MEDICAL EXPENDITURE PANEL SURVEY

HOUSEHOLD COMPONENT MAIN STUDY

BLAISE/WVS SHOW CARDS

Panels 16, 17, and 18

January 2013





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CARD RE-1

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

One or more may be selected.

R

E-

CARD RE-2

- -- White
- -- Black or African American
- -- American Indian or Alaska Native
- -- Asian Indian
- -- Chinese
- -- Filipino
- -- Japanese
- -- Korean
- -- Vietnamese
- -- Other Asian
- -- Native Hawaiian
- -- Guamanian or Chamorro
- -- Samoan
- -- Other Pacific Islander

One or more may be selected.

CARD RE-3

- -- Less than 1st Grade
- -- 1st Grade
- -- 2nd Grade
- -- 3rd Grade
- -- 4th Grade
- -- 5th Grade
- -- 6th Grade
- -- 7th Grade
- -- 8th Grade
- -- 9th Grade
- -- 10th Grade
- -- 11th Grade
- -- 12th Grade, No Diploma
- -- GED or Equivalent
- -- High School Diploma
- -- Some College, No Degree
- -- Associate Degree: Occupational, Technical, or Vocational Program
- -- Associate Degree: Academic Program
- -- Bachelor's Degree (Example: BA, AB, BS, BBA)
- -- Master's Degree (Example: MA, MS, MEng, MEd, MBA)
- -- Professional School (Example: MD, DDS, DVM, JD)
- -- Doctorate Degree (Example: PhD, EdD)

R E-3

CARD PE-1

Bladder	 Melanoma
Blood	 Mouth/Tongue/Lip
Bone	 Ovary
Brain	 Pancreas
Breast	 Prostate
Cervix	 Rectum
Colon	 Skin – Non-Melanoma
Esophagus	 Skin (unknown type)
Gallbladder	 Soft tissue muscle or fat
Kidney	 Stomach
Larynx-Windpipe	 Testis
Leukemia	 Throat-Pharynx
Liver	 Thyroid
Lung	 Uterus
Lymphoma	 Other

CARD HE-1

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

CARD CS-1

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

CARD CS-2

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

S-3

CARD CS-3

- -- Never
- -- Sometimes
- -- Usually
- -- Always

CARD CS-4

None

1

2

3

4

5-9

10 or more

CARD CS-5

Worst Health Care Possible 1 2 4 6 8 9 10 Best Health Care Possible

TYPES OF HEALTH CARE PROVIDERS AND FACILITIES

Mental Health Therapist

Medical Professionals and Practitioners:

Medical Doctor Nurse or Nurse Practitioner Paramedic Health Aide Physician's Assistant Midwife/Nurse Midwife

Optometrist/Ophthalmologist
Podiatrist (Foot Doctor)
Chiropractor
Acupuncturist

Therapist - Physical, Speech,

Occupational
Audiologist
Physiatrist
Physical Therapy or
Rehabilitation Services

Mental Health Professionals:

Psychiatrist Psychologist Psychiatric Social Worker P P-

Medical Facility or Clinic:

Health Clinic
Walk-in Surgi-Clinic
Company or School Clinic
Infirmary
Neighborhood Health Clinic
Family Planning Center
Mental Health Facility
Retail Clinic (e.g.,
Pharmacy/
Grocery Store Clinic)

Dental Care:

Dentist
Dental or Oral Surgeon
Orthodontist
Dental Hygienist
Dental Technician
Dental Assistant

TYPES OF HOSPITAL SERVICES	TYPES OF LONG TERM CARE FACILITIES	
Hospital Stay	Convalescent Home	
English Daniel Wield	Nursing Home	
Emergency Room Visit Outpatient Department Visit	Nursing Home Unit of a Hospital P	
Outpatient Department Visit	Intermediate Care Facilities	P- 2
	Board and Care Homes	_
	Residential Psychiatric Institution	
	Facility for the Intellectually Disabled	
	Group Homes	
	Long Term Place that Provides Hospice Care	7- dd
	Long Term Place that Provides Respite Care	

Assisted Living Facilities

TYPES OF HOME CARE SERVICES

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

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

Other Diabetic Equipment or Supplies

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
- -- Adult disposable diapers
- -- Catheters
- -- Syringes not prescribed by a physician
- -- IV supplies

ALTERATIONS/MODIFICATIONS

- -- Ramps
- -- Handrails
- -- Elevators
- -- Automobile modifications

OTHER

TYPES OF DENTAL CARE PROVIDERS

Dentist

Dental or Oral Surgeon

Orthodontist

Dental Hygienist

Dental Technician

Dental Assistant

P

TYPES OF MEDICAL PROVIDERS

Medical Professionals:

Medical Doctor Physician's Assistant

Nurse Optometrist/Ophthalmologist

Nurse Practitioner Podiatrist (Foot Doctor)

Midwife/Nurse Midwife Chiropractor

Physiatrist Acupuncturist

Paramedic Audiologist

Health Aide

Physical Therapy or Rehabilitation Services

Therapist-Physical, Speech, Occupational

Mental Health Professionals:

Psychiatrist

Psychologist

Psychiatric Social Worker

Mental Health Therapist

P

P-

TYPES OF HOSPITAL SERVICES

Hospital Stay

Emergency Room Visit

Outpatient Department Visit

P P

TYPES OF OTHER MEDICAL PROVIDERS

Medical Professionals and Practitioners:

