<table>
<thead>
<tr>
<th>BOX_00</th>
<th>(OE1000)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

**Route Details:**
- 01 Box: BOX_00, BOX_10, BOX_20, BOX_25, BOX_30, BOX_40, BOX_50, BOX_60, BOX_70, BOX_80, BOX_90, BOX_100, BOX_110, BOX_120, BOX_130, BOX_140, BOX_150, BOX_160, BOX_170, BOX_180, BOX_190, BOX_200, BOX_210.
- 02 Loop: LOOP_10.
- 03 End Loop: END_LP10.
- 05 Single Select with Display Roster: OE50_01, OE70.
- 06 Single Select with Fill in Answer Text: OE10, OE30_01, OE60_01, OE210.
- 08 Multiple Select: OE130.
- 14 Regular Date Entry: OE30_02, OE30_03, OE30_04.
- 15 Regular Date Entry with Skips: OE60_02, OE60_03, OE60_04.
- 17 Dollar Items Allowing Cents: OE180.
- 20 OS Text Field: OE130OS, OE190OS.
- 23 Text Field: OE120, OE140.
Context Header Instructions:
Display Person.FullName, Insurance.Plcyhldr, Insurance.HISrcName.

Throughout the specifications for this CAPI section, for displays of
‘{you/{POLICYHOLDER}}’, display ‘you’ only if the current round respondent is the same
PersID as the policyholder for the insurance being looped on.
Otherwise, display ‘{POLICYHOLDER}’ substituting the name of the policyholder. If the
policyholder is ‘POLICYHOLDER NOT LISTED IN DU’ (Insurance.Plcyhldr=902), display
‘PLCYHLDR NOT IN DU’ followed by the 15 character entry at HP100. If the policyholder is
‘POLICYHOLDER DECEASED’ (Insurance.Plcyhldr=901), display ‘PLCYHLDR DECEASED’
followed by the first 15 characters of the entry at HP110 (see HP specifications).

General Display Instructions for Question Text:
For ‘{START DATE}’, display the RU level reference period start date (typically-but not always Jan 1 if Round 1 or the previous round interview date if Rds 2-5). Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variable BegRefDt.

For ‘{END DATE}’, display the RU level reference period end date (typically but not always current round interview date if Rds 2-4 or Dec 31 if Round 5). Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variable EndRefDt.

For ‘{PERSON’S START DATE}’, display the person level reference period start date. Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variables Person.BegRefM, Person.BegRefD, Person.BegRefY.

For ‘{PERSON’S END DATE}’, display the person level reference period end date. Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variables Person.EndRefM, Person.EndRefD, Person.EndRefY.

Unless there is a more specific fill instruction provided at the item level, for any fill using the variable ‘Insurance.Insurer’, display the text entry stored or display “Refused Insurer” if Insurance.Insurer=RF or display “Don’t Know Insurer” if Insurance.Insurer=DK. Items using Insurance.Insurer include OE110, OE120, OE160.
| Route Details: | If one or more current RU members were listed as a policyholder or covered person on a private health insurance source (employer, union, direct purchase) as of the previous round interview date [Insurance.HIPubPriv=Private and there is at least one RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd=[{previous round}] and Insurance.OrigRnd<>current round], continue with LOOP_10.

Otherwise, go to BOX_210. |
| Programmer Instructions: | NOTE: Definition for being listed as a policyholder or covered person on a private health insurance source (employer, union, direct purchase) as of the previous round interview date:

- Insurance is flagged as a current or former employer, union or direct purchase source that provides health insurance
- At least one current RU member is flagged as a policyholder or a covered person for this insurance
- At least one RU member was a covered person on the previous round’s interview date for the health insurance provided by insurance source |
For each private insurance, ask BOX_25 - END_LP10.

Loop definition: Loop_10 collects information about private insurance that was created in a previous round and at least one current RU member is covered as a policyholder or a dependent on the previous round's interview date. This loop cycles by policyholder, then by insurance. If the respondent is a policyholder on any insurance, cycle on that insurance first. [Insurance.HIPubPriv=Private and there is at least one RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd={previous round} and Insurance.OrigRnd<>current round]

NOTE: LOOP_10 collects information about the following situations:

1. The continuation of insurance coverage associated with an employer from the Employment (EM) section that provides health insurance and is through a 'CURRENT MAIN' or 'CURRENT MISCELLANEOUS' job that was collected in a previous round (that employer may now be either current or non-current depending on responses in RJ).
2. The continuation of insurance coverage associated with an employer or union from the Employment (EM) section that provides health insurance collected in a previous round but was not through a current main or miscellaneous job reviewed during the RJ section.
3. The continuation of insurance coverage through a direct purchase source that was collected in a previous round. This includes insurance where the policyholder was originally marked as "POLICYHOLDER NOT LISTED IN DU" and "POLICYHOLDER DECEASED".
4. The continuation of insurance coverage through insurance where the eligible dependent(s) are separated from the policyholder (the policyholder or the dependents have left the original RU). When a jobholder/policyholder leaves an RU, we will never ask RJ. This last set of conditions handles the situation where the policyholder has left the RU and left dependents behind, or the situation where the dependents have left the RU (without the policyholder). This situation will be treated as 'Dependent(s) Separated from Policyholder'. This situation can be associated with any insurance in a particular RU where they are covered persons, but the policyholder is in another RU. This situation will carryforward with the insurance every round.

This situation should never exist on insurance in an RU where the policyholder is in the same RU as all of the dependents or where the policyholder was originally created as 'POLICYHOLDER NOT LISTED IN DU' or 'POLICYHOLDER DECEASED'. See HX BOX_10 for more information on this situation.

For all situations above, there must be at least one RU member (or the policyholder) who was a covered person on the previous round’s interview date for this insurance to be reviewed in the current round.
If the policyholder is ‘POLICYHOLDER NOT LISTED IN DU’ (Insurance.Plycldr=902, HP90=98), continue with OE10.

Otherwise, go to OE20_01.

**Full Detail Spec**

<table>
<thead>
<tr>
<th>Route Details:</th>
<th>Route Details: If the policyholder is ‘POLICYHOLDER NOT LISTED IN DU’ (Insurance.Plycldr=902, HP90=98), continue with OE10. Otherwise, go to OE20_01.</th>
</tr>
</thead>
</table>

**Route Details:**

- **Item Type:** Route
- **Type Class:** If Then

**OE10**

- **(OE1030)**
- **BLAISE NAME:** OEPlycldrRoster
- **Item Type:** Question
- **Type Class:** Enumerated
- **Answer Type:** TFMLNAME_NOTO
- **Response Details:**  
  - {FIRST NAME, [MIDDLE NAME], LAST NAME}1
  - {FIRST NAME, [MIDDLE NAME], LAST NAME}2
  - {FIRST NAME, [MIDDLE NAME], LAST NAME}3
  - {FIRST NAME, [MIDDLE NAME], LAST NAME}4
  - {FIRST NAME, [MIDDLE NAME], LAST NAME}N
  - NAME NOT ON ROSTER

**Context Header:** {POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**

INTERVIEWER: IF {POLICYHOLDER}’S NAME IS LISTED ON THE ROSTER BELOW, SELECT IT. IF NOT, SELECT ‘NAME NOT ON ROSTER’ AND CONTINUE.

