SpecWriter Data

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

BOX_00   **(HX1000)**   **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, BOX_250, BOX_260, BOX_270, BOX_280, BOX_290, BOX_300, BOX_310, BOX_320, BOX_330, BOX_340, BOX_350, BOX_360, BOX_ 370, BOX_ 380, BOX_390, BOX_400, BOX_405, BOX_410, BOX_420, BOX_430, BOX_440, BOX_450, BOX_460, BOX_470, BOX_480, BOX_490, BOX_500, BOX_510, BOX_ 520, BOX_530, BOX_540, BOX_550, BOX_560, BOX_570

02 Loop= LOOP_10, LOOP_20, LOOP_30, LOOP_40, LOOP_50, LOOP_55, LOOP_60, LOOP_70

3 End Loop= END_LP10, END_LP20, END_LP30, END_LP40, END_LP50, END_LP55, END_LP60, END_LP70

04 Single Select= HX20, HX21, HX22, HX23, HX70, HX80, HX90, HX105, HX130, HX150, HX180, HX190, HX210, HX215, HX220, HX225, HX240, HX250, HX280, HX310, HX340, HX350, HX370, HX380, HX390, HX410, HX420, HX430, HX450, HX460, HX470, HX480, HX490, HX510, HX520, HX600, HX610, HX650, HX660, HX680, HX690, HX702, HX704, HX710, HX720, HX750, HX770, HX780, HX790

05 Single Select with Display Roster= HX30, HX50_01, HX100_01, HX110, HX120_01, HX290, HX530, HX540, HX560, HX760

06 Single Select with Fill in Answer Text= HX300, HX700

08 Multiple Select= HX260, HX320, HX620

09 Multiple Select with Display Roster= HX125_01

10 Multiple Select with Fill in Answer Text= HX40, HX60, HX140, HX200, HX230, HX575, HX730

14 Regular Date Entry= HX330_1, HX330_2, HX330_3, HX360_1, HX360_2

17 Dollar Items Allowing Cents= HX440, HX500, HX670

18 Dollar Items Not Allowing Cents= HX740_01

20 OS Text Field= HX200OS, HX300OS, HX450OS, HX510OS, HX620OS, HX680OS,

23 Text Field= HX160, HX270, HX400, HX550, HX630, HX640

24 Information Screen= HX10

BOX_10   **(HX1005)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: **Context header display instructions:**

SEE CONTEXT HEADER SPEC

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 not Round 1). 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 current round is not the final round of the panel [RndType<>Final] or Dec 31 if current round is the final round of the panel [RndType=Final]). 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 BegRefM, BegRefD, 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 EndRefM, EndRefD, 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 HX290, HX560, HX600, HX610, and HX650.

General Notes:

HospHI and MedgapHI:

The values of Insurance.HospHI and Insurance.MedigapHI should be initialized as the corresponding preload values (PR_Insurance.HospHI and PR_Insurance.MedigapHI). These values may or may not be updated at OE130. If OE130 is asked, then the values are overwritten. Otherwise, the current round values are the same as the previous round values.

Active vs. Inactive

As insurance is added or reviewed, it is determined to be active or inactive with an "inactive flag". Active insurance is insurance that covers an RU member during the current round. Inactive insurance is insurance that was reviewed and no longer covers any RU members for any period of time during the current round.

Insurance can also be "flagged for clean-up" or set with a "delete flag". This includes insurance that was indicated by the respondent as added in error or insurance added. It also includes insurance added which does not cover any current RU members (for example, insurance added with a policyholder outside the RU, and no current RU members are covered). This can also include insurance that was added, but upon backup, a person was deselected as being covered by this insurance.

Unless otherwise specified, any insurance marked as "inactive" or "deleted" does not qualify for any of the loops within any of the health insurance sections.

Logic to set preload insurance Activeflg for preload public insurance (OrigRnd<> Roundnumber):

Set Activeflg= InActive if PR150=No, DK, RF, or PR260=No, DK, RF or PR290=No, DK, RF or PR310=No, DK, RF

Logic to set preload insurance Activeflg for preload private insurance (OrigRnd<> Roundnumber) at the end of OE LOOP_10:

If OE20_01=YES/DK/RF or OE30_01=ENTERDATE or OE50_01=YES for anyone THEN Insurance.ActiveFlg := Active. ELSE Insurance.ActiveFlg := InActive

Covered Person Array

The use of the phrase "covered person" or "covered person array" throughout the health insurance specifications references the coverage flag list. The coverage flag list is a list of

RU members and a YES/NO flag indicating whether that person is covered by a particular insurance source (InsSrcN). The insurance sources in this list are not identified by the insurance ID in the insurance array, but rather by the insurance array element. For example InsSrc1 is the first insurance on the insurance array.

Dependents Separated from Policyholder

Prior to the Health Insurance Section, CAPI will determine if there is private insurance where dependents are covered but the RU member policyholder is no longer an eligible RU member to be included as part of **THIS** RU (policyholder may or may not be included as part of another RU). The situation is treated as "Dependent(s) Separated from Policyholder". The insurance for the policyholder continues to move with the policyholder and will be treated as regular insurance without this special flag or special processes. The requirements for this flag include:

• There is private insurance to be reviewed in the current round.
• There is at least one eligible (for any portion of the round) RU members listed in the covered person array for this private insurance who is **not** listed as the policyholder.
• The policyholder of this private insurance is no longer a current RU member (this person does not have any eligibility during the current round for this RU).
  • This excludes policyholders set to 901 (Policyholder Deceased) or 902 (Policyholder Not in DU).
  • Includes any RU policyholder that now has a different RU Unit or was set to PriorRndInelig between rounds.
  •

This situation is noted for this insurance (for the covered persons) every round the policyholder is not part of the RU and the insurance is eligible to be reviewed for eligible dependents.

There are two special MHOP procedures that may be necessary for this situation.

1. The variables Insurance.HospHI and Insurance.MedigapHI for the insurance array for the dependents must be updated inter-round with the values collected for the policyholder. If the values for the policyholder were not collected, then the variables Insurance.HospHI and Insurance.MedigapHI must be maintained from the latest value and moved forward every round the insurance is eligible.

2. This situation "Dependent(s) Separated from Policyholder" may need to be set inter-round when an RU member policyholder becomes ineligible between rounds.

HX10　　　　**(HX1010)**　　　　**BLAISE NAME:** HXStart

Item Type:	Instruction
Type Class:	Enumerated
Answer Type:	TContinue

Field kind: Datafield

Answers allowed: 1

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

Question Text:

{Let's talk about all the health insurance coverage {you/this household} may have to help pay for the costs of medical care {since {START DATE} /between {START DATE} and {END DATE}}./I recorded some information earlier about the health insurance coverage for {you/this household} {since {START DATE}/between {START DATE} and {END DATE}}, but I need to ask again to be sure I have details for <u>all</u> the health insurance coverage {you/this household} may have to help pay for the costs of medical care.}

{ASK RESPONDENT TO GET INSURANCE CARDS/IDENTIFYING INFORMATION IF NOT ALREADY AVAILABLE.}

PRESS 1 AND ENTER TO CONTINUE.

Responses:　　　　CONTINUE　　...　1

Programmer Instructions:	If round 1, go to BOX_40.
	Otherwise, continue with BOX_20.

Display Instructions:	Display 'Let's talk … and {END DATE}}. ' if no source of payments selected for any RU member in the charge/payment or flat fee section in the current round (SOPFlag = NO). Otherwise (SOPFlag = YES), display 'I recorded some …. costs of medical care.'
	Display 'you' if single person household and respondent is RU member. Otherwise, display 'this household'.
	Display 'since {START DATE}' if current round is not the final round of the panel (RndType<>Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).
	Display 'ASK...AVAILABLE.' if round 1. Otherwise, use a null display.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

BOX_20   **(HX1015)**   **Item Type:** Route   **Type Class:** If Then

Route Details: Ask the Old Employment and Private Related Insurance (OE) section.

At completion of OE section, continue with BOX_30.

BOX_30   **(HX1020)**   **Item Type:** Route   **Type Class:** If Then

Route Details: Ask the Old Public Related Insurance (PR) section.

At completion of PR section, continue with BOX_40.

BOX_40   **(HX1025)**   **Item Type:** Route   **Type Class:** If Then

Route Details: If one or more jobs/unions meet the following condition:

• Newly created job provides health insurance or reviewed job now provides health insurance [EMPHI=Yes for the current round] continue with LOOP_10. Otherwise, go to BOX_60.

LOOP_10	**(HX1030)**	**Item Type:** Route	**Type Class:** Begin Loop

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Route Details: For each element in the jobs array, ask HX20 - END_LP10.

Loop definition: LOOP_10 collects information about private health insurance obtained through an employer or union. This loop cycles on jobs that meet the following conditions:

• Newly created job provides health insurance or reviewed job now provides health insurance [EMPHI=Yes for the current round].

NOTE: Loop by RU member, then jobs/unions for that RU member. If the respondent has job that provides health insurance, loop on the respondent first. If EM710 was coded '1' (EMPLOYER), '3' (BOTH EMPLOYER AND UNION (EMPLOYER IS PRIMARY)), 'DK' or 'RF', LOOP_10 will cycle only once to collect the insurance related to the employer. If EM710 was coded '2' (UNION) or '4' (BOTH EMPLOYER AND UNION (UNION IS PRIMARY)), LOOP_ 10 will cycle only once to collect the insurance related to the union.

HX20	**(HX1035)**	**BLAISE NAME:** HIEmpUnionDisavow	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**	
Answer Type:	TVERCOVR	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

You mentioned that {you/{PERSON}} {were/was} covered by health insurance from {JOB/UNION PROVIDING INSURANCE} {at some point after {START DATE}/between {START DATE} and {END DATE}}.

SELECT 'CONTINUE' UNLESS RESPONDENT VOLUNTEERS INSURANCE REPORTED IN ERROR.

Responses:	CONTINUE	1	BOX_50	(HX1040)
	INSURANCE REPORTED IN ERROR	2	HX21	(HX1036)

Programmer Instructions:	If coded '1' (CONTINUE) and looping on job providing insurance, create insurance for this job [set Insurance.HIPubPriv=Private and Insurance.HISrc=Employer and set Insurance.HISrcName to JobsEstbName] [set CreateQ and OrigRnd]
	If coded '1' (CONTINUE) and looping on union providing insurance, create insurance for this union [set Insurance.HIPubPriv=Private and Insurance.HISrc=Union and set Insurance.HISrcName to UnionName] [set CreateQ and OrigRnd]
	If coded '2' (INSURANCE REPORTED IN ERROR), for the current interviewing session, EMPHI will remain unchanged and the insurance source being cycled on during LOOP_10 will finish out the loop (without going into HP), but the insurance will be flagged for cleanup and will not count as insurance during the current round.
	Placeholder for MHOP specifications. This will be deleted once those specifications are available: If coded '2' (INSURANCE REPORTED IN ERROR), there will need to be some clean up during inter round processing between the EM/RJ and HX sections to correct responses to EMPHI and other data that is being collected at HX21-HX23 but will eventually be stored as part of the Employment data.
Display Instructions:	For 'JOB/UNION PROVIDING INSURANCE', display the name of the job or union (being cycled on) that provides health insurance or the name of the reviewed job now provides health insurance [EMPHI=Yes for the current round].
	If current round is not the final round of the panel (RndType<>Final), display 'at some point after {START DATE}'. If current round is the final round of the panel (RndType=Final), display 'between {START DATE} and {END DATE}'.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]

HX21	**(HX1036)**	**BLAISE NAME:** OffrdHIChoseNotHX		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	{User Defined.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (HLTHINSHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

{Earlier, I recorded that {you/{PERSON}} {belong/belongs} to {UNION NAME} at {EMPLOYER}.} {Since {START DATE}/Between {START DATE} and {END DATE}}, {were/was} {you/{PERSON}} <u>offered</u> health insurance through {EMPLOYER}?

HELP: F1

Responses:	YES	1		
	NO	2	HX23	(HX1038)
	REFUSED	RF	END_LP10	(HX1045)
	DON'T KNOW	DK	END_LP10	(HX1045)

Programmer Instructions:	If coded '1' (YES) and insurance source being cycled on through LOOP_10 is a reviewed job/employer (RJ10 or RJ60 was asked in the current round for this insurance source), go to END_LP10. Otherwise, continue with HX22.

Placeholder for MHOP specifications. This will be deleted once those specifications are available:
OffrdHIChoseNotHX will need to be set during inter round processing when data between the EM/RJ and HX sections are cleaned for this job that now does not have health insurance.
IF coded '1' (YES) set OffrdHIChoseNotHX =YES
If coded '2' (NO), 'RF' or 'DK' set OffrdHIChoseNotHX =NO |
| **Display Instructions:** | Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final).
Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Display '{Earlier, I recorded that {you/{PERSON}} belong to {UNION NAME} at {EMPLOYER}.}' if cycling through LOOP_10 for a newly created union that provides health insurance (EMPHI=YES) for the union only or primarily, but not the job itself (EM710=2 or 4). Otherwise, use a null display.

For "UNION NAME" display the name of the newly created union (UnionName entered at EM720) being cycled on through LOOP_10 that provides health insurance (EMPHI=YES).

If cycling through LOOP_10 for a newly created union that provides health insurance (EMPHI=YES) for the union only or primarily, but not the job itself (EM710=2 or 4), display the name of the Job linked to this union for "EMPLOYER".

If cycling through LOOP_10 for a newly created job (not a union) or a reviewed job (not a union) that now provides health insurance [EMPHI=Yes for the current round], display the name of that job/employer being cycled on through LOOP_10 for "EMPLOYER". |
| **Testing/Editing Notes:** | Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75] |

HX22	**(HX1037)**	**BLAISE NAME:** ChoicePlansHX	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	{User Defined.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (ChoicePlansHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

Even though {you/he/she} chose not to take health insurance, did {you/{PERSON}} have a choice of different health insurance plans that provided hospital and physician benefits or was only one health insurance plan offered through {EMPLOYER}?

HELP: F1

Responses:

YES, MORE THAN ONE PLAN	....	1	END_LP10	(HX1045)
NO, ONLY ONE PLAN	....	2	END_LP10	(HX1045)
REFUSED	....	RF	END_LP10	(HX1045)
DON'T KNOW	....	DK	END_LP10	(HX1045)

Display Instructions:

If cycling through LOOP_10 for a newly created union that provides health insurance (EMPHI=YES) for the union only or primarily, but not the job itself (EM710=2 or 4), display the name of the Job linked to this union for "EMPLOYER".

If cycling through LOOP_10 for a newly created job (not a union) or a reviewed job (not a union) that now provides health insurance [EMPHI=Yes for the current round], display the name of that job/employer being cycled on through LOOP_10 for "EMPLOYER".

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]

HX23   **(HX1038)**   **BLAISE NAME:** AnyOffrdHIHX

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	{User Defined.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

Was health insurance offered to <u>any</u> employees at {EMPLOYER}?

Responses:

YES		1	END_LP10	(HX1045)
NO		2	END_LP10	(HX1045)
REFUSED		RF	END_LP10	(HX1045)
DON'T KNOW		DK	END_LP10	(HX1045)

Display Instructions:

If cycling through LOOP_10 for a newly created union that provides health insurance (EMPHI=YES) for the union only or primarily, but not the job itself (EM710=2 or 4), display the name of the Job linked to this union for "EMPLOYER".

If cycling through LOOP_10 for a newly created job (not a union) or a reviewed job (not a union) that now provides health insurance [EMPHI=Yes for the current round], display the name of that job/employer being cycled on through LOOP_10 for "EMPLOYER".

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_10[1..75]

BOX_50   **(HX1040)**   **Item Type:** Route   **Type Class:** If Then

Route Details: Ask the Private Health Insurance detail (HP) section for this insurance.

At completion of HP section, continue with END_LP10.

END_LP10	**(HX1045)**	**Item Type:** Route	**Type Class:** End Loop

Route Details: Cycle on next job/union that meets the conditions stated in the loop definition.

If no more jobs/unions meet the stated conditions, END LOOP_10 and continue with BOX_ 60.

BOX_60	**(HX1050)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If round 1, go to BOX_80.

Otherwise, continue with BOX_70.

BOX_70	**(HX1055)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If:

• Any new RU members added to RU during interround processing (PersAddedBetweenRnds=YES),
OR
• Any new RU members added to RU this round, excluding merges, [(Person[].PreloadOrd = EMPTY],
OR
• Any RU members = >65(or in age category 9) in current round and no insurance for this person has Insurance.HISrc=Medicare and OrigRnd < > current round,
continue with HX30.

Otherwise, go to BOX_120.

HX30	**(HX1060)**	**BLAISE NAME:** AnyCareR25		
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 (MEDICAREHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Question Text:

We show that {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N} {{are/is}} {either} {65 years old or older} {or} {joined the household since our last interview}.

{{Have you/Has {PERSON}}/Have any of these people} been covered by Medicare {since {START DATE}/between {START DATE} and {END DATE}}?

HELP: F1

Responses:	YES	1		
	NO	2	LOOP_20	(HX1085)
	REFUSED	RF	LOOP_20	(HX1085)
	DON'T KNOW	DK	LOOP_20	(HX1085)

Programmer Instructions:	If HX30 is coded '1' (YES) and only one RU member eligible for HX30, select that person automatically by CAPI at HX40 and go to LOOP_ 20. If HX30 is coded '1' (YES) and more than one RU member eligible for HX30, go to HX40. Roster behavior: 1. Select, add, delete, and edit disallowed.
Display Instructions:	Roster 1 - Report Roster definition: This item displays RU-members-roster for display of RU-members. Display RU members' first, middle, and last names (Person.FullName). Roster filter: Display RU-members who meet one of the following conditions: 1. Person is a new RU member this round, excluding merges, [(Person[].PreloadOrd = EMPTY], OR 2. Person = >65 (or in age category 9) in the current round and no insurance for this person has Insurance.HISrc=Medicare and OrigRnd < > current round. OR 3. Person is a new RU member just added to RU during interround processing the (PersAddedBetweenRnds=YES) For '{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N}', use the roster definition and filter specifications above. Substitute "you" for the person's full 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}' and '65 years old or older' if anyone on this roster is = > 65 (or in age category 9) in the current round. Display 'is' if the only eligible RU member to be displayed at HX30 is someone other than the respondent. Otherwise, display "are". Display 'joined the household since our last interview' if any new RU members added to the RU this round. Display 'either' and 'or' if any new RU members added to the RU this round and if anyone on this roster is = >65(or in age category 9) in the current round. Display '{Have you/Has {PERSON}' if only one eligible RU member to be displayed at HX30. Otherwise, display 'Have any of these people'. Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare

HX40   **(HX1065)**   **BLAISE NAME:** WhoCareR25Roster

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFIRSTMIDLASTNA	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

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

Question Text:

Who is covered by Medicare?

PROBE: Who else is covered by Medicare?

ENTER ALL THAT APPLY.

