

Private Health Insurance Detail (HP) Section

| THROUGHOUT THE SPECIFICATIONS FOR THIS CAPI |
| SECTION, FOR SCREENS THAT SPECIFY THE REFERENCE |
| PERIOD {END DATE} AS PART OF THE CONTEXT HEADER, |
| CAPI DISPLAYS THE {END DATE} ONLY FOR ROUND 5. IN |
| ANY OTHER ROUND, CAPI DOES NOT DISPLAY THE {END |
| DATE} IN THE CONTEXT HEADER. FOR MOST PERSONS, |
| THE END DATE FOR ROUND 5 WILL BE DECEMBER 31 OF |
THE SECOND YEAR OF THE PANEL.

| NOTE THAT 'HEALTH INSURANCE PURCHASING ALLIANCE' |
| (CODE '4' AT HX03 AND CODE '2' AT HX23) WAS |
| OMITTED IN PANEL 12 ROUND 2 AND WILL BE OMITTED IN |
ALL FUTURE ROUNDS.

| NOTE THAT ESTABLISHMENT ADDRESS INFORMATION AND |
| THE INFORMED CONSENT SCREENS WERE OMITTED STARTING |
| IN PANEL 12 ROUND 3. THIS INFORMATION WAS |
| IN PANEL 12 ROUNDS 1 AND 2. |
| |
| STARTING IN PANEL 13 THESE ITEMS WILL BE OMITTED |
IN ALL ROUNDS.

BOX_00

=====

| CONTEXT HEADER DISPLAY INSTRUCTIONS: |
| DISPLAY PERS.FULLNAME, ESTB.ESTBNAME, |
| PRND.BEGREFMM, PRND.BEGREFDD, PRND.BEGREFYY, |
| PRND.ENDREFMM, PRND.ENDREFDD, PRND.ENDREFYY, |
| 'INSURANCE SOURCE'. |
| |
| FOR 'INSURANCE SOURCE', DISPLAY THE CATEGORY TEXT |
| FROM HX23. IF HX23=91, DISPLAY THE OTHER SPECIFY |
TEXT.

BOX_01
=====

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| IF LOOPING ON ANY ESTABLISHMENT FLAGGED IN THE |  
| EMPLOYMENT (EM) SECTION AS 'PROVIDES HEALTH |  
| INSURANCE' AND NOT FLAGGED AS 'SELF-EMPLOYED' |  
| WITH A FIRM-SIZE-1, GO TO LOOP_01 |  
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-----  
| IF LOOPING ON AN HX03 CATEGORY OR IF LOOPING ON |  
| AN HX23 CATEGORY (EXCEPT CODE '3' (DIRECTLY FROM |  
| A SCHOOL)), GO TO HP03 |  
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-----  
| IF LOOPING ON CODE '3' (DIRECTLY FROM A SCHOOL) |  
| AT HX23, CONTINUE WITH HP01 |  
-----
```

HP01
=====

Does the insurance from the school cover only injuries caused
by accidents, or does it have general health coverage?

GENERAL HEALTH COVERAGE	1	{HP02}
ONLY INJURIES CAUSED BY ACCIDENTS	2	{BOX_11}
REF	-7	{HP02}
DK	-8	{HP02}

HELP AVAILABLE FOR DEFINITION OF GENERAL HEALTH COVERAGE.

[Code One]

HP02
=====

Would the insurance from the school cover health services
outside of a school clinic?

YES 1 {HP03}
NO 2 {BOX_11}
REF -7 {HP03}
DK -8 {HP03}

HP03
=====

I'd like to talk about the insurance which is from {CATEGORY
NAME FROM HX03 OR HX23}, that is, the health insurance {through
a self-employed business/someone in the family purchased or
obtained directly from that source.}

SELECT 'CONTINUE' UNLESS RESPONDENT VOLUNTEERS INSURANCE
REPORTED IN ERROR.

CONTINUE 1 {LOOP_01}
INSURANCE REPORTED IN ERROR 2 {BOX_11}

[Code One]

| DISPLAY 'through a self-employed business' IF |
| LOOPING ON AN HX03 CATEGORY. DISPLAY 'someone in |
| the family purchased or obtained directly from |
that source.' IF LOOPING ON AN HX23 CATEGORY.

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-----  
| DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03 |  
| OR HX23': |  
| |  
| - 'a professional association' IF CODED '1' AT |  
| HX03 |  
| - 'a small business group' IF CODED '2' AT HX03 |  
| - 'a union' IF CODED '3' AT HX03 |  
| - 'an insurance agent' IF CODED '5' AT HX03 |  
| - 'an insurance company' IF CODED '6' AT HX03 |  
| - 'an HMO' IF CODED '7' AT HX03 |  
| - 'a previous employer' IF CODED '8' AT HX03 |  
| - 'a previous employer (COBRA)' IF CODED '9' AT |  
| HX03 |  
| - 'a high risk pool {(e.g., {STATE NAME FOR HIGH |  
| RISK POOL})}' IF CODED '10' AT HX03 |  
| - 'the {HX03OV OTHER SPECIFY TEXT}' IF CODED '91' |  
| AT HX03 |  
| - 'source purchased for that business' IF CODED |  
| '-7' OR '-8' AT HX03 |  
| |  
| - 'a group or association' IF CODED '1' AT HX23 |  
| - 'a school' IF CODED '3' AT HX23 |  
| - 'an insurance agent' IF CODED '4' AT HX23 |  
| - 'an insurance company' IF CODED '5' AT HX23 |  
| - 'an HMO' IF CODED '6' AT HX23 |  
| - 'a union' IF CODED '7' AT HX23 |  
| - 'a previous employer (COBRA)' IF CODED '8' AT |  
| HX23 |  
| - 'a previous employer (not COBRA)' IF CODED '9' |  
| AT HX23 |  
| - 'a spouse's (or deceased spouse's) previous |  
| employer' IF CODED '10' AT HX23 |  
| - 'some other employer' IF CODED '11' AT HX23 |  
| - 'the plan of someone not living here' IF CODED |  
| '12' AT HX23 |  
| - 'a high risk pool {(e.g., {STATE NAME FOR HIGH |  
| RISK POOL})}' IF CODED '13' AT HX23 |  
| - 'the {HX23OV OTHER SPECIFY TEXT}' IF CODED '91' |  
| AT HX23 |  
| - 'a source that provided directly purchased |  
| insurance' IF CODED '-7' OR '-8' |  
| |  
|-----
```

