SpecWriter Data

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Report Type: Full Detail

Project Database: WESSQL6.MEPS_V2

Language: English

Spec Label:

This is the cover page. Additional contents currently project specific.

BOX 00 (PR1005) Item Type: Route Type Class: If Then

Route Details:

01 Box= BOX_00, BOX_10, BOX_20, BOX_30, BOX_40, BOX_50, BOX_60, BOX_70, BOX_80, BOX_90, BOX_100, BOX_110, BOX_120, BOX_130, BOX_140, BOX_150, BOX_160, BOX_170, BOX_180, BOX_190, BOX_200, BOX_210, BOX_220, BOX_230, BOX_240

02 Loop= LOOP_10

03 End Loop= END LP10

05- Single select with Display Roster= PR10, PR30, PR40, PR50, PR70, PR80, PR90, PR100, PR110, PR130, PR140, PR150_01, PR160_01, PR170, PR180, PR190, PR210, PR240, PR250, PR260_01, PR270_01, PR290_01, PR300_01, PR310_01, PR320_01, PR330, PR340, PR350, PR370, PR400, PR410, PR420

09 -Multi select with Display Roster = PR280_01, PR380

10 Multiple Select with Fill in Answer Text= PR220

17 Dollar Items Allowing Cents= PR60, PR120, PR230, PR390

20 OS Text Field= PR70OS, PR130OS, PR240OS, PR400OS

23 Text Field= PR20, PR200, PR360

BOX 10 (PR1010) Item Type: Route Type Class: If Then

Route Details: Context header display instructions:

Display Person.FullName, Insurance.HISrcName

General Display Instructions for Question Text:

For '{START DATE}', display the RU level reference period start date (typically-but not always Jan 1 if Round 1 or the previous round interview date if Rds 2-5). Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variable BegRefDt.

For '{END DATE}', display the RU level reference period end date (typically but not always current round interview date if Rds 1-4 or Dec 31 if Round 5). Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variable EndRefDt.

For '{PERSON'S START DATE}', display the person level reference period start date. Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variables Person.BegRefM, Person.BegRefD, Person.BegRefY.

For '{PERSON'S END DATE}', display the person level reference period end date. Display as full month, xx, YYYY - e.g., "January 1, 2016". Use variables Person.EndRefM, Person.EndRefD, Person.EndRefY.

Unless there is a more specific fill instruction provided at the item level, for any fill using the variable 'Insurance.Insurer', display the text entry stored or display "Refused Insurer" if Insurance.Insurer=RF or display "Don't Know Insurer" if Insurance.Insurer=DK. Items using Insurance.Insurer include PR170, PR210, PR230, PR240, PR240OS, PR250, PR330, PR370, PR390, PR400, PR400OS, PR410, PR420.

BOX_20 (PR1015) Item Type: Route Type Class: If Then

Route Details: If at least one person was covered by Medicare during the previous round

(Insurance.HISrc=Medicare and Insurance.OrigRnd<>Current round), continue with

LOOP 10.

Otherwise, go to BOX_30.

LOOP 10 (PR1020) Item Type: Route Type Class: Begin Loop

Route Details: For each insurance, ask PR10-END_LP10.

Loop definition: LOOP_10 collects information about the coverage provided through Medicare. This loop cycles on insurance that meets both of the following conditions:

- Establishment is Medicare (Insurance.HISrc=Medicare) and
- Person was covered by Medicare at anytime during the previous round (Insurance.OrigRnd<>Current round).

BLAISE NAME: MAMCPlan **PR10** (PR1025) **Item Type:** Question Field kind: Datafield ArrayMin: Min value: **Type Class:** Enumerated Field Size: **Answer Type: TYESNO** Answers allowed: 1 ArrayMax: Max value: ✓ Help Available (CAREMANAGEHelp) ☐ Look Up File () ☐ Show Card () Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME}

Question Text:

{{Are/Is} {you/{PERSON}}} currently/As of {PERSON'S 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.

HELP: F1

Responses: YES **PR20** (PR1030) NO PR90 (PR1070) REFUSED ----- RF PR90 (PR1070) DK PR90 DON'T KNOW (PR1070)

Display Instructions:		} {you/{PERSON}} cu were/was} {you/{PERS			olay 'As of {PERSON	N'S
Testing/Editing Notes:		ed at MEPSSpring2018 tt MEPSSpring2018.H.				
PR20	(PR1030)	BLAISE NAME: M	AMCPlanName)		
Item Type:	Question	Field kind: Datafie	eld ArrayM	in: Mi	n value:	
Type Class:	String	Field Size: 25				
Answer Type:	{Continuous Answ	ver. } Answers allowed	d: 1 ArrayM	ax: Ma	ax value:	
☐ Help Available ()	☐ Show Ca	rd ()		☐ Look Up File	()
Context Header:	{PERSON'S FIR	ST MIDDLE AND LA	AST NAME}			
Question Text:						
What {is/was} the n DATE}}? ENTER PLAN NAM		RSON}'s} Medicare ma	anaged care plan	a {as of {PE	RSON'S END	
Responses:	REFUSED		RF	PR30 PR30 PR30	(PR1035) (PR1035) (PR1035)	
Programmer Instructions:	Set Insurance.Ins	surer to PR20.				
Display Instructions:		round 5. Display 'was'		Otherwise, u	se a null display.	
Testing/Editing Notes:		ed at MEPSSpring2018 at MEPSSpring2018.H.				

PR30	(PR1035)	BLAISE NAME: MAMO	Pmed	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:
☐ Help Available ()	☐ Show Card ()	☐ Look Up File ()
Context Header:	{PERSON'S F	IRST MIDDLE AND LAST I	NAME}	
Question Text:				
· · · · · · · · · · · · · · · · · · ·		have prescribed medicine conged care plan} {as of {PERS		· -
Responses:	NO	······································	2 RF	
Programmer Instructions:	If Round 3, cor Otherwise, go t	ntinue with PR40. to END_LP10.		
Display Instructions:	Display '{NAM	Does}' if not round 5. Display ME OF PLAN FROM PR20}' Medicare managed care plan W).	if a plan name v	vas entered at PR20. Display
	Display the act	-	0 for 'NAME OF	F PLAN FROM PR20' if a plan
	Display 'as of {	PERSON'S END DATE}' if	round 5. Otherw	vise, use a null display.
Testing/Editing Notes:		eted at MEPSSpring2018.HX_ I at MEPSSpring2018.HX_M		

BLAISE NAME: MAMCPayPrem **PR40** (PR1040)**Item Type:** Question Field kind: Datafield ArrayMin: Min value: **Type Class:** Enumerated Field Size: **Answer Type: TYESNO Answers allowed:** 1 ArrayMax: Max value: ✓ Help Available (PREMPAYHelp) ☐ Show Card () ☐ Look Up File () {PERSON'S FIRST MIDDLE AND LAST NAME} **Context Header: Question Text:** Most Medicare beneficiaries pay their Part B premiums through their Social Security checks. In addition, {do/does}{you/{PERSON}}} (or anyone in the family) pay anything else for {the coverage with {{NAME OF PLAN FROM PR20}/ this Medicare managed care plan}? [Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay.] HELP: F1 **Responses:** YES PR50 (PR1045) NO END LP10 (PR1105) ----- RF **REFUSED** END_LP10 (PR1105) ----- DK END_LP10 DON'T KNOW (PR1105) **Display** Display 'the coverage with {NAME OF PLAN FROM PR20}' if a Medicare plan name **Instructions:** entered at PR20. Display 'this Medicare managed care plan' if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW). Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan

Testing/Editing
Notes:

name was entered.

Variable collected at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25] Variable stored at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25]

<u>PR50</u>	(PR1045)	BLAISE NAME: MAMC	CHowPaid		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min valı	ie:
Type Class:	Enumerated	Field Size:			
Answer Type:	THOWPAYMCARE	E Answers allowed: 1	ArrayMa	x: Max val	ue:
☐ Help Available ()	☐ Show Card ()		Look Up File ()
Context Header:	{PERSON'S FIRS	Γ MIDDLE AND LAST N	NAME}		
Question Text:					
How {do/does} {you care} premium?	u/{PERSON}} pay fo	or {your/his/her} {{NAMI	E OF PLAN	FROM PR20}/	Medicare managed
	AY: Is the Medicare provider, or paid both	Advantage premium paid ways?	through {ye	our/his/her} Soc	ial Security check,
Responses:	DEDUCTED FRO	M SOCIAL SECURITY	1	PR60	(PR1050)
				PR60	(PR1050)
	20111			PR60	(PR1050)
	= :=			END_LP10	(PR1105)
	DON'T KNOW		DK	END_LP10	(PR1105)
Display Instructions:		OF PLAN FROM PR20}': managed care' if PR20 wa			
	Display the actual pname was entered.	plan name entered at PR20) for 'NAM	E OF PLAN FR	OM PR20' if a plan
Testing/Editing Notes:		at MEPSSpring2018.HX_ MEPSSpring2018.HX_M			

<u>PR60</u>	(PR1050)	BLAISE N	IAME: MAM	CCovgAmt		
Item Type:	Question	Field kin	d: Datafield	ArrayMi	n: Min	value: 0
Type Class:	Real	Field Size	e: 9,2			
Answer Type:	{Continuous A	nswer.} Answer	rs allowed: 1	ArrayMa	x: Max	value: 999999.99
☐ Help Available ()		Show Card ()		☐ Look Up File ()
Context Header:	{PERSON'S }	FIRST MIDDLE	E AND LAST	NAME}		
Question Text:						
How much {is {your for {your/his/her} {}!				o/does} {you	/{PERSON}	} pay in premiums}
IF RESPONDENT I	S NOT SURE,	DO NOT PROB	BE. CODE 'DO	ON'T KNOV	V'.	
ENTER AMOUNT						
Responses:					PR70	(PR1055)
	REFUSED			RF	PR80	(PR1065)
	DON'T KNO	W		DK	PR80	(PR1065)
Programmer Instructions:	Allow for an	entry of dollars a	and cents.			
Display Instructions:	Display PR60,	PR70 and PR70	OS on the sam	ie form pane	2.	
	FROM SOCI		'. Display {do/	does} {you/		s coded '1' (DEDUCTED pay in premiums' if
						was entered at PR20. (KNOW)), use a null
	Display the ac	•	entered at PR2	0 for 'NAM	E OF PLAN	FROM PR20' if a plan
Testing/Editing Notes:		ected at MEPSSped at MEPSSprir				MCLoop[125] CLoop[125]

PR70 Item Type:	Question	LAISE NAME: MAMC Field kind: Datafield	CovgUnit ArrayMii	ı: Min valı	ie:
Type Class: Answer Type:	Enumerated I TCOVERAGETIME	Field Size: Answers allowed: 1	ArrayMa	x: Max val	ue:
<u></u>			<u>-</u>		
☐ Help Available ()	☐ Show Card ()		Look Up File ()
Context Header:	{PERSON'S FIRST	MIDDLE AND LAST N	NAME}		
Question Text:					
	nr/{PERSON}'s} Socia NAME OF PLAN FRO	l Security deduction/{do. M PR20} plan?]	/does} {you	ı/{PERSON}} p	pay in premiums}
Is that per year, per i	month, per week, or wh	nat?			
ENTER UNIT OF C	COVERAGE				
Responses:	PER YEAR		1	END_LP10	(PR1105)
		S (QUARTERLY)		END_LP10	(PR1105)
		S (BIMONTHLY)		END_LP10	(PR1105)
				END_LP10	(PR1105)
			_	END_LP10	(PR1105)
	· ·	BIWEEKLY)		END_LP10	(PR1105)
		R (SEMI-ANNUALLY)		END_LP10	(PR1105)
		TH (SEMI-MONTHLY)	•	END_LP10	(PR1105)
	_		-	PR70OS	(PR1060)
			RF	END_LP10	(PR1105)
	DON'T KNOW		DK	END_LP10	(PR1105)

Display
Instructions

Display PR60, PR70 and PR70OS on the same form pane.

