



# CHIS 2011-2012

## Adult Questionnaire

Version 10.3  
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Adult Respondents Age 18 and Older

*Collaborating Agencies:*

- ☐ UCLA Center for Health Policy Research
- ☐ California Department of Health Care Services
- ☐ California Department of Public Health

**Contact:**

**California Health Interview Survey**  
UCLA Center for Health Policy Research  
10960 Wilshire Blvd, Suite 1550  
Los Angeles, CA 90024  
Telephone: (866) 275-2447  
Fax: (310) 794-2686  
Web: [www.chis.ucla.edu](http://www.chis.ucla.edu)

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NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2011-2012 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

## Section A – Demographic Information, Part I

**PROGRAMMING NOTE QA11\_A1:**  
**SET AADATE = CURRENT DATE (YYYYMMDD)**

**QA11\_A1**      What is your date of birth?

**AA1MON**

MONTH \_\_\_\_\_ [RANGE: 1-12]

- |             |              |
|-------------|--------------|
| 1. JANUARY  | 7. JULY      |
| 2. FEBRUARY | 8. AUGUST    |
| 3. MARCH    | 9. SEPTEMBER |
| 4. APRIL    | 10. OCTOBER  |
| 5. MAY      | 11. NOVEMBER |
| 6. JUNE     | 12. DECEMBER |

**AA1DAY**

DAY \_\_\_\_\_ [RANGE: 1-31]

**AA1YR**

YEAR \_\_\_\_\_ [RANGE: 1898-1994]

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_A2:**  
**IF QA11\_A1 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11\_A2;**  
**ELSE GO TO QA11\_A5**

**QA11\_A2**      What month and year were you born?

**AA1AMON**

MONTH \_\_\_\_\_ [RANGE: 1-12]

- |             |              |
|-------------|--------------|
| 1. JANUARY  | 7. JULY      |
| 2. FEBRUARY | 8. AUGUST    |
| 3. MARCH    | 9. SEPTEMBER |
| 4. APRIL    | 10. OCTOBER  |
| 5. MAY      | 11. NOVEMBER |
| 6. JUNE     | 12. DECEMBER |

**AA1AYR**

YEAR \_\_\_\_\_ [RANGE: 1898-1994]

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_A3:**

**IF QA11\_A2 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11\_A3;  
ELSE GO TO QA11\_A5**

**QA11\_A3** What is your age, please?

**AA2**

\_\_\_\_\_ YEARS OF AGE [RANGE: 0-120]

**[GO TO QA11\_A5]**

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_A4:**

**IF QA11\_A3 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11\_A4;  
ELSE GO TO QA11\_A5**

**QA11\_A4** Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?

**AA2A**

BETWEEN 18 AND 29 .....1

BETWEEN 30 AND 39 .....2

BETWEEN 40 AND 44 .....3

BETWEEN 45 AND 49 .....4

BETWEEN 50 AND 64 .....5

65 OR OLDER .....6

REFUSED ..... -7

DON'T KNOW ..... -8

**POST NOTE QA11\_A4: AAGE ENUM.AGE**

**CALCULATE VALUE OF AAGE BASED ON QA11\_A1, QA11\_A2, OR QA11\_A3 TO USE IN ALL AGE-RELATED QUESTIONS;**

**IF QA11\_A1, QA11\_A2, OR QA11\_A3 = -7 OR -8 (REF/DK), THEN USE QA11\_A4;  
ELSE USE ENUM.AGE**

**QA11\_A5** Are you male or female?

**AA3**

MALE .....1

FEMALE .....2

REFUSED ..... -7

**QA11\_A6** Are you Latino or Hispanic?

**AA4**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QA11\_A8]**

**[GO TO PN QA11\_A8]**

**[GO TO PN QA11\_A8]**

**QA11\_A7** And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.

**AA5**

**[IF NECESSARY, GIVE MORE EXAMPLES]**

**[CODE ALL THAT APPLY]**

MEXICAN/MEXICAN AMERICAN/CHICANO .....	1
SALVADORAN.....	4
GUATEMALAN .....	5
COSTA RICAN.....	6
HONDURAN .....	7
NICARAGUAN .....	8
PANAMANIAN .....	9
PUERTO RICAN.....	10
CUBAN.....	11
SPANISH-AMERICAN (FROM SPAIN) .....	12
OTHER LATINO (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_A8:**

**IF QA11\_A6 = 1 (YES, LATINO/HISPANIC), THEN DISPLAY “You said you are Latino or Hispanic. Also,”;  
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR QA11\_A8, THEN CONTINUE  
WITH PROGRAMMING NOTE QA11\_A9;  
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

**QA11\_A8** {You said you are Latino or Hispanic. Also,} please tell me which one or more of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

**AA5A**

**[IF R SAYS “NATIVE AMERICAN” CODE AS “4”]**

**[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]**

**[CODE ALL THAT APPLY]**

WHITE.....	1	<b>[GO TO PN QA11_A16]</b>
BLACK OR AFRICAN AMERICAN .....	2	<b>[GO TO PN QA11_A16]</b>
ASIAN .....	3	<b>[GO TO PN QA11_A12]</b>
AMERICAN INDIAN OR ALASKA NATIVE .....	4	<b>[GO TO PN QA11_A9]</b>
OTHER PACIFIC ISLANDER .....	5	<b>[GO TO PN QA11_A13]</b>
NATIVE HAWAIIAN .....	6	<b>[GO TO PN QA11_A16]</b>
OTHER (SPECIFY: _____) .....	91	
REFUSED .....	-7	
DON'T KNOW .....	-8	



**PROGRAMMING NOTE QA11\_A9:**  
**IF QA11\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), THEN CONTINUE WITH QA11\_A9;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_A12**

**QA11\_A9** You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.

**AA5B**

**[CODE ALL THAT APPLY]**

APACHE .....	1
BLACKFOOT/BLACKFEET .....	2
CHEROKEE .....	3
CHOCTAW.....	4
MEXICAN AMERICAN INDIAN .....	5
NAVAJO.....	6
POMO .....	7
PUEBLO.....	8
SIOUX .....	9
YAQUI .....	10
OTHER TRIBE (SPECIFY:.....)	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_A10** Are you an enrolled member in a federally or state recognized tribe?

**AA5C**

YES .....	1	
NO.....	2	<b>[GO TO PN QA11_A12]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_A12]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_A12]</b>

QA11\_A11 Which tribe are you enrolled in?

AA5D

**APACHE**

MESCALERO APACHE, NM.....1  
 APACHE (NOT SPECIFIED) .....2  
 OTHER APACHE [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....3

**BLACKFEET**

BLACKFOOT/BLACKFEET .....4

**CHEROKEE**

WESTERN CHEROKEE .....5  
 CHEROKEE (NOT SPECIFIED) .....6  
 OTHER CHEROKEE [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....7

**CHOCTAW**

CHOCTAW OKLAHOMA .....8  
 CHOCTAW (NOT SPECIFIED) .....9  
 OTHER CHOCTAW [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....10

**NAVAJO**

NAVAJO (NOT SPECIFIED).....11

**POMO**

HOPLAND BAND, HOPLAND RANCHERIA.....12  
 SHERWOOD VALLEY RANCHERIA.....13  
 POMO (NOT SPECIFIED) .....14  
 OTHER POMO [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....15

**PUEBLO**

HOPi .....16  
 YSLETA DEL SUR PUEBLO OF TEXAS .....17  
 PUEBLO (NOT SPECIFIED) .....18  
 OTHER PUEBLO [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....19

**SIOUX**

OSLALA/PINE RIDGE SIOUX.....20  
 SIOUX (NOT SPECIFIED).....21  
 OTHER SIOUX [Ask for spelling]  
 (SPECIFY: \_\_\_\_\_) .....22

**YAQUI**

PASCUA YAQUI TRIBE OF ARIZONA .....23  
 YAQUI (NOT SPECIFIED).....24  
 OTHER YAQUI [Ask for spelling] (SPECIFY: \_\_\_\_\_) ..25

**OTHER**

OTHER [Ask for spelling] (SPECIFY: \_\_\_\_\_) .....91  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_A12:**  
**IF QA11\_A8 = 3 (ASIAN), THEN CONTINUE WITH QA11\_A12;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_A13**

**QA11\_A12** You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, or Vietnamese? If you are more than one, tell me all of them.

**AA5E**

**[CODE ALL THAT APPLY]**

BANGLADESHI.....	1
BURMESE .....	2
CAMBODIAN .....	3
CHINESE .....	4
FILIPINO .....	5
HMONG .....	6
INDIAN (INDIA) .....	7
INDONESIAN.....	8
JAPANESE .....	9
KOREAN .....	10
LAOTIAN.....	11
MALAYSIAN.....	12
PAKISTANI .....	13
SRI LANKAN.....	14
TAIWANESE .....	15
THAI .....	16
VIETNAMESE .....	17
OTHER ASIAN (SPECIFY: _____).....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_A13:**  
**IF QA11\_A8 = 5 (OTHER PACIFIC ISLANDER), THEN CONTINUE WITH QA11\_A13;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_A14**

**QA11\_A13** You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

**AA5E1**

**[CODE ALL THAT APPLY]**

SAMOAN/AMERICAN SAMOAN.....	1
GUAMANIAN .....	2
TONGAN.....	3
FIJIAN .....	4
OTHER PACIFIC ISLANDER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_A14:**

IF QA11\_A6 = 1 (LATINO) AND [QA11\_A8 = 6 (NATIVE HAWAIIAN) OR QA11\_A8 = 5 (OTHER PACIFIC ISLANDER) OR QA11\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA11\_A8 = 3 (ASIAN) OR QA11\_A8 = 2 (BLACK/AFRICAN AMERICAN) OR QA11\_A8 = 1 (WHITE) OR QA11\_A8 = 91 (OTHER)], THEN CONTINUE WITH QA11\_A14;

ELSE IF THERE WERE MULTIPLE RESPONSES TO QA11\_A8, QA11\_A12, OR QA11\_A13 [NOT COUNTING -7 OR -8 (REF/DK)], THEN CONTINUE WITH QA11\_A14;

ELSE GO TO QA11\_A16

**QA11\_A14** You said that you are: {INSERT MULTIPLE RESPONSES FROM QA11\_A7, QA11\_A8, QA11\_A12 AND QA11\_A13}.

Do you identify with any one race in particular?

**AA5G**

YES .....	1	
NO .....	2	[GO TO QA11_A16]
REFUSED .....	-7	[GO TO QA11_A16]
DON'T KNOW .....	-8	[GO TO QA11_A16]

**PROGRAMMING NOTE QA11\_A15:**

IF QA11\_A6 = 1 (YES, LATINO) AND QA11\_A7 ≠ -7 OR -8, THEN DO NOT DISPLAY QA11\_A15 = 14 (LATINO);

IF QA11\_A8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA11\_A13 = 1 TO 4 OR 91, THEN DO NOT DISPLAY QA11\_A15 = 17 (OTHER PACIFIC ISLANDER);

IF QA11\_A8 = 3 AND QA11\_A12 = 1 TO 17 OR 91, THEN DO NOT DISPLAY QA11\_A15 = 19 (ASIAN)

**QA11\_A15** Which do you most identify with?

**AA5F**

[IF R UNABLE TO CHOOSE ONE, OFFER "BOTH/ALL/MULTIRACIAL"]

MEXICAN/MEXICAN AMERICAN/CHICANO .....	1
SALVADORAN .....	4
GUATEMALAN .....	5
COSTA RICAN .....	6
HONDURAN .....	7
NICARAGUAN .....	8
PANAMANIAN .....	9
PUERTO RICAN .....	10
CUBAN .....	11
SPANISH-AMERICAN (FROM SPAIN) .....	12
LATINO, OTHER SPECIFY .....	13
LATINO .....	14
NATIVE HAWAIIAN .....	16
OTHER PACIFIC ISLANDER .....	17
AMERICAN INDIAN OR ALASKA NATIVE .....	18
ASIAN .....	19
BLACK OR AFRICAN AMERICAN .....	20
WHITE .....	21
RACE, OTHER SPECIFY .....	22
BANGLADESHI .....	30
BURMESE .....	31
CAMBODIAN .....	32
CHINESE .....	33
FILIPINO .....	34
HMONG .....	35
INDIAN (INDIA) .....	36
INDONESIAN .....	37

JAPANESE .....	38
KOREAN .....	39
LAOTIAN .....	40
MALAYSIAN .....	41
PAKISTANI .....	42
SRI LANKAN .....	43
TAIWANESE .....	44
THAI .....	45
VIETNAMESE .....	46
ASIAN, OTHER SPECIFY .....	49
SAMOAN/AMERICAN SAMOAN .....	50
GUAMANIAN .....	51
TONGAN .....	52
FIJIAN .....	53
PACIFIC ISLANDER, OTHER SPECIFY .....	55
BOTH/ALL/MULTIRACIAL .....	90
NONE OF THESE .....	95
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_A16**

Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

<b>AH43</b>
-------------

**[IF R MENTIONS MORE THAN ONE, CODE THE LOWEST NUMBER THAT APPLIES]**

MARRIED .....	1
LIVING WITH PARTNER .....	2
WIDOWED .....	3
DIVORCED .....	4
SEPARATED .....	5
NEVER MARRIED .....	6
REFUSED .....	-7
DON'T KNOW .....	-8

## Section B – Health Conditions

**QA11\_B1** These next questions are about your health.

Would you say that in general your health is excellent, very good, good, fair, or poor?

**AB1**

EXCELLENT .....	1
VERY GOOD .....	2
GOOD .....	3
FAIR .....	4
POOR .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_B2** Has a doctor ever told you that you have asthma?

**AB17**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

[GO TO PN QA11\_B18]

[GO TO PN QA11\_B18]

[GO TO PN QA11\_B18]

**QA11\_B3** Do you still have asthma?

**AB40**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_B4** During the past 12 months, have you had an episode of asthma or an asthma attack?

**AB41**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_B5:**

**IF [QA11\_B3 = 2, -7, OR -8 (DOES NOT HAVE ASTHMA OR REF/DK)] AND [QA11\_B4 = 2, -7, OR -8 (NO EPISODE OF ASTHMA IN LAST 12 MOS OR REF/DK)], THEN GO TO QA11\_B9;  
ELSE CONTINUE WITH QA11\_B5**

**QA11\_B5** During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

**AB19**

Not at all, .....1  
 Less than every month, .....2  
 Every month, .....3  
 Every week, or .....4  
 Every day? .....5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B6** During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

**AH13A**

YES .....1  
 NO .....2 **[GO TO QA11\_B8]**  
 REFUSED ..... -7 **[GO TO QA11\_B8]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_B8]**

**QA11\_B7** Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

**AB106**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

YES .....1  
 NO .....2  
 DOESN'T HAVE A DOCTOR .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B8** During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

**AH15A**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B9** Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

**AB18**

**[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_B10:**

**IF QA11\_B3 = 1 (YES, STILL HAVE ASTHMA) OR QA11\_B4 = 1 (YES, EPISODE IN LAST 12 MOS), THEN GO TO PROGRAMMING NOTE QA11\_B14;  
 ELSE CONTINUE WITH QA11\_B10**

**QA11\_B10** During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

**AB66**

Not at all, .....1  
 Less than every month, .....2  
 Every month, .....3  
 Every week, or .....4  
 Every day? .....5  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B11** During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

**AB67**

YES .....1  
 NO .....2 **[GO TO QA11\_B13]**  
 REFUSED .....-7 **[GO TO QA11\_B13]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B13]**

**QA11\_B12** Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

**AB107**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

YES .....1  
 NO .....2  
 DOESN'T HAVE DOCTOR .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8



**QA11\_B13** During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

**AB80**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_B14:**  
**IF AAGE > 69, THEN GO TO QA11\_B15;**  
**ELSE CONTINUE WITH QA11\_B14**

**QA11\_B14** During the past 12 months, how many days of work did you miss due to asthma?

**AB42**

**[IF NOT WORKING, ENTER ZERO]**

\_\_\_\_\_ DAYS (0 - 365)

REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B15** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

**AB43**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**[GO TO QA11\_B17]**  
**[GO TO QA11\_B17]**  
**[GO TO QA11\_B17]**

**QA11\_B16** Do you have a written or printed copy of this plan?

**AB98**

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B17** How confident are you that you can control and manage your asthma? Would you say you are...

**AB108**

Very confident, .....1  
 Somewhat confident, .....2  
 Not too confident, or .....3  
 Not at all confident? .....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_B18:**

**IF QA11\_A5 = 2 (FEMALE), THEN DISPLAY "Other than during pregnancy, has";  
ELSE DISPLAY "Has"**

**QA11\_B18** {Other than during pregnancy, has/Has} a doctor ever told you that you have diabetes or sugar diabetes?

**AB22**

YES .....1  
NO .....2  
BORDERLINE OR PRE-DIABETES .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**[GO TO PN QA11\_B34]**

**PROGRAMMING NOTE QA11\_B19:**

**IF QA11\_A5 = 2 (FEMALE), THEN DISPLAY "Other than during pregnancy, has";  
ELSE DISPLAY "Has"**

**QA11\_B19** {Other than during pregnancy, has/Has} a doctor ever told you that you have pre-diabetes or borderline diabetes?

**AB99**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_B20:**

**IF QA11\_B18 = 1 (YES, HAS DIABETES), THEN CONTINUE WITH QA11\_B20;  
ELSE GO TO PROGRAMMING NOTE QA11\_B39**

**QA11\_B20** How old were you when a doctor first told you that you have diabetes?

**AB23**

\_\_\_\_\_ AGE IN YEARS [HR: 1 THRU AAGE (OR 105 IF AAGE = -7)]

REFUSED .....-7  
DON'T KNOW .....-8

**QA11\_B21** Were you told that you had Type 1 or Type 2 diabetes?

**AB51**

**[IF NEEDED, SAY: "Type 1 diabetes results from the body's failure to produce insulin and is usually diagnosed in children and young adults. Type 2 diabetes results from insulin resistance and is the most common form of diabetes."]**

TYPE 1 .....1  
TYPE 2 .....2  
ANOTHER TYPE .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**QA11\_B22** Are you now taking insulin?

**AB24**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B23** Do you now take diabetic pills to lower your blood sugar?

**AB25**

**[IF NEEDED, SAY: "These are sometimes called oral agents or oral hypoglycemic agents."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B24** About how many times per day, per week, or per month do you or a family member or friend check your blood for glucose or sugar?

**AB26**

**[FILL IN TIME FRAME ANSWERED]**

\_\_\_\_\_ TIMES  
 \_\_\_\_\_ PER DAY [HR: 0-24; SR: 0-10]  
 \_\_\_\_\_ PER WEEK [HR: 0-70; SR: 0-34]  
 \_\_\_\_\_ PER MONTH [HR: 0-300; SR: 0-149]  
 \_\_\_\_\_ PER YEAR [HR: 0-3650; SR: 0-599]  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B25** About how many times in the last 12 months has a doctor or other health professional checked you for hemoglobin "A one C"?

**AB27**

**[IF R NEVER HEARD OF IT, ENTER 995]**

\_\_\_\_\_ NUMBER OF TIMES [HR: 0-52, 995; SR: 0-25, 995]  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B26** About how many times in the last 12 months has a doctor checked your feet for any sores or irritations?

**AB28**

\_\_\_\_\_ NUMBER OF TIMES [HR: 0-52; SR: 0-25]  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B27** When was the last time you had an eye exam in which the pupils were dilated? This would have made your eyes sensitive to bright light for a short time.

**AB63**

WITHIN THE PAST MONTH .....1  
 WITHIN THE PAST YEAR (1-12 MONTHS AGO) ...2  
 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO) ...3  
 2 OR MORE YEARS AGO.....4  
 NEVER .....5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B28** During the past 12 months, have you had to visit a hospital emergency room because of your diabetes?

**AB109**

YES .....1  
 NO .....2 [GO TO QA11\_B30]  
 REFUSED ..... -7 [GO TO QA11\_B30]  
 DON'T KNOW ..... -8 [GO TO QA11\_B30]

**QA11\_B29** Did you visit a hospital emergency room for your diabetes because you were unable to see your doctor?

**AB110**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

YES .....1  
 NO .....2  
 DOESN'T HAVE DOCTOR.....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B30** During the past 12 months, were you admitted to the hospital overnight or longer for your diabetes?

**AB111**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B31** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?

**AB112**

YES .....1  
 NO .....2 [GO TO QA11\_B33]  
 REFUSED ..... -7 [GO TO QA11\_B33]  
 DON'T KNOW ..... -8 [GO TO QA11\_B33]

**QA11\_B32** Do you have a written or printed copy of this plan?

**AB113**

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B33** How confident are you that you can control and manage your diabetes? Would you say you are...

**AB114**

Very confident, .....1  
 Somewhat confident, .....2  
 Not too confident, or .....3  
 Not at all confident? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_B34:**

**IF QA11\_A5 = 2 (FEMALE), THEN CONTINUE WITH QA11\_B34;  
 ELSE GO TO QA11\_B35**

**QA11\_B34** Has a doctor ever told you that you had diabetes only during pregnancy?

**AB81**

**[IF NEEDED, SAY: "This is also known as gestational diabetes."]**

YES .....1  
 NO .....2  
 BORDERLINE GESTATIONAL DIABETES .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B35** Has a doctor ever told you that you have high blood pressure?

**AB29**

YES .....1  
 NO .....2 **[GO TO QA11\_B37]**  
 HIGH NORMAL/BORDERLINE/  
 PRE-HYPERTENSION .....3 **[GO TO QA11\_B37]**  
 REFUSED ..... -7 **[GO TO QA11\_B37]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_B37]**

**QA11\_B36** Are you now taking any medications to control your high blood pressure?

**AB30**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B37** Has a doctor ever told you that you have any kind of heart disease?

**AB34**

YES .....1  
 NO .....2 [GO TO QA11\_B45]  
 REFUSED .....-7 [GO TO QA11\_B45]  
 DON'T KNOW .....-8 [GO TO QA11\_B45]

**QA11\_B38** Has a doctor ever told you that you have heart failure or congestive heart failure?

**AB52**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B39** During the past 12 months, have you had to visit a hospital emergency room because of your heart disease?

**AB115**

YES .....1  
 NO .....2 [GO TO QA11\_B41]  
 REFUSED .....-7 [GO TO QA11\_B41]  
 DON'T KNOW .....-8 [GO TO QA11\_B41]

**QA11\_B40** Did you visit a hospital emergency room for your heart disease because you were unable to see your doctor?

**AB116**

**[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]**

YES .....1  
 NO .....2  
 DOESN'T HAVE DOCTOR .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B41** During the past 12 months, were you admitted to the hospital overnight or longer for your heart disease?

**AB117**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B42** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your heart disease?

**AB118**

YES .....1  
 NO .....2 [GO TO QA11\_B44]  
 REFUSED .....-7 [GO TO QA11\_B44]  
 DON'T KNOW .....-8 [GO TO QA11\_B44]

**QA11\_B43** Do you have a written or printed copy of this plan?

**AB119**

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B44** How confident are you that you can control and manage your heart disease? Would you say you are...

**AB120**

Very confident, .....1  
 Somewhat confident, .....2  
 Not too confident, or .....3  
 Not at all confident? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B45** Has a doctor ever told you that you had a stroke?

**AC6**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B46** Have you EVER been told by a doctor that you have some form of ARTHRITIS, gout, lupus or fibromyalgia [fy-bro-my-AL-jee-uh]?

**AB64**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B47** In the past 30 days, did you have any pain, aching, or stiffness in or around a joint?

**AB127**

**[IF NEEDED, SAY: "Do not include the back or neck."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_B48:**

**IF QA11\_B46 = 1 (DIAGNOSED WITH ARTHRITIS, GOUT, LUPUS, OR FIBROMYALGIA) OR QA11\_B47 = 1 (HAD SYMPTOMS OF JOINT PROBLEM IN PAST 30 DAYS), THEN CONTINUE WITH QA11\_B48;  
ELSE GO TO QA11\_B49**

**QA11\_B48** How much are you limited in your activities by these problems? Would you say...

**AB16**

Not at all, .....1  
 A little bit, .....2  
 Moderately, .....3  
 Quite a lot, or .....4  
 Extremely? .....5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B49** During the past 12 months, did you get a flu shot or the nasal flu vaccine, called Flumist?

**AE30**

**[IF NEEDED, SAY: "A flu shot is usually given in the Fall and protects against influenza for the flu season."]**

YES .....1  
 NO .....2 **[GO TO QA11\_B52]**  
 REFUSED ..... -7 **[GO TO QA11\_B52]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_B52]**

**QA11\_B50** Did you have the flu shot or the nasal flu vaccine?

**AB100**

FLU SHOT .....1  
 NASAL/FLUMIST .....2  
 BOTH .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_B51:****IF QA11\_B50 = 1, THEN DISPLAY "flu shot";****ELSE IF QA11\_B50 = 2, THEN DISPLAY "nasal flu vaccine";****ELSE DISPLAY "vaccine"****QA11\_B51** At what kind of place did you get your last {flu shot/nasal flu vaccine/vaccine}?**AB57**

A DOCTOR'S OFFICE, KAISER, OR HMO .....1  
 A COMMUNITY HEALTH CENTER,  
 HEALTH DEPT., HEALTH DEPT. CLINIC,  
 OR OTHER TYPE OF CLINIC .....2  
 A STORE (FOR EXAMPLE, MARKET,  
 DRUGSTORE, OR PHARMACY) .....3  
 WORKPLACE .....4  
 A SENIOR, RECREATION,  
 OR COMMUNITY CENTER .....5  
 A HOSPITAL OR EMERGENCY ROOM .....6  
 PLACE OF WORSHIP .....7  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW/ NOT SURE ..... -8

**PROGRAMMING NOTE QA11\_B52:****IF AAGE < 65 YEARS, GO TO QA11\_C1;****ELSE CONTINUE WITH QA11\_B52;****QA11\_B52** During the past 12 months, have you fallen to the ground more than once?**AC7**

YES ..... 1  
 NO .....2 [GO TO QA11\_C1]  
 REFUSED ..... -7 [GO TO QA11\_C1]  
 DON'T KNOW ..... -8 [GO TO QA11\_C1]

**QA11\_B53** Did you get any medical care because of those falls?**AB91**

YES .....1  
 NO .....2 [GO TO QA11\_B56]  
 REFUSED ..... -7 [GO TO QA11\_B56]  
 DON'T KNOW ..... -8 [GO TO QA11\_B56]

**QA11\_B54** Did you go to the emergency room because of any of those falls?**AB140**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_B55** Were you hospitalized because of any of those falls?

**AB141**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B56** Did a health care professional talk with you about how to avoid falling?

**AB92**

**[IF NEEDED, SAY: "A health care professional is a doctor, nurse, or other health care provider.]**

YES .....1  
 NO .....2 **[GO TO QA11\_B58]**  
 REFUSED .....-7 **[GO TO QA11\_B58]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B58]**

**QA11\_B57** Did the health care professional make any specific recommendations?

**AB142**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B58** Because of those falls, did a health care professional review your medications?

**AB93**

YES .....1  
 NO .....2 **[GO TO QA11\_B60]**  
 REFUSED .....-7 **[GO TO QA11\_B60]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B60]**

**QA11\_B59** Did the health care professional recommend any changes to your medications?

**AB143**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B60** Because of those falls, did you start a physical therapy or exercise program?

**AB94**

**[IF NEEDED, SAY: "Include temporary changes during your recovery."]**

YES .....1  
 NO .....2 **[GO TO QA11\_B62]**  
 REFUSED .....-7 **[GO TO QA11\_B62]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B62]**

**QA11\_B61** Did you do this because a health care professional recommended it?

**AB144**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B62** Because of those falls, did you make changes to your home, such as adding grab bars or removing rugs?

