

Colorado SHADAC
Supplement A: Group Insured

FINAL

IF Q24=2 AND Q25=2, ASK:

You have explained to me that you have (TARGET has) switched insurance plans in the last twelve months --

A1A. Prior to becoming insured under (your/his or her) current plan, what type of insurance did you (TARGET) have? Was that --

- Medicare 1
- Medicaid 2
- CHP Plus, Children’s Basic Health Plan 3
- Some other form of public assistance 4
- Health insurance through their own work or union 5
- Health insurance through someone else’s work or union 6
- Health insurance bought directly from an insurance company by you or someone else 7
- Veterans’ Affairs (VA, CHAMPUS, anything military) 8
- Student health insurance 9
- OTHER (specify) 10
- UNSURE77
- REFUSED 99

IF RESPONDENT IS “STUDENT AWAY FROM HOME” OR “MINOR” ⇒ GO TO A10

IF Q13=1 OR Q22=9 AND Q12≠1 ⇒ GO TO A6
IF Q12=1 AND Q13=1 ⇒ GO TO CONDITIONAL BEFORE A6
ELSE GO TO A1

Now I’d like to ask you a few questions about your (TARGET’s) access to health insurance.

A1. Does your (TARGET’s) spouse or partner have insurance through their work or union?

- Yes (**GO TO A2**) 1
- No (**GO TO A3**) 2
- Spouse / partner does not work (**GO TO CONDITIONAL BEFORE A6**) 3
- Do not have spouse / partner (**GO TO CONDITIONAL BEFORE A6**) 4
- Other (SPECIFY) 5
- UNSURE (**DNR**) (**GO TO A3**) 77
- REFUSED (**DNR**) (**GO TO A3**) 99

A2. Could this insurance policy be extended to cover you (TARGET)?

- Yes (**GO TO A5**) 1
- No (**GO TO CONDITIONAL BEFORE A6**) 2
- UNSURE/DK (**DNR**) (**GO TO CONDITIONAL BEFORE A6**) 77
- REFUSED (**DNR**) (**GO TO CONDITIONAL BEFORE A6**) 99

A3. Is your (TARGET's) spouse or partner ELIGIBLE for health insurance through their work or union, but chosen not to sign up for it?

Yes (GO TO A4)	1
No (GO TO CONDITIONAL BEFORE A6).....	2
UNSURE/DK (DNR) (GO TO CONDITIONAL BEFORE A6).....	77
REFUSED (DNR) (GO TO CONDITIONAL BEFORE A6).....	99

A4. If that family member were to sign up for that health insurance, could the policy be extended to cover you (TARGET)?

Yes (GO TO A5).....	1
No (GO TO CONDITIONAL BEFORE A6).....	2
UNSURE (DNR)(GO TO CONDITIONAL BEFORE A6).....	77
REFUSED (DNR)(GO TO CONDITIONAL BEFORE A6).....	99

A5. What is the main reason you (TARGET) do not get insurance through that family member?
(PROBE: CAN YOU TELL ME THE PRIMARY REASON YOU DID NOT GET INSURANCE THROUGH THIS FAMILY MEMBER?)
(DO NOT READ RESPONSES, JUST RECORD)

Do not need or want health insurance.....	1
Rarely sick.....	2
Too much hassle / paperwork.....	3
Could not afford / too expensive.....	4
Plan through my own work is cheaper / benefits better.....	5
Expect to get own health insurance soon.....	6
Will be covered by family member's policy after waiting period.....	7
Benefit package didn't meet needs.....	8
Would be ineligible or rejected due to current health conditions.....	9
OTHER (specify).....	10
UNSURE.....	77
REFUSED.....	99

IF Q12=1, THEN READ: You have explained to me that you get (TARGET gets) insurance through your (their) own employer. **GO TO A7**

A6. Does the firm that you (TARGET) work for offer health insurance as a benefit to any of its employees?

Yes (GO TO A7).....	1
No (GO TO LONG DEMOGRAPHICS).....	2
Not employed, thus not applicable (GO TO LONG DEMOGRAPHICS).....	3
UNSURE (DNR) (GO TO LONG DEMOGRAPHICS).....	77
REFUSED (DNR) (GO TO LONG DEMOGRAPHICS).....	99

A7. Can your (TARGET's) employer coverage be extended to cover dependents?

Yes.....	1
No.....	2
Target does not have access to insurance through own employer (GO TO LONG DEMOGRAPHICS).....	3
UNSURE (DNR).....	77
REFUSED (DNR).....	99

A8. Does your (TARGET's) employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

IF Q12=1, THEN GO TO LONG DEMOGRAPHICS

A9. Why aren't you (TARGET) included in your employer's group health insurance plan? **(DO NOT READ)**

Do not need or want health insurance	1
Rarely sick	2
Too much hassle / paperwork	3
Could not afford / too expensive	4
Do not work enough hours in a week	5
Have not worked there long enough	6
Would be ineligible or rejected due to current health conditions	7
Benefit package did not meet needs.....	8
OTHER (specify)	9
UNSURE	77
REFUSED	99

(GO TO LONG DEMOGRAPHICS)

Now I would like to ask you a few questions about TARGET's access to insurance through a parent or guardian.

A10. Does the firm TARGET's parent or guardian works for offer health insurance as a benefit to any of its employees? (PROBE IF NECESSARY: If only one parent works, then answer for this parent's employer. If both parents work, then answer for the primary wage earner living in the household.)

Yes (GO TO A11)	1
No (GO TO LONG DEMOGRAPHICS)	2
Parent not employed, thus not applicable (GO TO LONG DEMOGRAPHICS)	3
UNSURE (DNR) (GO TO LONG DEMOGRAPHICS)	77
REFUSED (DNR) (GO TO LONG DEMOGRAPHICS)	99

A11. Does this employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

A12. Is TARGET covered under this plan?

Yes (GO TO LONG DEMOGRAPHICS)	1
No (GO TO A13)	2
UNSURE (DNR) (GO TO LONG DEMOGRAPHICS)	77
REFUSED (DNR) (GO TO LONG DEMOGRAPHICS)	99

A13. Can this coverage be extended to cover dependents?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

**SKIP: IF A13=1 AND (Q13≠1 OR Q22=9) ⇒ GO TO A14
ELSE GO TO LONG DEMOGRAPHICS**

A14. What is the main reason (TARGET) is not included in this employer's health insurance plan as a dependent? **(DO NOT READ)**

Child does not need health insurance.....	1
Rarely sick	2
Parent is not eligible to receive coverage.....	3
Child is covered through another adult's employer plan	4
Too much hassle / paperwork	5
Could not afford / too expensive	6
Benefit package didn't meet this child's needs	7
Expect this child will be covered by a health insurance policy shortly	8
Child is covered under a school plan.....	9
Child is covered by Medicaid.....	10
Child is covered by CHP+, Children's Basic Health Plan.....	11
Child is covered by HCP (Health Care Program for Children with Special Needs	12
Child can get free or low-cost care. (Specify)	13
OTHER (specify)	14
UNSURE	77
REFUSED	99

(GO TO LONG DEMOGRAPHICS)

Colorado SHADAC
Supplement B: Individual Insured

FINAL

B1. Is this an individual or family policy?

	Individual Policy	1
	Family Policy (covers more than one person)	2
	UNSURE/DK	77
	REFUSED	99

B2. How much do you (does TARGET) pay for your (TARGET's) health insurance premium?

	B2AA \$ _____ (twice a month)	
	B2A \$ _____ (monthly)	
	B2B \$ _____ (biweekly)	
	B2C \$ _____ (quarterly)	
B2D \$ _____ (semi-annually)		
	B2E \$ _____ (annually)	
	UNSURE/DK	0
	REFUSED	0

B3. Does your (TARGET's) health insurance include a deductible?

READ IF NECESSARY: 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.

	Yes (GO TO B4)	1
	No (GO TO B5)	2
	UNSURE (DNR) (GOTO B5)	77
	REFUSED (DNR) (GOTO B5)	99

B4. How much is that? (**READ:** DO NOT include premium expenses)

	\$ _____	
	UNSURE/DK	77777
	REFUSED	99999

B5. Do you (does Target) have insurance that pays for prescription drugs?

	Yes	1
	No	2
	UNSURE (DNR)	77
	REFUSED (DNR)	99

IF Q24=2 AND Q25=2, ASK:

You have explained to me that that you have (TARGET has) switched insurance plans in the last twelve months

--

B6. Prior to becoming insured under (your/his or her) current plan, what type of insurance did you (TARGET) have? Was that:

Medicare 1	
Medicaid 2	
CHP Plus, Children's Basic Health Plan	3
Some other form of public assistance	4
Health insurance through their own work or union.....	5
Health insurance through someone else's work or union.....	6
Health insurance bought directly from an insurance company by you or someone else.....	7
Veterans' Affairs (VA, CHAMPUS, anything military)	8
Student health insurance	9
OTHER (specify)	10
UNSURE ⁷⁷	
REFUSED	99

IF RESPONDENT IS "STUDENT AWAY FROM HOME" OR "MINOR" => GO TO B16

Now I'd like to ask you a few questions about your (TARGET's) access to health insurance.

B7. Does your (TARGET's) spouse or partner have insurance through their work or union?

Yes (GO TO B8)	1
No (GO TO B9).....	2
Spouse / partner does not work (GO TO B12)	3
Do not have spouse / partner (GO TO B12)	4
Other (SPECIFY)	5
UNSURE (DNR) (GO TO B9).....	77
REFUSED (DNR) (GO TO B9).....	99

B8. Could this insurance policy be extended to cover you (TARGET)?

