Questions of Those Who Are UNINSURED

INSU01

Ask of those indicated as uninsured in ins02
(not included in data set)

How long have/has FILL NAME been without health insurance coverage?

INTS: ENTER IN NUMBER OF MONTHS

- 1 ONE MONTH OR LESS
- 2 – 60 ENTER NUMBER OF MONTHS
- 61 MORE THAN 5 YEARS

- 97 NEVER HAD HEALTH INSURANCE
- 98 DK
- 99 REF

ninsu01

(computed variable) *This variable is computed from insu01*

How long has person been without health insurance coverage?

- 1 1 - 3 months
- 2 4 - 6 months
- 3 7 - 9 months
- 4 10 - 12 months
- 5 13 - 24 months
- 6 25 - 36 months
- 7 37 - 48 months
- 8 49 - 60 months
- 9 > 5 years
- 10 Person never had insurance
- 98 DK
- 99 REF

INSU02

How does cost rate as the reason why FILL NAME is not currently covered by insurance? Would you say it is...

(READ RESPONSES)

- 1 Absolutely the only reason
 - 2 One of the main reasons
 - 3 One reason among several
 - 4 Not much of a factor
 - 5 NOT APPLICABLE (HAS INSURANCE)
-
- 8 DK
 - 9 REF

INSU031 to INSU033

**Ask of those indicated as uninsured in ins02 and uninsured for 12 months or less
This is a multiple response variable.**

IF THEY DID NOT HAVE COVERAGE DURING THE PAST 12 MONTHS ASK:
What are the main reasons that FILL NAME is not currently covered by any
government or private health insurance plan?

IF THEY HAD COVERAGE DURING THE PAST 12 MONTHS ASK:
Why was coverage lost?

INTS: SELECT ALL MENTIONED BY RESPONDENT
PROMPT: Was there any other reason?

IF NOT ELIGIBLE FOR PEACH STATE, PEACHCARE FOR KIDS, WELL CARE,
AMERIGROUP: Why is this?

- 10 PERSON WITH HEALTH INSURANCE LOST JOB
- 11 EMPLOYER CUT PERSON BACK TO PART TIME, TEMPORARY STATUS
- 12 EMPLOYER STOPPED OFFERING COVERAGE
- 13 CURRENT EMPLOYER DOES NOT OFFER COVERAGE
- 14 WAITING PERIOD FOR COVERAGE
- 15 BENEFITS FROM FORMER EMPLOYER, COBRA RAN OUT
- 16 GOT DIVORCED OR SEPARATED, DEATH OF SPOUSE OR PARENT
- 17 RELOCATED, NOT A RESIDENT
- 18 COST IS TOO HIGH, INCREASED, COST OF PREMIUM, CANNOT AFFORD
- 19 INSURANCE COMPANY REFUSED COVERAGE, TERMINATED COVERAGE
- 20 NOT ELIGIBLE, NO LONGER QUALIFY FOR MEDICAID, PEACHCARE
- 21 LACK OF INFORMATION, UNSURE IF ELIGIBLE
- 22 SELF EMPLOYED
- 23 NOT WORKING, EMPLOYMENT INCONSISTENT
- 24 DON'T NEED INSURANCE
- 25 CHANGED EMPLOYERS AND NOT ELIGIBLE FOR INSURANCE
- 26 CHANGED EMPLOYERS NEW EMPLOYER DOES NOT OFFER INSURANCE
- 27 PERSON WITH HEALTH INSURANCE QUIT JOB, RETIRED
- 28 PERSON CUT THEMSELF BACK TO PART TIME STATUS
- 29 NOT WORTH THE COST
- 30 PERSONAL OR RELIGIOUS REASONS
- 31 COMMUNICATION, PAPERWORK ISSUES, NEED TO RE-APPLY
- 95 OTHER
- 97 NONE
- 98 DK
- 99 REF

INSU051 to INSU053

Ask if person indicated 12 months or fewer to insu01

This is a multiple response variable.

Earlier you indicated that FILL NAME had health insurance coverage during the past 12 months.

What type of health insurance coverage did FILL NAME have?

(READ RESPONSES)

[INTERVIEWER: ACCEPT ALL RESPONSES - UP TO THREE RESPONSES]

- 10 Private health insurance
- 11 Medicare
- 12 Medicaid
- 13 PeachCare for Kids
- 16 Military, Veterans, or TRICARE
- 17 Indian Health Service
- 19 AMERIGROUP
- 20 PEACH STATE
- 21 WELLCARE
- 22 GEORGIA FAMILIES
- 93 THROUGH THE STATE
- 94 SSI, SSDI, WELFARE, DISABILITY
- 95 Some other type of insurance
- 97 NO INSURANCE COVERAGE
- 98 DK - REF

INSU06

Ask if yes to insu04

Approximately how many of the past 12 months was FILL NAME WITHOUT health insurance coverage? This can be from 1-12 months.

1 - 12 ENTER NUMBER

- 98 DK
- 99 REF

INSU09

Ask if anyone in the hh is uninsured

If the uninsured members of your household were eligible to enroll in Medicaid or PeachCare for Kids, how much interest would there be in enrolling them?

Would you say...

(READ RESPONSES)

- 1 Very interested
- 2 Somewhat interested
- 3 Not very interested, or
- 4 Not at all interested?

8 DK

9 REF

X. Interruptions in Coverage

INSW01

Ask of those covered by any type of insurance

Have/has FILL NAME been without coverage
anytime in the last 12 months?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

INSW02

Approximately how many of the past 12 months was FILL NAME
WITHOUT health insurance coverage? This can be from 1-12 months.

1 TO 12 ENTER NUMBER

- 98 DK
- 99 REF

ninsw02

Approximately how many of the past 12 months was person without health insurance coverage?

- 1 1 - 3 months
- 2 4 - 6 months
- 3 7 - 9 months
- 4 10 -12 months
- 8 DK-REF

INSW031 to INSW033

Ask of those covered by insurance and without coverage at some time during past 12 months

This is a multiple response variable.

Why were/was FILL NAME without coverage?

INTS: SELECT ALL MENTIONED BY RESPONDENT

PROMPT: Was there any other reason?

IF NOT ELIGIBLE FOR PEACH STATE, PEACHCARE FOR KIDS, WELL CARE, AMERIGROUP: Why is this?

- 10 PERSON WITH HEALTH INSURANCE LOST JOB
- 11 EMPLOYER CUT PERSON BACK TO PART TIME, TEMPORARY STATUS
- 12 EMPLOYER STOPPED OFFERING COVERAGE
- 13 CURRENT EMPLOYER DOES NOT OFFER COVERAGE
- 14 WAITING PERIOD FOR COVERAGE
- 15 BENEFITS FROM FORMER EMPLOYER, COBRA RAN OUT
- 16 GOT DIVORCED OR SEPARATED, DEATH OF SPOUSE OR PARENT
- 17 RELOCATED, NOT A RESIDENT
- 18 COST IS TOO HIGH, INCREASED, COST OF PREMIUM, CANNOT AFFORD
- 19 INSURANCE COMPANY REFUSED COVERAGE, TERMINATED COVERAGE
- 20 NOT ELIGIBLE, NO LONGER QUALIFY FOR MEDICAID, PEACHCARE
- 21 LACK OF INFORMATION, UNSURE IF ELIGIBLE
- 22 SELF EMPLOYED
- 23 NOT WORKING, EMPLOYMENT INCONSISTENT
- 24 DON'T NEED INSURANCE
- 25 CHANGED EMPLOYERS AND NOT ELIGIBLE FOR INSURANCE
- 26 CHANGED EMPLOYERS NEW EMPLOYER DOES NOT OFFER INSURANCE
- 27 PERSON WITH HEALTH INSURANCE QUIT JOB, RETIRED
- 28 PERSON CUT THEMSELF BACK TO PART TIME STATUS
- 29 NOT WORTH THE COST
- 30 PERSONAL OR RELIGIOUS REASONS
- 31 COMMUNICATION, PAPERWORK ISSUES, NEED TO RE-APPLY
- 95 OTHER
- 97 NONE
- 98 DK
- 99 REF

XI. Loss of Insurance

INSLO01

**Ask if anyone in household is covered by insurance
(not included in data set)**

Are you concerned that anyone in your household may
may lose coverage within the next 12 months?

IF YES ASK: Who are you concerned might lose coverage?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE, NOT CONCERNED
- 98 DK
- 99 REF

NINSL0

(computed variable) *This variable is computed from inslo01*

Are you concerned that person may lose health insurance coverage within the next 12 months?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

INSLO021 to INSLO024

This is a multiple response variable.

What are the reasons that there is a risk for losing health insurance coverage within the next 12 months?

[INTERVIEWER: ACCEPT ALL RESPONSES.]

IF NOT ELIGIBLE FOR PEACHCARE FOR KIDS, PEACHSTATE: Why is this?

- 10 PERSON WITH HEALTH INSURANCE WILL LOSE JOB
- 11 PERSON WILL CUT BACK TO PART TIME
- 12 CURRENT EMPLOYER MAY STOP OFFERING HEALTH INSURANCE
- 15 BENEFITS FROM FORMER EMPLOYER, COBRA WILL RUN OUT
- 16 DIVORCE OR SEPARATION, MARITAL STATUS CHANGE
- 17 WILL BECOME INELIGIBLE BECAUSE OF AGE - LEAVING SCHOOL
- 18 PREMIUM COST INCREASES
- 20 NOT ELIGIBLE, NO LONGER QUALIFY FOR MEDICAID, PEACHCARE
- 24 WON'T NEED INSURANCE
- 25 WILL CHANGE EMPLOYERS AND MAY NOT BE ELIGIBLE FOR INSURANCE
- 26 WILL CHANGE EMPLOYERS, NEW EMPLOYER MAY NOT OFFER INSURANCE
- 27 INCOME MAY CHANGE
- 28 RETIREMENT
- 29 COMPANY, JOB STATUS UNSTABLE, MAY LOSE COVERAGE
- 30 HEALTH OR MEDICAL REASONS
- 31 AFRAID GOVERNMENT WILL CUT COVERAGE, CHANGE REQUIREMENTS
- 32 EMPLOYMENT STATUS CHANGE AFFECTING CURRENT SITUATION
- 33 GOVERNMENT, PRESIDENT, ECONOMY
- 95 OTHER
- 97 NONE, NO MORE
- 98 DK
- 99 REF

XII. Dental Insurance and Dental Care, Vision Insurance

INSD01

(not included in data set)

Is anyone now covered by an insurance plan that pays for routine dental care, such as cleanings and fillings?