**Responses:**

- {FIRST NAME, [MIDDLE NAME], LAST NAME}1 ...... 1 OE20_01 (OE1035)
- {FIRST NAME, [MIDDLE NAME], LAST NAME}2 ...... 2 OE20_01 (OE1035)
- {FIRST NAME, [MIDDLE NAME], LAST NAME}3 ...... 3 OE20_01 (OE1035)
- {FIRST NAME, [MIDDLE NAME], LAST NAME}4 ...... 4 OE20_01 (OE1035)
- {FIRST NAME, [MIDDLE NAME], LAST NAME}N NAME NOT ON ROSTER ......................... 99 OE20_01 (OE1035)
Programmer Instructions: Roster 2 – no add/edit/delete Roster behavior:
1. Single select allowed.

If a DU member’s name is selected from the roster, replace this name as the current policyholder of this insurance. [Set Insurance.Plyhldr=PersID if DU member selected]
If ‘NAME NOT ON ROSTER’ selected leave the policyholder name as is.

Display Instructions: Roster Definition:
This item displays persons in the DU-members-roster for selection.

Roster filter:
No filter; display all. This can include DU members where PriorRndInelig=YES or EMPTY, but should exclude RU members where RemovedAtRE330=YES. This setting will exclude RU members who were deceased in a prior round as well as any RU members marked as non-key living away, unrelated 1 person RU and incorrectly listed but continues to show persons who could eventually rejoin the RU such as those who are in jail or outside the country.

---

**OE20_01**

**Item Type:** Question
**Type Class:** Enumerated
**Answer Type:** TYESNO

<table>
<thead>
<tr>
<th>OE1035</th>
<th>BLAISE NAME: ConfCovd</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Field Kind: Datafield</td>
</tr>
<tr>
<td></td>
<td>Field Size:</td>
</tr>
<tr>
<td></td>
<td>ArrayMin:</td>
</tr>
<tr>
<td></td>
<td>Min value:</td>
</tr>
<tr>
<td></td>
<td>ArrayMax:</td>
</tr>
<tr>
<td></td>
<td>Max value:</td>
</tr>
</tbody>
</table>

- □ Help Available ( )
- □ Show Card ( )
- □ Look Up File ( )

Context Header: {POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
During our last interview, we recorded that {you/{POLICYHOLDER}} had health insurance through {INSURANCE SOURCE NAME} {which covered {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}}.

{{Are/Is}/{Were/Was}}{you/{PERSON 1}} still covered through {INSURANCE SOURCE NAME} as of {today,} {END DATE}?

Responses:
- YES ................................................... 1
- NO ................................................... 2
- REFUSED .......................................... RF
- DON’T KNOW ................................. DK

---

OE - Page 6 of 51
Full Detail Spec

Programmer Instructions:

Preloaded grid type 1 - forced navigation including OE20_01, OE20_02, OE20_03, OE20_04, OE20_N.

At grid completion, if OE20 is coded ‘2’ (NO), for at least one person, continue with OE30_01.
Otherwise, (if OE20 is coded ‘1’ (YES), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) for all persons listed at OE20), go to BOX_30.


Note: Persons coded ‘1’ (YES), ‘DK’ (DON’T KNOW), or ‘RF’ (REFUSED) are considered covered RU members for the current round.

Display Instructions:

Roster 1 – Report

Col #1 Header: PlcyHdr
Instructions: Display an “X” for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.

Col #2 Header: RU member
Instructions: Display the covered person’s name (Person.FullName) from the covered person array. This is a protected, uneditable field.

Roster Filter:
Policyholder or person was covered on the previous round’s interview date by the insurance (the policyholder or person is an RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round})

Col #3 Header: Still Covered?
Instructions: Entry field for OE20_01 – OE20_N

For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute “you” for the person’s first name if the respondent is included in this list. If exactly two names displayed, separate names with the word “and” and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word “and”.

Note: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.

Variable question text display. Replace “{{{Are/Is}{{Were/Was}}}{{you/{{PERSON 1}} still covered through...}}” with:
OE20_02: What about {you/PERSON 2}? {{Are/Is}/Were/Was} {you/he/she} still covered through {INSURANCE SOURCE NAME} as of {today, END DATE}?
OE20_03: What about {PERSON 3}?
OE20_04: What about {PERSON 4}?
OE20_N: Repeat question text for OE20_02-OE20_N for as many RU members that fit the roster filter criteria.

Display ‘During our last interview...which covered {PERSON 1}...’ in bold black text every fourth question displayed, otherwise, display the question text in brackets and lighter grayed out text.

Display ‘{Are/Is}’ if not round 5. Display ‘{Were/Was}’ if round 5.

Display ‘today,’ if the current round RU reference period end date is equal to the computer date. Otherwise, use a null display.

<table>
<thead>
<tr>
<th>OE30_01</th>
<th>(OE1046)</th>
<th>BLAISE NAME: EnterHIEndDate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Type:</td>
<td>Question</td>
<td>Field kind: Datafield</td>
</tr>
<tr>
<td>Type Class:</td>
<td>Enumerated</td>
<td>Field Size:</td>
</tr>
<tr>
<td>Answer Type:</td>
<td>TDateVolunteer</td>
<td></td>
</tr>
</tbody>
</table>

☐ Help Available ( ) ☐ Show Card ( ) ☐ Look Up File ( )

Context Header: {POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
On what date after {START DATE} did {your/PERSON}'s health insurance through {INSURANCE SOURCE NAME} end?

{IF INSURANCE ENDED AFTER 12/31/YEAR, BACK-UP AND CHANGE OE20 TO 'YES'.}

Responses: ENTER DATE .............................................. 1 OE30_02 (OE1047)
VOLUNTEERED, ENDED BEFORE .......... 2 {START DATE}
Preloaded grid type 2 – forced navigation, including items OE30_01, OE30_02, OE30_03, OE30_04, OE30_05.

Only display OE30_01 and applicable follow-up items for row entries where OE20_01 is coded ‘2’ (NO) for this person.

If coded ‘2’ (VOLUNTEERED, ENDED BEFORE {START DATE}), go to the next person in the grid. If no next person in grid, go to BOX_30.

Note: Persons coded ’1’ (ENTER DATE) are considered covered RU members for the current round.

Roster Report 1

Col #1 Header: PlcyHldr
Instructions: Display an “X” for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.

Col #2 Header: RU member
Instructions: Display the covered person’s name (Person.FullName) from the covered person array. This is a protected, uneditable field.

Roster Filter:
Use OE20_01 filter.

NOTE: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.

Col #3 Header: Still Covered?
Instructions: Display the entered responses from OE20_01 for each person in a protected, uneditable field.

Col#4 Header: When Ended
Instructions: Item OE30_01. Only display as an active cell if OE20_01 is coded ‘2’ (NO) for this person.

Col #5 Header: Month
Instructions: Item OE30_02. Only display as an active cell if OE30_01 is answered ‘1’.

Col #6 Header: Day
Instructions: Item OE30_03. Only display as an active cell if OE30_01 is answered ‘1’ and OE30_02 <> ‘RF’ (REFUSED) or ‘DK’ (DON'T KNOW).

Col#7 Header: Year
Instructions: Item OE30_04. Only display as an active cell if OE30_01 is answered ‘1’.

Col #8 Header: Whole Month?
Instructions: Item OE30_05. Only display as an active cell if OE30_02 < > RF, DK and OE30_03=RF, DK.
Display 'IF INSURANCE ENDED .. YES.' if Round 5, where 'YEAR' is the second calendar year of the panel (SecondPanYear). Otherwise, use a null display.

