

MEDICAL EXPENDITURE PANEL SURVEY

**HOUSEHOLD COMPONENT
MAIN STUDY**

**BLAISE/WVS
SHOW CARDS**

Panels 12, 13, and 14

January 2009

DRAFT

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CARD RE-1B

- Puerto Rican
- Cuban/Cuban American
- Dominican
- Mexican
- Mexican-American
- Central or South American

RE-1B

CARD RE-2B

- White
- Black/African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Other Pacific Islander

RE-2B

CARD RE-2C

- Asian Indian
- Chinese
- Filipino
- Japanese
- Korean
- Vietnamese

RE-2C

CARD RE-3A

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

<u>Yearly</u>	<u>Monthly</u>
A. less than \$11,300	less than \$942
B. \$11,300 – \$17,000	\$942 – \$1,417
C. \$17,001 – \$22,700	\$1,418 – \$1,892
D. \$22,701 – \$34,000	\$1,893 – \$2,833
E. more than \$34,000	more than \$2,833

RE-3A

CARD RE-3B

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$14,700	less than \$1,225
B.	\$14,700 – \$22,000	\$1,225 – \$1,833
C.	\$22,001 – \$29,300	\$1,834 – \$2,442
D.	\$29,301 – \$44,000	\$2,443 – \$3,667
E.	more than \$44,000	more than \$3,667

CARD RE-3C

Wages and Salaries	Social Security or Railroad Retirement	RE-3C
Interest or Dividends	Private, Military, or Government Pensions	
Retirement Income or Annuities	Survivor Benefits	
Public Assistance/TANF	Supplemental Security Income (SSI)	
Disability Benefits	Child Support or Alimony	
Farm or Business Income	Rental, Estate or Trust Income	
Unemployment or Workers Compensation	Financial assistance from outside household	

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$10,400	less than \$867
B.	\$10,400 – \$15,700	\$867 – \$1,308
C.	\$15,701 – \$20,900	\$1,309 – \$1,742
D.	\$20,901 – \$31,300	\$1,743 – \$2,608
E.	more than \$31,300	more than \$2,608

CARD RE-3D

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

RE-3D

Income Categories:

<u>Yearly</u>	<u>Monthly</u>
A. less than \$13,200	less than \$1,100
B. \$13,200 – \$19,800	\$1,100 – \$1,650
C. \$19,801 – \$26,400	\$1,651 – \$2,200
D. \$26,401 – \$39,500	\$2,201 – \$3,292
E. more than \$39,500	more than \$3,292

CARD RE-3E

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$17,400	less than \$1,450
B.	\$17,400 – \$26,000	\$1,450 – \$2,167
C.	\$26,001 – \$34,700	\$2,168 – \$2,892
D.	\$34,701 – \$52,100	\$2,893 – \$4,342
E.	more than \$52,100	more than \$4,342

RE-3E

CARD RE-3F

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

<u>Yearly</u>	<u>Monthly</u>
A. less than \$22,300	less than \$1,858
B. \$22,300 – \$33,400	\$1,858 – \$2,783
C. \$33,401 – \$44,500	\$2,784 – \$3,708
D. \$44,501 – \$66,800	\$3,709 – \$5,567
E. more than \$66,800	more than \$5,567

RE-3F

CARD RE-3G

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

<u>Yearly</u>	<u>Monthly</u>
A. less than \$26,300	less than \$2,192
B. \$26,300 – \$39,500	\$2,192 – \$3,292
C. \$39,501 – \$52,700	\$3,293 – \$4,392
D. \$52,701 – \$79,000	\$4,393 – \$6,583
E. more than \$79,000	more than \$6,583

CARD RE-3H

Wages and Salaries	Social Security or Railroad Retirement	RE-3H
Interest or Dividends	Private, Military, or Government Pensions	
Retirement Income or Annuities	Survivor Benefits	
Public Assistance/TANF	Supplemental Security Income (SSI)	
Disability Benefits	Child Support or Alimony	
Farm or Business Income	Rental, Estate or Trust Income	
Unemployment or Workers Compensation	Financial assistance from outside household	

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$29,800	less than \$2,483
B.	\$29,800 – \$44,600	\$2,483 – \$3,717
C.	\$44,601 – \$59,500	\$3,718 – \$4,958
D.	\$59,501 – \$89,300	\$4,959– \$7,442
E.	more than \$89,300	more than \$7,442

