Attachment 1 - MEPS-HC Section Summary and Changes

Summary of questionnaire sections and changes for the MEPS-HC since the previous OMB clearance. The sections are listed in alphabetical order, not the order which they occur in the instrument. All 42 sections of the current core instrument are available on the AHRQ website at http://meps.ahrq.gov/mepsweb/survey_comp/survey_questionnaires.jsp.

The MEPS-HC questionnaires for Rounds 1–5 consist of many individual sections. Listed below is a brief description of each section, including changes that have been made since the last OMB clearance.

Access to Care (AC)

This supplemental section, asked in Rounds 2 and 4, identifies whether each household member has a medical provider who provides the usual source of care (USC), reasons why members without a USC do not have a USC, various aspects of satisfaction with usual care providers, and problems a household may have experienced in obtaining needed health care. It also includes questions on possible language barriers to health care and specific problems any household member may have experienced in obtaining needed health, dental, or prescription medicine care.

Changes: None

Adult Self-Administered Questionnaire (Adult SAQ)

A brief self-administered questionnaire (SAQ) will be used to collect self-reported (rather than through household proxy) information on health status, health opinions and satisfaction with health care for adults 18 and older. The satisfaction with health care items are a subset of items from the Consumer Assessment of Healthcare Providers and Systems (CAHPS). The health status items are the Short Form 12 Version 2 (SF-12 version 2), which has been widely used as a measure of self-reported health status in the United States, the Kessler Index (K6) of non-specific psychological distress, and the Patient Health Questionnaire (PHQ-2)

Item	Changes	Year	Text
		2010	
12	Question added.	2013	In the last 12 months, did a doctor or other health provider give you instructions about what to do about a specific illness or health condition?
13	Question added.	2010	
15	Question added.	2013	In the last 12 months, how often were these instructions easy to understand?
		2010	
14	Question added.	2013	In the last 12 months, how often did doctors or other health providers ask you to describe how you were going to follow these instructions?
		2010	
15	Question added.	2013	In the last 12 months, did you have to fill out or sign any forms at a doctor's or other health provider's office?
		2010	
16	Question added.	2013	In the last 12 months, how often were you offered help in filling out a form at the doctor's or other health provider's office?

Assets (AS)

To supplement financial data collected in the Income section, the Assets supplemental section, asked in Round 5, asks about household members' real estate, businesses, vehicles, investments, other assets, and debts.

Item	Changes	Year	Text
4504	Deleted phrase "That is, what would it sell for if sold	2010	About how much is the current value of this home? That is, what would it sell for if sold today?
AS04	today?"	2013	About how much is the current value of this home if sold today?
AS17	Simplified probe to "Anyone else?"	2010	Who in the family has Individual Retirement Accounts (IRAs) or other retirement accounts (such as 401K, 403(b) or Keogh accounts)?

Item	Changes	Year	Text
			PROBE: Does anyone else in the family have these retirement accounts?
		2013	Who in the family has Individual Retirement Accounts (IRAs) or other retirement accounts (such as 401K, 403(b) or Keogh accounts)?
			PROBE: Anyone else?
		2010	Who in the family has bank accounts, including checking accounts, savings accounts, or money market accounts?
AS21	Simplified probe to "Anyone else?"	2010	PROBE: Does anyone else in the family have bank accounts, including checking accounts, savings accounts, or money market accounts?
	eise:	2013	Who in the family has bank accounts, including checking accounts, savings accounts, or money market accounts?
			PROBE: Anyone else?
	Simplified question text.	2010	Now think about the approximate value of some other financial assets your family may own. Does anyone in the family have any of the following assets: 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 to which they are beneficiaries, or other financial assets?
AS24			Please do not include any accounts or assets that we have already talked about.
		2013	Now think about the approximate value of some other financial assets your family may own. Please look at this card. Does anyone in the family have any of these assets?
			Please do not include any accounts or assets that we have already talked about.
	Simplified question text.	2010	Now please think about the approximate value of all other property and assets your family may own. Does anyone in the family have any of the following assets: second homes, rental real estate, a business or farm, money owed to you by persons outside of the family, boats or other recreational vehicles, or other significant assets such as jewelry, art work or antiques?
AS28			Please do not include any property or assets we have already talked about.
		2013	Now please think about the approximate value of all other property and assets your family may own. Please look at this card. Does anyone in the family have any of these assets?
			Please do not include any property or assets we have already talked about.

Calendar Section (CA)

This section monitors the use of a health events calendar provided to the respondent during the MEPS pre-contact interview for use in recording visits to medical providers and medical places. This information determines the household's path through the sections of the questionnaire that collect information on medical events.

Item	Changes	Year	Text
CA01	Simplified question text.	2010	We've talked about health conditions for the family. The next set of questions is about health care received {in the last few months/between {START DATE OF REFERENCE PERIOD} and {END DATE OF REFERENCE PERIOD}}. Some of these questions ask for information which may be difficult to remember. Because it is important to the U.S. Public Health Service to get complete and accurate information, please take your time in answering these questions.
5,62		2013	The next questions are about health care received {since {START DATE OF REFERENCE PERIOD}/between {START DATE OF REFERENCE PERIOD} and {END DATE OF REFERENCE PERIOD}}. Some of these questions ask for information which may be difficult to remember. It is important to get complete and accurate information, so please take your time and feel free to refer to any records you may have.

Item	Changes	Year	Text
CA02	Omitted first sentence, revised to clarify time	2010	We've talked about health conditions for the family. The next set of questions is about health care received {in the last few months/between {START DATE OF REFERENCE PERIOD} and {END DATE OF REFERENCE PERIOD}}. As you may remember from the last interview, some of these questions ask for information which may be difficult to remember.
	frame.	2013	The next questions are about health care received {since {START DATE OF REFERENCE PERIOD}/between {START DATE OF REFERENCE PERIOD} and {END DATE OF REFERENCE PERIOD}}. As you may remember from the last interview, some of these questions ask for information which may be difficult to remember.

Charge Payment (CP)

The Charge Payment section tracks total charges and sources of payment for medical events reported in earlier sections. The section obtains specific information for each medical event reported on total charges, copayments, out-of-pocket payments, insurance payments, reimbursements, discounts, disallowed amounts, balance due, and other sources of payment. Additionally, it clarifies how prescription medicine claims are processed, including questions about third party payers for prescription medicines.

Item	Changes	Year	Text
	Added description of "source" to question text.	2010	Has any {other} source already paid for any of the charges for {this hospital stay/this visit/the last purchase of {NAME OF PRESCRIBED MEDICINE}/the services for (FLAT FEE GROUP)/the {OME ITEM GROUP NAME}/the services received at home}?
CP12		2013	Has any {other} source already paid for any of the charges for {this hospital stay/this visit/the last purchase of {NAME OF PRESCRIBED MEDICINE}/the services for {FLAT FEE GROUP}/the {OME ITEM GROUP NAME}/the services received at home}?
			By other source, we mean a private insurance company, an HMO, Medicare, Medicaid, or any other public program that may have paid.

Child Preventive Health (CS)

This supplemental section, asked in Rounds 2 and 4, collects information on general health status, special health care needs, potential behavioral problems, accessibility to health care, preventative care, height, and weight of any child in the family.

Item	Changes	Year	Text
CS09A	Omitted first sentence.	2010	The following questions are about the health care (PERSON) received in the last 12 months. In the last 12 months, did (PERSON) have an illness, injury or condition that needed care right away in a clinic, emergency room, or doctor's office?
		2013	In the last 12 months, did {you/{PERSON}} have an illness, injury or condition that needed care right away in a clinic, emergency room, or doctor's office?
CS22	Omitted first sentence.	2010	The following questions are about amounts and types of preventive care (PERSON) may receive when (he/she) goes to see a doctor or other health provider. Has a doctor or other health provider ever measured (PERSON)'s height?
		2013	Has a doctor or other health provider ever measured {your/{PERSON}'s} height?

Closing (CL)

At the end of each rounds interview, participants are asked to provide written authorization for the MEPS to collect additional information from the medical providers, insurance providers, and employers identified throughout each interview. The Closing section facilitates the completion of authorization forms for each unique person-provider pair and each unique person-establishment pair. During subsequent rounds of data collection, the MEPS-MPC and the MEPS-IC collect data on the medical visits and insurance coverage directly from medical providers and sources of insurance (e.g., employers) based on the authorization

specified in these forms. This section also prompts the distribution of the Self Administered Questionnaire (SAQ) and Diabetes Care Survey (DCS). In addition, this section verifies the contact information for the household for use in the next interview and accounts for memory aids that were used by the household members throughout the current rounds interview.

Item	Changes	Year	Text
CL01	.01 Simplified question text.	2010	[[As I mentioned during the last interview], it/It] is important for us to get accurate names and addresses for medical providers so that we can contact them for more information about the services they provide. To do this, we must have written authorization from the family members receiving these services. I would like to get authorization from the following people: [HAND RESPONDENT THE AUTHORIZATION FORM BOOKLET.] [These materials explain more about why we contact medical providers and answer questions people sometimes ask about this part of the study. Please take a minute to review this information while I prepare the forms.]
		2013	{[As I mentioned during the last interview], we/We} request written authorization to contact medical providers for more information about the services they provide. I would like to get authorization from the following people: [HAND RESPONDENT THE AUTHORIZATION FORM BOOKLET.] [These materials explain more about why we contact medical providers and answer questions people sometimes ask about this part of the study. Please take a minute to review this information while I prepare the forms.]
CL06A	Introductory text added when CL01 has not been asked for RU.	2010	PID: [PID-3] PERSON: [First,[Middle],Last Name-35] DOB: [MM/DD/YYYY] AGE: [XXX] STATUS: [Status Code Description] DATE ORIGINALLY INSTITUTIONALIZED: [MM/DD/YYYY] DATE REJOINED COMMUNITY/CHANGED STATUS: [MM/DD/YYYY] SIGNATURE DATE ON MPC AF MUST BE ON OR AFTER: {MM/DD/YYYY} INTERVIEWER: THE PERSON NAMED ABOVE WAS INSTITUTIONALIZED IN A PREVIOUS ROUND AND HAS NOW REJOINED THE COMMUNITY OR CHANGED STATUS. COMPLETE THE FOLLOWING STEPS: 1. FILL OUT HEALTH CARE INSTITUTION HISTORY. 2. COMPLETE A MPC AF FOR EACH DIFFERENT HEALTH CARE INSTITUTION LISTED ON HEALTH CARE INSTITUTION HISTORY. WRITE 'IC' IN UPPER LEFT CORNER OF MPC AF. REFER TO SECTION 3 OF HISTORY FOR INSTRUCTIONS ON COMPLETING THESE AF(S). 3. REQUEST SIGNATURE(S) ON AF(S). 4. LEAVE UNSIGNED AF(S) AND THE AF BOOKLET WITH RESPONDENT. 5. PLACE EACH SIGNED MPC AF. CAPI WILL NOT COLLECT INFORMATION ON STATUS. PRESS ENTER OR SELECT NEXT PAGE TO CONTINUE. PID: [PID-3] PERSON: [First,[Middle],Last Name-35] DOB: [MM/DD/YYYY] AGE: [XXX] STATUS: [Status Code Description] DATE ORIGINALLY INSTITUTIONALIZED: [MM/DD/YYYY] DATE REJOINED COMMUNITY/CHANGED STATUS: [MM/DD/YYYY] RU ID: [RUID-7] REGION: [Reg ID-1] SIGNATURE DATE ON MPC AF MUST BE ON OR AFTER: {MM/DD/YYYY} RUPE INFORMATION SHOULD BE ADOLUTED.
			{We request written authorization to contact medical facilities for more information about the services they provide. [HAND RESPONDENT THE AUTHORIZATION FORM BOOKLET.] [These materials explain more about why we contact medical facilities and answer questions people sometimes ask about this part of the study. Please take a minute to review this information while I prepare the forms.]}