<table>
<thead>
<tr>
<th>OF30_02</th>
<th>(OE1047)</th>
<th>BLAISE NAME: HIEndMM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Type:</td>
<td>Question</td>
<td>Field kind: Datafield</td>
</tr>
<tr>
<td>Type Class:</td>
<td>Integer</td>
<td>ArrayMin: Min value: 1</td>
</tr>
<tr>
<td>Answer Type:</td>
<td>(Continuous Answer.)</td>
<td>Answers allowed: 1</td>
</tr>
</tbody>
</table>

Help Available ( )  Show Card ( )  Look Up File ( )

Context Header:  

{POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

[On what date after {START DATE} did {your/{PERSON}’s} health insurance through {INSURANCE SOURCE NAME} end?]

ENTER MONTH

Responses:  

<table>
<thead>
<tr>
<th>Response</th>
<th>Value</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>OE30_03</td>
<td>(OE1048)</td>
<td></td>
</tr>
<tr>
<td>RF</td>
<td>OE30_04</td>
<td>(OE1049)</td>
<td>REFUSED</td>
</tr>
<tr>
<td>DK</td>
<td>OE30_04</td>
<td>(OE1049)</td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

Display Instructions:  

Display question text in brackets and in lighter grayed out text.
[On what date after {START DATE} did {your/{PERSON}’s} health insurance through {INSURANCE SOURCE NAME} end?]

ENTER DAY

Responses:


Display Instructions: Display question text in brackets and in lighter grayed out text.
Full Detail Spec

OE30_04  (OE1049)  BLAISE NAME: HIEndYYYY

Item Type:  Question  Field kind:  Datafield  ArrayMin:  Min value: 1900
Type Class:  Integer  Field Size:  4  ArrayMax:  Max value: 2100
Answer Type:  (Continuous Answer.)  Answers allowed:  1

☐ Help Available ( )  ☐ Show Card ( )  ☐ Look Up File ( )

Context Header:  {POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
[On what date after {START DATE} did {your/{PERSON}’s} health insurance through
{INSURANCE SOURCE NAME} end?]
ENTER YEAR

Responses:  **************************************  1
REFUSED  **************************************  RF
DON’T KNOW  **************************************  DK

Programmer Instructions:
If OE30_03 (day) is coded ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) and OE30_02 (month) is NOT coded ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW), continue with OE30_5.

Otherwise, return to OE30_01 for next person on grid.

Hard check:

1. Complete date entered at OE30_02 - OE30_04 must not be prior to the current round’s RU level reference period start date. If full date is prior to start date, display the following message: “IF COVERAGE ENDED PRIOR TO {REF PERIOD START DATE}, BACK-UP TO OE30_01 (EnterHIEndDate) AND CORRECT RESPONSE.”
2. Complete date entered at OE30_02 - OE30_04 must be on or before (i.e., < or =) the person’s reference period end date for this round (EndRefM, EndRefD). In round 5, that is typically Dec. 31 for panel year 2. If not, display the following message: “COVERAGE END DATE MUST BE ON OR BEFORE {PERSON’S REFERENCE PERIOD END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT ENTRIES. IF COVERAGE ENDED AFTER PERSON LEFT RU, ENTER {PERSON’S REFERENCE PERIOD END DATE}.”

Display Instructions:  Display question text in brackets and in lighter grayed out text.
Field Size:

Min value: 1

Max value: 1

ArrayMin:

ArrayMax:

Field Kind: Datafield

Datafield

Enumerated

Enumerated

TENDMONTH

TENDMONTH

Min value:

Max value:

Help Available ( )

Show Card ( )

Look Up File ( )

Context Header:

{POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

[On what date after {START DATE} did {your/PERSON’s} health insurance through
{INSURANCE SOURCE NAME} end?]

{Were/Was} {you/he/she} covered under that insurance the whole month or part of the month?

Responses:

WHOLE MONTH .......................... 1
PART OF THE MONTH .......................... 2
REFUSED .......................... RF
DON’T KNOW .......................... DK

Programmer Instructions:

Return to OE30_01 for next person on grid.

Display Instructions:

Display first paragraph of question text in brackets and in lighter grayed out text.

Route Details:

Continue with BOX_40.
Placeholder for MHOP specifications. This will be deleted once those specifications are available. (Data delivery needs to review to make sure these are the correct settings.)

Determine ‘CONTINUOUS COVERAGE’ (decide what is needed for CAPI vs. MHOP).

- For any covered persons where OE30_01 is coded ‘2’ (VOLUNTEERED, ENDED BEFORE {REF PERIOD START DATE}), flag person as not a covered person for even 1 day under this insurance (important for insurance verifications series).
- For all covered persons where OE20_01 is coded ‘1’ (YES, STILL COVERED), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW), flag person as ‘CONTINUOUS COVERAGE’ from that person’s start date to that person’s end date.
- For all covered persons where OE30_01 is coded ‘1’ (ENTER DATE), flag person as ‘CONTINUOUS COVERAGE’ from that person’s start date to the date entered at OE30_02-OE30_05 or person’s end date (whichever is earlier).

---

**BOX 40** (OE1065)  
**Item Type:** Route  
**Type Class:** If Then

**Route Details:**
- If Round 3, continue with BOX_50.
- Otherwise, go to BOX_60.

**BOX 50** (OE1070)  
**Item Type:** Route  
**Type Class:** If Then

**Route Details:**
- Continue with OE40 if insurance meets the following conditions:
  - If HP50 was coded ‘2’ (NO, PLAN IS NOT EXCHANGE), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) the round the insurance was created (Preload.Insurance.HP50AnsRndCreated)
  - And
  - If insurance direct purchase or SE, FS=1 and is with an ‘INSURANCE CO’, ‘INSURANCE CO.-FROM AGENT’ or ‘HMO’ (Insurance.DirectPurchTp=Agent, Insurance Co, HMO) or (Insurance.HISrc=Employer and Jobs.SELFEMP=SelfEmpl and Jobs.EmpEstm= 1) and (HP40 is coded ‘4’ (DIRECTLY FROM AN INSURANCE AGENT), ‘5’ (DIRECTLY FROM AN INSURANCE COMPANY), or ‘6’ (DIRECTLY FROM AN HMO) the round in which the insurance was first created (Preload.Insurance.HP40AnsRndCreated)
  - And
  - Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is “Policyholder deceased or "Policyholder outside the DU” (Insurance.Plyhldr=901 or 902).

- Otherwise, go to BOX_60.
Is this coverage through {STATE EXCHANGE NAME-A} [{which may be known as {ALIAS B} {or {ALIAS C}}}]?

Responses:
- YES .............................. 1 BOX_60 (OE1110)
- NO ................................. 2 BOX_60 (OE1110)
- REFUSED .......................... RF BOX_60 (OE1110)
- DON'T KNOW ..................... DK BOX_60 (OE1110)

Display Instructions:
- Display '{which may also be known as {ALIAS B} {or {ALIAS C}}}' if there is more than one exchange name associated with the state in which interview is being conducted.
- Display 'or {ALIAS C}' if there are three exchange names associated with the state in which interview is being conducted.
- For 'STATE EXCHANGE NAME-A', 'ALIAS B', and 'ALIAS C', display the exchange name(s) associated with the state in which interview is being conducted.
If at least one current RU member not displayed at OE20_01, continue with OE50_01. NOTE: This means at least one current RU member not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <> [previous round]). Otherwise, go to BOX_80.

**OE50_01**  (OE1115)  **BLAISE NAME:** CovdHISrc  
**Item Type:** Question  **Field kind:** Datafield  **ArrayMin:** Min value: 
**Type Class:** Enumerated  **Field Size:**  **ArrayMax:** Max value:  
**Answer Type:** TYESNO  **Answers allowed:** 1

☐ Help Available (  )  ☐ Show Card (  )  ☐ Look Up File (  )

**Context Header:**  
{POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**  
Now think about {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N…} and whether they have been covered by {your/{POLICYHOLDER}’s} health insurance through {INSURANCE SOURCE NAME}.

