

# SpecWriter Data

**Form Version:** 9/11/2025 2:44:35 PM  
**Report Type:** Full Detail  
**Project Database:** WESSQL300.MEPSSpring2026  
**Language:** English  
**Spec Label:**

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

## Full Detail Spec

BOX\_00(OE1000)

Item Type: Route

Type Class: If Then

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**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\_150, BOX\_160, BOX\_170, BOX\_180, BOX\_190, BOX\_200, BOX\_205, BOX\_210.

02 Loop: LOOP\_10.

03 End Loop: END\_LP10.

04 Single Select: OE20\_01, OE30\_05, OE40, OE60\_05, OE80, OE90, OE100, OE110, OE160, OE170, OE190, OE200, OE212, OE214, OE220, OE255.

05 Single Select with Display Roster: OE50\_01, OE70.

06 Single Select with Fill in Answer Text: OE30\_01, OE60\_01, OE210.

08 Multiple Select: OE130.

14 Regular Date Entry: OE30\_02, OE30\_03, OE30\_04.

15 Regular Date Entry with Skips: OE60\_02, OE60\_03, OE60\_04.

17 Dollar Items Allowing Cents: OE180.

20 OS Text Field: OE130OS, OE190OS.

23 Text Field: OE120, OE140.

**BOX 10**

**(OE1001)**

**Item Type:** Route

**Type Class:** If Then

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**Route Details:**

**Context Header Instructions:**  
SEE CONTEXT HEADER SPEC

Throughout the specifications for this CAPI section, for displays of '{you/{POLICYHOLDER}}', display 'you' only if the current round respondent is the same PersID as the policyholder for the insurance being looped on. Otherwise, display '{POLICYHOLDER}' substituting the name of the policyholder. If the policyholder is 'POLICYHOLDER NOT LISTED IN DU' (Insurance.Plcyhldr=902), display 'PLCYHLDR NOT IN DU-' followed by the 15 character entry at HP100. If the policyholder is 'POLICYHOLDER DECEASED' (Insurance.Plcyhldr=901), display 'PLCYHLDR DECEASED-' followed by the first 15 characters of the entry at HP110 (see HP specifications).

**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, YYYY 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 Person.BegRefM, Person.BegRefD, Person.BegRefY.

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

Unless there is a more specific fill instruction provided at the item level, for any fill using the variable 'Insurance.Insurer', display the text entry stored or display "Refused Insurer" if Insurance.Insurer=RF or display "Don't Know Insurer" if Insurance.Insurer=DK. Items using Insurance.Insurer include OE110, OE120, OE160.

## Full Detail Spec

**BOX\_20****(OE1010)****Item Type:** Route**Type Class:** If Then

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**Route Details:**

If one or more current RU members were listed as a policyholder or covered person on a private health insurance source (employer, union, direct purchase) as of the previous round interview date [Insurance.HIPubPriv=Private and there is at least one RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd = {previous round} and Insurance.OrigRnd<>current round], continue with LOOP\_10.

Otherwise, go to BOX\_210.

**Programmer Instructions:**

NOTE: Definition for being listed as a policyholder or covered person on a private health insurance source (employer, union, direct purchase) as of the previous round interview date:

- Insurance is flagged as a current or former employer, union or direct purchase source that provides health insurance
- At least one current RU member is flagged as a policyholder or a covered person for this insurance
- At least one RU member was a covered person on the previous round's interview date for the health insurance provided by insurance source

## Full Detail Spec

**LOOP\_10****(OE1015)****Item Type:** Route**Type Class:** Begin Loop**Route Details:**

For each private insurance, ask OE20\_01 - END\_LP10.

Loop definition: Loop\_10 collection information about private insurance that was created in a previous round and at least one current RU member is covered as a policyholder or a dependent on the previous round's interview date. This loop cycles by policyholder, then by insurance. If the respondent is a policyholder on any insurance, cycle on that insurance first. [Insurance.HIPubPriv=Private and there is at least one RU member on the covered person array where Person.MostRecentRU=RUnit and Preload.CovdPers.LRndCovd={previous round} and Insurance.OrigRnd<>current round]

NOTE: LOOP\_10 collects information about the following situations:

1. The continuation of insurance coverage associated with an employer from the Employment (EM) section that provides health insurance and is through a 'CURRENT MAIN' or 'CURRENT MISCELLANEOUS' job that was collected in a previous round (that employer may now be either current or non-current depending on responses in RJ).
2. The continuation of insurance coverage associated with an employer or union from the Employment (EM) section that provides health insurance collected in a previous round but was not through a current main or miscellaneous job reviewed during the RJ section.
3. The continuation of insurance coverage through a direct purchase source that was collected in a previous round. This includes insurance where the policyholder was originally marked as "POLICYHOLDER NOT LISTED IN DU" and "POLICYHOLDER DECEASED".
4. The continuation of insurance coverage through insurance where the eligible dependent(s) are separated from the policyholder (the policyholder or the dependents have left the original RU). When a jobholder/policyholder leaves an RU, we will never ask RJ. This last set of conditions handles the situation where the policyholder has left the RU and left dependents behind, or the situation where the dependents have left the RU (without the policyholder). This situation will be treated as 'Dependent(s) Separated from Policyholder'. This situation can be associated with any insurance in a particular RU where they are covered persons, but the policyholder is in another RU. This situation will carryforward with the insurance every round.

This situation should never exist on insurance in an RU where the policyholder is in the same RU as all of the dependents or where the policyholder was originally created as 'POLICYHOLDER NOT LISTED IN DU' or 'POLICYHOLDER DECEASED'. See HX BOX\_10 for more information on this situation.

For all situations above, there must be at least one RU member (or the policyholder) who was a covered person on the previous round's interview date for this insurance to be reviewed in the current round.

NOTE: To determine if an RU member is considered to be covered for the insurance for the following round, either:

- OE20\_01='1' (Yes), DK or RF for that person or
- OE50\_01='1' (Yes) and at least one Person has OE20\_01='1' (Yes), DK, RF for this insurance

<b><u>OE20_01</u></b>	<b><u>(OE1035)</u></b>	<b><u>BLAISE NAME:</u></b> ConfCovd		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TYESNO	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

During our last interview, we recorded that {you/{POLICYHOLDER}} had health insurance through {INSURANCE SOURCE NAME} {which covered {you/{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}}}

{{Are/Is}/{Were/Was}}{you/{PERSON 1}} still covered through {INSURANCE SOURCE NAME} as of {today, {END DATE}/{PERSON'S END DATE}}?

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

**Programmer Instructions:** Preloaded grid type 1- forced navigation including OE20\_01, OE20\_02, OE20\_03, OE20\_04, OE20\_N.

At grid completion, if OE20 is coded '2' (NO), for at least one person, continue with OE30\_01.

Otherwise, (if OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for all persons listed at OE20), go to BOX\_30.

