

MEDICAL EXPENDITURE PANEL SURVEY

**HOUSEHOLD COMPONENT
MAIN STUDY**

**BLAISE/WVS
SHOW CARDS**

Panels 19, 20, and 21

January 2016

DRAFT

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CARD RE-1

One or more categories may be selected.

R
E-
1

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

CARD RE-2

One or more categories may be selected.

**R
E-
2**

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

CARD PE-1

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

CARD HE-1

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

CARD CS-2

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

CARD CS-3

C
S-
3

- Never
- Sometimes
- Usually
- Always

CARD CS-4

None

1

2

3

4

5-9

10 or more

**C
S-
4**

CARD CS-5

0 Worst Health Care Possible

1

2

3

4

5

6

7

8

9

10 Best Health Care Possible

C
S-
5

CARD PP-1

TYPES OF HEALTH CARE PROVIDERS AND FACILITIES

Medical Professionals and Practitioners:

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

Mental Health Professionals:

Psychiatrist
Psychologist
Psychiatric Social Worker
Mental Health Therapist

Medical Facility or Clinic:

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

Dental Care:

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

CARD PP-2

TYPES OF HOSPITAL SERVICES

Hospital Stay

Emergency Room Visit

Outpatient Department Visit

CARD PP-3

TYPES OF HOME CARE SERVICES

P Skilled Medical Care

P-

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

Personal Care

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

Household Chore Services

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

Companionship

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

Any Other Type of Home Care

CARD PP-3A

TYPES OF LONG TERM CARE FACILITIES

Inpatient Rehabilitation Facility or Convalescent Home

Nursing Home

Residential Mental Health Treatment Center

P Residential Eating Disorder Treatment Center

P-

3 Residential Drug and Alcohol Treatment Center

A

Residential Addiction Treatment Center

Residential Hospice Care

Residential Respite Care

CARD PP-4

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

P Other Diabetic Equipment or Supplies

P-

4

CARD PP-5

AMBULANCE SERVICES

ORTHOPEDIC ITEMS

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

HEARING DEVICES

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

PROSTHESES

- Artificial limbs

BATHROOM AIDS

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

MEDICAL EQUIPMENT

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

DISPOSABLE SUPPLIES

- Ostomy supplies
- Bandages
- Dressings
- Tape
- Adult disposable diapers
- Catheters
- Syringes not prescribed by a physician
- IV supplies

ALTERATIONS/MODIFICATIONS

- Ramps
- Handrails
- Elevators
- Automobile modifications

OTHER

**P
P-
5**

CARD PP-6

TYPES OF DENTAL CARE PROVIDERS

Dentist

Dental or Oral Surgeon

Orthodontist

Dental Hygienist

Dental Technician

Dental Assistant

CARD PP-7

TYPES OF MEDICAL PROVIDERS

P Medical Professionals:

**P-
7**

Medical Doctor

Nurse

Nurse Practitioner

Midwife/Nurse Midwife

Physiatrist

Paramedic

Health Aide

Physical Therapy or Rehabilitation Services

Therapist-Physical, Speech, Occupational

Physician's Assistant

Optometrist/Ophthalmologist

Podiatrist (Foot Doctor)

Chiropractor

Acupuncturist

Audiologist

Mental Health Professionals:

Psychiatrist

Psychologist

Psychiatric Social Worker

Mental Health Therapist

CARD PP-8

TYPES OF HOSPITAL SERVICES

Hospital Stay

Emergency Room Visit

P Outpatient Department Visit
P-
8

CARD PP-9

TYPES OF OTHER MEDICAL PROVIDERS

Medical Professionals and Practitioners:

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

Medical Facility or Clinic:

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

Mental Health Professionals:

Psychiatric Social Worker
Mental Health Therapist

**P
P-
9**

CARD PP-10

TYPES OF HOME CARE SERVICES

Skilled Medical Care

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

Personal Care

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

Household Chore Services

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

Companionship

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

P- Any Other Type of Home Care

10

CARD PP-11

TYPES OF LONG TERM CARE FACILITIES

Inpatient Rehabilitation Facility or Convalescent Home

Nursing Home

Residential Mental Health Treatment Center

Residential Eating Disorder Treatment Center

Residential Drug and Alcohol Treatment Center

Residential Addiction Treatment Center

Residential Hospice Care

Residential Respite Care

CARD PP-12

TYPES OF OTHER MEDICAL SUPPLIES/EXPENSES

P

P-

12 Eyeglasses or Contact Lenses ...

Bought

Replaced

Paid for Repairing

Diabetic Equipment or Supplies ...