{Since {START DATE}/Between {START DATE} and {END DATE}, {{have/has}/[were/was]}{ you/ {PERSON 1}}{ been} covered by {your/{POLICYHOLDER}’s} health insurance through {INSURANCE SOURCE NAME}?

**Responses:**  
YES ........................................... 1  
NO ........................................... 2  
REFUSED .................................... RF  
DON’T KNOW ................................. DK
Preloaded grid type 2 – forced navigation including OE50_01, OE50_02, OE50_03, OE50_04, OE50_N.

At grid completion, if OE50 is coded ‘1’ (YES), for at least one person, continue with OE60_01.
Otherwise (OE50 is coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) for all persons listed at OE50), go to BOX_90.

Note: Persons coded ‘1’ (YES) are considered covered RU members for the current round.

Roster Report 1

Col #1 Header: RU member
Instructions: Display RU members’ first, middle, and last names (Person.FullName)

Roster Filter:
Display all current RU members that were not displayed at OE20_01. That is, display persons who were not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <>[previous round]).

For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute “you” for the person’s first name if the respondent is included in this list. If exactly two names displayed, separate names with the word “and” and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word “and”.

Col #2 Header: Covered?
Instructions: Entry field for OE50_01 – OE50_N

Variable text display. Replace “{Since {START DATE}/Between {START DATE} and {END DATE}}, [{have/has}/{were/was}]{ you/[PERSON 1]} {been} covered by {your/[POLICYHOLDER]’s} health insurance through {INSURANCE SOURCE NAME}?” with:

OE50_02: What about {you/[PERSON 2]}? [{Has/Have}/{Were/Was}] {you/he/she} {been} covered by {your/[POLICYHOLDER]’s} health insurance through {INSURANCE SOURCE NAME} {since [START DATE]/between [START DATE] and [END DATE]}?
OE50_03: What about {PERSON 3}?
OE50_04: What about {PERSON 4}?
OE50_N: Repeat question text for OE50_02-OE50_N for as many RU members that fit the roster filter criteria.

Display ‘{since [START DATE]’ if not round 5. Display ‘{between [START DATE] and [END DATE]}’ if round 5.

Display ‘{have/has}’ if not Round 5. Display ‘{were/was}’ if Round 5. Display ‘been’ if not
On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?

**Responses:**

ENTER DATE ............................... 1  OE60_02  (OE1120)
VOLUNTEERED, BEGAN BEFORE ........ 2  {START DATE}
Full Detail Spec

Programmer Instructions:

Preloaded grid type 2 – forced navigation including items OE60_01, OE60_02, OE60_03, OE60_04, OE60_05.

Only display OE60_01 and applicable follow-up items for row entries where OE50_01 is coded ‘1’ (YES) for this person.

If coded ‘2’ (VOLUNTEERED, BEGAN BEFORE {START DATE}), go to the next person in the grid. If no next person in grid, go to BOX_70.

Display Instructions:

Roster Report 1

Col #1 Header: RU Member
Instructions: Display RU members’ full name. (Person.FullName)

Roster Filter:
Use OE50_01 filter.

Col #2 Header: Covered?
Instructions: Display the entered responses from OE50_01 for each person in a protected, uneditable field.

Col #3 Header: When Begin
Instructions: Item OE60_01. Only display as an active cell if OE50_01 is coded ‘1’ (YES) for this person.

Col #4 Header: Month
Instructions: Item OE60_02. Only display as an active cell if OE60_01 is answered ‘1’.

Col #5 Header: Day
Instructions: Item OE60_03. Only display as an active cell if OE60_01 is answered ‘1’ and OE60_02 <> ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW).

Col #6 Header: Year
Instructions: Item OE60_04. Only display as an active cell if OE60_01 is answered ‘1’.

Col #7 Header: Whole Month?
Instructions: Item OE60_05. Only display as an active cell if OE60_02 <> RF, DK and OE60_03 =RF, DK.
### Full Detail Spec

<table>
<thead>
<tr>
<th>OE60_02 (OE1125)</th>
<th>BLAISE NAME: CovgStartMM</th>
</tr>
</thead>
</table>

**Item Type:** Question  **Field kind:** Datafield  
**Type Class:** Date  **Field Size:**

**Answer Type:** (Continuous Answer.)  **Answers allowed:** 1  **ArrayMax:**

<table>
<thead>
<tr>
<th>Help Available ( )</th>
<th>Show Card ( )</th>
<th>Look Up File ( )</th>
</tr>
</thead>
</table>

**Context Header:**  
{POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?]

**ENTER MONTH**

**Responses:**

<table>
<thead>
<tr>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>RF</td>
<td>DK</td>
</tr>
</tbody>
</table>

**Display Instructions:** Display question text in brackets and in lighter grayed out text.
Full Detail Spec

OE60_03 (OE1130) BLAISE NAME: CovgStartDD

Item Type: Question  Field kind: Datafield  ArrayMin:  Min value:
Type Class: Date  Field Size:  ArrayMax:  Max value:
Answer Type: (Continuous Answer.)  Answers allowed: 1

☐ Help Available ( )  ☐ Show Card ( )  ☐ Look Up File ( )

Context Header: {POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
[On what date since \{START DATE\} did the health insurance through \{INSURANCE SOURCE NAME\} begin for \{you/[PERSON]\}?

ENTER DAY

Responses: .................................................. 1 OE60_04 (OE1135)
REFUSED .............................................. RF OE60_04 (OE1135)
DON’T KNOW .......................................... DK OE60_04 (OE1135)

Display Instructions: Display question text in brackets and in lighter grayed out text.
Item Type: Question  
Type Class: Date  
Answer Type: (Continuous Answer.)  
Field Size: 
Field kind: Datafield  
ArrayMin:  
ArrayMax:  
Min value:  
Max value:  

Context Header:  

Question Text:

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?] 

ENTER YEAR

Responses:  

----------------------------------------------------  1
REFUSED  ------------------------------------------------ RF
DON'T KNOW  ----------------------------------------- DK
If OE60_03 (day) is coded ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) and OE60_02 (month) is NOT coded ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW), continue with OE60_05. Otherwise, return to OE60_01 for next person on grid.

Hard checks:
1. Complete date entered at OE60_02-OE60_04 must not be prior to the current round’s RU level reference period start date. If full date is prior to start date, display the following message: “IF COVERAGE BEGAN PRIOR TO {REF PERIOD START DATE}, BACK- UP TO OE60_01 (CovgStartDate) AND CORRECT RESPONSE.”

2. Complete date entered at OE60_02-OE60_04 must be on or before the person’s reference period end date. If not, display the following message: “COVERAGE FOR {PERSON} CANNOT BEGIN AFTER {PERSON'S END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT DATE ENTRIES OR BACK-UP TO OE50 (insert blaise name) AND CODE PERSON AS NOT COVERED.”

Soft Check:
Complete date entered at OE60_02-OE60_04 should be on or before the complete date entered at OE30_02-OE30_04 for the policyholder (if applicable). If not, display the following message: “UNLIKELY RESPONSE. POLICYHOLDER’S COVERAGE ENDED ON {OE30_02-OE30_04 DATE}. COVERAGE FOR {PERSON} BEGAN AFTER THAT DATE. VERIFY AND CORRECT DATE ENTRIES IF NECESSARY.”