**AB95**

**[IF NEEDED, SAY: "Include temporary changes during your recovery."]**

YES .....1  
 NO .....2 **[GO TO QA11\_B64]**  
 REFUSED .....-7 **[GO TO QA11\_B64]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B64]**

**QA11\_B63** Did you do this because a health care professional recommended it?

**AB145**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B64** Did you start using a cane or walker?

**AB96**

**[IF NEEDED, SAY: "Because of those falls"]**

**[IF NEEDED, SAY: "Include temporary changes during your recovery."]**

YES .....1  
 NO .....2 **[GO TO QA11\_B66]**  
 REFUSED .....-7 **[GO TO QA11\_B66]**  
 DON'T KNOW .....-8 **[GO TO QA11\_B66]**

**QA11\_B65** Did you do this because a health care professional recommended it?

**AB146**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_B66** Did you change your daily routines?

**AB97**

**[IF NEEDED, SAY: "Because of those falls"]**

**[IF NEEDED, SAY: "Include temporary changes during your recovery."]**

YES .....	1	
NO .....	2	<b>[GO TO QA11_C1]</b>
REFUSED .....	-7	<b>[GO TO QA11_C1]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_C1]</b>

**QA11\_B67** Did you do this because a health care professional recommended it?

**AB147**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

## Section C – Health Behaviors

**QA11\_C1** The next questions are about walking for transportation. I will ask you separately about walking for relaxation or exercise.

During the past 7 days, did you walk to get some place that took you at least 10 minutes?

**AD37W**

YES.....	1	
NO.....	2	[GO TO QA11_C4]
UNABLE TO WALK .....	3	[GO TO QA11_C7]
REFUSED .....	-7	[GO TO QA11_C4]
DON'T KNOW .....	-8	[GO TO QA11_C4]

**QA11\_C2** In the past 7 days, how many times did you do that?

**AD38W**

[IF NEEDED, SAY: “Walk for at least 10 minutes to get some place.”]

_____ TIMES PER WEEK		[IF 0, GO TO QA11_C4]
REFUSED .....	-7	[GO TO QA11_C4]
DON'T KNOW .....	-8	[GO TO QA11_C4]

**PROGRAMMING NOTE QA11\_C3:**

IF QA11\_C2 = 1, THEN DISPLAY “How long did that walk take”;

IF QA11\_C2 > 1, THEN DISPLAY “On average, how long did those walks take”

**QA11\_C3** {How long did that walk take/On average, how long did those walks take}?

**AD39W**

_____ MINUTES PER DAY	
_____ HOURS PER DAY	
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_C4:**

IF QA11\_C1 = 1 (WALK FOR TRANSPORTATION), THEN DISPLAY “Please do not include walking for transportation.”

**QA11\_C4** Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past 7 days, did you walk for at least 10 minutes for any of these reasons? {Please do not include walking for transportation.}

**AD40W**

YES.....	1	
NO.....	2	[GO TO QA11_C7]
REFUSED .....	-7	[GO TO QA11_C7]
DON'T KNOW .....	-8	[GO TO QA11_C7]

**QA11\_C5** In the past 7 days, how many times did you do that?

**AD41W**

**[IF NEEDED, SAY: "Walk for at least 10 minutes for fun, relaxation, exercise, or to walk the dog."]**

\_\_\_\_\_ TIMES PER WEEK

**[IF 0, GO TO QA11\_C7]**

REFUSED ..... -7

**[GO TO QA11\_C7]**

DON'T KNOW ..... -8

**[GO TO QA11\_C7]**

**PROGRAMMING NOTE QA11\_C6:**

**IF QA11\_C5 = 1, THEN DISPLAY "How long did that walk take";**

**IF QA11\_C5 > 1, THEN DISPLAY "On average, how long did those walks take"**

**QA11\_C6** {How long did that walk take/On average, how long did those walks take}?

**AD42W**

\_\_\_\_\_ MINUTES PER DAY

\_\_\_\_\_ HOURS PER DAY

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_C7** Now think about the foods you ate or drank during the past month, that is, the past 30 days, including meals and snacks.

During the past month, how many times did you eat fruit? Do not count juices.

**AE2**

**[IF NEEDED, SAY: "Your best guess is fine."]**

**[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"]**

\_\_\_\_\_ TIMES

PER DAY .....1

**[HR: 0-20; SR: 0-9]**

PER WEEK .....2

**[HR: 0-20; SR: 0-29]**

PER MONTH.....3

**[HR: 0-210; SR: 0-149]**

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_C8** [During the past month,] how many times did you eat any kind of fried potatoes, including French fries, home fries, or hash browns?

**AE3**

**[IF RESPONDENT ASKS, SAY: "Do not include potato chips."]**

**[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK "Was that per day, week, or month?"]**

\_\_\_\_\_TIMES

PER DAY .....	1	[HR: 0-20; SR: 0-5]
PER WEEK .....	2	[HR: 0-35; SR: 0-11]
PER MONTH.....	3	[HR: 0-90; SR: 0-30]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA11\_C9:**

**IF QA11\_C8 > 0 (ATE FRIED POTATOES) THEN DISPLAY "Do not include fried potatoes."  
ELSE DO NOT DISPLAY**

**QA11\_C9** [During the past month,] how many times did you eat any *other* vegetables like green salad, green beans, or potatoes? {Do not include fried potatoes.}

**AE7**

**[IF STRONGLY NEEDED, SAY: "Such as tomatoes, carrots, onions, or broccoli."]**

**[ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: "Rice is not a vegetable."]**

\_\_\_\_\_TIMES

PER DAY .....	1	[HR: 0-10; SR: 0-4]
PER WEEK .....	2	[HR: 0-70; SR: 0-28]
PER MONTH.....	3	[HR: 0-300; SR: 0-120]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_C10** [During the past month,] how often did you drink regular soda or pop that contains sugar? Do not include diet soda.

**AC11**

**[IF NEEDED, SAY: "Do not include canned or bottled juices or teas. Your best guess is fine."]**

\_\_\_\_\_TIMES

PER DAY .....	1	[HR: 0-10; SR: 0-7]
PER WEEK .....	2	[HR: 0-25; SR: 0-11]
PER MONTH.....	3	[HR: 0-60; SR: 0-30]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_C11** Now think about the past week. In the past 7 days, how many times did you eat fast food? Include fast food meals eaten at work, at home, or at fast-food restaurants, carryout or drive through.

**AC31**

**[IF NEEDED, SAY: "Such as food you get at McDonald's, KFC, Panda Express, or Taco Bell."]**

\_\_\_\_\_ # OF TIMES IN PAST 7 DAYS

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_C12** How often can you find fresh fruits and vegetables in your neighborhood? Would you say...

**AC42**

Never, ..... 1

Sometimes, ..... 2

Usually, or ..... 3

Always? ..... 4

DOESN'T EAT F & V ..... 5

DOESN'T SHOP FOR F&V ..... 6

DOESN'T SHOP IN HIS/HER NEIGHBORHOOD... 7

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_C13:**

**IF QA11\_C12 = 2, 3, OR 4, THEN CONTINUE WITH QA11\_C13;**

**ELSE GO TO PROGRAMMING NOTE QA11\_C14**

**QA11\_C13** How often are they affordable? Would you say...

**AC44**

Never ..... 1

Sometimes ..... 2

Usually, or ..... 3

Always? ..... 4

REFUSED ..... -7

DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_C14:**

**IF QA11\_C12 = 5 (DOESN'T EAT FRUITS AND VEGETABLES) OR AAGE > 64, THEN GO TO QA11\_C16;  
ELSE CONTINUE WITH QA11\_C14**

**QA11\_C14** How often can you find fresh fruits and vegetables at or near your workplace? Would you say...

**AC43**

Never.....1  
 Sometimes .....2  
 Usually, or .....3  
 Always? .....4  
 DOESN'T WORK .....5  
 WORKS AT HOME .....6  
 OTHER NOT APPLICABLE (DOESN'T WORK IN  
 ONE PLACE, CAN'T LEAVE WORK, ETC.) .....7  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_C15:**

**IF QA11\_C14 = 2, 3, OR 4 THEN CONTINUE WITH QA11\_C15;  
ELSE GO TO QA11\_C16**

**QA11\_C15** How often are they affordable? Would you say ...

**AC45**

Never.....1  
 Sometimes .....2  
 Usually, or .....3  
 Always? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_C16** Now, I am going to ask about various health behaviors.

Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?

**AE15**

YES .....1  
 NO .....2 **[GO TO QA11\_C20]**  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_C17** Do you now smoke cigarettes every day, some days, or not at all?

**AE15A**

EVERY DAY.....1  
 SOME DAYS.....2 **[GO TO QA11\_C19]**  
 NOT AT ALL.....3 **[GO TO QA11\_C20]**  
 REFUSED ..... -7 **[GO TO QA11\_C20]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_C20]**

**QA11\_C18** On average, how many cigarettes do you now smoke a day?

**AD32**

**[IF R SAYS, A "PACK", CODE AS 20 CIGARETTES]**

\_\_\_\_\_ NUMBER OF CIGARETTES [HR: 0-120] **[GO TO QA11\_C20]**

REFUSED ..... -7 **[GO TO QA11\_C20]**

DON'T KNOW ..... -8 **[GO TO QA11\_C20]**

**QA11\_C19** In the past 30 days, when you smoked, how many cigarettes did you smoke per day?

**AE16**

**[IF NEEDED, SAY: "On the days you smoked."]**

**[IF R SAYS, A "PACK", CODE AS 20 CIGARETTES]**

\_\_\_\_\_ NUMBER OF CIGARETTES [HR: 0-120]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_C20** Is smoking ever allowed inside your home?

**AC17**

YES .....1

NO .....2 **[GO TO QA11\_C22]**

REFUSED ..... -7 **[GO TO QA11\_C22]**

DON'T KNOW ..... -8 **[GO TO QA11\_C22]**

**QA11\_C21** On average, about how many days per week is there smoking inside your home?

**AD34**

**[IF RARELY OR LESS THAN 1 DAY PER WEEK, ENTER 0]**

\_\_\_\_\_ DAYS PER WEEK [HR: 0-7]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_C22** Now think about the past 12 months. Over that time, did you have any kind of alcoholic drink?

**AC32**

**[IF NEEDED, SAY: "Your best guess is fine."]**

YES .....1

NO .....2 **[GO TO QA11\_D1]**

REFUSED ..... -7 **[GO TO QA11\_D1]**

DON'T KNOW ..... -8 **[GO TO QA11\_D1]**

**PROGRAMMING NOTE QA11\_C23:**  
**IF QA11\_A5 = 1 (MALE), THEN CONTINUE WITH QA11\_C23;**  
**ELSE GO TO QA11\_C24**

**QA11\_C23**

In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?

**AC34**

**[IF NEEDED, SAY: "By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor."]**

\_\_\_\_\_TIMES [HR: 0-365; SR: 0-99] **[GO TO QA11\_D1]**

REFUSED ..... -7 **[GO TO QA11\_D1]**

DON'T KNOW ..... -8 **[GO TO QA11\_D1]**

**QA11\_C24**

In the past 12 months, about how many times did you have 4 or more alcoholic drinks in a single day?

**AC35**

**[IF NEEDED, SAY: "By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor."]**

\_\_\_\_\_TIMES [HR: 0-365; SR: 0-99]

REFUSED ..... -7

DON'T KNOW ..... -8

## Section D – General Health, Disability, and Sexual Health

**QA11\_D1** These next questions are about your height and weight.

How tall are you without shoes?

**AE17**

[IF NEEDED, SAY: "About how tall?"]

\_\_\_\_\_ FEET                      \_\_\_\_\_ INCHES                      [FT HR: 3-7, IN HR: 0-11]  
 \_\_\_\_\_ METERS                      \_\_\_\_\_ CENTIMETERS                      [M HR: 1-2, CM HR: 0-99]

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA11\_D2:

IF QA11\_A5 = 2 (FEMALE) AND AAGE < 50, THEN DISPLAY "When not pregnant, how";  
 ELSE DISPLAY "How"

**QA11\_D2** {When not pregnant, how/How} much do you weigh without shoes?

**AE18**

[IF NEEDED, SAY: "About how much?"]

\_\_\_\_\_ POUNDS                      [HR: 50-450]  
 \_\_\_\_\_ KILOGRAMS                      [HR: 20-220]

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA11\_D3:

IF AAGE = 18, THEN GO TO QA11\_D4;  
 ELSE CONTINUE WITH QA11\_D3

**QA11\_D3** How much did you weigh at age 18?

**AE19**

[IF NEEDED, SAY: "About how much?"]

\_\_\_\_\_ POUNDS                      [HR: 50-450]  
 \_\_\_\_\_ KILOGRAMS                      [HR: 20-220]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_D4** Are you blind or deaf, or do you have a severe vision or hearing problem?

**AD50**

YES .....1  
 NO .....2 [GO TO QA11\_D6]  
 REFUSED .....-7 [GO TO QA11\_D6]  
 DON'T KNOW .....-8 [GO TO QA11\_D6]

**QA11\_D5** Are you legally blind?

**AL8**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_D6** Do you have a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?

**AD57**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_D7** Because of a physical, mental, or emotional condition lasting 6 months or more, do you have any of the following:

Any difficulty learning, remembering, or concentrating?

**AD51**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_D8** Any difficulty dressing, bathing, or getting around inside the home?

**AD52**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more"]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_D9** Any difficulty going outside the home alone to shop or visit a doctor's office?

**AD53**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more"]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_D10:**  
**IF AAGE > 64 GO TO PROGRAMMING NOTE QA11\_D12;**  
**ELSE CONTINUE WITH QA11\_D10**

**QA11\_D10** Any difficulty working at a job or business?

**AD54**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]**

YES .....	1	
NO .....	2	<b>[GO TO PN QA11_D12]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_D12]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_D12]</b>

**QA11\_D11** Do you have a physical or mental condition that has kept you from working for at least a year?

**AL8A**

**[IF NEEDED, SAY: "Current condition."]**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_D12:**  
**IF AAGE > 70 OR QA11\_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 70 OR IF AGE IS UNKNOWN, GO TO**  
**PROGRAMMING NOTE QA11\_E1;**  
**ELSE CONTINUE WITH QA11\_D12**

**QA11\_D12** We are asking a few questions about people's sexual experiences. All answers will be kept private.

In the past 12 months, how many sexual partners have you had?

**AD43**

_____ NUMBER OF SEXUAL PARTNERS	<b>[GO TO PN QA11_D14]</b>
REFUSED .....	-7 <b>[GO TO PN QA11_D14]</b>
DON'T KNOW .....	-8

**QA11\_D13** Can you give me your best guess?

**AD44**

**[IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE, CODE INTO CATEGORIES PROVIDED]**

\_\_\_\_\_ NUMBER OF PARTNERS

1 PARTNER .....1  
 2-3 PARTNERS .....2  
 4-5 PARTNERS .....3  
 6-10 PARTNERS .....4  
 MORE THAN 10 PARTNERS.....5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_D14:**

**IF QA11\_D12 = 0 OR QA11\_D13 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS), THEN GO TO PROGRAMMING NOTE QA11\_D15;**

**ELSE CONTINUE WITH QA11\_D14;**

**IF QA11\_D12 = 1 OR QA11\_D13 = 1 (ONE PARTNER IN LAST 12 MONTHS), THEN DISPLAY "Is that partner male or female";**

**ELSE DISPLAY "In the past 12 months, have your sexual partners been male, female, or both male and female"**

**QA11\_D14** {Is that partner male or female/In the past 12 months, have your sexual partners been male, female, or both male and female}?

**AD45**

MALE .....1  
 FEMALE .....2  
 BOTH MALE AND FEMALE .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_D15:**

**IF QA11\_A5 = 1 (MALE), THEN DISPLAY "Gay" IN QUESTION AND "Gay" IN HELP SCREEN;**

**ELSE IF QA11\_A5 = 2 (FEMALE), THEN DISPLAY "Gay, Lesbian" IN QUESTION AND "Gay and Lesbian" IN HELP SCREEN**

**QA11\_D15** Do you think of yourself as straight or heterosexual, as {gay/gay, lesbian} or homosexual, or bisexual?

**AD46**

**[IF NEEDED, SAY: "Straight or Heterosexual people have sex with, or are primarily attracted to people of the opposite sex, {Gay/Gay and Lesbian} people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes."]**

STRAIGHT OR HETEROSEXUAL .....1  
 GAY, LESBIAN, OR HOMOSEXUAL .....2  
 BISEXUAL.....3  
 NOT SEXUAL/CELIBATE/NONE .....4  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_D16:**

IF [QA11\_A5 = 1 (MALE) AND QA11\_D14 = 1 (MALE)] OR [QA11\_A5 = 2 (FEMALE) AND QA11\_D14 = 2 (FEMALE)] OR [QA11\_D14 = 3, -7, OR -8] OR [IF QA11\_D15 ≠ 1], THEN CONTINUE WITH QA11\_D16;  
ELSE GO TO QA11\_E1

**QA11\_D16** Are you legally married to someone of the same sex?

**AD60**

**[INTERVIEWER NOTE: DO NOT INCLUDE LEGAL DOMESTIC PARTNERSHIP. INCLUDE LEGAL SAME SEX MARRIAGES PERFORMED IN CALIFORNIA AND OTHER STATES.]**

YES .....1      **[GO TO PN NEXT SECTION]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_D17** Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?

**AD61**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8



## Section E – Women’s Health

**PROGRAMMING NOTE SECTION E:**  
**IF QA11\_A5 = 1 (MALE), THEN GO TO NEXT SECTION;**  
**ELSE CONTINUE WITH SECTION E**

**PROGRAMMING NOTE QA11\_E1:**  
**IF AGE > 45, THEN GO TO PROGRAMMING NOTE QA11\_E2;**  
**ELSE CONTINUE WITH QA11\_E1**

**QA11\_E1** These next questions are about women's health.

To your knowledge, are you now pregnant?

**AD13**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_E2:**  
**IF AAGE < 30 OR QA11\_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE < 30, THEN GO TO PROGRAMMING NOTE QA11\_E21;**  
**ELSE CONTINUE WITH QA11\_E2 (INCLUDE WOMEN WITH AGE UNKNOWN);**  
**IF AGE > 45, THEN DISPLAY “These next questions are about women’s health.”**

**QA11\_E2** {These next questions are about women’s health.} In the past 12 months, has a doctor examined your breasts for lumps?

**AF37**

**[IF NEEDED, SAY: “This is when a doctor touches your breasts to check for bumps, cysts, or abnormal growth.”]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_E3** Have you ever had a mammogram?

**AD14**

**[IF NEEDED, SAY: "A mammogram is an x-ray taken of each breast separately by a machine that flattens or squeezes each breast."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**[READ DEFINITION, GO TO NEXT SECTION]**  
**[GO TO NEXT SECTION]**  
**[GO TO NEXT SECTION]**

**PROGRAMMING NOTE QA11\_E4:**  
**IF AGE IS BETWEEN 40 AND 49, THEN CONTINUE WITH QA11\_E4;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_E5**

**QA11\_E4** Has a doctor ever told you that women your age only need a mammogram every other year?

**AE92**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_E5:**  
**IF AGE > 69, THEN CONTINUE WITH QA11\_E5;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_E6**

**QA11\_E5** Has a doctor ever talked with you about stopping your mammograms?

**AE94**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_E6:**  
**IF QA11\_E3 = 2 (NEVER HAD A MAMMOGRAM), THEN GO TO PROGRAMMING NOTE QA11\_E18;**  
**ELSE IF QA11\_E3 = -7 OR -8, THEN GO TO PROGRAMMING NOTE QA11\_E21;**  
**ELSE CONTINUE WITH QA11\_E6**

**QA11\_E6** How many mammograms have you had in the last 6 years? Your best estimate is fine.

**AD16**

\_\_\_\_\_ MAMMOGRAMS [HR: 0-99]

NONE .....0  
 REFUSED .....-7  
 DON'T KNOW .....-8

**[GO TO PN QA11\_E18]**

**QA11\_E7** How long ago did you have your most recent mammogram?

**AD17**

A YEAR AGO OR LESS .....1  
 MORE THAN 1 UP TO 2 YEARS AGO .....2  
 MORE THAN 2 UP TO 3 YEARS AGO .....3  
 MORE THAN 3 UP TO 5 YEARS AGO .....4  
 MORE THAN 5 YEARS AGO .....5  
 REFUSED .....-7  
 DON'T KNOW .....-8

**[GO TO NEXT SECTION]**  
**[GO TO PN NEXT SECTION]**

**QA11\_E8** Was your most recent mammogram recommended by a doctor?

**AE50**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_E9:**

**IF QA11\_E7 = 3, 4, OR 5 (MAMMOGRAM MORE THAN 2 YEARS AGO), THEN GO TO QA11\_E10;  
 ELSE CONTINUE WITH QA11\_E9**

**QA11\_E9** Tell me the main reason you had a mammogram. Was it...

**AD18**

**[IF NEEDED, SAY: "The main reason is the most important reason."]**

Part of a routine exam, .....1  
 Because of a specific breast problem, .....2  
 A follow-up to a previously identified  
 breast problem, or .....3  
 Due to family history? .....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_E10:**

**IF QA11\_E7 = 1 (MOST RECENT MAMMOGRAM A YEAR AGO OR LESS), THEN CONTINUE WITH  
 QA11\_E10;  
 ELSE GO TO QA11\_E11**

**QA11\_E10** How much did you pay for your most recent mammogram—did you pay none, some or all of the cost?

**AE91**

NONE OF THE COST .....1  
 SOME OF THE COST .....2  
 ALL OF THE COST .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_E11** Have you ever had a mammogram where the results were not normal?

**AD19**

YES .....1  
 NO.....2 **[GO TO PN QA11\_E18]**  
 REFUSED .....-7 **[GO TO PN QA11\_E18]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_E18]**

**QA11\_E12** Have you ever had an operation to remove a lump from your breast?

**AD20**

YES .....1  
 NO .....2 [GO TO QA11\_E16]  
 REFUSED ..... -7 [GO TO QA11\_E16]  
 DON'T KNOW ..... -8 [GO TO QA11\_E16]

**QA11\_E13** Did the lump turn out to be cancer?

**AD21**

YES .....1 [GO TO QA11\_E15]  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_E14** How many operations have you had to remove a lump that wasn't cancer?

**AD22**

\_\_\_\_\_ NUMBER OF OPERATIONS [GO TO QA11\_E16]  
 REFUSED ..... -7 [GO TO QA11\_E16]  
 DON'T KNOW ..... -8 [GO TO QA11\_E16]

**QA11\_E15** Tell me how you first found out about your breast cancer. Was it by...

**AB60**

Finding it yourself by accident, .....1  
 Finding it yourself during a  
 self breast examination, .....2  
 Your husband or partner finding it, .....3  
 Your doctor finding it during a routine  
 breast exam, .....4  
 Finding it by a mammogram, or .....5  
 Some other way? (IF OTHER, SPECIFY: \_\_\_\_\_) 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_E16** Did you have any other tests and/or surgery when your mammogram was not normal?

**AD23**

YES .....1  
 NO .....2 [GO TO PN QA11\_E18]  
 REFUSED ..... -7 [GO TO PN QA11\_E18]  
 DON'T KNOW ..... -8 [GO TO PN QA11\_E18]

**QA11\_E17** What additional tests and/or surgery did you have?

**AD24**

**[CODE ALL THAT APPLY]**

**[IF NEEDED, SAY: "Any others?"]**

NO TESTS/NO SURGERY .....1  
 MASTECTOMY (SURGERY TO  
 REMOVE BREAST) .....2  
 LUMPECTOMY (SURGERY TO REMOVE LUMP) ..3  
 NEEDLE BIOPSY .....4  
 ULTRASOUND TEST .....5  
 ANOTHER MAMMOGRAM .....6  
 CLINICAL BREAST EXAM .....7  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_E18:**

**IF QA11\_E3 = 2 OR QA11\_E6 = 0 OR QA11\_E7 > 2 YEARS, THEN CONTINUE WITH QA11\_E18;  
 ELSE GO TO PROGRAMMING NOTE QA11\_E19**

**QA11\_E18** In the past 2 years, has a doctor recommended that you have a mammogram?

**AD26**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_E19:**

**IF QA11\_E18 = 1 (YES, DOCTOR RECOMMENDED A MAMMOGRAM) AND (QA11\_E3 = 2 OR QA11\_E6 = 0  
 OR QA11\_E7 > 2 YEARS), THEN CONTINUE WITH QA11\_E19;  
 IF QA11\_E7 = 3, 4, 5, OR -8 (MOST RECENT MAMMOGRAM > 2 YEARS OR DK), THEN DISPLAY  
 "NOT had a mammogram in the past 2 years";  
 IF QA11\_E3 = 2 (NEVER HAD MAMMOGRAM), THEN DISPLAY "NEVER had a mammogram";  
 ELSE GO TO NEXT SECTION**

**QA11\_E19** What is the ONE most important reason why you have {NEVER had a mammogram/NOT had a mammogram in the past 2 years}?

**AD25**

NO REASON/NEVER THOUGHT ABOUT IT .....1  
 DIDN'T KNOW I NEEDED THIS TYPE OF TEST ....2  
 DOCTOR DIDN'T TELL ME I NEEDED IT .....3  
 HAVEN'T HAD ANY PROBLEMS.....4  
 PUT IT OFF/LAZINESS .....5  
 TOO EXPENSIVE/NO INSURANCE/COST .....6  
 TOO PAINFUL, UNPLEASANT,  
 EMBARRASSING .....7  
 TOO YOUNG .....8  
 DON'T HAVE A DOCTOR .....9  
 OTHER..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

## Section F – Mental Health

**QA11\_F1** The next questions are about how you have been feeling during the past 30 days.

About how often during the past 30 days did you feel nervous—Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

**AJ29**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F2** During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?

**AJ30**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F3** During the past 30 days, about how often did you feel restless or fidgety?

**AJ31**

**[IF NEEDED, SAY: “All of the time, most of the time, some of the time, a little of the time, or none of the time?”]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F4** How often did you feel so depressed that nothing could cheer you up?

**AJ32**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F5** During the past 30 days, about how often did you feel that everything was an effort?

**AJ33**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F6** During the past 30 days, about how often did you feel worthless?

**AJ34**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F7** Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?

**AF62**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_F8:**  
**IF QA11\_F7 = 1, THEN CONTINUE WITH QA11\_F8;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_F14**

**QA11\_F8** The next questions are about the one month in the past 12 months when you were at your worst emotionally.

During that same month, how often did you feel nervous— all of the time, most, some, a little, or none of the time?

**AF63**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F9** During that same month, how often did you feel hopeless— all of the time, most, some, a little, or none of the time?

**AF64**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F10** How often did you feel restless or fidgety?

**AF65**

**[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8



**QA11\_F11** How often did you feel so depressed that nothing could cheer you up?

**AF66**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F12** How often did you feel that everything was an effort?

**AF67**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_F13** How often did you feel worthless?

**AF68**

**[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]**

ALL .....	1
MOST .....	2
SOME .....	3
A LITTLE .....	4
NONE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**ADD REVERSE CODING OF K6 CALCULATION AS TEMPORARY VARIABLE HERE:**  
**PROGRAMMING NOTE QA11\_F14INTRO:**  
 IF (QA11\_F1 + QA11\_F2 + QA11\_F3 + QA11\_F4 + QA11\_F5 + QA11\_F6 > 8) OR  
 (QA11\_F8 + QA11\_F9 + QA11\_F10 + QA11\_F11 + QA11\_F12 + QA11\_F13 > 8) OR  
 (QA11\_F1-F6 = ONE OUT OF RANGE RESPONSE AND F1-F6 > 7) OR  
 (QA11\_F8-F13 = ONE OUT OF RANGE RESPONSE AND F8-F13 > 7), THEN CONTINUE WITH  
 QA11\_F14INTRO;  
 IF QA11\_F7 = 1, THEN DISPLAY "again, please";  
 ELSE GO TO QA11\_F19

**QA11\_F14INTRO** Think {again, please} about the month in the past 12 months when you were at your worst emotionally.

**PROGRAMMING NOTE QA11\_F14:**  
 IF AGE > 70, THEN GO TO QA11\_F15;  
 ELSE CONTINUE WITH QA11\_F14

**QA11\_F14** Did your emotions interfere a lot, some, or not at all with your performance at work?

**AF69B**

A LOT .....1  
 SOME .....2  
 NOT AT ALL .....3  
 DOES NOT WORK .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F15** Did your emotions interfere a lot, some, or not at all with your household chores?