IF YES: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH COVERED BY DENTAL INSURANCE COVERAGE
- 98 DK
- 99 REF

ninsd01

(computed variable) *This variable is computed from insd01*

Is person now covered by an insurance plan that pays for routine dental care, such as cleanings and fillings?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

INSD05

About how long has it been since FILL NAME last went to a dentist or dental hygienist?

READ RESPONSES AS NEEDED

- 1 During the past 12 months
- 2 One to two years ago (13 - 24 MONTHS)
- 3 Three to five years ago
- 4 More than five years ago
- 5 NEVER

- 8 DK
- 9 REF

INSD07

What is the main reason FILL NAME has not visited the dentist in the past 12 months?
(READ ONLY IF NOT OFFERED)

- 10 Fear, apprehension, nervousness, pain, dislike going
- 11 Cost
- 12 Do not have/know a dentist
- 13 Can't find a dentist who accepts Medicaid
- 14 Cannot get to office/clinic (too far away, no transportation)
- 15 Cannot get in to office/clinic (no appointments available)
- 16 No reason to go (no problems, no teeth)
- 18 Have not thought of it
- 19 Other priorities, too busy, hasn't had time
- 20 NEWBORN, TOO YOUNG, NO TEETH
- 21 NO TEETH, DENTURES
- 22 NO INSURANCE
- 95 OTHER (SPECIFY)
- 97 NO PARTICULAR REASON
- 98 DK
- 99 REF

INSV01

(not included in data set)

Is anyone now covered by an insurance plan that pays for routine vision care including regular eye exams?

IF YES: Who is that?

PROMPT: This includes any coverage you may have through your health insurance or through a separate plan.

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH HAS VISION INSURANCE
- 98 DK
- 99 REF

ninsv01

(computed variable) *This variable is computed from insv01*

Is person now covered by an insurance plan that pays for routine vision care including regular eye exams?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

XIII. Doctor Visits and Location Receive Medical Attention

DOCV01

How many times did FILL NAME see a doctor or health care provider during the past 12 months

PROMPT: Did FILL NAME see a doctor or health care provider about his/her health, NOT COUNTING when he/she may have stayed overnight in the hospital? Your best guess is fine.

INTS: THIS INCLUDES VISITS TO A DR.'S OFFICE, OUTPATIENT CLINIC, OR ANY OTHER PLACE FOR MEDICAL CARE BUT DOES NOT INCLUDE INSTANCES SUCH AS GETTING A FLU SHOT THROUGH WORK OR CHECKING THEIR BLOOD PRESSURE AT THE PHARMACY.

- 0 NONE
- 1 - 96 ENTER NUMBER OF VISITS
- 97 97 OR MORE

- 98 DK
- 99 REF

ndocv01

(computed variable) *This variable is computed from docv01*

How many times see doctor past 12 months

- 1 None
- 2 1
- 3 2
- 4 3 -5
- 5 6 - 10
- 6 11 - 15
- 7 16 - 20
- 8 21+
- 9 DK-REF

DOCV02

Ask of those with at least one visit in docv01

How many of those visits were for strictly routine check-ups, that is, when FILL NAME were/was not sick?

INTS: ROUTINE CARE INCLUDES ANY TREATMENT NOT RELATED TO ILLNESS OR INJURY AND CAN INCLUDE PHYSICALS, CHECK-UPS, AND FOLLOW-UP VISITS.

- 0 NONE
- 1 – 96 ENTER NUMBER OF VISITS
- 97 97 OR MORE

- 98 DK
- 99 REF

ndocv02

(computed variable) *This variable is computed from docv02*

How many visits routine checkups

- 1 None
- 2 1
- 3 2
- 4 3 -5
- 5 6 - 10
- 6 11 - 15
- 7 16 - 20
- 8 21+
- 9 DK-REF

DOCV02A

Ask of those with 0 routine checkups in the previous 12 months

How long has it been since FILL NAME last visited a doctor or clinic for a routine check-up?

INTS: ROUTINE CARE INCLUDES ANY TREATMENT NOT RELATED TO ILLNESS OR INJURY AND CAN INCLUDE PHYSICALS, CHECK-UPS, AND FOLLOW-UP VISITS.

- 1 WITHIN PAST 2 YEARS
- 2 MORE THAN 2 YEARS AGO BUT LESS THAN 5 YEARS AGO.
- 3 MORE THAN 5 YEARS AGO
- 4 NEVER

- 8 DK
- 9 REF

DOCV02B

Ask of all those except saying 'never' to docv02a

Is there a particular health care professional FILL NAME usually sees when FILL NAME goes there?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

Note: We ask place at the family level to reduce respondent burden

DOCV03

(not included in data set)

Is there one kind of place that EVERYONE living in the household usually goes when they are sick or need medical attention OR do they typically go to different places?

INTS: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.

- 1 YES, EVERYONE USUALLY GOES ONE PLACE
- 2 NO, GO TO DIFFERENT PLACES
- 3 NO ONE GOES TO THE DOCTOR

- 8 DK
- 9 REF

DOCV04

**Ask if everyone in the household goes to one place for medical attention
(not included in data set)**

What kind of place is this...
(READ RESPONSES)

INTS: IF NOT MEDICAL PROVIDER THEN: By this I mean the type of health care provider you would go to in these instances.

- 10 A private doctor's office (or group practice)
- 16 Private clinic,
- 11 Public health, community, or free clinic,
- 12 Hospital outpatient clinic,
- 13 Emergency room,
- 14 Walk-in or urgent care
- 15 Some other place? (specify)

- 20 VA CLINIC
- 97 DO NOT GO ONE PLACE MOST OFTEN
- 98 DK
- 99 REF

DOCV05

**Ask if everyone in the household goes to one place for medical attention
(not included in data set)**

Is this the same place EVERYONE goes when they need routine or preventive care, such as a regular check-up?

[INTS: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.]

1 YES

2 NO

8 DK

9 REF

DOCV06

**Ask if everyone in the household goes to one place for medical attention and they say no, dk, ref to docv05
(not included in data set)**

What kind of place do household members usually go when they need routine or preventive care, such as a regular check-up?
(READ RESPONSES)

PROMPT: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.

- 10 A private doctor's office (or group practice)
- 16 Private clinic,
- 11 Public health, community, or free clinic,
- 12 Hospital outpatient clinic,
- 13 Emergency room,
- 14 Walk-in or urgent care
- 15 Some other place? (specify)

- 20 VA CLINIC
- 97 DO NOT GO ONE PLACE MOST OFTEN
- 98 DK
- 99 REF

DOCV07

**Ask if everyone in the household does not go to one place for medical attention, there is no usual place everyone goes or DK or REF response to docv03
(not included in data set)**

Is there a place that FILL NAME usually goes when he/she is sick or needs medical attention?

PROMPT: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.

- 1 YES
- 2 NO, NO USUAL PLACE
- 3 YES, MORE THAN ONE USUAL PLACE
- 4 NEVER GO TO THE DOCTOR

- 8 DK
- 9 REF

DOCV08

Ask if everyone in the household does not go to one place for medical attention, there is no usual place everyone goes or DK or ref response to docv03 and ask of those not indicating never go to doctor, DK, ref to docv03

(not included in data set)

What kind of place do/does FILL NAME go most often...

(READ RESPONSES)

INTS: IF NOT MEDICAL PROVIDER THEN: By this I mean the type of health care provider you would go to in these instances.

10 A private doctor's office (or group practice)

16 Private clinic,

11 Public health, community, or free clinic,

12 Hospital outpatient clinic,

13 Emergency room,

14 Walk-in or urgent care

15 Some other place? (specify)

20 VA CLINIC

97 DO NOT GO ONE PLACE MOST OFTEN

98 DK

99 REF

DOCV09

Ask if everyone in the household does not go to one place for medical attention, there is no usual place everyone goes or DK or ref response to docv03 and ask of those not indicating never go to doctor, DK, REF to docv03

(not included in data set)

Is this the same place FILL NAME usually go/goes when you/he/she need(s) routine or preventive care, such as a regular check-up/well baby check-up?

PROMPT: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.

1 YES

2 NO

8 DK

9 REF

DOCV10

Ask if everyone in the household does not go to one place for medical attention, there is no usual place everyone goes or DK or ref response to docv03 and ask of those not indicating never go to doctor to docv03

(not included in data set)

What kind of place does FILL NAME usually go to when he/she needs routine or preventive care, such as a check-up?

(READ RESPONSES)

PROMPT: By PLACE I mean locations such as a private doctor's office, a hospital emergency room, a clinic, or a health center. Think of this as ONE place even if those in the household might go to several private doctors or different private doctors.

10 A private doctor's office (or group practice)

16 Private clinic,

11 Public health, community, or free clinic,

12 Hospital outpatient clinic,

13 Emergency room,

14 Walk-in or urgent care

15 Some other place? (specify)

20 VA CLINIC

97 DO NOT GO ONE PLACE MOST OFTEN

98 DK

99 REF

ndocv07

(computed variable) *This variable is computed from docv03 and docv07*

Is there a place that person usually goes when he is sick or needs medical attention?'