Display Instructions: Display question text in brackets and in lighter grayed out text.
[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?] {Were/Was} {you/he/she} covered under that insurance the whole month or part of the month?

Responses:

- WHOLE MONTH ........................................ 1
- PART OF THE MONTH ................................ 2
- REFUSED ................................................. RF
- DON'T KNOW ............................................ DK

Context Header: {POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?] {Were/Was} {you/he/she} covered under that insurance the whole month or part of the month?

Responses:

- WHOLE MONTH ........................................ 1
- PART OF THE MONTH ................................ 2
- REFUSED ................................................. RF
- DON'T KNOW ............................................ DK

Programmer Instructions:

Return to OE60_01 for next person on grid.

Display Instructions:

Display first paragraph of question text in brackets and in lighter grayed out text.
Placeholder for MHOP specifications. This will be deleted once those specifications are available. (Data delivery needs to review to make sure these are the correct settings.)

Determine ‘CONTINUOUS COVERAGE’ (decide what is needed for CAPI vs. MHOP).

- If OE20 is coded ‘1’ (YES), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) for the policyholder, flag all persons where OE50 is coded ‘1’ (YES) as ‘CONTINUOUS COVERAGE’ from the date entered at OE60_02-OE60_04 until the RU level reference period end date (interview date).
- If OE20 is coded ‘2’ (NO) for the policyholder, flag all persons where OE50 is coded ‘1’ (YES), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) as ‘CONTINUOUS COVERAGE’ from the date entered at OE60_02-OE60_04 until the date entered at OE30_02-OE30_04 for the policyholder.
- If OE20 was not asked for the policyholder, use the OE20 value for the oldest PID with coverage to determine continuous coverage settings.

If:

- At least one current RU member is coded as still covered today or newly covered [(OE20_01 is coded ‘1’ (YES), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) for at least one RU member) or (OE50_01 is coded ‘1’ (YES) for at least one RU member)]
  and
- the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job
[(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) in the current round)],
go to OE70.

If:

- No current RU member is coded as still covered today and no one is newly covered [(OE20_01 is coded ‘2’ (NO) for all RU members listed) and (OE50_01 is coded ‘2’ (NO), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) for all RU members listed)]
  and
- the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job
[(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) in the current round)], go to OE80.

Otherwise, go to BOX_90.
### OE70

**BLAISE NAME:** OECOBRAPlan  
**Item Type:** Question  
**Type Class:** Enumerated  
**Answer Type:** TYESNO

<table>
<thead>
<tr>
<th>Responses</th>
<th>Field Size</th>
<th>Min value</th>
<th>ArrayMin</th>
<th>Field kind</th>
<th>ArrayMax</th>
<th>Datafield</th>
<th>Answers allowed</th>
<th>Max value</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>1</td>
<td>BOX_90</td>
<td>Datafield</td>
<td></td>
<td></td>
<td>(OE1150)</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
<td>RF</td>
<td>BOX_90</td>
<td>Datafield</td>
<td></td>
<td></td>
<td>(OE1150)</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>BOX_90</td>
<td>(OE1150)</td>
<td></td>
<td></td>
<td></td>
<td>(OE1150)</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>BOX_90</td>
<td>(OE1150)</td>
<td></td>
<td></td>
<td></td>
<td>(OE1150)</td>
<td></td>
</tr>
</tbody>
</table>

**Display Instructions:**  
Roster 1-Report no add/edit/delete allowed.

Roster Definition: Display the covered person’s name (Person.FullName).

Roster Filter:
Person or policyholder is on the covered person array and is currently covered by the insurance being looped on. 
- For the display of person names in the first paragraph: (PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...), display the list of RU members according to the above roster filter specifications. Display full name. Substitute “you” for the person’s first name if the respondent is included in this list. If exactly two names displayed, separate names with the word “and” and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word “and”.

HELP: F1
Did the health insurance {you/{POLICYHOLDER}} had through {INSURANCE SOURCE NAME} continue for any period of time after {you/he/she} stopped working at {INSURANCE SOURCE}?  

Responses:

- **YES** .................. 1 OE90 (OE1149)
- **NO** .......................... 2 OE90 (OE1149)
- **REFUSED** ................ RF OE90 (OE1149)
- **DON'T KNOW** ............... DK OE90 (OE1149)
Did that health insurance continue through COBRA?

HELP: F1

Responses:

- YES .................................................. 1 BOX_90 (OE1150)
- NO ...................................................... 2 BOX_90 (OE1150)
- REFUSED ............................................ RF BOX_90 (OE1150)
- DON'T KNOW ....................................... DK BOX_90 (OE1150)

Route Details:

If [policyholder is part of RU and at least one other current RU member is listed as a covered person with coverage during the reference period (Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and at least one other RU member is on the covered person array where OE20_01 is coded ‘1’ (YES), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) or OE50_01 is coded ‘1’ (YES))] or [(if policyholder not part of the RU) and (at least one current RU member is listed as a covered person with coverage during the reference period) (Insurance.Plcyhldr=901 or 902 or PersID where Person.MostRecentRUID<>RUID and at least one other RU member is on the covered person array where OE20_01 is coded ‘1’ (YES), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) or OE50_01 is coded ‘1’ (YES))], go to BOX_100.

Otherwise, continue with OE100.
**Question Text:**

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

HELP: F1

**Responses:**

YES .............................. 1 BOX_100 (OE1160)
NO .................................. 2 BOX_100 (OE1160)
REFUSED ............................ RF BOX_100 (OE1160)
DON'T KNOW ...................... DK BOX_100 (OE1160)

**Programmer Instructions:**

If coded ‘1’ (YES), set Insurance.CovPersOutRU=Yes.

**Display Instructions:**

Display ‘does’ if not round 5. Display ‘between {START DATE} and {END DATE}, did’ if round 5.

**Route Details:**

If [one or more current RU members are still covered by this insurance on the current round’s interview date, that is, at least one person at OE20_01 is coded ‘1’ (YES), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) or at least one person at OE50_01 is coded ‘1’ (YES) (At least one RU member is on the covered person array where OE20_01 is coded ‘1’ (YES), ‘RF’ (REFUSED) or ‘DK’ (DON’T KNOW) or OE50_01 is coded ‘1’ (YES))] and [insurance is not treated as ‘Dependent(s) Separated from Policyholder’(i.e., original RU member policyholder is still part of this RU)], continue with OE110.

Otherwise, go to END_LP10.
Old Emp/Priv Related Ins (OE) Section

Full Detail Spec

OE110 (OE1165)  BLAISE NAME: PlanNameChange

Item Type: Question  Field kind: Datafield  ArrayMin:  Min value:
Type Class: Enumerated  Field Size:
Answer Type: TYESNO  Answers allowed: 1  ArrayMax:  Max value:

☐ Help Available ( )  ☐ Show Card ( )  ☐ Look Up File ( )

Context Header: {POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
{Last time we recorded that {you/{POLICYHOLDER}} {were/was} covered by
{PRELOAD.INSURANCE.INSURER}.}

{Since {START DATE}, has there been/Between {START DATE} and {END DATE}, was there} any change in the plan
name of the health insurance {you/{POLICYHOLDER}} {{have/has}/had} through
{PRELOAD.INSURANCE.HISRCNAME}?

Responses:  YES ...................................................... 1
NO .............................................................. 2
REFUSED ..................................................... RF
DON'T KNOW ................................................. DK

Help Available ( )  Show Card ( )  Look Up File ( )
If coded ‘1’ (YES) and insurance is an ‘INSURANCE CO.’, ‘INSURANCE CO. – FROM AGENT’, OR ‘HMO’ (Insurance.DirectPurchTp=Agent, Insurance Co, HMO), continue with OE120. Else, if coded ‘1’ (YES), go to OE130.

If coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) and Round 3 and OE40 is coded ‘1’ (YES), go to BOX_150. Else, if coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW), go to BOX_160.

Note: If coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW), the Insurance Source Name and the Insurer Name stay the same as the preloaded values.

Display first paragraph if there is a value for PRELOAD.INSURANCE.INSURER (Preload.Insurance.Insurer <> EMPTY, RF or DK]. Otherwise, use a null display.

For ‘PRELOAD.INSURANCE.INSURER’, display the name of this insurance’s previous round’s insurer. That is, display the name of the plan (providing Medicare Supplement/Medigap benefits or hospital/physician benefits) entered at HX630, HX640, or OE140 in the previous round (Preload.Insurance.Insurer).

For ‘PRELOAD.INSURANCE.HISRCNAME’, display the name of this insurance’s previous round’s insurance source name (Preload.Insurance.HISrcName).

Display ‘Since {START DATE}, has there been’ and ‘{have/has}’ if not round 5. Display ‘Between {START DATE} and {END DATE}, was there’ and ‘had’ if round 5.
What is the new plan name of {your/{POLICYHOLDER}'s} health insurance through {PRELOAD.INSURANCE.HISRCNAME}?

Responses:

- REFUSED .............................. RF OE130 (OE1175)
- DON’T KNOW ............................ DK OE130 (OE1175)

Programmer Instructions:

Write correction to the insurance source name. [Set Insurance.HISrcName to OE120 entry]

Note: If a source of insurance was directly purchased from HMO, insurance company, or from an insurance agent, the insurance source name is the same as the insurer name. Therefore, any change in plan name automatically dictates a change in the insurance source name and insurer name (which is automatically recorded at OE140 via BOX_110).

Display Instructions:

For ‘PRELOAD.INSURANCE.HISRCNAME’, display the name of this insurance’s previous round’s insurance source name (Preload.Insurance.HISrcName).
Looking at card HX-7, what type of health insurance coverage {{do/does}/did} {you/{POLICYHOLDER}} {now} have through {INSURANCE SOURCE NAME}’s new plan {as of {END DATE}}?

PROBE: Any other health coverage through this plan?

ENTER ALL THAT APPLY.

**Responses:**

- HOSPITAL AND PHYSICIAN BENEFITS, INCLUDING COVERAGE THROUGH AN HMO
- DENTAL
- PRESCRIPTION DRUGS
- VISION
- MEDICARE SUPPLEMENT/MEDIGAP
- LONG TERM CARE IN A NURSING HOME
- EXTRA CASH FOR HOSPITAL STAYS
- SERIOUS DISEASE OR DREAD DISEASE
- DISABILITY
- WORKER’S COMPENSATION
- ACCIDENT
- OTHER

**BLAISE NAME:** CodeAllOEHIICovg

**Context Header:** {POLICYHOLDER’S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}
If coded '91' (OTHER), alone or in combination with any other codes, continue with OE130OS.

Otherwise, go to BOX_110.

For specifications purposes only: CAPI does not allow 'RF' (REFUSED) or 'DK' (DON'T KNOW) in combination with any other code.

If '1' (HOSPITAL AND PHYSICIAN BENEFITS, INCLUDING COVERAGE THROUGH AN HMO) is one of the selections and '5' (MEDIGAP) is not one of the selections, set Insurance.HospHI=Yes and set Insurance.MedigapHI=EMPTY.

If '5' (MEDIGAP) is one of the selections, set Insurance.MedigapHI=Yes and set Insurance.HospHI=EMPTY.

If 'DK' (DON'T KNOW) or 'RF' (REFUSED), set both Insurance.HospHI and Insurance.MedigapHI to EMPTY.

Display ‘{do/does}’ if not round 5. Display ‘did’ if round 5.

Display ‘now’ if not round 5 and if insurance is still current for at least one RU member (OE20 is coded ‘1’ (YES), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW) or OE50_01 is coded ‘1’ (YES) for at least one RU member). Otherwise, use a null display.

Display 'as of {END DATE}’ if round 5. Otherwise, use a null display.

Display OE130 and OE130OS on the same form pane.
<table>
<thead>
<tr>
<th>OE130OS</th>
<th>(OE1180)</th>
<th>BLAISE NAME: OEHICovgOS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Type:</td>
<td>Question</td>
<td>Field kind: Datafield</td>
</tr>
<tr>
<td>Type Class:</td>
<td>String</td>
<td>Field Size: 25</td>
</tr>
<tr>
<td>Answer Type:</td>
<td>{Continuous Answer.}</td>
<td>Answers allowed: 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BOX_110</th>
<th>(OE1190)</th>
<th>Help Available ( )</th>
<th>Show Card ( )</th>
<th>Look Up File ( )</th>
</tr>
</thead>
</table>

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text: SPECIFY:

Responses:

<table>
<thead>
<tr>
<th>BOX_110</th>
<th>(OE1190)</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td>RF BOX_110 (OE1190)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK BOX_110 (OE1190)</td>
</tr>
</tbody>
</table>

Display Instructions: Display OE130 and OE130OS on the same form pane.

<table>
<thead>
<tr>
<th>BOX_110</th>
<th>(OE1190)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

Route Details:

If insurance is an ‘INSURANCE CO.’, ‘INSURANCE CO. – FROM AGENT’, OR ‘HMO’ (Insurance.DirectPurchTp=Agent, Insurance Co, HMO), automatically code OE140 with response entered at OE120 [Set Insurance.HISrcName=Insurance.Insurer], and go to BOX_140.

Otherwise, continue with BOX_120.
If OE130 is coded ‘1’ (HOSPITAL AND PHYSICIAN BENEFITS) or ‘5’ (MEDICARE SUPPLEMENT/MEDIGAP), alone or with any other combination of codes (Insurance.MedigapHI=Yes or Insurance.HospHI=Yes), continue with OE140.

Otherwise, go to BOX_140.

If insurance is not ‘INSURANCE CO.’, ‘INSURANCE CO. – FROM AGENT’, OR ‘HMO’ (Insurance.DirectPurchTp<>Agent, Insurance Co, HMO) and if OE130 is not coded ‘1’ (HOSPITAL AND PHYSICIAN BENEFITS) or ‘5’ (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.MedigapHI<>Yes and Insurance.HospHI<>Yes), there is no longer an insurer associated with this insurance because the pair no longer provides either hospital and physician benefits or Medigap benefits [set Insurance.Insurer=Empty].

Note (To verify with data delivery): This instruction is not currently at OE130 because if the insurance is from an agent, an insurance company, or HMO, the insurer name is automatically set regardless of the coverage provided.

What is the new plan name for {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME} which provides the {hospital and physician benefits/Medicare Supplement or Medigap benefits}? IF MORE THAN ONE NAME, PROBE: What is the main new plan name?

ENTER NAME OF MAIN INSURER THAT PROVIDES THE {HOSPITAL AND PHYSICIAN/MEDIGAP} BENEFITS.

Responses:

REFERENCE: BOX_130 (OE1205)
DON'T KNOW: BOX_130 (OE1205)
Display Instructions: Display 'hospital and physician benefits' and 'HOSPITAL AND PHYSICIAN' if OE130 is coded ‘1’ (HOSPITAL AND PHYSICIAN BENEFITS), but not coded ‘5’ (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Display 'Medicare Supplement or Medigap benefits' and 'MEDIGAP' if OE130 is coded ‘5’ (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.MedigapHI=Yes).