**AF70B**

A LOT .....1  
 SOME .....2  
 NOT AT ALL .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F16** Did your emotions interfere a lot, some, or not at all with your social life?

**AF71B**

A LOT .....1  
 SOME .....2  
 NOT AT ALL .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F17** Did your emotions interfere a lot, some, or not at all with your relationship with friends and family?

**AF72B**

A LOT .....1  
 SOME .....2  
 NOT AT ALL .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F18** Now think about the past 12 months. About how many days out of the past 365 days were you totally unable to work or carry out your normal activities because of your feeling nervous, depressed, or emotionally stressed?

**AF73B**

**[IF NEEDED, SAY: "You can use any number between 0 and 365 to answer."]**

\_\_\_\_\_ NUMBER OF DAYS

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_F19** Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

**AF81**

YES ..... 1

NO ..... 2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO QA11\_F21]**

**[GO TO QA11\_F21]**

**[GO TO QA11\_F21]**

**QA11\_F20** Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?

**AJ1**

YES ..... 1

NO ..... 2

DON'T HAVE INSURANCE ..... 3

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_F21** In the past 12 months, have you seen your primary care physician or general practitioner for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

**AF74**

YES ..... 1

NO ..... 2

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_F22** In the past 12 months, have you seen any other professional, such as a counselor, psychiatrist, or social worker for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

**AF75**

YES ..... 1

NO ..... 2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_F23:**

**IF QA11\_F21 = 1 OR QA11\_F22 = 1, THEN CONTINUE WITH QA11\_F23;  
ELSE GO TO QA11\_F28**

**QA11\_F23** Did you seek help for your mental or emotional health or for an alcohol or drug problem?

**AF76**

MENTAL-EMOTIONAL HEALTH.....1  
ALCOHOL-DRUG PROBLEM .....2  
BOTH MENTAL & ALCOHOL-DRUG .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_F24:**

**IF QA11\_F23 = 1, THEN DISPLAY “mental or emotional health”;  
ELSE IF QA11\_F23 = 2, THEN DISPLAY “use of alcohol or drugs”;  
ELSE IF QA11\_F23 = 3, THEN DISPLAY “mental or emotional health and your use of alcohol or drugs”;  
ELSE GO TO QA11\_F25**

**QA11\_F24** In the past 12 months, how many visits did you make to a professional for problems with your {mental or emotional health/use of alcohol or drugs/mental or emotional health and your use of alcohol or drugs}? Do not count overnight hospital stays.

**AF77**

\_\_\_\_\_ NUMBER OF VISITS

REFUSED ..... -7  
DON'T KNOW ..... -8

**QA11\_F25** Are you still receiving treatment for these problems from one or more of these providers?

**AF78**

YES .....1 **[GO TO QA11\_F28]**  
NO .....2  
REFUSED ..... -7 **[GO TO QA11\_F28]**  
DON'T KNOW ..... -8 **[GO TO QA11\_F28]**

**QA11\_F26** Did you complete the recommended full course of treatment?

**AF79**

YES .....1 **[GO TO QA11\_F28]**  
NO .....2  
REFUSED ..... -7 **[GO TO QA11\_F28]**  
DON'T KNOW ..... -8 **[GO TO QA11\_F28]**

**QA11\_F27** What is the MAIN REASON you are no longer receiving treatment?

**AF80**

GOT BETTER/NO LONGER NEEDED .....1  
 NOT GETTING BETTER .....2  
 WANTED TO HANDLE PROBLEM ON OWN.....3  
 HAD BAD EXPERIENCES WITH TREATMENT .....4  
 LACK OF TIME/TRANSPORTATION.....5  
 TOO EXPENSIVE .....6  
 INSURANCE DOES NOT COVER .....7  
 OTHER (SPECIFY:.....)..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F28** During the past 12 months, did you take any prescription medications, such as an antidepressant or sedative, almost daily for two weeks or more, for an emotional or personal problem?

**AJ5**

YES .....1  
 NO.....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMING NOTE QA11\_F29:**

**IF QA11\_F19 = 1 AND (QA11\_F21 ≠ 1 AND QA11\_F22 ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT),  
 THEN CONTINUE WITH QA11\_F29;  
 ELSE GO TO QA11\_G1**

**QA11\_F29** Here are some reasons people have for not seeking help even when they think they might need it. Please tell me "yes" or "no" for whether each statement applies to why you did not see a professional.

You were concerned about the cost of treatment.

**AF82**

YES .....1  
 NO.....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F30** You did not feel comfortable talking with a professional about your personal problems.

**AF83**

YES .....1  
 NO.....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F31** You were concerned about what would happen if someone found out you had a problem.

**AF84**

YES .....1  
 NO.....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_F32**      You had a hard time getting an appointment.

<b>AF85</b>
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YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

## Section G – Demographic Information, Part II

**QA11\_G1** Now a few more questions about your background.

In what country were you born?

**AH33**

**[SELECT FROM MOST LIKELY COUNTRIES]**

UNITED STATES.....	1
AMERICAN SAMOA .....	2
CANADA .....	3
CHINA .....	4
EL SALVADOR .....	5
ENGLAND .....	6
FRANCE .....	7
GERMANY .....	8
GUAM .....	9
GUATEMALA .....	10
HUNGARY .....	11
INDIA.....	12
IRAN.....	13
IRELAND.....	14
ITALY .....	15
JAPAN.....	16
KOREA.....	17
MEXICO .....	18
PHILIPPINES.....	19
POLAND .....	20
PORTUGAL .....	21
PUERTO RICO .....	22
RUSSIA.....	23
TAIWAN .....	24
VIETNAM .....	25
VIRGIN ISLANDS .....	26
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_G2:****IF QA11\_G1 ≠ 1 (NOT BORN IN US), THEN GO TO QA11\_G4;****ELSE IF QA11\_G1 = 1, -7, OR -8 (BORN IN US, REFUSED, OR DON'T KNOW), THEN CONTINUE WITH QA11\_G2****QA11\_G2** In what country was your mother born?**AH34****[SELECT FROM MOST LIKELY COUNTRIES]****[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

UNITED STATES.....	1
AMERICAN SAMOA .....	2
CANADA .....	3
CHINA .....	4
EL SALVADOR .....	5
ENGLAND .....	6
FRANCE .....	7
GERMANY .....	8
GUAM .....	9
GUATEMALA .....	10
HUNGARY .....	11
INDIA.....	12
IRAN.....	13
IRELAND.....	14
ITALY .....	15
JAPAN.....	16
KOREA.....	17
MEXICO .....	18
PHILIPPINES.....	19
POLAND .....	20
PORTUGAL .....	21
PUERTO RICO .....	22
RUSSIA.....	23
TAIWAN .....	24
VIETNAM .....	25
VIRGIN ISLANDS .....	26
OTHER (SPECIFY:.....)	91
REFUSED .....	-7
DON'T KNOW .....	-8



**QA11\_G3** In what country was your father born?

<b>AH35</b>
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**[SELECT FROM MOST LIKELY COUNTRIES]**

**[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

UNITED STATES.....	1
AMERICAN SAMOA .....	2
CANADA .....	3
CHINA .....	4
EL SALVADOR .....	5
ENGLAND.....	6
FRANCE .....	7
GERMANY .....	8
GUAM .....	9
GUATEMALA.....	10
HUNGARY .....	11
INDIA.....	12
IRAN.....	13
IRELAND.....	14
ITALY .....	15
JAPAN.....	16
KOREA.....	17
MEXICO .....	18
PHILIPPINES.....	19
POLAND .....	20
PORTUGAL .....	21
PUERTO RICO .....	22
RUSSIA.....	23
TAIWAN .....	24
VIETNAM .....	25
VIRGIN ISLANDS .....	26
OTHER (SPECIFY:.....)	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_G4** What languages do you speak at home?

**AH36**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

ENGLISH .....	1
SPANISH .....	2
CANTONESE .....	3
VIETNAMESE .....	4
TAGALOG .....	5
MANDARIN .....	6
KOREAN .....	7
ASIAN INDIAN LANGUAGES .....	8
RUSSIAN .....	9
OTHER 1 (SPECIFY: _____) .....	91
OTHER 2 (SPECIFY: _____) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_G5 AND QA11\_G6:**

**IF INTERVIEW NOT CONDUCTED IN ENGLISH, THEN CONTINUE WITH QA11\_G5;**

**IF INTERVIEW CONDUCTED IN ENGLISH AND QA11\_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), THEN CONTINUE WITH QA11\_G5 AND DISPLAY: "Since you speak a language other than English at home, we are interested in the languages you use in other situations";**

**ELSE IF QA11\_G4 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), THEN GO TO QA11\_G8**

**QA11\_G5** {Since you speak a language other than English at home, we are interested in the languages you use in other situations.} What language do you speak with your friends?

**AG20**

ONLY ENGLISH .....	1
BOTH ENGLISH AND OTHER LANGUAGE(S) .....	2
ONLY OTHER LANGUAGE(S) .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_G6** In what languages are the TV shows, radio stations, or newspapers that you usually watch, listen or read?

**AG21**

ONLY ENGLISH .....	1
BOTH ENGLISH AND OTHER LANGUAGE(S) .....	2
ONLY OTHER LANGUAGE(S) .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_G7:**

**IF INTERVIEW CONDUCTED IN ENGLISH AND QA11\_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), THEN CONTINUE WITH QA11\_G7 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English" AND DROP RESPONSE CATEGORY "Not at all?";**

**ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, THEN CONTINUE WITH QA11\_G7;**

**ELSE GO TO PROGRAMMING NOTE QA11\_G8**

**QA11\_G7** {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English...

**AH37**

Very well, .....1  
 Well, .....2  
 Not well, or .....3  
 Not at all? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G8:**

**IF QA11\_G1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), THEN GO TO PROGRAMMING NOTE QA11\_G11;**

**ELSE CONTINUE WITH QA11\_G8**

**QA11\_G8** The next questions are about citizenship and immigration.

Are you a citizen of the United States?

**AH39**

YES .....1 **[GO TO QA11\_G10]**  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_G9** Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

**AH40**

**[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]**

YES .....1  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_G10** About how many years have you lived in the United States?

**AH41**

**[FOR LESS THAN A YEAR, ENTER 1 YEAR]**

\_\_\_\_\_ NUMBER OF YEARS  
 \_\_\_\_\_ YEAR (FIRST CAME TO LIVE IN U.S.)

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G11:**

IF [QA11\_A16 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA11\_G11;

IF QA11\_A16 = 1, THEN DISPLAY "spouse";

IF QA11\_A16 = 2 OR QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY "partner";

ELSE GO TO PROGRAMMING NOTE QA11\_G13

**QA11\_G11** Is your {spouse/partner} also living in your household?

**AH44**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_G12** May I have your {spouse/partner}'s first name and age?

**SC11A**

**[ENTER SPOUSE'S/PARTNER'S NAME, AGE, AND SEX]**

SPOUSE/PARTNER NAME \_\_\_\_\_

SPOUSE/PARTNER AGE \_\_\_\_\_

SPOUSE/PARTNER SEX \_\_\_\_\_

**PROGRAMMING NOTE QA11\_G13:**

IF [AAGE < 30 OR QA11\_A4 = 1 (AGE 18-29)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH, THEN CONTINUE WITH QA11\_G13;

IF [AAGE < 30 OR QA11\_A4 = 1 (AGE 18-29)] AND QA11\_A16 = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, THEN CONTINUE WITH QA11\_G13;

ELSE GO TO PROGRAMMING NOTE QA11\_G14

**QA11\_G13** Are you now living with either of your parents?

**AH43A**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G14:**  
**IF COMPLETED CHILD 1<sup>ST</sup> INTERVIEW, THEN GO TO QA11\_G20;**  
**ELSE CONTINUE WITH QA11\_G14**

**QA11\_G14** Are there any children under the age of 18 living in the household, including babies?

**SC12**

YES .....1  
 NO .....2 [GO TO QA11\_G22]  
 REFUSED ..... -7 [GO TO QA11\_G22]  
 DON'T KNOW ..... -8 [GO TO QA11\_G22]

**QA11\_G15** Please tell me only the first names and ages of all the children under 18, including babies, who normally live in your household.

**SC13A**

[PROBE: "Is there anyone else?"]

[ENTER AGE OF 0 (ZERO), IF LESS THAN 1 YEAR OLD]

CHILD	FIRST NAME	AGE	M/F
1			
2			
3			
4			
5			

**QA11\_G16** Is (CHILD) ...

**SC15A**

0 To 11 years old or .....1 [CODE AS CHILD]  
 12 To 17 years old? .....2 [CODE AS TEEN]  
 REFUSED ..... -7 [CODE AS TEEN]  
 DON'T KNOW ..... -8 [CODE AS TEEN]

**QA11\_G17** I have recorded {number} {child/children} under 18 in the household. Have I missed any children under 18 who usually live here but are temporarily away?

**SC13**

NO ONE MISSED -- ROSTER IS CORRECT .....1  
 RETURN TO ROSTER .....2 [GO BACK TO QA11\_G15]

**PROGRAMMING NOTE QA11\_G18:**  
**IF ANY PEOPLE IN HH UNDER AGE 18, ASK QA11\_G18 ABOUT EACH PERSON UNDER 18**

**QA11\_G18** Are you the parent or legal guardian of (PERSON NAME/AGE/SEX)?

**SC14A**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G19:**

**IF ANY PEOPLE IN HH UNDER AGE 18 AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN HOUSEHOLD), THEN ASK QA11\_G19 ABOUT THE SPOUSE/PARTNER AND EACH PERSON UNDER 18; ELSE GO TO QA11\_G20**

**QA11\_G19** Is (NAME/AGE/SEX) the parent or legal guardian of (PERSON NAME/AGE/SEX)?

**SC14B**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G20:**

**IF QA11\_G14 = 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA11\_G15 ARE AGE 13 OR LESS, THEN CONTINUE WITH QA11\_G20;**

**ELSE GO TO QA11\_G22;**

**IF ANY CHILD IN ROSTER QA11\_G15 ≥ 14, DISPLAY “for any children under age 14”;**

**IF QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN HH), THEN DISPLAY “you or your spouse”;**

**ELSE IF QA11\_G11 = 1, THEN DISPLAY “you or your partner”;**

**ELSE DISPLAY “you”**

**QA11\_G20** In the past month, did you use any paid childcare {for any children under age 14} while {you or your spouse/you or your partner/you} worked, were in school, or looked for work?

**AH44A**

**[IF NEEDED, SAY: “This includes Head Start, day care centers, before- or after-school care programs, and any baby-sitting arrangements.”]**

YES .....1  
 NO .....2 **[GO TO QA11\_G22]**  
 REFUSED ..... -7 **[GO TO QA11\_G22]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_G22]**

**QA11\_G21** In the past month, how much did you pay for all child care arrangements and programs?

**AH44B**

**[IF NEEDED, SAY: “If it is easier for you, you can tell me what you paid in a typical week last month. You or any other adult in your household.”]**

\$ \_\_\_\_\_ AMOUNT LAST MONTH [HR: 0-8,000]

\$ \_\_\_\_\_ AMOUNT IN TYPICAL WEEK [HR: 0-3,000]

NO PAYMENT IN LAST MONTH OR WEEK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_G22** What is the highest grade of education you have completed and received credit for?

**AH47**

<b>NO FORMAL EDUCATION</b> .....	30
<b>GRADE SCHOOL</b>	
1ST GRADE.....	1
2ND GRADE .....	2
3RD GRADE .....	3
4TH GRADE.....	4
5TH GRADE.....	5
6TH GRADE.....	6
7TH GRADE.....	7
8TH GRADE.....	8
<b>HIGH SCHOOL OR EQUIVALENT</b>	
9TH GRADE.....	9
10TH GRADE.....	10
11TH GRADE.....	11
12TH GRADE.....	12
<b>4-YEAR COLLEGE OR UNIVERSITY</b>	
1ST YEAR (FRESHMAN) .....	13
2ND YEAR (SOPHOMORE).....	14
3RD YEAR (JUNIOR) .....	15
4TH YEAR (SENIOR) (BA/BS) .....	16
5TH YEAR.....	17
<b>GRADUATE OR PROFESSIONAL SCHOOL</b>	
1ST YEAR GRAD OR PROF SCHOOL .....	18
2ND YEAR GRAD OR PROF SCHOOL (MA/MS). ..	19
3RD YEAR GRAD OR PROF SCHOOL .....	20
MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD) .....	21
<b>2-YEAR JUNIOR OR COMMUNITY COLLEGE</b>	
1ST YEAR.....	22
2ND YEAR (AA/AS) .....	23
<b>VOCATIONAL, BUSINESS, OR TRADE SCHOOL</b>	
1ST YEAR.....	24
2ND YEAR .....	25
MORE THAN 2 YEARS .....	26
REFUSED .....	-7
DON'T KNOW (OUT OF RANGE) .....	-8

**QA11\_G23** Did you ever serve on active duty in the Armed Forces of the United States?

**AG22**

YES .....	1	
NO.....	2	[GO TO QA11_G26]
REFUSED .....	-7	[GO TO QA11_G26]
DON'T KNOW .....	-8	[GO TO QA11_G26]

**QA11\_G24** When did you serve?

**AG23**

FROM \_\_\_\_\_ TO \_\_\_\_\_

OR

**[CHECK ALL THAT APPLY]**

World War II (Sept 1940 to July 1947) .....1  
 Korean War (June 1950 to Jan 1955).....2  
 Vietnam War (Aug 1964 to April 1975) .....3  
 Gulf War/Operation Desert  
 Storm (1990 to 1991) .....4  
 Afghanistan/Operation Enduring  
 Freedom (2001 to present) .....5  
 Iraq War/Operation Iraqi  
 Freedom (2003 to present) .....6  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_G25** Altogether, how long did you serve?

**AG24**

\_\_\_\_\_ YEARS

\_\_\_\_\_ MONTHS

REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_G26** Which of the following were you doing last week?

**AK1**

Working at a job or business,.....1 **[GO TO QA11\_G30]**  
 With a job or business but not at work, .....2  
 Looking for work, or .....3  
 Not working at a job or business?.....4  
 REFUSED ..... -7 **[GO TO QA11\_G30]**  
 DON'T KNOW ..... -8 **[GO TO QA11\_G30]**



**QA11\_G27** What is the main reason you did not work last week?

**AK2**

**[IF NEEDED, SAY: "Main reason is the most important reason."]**

TAKING CARE OF HOUSE OR FAMILY .....1  
 ON PLANNED VACATION .....2  
 COULDN'T FIND A JOB .....3  
 GOING TO SCHOOL/STUDENT .....4  
 RETIRED .....5  
 DISABLED .....6  
 UNABLE TO WORK TEMPORARILY .....7  
 ON LAYOFF OR STRIKE .....8  
 ON FAMILY OR MATERNITY LEAVE .....9  
 OFF SEASON ..... 10  
 SICK ..... 11  
 OTHER ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**[GO TO PN QA11\_G29]**

**[GO TO PN QA11\_G29]**

**QA11\_G28** Do you usually work?

**AG10**

YES .....1  
 NO .....2  
 LOOKING FOR WORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_G29:**

**IF [(AAGE = -7 OR -8) OR AAGE < 65] AND QA11\_G28 = 2 (DOES NOT USUALLY WORK), THEN  
 CONTINUE WITH QA11\_G29;**

**IF [(AAGE = -7 OR -8) OR AAGE < 65] AND [QA11\_G27 = 5 (RETIRED) OR 6 (DISABLED)], THEN  
 CONTINUE WITH QA11\_G29;**

**ELSE GO TO PROGRAMMING NOTE QA11\_G30**

**QA11\_G29** Are you receiving Social Security Disability Insurance or SSDI?

**AL22**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**[GO TO PN QA11\_G31]**

**[GO TO PN QA11\_G31]**

**[GO TO PN QA11\_G31]**

**[GO TO PN QA11\_G31]**

**PROGRAMMING NOTE QA11\_G30:**

**IF (QA11\_G26 = 1, 2, -7, OR -8 (WORKING AT A JOB, WITH A JOB BUT NOT AT WORK, REF, DK) OR QA11\_G28 = 1 (USUALLY WORKS), THEN CONTINUE WITH QA11\_G30;  
ELSE GO TO PROGRAMMING NOTE QA11\_G31**

**QA11\_G30** On your main job, are you employed by a private company, the government, or are you self-employed, or are you working without pay in a family business or farm?

**AK4**

**[IF NEEDED, SAY: "Where did you work most hours?"]**

PRIVATE COMPANY, NON-PROFIT  
ORGANIZATION, OR FOUNDATION .....1  
GOVERNMENT .....2  
SELF-EMPLOYED .....3  
FAMILY BUSINESS OR FARM .....4  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_G31:**

**IF QA11\_A16 = 1 (MARRIED) OR [QA11\_D16 = 1 OR QA11\_D17 = 1 5 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA11\_G31;  
IF QA11\_A16 = 1, THEN DISPLAY "spouse";  
ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY "partner";  
ELSE GO TO QA11\_H1**

**QA11\_G31** Which of the following was your {spouse/partner} doing last week?

**AG8**

Working at a job or business,.....1	<b>[GO TO QA11_G33]</b>
With a job or business but not at work,.....2	<b>[GO TO QA11_G33]</b>
Looking for work, or .....3	
Not working at a job/business? .....4	
REFUSED .....-7	
DON'T KNOW .....-8	

**QA11\_G32** Does your {spouse/partner} usually work?

**AG11**

YES .....1	
NO .....2	<b>[GO TO QA11_H1]</b>
LOOKING FOR WORK .....3	<b>[GO TO QA11_H1]</b>
REFUSED .....-7	<b>[GO TO QA11_H1]</b>
DON'T KNOW .....-8	<b>[GO TO QA11_H1]</b>

**QA11\_G33**

On your {spouse's/partner's} main job, is {he/she} employed by a private company, the government, or is {he/she} self-employed, or is {he/she} working without pay in a family business or farm?

**AG9**

**[IF NEEDED, SAY: "Where did {he/she} work MOST hours?"]**

PRIVATE COMPANY, NON-PROFIT  
ORGANIZATION, OR FOUNDATION .....1  
GOVERNMENT .....2  
SELF-EMPLOYED .....3  
FAMILY BUSINESS OR FARM .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

## Section H – Health Insurance

**QA11\_H1** The next topics are about health insurance and health care.

Is there a place that you usually go to when you are sick or need advice about your health?

**AH1**

**[CODE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]**

YES .....	1	
NO .....	2	<b>[GO TO QA11_H3]</b>
DOCTOR/MY DOCTOR .....	3	
KAISER .....	4	
MORE THAN ONE PLACE .....	5	
REFUSED .....	-7	<b>[GO TO QA11_H3]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_H3]</b>

**PROGRAMMING NOTE QA11\_H2:**

**IF QA11\_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE), THEN DISPLAY "What kind of place do you go to most often--a medical";**

**ELSE IF QA11\_H1 = 3 (DOCTOR/MY DOCTOR), THEN DISPLAY "Is your doctor in a private";**

**ELSE IF QA11\_H1 = 4 (KAISER), THEN CODE "1" FOR QA11\_H2 AND GO TO QA11\_H3**

**QA11\_H2** {What kind of place do you go to most often—a medical} {Is your doctor in a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

**AH3**

DOCTOR'S OFFICE/KAISER/OTHER HMO .....	1
CLINIC/HEALTH CENTER/HOSPITAL CLINIC .....	2
EMERGENCY ROOM .....	3
SOME OTHER PLACE (SPECIFY: _____) ....	91
NO ONE PLACE .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H3:**

**IF QA11\_B6 = 1 OR QA11\_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA11\_B27 = 1 (YES, R VISITED ER FOR DIABETES) OR QA11\_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN GO TO QA11\_H4;**

**ELSE CONTINUE WITH QA11\_H3**

**QA11\_H3** During the past 12 months, did you visit a hospital emergency room for your own health?

**AH12**

YES .....	1	
NO .....	2	<b>[GO TO QA11_H5]</b>
REFUSED .....	-7	<b>[GO TO QA11_H5]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_H5]</b>

**PROGRAMMING NOTE QA11\_H4:**

IF QA11\_B6 = 1 OR QA11\_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA11\_B27 = 1 (YES, R VISITED ER FOR DIABETES) OR QA11\_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN DISPLAY “During the past 12 months, how many times did you visit a hospital emergency room for your own health?”;

ELSE DISPLAY “How many times did you do that?”

**QA11\_H4** {During the past 12 months, how many times did you visit a hospital emergency room for your own health/How many times did you do that}?

**AH95**

\_\_\_\_\_ NUMBER OF TIMES

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_H5** MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE ?

**A11**

[INCLUDE MEDICARE MANAGED PLANS AS WELL AS THE ORIGINAL MEDICARE PLAN.]

YES .....1 [GO TO PN QA11\_H8]

NO .....2

REFUSED .....-7 [GO TO PN QA11\_H15]

DON'T KNOW .....-8 [GO TO PN QA11\_H15]

**POST-NOTE QA11\_H5:**

IF QA11\_H5 = 1, SET ARM CARE = 1 AND SET ARINSURE = 1

**PROGRAMMING NOTE QA11\_H6:**

IF [AAGE > 64 OR QA11\_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND QA11\_H5 = 2 (NOT COVERED BY MEDICARE), THEN CONTINUE WITH QA11\_H6;

ELSE GO TO PROGRAMMING NOTE QA11\_H8

**QA11\_H6** Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?

**A12**

CORRECT, NOT COVERED BY MEDICARE .....1 [GO TO PN QA11\_H15]

NOT CORRECT, R IS COVERED BY MEDICARE ..2 [GO TO PN QA11\_H8]

AGE IS INCORRECT ..... 93

REFUSED .....-7 [GO TO PN QA11\_H15]

DON'T KNOW .....-8 [GO TO PN QA11\_H15]

**POST-NOTE QA11\_H6:**

IF QA11\_H6 = 2, SET ARM CARE = 1 AND SET ARINSURE = 1

**QA11\_H7** What is your age, please?

**AI3**

\_\_\_\_\_ YEARS OF AGE [HR: 18-105] [GO TO PN QA11\_H15]

REFUSED ..... -7 [GO TO PN QA11\_H15]  
DON'T KNOW ..... -8 [GO TO PN QA11\_H15]

**POST NOTE QA11\_H7: AIDATE**  
**SET AIDATE = CURRENT DATE (YYYYMMDD);**  
**SET AAGE = QA11\_H7;**  
**IF AAGE < 18, CODE AS IA AND TERMINATE**

**PROGRAMMING NOTE QA11\_H8:**  
**IF ARM CARE = 1, THEN CONTINUE WITH QA11\_H8;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H15**

**QA11\_H8** Is your MediCARE coverage provided through an HMO?

**AH49**

[IF NEEDED, SAY: "With an HMO, you must generally receive care from HMO doctors or the expense is not covered, unless there was a medical emergency."]

[IF R MENTIONS A HEALTH PLAN SUCH AS "Kaiser" OR "Blue Cross," CODE "1" (YES).]