CARD RE-3I

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

RE-3I

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$33,700	less than \$2,808
B.	\$33,700 – \$50,500	\$2,808 – \$4,208
C.	\$50,501 – \$67,400	\$4,209 – \$5,617
D.	\$67,401 – \$101,100	\$5,618 – \$8,425
E.	more than \$101,100	more than \$8,425

CARD RE-3J

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

	<u>Yearly</u>	<u>Monthly</u>
A.	less than \$37,500	less than \$3,125
B.	\$37,500 – \$56,300	\$3,125 – \$4,692
C.	\$56,301 – \$75,100	\$4,693 – \$6,258
D.	\$75,101 – \$112,600	\$6,259 – \$9,383
E.	more than \$112,600	more than \$9,383

RE-3J

CARD RE-3K

Wages and Salaries	Social Security or Railroad Retirement
Interest or Dividends	Private, Military, or Government Pensions
Retirement Income or Annuities	Survivor Benefits
Public Assistance/TANF	Supplemental Security Income (SSI)
Disability Benefits	Child Support or Alimony
Farm or Business Income	Rental, Estate or Trust Income
Unemployment or Workers Compensation	Financial assistance from outside household

Income Categories:

<u>Yearly</u>	<u>Monthly</u>
A. less than \$44,800	less than \$3,733
B. \$44,800 – \$67,200	\$3,733 – \$5,600
C. \$67,201 – \$89,600	\$5,601 – \$7,467
D. \$89,601 – \$134,400	\$7,468 – \$11,200
E. more than \$134,400	more than \$11,200

RE-3K

CARD HE-1

- No Difficulty
- Some Difficulty
- A Lot of Difficulty
- Completely Unable To Do It

CARD CS-1

CS-1

- Definitely True
- Mostly True
- Don't Know
- Mostly False
- Definitely False

CARD CS-2

CS-2

- 0 No Problem
- 1
- 2 Some Problem
- 3
- 4 A Very Big Problem

CARD CS-3

-- Never

CS-3

-- Sometimes

-- Usually

-- Always

CARD CS-3A

None

1

2

3

4

5-9

10 or more

CS-3A

CARD CS-5

CS-5

- 0 Worst Health Care Possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best Health Care Possible

CARD PP-1

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TYPES OF HEALTH CARE PROVIDERS AND FACILITIES

Medical Professionals and Practitioners:

Medical Doctor

Health Aide

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Nurse or Nurse Practitioner
Paramedic

Physician's Assistant
Midwife/Nurse Midwife

Optometrist/Ophthalmologist

Acupuncturist

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Podiatrist (Foot Doctor)
Chiropractor

Therapist - Physical, Speech,
Occupational

Audiologist

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Physiatrist
Physical Therapy or Rehabilitation Services

Mental Health Professionals:

Psychiatrist

Mental Health Therapist

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Psychologist

Psychiatric Social Worker

Medical Facility or Clinic:

Walk-in Surgi-Clinic

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Health Clinic

Company or School Clinic
Infirmary

Neighborhood Health Clinic

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Family Planning Center
Mental Health Facility

Dental Care:

Dentist

Dental Hygienist

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Dental or Oral Surgeon
Orthodontist

Dental Technician
Dental Assistant

CARD PP-2

TYPES OF HOSPITAL SERVICES

Hospital Stay

Emergency Room Visit

Outpatient Department Visit

TYPES OF LONG TERM CARE FACILITIES

Convalescent Home

Nursing Home

Nursing Home Unit of a Hospital

Intermediate Care Facilities

Board and Care Homes

Residential Psychiatric Institution

Facility for the Intellectually Disabled

Group Homes

Long Term Place that Provides Hospice Care

Long Term Place that Provides Respite Care

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Assisted Living Facilities

CARD PP-3

TYPES OF HOME CARE SERVICES

PP-3

Skilled Medical Care

Home care from a nurse, any type of therapist, a doctor, a social worker, or anyone else providing nursing or medical care.

Personal Care

Home care services including bathing, dressing, help getting around the house, or help with getting medication, either paid or unpaid.

Household Chore Services

Help in the home with services like cooking or cleaning either paid or unpaid.

Companionship

Services such as reading, talking, or going for a walk, a drive, or to a restaurant either paid or unpaid.

