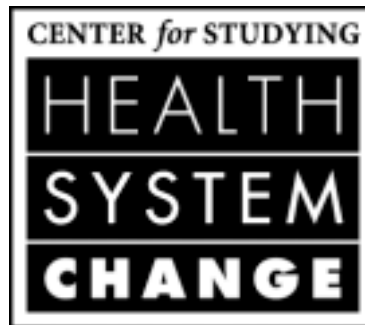


Community Tracking Study

2003 Household Survey Restricted Use File: User's Guide

(Release 1)



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**Community Tracking Study (CTS)
2003 Household Survey
Fact Sheet**

Survey Details	
Sample	46,587 people in 25,419 families in the contiguous U.S., representing the civilian noninstitutionalized population. The sample is clustered in 60 communities. (Unlike previous years of the survey, there is no supplemental sample drawn from the entire contiguous U.S.)
Time period	February 2003 – February 2004
Content	<i>[Some items are available only on the Restricted Use File.]</i> Household composition Health insurance coverage Use of health services Health expenses and bills Unmet needs Usual source of care Affordable medical care for the uninsured Patient trust and attitudes Satisfaction with health care and health plan Last doctor visit Health status, adult chronic conditions, and children’s special health care needs Risk attitudes and smoking behavior Height and weight Employment and employer health insurance offerings Earnings and family income Ethnicity, race, and U.S. citizenship Demographic characteristics
Differences between the 2000-01 (Round Three) and 2003 (Round Four) surveys	The <i>supplemental sample</i> was eliminated for 2003, and the sample sizes in the high-intensity sites were reduced. There were also a number of changes in the variables included on the data files: <ul style="list-style-type: none"> • Variables that were renamed because they changed slightly (e.g., race): See Section 2.3.1.1 of this user’s guide. • Variables that were added: See Section 2.3.1.2 of this user’s guide. • Variables that were dropped: See Section 2.3.1.3 of this user’s guide.
Terminology	The CTS Household Survey has been conducted since 1996-97. “Round One” refers to the 1996-97 survey. “Round Two” refers to the 1998-99 survey. “Round Three” refers to the 2000-01 survey. “Round Four” refers to the 2003 survey.
Types of Estimates	
Geographic areas represented	These data are designed to allow the user to calculate nationally representative estimates and estimates for the 60 selected communities.
Estimates for 2003	These data can be used for calculating cross-sectional estimates for 2003.
Change estimates	The data from all four years of the survey (1996-97, 1998-99, 2000-01, and 2003) can be combined to calculate change over time.
Pooled estimates	To benefit from increased sample size, data from multiple years of the survey can be combined to calculate a single “pooled” estimate.

(continued...)

**Community Tracking Study (CTS)
2003 Household Survey
Fact Sheet (continued)**

Using the Data Files	
Obtaining the data files and documentation	<p>The data files and documentation are available through the Health and Medical Care Archive at the Inter-University Consortium for Political and Social Research (ICPSR). The web site is www.icpsr.umich.edu.</p> <p>The Public Use File can be downloaded at no cost directly from the ICPSR web site. The Restricted Use File is available to approved users only and is available at no or nominal fee. ICPSR provides the restricted data file on CD. To obtain permission to use the Restricted Use File, users must comply with conditions listed in the CTS Household Survey Restricted Data Use Agreement, such as limiting data access to people specified in the agreement and destroying the data upon completion of the specified research project. Copies of the agreement and a description of the application process are available from the ICPSR web site.</p>
Software requirements	<p>Because the CTS Household Survey has a complex sample design, most commonly used statistical software packages will not estimate standard errors correctly. The software recommended for analysis of the CTS Household Survey data is SUDAAN, which accommodates the main features of the sample design. Chapter 4 of this user's guide explains how to use SUDAAN to calculate standard errors correctly.</p> <p>Not all software with the ability to analyze data from surveys with complex sample designs is able to accommodate the design of the CTS Household Survey. For example, Stata and SAS are able to generate correct standard error estimates for site-specific estimates but not national estimates. Although Stata and SAS can account for some features of the CTS sample design for national estimates, the fact that they cannot account for all of the major ones means that the standard error estimates will differ from those generated by SUDAAN (for national estimates). Those who are interested in using software other than SUDAAN for national estimates should consult Chapter 4 of this user's guide, as well as HSC Technical Publication No. 40, which describes the effect of using different statistical software packages to analyze the CTS data. For those who decide to use Stata or SAS, Chapter 4 of this user's guide describes the most appropriate way to calculate standard errors given the limitations of those packages for analysis of CTS Household Survey data.</p>
Differences between the Public Use File and the Restricted Use File	<p>The Public Use File contains less detailed information than the Restricted Use File in order to preserve the confidentiality of the survey respondents. The two files contain the same number of observations, but the Public Use File has fewer variables, some of which have undergone more extensive editing than those on the Restricted Use File. The Restricted Use File contains site, state, and county-level identifiers for each observation, while the Public Use File contains only site and state identifiers. In addition, some of the values for the state identifiers have been altered in the Public Use File but not in the Restricted Use File. Only the Restricted Use File contains information that allows the user to identify households and people that are part of both the 2000-01 (Round Three) and 2003 (Round Four) samples. Lastly, there are a number of analytic variables that are available only on the Restricted Use File, including adult chronic conditions, children's special health care needs, and U.S. citizenship. See Appendix C for a complete list of variables on the public and restricted versions of the data file.</p>
Contacting the CTS help desk	<u>ctshelp@hschange.org</u>

PREFACE

The Community Tracking Study (CTS) provides information to help policy makers and health care leaders make sound decisions. The CTS collects information on how the health system is evolving in 60 communities across the United States and the effects of those changes on people. Funded by the Robert Wood Johnson Foundation, the study is being conducted by the Center for Studying Health System Change (HSC).

The CTS relies on periodic site visits and surveys of households and physicians, with occasional surveys of employers and health insurance plans. One component of the CTS, the Household Survey, provides cross-sectional estimates of health insurance and demographic characteristics, the use of health services, satisfaction with care, and health status. This user's guide gives researchers the information necessary for using the restricted use version of the data file containing information from the 2003 Household Survey.

Data collection for the 2003 Household Survey began in February 2003 and was completed in February 2004. Earlier versions of the survey were conducted in 1996-97, 1998-99, and 2000-01. Each survey was designed to allow separate cross-sectional estimates. Researchers can use each year of the CTS Household Survey for separate cross-sectional analyses or combine the years to study changes in the health care system over time.

This user's guide presents background information about the CTS and the 2003 Household Survey, explains how to select samples and weight variables, and discusses the correct approach to estimating variances. This discussion is followed by a description of variable construction and editing and other information about the data file. The appendices contain useful background information, such as the survey questions and detailed instructions on variance estimation. The codebook (*Community Tracking Study 2003 Household Survey Restricted Use File: Codebook*) provides more detail on the data file, including frequencies and definitions of variables.

ACKNOWLEDGMENTS

The Center for Studying Health System Change (HSC) would like to express its great appreciation to its contractors, Mathematica Policy Research, Inc. (MPR) and Social and Scientific Systems, Inc. (SSS), for their collaboration in the production of this user's guide and the accompanying codebook and data file.

OBTAINING AND USING THE RESTRICTED USE FILE

In order to obtain and use this Restricted Use File, researchers must apply for access to the data and agree to the strict terms and conditions contained in the *Community Tracking Study Household Survey Restricted Use Data Agreement*. Information about the application process and the data use agreement are available from the ICPSR website (www.icpsr.umich.edu).

Before applying to use the CTS Household Survey Restricted Use File, researchers should consider whether the Public Use File would serve their analytic needs. The public use and restricted use versions differ in the amount of geographic detail provided, and the confidentiality masking applied to some variables. The Restricted Use File contains site, state and county-level identifiers for each observation, while the Public Use File contains only site and state identifiers. In addition, some of the values for the state identifiers have been altered in the Public Use File but not in the Restricted Use File. Only the Restricted Use File contains information that allows the user to identify households and people that are part of both the 2000-01 (Round Three) and 2003 (Round Four) samples. Lastly, there are a number of analytic variables that are available only on the Restricted Use File, including adult chronic conditions, children's special health care needs, and U.S. citizenship. See Appendix C for a complete list of variables on the public and restricted versions of the data file.

Information on the Public Use File is available in *Community Tracking Study Household Survey Public Use File: User's Guide* and *Community Tracking Study Household Survey Public Use File: Codebook*, available from the ICPSR web site (www.icpsr.umich.edu).

OBTAINING TECHNICAL ASSISTANCE

Information on the CTS Household Survey, and the CTS in general, can be obtained through the HSC Internet home page at <http://www.hschange.org>. The Restricted Use File and the latest documentation are available through the Health and Medical Care Archive at the Inter-university Consortium for Political and Social Research at <http://www.icpsr.umich.edu>.

Technical assistance on issues related to the data file can be obtained by contacting the CTS Help Desk by e-mail at ctshelp@hschange.org or fax (202-863-1763).

VISIT THE HSC WEB SITE

www.hschange.org

For users of the CTS data files, the HSC Web site can be a valuable resource. In addition to the HSC technical publications and descriptions of the different CTS data collection activities, it has these useful features.

CTSONline user-specified tables. CTSONline is an interactive Web-based system that allows users to request a wide variety of tables with estimates from the CTS surveys. Launched in June 2002, the system has results for both the Household Survey and the Physician Survey.

Lists of papers published from the public use and restricted use data files. In the section of the Web site that discusses the public and restricted use data, you can view a list of journal articles that have been published by users of the CTS public use and restricted use data files. If you have a paper based on the CTS data that is not included on the list, please let us know by sending an email to CTSONline@hschange.org.

Email list for updates on the CTS data. If you would like to receive email announcements when new versions of the CTS data files are released, go to the Web site and click on “Sign up for email alerts.” Then fill out the sign-up form and check the box specific to CTS email.

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CHAPTER 1

OVERVIEW OF THE COMMUNITY TRACKING STUDY AND THE HOUSEHOLD SURVEY

This guide is intended to assist researchers in using the Community Tracking Study (CTS) 2003 Household Survey Restricted Use File. The CTS is a national study of the rapid changes in the health care market and the effects of those changes on people.¹ Funded by the Robert Wood Johnson Foundation, the study is being conducted by the Center for Studying Health System Change (HSC). Additional documentation and detailed information on the file layout and content are available in *Community Tracking Study 2003 Household Survey Restricted Use File: Codebook*. Information about other aspects of the CTS is available from HSC at www.hschange.org. Technical assistance on issues related to the data file may be obtained by contacting the CTS Help Desk by e-mail at ctshelp@hschange.org or fax (202-863-1763).

1.1. CTS OBJECTIVES

The CTS is designed to provide a sound information base for decisions made by health care leaders by collecting information on how the health system is evolving in 60 communities across the United States and the effects of those changes on people. Underway since 1996, the CTS is a longitudinal project that relies on periodic site visits and surveys of households and physicians.² While many studies have examined leading markets in California and Minnesota and analyzed local or selected data, there has been no systematic study of change in a broad cross-section of U.S. markets or analysis of the effects of those changes on service delivery, cost and quality. The Community Tracking Study is designed to provide sound empirical evidence that will inform the debate about health system change. The study addresses two broad questions that are important to public and private health decision-makers:

How is the health system changing? How are hospitals, health plans, physicians, safety net providers and other provider groups restructuring, and what key forces are driving organizational change?

How do these changes affect people? How are insurance coverage, access to care, use of services, health care costs and perceived quality of health care changing over time?

Focusing on communities is central to the design of the CTS. Understanding market changes requires studying local markets, including their culture, history, and public policies relating to health care. HSC researchers randomly selected 60 communities to provide a representative profile of change across the United States (see Table 1.1). Of these communities (“sites”), 12 are studied in depth, with site visits (“case studies”) and survey samples large enough to draw conclusions about change in each community. These 12 communities are referred to as the “high-intensity sites.”

¹ An overview of the Community Tracking Study is contained in Kemper et al. (1996).

² Surveys of employers and insurance plans have also been conducted.

1.2. ANALYTIC COMPONENTS OF THE COMMUNITY TRACKING STUDY

The CTS has both quantitative and qualitative components. The quantitative component consists of surveys, and the qualitative component consists of site visits.

In all 60 sites, HSC has conducted independent surveys of households and physicians. The Household Survey has been conducted in 1996-97, 1998-99, 2000-01, and 2003. The Physician Survey has also been conducted in 1996-97, 1998-99, and 2000-01, and data collection for the fourth survey is scheduled for spring 2004 to spring 2005. In addition to the household and physician surveys, the quantitative component of the CTS has also included two other surveys. The Followback Survey was conducted as a supplement to the 1996-97 Household Survey and the 1998-99 Household Survey. For this survey, the privately financed health insurance policies covering Household Survey respondents were “followed back” to the organization that administered the policy. The purpose of the Followback Survey was to obtain more detailed and accurate information about those private policies than Household Survey respondents could provide. A CTS survey of employers that was sponsored by the Robert Wood Johnson Foundation was conducted by RAND in 1996 and 1997.³

Case studies in the 12 high-intensity sites make up the qualitative component of the CTS. The first four rounds of comprehensive case studies of the health systems in the 12 communities are completed. The first round was conducted in 1996-97, the second in 1998-99, the third in 2000-01, and the fourth in 2002-03. The fifth round is being conducted in 2005. The findings are available from HSC.⁴

³ The household and physician surveys were conducted by HSC. The Employer Survey was conducted by RAND in collaboration with HSC. The surveys are available separately as both public and restricted use files. While these three surveys were conducted in the same communities, they were independent of one another and do not allow for the linking of persons, employers, or physicians.

⁴ Community reports from each round are available through the HSC web site at www.hschange.org.

TABLE 1.1

SITES SELECTED FOR THE COMMUNITY TRACKING STUDY

High-Intensity Sites	Low-Intensity Sites	
Metro areas >200,000 population	Metro areas >200,000 population	Metro areas <200,000 population
01-Boston (MA)	13-Atlanta (GA)	49-Dothan (AL)
02-Cleveland (OH)	14-Augusta (GA/SC)	50-Terre Haute (IN)
03-Greenville (SC)	15-Baltimore (MD)	51-Wilmington (NC)
04-Indianapolis (IN)	16-Bridgeport (CT)	
05-Lansing (MI)	17-Chicago (IL)	Nonmetropolitan Areas
06-Little Rock (AR)	18-Columbus (OH)	
07-Miami (FL)	19-Denver (CO)	52-West Central Alabama
08-Newark (NJ)	20-Detroit (MI)	53-Central Arkansas
09-Orange County (CA)	21-Greensboro (NC)	54-Northern Georgia
10-Phoenix (AZ)	22-Houston (TX)	55-Northeastern Illinois
11-Seattle (WA)	23-Huntington (WV/KY/OH)	56-Northeastern Indiana
12-Syracuse (NY)	24-Killeen (TX)	57-Eastern Maine
	25-Knoxville (TN)	58-Eastern North Carolina
	26-Las Vegas (NV/AZ)	59-Northern Utah
	27-Los Angeles (CA)	60-Northwestern Washington
	28-Middlesex (NJ)	
	29-Milwaukee (WI)	
	30-Minneapolis (MN/WI)	
	31-Modesto (CA)	
	32-Nassau (NY)	
	33-New York City (NY)	
	34-Philadelphia (PA/NJ)	
	35-Pittsburgh (PA)	
	36-Portland (OR/WA)	
	37-Riverside (CA)	
	38-Rochester (NY)	
	39-San Antonio (TX)	
	40-San Francisco (CA)	
	41-Santa Rosa (CA)	
	42-Shreveport (LA)	
	43-St. Louis (MO/IL)	
	44-Tampa (FL)	
	45-Tulsa (OK)	
	46-Washington (DC/MD)	
	47-West Palm Beach (FL)	
	48-Worcester (MA)	

Notes:

The numbers listed above are site identifiers and are provided in the data file as the variable SITE.

Classification by population (greater or less than 200,000) reflects sample design considerations and is based on population estimates for 1992. See Chapter 2 for more information on the sample design.

1.3. THE HOUSEHOLD SURVEYS

The Household Surveys for 1996-97, 1998-99, 2000-01, and 2003 have been funded by the Robert Wood Johnson Foundation and conducted under the direction of HSC. Mathematica Policy Research, Inc. (MPR) was the primary contractor for survey designs, instrument development, sample designs and implementation, most of the interviewing, weighting, and variance estimation. Social and Scientific Systems, Inc. (SSS) was instrumental in converting the raw survey data into a data file suitable for analysis. MPR, SSS, and HSC collaborated to prepare the documentation for the CTS Household Survey Restricted Use File.

The Household Survey instruments covered a wide variety of topics, including health insurance, use of health services, satisfaction with care, health status, and demographic information. A family informant provided information on insurance coverage, health resource use, usual source of care, and general health status of all family members. This informant also provided information on family income as well as employment, earnings, employer-offered insurance plans, and race/ethnicity for all adult family members. Each adult in the family (including the informant) responded through a self-response module (SRM) to questions regarding unmet needs, patient trust, satisfaction with physician choice, detailed health questions, risk and smoking behaviors, and the last doctor visit. The SRM included mostly subjective questions that could not be answered reliably by proxy respondents. The family informant responded on behalf of children regarding unmet needs and satisfaction with physician choice.⁵ The adult family member who took the child to his or her last doctor visit responded to questions about this visit. (This adult family member might not have been the family informant.) A Spanish version of the instrument was used when appropriate. The survey instruments used in each round of the Household Survey have been similar but not identical. Chapter 2 contains more detailed information on the changes between 2000-01 and 2003.

The surveys were administered by telephone, using computer-assisted telephone interviewing technology. Although the majority of the respondents in each round were selected through the use of a list-assisted random-digit-dialing sampling methodology, families without working telephones were represented in the sample as well. Field staff using cellular telephones enabled these families to complete interviews.

A sample of the telephone numbers from the 2000-01 random-digit-dialing sample was included in the 2003 sample to improve precision for estimates of population change, to reduce costs, and to marginally increase response rates. While there are some individuals who responded to both surveys, the samples were not specifically designed as a longitudinal panel. The design does allow for comparisons of cross-sectional estimates across 1996-97, 1998-99, 2000-01, and 2003.

Interviews for 46,587 individuals from 25,419 family insurance units (FIUs) were completed between February 2003 and February 2004.⁶

⁵In families with more than one child under age 18, one child was randomly selected for inclusion in the survey.

⁶The family insurance unit (FIU) is based on groupings of people typically used by insurance carriers. It includes an adult household member, spouse, and dependent children up to age 18 (or age 18-22 if the child is in school). A more detailed definition of the FIU is presented in Chapter 2.

1.4. THE HOUSEHOLD SURVEY RESTRICTED USE AND PUBLIC USE FILES

Two versions of the CTS Household Survey data are available to researchers: the Restricted Use File and the Public Use File. The *Restricted Use File* may only be used under the conditions listed in the *Community Tracking Study Household Survey Restricted Use Data Agreement*. This agreement provides details on ownership of the data, when the data may be accessed and by whom, how the data may be used and reported, the data security procedures that must be implemented, and the sanctions that will be imposed in the case of data misuse. Researchers must specifically apply to the Inter-university Consortium for Political and Social Research (ICPSR) for use of the Restricted Use File. Copies of the agreement and a description of the application process are available from the ICPSR web site at www.icpsr.umich.edu.

The Restricted Use File is provided to researchers for use on only a specific research project (new applications would be required for subsequent analyses) and for a limited time, after which all copies of the data must be destroyed. Moreover, researchers using the Restricted Use File may be required to undertake costly or inconvenient security measures.

The Public Use File is also available from ICPSR. Researchers need not specifically apply for use of the Public Use File. It is suitable for most researchers who wish to perform analysis at the national or site level. The Public Use File does not contain any county information. The Public Use File contains observations on the same individuals and families as the Restricted Use File.

The Public Use and Restricted Use versions differ in the amount of geographic detail provided and the confidentiality masking applied to some variables. The Restricted Use File contains site, state and county-level identifiers for each observation, while the Public Use File contains only site and state identifiers. In addition, some of the values for the state identifiers have been altered in the Public Use File but not in the Restricted Use File. Only the Restricted Use File contains information that allows the user to identify households and people that are part of both the 2000-01 (Round Three) and 2003 (Round Four) samples. Lastly, there are a number of analytic variables that are available only on the Restricted Use File, including adult chronic conditions, children's special health care needs, and U.S. citizenship. See Appendix C for a complete list of variables on the public and restricted versions of the data file.

CHAPTER 2

THE STRUCTURE AND CONTENT OF THE COMMUNITY TRACKING STUDY 2003 HOUSEHOLD SURVEY

There were a number of steps involved in conducting the 2003 Household Survey, as shown in Figure 2.1. This chapter describes those steps and also includes information on the survey questions and final sample counts.

To better understand the survey description below, it is useful to be familiar with the two-tier design of the 2003 Household Survey.⁷ The two-tier sample design makes it possible to develop estimates at the national and community (site) levels:

- The first tier is a sample from 12 communities, in each of which a large number of households were surveyed. The sample in each of these “high-intensity” sites is large enough to support estimates in each site.
- The second tier is a sample from 48 communities, in each of which a smaller sample of households were surveyed. This sample of “low-intensity” sites allows us to validate results from the high-intensity sites and permits findings to be generalized to the nation.

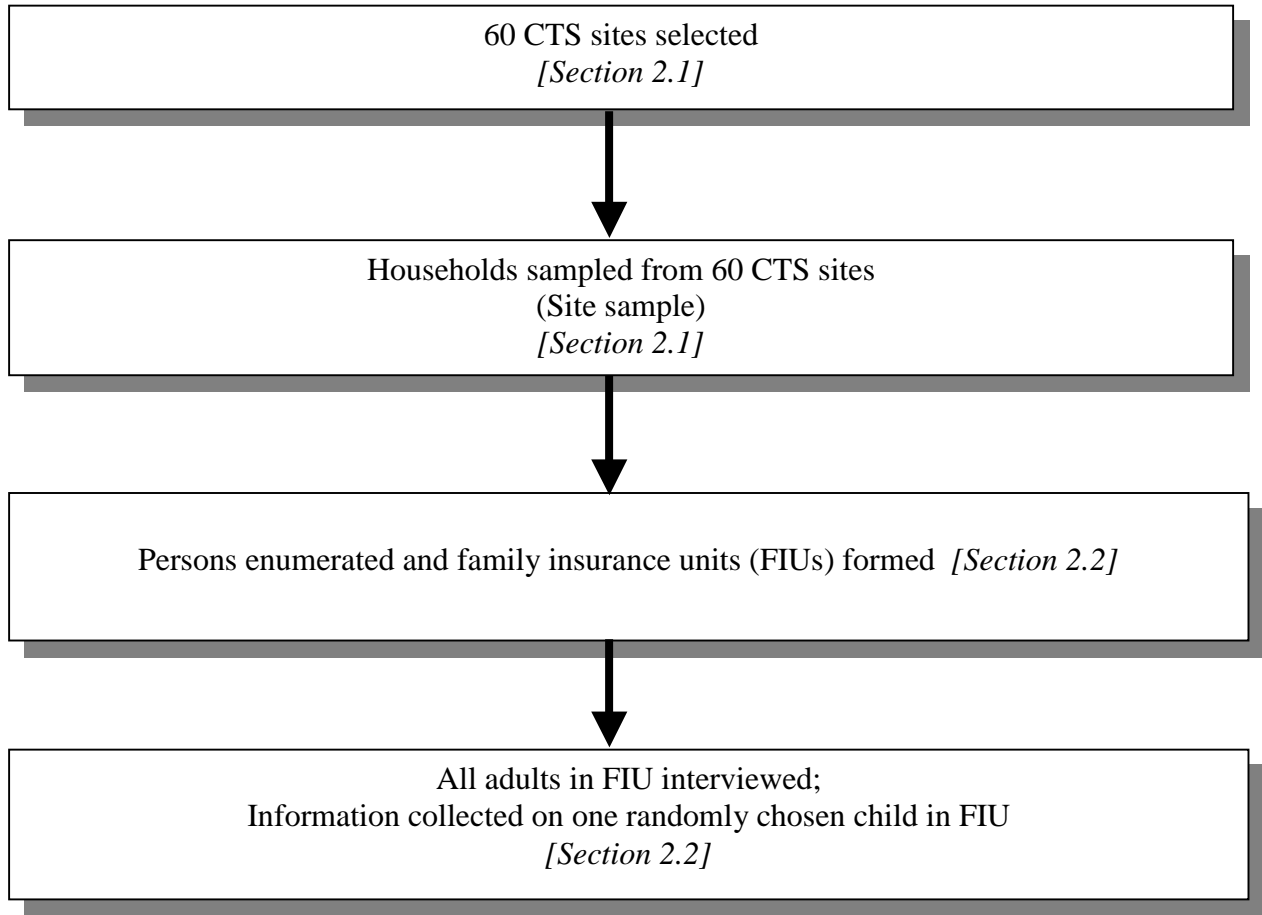
The first and second tiers together are known as the *site sample*.

The analysis of survey data from this sample design is more complex than it would be if a simpler sample design were used. Chapter 3 explains how to choose the sample and weighting variables appropriate for your analysis.

⁷ The sample design for previous years of the Household Survey included a third tier, which was a smaller, independent national sample known as the *supplemental sample*.

FIGURE 2.1

OVERVIEW OF 2003 HOUSEHOLD SURVEY PROCEDURES



2.1. SITE SAMPLE

As discussed in Chapter 1, the primary goal of the CTS is to track health system change and its effects on people at the local level. Therefore, we selected 60 communities (*sites*) to provide a representative profile of change across the U.S.; the sample drawn from those sites constitutes the *site sample*. The first step in designing the CTS site sample was to determine the appropriate sites to study. Three issues were central to the sample design: the definition of the sites, the number of sites, and the selection of the sites.

2.1.1. Definition of Sites

The sites encompass local health care markets. Although there are no set boundaries for these local markets, the intent was to define areas such that residents predominately used health care providers in their area and providers served predominately area residents. The sites generally conform to the metropolitan statistical areas (MSAs) defined by the Office of Management and Budget (OMB) and the nonmetropolitan portions of the economic areas defined by the Bureau of Economic Analysis (BEAEAs).⁸

Although the definitions of some of those areas have changed during the period since the design of the CTS, the CTS sites have retained their original geographic definitions. For example, the four counties defining the Little Rock (Arkansas) site are Faulkner, Lonoke, Pulaski, and Saline, which comprised the Little Rock – North Little Rock MSA at the time the CTS was designed. Even though the OMB definition of the Little Rock – North Little Rock MSA has changed and currently consists of six counties (Faulkner, Grant, Lonoke, Perry, Pulaski, and Saline), the CTS site is still considered to be just the original four counties.⁹ The *Community Tracking Study Site-County Crosswalk* identifies the specific counties, by FIPS code, that make up each CTS site.

2.1.2. Number of Sites

The next step in creating the site sample was to determine the number of high-intensity sites. The high-intensity sites have larger samples, and they are also the sites used for the case studies described in Chapter 1. In making this decision, we considered the tradeoffs between data collection costs (case studies plus survey costs) and the research benefits of a large sample of sites. The research benefits of a larger number of sites include a greater ability to empirically examine the relationship between health system change and its effect on care delivery and consumers and to make the study findings more “generalizable” to the nation. Despite the cost advantages of conducting intensive case studies in fewer sites, focusing on a smaller number of communities makes it more difficult to distinguish between changes of general importance and changes or characteristics unique to a community. Solving this problem by increasing the number of case study sites would make the cost of data collection and analysis prohibitively high.

We chose 12 sites for intensive study and added 48 sites for less-intensive study. The sample drawn from these 60 high-intensity and low-intensity sites forms the *site sample*. Although there

⁸ For more details on the definition of CTS sites, refer to Metcalf et al. (1996).

⁹ The revised MSA definition comes from the appendix to OMB Bulletin No. 04-03 (February 2004).

was no formal scientific basis for choosing 12 high-intensity sites, this number reflects a balance between the benefits of studying a range of different communities and the costs of doing so. The addition of 48 low-intensity sites solves the problem of limited generalizability associated with only 12 sites and provides a benchmark for interpreting how representative the high-intensity sites are.

2.1.3. Site Selection

Once the number of sites for the site sample had been determined, we selected the actual sites, shown previously in Table 1.1. Sites were sampled by stratifying them geographically by region and selecting them randomly, with probability in proportion to their 1992 population. There were separate strata for large MSAs (population of more than 200,000), small MSAs (population of less than 200,000), and nonmetropolitan areas. The 12 high-intensity sites were selected randomly from the large MSAs. Among the 48 low-intensity sites, 36 are large MSAs, 3 are small MSAs, and 9 are nonmetropolitan sites. The *Community Tracking Study Site-County Crosswalk* identifies the specific counties, by FIPS code, that make up each CTS site. This sampling approach provided maximum geographic diversity, judged critical for the 12 high-intensity sites in particular, and acceptable natural variation in city size and degree of market consolidation.¹⁰ Figure 2.2 shows how the sample is divided between high-intensity and low-intensity sites.

¹⁰Additional information about the number of sites and the random selection of the site sample is available in Metcalf et al. (1996).

FIGURE 2.2

THE CTS 2003 HOUSEHOLD SURVEY SAMPLE STRUCTURE

Site Sample
(46,587 individuals)

<p>High-Intensity Sites (20,436 individuals)</p> <p>Site 1</p> <p>Site 2</p> <p>Site 3</p> <p>.</p> <p>.</p> <p>.</p> <p>Site 12</p>
<p>Low-Intensity Sites (26,151 individuals)</p> <p>Site 13</p> <p>Site 14</p> <p>Site 15</p> <p>.</p> <p>.</p> <p>.</p> <p>Site 60</p>

2.2. CONDUCTING THE HOUSEHOLD SURVEY

After selecting the sample sites, we selected households within each site for the site sample. The 1996-97 Household survey used a sample that was derived by randomly selecting households using Random Digit Dialing techniques. This was augmented with a non-telephone sample consisting of households that did not have a telephone.¹¹

The sample for all subsequent years of the Household Survey was derived by randomly selecting a sample of the previous survey's telephone numbers and adding some randomly selected households with telephone numbers that were not part of the previous survey's sample. For the non-telephone sample, we attempted to recontact the addresses that were part of the previous survey's non-telephone sample and contact some new addresses of households without telephones. Thus, the 2003 sample consists of a combination of people who were in the 2000-01 sample and people who were not.

Our goals in sampling the previous survey's telephone numbers were to improve precision for estimates of population change, to reduce costs, and to increase response rates. We did not attempt to trace individuals between surveys because of poor tracking information and the expected high cost and low response rates for movers. Consequently, the CTS Household Surveys from 1996-97, 1998-99, 2000-01, and 2003 should not be considered a panel survey but rather as a series of cross-sectional surveys.

Data users who are working with data from the 2003 survey and any of the previous years will notice that the sample for 2003 is considerably smaller (46,587 people in 2003, compared to 60,446 in 1996-97, 58,956 in 1998-99, and 59,725 in 2000-01). There are three reasons for the decrease in sample size. First, the basic sample design for 2003 is different in that it lacks a *supplemental sample*, which was a smaller, independent national sample of about 5,900 people used in each of the earlier three surveys. Second, there were reductions in the size of the site sample in the high-intensity sites in order to reduce survey costs. Third, due to the lower overall response rate in the 2003 survey (reflecting a general downward trend in response rates), most low-intensity sites have slightly smaller samples in 2003 than in 2000-01.

Once we contacted the selected households, we determined the composition of each household, grouped household members into family insurance units (FIUs), and obtained information on each adult in each FIU. If an FIU contained one child, we collected information about him or her. If an FIU contained two or more children, we collected information about one randomly selected child. The interview process is described below.

¹¹ The non-telephone sample consisted of households in the high-intensity sites who did not have telephones or who had substantial interruptions in telephone service. Within the high-intensity sites, the general strategy was to select geographic clusters through probability proportional to size sampling; count, list, and select housing units within these clusters; and screen this sample for eligible households. Refer to Strouse et al. (1998) for details.

2.2.1. Households

At the beginning of the interview, a household informant was identified (typically the person who answered the phone, if it was an adult) and queried about the composition of the household.¹² The person who owned or rented the home was identified as the head of the household, or the householder. People who usually live in the household but who were temporarily living elsewhere, including college students, were included in the household. Note that not all household members are included on the data file (see Section 2.2.4.).

2.2.2. Family Insurance Units

Individuals in the household were grouped into family insurance units (FIUs).¹³ An FIU reflects family groupings typically used by insurance carriers, which differ from groupings defined by the Bureau of the Census.¹⁴ An FIU is also similar to the filing unit used by Medicaid and state-subsidized insurance programs. The FIU includes an adult household member, his or her spouse, if any, and any dependent children 0-17 years of age or 18-22 years of age if a full-time student (even if living outside the household).

All FIUs were selected to participate in the remainder of the interview as long as there was at least one civilian adult in the unit.¹⁵ In each FIU, one informant was responsible for providing the bulk of the information about the family and its members. Figure 2.3 shows how one household of seven people could be divided into three FIUs. In this example, the head's spouse is the household informant because he/she answered the telephone and is familiar with the composition of the household. Because he/she is also familiar with the health care of his/her family members, he/she is also the informant for the first FIU (F1). The head's father is the informant for family unit two (F2), and the unrelated boarder responds for him- or herself (F3). The head's daughter is the randomly selected child in F1, and the head's son is not in the survey.¹⁶

¹²Note that the household informant was identified only for the purpose of obtaining information to be used in identifying family insurance units. The household informant is not identified on the data file. Designation of the household informant in one survey had no bearing on the designation of the household informant in a subsequent survey.

¹³ FIUs were constructed using information collected in the current survey. The structure of the FIUs in the previous survey, if available, had no bearing on the FIUs in the current survey.

¹⁴The Census Bureau's definition of a family includes all people related to the head of the household either by blood or marriage; it is often larger than an FIU.

¹⁵For the Household Survey, individuals who were not on active military duty at the time of the interview were considered to be civilians.

¹⁶The distinction between an FIU and a Census family can also be illustrated by Figure 2.3. Family insurance units F1 and F2 together would constitute a Census family unit.

FIGURE 2.3

EXAMPLE OF FIUs IN A HYPOTHETICAL HOUSEHOLD

FIU	Members of Household	Included in Survey	Household Informant	Family Informant
F1	Head of Household	✓		
	Head of Household's Spouse	✓	✓	✓
	Head of Household's Daughter	✓		
	Head of Household's Son			
F2	Head of Household's Father	✓		✓
	Head of Household's Mother	✓		
F3	Unrelated Boarder	✓		✓

2.2.3. Individuals

In addition to providing information about his or her FIU, each family informant was asked questions about his or her own health care situation and experiences. Other civilian adults in the FIU were similarly interviewed. In FIUs containing more than one child, information on one randomly selected child was collected. "Child" was defined as an unmarried individual younger than 18. As stated above, full-time college students (age 18-22), even if they were living away from home at the time of the survey, were listed as household members and were included in their parents' FIU. These students were treated as adults in the survey; that is, they were asked all the questions asked of adults and could not be the randomly selected child.

Selection of children in 1998-99, 2000-01, and 2003 was random within an FIU if the FIU contained no children interviewed in the previous survey. If an FIU contained one child for whom data were collected in the previous survey, that child was selected. If there were more than one such child (as FIUs from the previous round were combined), we randomly selected one of them.

2.2.4. Individuals Excluded from the File

The computerized survey instrument imposed a maximum of eight persons per household to be included in the survey. All members of responding households were identified by the household informant, but in the rare instance of households exceeding eight persons, the interviewers were instructed to list all adults in the household first and then as many children as possible before reaching the maximum. However, the fact that a household member was enumerated does not necessarily mean that the person ended up on the survey data file. As mentioned, in families with more than one child under age 18, one child was randomly selected for the survey. Any children not selected were left out of the survey but are represented statistically by the children who are in the survey.

Some household members were classified as ineligible and therefore not included on the file. To avoid giving unmarried full-time college students (age 18-22) multiple chances of selection, they were excluded from sampled dwellings in which their parents did not reside. Similarly, unmarried children under age 18 with no parent or guardian in the household were also excluded. Adults on active military duty were also classified as ineligible. Families in which all adults were active duty military personnel were considered ineligible for the survey and were excluded from the survey.

Some of the families listed by, but not including, the household informant did not respond to the interview. Nonresponding families were excluded from the file but are statistically represented by responding families. Adult family members who did not respond to the Self-Response Module were included on the file as long as the core interview contained a large enough set of responses for them.

2.3. HOUSEHOLD SURVEY QUESTIONS

Respondents to the survey were questioned about the following:

- Household composition
- Health insurance coverage
- Use of health services
- Health expenses and bills
- Unmet needs
- Usual source of care
- Affordable medical care for the uninsured
- Patient trust and attitudes
- Satisfaction with health care and health plan
- Last doctor visit
- Health status, adult chronic conditions, and children's special health care needs
- Risk attitudes and smoking behavior
- Height and weight
- Employment and employer health insurance offerings
- Earnings and family income
- Ethnicity, race, and U.S. citizenship
- Demographic characteristics

Not all questions were asked of all respondents. Table 2.1 shows the topics covered in the survey and who, according to the hypothetical household in Figure 2.3, responded to the questions under each section. Table 2.2 delineates the survey content in more detail, and variables that are available only on the Restricted Use File are noted. Detailed documentation for the computer-assisted telephone interview program, the equivalent of a survey instrument, is provided in Appendix A.¹⁷ Appendix B is a simplified representation of Appendix A.

2.3.1. Differences in Survey Content and Data Files Across Rounds

Although most of the Household Survey questionnaire remained the same between 2000-01 and 2003, there were a number of changes, as described below. See the user's guides for the 1998-99 Household Survey for information on the differences between the 1996-97 (Round One) and 1998-99 (Round Two) surveys. Likewise, see the user's guides for the 2000-01 Household Survey for information on the differences between the 1998-99 (Round Two) and 2000-01 (Round Three) surveys. You can also refer to Appendix C for a complete list of variables that are available for each year of the public use and restricted use data files.

2.3.1.1. Replaced Variables

The following are the variables on the 2003 Household Survey data files that replace similar variables from 2000-01:

- The variables R3HHIDX and R3PID (which identify respondents to the 2000-01 survey) replace the 2000-01 variables R2HHIDX and R2PID (which identify respondents to the 1998-99 survey). (*Restricted Use File only*)
- The variables LSTUSC, LSTOER, LSTAPP, and LSTAPXX (LSTAPPX on the Restricted Use File) replace the 2000-01 variables LSTUSCA, LSTOERA, LSTAPPA, and LSTATXX (LSTATAX on the Restricted Use File), which were coded only for adults. See Table 5.6 for more details.
- The variables FLCALM4 and FLDOWN4 replace the 2000-01 variables FLCALM and FLDOWN. See Table 5.6 for more details.
- The variable ELUNINS4 replaces the 2000-01 variable ELUNINS. See Table 5.6 for more details.
- The variables RACNEWX and RACETHX replace the 2000-01 variables RACEX and RACEREX. See Table 5.6 for more details.
- The variable PHNOTH4X replaces the 2000-01 variable PHNOTHX. See Table 5.6 for more details.

¹⁷ The term "interviewing unit" used in the questionnaire is synonymous with FIU. The term "householder" used in the questionnaire is synonymous with household informant.

2.3.1.2. Added Variables

There were a considerable number of questions added to the 2003 Household Survey. The following is a list of the variables that are new for 2003, most of which are a result of the new survey questions.

- Sources of information on private plans (booklet, website): PBKLET1 – 3 and PWEB1 – 3. (*Restricted Use File only*)
- Premium payments for employer-sponsored insurance: ESICST1, ESICST2, ESICST3, ESIPRM1X, ESIPRM2X, and ESIPRM3X. See notes in Table 5.6 about data quality issues for these variables.
- Coverage of prescription medicines and pre-existing conditions for non-group (i.e., not employer- or union-sponsored) insurance: PRVRX1 – 3, PVHIPM1 – 3, and PVCVPX1 – 3. (*Restricted Use File only*)
- Expectation about Medicaid eligibility: UNINMCD.
- Last visit to emergency room: ERLSTVS, ERCNTAC, ERUSEDR, ERTRYDR, EROTHPL, ERCHOSE (*Restricted Use File only*), and ERADMIT.
- Additional questions on unmet need: UMETDR, UMETDRX, UMETSP, UMETSPX, UMETTST, UMETTSX, UMETPRC, and UMETPRX.
- Problems with paying medical bills: BILLPRB, BILLCOL, BILLNEC, BILLMAJ, BILLSAV, and BILLBOR.
- Place providing affordable medical care for the uninsured: USCPAY, AFFRDCR, AFFDTYP (*Restricted Use File only*), AFFTRAV (*Restricted Use File only*), AFFSEEN, AFFRSON, and AFFRSN1 – AFFRN12.
- Opinions about seeing doctors: DRFEELB and DRAVOID.
- Satisfaction and experience with health plan: DIFFLNG, GETREFR, REQAPRVA, GETAPRVA, REQPWRK, PAPRWRKA, and BNFSAFX.
- Charge for most recent doctor visit for the uninsured: UNINFEE and UNINPAY. (*Restricted Use File only*)
- Variables from the “symptom response” questions about recent health problems/symptoms, the health care sought for one of those problems, and that problem’s effect on the ability to do usual activities: SYNECK, SYBRETH, SYFAINT, SYBLUR, SYHACHE, SYCOUGH, SYSAD, SYANXTY, SYHIP, SYANKLE, SYWEAK, SYLUMP, SYURINE, SYHEAR, SYCHEST, SYLINK, SYMAPPR, SYMPREG, SYMTODR, DRSEE, DRTALK, DRCALL, DRNEED, DRCNTAC, DRTRYGO, SYMLMT, SYMLMTD, SYMMISS, SYMMSSD, and SICKLVE. (*Restricted Use File only*)

- Body mass index: BMIX and BMICAT.
- Children with special health care needs¹⁸: KRXUSE, KRXUSEX, KRXUSEY, KMORE, KMOREX, KMOREY, KLIMIT, KLIMITX, KLIMITY, KTHERA, KTHERAX, KTHERAY, KCOUNS, KCOUNSX, KCOUNSY, and CSHCN. (*Restricted Use File only, except CSHCN*)
- Health insurance through union: CVUNION and WHOOFER. (*Restricted Use File only*)
- Current health plan (if not employer's) compared to plans offered by employer: EMPLESS, EMPSAME, CHGPLDR, and CHGPLRX. (*Restricted Use File only*)
- U.S. citizenship and residence: CITIZEN, BORNCTZ, and YRSUSX. (*Restricted Use File only*)
- Weights for site estimates from the site sample: WTFAM6 and WTPER6
- Weights for the set of questions on recent health problems/symptoms, the health care sought for one of those problems, and that problem's effect on the ability to do usual activities: WTSYM2 and WTSYM6. (*Restricted Use File only*)

2.3.1.3. Dropped Variables

Below is a list of variables that were dropped from the 2003 Household Survey data files. Except for the administrative variables, the imputation flags, and the weights/sampling variables, all the variables were dropped because they were associated with questions that were dropped from the 2003 survey.

- SITEID. In previous years of the survey, SITEID indicated the sites for people in the augmented site sample. Because of changes to the sample design for the 2003 survey, there is no separate augmented site sample. Therefore, SITEID is no longer necessary. (The variable SITE is the only variable needed.)
- SITEFLAG. In previous years of the survey, SITEFLAG identified whether someone was in the site sample only, in the supplemental sample only, or in both samples. Because the sample design for the 2003 survey does not include a supplemental sample (which means that everyone is in the site sample only), SITEFLAG is no longer necessary.
- Modified FIPS code: MFIPS. This was a variable indicating the modified FIPS code used in the Area Resource File (ARF). The modified FIPS code is no longer necessary because the ARF discontinued using it as of February 2001.

¹⁸ These variables provide information from questions scsn1 – scsn5b. Questions scsn1 – scsn5 come directly from the Children with Special Health Care Needs (CSHCN) Screener, which was developed through the Child and Adolescent Health Measurement Initiative. Question scsn5a is not from the CSHCN Screener, and question scsn5b is a slight rewording of Screener question 5a.

- Preventive services: FLUSHOT, MAMMGM, and MAMLASX.
- Most of the variables for the SF-12 Physical and Mental Health Summary Scale¹⁹: LMTACT, LMTSTR, PHYLESS, PHYACT, EMOLESS, EMOACT, PAININT, LMTSOC, ENERGY, PCS12, and MCS12. (Note that the survey questions for FLCALM and FLDOWN remain, but the variables have been renamed FLCALM4 and FLDOWN4 because they are no longer imputed. See the list in Section 2.3.1.1.) Imputation flags for all of the variables for the SF-12 Physical and Mental Health Summary Scale have also been dropped.
- Most smoking questions: SMKNUM, SMKDAY, SMKNDAX (SMKNDAY on the Restricted Use File), SMKQUIT, and SMKTRYQ.
- Children's chronic conditions: KEARINF, KASTHMA, KASTHMX, KADHA, KADHAX, KMORECR, and KLONGCR. (*Restricted Use File only*)
- Consumer sources for obtaining health information: GETINF1 – 7, DRINF, and TESTINF.
- Weights and sampling variables for estimates that can no longer be made because of changes in the sample design. (See Appendix C for a complete list.)
- Also see Section 2.3.1.1 for the variables that have been replaced by similar variables.

2.4. HOUSEHOLD SURVEY ADMINISTRATION AND PROCESSING

The survey was administered by telephone, using computer-assisted telephone interviewing technology. Although the majority of the respondents were selected using list-assisted random-digit-dialing sampling methodology, families without working telephones were represented in the sample as well.²⁰ Field staff provided a cellular telephone so that family members could respond to the computer-assisted telephone interview. The survey was fielded between February 2003 and February 2004. The total number of completed interviews consisted of 25,419 FIUs and 46,587 individuals. The overall weighted response rate for FIUs was 56.5 percent. Tables 2.3 and 2.4 show the number of FIUs and individuals interviewed for each site.

¹⁹ See Ware, Kosinski, and Keller (1995) for more information on the SF-12.

²⁰ For more details on survey sampling and operations, refer to the *Community Tracking Study Household Survey Methodology Report, 2003* (forthcoming). That report will be available as an HSC Technical Publication (www.hschange.org).

TABLE 2.1
SOURCE OF DATA FOR INDIVIDUALS, BY QUESTION TOPIC
(Illustrative household described in Figure 2.3)

Family Insurance Unit Member	Household Composition (Sec. A)	Insurance Coverage (Sec. B)	Service Use/ Expenses and Bills (Sec. C)	Unmet Needs (Sec. C)	Usual Source of Care/ Affordable Medical Care (Sec. D)	Patient Trust and Attitudes (Sec. D)	Satisfaction with Health Care and Health Plan (Sec. E)	Last Doctor Visit (Sec. E)	General Health Status (Sec. E)	Specific Health Status Information (Sec. E)	Risk/ Smoking/ Height and Weight (Sec. E)	Employment/ Earnings/ Employer Plans (Sec. F)	Family Income (Sec. G)	Ethnicity/ Race/ Citizenship (Sec. G)
First Family Insurance Unit														
Family Informant	H	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1	F1
Spouse	H	F1	F1	SRM	F1	SRM	SRM	SRM	F1 and SRM	SRM	SRM	F1	F1	F1
Randomly Selected Child	H	F1	F1	F1	F1	Not Asked	F1	FC	FC or F1	FC or F1	Not Asked	Not Asked	F1	Not Asked
Other Children	H	Data not available – Not randomly selected child.												
Second Family Insurance Unit														
Family Informant	H	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2	F2
Spouse	H	F2	F2	SRM	F2	SRM	SRM	SRM	F2 and SRM	SRM	SRM	F2	F2	F2
Third Family Insurance Unit														
Unrelated Adult	H	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3	F3

Notes:

H	Data provided by the household informant (typically person who answers the telephone, if adult).
Fi	Data provided by family informant for family insurance unit “i”.
SRM	Data provided by the individual adult family member via the Self-Response Module questions.
Fi and SRM	Data on general health status provided by the family informant and each individual adult family member via the Self-Response Module. In constructing the variable GENHLH, the SRM response was used when available. Otherwise, the family informant’s response was used.
FC	Data provided by adult who took randomly selected child to last doctor visit. Skip questions if that adult not in family.
FC or Fi	Data provided by adult who took randomly selected child to last doctor visit. Use family informant if that adult not in family.

TABLE 2.2

CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES

Health Insurance (Questionnaire Section B)	
Private insurance coverage	Source of private insurance coverage: Employer- or union-sponsored Directly purchased Provided by someone not in household
Public insurance coverage	Covered by Medicare Covered by both Medicare and supplemental private insurance Covered by Medicaid Covered by other public insurance (military, Indian Health Service, other state and local)
Uninsured	Not covered by public or private insurance
Continuity of coverage and changes in coverage	If uninsured: Whether lost coverage in last 12 months Reason uninsured If insured: Whether changed insurance plan or status in last 12 months Previous insurance type Reason for change in insurance
Insurance plan attributes	Whether plan requires signing up with primary care doctor or clinic for routine care (private insurance, Medicare) Whether plan requires approval or referral to see a specialist (private insurance, Medicare) Whether plan requires choosing a doctor or clinic from a book, directory, or list (private insurance, Medicare) Whether plan is an HMO (private insurance, Medicare, Medicaid, state plan) Whether plan will pay any costs for out-of-network care (private insurance, Medicare) For employer- or union-sponsored insurance: Plan information is available in booklet or on website (<i>Restricted Use File only</i>) Whether policy-holder is paying partial cost and (if paying partial cost) monthly premium contribution ²¹ For private insurance that is not sponsored by employer or union: Monthly premium Coverage of prescription medications (<i>Restricted Use File only</i>) Coverage of pre-existing conditions (<i>Restricted Use File only</i>) Higher premium for pre-existing conditions (<i>Restricted Use File only</i>)
Other insurance variables	Ever enrolled in an HMO Number of total years enrolled in an HMO

²¹ Variables ESICST1, ESICST2, ESICST3, ESPRM1X, ESPRM2X, and ESPRM3X. See Table 5.6 for notes on data quality issues with these variables.

