
2008 Ohio Family Health Survey

Methodology Report



Thomas Duffy, Macro
Vice President

Seth Muzzy, Macro
Senior Project Director

Sara Bausch, Macro
Amy Ferketich, Ohio State University
Ronaldo Iachan, Macro
Kristie M. Hannah, Macro
Bo Lu, Ohio State University
Paul Martino, Macro
Megan C. Pun, Macro
Timothy R Sahr, Health Policy Institute of Ohio
Randall ZuWallack, Macro
Analysts

TABLE OF CONTENTS

Introduction.....	1
Project Overview	1
Design Overview	1
Sampling	3
Sample Design	3
Core Questionnaire Design.....	7
Data Collection	11
Respondent Confidentiality	11
Interviewing Schedule	11
Attempt Protocol.....	11
Selection	13
Refusal Conversion.....	14
Non-English Interviewing	14
Methods to Increase Response Rates.....	15
What Constitutes a Completed Interview	17
Interviewer Training	17
Quality Assurance Procedures	18
Response Rate.....	19
Issues with survey implementation (encountered difficulties)	25
Limitations of Survey Method.....	31
Analysis	34
DP and QA procedures	35
Assessment of Manual Coding	37
Weighting and Imputation Procedures	40
Weighting	43
Assessment Data Quality.....	53
Statistical testing.....	54
Recommendations for Future Data Collection Efforts.....	55
Appendices	
Appendix A: Timeline.....	57
Appendix B: Counties Sampled.....	58
Appendix C: Number of Interviews by Sample Type, Region and County Type.....	59
Appendix D: English Questionnaire.....	62
Appendix E: Response Rate Formulas.....	228
Appendix F: Qualifications of Interviewers.....	229
Appendix G: Interviewer Training.....	233
Appendix H: Quality of Assurance Forms.....	311
Appendix I: Open-Ended Response Cleaning and Coding.....	317
Appendix J: Data Dictionary / Code Book	382
Appendix K: Confidentiality Agreement.....	511
Appendix L: Data Dictionary / Code Book and Record Layout.....	512
Appendix M: Reasons for BARRIER_A / BARRIER_C Discrepancy Between 2003 and 2008.....	526

INTRODUCTION

Project Overview

This report describes the survey implementation for the 2008 Ohio Family Health Survey (OFHS). The OFHS provides data that is essential to understanding health care and insurance issues in the State of Ohio—and to creating informed strategy for health care reform. Thus, the OFHS supplies policy-makers with information about the health insurance coverage, health status, health care utilization, and health care access of Ohioans. More specifically, the 2008 OFHS:

- Provides data comparable to 2004 and 1998 surveys, in order to assess changes over time.
 - Helps policy-makers assess the impact of recent changes in the economic climate, the health care marketplace and government programs.
- Helps policy-makers evaluate the claims that individuals or groups make about continuing needs, problems, and solutions.

Through a competitive application process, the Ohio Department of Health (ODH) and Ohio Department of Jobs and Family Services (ODJFS) contracted with Macro International, Inc—a research company located in Burlington, Vermont and New York City, New York—to perform the project’s data collection. The OFHS was implemented in August 2008 through January 2009. Data collection was conducted via telephone surveys with a randomly selected adult and, if applicable, on behalf of a randomly selected child, in randomly selected, telephone-equipped Ohio households. Additionally, a sample of cell phone users were surveyed mid-way through the project to reach the increasing number of Ohioans who do not have landlines.¹

The project began with an initial meeting designed to clarify expectations and discuss both project details and strategies to enhance the study’s value. Over the course of the project, Macro conferred regularly with the ODH and the ODJFS. Macro regularly updated the ODH and the ODJFS throughout the project via weekly and monthly field status reports, a contractor assessment of initial interviews and databases, quarterly data collection statements, and informal e-mail/telephone communications.

Design Overview

The 2008 OFHS researched several topics regarding the health of Ohio residents. Topics included Ohio residents’:

- Type of health insurance coverage, if any;
- General health status;
- Health care use and needs;
- Perceptions of health care quality; and
- Access to health care.

¹ For the purposes of this study, “cell phone” refers to mobile phones. “Landline” refers to conventional home or business telephones.

The final English questionnaire can be found in Appendix D.

The 2008 OFHS population included the total, non-institutionalized, Ohio adult and child population residing in residential households. This population excluded adults and children:

- In penal, mental, or other institutions;
- Living in other group quarters such as dormitories, barracks, convents, or boarding houses;
- Contacted at their second residence during a stay of less than 30 days;
- Living in Ohio less than a month;
- Who did not speak English or Spanish well enough to be interviewed; and/or
- With physical or mental impairments that prevented them from completing an interview (as identified by the interviewer or by another member of the household), if a knowledgeable proxy was not available.

Unlike previous OFHS administrations, the 2008 OFHS included a cell phone component², whereby people were surveyed over their cell phones. Based on early results from the 2008 OFHS, there were concerns regarding age distribution; about 70 percent of the survey respondents were over the age of 44. While this was concerning, it was consistent with current trends in landline telephone research.

The perceived cause of the skewed age distribution is the proliferation of cell phone usage, particularly the increase in adults who discontinue landline use in favor of being “cell-only” users. Referring to the Behavioral Risk Factor Surveillance Survey (BRFSS) for Ohio, 72 percent of respondents were over the age of 44. This percentage was 60 percent in 2004 and has climbed four points each year to the current level. Nationwide, using data from the January-June 2008 National Health Interview Survey (NHIS), Blumberg and Luke³ report that 17.5 percent of adults are living in cell-only households. Combined with the two percent living in households without any phone access, household telephone penetration now only covers 80 percent of households nationwide. While the majority of the population is still accessible by traditional landline telephones, some subpopulations have adopted wireless-only lifestyles at a higher rate than others. For example:

- Hispanic adults (21.6%) or non-Hispanic black adults (18.5%) are more likely than non-Hispanic white adults to be living in households with only wireless telephones.
- Adults living in poverty (26.0%) were more likely than higher-income adults to be living in households with only wireless telephones.
- More than one-half of all adults living with unrelated roommates (63.1%) lived in households with only wireless telephones.
- Adults renting their home (33.6%) were more likely than adults owning their home (9.0%) to be living in households with only wireless telephones.

² Hereafter, when a distinction is needed, the two methodologies, RDD and cell phone, will be referred to “landline survey” and “cell phone survey,” respectively.

³ Blumberg SJ, Luke JV. Wireless substitution: Early release of estimates from the National Health Interview Survey, January-June 2008. National Center for Health Statistics. Available from: <http://www.cdc.gov/nchs/nhis.htm>. December 17, 2008.

- The percentage of uninsured among cell-only adults is 28.3 percent, much higher than adults in landline households, 13.6 percent.

After a series of discussions regarding the potential impact of cell-only households on the data gathered by the OFHS survey, Macro initiated a cell phone supplement in order to administer the survey to 2,000 cell phone users. The cell phone supplement was an RDD sample of cell phone numbers, with special sampling and weighting adaptations, discussed in further detail in the sections below.

SAMPLING

Sample Design

The sampling plan for the 2008 OFHS landline survey was based on a stratified, list-assisted random digit dialing (RDD) sample that shares many elements with the plan that was developed for the 2004 OFHS. The RDD sample was restricted to 1+ blocks and stratified by county; i.e., independent samples were selected across the 88 Ohio counties. An additional, supplement sample was designed specifically to ensure good representation for African Americans, Asian Americans, and people of Hispanic origin. This oversampling is similar to the methodology used in the 2004 OFHS. The sample design provided accurate survey estimates for the key subgroups described in Table 1.

Table 1

Minority Group Category	Total Population	African American	Hispanic	Asian
Gender	Male Female	Male Female	Male Female	Male Female
Age	0-17 18-34 35-54 55-64 65 and up	0-17 18 and older	0-17 18 and older	0-17 18 and older
Family Income	<=100% FPL 101 to <=150% 151 to <=200% 201 to <=250% 251 to <=300% 301 to <=400% >400% FPL	<=100% FPL 101 to <=200% 201 to <=300% 301 to <=400% >400% FPL		
Region⁴	Metropolitan Appalachian Rural, non-	Each of six largest metro counties		

⁴ Regions were defined using the re-classified County of residence data actually reported by the respondent rather than the initial county associated with the sampling.

	Appalachian Suburban			
--	-------------------------	--	--	--

Land Line Sample

The sample frame included Ohio households with telephone numbers assigned since the publication of the current directories, as well as households with deliberately unlisted numbers. According to the 2000 U.S. Census, 97.8 percent of Ohio households have a telephone.⁵ The sample frame was developed to obtain a set number of interviews by county, cluster, and stratum—as described in detail below. Three types of sample were used to create the sample frame for the survey:

- 1+ block RDD;
- High, medium, and low incidence African American RDD; and
- Asian and Hispanic surname.

The following describes the steps used to generate the sample frame for each sample type. For this part of the survey, the final stage of sampling involved the use of a household roster to select an adult respondent, and to select a child for interview by adult proxy. As in the previous survey, Macro used the birthday rule for these random selections. Macro’s Computer-Assisted Telephone Interviewing (CATI) software handled these procedures automatically.

1+ Block RDD

Macro currently has an unlimited license for the Genesys RDD sampling system from MSG, Inc. The Genesys system provides Macro with the ability to design and implement complex sample surveys in-house. As a result, it is possible to exercise complete control over all aspects of sample generation. The Genesys system contains information on area code-exchange combinations that have been assigned, and Census-based demographic information for individuals and households for geographic areas defined by ZIP codes and Census tracts. The Genesys frame is updated quarterly using the Bell Communications Research (BELLCORE) valid area code-exchange database and keyed residential and business listings from major providers.

In the Genesys system, all area codes and exchanges ringing into the target area (in this case, the State of Ohio) are identified. Within each exchange (e.g., 614-466), numbers are organized into “hundred-series” or “banks” of numbers in which the first two digits of the last four numbers of a telephone number are common (e.g., the exchange 614-466 contains 100 banks, 614-466-00## through 614-466-99##). Those banks with at least a given number of working listed residential phone numbers (usually one) are identified, and constitute the sampling frame. This frame is used to randomly select a sample large enough to produce the desired number of interviews given the rate of Working Residential Numbers.⁶

⁵ U.S. Census Bureau, Quick Tables, Ohio, Profile of Selected Housing Characteristics, Accessed March 11, 2009. http://factfinder.census.gov/servlet/QTTable?_bm=n&_lang=en&q_r_name=DEC_2000_SF3_U_DP4&ds_name=DEC_2000_SF3_U&geo_id=04000US39

⁶ A working residential number (WRN) rate is a percentage of working residential telephone numbers among all telephone numbers whose residential status is known.

The main advantage of this RDD method is that it assigns equal probabilities of selection (EPSEM) to all telephone numbers in the frame, generating an approximately self-weighting sample. The researcher may be confident that the sample is a scientifically valid representation of the target population according to the most current data available. In addition, using data available in the frame, it supports stratification by concentration of the African American population in the exchanges. These frames are called “list-assisted” frames, in that they use listed phone numbers to identify working exchanges and banks. In most applications of these list-assisted frames, the sampling frame is “truncated” by only including those exchanges and hundred-banks which contain at least one, or sometimes two, listed residential phone numbers. Truncated frames are potentially biased, as they exclude any residential telephone numbers in banks with no listed numbers. However, in most areas, the number of assigned banks with no listed residential numbers is extremely small, and the predicted percentage of numbers dialed that would reach a household (this is known as the “hit rate”) within these banks so small as to be unproductive.

Initial analysis of the Genesys data for the State of Ohio confirms that a truncated list-assisted frame (including all phone banks with at least one listed residential number) would cover approximately 97 percent of all Ohio telephone households. The remaining households are within exchange blocks in which the hit rate is estimated to be 1.4 percent. It is clear in this case that accepting these blocks into the frame would not be worth the minuscule gains in frame coverage.

An up-to-date list of all current operating telephone exchanges (three-digit prefixes) in Ohio area codes was compiled. These telephone exchanges, when combined with all four-digit numbers from 0000 to 9999, constituted the set of all possible working Ohio telephone numbers, both residential and non-residential. This included telephone numbers assigned since the publication of the current directories, as well as households with deliberately unlisted numbers. After the RDD sample was selected, Macro used the Genesys-ID system to filter out known non-residential numbers and pre-dial the balance of the numbers to identify non-working, fax, and modem numbers.

The set of all possible telephone numbers in Ohio was then arranged in ascending order by exchange and suffix, and divided into blocks of 100 numbers each (100-blocks). This set of telephone numbers formed the frame from which telephone numbers were sampled, with the sampled telephone numbers stratified, allocated to replicates of 50, and released into the study. Macro drew the sample at the county level, with a subset of counties being oversampled to provide statistically reliable estimates for certain metropolitan areas and other areas of interest to OSU.

High, Medium, and Low Incidence African American RDD

Allocation of the sample of telephone numbers to counties is one of the mechanisms that can be used to effectively oversample minority groups of interest; for this study, this involved a) allocating the sample disproportionately to the six large metropolitan counties with heavier concentrations of minority populations, and b) ensuring a sufficient sample representation for the smaller counties (e.g., rural and Appalachian counties).

The African American oversample was selected from the six top metropolitan counties that also have the greatest concentrations of the African American population in Ohio. Collectively, these six metropolitan counties also contain a substantial majority of Ohio's African American population. The proposed stratified RDD design oversampled exchanges within these counties. The oversampling was achieved by stratifying the telephone exchanges in each such county by density of African American population, and selecting with greater sampling rates within the high-density stratum.

Asian and Hispanic surname

The Census 2000 data show that Asian and Hispanic groups are relatively rare in Ohio (prevalence ranges from 1.2 to 1.6 percent). Therefore, an RDD-type telephone sampling approach would necessitate an extremely large sample size to generate data cells sufficient for estimation of these groups (and their subgroups). Macro proposed a special, more targeted effort to gather data from Hispanic and Asian Ohioans. The purpose of the Asian and Hispanic oversample was to substantially increase the number of completed interviews with members of these racial/ethnic groups by conducting a separate sampling and data collection effort using targeted samples of telephone numbers identified as being associated with Asian or Hispanic surnames. The supplement sample for Asians and Hispanics was selected from a list frame that resulted from the merging of a database based on surnames with a database of residential phone listings. By merging the two databases, this allowed Macro to:

- Determine the proportion of the total population of phone numbers in each county that these lists represent, so that these households can be weighted down to their true proportion.
- Eliminate overlap between the lists and the RDD frame in each county, avoiding multiple probabilities of selection.

This process was performed separately for lists with Asian surnames and Hispanic surnames. This resulted in two samples with two distinct probabilities of selection, both of which are different from the main survey. In order to control for differing probabilities of selection, if the case was part of either Hispanic or Asian respondent quota and the person on the phone was not Hispanic or Asian, the survey terminated. The sampling reduced unequal weighting effects to a minimum.

NOTE: The disproportionate stratified RDD design required careful control over the differential probabilities of selection between the counties and for the different oversamples; for details see the weighting sections.

Cell Phone

The cell phone sample was provided by Survey Sampling International, Inc. (SSI). SSI produces a RDD sample of cell phone numbers from cell phone exchanges and zero-blocks from mixed-use (cell and landline) exchanges (1+ blocks are included in the landline sample). The cell phone exchanges originate from the Telecordia® TPM™ Data Source. The cell phone exchanges and mixed-use exchanges are identified from exchange type (NXXTYPE). The Telephone Consumer Protection Act (TCPA) prohibits the use of automated dialing devices when calling cell phones, so each number in the cell phone sample was dialed manually.

Core Questionnaire Design

The core questionnaire consisted of two main sections:

- One for the selected adult; and
- Another for the randomly selected child under the age of 18, if one was presently residing in the household.

The survey contained separate sections focusing on health insurance coverage, health status, health care utilization, and health care access. The following is a summary of each questionnaire section. Modifications made for the oversample and cell phone surveys are also described.

Table 2

Questionnaire Section	Contents of Section
Introduction and Screener	Interviewers: Identify themselves and describe the purpose for the call; Give general information about the survey; Determine eligibility for study. Determine respondents' ability to answer questions about their health insurance coverage; Determine if respondent has health insurance.
Currently Insured (Adult)	Questions included a variety of characteristics about the respondent's health insurance, such as: Type; Source; Cost; Satisfaction with; Services offered; Length of coverage; Previous coverage; and Respondents' lack of coverage in the past.
Currently Uninsured (Adult)	Respondents who were currently uninsured were asked about: The last time they had insurance; Type and source of their previous health insurance; Length of time they had been without insurance; and The reasons they were uninsured.
Health Status, Substance Use, and Care-Giving (Adult)	Questions focused on respondents': General health; Use of prescription drugs and health care services; Need for assistance in day-to-day activities, special therapy, and treatment or counseling; Types of assistance given to other family members; Whether they had specific diseases such as high blood pressure/hypertension, heart conditions or circulatory problems, and diabetes; Height and weight; and Use of alcohol and tobacco products.
Utilization and Quality of Adult Health Care Services (Adult)	Section asked respondents: When they last visited a doctor; Saw a specialist (dentist, eye doctor, medical specialist) Number of times spent in a hospital overnight; How many times they had to go to the emergency room; and
Access to Care	Topics covered:

Questionnaire Section	Contents of Section
and Unmet Needs (Adult)	<p>The place respondents' usually went for health care; Whether they needed professional help coordinating health care and how often help was received; Whether they needed a specialist within the past 12 months; Their ability to access care; Whether they experienced difficulty in getting needed prescriptions and other health care due to cost; and Ease of accessing care compared to three years ago.</p>
Employment	<p>Respondents were asked about: Their job status, and if they were currently employed. The industry in which they worked; A description of their work place setting; health insurance offered by their employer; the number of hours they worked; and The number of persons employed at their current place of business.</p>
Demographics and Family (Adult)	<p>Demographic questions in this section included: Marital status; Spouse/partner's employment status; Education; Number of persons in the family; Income; Number of telephone numbers/cell phones within the household; and If there was any lack of telephone service within the past 12 months.</p>
Violence	<p>Topics covered: Whether respondent could safely discuss the issue; Whether respondent had ever experienced violence against them; Number of incidents and type of offender; If and how the respondent sought care for the incident;</p>
Screening Questions for Eligible Child	<p>The first section of the child questionnaire asked adults about: The selected child's age; Their relationship to the child; Their ability to answer questions about the child's health insurance coverage; and The selected child's insurance status was established.</p>
Insurance Coverage (Child)	<p>Adults were asked a variety of questions about their child's health insurance coverage, such as: Type; Source; Cost of the insurance; Their rating of the insurance their child received; Whether their child needed to see a specialist; Period of time the child had been covered; and Any possible lack of coverage in the past.</p>
Currently Uninsured (Child)	<p>Adults of children who were currently uninsured were asked questions about the: Last time the child had insurance; Type and source of the previous insurance; Length of time the child had been without insurance; and Reasons the child was uninsured.</p>
Health Status (Child)	<p>Questions in this section focused on the child's: General health; Their use of prescription drugs and health services; Their ability to do age-appropriate activities; Their need for special therapy, treatment, or counseling;</p>

Questionnaire Section	Contents of Section
	Height and weight; and Whether they had problems with Asthma.
Utilization and Quality of Health Care Services (Child)	This section asked respondents about the child's: Doctor and dental visits; If they had stayed overnight in a hospital or visited an emergency room; and
Access to Care (Child)	Interviewers asked respondents about: The place the child usually went to receive health care; Whether the child needed professional help coordinating health care and how often help was received; Any needs for a specialist within the past 12 months; and, if applicable, Whether they had a problem seeing a specialist.
Unmet Health Needs of Family (Child)	This section of the survey asked about: The child's ability to access dental care or prescription drugs; Other types of health care; and The ease of access to care compared with three years ago.
Demographics (Child)	Demographic items included the child's: Gender; Race/ethnicity; and The employment status of his or her parents.
Interviewer Assessment	After the respondent was no longer on the phone line, the interviewers rated: The quality of information obtained in the interview; Reasons for substandard information, if they indicated that to be the case; and The language the interview was conducted in.

