### Route Details:

<table>
<thead>
<tr>
<th>Route Details:</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

- 01 Box= BOX_00, BOX_10, BOX_20, 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, BOX_220, BOX_230, BOX_240

- 02 Loop= LOOP_10

- 03 End Loop= END_LP10

- 05- Single select with Display Roster= PR10, PR30, PR40, PR50, PR70, PR80, PR90, PR100, PR110, PR130, PR140, PR150_01, PR160_01, PR170, PR180, PR190, PR210, PR240, PR250, PR260_01, PR270_01, PR290_01, PR300_01, PR310_01, PR320_01, PR330, PR340, PR350, PR370, PR400, PR410, PR420

- 09 -Multi select with Display Roster = PR280_01, PR380

- 10 Multiple Select with Fill in Answer Text= PR220

- 17 Dollar Items Allowing Cents= PR60, PR120, PR230, PR390

- 20 OS Text Field= PR70OS, PR130OS, PR240OS, PR400OS

- 23 Text Field= PR20, PR200, PR360
Route Details:  
Context header display instructions:  
Display Person.FullName, Insurance.HISrcName

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 1-4 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 PR170, PR210, PR230, PR240, PR240OS, PR250, PR330, PR370, PR390, PR400, PR400OS, PR410, PR420.

Route Details:  
If at least one person was covered by Medicare during the previous round (Insurance.HISrc=Medicare and Insurance.OrigRnd<>Current round), continue with LOOP_10.
Otherwise, go to BOX_30.
For each insurance, ask PR10-END_LP10.

Loop definition: LOOP_10 collects information about the coverage provided through Medicare. This loop cycles on insurance that meets both of the following conditions:

- Establishment is Medicare (Insurance.HISrc=Medicare) and
- Person was covered by Medicare at anytime during the previous round (Insurance.OrigRnd<>Current round).

PR10 (PR1025) **BLAISE NAME:** MAMCPlan

<table>
<thead>
<tr>
<th>Item Type:</th>
<th>Field kind:</th>
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<th>Min value:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Question</td>
<td>Datafield</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Type Class: Enumerated

Answer Type: TYESNO

Responses:

<table>
<thead>
<tr>
<th>Response</th>
<th>Answer Type</th>
<th>ArrayMin</th>
<th>PR - Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>TF</td>
<td>1</td>
<td>PR20</td>
</tr>
<tr>
<td>NO</td>
<td>TF</td>
<td>2</td>
<td>PR90</td>
</tr>
<tr>
<td>REFUSED</td>
<td>TF</td>
<td>RF</td>
<td>PR90</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>TF</td>
<td>DK</td>
<td>PR90</td>
</tr>
</tbody>
</table>

HELP: F1
Display Instructions: Display ‘{Are/Is} {you/{PERSON}} currently’ if not round 5. Display ‘As of {PERSON’S END DATE}, {were/was} {you/{PERSON}}’ if round 5.

<table>
<thead>
<tr>
<th>Item Type:</th>
<th>Question</th>
<th>Field kind:</th>
<th>Datafield</th>
<th>Min value:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type Class:</td>
<td>String</td>
<td>Field Size:</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>Answer Type:</td>
<td>(Continuous Answer.)</td>
<td>Answers allowed:</td>
<td>1</td>
<td>ArrayMax:</td>
</tr>
</tbody>
</table>

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

Context Header: {PERSON’S FIRST MIDDLE AND LAST NAME}

Question Text:
What {is/was} the name of {your/{PERSON}’s} Medicare managed care plan {as of {PERSON’S END DATE}}?
ENTER PLAN NAME

Responses:

<table>
<thead>
<tr>
<th>Responses</th>
<th>1 PR30</th>
<th>(PR1035)</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td>RF PR30</td>
<td>(PR1035)</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>DK PR30</td>
<td>(PR1035)</td>
</tr>
</tbody>
</table>

Programmer Instructions:
Set Insurance.Insurer to PR20.

Display Instructions:
Display ‘is’ if not round 5. Display ‘was’ if round 5.
Display ‘as of {PERSON’S END DATE}’ if round 5. Otherwise, use a null display.
Questions:

{{Do/Does}/Did} {you/{PERSON}} have prescribed medicine coverage through {{NAME OF PLAN FROM PR20}/(your/his/her) Medicare managed care plan} {as of {PERSON’S END DATE}}?

Responses:

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

Programmer Instructions:
If Round 3, continue with PR40.
Otherwise, go to END_LP10.

Display Instructions:
Display '{Do/Does}' if not round 5. Display 'Did' if round 5.
Display '{NAME OF PLAN FROM PR20}' if a plan name was entered at PR20. Display '{your/his/her} Medicare managed care plan' if PR20 is coded 'RF' (REFUSED) or 'DK' (DON’T KNOW).
Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
Display 'as of {PERSON’S END DATE}' if round 5. Otherwise, use a null display.
Most Medicare beneficiaries pay their Part B premiums through their Social Security checks. In addition, 
{do/does} (you/{PERSON}) (or anyone in the family) pay anything else for {the coverage with {NAME OF 
PLAN FROM PR20}/ this Medicare managed care plan}?

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

HELP: F1

Display Instructions:
Display ‘the coverage with {NAME OF PLAN FROM PR20}’ if a Medicare plan name 
entered at PR20. Display ‘this Medicare managed care plan’ if PR20 was coded ‘RF’ 
(REFUSED) or ‘DK’ (DON’T KNOW).
Display the actual plan name entered at PR20 for ‘NAME OF PLAN FROM PR20’ if a plan name was entered.
How {do/does} {you/{PERSON}} pay for {your/his/her} {{NAME OF PLAN FROM PR20}/Medicare managed care} premium?

IF NECESSARY, SAY: Is the Medicare Advantage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?

**Responses:**

- DEDUCTED FROM SOCIAL SECURITY  1  PR60  (PR1050)
- PAY DIRECTLY  2  PR60  (PR1050)
- BOTH  3  PR60  (PR1050)
- REFUSED  RF  END_LP10  (PR1105)
- DON'T KNOW  DK  END_LP10  (PR1105)

**Display Instructions:**

Display '{[NAME OF PLAN FROM PR20]}' if a Medicare plan name was entered at PR20. Display 'Medicare managed care' if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW).

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} {NAME OF PLAN FROM PR20} plan?

IF RESPONDENT IS NOT SURE, DO NOT PROBE. CODE 'DON'T KNOW'.

ENTER AMOUNT

Display 'is {your/{PERSON}'s} Social Security deduction' if PR50 is coded '1' (DEDUCTED FROM SOCIAL SECURITY'. Display {do/does} {you/{PERSON}} pay in premiums' if PR50 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
<table>
<thead>
<tr>
<th>Responses</th>
<th></th>
<th></th>
<th>END_LP10</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PER YEAR</td>
<td>1</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>EVERY 3 MONTHS (QUARTERLY)</td>
<td>2</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>EVERY 2 MONTHS (BIMONTHLY)</td>
<td>3</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>PER MONTH</td>
<td>4</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>PER WEEK</td>
<td>5</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>EVERY 2 WEEKS (BIWEEKLY)</td>
<td>6</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>2 TIMES PER YEAR (SEMI-ANNUALLY)</td>
<td>7</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>2 TIMES PER MONTH (SEMI-MONTHLY)</td>
<td>8</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>OTHER</td>
<td>91</td>
<td>PR70OS</td>
<td>(PR1060)</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>END_LP10</td>
<td>(PR1105)</td>
<td></td>
</tr>
</tbody>
</table>

Display Instructions:

Display PR60, PR70 and PR70OS on the same form pane.

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

Display 'is {your/{PERSON}’s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums' if PR50 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if PR50 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
Old Public Related Insurance (PR) Section

Full Detail Spec

PR70OS (PR1060) BLAISE NAME: MAMCCovgUnitOS

Item Type: Question  
Field kind: Datafield  
ArrayMin: Min value: 
Type Class: String  
Field Size: 25  
ArrayMax: Max value: 
Answer Type: (Continuous Answer.) Answers allowed: 1

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME}

Question Text:

[How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} {NAME OF PLAN FROM PR20} plan?]

SPECIFY: OTHER UNIT OF COVERAGE

Responses:

....................................................... 1 END_LP10 (PR1105)  
REFUSED .......................................... RF END_LP10 (PR1105)  
DON'T KNOW ...................................... DK END_LP10 (PR1105)

Display Instructions:

Display PR60, PR70 and PR70OS on the same form pane.