- 1 YES
- 2 NO, NO USUAL PLACE
- 3 YES, MORE THAN ONE USUAL PLACE
- 4 NEVER GO TO THE DOCTOR
- 8 DK
- 9 REF

ndocv08

(computed variable) *This variable is computed from docv04 and docv08*

Type of place go for medical care

- 10 A private doctor's office, or group practice
- 11 Public health, community, or free clinic
- 12 Hospital outpatient clinic
- 13 Emergency room
- 14 Walk-in or urgent care
- 15 Some other place
- 16 Private clinic
- 20 VA CLINIC, MILITARY BASE CLINIC OR HOSPITAL
- 97 DO NOT GO ONE PLACE MOST OFTEN
- 98 DK
- 99 REF

ndocv09

(computed variable) *This variable is computed from docv05 and docv09*

Same place go for routine care?

- 1 YES
- 2 NO
- 8 DK
- 9 REF

ndocv10

(computed variable) *This variable is computed from docv06 and docv10*

Type of place go for routine care

- 10 A private doctor's office, or group practice
- 11 Public health, community, or free clinic
- 12 Hospital outpatient clinic
- 13 Emergency room
- 14 Walk-in or urgent care
- 15 Some other place
- 16 Private clinic
- 20 VA CLINIC, MILITARY BASE CLINIC OR HOSPITAL
- 97 DO NOT GO ONE PLACE MOST OFTEN
- 98 DK
- 99 REF

ntdocv10

(computed variable) *This variable is computed from docv06 and docv10*

Type of place go for routine care

- 10 A private doctor's office, or group practice
- 11 Public health, community, or free clinic
- 12 Hospital outpatient clinic
- 13 Emergency room
- 14 Walk-in or urgent care
- 15 Some other place
- 16 Private clinic
- 20 VA CLINIC, MILITARY BASE CLINIC OR HOSPITAL
- 97 DO NOT GO ONE PLACE MOST OFTEN
- 98 DK
- 99 REF

DOCV11

(not included in data set)

Within the past 12 months, did anyone in the household stay overnight in a hospital?

IF YES ASK: Which members of the household stayed overnight in a hospital?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

97 NO ONE IN HH STAYED OVERNIGHT IN A HOSPITAL

98 DK

99 REF

NDOCV11

(computed variable) *This variable is computed from docv11*

Person stayed overnight in a hospital in last 12 months

- 1 Yes
- 2 No
- 8 DK
- 9 REF

DOCV12

(not included in data set)

DURING THE PAST 12 MONTHS did you or anyone in the household seek medical care in a hospital emergency room for any reason?

PROMPT: Do not include any visits to walk in treatment centers.

IF YES ASK: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

97 NO ONE IN HH SOUGHT ER CARE

98 DK

99 REF

NDOCV12

(computed variable) *This variable is computed from docv12*

Person sought medical care in an ER in last 12 months

- 1 Yes
- 2 No
- 8 DK
- 9 REF

DOCV14

(not included in data set)

During the past 12 months, about how many days of school (work) has FILL NAME missed due to illness or injury?

0 NONE

1 - 365 ENTER NUMBER OF DAYS

888 DK

999 REF

ndocv14

(computed variable) *This variable is computed from docv14*

During the past 12 months, about how many days of school or work has person missed due to illness or injury?

1 None

2 1

3 2

4 3 -5

5 6 - 10

6 11 - 15

7 16 - 20

8 21+

9 DK-REF

99 Did not work, go to school

XIV. Prescription Drugs and Cost

RXU01

How many different types of prescription drugs does FILL NAME take on a regular basis?

- 0 NONE
- 1 - 96 ENTER NUMBER
- 97 97 OR MORE

- 98 DK
- 99 REF

nrxu01

(computed variable) *This variable is computed from rxu01*

How many different types of prescription drugs does person take on a regular basis?

- 1 None
- 2 1
- 3 2
- 4 3 - 5
- 5 6 - 10
- 6 11+
- 9 DK-REF

RXU02

Ask if person takes any prescriptions on a regular basis

What is the amount that FILL NAME
pays per month out of pocket for prescription drugs that
FILL NAME uses on a regular basis?

(READ RESPONSES)

- 10 Less than \$50
- 11 \$50 to \$99
- 12 \$100 to \$199
- 13 \$200 to \$299
- 14 \$300 to \$399
- 15 \$400 to \$499
- 16 \$500 to \$599
- 17 More than \$600
- 18 ONLY KNOW HOW MUCH ANNUALLY (ASK RXU03)
- 98 DK
- 99 REF

RXU03

Ask if person takes any prescriptions on a regular basis and if person can only provide annual amount spent

How much does FILL NAME spend annually on
prescription drugs used on a regular basis?

- 10 \$10 or less
- 11 - 99996 ENTER DOLLAR AMOUNT
- 99997 \$99,997 OR MORE

- 8 DK
- 9 REF

nrxu02

(computed variable) *This variable is computed from rxu02 and rxu03*

Which category best represents the amount that person pays per month out of pocket for prescription drugs that person uses on a regular basis?

- 1 Less than \$50
- 2 \$50 to \$99
- 3 \$100 to \$199
- 4 \$200 to \$299
- 5 \$300 to \$399
- 6 \$400 to \$499
- 7 \$500 to \$599
- 8 More than \$600
- 9 DK-REF
- 99 No Prescription

XV. Health Care Barriers

HC01

(not included in data set)

During the past 12 months, was there any time when anyone in the household needed any of the following but didn't get it because they could not afford it:

ENTER <1> TO CONTINUE

HCB02

(not included in data set)

Medical care from a doctor or surgery?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb02

(computed variable) *This variable is computed from hcb02*

Was there any time person needed medical care from a doctor but did not get it because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCB04

(not included in data set)

Mental health care or counseling?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb04

(computed variable) *This variable is computed from hcb04*

Was there any time person needed mental health care or counseling but did not get it because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCB05

(not included in data set)

Dental care including checkups?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb05

(computed variable) *This variable is computed from hcb05*

Was there any time person needed dental care including checkups but did not get it because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCB05a

(not included in data set)

A diagnostic test such as a CAT scan, MRI, lab work, or x-ray that was recommended by a doctor or other care provider?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get it because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

nhcb05a

(computed variable) *This variable is computed from hcb05a*

Was there any time person needed a diagnostic test but did not get it because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCB03

(not included in data set)

Prescription Medicines?

PROMPT: During the past 12 months was there any time anyone in the household needed _____ but didn't get them because they could not afford it?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb03

(computed variable) *This variable is computed from hcb03*

Was there any time person needed prescription medicines but did not get them because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCB05c

(not included in data set)

During the past 12 months, was there any time that you or anyone in the household skipped doses or took smaller amounts of their prescription drugs to make them last longer?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb05c

(computed variable) *This variable is computed from hcb05c*

Was there any time that person skipped doses, took smaller amounts of their prescription to make them last longer?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HCb06
(not included in data set)

During the past 12 months, did anyone in the household receive any medical bill for more than \$500 that had to be paid out-of-pocket?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE
- 98 DK
- 99 REF

nhcb06
(computed variable) *This variable is computed from hcb06*

Was there any time person needed a diagnostic test but did not get it because they could not afford it?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

HB10

(not included in data set)

During the last 12 months, were there times that there were problems paying for medical bills for anyone in your household?

1 YES

2 NO

8 DK

9 REF

BA01

(not included in data set)

Has anyone in the household ever delayed or not gotten care because they could not find a doctor or other health care provider or a health care provider was not available at the time they needed care?

IF YES: Who was that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

nBA01

(computed variable) *This variable is computed from ba01*

Has person delayed or not gotten care because they could not find a provider?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

BA01a1 to BA01a7

Ask if yes to ba01

This is a multiple response variable.

What type of care did FILL NAME delay or not get?

(READ RESPONSES AS NEEDED)

- 10 DENTAL CARE INCLUDING CHECKUPS
- 11 DIAGNOSTIC TEST (CAT SCAN, MRI, LAB WORK, OR X-RAY)
- 12 EMERGENCY ROOM CARE'
- 13 HOSPITAL CARE/HOSPITAL STAY
- 14 MEDICAL CARE FOR AN ILLNESS/CONDITION (FLU, ASTHMA)
- 15 MEDICAL CARE FOR AN INJURY OR POISONING
- 16 MENTAL HEALTH CARE OR COUNSELING
- 17 OUTPATIENT CARE (DAY SURGERY)
- 18 PRESCRIPTION MEDICINES
- 19 REHABILITATION SERVICES
- 20 ROUTINE OR PREVENTIVE MEDICAL CARE (CHECKUP, WELL BABY)
- 21 SERIOUS MEDICAL CONDITION (PNEUMONIA)
- 22 SURGERY

- 95 OTHER (SPECIFY)
- 97 NOTHING
- 98 DK
- 99 REF

BA02

(not included in data set)

Has anyone in the household ever gotten care at a hospital emergency room because they could not find a doctor or other health care provider or a health care provider was not available at the time they needed care?

IF YES: Who was that?

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

97 NO ONE IN HH

98 DK

99 REF

nBA02

(computed variable) *This variable is computed from ba02*

Has person not gotten care at an ER because they could not find a provider?

1 Yes

2 No

8 DK

9 REF

BAMC01
(not included in data set)

Has anyone in your household ever delayed or not gotten care because they could not find or did not know a doctor or other health care provider who accepts Medicaid/PeachState/PeachCare for Kids?

IF YES: Who is that?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

nBAMC01
(computed variable) *This variable is computed from bamc012*

Has person delayed or not gotten care because they could not find a provider who accepts Medicaid/PeachCare

- 1 Yes
- 2 No
- 8 DK
- 9 REF

BAMC01a (labeled BAMC011 to BAMC013 in dataset)

Ask if yes to ba01

This is a multiple response variable.

