

**MCBS MAIN STUDY**  
**R55 General Specifications for Blaise/WVS**  
Version 07.01.0001  
8/14/2009

**QUESTIONNAIRE FLOW**

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# 1. SPECIFICATION COMPONENTS

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## Questionnaire

Refers to the entire set of questions administered to an SP. The Questionnaire is also referred to as the “**Instrument**” when referring to the CAPI program.

## Section

Refers to a subset of questions in the Questionnaire. Groups of related questions in the Questionnaire are organized into sections. Each section has a **SECTION ID** (abbreviation). Ex: the HI Section collects data about the SP’s Health Insurance plans. A Section may be administered every round, only once a year, are only when the SP is entering or exiting the study.

## Components of the Questionnaire:

### Introduction

#### **IN Introduction**

Verifies SP name, collects SP status and respondent information. Verifies/collects SP’s DOB, marital status, # children in the SP’s 1<sup>st</sup> round interview. Verifies SP’s marital status every fall round.

### Address Verification

#### **AV Address Verification**

Verifies SP’s home and mailing address. INTTYPE = 1,4,5,6,7,10: Administered after IN. INTTYPE = 2,3: Administered directly before CL.

### Household

Collects information regarding who lives in the household with the SP.

#### **ENS Enumeration Summary**

Reviews persons who lived in the household in the previous round and probes whether or not person still lives in the household in the current round. Also collects new current round household members. Collects job status for SP and household members.

### Health Insurance

Collects information about plans that cover SP’s medical expenses.

#### **HIS Health Insurance Summary**

Allows interviewer to add, delete, and update Health insurance plans collected in previous round.

#### **HI Health Insurance**

Collects information about Medicare, Medicaid, Tricare, Public and Private Health Insurance Plans.

**DM**

Collects information about Discount Membership plans.

**Utilization**

Collects dates for SP's doctor visits, Hospital stays, etc. Each visit is referred to as an "event". Also collects other types of medical events, such as prescribed medicines and other medical expenses.

The following sections collect events for a specific type of provider:

**DU Dental**  
**ER Emergency Room**  
**IP Inpatient Hospital Stays**  
**OP Outpatient Department Visits**  
**IU Institutionalization Stays**  
**HHS Home Health Care Summary**  
**HH Home Health Care**  
**MP Medical Provider Visits**  
**OM Other Medical Expenses**  
**PMS Prescription Medicine Summary**  
**PM Prescription Medicines**

**Cost Series**

Collects information regarding medical statements and charges for doctor visits and other events:

**ST Statement Section.**

Collects data directly from SP's statements that they have received from Medicare or other health insurance plan.

**PS Post Statement Section**

Identifies if SP has incurred charges for a OME Rent-to-Buy item. Response to questions in PS determine if event will be asked about in the NS Section.

**NS No Statement Section.**

Collect data from Respondent about the COSTs for a particular event when a Statement is not available.

**CPS Cost Payment Summary Section.**

Reviews ST and NS data collected over past 2 rounds and updates/collects additional COST data not previously reported.

See details below regarding the when COST data is collected for events.

## Summary Sections

Some of the sections above are referred to as a Summary Section. There are two types of summary sections.

1) A section that allows interviewer to add, delete or update data collected during the SP's previous round interview. Data collected in these sections is written to previous round database records.

**HIS Health Insurance Summary**

**PMS Prescription Medicine Summary**

2) A section that summarizes data collected in the previous round with the purpose of collecting additional current round data. Data collected in these sections is written to current round database records.

**ENS Enumeration Summary**

**HHS Home Health Care Summary**

**CPS Cost Payment Summary**

## Closing

Collects SP and Proxy address information, Contact and Future Proxy Information. Includes final instructions to respondent about future interviews.

**AV Address Verification**

Collects/Verifies SP's home and mailing address.

**CL Closing**

Collects/Verifies Proxy, Contact, Future Proxy name and address information. Collects future interview name and phone number. Includes final instructions to respondent regarding future interviews and general closing remarks.

**EX Exit Closing**

Is administered to SP's during their last interview in the study (exit cases). Includes general closing remarks.

## Supplemental Sections

Refers to a section that is not administered every round. Typically, Supplemental Sections are administered once a year. However, a Supplemental Section may be administered once in the entire study.