TABLE 2.2
 CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES
 (Continued)

Access to Health Care	
Usual source of care (Section D)	Whether currently has a usual source of care Type of place of usual source of care Type of professional seen at usual source of care Reason for changing usual source of care
Travel/waiting time for physician visit (Section E)	Lag time between making appointment and seeing doctor at last physician visit Travel time to physician's office at last visit Time spent in waiting room before seeing medical person at last physician visit
Difficulty getting needed services in past year (Section C)	Did not get needed services Delayed getting needed services Reasons for delaying or not getting needed services Could not afford prescription medicines
Unmet need: most recent health problem (Section C)	Saw doctor for most recent health problem Postponed seeing doctor for most recent health problem Referred to specialist for most recent health problem Action after getting referral to specialist Doctor ordered/recommended medical tests Action after doctor ordered/recommended medical tests Doctor ordered/recommended medical procedures/surgery Action after doctor ordered/recommended medical procedures/surgery
Problems paying medical bills (Section C)	Any problems paying medical bills Consequences of problems paying medical bills: Contacted by a collection agency Problems paying for other necessities Postponed major purchases Used savings Borrowed
Affordable medical care for the uninsured (Section D)	Uninsured paying full price or lower amount at usual source of care Any local place offering affordable medical care for the uninsured Type of place offering affordable medical care for the uninsured (<i>Restricted Use File only</i>) For place offering affordable medical care (or for usual source of care if not paying full price at usual source of care): Travel time (<i>Restricted Use File only</i>) Anyone in family had visit in last 12 months Reason for not having visit
<i>Topics covering Access to Health Care are continued on next page.</i>	

TABLE 2.2
 CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES
 (Continued)

Access to Health Care	
<i>Topics covering Access to Health Care are continued from previous page.</i>	
Emergency room visits not for accident or injury (Section C)	Last ER visit was for health problem other than accident or injury Able to contact health professional before going to ER Health professional said to go to ER Tried to see/call health professional before going to ER Any other place for treatment besides ER Reason for going to ER instead of other place for treatment (<i>Restricted Use File only</i>) Last ER visit resulted in admission to hospital for overnight stay
Cost of last physician visit for the uninsured (Section E)	What physician charged for last physician visit (<i>Restricted Use File only</i>) What and when person paid for last physician visit (<i>Restricted Use File only</i>)
Resource Use	
Use of ambulatory services in past 12 months (Section C)	Number of physician visits Number of emergency room visits Number of visits to nonphysician providers (nurse practitioner, physician assistant, midwife) Whether there were any mental health visits Number of surgical procedures
Use of inpatient services in past 12 months (Section C)	Number of overnight hospital stays Number of overnight hospital stays excluding delivery/birth Number of inpatient surgical procedures Total number of nights spent in hospital
Nature of last physician visit (Section E)	Reason for last visit: illness/injury or check-up/preventive care Type of physician seen at last visit (PCP or specialist) Whether last visit was to usual source of care Whether last visit was to an emergency room Whether last visit was with appointment or walk-in
Costs (Section C)	Total family out-of-pocket expenses for health care in past 12 months

TABLE 2.2
 CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES
 (Continued)

Satisfaction and Patient Trust	
General satisfaction (Section E)	Overall satisfaction with health care received by family Satisfaction with choice of primary care doctors Satisfaction with choice of specialists
Problems and satisfaction with health plan (Section E)	Difficulty communicating with provider because of different languages Problem getting referral to specialist Needed approval from health plan for care/tests/treatment Problem waiting for approval from health plan Had to fill out paperwork for health plan Problem with paperwork for health plan Satisfaction with amount paying for health care Rating of health plan
Satisfaction with last doctor visit (Section E)	Satisfaction with thoroughness and carefulness of exam Satisfaction with how well doctor listened Satisfaction with how well doctor explained things
Patient's trust in physicians (Section D)	Agree/disagree that doctor may not refer to specialist when needed Agree/disagree that doctor may perform unnecessary tests or procedures Agree/disagree that doctor is influenced by health insurance company rules Agree/disagree that doctor puts patient's medical needs above all other considerations
Attitudes about physician visits (Section D)	True/false: person goes to doctor as soon as s/he starts feeling bad True/false: person will do just about anything to avoid going to the doctor
Employment and Employer Insurance Offerings	
Employment status and characteristics (Section F)	Whether adult respondent has the following characteristics: Owned a business or farm Worked for pay or profit in the past week Had more than one job or business Worked for private company/government/self-employed/family business Average hours worked per week, at primary job and at other jobs Size of firm (number of employees) at all sites Type of industry
Earnings (Section F)	Hourly wage
Health insurance options at place of employment (Sections B and F)	Whether offered, and eligible for, health insurance coverage by employer Reasons for ineligibility Reasons for declining coverage (if eligible but not covered) Whether offered multiple plans Whether offered HMO plan Whether offered non-HMO plan If person is covered by health plan offered by someone else's employer: person's own employer offers health plan with lower or same premium (<i>Restricted Use File only</i>) If person's own employer offers lower- or same-cost plan: Cost of doctor visit is more, less, or same (<i>Restricted Use File only</i>) Cost to fill prescription is more, less, or same (<i>Restricted Use File only</i>)

TABLE 2.2
 CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES
 (Continued)

Health Status (Section E)	
Health status	Overall health status (5-point scale from excellent to poor) How much time calm and peaceful How much time downhearted/blue Body Mass Index (adults)
Chronic conditions for adults	<i>Available on Restricted Use File only.</i> Recent childbirth Abnormal uterine bleeding Diabetes Arthritis Asthma Chronic obstructive pulmonary disease Hypertension Coronary heart disease Skin cancer Other cancer Benign prostate disease Depression Doctor visit for serious medical problem
Children with special health care needs	Child has special health care needs <i>Available on Restricted Use File only:</i> Child needs/uses prescription medicine Child needs/uses more medical care, mental health or educational services than is usual Child is limited in ability to do typical activities Child needs/gets special therapy Child has emotional, developmental, or behavioral problem for which s/he needs/gets treatment or counseling
Smoking	Whether person has smoked at least 100 cigarettes in lifetime Whether currently smoking cigarettes every day, some days, or not at all

TABLE 2.2
 CONTENT OF THE 2003 HOUSEHOLD SURVEY DATA FILES
 (Continued)

Symptom Response Module (Section E)	
Symptom response for adults	<p><i>Available on Restricted Use File only.</i></p> <p>Symptoms: back pain or neck pain, shortness of breath, fainting or loss of consciousness, difficulty seeing, headaches, cough, depression, anxiety, pain in hip/knee/leg, sprained ankle, fatigue, lump in breast (female), difficulty urinating (male age 40 or older), difficulty hearing, chest pain</p> <p>When health problem first appeared</p> <p>Problem is associated with a pregnancy</p> <p>Contacting health professional about problem:</p> <p style="padding-left: 20px;">Saw a health professional about the problem</p> <p style="padding-left: 40px;">Time between start of problem and visit to health professional</p> <p>If person did not see health professional:</p> <p style="padding-left: 20px;">Talked to health professional by phone about problem in the past three months</p> <p style="padding-left: 40px;">Time between start of problem and phone call to health professional</p> <p style="padding-left: 20px;">Person thought s/he needed to see health professional about problem instead of talking on telephone</p> <p>If person did not see or call health professional:</p> <p style="padding-left: 20px;">Person thought s/he needed to contact health professional about problem</p> <p style="padding-left: 40px;">Person tried to see health professional about problem</p> <p>Problem limited ability to do usual activities</p> <p>Number of days limited in ability to do usual activities</p> <p>Missed work because of problem</p> <p>Number of days of work missed</p> <p>Have paid sick leave at job</p>
Other Variables	
Demographics (Sections A and G)	<p>Age</p> <p>Race</p> <p>Gender</p> <p>Highest education level completed</p> <p>U.S. citizenship (<i>Restricted Use File only</i>)</p> <p>Number of years in the U.S. (<i>Restricted Use File only</i>)</p> <p>CTS site</p> <p>State</p> <p>County (<i>Restricted Use File only</i>)</p>
Family income (Section G)	<p>Family income</p> <p>Census family income</p> <p>Census family poverty level</p>
Attitudes (Sections B and E)	<p>Whether person would be willing to accept limited provider choice in order to save on out-of-pocket expenses</p> <p>Whether person agrees that he/she is more likely to take risks than the average person</p> <p>Overall level of happiness</p>

TABLE 2.3

NUMBER OF FAMILY INSURANCE UNITS INTERVIEWED, BY SITE

Site/Geographic Area	Sample Size
TOTAL	25,419
01-Boston (MA)	905
02-Cleveland (OH)	973
03-Greenville (SC)	959
04-Indianapolis (IN)	1,040
05-Lansing (MI)	926
06-Little Rock (AR)	983
07-Miami (FL)	900
08-Newark (NJ)	968
09-Orange County (CA)	904
10-Phoenix (AZ)	871
11-Seattle (WA)	831
12-Syracuse (NY)	1,028
13-Atlanta (GA)	269
14-Augusta (GA/SC)	299
15-Baltimore (MD)	308
16-Bridgeport (CT)	250
17-Chicago (IL)	298
18-Columbus (OH)	282
19-Denver (CO)	297
20-Detroit (MI)	310
21-Greensboro (NC)	295
22-Houston (TX)	290
23-Huntington (WV/KY/OH)	321
24-Killeen (TX)	288
25-Knoxville (TN)	284
26-Las Vegas (NV/AZ)	258
27-Los Angeles (CA)	279
28-Middlesex (NJ)	286
29-Milwaukee (WI)	277
30-Minneapolis (MN/WI)	305

TABLE 2.3

NUMBER OF FAMILY INSURANCE UNITS INTERVIEWED, BY SITE
(Continued)

Site/Geographic Area	Sample Size
31-Modesto (CA)	301
32-Nassau (NY)	266
33-New York City (NY)	272
34-Philadelphia (PA/NJ)	309
35-Pittsburgh (PA)	300
36-Portland (OR/WA)	305
37-Riverside (CA)	290
38-Rochester (NY)	362
39-San Antonio (TX)	299
40-San Francisco (CA)	235
41-Santa Rosa (CA)	307
42-Shreveport (LA)	302
43-St. Louis (MO/IL)	319
44-Tampa (FL)	278
45-Tulsa (OK)	338
46-Washington (DC/MD)	275
47-W Palm Beach (FL)	264
48-Worcester (MA)	288
49-Dothan (AL)	296
50-Terre Haute (IN)	294
51-Wilmington (NC)	264
52-W-Cen Alabama	339
53-Cen Arkansas	345
54-N Georgia	290
55-NE Illinois	276
56-NE Indiana	316
57-E Maine	292
58-E North Carolina	296
59-N Utah	334
60-NW Washington	283

TABLE 2.4
NUMBER OF PERSONS INTERVIEWED, BY SITE

Site/Geographic Area	Sample Size
TOTAL	46,587
01-Boston (MA)	1,582
02-Cleveland (OH)	1,763
03-Greenville (SC)	1,762
04-Indianapolis (IN)	1,844
05-Lansing (MI)	1,720
06-Little Rock (AR)	1,812
07-Miami (FL)	1,614
08-Newark (NJ)	1,728
09-Orange County (CA)	1,644
10-Phoenix (AZ)	1,593
11-Seattle (WA)	1,492
12-Syracuse (NY)	1,882
13-Atlanta (GA)	520
14-Augusta (GA/SC)	535
15-Baltimore (MD)	561
16-Bridgeport (CT)	477
17-Chicago (IL)	569
18-Columbus (OH)	559
19-Denver (CO)	581
20-Detroit (MI)	561
21-Greensboro (NC)	530
22-Houston (TX)	563
23-Huntington (WV/KY/OH)	585
24-Killeen (TX)	541
25-Knoxville (TN)	516
26-Las Vegas (NV/AZ)	462
27-Los Angeles (CA)	484
28-Middlesex (NJ)	557
29-Milwaukee (WI)	528
30-Minneapolis (MN/WI)	587

TABLE 2.4
NUMBER OF PERSONS INTERVIEWED, BY SITE
(Continued)

Site/Geographic Area	Sample Size
31-Modesto (CA)	562
32-Nassau (NY)	511
33-New York City (NY)	452
34-Philadelphia (PA/NJ)	548
35-Pittsburgh (PA)	524
36-Portland (OR/WA)	569
37-Riverside (CA)	567
38-Rochester (NY)	677
39-San Antonio (TX)	549
40-San Francisco (CA)	382
41-Santa Rosa (CA)	559
42-Shreveport (LA)	521
43-St. Louis (MO/IL)	607
44-Tampa (FL)	489
45-Tulsa (OK)	624
46-Washington (DC/MD)	527
47-W Palm Beach (FL)	444
48-Worcester (MA)	546
49-Dothan (AL)	552
50-Terre Haute (IN)	524
51-Wilmington (NC)	486
52-W-Cen Alabama	609
53-Cen Arkansas	639
54-N Georgia	542
55-NE Illinois	526
56-NE Indiana	595
57-E Maine	549
58-E North Carolina	522
59-N Utah	722
60-NW Washington	511

CHAPTER 3

USING THE HOUSEHOLD SURVEY RESTRICTED USE FILE

The 2003 Household Survey Restricted Use File is made up of several samples, each of which is appropriate for certain types of analyses. This chapter explains how to choose the appropriate sample and weight variable according to the various “analytic scenarios” possible under each unit of analysis.²²

3.1. CHOOSING A SAMPLE AND WEIGHT VARIABLE

The first factor relevant to choosing which sample and weight variable to use is the unit of analysis. The Household Survey Restricted Use File contains two units of analysis: the person and the FIU. Person-level analyses are discussed in Section 3.1.1 and FIU-level analyses in Section 3.1.2.

3.1.1. Person-Level Analyses

Most researchers will probably use the person, or individual, as the unit of analysis. The Household Survey Restricted Use File is a person-level file, consisting of one data record for each person in the Household Survey sample.

For person-level analyses, there are two determinants of which sample and weight variable to use: the population of interest (site or national) and the type of model (with or without any symptom response variables). Table 3.1 lists the relevant person-level samples, and Table 3.2 summarizes how these two factors determine the appropriate sample and weight for an analysis.

Weights were computed to make the samples look like the populations to which the results will be applied. The site-specific weight for the site sample (WTPER6) makes the sample look like the civilian non-institutionalized population in our 60 sampled sites; the national weight for the site sample (WTPER2) makes the sample look like the civilian non-institutionalized population in the contiguous United States. Similarly, the site-specific and national weights for the symptom response sample (WTSYM6 and WTSYM2, respectively) make the sample look like the population of all civilian non-institutionalized adults in our 60 sampled sites and in the contiguous United States, respectively.

Table 3.3 lists the “symptom response” variables, which come from questions related to recent health problems/symptoms. There are 675 people with the value “-1 Inapplicable” for all of the symptom response variables despite being in the symptom response sample (i.e., having positive symptom response weights). This is because they were selected to be in the symptom response sample but no responses to the symptom response questions were obtained for them.²³

²² For more details on the definitions and construction of the Household Survey weight variables, refer to the *Community Tracking Study Household Survey Methodology Report, 2003* (forthcoming). That report will be available as an HSC Technical Publication (www.hschange.org).

²³ As explained in Appendices D and F, the full symptom response sample should be processed even if your analysis is limited to the subgroup of people with responses to the symptom response questions.

TABLE 3.1
PERSON-LEVEL SAMPLES IN THE
2003 HOUSEHOLD SURVEY RESTRICTED USE FILE

Sample	Description	File Definition
Site sample	Individuals in households selected only in the 60 CTS sites	All records (N = 46,587 persons)
Symptom response sample	The people who were asked the “symptom response” questions (srm1 – srm10). This group consists of all uninsured adults, all adults age 65 or older, and a sample (one-sixth) of the other adults.	Records with positive values for the symptom response weights, WTSYM2 and WTSYM6. (N=16,266)
Supplemental sample Augmented site sample Combined sample	These samples, which were used in previous years of the Household Survey, are not available for the 2003 survey due to changes in the survey design (specifically, the elimination of the supplemental sample).	

TABLE 3.2

APPROPRIATE SAMPLES AND WEIGHTS FOR PERSON-LEVEL ANALYSES

Type of Model ^a	Recommended Sample	Weight Variable
Population of Interest: Site Population		
Model does not include symptom response variables	Site sample	WTPER6
Model does include symptom response variables	Symptom response sample	WTSYM6
Population of Interest: National Population		
Model does not include symptom response variables	Site sample	WTPER2
Model does include symptom response variables	Symptom response sample	WTSYM2

Notes:

See Table 3.1 for details on the sample that corresponds to each set of weights.
 See Table 3.3 for a list of the symptom response variables.

^a In previous years, the recommended sample and weight for analysis of the national population depended on whether the model included site characteristics. For the 2003 Household Survey, the choice of sample and weight for analysis of the national population is the same regardless of whether the model includes site characteristics.

TABLE 3.3
SYMPTOM RESPONSE VARIABLES

Variable name	Question number	Description
SYNECK	srm1a	Back or neck pain
SYBRETH	srm1b	Shortness of breath
SYFAINT	srm1c	Fainting or loss of consciousness
SYBLUR	srm1d	Difficulty seeing
SYHACHE	srm1e	Headaches
SYCOUGH	srm1f	Cough
SYSAD	srm1h	Depression
SYANXTY	srm1i	Anxiety
SYHIP	srm1j	Pain in hip/knee/leg
SYANKLE	srm1k	Sprained ankle
SYWEAK	srm1m	Fatigue
SYLUMP	srm1q	Lump in breast
SYURINE	srm1u	Difficulty urinating
SYHEAR	srm1v	Difficulty hearing
SYCHEST	srm1w	Chest pain
SYLINK	CV (srm2a – srm9a)	Health problem used in questions srm2a – srm9a
SYMAPPR	CV (srm2a, srm2b)	When health problem first appeared
SYMPREG	srm2c	Problem is associated with pregnancy
SYMTODR	srm3	Saw health professional about problem
DRSEE	srm4	How soon saw health professional
DRTALK	srm5	Telephoned health professional about problem
DRCALL	srm6	How soon telephoned health professional
DRNEED	srm7a	Needed medical visit instead of phone call
DRCNTAC	srm7b	Needed to contact health professional
DRTRYGO	srm7c	Tried to see health professional
SYMLMT	srm8	Problem limited usual activities
SYMLMTD	srm8a	Number of days limited in usual activities
SYMMISS	srm9	Missed work because of problem
SYMMSSD	srm9a	Number of days of work missed
SICKLVE	srm10	Have sick leave as job benefit

NOTE: There are 675 people with the value “-1 Inapplicable” for all of the symptom response variables despite being in the symptom response sample (i.e., having positive symptom response weights). This is because they were selected to be in the symptom response sample but no responses to the symptom response questions were obtained for them.

3.1.1.1. Estimates for Sites

The sample and weight used for analysis of sites depends on whether the research interest is specific sites or types of sites.

As shown in Table 3.2, if your population of interest is the CTS site, we provide weights for site-specific estimates (WTPER6, WTSYM6). Use the *site sample* and WTPER6 if your model does not include any of the symptom response variables, which are listed in Table 3.3. Use the *symptom response sample* and WTSYM6 if your model does include any symptom response variables. In general, we recommend reporting site-level population characteristics for high-intensity sites only; samples for the low-intensity sites are too small to allow for precise estimates.

Note that site-specific estimates in previous years could be calculated only from a sample called the *augmented site sample*, which is not available in 2003. Therefore, calculating site-specific estimates by combining multiple years of data is slightly more complicated than previously, and data users who are interested in doing so should refer to Section 3.2.

As indicated above, if your objective is to make estimates for **specific sites** in our sample, you should use the site-specific weights (WTPER6, WTSYM6). However, if your objective is to analyze **types of sites** in the sample (looking at these 60 sites as representative of all sites in the [contiguous] United States), then you should use one of the national weights (WTPER2, WTSYM2), as discussed below in Section 3.1.1.2. For example, if you want to evaluate a specific CTS site (such as Boston or Miami), you should use the site-specific weight. If you want to compare CTS sites (for example, compare Boston with Miami), you should use the site-specific weight. If you want to expand your results beyond the CTS sites (for example, using the subset of CTS sites that have a high proportion of uninsured people in order to calculate estimates that are representative of all sites in the U.S. that have a high proportion of uninsured people), you should use a national weight.

3.1.1.2. Estimates for National Population

As shown in Table 3.2, if your population of interest is the national population (including subgroups such as the privately insured, children, or residents of large cities), we provide weights for nationally representative estimates (WTPER2, WTSYM2). Use the *site sample* and WTPER2 if your model does not include any of the symptom response variables, which are listed in Table 3.3. Use the *symptom response sample* and WTSYM2 if your model does include any symptom response variables.

3.1.2. FIU-Level Analyses

In addition to the individual, the FIU can also be the unit of analysis because the Household Survey collects information *on* the FIU and *about* multiple people in the FIU. On the data file, information that pertains to the family as a whole (for example, family income) is assigned to the records of each member of the family. (Chapter 5 explains how to prepare an FIU-level data file from the person-level Restricted Use File.)

As shown in Table 3.4, for FIU-level analyses there is only one sample (the *site sample*) and one determinant of which weight variable to use: the population of interest (site or national). If your objective is to make estimates for specific sites, you should use the site-specific weight (WTFAM6). If your objective is to analyze types of sites in the sample, or if your population of interest is the national population, then you should use the weight for nationally representative estimates (WTFAM2). See Section 3.1.1 for more discussion of the types of site and national estimates.

TABLE 3.4

APPROPRIATE SAMPLES AND WEIGHTS FOR FIU-LEVEL ANALYSES

Type of Model ^a	Recommended Sample	Weight Variable
Population of Interest: Site Population		
Any model	Site sample	WTFAM6
Population of Interest: National Population		
Any model	Site sample	WTFAM2

^a In previous years, the recommended sample and weight for analysis of the national population depended on whether the model included site characteristics. For the 2003 Household Survey, the choice of sample and weight for analysis of the national population is the same regardless of whether the model includes site characteristics.

3.2. Using Data From Multiple Years of the Household Survey

As discussed earlier (in Chapter 2), there is some overlap between the 1996-97 and 1998-99 samples, between 1998-99 and 2000-01 samples, and between the 2000-01 and 2003 samples. One advantage of the Restricted Use File over the Public Use File is that the former contains information that allows you to identify specific linkages across the different survey years. There are two ways in which those linkages can be useful: (1) they may provide information that would be helpful if you were to edit or impute variables on your own, and (2) you may be able to realize some additional efficiencies in the variance of the estimates that are calculated using multiple survey years. (In general, any information on linkages across surveys may help control for more random noise, and so the estimates that are generated are likely to be more precise.)

You should note that, although some people and households appear in multiple years of data, a longitudinal “panel” is not defined in any useful way. We do not provide a “panel” weight that would allow you to analyze changes associated with individual persons or families between 1996-97, 1998-99, 2000-01, and 2003. The reason for this comes from the definition of the sampling unit for the surveys. The sampling unit was the telephone number (or the address, for the in-person sample), and so we did not attempt to follow the people associated with one survey’s sampling units in the subsequent survey if they changed telephone numbers or moved. In addition, we supplemented the 1998-99, 2000-01, and 2003 samples with new telephone numbers and addresses. Therefore, you can analyze changes over time only through comparison of cross-sectional estimates from the separate surveys (see Section 3.2.2).

3.2.1. Linking Data for Multiple Years

The samples for each year of the Household Survey were drawn from the same sites and strata and include households from some of the telephone numbers selected for the previous survey. When you are using data from multiple years to calculate change estimates and pooled estimates (as discussed below), the sample design variables automatically take this fact into account, thereby potentially yielding more precise estimates.²⁴ (The underlying assumption in terms of the variance is that the samples from multiple years were drawn as one large sample from the same sites and strata.)

The sample for the 2003 survey contains some people who were also in the sample for the 2000-01 survey. There are two situations in which you will want to be able to identify specifically those households and persons who are represented in multiple years of the survey. First, you might want to use information from one year of data to edit or impute values in another year of data. Second, to explain even more of the variance beyond what is achieved by using the basic models discussed below, you might also want to include a variable in your models that indicates whether the person (or family) is in the samples from multiple years.²⁵

²⁴ For example, in the metropolitan sites, the values of NFSUX and FSUX on the Restricted Use File are the same across different years of the survey when the same phone number was contacted (see Chapter 4).

²⁵ There are a number of possibilities for what exactly such an indicator variable could represent. Perhaps the most obvious example is a person-level analysis in which the variable indicates whether a particular person is in the samples from all years being analyzed. For a family-level analysis, one possibility is a variable to indicate whether all family members are in the samples from all years being analyzed.

Because household and person identifiers were assigned independently in the data from each survey, you should look at the variables R3HHIDX and R3PID in the 2003 survey data in order to identify linkages between the 2003 survey and the 2000-01 survey. The first variable gives the 2000-01 household identifier for those households with at least one person in common between the two surveys. So, if the 2003 variable R3HHIDX has a non-missing value (e.g., 1234567), there is a household on the 2000-01 data file with HHIDX=1234567 containing at least one person common to both surveys. To identify the person or persons in common within the household, the 2003 variable R3PID (used in conjunction with R3HHIDX) corresponds to a record on the 2000-01 file with PID equal to that value. Because analogous variables on the 2000-01 data file (R2HHIDX and R2PID) link the 2000-01 data to the 1998-99 data, and analogous variables on the 1998-99 data file (R1HHIDX and R1PID) link the 1998-99 data to the 1996-97 data, users can also identify linkages between the 2003 data and the 1998-99 or 1996-97 data.

3.2.2. Estimating Changes

To estimate changes in an attribute between any two years of the Household Survey, you could of course calculate separate means for each of the two surveys and then compare them. However, that approach does not allow you to use the fact that the samples were drawn from the same sites and strata in order to get more precise estimates. Therefore, we recommend combining the data from the two years in order to estimate change. Specifically, combine the two years of data (e.g., 2000-01 and 2003) into a single data set, with a separate observation for each person (or family) in each year of data. Let Y_i represent the analytical variable of interest for each observation i , and let the indicator variable $SURVEY4_i$ indicate whether the observation comes from the 2003 (Round Four) survey ($SURVEY4_i = 0$ if observation i comes from 2000-01, $SURVEY4_i = 1$ if observation i comes from 2003). Then run the following weighted regression model.²⁶

$$Y_i = a + b(SURVEY4_i) + e_i$$

The resulting estimate of a represents the mean for 2000-01, and the sum $(a + b)$ represents the mean for 2003. Therefore, the estimate of change in Y between the two time periods is b , which will generally have lower variance than the change estimate that you would get from calculating the means for the two periods separately and then estimating the variance of the change estimate from the sum of the sampling variances for the respective years.

Note that this approach to calculating change allows you the option to include whatever additional independent variables you think are appropriate. For example, you could add to the right hand side of the equation other explanatory variables and interactions among those variables, as well as interactions of $SURVEY4$ with those explanatory variables. You could also include a dummy variable indicating whether the observation is somehow represented in both years of data (as discussed in Section 3.2.1), in order to potentially decrease further the variance of the change estimate. With additional independent variables in the model, b should be interpreted as an estimate of the difference between the two survey periods after accounting for those additional factors.

²⁶ If the analytical variable Y is continuous, you would run a linear regression model. If dichotomous, you would run a logistic regression model. If the variable has three or more categories, you would run a multinomial logistic regression model.

3.2.3. Pooling Data to Increase Sample Size

The purpose of combining or “pooling” data from multiple survey years is to increase sample size and therefore the precision of a cross-sectional estimate, which is especially desirable for analyses of certain smaller subgroups. This approach is appropriate only if you can assume that the variable of interest either did not change substantially between the survey years that are being pooled or exhibited a clear pattern of change (i.e., a change that can be controlled for by including an independent variable indicating the survey year in a regression model).

3.2.4. Samples, Weights, and Variance Estimation When Combining Multiple Years of Data

National estimates based on the 2003 Household Survey require the site sample and the weight WTPER2 (or WTFAM2 for family-level analysis). In addition, there are certain sample design variables that should be used for correct variance estimation, as indicated in Chapter 4. If you are calculating national estimates by combining the 2003 data with other years, you should run all your regression models in the same way that you would for 2003, i.e., using the same sample (the site sample), weight (WTPER2 or WTFAM2), and sample design variables for all years. The relevant weight and sample design variables for national estimates from the site sample were given identical variable names across the different years of the survey.

Site-specific estimates based on the 2003 Household Survey require the site sample and the weight WTPER6 (or WTFAM6 for family-level analysis). In addition, there are certain sample design variables that should be used for correct variance estimation, as indicated in Chapter 4. If you are calculating site-specific estimates by combining the 2003 data with other years, you should note that site estimates are calculated differently for 2003 than for previous years of the survey. Specifically, site estimates from other years are based on a sample called the augmented site sample, whereas the 2003 survey uses the site sample.²⁷ This is a result of the change in the sample design for 2003. Therefore, you will have to combine the site sample from 2003 with the augmented site sample(s) from 1996-97, 1998-99, and/or 2000-01. Because the 2003 weights for site estimates (WTPER6, WTFAM6) have different names than the site weights from other years (WTPER1, WTFAM1), the weight variable for at least one of the years will have to be renamed in your combined data set. For example, if you are combining 2003 data with 2000-01 data for a person-level analysis, you should either rename WTPER6 to WTPER1 for the 2003 site sample or rename WTPER1 to WTPER6 for the 2000-01 augmented sample. Unlike the weight variables, the sample design variables for site-specific estimates are the same across the different years of the survey, and so there is no need to rename them when combining data from different years.

²⁷ For each site in the 1996-97, 1998-99, and 2000-01 surveys, the augmented site sample consists of the people in the site sample for that site plus the people in the supplemental sample who are also in that site. The supplemental sample is an independent national sample that is smaller than the site sample; it was dropped for the 2003 survey.

CHAPTER 4

DERIVING APPROPRIATE VARIANCE ESTIMATES

Some element of uncertainty is always associated with sample-based estimates of population characteristics because the estimate is not based on the full population. This sampling error is generally measured in terms of the standard error of the estimate, or its sampling variance.²⁸ Estimates of the standard errors are necessary to construct confidence intervals around estimates and to conduct hypothesis tests.

Like many other large national surveys, the Household Survey sample design employs stratification, clustering, and oversampling to provide the basis for making national and high-intensity site estimates.²⁹ These data therefore require specialized techniques for estimating sampling variances. This chapter discusses the use of specialized statistical software to estimate standard errors that account for the sample design.

4.1. THE LIMITATION OF STANDARD STATISTICAL SOFTWARE

Some standard statistical packages compute variances using formulas that are based on the assumption that the data are from a simple random sample of an infinite population. Although the simple random sample variance may approximate the sampling variance in some surveys, it is likely to substantially underestimate the sampling variance in a survey designed like the Household Survey. The Household Survey has a design-based sampling variance, meaning the sampling variance estimate is a function of the sampling design and the population parameter being estimated.

Departures from a simple random sample design result in a “design effect,” which is defined as the ratio of the sampling variance (*Var*) given the actual survey design to the sampling variance of a hypothetical simple random sample (*SRS*) with the same number of observations. Thus:

$$Deff = \frac{Var(\text{actual design with } n \text{ cases})}{Var(\text{SRS with } n \text{ cases})}$$

²⁸ The sampling variance, which is the square of the standard error, is a measure of the variation of an estimator attributable to having sampled a portion of the full population of interest using a specific probability-based sampling design. The classic population variance is a measure of the variation among the population, whereas a sampling variance is a measure of the variation of the *estimate* of a population parameter (for example, a population mean or proportion) over repeated samples. While the population variance is a constant, independent of any sampling issues, the sampling variance becomes smaller as the sample size increases. The sampling variance is zero when the full population is observed, as in a census.

²⁹ We do not recommend that Household Survey data be used to produce national estimates of age, sex, race, Hispanic ethnicity, or educational level, as these were the variables used in the poststratification adjustments of the weights; therefore, they represent population counts from external sources (the Bureau of the Census) and not the survey itself.

A design effect equal to 1.0 means that the design did not increase or decrease the sampling variance relative to a simple random sample. A design effect of greater than 1.0 means that the design increased the sampling variance; that is, it caused the estimate to be less precise. The standard error of an estimate can be expressed as the standard error from a simple random sample with the same number of observations, multiplied by the square root of the design effect.

Because most, if not all, of the variables in the Household Survey have a design effect greater than 1.0, we explain how you can use specialized statistical software packages to calculate standard errors.

4.2. SPECIFYING THE SAMPLE DESIGN FOR SUDAAN

The Household Survey data file contains a set of fully adjusted sampling weights and information on analysis parameters (that is, stratification and analysis clusters) necessary for estimating the sampling variance for a statistic. When you run one of the specialized software programs, you should specify the appropriate analysis weight (see Chapter 3) as well as the stratification and clustering variables. Table 4.1 provides guidelines for the design variables to specify in SUDAAN statements for different types of estimates. Sample SUDAAN code is included in Appendix D. The design variables to specify in Stata and SAS survey procedures are discussed in Section 4.3.

The following paragraphs explain what is contained in each of the design variables.

The DESIGN statement, found in the first row of Table 4.1, tells the program the nature of the sampling strategy; that is, whether the sample was selected with replacement (where units can be selected more than once) or without replacement; and whether the selection probabilities were equal across all sampling units. Specifying a with-replacement design (DESIGN=WR) implies that with-replacement sampling can be assumed at the first stage of selection. This design is appropriate for site-specific estimates; for these estimates, the first stage of selection was (in most cases) households within strata.³⁰ Specifying a without-replacement design and unequal probabilities of selection (DESIGN=UNEQWOR) assumes that the first stage units were selected without replacement and with unequal probabilities. The UNEQWOR specification also assumes equal probabilities of selection at subsequent stages in the sampling process. This design specification is appropriate for national estimates because the first stage of selection was generally the site and the second stage was the household.

The NEST statement, found in the second row of Table 4.1, tells the program which variables contain the sampling structure; that is, the stratification and clustering variables. For site-specific estimates, the stratification variable is SITE_STR. This variable specifies the geographical substratum or the sample type (whether telephone or in-person) within the site for the high-intensity sites and has a constant value within site for all other sites. For national estimates, the first stage sampling stratum variable (PSTRATA) has 20 values: one for each of the nine certainty sites, nine for the remaining large metropolitan sites (grouped geographically), one to classify the small metropolitan sites, and one to classify the nonmetropolitan sites. For national estimates, it is also necessary to specify a second-stage sampling stratum variable: SECSTRA. For metropolitan sites, SECSTRA is equivalent to (although not coded the same as)

³⁰In the case of the field sample, the first stage was geographical interviewing areas.

SITE_STR as defined above. For nonmetropolitan sites and for the field sample, SECSTRA is set to a constant.

As stated above, you must also specify the clustering variable(s) in the NEST statement. For site-specific estimates, the clustering or primary sampling unit (PSU) variable is FSUX, which represents the household in the telephone sample and the geographical interviewing area (or “segment”) for the in-person sample.³¹ For national estimates, the first stage PSU variable (PPSU) is specified between the first- and second-stage stratification variables. For metropolitan sites, PPSU represents the site. For nonmetropolitan sites, PPSU is set to a constant. For national estimates, it is also necessary to specify in the NEST statement a second-stage clustering variable (NFSUX) after the second-stage stratification variable. For metropolitan sites in the telephone sample, NFSUX represents the household³²; for nonmetropolitan sites it represents the site. For the in-person sample, NFSUX represents the interviewing area.

In order for the program to account for without-replacement design in its variance estimates, two more statements must be specified: the TOTCNT statement and the JOINTPROB statement. The TOTCNT statement provides the frame counts (or indicates stratification) at each stage of the sample design specified in the NEST statement. The JOINTPROB statement names the variables that contain single-inclusion probabilities for each site and joint-inclusion probabilities for each possible pair of sites in each first-stage stratum.³³ (This is expressed in the form of an $n \times n$ matrix, where n is the number of PSUs in each stratum.) Because the site-specific estimates assume with-replacement sampling, the TOTCNT and JOINTPROB statements are not specified when making those estimates. For the national estimates, the TOTCNT statement is specified as: PSTRTOT3 _ZERO_ _MINUS1_ _ZERO_. These last three terms are reserved SUDAAN keywords. The keyword _ZERO_ means either that the corresponding NEST variable (in this case SECSTRA) is a stratification variable or that it is a final level of sampling and therefore has no variance contribution. The keyword _MINUS1_ means that the corresponding NEST variable (in this case NFSUX) should be treated as with-replacement sampling. For national estimates, PSTRTOT3 specifies the variable containing population counts (in this case the number of sites in the sampling stratum for non-certainty metropolitan sites) at the first stage of selection.

For the national estimates, the JOINTPROB statement is specified as the variables: P1X P2X P3X P4X P5X P6X P7X, which together represent the matrix containing single and joint inclusion probabilities as described above.

In SUDAAN, the default denominator degrees of freedom can be overridden using the DDF option. We recommend that you use this option (setting DDF to 6500) when running significance tests on national estimates. In SUDAAN, the default denominator degrees of freedom is the difference between the number of PSUs and the number of first stage strata,

³¹ In the metropolitan sites, the values of FSUX on the Restricted Use File are the same across different years of the survey when the same phone number was contacted.

³² In the metropolitan sites, the values of NFSUX on the Restricted Use File are the same across different years of the survey when the same phone number was contacted.

³³ The joint inclusion probability for a pair of sites is the probability that those two sites will occur in the same sample.

which is appropriate for most surveys. Because the CTS design includes some sites with certainty, the SUDAAN default count is substantially smaller than the actual count for these national estimates. This undercount would result in significance tests that would be too conservative. See Appendix D for examples using the DDF option.

TABLE 4.1

GUIDELINES FOR SPECIFICATION
OF DESIGN VARIABLES IN SUDAAN
FOR THE 2003 HOUSEHOLD SURVEY

SUDAAN Statements	Site-Specific Estimates	National Estimates
DESIGN=	WR	UNEQWOR
NEST	SITE_STR FSUX	PSTRATA PPSU SECSTRA NFSUX
TOTCNT	Not Applicable	PSTRTOT3 _ZERO_ _MINUS1_ _ZERO_
JOINTPROB	Not Applicable	P1X P2X P3X P4X P5X P6X P7X
WEIGHT	WTPER6 WTFAM6 WTSYM6	WTPER2 WTFAM2 WTSYM2
DDF=	Not Applicable	6500

4.3. USE OF OTHER STATISTICAL SOFTWARE BESIDES SUDAAN

SUDAAN is currently the only commonly used statistical software package that can produce variance estimates correctly for both site-specific and national estimates in the 2003 Household Survey. There are other statistical software packages for the analysis of data with complex sample designs that can produce correct variance estimates for the site-specific estimates. However, they do not work as well as SUDAAN for national estimates because they cannot accommodate without-replacement (WOR) sampling.³⁴ (Although Stata has some capability to do without-replacement estimation, that capability is not sufficient to accommodate the sample design for national estimates in the 2003 Household Survey.)

Nevertheless, there still may be situations where researchers would like to use other software packages besides SUDAAN. For example, some people might not have access to SUDAAN or might be interested in statistical procedures that are not available in SUDAAN. For these situations, we investigated how standard error estimates for the CTS surveys differed among SUDAAN, Stata, and SAS.³⁵ In particular, we identified situations in which statistical software other than SUDAAN would provide reasonable estimates of sampling variances (or at least “conservative” estimates, i.e., estimates that reduce the likelihood of finding a result to be statistically significant). This section provides a summary of the resulting report, as well as information on obtaining and using the sampling parameters in other software packages.

4.3.1. Results of Comparison of Statistical Software Packages

The results discussed here are based on a comparison of standard error estimates from SUDAAN, Stata, and SAS. Because Stata and SAS generate the same estimates, they are grouped together in this discussion. The comparison is based on person-level national estimates calculated from the 2000-01 Household Survey (which had a slightly different sample design than the 2003 survey), although there is no particular reason to think that the overall conclusions would differ if a similar comparison were done with family-level estimates or with estimates from the 2003 survey.

First we considered descriptive estimates (specifically, estimates of proportions) for the full population in the Household Survey. The standard error estimates from Stata and SAS were usually but not always larger than the estimates from SUDAAN. Specifically, for estimates of the percentage of the population with particular attributes, 86 percent of the standard error estimates (107 out of 125 estimates) from Stata and SAS were larger than the SUDAAN estimates. Most of the Stata and SAS estimates (63 percent) were larger by 20 percent or less.

³⁴ They assume with-replacement sampling instead. In other words, standard error estimates for the Household Survey from Stata and SAS are the same as standard error estimates from SUDAAN when using the SUDAAN specification for with-replacement instead of without-replacement.

³⁵ The report, Schaefer et al. (2003), is available from the HSC web site (www.hschange.org).

We also considered standard error estimates of proportions for three subpopulations: the uninsured, people in low-income families, and Hispanics. The results for the uninsured and the low-income people were generally similar to those for the full population. However, for the subpopulation of Hispanics, the results were markedly different. Only 37 percent of the Stata and SAS estimates were larger than the SUDAAN estimates. As discussed below, this means that the use of Stata or SAS for analysis of some subpopulations (Hispanics in this case) can *increase* the likelihood of finding results to be statistically significant compared to the use of SUDAAN, thereby increasing the likelihood of Type I error (i.e., rejecting the null hypothesis when it is true).

In multivariate analysis, we found similar results. For the full population, standard error estimates from Stata and SAS tended to be somewhat larger than those from SUDAAN. For Hispanics, the Stata and SAS estimates were mostly smaller.

4.3.2. Summary and Recommendations

Researchers who use the CTS Household Survey for site-specific estimates will get the same (correct) standard error estimates regardless of whether they use SUDAAN, Stata, or SAS. However, for national estimates, only SUDAAN can account for the main features of the sample design (see Table 4.2). In particular, SUDAAN assumes without-replacement (WOR) selection at the first stage, whereas using Stata or SAS for those estimates is equivalent to assuming with-replacement (WR) selection.

Statistical theory says that the sampling variance using the with-replacement estimation assumption (e.g., Stata and SAS) tends to be greater than the sampling variance using the without-replacement assumption (SUDAAN). With some exceptions, this appears to be true for data from the CTS Household Survey. One exception that was identified is the subpopulation of Hispanics. Although there are undoubtedly other subpopulations that are exceptions to the overall result, it was beyond the scope of our analysis to identify them.³⁶

The fact that the results based on with-replacement estimation tend to differ from those based on without-replacement estimation means that researchers should be cautious when using Stata or SAS (or any other software package that assumes with-replacement sampling) for national estimates from the Household Survey data. For the full population, where the with-replacement estimates tend to overstate the standard errors, there is a decreased likelihood of finding a result to be statistically significant, which decreases the probability of making a Type I error (rejecting the null hypothesis when it is true). There is also an increased likelihood of finding that a result is not statistically significant, which increases the probability of making a Type II error (accepting the null hypothesis when it is false). In these cases, the with-replacement estimation from Stata and SAS can be considered to yield “conservative” results because the probability of a Type I error, which researchers typically regard as a more serious concern, is reduced.

However, our analysis suggests that the bias in the standard error estimates that can be expected from with-replacement estimation can vary markedly by subpopulation. For subpopulations where with-replacement estimation tends to understate the standard errors, using Stata or SAS

³⁶ Geographic clustering is one sample characteristic that might be important.

results in a possibly substantial increase in the likelihood of making a Type I error. Therefore, **we do not recommend using Stata or SAS (or any other software package that uses the with-replacement assumption) for subpopulations in the Household Survey when making national estimates** unless you have investigated the effect on the standard error estimates specifically for that subpopulation.

4.3.3. Obtaining and Using Sampling Parameters for Other Software Packages

Sampling parameters for use with Stata and SAS are provided on the Household Survey public use and restricted use data files for 2000-01 and 2003. Table 4.3 shows which parameters should be used for which types of estimates, and Appendix F provides specific examples of how those parameters are used in Stata and SAS. These sampling parameters were constructed directly from the SUDAAN parameters that are described in Section 4.2 (see Appendix E if you are interested in the exact definitions).

If you would like to use Stata or SAS with data from the 1996-97 and/or 1998-99 surveys, then you will need to construct the sampling parameters for the earlier surveys, since they are not provided on the data files. This can be done using the SUDAAN parameters that already are included in the 1996-97 and 1998-99 data files. Instructions on how to construct the new parameters are provided in Appendix E.

TABLE 4.2

SUMMARY OF SOFTWARE VARIANCE ESTIMATION CAPABILITIES
FOR THE CTS 2003 HOUSEHOLD SURVEY

Estimates from 2003 Household Survey	Optimal sampling assumption	Analysis population	Ability to produce correct variance estimates for the CTS Household Survey	
			SUDAAN	Stata and SAS special procedures for the analysis of complex survey data ^a
Site-specific estimates	WR	Full population or subpopulation	yes	yes
National estimates	WOR	Full population	yes	no, but acceptable ^b (with caution)
		Subpopulation	yes	no (not advisable) ^c

WR = with replacement
WOR = without replacement

^a This column also applies to other statistical software packages that use Taylor series linearization procedures for variance estimation and can accommodate WR sample selection but have no or limited ability to accommodate WOR sample selection.

^b For national estimates for the full population, the variance estimates from Stata and SAS tend to be greater than those from SUDAAN. In other words, the variance estimates from Stata and SAS are “conservative” in that they decrease the likelihood of finding a result to be statistically significant. However, researchers should note that whether a particular estimate is being overstated or understated by Stata and SAS (relative to SUDAAN) cannot be known with certainty without specifically calculating that estimate under the two sampling assumptions (WR and WOR).

^c The effect of using the WR assumption instead of WOR can vary greatly from one subpopulation to another. Use of WR estimation for analysis of a subpopulation is not advisable unless a comparison of WR and WOR estimation specifically for that subpopulation has been done.

TABLE 4.3

GUIDELINES FOR SPECIFICATION
OF DESIGN VARIABLES IN STATA AND SAS
FOR THE 2003 HOUSEHOLD SURVEY

Stata Statements	SAS Statements	Site-Specific Estimates	National Estimates
strata	stratum	SITE_STR	STRATAWR
psu	cluster	FSUX	PSUWRX
pweight	weight	WTPER6 WTFAM6 WTSYM6	WTPER2 WTFAM2 WTSYM2

CHAPTER 5

VARIABLE CONSTRUCTION AND EDITING

The CTS Restricted Use File contains three types of variables: unedited variables, edited variables, and constructed variables created from edited or unedited variables.³⁷ This chapter provides a general description of the types of constructed and edited variables in the file as well as additional details on selected variables. The chapter also explains how to manipulate the person-level file to construct analytical variables at other levels, such as the family level.

The information in this chapter supplements the information provided in the “Description” and “Universe” fields of the file’s codebook. Users are encouraged to review this information along with the information provided in Appendix A and Appendix B of this manual for a better understanding of the questionnaire structure, skip patterns, and other characteristics of the variables reported on the file.

5.1. EDITED VARIABLES

The Household Survey data were collected via computer-assisted telephone interviewing (CATI). The CATI editing functions included consistency checks and editing of some skip patterns and outlier values. This section describes the editing that followed the Household Survey CATI data collection, which included logical editing, imputation of missing values, and editing for confidentiality. Verbatim text responses were also reviewed and edited.

5.1.1. Logical Editing

Logical editing was performed to resolve inconsistencies among related variables and skip patterns. For example, question c421(SURGNX), pertaining to number of surgeries, was not asked if a person had no provider visits. If the survey respondent had no provider visits, the value for SURGNX was changed from missing to “0” to indicate that the respondent did not have any surgical procedures. In another example, employment-related questions like f101(HAVEBUS, did the respondent have a business) and f111(WRKPAY, did the respondent work for pay), should have been asked only of respondents age 18 or over. If this information was included for individuals under 18, the responses were changed to “logical skip.” Logical editing also included review and resolution of outlier values by recoding either to an appropriate valid value or to a value of “-9 Not Ascertained.”

³⁷In general, unedited variables are those which contain the original response to a single questionnaire item.

5.1.2. Imputation of Missing Values

Missing values for selected variables were imputed using unweighted and weighted sequential hot-deck imputation.³⁸ In addition, some variables, such as race and ethnicity, had at least some missing responses filled in by using the race and ethnicity of other family or household members. Variables were selected for imputation according to their level of missing data and analytic importance. Table 5.1 lists the variables selected for imputation.

An imputation flag is included for most variables with imputed values. A value of “1 Yes” for the imputation flag indicates that the value of the corresponding variable was imputed. The imputation flags for the following variables have not been provided on the file for confidentiality reasons:

- Total number of hospital stays (HSPSTYN)
- Total number of hospital stays, excluding childbirth (HSPNODX)
- Total number of hospital stays admitted through the emergency room (HSPERX)
- Total number of nights in the hospital (HSPNITX)
- Total number of visits to doctor (DRVISNX) and to other medical providers (MPVISNX)
- Total number of surgeries (SURGNX)
- Number of inpatient and outpatient surgeries (SURGNTX and SURGOPX)
- Income (FAMINCX)
- Race and ethnicity (HISPAN, RACNEWX, and RACETHX)
- U.S. citizenship (CITIZEN)

Between 0.03 percent and 2.5 percent of the values for these variables were imputed, except for FAMINCX, for which 20.5 percent of the values were imputed, and CITIZEN, for which 17.5 percent of the values were imputed.

³⁸In sequential hot-deck imputation, persons with missing values, or “recipients,” are linked to persons with available values, or “donors,” to fill in the missing data. The donors and recipients are first grouped into strata and then sorted within each stratum using classification/sort variables such as age, gender, and education. The number of strata is limited by a minimum donor to recipient ratio that must be satisfied within each stratum. Donors are then sequentially linked to recipients based on their proximity within the stratum as determined by the sort variables. In weighted hot-decking, donor and recipient weights are used to help determine the assignment of donors to recipients so that means and proportions calculated using the imputed data will equal means and proportions obtained using only donor data.

TABLE 5.1
VARIABLES SELECTED FOR IMPUTATION

Description	Variable Name
Section A:	
Education	HIGRADX
Section B:	
Characteristics of private health insurance plans (imputation performed at the plan level)	PRVSIG1, PRVREF1, PRVPAY1, PRVLST1, PRVHMO1 PRVSIG2, PRVREF2, PRVPAY2, PRVLST2, PRVHMO2 PRVSIG3, PRVREF3, PRVPAY3, PRVLST3, PRVHMO3
Medicaid and state insurance plans (imputation performed at the plan level)	MCDHMO, STHMO
Characteristics of Medicare (imputation performed at the person level)	MCRSIGP, MCRREFP, MCRLSTP, MCRHMOP, MCRPAYP
Section C:	
Hospital use	HSPSTYN, HSPNODX, HSPERX, HSPNITX
Emergency room visits	ERUSENX
Doctor and other medical practitioner visits	DRVISNX, MPVISNX
Inpatient and outpatient surgeries	SURGNX, SURGNTX, SURGOPX
Treatment by mental health professional	MENTAL
Section E:	
General health condition	GENHLH
Section F:	
Hours worked	HRSWKX
Type of employer	EMPTYPX
Firm size	FIRMSZX
Hourly wage	WAGEHRX
Whether employer offers insurance, whether person is eligible, and types of plan(s) offered	EMPOFER, ELIGIB, EMPBOTH, EMPMULT, EMPHMO, OFFERED, OFRBOTH, OFRHMO, OFRMULT, OFRNHMO
Section G:	
Family income	FAMINCX
Race and ethnicity	HISPAN, RACNEWX, RACETHX
U.S. citizenship	CITIZEN

5.1.3. Editing for Confidentiality

Data in the Restricted Use File have been manipulated or edited to ensure the confidentiality of survey respondents while maximizing the scope of data released to the user. This type of editing consisted of such steps as excluding variables and constructing new variables based on the original ones. All cases of editing for confidentiality are described in the file's codebook either in the "Format" field (which indicates the top- and/or bottom code values) or the "Description" field. Variables subjected to confidentiality editing have been assigned names ending with "X."

5.1.3.1. Variable Exclusion

In constructing this data set, we were careful to remove the obvious direct identifiers such as names and addresses.

5.1.3.2. Masking of Minimum and Maximum Values

Extreme and relatively rare cases that fell at the top or bottom of a distribution were recoded to a lower/higher value, referred to as "top-" or "bottom-coding." For example, the variable corresponding to question grd1 (HIGRADX, highest grade completed) reflects the use of both top- and bottom-coding. Reported values greater than 18 have been combined into a single category, "19: (top code)." Values less than 7 have been combined into another category, "6: (bottom code)."

5.1.3.3. Constructing New Variables for Confidentiality

When survey questions identified relatively rare populations, a new variable was constructed, combining the separate small groups into a smaller number of larger groups. For example, the variables FOTHPUB and OTHPUBX, which indicate coverage by either a state insurance plan or the Indian Health Service, were constructed by combining the responses to two questions, b1g (Indian Health Service) and b1h (state insurance). Similarly, the variable UNINPLX, which corresponds to a single question, b81, was constructed by combining the categories of Medicaid, state, and military coverage into a single category (2 Medicaid/state/military).

5.1.4. Editing Verbatim Responses

For several questionnaire items, interviewers and/or respondents were allowed to provide "other" verbatim responses when none of the existing response categories seemed to apply. These verbatim responses are excluded from the Restricted Use File. They were reviewed and coded into an appropriate existing or new categorical value. For example, for question b84 (reason uninsured), additional categories were created to describe some of the verbatim responses to that question. For insurance plan information, multiple variables may have been recoded on the basis of verbatim response information. For example, if the name of a private insurance plan was reported as "Virginia Medicaid," then the corresponding private insurance variables were set to "-1 Inapplicable," and the corresponding Medicaid variables were coded appropriately.

5.2. CONSTRUCTED VARIABLES

In addition to variables that were constructed for confidentiality reasons (see Section 5.1), constructed variables include the following:

- Household Survey administration variables, such as identifiers, counters, and family/household composition variables
- Weights and other sampling variables
- Other variables constructed for analytical value. These range from relatively straightforward variables that combine one or more original question items for the convenience of analysts (for example, the wait/travel times associated with the last doctor visit, which were converted from various time units to days and minutes) to more complex variables such as hierarchical ones describing current and previous insurance coverage.

Constructed variables are indicated in the file's codebook by a value of "N/A" in the "Question" field. Information on how they were constructed appears in the "Description" field.

5.3. IDENTIFICATION, COUNTER, AND SITE VARIABLES

Not all variables on the Restricted Use File were obtained directly from survey respondents via the Household Survey CATI questions. Additional variables include identifiers (person, family, household, and other identifiers), household composition variables, geographic indicators (including the site identifier), and other survey administration variables.

5.3.1. Identification Variables

The identifier and related flag variables are described in Table 5.2. Table 5.3 shows persons in a hypothetical household to illustrate the relationship between the identifier and flag variables on the Restricted Use File. In this example, the head of household's spouse is the family informant for the first FIU, the head of household's father is the family informant for the second FIU, and the unrelated boarder is the informant for the third FIU, of which he/she is the only member.

5.3.2. Counter Variables

Counter variables are included in the file to make it easier to understand the file structure and sample population. The variable NSFAM indicates the total number of eligible responding FIUs in the household – in other words, the number of unique values of CSIDX that share the record's HHIDX. NSPER indicates the total number of eligible/selected responding persons in the record's FIU (unique values of PERSIDX on the file for the CSIDX identified on that record). Likewise, the variables NADULT and NAGE65 indicate, respectively, the total number of eligible responding adults and the total number of eligible responding persons age 65 or over in the family.

Additional counter variables provide information on all persons, including non-respondents and ineligible, in responding households. These variables – NFAM, NPERX and NKID – indicate the total number of families within the household, persons within the family, and children within the family, respectively, for responding households. The difference between NSPER and NPERX, for example, is that the latter includes nonrespondents, nonselected children (including children with no parent or guardian in the household), and full-time military personnel, who are not included on the file and therefore not reflected in the value for NSPER.

5.3.3. Site and County Variables

The 2003 Household Survey Restricted Use File contains the variable SITE for identifying individual sites. Previous years of the survey contained a second site identifier (SITEID), but that variable is no longer necessary due to changes in the sample design for 2003.

The Restricted Use File also contains variables for county. The variable FIPSCNTY is the 3-digit FIPS county code, and the variable FIPSCODE is the FIPS state code combined with the FIPS county code. For the 2003 Household Survey, there were 57 families selected for the site sample who have FIPS codes for counties that are not among the counties defining the site for which they were selected. This was a result of the assignment of county codes from telephone exchanges. For estimation purposes, these families are still considered to be in the site for which they were selected, which is indicated by the variable SITE.

5.3.4. Linking Variables

There are several variables on the Household Survey Restricted Use File for identifying linkages between the 2000-01 (Round Three) and 2003 (Round Four) surveys. The SUDAAN variables NFSUX and FSUX have the same values for both rounds when the same phone number was contacted for the two surveys.³⁹ In addition, variable R3HHIDX provides the 2000-01 household identifier for households with at least one person in common between the two rounds. Variable R3PID (used in conjunction with R3HHIDX) can be used to identify the person or persons in common within a household. Specifically, for someone on the 2003 data file, the record for that person on the 2000-01 data file is the one for which the values of HHIDX and PID on the 2000-01 data file match the values of R3HHIDX and R3PID for that person on the 2003 data file. Analogous variables on the 2000-01 Restricted Use File allow linking between the 1998-99 and 2000-01 surveys, and analogous variables on the 1998-99 Restricted Use File allow linking between the 1996-97 and 1998-99 surveys,

³⁹ The exceptions to this are the nonmetropolitan sites (sites 52-60), which are automatically taken into account by SUDAAN.

TABLE 5.2

ADDITIONAL INFORMATION ON IDENTIFICATION VARIABLES

Variable	Additional Information
HHIDX	HHIDX is the 7-digit identifier for the household. There are 20,998 unique values of HHIDX on the file. Values for HHIDX are randomly assigned.
CSIDX	CSIDX is the 8-digit identifier for the family insurance unit, or FIU. The first 7 digits of CSIDX are equal to HHIDX. There are 25,419 unique values of CSIDX on the file.
PID	PID is the 1-digit number assigned to each person within the household. Its values range from 1 to 8.
PERSIDX	PERSIDX is the unique 9-digit identifier assigned to each person. There are 46,587 unique values of PERSIDX, which identify the 46,587 records on the file. PERSIDX was constructed by concatenating the variables CSIDX and PID.
KIDID KIDFLAG	KIDID is the 1-digit person number (PID) of the randomly selected child in each FIU. The variable KIDID is equal to the variable PID on the record corresponding to the randomly selected child. The flag variable KIDFLAG, which indicates the randomly selected child, has a value of 1 on the record of the randomly selected child and a value of 0 for all other persons in the FIU. A person could have been chosen as the randomly selected child if he/she was under age 18 and not married or the head of the household, defined as the person who owns or rents the home.
RESPID RSPFLAG	RESPID is the 1-digit person number (PID) of the informant for each FIU. The variable RESPID is equal to the variable PID on the record corresponding to the family informant. The flag variable RSPFLAG, which indicates the family informant, has a value of 1 on the record of the family informant and a value of 0 for all other persons in the FIU.
CENSID	CENSID is the 1-digit number assigned to each "census-defined" family within a household. The variable was constructed on the basis of the commonly used U.S. Census Bureau definition of a family, which is generally a broader definition than that used to define the CTS FIU. Specifically, a census family includes all people in the household related by blood or marriage. A unique census family on the file is defined by the combination of the variables HHIDX + CENSID. There are 22,008 unique census families (i.e., unique values of HHIDX + CENSID) on the file. <i>Unless otherwise indicated, the term "family" used in this document or in the file's codebook refers to the FIU rather than the census-defined family.</i>

TABLE 5.3

PERSONS IN A HYPOTHETICAL HOUSEHOLD WITH IDENTIFIER AND FLAG VARIABLES

Record Corresponding to Person	Value of Identifier/Flag Variable							
	HHIDX	CSIDX	PID	CENSID	RESPID	RSPFLAG	KIDID	KIDFLAG
FIU # 1								
Head of Household	1000001	10000010	1	1	2	0	3	0
Head of Household's Spouse	1000001	10000010	2	1	2	1	3	0
Head of Household's Daughter: Randomly Selected Child	1000001	10000010	3	1	2	0	3	1
Head of Household's Son: Not Included in Survey	-	-	-	-	-	-	-	-
FIU # 2								
Head of Household's Father	1000001	10000011	5	1	5	1	-1	0
Head of Household's Mother	1000001	10000011	6	1	5	0	-1	0
FIU # 3								
Unrelated Boarder	1000001	10000012	7	2	7	1	-1	0

5.4. FAMILY AS THE UNIT OF ANALYSIS

Survey questions solicited information at the person-, family-, and household-level. Rather than providing a hierarchical file, we have chosen to provide the survey data as a simple, rectangular file with person-level data only. We anticipate little interest in household-level analysis and so do not include household-level weights with the Restricted Use File. However, because some researchers want to conduct analyses at the FIU level, the following section explains how a family-level file can be easily extracted from the person-level file.

5.4.1. Preparing a Family-Level Data File

The variable CSIDX is the eight-digit identifier for the FIU. The first seven digits are equal to the household id (HHIDX), while the last digit is a unique number assigned to each family within the household. There are a total of 25,419 family insurance units on the Restricted Use File.

Table 5.4 displays two hypothetical family insurance units. The first, CSIDX 10000010, contains three persons, a father, a mother, and a randomly selected 14-year-old daughter. The second, CSIDX 10000020, consists of a married couple. Family-level variables in the example include the family identifier (CSIDX), a counter for the number of persons in the family (NPERX), and total family income (FAMINCX). Person-level variables include the person identifier (PID), age (AGEX), general health status (GENHLH), gender (SEX), relationship to the head of household (RELATEX), and an FIU flag variable (FIUFLAG). Note that there are a total of five persons in the first family (NPERX=5), two of which were nonselected children excluded from the Restricted Use File.

TABLE 5.4

TWO HYPOTHETICAL FAMILY INSURANCE UNITS

FIU Member	CSIDX	PID	NPERX	AGEX	GENHLH	FAMINCX	SEX	RELATEX	FIUFLAG
Family Informant	10000010	1	5	43	1	64885	1	0	1
Spouse	10000010	2	5	41	4	64885	2	2	0
Daughter	10000010	3	5	14	5	64885	2	3	0
Family Informant	10000020	1	2	57	2	46500	2	0	1
Spouse	10000020	2	2	56	3	46500	1	1	0

5.4.1.1. Example 1: Creating a Family-Level File

To analyze a family-level characteristic such as total family income (FAMINCX), you would need to select one record from each family or, one unique value of CSIDX. As with all family-level variables, all members of the family are assigned the same value. Thus, the first, the last, or any record of a single family member is suitable to create a subset of records to represent families. The variable FIUFLAG was constructed specifically for this purpose. Selecting records with FIUFLAG=1 will produce a family-level file consisting of the family informants' records.

