2008 (CATI) SURVEY OF VETERAN ENROLLEES'
HEALTH AND RELIANCE UPON VA

INTENDED AUDIENCE: Priority 1 through 8 veterans who have applied or are currently enrolled for VA health care services.

TIME BEGUN_____

Hello, my name is <interviewer first and last name.> I'm calling on behalf of VA, the Department of Veteran Affairs. May I speak with <INSERT NAME>?

01   (SKIP TO INTRO) RESPONDENT AVAILABLE
02   (SKIP TO CALLBACK) RESPONDENT NOT AVAILABLE
03   (SKIP TO **PROXY**) RESPONDENT UNABLE TO DO INTERVIEW
             PHYSICAL/MENTAL HEALTH REASON
04   DO NOT KNOW RESPONDENT/DO NOT RECOGNIZE NAME – MAKE A WRONG NUMBER
05   (SKIP TO BADNUM) RESPONDENT NOT AT NUMBER
06   TERMINATION SCREEN

BADNUM Do you have a telephone number where I might be able to reach <INSERT NAME>?

01   YES – MAKE NEW NUMBER DISPOSITION, COLLECT TELEPHONE NUMBER
02   NO – MAKE NO NUMBER AVAILABLE
03   NO – WILL NOT RELEASE TELEPHONE NUMBER

INTRODUCTION: We are conducting a study about veteran's use of health care services and needs. Your name was randomly selected from a list of veterans who enrolled to use VA health care services. This study will take 10-15 minutes. Everything we talk about will be confidential, although this call may be monitored for quality assurance. Your participation is voluntary – you can choose not to answer any question. Your benefits will not change as a result of your answering any questions. If you chose not to participate, or answer a question, your benefits will **also** not be affected. However, your participation is important for this study's success – we need to talk to veterans like you. Would now be a good time?

IF NECESSARY MORE INFORMATION: This survey is about how many veterans use VA services and what types of services they do or do not use.

IF NECESSARY CONFIDENTIALITY: Your name and answers will be linked. However, VA will protect your identity and answers to the extent allowed under the law. Your answers will in no way affect your benefits. No information that you provide will be released to the general public in a way that can be traced back to you.

> **ONLY** IF LEGITIMACY IS QUESTIONED READ: This survey has been reviewed and approved by the VHA Office of the Assistant Deputy Under Secretary for Health and the Office of Management and Budget. If you have any questions regarding the legitimacy of this survey, you may call _____ at the Department of Veterans Affairs in Washington, D.C. at ___ ___ ___.

PROXY We are conducting a study about veteran's use of health care services and needs. <INSERT NAME> was randomly selected from a list of veterans who enrolled to use VA health care services. This is an important study, would you be able to answer questions about <INSERT NAME>'s health care, insurance and health status?

IF NECESSARY MORE INFORMATION: This survey is about how many veterans use VA services and what types of services they do or do not use.

IF NECESSARY CONFIDENTIALITY: Your name and answers will be linked. However, VA will protect your identity and answers to the extent allowed under the law. Your answers will in no way affect your benefits. No information that you provide will be released to the general public in a way that can be traced back to you.

ONLY IF LEGITIMACY IS QUESTIONED READ: This survey has been reviewed and approved by the VHA Office of the Assistant Deputy Under Secretary for Health and the Office of Management and Budget. If you have any questions regarding the legitimacy of this survey, you may call _____ at the Department of Veterans Affairs in Washington, D.C. at ___ ___ ___.

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01   YES – CREATE VARIABLE "**PROXY**= 01 IF **PROXY** INTERVIEW AND 00 IF NOT **PROXY**"
02   NO – TERMINATE CREATE DISPOSITIN NO ELIGIBLE **PROXY**, RESPONDENT UNABLE

98   DON'T KNOW – TERMINATE CREATE DISPOSITION NO ELIGIBLE **PROXY**, RESPONDENT UNABLE
99   REFUSED – TERMINATE **PROXY** REFUSAL

PROXY_2 This study will take 10-15 minutes. Everything we talk about will be confidential, although this call may be monitored for quality assurance. Your participation on behalf of <INSERT NAME> is voluntary – you can choose not to answer any question. <INSERT NAME> benefits will not change as a result of your answering any questions. If you chose not to participate, or answer a question, <INSERT NAME> benefits will **also** not be affected. However, your participation on behalf of <INSERT NAME> is important for this study's success – we need to talk to veterans like <INSERT NAME>. Would now be a good time?