Responses:	{FIRST NAME [MIDDLE NAME] LAST NAME}1	------ 1	LOOP_20	(HX1085)
	{FIRST NAME [MIDDLE NAME] LAST NAME}2	------ 2	LOOP_20	(HX1085)
	{FIRST NAME [MIDDLE NAME] LAST NAME}3	------ 3	LOOP_20	(HX1085)
	{FIRST NAME [MIDDLE NAME] LAST NAME}4	------ 4	LOOP_20	(HX1085)
	{FIRST NAME [MIDDLE NAME] LAST NAME}N	------ 5	LOOP_20	(HX1085)

Programmer Instructions:	Roster behavior:
	1. Multiple select allowed. Interviewer may select one or more from the listed members.
	For each person selected, create insurance through Medicare for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicare and Insurance.HISrcName=Medicare and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]
Display Instructions:	Roster 2 – no add/edit/delete
	Roster definition: Use HX30 definition.
	Roster filter:
	Use HX30 filter.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare

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BOX_80   **(HX1070)**   **Item Type:** Route   **Type Class:** If Then

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Route Details:	If at least one RU member is 65 years of age or older (= >65) or in age category 9, continue with HX50.
	Otherwise, go to HX60.

HX50_01	**(HX1075)**	**BLAISE NAME:** WhoCareR1GE65			
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 (MEDICAREHelp) ☑ Show Card (HX-1) ☐ Look Up File (   )

Question Text:

📖 HX-1

Medicare is a health insurance program for persons 65 years or over and for some persons with disabilities. People covered by Medicare usually have a card that looks like this.

<u>At any time</u> since {START DATE}, {have you/has {PERSON 1}} been covered by Medicare?

HELP: F1

Responses:	YES	1
	NO	2
	REFUSED	RF
	DON'T KNOW	DK

Programmer Instructions:	After grid completion, if at least one current RU member who is 64 years of age or younger (< = 64) or in age categories 1-8, continue with HX60.

Otherwise, go to LOOP_20.

Preloaded grid type 1: forced navigation including HX50_01, HX50_02, HX50_03, HX50_ 04, HX50_N.

For each person coded '1' (YES), create insurance through Medicare for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicare and Insurance.HISrcName=Medicare 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 (Pers.FullName).

Roster Filter:
Display only those RU members who are 65 years of age or older (= > 65) or in age category 9.

Display variable question text. Replace "<u>At any time</u> since {START DATE}, {have you/has {PERSON 1}} been covered by Medicare?":

HX50_02: What about {PERSON 2}?
HX50_03: What about {PERSON 3}?
HX50_04: What about {PERSON N}? Has {he/she} been covered by Medicare <u>at any time</u> since {START DATE}?
HX50_N: Repeat question text HX50_02-HX50_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 HX50_02 – HX50_N. Display in bold black and no brackets when on HX50_01. |
| **Testing/Editing Notes:** | Variable collected at MEPS(Fall/Spring)
YYYY.HX_Main.HXMedicare.MedicareMemGrid.MedicareMem[1..25]
Variable stored at MEPS(Fall/Spring)
YYYY.HX_Main.HXMedicare.MedicareMemGrid.MedicareMem[1..25] |

HX60   **(HX1080)**   **BLAISE NAME:** WhoCareR1LT65Roster

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TNAMES_NOONE	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

☑ Help Available (MEDICAREHelp)   ☑ Show Card (HX-1)   ☐ Look Up File (   )

Question Text:

📖 HX-1

{Medicare is a health insurance program for persons 65 years or over and for some persons with disabilities. People covered by Medicare usually have a card that looks like this.}

 At any time since {START DATE}, {have/has} {PERSON 1 <=64, PERSON 2 <=64, PERSON 3 <=64} been covered by Medicare?

ENTER ALL THAT APPLY.

HELP: F1

Responses:	{FIRST NAME,[MIDDLE NAME], LAST NAME} 1	------ 1	LOOP_20	(HX1085)
	{FIRST NAME,[MIDDLE NAME], LAST NAME} 2	------ 2	LOOP_20	(HX1085)
	{FIRST NAME,[MIDDLE NAME], LAST NAME} 3	------ 3	LOOP_20	(HX1085)
	{FIRST NAME,[MIDDLE NAME], LAST NAME} 4	------ 4	LOOP_20	(HX1085)
	{FIRST NAME,[MIDDLE NAME], LAST NAME} N	------ 5	LOOP_20	(HX1085)
	NO ONE	------ 99	LOOP_20	(HX1085)

Programmer Instructions:	Roster behavior: 1. Multiple select allowed. Interviewer may select one or more from the listed members.. For each person selected, create insurance through Medicare for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicare and Insurance.HISrcName=Medicare and Insurance.Plcyhldr = PersID and CovdPers.Depend=PersID] [set Create Q and OrigRnd] Hard check: Code '99' (NO ONE) cannot be selected in combination with any other response option. If HX60 is coded '99' (NO ONE) is selected with any other response code: "NO ONE CANNOT BE SELECTED IF ANOTHER RESPONSE OPTION IS ALREADY SELECTED. VERIFY AND RE-ENTER."
Display Instructions:	Roster 2 – no add/edit/delete Roster definition: This item displays the RU-MEMBERS-ROSTER for selection of RU members. Display RU members' first, middle, and last names (Person.FullName) Roster filter: Display RU members who are 64 years of age or younger (< = 64) or in age categories 1-8. Display 'Medicare is a health insurance program for persons 65 years or over and for some persons with disabilities. People covered by Medicare usually have a card that looks like this.' if HX50 was **NOT** asked (i.e., no RU members are 65 years of age or older or in age category 9). Otherwise, use a null display. For '{PERSON 1 <=64, PERSON 2 <=64, PERSON 3 <=64}', display the first names only of all RU members who are 64 years of age or younger or in age categories 1-8. 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 "or" 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 "or". Display 'have' if list includes the respondent. Otherwise, display 'has'.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare

LOOP_20	**(HX1085)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details: For each element in RU-MEMBERS-ROSTER, ask BOX_90-END_LP20.

Loop definition: LOOP_20 determines if reason for Medicare is condition/disability for persons < 65 who receive Medicare and collects social security status for persons = > 65 who are not covered by Medicare. This loop cycles on persons who meet any of the following conditions:
-If round 1: all current RU members

-If not round 1: all current RU members who meet one of the following conditions:
 • Any new RU members added to RU during interround
   processing (PersAddedBetweenRnds=YES),
   OR
 • Person is a new RU member this round, excluding merges, [(Person[].PreloadOrd = EMPTY],
 OR
 • Person turned 65 years old this round and no insurance for this person has Insurance.HISrc=Medicare and not covered by Medicare during any round or
 • Person = > 65 years old (or in age category 9) in previous round and no insurance for this person has Insurance.HISrc=Medicare

NOTE: When doing the check for being covered by Medicare, you will need to exclude any Medicare coverage that was created during the current round in the verification series (HX230). We need to ensure that this loop doesn't become off path if Medicare is created later.

BOX_90	**(HX1090)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If round 1, go to BOX_110.

Otherwise, continue with BOX_100.

BOX_100   **(HX1095)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If person added this round or person was added to RU during interround processing
                       (PersAddedBetweenRnds=YES), continue with BOX_110.

                       If person [(turned 65 years old this round and no insurance for this person has
                       Insurance.HISrc=Medicare and OrigRnd < > current round) or (= >65 (or in age category 9)
                       in the previous round and no insurance for this person has Insurance.HISrc=Medicare and
                       OrigRnd < > current round)] and [person was not selected at HX40], go to HX80.

                       Otherwise, go to END_LP20.

BOX_110   **(HX1100)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If person has insurance with Insurance.HISrc=Medicare and is < 65 years old (or in age
                       categories 1-8), continue with HX70.

                       If person has insurance with Insurance.HISrc=Medicare and is = > 65 years old (or in age
                       category 9), go to END_LP20.

                       If **no** Medicare insurance for this person (no insurance in array with
                       Insurance.HISrc=Medicare) and this person is < 65 years old (or in age categories 1-8), go
                       to END_LP20.

                       If **no** Medicare insurance for this person has (no insurance in array with
                       Insurance.HISrc=Medicare) and this person is = > 65 years old (or in age category 9), go to
                       HX80.

HX70	**(HX1105)**	**BLAISE NAME:** CareDisab		
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 (CareDisabHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

{Do/Does} {you/{PERSON}} receive <u>Medicare</u> because of a medical condition or a disability?

HELP: F1

Responses:

YES	--	1	END_LP20	(HX1115)
NO	--	2	END_LP20	(HX1115)
REFUSED	-------------------------------------	RF	END_LP20	(HX1115)
DON'T KNOW	---------------------------------	DK	END_LP20	(HX1115)

Display Instructions:

Testing/Editing Notes:
Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare.HXLoop_20[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare.HXLoop_20[1..25]

HX80	**(HX1110)**	**BLAISE NAME:** RcvSocSec		
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 (RcvSocSecHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

People with Social Security usually get <u>Medicare</u>. {Do/Does} {you/{PERSON}} receive Social Security?

HELP: F1

Responses:

YES	-----------------	1	END_LP20	(HX1115)
NO	-----------------	2	END_LP20	(HX1115)
REFUSED	-----------------	RF	END_LP20	(HX1115)
DON'T KNOW	-----------------	DK	END_LP20	(HX1115)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare.HXLoop_20[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicare.HXLoop_20[1..25]

END_LP20	**(HX1115)**	**Item Type:** Route	**Type Class:** End Loop

Route Details: Cycle on next person who meets the conditions stated in the loop definition.

If no more persons meet the stated conditions, end LOOP_20 and continue with BOX_120.

BOX_120   **(HX1120)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If Medicaid/SCHIP provided to any RU member during the previous round (Preload.xxx) and therefore already reviewed as part of the PR section [Insurance.HISrc=Medicaid and PR150 <> EMPTY], go to BOX_140.

Otherwise, continue with HX90.

HX90   **(HX1130)**   **BLAISE NAME:** AnyCaid

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 (MEDICATHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Question Text:

<u>Medicaid</u>{, also known as {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME} are state programs that pay for health care for persons in need.

<u>At any time</u> {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the household been covered by Medicaid{, STATE NAME FOR MEDICAID},} or {STATE CHIP NAME}?

HELP: F1

Responses:

YES	1		
NO	2	BOX_140	(HX1160)
REFUSED	RF	BOX_140	(HX1160)
DON'T KNOW	DK	BOX_140	(HX1160)

Programmer Instructions:	If coded '1' (YES) and single-person RU, autocode HX100_01 as '1' (YES) for that person and go to BOX_130.
	If coded '1' (YES) and multi-person RU, continue with HX100_01.

Display Instructions:	For the first sentence, display ', also known as {STATE NAME FOR MEDICAID},' (substituting the real state name for program) if the state in which interview is being conducted does not use the name 'Medicaid.' For the specific name to use 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 use by state, see the plan fill file.
	Display 'since {START DATE}' if current round is not the final round of the panel (RndType<>Final).
	Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicaid
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicaid

HX100_01	**(HX1135)**	**BLAISE NAME:** WhoCaid		
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 (   )

Question Text:

{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} and {END DATE}}?

Responses:	YES	1
	NO	2
	REFUSED	RF
	DON'T KNOW	DK

Programmer Instructions:	Preloaded grid type 1: forced navigation including HX100_01, HX100_02, HX100_03, HX100_ 04, HX100_N.

After grid completion, continue with BOX_130.

For each person coded '1' (YES), create insurance through Medicaid/SCHIP for this person [set Insurance.HIPubPriv=Public and Insurance.HISrc=Medicaid and Insurance.HISrcName={Medicaid/{STATE NAME FOR MEDICAID}}/{STATE CHIP NAME} and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Hard check: At least one person must be coded '1' (YES). If no RU member coded '1' (YES), display the following message: "IF NO ONE COVERED BY MEDICAID/SCHIP, BACK UP TO HX90 (AnyCaid) AND REVIEW RESPONSES." |
| **Display Instructions:** | Roster 1 – Report no add/edit/delete

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: none, display all.

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

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

Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final).
Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Display variable question text. Replace "{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} and {END DATE}}?" with:

HX100_02: What about {PERSON 2}?
HX100_03: What about {PERSON 3}?
HX100_04: What about {PERSON N}? Has {he/she} been covered by Medicaid{, also known as {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME} at any time {since {START DATE}/between {START DATE} and {END DATE}}?
HX100_N: Repeat question text HX100_02-HX100_N for as many RU members that fit the roster filter criteria. |
| **Testing/Editing Notes:** | Variable collected at MEPS(Fall/Spring)
YYYY.HX_Main.HXMedicaid.MedicaidMemGrid.MedicaidMem[1..25] |

Variable stored at MEPS(Fall/Spring)
YYYY.HX_Main.HXMedicaid.MedicaidMemGrid.MedicaidMem[1..25]

BOX_130   **(HX1145)**   **Item Type:** Route   **Type Class:** If Then

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

This instance of the HQ section collects time period coverage detail for all RU members that are covered by Medicaid/SCHIP. 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, HX100_01-HX100_N is coded '1' (YES) for this person.

At completion of the HQ section, continue with HX105.

HX105   **(HX1155)**   **BLAISE NAME:** CaidStExch

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 (   )

Question Text:

Is the coverage with Medicaid{, {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME} through {STATE EXCHANGE NAME-A} {, [which may also be known as {ALIAS B} {or {ALIAS C}}]}?

Responses:
YES	1	BOX_140	(HX1160)
NO	2	BOX_140	(HX1160)
REFUSED	RF	BOX_140	(HX1160)
DON'T KNOW	DK	BOX_140	(HX1160)

Programmer Instructions:	If coded '1' (YES), set HX_Main.CaidExch=Yes. Else, set HX_Main.CaidExch=No.

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

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

Display ', [which may also be known as {ALIAS B} {or {ALIAS C}}]' if there is more than one exchange name associated with the state in which interview is being conducted.

Display 'or {ALIAS C}' if there are three exchange names associated with the state in which interview is being conducted.

For 'STATE EXCHANGE NAME-A', 'ALIAS B', and 'ALIAS C', display the exchange name associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file. |

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicaid Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMedicaid

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BOX_140   **(HX1160)**   **Item Type:** Route   **Type Class:** If Then

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Route Details:	If MILITARY HEALTH provided to any RU member during the previous round (Preload.xxx) and therefore already reviewed as part of the PR section [Insurance.HISrc=Military and PR260 <> EMPTY], go to BOX_160.

Otherwise, continue with HX110. |

HX110	**(HX1165)**	**BLAISE NAME:** AnyMilitCovg		
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 (CHAMPTRIHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Question Text:

{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} {{was/were} on active duty in the past, but not now}.}

<u>At any time</u> {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the household been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage?

HELP: F1

Responses:	YES	--	1		
	NO	--	2	BOX_160	(HX1195)
	REFUSED	--	RF	BOX_160	(HX1195)
	DON'T KNOW	--	DK	BOX_160	(HX1195)

Programmer Instructions:	If coded '1' (YES) and single-person RU, autocode HX120_01 as '1' (YES) for that person and go to HX125_01. If coded '1' (YES) and multi-person RU, continue with HX120_01.
Display Instructions:	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} {{was/were} on active duty in the past, but not now}.' if at least one current RU member is currently FT active duty (Person.FTADuty=Yes) or 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 is currently FT active duty. Otherwise, use a null display. Display '{was/were} on active duty in the past, but not now' if at least one RU member has been 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 discharged in any round. Otherwise, use a null display. For '{MILITARY PERSON 1, MILITARY PERSON 2, MILITARY PERSON N}', display the first names of all RU members who are either currently FT active duty or 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' and 'was' if only one person listed and that person is not selected as respondent. Otherwise, display 'are' and 'were'. Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXMilitary Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXMilitary

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HX120_01   **(HX1170)**   **BLAISE NAME:** WhoMilitCovg

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 (   )

Question Text:

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

Responses:	YES	1
	NO	2
	REFUSED	RF
	DON'T KNOW	DK

Programmer Instructions:	Preloaded grid type 1: forced navigation including HX120_01, HX120_02, HX120_03, HX120_04, HX120_N. After grid completion, continue with HX125_01. 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 CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd] Hard check: At least one person must be coded '1' (YES). If no RU member coded '1' (YES), display the following message: "IF NO ONE COVERED BY MILITARY HEALTH CARE, BACK UP TO HX110 (AnyMilitCovg) AND REVIEW RESPONSES."
Display Instructions:	Roster 1 – Report no add/edit/delete 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: none, display all. Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final). Display variable question text. Replace "{Have you/Has {PERSON 1}} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage, <u>at any time</u> {since {START DATE}/between {START DATE} and {END DATE}}?" with: HX120_02: What about {PERSON 2}? HX120_03: What about {PERSON 3}? HX120_04: What about {PERSON N}? Has {he/she} been covered by military health care, such as TRICARE, CHAMPVA, or VA coverage, <u>at any time</u> {since {START DATE}/between {START DATE} and {END DATE}}? HX120_N: Repeat question text HX120_02-HX120_N for as many RU members that fit the roster filter criteria.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring) YYYY.HX_Main.HXMilitary.MilitaryCovGrid.MilitaryCov[1..25] Variable stored at MEPS(Fall/Spring) YYYY.HX_Main.HXMilitary.MilitaryCovGrid.MilitaryCov[1..25]

HX125_01   **(HX1175)**   **BLAISE NAME:** CodeAllMilitPlan

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TMILITARYCOVER	**Answers allowed:** 6	**ArrayMax:**	**Max value:**

☑ Help Available (CHAMPTRIHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Question Text:

What types of military health coverage {do/does} {you/{PERSON 1}} have? {Do you/Does {he/she}} have TRICARE, CHAMPVA, or VA (Veterans Affairs)?

ENTER ALL THAT APPLY.

HELP: F1

Responses: TRICARE ------------------------------------- 1
                        CHAMPVA ------------------------------------ 2
                        VA (VETERANS AFFAIRS) -------------------- 3

Programmer Instructions:	Preloaded grid type 1: forced navigation including HX125_01, HX125_02, HX125_03, HX125_04, HX125_N After grid completion, continue with BOX_150. DK and RF disallowed.
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, coded '1' (YES) at HX120. Display variable question text. Replace "What types of military health coverage {do/does} {you/{PERSON 1}} have? {Do you/Does {he/she}} have TRICARE, CHAMPVA, or VA (Veterans Affairs)?" with: HX125_02: What about {PERSON 2}? HX125_03: What about {PERSON 3}? HX125_04: What about {PERSON N}? Does {he/she} have TRICARE, CHAMPVA, or VA (Veterans Affairs)? HX125_N: Repeat question text HX125_02-HX125_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 MEPS(Fall/Spring) YYYY.HX_Main.HXMilitary.MilitaryTypeGrid.MilitaryType[1..25] Variable stored at MEPS(Fall/Spring) YYYY.HX_Main.HXMilitary.MilitaryTypeGrid.MilitaryType[1..25]

BOX_150	**(HX1185)**	**Item Type:** Route	**Type Class:** If Then

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

This instance of the HQ section collects time period coverage detail for all RU members that are covered by military health coverage. 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, HX120 _01-HX120_N is coded '1' (YES) for this person.

At completion of the HQ section, continue with BOX_160.

BOX_160	**(HX1195)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If Indian Health Service (IHS) insurance provided to any RU member at any time during the previous round (Preload.xxx) and therefore already reviewed as part of the PR section [Insurance.HISrc=IHS and PR290 <> EMPTY], go to BOX_180.

Otherwise, continue with HX130.