Oversample Study Modifications

The sample drawn for this survey allowed interviewers a better-than-average probability of contacting a household that was Asian or Hispanic. As noted above, if the case was part of either the Hispanic or Asian oversample but the person on the phone said that they were not of that race/ethnicity, the survey terminated. For the sake of efficiency, the questionnaire was modified such that questions regarding Hispanic origin and race were the first questions in the demographics section.

Cell Phone Modifications

Several protocol changes were required for this study, reflected in the questionnaire. The first is due to cell phone users taking calls in a variety of situations. As people may answer cell phone calls while driving or when in other potentially unsafe situations, all Macro interviewers are charged with first determining the safety of respondents during cell phone interviews. As such, the cell phone study screener first ascertained that respondents could safely continue with the interview. If the respondent could not take the call safely, the screener terminated and a call-back was scheduled. Interviewers were also trained to offer a call-back if they got the impression during any part of the interview that the respondent was in a distracting or dangerous situation.

For the OFHS cell phone survey, the sampling unit is the cell telephone number and the person associated with it, meaning there was no household screening. This is a major difference from the main RDD survey, where the person in the household with the most recent birthday is

selected. In the cell phone survey, when a potential respondent was contacted, he or she was asked questions to determine his or her specific study eligibility. This leads to another related difference—the cell phone survey did not accept proxy respondents. In order to determine eligibility for the study, the screener for the cell phone study asked the person answering the telephone was asked whether he or she had been reached on a cell telephone, was 18 years or older⁷, resided in the state, and lived in a private residence. For those who responded “no” to any of these questions, the interview terminated. Those answering “yes” to all of the screening questions continued to the main survey. A substantial number of cell phone users utilize their phones for personal as well as business purposes. Only those using the phone exclusively for business purposes were ineligible for the study. If interviewers reached a voicemail or a respondent answered that a cell number was used for business purposes, the interview terminated.

Most cell phone users incur some type of usage charge or loss of pre-paid minutes that may discourage them from cooperating in a survey. Macro attempted to offset this through the use of an incentive, a \$10 Amazon e-gift code, to encourage reluctant respondents to participate in the survey.

Core Questionnaire Development

Macro based the 2008 survey on the 2003-2004 questionnaire. Many of the items on the 2008 survey were previously tested and administered in the 2003-2004 survey, and were used in full, or adapted. In addition, select items from the following instruments were included in the 2008 OFHS questionnaire:

- National Technical Center, Harvard School of Medicine, Adult Household Survey Core Instrument,
- California Health Interview Survey,
- 2003 Behavioral Risk Factor Surveillance Survey (BRFSS),
- Pew Charitable Trusts Survey,
- State and Local Area Integrated Telephone Survey (SLAITS),
- National Health Interview Survey (NHIS),
- Community Tracking Survey, Center for Studying Health System Change,
- Federal Employees Health Benefit Survey, and
- National Survey of American Families.

In order to develop the 2008 OFHS questionnaire, Macro’s project team:

- Reviewed the 2003-2004 questionnaire item-by-item to assess question construction, order, and structure;
- Compared the questionnaire and their notes with Macro’s library of tested and validated questionnaire items and looked at all these survey instruments listed above.

⁷ Many children and teens have their own cell phones. However, sometimes adults share or loan cell phones to children. Since persons under the age of 18 were ineligible for the survey, the interviewers were trained to ask if the person who **owned** the cell phone (e.g. was most regularly answering the phone) was under 18. If this was the case, then the survey terminated.

- Compiled a comprehensive assessment of recommended revisions to the 2008 OFHS instrument. This assessment identified problems that the project team believed the instrument posed for data collection and posed strategies for resolving those problems;
- Prepared the next version of the questionnaire based on project team suggestions and strategies; and
- Conducted cognitive interviews and a pre-test to develop a comprehensive assessment of recommended revisions to review with the ODH and the ODJFS.

Interviewing for the pre-test started on Thursday July 17, 2008 and continued until Sunday July 20, 2008. All of the telephone interviewing occurred at Macro's Burlington, Vermont CATI research center. Pre-testing was completed using an English-only instrument, and Macro obtained 105 completed interviews.

DATA COLLECTION

Respondent Confidentiality

Macro understands the importance of confidentiality. As such, Macro required that all project staff and interviewers sign a confidentiality statement to assure that information collected for the OFHS was kept strictly confidential and used only for the purposes of the study. A copy of the confidentiality statement can be found in Appendix K.

Interviewing Schedule

The majority of interviewing session hours were scheduled for weekday evenings, Saturday days, and Sunday evenings. The target time interviewing period was between 5 p.m. and 9 p.m. on weekdays, between 10 a.m. and 7 p.m. on Saturday, and between 1 p.m. and 9 p.m. on Sundays (respondent time).

Macro also scheduled shifts between 9 a.m. and 5 p.m. weekdays for up to a maximum of 20 percent of total session hours. For cell phone interviews, it was discovered that the most efficient time to dial was during midday, so towards the end of data collection, one-third of the calling was shifted to this time period.

Attempt Protocol

Number of Attempts

In the landline survey, interviewers made a minimum of 15 attempts to reach an eligible household and interview an eligible adult for each telephone number in the sample frame. The oversample study followed the same protocol as the landline study. Cell phone interviews consisted of only five attempts to reach an eligible respondent.

Across surveys, each call attempt was given a minimum of five rings. The attempts were rotated through weekday day, weekday evening, Saturday day, and Sunday evening shifts to maximize coverage of the residential population. In the landline study, persistent "ring-no-answers" were

attempted a minimum of four times at different times and days of the week. If a respondent was contacted on the last call attempt, and an interview was not completed, another attempt was made.

Across surveys, lines that were busy were called back a minimum of five times at 20-minute intervals. If the line was still busy after the fifth attempt, the number was attempted again on different calling occasions until the record was resolved.

Call-backs

Across surveys, the CATI system allowed two types of call-backs depending on whether or not the respondent could offer a specific time and date to be contacted again. A system-scheduled call-back was assigned to a record that could not be given a specific date and time, and a scheduled call-back was reserved for respondents who indicated a definite appointment for re-contact. Call-backs to specific respondents were entered into the computer by interviewers and handled automatically by the CATI program. For a definite appointment, the record waited until the designated time to be released. At this time, the system found the next available station and delivered the record as the next call. Macro's system accommodated both "casual" and "definite" call-backs. Casual call-backs, where respondents suggested a general time of day ("I usually get home around six o'clock"), were sorted and allotted automatically by the system. They were held out of the sample until the appointed hour, when they were sent to a station with an open slot for that call. These calls had a higher system priority than returning no-answer and busy records, but lower priority than definite call-backs. The call history screen that accompanied each record informed the interviewer of the circumstances of each prior contact.

Macro's CATI system automatically handled call-backs for "no-answer," "busy," and "answering machine" outcomes. Repeated no-answers were retried at different times of day and days of the week as follows: if a call between 5 p.m. and 6 p.m. resulted in a no-answer, the record was put in the queue to be retried between 8 p.m. and 9 p.m. of the same shift. Then, if the number was not retried during the shift, it was automatically cycled to the next shift according to the logic defined for the calling schedule. Calls resulting in a busy signal were automatically recycled within the same shift according to a preset schedule. As with no-answers, if a shift closed before an automatically rescheduled busy was attempted; the number was cycled to the next available calling time.

Macro's system also accommodated the restarting of interrupted interviews using a definite call-back strategy. If a cooperative respondent had to terminate an interview, but wanted to finish at a later time, it was possible to set a definite call-back for that exact time and restart the interview where it left off. If the interviewer who began the survey was available at the prescribed time, the system sent the call back to that station.

The cell phone study had the additional feature of allowing another telephone number to be stored, so respondents could be called back on their landlines if requested.

Selection

Household Selection

The 2008 landline OFHS used the BRFSS definition for determining eligible households. BRFSS defines an eligible household as any residential housing unit such as an apartment, a house, or a mobile home. Non-eligible households included: dormitories, hospital rooms, nursing homes, group homes, sororities/fraternities, halfway houses, shelters, prisons or barracks, businesses— or any number that reached a cell phone, computer or fax line, or pay phone. If the selected respondent did not live in Ohio for at least one month prior to the interview, the household was also considered ineligible.

Respondent Selection

After a household was determined to be eligible, then household members were verified as being eligible; eligibility included all related adults (aged 18 years or older), unrelated adults, roomers, and domestic workers who considered the household their home. Household members did not include adult family members who were living elsewhere at the time of the interview.

The 2008 landline OFHS used the “most recent birthday method” to randomly select a respondent for an interview. Interviewers asked, “Now, I would like to identify the adult currently living in your household, 18 or older, who had the most recent birthday. Who would that be?” Due to the length and complexity of the survey, the “most recent birthday method” was most appropriate in order to effectively select a potential interviewee while minimizing respondent burden. Unfortunately, even when implemented properly by an interviewer, respondent error (either intentional or non-intentional) may affect results. For example, a respondent could potentially confuse the household member with the most recent birthday (to the calling date) with the household member with the next upcoming birthday.

As discussed above, each cell phone survey sample member was screened to determine his or her specific study eligibility. In order to determine eligibility for the study, the person answering the phone was asked whether he or she had been reached on a cell telephone, was aged 18 years or older, resided in the state, and lived in a private residence. For those who responded “no” to any of these questions, the interview terminated. Those answering “yes” to all of the screening questions continued to the main survey.

Proxy Interviews

The 2008 OFHS allowed for the use of proxy interviews, but in a different manner than the 2003-2004 administration. In 2003-2004, proxy interviews were conducted with a knowledgeable adult when the selected respondent was not knowledgeable enough answer questions about his/her health insurance;

was cognitively or physically impaired; did not speak English or Spanish well enough to complete the interview; or was not available at the time of the call. For the 2008 survey, proxies were only allowed in instances where the selected respondent has a **cognitive or physical impairment**. In both administrations, a knowledgeable adult was defined as someone **18 or older who was able to answer questions about the selected respondent’s health insurance**. For interviews that were suspended and resumed, the CATI program prompted interviewers to

continue the survey only with the person who started the interview. As mentioned in the previous sections, **proxies were not allowed in the cell phone study.**

Proxy interviews were conducted for all child interviews in the OFHS across all survey administrations. In these interviews, the screener randomly selected the child with the most recent birthday. Then the interviewer asked to speak to the adult most knowledgeable about the selected child's health insurance.

Refusal Conversion

While a high response rate is important, interviewers must not harass respondents into participating in either the selection process or the interview. Thus, all interviewers at Macro are trained to avoid refusals using polite, respectful methods.

For the OFHS, refusals were treated differently depending on whether the respondent was reached on a landline or a cell phone. When a respondent refused to participate in the landline OFHS survey, the number was turned over to our Non-response Conversion Staff (NCS). Whenever a respondent refused to be interviewed or terminated an interview in-progress, the interviewer recorded information as to why the respondent refused or terminated the interview, and entered this information into the CATI system. This information was reviewed by NCS just before calling the telephone number again. During weekly non-response workshops, the NCS compiled these cases and reviewed effective strategies for non-response avoidance and conversion. Further information on refusal conversion is detailed in the section below.

Refusal conversion was greatly reduced for the cell phone study. Hostile refusals were immediately terminated and not contacted again. More general, non-hostile refusals were re-contacted once for a conversion attempt. For example, if respondents asked not to be called on their cell phone, interviewers attempted to avert a refusal by asking if there is a better time for them to take a call via cell phone (e.g., when incoming calls would not incur a cost) or if there is another phone number to the interviewer could call. No further contact was made with respondents who refused to provide this information.

Across studies, interviewers were trained to inform their supervisor about the following situations:

- If the respondent was verbally abusive, or threatened litigation.
- If the respondent requested to be placed on a "do not call" list.
- The household refused to transfer the call to the selected respondent and stated that they would never allow the call to be passed to the selected respondent.

These numbers were removed from active calling.

Non-English Interviewing

The OFHS survey is conducted in English and Spanish. Of the 50,944 records in the final file, 1.3 percent were collected in Spanish. This was accomplished through a translated version of the questionnaire and a specialized CATI effort associating Spanish-speaking interviewers with records flagged during the primary collection effort as belonging to Spanish-speaking

households. Specifically, when a non-Spanish-speaking interviewer contacted a Spanish-speaking household, the record was coded for Spanish interviewing, and the system automatically routed the record to a bilingual interviewer for subsequent attempts. When a bilingual interviewer reached a Spanish-speaking respondent, the interviewer used the Spanish language version of the survey protocols, and the interview continued without interruption. No interviews are ever conducted in another language “on the fly.” Spanish interviewing followed the same protocol as English interviewing, including the quality assurance procedures discussed in the section, *Quality Assurance Procedures*.

Methods to Increase Response Rates

Like the 2003-2004 survey, Macro used a variety of methods to increase response rates in 2008. These included:

- The use of a “short” version of the child questionnaire;
- Using Caller ID to mitigate the effect of call blockers/privacy managers;
- Leaving messages on answering machines and privacy managers;
- Providing verification numbers for Macro and the ODH;
- Employing special refusal conversion efforts;
- Re-attempting phone numbers on different days, and at different times of the day, to maximize efforts to reach each household;
- Conducting interviews in Spanish as well as English; and
- Conducting a cell phone supplement of 2,000 cases to access households not having landline telephones (discussed earlier).

Further information on each of these is given below.

“Short” Version of Child Questionnaire

In the 2003-2004 study, mid-survey terminations were found to be more likely in the child section of the survey due to the length of the survey and the similarity of the child questions to the previously-asked adult questions. Therefore, in 2008 Macro implemented a shortened child section during which the fundamental questions for the child were asked before the survey was suspended. This survey contained fundamental questions such as the child’s age and whether or not the child had health insurance. If the selected child did have health insurance, the respondent was asked whether or not the child was covered by Medicaid. If the child did not have health insurance coverage, the respondent was asked if the child had health insurance at any time in the previous 12 months, or inquired when the child last had health care coverage. Although these records were called to protocol in an attempt to complete the remainder of the child survey questions, the critical information for children has been collected through this short survey. Consequently, if the remainder of child survey questions was not obtained and the record had reached 15 attempts, the record was considered a completed interview. A total of 765 partially completed interviews reached protocol and were considered complete out of the 13,443 interviews that included children.

Caller ID

Macro programmers broadcasted an in-house telephone number along with the name “OH DPT Health” on respondents’ caller identification equipment. In order to prevent call screening, the system was set up such that all calls that were initially dispositioned as “call block” or “privacy manager” would have the caller ID information broadcast on the next attempt. This added legitimacy and a point of contact to the survey.

Leaving Messages on Answering Machines

Macro left messages on persistent “answering machine” and “privacy manager” dispositions, informing respondents of the study and scheduling another call attempt for the following day. The message stated that Macro interviewers were calling on behalf of ODH and OSU, and that a call-back at their convenience would be appreciated. The call center’s toll-free telephone number was left on the answering machine. Messages were left on the fourth and ninth attempts to a household if an answering machine or privacy manager was reached on those attempts. For privacy managers, if a message could not be left, the interviewers were instructed to enter the call center’s toll-free telephone number. Macro has learned that this protocol can improve response rates and more quickly resolve dispositions. This is for two reasons. First, it allows the interviewer to derive sufficient information from the message provided on the machine to make a classification that the telephone number was associated with a business or a residence (thereby reducing the number of calls needed if there is an ineligible case). Second, if a residence, or of unknown status, it allows the interviewer to gain cooperation from the respondent by having them answer the next or some subsequent call, or return the call on a 800 number, if provided. Dedicated CATI stations were set up to handle incoming respondent calls to complete the interview in response to an answering machine message.

Survey Verification Lines

Macro’s toll-free lines received respondent calls regarding the legitimacy and validity of the study, the line connected callers to a supervisor at the call center able to explain the study and address any respondent objections. Macro staff also made contact information for the ODH available to those respondents who wished to contact the survey sponsors directly.

Refusal Conversion Efforts

The landline survey protocol was to re-attempt first refusals at different dates and times. When this did not work, a final, third attempt was made after a longer period (minimum four days). This last attempt was made by more experienced interviewers (the NCS team); the tone of this final conversion attempt was much more passive, with probing such as “Did the interviewer answer all your questions?”, “Can I help address any concerns that you might have?” and finally “Do you have a moment to complete the study?” This approach was chosen so not to upset respondents who might have already been angered by previous attempts.