IF NECESSARY MORE INFORMATION: This survey is about how many veterans use VA services and what types of services they do or do not use.

IF NECESSARY CONFIDENTIALITY: Your name and answers will be linked. However, VA will protect your identity and answers to the extent allowed under the law. Your answers will in no way affect your benefits. No information that you provide will be released to the general public in a way that can be traced back to you.

ONLY IF LEGITIMACY IS QUESTIONED READ: This survey has been reviewed and approved by the VHA Office of the Assistant Deputy Under Secretary for Health and the Office of Management and Budget. If you have any questions regarding the legitimacy of this survey, you may call _____ at the Department of Veterans Affairs in Washington, D.C. at ___ ___ ___.

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01   (SKIP TO RESIDE) YES
02   (SKIP TO CALLBACK) NO

RESIDE Does <INSERT NAME> still live at this telephone number or somewhere else?

01   (SKIP TO RELATION) STILL AT LOCATION
02   DIFFERENT LOCATION

98   DON'T KNOW
99   REFUSED

RESIDE_1 In what state does <INSERT NAME> live?

/PROVIDE LIST OF STATE NAMES/

98   DON'T KNOW
99   REFUSED

RELATION Before we begin, could you tell me how you would describe your relationship to <INSERT NAME>? I am going to read you a list. Are you <INSERT NAME>'s…

01   Spouse

02   Significant other
03   Parent
04   Sibling
05   Child
06   Some other relative
07   Friend
08   Caregiver
09   Guardian or Attorney
10   Social Worker or Case Worker

97   Some other relation
98   DON'T KNOW
99   REFUSED

CALLBACK When would be a convenient time to call back and speak with <INSERT NAME>?

/IF **PROXY**=01/ When would be a convenient time to call back <INSERT NAME>?

01   MAKE APPOINTMENT 104
02   CALL BACK ANYTIME 105

PREQ1 Many of the following questions may be simply answered as either yes or no. However, if you are unsure about it, just let me know and I will note that.

Next , I will be asking you about use of medical or mental health services in from both Non-VA sources, as well as from VA. First, my questions are about <u>Non</u>-VA provided Health Care Services.

/IF **PROXY**=01/ *Next, I will be asking you about <INSERT NAME>'s use of medical or mental health services in from both Non-VA sources, as well as from VA. First, my questions are about <u>Non</u>-VA provided Health Care Services.*

Q1.   In **2007**, did you use **any** medical or mental health care services that were **not** provided by or paid for by VA? Please include **ANY** service at all, such as a flu shot, a single prescription, a test of some sort, etc.

/IF **PROXY**=01/ In **2007**, did <INSERT NAME> use **any** medical or mental health care services that were **not** provided by or paid for by VA? Please include **ANY** service at all, such as a flu shot, a single prescription, a test of some sort, etc.

[**INTERVIEWER NOTE**: "NO NEED FOR SERVICES AT ALL" ONLY MARK IF SPONTANEOUSLY VOLUNTEERED BY RESPONDENT.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

00   (SKIP TO Q25) NO NEED FOR SERVICES AT ALL
01   (SKIP TO Q2) YES
02   NO

98   DON'T KNOW
99   REFUSED

//IF Q1=2, 98, 99 AND [----------has non-VA health insurance] THEN ASK, ELSE SKIP TO Q14//

Q1a. **VALIDATION:** I earlier I thought you said that you **do have** some type of Non-VA medical coverage. Just to make sure I have this right, I want to confirm that in **2007**, you **never r**eceived **any** type of medical service, including flu shot, prescription, physical check-up or test or mental health services or assistance that was **not** provided or paid for by VA.

/IF **PROXY** =01/ I earlier I thought you said that <INSERT NAME> **does have** some type of Non-VA medical coverage. Just to make sure I have this right, I want to confirm that in **2007**, <INSERT NAME> **never r**eceived **any** type of medical service, including flu shot, prescription, physical check-up or test or mental health services or assistance that was **not** provided or paid for by VA.