YES .....1  
NO .....2 [GO TO QA11\_H10]  
REFUSED .....-7 [GO TO QA11\_H10]  
DON'T KNOW .....-8 [GO TO QA11\_H10]

**POST-NOTE QA11\_H8:**  
**IF QA11\_H8 = 1, SET ARMHMO = 1**

**QA11\_H9** What is the name of your MediCARE HMO plan?

**AH50**

AARP MEDICARE COMPLETE ..... 1  
AETNA ..... 2  
AETNA MEDICARE (SELECT/PREMIER) ..... 3  
ALAMEDA ALLIANCE FOR HEALTH ..... 4  
ALLIANCE COMPLETE CARE ..... 5  
ANTHEM BLUE CROSS/BLUE CROSS ..... 6  
ARCADIAN COMMUNITY CARE ..... 7  
BLUE CROSS SENIOR SECURE ..... 8  
BLUE SHIELD 65 PLUS ..... 9  
BLUE SHIELD OF CALIFORNIA ..... 10  
CAL OPTIMA ..... 11  
CARE 1<sup>ST</sup> HEALTH PLAN ..... 12  
CARE ADVANTAGE ..... 13  
CARE MORE ..... 14  
CEN CAL HEALTH..... 15  
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH ..... 16  
CENTRAL HEALTH PLAN OF CALIFORNIA ..... 17  
CHINESE COMMUNITY HEALTH PLAN..... 18  
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM ..... 19  
CIGNA..... 20

CITIZENS CHOICE HEALTHPLAN .....	21
COMMUNICARE ADVANTAGE .....	22
COMMUNITY HEALTH GROUP .....	23
COMMUNITY HEALTH PLAN.....	24
CONTRA COSTA HEALTH PLAN .....	25
DEPARTMENT OF HEALTH SERVICES .....	26
EASY CHOICE HEALTH PLAN .....	27
GEM CARE .....	28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN .....	29
GREAT-WEST .....	30
HEALTH NET .....	31
HEALTH PLAN OF SAN JOAQUIN.....	32
HEALTH PLAN OF SAN MATEO.....	33
HUMANA GOLD PLUS .....	34
IEHP (INLAND EMPIRE HEALTH PLAN) .....	35
IEHP MEDICARE DUAL CHOICE.....	36
INTER VALLEY HEALTH PLAN .....	37
KAISER.....	38
KERN COUNTY HEALTH PLAN.....	39
L.A. CARE HEALTH PLAN .....	40
MD CARE.....	41
MOLINA HEALTH PLAN .....	42
MOLINA MEDICARE OPTIONS .....	43
ON LOK.....	44
ON LOK SENIOR HEALTH SERVICES.....	45
ONE CARE .....	46
PACIFICARE.....	47
PARTNERSHIP HEALTH PLAN OF CALIFORNIA.....	48
SALUD CON HEALTH NET .....	49
SAN FRANCISCO HEALTH PLAN .....	50
SANTA CLARA FAMILY HEALTH PLAN .....	51
SCAN HEALTH PLAN .....	52
SECURE HORIZONS .....	53
SENIOR ADVANTAGE .....	54
SENIORITY PLUS.....	55
SERVICE TO SENIORS .....	56
SHARP HEALTH PLAN .....	57
TOTAL FIT .....	58
VALLEY HEALTH PLAN .....	59
VENTURA COUNTY HEALTH CARE PLAN.....	60
WESTERN HEALTH ADVANTAGE .....	61
WESTERN HEALTH ADVANTAGE CARE+ .....	62
CHAMPUS/CHAMP-VA .....	63
TRICARE/TRICARE FOR LIFE/TRICARE PRIME .....	64
VA HEALTH CARE SERVICES .....	65
MEDI-CAL .....	66
MEDICARE .....	67
MEDICARE ADVANTAGE .....	68
OTHER.....	91
OTHER (SPECIFY:.....) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE FOR QA11\_H9:**  
**ALL ANSWERS GO TO PROGRAMMING NOTE QA11\_H11;**  
**IF QA11\_H9 = 62, 63, OR 64 THEN ARMILIT = 1**

**QA11\_H10** Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Do you have this type of health insurance?

**A14**

**[IF NEEDED, SAY: "These are policies that cover health care costs not covered by MediCARE alone."]**

YES .....	1	
NO .....	2	<b>[GO TO PN QA11_H15]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_H15]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H15]</b>

**POST-NOTE FOR QA11\_H10:**  
**IF QA11\_H10 = 1, SET ARSUPP = 1**

**PROGRAMMING NOTE QA11\_H11:**  
**IF QA11\_H8 = 1 (MEDICARE HMO), THEN CONTINUE WITH QA11\_H11 AND DISPLAY "MediCARE HMO";**  
**IF QA11\_H10 = 1 (HAS SUPPLEMENT), THEN CONTINUE WITH QA11\_H11 AND DISPLAY "MediCARE Supplement plan";**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H15**

**QA11\_H11** For the {MediCARE HMO/MediCARE Supplement plan}, did you sign up directly, or did you get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?

**AH52**

**[IF NEEDED, SAY: "AARP stands for the American Association of Retired Persons."]**

DIRECTLY .....	1
CURRENT EMPLOYER .....	2
FORMER EMPLOYER .....	3
UNION .....	4
FAMILY BUSINESS .....	5
AARP .....	6
SPOUSE'S EMPLOYER .....	7
SPOUSE'S UNION .....	8
PROFESSIONAL/FRATERNAL ORGANIZATION .....	9
OTHER .....	91
REFUSED .....	-7
DON'T KNOW .....	-8



QA11\_H12

Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

AH53

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."**

**"A deductible is the amount you pay for medical care before your health plan starts paying."**

**"Premium is the monthly charge for the cost of your health insurance plan."**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

QA11\_H13

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

AH54

YES .....1  
 NO .....2 [GO TO PN QA11\_H15]  
 REFUSED ..... -7 [GO TO PN QA11\_H15]  
 DON'T KNOW ..... -8 [GO TO PN QA11\_H15]

QA11\_H14

Who is that?

AH55

**[IF NEEDED, SAY: "Who besides yourself pays any portion of that cost for that plan, such as your employer, a union, or professional organization?"]**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

CURRENT EMPLOYER .....1  
 FORMER EMPLOYER .....2  
 UNION .....3  
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4  
 SPOUSE'S/PARTNER'S FORMER EMPLOYER.....5  
 PROFESSIONAL/FRATERNAL ORGANIZATION...6  
 MEDICAID/MEDI-CAL ASSISTANCE .....7  
 HEALTHY FAMILIES .....8  
 OTHER..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QA11\_H14:**

**IF QA11\_H14 = 7, SET ARMCAL = 1;**

**IF QA11\_H14 = 8, SET ARHFAM = 1**

**PROGRAMMING NOTE QA11\_H15:**  
**IF ARMCAL = 1, THEN DISPLAY "Is it correct that you are";**  
**ELSE DISPLAY "Are you"**

**QA11\_H15** {Is it correct that you are/Are you} covered by Medi-CAL?

**AI6**

**[IF NEEDED, SAY: "A plan for certain low-income children and their families, pregnant women, and disabled or elderly people."]**

YES .....1      **[GO TO QA11\_H17]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QA11\_H15:**  
**IF QA11\_H15 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;**  
**IF ARMCAL = 1 AND QA11\_H15 = 2, SET ARMCAL = 0**

**PROGRAMMING NOTE QA11\_H16:**  
**IF AAGE > 18 OR [QA11\_A4 ≠ -7 OR -8 (REF/DK)] OR ENUM.AGE > 18 OR IF AGE IS UNKNOWN, THEN GO TO PROGRAMMING NOTE QA11\_H17;**  
**ELSE IF [AAGE = 18 OR QA11\_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18] AND ARHFAM = 1, THEN CONTINUE WITH QA11\_H16 AND DISPLAY "Is it correct, then, that you are";**  
**ELSE IF [AAGE = 18 OR QA11\_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18], THEN CONTINUE WITH QA11\_H16 AND DISPLAY "Are you"**

**QA11\_H16** {Is it correct, then, that you are/Are you} covered by the Healthy Families Program?

**AI7**

**[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QA11\_H16:**  
**IF QA11\_H16 = 1, THEN SET ARHFAM = 1 AND ARINSURE = 1;**  
**IF ARHFAM = 1 AND QA11\_H16 = 2, THEN SET ARHFAM = 0**

**PROGRAMMING NOTE QA11\_H17:**

**IF ARSUPP = 1, THEN DISPLAY “Besides the Medicare supplemental plan you told me about” AND “any other”;**  
**ELSE IF ARMHMO = 1, THEN DISPLAY “Besides the Medicare HMO plan you told me about” AND “any other”;**  
**ELSE DISPLAY “a”**

**QA11\_H17** {Besides the Medicare supplemental plan you told me about/Besides the Medicare HMO plan you told me about}, Are you covered by {any other/a} health insurance plan or HMO through a current or former employer or union?

**AI8**

**[IF NEEDED, SAY: "...either through your own or someone else's employment?"]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QA11\_H17:**

**IF QA11\_H17 = 1, THEN SET AREMPOTH = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H18:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, AND EMPLOYER), THEN CONTINUE WITH QA11\_H18;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H19**

**QA11\_H18** Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO?

**AI11**

**[IF NEEDED, SAY: “Don’t include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you ‘extra cash’ if you are in a hospital.”]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QA11\_H18:**

**IF QA11\_H18 = 1, THEN SET ARDIRECT = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H19:**

**IF QA11\_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA11\_H18 = 1 (PURCHASED OWN COVERAGE), THEN CONTINUE WITH QA11\_H19;  
ELSE GO TO PROGRAMMING NOTE QA11\_H24**

**QA11\_H19** Was this plan obtained in your own name or in the name of someone else?

**AI9**

**[IF NEEDED, SAY: "Even someone who does not live in this household."]**

IN OWN NAME .....	1	<b>[GO TO PN QA11_H21]</b>
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	<b>[GO TO PN QA11_H21]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H21]</b>

**POST-NOTE FOR QA11\_H19:**

**IF QA11\_H17 = 1 AND QA11\_H19 = 1, THEN SET AREMPOWN = 1 AND ARINSURE = 1 AND AREMPOTH = 0;  
IF QA11\_H17 = 1 AND QA11\_H19 = 2, -7, OR -8, THEN SET AREMPOTH = 1 AND ARINSURE = 1;  
IF QA11\_H18 = 1 AND QA11\_H19 = 1, THEN SET ARDIROWN = 1 AND ARINSURE = 1;  
IF QA11\_H18 = 1 AND QA11\_H19 = 2, -7, OR -8, THEN SET ARDIROTH = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H20:**

**IF QA11\_A16 = 1 (MARRIED) OR [QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] OR QA11\_G13 = 1 (LIVING WITH PARENTS) OR AAGE < 26, THEN CONTINUE WITH QA11\_H20;  
ELSE GO TO PROGRAMMING NOTE QA11\_H21;  
IF QA11\_A16 = 1, THEN DISPLAY "spouse's name";  
IF QA11\_A16 ≠ 1 AND (QA11\_D16 = 1 OR QA11\_D17 = 1), THEN DISPLAY "partner's name";  
IF QA11\_G13 = 1 OR AAGE < 26, THEN DISPLAY "parent's name";**

**QA11\_H20** Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?

**AI9A**

IN SPOUSE'S/PARTNER'S NAME .....	1
IN PARENT'S NAME .....	2
IN SOMEONE ELSE'S NAME .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE FOR QA11\_H20:**

**IF QA11\_H17 = 1 AND QA11\_H20 = 1, THEN SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;  
IF QA11\_H17 = 1 AND QA11\_H20 = 2, THEN SET AREMPAR =1 AND AREMPOTH = 0;  
IF QA11\_H18 = 1 AND QA11\_H20 = 1, THEN SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP=1;  
IF QA11\_H18 = 1 AND QA11\_H20 = 2, THEN SET ARDIRPAR = 1 AND ARDIROTH = 0**

**PROGRAMMING NOTE QA11\_H21:**  
**IF QA11\_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA11\_H18 = 1 (PURCHASED OWN COVERAGE),**  
**THEN CONTINUE WITH QA11\_H21;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H24**

**QA11\_H21** Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

**AH57**

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while a health plan pays for your main health care coverage."**

**"A deductible is the amount you pay for medical care before your health plan starts paying."**

**"Premium is the monthly charge for the cost of your health insurance plan."]**

YES .....	1	
NO .....	2	[GO TO PN QA11_H23]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_H22** Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

**AH58**

YES .....	1	
NO .....	2	[GO TO PN QA11_H24]
REFUSED .....	-7	[GO TO PN QA11_H24]
DON'T KNOW .....	-8	[GO TO PN QA11_H24]

**PROGRAMMING NOTE QA11\_H23:**

**IF QA11\_H21 = 2, THEN DISPLAY “Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization”;**  
**ELSE DISPLAY “Who is that”**

**QA11\_H23** {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?

**AH56**

**[IF NEEDED, SAY: “Who besides yourself pays any portion of the cost for that plan, such as your employer, a union, or professional organization?”]**

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

CURRENT EMPLOYER .....	1
FORMER EMPLOYER .....	2
UNION.....	3
SPOUSE'S/PARTNER'S CURRENT EMPLOYER...	4
SPOUSE'S/PARTNER'S FORMER EMPLOYER....	5
PROFESSIONAL/FRATERNAL ORGANIZATION...	6
MEDICAID/MEDI-CAL ASSISTANCE .....	7
HEALTHY FAMILIES .....	8
MEDICARE .....	9
HEALTHY KIDS .....	10
OTHER.....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_H23:**

**IF QA11\_H23 = 1, 2, OR 3, THEN SET AREMPOWN = 1;**  
**IF QA11\_H23 = 4 OR 5, THEN SET AREMPSP = 1;**  
**IF QA11\_H23 = 6, THEN SET AROTHER = 1;**  
**IF QA11\_H23 = 10, THEN SET ARHKID = 1;**  
**IF QA11\_H23 = 9, THEN SET ARMCARE = 1 AND ARDIRECT = 0;**  
**IF QA11\_H23 = 7, THEN SET ARMCAL = 1 AND ARDIRECT = 0;**  
**IF QA11\_H23 = 8, THEN SET ARHFAM = 1 AND ARDIRECT = 0;**  
**IF QA11\_H23 = 91, THEN SET AROTHER = 1**

**PROGRAMMING NOTE QA11\_H24:**

**IF [QA11\_G26 = 1 OR 2 (R WORKED LAST WEEK) OR QA11\_G28 = 1 (R USUALLY WORKS)] AND QA11\_G30 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOWN ≠ 1 (NO EMPLOYER-BASED COVERAGE), THEN CONTINUE WITH QA11\_H24;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H28**

**QA11\_H24** Does your employer offer health insurance to any of its employees?

**AI13**

YES .....	1	
NO.....	2	<b>[GO TO PN QA11_H28]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_H28]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H28]</b>

**QA11\_H25** Are you eligible to be in this plan?

**AI14**

YES .....	1	
NO .....	2	[GO TO QA11_H27]
REFUSED .....	-7	[GO TO PN QA11_H28]
DON'T KNOW .....	-8	

**QA11\_H26** What is the one main reason why you aren't in this plan?

**AI15**

COVERED BY ANOTHER PLAN .....	1	[GO TO PN QA11_H28]
TOO EXPENSIVE .....	2	[GO TO PN QA11_H28]
DIDN'T LIKE PLAN OFFERED .....	3	[GO TO PN QA11_H28]
DON'T NEED OR BELIEVE IN HEALTH INSURANCE .....	4	[GO TO PN QA11_H28]
OTHER (SPECIFY: _____) . 91		[GO TO PN QA11_H28]
REFUSED .....	-7	[GO TO PN QA11_H28]
DON'T KNOW .....	-8	[GO TO PN QA11_H28]

**QA11\_H27** What is the one main reason why you are not eligible for this plan?

**AI15A**

HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED ..	1
CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN .....	2
DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR .....	3
OTHER (SPECIFY: _____) . 91	
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H28:**  
**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, OR PRIVATE PLAN), THEN CONTINUE WITH QA11\_H28;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_H29**

**QA11\_H28** Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?

**AI16**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_H28:**  
**IF QA11\_H28 = 1, THEN SET ARMILIT = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H29:**

**IF ARINSURE  $\neq$  1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) AND AAGE = 18, THEN CONTINUE WITH QA11\_H29 AND DISPLAY "Healthy Kids";**

**ELSE GO TO PROGRAMMING NOTE QA11\_H30**

**QA11\_H29** Are you covered by the Healthy Kids program?

**AH70**

**[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_H29:**

**IF QA11\_H29 = 1, THEN SET ARHKID = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H30:**

**IF ARINSURE  $\neq$  1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, OR HEALTHY KIDS), THEN CONTINUE WITH QA11\_H30;**

**ELSE GO TO PROGRAMMING NOTE QA11\_H32**

**QA11\_H30** Are you covered by some other government health program, such as AIM, "Mister MIP," the Family PACT program, PCIP, or something else?

**AI17**

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers; Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and PCIP is the pre-existing condition insurance plan."]**

YES .....1  
 NO .....2 [GO TO PN QA11\_H32]  
 REFUSED ..... -7 [GO TO PN QA11\_H32]  
 DON'T KNOW ..... -8 [GO TO PN QA11\_H32]

**POST-NOTE QA11\_H30:**

**IF QA11\_H30 = 1, THEN SET AROTHGOV = 1 AND ARINSURE = 1**

**QA11\_H31** **ASK IF NECESSARY:** "What is the name of this program?"

**AI17A**

AIM .....1  
 MRMIP ("Mister Mip") .....2  
 FAMILY PACT .....3  
 PCIP .....4  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_H32:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, HEALTHY KIDS, AND OTHER GOVERNMENT PLAN), THEN CONTINUE WITH QA11\_H32;**

**ELSE GO TO PROGRAMMING NOTE QA11\_H36**

**QA11\_H32** Do you have any health insurance coverage through a plan that I missed?

**AI18**

YES .....	1	
NO .....	2	[GO TO PN QA11_H36]
REFUSED .....	-7	[GO TO PN QA11_H36]
DON'T KNOW .....	-8	[GO TO PN QA11_H36]

**QA11\_H33** What type of health insurance do you have?

**AI19**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]**

THROUGH CURRENT OR FORMER  
EMPLOYER/UNION .....1  
THROUGH SCHOOL, PROFESSIONAL  
ASSOCIATION, TRADE GROUP,  
OR OTHER ORGANIZATION.....2  
PURCHASED DIRECTLY FROM HEALTH PLAN  
(BY R OR ANYONE ELSE) .....3  
MEDICARE .....4  
MEDI-CAL .....5  
HEALTHY FAMILIES .....6  
CHAMPUS/CHAMP-VA, TRICARE, VA  
OR SOME OTHER MILITARY HEALTH CARE .....7  
INDIAN HEALTH SERVICE, TRIBAL HEALTH  
PROGRAM OR URBAN INDIAN CLINIC .....8  
HEALTHY KIDS .....9  
OTHER GOVERNMENT HEALTH PLAN ..... 91  
OTHER NON-GOVERNMENT HEALTH PLAN..... 92  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QA11\_H33:**

IF QA11\_H33 = 1, THEN SET AREMPOTH = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 2, THEN SET AREMPOTH = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 3, THEN SET ARDIRECT = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 4, THEN SET ARM CARE = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 5, THEN SET ARM CAL = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 6, THEN SET ARHFAM = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 7, THEN SET ARMILIT = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 8, THEN SET ARIHS = 1;  
IF QA11\_H33 = 9, THEN SET ARHKID = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 91, THEN SET AROTHGOV = 1 AND ARINSURE = 1;  
IF QA11\_H33 = 92, -7, OR -8, THEN SET AROTHER = 1 AND ARINSURE = 1

**PROGRAMMING NOTE QA11\_H34:**

**IF QA11\_H33 = 1, 2, OR 3, THEN CONTINUE WITH QA11\_H34;  
ELSE GO TO PROGRAMMING NOTE QA11\_H36**

**QA11\_H34** Was this plan obtained in your own name or in the name of someone else?

**AH59**

**[PROBE: "Even someone who does not live in this household?"]**

IN OWN NAME .....	1	<b>[GO TO PN QA11_H36]</b>
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	<b>[GO TO PN QA11_H36]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H36]</b>

**POST-NOTE QA11\_H34:**

**IF (QA11\_H33 = 1 OR 2) AND QA11\_H34 = 1, THEN SET AREMPOWN = 1 AND AREMPOTH = 0 AND ARINSURE = 1;  
IF QA11\_H33 = 3 AND QA11\_H34 = 1, THEN SET ARDIROWN = 1 AND ARDIROTH = 0 AND ARINSURE = 1;  
IF (QA11\_H33 = 1 OR 2) AND (QA11\_H34 = 2, -7, OR -8), THEN SET AREMPOTH = 1 AND AREMPOWN = 0 AND ARINSURE = 1;  
IF QA11\_H33 = 3 AND (QA11\_H34 = 2, -7, OR -8), THEN SET ARDIROTH = 1 AND ARDIROWN = 0 AND ARINSURE = 1**

**PROGRAMMING NOTE QA11\_H35:**

**IF QA11\_A16 = 1 (MARRIED) OR [QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] OR QA11\_G13 = 1 (LIVING WITH PARENTS) OR AAGE < 26, THEN CONTINUE WITH QA11\_H35;  
ELSE GO TO PROGRAMMING NOTE QA11\_H36;  
IF QA11\_A16 = 1 THEN DISPLAY "spouse's name";  
IF QA11\_A16 ≠ 1 AND QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY "partner's name";  
IF QA11\_G13 = 1 OR AAGE < 26, THEN DISPLAY "parent's name";**

**QA11\_H35** Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?

**AH60**

IN SPOUSE'S/PARTNER'S NAME .....	1
IN PARENT'S NAME .....	2
IN SOMEONE ELSE'S NAME .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_H35:**

**IF QA11\_H35 = 1, SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;  
IF QA11\_H35 = 2, SET AREMPPAR = 1 AND AREMPOTH = 0**

**PROGRAMMING NOTE QA11\_H36:**

IF ARIHS ≠ 1 AND QA11\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), THEN CONTINUE WITH QA11\_H36;  
ELSE GO TO PROGRAMMING NOTE QA11\_H37\_INTRO

**QA11\_H36** Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?

**AI20**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**POST-NOTE QA11\_H36:**

IF QA11\_H36 = 1, THEN SET ARIHS = 1

**PROGRAMMING NOTE QA11\_H37\_INTRO:**

IF [QA11\_A16 = 1 (MARRIED) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN HH), THEN CONTINUE WITH QA11\_H37\_INTRO;  
IF QA11\_A16 = 1, THEN DISPLAY “spouse”;  
ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY “partner”;  
ELSE GO TO PROGRAMMING NOTE QA11\_H57

**QA11\_H37\_INTRO** These next questions are about the type of health insurance your {spouse/partner} may have.

**AI37intro**

**PROGRAMMING NOTE QA11\_H37:**

IF SPOUSE 65 OR OLDER AND ARMCARE ≠ 1, THEN CONTINUE WITH QA11\_H37 WITHOUT DISPLAY;  
ELSE IF SPOUSE 65 OR OLDER AND ARMCARE = 1, THEN CONTINUE WITH QA11\_H37 AND DISPLAY “You said that you are covered by Medicare.” AND “also”;  
ELSE GO TO PROGRAMMING NOTE QA11\_H40

**QA11\_H37** {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?

**AI37**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**POST-NOTE QA11\_H37:**

IF QA11\_H37 = 1, THEN SET SPM CARE = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11\_H38:**

IF QA11\_H37 = 1 AND ARMHMO ≠ 1, THEN CONTINUE WITH QA11\_H38 WITHOUT DISPLAY;  
 ELSE IF QA11\_H37 = 1 AND ARMHMO = 1, THEN CONTINUE WITH QA11\_H38 AND DISPLAY “You said that your Medicare coverage is provided through an HMO.” AND “also”;  
 IF QA11\_A16 = 1 (MARRIED) THEN DISPLAY “spouse’s”;  
 ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner’s”;  
 ELSE GO TO PROGRAMMING NOTE QA11\_H39

**QA11\_H38** {You said that your Medicare coverage is provided through an HMO.} Is your {spouse’s/partner’s} Medicare {also} provided through an HMO?

**AH61**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H38:**

IF QA11\_H38 = 1, THEN SET SPMHMO = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11\_H39:**

IF SPHMO = 1, THEN GO TO PROGRAMMING NOTE QA11\_H40;  
 ELSE IF QA11\_H37 = 1 AND ARSUPP ≠ 1, THEN CONTINUE WITH QA11\_H39 WITHOUT DISPLAY;  
 ELSE IF QA11\_H37 = 1 AND ARSUPP = 1, THEN CONTINUE WITH QA11\_H39 AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”;  
 IF QA11\_A16 = 1 (MARRIED), THEN DISPLAY “spouse”;  
 ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner”;  
 ELSE GO TO PROGRAMMING NOTE QA11\_H40

**QA11\_H39** {You said that you have a Medicare Supplement plan.} Does your {spouse/partner} {also} have a Medicare supplemental policy?

**AI37A**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H39:**

IF QA11\_H39 = 1, THEN SET SPSUPP = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11\_H40:****IF ARMCAL = 1, THEN CONTINUE WITH QA11\_H40 WITHOUT DISPLAY;****IF ARMCARE = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA11\_H41****QA11\_H40** You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) {also} covered by Medi-Cal?**AI38**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H40:****IF QA11\_H40 = 1, THEN SET SPMCAL = 1 AND SPINSURE = 1****PROGRAMMING NOTE QA11\_H41:****IF ARHFAM = 1 AND SPOUSE/PARTNER AGE ≤ 18, THEN CONTINUE WITH QA11\_H41;****IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA11\_H42****QA11\_H41** You said you {also} have Healthy Families. Is (SPOUSE/PARTNER) {also} covered by Healthy Families?**AI39**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H41:****IF QA11\_H41 = 1, THEN SET SPHFAM = 1 AND SPINSURE = 1****PROGRAMMING NOTE QA11\_H42:****IF AREMPOWN = 1, THEN CONTINUE WITH QA11\_H42;****IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA11\_H43****QA11\_H42** You said you have insurance from your current or former employer or union. Is (SPOUSE/PARTNER) {also} covered by the insurance from your employer?**AI40**

YES .....1 **[GO TO PN QA11\_H44]**  
 NO .....2  
 OTHER .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H42:****IF QA11\_H42 = 1, THEN SET SPEMPSP = 1 AND SPINSURE = 1 AND ARSAMESP=1;**

**PROGRAMMING NOTE QA11\_H43:**

IF [QA11\_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED)] OR QA11\_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), THEN CONTINUE WITH QA11\_H43;

IF AREMPSP = 1 AND QA11\_A16 = 1, THEN DISPLAY "You said you have insurance from your spouse's employer or union.";

ELSE IF AREMPSP = 1 AND QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY "You said you have insurance from your partner's employer or union.";

IF SPINSURE = 1, THEN DISPLAY "also";

ELSE GO TO PROGRAMMING NOTE QA11\_H44

**QA11\_H43** {You said you have insurance from your spouse's employer or union./You said you have insurance from your partner's employer or union.} Does (SPOUSE/PARTNER) {also} have coverage through {his/her} own employer?

**AI40A**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H43:**

IF QA11\_H43 = 1, THEN SET SPEMPOWN = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11\_H44:**

IF ARDIRECT = 1, THEN CONTINUE WITH QA11\_H44;

IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, THEN DISPLAY "also";

ELSE GO TO PROGRAMMING NOTE QA11\_H45

**QA11\_H44** You said you {also} have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) also covered by this plan?

**AI41**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H44:**

IF QA11\_H44 = 1, THEN SET SPDIRECT = 1 AND SPINSURE = 1 AND ARSAMESP=1;

**PROGRAMMING NOTE QA11\_H45:**

IF ARMILIT = 1, THEN CONTINUE WITH QA11\_H45;

IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, THEN DISPLAY "also";

ELSE GO TO PROGRAMMING NOTE QA11\_H46

**QA11\_H45** You said you {also} have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Is (SPOUSE/PARTNER) also covered by this plan?