Re-attempting Numbers

Telephone numbers that did not initially produce a completed interview were contacted on different days, and at different times of the day, to maximize efforts to reach each household. The study protocol allowed calling to be done over many weeks to ensure that respondents on vacation and those rarely at home could be reached. Please see the section, *Implementation Protocol* for more information about call attempts for this study.

Conducting Interviews in Spanish

The 2008 OFHS interviews were conducted in English and Spanish to maximize response rates. Of the 50,944 interviews in the final data file, 657 (1.3%) were collected during a specialized CATI effort associating Spanish-speaking interviewers with households which were flagged as non-English speaking.

What Constitutes a Completed Interview

A completed interview is defined as having at least 80 percent of all applicable questions answered.

Interviewer Training

All of Macro's new telephone interviewers receive an initial two-day training about the CATI program and interview protocol. The first day of training introduces interviewers to survey research, the role of the interviewer, and the CATI system. These sessions also cover interviewing techniques such as: question reading, entering responses, probing for responses, the use of appropriate feedback, and avoiding refusals. On the second day of training, supervisors review techniques for handling difficult respondents, probing for answers in challenging situations, and the proper enumeration of eligible adults residing in a household at the time of contact. Following this discussion, interviewers conducted practice interviews with one another, and they were monitored by a supervisor or senior interviewer who introduced them to different situations that may arise during an interview. Interviewers who received satisfactory monitoring scores were then allowed to conduct live calling on a practice project. After completion of the CATI training, new interviewers remain in the "incubator" for two weeks. The incubator provides an environment for less experienced interviewers to receive additional monitoring and supervision. The ratio of Supervisors and QA Assistants to interviewers is much lower in the incubator, allowing interviewers to more readily ask questions and receive constructive, individualized feedback. Time spent in the incubator is considered part of each new interviewer's initial training.

Any interviewer who called on the OFHS also received approximately seven and one-half hours of project-specific training. The project manager created the OFHS interviewer training manual, making sure that it contained all necessary information for the project. Training also included a monitored practice shift and critique. Because the OFHS involved oversampling of minority populations in Ohio, training included a discussion of procedures for screening households for minority status, as well as the sensitivity necessary when talking with respondents about their racial and ethnic status. Smaller scale trainings were conducted for the oversample surveys and for the cell phone surveys. These trainings addressed the primary differences in the questionnaire and the reasons for conducting the study.

A more in-depth discussion of interviewer qualifications and training procedures can be found in Appendices G and H respectively.

Quality Assurance Procedures

Refresher Trainings

Weekly refresher trainings on a variety of topics—such as refusal aversion techniques, disposition coding, or sensitivity training for specific questions—were conducted during the course of data collection for the OFHS. To determine what the refresher trainings should focus on, call center staff were given short quizzes to assess their general knowledge of the survey, the survey protocols, and how they would react to a variety of situations that might be presented to them by respondents.

QA Assistants also identified areas for training based on their observations of interviews; trainings were also conducted to address specific topics identified by clients. Additional trainings were conducted whenever a change was made to a survey; or when a new study (e.g. oversample, cell phone study) was launched. Refresher trainings were usually about an hour in duration and took place weekly.

Project-related bulletin boards in the call centers provided an additional avenue to communicate additional training information and material covered in the refresher trainings.

Monitoring

Remote Monitoring

OFHS interviews were monitored by OSU and Macro project staff at least weekly throughout the entire fielding period. Macro employed a sophisticated remote monitoring system that allows clients and off-site staff to remotely listen to interviews in-progress with the assistance of a QA Assistant. The telephone-based system is password-protected, and allows for simultaneous audio and visual monitoring of the interviewer's computer screen. The monitoring system also allows the listener to switch among various interviews and to communicate with the project manager and a QA Assistant during the monitoring session without interrupting the dialogue between the interviewer and respondent. The form used for evaluating each monitoring can be found in Appendix H.

On-Site Monitoring

In addition to remote monitoring, OSU project staff made two on-site visits to observe Macro's call center facilities, interviewers, and procedures in-person. While visiting, team members were able to monitor live interviews in-progress.

Validation

Macro re-contacted 10 percent of all completed landline interviews to verify responses on several key variables (presence of respondent and child in the house, insurance status at the time of the survey for both adult and child, and household ZIP code). Each re-contacted record was given one of the following statuses:

- Validated high consistency: 79%
- Validated: 3%

- Validated with inconsistencies: 17%

Many of the records coded as validated with inconsistencies occurred because a more liberal proxy policy was used during the validation interviews. If the interviewer was unable to get the original respondent on the telephone, the verification interview was completed via proxy. A study conducted by members of the Ohio State University and Nielsen Media for presentation to the American Association for Public Opinion Research in 2000 cites interviews with the “incorrect” respondent (i.e., one other than the adult with the last birthday) in approximately 20 percent of households. This study concluded that errors were more commonly seen in households with numerous members or with lower levels of formal education. Given this literature on the comparison between proxy and self-reported data, it is understandable that there would be some inconsistencies between selected respondent and proxy responses.

Response Rate

A total of 1,006,411 landline telephone numbers and 75,602 cell phone numbers were attempted during fielding. Interviews for the landline survey took place between July 2008 and January 2009. Interviewing started for the cell phone survey in November 2008. In order to affirm the representation of the target population in a study, researchers look to response rates as indicators of performance. There is no one agreed upon standard response rate formula since each project lends itself to different measures of performance. Several of these performance measures are discussed below.

All response rates will be affected by the procedure of assigning final status dispositions. The results of each call attempt were assigned a disposition according to guidelines published by The American Association for Public Opinion Research.⁸ These final dispositions can be summarized as:

Eligible

- Completes and partial interviews (if applicable)
- Refusals and noncontacts (after confirming eligible household)

Ineligible

- Survey Ineligible = No eligible respondents in household
- Non residential = Not a residential phone number

Unknown

- Unknown Eligible (known HH) = Confirmed household but did not establish survey eligibility
- Unknown HH = Cannot confirm whether the number is residential or not

Each telephone record’s history of attempts is analyzed to determine the record’s final status. Priority is given to outcomes that gather the most information.

⁸ Groves, R.M & Peytcheva, E. (2008). The impact of nonresponse rates on nonresponse bias: A meta-analysis Public Opinion Quarterly, Vol. 72, No. 2, Summer 2008, pp. 167–189.

Lower-Bound Response Rate

As the name implies, the Lower-bound response rate provides the lowest possible response rate figure. Also known as AAPOR Response Rate #1, it is obtained by dividing the number of completed interviews by the maximum number of potentially qualified households:

$$RR1 = \frac{\text{Completes}}{\text{Eligible} + \text{Unknown}}$$

For this survey, the Lower-bound response rate was 14.2%.

CASRO and AAPOR Response Rates

Some response rates take into account the ability of the interviewing staff to establish contact with potentially eligible households, and to resolve all numbers that do not ring into potentially eligible households. In cases where resolution is not achieved—that is, telephone numbers cannot be assigned dispositions that definitely reflect eligibility—these response rates generally use an estimate of the rate at which telephone numbers ring into eligible households to classify a fraction of these numbers of unknown disposition as eligible. Compared to the Lower-bound, these response rates increase the response rate calculation by not assuming all unscreened numbers belong to qualifying households. In addition, some “adjusted” response rates assign cases to the denominator where the respondent is eligible but unable to complete the interview due to impairment or language difficulties. One adjusted response rate, defined by Council of American Survey Research Organizations (CASRO) and equivalent to AAPOR’s Response Rate #3 calculates the eligible households by taking a proportion of the unresolved numbers and classifying them as eligible.

$$RR3 = \frac{\text{Completes}}{\text{Eligible} + e_u \times \text{Unknown}}, \text{ where } e_u = \left(\frac{\text{Eligible}}{\text{Eligible} + \text{Ineligible}} \right)$$

For this study, this calculation produced a response rate of 34.6%.

Upper-Bound Response Rate

In contrast to the Lower-bound response rate, the Upper-bound response rate provides the most optimistic percentage of generally recognized response rates. The Upper-bound, also known as AAPOR’s Response Rate #5, is a measure of staff performance and does not take into account sample quality (e.g. numbers that ring but are never answered), nor household behavior that prevents contact (e.g. privacy manager technology, screening calls using an answering machine, etc.).

$$RR5 = \frac{\text{Completes}}{\text{Eligible}}$$

The Upper-bound response rate for this study was 46.0%.

All Rates—State, County, Mode, and Oversamples

The sampling design includes strata for each county, a cell phone supplement, and African American oversamples in six counties. Response rates for each of these follows.

Table 3

		Lower bound RR1	CASRO RR3	Upper bound RR5
Cell Phone		3.7	31.1	99.7
Landline		14.2	34.6	46.0
Region (Landline only)				
Appalachian		17.8	37.7	48.0
Metropolitan		12.2	32.4	45.1
Rural Non Appalachian		16.0	37.1	46.8
Suburban		15.3	33.2	44.2
County (Landline only)				
001	Adams	20.4	39.1	50.8
003	Allen	12.6	37.7	46.8
005	Ashland	17.1	38.5	47.2
007	Ashtabula	14.5	34.3	45.4
009	Athens	14.9	38.7	54.5
011	Auglaize	17.5	37.2	46.2
013	Belmont	18.9	35.0	47.8
015	Brown	18.5	40.1	48.6
017	Butler	12.4	29.5	44.4
019	Carroll	15.4	40.0	47.1
021	Champaign	17.8	38.7	51.4
023	Clark	18.4	34.0	47.0
025	Clermont	12.6	28.5	44.3
027	Clinton	17.7	40.8	49.6
029	Columbiana	17.6	34.4	45.6
031	Coshocton	20.9	37.3	48.0
033	Crawford	19.2	39.4	52.3
035	Cuyahoga	10.5	31.6	43.2
<i>Low</i>		15.0	11.0	31.1
<i>Medium</i>		13.2	10.0	33.8
<i>High</i>		15.0	11.6	35.0
037	Darke	19.0	38.8	44.7
039	Defiance	16.5	36.3	46.3
041	Delaware	14.9	32.2	43.9
043	Erie	11.6	30.1	43.5
045	Fairfield	16.3	30.5	40.7
047	Fayette	19.7	38.2	48.2
049	Franklin	14.5	34.5	46.4
<i>Low</i>		18.6	14.8	34.5
<i>Medium</i>		20.5	16.4	38.2
<i>High</i>		20.5	16.4	40.4
051	Fulton	15.8	40.1	50.6

		Lower bound RR1	CASRO RR3	Upper bound RR5
053	Gallia	18.5	35.3	48.8
055	Geauga	11.7	24.0	36.5
057	Greene	15.9	30.5	44.1
059	Guernsey	18.9	36.9	49.9
061	Hamilton	9.7	30.3	47.9
<i>Low</i>		16.7	11.5	28.8
<i>Medium</i>		15.3	10.7	31.3
<i>High</i>		11.0	8.3	35.7
063	Hancock	17.1	38.3	46.9
065	Hardin	14.0	36.6	44.9
067	Harrison	17.6	43.1	48.4
069	Henry	13.0	38.5	46.8
071	Highland	18.8	38.8	46.8
073	Hocking	19.9	35.8	47.2
075	Holmes	10.5	35.2	45.0
077	Huron	16.1	36.8	44.8
079	Jackson	19.6	39.9	49.8
081	Jefferson	18.2	38.1	48.7
083	Knox	20.0	39.3	48.6
085	Lake	11.8	24.7	37.2
087	Lawrence	18.7	32.8	44.0
089	Licking	17.2	33.0	47.5
091	Logan	14.7	39.6	47.8
093	Lorain	13.1	30.5	41.9
095	Lucas	14.3	35.6	46.2
<i>Low</i>		21.1	16.3	35.2
<i>Medium</i>		20.3	15.9	35.8
<i>High</i>		16.3	13.2	38.6
097	Madison	18.4	34.6	45.6
099	Mahoning	14.9	31.6	43.0
101	Marion	17.6	38.7	49.3
103	Medina	11.8	28.1	39.6
105	Meigs	23.1	46.1	53.8
107	Mercer	18.9	38.7	46.3
109	Miami	16.9	35.2	46.8
111	Monroe	20.5	34.8	50.5
113	Montgomery	16.0	36.0	47.8
<i>Low</i>		21.0	16.4	34.9
<i>Medium</i>		18.0	14.4	48.6
<i>High</i>		22.3	17.7	38.3
115	Morgan	28.0	46.6	55.3
117	Morrow	19.2	43.3	48.9
119	Muskingum	19.9	34.8	45.9
121	Noble	18.0	40.5	45.3

		Lower bound RR1	CASRO RR3	Upper bound RR5
123	Ottawa	15.6	41.5	51.6
125	Paulding	21.9	42.5	50.1
127	Perry	19.4	36.3	45.6
129	Pickaway	19.0	38.1	50.1
131	Pike	18.6	38.4	46.6
133	Portage	14.2	27.8	39.5
135	Preble	16.6	37.6	45.3
137	Putnam	16.1	32.7	43.9
139	Richland	13.9	30.1	43.0
141	Ross	23.2	38.5	48.0
143	Sandusky	16.7	37.1	47.6
145	Scioto	18.3	37.8	49.3
147	Seneca	15.3	38.8	49.2
149	Shelby	18.4	35.1	44.9
151	Stark	15.1	29.4	41.7
153	Summit	10.2	33.1	47.2
<i>Low</i>		10.3	28.8	47.8
<i>Medium</i>		10.9	32.6	46.6
<i>High</i>		10.0	39.7	49.3
155	Trumbull	15.4	33.7	43.6
157	Tuscarawas	17.1	34.2	45.2
159	Union	15.4	34.3	44.9
161	Van Wert	20.0	43.7	53.8
163	Vinton	21.9	48.2	56.1
165	Warren	12.3	26.8	42.2
167	Washington	21.4	39.9	52.7
169	Wayne	12.9	37.5	48.7
171	Williams	17.0	36.4	44.2
173	Wood	15.5	39.9	48.8
175	Wyandot	18.7	38.0	44.4
Oversamples				
Asian surname		3.2	6.2	14.2
Hispanic surname		10.2	18.8	39.1

It is commonly recognized that response rates for survey research have been dropping over the past decade. While response rates continue a performance measure for surveys, they are not the only measure of survey quality. When evaluating the relationship between (non)response rates and nonresponse bias, Groves (2006)⁹ states that “nonresponse biases in estimates are only indirectly related to nonresponse rates.” If the propensity for an individual to respond is correlated with a characteristic measured by the survey, the estimate will be biased. For example, insurance status is correlated with age (younger adults are less likely to have coverage). Since age is correlated with survey response (younger adults are less likely to respond), the survey

⁹ Groves, R.M (2006). Nonresponse Rates and Nonresponse Bias in Household Surveys
Public Opin Q 2006 70: 646-675.

underestimates insurance status. Consequently, survey weighting accounts for nonresponse with geographic, demographic, and socioeconomic adjustments to reduce bias to the extent that the nonrespondents and respondents with similar geographic, demographic, and socioeconomic characteristics are also similar with respect to the survey statistics of interest.

A recent meta-analysis¹⁰ suggests that non-response rate is only weakly associated with actual measure-level non-response bias. Further, it found that responses to attitudinal questions are substantially more subject to non-response bias than are responses to behavioral and demographic questions and that non-response bias varies by several survey-level features such as survey sponsor. The authors conclude that “The search for mechanisms that link nonresponse rates and nonresponse bias should focus on the level of individual measures and not on the level of the survey.”

Coverage estimates of sub-populations (overall and by mode)

While response rates are used as an indicator of the associated data’s representation of the target population, representation among different groups may vary within the analysis. For example, while the overall response rate was 34.6%, response rates for counties ranged from 24.0% in Geauga to 48.2% in Vinton. The Metropolitan (32%) and Suburban (33%) counties had lower response rates than the Appalachian and Rural counties (both had response rates of 37%).

The following tables detail expected and observed (without weighting or imputation) percentages of the population classified by key demographic variables by region and age group. The unweighted observed sample is compared to population distributions from the American Community Survey (ACS) three year averages. An arrow pointing up (↑) indicates that the observed sample percentage is statistically different from the population percentage in the positive direction. An arrow pointing down (↓) indicates that the observed sample percentage is statistically different from the population percentage in the negative direction.

The sample tends to over represent populations with lower incomes, particularly those below the poverty level, and under represent populations with higher incomes, and those with incomes over three times the poverty level. This is consistent with the 2004 survey. The Hispanic and black (in metro areas) oversampling were successful in increasing the percentage of Hispanic and black respondents. The sample is skewed heavily towards female and older age groups. This is typical in contemporary telephone surveys.

Table 4

	Total Resp	Under 1.0		1.0 to 2.0		2.0 to 3.0		Over 3.0	
		Exp.	Obs.	Exp.	Obs.	Exp.	Obs.	Exp.	Obs.
Total	58313	13.2%	17.4%↑	17.0%	20.7%↑	18.3%	19.2%↑	51.6%	42.8%↓
Age group									
0-17	12824	18.5%	19.6%↑	20.0%	20.9%↑	19.8%	18.8%↓	41.8%	40.7%↓
18-64	33788	12.1%	17.3%↑	14.3%	16.9%↑	16.7%	17.6%↑	56.9%	48.2%↓
65+	11701	8.4%	15.1%↑	24.0%	31.3%↑	23.0%	24.2%↑	44.6%	29.4%↓
Region									

10 Groves, R.M & Peytcheva, E. (2008). The impact of nonresponse rates on nonresponse bias: A meta-analysis Public Opinion Quarterly, Vol. 72, No. 2, Summer 2008, pp. 167–189.