The following are examples of Supplemental Sections:

**Fall Round**

**AC ACCESS TO CARE**

**HF HEALTH STATUS AND FUNCTIONING**

**US USUAL SOURCE OF CARE**

**SC SATISFACTION OF CARE**  
**DI DEMOGRAPHICS**  
**HA HOUSING CHARACTERISTICS**

**Winter Round**

**KN BENEFICIARY KNOWLEDGE  
AND INFORMATION NEEDS**  
**PD PRESCRIPTION DRUG – not administered in R53**

**Summer Round**

**IA INCOME AND ASSETS**  
**PA PATIENT ACTIVATION – not administered R54**  
**RX DRUG COVERAGE**

## 2. ORDER SECTIONS ARE ADMINISTERED

Component	Abbrev.	SECTION Listed in the order the section is administered.	Section Administered in What Round?	Who gets what section based on Interview Type and SP's Status.
Introduction	IN	INTRODUCTION	ALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 8, 9, or 10
Address Verification	AV	ADDRESS VERIFICATION * Can be called either after IN or before CL.	ALL	MRES.INTTYPE = 1, 4, 5, 6, 7, or 10 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased.
Household	ENS	ENUMERATION	ALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 9, or 10
Supplemental Section	HA	HOUSING CHARACTERISTICS	FALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 8, 9, or 10 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased..
Health Ins	HIS	HEALTH INSURANCE SUMMARY	ALL	MRES.INTTYPE = 1, 4, 7, 9, or 10
Health Ins	HI	HEALTH INSURANCE	ALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 9, or 10
Insurance Plans	DM	DISCOUNT/SAVINGS MEMBERSHIP	ALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 9, or 10 (exclude MRES.INTTYPE=8)
Utilization	DU	DENTAL UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	ER	EMERGENCY ROOM UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	IP	INPATIENT UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 8, 9, or 10 *MRES.INTTYPE=8 only receive IP questions if ongoing IP visit from the previous round.
Utilization	OP	OUTPATIENT UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	IU	INSTITUTIONAL UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	HHS	HOME HEALTH SUMMARY	ALL	MRES.INTTYPE = 1, 4, or 9
Utilization	HH	HOME HEALTH UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	MP	MEDICAL PROVIDER UTILIZATION	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Supplemental Section	AC	ACCESS TO CARE SUPPLEMENT	FALL	MRES.INTTYPE = 1, 2, 4, 5, or 6 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased.
Utilization	OM	OTHER MEDICAL EXPENSES	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
Utilization	PMS	PRESCRIBED MEDICINES	ALL	MRES.INTTYPE = 1, 4, or 9
Utilization	PM	PRESCRIBED MEDICINES	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
COST Series	ST	STATEMENT CHARGE SERIES	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
COST Series	PS	POST-STATEMENT CHARGE	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10
COST Series	NS	NO STATEMENT CHARGE SERIES	ALL	MRES.INTTYPE = 1, 2, 4, 5, 6, 7, 9, or 10 (exclude MRES.INTTYPE=8)
<b>COST Series</b>	<b>CPS</b>	<b>CHARGE PAYMENT SUMMARY NOT IMPLEMENTED IN R51</b>	<b>ALL</b>	<b>MRES.INTTYPE = 1, 4, 5, 8, or 9</b>
Supplemental Section	AC	ACCESS TO CARE SUPPLEMENT	FALL	MRES.INTTYPE = 3 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased
Supplemental Section	HF	HEALTH STATUS AND FUNCTIONING SUPPLEMENT	FALL	MRES.INTTYPE = 1, 2, 3, 4, 5, or 6 and MRES.SPALIVE ^= 2/AliveAndInstitute and