Yes (GO TO B11)	1
No (GO TO B12).....	2
UNSURE/DK (DNR)(GO TO B12).....	77
REFUSED (DNR)(GO TO B12).....	99

B9. Is your (TARGET's) spouse or partner ELIGIBLE for health insurance through their work or union, but chosen not to sign up for it?

Yes (GO TO B10)	1
No (GO TO B12).....	2
UNSURE (DNR)(GO TO B12).....	77
REFUSED (DNR)(GO TO B12).....	99

B10.	If that family member were to sign up for that health insurance, could the policy be extended to cover you (TARGET)?	
	Yes (GO TO B11)	1
	No (GO TO B12).....	2
	UNSURE (DNR)(GO TO B12).....	77
	REFUSED (DNR)(GO TO B12).....	99
<hr/>		
B11.	What is the main reason you (TARGET) do not get insurance through that family member? (DO NOT READ)	
	Do not need or want health insurance	1
	Rarely sick	2
	Too much hassle / paperwork	3
	Could not afford / too expensive	4
	Plan through my own work is cheaper / benefits better.....	5
	Expect to get own health insurance soon.....	6
	Will be covered by family member's policy after waiting period	7
	Benefit package didn't meet needs	8
	Would be ineligible or rejected due to current health conditions	9
	OTHER (specify)	10
	UNSURE	77
	REFUSED	99
<hr/>		
B12.	Does the firm that you (TARGET) work for offer health insurance as a benefit to any of its employees?	
	Yes (GO TO B13)	1
	No (GO TO LONG DEMOGRAPHICS)	2
	Not employed, thus not applicable (GO TO LONG DEMOGRAPHICS)	3
	UNSURE (DNR) (GO TO LONG DEMOGRAPHICS)	77
	REFUSED (DNR) (GO TO LONG DEMOGRAPHICS)	99
<hr/>		
B13.	Can your (TARGET's) employer coverage be extended to cover dependents?	
	Yes	1
	No.....	2
	Target does not have access to insurance through own employer (GO TO LONG DEMOGRAPHICS).....	3
	UNSURE (DNR).....	77
	REFUSED (DNR).....	99
<hr/>		
B14.	Does your (TARGET's) employer contribute to health insurance costs for those employees covered by this benefit?	
	Yes	1
	No.....	2
	UNSURE (DNR).....	77
	REFUSED (DNR).....	99
<hr/>		

B15. Why aren't you (TARGET) included in your employer's group health insurance plan? **(DO NOT READ)**

Do not need or want health insurance	1
Rarely sick	2
Too much hassle / paperwork	3
Could not afford / too expensive	4
Do not work enough hours in a week	5
Have not worked there long enough	6
Would be ineligible or rejected due to current health conditions	7
Benefit package did not meet needs.....	8
OTHER (specify)	9
UNSURE	77
REFUSED	99

GO TO LONG DEMOGRAPHICS

Now I would like to ask you a few questions about TARGET's access to insurance through a parent or guardian.

B16. Does the firm TARGET's parent or guardian works for offer health insurance as a benefit to any of its employees? (PROBE IF NECESSARY: If only one parent works, then answer for this parent's employer. If both parents work, then answer for the primary wage earner living in the household.)

Yes (GO TO B17)	1
No (GO TO LONG DEMOGRAPHICS)	2
Parent not employed, thus not applicable (GO TO LONG DEMOGRAPHICS)	3
UNSURE (DNR) (GO TO LONG DEMOGRAPHICS)	77
REFUSED (DNR) (GO TO LONG DEMOGRAPHICS)	99

B17. Does this employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

B18. Is TARGET covered under this plan?

Yes (GO TO LONG DEMOGRAPHICS).....	1
No (GO TO B19).....	2
UNSURE (DNR) (GO TO LONG DEMOGRAPHICS)	77
REFUSED (DNR) (GO TO LONG DEMOGRAPHICSKIP)	99

B19. Can this coverage be extended to cover dependents?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

B20. What is the main reason (TARGET) is not included in this employer's health insurance plan as a dependent?
(DO NOT READ)

Child does not need health insurance.....	1
Rarely sick	2
Parent is not eligible to receive coverage.....	3
Child is covered through another adult's employer plan.....	4
Too much hassle / paperwork	5
Could not afford / too expensive.....	6
Benefit package didn't meet this child's needs	7
Expect this child will be covered by a health insurance policy shortly	8
Child is covered under a school plan.....	9
Child is covered by Medicaid.....	10
Child is covered by CHP+, Children's Basic Health Plan.....	11
Child is covered by HCP (Health Care Program for Children with Special Needs	12
Child can get free or low-cost care. (Specify)	13
OTHER (specify)	14
UNSURE	77
REFUSED	99

Colorado SHADAC
Supplement C: Uninsured Intermittently

FINAL

*** ASK QUESTIONS C1–C8 AMONG "INTERMITTENT – CURRENTLY DO NOT HAVE" ***

CATI SORT = 6

The next set of questions is about your (TARGET's) history of insurance coverage over the past 12 months.

C1. You have just explained to me that currently you are (TARGET is) NOT covered by health insurance but (were / was) covered at some point in the past 12 months. Is this correct?

Yes (GOTO C3)	1
No (GOTO C2).....	2
UNSURE (DNR) (GOTO C2).....	77
REFUSED (DNR) (GOTO C2).....	99

IF NO, UNSURE, or REFUSED IN C1, ASK:

C2. In your own words, please explain to me your current and past year insurance status and type of insurance.

(GO TO LONG DEMOGRAPHICS)

C3. What type of insurance were you (was TARGET) covered by most recently? Was it...
(NOTE: Naming an insurance company, like 'Blue Cross' or 'Medica,' is not sufficient)

Medicare 1	
Medicaid 2	
CHP Plus, Children's Basic Health Plan	3
Some other form of public assistance	4
Health insurance through their own work or union.....	5
Health insurance through someone else's work or union.....	6
Health insurance bought directly from an insurance company by you or someone else.....	7
Veterans' Affairs (VA, CHAMPUS, anything military)	8
Student health insurance	9
OTHER (specify)	10
UNSURE77	
REFUSED.....	99

C4. And what is the main reason your (TARGET's) coverage ended? **(DO NOT READ)**

Job that provided coverage ended	1
Employer stopped offering coverage, but still have job	2
Could no longer afford to buy health insurance.....	3
COBRA coverage ran out	4
No longer eligible under public insurance program	5
Never got around to reapplying for public insurance	6
Moved to state recently and haven't gotten new insurance	7
Left school, therefore no longer eligible for parents' policy	8
Decided no longer needed or wanted insurance	9
Other (specify).....	10
UNSURE (DNR).....	77
REFUSED (DNR).....	99

**IF TARGET AGE >=18 and <=25 => GO TO C5
ELSE GO TO C6**

C5. Was this insurance coverage through your (TARGET's) parents' or guardians' plan?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C6. Did you (TARGET) get this insurance coverage less than 12 months ago?

Yes	1
No (GO TO SKIP)	2
UNSURE (DNR) (GO TO SKIP)	77
REFUSED (DNR) (GO TO SKIP)	99

C7. What was the main reason you (TARGET) got this insurance coverage? **(DO NOT READ)**

Got a new job offering insurance	1
Family member got a new job with coverage.....	2
Became eligible for insurance through work	3
Became eligible for insurance through someone else's work	4
Became eligible for public insurance / not eligible before	5
Applied for public insurance / knew already eligible	6
Could afford to buy health insurance	7
Needed or wanted health insurance.....	8
Became sick.....	9
Other (specify).....	10
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C8. Was there another period of time within the past 12 months – before you (TARGET) had the coverage we just talked about – that you were not covered by insurance?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

(GO TO SKIP)

***** ASK QUESTIONS C9–C13 ONLY AMONG INTERMITTENT – CURRENTLY HAVE *****

CATI SORT = 5

The next set of questions is about your (TARGET’s) history of insurance coverage over the past 12 months.

C9. You have just explained to me that currently you are (TARGET is) covered by health insurance but (were / was) NOT covered at some point in the past 12 months. Is this correct?

Yes (GOTO C11)	1
No (GOTO C10)	2
UNSURE (DNR) (GOTO C10).....	77
REFUSED (DNR) (GOTO C10).....	99

IF NO, UNSURE, or REFUSED IN C9, ASK:

C10. In your own words, please explain to me your current and past year insurance status and type of insurance.

(GO TO LONG DEMOGRAPHICS)

C11. Was there another period of time within the past 12 months that you (TARGET) were not covered by insurance?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C12. Thinking back to the time you (TARGET) got this current form of insurance, what was the main reason you (TARGET) got coverage at this time? **(DO NOT READ)**

Got a new job offering insurance	1
Family member got a new job with coverage.....	2
Became eligible for insurance through work.....	3
Became eligible for insurance through someone else’s work	4
Became eligible for public insurance / not eligible before	5
Applied for public insurance / knew already eligible.....	6
Could afford to buy health insurance.....	7
Needed or wanted health insurance.....	8
Became sick.....	9
Other (specify).....	10
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C13. Before you (TARGET) got this current health insurance coverage, for how many months did you (TARGET) go with no insurance?

RECORD NUMBER OF MONTHS

(RECORD “UNSURE/DK” AS 777 - - - RECORD “REFUSED” AS 999)

(GO TO SKIP)

SKIP: IF RESPONDENT IS “STUDENT AWAY FROM HOME” OR “MINOR” ⇒ GO TO C24

If (Q13=1 OR Q22=9) and Q12≠1 ⇒ go to C20
If Q12=1 and Q13=1 ⇒ go to C21
Else go to C14

Now I’d like to ask you a few questions about your (TARGET’s) access to health insurance.