Display the first paragraph of question text in brackets and grayed out text.

Display 'is {your/{PERSON}'s} Social Security deduction' if PR50 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if

PR50 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.

Testing/Editing Notes:

Responses:

REFUSED

DON'T KNOW

Variable collected at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25] Variable stored at MEPSSpring2018.HX Main.PR Main.PR MAMCLoop[1..25]

PR70OS	(PR1060)	<u>BLAISE NAME:</u> MAMC	CovgUnitOS		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:	
Type Class:	String	Field Size: 25			
Answer Type:	{Continuous Answer	Answers allowed: 1	ArrayMax:	Max value:	
☐ Help Available ()	☐ Show Card ()	☐ Look Up File ()	
Context Header:	{PERSON'S FIRST	Γ MIDDLE AND LAST N	NAME}		
Question Text:					
	ır/{PERSON}'s} Soci NAME OF PLAN FR	•	/does} {you/{PEI	RSON}} pay in premiums}	
SPECIFY: OTHER	UNIT OF COVERA	GE			

..... RF

..... DK END LP10

END LP10

END LP10

(PR1105)

(PR1105)

(PR1105)

Display Instructions:

Display PR60, PR70 and PR70OS on the same form pane.

Display the first paragraph of question text in brackets and grayed out text.

Display 'is {your/{PERSON}'s} Social Security deduction' if PR50 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if PR50 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM PR20}' if a Medicare plan name was entered at PR20. Otherwise (i.e., if PR20 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at PR20 for 'NAME OF PLAN FROM PR20' if a plan name was entered.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25] Variable stored at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25]

PR80	(PR1065) B	LAISE NAME: MAMC	CovgRng	
Item Type:	Question I	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated 1	Field Size:		
Answer Type:	TCOSTPLANMONT	Answers allowed: 1	ArrayMax:	Max value:
☐ Help Available ()	✓ Show Card (HX	-5)	☐ Look Up File ()
Context Header:	{PERSON'S FIRST	MIDDLE AND LAST N	NAME}	
Question Text: {PLAN NAME: {NA	AME OF PLAN FROM	4 PR20}}		
HX-5				

Which category on card HX-5 best indicates the cost of this plan per month?

\$51-\$100	2	END_LP10	(PR1105)
\$101-\$200	3	END_LP10	(PR1105)
\$201-\$300	4	END_LP10	(PR1105)
\$301 OR MORE	5	END_LP10	(PR1105)
REFUSED	RF	END_LP10	(PR1105)
DON'T KNOW	DK	END_LP10	(PR1105)

Responses:

YES

NO

REFUSED

DON'T KNOW

(PR1105)

(PR1105)

(PR1105)

Display Instructions:	entered at PR2 KNOW)), use	tual plan name entered at PR20	s coded 'RF' (RE	
Testing/Editing Notes:		cted at MEPSSpring2018.HX_d at MEPSSpring2018.HX_M		
PR90	(PR1070)	BLAISE NAME: MAMO		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:	A	Managhar
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:
✓ Help Available	(PartDHelp)	☐ Show Car	d ()	☐ Look Up File ()
Context Header:	{PERSON'S F	FIRST MIDDLE AND LAST	NAME}	
Question Text:				
	· · · · ·	SON}} enrolled in Medicare F SON'S END DATE}}?	Part D, also knov	wn as the Medicare
				HELP: F1

2 END_LP10

..... RF END_LP10

..... DK END_LP10

If coded '1' (YES) and Round 3, continue with PR100. **Programmer**

Otherwise (if coded '1' (YES) and rounds 2, 4, or 5), go to END LP10. **Instructions:**

Display

Display '{Are/Is}' if not round 5. Display '{Were/Was}' if round 5. Display 'as of **Instructions:**

{PERSON'S END DATE}' if round 5. Otherwise, use a null display.

Testing/Editing

Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25] Variable stored at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25]

PR100 (PR1075) BLAISE NAME: MAMCPayPartD

Item Type: Question Min value: Field kind: Datafield ArrayMin:

Type Class: Enumerated Field Size:

Answer Type: TYESNO Answers allowed: 1 ArrayMax: Max value:

✓ Help Available (PREMPAYHelp) ☐ Show Card () ☐ Look Up File ()

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME}

Question Text:

Most Medicare beneficiaries pay their Part B premiums through their Social Security checks. In addition, {do/does}{you/{PERSON}} (or anyone in this household) pay anything else for {your/his/her} Medicare Prescription Drug Plan (also known as Part D)?

[Do not include the cost of any copayments, coinsurance or deductibles anyone in the family may have had to pay.]

HELP: F1

YES **Responses:** PR110 (PR1080)

> NO END LP10 (PR1105) RF **REFUSED** END LP10 (PR1105) DK DON'T KNOW END_LP10 (PR1105)

MEPS_V2 Full Detail Spec			Old Pu	blic Related Ins	urance (PR) Secti
Display Instructions:					
Testing/Editing Notes:		cted at MEPSSpring2018 d at MEPSSpring2018.H			
PR110	(PR1080)	BLAISE NAME: M	IAMCHowPayPa	rtD	
Item Type:	Question	Field kind: Datafi	eld ArrayMi	n: Min valu	ie:
Type Class:	Enumerated	Field Size:			
Answer Type:	THOWPAYMO	CARE Answers allowe	d: 1 ArrayMa	x: Max val	ue:
☐ Help Available (☐ Show Ca	` ,		Look Up File (
Question Text:					
How {do/does} {yo	ou/{PERSON}} p	oay for {your/his/her} Par	t D premium?		
IF NECESSARY, S check, paid directly		care drug coverage premi or paid both ways?	um paid through	{your/his/her} S	ocial Security
Responses:		FROM SOCIAL SECUR		PR120	(PR1085)
		ĽY		PR120	(PR1085)
	20111		e	PR120	(PR1085)
	REFUSED	······		END_LP10	(PR1105)
	DON'T KNOV	V	DK	END_LP10	(PR1105)

Display	

Instructions:

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25] Variable stored at MEPSSpring2018.HX_Main.PR_Main.PR_MAMCLoop[1..25]

PR120	(PR1085)	BLAISE NA	ME: MAMC	CAmtPayPa	rtD	
Item Type:	Question	Field kind:	Datafield	ArrayMi	n: Mi	in value: 0
Type Class:	Real	Field Size:	9,2			
Answer Type:	{Continuous Answer	r.} Answers	allowed: 1	ArrayMa	x: M	ax value: 999999.99
☐ Help Available ()	\square s	how Card ()		☐ Look Up File ()
Context Header:	{PERSON'S FIRS	T MIDDLE	AND LAST I	NAME}		
Question Text:						
How much {is {your for {your/his/her} Pa		al Security de	eduction/{do/	does} {you	/{PERSO	N}} pay in premiums}
IF RESPONDENT I	S NOT SURE, DO N	NOT PROBE	. CODE 'DO	N'T KNOW	ⁿ .	
ENTER AMOUNT						
Responses:					PR130	(PR1090)
-	REFUSED			RF	PR140	(PR1100)
	DON'T KNOW			DK	PR140	(PR1100)
Programmer Instructions:	Allow for the entry	of dollars an	nd cents.			
Display Instructions:	Display PR120, PF	R130, PR130	OS on the sar	ne form par	ne.	
	Display 'is {your/{ (DEDUCTED FRO premiums' if PR11	OM SOCIAL	SECURITY)). Display '{	[do/does]	{you/{PERSON}} pay in
Testing/Editing Notes:	Variable collected Variable stored at					MAMCLoop[125] MCLoop[125]

PR130	(PR1090) <u>B</u>	LAISE NAME: MAMO	CUnitPayPa	rtD	
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min val	lue:
Type Class:	Enumerated	Field Size:			
Answer Type:	TCOVERAGETIME	Answers allowed: 1	ArrayMa	ax: Max va	alue:
☐ Help Available ()	☐ Show Card ()		Look Up File ()
Context Header:	{PERSON'S FIRST	MIDDLE AND LAST	NAME}		
Question Text:					
[How much {is {your for {your/his/her} } Pa		l Security deduction/{do	o/does} {yo	u/{PERSON}}	pay in premiums}
Is that per year, per i	month, per week, or wl	hat?			
ENTER UNIT O	F COVERAGE				
Responses:	PER YEAR		1	END_LP10	(PR1105)
	EVERY 3 MONTHS	S (QUARTERLY)	2	END_LP10	(PR1105)
	EVERY 2 MONTHS	S (BIMONTHLY)	3	END_LP10	(PR1105)
	PER MONTH		4	END_LP10	(PR1105)
	PER WEEK		5	END_LP10	(PR1105)
	EVERY 2 WEEKS	(BIWEEKLY)	6	END_LP10	(PR1105)
	2 TIMES PER YEA	R (SEMI-ANNUALLY)	7	END_LP10	(PR1105)
	2 TIMES PER MON	NTH (SEMI-MONTHLY	<i>Y</i>) 8	END_LP10	(PR1105)
	OTHER		91	PR130OS	(PR1095)
	REFUSED		RF	END_LP10	(PR1105)
	DON'T KNOW		DK	END_LP10	(PR1105)
Display Instructions:	Display PR120, PR1	130, PR130OS on the sar	me form par	ne.	
	Display the "How mout text.	uch{is {your/{PERSON	[}'s} Social	Security" in	brackets and grayed
	(DEDUCTED FROM	ERSON}'s} Social Secu M SOCIAL SECURITY is coded '2' (PAY DIRE). Display '{	[do/does] {you	
Testing/Editing Notes:		t MEPSSpring2018.HX_ IEPSSpring2018.HX_M			