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

Display 'is {your/{PERSON}'s} Social Security deduction' if PR50 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if PR50 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
Which category on card HX-5 best indicates the cost of this plan per month?

Responses:

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1-$50</td>
<td>1</td>
<td>END_LP10</td>
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<tr>
<td>$51-$100</td>
<td>2</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$101-$200</td>
<td>3</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$201-$300</td>
<td>4</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$301 OR MORE</td>
<td>5</td>
<td>END_LP10</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>END_LP10</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>END_LP10</td>
</tr>
</tbody>
</table>

Display Instructions:
Display 'PLAN NAME: {NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.
Are/Is enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan as of {PERSON'S END DATE}?  

**Responses:**

- **YES** ................................................................. 1
- **NO** ................................................................. 2 END_LP10 (PR1105)
- **REFUSED** ....................................................... RF END_LP10 (PR1105)
- **DON'T KNOW** .................................................. DK END_LP10 (PR1105)

**Programmer Instructions:**  
If coded ‘1’ (YES) and Round 3, continue with PR100. Otherwise (if coded ‘1’ (YES) and rounds 2, 4, or 5), go to END_LP10.

**Display Instructions:**  
Display '{Are/Is}' if not round 5. Display '{Were/Was}' if round 5. Display 'as of {PERSON'S END DATE}' if round 5. Otherwise, use a null display.
Most Medicare beneficiaries pay their Part B premiums through their Social Security checks. In addition, {do/does} {you/{PERSON}} (or anyone in this household) pay anything else for {your/his/her} Medicare Prescription Drug Plan (also known as Part D)?

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

HELP: F1

<table>
<thead>
<tr>
<th>Responses</th>
<th>XXXXXXXXXXXXXXXXXXXXX</th>
<th>1</th>
<th>PR110</th>
<th>(PR1080)</th>
</tr>
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<tbody>
<tr>
<td>YES</td>
<td>----------------------\</td>
<td></td>
<td>END_LP10</td>
<td>(PR1105)</td>
</tr>
<tr>
<td>NO</td>
<td>----------------------\</td>
<td>2</td>
<td>END_LP10</td>
<td>(PR1105)</td>
</tr>
<tr>
<td>REFUSED</td>
<td>----------------------\</td>
<td>RF</td>
<td>END_LP10</td>
<td>(PR1105)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>----------------------\</td>
<td>DK</td>
<td>END_LP10</td>
<td>(PR1105)</td>
</tr>
</tbody>
</table>

Display
Instructions:
How {do/does} {you/{PERSON}} pay for {your/his/her} Part D premium?

IF NECESSARY, SAY: Is the Medicare drug coverage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?

Responses:
- DEDUCTED FROM SOCIAL SECURITY ........ 1 PR120 (PR1085)
- PAY DIRECTLY .............................. 2 PR120 (PR1085)
- BOTH ........................................ 3 PR120 (PR1085)
- REFUSED ................................. RF END_LP10 (PR1105)
- DON'T KNOW ............................ DK END_LP10 (PR1105)
How much is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums for {your/his/her} Part D plan?

IF RESPONDENT IS NOT SURE, DO NOT PROBE. CODE 'DON'T KNOW'.

ENTER AMOUNT

Responses:

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>PR140</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>PR140</td>
</tr>
</tbody>
</table>

Programmer Instructions:

Allow for the entry of dollars and cents.

Display Instructions:

Display PR120, PR130, PR130OS on the same form pane.

Display 'is {your/{PERSON}'s} Social Security deduction' if PR110 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if PR110 is coded '2' (PAY DIRECTLY) or '3' (BOTH).
[How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} Part D plan?]

Is that per year, per month, per week, or what?

**ENTER UNIT OF COVERAGE**

**Responses:**

- PER YEAR ........................................ 1 END_LP10 (PR1105)
- EVERY 3 MONTHS (QUARTERLY) .......... 2 END_LP10 (PR1105)
- EVERY 2 MONTHS (BIMONTHLY) .......... 3 END_LP10 (PR1105)
- PER MONTH ........................................ 4 END_LP10 (PR1105)
- PER WEEK ........................................ 5 END_LP10 (PR1105)
- EVERY 2 WEEKS (BIWEEKLY) .......... 6 END_LP10 (PR1105)
- 2 TIMES PER YEAR (SEMI-ANNUALLY) .... 7 END_LP10 (PR1105)
- 2 TIMES PER MONTH (SEMI-MONTHLY) .... 8 END_LP10 (PR1105)
- OTHER ........................................ 91 PR130OS (PR1105)
- REFUSED ........................................ RF END_LP10 (PR1105)
- DON'T KNOW ...................................... DK END_LP10 (PR1105)

**Display Instructions:**

Display PR120, PR130, PR130OS on the same form pane.

Display the “How much {is {your/{PERSON}'s} Social Security…” in brackets and grayed out text.

Display ‘is {your/{PERSON}'s} Social Security deduction' if PR110 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if PR110 is coded '2' (PAY DIRECTLY) or '3' (BOTH).
### Question Text:

[How much {is {your/{PERSON}’s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} Part D plan?]

**SPECIFY: OTHER UNIT OF COVERAGE**

### Responses:

<table>
<thead>
<tr>
<th>Response</th>
<th>Datafield</th>
<th>ArrayMin</th>
<th>ArrayMax</th>
<th>PR1105</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>END_LP10</td>
<td>RF</td>
<td>END_LP10</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>END_LP10</td>
<td>DK</td>
<td>END_LP10</td>
</tr>
</tbody>
</table>

### Display Instructions:

Display PR120, PR130, PR130OS on the same form pane.

Display the “How much {is {your/{PERSON}’s} Social Security…” in brackets and grayed out text.

Display ‘is {your/{PERSON}’s} Social Security deduction' if PR110 is coded ‘1’ (DEDUCTED FROM SOCIAL SECURITY). Display ‘{do/does} {you/{PERSON}} pay in premiums’ if PR110 is coded ‘2’ (PAY DIRECTLY) or ‘3’ (BOTH).
Which category on card HX-6 best indicates the cost of this plan per month?

Responses:

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
<th>Code</th>
<th>Min value</th>
<th>Max value</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1-$30</td>
<td>END_LP10</td>
<td>1</td>
<td>1</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$31-$60</td>
<td>END_LP10</td>
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<td>2</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$61-$90</td>
<td>END_LP10</td>
<td>3</td>
<td>3</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$91-$120</td>
<td>END_LP10</td>
<td>4</td>
<td>4</td>
<td>END_LP10</td>
</tr>
<tr>
<td>$121 OR MORE</td>
<td>END_LP10</td>
<td>5</td>
<td>5</td>
<td>END_LP10</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>END_LP10</td>
<td>RF</td>
<td>END_LP10</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>END_LP10</td>
<td>DK</td>
<td>END_LP10</td>
</tr>
</tbody>
</table>

Route Details:

Cycle on next insurance that meets the conditions stated in the loop definition.

If no other insurance meets the stated conditions, end LOOP_10 and continue with BOX_30.
If any RU member had Medicaid/SCHIP as a source of insurance at any time during the previous round (at least one RU member where Preload.Insurance.HISrc=Medicaid, Preload.Insurance.Pleyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd={previous round number} and Preload.Insurance.OrigRnd<>current round), continue with PR150_01.

Otherwise, go to BOX_90.

### BOX_30 (PR1110)

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

**Route Details:**

If any RU member had Medicaid/SCHIP as a source of insurance at any time during the previous round (at least one RU member where Preload.Insurance.HISrc=Medicaid, Preload.Insurance.Pleyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd={previous round number} and Preload.Insurance.OrigRnd<>current round), continue with PR150_01.

Otherwise, go to BOX_90.

### PR150_01 (PR1115)

**BLAISE NAME:** ConfCaid  
**Item Type:** Question  
**Field kind:** Datafield  
**ArrayMin:** Min value:  
**Field Size:**  
**Answer Type:** TYESNO  
**Answers allowed:** 1  
**ArrayMax:** Max value:  

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

**Help Available:** MEDICATHelp

**Question Text:**

During the last interview, we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N} {was/were} covered by {Medicaid/[STATE NAME FOR MEDICAID]} or {STATE CHIP NAME}.

{Have you/Has {PERSON 1}} been covered by {Medicaid/[STATE NAME FOR MEDICAID]} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE}}?