What type of care did FILL NAME delay or not get?

(READ RESPONSES AS NEEDED)

- 10 DENTAL CARE INCLUDING CHECKUPS
- 11 DIAGNOSTIC TEST (CAT SCAN, MRI, LAB WORK, OR X-RAY)
- 12 EMERGENCY ROOM CARE'
- 13 HOSPITAL CARE/HOSPITAL STAY
- 14 MEDICAL CARE FOR AN ILLNESS/CONDITION (FLU, ASTHMA)
- 15 MEDICAL CARE FOR AN INJURY OR POISONING
- 16 MENTAL HEALTH CARE OR COUNSELING
- 17 OUTPATIENT CARE (DAY SURGERY)
- 18 PRESCRIPTION MEDICINES
- 19 REHABILITATION SERVICES
- 20 ROUTINE OR PREVENTIVE MEDICAL CARE (CHECKUP, WELL BABY)
- 21 SERIOUS MEDICAL CONDITION (PNEUMONIA)
- 22 SURGERY

- 95 OTHER (SPECIFY)
- 97 NOTHING
- 98 DK
- 99 REF

XVI. General Health Status

HSTAT01

(not included in data set)

Now, I'd like to ask several questions about the health of each member of your family.

ENTER <1> TO CONTINUE

HSTAT021

Would you say FILL NAME's health, in general, is...

(READ RESPONSES)

- 1 Excellent
- 2 Very Good
- 3 Good
- 4 Fair, or
- 5 Poor

- 8 DK
- 9 REF

HSTAT031

Now thinking about FILL NAME's physical health, which includes physical illness and injury, for how many days during the past month was (your/his/her) physical health not good?

- 0 NONE
- 1 - 30 ENTER NUMBER OF DAYS

- 98 DK
- 99 REF

nhstat03

(computed variable) *This variable is computed from hstat03*

Now thinking about person's physical health, which includes physical illness and injury, for how many days during the past 30 days was person's physical health NOT good?

- 1 None
- 2 1
- 3 2
- 4 3 - 5
- 5 6 -10
- 6 11 - 15
- 7 16 - 20
- 8 21+
- 9 DK-REF

HSTAT041

Now thinking about FILL NAME 's mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was FILL NAME 's mental health not good?

- 0 NONE
- 1 - 30 ENTER NUMBER OF DAYS

- 98 DK
- 99 REF

nhstat04

Now thinking about person's mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was person's mental health not good?

- 1 None
- 2 1
- 3 2
- 4 3 - 5
- 5 6 -10
- 6 11 - 15
- 7 16 - 20
- 8 21+
- 9 DK-REF

HSTAT05

(not included in data set)

Has anyone in the household ever been turned down for health insurance by an insurance company?

IF YES ASK: WHICH PERSON?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH
- 98 DK
- 99 REF

nHstat05

(computed variable) *This variable is computed from hstat05*

Has person ever been turned down for health insurance by an insurance company?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

XVII. Chronic Conditions

QE1b

(not included in data set)

Next I'm going to ask about several medical conditions.
Does anyone in the household currently have Asthma?

IF YES ASK: Who has Asthma?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH WITH CONDITION
- 98 DK
- 99 REF

Nqe1b

(computed variable) *This variable is computed from qe1b*

Does person now have Asthma?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1ba

Ask for every person in the HH with asthma

Did a doctor or other health care provider say that FILL NAME has Asthma?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1bb

Ask for every person in the HH with asthma

Does FILL NAME currently take any medications (including an inhaler) for asthma?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1bc

Ask for every person in the HH with asthma

During the past 12 months has FILL NAME had to visit an emergency room or urgent care clinic because of asthma?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1d

(not included in data set)

Has anyone in the household ever been told by a doctor that they have diabetes or high blood sugar?

INTS: DO NOT INCLUDE PRE-DIABETES, POTENTIAL DIABETES, OR BORDERLINE DIABETES

IF YES ASK: Which member(s) of the household?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

97 NO ONE IN HH WITH CONDITION

98 DK

99 REF

Nqe1d

(computed variable) *This variable is computed from qe1d*

Does person now have diabetes or high blood sugar?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1da

Ask for every person in the HH with diabetes and female > 14

Did FILL NAME have diabetes or high blood sugar
ONLY during pregnancy?

INTS: IF PERSON HAS NEVER BEEN PREGNANT, SELECT OPTION 2 "NO"

1 YES

2 NO

8 DK

9 REF

QE1db

Ask for every person in the HH with diabetes

Has FILL NAME seen or needed to see a doctor for their diabetes during the past year?

1 YES

2 NO

8 DK

9 REF

QE1dc

Ask for every person in the hh with diabetes

Does FILL NAME currently take any medications for diabetes or high blood sugar?

1 YES

2 NO

8 DK

9 REF

QE1dd

Ask for every person in the hh with diabetes

During the past 12 months has FILL NAME had to visit an emergency room or urgent care clinic because of diabetes or high blood sugar?

1 YES

2 NO

8 DK

9 REF

QE1e

(not included in data set)

Has anyone in the household ever been told by a doctor that they have high blood pressure or hypertension?

IF YES ASK: Which member(s) of the household?

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

97 NO ONE IN HH WITH CONDITION

98 DK

99 REF

Nqe1e

(computed variable) *This variable is computed from qe1e*

Does person now have high blood pressure or hypertension?

1 Yes

2 No

8 DK

9 REF

QE1ea

Ask for every person in the hh with high blood pressure

Has FILL NAME seen or needed to see a doctor for their blood pressure during the past year?

1 YES

2 NO

8 DK

9 REF

QE1eb

Ask for every person in the HH with high blood pressure

Does FILL NAME currently take any medications for high blood pressure?

1 YES

2 NO

8 DK

9 REF

QE1f

(not included in data set)

Has anyone in the household ever been told by a doctor that they have High cholesterol?

IF YES ASK: Which member(s) of the household?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

97 NO ONE IN HH WITH CONDITION

98 DK

99 REF

Nqe1f

(computed variable) *This variable is computed from qe1f*

Does person now have high cholesterol?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1fa

Ask for every person in the HH with high cholesterol

Has FILL NAME seen or needed to see a doctor for their cholesterol during the past year?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1fb

Ask for every person in the HH with high cholesterol

Does FILL NAME currently take any medications for high cholesterol?

1 YES

2 NO

8 DK

9 REF

QE1g

(not included in data set)

Has anyone in the household ever been told by a doctor or other health care provider that they have Heart disease; such as hardening of the arteries, angina, congestive heart failure, or heart attack?

IF YES ASK: Which member(s) of the household?

10 PERSON 1

11 PERSON 2

12 PERSON 3

13 PERSON 4

14 PERSON 5

15 PERSON 6

16 PERSON 7

17 PERSON 8

97 NO ONE IN HH WITH CONDITION

98 DK

99 REF

Nqe1g

(computed variable) *This variable is computed from qe1g*

Does person now have heart disease?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1ga

Ask for every person in the HH with heart disease

Has FILL NAME seen or needed to see a doctor for their heart disease during the past year?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1gb

Ask for every person in the HH with heart disease

Does FILL NAME currently take any heart medications?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1h
(not included in data set)

Depression?

PROMPT: Has anyone in the household ever been told by a doctor or other health care provider that they have...

IF YES ASK: Which member(s) of the household?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH WITH CONDITION
- 98 DK
- 99 REF

Nqe1h
(computed variable) *This variable is computed from qe1h*

Does person now have depression?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1ha

Ask for every person in the hh with depression

Has FILL NAME seen or needed to see a doctor for their depression during the past year?

1 YES

2 NO

8 DK

9 REF

QE1hb

Ask for every person in the HH with depression

Does FILL NAME currently take any medications for depression?

1 YES

2 NO

8 DK

9 REF

QE1i

(not included in data set)

Lung Disease such as Chronic Obstructive Pulmonary Disease (COPD), Chronic Bronchitis or Emphysema?

PROMPT: Has anyone in the household ever been told by a doctor or other health care provider that they have...

IF YES ASK: Which member(s) of the household?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

97 NO ONE IN HH WITH CONDITION

98 DK

99 REF

Nqe1i

(computed variable) *This variable is computed from qe1i*

Does person now have lung disease?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1ia

Ask for every person in the HH with COPD

Has FILL NAME seen or needed to see a doctor for their COPD during the past year?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1ib

Ask for every person in the HH with COPD

Does FILL NAME currently take any medications for COPD?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

QE1j
(not included in data set)

Cancer

PROMPT: Has anyone in the household ever been told by a doctor or other health care provider that they have...

IF YES ASK: Which member(s) of the household??

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH WITH CONDITION
- 98 DK
- 99 REF

Nqe1j
(computed variable) *This variable is computed from qe1j*

Does person now have cancer?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

QE1jb

Ask for every person in the hh with cancer

Has FILL NAME seen or needed to see a doctor for their cancer during the past year?

1 YES

2 NO

8 DK

9 REF

QE1jc

Ask for every person in the hh with cancer

Does FILL NAME currently take any medications for cancer?

1 YES

2 NO

8 DK

9 REF

XVIII. Exercise

EXER

**Ask for every person 19 and older
(not included in data set)**

During the past month, other than their regular job, did ANY household member participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

IF YES ASK: Which member(s) of the household?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8

- 97 NO ONE IN HH WITH CONDITION
- 98 DK
- 99 REF

nexer

(computed variable) *This variable is computed from exer*

Has person exercised in the past month?

- 1 Yes
- 2 No
- 8 DK
- 9 REF

XIX. Employment

EMP01

**Ask of those 18 and older
(not included in data set)**

We are almost done with the survey.
This next series of questions is about jobs and employment.