**AI42**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H45:**

IF QA11\_H45 = 1, THEN SET SPMLIT = 1 AND SPINSURE = 1 AND ARSAMESP=1;

**PROGRAMMING NOTE QA11\_H46:**

**IF AROTHGOV = 1, THEN CONTINUE WITH QA11\_H46;**

**IF QA11\_H31 = 1, THEN DISPLAY "AIM";**

**IF QA11\_H31 = 2, THEN DISPLAY "MRMIP";**

**IF QA11\_H31 = 3, THEN DISPLAY "Family PACT";**

**IF QA11\_H31 = 4, THEN DISPLAY "PCIP";**

**IF QA11\_H31 = 91, THEN DISPLAY "some government health plan";**

**IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, THEN DISPLAY "also";**

**ELSE GO TO PROGRAMMING NOTE QA11\_H47**

**QA11\_H46** You said you {also} have health insurance through {AIM/MRMIP/Family PACT/PCIP/some government health plan}. Is (SPOUSE/PARTNER) also covered by this plan?

**AI42A**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_H46:**

**IF QA11\_H46 = 1, THEN SET SPOTHGOV = 1 AND SPINSURE = 1**

**PROGRAMMING NOTE QA11\_H47:**

**IF SPINSURE ≠ 1, THEN DISPLAY "any";**

**ELSE DISPLAY "through any other source"**

**QA11\_H47** Does (SPOUSE/PARTNER) have {any} health insurance coverage {through any other source}?

**AI46**

YES .....1  
 NO .....2 [GO TO PN QA11\_H49]  
 REFUSED .....-7 [GO TO QA11\_H53]  
 DON'T KNOW .....-8 [GO TO QA11\_H53]



**QA11\_H48** What type of health insurance does {he/she} have?

**AI47**

**[CODE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[IF NEEDED, SAY: "Such as from a current or former employer, or that they purchased directly from a health plan."]**

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]**

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION .....	2
PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL .....	5
HEALTHY FAMILIES .....	6
CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC .....	8
HEALTHY KIDS .....	9
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_H48:**

IF QA11\_H48 = 1, THEN SET SPEMPOTH = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 2, THEN SET SPOTHER = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 3, THEN SET SPDIRECT = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 4, THEN SET SPMPCARE = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 5, THEN SET SPMCAL = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 6, THEN SET SPHFAM = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 7, THEN SET SPMILIT = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 8, THEN SET SPIHS = 1;  
 IF QA11\_H48 = 9, THEN SET SPKID = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 91, THEN SET SPOTHGOV = 1 AND SPINSURE = 1;  
 IF QA11\_H48 = 92, -7, OR -8, THEN SET SPOTHER = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11\_H49:****IF SPINSURE ≠ 1, THEN CONTINUE WITH QA11\_H49;****ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN GO TO PROGRAMMING NOTE QA11\_H51;****ELSE GO TO PROGRAMMING NOTE QA11\_H53****QA11\_H49** You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?**AI48**

YES .....	1	<b>[GO TO PN QA11_H53]</b>
NO .....	2	
REFUSED .....	-7	<b>[GO TO PN QA11_H53]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H53]</b>

**QA11\_H50** What type of health insurance does {he/she} have?

**AI49**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]**

EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION.....	2
PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL.....	5
HEALTHY FAMILIES.....	6
CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC .....	8
HEALTHY KIDS.....	9
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN .....	92
REFUSED.....	-7
DON'T KNOW.....	-8

**POST-NOTE QA11\_H50:**

IF QA11\_H50 = 1, THEN SET SPEMPOTH = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 2, THEN SET SPOTHER = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 3, THEN SET SPDIRECT = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 4, THEN SET SPMPCARE = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 5, THEN SET SPMCAL = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 6, THEN SET SPHFAM = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 7, THEN SET SPMILIT = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 8, THEN SET SPIHS = 1;  
 IF QA11\_H50 = 9, THEN SET SPKID = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 91, THEN SET SPOTHGOV = 1 AND SPINSURE = 1;  
 IF QA11\_H50 = 92, -7, OR -8, THEN SET SPOTHER = 1 AND SPINSURE = 1;

**PROGRAMMING NOTE QA11\_H51:**

IF (QA11\_H48 = 1, 2, OR 3) OR (QA11\_H50 = 1, 2, OR 3), THEN CONTINUE WITH QA11\_H51;  
 IF QA11\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";  
 ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY "partner's";  
 ELSE GO TO PROGRAMMING NOTE QA11\_H53

**QA11\_H51** Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?

**AH62**

[IF NEEDED, SAY: "Even someone who does not live in this household."]

IN SPOUSE'S/PARTNER'S NAME .....	1	[GO TO PN QA11_H53]
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	[GO TO PN QA11_H53]
DON'T KNOW .....	-8	[GO TO PN QA11_H53]

**POST-NOTE QA11\_H51:**

IF QA11\_H51 = 1 (SPOUSE'S/PARTNER'S NAME), THEN SET SPEMPOWN = 1 AND SPEMPOTH = 0;

**QA11\_H52** Is the plan in your name, parent's name, or someone else's name?

**AH63**

IN ADULT RESPONDENT'S NAME .....	1
IN ADULT RESPONDENT'S PARENT'S NAME .....	2
IN SOMEONE ELSE'S NAME .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_H52:**

IF QA11\_H52 = 1, THEN SET SPEMPAR = 1 AND SPEMPOTH = 0 AND ARSAMESP=1;  
 IF QA11\_H52 = 2, THEN SET SPARPAR = 1 AND SPEMPOTH = 0

**PROGRAMMING NOTE QA11\_H53:**

IF SPEMPOWN = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), THEN GO TO QA11\_H57;  
 ELSE IF [QA11\_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA11\_G32 = 1 (USUALLY WORKS)]  
 AND QA11\_G33 ≠ 3 (SPOUSE/PARTNER NOT SELF EMPLOYED), THEN CONTINUE WITH QA11\_H53;  
 IF QA11\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";  
 ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY "partner's"  
 ELSE GO TO PROGRAMMING NOTE QA11\_H57

**QA11\_H53** Does your {spouse's/partner's} employer offer health insurance to any of its employees?

**AI43**

YES .....	1	
NO .....	2	[GO TO PN QA11_H57]
REFUSED .....	-7	[GO TO PN QA11_H57]
DON'T KNOW .....	-8	[GO TO PN QA11_H57]

**QA11\_H54** Is {he/she} eligible to be in this plan?

**AI44**

YES .....	1	
NO .....	2	[GO TO QA11_H56]
REFUSED .....	-7	[GO TO PN QA11_H57]
DON'T KNOW .....	-8	[GO TO PN QA11_H57]

**QA11\_H55** What is the ONE main reason why {he/she} isn't in this plan?

**AI45**

COVERED BY ANOTHER PLAN .....	1	[GO TO PN QA11_H57]
TOO EXPENSIVE .....	2	[GO TO PN QA11_H57]
DOESN'T LIKE PLAN OFFERED .....	3	[GO TO PN QA11_H57]
DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE .....	4	[GO TO PN QA11_H57]
OTHER (SPECIFY: _____) .....	91	[GO TO PN QA11_H57]
REFUSED .....	-7	[GO TO PN QA11_H57]
DON'T KNOW .....	-8	[GO TO PN QA11_H57]

**QA11\_H56** What is the one main reason why {he/she} is not eligible for this plan?

**AI45A**

HASN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED .....	1
CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN .....	2
DOESN'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR .....	3
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H57:**  
**IF ARMHMO = 1 (R HAS MEDICARE HMO), THEN GO TO QA11\_H59;**  
**ELSE IF ARHFAM = 1 OR ARHKID = 1, THEN GO TO QA11\_H58;**  
**ELSE IF ARINSURE = 1 (R HAS ANY COVERAGE), THEN CONTINUE WITH QA11\_H57;**  
**IF QA11\_A16 = 1 (MARRIED) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN**  
**DISPLAY “Next, I have some questions about your own main health plan.”**  
**IF ARMCAL = 1, THEN DISPLAY “Medi-Cal”;**  
**ELSE GO TO QA11\_H72**

**QA11\_H57** {Next, I have some questions about your own main health plan.}

Is your {Medi-Cal} health plan an HMO?

**A122C**

**[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, you must use the doctors and hospitals belonging to its network. If you go outside the network, generally it will not be paid for unless it’s an emergency.”]**

**[IF R SAYS “POS” OR “POINT OF SERVICE,” CODE AS “YES.” IF R SAYS “PPO,” CODE AS “NO.”]**

**[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H58:**

**IF (ARMCAL = 1 AND QA11\_H56 = 1) OR (AROTHGOV = 1 AND QA11\_H31 = 1), THEN LIST HMO MEDICAL BY COUNTY;**

**ELSE IF (ARHFAM = 1 OR ARHKIDS = 1) AND QA11\_H57 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;**

**ELSE IF QA11\_H57 = 1 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA11\_H31 = 2)], THEN LIST HMO COMMERCIAL BY COUNTY;**

**ELSE IF QA11\_H57 = 2 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA11\_H31 = 2)], THEN LIST NON-HMO BY COUNTY**

**QA11\_H58**      What is the name of your main health plan?

**AI22A**

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

AARP MEDICARE COMPLETE .....	1
AETNA .....	2
AETNA MEDICARE (SELECT/PREMIER) .....	3
ALAMEDA ALLIANCE FOR HEALTH .....	4
ALLIANCE COMPLETE CARE .....	5
ANTHEM BLUE CROSS/BLUE CROSS .....	6
ARCADIAN COMMUNITY CARE .....	7
BLUE CROSS SENIOR SECURE .....	8
BLUE SHIELD 65 PLUS .....	9
BLUE SHIELD OF CALIFORNIA .....	10
CAL OPTIMA .....	11
CARE 1 <sup>ST</sup> HEALTH PLAN .....	12
CARE ADVANTAGE .....	13
CARE MORE .....	14
CEN CAL HEALTH.....	15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .....	16
CENTRAL HEALTH PLAN OF CALIFORNIA .....	17
CHINESE COMMUNITY HEALTH PLAN.....	18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM .....	19
CIGNA.....	20
CITIZENS CHOICE HEALTHPLAN .....	21
COMMUNICARE ADVANTAGE .....	22
COMMUNITY HEALTH GROUP .....	23
COMMUNITY HEALTH PLAN.....	24
CONTRA COSTA HEALTH PLAN .....	25
DEPARTMENT OF HEALTH SERVICES .....	26
EASY CHOICE HEALTH PLAN .....	27
GEM CARE .....	28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN .....	29
GREAT-WEST .....	30
HEALTH NET .....	31
HEALTH PLAN OF SAN JOAQUIN.....	32
HEALTH PLAN OF SAN MATEO.....	33
HUMANA GOLD PLUS .....	34
IEHP (INLAND EMPIRE HEALTH PLAN) .....	35
IEHP MEDICARE DUAL CHOICE.....	36
INTER VALLEY HEALTH PLAN .....	37
KAISER.....	38
KERN COUNTY HEALTH PLAN.....	39
L.A. CARE HEALTH PLAN .....	40
MD CARE.....	41

MOLINA HEALTH PLAN .....	42
MOLINA MEDICARE OPTIONS .....	43
ON LOK.....	44
ON LOK SENIOR HEALTH SERVICES.....	45
ONE CARE .....	46
PACIFICARE.....	47
PARTNERSHIP HEALTH PLAN OF CALIFORNIA .....	48
SALUD CON HEALTH NET .....	49
SAN FRANCISCO HEALTH PLAN .....	50
SANTA CLARA FAMILY HEALTH PLAN .....	51
SCAN HEALTH PLAN.....	52
SECURE HORIZONS .....	53
SENIOR ADVANTAGE .....	54
SENIORITY PLUS.....	55
SERVICE TO SENIORS .....	56
SHARP HEALTH PLAN .....	57
TOTAL FIT .....	58
VALLEY HEALTH PLAN .....	59
VENTURA COUNTY HEALTH CARE PLAN.....	60
WESTERN HEALTH ADVANTAGE .....	61
WESTERN HEALTH ADVANTAGE CARE+ .....	62
CHAMPUS/CHAMP-VA .....	63
TRICARE/TRICARE FOR LIFE/TRICARE PRIME .....	64
VA HEALTH CARE SERVICES .....	65
MEDI-CAL .....	66
MEDICARE .....	67
MEDICARE ADVANTAGE .....	68
OTHER.....	91
OTHER (SPECIFY:.....) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST NOTE QA11\_H58:**

**IF QA11\_H58 = 62, 63, OR 64 THEN SET ARMILIT=1**

**PROGRAMMING NOTE QA11\_H59:**

**IF ARMHMO = 1 (R HAS MEDI-CARE HMO) AND [QA11\_A16 = 1 (MARRIED) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX PARTNER)], THEN DISPLAY “Next, I have some questions about your own main health plan.”**

**QA11\_H59** {Next, I have some questions about your own main health plan.} Are you covered for your prescription drugs? That is, does some plan pay any part of the cost?

**AI25**

YES .....	1
NO.....	2
REFUSED .....	-7
DON'T KNOW .....	-8



**PROGRAMMING NOTE QA11\_H60:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1, THEN  
CONTINUE WITH QA11\_H60;  
ELSE GO TO QA11\_H65**

**QA11\_H60** Does your health plan have a deductible that is more than \$1,000?

**AH71**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to  
pay for your medical care."]**

YES .....	1	
NO .....	2	<b>[GO TO QA11_H62]</b>
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	<b>[GO TO QA11_H62]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA11\_H61:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH  
QA11\_H61;  
ELSE GO TO QA11\_H62**

**QA11\_H61** Does your health plan have a deductible that is more than \$2,000?

**AH96**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to  
pay for your medical care."]**

YES .....	1	<b>[GO TO PN QA11_H63]</b>
NO .....	2	
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_H62** Does your health plan have a deductible for all covered persons that is more than \$2,000?

**AH72**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to  
pay for your medical care."]**

YES .....	1	
NO .....	2	<b>[GO TO PN QA11_H64]</b>
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	<b>[GO TO PN QA11_H64]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA11\_H63:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA11\_H63;  
ELSE GO TO PROGRAMMING NOTE QA11\_H64**

**QA11\_H63** Does your health plan have a deductible for all covered persons that is more than \$4,000?

**AH97**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1  
NO .....2  
YES, ONLY WHEN I GO OUT OF NETWORK .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_H64:**

**IF (QA11\_H60 = 1 OR 3) OR (QA11\_H61 = 1 OR 3) OR (QA11\_H62 = 1 OR 3), THEN CONTINUE WITH QA11\_H64;  
ELSE GO TO QA11\_H65**

**QA11\_H64** Do you have a special account or fund you can use to pay for medical expenses?

**AH73**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include- Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts."]**

YES .....1  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA11\_H65** Thinking about your current health insurance, did you have this same insurance for all 12 of the past 12 months?

**AI31**

YES .....1 **[GO TO PN QA11\_H78]**  
NO .....2  
REFUSED ..... -7 **[GO TO QA11\_H68]**  
DON'T KNOW ..... -8

**QA11\_H66** During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?

**AI32**

YES .....1  
NO .....2 **[GO TO QA11\_H69]**  
REFUSED ..... -7 **[GO TO QA11\_H68]**  
DON'T KNOW ..... -8 **[GO TO QA11\_H68]**

**QA11\_H67**

Was your other health insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, or some other plan?

<b>MODIFIED AI33</b>
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**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

MEDI-CAL .....	1
HEALTHY FAMILIES .....	2
THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	3
HEALTHY KIDS .....	4
PURCHASED DIRECTLY .....	5
OTHER HEALTH PLAN .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_H68**

During the past 12 months, was there any time when you had no health insurance at all?

<b>AI34</b>
-------------

YES .....	1	
NO .....	2	<b>[GO TO PN QA11_H78]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_H78]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H78]</b>

**QA11\_H69**

For how many months of the past 12 months did you have no health insurance at all?

<b>AI35</b>
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**[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]**

_____ NUMBER OF MONTHS	[HR: 0-11]	<b>[IF 0 GO TO PN QA11_H78]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_H78]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_H78]</b>

**QA11\_H70** What is the ONE MAIN reason why you did not have any health insurance during those months?

**AI36**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_H71** During the time that you were uninsured, did you try to find health insurance on your own?

**AH74**

YES .....1 [GO TO PN QA11\_H78]  
 NO .....2 [GO TO PN QA11\_H78]  
 REFUSED ..... -7 [GO TO PN QA11\_H78]  
 DON'T KNOW ..... -8 [GO TO PN QA11\_H78]

**QA11\_H72** What is the ONE MAIN reason why you do not have any health insurance?

**AI24**

**[IF R SAYS NO NEED, PROBE WHY]**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_H73** During the time that you have been uninsured, have you tried to find health insurance on your own?

**AH75**

YES .....1  
 NO .....2  
 DON'T KNOW .....-7  
 REFUSED .....-8

**QA11\_H74** Were you covered by health insurance at any time during the past 12 months?

**AI27**

YES .....1 **[GO TO QA11\_H76]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_H75** How long has it been since you last had health insurance?

**AI28**

MORE THAN 12 MONTHS AGO, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO PN QA11\_H78]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO PN QA11\_H78]**  
 NEVER HAD HEALTH INSURANCE .....3 **[GO TO PN QA11\_H78]**  
 REFUSED .....-7 **[GO TO PN QA11\_H78]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_H78]**

**QA11\_H76** For how many months out of the last 12 months did you have health insurance?

**AI29**

**[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

\_\_\_\_ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA11\_H78]**

REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_H77** During that time when you had health insurance, was your insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, a plan you purchased directly from an insurance company, or some other plan?

**AI30**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

MEDI-CAL .....1  
 HEALTHY FAMILIES .....2  
 THROUGH CURRENT OR FORMER  
 EMPLOYER OR UNION .....3  
 HEALTHY KIDS .....4  
 PURCHASED DIRECTLY .....5  
 OTHER HEALTH PLAN ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_H78:**

**IF ARINSURE  $\neq$  1 OR QA11\_H66 = 2 OR ARDIRECT = 1 OR QA11\_H77 = 5 OR QA11\_H67 = 5 THEN  
 CONTINUE WITH QA11\_H78;**

**ELSE GO TO PROGRAMMING NOTE QA11\_H83**

**QA11\_H78** In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO?

**AH103**

YES .....1  
 NO .....2 **[GO TO PN QA11\_H83]**  
 REFUSED ..... -7 **[GO TO PN QA11\_H83]**  
 DON'T KNOW ..... -8 **[GO TO PN QA11\_H83]**

**QA11\_H79** How difficult was it to find a plan with the coverage you needed? Was it...

**AH98**

Very difficult, .....1  
 Somewhat difficult, .....2  
 Not too difficult, or .....3  
 Not at all difficult? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_H80** How difficult was it to find a plan you could afford? Was it...

**AH99**

Very difficult, .....1  
 Somewhat difficult, .....2  
 Not too difficult, or .....3  
 Not at all difficult? .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_H81** Did anyone help you find a health plan?

**AH100**

YES .....	1	
NO .....	2	[GO TO PN QA11_H83]
REFUSED .....	-7	[GO TO PN QA11_H83]
DON'T KNOW .....	-8	[GO TO PN QA11_H83]

**QA11\_H82** Who helped you?

**AH101**

BROKER .....	1
FAMILY MEMBER/FRIEND .....	2
INTERNET .....	3
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H83:**

IF QA11\_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11\_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11\_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA11\_B41 = 1 (HOSPITALIZED FOR HEART DISEASE) THEN GO TO PROGRAMMING NOTE QA11\_H84;  
ELSE CONTINUE WITH QA11\_H83

**QA11\_H83** During the past 12 months, were you a patient in a hospital overnight or longer?

**AH14**

YES .....	1	
NO .....	2	[GO TO PN QA11_H86]
REFUSED .....	-7	[GO TO PN QA11_H86]
DON'T KNOW .....	-8	[GO TO PN QA11_H86]

**PROGRAMMING NOTE QA11\_H84:**

IF QA11\_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11\_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11\_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA11\_B41 = 1 (HOSPITALIZED FOR HEART DISEASE), THEN DISPLAY "During the past 12 months, when you were hospitalized for any reason,"

**QA11\_H84** {During the past 12 months, when you were hospitalized for any reason,} Altogether how many nights were you in the hospital?

**AH102**

\_\_\_\_\_ NUMBER OF NIGHTS (HR: 1-365)

REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_H85:**

**IF ARINSURE  $\neq$  1 OR QA11\_H69 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH QA11\_H85;  
ELSE GO TO PROGRAMMING NOTE QA11\_H86**

**QA11\_H85** Was any of that hospital care paid for by Medi-Cal?

**AH76**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_H86:**

**IF [ARINSURE  $\neq$  1 OR QA11\_H69 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND QA11\_A5 = 2 (FEMALE) AND [QA11\_E1 = 1 (PREGNANT) OR QA11\_G18 = 1 (R IS PARENT OR LEGAL GUARDIAN FOR ANY CHILD IN ROSTER UNDER 1 YEAR OLD)], THEN CONTINUE WITH QA11\_H86;  
ELSE GO TO PROGRAMMING NOTE QA11\_I1**

**QA11\_H86** During the last 12 months, did you get prenatal care that you didn't have to pay for?

**AH77**

YES .....1  
NO .....2 [GO TO PN QA11\_I1]  
REFUSED .....-7 [GO TO PN QA11\_I1]  
DON'T KNOW .....-8 [GO TO PN QA11\_I1]

**QA11\_H87** Was it paid for by Medi-Cal?

**AH78**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8



## Section I – Child and Adolescent Health Insurance

**PROGRAMMING NOTE QA11\_I1:**  
**IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QA11\_I37 TO ASK ABOUT SELECTED ADOLESCENT;**  
**IF ARINSURE ≠ 1, THEN GO TO PROGRAMMING NOTE QA11\_I2;**  
**ELSE CONTINUE WITH QA11\_I1**

**QA11\_I1**      These next questions are about health insurance (CHILD) may have.

Does (CHILD) have the same insurance as you?

**CF10A**

YES .....1      **[GO TO QA11\_I31]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I1:**  
**IF QA11\_I1 = 1 AND ARMCARE = 1, THEN SET CHMCARE = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARMCAL = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARHFAM = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARHKID = 1, THEN SET CHHKID = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AREMPOWN = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AREMPSP = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AREMPPAR = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AREMPOTH = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARDIRECT = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARMILIT = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AROTHGOV = 1, THEN SET CHOTHGOV = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND AROTHER = 1, THEN SET CHOTHER = 1 AND CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA11\_I1 = 1 AND ARIHS = 1, THEN SET CHIHS = 1**

**PROGRAMMING NOTE QA11\_I2:**

**IF SPINSURE ≠ 1, THEN GO TO QA11\_I3;  
 ELSE IF QA11\_I1 = 2 AND ARSAMESP = 1, THEN GO TO QA11\_I3;  
 ELSE CONTINUE WITH QA11\_I2**

**QA11\_I2** Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/  
 PARTNER NAME}?

**MA1**

YES .....1 **[GO TO QA11\_I18]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_I2:**

**IF QA11\_I2 = 1 AND SPMCARE = 1, THEN SET CHMCARE = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPMCAL = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPHFAM = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPHKID = 1, THEN SET CHHKID = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPEMPOWN = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPEMPSP = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPEMPPAR = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPEMPOTH = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPDIRECT = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPMILIT = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPOTHER = 1, THEN SET CHOTHER = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPOTHGOV = 1, THEN SET CHOTHGOV = 1 AND CHINSURE = 1 AND SPSAMECH=1;  
 IF QA11\_I2 = 1 AND SPIHS = 1, THEN SET CHIHS = 1**

**QA11\_I3** Is {he/she} currently covered by Medi-CAL?

**CF1**

**[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families,  
 pregnant women, and disabled or elderly people."]**

YES .....1 **[GO TO QA11\_I5]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_I3:**

**IF QA11\_I3 = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1**

**QA11\_I4** Is (CHILD) covered by the Healthy Families Program?

**CF2**

**[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I4:**  
**IF QA11\_I4 = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1**

**QA11\_I5** Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?

**CF3**

YES .....1 **[GO TO QA11\_I7]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I5:**  
**IF QA11\_I5 = 1, THEN SET CHEMP = 1 AND CHINSURE = 1**

**QA11\_I6** Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO? Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital.

**CF4**

YES .....1  
 NO .....2 **[GO TO PN QA11\_I10]**  
 REFUSED .....-7 **[GO TO PN QA11\_I10]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_I10]**

**POST-NOTE QA11\_I6:**  
**IF QA11\_I6 = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1**

QA11\_I7

Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

AI54

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."**

**"A deductible is the amount you pay for medical care before your health plan starts paying."**

**"Premium is the monthly charge for the cost of your health insurance plan."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

QA11\_I8

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?

AI50

YES .....1  
 NO .....2 [GO TO PN QA11\_I10]  
 REFUSED ..... -7 [GO TO PN QA11\_I10]  
 DON'T KNOW ..... -8 [GO TO PN QA11\_I10]

QA11\_I9

Who else pays all or some portion of the cost for (CHILD)'s health plan?