Item	Changes	Year	Text
			INTERVIEWER: THE PERSON NAMED ABOVE WAS INSTITUTIONALIZED IN A PREVIOUS ROUND AND HAS NOW REJOINED THE COMMUNITY OR CHANGED STATUS. COMPLETE THE FOLLOWING STEPS:
			1. FILL OUT HEALTH CARE INSTITUTION HISTORY.
			2. COMPLETE A MPC AF FOR EACH DIFFERENT HEALTH CARE INSTITUTION LISTED ON HEALTH CARE INSTITUTION HISTORY. WRITE 'IC' IN UPPER LEFT CORNER OF MPC AF. REFER TO SECTION 3 OF HISTORY FOR INSTRUCTIONS ON COMPLETING THESE AF(S).
			3. REQUEST SIGNATURE(S) ON AF(S).
			4. LEAVE UNSIGNED AF(S) AND THE AF BOOKLET WITH RESPONDENT.
			5. PLACE EACH SIGNED MPC AF IN THE CASE FOLDER. MAKE FOLLOW-UP ARRANGEMENTS FOR EACH UNSIGNED MPC AF. CAPI WILL NOT COLLECT INFORMATION ON STATUS.
			As you know, the Department of Health and Human Services is very interested in obtaining the most complete and accurate information about health care use and expenditures, including prescription medicines.
CL29	Omitted; revised into CL30.	2010	Many pharmacies now offer their customers a summary of their prescription medicine charges. People sometimes request these summaries to help in preparing their taxes or insurance claims.
			To help us get the best information about the family's prescriptions, we would like to obtain a printed summary from each pharmacy used by this family. To do this, we must have written authorization.
		2013	
			From the information I have, I would like to get a signed authorization form for:
		2010	(READ PERSON BELOW)'s prescriptions filled at (READ PHARMACY BELOW).
			[HAND RESPONDENT THE AUTHORIZATION FORM BOOKLET.]
	Revised text.		[These materials explain more about why we contact pharmacies and answer questions people sometimes ask about this part of the study. Please take a minute to review this information while I gather the forms.]
CL30			To obtain complete and accurate information about health care use and expenditures, we would like authorization to contact pharmacies to obtain a printed summary for:
		2013	(READ PERSON BELOW)'s prescriptions filled at (READ PHARMACY BELOW).
			[HAND RESPONDENT THE AUTHORIZATION FORM BOOKLET.]
			[These materials explain more about why we contact pharmacies and answer questions people sometimes ask about this part of the study. Please take a minute to review this information while I gather the forms.]
CL41	Simplified question text. Round 5 revised to reference Quick Response Survey.	2010	{In the coming months, we will be contacting this family again to collect information on health care use and expenses./We are nearing the end of this study. I'd like to thank you for your participation in this important study. Just in case my supervisor needs to reach you to verify that I was here and collected this information correctly, I'd like to verify a few pieces of information.}
			{Just to make sure I can reach you for the next interview, I'd like to ask a few questions about how to find the family./Let me quickly review and update the information we have for locating the family that was collected during the last interview.}
		2013	{In the coming months, we will be contacting you again to collect information on health care use and expenses./We are nearing the end of this study. I'd like to verify a few pieces of

Item	Changes	Year	Text
			information in case my supervisor needs to reach you to confirm that I was here and collected this information correctly. Also, AHRQ is sometimes asked to provide up-to-date information on health-related topics that are not covered in the MEPS survey. This year, they have asked us to contact a small number of MEPS households for a brief, 5-minute telephone interview. These calls will begin in the next month or so.}
			{Just to make sure I can reach you for the next interview, I'd like to ask a few questions to help locate you in case you move./ Let me quickly review and update the information we have for locating you that was collected during the last interview.}
		2010	[What is the name, address, and phone number of that person?]
CL51	Added probe for contact person relationship.	0040	[What is the name, address, and phone number of that person?]
	person relationship.	2013	[PROBE: What is (his/her) relationship to {NAME OF REFERENCE PERSON}?]
CL52	Omitted. Contact person relationship collected at CL51.	2010	What is {NAME OF CONTACT PERSON FROM CL51}'s relationship to {NAME OF REFERENCE PERSON}?
		2013	
CL52_2	Omitted. Relationship collected at CL51.	2010	What is {NAME OF CONTACT PERSON FROM CL51}'s relationship to {NAME OF REFERENCE PERSON}?
		2013	
		2010	Thank you again for your cooperation in this important research. {This check is a gift for your participation in this study. The next interview will take place in about six months./This check is a gift for your participation in this study.}
CL65	Simplified question text. Added text reflecting the gift		Thank you again for your cooperation in this important research. This check is a gift to show our appreciation. {The next interview will take place in about six months.}
	certificates distributed after Round 5.	2013	{GIVE RESPONDENT CERTIFICATE: I would also like to thank you on behalf of the two Department of Health and Human Services agencies that sponsor this study the Agency for Healthcare Research and Quality and the Centers for Disease Control and Prevention. As a token of their appreciation, they would like you to have this certificate recognizing your time and effort participating in the Medical Expenditure Panel Survey.}

Condition Enumeration (CE)

The Condition Enumeration section first obtains a summary assessment of each person's physical and mental health. It then identifies specific physical and mental health conditions, accidents, or injuries affecting each person. Using this information, this section creates a roster of conditions and health problems reported for each family member. Later in the interview, this roster links with health care utilization and disability day information.

Changes: None

Conditions (CN)

This section collects additional information about physical and mental health conditions identified through medical events or disability days. It obtains further details on each condition on each person's medical condition roster to determine if it was due to an accident or injury and whether it is on a priority list of conditions. If the condition is an accident or injury or a priority condition, subsequent questions ask whether a medical person has been consulted about the condition, when the condition was first noticed, the condition's severity, the current status of the condition, and any treatments received.

Changes: None

Dental Care (DN)

The Dental Care section obtains details on the nature of any dental care visit, type of dental care provider, treatments and services performed, and prescribed medicines.

Changes: None

Diabetes Care Self-Administered Questionnaire (Diabetes SAQ)

A brief self administered paper-and-pencil questionnaire on the quality of diabetes care is administered once a year (during round 3 and 5) to persons identified as having diabetes. Included are questions about the number of times the respondent reported having a hemoglobin A1c blood test, whether the respondent reported having his or her feet checked for sores or irritations, whether the respondent reported having an eye exam in which the pupils were dilated and the last time the respondent had his or her blood cholesterol checked and whether the diabetes has caused kidney or eye problems. Respondents are also asked if their diabetes is being treated with diet, oral medications or insulin.

Item	Changes	Year	Text
		2010	During (YEAR), how many times did a doctor, nurse, or other health professional check your blood for glycosylated hemoglobin or "hemoglobin A-one-C"? (A1C is a blood test that is primarily done to monitor the glucose level of diabetics. Please note that this is a blood test that has to be done in a lab, hospital, or doctor's office; this is NOT a test that you can perform at home.
2	Revised definition of AIC blood test.	2013	During (YEAR), how many times did a doctor, nurse, or other health professional check your blood for glycosylated hemoglobin or "hemoglobin A-one-C"? (A1C is a blood test to monitor the glucose level of diabetes over a period of several months. The A1C test is usually done in a lab, hospital, or doctor's office although a home kit containing materials for one or two tests is now available. The A1C test is not the same as a Home Glucose Monitoring test which is used at home to monitor glucose levels on a daily or weekly basis, and needs supplies of disposable test strips.)

Disability Days (DD)

The Disability Days section assesses the impact of any physical illness, injury, or mental or emotional problem on household members' attendance at work or school. These questions specify how many days of work or school were missed, for what health condition they were missed, and how many days were missed because of someone else's illness, injury, or health care needs.

Item	Changes	Year	Text
DD01	Added display specifications so that not all guestion text	2010	The next questions ask about time when (PERSON) may have missed a half day or more from work or school or spent a half day or more in bed {since (START DATE)/between (START DATE) and (END DATE)}. In answering these questions, please include any time when this occurred because of (PERSON)'s physical illness or injury, or a mental or emotional problem such as stress or depression.
	are displayed for every loop.	2013	{The next questions ask about time/Now think about} when {you/{(PERSON)} may have missed a half day or more from work or school or spent a half day or more in bed {since {START DATE}/between {START DATE} and {END DATE}}. {In answering these questions, please include any time when this occurred because of {your/{PERSON}'s} physical illness or injury, or a mental or emotional problem such as stress or depression.}

Emergency Room (ER)

The Emergency Room section obtains information on the health conditions requiring emergency room care, medical services provided, any surgical procedures performed, prescribed medicines, and the physicians and surgeons providing emergency room care. This section collects physicians and surgeons who are not already on the provider roster.

Changes: None

Employment (EM)

The Employment section covers questions about each person's employment or self-employment status. For jobs identified, this section asks questions to obtain contact information for each employer. For several types of jobs, questions are asked about type of business or industry, firm size, how long the person has worked at each job, whether health insurance was offered, hours worked, and job titles or main duties. For persons who are currently employed, questions ask about periods of unpaid leave at their job. For those not currently working, questions ask about previous jobs and the reasons for not working. Questions are asked about whether the person's job was temporary or seasonal, as well as questions about health insurance, including whether it was offered to the person, whether it was offered to any employee, and why the person was not eligible. Informed consent is obtained regarding contacting employers who provide health insurance.

Item	Changes	Year	Text
EM01	Added display specifications so that not all question text are displayed for every loop.	2010	Now I have some questions about work experience for (PERSON). {During our last interview on {PREV RD INTV DATE}, we recorded that (PERSON) did not work at any job for pay.} {(Do/Does)/As of 12/31/{YEAR}, did} (PERSON) {currently} have a job for pay or own a business {that we have not yet talked about}? PROBE: Do not count work around the house. Include work in a family farm or business, even if unpaid.
		2013	{Now I have some questions about work experience for {you/{PERSON}}.} {During our last interview on {PREV RD INTV DATE}, we recorded that {you/{PERSON}} did not work at any job for pay.} {{Do/Does}/As of 12/31/{YEAR}, did} {you/{PERSON}} {currently} have a job for pay or own a business {that we have not yet talked about}? PROBE: Do not count work around the house. Include work in a family farm or business, even if unpaid.

Employment Wage (EW)

The Employment Wage section collects detailed information about the wage structure for all non-self employed, current jobs identified in the previous Employment (EM) section.

Item	Changes	Year	Text
EW07 se	Question mark in first sentence changed to a	2010	I would just like to get a rough idea of how much (PERSON) {(earn/earns)/earned} at this job? Approximately how much {(do/does)/did} (PERSON) make per hour?
	period.	2013	I would just like to get a rough idea of how much {you/{PERSON}} {{earn/earns}/earned} at this job. Approximately how much {{do/does}/did} {you/he/she} make per hour?

Event Driver (ED)

The Event Driver verifies and modifies information entered in the Provider Probes, Event Roster, and Provider Roster sections. It also provides an opportunity to add new medical events throughout the interview if the respondent recalls an event after completing the Provider Probes section.