PROMPT: Answers to these questions are important because they help us understand about health issues and sources of health insurance. Also, I want to emphasize that the information you provide will be kept confidential and will only be used in combined form.

ENTER <1> TO CONTINUE

EMP02

Ask of those 18 and older

Are/Is FILL NAME working, keeping house,
going to school, or something else?

IF ON VACATION ASK: Does this person generally work?

IF SOMETHING ELSE ASK:

Are/Is FILL NAME PRIMARILY unemployed, not at
your/his/her job temporarily, retired, unable to work,
or something else?

- 10 WORKING (INCLUDE THOSE ON VACATION)
- 11 KEEPING HOUSE
- 12 GOING TO SCHOOL
- 13 WITH A JOB, BUT NOT AT WORK TEMPORARILY
- 14 UNEMPLOYED, LAID OFF, LOOKING FOR WORK
- 15 RETIRED
- 16 DISABLED
- 17 UNABLE TO WORK
- 95 OTHER (SPECIFY)

- 98 DK
- 99 REF

EMP03

Ask of those 18 and older and going to school, keeping house, retired, other, dk, or ref to emp02

Do/Does FILL NAME typically work for pay?

1 YES

2 NO

8 DK

9 REF

working

(computed variable) *This variable is computed from emp02 and emp03*

Is person working ?

0 Under 18

1 Yes

2 No

EMP03a

Ask of those 18 and older and employed, temporarily not at work, or doing something for pay

Does FILL NAME have more than one paying job?

1 YES

2 NO

8 DK

9 REF

EMP04

Ask of those 18 and older and employed, temporarily not at work, or doing something for pay

For the job FILL NAME works at the most hours, is this a...

- 1 permanent,
- 2 temporary, or
- 3 seasonal

- 8 don't know
- 9 refused

EMP05

Ask of those 18 and older and employed, temporarily not at work, or doing something for pay

What is the total number of hours FILL NAME usually works per week?

- 1-96 ENTER NUMBER
- 97 97 OR MORE HOURS
- 98 DK
- 99 REF

ntemp05

(computed variable) *This variable is computed from emp05*

Categorical-For the job person works at the most, what is the total number of hours usually worked per week?

- 10 1-20
- 11 21-34
- 12 35-39
- 13 40-44
- 14 45-49
- 15 50-54
- 16 55-59
- 17 60+
- 98 DK
- 99 REF

Occupational Categories

Note: The following questions are used to code into Bureau of Labor Statistics occupation codes

EMP05a

**Ask of those 18 and older and employed, temporarily not at work, or doing something for pay
(not included in data set)**

What kind of work do you do?

PROMPT: For example, are you a registered nurse, a logger, an accountant...
If you have more than one job, please answer the question for the job that you spend the most hours doing.

1 SPECIFY

8 DON'T KNOW/NOT SURE

9 REFUSED

EMP05b

**Ask of those 18 and older and employed, temporarily not at work, or doing something for pay
(not included in data set)**

What are your most important activities or duties?

PROMPT: For example, a nurse's most important duties may be patient care.

1 SPECIFY

8 DON'T KNOW/NOT SURE

9 REFUSED

OCCU

(computed variable) *This variable is computed from emp05a and emp05b*

Responses from these two questions will be coded into BLS occupations:

- 11 Management Occupations
- 13 Business and Financial Operations Occupations
- 15 Computer and Mathematical Occupations
- 17 Architecture and Engineering Occupations
- 19 Life, Physical, and Social Science Occupations
- 21 Community and Social Services Occupations
- 23 Legal Occupations
- 25 Education, Training, and Library Occupations
- 27 Arts, Design, Entertainment, Sports, and Media Occupations
- 29 Healthcare Practitioners and Technical Occupations
- 31 Healthcare Support Occupations
- 33 Protective Service Occupations
- 35 Food Preparation and Serving Related Occupations
- 37 Building and Grounds Cleaning and Maintenance Occupations
- 39 Personal Care and Service Occupations
- 41 Sales and Related Occupations
- 43 Office and Administrative Support Occupations
- 45 Farming, Fishing, and Forestry Occupations
- 47 Construction and Extraction Occupations
- 49 Installation, Maintenance, and Repair Occupations
- 51 Production Occupations
- 53 Transportation and Material Moving Occupations
- 55 Military Specific Occupations
- 60 Disabled
- 61 Unemployed
- 62 Going to School
- 63 Retired
- 64 Homemaker
- 65 Self Employed
- 95 Other
- 98 DK
- 99 REF

EMP06

Ask of those 18 and older and employed, temporarily not at work, or doing something for pay

On this job, are/is FILL NAME employed by a private company or business, a government agency, in active military duty, self-employed, working in a family business or farm, or something else?

INTERVIEWER: CODE NOT-FOR-PROFIT /FOUNDATION AS PRIVATE COMPANY. IF EMPLOYED BY A SCHOOL COLLEGE OR UNIVERSITY, CLARIFY WHETHER THIS IS A STATE OR PRIVATE COLLEGE OR UNIVERSITY OR A PRIVATE OR PUBLIC SCHOOL

- 10 PRIVATE COMPANY
- 11 GOVERNMENT AGENCY
- 12 MILITARY DUTY
- 13 SELF-EMPLOYED
- 14 FAMILY-BUSINESS OR FARM
- 15 PUBLIC EDUCATIONAL INSTITUTION, SCHOOL, COLLEGE
- 16 PRIVATE EDUCATIONAL INSTITUTION, SCHOOL, COLLEGE
- 95 OTHER
- 98 DK
- 99 REF

EMP07

Ask of those employed by a private company

Is this company a manufacturing company, a retail company, a company that provides services, or something else?

- 1 MANUFACTURING
- 2 RETAIL
- 3 SERVICE
- 4 CONSTRUCTION
- 5 FARMING/AGRICULTURE

- 7 SOMETHING ELSE (SPECIFY)
- 8 DK
- 9 REF

EMP08

Ask of those employed by a government agency

Does FILL NAME work for the federal government, state government, or local government such as a county or city, or a public school or college?

- 1 FEDERAL GOVERNMENT
- 2 STATE GOVERNMENT
- 3 LOCAL GOVERNMENT
- 4 PUBLIC EDUCATIONAL INSTITUTION, SCHOOL, COLLEGE
- 5 OTHER (SPECIFY)

- 8 DK
- 9 Ref

nemp0608

(computed variable) *This variable is computed from emp06 and emp08*

Is person employed by a private company or business, a government agency, in active military duty, self-employed, working in a family business or farm, or something else?

- 10 PRIVATE COMPANY
- 11 GOVERNMENT AGENCY
- 12 MILITARY DUTY
- 13 SELF-EMPLOYED
- 14 FAMILY-BUSINESS OR FARM
- 15 PUBLIC EDUCATION
- 16 PRIVATE EDUCATION
- 17 FEDERAL GOVERNMENT
- 18 STATE GOVERNMENT
- 19 LOCAL GOVERNMENT
- 20 GOVERNMENT (OTHER)
- 21 GOVERNMENT (PUBLIC EDUCATION)
- 95 OTHER(SPECIFY)
- 98 DK
- 99 REF

EMP09

About how many people are employed by this employer,
at all locations?

PROMPT: If it is a firm that has multiple locations (like a fast food restaurant or chain store) in your city or across states, please include the number of people at ALL locations. If you are unsure, your best guess is fine).

INTS: READ IF NECESSARY

- 10 Just 1
- 11 2-10
- 12 11-24
- 13 25-50
- 14 51-100
- 15 101-500
- 16 500 & over

- 98 DK
- 99 REF

EMP10a

Ask of those 18 and older and employed, temporarily not at work, or doing something for pay

How long has FILL NAME worked for this employer?

IF LESS THAN ONE YEAR - ENTER 0. YOU WILL ENTER THE MONTHS IN THE NEXT QUESTION

- 0 LESS THAN ONE YEAR
- 1-96 ENTER NUMBER OF YEARS
- 97 97 OR MORE YEARS

- 98 DK
- 99 REF

EMP10a1

Ask of those saying 0 to emp10a

INTS: ENTER NUMBER OF MONTHS:

1 ONE MONTH OR LESS

2-11 ENTER NUMBER OF MONTHS

98 DK

99 REF

nemp10a

(computed variable) *This variable is computed from emp10a and emp10a1*

Categories: How long has person worked for this employer?

11 Less than 3 months

12 4 to 6 months

13 7 to 8 months

14 9 to 11 months

15 1 to 2 years

16 3 to 5 years

17 6 to 10 years

18 11 to 20 years

19 21 or more years

98 DK

99 REF

XX. Employer Sponsored Insurance

This is our module for ESI. We typically ask these questions of all working adults who are not covered through a employer sponsored health insurance program through their own employer. It covers the topics you cover in your questions EMPCOV1 – 4 though in more detail.

While the section contains quite a few questions, typically it takes about 1.5 minutes on average to get through (largely since most people will skip out since we've found about 60% of people who are asked this series work for employers that do not offer health insurance.

Ask for all households with at least one working member – each working person will be asked questions individually.

Those with private health insurance through their employer will be asked ESI01 and then skip to EMP16.

ESIINTO

(not included in data set)

Next, I am going to ask a few questions about health insurance that may be offered by the employers of those living in the household.

ENTER <1> TO CONTINUE

Ask for all households with at least one working member – each working person will be asked questions individually.

Those with private health insurance through their employer will be asked ESI01 and then skip to EMP16.

SKIP question if person is respondent.

ESI01

Next, I am going to ask a few questions about health insurance through FILL NAME's employer or business.

IF PERSON IS NOT RESPONDENT: Do you feel you know enough about any potential health insurance that is offered through FILL NAME's employer or business to answer these questions?