PR130OS	(PR1095)	BLAISE NAME: MAN	1CUnitPayPartl	DOS
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	String	Field Size: 25		
Answer Type:	{Continuous Answ	ver. } Answers allowed: 1	ArrayMax	: Max value:
☐ Help Available ()	☐ Show Card (()	☐ Look Up File ()
Context Header:	{PERSON'S FIR	RST MIDDLE AND LAS	ΓNAME}	
Question Text:				
[How much {is {you for {your/his/her} Pa		ocial Security deduction/{	do/does} {you/	{PERSON}} pay in premiums}
SPECIFY: OTHER	UNIT OF COVER	AGE		
Responses:]	END_LP10 (PR1105)
	REFUSED		RF	END_LP10 (PR1105)
	DON'T KNOW		DK	END_LP10 (PR1105)
Display Instructions:	Display PR120, I	PR130, PR130OS on the s	same form pane	
	Display the "How out text.	v much{is {your/{PERSC	N}'s} Social S	ecurity" in brackets and grayed
	(DEDUCTED FI	/{PERSON}'s} Social Sec ROM SOCIAL SECURIT 10 is coded '2' (PAY DIR	Y). Display '{d	o/does} {you/{PERSON}} pay in
Testing/Editing Notes:		d at MEPSSpring2018.HZ t MEPSSpring2018.HX_J		ain.PR_MAMCLoop[125] .PR_MAMCLoop[125]

PR140	(PR1100) <u>I</u>	BLAISE NAME: MAMC	RngPayPar	rtD	
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min v	value:
Type Class:	Enumerated	Field Size:			
Answer Type:	TCOSTPLANMONT	Answers allowed: 1	ArrayMa	x: Max	value:
☐ Help Available (()	✓ Show Card (HX	(-6)		\Box Look Up File ()
Context Header:	{PERSON'S FIRST	Γ MIDDLE AND LAST I	NAME}		
Question Text:					
☐ HX-6					
Which category on	card HX-6 best indicat	tes the cost of this plan pe	r month?		
Responses:	\$1-\$30		1	END_LP10	(PR1105)
Responses.			_	END_LP10	, ,
			3	END_LP10	
			4	END_LP10	, ,
	\$121 OR MORE		5	END_LP10	(PR1105)
	REFUSED		RF	END_LP10	(PR1105)
	DON'T KNOW		DK	END_LP10	(PR1105)
Display Instructions:					
Testing/Editing Notes:		at MEPSSpring2018.HX_ //IEPSSpring2018.HX_Ma			
END_LP10	(PR1105) Ite	em Type: Route	Туре С	lass: If Then	1
Route Details:	Cycle on next insur-	ance that meets the condi-	tions stated	in the loop d	efinition.
	If no other insurance 30.	ce meets the stated condi	tions, end I	LOOP_10 and	d continue with BOX_

BOX 30	(PR1110)	Item Type: Route	Type Class:	If Then	
Route Details:	previous round Preload.Insuran Preload.CovdPo	ber had Medicaid/SCHIP as (at least one RU member whate.Plcyhldr=PersID where Pers.LRndCovd ={previous race.OrigRnd<>current round to BOX_90.	nere Preload.Insur Person.MostRecer ound number} and	rance.HISrc=Medicaid, atRU=RUUnit and d	
PR150 01 Item Type: Type Class:	(PR1115) Question Enumerated	BLAISE NAME: ConfC Field kind: Datafield Field Size:	aid ArrayMin:	Min value:	
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:	
✓ Help Available Question Text:	(MEDICATHelp)		Card ()	☐ Look Up File (()
		that {PERSON 1}, {PERSOTATE NAME FOR MEDIC			
		covered by {Medicaid/{STA CART DATE}/between {STA			
				HELP	: F1
Responses:	NO	······································	2 RF		

Programmer Instructions:

Preloaded grid type 1: forced navigation including PR150_01, PR150_02, PR150_03, PR150

_04, PR150_N.

After grid completion, continue with BOX 40.

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were "COVERED BY MEDICAID/SCHIP" at any time during the previous round (RU members where Preload.Insurance.HISrc=Medicaid, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were "COVERED BY MEDICAID/SCHIP" at any time during the previous round. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'was' if only one name is listed and that person is not the current respondent. Otherwise, display 'were'.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (substituting the state name for the program) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name by state to display, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to use by state, see the plan fill file.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR150 02: What about {PERSON 2}?

PR150 03: What about {PERSON 3}?

PR150_04: What about {PERSON N}? Has {he/she} been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE}}?

PR150_N: Repeat question text PR150_02-PR150_N for as many RU members that fit the

roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR150_02 – PR150_N. Display in bold black and no brackets when on PR150_01. Display in bold black and no brackets when on PR150_01.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX 40 **Item Type:** Route (PR1120) **Type Class:** If Then **Route Details:** If all current RU members are displayed at PR150 01-PR150 N, go to BOX 50. Otherwise, continue with PR160 01. PR160_01 (PR1125) **BLAISE NAME:** OthMmbCaid **Item Type:** Question Field kind: Datafield ArrayMin: Min value: Field Size: **Type Class:** Enumerated

Question Text:

Answer Type:

TYESNO

✓ Help Available (MEDICATHelp)

Besides the people we've just talked about, please think about whether any additional household members have been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE}}.

Answers allowed: 1

{Have you/Has {PERSON 1} been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE}}?

HELP: F1

☐ Look Up File ()

YES			1
NO			2
REFUSE	ED	I	RF
DON'T I	KNOW	Σ	ÞΚ
	NO REFUSI	NO	NO REFUSED

ArrayMax:

☐ Show Card ()

Max value:

Programmer Instructions:

Preloaded Grid type 1: Forced navigation including PR160_01, PR160_02, PR160_03,

PR160_04, PR160_N.

After grid completion, continue with BOX 50.

For each person coded '1' (YES), create insurance through Medicaid/SCHIP for this person

[set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicaid and

 $\label{local_local_local} Insurance. HISrcName = & \underbrace{Medicaid/\{STATE\ NAME\ FOR\ MEDICAID\}\}/\{STATE\ CHIP\ NAME\}}_{Amb} and Insurance. Plcyhldr= PersID and Coverage Flag List. Ins SrcN=YES for this property of the propert$

PersID] [set Create Q and OrigRnd]

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName).

Roster Filter:

Display only those RU members who were not covered by MEDICAID/SCHIP at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR150_01.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (substituting the state name for the program) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name by state to display, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to use by state, see the plan fill file.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR160 02: What about {PERSON 2}?

PR160 03: What about {PERSON 3}?

PR160_04: What about {PERSON N}? Has {he/she} been covered by {Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE}}?

PR160_N: Repeat question text PR160_02-PR160_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR160_02 – PR160 N. Display in bold black and no brackets when on PR160 01.

Testing/Editing

Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX 50 (PR1130) Item Type: Route Type Class: If Then

Route Details: If at least one RU member is "COVERED BY MEDICAID/SCHIP" during the current

round, that is, at least one RU member was coded as '1' (YES) at PR150_01-PR150_N or

PR160_01-PR160_N, continue with BOX_60.

Otherwise, go to BOX_90.

BOX_60 (PR1135) Item Type: Route Type Class: If Then

Route Details: Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Medicaid/SCHIP in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:

-Insurance source is Medicaid/SCHIP [Insurance.HISrc=Medicaid] And

-Person is "COVERED BY MEDICAID/SCHIP" during the current round, that is, either PR150

_01- PR150_N or PR160_01-PR160_N is coded '1' (YES) for this person.

At completion of HQ section, continue with PR170.

PR170 (PR1140) BLAISE NAME: CaidNameChng						
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min value:		
Type Class:	Enumerated	Field Size:				
Answer Type:	TYESNO	Answers allowed: 1	ArrayMa	x: Max value:		
☐ Help Available ()	☐ Show Card ()	☐ Look Up File ()		
Question Text:						
		1}, {PERSON 2}, {PERSOCHIP INSURER}.}	ON 3}, {PEI	RSON 4}, {PERSON N} may be		
name of the health in	nsurance {PERSON	ART DATE} and {END DA I 1}, {PERSON 2}, {PERSON E NAME FOR MEDICAID	ON 3}, {PE			
Responses:				PR180 (PR1145)		
	· -			BOX_70 (PR1160)		
				BOX_70 (PR1160)		
	DON'T KNOW		DK	BOX_70 (PR1160)		

Programmer Instructions:

If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), set previous round's insurer as 'CURRENT RD'S MEDICAID/SCHIP INSURER'. [Set Preload.Insurance.Insurer to

Insurance.Insurer]

Display Instructions:

Roster 1-Report

Roster definition:

This item uses the insurance array to display RU-members. (Person.FullName)

Roster filter:

Display only those RU members who are "COVERED BY MEDICAID/SCHIP" during the current round, that is, either PR150_01- PR150_N or PR160_01-PR160_N is coded '1' (YES) for this person.

Display first names only in the first sentence "Last time we recorded...."

Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display RU members' first, middle, and last names (Person.FullName) in the second sentence "{Since {START DATE}/Between {START DATE} and {END DATE}}...." Substitute "you" for the person's name if the respondent is included in this list. See instructions above about when to use commas vs. "and" to separate names.

Display 'Last time... {PRELOAD MEDICAID/SCHIP INSURER }.' If there was an insurer associated with Medicaid/SCHIP in the previous round (Preload.Insurance.Insurer <> RF, DK or EMPTY). Otherwise, use a null display.

For 'PRELOAD MEDICAID/SCHIP INSURER', display the insurer recorded for Medicaid/SCHIP during the previous round (Preload.Insurance.Insurer).

Display 'Since {START DATE}' if not round 5.
Display 'Between {START DATE}' and {END DATE}' if round 5.

Display 'has' if only one name is listed and that person is not the current respondent. Otherwise, display 'have'.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to display by state, see the plan fill file.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

PR180	(PR1145)	BLAISE NAME: CaidHMO					
Item Type:	Question	Field kind: Datafield	ArrayMiı	n: Min val	ue:		
Type Class:	Enumerated	Field Size:					
Answer Type:	THMOSIGND	Answers allowed: 1	ArrayMa	x: Max va	lue:		
✓ Help Availab	le (HMOHelp)	☐ Show Car	rd ()		Look Up File ()		
Question Text:							
{PERSON 1}, {I	PERSON 2}, {PERSO	OR MEDICAID}} or {STAT ON 3}, {PERSON 4}, {PER {START DATE} and {ENI	SON N} enr				
		ceive care from HMO physic by the HMO, or there was a r			en, the expense is		
					HELP: F1		
Responses:				PR200	(PR1155)		
	YES, SOME AF	RE	2	PR200	(PR1155)		
	NO, NONE ARI	Е	3	PR190	(PR1150)		
	REFUSED -		RF	PR190	(PR1150)		
	DON'T KNOW		DK	PR190	(PR1150)		

Old Public Related Insurance (PR) Section

Display Instructions:

Roster 1 – Report Roster Definition:

Use PR170 definition.

Roster filter: Use PR170 filter.