[**INTERVIEWER NOTE**: "NO NEED FOR SERVICES AT ALL" ONLY MARK IF SPONTANEOUSLY VOLUNTEERED BY RESPONDENT.]

00   (SKIP TO Q25) NO NEED FOR SERVICES AT ALL
01   (SKIP TO Q2) DID USE NON-VA SERVICE
02   (SKIP TO Q14) CONFIRMED THAT NO NON-VA CARE RECEIVED

98   (SKIP TO Q14) DON'T KNOW/CAN'T REMEMBER
99   (SKIP TO Q14) REFUSED

Q2. In **2007**, did you stay overnight at any **Non**-VA Medical Hospital or a **Non**-VA Mental Health Facility?

/IF **PROXY**=01/ In **2007**, did <INSERT NAME> stay overnight at any **Non**-VA Medical Hospital or a **Non**-VA Mental Health Facility?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

01   YES
02   (SKIP TO Q11) NO

98   (SKIP TO Q11) DON'T KNOW/DON'T REMEMBER
99   (SKIP TO Q11) REFUSED

Q3. Were any of these stays paid for or provided by VA?

/IF **PROXY**=01/ Were any of these stays paid for or provided by VA?

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PORTION.]

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

01   YES
02   (SKIP TO Q5) NO

98   (SKIP TO Q5) DON'T KNOW
99   (SKIP TO Q5) REFUSED

Q4. Were any of these stays **not** paid for or provided by VA?

/IF **PROXY**=01/ Were any of these stays **not** paid for or provided by VA?

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PORTION.]

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

01 YES
02 (SKIP TO Q11) NO, ALL VA PROVIDED

98 (SKIP TO Q11) DON'T KNOW/ DON'T REMEMBER
99 (SKIP TO Q11) REFUSED

PREQ5/IF Q4=01, ELSE GOTO Q11/ For the next group of questions, I would like you to only think about all of the stays you have just mentioned that were **not** paid for by VA.

/IF **PROXY**=01 AND IF Q4=01, ELSE GOTO Q11/ For the next group of questions, I would like you to only think about all of <INSERT NAME>'s stays you have just mentioned that were **not** paid for by VA.

Q5. In **2007**, how many overnight stays, if any, did you have at any Non-VA Medical Hospital. Please do not count stays for mental health or substance abuse treatment?

/IF **PROXY**=01/ In **2007**, how many overnight stays, if any, did <INSERT NAME> have at any Non-VA Medical Hospital. Please do not count stays for mental health or substance abuse treatment?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

01 ENTER NUMBER _____ [RANGE= 0 – 366]

98 DON'T KNOW
99 REFUSED

/IF Q5=0, 98, OR 99 GOTO Q8, ELSE CONTINUE/

Q6. /IF Q5=1, ASK/ How many nights was that stay?
/IF Q5>1 ASK/ How many nights was your first stay?

/IF **PROXY**=01 AND Q5=1, ASK/ How many nights was that stay?
/IF **PROXY**=01 AND Q5>1 ASK/ How many nights was <INSERT NAME>'s first stay?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

01 ENTER NUMBER _____ [RANGE= 0 – 366]

98 DON'T KNOW
99 REFUSED

/IF Q5=1 GOTO Q8/

Q7. /IF Q5>1 ASK/ In **2007**, how many nights in total did you stay in a Non-VA Hospital on your 2nd through /Q5/ stays?

/IF **PROXY**=01 AND Q5>1 ASK/ In **2007**, how many nights in total did <INSERT NAME> stay in a Non-VA Hospital on the 2nd through /Q5/ stays?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

[**INTERVIEWER NOTE**: THIS IS THE TOTAL NUMBER OF NIGHTS FOR ALL STAYS. IF NECESSARY WALK THEM THROUGH THE MATH.]

01   ENTER NUMBER _____ [RANGE=0 –366]

98   DON'T KNOW
99   REFUSED

Q8.   In **2007**, how many stays for mental health or substance abuse treatment, if any, did you have at any Non-VA Mental Health Facility, or other Non-VA medical facility? Please do not count any stays paid for by VA.