C14. Does your (TARGET’s) spouse or partner have insurance through their work or union?

Yes (GO TO C15)	1
No (GO TO C16)	2
Spouse / partner does not work (GO TO C20)	3
Do not have spouse / partner (GO TO C20)	4
Other (SPECIFY)	5
UNSURE (DNR) (GO TO C16)	77
REFUSED (DNR) (GO TO C16)	99

C15. Could this insurance policy be extended to cover you (TARGET)?

Yes (GO TO C18)	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

GO TO C20 IF ON/OWN (Q25=1) AND (Q14=1 OR Q15=1 OR Q22=10-11)
GO TO C19 IF OFF (Q23=1)
GO TO C21 IF ON/GROUP (Q12=1 OR Q13=1 OR Q16=1 OR Q17=1 OR Q18=1 OR
Q19=1 OR Q20=1 OR Q22=1-9 OR Q22=12-14) AND (Q25=1)
ELSE GO TO C20

C16. Is your (TARGET's) spouse or partner eligible for health insurance through their work or union, but chosen not sign up for it?

Yes (GO TO C17)	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

GO TO C20 IF ON/OWN (Q25=1) AND (Q14=1 OR Q15=1 OR Q22=10-11)
GO TO C19 IF OFF (Q23=1)
GO TO C20 IF ON/GROUP (Q12=1 OR Q13=1 OR Q16=1 OR Q17=1 OR Q18=1 OR
Q19=1 OR Q20=1 OR Q22=1-9 OR Q22=12-14) AND (Q25=1)
ELSE GO TO C20

C17. If that family member were to sign up for that health insurance, could the policy be extended to cover you (TARGET)?

Yes (GO TO C18)	1
No (GO TO C19)	2
UNSURE (DNR) (GO TO C19).....	77
REFUSED (DNR) (GO TO C19).....	99

C18. What is the main reason you (TARGET) do not get insurance through that family member? (**DO NOT READ**)

Do not need or want health insurance	1
Rarely sick	2
Too much hassle / paperwork	3
Could not afford / too expensive	4
Plan through my own work is cheaper / benefits better.....	5
Expect to get own health insurance soon.....	6
Will be covered by family member's policy after waiting period	7
Benefit package didn't meet needs	8
Would be ineligible or rejected due to current health conditions	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

IF CATI SORT=6 ⇒ GO TO C21

C19. What is the main reason you have (TARGET has) not bought health insurance on your (their) own? **(DO NOT READ)**

Do not need or want health insurance	1
Rarely sick	2
Do not know where to begin / where to go	3
Too much hassle / paperwork	4
Could not afford / too expensive	5
Expect to be covered by a health insurance policy shortly	6
Benefit package did not meet needs	7
Not eligible for reasons other than health	8
Would be ineligible or rejected due to current health conditions	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

IF Q12=1, THEN GO TO C21

C20. Does the firm that you (TARGET) work for offer health insurance as a benefit to any of its employees?

Yes (GO TO C21)	1
No	2
Not employed, thus not applicable	3
UNSURE (DNR)	77
REFUSED (DNR)	99

**GO TO LONG DEMOGRAPHICS IF “CURRENTLY HAVE” CATI SORT=5
GO TO C30 IF “CURRENTLY DO NOT HAVE” CATI SORT=6**

IF Q12=1, THEN READ:

You have explained to me that you get (TARGET gets) insurance through your (their) own employer.

C21. Can your (TARGET’s) employer coverage be extended to cover dependents?

Yes (GO TO C22)	1
No (GO TO C23)	2
Target does not have access to insurance through own employer	3
UNSURE (DNR) (GO TO C23)	77
REFUSED (DNR) (GO TO C23)	99

IF C21=3 AND “INTERMITTENT – CURRENTLY DO NOT HAVE” ⇒ GO TO C30

IF C21=3 AND “INTERMITTENT – CURRENTLY HAVE” ⇒ GO TO LONG DEMOGRAPHICS

C22. Does your (TARGET’s) employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No	2
UNSURE (DNR)	77
REFUSED (DNR)	99

IF Q12=1, THEN GO TO LONG DEMOGRAPHICS

C23. Why aren't you (TARGET) included in your employer's group health insurance plan? **(DO NOT READ)**

Do not need or want health insurance	1
Rarely sick	2
Too much hassle / paperwork	3
Could not afford / too expensive	4
Do not work enough hours in a week	5
Have not worked there long enough	6
Would be ineligible or rejected due to current health conditions	7
Benefit package did not meet needs.....	8
OTHER (specify)	9
UNSURE	77
REFUSED	99

IF "CURRENTLY HAVE" ⇒ GO TO LONG DEMOGRAPHICS
IF "CURRENTLY DO NOT HAVE" ⇒ GO TO C30

Now I would like to ask you a few questions about TARGET's access to insurance through a parent or guardian.

C24. Does the firm TARGET's parent or guardian works for offer health insurance as a benefit to any of its employees? (PROBE IF NECESSARY: If only one parent works, then answer for this parent's employer. If both parents work, then answer for the primary wage earner living in the household.)

Yes (GO TO C25)	1
No (GO TO SKIP)	2
Parent not employed, thus not applicable (GO TO SKIP)	3
UNSURE (DNR) (GO TO SKIP)	77
REFUSED (DNR) (GO TO SKIP)	99

C25. Does this employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C26. Is TARGET covered under this plan?

Yes (GO TO SKIP).....	1
No (GO TO C27)	2
UNSURE (DNR) (GO TO SKIP)	77
REFUSED (DNR) (GO TO SKIP)	99

C27. Can this coverage be extended to cover dependents?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

**SKIP: IF C27=1 AND (Q13≠1 AND Q22≠9) ⇒ GO TO C28
IF “INTERMITTENT-CURRENTLY DO NOT HAVE” AND C27≠1 ⇒ GO TO C29**

ELSE GO TO LONG DEMOGRAPHICS

C28. What is the main reason (TARGET) is not included in this employer’s health insurance plan as a dependent?
(DO NOT READ)

Child does not need health insurance.....	1
Rarely sick	2
Parent is not eligible to receive coverage.....	3
Child is covered through another adult’s employer plan.....	4
Too much hassle / paperwork	5
Could not afford / too expensive	6
Benefit package didn’t meet this child’s needs	7
Expect this child will be covered by a health insurance policy shortly	8
Child is covered under a school plan.....	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

**IF (Q14=1 OR Q15=1 OR Q16=1 OR Q17=1 OR Q18=1 OR Q19=1 OR Q20=1) OR
(Q22=1- 3, 5-7, 10, 11, 14) AND (Q24=2 AND Q25=1) -- GO TO LONG DEMOGRAPHICS**

C29. What is the main reason TARGET’s parents or guardian have not bought health insurance for TARGET on their own? **(DO NOT READ)**

Do not need or want health insurance.....	1
Rarely sick	2
Do not know where to begin / where to go.....	3
Too much hassle / paperwork	4
Could not afford / too expensive	5
Expect they will be covered by a health insurance policy shortly.....	6
Benefit package did not meet this child’s needs.....	7
Not eligible for reasons other than health	8
Would be ineligible or rejected due to current health conditions.....	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

GO TO C30

Now I am going to ask you about public insurance programs available through the State of Colorado for those who are uninsured.

C30. If low-cost health insurance were made available, would you (TARGET) be ABLE to pay anything at all to get health care coverage?

Yes (GO TO C31)	1
No (GOTO C32)	2
UNSURE (DNR) (GO TO C32)	77
REFUSED (DNR) (GO TO C32).....	99

C31. How much do think you (TARGET) would be WILLING to pay for health care coverage?

\$ _____ Monthly

\$ _____ Yearly

UNSURE 77

REFUSED 99

C32. If you (TARGET) learned you (they) were eligible for health coverage through a public program, would you (TARGET) enroll?

Yes 1

No..... 2

UNSURE (DNR)..... 77

REFUSED (DNR)..... 99

C33. If you (TARGET) learned you (they) were eligible for health coverage through a public program at no cost to you (TARGET) or your family, would you (TARGET) enroll?

Yes (GO TO C35) 1

No (GO TO C34) 2

UNSURE (DNR) (GO TO C35) 77

REFUSED (DNR) (GO TO C35) 99

C34. Please tell me – in your own words – why you (TARGET) would not enroll?

C35. Have you ever heard about Medicaid? (PROBE: Other names for Medicaid are Baby Care/Kids Care, Title 19)

Yes (GOTO C36) 1

No (GOTO SKIP) 2

UNSURE (DNR)(GOTO SKIP) 77

REFUSED (DNR)(GOTO SKIP)..... 99

C36. Since you (TARGET) has been without health coverage, have you (TARGET) applied to have medical care or services provided by Medicaid?