Any Other Type of Home Care

CARD PP-4

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

PP-4

Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

Other Diabetic Equipment or Supplies

CARD PP-4A

PP-4A

AMBULANCE SERVICES

ORTHOPEDIC ITEMS

- Corrective shoes or inserts
- Braces
- Crutches
- Canes
- Walkers
- Wheelchairs
- Scooters

HEARING DEVICES

- Hearing aids
- Amplifiers for a telephone
- Adaptive speech equipment
- Speech synthesizer

PROSTHESES

- Artificial limbs

BATHROOM AIDS

- Portable commodes
- Raised toilet seats
- Portable tub seats
- Handrails
- Other bathing equipment

MEDICAL EQUIPMENT

- Hospital beds
- Lifts
- Monitors
- Special chairs
- Oxygen
- Bed pans
- Adaptive feeding equipment
- Vaporizer or nebulizer
- Blood pressure monitor

DISPOSABLE SUPPLIES

- Ostomy supplies
- Bandages
- Dressings
- Tape
- Diapers
- Catheters
- Syringes not prescribed by a physician
- IV supplies

ALTERATIONS/MODIFICATIONS

- Ramps
- Handrails
- Elevators
- Automobile modifications

OTHER

CARD PP-5

TYPES OF DENTAL CARE PROVIDERS

PP-5

Dentist

Dental or Oral Surgeon

Orthodontist

Dental Hygienist

Dental Technician

Dental Assistant

CARD PP-6

TYPES OF MEDICAL PROVIDERS

PP-6

Medical Professionals:

Medical Doctor

Nurse

Nurse Practitioner

Midwife/Nurse Midwife

Physiatrist

Paramedic

Health Aide

Physical Therapy or Rehabilitation Services

Therapist-Physical, Speech, Occupational

Physician's Assistant

Optometrist/Ophthalmologist

Podiatrist (Foot Doctor)

Chiropractor

Acupuncturist

Audiologist

Mental Health Professionals:

Psychiatrist

Psychologist

Psychiatric Social Worker

Mental Health Therapist

CARD PP-7

TYPES OF HOSPITAL SERVICES

PP-7

Hospital Stay

Emergency Room Visit

Outpatient Department Visit

CARD PP-8

TYPES OF OTHER MEDICAL PROVIDERS

Medical Professionals and Practitioners:

PP-8

- Paramedic
- Health Aide
- Physician's Assistant
- Midwife
- Optometrist/Ophthalmologist
- Podiatrist (Foot Doctor)
- Chiropractor
- Acupuncturist
- Therapist - Physical, Speech, Occupational
- Audiologist
- Physical Therapy or Rehabilitation Services

Medical Facility or Clinic:

- Health Clinic
- Walk-in Surgi-Clinic
- Company or School Clinic
- Infirmery
- Neighborhood Health Clinic
- Family Planning Center
- Mental Health Facility

Mental Health Professionals:

- Psychiatric Social Worker
- Mental Health Therapist

CARD PP-9

TYPES OF HOME CARE SERVICES

PP-9

Skilled Medical Care

Home care from a nurse, any type of therapist, a doctor, a social worker, or anyone else providing nursing or medical care.

Personal Care

Home care services including bathing, dressing, help getting around the house, or help with getting medication, either paid or unpaid.

Household Chore Services

Help in the home with services like cooking or cleaning either paid or unpaid.

Companionship

Services such as reading, talking, or going for a walk, a drive, or to a restaurant either paid or unpaid.

Any Other Type of Home Care

CARD PP-10

TYPES OF LONG TERM CARE FACILITIES

PP-10

Convalescent Home

Nursing Home

Nursing Home Unit of a Hospital

Intermediate Care Facilities

Board and Care Homes

Residential Psychiatric Institution

Facility for the Intellectually Disabled

Group Homes

Long Term Place that Provides Hospice Care

Long Term Place that Provides Respite Care

Assisted Living Facilities

CARD PP-11

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

PP-11

Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

Other Diabetic Equipment or Supplies

CARD PP-12

AMBULANCE SERVICES

ORTHOPEDIC ITEMS

- Corrective shoes or inserts
- Braces
- Crutches
- Canes
- Walkers
- Wheelchairs
- Scooters

HEARING DEVICES

- Hearing aids
- Amplifiers for a telephone
- Adaptive speech equipment
- Speech synthesizer

PROSTHESES

- Artificial limbs

BATHROOM AIDS

- Portable commodes
- Raised toilet seats
- Portable tub seats
- Handrails
- Other bathing equipment

MEDICAL EQUIPMENT

- Hospital beds
- Lifts
- Monitors
- Special chairs
- Oxygen
- Bed pans
- Adaptive feeding equipment
- Vaporizer or nebulizer
- Blood pressure monitor