AI51

CURRENT EMPLOYER .....1  
 FORMER EMPLOYER .....2  
 UNION .....3  
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4  
 SPOUSE'S/PARTNER'S FORMER EMPLOYER....5  
 PROFESSIONAL/FRATERNAL ORGANIZATION...6  
 MEDICAID/MEDI-CAL ASSISTANCE .....7  
 HEALTHY FAMILIES .....8  
 HEALTHY KIDS .....9  
 OTHER..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_I9:**

**IF QA11\_I9 = 1 THRU 6, THEN SET CHEMP = 1 AND CHDIRECT = 0;**

**IF QA11\_I9 = 8, THEN SET CHHFAM = 1;**

**IF QA11\_I9 = 7, THEN SET CHMCAL = 1;**

**IF QA11\_I9 = 9, THEN SET CHHKID = 1**

**PROGRAMMING NOTE QA11\_I10:**  
**IF CHINSURE = 1, THEN GO TO PROGRAMMING NOTE QA11\_I18;**  
**ELSE CONTINUE WITH QA11\_I10**

**QA11\_I10** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

**CF6**

YES .....1 **[GO TO PN QA11\_I18]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I10:**  
**IF QA11\_I10 = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1**

**PROGRAMMING NOTE QA11\_I11:**  
**IF CHINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), THEN CONTINUE WITH QA11\_I11 AND DISPLAY "Healthy Kids";**

**QA11\_I11** Is {he/she} covered by the Healthy Kids program?

**AI70**

**[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]**

YES .....1 **[GO TO PN QA11\_I18]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I11:**  
**IF QA11\_I11 = 1, THEN SET CHHKID = 1 AND CHINSURE = 1**

**QA11\_I12** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", PCIP, or something else?

**CF7**

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; and PCIP is the pre-existing condition insurance plan."]**

AIM .....1 **[GO TO PN QA11\_I18]**  
 "MISTER MIP"/MRMIP .....2 **[GO TO PN QA11\_I18]**  
 PCIP .....3 **[GO TO PN QA11\_I18]**  
 NO OTHER PLAN .....4  
 SOMETHING ELSE (SPECIFY: \_\_\_\_\_) ..... 91 **[GO TO PN QA11\_I18]**  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I12:**  
**IF QA11\_I12 = 1, 2, 3, OR 91, THEN SET CHOTHGOV = 1 AND CHINSURE = 1**

**QA11\_I13** Does {he/she} have any health insurance coverage through a plan that I missed?

**CF8**

YES .....	1	
NO .....	2	[GO TO PN QA11_I18]
REFUSED .....	-7	[GO TO PN QA11_I18]
DON'T KNOW .....	-8	[GO TO PN QA11_I18]

**QA11\_I14** What type of health insurance does {he/she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?

**CF9**

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION .....	2
PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL .....	5
HEALTHY FAMILIES .....	6
CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC .....	8
HEALTHY KIDS .....	9
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QA11\_I14:**

IF QA11\_I14 = 1, THEN SET CHEMP = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 2, THEN SET CHEMP = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 3, THEN SET CHDIRECT = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 4, THEN SET CHMCARE = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 5, THEN SET CHMCAL = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 6, THEN SET CHHFAM = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 7, THEN SET CHMILIT = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 8, THEN SET CHIHS = 1  
 IF QA11\_I14 = 9, THEN SET CHHKID = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 91, THEN SET CHOTHGOV = 1 AND CHINSURE = 1  
 IF QA11\_I14 = 92, THEN SET CHOTHER = 1 AND CHINSURE = 1  
 IF QA11\_I14 = -7 OR -8, THEN SET CHINSURE = 1

**PROGRAMMING NOTE QA11\_I15:**  
**IF QA11\_I14 = 4 (CHILD HAS MEDICARE), THEN CONTINUE WITH QA11\_I15;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I16**

**QA11\_I15** Just to verify, you said that (CHILD) gets health insurance through Medicare?

**CF9VER**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I16:**  
**IF CHINSURE ≠ 1, THEN CONTINUE WITH QA11\_I16;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I18;**

**QA11\_I16** What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?

**CF1A**

PAPERWORK TOO DIFFICULT .....1  
 DIDN'T KNOW IF ELIGIBLE .....2  
 INCOME TOO HIGH, NOT ELIGIBLE .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 OTHER NOT ELIGIBLE .....5  
 DON'T BELIEVE IN HEALTH INSURANCE .....6  
 DON'T NEED IT BECAUSE HEALTHY .....7  
 ALREADY HAVE INSURANCE .....8  
 DIDN'T KNOW IT EXISTED.....9  
 DON'T LIKE / WANT WELFARE ..... 10  
 OTHER (SPECIFY: \_\_\_\_\_)..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I17** What is the ONE main reason why (CHILD) is not enrolled in the Healthy Families program?

**CF2A**

PAPERWORK TOO DIFFICULT .....1  
 DIDN'T KNOW IF ELIGIBLE .....2  
 INCOME TOO HIGH, NOT ELIGIBLE .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 OTHER NOT ELIGIBLE .....5  
 DON'T BELIEVE IN HEALTH INSURANCE .....6  
 DON'T NEED IT BECAUSE HEALTHY .....7  
 ALREADY HAVE INSURANCE .....8  
 DIDN'T KNOW IT EXISTED.....9  
 DON'T LIKE / WANT WELFARE ..... 10  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I18:**

IF QA11\_I1 = 1 AND ARM CARE = 1, THEN SET QA11\_I18 = QA11\_H8 AND QA11\_I19 = QA11\_H9 AND GO TO QA11\_I20;  
 ELSE IF QA11\_I1 = 1, THEN SET QA11\_I18 = QA11\_H57 AND QA11\_I19 = QA11\_H58 AND QA11\_I20 = QA11\_H59 AND GO TO PN QA11\_I21;  
 ELSE IF CHINSURE = 1, THEN CONTINUE WITH QA11\_I18;  
 ELSE GO TO PROGRAMMING NOTE QA11\_I21

**QA11\_I18** Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?

**MA3**

**[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid for unless it's an emergency."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I19:**

IF CHINSURE = 1 (CHILD HAS ANY COVERAGE), THEN CONTINUE WITH QA11\_I19;  
 IF CHMCARE = 1 AND QA11\_I18 = 1, THEN LIST HMO MEDICARE BY COUNTY;  
 ELSE IF [CHMCAL = 1 OR (CHOTHGOV = 1 AND QA11\_I12 = 1)] AND QA11\_I18 = 1, THEN LIST HMO MEDICAL BY COUNTY;  
 ELSE IF (CHHFAM = 1 OR CHHKIDS = 1) AND QA11\_I18 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;  
 ELSE IF [CHEMP = 1 OR CHDIRECT = 1 OR (CHOTHGOV = 1 AND QA11\_I12 = 2) OR CHOTHER = 1] AND QA11\_I18 = 1, THEN LIST HMO COMMERCIAL BY COUNTY;  
 ELSE IF (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1) AND QA11\_I18 = 2, THEN LIST NON-HMO BY COUNTY

**QA11\_I19** What is the name of (CHILD)'s main health plan?

**MA2**

**[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (CHILD) have an insurance card or something else with the plan name on it?"]**

AARP MEDICARE COMPLETE ..... 1  
 AETNA ..... 2  
 AETNA MEDICARE (SELECT/PREMIER) ..... 3  
 ALAMEDA ALLIANCE FOR HEALTH ..... 4  
 ALLIANCE COMPLETE CARE ..... 5  
 ANTHEM BLUE CROSS/BLUE CROSS ..... 6  
 ARCADIAN COMMUNITY CARE ..... 7  
 BLUE CROSS SENIOR SECURE ..... 8  
 BLUE SHIELD 65 PLUS ..... 9  
 BLUE SHIELD OF CALIFORNIA ..... 10  
 CAL OPTIMA ..... 11  
 CARE 1<sup>ST</sup> HEALTH PLAN ..... 12  
 CARE ADVANTAGE ..... 13  
 CARE MORE ..... 14  
 CEN CAL HEALTH..... 15  
 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH ..... 16  
 CENTRAL HEALTH PLAN OF CALIFORNIA ..... 17  
 CHINESE COMMUNITY HEALTH PLAN..... 18



CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM .....	19
CIGNA.....	20
CITIZENS CHOICE HEALTHPLAN .....	21
COMMUNICARE ADVANTAGE .....	22
COMMUNITY HEALTH GROUP .....	23
COMMUNITY HEALTH PLAN.....	24
CONTRA COSTA HEALTH PLAN .....	25
DEPARTMENT OF HEALTH SERVICES .....	26
EASY CHOICE HEALTH PLAN .....	27
GEM CARE .....	28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN .....	29
GREAT-WEST .....	30
HEALTH NET .....	31
HEALTH PLAN OF SAN JOAQUIN.....	32
HEALTH PLAN OF SAN MATEO.....	33
HUMANA GOLD PLUS .....	34
IEHP (INLAND EMPIRE HEALTH PLAN) .....	35
IEHP MEDICARE DUAL CHOICE.....	36
INTER VALLEY HEALTH PLAN .....	37
KAISER.....	38
KERN COUNTY HEALTH PLAN.....	39
L.A. CARE HEALTH PLAN .....	40
MD CARE.....	41
MOLINA HEALTH PLAN .....	42
MOLINA MEDICARE OPTIONS .....	43
ON LOK.....	44
ON LOK SENIOR HEALTH SERVICES.....	45
ONE CARE .....	46
PACIFICARE.....	47
PARTNERSHIP HEALTH PLAN OF CALIFORNIA .....	48
SALUD CON HEALTH NET .....	49
SAN FRANCISCO HEALTH PLAN .....	50
SANTA CLARA FAMILY HEALTH PLAN .....	51
SCAN HEALTH PLAN.....	52
SECURE HORIZONS .....	53
SENIOR ADVANTAGE .....	54
SENIORITY PLUS.....	55
SERVICE TO SENIORS .....	56
SHARP HEALTH PLAN .....	57
TOTAL FIT .....	58
VALLEY HEALTH PLAN .....	59
VENTURA COUNTY HEALTH CARE PLAN.....	60
WESTERN HEALTH ADVANTAGE .....	61
WESTERN HEALTH ADVANTAGE CARE+ .....	62
CHAMPUS/CHAMP-VA .....	63
TRICARE/TRICARE FOR LIFE/TRICARE PRIME .....	64
VA HEALTH CARE SERVICES .....	65
MEDI-CAL .....	66
MEDICARE .....	67
MEDICARE ADVANTAGE .....	68
OTHER.....	91
OTHER (SPECIFY: _____) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_I20** Is (CHILD) covered for prescription drugs?

**CF14**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I21:**

**IF (ARINSURE ≠ 1 OR QA11\_I1 ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN  
 CONTINUE WITH QA11\_I21;**

**ELSE GO TO PROGRAMMING NOTE QA11\_I26**

**QA11\_I21** Does (CHILD)'s health plan have a deductible that is more than \$1,000?

**AI79**

**[IF NEEDED, SAY "A deductible is the amount you have to pay before your plan begins to  
 pay for your medical care."]**

YES .....1  
 NO .....2 [GO TO QA11\_I23]  
 YES, ONLY WHEN GO OUT OF NETWORK .....3 [GO TO QA11\_I23]  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE FOR QA11\_I22:**

**IF CHEMP = 1, THEN CONTINUE WITH QA11\_I22;**

**ELSE GO TO QA11\_I23**

**QA11\_I22** Does (CHILD)'s health plan have a deductible that is more than \$2,000?

**AI85**

**[IF NEEDED, SAY "A deductible is the amount you have to pay before your plan begins to  
 pay for your medical care."]**

YES .....1 [GO TO PN QA11\_I24]  
 NO .....2  
 YES, ONLY WHEN GO OUT OF NETWORK .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_I23** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$2,000?

**AI80**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to  
 pay for your medical care."]**

YES .....1  
 NO .....2 [GO TO PN QA11\_I25]  
 YES, ONLY WHEN GO OUT OF NETWORK .....3 [GO TO PN QA11\_I25]  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE FOR QA11\_I24:**  
**IF CHEMP = 1, THEN CONTINUE WITH QA11\_I24;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I25**

**QA11\_I24** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$4,000?

**AI86**

**[IF NEEDED, SAY "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1  
 NO .....2  
 YES, ONLY WHEN GO OUT OF NETWORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I25:**  
**IF (QA11\_I21 = 1 OR 3) OR (QA11\_I22 = 1 OR 3) OR (QA11\_I23 = 1 OR 3), THEN CONTINUE WITH QA11\_I25;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I26**

**QA11\_I25** Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?

**AI81**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal Care Accounts, Personal Medical Funds, or Choice Funds, and are different from employer provided Flexible Spending Accounts."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I26:**  
**IF CHINSURE = 1, THEN GO TO QA11\_I31;**  
**ELSE CONTINUE WITH QA11\_I26**

**QA11\_I26** What is the one main reason (CHILD) does not have any health insurance?

**CF18**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I27** Was (CHILD) covered by health insurance at any time during the past 12 months?

**CF20**

YES .....1 **[GO TO QA11\_I29]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I28** How long has it been since (CHILD) last had health insurance?

**CF21**

MORE THAN 12 MONTHS, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO PN QA11\_I37]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO PN QA11\_I37]**  
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 **[GO TO PN QA11\_I37]**  
 REFUSED ..... -7 **[GO TO PN QA11\_I37]**  
 DON'T KNOW ..... -8 **[GO TO PN QA11\_I37]**

**QA11\_I29** For how many of the last 12 months did {he/she} have health insurance?

**CF22**

**[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

\_\_\_\_\_ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA11\_I37]**  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I30**

During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan?

**CF23****[CODE ALL THAT APPLY]****[PROBE: "Any others?"]**

MEDI-CAL .....	1	<b>[GO TO PN QA11_I37]</b>
HEALTHY FAMILIES .....	2	<b>[GO TO PN QA11_I37]</b>
THROUGH CURRENT OR FORMER EMPLOYER/ UNION.....	3	<b>[GO TO PN QA11_I37]</b>
HEALTHY KIDS .....	4	<b>[GO TO PN QA11_I37]</b>
OTHER HEALTH PLAN .....	91	<b>[GO TO PN QA11_I37]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_I37]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_I37]</b>

**QA11\_I31**

Thinking about {his/her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

**CF24**

YES .....	1	<b>[GO TO PN QA11_I37]</b>
NO.....	2	
HAD SAME INSURANCE SINCE BIRTH (FOR CHILDREN LESS THAN ONE YEAR OLD) ...	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_I32**

When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?

**CF25**

YES .....	1	
NO.....	2	<b>[GO TO QA11_I34]</b>
REFUSED .....	-7	<b>[GO TO QA11_I34]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_I34]</b>

**QA11\_I33**

Was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, or some other plan?

**CF26****[CODE ALL THAT APPLY]****[PROBE: "Any others?"]**

MEDI-CAL .....	1
HEALTHY FAMILIES .....	2
HEALTHY KIDS .....	3
THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	4
OTHER HEALTH PLAN .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_I34** During the past 12 months, was there any time when {he/she} had no health insurance at all?

**CF27**

YES .....1  
 NO .....2 **[GO TO PN QA11\_I37]**  
 REFUSED .....-7 **[GO TO PN QA11\_I37]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_I37]**

**QA11\_I35** For how many of the past 12 months did {he/she} have no health insurance?

**CF28**

**[IF < 1 MONTH, ENTER "1"]**

\_\_\_\_\_ MONTHS [RANGE: 1-12]

REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_I36** What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?

**CF29**

**[IF R SAYS, "No need," PROBE WHY]**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY \_\_\_\_\_) ..... 91  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I37:****IF NO TEEN SELECTED, THEN GO TO PROGRAMMING NOTE QA11\_I86;****IF ARINSURE = 1, THEN CONTINUE WITH QA11\_I37;****IF ARINSURE = 0, THEN GO TO PROGRAMMING NOTE QA11\_I38;****ELSE CONTINUE WITH QA11\_I37****QA11\_I37** These next questions are about health insurance (TEEN) may have.

Does (TEEN) have the same insurance as {you/ADULT RESPONDENT NAME}?

**IA10A**

YES .....1      **[GO TO QA11\_I67]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_I37:****IF QA11\_I37 = 1 AND ARMCARE = 1, THEN SET TEMCARE = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARMCAL = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARHFAM = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARHKID = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AREMPOWN = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AREMPSP = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AREMPPAR = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AREMPOTH = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARDIRECT = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARMILIT = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AROTHGOV = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND AROTHGOV = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;****IF QA11\_I37 = 1 AND ARIHS = 1, THEN SET TEIHS = 1**

**PROGRAMMING NOTE QA11\_I38:**

IF SPINSURE ≠ 1, THEN GO TO QA11\_I39;

ELSE IF QA11\_I37 = 2 AND ARSAMESP = 1 THEN GO TO PROGRAMMING NOTE QA11\_I39;

ELSE CONTINUE WITH QA11\_I38

**QA11\_I38** Does (TEEN) have the same insurance as {your spouse/your partner/SPOUSE/PARTNER}?**MA5**

YES .....1      **[GO TO QA11\_I54]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I38:**

IF QA11\_I38 = 1 AND SPMPCARE = 1, SET TEMPCARE = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPEMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;

IF QA11\_I38 = 1 AND SPIHS = 1, SET TEIHS = 1

**PROGRAMMING NOTE QA11\_I39:**

IF CHINSURE ≠ 1, THEN GO TO QA11\_I40;

ELSE IF (QA11\_I37 = 2 AND ARSAMECH = 1) OR (QA11\_I38 = 2 AND SPSAMECH = 1), THEN GO TO QA11\_I40;

ELSE CONTINUE WITH QA11\_I39;

**QA11\_I39** Does (TEEN) have the same insurance as (CHILD)?**MA6**

YES .....1      **[GO TO PN QA11\_I67]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I39:**

IF QA11\_I39 = 1 AND CHMCARE = 1, THEN SET TEMPCARE = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHMCAL = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHHFAM = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHHKID = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHEMP = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHDIRECT = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHMILIT = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHOTHGOV = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;

IF QA11\_I39 = 1 AND CHIHS = 1, THEN SET TEIHS = 1



**QA11\_I40** Is {he/she} currently covered by Medi-CAL?

**IA1**

**[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]**

YES .....1 **[GO TO QA11\_I42]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I40:**  
**IF QA11\_I40 = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1**

**QA11\_I41** Is (TEEN) covered by the Healthy Families Program?

**IA2**

**[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I41:**  
**IF QA11\_I41 = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1**

**QA11\_I42** Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?

**IA3**

YES .....1 **[GO TO QA11\_I44]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I42:**  
**IF QA11\_I42 = 1, THEN SET TEEMP = 1 AND TEINSURE = 1**

**QA11\_I43** Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO? Do not include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you "extra cash" if you are in a hospital.

**IA4**

YES .....1  
 NO .....2 **[GO TO PN QA11\_I47]**  
 REFUSED .....-7 **[GO TO PN QA11\_I47]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_I47]**

**POST-NOTE QA11\_I43:**  
**IF QA11\_I43 = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1**

**QA11\_I44**

Do you pay any or all of the premium or cost for (TEEN)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

**AI55**

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.**

**A deductible is the amount you pay for medical care before your health plan starts paying.**

**Premium is the monthly charge for the cost of your health insurance plan."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I45**

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (TEEN)'s health plan?

**AI52**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**[GO TO PN QA11\_I47]****[GO TO PN QA11\_I47]****[GO TO PN QA11\_I47]****QA11\_I46**

Who else pays all or some portion of the cost for (TEEN)'s health plan?

**AI53**

CURRENT EMPLOYER .....1  
 FORMER EMPLOYER .....2  
 UNION .....3  
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4  
 SPOUSE'S/PARTNER'S FORMER EMPLOYER....5  
 PROFESSIONAL/FRATERNAL ORGANIZATION...6  
 MEDICAID/MEDI-CAL ASSISTANCE .....7  
 HEALTHY FAMILIES .....8  
 HEALTHY KIDS .....9  
 OTHER ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA11\_I46:**

**IF QA11\_I46 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;**

**IF QA11\_I46 = 7, SET TEMCAL = 1;**

**IF QA11\_I46 = 8, SET TEHFAM = 1;**

**IF QA11\_I46 = 9, SET TEHKID = 1 AND SET TEINSURE = 1**

**PROGRAMMING NOTE QA11\_I47:**  
**IF TEINSURE = 1, GO TO PROGRAMMING NOTE QA11\_I54;**  
**ELSE CONTINUE WITH QA11\_I47**

**QA11\_I47** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

**IA6**

YES .....1 **[GO TO PN QA11\_I54]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I47:**  
**IF QA11\_I47 = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1**

**PROGRAMMING NOTE QA11\_I48:**  
**IF TEINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), THEN CONTINUE WITH QA11\_I50 AND DISPLAY "Healthy Kids";**

**QA11\_I48** Is {he/she} covered by the Healthy Kids program?

**AI71**

**[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]**

YES .....1 **[GO TO PN QA11\_I54]**  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I48:**  
**IF QA11\_I48 = 1, THEN SET TEHKID = 1 AND TEINSURE = 1**

**QA11\_I49** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, PCIP or something else?

**IA7**

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and PCIP is the pre-existing condition insurance plan."]**

AIM .....1 **[GO TO PN QA11\_I54]**  
 "MISTER MIP"/MRMIP .....2 **[GO TO PN QA11\_I54]**  
 Family PACT .....3 **[GO TO PN QA11\_I54]**  
 PCIP .....4 **[GO TO PN QA11\_I54]**  
 NO OTHER PLAN .....5  
 SOMETHING ELSE (SPECIFY: \_\_\_\_\_) ..... 91 **[GO TO PN QA11\_I54]**  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA11\_I49:**  
**IF QA11\_I49 = 1, 2, 3, 4, OR 91, THEN SET TEOTHGOV = 1 AND TEINSURE = 1**

**QA11\_I50** Does {he/she} have any health insurance coverage through a plan that I missed?

**IA8**

YES .....	1	
NO .....	2	[GO TO PN QA11_I54]
REFUSED .....	-7	[GO TO PN QA11_I54]
DON'T KNOW .....	-8	[GO TO PN QA11_I54]

**QA11\_I51** What type of health insurance does {he/she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?

**IA9**

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1	
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION .....	2	
PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE) .....	3	
MEDICARE .....	4	(VERIFY)
MEDI-CAL .....	5	
HEALTHY FAMILIES .....	6	
CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE .....	7	
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC .....	8	
HEALTHY KIDS .....	9	
OTHER GOVERNMENT HEALTH PLAN .....	91	
OTHER NON-GOVERNMENT HEALTH PLAN .....	92	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QA11\_I51:**

IF QA11\_I51\_1 = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_2 = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_3 = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_4 = 1, THEN SET TEMCARE = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_5 = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_6 = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_7 = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_8 = 1, THEN SET TEIHS = 1;  
 IF QA11\_I51\_9 = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_91 = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;  
 IF QA11\_I51\_92 = 1, THEN SET TEOTHER = 1 AND TEINSURE = 1;  
 IF QA11\_I51 = -7 OR -8, THEN SET TEINSURE = 1

**PROGRAMMING NOTE QA11\_I52:**  
**IF TEINSURE ≠ 1, THEN CONTINUE WITH QA11\_I52;**  
**ELSE GO TO QA11\_I54;**

**QA11\_I52** What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?

**IA1A**

PAPERWORK TOO DIFFICULT .....1  
 DIDN'T KNOW IF ELIGIBLE .....2  
 INCOME TOO HIGH, NOT ELIGIBLE .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 OTHER NOT ELIGIBLE .....5  
 DON'T BELIEVE IN HEALTH INSURANCE .....6  
 DON'T NEED IT BECAUSE HEALTHY .....7  
 ALREADY HAVE INSURANCE .....8  
 DIDN'T KNOW IT EXISTED.....9  
 DON'T LIKE / WANT WELFARE ..... 10  
 OTHER (SPECIFY: \_\_\_\_\_)..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I53** What is the ONE main reason why (TEEN) is not enrolled in the Healthy Families program?

**IA2A**

PAPERWORK TOO DIFFICULT .....1  
 DIDN'T KNOW IF ELIGIBLE .....2  
 INCOME TOO HIGH, NOT ELIGIBLE .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 OTHER NOT ELIGIBLE .....5  
 DON'T BELIEVE IN HEALTH INSURANCE .....6  
 DON'T NEED IT BECAUSE HEALTHY .....7  
 ALREADY HAVE INSURANCE .....8  
 DIDN'T KNOW IT EXISTED.....9  
 DON'T LIKE / WANT WELFARE ..... 10  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I54:**

IF QA11\_I37 = 1 AND ARM CARE = 1, THEN SET QA11\_I54 = QA11\_H8 AND QA11\_I55 = QA11\_H9 AND GO TO QA11\_I56;  
 ELSE IF QA11\_I37 = 1, THEN SET QA11\_I54 = QA11\_H57 AND QA11\_I55 = QA11\_H58 AND QA11\_I56 = QA11\_H59 AND GO TO PN QA11\_I57;  
 ELSE IF QA11\_I39 = 1, THEN SET QA11\_I54 = QA11\_I18 AND QA11\_I55 = QA11\_I19 AND QA11\_I56 = QA11\_I20 AND GO TO PN QA11\_I57;  
 ELSE IF TEINSURE = 1, THEN CONTINUE WITH QA11\_I54;  
 ELSE GO TO PROGRAMMING NOTE QA11\_I57

**QA11\_I54** Is (TEEN)'s {Medi-Cal} health plan an HMO?

**MA8**

[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid unless it's an emergency."]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her} MAIN health plan."]

[IF R SAYS "POS" OR "POINT OF SERVICE," CODE AS "YES." IF R SAYS "PPO," CODE AS "NO."]

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I55:**

IF TEINSURE = 1 (TEEN HAS ANY COVERAGE), THEN CONTINUE WITH QA11\_I55;  
 IF TEMCARE = 1 AND QA11\_I54 = 1, THEN LIST HMO MEDICARE BY COUNTY;  
 ELSE IF [TEMCAL = 1 OR (TEOTHGOV = 1 AND QA11\_I49 = 1)] AND QA11\_I54 = 1, THEN LIST HMO MEDICAL BY COUNTY;  
 ELSE IF (TEHFAM = 1 OR TEHKIDS = 1) AND QA11\_I54 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;  
 ELSE IF [TEEMP = 1 OR TEDIRECT = 1 OR (TEOTHGOV = 1 AND QA11\_I49 = 2) OR TEOTHER = 1] AND QA11\_I54 = 1, THEN LIST HMO COMMERCIAL BY COUNTY;  
 ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1) AND QA11\_I54 = 2 THEN LIST NON-HMO BY COUNTY

**QA11\_I55** What is the name of (TEEN)'s main health plan?

**MA7**

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (TEEN) have an insurance card or something else with the plan name on it?"]

AARP MEDICARE COMPLETE .....1  
 AETNA .....2  
 AETNA MEDICARE (SELECT/PREMIER) .....3  
 ALAMEDA ALLIANCE FOR HEALTH .....4  
 ALLIANCE COMPLETE CARE .....5  
 ANTHEM BLUE CROSS/BLUE CROSS .....6  
 ARCADIAN COMMUNITY CARE .....7  
 BLUE CROSS SENIOR SECURE .....8  
 BLUE SHIELD 65 PLUS .....9

BLUE SHIELD OF CALIFORNIA .....	10
CAL OPTIMA .....	11
CARE 1 <sup>ST</sup> HEALTH PLAN .....	12
CARE ADVANTAGE .....	13
CARE MORE .....	14
CEN CAL HEALTH.....	15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .....	16
CENTRAL HEALTH PLAN OF CALIFORNIA .....	17
CHINESE COMMUNITY HEALTH PLAN.....	18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM .....	19
CIGNA.....	20
CITIZENS CHOICE HEALTHPLAN .....	21
COMMUNICARE ADVANTAGE .....	22
COMMUNITY HEALTH GROUP .....	23
COMMUNITY HEALTH PLAN.....	24
CONTRA COSTA HEALTH PLAN .....	25
DEPARTMENT OF HEALTH SERVICES .....	26
EASY CHOICE HEALTH PLAN .....	27
GEM CARE .....	28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN .....	29
GREAT-WEST .....	30
HEALTH NET.....	31
HEALTH PLAN OF SAN JOAQUIN.....	32
HEALTH PLAN OF SAN MATEO.....	33
HUMANA GOLD PLUS .....	34
IEHP (INLAND EMPIRE HEALTH PLAN) .....	35
IEHP MEDICARE DUAL CHOICE.....	36
INTER VALLEY HEALTH PLAN .....	37
KAISER.....	38
KERN COUNTY HEALTH PLAN.....	39
L.A. CARE HEALTH PLAN .....	40
MD CARE.....	41
MOLINA HEALTH PLAN.....	42
MOLINA MEDICARE OPTIONS .....	43
ON LOK.....	44
ON LOK SENIOR HEALTH SERVICES.....	45
ONE CARE .....	46
PACIFICARE.....	47
PARTNERSHIP HEALTH PLAN OF CALIFORNIA.....	48
SALUD CON HEALTH NET.....	49
SAN FRANCISCO HEALTH PLAN .....	50
SANTA CLARA FAMILY HEALTH PLAN .....	51
SCAN HEALTH PLAN.....	52
SECURE HORIZONS .....	53
SENIOR ADVANTAGE .....	54
SENIORITY PLUS.....	55
SERVICE TO SENIORS .....	56
SHARP HEALTH PLAN .....	57
TOTAL FIT .....	58
VALLEY HEALTH PLAN .....	59
VENTURA COUNTY HEALTH CARE PLAN.....	60
WESTERN HEALTH ADVANTAGE .....	61
WESTERN HEALTH ADVANTAGE CARE+ .....	62
CHAMPUS/CHAMP-VA .....	63
TRICARE/TRICARE FOR LIFE/TRICARE PRIME .....	64
VA HEALTH CARE SERVICES .....	65
MEDI-CAL .....	66
MEDICARE .....	67
MEDICARE ADVANTAGE .....	68
OTHER.....	91
OTHER (SPECIFY: _____) .....	92
REFUSED .....	-7

QA11\_I56 DON'T KNOW .....-8  
Is (TEEN) covered for prescription drugs?