5.4.1.2. Example 2: Summarizing Person-Level Responses to the Family-Level

An alternate method of producing a family-level file is to summarize person-level responses and produce a single family record. In this example, a variable is produced that counts the number of persons in the family in fair or poor health (FAIRPOOR) by using the general health status variable, GENHLH, which has the following values: 1=Excellent, 2=Very Good, 3=Good, 4=Fair, and 5=Poor. The variable is constructed by 1) reading the person-level Restricted Use File, 2) testing each family member's response to the general health status indicator GENHLH, and 3) keeping one record for the family after processing the last person's record. The family-level file and the FAIRPOOR variable produced from the person records of the two hypothetical families are displayed in Table 5.5.

TABLE 5.5

FAMILY-LEVEL FILE

CSIDX	NPERX	FAMINCX	FIUFLAG	<i>FAIRPOOR</i>
10000010	5	64885	1	2
10000020	2	46500	1	0

5.5. ADDITIONAL DETAILS ON SELECTED SURVEY VARIABLES

Table 5.6, organized by survey and questionnaire section, provides “helpful hints” about variables (singly or in sets), discusses a variable's relationship with other variables, and suggests when to use a specific variable. This information supplements the variable-specific details contained in the file's codebook.

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES

Variable	Additional Information
Survey Administration and Section A Variables: Demographic Characteristics and Household Composition	
MSACAT	This variable indicates selected site characteristics for each site <i>at the time of the original sample design</i> and therefore does not indicate site characteristics in 2003. Specifically, it indicates whether the site was a metropolitan area, and if it was, whether its 1992 population was greater or less than 200,000. Those are characteristics that were important in selecting the 60 sites (see Chapter 2 for information on the sample design).
RELATEX	The variable RELATEX indicates the relationship of the person on this record to the head of the household, for whom RELATEX has a value of 0. The head of the household is defined as the person who owns or rents the home.
Section B Variables: Health Insurance Coverage	
INSTYPE	<p>The variable INSTYPE is a constructed variable that summarizes the person's insurance coverage status as of the interview date. This variable was constructed hierarchically by assigning a person to the first applicable category in the following sequence:</p> <ol style="list-style-type: none"> 1 Medicare 2 Medicare and Medigap 3 Medicare and other public 4 Private, employment-related 5 Private, direct purchase 6 Private, coverage provided by someone outside the family 7 Military insurance (e.g., CHAMPUS, CHAMP-VA, TRICARE, VA, etc.) 8 Medicaid 9 Other public coverage 10 Uninsured <p>Note that all persons with Medicare have INSTYPE = 1, 2 or 3, including those who also have private insurance. Category 1 excludes those who have Medicare and Medigap. Categories 1 and 2 exclude those with Medicare and other public insurance. Category 9, Other public coverage, includes state and I.H.S. programs.</p> <p>Because of its hierarchical structure, INSTYPE understates the number of persons with certain types of insurance. For instance, INSTYPE=8 (Medicaid) includes those who have both Medicaid and other public insurance but does not include those with Medicaid and private insurance. Other insurance indicators on the file can be used to obtain more accurate population estimates of the number of persons with a certain type of insurance; for example, for non-elderly Medicaid population estimates, the variable MCAID should be used rather than INSTYPE.</p>

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
[All variables for private plans]	Each family could report up to three private insurance plans. All verbatim responses for insurance plan names were reviewed, and all related insurance variables were then recoded if necessary. For example, review of some of the verbatim information on the name of the private plan indicated that the plan was actually a public plan (e.g., Medicaid, CHAMPUS, etc.). For these cases, the corresponding public plan variables were recoded as appropriate, and the private plan variables were recoded to “-1 Inapplicable.” The private plans were not renumbered, so some persons may have values of “-1” for the private plan 1 variables but nonmissing values for the private plan 2 variables.
PRVHLD1 – 3	Question b231 is used to identify the policy-holders for the private insurance plans. In the 2003 survey, the policy-holder can be anyone in the household who is age 18 or older. In previous rounds of the survey, only people who were privately insured and/or age 65 or older could be policy-holders for private insurance plans.
ESICST1 ESICST2 ESICST3 ESPRM1X ESPRM2X ESPRM3X PVPRM1X PVPRM2X PVPRM3X	These variables provide information on health insurance premium costs for the private insurance plans. Strouse, Touzani, and Hall (2004) examine the accuracy of the survey responses and conclude that the information on premium payments for non-group plans (PVPRM1X, PVPRM2X, PVPRM3X) is reliable enough for use in analyses but that the information on premium contributions for employer-sponsored plans should be used with caution. Specifically, the contributions for employer-sponsored plans “should not be used for point estimates,” but “with the appropriate statistical adjustments, the data may be very useful for analytic model estimation.” Data users are encouraged to read the full report for more details on the accuracy of the survey responses.
STPHD STHMO STHMOP STIN1Y ST12M	Questions b71 – b78 are asked only for families in which someone is not covered by private insurance but is covered by a state plan (question b1h) or other health insurance plan (question b1i1). If anyone has a state plan (b1h), then questions b71 – b78 refer to that plan. Otherwise, questions b71 – b78 refer to the other health insurance plans (b1i1).
PRVSIG1-3 PRVREF1-3 PRVLST1-3 PRVHMO1-3 PRVPAY1-3 MCDHMO STHMO MCRSIGP MCRREFP MCRLSTP MCRHMOP MCRPAYP	<p>A number of variables identify aspects of the respondents’ insurance plans (for example, whether the person must sign up with a primary care doctor, whether a referral is needed for a specialist, etc.). Some of these variables were selected for imputation, which was done either at the plan level or the person level.</p> <p>The variables imputed at the plan level are: PRVSIG1-3, PRVREF1-3, PRVLST1-3, PRVHMO1-3, PRVPAY1-3, MCDHMO, and STHMO.</p> <p>The variables imputed at the person level are the person-level variables describing the characteristics of the Medicare plan: MCRSIGP, MCRREFP, MCRLSTP, MCRHMOP, and MCRPAYP. (The family-level variables describing characteristics of the Medicare plan were not imputed.)</p>

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
UNINR12- UNINR14	The variables UNINR12-UNINR14 were constructed after reviewing the verbatim responses to question b84, for which respondents could specify other reasons why health insurance stopped.
PREINS	The variable PREINS was constructed only for currently insured persons whose coverage began within the past 12 months. It indicates the person's coverage just prior to the current coverage. All other persons have a value of "-1 Inapplicable" for this variable. The category NA consists of newborns and persons with health insurance from a foreign source.
PRECOV	The variable PRECOV was constructed for all persons and indicates the person's coverage just prior to the current coverage (or the most recent coverage if the person is currently uninsured). Persons were assigned hierarchically to PRECOV categories. The category N/A consists of most of the persons in the following two groups: newborns and persons with health insurance from a foreign source.
CHGINS6 CHGINS7	The variables CHGINS6 and CHGINS7 were constructed after reviewing verbatim responses to question b881, in which other reasons for changing insurance plan were reported. Persons answered question b881 only if they responded that they had enrolled in their health plan within the past 12 months. Persons with CHGINS7=1 said they stayed with the same plan but are required to re-enroll annually. For analytic purposes, these persons should not be considered to have undergone an actual change in insurance coverage.
MCHOICE	Question b951 (MCHOICE) asks whether the person would be willing to accept a limited choice of physicians/hospitals in order to save out-of-pocket costs. This question was answered by the family informant and other adult family members who completed the SRM. It was not asked of the randomly selected child.

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
Section C Variables: Health Care Resource Use and Unmet Need	
<p>Many of the questions on use of health care resources are reported as continuous variables. In order to protect confidentiality of respondents, all of these continuous variables (except HSPSTYN) were top-coded, collapsing the highest values into a single value. The file's codebook indicates the level at which each variable was top-coded. As described in Section 5.1, many of the imputation flags for the variables on health care resource use have not been provided for confidentiality reasons.</p>	
UNMET PUTOFF PUFOFR1- PUTOF21	Questions c811-c831, describing unmet medical need and reasons (UNMET, PUTOFF, PUFOFR1-PUTOF21), were answered by the family informant and other adults who completed the SRM. For the randomly selected child, these questions were answered by the family informant.
PUTOFR8 – 9 PUTOF10 – 13 PUTOF15 – 19 PUTOF21	The variables PUTOFR8 - PUTOF21 (except PUTOF14 and PUTOF20) were constructed after reviewing the verbatim responses to question c831, for which respondents could specify other reasons for postponing or not receiving medical care.
MEDCSTA, MEDCSTB	The variables MEDCSTA and MEDCSTB (questions c92 and c93) indicate the total out-of-pocket medical costs for the family and reflect minimal editing of the original responses to the questions. Researchers who use these variables may want to review them for possible outliers and additional editing.
Section D Variables: Usual Source of Care and Patient Trust in Physician	
AFFTRAV AFFSEEN AFFRSON AFFRSN1 – AFFRSN9 AFFRN10 – AFFRN12	Questions sn4, sn4per, sn5, and sn6 are asked for families in which anyone is uninsured and either of the following is true: any uninsured family member is paying less than full price at his/her usual source of care (question sn1) or there is a local place offering affordable medical care for the uninsured (question sn2). If the former is true, then questions sn4 – sn6 refer to that usual source of care. If the latter is true, then questions sn4 – sn6 refer to the local place offering affordable medical care.
DRNOREF- DRUNNEC	Questions d311-d341 (DRNOREF—DRUNNEC) were asked only of the family informant and other adult family members who completed the SRM, and who reported either at least one doctor visit in the past 12 months (question c311 or c321) or a usual source of care who is a physician (d121). All other records, including the randomly selected child records, have a value of “-1 Inapplicable” for these variables.

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
Section E Variables: Health Care Satisfaction and Health Status	
CRSAFX	The variable CRSAFX was constructed from questions e101 and e111 and describes satisfaction with health care received during the past 12 months. These two family-level questions were only asked of the family informant and were not included in the SRM.
DRCHOCX SPNEED SPCHOCX	Questions e121-e15c, describing satisfaction with the choice of primary care doctor and specialist (DRCHOCX, SPNEED and SPCHOCX), were asked of the family informant and other adults who completed the SRM. The family informant answered for the randomly selected child.
REQAPRVA GETAPRVA PAPRWRKA	The "CAHPS" questions (except cahpslang) are asked separately for adults and children. Because of errors in data collection, some children were mistakenly skipped out of questions kcahps23s, kchaps23, and kcahps37. Therefore, for those questions, the responses for children are not provided on the data file. This means that only adults' responses to the corresponding questions (questions cahps23s, cahps23, and cahps37) are represented in the variables REQAPRVA, GETAPRVA, and PAPRWRKA.
SICKCR CHKASIK CHECKUP DRORSP LSTYPE LSTUSC LSTOER LSTAPP LSTAPPX LSTWATX LSTRAVX LSTHOR LSTLISN LSTEXPL	<p>Questions e161-e321, describing the person's last physician visit, were asked only for people with a physician visit in the last 12 months. These variables have a value of "-1 Inapplicable" for other people.</p> <p>Each adult responded for him/herself. For the randomly selected child, the questions were answered by the adult family member who accompanied the child on the last physician visit. If the person who accompanied the child on the last visit was not a family member, these variables have a value of "-9 Not Ascertained" on the child's record (or "-1 Inapplicable" if affected by a skip pattern). If an adult family member (not the family informant) accompanied the child but did not complete a SRM, these variables have a value of "-1 Inapplicable."</p> <p>In the 2000-01 Household Survey, an error in data collection for children resulted in the need to construct versions of some of these variables that were coded only for adults. Those variables were called LSTUSCA, LSTOERA, LSTAPPA, and LSTATXX (public use file) / LSTATAX (restricted use file). Because that data collection problem was corrected in the 2003 Household Survey, the variables are again coded for all ages [LSTUSC, LSTOER, LSTAPP, and LSTAPXX (public use file) / LSTAPPX (restricted use file)], as they were in the 1996-97 and 1998-99 surveys.</p>

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
VISCUR	The variable VISCUR was constructed to indicate whether the person had a doctor visit while covered under his or her current insurance plan. To construct VISCUR, we used the variable INSTYPE to define the person's current insurance coverage in combination with the variables indicating the month of the last doctor visit and the insurance enrollment month. For confidentiality reasons, the variables indicating the month of the last doctor visit and enrollment month are not provided. VISCUR was constructed for all persons (including the randomly selected child) who had a physician visit in the past 12 months.
GENHLH	The variable GENHLH indicates the person's general health status. Questions e401, e40c, e801 and SRM question e402 were asked for all adults. If the randomly selected child had a physician visit in the last 12 months and was accompanied on the visit by an adult family member, the questions were asked of that adult family member.
FLCALM4 FLDOWN4	Questions e491 and e51 did not change between the 2000-01 and 2003 surveys, but the variables have been renamed (from FLCALM and FLDOWN to FLCALM4 and FLDOWN4) because the 2000-01 variables were imputed and the 2003 variables were not.
TAKRISK SMKEVR SMKNOW	Questions e521, e601, and e611 (on risk-taking and smoking behavior) were asked only of the family informant and other adult family members who completed the SRM. They were not asked for the randomly selected child.
SYNECK - SYCHEST SYLINK SYMAPPR SYMPREG SYMTODR DRSEE DRTALK DRCALL DRNEED DRCNTAC DRTRYGO SYMLMT SYMLMTD SYMMISS SYMMSSD SICKLVE	Questions srm1 – srm10 are asked for all uninsured adults, all adults age 65 or older, and a sample (one-sixth) of the other adults. Question srm1 (variables SYNECK – SYCHEST) asks for specific health problems (<i>symptoms</i>) that the person had in the past three months. If the person had any of the health problems in question srm1, then the CATI system selects one symptom for question srm2 (whether the problem appeared in the past three months) in the following manner: If the person reported any <i>serious</i> symptoms in question srm1 (SYNECK, SYBRETH, SYFAINT, SYBLUR, SYHACHE, SYLUMP, SYCHEST), then the system selects one serious symptom at random for question srm2. If the person reported no serious symptoms in question srm1, then the system selects one <i>morbid</i> symptom (SYCOUGH, SYSAD, SYANXTY, SYHIP, SYANKLE, SYWEAK, SYURINE, SYHEAR) at random. If the person doesn't respond "yes" to srm2 for the symptom first selected, then the symptom selection process is repeated and srm2 is asked for the newly-selected symptom. This re-selection process continues until the response to srm2 is "yes" for some symptom (i.e., the symptom began in the past three months), and that symptom is then used for questions srm2a – srm9a (and is indicated by the constructed variable SYLINK). If none of the symptoms began in the past three months, then the interview skips to question e521.

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
BMIX BMICAT	<p>Questions BRFSS10 and BRFSS11 ask for weight (in pounds) and height (in feet and inches) for individuals age 18 and over. That information was used to calculate BMI (body mass index) according to the formula: $BMI = \{ (\text{weight in lbs.}) / [(\text{height in inches})^2] \} * 703$. The variable BMIX contains the BMI values, top-coded at 40.0 and bottom-coded at 18.0.</p> <p>The variable BMICAT simply indicates the BMI categories for individuals age 21 and over. It does not provide any additional information beyond that provided by the variable BMIX.</p> <ul style="list-style-type: none"> • Underweight if BMI < 18.5 • Normal if BMI is 18.5 – 24.9 • Overweight if BMI is 25.0 – 29.9 • Obese if BMI is 30.0 or above
CSHCN	<p>The variable CSHCN is a constructed variable identifying children with special health care needs. The universe is all children (ages 0 – 17). CSHCN = 1 (yes) if the response to any of the following questions is “yes”: scsn1b, scsn2b, scsn3b, scsn4b, scsn5b. For all the “scsn” questions, responses of “don’t know” and “refuse” were treated the same as responses of “no.”</p> <p>Questions scsn1 – scsn5 come directly from the Children with Special Health Care Needs (CSHCN) Screener, which was developed through the Child and Adolescent Health Measurement Initiative. Question scsn5a is not from the CSHCN Screener, and question scsn5b is a slight rewording of Screener question 5a.</p>

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Section F Variables: Employment	
Questions in this section were asked of all persons in the household who were 18 years of age or older.	
WAGEHRX	The variable WAGEHRX was constructed using the responses to questions f131, f301, f321, f331. These questions were only minimally edited. A sizable number of cases had either extremely large or small values. Users should be cautious in using this variable and may want to reconstruct WAGEHRX as a categorical range variable rather than as a continuous variable. WAGEHRX only has a positive value for adults who responded yes to question f111, which asks if the person did any work last week for pay (or profit); for all other cases, it has a value of “-1 Inapplicable.”
EMPOFER- EMPBOTH	Questions f501-f561 (EMPOFER-EMPBOTH), on insurance offered by employers, were asked only of persons who were employed (excluding self-employed), who were not policyholders of employer/union-based plans, and who were less than 65, even if they did not use the health insurance benefits offered by their employer. All other persons were assigned a value of “-1 Inapplicable.”
ELUNINS4	<p>Because the universe for question f521 changed slightly for the 2003 survey, the variable for that question has been renamed from ELUNINS to ELUNINS4.</p> <ul style="list-style-type: none"> • Previous universe for f521: Work for government or private employer (f201), not policy holder for employer/union based plan (b231, b251), less than 65 years old, employer or union offers health insurance plan (f501), eligible to participate in own employer’s health insurance plan (f511), and <i>uninsured</i>. • Universe for f521 in 2003 survey: Work for government or private employer (f201), not policy holder for employer/union based plan (b231, b251), less than 65 years old, employer or union offers health insurance plan (f501), eligible to participate in own employer’s health insurance plan (f511), and <i>not covered by a plan from any other employer (b1a, b1c)</i>. <p>For the variable ELUNINS4, categories 4-6 were constructed after reviewing the verbatim response to question f521, for which respondents could specify other reasons for not participating in the employer’s health insurance plan.</p>
INELIGR	For the variable INELIGR, categories 11-13 were constructed after reviewing the verbatim response to question f531, for which respondents could specify other reasons why they were ineligible for employer’s health insurance plan.
OFFERED- OFRBOTH	The constructed variables OFFERED-OFRBOTH can be used for analyses of employment related insurance for the entire employed population. The variables were constructed using variables from Sections B and F for all persons age 18 and over, including self-employed persons and the working elderly.

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

Variable	Additional Information
Section G Variables: Family Income and Race	
FAMINCX CENSINX	<p>There are two income variables on the Restricted Use File. The first, FAMINCX, represents the total income reported for the FIU, which is the entity identified by the variable CSIDX. The second income variable, CENSINX, represents the total income reported for the census family, which is the entity identified by the variables HHIDX + CENSID. For confidentiality reasons, cases with CENSINX values greater than \$150,000 were masked by top-coding to a value of \$150,000. Because values of FAMINCX for these FIUs could be combined to obtain a value of more than \$150,000 and thus violate the confidentiality masking, FAMINCX for these FIUs was assigned a value of “-5.” Both of these income variables may reflect income for person(s) in the FIU who are not represented on the data file.</p>
POVLEV	<p>The variable POVLEV is a constructed variable that indicates the U.S. Census Bureau 2002 family income poverty threshold for the size of the census family on this record (identified by HHIDX + CENSID). A poverty index variable can be constructed as the ratio of the census family income, CENSINX, to the census poverty threshold, POVLEV.</p>
RACNEWX RACETHX	<p>In the 2003 survey, the question g221 (asking the respondent to choose a single race category) was replaced by question g22n1, which allows the respondent to choose multiple race categories. The categories are:</p> <ul style="list-style-type: none"> • White • African American or Black • American Indian or Alaska Native • Asian • Native Hawaiian or Other Pacific Islander • Other <p>The variable RACNEWX was constructed from the responses to question g22n1. For example, a respondent is coded as “White only” in RACNEWX only if s/he chose the race category “White” and no other race categories for question g22n1. Although the specific responses within the category “All other” (4,072 people) cannot be provided because of concern for the confidentiality of the survey respondents, the most predominant responses within that category are:</p> <ul style="list-style-type: none"> • 1,439 people reporting Other only. • 881 people reporting Asian only. • 584 people reporting the two-race combination White and American Indian or Alaska Native. • 525 people reporting American Indian or Alaska Native only. • 157 people reporting Native Hawaiian or Other Pacific Islander only. • 110 people reporting the two-race combination White and African American. <p>The variable RACETHX was constructed from the variables HISPAN (question g201) and RACNEWX. A response of Hispanic ethnicity was coded as RACETHX = 4 Hispanic, i.e., categories 1-3 are all non-Hispanic. For example, a respondent is coded as “White only, nonHispanic” in RACNEWX only if s/he was not Hispanic (according to HISPAN) and</p>

TABLE 5.6

ADDITIONAL INFORMATION ON VARIABLES
(continued)

	<p>chose the race category “White” and no other race categories for question g22n1. Although the specific responses within the category “All other” (2,266 people) cannot be provided because of concern for the confidentiality of the survey respondents, the most predominant responses within that category are:</p> <ul style="list-style-type: none"> • 867 people reporting Asian only. • 566 people reporting the two-race combination White and American Indian or Alaska Native. • 359 people reporting American Indian or Alaska Native only. • 104 people reporting Native Hawaiian or Other Pacific Islander only. • 92 people reporting the two-race combination White and African American.
<p>Section H Variables: Interview Closing</p>	
<p>Variables in this section reflect information from the interview closing questions, including the household’s telephone availability and service history. Responses to these questions were used to construct the survey weights. Question h30 was modified in the 2003 survey to explicitly exclude cell phones; this change is reflected in the renaming of the variable PHNOTHX to PHNOTH4X.</p>	
<p>Weights and Sampling Variables</p>	
<p>Weights and sampling variables are described in Chapters 2, 3, and 4.</p>	

CHAPTER 6

FILE DETAILS

This chapter provides an overview of the file content and technical specifications for programmers. It also describes the variable naming and coding conventions that were used on the file and that appear in the file's codebook.

6.1. FILE CONTENT AND TECHNICAL SPECIFICATIONS

The CTS 2003 Household Survey Restricted Use File contains 46,587 person records. The unique record identifier and sort key is the variable PERSIDX. Variables are positioned on the file in the following order:

- Survey administration variables: this group includes identifiers, geographic indicators, and other variables associated with conducting the Household Survey
- Variables from Sections A-H of the Household Survey questionnaire: Variables are ordered within each section by related questionnaire item number
- Weights and sampling variables

The Restricted Use File is provided as an ASCII-formatted file with the following technical specifications:

Data set name:	CTSR4HR1.TXT
Number of observations:	46,587
Number of variables:	496
Logical record length:	1211

The file contains a two-byte carriage return/line feed at the end of each record. When you are converting to a PC-SAS file, use the LRECL option to specify the record length to avoid the default PC-SAS record length. If the RECFM=V option is used, the LRECL option must be specified as the logical record length (1211). If RECFM=F is used, the LRECL value must be specified as the logical record length plus two (1213). Note that if the RECFM option is omitted, then the default option of RECFM=V will be used, and LRECL must be specified as the logical record length (1211).

The record layout for this file is provided in the file's codebook.

6.2. VARIABLE NAMING CONVENTIONS

In general, a variable name reflects the content of the variable. For the following groups of variables, a naming convention was used to provide additional information on variable content:

- ***Imputation Flags.*** These flags indicate whether a record has an imputed value for the corresponding variable. The flag variable has the same name as the variable it describes, and includes the prefix “_.” For example, _HIGRADX is the imputation flag corresponding to the variable HIGRADX. Refer to Chapter 5 for more information on imputation and other types of editing procedures used on the file.
- ***Private Insurance Plan Variables.*** Each family could report up to three private insurance plans, which are described by a series of variables, PRVHLDi through PRVBOTi, which correspond to questions b231-b393. The same questions were asked for each of the plans, so there is one set of these variables for each plan, and the variable name suffix “i” has a value of 1-3 indicating the plan number. (See Chapter 5 for information on coding of these variables when fewer than three plans were reported.)
- ***Medicare and Medicaid Coverage Variables.*** These variables, MCRSIGN-MCD12M, correspond to questions b51-b67. All include the string “MCR” and “MCD,” respectively, in the name.
- ***State Insurance Coverage Variables.*** The variables that correspond to questions b71-b77 (STPHD-ST12M) all have the variable name prefix “ST” (preceded by “_” on imputation flag variables).
- ***Uninsured Variables.*** The variables that correspond to questions b80-b84 (UNINCOV-UNINR14) all have the prefix “UN” in the name.
- ***Reasons for Not Getting or Postponing Medical Care.*** Variables for question c821 and c831 (PUTOFF, PUTOFFR0-PUTOFF21), which describe the reason(s) for not getting or for postponing medical care, all have the variable name prefix “PUTOF.”
- ***Description of Last Doctor Visit.*** Variables for questions e241-e321 (LSTUSC-LSTEXPL), which describe characteristics of the last doctor visit, all have the prefix “LST” in the name.
- ***Weights.*** The prefix “WT” is present for all weight variables.
- ***Masked Variables.*** All variables that were masked for confidentiality reasons end with the value “X.” (However, not all variables that end in “X” were masked.) The variable descriptions contained in the file’s codebook indicate whether the variable was masked and provide brief details as to the type of masking performed.

A summary of the data collection instrument, annotated with the names of only the variables that directly correspond to a single question, is provided in Appendix B.

6.3. VARIABLE CODING CONVENTIONS

The following coding conventions are used on the file:

- | | | |
|----|---------------------------------|--|
| -1 | Inapplicable: | Question was not asked due to skip pattern. |
| -5 | Suppressed for Confidentiality: | Value suppressed to preserve confidentiality. |
| -7 | Refused: | Question was asked and respondent refused to answer |
| -8 | Don't Know: | Question was asked and respondent did not know the answer. |
| -9 | Not Ascertained: | Value was not assigned for any other reason. |

REFERENCES

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Documentation for the Household Survey Public Use and Restricted Use Data Files

2003 Household Survey:

Community Tracking Study Household Survey Public Use File: User's Guide, 2003, Technical Publication No. 58, Center for Studying Health System Change, Washington, D.C. (February 2005).

Community Tracking Study Household Survey Public Use File: Codebook, 2003, Technical Publication No. 59, Center for Studying Health System Change, Washington, D.C. (February 2005).

Community Tracking Study Household Survey Restricted Use File: User's Guide, 2003, Technical Publication No. 60, Center for Studying Health System Change, Washington, D.C. (February 2005).

Community Tracking Study Household Survey Restricted Use File: Codebook, 2003, Technical Publication No. 61, Center for Studying Health System Change, Washington, D.C. (February 2005).

2000-01 Household Survey:

Community Tracking Study Household Survey Public Use File: User's Guide, 2000-01, Technical Publication No. 41, Center for Studying Health System Change, Washington, D.C. (May 2003).

Community Tracking Study Household Survey Public Use File: Codebook, 2000-01, Technical Publication No. 42, Center for Studying Health System Change, Washington, D.C. (May 2003).

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Community Tracking Study Household Survey Restricted Use File: Codebook, 2000-01, Technical Publication No. 44, Center for Studying Health System Change, Washington, D.C. (May 2003).

1998-99 Household Survey:

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Community Tracking Study Household Survey Restricted Use File: Codebook, 1998-99, Technical Publication No. 24, Center for Studying Health System Change, Washington, D.C. (June 2001, revised September 2002).

1996-97 Household Survey:

Community Tracking Study Household Survey Public Use File: User's Guide, 1996-97, Technical Publication No. 7, Center for Studying Health System Change, Washington, D.C. (June 1998, revised July 2000).

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**HSC Technical Publications are available on the HSC Web site
www.hschange.org**

Appendix A

The CTS Household Survey Instrument

**Community Tracking Study
Round 4 (2003) Household Survey**

“For ease of documentation, we have added a suffix of ‘1’ to question numbers asked about the FIU informant, and a suffix of ‘2’ to question numbers asked about additional adults in the FIU (self response module). In the actual CATI program, the question numbers for the FIU informant have no suffix, and the question numbers for the self response module have a suffix equal to the person number of the respondent.”

INTRODUCTIONS

REINTERVIEW SAMPLE

>pA0< Hello, this is [fill NAME] with the Community Tracking Survey, the health care study that your household participated in [fill MO/YR]. [IF HCC, USE DATE OF THAT INTERVIEW]. We recently mailed you a letter describing the survey. Now, we are conducting a follow-up study to understand how managed care and other changes are affecting the quality of care people receive. As a token of appreciation for your help, we'll send you a check for \$[fill INCENTIVE].

Since the survey is about health issues, I would like to speak with an adult who lives here and is familiar with the health care of family members.

[IF LETTER/BROCHURE NOT SENT: IF R WANTS TO KNOW MORE, SUMMARIZE FINDINGS FROM BROCHURE.]

IF NECESSARY, ADD: Your household's participation in this followup survey, which has the support of state health departments throughout the country will make a real contribution toward efforts to provide high quality and affordable health care. Let's begin . . .

TYPE <g> TO CONTINUE [goto code_s1]

TO BREAKOFF/ADDITIONAL INFORMATION.....b [goto code_s1]
R. CLAIMS HOUSEHOLD NOT IN Round 3.....x [goto DEL2]
===>

FOR NEW SAMPLE (VERSION 1 — LETTER)

>paa2< Hello, this is [fill NAME], with the Community Tracking Study, a project to see how managed care and other health care changes are affecting people in your community. We recently sent your household a brochure describing our project. Did you receive it?

YES.....1 [goto paa3]
NO0 [goto paa4]
===>

>paa3<

As we pointed out in the brochure, the purpose of the Community Tracking Study is to see how the shift to managed care and other health care changes are affecting people in your community. As a token of appreciation for your help, we'll send you \$25 for helping us with our project. May I speak with an adult here who is familiar with the health care of family members.

MORE IF NEEDED: We're doing the study because we don't know how the shift to managed care and other changes are affecting people. The questions are very basic—things like "Are you satisfied with your health care and choice of doctors? Do you have health insurance? Have you had a flu shot in the last 12 months?" The interview is strictly confidential and you don't have to answer any questions you don't want to.

TYPE <g> TO CONTINUE ==> [goto code_s1]

>paa4<

The purpose of the Community Tracking Study is to see how the shift to managed care and other health care changes are affecting people in your community. We are not selling anything or asking for money. As a token of appreciation for your help, we'll send you \$25 for helping us with our project. May I speak with an adult here who is familiar with the health care of family members.

MORE IF NEEDED: We're doing the study because we don't know how the shift to managed care and other changes are affecting people's lives. The questions are very basic—things like "Are you satisfied with your health care and choice of doctors? Do you have health insurance? Have you had a flu shot in the last 12 months?" The interview is strictly confidential and you don't have to answer any questions you don't want to.

TYPE <g> TO CONTINUE ==> [goto code_s1]

FOR NEW SAMPLE (VERSION 2—NO LETTER):

>s1< Hello, this is [fill NAME], with the Community Tracking Study, a project to see how managed care and other health care changes are affecting people in your community. We're not selling anything or asking for money. This is a study for a private foundation about health issues. As a token of appreciation for your help, we'll send you \$25 for participating in a brief interview. May I speak with an adult at least 18 years old who lives here and is familiar with the health care of family members.

ADDITIONAL TEXT IF NEEDED: We're doing the study because we don't know how the shift to managed care and other changes are affecting people. The questions are very basic—things like "Are you satisfied with your health care and choice of doctors? Do you have health insurance? Have you had a flu shot in the last 12 months?" The interview is strictly confidential and you don't have to answer any questions you don't want to.

LENGTH: The interview will only take about half an hour and we will send you \$25 for helping us with the study.

TYPE <g> TO CONTINUE ==> [goto code_s1]

FOR REFUSAL PREPAYS

>pap1< Hello, my name is _____, calling from Mathematica. Last week, we sent a letter to your household about a study concerning the health care needs of adults and children. As a token of our commitment, we enclosed a check for \$[fill chka].

Got check, continue..... 1
Did not receive check2 [goto pap3]
CALL BACK3 [goto callback]
==>

>pap2< I hope the letter and brochure answered your questions about our research study.

PAUSE, AND ANSWER ANY QUESTIONS. IF NO QUESTIONS, CONTINUE

I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.

TYPE <g> TO CONTINUE

CALL BACK 1 [goto callback]
==> [goto a2]

See Appendices B and C for the names of the variables associated with the survey questions.

>pap3< I'm calling to ask you to take part in a major health study, and I'd like to resend you a check for \$[fill chka] for helping us with the survey. By sharing your concerns and opinions about health care, you will help answer important questions about how changes in health care are affecting the well being of adults and children in your community.

IF NECESSARY ADD: The interview will only take about a half hour.

I can conduct the interview with an adult who is familiar with the health care of the people who live here. Let's begin.

TYPE <g> TO CONTINUE [goto code_s1]

NEEDS CHECK FIRST 1 [goto pap4]
====>

>code_s1<

CONTINUE WITH INTERVIEW

SPEAKER IS 18 OR OLDER 1 [goto a4]
WILL CALL SOMEONE 18 OR OLDER
TO THE PHONE 2
WANTS MORE INFORMATION..... 9 [goto a3]

CALLBACK

NO PERSON 18 OR OLDER HOME NOW 3
CALLBACK 10

PROBLEM

PROBABLE MENTAL IMPAIRMENT 5
LANGUAGE BARRIER 6 [goto lang]
SUPERVISOR REVIEW..... 11

REFUSAL

HOUSEHOLD REFUSAL 7
HUNG UP DURING INTRODUCTION..... 12

INELIGIBLE

NO PERSON 18 OR OLDER
LIVES IN THE HOUSEHOLD..... 4
NOT A RESIDENCE (BUSINESS/
NON-RESIDENCE/GROUP QUARTERS/
INSTITUTION/VACATION HOME) 8
====>

>lang<

INTERVIEWER CODE LANGUAGE

SPANISH [set for Spanish interview] s
OTHER 0
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>lang_other< INTERVIEWER CODE LANGUAGE

ASIAN

CHINESE	1
JAPANESE	2
KOREAN	3
VIETNAMESE	4
UNKNOWN ASIAN	5
OTHER [SPECIFY]	0

EUROPEAN/SLAVIC

FRENCH	6
GERMAN	7
ITALIAN	8
POLISH	9
PORTUGUESE	10
RUSSIAN	11
UNKNOWN EUROPEAN/SLAVIC	12
OTHER [SPECIFY]	0

OTHER

OTHER [SPECIFY]	0
-----------------------	---

==>

See Appendices B and C for the names of the variables associated with the survey questions.

FOLLOW UP RESPONSES FOR ALL SAMPLES

>a3< SPONSOR: The project is sponsored by the Robert Wood Johnson Foundation, a non-profit organization whose sole purpose is to improve health care. It is not associated with any political party or private company.

LENGTH: For most families the interview averages about 30 to 40 minutes; it is about 15 to 20 minutes for single persons.

CONTACT: If you would like to find out more about the study or the foundation, you can call [Maureen Michael] at [fill PHONE NUMBER].

MORE ON PURPOSE IF NEEDED: We are doing this study because fundamental changes are taking place in health care today, but little information is available on how these changes are affecting people. For example, the project will help us understand whether people are getting the health care they need, their satisfaction with choice of physicians and quality of care, and how we can help children and adults who don't have health insurance or may lose it.

SELECTION: Your telephone number was randomly generated by a computer to represent many others in your community. For our results to be accurate, it is very important that we interview the households we select.

CONFIDENTIALITY: All of your answers are confidential. The answers you give will be combined with answers from other people in your community. Your name will not be linked with the answers.

TYPE <g> TO CONTINUE ==> [goto code_s1]

>phone_ck< Before we start this interview, is [phone number] used for . . .

home use	1
business and home use, or	2
business use only? [ineligible]	3

See Appendices B and C for the names of the variables associated with the survey questions.

a. DEMOGRAPHICS AND SCREENING

>test< If new sample goto >hhld<; if reinterview continue with >DEL<

HOUSEHOLD COMPOSITION

IF RE-INTERVIEW SAMPLE:

>DEL< To begin, I'm going to list the people who were part of this household when we interviewed in [fill MO/YR]. As I read, tell me if any of them no longer live here.

INTERVIEWER: DO NOT READ HOUSEHOLDER TO RESPONDENT. READ GENDER AND AGE AT LAST INTERVIEW IF NAME AND RELATIONSHIP ARE INSUFFICIENT.

DELETE? NAME RELATION SEX AGE AT LAST INTERVIEWER

[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 1
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 2
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 3
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 4
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 5
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 6
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 7
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] 8

ALL PREVIOUS HOUSEHOLD MEMBERS
CONFIRMED OR DELETED g

R CLAIMS HOUSEHOLD NOT IN R3—NO MEMBERS
FROM ROUND 3 REMAIN
[REFLAG HOUSEHOLD AS NEW SAMPLE] x [goto A210]

UNDELETE A PERSON u

UNDELETE THE ENTIRE HH e
====> [goto ADD]

NOTES TO >DEL<:

- 1) Entering a <x> response runs the existing deletion routine from the R3 instrument, with a *DELETED* notation appearing in the relationship column. Lines marked as deleted are then available for the interviewer to add “new” members (below). This same *DELETED* notation should appear in all household and FIU review screens in the relationship column (whether for new sample or re-interview sample) unless a “new” person is added to that “line.”
- 2) Data on relationship, sex and age at R3 are offered in the table only to aid the interviewer in verifying the household composition relative to Round 3. If the respondent offers corrections, the interviewer should say, “I’ll take that information from you in a moment,” and continue to verify household composition.

>a202< upon <g> (review complete) in >DEL<, each person still in the table should be flagged to indicate an R3 household member.

>DEL2< Can I take a minute to verify that the people we interviewed at this phone number a couple of years ago are no longer here?

INTERVIEWER: DO NOT READ HOUSEHOLDER TO RESPONDENT. READ GENDER AND AGE AT LAST INTERVIEW IF NAME AND RELATIONSHIP ARE INSUFFICIENT

DELETE?	NAME	RELATION	SEX	AGE AT R3	
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 1
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 2
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 3
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 4
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 5
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 6
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 7
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE AT R3]	..... 8
	ALL PREVIOUS HOUSEHOLD MEMBERS CONFIRMED.....				g
	RESPONDENT CLAIMS HOUSEHOLD NOT IN ROUND 32 - NO MEMBERS FROM ROUND 32 REMAIN [goto A210]				x
	UNDELETE				u
	UNDELETE THE ENTIRE HH				e
	==> [goto ADD]				

See Appendices B and C for the names of the variables associated with the survey questions.

>A210<

We would still like to include your household in our study. Our goal is to see how managed care and other health care changes are affecting people in your community. The project is sponsored by a private foundation and is endorsed by state health departments throughout the country. As a token of appreciation for your help, we'll send your family \$25 for helping us with the project. Since the survey is about health issues, I would like to speak with an adult who lives here and is familiar with the health care of family members.

MORE IF NEEDED: We're doing the study because we don't know how the shift to managed care and other changes are affecting people's lives. The questions are very basic—things like "Are you satisfied with your health care? Do you have health insurance? Have you had a flu shot in the last 12 months? The interview is strictly confidential and you don't have to answer an questions you don't want to.

TYPE <g> TO CONTINUEg [goto hhld]
REFUSAL r [goto Ref]
====>

>ref<

INTERVIEWER ENTER <g> TO ENTER THE REASON FOR THE REFUSAL.
CODE THE MAIN REASON ON THE NEXT SCREEN.

====>

>Ref1<

INTERVIEWER: CODE MAIN REASON FOR REFUSAL

CONFIDENTIALITY	10
ACCESS TO TELEPHONE NUMBER	11
SKEPTICAL ABOUT OR DOESN'T UNDERSTAND FOUNDATION'S ROLE	20
THINKS FOUNDATION IS A FRONT FOR POLITICAL GROUPS	21
DOESN'T LIKE STUDY'S PURPOSE (UNSPECIFIED REASON)	40
DOESN'T THINK STUDY WILL HELP OR MAKE A DIFFERENCE	41
CONFUSED ABOUT STUDY'S PURPOSE	43
NOT INTERESTED (UNSPECIFIED REASON)	50
NOT INTERESTED IN HEALTH ISSUES/ NOT IMPORTANT	51
FAMILY/INFORMANT SATISFIED WITH OR HAS GOOD INSURANCE	53
SPOUSE WOULD NOT WANT INFORMANT TO PARTICIPATE	54
INTERVIEW IS TOO LONG	61
DOESN'T HAVE TIME FOR SURVEYS (LENGTH NOT DISCUSSED)	62
NO REASON GIVEN	70
INCENTIVE TOO SMALL	82
SKEPTICAL ABOUT WHETHER WE WILL PAY INCENTIVE	83
HOUSEHOLD REFUSED PRIOR TO THIS CALL	90
OTHER	0
====> END INTERVIEW	

>ADD<

Is there anyone that I have not mentioned who lives or stays here or who is away at college? REREAD NAMES FROM LIST IF NECESSARY.

[THEN]: Have I missed any babies or small children, anyone who usually lives here but is away at present traveling, in school, or in a hospital, or any foster children, lodgers, boarders and roommates?

PROBE IF R. ASKS ABOUT STUDENTS: Include household members less than 23 years old who are away at school or college, regardless of whether they live in a dorm or off-campus apartment.

IF NO: CODE "n"

IF YES: What are their first names?

See Appendices B and C for the names of the variables associated with the survey questions.

IF R. IS RELUCTANT TO GIVE FIRST NAMES: We are asking for first names because the survey includes questions about the health care of family members. The only reason we need first names is so we'll have some way to tell family members apart. If you'd rather not give names, we can take relationships or some other way to tell family members apart.

IF YES: ENTER CODE FOR NEXT AVAILABLE PERSON, WITH A MAXIMUM OF 8 PER HOUSEHOLD. (PROGRAM WILL PROMPT FOR NAMES)

```

NAME
[fill NAME] ..... 1
[fill NAME] ..... 2
[fill NAME] ..... 3
[fill NAME] ..... 4
[fill NAME] ..... 5
[fill NAME] ..... 6
[fill NAME] ..... 7
[fill NAME] ..... 8

NO OTHER HOUSEHOLD MEMBERS ..... n
MORE THAN 8 HOUSEHOLD MEMBERS..... e [goto emo1]
===>

```

>test head< **If Householder from Round 3 is confirmed as a current household member, goto >bmol<; else goto >head<**

>head< Who owns or pays most of the rent on this house? (READ LIST IF NECESSARY; ENTER CODE FOR PERSON MENTIONED FIRST).

```

NAME          RELATION      SEX      AGE

[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 1
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 2
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 3
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 4
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 5
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 6
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 7
[fill NAME][RELATIONSHIP][Sex][AGE AT R3] ..... 8

===>.....[reassign selected person and their demographic data to the
<1> householder slot] [goto bmol]

```

IF NEW SAMPLE:

>hhld< What are the first names of the people who live or stay here, or who are students away at college? Begin with one of the people who owns or pays most of the rent for this home, and then other people in the household. Be sure to include yourself.

- INTERVIEWER:** 1) **IF R. IS RELUCTANT TO GIVE FIRST NAMES:** We are asking for first names because the survey includes questions about the health care of family members. The only reason we need first names is so we'll have some way to tell family members apart. If you'd rather not give names, we can take relationships or some other way to tell family members apart.
- 2) Persons who reside at a vacation residence, in institutions (see help screen for definitions), or in other group quarters (10 or more unrelated persons living together) are not eligible.

[fill NAME] [HOUSEHOLDER GOES HERE] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

VACATION HOME, INSTITUTION,
GROUP QUART [Ineligible]..... v
NO OTHER HOUSEHOLD MEMBERS n
DELETE A HOUSEHOLD MEMBER x
UNDELETE A HOUSEHOLD MEMBER u
MORE THAN 8 HOUSEHOLD MEMBERS..... e [goto emo1]
====> [goto more]

See Appendices B and C for the names of the variables associated with the survey questions.

>more< Have I missed any babies or small children, anyone who usually lives here but is away at present traveling, in school, or in a hospital, or any foster children, lodgers, boarders, and roommates?

IF YES: What are their first names?

IF NO: CODE "n"

ENTER TEXT FOR ADDITIONAL PERSONS, WITH A MAXIMUM OF 8 PER HOUSEHOLD

PROBE IF R. ASKS ABOUT STUDENTS: Include household members less than 23 years old who are away at school or college, regardless of whether they are living in a dorm or off-campus apartment.

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

- NO OTHER HOUSEHOLD MEMBERS n
- DELETE A HOUSEHOLD MEMBER x
- UNDELETE A HOUSEHOLD MEMBER u
- MORE THAN 8 HOUSEHOLD MEMBERS..... e [goto emo1]
- ====> [goto bmo1]

FOR ALL SAMPLE:

>emo1< You've told me about eight people that live in this household. Do any other people live in this household?

- YES 1
- NO OTHER PEOPLE IN HOUSEHOLD
- [if reinterview sample goto test head;
- if new sample goto bmo1]..... n
- ====>

>emo2< How many of those additional people are 18 years old or older?

- |_|_|_|
- (0-99)
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>em3< How many of those additional people are under 18?

____|____|
(0-99)

====> [if reinterview sample goto test head; if new sample goto bmo1]

>bmo1< In what month and year was [fill HOUSEHOLDER] born?

INTERVIEWER: (1) REMEMBER THAT THIS IS THE HOUSEHOLDER.
(2) IF R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE.
(3) IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.

JAN 1
FEB 2
MARCH 3
APRIL 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d [goto age1]
====>

>byr1< [no erase]

____|____| MONTH
(112)

____|____|____|____| YEAR
(1880-1984)
====> [goto SEX1]

See Appendices B and C for the names of the variables associated with the survey questions.

>age1< What is (his/her/your) age?

INTERVIEWER: (1) REMEMBER THAT THIS IS THE HOUSEHOLDER.
(2) R. IS UNCERTAIN, PROBE FOR BEST ESTIMATE.
(3) IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.
(4) IF R. STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR ... UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS AND CHILDREN.

|__| |__| |__| YEARS OLD
(16-120)

18 OR OLDER a
LESS THAN 18 c
==>

>SEX1< ... and is [fill HOUSEHOLDER] male or female?

INTERVIEWER: CODE WITHOUT ASKING IF KNOWN

MALE m
FEMALE f
==> [If age1 lt 23 goto col1; else goto grd1]

>col1< (Is [fill HOUSEHOLDER]/Are you) a full-time student?

PROBE: The definition of a full-time student should be based on [fill NAME]'s school.

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>grd1<

What is the highest grade or year of school ([fill HOUSEHOLDER]/you) completed?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: IF R. GIVES DEGREE, CODE AS FOLLOWS:

HIGH SCHOOL/GED	12
JUNIOR COLLEGE/ASSOCIATES DEGREE.....	14
B.A./B.S.	16
M.A./M.S.	17
M.P.H./M.B.A/M.P.A.....	18
JD/LAW.....	19
MD/PHD.....	20

|__| |__| GRADE COMPLETED
(0-20)

DON'T KNOW	d
REFUSED.....	r

====>

>mil1<

[IF age ge 18 and lt 65] (Is [fill HOUSEHOLDER]/Are you) on active duty in the military at this time?

YES.....	1
NO	0

DON'T KNOW	d
REFUSED.....	r

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>bmo2< In what month and year was [fill SECOND PERSON's NAME] born?

IF R. IS UNCERTAIN PROBE FOR BEST ESTIMATE.

PROBE IF R. IS RELUCTANT: This information is needed only to understand differences in health care for people in different age groups.

- JAN 1
- FEB 2
- MARCH 3
- APRIL 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

DON'T KNOW d [goto age2]
===>

>byr2< [no erase]

|_|_|_| MONTH
(1-12)

|_|_|_|_| YEAR
(1880-2002) 1

DON'T KNOW d [goto age2]
===> [goto SEX2]

See Appendices B and C for the names of the variables associated with the survey questions.

>age2< What is [fill SECOND PERSON's NAME's] age?

INTERVIEWER:

- (1) CODE "0" IF LESS THAN SIX MONTHS.**
- (2) CODE "1" IF LESS THAN ONE YEAR BUT MORE THAN SIX MONTHS**
- (3) IF RESPONDENT IS UNCERTAIN, PROBE FOR BEST ESTIMATE**
- (4) IF RESPONDENT IS RELUCTANT:** This information is needed only to understand differences in health care for people in different age groups.
- (5) IF R STILL REFUSES OR DOESN'T KNOW, ASK IF 18 OR OLDER OR UNDER 18 BECAUSE QUESTIONS ARE DIFFERENT FOR ADULTS AND CHILDREN.**

|_|_|_| YEARS OLD
(0-120)

18 OR OLDER a
LESS THAN 18 c
==>

>SEX2< . . . and is [fill SECOND PERSON's NAME] male or female?

INTERVIEWER: CODE WITHOUT ASKING IF KNOWN

MALE m
FEMALE f
==>

test: [if age2 ge 16 and lt 23 goto col2; else goto test grd2]

>col2< Is [fill NAME] a full-time student?

PROBE: The definition of a full-time student should be based on [fill NAME]'s school.

YES 1
NO 0

DON'T KNOW d
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>test grd2< [if age2 lt 18 goto rel2]

>grd2< What is the highest grade or year of school [fill NAME] completed?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand differences in health care problems and needs.

INTERVIEWER: IF R. GIVES DEGREE, CODE AS FOLLOWS:

HIGH SCHOOL/GED	12
JUNIOR COLLEGE/ASSOCIATES DEGREE.....	14
B.A./B.S.	16
M.A./M.S.	17
M.P.H./M.B.A/M.P.A.....	18
JD/LAW	19
MD/PHD	20

|__| |__| GRADE COMPLETED
(0-20)

DON'T KNOW	d
REFUSED	r

==>

>mil2< [IF age2 ge 18 and lt 65] Is [fill NAME] on active duty in the military at this time?

YES	1
NO	0

DON'T KNOW	d
REFUSED	r

==>

>rel2< How is [fill NAME] related to [fill HOUSEHOLDER]?

HUSBAND.....	1
WIFE	2
OWN SON/DAUGHTER.....	3
ADOPTED SON/DAUGHTER ¹	13
STEP SON/DAUGHTER	4
GRAND SON/DAUGHTER.....	5
PARENT	6
BROTHER/SISTER.....	7
SON/DAUGHTER-IN-LAW.....	8
MOTHER/FATHER-IN-LAW	9
OTHER RELATIVE	10
FOSTER CHILD.....	11
NON RELATIVE/UNMARRIED PARTNER.....	12

====>

Repeat bmo2-rel2 for each person.

test: [if any person is ≥ 18 and relationship to householder is <7> <8>, <9>, <10> or <12> and at least one person, other than householder or spouse, is ≥ 14 and different sex from (this/these) persons; goto mar2; else goto test after sps2.

>mar2< Is [fill NAME] married to anyone who currently lives here?

INTERVIEWER: CODE "NO" FOR COHABITEE

YES.....	1	
NO	0	[goto next person or next test]

====>

>sps2< To whom is [fill NAME] married?

[fill NAME]	1
[fill NAME]	2
[fill NAME]	3
[fill NAME]	4
[fill NAME]	5
[fill NAME]	6
[fill NAME]	7
[fill NAME]	8

====>

¹Adopted child is treated the same as child for all questions, except ethnicity (which is skipped for own child).

See Appendices B and C for the names of the variables associated with the survey questions.

- tests:
- (1) Verify that spouses are opposite sexes and at least 14 years of age.
 - (2) Repeat for each person ge 18 and relationship to householder is <7>, <8>, <9>, <10> or <12>.
 - (3) If any person lt 18 and relationship to householder is not equal to <3>, <4>, <11>, or <13> then goto par2; else goto family formation.

>par2< Is anyone who lives here the parent or guardian of [fill NAME]?

YES..... 1
NO 0 [goto next child or next test]

====>

>who2< Who is [fill NAME]'s parent or guardian?

CODE ONLY ONE

INTERVIEWER: IF CHILD HAS TWO PARENTS/GUARDIANS CODE MOTHER OR FEMALE GUARDIAN.

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

====>

Repeat for others meeting test before par2.

Form interviewing units using the following rules:²

- (1) If no one other than householder or householder and spouse is 18 and older, then the household consists of one family.
- (2) Assign persons whose relationship to householder is parent, and any children linked to them, to a separate family.
- (3) Assign persons whose relationship to householder is mother/father-in-law, and any children linked to them, to a separate family.
- (4) Assign additional married persons, and any children linked to them, to a separate family.
- (5) If any remaining (unmarried) person's relationship to householder is child or step-child, he or she is 18 to 22, and a full time student, assign that person, and any children linked to that person, to householder's family.
- (6) Assign any remaining, unmarried persons 18 and older who are not full time students (and any children linked to them) to separate family units.
- (7) If householder or householder's spouse is under 18 and not a student, then he or she and his or her spouse and/or children are eligible. The householder and spouse (if under 18) should be treated as adult(s) during the interview.
- (8) Exclude a person as ineligible if:
 - (1) Person is unmarried full-time student, 16-22 years of age, and is not a child or ward of householder.
 - (2) Person is under 18, not a householder, relationship to householder is not equal to spouse or child, and no one in household is parent or guardian.
 - (3) Person is active military; however that person can act as survey informant for family interview, and his or her income should be included in income module.
- (9) Exclude interviewing unit as ineligible if all persons 18 and older assigned to the unit are active military.

²The interviewing unit is defined to reflect an insurance unit, including the household head, spouse, and their dependent children up to but not including age 18, or up to but not including age 23 if they are in school. This definition represents conventional practice in the private insurance market and is similar to the filing unit used by Medicaid and state subsidized insurance programs. The census family sometimes comprises more people than the insurance family. Examples of people typically included in the same census unit, but in different insurance units, are adult children and their families living in the homes of their parents; adult siblings living together; and parents living in the home of their adult children. These persons will form separate interviewing units.

Child Random Selection by the following rules:

- 1) Determine if sampled R3 child has been identified as an R4 FIU member and is under age 18.

IF YES: Select R3 child as R4 child and goto >resp<

IF > 1 R3 sampled child (due to FIU reformation), set a flag and pick one child of the flagged children at random.

IF NO: Sample new R3 child (demographics collected above) and goto >kdc1<

NOTE: NATIONAL SAMPLE WITHIN PSU SITES ARE CODED FOR PSU;
OTHERWISE PSU FOR NATIONAL SAMPLE =0

>test1< If PSU > 0 goto kdck Else goto kdck3

>kdck< Was [fill NAME] living in the [fill PSU NAME] area at any time from August 2000 THROUGH September 2001?

PROBE: We need to ask this question to know whether children selected for this survey also had a chance to be selected in the first survey.

YES..... 1
NOT YET BORN 2
ALIVE, BUT LIVING OUTSIDE AREA 3 [goto kdck2]

DON'T KNOW d
REFUSED r
====> [goto fiu formation]

>kdck2< Was [fill NAME] living in the continental United States at any time from August 2000 THROUGH September 2001?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====> [goto fiu formation]

See Appendices B and C for the names of the variables associated with the survey questions.

>kdck3< Was [fill NAME] living in the continental United States at any time from August 2000 THROUGH September 2001?

PROBE: We need to ask this question to know whether children selected for this survey also had a chance to be selected in the first survey.

YES..... 1
NOT YET BORN 2
ALIVE, BUT LIVING OUTSIDE CONTINENTAL US..... 3

DON'T KNOW d
REFUSED r

==> [goto fiu formation]

NOTE: (1) THE PROGRAM WILL FORM INTERVIEWING UNITS AND THE INTERVIEWER WILL BEGIN WITH THE HOUSEHOLDER'S UNIT.

NOTE: The review of household composition is done on screens organized by Family Insurance Units (FIUs).

>last_ck< Before we go any further, let's review the list I have of all of the household members.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HOUSEHOLD MEMBERS WITH RESPONDENT

THE HOUSEHOLD ROSTER CANNOT BE CHANGED AFTER THIS SCREEN

<n> OK AS IS
<c> CHANGE ROSTER

See Appendices B and C for the names of the variables associated with the survey questions.

>resp<

INTERVIEWER: ENTER THE [r]HIGHLIGHTED[n] NUMBER OF PERSON WITH WHOM YOU'RE SPEAKING (I.E. "BEST RESPONDENT").

IF RESPONDENT NOT KNOWN ASK: With whom am I speaking?

A PERSON WITH AN * IN FRONT OF THEIR NAME IS NOT ELIGIBLE.

IF YOU ARE TALKING TO A HOUSEHOLD MEMBER WHO IS NOT ELIGIBLE TO BE INTERVIEWED, ASK FOR AN ELIGIBLE HOUSEHOLD MEMBER.