| DISPLAY `(e.g., {STATE NAME FOR HIGH RISK POOL})` |
| IF STATE IN WHICH INTERVIEW IS BEING CONDUCTED |
| OFFERS A HIGH RISK POOL HEALTH INSURANCE PLAN. |
| THIS INCLUDES ALL STATES EXCEPT: AZ, DE, DC, GA, |
| HI, ME, MA, MI, NV, NJ, NY, OH, PA, RI, VT, VA. |
| IF INTERVIEW STATE IS ONE OF THESE STATES, USE A |
| NULL DISPLAY. |
|
| FOR `STATE NAME FOR HIGH RISK POOL` DISPLAY THE |
| HIGH RISK POOL PLAN NAME ASSOCIATED WITH THE STATE |
IN WHICH INTERVIEW IS BEING CONDUCTED.

| IF CODED '2' (INSURANCE REPORTED IN ERROR), FLAG |
ITEM FOR SOURCE CLEAN-UP.

LOOP_01

=====

| FOR EACH OF THE FOLLOWING: |
|
| ESTABLISHMENT 1 |
| ESTABLISHMENT 2 |
| ESTABLISHMENT 3 |
| ESTABLISHMENT 4 |
|
ASK BOX_01A-END_LP01

| LOOP DEFINITION: LOOP-01 COLLECTS DETAILED |
| INFORMATION ABOUT INSURANCE PROVIDED THROUGH AN |
| EMPLOYER OR THE ESTABLISHMENT NAMES OF THE |
| INSURANCE SOURCE COLLECTED IN EITHER HX03 OR HX23. |
| IF LOOPING ON INSURANCE PROVIDED FROM AN EMPLOYER |
| ONLY ONE LOOP CYCLE IS COMPLETED. |
|
| IF LOOPING ON INSURANCE PROVIDED THROUGH AN |
| INSURANCE SOURCE COLLECTED IN HX03 OR HX23, THE |
| FIRST LOOP CYCLE COLLECTS THE MAIN ESTABLISHMENT |
| NAME OF THE INSURANCE SOURCE. SUBSEQUENT CYCLES, |
| IF ANY, ARE DETERMINED BY THE RESPONSE TO HP18. |
| IF HP18 IS CODED '1' (YES), THE LOOP CYCLES AGAIN |
| TO COLLECT THE NEXT ESTABLISHMENT NAME. IF HP18 |
| IS NOT ASKED OR IS CODED '2' (NO), '-7' (REFUSED), |
OR '-8' (DON'T KNOW), THE LOOP ENDS.

BOX_01A
=====

| IF LOOPING ON ANY ESTABLISHMENT FLAGGED IN |
| EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE' AND NOT |
| FLAGGED AS 'SELF-EMPLOYED' WITH A FIRM-SIZE-1, |
GO TO HP09

OTHERWISE, CONTINUE WITH HP04

HP04A
=====

OMITTED.

HP04
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF ESTABLISHMENT}
{STR-DT} {END-DT}

{Please give me the name of the **{professional association/small business group/union/insurance company/HMO/previous employer/previous employer (using COBRA)/group or association/school/spouse's (or deceased spouse's) previous employer/employer/high risk pool (e.g., {STATE NAME FOR HIGH RISK POOL})/ {HX03OV/HX23OV OTHER SPECIFY}/the source}** {from which someone in the family {purchased/obtained} this insurance/for the insurance purchased from an agent}. / You mentioned that someone in the family receives health insurance from the plan of someone not living here. How does that policyholder get this insurance?}

VERIFY WITH RESPONDENT AND SELECT (ESTABLISHMENT) BELOW:

ROSTER. ESTABLISHMENT
1. Establishment Name-30
2. Establishment Name-30
3. Establishment Name-30

| DISPLAY 'Please give ... an agent.' IF **NOT** LOOPING
| ON HX23 CODE '12' (UNDER PLAN OF SOMEONE NOT
| LIVING HERE). DISPLAY 'You mentioned...this
| insurance?' IF LOOPING ON HX23 CODE '12' (UNDER
| PLAN OF SOMEONE NOT LIVING HERE).

|
| DISPLAY '**professional association**' IF LOOPING ON
| HX03 CODE '1' (FROM A PROFESSIONAL ASSOCIATION).

|
| DISPLAY '**small business group**' IF LOOPING ON HX03
| CODE '2' (FROM A SMALL BUSINESS GROUP).

|
| DISPLAY '**union**' IF LOOPING ON HX03 CODE '3' (FROM
| A UNION) OR LOOPING ON HX23 CODE '7' (FROM A
| UNION).

|
| DISPLAY '**insurance company**' IF LOOPING ON HX03
| CODE '5' (DIRECTLY FROM AN INSURANCE AGENT) OR '6'
| (DIRECTLY FROM INSURANCE COMPANY) OR LOOPING ON
| HX23 CODE '4' (DIRECTLY FROM AN INSURANCE AGENT)
| OR '5' (DIRECTLY FROM INSURANCE COMPANY).

|
| DISPLAY '**HMO**' IF LOOPING ON HX03 CODE '7'
| (DIRECTLY FROM AN HMO) OR LOOPING ON HX23 CODE '6'
| (DIRECTLY FROM AN HMO).

|
| DISPLAY '**previous employer**' IF LOOPING ON HX03
| CODE '8' (FROM A PREVIOUS EMPLOYER) OR LOOPING ON
| HX23 CODE '9' (FROM ANYONE'S PREVIOUS EMPLOYER).

|
| DISPLAY '**previous employer (using COBRA)**' IF
| LOOPING ON HX03 CODE '9' (FROM A PREVIOUS EMPLOYER
| (COBRA)) OR LOOPING ON HX23 CODE '8' (FROM
| ANYONE'S PREVIOUS EMPLOYER (COBRA)).

|
| DISPLAY '**group or association**' IF LOOPING ON HX23
| CODE '1' (FROM A GROUP OR ASSOCIATION).

|
| DISPLAY '**school**' IF LOOPING ON HX23 CODE '3'
| (DIRECTLY THROUGH A SCHOOL).