/IF **PROXY**=01/ In **2007**, how many stays for mental health or substance abuse treatment, if any, did <INSERT NAME> have at any Non-VA Mental Health Facility, or other Non-VA medical facility? Please do not count any stays paid for by VA.

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0- 366]

98   DON'T KNOW
99   REFUSED

/IF Q8=0, 98, 99 GOTO Q11, ELSE CONTINUE/

Q9.   /IF Q8=1 ASK/ How many nights was that stay?

/IF Q8>1 ASK/ How many nights was your first stay?

/IF **PROXY**=01AND Q8=1 ASK/ How many nights was that stay?

/IF **PROXY**=01 AND Q8>1 ASK/ How many nights was <INSERT NAME>'s first stay?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

01   ENTER NUMBER _____ [RANGE=0- 366]

98   DON'T KNOW
99   REFUSED

/IF Q8=1 GOTO Q11, ELSE CONTINUE/

Q10.   In **2007**, how many nights **in total** did you stay in a Non-VA Facility for mental health or substance abuse treatment on your second through /Q8 RESPONSE/ stays?

/IF **PROXY**=01/ In **2007**, how many nights **in total** did <INSERT NAME> stay in a Non-VA Facility for mental health or substance abuse treatment on the second through /Q8 RESPONSE/ stays?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL.]

[**INTERVIEWER NOTE**: THIS IS THE TOTAL NUMBER OF NIGHTS FOR ALL STAYS. IF NECESSARY WALK THEM THROUGH THE MATH.]

01   ENTER NUMBER _____ [RANGE=0 -366]

98   DON'T KNOW
99   REFUSED

Q11.   In **2007**, how many outpatient visits or trips, did you make to any Non-VA doctor's office, hospital, or outpatient clinic? Please do not count dental, mental health, substance abuse visits or any visits paid for by VA?

/IF **PROXY**=01/ In **2007**, how many outpatient visits or trips, did <INSERT NAME> make to any Non-VA doctor's office, hospital, or outpatient clinic? Please do not count dental, mental health, substance abuse visits or any visits paid for by VA?

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0- 366]

98   DON'T KNOW
99   REFUSED

Q12.   In **2007**, how many home health care visits, if any, were made to you by **Non**-VA providers or not paid for by VA?

/IF **PROXY**=01/ In **2007**, how many home health care visits, if any, were made to <INSERT NAME> by **Non**-VA providers or not paid for by VA?

[**INTERVIEWER NOTE**: THIS IS THE SUM OF ALL INDIVIDUAL PROVIDER'S VISITS.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER: _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

Q13.   In **2007**, how many outpatient visits or trips for mental health or substance abuse treatment did you make to a **Non**-VA Mental Health or Substance Abuse Facility or Doctor's office? Please do not count visits paid for by VA.

/IF **PROXY**=01/ In **2007**, how many outpatient visits or trips for mental health or substance abuse treatment did <INSERT NAME> make to a **Non**-VA Mental Health or Substance Abuse Facility or Doctor's office? Please do not count visits paid for by VA.

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER: _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

PREQ14 Now, the next few questions are in regards to any <u>VA provided Healthcare</u>.

Q14. In **2007**, did you use **any** VA healthcare services, or did you have **any** of your health care paid for by VA?

/IF **PROXY**=01/ In **2007**, did <INSERT NAME> use **any** VA healthcare services, or did <INSERT NAME> have **any** health care paid for by VA?

IF NECESSARY: Please include **ANY** service at all such as a flu shot, a single prescription, a test, etc…

[**INTERVIEWER NOTE**: "NO NEED FOR SERVICES AT ALL" ONLY MARK IF SPONTANEOUSLY VOLUNTEERED BY RESPONDENT.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

00   (SKIP TO Q25) NO NEED FOR SERVICES AT ALL

01   YES
02   NO

98   DON'T KNOW
99   REFUSED

Q14 VALIDATION: /IF Q14=02 0R 98 OR 99 ASK, ELSE CONTINUE/ Just to make sure I have this correct, in you did not receive **ANY** health care services at all from VA. You did not get a flu shot, a single prescription, any tests, to any other health care service for which VA paid any portion of?