<table>
<thead>
<tr>
<th>BOX_130</th>
<th>(OE1205)</th>
<th>Item Type:</th>
<th>Route</th>
<th>Type Class:</th>
<th>If Then</th>
</tr>
</thead>
</table>

Route Details: Ask the Managed Care (MC) section for this insurer (Insurance.Insurer).

At completion of Managed Care (MC) section, continue with BOX_140.
Route Details: **Small business determination**

If insurance being asked about meets the following conditions:

- Insurance is associated with an employer from the Employment (EM) section that provides health insurance (Insurance.HISrc=Employer), and
- Job is a 'CURRENT-MAIN-JOB' (Jobs.JobTp=CURRENT MAIN), and
- Job is 'SELF-EMPLOYED' (Jobs.SELFEMP=SelfEmpl), and
- EM740 (total employees) or RJ110 (total employees) is greater than 1 but <= 200 (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or 101-200),

continue with OE150

**Small business determination**

If insurance being asked about meets the following conditions:

- Insurance is associated with an employer from the Employment (EM) section that provides health insurance (Insurance.HISrc=Employer), and
- Job is a 'CURRENT-MAIN-JOB' (Jobs.JobTp=CURRENT MAIN), and
- Job is 'NOT SELF-EMPLOYED' (Jobs.SELFEMP<>SelfEmpl), and
- Firm size is small (see determination below), and
  - EM430 (firm size) is greater than 1 but <= 200 (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or 101-200), or
  - EM440 (firm size category) is coded '2' (2 TO 9), '3' (10 TO 25), '4' (26 TO 50), '5' (51 TO 100), or '6' (101 TO 200) (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or 101-200)
- EM450 (multiple locations) is coded '2' (NO) (MORELOCTN=No),

continue with OE150.

Otherwise, go to BOX_150.
Full Detail Spec

[Full Detail Spec]

Old Empl\Priv Related Ins (OE) Section

OE150 (OE1215) BLAISE NAME: OEstSHOP

Item Type: Question Field kind: Datafield ArrayMin: Min value:

Type Class: Enumerated Field Size:

Answer Type: TYESNO Answers allowed: 1 ArrayMax: Max value:

☐ Help Available ( ) ☐ Show Card ( ) ☐ Look Up File ( )

Context Header: {POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

In {RU STATE}, {STATE SHOP NAME-A} {, [which may also be known as {ALIAS B} {or {ALIAS C}}],} is a program where small businesses will be able to shop for health insurance plans for their employees. Is {your/{POLICYHOLDER}'s} health insurance coverage through {INSURANCE SOURCE NAME} related at all to a program like that?

Responses: YES ......................................................... 1 BOX_150 (OE1220)

NO .............................................................. 2 BOX_150 (OE1220)

REFUSED ..................................................... RF BOX_150 (OE1220)

DON'T KNOW ................................................ DK BOX_150 (OE1220)

Display Instructions:

For ‘RU STATE’, display the full state name associated with this RU’s address.

Display ‘, [which may also be known as {ALIAS B} {or {ALIAS C}}],’ if there is more than one shop name associated with the state in which interview is being conducted.

Display ‘or {ALIAS C}’ if there are three shop names associated with the state in which interview is being conducted.

For ‘STATE SHOP NAME-A’ 'ALIAS B', and 'ALIAS C', display the small business health options program name associated with the state in which interview is being conducted.
Continue with OE160 if the insurance meets the following conditions:

- If HP50 was coded ‘1’ (YES, PLAN IS EXCHANGE) the round this insurance was created or if this insurance set to ‘EXCHANGE COVERAGE’ (Insurance.DirectPurchTp=Exchange) the round it was created or if insurance is exchange insurance through a SE, FS=1 job (Insurance.HISrc=Employer and HP40=8) the round it was created; Preload.Insurance.HP40AnsRndCreated or if insurance was made exchange in Round 3 (OE40 was coded ‘1’ (YES)) during the current round or in a previous round (current OE40 value or if OE40=EMPTY, check Preload.Insurance.OE40AnsRnd3)

And

- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.]

And

- Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is “Policyholder deceased or “Policyholder outside the DU” (Insurance.Plcyhldr=901 or 902).

Otherwise, go to BOX_160.
Is {your/{POLICYHOLDER}'s} {INSURANCE.INSURER} plan a platinum, gold, silver, bronze, or catastrophic plan?

Responses:
- PLATINUM PLAN .................. 1 BOX_160 (OE1230)
- GOLD PLAN ....................... 2 BOX_160 (OE1230)
- SILVER PLAN ..................... 3 BOX_160 (OE1230)
- BRONZE PLAN .................... 4 BOX_160 (OE1230)
- CATASTROPHIC PLAN .............. 5 BOX_160 (OE1230)
- IF VOLUNTEERED: SOMETHING ELSE ....... 6 BOX_160 (OE1230)
- REFUSED .......................... RF BOX_160 (OE1230)
- DON'T KNOW ........................ DK BOX_160 (OE1230)

Display Instructions:
For ‘INSURANCE.INSURER’ display the name of the plan’s current round insurer if it has an entry other than ‘RF’ or ‘DK’ or EMPTY (Insurance.Insurer<>RF, DK or EMPTY). Otherwise, use a null display.

Note: This may be the text entry made or auto-coded at OE140 if OE110 was coded ‘1’ (YES) or it may be the name of the insurer from the preload that was set as the current round insurer if OE110 was coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW).

Route Details:
If round 2 or round 4, continue with BOX_170.

If round 3, go to OE170.

Otherwise (if Round 5), go to END_LP10
Note: You only are routed to BOX_170 in Rounds 2 and 4. This box specifies a “likely exchange” check. BOX_180 is a similar check made in Round 3.

Continue with OE170 if this insurance meets the following conditions:

- [Is a ‘PROFESSIONAL ASSOCIATION’ (HP40=1), ‘GROUP’ (HX200 or HX300=1 or HP40=2) or ‘INSURANCE COMPANY- FROM AN AGENT’ (HX200 or HX300=3 or HP40=4) or ‘INSURANCE COMPANY’ (HX200 or HX300=4 or HP40=5) or ‘HMO’ (HX200 or HX300=5 or HP40=6) or ‘EXCHANGE COVERAGE’ (HX200 or HX300=11 or HP40=8) or ‘UNKNOWN TYPE- COLLECTED AT OTHER’ (HX200 or HX300=91 or HP40=91) in the round the pair was first created [(Insurance.DirectPurchTp=Group, Agent, Insurance Co, HMO, Exchange, Other) or (Insurance.HISrc=Employer and HP40=1, 2, 4, 5, 6, 8, or 91) the round it was created; Preload.Insurance.HP40AnsRndCreated] And
- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.] And
- Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is “Policyholder deceased or “Policyholder outside the DU” (Insurance.Pclyhldr=901 or 902). Otherwise, go to END_LP10.
For the coverage through {INSURANCE SOURCE NAME}, does anyone in the family pay all of the premium or cost, some of the premium or cost, or none of the premium or cost?

[Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay.]

[Do include any contribution made to the plan as part of a paycheck.]

**Responses:**

- YES, PAY ALL OF PREMIUM/COST  .............  1
- YES, PAY SOME OF PREMIUM/COST  ............  2
- YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST  3
- NO, DO NOT PAY ..................................  4 BOX_190  (OE1280)
- REFUSED ............................................. RF BOX_190  (OE1280)
- DON'T KNOW ........................................... DK BOX_190  (OE1280)

**Programmer Instructions:**

If coded ‘1’ (YES, PAY SOME OF PREMIUM/COST), ‘2’ (YES, PAY SOME OF PREMIUM/COST) or ‘3’ (YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST) and Round 3, continue with OE180.