HELP: F1

**Responses:**

- YES  ......................................................  1
- NO  ......................................................  2
- REFUSED  ................................................ RF
- DON'T KNOW  ........................................... DK
Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were “COVERED BY MEDICAID/SCHIP” at any time during the previous round (RU members where Preload.Insurance.HISrc=Medicaid, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were “COVERED BY MEDICAID/SCHIP” at any time during the previous round. 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”.

Display ‘was’ if only one name is listed and that person is not the current respondent. Otherwise, display ‘were’.

Display ‘Medicaid’ if state in which interview is being conducted uses the name ‘Medicaid’. Display ‘STATE NAME FOR MEDICAID’ (substituting the state name for the program) if the state in which interview is being conducted does not use the name ‘Medicaid’. For the specific Medicaid program name by state to display, see the plan fill file.

Display ‘or STATE CHIP NAME’ under all conditions, substituting the real state name for program. For the specific name to use by state, see the plan fill file.

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

Display variable question text. Replace “{Have you/Has {PERSON 1}} been covered ... and {END DATE})?” with:

PR150_02: What about {PERSON 2}?
PR150_03: What about {PERSON 3}?
PR150_04: What about {PERSON N}? Has {he/she} been covered by {Medicaid/(STATE NAME FOR MEDICAID)} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE})?
PR150_N: Repeat question text PR150_02-PR150_N for as many RU members that fit the
roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR150_02 – PR150_N. Display in bold black and no brackets when on PR150_01. Display in bold black and no brackets when on PR150_01.

<table>
<thead>
<tr>
<th>BOX_40</th>
<th>(PR1120)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

**Route Details:**
If all current RU members are displayed at PR150_01-PR150_N, go to BOX_50.

Otherwise, continue with PR160_01.

<table>
<thead>
<tr>
<th>PR160_01</th>
<th>(PR1125)</th>
<th>BLAISE NAME: OthMmbCaid</th>
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</thead>
<tbody>
<tr>
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<tr>
<td>Type Class:</td>
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</tr>
<tr>
<td>Answer Type:</td>
<td>TYESNO</td>
<td>Answers allowed: 1 ArrayMax: Max value:</td>
</tr>
</tbody>
</table>

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

**Question Text:**
Besides the people we’ve just talked about, please think about whether any additional household members have been covered by {Medicaid/[STATE NAME FOR MEDICAID]} or {STATE CHIP NAME} at any time {since [START DATE]/between [START DATE] and [END DATE]}.

{Have you/Has [PERSON 1] been covered by {Medicaid/[STATE NAME FOR MEDICAID]} or {STATE CHIP NAME} at any time {since [START DATE]/between [START DATE] and [END DATE]}?}

HELP: F1

**Responses:**
YES .................................................. 1
NO .................................................. 2
REFUSED ........................................ RF
DON’T KNOW ..................................... DK
Old Public Related Insurance (PR) Section

Programmer Instructions:

Preloaded Grid type 1: Forced navigation including PR160_01, PR160_02, PR160_03, PR160_04, PR160_N.

After grid completion, continue with BOX_50.

For each person coded ‘1’ (YES), create insurance through Medicaid/SCHIP for this person
(set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicaid and
Insurance.HISrcName={Medicaid/{STATE NAME FOR MEDICAID}}/{STATE CHIP NAME} and Insurance.Plyhldr= PersID and CoverageFlagList.InsSrcN=YES for this
PersID) [set Create Q and OrigRnd]

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName).

Roster Filter:
Display only those RU members who were not covered by MEDICAID/SCHIP at any time
during the previous round (including newly added RU members), that is any RU member not
displayed at PR150_01.

Display ‘Medicaid’ if state in which interview is being conducted uses the name ‘Medicaid’.
Display ‘STATE NAME FOR MEDICAID’ (substituting the state name for the program) if the
state in which interview is being conducted does not use the name ‘Medicaid’. For the
specific Medicaid program name by state to display, see the plan fill file.

Display ‘or STATE CHIP NAME’ under all conditions, substituting the real state name for
program. For the specific name to use by state, see the plan fill file.

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

Display variable question text. Replace “{(Have you/Has {PERSON 1}) been covered ... and
{END DATE})?” with:

PR160_02: What about {PERSON 2}?
PR160_03: What about {PERSON 3}?
PR160_04: What about {PERSON N}? Has {he/she} been covered by {Medicaid/{STATE NAME
FOR MEDICAID}} or {STATE CHIP NAME} at any time {since {START DATE}/between {START
DATE} and {END DATE}}?
PR160_N: Repeat question text PR160_02-PR160_N for as many RU members that fit the
roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the
person’s first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR160_02 –
PR160_N. Display in bold black and no brackets when on PR160_01.
If at least one RU member is “COVERED BY MEDICAID/SCHIP” during the current round, that is, at least one RU member was coded as ‘1’ (YES) at PR150_01-PR150_N or PR160_01-PR160_N, continue with BOX_60.

Otherwise, go to BOX_90.

Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Medicaid/SCHIP in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:
-Insurance source is Medicaid/SCHIP [Insurance.HISrc=Medicaid] And
-Person is “COVERED BY MEDICAID/SCHIP” during the current round, that is, either PR150_01-PR150_N or PR160_01-PR160_N is coded ‘1’ (YES) for this person.

At completion of HQ section, continue with PR170.
Full Detail Spec

<table>
<thead>
<tr>
<th>PR170</th>
<th>(PR1140)</th>
<th><strong>BLAISE NAME:</strong> CaidNameChng</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item Type:</td>
<td>Question</td>
<td><strong>Field kind:</strong> Datafield</td>
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<tr>
<td>Type Class:</td>
<td>Enumerated</td>
<td><strong>Field Size:</strong></td>
</tr>
<tr>
<td>Answer Type:</td>
<td>TYESNO</td>
<td><strong>Answers allowed:</strong> 1</td>
</tr>
</tbody>
</table>

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

**Question Text:**

{Last time we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} may be covered by {PRELOAD MEDICAID/SCHIP INSURER}.

{Since {START DATE}/Between {START DATE} and {END DATE} has there been any change in the plan name of the health insurance {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} has/have through {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}?}

**Responses:**

| YES | .................................................. | 1 | PR180 | (PR1145) |
| NO | .................................................. | 2 | BOX_70 | (PR1160) |
| REFUSED | .................................................. | RF | BOX_70 | (PR1160) |
| DON'T KNOW | .................................................. | DK | BOX_70 | (PR1160) |
Display Instructions:

Roster 1-Report

Roster definition:
This item uses the insurance array to display RU-members. (Person.FullName)

Roster filter:
Display only those RU members who are “COVERED BY MEDICAID/SCHIP” during the current round, that is, either PR150_01-PR150_N or PR160_01-PR160_N is coded ‘1’ (YES) for this person.

Display first names only in the first sentence “Last time we recorded….”
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”.

Display RU members’ first, middle, and last names (Person.FullName) in the second sentence “{Since {START DATE}/Between {START DATE} and {END DATE}}….” Substitute “you” for the person’s name if the respondent is included in this list. See instructions above about when to use commas vs. “and” to separate names.

Display 'Last time... {PRELOAD MEDICAID/SCHIP INSURER }.' If there was an insurer associated with Medicaid/SCHIP in the previous round (Preload.Insurance.Insurer <> RF, DK or EMPTY). Otherwise, use a null display.

For 'PRELOAD MEDICAID/SCHIP INSURER', display the insurer recorded for Medicaid/SCHIP during the previous round (Preload.Insurance.Insurer).

Display 'Since {START DATE}' if not round 5.
Display 'Between {START DATE}' and {END DATE}' if round 5.

Display ‘has’ if only one name is listed and that person is not the current respondent.
Otherwise, display ‘have’.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'.
Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to display by state, see the plan fill file.
Under {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {{are/is}/was} {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} enrolled in an HMO, that is a Health Maintenance Organization {{between {START DATE} and {END DATE}}?}

[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]

HELP: F1

**Question Text:**

Under {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {{are/is}/was} {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} enrolled in an HMO, that is a Health Maintenance Organization {{between {START DATE} and {END DATE}}?}

[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]

HELP: F1

**Responses:**

<table>
<thead>
<tr>
<th>Responses</th>
<th>Code</th>
<th>PR</th>
<th>(PR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES, ALL ARE</td>
<td>...</td>
<td>1</td>
<td>PR200</td>
</tr>
<tr>
<td>YES, SOME ARE</td>
<td>...</td>
<td>2</td>
<td>PR200</td>
</tr>
<tr>
<td>NO, NONE ARE</td>
<td>...</td>
<td>3</td>
<td>PR190</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>PR190</td>
<td>(PR1150)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>PR190</td>
<td>(PR1150)</td>
</tr>
</tbody>
</table>
Display Instructions:

Roster 1 – Report Roster Definition:
Use PR170 definition.