HX130	**(HX1200)**	**BLAISE NAME:** AnyIHS		
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 (   )

Question Text:

At any time {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in this household been enrolled in the Indian Health Service?

IF NEEDED, SAY: The Indian Health Service (IHS) is the health care system for federally recognized American Indian and Alaska Natives. The IHS is not a health insurance provider but rather, it provides healthcare only to eligible Alaska Natives and American Indians at its federal hospitals and clinics.

Responses:

YES	....	1		
NO	....	2	BOX_180	(HX1225)
REFUSED	....	RF	BOX_180	(HX1225)
DON'T KNOW	....	DK	BOX_180	(HX1225)

Programmer Instructions:

If HX130 is coded '1' (YES) and single-person RU, select person at HX140 automatically by CAPI and go to BOX_170.
If HX130 is coded '1' (YES) and multi-person RU, continue with HX140.

Display Instructions:

Display 'since {START DATE}' if current round is not the final round of the panel (RndType<>Final).
Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXIHS
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXIHS

HX140   **(HX1205)**   **BLAISE NAME:** WhoIHSRoster

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFIRSTMIDLASTNA	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

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

Question Text:

Who is enrolled in the Indian Health Service (IHS)?

PROBE: Who else is enrolled in the Indian Health Service (IHS) {since {START DATE}/between {START DATE} and {END DATE}}?

ENTER ALL THAT APPLY.

Responses:

{FIRST NAME [MIDDLE NAME] LAST NAME}1	----- 1	BOX_170	(HX1215)
{FIRST NAME [MIDDLE NAME] LAST NAME}2	----- 2	BOX_170	(HX1215)
{FIRST NAME [MIDDLE NAME] LAST NAME}3	----- 3	BOX_170	(HX1215)
{FIRST NAME [MIDDLE NAME] LAST NAME}4	----- 4	BOX_170	(HX1215)
{FIRST NAME [MIDDLE NAME] LAST NAME}N	----- 5	BOX_170	(HX1215)

Programmer Instructions:	Roster behavior:
	1. Multiple select allowed. Interviewer may select from the listed members.

For each person selected, 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 CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final).
Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Display Instructions:	Roster 2 – no add/edit/delete

Roster definition:
This item displays RU-MEMBERS-ROSTER for selection of RU-members. Display RU member's first, middle, and last names (Person.FullName)

Roster filter: none, display all.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXIHS
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXIHS

BOX_170   **(HX1215)**   **Item Type:** Route   **Type Class:** If Then

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

This instance of the HQ section collects time period coverage detail for all RU members that are covered by the Indian Health Service. The grid for the HQ section should be preloaded with insurance that meets 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, person is selected at HX140.

At completion of the HQ section, continue with BOX_180.

BOX_180	**(HX1225)**	Item Type: Route	Type Class: If Then

Route Details: If Govt-hospital/physician provided to any RU member during the previous round (Preload.xxx) and therefore already reviewed as part of the PR section [Insurance.HISrc=GHP and PR310 <> EMPTY], go to HX190.

Otherwise, continue with HX150.

HX150   **(HX1235)**   **BLAISE NAME:** AnyGovProg

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 (INSTYPESHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Question Text:

{Not counting insurance you already told me about, <u>at/At} any time</u> {since {START DATE}/between {START DATE} and {END DATE}}, has anyone in the household had any other type of health insurance from any state or local government agency which <u>provided hospital and physician benefits</u>?

HELP: F1

Responses:	YES	--	1	HX160	(HX1240)
	NO	--	2	HX190	(HX1270)
	REFUSED	--	RF	HX190	(HX1270)
	DON'T KNOW	--	DK	HX190	(HX1270)

Display Instructions: Display 'Not counting insurance you already told me about, <u>at</u>' if any sources of insurance are recorded for this RU for the current round.. Otherwise, display '<u>At</u>'.

Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final).
Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).

Display HX150 and HX160 on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP

HX160   **(HX1240)**   **BLAISE NAME:** GovProgName

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	String	**Field Size:** 30		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Question Text:

What is the name of the program?

Responses: --   1

Programmer Instructions:	If HX150 is coded '1' (YES) and single-person RU, select person at HX170 automatically by CAPI and go to BOX_190.
	If HX150 is coded '1' (YES) and multi-person RU, continue with HX170.
	Note: 'GOVT-HOS/PHY-{PROGRAM NAME FROM HX160}' substituting 17 characters of the entry at HX160 should be used for the Insurance.HISrcName in the context header (where appropriate).
	Set HX_Main.GHPProgName=GovProgName

Display Instructions:	Display HX150 and HX160 on the same form pane.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP

HX170   **(HX1245)**   **BLAISE NAME:** WhoGovProgRoster

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFIRSTMIDLASTNA	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

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

Question Text:

Who is covered by {PROGRAM NAME FROM HX160}, the program sponsored by a state or local government agency which provided hospital and physician benefits?

PROBE: Who else is covered by {PROGRAM NAME FROM HX160}, the program sponsored by a state or local government agency which provided hospital and physician benefits {since {START DATE}/between {START DATE} and {END DATE}}?

ENTER ALL THAT APPLY.

Responses:	{FIRST NAME [MIDDLE NAME] LAST NAME}1	------ 1	BOX_190	(HX1255)
	{FIRST NAME [MIDDLE NAME] LAST NAME}2	------ 2	BOX_190	(HX1255)
	{FIRST NAME [MIDDLE NAME] LAST NAME}3	------ 3	BOX_190	(HX1255)
	{FIRST NAME [MIDDLE NAME] LAST NAME}4	------ 4	BOX_190	(HX1255)
	{FIRST NAME [MIDDLE NAME] LAST NAME}N	------ 5	BOX_190	(HX1255)

Programmer Instructions:	Roster behavior: 1. Multiple select allowed. Interviewer may select from the listed members. For each person selected, 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}' and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]
Display Instructions:	Roster 2 – no add/edit/delete Roster definition: This item displays RU-members-roster for selection of RU-members. Display RU member's first, middle, and last names (Person.FullName) Roster filter: none, display all. For '{PROGRAM NAME FROM HX160}', display the text entry from HX160. Display 'since {START DATE}' if current round is not the final round of the panel (RndType<>Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final).
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP

BOX_190 **(HX1255)** **Item Type:** Route **Type Class:** If Then

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Route Details:	Ask the time period covered detail (HQ) section for this person. This instance of the HQ section collects time period coverage detail for all RU members that are covered by Government-Hospital/Physician coverage. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions: • Insurance source is Govt-Hospital/Physician [Insurance.HISrc=GHP] and • Person is "COVERED BY GOV'T-HOSPITAL/PHYSICIAN" during the current round, that is, person is selected at HX170. At completion of the HQ section, continue with HX180.

HX180	**(HX1265)**	**BLAISE NAME:** GovProgStExch		
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 (   )

Question Text:

Is the coverage with {PROGRAM NAME FROM HX160}, the program sponsored by a state or local government agency which provided hospital and physician benefits, through {STATE EXCHANGE NAME-A} {, [which may also be known as {ALIAS B} {or {ALIAS C}}]}?

Responses:	YES		1	HX190	(HX1270)
	NO		2	HX190	(HX1270)
	REFUSED		RF	HX190	(HX1270)
	DON'T KNOW		DK	HX190	(HX1270)

Programmer Instructions:

If coded '1' (YES), set HX_Main.GHPExchange=Yes. Else, set HX_Main.GHPExchange=No.

Display Instructions:

For '{PROGRAM NAME FROM HX160}', display the text entry from HX160.

Display ', [which may also be known as {ALIAS B} {or {ALIAS C}}]' if there is more than one exchange name associated with the state in which interview is being conducted.

Display 'or {ALIAS C}' if there are three exchange names associated with the state in which interview is being conducted.

For 'STATE EXCHANGE NAME-A', 'ALIAS B' and 'ALIAS C' display the exchange name associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXGHP

HX190	**(HX1270)**	**BLAISE NAME:** AnyOthHICovg		
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 (HX-2)   ☐ Look Up File (   )

Question Text:

&HX-2.

Please look at card HX-2. It lists various sources of health insurance that help pay hospital and doctor bills and other health expenses such as dental and vision. {This also includes Medigap or Medicare Supplements which some people who are eligible for Medicare have through a private carrier as additional coverage.} {Not counting insurance you already told me about, <u>at/At} any time</u> {since {START DATE}/between {START DATE} and {END DATE}}, was anyone in this household covered by health insurance from any {other} source, such as those listed on the card?

Responses:

YES	------------------------------------	1	HX200	(HX1275)
NO	------------------------------------	2	BOX_210	(HX1300)
REFUSED	------------------------------------	RF	BOX_210	(HX1300)
DON'T KNOW	------------------------------------	DK	BOX_210	(HX1300)

Display Instructions:

Display 'since {START DATE}' if current round is not the final round of the panel (RndType<>Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final)..

Display 'This also includes...coverage.' if anyone in RU is "COVERED BY MEDICARE" during the current round [(Insurance.HISrc=Medicare) and ((OrigRnd <> current round) or (OrigRnd=current round and person selected at HX40 or HX60 or HX50=Yes)) for at least one person].

Display 'Not counting insurance you already told me about, <u>at</u>' and 'other' if any sources of insurance are recorded for this RU for the current round. Otherwise, display '<u>At</u>'.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg

HX200	**(HX1275)**	**BLAISE NAME:** CodeAllOthHI		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THEALTHINSCOV	**Answers allowed:** 12	**ArrayMax:**	**Max value:**

☑ Help Available (OthHICovgHelp)   ☑ Show Card (HX-2)   ☐ Look Up File (   )

Question Text:

📖HX-2

From which of the sources on card HX-2 did anyone in this household purchase health insurance?

ENTER ALL THAT APPLY.

HELP: F1

Responses:

EMPLOYER OR UNION (THROUGH ANYONE'S CURRENT OR PREVIOUS JOB)	1
DIRECTLY FROM {STATE EXCHANGE NAME-A} OR FEDERAL MARKETPLACE	2
DIRECTLY FROM AN INSURANCE COMPANY OR AGENT/BROKER	3
FROM A GROUP OR ASSOCIATION	4
UNDER A PLAN OF SOMEONE NOT LIVING HERE	5
OTHER SOURCE	91
REFUSED	RF
DON'T KNOW	DK

Programmer Instructions:	If coded '91' (OTHER SOURCE), alone or in combination with any other code, continue with HX200OS.
	Otherwise, go to LOOP_30.
	For specifications purposes only: CAPI does not allow 'RF' or 'DK' in combination with any other code.
	When source is selected, create direct purchase insurance with the type selected at HX200 [set Insurance.HIPubPriv=Private and Insurance.HISrc=DirectPurchase and Insurance.DirectPurchTp=type selected] [set Create Q and OrigRnd]

Display Instructions:	For 'STATE EXCHANGE NAME-A' display exchange name 'A' associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file.
	Display HX200 and HX200OS on the same form pane screen.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg

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HX200OS   **(HX1280)**   **BLAISE NAME:** OthHIOS

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 (   )

Question Text:

SPECIFY: OTHER SOURCE

Responses: --- 1   LOOP_30   (HX1285)

Programmer Instructions:	Refused and Don't Know disallowed.

Display Instructions:	Display HX200 and HX200OS on the same form pane screen.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXOthHICovg

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LOOP_30	**(HX1285)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details:	For each source, ask BOX_200 – END_LP30. Loop definition: LOOP_30 collects information about private health insurance obtained through a source selected at HX200. This loop cycles once for each source selected at HX200.

BOX_200	**(HX1290)**	**Item Type:** Route	**Type Class:** If Then

Route Details:	Ask Private Health Insurance detail (HP) section for the response category selected at HX200 that is currently being looped on. At completion of the HP section, continue with END_LP30.

END_LP30	**(HX1295)**	**Item Type:** Route	**Type Class:** End Loop

Route Details:	Cycle on next source that meets the conditions stated in the loop definition. If no more sources meet the stated conditions, END LOOP_30 and continue with BOX_210.

BOX_210   **(HX1300)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If at least one current RU member is withOUT any source of comprehensive public or private health insurance during the entire reference period (see definition below) (at least one RU member where Person.HasCovFlag<>YES), continue with LOOP_40.

Otherwise, go to BOX_360.

Programmer Instructions:	BOX_210 will set a person level flag – Person.HasCovFlag – YES/NO. This flag is set one time and is not reset even when backing up and coming forward again. Once Loop_40 is "on path" it needs to stay on path.

An RU member is WITH any source of public or private health insurance if he/she meets the following conditions:

If Round 1:
• Person is covered by public insurance, excluding IHS [Insurance.HIPublPriv=Public and Insurance.HISrc <> IHS])
    OR
• Persons is covered by private insurance [Insurance.HIPublPriv=Private and PersID exists in covered person array]

Note: IHS does not count as covered in Round 1. Being listed as a covered person on any other insurance source during Round 1 counts as "being covered".

Otherwise (if not Round 1):
• Person is covered by Medicare in the current round [Insurance.HISrc=Medicare and ((OrigRnd <> current round) or (OrigRnd=current round and person selected at HX40 or HX60 or HX50=Yes))]
    OR
• Person is covered by Medicaid/SCHIP in the current round [Insurance.HISrc=Medicaid and (HX100_01=Yes or PR150_01=Yes or PR160_01=Yes for person)]
    OR
• Person is covered by Military Health in the current round [Insurance.HISrc=Military and (HX120_01=Yes or PR260_01=Yes or PR270_01=Yes for person)]
    OR
• Person is covered by Gov't-Hospital/Physician in the current round [Insurance.HISrc=GHP and (person selected HX170 or PR310_01=Yes or PR320_01=Yes for person)]
    OR
• Person is covered by private insurance created this round [Insurance.HIPublPriv=Private and PersID exists in covered person array and OrigRnd=current round]
    OR
• Person is covered by private insurance (created in a previous round) with hospital and physician or Medigap benefits and for which they are still covered at least one day during the current round [(Insurance.HIPublPriv=Private) and (PersID exists in covered person array) and (Insurance.HospHI=Yes or Insurance.MedigapHI= Yes) and (OrigRnd <> current round) and (OE20_01=1/DK/RF or OE30_01=1 or OE50_01=Yes for person)]

Note: IHS does not count as covered in any round. After Round 1, private insurance without hospital/physician benefits or Medigap benefits does not count as covered. In the OE section, the coverage question, OE130 may or may not have been asked. If not asked, use preloaded value to check for type of coverage provided by that insurance. Being listed as a covered person on any other source counts as "being covered" during the current round. However, if a person is covered by private insurance and the coverage type is empty, count that as "being covered" during the current round. We want to count anyone with newly added employer, union, direct purchase insurance (anything just created at HX200 in the current round) as covered.

Note: If the RU member had coverage, even if it ended on the first day of the reference

period (i.e., reviewed in Rd 2 and ended that first day), the current process would consider them insured.

Otherwise, if an RU member does not meet any of the above conditions, then that RU member is WITHOUT any source of public or private health insurance (set Person.HasCovFlag=No).

Person.HasCovFlag is set only one time. The first time the RU member passes through BOX_210/LOOP_40.

LOOP_40	**(HX1305)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details: For each element in RU-MEMBERS-ROSTER, ask HX210-END_LP40.

Loop definition: LOOP_40 cycles through all RU members without any source of public or private health insurance during the entire reference period to receive a verification question. This loop cycles on RU members who are NOT a covered person on any insurance (Person.HasCovFlag<>YES).

Note: See BOX_210 for programming definition of Person.HasCovFlag.

HX210	**(HX1310)**	**BLAISE NAME:** HospMDCovg		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TISCOVERED	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

{I have recorded that {you are/{PERSON} is} covered by {Indian Health Service} {and} {health insurance that may not include hospital and physician benefits}./I have recorded that {you are/{PERSON} is} not currently covered by any kind of health plan or health coverage.}

{Were you/Was {PERSON}} covered at any time {since {PERSON'S START DATE}/between {PERSON'S START DATE} and {PERSON'S END DATE}}, even if just for one day, by any {other} kind of health plan or health coverage that included hospital and physician benefits?

Responses:	YES, COVERED	1	HX215	(HX1315)
	NO, NOT COVERED	2	END_LP40	(HX1430)
	REFUSED	RF	END_LP40	(HX1430)
	DON'T KNOW	DK	END_LP40	(HX1430)

Programmer Instructions:	Soft range check: We want to discourage the use of back-up once the FI reaches the verification loop. If the FI presses the UP or LEFT arrow at this item, display the following message: "IT LOOKS LIKE YOU ARE TRYING TO BACK-UP... • IF YOU NEED TO REVIEW RESPONSES – USE F2 AND SELECT INSURANCE. • IF YOU NEED TO ADD INSURANCE FOR {PERSON} – CODE 'YES, COVERED (1)' AND ADD INSURANCE MOVING FORWARD. • IF YOU HAVE ALREADY ADDED INSURANCE DURING THE VERIFICATION LOOP, DO NOT BACK-UP TO TRY TO MAKE CORRECTIONS EARLIER IN THE INTERVIEW – MAKE A COMMENT. • ONCE HX210 IS "ON-PATH," IT ALWAYS REQUIRES A RESPONSE."
Display Instructions:	Display 'I have recorded … physician benefits.' if RU member being looped on is "COVERED BY INDIAN HEALTH SERVICE" [Insurance.HISrc=IHS and (person selected at HX140 or PR290_01=Yes or PR300_01=Yes for person)] or is listed as a covered person for insurance that does not provide hospital and physician or Medigap coverage during the current round [(Insurance.HIPubPriv=Private) and (PersID exists in covered person array) and (Insurance.HospHI <>Yes and Insurance.MedigapHI <>Yes) and (OrigRnd <> current round)]. Otherwise, display 'I have recorded … health coverage.' Display 'Indian Health Service' is RU member being looped on is "COVERED BY INDIAN HEALTH SERVICE" during the current round. Otherwise, use a null display. Display 'health insurance that may not include hospital and physician benefits' if RU member being looped on is listed as a covered person for private insurance that does not include hospital and physician benefits or Medigap benefits. Otherwise, use a null display. Display 'and' if RU member being looped on has both Indian Health Service and private coverage without hospital and physician or Medigap benefits. Otherwise, use a null display. Display 'since {PERSON'S START DATE}' if current round is not the final round of the panel (RndType<>Final). Display 'between {PERSON'S START DATE} and {PERSON'S END DATE}' if current round is the final round of the panel (RndType=Final). Display 'other' if RU member being looped on is "COVERED BY INDIAN HEALTH SERVICE" or is listed as a covered person for insurance that does not provide hospital and physician or Medigap coverage during the current round. Otherwise, use a null display.
Testing/Editing Notes:	After the soft check is invoked and closed, CAPI will back up to the previous item rather than remaining on HX210. Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

HX215   **(HX1315)**   **BLAISE NAME:** SrcHospMDCovg

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCOVERJOBGOVOT	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

For that coverage, {do you/does {PERSON}} get it through a job, the government or state, is it privately purchased, for example through an insurance company, HMO, or {do you/does {he/she}} get it some other way?