If insurance is through a current employer (Insurance.HISrc=Employer and Jobs.JobTp=Current Main or Current Misc), set Jobs.ConfCovd= OE20\_01 entry for the policyholder. (Check OE20\_N for the policyholder. If OE20\_N= '1' (YES), set Jobs.ConfCovd=Yes. If OE20\_N= '2' (NO), set Jobs.ConfCovd=No. If OE20\_N= 'RF' (REFUSED), set Jobs.ConfCovd=RF. If OE20\_N= 'DK' (DON'T KNOW), set Jobs.ConfCovd=DK.)

Note: Persons coded '1' (YES), 'DK' (DON'T KNOW), or 'RF' (REFUSED) are considered covered RU members for the current round.

**Display Instructions:**

Roster 1 – Report

Col #1 Header: PlcyHldr

Instructions: Display an "X" for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.

Col #2 Header: RU member

Instructions: Display the covered person's name (Person.FullName) from the covered person array. This is a protected, uneditable field.

Roster Filter:

Policyholder or person was covered on the previous round's interview date by the insurance (the policyholder or person is an RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd =[previous round])

Col #3 Header: Still Covered?

Instructions: Entry field for OE20\_01 – OE20\_N

For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

NOTE: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.

Variable question text display. Replace "{{Are/Is}/{Were/Was}}{you/{PERSON 1}} still covered through..." with:

OE20\_02: What about {you/{PERSON 2}}? {{Are/Is}/{Were/Was}} {you/he/she} still covered through {INSURANCE SOURCE NAME} as of {today, {END DATE}/{PERSON'S END DATE}}?

OE20\_03: What about {PERSON 3}?

OE20\_04: What about {PERSON 4}?

OE20\_N: Repeat question text for OE20\_02-OE20\_N for as many RU members that fit the roster filter criteria.

Display 'During our last interview...which covered {you/PERSON 1}...' in bold black text every fourth question displayed, otherwise, display the question text in brackets and lighter grayed out text.

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) or if policyholder is deceased.

Display 'today, {END DATE}' substituting the current RU level reference period end date if each person covered by this plan has a person level reference period end date that equals the current round RU reference period end date and that date is equal to the computer date.

Otherwise, display the policyholder's person level reference period end date {PERSON'S END DATE}.

<b><u>OE30_01</u></b>	<b><u>(OE1046)</u></b>	<b><u>BLAISE NAME:</u></b> EnterHIEndDate		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TDateVolunteer	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

On what date after {START DATE} did {your/{PERSON}'s} health insurance through {INSURANCE SOURCE NAME} end?

{IF INSURANCE ENDED AFTER 12/31/{YEAR}, BACK-UP AND CHANGE OE20 TO 'YES' .}

**Responses:**     ENTER DATE ----- 1    OE30\_02            (OE1047)  
                         VOLUNTEERED, ENDED BEFORE ----- 2  
                         {START DATE}

**Programmer Instructions:** Preloaded grid type 2 – forced navigation, including items OE30\_01, OE30\_02, OE\_30\_03, OE30\_04, OE30\_05.

Only display OE30\_01 and applicable follow-up items for row entries where OE20\_01 is coded '2' (NO) for this person.

If coded '2' (VOLUNTEERED, ENDED BEFORE {START DATE}), go to the next person in the grid. If no next person in grid, go to BOX\_30.

Note: Persons coded '1' (ENTER DATE) are considered covered RU members for the current round.

**Display Instructions:** Roster Report 1

Col #1 Header: PlcyHldr

Instructions: Display an "X" for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.

Col #2 Header: RU member

Instructions: Display the covered person's name (Person.FullName) from the covered person array. This is a protected, uneditable field.

Roster Filter:

Use OE20\_01 filter.

NOTE: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.

Col #3 Header: Still Covered?

Instructions: Display the entered responses from OE20\_01 for each person in a protected, uneditable field.

Col#4 Header: When Ended

Instructions: Item OE30\_01. Only display as an active cell if OE20\_01 is coded '2' (NO) for this person.

Col #5 Header: Month

Instructions: Item OE30\_02. Only display as an active cell if OE30\_01 is answered '1'.

Col #6 Header: Day

Instructions: Item OE30\_03. Only display as an active cell if OE30\_01 is answered '1' and OE30\_02 <> 'RF' (REFUSED) or 'DK' (DON'T KNOW).

Col#7 Header: Year

Instructions: Item OE30\_04. Only display as an active cell if OE30\_01 is answered '1'.

Col #8 Header: Whole Month?

Instructions: Item OE30\_05. Only display as an active cell if OE30\_02 <> RF, DK and OE30\_03=RF, DK.

Display 'IF INSURANCE ENDED AFTER 12/31/{YEAR}, .. YES.' if current round is the final round of the panel (RndType=Final), where 'YEAR' is the calendar year of the final round of the panel (InterviewDate Year -1). Otherwise, use a null display.

<b>OE30_02</b>	<b>(OE1047)</b>	<b>BLAISE NAME:</b> HIEndMM		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b> 1
<b>Type Class:</b>	Integer	<b>Field Size:</b> 2		
<b>Answer Type:</b>	{Continuous Answer.}	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b> 12

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

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

**Question Text:**

[On what date after {START DATE} did {your/{PERSON}'s} health insurance through {INSURANCE SOURCE NAME} end?]

ENTER MONTH

**Responses:**

..... 1	OE30_03	(OE1048)
REFUSED .....	RF OE30_04	(OE1049)
DON'T KNOW .....	DK OE30_04	(OE1049)

**Display Instructions:**     Display question text in brackets and in lighter grayed out text.

Full Detail Spec

**OE30\_03**                      **(OE1048)**                      **BLAISE NAME:** HIEndDD  
**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

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

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

**Question Text:**

[On what date after {START DATE} did {your/{PERSON}}’s} health insurance through {INSURANCE SOURCE NAME} end?]

ENTER DAY

**Responses:**                      ----- 1 OE30\_04                      (OE1049)  
REFUSED                      ----- RF OE30\_04                      (OE1049)  
DON'T KNOW                      ----- DK OE30\_04                      (OE1049)

**Display Instructions:**                      Display question text in brackets and in lighter grayed out text.

Full Detail Spec

**OE30\_04**

**(OE1049)**

**BLAISE NAME:** HIEndYYYY

**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

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Help Available ( )

Show Card ( )

Look Up File ( )

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

**Question Text:**

[On what date after {START DATE} did {your/{PERSON}'s} health insurance through {INSURANCE SOURCE NAME} end?]

ENTER YEAR

**Responses:**

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

**Programmer Instructions:** If OE30\_03 (day) is coded 'RF' (REFUSED) or 'DK' (DON'T KNOW) **and** OE30\_02 (month) is NOT coded 'RF' (REFUSED) or 'DK' (DON'T KNOW), continue with OE30\_5.

Otherwise, return to OE30\_01 for next person on grid.