|
| DISPLAY '**spouse's (or deceased spouse's) previous
| employer**' IF LOOPING ON HX23 CODE '10' (FROM
| SPOUSE'S/DECEASED SPOUSE'S PREVIOUS EMPLOYER).

|
| DISPLAY '**employer**' IF LOOPING ON HX23 CODE '11'
| (FROM SOME OTHER EMPLOYER).

|
| DISPLAY '**high risk pool {(e.g., {STATE NAME FOR
| HIGH RISK POOL})}**' IF LOOPING ON HX03 CODE '10'
| (DIRECTLY FROM A HIGH RISK POOL) OR LOOPING ON
| HX23 CODE '13' (DIRECTLY FROM A HIGH RISK POOL).

| DISPLAY `{HX03OV/HX23OV OTHER SPECIFY}` IF LOOPING |
| ON HX03 CODE `91` (OTHER) OR LOOPING ON HX23 CODE |
| `91` (OTHER SOURCE). |
| |
| FOR `HX03OV/HX23OV OTHER SPECIFY` DISPLAY THE |
| TEXT ENTERED AT EITHER HX03OV OR HX23OV. |
| |
| DISPLAY `the source` IF LOOPING ON HX03 OR HX23 |
| CODES `-7` (REF) OR `-8` (DK). |
| |
| DISPLAY `from which someone in the family |
| {purchased/obtained} this insurance` IF **NOT** |
| LOOPING ON HX03 CODE `5` (DIRECTLY FROM AN |
| INSURANCE AGENT) OR HX23 CODE `4` (DIRECTLY FROM |
| AN INSURANCE AGENT) IF LOOPING ON HX03 CODE `5` OR |
| HX23 CODE `4`, DISPLAY, `for the insurance |
| purchased from an agent`. |
| |
| DISPLAY `purchased` IF LOOPING ON HX03 CODES `1`, |
| `2`, `3`, `6`, `7`, `10`, `-7`, OR `-8` OR IF |
| LOOPING ON HX23 CODES `1`, `3`, `5`, `6`, `7`, |
| `13`, `-7`, OR `-8`. |
| |
| DISPLAY `obtained` IF LOOPING ON HX03 CODES `8`, |
| `9`, OR `91` OR IF LOOPING ON HX23 CODES `8`, `9`, |
`10`, `11`, OR `91`.

| DISPLAY `(e.g., {STATE NAME FOR HIGH RISK POOL})` |
| IF STATE IN WHICH INTERVIEW IS BEING CONDUCTED |
| OFFERS A HIGH RISK POOL HEALTH INSURANCE PLAN. |
| THIS INCLUDES ALL STATES EXCEPT: AZ, DE, DC, GA, |
| HI, ME, MA, MI, NV, NJ, NY, OH, PA, RI, VT, VA. |
| IF INTERVIEW STATE IS ONE OF THESE STATES, USE A |
| NULL DISPLAY. |
| |
| FOR `STATE NAME FOR HIGH RISK POOL` DISPLAY THE |
| HIGH RISK POOL PLAN NAME ASSOCIATED WITH THE STATE |
IN WHICH INTERVIEW IS BEING CONDUCTED.

| THE CONTEXT HEADER DISPLAYED ON SCREENS |
| HP04 - HP08 DEPENDS ON THE PATH THAT LEADS TO |
| THE SCREEN. IF ASKING ABOUT A SPECIFIC PERSON |
| (I.E., JOBHOLDER WHEN COMING FROM AN HX03 |
| CATEGORY), CAPI DISPLAYS THE PERSON AND START |
| DATE. IF ASKING ABOUT A SPECIFIC ESTABLISHMENT, |
| CAPI DISPLAYS THE ESTABLISHMENT AND START DATE. |
| OTHERWISE, CAPI DISPLAYS THE START DATE. FOR |
| ROUND 5, CAPI ALSO DISPLAYS THE END DATE OF THE |
REFERENCE PERIOD.

| DISPLAY AN "ADD ESTABLISHMENT" OPTION ON THIS |
SCREEN.

| IF 'ADD ESTABLISHMENT' OPTION IS SELECTED, |
CONTINUE WITH BOX_01B

| OTHERWISE (ESTABLISHMENT WAS SELECTED FROM THE |
LIST), GO TO BOX_02

| ROSTER DETAILS: |
| TITLE: RU_ESTB_3 |
| |
| COL # 1 HEADER: ESTABLISHMENT |
| INSTRUCTIONS: DISPLAY ESTABLISHMENT NAME |
(ESTB.ESTBNAME)

| ROSTER DEFINITION: |
| THIS ITEM DISPLAYS RU-ESTABLISHMENTS-ROSTERS FOR |
DISPLAY OF PRIVATE INSURANCE ESTABLISHMENTS.

| ROSTER BEHAVIOR: |
| 1. SELECT ALLOWED. |
| |
| 2. MULTIPLE SELECT, ADD, DELETE, AND EDIT |
DISALLOWED.

| ROSTER FILTER: |
| DISPLAY ESTABLISHMENTS THAT ARE SOURCES OF PRIVATE |
| INSURANCE. THIS DOES NOT INCLUDE ESTABLISHMENTS |
| FLAGGED AS 'EMPLOYER' AND 'SELF-EMPLOYED' WITH A |
FIRM-SIZE-1 THAT ARE COMING FROM THE HX03 SERIES.

BOX_01B
=====

| IF LOOPING ON CODE '12' (UNDER PLAN OF SOMEONE NOT |
| LIVING HERE) AT HX23 AND IF 'ADD ESTABLISHMENT' |
| IS SELECTED, GO TO HP07. (NOTE THAT HP07 IS NOT A |
SEPARATE SCREEN; IT REPRESENTS A POPUP ON HP04.)

| IF 'ADD ESTABLISHMENT' IS SELECTED AND IF NOT |
| LOOPING ON CODE '12' (UNDER PLAN OF SOMEONE NOT |
| LIVING HERE) AT HX23, CONTINUE WITH HP06 (NOTE |
| THAT HP06 IS NOT A SEPARATE SCREEN; IT REPRESENTS |
A POPUP ON HP04.)

HP05
=====

OMITTED.