				MRES.SPALIVE ^= 3/Deceased
Supplemental Section	SC	SATISFACTION WITH CARE SUPPLEMENT	FALL	MRES.INTTYPE = 1, 2, 3, 4, 5, or 6 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased
Supplemental Section	US	USUAL SOURCE OF CARE SUPPLEMENT	FALL	MRES.INTTYPE = 1, 2, 3, 4, 5, or 6 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased
Supplemental Section	DI	DEMOGRAPHICS AND INCOME	FALL	MRES.INTTYPE = 3
Supplemental Section	AH	CONTACT INFORMATION FOR FACILITIES	FALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 8, 9, or 10
Supplemental Section	KN	BENEFICIARY KNOWLEDGE AND INFORMATION NEEDS	WINTER	MRES.INTTYPE = 1, 2, 4, 5, 6, or 7 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased
Supplemental Section	PD	PRESCRIPTION DRUG SUPPLEMENT	WINTER Not in WVS	MRES.INTTYPE = 1, 2, 4, 5, 6, or 7
Supplemental Section	IA	INCOME AND ASSETS SUPPLEMENT	SUMMER	MRES.INTTYPE = 1, 2, 4, 5, 6, 8, 9, or 10
Supplemental Section	PA	PATIENT ACTIVATION SUPPLEMENT NOT IMPLEMENTED IN R51	SUMMER Not in WVS	MRES.INTTYPE = 1, 2, 4, 5, 6, 8, 9, or 10 and MRES.SPPROXY = 1/SP and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased.
Supplemental Section	RX	DRUG COVERAGE SUPPLEMENT	SUMMER	MRES.INTTYPE = 1, 2, 4, 5, 6, 9, or 10 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased
Address Verification	AV	ADDRESS VERIFICATION * Can be called either after IN or before CL.	ALL	MRES.INTTYPE = 2 or 3 and MRES.SPALIVE ^= 2/AliveAndInstitute and MRES.SPALIVE ^= 3/Deceased.
Closing	CL	CLOSING	ALL	(MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, or 10) or (MRES.INTTYPE = 8 or 9 and MRES.SPALIVE = 3/Deceased).
Closing	EX	CLOSING FOR EXIT INTERVIEW	SUMMER	MRES.INTTYPE = 8 or 9 and MRES.SPALIVE ^= 3/Deceased.
End	END	END SECTION	ALL	MRES.INTTYPE = 1, 2, 3, 4, 5, 6, 7, 8, 9, or 10

### SUMMARY OF INTERVIEW TYPES:

MRES.INTTYPE=1/StandardHadPrev  
MRES.INTTYPE=2/NewFromFacility  
MRES.INTTYPE=3/NewFromSupplement  
MRES.INTTYPE=4/StandardSkippedPrev  
MRES.INTTYPE=5/LastRndFacSum  
MRES.INTTYPE=6/LastRndFacBase  
MRES.INTTYPE=7/SupSmp1stTimeUtil  
MRES.INTTYPE=8/ExitInterviewHadPrev  
MRES.INTTYPE=9/ExitInterviewSkippedPrev  
MRES.INTTYPE=10/SupSmp1stTimeUtilSkipped

### VALID IN ROUNDS:

ALL  
ALL  
FALL ONLY  
ALL  
ALL  
ALL  
WINTER ONLY  
SUMMER ONLY  
SUMMER ONLY  
SUMMER ONLY

**OVERVIEW OF ROUNDS ADMINISTERED TO SP:**

SP's 1 <sup>st</sup> Year	SP's 2 <sup>nd</sup> Year	SP's 3 <sup>rd</sup> Year	SP's 4 <sup>th</sup> Year	SP's 5 <sup>th</sup> Year
<b>Winter Rounds</b>	MRES.INTTYPE = 7 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HH, MP, OM, PM ST, PS, NS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL
<b>Summer Rounds</b>	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS, CPS Supplemental Sections CL  Or if Previous Round Skipped in 1 <sup>st</sup> year, MRES.INTTYPE = 10 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HH, MP, OM, PM ST, PS, NS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 8 IN IP – Ongoing IP only. Supplemental Sections EX or CL  Or if Previous Round Skipped, MRES.INTTYPE = 9 IN ENS HIS HI, DM UTS DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS CPS Supplemental Sections EX or CL  <b>LAST ROUND</b>
<b>Fall Rounds</b>  MRES.INTTYPE = 3 IN ENS HI DM Supplemental Sections CL  <b>FIRST ROUND</b>	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	MRES.INTTYPE = 1 IN ENS HIS, HI, DM DU, ER, IP, OP, IU, HHS, HH, MP, OM, PMS, PM ST, PS, NS,CPS Supplemental Sections CL	

1) SP's cannot skip their 1<sup>st</sup> round interview. They will either be interviewed in the community or in a facility, but not both. If SP is in a facility for their 1<sup>st</sup> round interview, they will be assigned INTTYPE = 2 the 1<sup>st</sup> time they enter the community..