Yes (GOTO C37) 1

No (GOTO C40) 2

UNSURE (DNR)(GOTO C40)..... 77

REFUSED (DNR)(GOTO C40)..... 99

C37. Were you (was TARGET) accepted?	
Yes (GOTO C38)	1
No (GOTO C40)	2
UNSURE (DNR)(GOTO C40).....	77
REFUSED (DNR)(GOTO C40).....	99

C38. What was the month and year of your (TARGET's) most recent enrollment in Medicaid for health insurance coverage?	
C38-1. MONTH: _____	
C38-2. YEAR: _____	
UNSURE (DNR).....	77
REFUSED (DNR).....	99

C39. What change in situation happened so you (TARGET) no longer had health care coverage under Medicaid? (DO NOT READ LIST, CATAGORIZE RESPONSE)	
Made too much money.....	1
No longer eligible	2
Needed to re-qualify	3
Missed an appointment.....	4
Children covered by Medicaid or other plan	5
Didn't know Medicaid stopped.....	6
Have not completed paperwork / too much of a hassle to reapply.....	7
No longer on welfare of TANF.....	8
OTHER.....	9
NONE	10
UNSURE	77
REFUSED	99

C40. As far as you know, are you (is TARGET) eligible to have any medical care or services provided by Medicaid?	
Yes GO TO SKIP	1
No GO TO SKIP.....	2
UNSURE (DNR) GOTO SKIP	77
REFUSED (DNR) GOTO SKIP	99

SKIP: IF TARGET <=18 GOTO C41 ELSE GOTO LONG DEMOGRAPHICS

C41. Have you (has TARGET) ever heard about CHP+? PROBE: This program is also called: Children's Basic Health Plan, Children's Health Insurance Plan, CHIP, Child Health Plan, Child Health Plan Plus.	
Yes GOTO C42.....	1
No GO TO LONG DEMOGRAPHICS.....	2
UNSURE (DNR) GOTO LONG DEMOGRAPHICS	77
REFUSED (DNR) GOTO LONG DEMOGRAPHICS.....	99

C42. Since you (TARGET) has been without health coverage, have you (TARGET) applied to have medical care or services provided by CHP+?

Yes GOTO C43.....	1
No GOTO C46.....	2
UNSURE (DNR) GOTO C46.....	77
REFUSED (DNR) GOTO C46.....	99

C43. Were you (was TARGET) accepted?

Yes GOTO C44.....	1
No GOTO C46.....	2
UNSURE (DNR) GOTO C46.....	77
REFUSED (DNR) GOTO C46.....	99

C44. What was the month and year of your (TARGET's) most recent enrollment in CHP+ for health insurance coverage?

C44-1 MONTH: _____
C44-2 YEAR: _____

UNSURE (DNR).....	77
REFUSED (DNR).....	99

C45. What change in situation happened so you (TARGET) no longer had health care coverage under CHP+?

Made too much money.....	1
No longer eligible.....	2
Needed to re-qualify.....	3
Missed an appointment.....	4
Children covered by Medicaid or other plan.....	5
Children turned 19 years old.....	6
Have not completed paperwork / too much of a hassle to reapply.....	7
No longer on welfare of TANF.....	8
OTHER.....	9
NONE.....	10
UNSURE.....	77
REFUSED.....	99

C46. As far as you know, are you (is TARGET) eligible to have any medical care or services provided by CHP+?

Yes.....	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

(GO TO LONG DEMOGRAPHICS)

Colorado SHADAC
Supplement D: Uninsured All Year

FINAL

IF TARGET AGE =18-25 ⇒ GO TO D1
ELSE ⇒ GO TO SKIP

D1. Have you (has TARGET) ever been covered by health insurance?

Yes (GO TO D2)	1
No (GO TO D4).....	2
UNSURE (DNR) (GO TO D4).....	77
REFUSED (DNR) (GO TO D4).....	99

D2. Prior to becoming uninsured, what type of insurance did you (TARGET) have? Was it...

Medicare 1	
Medicaid 2	
CHP Plus, Children’s Basic Health Plan	3
Some other form of public assistance	4
Health insurance through their own work or union	5
Health insurance through someone else’s work or union.....	6
Health insurance bought directly from an insurance company by you or someone else.....	7
Veterans’ Affairs (VA, CHAMPUS, anything military)	8
Student health insurance	9
OTHER (specify)	10
UNSURE77	
REFUSED.....	99

D3. Was this insurance coverage through your (TARGET’s) parents’ or guardians’ plan?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

SKIP:

IF RESPONDENT IS “STUDENT AWAY FROM HOME” OR “MINOR” ⇒ GO TO D14
ELSE GO TO D4

Now I’d like to ask you a few questions about your (TARGET’s) access to health insurance.

D4. Does your (TARGET’s) spouse or partner have insurance through their work or union?

Yes (GO TO D5)	1
No (GO TO D6).....	2
Spouse / partner does not work (GO TO D9)	3
Do not have spouse / partner (GO TO D9)	4
Other (SPECIFY)	5
UNSURE (DNR) (GO TO D6).....	77
REFUSED (DNR) (GO TO D6).....	99

D5.	Could this insurance policy be extended to cover you (TARGET)?	
	Yes (GO TO D8)	1
	No (GO TO D9)	2
	UNSURE (DNR) (GO TO D9)	77
	REFUSED (DNR) (GO TO D9)	99

D6.	Is your (TARGET's) spouse or partner <u>ELIGIBLE</u> for health insurance through their work or union, but chosen not sign up for it?	
	Yes (GO TO D7)	1
	No (GO TO D9)	2
	UNSURE (DNR) (GO TO D9)	77
	REFUSED (DNR) (GO TO D9)	99

D7.	If that family member were to sign up for that health insurance, could the policy be extended to cover you (TARGET)?	
	Yes (GO TO D8)	1
	No (GO TO D9)	2
	UNSURE (DNR)(GO TO D9)	77
	REFUSED (DNR)(GO TO D9)	99

IF "YES" IN D7, ASK:

D8.	What is the main reason you (TARGET) do not get insurance through that family member? (DO NOT READ)	
	Do not need or want health insurance	1
	Rarely sick	2
	Too much hassle / paperwork	3
	Could not afford / too expensive	4
	Plan through my own work is cheaper / benefits better.....	5
	Expect to get own health insurance soon	6
	Will be covered by family member's policy after waiting period	7
	Benefit package didn't meet needs	8
	Would be ineligible or rejected due to <u>health conditions</u>	9
	OTHER (specify)	10
	UNSURE	77
	REFUSED	99

D9.	What is the main reason you have (TARGET has) not bought health insurance on your (their) own? (DO NOT READ)	
	Do not need or want health insurance	1
	Rarely sick	2
	Do not know where to begin / where to go.....	3
	Too much hassle / paperwork	4
	Could not afford / too expensive	5
	Expect to be covered by a health insurance policy shortly.....	6
	Benefit package did not meet needs.....	7
	Not eligible for reasons other than health	8
	Would be ineligible or rejected due to <u>health conditions</u>	9
	OTHER (specify)	10
	UNSURE	77
	REFUSED	99

D10. Does the firm that you (TARGET) work for offer health insurance as a benefit to any of its employees?

Yes (GO TO D11)	1
No (GO TO D20)	2
Not employed, thus not applicable (GO TO D20).....	3
UNSURE (DNR) (GO TO D20).....	77
REFUSED (DNR) (GO TO D20).....	99

D11. Can your (TARGET's) employer coverage be extended to cover dependents?

Yes	1
No.....	2
Target does not have access to insurance through own employer (GO TO D20).....	3
UNSURE (DNR).....	77
REFUSED (DNR).....	99

D12. Does your (TARGET's) employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

D13. Why aren't you (TARGET) included in your employer's group health insurance plan? (DO NOT READ)

Do not need or want health insurance	1
Rarely sick	2
Too much hassle / paperwork	3
Could not afford / too expensive	4
Do not work enough hours in a week	5
Have not worked there long enough	6
Would be ineligible or rejected due to current health conditions	7
Benefit package did not meet needs.....	8
OTHER (specify)	9
UNSURE	77
REFUSED	99

(GO TO D20)

Now I would like to ask you a few questions about TARGET's access to insurance through a parent or guardian.

D14. Does the firm TARGET's parent or guardian works for offer health insurance as a benefit to any of its employees? (PROBE IF NECESSARY: If only one parent works, then answer for this parent's employer. If both parents work, then answer for the primary wage earner living in the household.)

Yes (GO TO D15)	1
No (GO TO D19)	2
Parent not employed, thus not applicable (GO TO D19)	3
UNSURE (DNR) (GO TO D19).....	77
REFUSED (DNR) (GO TO D19).....	99

D15. Does this employer contribute to health insurance costs for those employees covered by this benefit?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

D16. Is TARGET covered by this employer health insurance plan?

Yes (GO TO LONG DEMOGRAPHICS).....	1
No (GO TO D17)	2
UNSURE (DNR) (GO TO D19).....	77
REFUSED (DNR) (GO TO D19).....	99

D17. Can this coverage be extended to cover dependents?

Yes (GO TO D18)	1
No (GO TO D19)	2
UNSURE (DNR) (GO TO D19).....	77
REFUSED (DNR) (GO TO D19).....	99

D18. What is the main reason (TARGET) is not included in this employer’s health insurance plan as a dependent?
(DO NOT READ)

Child does not need health insurance.....	1
Rarely sick	2
Parent is not eligible to receive coverage.....	3
Child is covered through another adult’s employer plan	4
Too much hassle / paperwork	5
Could not afford / too expensive	6
Benefit package didn’t meet this child’s needs	7
Expect this child will be covered by a health insurance policy shortly	8
Child is covered under a school plan	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

D19. What is the main reason TARGET’s parents or guardian have not bought health insurance for TARGET on their own? (DO NOT READ)

Do not need or want health insurance	1
Rarely sick	2
Do not know where to begin / where to go.....	3
Too much hassle / paperwork	4
Could not afford / too expensive	5
Expect they will be covered by a health insurance policy shortly.....	6
Benefit package did not meet this child’s needs.....	7
Not eligible for reasons other than health	8
Would be ineligible or rejected due to current health conditions	9
OTHER (specify)	10
UNSURE	77
REFUSED	99

(GO TO D20)

D20. If low-cost health insurance were made available, would you (TARGET) be ABLE to pay anything at all to get health care coverage?