Item	Changes	Year	Text
ED01	Omitted; combined with ED02.	2010	{The next questions ask detail about each of the times (PERSON) received medical or dental care.}
		2013	
ED02	Question text from ED01 added.	2010	Let's talk about {the hospital stay for (PERSON) at (PROVIDER) that began on (ADMIT DATE)/when (PERSON) visited the emergency room at (PROVIDER) on (VISIT DATE)/when (PERSON) received medical care from an outpatient department at (PROVIDER) on (VISIT DATE)/when (PERSON) received medical care from (PROVIDER) on (VISIT DATE)/when

Item	Changes	Year	Text
			(PERSON) received dental care from (PROVIDER) on (VISIT DATE)/the {OME ITEM GROUP NAME} used by (PERSON) since (START DATE)/the services (PERSON) received at home from (PROVIDER) during (MONTH)}.
		2013	{The next questions ask detail about each of the times {you/{PERSON}} received medical or dental care.} Let's talk about {the hospital stay for {you/{PERSON}} at {PROVIDER} that began on {ADMIT DATE}/when {you/{PERSON}} visited the emergency room at {PROVIDER} on {VISIT DATE}/when {you/{PERSON}} received medical care from an outpatient department at {PROVIDER} on {VISIT DATE}/when {you/{PERSON}} received medical care from {PROVIDER} on {VISIT DATE}/when {you/{PERSON}} received dental care from {PROVIDER} on {VISIT DATE}/the {OME ITEM GROUP NAME} used by {you/{PERSON}} since {START DATE}/the services {you/{PERSON}} received at home from {PROVIDER} during {MONTH}}.

Event Roster (EV)

Probes continue in this section for additional detail on event dates, type of event, and type of provider. This section creates a roster displaying this information as it is linked to each person. The Event Roster links to further sections that collect more detailed data on each specific type of event and then the charge and payment for each event.

Changes: None

Flat Fee (FF)

The Flat Fee section functions as a subsection of Charge Payment (CP). It captures information on those types of medical payment arrangements that charge a grouped amount, or flat fee, for multiple visits or services.

Changes: None¶

Health Insurance (HX)

The Health Insurance section collects information about private health insurance obtained through an employer, direct purchase private insurance plans, and public health insurance programs. It identifies the household members covered by health insurance, type of plan, name of each plan, nature of coverage under each plan, duration of coverage, and who pays various costs for the policy premiums. It also identifies the household members not covered by health insurance. For employer-sponsored coverage, this section creates a link to job characteristics collected in the Employment (EM) section of the questionnaire. For individuals who are uninsured at the beginning of the year, the section collects information on the length of time they have been uninsured. For private insurance policies, it obtains information on employer-related coverage and non-employer-related coverage (i.e., purchased through a group, association, school, small business group, insurance company, etc.). The Health Insurance section also collects information for public insurance on Medicare, Medicaid/SCHIP, Medicaid waiver programs, CHAMPUS/CHAMPVA (now TRICARE/CHAMPVA), and other government programs. Questions related to whether the insurance will cover part of the cost of an out-of-network provider are asked.

Item	Changes	Year	Text
HX01	X01 Simplified question text.	2010	Now I'd like to talk with you about health insurance, an important topic for most persons. We want to know about all the health coverage that anyone in the family may have had to help pay the costs of medical care at any time {since (START DATE)/between (START DATE) and (END DATE)}.
		2013	Let's talk (again) about all the health insurance coverage the family may have to help pay for the costs of medical care {since {START DATE}/between {START DATE}}. My records indicate that (READ NAMES BELOW) {(are/is)} {either} {65 years old or older} {or}
HX05	Simplified question text.	2010	My records indicate that (READ NAMES BELOW) {(are/is)} {either} {65 years old or older} {or} {joined the household since our last interview}.
TIXOS		2013	We show that (READ NAMES BELOW) {(are/is)} {either} {65 years old or older} {or} {joined the household since our last interview}.
HX06	Simplified question text.	2010	There are several large public health insurance programs {with similar names} that are easily confused.

Item	Changes	Year	Text
			Medicare is a health insurance program for persons 65 years or over and for disabled persons. Other programs, such as {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}, are state programs which cover low income families and individuals or children who do not have private health insurance.
			Let me first ask about Medicare. People covered by Medicare usually have a card that looks like this.
			At any time since (START DATE), has anyone in the family been covered by Medicare?
		2013	Medicare is a health insurance program for persons 65 years or over and for some disabled persons. People covered by Medicare usually have a card that looks like this.
			At any time since {START DATE}, has anyone in the family been covered by Medicare?
			{Some people are covered by programs called {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}. These are state programs for low income families and individuals or children who do not have private health insurance. They sometimes cover persons with very large medical bills or those in nursing homes.}
		2010	{SHOW CARD HX-3.} {People covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} usually have a (piece of paper/card) that looks something like this.}
HX10	Simplified question text.		{During the last interview, we recorded that no one in the family was covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}.}
			Has anyone in the family been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} at any time {since (START DATE)/between (START DATE) and (END DATE)}?
		2013	{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} are state programs that pay for health care for persons in need. People covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} may have a (piece of paper/card) that looks something like this.
			At any time {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the family been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}?
		2010	{During the last interview, we recorded that no one in the family was covered by TRICARE or CHAMPVA.}
HX12	Omitted first sentence.	2010	At any time {since (START DATE)/between (START DATE) and (END DATE)}, has anyone in the family been covered by TRICARE or CHAMPVA?
		2013	At any time {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the family been covered by TRICARE or CHAMPVA?
		0040	{During the last interview, we recorded that no one in the family was covered by any other state sponsored program which provided hospital and physician benefits .}
HX14	Omitted first sentence; changed "obtained through" to "from."	2010	At any time {since (START DATE)/between (START DATE) and (END DATE)}, has anyone in the family had any other type of health insurance obtained through any state or local government agency which provided hospital and physician benefits ?
		2013	At any time {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the family had any other type of health insurance from any state or local government agency which provided hospital and physician benefits?
HX16	Omitted first sentence; slightly revised text.	2010	{During the last interview, we recorded that no one in the family/Some people} receive{d} health benefits from other state programs such as (READ PROGRAM NAMES BELOW) or other public programs that provide coverage for health care services.
			{STATE NAME FOR PROGRAM #1} {STATE NAME FOR PROGRAM #2} {STATE NAME FOR PROGRAM #4}
			At any time {since (START DATE)/between (START DATE) and (END DATE)}, has anyone in the

Item	Changes	Year	Text
			family been covered by any program like this?
			Some people receive health benefits from other state programs such as (READ PROGRAM NAMES BELOW) or other public programs that provide coverage for health care services.
		2013	{STATE NAME FOR PROGRAM #1} {STATE NAME FOR PROGRAM #2} {STATE NAME FOR PROGRAM #4}
			At any time {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the family been covered by any program like this?
		2010	Next, I have some questions about other sources of health insurance anyone in the family may have had {since (START DATE)/between (START DATE) and (END DATE)} to help pay hospital and doctor bills and other health expenses such as nursing home care or prescribed medicines. {This includes Medigap or Medicare Supplements, plans through a private insurance carrier, which some people who are eligible for Medicare have as additional coverage.}
HX21	Added roster of insurance names.	2013	Next, I have some questions about other sources of health insurance anyone in the family may have had {since {START DATE}/between {START DATE} and {END DATE}} to help pay hospital and doctor bills and other health expenses such as nursing home care or prescribed medicines. {This includes Medigap or Medicare Supplements, plans through a private insurance carrier, which some people who are eligible for Medicare have as additional coverage.}
			{Since {START DATE}/Between {START DATE} and {END DATE}} we show the family has had the following health insurance:
			May I please see (PERSON)'s Medicare card?
LIVOS	Revised to ask respondent to get out Medicare card	2010	IF NECESSARY, SAY: We do not need (PERSON)'s Medicare number, but would like to record the exact date (PERSON)'s Medicare coverage became effective and what type of coverage (PERSON) has through Medicare.
HX25	rather than hand it to interviewer.		(PERSON) has through Medicare. Can you please take out {your/{PERSON}'s} Medicare card?
	interviewer.	2013	We do not need {your/his/her} Medicare number, but would like to record the exact date {your/his/her} Medicare coverage became effective and what type of coverage {you/he/she} {have/has} through Medicare.
			INTERVIEWER: CODE MEDICARE CARD(S) SHOWN/AVAILABLE.
HX26	Revised to ask respondent to get out Medicare card rather than hand it to	2010	MEDICARE CARD (RED, WHITE AND BLUE) 1 RAILROAD RETIREMENT BOARD CARD (RED, WHITE AND BLUE) 2 SOME OTHER CARD 3
	interviewer.	2013	Is that card a regular Medicare card, a Railroad Retirement Board card, or some other Medicare card?
			INTERVIEWER:
			RECORD THE FOLLOWING INFORMATION FROM THE CARD:
LIV27	Revised to ask respondent to get out Medicare card	2010	EFFECTIVE DATE: [Enter Month,Day,Year-4]
HX27	rather than hand it to interviewer.		TYPE OF COVERAGE (IS ENTITLED TO): HOSPITAL ONLY
		2013	Please tell me the effective date listed on the card.
		2013	{Are/Is} {you/{PERSON}} entitled to hospital (Part A), medical (Part B), or both?
HX31	Revised to ask respondent to read information from card rather than hand it to interviewer.	2010	As you may know, Medicare allows beneficiaries to enroll in Medicare Advantage or managed care plans, such as HMOs (Health Maintenance Organizations) or PPOs (Preferred Provider Organizations) to receive their Medicare-funded health care. These plans have names like those listed on this card.
			Is the name of (PERSON)'s insurance through Medicare{, as of (END DATE),} listed on this card?

Item	Changes	Year	Text
		2013	Is the name of {your/{PERSON}'s} insurance plan through Medicare{, as of {END DATE},} listed on this card?
HX32		2010	Even though (PERSON)'s Medicare plan is not listed on the card, {(are/is) (PERSON) currently/(were/was) (PERSON)} enrolled in a Medicare managed care plan such as an HMO (Health Maintenance Organization) or PPO (Preferred Provider Organization) {as of (END DATE)}? When answering this question, please include only insurance from Medicare, not any privately purchased insurance and not any job- related insurance.
11/32	Simplified question text.	2013	{{Are/Is} {you/{PERSON}} currently/As of {END DATE}, {were/was} {you/{PERSON}} enrolled in a Medicare Advantage or managed care plan, such as an HMO (Health Maintenance Organization) or PPO (Preferred Provider Organization) to receive {your/his/her} Medicare-funded health care? When answering, please include only insurance from Medicare, not any privately purchased or job-related insurance.
	First sentence revised to an	2010	Many Medicare beneficiaries pay the premium for their Medicare Advantage coverage through their Social Security checks. Some pay directly to the provider. How (do/does) (PERSON) pay for (PERSON)'s {{{PLAN NAME ENTERED AT HX310V}/{NAME OF PLAN FROM HX33}}/Medicare managed care} premium?
HX34A	"if necessary" statement.		How {do/does} {you/{PERSON}} pay for {your/his/her} {{{PLAN NAME ENTERED AT HX31OV}/{NAME OF PLAN FROM HX33}}/Medicare managed care} premium?
		2013	IF NECESSARY, SAY: Is the Medicare Advantage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?
	C'art and a second second	2010	Many Medicare beneficiaries pay the premium for their Medicare drug coverage through their Social Security checks. Some pay directly to the provider? How (do/does) (PERSON) pay for (PERSON)'s Part D premium? How {do/does} {your/{PERSON}} pay for {your/his/her} Part D premium?
HX35C	First sentence revised to an "if necessary" statement.		
		2013	IF NECESSARY, SAY: Is the Medicare drug coverage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?
			{Some people on {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} can enroll in plans called HMOs. These plans have names like those listed on this card.}
HX41	Omitted first paragraph.	2010	Is the name of the health insurance through {{Medicaid/{STATE NAME FOR MEDICAID}}} or {STATE CHIP NAME}/the program sponsored by a state or local government agency which provides hospital and physician benefits}{, between (START DATE) and (END DATE),} listed on this card?
		2013	Is the name of the health insurance through {{Medicaid/{STATE NAME FOR MEDICAID}}} or {STATE CHIP NAME}/the program sponsored by a state or local government agency which provides hospital and physician benefits}{, between {START DATE} and {END DATE),}} listed on this card?
		2010	Under {{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}/ the program sponsored by a state or local government agency which provides hospital and physician benefits} {(are/is)/(were/was)} (READ NAME(S) FROM BELOW) signed up with an HMO, that is a Health Maintenance Organization {between (START DATE) and (END DATE)}?
HX42	Slightly revised question		[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]
	text.	2013	Under {{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}/ the program sponsored by a state or local government agency which provides hospital and physician benefits} {(are/is)/(were/was)} (READ NAME(S) BELOW) enrolled in an HMO, that is a Health Maintenance Organization {between {START DATE} and {END DATE}}?
			[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]