INTERVIEWER: REVIEW NAME, RELATIONSHIP TO HOUSEHOLDER, SEX, AND AGE OF ALL HH MEMBERS WITH RESPONDENT

#	NAME	RELATION	FAM	STATUS	SEX	AGE
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	1
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	2
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	3
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	4
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	5
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	6
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	7
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	8

==>

See Appendices B and C for the names of the variables associated with the survey questions.

b. HEALTH INSURANCE

>bbeg< We would like to conduct the rest of the interview with you. (We will also be asking questions about [fill NAMES]) and we will be sending you a check for \$25 for completing the interview.

INTERVIEWER: NOTE ONLY ONE CHILD IS SELECTED PER FAMILY

READ IF NECESSARY: My name is [fill INTERVIEWER NAME]. I am calling about the Community Tracking Study. The purpose of the Community Tracking Study is to see how the shift to managed care and other health changes are affecting people in your community.

TYPE <g> TO CONTINUE ===>

>b1< Next, I will list several types of health insurance or health coverage obtained through jobs, purchased directly, or from government programs. For each one, please tell me if (you/either of you/any of you) are currently covered by that type of plan.

See Appendices B and C for the names of the variables associated with the survey questions.

>b1a<

Are (READ NAMES) covered by a health insurance plan from (your/any of your/either of your) current or former employers or unions. [CPS]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBES:

- (1) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.
- (2) Include health insurance plans provided by colleges and universities to students.

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8
- NONE/NO ONE/NO OTHER RESPONSES n
- NEED TO DELETE A RESPONSE x
- DON'T KNOW d
- REFUSED r
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>b1b< Are (READ NAMES) covered by a health insurance plan bought on your or their own. [BRFQ]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBES:

- (1) Include insurance plans purchased through a professional association or trade groups.
- (2) Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accident.

CODE ALL THAT APPLY

- [fill NAME] 1
- [fill NAME] 2
- [fill NAME] 3
- [fill NAME] 4
- [fill NAME] 5
- [fill NAME] 6
- [fill NAME] 7
- [fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
 NEED TO DELETE A RESPONSE x

DON'T KNOW d
 REFUSED r

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>b1c< Are (READ NAMES) covered by a health insurance plan provided by someone who does not live in this household. [CPS]

IF YES: Who is covered?

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

PROBE: Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care or accidents.

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>b1d< Are (READ NAMES) covered by Medicare, the health insurance plan for people 65 years old and older or persons with certain disabilities. [CPS]

IF YES: Who is covered?

PROBE: Include HMO plans, as well as the traditional Medicare plan.

INTERVIEWER: INCLUDE IF COVERED BY PART A OR PART B.

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

====>

>test bld< **[IF PERSON IS GE 65 AND NOT COVERED BY MEDICARE goto b1d1; ELSE goto ble]**

>b1d1< PERSON AGE 65 AND **NOT** COVERED BY MEDICARE ASK: I noted that [fill NAME] is [fill AGE], but is not covered by Medicare. Is that correct or did I make a mistake?

CORRECT 1
TO CORRECT MEDICARE 2 [:jb b1d]
TO CORRECT AGE 3 [:jb [INSERT AGE FIELD]]

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>b1ex< **IF STATE ONLY OFFERS MEDICAID:** Are [fill NAMES] covered by (Medicaid/[fill STATE NAME]), the government assistance program that pays for health care? **NOTE:** We replaced “for people in need” with “that pays for health care.”

YES..... 1 [goto b1e]
NO 0

DON'T KNOW d
REFUSED r
==> [goto test b1f1]

>b1ey< **IF STATE OFFERS OTHER SUBSIDIZED PROGRAMS AS WELL AS MEDICAID:** Are [fill NAMES] covered by any of the following government assistance programs that help pay for health care: (Medicaid/[fill STATE NAME]; fill STATE SPECIFIC PLANS, INCLUDING CHIP.) IF YES: Which program is that?

CODE ALL THAT APPLY

Medicaid/fill STATE NAME 1 [goto b1e]
fill STATE SPECIFIC PLANS, INCLUDING CHIP
[BLANK IF NO STATE PROGRAM] 2 [goto b1h]

NO ONE COVERED/NO MORE CODES n [goto test b1f1]

SOMEONE COVERED, DON'T KNOW
WHICH PLAN..... d [goto b1e];
FOLLOW MEDICAID ATTRIBUTE SEQUENCE IF
CAN'T IDENTIFY PROGRAM NAME, fill Medicaid.

REFUSED r [goto test b1f1]
DELETE A CODE..... x
==>

>b1e< Are (READ NAMES) covered by (Medicaid/[fill STATE NAME])?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==> [goto b1f]

>b1h< Are (READ NAMES) covered by [fill STATE SPECIFIC PLANS, INCLUDING CHIP]?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

PERMITS MEDICAID AND MILITARY REPORTING, WHICH WAS NOT ALLOWED IN R2

>b1f< Are (READ NAMES) covered by CHAMPUS, CHAMP-VA, TRICARE, VA, or some other military health care. [NHIS]

IF YES: Who is covered?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test b1f1< [IF b1f = NO ONE, goto b1g; ELSE goto b1f1]

>b1f1< Which plan is that—CHAMPUS, CHAMP-VA, TRICARE STANDARD, TRICARE PRIME, TRICARE EXTRA, VA, or some other military health plan?

INTERVIEWER: CODE ALL THAT APPLY

INTERVIEWER: IF R. IS UNSURE TRICARE STANDARD AND PRIME, CODE "3" STANDARD.

CHAMPUS 1
CHAMP-VA 2
TRICARE STANDARD 3
TRICARE PRIME 4
TRICARE EXTRA 5
VA 6
OTHER [SPECIFY] 7

DON'T KNOW TYPE d
REFUSED r
==>

PERMITS IHS AND OTHER PLANS TO BE REPORTED.

>b1g< Are (READ NAMES) covered by the Indian Health Service. IF YES: Who is covered?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test b1i1< **If all family members covered by some type of health insurance goto test b2, else goto b1i1.**

>bli1< Are [fill NAMES] covered by a health insurance plan that I have not mentioned. IF YES: What is the name of the plan?

YES [SPECIFY]..... 1
NO 0 [goto test bli]

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>bli2<

Who is covered by [fill NAME SPECIFIED]?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES 0
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>test b1j< **[IF A FAMILY MEMBER WAS NOT COVERED UNDER SOME PLAN, goto bij; ELSE goto test b2]**

>bij< **INTERVIEWER: READ FOR FIRST PERSON ONLY:** (According to the information we have, [fill NAME] does not have health care coverage of any kind). Does (he/she) have health insurance or coverage through a plan I might have missed?

INTERVIEWER: REVIEW PLANS IF INFORMANT IS UNSURE.

- NO/NOT COVERED BY ANY PLAN.....0
- HEALTH INSURANCE PLAN FROM A
CURRENT OR PAST EMPLOYER/
UNION/SCHOOL..... 1
- A HEALTH INSURANCE PLAN BOUGHT ON
HIS/HER OWN/PROF. ASSN..... 2
- A PLAN BOUGHT BY SOMEONE WHO
DOES NOT LIVE IN THIS HOUSEHOLD 3
- MEDICARE 4
- MEDICAID/STATE NAME 5
- CHAMPUS/CHAMP-VA, TRICARE, VA,
OTHER MILITARY 6
- INDIAN HEALTH SERVICE 7
- [fill STATE PLAN] 8
- OTHER PLAN [SPECIFY] 9

- DON'T KNOW d
- REFUSED r
- ===> [goto NEXT UNINSURED PERSON OR goto test b2]

>test b2< **IF AT LEAST ONE FAMILY MEMBER IS PRIVATELY INSURED (b1a, b1b, OR b1c ge1) AND IS NOT COVERED BY MEDICARE (b1d), goto b2; ELSE, goto Test b401].**

See Appendices B and C for the names of the variables associated with the survey questions.

>b2<

In how many different health plans (obtained through current or past employers/(or) that you purchased directly/(or) were provided by someone who does not live in your household) are [fill NAMES OF FAMILY MEMBERS LISTED IN b1a, b1b OR b1c EXCEPT FOR THOSE 65 AND NOT COVERED BY MEDICARE] enrolled?

PROBE: Do not include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as dental care, vision care, nursing home care, or accidents.

INTERVIEWER: DO NOT INCLUDE MILITARY COVERAGE AND DO NOT INCLUDE MEDIGAP OR SUPPLEMENTAL INSURANCE FOR MEDICARE RECIPIENTS.

|___| PLANS
(1-3)

0.....0 [go back to b1 and correct]
DON'T KNOWd
REFUSED r
====>

>b231<

Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. [NHIS]

In whose name is this plan?³

INTERVIEWER: CODE NON-SPECIFIED POLICYHOLDER IN "OTHER."

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8
OTHER [SPECIFY] 9

DON'T KNOW d
REFUSED r
====>

³The program lists and allows all persons in the household 18 and over, plus the householder and spouse regardless of age, to be named as policyholder.

See Appendices B and C for the names of the variables associated with the survey questions.

>b2311< Is [fill POLICYHOLDER] a postal worker?
YES 1 [goto b2p1]
NO 0

DON'T KNOW d
REFUSED r

====> [goto b2312]

>b2312< Is [fill POLICYHOLDER] a federal government employee?
YES 1 [goto fed1@num1]
NO 0 logic

DON'T KNOW d
REFUSED r
====> [goto b2p1]

>b2p1@an< What is the name of [fill POLICYHOLDER]'s health insurance company or health plan?

PROBE: IF R HAS DIFFICULTY RECALLING NAME, ASK: Do you have and insurance card or something else with the [first] plan name on it?

>b2p1@nam< **INTERVIEWER: ENTER THE VERBATIM NAME OF THE HEALTH PLAN**

>TEST< IF b2311=1 OR b2312=1, goto fed1@num1, ELSE goto [STATENAME]1@NUM1

FEDERAL

>fed1@num1< What is the name of [fill POLICYHOLDER]'s health insurance plan?

INTERVIEWER : CODE PLAN; READ PLAN NAMES IF NECESSARY

PROBE: IF R HAS DIFFICULTY RECALLING NAME, ASK: Do you have and insurance card or something else with the [first] plan name on it?

PROGRAMMER NOTE: DISPLAY PLAN NAMES OFFERED POSTAL OR NON-POSTAL WORKERS IN THIS SITE, OR STATE IF PLAN IS OFFERED STATEWIDE. IF R. CAN'T SELECT A PLAN, THEN RECORD TEXT RESPONSE AS AN OTHER SPECIFY. IF RESPONSE TO B2312 IS D/R, THEN DISPLAY NON-POSTAL PLANS. NOTE THAT FEHBP LISTS INSURERS/PLANS AS A COMBINED ENTITY ON THE WEB SITE SO IT MAKES SENSE TO PRESENT PLANS TO FEDERAL EMPLOYEES AS THEY ARE OFFERED RATHER THAN SEPARATING INTO INSURER AND PLAN ITEMS AS WE DO FOR OTHER EMPLOYEES.

OTHER99

DON'T KNOWd
REFUSED r

====> [goto test b221]

NON-FEDERAL:

>[STATENAME]1@NUM1<USE LIST BELOW TO CODE INSURER. PROBE: READ LIST IF NECESSARY. IF BLUE CROSS/BLUE SHIELD PROBE WITH HIGHLIGHTED INSURERS. PROGRAM TO DISPLAY VERBATIM FROM [STATENAME]p1 AND ALPHABETIZED LIST OF INSURERS, STAND ALONE PPOS AND TPAS OFFERED IN THIS SITE OR STATEWIDE ON A SINGLE SCREEN OR TWO SCREENS WITH INTERVIEWER ABLE TO SCROLL TO SECOND SCREEN.

IF RESPONSE IS A STAND ALONE PPO OR TPA, SINGLE PRODUCT HEALTH PLAN, OR UNSPECIFIED PLAN NAME, SKIP TO B2316; IF REFUSED, SKIP TO TESTB24; ELSE IF R. NAMED A MULTI-PRODUCT PLAN goto B2315. NOTE THAT THE DATABASE WILL IDENTIFY WHETHER AN INSURER OFFERS MULTIPLE PLANS IN THE R'S SITE.

HIGHLIGHT BLUE CROSS/BLUE SHIELD PLANS SINCE SOME MARKETS MAY HAVE MORE THAN ONE LICENSED PLAN.

See Appendices B and C for the names of the variables associated with the survey questions.

>STATENAME]p1< Is [fill POLICYHOLDER]'s health plan from [fill NAME OF MULTI-PRODUCT INSURER FROM B2314IN] one of the following products?

INTERVIEWER: READ LIST OF PRODUCTS OFFERED BY THIS INSURER

DISPLAY LIST OF INSURANCE PRODUCTS OFFERED BY INSURER IN THIS SITE OR STATEWIDE.

>b221< **INTERVIEWER: CODE WHETHER DOCUMENT USED. [NO ERASE]**

INSURANCE CARD 1
CLAIMS FORM 2
INSURANCE POLICY 3
NO DOCUMENT USED 0

>test b24< [if b2 gt <1>, goto b241; else goto test b25]. It is unnecessary to ask b241 if the family has only one plan because coverage was obtained in b1a, b1b, or b1c.

>b241< Who is covered by [fill PLAN NAME]?

[READ ASTERISKED NAMES IF NECESSARY.]

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

====>

>test b25< [if b1b ge <1> or b1c ge <1> goto b251; else store <1> in b251 and goto b261]. This question does not need to be asked if the only private plans are employer-based.

See Appendices B and C for the names of the variables associated with the survey questions.

>b251< Was this plan originally obtained through a current or past employer or union?

YES.....1 [goto b2611]
NO0

DON'T KNOWd
REFUSED r
====> [goto b271]

>b2611< In order to get the best information possible about people's health insurance coverage, we need the name and address of the employer or union that provides this coverage.

PROBE IF RESPONDENT ASKS FOR ADDITIONAL INFORMATION ON WHY WE WANT EMPLOYER/UNION ADDRESS: We are trying to understand differences in insurance plans offered by employers and unions. Although we may try to contact your employer or union to learn more about your plan, we will not identify you by name. We are trying to understand differences in insurance plans and how the benefits offered by a particular insurance company vary by (employer/union).

INTERVIEWER: OBTAIN AS MUCH INFORMATION AS RESPONDENT CAN PROVIDE. IF R. PROVIDES ADDRESS, ALSO ASK FOR PHONE NUMBER

>b6p1@nam<EMPLOYER NAME
>b6p1@ad<1ST STREET ADDRESS
>b6p1@ad2<2ND STREET ADDRESS
>b6p1@cit<CITY
>b6p1@st<STATE
>b6p1@zip<ZIP CODE
>b6p1@ac<AREA CODE
>b6p1@ex<EXCHANGE
>b6p1@num<TELEPHONE NUMBER

DON'T KNOWd
REFUSED r

TEST IF FEDERAL EMPLOYEE, goto b26a

See Appendices B and C for the names of the variables associated with the survey questions.

>b26121< **INTERVIEWER: CODE WHETHER EMPLOYER OR UNION. IF UNSURE, ASK: Is [insert NAME] a union or employer?**

UNION 1
EMPLOYER 2

DON'T KNOW d
REFUSED r

====>

>b26a< Is information on this plan available in a booklet provided by [fill POLICYHOLDER's] employer or insurer?

YES 1
NO 0

DON'T KNOW d
REFUSED r

====>

>b26b< Is information on this plan available on a company Intranet or website that [fill POLICYHOLDER] can access from a computer?

YES 1
NO 0

DON'T KNOW d
REFUSED r

====> [goto b291]

>b271< Was this plan obtained through a state or federal government program that helps pay insurance coverage?

YES 1 [goto b281]
NO 0 [goto b291]

DON'T KNOW d [goto b281]
REFUSED r

====> [goto b291]

See Appendices B and C for the names of the variables associated with the survey questions.

>b281< Do you recall the name of the program?

PROBE: Some programs that help provide health insurance include
[fill STATE PROGRAMS].

[fill STATE PROGRAMS]..... 1
OTHER [SPECIFY] 9

DON'T KNOW d
REFUSED r

==>

>b291< Did (READ ASTERISKED NAMES) enroll in [fill NAME OF PLAN] in the past
12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [fill PLAN] in the past
12 months?

**INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY
WERE COVERED BY PLAN SINCE BIRTH.**

**IF RESPONDENT SAYS HE/SHE STAYED WITH THE SAME
PLAN DURING OPEN ENROLLMENT, CODE NO.**

CODE ALL THAT APPLY

[fill NAME] 1 [goto b301]
[fill NAME] 2 [goto b301]

NO ONE n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

==> [goto test b311]

See Appendices B and C for the names of the variables associated with the survey questions.

>b301< How many months ago did [fill NAME] enroll in [fill PLAN NAME]?

INTERVIEWER: IF MORE THAN 11 MONTHS, BACK UP TO PREVIOUS QUESTION AND DELETE PERSON.

|__|__| MONTHS
(0-11)

DON'T KNOW d

REFUSED r

====> [REPEAT b301 FOR EACH PERSON
ENROLLED IN PAST 12 MONTHS]

>test b311< [if b251 ne <1> goto b311; else, if b251 <eq> 1 and policyholder is listed in b231, goto b3111; else, goto b331] NOTE THAT A POLICYHOLDER ONLY HAS TO BE LISTED IN B231; THE INFORMANT DOES NOT HAVE TO BE THE POLICYHOLDER.

>b31111< ESI PLANS:

For coverage through [fill EMPLOYER NAMED IN b2611], does anyone in the family pay all of the premium or cost, some of the premium or cost, or none of the premium or cost?

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

YES, PAY ALL OF PREMIUM/COST 1

YES, PAY SOME OF PREMIUM/COST 2

YES, BUT DON'T KNOW IF PAY ALL OR

SOME OF PREMIUM OR COST 3

NO, PAY NONE OF THE COST..... 0 [goto b331]

DON'T KNOW d [goto b331]

REFUSED r [goto b331]

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>b31121@at<How much is [fill POLICYHOLDER's NAME] premium for health insurance through ([fill EMPLOYER NAMED IN b261]/[his/her] employer)?

PROBE: Your best estimate of the amount [fill POLICYHOLDER NAME] pays for coverage each pay period would be fine.

NONE.....0

\$|_|_|_|_|_|

\$(10-9997) [goto b31121@p]

DON'T KNOWd

REFUSED r

====> [goto b331]

>b31121@p< **INTERVIEWER: CODE TIME PERIOD.**

WEEK 1

EVERY OTHER WEEK2

TWICE A MONTH3

MONTH.....4

QUARTER.....5

SEMI-ANNUAL.....6

ANNUAL7

====> [goto b331]

>b311< **NON-EMPLOYER AND NON-UNION PLANS:**

How much is the insurance premium for this policy?

NONE.....0

\$|_|_|_|_|_|

\$(10-9997) [goto b321]

DON'T KNOWd

REFUSED r

====> [goto ngi1]

See Appendices B and C for the names of the variables associated with the survey questions.

>b321<

INTERVIEWER: CODE TIME PERIOD.

WEEK 1
EVERY OTHER WEEK 2
TWICE A MONTH 3
MONTH 4
QUARTER 5
SEMI-ANNUAL 6
ANNUAL 7
===>

>ngi1<

Does this health plan pay for at least some of the cost of prescription medicines prescribed by the doctor?

YES 1
NO 0

DON'T KNOW d
REFUSED r
===>

>ngi2<

Do you have to pay a higher premium to cover any pre-existing medical conditions or health problems you or a family member has?

YES 1
NO 0

DON'T KNOW d
REFUSED r
===>

>ngi3<

Did you or any family members have pre-existing conditions that are not covered by this policy?

YES 1 [goto ngi4]
NO 0

DON'T KNOW d
REFUSED r
===> [goto b331]

>ngi4< Which pre-existing conditions are not covered?

INTERVIEWER: RECORD VERBATIM

DON'T KNOW d
REFUSED r
====>

>b331< Does [fill PLAN NAME] require (you/members)⁴ to sign up with a certain primary care doctor, group of doctors, or clinic, which (you/they) must go to for all of your routine care?

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

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

>b341< [NOTE: BASED ON CAHPS] In order to see a specialist under [fill PLAN NAME], do (you/members) need to get a referral, that is approval or permission, from the doctor or health plan?

PROBE: Do not include emergency care.

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

>b351< Is there a book, directory, or list of doctors associated with the plan?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

⁴Substitute "members" if informant is not covered.

See Appendices B and C for the names of the variables associated with the survey questions.

>b361< Is [fill PLAN NAME] an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test b371< [IF b351 eq <1> OR b361 eq <1> goto b371; ELSE goto test b381] fill

>b371< If (you/members) do not have a referral, will [fill PLAN NAME] pay for any of the costs of visits to doctors who are not [associated with the plan (b351 = 1)/part of the HMO (b361 = 1)]?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test b381< [IF b251 = <0>, <d> OR <r>, goto test b40; ELSE goto, b381]

>b381< Does ([fill EMPLOYER NAME]/this employer) offer more than one health insurance plan to its employees?

YES..... 1 [goto b391]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test b40]

See Appendices B and C for the names of the variables associated with the survey questions.

>b391< Does ([fill EMPLOYER NAME]/this employer) offer (any HMO plans/any health insurance plans other than HMO plans)?

NOTE: IF THIS IS AN HMO PLAN, WE ASK IF EMPLOYER OFFERS NON-HMO PLAN. IF THIS IS A NON-HMO PLAN, WE ASK IF EMPLOYER OFFERS AN HMO PLAN.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test b40< IF b2>1 (MORE THAN ONE PRIVATE PLAN), ASK b232-b392 FOR SECOND PLAN; IF b2=3, ASK b233-b393 FOR THIRD PLAN; ELSE, IF ANY FAMILY MEMBER HAS MILITARY COVERAGE (b1f ge<1>) AND AT LEAST ONE PERSON WITH MILITARY COVERAGE IS NOT COVERED BY SOME OTHER HEALTH PLAN, goto b40; ELSE goto test b51]

>b40< Next, we have some questions about military health plans.

In whose name is this [fill b1f1] plan?

NOTE: If b1f1 = <7>, <d>, or <r>, fill "military health."

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NON-FAMILY MEMBER..... 9
OTHER [SPECIFY] 0

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>b41< Did [fill NAMES OF POLICYHOLDER (b40) AND PERSONS COVERED (b1f1)] enroll in [fill NAME OF PLAN] in the past 12 months, that is after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [fill PLAN] after [fill DATE]?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

[fill NAME] 1 [goto b421]
[fill NAME] 2 [goto b421]

NO ONE n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====> [goto test b51]

>b421< How many months ago did [fill NAME] enroll in [fill PLAN NAME]?

|__| |__| MONTHS AGO
(0-11)

====> [REPEAT b42a FOR EACH PERSON COVERED, THEN goto test b51.]

NOTE: Deleted b431, b441, b451, b461, b471

>test b51< **Medicare [if b1d ge <1> goto b54; else goto test b61]**

>b54< Does [fill NAMES] use (his/her) Medicare coverage at an HMO?

INTERVIEWER: IF HUSBAND AND WIFE ARE BOTH ON MEDICARE, AND ONLY ONE IS IN AN HMO, CODE <2> OR <3>.

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES—MEDICARE BENEFICIARIES IN HMO 1 [goto b55a]
YES—TWO BENEFICIARIES AND ONLY
HUSBAND SIGNED UP WITH HMO 2 [goto b55a]
YES—TWO BENEFICIARIES AND ONLY
WIFE SIGNED UP WITH HMO 3 [goto b55a]
NO/NONE 0

DON'T KNOW d
REFUSED r
====> [goto b51]

See Appendices B and C for the names of the variables associated with the survey questions.

>b55a< What is the name of the HMO plan?

PROBE: IF R. HAS DIFFICULTY RECALLING NAME, ASK: Do you have an insurance card or something else with the plan name on it?

TO ENTER PLAN NAME

>b55p<

[PLAN NAME - 72 CHARACTERS]

DON'T KNOW d [fill "this plan"]

REFUSED r [fill "this plan"]

==>

>b55b<

INTERVIEWER: CODE TYPE OF DOCUMENT USED. [NO ERASE]

INSURANCE CARD 1

CLAIMS FORM 2

INSURANCE POLICY 3

NO DOCUMENT USED 0

==>

>b55c<

Was this HMO plan obtained through a current or past employer or union?

YES 1

NO 0

DON'T KNOW d

REFUSED r

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>b51< [Under the HMO plan,] (are you/are they/is he/is she) required to sign up with a certain primary care doctor, group of doctors, or clinic, which (you/they) must go to for all of (your/their/his/her) routine care?

PROBES:

(1) Do not include emergency care or care from a specialist you were referred to.

(2) IF HUSBAND AND WIFE HAVE DIFFERENT MEDICARE PLANS, WITH ONE IN AN HMO AND ONE IN AN INDEMNITY PLAN, ASK FOR CHARACTERISTICS OF HMO PLAN.

NOTE: IF b54 eq <2> OR <3> PROGRAM STATEMENT IN BRACKETS.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>b52< [Under the HMO plan,] in order to see a specialist, (do(es) (you/they/he/she) need approval or permission, from (your/their/his/her) doctor or health plan?

PROBE: Do not include emergency care.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>b53< [Under the HMO plan], can [fill NAME] go to any doctor or clinic who will accept Medicare or **must** (he/she/you/they) choose from a book, directory, or list of doctors?

ANY DOCTOR/CLINIC..... 1
BOOK/DIRECTORY/LIST 2

DON'T KNOW d
REFUSED r
====>

>test b56< [IF b53 eq <2> OR b54 eq <1>, <2> or <3> goto b56; ELSE goto b57]

See Appendices B and C for the names of the variables associated with the survey questions.

>b56< If (you/he/she) do not have a referral, will [fill PLAN NAME] pay for any of the costs of visits to doctors who are not [associated with the plan/part of the HMO]?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>b57< Did [fill NAMES OF MEDICARE ENROLLEES] enroll in [Medicare] in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in [Medicare] in the past 12 months?

CODE ALL THAT APPLY

[fill NAME] 1 [goto b58]
[fill NAME] 2 [goto b58]
[fill NAME] 3 [goto b58]
[fill NAME] 4 [goto b58]
[fill NAME] 5 [goto b58]
[fill NAME] 6 [goto b58]
[fill NAME] 7 [goto b58]
[fill NAME] 8 [goto b58]

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====> [goto b59]

>b58< How many months ago did [fill NAME] enroll in Medicare?

INTERVIEWER: IF MORE THAN 11 MONTHS, BACK UP TO PREVIOUS QUESTION AND DELETE PERSON.

|__|__| MONTHS
(0-11)

DON'T KNOW d
REFUSED r
====> [REPEAT FOR EACH MEDICARE BENEFICIARY ENROLLED IN PAST 12 MONTHS]

See Appendices B and C for the names of the variables associated with the survey questions.

>b59< (Are/Is) [fill NAMES BELOW WITH * IN FRONT] covered by Medicare supplemental or Medigap policies? These policies are designed to cover the costs of health care that are not covered by Medicare.

IF MORE THAN ONE PERSON, ASK: Who is covered by these policies.

CODE ALL THAT APPLY

[fill NAME] 1 [goto 59ad]

[fill NAME] 2 [goto 59ad]

NONE..... n

NEED TO DELETE A RESPONSE x

DON'T KNOW d

REFUSED r

====> [goto test b60]

>59a1< **FOR EACH PERSON CODED IN b59, ASK:** Was [fill NAME]'s policy obtained through a current or past employer or union?

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

====>

NOTE: Deleted b59b, b59c, and b60

>test b61< **ALL MEDICAID RECIPIENTS goto b64 [If b1ex <eq> 1 or b1ey eq <1> or <d>) goto b64; else goto test b70.]**

NOTE: Deleted b61, b62 and b63.

See Appendices B and C for the names of the variables associated with the survey questions.

>b64< Under (Medicaid/[fill STATE NAME]) (are/is) [fill NAMES] signed up with an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
===>

NOTE: Deleted b65a, b65b, and b66

>b67< Did [fill NAMES OF MEDICAID BENEFICIARIES] enroll in [fill STATE NAME]/Medicaid in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in ([fill STATE NAME]/Medicaid) in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

[fill NAME] 1 [goto b68]
[fill NAME] 2 [goto b68]
[fill NAME] 3 [goto b68]
[fill NAME] 4 [goto b68]
[fill NAME] 5 [goto b68]
[fill NAME] 6 [goto b68]
[fill NAME] 7 [goto b68]
[fill NAME] 8 [goto b68]

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r

===> [goto test b70]

>b68< How many months ago did [fill NAME] enroll in ([fill STATE NAME]/Medicaid)?

INTERVIEWER: IF MORE THAN 11 MONTHS, BACK UP TO PREVIOUS QUESTION AND DELETE PERSON.

|__|__| MONTHS
(0-11)

DON'T KNOW d
REFUSED r

====> [REPEAT b68 FOR EACH MEDICAID BENEFICIARY ENROLLED IN PAST 12 MONTHS]

>test b70< **ATTRIBUTES ASKED IF ANY PERSON HAS NO PRIVATE PLAN BUT DOES HAVE A STATE PLAN, INCLUDING CHIP, OR OTHER PLAN. [IF b1a, b1b, and b1c ARE NOT COVERING PERSON i, AND PERSON i HAS COVERAGE BY b1h OR b1i1, FOR ANY PERSON i, goto b71; ELSE goto test b80].**

>b71< Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder⁵.

In whose name is [fill NAME OF STATE PROGRAM]?

INTERVIEWER: CODE NON-SPECIFIC POLICYHOLDER IN "OTHER."

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8
OTHER [SPECIFY] 9

====>

NOTE: Deleted b72, b73, and b74

⁵ If not covered by state plans [B1H], and they are covered by an "other plan not mentioned," then the text from that other plan [B1H] is filled in b71, b77 and b78.

See Appendices B and C for the names of the variables associated with the survey questions.

>b75<

Is this plan an HMO, that is, a Health Maintenance Organization?

PROBE: WITH an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
===>

NOTE: Deleted b75a, b75b, and b76

>b77<

Did [fill NAMES OF PLAN MEMBERS] enroll in [fill NAME OF STATE PROGRAM] in the past 12 months, that is, after [fill DATE]?

IF MORE THAN ONE PERSON, ASK: Who enrolled in the past 12 months?

INTERVIEWER: DO NOT INCLUDE BABIES UNDER ONE YEAR IF THEY WERE COVERED BY PLAN SINCE BIRTH.

[fill NAME] 1 [goto b78]
[fill NAME] 2 [goto b78]
[fill NAME] 3 [goto b78]
[fill NAME] 4 [goto b78]
[fill NAME] 5 [goto b78]
[fill NAME] 6 [goto b78]
[fill NAME] 7 [goto b78]
[fill NAME] 8 [goto b78]

NO ONE AFTER [fill DATE]/NO ONE ELSE..... n

DON'T KNOW d
REFUSED r

===> [goto test b80]

See Appendices B and C for the names of the variables associated with the survey questions.

>b78< How many months ago did [fill NAME] enroll in [fill NAME OF STATE PROGRAM]?

INTERVIEWER: IF MORE THAN 11 MONTHS, BACK UP TO PREVIOUS QUESTION AND DELETE PERSON.

|__|__| MONTHS
(0-11)

==> [REPEAT b78 FOR PERSON ENROLLED IN PAST 12 MONTHS]

CURRENTLY UNINSURED

>test b80< **[IF ONE OR MORE FAMILY MEMBERS IS CURRENTLY UNINSURED BUT AT LEAST ONE MEMBER IS PRIVATELY INSURED, goto b79 ELSE, IF FAMILY MEMBERS ARE UNINSURED, goto b80 FOR FIRST PERSON; ELSE goto TEST b85]**

>b79< Is family coverage offered under [fill POLICYHOLDER's] health insurance plan?

YES..... 1 [goto b791]
NO 0

DON'T KNOW d
REFUSED r
==> [goto b801 FOR FIRST UNINSURED PERSON]

>b791< (Is/Are) [fill NAMES OF UNINSURED FAMILY MEMBERS] not covered by [fill POLICYHOLDER's] plan because health insurance costs too much or was there some other reason?

COSTS TOO MUCH 1
OTHER [SPECIFY] 2
==> [goto b801 FOR FIRST UNINSURED PERSON]

>b801< At any time during the past 12 months (was [fill NAME]/were you) covered by (Medicaid/[fill STATE NAME]), [fill STATE PROGRAM], or a health insurance plan obtained through work, a union, or purchased directly?

YES..... 1 [goto b81]
NO 0

DON'T KNOW d
REFUSED r

==> [goto b84a]

See Appendices B and C for the names of the variables associated with the survey questions.

>b81< Just before becoming uninsured, what type of health insurance coverage did ([fill NAME]/you) have? Was it . . .

INTERVIEWER: CODE ONLY ONE.

a health insurance from an employer or union
or purchased directly from an insurance company..... 1 [goto b82]
Medicaid/fill state name 2 [goto b82]
[fill state plan] 3 [goto b82]
Champus, Champ-VA, Tricare, VA,
or other military coverage 4

Indian health service 5
NONE..... 0

DON'T KNOW d
REFUSED r
====> [goto next uncovered person or test b85]

>b82< Was this plan an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>b83< In what month did ([fill NAME's]/your) health insurance coverage under this plan stop?

- JAN 1
 - FEB 2
 - MARCH 3
 - APRIL 4
 - MAY 5
 - JUNE 6
 - JULY 7
 - AUGUST 8
 - SEPT 9
 - OCT 10
 - NOV 11
 - DEC 12

 - DON'T KNOW d
 - REFUSED r
- ==>

>b84< Why did [fill NAME]'s health insurance coverage stop?

INTERVIEWER: CODE ALL THAT APPLY; READ RESPONSES IF NECESSARY.

- LOST JOB OR CHANGED EMPLOYERS 1
 - SPOUSE/PARENT LOST JOB OR CHANGED EMPLOYERS 2
 - GOT DIVORCED OR SEPARATED/ DEATH OF SPOUSE OR PARENT 3
 - BECAME INELIGIBLE BECAUSE OF AGE/ LEFT SCHOOL 4
 - EMPLOYER STOPPED OFFERING COVERAGE 5
 - CUT BACK TO PART TIME/ BECAME TEMPORARY EMPLOYEE 6
 - BENEFITS FROM EMPLOYER/ FORMER EMPLOYER RAN OUT 7
 - COULDN'T AFFORD TO PAY THE PREMIUMS 8
 - INSURANCE PLAN RAISED COST OF PREMIUMS ... 9
 - INSURANCE COMPANY REFUSED COVERAGE 10
 - OR SOMETHING ELSE [SPECIFY] 11

 - NONE/NO ONE/NO OTHER RESPONSES n
 - NEED TO DELETE A RESPONSE x

 - DON'T KNOW d
 - REFUSED r
- ==>

See Appendices B and C for the names of the variables associated with the survey questions.

>b84a< If [fill NAME] was sick and needed a lot of medical care, do you think you would be eligible for Medicaid [fill or NAME OF STATE PROGRAM]?

PROBE: Medicaid [and fill NAME OF STATE PROGRAM] are government programs that pay for health care.

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

==>

REPEAT b80 - b84a FOR EACH CURRENTLY UNINSURED PERSON OR goto TEST B85.
CURRENTLY INSURED

See Appendices B and C for the names of the variables associated with the survey questions.

>test b85< [IF ONE OR MORE FAMILY MEMBERS ARE CURRENTLY INSURED AND COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b851; ELSE goto TEST b90]

>b851< During the month just before [fill NAME]'s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did [you/he/she] have? Was it . . .

INTERVIEWER: CODE ONLY ONE.

- Private insurance from an employer or union or directly purchased from an insurance company..... 1
 - [Medicaid/fill state name] 2
 - [fill state plan] 3
 - Champus, Champ-VA, Tricare or other military coverage 4
 - Indian health service 5
 - a different Medicare plan⁶ [SUPPRESS IF PERSON LT 65]..... 6
 - or did (he/she/you) not have any health insurance coverage 0 [goto test 852]
 - NOT APPLICABLE [NEWBORN/FOREIGN COVERAGE] 7 [goto test 852]
 - DON'T KNOW d [goto test 852]
 - REFUSED r [goto test 852]
- ====>

>test b861< [IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, goto b861; ELSE goto TEST b871]

⁶Can capture prior coverage of Medicare beneficiaries who had changes in last 12 months here.

See Appendices B and C for the names of the variables associated with the survey questions.

>b861< Were [fill NAMES OF OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO] covered under this plan?

CODE ALL THAT APPLY

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test b871< [b851 le <4> or b851 eq <6>, goto b871; ELSE goto TEST b852]

>b871< Was [fill NAME]'s last health insurance plan before [fill CURRENT PLAN NAME] an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

>test b881< [If b851 eq <1> and current coverage is private (bla, blb or blc) goto b881; ELSE goto test b852]

See Appendices B and C for the names of the variables associated with the survey questions.

>b881< Why did ([fill NAME]/you) change insurance plans at that time?

CODE ALL THAT APPLY

OWN/SPOUSE/PARENT CHANGE JOB 1
EMPLOYER OFFERINGS CHANGED 2
CURRENT PLAN IS LESS EXPENSIVE 3
CURRENT PLAN HAS BETTER SERVICES:
PREFERRED DOCTORS, BETTER QUALITY,
CONVENIENT LOCATION, ETC..... 4
OTHER [SPECIFY] 5

NONE/NO ONE/NO OTHER RESPONSES n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test b852< **[IF THERE ARE OTHER CURRENTLY INSURED FAMILY MEMBERS WHOSE COVERAGE BEGAN LESS THAN 12 MONTHS AGO, AND WHO WERE NOT CITED IN b851 or b861, ASK b852; ELSE goto TEST b90].**

See Appendices B and C for the names of the variables associated with the survey questions.

>b852< During the month just before [fill NAME]'s coverage with [fill CURRENT PLAN NAME] began, what type of health insurance coverage did (you/he/she) have? Was it . . .

INTERVIEWER: CODE ONLY ONE

- private insurance from an employer or union
or directly purchased from an insurance company..... 1
- (Medicaid/[fill STATE NAME]) 2
- [fill STATE PLAN] 3
- CHAMPUS, CHAMP-VA, TRICARE
or other military coverage 4
- Indian health service 5
- a different Medicare plan
[SUPPRESS IF PERSON LT 65]..... 6
- or did (he/she/you) not have any
health insurance coverage 0 [goto next insured
person whose
coverage began LT
12 months ago or
test b90]

- DON'T KNOW d [goto next insured
person whose
coverage began LT
12 months ago or
test b90]

- REFUSED r [goto next insured
person whose
coverage began LT
12 months ago or
test b90]

- ====>

>test b872< [b852 le <4> OR b852 eq <6>, goto b872; ELSE goto TEST b882]

See Appendices B and C for the names of the variables associated with the survey questions.

>b872< Was [fill NAME]'s last health insurance plan before [fill CURRENT PLAN NAME] an HMO, that is, a Health Maintenance Organization?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test b882< [If b852 eq <1> and current coverage is private (bla, blb or blc) goto b882; ELSE goto test b90]

>b882< Why did ([fill NAME]/you) change insurance plans at that time?

CODE ALL THAT APPLY

OWN/SPOUSE/PARENT CHANGED JOB..... 1
EMPLOYER OFFERINGS CHANGED 2
CURRENT PLAN IS LESS EXPENSIVE 3
CURRENT PLAN HAS BETTER SERVICES:
PREFERRED DOCTORS, BETTER QUALITY,
CONVENIENT LOCATION, ETC.⁷ 4
OTHER [SPECIFY] 5

DON'T KNOW d
REFUSED r
====>

>test b90< [IF INFORMANT HAS BEEN IN HMO IN LAST YEAR goto b911; ELSE goto b901]

>b901< Have you ever been enrolled in an HMO?

YES..... 1 [goto b911]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test b902]

⁷Frequency for particular services is too low to justify burden and cost of separate coding.

See Appendices B and C for the names of the variables associated with the survey questions.

>b911< [INFORMANT ONLY] Altogether, for about how many years have you been enrolled in HMO plans?

PROBE: Your best estimate is fine.

LESS THAN SIX MONTHS0
(1-30) YEARS 1

DON'T KNOW d [goto b921]
REFUSED r
==> [goto test b902]

>b921< Would that be less than two years, two to five years, or more than five years?

LESS THAN TWO YEARS 1
TWO TO FIVE YEARS2
MORE THAN FIVE YEARS.....3

DON'T KNOW d
REFUSED r
==> [goto test b902]

>test b902< [IF INFORMANT IS MARRIED, goto test b90 AND ASK b902 ... b922 FOR SPOUSE, SUBSTITUTING [fill NAME] FOR [YOU], ELSE, IF NO SPOUSE, goto b951.]

See Appendices B and C for the names of the variables associated with the survey questions.

>b951< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.⁸

PROBE: CODE 7 IF R. SAYS THE STATEMENT DOES NOT APPLY.

STRONGLY AGREE	1
SOMEWHAT AGREE	2
NEITHER AGREE NOR DISAGREE	3
SOMEWHAT DISAGREE	4
STRONGLY DISAGREE	5
NOT APPLICABLE	7
DON'T KNOW	d
REFUSED	r

>test< **If uninsured go to section C. Form a table listing possible plans (up to three private plans, up to three Medicaid/SCHIP, Medicare, CHAMPUS, CHAMP-VA, TRICARE, VA, or other health plan, Indian Health Service, other) by person. If R. reports Medicare, store Medicare. Else, sum the number of plans reported for this FIU. If one, store name of plan and goto Module C; else, if R. reports Medicaid/CHIP and one private plan, store the private plan and goto Module C; else goto b96.**

>b961< Which of the following plans (do you/does [fill NAME]) use for all or most of (your/[fill NAME's]) health care? [Repeat for each person in FIU and store plan for each person.]

LIST PLANS.

NOTE: Deleted b98 and b99 for CTS2

⁸Source: Royal, Kenneth, et al, **The Gallup Arizona Health Care Poll**. P.18, The Gallup Organization, 1995. Distributions by coverage available.

c. RESOURCE USE DURING THE LAST 12 MONTHS

>c101< Since [fill DATE 12 MONTHS AGO], were [fill NAMES OF FAMILY MEMBERS] a patient in a hospital overnight?

PROBE: DO NOT INCLUDE ANY OVERNIGHT STAYS IN THE EMERGENCY ROOM.

YES.....1 [goto c11]
NO0

DON'T KNOWd
REFUSED r
====> [goto test c20]

>c11< Who was in a hospital overnight? (Anyone else?)

[fill NAME] 1
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
[fill NAME] 5
[fill NAME] 6
[fill NAME] 7
[fill NAME] 8

NONE/NO ONE/NO OTHER RESPONSESn
NEED TO DELETE A RESPONSE x

DON'T KNOWd
REFUSED r
====>

>test c121< **[ASK FOR EACH PERSON WITH A HOSPITAL STAY]**

>c121< How many different times did [fill NAME] stay in any hospital overnight or longer during the past 12 months?

PROBE: Your best estimate is fine.

|__|__| TIMES
(1-20)

DON'T KNOWd
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>test c131< [if (FEMALE AND GE 12 AND LE 45) or (CHILD LE 1) goto c131; else goto c151]

>c131< FEMALE, 12-45 YEARS OLD: (Were any of these hospital stays/was this hospital stay) for delivery of a baby?

CHILD: Did [fill CHILD LE 1] stay in the hospital overnight at birth?

YES..... 1 [goto c141]

NO 0

DON'T KNOW d

REFUSED r

====> [goto c151]

>c141< Have you included this hospitalization in the number of hospital stays you gave me for [fill NAME]?

PROBE: Was [fill NAME]'s stay in the hospital overnight for delivery.

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

====>

>c151< (For how many of the [fill c121] times [fill NAME] stayed in the hospital) (was/were) (he/she/you) admitted through the emergency room?

|__|__| TIMES
(0-20)

DON'T KNOW d

REFUSED r

NOTE: NUMBER MUST BE LE # ADMISSIONS IN c121.

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>c161< (For [fill NAME]'s [fill c121] hospital stay(s) during the past 12 months,) how many nights was (he/she) in the hospital altogether?

|_|_|_|_| NIGHTS
(1-366)

DON'T KNOW d
REFUSED r
==>

NOTE: c161 MUST BE GE c121; ELSE VERIFY.

REPEAT FOR OTHER FAMILY MEMBERS WITH HOSPITAL STAYS. THEN ASK REMAINING RESOURCE USE QUESTIONS FOR EACH FAMILY MEMBER, BEGINNING WITH INFORMANT.

>test c20< **[SELECT WORDING BASED ON WHETHER PERSON HAD ER VISIT RESULTING IN HOSPITAL ADMISSION]**

>c211< **ER/HOSPITAL ADMISSION:** (The next questions are about [fill NAME])⁹. Not counting [fill NAME]'s [fill c151] emergency room visits you told me about, (have/has) [fill NAME] gone to a hospital emergency room in the past 12 months to get medical treatment?

NO ER/HOSPITAL ADMISSION: (The next questions are about [fill NAME]).¹ During the past 12 months, (have/has) [fill NAME] gone to a hospital emergency room to get medical treatment?

PROBE: Count all visits to the ER, including visits where you received a brief exam, but were sent elsewhere.

YES 1 [goto c221]
NO 0

DON'T KNOW d
REFUSED r
==>

⁹Delete phrase for one person family.

See Appendices B and C for the names of the variables associated with the survey questions.

>c221< (Again, not counting the [fill 151] emergency room visits you told me about,) During the past 12 months, how many times has [fill NAME] gone to a hospital emergency room?

PROBE: Count all visits to the ER, including visits where [fill NAME] received a brief exam, but were sent elsewhere.

PROBE: Your best estimate is fine.

|__| |__| TIMES
(1-20)

DON'T KNOW d [goto c231]
REFUSED r
==> [goto tester]

>c231< Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

1 1
2-3 2
4-9 3
10-12 4
13 OR MORE 5

DON'T KNOW d
REFUSED r
==>

>tester< IF c151 ge 1 OR c221 ge 1 OR c231 ge1, THEN goto er1; ELSE goto c311

>er1< I would like you to think about (your/[fill NAME]'s) last visit to the emergency room. Did (you/[fill NAME]) go to the emergency room to treat an accident or injury or for some other health problem?

ACCIDENT OR INJURY 1
OTHER REASON 2 [goto er2]

DON'T KNOW d
REFUSED r
==> [goto c311]

See Appendices B and C for the names of the variables associated with the survey questions.

>er2< What was the health problem?

RECORD VERBATIM

====>

>er3< Before going to the emergency room, (were you/was [fill NAME]) able to contact a doctor or other health professional about this problem?

YES..... 1 [goto er4]
NO 0

DON'T KNOW d
REFUSED r
====> [goto er5]

>er4< Did a doctor or other health professional tell (you/[fill NAME]) to go to the emergency room?

YES..... 1 [goto c311]
NO 0

DON'T KNOW d
REFUSED r
====> [goto er6]

>er5< Before going to the emergency room or calling for emergency medical assistance, did (you/[fill NAME]) try to see or call a doctor or other health professional about this problem?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>er6< At the time (you/[fill NAME]) went to the emergency room, were there any places other than an emergency room where (you/[fill NAME]) could have gone to treat this problem?

YES..... 1 [goto er7]
NO 0

DON'T KNOW d
REFUSED r
====> [goto er9]

>er7< Would that be a doctor's office, an HMO, a hospital outpatient clinic, some other clinic or health center, or some other place?

DOCTOR'S OFFICE 1
HMO..... 2
HOSPITAL OUTPATIENT CLINIC 3
OTHER CLINIC OR HEALTH CENTER 4
SOME OTHER PLACE..... 5

DON'T KNOW d [goto tester 9]
REFUSED r [goto tester 9]
====>

>er8< Why did you decide to go to the emergency room instead of [fill PLACE IN er7]?

CLOSED 1
TOO FAR AWAY..... 2
COST TOO MUCH..... 3
OTHER [SPECIFY] 0

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>tester9< If c121 or c151 equals "0" goto c311 (no hospital admissions past year or no hospital admissions from ER)

>er9< As a result of this emergency room visit, (were you/was [fill NAME]) admitted to the hospital for an overnight stay?

YES.....1
NO0

DON'T KNOWd
REFUSEDr

==>

>c311< Since [fill MONTH/YEAR 12 months ago], about how many times has [fill NAME] seen a doctor? [IF ER OR HOSPITAL VISIT: Do not count doctors seen while an overnight patient in a hospital or in the emergency room.]

- PROBES:** (1) Include osteopathic doctors and psychiatrists.
(2) Include outpatient visits and outpatient surgeries.
(3) Exclude dentists visits, chiropractor visits, and telephone calls to doctors.
(4) Your best estimate is fine.
(5) Exclude nurse practitioners and physician's assistants.

NO/NONE0 [goto c331]

|__|__| VISITS [goto c3p1]
(1-96)

DON'T KNOWd [goto c321]
REFUSEDr [goto test c411]

==>

>c321< Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

1.....1
2-3.....2
4-9.....3
10-12.....4
13 OR MORE5

DON'T KNOWd [goto test c411]
REFUSEDr [goto test c411]

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>c3p1< [ASK OF ALL PERSONS] (Were any of these visits/Was this visit) for routine preventive care such as a physical examination (well-child if child <5) or check up?

YES..... 1 [goto c331]
NO 0

DON'T KNOW d
REFUSED r [goto c331]
==> [goto c3c1]

>c3c1< (Were any of these visits/Was this visit) for a routine check up for an ongoing health problem?

PROBE: Examples of ongoing health problems include asthma, diabetes, heart conditions, hypertension, cancer, etc.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

>c331< (Not counting [fill NAME]'s [fill c311 OR 321] doctor visits you already told me about,) has [fill NAME] seen a nurse practitioner, physician's assistant, [or midwife] during the last 12 months?

IF YES: How many times has [fill NAME] seen a nurse practitioner, physician's assistant [or midwife] during the last 12 months?

PROBES: (1) Your best estimate will be fine.
(2) Include times you got a shot, but did not see the doctor.
(3) Do not include visits where [fill NAME] saw only a registered nurse.

NO/NONE 0 [goto test c411]

|__|__| VISITS [goto test c351]
(1-96)

DON'T KNOW d
REFUSED r [goto test c411]
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>c341< Would you say one, two or three, four to nine, ten to twelve, or thirteen or more?

1..... 1
2-3..... 2
4-9..... 3
10-12..... 4
13 OR MORE 5

DON'T KNOW d
REFUSED r
==>

>test c351< [IF c3p1 ne <1> AND c3c1 ne <1> goto c351; ELSE goto test c411]

>c351< [ASK OF ALL PERSONS] (Were any of these visits/Was this visit) for routine preventive care such as a physical examination (well-child if child <5) or check up?

YES..... 1 [goto test c411]
NO 0

DON'T KNOW d
REFUSED r [goto test c411]
==>

>c361< (Were any of these visits/Was this visit) a routine check up for an ongoing health problem?

PROBE: Examples of ongoing health problems include asthma, diabetes, heart conditions, hypertension, cancer, etc.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>test c411< [IF NO HOSP/ER/PHYS./OTHER PROVIDER VISITS, goto c511]¹⁰

>c411< During the past 12 months has [fill NAME] had **surgery** or other surgical procedures either in the hospital or in a doctor's office?

PROBE: This includes both major surgery and minor surgery and procedures such as setting broken bones, stitches, or removing growths.

YES..... 1 [goto c421]
NO 0

DON'T KNOW d
REFUSED r
==> [goto c511]

>c421< Altogether, how many different times has [fill NAME] had surgery during the past 12 months?

|__|__| TIMES [goto test c431]
(1-96)

DON'T KNOW d
REFUSED r
==> [goto c511]

>test c431< [IF PERSON HAS HAD AT LEAST ONE HOSPITAL STAY goto c431; ELSE goto c511]

>c431< And how many of these [fill c411] surgeries were in the hospital when [fill NAME] stayed overnight or longer?

|__|__| TIMES
(0-96)

ALL 97
DON'T KNOW d
REFUSED r
==>

¹⁰Even if respondent recalled no encounters with health system, he or she could have obtained a flu shot and not considered it an a visit with medical personnel.

See Appendices B and C for the names of the variables associated with the survey questions.

>c511<

During the past 12 months, that is since [fill 12-MONTH DATE], has [fill NAME] seen or talked to a mental health professional, such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

YES.....1
NO0

DON'T KNOWd
REFUSEDr
==>

NOTE: c521-c621 deleted.

See Appendices B and C for the names of the variables associated with the survey questions.

c. UNMET NEED

>c811< [INFORMANT SELF RESPONSE] Next, during the past 12 months, was there any time when you didn't get the medical care you needed?

INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>c821< [INFORMANT SELF RESPONSE] And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test c831< [IF c811 EQ <1> OR <d> OR c821 EQ <1> or <d> goto c831; ELSE goto c841]

>c831< [INFORMANT SELF RESPONSE] Did you not get the medical care you needed or have delays getting medical care you needed for any of the following reasons?

CODE ALL THAT APPLY

- Worry about the cost 1
- The doctor or hospital wouldn't accept your health insurance 2
- Your health plan wouldn't pay for the treatment..... 3
- You couldn't get an appointment soon enough..... 4
- You couldn't get there when the doctor's office or clinic was open..... 5
- It takes too long to get to the doctor's office or clinic from your house or work..... 6
- You couldn't get through on the telephone 7
- You were too busy with work or other commitments to take the time..... 8
- You didn't think the problem was serious enough..... 9
- Or any other reason I haven't mentioned [SPECIFY] 0

NONE CITED/NO OTHER RESPONSES..... n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
==>

>test< If didn't get care when needed use "didn't get" version of fill (c811 eq 1 and c821 ne 1)
If postponed care when needed use "postponed" version of fill (c811 ne 1 and c821 eq 1)
If both didn't get and postponed use "didn't get" version of fill (c811 eq 1 and c821 eq 1)

>unmet1< [INFORMANT SELF RESPONSE] What was the most recent health problem for which you (didn't get/put off getting) medical care?

RECORD VERBATIM

DON'T KNOW d
REFUSED r
====>

>unmet2< During the past 12 months, did you see a doctor to treat this problem?

 YES..... 1 [goto testunmet2a]
 NO 0

 DON'T KNOW d
 REFUSED r
 ===> [goto c841]

>testunmet2a< If didn't get care (c811 eq 1) goto unmet3

>unmet2a< Did you put off seeing a doctor to treat this problem?

INTERVIEWER NOTE: PROBLEM WAS (fill unmet1)

 YES..... 1 [goto unmet3]
 NO 0

 DON'T KNOW d
 REFUSED r
 ===> [goto c841]

>unmet3< During the past 12 months, were you referred to a specialist to treat this problem?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.

INTERVIEWER NOTE: PROBLEM WAS (fill unmet1)

 YES..... 1 [goto unmet3a]
 NO 0

 DON'T KNOW d
 REFUSED r
 ===> [goto unmet4]

>unmet3a< Did you see the specialist (IF DELAYED CARE: when the doctor referred you or did you put off seeing the specialist)?

 YES—SAW WHEN REFERRED 1
 NO—DIDN'T SEE SPECIALIST
 (PUT OFF SEEING) 0

 DON'T KNOW d
 REFUSED r
 ===>

See Appendices B and C for the names of the variables associated with the survey questions.

>unmet4< During the past 12 months, did a doctor order or recommend medical tests to treat this problem?

PROBE: Medical tests may include blood work, PET SCANS, MRIs, etc.

YES..... 1 [goto unmet4a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto unmet5]

>unmet4a< Did you get the tests (IF DELAYED CARE: when the doctor ordered them or did you put off getting the tests)?

YES—GOT TESTS WHEN ORDERED..... 1
NO—DIDN'T GET WHEN ORDERED (PUT OFF
GETTING TESTS)..... 0

DON'T KNOW d
REFUSED r
====>

>unmet5< During the past 12 months, did a doctor order or recommend any medical procedures, including surgery, to treat this problem?

YES..... 1 [goto unmet5a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto c841]

>unmet5a< Did you have the procedure or surgery (IF DELAYED CARE: when the doctor ordered it or did you put off getting the procedure or surgery)?

YES – GOT PROCEDURE OR SURGERY..... 1
NO – DIDN'T HAVE (PUT OFF HAVING
PROCEDURE OR SURGERY) 0

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>c841< During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?¹¹

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test c93< [ASK c22...c842...FOR NEXT PERSON¹²; THEN goto c92]

NOTE: c90 deleted.

>c92< During the past 12 months, about how much did (you/your family) spend out-of-pocket for medical care? Do not include the cost of dental care, health insurance premiums, or any costs that are paid by your health insurance.