Roster filter:
Use PR170 filter.

Display RU members' first, middle, and last names (Person.FullName) in the question text. Substitute “you” for the person’s 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”.

Display '{are/is}' if not round 5. Display '{were/was}' if round 5.

Display ‘is’ or ‘was’ if the list includes 1 person who is not the respondent. Otherwise, display ‘are’ or ‘were’.

Display ‘Medicaid’ if state in which interview is being conducted uses the name ‘Medicaid’.
Display ‘STATE NAME FOR MEDICAID’ (substituting the state name for the program) if the state in which interview is being conducted does not use the name ‘Medicaid’. For the specific Medicaid program name by state to display, see the plan fill file.

Display ‘or STATE CHIP NAME’ under all conditions, substituting the real state name for program. For the specific name to use by state, see the plan fill file.

Display 'between {START DATE} and {END DATE}' if round 5. Otherwise, use a null display.
Question Text:

{Does /Between {START DATE} and {END DATE}, did} {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} require {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} to sign up with a certain primary care doctor, group of doctors, or with a certain clinic which they must go to for all of their routine care?

PROBE: Do not include emergency care or care from a specialist they were referred to.

HELP: F1

Responses:

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>ArrayMax</th>
<th>Min value</th>
<th>Max value</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES, ALL REQUIRED</td>
<td>PR200</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
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<td>PR200</td>
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<td>2</td>
<td></td>
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<tr>
<td>NO, NONE REQUIRED</td>
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<td>3</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>BOX_70</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>BOX_70</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Note: If coded ‘3’ (NO, NONE REQUIRED), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW), there is no insurer associated with the current round for Medicaid/SCHIP.

Roster 1- Report
Roster definition:
Use PR170 definition.
Roster filter:
Use PR170 filter.
Display RU members’ first, middle, and last names (Person.FullName) in question text. Substitute “you” for the person’s 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”.
Display ‘Does’ if not round 5. Display ‘Between {START DATE} and {END DATE}, did’ if round 5.
Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.
Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to display by state, see the plan fill file.
MEPS_V2

Old Public Related Insurance (PR) Section

Full Detail Spec

**PR200**

**Item Type:** Question  
**Type Class:** String  
**Answer Type:** {Continuous Answer.}

**BLAISE NAME:** CaidPlanName  
**Field kind:** Datafield  
**Field Size:** 25

**Min value:**  
**Max value:**

<table>
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<tr>
<th>Responses</th>
<th>Answers allowed</th>
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<th>ArrayMax</th>
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<td>(PR1160)</td>
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<tr>
<td>REFUSED</td>
<td>RF</td>
<td>BOX_70</td>
<td>(PR1160)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>BOX_70</td>
<td>(PR1160)</td>
</tr>
</tbody>
</table>

**Response:**

What is the name of the {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {HMO/health insurance}?

**ENTER PLAN NAME**

**Programmer Instructions:**

Set Insurance.Insurer= PR200

**Display Instructions:**

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to display by state, see the plan fill file.

Display 'HMO' if PR180 is coded ‘1’ (YES, ALL ARE) or ‘2’ (YES, SOME ARE). Display ‘health insurance’ if PR190 is coded ‘1’ (YES, ALL REQUIRED) or ‘2’ (YES, SOME REQUIRED).

**Route Details:**

If round 2, round 3, or round 4 continue with PR210.

Otherwise, (i.e. round 5), go to BOX_90.
Is there a monthly premium for {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} for the coverage through {{CURRENT ROUND’S MEDICAID/SCHIP INSURER} /{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}}?

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

READ IF NECESSARY: A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

**Question Text:**

**Responses:**

- YES, EVERYONE COVERED PAYS .................. 1 BOX_80 (PR1175)
- YES, SOME COVERED PAY .......................... 2 PR220 (PR1170)
- NO, NO ONE COVERED PAYS ...................... 3 BOX_90 (PR1200)
- REFUSED ............................................ RF BOX_90 (PR1200)
- DON’T KNOW ........................................ DK BOX_90 (PR1200)
Full Detail Spec

Old Public Related Insurance (PR) Section

Programmer Instructions:

Placeholder for MHOP specifications. This will be deleted once those specifications are available.
If coded '1' (YES, EVERYONE COVERED PAYS) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP for each person in the roster at PR220 as '1' (PAYS FOR COVERAGE DURING THE CURRENT ROUND.)

If coded '3' (NO, NO ONE COVERED PAYS) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP for each person in the roster at PR220 as '2' (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND.)

If coded RF or DK OR -9 (WHETHER EVERYONE IS COVERED IS MISSING) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP equal to the missing value HOME.PRMEDPRE for each person in the PR220 roster.

Leave PRND.MEDGOVP blank (NO VALUE) for any RU member not on the roster at PR220.

Display Instructions:

Roster 1- Report

Roster definition:
Use PR170 definition.

Roster filter:
Use PR170 filter.

Display RU members’ first, middle, and last names (Person.FullName) in question text. Substitute "you" for the person’s 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”.

Display '{CURRENT ROUND’S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display '{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}'.

For '{CURRENT ROUND’S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR200.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for
program. For the specific name to display by state, see the plan fill file.

<table>
<thead>
<tr>
<th>PR220</th>
<th>(PR1170)</th>
<th><strong>BLAISE NAME:</strong> CaidPayPremRoster</th>
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<tbody>
<tr>
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<tr>
<td>Type Class:</td>
<td>Enumerated</td>
<td><strong>ArrayMin:</strong></td>
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<tr>
<td>Answer Type:</td>
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<td><strong>Min value:</strong></td>
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<tr>
<td></td>
<td></td>
<td><strong>ArrayMax:</strong></td>
</tr>
</tbody>
</table>

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

**Question Text:**

Who has a monthly premium for that coverage?

PROBE: Anyone else?

ENTER ALL THAT APPLY.

HELP: F1

**Responses:**

{FIRST NAME [MIDDLE NAME] LAST NAME}1 ...... 1 BOX_80 (PR1175)

{FIRST NAME [MIDDLE NAME] LAST NAME}2 ...... 2 BOX_80 (PR1175)

{FIRST NAME [MIDDLE NAME] LAST NAME}3 ...... 3 BOX_80 (PR1175)

{FIRST NAME [MIDDLE NAME] LAST NAME}4 ...... 4 BOX_80 (PR1175)

{FIRST NAME [MIDDLE NAME] LAST NAME}N ...... 5 BOX_80 (PR1175)
Programmer Instructions:

Roster Behavior:
1. Multiple select allowed.

Placeholder for MHOP specifications. This will be deleted once those specifications are available.

Code PRND.MEDMNTHP as '1' (PAYS FOR COVERAGE DURING THE CURRENT ROUND) for all persons from the PR220 roster who are selected.

Code PRND.MEDMNTHP as '2' (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND) for all persons on the PR220 roster who are not selected.

Leave PRND.MEDGOVP blank (NO VALUE) for any RU member not on the roster at PR220.

Display Instructions:

Roster 2 – no add/edit/delete

Roster definition:
Use PR170 definition.

Roster filter:
Use PR170 filter.

<table>
<thead>
<tr>
<th>BOX 80</th>
<th>(PR1175)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

Route Details:
If round 3, continue with PR230.
Otherwise, go to PR250.
How much is the premium for {the (CURRENT ROUND'S MEDICAID/SCHIP INSURER)/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.

Display 'the (CURRENT ROUND'S MEDICAID/SCHIP INSURER)' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display ‘that’.

For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.
[How much is the premium for {the {CURRENT ROUND’S MEDICAID/SCHIP INSURER}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

Is that per year, per month, per week, or what?