Appalachia	13102	16.0%	20.9%↑	21.1%	24.9%↑	20.3%	19.7%	42.5%	34.5%↓
Metropolitan	26049	14.4%	18.8%↑	16.7%	19.1%↑	17.4%	17.9%↑	51.5%	44.2%↓
Rural Non-App	12282	10.6%	13.4%↑	17.8%	21.6%↑	20.5%	21.5%	51.0%	43.4%↓
Suburban	6880	9.2%	12.0%↑	14.4%	17.2%↑	17.9%	19.1%↑	58.5%	51.8%↓

	Total Resp	Male		Female	
Region	63587	48.8%	39.0%↓	51.2%	61.0%↑
Appalachia	14226	49.2%	38.8%↓	50.8%	61.2%↑
Metropolitan	28497	48.3%	38.6%↓	51.7%	61.4%↑
Rural Non-App	13442	49.5%	39.5%↓	50.5%	60.5%↑
Suburban	7422	49.2%	40.4%↓	50.8%	59.6%↑

	Total Resp	Hispanic		White		Black		Other	
		Exp.	Obs.	Exp.	Obs.	Exp.	Obs.	Exp.	Obs.
Region	62908	2.5%	4.2%↑	82.7%	81.9%↓	11.8%	11.3%↓	3.0%	2.6%↓
Appalachia	14116	0.8%	2.2%↑	95.1%	94.6%↓	2.3%	1.6%↓	1.8%	1.7%
Metropolitan	28112	3.1%	5.5%↑	74.2%	68.1%↓	19.0%	23.0%↑	3.7%	3.4%↓
Rural Non-App	13337	2.5%	3.5%↑	93.2%	93.3%	2.2%	1.5%↓	2.0%	1.6%↓
Suburban	7343	1.7%	4.1%↑	91.5%	90.0%↓	4.2%	3.0%↓	2.5%	2.8%

	Total Resp	0-17		18-34		35-54		55+	
		Exp.	Obs.	Exp.	Obs.	Exp.	Obs.	Exp.	Obs.
Region	63503	23.9%	21.2%↓	22.2%	11.5%↓	29.1%	28.9%	24.8%	38.5%↑
Appalachia	14244	23.1%	20.7%↓	22.9%	11.2%↓	28.3%	28.2%	25.6%	39.9%↑
Metropolitan	28416	24.1%	21.4%↓	21.9%	12.5%↓	29.4%	29.1%	24.6%	37.0%↑
Rural Non-App	13429	24.1%	20.5%↓	22.2%	10.2%↓	28.7%	28.6%	25.1%	40.7%↑
Suburban	7414	23.6%	22.3%↓	22.8%	10.3%↓	29.0%	29.9%	24.6%	37.5%↑

Disproportionate sampling for counties may account for some discrepancies. Similarly, measures for the Metropolitan sample will inherently differ from population values for characteristics correlated to race due to the African American oversample effort in six metro counties. Disproportionate sampling intensifies the imbalance of interviews relative to expected distributions; however, it also provides a broader (and potentially more diverse) set of information from which to analyze these important subgroups—helping to ensure the reliability of estimates. Weighting will correct the balance of major demographics across the surveys. Proper statistical analyses, including those involving variance estimates, should account for weights as they do sample sizes.

Issues with survey implementation (encountered difficulties)

Design issues are summarized in Table 5 below, along with any actions taken.

Table 5

Feedback	Corrective Action
The current number of resistant records is higher than desired, suggesting interviewer difficulties with refusal aversion and refusal conversion.	Refusal aversion and conversion strategies were the focal point of intense refresher training.
During training it became apparent that Respondents were intimidated by hearing the words “Ohio Department of Job and Family Services” and were hanging up.	Programmers replaced all references to ODJFS” with “Ohio State University and Ohio Department of Health” in both the child and adult questionnaire.
Interviewers not reading the questions verbatim; interviewers reading questions in a very stilted tone.	Emphasized the importance of verbatim reading while maintaining a conversational tone of voice in daily shift announcements and refresher training
Interviewers noted that there are missing words at the beginning of the insurance question (B4G) and therefore makes it clumsy to read.	<p>Programmers changed the question to read as follows:</p> <p>//Do you/Does Person in S1// have any OTHER health care coverage that I have NOT mentioned?</p>
Difficulty with the occupation/industry questions- Interviewers and respondents are confusing occupation and industry	(1) Emphasize both the difference between occupation and industry as well as probing rather than leading the respondent in refresher training. (2) Add an interviewer note instructing them to probe for the specific industry and occupation.
Respondents were confused by the adult usual source of care question (F67). Also there are some inconsistencies between the adult and child versions of the question.	<p>Is there a place that //you USUALLY go /Person in S1 USUALLY goes// to when //you are/Person in S1 is// sick or //you need / person in S1 needs// advice about //your/his or her// health?"</p> <p>Changed to:</p> <p>Is there ONE place that //you USUALLY go /Person in S1 USUALLY goes// to when //you are/Person in S1 is// sick or //you need / person in S1 needs// advice about //your/his or her// health?"</p> <p>Also:</p> <p>03 THERE IS MORE THAN ONE PLACE</p> <p>Changed to:</p> <p>03 YES, VOLUNTEERED THAT THERE IS MORE THAN ONE PLACE</p>
Respondents were confusing telephone numbers with telephone extensions.	<p>INCLUDING THIS PHONE NUMBER, how many telephone numbers are there in //your/person in S1’s// house that are primarily for non- business use? Do not include cell phones or numbers that are only used by a computer or fax machine.</p> <p>Changed to INCLUDING THIS PHONE NUMBER, how many telephone NUMBERS are there in //your/person in S1’s// house that are primarily for non-business use? Do not include cell phones or number that are only used by a computer or fax machine.</p>

Feedback	Corrective Action
<p>Many respondents and interviewers have less than a smooth encounter when asking the “gender” question.</p>	<p>Using BRFS as an example, the gender question was changed: From:</p> <p>I’m required to ask {YOUR / RESTORE PERSON’S NAME FROM S1i’s} gender. Are {YOU / RESTORE PERSON’S NAME FROM S1i} male or female?</p> <p>To:</p> <p>(INTERVIEWER ASK IF NECESSARY) I’m required to ask {YOUR / RESTORE PERSON’S NAME FROM S1i’s} gender. Are {YOU /RESTORE PERSON’S NAME FROM S1i} male or female?</p>
<p>Respondents may devote less thought to a “best guess” than “best estimate”. The current “best guess” allows for the idea that any guess is better than nothing.</p>	<p>Programmers replaced any mention of “best guess” to “best estimate”.</p>
<p>Respondents giving answers that fit under more than one response option and interviewers selecting one rather than asking for clarification</p>	<p>(1) Emphasize during the refresher training the importance of eliciting responses that fall into exclusive categories when the question is designed as such (e.g. not a check all that apply). (2) Add interviewer note to specific questions such as H77 (highest level of education) to clarify highest degree received (e.g. some college vs. associate degree).</p>
<p>Interviewer and respondent confusion over wording of several questions (F67e, B8a, F67, CELL1)</p>	<p>Develop and maintain a list of key questions to focus on for refresher training purposes, focusing on common misunderstandings and how to address them.</p>
<p>Interviewer and respondent confusion over terminology used in the questionnaire (e.g. urgent care center vs. emergency room; Medicare vs. Medicaid; Medigap plans).</p>	<p>(1) Added a clarification with the definition of urgent care center to the question when approved by the client. (2) Develop a sheet for the interviewers with more in-depth definitions of commonly confused terms as part of the refresher training.</p>
<p>“Don’t know” responses being accepted without further probing.</p>	<p>(1) Emphasized how to probe “don’t know” answers in a way that elicits information without offending the respondent. (2) Conducted an analysis of existing data, identify questions with high number of “don’t know” responses and evaluated interviewer notes for potential additions.</p>
<p>For the questions in the B10 series (asking if current insurance plans cover mental health, vision, dental, etc), interviewers were probing “don’t know” answers when Respondents did not know the answers</p>	<p>Programmers added both of the following-</p> <ul style="list-style-type: none"> - Added interviewer note to each of these questions: “[INTERVIEWER NOTE: For this question, accept “DON’T KNOW” response without probes.]” - Expand 98 “Don’t Know” response option to read as 98 “Don’t know if plan covers this”

Feedback	Corrective Action
<p>Respondents who refused to give their incomes are becoming angry with the third attempt to capture the data and terminating the interview.</p> <p>//If '99', attempt to convert refusal and ask:// Your response would really help the survey sponsors understand how lower and higher income groups differ in health insurance coverage and problems getting health care. Your response would be kept completely confidential and only used for statistical analysis of large income groups such as persons at or near poverty level. Will you tell me about how much income //your/person in s1's// family received last year?</p>	<p>Programmers added this response option and allowed the interviewer to select it –</p> <p>INTERVIEWER: IF RESPONDENT HAS REFUSED TO GIVE INCOME, SELECT OPTION 02</p> <p>INTERVIEWER: IF RESPONDENT AGREES TO GIVE INCOME, SELECT OPTION 01</p> <p>01 RESPONDENT AGREES TO GIVE INCOME – GO BACK TO INCOME QUESTION 02 RESPONDENT REFUSED TO GIVE INCOME - GO TO NEXT QUESTION</p>
<p>If an interview has suspended after the income question, client would like for there to be a way to resume the survey at R1, not trying to get income again at the call back?</p>	<p>Instructed the interviewer to select response option 02 (listed above) in those instances and continue with the assumption that the respondent will refuse again to give their income</p>
<p>Specific respondent complaints addressed to the study sponsors</p>	<p>Immediately investigate any identified case. If necessary conduct individual interviewer training/intervention, discuss events with entire interviewing staff to ensure situation does not arise again.</p>

Skip pattern errors are addressed in Table 6 below, along with corrective action taken. See the previous section regarding the re-contact study for details about the call-backs.

Table 6

Error	Corrective Action
<p>In the CATI program, respondents who fulfill B18days >= 365 or B18 = 12 months are getting into B21 and B22, although the logic in the questionnaire was designed to exclude this subset of respondents from B21 and B22.</p>	<p>Change was made but the responses to B21 and B22 for this extra set of questions should remain in the dataset since they add extra information.</p>
<p>Several interviewers noted that some respondents are offended by the implication in D30i that they have a mental health problem</p>	<p>Programmers replaced [your/person in S1's) mental health condition" to "a mental health condition" consistent with BRFSS language which was the original intent</p>
<p>For E62, there is a skip pattern error that requires "(Skip to E63)" for response options 00, 98 and 99, resulting in only some respondents getting to answer D31eye1 (which should be asked of everyone). Before, those who had 00, 98 and 99 responses to E62 were skipping to E63 and therefore missing D31eye1 which should be asked of everyone.</p>	<p>This change was immediately made and call-backs were attempted on all 7,985 cases.</p>
<p>Only respondents who said that they smoked were getting d45b, which asked about the rules of smoking in the home. All respondents should have gotten this</p>	<p>Fixed logic pattern, attempted to contact all 483 affected cases.</p>

Error	Corrective Action
question.	
The CATI program appeared to be missing regional list of plans for at least one county for questions J100c and B4c.	Programmers double checked the country lists to make sure the counties all correspond to their respective regions.
Client discovered cases where Medicare plan names come up but the Medicaid plan names do not.	Fixed programmer error that was causing this to happen.
J105e (hearing coverage) is only being asked of children who have coverage different than the selected adult. Since adults were not asked the hearing coverage question this question should be asked of all insured children.	Change the skip logic of the questionnaire so that J105e is asked about all kids who are currently insured (whether or not their insurance is different from the adult's). This question forms part of a series of questions about what the child's current insurance plans cover (dental care, vision services etc, but the remaining questions would continue to be restricted to the subset of kids whose coverage is different from the adult's (J96 = 02, 98, 99) or those who said No, DK or Refused when asked if the child's insurance was the same as the plan(s) the adult and has the same benefits and services and child does not have any other insurance coverage (J96a = 02, 98, 99). Attempted to contact all 4,415 affected cases and gather this information.
Remove additional piece of code that caused a small number of cases to inappropriately skip out of the K99 series.	Make sure the following happens after NK99A and K99A: After NK99A: //If NK99A = 97, go to K99A. Else, go to K102.// After K99A: //Go to K102.// make the entering logic for K99B: (K99 = "02", "98", "99") OR (K98 = "01" AND C3 = "02", "98", "99") Attempted call backs to these 30 missing cases to gather this information.
Change the weight permitted for adults and children D30a / D30b. - adult L125a1 / L125a2. - child	Set maximum for child weight – 500 lbs. Set maximum for adult weight – 700 lbs
Reason for using the ER (NN137E) was not asked of respondents who should have been asked the question. This is due to incorrect skip logic after a no, DK, or refusal at N137C. This cohort should have only skipped the next question (N137D).	Change the skip logic in N137C so that n137c=2, dk, ref skips to N137D, all 56 cases affected were called back.

Non-response

Temporarily utilizing the standard screener in oversample efforts

During a correction of the CATI instrument, a few oversample records became associated with the general screener that did not filter out non-targeted households. Due to methodological and weighting considerations, it was not possible to incorporate these additional records to the final data file. They were reclassified as non-qualified households, and their data was removed from the final file during post-processing.

Minimizing Non-response Bias

To address the issues of non-response bias by gender, race, and income, and to support a low refusal rate, Macro spent a portion of the previously described refresher trainings on interviewers' refusal aversion/conversion efforts. The importance of a high response rate was re-emphasized to the data collection staff during these trainings.

Coverage

Response differences may also occur within demographic groups, such as race or income level. Response differences between demographic and socio-economic groups are evaluated by comparing observed sample distribution to expected distributions based on the population.

Some inequities regarding respondent representation (e.g. gender, age brackets, income levels, ethnicity, etc.) will always occur due to study design, sampling, protocols, etc. For example, the African American oversample in specific Metropolitan counties over-represented high African American population telephone exchanges. This increased probability of selection for African Americans affected those for other racial/ethnic groups but did not do so uniformly across segments, thus contributed to varied incidences of racial/ethnic groups. The gender difference was more pronounced than what is typically seen in a survey of this nature (the male/female ratio was 39/61, ratios of 44/56 are more common. In 2004 it was 42/58).

Macro and OSU paid particular attention to these items (gender, race/ethnicity, age, and income), monitoring refusal aversion efforts and ensuring that interviewers applied the selection procedure correctly across households. Project management staff also reviewed interviewer data to identify systematic problems (ensuring that all interviewers were obtaining similar data).

One final note, the study was only designed to conduct interviews in English and Spanish; therefore, racial/ethnic minorities who did not speak these languages were excluded from the interviewing process, also resulting in a difference between respondents and the overall population.

Addressing Respondent Complaints

In order to minimize the number of respondent complaints, Macro:

- Ensured that interviewers at all levels were trained to code any requests to “take me off of your list” as a firm refusal, not making any remaining calls to those numbers.
- Conducted refresher trainings, focusing on the first minutes of the telephone call to potential respondents, and techniques that could be used to encourage participation. The additional training also focused on refusals, particularly in persuading individuals to participate in the study who initially refused.

To follow-up on any complaint registered by a respondent, Macro:

- Determined if the refusal protocol was followed correctly and subsequently reviewed the work of the interviewers involved to verify their performance and professionalism (and made sure any performance-related issues were improved upon in future situations).

- QA supervisors reviewed previously-monitored sessions and observed current interviewer performance. They assessed the interviewers' general ability to respond to these types of situations appropriately.
- Supervisors verified that interviewers resolved definite refusals (e.g., "remove me from your list") correctly. If there were any concerns regarding performance, interviewers either received additional training or were removed from the project, whichever was most appropriate.

Limitations of Survey Method

Mode

As discussed in prior sections, declining response rates for telephone-based projects have been of concern over the past decade. Much of the decrease has been attributed to the public's aversion to increasing telemarketing. The National Do Not Call (DNC) Registry was established by the Federal Trade Commission in June 2003, making it illegal for telemarketers to call consumers with whom they did not have a prior business relationship. When the DNC Registry was initiated, it contained more than 50 million telephone numbers. The last estimate released by the FTC estimated the registry to contain over 172 million telephone numbers.¹¹ Although survey research calls are exempt from DNC calling restrictions, there could be carry-over effects on the motivation of sample members to respond to a survey inquiry. Research findings are inconclusive—though a majority of states have experienced significant declines in survey response rates during the 21-month periods before and after the official launching of the DNC Registry, neither the positive nor the negative trends appear to be related to the launch or growth of the DNC Registry. Most other factors that have affected survey research efforts have tended to be more gradually adopted, such as telephone answering machines and caller ID. Technologies that function as automated gatekeepers, such as answering machines and call managing services offered by telephone companies, make it easier for respondents to avoid research calls passively, not giving interviewers a chance for conversion. While weighting data minimizes many distortions caused by lower response rate, the adoption of technologies and use of the DNC tend to be correlated to demographics, introducing some level of inaccuracy to the final data of most projects.

Also a contributing factor, people residing in group quarters such as prisons, hospitals, and dormitories were excluded from this study. This introduces a level of bias because corresponding demographic traits are not always consistent with population figures. For example, nursing homes are not used by all age groups proportionally, and the racial composition of the incarcerated population does not match that of the overall population.

The initial sampling frame for the 2008 OFHS did not include designated cell phone exchanges (the traditionally accepted methodology) until mid-way through the fielding of the survey. This decision created a barrier in reaching a certain segment of the population in early fielding, likely of a non-random demographic composition. Inclusion of a cell phone sample should be

¹¹ Federal Trade Commission (2008). Current Do Not Call Registrations by Consumer State/Territory as of September 30, 2008. Released October 6, 2008, available on-line at <http://www.ftc.gov/bcp/edu/microsites/donotcall/pdfs/DNC-Registrations-10-06-2008.pdf>

considered in all future iterations of the survey, as more work is done to determine the effects of excluding this expanding population.

Language

OFHS interviews were conducted in English and Spanish, so respondents speaking another language will not be represented in this dataset.

Limited Protocols

There is also a practical limitation regarding the number of attempts (15 for this study) made to contact each respondent. A CATI system was utilized to ensure a proper number of attempts distributed across an acceptable amount of time at varied times during the day and week. Unresolved records averaged over 12 attempts at the end of fielding, with approximately two-thirds of active records receiving at least three weekday, seven weeknight, and five weekend attempts. Numbers were rarely re-attempted by the CATI system more than once during a 24-hour period. Despite this dialing protocol, cases undoubtedly existed where actual attempts did not correspond with respondent availability for screening. Since completed interviews required five attempts on average, Macro anticipates this percentage of records is nominal, but should be acknowledged.