Hard check:

1. Complete date entered at OE30\_02 - OE30\_04 must not be prior to the current round's RU level reference period start date. If full date is prior to start date, display the following message: "IF COVERAGE ENDED PRIOR TO {REF PERIOD START DATE}, BACK-UP TO OE30\_01 (EnterHIEndDate) AND CORRECT RESPONSE."
2. Complete date entered at OE30\_02 - OE30\_04 must be on or before (i.e., < or =) the person's reference period end date for this round (EndRefM, EndRefD). When current round is the final round of the panel (RndType=Final), that is typically Dec. 31, [YEAR] where 'YEAR' is the calendar year of the final round of the panel (InterviewDate Year -1). If not, display the following message: "COVERAGE END DATE MUST BE ON OR BEFORE {PERSON'S REFERENCE PERIOD END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT ENTRIES. IF COVERAGE ENDED AFTER PERSON LEFT RU, ENTER {PERSON'S REFERENCE PERIOD END DATE}."

**Display Instructions:** Display question text in brackets and in lighter grayed out text.





<b><u>OE40</u></b>	<b><u>(OE1075)</u></b>	<b><u>BLAISE NAME:</u></b> OEstExCovg		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TYESNO	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

Is this coverage through {STATE EXCHANGE NAME-A} {, [which may be known as {ALIAS B} {or {ALIAS C}}]}?

<b>Responses:</b>	YES .....	1	BOX_60	(OE1110)
	NO .....	2	BOX_60	(OE1110)
	REFUSED .....	RF	BOX_60	(OE1110)
	DON'T KNOW .....	DK	BOX_60	(OE1110)

**Display Instructions:**

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(s) associated with the state in which interview is being conducted.

Full Detail Spec

BOX\_60

(OE1110)

Item Type: Route

Type Class: If Then

**Route Details:**

If at least one current RU member not displayed at OE20\_01, continue with OE50\_01.  
NOTE: This means at least one current RU member not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <> {previous round}).

Otherwise, go to BOX\_80.

OE50\_01

(OE1115)

BLAISE NAME: CovdHISrc

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'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**

Now think about {yourself/{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}} and whether {you/{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}} {have/has} been covered by {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}.

{Since {START DATE}/Between {START DATE} and {END DATE}}, {{have/has}/{{were/was}}}{ you/{PERSON 1}} {been} covered by {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}?

**Responses:**

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

**Programmer Instructions:** Preloaded grid type 2 – forced navigation including OE50\_01, OE50\_02, OE50\_03, OE50\_04, OE50\_N.

At grid completion, if OE50 is coded '1' (YES), for at least one person, continue with OE60\_01.

Otherwise (OE50 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for all persons listed at OE50), go to BOX\_90.

Note: Persons coded '1' (YES) are considered covered RU members for the current round.

**Display Instructions:**

Roster Report 1

Col #1 Header: RU member

Instructions: Display RU members' first, middle, and last names (Person.FullName)

Roster Filter:

Display all current RU members that were not displayed at OE20\_01. That is, display persons who were not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <>{previous round}).

For the first fill of the first paragraph, display "yourself" if only one person is eligible for display and that person is the respondent. Otherwise, for the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute "yourself" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

For the second fill of the first paragraph, display "you" if only one person is eligible for display and that person is the respondent. Otherwise, for the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

For the third fill of the first paragraph, display 'have' if only one person is eligible for display and that person is the respondent OR if multiple people are eligible for display. Otherwise, if only one person is eligible for display and that person is NOT the respondent, display 'has.'

Col #2 Header: Covered?

Instructions: Entry field for OE50\_01 – OE50\_N

Variable text display. Replace "{Since {START DATE}/Between {START DATE} and {END

DATE}}, {{have/has}/(were/was)}{ you/{PERSON 1}} {been} covered by  
{your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}?" with:

OE50\_02: What about {you/{PERSON 2}}? {{Has/Have}/(Were/Was)} {you/he/she} {been}  
covered by {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}  
{since {START DATE}/between {START DATE} and {END DATE}}?

OE50\_03: What about {PERSON 3}?

OE50\_04: What about {PERSON 4}?

OE50\_N: Repeat question text for OE50\_02-OE50\_N for as many RU members that fit the  
roster filter criteria.

Display "Now think about {yourself/{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON  
N...}} and whether {you/{PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}}  
{have/has} been covered by  
{your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}." in gray  
text when asking questions OE50\_02-OE50\_N.

In the second paragraph, 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).

In the second paragraph, display '{have/has}' 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 'been' if current round is not the final round of the panel  
(RndType<>Final). Otherwise, use a null display.

Full Detail Spec

**OE60\_01**

**(OE1120)**

**BLAISE NAME:** CovgStartDate

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

**Type Class:** Enumerated      **Field Size:**

**Answer Type:** TDateVolunteer2      **Answers allowed:** 1      **ArrayMax:**      **Max value:**

---

Help Available ( )

Show Card ( )

Look Up File ( )

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

**Question Text:**

On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?

**Responses:**      ENTER DATE ..... 1      OE60\_02      (OE1125)  
VOLUNTEERED, BEGAN BEFORE ..... 2  
{START DATE}

**Programmer Instructions:** Preloaded grid type 2 – forced navigation including items OE60\_01, OE60\_02, OE60\_03, OE60\_04, OE60\_05.

Only display OE60\_01 and applicable follow-up items for row entries where OE50\_01 is coded '1' (YES) for this person.

If coded '2' (VOLUNTEERED, BEGAN BEFORE {START DATE}), go to the next person in the grid. If no next person in grid, go to BOX\_70.

**Display Instructions:**

Roster Report 1

Col #1 Header: RU Member

Instructions: Display RU members' full name. (Person.FullName)

Roster Filter:

Use OE50\_01 filter.

Col #2 Header: Covered?

Instructions: Display the entered responses from OE50\_01 for each person in a protected, uneditable field.

Col #3 Header: When Begin

Instructions: Item OE60\_01. Only display as an active cell if OE50\_01 is coded '1' (YES) for this person.

Col #4 Header: Month

Instructions: Item OE60\_02. Only display as an active cell if OE60\_01 is answered '1'.

Col #5 Header: Day

Instructions: Item OE60\_03. Only display as an active cell if OE60\_01 is answered '1' and OE60\_02 <> 'RF' (REFUSED) or 'DK' (DON'T KNOW).

Col#6 Header: Year

Instructions: Item OE60\_04. Only display as an active cell if OE60\_01 is answered '1'.

Col#7 Header: Whole Month?

Instructions: Item OE60\_05. Only display as an active cell if OE60\_02 <> RF, DK and OE60\_03 =RF, DK.

Full Detail Spec

**OE60\_02**

**(OE1125)**

**BLAISE NAME:** CovgStartMM

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

**Type Class:** Date **Field Size:**

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

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Help Available ( )

Show Card ( )

Look Up File ( )

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

**Question Text:**

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?]