Display RU members' first, middle, and last names (Person.FullName) in the question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display '{are/is}' if not round 5. Display '{were/was}' if round 5.

Display 'is' or 'was' if the list includes 1 person who is not the respondent. Otherwise, display 'are' or 'were'.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (substituting the state name for the program) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name by state to display, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to use by state, see the plan fill file.

Display 'between {START DATE} and {END DATE}' if round 5. Otherwise, use a null display.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

PR190	(PR1150)	BLAISE NAME: CaidPrimaryMD					
Item Type:	Question	Field kind:	Datafield	ArrayMi	n: Min v	alue:	
Type Class:	Enumerated	Field Size:					
Answer Type:	THMOSIGND_1	Answers	allowed: 1	ArrayMa	x: Max	value:	
✓ Help Available	e (PROGDRHelp)		☐ Show C	ard ()		☐ Look Up File ()	,
Question Text:							
STATE CHIP N	START DATE and AME require {PERS ain primary care doctors?	SON 1}, {PER	SON 2}, {PI	ERSON 3},	{PERSON 4	}, {PERSON N} to	
PROBE: Do not in	nclude emergency care	e or care from a	specialist th	ney were ref	ferred to.		
						HELP: F1	
Responses:	YES, ALL REQU	JIRED		1	PR200	(PR1155)	
	YES, SOME REC	QUIRED		2	PR200	(PR1155)	
	NO, NONE REQ	UIRED		3	BOX_70	(PR1160)	
	REFUSED			RF	BOX_70	(PR1160)	
	DON'T KNOW			DK	BOX_70	(PR1160)	

Programmer Instructions:

Note: If coded '3' (NO, NONE REQUIRED), 'RF' (REFUSED), or 'DK' (DON'T KNOW),

there is no insurer associated with the current round for Medicaid/SCHIP.

Display Instructions:

Roster 1- Report

Roster definition: Use PR170 definition.

Roster filter: Use PR170 filter.

Display RU members' first, middle, and last names (Person.FullName) in question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'Does' if not round 5. Display 'Between {START DATE} and {END DATE}, did' if round 5.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for program. For the specific name to display by state, see the plan fill file.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

run Detan Spec						
<u>PR200</u>	(PR1155)	BLAISE NA	ME: CaidPla	anName		
Item Type:	Question	Field kind:	Datafield	ArrayMi	n: Min	value:
Type Class:	String	Field Size:	25			
Answer Type:	{Continuous Answer	:.} Answers	allowed: 1	ArrayMa	x: Max	value:
☐ Help Available (()	\Box s	how Card ()		☐ Look Up File ()
Question Text:						
_	:41- (M-4::4/(CTA	TE MAME I	OD MEDIC	AID)) as (CTATE CIII	D NIAME)
{HMO/health insura	the {Medicaid/{STAnnce}?	IE NAME I	FOR MEDIC.	AID}} or {	STATE CHI	P NAME;
ENTER PLAN NAM	ME					
Responses:					BOX_70	(PR1160)
					BOX_70	(PR1160)
	DON'T KNOW				BOX 70	(PR1160)
					_	,
Programmer Instructions:	Set Insurance.Insur	rer= PR200				
Display Instructions:	Display 'STATE N THE PROGRAM)	AME FOR M	MEDICAID' (n which interv	(SUBSTITU view is bein	JTING THE g conducted	s the name 'Medicaid'. STATE NAME FOR does not use the name ate, see the plan fill file.
	Display 'or STATE program. For the sp					the real state name for ile.
	Display 'HMO' if PF insurance' if PR190					ARE). Display 'health ME REQUIRED).
Testing/Editing Notes:	Variable collected Variable stored at l					
BOX 70	(PR1160) It	em Type: R	oute	Tyne C	lass: If The	n
<u> </u>	<u> </u>			Турс	, m. 55. 11 11IC	
Route Details:	If round 2, round 3	, or round 4	continue with	PR210.		
	Otherwise, (i.e. rou	ind 5), go to	BOX_90.			

Responses:

(PR1175)

Full Detail Spec

PR210	(PR1165)	BLAISE NAME: CaidPayPrem					
Item Type:	Question	Field kind:	Datafield	ArrayMin:	Min value:		
Type Class:	Enumerated	Field Size:					
Answer Type:	TWHOCOVERI	EDPA Answers	allowed: 1	ArrayMax:	Max value:		
✓ Help Available	(PREMPAYHelp)			ard ()	☐ Look Up File ()		
Question Text:							
	{CURRENT ROU	ND'S MEDICA			SON 4}, {PERSON N} for the dicaid/{STATE NAME FOR		
[<u>Do not</u> include the pay.]	cost of any copay	ments, coinsuran	ce, or deduct	ibles anyone in t	he family may have had to		
READ IF NECESS coverage. It does no	• .	L			ay each month to have health		
					HELP:F1		

YES, EVERYONE COVERED PAYS 1 BOX_80

Programmer Instructions:

Placeholder for MHOP specifications. This will be deleted once those specifications are available.

If coded '1' (YES, EVERYONE COVERED PAYS) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP for each person in the roster at PR220 as '1' (PAYS FOR COVERAGE DURING THE CURRENT ROUND.)

If coded '3' (NO, NO ONE COVERED PAYS) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP for each person in the roster at PR220 as '2' (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND.)

If coded RF or DK OR -9 (WHETHER EVERYONE IS COVERED IS MISSING) at PR210 (HOME.PRMEDPRE), code PRND.MEDMNTHP equal to the missing value HOME.PRMEDPRE for each person in the PR220 roster.

Leave PRND.MEDGOVP blank (NO VALUE) for any RU member not on the roster at PR220.

Display Instructions:

Roster 1- Report

Roster definition: Use PR170 definition.

Roster filter: Use PR170 filter.

Display RU members' first, middle, and last names (Person.FullName) in question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display '{Medicaid/{STATE NAME FOR MEDICAID}} or {STATE CHIP NAME}'.

For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR200.

Display 'Medicaid' if state in which interview is being conducted uses the name 'Medicaid'. Display 'STATE NAME FOR MEDICAID' (SUBSTITUTING THE STATE NAME FOR THE PROGRAM) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific Medicaid program name to display by state, see the plan fill file.

Display 'or STATE CHIP NAME' under all conditions, substituting the real state name for

program. For the specific name to display by state, see the plan fill file

	program. For the	specific name to d	isplay by	state, see 1	the plan fill	file.
Testing/Editing Notes:		d at MEPSSpring20 t MEPSSpring2018				
PR220 Item Type: Type Class: Answer Type:	(PR1170) Question Enumerated TFIRSTMIDLAST	BLAISE NAME: Field kind: Dat Field Size:	afield	ArrayMin	n: Min	value:
Answer Type.	TITINGTWIDEAGT	TVA Aliswers and	veu. 55	Allaywia	A. 14102	value.
☐ Help Available ()	\square Show	Card ()		☐ Look Up File ()
Question Text:						
Who has a monthly j	premium for that co	verage?				
PROBE: Anyone els	se?					
ENTER ALL THAT	APPLY.					
						HELP: F1
Responses:	{FIRST NAME [NAME}1	MIDDLE NAME]	LAST	1	BOX_80	(PR1175)
	,	MIDDLE NAME]	LAST	2	BOX_80	(PR1175)
	,	MIDDLE NAME]	LAST	3	BOX_80	(PR1175)
	,	MIDDLE NAME]	LAST	4	BOX_80	(PR1175)
	{FIRST NAME [INAME]	MIDDLE NAME]	LAST	5	BOX_80	(PR1175)

MEPS_V2

Old Public Related Insurance (PR) Section

Full Detail Spec

Programmer Instructions:

Roster Behavior:

1. Multiple select allowed.

Placeholder for MHOP specifications. This will be deleted once those specifications are

available.

Code PRND.MEDMNTHP as '1' (PAYS FOR COVERAGE DURING THE CURRENT

ROUND) for all persons from the PR220 roster who are selected.

Code PRND.MEDMNTHP as '2' (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND) for all persons on the PR220 roster who are not selected.

Leave PRND.MEDGOVP blank (NO VALUE) for any RU member not on the roster at PR220.

Display Instructions:

Roster 2 – no add/edit/delete

Roster definition: Use PR170 definition.

Roster filter: Use PR170 filter.

Testing/Editing

Notes:

BOX 80

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

Item Type: Route

If round 3, continue with PR230. **Route Details:**

(PR1175)

Otherwise, go to PR250.

Type Class: If Then

PR230 Item Type: Type Class:	(PR1180) Question Real	BLAISE NAME: (Field kind: Dataf Field Size: 9,2	_	n: Min value: 0	
Answer Type:	{Continuous Answe		ed: 1 ArrayMa	ax: Max value: 999999.9	99
☐ Help Available ()	☐ Show C	ard ()	☐ Look Up Fil	le ()
Question Text:					
How much is the pre	emium for {the {CUR	RENT ROUND'S MEI	DICAID/SCHIP INS	URER}/that} coverage?	
IF MORE THAN ONE premiums paid by al			VERAGE, SAY: Pl	ease give me the total amoun	it for
USE CTRL+Z TO ACCI	ESS CALCULATOR TO	ADD ALL PREMIUM	IS.		
Responses:				PR240 (PR1185	5)
				PR250 (PR1195	
	DON'T KNOW		DK	PR250 (PR1195	5)
Programmer Instructions:	Allow for the entry	y of dollars and cent	s.		
Display Instructions:	Display PR230, PR240, and PR240OS on the same form pane.				
	Display 'the {CURRENT ROUND'S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display 'that'.				
	For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.				
Testing/Editing Notes:		at MEPSSpring201 MEPSSpring2018.I			

PR240	(PR1185)	BLAISE NAME: CaidC	ovgUnit			
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min v	alue:	
Type Class:	Enumerated	Field Size:				
Answer Type:	TCOVERAGETIM	E Answers allowed: 1	ArrayMa	x: Max v	alue:	
☐ Help Available	()	☐ Show Card ()		Look Up File ()
Question Text:						
[How much is the p	remium for {the {CUR	RRENT ROUND'S MEDICAI	D/SCHIP INS	URER}/that} c	overage?	
	E PERSON PAYS A PRE all individuals with thi	MIUM FOR THIS COVERA s coverage.	.GE, SAY: Ple	ease give me t	he total amount for	
USE CTRL+Z TO ACC	CESS CALCULATOR TO	ADD ALL PREMIUMS.]				
Is that per year, pe	r month, per week, or	r what?				
. , , , ,	,,					
Responses:	PER YEAR		1	PR250	(PR1195)	
responses.		HS (QUARTERLY)	•	PR250	(PR1195)	
		HS (BIMONTHLY)		PR250	(PR1195)	
		is (billor(file))		PR250	(PR1195)	
			•	PR250	(PR1195)	
		S (BIWEEKLY)	_	PR250	(PR1195)	
		AR (SEMI-ANNUALLY		PR250	(PR1195)	
		ONTH (SEMI-MONTHLY	*	PR250	(PR1195)	
				PR240OS	(PR1190)	
	_		-	PR250	(PR1195)	
	DON'T KNOW			PR250	(PR1195)	

Display
Instructions:

Display PR230, PR240, and PR240OS on the same form pane.