PROBES: (1) Your best estimate is fine.

(2) Include out-of-pocket expenses for prescription drugs, co-payments, and deductibles, but do not include health insurance premiums, dental costs, or any other costs paid by your health insurance.

READ CATEGORIES IF NECESSARY.

NONE..... 0

\$ |__|__|,|__|__|__|
(10-96,000)

DON'T KNOW d [goto c93]
REFUSED r
====> [gotoc94]

¹¹Source: NHIS, AAU.111

¹²Include unmet need (k811...k831) for child, substituting child's home for second person.

See Appendices B and C for the names of the variables associated with the survey questions.

>c93< Would that be less than \$500, \$500 to \$2,000, \$2,000 to \$3,000, \$3,000 to \$5,000, or \$5,000 or more?

READ CATEGORIES IF NECESSARY.

NONE.....0
 LESS THAN \$500 1
 \$500 TO \$1,9992
 \$2,000 TO \$2,9993
 \$3,000 TO \$4,9994
 \$5,000 OR MORE5

 DON'T KNOWd
 REFUSED r
 ===>

>c94< During the past 12 months, (have you/has your family) had any problems paying medical bills?

YES.....1 [goto c95]
 NO0

 DON'T KNOWd
 REFUSED r
 ===> [goto Section d]

>c95< Because of problems paying medical bills during the past 12 months, (have you/has your family) . . .

INTERVIEWER: REPEAT STEM IF NECESSARY

PROGRAMMER NOTE: ROTATE c95a-c95e

	YES	NO	DON'T KNOW	REFUSED
Been contacted by a collection agency?	1	0	d	r
Had problems paying for other necessities?	1	0	d	r
Put off major purchases, such as a new home or car?	1	0	d	r
Had to take money out of savings?	1	0	d	r
Had to borrow?	1	0	d	r

d. USUAL SOURCE OF CARE/PATIENT TRUST

BEGIN WITH FAMILY INFORMANT

>d< The next questions are about places people go to for their health problems.

>d101< Is there a place that [you/fill NAME] **usually** go(es) to when (you/he/she) (is/are) sick or need(s) advice about your health?

PROBE: IF R. IS UNSURE IF ONE PLACE OR MORE THAN ONE PLACE:

When [fill NAME] is sick or needs advice about (his/her/you) health, does (he/she/you) go to one place or more than one place?

YES..... 1 [goto d111]
NO, THERE IS NO PLACE 0 [goto test d301]
NO, THERE IS MORE THAN ONE PLACE 3 [goto d111]

DON'T KNOW d [goto test d301]
REFUSED r [goto test d301]
==>

>d111< If (d101 = 1) then read:
What kind of place is it—a doctor's office, an HMO, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

Else (d101 = 3) read:
What kind of place (do/does) [you/fill NAME] go to most often—a doctor's office, an HMO, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

DOCTOR'S OFFICE 1
HMO..... 2
HOSPITAL OUTPATIENT CLINIC 3
OTHER CLINIC OR HEALTH CENTER 4
HOSPITAL EMERGENCY ROOM..... 5
SOME OTHER PLACE..... 6

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>sn1< IF UNINSURED: At this place, (do you/does [fill NAME]) pay full price for medical care or (do you/does [fill NAME]) pay a lower amount based on what (you/[fill NAME]) can afford to pay?

FULL PRICE0
LOWER AMOUNT 1

DON'T KNOW d
REFUSED r
==>

>d121< When (you/[fill NAME]) go(es) there, do(es) (you/he/she) usually see a doctor, a nurse, or some other type of health professional?

INSTRUCTION: IF R. SAYS DOCTOR AND NURSE, CODE DOCTOR.

DOCTOR 1
NURSE 2
OTHER [SPECIFY] 3

DON'T KNOW d [goto d141]
REFUSED r [goto d141]
==>

>d131< Do(es) (you/[fill NAME]) usually see the same (doctor/nurse/provider) each time (you/he/she) go(es) there?

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>d141< At any time in the past 12 months did (you/[fill NAME]) change the [fill PROVIDER/PLACE]¹³ you/he/she) **usually** go(es) to for health care?

YES..... 1 [goto d151]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test d301]

>d151< Was this change **mainly** related to health insurance, the quality of care [fill NAME] received, or was it for some other reason?

HEALTH INSURANCE 1 [goto d161]
QUALITY OF CARE 2
OTHER [SPECIFY] 3 [goto d171]

DON'T KNOW d
REFUSED r
====> [goto test d301]

>d161< Did [fill NAME] change the [fill PROVIDER/PLACE] (you/he/she) usually (go/goes) to for health care because [fill NAME] or [fill NAME]'s employer changed health plans, because the [fill PROVIDER/PLACE] was not covered by the health plan, or for some other reason?

INTERVIEWER: CODE ONE RESPONSE

EMPLOYER CHANGED HEALTH PLANS 1
[PROVIDER/PLACE] NO LONGER COVERED 2
OTHER [SPECIFY] 3

DON'T KNOW d
REFUSED r
====> [goto test d301]

¹³Fill hierarchically: if d121 answered and d131=1 - (1)doctor,(2) nurse,(3) health professional; else fill d111 if d111 ≤ 5; else place.

See Appendices B and C for the names of the variables associated with the survey questions.

>d171< Which of the following reasons best describes why [fill NAME] changed the [fill PROVIDER/PLACE] (you/he/she) usually go(es) for health care?

- ([fill NAME]/you/your) [fill PROVIDER/PLACE] was no longer available 1
 - ([fill NAME]/you/your) needed to see a particular type of doctor 2
 - ([fill NAME]/you/your) recently moved..... 3
 - ([fill NAME]/you/your) felt that it was more convenient to go to another doctor 3
 - or some other reason I haven't mentioned? [SPECIFY] 5
-
- DON'T KNOW d
 - REFUSED r
- ====>

NOTE: d201 deleted.

END ROTATION

>test d301< **[IF MORE THAN ONE PERSON; REPEAT d10n...-d20n... FOR EACH PERSON.]**

>test sn2< **[IF NO UNINSURED IN FIU SKIP TO test 302
IF sn1 = 1 FOR ANY MEMBER OF FIU, goto sn4
ELSE, goto sn2]**

>sn2< Thinking of the area where you live, is there a place that offers affordable medical care for people without health insurance?

- YES 1 [goto sn3]
 - NO 0
- DON'T KNOW d
 - REFUSED r
- ====> [goto test d302]

See Appendices B and C for the names of the variables associated with the survey questions.

>sn3< Is that place a doctor's office, a hospital outpatient clinic, some other clinic or health center, an emergency room, or some other place?

DOCTOR'S OFFICE 1
HOSPITAL OUTPATIENT CLINIC 3
OTHER CLINIC OR HEALTH CENTER 4
HOSPITAL EMERGENCY ROOM..... 5
SOME OTHER PLACE..... 6

DON'T KNOW d
REFUSED r
==>

>sn4< How long (does/would) it take you to get to [IF sn1 EQUALS 0: INSERT PLACE NAMED IN sn3, ELSE INSERT PLACE FROM D11: the doctor's office, the hmo, the hospital outpatient clinic, the clinic or health center, the hospital emergency room, that place]?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD. ENTER TIME PERIOD ON NEXT SCREEN

|_|_|_| TIME [goto sn4per]
(1-240)

DON'T KNOW d
REFUSED r
==> [goto sn5]

>sn4per< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS sn4]

MINUTES 1
HOURS 2
==>

>sn5< During the last 12 months, have you (or has anyone in your family) seen a physician or other health professional at [fill PLACE NAMED IN D111 OR sn3] when you did not have health insurance?

YES 1 [goto test d302]
NO 0

DON'T KNOW d
REFUSED r
==> [goto sn6]

See Appendices B and C for the names of the variables associated with the survey questions.

>sn6< Why haven't you gone to this place for medical care?

RECORD VERBATIM AND POST CODE ALL THAT APPLY

- NO NEED/NEVER GET SICK 1
 - STIGMA 2
 - NOT ELIGIBLE FOR SERVICES/
DON'T THINK THEY WOULD ACCEPT ME 3
 - DISTANCE—TOO FAR TO GO 4
 - WAIT TOO LONG 5
 - DON'T HAVE THE SERVICES I NEED 6
 - POOR QUALITY CARE..... 7
 - BAD NEIGHBORHOOD 8
 - NO TRANSPORTATION 9
 - LANGUAGE BARRIER..... 10
 - HOURS NOT CONVENIENT..... 11
 - NONE OF THESE/NO MORE CODES..... n

 - DON'T KNOW d
 - REFUSED r
- ==>

>test d302< **[IF INFORMANT HAS USUAL SOURCE OF CARE WHO IS A PHYSICIAN (d121 eq <1>) OR HAD GE ONE PHYSICIAN VISITS IN THE LAST 12 MONTHS (1 ≤ C311 ≤ 96 OR 1 ≤ c321 ≤ 5) goto d311; ELSE goto d35.]**

>d3i1< Please think about the doctor you usually see when you are sick or need advice about your health. For each of the following statements, tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree. [NOTE, NEITHER AGREE NOR DISAGREE IS CODED AS SCALE MIDPOINT BUT IS NOT READ. ROTATE d311-341.]¹⁴

¹⁴The next four questions (d311-d341) concerning patient's trust in their physicians were selected from an instrument developed by Dr. Paul Cleary of Harvard University.

>d311< I think my doctor may not refer me to a specialist when needed.

INTERVIEWER: REPEAT IF NECESSARY. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree?

- (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.
- (2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
==>

>d321< I trust my doctor to put my medical needs above all other considerations when treating my medical problems.

INTERVIEWER: REPEAT IF NECESSARY. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

- (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.
- (2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
==>

>d331<

I think my doctor is strongly influenced by health insurance company rules when making decisions about my medical care.

INTERVIEWER: REPEAT IF NECESSARY. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

(1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d."

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
==>

>d341<

I sometimes think that my doctor might perform unnecessary tests or procedures.

INTERVIEWER: REPEAT IF NECESSARY. Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

(1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d."

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>d351< Next, I am going to read some statements about health and medical care.
Usually, you go to the doctor as soon as you start to feel bad. Is that . . .

- definitely true,..... 1
 - mostly true,.....2
 - mostly false, or3
 - definitely false? 4

 - DON'T KNOW d
 - REFUSED r
- ==>

>d361< You will do just about anything to avoid going to the doctor. Is that . . .

- definitely true,..... 1
 - mostly true,.....2
 - mostly false, or3
 - definitely false? 4

 - DON'T KNOW d
 - REFUSED r
- ==>

See Appendices B and C for the names of the variables associated with the survey questions.

e. FAMILY LEVEL SATISFACTION/LAST VISIT PROCESS AND SATISFACTION/SF12/RISK BEHAVIORS

THIS SECTION WILL BE COMPLETED FOR INFORMANT AND CHILD AND (EXCEPT FOR FAMILY LEVEL QUESTIONS) IS INCLUDED IN SELF-RESPONSE MODULE FOR OTHER ADULTS.

>test e10< **[IF FAMILY HAS HAD ANY PROVIDER, OR HOSPITAL VISITS IN LAST 12 MONTHS (c101 = 1, or c211 = 1, or $1 \leq c311 \leq 96$, or $1 \leq c321 \leq 5$, or $1 \leq c331 \leq 96$, or $1 \leq c341 \leq 5$) goto e101, ELSE goto e121]**

>e100< The next questions are about your satisfaction with health care.

ENTER <g> TO CONTINUE ===>

>e101< All things considered, are you satisfied **or** dissatisfied with [(the health care you have received/the health care you and your family have received)] **during the last 12 months?**

PROBE: If you did not receive services that you felt you needed, please consider that too.

SATISFIED.....1 [goto e111]
DISSATISFIED.....2 [goto e111]
NEITHER SATISFIED NOR DISSATISFIED3

DON'T KNOWd
REFUSED r
===> [goto e121]

>e111< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOWd
REFUSED r
===>

See Appendices B and C for the names of the variables associated with the survey questions.

>e121< Now I would like to ask you about satisfaction with your choice of doctors.

First, primary care doctors, such as family doctors, [pediatricians],¹⁵ or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with the **choice** you personally have for primary care doctors?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

SATISFIED.....1 [goto e131]
DISSATISFIED.....2 [goto e131]
NEITHER SATISFIED NOR DISSATISFIED3

DON'T KNOWd
REFUSEDr
====> [goto e141]

>e131< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY1
SOMEWHAT2

DON'T KNOWd
REFUSEDr
====>

>e141< During the past 12 months, have you personally needed or seen a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.

YES.....1 [goto CAHPS12]
NO0

DON'T KNOWd
REFUSEDr
====> [goto test e15a]

¹⁵Exclude for adults.

See Appendices B and C for the names of the variables associated with the survey questions.

>CAHPS12< In the last 12 months, did (you/[fill NAME]) see a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>e151< Are you satisfied or dissatisfied with the **choice** you have for specialists?

SATISFIED..... 1 [goto E151]
DISSATISFIED..... 2 [goto E151]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto test e15a]

>E151< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>test e15a< IF DOCTOR VISIT IN LAST 12 MONTHS—(c311 ge 1 OR c321 ge 1) goto CAHPSLANG

>CAHPSLANG< In the last 12 months, how often did you have a hard time *speaking with or understanding* a doctor or other health providers because you spoke different languages—never, sometimes, usually or always?

NEVER..... 1
SOMETIMES..... 2
USUALLY 3
ALWAYS 4

DON'T KNOW d
REFUSED r
====>

>test for uninsured< IF R IS UNINSURED goto test E161, WHICH BEGINS LAST VISIT SEQUENCE; ELSE goto NEW.

See Appendices B and C for the names of the variables associated with the survey questions.

>new< The next questions are about your experiences with [fill NAME OF HEALTH PLAN].

====>

>testCAHPS10< IF PERSON HAD A DOCTOR VISIT [c311 equals 1-96 or c32 equals 1-5] AND NEEDED TO SEE A SPECIALIST [e141 equals 1] , goto CAHPS10; ELSE, IF PERSON HAD A DOCTOR VISIT [c311 equals 1-96 or c32 equals 1-5] BUT DIDN'T NEED TO SEE A SPECIALIST [e141 <>1] goto CAHPS23S; ELSE goto CAHPS37S.

>CAHPS10< In the last 12 months, how much of a problem, if any, was it to get a referral to a specialist that you needed to see? Would you say that it was . . .

- a big problem, 1
 - a small problem, or..... 2
 - not a problem? 3
 - I DIDN'T NEED TO SEE A SPECIALIST IN THE
LAST 12 MONTHS..... 4

 - DON'T KNOW d
 - REFUSED r
- ====>

>CAHPS23S< In the last 12 months, did you need approval from [fill NAME OF HEALTH PLAN] for any care, tests, or treatment?

- YES..... 1 [goto CAHPS23]
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====> [goto CAHPS37S]

See Appendices B and C for the names of the variables associated with the survey questions.

>CAHPS23< In the last 12 months, how much of a problem, if any, were delays in health care while you waited for approval from [fill NAME OF HEALTH PLAN]? Would you say that it was . . .

PROBE: If the respondent says that they are members of more than one plan, say "Think about your experiences with the plan you use for all or most of your health care."

a big problem, 1
a small problem, or..... 2
not a problem? 3
NO VISITS IN LAST 12 MONTHS 4

DON'T KNOW d
REFUSED r
====>

>CAHPS37S< In the last 12 months, did you have to fill out any paperwork for [fill NAME OF HEALTH PLAN]?

YES 1 [goto CAHPS37]
NO 0

DON'T KNOW d
REFUSED r
====> [goto SP14]

>CAHPS37< In the last 12 months, how much of a problem, if any, did you have with paperwork for [fill NAME OF HEALTH PLAN]? Would you say that it was . . .

PROBE: Paperwork means things like getting your ID card, having your records changed, processing forms, or other paperwork related to getting care.

a big problem, 1
a small problem, or..... 2
not a problem? 3
I DIDN'T HAVE ANY EXPERIENCE WITH
PAPERWORK FOR [fill NAME OF HEALTH
PLAN] IN THE LAST 12 MONTHS 4

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>SP14< Given [fill NAME OF HEALTH PLAN]'s benefits, are you satisfied or dissatisfied with the amount you pay for health care?

PROBE: IF THE RESPONDENT SAYS THAT THEY ARE MEMBERS OF MORE THAN ONE PLAN, SAY: "Think about your experiences with the plan you use for all or most of your health care."

SATISFIED.....1 [goto SP14X]
DISSATISFIED.....2 [goto SP14X]
NO AMOUNT PAIDn

DON'T KNOWd
REFUSED r
==> [goto CAHPS38]

>SP14X< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
==>

>CAHPS38< We want to know your rating of all your experience with [fill NAME OF HEALTH PLAN].

Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your health plan now?

Worst health plan possible0
..... 1
..... 2
..... 3
..... 4
..... 5
..... 6
..... 7
..... 8
..... 9
Best health plan possible..... 10

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>test e161< [IF PERSON HAS HAD ANY PHYSICIAN VISITS IN LAST 12 MONTHS
(1 ≤ C311 ≤ 96 OR 1 ≤ C321 ≤ 5), goto e161; ELSE, goto SF12 (e401)]

>e161< Since [fill DATE 12 MONTHS AGO], did [fill NAME] visit a doctor for care of
sickness, injury, or other health problems?

PROBES: (1) Other health problems include follow up or check up visits for
chronic problems, such as asthma, diabetes, hypertension, heart
conditions, etc.

(2) Do not include visits to physicians' assistants, nurse practitioners,
alternative medicine specialists, or other providers who are not
medical doctors.

YES..... 1 [goto e171]
NO 0

DON'T KNOW d
REFUSED r
==> [goto e201]

>e171< In what month and year was [fill NAME]'s **most recent** visit for sickness, injury,
or other health problem?¹⁶

JAN 1
FEB 2
MAR 3
APR 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d
REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2004)

==>

¹⁶In this and related questions with 12 month recall, the last 12 months are asterisked. The interviewer cannot enter a value outside of the recall period.

See Appendices B and C for the names of the variables associated with the survey questions.

>e181< Since that visit in [fill MONTH], did [fill NAME] visit a doctor for a general check up, physical examination, [fill FEMALES OVER 12—gynecological [or pregnancy]¹⁷ check up,] or other preventive care not related to a health problem?

PROBE: (1) Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

YES..... 1 [goto e191]
NO 0

DON'T KNOW d
REFUSED r
==> [goto test e221]

>e191< In what month and year was [fill NAME]'s **most recent** visit for a check-up or physical exam?

JAN 1
FEB 2
MAR 3
APR 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d
REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2004)
==>

>test e191< [VERIFY THAT MONTH IN e191 IS SAME MONTH OR FOLLOWS MONTH IN e171; THEN goto test e221]

¹⁷Limit "or pregnancy" to women between 12 and 50.

See Appendices B and C for the names of the variables associated with the survey questions.

>e201< ASKED IF PERSON HAS NOT HAD A SICK VISIT.

During the last 12 months, did [fill NAME] visit a doctor for a general check up, physical examination, [fill FEMALES OVER 12—gynecological [or pregnancy] check up], or other preventive care not related to a health problem?

PROBE: Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

YES..... 1 [goto e211]
NO 0 [goto e901]

DON'T KNOW d
REFUSED r
====> [goto SF12 (e401)]

>e211< In what month and year was [fill NAME]'s **most recent** visit?

JAN 1
FEB 2
MAR 3
APR 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d
REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2004)
====> [goto test e221]

>e901< Earlier I noted that you had [fill # IN c311 OR c321] doctor visit(s) in the last 12 months. Is that correct?

CORRECT [jb e161 TO OBTAIN LAST DOCTOR VISIT]

INCORRECT..... 1
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>e911< Since [fill DATE], about how many times (have/has) [fill NAME] seen a doctor?
Do not count doctors seen while an overnight patient in a hospital or emergency room.

PROBES: (1) Include osteopathic doctors and psychiatrist, (2) Include outpatient visits. (3) Exclude dentist visits,, chiropractor visits, and telephone calls to doctors. (4) Your best estimate is fine

NONE.....0

|__|__| VISITS [goto e161]
(1-96)

DON'T KNOWd

REFUSED r

====> [goto e401, SF12]

>test e221< **[IF PERSON HAD SICK AND WELL VISIT (e161 = 1 and e181 = 1), SELECT MOST RECENT FOR e221. IF SAME MONTH FOR BOTH, FILL WELL VISIT (e181) SINCE IT WAS MORE RECENT]**

>e221< Please think about [fill NAME]'s visit [for preventive care or a check up/for care of sickness, injury or other health problem] in [fill MONTH].

Was the doctor [fill NAME] saw a family doctor, who treats a variety of illnesses and gives preventive care, or was he or she a specialist who mainly treats just one type of problem?

PROBE: Family doctors usually are in general or family practices or are internists or pediatricians who treat a variety of illnesses and problems.

FAMILY DOCTOR..... 1

SPECIALIST, INCLUDING OB/GYN 2

DON'T KNOWd

REFUSED r

====>

>test e241< **[IF PERSON HAS USC (d101 = 1) goto e241; ELSE goto E24a1]**

See Appendices B and C for the names of the variables associated with the survey questions.

>e241< Was this visit in [fill MONTH] to the place you USUALLY go to when you are sick or need advice about your health?

YES..... 1 [goto e251]
NO 0

DON'T KNOW d
REFUSED r
==>

>E24a1< Was this visit to an emergency room?

YES..... 1 [goto e281]
NO 0

DON'T KNOW d
REFUSED r
==>

>e251< For this visit in [fill MONTH], did you have an appointment ahead of time or did (you/he/she) just walk in?

APPOINTMENT 1 [goto e261]
WALK IN 2

DON'T KNOW d
REFUSED r
==> [goto e281]

The following questions are numbered differently in CATI because the pairs of questions (amount and time period) appear on the same CATI screen and therefore must have the same basic variable name with different suffixes. This is true for variables e261 @amt/per, e281 @amt/per and e291 @amt/per.

See Appendices B and C for the names of the variables associated with the survey questions.

>e261< For this visit, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: (1) CODE "0" FOR SAME DAY.

(2) ACCEPT MOST CONVENIENT TIME PERIOD.

SAME DAY..... 0

|__|__| TIME [goto e271]
(1-30)

DON'T KNOW d

REFUSED r

====> [goto e281]

>e271< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e261].

DAYS 1

WEEKS 2

MONTHS 3

====>

TEST: VERIFY VALUES GT 12 MONTHS; COPY FOR CHILD AND OTHER ADULTS
(David see my memo, p.13, for form of verification question.)

>e281< How long did you have to wait in the waiting room before seeing a medical person for this visit in [fill MONTH]?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

|__|__|__| TIME [goto E281]
(1-240)

DON'T KNOW d

REFUSED r

====> [goto e291]

>E281< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e281]

MINUTES 1

HOURS 2

====>

TEST: VERIFY VALUES GT 8 HOURS; REPEAT FOR CHILD AND OTHER ADULTS

See Appendices B and C for the names of the variables associated with the survey questions.

>e291 For this visit, how long did it take [fill NAME] to get to the (doctor's office/emergency room)?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

|__|__| TIME [goto E291]
(1-90)

DON'T KNOW d
REFUSED r
==> [goto e301]

>E291< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e291]

MINUTES 1
HOURS 2
==>

TEST: VERIFY VALUES GT 8 HOURS; REPEAT FOR CHILD AND OTHER ADULTS.

>e301< Still thinking about this visit in [fill MONTH], how would you rate the thoroughness and carefulness of the examination and treatment you received? Would you say it was . . .

poor, 1
fair, 2
good, 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED) 7

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>e311< How would you rate how well your doctor listened to you? Would you say it was . . .

poor, 1
fair, 2
good, 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED) 7

DON'T KNOW d
REFUSED r
====>

>e321< How would you rate how well the doctor explained things in a way you could understand. Would you say it was . . .

poor, 1
fair, 2
good, 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED) 7

DON'T KNOW d
REFUSED r
====>

>test e331< IF UNINSURED goto e331, ELSE goto e401

>e331< How much did the physician charge for this visit? Was it free, less than \$20, \$20 to \$50, more than \$50 but less than \$100, or \$100 or more?

FREE 1 [goto e401]
LESS THAN \$20 2 [goto e401]
\$20 TO \$50 3
MORE THAN \$50 BUT LESS THAN \$100 4
\$100 OR MORE 5

DON'T KNOW d [goto e401]
REFUSED r [goto e401]
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>e341< How did you pay for this visit? Did you . . .

 pay the entire bill when you received the care, 1
 pay the entire bill at a later time,.....2
 pay a little at a time, but pay the entire bill,3
 pay some but not all of the bill, or4
 not pay the bill at all?..... 5

 DON'T KNOW d
 REFUSED r

>e401< Now, I have a question about (your/his/her) health.¹⁸

 In general, would you say your health is . . .

 excellent, 1
 very good,2
 good,3
 fair, or4
 poor?5

 DON'T KNOW d
 REFUSED r

 ===>

NOTE: e411, e421, e431, e441, e451, e461, e471, e481, and e501 deleted in Round 4

>e411< The next questions are about how you feel and how things have been with you during the past 4 weeks. As I read each question, please give me the one answer that comes closest to the way you have been feeling; is it all of the time, most, some, a little, or none of the time?

 TYPE <g> TO CONTINUE ===>

¹⁸SF-12™ Standard US Version 1.0, Copyright 1994 The Health Institute; New England Medical Center. Distributed by: Medical Outcomes Trust. For Spanish speaking respondents, an interviewer-administered version of the U.S.-Spanish SF-12 was reviewed and approved by the New England Medical Center (agreement 10/26/97).

See Appendices B and C for the names of the variables associated with the survey questions.

>e491< How much of the time during the past 4 weeks have you felt calm and peaceful?

READ CATEGORIES SLOWLY.

All of the time 1
Most 2
Some..... 3
A little, or 4
None of the time..... 5

DON'T KNOW d
REFUSED r
===>

>e511< How much of the time during the past 4 weeks have you felt downhearted and blue?

READ CATEGORIES SLOWLY.

All of the time 1
Most 2
Some..... 3
A little, or 4
None of the time..... 5

DON'T KNOW d
REFUSED r
===>

>GSS157< Taken all together, how would you say things are these days? Would you say that you are very happy, pretty happy, or not too happy?

VERY HAPPY 1
PRETTY HAPPY 2
NOT TOO HAPPY 3

DON'T KNOW d
REFUSED r
===>

ADULT CHRONIC CONDITIONS FOR FIU INFORMANT.

>cc1< **[IF FEMALE, AGE 50 OR UNDER]**
The next questions are about your health during the past two years. During the past two years, have you had a baby?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

>cc2c< **[IF FEMALE]** During the past two years, have you seen a doctor or health care professional for abnormal uterine bleeding?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

>cc3b< Has a doctor or health professional ever told you that you had diabetes or high blood sugar?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for diabetes or high blood sugar?

>cc3c< Has a doctor or health professional ever told you that you had arthritis?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for arthritis?

See Appendices B and C for the names of the variables associated with the survey questions.

>cc3d< Has a doctor or health professional ever told you that you had asthma?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for asthma?
[goto cc3g]

>cc3e< Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?

>cc3g< Has a doctor or health professional ever told you that you had hypertension or high blood pressure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure?

>cc3i< Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for coronary heart disease?

See Appendices B and C for the names of the variables associated with the survey questions.

>cc5c< Has a doctor or health professional ever told you that you had skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for skin cancer?

>cc5h< Has a doctor or health professional ever told you that you had cancer other than skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for that cancer?

>cc5f< **IF FEMALE OR MALE AGE 50 OR UNDER, goto cc6e. IF MALE AGE OVER 50:** Has a doctor or health professional ever told you that you had a benign prostate disease or a large prostate that was not prostate cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health professional for benign prostate disease?

>cc6e< Has a doctor or health professional ever told you that you had depression?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

IF YES: During the past two years, have you seen a doctor or other health care professional for depression?

See Appendices B and C for the names of the variables associated with the survey questions.

>cc7< During the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?

YES.....1
NO0

DON'T KNOWd
REFUSEDr
==>

SRM RESPONDENT SELECTION

>testsrn< IF UNINSURED goto SRM1, IF AGE GE 65 goto SRM1. ELSE RANDOMLY
SELECT 1/6 OF REMAINING TO goto SRM1; ELSE goto E521

See Appendices B and C for the names of the variables associated with the survey questions.

>srml1< Next, I am going to ask you whether you have had some particular health problems in the last 3 months. In the past 3 months, have you had . . .

PROGRAMMER NOTE: ROTATE SEQUENCE

INTERVIEWER NOTE: IF R. CAN'T RECALL WHETHER IT LASTED MORE THAN A MINUTE CODE DON'T KNOW

	YES	NO	DON'T KNOW	REFUSED
a. Back pain or neck pain that made it very painful to walk a block or go up a flight of stairs?	1	0	d	r
b. Shortness of breath when lying down, waking up, or with light work or light exercise?	1	0	d	r
c. Loss of consciousness or fainting?	1	0	d	r
d. Unusually blurry vision or difficulty seeing?	1	0	d	r
e. Headaches that are either new or more frequent or severe than ones you have had before?	1	0	d	r
f. Cough with yellow sputum (spew-tum) and fever?	1	0	d	r
h. Sadness, hopelessness, frequent crying, or felt depressed?	1	0	d	r
i. Anxiety, nervousness, or fear that has kept you from doing the usual amount of work or social activities?	1	0	d	r
j. Pain in the hip, knee, or leg that makes it difficult to walk a block or go up a flight of stairs?	1	0	d	r
k. A sprained ankle that is too painful to bear weight?	1	0	d	r
m. Fatigue, extreme tiredness, or generalized weakness?	1	0	d	r
q. FEMALE: A lump or mass in the breast? .	1	0	d	r
u. MALE, AGE 40 OR OLDER: A great deal of difficulty starting urination or passing urine?	1	0	d	r
v. Difficulty hearing conversations or telephone calls?	1	0	d	r
w. Chest pain that lasted more than a minute?	1	0	d	r

Symptom Response Index: Symptom Selection

Note: *Serious symptoms* are a to e, q, w
Morbid symptoms are f, h to k, m, u, v

Select symptoms in the following order:

1. Select one *serious symptom* (if any) at random for the respondent.
2. If the respondent had no *serious symptoms*, select one *morbid symptom* at random (if any).

>srm2< (Now/Next) I have a question about [fill SYMPTOM]. Did this problem first appear in the past three months or before that?

APPEARED IN PAST 3 MONTHS..... 1 [goto srm2a]
BEFORE THAT 2

DON'T KNOW d
REFUSED r
====>

>test srm2< IF BEFORE 3 MONTHS, RETURN TO SYMPTOM LIST AND SELECT ANOTHER SYMPTOM FOLLOWING LOGIC ABOVE.
IF NO MORE SYMPTOMS, goto e521

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED.

>srm2a< Did you first have this problem within the last week or before that?

APPEARED IN LAST WEEK..... 1 [goto srm2c]
BEFORE THAT 2

DON'T KNOW d
REFUSED r
====>

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED.

>srm2b< Did you first have this problem within the past 4 weeks?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED.

See Appendices B and C for the names of the variables associated with the survey questions.

>sr2c< [IF FEMALE LE 45]: Was this problem associated with a pregnancy?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>sr3< Have you seen a doctor or other health professional about this problem?

YES..... 1 [goto sr4]
NO 0

DON'T KNOW d
REFUSED r
====> [goto sr5]

>sr4< How soon did you see a doctor or other health professional about this problem after it started? Was it the same or next day, within a few days, within a week or two, or after a couple of weeks?

SAME OR NEXT DAY 1
WITHIN A FEW DAYS 2
WITHIN A WEEK OR TWO 3
AFTER A COUPLE OF WEEKS..... 4

DON'T KNOW d
REFUSED r
====> [goto sr8]

>sr5< During the past three months, have you talked on the telephone to a doctor or other health professional about this problem?

YES..... 1 [goto sr6]
NO 0

DON'T KNOW d
REFUSED r
====> [goto sr7b]

See Appendices B and C for the names of the variables associated with the survey questions.

>sr6< How soon did you telephone a doctor or other health professional about this problem after it started? Was it the same or next day, within a few days, within a week or two, or after a couple of weeks?

SAME OR NEXT DAY 1
WITHIN A FEW DAYS 2
WITHIN A WEEK OR TWO 3
AFTER A COUPLE OF WEEKS 4

DON'T KNOW d
REFUSED r
====>

>sr7a< At any time in the past three months, did you think that you needed to see a doctor or other health professional for treatment of this problem, rather than just talk to someone on the telephone?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====> [goto sr8]

>sr7b< At any time in the past three months, did you think that you needed to contact a doctor or other health professional about this problem?

YES 1 [goto sr7c]
NO 0

DON'T KNOW d
REFUSED r
====> [goto sr8]

>sr7c< Did you actually *try* to see a doctor or other health professional about this problem?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>srms8< Did this problem limit your ability to do any of your usual activities?

YES..... 1 [goto srm8a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto e521]

>srms8a< For how many days were you limited in your ability to do any of your usual activities?

PROBE: In the past three months?

INTERVIEWER: IF LESS THAN ONE DAY, ENTER 1.

|__|__| DAYS
(1-90)

DON'T KNOW d
REFUSED r
====>

>srms9< (Modified NHIS AHS.040) As a result of this problem, did you miss work at a job or business?

YES..... 1 [goto srm9a]
NO 0 [goto srm10]
NA—DOES NOT WORK..... n

DON'T KNOW d
REFUSED r
====> [goto e521]

>srms9a< How many days of work did you miss?

|__|__| DAYS
(1-30)

DON'T KNOW d
REFUSED r
====>

>srn10< Do you have paid sick leave as a benefit at your job?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>e521< Now, please tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement. I'm more likely to take risks than the average person.

INTERVIEWER: (1) NEITHER AGREE NOR DISAGREE IS NOT READ, BUT IS CODED IF OFFERED.

(2) **PROBE BY ASKING:** In general, . . . OR Whatever you think of as risks . . .

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5

DON'T KNOW d
REFUSED r
====>

>e601< These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?

YES..... 1 [goto e611]
NO 0

DON'T KNOW d
REFUSED r
====> [goto BRFSS10]

>e611< Do you now smoke cigarettes every day, some days or not at all?

EVERYDAY..... 1
SOME DAYS..... 2
NOT AT ALL..... 3

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>BRFSS10< (BRFSS12.10) About how much do you weigh without shoes?

INTERVIEWER NOTE: ROUND UP FRACTIONS

<80 - 500> POUNDS

DON'T KNOW d
REFUSED r
==>

>BRFSS11< (BRFSS12.11) About how tall are you without shoes?

INTERVIEWER NOTE: ROUND DOWN FRACTIONS

<3-7> FEET

AND/OR

<1-11> INCHES

DON'T KNOW d
REFUSED r
==>

>test e12c< **[IF FAMILY HAS CHILD goto k12, ELSE goto test e801]**

>k12< Next, I would like to ask you about satisfaction with your choice of doctors for [fill CHILD's NAME].

First primary care doctors, such as pediatricians, family doctors, or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with your **choice** of primary care doctors for [fill CHILD's NAME]?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

SATISFIED..... 1 [goto k13]
DISSATISFIED..... 2 [goto k13]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
==> [goto k14]

See Appendices B and C for the names of the variables associated with the survey questions.

>k13< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>k14< During the past 12 months, has [fill CHILD's NAME] needed or seen a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.

YES 1 [goto kCAHPS12]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test kCAHPS10]

>kCAHPS12< In the last 12 months, did (you/[fill NAME]) see a specialist?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

>k15< Are you satisfied or dissatisfied with your **choice** of specialists for [fill CHILD's NAME]?

SATISFIED 1 [goto K15a]
DISSATISFIED 2 [goto K15a]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto test kCAHPS10]

See Appendices B and C for the names of the variables associated with the survey questions.

>K15a< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>test kCAHPS10< **IF CHILD IS NOT INSURED goto test k16I. IF CHILD HAD A DOCTOR VISIT AND NEEDED TO SEE A SPECIALIST, goto kCAHPS10; ELSE, IF PERSON HAD A DOCTOR VISIT BUT DIDN'T NEED TO SEE A SPECIALIST goto kCAHPS23S; ELSE goto test kCAHPS37.**

>kCAHPS10< In the last 12 months, how much of a problem, if any, was it to get a referral to a specialist that [fill CHILD] needed to see?

A big problem 1
A small problem 2
Not a problem..... 3
Child didn't need to see a specialist in the
last 12 months 4

DON'T KNOW d
REFUSED r
====>

>kCAHPS23S< In the last 12 months, did [fill CHILD] need approval from [fill NAME OF HEALTH PLAN] for any care, tests, or treatment?

YES 1 [goto kCAHPS23]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test kCAHPS37]

See Appendices B and C for the names of the variables associated with the survey questions.

>kCAHPS23< In the last 12 months, how much of a problem, if any, were delays in [fill CHILD]'s health care while you waited for approval from [fill NAME OF HEALTH PLAN]?

Would you that it was . . .

- a big problem, 1
 - a small problem, or..... 2
 - not a problem? 3
 - NO VISITS IN LAST 12 MONTHS..... 4

 - DON'T KNOW d
 - REFUSED r
- ====>

>test kCAHPS37< IF CHILD IS THE ONLY FAMILY MEMBER COVERED BY HIS OR HER POLICY, ASK kCAHPS37S, ELSE goto kCAHPS38.

>kCAHPS37S< In the last 12 months, did you have to fill out any paperwork for [fill CHILD]'s [fill NAME OF HEALTH PLAN]?

- YES..... 1 [goto kCAHPS37]
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====> [goto kSP14]

>kCAHPS37< In the last 12 months, how much of a problem, if any, did you have with paperwork for [fill CHILD]'s [fill NAME OF HEALTH PLAN]?

Would you say that it was . . .

PROBE: Paperwork means things like getting your ID card, having your records changed, processing forms, or other paperwork related to getting care.

- a big problem, 1
 - a small problem, or..... 2
 - not a problem? 3
 - I didn't have any experience with paperwork for [fill NAME OF HEALTH PLAN] in the last 12 months 4

 - DON'T KNOW d
 - REFUSED r
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>kSP14< Given [fill NAME OF HEALTH PLAN]'s benefits, are you satisfied or dissatisfied with the amount you pay for health care?

PROBE: If the respondent says that they are members of more than one plan, say "Think about your experiences with the plan you use for all or most of our health care."

SATISFIED..... 1 [goto kSP14X]
DISSATISFIED..... 2 [goto kSP14X]
NO AMOUNT PAID n

DON'T KNOW d
REFUSED r
====> [goto kCAHPS38]

>kSP14X< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>kCAHPS38< We want to know your rating of all your experience with [fill CHILD]'s [fill NAME OF HEALTH PLAN].

Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your health plan now?

Worst health plan possible 0
..... 1
..... 2
..... 3
..... 4
..... 5
..... 6
..... 7
..... 8
..... 9
Best health plan possible..... 10

DON'T KNOW d
REFUSED r
====>

>test k16l< **[IF CHILD HAD GE ONE PHYSICIAN VISIT(S) IN LAST 12 MONTHS (1 ≤ c 31 ≤ 96 or 1 ≤ c 32 ≤ 5), goto e16x; ELSE goto k40]**

See Appendices B and C for the names of the variables associated with the survey questions.

>e16x< Who went with [fill NAME] to the doctor on (his/her) most recent visit?

INTERVIEWER: CODE "you," IF RESPONDENT AND SPOUSE TOOK CHILD TO DOCTORS.

RESPONDENT 1 [goto k16]
[fill NAME] 2
[fill NAME] 3
[fill NAME] 4
NON-FAMILY MEMBER/NO ONE 0

DON'T KNOW d
REFUSED r
==> [goto k40]

IF PERSON ACCOMPANYING CHILD IS OTHER ADULT FAMILY MEMBER, ALL QUESTIONS ABOUT THAT CHILD'S LAST DOCTOR VISIT WILL BE ADDED TO THE OTHER ADULT FAMILY MEMBER'S SELF-RESPONSE MODULE. IF NON-FAMILY MEMBER ACCOMPANIED CHILD, WE WILL ONLY ASK FOR GENERAL HEALTH STATUS AND SCREEN FOR CHILDREN WITH SPECIAL NEEDS.

>k16< Since [fill DATE 12 MONTHS AGO], did [fill NAME] visit a doctor for care of sickness, injury, or other health problems?

PROBE: (1) Other health problems include follow up visits or check ups for chronic problems such as asthma, diabetes, etc.

(2) Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

YES 1 [goto k17]
NO 0

DON'T KNOW d
REFUSED r
==> [goto k20]

See Appendices B and C for the names of the variables associated with the survey questions.

>k17<

In what month and year was [fill NAME]'s **most recent** visit for sickness, injury, or other health problem?

JAN 1
FEB 2
MAR 3
APR 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d
REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2003)
==>

>k18<

Since that visit in MONTH, has [fill NAME] visited a doctor for a general check up, physical examination, [FEMALES OVER 12—gynecological check up] or other preventive care not related to a health problem?

PROBE: (1) Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

YES 1 [goto k19]
NO 0

DON'T KNOW d
REFUSED r
==> [goto test k22]

See Appendices B and C for the names of the variables associated with the survey questions.

>k19< In what month and year was [fill NAME]'s **most recent** visit for a check up or physical exam?

- JAN 1
- FEB 2
- MAR 3
- APR 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

- DON'T KNOW d
- REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2003)
==>

>test k19< **[VERIFY THAT MONTH IN k19 IS SAME MONTH OR AFTER MONTH IN k17; THEN goto test k22.]**

>k20< During the last 12 months, did [fill NAME] visit a doctor for a general check up, physical examination [FEMALES OVER 12—gynecological check up] or other preventive care not related to a health problem?

PROBE: (1) Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

- YES 1 [goto k21]
- NO 0 [goto k90]

- DON'T KNOW d
- REFUSED r
- ==> [goto k40]

See Appendices B and C for the names of the variables associated with the survey questions.

>k21<

In what month and year was [fill NAME]'s **most recent** visit?

JAN 1
FEB 2
MAR 3
APR 4
MAY 5
JUNE 6
JULY 7
AUG 8
SEPT 9
OCT 10
NOV 11
DEC 12

DON'T KNOW d
REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2003)
====> [goto test k22]

>k90<

Earlier I noted that [fill NAME] had [fill #] doctor visit(s) in the last 12 months. Is that correct or incorrect?

CORRECT: BACKUP TO OBTAIN LAST DOCTOR VISIT [jb kl6]

INCORRECT, NO DOCTOR VISITS IN PAST
12 MONTHS..... 1 [goto k40]
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>test k22< [IF CHILD HAD SICK AND WELL VISIT, SELECT MOST RECENT FOR k22. IF SAME MONTH FOR BOTH, FILL WELL VISIT IN k22]

>k22< Please think about [fill NAME]'s visit for [preventive care or a check up/care of sickness or injury] in [fill MONTH].

Was the doctor [fill NAME] saw a family doctor or pediatrician who treats a variety of illnesses and gives preventive care, or was he or she a specialist who mainly treats just one type of problem?

PROBE: Family doctors usually are in general or family practices or are pediatricians who treat a variety of illnesses and problems.

FAMILY DOCTOR/PEDIATRICIAN 1
SPECIALIST 2

DON'T KNOW d
REFUSED r
==>

>test k24< [IF CHILD HAS USC (d10... = 1), goto k24; ELSE goto K24a]

>k24< Was this visit to the place you **usually** take [fill NAME] when (he/she) is sick or you need advice about (his/her) health?

YES 1 [goto k25]
NO 0

DON'T KNOW d
REFUSED r
==>

>K24a< Was this visit to an emergency room?

YES 1 [goto k28]
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>k25< For this visit in [fill MONTH], did you have an appointment ahead of time or did you just walk in?

APPOINTMENT 1 [goto k26]
WALK IN 2

DON'T KNOW d
REFUSED r
====> [goto k28]

The following questions are numbered differently in CATI because the pairs of questions (amount and time period) appear on the same CATI screen and therefore must have the same basic variable name with different suffixes. This is true for variables k26@amt/per, k29@amt/per.

>k26< For this visit, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: CODE "0" FOR SAME DAY.

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

SAME DAY..... 0

|__|__| TIME [goto k27]
(0-30)

DON'T KNOW d
REFUSED r
====> [goto k28]

>k27< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS k26]

DAYS 1
WEEKS 2
MONTHS 3
====>

>TEST< VERIFY VALUES GREATER THAN 12 MONTHS

See Appendices B and C for the names of the variables associated with the survey questions.

>k28< How long did you have to wait in the waiting room before seeing a medical person for this visit in [fill MONTH]?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

|__|__| TIME [goto K28]
(1-240)

DON'T KNOW d
REFUSED r
====> [goto k29]

>K28< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS k28]

MINUTES 1
HOURS 2
====>

>TEST< VERIFY VALUES GREATER THAN 8 HOURS

>k29< For this visit, how long did it take you to get to the (doctor's office/emergency room)?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

|__|__| TIME [goto K29]
(1-90)

DON'T KNOW d
REFUSED r
====> [goto k30]

>K291< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS k291]

MINUTES 1
HOURS 2
====>

>TEST< VERIFY VALUES GREATER THAN 8 HOURS

See Appendices B and C for the names of the variables associated with the survey questions.

>k30< Still thinking about this visit in [MONTH], how would you rate the thoroughness and carefulness of the examination and treatment [fill CHILD] received? Would you say it was . . .

- poor,..... 1
 - fair,..... 2
 - good,..... 3
 - very good, or 4
 - excellent? 5
 - DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

 - DON'T KNOW d
 - REFUSED r
- ==>

>k31< How would you rate how well the doctor listened to you? Would you say it was . . .

- poor,..... 1
 - fair,..... 2
 - good,..... 3
 - very good, or 4
 - excellent? 5
 - DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

 - DON'T KNOW d
 - REFUSED r
- ==>

>k32< How would you rate how well the doctor explained things in a way you could understand? Would you say it was . . .

- poor,..... 1
 - fair,..... 2
 - good,..... 3
 - very good, or 4
 - excellent? 5
 - DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

 - DON'T KNOW d
 - REFUSED r
- ==>

See Appendices B and C for the names of the variables associated with the survey questions.

>k40< In general, would you say [fill NAME]'s health is . . .

excellent,	1
very good,	2
good,	3
fair, or	4
poor?	5
 DON'T KNOW	d
REFUSED	r

==>

SCREEN FOR CHILDREN WITH SPECIAL NEEDS (SOURCE: NATIONAL SURVEY OF CHILDREN WITH SPECIAL NEEDS)

>scsn1< Does [fill NAME] currently need or use medicine prescribed by a doctor (other than vitamins)?

YES	1	[goto scsn1a]
NO	0	
 DON'T KNOW	d	
REFUSED	r	

==> [goto scsn2]

>scsn1a< Is this because of ANY medical, behavioral, or other health condition?

YES	1	[goto scsn1b]
NO	0	
 DON'T KNOW	d	
REFUSED	r	

==> [goto scsn2]

>scsn1b< Is this a condition that has lasted or is expected to last for at least 12 months?

YES	1
NO	0
 DON'T KNOW	d
REFUSED	r

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>scsn2< Does [fill NAME] need or use more medical care, mental health or educational services than is usual for most children of the same age?

YES..... 1 [goto scsn2a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn3]

>scsn2a< Is this because of ANY medical, behavioral, or other health condition?

YES..... 1 [goto scsn2b]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn3]

>scsn2b< Is this a condition that has lasted or is expected to last for at least 12 months?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>scsn3< Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

YES..... 1 [goto scsn3a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn4]

>scsn3a< Is this because of ANY medical, behavioral, or other health condition?

YES..... 1 [goto scsn3b]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn4]

See Appendices B and C for the names of the variables associated with the survey questions.

>scsn3b< Is this a condition that has lasted or is expected to last for at least 12 months?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>scsn4< Does your child currently need or get special therapy such as physical, occupational, or speech therapy?

YES..... 1 [goto scsn4a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn5]

>scsn4a< Is this because of ANY medical, behavioral, or other health condition?

YES..... 1 [goto scsn4b]
NO 0

DON'T KNOW d
REFUSED r
====> [goto scsn5]

>scsn4b< Is this a condition that has lasted or is expected to last for at least 12 months?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>scsn5< Does your child have any kind of emotional, developmental or behavioral problem for which he or she needs or gets treatment or counseling?

YES..... 1 [goto scsn5a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test e801]

See Appendices B and C for the names of the variables associated with the survey questions.

>scsn5a< Is this because of ANY medical, behavioral, or other health condition?
YES.....1 [goto scsn5b]
NO0
DON'T KNOWd
REFUSED r
====> [goto test e801]

>scsn5b< Is this a condition that has lasted or is expected to last for at least 12 months?
YES.....1
NO0
DON'T KNOWd
REFUSED r
====>

>test e801< **[IF THERE ARE OTHER ADULTS (\geq 18) IN FAMILY BESIDES INFORMANT
goto e80t; ELSE goto f10]**

>e80t< Now, I have one question about the health of ([fill NAME]/other adults in your family). NOTE: SUBSTITUTE "Other adults in your family" IF TWO OR MORE OTHER ADULTS.

>e802< In general, would you say [fill NAME]'s health is . . .
excellent, 1
very good, 2
good, 3
fair, or 4
poor? 5
DON'T KNOW d
REFUSED r
====> [REPEAT FOR EACH ADULT; THEN goto f10]

f. EMPLOYMENT (ASKED FOR EACH ADULT 18 YEARS OF AGE AND OLDER)

>f10< This next series of questions is about jobs and earnings. Answers to these questions are particularly important to our survey because they help explain whether people can afford the health care they need.

====>

>f101< (Next), Do(es) [fill NAME] have a business or farm?

INTERVIEWER: CODE "YES" IF R. SAYS HE/SHE IS SELF-EMPLOYED.

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>f111< Last week, did [fill NAME] do any work (either) for pay (or profit)?¹⁹

INTERVIEWER: CODE "YES" IF R. WAS ON VACATION FROM HIS/HER JOB.

YES..... 1 [goto f121]
NO 0

DON'T KNOW d
REFUSED r
====> [goto NEXT PERSON or g10]

>f121< Last week did [fill NAME] have more than one job (or business), including part time, evening, or weekend work?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

¹⁹Include parenthetical phrases if f101=1.

See Appendices B and C for the names of the variables associated with the survey questions.

>f131<

ONE JOB (F121 = 0): How many hours per week (do you/do(es) [fill NAME]) usually work at this job?²⁰

MORE THAN ONE JOB (F121 ne 0): On (your [fill NAME]'s) main job, that is, the job where (he/she/you) work(s) the most hours, how many hours per week (do you/do(es) [fill NAME]) usually work?

PROBE: If (you/[fill NAME]) usually works overtime hours include them.

|__|__| HOURS WORKED
(0-96)

HOURS VARY97 [goto 13x1]

DON'T KNOWd

REFUSEDr

====> [goto test f141]

NOTE: Test will verify values less than 20 hours.

>13x1<

(Do you/Does [fill NAME]) usually work more than 35 hours per week or less than 35 hours per week (at this job/at the job where (he/she/you) work(s) the most hours)?

MORE1
LESS.....2

DON'T KNOWd

REFUSEDr

====>

²⁰Note shift from last week to usual week for hours and earnings.

See Appendices B and C for the names of the variables associated with the survey questions.

>testf141< [IF f121 eq <1> goto f141; ELSE goto f201]

>f141< How many hours per week (do you/do(es) [fill NAME]) usually work at (his/her/your) other jobs?

PROBE: If [fill NAME] worked overtime hours include them.

____|____| HOURS WORKED AT OTHER JOBS
(0-96)

HOURS VARY/CAN'T ESTIMATE 97

DON'T KNOW d

REFUSED r

==>

>f201< [On (his/her/your) main job], (is/are) ([fill NAME]/you) employed by a private company, is (is/are) (you/he/she) a federal, state, or local government employee, self-employed, or working without pay in a family business or farm?

INTERVIEWER: CODE NOT-FOR-PROFIT/FOUNDATION AS PRIVATE COMPANY.

NOTE: PARENTHETICAL PHRASE USED IF MORE THAN ONE JOB

PRIVATE COMPANY 1

FEDERAL GOVERNMENT 2

STATE GOVERNMENT 3

LOCAL GOVERNMENT 4

SELF-EMPLOYED 5

FAMILY BUSINESS OR FARM 6

DON'T KNOW d

REFUSED r

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>f211< [On (your/his/her) main job], about how many people are employed at the location where [fill NAME] work(s)?

PROBES: (1) How many people work for your employer in the building or buildings in the factory, store, or office complex where you work?

(2) Your best estimate is fine.

ONE	1
2-4.....	2
5-9.....	3
10-24.....	4
25-49.....	5
50-99.....	6
100-249.....	7
250-499.....	8
500-999.....	9
1000 OR MORE	10
DON'T KNOW	d
REFUSED.....	r

====>

>test f221< [IF f201 eq 2, 3, or 4 goto f241] TEST SKIPS f221 FOR GOVERNMENT EMPLOYEES.

>f221< [Does (your\his\her) employer/Do(es) fill NAME] operate in more than one location?

NOTE: Fill is for self-employed and farmers.

YES.....	1	[goto f231]
NO	0	
DON'T KNOW	d	
REFUSED.....	r	

====> [goto f241]

See Appendices B and C for the names of the variables associated with the survey questions.

>f231< About how many people are employed by ([fill NAME]/your employer) at all locations?

PROBE: Your best estimate is fine.

ONE 1
2-4..... 2
5-9..... 3
10-24..... 4
25-49..... 5
50-99..... 6
100-249..... 7
250-499..... 8
500-999..... 9
1000 OR MORE 10

DON'T KNOW d
REFUSED r
==>

>f241< What kind of business or industry is this?

PROBE: What do they make or do there?

SPECIFY 1

DON'T KNOW d
REFUSED r
==>

>f251< Are you a member of either a labor union or an employee association like a union? [SIPP, CNTRC]

YES 1 [goto f261]
NO 0

DON'T KNOW d
REFUSED r
==> [goto f301]

See Appendices B and C for the names of the variables associated with the survey questions.

>f261< Are you covered by a union or employee association contract? [SIPP, EMPLOC]

YES..... 1
NO 0

DON'T KNOW d
REFUSED r

====>

>f301< For (your/his/her) (main) job, what is the easiest way for you to report (his/her/your) total earnings: hourly, per week, every two weeks, twice a month, monthly, or annually?

PROBES: (1) I understand these questions may be sensitive. We are asking them to help understand differences in people's health care problems and needs.

(2) **INTERVIEWER: IF R. RESPONDS IN A NON-SPECIFIED PAY PERIOD, CONVERT TO MONTHLY OR ANNUAL.**

HOURLY 1
PER WEEK 2
BI-WEEKLY/EVERY TWO WEEKS 3
TWICE MONTHLY 4
MONTHLY 5
ANNUAL 6

DON'T KNOW d [goto f331]
REFUSED r [goto test f401]

====>

See Appendices B and C for the names of the variables associated with the survey questions.

>f321<

Hourly: What is [fill NAME]'s hourly rate of pay on this job?

Weekly, Monthly: What are [fill NAME]'s usual [fill f301 RATE] earnings on this job, before taxes or other deductions?

Bi-Weekly, Twice Monthly: What are [fill NAME]'s usual earnings per pay period on this job, before taxes or other deductions?

Annual: What is [fill NAME]'s annual salary in this job, before taxes and other deductions?

PROBES: (1) I understand that these questions may be sensitive. We are asking these questions to help understand differences in people's health care problems and needs.

(2) IF RESPONDENT ASKS: Include overtime pay, tips, or commissions that you usually receive on this job.

\$ |__|__|__|. |__|__| HOURLY
(3.00 to 300.00)

\$ |__|__|__|, |__|__|__| OTHER PAY PERIODS
(20-500,000)

DON'T KNOWd [goto f331]
REFUSED r [goto test f401]
===> [goto test f341]

>f331<

Which of the following ranges is closest to ([fill NAME's]/your) annual salary, before taxes and other deductions?—less than \$10,000, \$10,000 to \$14,000, \$14,000 to \$20,000, \$20,000 to \$30,000, or more than \$30,000?

LESS THAN \$10,000 1
\$10,000 - \$14,000 2
\$14,001 - \$20,000 3
\$20,001 - \$30,000 4
MORE THAN \$30,000 5

DON'T KNOWd
REFUSED r
===>

See Appendices B and C for the names of the variables associated with the survey questions.