If coded ‘1’ (YES, PAY SOME OF PREMIUM/COST), ‘2’ (YES, PAY SOME OF PREMIUM/COST) or ‘3’ (YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST) and Rounds 2 or 4, go to OE200.
How much do you pay for the {INSURANCE SOURCE NAME} coverage?

ENTER AMOUNT

<table>
<thead>
<tr>
<th>Responses</th>
<th>Answers allowed</th>
<th>ArrayMax</th>
<th>ArrayMin</th>
<th>Field Size</th>
<th>Field kind</th>
<th>Min value</th>
<th>Max value</th>
<th>Type Class</th>
<th>Item Type</th>
<th>Answer Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td>1</td>
<td>OE190</td>
<td>(OE1260)</td>
<td>9.2</td>
<td>Datafield</td>
<td>0</td>
<td>999999.99</td>
<td>Real</td>
<td>Real</td>
<td>(Continuous Answer.)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>1</td>
<td>OE190</td>
<td>(OE1270)</td>
<td>9.2</td>
<td>Datafield</td>
<td>0</td>
<td>999999.99</td>
<td>Real</td>
<td>Real</td>
<td>(Continuous Answer.)</td>
</tr>
</tbody>
</table>

Display OE180, OE190, and OE190OS on the same form pane.

Allow for an entry of dollars and cents.
Display OE180, OE190 and OE190OS on the same form pane.
SPECIFY: UNIT OF COVERAGE

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
SPECIFY: UNIT OF COVERAGE

Responses:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Help Available</td>
<td></td>
<td>Show Card</td>
<td>Look Up File</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>BOX_180</td>
<td>(OE1270)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>BOX_180</td>
<td>(OE1270)</td>
</tr>
</tbody>
</table>

Display Instructions: Display OE180, OE190 and OE190OS on the same form pane.
Note: You only are routed to BOX_180 in Round 3. This box specifies a “likely exchange” check. BOX_170 is a similar check made in Rounds 2 and 4.

Continue with OE200 if this insurance meets the following conditions:

- [Is a 'PROFESSIONAL ASSOCIATION' (HP40=1), ‘GROUP’ (HX200 or HX300=1 or HP40=2) or ‘INSURANCE COMPANY- FROM AN AGENT’ (HX200 or HX300=3 or HP40=4) or ‘INSURANCE COMPANY’ (HX200 or HX300=4 or HP40=5) or ‘HMO’ (HX200 or HX300=5 or HP40=6) or ‘EXCHANGE COVERAGE’ (HX200 or HX300=11 or HP40=8) or ‘UNKNOWN TYPE- COLLECTED AT OTHER’ (HX200 or HX300=91 or HP40=91) in the round the pair was first created] [(Insurance.DirectPurchTp=Group, Agent, Insurance Co, HMO, Exchange, Other) or (Insurance.HISrc=Employer and HP40=1, 2, 4, 5, 6, 8, or 91) the round it was created; Preload.Insurance.HP40AnsRndCreated] And

- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.]

And

- Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is “Policyholder deceased or “Policyholder outside the DU” (Insurance.Plycdhldr=901 or 902).

Otherwise, go to BOX_190.

<table>
<thead>
<tr>
<th>OE200</th>
<th>(OE1275)</th>
<th>BLAISE NAME: OEPremSubsdz</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Type:</td>
<td>Question</td>
<td>Field kind: Datafield</td>
</tr>
<tr>
<td>Type Class:</td>
<td>Enumerated</td>
<td>ArrayMin: Min value:</td>
</tr>
<tr>
<td>Answer Type:</td>
<td>TYESNO</td>
<td>Field Size:</td>
</tr>
<tr>
<td></td>
<td>Answers allowed: 1</td>
<td>ArrayMax: Max value:</td>
</tr>
</tbody>
</table>

☐ Help Available (    ) ☐ Show Card (    ) ☐ Look Up File (    )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:
Is the cost of the premium subsidized based on family income?

Responses:
YES ................................. 1 BOX_190 (OE1280)
NO ................................. 2 BOX_190 (OE1280)
REFUSED .............................. RF BOX_190 (OE1280)
DON’T KNOW .......................... DK BOX_190 (OE1280)
<table>
<thead>
<tr>
<th>BOX_190</th>
<th>(OE1280)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
<tbody>
<tr>
<td>Route Details:</td>
<td>If round 3, continue with BOX_200. Otherwise, go to END_LP10.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BOX_200</th>
<th>(OE1285)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
<tbody>
<tr>
<td>Route Details:</td>
<td>If insurance being asked about provides Medicare supplement/Medigap coverage [(Insurance.MedigapHI=Yes) use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier], go to END_LP10. Otherwise, continue with OE210.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Is the {family} annual deductible for medical care for this plan less than $1,350/$2,700, or is it $1,350/$2,700 or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

HELP:F1

Responses:

- LESS THAN $1,350/$2,700
- $1,350/$2,700 OR MORE
- NO ANNUAL DEDUCTIBLE
- REFUSED
- DON'T KNOW

Display Instructions:

Use a null display for ‘family’ and display ‘$1,350’ in the question text and ‘$1,350’ in the response category options if insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Pclyhldr = only PersID in covered person array)
  OR
  - The policyholder is deceased and there is exactly one covered person (Insurance.Pclyhldr= 901 and only one PersID in covered person array)]

AND

- Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<>Yes).

Otherwise, display ‘family’ and ‘$2,700’ in the question text and ‘$2,700’ in the response category options.
With this plan, is there a special account or fund that can be used to pay for medical expenses? The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal Care Accounts, Personal Medical funds, or Choice funds, and are different from Flexible Spending Accounts.

HELP: F1

Responses:

YES  ------------------------------  1 END_LP10  (OE1300)
NO   ------------------------------  2 END_LP10  (OE1300)
REFUSED  --------------------------  RF END_LP10  (OE1300)
DON'T KNOW ------------------------  DK END_LP10  (OE1300)

Display Instructions:

ROUTE DETAILS:
Cycle on next insurance that meets the conditions stated in the loop definition.
If no other insurance meet the stated conditions, end LOOP_10 and continue with BOX_210.
MHOP will need to set a flag on the Covered Person Array to determine if an RU member is considered covered for the following round. This flag will be called LRndCovd and will be used in the OE and PR sections to determine whether coverage is asked about for each eligible RU member. This setting will need to be made prior to rounds 2-5. The value of the Flag will be the current round. If the RU member was considered covered in Round 1, for review in Round 2, the flag will be set to ‘1’. If the RU member was considered covered in Round 2, for review in Round 3, the flag will be set to ‘2’, etc.

1. **Private Insurance** [Insurance.HIPubPriv=Private, OrigRnd=current round] – Settings for private insurance that was created in the current round is included in the HQ section. To be eligible to be reviewed for private coverage, the RU member must have been covered on the interview date of the previous round.

Set CovdPers.LRndCovd = <current round> for this RU member for this insurance if:

- OE20_01 = ‘1’ (YES)
- OE50_01 = ‘1’ (YES) and OE20_01 = ‘1’ (YES) for the policyholder (if the policyholder was current RU member and asked OE20_01). If OE20 was not asked for the policyholder, use the OE20 value for the oldest PID with coverage to determine whether the newly covered RU member should be considered as covered on the interview date of the previous round.

[End of OE]