ENTER UNIT OF COVERAGE

Responses:

- PER YEAR ........................................... 1 PR250 (PR1195)
- EVERY 3 MONTHS (QUARTERLY) ........... 2 PR250 (PR1195)
- EVERY 2 MONTHS (BIMONTHLY) ............ 3 PR250 (PR1195)
- PER MONTH ........................................ 4 PR250 (PR1195)
- PER WEEK ........................................... 5 PR250 (PR1195)
- EVERY 2 WEEKS (BIWEEKLY) ............... 6 PR250 (PR1195)
- 2 TIMES PER YEAR (SEMI-ANNUALLY) ..... 7 PR250 (PR1195)
- 2 TIMES PER MONTH (SEMI-MONTHLY) .... 8 PR250 (PR1195)
- OTHER .............................................. 91 PR240OS (PR1190)
- REFUSED ........................................... RF PR250 (PR1195)
- DON’T KNOW ....................................... DK PR250 (PR1195)
Display Instructions:
Display PR230, PR240, and PR240OS on the same form pane.
Display “How much ... ADD ALL PREMIUMS.” in brackets and grayed out text.
Display ‘the {CURRENT ROUND’S MEDICAID/SCHIP INSURER}’ if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display ‘that’.

For '{CURRENT ROUND’S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to

PR240OS (PR1190) BLAISE NAME: CaidCovgUnitOS
Item Type: Question Field kind: Datafield ArrayMin: Min value:
Type Class: String Field Size: 30 ArrayMax: Max value:
Answer Type: {Continuous Answer.} Answers allowed: 1

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

Question Text:
[How much is the premium for {the {CURRENT ROUND’S MEDICAID/SCHIP INSURER}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

Responses: .................................................. 1 PR250 (PR1195)
REFUSED ................................................ RF PR250 (PR1195)
DON’T KNOW ........................................... DK PR250 (PR1195)
Display Instructions:

Display PR230, PR240, and PR240OS on the same form pane.

Display “How much ... ADD ALL PREMIUMS,” in brackets and grayed out text.

Display ‘the {CURRENT ROUND’S MEDICAID/SCHIP INSURER}’ if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not ‘RF’ or ‘DK’ or EMPTY.

(Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display ‘that’.

For ‘{CURRENT ROUND’S MEDICAID/SCHIP INSURER}’, display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.

<table>
<thead>
<tr>
<th>PR250</th>
<th>(PR1195)</th>
<th>BLAISE NAME: CaidPremSubsdz</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>TYESNO</td>
<td>Answers allowed: 1</td>
</tr>
</tbody>
</table>

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

Question Text:

{PLAN NAME: {CURRENT ROUND’S MEDICAID/SCHIP INSURER}}

Is the cost of the premium subsidized based on family income?

Responses:

YES  ".........................."  1 BOX_90 (PR1200)
NO  ".........................."  2 BOX_90 (PR1200)
REFUSED  ".........................."  RF BOX_90 (PR1200)
DON'T KNOW  ".........................."  DK BOX_90 (PR1200)
Display Instructions:
Display 'PLAN NAME: {CURRENT ROUND’S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, use a null display.

For '{CURRENT ROUND’S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.

Route Details:
If any RU member had MILITARY HEALTH as a source of insurance at any time during previous round (at least one RU member where Preload.Insurance.HISrc=Military, Preload.Insurance.Plyhdr=PersID where Person.MostRecentRU=RUUnit and Preload.CpwdPers.LRndCovd ={previous round number} and Preload.Insurance.OrigRnd<>current round), continue with PR260_01.

Otherwise, go to BOX_130.
During the last interview, we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N} {was/were} covered by military health care, such as TRICARE, CHAMPVA, or VA coverage.

Have you/Has {PERSON 1} been covered by military health care, such as TRICARE, CHAMPVA or VA coverage at any time {since {START DATE}/between {START DATE} and {END DATE}}?

HELP:F1

Responses:
- YES  .....................................................  1
- NO   .....................................................  2
- REFUSED  ............................................. RF
- DON'T KNOW ......................................... DK
Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members who were “COVERED BY MILITARY HEALTH” at any time during the previous round (RU members where Preload.Insurance.HISrc=Military, Preload.Insurance.Plyclldr=PerslD where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were “COVERED BY MILITARY HEALTH” at any time during the previous round. 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”.

Display ‘was’ if only one name is listed and that person is not the current respondent. Otherwise, display ‘were’.
Display ‘since {START DATE}’ if not round 5. Display ‘between {START DATE} and {END DATE}’ if round 5.

Display variable question text: Replace “{Have you/Has {PERSON 1}} been covered ... and {END DATE}?” with:
PR260_02: What about {PERSON 2}?
PR260_03: What about {PERSON 3}?
PR260_04: What about {PERSON N}? Has {he/she} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time since {START DATE}/between {START DATE} and {END DATE}? PR260_N: Repeat question text PR260_02-PR260_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.
Display first paragraph of question text in brackets and grayed out text when on PR260_02 – PR260_N. Display in bold black and no brackets when on PR260_01.
If all current RU members are displayed at PR260_01-PR260_N, go to BOX_110. Otherwise, continue with PR270_01.

Besides the people we’ve just talked about, please think about whether any additional household members have been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time [since [START DATE] between [START DATE] and [END DATE]]?

Previously, we’ve recorded that [MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N] [is/are] [full-time active duty in the Armed Forces] [or] [honorably discharged from active duty].

Have you/Has [PERSON 1] been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time [since [START DATE] between [START DATE] and [END DATE]]?

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

Programmer Instructions: Preloaded grid type 1: Forced navigation including PR270_01, PR270_02, PR270_03, PR270_04, PR270_N.

After grid completion, continue with BOX_110.

For each person coded ‘1’ (YES), create insurance through Military health care for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Military and Insurance.HISrcName=Military Health and Insurance.Plyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

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

Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members who were not covered by MILITARY HEALTH at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR260_01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace “{Have you/Has {PERSON 1}} been covered ... and {END DATE}?” with:
PR270_02: What about {PERSON 2}?
PR270_03: What about {PERSON 3}?
PR270_04: What about {PERSON N}? Has {he/she} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time since {START DATE}/between {START DATE} and {END DATE}?
PR270_N: Repeat question text PR270_02-PR270_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Display first two paragraphs of question text in brackets and grayed out text when on PR270_02 – PR270_N. Display in bold black and no brackets when on PR270_01.

The second paragraph makes use of a separate list of names.

Display ‘Previously, we’ve recorded that {MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N} [is/are] (full-time active duty in the Armed Forces) [or] (honorably discharged from active duty).’ if at least one current RU member eligible to be displayed at PR270_01 grid is currently FT active duty (Person.FTADuty=Yes) or honorably discharged from the Armed Forces in any round [Person.HonDisch=Yes (preloaded value or current round value)]. Otherwise, use a null display.

Display ‘full-time active duty in the Armed Forces’ if at least one current RU member eligible to be displayed at PR270_01 grid is currently FT active duty. Otherwise, use a null display.
Display ‘honorably discharged from active duty’ if at least one RU member eligible to be displayed at PR270_01 grid has been honorably discharged in any round. Otherwise, use a null display.

Display ‘or’ if there is at least one current RU member who is FT active duty and one current RU member who is honorably discharged in any round. Otherwise, use a null display.

For ‘[MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N]’, Display the firstnames of all RU members who are either currently FT active duty or honorably discharged from the Armed Forces in any round. Separate the names using a comma and substitute ‘you’ if the respondent’s name is part of the 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”.

Display ‘is’ if only one person listed and that person is not selected as respondent. Otherwise, display ‘are’.

**Route Details:**

If at least one RU member “COVERED BY MILITARY HEALTH” during the current round, that is, at least one RU member was coded as ‘1’ (YES) at PR260_01-PR260_N or PR270_01-PR270_N, continue with PR280_01.

Otherwise, go to BOX_130.
What types of military health coverage {do/does} {you/PERSON 1} have? {Do you/Does {he/she}} have TRICARE Standard, TRICARE Prime, TRICARE Extra, TRICARE for Life, CHAMPVA, or VA (Veteran’s Administration)?

ENTER ALL THAT APPLY.

HELP:F1

Responses:
- TRICARE STANDARD ........................................ 1
- TRICARE PRIME ............................................. 2
- TRICARE EXTRA .............................................. 3
- TRICARE FOR LIFE .......................................... 4
- CHAMPVA ..................................................... 5
- VA (VETERAN’S ADMINISTRATION) .............. 6
Preloaded grid type 1: Forced navigation including PR280_01, PR280_02, PR280_03, PR280_04, PR280_N

After grid completion, continue with BOX_120.

Display Instructions:
Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members “COVERED BY MILITARY HEALTH” during the current round, that is, PR260_01–PR260_N or PR270_01–PR270_N is coded ‘1’ (YES) for this person.