ENTER MONTH

<b>Responses:</b>	.....	1	OE60_03	(OE1130)
	REFUSED	.....	RF OE60_04	(OE1135)
	DON'T KNOW	.....	DK OE60_04	(OE1135)

**Display Instructions:** Display question text in brackets and in lighter grayed out text.

Full Detail Spec

**OE60\_03**

**(OE1130)**

**BLAISE NAME:** CovgStartDD

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

**Type Class:** Date **Field Size:**

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

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Help Available ( )

Show Card ( )

Look Up File ( )

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

**Question Text:**

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?]

ENTER DAY

<b>Responses:</b>	.....	1	OE60_04	(OE1135)	
	REFUSED	.....	RF	OE60_04	(OE1135)
	DON'T KNOW	.....	DK	OE60_04	(OE1135)

**Display Instructions:** Display question text in brackets and in lighter grayed out text.

Full Detail Spec

**OE60\_04**

**(OE1135)**

**BLAISE NAME:** CovgStartYYYY

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

**Type Class:** Date **Field Size:**

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

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Help Available ( )

Show Card ( )

Look Up File ( )

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

**Question Text:**

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?]

ENTER YEAR

**Responses:**

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

**Programmer  
Instructions:**

If OE60\_03 (day) is coded 'RF' (REFUSED) or 'DK' (DON'T KNOW) **and** OE60\_02 (month) is NOT coded 'RF' (REFUSED) or 'DK' (DON'T KNOW), continue with OE60\_05.  
Otherwise, return to OE60\_01 for next person on grid.

Hard checks:

1. Complete date entered at OE60\_02-OE60\_04 must not be prior to the current round's RU level reference period start date. If full date is prior to start date, display the following message: "IF COVERAGE BEGAN PRIOR TO {REF PERIOD START DATE}, BACK- UP TO OE60\_01 (CovgStartDate) AND CORRECT RESPONSE."

2. Complete date entered at OE60\_02-OE60\_04 must be on or before the person's reference period end date. If not, display the following message: "COVERAGE FOR {PERSON} CANNOT BEGIN AFTER {PERSON'S END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT DATE ENTRIES OR BACK-UP TO OE50 (insert blaise name) AND CODE PERSON AS NOT COVERED."

Soft Check:

Complete date entered at OE60\_02-OE60\_04 should be on or before the complete date entered at OE30\_02-OE30\_04 for the policyholder (if applicable). If not, display the following message: "UNLIKELY RESPONSE. POLICYHOLDER'S COVERAGE ENDED ON {OE30\_02-OE30\_04 DATE}. COVERAGE FOR {PERSON} BEGAN AFTER THAT DATE. VERIFY AND CORRECT DATE ENTRIES IF NECESSARY."

**Display  
Instructions:**

Display question text in brackets and in lighter grayed out text.

Full Detail Spec

<b><u>OE60_05</u></b>	<b><u>(OE1140)</u></b>	<b><u>BLAISE NAME:</u></b> OECovdWholeTime		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TENDMONTH	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

[On what date since {START DATE} did the health insurance through {INSURANCE SOURCE NAME} begin for {you/{PERSON}}?]

{Were/Was} {you/he/she} covered under that insurance the whole month or part of the month?

**Responses:**

WHOLE MONTH	.....	1
PART OF THE MONTH	.....	2
REFUSED	.....	RF
DON'T KNOW	.....	DK

**Programmer Instructions:**     Return to OE60\_01 for next person on grid.

**Display Instructions:**     Display first paragraph of question text in brackets and in lighter grayed out text.

<b><u>BOX_70</u></b>	<b><u>(OE1145)</u></b>	<b>Item Type:</b> Route	<b>Type Class:</b> If Then
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**Route Details:**     Continue with BOX\_80.

**Programmer  
Instructions:**

Placeholder for MHOP specifications. This will be deleted once those specifications are available. (Data delivery needs to review to make sure these are the correct settings.)

Determine 'CONTINUOUS COVERAGE' (decide what is needed for CAPI vs. MHOP).

- If OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for the policyholder, flag all persons where OE50 is coded '1' (YES) as 'CONTINUOUS COVERAGE' from the date entered at OE60\_02-OE60\_04 until the RU level reference period end date (interview date).
- If OE20 is coded '2' (NO) for the policyholder, flag all persons where OE50 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) as 'CONTINUOUS COVERAGE' from the date entered at OE60\_02-OE60\_04 until the date entered at OE30\_02-OE30\_04 for the policyholder.
- If OE20 was not asked for the policyholder, use the OE20 value for the oldest PID with coverage to determine continuous coverage settings.

**BOX 80**

**(OE1146)**

**Item Type:** Route

**Type Class:** If Then

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**Route Details:**

If:

- At least one current RU member is coded as still covered today or newly covered [(OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) for at least one RU member) or (OE50\_01 is coded '1' (YES) for at least one RU member)] and
- the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job [(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) in the current round)], go to OE70.

If:

- No current RU member is coded as still covered today and no one is newly covered [(OE20\_01 is coded '2' (NO) for all RU members listed) and (OE50\_01 is coded '2' (NO), 'RF' (REFUSED) or 'DK' (DON'T KNOW) for all RU members listed)] and
- the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job [(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) in the current round)], go to OE80.

Otherwise, go to BOX\_90.

<b><u>OE70</u></b>	<b><u>(OE1147)</u></b>	<b><u>BLAISE NAME:</u></b> OECOBRAPlan		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TYESNO	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

Is {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME} that covers {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...} extended through COBRA?

HELP: F1

<b>Responses:</b>	YES .....	1	BOX_90	(OE1150)
	NO .....	2	BOX_90	(OE1150)
	REFUSED .....	RF	BOX_90	(OE1150)
	DON'T KNOW .....	DK	BOX_90	(OE1150)

**Display  
Instructions:**

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

Roster Definition: Display the covered person's name (Person.FullName).

Roster Filter:

Person or policyholder is on the covered person array and is currently covered by the insurance being looped on. [(OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) for this RU member) or (OE50\_01 is coded '1' (YES) for this RU member)]

For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N...}, display the list of RU members according to the above roster filter specifications. Display full name. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".

**Help Text:**

Full Detail Spec

<b>OE80</b>	<b>(OE1148)</b>	<b>BLAISE NAME:</b> CovgContinAftEmp		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TYESNO	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**

Did the health insurance {you/{POLICYHOLDER}} had through {INSURANCE SOURCE NAME} continue for any period of time after {you/he/she} stopped working at {INSURANCE SOURCE NAME}?