Yes GO TO D21	1
No GOTO D22	2
UNSURE (DNR) GOTO D22	77
REFUSED (DNR) GOTO D22	99

D21. How much do think you (TARGET) would be WILLING to pay for health care coverage?

_____ \$ Monthly
 _____ \$ Yearly

Unsure 77
 Refused 99

D22. If you (TARGET) learned you (they) were eligible for health coverage through a public program, would you (TARGET) enroll?

Yes.....	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR).....	99

D23. If you (TARGET) learned you (they) were eligible for health coverage through a public program at no cost to you (TARGET) or your family, would you (TARGET) enroll?

Yes (GO TO D25).....	1
No (GO TO D24).....	2
UNSURE (DNR) (GO TO D25).....	77
REFUSED (DNR) (GO TO D25).....	99

D24. Please tell me – in your own words – why you (TARGET) would not enroll?

D25. Have you ever heard about Medicaid? PROBE: Other names for Medicaid are Baby Care/Kids Care, Title 19

Yes GOTO D26	1
No GOTO SKIP	2
UNSURE (DNR) GOTO SKIP	77
REFUSED (DNR) GOTO SKIP	99

D26. Since you (TARGET) has been without health coverage, have you (TARGET) applied to have medical care or services provided by Medicaid?

Yes GO TO D27	1
No GO TO D30	2
UNSURE (DNR) GO TO D30	77
REFUSED (DNR) GO TO D30	99

D 27. Were you (was TARGET) accepted?

Yes GO TO D28	1
No GO TO D30	2
UNSURE (DNR) GO TO D30	77
REFUSED (DNR) GO TO D30	99

D28. What was the month and year of your (TARGET's) most recent enrollment in Medicaid for health insurance coverage?

D28-1 MONTH: _____

D28-2 YEAR: _____

Unsure 77

Refused 99

D29. What change in situation happened so you (TARGET) no longer had health care coverage under Medicaid?

Made too much money.....	1
No longer eligible.....	2
Needed to re-qualify.....	3
Missed an appointment.....	4
Children are covered by Medicaid or other plan.....	5
Didn't know Medicaid stopped.....	6
Have not completed paperwork / too much of a hassle to reapply.....	7
No longer on welfare / TANF.....	8
OTHER (specify).....	9
NONE.....	10
UNSURE.....	77
REFUSED.....	99

D30. **As far as you know, are you (is TARGET) eligible to have any medical care or services provided by Medicaid?**

Yes GOTO SKIP	1
No GOTO SKIP	2
UNSURE (DNR) GOTO SKIP	77
REFUSED (DNR) GOTO SKIP	99

SKIP: IF TARGET <=18 GOTO D 31, ELSE GO TO LONG DEMOGRAPHICS

D31. **Have you (has TARGET) ever heard about CHP+? PROBE: This program is also called: Children’s Basic Health Plan, Children’s Health Insurance Plan, CHIP, Child Health Plan, Child Health Plan Plus.**

Yes GOTO D32	1
No GOTO LONG DEMOGRAPHICS	2
UNSURE (DNR) GO TO LONG DEMOGRAPHICS	77
REFUSED (DNR) GO TO LONG DEMOGRAPHICS	99

D32. **Since you (TARGET) has been without health coverage, have you (TARGET) applied to have medical care or services provided by CHP+?**

Yes GO TO D33	1
No GO TO D36	2
UNSURE (DNR) GO TO D36	77
REFUSED (DNR) GO TO D36	99

D33. **Were you (was TARGET) accepted?**

Yes GO TO D34	1
No GO TO D36	2
UNSURE (DNR) GO TO D36	77
REFUSED (DNR) GOTO D36	99

D34. What was the month and year of your (TARGET’s) most recent enrollment in CHP+ for health insurance coverage?

D34-1. MONTH: _____

D34-2. YEAR: _____

Unsure 77

Refused 99

D35. What change in situation happened so you (TARGET) no longer had health care coverage under CHP+?

Made too much money	1
No longer eligible	2
Needed to re-qualify	3
Missed an appointment.....	4
Children are covered by Medicaid or other plan	5
Children turned 19 years old	6
Have not completed paperwork / too much of a hassle to reapply.....	7
No longer on welfare / TANF	8
OTHER (specify)	9
NONE	10
UNSURE	77
REFUSED	99

D36. As far as you know, are you (is TARGET) eligible to have any medical care or services provided by CHP+?

Yes	1
No.....	2
UNSURE (DNR).....	77
REFUSED (DNR)	99

GO TO LONG DEMOGRAPHICS

Colorado SHADAC
Demographic Questions – SHORT VERSION

FINAL

BEGIN THIS SECTION AFTER TARGET SCREENER QUESTIONNAIRE

The following questions are about you (TARGET) --

Z1. Do you (does TARGET) currently have insurance that pays for dental care?

Yes	1
No.....	2
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z2. Would you say your (TARGET's) health – in general – is excellent, very good, good, fair, or poor?

Excellent	1
Very good	2
Good	3
Fair.....	4
Poor.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z25. Are you (Is TARGET) Mexican, Puerto Rican, Cuban, or another Hispanic or Latino group?

No.....	1
Yes / Mexican, Mexican-American, Chicano.....	2
Yes / Puerto Rican.....	3
Yes / Cuban	4
Yes / other Spanish, Hispanic, Latino.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z26. Now choose one or more races for yourself (Target). What race or races do you consider yourself (TARGET) to be? **(READ AS PROBE. LIST IF NECESSARY. DO NOT RECORD MORE THAN THREE.)**
(PROMPT IF HISPANIC/LATINO: In addition to being Hispanic, what race.....)

White.....	1
Black / African-American	2
Asian Indian.....	3
Chinese	4
American Indian or Alaska Native.....	5
Korean.....	6
Vietnamese	7
Filipino.....	8
Japanese	9
Other Pacific Islander	10
Other race (specify)	11
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

IF TARGET < 18 YEARS, GO TO Z37

Z27. Are you (Is TARGET) currently...

Single	1
Married	2
Living with a partner	3
Divorced	4
Separated.....	5
Widowed.....	6
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z28. What is the highest level of education you have (TARGET has) completed? **[DO NOT READ, JUST RECORD]**

No formal education.....	1
Grade school (1 to 8 years).....	2
Some high school (9 to 11 years)	3
High school graduate or GED (received a high school equivalency diploma)	4
Some college/technical or vocational school/training after high school	5
College graduate.....	6
Post graduate degree/study	7
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z29. Are you (is TARGET) currently... **(READ LIST)**
(PROBE: ANSWER FOR THE JOB YOU WORK AT THE MOST HOURS)

Self-employed or owner of a business (GO TO Z30).....	1
Employed by someone (GO TO Z30)	2
An unpaid worker for family business, farm, or home (GO TO Z52)	3
Retired (GO TO Z52).....	4
Unemployed or not working (GO TO Z52).....	5
A full-time student (GO TO Z52)	6
UNSURE/DK (DNR) (GO TO Z52).....	77
REFUSED (DNR) (GO TO Z52).....	99

Z30. Do you (does TARGET) have more than one paying job?

Yes (GO TO Z32)	1
No (GO TO Z31)	2
UNSURE/DK (DNR) (GO TO Z32)	77
REFUSED (DNR) (GO TO Z32)	99

Z31. And, what is the total number of hours that TARGET typically works per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

(GO TO Z33)

Z32. For the job you work (TARGET works) at the most hours, what is the total number of hours typically worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

***** ASK OF EVERYONE *****

Z33. Is this a permanent, temporary, or seasonal job?

Permanent	1
Temporary	2
Seasonal	3
UNSURE (DNR)	77
REFUSED (DNR)	99

Z34. Thinking about the employer you work (target works) for, about how many people are employed there? If you work (target works) for a firm that has multiple locations in your city or across states, please indicate the number of people at ALL locations?

Just one	1
Between 2 and 10	2
Between 11 and 50	3
Between 51 and 100	4
Between 101 and 500	5
More than 500	6
UNSURE (DNR)	77
REFUSED (DNR)	99

(GO TO Z52)

SKIP:

IF TARGET IS 18 YEARS OF AGE OR OLDER, GOTO Z52

ELSE ...

IF TARGET <18 AND CURRENTLY INSURED, PROMPT:

Now I'd like to ask a few questions about the person this child gets their insurance benefits through.

IF TARGET <18 AND IS UNINSURED OR PUBLICLY INSURED, PROMPT:

Now I would like to ask a few questions about the primary wage earner in the household. If there is no primary wage earner, we'd like to ask questions about the person responsible for the care of this child.

Z37. Would that be you or someone else?

Person on phone	1
Someone else.....	2

Z38. What is (your / their) age?

RECORD NUMBER OF AGE

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

Z39. And is this person male or female?

Male	1
Female.....	2

Z40. Is this person (Are you) Mexican, Puerto Rican, Cuban, or another Hispanic or Latino group?

No.....	1
Yes / Mexican, Mexican-American, Chicano.....	2
Yes / Puerto Rican	3
Yes / Cuban	4
Yes / other Spanish, Hispanic, Latino.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z41. Now choose one or more races for this person (yourself). Which race or races do you consider this person (yourself) to be? (READ AS PROBE, LIST IF NECESSARY, DO NOT RECORD MORE THAN THREE)

(PROMPT IF HISPANIC/LATINO: In addition the being Hispanic, what race.....)