Display "How much ... ADD ALL PREMIUMS." in brackets and grayed out text.

Display 'the {CURRENT ROUND'S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display 'that'.

For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

<u>PR240OS</u>	(PR1190)	BLAISE NAME: CaidC	ovgUnitOS		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:	
Type Class:	String	Field Size: 30			
Answer Type:	{Continuous An	swer.} Answers allowed: 1	ArrayMax:	Max value:	
☐ Help Available (()	☐ Show Card ()	☐ Look Up File ()

Ouestion Text:

[How much is the premium for {the {CURRENT ROUND'S MEDICAID/SCHIP INSURER}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

Responses:				(PR1195)
	REFUSED	RF	PR250	(PR1195)
	DON'T KNOW	DK	PR250	(PR1195)

Display Instructions:

Display PR230, PR240, and PR240OS on the same form pane.

Display "How much ... ADD ALL PREMIUMS." in brackets and grayed out text.

Display 'the {CURRENT ROUND'S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, display 'that'.

For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.

Testing/Editing Notes:

PR250	(PR1195)	BLAISE NAME: CaidPremSubsdz				
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min value:		
Type Class:	Enumerated	Field Size:				
Answer Type:	TYESNO	Answers allowed: 1	ArrayMa	ax: Max value:		
☐ Help Available ()	☐ Show Card ()	☐ Look Up File (
Question Text:						
{PLAN NAME: {C	URRENT ROL	JND'S MEDICAID/SCHIP INS	URER}}			
Is the cost of the pre	mium subsidiz	ed based on family income?				
Responses:			_	BOX_90 (PR1200)		
	NO		2	BOX_90 (PR1200)		
	REFUSED		RF	BOX_90 (PR1200)		
	DON'T KNO)W	DK	BOX 90 (PR1200)		

Display Instructions:

Display 'PLAN NAME: {CURRENT ROUND'S MEDICAID/SCHIP INSURER}' if there is a current round insurer associated with the Medicaid/SCHIP insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR170=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR200 was answered, the current insurer was set there). Otherwise, use a null display.

For '{CURRENT ROUND'S MEDICAID/SCHIP INSURER}', display the actual plan name for the current round Medicaid/SCHIP insurer (Insurance.Insurer). This may be a preloaded set to the current value or the value entered at PR200.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX_90 (PR1200) Item Type: Route Type Class: If Then

Route Details:

If any RU member had MILITARY HEALTH as a source of insurance at any time during previous round (at least one RU member where Preload.Insurance.HISrc=Military, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number} and

Preload.Insurance.OrigRnd<>current round), continue with PR260_01.

Otherwise, go to BOX 130.

Question Text:

During the last interview, we recorded that {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N} {was/were} covered by military health care, such as TRICARE, CHAMPVA, or VA coverage.

{Have you/Has {PERSON 1} been covered by military health care, such as TRICARE, CHAMPVA or VA coverage at any time {since {START DATE}/between {START DATE} and {END DATE}}?

HELP:F1

 Responses:
 YES
 1

 NO
 2

 REFUSED
 RF

 DON'T KNOW
 DK

Programmer Instructions:

Preloaded grid type 1: forced navigation including PR260_01, PR260_02, PR260_03, PR260_04, PR260_N.

After grid completion, continue with BOX 100.

Display Instructions:

Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were "COVERED BY MILITARY HEALTH" at any time during the previous round (RU members where Preload.Insurance.HISrc=Military, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were "COVERED BY MILITARY HEALTH" at any time during the previous round. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'was' if only one name is listed and that person is not the current respondent. Otherwise, display 'were'.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text: Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR260_02: What about {PERSON 2}?

PR260 03: What about {PERSON 3}?

PR260_04: What about {PERSON N}? Has {he/she} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time {since {START DATE}/between {START DATE} and {END DATE}}?

PR260_N: Repeat question text PR260_02-PR260_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR260_02 – PR260 N. Display in bold black and no brackets when on PR260 01.

z un z vun spec					
Testing/Editing Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main					
BOX 100	(PR1210)	Item Type: Route	Type Class	: If Then	
Route Details:		I members are displayed at inue with PR270_01.	PR260_01-PR26	0_N, go to BOX_110.	
PR270_01 Item Type: Type Class:	(PR1215) Question Enumerated	BLAISE NAME: OthM Field kind: Datafield Field Size:	mbMilitHI ArrayMin:	Min value:	
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:	
✓ Help Available	e (CHAMPTRIHelp)	Show	Card ()	☐ Look Up File ()	
Question Text:					
been covered by n	nilitary health care, s	bout, please think about who uch as TRICARE, CHAMP ATE} and {END DATE}}	PVA, or VA cove	nal household members have trage at any time { since	
		TARY PERSON 1, MILIT rmed Forces { or } { honora		2, MILITARY PERSON N} rom active duty}.}	
		overed by military health ca DATE}/between {START I			
				HELP:F1	
Responses:	110		•		

REFUSED RF DON'T KNOW DK

Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR270_01, PR270_02, PR270_03,

PR270

_04, PR270_N.

After grid completion, continue with BOX 110.

For each person coded '1' (YES), create insurance through Military health care for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Military and Insurance.HISrcName=Military Health and Insurance.Plcyhldr = PersID and

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were not covered by MILITARY HEALTH at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR260 01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR270_02: What about {PERSON 2}?

PR270_03: What about {PERSON 3}?

PR270_04: What about {PERSON N}? Has {he/she} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage at any time {since {START DATE}/between {START DATE} and {END DATE}}?

PR270_N: Repeat question text PR270_02-PR270_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first two paragraphs of question text in brackets and grayed out text when on PR270 _ 02 – PR270_N. Display in bold black and no brackets when on PR270_01.

The second paragraph makes use of a separate list of names.

Display 'Previously, we've recorded that {MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N} {is/are} {full-time active duty in the Armed Forces} {or} {honorably discharged from active duty}.' if at least one current RU member eligible to be displayed at PR270_01 grid is currently FT active duty (Person.FTADuty=Yes) or honorably discharged from the Armed Forces in any round [Person.HonDisch=Yes (preloaded value or current round value)]. Otherwise, use a null display.

Display 'full-time active duty in the Armed Forces' if at least one current RU member eligible to be displayed at PR270_01 grid is currently FT active duty. Otherwise, use a null display.

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Display 'honorably discharged from active duty' if at least one RU member eligible to be displayed at PR270_01 grid has been honorably discharged in any round. Otherwise, use a null display.

Display 'or' if there is at least one current RU member who is FT active duty **and** one current RU member who is honorably discharged in any round. Otherwise, use a null display.

For '{MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N}', Display the firstnames of all RU members who are either currently FT active duty or honorably discharged from the Armed Forces in any round. Separate the names using a comma and substitute 'you' if the respondent's name is part of the list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'is' if only one person listed and that person is not selected as respondent. Otherwise, display 'are'.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX_110 (PR1220) Item Type: Route Type Class: If Then

Route Details:

If at least one RU member "COVERED BY MILITARY HEALTH" during the current round, that is, at least one RU member was coded as '1' (YES) at PR260_01-PR260_N or PR270_01-PR270_N, continue with PR280_01.

Otherwise, go to BOX 130.

Programmer Instructions:

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Old Public Related Insurance (PR) Section

Full Detail Spec

Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR280_01, PR280_02, PR280_03,

PR280

_04, PR280_N

After grid completion, continue with BOX_120.

Display Instructions:

Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members "COVERED BY MILITARY HEALTH" during the current round, that is, PR260_01 – PR260_N or PR270_01 – PR270_N is coded '1' (YES) for this person.

Display variable question text. Replace "What types ... Administration)?" with:

PR280_02: What about {PERSON 2}? PR280_03: What about {PERSON 3}?

PR280_04: What about {PERSON N}? Does {he/she} have TRICARE Standard, TRICARE Prime,

TRICARE Extra, TRICARE for Life, CHAMPVA, or VA (Veteran's Administration)?

PR280 N: Repeat question text PR280 02-PR280 N for as many RU members that fit the

roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the

person's first name if the respondent is included in this list.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main.CodeAllMilitPlanPR[1..25] Variable stored at MEPSSpring2018.HX_Main.PR_Main.CodeAllMilitPlanPR[1..25]

BOX 120 (PR1230) Item Type: Route Type Class: If Then

Route Details: Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by MILITARY HEALTH in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:

-Insurance source is Military Health [Insurance.HISrc=Military]

And

-Person is "COVERED BY MILITARY HEALTH" during the current round, that is, either PR260_01-PR260_N or PR270_01-PR270_N is coded '1' (YES) for this person.

At completion of HQ section, continue with BOX 130.

BOX_130	(PR1235)	Item Type: Route	Type Class:	: If Then
Route Details:	If any RU mer	mber had INDIAN HEALTH S	SERVICE as a so	ource of insurance at any time
	Preload.Insura Preload.Covdl	vious round (at least one RU r ance.Plcyhldr=PersID where P Pers.LRndCovd ={previous ro ance.OrigRnd<>current round	erson.MostRecerund number} an	ntRU=RUUnit and d
	Otherwise, go	to BOX_170.		
PR290_01	(PR1240)	BLAISE NAME: ConfIF	ISPlan	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:	-	
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:
☐ Help Availabl	le ()	☐ Show Card ()	☐ Look Up File ()
Question Text:				
{was/were} enrol	led in the Indian He	ed that {PERSON 1}, {PERSOn 1}, The India in Indians at its Federal hospital	n Health Service	
		lled in the Indian Health Servi and {END DATE}}?	ce (IHS) <u>at any t</u>	ime {since {START
Responses:	YES		1	
	NO		_	
	REFUSED			
	DON'T KNOV	V	DK	

Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR290_01, PR290_02, PR290_03,

PR290

_04, PR290_N.

After grid completion, continue with BOX 140.

Display Instructions:

Roster 1-Report no add/edit/delete allowed. Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were "COVERED BY INDIAN HEALTH SERVICE" at any time during the previous round (RU members where Preload.Insurance.HISrc=IHS, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were "COVERED BY INDIAN HEALTH SERVICE" at any time during the previous round. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'was' if only one name is listed and that person is not the current respondent. Otherwise, display 'were'.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Were you/Was {PERSON 1}} enrolled ... and {END DATE}}?" with:

PR290_02: What about {PERSON 2}? PR290_03: What about {PERSON 3}?

PR290_04: What about {PERSON N}? Was {he/she} enrolled in the Indian Health Service (IHS) <u>at any time</u> {since {START DATE}/between {START DATE}}? PR290_N: Repeat question text PR290_02-PR290_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR290_02 – PR290 N. Display in bold black and no brackets when on PR290 01.