<b>Responses:</b>	YES .....	1	OE90	(OE1149)
	NO .....	2	BOX_90	(OE1150)
	REFUSED .....	RF	OE90	(OE1149)
	DON'T KNOW .....	DK	OE90	(OE1149)

**Display Instructions:**

Full Detail Spec

**OE90**

**(OE1149)**

**BLAISE NAME:** CovgContinCOBRA

**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 (COBRAHelp)

Show Card ( )

Look Up File ( )

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

**Question Text:**

Did that health insurance continue through COBRA?

HELP: F1

<b>Responses:</b>	YES .....	1	BOX_90	(OE1150)
	NO .....	2	BOX_90	(OE1150)
	REFUSED .....	RF	BOX_90	(OE1150)
	DON'T KNOW .....	DK	BOX_90	(OE1150)

**Display Instructions:**

**Help Text:**

Full Detail Spec

BOX\_90

(OE1150)

Item Type: Route

Type Class: If Then

**Route Details:**

If [policyholder is part of RU and at least one other current RU member is listed as a covered person with coverage during the reference period (Insurance.Plyhldr=PersID where Person.MostRecentRU=RUUnit and at least one other RU member is on the covered person array where OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) or OE50\_01 is coded '1' (YES))] or [(if policyholder not part of the RU) and (at least one current RU member is listed as a covered person with coverage during the reference period) (Insurance.Plyhldr=901 or 902 or PersID where Person.MostRecentRu<>RUID and at least one other RU member is on the covered person array where OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) or OE50\_01 is coded '1' (YES))], go to BOX\_100.

Otherwise, continue with OE100.

OE100

(OE1155)

BLAISE NAME: OECovPersOutRU

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 (CovdDependHelp)

Show Card ( )

Look Up File ( )

**Context Header:**

{POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**

{Does/Between {START DATE} and {END DATE}, did} {your/{POLICYHOLDER}'s} health coverage through {INSURANCE SOURCE NAME} cover as dependents any persons who do not live here?

HELP: F1

**Responses:**

YES	.....	1	BOX_100	(OE1160)
NO	.....	2	BOX_100	(OE1160)
REFUSED	.....	RF	BOX_100	(OE1160)
DON'T KNOW	.....	DK	BOX_100	(OE1160)

**Programmer Instructions:** If coded '1' (YES), set Insurance.CovPersOutRU=Yes.

**Display Instructions:** 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).

**Help Text:**

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**BOX\_100**      **(OE1160)**      **Item Type:** Route      **Type Class:** If Then

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**Route Details:**      If [one or more current RU members are still covered by this insurance on the current round's interview date, that is, at least one person at OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) or at least one person at OE50\_01 is coded '1' (YES) (At least one RU member is on the covered person array where OE20\_01 is coded '1' (YES), 'RF' (REFUSED) or 'DK' (DON'T KNOW) or OE50\_01 is coded '1' (YES))] and [insurance is not treated as 'Dependent(s) Separated from Policyholder'(i.e., original RU member policyholder is still part of this RU)], continue with OE110.

Otherwise, go to END\_LP10.

Full Detail Spec

**OE110**

**(OE1165)**

**BLAISE NAME:** PlanNameChange

**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'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}

**Question Text:**

{Last time we recorded that {you/{POLICYHOLDER}} {were/was} covered by {PRELOAD.INSURANCE.INSURER}.}

{Since {START DATE}, has there been/Between {START DATE} and {END DATE}, was there} any change in the plan name of the health insurance {you/{POLICYHOLDER}} {{have/has}/had} through {PRELOAD.INSURANCE.HISRCNAME}?

**Responses:**

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

**Programmer Instructions:** If coded '1' (YES) and insurance is from 'INSURANCE COMPANY OR AGENT/BROKER (Insurance.DirectPurchTp=InsuranceCoAgentBroker), continue with OE120. Else, if coded '1' (YES), go to OE130.

If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) and if

- Current round is a round that crosses two calendar years (RndType=Cross] and if OE40 is coded '1' (YES), go to BOX\_150.

Else, if coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), go to BOX\_160.

Note: If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), the Insurance Source Name and the Insurer Name stay the same as the preloaded values.

**Display Instructions:**

Display first paragraph if there is a value for PRELOAD.INSURANCE.INSURER (Preload.Insurance.Insurer <> EMPTY, RF or DK]. Otherwise, use a null display.

For 'PRELOAD.INSURANCE.INSURER', display the name of this insurance's previous round's insurer. That is, display the name of the plan (providing Medicare Supplement/Medigap benefits or hospital/physician benefits) entered at HX630, HX640, or OE140 in the previous round (Preload.Insurance.Insurer).

For 'PRELOAD.INSURANCE.HISRCNAME', display the name of this insurance's previous round's insurance source name (Preload.Insurance.HISrcName).

Display 'Since {START DATE}, has there been' and '{have/has}' if current round is not the final round of the panel (RndType<>Final). Display 'Between {START DATE} and {END DATE}, was there' and 'had' if current round is the final round of the panel (RndType=Final).



Full Detail Spec

**OE130**                      **(OE1175)**                      **BLAISE NAME:** CodeAllOEHICovg  
**Item Type:**                      Question                      **Field kind:** Datafield    **ArrayMin:**                      **Min value:**  
**Type Class:**                      Enumerated                      **Field Size:**  
**Answer Type:**                      TOE102437                      **Answers allowed:** 12    **ArrayMax:**                      **Max value:**

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

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

**Question Text:**

📖HX-6

Looking at card HX-6, what type of health insurance coverage {{do/does}/did} {you/{POLICYHOLDER}}

{now} have through {INSURANCE SOURCE NAME}'s new plan {as of {END DATE}}?

PROBE: Any other health coverage through {INSURANCE SOURCE NAME}?

ENTER ALL THAT APPLY.

HELP:F1

**Responses:**                      HOSPITAL AND PHYSICIAN BENEFITS,        ..... 1  
   INCLUDING COVERAGE THROUGH AN  
   HMO  
   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 codes, continue with OE130OS. Otherwise, go to BOX\_110.  
For specifications purposes only: CAPI does not allow 'RF' (REFUSED) or 'DK' (DON'T KNOW) 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 and set Insurance.MedigapHI=EMPTY.  
If '5' (MEDIGAP) is one of the selections, set Insurance.MedigapHI=Yes and set Insurance.HospHI=EMPTY.  
If 'DK' (DON'T KNOW) or 'RF' (REFUSED), set both Insurance.HospHI and Insurance.MedigapHI to EMPTY.

**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 'now' if current round is not the final round of the panel (RndType<>Final) and if insurance is still current for at least one RU member (OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) or OE50\_01 is

coded '1' (YES) for at least one RU member). Otherwise, use a null display. Display 'as of {END DATE}' if current round is the final round of the panel (RndType=Final). Otherwise, use a null display.

**Help Text:**



## Full Detail Spec

**BOX\_120****(OE1195)****Item Type:** Route**Type Class:** If Then

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**Route Details:**

If OE130 is coded '1' (HOSPITAL AND PHYSICIAN BENEFITS) or '5' (MEDICARE SUPPLEMENT/MEDIGAP), alone or with any other combination of codes (Insurance.MedigapHI=Yes or Insurance.HospHI=Yes), continue with OE140.