Display variable question text. Replace “What types ... Administration)?” with:
PR280_02: What about {PERSON 2}?
PR280_03: What about {PERSON 3}?
PR280_04: What about {PERSON N}? Does {he/she} have TRICARE Standard, TRICARE Prime, TRICARE Extra, TRICARE for Life, CHAMPVA, or VA (Veteran’s Administration)?
PR280_N: Repeat question text PR280_02-PR280_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Ask the time period covered detail ( HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by MILITARY HEALTH in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:
-Insurance source is Military Health [Insurance.HISrc=Military]
And
-Person is “COVERED BY MILITARY HEALTH” during the current round, that is, either PR260_01-PR260_N or PR270_01-PR270_N is coded ‘1’ (YES) for this person.

At completion of HQ section, continue with BOX_130.
If any RU member had INDIAN HEALTH SERVICE as a source of insurance at any time during the previous round (at least one RU member where Preload.Insurance.HISrc=IHS, Preload.Insurance.Plyhdr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd = {previous round number} and Preload.Insurance.OrigRnd<>current round), continue with PR290_01. Otherwise, go to BOX_170.

**Question Text:**

During the last interview, we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N} {was/were} enrolled in the Indian Health Service (IHS). The Indian Health Service provides health care only to eligible Alaska Natives and American Indians at its Federal hospitals and clinics.

{Were you/Was{PERSON 1}} enrolled in the Indian Health Service (IHS) at any time {since {START DATE}/between {START DATE} and {END DATE}}?

**Responses:**

<table>
<thead>
<tr>
<th>Response</th>
<th>BLAISE NAME</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>ConfIHSPlan</td>
<td>RF</td>
</tr>
<tr>
<td>NO</td>
<td></td>
<td>DK</td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
<td>RF</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td>DK</td>
</tr>
</tbody>
</table>

Min value: 1
Max value: 1
Answers allowed: 1
ArrayMin: 1
ArrayMax: 1
Preloaded grid type 1: Forced navigation including PR290_01, PR290_02, PR290_03, PR290_04, PR290_N.

After grid completion, continue with BOX_140.

Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members who were “COVERED BY INDIAN HEALTH SERVICE” at any time during the previous round (RU members where Preload.Insurance.HISrc=IHS, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were “COVERED BY INDIAN HEALTH SERVICE” at any time during the previous round. 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”. Display ‘was’ if only one name is listed and that person is not the current respondent. Otherwise, display ‘were’.

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

Display variable question text. Replace “[Were you/Was {PERSON 1}] enrolled ... and {END DATE}]?” with:
PR290_02: What about {PERSON 2}?
PR290_03: What about {PERSON 3}?
PR290_04: What about {PERSON N}? Was (he/she) enrolled in the Indian Health Service (IHS) at any time {since {START DATE} between {START DATE} and {END DATE}? PR290_N: Repeat question text PR290_02-PR290_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR290_02 – PR290_N. Display in bold black and no brackets when on PR290_01.
### Route Details:
If all current RU members are displayed at PR290_01-PR290_N, go to BOX_150.

Otherwise, continue with PR300_01.

### Question Text:
Besides the people we’ve just talked about, please think about whether any additional household members have been enrolled in Indian Health Services (IHS) at any time \{since \{START DATE\}/between \{START DATE\} and \{END DATE\}\}?

{Were you/Was \{PERSON 1\}} enrolled in Indian Health Services (IHS) at any time \{since \{START DATE\}/between \{START DATE\} and \{END DATE\}\}?

IF NECESSARY, SAY: The Indian Health Service (IHS) is the health care system for federally recognized American Indian and Alaska Natives. The IHS is not a health insurance provider but rather, it provides healthcare only to eligible Alaska Natives and American Indians at its federal hospitals and clinics.

### Responses:
- YES  ................................................................. 1
- NO  ................................................................. 2
- REFUSED  ......................................................... RF
- DON’T KNOW  ..................................................... DK
Preloaded grid type 1: Forced navigation including PR300_01, PR300_02, PR300_03, PR300_04, PR300_N.

After grid completion, continue with BOX_150.

For each person coded ‘1’ (YES), create insurance through Indian Health Service for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=IHS and Insurance.HISrcName=Indian Health Service and Insurance.Plyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members who were not covered by INDIAN HEALTH SERVICE at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR290_01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace “{Were you/Was{PERSON 1}} enrolled ... {END DATE}?” with:
PR300_02: What about {PERSON 2}?
PR300_03: What about {PERSON 3}?
PR300_04: What about {PERSON N}? Was {he/she} enrolled in the Indian Health Service (IHS) at any time {since {START DATE}/between {START DATE} and {END DATE}}?
PR300_N: Repeat question text PR300_02-PR300_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Display first and third paragraph of question text in brackets and grayed out text when on PR300_02 – PR300_N. Display both in bold black and no brackets when on PR300_01.
If at least one RU member “COVERED BY INDIAN HEALTH SERVICE” during the current round, that is, at least one RU member was coded as ‘1’ (YES) PR290_01-PR290_N or PR300_01-PR300_N, continue with BOX_160.

Otherwise, go to BOX_170.

Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Indian Health Services in the current round. The grid for the HQ section should be preloaded with insurance that meet both of the following conditions:

- Insurance source is Indian Health Service (Insurance.HISrc=IHS)
- Person is “COVERED BY INDIAN HEALTH SERVICE” during the current round, that is, either PR290_01-PR290_N or PR300_01-PR300_N is coded ‘1’ (YES) for this person.

At completion of HQ section, continue with BOX_170.

If any RU member had GOV’T-HOSPITAL/PHYSICIAN as a source of insurance at any time during the previous round (at least one RU member where Preload.Insurance.HISrc=GHP, Preload.Insurance.Plyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd = {previous round number} and Preload.Insurance.OrigRnd<>current round), continue with PR310_01.

Otherwise, go to BOX_240.
During the last interview, we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N} {was/were} covered by {PRELOAD GOVT-HOSP/PHY NAME}, a program sponsored by a state or local government agency which provided hospital and physician benefits. {Have you/Has {PERSON 1}} been covered by this program or some other program sponsored by a state or local government agency which provided hospital and physician benefits at any time {since {START DATE}/between {START DATE} and {END DATE}}?

HELP: F1

Responses: YES .................................................. 1
NO ............................................................ 2
REFUSED .................................................. RF
DON'T KNOW ........................................... DK
Preloaded grid type 1: Forced navigation including PR310_01, PR310_02, PR310_03, PR310_04, PR310_N.

After grid completion, continue with BOX_180.
PR310_N. Display in bold black and no brackets when on PR310_01.

---

**BOX_180**  
**(PR1275)**  
**Item Type:** Route  
**Type Class:** If Then

**Route Details:**  
If all current RU members are displayed in PR310_01-PR310_N, go to BOX_190.  
Otherwise, continue with PR320_01.

---

**PR320_01**  
**(PR1280)**  
**BLAISE NAME:** OthMmbGovProg

**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 (INSTYPESHelp)  
- ☐ Show Card ( )  
- ☐ Look Up File ( )

**Question Text:**

Besides the people we've just talked about, please think about whether any additional household members have been covered by a program sponsored by a state or local government agency which provides physician benefits at any time {since {START DATE}/between {START DATE} and {END DATE}}?

{Have you/Has [PERSON 1]} been covered by a program like this at any time {since {START DATE}/between {START DATE} and {END DATE}}?

HELP: F1

**Responses:**

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

---

PR - Page 54 of 73
Preloaded grid type 1: Forced navigation including PR320_01, PR320_02, PR320_03, PR320_04, PR320_N.

After grid completion, continue with BOX_190.

For each person coded ‘1’ (YES), create insurance through Gov't-Hospital/Physician for this person [set Insurance.HI_PubPriv=Public and Insurance.HISrc=GHP and Insurance.HISrcName= GOVT-HOS/PHY-(PROGRAM NAME FROM HX160/HX270)]
(Preload.GHPProgNameRndCreated) and Insurance.Plyldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member
Instructions: Display RU members’ First Middle and Last name (Person.FullName)

Roster Filter:
Display only those RU members who were not covered GOV’T- HOSPITAL/PHYSICIAN at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR310_01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace “{Have you/Has {PERSON 1}} been covered ... and {END DATE})?” with:
PR320_02: What about {PERSON 2}? PR320_03: What about {PERSON 3}?
PR320_04: What about {PERSON N}? Has {he/she} been covered by a program sponsored by a state or local government agency which provided hospital and physician benefits at any time {since {START DATE}/between {START DATE} and {END DATE})?}
PR320_N: Repeat question text PR320_02-PR320_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute “you” for the person’s first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR320_02 – PR320_N. Display in bold black and no brackets when on PR320_01.
If at least one RU member is “COVERED BY GOV’T- HOSPITAL/PHYSICIAN” during the current round, that is, at least one RU member was coded ‘1’ (YES) at PR310_01-310_N or PR320_01-320_N, continue with BOX_200.