Testing/Editing Notes:

BOX_140	(PR1245)	Item Type: Route	Type Class	lass: If Then	
Route Details:		RU members are displayed at londinue with PR300_01.	PR290_01-PR29	0_N, go to BOX_150.	
PR300_01 Item Type: Type Class:	(PR1250) Question Enumerated	BLAISE NAME: OthMi Field kind: Datafield Field Size:	nbIHSPlan ArrayMin:	Min value:	
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:	
☐ Help Availabl	le ()	☐ Show Card ()	☐ Look Up File ()	
Question Text:					
	•	d about, please think about who rices (IHS) at any time {since {	•	nal household members have /between {START DATE} and	
		rolled in Indian Health Services and {END DATE}}?	s (IHS) at any tin	ne {since {START	
American Indian	and Alaska Native	n Health Service (IHS) is the hes. The IHS is not a health insur American Indians at its federal	rance provider bu	it rather, it provides healthcare	
Responses:	YES		1		
	1,0		2		
	REFUSED				
	DON'T KNO	O W	DK		

Old Public Related Insurance (PR) Section

Full Detail Spec

Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR300_01, PR300_02, PR300_03,

PR300

_04, PR300_N.

After grid completion, continue with BOX_150.

For each person coded '1' (YES), create insurance through Indian Health Service for this

person [set Insurance.HIPubPriv=Public and Insurance.HISrc=IHS and

Insurance.HISrcName=Indian Health Service and Insurance.Plcyhldr = PersID and

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were not covered by INDIAN HEALTH SERVICE at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR290 01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Were you/Was{PERSON 1}} enrolled ... {END DATE}}?" with:

PR300_02: What about {PERSON 2}? PR300_03: What about {PERSON 3}?

PR300_04: What about {PERSON N}? Was {he/she} enrolled in the Indian Health Service (IHS) at any time {since {START DATE}} and {END DATE}}?

PR300_N: Repeat question text PR300_02-PR300_N for as many RU members that fit the

roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display **first and third** paragraph of question text in brackets and grayed out text when on PR300_02 – PR300_N. Display both in bold black and no brackets when on PR300_01.

Testing/Editing Notes:

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Full Detail Spec

Old Public Related Insurance (PR) Section

BOX 150 (PR1255) Item Type: Route Type Class: If Then

Route Details: If at least one RU member "COVERED BY INDIAN HEALTH SERVICE" during the

current round, that is, at least one RU member was coded as '1' (YES) PR290_01-PR290

_N or PR300_01-PR300_N, continue with BOX_160.

Otherwise, go to BOX 170.

BOX_160 (PR1260) Item Type: Route Type Class: If Then

Route Details: Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Indian Health Services in the current round. The grid for the HQ section should be preloaded with insurance that meet both of the following conditions:

-Insurance source is Indian Health Service [Insurance.HISrc=IHS]

And

-Person is "COVERED BY INDIAN HEALTH SERVICE" during the current round, that is, either

 $\label{eq:proposition} PR290_01-PR290_N \ or \ PR300_01-PR300_N \ is \ coded \ \mbox{`1'} \ \mbox{(YES)} \ for \ this \ person.$

At completion of HQ section, continue with BOX_170.

BOX_170 (PR1265) Item Type: Route Type Class: If Then

Route Details: If any RU member had GOV'T-HOSPITAL/PHYSICIAN as a source of insurance at any

time during the previous round (at least one RU member where

 $\label{preload.Insurance.Plcyhldr=PersID} Preload. In surance. Plcyhldr=PersID\ where$

Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd

={previous round number} and Preload.Insurance.OrigRnd<>current round), continue with

PR310_01.

Otherwise, go to BOX_240.

PR310 01 (PR1270) BLAISE NAME: ConfGovProg				
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:
✓ Help Availabl	e (INSTYPESHelp)	☐ Show C	ard ()	☐ Look Up File ()
Question Text:				
{was/were} cover	ed by {PRELOAD GO	hat {PERSON 1}, {PERSO OVT-HOSP/PHY NAME}, pital and physician benefits	a program spon	
•	cy which provided ho			sponsored by a state or local nce {START DATE}/between
				HELP: F1
Responses:	YES		1	
	NO		2	
	REFUSED		RF	
	DON'T KNOW		DK	

Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR310_01, PR310_02, PR310_03,

PR310

_04, PR310_N.

After grid completion, continue with BOX 180.

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were "COVERED BY GOV'T- HOSPITAL/PHYSICIAN" at any time during the previous round (RU members where Preload.Insurance.HISrc=GHP, Preload.Insurance.Plcyhldr=PersID where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round number}.

For the display of person names in the first paragraph: {PERSON 1}, {PERSON 2}, {PERSON 3}, {PERSON N}, display the list of RU members who were "COVERED BY GOV'T-HOSPITAL/PHYSICIAN" at any time during the previous round. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

For 'PRELOAD GOVT-HOSP/PHY NAME' display the name of the government program entered at HX160 or HX270 when the coverage was first created for this RU. (Preload.Insurance.GHPProgNameRndCreated)

Display 'was' if only one name is listed and that person is not the current respondent. Otherwise, display 'were'.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR310_02: What about {PERSON 2}? PR310_03: What about {PERSON 3}?

PR310_04: What about {PERSON N}? Has {he/she} been covered by a program sponsored by a state or local government agency which provided hospital and physician benefits <u>at any</u> time

{since {START DATE}/between {START DATE} and {END DATE}}?

PR310_N: Repeat question text PR310_02-PR310_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR310 02 –

MEPS_V2 Full Detail Spec	Old Public Related Insurance (PR) Section				
•	PR310_N. Dis	play in bold black and no brac	kets when on PR	310_01.	
Testing/Editing Notes:		ected at MEPSSpring2018.HX ed at MEPSSpring2018.HX_M			
BOX 180	(PR1275)	Item Type: Route	Type Class:	: If Then	
Route Details:		RU members are displayed in lontinue with PR320_01.	PR310_01-PR310	0_N, go to BOX_190.	
<u>PR320_01</u> Item Type:	(PR1280) Question	BLAISE NAME: OthMi Field kind: Datafield	mbGovProg ArrayMin:	Min value:	
Type Class: Answer Type:	Enumerated TYESNO	Field Size: Answers allowed: 1	ArrayMax:	Max value:	
✓ Help Available	e (INSTYPESHel _I)	Card ()	☐ Look Up File ()	
Question Text:					
been covered by a	program sponsore	about, please think about whe ed by a state or local government tween {START DATE} and {	ent agency which	al household members have provides physician benefits at	
{Have you/Has {PE {START DATE} and		overed by a program like this <u>a</u>	at any time {since	: {START DATE}/between	
				HELP: F1	
Responses:	YES		1		

NO 2 REFUSED RF DON'T KNOW DK

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Programmer Instructions:

Preloaded grid type 1: Forced navigation including PR320_01, PR320_02, PR320_03, PR320

_04, PR320_N.

After grid completion, continue with BOX 190.

For each person coded '1' (YES), create insurance through Gov't-Hospital/Physician for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=GHP and Insurance.HISrcName= GOVT-HOS/PHY-{PROGRAM NAME FROM HX160/HX270}'

(Preload.GHPProgNameRndCreated) and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Display Instructions:

Roster 1-Report no add/edit/delete allowed.

Format the following columns on the form pane.

Col#1: RU Member

Instructions: Display RU members' First Middle and Last name (Person.FullName)

Roster Filter:

Display only those RU members who were not covered GOV'T- HOSPITAL/PHYSICIAN at any time during the previous round (including newly added RU members), that is any RU member not displayed at PR310 01.

Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.

Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered ... and {END DATE}}?" with:

PR320_02: What about {PERSON 2}? PR320_03: What about {PERSON 3}?

PR320_04: What about {PERSON N}? Has {he/she} been covered by a program sponsored by a state or local government agency which provided hospital and physician benefits <u>at any</u> time

{since {START DATE}/between {START DATE} and {END DATE}}?

PR320_N: Repeat question text PR320_02-PR320_N for as many RU members that fit the roster filter criteria.

Display first names only in the variable question text display. Substitute "you" for the person's first name if the respondent is included in this list.

Display first paragraph of question text in brackets and grayed out text when on PR320_02 – PR320 N. Display in bold black and no brackets when on PR320 01.

Testing/Editing Notes:

BOX 190 (PR1285) Item Type: Route Type Class: If Then

Route Details: If at least one RU member is "COVERED BY GOV'T- HOSPITAL/PHYSICIAN" during

the current round, that is, at least one RU member was coded '1' (YES) at PR310_01-310

_N or PR320_01-320_N, continue with BOX_200.

Otherwise, go to BOX_240.

BOX_200 (PR1290) Item Type: Route Type Class: If Then

Route Details: Ask the time period covered detail (HQ) section for this insurance.

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Gov't-Hospital/Physician in the current round. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:

-Insurance source is GOV'T-HOSPITAL/PHYSICIAN [Insurance.HISrc=GHP] And

-Person is "COVERED BY GOV'T-HOSPITAL/PHYSICIAN" during the current round, that is, either PR310_01 – PR310_N or PR320_01-PR320_N is coded '1' (YES) for this person.

At completion of HQ section, continue with PR330.

PR330 (PR1295) BLAISE NAME: GovProgNameChng					
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min value:	
Type Class:	Enumerated	Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMa	x: Max value:	
☐ Help Available (()	☐ Show Card ()	☐ Look Up File	()
Question Text:					
•	•	N 1}, {PERSON 2}, {PERSOP/PHYS INSURER}.}	ON 3}, {PEI	RSON 4}, {PERSON N} may b	e
the health insurance	e {PERSON 1}, {PEF	RSON 2}, {PERSON 3}, {PERSO	N 4}, {PERS	any change in the plan name on N} ency which provides hospital ar	
Responses:				PR340 (PR1300)	
				BOX_210 (PR1315)	
	REFUSED		RF	BOX_210 (PR1315)	
	DON'T KNOW		DK	BOX_210 (PR1315)	

Programmer Instructions:

If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), set previous round's insurer as 'CURRENT RD'S GOVT-HOSP/PHYS INSURER'. [Set Preload.Insurance.Insurer to

Insurance.Insurer]

Display Instructions:

Roster 1- Report

Roster definition:

This item uses the insurance array to display RU-members. (Person.Fullname)

Roster filter:

Display only those RU members who are "COVERED BY GOVT- HOSPITAL/PHYSICIAN" during the current round, that is either PR310_01 – PR310_N or PR320_01-PR320_N is coded '1' (YES) for this person..

Display first names only in the first sentence "Last time we recorded...."

Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display RU members' first, middle, and last names (Person.FullName) in the second sentence "{Since {START DATE}/Between {START DATE} and {END DATE}}...." Substitute "you" for the person's name if the respondent is included in this list. See instructions above about when to use commas vs. "and" to separate names.