Otherwise, go to BOX\_150.

**Programmer Instructions:**

If insurance is **not** from an 'INSURANCE COMPANY OR AGENT/BROKER' (Insurance.DirectPurchTp<> InsuranceCoAgentBroker) and if OE130 is **not** coded '1' (HOSPITAL AND PHYSICIAN BENEFITS) or '5' (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.MedigapHI<>Yes and Insurance.HospHI<>Yes), there is no longer an insurer associated with this insurance because the pair no longer provides either hospital and physician benefits or Medigap benefits [set Insurance.Insurer=Empty].

Note (To verify with data delivery): This instruction is not currently at OE130 because if the insurance is from an agent, an insurance company, or HMO, the insurer name is automatically set regardless of the coverage provided.

Full Detail Spec

**OE140**                      **(OE1200)**                      **BLAISE NAME:** HospMedigapPlanName  
**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:**

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

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

**Question Text:**

What is the new plan name for {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME} which provides the {hospital and physician benefits/Medicare Supplement or Medigap benefits}?

IF MORE THAN ONE NAME, PROBE: What is the main new plan name?

ENTER NAME OF MAIN INSURER THAT PROVIDES THE {HOSPITAL AND PHYSICIAN/MEDIGAP} BENEFITS.

**Responses:**                      ..... 1 BOX\_130                      (OE1205)  
REFUSED ..... RF BOX\_130                      (OE1205)  
DON'T KNOW ..... DK BOX\_130                      (OE1205)

**Programmer Instructions:** Set Insurance.Insurer = OE140.

Soft check:  
If the text string "DENTAL" is entered upon leaving the entry field by pressing 'TAB' or 'ENTER', display the following: "UNLIKELY RESPONSE. PLAN NAME INCLUDES THE WORD 'DENTAL'. VERIFY WITH R WHAT COVERAGE THIS PLAN PROVIDES. IF {INSURER NAME AT OE140} PROVIDES {HOSPITAL AND PHYSICIAN/MEDIGAP} BENEFITS, SELECT 'SUPPRESS'.  
  
IF NOT, PROBE R FOR CORRECT PLAN NAME OF INSURER THAT PROVIDES {HOSPITAL AND PHYSICIAN/MEDIGAP} BENEFITS."

**Display Instructions:** Display 'hospital and physician benefits' and 'HOSPITAL AND PHYSICIAN' if OE130 is coded '1' (HOSPITAL AND PHYSICIAN BENEFITS), but not coded '5' (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Display 'Medicare Supplement or Medigap benefits' and 'MEDIGAP' if OE130 is coded '5' (MEDICARE SUPPLEMENT/MEDIGAP) (Insurance.MedigapHI=Yes).

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<b><u>BOX 130</u></b>	<b><u>(OE1205)</u></b>	<b>Item Type:</b> Route	<b>Type Class:</b> If Then
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**Route Details:** Ask the Managed Care (MC) section for this insurer (Insurance.Insurer).  
At completion of Managed Care (MC) section, continue with BOX\_150.

## Full Detail Spec

**BOX\_150****(OE1220)****Item Type:** Route**Type Class:** If Then**Route Details:**

Continue with OE160 if the insurance meets the following conditions:  
 [If HP50 was coded '1' (YES, PLAN IS EXCHANGE) the round this insurance was created] or [if this insurance set to 'EXCHANGE COVERAGE' (Insurance.DirectPurchTp= ExchangeMarketplace) the round it was created] or [if insurance is exchange insurance through a SE, FS=1 job (Insurance.HISrc=Employer and HP40=4) the round it was created; Preload.Insurance.HP40AnsRndCreated] or [if insurance was made exchange in a round that crosses two calendar years (RndType=Cross) (OE40 was coded '1' (YES)) during the current round or in a previous round (current OE40 value or if OE40=EMPTY, check Preload.Insurance.OE40Ans)]

And

- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.]

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.Plychldr=901 or 902). Otherwise, go to BOX\_160.

Full Detail Spec

**OE160**                      **(OE1225)**                      **BLAISE NAME:** MetalPlan  
**Item Type:**                      Question                      **Field kind:** Datafield    **ArrayMin:**                      **Min value:**  
**Type Class:**                      Enumerated                      **Field Size:**  
**Answer Type:**                      TPLANMETL                      **Answers allowed:** 1    **ArrayMax:**                      **Max value:**

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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/{POLICYHOLDER}'s} {INSURANCE.INSURER} plan a platinum, gold, silver, bronze, or catastrophic plan?

HELP: F1

**Responses:**

PLATINUM PLAN .....	1	BOX_160	(OE1230)
GOLD PLAN .....	2	BOX_160	(OE1230)
SILVER PLAN .....	3	BOX_160	(OE1230)
BRONZE PLAN .....	4	BOX_160	(OE1230)
CATASTROPHIC PLAN .....	5	BOX_160	(OE1230)
IF VOLUNTEERED: SOMETHING ELSE .....	6	BOX_160	(OE1230)
REFUSED .....	RF	BOX_160	(OE1230)
DON'T KNOW .....	DK	BOX_160	(OE1230)

**Display Instructions:**

For 'INSURANCE.INSURER' display the name of the plan's current round insurer if it has an entry other than 'RF' or 'DK' or EMPTY (Insurance.Insurer<>RF, DK or EMPTY). Otherwise, use a null display.

Note: This may be the text entry made or auto-coded at OE140 if OE110 was coded '1' (YES) or it may be the name of the insurer from the preload that was set as the current round insurer if OE110 was coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW).

**Help Text:**

## Full Detail Spec

**BOX\_160****(OE1230)****Item Type:** Route**Type Class:** If Then**Route Details:**

If current round is during the fall data collection cycle (RndType=Within), continue with BOX\_170.

If current round is a round that crosses two calendar years (RndType=Cross), go to OE170.

Otherwise (if RndType=Final), go to BOX\_205.

**BOX\_170****(OE1240)****Item Type:** Route**Type Class:** If Then**Route Details:**

Note: You are routed to BOX\_170 during all rounds of the fall data collection cycle (RndType=Within). This box specifies a “likely exchange” check. BOX\_180 is a similar check made in a round that crosses two calendar years (RndType=Cross).

Continue with OE170 if this insurance meets the following conditions:

- [Is a ‘PROFESSIONAL ASSOCIATION’ (HP40=1), ‘GROUP’ (HX200 or HX300=4 or HP40=2) or ‘INSURANCE FROM COMPANY OR AGENT/BROKER’ (HX200 or HX300=3 or HP40=3) or ‘STATE EXCHANGE OR FEDERAL MARKETPLACE COVERAGE’ (HX200 or HX300=2 or HP40=4) or ‘UNKNOWN TYPE- COLLECTED AT OTHER’ (HX200 or HX300=91 or HP40=91) in the round the pair was first created [(Insurance.DirectPurchTp=GroupAssociation, InsuranceCoAgentBroker, ExchangeMarketplace, Other) or (Insurance.HISrc=Employer and HP40= 1, 2, 3, 4, or 91) the round it was created; Preload.Insurance.HP40AnsRndCreated]
- And
- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.]
- 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\_205.