Sample Design

Respondents were selected randomly from each household, not because of their level of knowledge about their health needs and insurance coverage. Weaknesses are introduced to the data by documenting the inaccuracies of the respondent's responses.

Respondents also influenced the accuracy of the data based on the level of consideration, seriousness, and accuracy to which they answered the questions. Interviewers were trained to guide the respondent as much as possible, prompting for thorough answers that addressed the posed questions. Although this helped support the quality of the data, ultimately the respondent is the one who controls how accurate his or her responses are.

Distributions over Time

Differences in survey estimates may result from social or economic changes that take place during the field period (outside of survey administration), such as a major economic downturn or a natural disaster. The OFHS addresses this issue through a short field period, 50% shorter than the 2003 administration. This short field period decreases the likelihood that a major change will take place while the survey is in the field, meaning that the estimates generated are more like a "point in time." Further, our data file has a variable (LASTDATE) that indicates when the survey was completed. Meaning that if necessary, cases can be selected based on the point in time in which the information was gathered. For example, one such variable is provided on the file that marks interviews conducted on or before Lehman Brothers Inc filed for bankruptcy and those conducted after.

Potential for Bias

Non-response Bias

In addition to bias related to coverage, gaps were created in the data file when a respondent did not know, or refused to answer, any specific question during the survey. While an effort was made to minimize this non-response, refusal categories were required for each question on this survey because it was conducted in accordance with the Privacy Act of 1974. Likewise, it is also important to consider the issue of item non-response while analyzing the 2008 OFHS data. Questions related to subject matter that many respondents may not be familiar with may create disproportionate non-response across groups. For example, the ability to answer some specific health insurance questions may be correlated to age or income level—i.e., an eligible respondent under 21 years of age still on parental insurance may not be aware of the costs of premiums. This could alter the demographics of those represented, allowing for incorrect conclusions regarding the general population.

Response Bias

In sampling situations, any deviation from population figures signifies some level of bias in the data. Robust methodologies, such as the ones used for the 2008 OFHS, will usually reduce these inaccuracies to statistically acceptable levels. Actions such as weighting data eliminate the appearance of bias in some variables, but do not generally guarantee improved accuracy for remaining data points. This is why levels of error incorporating design effects must be considered during analysis before conclusions are formed.

Despite these potential sources for error, following the designated research methodologies has assured that the data collected is comparable to the previous wave of the survey, and results reflect population characteristics given calculated statistical margins of error.

Coverage

To develop robust sample sizes, Macro introduces the design effect (DEFF), a measure of design efficiency defined as the variance under the actual sampling design divided by the variance under a simple random sample of the same size. The DEFF reflects the variance-increasing effects of sample clustering and of the unequal weighting induced by oversampling. That is, the use of unequal probabilities of selection (e.g., unequal sampling rates in different strata) leads to unequal sampling weights, which in turn lead to greater variances.

Thus, a misleading picture may be painted by the reporting of total sample sizes (number of completed interviews) and sampling errors (variances, standard errors or confidence intervals) associated with simple random sampling. Another way of describing these effects is via an effective sample size, defined as the total sample size divided by the DEFF (i.e., the size of a simple random sample yielding the same precision). For a DEFF=2, the effective sample size for the total sample of about n=43,000 interviews is 21,500. For domains based on minority groups, samples of 400 or 800 respondents, for example, correspond to effective sample sizes of 200 or 400, respectively.

Analysis

Creation of the Data File

To collect the data, Macro used programs written in CfMC Survent software, a computer-aided interviewing software package. Data collected during interviewing was stored in a CfMC compressed column binary file with the extension “.tr.” The file that managed telephone interviewing had an extension “.fon,” and stored telephone numbers, all sample data (master identification number, ZIP code, address, etc.), telephone parameters (zone, times available to call, etc.), and results of each call (attempt number, disposition, call-back time, etc.). The final dataset submitted was created in SAS and saved as a SAS Transport File.

The SAS procedures for post-processing consisted of the following tasks in order to convert the data for analysis:

- Importing the raw interview data from ASCII into a SAS dataset.
- Importing the ASCII phone file into a SAS dataset—and re-coding both unresolved and resolved CATI dispositions into a final set of dispositions, so that a final CASRO value could be determined and final disposition frequencies generated.
- Creating a special text file to facilitate re-coding open-ended data; this procedure automatically uppercased and left-justified all open-ends, and sorted them according to the name of the question. This file was manually edited by the team of coders, who inserted a numeric code on any record that required re-coding.
- Merging any necessary phone file information onto the interview data.
- Merging the re-coded open-end values and cleaned open-end text for a report showing all open-ended text and re-codes.
- Performing final cleaning and/or re-coding of data values.
- Outputting final ASCII deliverable file.
- Reading the ASCII deliverable back into SAS to run frequency checks.
- Producing the SAS deliverable dataset; this procedure kept only the final variables in the dataset, dropping any intermediate variables. Variables were then renamed and labeled according to specifications.
- Generating final frequency checks from the SAS deliverable.
- Converting a copy of the final file into SPSS.

Files were produced for the client at specified intervals representing the percent of completes obtained—specifically, at 25 percent, 50 percent, 75 percent, 90 percent and then at the conclusion of data collection. All files were posted on Macro’s project-specific portal, and accompanied by a codebook and a data dictionary which gave information on every variable in the file.

DP and QA procedures

Inconsistent Responses

Some inconsistencies in the data could not be rectified with the CATI program during the interview. The following describes these inconsistencies, along with the corrective action steps taken for each.

- Inconsistencies due to incorrect open-end re-coding: There were a few occurrences where the open-ended response did not match the question (i.e., Why was it a problem seeing a specialist—“It was not a problem to see a specialist.” The initial question asking whether it was a problem should have been answered, “Not a problem”). These were resolved and fixed in the open-end re-coding programs.
- Inconsistencies due to respondents providing contradictory responses: In certain cases, consistency between data points was not forced during the interviewing process because issues regarding respondent burden would jeopardize the completion of the interview. For example, if a respondent stated that there were more adults in the family than in the household, the CATI script was programmed to verify this information. If the respondent stated that his or her response was correct, the inconsistency remained. These inconsistencies remained in the final dataset.
- Inconsistencies introduced during post-processing: Occasionally, respondents provided contradictory responses, and the steps to correct the inconsistency yielded further complications. For example, if a respondent mentioned that he or she was insured through a current job, he or she was automatically coded as being employed. The next question asked the same respondent to indicate place or employment. Some respondents answered that they did not work or that they had lost their job. This inconsistency remained.

Out-of-range Responses

The CATI program developed for the 2008 OFHS was designed to minimize inconsistent responses throughout the questionnaire, and range checks were set to appropriate limits on responses. For example, if a question asked “How many days in the last month did you drink alcohol?” the answer should fall between zero and 31. Some range checks were “hard” in the sense that the computer would not allow an out-of-range response to be entered; some were “soft” and required that the interviewer verify the response before entering it. Consistency checks also verified that responses matched one another across questions. For instance, if a respondent said that there were more adults in his or her central family unit than lived in the household, a consistency check prompted the interviewer to reconcile the responses between the two questions.

Missing Values

After working with ODH to identify candidate variables for imputation at the household and individual levels, Macro conducted data imputation—rather than accept high levels of non-response resulting from “don’t know” or “refused” responses, or from questions not asked. Please see the section, *Imputation Method* for more information about imputation. Further,

Macro conducted a re-contact study (referred to as the “Re-contact Survey”) to gather information missing due to survey errors; details are given below.

Re-contact Survey

At the request of the client, Macro conducted a Re-contact Survey of approximately 10,892 respondents from the OFHS 2008 Survey. Due to survey skip errors, data critical to the study was not collected from some respondents. For adults, the questions covered use of eye care (PD31eye) and the rules about smoking in the home (D45b). Respondents with children were asked about the child’s use of the emergency room as a usual source of care (NN137e), whether anyone has tried to get Medicaid for the child (K99b), and whether the child’s insurance covers hearing care (J105e). Please see Table 7 for a breakdown of the number of cases by question missing.

Table 7

K99b	PD31eye	J105e	D45b	NN137e
30	7985	4145	483	56

The re-contact Survey started and ended in January, 2009. At least 15 attempts were made to each record, following 2008 OFHS dialing protocols. At the end of data collection, data from the Re-contact Survey was merged to the main dataset using SAS. Responses not obtained via the Re-contact Survey that were also not key variables appear as a “.” in the dataset. Both “don’t know” and “refused” were consistently coded throughout the questionnaire as 98 and 99, or 998 and 999.

Handling Open-ended Responses

Questions in a survey research instrument may be presented to the respondent with differing degrees of structure depending on data usage and error-checking requirements. A close-ended question provides a list of possible answers from which the respondent may choose. An open-ended question does not provide a response list, and therefore requires the respondent to answer in his or her own words. There are also situations where a close-ended question has an open-ended response option. In this instance, the respondent may choose the option “Other (specify)” and then answer in his or her own words. This option is only used when none of the possible answers in the list fit the response.

An example of a close-ended question is “Which spreadsheet program are you most familiar with: Excel, Quattro Pro, or Lotus 1-2-3?” In this case, the respondent must choose from a limited roster, perhaps based on previous answer choices or due to restrictions imposed by the researchers. However, the question could easily be modified to the open-ended version, “Which spreadsheet program are you most familiar with?” In this situation, programs not mentioned previously, such as Fox Pro, might be documented. In cases where there is a list of response options and an “other (specify)” option, the “other specify” is used to record the respondent’s answer verbatim. In post-processing, these verbatim answers can be coded according to the existing codes and/or new codes can be applied to these answers. In 2008, unlike the 2003-2004 study, most of the questions that were coded are “other (specify)” options of questions.

This section describes the procedures followed by Macro staff to collect accurate data, monitor data quality, code responses, and ensure the quality of coding—as related to open-ended questions.

Interviewer Training

OFHS interviewers were trained in the proper techniques of collecting verbatim data. Issues such as clarifying answers that are unclear and probing for more information were covered with emphasis on the use of neutral questions that do not influence the respondents' answers. Interviewers were instructed to type in responses verbatim, but are permitted to omit re-statements of the question and non-essential words such as “a”, “an” and “the”. Commonly recognized abbreviations were also acceptable, although discouraged if time allowed for typing full words. Quizzes were conducted at the end of training to ensure concepts were understood and able to be applied.

Monitoring of Quality of Open Ended Data Collection

Open-ended questions were monitored for data quality on a routine basis. QA Assistants observed interviewing and documentation techniques at the time of survey. Weaknesses in method were addressed with interviewers as quickly as appropriate, with specific details of what deficiency occurred and how situations should be addressed in the future. For the majority of fielding, a sampling of responses was reviewed by research staff on a frequent basis. Any potential problems or suggestions were conveyed to the manager of the data collection center.

Assessment of Manual Coding

Procedures Used to Code Open-Ended Responses

Macro developed a program that has been used in many of its CATI surveys to code, back-code, or re-code open-ended responses. The program, called “fixopen”, is written in the Perl scripting language. A related SAS program, called “fixopen.sas”, generates a file of the open-ended responses and then retrieves the edited open-ended responses for final data processing.

The steps involved in the coding, back-coding, or re-coding of open-ended responses is as follows:

1. A codebook is created that summarizes the description and response codes for each call variable followed by the resulting open-ended variable. A call variable is the variable that calls for the respondent to give an open-ended response. An open-end variable is the variable that contains the open-ended response. For example, for question B20A “Why //do you/does person in S1// no longer have this coverage?”, the call variable becomes PB20A as follows, and the open-ended variable becomes B20A.

PB20A Why no longer covered by Medicaid
01 Earn too much money now to qualify
02 Obtained other coverage
03 No longer receive welfare/cash assistance/ADC/TANF
04 No longer disabled or qualified as disabled

- 05 No longer qualified, but not sure why
- 06 Do not need it anymore
- 07 Do not want to go through application process again
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

B20A Why no longer covered by Medicaid-Verbal

2. The fixopen program reads the codebook and creates a keyword file, which includes summary data on each call and open-ended variable, the text of each response code, and a list of keywords obtained by parsing of the response code label. For example, for PB20A above, the keyword file would contain the following summary data on the call and open-ended variable:

B20A PB20A 1 (97) WHY NO LONGER COVERED BY MEDICAID-VERBAL.

Then it would include the text of each response code:

- 01 EARN TOO MUCH MONEY NOW TO QUALIFY*
- 02 OBTAINED OTHER COVERAGE*
- 03 NO LONGER RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF*
- 04 NO LONGER DISABLED OR QUALIFIED AS DISABLED*
- 05 NO LONGER QUALIFIED, BUT NOT SURE WHY*
- 06 DO NOT NEED IT ANY MORE*
- 07 DO NOT WANT TO GO THROUGH APPLICATION PROCESS AGAIN*
- 98 DK*
- 99 REFUSED*

Keywords would follow the text for each response category. Below is an example of the keywords for the first category.

EARN, TOO, MUCH, MONEY, NOW, QUALIFY

3. Fixopen examines the open-ended file by scanning each open-ended response for matches to any of the respective response code keywords. The matching process uses three methods:
 - o Exact match;
 - o Matches obtained by addition, deletion, or substitution of one character; and
 - o Matches obtained using the soundex system, which creates a code based on the sound of a word. For example, the soundex codes for SPECIALIZED and SPECIALIST are the same, and therefore, would result in a match.
4. If one or more matches are found, the open-ended response and all matching response codes, are presented to the user, who will either:
 - o Select the most appropriate coding;
 - o Flag the data for more detailed handling; or

- Make no change, thus leaving it as a multi-matched response (this would occur when an open-ended response matches with more than one defined response category, and the question allows for multiple responses).
5. The call variable may also be asked after the respondent has answered “no” to a range of related categorical questions, and the open-ended response indicates that he or she should actually have responded “yes” to one or more of those questions. Fixopen may be configured to include additional response codes related to such questions. If a match is found and the decision is made to re-code the open-ended to one of the precursor questions, fixopen creates SAS coding in a separate file to reset the call variable, erase the open-ended response, and set the precursor question to “yes”. For example, in the following questions, if the respondent says “no” to D37A-F, then says “yes” to D37G and "help with bathing" is recorded in D37G1, fixopen can be programmed to: code D37A to 01; code D37G to 02; and delete the response in D37G1.

D37. //Do you /Does Person in S1// currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEM(S) you just told me about?

- A. Assistance with personal care, such as bathing, dressing, toileting, or feeding?*
- B. Domestic assistance, such as shopping, laundry, housekeeping, cooking, or transportation?*
- C. Help with household maintenance, such as painting or yard work?*
- D. Social or emotional support, such as companionship, recreation, and socialization?*
- E. Coordinating health care, such as making appointments for doctor’s visits or therapies?*
- F. Assistance managing financial affairs, such as managing //your/person in S1’s// checkbook or legal affairs?*
- G. Other kinds of assistance that I have NOT mentioned?*
 - 01 YES*
 - 02 NO*
 - 98 DK*
 - 99 REFUSED*

D37G1//If D37G=01 ask, else continue//

What other kind of assistance //do you/does person in S1// currently need, BECAUSE OF THE HEALTH PROBLEM(S) that you told me about?

- 01 /TEXT RANGE=270/ _____*
- 98 DK*
- 99 REFUSED*

- 6. If the open-ended response indicates that more comprehensive re-coding is required (such as re-coding of more than one precursor question, re-coding of variables

preceding and/or following the call variable, etc.), the data may be flagged for further review by the coding team or project manager.

7. After the coding is completed, an edited open-ended file is created, to be subsequently read back in by `fixopen.sas`, and then merged with the final dataset.

An advantage to above approach is that it determines what changes have been made to any call or open-ended variable—by comparing the raw and edited open-ended files and examining the SAS code files generated by `fixopen`.

Quality Assurance for Coding Classifications

The manual coding of open-ended survey responses carries a variety of quality assurance steps to ensure the validity and reliability of data. The OFHS project manager verifies the first 100 assigned codes from each coder. This verification effectively predicts the overall performance of each individual coder and determines what additional training might be required. Random samples of coded responses were then drawn to measure intercoder reliability. Further, all coded responses were rechecked prior to issuing the final deliverable file.

Data Formatting

Formatting data involved labeling each variable. Upon producing each deliverable dataset, only the final variables in the dataset were kept.

Weighting and Imputation Procedures

Imputation Procedures

Missing values in the OFHS data files were replaced through imputation for many key variables to facilitate weighting adjustment and improve the analytic use of the files. Two different strategies were primarily used for imputing critical variables at the household and individual levels. The hot-deck imputation method was used for imputing key demographic variables as well as all variables needed for the weighting process, whether or not they were demographics. The latter variables included the number of telephone lines in the household and the number of adults and children in the household. Multivariate stochastic regression imputation was used to replace missing values for socio-economic measures and insurance status, such as income and Medicaid status, which are of critical analytic importance for OFHS. Demographics and other social-economic measures were included as predictors in the regression imputation (Little and Rubin, 2002).

Hot Deck Methods

Hot-deck methods estimate the missing value of an item using the values of the same item from other similar record(s) in the same file. One advantage of this method is that related items can be imputed as groups to preserve internal consistency and statistical relationships between items to the greatest extent possible. Hot-deck methods preserve the distribution of non-missing responses in the imputed items to some degree thus avoiding the problem of artificially severely lowered variances presented by some deterministic imputation methods (e.g., mean imputation or

deterministic regression methods). For these other methods, lower variances result from imputing the same value for a series of records with missing data.

The key to hot-deck imputation is to link “donor” records with the records containing items to be imputed. Donors are those with non-missing values and have very similar characteristics to those who need to be imputed. Hot-deck methods start with creating imputation classes by grouping similar subjects including both donors and those with missing values. The characteristics defining “similar” vary from variable to variable. Once an imputation class is defined, a record is selected randomly to donate values from within the class for each record in that class with a missing item.

Macro imputed person-level demographics, such as age, race/ethnicity and education, because these items are critical to the construction of survey weights. The imputation process is designed to yield values for these items that would be consistent with the rest of the demographic items on the person’s record. With the random hot-deck procedures, a donor is randomly selected without replacement for each record with missing values within the imputation class and the missing value is replaced with the donor’s value.