>test f341< [TEST FOR OUTLIERS:]

HOURLY: LE 5.00; GE 100.00
WEEKLY: LE 50; GE 500.00
BI-WEEKLY: LE 100; GE 10,000
TWICE MONTHLY: LE 100; GE 10,000
MONTHLY: LE 200; GE 20,000
ANNUALLY: LE 3,000; GE 200,000]

>f341< I recorded that ([fill NAME's]/your) usual earnings on this job are

\$(INSERT f321] per [INSERT f301]. Is that correct?

YES..... 1 [goto test f401]
NO :jb f321
====>

>test f401< [IF PERSON IS POLICYHOLDER FOR EMPLOYER-BASED PLAN [PERSON LISTED IN b231 AND b251 = 1] AND HAS MORE THAN ONE JOB [f121=1], goto f401; ELSE goto test f50]

>f401< Is [fill PERSON NAME]'s health insurance with [fill INSURANCE PLAN NAME] from (his/her/your) main job or business?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====> goto next person or g10

>test f50< [IF PERSON IS NOT SELF-EMPLOYED (f201 = 1, 2, 3 or 4) AND IS NOT A POLICYHOLDER FOR AN EMPLOYER/UNION BASED PLAN (PERSON NOT LISTED IN b231, OR IF LISTED, b251 NE 1) AND IS LT 65 YEARS OLD, goto f501; ELSE goto NEXT PERSON OR g10]²¹ The questions for workers who decline own employer's coverage are **not asked of policyholders.**

²¹Skipped self-employed.

See Appendices B and C for the names of the variables associated with the survey questions.

>f501< Does (your/[fill NAME]'s) employer or union offer a health insurance plan to any of its employees?

INTERVIEWER: THIS QUESTION APPLIES TO [fill NAME's] LOCATION.

YES..... 1 [goto test f5011]
NO 0

DON'T KNOW d
REFUSED r
==> [goto test f611]

>TEST5011< [IF f261=1, goto f5011;else goto f511]

>f5011< Is the health insurance plan offered by [fill NAME]'s employer or union?

EMPLOYER 1
UNION 2
BOTH [FILL EMPLOYER IN FOLLOWING QUESTIONS].. 3

DON'T KNOW d [goto NEXT PERSON OR G10]
REFUSED r [goto test f611]

>f511< (Are you/Is [fill NAME]) eligible to participate in (his/her/your) employer's health insurance plan?

YES..... 1 [goto test f521]
NO 0 [goto f531]

DON'T KNOW d [goto test f611]
REFUSED r [goto test f611]
==>

>test f521< **[IF PERSON HAS INSURANCE COVERAGE UNDER AN EMPLOYER/UNION BASED PLAN (NAMED UNDER BIA OR BIC), goto f541; ELSE goto f521].**

See Appendices B and C for the names of the variables associated with the survey questions.

>f521< (Are you/Is [fill NAME]) not participating in (his/her/your) employer's health insurance plan because the plan costs too much, because (he/she/you) do(es) not need health insurance, or for some other reason? **CODE MAIN REASON**

COSTS TOO MUCH 1
DON'T NEED HEALTH INSURANCE..... 2
OTHER (SPECIFY) 3

DON'T KNOW d
REFUSED r
==> [goto f541]

>f531< (Are you/Is [fill NAME]) ineligible because (you/he/she) (have/has) not worked long enough, because (you/he/she) (don't/doesn't) work enough hours, because (you/he/she) (are/is) on-call, because of medical problems, or for some other reason?

CODE ONLY ONE

HAVEN'T WORKED LONG ENOUGH 1
DON'T WORK ENOUGH HOURS..... 2
ON-CALL 3
MEDICAL PROBLEM..... 4
OTHER [SPECIFY] 5

DON'T KNOW d
REFUSED r
==>

>f541< Does (your/[fill NAME]'s) employer offer only one health insurance plan or more than one health insurance plan to its employees?

ONE PLAN 1
MORE THAN ONE PLAN..... 2

DON'T KNOW d [goto test f611]
REFUSED r [goto test f611]
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>f551< Does (your/[fill NAME]'s) employer offer an HMO plan to its employees?

PROBE: With an HMO, you must generally receive care from HMO doctors; otherwise, the expense is not covered unless you were referred by the HMO or there was a medical emergency. [NHIS DEF].

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test 561< [IF f541 eq <2> AND f551 eq <1> goto f561; ELSE goto testf611]

>f561< And does (your/[fill NAME]'s) employer also offer a non-HMO health insurance plan to its employees?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

Next sequence is for employed workers offered health insurance by their employers but who are insured under another plan.

>test f611< [If not insured by own employer AND f511=1 AND (b1a=1 or b1c=1), goto f611, else next person or g10]

>f611< Does (your/[fill NAME's]) employer offer a health insurance plan where the premium is less than the amount (you're/she's/he's) paying for (your/his/her) current plan?

PROBE: The premium is the amount deducted from your paycheck.

YES..... 1 [goto f63a1]
NO 0 [goto f621]

DON'T KNOW d
REFUSED r
====> [goto next person or g10]

See Appendices B and C for the names of the variables associated with the survey questions.

>f621< Does (your/[fill NAME's]) employer offer a health insurance plan where the premium is about the same as the premium (you are/[fill NAME] is) paying for (your/his/her) current plan?

PROBE: The premium is the amount deducted from (your/his/her) paycheck.

YES..... 1 [goto f63a1]
NO 0

DON'T KNOW d
REFUSED r
==> [goto next person or g10]

>f63a1< If (you/[fill NAME]) changed to that plan, would (you/he/she) have to pay more, less, or about the same amount each time (you/he/she) saw a doctor?

MORE 1
LESS 2
ABOUT THE SAME 3

DON'T KNOW d
REFUSED r
==>

>f63b1< If you changed to that plan, would you have to pay more, less, or about the same amount each time you fill(ed) a prescription?

MORE 1
LESS 2
ABOUT THE SAME 3

DON'T KNOW d
REFUSED r
==>

[goto NEXT PERSON or g10]

FAMILY INCOME

>g10< The next questions are about income that (your family [insert names if multiple family household]) received during (2002). During (2002), what was your family's total income from all sources, before taxes and other deductions?

NOTE: CHANGE IN YEAR.

PROBES:

- (1) We are asking these questions to find out whether people can afford the health care they need.
- (2) Total income includes wages and salaries from jobs, net income from farms or businesses, interest or dividends, pensions or social security, income from rental property, estates, or trusts, public assistance or welfare, social security, child support, and other sources.
- (3) Your best estimate would be fine.
- (4) Include the (2002) income of all current family members, (including active military), even if you weren't living together then.

NONE.....0

\$ |__|__|__|,|__|__|__|
(10 - 999999)

\$1,000,000 OR MORE7

DON'T KNOWd [goto g11]

REFUSED r

==> [goto test g20]

See Appendices B and C for the names of the variables associated with the survey questions.

>g11< Which of the following income ranges is closest to your family's (2002) total income from all sources?

PROBE: Your best estimate would be fine.

- Less than \$5,000..... 1
 - \$5,000 to less than \$10,000 2
 - \$10,000 to less than \$20,000 3
 - \$20,000 to less than \$30,000 4
 - \$30,000 to less than \$40,000 5
 - \$40,000 to less than \$50,000 6
 - \$50,000 to less than \$100,000 7
 - Over \$100,000 8

 - DON'T KNOW d
 - REFUSED r
- ====>

>test g20< **[REPEAT g20-g221 FOR EACH PERSON; HOWEVER, SKIP FOR INFORMANT'S OWN CHILD OR GRANDCHILD.]**

>g20< (Do you/Does [fill NAME]) consider (yourself/himself/herself) to be of Hispanic origin, such as Mexican, Puerto Rican, Cuban, or other Spanish background?

PROBE FOR REFUSALS: I understand that these questions may be sensitive. We are asking these questions to help understand different health care problems and needs people have.

- YES..... 1
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>g22n1< I'm going to read you a list of five race categories. Please choose one or more races that (you/he/she) consider(s) (yourself/himself/herself) to be.

INTERVIEWER: READ ALL CATEGORIES. CODE UNLISTED, RESPONDENT-OFFERED CATEGORIES IN "OTHER."

PROBE IF RESPONDS "HISPANIC" OR "LATINO": Would that be White Hispanic/Latino, African American Hispanic/Latino, or something else?

INTERVIEWER: CODE ALL RACES

White..... 1
African American or Black 2
American Indian or Alaska Native..... 3
Asian 4
Native Hawaiian or Other Pacific Islander 5
OTHER [SPECIFY] 6

DON'T KNOW d
REFUSED r
====>

>g301< (Are you/Is he/Is she/Is [fill NAME]) a citizen of the United States?

YES..... 1 [goto g311]
NO 0

DON'T KNOW d
REFUSED r
====> [goto g321]

>g311< (Were you/Was he/Was she/Was [fill NAME]) born a citizen of the United States or did you become a citizen of the United States through naturalization?

BORN..... 1 [goto NEXT PERSON OR test g23]
NATURALIZED 2

DON'T KNOW d
REFUSED r
====> [goto g321]

See Appendices B and C for the names of the variables associated with the survey questions.

>g321< When did (you/[fill NAME]) come to live in the United States?

CODE YEAR OR NUMBER OF YEARS AGO

PROGRAMMER: CHECK THAT YEAR OR NUMBER OF YEARS AGO IS NOT BEFORE BIRTH

|_|_|_|_| YEAR

|_|_|_|_| NUMBER OF YEARS AGO
(0-AGE)

DON'T KNOWd

REFUSEDr

==>

>test g23< **[IF FAMILY HAS MORE THAN ONE ADULT, goto NEXT PERSON OR g23;
ELSE goto test h10]**

>g23< **INTERVIEWER: THERE WILL BE A SELF RESPONSE MODULE FOR THIS
CASE**

<g> CONTINUE

==>

See Appendices B and C for the names of the variables associated with the survey questions.

h. CLOSING (FIU)

>test h10< [IF DID NOT RECEIVE PRE-PAYMENT, goto h10; IF RECEIVED PRE-PAYMENT AND REINTERVIEW, goto h20; ELSE, goto h30]

>h10< As a token of our appreciation for your help, we would like to send you a check for (\$25). Could you please give me your and your full name and address?

READ AFTER NAME AND ADDRESS OBTAINED: Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

<Enter First Name>
<Enter Last Name>
<Enter Street Address>
<Enter City/State>
<Enter Zip Code>

DON'T KNOW
REFUSED
==>

>h20< [REINTERVIEW ONLY] Did you or any other persons living here have [fill PHONE NUMBER] as your phone number on [fill DATE OF LAST INTERVIEW]?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>h30< Not counting any cellular telephones, are there any other telephone numbers in this household besides [fill NUMBER] that people receive calls on?

PROBE: We need this information so that households are correctly represented in our sample.

PROBE: Please exclude telephone lines used only for computer modems or faxes.

IF YES: How many additional phone numbers do you have?

.....0 [goto h32]

|__| OTHER TELEPHONE NUMBERS
(1-4)

REFUSED r [goto end]
==>

>h31< (Is this/Are these) other phone numbers for . . .

home use, 1
business and home use, or 2
business use only? 3

DON'T KNOW d
REFUSED r
==>

>h32< During the past 12 months, was there any time when you did not have a working telephone in your household for two weeks or more?

YES 1 [goto h33]
NO 0

DON'T KNOW d
REFUSED r
==> [goto end]

>h33< For how many of the past 12 months did you not have a working telephone?

|__| |__| MONTHS
(0-12)

DON'T KNOW d [goto end]
REFUSED r [goto end]
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>h34< What was the main reason you did not have telephone services? [Keeter, POQ, Summer 1995, P. 203]

- COST 1
 - MOVED [COST NOT MENTIONED]..... 2
 - PERSONAL PREFERENCE 3
 - SERVICE NOT AVAILABLE 4

 - DON'T KNOW d
 - REFUSED r
- ====>

>test< **[IF NO SELF RESPONSE MODULE OR SECONDARY FAMILY, goto fin; ELSE goto next_person]**

>next_person< I also would like to speak briefly with [FILL NAMES]. I need to ask (him/her/them) a few questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$25 for helping us with the survey. Can I speak with [FILL NAMES] now?

#	NAME	RELATION	FAM	STATUS	SEX	AGE
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	1
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	2
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	3
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	4
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	5
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	6
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	7
	[fill NAME]	[RELATIONSHIP]	[Sex]	[AGE]	.....	8

====>

IF NECESSARY ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

SPEAKING TO RESPONDENT - ENTER NUMBER 1

- CALLBACK c [goto callback]
 - REFUSED r [goto refused]
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>test< **IF SELF RESPONSE MODULE, goto INTRODUCTION FOR SELF-RESPONSE
IF SECONDARY FAMILY, goto INTRODUCTION FOR SECONDARY FAMILY**

>next_person< [SELF RESPONSE MODULE I would like to speak with [fill NAME]. I need to ask (him/her) a few questions about (his/her/their) health and opinions. We also will send (him/her/each of them) \$25 for helping us with the survey. Can I speak with [FILL NAMES] now?

IF NECESSARY, ADD: I need to speak with (him/her/them) because we need to ask each adult in the household their opinions about their own health and health care.

LENGTH: For most people, the additional questions will take 10 to 15 minutes.

SPEAKING TO RESPONDENT – ENTER NUMBER 1

CALLBACK c ²²
LANGUAGE PROBLEM..... l

REFUSED r
SUPERVISOR REVIEW..... s

====>

<fin> Thank you again for your time and interest in this important survey.

This concludes the survey unless you have a brief comment you would like to add.

Comments [SPECIFY]..... c

Interview Complete..... g

====>

²²THESE QUESTION SEQUENCES ARE ONLY SHOWN IN THE CATI PROGRAM.

SELF RESPONSE MODULE

>slf1<

My name is _____. I am calling about the telephone survey that [fill NAME] participated in on [fill DATE OF INTERVIEW]. Most of the interview has already been completed by [fill NAME] I have a few questions about your health and opinions and about [fill NAME]'s last visit to the doctor. These questions will only take about 10 to 15 minutes. As a token of our appreciation, we will send you \$25 for helping us with the study.

IF NECESSARY READ PROBE: We are doing this study to see how managed care and other health care changes are affecting people in your community. We need to interview you as well as your wife because some of the questions ask for people's opinions about their own health and health care.

SPONSOR: The project is sponsored by a private foundation.

ENTER STATUS FOR [fill NAME]

WILL COMPLETE SELF RESPONSE SECTION 1

RESPONDENT WILL ACT AS PROXY FOR [fill NAME]

[fill NAME] IS CHRONICALLY ILL 2

[fill NAME] IS AWAY AT SCHOOL 3

[fill NAME] SPEAKS NEITHER ENGLISH

NOR SPANISH 4

[fill NAME] WON'T DO SELF-RESPONSE SECTION 5

==>

See Appendices B and C for the names of the variables associated with the survey questions.

>b93< In choosing among alternative health plans, some people have concerns that are especially important to them.

Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: I would be willing to accept a limited choice of physicians and hospitals if I could save money on my out-of-pocket costs for health care.²³

PROBE: CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
==>

>c81< Next, during the past 12 months, was there any time when you didn't get the medical care you needed?

INTERVIEWER: THIS QUESTION IS LIMITED TO MEDICAL CARE. DO NOT INCLUDE DENTAL CARE.

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

²³Source: Royal, Kenneth, et al., **The Gallup Arizona Health Care Poll**. P.18, The Gallup Organization, 1995. Distributions by coverage available.

See Appendices B and C for the names of the variables associated with the survey questions.

>c82< And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>test c83< [IF c81 EQ <1> OR <d> OR c82 EQ <1> OR <d> goto c83; ELSE goto c84]

>c83< Did you not get the medical care you needed or have delays in getting the medical care you needed for any of the following reasons?

CODE ALL THAT APPLY

Worry about the cost 1
The doctor or hospital wouldn't accept your
health insurance..... 2
Your health plan wouldn't pay for the treatment..... 3
You couldn't get an appointment soon enough..... 4
You couldn't get there when the doctor's office or
clinic was open 5
It takes too long to get to the doctor's office or clinic
from your house or work..... 6
You couldn't get through on the telephone 7
You were too busy with work or other commitments
to take the time..... 8
You didn't think the problem was serious enough..... 9
Or any other reason I haven't
mentioned [SPECIFY] 0

NONE CITED/NO OTHER RESPONSES..... n
NEED TO DELETE A RESPONSE x

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>test< If didn't get care when needed use "didn't get" version of fill (c81 eq 1 and c82 ne 1)
If postponed care when needed use "postponed" version of fill (c81 ne 1 and c82 eq 1)
If both didn't get and postponed use "didn't get" version of fill (c81 eq 1 and c82 eq 1)

>unmet1< [SELF RESPONSE] What was the most recent health problem for which you (didn't get/put off getting) medical care?

RECORD VERBATIM

DON'T KNOW d
REFUSED r
====>

>unmet< During the past 12 months, did you see a doctor to treat this problem?

YES 1 [goto testunmet2a]
NO 0
DON'T KNOW d
REFUSED r
====> [goto c84]

>testunmet2a< If didn't get care (c81 eq 1) goto unmet3

>unmet2a< Did you put off seeing a doctor to treat this problem?

INTERVIEWER NOTE: PROBLEM WAS (fill unmet1)

YES 1 [goto unmet3]
NO 0
DON'T KNOW d
REFUSED r
====> [goto c84]

See Appendices B and C for the names of the variables associated with the survey questions.

>unmet3< During the past 12 months, were you referred to a specialist to treat this problem?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.

INTERVIEWER NOTE: PROBLEM WAS (fill unmet1)

YES..... 1 [goto unmet3a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto unmet4]

>unmet3a< Did you see the specialist (IF DELAYED CARE: when the doctor referred you or did you put off seeing the specialist)?

YES—SAW WHEN REFERRED 1
NO—DIDN'T SEE SPECIALIST
(PUT OFF SEEING) 0

DON'T KNOW d
REFUSED r
====>

>unmet4< During the past 12 months, did a doctor order or recommend medical tests to treat this problem?

PROBE: Medical tests may include blood work, PET SCANS, MRIs, etc.

YES..... 1 [goto unmet4a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto unmet5]

See Appendices B and C for the names of the variables associated with the survey questions.

>unmet4a< Did you get the tests (IF DELAYED CARE: when the doctor ordered them or did you put off getting the tests)?

YES—GOT TESTS WHEN ORDERED 1
NO—DIDN'T GET WHEN ORDERED
(PUT OFF GETTING TESTS) 0

DON'T KNOW d
REFUSED r
====>

>unmet5< During the past 12 months, did a doctor order or recommend any medical procedures, including surgery, to treat this problem?

YES 1 [goto unmet5a]
NO 0

DON'T KNOW d
REFUSED r
====> [goto c84]

>unmet5a< Did you get the procedure or surgery (IF DELAYED CARE: when the doctor ordered it or did you put off getting the procedure or surgery)?

YES—GOT PROCEDURE OR SURGERY 1
NO—DIDN'T HAVE (PUT OFF
HAVING PROCEDURE OR SURGERY) 0

DON'T KNOW d
REFUSED r
====>

>c84< During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?

YES 1
NO 0

DON'T KNOW d
REFUSED r

See Appendices B and C for the names of the variables associated with the survey questions.

>d3i< Please think about the doctor you usually see when you are sick or need advice about your health. For each of the following statements, tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree.

[NOTE: NEITHER AGREE NOR DISAGREE IS CODED AS SCALE MIDPOINT BUT IS NOT READ].²⁴

ROTATE d31...d34.

>d31< I think my doctor may not refer me to a specialist when needed.

REPEAT IF NECESSARY: Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

INTERVIEWER: (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
===>

²⁴The next four questions (d31...d34) concerning patient's trust in their physicians were selected from an instrument developed by Dr. Paul Cleary of Harvard University.

>d32<

I trust my doctor to put my medical needs above all other considerations when treating my medical problems.

REPEAT IF NECESSARY: Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

INTERVIEWER: (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
====>

>d33<

I think my doctor is strongly influenced by health insurance company rules when making decisions about my medical care.

REPEAT IF NECESSARY: Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

INTERVIEWER: (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
====>

>d34< I sometimes think that my doctor might perform unnecessary tests or procedures.

REPEAT IF NECESSARY: Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement . . .

INTERVIEWER: (1) CODE "7" IF R. SAYS THE STATEMENT DOES NOT APPLY.

(2) IF RESPONDENT IS CONFUSED OR HAS DIFFICULTY RESPONDING, RE-READ QUESTION; IF R. IS STILL CONFUSED OR UNCERTAIN AFTER YOU RE-READ QUESTION, CODE "d".

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5
NOT APPLICABLE 7

DON'T KNOW d
REFUSED r
====>

>d35< Next, I am going to read some statements about health and medical care. Usually, you go to the doctor as soon as you start to feel bad. Is that . . .

definitely true, 1
mostly true, 2
mostly false, or 3
definitely false? 4

DON'T KNOW d
REFUSED r
====>

>d36< You will do just about anything to avoid going to the doctor. Is that . . .

definitely true, 1
mostly true, 2
mostly false, or 3
definitely false? 4

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>e12< Now I would like to ask you about satisfaction with your choice of doctors.

First primary care doctors, such as family doctors, [pediatricians,]²⁵ or general practitioners, who treat a variety of illnesses and give preventive care.

Are you satisfied or dissatisfied with the **choice** you personally have for primary care doctors?

PROBE: Most people go to a primary care doctor first when they have a sickness or injury they have not had before.

SATISFIED..... 1 [goto e13]
DISSATISFIED..... 2 [goto e13]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto e14]

>e13< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>e14< During the past 12 months, have you personally needed or seen a specialist?

PROBE: Specialists include such doctors as surgeons, allergists, (obstetricians,) (gynecologists,) orthopedists, cardiologists, and dermatologists? Specialists mainly treat just one type of problem.

YES..... 1 [goto cahps121]
NO 0

DON'T KNOW d
REFUSED r
====> [goto test e15a]

²⁵Exclude for adults.

See Appendices B and C for the names of the variables associated with the survey questions.

>cahps121< In the last 12 months, did (you/[fill NAME]) see a specialist?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>e15< Are you satisfied or dissatisfied with the **choice** you have for specialists?

SATISFIED..... 1 [goto test E15a]
DISSATISFIED..... 2 [goto test E15a]
NEITHER SATISFIED NOR DISSATISFIED 3

DON'T KNOW d
REFUSED r
====> [goto test e15a]

>E15a< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

>test e15a< IF DOCTOR VISIT IN LAST 12 MONTHS—c312 OR c322 ge 1, goto CAHPSLANG

>CAHPSLANG< In the last 12 months, how often did you have a hard time speaking with or understanding a doctor or other health providers because you spoke different languages? Never, sometimes, usually or always?

NEVER..... 1
SOMETIMES..... 2
USUALLY 3
ALWAYS 4

DON'T KNOW d
REFUSED r
====>

>test for uninsured< IF R. IS UNINSURED, goto TEST e16, WHICH BEGINS VISIT SEQUENCE; ELSE goto cah_intro

See Appendices B and C for the names of the variables associated with the survey questions.

>cah_intro< The next questions are about your experiences with (your health plan/[fill NAME OF HEALTH PLAN]).

====>

>testCAHPS10< **IF PERSON HAD A DOCTOR VISIT AND NEEDED TO SEE A SPECIALIST, goto CAHPS101; ELSE, IF PERSON HAD A DOCTOR VISIT BUT DIDN'T NEED TO SEE A SPECIALIST, goto CAHPS23S1; ELSE goto CAHPS37S1**

>CAHPS101< In the last 12 months, how much of a problem, if any, was it to get a referral to a specialist that you needed to see? Would you say that it was . . .

- a big problem, 1
 - a small problem, or 2
 - not a problem? 3
 - I didn't need to see a specialist
in the last 12 months 4

 - DON'T KNOW d
 - REFUSED r
- ====>

>CAHPS23S1< In the last 12 months, did you need approval from [fill NAME OF HEALTH PLAN] for any care, tests, or treatment?

- YES 1 [goto CAHPS231]
 - NO 0

 - DON'T KNOW d
 - REFUSED r
- ====> [goto CAHPS37S1]

>CAHPS231< In the last 12 months, how much of a problem, if any, were delays in health care while you waited for approval from (your health plan/[fill HEALTH PLAN])? Would you say that it was . . .

- a big problem, 1
 - a small problem, or 2
 - not a problem? 3
 - NO VISITS IN LAST 12 MONTHS 4

 - DON'T KNOW d
 - REFUSED r
- ====>

See Appendices B and C for the names of the variables associated with the survey questions.

>CAHPS37S1< In the last 12 months, did you have to fill out any paperwork for (your health plan/[fill HEALTH PLAN])?

YES..... 1 [goto CAHPS371]
NO 0

DON'T KNOW d
REFUSED r
====> [goto SP14]

>CAHPS371< In the last 12 months, how much of a problem, if any, did you have with paperwork for (your health plan/[fill HEALTH PLAN])? Would you say that it was . . .

PROBE: Paperwork means things like getting your ID card, having your records changed, processing forms, or other paperwork related to getting care.

a big problem, 1
a small problem, or 2
not a problem? 3
I didn't have any experience with paperwork
for [fill NAME OF HEALTH PLAN] in the last
12 months 4

DON'T KNOW d
REFUSED r
====>

>SP14< Given (your health plan/[fill HEALTH PLAN]'s) benefits, are you satisfied or dissatisfied with the amount you pay for health care?

SATISFIED..... 1 [goto SP14X1]
DISSATISFIED..... 2 [goto SP14X1]
NO AMOUNT PAID n

DON'T KNOW d
REFUSED r
====> [goto CAHPS381]

>SP14X1< Would that be very (dis)satisfied or somewhat (dis)satisfied?

VERY 1
SOMEWHAT 2

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>CAHPS381< We want to know your rating of all your experience with (your health plan/[fill HEALTH PLAN]).

Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your health plan now?

Worst health plan possible 0
..... 1
..... 2
..... 3
..... 4
..... 5
..... 6
..... 7
..... 8
..... 9
Best health plan possible..... 10

DON'T KNOW d
REFUSED r
====>

>test e16< **[IF PERSON HAS HAD PHYSICIAN VISITS IN LAST 12 MONTHS (1 <= c31 <= 96 OR 1 <= c32 <= 5), goto e16; ELSE goto test e40]**

>e16< Since [fill DATE 12 MONTHS AGO], did you visit a doctor for care of sickness, injury, or other health problems?

PROBE: (1) Other health problems include follow up or check up visits for chronic problems, such as asthma, diabetes, hypertension, heart conditions, etc.

(2) Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists, or other providers who are not medical doctors.

YES..... 1 [goto e17]
NO 0

DON'T KNOW d
REFUSED r
====> [goto e20]

See Appendices B and C for the names of the variables associated with the survey questions.

>e17<

In what month and year was your **most recent** visit for sickness, injury or other health problem?

- JAN 1
- FEB 2
- MAR 3
- APR 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

- DON'T KNOW d
- REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2003)
==>

>e18<

Since that visit in [fill MONTH], did you visit a doctor for a general check-up, physical examination, [gynecological [or pregnancy] check-up,] or other preventive care not related to a specific health problem?

PROBE: Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists or other providers who are not medical doctors.

- YES 1 [goto e19]
- NO 0

- DON'T KNOW d
- REFUSED r
- ==> [goto test e22]

See Appendices B and C for the names of the variables associated with the survey questions.

>e19< In what month and year was [fill NAME]'s **most recent** visit for a check up or physical exam?

- JAN 1
- FEB 2
- MAR 3
- APR 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

- DON'T KNOW d
- REFUSED r

|_|_| MONTH

|_|_|_|_| YEAR
(1999 - 2003)
==>

>test e19< **[VERIFY THAT MONTH IN e19 IS SAME MONTH OR FOLLOWS e17; THEN goto test e22]**

>e20< During the last 12 months, did you visit a doctor for a general check-up, physical examination, [gynecological [or pregnancy] check-up,] or other preventive care not related to a specific health problem?

PROBE: Do not include visits to physicians' assistants, nurse practitioners, alternative medicine specialists or other providers who are not medical doctors.

- YES 1 [goto e21]
- NO 0 [goto e90]

DON'T KNOW d
REFUSED r
==> [goto e40]

See Appendices B and C for the names of the variables associated with the survey questions.

>e21<

In what month and year was [fill NAME]'s **most recent** visit?

- JAN 1
- FEB 2
- MAR 3
- APR 4
- MAY 5
- JUNE 6
- JULY 7
- AUG 8
- SEPT 9
- OCT 10
- NOV 11
- DEC 12

- DON'T KNOW d
- REFUSED r

|__|__| MONTH

|__|__|__|__| YEAR
(1999 - 2003)
====> [goto test e22]

>e90<

Earlier I noted that you had [fill # IN c312 or c322] doctor visit(s) in the last 12 months. Is that correct?

CORRECT: [jb e16 TO OBTAIN LAST DOCTOR VISIT]

- INCORRECT 1
- ====>

>e91<

Since [fill DATE], about how many times [have/has] [fill NAME] seen a doctor? Do not count doctors seen while an overnight patient in a hospital or emergency room.

PROBES: (1) Include osteopathic doctors and psychiatrist, (2) Include outpatient visits. (3) Exclude dentist visits,, chiropractor visits, and telephone calls to doctors. (4) Your best estimate is fine

- NONE 0

|__|__| VISITS [goto e16]
(1-96)

- DON'T KNOW d
- REFUSED r
- ====> [goto e40, SF12]

See Appendices B and C for the names of the variables associated with the survey questions.

>test e22< [IF PERSON HAD WELL AND SICK VISIT (e16=1 and e18=1), SELECT MOST RECENT FOR e22. IF SAME MONTH FOR BOTH, FILL WELL VISIT SINCE IT WAS MORE RECENT]

>e22< Please think about your visit for [preventive care or a check-up/care of sickness, injury, or other health problem] in [fill MONTH].

Was the doctor you saw a family doctor, who treats a variety of illnesses and gives preventive care, or was he or she a specialist who mainly treats just one type of problem?

PROBE: Family doctors usually are in general or family practices or are internists or pediatricians who treat a variety of illnesses and problems.

FAMILY DOCTOR..... 1
SPECIALIST, INCLUDING OB/GYN 2

DON'T KNOW d
REFUSED r
==>

>test e24< [IF PERSON HAS USC (d102=1) goto e24; ELSE goto e24a]

>e24< Was this visit in [fill MONTH] to the place you USUALLY go to when you are sick or need advice about your health?

YES..... 1 [goto e25]
NO 0

DON'T KNOW d
REFUSED r
==>

>e24a< Was this visit to an emergency room?

YES..... 1 [goto e282]
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>e25< For this visit in [fill MONTH], did you have an appointment ahead of time or did you just walk in?

APPOINTMENT 1 [goto e262]
WALK IN 2

DON'T KNOW d
REFUSED r
====> [goto e282]

The following questions are numbered differently in CATI because the pairs of questions (amount and time period) appear on the same CATI screen and therefore must have the same basic variable name with different suffixes. This is true for variables e262@amt/per, e282@amt/per, and e292@amt/per.

>e262< For this visit, how long did you have to wait between the time you made the appointment and the day you actually saw the doctor?

INTERVIEWER: (1) CODE "0" FOR SAME DAY

(2) ACCEPT MOST CONVENIENT TIME PERIOD.

SAME DAY..... 0

|__|__| TIME [goto e272]
(1-30)

DON'T KNOW d
REFUSED r
====> [goto e282]

>e272< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e262].

DAYS 1
WEEKS 2
MONTHS 3
====>

>TEST< VERIFY VALUES GREATER THAN 12 MONTHS

See Appendices B and C for the names of the variables associated with the survey questions.

>e282< How long did you have to wait in the waiting room before seeing a medical person for this visit in [fill MONTH]?

|__|__|__| TIME [goto E282]
(1-240)

DON'T KNOW d
REFUSED r
==> [goto e292]

>E282< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e282]

MINUTES 1
HOURS 2
==>

>TEST< VERIFY VALUES GREATER THAN 8 HOURS

>e292< For this visit, how long did it take you to get to the [doctor's office/emergency room]?

INTERVIEWER: ACCEPT MOST CONVENIENT TIME PERIOD.

|__|__| TIME [goto E292]
(1-90)

DON'T KNOW d
REFUSED r
==> [goto e30]

>E292< ENTER TIME PERIOD. [DISPLAY ON SAME SCREEN AS e292]

MINUTES 1
HOURS 2
==>

>TEST< VERIFY VALUES GREATER THAN 8 HOURS

See Appendices B and C for the names of the variables associated with the survey questions.

>e30< Still thinking about this visit in [fill MONTH], how would you rate the thoroughness and carefulness of the examination and treatment you received?

Would you say it was . . .

poor,..... 1
fair,..... 2
good,..... 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

DON'T KNOW d
REFUSED r
==>

>e31< How would you rate how well your doctor listened to you? Would you say it was . . .

poor,..... 1
fair,..... 2
good,..... 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

DON'T KNOW d
REFUSED r
==>

>e32< How would you rate how well the doctor explained things in a way you could understand?

Would you say it was . . .

poor,..... 1
fair,..... 2
good,..... 3
very good, or 4
excellent? 5
DOES NOT APPLY
(NOT EXAMINED OR TREATED)..... 7

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>test e33< IF UNINSURED, goto e33, ELSE goto e40

>e33< How much did the physician charge for this visit? Was it free, less than \$20, \$20 to \$50, more than \$50 but less than \$100, or \$100 or more?

FREE 1 [goto e40]
LESS THAN \$20 2 [goto e40]
\$20 TO \$50 3
MORE THAN \$50 BUT LESS THAN \$100 4
\$100 OR MORE 5

DON'T KNOW d [goto e40]
REFUSED r [goto e40]
====>

>e34< How did you pay for this visit? Did you . . .

pay the entire bill when you received the care, 1
pay the entire bill at a later time, 2
pay a little at a time, but pay the entire bill, 3
pay some but not all of the bill, or 4
not pay the bill at all? 5

DON'T KNOW d
REFUSED r
====>

>e40< Now, I have a few questions about your health.

In general, would you say your health is . . .

excellent, 1
very good, 2
good, 3
fair, or 4
poor? 5

DON'T KNOW d
REFUSED r
====>

NOTE e41 to e48 DELETED IN ROUND 4

>e4i< The next questions are about how you feel and how things have been with you during the past 4 weeks. As I read each question, please give the one answer that comes closest to the way you have been feeling; is it all of the time, most, some, a little, or none of the time?

HIT ENTER TO CONTINUE ===>

>e49< How much of the time during the past 4 weeks have you felt calm and peaceful?

REPEAT CATEGORIES SLOWLY

- All of the time, 1
 - Most, 2
 - Some, 3
 - A little, or 4
 - None of the time 5

 - DON'T KNOW d
 - REFUSED r
- ===>

NOTE e50 DELETED IN ROUND 4

>e51< How much of the time during the past 4 weeks have you felt downhearted and blue?

READ CATEGORIES SLOWLY

- All of the time, 1
 - Most, 2
 - Some, 3
 - A little, or 4
 - None of the time 5

 - DON'T KNOW d
 - REFUSED r
- ===>

See Appendices B and C for the names of the variables associated with the survey questions.

>GSS1572< Taken all together, how would you say things are these days? Would you say that you are very happy, pretty happy, or not too happy?

VERY HAPPY 1
PRETTY HAPPY 2
NOT TOO HAPPY 3

DON'T KNOW d
REFUSED r
====>

>n1a< **[IF FEMALE AND AGE 50 OR UNDER]**

The next questions are about your health during the past two years. During the past two years, have you had a baby?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

>nn2c< **[IF FEMALE]** During the past two years, have you seen a doctor or health care professional for abnormal uterine bleeding?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

>nn3b< Has a doctor or health professional ever told you that you had diabetes or high blood sugar?

YES 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for diabetes or high blood sugar?

See Appendices B and C for the names of the variables associated with the survey questions.

>nn3c< Has a doctor or health professional ever told you that you had arthritis?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for arthritis?

>nn3d< Has a doctor or health professional ever told you that you had asthma?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for asthma?
[goto nn3g]

>nn3e< Has a doctor or health professional ever told you that you had chronic obstructive pulmonary disease?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for chronic obstructive pulmonary disease?

>nn3g< Has a doctor or health professional ever told you that you had hypertension or high blood pressure?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for hypertension or high blood pressure?

>nn3i< Has a doctor or health professional ever told you that you had coronary heart disease (INCLUDES ANGINA, ATRIAL FIBRILLATION, CONGESTIVE HEART FAILURE, BYPASS SURGERY, ANGIOPLASTY, HEART DISEASE, MI)?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for coronary heart disease?

>nn5c< Has a doctor or health professional ever told you that you had skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for skin cancer?

See Appendices B and C for the names of the variables associated with the survey questions.

>nn5h< Has a doctor or health professional ever told you that you had cancer other than skin cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for that cancer?

>n5f4< **IF FEMALE OR MALE AGE 50 OR UNDER, goto nn6e. IF MALE, AGE OVER 50:** Has a doctor or health professional ever told you that you had benign prostate disease or a large prostate that was not prostate cancer?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health professional for benign prostate disease?

>nn6e< Has a doctor or health professional ever told you that you had depression?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

IF YES: During the past two years, have you seen a doctor or other health care professional for depression?

See Appendices B and C for the names of the variables associated with the survey questions.

>nn7<

During the past two years, have you seen a doctor or other health care professional for any serious medical problem, that is one that limits your ability to do your usual activities?

YES..... 1

NO 0

DON'T KNOW d

REFUSED r

==>

SRM RESPONDENT SELECTION

>testsrn<

IF UNINSURED goto SRM1, IF AGE GE 65 goto SRM1. ELSE RANDOMLY SELECT 1/6 OF REMAINING TO goto SRM1; ELSE goto e52.

See Appendices B and C for the names of the variables associated with the survey questions.

>srml1< Next, I am going to ask you whether you have had some particular health problems in the last 3 months. In the past 3 months, have you had . . .

PROGRAMMER NOTE: ROTATE SEQUENCE

INTERVIEWER NOTE: IF R. CAN'T RECALL WHETHER IT LASTED MORE THAN A MINUTE CODE DON'T KNOW

	YES	NO	DON'T KNOW	REFUSED
a. Back pain or neck pain that made it very painful to walk a block or go up a flight of stairs?	1	0	d	r
b. Shortness of breath when lying down, waking up, or with light work or light exercise?	1	0	d	r
c. Loss of consciousness or fainting?	1	0	d	r
d. Unusually blurry vision or difficulty seeing?	1	0	d	r
e. Headaches that are either new or more frequent or severe than ones you have had before?	1	0	d	r
f. Cough with yellow sputum (spew-tum) and fever?	1	0	d	r
h. Sadness, hopelessness, frequent crying, or felt depressed?	1	0	d	r
i. Anxiety, nervousness, or fear that has kept you from doing the usual amount of work or social activities?	1	0	d	r
j. Pain in the hip, knee, or leg that makes it difficult to walk a block or go up a flight of stairs?	1	0	d	r
k. A sprained ankle that is too painful to bear weight?	1	0	d	r
m. Fatigue, extreme tiredness, or generalized weakness?	1	0	d	r
q. FEMALE: A lump or mass in the breast? .	1	0	d	r
u. MALE, AGE 40 OR OLDER: A great deal of difficulty starting urination or passing urine?	1	0	d	r
v. Difficulty hearing conversations or telephone calls?	1	0	d	r
w. Chest pain that lasted more than a minute?	1	0	d	r

Symptom Response Index: Symptom Selection

Note: *Serious symptoms* are a to e, q, w
Morbid symptoms are f, h to k, m, u, v

Select symptoms in the following order:

3. Select one *serious symptom* (if any) at random for the respondent.
4. If the respondent had no *serious symptoms*, select one *morbid symptom* at random (if any).

>srm2< (Now/Next) I have a question about [fill SYMPTOM].
Did this problem first appear in the past three months or before that?

APPEARED IN PAST 3 MONTHS..... 1 [goto srm2a]
BEFORE THAT 2

DON'T KNOW d
REFUSED r
==>

>test srm2< IF BEFORE 3 MONTHS, RETURN TO SYMPTOM LIST AND SELECT
ANOTHER SYMPTOM FOLLOWING LOGIC ABOVE.
IF NO MORE SYMPTOMS, goto e52

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED

>srm2a< Did you first have this problem within the last week or before that?

APPEARED IN LAST WEEK..... 1 [goto srm2c]
BEFORE THAT 2

DON'T KNOW d
REFUSED r
==>

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED

>srm2b< Did you first have this problem within the past 4 weeks?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
==>

DISPLAY SYMPTOM FOR INTERVIEWER REFERENCE AS NEEDED

>sr2c< [IF FEMALE LE 45]: Was this problem associated with a pregnancy?

YES.....1
NO0

DON'T KNOWd
REFUSEDr
==>

>sr3< Have you seen a doctor or other health professional about this problem?

YES.....1 [goto sr4]
NO0

DON'T KNOWd
REFUSEDr
==> [goto sr5]

>sr4< How soon did you see a doctor or other health professional about this problem after it started? Was it the same or next day, within a few days, within a week or two, or after a couple of weeks?

SAME OR NEXT DAY1
WITHIN A FEW DAYS2
WITHIN A WEEK OR TWO3
AFTER A COUPLE OF WEEKS.....4

DON'T KNOWd
REFUSEDr
==> [goto sr8]

>sr5< During the past three months, have you talked on the telephone to a doctor or other health professional about this problem?

YES.....1 [goto sr6]
NO0

DON'T KNOWd
REFUSEDr
==> [goto sr7b]

See Appendices B and C for the names of the variables associated with the survey questions.

>sr6< How soon did you telephone a doctor or other health professional about this problem after it started? Was it the same or next day, within a few days, within a week or two, or after a couple of weeks?

SAME OR NEXT DAY 1
WITHIN A FEW DAYS 2
WITHIN A WEEK OR TWO 3
AFTER A COUPLE OF WEEKS 4

DON'T KNOW d
REFUSED r
==>

>sr7a< At any time in the past three months, did you think that you needed to see a doctor or other health professional for treatment of this problem, rather than just talk to someone on the telephone?

YES 1
NO 0

DON'T KNOW d
REFUSED r
==> [goto sr8]

>sr7b< At any time in the past three months, did you think that you needed to contact a doctor or other health professional about this problem?

YES 1 [goto sr7c]
NO 0

DON'T KNOW d
REFUSED r
==> [goto sr8]

>sr7c< Did you actually *try* to see a doctor or other health professional about this problem?

YES 1
NO 0

DON'T KNOW d
REFUSED r
==>

See Appendices B and C for the names of the variables associated with the survey questions.

>sr8< Did this problem limit your ability to do any of your usual activities?
YES..... 1 [goto sr8a]
NO 0
DON'T KNOW d
REFUSED r
====> [goto e52]

>sr8a< For how many days were you limited in your ability to do any of your usual activities?

INTERVIEWER: IF LESS THAN ONE DAY, ENTER 1.

|__|__| DAYS
(1-90)

DON'T KNOW d
REFUSED r
====>

>sr9< (Modified NHIS AHS.040) As a result of this problem, did you miss work at a job or business?

YES..... 1 [goto sr9a]
NO 0 [goto sr10]
NA—DOES NOT WORK..... n
DON'T KNOW d
REFUSED r
====> [goto e52]

>sr9a< How many days of work did you miss?

|__|__| DAYS
(1-30)

DON'T KNOW d
REFUSED r
====>

>srn10< Do you have paid sick leave as a benefit at your job?

YES..... 1
NO 0

DON'T KNOW d
REFUSED r
====>

>e52< Now, please tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement. I'm more likely to take risks than the average person.

INTERVIEWER: (1) NEITHER AGREE NOR DISAGREE IS NOT READ, BUT IS CODED IF OFFERED

(2) **PROBE BY ASKING:** In general, . . .
OR: Whatever you think of as risks . . .

STRONGLY AGREE 1
SOMEWHAT AGREE 2
NEITHER AGREE NOR DISAGREE 3
SOMEWHAT DISAGREE 4
STRONGLY DISAGREE 5

DON'T KNOW d
REFUSED r
====>

>e60< These next questions are about cigarette smoking. Have you smoked at least 100 cigarettes in your entire life?

YES..... 1 [goto test e61]
NO 0

DON'T KNOW
REFUSED r
====> [goto BRFSS10]

>e61< Do you now smoke cigarettes every day, some days or not at all?

EVERYDAY..... 1
SOME DAYS..... 2
NOT AT ALL..... 3

DON'T KNOW d
REFUSED r
====>

See Appendices B and C for the names of the variables associated with the survey questions.

>BRFSS10< (BRFSS12.10) About how much do you weigh without shoes?

INTERVIEWER NOTE: ROUND UP FRACTIONS

<80 - 500> POUNDS

DON'T KNOW d

REFUSED r

====>

>BRFSS11< (BRFSS12.11) About how tall are you without shoes?

INTERVIEWER NOTE: ROUND DOWN FRACTIONS

<3-7> FEET

AND/OR

<1-11> INCHES

DON'T KNOW d

REFUSED r

====>

>test e16c< **[IF THIS PERSON ACCOMPANIED CHILD ON LAST VISIT INCLUDE CHILD'S LAST VISIT QUESTIONS] [k16-scsn5b]**

>h10< As a token of our appreciation for your help, we would like to send you a check for \$25. Could you please give me your full name and address?

PROBE: Your name and address are confidential and will only be used if we call you for another interview.

READ AFTER NAME AND ADDRESS OBTAINED: Your name and address are confidential and will only be used if we call you for another interview. You should receive your check in about 4 weeks.

YES 1

NO 0

DON'T KNOW d

REFUSED r

====>

Appendix B

Overview of the CTS Household Survey Interview

An Overview of the CTS Household Survey Interview

This appendix provides an outline of the content and general flow of the CTS 2003 Household Survey. It also includes information on the respondent for each part of the interview and the name of the variable corresponding to each survey question. For simplicity, the self-response module (SRM) is not represented separately here, although questions that appear in the SRM are noted. Users can refer to the complete version of the survey instrument in Appendix A for the exact text of the survey questions and the response categories, as well as the complete version of the SRM.

The respondents for each question vary depending on whether the question was applicable and whether the respondent was able to answer the question. This overview uses a system of indentation and underlined text to indicate the respondents for each survey question. The basic system is that the underlined text describes the sample and indentation indicates that the description should be interpreted as a subgroup of the unindented (or less indented) underlined text. Here is some more detail about how the system works:

1. If the question number is not indented at all, it means that the sample is the group described by the underlined text that most directly precedes the question and is also not indented. (See Example #1.)
2. If the question number is indented, it means that the sample is the group described by the underlined text that most directly precedes the question at the same indentation level, *as a subgroup of* the samples described by the underlined text that directly precedes it at lesser levels of indentation. (See Example #1.)
3. There are a few special cases in which, for cosmetic reasons, the underlined text is inserted between the question number and the question text (instead of preceding the question). This means that the subsample described by the underlined text applies only to that question. (See Example #2.)

Here are two examples to illustrate how the system works.

Example #1

For each FIU member:

c101, c11 Any overnight hospital stay.

If any overnight hospital stay (c11):

c121 Number of times hospital stay was overnight or longer.

If female age 12-45 or child age 1 or younger:

c131, c141 Determine whether the number of hospital stays in c121 included childbirth.

c151 Number of hospital stays admitted through the emergency room.

c161 Number of nights in the hospital altogether.

c211 Any emergency room visits (not counting the hospital admissions through emergency room reported in c151).

The universes for the questions are as follows:

c101, c11	each FIU member
c121	each FIU member who had any overnight hospital stay
c131, c141	each FIU member who had any overnight hospital stay and who is female age 12-45 or a child age 1 or younger
c151	each FIU member who had any overnight hospital stay
c161	each FIU member who had any overnight hospital stay
c211	each FIU member

Example #2

For each adult FIU member:

Has a doctor or health professional ever told person that he/she had...?:

cc5c skin cancer

cc5h cancer other than skin cancer

c5f4 If male over age 50: benign prostate disease or large prostate

cc6e depression

The universes for the questions are as follows:

cc5c	each adult FIU member
cc5h	each adult FIU member
c5f4	each adult FIU member who is male and over age 50
cc6e	each adult FIU member

CTS 2003 HOUSEHOLD SURVEY
Summary of Survey Questions and Variables on Public and Restricted Use Files

SURVEY INTRODUCTION

Read introduction and request to speak with adult in household who is familiar with the health care of family members. (This adult is called the "household informant.") The wording of the introduction varies depending on whether the household is part of the reinterview sample or the new sample.

A. DEMOGRAPHICS AND SCREENING

The questions in Section A determine basic information (name, age, sex, family relationship) about all household members. That information is then used to form family insurance units (FIUs) and select the children that are to be included in the sample. The respondent for Section A is the household informant.

If household is in reinterview sample: Determine whether household members for 2000-01 survey (Round Three) are still in the household. Determine any new household members. If the householder for 2000-01 is still a household member, he/she remains the householder for the 2003 survey. If not, designate the person who owns or pays most of the rent for the house as the householder.

If household is in new sample: Determine list of household members. The person who owns or pays most of the rent for the house is designated as the householder.

For all households:

bmo1, byr1, age1 Age of householder. *AGEX*
sex1 Gender of householder. *SEX*

If householder is less than 23 years old:
col1 Is householder a full-time student? *FTSTUD*

grd1 Householder's educational attainment. *HIGRADX*

If householder is age 18-64:
mil1 Is householder on active duty in the military?

bmo2, byr2, age2 Age of household member #2. *AGEX*
sex2 Gender of household member #2. *SEX*

If household member #2 is age 16-22:
col2 Is household member #2 a full-time student? *FTSTUD*

If household member #2 is age 18 or older:
grd2 Educational attainment of household member #2. *HIGRADX*

If household member #2 is age 18-64:
mil2 Is household member #2 on active duty in the military?

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
Summary of Survey Questions and Variables on Public and Restricted Use Files

rel2 Relationship of household member #2 to householder. *RELATEX*

Repeat bmo2 – rel2 for each additional household member.

Identify any marriages and parent/child relationships not involving the householder.

CONSTRUCT FAMILY INSURANCE UNITS (FIUs). These interviewing units are defined to reflect an insurance unit according to conventional practice in the private insurance market. They typically include the household head, spouse, and dependent children.

SELECT CHILDREN FOR INCLUSION IN SAMPLE. In FIUs containing more than one child, only information on one randomly selected child is collected.

B. HEALTH INSURANCE

The questions in Section B are asked separately for each FIU. The respondent is the family informant, except as noted for b951.

For all FIUs: Questions b1a – b1j establish the health insurance coverage of the FIU members.

b1a FIU members covered by a health insurance plan from current or former employers or unions.

FPRVJOB, PRIVJOB

b1b FIU members covered by a health insurance plan bought on their own. *FPRVDIR, PRIVDIR*

b1c FIU members covered by a health insurance plan provided by someone who does not live in the household. *FPRVOTH, PRIVOTH*

b1d, b1d1 FIU members covered by Medicare. *FMCARE, MCARE*

If state offers only Medicaid:

b1ex, b1e FIU members covered by Medicaid. *FMCAID, MCAID*

If state offers Medicaid and other subsidized programs:

b1ey, b1e, b1h FIU members covered by Medicaid or state-specific plans (including CHIP).

FMCAID, MCAID, FOTHPUB (state or IHS), OTHPUBX (state or IHS)

b1f, b1f1 FIU members covered by military health care plan. *FMILINS, MILINS*

b1g FIU members covered by the Indian Health Service. *FOTHPUB (state or IHS), OTHPUBX (state or IHS)*

b1i1, b1i2, b1j Confirmation that the FIU members not covered by any of the insurance types listed above do not have any health insurance. *FOTHINS, OTHINS, UNINSUR*

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
Summary of Survey Questions and Variables on Public and Restricted Use Files

If any FIU member is privately insured (b1a, b1b, b1c) and not covered by Medicare (b1d): Question b2 determines the number of private insurance plans covering FIU members, and then questions b231 – b391 are asked for each of those private plans (up to three plans).

b2 Number of private health insurance plans covering FIU members. *NPRIV*

b231 Name of policyholder for private plan #1. *PRVHLD1*

b2311 Is policy-holder for private plan #1 a postal worker?

b2312 If b2311 = no: Is policy-holder for private plan #1 a federal government employee?

b2p1 – b221 Name of private plan #1.

If FIU has more than one private health insurance plan (b2):

b241 FIU members covered by private plan #1. *PRVINS1*

b251 Is private plan #1 employer- or union-sponsored? [If the only private plans in the FIU are employer- or union-sponsored, (i.e., if no one is covered by any private insurance that's not employer- or union-sponsored, based on b1b and b1c), then automatically code response to b251 as "yes."] *PRVJOB1*

If private plan #1 is employer- or union-sponsored (b251):

b2611 Name and address of employer or union that provides private plan #1.

b26121 If policy-holder is not a federal employee (b2311, b2312): Employer vs. union.

b26a Health plan information for private plan #1 is available in booklet. *PBKLET1**

b26b Health plan information for private plan #1 is available on website or company intranet that can be accessed from a computer. *PWEB1**

b271, b281 Was private plan #1 obtained through a state or federal government program? Name of the state or federal government program.

b291, b301 FIU members who enrolled in private plan #1 in the past 12 months. *PRVI2M1, PRVIY1*

If private plan #1 is employer- or union-sponsored (b251) and policyholder name provided (b231):

b31111 Whether anyone in family pays all or some of cost of premium for private plan #1.

ESICST1

b31121 If anyone in family pays all or some of cost (b31111): How much does policyholder pay for private plan #1? *ESPRMIX*

If private plan #1 is not employer- or union-sponsored (b251):

b311, b321 Insurance premium for private plan #1. *PVPRMIX*

ngi1 Coverage of at least some of the cost of prescription medicines (private plan #1)?

*PRVRX1**

ngi2 Higher premium to cover pre-existing conditions (private plan #1)? *PVHIPM1**

ngi3 Whether any FIU members have pre-existing conditions not covered (private plan #1).

*PVCVPX1**

ngi4 If any pre-existing conditions are not covered (ngi3): Pre-existing conditions not covered (private plan #1).

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
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- b331** PCP sign-up requirement (private plan #1). *PRVSI~~G~~I, PVSIGIP*
b341 Specialist referral requirement (private plan #1). *PRVREF1, PVREFIP*
b351 Physician network (private plan #1). *PRVLST1, PVLSTIP*
b361 Is private plan #1 an HMO? *PRVHMO1, PVHMOIP*

If private plan #1 has a network of physicians (b351) or is an HMO (b361):

- b371** Any coverage for out-of-network costs without a referral (private plan #1). *PRVPAY1, PVPAYIP*

If private plan #1 is employer-sponsored (b251):

- b381** Does employer offer its employees more than one health insurance plan? *PRVMORI*

If employer offers more than one health insurance plan (b381):

- b391** If private plan #1 is an HMO (b361): Does employer offer any nonHMO plans?
PRVBOT1

- b391** If private plan #1 is not an HMO (b361): Does employer offer any HMO plans?
PRVBOT1

If FIU has more than one private health insurance plan (b2), then ask b231 – b391 for each of the other plans, up to three plans.

If any FIU member is covered only by military insurance: Questions b40 – b421 concern military insurance.

- b40** Name of policy-holder for military health plan.
b41, b421 FIU members who enrolled in military health plan in the past 12 months. *MILI2M, MILINIY*

If any FIU member is covered by Medicare (b1d). Questions b54 – b59a1 concern Medicare.

- b54** FIU members covered by Medicare HMO. *MCRHMO, MCRHMOP*

If any FIU members in a Medicare HMO (b54):

- b55a, b55b** Name of the HMO plan.
b55c Was HMO plan obtained through a current or past employer or union? *MCRHJOB*

- b51** PCP sign-up requirement (Medicare). *MCRSIGN, MCRSIGP*
b52 Specialist referral requirement (Medicare). *MCRREF, MCRREFP*
b53 Physician network (Medicare). *MCRLST, MCRLSTP*

If Medicare plan has a network of physicians (b53) or is an HMO (b54):

- b56** Any coverage for out-of-network costs without a referral (Medicare). *MCRPAY, MCRPAYP*

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
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b57, b58 FIU members who enrolled in Medicare in the past 12 months. *MCR12M, MCRINIY*
b59 Medicare enrollees who are covered by Medicare supplemental or Medigap policies. *FMCRSUP, MCRSUP*

If there are any Medicare supplemental or Medigap policies (b59):

b59a1 Were Medicare supplemental or Medigap policies obtained through a current or past employer or union? *MCRSUPJ*

If any FIU member is covered by Medicaid: Questions b64 – b68 concern Medicaid.

b64 FIU members covered by Medicaid HMO. *MCDHMO, MCDHMOP*

b67, b68 FIU members who enrolled in Medicaid in the past 12 months. *MCD12M, MCDINIY*

If any FIU member is covered by a state plan (b1h) or other plan (b1i1) and not covered by a private plan (b1a, b1b, b1c): Questions b71 – b78 concern the health insurance plans from questions b1h (other state health insurance plan) and b1i1 (other plan not previously mentioned). If anyone has a state plan (b1h), then questions b71 – b78 refer to that plan. Otherwise, questions b71 – b78 refer to the other plan (b1i1).

b71 Name of policyholder for state or other health insurance plan. *STPHD*

b75 Is state or other plan an HMO? *STHMO, STHMOP*

b77, b78 FIU members who enrolled in state or other plan in the past 12 months. *STINIY, STI2M*

If any FIU member is uninsured: Questions b79 – b84a concern the uninsured FIU members.