Otherwise, go to BOX_240.

Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Gov’t-Hospital/Physician in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:
-Insurance source is GOV’T-HOSPITAL/PHYSICIAN [Insurance.HISrc=GHP] And
-Person is “COVERED BY GOV’T-HOSPITAL/PHYSICIAN” during the current round, that is, either PR310_01 – PR310_N or PR320_01-PR320_N is coded ‘1’ (YES) for this person.

At completion of HQ section, continue with PR330.
Question Text:

{Last time we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} may be covered by {PRELOAD GOVT-HOSP/PHYS INSURER}.}

{Since {START DATE}/Between {START DATE} and {END DATE}}, has there been any change in the plan name of the health insurance {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} has/have through the program sponsored by a state or local government agency which provides hospital and physician benefits?

Responses:

<table>
<thead>
<tr>
<th>Responses</th>
<th></th>
<th>PR340</th>
<th>(PR1300)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
<td>BOX_210</td>
<td>(PR1315)</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>BOX_210</td>
<td>(PR1315)</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>BOX_210</td>
<td>(PR1315)</td>
</tr>
</tbody>
</table>
Display Instructions:

Roster definition:
This item uses the insurance array to display RU-members. (Person.Fullname)

Roster filter:
Display only those RU members who are “COVERED BY GOVT- HOSPITAL/PHYSICIAN” during the current round, that is either PR310_01 – PR310_N or PR320_01-PR320_N is coded ‘1’ (YES) for this person..

Display first names only in the first sentence “Last time we recorded....” 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 between the second to last two names displayed. Between the last two names displayed, separate names using the word “and”.

Display RU members’ first, middle, and last names (Person.FullName) in the second sentence “(Since {START DATE}/Between {START DATE} and {END DATE})....” Substitute “you” for the person’s name if the respondent is included in this list. See instructions above about when to use commas vs. “and” to separate names.

Display 'Last time... {PRELOAD GOVT-HOSP/PHYS INSURER).' if there was an insurer associated with Govt-Hospital/Physician in the previous round (Preload.Insurance.Insurer <> RF, DK or EMPTY). Otherwise, use a null display.

For ‘PRELOAD GOVT-HOSP/PHYS INSURER’, display the insurer recorded for Govt-Hospital/Physician during the previous round (Preload.Insurance.Insurer).

Display 'Since {START DATE}' if not round 5.
Display 'Between {START DATE} and {END DATE}' if round 5.

Display ‘has’ if only one name is listed and that person is not the current respondent. Otherwise, display ‘have’.

Programmer Instructions:

If coded ‘2’ (NO), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW), set previous round's insurer as 'CURRENT RD'S GOVT-HOSP/PHYS INSURER'. [Set Preload.Insurance.Insurer to Insurance.Insurer]
Under the program sponsored by a state or local government agency which provides hospital and physician benefits \{\{are/is\}/\{were/was\}\} \{PERSON 1\}, \{PERSON 2\}, \{PERSON 3\}, \{PERSON 4\}, \{PERSON N\} enrolled in an HMO, that is a Health Maintenance Organization \{between\{START DATE\} and \{END DATE\}\}?  

[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]

Help Available (HMOHelp)

Question Text:

Responses:

YES, ALL ARE ..............................................  1  PR360  (PR1310)
YES, SOME ARE ..............................................  2  PR360  (PR1310)
NO, NONE ARE ..............................................  3  PR350  (PR1305)
REFUSED ...................................................... RF  PR350  (PR1305)
DON'T KNOW ..................................................... DK  PR350  (PR1305)

Display Instructions:

Roster 1- Report Roster definition:
Use PR330 definition.

Roster filter:
Use PR330 filter.

Display RU members’ first, middle, and last names (Person.FullName) in the question text. Substitute “you” for the person's 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”.

Display '{are/is}' if not round 5. Display '{were/was}' if round 5.

Display 'is' or 'was' if the list includes 1 person who is not the respondent. Otherwise, display 'are' or 'were'.

Display 'between \{START DATE\} and \{END DATE\}' if round 5. Otherwise, use a null display.
Full Detail Spec

**Old Public Related Insurance (PR) Section**

**PR350**  
**Item Type:** Question  
**Type Class:** Enumerated  
**Answer Type:** THMOSIGND_1  
**BLAISE NAME:** GovProgPrimaryMD  
**Field kind:** Datafield  
**ArrayMin:** 1  
**Min value:**  
**Field Size:**  
**ArrayMax:** 1  
**Max value:**

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

**Question Text:**

{Does/Between {START DATE} and {END DATE}, did} the program sponsored by a state or local government agency which provides hospital and physician benefits require {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} to sign up with a certain primary care doctor, group of doctors, or with a certain clinic which they must go to for all of their routine care?

PROBE: Do not include emergency care or care from a specialist they were referred to.

**Help:**

F1

**Responses:**

- YES, ALL REQUIRED
- YES, SOME REQUIRED
- NO, NONE REQUIRED
- REFUSED
- DON'T KNOW

1 PR360 (PR1310)
2 PR360 (PR1310)
3 BOX_210 (PR1315)
RF BOX_210 (PR1315)
DK BOX_210 (PR1315)
Programmer Instructions:

Note: If coded ‘3’ (NO, NONE REQUIRED), ‘RF’ (REFUSED), or ‘DK’ (DON’T KNOW), there is no insurer associated with the current round for Govt-Hospital/Physician.

Display Instructions:

Roster 1- Report

Roster definition:
Use PR330 definition.

Roster filter:
Use PR330 filter.

Display RU members’ first, middle, and last names (Person.FullName) in the question text. Substitute “you” for the person’s 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”.

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

<table>
<thead>
<tr>
<th>PR360</th>
<th>(PR1310)</th>
<th>BLAISE NAME: GovProgPlanName</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: 40</td>
</tr>
</tbody>
</table>

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

Question Text:

What is the name of the {HMO/health insurance} from the program sponsored by a state or local government agency which provides hospital and physician benefits?

ENTER PLAN NAME

Responses:               1 BOX_210 (PR1315)
REFUSED                 RF BOX_210 (PR1315)
DON'T KNOW              DK BOX_210 (PR1315)
Display Instructions: Display ‘HMO’ if PR330 is coded ‘1’ (YES, ALL ARE) or ‘2’ (YES, SOME ARE). Display ‘health insurance’ if PR350 coded ‘1’ (YES, ALL REQUIRED) or ‘2’ (YES, SOME REQUIRED).

**Route Details:**
If round 2, round 3, or round 4, continue with PR370.
Otherwise, (i.e., if round 5), go to BOX_240.
Is there a monthly premium for {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON 4}, {PERSON N} for the coverage through {{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/the program sponsored by a state or local government agency which provides hospital and physician benefits}?

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

READ IF NECESSARY: A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

Responses:

- YES, EVERYONE COVERED PAYS ............... 1 BOX_220 (PR1330)
- YES, SOME COVERED PAY ..................... 2 PR380 (PR1325)
- NO, NO ONE COVERED PAYS .................. 3 BOX_240 (PR1365)
- REFUSED ...................................... RF BOX_240 (PR1365)
- DON’T KNOW ................................. DK BOX_240 (PR1365)
Old Public Related Insurance (PR) Section

Programmer Instructions:

Uploader for MHOP specifications. This will be deleted once those specifications are available.

If coded '1' (YES, EVERYONE COVERED PAYS) at PR370 (HOME.PRMEDPRE), code
PRND.GOVMNTHP for each person in the roster at PR370 as '1' (PAYS FOR COVERAGE
DURING THE CURRENT ROUND.)

If coded '3' (NO, NO ONE COVERED PAYS) at PR370 (HOME.PRMEDPRE), code
PRND.GOVMNTHP for each person in the roster at PR370 as '2' (DOES NOT PAY FOR
COVERAGE DURING THE CURRENT ROUND.)