Item	Changes	Year	Text
		2010	Now I'd like to ask a few questions about (POLICYHOLDER)'s health insurance through (ESTABLISHMENT). What type of health insurance {(do/does)/did} (POLICYHOLDER) get through (ESTABLISHMENT) {as of (END DATE)}?
HX48	Simplified question text.		PROBE: Any other health coverage through this plan?
		2013	Now think again about {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT}. Looking at this card, what health insurance coverage {{do/does}/did} {you/he/she} have {as of {END DATE}}?
			PROBE: Any other health coverage through this plan?
HX63A	Bolded "or" for emphasis.	2010	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
TIXOSA	Bolded of for emphasis.	2013	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
НХ63Е	Added phrase "per year" to question text.	2010	How much {(do/does) (PERSON)/does your family} contribute to {this FSA/these FSAs all together}?
		2013	How much {{do/does} {you/{PERSON}}/does your family} contribute per year to {this FSA/these FSAs all together}?
Help Text HX05 HX06	Update Medicare definition to include Part C.		MEDICARE A Federal health insurance program for people 65 or older and for certain persons under 65 with long-term disabilities. Almost everyone with Social Security is covered by Medicare.
			Medicare consists of three parts, A,B and D:
			PART A - Part A is called the Hospital Insurance Program. It helps pay for inpatient care in a hospital or in a skilled nursing facility, and for hospice care. It is available to nearly EVERYONE 65 OR OLDER.
		2010	hospital or in a skilled nursing facility, and for hospice care. It is available to nearly EVERYONE 65 OR OLDER. PART B - Part B is called the Supplementary Medical Insurance Program. It helps pay for the doctor and surgeon services, outpatient hospital services, medical equipment, and a number of other medical services and supplies. If a person chooses this additional insurance, the monthly premium is deducted from his/her
			If a person chooses this additional insurance, the monthly premium is deducted from his/her Social Security to obtain coverage for Part B of Medicare.
		2013	MEDICARE A Federal health insurance program for people 65 or older and for certain persons under 65 with long-term disabilities. Almost everyone with Social Security is covered by Medicare.
			Medicare consists of four parts, A,B,C, and D:
			PART A - Part A is called the Hospital Insurance Program. It helps pay for inpatient care in a hospital or in a skilled nursing facility, and for hospice care. It is available to nearly EVERYONE 65 OR OLDER. PART B - Part B is called the Supplementary Medical Insurance Program. It helps pay for the doctor and surgeon services, outpatient hospital services, medical equipment, and a number of other medical services and supplies.
			If a person chooses this additional insurance, the monthly premium is deducted from his/her Social Security to obtain coverage for Part B of Medicare.
			PART C - Part C encompasses the Medicare Advantage plans. A Medicare Advantage Plan (like an HMO or PPO) is a health plan choice available as part of Medicare. Medicare Advantage

Item	Changes	Year	Text
			Plans, sometimes called "Part C" or "MA Plans," are offered by private companies approved by Medicare. The plan provides all of a person's Part A (Hospital Insurance) and Part B (Medical Insurance) coverage.
			PART D - Medicare Part D coverage, also referred to as Medicare prescription drug coverage, is insurance that covers both brand-name and generic prescription drugs at participating pharmacies. Everyone with Medicare can choose this additional coverage, regardless of income and resources, health status, or current prescription expenses.

Health Status (HE)

The Health Status section assesses the physical and mental health status for both children and adults. Specific areas assessed include limitations in activities of daily living (ADLs) and instrumental activities of daily living (IADLs), the use of health aids, physical limitations, activity limitations, mental impairments, vision impairments, and hearing difficulties. For children, this section obtains additional information on participation in special education or therapy services, general health status, height, weight and child care. Also included are questions assessing whether a person has had difficulty with or has required supervision for at least 3 months when performing daily activities.

HE01 Simplified question text. 2010 {Added reference dates and clarifications in parentheses.} Added reference dates and clarifications in parentheses.} Added reference dates and clarifications in parentheses. Between {START DATE} and {END DATE}, did/Does} anyone in the family receive help or supervision with personal care such as bathing, dressing, or getting around the house? Between {START DATE} and {END DATE}, did/Does} anyone in the family receive supervision with personal care such as bathing, dressing, or getting around the of an impairment or a physical or mental health problem)? Does anyone in the family use any aids such as a walker, grab bars in the bathtus special equipment for personal care or everyday activities? (Between {START DATE} and {END DATE}, did/Does} anyone in the family use ary aid such as a walker, grab bars in the bathtus or any other special equipment for personal care or everyday activities? (Between {START DATE} and {END DATE}, did/Does} anyone in the family use ary aid such as a walker, grab bars in the bathtus or any other special equipment for personal care or everyday activities?	due to an bers may have
HEO4 Added reference dates and clarifications in parentheses. Between {START DATE} and {END DATE}, did/Does} anyone in the family receive supervision with personal care or everyday activities? Does anyone in the family use any aids such as a walker, grab bars in the bathtus special equipment for personal care or everyday activities? Between {START DATE} and {END DATE}, did/Does} anyone in the family use are a walker, grab bars in the bathtus or any other special equipment for personal and the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker.	ng bills, taking
HE04 Added reference dates and clarifications in parentheses. Between {START DATE} and {END DATE}, did/Does} anyone in the family use are a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker.	t meals, doing
HEO4 clarifications in parentheses. 2013 {Between {START DATE} and {END DATE}, did/Does} anyone in the family received supervision with personal care such as bathing, dressing, or getting around the of an impairment or a physical or mental health problem)? 2010 Does anyone in the family use any aids such as a walker, grab bars in the bathtus special equipment for personal care or everyday activities? Added reference dates and clarifications in parentheses. 2013 Eletween {START DATE} and {END DATE}, did/Does} anyone in the family use are a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker, grab bars in the bathtub or any other special equipment for personal and a walker.	s bathing,
HE07 Added reference dates and clarifications in parentheses. Added reference dates and clarifications in parentheses. Special equipment for personal care or everyday activities? {Between {START DATE} and {END DATE}, did/Does} anyone in the family use are a walker, grab bars in the bathtub or any other special equipment for personal care.	
HE07 clarifications in parentheses. { Between {START DATE} and {END DATE}, did/Does} anyone in the family use ar a walker, grab bars in the bathtub or any other special equipment for personal of the particular and the part	b or any other
	care or
Does anyone in the family have difficulties walking, climbing stairs, grasping objoverhead, lifting, bending or stooping, or standing for long periods of time?	ects, reaching
HE09 Added reference dates and clarifications in parentheses. [Between {START DATE} and {END DATE}, did/Does} anyone in the family have of walking, climbing stairs, grasping objects, reaching overhead, lifting, bending or standing for long periods of time (because of an impairment or a physical or me problem)?	stooping, or
HE26 Item revised to comply with 2010 Does anyone in the family wear eyeglasses or contact lenses?	
DHHS data collection standard on disability status. 2013 With this next set of questions we want to learn about people who Have physic emotional conditions that cause serious difficulties with their daily activities.	al, mental, or
{Please answer the next few questions for family members age 1 or older.}	

Item	Changes	Year	Text
			Is anyone in the family deaf or does anyone have serious difficulty hearing?
HE28	Item revised to comply with DHHS data collection	2010	Does anyone in the family have any difficulty seeing{[with glasses or contacts, if they use them]}?
	standard on disability status.	2013	Can {you/{PERSON}} not hear any speech at all, that is, {are/is} {you/{PERSON}} deaf?
	Item revised to comply with	2010	Who is that?
HE29	DHHS data collection standard on disability status.	2013	Is anyone in the family blind or does anyone have serious difficulty seeing, even when wearing glasses?
HE30	Item revised to comply with DHHS data collection	2010	Can {you/{PERSON}} not see anything at all, that is, {are/is} {you/he/she} blind?
HESU	standard on disability status.	2013	Who is that?
HE31	Item revised to comply with DHHS data collection	2010	{With glasses or contacts, can/Can} {you/{PERSON}} see well enough to read ordinary newspaper print, even if {you/he/she} cannot read?
	standard on disability status.	2013	Can {you/{PERSON}} not see anything at all, that is, {are/is} {you/{PERSON}} blind?
	Item revised to comply with	2010	{With glasses or contacts, can/Can} {you/{PERSON}} see well enough to recognize familiar people if they are two or three feet away?
HE32	DHHS data collection		{Please answer the next few questions for family members age 5 or older.}
	standard on disability status.	2013	Because of a physical, mental, or emotional condition, does anyone in the family have serious difficulty concentrating, remembering, or making decisions?
LIEGO	Item revised to comply with	2010	Does anyone in the family wear a hearing aid?
HE33	DHHS data collection standard on disability status.	2013	Who is that?
	Item revised to comply with	2010	Who is that?
	DHHS data collection standard on disability status.	2013	Does anyone in the family have serious difficulty walking or climbing stairs?
	Item revised to comply with	2010	Does anyone in the family have any difficulty hearing{[with a hearing aid, if they use one]}?
HE35	DHHS data collection standard on disability status.	2013	Who is that?
11507	Item revised to comply with	2010	Who is that?
HE36	DHHS data collection standard on disability status.	2013	Does anyone in the family have difficulty dressing or bathing?
	Item revised to comply with	2010	Can {you/{PERSON}} not hear any speech at all, that is, {are/is} {you/he/she} deaf?
HE37	DHHS data collection standard on disability status.	2013	Who is that?
		2010	{With a hearing aid, can/Can} {you/{PERSON}} hear most of the things people say?
HE38	Item revised to comply with DHHS data collection		{Please answer the next few questions for family members age 15 or older.}
TILSO	standard on disability status.	2013	Because of a physical, mental, or emotional condition, does anyone in the family have difficulty doing errands alone such as visiting a doctor's office or shopping?
	Item revised to comply with	2010	{With a hearing aid, can/Can} {you/{PERSON}} hear some of the things people say?
HE39	DHHS data collection standard on disability status.	2013	Who is that?
	Item added to comply with	2010	
HE40	DHHS data collection	2012	{Please answer the next few questions for family members of all ages.}
	standard on disability status.	2013	Does anyone in the family wear a hearing aid?

Home Health (HH)

For those persons using home health care, the Home Health section obtains information on the types of health care workers providing home health services, reasons for home health care, the nature of home health services provided, frequency of visits, length per visits, and duration of visits.

Item	Changes	Year	Text
HH17	Added question mark to end	2010	I have recorded that (PERSON) received services from (PROVIDER) during other months. Were the services received from (PROVIDER) during the other months similar to the services received during (VISIT MONTH). That is, in the other months, did (PROVIDER) visit {the same number of times/(READ FREQUENCY BELOW)} and provide {the same services/(READ SERVICES BELOW)}?
12/	of second sentence.	2013	I have recorded that {you/{PERSON}} received services from {PROVIDER} during other months. Were the services received from {PROVIDER} during the other months similar to the services received during {VISIT MONTH}? That is, in the other months, did {PROVIDER} visit {the same number of times/(READ FREQUENCY BELOW)} and provide {the same services/(READ SERVICES BELOW)}?

Hospital Stay (HS)

The Hospital Stay section obtains details on the length of stay, reasons or conditions requiring hospitalization, surgical procedures performed, medicines prescribed at discharge, and the physicians and surgeons providing hospital care. This section collects physicians and surgeons who are not already on the provider roster.