Insulin

Syringes

Test Paper

Other Diabetic Equipment or Supplies

CARD PP-13

AMBULANCE SERVICES

ORTHOPEDIC ITEMS

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

HEARING DEVICES

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

PROSTHESES

- Artificial limbs

BATHROOM AIDS

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

MEDICAL EQUIPMENT

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

DISPOSABLE SUPPLIES

- Ostomy supplies
- P** -- Bandages
- P-** -- Dressings
- 13** -- Tape
- Adult disposable diapers
- Catheters
- Syringes not prescribed by a physician
- IV supplies

ALTERATIONS/MODIFICATIONS

- Ramps
- Handrails
- Elevators
- Automobile modifications

OTHER

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

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

**E
V-
1
A**

CARD EV-1B (Rounds 3 and 5)

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

**E
V-
1B**

CARD HS-1

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

CARD ER-1

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

CARD ER-2

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

**E
R-
2**

CARD OP-1

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

CARD OP-2

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

O
P-
2

CARD MV-1

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

CARD MV-2

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

CARD DN-1

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

**D
N-
1**

CARD DN-2

**D
N-
2**

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

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

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

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

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

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

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

CARD HH-1

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

CARD HH-2

Medical Treatments

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

Help Using Medical Equipment or Assistive Device (Examples)

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

Help With Daily Activities or Personal Care (Examples)

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

CARD HH-3

Help With Daily Activities or Personal Care (Examples)

**H
H-
3**

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

CARD CP-1

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

C
P-
1

CARD PC-1

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

CARD AP-1

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

A
P-
1

CARD AC-1

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

CARD AC-2

A
C-
2

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

CARD AC-3

- Never
- Sometimes
- Usually
- Always

CARD AC-4

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

CARD HX-1

- From a Professional Association
- From a Small Business Group
- From a Union
- Directly From an Insurance Agent
- Directly From Insurance Company
- Directly From an HMO
- Directly From a High Risk Pool
- From a Previous Employer
- From a Previous Employer (COBRA)
- Directly From the Health Insurance Marketplace

**H
X-
1**

CARD HX-2

Sample Medicare Card

MEDICARE			HEALTH INSURANCE	
1-800-MEDICARE (1-800-633-4227)				
NAME OF BENEFICIARY				
JANE DOE				
MEDICARE CLAIM NUMBER			SEX	
000-00-0000-A			FEMALE	
IS ENTITLED TO			EFFECTIVE DATE	
HOSPITAL (PART A)			07-01-1986	
MEDICAL (PART B)			07-01-1986	
SIGN HERE _____				

CARD HX-3

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

**H
X-
3**

(One for Each State)

CARD HX-4

- From a Group or Association
- Directly Through a School
- Directly From an Insurance Agent
- Directly From Insurance Company
- Directly From an HMO
- H**
X-
4 -- Directly From an High Risk Pool
- From a Union
- From Anyone's Previous Employer (COBRA)
- From Anyone's Previous Employer
(Not COBRA)
- From Spouse's/Deceased Spouse's Previous
Employer
- From Some Other Employer
- Under Plan of Someone Not Living Here
- Directly From the Health Insurance Marketplace

CARD HX-6

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

H
X-
6

CARD HX-7

- 1 - 30
- 31 - 60
- 61 - 90
- 91 - 120
- 121 or more

H
X-
7

CARD HX-9

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

CARD HX-11

-- TANF (Temporary Aid for Needy Families)

H --SSI (Supplemental Security Income)

X-

11 --WIC (Women, Infants and Children)

-- IHS (Indian Health Service)

-- Public Health Clinic

-- VA (Veterans Administration)/CHAMPVA

CARD IN-1

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

CARD IN-2

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

CARD IN-3

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

IN
-2

IN
-3

CARD IN-4

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

CARD AS-1

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

A
S-
1

CARD AS-2

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

**A
S-
2**

CARD AS-3

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

A
S-
3

CARD AS-4

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

A
S-
4

CARD AS-5

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

AS-5