If any FIU member is privately insured:

b79 Is family coverage offered under FIU's current private plan?

b791 If family coverage offered (b79): Reason why uninsured FIU member(s) not covered by family coverage.

b801 Did uninsured FIU member #1 have any health insurance coverage during the past 12 months?
UNINCOV

If uninsured FIU member #1 had any insurance coverage during the past 12 months (b801):

b81 Type of health insurance coverage before uninsured FIU member #1 became uninsured.
UNINPLX

If health insurance was a private, Medicaid, or state plan (b81):

b82 Was health plan an HMO? *UNINHMO*

b83 Month when health insurance coverage stopped.

b84 Reason why health insurance coverage stopped. *UNINSR1 – UNINSR9, UNINR10 – UNINR14*

b84a If uninsured FIU member #1 were sick or needed a lot of medical care, do you [the family informant] think you would be eligible for Medicaid or other state program? *UNINMCD*

Repeat questions b801 – b84a for each uninsured FIU member.

* = variable on Restricted Use File only

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If any FIU member is currently insured and coverage began in the past 12 months: Questions b851 – b882 concern health insurance coverage prior to any current health insurance plans that began in the past 12 months.

b851 Type of health insurance coverage prior to current plan. *PREINSX, PREINS**

If there are other currently insured FIU members whose coverage began in the past 12 months:

b861 Were other currently insured family members whose coverage began less than 12 months ago covered under this plan?

If previous health insurance was a private, Medicaid, state, military, or Medicare plan (b851):

b871 Was previous health insurance plan an HMO? *PREHMO*

If previous coverage was private (b851) and current coverage is private (b1a, b1b, b1c):

b881 Reason for changing health insurance plans. *CHGINS1 – CHGINS7*

b852, b872, b882 These questions are asked if there is any other currently insured FIU member (not cited in b851 or b861) whose coverage began in the past 12 months. They are a repetition of questions b851, b871, and b881.

For all FIUs: Questions b901 – b922 concern lifetime HMO enrollment for family informant and spouse.

If family informant not in HMO in past year:

b901 Whether family informant has ever been enrolled in an HMO. *HMOEVR*

If family informant ever enrolled in an HMO:

b911, b921 Total number years that family informant has been enrolled in HMO plans. *HMOYRSX*

b902, b912, b922 If family informant is married, these questions are asked about spouse's HMO enrollment. They are a repetition of questions b901, b911, and b921.

For family informant and spouse: Information on question b951 for the family informant is obtained from the family informant. Information for his/her spouse is obtained directly from the spouse as part of the self-reponse module.

b951 Willingness to trade off limited choice of physicians for lower health care costs. *MCHOICE*

For each insured person: The CATI system here identifies a single health plan to use for the Section E questions about problems with, and rating of, health plan. The health plan was identified as follows: Use the Medicare plan if the person has Medicare coverage. If the person doesn't have Medicare and FIU has one plan, use that plan. If the person doesn't have Medicare and has both a Medicaid/CHIP plan and a private plan, use the private plan. Otherwise, ask question b961 for each insured person in FIU (family informant is respondent).

b961 Plan used for all or most of person's health care.

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
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C. RESOURCE USE AND UNMET NEED

For each FIU member: Questions c101 – c511 concern resource use. The family informant provides information about all FIU members, and the reference period for all questions is the past 12 months.

c101, c11 Any overnight hospital stay.

If person had any overnight hospital stay (c11):

c121 Number of times hospital stay was overnight or longer. *HSPSTYN*

If female age 12-45 or child age 1 or younger:

c131, c141 Determine whether the number of hospital stays in c121 included childbirth.

c151 Number of hospital stays admitted through the emergency room. *HSPERX*

c161 Number of nights in the hospital altogether. *HSPNITX*

c211 Any emergency room visits (not counting the hospital admissions through emergency room reported in c151).

If any emergency room visits (c211):

c221, c231 Number of emergency room visits (excluding visits reported in c151). *ERUSENX*

If any emergency room visits, including hospital admission through emergency room (c151, c211):

er1 Last emergency room visit was for accident/injury or for other health problem? *ERLSTVS*

If last emergency room visit was for other health problem besides accident/injury (er1):

er2 What was the health problem?

er3 Able to contact health professional before going to emergency room? *ERCNTAC*

er4 If er3 is “yes”: Did the health professional say to go to the emergency room?

ERUSEDR

er5 If er3 is not “yes”: Tried to see or call health professional before going to emergency room or calling for assistance? *ERTRYDR*

er6 If er4 is not “yes”: Any other place besides emergency room where the problem could have been treated? *EROTHPL*

If problem could have been treated elsewhere besides emergency room (er6):

er7 Other treatment place is doctor’s office, HMO, hospital outpatient clinic, other clinic or health center, or other?

er8 Reason for going to emergency room instead of other treatment place.
*ERCHOSE**

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
Summary of Survey Questions and Variables on Public and Restricted Use Files

If [last emergency room visit was for other health problem besides accident/injury (er1)] and [not able to contact health professional (er3) or health professional did not say to go to the emergency room (er4)] and {[er6 = no, dk, or ref] or [er6 = yes and any overnight hospital stays (c121, c151)]}:

er9 Last emergency room visit resulted in admission to hospital for overnight stay?
ERADMIT

c311, c321 Number of doctor visits (excluding hospital and emergency room visits). **DRVISNX**

If any doctor visits (c311, c321):

c3p1 Were any of these visits for routine preventive care? **DPHYEXM**

If no visits were for routine preventive care (c3p1):

c3c1 Were any of these visits for a routine check up for an ongoing health problem?
DRTNPRM

c331, c341 Number of visits to nurse practitioner, physician assistant, or midwife (not counting doctor visits reported in c311). **MPVISNX**

If any nonphysician provider visits (c331, c341) and no routine visits reported already (c3p1, c3c1):

c351 Were any of these visits for routine preventive care?

If no visits were for routine preventive care (c351):

c361 Were any of these visits for a routine check up for an ongoing health problem?

If any hospital, emergency room, physician, or other provider visits:

c411, c421 Number of surgeries. **SURGNX**

If any surgeries (c411) and any hospital stay (c121):

c431 Number of surgeries in a hospital with an overnight hospital stay. **SURGNTX**

c511 Any visit to a mental health professional. **MENTAL**

For all FIU members: Questions c811 – c841 concern unmet need. The family informant responds for self and child. Information for the family informant's spouse is obtained directly from the spouse as part of the self-response module. The reference period (where applicable) is the past 12 months.

c811 Was there any time when person didn't get needed medical care? **UNMET**

c821 Was there any time when person postponed getting medical care he/she thought he/she needed?
PUTOFF

If reporting postponing or not getting medical care (c811, c821):

c831 Reason for postponing or not getting medical care. **PUTOFR1 – PUTOFR9, PUTOF10 – PUTOF21, PUTOFR0**

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unmet1 Most recent health problem for which person postponed or didn't get medical care.
unmet2 Person saw a doctor to treat the most recent health problem? *UMETDR*

If person saw a doctor for the most recent health problem (unmet2) and there wasn't a time in the past 12 months when he/she didn't get needed medical care (c811):

unmet2a Postponed seeing doctor for most recent health problem? *UMETDRX*

If person postponed seeing doctor for most recent health problem (unmet2a) or there was a time when he/she didn't get needed medical care in the past 12 months (c811):

unmet3 Person was referred to specialist to treat most recent health problem? *UMETSP*

unmet3a If unmet3 = yes: Action after getting referral to specialist (saw specialist when referred vs. postponed seeing or didn't see specialist). *UMETSPX*

unmet4 Doctor ordered/recommended medical tests to treat most recent health problem?
UMETTST

unmet4a If unmet4 = yes: Action after doctor ordered/recommended medical tests (got tests when ordered vs. postponed getting or didn't get tests). *UMETT SX*

unmet5 Doctor ordered/recommended any medical procedures/surgery to treat most recent health problem? *UMETPRC*

unmet5a If unmet5 = yes: Action after doctor ordered/recommended medical procedure/surgery (got procedure/surgery when ordered vs. postponed getting or didn't get procedure/surgery).
UMETPRX

c841 Was there any time when person needed prescription medicines but didn't get them because he/she couldn't afford it? *UMETMDC*

For all FIUs: Questions c92 – c95 are answered by the family informant. The reference period is the past 12 months.

c92 , c93 Out-of-pocket spending for family's medical care. *MEDCSTX, MEDCSTA*, MEDCSTB**

c94 Any problems paying family's medical bills? *BILLPRB*

If problems paying medical bills (c94):

- c95** Consequences of problems paying medical bills:
- a Contacted by a collection agency *BILLCOL*
 - b Problems paying for other necessities *BILLNEC*
 - c Postponed major purchases *BILLMAJ*
 - d Used savings *BILLSAV*
 - e Borrowed *BILLBOR*

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D. USUAL SOURCE OF CARE; PATIENT TRUST IN PHYSICIAN

For each FIU member: Questions d101 – d171 concern each FIU member's usual source of care. The family informant provides information for each person in the FIU.

d101 Is there a place where FIU member usually goes for health care? *USCARE*

If FIU member has at least one usual source of care (d101):

d111 What is the usual source of care? *USCTYPE*

sn1 If FIU member uninsured: Paying full price or lower amount at usual source of care? *USCPAY*

d121 Type of provider at usual source of care. *USCPROF*

d131 Does FIU member usually see the same provider at the usual source of care? *USCSAME*

d141 Any change in usual source of care in the past 12 months? [Exact wording of the question depends on d121 and d131.] *USCCHG*

If there was a change in the usual source of care (d141):

d151, d161, d171 Reason for change in usual source of care. *USCRCHG, USCRHLH, USCROTH*

For FIUs with any members who are uninsured: Questions sn2 – sn6 concern the places that offer affordable medical care for the uninsured. The family informant is the respondent.

If any uninsured FIU member is paying full price at usual source of care (sn1):

sn2 Any local place offering affordable medical care for the uninsured? *AFFRDCR*

sn3 If sn2 = yes: Type of place offering affordable medical care for the uninsured. *AFFDTYP**

If there is a local place offering affordable medical care (sn2) or if any uninsured FIU member is paying reduced price at usual source of care (sn1):

sn4, sn4per Travel time to get to [usual source of care where reduced price is charged (sn1) / local place offering affordable medical care (sn2)]. *AFFTRAV**

sn5 Anyone in FIU saw a health professional in the past 12 months at [usual source of care where reduced price is charged (sn1) / local place offering affordable medical care (sn2)] while uninsured? *AFFSEEN*

sn6 If sn5 = no: Reason for not going to [usual source of care where reduced price is charged (sn1) / local place offering affordable medical care (sn2)] for medical care. *AFFRSON, AFFRSN1 – AFFRSN9, AFFRN10 – AFFRN12*

For each adult FIU member: Questions d311 – d361 concern patient trust in physician and attitudes toward visiting the doctor. Each adult responds for self. No information on children is collected.

If physician is usual source of care or person had one or more physician visits in last 12 months:

d311 Agreement with statement: Doctor may not refer to a specialist when needed. *DRNOREF*

d321 Agreement with statement: Doctor puts medical needs above all other considerations. *DRMETND*

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See Appendix A for the full text of the survey questions.

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d331 Agreement with statement: Doctor is strongly influenced by health insurance company rules. *DRINFLU*

d341 Agreement with statement: Doctor might perform unnecessary tests or procedures. *DRUNNEC*

d351 True or false: Person goes to doctor as soon as s/he starts feeling bad. *DRFEELB*

d361 True or false: Person will do just about anything to avoid going to the doctor. *DRAVOID*

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E. HEALTH CARE SATISFACTION AND HEALTH STATUS

For FIUs with members who had any provider or hospital visits in the past 12 months: Questions e101 – e111 concern satisfaction with family's health care. The respondent is the family informant.

e101, e111 Satisfaction with (family's) health care received during past 12 months. *CRSAFX*

For each adult FIU member: Questions e121 – CAHPSLANG concern satisfaction with choice of physicians and difficulty communicating with physicians for adults in the FIU. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

e121, e131 Person's satisfaction with choice of primary care doctors. *DRCHOCX*

e141 Person needed or saw specialist in the past 12 months. *SPNEED*

If person needed or saw specialist (e141):

CAHPS12 Person saw specialist in the past 12 months. *SPSEEN*

e151, E151 Person's satisfaction with choice of specialists. *SPCHOCX*

If person had a doctor visit in the past 12 months (c311, c321):

CAHPSLANG Difficulty communicating with health care provider because of different languages. *DIFFLNG*

For each insured adult FIU member: Questions CAHPS10 – CAHPS38 concern problems with and rating of health plans. The health plan is the one identified at the end of Section B. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

If person had a doctor visit and needed to see specialist (c311, c321, e141):

CAHPS10 Problem getting referral to specialist. *GETREFR*

If person had a doctor visit (c311, c321):

CAHPS23S Needed approval from health plan for any care, tests, or treatment? *REQAPRVA*

CAHPS23 If CAHPS23S = yes: Problem waiting for approval from health plan. *GETAPRVA*

CAHPS37S Had to fill out any paperwork for health plan? *REQPWRK*

CAHPS37 If CAHPS37S = yes: Problem with paperwork for health plan. *PAPWRKA*

SP14, SP14X Satisfaction with amount paying for health care. *BNFSAFX*

CAHPS38 Rating of health plan. *RATING*

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For each adult FIU member with a physician visit in the past 12 months (c311, c321): Questions e161 – e341 ask for details about the most recent physician visit. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

e161 Any doctor visit for sickness, injury, or other health problems in the past 12 months. *SICKCR*

If person visited doctor for health problem (e161):

e171 Month/year of most recent visit for health problem.

e181 Since that visit, did person visit a doctor for a check-up or other preventive care?

CHKASIK

If person visited doctor for preventive care (e181):

e191 Month/year of most recent visit for preventive care.

If person has not had a doctor visit for a health problem (e161):

e201 Any doctor visit for check-up or other preventive care in the past 12 months. *CHECKUP*

If person visited doctor for preventive care (e201):

e211 Month/year of most recent visit for preventive care.

If person did not visit doctor for preventive care (e201):

e901, e911 Check for correct number of doctor visits in the past 12 months.

e221 Was the doctor at the most recent doctor visit a family doctor or a specialist? *DRORSP*

If person has a usual source of care (d101):

e241 Was most recent doctor visit to the person's usual place for care? *LSTUSC*

If person has no usual source of care (d101) or most recent doctor visit was not to usual source of care (e241):

E24a1 Was most recent visit to an emergency room? *LSTOER*

If most recent visit was not to an emergency room (E24a1):

e251 Was most recent doctor visit by appointment? *LSTAPP*

If most recent doctor visit was by appointment (e251):

e261, e271 Time period between making appointment and seeing doctor. *LSTAPXX, LSTAPPX**

e281, E281 Time in waiting room at most recent visit. *LSTWATX*

e291, E291 Travel time to doctor's office/emergency room at most recent visit. *LSTRAXX, LSTRAVX**

e301 Rating of the thoroughness and carefulness of the examination and treatment. *LSTHOR*

e311 Rating of how well doctor listened. *LSTLISN*

e321 Rating of how well doctor explained things. *LSTEXPL*

e331 If uninsured: What did the physician charge for the most recent visit? *UNINFEE**

e341 If uninsured and e331 is \$20 or more: When and how much of charge was paid. *UNINPAY**

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For each adult FIU member: Questions e401 – cc7 are asked for each adult FIU member. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

e401 Self-assessment of general health. *GENHLH*
e491 Amount of time person felt calm and peaceful. *FLCALM4*
e511 Amount of time person felt downhearted and blue. *FLDOWN4*
GSS157 Overall level of happiness *HAPPY*

cc1 If female, age 50 or less: Person had a baby during the past two years. *HAVBABY**
cc2c If female: Person saw a doctor or health care professional for abnormal uterine bleeding during the past two years. *UTRNBLD**

Questions cc3b – cc6e are all in the same format: Has a doctor or health professional ever told the person that he/she had [fill in medical condition]?: For each "yes" response, follow up with a question about whether the person has seen a doctor or other health care professional for that condition during the past two years.

cc3b diabetes or high blood sugar *DIABET*, DIABETX**
cc3c arthritis *ARTHRS*, ARTHRSX**
cc3d asthma *ASTHMA*, ASTHMAX**
cc3e If person does not have asthma (cc3d): chronic obstructive pulmonary disease *COPD*, COPDX**
cc3g hypertension or high blood pressure *HYPTEN*, HYPTENX**
cc3i coronary heart disease *HRTDIS*, HRTDISX**
cc5c skin cancer *SKNCAN*, SKNCANX**
cc5h cancer other than skin cancer *CANCER*, CANCERX**
c5f4 If male over age 50: benign prostate disease or large prostate *PRSBGN*, PRSBGNX**
cc6e depression *DPRESN*, DPRESNX**

cc7 Any visit during the past two years to doctor or other provider for any serious medical problem?
*MEDPROB**

For all uninsured adults, all adults age 65 or older, and a sample (one-sixth) of the other adults: Questions srm1 – srm10 concern specific recent health problems, the health care sought for one of those problems, and that problem's effect on the ability to do usual activities. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

srm1 Whether person has had the following health problems in the past three months:

- a Back pain or neck pain *SYNECK**
- b Shortness of breath *SYBRETH**
- c Fainting or loss of consciousness *SYFAINT**
- d Difficulty seeing *SYBLUR**
- e Headaches *SYHACHE**
- f Cough *SYCOUGH**
- h Depression *SYSAD**
- i Anxiety *SYANXTY**
- j Pain in hip/knee/leg *SYHIP**

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- k Sprained ankle *SYANKLE**
- m Fatigue *SYWEAK**
- q If female: lump in breast *SYLUMP**
- u If male age 40 or older: difficulty urinating *SYURINE**
- v Difficulty hearing *SYHEAR**
- w Chest pain *SYCHEST**

If person had any of the health problems (symptoms) in question srm1: The CATI system selects one symptom for question srm2. If the person reported any *serious* symptoms (a – e, q, w), then the system selects one serious symptom at random. If the person reported no serious symptoms, then the system selects one *morbid* symptom (f, h – k, m, u, v) at random. If the person doesn't respond "yes" to srm2 for the symptom first selected, then the symptom selection process is repeated and srm2 is asked for the newly-selected symptom. This re-selection process continues until the response to srm2 is "yes" for some symptom, which is then used for questions srm2a – srm9a. If there is no symptom for which srm2 = yes (i.e., none of the symptoms began in the past three months), then the interview skips to question e521.

srm2 Problem first appeared in the past three months? *SYLINK**

If the problem first appeared in the past three months (srm2):

srm2a Problem first appeared in the past week? *SYMAPPR**

srm2b If problem didn't first appear in the past week (srm2a): Problem first appeared in the past four weeks? *SYMAPPR**

srm2c If female age 45 or younger: Problem is associated with a pregnancy? *SYMPREG**

srm3 Saw a health professional about the problem? *SYMTODR**

If person saw a health professional about the problem (srm3):

srm4 Length of time between start of the problem and visit to health professional about it. *DRSEE**

If person did not see a health professional about the problem (srm3):

srm5 Talked to health professional by telephone about the problem? *DRTALK**

If person talked to health professional by telephone (srm5):

srm6 Length of time between start of the problem and phone call to health professional about it. *DRCALL**

srm7a Person thought at any time that s/he needed to see a health professional about the problem instead of talking on the telephone? *DRNEED**

If person did not talk to health professional by telephone (srm5):

srm7b Person thought at any time that s/he needed to contact a health professional about the problem? *DRCNTAC**

srm7c If srm7b = yes: Person tried to see health professional about the problem? *DRTRYGO**

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srm8 Problem limited ability to do usual activities? *SYMLMT**

If problem limited ability to do usual activities (srm8):

srm8a Number of days limited in ability to do usual activities. *SYMLMTD**

srm9 Missed work because of problem? *SYMMISS**

srm9a If srm9 = yes: Number of days of work missed. *SYMMSSD**

srm10 If srm9=yes or srm9=no: Have paid sick leave at job? *SICKLVE**

For each adult FIU member: Questions e521 – BRFSS11 are asked for each adult FIU member. Each adult is the respondent for him- or herself, either in the family informant's interview or in the self response module.

e521 Agreement with statement: I'm more likely to take risks than the average person. *TAKRISK*

e601 Has person smoked at least 100 cigarettes in his/her entire life? *SMKEVR*

If person has ever smoked 100 cigarettes (e601):

e611 Does person now smoke cigarettes everyday, some days, or not at all? *SMKNOW*

BRFSS10, BRFSS11 Weight and height. *BMIX, BMICAT*

For each child in the sample: Questions k12 – e16x concern the randomly selected child in the FIU. The respondent for these questions is the family informant.

k12, k13 Satisfaction with choice of primary care doctors for child. *DRCHO CX*

k14 Child needed or saw a specialist in the past 12 months. *SPNEED*

If child needed or saw specialist (k14):

kCAHPS12 Child saw specialist within the past 12 months. *SPSEEN*

k15, K15a Satisfaction with choice of specialists for child. *SPCHO CX*

If child is insured: Questions kCAHPS10 – kCAHPS38 concern problems with and rating of health plans.

If child had a doctor visit and needed to see specialist:

kCAHPS10 Problem getting referral to specialist. *GETREFR*

If child had a doctor visit:

kCAHPS23S Needed approval from health plan for any care, tests, or treatment?

kCAHPS23 If kCAHPS23S = yes: Problem waiting for approval from health plan.

If child is only family member covered by policy:

kCAHPS37S Had to fill out any paperwork for health plan? *REQPWRK*

kCAHPS37 If kCAHPS37S = yes: Problem with paperwork for health plan.

kSP14, kSP14X Satisfaction with amount paying for health care. *BNFSAFX*

kCAHPS38 Rating of health plan. *RATING*

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If child had any physician visit in the past 12 months:

e16x Who went with child to the doctor on (his/her) most recent visit? **TAKEID**

If child has had any physician visit in the past 12 months and the person who took the child for the most recent visit is a family member: Questions k16 – k32 concern the child's doctor visits in the past 12 months. The respondent is the person who took the child on his/her most recent physician visit, as indicated in e16x, unless that person is not a family member. If that person is a family member but not the family informant, then these questions are asked as part of that other family member's self response module. If that person is not a family member, then these questions are not asked.

k16 Any doctor visit for sickness, injury, or other health problems in the past 12 months. **SICKCR**

If child visited doctor for health problem (k16):

k17 Month/year of most recent visit for health problem.

k18 Since that visit, did child visit a doctor for a check-up or other preventive care? **CHKASIK**

If child visited doctor for preventive care (k18):

k19 Month/year of most recent visit for preventive care.

If child has not had a doctor visit for a health problem (k16):

k20 Any doctor visit for check-up or other preventive care in the past 12 months. **CHECKUP**

If child visited doctor for preventive care (k20):

k21 Month/year of most recent visit for preventive care.

If child did not visit doctor for preventive care (k20):

k90 Check for correct number of doctor visits in the past 12 months.

k22 Was the doctor at the most recent doctor visit a family doctor or specialist? **DRORSP**

If child has a usual source of care (d101):

k24 Was most recent doctor visit to the child's usual place for care? **LSTUSC**

If child has no usual source of care (d101) or most recent doctor visit was not to usual source of care (k24):

K24a Was most recent visit to an emergency room? **LSTOER**

If most recent visit was not to an emergency room (K24):

k25 Was most recent doctor visit by appointment? **LSTAPP**

If most recent doctor visit was by appointment (k25):

k26, k27 Time period between making appointment and seeing doctor. **LSTAPXX, LSTAPPX***

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k28, K28 Time in waiting room at most recent visit. *LSTWATX*

k29, K29 Travel time to doctor's office/emergency room at most recent visit. *LSTRAXX, LSTRAVX**

k30 Rating of the thoroughness and carefulness of the examination and treatment. *LSTHOR*

k31 Rating of how well doctor listened. *LSTLISN*

k32 Rating of how well doctor explained things. *LSTEXPL*

For each child in the sample: Questions k40 – scsn5b concern the child's health status. The respondent is the person who took the child on his/her most recent physician visit, as indicated in e16x, unless that person is not a family member. If that person is a family member but not the family informant, then these questions are asked as part of that other family member's self-response module. If that person is not a family member, then the respondent is the family informant.

k40 Respondent's assessment of child's general health. *GENHLH*

scsn1 Does child currently need or use medicine prescribed by a doctor? *KRXUSE**

scsn1a If scsn1 = yes: Is this because of a medical, behavioral, or other health condition? *KRXUSEX**

scsn1b If scsn1a = yes: Is this a condition that has lasted or is expected to last for at least 12 months? *KRXUSEY**

scsn2 Does child need or use more medical care, mental health or educational services than is usual for most children of the same age? *KMORE**

scsn2a If scsn2 = yes: Is this because of a medical, behavioral, or other health condition? *KMOREX**

scsn2b If scsn2a = yes: Is this a condition that has lasted or is expected to last for at least 12 months? *KMOREY**

scsn3 Is child limited or prevented in any way in ability to do the things most children of the same age can do? *KLIMIT**

scsn3a If scsn3 = yes: Is this because of a medical, behavioral, or other health condition? *KLIMITX**

scsn3b If scsn3a = yes: Is this a condition that has lasted or is expected to last for at least 12 months? *KLIMITY**

scsn4 Does child need or get special therapy, such as physical, occupational, or speech therapy? *KTHERA**

scsn4a If scsn4 = yes: Is this because of a medical, behavioral, or other health condition? *KTHERAX**

scsn4b If scsn4a = yes: Is this a condition that has lasted or is expected to last for at least 12 months? *KTHERAY**

scsn5 Does child have any kind of emotional, developmental, or behavioral problem for which s/he needs or gets treatment or counseling? *KCOUNS**

scsn5a If scsn5 = yes: Is this because of a medical, behavioral, or other health condition? *KCOUNSX**

scsn5b If scsn5a = yes: Is this a condition that has lasted or is expected to last for at least 12 months? *KCOUNSY**

* = variable on Restricted Use File only

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For all adults in FIU: Question e802 is asked for each remaining (non-informant) adult in the FIU. The respondent is the family informant.

e802 Respondent's assessment of adult's general health. *The variable GENHLH reflects this response (from the family informant) only if the non-informant adult didn't respond to this question in his/her self-response module (SRM question e402).*

F. EMPLOYMENT

The family informant answers all the questions in Section F.

For each adult (18 years of age or older):

f101 Does person have a business or farm? *HAVEBUS*

f111 Last week, did person do any work for pay (or profit)? *WRKPAY*

For each employed adult (f111):

f121 Last week, did person have more than one job/business? *WORK2ND*

f131 Hours per week at (main) job. *HRSWKX*

If person works varying hours per week (f131):

13x1 Does person usually work more or less than 35 hours per week at main job?

If person works more than one job (f121):

f141 Hours per week at other jobs. *HRWK2NX*

f201 Employer type. *EMPTYPX*

f211 Number of people employed at work location.

If person is not employed by government (f201):

f221 Does employer operate in more than one location?

f231 If f221 = yes: Number of people employed by employer at all locations. *FIRMSZX*

f241 Type of industry. *INDSTRY*

f251 Person is member of labor union or an employee association? *INUNION**

f261 If f251 = yes: Person is covered by union or employee association contract? *CVUNION**

f301, f321, f331, f341 Earnings at main job. *WAGEHRX*

If person is policy holder for employer-based plan (b231, b251) and has more than one job (f121):

f401 Is person's insurance from main job? *INSMJOB*

* = variable on Restricted Use File only

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For each person who: works for government or private employer (f201), is not a policy holder for an employer/union based plan (b231, b251), and is less than 65 years old:

f501 Does person's employer or union offer a health insurance plan to any of its employees? *EMPOFER*

If person's employer or union offers health insurance plan (f501):

f5011 If person is covered by union or employee association contract (f261): Is the health insurance plan offered by person's employer or union? *WHOOFER**

f511 Is person eligible to participate in employer's health insurance plan? *ELIGIB*

If person is eligible to participate in own employer's health insurance plan (f511) and is not covered by a plan from any other employer (b1a, b1c):

f521 Main reason not participating in employer's plan. *ELUNINS4*

If person is not eligible to participate in own employer's health insurance plan (f511):

f531 Reason ineligible for employer's plan. *INELIGR*

f541 Does employer offer only one or more than one plan to its employees? *EMPMULT*

f551 Does employer offer an HMO plan to its employees? *EMPHMO*

If employer offers more than one plan (f541) and offers an HMO plan (f551):

f561 Does employer offer a non-HMO health insurance plan to its employees?
EMPBOTH

If person is eligible to participate in own employer's health insurance plan (f511) and is covered by a plan from another employer (b1a, b1c):

f611 Does person's own employer offer a health insurance plan with a premium lower than the amount being paid for current plan? *EMPLESS**

f621 If f611 = no: Does person's own employer offer a health insurance plan with a premium about the same as the amount being paid for current plan? *EMPSAME**

If person's own employer offers a health insurance plan with a premium that is lower or about the same (f611, f621):

f63a1 If person switched to the lower- or same-cost plan, would person pay more, less, or about the same amount for a doctor visit? *CHGPLDR**

f63b1 If person switched to the lower- or same-cost plan, would person pay more, less, or about the same amount to fill a prescription? *CHGPLRX**

* = variable on Restricted Use File only

CTS 2003 HOUSEHOLD SURVEY
Summary of Survey Questions and Variables on Public and Restricted Use Files

G. FAMILY INCOME AND RACE/ETHNICITY

The family informant is the respondent for Section G.

For all FIUs:

g10, g11 Total income for FIU in 2002. *FAMINCX*

For each FIU member, except family informant's own child or grandchild:

g201 Hispanic origin. *HISPAN*

g22n1 Race. *RACNEWX*

g301 U.S. citizenship. *CITIZEN**

g311 If a U.S. citizen (g301): Born a citizen or citizenship through naturalization? *BORNCTZ**

g321 If not a U.S. citizen (g301) or a U.S. citizen but not born a U.S. citizen (g311): Year when person came to live in the U.S. *YRSUSX**

H. CLOSING

The family informant is the respondent for Section H.

If no prepayment for interview: Arrange for payment.

h10 Confirm name and address.

If part of reinterview sample:

h20 Did FIU have same phone number at date of interview for 1998-99 survey?

For all FIUs:

h30 Number of other telephone numbers in household (excluding cell phones). *PHNOTH4X*

h31 If h30 > 0: Purpose / use of other telephone numbers in household. *PHNOTHR*

h32 No working telephone during the past 12 months? *NOPHN*

h33 If h32 = yes: Number of months with no working telephone. *NOPHNMX*

h34 If h32 = yes: Main reason no working telephone.

For all FIUs with more than one adult: Use the self-response module (SRM) to obtain information from other adults in the FIU.

h23 Arrange to interview any other adults in the FIU.

* = variable on Restricted Use File only

Appendix C

List of Variables in CTS Household Survey Public Use and Restricted Use Data Files by Year

CTS Household Survey
Survey Administration and Household Composition (includes Section A)

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
HHIDX	CV	Household identifier	yes	yes	yes	yes	yes	yes	yes	yes
CSIDX	CV	Family identifier	yes	yes	yes	yes	yes	yes	yes	yes
PID	CV	Person number within household	yes	yes	yes	yes	yes	yes	yes	yes
PERSIDX	CV	Person identifier : CSIDX+PID	yes	yes	yes	yes	yes	yes	yes	yes
R1HHIDX	CV	Round 1 household identifier for reinterviews				yes				
R1PID	CV	Round 1 person identifier for reinterviews				yes				
R2HHIDX	CV	Round 2 household identifier for reinterviews						yes		
R2PID	CV	Round 2 person identifier for reinterviews						yes		
R3HHIDX	CV	Round 3 household identifier for reinterviews								yes
R3PID	CV	Round 3 person identifier for reinterviews								yes
KIDID	CV	Random child PID	yes	yes	yes	yes	yes	yes	yes	yes
RESPID	CV	Respondent PID	yes	yes	yes	yes	yes	yes	yes	yes
CENSID	CV	Census family identifier	yes	yes	yes	yes	yes	yes	yes	yes
NFAM	CV	Number of families in household	yes	yes	yes	yes	yes	yes	yes	yes
NSFAM	CV	Number of interviewed families in household	yes	yes	yes	yes	yes	yes	yes	yes
NPERX	CV	Number of persons in family	yes	yes	yes	yes	yes	yes	yes	yes
NKID	CV	Number of children in family	yes	yes	yes	yes	yes	yes	yes	yes
NSPER	CV	Number of selected persons in family	yes	yes	yes	yes	yes	yes	yes	yes
NADULT	CV	Number of adults in family	yes	yes	yes	yes	yes	yes	yes	yes
NAGE65	CV	Number of adults age 65 or older in family	yes	yes	yes	yes	yes	yes	yes	yes
KIDFLAG	CV	Selected child indicator	yes	yes	yes	yes	yes	yes	yes	yes
RSPFLAG	CV	Informant indicator	yes	yes	yes	yes	yes	yes	yes	yes
FIUFLAG	CV	Flag for producing family-level file	yes	yes	yes	yes	yes	yes	yes	yes
SRMFLAG	CV	Self response module status flag	yes	yes	yes	yes	yes	yes	yes	yes
SPANISH	CV	Household identified as needing Spanish interview	yes	yes	yes	yes	yes	yes		
SITEFLG	CV	Whether in augmented site sample	yes	yes	yes	yes	yes	yes		
SITE	CV	Site identifier, site sample	yes	yes	yes	yes	yes	yes	yes	yes
SITEID	CV	Site identifier, augmented site sample	yes	yes	yes	yes	yes	yes		
STABBR	CV	State abbreviation	STABBRX	yes	STABBRX	yes	STABBRX	yes	STABBRX	yes
FIPST	CV	FIPS state code	FIPSTX	yes	FIPSTX	yes	FIPSTX	yes	FIPSTX	yes
FIPSCNTY	CV	FIPS county code		yes		yes		yes		yes
FIPSCODE	CV	FIPS state + county code		yes		yes		yes		yes
MFIPS	CV	Modified FIPS state + county code		yes		yes		yes		

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Survey Administration and Household Composition (includes Section A)

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
MSACAT	CV	Metropolitan area categories	yes	yes	yes	yes	yes	yes	yes	yes
FAMTYPX	CV	Family type	yes	yes	yes	yes	yes	yes	yes	yes
PRIMUNT	CV	Family contains head of household	yes	yes	yes	yes	yes	yes	yes	yes
RELFAM	CV	Person in family is related to head of household	yes	yes	yes	yes	yes	yes	yes	yes
HHTYPE	CV	Household structure	yes	yes	yes	yes	yes	yes	yes	yes
AGEX	a301 or age1	Age	yes	yes	yes	yes	yes	yes	yes	yes
SEX	a401 or sex1	Gender	yes	yes	yes	yes	yes	yes	yes	yes
FTSTUD	a501 or col1	Full time student	yes	yes	yes	yes	yes	yes	yes	yes
HIGRADX	a601 or grd1	Education	yes	yes	yes	yes	yes	yes	yes	yes
RELATEX	a802 or rel2	Relationship to head of household	yes	yes	yes	yes	yes	yes	yes	yes
SPSID	a901 or sps2	Spouse person number	yes	yes	yes	yes	yes	yes	yes	yes
PARENT	a903 or who2	Parent/guardian person number	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section B: Health Insurance**

Variable name for family-level variables	Variable name for person-level variables	Question number	Description	1996-97		1998-99		2000-01		2003	
				Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Insurance coverage											
FPRVJOB	PRIVJOB	b1a	Covered by private insurance through job	yes	yes	yes	yes	yes	yes	yes	yes
FPRVDIR	PRIVDIR	b1b	Covered by private insurance bought directly	yes	yes	yes	yes	yes	yes	yes	yes
FPRVOTH	PRIVOTH	b1c	Covered by private insurance through others	yes	yes	yes	yes	yes	yes	yes	yes
FM CARE	MCARE	b1d	Covered by Medicare	yes	yes	yes	yes	yes	yes	yes	yes
FMCAID	MCAID	b1e	Covered by Medicaid	yes	yes	yes	yes	yes	yes	yes	yes
FMILINS	MILINS	b1f	Covered by military plan	yes	yes	yes	yes	yes	yes	yes	yes
FOTHPUB	OTHPUBX	CV	Covered by state insurance or I.H.S.	yes	yes	yes	yes	yes	yes	yes	yes
FOTHINS	OTHINS	b1i2	Covered by plan not mentioned	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSUR	b1j or bij	Uninsured	yes	yes	yes	yes	yes	yes	yes	yes
	INSTYPE	CV	Current insurance type -- hierarchical	yes	yes	yes	yes	yes	yes	yes	yes
Private plans											
NPRIV		b2	Number of private plans in family	yes	yes	yes	yes	yes	yes	yes	yes
Private plan number 1											
	PRVHLD1	b231	Private plan 1, policyholder	yes	yes	yes	yes	yes	yes	yes	yes
	PRVINS1	b241	Private plan 1, covered	yes	yes	yes	yes	yes	yes	yes	yes
PRVJOB1		b251	Private plan 1, through job	yes	yes	yes	yes	yes	yes	yes	yes
PBKLET1		b26a	Private plan 1, plan information in booklet								yes
PWEB1		b26b	Private plan 1, plan information on website								yes
PRV1Y1	PRV12M1	b291	Private plan 1, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
ESICST1		b31111	Private plan 1 (emp.-spons.), paying partial cost							yes	yes
ESPRM1X		CV	Private plan 1 (emp.-spons.), monthly premium							yes	yes
PVPRM1X		CV	Private plan 1 (not emp.-spons.), monthly premium	yes	yes	yes	yes	yes	yes	yes	yes
PRVRX1		ngi1	Private plan 1 (not emp.-spons.), coverage of prescription medicines								yes
PVHIPM1		ngi2	Private plan 1 (not emp.-spons.), higher premium for pre-existing conditions								yes
PVCVPX1		ngi3	Private plan 1 (not emp.-spons.), family has pre-existing conditions not covered								yes
PRVSIG1	PVSIG1P	b331	Private plan 1, sign up with doctor	yes	yes	yes	yes	yes	yes	yes	yes
PRVREF1	PVREF1P	b341	Private plan 1, need referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVLST1	PVLST1P	b351	Private plan 1, list of doctors	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section B: Health Insurance**

Variable name for family-level variables	Variable name for person-level variables	Question number	Description	1996-97		1998-99		2000-01		2003	
				Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
PRVHMO1	PVHMO1P	b361	Private plan 1, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVPAY1	PVPAY1P	b371	Private plan 1, pay without referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVMOR1		b381	Employer 1 offers more than one plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVBOT1		b391	Employer 1 offers HMO and nonHMO	yes	yes	yes	yes	yes	yes	yes	yes
Private plan number 2											
	PRVHLD2	b232	Private plan 2, policyholder	yes	yes	yes	yes	yes	yes	yes	yes
	PRVINS2	b242	Private plan 2, covered	yes	yes	yes	yes	yes	yes	yes	yes
PRVJOB2		b252	Private plan 2, through job	yes	yes	yes	yes	yes	yes	yes	yes
PBKLET2		b26a	Private plan 2, plan information in booklet								yes
PWEB2		b26b	Private plan 2, plan information on website								yes
PRV1Y2	PRV12M2	b292	Private plan 2, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
ESICST2		b31111	Private plan 2 (emp.-spons.), paying partial cost							yes	yes
ESPRM2X		CV	Private plan 2 (emp.-spons.), monthly premium							yes	yes
PVPRM2X		CV	Private plan 2 (not emp.-spons.), monthly premium	yes	yes	yes	yes	yes	yes	yes	yes
PRVRX2		ngi1	Private plan 2 (not emp.-spons.), coverage of prescription medicines								yes
PVHIPM2		ngi2	Private plan 2 (not emp.-spons.), higher premium for pre-existing conditions								yes
PVCVPX2		ngi3	Private plan 2 (not emp.-spons.), family has pre-existing conditions not covered								yes
PRVSIG2	PVSIG2P	b332	Private plan 2, sign up with doctor	yes	yes	yes	yes	yes	yes	yes	yes
PRVREF2	PVREF2P	b342	Private plan 2, need referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVLST2	PVLST2P	b352	Private plan 2, list of doctors	yes	yes	yes	yes	yes	yes	yes	yes
PRVHMO2	PVHMO2P	b362	Private plan 2, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVPAY2	PVPAY2P	b372	Private plan 2, pay without referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVMOR2		b382	Employer 2 offers more than one plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVBOT2		b392	Employer 2 offers HMO and nonHMO	yes	yes	yes	yes	yes	yes	yes	yes
Private plan number 3											
	PRVHLD3	b233	Private plan 3, policyholder	yes	yes	yes	yes	yes	yes	yes	yes
	PRVINS3	b243	Private plan 3, covered	yes	yes	yes	yes	yes	yes	yes	yes
PRVJOB3		b253	Private plan 3, through job	yes	yes	yes	yes	yes	yes	yes	yes
PBKLET3		b26a	Private plan 3, plan information in booklet								yes
PWEB3		b26b	Private plan 3, plan information on website								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section B: Health Insurance**

Variable name for family-level variables	Variable name for person-level variables	Question number	Description	1996-97		1998-99		2000-01		2003	
				Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
PRV1Y3	PRV12M3	b293	Private plan 3, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
ESICST3		b31111	Private plan 3 (emp.-spons.), paying partial cost							yes	yes
ESPRM3X		CV	Private plan 3 (emp.-spons.), monthly premium							yes	yes
PVPRM3X		CV	Private plan 3 (not emp.-spons.), monthly premium	yes	yes	yes	yes	yes	yes	yes	yes
PRVRX3		ngi1	Private plan 3 (not emp.-spons.), coverage of prescription medicines								yes
PVHIPM3		ngi2	Private plan 3 (not emp.-spons.), higher premium for pre-existing conditions								yes
PVCVPX3		ngi3	Private plan 3 (not emp.-spons.), family has pre-existing conditions not covered								yes
PRVSIG3	PVSIG3P	b333	Private plan 3, sign up with doctor	yes	yes	yes	yes	yes	yes	yes	yes
PRVREF3	PVREF3P	b343	Private plan 3, need referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVLST3	PVLST3P	b353	Private plan 3, list of doctors	yes	yes	yes	yes	yes	yes	yes	yes
PRVHMO3	PVHMO3P	b363	Private plan 3, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVPAY3	PVPAY3P	b373	Private plan 3, pay without referral	yes	yes	yes	yes	yes	yes	yes	yes
PRVMOR3		b383	Employer 3 offers more than one plan	yes	yes	yes	yes	yes	yes	yes	yes
PRVBOT3		b393	Employer 3 offers HMO and nonHMO	yes	yes	yes	yes	yes	yes	yes	yes
Military plan											
MILIN1Y	MIL12M	b411 or b41	Military plan, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
Medicare											
MCRSIGN	MCRSIGP	b51	Medicare, sign up with doctor	yes	yes	yes	yes	yes	yes	yes	yes
MCRREF	MCRREFP	b52	Medicare, need referral	yes	yes	yes	yes	yes	yes	yes	yes
MCRLST	MCRLSTP	b53	Medicare, list of doctors	yes	yes	yes	yes	yes	yes	yes	yes
MCRHMO	MCRHMOP	b54	Medicare, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
MCRHJOB		b55c	Medicare HMO, through job	yes	yes	yes	yes	yes	yes	yes	yes
MCRPAY	MCRPAYP	b56	Medicare, pay without referral	yes	yes	yes	yes	yes	yes	yes	yes
MCRIN1Y	MCR12M	b57	Medicare, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
FMCRSUP	MCRSUP	b59	Covered by Medicare supplemental policy	yes	yes	yes	yes	yes	yes	yes	yes
	MCRSUPJ	b59a or 59a1	Medicare, supplemental through job	yes	yes	yes	yes	yes	yes	yes	yes
	MCRSUPP	b59b	Medicare, supplemental premium	yes	yes						
	MCRSUPU	b59c	Medicare, supplemental premium unit	yes	yes						
Medicare and Medicaid											
FMCRMCD	MCRMCD	b60	Covered by Medicare and Medicaid	yes	yes						

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section B: Health Insurance**

Variable name for family-level variables	Variable name for person-level variables	Question number	Description	1996-97		1998-99		2000-01		2003	
				Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Medicaid											
MCDSIGN	MCDSIGP	b61	Medicaid, sign up with doctor	yes	yes						
MCDREF	MCDREFP	b62	Medicaid, need referral	yes	yes						
MCDLST	MCDLSTP	b63	Medicaid, list of doctors	yes	yes						
MCDHMO	MCDHMOP	b64	Medicaid, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
MCDPAY	MCDPAYP	b66	Medicaid, pay without referral	yes	yes						
MCDIN1Y	MCD12M	b67	Medicaid, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
Other state plans and other insurance plans not mentioned											
STPHD		b71	State/other plan, policyholder number	yes	yes	yes	yes	yes	yes	yes	yes
STSIGN	STSIGP	b72	State/other plan, sign up with doctor	yes	yes						
STREF	STREFP	b73	State/other plan, need referral	yes	yes						
STLST	STLSTP	b74	State/other plan, list of doctors	yes	yes						
STHMO	STHMOP	b75	State/other plan, HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
STPAY	STPAYP	b76	State/other plan, pay without referral	yes	yes						
STIN1Y	ST12M	b77	State/other plan, enrolled in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
Uninsured											
	UNINCOV	b80 or b801	Uninsured, covered anytime in last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
	UNINPLX	b81	Uninsured, covered in last 12 months, type of insurance plan	yes	yes	yes	yes	yes	yes	yes	yes
	UNINHMO	b82	Uninsured, covered in last 12 months, insurance plan was HMO	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR1	b84	Reason uninsured: lost job/changed employers	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR2	b84	Reason uninsured: spouse/parent lost/changed job	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR3	b84	Reason uninsured: divorced/death of spouse/parent	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR4	b84	Reason uninsured: ineligible, age/left school	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR5	b84	Reason uninsured: employer stop offering coverage	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR6	b84	Reason uninsured: became part time/temporary	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR7	b84	Reason uninsured: benefits from employer ran out	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR8	b84	Reason uninsured: cannot afford premiums	yes	yes	yes	yes	yes	yes	yes	yes
	UNINSR9	b84	Reason uninsured: insurance plan raised premiums	yes	yes	yes	yes	yes	yes	yes	yes
	UNINR10	b84	Reason uninsured: insurance co. refused coverage	yes	yes	yes	yes	yes	yes	yes	yes
	UNINR11	b84	Reason uninsured: uninsured, other reason	yes	yes	yes	yes	yes	yes	yes	yes
	UNINR12	b84	Reason uninsured: ineligible/lost public assistance	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section B: Health Insurance**

Variable name for family-level variables	Variable name for person-level variables	Question number	Description	1996-97		1998-99		2000-01		2003	
				Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
	UNINR13	b84	Reason uninsured: failed to re-enroll	yes	yes	yes	yes	yes	yes	yes	yes
	UNINR14	b84	Reason uninsured: unhappy with plan	yes	yes	yes	yes	yes	yes	yes	yes
	UNINMCD	b84a	Believe eligible for Medicaid							yes	yes
Previous health insurance											
	PREINSX	b851	Type of previous insurance	yes	PREINS	yes	PREINS	yes	PREINS	yes	PREINS
	PREHMO	b871	Previous insurance an HMO	yes	yes	yes	yes	yes	yes	yes	yes
	PRECOVX	CV	Previous insurance type -- hierarchical	yes	PRECOV	yes	PRECOV	yes	PRECOV	yes	PRECOV
	CHGINS1	b881	Change insurance, own/spouse job change	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS2	b881	Change insurance, employer offerings changed	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS3	b881	Change insurance, current plan less expensive	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS4	b881	Change insurance, current plan better services	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS5	b881	Change insurance, other	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS6	b881	Change insurance, eligibility status changed	yes	yes	yes	yes	yes	yes	yes	yes
	CHGINS7	b881	Change insurance, not an actual change	yes	yes	yes	yes	yes	yes	yes	yes
	HMOEVR	b921 or b901	Ever enrolled in an HMO	yes	yes	yes	yes	yes	yes	yes	yes
	HMOYRSX	CV	Years enrolled in HMO	yes	yes	yes	yes	yes	yes	yes	yes
Preferences											
	MCHOICE	b951	Willingness to accept limited choice to save money	yes	yes	yes	yes	yes	yes	yes	yes
Insurance denial											
DENIANY		b98	Anyone in family denied health insurance because of poor health	yes	yes						
	DENHLH	b99	Person denied health insurance because of poor health	yes	yes						

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Section C: Resource Use and Unmet Need

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Hospital and emergency room										
HSPSTYN	c121	Number of overnight hospital stays	yes	yes	yes	yes	yes	yes	yes	yes
HSPNODX	CV	Number of overnight hospital stays, excluding childbirth	yes	yes	yes	yes	yes	yes	yes	yes
HSPERX	c151	Number of hospital stays admitted thru emergency room	yes	yes	yes	yes	yes	yes	yes	yes
HSPNITX	c161	Total nights spent in hospital	yes	yes	yes	yes	yes	yes	yes	yes
ERUSENX	c221	Number of emergency room visits without hospital admission	yes	yes	yes	yes	yes	yes	yes	yes
TOTERX	CV	Total number of emergency room visits	yes	yes	yes	yes	yes	yes	yes	yes
ERLSTVS	er1	Last ER visit: for accident/injury vs. other							yes	yes
ERCNTAC	er3	ER visit not for accident/injury: contacted health professional							yes	yes
ERUSEDR	er4	ER visit not for accident/injury: health professional said go to ER							yes	yes
ERTRYDR	er5	ER visit not for accident/injury: tried to contact health professional							yes	yes
EROTHPL	er6	ER visit not for accident/injury: could get treatment somewhere else							yes	yes
ERCHOSE	er8	ER visit not for accident/injury: reason for not going to non-ER place								yes
ERADMIT	er9	ER visit not for accident/injury: resulted in overnight hospital stay							yes	yes
Physicians and other medical professionals										
DRVISNX	c311	Number of doctor visits	yes	yes	yes	yes	yes	yes	yes	yes
DPHYEXM	c3p1	Any visits for routine preventive care			yes	yes	yes	yes	yes	yes
DRTNPRM	c3c1	Any visits for check-up for ongoing health problem			yes	yes	yes	yes	yes	yes
MPVISNX	c331	Number of medical professional visits	yes	yes	yes	yes	yes	yes	yes	yes
Surgery										
SURGNX	c421	Total number of surgeries	yes	yes	yes	yes	yes	yes	yes	yes
SURGNTX	c431	Number of surgeries with overnight hospital stay	yes	yes	yes	yes	yes	yes	yes	yes
SURGOPX	CV	Number of outpatient surgeries	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Section C: Resource Use and Unmet Need

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Mental health										
MENTAL	c511	Any mental health visits	yes	yes	yes	yes	yes	yes	yes	yes
Home health care										
NURCARE	c521	Any home health visits	yes	yes						
Preventive services										
FLUSHOT	c531	Had flu shot	yes	yes	yes	yes	yes	yes		
MAMMGM	c611	Ever had a mammogram	yes	yes	yes	yes	yes	yes		
MAMLASX	c621	Time since last mammogram	yes	yes	yes	yes	yes	yes		
Unmet need										
UNMET	c811	Did not get needed medical care	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFF	c821	Postponed needed medical care	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR1	c831	Postponed care, worry about cost	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR2	c831	Postponed care, would not accept the insurance	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR3	c831	Postponed care, health plan would not pay	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR4	c831	Postponed care, could not get appointment soon	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR5	c831	Postponed care, can not be at clinic when open	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR6	c831	Postponed care, takes too long to get to doctor	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR7	c831	Postponed care, could not get through on telephone	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR8	c831	Postponed care, wait in the office too long	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR9	c831	Postponed care, don't know where to go	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF10	c831	Postponed care, can't get referral from doctor	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF11	c831	Postponed care, other related to health system	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF12	c831	Postponed care, change in health insurance	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF13	c831	Postponed care, other insurance-related problems	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF14	c831	Postponed care, no time/too busy	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF15	c831	Postponed care, can't get off work	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF16	c831	Postponed care, transportation problems	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF17	c831	Postponed care, caring for family members	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF18	c831	Postponed care, too sick	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF19	c831	Postponed care, bad experience with doctor	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF20	c831	Postponed care, didn't think serious enough	yes	yes	yes	yes	yes	yes	yes	yes
PUTOF21	c831	Postponed care, too lazy/procrastinated	yes	yes	yes	yes	yes	yes	yes	yes
PUTOFR0	c831	Postponed care, other reason to put off care	yes	yes	yes	yes	yes	yes	yes	yes

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CTS Household Survey
Section C: Resource Use and Unmet Need

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
UMETDR	unmet2	Unmet need, saw doctor							yes	yes
UMETDRX	unmet2a	Unmet need, postponed seeing doctor							yes	yes
UMETSP	unmet3	Unmet need, referred to specialist							yes	yes
UMETSPX	unmet3a	Unmet need, action after specialist referral							yes	yes
UMETTST	unmet4	Unmet need, doctor ordered tests							yes	yes
UMETTSTX	unmet4a	Unmet need, action after tests ordered							yes	yes
UMETPRC	unmet5	Unmet need, doctor ordered medical procedure							yes	yes
UMETPRX	unmet5a	Unmet need, action after medical procedure ordered							yes	yes
UMETMDC	c841	Can't afford needed prescription medicines					yes	yes	yes	yes
GETMED	c90	Easier or harder to get medical care	yes	yes						
Out-of-pocket costs										
MEDCSTA, MEDCSTB	CV	Out-of-pocket medical costs	MEDCSTX	yes	MEDCSTX	yes	MEDCSTX	yes	MEDCSTX	yes
Problems paying medical bills										
BILLPRB	c94	Any problems paying medical bills							yes	yes
BILLCOL	c95a	Medical bills, contacted by collection agency							yes	yes
BILLNEC	c95b	Medical bills, problems paying for other necessities							yes	yes
BILLMAJ	c95c	Medical bills, postponed major purchases							yes	yes
BILLSAV	c95d	Medical bills, used savings							yes	yes
BILLBOR	c95e	Medical bills, borrowed							yes	yes

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CTS Household Survey
Section D: Usual Source of Care and Patient Trust in Physician

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Usual source of care										
USCARE	d101	Has usual source of care	yes	yes	yes	yes	yes	yes	yes	yes
USCTYPE	d111	Usual source of care – type of place	yes	yes	yes	yes	yes	yes	yes	yes
USCPAY	sn1	If uninsured: paying full vs. reduced price at usual source of care								yes yes
USCPROF	d121	Type of provider at usual source of care	yes	yes	yes	yes	yes	yes	yes	yes
USCSAME	d131	See same provider at usual source of care	yes	yes	yes	yes	yes	yes	yes	yes
USCCHG	d141	Any change in usual source in the last 12 months	yes	yes	yes	yes	yes	yes	yes	yes
USCRCHG	d151	Reason for change in usual source of care	yes	yes	yes	yes	yes	yes	yes	yes
USCRHLH	d161	Insurance reason for change in usual source of care			yes	yes	yes	yes	yes	yes
USCROTH	d171	Other reason for change in usual source of care			yes	yes	yes	yes	yes	yes
USCNOR1	d201	Reason for change: seldom/never sick	yes	yes						
USCNOR2	d201	Reason for change: recently moved into the area	yes	yes						
USCNOR3	d201	Reason for change: usual source not available	yes	yes						
USCNOR4	d201	Reason for change: no insurance	yes	yes						
USCNOR5	d201	Reason for change: other reason	yes	yes						
Place offering affordable medical care (for families with any uninsured members)										
AFFRDCR	sn2	Any place offering affordable medical care								yes yes
AFFDTYP	sn3	Type of place offering affordable medical care								yes
Reduced-price usual source of care / place offering affordable medical care (for families with any uninsured members)										
AFFTRAV	CV	Travel time								yes
AFFSEEN	sn5	Any visit in past 12 months								yes yes
AFFRSON	sn6	Reason not visiting: whether any reason given								yes yes
AFFRSN1	sn6	Reason not visiting: no need								yes yes
AFFRSN2	sn6	Reason not visiting: stigma								yes yes
AFFRSN3	sn6	Reason not visiting: not eligible								yes yes
AFFRSN4	sn6	Reason not visiting: too far away								yes yes
AFFRSN5	sn6	Reason not visiting: wait too long								yes yes
AFFRSN6	sn6	Reason not visiting: needed services not available								yes yes
AFFRSN7	sn6	Reason not visiting: poor quality care								yes yes
AFFRSN8	sn6	Reason not visiting: bad neighborhood								yes yes
AFFRSN9	sn6	Reason not visiting: no transportation								yes yes