Item	Changes	Year	Text
HS03	Simplified question text.	2010	Was this hospital stay related to any specific health condition or were any conditions discovered during this hospital stay?
11300		2013	Was this hospital stay related to any specific health condition or were any conditions discovered during this stay?
HS06AA	Addition; new question	2010	
ПЗООДА	about time spent in an ICU.	2013	Did {you/{PERSON} spend any time in an intensive or critical care unit (ICU) during this stay?
		2010	
Help Text HS06AA	Add definition of ICU	2013	An intensive care unit (ICU) is a specialized department used in many hospitals that provides close monitoring nursing and medical care for critically ill patients. They are characterized by continuous nursing and medical supervision and by the use of sophisticated monitoring devices and resuscitative equipment. Include any unit designated as intensive care such as: Critical care unit (CCU) Neonatal intensive-care unit (NICU) Pediatric intensive-care unit (PICU) Medical intensive-care unit (MICU) Surgical intensive-care unit (SICU) Burn or Trauma Intensive care Unit (TICU)

Income (IN)

This supplemental section, asked in Rounds 3 and 5, collects information about the household members' income and Federal income tax filing status, specifically about itemized deductions for health insurance premiums, tax credits, wages, other private income sources, and public assistance income.

Item	Changes	Year	Text
IN18A	8A Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received [from wages or salary, tips, commissions, or bonuses in {YEAR}]?
		2013	Which of the ranges on this card is the best estimate of how much money was received [from wages or salary, tips, commissions, or bonuses in {YEAR}]?

Item	Changes	Year	Text
IN19A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [in interest from savings accounts, bonds, NOW accounts, money market accounts, or similar types of investments in {YEAR}]?
	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [in interest from savings accounts, bonds, NOW accounts, money market accounts, or similar types of investments in {YEAR}]?
IN20A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from dividends in {YEAR}]?
INZUA	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from dividends in {YEAR}]?
IN21A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from refunds of state or local taxes in {YEAR}]?
INZIA	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from refunds of state or local taxes in {YEAR}]?
IN22A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from alimony in {YEAR}]?
INZZA	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from alimony in {YEAR}]?
INIOOA	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was earned or lost [from (his/her/their) own farm or non-farm business or practice in {YEAR}]?
IN23A		2013	Which of the ranges on this card is the best estimate of how much money was earned or lost [from (his/her/their) own farm or non-farm business or practice in {YEAR}]?
IN24A	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was earned or lost [from the sale of property or other assets, including the sale of (his/her/their) home, if it was taxable, in {YEAR}]?
		2013	Which of the ranges on this card is the best estimate of how much money was earned or lost [from the sale of property or other assets, including the sale of (his/her/their) home, if it was taxable, in {YEAR}]?
IN25A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from payments from IRA, Keogh, and 401K accounts in {YEAR}]?
INZJA	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from payments from IRA, Keogh, and 401K accounts in {YEAR}]?
IN27	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received [from private pensions, military retirement, other Federal government employee pensions, state or local government employee pensions, or annuities in {YEAR}]?
111/27		2013	Which of the ranges on this card is the best estimate of how much money was received [from private pensions, military retirement, Other Federal government employee pensions, state or local government employee pensions, or annuities in {YEAR}]?
	Na different bland and a state of boards	2010	Looking at this card, which range best estimates how much money was earned or lost [from estates or trusts, partnerships, S corporations, royalties, or from rental income in {YEAR}]?
IN28A	Modified the question text that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was earned or lost [from estates or trusts, partnerships, S corporations, royalties, or from rental income in {YEAR}]?
INIOOA	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from unemployment compensation in {YEAR}]?
IN30A	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from unemployment compensation in {YEAR}]?
IN32	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received [from Social Security and equivalent tier 1 Railroad Retirement benefits in {YEAR}]?

Item	Changes	Year	Text
		2013	Which of the ranges on this card is the best estimate of how much money was received [from Social Security and equivalent tier 1 Railroad Retirement benefits in {YEAR}]?
IN36A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from Worker's Compensation in {YEAR}]?
INSOA	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from Worker's Compensation in {YEAR}]?
IN40C	Modified the question text	2010	Looking at this card, which range best estimates how much money was received per month [from Supplemental Security Income in {YEAR}]?
114400	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received per month [from Supplemental Security Income in {YEAR}]?
IN45C	Modified the question text	2010	Looking at this card, which range best estimates how much money was received per month [from public assistance in {YEAR}]?
114-30	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received per month [from public assistance in {YEAR}]?
IN48C	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received per month [from child support in {YEAR}]?
11100		2013	Which of the ranges on this card is the best estimate of how much money was received per month [from child support in {YEAR}]?
IN51A	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received [from veteran's payments such as education or disability benefits in {YEAR}]?
III III		2013	Which of the ranges on this card is the best estimate of how much money was received [from veteran's payments such as education or disability benefits in {YEAR}]?
	Modified the question text that refers to the show card.	2010	Looking at this card, which range best estimates how much money was received per month [from regular cash contributions from people who do not live in this household, in {YEAR}]?
IN54C		2013	Which of the ranges on this card is the best estimate of how much money was received per month [from regular cash contributions from people who do not live in this household, in {YEAR}]?
IN62A	Modified the question text	2010	Looking at this card, which range best estimates how much money was received [from (INCOME SOURCE) in {YEAR}]?
1110224	that refers to the show card.	2013	Which of the ranges on this card is the best estimate of how much money was received [from (INCOME SOURCE) in {YEAR}]?
		2010	FOOD STAMPS - The Food Stamp Program enables low-income families to buy eligible, nutritious food with coupons and Electronic Benefits Transfer (EBT) cards in authorized retail food stores.
Help Text IN55	Replace definition of Food Stamps with SNAP.		SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) -
	333	2013	SNAP (formerly known as the Food Stamp Program) enables eligible low-income households to buy nutritious food with electronic benefits they can use like a debit card to purchase food at stores authorized by USDA.

Managed Care (MC)

This section determines whether household members are covered under a private managed care plan. The section groups the types of coverage as either HMO, other type of managed care plan, or non-managed care plan based on questions about the characteristics of the insurance plan.

Item	Changes	Year	Text
MC01	Simplified question text.	2010	Now I will ask you a few questions about how (POLICYHOLDER)'s health insurance through (ESTABLISHMENT) {works/worked} for non-emergency care {as of (END DATE)}.

Item	Changes	Year	Text
			We are interested in knowing if (POLICYHOLDER)'s (ESTABLISHMENT) plan is an HMO, that is, a Health Maintenance Organization. With an HMO, you must generally receive care from HMO physicians. For other doctors, the expense is not covered unless you were referred by the HMO or there was a medical emergency.
			{When answering this question, do not consider (POLICYHOLDER)'s insurance through Medicare.}
			{Is/Was} (POLICYHOLDER)'s {NAME OF INSURER BEING LOOPED ON} an HMO {as of (END DATE)}?
	2013	2013	{Is/Was} {your/{POLICYHOLDER}'s} {NAME OF INSURER BEING LOOPED ON} an HMO {as of {END DATE}}? {When answering this question, do not consider {your/his/her} insurance through Medicare.}
		2010	[With an HMO, you must generally receive care from HMO physicians. For other doctors, the expense is not covered unless you were referred by the HMO or there was a medical emergency.]

Medical Provider Visits (MV)

The Medical Provider Visits section obtains details on the nature of any contacts or visits, the type of provider, health conditions requiring medical provider services, treatments and services performed, surgical procedures, and prescribed medicines. This section also probes for any follow up or repeat visits that cost the same amount as the original visit. Questions are asked about the medical provider's specialty and the medical provider's place type (e.g., managed care plan center or doctor's office).

Changes: None

Old Employment/ Private Related Insurance (OE)

For RU members that still hold the same job in Rounds 2 through 5 that was reported during the previous round as providing health insurance, this section collects information about the continuation of insurance coverage. Included are questions about whether the policyholder was responsible for any amount of the charge, whether there was an additional name for the insurance, and payments to out-of-network providers were added.

Item	Changes	Year	Text
0E01	Simplified question text.	2010	During the last interview, we recorded that someone in the family was covered by (POLICYHOLDER)'s (ESTABLISHMENT) health insurance. {(Are/Is)/(Were/Was)} (POLICYHOLDER) or anyone in the family covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT) as of {today,} (END DATE)?
		2013	Now think about {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT}. {{Are/ls}/{Were/Was}} {you/he/she} or anyone in the family covered by this insurance as of {today,} {END DATE}?
OE03	Simplified question text.	2010	During the last interview, we recorded that (READ NAMES BELOW) (were/was) covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT).
0200		2013	{Are/Were} (READ NAMES BELOW) all covered by {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT} {until {{OE02 DATE}/it ended}/on {END DATE}}?
OF09B	Bolded the "or" for emphasis.	2010	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
OEO7B		2013	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
OE10	Revised text to reference show card.	2010	What type of health insurance {(do/does)/did} (POLICYHOLDER) {now} have through (ESTABLISHMENT)'s new plan {as of (END DATE)}?
		2013	Looking at this card, what type of health insurance coverage {{do/does}/did}

Item	Changes	Year	Text
			{you/{POLICYHOLDER}} {now} have through {ESTABLISHMENT}'s new plan {as of {END DATE}}?
0E12	Simplified question text.	2010	During the last interview, we recorded that someone in the family was covered by (POLICYHOLDER)'s (ESTABLISHMENT) health insurance. {(Are/Is)/(Were/Was)} (POLICYHOLDER) or anyone in the family covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT) as of {today,} (END DATE)?
		2013	Now think about {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT}. {{Are/ls}/{Were/Was}} {you/he/she} or anyone in the family covered by this insurance as of {today,} {END DATE}?
OE17	Simplified question text.	2010	During the last interview, we recorded that (READ NAMES BELOW) (were/was) covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT). {Are/Were} they all covered by this health insurance {until {{OE15 DATE}/it ended}/on (END DATE)}?
		2013	{Are/Were} (READ NAMES BELOW) all covered by {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT} {until {{OE15 DATE}/it ended}/on {END DATE}}?
OE23B	Bolded the "or" for	2010	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
GLZGB	emphasis.	2013	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
OE24	Revised text to reference	2010	What type of health insurance {(do/does)/did} (POLICYHOLDER) {now} have through (ESTABLISHMENT)'s new plan {as of (END DATE)}?
OL24	show card.	2013	Looking at this card, what type of health insurance coverage {{do/does}/did} {you/{POLICYHOLDER}} {now} have through {ESTABLISHMENT}'s new plan {as of {END DATE}}?
OE26	Simplified question text.	2010	During the last interview, we recorded that someone in the family was covered by (POLICYHOLDER)'s (ESTABLISHMENT) health insurance. {(Are/Is)/(Were/Was)} (POLICYHOLDER) or anyone in the family covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT) as of {today,} (END DATE)?
		2013	Now think about {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT}. {{Are/ls}/{Were/Was}} {you/he/she} or anyone in the family covered by this insurance as of {today,} {END DATE}?
OE29	Simplified question text.	2010	During the last interview, we recorded that (READ NAMES BELOW) (were/was) covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT). {Are/Were} they all covered by this health insurance {until {{OE28 DATE}/it ended}/on (END DATE)}?
		2013	{Are/Were} (READ NAMES BELOW) all covered by {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT} {until {{OE28 DATE}/it ended}/on {END DATE}}?
0F35P	Bolded the "or" for	2010	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
0E35B	emphasis.	2013	Is the {family} annual deductible for medical care for this plan less than {\$1,200 or \$1,200/\$2,400 or \$2,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.
OE37	Revised text to reference	2010	What type of health insurance {(do/does)/did} (POLICYHOLDER) {now} have through (ESTABLISHMENT)'s new plan {as of (END DATE)}?
	show card.	2013	Looking at this card, what type of health insurance coverage {{do/does}/did} {you/{POLICYHOLDER}} {now} have through {ESTABLISHMENT}'s new plan {as of {END DATE}}?
OE39	Simplified question text.	2010	During the last interview, we recorded that someone in the family was covered by (POLICYHOLDER)'s (ESTABLISHMENT) health insurance. {Is/Was} anyone in the family, living here {now}, covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT) as of

Item	Changes	Year	Text
			{today,} (END DATE)?
		2013	Now think about {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT}. {Is/Was} anyone in the family, living here {now}, covered by this insurance as of {today,} {END DATE}?
		2010	During the last interview, we recorded that (READ NAMES BELOW) (were/was) covered by (POLICYHOLDER)'s health insurance through (ESTABLISHMENT).
OE41	Simplified question text.		{Are/Were} they all covered by this health insurance {until {{OE40 DATE}/it ended}/on (END DATE)}?
		2013	{Are/Were} (READ NAMES BELOW) all covered by {your/{POLICYHOLDER}'s} health insurance through {ESTABLISHMENT} {until {{OE40 DATE}/it ended}/on {END DATE}}?