White.....	1
Black / African-American	2
Asian Indian.....	3
Chinese	4
American Indian or Alaska Native.....	5
Korean.....	6
Vietnamese	7
Filipino.....	8
Japanese	9
Other Pacific Islander.....	10
Other race (specify).....	11
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z42.	Is this person (are you) currently...	
	Single	1
	Married	2
	Living with a partner	3
	Divorced	4
	Separated.....	5
	Widowed.....	6
	UNSURE/DK (DNR).....	77
	REFUSED (DNR).....	99

Z43.	What is the highest level of education (you have / this person has) completed? [DO NOT READ, JUST RECORD]	
	No formal education.....	1
	Grade school (1 to 8 years).....	2
	Some high school (9 to 11 years)	3
	High school graduate or GED (received a high school equivalency diploma)	4
	Some college/technical or vocational school/training after high school	5
	College graduate.....	6
	Post graduate degree/study	7
	UNSURE (DNR).....	77
	REFUSED (DNR).....	99

Z44.	Is this person (are you) currently...	
	Self-employed or owner of a business (GO TO Z45).....	1
	Employed by someone (GO TO Z45)	2
	An unpaid worker for family business, farm, or home (GO TO Z52)	3
	Retired (GO TO Z52).....	4
	Unemployed or not working (GO TO Z52).....	5
	A full-time student (GO TO Z52)	6
	UNSURE (DNR) (GO TO Z52).....	77
	REFUSED (DNR) (GO TO Z52).....	99

Z45.	Does this person (do you) have more than one paying job?	
	Yes (GO TO Z47)	1
	No (GO TO Z46).....	2
	UNSURE (DNR) (GO TO Z47).....	77
	REFUSED (DNR) (GO TO Z46).....	99

Z46. And, what is the total number of hours usually worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

(GO TO Z48)

Z47. For the job they (you) work at the most hours, what is the total number of hours usually worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

***** ASK OF EVERYONE *****

Z48. Is this a permanent, temporary, or seasonal job?

Permanent.....	1
Temporary	2
Seasonal	3
UNSURE (DNR).....	77
REFUSED (DNR).....	99

Z49. Thinking about the employer this person works (you work) for, about how many people are employed there? If the firm that this person works (you work) for has multiple locations in your city or across states, please indicate the number of people at ALL locations?

Just one.....	1
Between 2 and 10	2
Between 11 and 50	3
Between 51 and 100	4
Between 101 and 500	5
More than 500	6
UNSURE (DNR).....	77
REFUSED (DNR).....	99

Z52. Besides this phone number, do you have other telephone numbers in your household, such as fax or data lines, a children's or business line? Do not include cell phones.

Yes (GO TO Z53)	1
No (GO TO Z54).....	2
This phone number is not the respondent's (GO TO Z54)	3
UNSURE (DNR) (GO TO Z54).....	77
REFUSED (DNR) (GO TO Z54).....	99

Z53. How many of these telephone numbers are connected to phones that can be answered by a person?

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

Z54. During the past 12 months, has your household ever been without telephone service for more than 24 hours?

Yes (GO TO Z55)	1
No (GO TO Z56).....	2
UNSURE (DNR) (GO TO Z56).....	77
REFUSED (DNR) (GO TO Z56).....	99

Z55. During the past year, what was the total number of days, weeks, or months your household was without telephone service?

Z55-1. _____ days (0-31)

Z55-2. _____ weeks (0-4)

Z55-3. _____ months (0-12)

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

***** ASK OF EVERYONE *****

For statistical purposes only, I am going to ask you some questions about your or your family's income. This income information is important because it helps the state understand how to make health care more affordable.

Z56. How many people live on you or your family's income who CURRENTLY LIVE in this household? Do not include any children for which a family member currently pays child support, or any children away attending college or boarding school.

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

IF Z56=1 THEN GO TO Z58

Z57. How many of these people are children under 21 years of age?

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

Z58. What was your household's gross, pretax income from all sources for the year 2000? This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments, and other money income received by members of this family who are 15 years of age or older. If you are self-employed or own your own business, please report your net income.

\$ _____ , _____

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 7777777 - - - RECORD "REFUSED" AS 9999999)

IF Z58 ANSWERED, THEN GO TO Z69.

IF “UNSURE/DK” OR “REFUSED” IN Z58, ASK:

Z59. I am going to read you a list of income categories. Which category represents your family’s income for the year 2000? (**READ LIST, DO NOT ROTATE**)

Less than \$5,000.....	1
\$5,000 to \$7,499.....	2
\$7,500 to \$9,999.....	3
\$10,000 to \$12,499.....	4
\$12,500 to \$14,999.....	5
\$15,000 to \$19,999.....	6
\$20,000 to \$24,999.....	7
\$25,000 to \$29,999.....	8
\$30,000 to \$34,999.....	9
\$35,000 to \$39,999.....	10
\$40,000 to \$49,999.....	11
\$50,000 to \$59,999.....	12
\$60,000 to \$74,999.....	13
\$75,000 or more	14
UNSURE/DK (DNR)	77
REFUSED (DNR)	99

Z69. And, finally, we might like to call you back in a year to ask additional questions about your family’s health care. May I record your name and phone number so that we could call you back?

Yes (GO TO Z70-1).....	1
No (GO TO Z71)	2
UNSURE (GO TO Z71)	77
REFUSED (GO TO Z71)	99

Z70-1. What is your name, so that I may record it?

(RECORD NAME)

And –

Z70-2. Just for complete accuracy, what is the telephone number that I should record, including area code?

_____ - _____ - _____

(RECORD TELEPHONE NUMBER)

END OF SURVEY – THANK YOU FOR YOUR CONTRIBUTION TO THIS IMPORTANT RESEARCH.

Colorado SHADAC
Demographic Questions – LONG VERSION

FINAL

BEGIN THIS SECTION AFTER SUPPLEMENT QUESTIONNAIRES

The following questions are about you (TARGET) --

Z1. Do you (does TARGET) currently have insurance that pays for dental care?

Yes	1
No.....	2
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z2. Would you say your (TARGET's) health – in general – is excellent, very good, good, fair, or poor?

Excellent	1
Very good	2
Good	3
Fair	4
Poor.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z3. Has a doctor or other medical provider ever diagnosed you (TARGET) with any medical condition or disability that currently limits you (TARGET) in everyday activities or in the kind of work you (TARGET) can do?

Yes	1
No	2
UNSURE/DK.....	77
REFUSED	99

Z4. Is there a regular place that you (TARGET) go for medical care?

Yes GO TO Z5	1
No GO TO Z10	2
UNSURE/DK GO TO Z10	77
REFUSED GO TO Z10	99

Z5. Where do you (TARGET) usually go for medical care? Is that an –

Emergency room or urgent care center (Z7)	1
Clinic (Z6).....	2
Doctor's office (Z7)	3
Other (Z7)	4
UNSURE/DK (Z7)	77
REFUSED (Z7).....	99

Z6.	Is this clinic a –	Public health clinic	1
		Community health center	2
		Hospital outpatient clinic	3
		Private clinic	4
		School-based health center.....	5
		Family planning clinic	6
		OTHER.....	7
		UNSURE/DK.....	77
		REFUSED.....	99

Z7.	Is there a particular health care professional or traditional healer you (TARGET) usually see(s) when you (TARGET) go(es) there?	Yes	1
		No	2
		UNSURE/DK.....	77
		REFUSED.....	99

Z8.	During the past twelve months, did you (TARGET) not get, or postpone, getting medical care or surgery when you needed it? INFORM: This does not include dental care. (IF DENTAL CARE OFFERED, ASK: Other than dental care ... (REPEAT QUESTION)	Yes (Z9)	1
		No (Z11).....	2
		UNSURE/DK (Z11)	77
		REFUSED (Z11).....	99

Z9.	Was lack of insurance coverage or money a reason why you (TARGET) did not get the medical care or surgery you needed?	Yes	1
		No	2
		UNSURE/DK.....	77
		REFUSED.....	99

GO TO Z11

IF VALUES 2,77,99 IN Z4, ASK:

Z10.	What is the main reason you (TARGET) DO NOT have a regular place that you go for health care? (DO NOT READ VALUES, JUST RECORD)	Cannot afford it	1
		Do not have health insurance.....	2
		Rarely get sick.....	3
		Clinic hours don't fit my schedule.....	4
		Transportation difficulties.....	5
		Language barrier	6
		Do not like/trust/believe doctors.....	7
		Clinic I used to go to has closed	8
		Just moved, do not have regular place yet.....	9
		Just switched insurance, do not have regular place yet.....	10
		Have 2 or more places, depending on what's wrong.....	11
		OTHER.....	12
		NONE.....	13
		UNSURE/DK.....	77
		REFUSED.....	99

(GO TO Z8)

**** ASK OF EVERYONE ****

Z11. During the past 12 months, did you (DID TARGET) have a medical bill that you (TARGET) couldn't pay?

Yes.....	1
No	2
UNSURE/DK.....	77
REFUSED	99

IF TARGET, ASK:

Z12-1. Please tell me if you would agree or disagree with the following statement –

“I am confident that I can get the care I need when I need it.”

IF CHOICE MADE, ASK:

Agree/strongly.....	1
Agree/somewhat.....	2
UNSURE (DNR).....	77
Disagree/somewhat	3
Disagree/strongly	4
REFUSED	99

IF PROXY, ASK:

Z12-2. Please tell me if you would agree or disagree with the following statement –

“I am confident that (TARGET) can get the care she/he needs when she/he needs it.”

IF CHOICE MADE, ASK:

Agree/strongly.....	1
Agree/somewhat.....	2
UNSURE (DNR).....	77
Disagree/somewhat	3
Disagree/strongly	4
REFUSED	99

**** ASK OF EVERYONE ****

Z13. During the past 12 months , have you (TARGET) been a patient overnight in a hospital?