IA14

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I57:**  
**IF (ARINSURE ≠ 1 OR QA11\_I37 ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN**  
**CONTINUE WITH QA11\_I57;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I62**

QA11\_I57 Does (TEEN)'s health plan have a deductible that is more than \$1,000?

AI82

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1  
NO .....2 [GO TO QA11\_I59]  
YES, ONLY WHEN GO OUT OF NETWORK .....3 [GO TO QA11\_I59]  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I58:**  
**IF TEEMP = 1, THEN CONTINUE WITH QA11\_I58;**  
**ELSE GO TO QA11\_I59**

QA11\_I58 Does (TEEN)'s health plan have a deductible that is more than \$2,000?

AI87

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1 [GO TO PN QA11\_I60]  
NO .....2  
YES, ONLY WHEN GO OUT OF NETWORK .....3  
REFUSED .....-7  
DON'T KNOW .....-8

QA11\_I59 Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$2,000?

AI83

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1  
NO .....2 [GO TO PN QA11\_I61]  
YES, ONLY WHEN GO OUT OF NETWORK .....3 [GO TO PN QA11\_I61]  
REFUSED .....-7  
DON'T KNOW .....-8



**PROGRAMMING NOTE QA11\_I60:**  
**IF TEEMP = 1, THEN CONTINUE WITH QA11\_I60;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I61**

**QA11\_I60** Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$4,000?

**AI88**

**[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

YES .....1  
 NO .....2  
 YES, ONLY WHEN GO OUT OF NETWORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I61:**  
**IF (QA11\_I57 = 1 OR 3) OR (QA11\_I58 = 1 OR 3) OR (QA11\_I59 = 1 OR 3), THEN CONTINUE WITH QA11\_I61;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_I62**

**QA11\_I61** Do you have a special account or fund you can use to pay for (TEEN)'s medical expenses?

**AI84**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts."]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I62:**  
**IF TEINSURE = 1, THEN GO TO QA11\_I67;**  
**ELSE CONTINUE WITH QA11\_I62**

**QA11\_I62** What is the one main reason (TEEN) does not have any health insurance?

**IA18**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I63** Was (TEEN) covered by health insurance at any time during the past 12 months?

**IA20**

YES .....1 **[GO TO QA11\_I65]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I64** How long has it been since (TEEN) last had health insurance?

**IA21**

MORE THAN 12 MONTHS, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO PN QA11\_I73]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO PN QA11\_I73]**  
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 **[GO TO PN QA11\_I73]**  
 REFUSED ..... -7 **[GO TO PN QA11\_I73]**  
 DON'T KNOW/NOT SURE ..... -8 **[GO TO PN QA11\_I73]**

**QA11\_I65** For how many of the last 12 months did {he/she} have health insurance?

**IA22**

**[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER "1"]**

\_\_\_\_\_ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA11\_I73]**

REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I66** During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan?

**IA23**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

MEDI-CAL .....	1	<b>[GO TO PN QA11_I73]</b>
HEALTHY FAMILIES .....	2	<b>[GO TO PN QA11_I73]</b>
THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	3	<b>[GO TO PN QA11_I73]</b>
HEALTHY KIDS .....	4	<b>[GO TO PN QA11_I73]</b>
OTHER HEALTH PLAN .....	91	<b>[GO TO PN QA11_I73]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_I73]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_I73]</b>

**QA11\_I67** Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?

**IA24**

YES .....	1	<b>[GO TO PN QA11_I73]</b>
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_I68** When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?

**IA25**

YES .....	1	
NO .....	2	<b>[GO TO QA11_I70]</b>
REFUSED .....	-7	<b>[GO TO QA11_I70]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_I70]</b>

**QA11\_I69** Was this other health insurance Medi-Cal, Healthy Families, a plan you obtained from an employer, or some other plan?

**IA26**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

MEDI-CAL .....	1
HEALTHY FAMILIES .....	2
THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	3
HEALTHY KIDS .....	4
OTHER HEALTH PLAN .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_I70** During the past 12 months, was there any time when {he/she} had no health insurance at all?

**IA27**

YES .....1  
 NO .....2 **[GO TO PN QA11\_I73]**  
 REFUSED .....-7 **[GO TO PN QA11\_I73]**  
 DON'T KNOW .....-8 **[GO TO PN QA11\_I73]**

**QA11\_I71** For how many of the past 12 months did {he/she} have no health insurance?

**IA28**

**[IF < 1 MONTH, ENTER "1"]**

\_\_\_\_\_ MONTHS [HR: 1-12]

REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_I72** What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?

**IA29**

**[IF R SAYS, "No need," PROBE WHY]**

CAN'T AFFORD/TOO EXPENSIVE .....1  
 NOT ELIGIBLE DUE TO WORKING STATUS/  
 CHANGED EMPLOYER/LOST JOB .....2  
 NOT ELIGIBLE DUE TO HEALTH OR  
 OTHER PROBLEMS .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 FAMILY SITUATION CHANGED .....5  
 DON'T BELIEVE IN INSURANCE .....6  
 SWITCHED INSURANCE COMPANIES,  
 DELAY BETWEEN .....7  
 CAN GET HEALTH CARE FOR FREE/PAY  
 FOR OWN CARE .....8  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I73:**

**IF TI3 ≠ -1 (ALREADY ANSWERED IN ADOLESCENT QUESTIONNAIRE), THEN GO TO QA11\_I77;  
ELSE CONTINUE WITH QA11\_I73**

**QA11\_I73** In what country was (TEEN) born?

**AI56T**

UNITED STATES.....	1
AMERICAN SAMOA .....	2
CANADA .....	3
CHINA .....	4
EL SALVADOR .....	5
ENGLAND .....	6
FRANCE .....	7
GERMANY .....	8
GUAM .....	9
GUATEMALA .....	10
HUNGARY .....	11
INDIA.....	12
IRAN.....	13
IRELAND.....	14
ITALY .....	15
JAPAN.....	16
KOREA.....	17
MEXICO .....	18
PHILIPPINES .....	19
POLAND .....	20
PORTUGAL .....	21
PUERTO RICO .....	22
RUSSIA.....	23
TAIWAN .....	24
VIETNAM .....	25
VIRGIN ISLANDS .....	26
OTHER (SPECIFY:.....) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_I74:**

**IF QA11\_I73 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), THEN GO TO PROGRAMMING  
NOTE QA11\_I77;  
ELSE CONTINUE WITH QA11\_I74**

**QA11\_I74** Is (TEEN) a citizen of the United States?

**AI58T**

YES .....	1	<b>[GO TO QA11_I76]</b>
NO.....	2	
APPLICATION PENDING .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_I75** Is (TEEN) a permanent resident with a green card?

**AI59T**

**[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]**

YES .....1  
NO .....2  
APPLICATION PENDING .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**QA11\_I76** About how many years has (TEEN) lived in the United States?

**AI60T**

**[IF < 1 YEAR, ENTER "1 YEAR"]**

\_\_\_\_\_ NUMBER OF YEARS  
\_\_\_\_\_ YEAR FIRST CAME AND LIVE IN U.S.

REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I77:****IF QA11\_A5 = 1 (R IS MALE), THEN DISPLAY "mother";****ELSE IF QA11\_A5 = 2 (R IS FEMALE), THEN DISPLAY "father";****QA11\_I77** In what country was (TEEN)'s {mother/father} born?**AI56****[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

UNITED STATES.....	1
AMERICAN SAMOA .....	2
CANADA .....	3
CHINA .....	4
EL SALVADOR .....	5
ENGLAND.....	6
FRANCE .....	7
GERMANY.....	8
GUAM .....	9
GUATEMALA.....	10
HUNGARY .....	11
INDIA.....	12
IRAN.....	13
IRELAND.....	14
ITALY .....	15
JAPAN.....	16
KOREA.....	17
MEXICO .....	18
PHILIPPINES .....	19
POLAND .....	20
PORTUGAL .....	21
PUERTO RICO .....	22
RUSSIA.....	23
TAIWAN .....	24
VIETNAM .....	25
VIRGIN ISLANDS .....	26
OTHER (SPECIFY:.....) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_I78:**

**IF QA11\_I77 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), THEN GO TO PROGRAMMING NOTE QA11\_I82;**

**ELSE CONTINUE WITH QA11\_I78;**

**IF QA11\_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;**

**ELSE IF QA11\_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”**

**QA11\_I78** Does (TEEN)'s {mother/father} now live in the U.S.?

**AI57**

YES .....1  
 NO .....2  
 MOTHER/FATHER DECEASED .....3  
 MOTHER/FATHER NEVER LIVED IN US .....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I79:**

**IF QA11\_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;**

**ELSE IF QA11\_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”;**

**IF QA11\_I78 = 3 (MOTHER/FATHER DECEASED), THEN DISPLAY “Was”;**

**ELSE DISPLAY “Is”**

**QA11\_I79** {Is/Was} (TEEN)'s {mother/father} a citizen of the United States?

**AI58**

**[IF R SAYS HE/SHE IS A NATURALIZED CITIZEN, CODE YES]**

YES .....1 **[GO TO PN QA11\_I81]**  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_I80:**

**IF QA11\_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;**

**ELSE IF QA11\_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”;**

**IF QA11\_I78 = 3 (MOTHER/FATHER DECEASED), THEN DISPLAY “Was”;**

**ELSE DISPLAY “Is”**

**QA11\_I80** {Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?

**AI59**

**[IF NEEDED, SAY: “People usually call this a “Green Card” but the color can also be pink, blue, or white.”]**

YES .....1  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8



**PROGRAMMING NOTE QA11\_I81:**

**IF QA11\_A5 = 1 (R IS MALE), THEN DISPLAY "mother";  
ELSE IF QA11\_A5 = 2 (R IS FEMALE), THEN DISPLAY "father"**

**QA11\_I81** About how many years has (TEEN)'s {mother/father} lived in the United States?

**AI60**

**[IF < 1 YEAR, ENTER "1"]**

\_\_\_\_\_ NUMBER OF YEARS  
\_\_\_\_\_ YEAR FIRST CAME AND LIVE IN U.S.

MOTHER/FATHER DECEASED .....3  
MOTHER/FATHER NEVER LIVED IN US .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I82:**

**IF CH8 ≠ -1 (ALREADY ANSWERED IN CHILD QUESTIONNAIRE), THEN GO TO SECTION J;  
ELSE CONTINUE WITH QA11\_I82**

**QA11\_I82** In what country was (CHILD) born?

**AI56C**

UNITED STATES... .....1  
AMERICAN SAMOA .....2  
CANADA .....3  
CHINA .....4  
EL SALVADOR .....5  
ENGLAND .....6  
FRANCE .....7  
GERMANY .....8  
GUAM .....9  
GUATEMALA ..... 10  
HUNGARY ..... 11  
INDIA ..... 12  
IRAN ..... 13  
IRELAND ..... 14  
ITALY ..... 15  
JAPAN ..... 16  
KOREA ..... 17  
MEXICO ..... 18  
PHILIPPINES ..... 19  
POLAND ..... 20  
PORTUGAL ..... 21  
PUERTO RICO ..... 22  
RUSSIA ..... 23  
TAIWAN ..... 24  
VIETNAM ..... 25  
VIRGIN ISLANDS ..... 26  
OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_I83:**

**IF QA11\_I73 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), THEN GO TO SECTION J;  
ELSE CONTINUE WITH QA11\_I83**

**QA11\_I83** Is (CHILD) a citizen of the United States?

**AI58C**

YES .....1 **[GO TO QA11\_I85]**  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I84** Is (CHILD) a permanent resident with a green card?

**AI59C**

**[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]**

YES .....1  
 NO .....2  
 APPLICATION PENDING .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_I85** About how many years has (CHILD) lived in the United States?

**AI60C**

**[IF < 1 YEAR, ENTER "1 YEAR"]**

\_\_\_\_\_ NUMBER OF YEARS  
 \_\_\_\_\_ YEAR FIRST CAME AND LIVE IN U.S.

REFUSED ..... -7  
 DON'T KNOW ..... -8

## Section J – Health Care Utilization and Access

**PROGRAMMING NOTE QA11\_J1:**

IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, THEN DISPLAY “Now, I’d like to ask about the health care YOU receive”;

ELSE BEGIN QUESTION WITH “During the past 12 months, how many times have you seen a medical doctor”

**QA11\_J1** {Now, I’d like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor?

**AH5**

\_\_\_\_\_ TIMES [HR: 0-365]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_J2:**

IF QA11\_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), THEN CONTINUE WITH QA11\_J2;

ELSE GO TO PROGRAMMING NOTE QA11\_J3

**QA11\_J2** About how long has it been since you last saw a doctor about your own health?

**AH6**

ONE YEAR AGO OR LESS .....0

MORE THAN 1 UP TO 2 YEARS AGO .....1

MORE THAN 2 UP TO 5 YEARS AGO .....2

MORE THAN 5 YEARS AGO .....3

NEVER .....4

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_J3:**

IF QA11\_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11\_J3;

ELSE GO TO PROGRAMMING NOTE QA11\_J4

**QA11\_J3** Do you have a personal doctor or medical provider who is your main provider?

**AJ77**

[IF NEEDED, SAY: “This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider.”]

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_J4:**

**IF QA11\_J3 = 1 (HAS A PERSONAL DOCTOR) OR [QA11\_J1 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QA11\_J1 = 0 (SAW DOCTOR LESS THAN A YEAR AGO)], THEN CONTINUE WITH QA11\_J4; ELSE GO TO PROGRAMMING NOTE QA11\_J6**

**QA11\_J4** During the past 12 months, did you phone or e-mail the doctor's office with a medical question?

**AJ78**

YES .....	1	
NO .....	2	[GO TO PN QA11_J6]
REFUSED .....	-7	[GO TO PN QA11_J6]
DON'T KNOW .....	-8	[GO TO PN QA11_J6]

**QA11\_J5** How often did you get an answer as soon as you needed it? Would you say...

**AJ79**

Never, .....	1
Sometimes, .....	2
Usually, or .....	3
Always? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_J6:**

**IF QA11\_J3 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QA11\_J6; ELSE GO TO PROGRAMMING NOTE QA11\_J8**

**QA11\_J6** How often does your doctor or medical provider listen carefully to you? Would you say...

**AJ112**

Never, .....	1
Sometimes, .....	2
Usually, or .....	3
Always? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_J7** How often does your doctor or medical provider explain clearly what you need to do to take care of your health? Would you say...

**AJ113**

Never, .....	1
Sometimes, .....	2
Usually, or .....	3
Always? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_J8:**

**IF ARINSURE = 1 OR AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11\_J8;**

**ELSE GO TO PROGRAMMING NOTE QA11\_J11;**

**IF QA11\_J3 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY “your”;**

**ELSE DISPLAY “a”;**

**QA11\_J8**

In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

**AJ102**

**[IF NEEDED, SAY: Do not include urgent care or emergency care visits. I am only asking about appointments.]**

YES .....	1	
NO .....	2	<b>[GO TO QA11_J10]</b>
REFUSED .....	-7	<b>[GO TO QA11_J10]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_J10]</b>

**QA11\_J9**

How often were you able to get an appointment within two days? Would you say...

**AJ103**

Never, .....	1	<b>[GO TO PN QA11_J11]</b>
Sometimes, .....	2	<b>[GO TO PN QA11_J11]</b>
Usually, or .....	3	<b>[GO TO PN QA11_J11]</b>
Always? .....	4	<b>[GO TO PN QA11_J11]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_J11]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_J11]</b>

**PROGRAMMING NOTE QA11\_J10:**

**IF QA11\_J3 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY “your”;**

**ELSE DISPLAY “a”;**

**QA11\_J10**

Could you get an appointment to see {your/a} doctor or medical provider within two days if you needed to?

**AJ104**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_J11:**

IF QA11\_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND QA11\_J3 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [(QA11\_B3 = 1 OR QA11\_B4 = 1 (HAS ASTHMA)) OR QA11\_B18 = 1 (HAS DIABETES) OR QA11\_B37 = 1 (HAS HEART DISEASE)], THEN CONTINUE WITH QA11\_J11;  
ELSE GO TO PROGRAMMING NOTE QA11\_J12

**QA11\_J11** Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services such as tests or treatments?

**AJ80**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J12:**

IF QA11\_J1 > 0 OR QA11\_J2 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO), THEN CONTINUE WITH QA11\_J12;  
ELSE GO TO PROGRAMMING NOTE QA11\_J17

**QA11\_J12** The last time you saw a doctor, did you have a hard time understanding the doctor?

**AJ8**

YES .....1 [GO TO PN QA11\_J14]  
NO .....2  
REFUSED .....-7 [GO TO PN QA11\_J17]  
DON'T KNOW .....-8 [GO TO PN QA11\_J17]

**PROGRAMMING NOTE QA11\_J13:**

IF QA11\_J12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA11\_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], THEN CONTINUE WITH QA11\_J13;  
ELSE GO TO PROGRAMMING NOTE QA11\_J17

**QA11\_J13** In what language did the doctor speak to you?

**AJ50**

ENGLISH .....1 [GO TO QA11\_J15]  
SPANISH .....2 [GO TO PN QA11\_J17]  
CANTONESE .....3 [GO TO PN QA11\_J17]  
VIETNAMESE .....4 [GO TO PN QA11\_J17]  
TAGALOG .....5 [GO TO PN QA11\_J17]  
MANDARIN .....6 [GO TO PN QA11\_J17]  
KOREAN .....7 [GO TO PN QA11\_J17]  
ASIAN INDIAN LANGUAGES .....8 [GO TO PN QA11\_J17]  
RUSSIAN .....9 [GO TO PN QA11\_J17]  
OTHER (SPECIFY: \_\_\_\_\_) ..... 91 [GO TO PN QA11\_J17]  
REFUSED .....-7 [GO TO PN QA11\_J17]  
DON'T KNOW .....-8 [GO TO PN QA11\_J17]

**QA11\_J14** Was this because you and the doctor spoke different languages?

**AJ9**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_J15** Did you need someone to help you understand the doctor?

**AJ10**

YES .....1  
 NO .....2 [GO TO PN QA11\_J17]  
 REFUSED .....-7 [GO TO PN QA11\_J17]  
 DON'T KNOW .....-8 [GO TO PN QA11\_J17]

**QA11\_J16** Who was this person who helped you understand the doctor?

**AJ11**

**[IF R RESPONDS "MY CHILD," PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS "ADULT FAMILY MEMBER".]**

MINOR CHILD (UNDER AGE 18) .....1  
 AN ADULT FAMILY MEMBER OR  
 FRIEND OF MINE .....2  
 NON-MEDICAL OFFICE STAFF .....3  
 MEDICAL STAFF INCLUDING  
 NURSES/DOCTORS .....4  
 PROFESSIONAL INTERPRETER (BOTH IN  
 PERSON AND ON THE TELEPHONE) .....5  
 OTHER (PATIENTS, SOMEONE ELSE) .....6  
 DID NOT HAVE SOMEONE TO HELP .....7  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J17:**

**IF QA11\_G7 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH QA11\_J17;  
 ELSE GO TO PROGRAMMING NOTE QA11\_J18**

**QA11\_J17** In California, you have the right to get help from an interpreter for free during your medical visits.  
 Did you know this before today?

**AJ105**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J18:**

**IF [ARINSURE = 1 OR QA11\_H74 = 1 (HAD INSURANCE AT ANY TIME DURING THE PAST 12 MONTHS)]  
AND QA11\_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11\_J18;  
ELSE GO TO QA11\_J20**

**QA11\_J18** In the past 12 months, did you change where you usually go for health care?

**AJ106**

YES .....1  
NO .....2 [GO TO QA11\_J20]  
REFUSED ..... -7 [GO TO QA11\_J20]  
DON'T KNOW ..... -8 [GO TO QA11\_J20]

**QA11\_J19** Did you have to change because of your health insurance plan?

**AJ107**

**[IF NEEDED, SAY: "Did you have to change where you usually go for health care because of a reason related to your health insurance plan?"]**

YES .....1  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA11\_J20** During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

**AH16**

YES .....1  
NO .....2 [GO TO PN QA11\_J25]  
REFUSED ..... -7 [GO TO PN QA11\_J25]  
DON'T KNOW ..... -8 [GO TO PN QA11\_J25]

**QA11\_J21** Was cost or lack of insurance a reason why you delayed or did not get the prescription?

**AJ19**

YES .....1  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_J22:**

**IF [QA11\_B3 = 1 OR QA11\_B4 = 1 (HAS ASTHMA)] AND QA11\_J13 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J22;  
ELSE GO TO PROGRAMMING NOTE QA11\_J23**

**QA11\_J22** Was this prescription for your asthma?

**AJ81**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J23:**

**IF QA11\_B18 = 1 (HAS DIABETES) AND QA11\_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J23;  
ELSE GO TO PROGRAMMING NOTE QA11\_J24**

**QA11\_J23** Was this prescription for your diabetes?

**AJ82**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J24:**

**IF QA11\_B37 = 1 (HAS HEART DISEASE) AND QA11\_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J24;  
ELSE GO TO QA11\_J25**

**QA11\_J24** Was this prescription for your heart disease?

**AJ83**

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**QA11\_J25** During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?

**AH22**

YES .....1  
NO .....2 [GO TO QA11\_J30]  
REFUSED .....-7 [GO TO QA11\_J30]  
DON'T KNOW .....-8 [GO TO QA11\_J30]

**QA11\_J26** Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

**AJ20**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J27:**

**IF [QA11\_B3 = 1 OR QA11\_B4 = 1 (HAS ASTHMA)] AND QA11\_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J27;  
 ELSE GO TO PROGRAMMING NOTE QA11\_J28**

**QA11\_J27** Was this medical care for your asthma?

**AJ84**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J28:**

**IF QA11\_B18 = 1 (HAS DIABETES) AND QA11\_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J28;  
 ELSE GO TO PROGRAMMING NOTE QA11\_J29**

**QA11\_J28** Was this medical care for your diabetes?

**AJ85**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_J29:**

**IF QA11\_B37 = 1 (HAS HEART DISEASE) AND QA11\_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11\_J29;  
 ELSE GO TO QA11\_J30**

**QA11\_J29** Was this medical care for your heart disease?

**AJ86**

YES .....1  
 NO.....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_J30** Have you ever used the Internet?

**AJ108**

**[INTERVIEWER NOTE: THIS INCLUDES SENDING OR RECEIVING EMAIL, USING FACEBOOK, TWITTER, ETC. INCLUDE USING A COMPUTER, PHONE, TABLET, OR ANY OTHER ELECTRONIC DEVICE FOR ACCESSING THE INTERNET.]**

YES .....	1	
NO .....	2	<b>[GO TO QA11_J33]</b>
REFUSED .....	-7	<b>[GO TO QA11_J33]</b>
DON'T KNOW .....	-8	<b>[GO TO QA11_J33]</b>

**QA11\_J31** In the past 12 months, did you use the Internet to look for health or medical information?

**AJ109**

**[IF NEEDED, SAY: "Include information about disease symptoms, diet or nutrition, physical activity, healthcare providers, and health insurance plans."]**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_J32** How confident are you that you can fill out an application on-line on your own? Would you say you are...

**AJ110**

Very confident, .....	1	<b>[GO TO PN QA11_K1]</b>
Somewhat confident, .....	2	<b>[GO TO PN QA11_K1]</b>
Not too confident, or, .....	3	
Not at all confident?, .....	4	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA11\_J33** If you wanted to fill out an application on-line, is there someone who could help you with it?

**AJ111**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

## Section K – Employment, Income, Poverty Status, Food Security

### PROGRAMMING NOTE QA11\_K1:

IF QA11\_G26 = 1 OR 2 (WORKING AT JOB OR BUSINESS OR WITH A JOB OR BUSINESS BUT NOT AT WORK) OR QA11\_G28 = 1 (R USUALLY WORKS), THEN CONTINUE WITH QA11\_K1;  
ELSE GO TO PROGRAMMING NOTE QA11\_K5

**QA11\_K1** The next questions are about your employment.

How many hours per week do you usually work at all jobs or businesses?

**AK3**

**[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]**

\_\_\_\_\_ HOURS [HR: 0-95]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_K2** How long have you worked at your main job?

**AK7**

**[IF NEEDED, SAY: "That is, for your current employer."]**

\_\_\_\_\_ MONTHS [HR: 0-12]

\_\_\_\_\_ YEARS [HR: 0-50]

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA11\_K3:

IF QA11\_G30 = 2 (GOVERNMENT EMPLOYEE), THEN CODE QA11\_K3 = 8 AND GO TO QA11\_K4;  
ELSE IF QA11\_G30 = 3 (SELF-EMPLOYED), THEN CONTINUE WITH QA11\_K3 AND DISPLAY "Including yourself, about" AND "you";  
ELSE CONTINUE WITH QA11\_K3 AND DISPLAY "About" AND "your employer"

**QA11\_K3** {Including yourself, about/About} how many people are employed by {you/your employer} at all locations?

**AK8**

**[IF NEEDED, SAY: "Your best guess is fine."]**

1 OR 2 .....1

3-9 .....2

10-24 .....3

25-50 .....4

51-100 .....5

101-200 .....6

201-999 .....7

1,000 OR MORE .....8

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_K4:**

**IF QA11\_G26 = 1 OR 2 (WORKING AT JOB OR BUSINESS OR WITH JOB OR BUSINESS BUT NOT AT WORK) OR QA11\_G28 = 1 (USUALLY WORKS), THEN CONTINUE WITH QA11\_K4;  
ELSE GO TO PROGRAMMING NOTE QA11\_K5**

**QA11\_K4**

What is your best estimate of all your earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

**AK10**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_K5:**

**IF QA11\_G31 = 1 OR 2 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS OR SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK) OR QA11\_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), THEN CONTINUE WITH QA11\_K5;**

**IF QA11\_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA11\_G28 ≠ 1 (R DOES NOT USUALLY WORK) AND QA11\_A16 = 1 (MARRIED), THEN DISPLAY "The next question is about your spouse's employment."**

**ELSE IF QA11\_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA11\_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN DISPLAY "The next question is about your partner's employment."**

**IF QA11\_A16 = 1 THEN DISPLAY "spouse";**

**ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1 THEN DISPLAY "partner";**

**ELSE GO TO QA11\_K7**

**QA11\_K5**

{The next question is about your spouse's employment./ The next question is about your partner's employment.}

How many hours per week does your {spouse/partner} usually work at all jobs or businesses?

**AK20**

**[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]**

\_\_\_\_\_ HOURS [HR: 0-95]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_K6:****IF QA11\_K5 > 0, THEN CONTINUE WITH QA11\_K6;****IF QA11\_QA11\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";****ELSE IF QA11\_D16 = 1 OR QA11\_D17 = 1, THEN DISPLAY "partner's";****ELSE GO TO QA11\_K7****QA11\_K6**

What is your best estimate of all your {spouse's/partner's} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

**AK10A****[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_K7**

What is your best estimate of your household's total annual income from all sources before taxes in 2010?

**AK22**

**[IF NEEDED, SAY: "Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income."]**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QA11\_K9]****[GO TO PN QA11\_K9]****QA11\_K8****PLEASE VERIFY AMOUNT ENTERED:**

I have entered that your annual household income is (AMOUNT). Is that correct?

**AK22A**

YES .....1

NO .....2

**[GO TO PN QA11\_K15]****[GO BACK TO QA11\_K7]****PROGRAMMING NOTE QA11\_K9:****IF QA11\_K7 = -7 OR -8, THEN CONTINUE WITH QA11\_K9;****ELSE GO TO PROGRAMMING NOTE QA11\_K15****QA11\_K9**

We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes is more than \$20,000 per year or is it less?