1 YES, KNOW ENOUGH/SPEAKING WITH RESPONDENT

2 NO

8 DK

9 REF

ESI01a

Do you know if FILL NAME's employers of business offers any type of health insurance to their employees?

IF DOES NOT OFFER - SELECT OPTION #2

OTHERWISE SELECT 3, 4, 8, or 9 to SKIP SECTION FOR THIS PERSON AND READ:

Then for FILL NAME, we will skip this section and at the end of the survey I will make arrangements to speak with FILL NAME about his/her employer offered insurance.

2 EMPLOYER DOES NOT OFFER HEALTH INSURANCE

3 DO NOT KNOW ENOUGH ABOUT HEALTH INSURANCE OFFERED BY EMPLOYER

4 YES, EMPLOYER OFFERS

8 DK

9 REF

IF ANSWER IS NO, DO NOT KNOW ENOUGH, DK, OR REF – the person will be flagged in the program. After completing the interview with the respondent, the interviewer will ask to speak directly to the individual about whom the respondent had no knowledge. If available they will ask the ESI series of questions. If not available the interviewer will schedule a callback and the case will be coded as a partial complete.

EMP12

**Ask of those who are working and who are not policy holders of private health insurance through an employer
(not included in data set)**

Does FILL NAME's employer or labor union offer health insurance coverage?

IF SELF EMPLOYED, FAMILY BUSINESS OR FARM:

Does your/his/her business or farm offer any health insurance plans to any of its employees?

1 YES

2 NO

8 DK

9 REF

newemp12

(computed variable) *This variable is computed from esi01a and emp12*

Does person's employer or labor union offer health insurance coverage?(combined emp12&esi01a)

1 Yes

2 No

8 DK

Ask of those saying YES to EMP12

EMP14a

Does the health insurance offered by FILL NAME's employer or labor union cover most of the medical expenses for doctor's visits?

1 YES

2 NO

8 DK

9 REF

EMP14b

Ask of those saying YES to EMP12

Hospital visits and care?

PROMPT: Does the health insurance offered by FILL NAME's employer or labor union cover most of the medical expenses for...

1 YES

2 NO

8 DK

9 REF

EMP14c

Ask of those saying YES to EMP12

Outpatient services, medical or diagnostic tests?

PROMPT: Does the health insurance offered by FILL NAME's employer or labor union cover most of the medical expenses for...

PROMPT: A diagnostic test is medical care such as a cat scan, MRI, lab work, or x-ray

1 YES

2 NO

8 DK

9 REF

EMP14d

Ask of those saying YES to EMP12

Prescription medications?

PPROMPT: Does the health insurance offered by FILL NAME's employer or labor union cover most of the medical expenses for...

1 YES

2 NO

8 DK

9 REF

EMP15a1

Ask of those saying YES to EMP12

Does the health insurance offered through FILL NAME's employer or labor union also provide an option to include coverage for FILL NAME's spouse?

PROMPT: Even if you/this person do/does not have a spouse, we are still interested in whether a spouse could be covered through this insurance.

1 YES

2 NO

8 DK

9 REF

EMP15b1

Ask of those saying yes to EMP12

FILL NAME's child dependents?

PROMPT: Does the health insurance offered through FILL NAME's employer also provide an option to include coverage for...

PROMPT: Even if you/this person do/does not have children we are still interested in whether a child could be covered through this insurance.

1 YES

2 NO

8 DK

9 REF

CHECK QUESTION – IF PERSON IS UNSURE ABOUT THE CHARACTERISTICS OF THE INSURANCE POLICY, THEY WILL BE SKIPPED – WE WILL THEN RECONTACT THE HOUSEHOLD TO OBTAIN INFORMATION DIRECTLY FROM THE PERSON

ESICHK

(not included in data set)

INTERVIEWER: IF
IS THE RESPONDENT, SELECT <1> TO CONTINUE

OTHERWISE SELECT <2> TO SKIP SECTION FOR THIS PERSON AND READ:

Thank you, but for this survey, we need to know about FILL NAME's employer offered insurance. At the end of the survey, I can make arrangements to speak with FILL NAME about their employer offered insurance.

1 SPEAKING WITH RESPONDENT

2 NOT THE RESPONDENT

EMP13 1 to EMP13 4

Ask of those indicating yes to EMP12

This is a multiple response variable.

Why was health insurance coverage not taken?

INTS: ENTER ALL MENTIONED BY RESPONDENT

PROMPT: Were there any other reasons?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH
- 11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK
- 12 INELIGIBLE - MEDICAL PROBLEMS
- 13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH
- 14 DOES NOT NEED HEALTH INSURANCE, DO NOT WANT
- 15 INSURANCE FROM OTHER SOURCE - MEDICARE, MILITARY, MEDICAID
- 16 COST - COVERED FOR LESS THROUGH THE STATE, MEDICAID
- 17 TEMPS, SEASONAL WORKERS NOT ELIGIBLE
- 18 TEMPORARILY NOT AT WORK - COVERAGE NOT IN EFFECT
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 PRIVATE INSURANCE SPOUSE, OTHER SOURCE - BETTER PLAN
- 22 PRIVATE INSURANCE FROM SPOUSE, OTHER SOURCE - LESS EXPENSIVE
- 23 INSURANCE THROUGH SPOUSE - BOTH WORK AT SAME COMPANY
- 24 EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE
- 25 SELF-EMPLOYED
- 26 ON DISABILITY
- 27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER
- 29 WAITING FOR COVERAGE, NOT SURE HOW TO ENROLL
- 30 LOST JOB, TEMPORARILY NOT AT WORK
- 31 CATASTROPHIC COVERAGE ONLY
- 32 QUIT JOB, RETIRING
- 33 HAS OTHER COVERAGE, COVERED BY SPOUSE
- 34 WOULD HAVE TO ASSESS COSTS FIRST
- 35 NOT SURE HOW TO ENROLL
- 37 HEALTH INSURANCE IS NEEDED
- 38 MEDICAID, CHIP IS BETTER COVERAGE FOR COST
- 40 EMPLOYER DOES NOT PROVIDE BENEFITS FOR SPOUSE, CHILDREN
- 41 NOT OFFERED, NOT AVAILABLE FOR MY POSITION
- 42 HEALTH INSURANCE FROM OTHER SOURCE IN GENERAL
- 95 OTHER
- 97 NO REASON, DO NOT NEED, DO NOT WANT
- 98 DK, REF

EMP13FR
(not included in data set)

Next, I am going to read some possible reasons why FILL NAME may not have coverage through his/her employer or labor union. For each let me know if this is a reason why FILL NAME did not enroll in his/her employer's health insurance plan.

ENTER <1> TO CONTINUE

EMP13F

Ask of those indicating yes to emp12. Also, includes those indicating 10 ineligible - hasn't worked long enough to EMP13

FILL NAME has not worked for his/her employer long enough to qualify for health insurance benefits.

PROMPT: Is this a reason why FILL NAME does not have health insurance coverage through his/her employer or labor union?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

EMP13G

Ask of those indicating yes to emp12. Also, includes those indicating 11 ineligible - not enough hours worked per week TO EMP13

FILL NAME works too few hours to qualify for health insurance benefits.

PROMPT: Is this a reason why FILL NAME does not have health insurance coverage through his/her employer or labor union?

- 1 YES
- 2 NO

- 8 DK
- 9 REF

EMP13H

Ask of those indicating yes to emp12. Also, includes those indicating 13 would have to pay too much or costs too much TO EMP13

The health insurance offered through FILL NAME's employer costs too much.

PROMPT: IS this a reason why FILL NAME does not have health insurance coverage through his/her employer or labor union?

1 YES

2 NO

8 DK

9 REF

EMP13i

Ask of those indicating yes to emp12. Also, includes those indicating 19 coverage offered is not acceptable, does not meet needs to EMP13

The health insurance offered through FILL NAME's employer does not meet FILL NAME's needs in terms of what type of health care is covered.

PROMPT: Is this a reason why FILL NAME does not have health insurance coverage through his/her employer or labor union?

1 YES

2 NO

8 DK

9 REF

EMP13F1

Ask of those indicating yes to emp13f or indicating 10 ineligible - hasn't worked long enough to EMP13

You indicated that FILL NAME has not worked for his/her employer long enough to qualify for health insurance benefits. How long must FILL NAME work for his/her employer to qualify for health insurance benefits?

ENTER NUMBER OF MONTHS 30 DAYS = 1 MONTH
IF LESS THAN ONE MONTH OR TO ENTER DAYS, PLEASE SELECT 0

- | | |
|------|--|
| 0 | LESS THAN ONE MONTH (OR TO ENTER DAYS) |
| 1-96 | ENTER NUMBER OF MONTHS |
| 97 | 97 OR MORE MONTHS |
| 98 | DK |
| 99 | REF |

Emp13f1a

**Ask of those answering 0 to EMP13F1_1
(labeled emp13f2 in data set)**

USE TO ENTER NUMBER OF DAYS:

- | | |
|------|----------------------|
| 1-96 | ENTER NUMBER OF DAYS |
| 97 | 97 OR MORE DAYS |
| 98 | DK |
| 99 | REF |

NEMP13F1

(computed variable) *This variable is computed from emp13f1 and emp13f2*

Categories: How long must work for their employer to qualify for health insurance benefits?

- 1 Less than 1 month
- 2 1 to 2 months
- 3 3 to 6 months
- 4 More than 6 months
- 8 DK
- 9 REF

EMP13I1 labeled emp13f3, emp13f4, emp13f5 in data set

Ask of those indicating yes to emp13i or indicating coverage offered is not acceptable, does not meet needs to EMP13

This is a multiple response variable.

You indicated that the health insurance offered through FILL NAMES's employer does not meet FILL NAME's needs in terms of what type of health care is covered. What is lacking from this health insurance plan?