3) If SP skips a round any time after their 2<sup>nd</sup> round in the study, they will be assigned MRES.INTTYPE = 4.

4) If SP moves to a facility and then returns to the community, they will be assigned one of three interview types, MRES.INTTYPE = 5 or 6.



**OVERVIEW OF SECTIONS THAT CALL PART OR ALL OF OTHER SECTIONS:**

SECTION	A PORTION IS CALLED BY	CALLS SECTION	JUMPS OUT OF SECTION AT	ADMINISTERS Q. TO Q.	RETURNS TO SECTION AT	DESCRIPTION
HI DM DU ER	ST, NS ST, NS ST, NS ST, NS	AC	BOX ER5	AC6A to BOX AC1C	BOX ER6	Fall Round only. If ER visit added in current round, ER access to care details are asked in AC section.
IP OP	ST, NS ST, NS	AC	BOX OP6	AC9 to BOX AC1E	BOX OP7	Fall Round only. If OP visit added in current round, OP access to care details are asked in AC section.
HHS		HH	BOX HHS3	BOX HH1BB to BOX HH3	BOX HHS5	If previous round Home Health professional still providing care in the current round, call HH to collect current round HH details.
			HHS3	BOX HH1BB to BOX HH3	BOX HHS5	If previous round Home Health friend still providing care in the current round, call HH to collect current round HH details.
HH MP	ST, NS ST, NS	AC	BOX MP6A	AC20 to BOX AC1G	MP18	Fall Round only. If MP visit added in current round, MP access to care details are asked in AC section.
AC OM PM ST	ER, OP, MP ST, NS ST, NS NS, CPS	HI	BOX ST67C	HI6 to BOX HIT1	BOX ST69A	Added Medicaid SOP, collect plan details.
			BOX ST67C	HIT2 to BOX HI7	BOX ST69A	Added Tricare SOP, collect plan details.
			BOX ST67C	HI13 to BOX HI12	BOX ST69A	Added Public Plan SOP, collect plan details.
			BOX ST67C	HI21 to BOX HI19	BOX ST69A	Added Private Plan SOP, collect plan details.

	ST69	HIMC6 to BOX HIMC2	BOX ST69A	Added MHMO SOP that is current, collect plan details.
DM	BOX ST69C	DM4 to BOX DM3	BOX ST69D	Added DM SOP, collect details.
DU	BOX ST22A	DU7 to BOX DU3A	BOX ST23B	Added Dental Visit to charge bundle, collect event details.
ER	BOX ST22A	ER5 to BOX ER2A	BOX ST23B	Added Emergency Room visit to charge bundle, collect event details.
IP	BOX ST22A	IP7 to BOX IP4A	BOX ST23B	Added Inpatient Stay to charge bundle, collect event details.
OP	BOX ST22A	OP5 to BOX OP2A	BOX ST23B	Added Outpatient Dept. visit to charge bundle, collect event details.
MP	BOX ST23A	BOX MP2C to BOX MP2D	BOX ST23B	Added Medical Provider Visit to charge bundle, collect event details.
HH	BOX ST31A	HH3 to BOX HH3	BOX ST31B	Added Home Health Provider/Professional to charge bundle, collect event details.
		HH20 to BOX HH3	BOX ST31B	Added Home Health Provider/Friend to charge bundle, collect event details.
OM	ST36	OM2 to BOX OM1AA2	BOX ST36	Added OM to charge bundle, collect event details.
		OM4 to BOX OM1BB2	BOX ST36	Added OM to charge bundle, collect event details.
		OM6 to BOX OM1EE1	BOX ST36	Added OM to charge bundle, collect event details.
		OM10 to BOX OM1FF2	BOX ST36	Added OM to charge bundle, collect event details.
		OM12 to BOX OM1GG2	BOX ST36	Added OM to charge bundle, collect event details.
		OM14 to BOX OM1HH2	BOX ST36	Added OM to charge bundle, collect event details.
		OM19A to BOX OM1KK1	BOX ST36	Added OM to charge bundle, collect event details.