Display 'Last time.... {PRELOAD GOVT-HOSP/PHYS INSURER}.' if there was an insurer associated with Govt-Hospital/Physician in the previous round (Preload.Insurance.Insurer <> RF, DK or EMPTY). Otherwise, use a null display.

For 'PRELOAD GOVT-HOSP/PHYS INSURER', display the insurer recorded for Govt-Hospital/Physician during the previous round (Preload.Insurance.Insurer).

Display 'Since {START DATE}' if not round 5.
Display 'Between {START DATE} and {END DATE}' if round 5.

Display 'has' if only one name is listed and that person is not the current respondent. Otherwise, display 'have'.

Testing/Editing Notes:

run Detan Spec								
PR340	(PR1300)	BLAISE NAME: GovPr	ogHMO					
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:				
Type Class:	Enumerated	Field Size:						
Answer Type:	THMOSIGND	Answers allowed: 1	ArrayMax:	Max value:				
✓ Help Available	(HMOHelp)	☐ Show Can	rd ()		Up File ()			
Question Text:								
benefits {{are/is}/{	were/was}}{PERS	e or local government agenc ON 1}, {PERSON 2}, {PE aintenance Organization {b	RSON 3}, {PER	SON 4}, {PERSON	N N}			
		eive care from HMO physic y the HMO, or there was a r			expense is			
					HELP:F1			
Responses:	YES, ALL ARE		1 PR	3360 (P)	R1310)			
•	YES, SOME AR	Е	2 PR		R1310)			
	NO, NONE ARE	<u> </u>	3 PR	2350 (P)	R1305)			
	REFUSED		RF PR	R350 (P)	R1305)			
	DON'T KNOW		DK PR	2350 (P)	R1305)			
Display Instructions:	Roster 1- Report Use PR330 defin	Roster definition:						
	Roster filter: Use PR330 filter.							
	Display RU members' first, middle, and last names (Person.FullName)in the question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".							
	Display '{are/is}' if not round 5. Display '{were/was}' if round 5.							
	Display 'is' or 'was' if the list includes 1 person who is not the respondent. Otherwise, display 'are' or 'were'.							
	Display 'betweer	n {START DATE} and {END D	ATE}' if round 5.	Otherwise, use a nul	l display.			
Testing/Editing Notes:		ed at MEPSSpring2018.HX at MEPSSpring2018.HX_M		n				

PR350 Item Type: Type Class:	(PR1305) Question Enumerated	BLAISE NAME: GovPro Field kind: Datafield Field Size:	ogPrimaryM ArrayMi		:
Answer Type:	THMOSIGND_1	Answers allowed: 1	ArrayMa	x: Max value	e:
✓ Help Available	e (PROGDRHelp)	☐ Show C	ard ()		Look Up File ()
Question Text:					
agency which prov {PERSON 4}, {PI	vides hospital and phy	END DATE}, did} the provisician benefits require {PE p with a certain primary careir routine care?	RSON 1}, {	PERSON 2}, {PE	ERSON 3},
PROBE: Do not in	nclude emergency care	e or care from a specialist th	ney were ref	erred to.	
					HELP: F1
Responses:	YES, ALL REQU	Л RED	1	PR360	(PR1310)
	YES, SOME REC	QUIRED	2	PR360	(PR1310)
	NO, NONE REQ	UIRED	3	BOX_210	(PR1315)
	REFUSED		RF	BOX_210	(PR1315)
	DON'T KNOW		DK	BOX_210	(PR1315)

Programmer	•
Instructions:	

Note: If coded '3' (NO, NONE REQUIRED), 'RF' (REFUSED), or 'DK' (DON'T KNOW), there is no insurer associated with the current round for Govt-Hospital/Physician.

Display Instructions:

Roster 1- Report

Roster definition: Use PR330 definition.

Roster filter: Use PR330 filter.

Display RU members' first, middle, and last names (Person.FullName) in the question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display 'Does' if not round 5. Display 'Between {START DATE} and {END DATE}, did' if round 5.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

PR360 (PR1310) BLAISE NAME: GovProgPlanName

Item Type: Question Field kind: Datafield ArrayMin: Min value:

Type Class: String **Field Size:** 40

Answer Type: {Continuous Answer.} Answers allowed: 1 ArrayMax: Max value:

\square Help Available () \square Show Card () \square Look Up Fil	e ()
--	-----	--	---

Question Text:

What is the name of the {HMO/health insurance} from the program sponsored by a state or local government agency which provides hospital and physician benefits?

ENTER PLAN NAME

 Responses:
 BOX_210
 (PR1315)

 REFUSED
 RF BOX_210
 (PR1315)

 DON'T KNOW
 DK BOX_210
 (PR1315)

MEPS_V2

Old Public Related Insurance (PR) Section

Full Detail Spec

Programmer Instructions:

Set Insurance.Insurer to PR360

Display Instructions:

Display 'HMO' if PR330 is coded '1' (YES, ALL ARE) or '2' (YES, SOME ARE). Display

'health insurance' if PR350 coded '1' (YES, ALL REQUIRED) or '2' (YES, SOME

REQUIRED).

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX_210 (PR1315)

Item Type: Route

Type Class: If Then

Route Details:

If round 2, round 3, or round 4, continue with PR370.

Otherwise, (i.e., if round 5), go to BOX_240.

Responses:

REFUSED

DON'T KNOW

(PR1330)

(PR1325)

(PR1365)

(PR1365)

(PR1365)

Full Detail Spec

PR370	(PR1320)	BLAISE NA	ME: GovPro	gPayPrem	
Item Type:	Question	Field kind:	Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:			
Answer Type:	TWHOCOVEREDI	PA Answers	allowed: 1	ArrayMax:	Max value:
✓ Help Available (PREMPAYHelp)		☐ Show Ca	ard ()	☐ Look Up File ()
Question Text:					
coverage through {{		O'S INSURER	FOR GOVT	- HOSPITAL/PH	ON 4}, {PERSON N} for the IYSICIAN}/the program an benefits}?
[<u>Do not</u> include the pay.]	cost of any copaymer	nts, coinsuranc	ce, or deducti	bles anyone in the	e family may have had to
	ARY: A monthly pred t include copays or o				y each month to have health
					HELP: F1

YES, EVERYONE COVERED PAYS 1 BOX_220

NO, NO ONE COVERED PAYS 3 BOX_240

..... RF BOX_240

..... DK BOX_240

YES, SOME COVERED PAY 2 PR380

Programmer Instructions:

Placeholder for MHOP specifications. This will be deleted once those specifications are available.

If coded '1' (YES, EVERYONE COVERED PAYS) at PR370 (HOME.PRMEDPRE), code PRND.GOVMNTHP for each person in the roster at PR370 as '1' (PAYS FOR COVERAGE DURING THE CURRENT ROUND.)

If coded '3' (NO, NO ONE COVERED PAYS) at PR370 (HOME.PRMEDPRE), code PRND.GOVMNTHP for each person in the roster at PR370 as '2' (DOES NOT PAY FOR COVERAGE DURING THE CURRENT ROUND.)

If coded RF or DK or -9 (WHETHER EVERYONE IS COVERED IS MISSING) at PR370 (HOME.PRMEDPRE), code PRND.GOVMNTHP equal to the missing value in HOME.PRMEDPRE for each person in the PR370 roster.

Leave PRND.MEDGOVP blank (no value) for any RU member not on the roster at PR370.

Display Instructions:

Roster 1- Report

Roster definition: Use PR330 definition.

Roster filter: Use PR330 filter.

Display RU members' first, middle, and last names (Person.FullName) in question text. Substitute "you" for the person's name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

Display '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}' if there is a current round insurer associated with the Gov't-Hospital/Physician insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display 'the program sponsored by a state or local government agency which provides hospital and physician benefits '.

For '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov't-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.

Testing/Editing Notes:

(PR1325) BLAISE NAME: GovProgPayPremRoster						
Question	Field kind: Datafiel	ld	ArrayMii	n: Min	value:	
Enumerated	Field Size:					
TFIRSTMIDLAST	TNA Answers allowed	: 99	ArrayMa	x: Max	value:	
)	☐ Show Care	d ()		☐ Look Up File ()
	_					
premium for that co	overage?					
se?						
APPLY.						
(FIRST NAME (MIDDLE NAMELLAS	'T	1	BOX 220	(PR1330)	
NAME}1		, 1	1	BON_2220	(1 K1330)	
{FIRST NAME [NAME}2	MIDDLE NAME] LAS	T	2	BOX_220	(PR1330)	
	MIDDLE NAME] LAS	T	3	BOX_220	(PR1330)	
{FIRST NAME [MIDDLE NAME] LA	ST	4	BOX_220	(PR1330)	
•	MIDDLE NAME] LAS	T	5	BOX_220	(PR1330)	
	Question Enumerated TFIRSTMIDLAST) premium for that conse? APPLY. {FIRST NAME [NAME}1 {FIRST NAME [NAME}2 {FIRST NAME [NAME}3 {FIRST NAME [NAME}3 {FIRST NAME [NAME}4 {FIRST NAME [Question Field kind: Datafiel Enumerated Field Size: TFIRSTMIDLASTNA Answers allowed) Show Care premium for that coverage? se? APPLY. {FIRST NAME [MIDDLE NAME] LAS NAME}1 {FIRST NAME [MIDDLE NAME] LAS NAME}2 {FIRST NAME [MIDDLE NAME] LAS NAME}3 {FIRST NAME [MIDDLE NAME] LAS NAME}3 {FIRST NAME [MIDDLE NAME] LAS NAME}4 {FIRST NAME [MIDDLE NAME] LAS NAME}4 {FIRST NAME [MIDDLE NAME] LAS NAME}4	Question Field kind: Datafield Enumerated Field Size: TFIRSTMIDLASTNA Answers allowed: 99) Show Card (premium for that coverage? se? APPLY. {FIRST NAME [MIDDLE NAME] LAST NAME}1 {FIRST NAME [MIDDLE NAME] LAST NAME}2 {FIRST NAME [MIDDLE NAME] LAST NAME}3 {FIRST NAME [MIDDLE NAME] LAST NAME}3 {FIRST NAME [MIDDLE NAME] LAST NAME}4 {FIRST NAME [MIDDLE NAME] LAST NAME}4 {FIRST NAME [MIDDLE NAME] LAST NAME}4	Question Field kind: Datafield ArrayMin Enumerated Field Size: TFIRSTMIDLASTNA Answers allowed: 99 ArrayMa) Show Card () premium for that coverage? se? APPLY. {FIRST NAME [MIDDLE NAME] LAST NAME 1	Question Field kind: Datafield ArrayMin: Min Enumerated Field Size: TFIRSTMIDLASTNA Answers allowed: 99 ArrayMax: Max) Show Card () premium for that coverage? se? APPLY. {FIRST NAME [MIDDLE NAME] LAST 1 BOX_220 NAME}1 {FIRST NAME [MIDDLE NAME] LAST 2 BOX_220 NAME}2 {FIRST NAME [MIDDLE NAME] LAST 3 BOX_220 NAME}3 {FIRST NAME [MIDDLE NAME] LAST 4 BOX_220 NAME}4 {FIRST NAME [MIDDLE NAME] LAST 4 BOX_220 NAME}4 {FIRST NAME [MIDDLE NAME] LAST 5 BOX_220	Question Field kind: Datafield ArrayMin: Min value: Enumerated Field Size: TFIRSTMIDLASTNA Answers allowed: 99 ArrayMax: Max value: Data

MEPS_V2

Old Public Related Insurance (PR) Section

Full Detail Spec

Programmer

Roster Behavior:

Instructions:

1. Multiple select allowed.

Following settings may be required during MHOP rather than CAPI:

Code PRND.GOVMNTHP as '1' (PAYS FOR COVERAGE DURING THE CURRENT

ROUND) for all persons from the PR380 roster who are selected.