/IF **PROXY**=01 AND IF Q14=02 0R 98 OR 99 ASK, ELSE CONTINUE/ Just to make sure I have this correct, in **2007** <INSERT NAME> did not receive **ANY** health care services at all from VA. <INSERT NAME> did not get a flu shot, a single prescription, any tests, to any other health care service for which VA paid any portion of?

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   (SKIP TO Q25) YES
02   NO

98   (SKIP TO Q25) DON'T KNOW
99   (SKIP TO Q25) REFUSED

Q15. In **2007**, did you stay overnight at any VA Medical Hospital or a VA Mental Health Facility, or **have any** stays at Non-VA facilities that were paid for by VA?

/IF **PROXY**=01/ In **2007**, did <INSERT NAME> stay overnight at any VA Medical Hospital or a VA Mental Health Facility, or **have any** stays at Non-VA facilities that were paid for by VA?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   YES
02   (SKIP TO Q22) NO

98   (SKIP TO Q22) DON'T KNOW
99   (SKIP TO Q22) REFUSED

Q16.   In **2007**, how many total overnight stays, if any, did you have at a VA Medical Hospital, or a medical hospital paid for by VA? Please do not count stays for mental health and substance abuse treatment?

>   /IF **PROXY**=01/ In **2007**, how many total overnight stays, if any, did <INSERT NAME> have at a VA Medical Hospital, or a medical hospital paid for by VA? Please do not count stays for mental health and substance abuse treatment?

>   [**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

>   [**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

/IF Q16=0, 98, 99 GOTO Q19, ELSE CONTINUE/

Q17.   /IFQ16=1 ASK/ How many nights was that stay?

>   /IF Q16>1 ASK/ How many nights was that first stay?

>   /IF **PROXY**=01 AND Q16=1 ASK/ How many nights was that stay?

>   / IF **PROXY**=01 AND Q16>1 ASK/ How many nights was <INSERT NAME>'s first stay?

>   [**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

/IF Q16=1 GOTO Q19, ELSE CONTINUE/

Q18.   In **2007**, how many nights **in total** did you stay in a VA Medical Hospital or other hospitals paid for by VA on your second through /Q16 RESPONSE/ stays?

>   /IF **PROXY**=01/ In **2007**, how many nights **in total** did <INSERT NAME> stay in a VA Medical Hospital or other hospitals paid for by VA on the second through /Q16 RESPONSE/ stays?

>   [**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

>   [**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

[**INTERVIEWER NOTE**: THIS IS THE TOTAL NUMBER OF NIGHTS FOR ALL STAYS. IF NECESSARY WALK THEM THROUGH THE MATH.]

01   ENTER NUMBER _____ [RANGE=0 -366]

98   DON'T KNOW
99   REFUSED

Q19.   In **2007**, how many overnight stays, if any, did you have for mental health or substance abuse treatment at a VA Facility or at a facility paid for by VA?

/IF **PROXY**=01/ In **2007**, how many overnight stays, if any, did <INSERT NAME> have for mental health or substance abuse treatment at a VA Facility or at a facility paid for by VA?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

/IF Q19=0, 98, 99 GOTO Q22, ELSE CONTINUE/

Q20.   / IF Q19 =1 ASK/ How many nights was that stay?

/IF Q19>1 ASK/ How many nights was your first stay?

/IF **PROXY**=01 AND Q19 =1 ASK/ How many nights was that stay?

/IF **PROXY**=01 AND Q19>1 ASK/ How many nights was <INSERT NAME>'s first stay?

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

/IF Q19=1 GO TO Q22, ELSE CONTINUE/

Q21.   In **2007**, how many nights **in total** did you stay in a VA Facility, or stays elsewhere that were paid for by VA for mental health or substance abuse care on your second through /Q19 RESPONSE/ stays?

/IF **PROXY**=01/ In **2007**, how many nights **in total** did <INSERT NAME> stay in a VA Facility, or stays elsewhere that were paid for by VA for mental health or substance abuse care on the second through /Q19 RESPONSE/ stays

[**INTERVIEWER NOTE**: "STAY" IS A SINGLE TRIP INTO AND OUT, OR ADMISSION INTO AND DISCHARGE OUT OF THE HOSPITAL, **NOT** THE NUMBER OF DAYS THE PATIENT STAYED IN THE HOSPITAL.]