DISPOSABLE SUPPLIES

- Ostomy supplies
- Bandages
- Dressings
- Tape
- Diapers
- Catheters
- Syringes not prescribed by a physician
- IV supplies

ALTERATIONS/MODIFICATIONS

- Ramps
- Handrails
- Elevators
- Automobile modifications

OTHER

PP-12

CARD HS-1

- Operation or Surgical Procedure
- Treatment or Therapy, Not Including Surgery
- Diagnostic Tests Only
- Give Birth to a Baby - Normal or Caesarean Section (Mother)
- To Be Born (Baby)
- Pregnancy-Related Complications

HS-1

CARD ER-1

- Diagnosis or Treatment
- Emergency (e.g., Accident or Injury)
- Psychotherapy or Mental Health
Counseling
- Follow-up or Post-Operative Visit
- Immunization or Shots
- Pregnancy-Related
(Including Prenatal Care and Delivery)

ER-1

CARD ER-2

- Laboratory Tests
- Throat Swab
- Sonogram or Ultrasound
- X-Rays
- Mammogram
- MRI or CAT Scan
- EKG or ECG
- EEG
- Vaccination
- Anesthesia

ER-2

CARD OP-1

- General Checkup
- Diagnosis or Treatment
- Emergency (e.g., Accident or Injury)
- Psychotherapy or Mental Health Counseling
- Follow-up or Post-Operative Visit
- Immunizations or Shots
- Vision Exam
- Pregnancy-Related
(Including Prenatal Care and Delivery)
- Well Child Exam
- Laser Eye Surgery

OP-1

CARD OP-2

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Chemotherapy
- Radiation Therapy
- Kidney Dialysis
- IV Therapy
- Drug or Alcohol Treatment
- Allergy Shot
- Psychotherapy/Counseling
- Shots, Other than Allergy

OP-2

CARD OP-3

- Laboratory Tests
- Throat Swab
- Sonogram or Ultrasound
- X-Rays
- Mammogram
- MRI or CAT Scan
- EKG or ECG
- EEG
- Vaccination
- Anesthesia

OP-3

CARD MV-1

- General Checkup
- Diagnosis or Treatment
- Emergency (e.g., Accident or Injury)
- Psychotherapy or Mental Health Counseling
- Follow-up or Post-Operative Visit
- Immunizations or Shots
- Vision Exam
- Pregnancy-Related
(Including Prenatal Care and Delivery)
- Well Child Exam
- Laser Eye Surgery

MV-1

CARD MV-2

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Chemotherapy
- Radiation Therapy
- Kidney Dialysis
- IV Therapy
- Drug or Alcohol Treatment
- Allergy Shot
- Psychotherapy/Counseling
- Shots, Other than Allergy

MV-2

CARD MV-3

-- Laboratory Tests

MV-3

-- Throat Swab

-- Sonogram or Ultrasound

-- X-Rays

-- Mammogram

-- MRI or CAT Scan

-- EKG or ECG

-- EEG

-- Vaccination

-- Anesthesia

CARD DN-1

- * **DIAGNOSTIC OR PREVENTATIVE**
 - General Exam, Checkup or Consultation
 - Cleaning, Prophylaxis, or Polishing
 - X-Rays, Radiographs, or Bitewings
 - Fluoride Treatment
 - Sealant (Plastic Coatings on Back Teeth)

- * **RESTORATIVE OR ENDODONTIC**
 - Fillings
 - Inlays
 - Crowns or Caps
 - Root Canal

- * **PERIODONTIC (GUM TREATMENT)**
 - Periodontal Scaling, Root Planing, or Gum Surgery
 - Periodontal Recall Visit (Periodic or Regular)

- * **ORAL SURGERY**
 - Extraction, Tooth Pulled
 - Implants
 - Abscess or Infection Treatment
 - Other Oral Surgery

- * **PROSTHETICS**
 - Fixed Bridges
 - Dentures or Removable Partial Dentures
 - Relining or Repair of Bridges or Dentures

- * **ORTHODONTICS**
 - Orthodontia, Braces, or Retainers

- * **ADDITIONAL PROCEDURES**
 - Bonding, Whitening, or Bleaching
 - Treatment for TMD or TMJ