If coded RF or DK or -9 (WHETHER EVERYONE IS COVERED IS MISSING) at PR370
(HOME.PRMEDPRE), code PRND.GOVMNTHP equal to the missing value in
HOME.PRMEDPRE for each person in the PR370 roster.
Leave PRND.MEDGOVP blank (no value) for any RU member not on the roster at PR370.

Display Instructions:

Roster 1 - Report

Roster definition:
Use PR330 definition.

Roster filter:
Use PR330 filter.

Display RU members’ first, middle, and last names (Person.FullName) in question text.
Substitute “you” for the person’s 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”.

Display '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}' if there is a current
round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’
or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer,
the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current
insurer was set there). Otherwise, display 'the program sponsored by a state or local
government agency which provides hospital and physician benefits ‘.

For '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan
name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may
be a preloaded value set to the current value or the value entered at PR360.
Who has a monthly premium for that coverage?

PROBE: Anyone else?

ENTER ALL THAT APPLY.

**Question Text:**

Who has a monthly premium for that coverage?

PROBE: Anyone else?

ENTER ALL THAT APPLY.

**Responses:**

{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
Programmer Instructions:  
Roster Behavior:  
1. Multiple select allowed.  

Following settings may be required during MHOP rather than CAPI:  

Code PRND.GOVMTNH as ‘1’ (PAYS FOR COVERAGE DURING THE CURRENT ROUND) for all persons from the PR380 roster who are selected.  

Code PRND.GOVMTNH as ‘2’ (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND) for all persons on the PR370 roster who are not selected.  

Leave PRND.MEDGOV blank (no value) for any RU member not on the roster at PR380.  

Display Instructions:  
Roster 2 - no add/edit/delete.  

Roster definition:  
Use PR330 definition.  

Roster filter:  
Use PR330 filter.  

---

**BOX 220 (PR1330)**  
**Item Type:** Route  
**Type Class:** If Then  

**Route Details:**  
If round 3, continue with PR390.  
Otherwise, go to PR410.
How much is the premium for {the {CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.

ENTER AMOUNT

Responses:

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>(PR1340)</th>
</tr>
</thead>
<tbody>
<tr>
<td>..........................</td>
<td>1</td>
<td>PR400</td>
</tr>
<tr>
<td>REFUSED</td>
<td>RF</td>
<td>PR410</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>DK</td>
<td>PR410</td>
</tr>
</tbody>
</table>

Programmer Instructions:

Allow for the entry of dollars and cents.

Display Instructions:

Display PR390, PR400 and PR400OS on the same form pane.

Display ‘the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}’ if there is a current round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display ‘that’.

For '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.
Old Public Related Insurance (PR) Section

**Question Text:**

[How much is the premium for {the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

Is that per year, per month, per week, or what?

ENTER UNIT OF COVERAGE

**Responses:**

| PER YEAR            | 1 | PR410 (PR1350) |
| EVERY 3 MONTHS (QUARTERLY) | 2 | PR410 (PR1350) |
| EVERY 2 MONTHS (BIMONTHLY) | 3 | PR410 (PR1350) |
| PER MONTH           | 4 | PR410 (PR1350) |
| PER WEEK            | 5 | PR410 (PR1350) |
| EVERY 2 WEEKS (BIWEEKLY) | 6 | PR410 (PR1350) |
| 2 TIMES PER YEAR (SEMI-ANNUALLY) | 7 | PR410 (PR1350) |
| 2 TIMES PER MONTH (SEMI-MONTHLY) | 8 | PR410 (PR1350) |
| OTHER               | 91 | PR400OS (PR1345) |
| REFUSED             | RF | PR410 (PR1350) |
| DON’T KNOW          | DK | PR410 (PR1350) |
Display PR390, PR400 and PR400OS on the same form pane.

Display “How much ... ADD ALL PREMIUMS.” in brackets and grayed out text.

Display ‘the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}’ if there is a current round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display ‘that’.

For '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.

**Question Text:**

[How much is the premium for {the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

SPECIFY: OTHER UNIT OF COVERAGE

<table>
<thead>
<tr>
<th>Responses</th>
<th>PR400OS</th>
<th>(PR1345)</th>
<th>BLAISE NAME: GovProgUnitOS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help Available ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Show Card ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Look Up File ( )</td>
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<tr>
<th>Item Type</th>
<th>Question</th>
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<th>Min value:</th>
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<td>Answer Type</td>
<td>(Continuous Answer.)</td>
<td>Answers allowed: 1</td>
<td>ArrayMax:</td>
<td>Max value:</td>
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</table>

<table>
<thead>
<tr>
<th>Responses</th>
<th>PR400OS</th>
<th>(PR1345)</th>
<th>BLAISE NAME: GovProgUnitOS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help Available ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Show Card ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Look Up File ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question Text:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[How much is the premium for {the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/that} coverage?</td>
</tr>
</tbody>
</table>

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

SPECIFY: OTHER UNIT OF COVERAGE

<table>
<thead>
<tr>
<th>Responses</th>
<th>PR400OS</th>
<th>(PR1345)</th>
<th>BLAISE NAME: GovProgUnitOS</th>
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<tr>
<td>Help Available ( )</td>
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<td></td>
<td></td>
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<tr>
<td>Show Card ( )</td>
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</tr>
<tr>
<td>Look Up File ( )</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Response</th>
<th>PR400OS</th>
<th>(PR1345)</th>
<th>BLAISE NAME: GovProgUnitOS</th>
</tr>
</thead>
<tbody>
<tr>
<td>REFUSED</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PR - Page 69 of 73
Display Instructions:

Display PR390, PR400 and PR400OS on the same form pane.

Display “How much ... ADD ALL PREMIUMS.” in brackets and grayed out text.

Display ‘the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}’ if there is a current round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display 'that'.

For '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.

<table>
<thead>
<tr>
<th>PR410</th>
<th>(PR1350)</th>
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<tr>
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<tr>
<td>Answer Type:</td>
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</tr>
</tbody>
</table>

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

Question Text:

{PLAN NAME: {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}}

Is the cost of the premium subsidized based on family income?

**Responses:**

<table>
<thead>
<tr>
<th>YES</th>
<th>BOX_230</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO</td>
<td>BOX_230</td>
</tr>
<tr>
<td>REFUSED</td>
<td>BOX_230</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>BOX_230</td>
</tr>
</tbody>
</table>
Display Instructions: Display 'PLAN NAME: {CURRENT ROUND’S INSURER FOR GOVT.- HOSPITAL/PHYSICIAN}' if there is a current round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, use a null display.

For '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.

<table>
<thead>
<tr>
<th>BOX_230</th>
<th>(PR1355)</th>
<th>Item Type: Route</th>
<th>Type Class: If Then</th>
</tr>
</thead>
</table>

Route Details: [If round 3]
and
[If HX180 or HX280 was coded ‘1’ (YES, PLAN IS EXCHANGE) the round the Gov’t-Hospital/Physician insurance was created (Preload.Insurance.HX180AnsRndCreated or Preload.Insurance.HX280AnsRndCreated)] and
[PR370 is coded ‘1’ (YES, EVERYONE COVERED PAYS) or ‘2’ (YES, SOME COVERED PAY),]
continue with PR420.

Otherwise, go to BOX_240.
### Question Text:
Is {the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN} plan/this plan} a platinum, gold, silver, bronze, or catastrophic plan?

HELP: F1

### Responses:
- **PLATINUM PLAN** .............................................. 1 BOX_240 (PR1365)
- **GOLD PLAN** .................................................. 2 BOX_240 (PR1365)
- **SILVER PLAN** .................................................. 3 BOX_240 (PR1365)
- **BRONZE PLAN** .................................................. 4 BOX_240 (PR1365)
- **CATASTROPHIC PLAN** ................................. 5 BOX_240 (PR1365)
- **IF VOLUNTEERED: SOMETHING ELSE** ......... 6 BOX_240 (PR1365)
- **REFUSED** ....................................................... RF BOX_240 (PR1365)
- **DON'T KNOW** ............................................... DK BOX_240 (PR1365)

### Display Instructions:
Display ‘the {CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN} plan’ if there is a current round insurer associated with the Gov’t-Hospital/Physician insurance that is not ‘RF’ or ‘DK’ or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display ‘this plan’.

For '{CURRENT ROUND’S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov’t-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.
[End of PR]