HP06
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

INSURANCE SOURCE: {CATEGORY NAME FROM HX03 OR HX23}

ENTER NAME OF ESTABLISHMENT WHERE PERSON PURCHASED
INSURANCE.

{ESTABLISHMENT: [_____] {BOX_02}

| DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03 |
| OR HX23' : |

- | - 'PROFESSIONAL ASSOCIATION' IF CODED '1' AT HX03 |
- | - 'SMALL BUSINESS GROUP' IF CODED '2' AT HX03 |
- | - 'UNION' IF CODED '3' AT HX03 |
- | - 'INSURANCE AGENT' IF CODED '5' AT HX03 |
- | - 'INSURANCE COMPANY' IF CODED '6' AT HX03 |
- | - 'HMO' IF CODED '7' AT HX03 |
- | - 'PREVIOUS EMPLOYER' IF CODED '8' AT HX03 |
- | - 'PREVIOUS EMPLOYER [COBRA]' IF CODED '9' AT HX03 |
- | - 'HIGH RISK POOL' IF CODED '10' AT HX03 |
- | - THE TEXT ENTERED AT HX03OV IF CODED '91' AT HX03 |
- | - 'SOURCE PURCHASED FROM FOR THAT BUSINESS' IF |
| CODED '-7' OR '-8' AT HX03 |

- | - 'GROUP OR ASSOCIATION' IF CODED '1' AT HX23 |
- | - 'SCHOOL' IF CODED '3' AT HX23 |
- | - 'INSURANCE AGENT' IF CODED '4' AT HX23 |
- | - 'INSURANCE COMPANY' IF CODED '5' AT HX23 |
- | - 'HMO' IF CODED '6' AT HX23 |
- | - 'UNION' IF CODED '7' AT HX23 |
- | - 'PREVIOUS EMPLOYER [COBRA]' IF CODED |
| '8' AT HX23 |
- | - 'PREVIOUS EMPLOYER [NOT COBRA]' IF |
| CODED '9' AT HX23 |
- | - 'SPOUSE'S/DECEASED SPOUSE'S PREVIOUS EMPLOYER' |
| IF CODED '10' AT HX23 |
- | - 'SOME OTHER EMPLOYER' IF CODED '11' AT HX23 |
- | - 'PLAN OF SOMEONE NOT LIVING HERE' IF CODED '12' |
| AT HX23 |
- | - 'HIGH RISK POOL' IF CODED '13' AT HX23 |
- | - THE TEXT ENTERED AT HX23OV IF CODED '91' AT HX23 |
- | - 'SOURCE THAT PROVIDED DIRECTLY PURCHASED |
| INSURANCE' IF CODED '-7' OR '-8' |

| WRITE ESTABLISHMENT TO THE RU-ESTABLISHMENTS- |
ROSTER.

HP07
=====

{STR-DT}
{END-DT}

You mentioned that someone in the family receives health insurance from the plan of someone not living here. How does that policyholder get this insurance?

INTERVIEWER: RECORD ESTABLISHMENT NAME BELOW.

[Establishment Name] {BOX_02}

| ONLY CATEGORY '12' (UNDER PLAN OF SOMEONE NOT |
LIVING HERE) OF HX23 IS ASKED HP07.

| WRITE ESTABLISHMENT TO THE RU-ESTABLISHMENTS- |
ROSTER.

HP08
=====

OMITTED.

BOX_02

=====

```
-----  
| IF HX03 IS CODED '1' OR '2' FLAG ESTABLISHMENT AS |  
| 'GROUP'. |  
| IF HX03 IS CODED '3', FLAG ESTABLISHMENT AS |  
| 'UNION'. |  
| IF HX03 IS CODED '5', FLAG ESTABLISHMENT AS |  
| 'INSURANCE COMPANY-FROM AN AGENT'. |  
| IF HX03 IS CODED '6', FLAG ESTABLISHMENT AS |  
| 'INSURANCE COMPANY'. |  
| IF HX03 IS CODED '7', FLAG ESTABLISHMENT AS 'HMO'. |  
| IF HX03 IS CODED '8', FLAG ESTABLISHMENT AS |  
| 'PREVIOUS EMPLOYER, NOT COBRA'. |  
| IF HX03 IS CODED '9', FLAG ESTABLISHMENT AS |  
| 'COBRA'. |  
| IF HX03 IS CODED '10', FLAG ESTABLISHMENT AS |  
| 'HIGH RISK POOL'. |  
| IF HX03 IS CODED '91', FLAG ESTABLISHMENT AS |  
| 'UNKNOWN TYPE-COLLECTED AT OTHER'. |  
| |  
| IF HX23 IS CODED '1', FLAG ESTABLISHMENT AS |  
| 'GROUP'. |  
| IF HX23 IS CODED '3', FLAG ESTABLISHMENT AS |  
| 'SCHOOL'. |  
| IF HX23 IS CODED '4', FLAG ESTABLISHMENT AS |  
| 'INSURANCE COMPANY-FROM AN AGENT'. |  
| IF HX23 IS CODED '5', FLAG ESTABLISHMENT AS |  
| 'INSURANCE COMPANY'. |  
| IF HX23 IS CODED '6', FLAG ESTABLISHMENT AS |  
| 'HMO'. |  
| IF HX23 IS CODED '7', FLAG ESTABLISHMENT AS |  
| 'UNION'. |  
| IF HX23 IS CODED '8', FLAG ESTABLISHMENT AS |  
| 'COBRA'. |  
| IF HX23 IS CODED '9', FLAG ESTABLISHMENT AS |  
| 'PREVIOUS EMPLOYER, NOT COBRA'. |  
| IF HX23 IS CODED '10', FLAG ESTABLISHMENT AS |  
| 'SPOUSE PREVIOUS EMPLOYER'. |  
| IF HX23 IS CODED '11', FLAG ESTABLISHMENT AS |  
| 'EMPLOYER'. |  
| IF HX23 IS CODED '12', FLAG ESTABLISHMENT AS |  
| 'UNKNOWN TYPE-OUTSIDE RU'. |  
| IF HX23 IS CODED '13', FLAG ESTABLISHMENT AS |  
| 'HIGH RISK POOL'. |  
| IF HX23 IS CODED '91', FLAG ESTABLISHMENT AS |  
| 'UNKNOWN TYPE - COLLECTED AT OTHER'. |  
-----
```

| NOTE THAT 'HEALTH INSURANCE PURCHASING ALLIANCE' |
| (CODE '4' AT HX03 AND CODE '2' AT HX23) WAS |
| OMITTED IN PANEL 12 ROUND 2 AND WILL BE OMITTED IN |
ALL FUTURE ROUNDS.