With our hierarchical approach, classes can be defined in terms of the variables imputed earlier in the process. For example, by imputing age and race/ethnicity first, classes for education levels will be based on age and race/ethnicity. Because the county designation had been uniquely and cleanly defined for each record prior to the imputation process, county location is also incorporated in the hot-deck method in forming imputation classes.

These imputation methods were used hierarchically for the following demographic variables:

- Age (six categories);
- Race/ethnicity (four categories);
- Education (seven categories); and
- Tenure (own or rent home).

The Gender variable had very little missing data and records were imputed randomly with probabilities that mirror the empirical distribution of the observed gender data. The imputation of age capitalized on the availability of two age variables, one continuous and one categorical. When only the categorical variable was missing, its imputation made straightforward use of the continuous age variable. When only the continuous age was missing, it was imputed as the mean of the age variable within the category defined by the categorical variable. When both were missing, then hot-deck methods were used. The Race/ethnicity variable used in weighting was imputed with hot-deck within each county. The imputation of education levels and tenure could then make use of classes defined by county, age, and race/ethnicity as these variables had complete data at this point.

Macro also imputed with hot-deck methods the following variables needed for weighting:

- Number of adults in the household, needed for the computation of adult-level sampling weights (based on the probabilities of selection for adults),

- Number of children in the household, needed for the computation of child-level sampling weights (based on the probabilities of selection for children), and
- Number of telephone lines, needed for the computation of household-level sampling weights (based on the probabilities of selection for households).

As in the imputation of education, the imputation of these variables used classes defined by county, age, and race/ethnicity.

Stochastic Regression Imputation for Income and Medicaid Status

We used multivariate regression models to impute the socio-economic variables related to income and Medicaid status to better take advantage of the correlation between those variables and other demographic and social-economic variables. A multivariate regression model was first identified between the variable with missing values and a set of completely observed predictors. Then the missing values were replaced by the predicted values from the regression model plus a random residual. The addition of the random residual makes the imputation a draw from the predictive distribution of the missing value, rather than just from the mean, which usually distorts the distribution.

Medicaid status was imputed first, and this variable then also used in the imputation of income. The imputations were generated with SAS PROC MI (with the setup of single imputation) by fitting a logistic regression since Medicaid status is dichotomous. It is also important to note that many records had missing data for Medicaid status by design—skips as the respondent had reported no insurance—and therefore were not imputed

The following predictors were included in the models for Medicaid status:

- Gender of respondent
- Number of children
- Marital status
- Race/ethnicity (3 categories)
- Education levels (3 categories)
- Age (5 categories)
- Tenure (own or rent home)
- Employment status
- Insured through employer

While the age and education categories were the same discussed above, the race/ethnicity only had 3 categories: Black, Hispanic and White/Other.

The same predictors were used for income imputation with the addition of imputed Medicaid status. The imputation of family income was restricted to the categorical variable measuring the percentage in specified poverty levels (7 ordinal categories, or brackets). Therefore, imputations were generated with SAS PROC MI (with the setup of single imputation) by fitting a ordinal logistic regression. In developing the regression models, we carefully balanced model parsimony, and hence efficiency, with the inclusion of predictors believed to have a meaningful relationship with socio-economic measures.

In the regression imputation of both variables, separate models were fit for each region, as well as for the cell phone sample. In other words, five separate models were fit for the cell sample and for the four regions (Appalachian, Metro, Suburban, and Rural counties). Because the models did not include separate coefficients for interactions, the fit of separate models by region allowed us to examine whether the effects of these demographic predictors varied across regions, and take these differential effects into full account. The same argument applies for the cell phone sample where the relationships are expected to differ from those in the main (landline) sample.

To help assess the methods used in the imputation of income, we performed a simulation study to compare the predictive accuracy between stochastic regression imputation and hot-deck methods. Region, age, marital status, race/ethnicity, education, household size were used as the predictor. We first restricted the dataset to complete case only. To comply with the Missing At Random (MAR) assumption, we vary the missing data rate at different levels of the predictors. The predictive accuracy of stochastic regression imputation and hot-deck methods were evaluated based on 10-chunk cross-validation methods.

Weighting

This chapter describes the weighting procedures developed for the 2008 OFHS. Survey weights are typically utilized to support estimates that may be generalized to the target population with minimal bias. Thus, weights adjust for unequal probabilities of selection and aim at reducing potential non-response, non-coverage bias, and the variance of the estimates by using auxiliary information.

Non-response biases may occur as a combined result of the amount of non-response and differences between non-respondents and respondents in the key study variables. Similarly, non-coverage biases are the combined effect of the amount of non-coverage and differences between households without telephones and the general population of households. More generally, survey weights not only adjust for potential biases that may follow from non-response and under-coverage but also for differential probabilities of selection for households and individuals. At the same time, because unequal weighting may inflate variances while it reduces bias potential, the OFHS weighting procedures were carefully calibrated to keep variances under control.

The following steps are involved in the weight computation for adults and for children, both sets building on the computation of household-level weights.

- The computation of sampling weights—adjusted for the varying probabilities of selection for households, adults and children, and reflecting the oversampling of minority groups;
- The computation of post-stratification adjustments; and
- Trimming weights to eliminate excessive weights (outliers)

Post-stratification is a method to adjust the weights to ensure that OFHS estimates are consistent with known population control totals. The following post-stratification dimensions were considered: geography (county), age, gender, race/ethnicity, education and owning/renting a home. The last of these, variable (“tenure”) was added as a valuable SES indicator that would help mitigate under-coverage biases at the household level. Non-response bias arises when non-respondents are not similar to respondents along key survey characteristics. Post-stratification

adjustments tend to reduce biases due to non-response when homogeneous post-stratum cells are constructed. Similarly, the adjustments reduce potential non-coverage biases.

Because post-stratification in OFHS involved a large number of nested factors, the process was implemented with raking methods. As described in this section, raking permits the attainment of marginal population control totals in an iterative process. In raking, weights are post-stratified along each set of dimensions in turn. To illustrate with one simple example, weights may be adjusted by education, age and gender; and then adjusted weights post-stratified by race/ethnicity, age and gender, before returning to the adjustment of the resulting weights by education, age and gender.

At its final step, population totals are achieved exactly in cells defined by racial group, gender and age group. To limit the variability in weights, and potential increase in variance that would ensue, trimming is included in the raking process.

Household Weights

Sampling weights computed at the household (HH) level are an essential ingredient for all other weights. These weights were based on the differential probabilities of selection for telephone households selected in each county, and in the six oversample counties. In essence, the sampling weight is the total number of telephone numbers available in the stratum divided by the number of telephone numbers selected from the stratum.

$WT1 = (\text{total \# of telephone numbers in the stratum}) / (\text{\# of telephone numbers selected in the stratum})$

The base weights for the cell phone sample, treated as a separate stratum, were computed as the ratio of the frame size, $N = 13,998,800$, and the number of selections, $n = 39,677$. Specifically, the initial sampling weight is the ratio N/n for the cell sample records, similar to the sampling weights for the other strata.

$WT1_{\text{cell}} = 13998800/39677$

Because households with multiple (landline) telephone numbers have a greater probability of selection, in proportion to the number of phone lines, the household-level weight was adjusted by dividing the base weight by the number of landlines available at the household. In cases where a household reported more than three telephone lines, the adjustment factor was set to 3; i.e., it was truncated to limit the potential variance-inflating effects of extreme weights. That is, $WT2 = WT1 / (\text{Landline numbers})$ if the number of landline numbers is less than or equal to 3; the denominator is 3 if this number exceeds 3.

Household weights were adjusted by tenure status—i.e., whether the householder owns or rents the home—using household-level data available from the U.S. Census. This adjustment is considered critical generally to mitigate potential under-coverage biases as non-telephone households tend to fall in lower socio-economic strata. It remains important even in the presence of a cell telephone sample which also works to reduce this bias. The base of the adjustment was the total number of households in the state, broken down by tenure, and by age of householder. Table 8 presents the adjustment factors used for the base household weights.

Table 8

Age	Tenure	Sum Household Weight	Household Population	Adjustment Factor
Less than 65	Own	727370.56	2370975	3.25965
Less than 65	Rent	276429.76	1168979	4.22885
65 or older	Own	253659.60	768684	3.03038
65 or older	Rent	54325.16	197357	3.63288

Therefore, the household weight may be expressed as the

$$WT_{HH} = (FH) * WT_2$$

Here, FH is the adjustment factor computed within each weighting class as displayed in Table 6.

Adult Weights

Sampling Weights for Adults

Sampling weights for adults were generated by multiplying household-level weights by the number of eligible adults in the household to account for the sub-sampling of adults. In other words, the base weight for adults is

$$WT_{Adult} = WT_{HH} * N_{Adults}$$

Post-stratification and Raking

Post-stratification factors were gender, age, education, geography (county), Medicaid status and race/ethnicity. The following categories were defined for these variables in post-stratification. First, Gender and Medicaid status were dichotomous variables defined in an obvious way.

The age variable was combined into 5 categories: 18-34, 35-44, 45-54, 55-64, and 65+. Education was combined into 3 categories: less than high-school, completed high-school, and more than high-school education. Four Race/ethnicity categories were defined as Blacks, Hispanics, Asians and Whites and Others.

With one single post-stratification step, the adult weight is adjusted as

$$WT_{Adjusted} = WT_{Adult} * F(post)$$

The post-stratification factor, F(post), is computed within each post-stratum cell as the population total divided by the sum of the unadjusted weights, WT_Adult, in the post-stratum cell.

A raking approach was used for two major reasons:

- 1) Operationally, because marginal totals were available for certain cross-classifications of these variables (but not for others), and
- 2) Statistically, because post-stratum cells might be too small otherwise, and as small cells lead to large variances and instability in weights and weighted estimates.

After an initial post-stratification by county, all post-stratification cells were nested within primary gender-by-age groups. In this manner, four post-stratification steps were implemented:

- Post-stratification by Counties;
- Post-stratification by Education, Gender and Age;
- Post-stratification by Medicaid status, Gender and Age;
- Post-stratification by Racial/ethnic group, Gender and Age.

The iterative raking process repeats those four post-stratification steps until it converges.

Note that following the first step, all subsequent steps preserve the weight sum within each primary class defined by age and gender. The fourth step included a trimming step designed to limit extreme weights and their variance impact as described above.

Following this post-stratification step during the iterative raking process, the most extreme weights were trimmed, and re-distributed within each of the post-strata to preserve the weight sums in each of the final post-strata. . Specifically, trimming involved the following two steps: a) truncating the top 5 percent of the weights—i.e., make those exceeding the 95th percentile equal to this upper bound; and b) redistributing the trimmed amount among the observations within each gender-by-age class so that the total weight in each of those 10 classes remains the same.

Tables 9, 10, and 11 show summary results for the three post-stratification steps that follow post-stratification by county. Table 9 presents the post-stratification adjustment factors for post-stratification by age group, gender and education level. Table 10 presents the post-stratification adjustment factors for post-stratification by age group, gender and Medicaid status. Table 11 presents the post-stratification adjustment factors for post-stratification by age group, gender and race/ethnicity category. As shown in the tables, the post-stratification used 5 age groups, 3 education groups and 4 racial/ethnic groups.

Each table presents the factors for the first iteration and for the last iteration to show how much closer to 1.0 these factors become through the iterative raking process; a factor near 1.0 means that the weight sum in the post-stratum is very nearly identical to the population control total it is designed to match. The tables also show the population control for each post-stratum cell.

In addition, the last step also included combining the supplement list samples for Asians and Hispanics as described in the next section.

Table 9

Cell	Gender	Age	Education	Population	Adj.factor: First Iteration	Adj.factor: Final Iteration
1	Male	18-24	Less than HS	101,321	2.06198	1.03167
2	Male	18-24	HS Grad	202,031	1.21611	0.88487
3	Male	18-24	Some college or more	247,594	1.66370	1.10447
4	Male	25-34	Less than HS	83,834	2.82697	1.19135
5	Male	25-34	HS Grad	256,775	1.84104	0.98140
6	Male	25-34	Some college or more	377,325	1.26416	0.97811
7	Male	35-44	Less than HS	74,377	2.76371	1.01842
8	Male	35-44	HS Grad	295,748	1.62127	0.99862
9	Male	35-44	Some college or more	420,332	1.23651	0.99766
10	Male	45-64	Less than HS	159,022	2.08427	1.00142
11	Male	45-64	HS Grad	556,625	1.22920	1.00025
12	Male	45-64	Some college or more	767,263	0.95676	0.99950
13	Male	65+	Less than HS	163,379	2.06405	1.00056
14	Male	65+	HS Grad	234,193	1.02728	1.00004
15	Male	65+	Some college or more	240,033	0.77186	0.99949
16	Female	18-24	Less than HS	69,997	1.84995	0.99282
17	Female	18-24	HS Grad	170,290	1.01546	0.97279
18	Female	18-24	Some college or more	293,141	1.40866	1.01926
19	Female	25-34	Less than HS	65,242	1.51109	0.99994
20	Female	25-34	HS Grad	194,866	1.04653	1.00008
21	Female	25-34	Some college or more	466,311	1.00790	0.99969
22	Female	35-44	Less than HS	58,748	1.10466	1.00029
23	Female	35-44	HS Grad	256,631	0.96629	0.99998
24	Female	35-44	Some college or more	486,020	0.85161	0.99967
25	Female	45-64	Less than HS	151,908	1.09852	1.00041
26	Female	45-64	HS Grad	594,020	0.75671	1.00000
27	Female	45-64	Some college or more	816,029	0.59712	0.99966
28	Female	65+	Less than HS	231,032	1.63431	1.00022
29	Female	65+	HS Grad	416,998	0.81730	0.99990
30	Female	65+	Some college or more	260,904	0.58597	0.99967

Table 10

Cell	Gender	Age	Medicaid	Population	Adj.factor: First Iteration	Adj.factor: Final Iteration
1	Male	18-24	Yes	51,416	1.08118	0.96252
2	Male	18-24	No	499,530	0.99233	1.00402

Cell	Gender	Age	Medicaid	Population	Adj.factor: First Iteration	Adj.factor: Final Iteration
3	Male	25-34	Yes	60,097	1.17242	0.99665
4	Male	25-34	No	657,837	0.98674	1.00031
5	Male	35-44	Yes	43,508	0.58782	0.99562
6	Male	35-44	No	746,949	1.04258	1.00026
7	Male	45-64	Yes	57,730	0.53048	0.99987
8	Male	45-64	No	1,425,180	1.03719	1.00001
9	Male	65+	Yes	32,103	0.34638	0.99981
10	Male	65+	No	605,502	1.11117	1.00001
11	Female	18-24	Yes	112,157	0.77866	0.98365
12	Female	18-24	No	421,271	1.08188	1.00444
13	Female	25-34	Yes	131,093	0.85976	1.00037
14	Female	25-34	No	595,326	1.03726	0.99992
15	Female	35-44	Yes	94,907	0.86970	1.00031
16	Female	35-44	No	706,492	1.02054	0.99996
17	Female	45-64	Yes	125,929	0.82265	1.00021
18	Female	45-64	No	1,436,028	1.01927	0.99998
19	Female	65+	Yes	70,029	0.62942	1.00000
20	Female	65+	No	838,905	1.05169	1.00000

Table 11

Cell	Gender	Age	Race	Population	Adj.factor: First Iteration	Adj.factor: Final Iteration
1	Male	18-24	White/Other	451,160	1.03203	1.00941
2	Male	18-24	Black	74,665	1.05988	0.98052
3	Male	18-24	Hispanic	16,125	0.56926	0.89230
4	Male	18-24	Asian	8,996	0.59908	0.92066
5	Male	25-34	White/Other	591,579	0.98702	0.99964
6	Male	25-34	Black	83,179	1.25860	1.00247
7	Male	25-34	Hispanic	26,346	0.68113	0.98916
8	Male	25-34	Asian	16,830	1.21903	1.01803
9	Male	35-44	White/Other	668,999	0.99861	0.99934
10	Male	35-44	Black	83,470	0.99492	0.99839
11	Male	35-44	Hispanic	21,993	0.79997	0.99866
12	Male	35-44	Asian	15,994	1.75034	1.03925
13	Male	45-64	White/Other	1,304,600	0.99248	1.00009
14	Male	45-64	Black	138,970	1.10747	0.99903
15	Male	45-64	Hispanic	21,541	0.68072	0.99970

Cell	Gender	Age	Race	Population	Adj.factor: First Iteration	Adj.factor: Final Iteration
16	Male	45-64	Asian	17,800	1.57610	1.00128
17	Male	65+	White/Other	575,465	0.98984	1.00009
18	Male	65+	Black	50,056	1.16986	0.99911
19	Male	65+	Hispanic	7,299	0.70737	0.99970
20	Male	65+	Asian	4,785	1.52924	0.99945
21	Female	18-24	White/Other	434,393	1.09924	1.00239
22	Female	18-24	Black	73,942	0.76898	0.98556
23	Female	18-24	Hispanic	15,959	0.48686	0.97683
24	Female	18-24	Asian	9,134	0.98036	1.04884
25	Female	25-34	White/Other	590,588	1.01927	0.99988
26	Female	25-34	Black	95,050	0.91253	0.99885
27	Female	25-34	Hispanic	22,982	0.71106	0.99925
28	Female	25-34	Asian	17,799	1.69282	1.01108
29	Female	35-44	White/Other	670,148	0.99172	1.00008
30	Female	35-44	Black	96,656	1.03065	0.99930
31	Female	35-44	Hispanic	17,283	0.70075	0.99954
32	Female	35-44	Asian	17,312	2.40069	1.00126
33	Female	45-64	White/Other	1,353,465	0.99902	0.99994
34	Female	45-64	Black	166,048	0.95796	0.99917
35	Female	45-64	Hispanic	21,143	0.77733	0.99937
36	Female	45-64	Asian	21,301	3.21099	1.01070
37	Female	65+	White/Other	813,808	1.00719	1.00005
38	Female	65+	Black	79,260	0.89621	0.99919
39	Female	65+	Hispanic	8,750	0.76014	1.00005
40	Female	65+	Asian	7,116	7.24191	1.00334

Combining the list supplement samples for Hispanics and Asians

The records from the list samples were combined within the corresponding racial/ethnic categories—Hispanics and Asians, respectively—in a way that preserves the weight sum in these groups, a sum that matches the population control total as implemented in the final post-stratification step.