Code PRND.GOVMNTHP as '2' (DOES NOT PAY FOR COVERAGE DURING THE

CURRENT ROUND) for all persons on the PR370 roster who are not selected.

Leave PRND.MEDGOVP blank (no value) for any RU member not on the roster at PR380.

Display Instructions:

Roster 2 - no add/edit/delete.

Roster definition: Use PR330 definition.

Roster filter: Use PR330 filter.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX 220

(PR1330)

Item Type: Route

Type Class: If Then

Route Details:

If round 3, continue with PR390.

Otherwise, go to PR410.

PR390 Item Type: Type Class:	(PR1335) Question Real	BLAISE NA Field kind: Field Size:	Datafield	gAmt ArrayMi n	n: Min	value: 0	
Answer Type:	{Continuous Answe	er.} Answers	allowed: 1	ArrayMax	x: Max	value: 999999.99	
☐ Help Available ()	\Box s	how Card ()		Look Up File ()
Question Text:							
How much is the precoverage?	emium for {the {CUR	RENT ROUND	'S INSURER F	OR GOVT- H	IOSPITAL/PH	HYSICIAN}/that}	
IF MORE THAN ONE premiums paid by al			HIS COVERAG	iE, SAY: Ple	ase give me	the total amount for	
USE CTRL+Z TO ACCI	ESS CALCULATOR TO	ADD ALL PRE	MIUMS.				
ENTER AMOUNT							
Responses:	REFUSED			RF	PR400 PR410	(PR1340) (PR1350)	
	DON'T KNOW			DK	PR410	(PR1350)	
Programmer Instructions:	Allow for the entr	y of dollars ar	nd cents.				
Display Instructions:	Display PR390, PR	400 and PR40	000S on the sa	ame form pa	ane.		
	Display 'the {CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}' if there is a current round insurer associated with the Gov't-Hospital/Physician insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display 'that'.						
	For '{CURRENT RC the actual plan na (Insurance.Insurer entered at PR360.	me for the cur). This may be	rrent round (Gov't-Hospit	:al/Physiciar	• • •	
Testing/Editing Notes:	Variable collected Variable stored at						

PR400	(PR1340) B	BLAISE NAME: GovPro	ogUnit		
Item Type:		Field kind: Datafield	ArrayMiı	n: Min value:	
		Field Size:			
Answer Type:	TCOVERAGETIME		ArrayMa	x: Max value:	
			•		
☐ Help Available ()	☐ Show Card ()		ok Up File ()
Question Text:					
[How much is the pr coverage?	emium for {the {CURR	RENT ROUND'S INSURER	FOR GOVT-	HOSPITAL/PHYSICIA	.N}/that}
	PERSON PAYS A PREM Il individuals with this	AIUM FOR THIS COVERAC	GE, SAY: Ple	ase give me the tot	al amount for
USE CTRL+Z TO ACCI	ESS CALCULATOR TO A	ADD ALL PREMIUMS.]			
Is that per year, per	month, per week, or v	what?			
ENTER UNIT OF COV	'ERAGE				
Responses:	PER YEAR		1	PR410	(PR1350)
responses.		S (QUARTERLY)	_	PR410	(PR1350)
		S (BIMONTHLY)		PR410	(PR1350)
				PR410	(PR1350)
				PR410	(PR1350)
	EVERY 2 WEEKS	(BIWEEKLY)	6	PR410	(PR1350)
		AR (SEMI-ANNUALLY)		PR410	(PR1350)
		NTH (SEMI-MONTHLY		PR410	(PR1350)
			*	PR400OS	(PR1345)
	REFUSED		RF	PR410	(PR1350)
	DON'T KNOW		DK	PR410	(PR1350)

Display Instructions:

Display PR390, PR400 and PR400OS on the same form pane.

Display "How much ... ADD ALL PREMIUMS." in brackets and grayed out text.

Display 'the {CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}' if there is a current round insurer associated with the Gov't-Hospital/Physician insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was

answered, the current insurer was set there). Otherwise, display 'that'.

For '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov't-Hospital/Physician insurer

(Insurance.Insurer). This may be a preloaded value set to the current value or the value

entered at PR360.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

PR400OS (PR1345) BLAISE NAME: GovProgUnitOS					
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:	
Type Class:	String	Field Size: 30			
Answer Type:	{Continuous A	Answer. Answers allowed: 1	ArrayMax:	Max value:	
☐ Help Available	()	☐ Show Card ()	☐ Look Up File (

Question Text:

[How much is the premium for {the {CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}/that} coverage?

IF MORE THAN ONE PERSON PAYS A PREMIUM FOR THIS COVERAGE, SAY: Please give me the total amount for premiums paid by all individuals with this coverage.

USE CTRL+Z TO ACCESS CALCULATOR TO ADD ALL PREMIUMS.]

SPECIFY: OTHER UNIT OF COVERAGE

Responses:		PR410	(PR1350)	
	REFUSED	RF	PR410	(PR1350)
	DON'T KNOW	DK	PR410	(PR1350)

Display Instructions:

Display PR390, PR400 and PR400OS on the same form pane.

Display "How much ... ADD ALL PREMIUMS." in brackets and grayed out text.

Display 'the {CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}' if there is a current round insurer associated with the Gov't-Hospital/Physician insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was answered, the current insurer was set there). Otherwise, display 'that'.

For '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov't-Hospital/Physician insurer (Insurance.Insurer). This may be a preloaded value set to the current value or the value entered at PR360.

Testing/Editing Notes:

PR410	(PR1350) BLAISE NAME: GovProgSubsdz					
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min val	Min value:	
Type Class:	Enumerated	Field Size:				
Answer Type:	TYESNO	Answers allowed: 1	ArrayMa	x: Max val	lue:	
☐ Help Available	e()	☐ Show Card ()		Look Up File ()
Question Text:						
{PLAN NAME: {	CURRENT ROUN	D'S INSURER FOR GOVT-	HOSPITAI	/PHYSICIAN}	}	
Is the cost of the p	remium subsidized	based on family income?				
Responses:	YES		1	BOX_230	(PR1355)	
	NO		2	BOX_230	(PR1355)	
	REFUSED		RF	BOX_230	(PR1355)	
	DON'T KNOW	V	DK	BOX 230	(PR1355)	

Display Instructions:

Display 'PLAN NAME: {CURRENT ROUND'S INSURER FOR GOVT-

HOSPITAL/PHYSICIAN}' if

there is a current round insurer associated with the Gov't-Hospital/Physician insurance that is not 'RF' or 'DK' or EMPTY. (Check Insurance.Insurer – if PR330=2, RF, DK and there was a preloaded insurer, the preloaded insurer was set to the current insurer. Or if PR360 was

answered, the current insurer was set there). Otherwise, use a null display.

For '{CURRENT ROUND'S INSURER FOR GOVT- HOSPITAL/PHYSICIAN}', display the actual plan name for the current round Gov't-Hospital/Physician insurer

(Insurance.Insurer). This may be a preloaded value set to the current value or the value

entered at PR360.

Testing/Editing Notes:

Variable collected at MEPSSpring2018.HX_Main.PR_Main Variable stored at MEPSSpring2018.HX_Main.PR_Main

BOX_230 (PR1355) Item Type: Route Type Class: If Then

Route Details: [If round 3]

and

[If HX180 or HX280 was coded '1' (YES, PLAN IS EXCHANGE) the round the Gov't-Hospital/Physician insurance was created (Preload.Insurance.HX180AnsRndCreated or

Preload.Insurance.HX280AnsRndCreated)] and

[PR370 is coded '1' (YES, EVERYONE COVERED PAYS) or '2' (YES, SOME

COVERED PAY),] continue with PR420.

Otherwise, go to BOX_240.

Full Detail Spec					
PR420	(PR1360)	BLAISE NAME: Gov	ProgMetalPlan		
Item Type:	Question	Field kind: Datafield	d ArrayMin:	Min value:	:
Type Class:	Enumerated	Field Size:			
Answer Type:	TPLANMETL	Answers allowed:	1 ArrayMax:	Max value	2:
✓ Help Available	(METALPLANSI	Help)	now Card ()		ook Up File ()
Question Text:					
Is {the {CURREN gold, silver, bronze		RER FOR GOVT- HOSP an?	PITAL/PHYSICIAN	N} plan/this pl	an} a platinum,
					HELP: F1
Responses:	PLATINUM P	LAN	1 BC	OX_240	(PR1365)
	GOLD PLAN		2 BC	OX_240	(PR1365)
	SILVER PLAN		3 BC	OX_240	(PR1365)
	BRONZE PLA	N	4 BC	OX_240	(PR1365)
	CATASTROPI	HIC PLAN	5 BC	OX_240	(PR1365)
	IF VOLUNTE	ERED: SOMETHING ELS	SE 6 BC	OX_240	(PR1365)
	REFUSED		RF BC	OX_240	(PR1365)
	DON'T KNOW		DK BC	OX_240	(PR1365)
Display Instructions:	plan' if there is a cur is not 'RF' or ' was a preloaded answered, the c For '{CURRENT the actual plan	URRENT ROUND'S INSTREMT round insurer associated DK' or EMPTY. (Check I dinsurer, the preloaded insurrent insurer was set ther ROUND'S INSURER FOR Goname for the current router). This may be a preloa 60.	ed with the Gov't-Insurance.Insurer – surer was set to the e). Otherwise, dispOVT- HOSPITAL/PHod Gov't-Hospital/	Hospital/Physicif PR330=2, Recurrent insure play 'this plan'. HYSICIAN}', displysician insur	cian insurance that F, DK and there r. Or if PR360 was play
Testing/Editing Notes:		ted at MEPSSpring2018.F at MEPSSpring2018.HX		1	
BOX 240	(PR1365)	Item Type: Route	Type Class	: If Then	
Route Details:	Return to the H	ealth Insurance (HX) sect	ion.		

[End of PR]