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

Infirmary

Neighborhood Health Clinic

Family Planning Center

Mental Health Facility

Retail Clinic (e.g., Pharmacy/Grocery Store Clinic)

Mental Health Professionals:

Psychiatric Social Worker Mental Health Therapist

TYPES OF HOME CARE SERVICES

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

TYPES OF LONG TERM CARE FACILITIES

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Conval	Laccant	$H \cap m \cap a$
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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

P

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

Other Diabetic Equipment or Supplies

P

P-

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
- -- Adult disposable diapers
- -- Catheters
- -- Syringes not prescribed by a physician
- -- IV supplies

ALTERATIONS/MODIFICATIONS

- -- Ramps
- -- Handrails
- -- Elevators
- -- Automobile modifications

OTHER

P

CARD EV-1A (Rounds 1, 2 and 4)

- -- Hospital Stay
- -- Hospital Emergency Room
- -- Hospital Outpatient Department
- -- Medical Provider
 - e.g., Doctor's Office, Group Practice,
 Clinic, HMO, Lab, Mental Health Care,
 Alternative Care
- -- Dental Office/Dental Clinic
- -- At Home
- -- Other Medical Expenses
 - Eyeglasses or Contact Lenses
 - Insulin, Other Diabetic Equipment/Supplies
- -- Institutional/Long Term Care Stay
 - e.g., Nursing Home, Rehabilitation Facility,
 Drug Treatment, Psychiatric Facility

CARD EV-1B (Rounds 3 and 5)

- -- Hospital Stay
- -- Hospital Emergency Room
- -- Hospital Outpatient Department
- -- Medical Provider
 - e.g., Doctor's Office, Group Practice, Clinic,
 HMO, Lab, Mental Health Care, Alternative Care
- -- Dental Office/Dental Clinic
- -- At Home
- -- Other Medical Expenses
 - Eyeglasses or Contact Lenses
 - Insulin, Other Diabetic Equipment/Supplies
 - Ambulance, Orthopedic Items, Hearing
 Devices, Prostheses, Bathroom Aids, Medical
 Equipment, Disposable Supplies,
 Alterations/Modifications
- -- Institutional/Long Term Care Stay
 - e.g., Nursing Home, Rehabilitation Facility,
 Drug Treatment, Psychiatric Facility

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

Η

S-

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)

E R-1

CARD ER-2

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

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

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

CARD OP-3

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

- -- Doctor's Office or Group Practice
- -- Managed Care Plan Center/HMO
- -- Medical Clinic
- -- Rural Health Clinic
- -- Company Clinic
- -- School Clinic
- -- Other Clinic
- -- Neighborhood Family Health Center
- -- Community Health Center
- -- Birthing Center
- -- Walk-in Urgent Care
- -- Laboratory/X-ray Facility
- -- Laser Eye Surgery Center
- -- Other Freestanding Surgical Center
- -- VA Facility
- -- Indian Health Service (IHS) Facility
- -- Some Other Place

M V-

- -- 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

- -- 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

M V-3

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

CARD DN-1

- -- General Dentist
- -- Hygienist (Dental)
- -- Technician (Dental)
- -- Dental Surgeon
- -- Orthodontist
- -- Endodontist
- -- Periodontist
- -- Other

D

N-

CARD DN-2

* 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

D N-2

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

H H-

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

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

H H-2

CARD HH-3

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 CP-1

- -- 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
 - -- Military Facility
 - -- Public Assistance/Medicaid/SCHIP
 - -- Indian Health Service (IHS)
 - -- 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

1

CARD PC-1

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

A P-1

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

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

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

- -- Never
- -- Sometimes
- -- Usually
- -- Always

- -- 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

A C-4

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

- -- 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
- -- Directly From a High Risk Pool
- -- From a Previous Employer
- -- From a Previous Employer (COBRA)

Sample Medicare Card



2

Sample Medicaid Card [State Name Here]

(One for Each State)

Η

X-

- -- From a Group or Association
- -- Directly Through a School
- -- Directly From an Insurance Agent
- -- Directly From Insurance Company
- -- Directly From an HMO
- -- Directly From an High Risk Pool
- -- 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

H X-

Medicare Managed Care Plans [State Name Here]

(One for Each State)

- -- 1 50
- -- 51 100
- -- 101 200
- -- 201 300
- -- 301 or more

-- 1 - 30

-- 31 - 60

-- 61 - 90

-- 91 - 120

-- 121 or more

 \mathbf{H}

X-7

State-Specific Plan Names [State Name Here]

(One for Each State)

Η

X-

8

- 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

H

X-

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

(One for Each State)

H X-10

- -- 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

Η

X-

11

CARD SP-1

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

CARD SP-2

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

SP

-- 100,001 or more

IN -1

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

11° -2

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

- -- 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

- -- 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

- -- 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

-- 500,001 or more

- -- Certificates of Deposit (CDs)
- -- Government savings bonds
- -- Individual development accounts
- -- Treasury bills
- -- Bonds
- -- Bond mutual funds
- -- Shares of stock
- -- Stock mutual funds
- -- Education savings accounts
- -- Annuities
- -- Trusts
- -- Other financial assets

- -- Second homes
- -- Rental real estate
- -- Business or Farm
- Money owed to you by persons outside of the family
- -- Boats or other recreational vehicles
- -- Other significant assets such as jewelry, art work or antiques