Old Public Related Insurance (PR)

For RU members who were covered during the previous round by Medicare, Medicaid/SCHIP, CHAMPUS/CHAMPVA (now TRICARE/CHAMPVA), or other state or local government sponsored programs, this section collects information about the continuation of coverage provided through these public programs.

Item	Changes	Year	Text
PRO2	Omitted second paragraph.	2010	During the last interview, it was recorded that (PERSON) (were/was) enrolled in Medicare. We would like to update information about (PERSON)'s Medicare coverage. As you may know, Medicare allows beneficiaries to enroll in Medicare Advantage or managed care plans such as HMOs (Health Maintenance Organizations) or PPOs (Preferred Provider Organizations) to receive their Medicare funded health care. These plans have names like those listed on this card. Is the name of (PERSON)'s insurance through Medicare{, as of (END DATE),} listed on this card?
		2013	During the last interview, it was recorded that {you/{PERSON}} {were/was} enrolled in Medicare. We would like to update information about {your/his/her} Medicare coverage. Is the name of {your/{PERSON}'s} insurance plan through Medicare{, as of {END DATE},} listed on this card?
PRO3	Simplified question text.	2010	Even though (PERSON)'s Medicare plan is not listed on the card, {(are/is) (PERSON) currently/(were/was) (PERSON)} enrolled in a Medicare managed care plan such as an HMO (Health Maintenance Organization) or PPO (Preferred Provider Organization){as of (END DATE)}? When answering this question, please include only insurance from Medicare, not any privately purchased insurance and not any job-related insurance.
		2013	{{Are/Is} {you/{PERSON}}} currently/As of {END DATE}, {were/was} {you/{PERSON}}} enrolled in a Medicare Advantage or managed care plan, such as an HMO (Health Maintenance Organization) or PPO (Preferred Provider Organization) to receive {your/his/her} Medicare-funded health care? When answering, please include only insurance from Medicare, not any privately purchased or job-related insurance.
	First sentence revised into a "if necessary" statement.	2010	Many Medicare beneficiaries pay the premium for their Medicare Advantage coverage through their Social Security checks. Some pay directly to the provider. How (do/does) (PERSON) pay for (PERSON)'s {{PLAN NAME ENTERED AT PR02OV}/{NAME OF PLAN FROM PR04}}/Medicare managed care} premium?
PR06A		2013	How {do/does} {you/{PERSON}} pay for {your/his/her} {{PLAN NAME ENTERED AT PR02OV}/{NAME OF PLAN FROM PR04}}/Medicare managed care} premium? IF NECESSARY, SAY: Is the Medicare Advantage premium paid through {you/his/her} Social Security check, paid directly to the provider, or paid both ways?
PR06B	Omitted first paragraph.	2010	(During the last interview, it was recorded that (PERSON) (were/was) enrolled in Medicare.

Item	Changes	Year	Text
			We would like to update information about (PERSON)'s Medicare coverage.}
			{(Are/Is)/(Were/Was)} (PERSON) enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan {as of (END DATE)}?
		2013	{{Are/Is}/{Were/Was}} {you/{PERSON}} enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan {as of {END DATE}}?
	First sentence revised into a	2010	Many Medicare beneficiaries pay the premium for their Medicare drug coverage through their Social Security checks. Some pay directly to the provider? How (do/does) (PERSON) pay for (PERSON)'s Part D premium?
PR06D	"if necessary" statement.		How {do/does} {you/{PERSON}} pay for {your/his/her} Part D premium?
		2013	IF NECESSARY, SAY: Is the Medicare drug coverage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?
		2010	Some people on {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} can enroll in plans called HMOs. These plans have names like those listed on this card.
PR12	Omitted first paragraph.	2010	Is the name of the health insurance through {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {, between (START DATE) and (END DATE),} listed on this card?
		2013	Is the name of the health insurance through {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {, between {START DATE} and {END DATE},} listed on this card?
	Revised "signed up" to "enrolled."	2010	Under {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {(are/is)/(were/was)} (READ NAME(S) BELOW) signed up with an HMO, that is a Health Maintenance Organization {between (START DATE) and (END DATE)}?
PR13			[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]
		2013	Under {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} {(are/is)/(were/was)} (READ NAME(S) BELOW) enrolled in an HMO, that is a Health Maintenance Organization {between {START DATE} and {END DATE}}?
			[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]
		2010	For the coverage through {{{PLAN NAME ENTERED AT PR12OV}/{NAME OF PLAN FROM PR15}}/{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}}, does anyone in the family pay anything for this coverage?
PR16	Revised text to be consistent with the question text		[Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.]
TRIS	wording of HX45.	2013	Does anyone in the family pay anything for the coverage through {{{PLAN NAME ENTERED AT PR12OV}/{NAME OF PLAN FROM PR15}}/{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}}?
			[Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.]
PR29	Revised "signed up" to "enrolled."	2010	Under the program sponsored by a state or local government agency which provides hospital and physician benefits {(are/is)/ (were/was)} (READ NAME(S) BELOW) signed up with an HMO, that is a Health Maintenance Organization {between (START DATE) and (END DATE)}?
		2010	[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]
		2013	Under the program sponsored by a state or local government agency which provides hospital and physician benefits {(are/is)/(were/was)} (READ NAME(S) BELOW) enrolled in an HMO, that

Item	Changes	Year	Text
			is a Health Maintenance Organization {between {START DATE} and {END DATE}}? [With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is not covered unless you were referred by the HMO, or there was a medical emergency.]
PR32	Revised text to be consistent with the question text wording of HX45 and PR16.	2010	For the coverage through {{{PLAN NAME ENTERED AT PR28OV}/{NAME OF PLAN FROM PR31}}/the program sponsored by a state or local government agency which provides hospital and physician benefits}, does anyone in the family pay anything for this coverage? [Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.]
1102		2013	Does anyone in the family pay anything for the coverage through {{{PLAN NAME ENTERED AT PR28OV}/{NAME OF PLAN FROM PR31}}/the program sponsored by a state or local government agency which provides hospital and physician benefits}? [Do not include the cost of any copayments, coinsurance, or deductibles anyone in the family may have had to pay.]

Other Medical Expenses (OM)

This section serves to direct the CAPI program to other sections in cases where respondents report expenses for glasses or contact lenses or for insulin and other diabetic equipment or supplies.

Changes: None

Outpatient Department (OP)

If any outpatient visits were made during the reference period, this section obtains details on the nature of the contact, type of care received, health conditions requiring outpatient services, treatments and services performed, surgical procedures, prescribed medicines, and the physicians and surgeons providing outpatient services. This section collects physicians and surgeons who are not already on the provider roster. It also probes for any follow up or repeat visits that cost the same amount as the original outpatient visit.

Changes: None

Overall Structure of Employment (EM-O)

Because most private health insurance is provided through employment, the MEPS interview collects detailed information on jobs held by each person in the household aged 16 or older. This section functions to direct the CAPI program through the loop of employment-related questions for each person 16 or older.

Changes: None

Prescribed Medicines (PM)

The Prescribed Medicines section obtains details on prescribed medicines reported in earlier medical events sections as well as additional prescriptions reported in this section. Questions determine whether free pharmaceutical samples were obtained, the specific health problems for which the medicine was prescribed, the number of refills obtained during the reference period, the first date of use of each medicine, and the name and address of the pharmacy that filled each prescription.

Item	Changes	Year	Text
PM01	1 Omitted.	2010	The next questions are about prescription medicines (PERSON) purchased or received {since (START DATE)/between (START DATE) and (END DATE)}. [It would be very helpful for the following questions if we could look at the bottles, containers, tubes, or bags for each of the medicines we will be talking about.]
		2013	
PM04	Second paragraph from	2010	{Since (START DATE)/Between (START DATE) and (END DATE)}, (have/has) (PERSON) obtained

Item	Changes	Year	Text
			any medicines [we have not yet talked about]? For example, (have/has) (PERSON) had any new prescriptions or a refill of a prescription?
	PM01 added.		Please include any on-line prescriptions.
		2013	{Since {START DATE}/Between {START DATE} and {END DATE}}, {have/has} {you/{PERSON}} obtained any medicines [we have not yet talked about]? For example, {have/has} {you/he/she} had any new prescriptions or a refill of a prescription?
			Please include any on-line prescriptions.
			[It would be very helpful if we could look at the bottles, containers, tubes, or bags for each of the medicines we will be talking about.]

Preventive Care (AP)

The Preventive Care supplemental section, asked in Round 3 and 5, gathers information on any preventive care received. Questions ask about frequency of dental and physical check-ups, flu shots, and other preventative health exams.

Item	Changes	Year	Text
		2010	A routine check-up is a visit with a doctor or other health professional for assessing overall health, usually not prompted by a specific illness or complaint. It usually includes a blood pressure check, and may include taking a blood sample for analysis and questions about health behaviors such as smoking. About how long has it been since (PERSON) had a routine check-up by a doctor or other
AP17	Moved first paragraph to an "If necessary" phrase after		health professional?
	the question.		About how long has it been since (PERSON) had a routine check-up by a doctor or other health professional?
		2013	IF NECESSARY, SAY: A routine check-up is a visit with a doctor or other health professional for assessing overall health, usually not prompted by a specific illness or complaint. It usually includes a blood pressure check, and may include taking a blood sample for analysis and questions about health behaviors such as smoking.
	Deleted introductory text.	2010	Doctors or other health professionals often advise people to make a change to their lifestyles to lower their risk of developing a number of diseases, including heart disease.
AP17A			Has a doctor or other health professional ever advised (PERSON) to
		2013	Has a doctor or other health professional ever advised (PERSON) to
AP28	Changed three times a week to five times a week.	2010	(Do/Does) (PERSON) now spend half an hour or more in moderate or vigorous physical activity at least three times a week?
Al 20		2013	(Do/Does) (PERSON) now spend half an hour or more in moderate or vigorous physical activity at least five times a week?
AP32	Simplified question text.		When (PERSON) drive(s) or ride(s) in a car, would (PERSON) say (PERSON) wear(s) a seat belt
		2010	Always, Nearly Always, Sometimes, Seldom, or Never?
		2013	Would {you say you wear/(PERSON) say (he/she) wears} a seat belt when driving or riding in a car
			Always, Nearly Always, Sometimes, Seldom, or

Item	Changes	Year	Text
			Never?