IF NEEDED, SAY:
JOB: Former job/Retiree, Union, Spouse/parent's job, Job with the government, COBRA **GOVERNMENT OR STATE:** Medicaid{, also known as {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME}, Medicare (Parts A+B; Part C), Medicare Advantage, Military health coverage (TRICARE, CHAMPVA, VA); State-provided health coverage
PRIVATELY PURCHASED: From an insurance agent, insurance company, HMO, Exchange plan/Marketplace
OTHER: Parent or spouse, Group or association, Medicare Supplements

Responses:				
	JOB (CURRENT OR FORMER)	1	HX225	(HX1317)
	GOVERNMENT OR STATE	2	HX220	(HX1316)
	PRIVATELY PURCHASED	3	BOX_310	(HX1400)
	SOME OTHER WAY	4	BOX_310	(HX1400)

Programmer Instructions: DK and RF disallowed.

Display Instructions: Display ', also known as {STATE NAME FOR MEDICAID},' (substituting the real state name for program) if the state in which interview is being conducted does not use the name 'Medicaid.' For the specific name to use by state, see the plan fill file.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

HX220	**(HX1316)**	**BLAISE NAME:** CovgRelGovtJob		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

Is that coverage related to a job with the government or state?

IF NECESSARY, SAY: Include coverage through former employers and unions, and COBRA plans.

Responses:

YES		1	HX225	(HX1317)
NO		2	HX230	(HX1325)
REFUSED		RF	HX230	(HX1325)
DON'T KNOW		DK	HX230	(HX1325)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

HX225	**(HX1317)**	**BLAISE NAME:** CovgRelMilit

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 (CHAMPTRIHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

Is that plan related to military service in any way?

IF NECESSARY, SAY: Examples of military plans include: VA Care, TRICARE, CHAMPVA, or other military care.

HELP: F1

Responses:	YES	-------------------------------	1	HX260	(HX1365)
	NO	-------------------------------	2	BOX_310	(HX1400)
	REFUSED	-------------------------------	RF	BOX_310	(HX1400)
	DON'T KNOW	-------------------------------	DK	BOX_310	(HX1400)

Programmer Instructions: If 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 CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

HX230   **(HX1325)**   **BLAISE NAME:** CodeAllGovtCovg

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TSOURCECOVERAG	**Answers allowed:** 7	**ArrayMax:**	**Max value:**

☑ Help Available (GovtCovgHelp)   ☑ Show Card (HX-3)   ☐ Look Up File (   )

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

Question Text:

📖 HX-3

From which of the government or state sources on card HX-3 {were you/was {PERSON}} covered by?

ENTER ALL THAT APPLY.

                                                                                    HELP: F1

Responses: MEDICARE 1   BOX_220   (HX1330)
MEDICAID/{STATE NAME FOR   - 2   BOX_220   (HX1330)
MEDICAID}
SCHIP/{STATE NAME FOR SCHIP} 3   BOX_220   (HX1330)
TRICARE 4   BOX_220   (HX1330)
CHAMPVA 5   BOX_220   (HX1330)
VA 6   BOX_220   (HX1330)
OTHER GOVERNMENT PROGRAM   7   BOX_220   (HX1330)
PROVIDING HOSPITAL/PHYSICIAN
BENEFITS

Programmer Instructions:	If coded '1' (MEDICARE), create public insurance through Medicare for this person [set Insurance.HIPublPriv=Public and Insurance.HISrc=Medicare and Insurance.HISrcName=Medicare and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]
	If coded '2' (MEDICAID) and/or '3' (SCHIP), create public insurance through Medicaid/SCHIP for this person [set Insurance.HIPublPriv=Public and Insurance.HISrc=Medicaid and Insurance.HISrcName={Medicaid/{STATE NAME FOR MEDICAID}}/{STATE CHIP NAME}and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]
	If coded '4' (TRICARE), '5' (CHAMPVA), and/or '6' (VA), create public insurance through Military health care for this person [set Insurance.HIPublPriv=Public and Insurance.HISrc=Military and Insurance.HISrcName=Military Health and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd]
	If coded '7' (OTHER GOVERNMENT PROGRAM PROVIDING HOSPITAL/PHYSICIAN BENEFITS), create public insurance through Gov't-Hospital/Physician for this person [set Insurance.PublPriv=Public and Insurance.HISrc =GHP and Insurance.Plcyhldr = PersID and CoverageFlagList.InsSrcN=YES for this PersID] [set Create Q and OrigRnd] Note: Insurance.HISrcName is set later.

Display Instructions:	

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_220 (HX1330)   **Item Type:** Route   **Type Class:** If Then

---

Route Details:	If HX230 is coded '1' (MEDICARE) and person is < 65 years old (or in age categories 1-8), continue with HX240.
	Otherwise, go to BOX_230.

HX240	**(HX1335)**	**BLAISE NAME:** VerfCareDisab		
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 (CareDisabHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

{Do/Does} {you/{PERSON}} receive <u>Medicare</u> because of a medical condition or a disability?

HELP:
F1

Responses:

YES	....	1	BOX_230	(HX1340)
NO	....	2	BOX_230	(HX1340)
REFUSED	....	RF	BOX_230	(HX1340)
DON'T KNOW	....	DK	BOX_230	(HX1340)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
          Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_230	**(HX1340)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If HX230 is coded '2' (MEDICAID) and/or '3' (SCHIP), continue with BOX_240.

          Otherwise, go to BOX_260.

BOX_240   **(HX1345)**   **Item Type:** Route   **Type Class:** If Then

---

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

This instance of the HQ section collects time period coverage detail for the current RU member that just had Medicaid/SCHIP added at HX230. 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
- HX230 is coded '2' (MEDICAID) and/or '3' (SCHIP) for the person being looped on

At completion of the HQ section, continue with BOX_250.

BOX_250   **(HX1350)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If HX_Main.CaidExch <> EMPTY, go to BOX_260.
Otherwise, continue with HX250.

NOTE: Preload.HX_Main.CaidExch is written to HX_Main.CaidExch if Medicaid is confirmed for the RU in the PR section (i.e., PR150_01 or PR160_01 is coded '1' (YES) for at least one RU member). This skip is trying to determine if the exchange coverage question has already been asked (collected at [HX105] or [HX250 during an earlier cycle] or collected [during a previous round at one of these items and Medicaid/SHIP insurance was confirmed in PR]). Exchange coverage is collected only once for Medicaid/SCHIP name per RU and it is collected when the coverage is first created.

___

HX250   **(HX1355)**   **BLAISE NAME:** VerfCaidStExch

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 FIRST MIDDLE AND LAST NAME}

Question Text:

Is the coverage with <u>Medicaid</u>{, {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME} through {STATE EXCHANGE NAME-A} {, [which may also be known as {ALIAS B} {or {ALIAS C}}]}?

Responses:

YES	-------------------------	1	BOX_260	(HX1360)
NO	-------------------------	2	BOX_260	(HX1360)
REFUSED	-------------------------	RF	BOX_260	(HX1360)
DON'T KNOW	-------------------------	DK	BOX_260	(HX1360)

Programmer Instructions: If coded '1' (YES), set HX_Main.CaidExch = Yes. Else, set HX_Main.CaidExch=No.

Display Instructions:

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

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

Display ', [which may also be known as {ALIAS B} {or {ALIAS C}}]' if there is more than one exchange name associated with the state in which interview is being conducted.

Display 'or {ALIAS C}' if there are three exchange names associated with the state in which interview is being conducted.

For 'STATE EXCHANGE NAME-A', 'ALIAS B', and 'ALIAS C', display the exchange name associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

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BOX_260	**(HX1360)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If HX230 is coded '4' (TRICARE), '5' (CHAMPVA), and/or '6' (VA), continue with HX260.

Otherwise, go to BOX_280.

HX260	**(HX1365)**	**BLAISE NAME:** CodeAllVerfMilitPlan		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TMILITARYCOVER	**Answers allowed:** 6	**ArrayMax:**	**Max value:**

☑ Help Available (CHAMPTRIHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

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

Question Text:

What types of military health coverage {do/does} {you/{PERSON}} have? {Do you/Does {he/she}} have TRICARE, CHAMPVA, or VA (Veterans Affairs)?

ENTER ALL THAT APPLY.

HELP: F1

Responses:

TRICARE	------------------------------	1	BOX_270	(HX1370)
CHAMPVA	------------------------------	2	BOX_270	(HX1370)
VA (VETERANS AFFAIRS)	------------------	3	BOX_270	(HX1370)

Programmer Instructions: DK and RF disallowed.

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_270	**(HX1370)**	**Item Type:** Route	**Type Class:** If Then

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

This instance of the HQ section collects time period coverage detail for the current RU member that just had Military Health added at HX230. 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
- HX225 is coded '1' (YES) or HX230 is coded '4' (TRICARE), '5' (CHAMPVA), and/or '6' (VA) for the person being looped on

At completion of the HQ section, continue with BOX_280.

BOX_280	**(HX1375)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If HX230 is coded '7' (OTHER GOVERNMENT PROGRAM PROVIDING HOSPITAL/PHYSICIAN BENEFITS) and HX_Main.GHPProgName<>EMPTY, set Insurance.HISrcName to Insurance.HISrcName for that person's GHP coverage and then go to BOX_290.

If HX230 is coded '7' (OTHER GOVERNMENT PROGRAM PROVIDING HOSPITAL/PHYSICIAN BENEFITS) and HX_Main.GHPProgName=Empty, go to HX270.

Otherwise, go to END_LP40.

NOTE: Preload.HX_Main.GHPProgName is written to HX_Main.GHPProgName if Government-Hospital/Physician coverage is confirmed for the RU in the PR section (i.e., PR310_01 or PR320_01 is coded '1' (YES) for at least one RU member). This skip is trying to determine if there is already a program name linked to the Gov't Hospital/Physician insurance (collected at [HX160] or [HX270 during an earlier cycle] or collected [during a previous round at one of these items and Gov't Hospital/Physician insurance was confirmed in PR]). There can only be one Gov't Hospital/Physician program name per RU and it is collected when the coverage is first created.

HX270	**(HX1380)**	**BLAISE NAME:** VerfGovProgName		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	String	**Field Size:** 30		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

What is the name of the program from any state or local government agency which <u>provided hospital and physician benefits</u>?

Responses: --- 1   BOX_290   (HX1385)

| **Programmer Instructions:** | Set Insurance.HISrcName= 'GOVT-HOS/PHY-{PROGRAM NAME FROM HX270}'.

Set HX_Main.GHPProgName = VerfGovProgName

Note: 'GOVT-HOS/PHY-{PROGRAM NAME FROM HX270}' substituting 17 characters of the entry at HX270 should be used for the insurance source name in the context header (where appropriate). |
|---|---|

Display Instructions:

| **Testing/Editing Notes:** | Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25] |
|---|---|

BOX_290	**(HX1385)**	**Item Type:** Route	**Type Class:** If Then

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

This instance of the HQ section collects time period coverage detail for the current RU member that just had Govt-Hospital/Physician added at HX230. The grid for the HQ section should be preloaded with insurance that meets both of the following conditions:
• Insurance source is Govt-Hospital/Physician (Insurance.HISrc = GHP)
   AND
• HX230 is coded '7' (OTHER GOVERNMENT PROGRAM PROVIDING HOSPITAL/PHYSICIAN BENEFITS) for the person being looped on

At completion of the HQ section, continue with BOX_300. |
|---|---|

BOX_300	**(HX1390)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If HX_Main.GHPExchange<> EMPTY, go to END_LP40.

Otherwise, continue with HX280.

NOTE: Preload.HX_Main.GHPExchange is written to HX_Main.GHPExchange if Government-Hospital/Physician is confirmed for the RU in the PR section (i.e., PR310_01 or PR320_01 is coded '1' (YES) for at least one RU member). This skip is trying to determine if the exchange coverage question has already been asked (collected at [HX180] or [HX280 during an earlier cycle] or collected [during a previous round at one of these items and Gov't Hospital/Physician insurance was confirmed in PR]). Exchange coverage is collected only once for Gov't Hospital/Physician name per RU and it is collected when the coverage is first created.

HX280	**(HX1395)**	**BLAISE NAME:** VerfGovProgStExch		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

Is the coverage with {PROGRAM NAME FROM HX270}, the program sponsored by a state or local government agency which provided hospital and physician benefits, through {STATE EXCHANGE NAME-A} {, [which may also be known as {ALIAS B} {or {ALIAS C}}]}?

Responses:	YES	1	END_LP40	(HX1430)
	NO	2	END_LP40	(HX1430)
	REFUSED	RF	END_LP40	(HX1430)
	DON'T KNOW	DK	END_LP40	(HX1430)

Programmer Instructions:	If coded '1' (YES), set HX_Main.GHPExchange = Yes. Else, set HX_Main.GHPExchange=No.
Display Instructions:	For '{PROGRAM NAME FROM HX270}'', display the text entry from HX270.
	Display ', [which may also be known as {ALIAS B} {or {ALIAS C}}]' if there is more than one exchange name associated with the state in which interview is being conducted.
	Display 'or {ALIAS C}' if there are three exchange names associated with the state in which interview is being conducted.
	For 'STATE EXCHANGE NAME-A', 'ALIAS B' and 'ALIAS C' display the exchange name associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_310   **(HX1400)**   **Item Type:** Route   **Type Class:** If Then

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Route Details:	Check health insurance in RU. If any existing private health insurance coverage (including Employer, Union, Direct Purchase) for anyone in the RU, that is, at least one insurance on the insurance array meets one of the following conditions.

• Private insurance created this round [Insurance.HIPubPriv=Private and OrigRnd=current round] before this cycle of HX LOOP_40 for this RU
OR
• Private insurance (created in a previous round) and for which at least one person is still covered at least one day during the current round [(Insurance.HIPubPriv=Private) and (at least one PersID exists in covered person array) and (OrigRnd <> current round) and (OE20 _01 or OE30_01=1 or OE50_01=Yes for that person in the covered person array)]

continue with HX290.

Otherwise, go to BOX_330.

HX290	**(HX1405)**	**BLAISE NAME:** ConfCovg	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCONTCOVG	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

I have recorded health insurance for other members of this household. Was the health coverage {you/{PERSON} had {since {PERSON'S START DATE}/between {PERSON'S START DATE} and {PERSON'S END DATE}} one of these?

USING LIST BELOW, REVIEW SOURCES OF HEALTH INSURANCE ALREADY CREATED FOR OTHER RU MEMBERS.

IF {PERSON} COVERED BY EXISTING INSURANCE, SELECT THAT INSURANCE.

IF {PERSON} NOT COVERED BY ANY OF THESE EXISTING INSURANCE SOURCES, SELECT 'INSURANCE NOT LISTED' TO ADD NEW INSURANCE.

Responses:	{POLICYHOLDER} {INSURANCE SOURCE} {PLAN} {COVERED RU MEMBERS}1	------ 1	BOX_320	(HX1410)
	{POLICYHOLDER} {INSURANCE SOURCE} {PLAN} {COVERED RU MEMBERS}2	------ 2	BOX_320	(HX1410)
	{POLICYHOLDER} {INSURANCE SOURCE} {PLAN} {COVERED RU MEMBERS}3	------ 3	BOX_320	(HX1410)
	{POLICYHOLDER} {INSURANCE SOURCE} {PLAN} {COVERED RU MEMBERS}4	------ 4	BOX_320	(HX1410)
	{POLICYHOLDER} {INSURANCE SOURCE} {PLAN} {COVERED RU MEMBERS}N	------ 5	BOX_320	(HX1410)
	INSURANCE NOT LISTED	 99	BOX_330	(HX1411)

Programmer Instructions:	RF/DK not allowed.
	If not already included in the covered person array, add the person being looped on to the covered person array for the insurance source selected.
	Note: Since the persons is being added to an existing insurance source, it is not necessary to set the create Q and OrigRnd here. Those should have been set elsewhere.
Display Instructions:	Display the roster in non-proportional text.
	Roster 1 - Report Roster Definition: This item displays sources of insurance in the insurance array.
	Roster Filter: Display only private insurance that meets one of the of the following two conditions: • Private insurance created this round [Insurance.HIPubPriv=Private and OrigRnd=current round] OR • Private insurance (created in a previous round) and for which at least one person is still covered at least one day during the current round [(Insurance.HIPubPriv=Private) and (at least one PersID exists in covered person array) and (OrigRnd <> current round) and (OE20_01=1/DK/RF or OE30_01=1 or OE50_01=Yes for that person in the covered person array)]
	Display underlined column headers as part of the info pane.
	Display eligible insurance formatted into the following roster columns: Column Header #1: Policyholder Display the first 25 characters of the full name (Person.FullName) of policyholder for this insurance source (Insurance.Plcyhldr). This includes the full name of any RU or DU member selected as the policyholder. If the policyholder is outside of the DU, display the policyholder name as 'PLCYHLDR NOT IN DU-' followed by the first 6 characters of the entry at HP100. If the policyholder is deceased, display the policyholder name as 'PLCYHLDR DECEASED-' followed by the first 7 characters of the entry at HP110.
	Column Header #2: Insurance Source Display the first 25 characters of the name of the insurance source; e.g., job, union, group name (Insurance.HISrcName)
	Column Header #3: Plan Display the first 18 characters of the plan name of the insurance source (Insurance.Insurer). Leave cell blank if plan name is empty.
	Column Header #4: Covered RU Members Display the first 11 characters of the first names (Pers.FName) of all current RU members listed in the covered person array for this insurance source, excluding any DU member policyholder. Separate each name with a comma. Do not substitute "you" for respondent. Allow up to 38 characters for this column (which would allow for the first 3 covered persons in the first row and then next 3-6 in the second row).
	Display 'since {START DATE}' if current round is not the final round of the panel (RndType<> Final). Display 'between {START DATE} and {END DATE}' if current round is the final round of

the panel (RndType=Final).

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_320   **(HX1410)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: Ask the time period covered detail (HQ) section for this person if person is not already listed in the covered person array for the insurance selected.

This instance of the HQ section collects time period coverage detail for the person being looped on who was just selected as a covered person for the private insurance selected at HX290. The grid for the HQ section should be preloaded with insurance meets both of the following conditions:
• Insurance source selected at HX290 and
• Person is being looped on.

At completion of the HQ section or if person already listed in the covered person array for the insurance selected, go to END_LP40.

BOX_330   **(HX1411)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If HX225 is coded '2' (NO), 'DK' (DON'T KNOW), or 'RF' (REFUSED), continue with BOX_ 340.

Otherwise, go to HX300.

BOX_340   **(HX1412)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If HX225 is coded '2' (NO), 'DK' (DON'T KNOW), or 'RF' (REFUSED), create direct purchase insurance with the type "employer or union" for this person [set Insurance.HIPublPriv=Private and Insurance.HISrc=Direct Purchase and Insurance.DirectPurchTp= 1 (CurrPrevEmployerUnion) [set Create Q and OrigRnd]. Then ask the Private Health Insurance detail (HP) section for the direct purchase insurance with the type 'employer or union' just created.
At completion of HP section, go to END_LP40.

HX300   **(HX1415)**   **BLAISE NAME:** DirectPurchTp

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THEALTHINSCOV	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (OthHICovgHelp)   ☑ Show Card (HX-2)   ☐ Look Up File (   )

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

Question Text:

📖HX-2

From which source on card HX-2 did {you/{PERSON}} purchase or obtain this health insurance coverage?