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

[**INTERVIEWER NOTE**: THIS IS THE TOTAL NUMBER OF NIGHTS FOR ALL STAYS. IF NECESSARY WALK THEM THROUGH THE MATH.]

01   ENTER NUMBER _____ [RANGE=0 -366]

98   DON'T KNOW
99   REFUSED

Q22.   In **2007**, how many outpatient visits for **medical** care did you make that were paid for by VA? That would include the number of times you went to a VA doctor, hospital or clinic for **medical** care or received **medical** care somewhere else that was paid for by VA. Do not count dental or mental health visits or trips to a pharmacy.

/IF **PROXY**=01/ In **2007**, how many outpatient visits for **medical** care did <INSERT NAME> make that were paid for by VA? That would include the number of times <INSERT NAME> went to a VA doctor, hospital or clinic for **medical** care or received **medical** care somewhere else that was paid for by VA. Do not count dental or mental health visits or trips to a pharmacy.

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=1-366]

98   DON'T KNOW
99   REFUSED

Q23.   In **2007**, how many home health care visits, if any, were made to you by VA providers or non-VA providers **paid for by VA**?

/IF **PROXY**=01/ In **2007**, how many home health care visits, if any, were made to <INSERT NAME> by VA providers or non-VA providers **paid for by VA**?

[**INTERVIEWER NOTE**: WE ARE LOOKING FOR THE SUM TOTAL OF ALL INDIVIDUAL PROVIDER VISITS.

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

Q24.   In **2007**, how many outpatient visits for mental health or substance abuse treatment, if any, did you make to VA or visits elsewhere that were paid for by VA?

/IF **PROXY**=01/ In **2007**, how many outpatient visits for mental health or substance abuse treatment, if any, did <INSERT NAME> make to VA or visits elsewhere that were paid for by VA?

[**INTERVIEWER NOTE**: PAID FOR INCLUDES ANY PART/PORTION OF.]

01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

Q25.   I am going to read you a list of possible ways you could use VA for your health care in the future. Please listen to them all, and then tell me the one that best describes the primary way you plan to use VA health care in the future. Do you plan to use VA as….

> /IF **PROXY**=01/ I am going to read you a list of possible ways <INSERT NAME> could use VA for health care in the future. Please listen to them all, and then tell me the one that best describes the primary way <INSERT NAME> plans to use VA health care in the future. Does <INSERT NAME> plan to use VA as
>
> [INTERVIEWER: PLEASE READ ENTIRE LIST. CHOOSE ONLY ONE.]

01   Your primary source of healthcare;
           /IF **PROXY**=01/ a primary source of healthcare

02   Backup to non-VA care for some minor services
           /IF **PROXY**=01/ As backup to non-VA care for some minor services

03   A "safety net" to use only if needed
04   For prescriptions;
05   For specialized care
06   Some other way;
07   Or do you have No plans to use VA for healthcare
           /IF **PROXY**=01/ Or does <INSERT NAME> have no plans to use VA for healthcare?

98   DON'T KNOW
99   REFUSED

Q25_O /IF Q25=06 ASK, ELSE CONTINUE/ Could you please tell me how you primarily plan to use VA for health care in the future?

> /IF **PROXY**=01/ Could you please tell me how <INSERT NAME> primarily plans to use VA for health care in the future?

01   ENTER RESPONSE: _____

98   DON'T KNOW
99   REFUSED

PREQ26 Now, I'd like to ask you about your current health.

> /IF **PROXY**=01/ Now, I'd like to ask you about <INSERT NAME>'s current health.

Q26.   Compared to other people your age, would you say your health is:

> /IF **PROXY**=01/ Compared to other people <INSERT AME>'s age, would you say <INSERT NAME>'s health is:
>
> [INTERVIEWER PLEASE READ LIST]

01   Excellent
02   Very good
03   Good
04   Fair, or
05   Poor

98   DON'T KNOW
99   REFUSED

The next few questions are about cigarette smoking.

Q27.   Have you smoked at least 100 cigarettes in your entire life?