				OM21A to BOX OM1NN1	BOX ST36	Added OM to charge bundle, collect event details.
				OM24 to BOX OM 1QQ1	BOX ST36	Added OM to charge bundle, collect event details.
				OM29 to BOX OM25A	BOX ST36	Added OM to charge bundle, collect event details.
		PM	ST43	BOX PM1A-1 to BOX PM3A	BOX ST43	Added PM to charge bundle, collect event details.
NS	CPS	ST	NS2	ST5 to BOX ST80	BOX NSBEG	Respondent "has statement". Collect statement information in ST.
			NS4	ST5 to BOX ST80	BOX NSBEG	Respondent "has statement". Collect statement information in ST.
			NS81	ST5 to BOX ST80	BOX NSBEG	Respondent "has statement". Collect statement information in ST.
		HI	BOX NS67C	HI6 to BOX HIT1	BOX NS69A	Added Medicaid SOP, collect plan details.
			BOX NS67C	HIT2 to BOX HI7	BOX NS69A	Added Tricare SOP, collect plan details.
			BOX NS67C	HI13 to BOX HI12	BOX NS69A	Added Public Plan SOP, collect plan details.
			BOX NS67C	HI21 to BOX HI19	BOX NS69A	Added Private Plan SOP, collect plan details.
			NS69	HIMC6 to BOX HIMC2	BOX NS69A	Added MHMO SOP that is current, collect plan details.
		DM	BOX NS69C	DM4 to BOX DM3	BOX NS69D	Added DM SOP, collect details.
		DU	BOX NS22A	DU7 to BOX DU3A	BOX NS23B	Added Dental Visit to charge bundle, collect event details.
		ER	BOX NS22A	ER5 to BOX ER2A	BOX NS23B	Added Emergency Room visit to charge bundle, collect event details.
		IP	BOX NS22A	IP7 to BOX IP4A	BOX NS23B	Added Inpatient Stay to charge bundle, collect event details.

OP	BOX NS22A	OP5 to BOX OP2A	BOX NS23B	Added Outpatient Dept. visit to charge bundle, collect event details.
MP	BOX NS23A	BOX MP2C to BOX MP2D	BOX NS23B	Added Medical Provider Visit to charge bundle, collect event details.
HH	BOX NS31A	HH3 to BOX HH3	BOX NS31B	Added Home Health Provider/Professional to charge bundle, collect event details.
		HH20 to BOX HH3	BOX NS31B	Added Home Health Provider/Friend to charge bundle, collect event details.
OM	NS36	OM2 to BOX OM1AA2	BOX NS36	Added OM to charge bundle, collect event details.
		OM4 to BOX OM1BB2	BOX NS36	Added OM to charge bundle, collect event details.
		OM6 to BOX OM1EE1	BOX NS36	Added OM to charge bundle, collect event details.
		OM10 to BOX OM1FF2	BOX NS36	Added OM to charge bundle, collect event details.
		OM12 to BOX OM1GG2	BOX NS36	Added OM to charge bundle, collect event details.
		OM14 to BOX OM1HH2	BOX NS36	Added OM to charge bundle, collect event details.
		OM19A to BOX OM1KK1	BOX NS36	Added OM to charge bundle, collect event details.
		OM21A to BOX OM1NN1	BOX NS36	Added OM to charge bundle, collect event details.
		OM24 to BOX OM1QQ1	BOX NS36	Added OM to charge bundle, collect event details.
		OM29 to BOX OM25A	BOX NS36	Added OM to charge bundle, collect event details.
PM	NS43	BOX PM1A-1 to BOX PM3A	BOX NS43	Added PM to charge bundle, collect event details.

CPS	ST	CPS2	ST5 to BOX ST80	BOX CPSBEG	Respondent "has statement". Collect statement information in ST.
		BOX CPS12	ST65 to BOX ST80	BOX CPSBEG	ST Charge bundle, Indicated someone paid, collect SOPs in ST.
		BOX CPS16	ST65 to BOX ST80	BOX CPSBEG	ST Charge bundle, need to update payments, update SOPs in ST.
	NS	BOX CPS10	NS65 to BOX NS80	BOX CPSBEG	NS Charge bundle, Indicated someone paid, collect SOPs in NS.
		BOX CPS14	NS65 to BOX NS80	BOX CPSBEG	NS Charge bundle, need to update payments, update SOPs in NS.
	HI	BOX CPS27C	HI6 to BOX HIT1	BOX CPS29A	Added Medicaid SOP, collect plan details.
		BOX CPS27C	HIT2 to BOX HI7	BOX CPS29A	Added Tricare SOP, collect plan details.
		BOX CPS27C	HI13 to BOX HI12	BOX CPS29A	Added Public Plan SOP, collect plan details.
		BOX CPS27C	HI21 to BOX HI19	BOX CPS29A	Added Private Plan SOP, collect plan details.
		CPS29	HIMC6 to BOX HIMC2	BOX CPS29A	Added MHMO SOP that is current, collect plan details.
	DM	BOX CPS29C	DM4 to BOX DM3	BOX CPS29D	Added DM SOP, collect details.