HELP: F1

Responses:	EMPLOYER OR UNION (THROUGH ANYONE'S CURRENT OR PREVIOUS JOB)	1	BOX_350	(HX1425)
	DIRECTLY FROM {STATE EXCHANGE NAME-A} OR FEDERAL MARKETPLACE	2	BOX_350	(HX1425)
	DIRECTLY FROM AN INSURANCE COMPANY OR AGENT/BROKER	3	BOX_350	(HX1425)
	FROM A GROUP OR ASSOCIATION	4	BOX_350	(HX1425)
	UNDER A PLAN OF SOMEONE NOT LIVING HERE	5	BOX_350	(HX1425)
	OTHER SOURCE	91	HX300OS	(HX1420)
	REFUSED	RF	BOX_350	(HX1425)
	DON'T KNOW	DK	BOX_350	(HX1425)

Programmer Instructions:	When source is selected, create direct purchase insurance with the type selected at HX300 for this person [set Insurance.HIPublPriv=Private and Insurance.HISrc=DirectPurchase and Insurance.DirectPurchTp=type selected] [set Create Q and OrigRnd]

Display Instructions:	Display HX300 and HX300OS on the same form pane screen.
	For 'STATE EXCHANGE NAME-A' display exchange name 'A' associated with the state in which interview is being conducted. For the specific name to use by state, see the plan fill file.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

HX300OS   **(HX1420)**   **BLAISE NAME:** DirectPurchTpOS

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 MIDDLE AND LAST NAME}

Question Text:

SPECIFY: OTHER SOURCE

Responses:	---	1	BOX_350	(HX1425)

Programmer Instructions:	Refused and Don't Know disallowed.

Display Instructions:	Display HX300 and HX300OS on the same form pane screen.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_40[1..25]

BOX_350   **(HX1425)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: Ask Private Health Insurance detail (HP) section for the response category selected at HX300.

At completion of the HP section, continue with END_LP40.

END_LP40   **(HX1430)**   **Item Type:** Route   **Type Class:** End Loop

---

Route Details: Cycle on next person that meets the conditions stated in the loop definition.

If no more persons meet the stated conditions, end LOOP_40 and continue with BOX_360.

BOX_360   **(HX1435)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If any RU member has Medicare as a source of insurance during the current round (Insurance.HISrc=Medicare), continue with BOX_370.

Otherwise, go to BOX_390.

BOX_370   **(HX1440)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If round 1, go to LOOP_50.

Otherwise, continue with BOX_380.

BOX_380	**(HX1445)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If not round 1, continue with LOOP_50 only for RU members where Medicare was recorded as being received this round. That is, continue with LOOP_50 only if there is at least one insurance that is Medicare and was created this round (Insurance.HISrc=Medicare and OrigRnd=current round).

Otherwise, go to BOX_390.

LOOP_50	**(HX1450)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details: For each insurance, ask HX310- END_LP50.

Loop definition: LOOP_50 collects Medicare card and managed care information for RU members covered by Medicare. This loop cycles on insurance that meets the following conditions:

If round 1:
• Insurance source is Medicare (Insurance.HISrc=Medicare)

If not round 1:
• Insurance source is Medicare (Insurance.HISrc=Medicare)
  AND
• Medicare was created this round (OrigRnd=current round)

HX310   **(HX1455)**   **BLAISE NAME:** CareCard

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCARECARD	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

CODE WITHOUT ASKING IF ANSWER IS KNOWN.

Can you please take out {your/{PERSON}' s} Medicare card?

We do not need {your/his/her} Medicare number, but would like to record the exact date {your/his/her} Medicare coverage became effective and what type of coverage {you/he/she} {have/has} through Medicare.

Responses:	CARD AVAILABLE	-----------------	1	HX320	(HX1460)
	CARD NOT AVAILABLE	-----------------	2	HX360_01	(HX1490)
	REFUSED	-----------------	RF	HX360_01	(HX1490)
	DON'T KNOW	-----------------	DK	HX360_01	(HX1490)

Display Instructions:

Testing/Editing Notes:
Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX320	**(HX1460)**	**BLAISE NAME:** CodeAllCareCardTp		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCARDTYPE	**Answers allowed:** 3	**ArrayMax:**	**Max value:**

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

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

Question Text:

Is that card a regular Medicare card, a Railroad Retirement Board card, or some other Medicare card?

Responses:
MEDICARE CARD (RED, WHITE AND BLUE)	1
RAILROAD RETIREMENT BOARD CARD (RED, WHITE AND BLUE)	2
SOME OTHER CARD	3

Programmer Instructions:

If coded '1' (MEDICARE CARD) or '2' (RAILROAD RETIREMENT BOARD CARD), alone or in combination with any other code continue with HX330_01.

If coded '3' (SOME OTHER CARD) alone, go to HX360_01.

Note: HX320 is a multi-select item, but the "ENTER ALL THAT APPLY." Instruction is purposely left off the screen.

DK and RF disallowed.

Display Instructions:

Testing/Editing Notes:
Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX330_01   **(HX1465)**   **BLAISE NAME:** CareEffMM

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1
Type Class:	Integer	**Field Size:** 2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 12

☐ Help Available (   )   ☑ Show Card (HX-1)   ☐ Look Up File (   )

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

Question Text:

📖 HX-1

Please tell me the effective date listed on the card.

ENTER MONTH

Responses:

	1	HX330_02	(HX1470)
REFUSED	RF	HX330_02	(HX1470)
DON'T KNOW	DK	HX330_02	(HX1470)

Display Instructions: Display HX330_01, HX330_02, and HX330_03 on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX330_02   **(HX1470)**   **BLAISE NAME:** CareEffDD

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1
Type Class:	Integer	**Field Size:** 2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 31

☐ Help Available (   )   ☑ Show Card (HX-1)   ☐ Look Up File (   )

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

Question Text:

📖 HX-1

[Please tell me the effective date listed on the card.]

ENTER DAY

Responses:

	--------------------------------------- 1	HX330_03	(HX1475)
REFUSED	--------------------------------------- RF	HX330_03	(HX1475)
DON'T KNOW	--------------------------------------- DK	HX330_03	(HX1475)

Display Instructions: Display show card icon and reference and question text in lighter "grayed out" text.

Display HX330_01, HX330_02, and HX330_03 on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX330_03   **(HX1475)**   **BLAISE NAME:** CareEffYYYY

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1900
Type Class:	Integer	**Field Size:** 4		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 2100

☐ Help Available (   )   ☑ Show Card (HX-1)   ☐ Look Up File (   )

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

Question Text:

📖 HX-1

[Please tell me the effective date listed on the card.]

ENTER YEAR

Responses:				
	....	1	HX390	(HX1510)
REFUSED	....	RF	HX390	(HX1510)
DON'T KNOW	....	DK	HX390	(HX1510)

Programmer Instructions:	Hard checks:
	1. Check effective date entered at HX330_01-HX330_03. Date entered must be on or before (i.e., < or =) the person's reference period end date for this round (EndRefM, EndRefD). In the final round of the panel (RndType=Final), that is typically Dec. 31. If not, display the following message: "EFFECTIVE DATE MUST BE BEFORE {PERSON'S REFERENCE PERIOD END DATE}. VERIFY AND RE-ENTER."
	Soft range check:
	Medicare effective date entered at HX330_01-HX330_03 must be on or after (= or >) birth date of person. If not, display the following message: "UNLIKELY RESPONSE. EFFECTIVE DATE IS PRIOR TO {PERSON}'S DOB {MM/DD/YYYY}. VERIFY AND CORRECT EFFECTIVE DATE. If any part of birth date is unknown, soft check is not invoked.
	If Round 1 and if effective date is on or before January 1, {YEAR}, where 'year' is the first calendar year of the panel (FirstPanYear), set SimplePerson.CovdJan1=Yes.
Display Instructions:	Display show card icon and reference and question text in lighter "grayed out" text.
	Display HX330_01, HX330_02, and HX330_03 on the same form pane.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX360_01   **(HX1490)**   **BLAISE NAME:** CareCovBegMM

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1
Type Class:	Integer	**Field Size:** 2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 12

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

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

Question Text:

When did {your/{PERSON}'s} Medicare coverage start?

ENTER MONTH

Responses:		1	HX360_02	(HX1495)
	REFUSED	RF	HX360_02	(HX1495)
	DON'T KNOW	DK	HX360_02	(HX1495)

Display Instructions: Display HX360_01 and HX360_02 on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX360_02   **(HX1495)**   **BLAISE NAME:** CareCovBegYYYY

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1900
Type Class:	Integer	**Field Size:** 4		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 2100

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

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

Question Text:

[When did {your/{PERSON}'s} Medicare coverage start?]

ENTER YEAR

Responses:		1		
	REFUSED	RF	HX370	(HX1500)
	DON'T KNOW	DK	HX370	(HX1500)

Programmer Instructions:	If HX360_02 is equal to Panel Year 1 (FirstPanYear) and HX360_01 is coded 'RF' (REFUSED) or 'DK' (DON'T KNOW), continue with HX370. Otherwise (when there is a value for year), go to HX380. If Round 1 and effective date entered where: • Year entered at HX360_02 is before the first calendar year of the panel (CareCovBegYYYY < FirstPanYear), then set SimplePerson.CovdJan1=Yes. • Year entered at HX360_02 is equal to the first calendar year of the panel (CareCovBegYYYY = FirstPanYear) and month entered at HX360_01 = Jan (1), then set SimplePerson.CovdJan1 =Yes. Hard check: Check effective date entered at HX360_01 and HX360_02. Date entered must be on or before (i.e., < or =) the person's reference period end date for this round (EndRefM, EndRefD). In the final round of the panel (RndType=Final), that is typically Dec. 31. If not, display the following message: "EFFECTIVE DATE MUST BE BEFORE {PERSON'S REFERENCE PERIOD END DATE}. VERIFY AND RE-ENTER." Soft range check: Medicare effective date entered at HX360_01 and HX360_02 must be on or after (= or >) birth date of person. If not, display the following message: "UNLIKELY RESPONSE. EFFECTIVE DATE IS PRIOR TO {PERSON}'S DOB {MM/DD/YYYY}. VERIFY AND CORRECT EFFECTIVE DATE. If any part of birth date is unknown, hard check is not invoked.
Display Instructions:	Display question text in lighter "grayed out" text. Display HX360_01 and HX360_02 on the same form pane.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX370	**(HX1500)**	**BLAISE NAME:** CareCovJan1		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

Did {you/he/she} have Medicare coverage on January 1, {YEAR}?

Responses:	YES	1	HX380	(HX1505)
	NO	2	HX380	(HX1505)
	REFUSED	RF	HX380	(HX1505)
	DON'T KNOW	DK	HX380	(HX1505)

Programmer Instructions: If Round 1 and if HX370 coded '1' (YES), set SimplePerson.CovdJan1=Yes.

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX380   **(HX1505)**   **BLAISE NAME:** CareCardConf

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 (HX-1)   ☐ Look Up File (   )

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

Question Text:

📖 HX-1

{Do/Does} {you/{PERSON}} have a Medicare card that looks like this?

Responses:

YES	1	HX390	(HX1510)
NO	2	HX390	(HX1510)
REFUSED	RF	HX390	(HX1510)
DON'T KNOW	DK	HX390	(HX1510)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

Full Detail Spec

HX390	**(HX1510)**	**BLAISE NAME:** CareMAMC		
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)   ☐ Show Card (   )   ☐ Look Up File (   )

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	1	HX400	(HX1515)
	NO	2	HX470	(HX1555)
	REFUSED	RF	HX470	(HX1555)
	DON'T KNOW	DK	HX470	(HX1555)

Display Instructions: Display '{Are/Is} {you/{PERSON}} currently' if current round is not the final round of the panel (RndType<>Final). Display 'As of {PERSON'S END DATE}, {were/was} {you/{PERSON}}' if current round is the final round of the panel (RndType=Final).

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX400	**(HX1515)**	**BLAISE NAME:** CareMCName		
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 MIDDLE AND LAST NAME}

Question Text:

What {is/was} the name of {your/{PERSON}'s} Medicare managed care plan {as of {PERSON'S END DATE}}?

ENTER PLAN NAME

Responses:				
	------------------------------	1	HX410	(HX1520)
REFUSED	------------------------------	RF	HX410	(HX1520)
DON'T KNOW	------------------------------	DK	HX410	(HX1520)

Programmer Instructions: Set Insurance.Insurer to HX400.

Display Instructions: Display 'is' if current round is not the final round of the panel (RndType<>Final). Display 'was' if current round is the final round of the panel (RndType=Final).

Display 'as of {PERSON'S END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX410	**(HX1520)**	**BLAISE NAME:** CareMCPmed		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

{Do/Does}/Did} {you/{PERSON}} have prescribed medicine coverage through {{NAME OF PLAN FROM HX400}/ {your/his/her} Medicare managed care plan} {as of {PERSON'S END DATE}}?

Responses:

YES	----------------------	1	HX415	(HX1523)
NO	----------------------	2	HX415	(HX1523)
REFUSED	----------------------	RF	HX415	(HX1523)
DON'T KNOW	----------------------	DK	HX415	(HX1523)

Programmer Instructions:

Display Instructions:

Display '{Do/Does}' if current round is not the final round of the panel (RndType<>Final).
Display 'Did' if current round is the final round of the panel (RndType=Final).

Display '{NAME OF PLAN FROM HX400}' if a plan name was coded at HX400. Display '{your/his/her} Medicare managed care plan' if HX400 is coded RF (REFUSED) or DK (DON'T KNOW).

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Display 'as of {PERSON'S END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX415	**(HX1523)**	**BLAISE NAME:** CareMCDen		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

{Does/Did} {{NAME OF PLAN FROM HX400}/{your/his/her} Medicare managed care plan} pay for any of the costs for dental care{ as of {PERSON'S END DATE}}?

Responses:	YES	-------------------------------------	1
	NO	-------------------------------------	2
	REFUSED	-------------------------------------	RF
	DON'T KNOW	-------------------------------------	DK

Programmer Instructions: If [current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross)], continue with HX420. Otherwise, go to END_LP50.

Display Instructions:

Display 'Does' if current round is not the final round of the panel (RndType<>Final).

Display 'Did' if current round is the final round of the panel (RndType=Final).

Display '{NAME OF PLAN FROM HX400}' if a plan name was coded at HX400.

Display '{your/his/her} Medicare managed care plan' if HX400 is coded RF (REFUSED) or DK (DON'T KNOW).

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Display 'as of {PERSON'S END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

HX420	**(HX1525)**	**BLAISE NAME:** CarePayPrem		
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 (   )

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 the family) pay anything else for {the coverage with {{NAME OF PLAN FROM HX400}/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		1	HX430	(HX1530)
	NO		2	END_LP50	(HX1590)
	REFUSED		RF	END_LP50	(HX1590)
	DON'T KNOW		DK	END_LP50	(HX1590)

Display Instructions: Display 'the coverage with {NAME OF PLAN FROM HX400}' if a Medicare plan name was entered at HX400. Display 'this Medicare managed care plan' if HX400 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW).

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX430   **(HX1530)**   **BLAISE NAME:** HowCarePaid

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THOWPAYMCARE	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

How {do/does} {you/{PERSON}} pay for {your/his/her} {{NAME OF PLAN FROM HX400}/Medicare managed care} premium?

IF NECESSARY, SAY: Is the Medicare Advantage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?

Responses:

DEDUCTED FROM SOCIAL SECURITY	1	HX440	(HX1535)
PAY DIRECTLY	2	HX440	(HX1535)
BOTH	3	HX440	(HX1535)
REFUSED	RF	END_LP50	(HX1590)
DON'T KNOW	DK	END_LP50	(HX1590)

Display Instructions:

Display '{NAME OF PLAN FROM HX400}' if a Medicare plan name was entered at HX400. Display 'Medicare managed care' if HX400 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW).

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX440   **(HX1535)**   **BLAISE NAME:** CareCovgAmt

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 0
Type Class:	Real	**Field Size:** 9,2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 999999.99

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

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

Question Text:

How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} {NAME OF PLAN FROM HX400} plan?

IF RESPONDENT IS NOT SURE, DO NOT PROBE. CODE 'DON'T KNOW'.

ENTER AMOUNT

Responses:

	---	1	HX450	(HX1540)
REFUSED	---	RF	HX460	(HX1550)
DON'T KNOW	-----------------------------------	DK	HX460	(HX1550)

Programmer Instructions: Allow for entry of dollars and cents.

Display Instructions: Display HX440, HX450 and HX450OS on the same form pane.

Display 'is {your/{PERSON}'s} Social Security deduction' if HX430 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if HX430 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Display '{NAME OF PLAN FROM HX400}' if a Medicare plan name was entered at HX400. Otherwise (i.e., if HX400 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX450	**(HX1540)**	**BLAISE NAME:** CareCovgUnit		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCOVRUNIT	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

Is that per year, per month, per week, or what?

UNIT OF COVERAGE:

Responses:

PER YEAR	1	END_LP50	(HX1590)
EVERY 3 MONTHS (QUARTERLY)	2	END_LP50	(HX1590)
EVERY 2 MONTHS (BIMONTHLY)	3	END_LP50	(HX1590)
PER MONTH	4	END_LP50	(HX1590)
PER WEEK	5	END_LP50	(HX1590)
EVERY 2 WEEKS (BIWEEKLY)	6	END_LP50	(HX1590)
2 TIMES PER YEAR (SEMI-ANNUALLY)	7	END_LP50	(HX1590)
2 TIMES PER MONTH (SEMI-MONTHLY)	8	END_LP50	(HX1590)
OTHER	91	HX450OS	(HX1545)
REFUSED	RF	END_LP50	(HX1590)
DON'T KNOW	DK	END_LP50	(HX1590)

Display Instructions: Display HX440, HX450 and HX450OS on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX450OS   **(HX1545)**   **BLAISE NAME:** CareCovgUnitOS

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 (   )

Question Text:

SPECIFY: UNIT OF COVERAGE

Responses:

	....	1	END_LP50	(HX1590)
REFUSED	....	RF	END_LP50	(HX1590)
DON'T KNOW	....	DK	END_LP50	(HX1590)

Display Instructions: Display HX440, HX450 and HX450OS on the same form pane.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX460   **(HX1550)**   **BLAISE NAME:** CareCovgRng

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TMCARECARDRNG	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☐ Help Available (   )   ☑ Show Card (HX-4)   ☐ Look Up File (   )

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

Question Text:

{PLAN NAME: {NAME OF PLAN FROM HX400}}

📖 HX-4

Which category on card HX-4 best indicates the cost of this plan per month?

Responses:

$1 - $50	1	END_LP50	(HX1590)
$51 - $100	2	END_LP50	(HX1590)
$101 - $200	3	END_LP50	(HX1590)
$201 - $300	4	END_LP50	(HX1590)
$301 OR MORE	5	END_LP50	(HX1590)
REFUSED	RF	END_LP50	(HX1590)
DON'T KNOW	DK	END_LP50	(HX1590)

Display Instructions:

Display 'PLAN NAME: {NAME OF PLAN FROM HX400}' if a Medicare plan name was entered at HX400. Otherwise (i.e., if HX400was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW)), use a null display.