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CTS Household Survey
Section D: Usual Source of Care and Patient Trust in Physician

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
AFFRN10	sn6	Reason not visiting: language barrier							yes	yes
AFFRN11	sn6	Reason not visiting: hours not convenient							yes	yes
AFFRN12	sn6	Reason not visiting: other reason							yes	yes
Patient trust in physician										
DRNOREF	d311	Agreement: Doctor may not refer when needed	yes	yes	yes	yes	yes	yes	yes	yes
DRMETND	d321	Agreement: Doctor puts medical needs first	yes	yes	yes	yes	yes	yes	yes	yes
DRINFLU	d331	Agreement: Doctor influenced by insurance company rules	yes	yes	yes	yes	yes	yes	yes	yes
DRUNNEC	d341	Agreement: Doctor might perform unnecessary tests or procedures	yes	yes	yes	yes	yes	yes	yes	yes
Attitudes about medical care										
DRFEELB	d351	True or false: Visit doctor as soon as feeling bad							yes	yes
DRAVOID	d361	True or false: Avoid doctors							yes	yes

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Satisfaction with health care										
CRSAFX	CV	Satisfaction with family's health care	yes	yes	yes	yes	yes	yes	yes	yes
Satisfaction with choice of physicians										
DRCHOCX	CV	Satisfaction with choice of primary care doctors	yes	yes	yes	yes	yes	yes	yes	yes
SPNEED	e141, k14	Needed a specialist	yes	yes	yes	yes	yes	yes	yes	yes
SPSEEN	cahps12, kcahps12	Saw a specialist in last 12 months					yes	yes	yes	yes
SPCHOCX	CV	Satisfaction with choice of specialists	yes	yes	yes	yes	yes	yes	yes	yes
Problems and satisfaction with health plan										
DIFFLNG	cahpslang	Different language than health care practitioner							yes	yes
GETREFR	cahps10, kcahps10	Problem getting referral to specialist							yes	yes
REQAPRVA	cahps23s	Needed health plan approval, adults							yes	yes
GETAPRVA	cahps23	Problem waiting for health plan approval, adults							yes	yes
REQPWRK	cahps37s, kcahps37s	Had to fill out health plan paperwork							yes	yes
PAPRWRKA	cahps37	Problem filling out health plan paperwork, adults							yes	yes
BNFSAFX	CV (sp14, sp14x, ksp14, ksp14x)	Satisfaction: amount paying for health care							yes	yes
RATING	cahps38, kcahps38	Rating for the health plan					yes	yes	yes	yes
Accompanied child										
TAKEID	e16x	Person number of family member who took child to doctor	yes	yes	yes	yes	yes	yes	yes	yes
Health problem or preventive care										
SICKCR	e161, k16	Visited doctor for health problem	yes	yes	yes	yes	yes	yes	yes	yes
CHKASIK	e181, k18	Had visit for health problem, any preventive care	yes	yes	yes	yes	yes	yes	yes	yes
CHECKUP	e201, k20	No visit for health problem, any preventive care	yes	yes	yes	yes	yes	yes	yes	yes
Last physician visit										
DRORSP	e221, k22	Saw doctor or specialist for last visit	yes	yes	yes	yes	yes	yes	yes	yes
LSTYPE	CV	Last visit, sickness or preventive	yes	yes	yes	yes	yes	yes	yes	yes
VISCUR	CV	Last visit, under current insurance plan	yes	yes	yes	yes	yes	yes	yes	yes
LSTUSC	e241	Last visit, to usual place	yes	yes	yes	yes			yes	yes
LSTUSCA	e241	Last visit, to usual place, adults					yes	yes		
LSTOER	E241	Last visit, to an emergency room	yes	yes	yes	yes			yes	yes
LSTOERA	E241	Last visit, to an emergency room, adults					yes	yes		

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
LSTAPP	e251	Last visit, had appointment	yes	yes	yes	yes			yes	yes
LSTAPPA	e251	Last visit, had appointment, adults					yes	yes		
LSTAPPX	CV	Last visit, time until appointment	yes	yes	LSTAPXX	yes			LSTAPXX	yes
LSTATAX	CV	Last visit, time until appointment, adults					LSTATXX	yes		
LSTWATX	CV	Last visit, waiting time in doctor's office	yes	yes	yes	yes	yes	yes	yes	yes
LSTRAVX	CV	Last visit, travel time	yes	yes	LSTRAXX	yes	LSTRAXX	yes	LSTRAXX	yes
LSTHOR	e301, k30	Thoroughness of the exam	yes	yes	yes	yes	yes	yes	yes	yes
LSTLISN	e311, k31	How well doctor listened	yes	yes	yes	yes	yes	yes	yes	yes
LSTEXPL	e321, k32	How well doctor explained	yes	yes	yes	yes	yes	yes	yes	yes
UNINFEE	e331	Physician charge for most recent visit								yes
UNINPAY	e341	Amount paid for most recent visit								yes
Health status										
GENHLH	CV	General health condition	yes	yes	yes	yes	yes	yes	yes	yes
LMTMACT	e411	Limited in moderate activities	yes	yes	yes	yes	yes	yes		
LMTSTR	e421	Limited in climbing stairs	yes	yes	yes	yes	yes	yes		
PHYLESS	e431	Accomplished less because of physical health	yes	yes	yes	yes	yes	yes		
PHYACT	e441	Physical health limited work	yes	yes	yes	yes	yes	yes		
EMOLESS	e451	Accomplished less because of emotional problems	yes	yes	yes	yes	yes	yes		
EMOACT	e461	Emotional problems limited work	yes	yes	yes	yes	yes	yes		
PAININT	e471	Pain interfered with work	yes	yes	yes	yes	yes	yes		
LMTSOC	e481	Physical health or emotional problems interfered socially	yes	yes	yes	yes	yes	yes		
FLCALM	e491	Felt calm and peaceful	yes	yes	yes	yes	yes	yes		
FLCALM4	e491	Felt calm and peaceful, not imputed							yes	yes
ENERGY	e501	Had a lot of energy	yes	yes	yes	yes	yes	yes		
FLDOWN	e511	Felt downhearted and blue	yes	yes	yes	yes	yes	yes		
FLDOWN4	e511	Felt downhearted and blue, not imputed							yes	yes
PCS12	CV	SF-12 Physical Component Summary	yes	yes	yes	yes	yes	yes		
MCS12	CV	SF-12 Mental Component Summary	yes	yes	yes	yes	yes	yes		
Happiness										
HAPPY	gss157	Overall level of happiness					yes	yes	yes	yes
Chronic conditions (adults)										
HAVBABY	cc1	Had a baby in last two years				yes		yes		yes

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
ACNE	cc2a	Saw doctor for acne				yes				
HDACHE	cc2b	Saw doctor for headaches				yes				
UTRNBLD	cc2c	Saw doctor for abnormal uterine bleeding				yes		yes		yes
ALCHPRM	cc2d	Saw doctor for alcohol related problems				yes				
CATRCT	cc3a	Cataracts				yes				
CATRCTX	cc3a	Saw doctor for cataracts				yes				
DIABET	cc3b	Diabetes				yes		yes		yes
DIABETX	cc3b	Saw doctor for diabetes				yes		yes		yes
ARTHRS	cc3c	Arthritis				yes		yes		yes
ARTHRSX	cc3c	Saw doctor for arthritis				yes		yes		yes
RHARTHR	c3AC	Rheumatoid arthritis				yes				
ASTHMA	cc3d	Asthma				yes		yes		yes
ASTHMAX	cc3d	Saw doctor for asthma				yes		yes		yes
COPD	cc3e	Chronic obstructive pulmonary disease				yes		yes		yes
COPDX	cc3e	Saw doctor for chronic obstructive pulmonary disease				yes		yes		yes
ATLFBR	cc3f	Atrial fibrillation				yes				
ATLFBRX	cc3f	Saw doctor for atrial fibrillation				yes				
HYPTEN	cc3g	Hypertension				yes		yes		yes
HYPTENX	cc3g	Saw doctor for hypertension				yes		yes		yes
HICHOL	cc3h	High cholesterol				yes				
HICHOLX	cc3h	Saw doctor for high cholesterol				yes				
HRTDIS	cc3i	Coronary heart disease						yes		yes
HRTDISX	cc3i	Saw doctor for coronary heart disease						yes		yes
ATHRSCL	cc4a	Atherosclerosis				yes				
ATHRSCLX	cc4a	Saw doctor for atherosclerosis				yes				
ISCHMC	cc4b	Ischemic heart disease				yes				
ISCHMCX	cc4b	Saw doctor for ischemic heart disease				yes				
ANGINA	cc4c	Angina				yes				
ANGINAX	cc4c	Saw doctor for angina				yes				
CABG	c4ae	Angioplasty				yes				
CHF	cc4d	Congestive heart disease				yes				
CHFX	cc4d	Saw doctor for congestive heart disease				yes				

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
DIURTC	c4af	Ever taken diuretics for heart condition				yes				
STROKE	cc4e	Stroke				yes				
STROKEX	cc4e	Saw doctor for stroke				yes				
BRTCAN	cc5b	Breast cancer				yes				
BRTCANX	cc5b	Saw doctor for breast cancer				yes				
SKNCAN	cc5c	Skin cancer				yes		yes		yes
SKNCANX	cc5c	Saw doctor for skin cancer				yes		yes		yes
LNGCAN	cc5d	Lung cancer				yes				
LNGCANX	cc5d	Saw doctor for lung cancer				yes				
CLNCAN	cc5e	Colon cancer				yes				
CLNCANX	cc5e	Saw doctor for colon cancer				yes				
PRSCAN	cc5f	Prostate cancer				yes				
PRSCANX	cc5f	Saw doctor for prostate cancer				yes				
PRSBGN	c5f4	Benign prostate disease				yes		yes		yes
PRSBGNX	c5f4	Saw doctor for benign prostate disease				yes		yes		yes
CANCER	cc5h	Cancer other than skin cancer						yes		yes
CANCERX	cc5h	Saw doctor for cancer other than skin cancer						yes		yes
HERNIA	cc6a	Hernia				yes				
HERNIAX	cc6a	Saw doctor for hernia				yes				
ULCER	cc6b	Ulcer				yes				
ULCERX	cc6b	Saw doctor for ulcer				yes				
GASTRS	cc6c	Gastritis				yes				
GASTRSX	cc6c	Saw doctor for gastritis				yes				
HIV	cc6d	HIV or AIDS				yes				
HIVX	cc6d	Saw doctor for HIV or AIDS				yes				
DPRESN	cc6e	Depression				yes		yes		yes
DPRESNX	cc6e	Saw doctor for depression				yes		yes		yes
MEDPROB	cc7	Any doctor visit for serious medical problem						yes		yes
Symptom response module										
SYNECK	srm1a	Back or neck pain								yes
SYBRETH	srm1b	Shortness of breath								yes
SYFAINT	srm1c	Fainting or loss of consciousness								yes
SYBLUR	srm1d	Difficulty seeing								yes

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
SYHACHE	srm1e	Headaches								yes
SYCOUGH	srm1f	Cough								yes
SYSAD	srm1h	Depression								yes
SYANXTY	srm1i	Anxiety								yes
SYHIP	srm1j	Pain in hip/knee/leg								yes
SYANKLE	srm1k	Sprained ankle								yes
SYWEAK	srm1m	Fatigue								yes
SYLUMP	srm1q	Lump in breast								yes
SYURINE	srm1u	Difficulty urinating								yes
SYHEAR	srm1v	Difficulty hearing								yes
SYCHEST	srm1w	Chest pain								yes
SYLINK	CV	Health problem used in questions srm2a – srm9a								yes
SYMAPPR	CV	When health problem first appeared								yes
SYMPREG	srm2c	Problem is associated with pregnancy								yes
SYMTODR	srm3	Saw health professional about problem								yes
DRSEE	srm4	How soon saw health professional								yes
DRTALK	srm5	Telephoned health professional about problem								yes
DRCALL	srm6	How soon telephoned health professional								yes
DRNEED	srm7a	Needed medical visit instead of phone call								yes
DRCNTAC	srm7b	Needed to contact health professional								yes
DRTRYGO	srm7c	Tried to see health professional								yes
SYMLMT	srm8	Problem limited usual activities								yes
SYMLMTD	srm8a	Number of days limited in usual activities								yes
SYMMISS	srm9	Missed work because of problem								yes
SYMMSSD	srm9a	Number of days of work missed								yes
SICKLVE	srm10	Have sick leave as job benefit								yes
Smoking										
TAKRISK	e521	Risk-taker	yes	yes	yes	yes	yes	yes	yes	yes
SMKEVR	e601	Smoked 100 or more cigarettes in lifetime	yes	yes	yes	yes	yes	yes	yes	yes
SMKNOW	e611	Current level of smoking	yes	yes	yes	yes	yes	yes	yes	yes
SMKNUM	e621	Smoke everyday: number of cigarettes per day	yes	yes	yes	yes	yes	yes		
SMKDAY5	e631	Smoke some days: number of days smoked in past month	yes	yes	yes	yes	yes	yes		

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CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
SMKNDAY	e641	Smoke some days: number of cigarettes per day	yes	yes	SMKNDAX	yes	SMKNDAX	yes		
SMKQUIT	e651	How long since quitting smoking	yes	yes	yes	yes	yes	yes		
SMKTRYQ	e661	Tried to quit in last 12 months	yes	yes	yes	yes	yes	yes		
SMKADV	e671	Doctor's advice to quit smoking	yes	yes	yes	yes				
Body mass index										
BMIX	CV	Body mass index, continuous, ages 18 and older							yes	yes
BMICAT	CV	Body mass index, categories, ages 21 and older							yes	yes
Chronic conditions (children)										
KACNE	ee2a	Saw doctor for acne				yes				
KHDACHE	ee2b	Saw doctor for headaches				yes				
KEARINF	ee2c	Saw doctor for four or more ear infections				yes		yes		
KEARTUB	ee3	Ever had tube placed in ears				yes				
KSCKLE	ee4a	Sickle cell disease				yes				
KSCKLEX	ee4a	Saw doctor for sickle cell disease				yes				
KTB	ee4b	Tuberculosis				yes				
KTBX	ee4b	Saw doctor for tuberculosis				yes				
KASTHMA	ee4c	Asthma				yes		yes		
KASTHMX	ee4c	Saw doctor for asthma				yes		yes		
KADHA	ee4d	Attention deficit hyperactivity disorder (ADHD)				yes		yes		
KADHAX	ee4d	Saw doctor for ADHD				yes		yes		
KDIABT	ee4e	Diabetes				yes				
KDIABTX	ee4e	Saw a doctor for diabetes				yes				
KMORECR	ee5	Child needs more medical care than is usual						yes		
KLONGCR	ee5a	Child's high health care needs last at least 12 months						yes		
Children with special health care needs										
KRXUSE	scsn1	Child needs prescription medicine								yes
KRXUSEX	scsn1a	Prescription needed because of health condition								yes
KRXUSEY	scsn1b	Condition lasting at least 12 months								yes
KMORE	scsn2	Child needs more services than is usual								yes
KMOREX	scsn2a	Services needed because of health condition								yes
KMOREY	scsn2b	Condition lasting at least 12 months								yes
KLIMIT	scsn3	Child is limited in ability to do usual things								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Section E: Health Care Satisfaction and Ratings, Health Status, and Consumer Information

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
KLIMITX	scsn3a	Limited ability because of health condition								yes
KLIMITY	scsn3b	Condition lasting at least 12 months								yes
KTHERA	scsn4	Child needs special therapy								yes
KTHERAX	scsn4a	Therapy needed because of health condition								yes
KTHERAY	scsn4b	Condition lasting at least 12 months								yes
KCOUNS	scsn5	Child needs treatment/counseling for emotional/developmental/behavioral problem								yes
KCOUNSX	scsn5a	Treatment needed because of health condition								yes
KCOUNSY	scsn5b	Condition lasting at least 12 months								yes
CSHCN	CV	Child has special health care need							yes	yes
Consumer information seeking										
GETINF1	ra34, ra34c	Obtained health information on the internet					yes	yes		
GETINF2	ra34, ra34c	Obtained health information from friends					yes	yes		
GETINF3	ra34, ra34c	Obtained health information from TV or radio					yes	yes		
GETINF4	ra34, ra34c	Obtained health information from books or magazines					yes	yes		
GETINF5	ra34, ra34c	Obtained health information from other source (excluding doctor, health care professional, or health care organization)					yes	yes		
GETINF6	ra34, ra34c	Obtained health information from health care professional (not doctor)					yes	yes		
GETINF7	ra34, ra34c	Obtained health information from health care organization					yes	yes		
DRINF	ra36, ra36c	Mentioned medical information to doctor					yes	yes		
TESTINF	ranew, newrac	Doctor acted because of patient information					yes	yes		

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Section F: Employment and Employer Insurance Offering

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Employment										
HAVEBUS	f101	Have a business or farm	yes	yes	yes	yes	yes	yes	yes	yes
WRKPAY	f111	Worked for pay last week	yes	yes	yes	yes	yes	yes	yes	yes
WORK2ND	f121	Worked more than one job last week	yes	yes	yes	yes	yes	yes	yes	yes
HRSWKX	f131	Hours per week at (main) job	yes	yes	yes	yes	yes	yes	yes	yes
HRWK2NX	f141	Hours per week at second job	yes	yes	yes	yes	yes	yes	yes	yes
EMPTYPX	f201	Type of employer	yes	yes	yes	yes	yes	yes	yes	yes
FIRMSZX	CV	Number of employees at all locations	yes	yes	yes	yes	yes	yes	yes	yes
WAGEHRX	CV	Hourly wage	yes	yes	yes	yes	yes	yes	yes	yes
INDSTRY	CV	Type of industry	yes	yes	yes	yes	yes	yes	yes	yes
INUNION	f251	Member of union								yes
CVUNION	f261	Covered by union contract								yes
Employer insurance offering										
INSMJOB	f401	Get insurance from main job	yes	yes	yes	yes	yes	yes	yes	yes
EMPOFER	f501	Employer/union offers insurance	yes	yes	yes	yes	yes	yes	yes	yes
WHOOFER	f5011	Health insurance offered by employer vs. union								yes
ELIGIB	f511	Employer insurance, eligibility	yes	yes	yes	yes	yes	yes	yes	yes
ELUNINS	f521	Employer insurance, reason for not participating (if eligible and uninsured)	yes	yes	yes	yes	yes	yes		
ELUNINS4	f521	Employer insurance, reason for not participating (if eligible)							yes	yes
INELIGR	f531	Employer insurance, reason ineligible	yes	yes	yes	yes	yes	yes	yes	yes
EMPMULT	f541	Employer offers multiple plans	yes	yes	yes	yes	yes	yes	yes	yes
EMPHMO	f551	Employer offers an HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
EMPBOTH	f561	Employer offers nonHMO plan	yes	yes	yes	yes	yes	yes	yes	yes
OFFERED	CV	Employer insurance offer	yes	yes	yes	yes	yes	yes	yes	yes
OFRMULT	CV	Employer offers multiple plans	yes	yes	yes	yes	yes	yes	yes	yes
OFRHMO	CV	Employer offers an HMO plan	yes	yes	yes	yes	yes	yes	yes	yes
OFRNHMO	CV	Employer offers nonHMO plan	yes	yes	yes	yes	yes	yes	yes	yes
OFRBOTH	CV	Employer offers HMO and nonHMO	yes	yes	yes	yes	yes	yes	yes	yes
EMPLESS	f611	Employer offers plan with lower premium								yes
EMPSAME	f621	Employer offers plan with same premium								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

CTS Household Survey
Section F: Employment and Employer Insurance Offering

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
CHGPLDR	f63a1	Cost of doctor visit in employer's plan								yes
CHGPLRX	f63b1	Cost of prescription in employer's plan								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section G: Income and Race**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
Family income										
FAMINCX	CV	Annual family income	yes	yes	yes	yes	yes	yes	yes	yes
CENSINX	CV	Annual Census family income	yes	yes	yes	yes	yes	yes	yes	yes
POVLEV	CV	Census family poverty level	yes	yes	yes	yes	yes	yes	yes	yes
Race, ethnicity, and U.S. citizenship										
HISPAN	g20 or g201	Hispanic origin	yes	yes	yes	yes	yes	yes	yes	yes
RACEX	CV	Race	yes	yes	yes	yes	yes	yes		
RACEREX	CV	Race, with separate Hispanic ethnicity	yes	yes	yes	yes	yes	yes		
RACNEWX	CV	Race, 2003 question							yes	yes
RACETHX	CV	Race, 2003 question, with separate Hispanic ethn.							yes	yes
CITIZEN	g301	U.S. citizen								yes
BORNCTZ	g311	Born a U.S. citizen								yes
YRSUSX	CV	Number of years in the U.S.								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Section H: Closing**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
PHNOTHX	h30	Number of other telephone numbers in household	yes	yes	yes	yes	yes	yes		
PHNOTH4X	h30	Number of other telephone numbers in household, excluding cell phones							yes	yes
PHNOTHR	h31	Reason for other telephone numbers	yes	yes	yes	yes	yes	yes	yes	yes
NOPHN	h32	No working telephone for 2 or more weeks	yes	yes	yes	yes	yes	yes	yes	yes
NOPHNMX	h33	Number of months with no working telephone	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Weights and Sampling Variables**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
FSUX	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
NFSUHX	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
NFSUX	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
PPSU	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
PPSUH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
PSTRATA	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
PSTRATAH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
PSTRHWR	CV	See user's guide discussion of estimation.					yes	yes		
PSTRTOTH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
PSTRTOT3	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
PPSUHWRX	CV	See user's guide discussion of estimation.					yes	yes		
PSUWRX	CV	See user's guide discussion of estimation.					yes	yes	yes	yes
PIH – P7H	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
PIX – P7X	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
SECSTRA	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
SECSTRAH	CV	See user's guide discussion of estimation.			yes	yes	yes	yes		
SITE_STR	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes	yes	yes
STRATAWR	CV	See user's guide discussion of estimation.					yes	yes	yes	yes
STRATUM	CV	See user's guide discussion of estimation.	yes	yes	yes	yes	yes	yes		
WTFAM1	CV	Family weight, site est., augmented site sample	yes	yes	yes	yes	yes	yes		
WTFAM2	CV	Family weight, national est., site sample	yes	yes	yes	yes	yes	yes	yes	yes
WTFAM3	CV	Family weight, national est., supplemental sample	yes	yes	yes	yes	yes	yes		
WTFAM4	CV	Family weight, national est., combined sample	yes	yes	yes	yes	yes	yes		
WTFAM5	CV	Family weight, national est., augmented site sample			yes	yes	yes	yes		
WTFAM6	CV	Family weight, site est., site sample							yes	yes
WTPER1	CV	Person weight, site est., augmented site sample	yes	yes	yes	yes	yes	yes		
WTPER2	CV	Person weight, national est., site sample	yes	yes	yes	yes	yes	yes	yes	yes
WTPER3	CV	Person weight, national est., supplemental sample	yes	yes	yes	yes	yes	yes		
WTPER4	CV	Person weight, national est., combined sample	yes	yes	yes	yes	yes	yes		
WTPER5	CV	Person weight, national est., augmented site sample			yes	yes	yes	yes		
WTPER6	CV	Person weight, site est., site sample							yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Weights and Sampling Variables**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
WTSITE	CV	See user's guide discussion of estimation.	yes	yes						
WTSRM1	CV	SRM weight, site est., augmented site sample	yes	yes						
WTSRM2	CV	SRM weight, national est., site sample	yes	yes						
WTSRM3	CV	SRM weight, national est., supplemental sample	yes	yes						
WTSRM4	CV	SRM weight, national est., combined sample	yes	yes						
WTSYM2	CV	Symptom weight, national est., site sample								yes
WTSYM6	CV	Symptom weight, site est., site sample								yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Imputation Flags**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
_ELIGIB	CV	Imputation flag for ELIGIB	yes	yes	yes	yes	yes	yes	yes	yes
_EMOACT	CV	Imputation flag for EMOACT	yes	yes	yes	yes	yes	yes		
_EMOLESS	CV	Imputation flag for EMOLESS	yes	yes	yes	yes	yes	yes		
_EMPBOTH	CV	Imputation flag for EMPBOTH	yes	yes	yes	yes	yes	yes	yes	yes
_EMPHMO	CV	Imputation flag for EMPHMO	yes	yes	yes	yes	yes	yes	yes	yes
_EMPMULT	CV	Imputation flag for EMPMULT	yes	yes	yes	yes	yes	yes	yes	yes
_EMPOFER	CV	Imputation flag for EMPOFER	yes	yes	yes	yes	yes	yes	yes	yes
_EMPTYPX	CV	Imputation flag for EMPTYPX	yes	yes	yes	yes	yes	yes	yes	yes
_ENERGY	CV	Imputation flag for ENERGY	yes	yes	yes	yes	yes	yes		
_ERUSENX	CV	Imputation flag for ERUSENX	yes	yes	yes	yes	yes	yes	yes	yes
_FIRMSZX	CV	Imputation flag for FIRMSZX	yes	yes	yes	yes	yes	yes	yes	yes
_FLCALM	CV	Imputation flag for FLCALM	yes	yes	yes	yes	yes	yes		
_FLDOWN	CV	Imputation flag for FLDOWN	yes	yes	yes	yes	yes	yes		
_GENHLH	CV	Imputation flag for GENHLH	yes	yes	yes	yes	yes	yes	yes	yes
_HIGRADX	CV	Imputation flag for HIGRADX	yes	yes	yes	yes	yes	yes	yes	yes
_HRSWKX	CV	Imputation flag for HRSWKX	yes	yes	yes	yes	yes	yes	yes	yes
_LMTMACT	CV	Imputation flag for LMTMACT	yes	yes	yes	yes	yes	yes		
_LMTSOC	CV	Imputation flag for LMTSOC	yes	yes	yes	yes	yes	yes		
_LMTSTR	CV	Imputation flag for LMTSTR	yes	yes	yes	yes	yes	yes		
_MCDHMO	CV	Imputation flag for MCDHMO	yes	yes	yes	yes	yes	yes	yes	yes
_MCDLST	CV	Imputation flag for MCDLST	yes	yes						
_MCDPAY	CV	Imputation flag for MCDPAY	yes	yes						
_MCDREF	CV	Imputation flag for MCDREF	yes	yes						
_MCDSIGN	CV	Imputation flag for MCDSIGN	yes	yes						
_MCRHMOP	CV	Imputation flag for MCRHMOP	yes	yes	yes	yes	yes	yes	yes	yes
_MCRLSTP	CV	Imputation flag for MCRLSTP	yes	yes	yes	yes	yes	yes	yes	yes
_MCRPAYP	CV	Imputation flag for MCRPAYP	yes	yes	yes	yes	yes	yes	yes	yes
_MCRREFP	CV	Imputation flag for MCRREFP	yes	yes	yes	yes	yes	yes	yes	yes
_MCRSIGP	CV	Imputation flag for MCRSIGP	yes	yes	yes	yes	yes	yes	yes	yes
_MCS12	CV	Imputation flag for MCS12	yes	yes	yes	yes	yes	yes		
_MENTAL	CV	Imputation flag for MENTAL	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

**CTS Household Survey
Imputation Flags**

Variable name	Question number	Description	1996-97		1998-99		2000-01		2003	
			Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use	Public Use	Restr. Use
_NURCARE	CV	Imputation flag for NURCARE	yes	yes						
_OFFERED	CV	Imputation flag for OFFERED	yes	yes	yes	yes	yes	yes	yes	yes
_OFRBOTH	CV	Imputation flag for OFRBOTH	yes	yes	yes	yes	yes	yes	yes	yes
_OFRHMO	CV	Imputation flag for OFRHMO	yes	yes	yes	yes	yes	yes	yes	yes
_OFRMULT	CV	Imputation flag for OFRMULT	yes	yes	yes	yes	yes	yes	yes	yes
_OFRNHMO	CV	Imputation flag for OFRNHMO	yes	yes	yes	yes	yes	yes	yes	yes
_PAININT	CV	Imputation flag for PAININT	yes	yes	yes	yes	yes	yes		
_PCS12	CV	Imputation flag for PCS12	yes	yes	yes	yes	yes	yes		
_PHYACT	CV	Imputation flag for PHYACT	yes	yes	yes	yes	yes	yes		
_PHYLESS	CV	Imputation flag for PHYLESS	yes	yes	yes	yes	yes	yes		
_PRVHMO1	CV	Imputation flag for PRVHMO1	yes	yes	yes	yes	yes	yes	yes	yes
_PRVHMO2	CV	Imputation flag for PRVHMO2	yes	yes	yes	yes	yes	yes	yes	yes
_PRVHMO3	CV	Imputation flag for PRVHMO3	yes	yes	yes	yes	yes	yes	yes	yes
_PRVLST1	CV	Imputation flag for PRVLST1	yes	yes	yes	yes	yes	yes	yes	yes
_PRVLST2	CV	Imputation flag for PRVLST2	yes	yes	yes	yes	yes	yes	yes	yes
_PRVLST3	CV	Imputation flag for PRVLST3	yes	yes	yes	yes	yes	yes	yes	yes
_PRVPAY1	CV	Imputation flag for PRVPAY1	yes	yes	yes	yes	yes	yes	yes	yes
_PRVPAY2	CV	Imputation flag for PRVPAY2	yes	yes	yes	yes	yes	yes	yes	yes
_PRVPAY3	CV	Imputation flag for PRVPAY3	yes	yes	yes	yes	yes	yes	yes	yes
_PRVREF1	CV	Imputation flag for PRVREF1	yes	yes	yes	yes	yes	yes	yes	yes
_PRVREF2	CV	Imputation flag for PRVREF2	yes	yes	yes	yes	yes	yes	yes	yes
_PRVREF3	CV	Imputation flag for PRVREF3	yes	yes	yes	yes	yes	yes	yes	yes
_PRVSIG1	CV	Imputation flag for PRVSIG1	yes	yes	yes	yes	yes	yes	yes	yes
_PRVSIG2	CV	Imputation flag for PRVSIG2	yes	yes	yes	yes	yes	yes	yes	yes
_PRVSIG3	CV	Imputation flag for PRVSIG3	yes	yes	yes	yes	yes	yes	yes	yes
_STHMO	CV	Imputation flag for STHMO	yes	yes	yes	yes	yes	yes	yes	yes
_STLST	CV	Imputation flag for STLST	yes	yes						
_STPAY	CV	Imputation flag for STPAY	yes	yes						
_STREF	CV	Imputation flag for STREF	yes	yes						
_STSIGN	CV	Imputation flag for STSIGN	yes	yes						
_WAGEHRX	CV	Imputation flag for WAGEHRX	yes	yes	yes	yes	yes	yes	yes	yes

Notes: Imputation flags are listed at the end of this appendix. Tables do not include Followback Survey variables, which are on the Household Survey Restricted Use File for 1996-97 and 1998-99.

Appendix D

Sample SUDAAN Procedure Statements

SAMPLE SUDAAN PROCEDURE STATEMENTS

There are a number of releases of the SUDAAN software, running on several different platforms. Although the same procedure statements are used, there can be enhancements or subtle differences from one release to the next, particularly in reading and writing external data files. The statements displayed in the examples in this appendix are tailored for SUDAAN Release 8.0.1, SAS-Callable for Windows. The user should take this into consideration when using these examples or parts of these examples verbatim.

The example procedures represent relatively simple, straightforward applications. The options (various parameters, test statistics, etc.) in the sample programs may not be suitable for all your needs. Likewise, particular types of analyses may require options that are not displayed in the sample program statements. Our intention is not to suggest analytical approaches but to provide the key parameters that capture the relevant characteristics of the sample design. These parameters are found in the SUDAAN *design*, *weight*, *nest*, *totcnt*, and *jointprob* statements. In addition, the examples are limited to simple descriptive procedures for producing means or percentages. The same sample design parameters used for descriptive procedures are used for more complex estimation procedures such as regression or logit.

The CTS Household Survey is made up of several samples, each of which can be used for certain types of analyses. Each sample requires different sample design statements and weights. The user is encouraged to review the tables in Chapter 3, which indicate the appropriate weights for person- and family-level analyses. Table 4.1 from Chapter 4 explains how to choose the design variables appropriate for each type of estimate.

The following ten examples are provided:

1. Person-level estimates
 - 1.1 Site-specific estimates for 2003
 - 1.2 National estimates for 2003
 - 1.3 Site-specific estimates from the symptom response sample (relevant to the Restricted Use File only)
 - 1.4 National estimates from the symptom response sample (relevant to the Restricted Use File only)
 - 1.5 Site-specific estimates from multiple rounds (2003 and 2000-01)
 - 1.6 National estimates from multiple rounds (2003 and 2000-01)
2. Family-level estimates
 - 2.1 Site-specific estimates for 2003
 - 2.2 National estimates for 2003
 - 2.3 Site-specific estimates from multiple rounds (2003 and 2000-01)
 - 2.4 National estimates from multiple rounds (2003 and 2000-01)

Preprocessing or recoding may be required for some variables because of missing or nonpositive data. Missing data in CTS files are assigned an applicable negative value (ex.: “-9 Not Ascertained,” see Section 6.3 - Variable Coding Conventions). Classification (SUBGROUP) variables with zero or negative values will be treated by SUDAAN as missing and dropped from the procedure. This does not hold true for analysis variables (VAR) where zero or negative values are valid. Records with zero weights will automatically be excluded from estimates produced in SUDAAN procedures.

In using SUDAAN, the full sample should be processed even when analyses are limited to subgroups or subpopulations. This is to ensure the correct computation of the sampling variance. The SUDAAN statement SUBPOPN should be used to identify the specific analytic subpopulation of interest. The sampling variance estimates SUDAAN computes may be wrong if the file is reduced to a specific subpopulation prior to running the procedure.

The SUDAAN examples for national estimates use the DDF option, which overrides the default denominator degrees of freedom. In SUDAAN, the default denominator degrees of freedom is the difference between the number of PSUs and the number of first stage strata, which is appropriate for most surveys. Because the CTS design includes some sites with certainty, the SUDAAN default count is substantially smaller than the actual count for these national estimates. This undercount would result in significance tests that would be too conservative (that is, that do not reject the null hypothesis often enough). We included the DDF option to provide researchers with an approximation of the true degrees of freedom that will be valid for most significance tests. The DDF for the full sample is also appropriate for analyses of subpopulations, because the full design is being utilized in the sampling variance computation.

1. Person-Level Estimates

The examples in this section are appropriate for person-level analyses.

1.1 Site-Specific Estimates for 2003

This example estimates the percentage of persons covered by Medicare (MCARE) within each of the 12 high-intensity sites. Standard errors of the percentages, unweighted and weighted population counts, and sample design effects are also included in the output. Note that MCARE, a "0/1" dichotomous variable, has been recoded to "1/2" to conform to SUDAAN conventions for SUBGROUP variables. Also, the SUBPOPN statement is used to identify the high-intensity site subpopulation within the overall sample. The input file, R4PER, consists of all 46,587 people in the 2003 sample and is sorted by the variables appearing in the NEST statement (SITE_STR, FSUX).

```
proc crosstab data=r4per design=wr;
  subpopn (1<=site) & (site<=12) / name="High Intensity Sites Only";
  nest site_str fsux / missunit;
  weight wtper6;
  subgroup site mcare;
  recode mcare=(0 1);
  levels 12 2;
  tables site*mcare;
  rformat site site.;
  print nsum wsum rowper serow deffrow / style=nchs
    wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
  rtitle "Site Estimates";
```

1.2 National Estimates for 2003

This example estimates the mean number of doctor visits (DRVISNX) and hospital stays (HSPSTYN) by race/ethnicity (RACETHX). Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX).

```
proc descript data=r4per design=uneqwor ddf=6500;
  nest pstrata ppsu secstra nfsux / missunit;
  totcnt pstrtot3 _zero_ _minus1_ _zero_;
  jointprob p1x p2x p3x p4x p5x p6x p7x;
  weight wtper2;
  subgroup racethx;
  levels 4;
  var drvisnx hspstyn;
  rformat racethx racethx.;
  print nsum wsum mean semean deffmean / style=nchs
    wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
  rtitle "National Estimates";
```

1.3 Site-Specific Estimates from the Symptom Response Sample (relevant to the Restricted Use File Only)

This example estimates the percentage of adults who reported depression (SYSAD) or anxiety symptoms (SYANXTY) in the last three months. Estimates are produced for the symptom response sample from the twelve high intensity sites. Standard errors, population counts, and design effects are also included in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample and is sorted by the variables appearing in the NEST statement (SITE_STR, FSUX). SUDAAN reads only the 16,266 observations for the symptom response sample; the other 30,321 observations are skipped because the weight variable WTSYM6 is nonpositive.

```
proc crosstab data=r4per design=wr;
  subpopn (1<=site) & (site<=12) / name="High Intensity Sites Only";
  nest site_str fsux / missunit;
  weight wtsym6;
  subgroup site sysad syanxty;
  levels 12 2 2;
  recode sysad = (0 1) syanxty = (0 1);
  tables site * (sysad syanxty);
  rformat site site.;
  print nsum wsum rowper serow deffrow / style=nchs
        wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
  rtitle "Site Estimates, Symptom Response Sample";
```

1.4 National Estimates from the Symptom Response Sample (relevant to the Restricted Use File Only)

This example estimates the percentage of adults who saw a doctor or other health professional for a symptom (questions srmla through srmlw) that first appeared in the past three months (SYMTODR). The estimates are stratified by race/ethnicity (RACETHX) and include standard errors, population counts, and design effects in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads only the 16,266 observations for the symptom response sample; the other 30,321 observations are skipped because the weight variable WTSYM2 is nonpositive.

```
proc descript data=r4per design=uneqwor ddf=6500;
  nest pstrata ppsu secstra nfsux / missunit;
  totcnt pstrtot3 _zero_ _minus1_ _zero_;
  jointprob plx p2x p3x p4x p5x p6x p7x;
  weight wtsym2;
  subgroup racethx;
  levels 4;
  var symtodr;
  rformat racethx racethx.;
  print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
  rtitle "National Estimates, Symptom Response Sample";
```

1.5 Site-Specific Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate pooled means for two variables. Specifically, it estimates the proportion of persons who reported not getting medical care (UNMET) or postponed getting needed medical care (PUTOFF) during the past 12 months, for each of the 12 high intensity sites. Estimates are produced separately for the 2000-01 sample, the 2003 sample, and the combined sample from both rounds. Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R34PER, consists of 106,312 people (all 46,587 people in the 2003 sample and all 59,725 people in the 2000-01 sample). It is sorted by the variables appearing in the NEST statement (SITE_STR, FSUX). The weight for site-specific estimates for 2000-01 (WTPER1) has been renamed to WTPER6 to match the name of the weight for site-specific estimates for 2003. SUDAAN reads only 102,930 observations (the entire 2003 sample plus the 56,343 people in the 2000-01 augmented site sample); the other 3,382 observations are skipped because the weight variable WTPER6 (renamed from WTPER1) is nonpositive.

```
proc descript data=r34per design=wr;
  subpopn (1<=site) & (site<=12) / name = "High Intensity Sites Only";
  nest site_str fsux / missunit;
  weight wtper6;
  subgroup round site;
  levels 2 12;
  tables round*site;
  var unmet putoff;
  rformat round round.;
  rformat site site.;
  print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
  rtitle "Combined Round 3/Round 4 Site Estimates";
```

1.6 National Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate pooled means for three variables. Specifically, it estimates the mean number of doctor visits (DRVISNX), emergency room visits (ERUSENX), and hospital stays (HSPSTYN) for the Medicare enrollee subpopulation. Estimates are produced separately for the 2000-01 sample, the 2003 sample, and the combined sample from both rounds. Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R34PER, consists of 106,312 people (all 46,587 people in the 2003 sample and all 59,725 people in the 2000-01 sample). It is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads only 100,624 observations (the entire 2003 sample plus the 54,037 people in the 2000-01 site sample); the other 5,688 observations are skipped because the weight variable WTPER2 is nonpositive.

```
proc descript data=r34per design=uneqwor ddf=6500;
  subpopn mcare=1 / name="Medicare Enrollees";
  nest pstrata ppsu secstra nfsux / missunit;
  totcnt pstrtot3 _zero_ _minus1_ _zero_;
  jointprob p1x p2x p3x p4x p5x p6x p7x;
  weight wtper2;
  subgroup round;
  levels 2;
  tables round;
  var drvisnx hspstyn erusenx;
  rformat round round.;
  print nsum wsum mean semean deffmean / style=nchs
    wsumfmt=f10.0 meanfmt=f8.4 semeanfmt=f8.4 deffmeanfmt=f8.4;
  rtitle "Combined Round 3/Round 4 National Estimates";
```

2. Family-Level Estimates

The following examples are based on the use of a family-level input file. The user is encouraged to review the discussion in Section 5.4 from Chapter 5, which provides suggestions for converting a person-level file to the family level and on summarizing person-level responses at the family level.

2.1 Site-Specific Estimates for 2003

This example provides percentage estimates displaying total family out-of-pocket medical costs, grouped into six categories (MEDCSTX), for each of the 12 high intensity sites. Note that MEDCSTX, with values of 0-5, has been recoded to values of 1-6 to conform to SUDAAN conventions for SUBGROUP variables. Standard errors of the percentages, population counts, and design effects are also included in the output. The input file, R4FAM, consists of all 25,419 families in the 2003 sample and is sorted by the variables appearing in the NEST statement (SITE_STR, FSUX).

```
proc crosstab data=r4fam design=wr;
  subpopn (1<=site) & (site<=12) / name="High Intensity Sites Only";
  nest site_str fsux / missunit;
  weight wtfam6;
  subgroup site medcstx;
  levels 12 5;
  recode medcstx=(0 1 2 3 4 5);
  tables site*medcstx;
  rformat site site.;
  rformat medcstx medcstx.;
  print nsum wsum rowper serow deffrow / style=nchs
        wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
  rtitle "Family-Level Site Estimates";
```

2.2 National Estimates for 2003

This example produces percentage estimates displaying the family informant's satisfaction with health care (CRSAFX), for families with any Medicaid coverage. Standard errors of the percentages, population counts, and sample design effects are also included in the output. The input file, R4FAM, consists of all 25,419 families in the 2003 sample and is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX).

```
proc crosstab data=r4fam design=uneqwor ddf=6500;
  nest pstrata ppsu secstra nfsux / missunit;
  totcnt pstrtot3 _zero_ _minus1_ _zero_;
  jointprob plx p2x p3x p4x p5x p6x p7x;
  weight wtfam2;
  subgroup fmcaid crsafx;
  recode fmcaid=(0 1);
  levels 2 5;
  tables fmcaid*crsafx;
  rformat crsafx crsafx.;
  print nsum wsum rowper serow deffrow / style=nchs
        wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
  rtitle "Family-Level National Estimates";
```


2.3 Site-Specific Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate a pooled mean. Specifically, it estimates mean family income (FAMINCX) for families from the 12 high intensity sites. Estimates are produced separately for the 2000-01 sample, the 2003 sample, and the combined sample from both rounds. Standard errors, population counts, and design effects are also included in the output. The input file, R34FAM, consists of 58,088 families (all 25,419 families in the 2003 sample and all 32,669 families in the 2000-01 sample). It is sorted by the variables appearing in the NEST statement (SITE_STR, FSUX). The weight for site-specific estimates for 2000-01 (WTFAM1) has been renamed to WTFAM6 to match the name of the weight for site-specific estimates for 2003. SUDAAN reads only 56,274 observations (the entire 2003 sample plus the 30,855 families in the 2000-01 augmented site sample); the other 1,814 observations are skipped because the weight variable WTFAM6 (renamed from WTFAM1) is nonpositive.

```
proc descript data=r34fam design=wr;
  subpopn (1<=site) & (site<=12) / name = "High Intensity Sites";
  nest site_str fsux / missunit;
  weight wtfam6;
  subgroup round site;
  levels 2 12;
  var famincx;
  tables round*site;
  rformat round round.;
  rformat site site.;
  print nsum wsum mean semean deffmean / style=nchs
        wsumfmt=f10.0 meanfmt=f12.2 semeanfmt=f12.2 deffmeanfmt=f10.4;
  rtitle "Combined Round 3/Round 4 Site Estimates";
```

2.4 National Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate a pooled mean. Specifically, it produces percentage estimates displaying the family informant's satisfaction with their choice of a primary care physician, grouped into 5 categories (DRCHOCX). Estimates are produced separately for the 2000-01 sample, the 2003 sample, and the combined sample from both rounds. Standard errors, population counts, and design effects are also included in the output. The input file, R34FAM, consists of 58,088 families (all 25,419 families in the 2003 sample and all 32,669 families in the 2000-01 sample). It is sorted by the variables appearing in the NEST statement (PSTRATA, PPSU, SECSTRA, NFSUX). SUDAAN reads only 54,993 observations (the entire 2003 sample plus the 29,574 families in the 2000-01 site sample); the other 3,095 observations are skipped because the weight variable WTFAM2 is nonpositive.

```
proc crosstab data=r34fam design=uneqwor ddf=6500;
  nest pstrata ppsu secstra nfsux / missunit;
  totcnt pstrtot3 _zero_ _minus1_ _zero_;
  jointprob plx p2x p3x p4x p5x p6x p7x;
  weight wtfam2;
  subgroup round drchocx;
  levels 2 5;
  tables round*drchocx;
  rformat round round.;
  rformat drchocx drchocx.;
  print nsum wsum rowper serow deffrow / style=nchs
    wsumfmt=f10.0 rowperfmt=f8.2 serowfmt=f8.2 deffrowfmt=f8.4;
  rtitle "Combined Round 3/Round 4 National Estimates";
```

Appendix E

Construction of “WR” Sampling Parameters for the CTS Household Survey

Construction of “WR” Sampling Parameters for the CTS Household Survey

As described in Chapter 4 of the user’s guide, the public use and restricted use data files for the Household Survey for 2000-01 and 2003 contain sampling parameters for calculating national estimates with some software packages other than SUDAAN. These “with-replacement” (WR) sampling parameters are designed for use with software packages that are able to make national estimates from the CTS data only under the assumption of with-replacement sampling (such as the procedures in Stata and SAS for analyzing data from complex surveys). As indicated in the tables below, the WR parameters were constructed from the SUDAAN sampling parameters that are included on the CTS Household Survey data files.

If you would like WR sampling parameters for data from the 1996-97 and/or 1998-99 CTS Household Survey, then you will need to construct them from the SUDAAN parameters that are already on those data files. The definitions are the same as indicated below for the 2000-01 and 2003 data. More guidance on how to construct the new parameters is provided in an appendix to the report comparing the use of SUDAAN and other statistical software for the analysis of the CTS data.¹

STRATAWR and PSUWRX. Used for national estimates from the site sample and combined sample (the combined sample is not available in 2003 because the supplemental sample was eliminated).

PSTRATA	STRATAWR	PSUWRX
1 - 9	$(pstrata * 10) + secstra$	nfsux
10 – 18	$pstrata * 10$	ppsu
19	$pstrata * 10$	nfsux
20	$pstrata * 10$	ppsu
30	$(pstrata * 10) + secstra$	nfsux

PSTRHWR and PPSUHWRX. Used for national estimates from the augmented site sample (the augmented site sample is not available in 2003 because the supplemental sample was eliminated).

SITEID	PSTRATAH	PSTRHWR	PPSUHWRX
0	n.a.	n.a.	n.a.
1 – 60	1 – 9	$(pstratah * 10) + secstrah$	nfsuhx
1 – 60	10 – 18	$pstratah * 10$	ppsuh
1 – 60	19	$pstratah * 10$	nfsuhx
1 – 60	20	$pstratah * 10$	ppsuh
1 – 60	30	$(pstratah * 10) + secstrah$	nfsuhx

n.a. = not applicable (because not in augmented site sample)

¹ Schaefer, E., et al., *Comparison of Selected Statistical Software Packages for Variance Estimation in the CTS Surveys*, HSC Technical Publication No. 40, Center for Studying Health System Change, Washington, D.C. (May 2003).

Appendix F

Sample Stata and SAS Statements

SAMPLE STATA AND SAS STATEMENTS

This appendix provides basic person-level examples to illustrate the use of Stata and SAS with the “with-replacement” (WR) parameters (see Chapter 4, Table 4.3). Data analysis at the family level is analogous.

There are a number of releases of Stata and SAS software, running on several different platforms. Although the same statements are used, there can be enhancements or subtle differences from one release to the next. The statements displayed in the examples in this appendix are tailored for Stata SE 8.2 and SAS 9.1.

The CTS Household Survey is made up of several samples, each of which can be used for certain types of analyses. Each sample requires different sample design statements and weights. The user is encouraged to review the tables in Chapter 3, which indicate the appropriate weights for person- and family-level analyses. Table 4.3 from Chapter 4 explains how to choose the design variables appropriate for each type of estimate.

The following six person-level examples are provided:

1. Site-specific estimates for 2003
2. National estimates for 2003
3. Site-specific estimates from the symptom response sample (relevant to the Restricted Use File only)
4. National estimates from the symptom response sample (relevant to the Restricted Use File only)
5. Site-specific estimates from multiple rounds (2003 and 2000-01)
6. National estimates from multiple rounds (2003 and 2000-01)

In using Stata and SAS, the full sample should be processed even when analyses are limited to subgroups or subpopulations. This is to ensure the correct computation of the sampling variance. The sampling variance estimates may be wrong if the file is reduced to a specific subpopulation.

1. Site-Specific Estimates for 2003

This example estimates the percentage of persons covered by Medicare (MCARE) within each of the 12 high-intensity sites. Standard errors of the percentages and population counts are also included in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample. In the Stata example, HIGHINT is a constructed dichotomous (1/0) variable identifying the people in the 12 high-intensity sites.

```
Stata
  use "c:\data\r4per.dta";
  svyset [pweight=wtper6], strata(site_str) psu(fsux);
  svytab site mcare, subpop(highint) obs row se deft;

SAS
  proc surveyfreq data=r4per(where=(1 le site le 12));
  tables site*mcare / row;
  stratum site_str;
  cluster fsux;
  weight wtper6;
  format site site. mcare mcare.;
  title 'Site Estimates';
```

2. National Estimates for 2003

This example estimates the mean number of doctor visits (DRVISNX) and hospital stays (HSPSTYN) by race/ethnicity (RACETHX). Standard errors of the means and population counts are also included in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample.

```
Stata
  use "c:\data\r4per.dta";
  svyset [pweight=wtper2], strata(stratawr) psu(psuwrx);
  svymean drvisnx hspstyn, by(racethx) obs size deft;

SAS
  proc surveymeans data=r4per nobs sumwgt mean stderr;
  domain racethx;
  stratum stratawr;
  cluster psuwrx;
  weight wtper2;
  format racethx racethx.;
  var drvisnx hspstyn;
  title 'National Estimates';
```

3. Site-Specific Estimates from the Symptom Response Sample (relevant to the Restricted Use File Only)

This example estimates the percentage of adults who reported depression (SYSAD) or anxiety symptoms (SYANXTY) in the last three months. Estimates are produced for the symptom response sample from the twelve high intensity sites. Standard errors of the percentages and population counts are also included in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample. Stata and SAS read only the 16,266 observations for the symptom response sample; the other 30,321 observations are skipped because the weight variable WTSYM6 is nonpositive. In the Stata example, HIGHINT is a constructed dichotomous (1/0) variable identifying the people in the 12 high-intensity sites.

```
Stata
  use "c:\data\r4per.dta";
  svyset [pweight=wtsym6], strata(site_str) psu(fsux);
  svytab site sysad, subpop(highint) obs row se deft;
  svytab site syanxy, subpop(highint) obs row se deft;

SAS
proc surveyfreq data=r4per(where=(1 le site le 12));
tables site*(sysad syanxy) / row;
stratum site_str;
cluster fsux;
weight wtsym6;
format site site.;
title 'Site Estimates, Symptom Response Sample';
```

4. National Estimates from the Symptom Response Sample (relevant to the Restricted Use File Only)

This example estimates the proportion of adults who experienced chest pain in the past three months (SYCHEST). The estimates are stratified by race/ethnicity (RACETHX) and include standard errors and population counts in the output. The input file, R4PER, consists of all 46,587 people in the 2003 sample. Stata and SAS read only the 16,266 observations for the symptom response sample; the other 30,321 observations are skipped because the weight variable WTSYM2 is nonpositive.

```
Stata
  use "c:\data\r4per.dta";
  svyset [pweight=wtsym2], strata(stratawr) psu(psuwrx);
  svymean sychest, by(racethx) obs size deft;

SAS
proc surveymeans data=r4per nobsumwgt mean stderr;
domain racethx;
stratum stratawr;
cluster psuwrx;
weight wtsym2;
format racethx racethx.;
var sychest;
title 'National Estimates, Symptom Response Sample';
```


5. Site-Specific Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate pooled means for two variables. Specifically, it estimates the proportion of persons who reported not getting medical care (UNMET) or postponed getting needed medical care (PUTOFF) during the past 12 months, for each of the 12 high intensity sites. Standard errors of the means and population counts are also included in the output. The input file, R34PER, consists of 106,312 people (all 46,587 people in the 2003 sample and all 59,725 people in the 2000-01 sample). The weight for site-specific estimates for 2000-01 (WTPER1) has been renamed to WTPER6 to match the name of the weight for site-specific estimates for 2003. Stata and SAS read only 102,930 observations (the entire 2003 sample plus the 56,343 people in the 2000-01 augmented site sample); the other 3,382 observations are skipped because the weight variable WTPER6 (renamed from WTPER1) is nonpositive. In the Stata example, HIGHINT is a constructed dichotomous (1/0) variable identifying the people in the 12 high-intensity sites.

```
Stata
  use "c:\data\r34per.dta";
  svyset [pweight=wtper6], strata(site_str) psu(fsux);
  svymean unmet putoff, by(site) subpop(highint) obs size deft;
  svymean unmet putoff, by(round site) subpop(highint) obs size deft;

SAS
proc surveymeans data=r34per(where=(1 le site le 12)) nobks sumwgt mean
  stderr;
  domain round site round*site;
  stratum site_str;
  cluster fsux;
  weight wtper6;
  var unmet putoff;
  format round round. site site.;
  title 'Site Estimates, Combined Round 3/4 Sample';
```

6. National Estimates from Multiple Rounds (2003 and 2000-01)

This example combines data from 2000-01 (Round Three) and 2003 (Round Four) to calculate pooled means for three variables. Specifically, it estimates the mean number of doctor visits (DRVISNX), emergency room visits (ERUSENX), and hospital stays (HSPSTYN) for the Medicare enrollee subpopulation. Estimates are produced separately for the 2000-01 sample, the 2003 sample, and the combined sample from both rounds. Standard errors of the means, population counts, and sample design effects are also included in the output. The input file, R34PER, consists of 106,312 people (all 46,587 people in the 2003 sample and all 59,725 people in the 2000-01 sample). Stata and SAS read only 100,624 observations (the entire 2003 sample plus the 54,037 people in the 2000-01 site sample); the other 5,688 observations are skipped because the weight variable WTPER2 is nonpositive.

```
Stata
  use "c:\data\r34per.dta";
  svyset [pweight=wtper2], strata(stratawr) psu(psuwrx);
  svymean drvisnx hspstyn erusenx, subpop(mcare) obs size def;
  svymean drvisnx hspstyn erusenx, by(round) subpop(mcare) obs size def;

SAS
proc surveymeans data=r34per(where=(mcare=1)) nobsumwgt mean stderr;
  domain round;
  stratum stratawr;
  cluster psuwrx;
  weight wtper2;
  var drvisnx hspstyn erusenx;
  format round round.;
  title 'National Estimates, Combined Round 3/4 Sample';
```