DN-1

CARD HH-1

- Certified Nursing Assistant (CNA)
- Companion
- Dietitian/Nutritionist
- Home Health/Home Care Aide
- Hospice Worker
- Homemaker
- I.V. or Infusion Therapist
- Medical Doctor
- Nurse/Nurse Practitioner
- Nurse's Aide
- Occupational Therapist
- Personal Care Attendant
- Physical Therapist
- Respiratory Therapist
- Social Worker
- Speech Therapist

HH-1

CARD HH-2

Medical Treatments

Changing bandages, wound care, giving medication, taking blood pressure, giving shots or injections, any type of therapy, other medical treatments

HH-2

Help Using Medical Equipment or Assistive Device (Examples)

Oxygen tank, wheelchair, walker, hospital bed, tub seat, special railing, special commode, other medical equipment or assistive device

Help With Daily Activities or Personal Care (Examples)

Using the telephone, paying bills, shopping, driving, housework, preparing meals, bathing, dressing, using the toilet, getting in or out of a bed or chair, walking, eating, other daily activities or personal care

CARD HH-3

Help With Daily Activities or Personal Care (Examples)

HH-3

Using the telephone, paying bills, shopping, driving, housework, preparing meals, bathing, dressing, using the toilet, getting in or out of a bed or chair, walking, eating, other daily activities or personal care

CARD CP-1 (Panel 13)

- Paid at Time of Visit
- Made a Co-payment
- Bill Sent Directly to Other Source
- Bill Has Not Arrived
- **No Bill Sent:**
 - HMO Plan
 - VA (Veterans Administration)/CHAMPVA
 - Indian Health Service (IHS)
 - Military Facility
 - Public Assistance/Medicaid/SCHIP
 - Worker's Compensation
 - School, Employer, or Other Private Health Center/Clinic
 - Public Clinic/Health Center or Private Charity (Include Community and Migrant Health Center, Federally Qualified Health Center)
- No Charge: Telephone Call
- Free From Provider
(Professional Courtesy/Free Sample)
- Government-Financed Research And Clinical Trials

CP-1

CARD CP-1 (Panel 12)

- Paid at Time of Visit
- Made a Co-payment
- Bill Sent Directly to Other Source
- Bill Has Not Arrived
- **No Bill Sent:**
 - HMO Plan
 - VA (Veterans Administration)
 - Indian Health Service (IHS)
 - Military Facility
 - Public Assistance/Medicaid/SCHIP
 - Worker's Compensation
 - School, Employer, or Other Private Health Center/Clinic
 - Public Clinic/Health Center or Private Charity (Include Community and Migrant Health Center, Federally Qualified Health Center)
- No Charge: Telephone Call
- Free From Provider
(Professional Courtesy/Free Sample)
- Government-Financed Research And Clinical Trials

CP-1

CARD PC-2

- Within the last 7 days
- More than 7 days ago, but within last 30 days
- More than 30 days ago

PC-1

PC-2

CARD AP-1

- 99 pounds or less
- 100 to 149 pounds
- 150 to 199 pounds
- 200 to 249 pounds
- 250 to 299 pounds
- 300 pounds or more

AP-1

CARD AC-1

- Very Difficult
- Somewhat Difficult
- Not Too Difficult
- Not At All Difficult

AC-1

CARD AC-2

- White
- Black/African American
- Asian
- Indian/Native American Alaska Native
- Other Pacific Islander
- Some Other Race

AC-2

CARD AC-3

- Never
- Sometimes
- Usually
- Always

AC-3

CARD AC-4

- Couldn't Afford Care
- Insurance Company Wouldn't Approve, Cover Or Pay For Care
- Doctor Refused To Accept Family's Insurance Plan
- Problems Getting to Doctor's Office
- Different Language
- Couldn't Get Time Off Work
- Didn't Know Where To Go To Get Care
- Was Refused Services
- Couldn't Get Child Care
- Didn't Have Time Or Took Too Long

AC-4

CARD AC-5

- A Big Problem
- A Small Problem
- Not A Problem

AC-5

CARD OE-1

- Hospital and Physician Benefits, Including Coverage Through an HMO
- Dental
- Prescription Drugs
- Vision
- Medicare Supplement or Medigap
- Long-Term Care in a Nursing Home
- Extra Cash for Hospital Stays
- Serious Disease or Dread Disease

OE-1

CARD PR-1

**Medicare Managed Care Plans
[State Name Here]**

PR-1

(One for Each State)

CARD PR-2

Plan Names
[State Name Here]

PR-2

(One for Each State)

CARD PR-3 (Panel 13)