Display the actual plan name entered at HX400 for 'NAME OF PLAN FROM HX400' if a plan name was entered.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX470   **(HX1555)**   **BLAISE NAME:** CarePartD

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 (PartDHelp)   ☐ Show Card ( )   ☐ Look Up File ( )

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

Question Text:

{{Are/Is}/{Were/Was}} {you/{PERSON}} enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan {as of {PERSON'S END DATE}}?

                                                 HELP: F1

Responses:	YES	....	1
	NO	....	2
	REFUSED	....	RF
	DON'T KNOW	....	DK

Programmer Instructions:

If coded '1' (YES) and if
current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross)],
Continue with HX480.

Otherwise, go to END_LP50.

Display Instructions:

Display '{Are/Is}' if current round is not the final round of the panel (RndType<>Final).

Display '{Were/Was}' if current round is the final round of the panel (RndType=Final).

Display 'as of {PERSON'S END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

Full Detail Spec

HX480	**(HX1560)**	**BLAISE NAME:** PayPartD	
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 (   )

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 the family) pay anything else for {your/his/her} Medicare Prescription Drug Plan (also known as Part D)?

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

                                                                                              HELP: F1

Responses:

YES	---	1	HX490	(HX1565)
NO	---	2	END_LP50	(HX1590)
REFUSED	---	RF	END_LP50	(HX1590)
DON'T KNOW	---	DK	END_LP50	(HX1590)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX490	**(HX1565)**	**BLAISE NAME:** HowPayPartD		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THOWPAYMCARE	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

How {do/does} {you/{PERSON}} pay for {your/his/her} Part D premium?

IF NECESSARY, SAY: Is the Medicare drug coverage premium paid through {your/his/her} Social Security check, paid directly to the provider, or paid both ways?

Responses:

DEDUCTED FROM SOCIAL SECURITY	1	HX500	(HX1570)
PAY DIRECTLY	2	HX500	(HX1570)
BOTH	3	HX500	(HX1570)
REFUSED	RF	END_LP50	(HX1590)
DON'T KNOW	DK	END_LP50	(HX1590)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX500	**(HX1570)**	**BLAISE NAME:** AmtPayPartD	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 0
Type Class:	Real	**Field Size:** 9,2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 999999.99

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

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

Question Text:

How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} Part D plan?

IF RESPONDENT IS NOT SURE, DO NOT PROBE. CODE 'DON'T KNOW'.

ENTER AMOUNT

Responses:

....	1	HX510	(HX1575)
REFUSED	RF	HX520	(HX1585)
DON'T KNOW	DK	HX520	(HX1585)

Programmer Instructions: Allow for the entry of dollars and cents.

Display Instructions: Display HX500, HX510 and HX510OS on the same form pane.

Display 'is {your/{PERSON}'s} Social Security deduction' if HX490 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if HX490 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX510	**(HX1575)**	**BLAISE NAME:** UnitPayPartD		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCOVRUNIT	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

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

Question Text:

[How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} Part D plan?]

Is that per year, per month, per week, or what?

ENTER UNIT OF COVERAGE:

Responses:	PER YEAR	1	END_LP50	(HX1590)
	EVERY 3 MONTHS (QUARTERLY)	2	END_LP50	(HX1590)
	EVERY 2 MONTHS (BIMONTHLY)	3	END_LP50	(HX1590)
	PER MONTH	4	END_LP50	(HX1590)
	PER WEEK	5	END_LP50	(HX1590)
	EVERY 2 WEEKS (BIWEEKLY)	6	END_LP50	(HX1590)
	2 TIMES PER YEAR (SEMI-ANNUALLY)	7	END_LP50	(HX1590)
	2 TIMES PER MONTH (SEMI-MONTHLY)	8	END_LP50	(HX1590)
	OTHER	91	HX510OS	(HX1580)
	REFUSED	RF	END_LP50	(HX1590)
	DON'T KNOW	DK	END_LP50	(HX1590)

Display Instructions:	Display HX500, HX510 and HX510OS on the same form pane.
	Display the "How much{is {your/{PERSON}'s} Social Security…" in brackets and grayed out text.
	Display 'is {your/{PERSON}'s} Social Security deduction' if HX490 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if HX490 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX510OS	**(HX1580)**	**BLAISE NAME:** UnitPayPartDOS		
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 MIDDLE AND LAST NAME}

Question Text:

[How much {is {your/{PERSON}'s} Social Security deduction/{do/does} {you/{PERSON}} pay in premiums} for {your/his/her} Part D plan?]

SPECIFY: OTHER UNIT OF COVERAGE

Responses:

		1	END_LP50	(HX1590)
REFUSED		RF	END_LP50	(HX1590)
DON'T KNOW		DK	END_LP50	(HX1590)

Display Instructions:

Display HX500, HX510 and HX510OS on the same form pane.

Display the "How much{is {your/{PERSON}'s} Social Security…" in brackets and grayed out text.

Display 'is {your/{PERSON}'s} Social Security deduction' if HX490 is coded '1' (DEDUCTED FROM SOCIAL SECURITY). Display '{do/does} {you/{PERSON}} pay in premiums' if HX490 is coded '2' (PAY DIRECTLY) or '3' (BOTH).

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

HX520   **(HX1585)**   **BLAISE NAME:** RngPayPartD

Item Type: Question   **Field kind:** Datafield   **ArrayMin:**   **Min value:**
Type Class: Enumerated   **Field Size:**
Answer Type: TMCAREPRTDRNG **Answers allowed:** 1   **ArrayMax:**   **Max value:**

☐ Help Available (   )   ☑ Show Card (HX-5)   ☐ Look Up File (   )

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

Question Text:

📖 HX-5

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

Responses: $1 - $30 1
                     $31 - $60 2
                     $61 - $90 3
                     $91 - $120 4
                     $121 OR MORE 5
                     REFUSED .... RF
                     DON'T KNOW .... DK

**Display
Instructions:**

**Testing/Editing
Notes:**   Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]
                Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_50[1..25]

END_LP50   **(HX1590)**   **Item Type:** Route   **Type Class:** End Loop

Route Details: Cycle on next insurance that meets the conditions stated in the loop definition.

                        If no other insurance meets the stated conditions, end LOOP_50 and continue with BOX_ 390.

BOX_390   **(HX1595)**   **Item Type:** Route   **Type Class:** If Then

Route Details: If any RU member has MEDICAID/SCHIP or GOVT-HOSPITAL/PHYSICIAN as a source of insurance during the current round (Insurance.HISrc=Medicaid or GHP), continue with BOX_400.

Otherwise, go to BOX_420.

BOX_400   **(HX1600)**   **Item Type:** Route   **Type Class:** If Then

Route Details: Note: RU members with Insurance.HISrc=Medicaid must pass through either LOOP_55 in HX OR PR170-PR200. Note: RU members with Insurance.HISrc=GHP must pass through either LOOP_55 in HX OR PR330-PR360.

If at least one RU member is "COVERED BY MEDICAID/SCHIP" (Insurance.HISrc=Medicaid) during the current round AND PR170 –PR200 =EMPTY for this RU, continue with LOOP_55.

If at least one RU member is "COVERED BY GOVT- HOSPITAL/PHYSICIAN" (Insurance.HISrc=GHP) during the current round and PR330- PR360 = EMPTY for this RU, continue with LOOP_55.

Otherwise, go to BOX_420.

LOOP_55	**(HX1601)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details: Ask HX530 to END_LP55 if Medicaid/SCHIP or Government-Hospital/Physician insurance covers at least one RU member.

Loop definition: LOOP_55 collects managed care information for RUs with newly created Medicaid/SCHIP coverage and collects managed care and premium information for RUs with newly created Gov't-Hospital/Physician coverage. This loop can cycle a maximum of two times per RU – once for Medicaid/SCHIP and once for Gov't-Hospital/Physician. This loop does not cycle for Medicaid/SCHIP or Gov't- Hospital/Physician if that coverage was already reviewed as part of the PR Section. This loop cycles on insurance that meets the following conditions:

If Round 1:
• Insurance source is Medicaid/SCHIP and/or Gov't-Hospital/Physician (Insurance.HISrc=Medicaid or GHP)

Otherwise (if not Round 1):
• Insurance source is Medicaid/SCHIP and/or Gov't-Hospital/Physician (Insurance. HISrc=Medicaid or GHP)
• At least one RU member is "COVERED BY MEDICAID/SCHIP" and/or "COVERED BY GOVT- HOSPITAL/PHYSICIAN" during the current round and either PR150_01 or PR310_01 was not asked in the current round for the insurance source being cycled on.
-[Insurance. HISrc=Medicaid and (HX100=YES) or ((HX230=2 or 3) and PR150_01= EMPTY for everyone)]
OR
-[Insurance. HISrc=GHP and (at least one person selected at HX170) or ((HX230=7) and PR310_01= EMPTY for everyone)]
"NAME OF INSURANCE SOURCE" in the context header for this loop represents either Medicaid/SCHIP or Gov't-Hospital/Physician. [Insurance.HISrcName]

Full Detail Spec

HX530	**(HX1605)**	**BLAISE NAME:** GovHMO

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 Card (   )   ☐ Look Up File (   )

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

Under {Medicaid{, also known as {STATE NAME FOR MEDICAID},} or {STATE CHIP
NAME}/{PROGRAM NAME FROM HX160/HX270}, the program sponsored by a state or local government
agency which provides hospital and physician benefits,}} {{are/is}/{were/was}} {PERSON 1}, {PERSON 2},
{PERSON 3}, {PERSON 4},
{PERSON N} enrolled in an HMO, that is a Health Maintenance Organization {between
{START DATE} and {END DATE}}?

[With an HMO, you must generally receive care from HMO physicians. If another doctor is seen, the expense is
not covered unless you were referred by the HMO, or there was a medical emergency.]

HELP:
F1

Responses:

YES, ALL ARE	....	1	HX550	(HX1615)
YES, SOME ARE	....	2	HX550	(HX1615)
NO, NONE ARE	....	3	HX540	(HX1610)
REFUSED	....	RF	HX540	(HX1610)
DON'T KNOW	....	DK	HX540	(HX1610)

Display Instructions:	Roster 1 – Report

Roster definition:
This item uses the insurance array to display RU member's 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".

Roster filter:
When looping on Medicaid/SCHIP:
1. Insurance source is MEDICAID/SCHIP (Insurance.HISrc=Medicaid), and
2. Person is an RU member covered by MEDICAID/SCHIP during the current round (HX100 =YES) or (HX230=2 or 3), and
3. [Round 1] or [Round<>1 and PR150 = EMPTY for everyone].

When looping on Gov't-Hospital/Physician:
1. Insurance source is GOVT-HOSPITAL/PHYSICIAN (Insurance.HISrc=GHP), and
2. Person is an RU member covered by GOVT-HOSPITAL/PHYSICIAN during the current round (at least one person selected at HX170) or (HX230=7), and
3. [Round 1] or [Round<>1 and PR310= EMPTY for everyone].

Display '{Medicaid{, also known as {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME}' if asking about MEDICAID/SCHIP. Display '{PROGRAM NAME FROM HX160/HX270}, the program...benefits,' if asking about GOVT- HOSPITAL/PHYSICIAN.

For '{PROGRAM NAME FROM HX160/HX270}', display the text entry from HX160 or HX270.
Display '(are/is)' if current round is not the final round of the panel (RndType<>Final).
Display (were/was)' if current round is the final round of the panel (RndType=Final).

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

Display '{are/is}' if current round is not the final round of the panel (RndType<>Final).
Display '{were/was}' if current round is the final round of the panel (RndType=Final).

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

Display 'between {START DATE} and {END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP
	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid/div>

HX540   **(HX1610)**   **BLAISE NAME:** GovPrimaryMD

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THMOSIGND_1	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (PROGDRHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

{Does/Between {START DATE} and {END DATE}, did} {Medicaid{, {STATE NAME FOR MEDICAID},}
or
{STATE CHIP NAME}/{PROGRAM NAME FROM HX160/HX270}, the program sponsored by a state or local
government agency which provides hospital and physician benefits,} require {PERSON 1}, {PERSON 2},
{PERSON 3}, {PERSON 4}, {PERSON N} to sign up with a certain primary care doctor, group of doctors, or
with a certain clinic which they must go to for all of their routine care?

PROBE: Do not include emergency care or care from a specialist they were referred to.

Responses:	YES, ALL REQUIRED	1	HX550	(HX1615)
	YES, SOME REQUIRED	2	HX550	(HX1615)
	NO, NONE REQUIRED	3		
	REFUSED	RF		
	DON'T KNOW	DK		

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 or GOVT-HOSPITAL/PHYSICIAN.
	If looping on Medicaid/SCHIP (Insurance.HISrc=Medicaid) and HX540 is coded '3' (NO, NONE REQUIRED), 'RF' (REFUSED), or 'DK' (DON'T KNOW), go to END_LP55.
	If looping on Government-Hospital/Physician (Insurance.HISrc=GHP) and HX540 is coded '3' (NO, NONE REQUIRED), 'RF' (REFUSED), or 'DK' (DON'T KNOW), continue with HX560.
Display Instructions:	Roster 1 - Report
	Roster definition: Use HX530 definition.
	Display RU member's 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".
	Roster filter: Use HX530 filter.
	Display 'Does' if current round is not the final round of the panel (RndType<>Final). Display 'Between {START DATE} and {END DATE}, did' if current round is the final round of the panel (RndType=Final).
	Display '{Medicaid{, also known as {STATE NAME FOR MEDICAID} or {STATE CHIP NAME}}' if asking about MEDICAID/SCHIP. Display '{PROGRAM NAME FROM HX160/HX270}, the program... benefits,' if asking about GOVT-HOSPITAL/PHYSICIAN.
	For '{PROGRAM NAME FROM HX160/HX270}', display the text entry from HX160 or HX270.
	Display ', {STATE NAME FOR MEDICAID},' (substituting the real state name for the program) if the state in which interview is being conducted does not use the name 'Medicaid'. For the specific name to use 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 use by state, see the plan fill file.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid/div>

HX550   **(HX1615)**   **BLAISE NAME:** OthGovProgName

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	String	**Field Size:** 30		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

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

ENTER PLAN NAME

Responses: 1
                  REFUSED   .... RF
                  DON'T KNOW   .... DK

Programmer Instructions:	Set Insurance.Insurer= HX550.
	If looping on Medicaid/SCHIP (Insurance.HISrc=Medicaid), go to END_LP55
	Otherwise, that is if looping on Government-Hospital/Physician (Insurance.HISrc=GHP), continue with HX560.
Display Instructions:	Display '{Medicaid{, {STATE NAME FOR MEDICAID},} or {STATE CHIP NAME}' if asking about MEDICAID/SCHIP. If asking about GOVT-HOSPITAL/PHYSICIAN, use a null display.
	Display 'from the....benefits' if asking about GOVT-HOSPITAL/PHYSICIAN. If asking about MEDICAID/SCHIP, use a null display.
	Display 'HMO' if HX530 is coded '1' (YES, ALL ARE) or '2' (YES, SOME ARE).
	Display 'health insurance' if HX540 is coded '1' (YES, ALL REQUIRED) or '2' (YES, SOME REQUIRED).
	Display ', {STATE NAME FOR MEDICAID}' (substituting the real state name for the program) if the state in which interview is being conducted does not use the name 'MEDICAID'. For the specific name to use 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 use by state, see the plan fill file.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid/div>

HX560	**(HX1620)**	**BLAISE NAME:** GovPayPrem	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TPRMedPre	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

Is there a monthly premium for {PERSON 1, PERSON 2, PERSON 3, PERSON N} for the coverage through {{NAME OF PLAN FROM HX550}/{PROGRAM NAME FROM HX160/HX270}, the program sponsored by a state or local government agency which provides hospital and physician benefits}?

[Do not include the cost of any copayments, coinsurance or deductibles {you/he/she/they} may have had to pay.]

READ IF NECESSARY: A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

HELP: F1

Responses:				
	YES, EVERYONE COVERED PAYS	1	HX600	(HX1650)
	YES, SOME COVERED PAY	2	HX575	(HX1627)
	NO, NO ONE COVERED PAYS	3	END_LP55	(HX1666)
	REFUSED	RF	END_LP55	(HX1666)
	DON'T KNOW	DK	END_LP55	(HX1666)

Programmer Instructions:	
Display Instructions:	Roster 1 – Report Roster definition: Use HX530 definition. Display RU member's 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". Roster filter: Use HX530 filter. Display '{NAME OF PLAN FROM HX550}' if there is a current round insurer associated with the GOVT- HOSPITAL/PHYSICIAN INSURANCE (Insurance.Insurer <> empty). Otherwise, display, '{PROGRAM NAME FROM HX160/HX270}, the program ...and physician benefits'. Display the actual plan name entered at HX550 for 'NAME OF PLAN FROM HX550' if a plan name was entered (Insurance.Insurer). For '{PROGRAM NAME FROM HX160/HX270}', display the text entry from HX160 or HX270. Display 'you' if the respondent is the only person eligible to be displayed. Display 'he' if only one RU member is eligible to be displayed that person is not the respondent and is male. Display 'she' if only one RU member eligible to be displayed and that person is not the respondent and is female. Otherwise, display 'they.'
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP

HX575   **(HX1627)**   **BLAISE NAME:** WhoPayPremRosterGHP

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFIRSTMIDLASTNA	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

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

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

Who has a monthly premium for that coverage?

PROBE: Anyone else?

ENTER ALL THAT APPLY.

Responses:	{FIRST NAME [MIDDLE NAME] LAST NAME}1	------ 1	HX600	(HX1650)
	{FIRST NAME [MIDDLE NAME] LAST NAME}2	------ 2	HX600	(HX1650)
	{FIRST NAME [MIDDLE NAME] LAST NAME}3	------ 3	HX600	(HX1650)
	{FIRST NAME [MIDDLE NAME] LAST NAME}4	------ 4	HX600	(HX1650)
	{FIRST NAME [MIDDLE NAME] LAST NAME}N	------ 5	HX600	(HX1650)

Programmer Instructions:	Roster behavior: 1. Multiple select allowed.
Display Instructions:	Roster 2 – no add/edit/delete Roster definition: This item uses the insurance array to display RU member's first, middle, and last names (Person.FullName). Roster filter: 1. Insurance source is GOVT-HOSPITAL/PHYSICIAN (Insurance.HISrc=GHP), and 2. Person is an RU member covered by GOVT-HOSPITAL/PHYSICIAN during the current round (at least one person selected at HX170) or (HX230=7), and 3. [Round 1] or [Round<>1 and PR310= EMPTY for everyone].
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55Medicaid/div>

HX600	**(HX1650)**	**BLAISE NAME:** GovPremSubsdz		
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: {NAME OF INSURANCE SOURCE}

Question Text:

{PLAN NAME: {NAME OF PLAN FROM HX550}}

Is the cost of the premium subsidized based on household income?

Responses:	YES	....	1
	NO	....	2
	REFUSED	....	RF
	DON'T KNOW	....	DK

Programmer Instructions:

If [GOVERNMENT-HOSPITAL/PHYSICIAN] and if [plan is exchange coverage (HX180=1 or HX280=1)] and if [HX560 is coded '1' (YES, EVERYONE COVERED PAYS) or '2' (YES, SOME COVERED PAY)], continue with HX610.
Otherwise, go to END_LP55.