Full Detail Spec

<b>OE170</b>	<b>(OE1245)</b>	<b>BLAISE NAME:</b> OEFamPayPrem		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TMSUPPAY	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

**Context Header:**     {POLICYHOLDER'S 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		
YES, PAY SOME OF PREMIUM/COST .....	2		
YES, BUT DON'T KNOW IF PAY ALL OR .....	3		
SOME OF PREMIUM/COST			
NO, DO NOT PAY .....	4	BOX_190	(OE1280)
REFUSED .....	RF	BOX_190	(OE1280)
DON'T KNOW .....	DK	BOX_190	(OE1280)

**Programmer Instructions:** If coded '1' (YES, PAY SOME OF PREMIUM/COST), '2' (YES, PAY SOME OF PREMIUM/COST) or '3' (YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST) and if:

- [current round crosses two calendar years (RndType=Cross)], continue with OE180.

If coded '1' (YES, PAY SOME OF PREMIUM/COST), '2' (YES, PAY SOME OF PREMIUM/COST) or '3' (YES, BUT DON'T KNOW IF PAY ALL OR SOME OF PREMIUM/COST) and current round is within a single calendar year (RndType=Within), go to OE200.

**Display Instructions:**

**Help Text:**

<b>OE180</b>	<b>(OE1255)</b>	<b>BLAISE NAME:</b> OEPayPremAmt		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b> 0
<b>Type Class:</b>	Real	<b>Field Size:</b> 9,2		
<b>Answer Type:</b>	{Continuous Answer.}	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b> 999999.99

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

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

**Question Text:**

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

ENTER AMOUNT

**Responses:**

.....	1	OE190	(OE1260)
REFUSED	.....	RF BOX_180	(OE1270)
DON'T KNOW	.....	DK BOX_180	(OE1270)

**Programmer Instructions:** Allow for an entry of dollars and cents.

**Display Instructions:** Display OE180, OE190, and OE190OS on the same form pane.

<b>OE190</b>	<b>(OE1260)</b>	<b>BLAISE NAME:</b> OEPayPremUnit		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TCOVRUNIT	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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

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

**Question Text:**  
Is that per year, per month, per week, or what?  
UNIT OF COVERAGE:

<b>Responses:</b>	PER YEAR .....	1	BOX_180	(OE1270)
	EVERY 3 MONTHS (QUARTERLY) .....	2	BOX_180	(OE1270)
	EVERY 2 MONTHS (BIMONTHLY) .....	3	BOX_180	(OE1270)
	PER MONTH .....	4	BOX_180	(OE1270)
	PER WEEK .....	5	BOX_180	(OE1270)
	EVERY 2 WEEKS (BIWEEKLY) .....	6	BOX_180	(OE1270)
	2 TIMES PER YEAR (SEMI-ANNUALLY) .....	7	BOX_180	(OE1270)
	2 TIMES PER MONTH (SEMI-MONTHLY) .....	8	BOX_180	(OE1270)
	OTHER .....	91	OE190OS	(OE1265)
	REFUSED .....	RF	BOX_180	(OE1270)
	DON'T KNOW .....	DK	BOX_180	(OE1270)

**Display Instructions:** Display OE180, OE190 and OE190OS on the same form pane.

<b>OE190OS</b>	<b>(OE1265)</b>	<b>BLAISE NAME:</b> OEPayPremUnitOS		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	String	<b>Field Size:</b> 30		
<b>Answer Type:</b>	{Continuous Answer.}	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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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_180	(OE1270)
REFUSED .....	RF	BOX_180	(OE1270)
DON'T KNOW .....	DK	BOX_180	(OE1270)

**Display Instructions:** Display OE180, OE190 and OE190OS on the same form pane.

## Full Detail Spec

**BOX\_180****(OE1270)****Item Type:** Route**Type Class:** If Then**Route Details:**

Note: You only are routed to BOX\_180 in a round that crosses two calendar years (RndType=Cross). This box specifies a “likely exchange” check. BOX\_170 is a similar check made in all rounds of the fall data collection cycle (RndType=Within).

Continue with OE200 if this insurance meets the following conditions:

- [Is a ‘PROFESSIONAL ASSOCIATION’ (HP40=1), ‘GROUP’ (HX200 or HX300=4 or HP40=2) or ‘INSURANCE FROM COMPANY OR AGENT/BROKER’ (HX200 or HX300=3 or HP40=3) or ‘STATE EXCHANGE OR FEDERAL MARKETPLACE COVERAGE’ (HX200 or HX300=2 or HP40=4) or ‘UNKNOWN TYPE- COLLECTED AT OTHER’ (HX200 or HX300=91 or HP40=91) in the round the pair was first created] [(Insurance.DirectPurchTp=GroupAssociation, InsuranceCoAgentBroker, ExchangeMarketplace, Other) or (Insurance.HISrc=Employer and HP40= 1, 2, 3, 4, or 91) the round it was created; Preload.Insurance.HP40AnsRndCreated] And
- Insurance provides HOSPITAL AND PHYSICIAN BENEFITS but not MEDIGAP benefits in the current or previous round [(Insurance.HospHI=Yes and Insurance.MedigapHI<>Yes). Use OE130 value if asked, otherwise use preloaded values set to current round values as described earlier.] 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.Plychldr=901 or 902).

Otherwise, go to BOX\_190.

Full Detail Spec

<b>OE200</b>	<b>(OE1275)</b>	<b>BLAISE NAME:</b> OEPremSubsdz		
<b>Item Type:</b>	Question	<b>Field kind:</b> Datafield	<b>ArrayMin:</b>	<b>Min value:</b>
<b>Type Class:</b>	Enumerated	<b>Field Size:</b>		
<b>Answer Type:</b>	TYESNO	<b>Answers allowed:</b> 1	<b>ArrayMax:</b>	<b>Max value:</b>

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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_190	(OE1280)
NO	.....	2	BOX_190	(OE1280)
REFUSED	.....	RF	BOX_190	(OE1280)
DON'T KNOW	.....	DK	BOX_190	(OE1280)

**Display Instructions:**

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**BOX\_190**                      **(OE1280)**                      **Item Type:** Route                      **Type Class:** If Then

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**Route Details:**     If current round is a round that crosses two calendar years (RndType=Cross), continue with BOX\_200. Otherwise, go to BOX\_205.

Full Detail Spec

**BOX\_200**

**(OE1285)**

**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 OE130 = DK/RF or if Insurance.PL\_CodeAllHICovgTypes = DK/RF, continue with OE210.