- TANF (Temporary Aid for Needy Families)
- SSI (Supplemental Security Income)
- WIC (Women, Infants and Children)
- IHS (Indian Health Service)
- Public Health Clinic
- VA (Veterans Administration)/CHAMPVA

PR-3

CARD PR-3 (Panel 12)

- TANF (Temporary Aid for Needy Families)
- SSI (Supplemental Security Income)
- WIC (Women, Infants and Children)
- IHS (Indian Health Service)
- Public Health Clinic
- VA (Veterans Administration)


CARD HX-1

- From a Professional Association
- From a Small Business Group
- From a Union
- Directly From an Insurance Agent
- Directly From Insurance Company
- Directly From an HMO
- From a Previous Employer
- From a Previous Employer (COBRA)

HX-1

CARD HX-2

Sample Medicare Card

MEDICARE			HEALTH INSURANCE	
SOCIAL SECURITY ACT				
NAME OF BENEFICIARY				
JOHN D. DOE				
MEDICARE CLAIM NUMBER			SEX	
123-45-6789A			MALE	
IS ENTITLED TO			EFFECTIVE DATE	
HOSPITAL INSURANCE (PART A)			1/1/95	
MEDICAL INSURANCE (PART B)				
SIGN HERE		➔ _____		

HX-2

CARD HX-3

**Sample Medicaid Card
[State Name Here]**

(One for Each State)

HX-3

CARD HX-4

- From a Group or Association
- Directly Through a School
- Directly From an Insurance Agent
- Directly From Insurance Company
- Directly From an HMO
- From a Union
- From Anyone's Previous Employer (COBRA)
- From Anyone's Previous Employer
(Not COBRA)
- From Spouse's/Deceased Spouse's Previous
Employer
- From Some Other Employer
- Under Plan of Someone Not Living Here

HX-4

CARD HX-5

**Medicare Managed Care Plans
[State Name Here]**

(One for Each State)

CARD HX-6

State-Specific Plan Names
[State Name Here]

HX-6

(One for Each State)

CARD HX-7

- Hospital and Physician Benefits, Including Coverage Through an HMO
- Dental
- Prescription Drugs
- Vision
- Medicare Supplement or Medigap
- Long-Term Care in a Nursing Home
- Extra Cash for Hospital Stays
- Serious Disease or Dread Disease

HX-7

CARD HX-8

**Plan Name (for Federal Civilian Employees)
[State Name Here]**

(One for Each State)

HX-8

CARD SP-1

- A Big Problem
- A Small Problem
- Not a Problem

SP-1

CARD SP-2

0 Worst Health Plan Possible

1

2

3

4

5

6

7

8

9

10 Best Health Plan Possible

CARD IN-1

- 1 - 5,000
- 5,001 - 10,000
- 10,001 - 15,000
- 15,001 - 25,000
- 25,001 - 50,000
- 50,001 - 100,000
- 100,001 or more

IN-1

CARD IN-1A

- 1 - 100
- 101 - 500
- 501 - 1,000
- 1,001 - 5,000
- 5,001 - 15,000
- 15,001 or more

CARD IN-2

- 1 - 250
- 251 - 500
- 501 - 750
- 751 - 1,000
- 1,001 or more

IN
-
1 Δ

IN-2

CARD IN-2A

**State-Specific TANF Program
[State Name Here]**

(One for Each State)

IN-2A

CARD IN-3

- Wages and salary
- Farm income (or loss)
- Business income (or loss)
- Social Security/Railroad Retirement
- Private, military, or government pensions
- Interest
- Dividends
- Rental income (or loss)
- Other source

CARD AS-1

- 0 - 10,000
- 10,001 - 25,000
- 25,001 - 50,000
- 50,001 - 100,000
- 100,001 - 250,000
- 250,001 - 500,000
- 500,001 - 1,000,000
- 1,000,001 or more

A
S-

CARD AS-2

- 0 - 100
- 101 - 500
- 501 - 1,000
- 1,001 - 5,000
- 5,001 - 10,000
- 10,001 - 25,000
- 25,001 - 50,000
- 50,001 - 100,000
- 100,001 or more

**A
S-
'**

CARD AS-3

- 0 - 1,000
- 1,001 - 5,000
- 5,001 - 10,000
- 10,001 - 25,000
- 25,001 - 50,000
- 50,001 - 100,000
- 100,001 - 250,000
- 250,001 - 500,000
- 500,001 or more

AS-3