**AK11**

MORE .....1

EQUAL TO \$20K OR LESS .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO QA11\_K11]****[GO TO PN QA11\_K15]****[GO TO PN QA11\_K15]**

QA11\_K10 Is it ...

AK12

\$5,000 or less,.....	1	[GO TO PN QA11_K15]
\$5,001 to \$10,000, .....	2	[GO TO PN QA11_K15]
\$10,001 to \$15,000, or .....	3	[GO TO PN QA11_K15]
\$15,001 to 20,000? .....	4	[GO TO PN QA11_K15]
REFUSED .....	-7	[GO TO PN QA11_K15]
DON'T KNOW .....	-8	[GO TO PN QA11_K15]

QA11\_K11 Is it more or less than \$70,000 per year?

AK13

MORE .....	1	[GO TO QA11_K13]
EQUAL TO \$70K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QA11_K15]
DON'T KNOW .....	-8	[GO TO PN QA11_K15]

QA11\_K12 Is it ...

AK14

\$20,001 to \$30,000, .....	1	[GO TO PN QA11_K15]
\$30,001 to \$40,000, .....	2	[GO TO PN QA11_K15]
\$40,001 to \$50,000, .....	3	[GO TO PN QA11_K15]
\$50,001 to \$60,000, or .....	4	[GO TO PN QA11_K15]
\$60,001 to \$70,000? .....	5	[GO TO PN QA11_K15]
REFUSED .....	-7	[GO TO PN QA11_K15]
DON'T KNOW .....	-8	[GO TO PN QA11_K15]

QA11\_K13 Is it more or less than \$135,000 per year?

AK15

MORE .....	1	[GO TO PN QA11_K15]
EQUAL TO \$135K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QA11_K15]
DON'T KNOW .....	-8	[GO TO PN QA11_K15]

QA11\_K14 Is it ...

AK16

\$70,001 to \$80,000, .....	1
\$80,001 to \$90,000, .....	2
\$90,001 to \$100,000, or .....	3
\$100,001 to \$135,000? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_K15:**  
**IF R IS ONLY MEMBER OF HH, THEN GO TO PROGRAMMING NOTE QA11\_K17;**  
**ELSE CONTINUE WITH QA11\_K15**

**QA11\_K15** Including yourself, how many people living in your household are supported by your total household income?

**AK17**

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_K16:**  
**QA11\_K16 MUST BE LESS THAN QA11\_K15;**  
**IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR**  
**TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) =**  
**QA11\_K15, THEN GO TO PROGRAMMING NOTE QA11\_K17;**  
**ELSE CONTINUE WITH QA11\_K16**

**QA11\_K16** How many of these {INSERT NUMBER FROM QA11\_K15} people are children under the age of 18?

**AK18**

\_\_\_\_\_ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

REFUSED ..... -7

DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_K17:**

OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2010 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA11\_K15 AND QA11\_K16 RESPECTIVELY.

(THE 50%, 133%, 200% 300%, AND 400% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2010 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 0.5, 1.33, 2 3, AND 4, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM "Poverty Level 2010" DOCUMENT FOR THE TABLE OF VALUES. THE 50% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT50, THE 100% VALUE IN CATI VARIABLE POVRT100, THE 133% VALUE IN CATI VARIABLE POVRT133, THE 200% VALUE IN CATI VARIABLE POVRT200, THE 300% VALUE IN CATI VARIABLE POVRT300, AND THE 400% VALUE IN CATI VARIABLE POVRT400.)

IF EITHER QA11\_K15 OR QA11\_K16 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT QA11\_G15 OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

**ASCERTAIN IF THE HOUSEHOLD INCOME IS ...**

- 1) AT OR BELOW 50% FPL;
- 2) ABOVE 50% FPL BUT AT OR BELOW 100% FPL;
- 3) ABOVE 100% FPL BUT AT OR BELOW 133% FPL;
- 4) ABOVE 133% FPL BUT AT OR BELOW 200% FPL;
- 5) ABOVE 200% FPL BUT AT OR BELOW 300% FPL;
- 6) ABOVE 300% FPL BUT AT OR BELOW 400% FPL;
- 7) ABOVE 400% FPL; OR
- 8) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QA11\_K7 ≠ -7 OR -8 THEN GO TO PROGRAMMING NOTE QA11\_K23;

ELSE IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14, ASK QA11\_K17 USING POVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT); ELSE IF QA11\_K7 = -7 OR -8 (REF/DK) AND IF QA11\_K9 = -7 OR QA11\_K11 = -7 OR QA11\_K13 = -7, GO TO PROGRAMMING NOTE QA11\_K23

ELSE GO TO PROGRAMMING NOTE QA11\_K18

**QA11\_K17** I need to ask just one more question about income.

Was your total annual household income before taxes less than or more than \${POVRT50}?

**AK29**

EQUAL TO OR LESS .....	1	[GO TO PN QA11_K23]
MORE .....	2	[GO TO PN QA11_K23]
REFUSED .....	-7	[GO TO PN QA11_K23]
DON'T KNOW .....	-8	[GO TO PN QA11_K23]

**PROGRAMMING NOTE QA11\_K18:**

**IF THE HOUS, THEN CONTINUE WITH QA11\_K18 USING POVRT100 (100% POVERTY CUTOFF DISPLAY AMOUNT);**

**ELSE GO TO PROGRAMMING NOTE QA11\_K19**

**EHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14**

**QA11\_K18** I need to ask just one or two more questions about income.

Was your total annual household income before taxes less than or more than \${POVRT100}?

**AK18A**

EQUAL TO OR LESS .....	1	<b>[GO TO PN QA11_K23]</b>
MORE .....	2	
REFUSED .....	-7	<b>[GO TO PN QA11_K23]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_K23]</b>

**PROGRAMMING NOTE QA11\_K19:**

**IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14, THEN CONTINUE WITH QA11\_K17 USING POVRT133 (133% POVERTY CUTOFF DISPLAY AMOUNT);**

**IF QA11\_K18 WAS NOT ASKED, DISPLAY "I need to ask just one more question about income.";**

**ELSE DISPLAY "Was it";**

**ELSE GO TO PROGRAMMING NOTE QA11\_K20**

**QA11\_K19** {I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than \${POVRT133}?

**AK30**

EQUAL TO OR LESS .....	1	<b>[GO TO PN QA11_K23]</b>
MORE .....	2	<b>[GO TO PN QA11_K23]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_K23]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_K23]</b>

**PROGRAMMING NOTE QA11\_K20:**

**IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14, THEN CONTINUE WITH QA11\_K20 USING POVRT200 (200% POVERTY CUTOFF DISPLAY AMOUNT);**

**ELSE GO TO PROGRAMMING NOTE QA11\_K21**

**QA11\_K20** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT200}?

**AK18B**

EQUAL TO OR LESS .....	1	<b>[GO TO PN QA11_K23]</b>
MORE .....	2	<b>[GO TO PN QA11_K23]</b>
REFUSED .....	-7	<b>[GO TO PN QA11_K23]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA11_K23]</b>

**PROGRAMMING NOTE QA11\_K21:**

**IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14, THEN CONTINUE WITH QA11\_K21 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT);  
ELSE GO TO PROGRAMMING NOTE QA11\_K23**

**QA11\_K21** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT300}?

**AK18C**

EQUAL TO OR LESS .....	1	[GO TO PN QA11_K23]
MORE .....	2	[GO TO PN QA11_K23]
REFUSED .....	-7	[GO TO PN QA11_K23]
DON'T KNOW .....	-8	[GO TO PN QA11_K23]

**PROGRAMMING NOTE QA11\_K22:**

**IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11\_K10, QA11\_K12, OR QA11\_K14, THEN CONTINUE WITH QA11\_K22 USING POVRT400 (400% POVERTY CUTOFF DISPLAY AMOUNT);  
ELSE GO TO PROGRAMMING NOTE QA11\_K23**

**QA11\_K22** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT400}?

**AK31**

EQUAL TO OR LESS .....	1
MORE .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_K23:**

**IF POVERTY < 3 (HH Income ≤ 200% FPL) OR 5 (HH INCOME NOT KNOWN), THEN CONTINUE WITH QA11\_K23;  
ELSE GO TO QA11\_L1**

**QA11\_K23** These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months. The first statement is: "The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

**AM1**

OFTEN TRUE .....	1
SOMETIMES TRUE .....	2
NEVER TRUE .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_K24**

The second statement is:  
 "{I/We} couldn't afford to eat balanced meals."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

**AM2**

OFTEN TRUE .....1  
 SOMETIMES TRUE .....2  
 NEVER TRUE .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_K25**

Please tell me yes or no. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

**AM3**

YES .....1  
 NO .....2 [GO TO QA11\_K27]  
 REFUSED .....-7 [GO TO QA11\_K27]  
 DON'T KNOW .....-8 [GO TO QA11\_K27]

**QA11\_K26**

How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?

**AM3A**

ALMOST EVERY MONTH .....1  
 SOME MONTHS BUT NOT EVERY MONTH .....2  
 ONLY IN 1 OR 2 MONTHS .....3  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_K27**

In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

**AM4**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_K28**

In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

**AM5**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

## Section L - Public Program Participation

### PROGRAMMING NOTE FOR BEGINNING OF SECTION L:

IF HOUSEHOLD INCOME IS  $\leq$  300% FPL (POVERTY = 1, 2 OR 3) OR IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 5), THEN CONTINUE WITH SECTION L;  
ELSE GO TO QA11\_M1

**QA11\_L1** Are you now receiving TANF or CalWORKs?

**AL2**

[IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."]

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

### PROGRAMMING NOTE QA11\_L2:

IF SAMPLED TEEN IN HOUSEHOLD, THEN CONTINUE WITH QA11\_L2;  
ELSE GO TO QA11\_L3;

**QA11\_L2** Is (TEEN) now receiving TANF or CalWORKs?

**IAP1**

[IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."]

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**QA11\_L3** Are you receiving Food Stamp benefits, also known as CalFresh?

**AL5**

[IF NEEDED, SAY: "You receive benefits through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card."]

YES .....1  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_L4:**  
**IF ELIGIBLE TEEN IN HOUSEHOLD, THEN CONTINUE WITH QA11\_L4;**  
**ELSE GO TO QA11\_L5**

**QA11\_L4** Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?

**IAP2**

**[IF NEEDED, SAY: "You may receive benefits as stamps or through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA11\_L5** Are you receiving SSI?

**AL6**

**[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security".]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_L6:**  
**IF QA11\_A5 = 2 (FEMALE) AND [QA11\_E3 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)],**  
**THEN CONTINUE WITH QA11\_L6;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_L7**

**QA11\_L6** Are you on WIC?

**AL7**

**[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and children."]**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_L7:**

OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM QA11\_K15.

IF QA11\_K15 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT).

IF QA11\_K15 = 1, THEN DISPLAY \$3000;  
 IF QA11\_K15 = 2, THEN DISPLAY \$3000;  
 IF QA11\_K15 = 3, THEN DISPLAY \$3150;  
 IF QA11\_K15 = 4, THEN DISPLAY \$3300;  
 IF QA11\_K15 = 5, THEN DISPLAY \$3450;  
 IF QA11\_K15 = 6, THEN DISPLAY \$3600;  
 IF QA11\_K15 = 7, THEN DISPLAY \$3750;  
 IF QA11\_K15 = 8, THEN DISPLAY \$3900;  
 IF QA11\_K15 = 9, THEN DISPLAY \$4050;  
 IF QA11\_K15 ≥ 10, THEN DISPLAY \$4200;

IF QA11\_A16 = 1 (MARRIED) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN DISPLAY "your family's";  
 ELSE DISPLAY "your"

**QA11\_L7** Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?

**AL9**

YES .....1  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA11\_L8:**

IF QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";  
 ELSE IF [QA11\_A16 = 2 (LIVING WITH PARTNER) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";  
 ELSE DISPLAY "you"

**QA11\_L8** Did {you or your spouse/you or your partner/you} receive any money last month for alimony, child support, or money from a government or veteran program?

**AL15**

YES .....1  
 NO .....2 [GO TO PN QA11\_L10]  
 REFUSED .....-7 [GO TO PN QA11\_L10]  
 DON'T KNOW .....-8 [GO TO PN QA11\_L10]

**PROGRAMMING NOTE QA11\_L9:**

IF QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";  
 ELSE IF [QA11\_A16 = 2 (LIVING WITH PARTNER) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";  
 ELSE CONTINUE WITHOUT DISPLAYS

**QA11\_L9** What was the {combined} total amount that you {and your spouse/and your partner} received from all these sources last month?

**AL16**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [000001-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_L10:**

IF QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";  
 ELSE IF [QA11\_A16 = 2 (LIVING WITH PARTNER) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you"  
 ELSE DISPLAY "you"

**QA11\_L10** Did {you or your partner or both of you/you or your spouse or both of you/you} pay any alimony or child support last month?

**AL17**

YES, RESPONDENT PAID .....1

YES, SPOUSE/PARTNER PAID .....2

YES, BOTH PAID.....3

NO .....4

REFUSED ..... -7

DON'T KNOW ..... -8

[GO TO PN QA11\_L12]

[GO TO PN QA11\_L12]

[GO TO PN QA11\_L12]

**PROGRAMMING NOTE QA11\_L11:**

IF QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";  
 ELSE IF [QA11\_A16 = 2 (LIVING WITH PARTNER) OR QA11\_D16 = 1 OR QA11\_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";  
 ELSE DISPLAY "you"

**QA11\_L11** What was the total amount {you/your spouse/your partner/you both} paid in alimony or support last month?

**AL18**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\_\_\_\_\_ AMOUNT [000001-999995]

REFUSED ..... -7

DON'T KNOW ..... -8



**PROGRAMMING NOTE QA11\_L12:**

IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND QA11\_A16 = 1 (MARRIED) AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA11\_L12 AND DISPLAY "you or your spouse";

ELSE IF AGE ≥ 65 AND QA11\_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA11\_L12 AND DISPLAY "you or your partner";

ELSE IF AGE ≥ 65, THEN CONTINUE WITH QA11\_L12 AND DISPLAY "you";

ELSE GO TO PROGRAMMING NOTE QA11\_L14

**QA11\_L12** Did {you or your spouse/you or your partner/you} receive any Social Security or Pension payments last month?

**AL18A**

YES .....	1	
NO .....	2	[GO TO PN QA11_L14]
REFUSED .....	-7	[GO TO PN QA11_L14]
DON'T KNOW .....	-8	[GO TO PN QA11_L14]

**QA11\_L13** What was the total amount received last month from Social Security and Pensions?

**AL18B**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\_\_\_\_\_ AMOUNT [000001-999995]

REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_L14:**

IF ARINSURE ≠ 1 (UNINSURED), THEN CONTINUE WITH QA11\_L14;

ELSE GO TO QA11\_M1

**QA11\_L14** What is the one main reason why you are not enrolled in the Medi-Cal program?

**AL19**

PAPERWORK TOO DIFFICULT .....	1
DIDN'T KNOW IF ELIGIBLE .....	2
INCOME TOO HIGH, NOT ELIGIBLE .....	3
NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS .....	4
OTHER NOT ELIGIBLE .....	5
DON'T BELIEVE IN HEALTH INSURANCE .....	6
DON'T NEED IT BECAUSE HEALTHY .....	7
ALREADY HAVE INSURANCE .....	8
DIDN'T KNOW IT EXISTED.....	9
DON'T LIKE / WANT WELFARE .....	10
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

## Section M – Housing and Social Cohesion

**QA11\_M1** These next questions are about your housing and neighborhood.

**AK23**

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?

**[IF NEEDED, SAY: “A duplex is a building with 2 units.”]**

HOUSE .....1  
 DUPLEX .....2  
 BUILDING WITH 3 OR MORE UNITS .....3  
 MOBILE HOME .....4  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_M2** Do you own or rent your home?

**AK25**

OWN .....1  
 RENT .....2  
 OTHER ARRANGEMENT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_M3:**  
**IF AGE ≥ 65 AND QA11\_M2 = 1 (OWNS HOME), THEN CONTINUE WITH QA11\_M3**  
**ELSE GO TO QA11\_M4**

**QA11\_M3** Are you currently paying off a mortgage or loan on this home?

**AM37**

**[IF SPOUSE/PARTNER IS PAYING, CODE AS “YES”]**

YES .....1  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_M4** About how long have you lived at your current address?

**AM14**

\_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]  
 \_\_\_\_\_ YEARS [HR: 1 - AAGE]

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_M5:**

**IF QA11\_M4 ≥ 5 YEARS, THEN GO TO PROGRAMMING NOTE QA11\_M7;  
ELSE CONTINUE WITH QA11\_M5**

**QA11\_M5** About how long have you lived in your current neighborhood?

**AM15**

\_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]  
\_\_\_\_\_ YEARS [HR: 1 - AAGE]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_M6** The last time you moved, what was your main reason for moving?

**AM38**

CHANGE IN MARITAL/RELATIONSHIP STATUS...1

TO ESTABLISH OWN HOUSEHOLD.....2

FOR CHILD'S EDUCATION .....3

TO ATTEND OR LEAVE COLLEGE .....4

WORK RELATED .....5

COULDN'T AFFORD MORTGAGE/RENT .....6

OTHER HOUSING RELATED .....7

BETTER NEIGHBORHOOD/LESS CRIME .....8

OTHER..... 91

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_M7:**

**IF QA11\_M7 THROUGH QA11\_M10 NOT ANSWERED IN CHILD INTERVIEW, THEN CONTINUE WITH QA11\_M7;  
ELSE GO TO QA11\_M11**

**QA11\_M7** Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

People in my neighborhood are willing to help each other.

**AM19**

**[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]**

**[DO NOT PROBE A "DON'T KNOW" RESPONSE.]**

STRONGLY AGREE.....1

AGREE.....2

DISAGREE.....3

STRONGLY DISAGREE.....4

REFUSED ..... -7

DON'T KNOW ..... -8

**QA11\_M8** People in this neighborhood can be trusted.

**AM21**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

["DO NOT PROBE A "DON'T KNOW" RESPONSE.]

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 REFUSED.....-7  
 DON'T KNOW.....-8

**QA11\_M9** You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble.

**AM35**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

["DO NOT PROBE A "DON'T KNOW" RESPONSE.]

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 REFUSED.....-7  
 DON'T KNOW.....-8

**QA11\_M10** Do you feel safe in your neighborhood...

**AK28**

All of the time, .....1  
 Most of the time,.....2  
 Some of the time, or.....3  
 None of the time.....4  
 REFUSED.....-7  
 DON'T KNOW.....-8

**QA11\_M11** In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

**AM36**

YES.....1  
 NO.....2  
 REFUSED.....-7  
 DON'T KNOW.....-8

**QA11\_M12** In the past 12 months, have you served as a volunteer on any local board, council, or organization that deals with community problems?

**AM39**

YES.....1  
 NO.....2  
 REFUSED.....-7  
 DON'T KNOW.....-8

**QA11\_M13**

In the past 12 months, have you gotten together informally with others to deal with community problems?

**AM40**

**[IF NEEDED SAY: For example, with a neighborhood watch group.]**

YES .....1  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

## Section S – Suicide Ideation and Attempts

**QA11\_S1** The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

Have you ever seriously thought about committing suicide?

**AF86**

YES .....	1	
NO .....	2	[GO TO PN QA11_N1]
REFUSED .....	-7	[GO TO PN QA11_N1]
DON'T KNOW .....	-8	[GO TO PN QA11_N1]

**QA11\_S2** Have you seriously thought about committing suicide at any time in the past 12 months?

**AF87**

YES .....	1	
NO .....	2	[GO TO QA11_S4]
REFUSED .....	-7	[GO TO QA11_S4]
DON'T KNOW .....	-8	[GO TO QA11_S4]

**QA11\_S3** Have you seriously thought about committing suicide at any time in the past 2 months?

**AF91**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_S4** Have you ever attempted suicide?

**AF88**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_S5:**

**IF QA11\_S2 = 1 (SERIOUSLY THOUGHT ABOUT SUICIDE IN PAST 12 MONTHS) AND QA11\_S4 = 1 (EVER ATTEMPTED SUICIDE), THEN CONTINUE WITH QA11\_S5;  
ELSE GO TO SUICIDE RESOURCE**

**QA11\_S5** Have you attempted suicide at any time in the past 12 months?

**AF89**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**SUICIDE RESOURCE:**

We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. The number is 1-800-273-TALK (8255).

Or, you can visit a website to find out information about getting help. The website address is [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org).

**POST-NOTE FOR SUICIDE RESOURCE:**

**IF QA11\_S2 = (2, -7, -8) AND QA11\_S4 = (2, -7, -8), THEN GO TO PROGRAMMING NOTE QA11\_N1 (NEXT SECTION);**

**ELSE CONTINUE WITH QA11\_S6**

**QA11\_S6**      Would you like to discuss your thoughts with this person?

**AF90**

YES .....	1	[GO TO SUICIDE PROTOCOL]
NO .....	2	[GO TO PN QA11_N1]
REFUSED .....	-7	[GO TO PN QA11_N1]
DON'T KNOW .....	-8	[GO TO PN QA11_N1]

## Section N –Demographic Information Part III and Closing

**PROGRAMMING NOTE QA11\_N1:**  
**IF NOT ALREADY ASKED IN CHILD INTERVIEW, CONTINUE WITH QA11\_N1;**  
**ELSE GO TO QA11\_N7**

**QA11\_N1** Just a few final questions and then we are done.

To be sure we are covering the entire state, what county do you live in?

**AH42**

ALAMEDA .....	1
ALPINE .....	2
AMADOR .....	3
BUTTE .....	4
CALAVERAS.....	5
COLUSA .....	6
CONTRA COSTA.....	7
DEL NORTE.....	8
EL DORADO .....	9
FRESNO .....	10
GLENN .....	11
HUMBOLDT .....	12
IMPERIAL .....	13
INYO .....	14
KERN .....	15
KINGS .....	16
LAKE .....	17
LASSEN .....	18
LOS ANGELES.....	19
MADERA.....	20
MARIN.....	21
MARIPOSA .....	22
MENDOCINO.....	23
MERCED.....	24
MODOC .....	25
MONO .....	26
MONTEREY .....	27
NAPA .....	28
NEVADA .....	29
ORANGE.....	30
PLACER.....	31
PLUMAS .....	32
RIVERSIDE .....	33
SACRAMENTO.....	34
SAN BENITO .....	35
SAN BERNARDINO.....	36
SAN DIEGO .....	37
SAN FRANCISCO.....	38
SAN JOAQUIN.....	39
SAN LUIS OBISPO.....	40
SAN MATEO .....	41
SANTA BARBARA.....	42
SANTA CLARA .....	43
SANTA CRUZ .....	44



SHASTA.....	45
SIERRA.....	46
SISKIYOU .....	47
SOLANO .....	48
SONOMA .....	49
STANISLAUS.....	50
SUTTER.....	51
TEHAMA .....	52
TRINITY .....	53
TULARE .....	54
TUOLUMNE .....	55
VENTURA .....	56
YOLO .....	57
YUBA .....	58
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_N2:**  
**IF ADVANCE LETTER SENT, ASK QA11\_N2;**  
**IF R'S ADDRESS IS A P.O. BOX, GO TO QA11\_N3;**  
**ELSE GO TO QA11\_N3**

**QA11\_N2** Your phone number was randomly selected for this study by a computer. We were able to match an address to your phone number to send a letter to your home explaining the purpose of this study. To help us better understand the environment you live in and how it may affect your health, we would like to confirm your address. This information will be kept confidential and will be destroyed after the entire survey has been completed.

Do you now live at {R's ADDRESS AND STREET}?

**A01**

YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**[GO TO QA11\_N6]**

**QA11\_N3** What is your zip code?

**AM7**

\_\_\_\_\_ ZIP CODE

REFUSED .....	-7
DON'T KNOW .....	-8

**QA11\_N4** To help us better understand the environment you live in and how it may affect your health, please tell me the address where you live. This information will be kept confidential and will be destroyed after the entire survey has been completed.

**AO2**

\_\_\_\_\_ HOUSE ADDRESS NUMBER  
 \_\_\_\_\_ NAME OF STREET (VERIFY SPELLING) **[GO TO QA11\_N6]**  
 \_\_\_\_\_ STREET TYPE  
 \_\_\_\_\_ APT. NO

REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA11\_N5** Can you tell me just the name of the street you live on?

**AM8**

\_\_\_\_\_ NAME OF STREET

REFUSED ..... -7 **[GO TO PN QA11\_N7]**  
 DON'T KNOW ..... -8 **[GO TO PN QA11\_N7]**

**QA11\_N6** And what is the name of the street down the corner from you that crosses your street?

**AM9**

\_\_\_\_\_ NAME OF CROSS-STREET

REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_N7:**  
**IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QA11\_N11;**  
**ELSE CONTINUE WITH QA11\_N7**

**QA11\_N7** I won't ask you for the number, but do you have a working cell phone?

**AM33**

**[CODE "SHARES CELL PHONE" ONLY IF VOLUNTEERED]**

YES .....1  
 NO .....2  
 SHARES CELL PHONE .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA11\_N8:**  
**IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE QA11\_N10;**  
**ELSE CONTINUE WITH QA11\_N8**

**QA11\_N8** Is there a regular or landline telephone in your household?

**AN6**

YES .....	1	
NO .....	2	[GO TO PN QA11_N10]
REFUSED .....	-7	[GO TO PN QA11_N10]
DON'T KNOW .....	-8	[GO TO PN QA11_N10]

**QA11\_N9** Is that telephone for personal use or business use only?

**AN7**

PERSONAL USE ONLY .....	1
BUSINESS USE ONLY .....	2
BOTH PERSONAL USE AND BUSINESS USE .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_N10:**  
**IF QA11\_N7 = 1 OR 3 (HAS CELL PHONE OR SHARES CELL PHONE) OR QA11\_N9 = 1 OR 3 (LANDLINE IS FOR PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH QA11\_N10;**  
**ELSE GO TO PROGRAMMING NOTE QA11\_N11**

**QA11\_N10** Of all the telephone calls that you receive, are...

**AM34**

All or almost all calls received on a cell phone, .....	1
Some on cell phones & some on regular phones, or .....	2
Very few or none on cell phones .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA11\_N11:**  
**IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;**  
**ELSE CONTINUE WITH QA11\_N11**

**QA11\_N11** Finally, do you think you would be willing to do a follow-up to this survey some time in the future?

**AM10**

YES .....	1
MAYBE/PROBABLY YES .....	2
DEFINITELY NOT .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE SUICIDE RESOURCE 2:**

**IF QA11\_S6 = (2, -7, -8) AND [QA11\_S3 = 1 OR (QA11\_S3 = 2, -7, -8 AND QA11\_S5=1)], THEN CONTINUE WITH SUICIDE RESOURCE 2;  
ELSE GO TO PROGRAMMING NOTE CLOSE1**

**SUICIDE RESOURCE 2:**

As I mentioned earlier, if you'd like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. The toll-free number is 1-800-273-TALK (8255).

Or you can visit their website at [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)

**QA11\_N12** Would you like to speak with someone now?

**AN8**

YES .....	1	<b>[GO TO SUICIDE PROTOCOL]</b>
NO .....	2	<b>[GO TO PN CLOSE1 ]</b>
REFUSED .....	-7	<b>[GO TO PN CLOSE1 ]</b>
DON'T KNOW .....	-8	<b>[GO TO PN CLOSE1 ]</b>

**PROGRAMMING NOTE CLOSE1:**

**IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, GO TO CLOSE2;  
ELSE CONTINUE WITH CLOSE1**

**CLOSE1** Let me check to see if there is anyone else. **[GO TO HHSELECT]**

**CLOSE2** Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. E. Richard Brown, the Principal Investigator. Dr. Brown can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.