INTS: PROBE FOR DETAILS, SELECT UP TO THREE RESPONSES

- 10 CATASTROPHIC COVERAGE ONLY
- 11 CO-PAYS, DEDUCTIBLES TOO HIGH
- 12 COST TOO MUCH FOR LIMITED RETURN
- 13 DOES NOT COVER CERTAIN ILLNESS
- 14 DOES NOT COVER CHILDREN, DEPENDENTS
- 15 DOES NOT COVER NECESSARY PROCEDURES
- 16 DOES NOT COVER SPOUSE, DOMESTIC PARTNER
- 17 FULL COVERAGE FOR HOSPITAL STAYS
- 18 HAVE OTHER COVERAGE
- 19 NO OR LIMITED DENTAL COVERAGE
- 20 NO OR LIMITED EYE COVERAGE
- 21 NO OR LIMITED PRESCRIPTION COVERAGE
- 22 WOULD NOT USE IT ENOUGH
- 23 DOES NOT COVER TESTS, OUTPATIENT SERVICES
- 24 LIMITED CHOICE OF DOCTORS
- 25 COVERAGE LIMITED, IN GENERAL
- 26 DID NOT LIKE PLAN IN GENERAL
- 95 OTHER
- 97 NOTHING, NOTHING IS MISSING
- 98 DK
- 99 REF

EMP15

Ask of those indicating YES EMP12

If FILL NAME had the option, how likely would FILL NAME be to enroll in his/her employer's health insurance plan?
(READ RESPONSES)

- 1 Definitely
- 2 Very likely,
- 3 Somewhat Likely,
- 4 Not Very Likely, or
- 5 Not at all likely?
- 6 NOT APPLICABLE
- 8 DK
- 9 REF

OEM15 1 to OEM15 3

**Ask if person is somewhat likely, not very or not at all likely to enroll to EMP15
This is a multiple response variable.**

Why is this?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH
- 11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK
- 12 INELIGIBLE - MEDICAL PROBLEMS
- 13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH
- 14 DOES NOT NEED HEALTH INSURANCE, DO NOT WANT
- 15 INSURANCE FROM OTHER SOURCE - MEDICARE, MILITARY, MEDICAID
- 16 COST - COVERED FOR LESS THROUGH THE STATE, MEDICAID
- 17 TEMPS, SEASONAL WORKERS NOT ELIGIBLE
- 18 TEMPORARILY NOT AT WORK - COVERAGE NOT IN EFFECT
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 PRIVATE INSURANCE SPOUSE, OTHER SOURCE - BETTER PLAN
- 22 PRIVATE INSURANCE FROM SPOUSE, OTHER SOURCE - LESS EXPENSIVE
- 23 INSURANCE THROUGH SPOUSE - BOTH WORK AT SAME COMPANY
- 24 EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE
- 25 SELF-EMPLOYED
- 26 ON DISABILITY
- 27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER
- 29 WAITING FOR COVERAGE, NOT SURE HOW TO ENROLL
- 30 LOST JOB, TEMPORARILY NOT AT WORK
- 31 CATASTROPHIC COVERAGE ONLY
- 32 QUIT JOB, RETIRING
- 33 HAS OTHER COVERAGE, COVERED BY SPOUSE
- 34 WOULD HAVE TO ASSESS COSTS FIRST
- 35 NOT SURE HOW TO ENROLL
- 37 HEALTH INSURANCE IS NEEDED
- 38 MEDICAID, CHIP IS BETTER COVERAGE FOR COST
- 40 EMPLOYER DOES NOT PROVIDE BENEFITS FOR SPOUSE, CHILDREN
- 41 NOT OFFERED, NOT AVAILABLE FOR MY POSITION
- 42 HEALTH INSURANCE FROM OTHER SOURCE IN GENERAL
- 95 OTHER
- 97 NO REASON, DO NOT NEED, DO NOT WANT
- 98 DK, REF

EMP15a

Ask of those indicating yes emp12 and indicating definitely, very likely or somewhat likely to emp15 and if person has a spouse

If FILL NAME had the option, how likely would FILL NAME be to enroll his/her SPOUSE in his/her employer's health insurance plan?
(READ RESPONSES AS NEEDED)

IF ONLY SOMEWHAT LIKELY, NOT VERY OR NOT AT ALL LIKELY ASK: Why is this?

- 1 Definitely
- 2 Very likely,
- 3 Somewhat Likely,
- 4 Not Very Likely, or)
- 5 Not at all likely?
- 6 NOT APPLICABLE
- 8 DK
- 9 REF

OEMP15a1 to OEM15a2

**Ask of those answering somewhat likely, not very likely, or not at all likely to emp15a
This is a multiple response variable.**

Why is this?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH
- 11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK
- 12 INELIGIBLE - MEDICAL PROBLEMS
- 13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH
- 14 DOES NOT NEED HEALTH INSURANCE, DO NOT WANT
- 15 INSURANCE FROM OTHER SOURCE - MEDICARE, MILITARY, MEDICAID
- 16 COST - COVERED FOR LESS THROUGH THE STATE, MEDICAID
- 17 TEMPS, SEASONAL WORKERS NOT ELIGIBLE
- 18 TEMPORARILY NOT AT WORK - COVERAGE NOT IN EFFECT
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 PRIVATE INSURANCE SPOUSE, OTHER SOURCE - BETTER PLAN
- 22 PRIVATE INSURANCE FROM SPOUSE, OTHER SOURCE - LESS EXPENSIVE
- 23 INSURANCE THROUGH SPOUSE - BOTH WORK AT SAME COMPANY
- 24 EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE
- 25 SELF-EMPLOYED
- 26 ON DISABILITY
- 27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER
- 29 WAITING FOR COVERAGE, NOT SURE HOW TO ENROLL
- 30 LOST JOB, TEMPORARILY NOT AT WORK
- 31 CATASTROPHIC COVERAGE ONLY
- 32 QUIT JOB, RETIRING
- 33 HAS OTHER COVERAGE, COVERED BY SPOUSE
- 34 WOULD HAVE TO ASSESS COSTS FIRST
- 35 NOT SURE HOW TO ENROLL
- 37 HEALTH INSURANCE IS NEEDED
- 38 MEDICAID, CHIP IS BETTER COVERAGE FOR COST
- 40 EMPLOYER DOES NOT PROVIDE BENEFITS FOR SPOUSE, CHILDREN
- 41 NOT OFFERED, NOT AVAILABLE FOR MY POSITION
- 42 HEALTH INSURANCE FROM OTHER SOURCE IN GENERAL
- 95 OTHER
- 97 NO REASON, DO NOT NEED, DO NOT WANT
- 98 DK, REF

EMP15b

Ask of those indicating yes emp12 and indicating definitely, very likely or somewhat likely to emp15 and if person has children

If FILL NAME had the option, how likely would FILL NAME be to enroll his/her CHILDREN dependents in his/her employer's health insurance plan?
(READ RESPONSES)

IF ONLY SOMEWHAT LIKELY, NOT VERY OR NOT AT ALL LIKELY ASK: Why is this?

- 1 Definitely
- 2 Very likely,
- 3 Somewhat Likely,
- 4 Not Very Likely, or
- 5 Not at all likely?
- 6 NOT APPLICABLE
- 8 DK
- 9 REF

OEMP15b1 to OEM15b3

Ask of those answering somewhat likely, not very likely, or not at all likely to emp15b

This is a multiple response variable.

Why is this?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH
- 11 INELIGIBLE - NOT ENOUGH HOURS WORKED PER WEEK
- 12 INELIGIBLE - MEDICAL PROBLEMS
- 13 COST - WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH
- 14 DOES NOT NEED HEALTH INSURANCE, DO NOT WANT
- 15 INSURANCE FROM OTHER SOURCE - MEDICARE, MILITARY, MEDICAID
- 16 COST - COVERED FOR LESS THROUGH THE STATE, MEDICAID
- 17 TEMPS, SEASONAL WORKERS NOT ELIGIBLE
- 18 TEMPORARILY NOT AT WORK - COVERAGE NOT IN EFFECT
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 PRIVATE INSURANCE SPOUSE, OTHER SOURCE - BETTER PLAN
- 22 PRIVATE INSURANCE FROM SPOUSE, OTHER SOURCE - LESS EXPENSIVE
- 23 INSURANCE THROUGH SPOUSE - BOTH WORK AT SAME COMPANY
- 24 EMPLOYER OFFERS INCENTIVE NOT TO TAKE HEALTH INSURANCE
- 25 SELF-EMPLOYED
- 26 ON DISABILITY
- 27 DOES HAVE HEALTH INSURANCE THROUGH EMPLOYER
- 29 WAITING FOR COVERAGE, NOT SURE HOW TO ENROLL
- 30 LOST JOB, TEMPORARILY NOT AT WORK
- 31 CATASTROPHIC COVERAGE ONLY
- 32 QUIT JOB, RETIRING
- 33 HAS OTHER COVERAGE, COVERED BY SPOUSE
- 34 WOULD HAVE TO ASSESS COSTS FIRST
- 35 NOT SURE HOW TO ENROLL
- 37 HEALTH INSURANCE IS NEEDED
- 38 MEDICAID, CHIP IS BETTER COVERAGE FOR COST
- 40 EMPLOYER DOES NOT PROVIDE BENEFITS FOR SPOUSE, CHILDREN
- 41 NOT OFFERED, NOT AVAILABLE FOR MY POSITION
- 42 HEALTH INSURANCE FROM OTHER SOURCE IN GENERAL
- 95 OTHER
- 97 NO REASON, DO NOT NEED, DO NOT WANT
- 98 DK, REF

EMP16 1 to EMP16 4

**Ask of those indicating who have private health insurance through an employer (insp06 = 1) but who has a spouse that is not covered under this private health insurance plan
This is a multiple response variable.**

You indicated that FILL NAME currently has private health insurance through his/her employer. Why is FILL NAME's spouse not covered under this health insurance plan?