BOX_03

=====

IF LOOPING ON AN HX23 CATEGORY, GO TO HP11

OTHERWISE, CONTINUE WITH HP09

HP09

=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

{(Are/Is)/As of (END DATE), was} (PERSON) the primary insured
person or policyholder of this health coverage through
(ESTABLISHMENT)?

YES 1 {LOOP_02}
NO 2 {HP10}
REF -7 {HP10}
DK -8 {HP10}

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

| DISPLAY '(Are/Is)' IF NOT ROUND 5. DISPLAY 'As of |
(END DATE), was' IF ROUND 5.

PERSON REFERS TO JOBHOLDER.

```
-----  
| IF CODED '1' (YES), FLAG JOBHOLDER AS |  
| 'POLICYHOLDER'. |  
-----
```

HP10
=====

```
{NAME OF ESTABLISHMENT} {STR-DT}  
{END-DT}
```

Who {is/was} the primary insured person or policyholder of this health coverage through (ESTABLISHMENT) {on (END DATE)}?

```
{JOBHOLDER/EMPLOYER-PAIR 1}  
{JOBHOLDER/EMPLOYER-PAIR 2}  
{JOBHOLDER/EMPLOYER-PAIR 3}
```

```
JOBHOLDER/EMPLOYER IS LISTED ..... 1 {END_LP01}  
JOBHOLDER/EMPLOYER IS NOT LISTED ..... 2 {END_LP01}  
REF ..... -7 {END_LP01}  
DK ..... -8 {END_LP01}
```

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

[Code One]

```
-----  
| DISPLAY 'is' IF NOT ROUND 5. DISPLAY 'was' IF |  
| ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5. |  
| OTHERWISE, USE NULL DISPLAY. |  
-----
```

```
-----  
| IF CODED '2' (NO), '-7' (REFUSED) OR '-8' (DON'T |  
| KNOW), FLAG FOR EVENT CLEANUP. |  
-----
```

```
-----  
| ROSTER DETAILS: |  
| TITLE: RU_ESTB_PERS_PAIRS_2 |  
| |  
| COL # 1 HEADER: JOBHOLDER/EMPLOYER PAIR |  
| INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, |  
| AND LAST NAME/ESTABLISHMENT NAME (PERS.FULLNAME/ |  
| ESTB.ESTBNAME) |  
-----
```

| ROSTER DEFINITION: |
| THIS ITEM DISPLAYS RU-ESTABLISHMENT-PERSON-PAIRS- |
ROSTER FOR DISPLAY OF EMPLOYER/JOBHOLDER PAIRS.

| ROSTER BEHAVIOR: |
| 1. DISPLAY ONLY. |
| |
2. SELECT, ADD, DELETE, AND EDIT DISALLOWED.

| ROSTER FILTER: |
| DISPLAY ALL PAIRS ON THE RU-ESTABLISHMENT-PERSON- |
| PAIRS-ROSTER THAT MEET BOTH OF THE FOLLOWING |
| CONDITIONS: |
| |
| 1. ESTABLISHMENT IS FLAGGED AS AN 'EMPLOYER' THAT |
| IS ALSO FLAGGED AS 'PROVIDES HEALTH INSURANCE' |
| AND |
| |
| 2. PERSON IS A JOBHOLDER AT THE JOB PROVIDED BY |
ESTABLISHMENT

HP11
=====

{NAME OF ESTABLISHMENT} {STR-DT}
{END-DT}

Who {is/was} the primary insured person or policyholder of this
health coverage through (ESTABLISHMENT) {on (END DATE)}?

- [1. First Name, [Middle Name], Last Name-35] ..
- [2. First Name, [Middle Name], Last Name-35] ..
- [3. First Name, [Middle Name], Last Name-35] ..

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

[Code All that Apply]

| DISPLAY 'is' IF NOT ROUND 5. DISPLAY 'was' IF |
| ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5. |
| OTHERWISE, USE NULL DISPLAY. DISPLAY A |
| "POLICYHOLDER NOT LISTED IN DU" AND "POLICYHOLDER |
DECEASED" OPTION ON THIS SCREEN.

| IF BOTH 'POLICYHOLDER NOT LISTED IN DU' AND |
| 'POLICYHOLDER DECEASED' ARE NOT SELECTED, GO TO |
LOOP_02

| IF 'POLICYHOLDER DECEASED' SELECTED, ALONE OR IN |
| COMBINATION WITH OTHER NAMES EXCEPT 'POLICYHOLDER |
NOT LISTED IN DU', GO TO HP11B

| IF 'POLICYHOLDER NOT LISTED IN DU' SELECTED, ALONE |
| OR IN COMBINATION WITH OTHER NAMES AND/OR |
'POLICYHOLDER DECEASED', CONTINUE WITH HP11A

| ROSTER DETAILS: |
| TITLE: DU_MEMBERS_1 |
| |
| COL # 1 HEADER: NAME |
| INSTRUCTIONS: DISPLAY DU MEMBER'S FIRST, MIDDLE, |
AND LAST NAMES (PERS.FULLNAME)

| ROSTER DEFINITION: THIS ITEM DISPLAYS DU-MEMBERS- |
ROSTER FOR SELECTION.

| ROSTER BEHAVIOR: |
| 1. MULTIPLE SELECT ALLOWED. |
| |
2. ADD, DELETE, AND EDIT DISALLOWED.

| ROSTER FILTER: |
NO FILTER; DISPLAY ALL DU MEMBERS.