Yes (Z14)	1
No (Z16).....	2
UNSURE/DK (Z16)	77
REFUSED (Z16).....	99

Z14. How many times have you (TARGET) been admitted to a hospital DURING THE PAST TWELVE MONTHS?

ZERO/NONE (GO TO Z16)	0
UNSURE/DK (GO TO Z15)	77
REFUSED (GO TO Z15)	99

(TO Z15)

Z15. When you (TARGET) were a patient overnight in a hospital, to the best of your knowledge, were these hospital stays usually paid for by: you (TARGET) out of pocket, by your (TARGET's) insurance, by the hospital, or in some other manner?

Paid for by self (TARGET).....	1
Paid for by insurance.....	2
Paid for by hospital	3
Paid for in other manner.....	4
UNSURE/DK.....	77
REFUSED.....	99

**** ASK OF EVERYONE ****

Z16. During the past twelve months, have you (TARGET) been to a hospital emergency room?

Yes (Z17)	1
No (Z19).....	2
UNSURE/DK (Z19)	77
REFUSED (Z19).....	99

Z17. In the past twelve months, how many times have you (TARGET) received care in a hospital emergency room?

ZERO/NONE (GO TO Z19)	0
UNSURE/DK (GO TO Z18).....	77
REFUSED (GO TO Z18)	99

(TO Z18)

Z18. When you (TARGET) made hospital emergency room visits, to the best of your knowledge, were these visits usually paid for by: you (TARGET) out of pocket, by your (TARGET's) insurance, by the emergency room, or in some other manner?

Paid for by self (TARGET).....	1
Paid for by insurance.....	2
Paid for by emergency room.....	3
Paid for in other manner.....	4
UNSURE/DK.....	77
REFUSED.....	99

**** ASK OF EVERYONE ****

Z19. In the past **six months**, how many visits did you (TARGET) make to a doctor's office, outpatient clinic, or any other place for medical care? Do NOT include overnight hospital stays or emergency room visits?

UNSURE/DK.....	77
REFUSED.....	99

Z20. In the past **three months**, how many visits did you (TARGET) make to a doctor's office, outpatient clinic, or any other place for medical care? Do NOT include overnight hospital stays or emergency room visits?

UNSURE/DK.....	77
REFUSED.....	99

(IF Z19=0 and Z20=0 GO TO Z22)

Z21. When you (TARGET) made these doctor's/clinic visits, to the best of your knowledge, were they usually paid for by: you or your family out of pocket, by your (TARGET's) insurance, by the doctor or clinic, or in some other manner?

Paid for by self (TARGET).....	1
Paid for by insurance.....	2
Paid for by doctor/clinic.....	3
Paid for in other manner.....	4
UNSURE/DK.....	77
REFUSED.....	99

Z22. In the past 12 months were you (TARGET) prescribed medication by a doctor?

Yes (Z23)	1
No (Z25).....	2
UNSURE/DK (Z25)	77
REFUSED (Z25).....	99

Z23. Did you (TARGET) fill all, most, some, or none of these prescriptions?

All (Z24).....	1
Most (Z24)	2
Some (Z24)	3
None (Z25).....	4
UNSURE (Z25)	77
REFUSED (Z25).....	99

Z24. When you (TARGET) filled prescriptions, to the best of your knowledge, were these prescriptions usually paid for by: you (TARGET) out of pocket, by your (TARGET's) insurance, by the pharmacy or clinic, or in some other manner?

Paid for by self (TARGET).....	1
Paid for by insurance.....	2
Paid for by pharmacy/clinic	3
Paid for in other manner.....	4
UNSURE/DK.....	77
REFUSED.....	99

We are almost done with the survey. We have just a few questions left –

Z25. Are you (Is TARGET) Mexican, Puerto Rican, Cuban, or another Hispanic or Latino group?

No.....	1
Yes / Mexican, Mexican-American, Chicano.....	2
Yes / Puerto Rican	3
Yes / Cuban	4
Yes / other Spanish, Hispanic, Latino.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z26. Now choose one or more races for yourself (Target). What race or races do you consider yourself (TARGET) to be? **(READ AS PROBE. LIST IF NECESSARY. DO NOT RECORD MORE THAN THREE.)**
 (PROMPT IF HISPANIC/LATINO: In addition the being Hispanic, what race.....)

White.....	1
Black / African-American	2
Asian Indian.....	3
Chinese	4
American Indian or Alaska Native.....	5
Korean.....	6
Vietnamese	7
Filipino.....	8
Japanese	9
Other Pacific Islander.....	10
Other race (specify)	11
UNSURE/DK (DNR)	77
REFUSED (DNR)	99

IF TARGET < 18 YEARS, GO TO Z37

Z27. Are you (Is TARGET) currently...

Single	1
Married	2
Living with a partner	3
Divorced	4
Separated.....	5
Widowed.....	6
UNSURE/DK (DNR)	77
REFUSED (DNR)	99

Z28. What is the highest level of education you have (TARGET has) completed? **[DO NOT READ, JUST RECORD]**

No formal education.....	1
Grade school (1 to 8 years).....	2
Some high school (9 to 11 years)	3
High school graduate or GED (received a high school equivalency diploma)	4
Some college/technical or vocational school/training after high school	5
College graduate.....	6
Post graduate degree/study	7
UNSURE/DK (DNR)	77
REFUSED (DNR)	99

Z29. Are you (is TARGET) currently... **(READ LIST)**

(PROBE: ANSWER FOR THE JOB YOU WORK AT THE MOST HOURS)

Self-employed or owner of a business (GO TO Z30)	1
Employed by someone (GO TO Z30)	2
An unpaid worker for family business, farm, or home (GO TO Z52)	3
Retired (GO TO Z52)	4
Unemployed or not working (GO TO Z52)	5
A full-time student (GO TO Z52)	6
UNSURE/DK (DNR) (GO TO Z52)	77
REFUSED (DNR) (GO TO Z52)	99

Z30. Do you (does TARGET) have more than one paying job?

Yes (GO TO Z32)	1
No (GO TO Z31)	2
UNSURE/DK (DNR) (GO TO Z32)	77
REFUSED (DNR) (GO TO Z32)	99

Z31. And, what is the total number of hours that TARGET typically works per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

(GO TO Z33)

Z32. For the job you work (TARGET works) at the most hours, what is the total number of hours typically worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

***** ASK OF EVERYONE *****

Z33. Is this a permanent, temporary, or seasonal job?

Permanent	1
Temporary	2
Seasonal	3
UNSURE (DNR)	77
REFUSED (DNR)	99

Z34. Thinking about the employer you work (target works) for, about how many people are employed there? If you work (target works) for a firm that has multiple locations in your city or across states, please indicate the number of people at ALL locations?

Just one	1
Between 2 and 10	2
Between 11 and 50	3
Between 51 and 100	4
Between 101 and 500	5
More than 500	6
UNSURE (DNR)	77
REFUSED (DNR)	99

Please answer the following questions about your (TARGET's) main job OR the one through which you are eligible for health insurance –

Z35. What kind of industry is this? **(READ LIST)**

Agricultural (farms, orchards, greenhouses, nurseries)	1
Forestry or fishing (timber, tree farms, fish hatcheries)	2
Mining.....	3
Construction (general contractor, heavy construction, repair of structures, plumbing, heating).....	4
Manufacturing (food, apparel, publishing, logging, furniture, paper, soap, chemicals, glass, metal).....	5
Transportation, Communications, Electric, Gas or Sanitary (post office, telephone, highways)	6
Wholesale trade (items sold to manufacturers or retailers).....	7
Retail trade (items sold for personal or household use).....	8
Finance, insurance, or real estate (realtors, stockbrokers)	9
Service (restaurants, schools, lawyers, doctors, health-related, barbers) (TO Z36)	10
Public Administration (government worker, federal, state, local).....	11
Military.....	12
OTHER (DNR)	13
UNSURE (DNR)	77
REFUSED (DNR)	99

IF VALUE 10 IN Z35, ASK: (ELSE Z52)

Z36. Please specify the area of services **(READ LIST)**

Hotels, rooming houses, camps, other lodging places	1
Personal services (laundry, beauty, funeral).....	2
Business services (advertising, credit reports, commercial art, data processing)	3
Automotive repair services and parking	4
Miscellaneous repair services.....	5
Motion pictures	6
Amusement and recreation services (restaurant/bar)	7
Health services	8
Legal services.....	9
Educational services	10
Social services	11
Museums, art galleries, botanical and zoological gardens.....	12
Membership organizations	13
Engineering, accounting, research, management and related services.....	14
Private households (cleaning services).....	15
OTHER (DNR)	16
UNSURE (DNR)	77
REFUSED (DNR)	99

(GO TO Z52)

SKIP:

IF TARGET IS 18 YEARS OF AGE OR OLDER, GOTO Z52

ELSE ...

IF TARGET <18 AND CURRENTLY INSURED, PROMPT:

Now I'd like to ask a few questions about the person this child gets their insurance benefits through.

IF TARGET <18 AND IS UNINSURED OR PUBLICLY INSURED, PROMPT:

Now I would like to ask a few questions about the primary wage earner in the household. If there is no primary wage earner, we'd like to ask questions about the person responsible for the care of this child.

Z37. Would that be you or someone else?

Person on phone	1
Someone else.....	2

Z38. What is (your / their) age?

RECORD NUMBER OF AGE

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

Z39. And is this person male or female?

Male	1
Female.....	2

Z40. Is this person (Are you) Mexican, Puerto Rican, Cuban, or another Hispanic or Latino group?