INTS: ENTER ALL MENTIONED BY RESPONDENT

PROMPT: Were there any other reasons?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH TO COVER SPOUSE
- 11 INELIGIBLE - NOT ENOUGH HOURS PER WEEK TO COVER SPOUSE
- 12 INELIGIBLE - SPOUSE HAS MEDICAL PROBLEMS
- 13 WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH TO COVER SPOUSE
- 14 SPOUSE DOES NOT NEED HEALTH INSURANCE
- 15 SPOUSE COVERED THROUGH OTHER SOURCE - GOVERNMENT or MILITARY
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 SPOUSE HAS HEALTH INSURANCE THROUGH EMPLOYER, BOUGHT ON OWN
- 27 SPOUSE IS COVERED
- 29 WAITING FOR COVERAGE OR SIGN-UP DATE FOR SPOUSE
- 30 CHEAPER FOR SPOUSE TO HAVE OWN PLAN
- 31 STATE LAW DOES NOT ALLOW IF COVERAGE AVAILABLE THROUGH JOB
- 40 EMPLOYER INSURANCE DOES NOT PROVIDE BENEFITS FOR SPOUSE
- 88 NOT APPLICABLE - NO SPOUSE
- 95 OTHER
- 97 NO REASON
- 98 DK
- 99 REF

EMP16a1 to EMP16a3

**Ask of those indicating who have private health insurance through an employer (insp06 = 1) but who have children that is not covered under this private health insurance plan
This is a multiple response variable.**

(You indicated that FILL NAME currently has private health insurance through his/her employer)

Why are FILL NAME's children not covered under this health insurance plan?

INTS: ENTER ALL MENTIONED BY RESPONDENT

PROMPT: Were there any other reasons?

- 10 INELIGIBLE - HASN'T WORKED LONG ENOUGH TO COVER CHILD
- 11 INELIGIBLE - NOT ENOUGH HOURS PER WEEK TO COVER CHILD
- 12 INELIGIBLE - CHILD HAS MEDICAL PROBLEMS
- 13 WOULD HAVE TO PAY TOO MUCH OR COSTS TOO MUCH TO COVER CHILD
- 14 CHILD DOES NOT NEED HEALTH INSURANCE
- 15 CHILD COVERED THROUGH OTHER SOURCE - GOVERNMENT or MILITARY
- 19 COVERAGE OFFERED IS NOT ACCEPTABLE, DOES NOT MEET NEEDS
- 21 CHILD COVERED THROUGH ANOTHER PRIVATE HEALTH INSURANCE PLAN
- 27 CHILDREN ARE COVERED
- 29 WAITING FOR COVERAGE OR SIGN-UP DATE FOR CHILD
- 40 EMPLOYER INSURANCE DOES NOT PROVIDE BENEFITS FOR CHILDREN
- 42 CHILD TOO OLD
- 88 NOT APPLICABLE - NO CHILDREN, CHILD WITH OTHER PARENT
- 95 OTHER
- 97 NO REASON
- 98 DK
- 99 REF

XXI. Family Income

Questions will be asked for each identified family unit

Note: the family unit formation section will place all people into families

INC01

(not included in data set)

The next questions are about income that your FAMILY received during 2007.

PROMPT:

This information helps explain whether people can afford the health insurance and health care they need. Your information is strictly confidential and will be kept private.

INTS: IF THEY ASK WHY PEOPLE ARE CLASSIFIED AS SEPARATE FAMILIES:

The government considers the people included in a family unit based upon their age, marital status, whether they have children, and whether they are a full time student.

ENTER <1> TO CONTINUE

INC02

(not included in data set)

During the entire year of 2007, what was the total income for THIS FAMILY before taxes, including money from jobs, investments, social security, retirement income, child support, unemployment payments, public assistance, and so on?

PROBE FOR MILD RESISTANCE: Answers to questions on earnings are important because they help explain whether people can afford the health care they need. Also, the information you provide will be kept confidential and will only be used in summary reports.

PROBE FOR DK OR HESITATION: If you do not know exactly, your best estimate would be fine.

VERIFY IF <\$5,000 OR >\$500,000. CODE 999999 IF RESPONSE IS \$1 MILLION OR MORE.

0	NONE
10	\$10 OR LESS
11 TO \$999,998	ENTER DOLLAR AMOUNT
999,999	\$1 MILLION OR MORE
8	DK
9	REF

INC03

**Only ask those who don't know or refused the previous question
(not included in data set)**

It is important to understand incomes so we can better understand insurance coverage and concerns about insurance.

Which of the following income ranges is closest to your family's 2007 total income from all sources?

[INTERVIEWER: PROBE: Your best estimate would be fine]

- 10 Under \$5,000
- 11 \$5,000 to less than \$7,499
- 12 \$7,500 to less than \$9,999
- 13 \$10,000 to less than \$12,499
- 14 \$12,500 to less than \$14,999
- 15 \$15,000 to less than \$19,999
- 16 \$20,000 to less than \$24,999
- 17 \$25,000 to less than \$29,999
- 18 \$30,000 to less than \$34,999
- 19 \$35,000 to less than \$39,999
- 20 \$40,000 to less than \$49,999
- 21 \$50,000 to less than \$59,999
- 22 \$60,000 to less than \$74,999
- 23 \$75,000 or more

- 98 DK
- 99 REF

income

(computed variable) *This variable is computed from inc02 and inc03- includes imputed values*

Family Income

inccat

(computed variable) *This variable is computed from income*

Income Categories

- 1 Less than \$5,000
- 2 \$5,000 to \$7,499
- 3 \$7,500 to \$9,999
- 4 \$10,000 to \$12,499
- 5 \$12,500 to \$14,999
- 6 \$15,000 to \$19,999
- 7 \$20,000 to \$24,999
- 8 \$25,000 to \$29,999
- 9 \$30,000 to \$34,999
- 10 \$35,000 to \$39,999
- 11 \$40,000 to \$49,999
- 12 \$50,000 to \$59,999
- 13 \$60,000 to \$74,999
- 14 \$75,000 or more

INC04

**Only ask those who don't know or refused the previous question
(not included in data set)**

Is this family's income above FILL 235% FPL AMOUNT FOR FAMILY SIZE

- 1 YES
- 2 NO

- 8 DK
- 9 REF

**NOTE: AT THIS POINT IF ANYONE WAS SKIPPED IN THE ESI SECTION XIX WE
WILL ASK TO SPEAK WITH THEM AND ADMINISTER THE ESI QUESTIONS**

FPL

(computed variable) *This variable is computed from income, famsize, and 2008 federal poverty levels*

Family Income - Federal Poverty Level

fplcat1

(computed variable) *This variable is computed from FPL*

FPL Categories

- 1 Less than 100%
- 2 100% to 199%
- 3 200% to 299%
- 4 300% to 399%
- 5 400% or more

fplcat2

(computed variable) *This variable is computed from FPL*

FPL Categories

- 1 Less than 50%
- 2 50% to 99%
- 3 100% to 149%
- 4 150% to 199%
- 5 200% to 249%
- 6 250% to 299%
- 7 300% or more

Fplcat3

(computed variable) *This variable is computed from FPL*

FPL Categories

- 1 Less than 50%
- 2 50% to 99%
- 3 100% to 133%
- 4 134% to 185%
- 5 186% to 199%
- 6 200% to 235%
- 7 236% to 250%
- 8 251% to 299%
- 9 300% or more

Mcelig

(computed variable) *This variable is computed from FPL.*

Is uninsured person income eligible for Medicaid or PeachCare?

- 0 Person already insured
- 1 Income Eligible for Medicaid
- 2 Income Eligible for PeachCare
- 3 Uninsured, not eligible

XXII. Closing of the Survey

CLOSE0

**Ask if more than one family unit and household members excluded in UNITSCRN
(not included in data set)**

Thank you, those are all the questions I have for your family.
In order for me to complete this survey, I would like to identify
the person in the household who is familiar with the health of...

FILL NAMES OF THOSE EXCLUDED ABOVE

Who would be the person I should ask for?

- 10 PERSON 1
- 11 PERSON 2
- 12 PERSON 3
- 13 PERSON 4
- 14 PERSON 5
- 15 PERSON 6
- 16 PERSON 7
- 17 PERSON 8
- 18 PERSON DOES NOT LIVE IN THIS HH

- 98 DK
- 99 REF

CLOSE1

**Ask if more than one family unit and household members excluded in UNITSCRN
(not included in data set)**

I will call back and ask for this person at a later time.

INTS: IF THEY SAY THEY ARE AVAILABLE NOW SAY: It will take some time
for us to set up the program for this person, so I cannot complete
the interview now.

- 1 ENTER TO CONTINUE
- 2 PERSON IS AT A DIFFERENT TELEPHONE NUMBER

THNX
(not included in data set)

That is the conclusion of this interview for your family.

Thanks again and good-bye.

Designwt

Design Weight

finalwt

Final Weight

finalmwt

Final Medicaid Adjusted Weight

incflag

Flag for income imputations

0 Not Imputed

1 Imputed

iethnflag

Flag for ethnicity imputations

0 Not Imputed

1 Imputed

iracflag

Flag for race imputations

0 Not Imputed

1 Imputed

igendflag

Flag for gender imputations

0 Not Imputed

1 Imputed

Pricover

Private Health Insurance Coverage Indicator

0 No Private Health Insurance

1 Private Health Insurance through Person 1

2 Private Health Insurance through Person 2

3 Private Health Insurance through Person 3

4 Private Health Insurance through Person 4

5 Private Health Insurance through Person 5

6 Private Health Insurance through Person 6

7 Private Health Insurance through Person 7

8 Private Health Insurance through Person 8

9 Private Health Insurance through HH Member over 65