HP11A
=====

{NAME OF ESTABLISHMENT} {STR-DT}
{END-DT}

INTERVIEWER: ENTER NAME OR DESCRIPTION OF POLICYHOLDER WHO
IS NOT IN THE DU:

[Enter Specify-15] {LOOP_02}

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

| WHENEVER THIS POLICYHOLDER IS BEING ASKED ABOUT |
| IN THE REMAINDER OF HP, HQ, HX, AND OE, THE |
| POLICYHOLDER NAME IN THE CONTEXT HEADER WILL BE |
| DISPLAYED AS 'PLCYHLDR NOT IN DU-' FOLLOWED BY |
THE 15 CHARACTER ENTRY AT HP11A.

| IF 'POLICYHOLDER DECEASED' SELECTED AT HP11, |
CONTINUE WITH HP11B

OTHERWISE, GO TO LOOP_02

HP11B
=====

{NAME OF ESTABLISHMENT} {STR-DT}
{END-DT}

INTERVIEWER: ENTER NAME OF DECEASED POLICYHOLDER:

[Enter Specify-40] {LOOP_02}

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

FLAG POLICYHOLDER AS 'DECEASED'.

```
-----  
|   WHENEVER THE POLICYHOLDER IS BEING ASKED ABOUT   |  
|   IN THE REMAINDER OF HP, HQ, HX, AND OE, THE       |  
|   POLICYHOLDER NAME IN THE CONTEXT HEADER WILL BE  |  
|   DISPLAYED AS 'PLCYHLDR DECEASED-' FOLLOWED BY THE |  
|   FIRST 15 CHARACTERS OF THE ENTRY AT HP11B.        |  
-----
```

LOOP_02

=====

```
-----  
|   FOR EACH ELEMENT ON THE RU-ESTABLISHMENT-PERSON-  |  
|   PAIRS-ROSTER, ASK BOX_04 - END_LP02              |  
-----
```

```
-----  
|   LOOP DEFINITION: LOOP_02 COLLECTS INFORMATION    |  
|   ABOUT THE POLICYHOLDER AND DEPENDENTS FOR EACH  |  
|   ESTABLISHMENT-PERSON. THIS LOOP CYCLES ON EACH  |  
|   ESTABLISHMENT-PERSON-PAIR CREATED AT HP09 AND HP11 |  
|   DURING THE CURRENT ROUND FOR THE ESTABLISHMENT  |  
|   BEING CYCLED ON IN LOOP_01.                     |  
-----
```

BOX_04

=====

```
-----  
|   IF LOOPING ON AN ESTABLISHMENT FLAGGED IN        |  
|   EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE', GO TO |  
|   BOX_07                                            |  
-----
```

```
-----  
|   OTHERWISE, CONTINUE WITH BOX_05                  |  
-----
```

BOX_05

=====

```
-----  
| IF HX23 IS CODED '8' (PREVIOUS EMPLOYER-COBRA), |  
| '9' (PREVIOUS EMPLOYER-NOT COBRA), '10' (SPOUSE |  
| PREVIOUS EMPLOYER), OR '11' (OTHER EMPLOYER) |  
| CONTINUE WITH BOX_06 |  
-----
```

```
-----  
| OTHERWISE, GO TO BOX_07 |  
-----
```

BOX_06

=====

```
-----  
| IF POLICYHOLDER WAS FLAGGED AT HP11 AS 'DECEASED', |  
| CODE HP12 AS '4' (DECEASED) AUTOMATICALLY BY CAPI |  
| AND GO TO HP13 |  
-----
```

```
-----  
| IF POLICYHOLDER IS NOT A CURRENT RU MEMBER, GO TO |  
| BOX_07 |  
-----
```

```
-----  
| OTHERWISE, CONTINUE WITH HP12 |  
-----
```

HP12
=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

(Are/Is) (POLICYHOLDER) currently employed at this job,
retired from this job, previously employed at this job, or is
it some other situation?

CURRENTLY EMPLOYED 1 {HP13}
RETIRED 2 {HP13}
PREVIOUSLY EMPLOYED 3 {HP13}
DECEASED 4 {HP13}
OTHER 91 {HP12OV}
REF -7 {HP13}
DK -8 {HP13}

HELP AVAILABLE FOR DEFINITIONS OF ANSWER CATEGORIES.

[Code One]

| IF CODED '4' (DECEASED), FLAG POLICYHOLDER AS |
'DECEASED'.

| HARD CHECK: |
| CODE '4' (DECEASED) CANNOT BE SELECTED FOR A |
POLICYHOLDER WHO IS A CURRENT RU MEMBER.

HP12OV
=====

SPECIFY:

[Enter Other Specify] {HP13}
REF -7 {HP13}
DK -8 {HP13}

HP13
====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

{(Are/Is)/(Were/Was)} (POLICYHOLDER) a federal government
employee at this job?

YES 1 {BOX_07}
NO 2 {BOX_07}
REF -7 {BOX_07}
DK -8 {BOX_07}

HELP AVAILABLE FOR DEFINITION OF FEDERAL GOVERNMENT.

| DISPLAY '(Are/Is)' IF HP12 IS CODED '1' (CURRENTLY|
EMPLOYED). OTHERWISE, DISPLAY '(Were/Was)'.

BOX_07

=====

```
-----  
| IF ESTABLISHMENT THAT PROVIDES INSURANCE IS |  
| FLAGGED AS: |  
| |  
| 'EMPLOYER' AND JOB SUBTYPE IS NOT 'CURRENT MAIN', |  
| 'CURRENT MISCELLANEOUS JOB WITHIN REFERENCE |  
| PERIOD', OR 'RETIREMENT JOB' |  
| OR |  
| 'EMPLOYER' AND [JOB SUBTYPE IS 'FORMER MAIN', |  
| 'FORMER MISCELLANEOUS' OR 'LAST JOB OUTSIDE |  
| REFERENCE PERIOD'] AND JOB IS ALSO FLAGGED AS |  
| 'NOT RETIRED FROM' |  
| OR |  
| 'PREVIOUS EMPLOYER, NOT COBRA' (I.E., HX03-CODE |  
| '8'; HX23-CODE '9') |  
| OR |  
| 'EMPLOYER' (I.E., HX23-CODE '11') AND HP12 IS NOT |  
| CODED '1' (CURRENTLY EMPLOYED) |  
| OR |  
| 'SPOUSE PREVIOUS EMPLOYER' (I.E., HX23-CODE '10') |  
| OR |  
| 'UNKNOWN TYPE-OUTSIDE RU' (I.E., HX23-CODE '12') |  
| OR |  
| 'UNKNOWN TYPE-COLLECTED AT OTHER' (I.E., HX23- |  
| CODE '91'), |  
| |  
| CONTINUE WITH HP14 |  
-----
```

```
-----  
| OTHERWISE, GO TO HP15 |  
-----
```

HP14
=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

Some employer insurance can be continued after leaving the
company by continuing to pay the premium. This is sometimes
referred to as a COBRA plan.