No.....	1
Yes / Mexican, Mexican-American, Chicano.....	2
Yes / Puerto Rican	3
Yes / Cuban	4
Yes / other Spanish, Hispanic, Latino.....	5
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z41. Now choose one or more races for this person (yourself). Which race or races do you consider this person (yourself) to be? (READ AS PROBE, LIST IF NECESSARY, DO NOT RECORD MORE THAN THREE)

(PROMPT IF HISPANIC/LATINO: In addition the being Hispanic, what race.....)

White.....	1
Black / African-American	2
Asian Indian.....	3
Chinese	4
American Indian or Alaska Native.....	5
Korean.....	6
Vietnamese	7
Filipino.....	8
Japanese	9
Other Pacific Islander.....	10
Other race (specify).....	11
UNSURE/DK (DNR).....	77
REFUSED (DNR).....	99

Z42.	Is this person (are you) currently...	
	Single	1
	Married	2
	Living with a partner	3
	Divorced	4
	Separated.....	5
	Widowed.....	6
	UNSURE/DK (DNR).....	77
	REFUSED (DNR).....	99

Z43.	What is the highest level of education (you have / this person has) completed? [DO NOT READ, JUST RECORD]	
	No formal education.....	1
	Grade school (1 to 8 years).....	2
	Some high school (9 to 11 years)	3
	High school graduate or GED (received a high school equivalency diploma)	4
	Some college/technical or vocational school/training after high school	5
	College graduate.....	6
	Post graduate degree/study	7
	UNSURE (DNR).....	77
	REFUSED (DNR).....	99

Z44.	Is this person (are you) currently...	
	Self-employed or owner of a business (GO TO Z45).....	1
	Employed by someone (GO TO Z45)	2
	An unpaid worker for family business, farm, or home (GO TO Z52)	3
	Retired (GO TO Z52).....	4
	Unemployed or not working (GO TO Z52).....	5
	A full-time student (GO TO Z52)	6
	UNSURE (DNR) (GO TO Z52).....	77
	REFUSED (DNR) (GO TO Z52).....	99

Z45.	Does this person (do you) have more than one paying job?	
	Yes (GO TO Z47)	1
	No (GO TO Z46).....	2
	UNSURE (DNR) (GO TO Z47).....	77
	REFUSED (DNR) (GO TO Z46).....	99

Z46. And, what is the total number of hours usually worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

(GO TO Z48)

Z47. For the job they (you) work at the most hours, what is the total number of hours usually worked per week?

RECORD NUMBER OF HOURS

(RECORD "UNSURE/DK" AS 777 - - - RECORD "REFUSED" AS 999)

***** ASK OF EVERYONE *****

Z48. Is this a permanent, temporary, or seasonal job?

Permanent.....	1
Temporary	2
Seasonal	3
UNSURE (DNR).....	77
REFUSED (DNR).....	99

Z49. Thinking about the employer this person works (you work) for, about how many people are employed there? If the firm that this person works (you work) for has multiple locations in your city or across states, please indicate the number of people at ALL locations?

Just one.....	1
Between 2 and 10	2
Between 11 and 50	3
Between 51 and 100	4
Between 101 and 500	5
More than 500	6
UNSURE (DNR).....	77
REFUSED (DNR).....	99

Z50. What kind of industry is this? **(READ LIST)**

Agricultural (farms, orchards, greenhouses, nurseries)	1
Forestry or fishing (timber, tree farms, fish hatcheries)	2
Mining.....	3
Construction (general contractor, heavy construction, repair of structures, plumbing, heating).....	4
Manufacturing (food, apparel, publishing, logging, furniture, paper, soap, chemicals, glass, metal).....	5
Transportation, Communications, Electric, Gas or Sanitary (post office, telephone, highways)	6
Wholesale trade (items sold to manufacturers or retailers).....	7
Retail trade (items sold for personal or household use).....	8
Finance, insurance, or real estate (realtors, stockbrokers)	9
Service (restaurants, schools, lawyers, doctors, health-related, barbers) (TO Z51)	10
Public Administration (government worker, federal, state, local)	11
Military.....	12
OTHER (DNR)	13
UNSURE (DNR).....	77
REFUSED (DNR).....	99

IF VALUE 10 IN Z50, ASK:

Z51. Please specify the area of services (**READ LIST**)

Hotels, rooming houses, camps, other lodging places	1
Personal services (laundry, beauty, funeral).....	2
Business services (advertising, credit reports, commercial art, data processing)	3
Automotive repair services and parking	4
Miscellaneous repair services.....	5
Motion pictures	6
Amusement and recreation services (restaurant/bar).....	7
Health services	8
Legal services.....	9
Educational services.....	10
Social services.....	11
Museums, art galleries, botanical and zoological gardens.....	12
Membership organizations	13
Engineering, accounting, research, management and related services.....	14
Private households (cleaning services).....	15
OTHER (DNR).....	16
UNSURE (DNR).....	77
REFUSED (DNR).....	99

**** ASK OF EVERYONE ****

Z52. Besides this phone number, do you have other telephone numbers in your household, such as fax or data lines, a children's or business line? Do not include cell phones.

Yes (GO TO Z53)	1
No (GO TO Z54).....	2
This phone number is not the respondent's (GO TO Z54)	3
UNSURE (DNR) (GO TO Z54).....	77
REFUSED (DNR) (GO TO Z54).....	99

Z53. How many of these telephone numbers are connected to phones that can be answered by a person?

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

Z54. During the past 12 months, has your household ever been without telephone service for more than 24 hours?

Yes (GO TO Z55)	1
No (GO TO Z56).....	2
UNSURE (DNR) (GO TO Z56).....	77
REFUSED (DNR) (GO TO Z56).....	99

Z55. During the past year, what was the total number of days, weeks, or months your household was without telephone service?

Z55-1. _____ days (0-31)

Z55-2. _____ weeks (0-4)

Z55-3. _____ months (0-12)

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

***** ASK OF EVERYONE *****

For statistical purposes only, I am going to ask you some questions about your or your family's income. This income information is important because it helps the state understand how to make health care more affordable.

Z56. How many people live on your or your family's income who CURRENTLY LIVE in this household? Do not include any children for which a family member currently pays child support, or any children away attending college or boarding school.

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

IF Z56=1 THEN GO TO Z58

Z57. How many of these people are children under 21 years of age?

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 77 - - - RECORD "REFUSED" AS 99)

Z58. What was your household's gross, pretax income from all sources for the year 2000? This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments, and other money income received by members of this family who are 15 years of age or older. If you are self-employed or own your own business, please report your net income.

\$ _____ , _____

RECORD EXACT NUMBER

(RECORD "UNSURE/DK" AS 7777777 - - - RECORD "REFUSED" AS 9999999)

IF Z58 ANSWERED, THEN GO TO Z69.

IF “UNSURE/DK” OR “REFUSED” IN Z58, ASK:

Z59. I am going to read you a list of income categories. Which category represents your family’s income for the year 2000? (**READ LIST, DO NOT ROTATE**)

Less than \$5,000.....	1
\$5,000 to \$7,499.....	2
\$7,500 to \$9,999.....	3
\$10,000 to \$12,499.....	4
\$12,500 to \$14,999.....	5
\$15,000 to \$19,999.....	6
\$20,000 to \$24,999.....	7
\$25,000 to \$29,999.....	8
\$30,000 to \$34,999.....	9
\$35,000 to \$39,999.....	10
\$40,000 to \$49,999.....	11
\$50,000 to \$59,999.....	12
\$60,000 to \$74,999.....	13
\$75,000 or more	14
UNSURE/DK (DNR)	77
REFUSED (DNR)	99

IF “UNSURE/DK” OR “REFUSED” IN Z59, ASK:

Do you (Does TARGET or TARGET’s family) currently receive any of the following –

Z60. Earned Income Tax Credit (EITC)

Yes.....	1
No	2
UNSURE.....	77
REFUSED.....	99

Z61. Free or reduced school lunches

Yes.....	1
No	2
UNSURE.....	77
REFUSED.....	99

Z62. Section 8 Housing (HUD, housing assistance, housing voucher)

Yes.....	1
No	2
UNSURE.....	77
REFUSED.....	99

Z63. Women, Infants & Children, or WIC

Yes.....	1
No	2
UNSURE.....	77
REFUSED.....	99

Z64. Head Start

Yes.....	1
No	2
UNSURE.....	77
REFUSED.....	99

Z65. SSI or supplemental security income, SSDI, or RSDI

	Yes	1
	No	2
	UNSURE	77
	REFUSED	99

Z66. AFDC, TANF, or “welfare”

	Yes	1
	No	2
	UNSURE	77
	REFUSED	99

Z67. Low income energy assistance

	Yes	1
	No	2
	UNSURE	77
	REFUSED	99

Z68. Food stamps

	Yes	1
	No	2
	UNSURE	77
	REFUSED	99

**** ASK OF EVERYONE ****

Z69. And, finally, we might like to call you back in a year to ask additional questions about your family’s health care. May I record your name and phone number so that we could call you back?

	Yes (GO TO Z70-1)	1
	No (GO TO Z71)	2
	UNSURE (GO TO Z71)	77
	REFUSED (GO TO Z71)	99

Z70-1. What is your name, so that I may record it?

(RECORD NAME)

And –

Z70-2. Just for complete accuracy, what is the telephone number that I should record, including area code?

____ - ____ - _____

(RECORD TELEPHONE NUMBER)

END OF SURVEY – THANK YOU FOR YOUR CONTRIBUTION TO THIS IMPORTANT RESEARCH.