/IF **PROXY**=01/ Has <INSERT NAME> smoked at least 100 cigarettes in <INSERT NAME>'s entire life?

01   YES
02   (SKIP TO Q30) NO

98   DON'T KNOW
99   REFUSED

Q28.   Do you now smoke cigarettes every day, some days, or not at all?

/IF **PROXY**=01/ Does <INSERT NAME> now smoke cigarettes every day, some days, or not at all?

01   Every day
02   Some days
03   Not at all

98   DON'T KNOW
99   REFUSED

Q29.   During the past 12 months, have you stopped smoking for more than one day because you were trying to quit smoking?

/IF **PROXY**=01/ During the past 12 months, has <INSERT NAME> stopped smoking for more than one day because <INSERT NAME> was trying to quit smoking?

01   YES
02   NO

98   DON'T KNOW
99   REFUSED

We are almost finished. The last questions are for demographic purposes only.

Q30. Which of the following best describes your current marital status?

/IF **PROXY**=01/ Which of the following best describes <INSERT NAME>'s current marital status?

[INTERVIEWER READ LIST.]

01   Married

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02   Widowed
03   Divorced
04   Separated
05   Single – Never Married

98   DON'T KNOW
99   REFUSED

Q31.   /IF Q30=01 OR 04 ASK/ Not including yourself, how many dependents, such as your spouse or dependent children do you currently have?

   /IF Q30 NE 01 OR 04 ASK/ Not including yourself, how many dependents, do you currently have?

   /IF **PROXY**=01AND Q30=01 OR 04 ASK/ Not including <INSERT NAME>, how many dependents, such as a spouse or dependent children does <INSERT NAME> currently have?

   /IF **PROXY**=01 AND Q30 NE 01 OR 04 ASK/ Not including <INSERT NAME>, how many dependents, does <INSERT NAME> currently have?

   [**INTERVIEWER NOTE**: "DEPENDENT" IS ANYONE WHO RELIES ON THE RESPONDENT FOR AT LEAST HALF OF THAT PERSON'S FINANCIAL SUPPORT.]
01   ENTER NUMBER _____ [RANGE=0-366]

98   DON'T KNOW
99   REFUSED

PERIOD OF SERVICE

Q32.   In the following, we would like to obtain some information on your active duty military history. Most veterans have served only one continuous tour of duty, with no breaks in service. A one time discharge from the military after continuous service is one term of service. However, some veterans have experienced breaks in service and thus have served multiple terms of service. How many terms of active duty military service have you served? Please do not include Reserve or National Guard training or drill periods unless "activated" at the time.

   /IF **PROXY**=01/ In the following, we would like to obtain some information on <INSERT NAME>'s active duty military history. Most veterans have served only one continuous tour of duty, with no breaks in service. A one time discharge from the military after continuous service is one term of service. However, some veterans have experienced breaks in service and thus have served multiple terms of service. How many terms of active duty military service has <INSERT NAME> served? Please do not include Reserve or National Guard training or drill periods unless "activated" at the time.

   [**INTERVIEWER NOTE**: WE ARE ONLY RECORDING THE FIRST SIX PERIODS.]

01   ENTER NUMBER _____
98   (SKIP TO Q34) DON'T KNOW
99   (SKIP TO Q34) REFUSED

Q32a.   /IFQ32 >1/I would like to ask you the year you started and ended each of these terms of active duty military service. Starting with your first…

   /IF Q32=1/ I would like to ask you the year you started and ended this term of active duty military service.

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/IF **PROXY**=01/I would like to ask you the year <INSERT NAME> started and ended each of these terms of active duty military service. Starting with <INSERT NAME's> first…

/IF **PROXY**=01 and Q32=1/I would like to ask you the year <INSERT NAME> started and ended this term of active duty military service.

/START LOOP EQUAL TO Q32/

Q32b_X What year did your <first> term of active duty military service start?

/IF Q32=1/ What year did your term of active duty military service start?

/IF **PROXY**=01/ What year did <INSERT NAME>'s <first> term of active duty military service start?

/IF **PROXY**=01 and Q32=1/ What year did <INSERT NAME>'s term of active duty military service start?