Before the supplement list samples could be combined, they were post-stratified by age group and by gender in a manner similar to the last step of the post-stratification (raking) process for the other samples. In this way, the Hispanic population is represented by two subsets, one originating from the main sample and the other from the supplement subset. The multiplicity adjustments account for the potential double representation of Hispanics from the two subsets. Similarly, the Asian population is represented by the list sample and the main sample subsets. Tables 12 and 13 provide post-stratification factors computed for the two list supplement samples.

The combining step uses a smoothing, weighted average methodology developed to optimize the variances of weighted estimates (see Iachan et al. 2003¹², for example). With this approach, briefly described below, coefficients for the two segments being combined are inversely proportional to the estimated variances, or to the respective design effects (DEFFs).¹³

Table 12

Gender	Age	Sum Adult Weight on Asian Supplement Set	Asian Population	Adjustment Factor
Male	18-24	240.921	8996.03	37.3401
Male	25-34	361.181	16830.36	46.5981
Male	35-44	409.712	15994.43	39.0382
Male	45-64	754.840	17799.80	23.5809
Male	65 or older	220.253	4784.57	21.7230
Female	18-24	150.321	9133.71	60.7613
Female	25-34	330.866	17799.36	53.7963
Female	35-44	396.552	17312.33	43.6572
Female	45-64	417.354	21301.12	51.0385
Female	65 or older	117.046	7115.62	60.7933

Table 13

Gender	Age	Sum Adult Weight on Hispanic Supplement Set	Asian Population	Adjustment Factor
Male	18-24	1051.50	16124.88	15.3351
Male	25-34	1913.05	26346.09	13.7718
Male	35-44	1891.44	21992.96	11.6276
Male	45-64	2894.09	21540.59	7.4430
Male	65 or older	917.25	7298.93	7.9574
Female	18-24	1364.83	15958.54	11.6927
Female	25-34	2672.12	22981.84	8.6006
Female	35-44	2229.69	17282.64	7.7512
Female	45-64	2261.48	21143.05	9.3492
Female	65 or older	844.84	8750.16	10.3572

¹² Iachan, R., Robb, W. and Saavedra, P. (2003). Combining samples for school surveys: the HBSC example. Presented at the Joint Statistical Meetings in San Francisco, August 2003

¹³ Pedlow, S. and O'Muircheartaigh (2002). Combining Samples vs. Cumulating Cases: A Comparison of Two Weighting Strategies in NLSY97. Presented at the Joint Statistical Meetings, August 2002.

For the Hispanic samples, the weighted average uses a coefficient for the Main Sample Component, (1), proportional to the effective sample size,

$$n_1 = \text{Sample_Size}_1 / \text{DEFF}_1$$

The coefficient for the Supplement Sample Component is proportional to the respective effective sample size,

$$n_2 = \text{Sample_Size}_2 / \text{DEFF}_2$$

Specifically, the coefficients are $n_1/(n_1+n_2)$ and $n_2/(n_1+n_2)$.

The design effects for the two sample components are computed by using the coefficient of variation of the weights in the two components, $\text{DEFF} = 1 + \text{CV}^2$.

The same method was used to combine the two Asian sample components.

2.2.4 Combining the cell sample and the landline sample

A similar adjustment is necessary for the cell and landline overlap portions because the overlap portion of the population—households that have both cell phone and landline phone access—is represented by both of these segments. In other words, a respondent in the overlap portion has a probability of selection from both samples, and effective weighting needs to account for this multiplicity.

The overlap portion of the landline sample was identified for those sample households selected and fielded after the cell sample was implemented. At that point in time, a question was added also to the landline survey to determine cell phone access. A similar question was included in the cell phone survey to assess whether the respondent also had landline access.

The weighted average methodology described earlier was also employed to combine the two subsets representing the same segment of overlapping cell-landline representation.

With this formulation, the coefficients are proportional to the effective sample sizes for the two sample components,

N_{eff_1} for the landline sample, and
 N_{eff_2} for the cell sample.

Each effective sample size (N_{eff}) is defined as the component sample size divided by the component design effect (DEFF), where the latter is in turn computed as $1 + \text{CV}^2$, CV being the coefficient of variation of the component weights prior to this adjustment.

Child-level weights

Sampling weights for Children

To generate sampling weights for children, sampling weights associated with participating households (HHs) were multiplied by the reciprocal of the probability of selection for each child corresponding to the sub-sampling of one child per household. This sub-sampling adjustment factor was truncated at 4 to limit the potential variance effect of extreme weights.

Post-stratification of Child Weights: Raking Process

Post-stratum variables were county, Medicaid status and race/ethnicity. The raking process was conducted in three steps using the marginal totals known for these dimensions.

Table 14 shows the adjustment factors for the first and last iteration of raking for the Medicaid adjustment and Table 15 shows similar factors for the adjustment by race/ethnicity. The tables also show the population control for each post-stratum cell.

Table 14

Cell	Medicaid	Population	Adj.factor: first iteration	Adj.factor: last iteration
1	Yes	982,037	1.20228	1.00553
2	No	1,772,891	0.91475	0.99696

Table 15

Cell	Race	Population	Adj.factor: first iteration	Adj.factor: last iteration
1	White/Other	2,259,175	1.04021	1.00095
2	Black	395,010	0.89223	0.99506
3	Hispanic	100,743	0.71772	0.99827

The adjustment factors for the first iteration and for the last iteration presented in tables 14 and 15 show how much closer to 1.0 these factors become through the iterative raking process; a factor near 1.0 means that the weight sum in the post-stratum is very nearly identical to the population control total it is designed to match.

Trimming was performed within each of the three major racial/ethnic groups so that the sum of the weights was preserved in each group. The trimming was part of the iterative process and performed prior to the final post-stratification step. The most extreme weights were trimmed, and re-distributed within each of the post-strata to preserve the weight sums in each of the final post-strata. Specifically, trimming involved the following two steps: a) truncating the top 5

percent of the weights—i.e., make those exceeding the 95th percentile equal to this upper bound; and b) redistributing the trimmed amount among the observations within each class so that the total weight in each of the classes remains the same.

Assessment Data Quality

The 2008 OFHS data quality can be examined based on a variety of aspects, including the quality of the questionnaire (e.g. the validity and reliability of survey items), the sample design and implementation, response and cooperation rates, feedback from the OFHS interviewers, results of quality assurance interviewer monitoring, and verification interviews. Based upon a review of these aspects, the 2008 OFHS data should provide a statistically accurate description of actual characteristics of the Ohio general population.

The following section provides an individual assessment of data quality based on the aspects listed above.

Questionnaire

The data gathered from the instrument are of high quality—as indicated by the following;

- The questionnaire went through rigorous testing, both in the 1998 and 2003-2004 survey iterations to identify and revise invalid and/or unreliable items;
- Many of the items in the questionnaire were obtained through other questionnaires that are known to have already tested for their validity and reliability;
- Throughout data collection, over 10 percent of interviews were monitored by QA Assistants and project management staff, as well as by the ODH and ODJFS; any minor problems found were identified and resolved; and
- A validity study was conducted which found that 81 percent of successful contacts were validated with high consistency, two percent were validated, and 17 percent were validated with inconsistencies. After a review of the records that were validated with inconsistencies, the differences in responses were minimal and did not warrant eliminating the data. In addition, links between the quality of the data and interviewer performance were not found during the validation interviews.

Sample Design and Implementation

The original sample design was intended to provide estimates with required levels of precision for clusters of similar counties. Sample sizes for individual counties will allow for reasonable independent evaluation in some cases. If county cells have insufficient data to provide accurate estimates directly from the response data, then the cluster level may be utilized to profile a larger, similar population at a reduced variance level.

Correcting weights for a clustered sample design does not inherently produce a data file balanced to county populations but is well suited for many analyses across larger groups. Future sample designs must consider the level of data use at the state, region, and county levels in order to determine whether it is appropriate for needs.

For the oversample studies, increased the accuracy of estimates for populations compared to a strictly RDD approach, yet added a layer of complexity to the weighting process. The addition

of a cell phone study, and the potential for overlap between the two populations as discussed above, added yet another layer of complexity to the weights.

Response Rates

As detailed in a previous section, response rate for the landline and cell phone studies were 35 percent and 31 percent respectively. As previously documented, rates such as these are commonly seen in recent large-scale projects and have been accepted for providing statistically reliable results when obtained using proper collection methodologies.

Interviewer Feedback

Interviewers were asked about their experiences with the respondent after every interview. The following summarizes their issues related to administering the survey:

- Introduction: shortening the introduction so to stress the importance of the survey without being repetitive. This may reduce the number of refusals and hang-ups, as respondents did not want to listen to the entire introductory section.
- Item modification: simplifying some of the questions as respondents had difficulty understanding some questions.
- Other commonly cited issues had more to do with the setting of the interview than the questionnaire, such as background noise, respondent was distracted, interview not done in respondent's native language.

Statistical testing

For the purposes of design-based (variance) estimation, the data file includes the following design variables:

- WT_A and WT_C, adjusted survey weights for adult-level and child-level estimates and analyses.
- STRATA (string) and STRATUM (numerical), a stratum indicator for generating design-based variance estimators.

The stratum indicator variable documents 102 levels and is an amalgam of the 88 targeted counties where samples were created using a stratified list-assisted random digit dialing (RDD) methodology, the division of the 6 oversample counties into 3 density strata each, and the two independent list-based supplements utilized for the Asian and Hispanic target ethnic groups. In other words, the strata correspond to the 82 counties not in the oversample, the 18 strata in the 6 oversample counties, and the two supplement ethnic samples.

Sampling variances for the weighted estimates that account for the complex sample design can be computed with statistical software such as SUDAAN, SAS Proc SurveyMeans, and other programs. An example SUDAAN statement would necessitate a Nest statement where STRATUM is specified, and a Design statement with a "WR" specification for a with-

replacement sampling design (approximation). An example follows for a health insurance variable that is tabulated by region for adults:

```
Proc Descript Data="data_wgt.ssd" Filetype=sas Design=WR;
Weight WT_A;
Nest STRATUM;
Var INSUR_A;
Tables REGION;
Subgroup REGION;
Levels 4;
CatLevel 1;
Title "OFHS, Percent of adults insured by region";
Print Percent SEPercent;
```

The example SAS code below shows how to compute the weighted percentage of adults insured state-wide.

```
Proc Surveymeans Data= OFHS mean;
Stratum STRATA;
Weight WT_A;
Var INSRD_A;
Class INSRD_A;
Domain REGION;
run;
```

RECOMMENDATIONS FOR FUTURE DATA COLLECTION EFFORTS

Macro believes a limitation of the sample design, and thus a recommended change for future iterations of the survey, would be to oversample households with children, since this is a high priority area for ODJFS and the ODH. Oversampling could be done by giving higher probabilities of selection to households with children, or utilizing a targeted list-assisted sample frame – these are telephone numbers in which at least one child of the desired age is thought to reside in the household. While this list is not 100 percent accurate (our experience has shown it to be around 60 percent accurate), the incidence of these lists is many times higher than attempting to locate households with children through a list-assisted RDD sampling frame.

Macro also recommends initiating the cell phone sample at the same time as the main survey and increasing the portion of interviews conducted in this manner. As was previously discussed, an increasing portion of the population is abandoning their landlines for cell phones, and will not be represented in a strictly RDD study.

In addition, alternative data collection modes to supplement those accomplished via telephone should be explored. The adoption of a multi-mode collection protocol (e.g., adding a mail or Internet component, or adding a mailing to promote call-in interviews) should be considered for future iterations of the survey. Combined, these added modes will help represent portions of the population which would not be represented through telephone efforts alone. While the 2008

survey instrument is too complex to complete via mail, perhaps a shortened, simpler version could be developed to ask key questions. This could then be mailed to non-respondents (those with a listed telephone number for whom an address could be obtained).

Further, Macro recommends that a pre-notification letter to all listed telephone numbers be sent, and that a letter be sent to all respondents who initially refuse to conduct the study to encourage their participation.

The Internet is the other alternative mode of data collection that could be utilized in addition to the telephone; however, it has been our experience that unless Macro is able to send a notification to conduct the survey via the Internet, the completion rates of Internet versions of surveys are low. For respondents who refuse to conduct the survey via the telephone, Macro would not expect them to be willing to give us their e-mail address to send a link to complete the survey via the Internet.

Appendix A: Timeline

Milestone	Date
RFP released	January 29, 2008
Proposals submitted	February 15, 2008
Contract award	March 31, 2008
Project kickoff meeting	April 10, 2008
Approval of sampling plan	April 28, 2008
Macro IRB approval	June 25, 2008
Pretest of 100 completes	July 13, 2008
Pretest findings report delivered	July 16, 2008
Data collection begins	August 6, 2008
System to code verbatim responses	September 12, 2008
<i>Lehman brothers collapse (external event)</i>	<i>September 16, 2008</i>
Start collection for Asian and Hispanic oversamples	October 7, 2008
Adjustments to sampling plan including new oversamples, cell phone sampling	October 15, 2008
Start collection for cell phone sample	November 24, 2008
End date of Hispanic oversample data collection	January 24, 2009
End date of Asian oversample data collection	January 25, 2009
End date of cell phone sample data collection	January 25, 2009
Data collection ends	January 26, 2009
Preliminary data file	February 6, 2009
Final version of the data file including UPDATED procedures for imputed income and Medicaid status	July 28, 2009

Appendix B: Counties Sampled

The following are the counties sampled for the OFHS:

Adams	Fairfield	Licking	Portage
Allen	Fayette	Logan	Preble
Ashland	Franklin	Lorain	Putnam
Ashtabula	Fulton	Lucas	Richland
Athens	Gallia	Madison	Ross
Auglaize	Geauga	Mahoning	Sandusky
Belmont	Greene	Marion	Scioto
Brown	Guernsey	Medina	Seneca
Butler	Hamilton	Meigs	Shelby
Carroll	Hancock	Mercer	Stark
Champaign	Hardin	Miami	Summit
Clark	Harrison	Monroe	Trumbull
Clermont	Henry	Montgomery	Tuscarawas
Clinton	Highland	Morgan	Union
Columbiana	Hocking	Morrow	Van Wert
Coschoton	Holmes	Muskingum	Vinton
Crawford	Huron	Noble	Warren
Cuyahoga	Jackson	Ottawa	Washington
Darke	Jefferson	Paulding	Wayne
Defiance	Knox	Perry	Williams
Delaware	Lake	Pickaway	Wood
Erie	Lawrence	Pike	Wyandot

Appendix C: Number of Interviews by Sample Type, Region and County type

Landline Sample		
Region	County for analysis	Completes
Appalachian	Total	11,434
	001 Adams	490
	009 Athens	336
	013 Belmont	348
	015 Brown	662
	019 Carroll	303
	025 Clermont	1,060
	029 Columbiana	466
	031 Coshocton	376
	053 Gallia	310
	059 Guernsey	290
	067 Harrison	262
	071 Highland	634
	073 Hocking	269
	075 Holmes	326
	079 Jackson	307
	081 Jefferson	338
	087 Lawrence	359
	105 Meigs	480
	111 Monroe	232
115 Morgan	319	
119 Muskingum	337	
121 Noble	261	
127 Perry	267	
131 Pike	406	
141 Ross	365	
145 Scioto	462	
157 Tuscarawas	556	
163 Vinton	235	
167 Washington	378	
Metropolitan	Total	22,818
	003 Allen	394
	017 Butler	1,284
	035 Cuyahoga*	4,103
	049 Franklin*	3,118
	061 Hamilton*	2,266
	093 Lorain	1,878
	095 Lucas*	1,857
	099 Mahoning	1,324
	113 Montgomery*	1,770
	139 Richland	341
	151 Stark	1,137
153 Summit*	3,346	

Rural Non-Appalachian	Total	10,829
	005 Ashland	323
	007 Ashtabula	403
	021 Champaign	314
	027 Clinton	293
	033 Crawford	291
	037 Darke	469
	039 Defiance	337
	043 Erie	407
	047 Fayette	279
	063 Hancock	396
	065 Hardin	280
	069 Henry	303
	077 Huron	402
	083 Knox	327
	091 Logan	296
	101 Marion	398
	107 Mercer	329
	117 Morrow	266
	123 Ottawa	316
125 Paulding	320	
135 Preble	354	
137 Putnam	306	
143 Sandusky	398	
147 Seneca	361	
149 Shelby	326	
161 Van Wert	301	
165 Warren	748	
169 Wayne	661	
171 Williams	337	
175 Wyandot	288	
Suburban	Total	5,863
	011 Auglaize	272
	023 Clark	407
	041 Delaware	335
	045 Fairfield	288
	051 Fulton	266
	055 Geauga	262
	057 Greene	350
	085 Lake	377
	089 Licking	286
	097 Madison	280
	103 Medina	251
	109 Miami	332
	129 Pickaway	282
	133 Portage	285
	155 Trumbull	617
	159 Union	286

	173 Wood	687
Supplemental Samples		
State Level Samples	Total	3,273
	Asian surname sample	427
	Cellphone sample	2,060
	Hispanic surname sample	786
Total Survey Completes		50,944

Appendix D: English Questionnaire

Post-Processing References

- // If B4G= 02 then B4G1 = Missing//
- //Convert monthly to yearly income in H85. Autocode H86 based on response to H84 and H85//
- //Autocode H87 as appropriate based on response in H86. If H86 = “98” or “99” then H87 = “8”//
- //D30A and D30B are to be calculated in post-processing.//
- If D43a = 97, autocode D43b = 01.//

Global References

FIPS	County	Region	103	Medina	NorthEast
33	Crawford	CENtral	29	Columbiana	NorthEast Central
41	Delaware	CENtral	99	Mahoning	NorthEast Central
45	Fairfield	CENtral	155	Trumbull	NorthEast Central
47	Fayette	CENtral	3	Allen	NorthWest
49	Franklin	CENtral	11	Auglaize	NorthWest
73	Hocking	CENtral	39	Defiance	NorthWest
83	Knox	CENtral	51	Fulton	NorthWest
89	Licking	CENtral	63	Hancock	NorthWest
91	Logan	CENtral	65	Hardin	NorthWest
97	Madison	CENtral	69	Henry	NorthWest
101	Marion	CENtral	95	Lucas	NorthWest
117	Morrow	CENtral	107	Mercer	NorthWest
127	Perry	CENtral	123	Ottawa	NorthWest
129	Pickaway	CENtral	125	Paulding	NorthWest
131	Pike	CENtral	137	Putnam	NorthWest
141	Ross	CENtral	143	Sandusky	NorthWest
145	Scioto	CENtral	147	Seneca	NorthWest
159	Union	CENtral	161	Van Wert	NorthWest
5	Ashland	East Central	171	Williams	NorthWest
19	Carroll	East Central	173	Wood	NorthWest
75	Holmes	East Central	175	Wyandot	NorthWest
133	Portage	East Central	9	Athens	SouthEast
139	Richland	East Central	13	Belmont	SouthEast
151	Stark	East Central	31	Coshocton	SouthEast
153	Summit	East Central	53	Gallia	SouthEast
157	Tuscarawas	East Central	59	Guernsey	SouthEast
169	Wayne	East Central	67	Harrison	SouthEast
7	Ashtabula	NorthEast	79	Jackson	SouthEast
35	Cuyahoga	NorthEast	81	Jefferson	SouthEast
43	Erie	NorthEast	87	Lawrence	SouthEast
55	Geauga	NorthEast	105	Meigs	SouthEast
77	Huron	NorthEast	111	Monroe	SouthEast
85	Lake	NorthEast	115	Morgan	SouthEast
93	Lorain	NorthEast	119	Muskingum	SouthEast

121	Noble	SouthEast	165	Warren	SouthWest
163	Vinton	SouthEast	21	Champaign	WestCentral
167	Washington	SouthEast	23	Clark	WestCentral
1	Adams	SouthWest	37	Darke	WestCentral
15	Brown	SouthWest	57	Greene	WestCentral
17	Butler	SouthWest	109	Miami	WestCentral
25	Clermont	SouthWest	113	Montgomery	WestCentral
27	Clinton	SouthWest	135	Preble	WestCentral
61	Hamilton	SouthWest	149	Shelby	WestCentral
71	Highland	SouthWest			

NOTES

- In the CATI program, respondents who fulfill B18days >= 365 or B18 = 12 months are getting into B21 and B22, although the logic in the questionnaire was designed to exclude this subset of respondents from B21 and B22. According to Tim's email (dated 9/3/2008 3:27 PM), the responses to B21 and B22 for this extra set of respondents should remain in the dataset since they add extra valuable information.