{Is/Was} (POLICYHOLDER)'s (ESTABLISHMENT) insurance like that
{on (END DATE)}?

YES 1 {HP15}
NO 2 {HP15}
REF -7 {HP15}
DK -8 {HP15}

HELP AVAILABLE FOR DEFINITION OF COBRA.

| DISPLAY 'Is' IF NOT ROUND 5. DISPLAY 'Was' IF |
| ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5. |
OTHERWISE, USE NULL DISPLAY.

HP15
=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

Was anyone {living here} covered as a dependent under
(POLICYHOLDER)'s health coverage through (ESTABLISHMENT)
at any time {since (START DATE)/between (START DATE) and
(END DATE)}?

YES 1 {HP16}
NO 2 {HP17}
REF -7 {HP17}
DK -8 {HP17}

HELP AVAILABLE FOR DEFINITION OF DEPENDENT.


```
-----  
| DISPLAY 'living here' IF LOOPING ON CODE '12' |  
| (OUTSIDE RU) AT HX23. |  
| |  
| DISPLAY 'since (START DATE)' IF NOT ROUND 5. |  
| DISPLAY 'between (START DATE) and (END DATE)' IF |  
| ROUND 5. |  
-----
```

HP16

====

```
{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF  
ESTABLISHMENT} {STR-DT}  
{END-DATE}
```

Who is that?

PROBE: Was anyone else covered as a dependent {since
(START DATE)/between (START DATE) and (END DATE)}?

- [1. First Name, [Middle Name], Last Name-35]
- [2. First Name, [Middle Name], Last Name-35]
- [3. First Name, [Middle Name], Last Name-35]

[Code All That Apply]

```
-----  
| DISPLAY 'since (START DATE)' IF NOT ROUND 5. |  
| DISPLAY 'between (START DATE) and (END DATE)' IF |  
| ROUND 5. |  
-----
```

```
-----  
| IF 'PERSON NOT LISTED IN RU' IS SELECTED, FLAG |  
| INSURANCE THROUGH THIS ESTABLISHMENT-PERSON-PAIR |  
| AS 'COVERING PERSON NOT LISTED IN RU'. |  
-----
```

```
-----  
| GO TO BOX_08 |  
-----
```

| ROSTER DETAILS: |
| TITLE: RU_MEMBERS_1 |
| |
| COL # 1 HEADER: NAME |
| INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, |
| AND LAST NAMES (PERS.FULLNAME) |

| ROSTER DEFINITION: |
| THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR SELECTION |
| OF RU-MEMBERS. |

| ROSTER BEHAVIOR: |
| 1. MULTIPLE SELECT ALLOWED. |
| |
| 2. ADD, DELETE, AND EDIT DISALLOWED. |

| ROSTER FILTER: |
| DISPLAY ALL PERSONS ON THE RU-MEMBERS-ROSTER |
| EXCLUDING THE PERSON WHO IS THE POLICYHOLDER FOR |
| THIS INSURANCE; THAT IS, DO NOT DISPLAY THE NAME |
| OF PERSON IN THE ESTABLISHMENT-PERSON-PAIR BEING |
| ASKED ABOUT. |

| DISPLAY 'PERSON NOT LISTED IN RU' AS LAST ITEM ON |
| ROSTER. |

HP17
=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

{Does/Between (START DATE) and (END DATE), did} (POLICYHOLDER)'s
health coverage through (ESTABLISHMENT) cover as dependents any
persons who do not live here?

YES 1 {BOX_08}
NO 2 {BOX_08}
REF -7 {BOX_08}
DK -8 {BOX_08}

HELP AVAILABLE FOR DEFINITION OF DEPENDENT.

| DISPLAY 'Does' IF NOT ROUND 5. DISPLAY 'Between |
(START DATE) and (END DATE), did' IF ROUND 5.

| IF CODED '1' (YES), FLAG INSURANCE THROUGH THIS |
| ESTABLISHMENT-PERSON-PAIR AS 'COVERING PERSON NOT |
LISTED IN RU' IN HP16.

BOX_08
=====

| IF THERE ARE NO POLICYHOLDERS OR DEPENDENTS WHO |
| ARE CURRENT RU MEMBERS, THAT IS, POLICYHOLDER IS A |
| DU MEMBER BUT NOT A CURRENT RU MEMBER, OR IS |
| FLAGGED AS 'NOT LISTED IN DU' OR 'POLICYHOLDER |
| DECEASED' AND INSURANCE ALSO FLAGGED ONLY AS |
'COVERING PERSON NOT IN RU', GO TO END_LP02

OTHERWISE, CONTINUE WITH LOOP_03

LOOP_03

=====

| FOR EACH ELEMENT IN THE RU-ESTB-PLCYHLDR-COVRD- |
PERS-TRPLS-ROSTER, ASK NAV_HP03 - END_LP03

| LOOP DEFINITION: LOOP_03 COLLECTS TIME PERIOD |
| COVERAGE FOR ALL CURRENT RU MEMBERS COVERED BY THE |
| INSURANCE THROUGH THIS ESTABLISHMENT-PERSON-PAIR. |
| THIS LOOP CYCLES ON CURRENT RU MEMBERS WHO ARE |
| SELECTED AS DEPENDENTS AT HP16 AND THE RU MEMBER |
| WHO IS FLAGGED AS THE POLICYHOLDER FOR THIS |
INSURANCE.

| NAVIGATOR DETAILS: LOOP_03 USES NAV_HP03 TO |
CONTROL THE FLOW OF THE LOOP.

NAV_HP03

=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}

SERIES: {Insurance Coverage Duration during Reference
Period / Self-Employed RU Member's Insurance Coverage}

USE THE LINKS BELOW TO COMPLETE ALL QUESTIONS WITHIN THIS SERIES.

WHEN ALL LINKS ARE MARKED "**DONE**," USE [Continue Interview] TO GO
PAST THIS SERIES.