01   ENTER YEAR _____ [RANGE: >=1918]

98   DON'T KNOW
99   REFUSED

Q32c_X What year did your <first> term of active duty military service end?

/IF Q32=1/ What year did your term of active duty military service end?

/IF **PROXY**=01/ What year did <INSERT NAME>'s <first> term of active duty military service end?

/IF **PROXY**=01 and Q32=1/ What year did <INSERT NAME>'s term of active duty military service end?

01   ENTER YEAR _____

98   DON'T KNOW
99   REFUSED

COMBAT STATUS

Q33_X. During this term of military service were you ever in or exposed to combat?

/IF **PROXY**=01/ During this term of military service was <INSERT NAME> ever in or exposed to combat?

01   YES
02   NO

98   DON'T KNOW
99   REFUSED

/END LOOP/

EMPLOYMENT STATUS

Q34. How would you best characterize your employment status? I am going to read you a list. Please listen to all of the choices and then tell me which best describes you. Are you

01   Employed Fulltime
02   Self-employed fulltime
03   Employed part-time
04   Self employed part-time
05   Unemployed, looking for work, or laid off
06   Currently not employed – either retired, a homemaker, student, etc.

98   DON'T KNOW
99   REFUSED

ETHNICITY AND RACE

Q35. Would you describe yourself as Spanish, Hispanic, or Latino?

/IF **PROXY**=01/ Would you describe <INSERT NAME> as Spanish, Hispanic, or Latino?

01   YES
02   NO

98   DON'T KNOW
99   REFUSED

Q36. I am going to read you a list, please tell me which of the following describes your race? You can choose more than one. Are you …

/IF **PROXY**=01/ I am going to read you a list, please tell me which of the following describes <INSERT NAME>'s race? You can choose more than one….

[**INTERVIEWER NOTE**: PLEASE READ LIST.]

/MUL=5/

01   American Indian or Alaska Native
02   Asian
03   Black or African-American
04   Native Hawaiian or Other Pacific Islander
05   White

98   DON'T KNOW
99   REFUSED

HOUSEHOLD INCOME

Q37. Could you please tell me what your total annual household income was from all sources in **2007**.

/IF **PROXY**=01/ Could you please tell me what was <INSERT NAME>'s total annual household income was from all sources in **2007**.

[**IF NECESSARY**: I would like to remind you that everything we discuss is confidential, and that your answer to this question will not affect your benefits.]

[**IF NECESSARY**: Your best guess or estimate is fine.]

01   ENTER AMOUNT IN DOLLARS: _____ [RANGE=1-999,999]   SKIP TO Q37c.

98   DON'T KNOW
99   REFUSED

Q37a   This information is critical for VA for planning purposes. Could you please tell me which of the following best describes your **2007** total annual household income from all sources. Would you say it is…..

/IF **PROXY**=01/ This information is critical for VA for planning purposes. Could you please tell me which of the following best describes <INSERT NAME>'s **2007** total annual household income from all sources. Would you say it is…..

(READ LIST [ROUND UP "999"], THEN FOLLOW-UP AS INDICATED)

	a.		**b**. Is it….	
	Less than $16,000	1→	Under $11,000, or	1
			$11,000 - $15,999?	2
	$16,000 - $25,999,	2→	$16,000 – $20,999	3
			$21,000 - $25,999?	4
	$26,000 - $35,999,	3→	$26,000 – $30,999	5
			$31,000 - $35,999?	6
	$36,000 - $45,999,	4→	$36,000 – $40,999	7
			$41,000 - $45,999?	8
	$46,000 - $55,999, OR	5→	$46,000 – $50,999	9
			$51,000 - $55,999?	10
	$56,000 or over?	6	AUTO CODE $56,000+	11
OR	DON'T KNOW	7	DON'T KNOW	12
(Do Not Read)	REFUSED TO ANSWER	8	REFUSED TO ANSWER	13

Q37c. Can you please tell me which state you are in?

National list of two letter abbreviations and PR for Puerto Rico?

98   DON'T KNOW
99   REFUSED

That's all I have. Thank you for your participation. The information you have provided will help VA to better serve all veterans in the future.

TIME ENDED_____ _____

DATE OF INTERVIEW: _____
                   (MM/DD/YY)