Otherwise, go to BOX\_205.

**OE210**

**(OE1290)**

**BLAISE NAME:** OEAnnDeductAmt

**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'S 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 {\$1,700/\$3,400}, or is it {\$1,700/\$3,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

HELP:F1

**Responses:**

LESS THAN {\$1,700/\$3,400}	.....	1	OE212	(OE1292)
{ \$1,700/\$3,400 } OR MORE	.....	2	OE214	(OE1294)
NO ANNUAL DEDUCTIBLE	.....	3	BOX_205	(OE1297)
REFUSED	.....	RF	BOX_205	(OE1297)
DON'T KNOW	.....	DK	BOX_205	(OE1297)

**Full Detail Spec****Display****Instructions:**

Use a null display for 'family' and display '\$1,700' in the question text and '\$1,700' in the response category options if insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Pclyhldr = only PersID in covered person array)

OR

- The policyholder is deceased and there is exactly one covered person (Insurance.Pclyhldr=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 '\$3,400' in the question text and '\$3,400' in the response category options.

**Help Text:**



## Full Detail Spec

**Display****Instructions:**

Display “[Is the {family} annual deductible for medical care for this plan less than {\$1,700/\$3,400}, or is it {\$1,700/\$3,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]” in greyed out text. Use a null display for ‘family’ and display ‘\$1,700’ in the greyed out question text if this insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Plychldr = only PersID in covered person array)

OR

- The policyholder is deceased and there is exactly one covered person (Insurance.Plychldr= 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 ‘\$3,400’ in the greyed out question text.

For “Is the {family} annual deductible less than {\$850/\$1,700} or is it {\$850/\$1,700} to {\$1,699/\$3,399}?”, use a null display for ‘family’ and display ‘\$850’ and ‘\$1,699’ in the question text and also display ‘\$850’ in response option 1 and ‘\$850’ and ‘\$1,699’ in response option 2 if this insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Plychldr = only PersID in covered person array)

OR

- The policyholder is deceased and there is exactly one covered person (Insurance.Plychldr= 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’, ‘\$1,700’ and ‘\$3,399’ in the question text and also display ‘\$1,700’ in response option 1 and ‘\$1,700’ and ‘\$3,399’ in response option 2.

Full Detail Spec

**OE214**

**(OE1294)**

**BLAISE NAME:** OEAnnDeductRngHI

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

**Type Class:** Enumerated **Field Size:**

**Answer Type:** TANDEDCTRNGHI **Answers allowed:** 1 **ArrayMax:** **Max value:**

Help Available ( )

Show Card ( )

Look Up File ( )

**Context Header:** {POLICYHOLDER'S 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 {\$1,700/\$3,400}, or is it {\$1,700/\$3,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]

Is the {family} annual deductible {\$1,700/\$3,400} to {\$3,399/\$6,799} or is it {\$3,400/\$6,800} or more?

<b>Responses:</b>	{ \$1,700/\$3,400 } TO { \$3,399/\$6,799 }	----- 1	OE220	(OE1295)
	{ \$3,400/\$6,800 } OR MORE	----- 2	OE220	(OE1295)
	REFUSED	----- RF	OE220	(OE1295)
	DON'T KNOW	----- DK	OE220	(OE1295)

**Display**  
**Instructions:**

Display “[Is the {family} annual deductible for medical care for this plan less than {\$1,700/\$3,400}, or is it {\$1,700/\$3,400} or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.]” in greyed out text. Use a null display for ‘family’ and display ‘\$1,700’ in the greyed out question text if this insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Plyhldr = only PersID in covered person array)

OR

- The policyholder is deceased and there is exactly one covered person (Insurance.Plyhldr= 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 ‘\$3,400’ in the greyed out question text.

For “Is the {family} annual deductible {\$1,700/\$3,400} to {\$3,399/\$6,799} or is it {\$3,400/\$6,800} or more?”, use a null display for ‘family’ and display ‘\$1,700’, ‘\$3,399’ and ‘\$3,400’ in the question text and also display ‘\$1,700’ and ‘\$3,399’ in response option 1 and ‘\$3,400’ in response option 2 if this insurance meets the following conditions:

- [The policyholder is the only covered person (PersID of Insurance.Plyhldr = only PersID in covered person array)

OR

- The policyholder is deceased and there is exactly one covered person (Insurance.Plyhldr= 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’, ‘\$3,400’, ‘\$6,799’ and ‘\$6,800’ in the question text and also display ‘\$3,400’ and ‘\$6,799’ in response option 1 and ‘\$6,800’ in response option 2.

Full Detail Spec

**OE220**

**(OE1295)**

**BLAISE NAME:** OEPlanHasHSA

**Item Type:** Question  
**Type Class:** Enumerated  
**Answer Type:** TYESNO

**Field kind:** Datafield    **ArrayMin:**    **Min value:**  
**Field Size:**  
**Answers allowed:** 1    **ArrayMax:**    **Max value:**

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

**Context Header:**    {POLICYHOLDER'S 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

<b>Responses:</b>	YES .....	1	BOX_205	(OE1297)
	NO .....	2	BOX_205	(OE1297)
	REFUSED .....	RF	BOX_205	(OE1297)
	DON'T KNOW .....	DK	BOX_205	(OE1297)

**Display Instructions:**

**Help Text:**

**BOX\_205**

**(OE1297)**

**Item Type:** Route

**Type Class:** If Then

**Route Details:**    For the plan being looped on, if '2' (DENTAL) is selected at OE130 OR if OE110= '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), go to END\_LP10. Otherwise, go to OE255.

Full Detail Spec

**OE255**                      **(OE1299)**                      **BLAISE NAME:** OECovDen  
**Item Type:** Question                      **Field kind:** Datafield    **ArrayMin:**    **Min value:**  
**Type Class:** Enumerated                      **Field Size:**  
**Answer Type:** TYESNO                      **Answers allowed:** 1    **ArrayMax:**    **Max value:**

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

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

**Question Text:**

Earlier, you did not report any dental coverage from this plan. {{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    END\_LP10            (OE1300)  
                              NO            ..... 2    END\_LP10            (OE1300)  
                              REFUSED            ..... RF    END\_LP10            (OE1300)  
                              DON'T KNOW            ..... DK    END\_LP10            (OE1300)

**Display**

**Instructions:**

Display '{Are/Is}' if current round is not the final round of the panel (RndType<>Final) and if insurance is still current for at least one RU member (OE20 is coded '1'(YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) or OE50\_01 is coded '1' (YES) for at least one 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.

**END\_LP10**                      **(OE1300)**                      **Item Type:** Route                      **Type Class:** If Then

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

If no other insurance meet the stated conditions, end LOOP\_10 and continue with BOX\_210.

**Route Details:** Return to original questionnaire section in HX.

[End of OE]