Display Instructions:

Display 'PLAN NAME: ...' if HX550 has an entry other than 'RF' or 'DK' or EMPTY.

Otherwise, use a null display.

Display the actual plan name entered at HX550 for 'NAME OF PLAN FROM HX550' if a plan name was entered.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP

Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP

HX610	**(HX1665)**	**BLAISE NAME:** GovMetalPlan		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TPLANMETL	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (METALPLANSHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {NAME OF INSURANCE SOURCE}

Question Text:

Is {the {NAME OF PLAN FROM HX550} plan/this plan} a platinum, gold, silver, bronze or catastrophic plan?

HELP: F1

Responses:				
	PLATINUM PLAN	1	END_LP55	(HX1666)
	GOLD PLAN	2	END_LP55	(HX1666)
	SILVER PLAN	3	END_LP55	(HX1666)
	BRONZE PLAN	4	END_LP55	(HX1666)
	CATASTROPHIC PLAN	5	END_LP55	(HX1666)
	IF VOLUNTEERED: SOMETHING ELSE	6	END_LP55	(HX1666)
	REFUSED	RF	END_LP55	(HX1666)
	DON'T KNOW	DK	END_LP55	(HX1666)

Display Instructions: Display 'the {NAME OF PLAN FROM HX550} plan' if HX550 has an entry other than 'RF' or 'DK' or EMPTY. Otherwise, display 'this plan'.

Display the actual plan name entered at HX550 for '{NAME OF PLAN FROM HX550}' if a plan name was entered.

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP

Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_55GHP

END_LP55	**(HX1666)**	**Item Type:** Route	**Type Class:** End Loop

Route Details: Cycle on next insurance that meets the conditions stated in the loop definition.

If no more insurance meet the stated conditions, end LOOP_55 and continue with BOX_ 420.

BOX_420	**(HX1670)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If any insurance recorded as providing private insurance (that was created during the current round) to a current RU member (Insurance.HIPubPriv=Private and OrigRnd=current round), continue with LOOP_60.

Otherwise, go to BOX_530.

LOOP_60	**(HX1675)**	**Item Type:** Route	**Type Class:** Begin Loop

Route Details: For each insurance, ask HX620- END_LP60.

Loop definition: LOOP_60 collects private health insurance information. This loop cycles on insurance that meets the following conditions:
• Insurance is provider of private health insurance to a current RU member [Insurance.HIPubPriv=Private]
  AND
• The insurance coverage provided was created during the current round [OrigRnd=current round].

HX620	**(HX1680)**	**BLAISE NAME:** CodeAllHICovg

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**	
Type Class:	Enumerated	**Field Size:**			
Answer Type:	THX48	**Answers allowed:** 12	**ArrayMax:**	**Max value:**	

☑ Help Available (CodeAllHICovgHelp)   ☑ Show Card (HX-6)   ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

📖 HX-6

Now think again about {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}. Looking at card HX-6, what health insurance coverage {{do/does}/did} {you/{POLICYHOLDER}} have {as of {END DATE}}?

PROBE: Any other health coverage through this plan?

ENTER ALL THAT APPLY.

HELP: F1

Responses:

HOSPITAL AND PHYSICIAN BENEFITS, INCLUDING COVERAGE THROUGH AN HMO	1
DENTAL	2
PRESCRIPTION DRUGS	3
VISION	4
MEDICARE SUPPLEMENT/MEDIGAP	5
OTHER	91
REFUSED	RF
DON'T KNOW	DK

Programmer Instructions:	If coded '91' (OTHER), alone or in combination with any other code, continue with HX620OS. If coded '2' (DENTAL) (NOTE: coded '2' alone or in combination with any other code except '91' (OTHER)), go to Box_430. Otherwise, go to HX625.
	For specifications purposes only: CAPI does not allow 'RF' or 'DK' in combination with any other code.
	If '1' (HOSPITAL AND PHYSICIAN BENEFITS, INCLUDING COVERAGE THROUGH AN HMO) is one of the selections and '5' (MEDIGAP) is not one of the selections, set Insurance.HospHI=Yes.
	If '5' (MEDIGAP) is one of the selections, set Insurance.MedigapHI=Yes
Display Instructions:	Display '{do/does}' if [current round is not the final round of the panel (RndType<>Final)] and if [insurance being asked about is current (HQ10_01 is coded '1' (COVERED WHOLE TIME) or HQ10_02 is coded '1' (YES, COVERED
	NOW) for the policyholder (or for oldest PID in the covered person array if policyholder is not a current RU member)]. Otherwise, display 'did'.
	Display 'as of {END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

HX620OS   **(HX1685)**   **BLAISE NAME:** HICovgOS

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: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

SPECIFY: HEALTH INSURANCE COVERAGE

Responses: -- 1

Programmer Instructions: For the plan being looped on, if '2' (DENTAL) is selected at HX620, go to Box_430. Otherwise, go to HX625.

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

HX625	**(HX1687)**	**BLAISE NAME:** HICovOther		
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: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

{{Are/Is}/{Were/Was}} {you/{POLICYHOLDER}} covered by a separate plan through {INSURANCE SOURCE NAME} that only pays for dental services {as of {END DATE}}?

Responses:

YES	1	BOX_430	(HX1690)
NO	2	BOX_430	(HX1690)
REFUSED	RF	BOX_430	(HX1690)
DON'T KNOW	DK	BOX_430	(HX1690)

Display Instructions:

Display '{Are/Is}' if [current round is not the final round of the panel (RndType<>Final)] and if [insurance being asked about is current (HQ10_01 is coded '1' (COVERED WHOLE TIME) or HQ10_02 is coded '1' (YES, COVERED NOW) for the policyholder (or for oldest PID in the covered person array if policyholder is not a current RU member)]. Otherwise, display '{Were/Was}'.

Display 'as of {END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

BOX_430   **(HX1690)**   **Item Type:** Route   **Type Class:** If Then

Route Details: If insurance source is (Employer or Union; Insurance.HISrc=Employer or Union) or (insurance source is direct purchase and direct purchase type is not from insurance company or agent/broker [HX200 or HX300 <> 3; Insurance.DirectPurchTp<> InsuranceCoAgentBroker]) and insurance provides Medicare Supplement/Medigap coverage [Insurance.MedigapHI=Yes], continue with HX630.

If insurance source is direct purchase and direct purchase type is from insurance company or agent/broker [HX200 or HX300 = 3; Insurance.DirectPurchTp= InsuranceCoAgentBroker] and insurance provides Medicare Supplement/Medigap coverage [Insurance.MedigapHI=Yes], automatically code HX630 with appropriate responses by CAPI and then go to BOX_440 [Set Insurance.HISrcName=Insurance.Insurer].

Otherwise (HX620 is not coded '5' (MEDICARE SUPPLEMENT OR MEDIGAP; Insurance.MedigapHI<> Yes)), go to BOX_440.

HX630	**(HX1695)**	**BLAISE NAME:** MedigapName		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	String	**Field Size:** 30		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (InsHMOHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

What is the name of the insurance company or HMO from which {you/{POLICYHOLDER}} {receive/receives} the Medicare Supplement or Medigap benefits?

IF MORE THAN ONE NAME, PROBE: What is the main insurance company or HMO from which {you/he/she} {receive/receives} the Medicare Supplement or Medigap benefits?

HELP:F1

NAME OF INSURER

Responses:		1	BOX_440	(HX1700)
	REFUSED	RF	BOX_440	(HX1700)
	DON'T KNOW	DK	BOX_440	(HX1700)

Programmer Instructions: Set Insurance.Insurer = HX630

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_440   **(HX1700)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If insurance source is (Employer or Union; Insurance.HISrc=Employer or Union) or (insurance source is direct purchase and direct purchase type is not from insurance company or agent/broker [HX200 or HX300 <> 3; Insurance.DirectPurchTp<> InsuranceCoAgentBroker]), and insurance provides Hospital/Physician coverage (but not Medigap) [Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes], continue with HX640.

If insurance source is direct purchase and direct purchase type is from insurance company or agent/broker [HX200 or HX300 = 3; Insurance.DirectPurchTp= InsuranceCoAgentBroker], and insurance provides Hospital/Physician coverage (but not Medigap) [Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes] automatically code HX640 with appropriate responses by CAPI and go to BOX_450 [Set Insurance.HISrcName=Insurance.Insurer].

If insurance provides Medicare Supplement/Medigap coverage [Insurance.MedigapHI=Yes], go to BOX_450.

Otherwise, go to BOX_460.

HX640   **(HX1705)**   **BLAISE NAME:** HospHIName

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	String	**Field Size:** 30		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (InsHMOHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

What is the name of the insurance company or HMO from which {you/{POLICYHOLDER}} {receive/receives} <u>hospital and physician benefits</u>?

IF MORE THAN ONE NAME, PROBE: What is the main insurance company or HMO from which {you/he/she} {receive/receives} <u>hospital and physician benefits</u>?

HELP:F1

NAME OF INSURER

Responses:

	....	1	BOX_450	(HX1715)
REFUSED	....	RF	BOX_450	(HX1715)
DON'T KNOW	....	DK	BOX_450	(HX1715)

Programmer Instructions: Set Insurance.Insurer = HX640

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
                                  Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_450   **(HX1715)**   **Item Type:** Route   **Type Class:** If Then

Route Details: Ask the Managed Care (MC) section for this insurer (Insurance.Insurer).

At completion of the MC section, continue with BOX_460.

BOX_460 (**HX1720**) **Item Type:** Route **Type Class:** If Then

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Route Details: Continue with HX650 if insurance meets the following conditions:
• If (HP50 is coded '1' (YES, PLAN IS EXCHANGE)) or (direct purchase type is state exchange or federal marketplace ' (HX200=2 or HX300=2)) or (state exchange or federal marketplace for SE, FS=1 job (HP40=4) And
• Insurance provides Hospital/Physician coverage (but not Medigap) (Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes)
And
• Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is "Policyholder deceased" or "Policyholder outside the DU" (Insurance.Plcyhldr=901 or 902).

Otherwise, go to BOX_470.

HX650 (**HX1725**) **BLAISE NAME:** HospMetaPlan
Item Type: Question **Field kind:** Datafield **ArrayMin:** **Min value:**
Type Class: Enumerated **Field Size:**
Answer Type: TPLANMETL **Answers allowed:** 1 **ArrayMax:** **Max value:**

☑ Help Available (METALPLANSHelp) ☐ Show Card (   ) ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

Is {your/PERSON}'s} {INSURER AT HX640} plan a platinum, gold, silver, bronze or catastrophic plan?

HELP: F1

Responses: PLATINUM PLAN ------------------------------ 1 BOX_470 (HX1730)
GOLD PLAN ------------------------------ 2 BOX_470 (HX1730)
SILVER PLAN ------------------------------ 3 BOX_470 (HX1730)
BRONZE PLAN ------------------------------ 4 BOX_470 (HX1730)
CATASTROPHIC PLAN ------------------ 5 BOX_470 (HX1730)
IF VOLUNTEERED: SOMETHING ELSE ------- 6 BOX_470 (HX1730)
REFUSED ------------------------------ RF BOX_470 (HX1730)
DON'T KNOW ------------------------------ DK BOX_470 (HX1730)

Display Instructions:	Display the actual plan name entered or autocoded at HX640 for '{INSURER AT HX640}' if HX640 has an entry other than 'RF' or 'DK' or EMPTY (Insurance.Insurer). Otherwise, use a null display.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_470   (HX1730)   **Item Type:** Route   **Type Class:** If Then

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Route Details:	If current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross), Go to HX660. Otherwise, continue with BOX_480.

BOX_480   (HX1735)   **Item Type:** Route   **Type Class:** If Then

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Route Details:	Note: You are routed to BOX_480 during all rounds of the fall data collection cycle and in the final round during the spring data collection cycle (RndType=Within or Final). This box specifies a "likely exchange" check. BOX_500 is a similar check made during the other rounds of the spring data collection cycle (RndType=First or Cross). Continue with HX660 if this insurance meets the following conditions: • Is a 'PROFESSIONAL ASSOCIATION' (HP40=1), 'GROUP' (HX200=4 or HX300=4 or HP40= 2) or 'INSURANCE -FROM CO. OR AGENT/BROKER' (HX200=3 or HX300 =3 or HP40=3) or 'STATE EXCHANGE OR FEDERAL MARKETPLACE COVERAGE' (HX200=2 or HX300=2 or HP40=4) or 'UNKNOWN TYPE-COLLECTED AT OTHER' (HX200=91 or HX300=91 or HP40=91 [(Insurance.DirectPurchTp= GroupAssociation, InsuranceCoAgentBroker, ExchangeMarketplace , Other) or (Insurance.HISrc=Employer and HP40=1, 2, 3, 4, or 91)] And • Insurance provides Hospital/Physician coverage (but not Medigap) (Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes) And • Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is "Policyholder deceased" or "Policyholder outside the DU" (Insurance.Plcyhldr=901 or 902). Otherwise, go to END_LP60.

HX660   **(HX1740)**   **BLAISE NAME:** FamPayPrem

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TMSUPPAY	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

For the coverage through {INSURANCE SOURCE NAME}, does anyone in the family pay all of the premium or cost, some of the premium or cost, or none of the premium or cost?

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

[Do include any contribution made to the plan as part of a paycheck.]

HELP: F1

Responses:

YES, PAY ALL OF PREMIUM/COST	1	BOX_490	(HX1745)
YES, PAY SOME OF PREMIUM/COST	2	BOX_490	(HX1745)
YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST	3	BOX_490	(HX1745)
NO, DO NOT PAY	4	BOX_510	(HX1775)
REFUSED	RF	BOX_510	(HX1775)
DON'T KNOW	DK	BOX_510	(HX1775)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_490   **(HX1745)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross),
Continue with HX670.

Otherwise, go to HX690.

HX670   **(HX1750)**   **BLAISE NAME:** PlcyhlderPayAmt

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 0
Type Class:	Real	**Field Size:** 9,2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 999999.99

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

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

How much {{do/does}/did} {you/{POLICYHOLDER}} pay for the {INSURANCE SOURCE NAME} coverage?

ENTER AMOUNT

Responses:				
	--	1	HX680	(HX1755)
REFUSED	--	RF	BOX_500	(HX1765)
DON'T KNOW	--	DK	BOX_500	(HX1765)

Programmer Instructions:	Allow the entry of dollars and cents.
Display Instructions:	Display HX670, HX680, and HX680OS on the same form pane.
	Display '{do/does}' if [current round is not the final round of the panel (RndType<>Final)] and if [insurance being asked about is current (HQ10_01 is coded '1' (COVERED WHOLE TIME) or HQ10_02 is coded '1' (YES, COVERED NOW) for the policyholder (or for oldest PID on the covered person array if policyholder is not a current RU member)]. Otherwise, display 'did'.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

HX680   **(HX1755)**   **BLAISE NAME:** PlcyhlderPayUnit

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TCOVRUNIT	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

{Is/Was} that per year, per month, per week, or what?

UNIT OF COVERAGE:

Responses:

PER YEAR	1	BOX_500	(HX1765)
EVERY 3 MONTHS (QUARTERLY)	2	BOX_500	(HX1765)
EVERY 2 MONTHS (BIMONTHLY)	3	BOX_500	(HX1765)
PER MONTH	4	BOX_500	(HX1765)
PER WEEK	5	BOX_500	(HX1765)
EVERY 2 WEEKS (BIWEEKLY)	6	BOX_500	(HX1765)
2 TIMES PER YEAR (SEMI-ANNUALLY)	7	BOX_500	(HX1765)
2 TIMES PER MONTH (SEMI-MONTHLY)	8	BOX_500	(HX1765)
OTHER	91	HX680OS	(HX1760)
REFUSED	RF	BOX_500	(HX1765)
DON'T KNOW	DK	BOX_500	(HX1765)

Display Instructions:	Display HX670, HX680, and HX680OS on the same form pane.
	Display 'Is' if [current round is not the final round of the panel (RndType<>Final)] and if [insurance being asked about is current (HQ10_01 is coded '1' (COVERED WHOLE TIME) or HQ10_02 is coded '1' (YES, COVERED NOW) for the policyholder (or for oldest PID on the covered person array if policyholder is not a current RU member)]. Otherwise, display 'Was'.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

HX680OS	**(HX1760)**	**BLAISE NAME:** PlcyhlderPayUnitOS
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: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

SPECIFY: UNIT OF COVERAGE

Responses:				
	--	1	BOX_500	(HX1765)
	REFUSED --	RF	BOX_500	(HX1765)
	DON'T KNOW ----------------------------------	DK	BOX_500	(HX1765)

Display Instructions:	Display HX670, HX680, and HX680OS on the same form pane.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_500 **(HX1765)** **Item Type:** Route **Type Class:** If Then

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Route Details: Note: You are routed to BOX_500 if the current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross). This box specifies a "likely exchange" check. BOX_480 is a similar check made in rounds within a single calendar year and the final panel round (RndType=Within or Final).

Continue with HX690 if this insurance meets the following conditions:

• Is 'PROFESSIONAL ASSOCIATION' (HP40=1), 'GROUP' (HX200=4 or HX300=4 or HP40=2) or 'INSURANCE FROM CO. OR AGENT/BROKER' (HX200=3 or HX300=3 or HP40=3) or 'STATE EXCHANGE OR FEDERAL MARKET PLACE COVERAGE' (HX200=2 or HX300=2 or HP40=4) or 'UNKNOWN TYPE-COLLECTED AT OTHER' (HX200=91 or HX300=91 or HP40=91)
[(Insurance.DirectPurchTp= GroupAssociation, , InsuranceCoAgentBroker, ExchangeMarketplace , Other) or (Insurance.HISrc=Employer and HP40=1, 2, 3, 4, or 91)]
And
• Insurance provides Hospital/Physician coverage (but not Medigap)
(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes)
And
• Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is "Policyholder deceased" or "Policyholder outside the DU" (Insurance.Plcyhldr=901 or 902).

Otherwise, go to BOX_510.

HX690   **(HX1770)**   **BLAISE NAME:** HospPremSubsdz

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: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

Is the cost of the premium subsidized based on family income?

Responses:

YES	....	1	BOX_510	(HX1775)
NO	....	2	BOX_510	(HX1775)
REFUSED	....	RF	BOX_510	(HX1775)
DON'T KNOW	....	DK	BOX_510	(HX1775)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

BOX_510   **(HX1775)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross),
Continue with BOX_520.

Otherwise, go to END_LP60.

BOX_520   **(HX1780)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If insurance provides Hospital/Physician coverage (but not Medigap)
(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes) or if insurance is unknown
(HX620=DK or RF), continue with HX700.

Otherwise, go to END_LP60.

HX700   **(HX1785)**   **BLAISE NAME:** AnnDeductAmt

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TANNDEDCT	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

☑ Help Available (ANNDEDCTHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME
OF INSURANCE SOURCE}

Question Text:

Is the {family} annual deductible for medical care for this plan less than {$1,600/$3,200}, or is it {$1,600/$3,200} or more?
If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible
amounts here.