IF NEEDED, [Previous Page] WILL TAKE YOU TO QUESTIONS BEFORE THIS
SERIES.

Question Series

- [1. Coverage duration for [Person's Name-65] through
[Establishment Name-30]] [Status-25]
- [2. Coverage duration for [Person's Name-65] through
[Establishment Name-30]] [Status-25]
- [3. Coverage duration for [Person's Name-65] through
[Establishment Name-30]] [Status-25]

| DISPLAY 'Self-Employed RU Member's Insurance |
| Coverage' IF LOOPING ON AN HX03 CATEGORY. |
| OTHERWISE, DISPLAY 'Insurance Coverage Duration |
during Reference Period.'

| ROSTER DETAILS: |
| COL # 1 HEADER: QUESTION SERIES |
| INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, |
| AND LAST NAMES (PERS.FULLNAME) |
| COL # 2 HEADER: EMPTY |
| INSTRUCTIONS: DISPLAY THE MOST CURRENT NAVIGATOR |
| STATUS FOR EACH RU MEMBER EACH TIME THE NAVIGATOR |
IS PRESENTED

| ROSTER DEFINITION: |
| THIS ITEM DISPLAYS THE RU-ESTB-PLCYHLDR-COVRD- |
PERS-TRPLS-ROSTER FOR SELECTION.

| ROSTER BEHAVIOR: |
| 1. SELECT ALLOWED. |
| |
| 2. MULTIPLE SELECT, ADD, DELETE, AND EDIT |
DISALLOWED.

| ROSTER FILTER: |
DISPLAY ALL RU MEMBERS SELECTED AT HP16.

CONTINUE WITH BOX_09 FOR SELECTED RU MEMBER.

BOX_09
=====

| ASK THE TIME PERIOD COVERED DETAIL (HQ) SECTION. |
| |
| AT COMPLETION OF TIME PERIOD COVERED DETAIL (HQ) |
SECTION, CONTINUE WITH END_LP03

END_LP03

=====

```
-----  
| CYCLE ON NEXT PERSON IN THE RU-ESTB-PLCYHLDR- |  
| COVRD-PERS-TRPLS-ROSTER WHO MEETS THE CONDITIONS |  
| STATED IN THE LOOP DEFINITION. |  
-----
```

```
-----  
| IF NO OTHER PERSONS MEET THE STATED CONDITIONS, |  
| END LOOP_03 AND CONTINUE WITH END_LP02 |  
-----
```

END_LP02

=====

```
-----  
| CYCLE ON NEXT PAIR IN THE RU-ESTABLISHMENT-PERSON- |  
| PAIRS-ROSTER WHO MEETS THE CONDITIONS STATED IN |  
| THE LOOP DEFINITION. |  
-----
```

```
-----  
| IF NO OTHER PAIRS MEET THE STATED CONDITIONS, END |  
| LOOP_02 AND CONTINUE WITH BOX_10 |  
-----
```

BOX_10

=====

```
-----  
| IF LOOPING ON AN ESTABLISHMENT FLAGGED IN |  
| EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE' AND NOT |  
| FLAGGED AS 'SELF-EMPLOYED' WITH A FIRM-SIZE-1, GO |  
| TO END_LP01 |  
-----
```

```
-----  
| OTHERWISE, CONTINUE WITH HP18 |  
-----
```

HP18
=====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

Aside from (POLICYHOLDER)'s (ESTABLISHMENT) insurance, is there
another health insurance plan that anyone in the family obtains
from {CATEGORY NAME FROM HX03 OR HX23}?

YES 1 {END_LP01}
NO 2 {END_LP01}
REF -7 {END_LP01}
DK -8 {END_LP01}

```
-----  
| DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03 |  
| OR HX23': |  
| |  
| - 'a professional association' IF CODED '1' AT |  
| HX03 |  
| - 'a small business group' IF CODED '2' AT HX03 |  
| - 'a union' IF CODED '3' AT HX03 |  
| - 'an insurance agent' IF CODED '5' AT HX03 |  
| - 'an insurance company' IF CODED '6' AT HX03 |  
| - 'an HMO' IF CODED '7' AT HX03 |  
| - 'a previous employer' IF CODED '8' AT HX03 |  
| - 'a previous employer (COBRA)' IF CODED '9' AT |  
| HX03 |  
| - 'a high risk pool' IF CODED '10' AT HX03 |  
| - 'the {HX03OV OTHER SPECIFY TEXT}' IF CODED '91' |  
| AT HX03 |  
| - 'source purchased for that business' IF CODED |  
| '-7' OR '-8' AT HX03 |  
| |  
| - 'a group or association' IF CODED '1' AT HX23 |  
| - 'a school' IF CODED '3' AT HX23 |  
| - 'an insurance agent' IF CODED '4' AT HX23 |  
| - 'an insurance company' IF CODED '5' AT HX23 |  
| - 'an HMO' IF CODED '6' AT HX23 |  
| - 'a union' IF CODED '7' AT HX23 |  
| - 'a previous employer (COBRA)' IF CODED '8' AT |  
| HX23 |  
| - 'a previous employer (not COBRA)' IF CODED '9' |  
| AT HX23 |  
| - 'a spouse's (or deceased spouse's) previous |  
| employer' IF CODED '10' AT HX23 |  
| - 'some other employer' IF CODED '11' AT HX23 |  
| - 'the plan of someone not living here' IF CODED |  
| '12' AT HX23 |  
| - 'a high risk pool' IF CODED '13' AT HX23 |  
| - 'the {HX23OV OTHER SPECIFY TEXT}' IF CODED '91' |  
| AT HX23 |  
| - 'a source that provided directly purchased |  
| insurance' IF CODED '-7' OR '-8' |  
| |  
|-----
```


END_LP01

=====

| IF HP18 IS CODED '1' (YES), CYCLE TO COLLECT NEXT |
ESTABLISHMENT NAME.

| IF HP18 IS NOT ASKED OR IS CODED '2' (NO), '-7' |
| (REFUSED), OR '-8' (DON'T KNOW), END LOOP_01 AND |
CONTINUE WITH BOX_11

BOX_11

=====

RETURN TO THE HEALTH INSURANCE (HX) SECTION.