Priority Conditions (Quality Supplement) (PC)

The Priority Conditions section collects information about diabetes and asthma. This is a supplemental section asked in Rounds 3 and 5

Item	Changes	Year	Text
PC02A	Simplified question text.	2010	The care of adults with diabetes is an interest of the Public Health Service. {During an earlier interview, it/It} was mentioned that (PERSON) (have/has) diabetes. We have a short questionnaire on the care adults may get for their diabetes.
. 332		2013	{During an earlier interview, it/It} was mentioned that (PERSON) (have/has) diabetes. To obtain more information on the care of adults with diabetes, we have a short questionnaire for (PERSON).

Priority Conditions Enumeration (PE)

The Priority Conditions Enumeration section includes questions which obtain a summary assessment of each person's physical and mental health. Additionally, information is collected about a select group of medical conditions including attention deficit hyperactivity disorder, attention deficit disorder, diabetes, asthma, high cholesterol, hypertension, coronary heart disease, angina, heart attacks, other heart disorders, strokes, emphysema, chronic bronchitis, cancer, joint pain, and arthritis. Using this information, this section creates a roster of conditions and health problems reported for each family member. Later in the interview, this roster links with health care utilization and disability day information.

Item	Changes	Year	Text
		2010	
Help Text PE11	Insert definition of other types of heart conditions.	2013	OTHER TYPES OF HEART CONDITIONS TO INCLUDE If 'coronary heart disease', 'angina', 'heart attack', or 'myocardial infarction' are mentioned, back up to PE05, PE07, or PE09, as appropriate. Include any other types of heart conditions or diseases affecting the person during his or her lifetime. This includes, but is not limited to, congenital heart diseases, heart murmurs, irregular heartbeat, arrhythmias, cardiomyopathy, inflammatory heart disease, and valvular heart disease.
		2010	
Help Text PE13	Insert definition of TIA.	2013	TRANSIENT ISCHEMIC ATTACK – A transient ischemic attack (TIA) is an episode that occurs when the blood supply to part of the brain is briefly interrupted. TIA symptoms, which usually occur suddenly, are similar to those of stroke but do not last as long. Most symptoms of a TIA disappear within an hour, although they may persist for up to 24 hours. Symptoms can include muscle weakness, numbness on one side of the body, trouble speaking, swallowing, and memory loss among others. A TIA is often considered a warning sign that a true stroke may happen in the future if something is not done to prevent it.
		2010	
Help Text PE15	Insert definition of emphysema.	2013	EMPHYSEMA – Emphysema is a long-term, progressive disease in which the air sacs in the lungs become damaged. Its primary symptom is progressive shortness of breath. Emphysema is one of several diseases known collectively as chronic obstructive pulmonary disease (COPD).

Private Health Insurance Detail (HP)

This section collects additional detail on each private health insurance policy, including the name of the insurance company, the policyholder of each plan identified, and the household members covered by each policy. Informed consent information regarding contacting employers who provide health insurance is obtained.

Changes: None

Provider Directory (PD)

The Provider Directory section compiles a directory of all medical persons and medical facilities reported by MEPS respondents. It clarifies the relationship of each medical provider to the person's insurance plan and verifies the name, address, and telephone number of the provider.

Item	Changes	Year	Text
PD03	Simplified question text	2010	Now I would like to make sure I have complete information for the medical providers you mentioned. I will use a directory to look up the names, addresses, and telephone numbers of the sources of medical care you mentioned.
		2013	To make sure my information is complete, I am going to use a directory to look up the medical providers you mentioned.

Provider Probes (PP)

The Provider Probes section collects the information required to create a medical event in the database, i.e., the type of event, the person incurring the event, the health care provider, and the date(s) of the event. This section links with the Event Roster, Provider Roster, and Event Driver sections. Included are questions about independent labs/testing facilities and alternative care.

Item	Changes	Year	Text
PP03A	Simplified question text.	2010	As you know, it is important for us to get complete and accurate information of all of the family's health care events. I'd like you to take a few minutes to look at several lists of health care providers, to be sure we haven't missed any visits or calls, including those made just for advice, prescriptions, tests, shots, or x-rays. Please be sure to include any visits or phone calls to a health care provider that you haven't told me about that were related to any health conditions we may have already discussed.
		2013	Next, I am going to show you several lists of health care providers to be sure we haven't missed any visits or phone calls, including those made just for advice, prescriptions, tests, shots, or x-rays.
PP12	Added the phrase "or	2010	{And finally, did/Did/Between (START DATE) and (END DATE), did} anyone in the family obtain eyeglasses, contact lenses, or diabetic equipment {since (START DATE)} [other than what we have already talked about]?
FF12	supplies."	2013	{And finally, did/Did/Between {START DATE} and {END DATE}, did} anyone in the family obtain eyeglasses, contact lenses, or diabetic equipment or supplies {since {START DATE}} [other than what we have already talked about]?
PP13	Added the phrase "or supplies."	2010	Has anyone else in the family obtained eyeglasses, contact lenses, or diabetic equipment [other than what we have already talked about]?
1113		2013	Has anyone else in the family obtained eyeglasses, contact lenses, or diabetic equipment or supplies [other than what we have already talked about]?
	Simplified question text.	2010	Now I would like you to think about the entire calendar year {YEAR}, that is from January 1, {YEAR} until December 31, {YEAR}.
PP13A			Please look at the types of other medical expenses listed on this card. Did anyone in the family obtain any of these types of other medical expenses during the year {YEAR}?
		2013	Now I would like you to think about the entire calendar year {YEAR}, that is from January 1, {YEAR} until December 31, {YEAR}.
			During {YEAR}, did anyone in the family have expenses for any of the types of things listed on this card?
PP14	Simplified question text.	2010	These next questions ask about the different medical and dental care anyone in the family has received {since (START DATE)/between (START DATE) and (END DATE)}. It is sometimes hard to remember dates accurately so take your time. You might want to look at any calendar you may keep, checkbook, or receipts to help you remember. We are interested in any type of visit or call, including those made just for advice, prescriptions, tests, shots, or x-rays. Also include any visits or phone calls to a health care provider that were related to any conditions we may

Item	Changes	Year	Text
			have already discussed.
		2013	These next questions ask about medical and dental care each family member received {since {START DATE}/between {START DATE} and {END DATE}}. You can use your calendar, electronic records, checkbook, or receipts to help you remember. We are interested in any type of visit or phone call, including those made just for advice, prescriptions, tests, shots, or x-rays.
PP27	Added the phrase "or supplies."	2010	{Since (START DATE)/Between (START DATE) and (END DATE)}, did (PERSON) obtain eyeglasses, contact lenses, or diabetic equipment?
11.27		2013	{Since {START DATE}/Between {START DATE} and {END DATE}}, did {you/{PERSON}} obtain eyeglasses, contact lenses, or diabetic equipment or supplies?
	Simplified question text.	2010	Now I would like you to think about the entire calendar year {YEAR}, that is from January 1, {YEAR} until December 31, {YEAR}.
PP29			Please look at the types of other medical expenses listed on this card. Did (PERSON) obtain any of these types of other medical expenses during the year {YEAR}?
1127		0040	Now I would like you to think about the entire calendar year {YEAR}, that is from January 1, {YEAR} until December 31, {YEAR}.
		2013	During {YEAR}, did {you/{PERSON}} have expenses for any of the types of things listed on this card?

Provider Roster (PV)

This section creates a roster to display the name and street address of each provider and/or facility associated with each person's medical events detailed in the Event Roster. This information is strictly confidential.

Changes: None

RU Information Screen (RS)

To assist in conducting subsequent interviews, the interviewer records helpful information in this section, such as special instructions, special problems, locating directions, difficulties with the CAPI administration, and whether the household moved.

Changes: None

Reenumeration-A (RE-A)

Reenumeration refers to the process of collecting eligibility and demographic data on each person associated with a household participating in MEPS. The Reenumeration section has two parts, Reenumeration-A and Reenumeration-B. RE-A -- Reenumeration-A Part A includes questions RE01 through RE75, which identify and define the eligibility status for each person and family unit living within each MEPS sampled household, as well as any family members who are temporarily living away from the household. Part A identifies the reference period for each family unit and the person that serves as the primary respondent for the family is identified. It also obtains age, gender, and marital status for each person.

Item	Changes	Year	Text
RE05	Changed NCHS reference to CDC.	2010	(As I mentioned earlier,) my records show that (PERSON)'s household took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census Bureau interviewer mentioned that (PERSON)'s family might be contacted again for another health related survey. IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
			This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the National Center for Health Statistics]. The information you provide will be kept completely confidential and private as required by law.
		2013	(As I mentioned earlier,) {your family/{PERSON}'s household} took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census

Item	Changes	Year	Text
			Bureau interviewer mentioned that {you/{his/her} family} might be contacted again for another health related survey.
			IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
			This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the Centers for Disease Control and Prevention (CDC)]. The information you provide will be kept completely confidential and private as required by law.
			(As I mentioned earlier,) my records show that (PERSON)'s household took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census Bureau interviewer mentioned that (PERSON)'s family might be contacted again for another health related survey.
		2010	IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
RE05A	Changed NCHS reference to		This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the National Center for Health Statistics]. The information you provide will be kept completely confidential and private as required by law.
	CDC.	2013	(As I mentioned earlier,) {you/{PERSON}} {were/was} a member of a household that took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census Bureau interviewer mentioned that members of that household might be contacted again for another health related survey. Since {you/he/she} {are/is} no longer living with that household, we will interview this new household separately.
			IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
			This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the Centers for Disease Control and Prevention (CDC)]. The information you provide will be kept completely confidential and private as required by law.
	Changed NCHS reference to CDC.	2010	(As I mentioned earlier,) my records show that (PERSON)'s household took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census Bureau interviewer mentioned that (PERSON)'s family might be contacted again for another health related survey.
			IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
RE05B			This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the National Center for Health Statistics]. The information you provide will be kept completely confidential and private as required by law.
		2013	(As I mentioned earlier,) my records show that you were a member of a household that took part in the National Health Interview Survey on {MONTH, DAY, YEAR OF NHIS INTERVIEW} and, at that time, the Census Bureau interviewer mentioned that you might be contacted again for another health related survey. Since you are now a student and no longer living with that household, we will interview you separately.
			IF NEEDED, READ ALL OR PART OF THE FOLLOWING:
			This survey, the Medical Expenditure Panel Survey, is also for the Department of Health and Human Services [specifically, the Agency for Healthcare Research and Quality and the Centers for Disease Control and Prevention (CDC)]. The information you provide will be kept completely confidential and private as required by law.
RE20	Simplified question text.	2010	Before we begin the health interview, {I'd like to ask some questions about this household./I'd like you to think about the people living here on December 31, {YEAR}, regardless of whether they are living here now.}

Item	Changes	Year	Text
			My records indicate that {on {DATE OF PREVIOUS ROUND INTERVIEW},} (READ NAMES BELOW) {were/are} living together as a family. {Do/Did} they still live together as a family {on December 31, {YEAR}}?
		2013	Think about the people living here on December 31, {YEAR}, regardless of whether they are living here now.} {Are/Were} (READ NAMES BELOW) still living together as a family {on December 31, {YEAR}}?
RE46	Reordered question text.	2010	{Please think about the people living here as of December 31, {YEAR} for the next few questions.} {Is/Was} there anyone else {other than you} related to (REFERENCE PERSON) who {is/was} living here {now/on December 31, {YEAR}} as part of this family, other than (READ NAMES BELOW)? Do not include anyone {who was} staying here temporarily who usually {lives/lived} somewhere else. By related we mean by blood, marriage, living together as married, adoption or foster care relationship.
		2013	{Please think about the people living here as of December 31, {YEAR} for the next few questions.} {Is/Was} there anyone else {other than you} related to {you/{REFERENCE PERSON}} who {is/was} living here {now/on December 31, {YEAR}} as part of this family, other than (READ NAMES BELOW)? By related we mean by blood, marriage, living together as married, adoption or foster care relationship. Do not include anyone {who was} staying here temporarily who usually {lives/lived} somewhere else.
RE57	Item revised to comply with DHHS data collection standard.	2010	IF NOT OBVIOUS, ASK: Is (READ NAME BELOW) male or female?
		2013	IF NOT OBVIOUS, ASK: What is (READ NAME BELOW)'s sex?
RE61	Simplified question text.	2010	ASK IF NOT OBVIOUS: I have (PERSON) recorded as (READ GENDER BELOW). Is that correct?
KLUI		2013	ASK IF NOT OBVIOUS: So {you/{PERSON}} {are/is} (READ GENDER BELOW). Is that correct?