HELP:F1

Responses:

LESS THAN {$1,600/$3,200}	1	HX702	(HX1786)
{$1,600/$3,200} OR MORE	2	HX704	(HX1788)
NO ANNUAL DEDUCTIBLE	3	END_LP60	(HX1795)
REFUSED	RF	END_LP60	(HX1795)
DON'T KNOW	DK	END_LP60	(HX1795)

Display Instructions:	Use a null display for 'family' and display '$1,600' in the question text and '$1,600' in the response category options if this insurance meets the following conditions: • [The policyholder is the only covered person (PersID of Insurance.Plcyhldr = only PersID in covered person array) OR • The policyholder is deceased and there is exactly one covered person (Insurance.Plcyhldr= 901 and only one PersID in covered person array)] AND • Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<>Yes). Otherwise, display 'family' and '$3,200' in the question text and '$3,200' in the response category options. Note: The amounts to be used will need to be verified yearly and adjusted in HX and OE.
Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

HX702	**(HX1786)**	**BLAISE NAME:** AnnDeductLess		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TANNDEDCTRNGL	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

[Is the {family} annual deductible for medical care for this plan less than {$1,600/$3,200}, or is it {$1,600/$3,200} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]

Is the {family} annual deductible less than {$800/$1,600} or is it {$800/$1,600} to {$1,599/$3,199}?

Responses:	LESS THAN {$800/$1,600}	------- 1	END_LP60	(HX1795)
	{$800/$1,600} TO {$1,599/$3,199}	------- 2	END_LP60	(HX1795)
	REFUSED	------- RF		
	DON'T KNOW	------- DK		

Display Instructions:	Display "[Is the {family} annual deductible for medical care for this plan less than {$1,600/$3,200}, or is it {$1,600/$3,200} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]" in greyed out text. Use a null display for 'family' and display '$1,600' in the greyed out question text if this insurance meets the following conditions:

• [The policyholder is the only covered person (PersID of Insurance.Plcyhldr = only PersID in covered person array)
OR
• The policyholder is deceased and there is exactly one covered person (Insurance.Plcyhldr= 901 and only one PersID in covered person array)]
AND
• Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<> Yes).

Otherwise, display 'family' and '$3,200' in the greyed out question text.

For "Is the {family} annual deductible less than {$800/$1,600} or is it {$800/$1,600} to {$1,599/$3,199}?", use a null display for 'family' and display '$800' and '$1,599' in the question text and also display '$800' in response option 1 and '$800' and '$1,599' in response option 2 if this insurance meets the following conditions:
• [The policyholder is the only covered person (PersID of Insurance.Plcyhldr = only PersID in covered person array)
OR
• The policyholder is deceased and there is exactly one covered person (Insurance.Plcyhldr= 901 and only one PersID in covered person array)]
AND
• Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<> Yes).

Otherwise, display 'family', '$1,600' and '$3,199' in the question text and also display '$1,600' in response option 1 and '$1,600' and '$3,199' in response option 2.

HX704	**(HX1788)**	**BLAISE NAME:** AnnDeductMore	
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**	
Answer Type:	TANNDEDCTRNGHI	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

[Is the {family} annual deductible for medical care for this plan less than {$1,600/$3,200}, or is it {$1,600/$3,200} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]

Is the {family} annual deductible {$1,600/$3,200} to {$3,199/$6,399} or is it {$3,200/$6,400} or more?

Responses:	{$1,600/$3,200} TO {$3,199/$6,399}	1	HX710	(HX1790)
	{$3,200/$6,400} OR MORE	2	HX710	(HX1790)
	REFUSED	RF	HX710	(HX1790)
	DON'T KNOW	DK	HX710	(HX1790)

Display Instructions:	Display "[Is the {family} annual deductible for medical care for this plan less than {$1,600/$3,200}, or is it {$1,600/$3,200} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]" in greyed out text. Use a null display for 'family' and display '$1,600' in the greyed out question text if this insurance meets the following conditions:

• [The policyholder is the only covered person (PersID of Insurance.Plcyhldr = only PersID in covered person array)

• OR

• The policyholder is deceased and there is exactly one covered person (Insurance.Plcyhldr= 901 and only one PersID in covered person array)]

• AND

• Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<> Yes).

Otherwise, display 'family' and '$3,200' in the greyed out question text.
For "Is the {family} annual deductible {$1,600/$3,200} to {$3,199/$6,399} or is it {$3,200/$6,400} or more?", use a null display for 'family' and display '$1,600', '$3,199' and '$3,200' in the question text and also display '$1,600' and '$3,199' in response option 1 and '$3,200' in response option 2 if this insurance meets the following conditions:

• [The policyholder is the only covered person (PersID of Insurance.Plcyhldr = only PersID in covered person array)

• OR

• The policyholder is deceased and there is exactly one covered person (Insurance.Plcyhldr= 901 and only one PersID in covered person array)]

• AND

• Insurance does not cover any persons outside the RU (Insurance.CovPersOutRU<> Yes).

Otherwise, display 'family', '$3,200', '$6,399' and '$6,400' in the question text and also display '$3,200' and '$6,399' in response option 1 and '$6,400' in response option 2.

HX710   **(HX1790)**   **BLAISE NAME:** PlanHasHSA

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 (HSAHelp)   ☐ Show Card (   )   ☐ Look Up File (   )

Context Header: {POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

Question Text:

With this plan, is there a special account or fund that can be used to pay for medical expenses? The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal Care accounts, Personal Medical funds, or Choice funds, and are different from Flexible Spending Accounts.

HELP: F1

Responses:

YES	----------	1	END_LP60	(HX1795)
NO	----------	2	END_LP60	(HX1795)
REFUSED	----------	RF	END_LP60	(HX1795)
DON'T KNOW	----------	DK	END_LP60	(HX1795)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_60[1..50]

END_LP60   **(HX1795)**   **Item Type:** Route   **Type Class:** End Loop

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Route Details: Cycle on insurance that meets the conditions stated in the loop definition.

If no more insurance meet the stated conditions, end LOOP_60 and continue with BOX_530.

BOX_530   **(HX1800)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If current round is the first round of the panel or a round that crosses two calendar years (RndType=First or Cross),
Continue with HX720.

Otherwise, go to BOX_540.

HX720   **(HX1805)**   **BLAISE NAME:** AnyFSA

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 ( )

Question Text:

Does anyone in this household have a Flexible Spending Account for health expenses?

IF NECESSARY, SAY: These accounts are offered by some employers to allow employees to set aside pre-tax dollars of their own money for their use throughout the year to reimburse themselves for their own or their family members' out-of-pocket expenses for health care. With this type of account, any money remaining in the account at the end of the year, following a short grace period, is lost to the employee.

Responses:

YES	----------------------------------	1	HX730	(HX1810)
NO	----------------------------------	2	BOX_540	(HX1820)
REFUSED	----------------------------------	RF	BOX_540	(HX1820)
DON'T KNOW	----------------------------------	DK	BOX_540	(HX1820)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

HX730	**(HX1810)**	**BLAISE NAME:** WhoFSARoster		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFIRSTMIDLASTNA	**Answers allowed:** 99	**ArrayMax:**	**Max value:**

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

Question Text:

Who has a Flexible Spending Account (FSA) for health expenses?

PROBE: Anyone else?

ENTER ALL THAT APPLY.

Responses:	{FIRST NAME [MIDDLE NAME] LAST NAME}1	------ 1	HX740_01	(HX1815)
	{FIRST NAME [MIDDLE NAME] LAST NAME}2	------ 2	HX740_01	(HX1815)
	{FIRST NAME [MIDDLE NAME] LAST NAME}3	------ 3	HX740_01	(HX1815)
	{FIRST NAME [MIDDLE NAME] LAST NAME}4	------ 4	HX740_01	(HX1815)
	{FIRST NAME [MIDDLE NAME] LAST NAME}N	------ 5	HX740_01	(HX1815)

Programmer Instructions:

Roster behavior:
1. Multiple select allowed. Interviewer may select one or more from the listed members.

Display Instructions:

Roster 2 – no add/edit/delete

Roster definition:
This item displays the RU-MEMBERS-ROSTER (Person.FullName) for selection of RU members.

Roster filter:
Display all persons age 16 or older or in age categories 4-9.

Testing/Editing Notes:

Variable collected at MEPS(Fall/Spring)YYYY.HX_Main
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

HX740_01   **(HX1815)**   **BLAISE NAME:** FSAAmt

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1
Type Class:	Integer	**Field Size:** 4		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 5000

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

Question Text:

How much {do/does} {you/{PERSON 1}} contribute per year to {your/his/her} FSA?

ENTER AMOUNT

Responses: 1
                      REFUSED   .... RF
                      DON'T KNOW .... DK

Programmer Instructions:	Preloaded grid type 1: forced navigation including HX740_01, HX740_02, HX740_03, HX740_ 04, HX740_N.
	After grid completion, continue with BOX_540.
	SOFT RANGE:
	$10-$3050
	If amount entered is greater than $3050, display the following message: "AMOUNT CONTRIBUTED IS HIGHER THAN EXPECTED FOR ONE PERSON. VERIFY AND CORRECT IF NEEDED."
	If amount entered is less than $10, display the following message: "AMOUNT CONTRIBUTED IS LOWER THAN EXPECTED FOR ONE PERSON. VERIFY AND CORRECT IF NEEDED."
	Note: The upper soft range limit needs to be verified yearly to determine if it should be adjusted.
Display Instructions:	Roster 1 – Report no add/edit/delete
	Format the following columns on the form pane.
	Col#1 Header: RU Member
	Instructions: Display RU members' First Middle and Last name (Person.FullName). This column should be protected – no edit/add/delete
	Col#2 Header: Amount
	Instructions: Entry field to enter an amount. Allow whole dollars only, no cents. Display '$' and '.00' mask.
	Roster Filter:
	Display all persons selected at HX730
	Display variable question text. Replace "How much {do/does} {you/{PERSON 1}} contribute per year to {your/his/her} FSA?" with:
	HX740_02: What about {PERSON 2}?
	HX740_03: What about {PERSON 3}?
	HX740_04: What about {PERSON N}? How much does {he/she} contribute per year to

{his/her} FSA?
HX740_N: Repeat question text HX740_02-HX740_N for as many RU members that fit the roster filter criteria.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.FSAAmtGrid.FSAMem[1..25]
	Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.FSAAmtGrid.FSAMem[1..25]

BOX_540   **(HX1820)**   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If round 1, continue with Loop_70.

                 Otherwise, go to BOX_560.

LOOP_70   **(HX1821)**   **Item Type:** Route   **Type Class:** Begin Loop

---

Route Details: For each person in the RU-Members-Roster, ask BOX_550 to END_LP70.

                 Loop Definition: LOOP_70 cycles on all current RU members to determine insurance coverage in the previous two years if RU member not covered by eligible insurance on January 1 of panel year 1.

BOX_550	**(HX1822)**	**Item Type:** Route	**Type Class:** If Then

Route Details: 1. If born after 12/31/{YEAR}, where 'YEAR' is the year prior to the first calendar year of the panel (FirstPanYear) or age category =1, go to END_LP70.
2. If person's reference period does not include January 1,{YEAR}, where 'YEAR' is the first calendar year of the panel (FirstPanYear), go to END_LP70.
3. If person had comprehensive insurance on January 1, {YEAR}, where 'YEAR' is the first calendar year of the panel (FirstPanYear), go to END_LP70 (definition below)

  • [with health insurance on January 1, {YEAR}, where 'YEAR' is the first calendar year of the panel (FirstPanYear)([PersID is included in at least one covered person array where SimplePerson.CovdJan1=Yes for that same PersID), and

  • that coverage (where SimplePerson.CovdJan1=Yes) was Public insurance (excluding IHS) or Private with hospital/physician or Medigap benefits (Insurance.HIPubPriv=Public and Insurance.HISrc<>IHS) or (Insurance.HIPubPriv=Private and (Insurance.HospHI=Yes or Insurance.MedigapHI=Yes))]

4. If person is without health insurance on January 1, {YEAR}, where 'YEAR' is the first calendar year of the panel (FirstPanYear) [PersID not included in any covered person array where SimplePerson.CovdJan1=Yes for that same PersID], go to HX750.
5. Otherwise (person had only IHS or private insurance without hospital/physician or Medigap coverage on January 1, {YEAR}, where 'YEAR' is the first calendar year of the panel), go to HX760.

HX750	**(HX1835)**	**BLAISE NAME:** CovPrev2Year		
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 FIRST MIDDLE AND LAST NAME}

Question Text:

I have recorded that {you/{PERSON}} {were/was} without insurance on January 1, {YEAR}. {Were/Was} {you/he/she} covered by a health insurance plan or program at any time in the years {YEAR} or {YEAR}?

Responses:	YES	1	END_LP70	(HX1865)
	NO	2	END_LP70	(HX1865)
	REFUSED	RF	END_LP70	(HX1865)
	DON'T KNOW	DK	END_LP70	(HX1865)

Display Instructions:	(For specifications purposes only; CAPI handles automatically): in the question text, "… on January 1, {YEAR}," 'YEAR' is the first calendar year of the panel (FirstPanYear). In the question text, "… at any time in the years {YEAR} or {YEAR}?" CAPI displays the two years prior to the first calendar year of the panel. (For panel 23 for example, this would be '2016 or 2017?').

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_70[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_70[1..25]

HX760   **(HX1860)**   **BLAISE NAME:** CovMorePrev2Year

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 FIRST MIDDLE AND LAST NAME}

Question Text:

I have recorded that {you/{PERSON}} {had health insurance coverage for (READ TYPES OF INSURANCE BELOW) coverage} {and} {{were/was} covered under the Indian Health Service} on January 1, {YEAR}. {Were/Was} {you/he/she} ever covered by {any other kind of/a more comprehensive health insurance} plan or program that paid for medical and doctor's bills at any time in the years {YEAR} or {YEAR}?

{TYPE OF COVERAGE IN HX620} {TYPE OF COVERAGE IN HX620}
{TYPE OF COVERAGE IN HX620} {TYPE OF COVERAGE IN HX620}
{TYPE OF COVERAGE IN HX620} {TYPE OF COVERAGE IN HX620}
{TYPE OF COVERAGE IN HX620} {TYPE OF COVERAGE IN HX620}
{TYPE OF COVERAGE IN HX620} {TYPE OF COVERAGE IN HX620}

Responses:	YES	1	END_LP70	(HX1865)
	NO	2	END_LP70	(HX1865)
	REFUSED	RF	END_LP70	(HX1865)
	DON'T KNOW	DK	END_LP70	(HX1865)

Display Instructions:	Roster 1 – Report no add/edit/delete

Roster Definition: This item uses the insurance array to display the types of coverage the RU member may have had if they have private insurance without hospital and physician benefits or Medigap. If person is only covered by IHS, the roster display is null and nothing is displayed for "TYPE OF COVERAGE IN HX620".

Roster Filter:
Display the coverage listed at HX620 for every insurance where:
1. Person confirmed as policyholder (HP80 is coded '1' (YES)) or selected as policyholder (selected at HP90) or selected as a dependent (selected at HP170) for at least one private insurance source with coverage on January 1 (Insurance.HIPublPriv=Private and SimplePerson.CovdJan1=Yes)
and
2. This insurance did not include hospital/physician benefits or Medigap benefits [HX620 was not coded '1' or '5' (Insurance.HospHI◇Yes and Insurance.MedigapHI◇Yes)].

Display 'had health...(BELOW)' if person confirmed as policyholder (HP80 is coded '1' (YES)) or selected as policyholder (selected at HP90) or selected as a dependent (selected at HP170) for at least one private insurance source with coverage on January 1 (Insurance.HIPublPriv=Private and SimplePerson.CovdJan1=Yes). Otherwise, use a null display.

Display '{were/was} covered under the Indian Health Service' if person was covered by IHS on January 1 [selected at HX140 (for IHS coverage) and SimplePerson.CovdJan1=Yes].
Otherwise, use a null display.

Display 'and' if person has both private and IHS as described in previous two paragraphs.

Display "any other kind of" if person selected at HX140 (for IHS coverage). Otherwise, display "a more comprehensive health insurance".
(For specifications purposes only; CAPI handles automatically): in the question text, "… on January 1, {YEAR}," 'YEAR' is the first calendar year of the panel (FirstPanYear). In the question text, "… at any times in the years {YEAR} or {YEAR}?. " CAPI displays the two years prior to the first calendar year of the panel. (For panel 23 for example, this would be '2016 or 2017?')

For "TYPE OF COVERAGE IN HX620" display:
• 'Dental' if HX620 was coded '2' for this insurance.
• 'Prescription Drugs' if HX620 was coded '3' for this insurance.
• 'Vision' if HX620 was coded '4' for this insurance.
• 'The text from HX620OS if HX620 was coded '91' for this insurance.
• 'Refused Coverage' if HX620 was coded 'RF' for this insurance.

Testing/Editing Notes:	Variable collected at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_70[1..25] Variable stored at MEPS(Fall/Spring)YYYY.HX_Main.HXLoop_70[1..25]

END_LP70   **(HX1865)**   **Item Type:** Route   **Type Class:** End Loop

Route Details: Cycle on next person that meets the conditions stated in the loop definition.

          If no more persons meet the stated conditions, end LOOP_70 and continue with BOX_560.

BOX_560   **(HX1870)**   **Item Type:** Route   **Type Class:** If Then

Route Details: If the current round is in the fall cycle (RndCycle=Fall), continue with HX770.

          If the current round is in the spring cycle (RndCycle=Spring), go to BOX_570.

HX770   **(HX1875)**   **BLAISE NAME:** FamProbPayBill

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 (   )

Question Text:

When answering the next questions, think about money that your household has spent on out of pocket expenses for medical care. We do <u>not</u> want you to count health insurance premiums, over the counter drugs, or costs that you will be reimbursed for.

In the past 12 months did anyone in the household have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.

Responses:

YES	1	HX780	(HX1880)
NO	2	HX780	(HX1880)
REFUSED	RF	HX780	(HX1880)
DON'T KNOW	DK	HX780	(HX1880)

**Display
Instructions:**

**Testing/Editing
Notes:**
Variable collected at MEPS(Fall/Spring)YYYY.HX_Main
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

HX780   **(HX1880)**   **BLAISE NAME:** FamPayOverTime

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 (   )

Question Text:

Does anyone in your household currently have any medical bills that are being paid off over time? This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from earlier years as well as this year.

Responses: YES --- 1
                        NO -- 2
                        REFUSED --- RF
                        DON'T KNOW -------------------------------------- DK

**Programmer
Instructions:**
If HX770 is coded '2' (NO), go to BOX_570. Otherwise, continue with HX790.

**Display
Instructions:**

**Testing/Editing
Notes:**
Variable collected at MEPS(Fall/Spring)YYYY.HX_Main
Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

HX790   **(HX1885)**   **BLAISE NAME:** FamUnablePay

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 (   )

Question Text:

Does anyone in your household currently have any medical bills that you are unable to pay at all?

Responses:

YES	1	BOX_570	(HX1890)
NO	2	BOX_570	(HX1890)
REFUSED	RF	BOX_570	(HX1890)
DON'T KNOW	DK	BOX_570	(HX1890)

Display Instructions:

Testing/Editing Notes: Variable collected at MEPS(Fall/Spring)YYYY.HX_Main
                                     Variable stored at MEPS(Fall/Spring)YYYY.HX_Main

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BOX_570   **(HX1890)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: Go to next questionnaire section.

[End of HX]