## 3. OVERVIEW OF COLLECTING COST DATA

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NOTE: This section of General Specifications is in progress.

### **ST – Statement Section:**

The purpose of the ST section is to collect COST data from statements provided by the respondent. New events may be added in ST and linked to the statement as well as existing events may be linked to statement. A single event may be linked to multiple statements. Multiple events may be linked to a single statement.

### **PS – Post Statement Section**

The purpose of PS is to determine if the respondent has charge data to report for an OM Rent-To-Buy.

### **NS – No Statement Section:**

The purpose of the NS section is to collect COST data for any new event added in the current round that is not linked to a statement added in the ST section.

We do not collect NS COST data about events reported in the current round

- 1) OM alterations not complete
- 2) IU events
- 3) IP events if the SP is still in the hospital.
- 4) HH provider events if services were not provided in the current round other than Meals-on-Wheels.
- 5) OM supplies where number of purchases = 0, DK, RF.
- 6) PM's where number of purchases = 0, DK, RF.

We do collect NS COST data about the following events entered prior to the current round:

- 1) Ongoing IP stays, SP reported being discharged from IP in the current round.
- 2) On-going OM Rentals
- 3) OM Rent-To-Buys
- 4) On-going HH provider services
- 5) OM Rent-To-Buys if respondent has charge data to report (indicated in PS section)

### **CPS – Cost Payment Summary**

The purpose of CPS is to collect missing COST data for charge bundles generated in the past two rounds. CPS charge bundles flagged to be asked about in the current round CPS section have the following fields set:

COST.CPROUND = current round.

COST.CPREASN = 1 through 8

If during the current round interview, the respondent provides COST data for an event linked to a current round CPS charge bundle or indicates that an event was reported in error, the CPS charge bundle linked to the event is no longer asked about in CPS.

CPS charge bundles will not get asked about in the current round if:

- 1) A HH event is linked to the CPS charge bundle and is also asked about in the current round HHS section and the respondent reports that the HH event was "entered in error".
- 2) Any event linked to the CPS charge bundle has EVNTDFLG=1/Yes.
- 3) Any event linked to the CPS charge bundle is also linked to a statement entered in the current round ST section.
- 4) Any event linked to the CPS charge bundle is one of the following types of events and COST data is collected about this event in the current round NS section:
  - a) On-going OM rental
  - b) OM supplies
  - c) PM purchases
  - d) On-going HH event

These types of events are linked to a single EVNT record. If SP reports that an OM rental is still being rented, reports that they have purchased OM supplies in the current round, reports that they have purchased a PM in the current round, or reports that a HH provider continues to provide care in the current round, a new EVNT record is not created. Instead, a current round PMRO or HERO record linked to the EVNT record is created.

If one of these event types is linked to a CPS charge bundle and is also linked to a statement in the current round ST section, the event will not get asked about in CPS.

If one of these event types is linked to a CPS charge bundles and is not linked to a statement in the current round ST section, the event will first be asked about in NS. In NS, if the respondent reports that the SP expects to receive something in the mail (NS2-EXMCMail = 1) or that the event was entered in error (EXMCMail = 3), we will not collect COST data in NS for this event. Therefore, this event will be asked about in CPS. Otherwise, we will collect NS COST data for these events (EXMCMail ^= 1 and ^= 3) and these events will not get asked about in CPS.

The exception to this rule is an event that is asked about in NS that does not get asked NS1-NSEXMCAIL. These events will be also be asked about in CPS. In addition, if administering CPS for a CPS charge bundle and CPS routes NS to collect charge data, when NS probes if other events are included in the charges, if an event is linked to this charge bundle that is also linked to another CPS charge bundle, the event will still get asked about in CPS.