Reenumeration-B (RE-B)

Reenumeration-B Part B of the Reenumeration section includes questions RE76 through RE112. This section details how family members are related to one another and the size of the family unit. Race, ethnicity, educational attainment, and military status for each person are specified.

Item	Changes	Year	Text
DECOM	Item revised to comply with DHHS data collection standard.	2010	(Do/Does) (PERSON) consider (yourself/himself/herself) Hispanic or Latino?
RE98A		2013	{Are/Is} {you/{PERSON}} Hispanic, Latino, or Spanish origin?
	Item revised to comply with DHHS data collection standard.	2010	Please look at this card and tell me which group best describes (PERSON)'s ethnic background.
RE100A		2013	Please look at this card and tell me which group or groups best describes {your/{PERSON}'s} ethnic background.
	Item revised to comply with	2010	Please look at this card and tell me which race or races best describes (PERSON).
RE101A	DHHS data collection standard.	2013	For this survey, Hispanic origins are not races.
		2013	What is {your/{PERSON}'s} race? Please select one or more of the categories on this card.
RE101B	Item omitted to comply with DHHS data collection standard.	2010	Please look at this card and tell me which group best describes (PERSON)'s ethnic background.
KETOTR		2013	
RE102	Item added to comply with DHHS data collection standard.	2010	
KE 102		2013	Does anyone in your family speak a language other than English at home?
RE102A	Item added to comply with DHHS data collection	2010	
		2013	What is this language?

Item	Changes	Year	Text
	standard.		
		2010	
RE102B	Item added to comply with DHHS data collection standard.	2013	How well {do/does} {you/{PERSON}} speak English? Would you say Very well, well, not well, or not at all?
	Item added to comply with	2010	
RE102C	DHHS data collection standard.	2013	{Were/Was} {you/{PERSON}} born in the United States?
	Item added to comply with	2010	
RE102D	DHHS data collection standard.	2013	In what year did {you/{PERSON}} come to the United States to stay?
DE400E	Item added to comply with	2010	
RE102E	DHHS data collection standard	2013	About how long {have/has} {you/{PERSON}} lived in United States?
		2010	{As of December 31, {YEAR}, what/What} is the highest grade or year of regular school (PERSON) ever completed?
RE103	Edited to mirror NHIS education item.	2013	{As of December 31, {YEAR}, what/What} is the highest level of school {you/{PERSON}} {have/has} completed or the highest {you/he/she} received?
			Please tell me the category from the card that best describes{your/his/her} highest level of school completed.
RE104	Omitted. Highest degree collected at RE103.	2010	{{Do/Does/Did}/As of December 31, {YEAR} did} (PERSON) have a high school diploma or {{have/has/had}/had} (PERSON) passed the GED equivalency test?
		2013	
RE105	Omitted. Highest degree collected at RE103.	2010	What is the highest educational degree (PERSON) obtained {as of December 31, {YEAR}}?
		2013	
RE106	Omitted; combined with RE108.	2010	{(Is/Are)/As of December 31, {YEAR}, (were/was)} (READ NAMES BELOW) attending school either part-time or full-time?
	NEISS.	2013	
RE107	Omitted; combine with	2010	Who {is/was} attending school either part-time or full-time {on December 31, {YEAR}}?
KL107	RE108.	2013	
	Revised to include RE107 and RE107.	2010	{[Earlier you mentioned (PERSON) was living away at school in grades 1-12.]} {Is/Was} (PERSON) attending school part-time or full-time?
RE108		2013	{[Earlier you mentioned {you/{PERSON}} {were/was} living away at school in grades 1-12.]} {{Are/ls}}/As of December 31, {YEAR}, {were/was}} {you/{PERSON}} attending school full-time, part-time, or not attending school at all?
	Replace definition of regular school with level of school. Updated category names.		REGULAR SCHOOL A school that advances a person toward an elementary or high school diploma, or a college or professional school degree.
Help Text		2010	Regular school INCLUDES graded public, private, and parochial schools, colleges, universities, graduate and professional schools, seminaries where a Bachelor's degree is offered, junior colleges specializing in skill training, colleges of education, and nursing schools where a Bachelor's degree is offered.
			If the person attended school in another country, in an un-graded school, in a 'normal school', under a tutor, or under other special circumstances, ask the respondent to give the nearest equivalent of years in regular U.S. school.
	<u>l</u>		

Item	Changes	Year	Text
			If the person attended school OUTSIDE OF THE 'REGULAR' SCHOOL SYSTEM, you will need to probe to determine if the schooling is applicable here. Use the following guidelines to determine if the schooling should be included at this question:
			Training Programs - Count training received 'on the job', in the Armed Forces, or through correspondence school ONLY if it was credited toward a school diploma, high school equivalency (GED), or college degree.
			Vocational, Trade, or Business School - Do NOT include secretarial school, mechanical or computer training school, nursing school where a Bachelor's degree is not offered, and other vocational trade or business schools outside the regular school system.
			General Educational Development (GED) or High School Equivalency - An exam certified equivalent of a high school diploma. If the person has not actually completed all four years of high school, but has acquired his/her GED (high school equivalency based on passing the GED exam), count this as you would a high school graduate and enter code '12'.
			Adult Education - Adult education classes should NOT be included as regular school unless such schooling has been counted for credit in a regular school system. If a person has taken adult education classes but NOT FOR CREDIT, these classes should not be counted as regular school. Adult education courses given in a public school building are part of regular schooling only if their completion can advance a person toward an elementary school certificate, a high school diploma (or GED), or college degree.
			GRADE OR YEAR For this study, we have classified grades 1 through 8 as ELEMENTARY SCHOOL, and grades 9 through 12 as HIGH SCHOOL. However, you should note that the final grade of elementary school may be anywhere from grade 5 to grade 8, depending on the school system. So, if the respondent says the person you are asking about completed elementary school, probe to determine what grade that represents.
			Completing a given grade in school should be counted as the number of years it NORMALLY takes to complete that grade level of education, regardless of how many years it actually took the person to finish. This means that for persons who skipped or repeated grades in elementary school, you will enter the highest grade completed REGARDLESS of the number of years they were in school. This rule is true for elementary school through high school and is especially relevant to college. For example, if the person you are asking about is reported as having a 'Bachelor's Degree', it should be coded as '16' (College - Fourth Year) regardless of how many years it took him/her to receive it. Code '17' (College - Five or More Years) should be entered only if the person has completed one or more years of graduate or professional school.
		2013	LEVEL OF SCHOOL
			Include only regular schooling which advances a person toward an elementary or high school diploma, or a college/university/ professional school (such as law, medicine, dentistry) degree. Count schooling in other than regular schools only if the credits obtained are acceptable in a regular school system.
			Do not include "adult education" classes not taken for credit in a regular school system. For example: Do not consider a person to have had "Some college, no degree" simply because he/she took an "adult education" class in Conversational French at a local university.
			Select High School Diploma" if the person received a high school diploma even if in less than 12 years.
			For persons who have attended "post-graduate" high school courses, but have not attended college, probe to determine if a high school diploma was received or if a GED or equivalent was received. If so, select "GED or equivalent" or "High School Diploma." If not select "12th Grade, No Diploma" if appropriate (or the actual grade completed if less than the 12th).
			Education for nurses and nursing related fields can vary. If there are questions from the respondent, please use the following guidelines. The CNA is a vocational training program that lasts usually 6-9 months and is not a degree— select the grade/level completed at the last

Item	Changes	Year	Text
			regular school. The LPN and LVN programs usually include a "diploma" or "certification" after one year's vocational training; the category "associate degree: occupational technical, or vocational program" would be most appropriate. The RN is a degree program from either a nursing school (usually a 3 year program equivalent to 3 years of college and equivalent to more than an associate degree) or a community college or college/university program that can either be at the associates, bachelors, masters, or PhD levels—select the most appropairate category between "some college" through "doctorate degree." For persons still in school, be sure to report the highest grade/level completed. For example, a person currently in the 10th grade probably completed the 9th grade.
Help Text	Omitted.	2010	HAVE HIGH SCHOOL DIPLOMA A certificate that verifies that a person has successfully completed the required courses of a high school curriculum. By 'have a high school diploma', we mean did the person graduate from high school rather than literally do they have the document bearing record of graduation. PASSED GED A GED (general educational development) is an exam certified as the equivalent to attaining a high school diploma.
		2013	
Help Text RE105	Omitted.	2010	BACHELOR'S DEGREE An educational degree given by a college or university to a person who has completed a four-year course or its equivalent in the humanities or related studies (B.A.) or in the sciences (B.S.). MASTER'S DEGREE An educational degree given by a college or university to a person who has completed a prescribed course of graduate study in the humanities or related studies (M.A.) or in the sciences (M.S.). It ranks above a bachelor's degree and below a doctorate degree and usually takes two years to complete. DOCTORATE DEGREE The highest educational degree given by a college or university to a person who has completed a prescribed course of advanced graduate study. Examples include a Doctor of Philosophy (Ph.D.), Doctor of Laws (J.D.), Doctor of Medicine (M.D.), etc. NO DEGREE If the person has some years of college, but has not yet obtained an educational degree, code 'NO DEGREE'. For example, if the person is in his/her last term towards earning a Bachelor's degree, code 'NO DEGREE'. OTHER If the person obtained an educational degree other than a Bachelor's, Master's, or Doctorate degree, code 'OTHER'. A high school degree or GED is NOT considered an educational degree for this question.
		2013	

Review of Employment Information (RJ)

In Rounds 2 through 5, the Review of Employment Information reviews employment information for any current job identified during the previous round. It collects updated information on job status, salary where changes in wages occur, full- or part-time work, health insurance benefits, and size of employment establishment if the jobholder is self employed. Questions are asked about whether the person's job was temporary or seasonal, and additional questions are asked about health insurance, including whether it was offered to the person, whether it was offered to any employee, and why the person was not eligible.

Changes: None

Satisfaction with Health Plan (SP)

The Satisfaction with Health Plan section collects satisfaction information for private insurance, Medigap, Medicare managed care programs, Medicaid/SCHIP, and TRICARE insurance. The information collected includes ease of access to medical care, need to seek approval for medical treatments and delays in care experienced while waiting for approval, ease of access to understandable plan information and repercussions of poor access, need to complete paperwork and problems filling out paperwork, and an overall rating of the health plan.

Item	Changes	Year	Text
SP01	Revised to include time	2010	The next questions ask about (POLICYHOLDER)'s (and other family members') experience(s) with {NAME OF INSURER BEING LOOPED ON}, that is, (POLICYHOLDER)'s {hospital and physician/Medicare Supplement or Medigap} coverage through (ESTABLISHMENT).
	frame.	2013	We are going to ask you to rate {your/{POLICYHOLDER}'s} (and other family members') experience(s) with {NAME OF INSURER BEING LOOPED ON}, that is, {your/his/her} {hospital and physician/Medicare Supplement or Medigap} coverage through {ESTABLISHMENT} In answering these questions, please think about your experiences over the last 12 months.

Time Period Covered Detail (HQ)

This section clarifies the timeframe for which each person was covered by each reported health insurance policy. It links to the Health Insurance (HX), Private Health Insurance Detail (HP), and Old Public Related Insurance (PR) sections.

Changes: None