<u>New Internal Codes:</u>	
AS	<i>Asian sample</i>
HS	<i>Hispanic sample</i>

INTRODUCTION AND SCREENER QUESTIONS FOR OVERSAMPLE

//Programmer: Each section needs a timer. Please start timer for Section A. To be stored for complete and screened interviews //

INTRO1

Hello, my name is _____ [INTERVIEWER – SAY FIRST AND LAST NAME], and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage and access to health care services.

[INTERVIEWER, IF NECESSARY: We are conducting a survey on health insurance coverage, use of medical services, satisfaction with health care and problems getting health care. The survey's sponsors are the State of Ohio Department of Health and Ohio State University.]

- 01 (SKIP TO INTRO2) Continue
- 02 (CODE DISPO) No answer
- 03 (CODE DISPO) Normal busy
- 04 (CB MSG, DISPO) Answering machine
- 06 (CODE DISPO) Number is not the same
- 07 (CODE DISPO) Termination screen
- 08 (CODE DISPO) Hang up - Before/During INTRO
- 12 (CODE DISPO) Refused to transfer to selected 1x
- 13 (CODE DISPO) Refused to transfer to selected 2x
- 14 (CB IN SPANISH) CONTINUE IN SPANISH

INTRO2

Your telephone number was chosen randomly and all information will be kept strictly confidential. This call may be monitored for quality assurance.

[INTERVIEWER – IF NECESSARY, SAY: We are also interested in experiences of persons who do not have health insurance.]

[INTERVIEWER – IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[INTERVIEWER – IF NECESSARY, SAY: This survey should take 20-22 minutes to complete.]

[INTERVIEWER – IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the State of Ohio Department of Health and Ohio State University.]

[INTERVIEWER – IF NECESSARY, SAY: You may call the Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

- 01 (Skip to PS) PERSON AVAILABLE
- 02 (Skip to INTROa) PERSON PHYSICALLY-MENTALLY IMPAIRED OR CHILD
- 96 (Skip to CALLBACK) NOT AVAILABLE
- 99 (Skip to REFUSAL) REFUSED

INTROa

May I speak with an adult / another adult?

01 (Skip to INTRO1) ADULT COMING TO TELEPHONE
 02 (Skip to CALLBACK) NOT AVAILABLE
 99 (Skip to CALLBACK) REFUSED

PS //Programmer: Start timer for Screener. Required for both complete and screened interviews//
 First, have I reached you at a residential household, such as an apartment, a house, or a mobile home?

[INTERVIEWER NOTE: A non-residence would be a dormitory, hospital room, nursing home, assisted living facility, group home or barracks]¹²

01 YES, RESIDENTIAL HOUSEHOLD
 02 (Skip to THANKYOU1) NO, NON-RESIDENCE
 98 (Skip to THANKYOU1) DK
 99 (Skip to THANKYOU1) REFUSED

S10 I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, INCLUDING yourself, are 18 years of age or older?
 [INTERVIEWER NOTE: For purposes of this survey, "household" refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent.]

00 (Skip to S10c) NONE
 01 (Skip to S10a) 1 ADULT
 02 (Skip to S1) 2 ADULTS
 03 (Skip to S1) 3 ADULTS
 04 (Skip to S1) 4 ADULTS
 05 (Skip to S1) 5 ADULTS
 06 (Skip to S1) 6 ADULTS
 07 (Skip to S1) 7 ADULTS
 08 (Skip to S1) 8 ADULTS
 09 (Skip to S1) 9 OR MORE ADULTS
 98 (Thank, Terminate) DK
 99 (Thank, Terminate) REFUSED

S10a //If S10 = 01//
 Are you the adult?

01 (Skip to S10b) YES
 02 (Skip to S4a) NO
 98 (Thank, Terminate) DK
 99 (Thank, Terminate) REFUSED

The dates cited below refer to the time around which the issue was identified. They do not represent the exact dates on which the program was changed. Also, changes made to the program were in place for households who were newly contacted after the changes were made. The changes were not in place for households with suspended interviews prior to when the changes were made.

¹ Interviewer note added; 8/8

² Added 'Assisted living facility' to interviewer note

S10b //If S10a = 01//
Then you are the person I need to speak with

//Continue to PRE S8//

S10c //If S10 = 00//
Just to confirm, you said that there are no adults, 18 years of age or older in your household?

01	(Thank, Terminate)	YES, THERE ARE NO ADULTS
02	(Skip to S10)	NO, THERE ARE ADULTS
98	(Thank, Terminate)	DK
99	(Thank, Terminate)	REFUSED

S1 //If 02 <= S10 <=09 //

//Among those entering the survey, if S1a = 01, add the below 2 sentences.//

I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage and access to health care services.

Now, I would like to identify the adult currently living in your household, 18 or older, who had the most recent birthday. WHO WOULD THAT BE?

[INTERVIEWER NOTE: Household refers to all the people who are living in this house, apartment, or mobile home where I have reached you. Members of a household do not have to be related; this includes roommates.]

[INTERVIEWER: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS NOT JUST RELATIONSHIP]

[INTERVIEWER: SELECT THE PERSON WHO HAD THE LAST BIRTHDAY, NOT WHO WILL HAVE THE NEXT BIRTHDAY.]

[IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

[INTERVIEWER NOTE: If respondent says that twins, triplets, quadruplets etc, had he most recent birthday, say "Consider their order of birth, and tell me who was born last."]

01		SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
02		NOT SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
03	(Skip to S1a)	INDIVIDUAL ON PHONE DOES NOT KNOW HOUSEHOLD MEMBERS BIRTHDAYS
96	(Skip to THANKYOU2)	THERE ARE NO ADULTS 18 OR OVER IN HOUSEHOLD
		//Assign unique disposition to allow for tallying//
98	(Skip to CALLBACK)	DK
99	(Skip to REFUSAL)	REFUSED

S1int //If S1 = 01, then "your". If S1 = 02, then "his or her".//
Could I have {your/his or her} first name or initials?

[INTERVIEWER - IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

//If S1=01, skip to PRES8. If S1=02, skip to S2a.//

S1a **//If S1=03//**

May I speak to someone who knows about the household member's birthdays?

01 **(Skip to S1)** RESPONDENT COMING TO THE TELEPHONE
99 **(Skip to REFUSAL)** REFUSED

S2a **“//If S1 = 02//”**

Is /RESTORE PERSON'S NAME FROM S1i/ available now?

[INTERVIEWER NOTE: If the selected respondent is TEMPORARILY ill and would be able to do the interview at a later time, select 02 Not Available.

Select option 03, ONLY IF the selected respondent cannot do the interview due to a LONG-TERM or PERMANENT physical or mental impairment.]

01 AVAILABLE
02 **(Callback)** NOT AVAILABLE
03 **(Go to S2B)** SELECTED RESPONDENT IS PHYSICALLY OR MENTALLY
IMPAIRED AND CANNOT DO INTERVIEW
98 **(Callback)** DK
99 **(Callback)** REFUSED

S2a1 **//If S2a = 01, ask S2a1.//**

Could you please ask /RESTORE PERSON'S NAME FROM S1i/ to come to the telephone and answer some questions?

[If the selected respondent is TEMPORARILY ill and would be able to do the interview at a later time, select 02 NO.

Select option 03, ONLY IF the selected respondent cannot do the interview due to a LONG-TERM or PERMANENT physical or mental impairment.]

01 **(SKIP TO S5)** YES
02 **(SKIP TO CALLBACK)** NO
03 **(Go to S2B)** SELECTED RESPONDENT IS PHYSICALLY OR
MENTALLY IMPAIRED AND CANNOT DO INTERVIEW
98 **(SKIP TO CALLBACK)** DK
99 **(SKIP TO CALLBACK)** REFUSED

S2b **//If (S2a = 03) OR (S2a1 = 03), ask S2b. //**

Do you know about /RESTORE PERSON'S NAME FROM S1i/ health insurance?

01 (Skip to S2bb)	YES
02 (If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	NO
98 (If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	DK
99 (If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	REFUSED

S2bb //If S2b = 01, ask S2bb.//

Could I have your first name or initials?

[INTERVIEWER - IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also work.]

01 //TEXT RANGE=25// RESPONSE: _____

S2c //If S2b = 01, ask S2c.//

What is your relationship to /RESTORE PERSON'S NAME FROM S1i/?

[INTERVIEWER NOTE: READ LIST ONLY IF NECESSARY]

- 01 You are /RESTORE PERSON'S NAME FROM S1i/'s Wife / female partner
- 02 You are /RESTORE PERSON'S NAME FROM S1i/'s Husband / male partner
- 03 You are /RESTORE PERSON'S NAME FROM S1i/'s Mother
- 04 You are /RESTORE PERSON'S NAME FROM S1i/'s Father
- 05 You are /RESTORE PERSON'S NAME FROM S1i/'s Daughter
- 06 You are /RESTORE PERSON'S NAME FROM S1i/'s Son
- 07 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandmother
- 08 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandfather
- 09 You are /RESTORE PERSON'S NAME FROM S1i/'s Aunt
- 10 You are /RESTORE PERSON'S NAME FROM S1i/'s Uncle
- 11 You are /RESTORE PERSON'S NAME FROM S1i/'s Sister
- 12 You are /RESTORE PERSON'S NAME FROM S1i/'s Brother
- 13 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female relative
- 14 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male relative
- 15 You are /RESTORE PERSON'S NAME FROM S1i/'s female legal guardian
- 16 You are /RESTORE PERSON'S NAME FROM S1i/'s male legal guardian
- 17 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster mother
- 18 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster father
- 19 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female non-relative
- 20 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male non-relative
- 97 OTHER
- 98 DK
- 99 REFUSED

S2coth //If S2c =97, ask S2coth //

How would you describe your relationship to //person in S1//?

01 //TEXT RANGE=70// RESPONSE: _____

98 DK
99 REFUSED

S2cage //If S2b = 01, ask S2cage.//

I have another question about your age before I ask you about {RESTORE PERSON'S NAME FROM S1i}.

Please tell me how old you were on your last birthday.

018-125 (Skip to PRES8) RECORD AGE
998 (Skip to PRES8) DK
999 (Skip to PRES8) REFUSED

S4 //If (S2b = 02, 98 OR 99) AND (3 <= S10 <=9), ask S4.

Who could I speak to that knows about {RESTORE PERSON'S NAME FROM S1i} insurance?

[INTERVIEWER NOTE: Attempt to get a knowledgeable person on the line. If successful, code in '01' below. If unsuccessful, attempt to get the name of a knowledgeable person to call back later and code in '02'. If respondent says nobody in the household is knowledgeable, ask who is most knowledgeable]

01 OTHER AVAILABLE
02 (Skip to CALLBACK) NOT AVAILABLE
98 (Skip to THANKYOU2) DK
99 (Skip to REFUSAL) REFUSED

S4int Could I have a first name or initials of this person?

[INTERVIEWER NOTE: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS, NOT JUST RELATIONSHIP]

[INTERVIEWER NOTE: IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

S4a //If S4 = 01, ask://

Could you please ask /RESTORE PERSON'S NAME FROM S4int/ to come to the telephone and answer some questions?

//If S10a = 02, then skip to S4a_1//

May I please speak with the adult in the household?

01 (Skip to S5) YES
02 (Skip to CALLBACK) NO
98 (Skip to CALLBACK) DK
99 (Skip to CALLBACK) REFUSED

S5 Hello, my name is _____ [INTERVIEWER SAY FIRST AND LAST NAME], and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage, use of medical services, satisfaction with health care, and problems getting health care. Your telephone number was chosen randomly and all information will be kept strictly confidential. This call may be monitored for quality assurance.

[IF NECESSARY, SAY: we are also interested in experiences of persons who do not have health insurance.]

[IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the State of Ohio Department of Health and Ohio State University.]

[IF NECESSARY, SAY: This survey should take 20 to 22 minutes to complete.]

[IF NECESSARY, SAY: You may call the Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01		AVAILABLE
02	(SKIP TO CALLBACK)	NOT ABLE TO PARTICIPATE AT THIS TIME
98	(SKIP TO REFUSAL)	DK
99	(SKIP TO REFUSAL)	REFUSED

PRES8 Now, I would like to ask a few general questions about {YOURSELF/RESTORE PERSON'S NAME FROM S1i} and {YOURSELF/HIS OR HER} family. These questions are simply for survey classification purposes to ensure that our results will represent everyone in the state of Ohio.

You do not have to answer any question you do not want to, and you can end the interview at any time. If you have any questions, I will provide a telephone number for you to call to get more information. The interview will take approximately 20 to 22 minutes.

[INTERVIEWER: If you would like to speak to someone about this survey, please call //RESTORE CENTER #//.]

SPRX1 //If S4 = 01, ask SPRX1.//

Before I start asking about //RESTORE PERSON'S NAME FROM S1i//, I need to ask about your relationship to //RESTORE PERSON'S NAME FROM S1i// and your age.

What is your relationship to /RESTORE PERSON'S NAME FROM S1i/?

[INTERVIEWER NOTE: READ LIST ONLY IF NECESSARY]

01	You are /RESTORE PERSON'S NAME FROM S1i/'s Wife
02	You are /RESTORE PERSON'S NAME FROM S1i/'s Husband
03	You are /RESTORE PERSON'S NAME FROM S1i/'s Mother
04	You are /RESTORE PERSON'S NAME FROM S1i/'s Father
05	You are /RESTORE PERSON'S NAME FROM S1i/'s Daughter
06	You are /RESTORE PERSON'S NAME FROM S1i/'s Son
07	You are /RESTORE PERSON'S NAME FROM S1i/'s Grandmother
08	You are /RESTORE PERSON'S NAME FROM S1i/'s Grandfather
09	You are /RESTORE PERSON'S NAME FROM S1i/'s Aunt
10	You are /RESTORE PERSON'S NAME FROM S1i/'s Uncle
11	You are /RESTORE PERSON'S NAME FROM S1i/'s Brother
12	You are /RESTORE PERSON'S NAME FROM S1i/'s Sister
13	You are /RESTORE PERSON'S NAME FROM S1i/'s Other female relative

- 14 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male relative
- 15 You are /RESTORE PERSON'S NAME FROM S1i/'s female legal guardian
- 16 You are /RESTORE PERSON'S NAME FROM S1i/'s male legal guardian
- 17 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster mother
- 18 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster father
- 19 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female non-relative
- 20 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male non-relative
- 97 Other
- 98 DK
- 99 REFUSED

SPRX10 //If SPRX1 =97, ask SPRX10.//

How would you describe your relationship to //person in S1//?

- 01 //TEXT RANGE=70// RESPONSE:_____
- 98 DK
- 99 REFUSED

SPRX2 //If S4 = 01, ask SPRX2.//

Please tell me how old you were on your last birthday.

- 018-125 RECORD AGE
- 998 DK
- 999 REFUSED

S16. //Are you/Is Person in S1// of Hispanic or Latino origin?

[INTERVIEWER: IF NO OR NOT SURE, SAY: "Hispanic or Latino origin is: A person of Cuban, Mexican, Puerto Rican, South American, Central American, or other Spanish culture or origin, regardless of race."]

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

If NIC in HS and S16 not eq 01 term as "Not Hispanic" and save data go to termrace;

S17. /MUL=7/ Which one or more of the following would you say is //your/person in S1's// race?//Are you/Is Person in S1// White, Black or African American, Asian, or Native American, American Indian, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned ?

[INTERVIEWER NOTE: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER: CODE THE FOLLOWING AS ASIAN: Chinese, Japanese, Korean, Taiwanese, Cambodian, Indonesian, Vietnamese, Laotian, Philippino, Malaysian, or from: India, Singapore, Thailand, Nepal, Pakistan, Afghanistan, Bangladesh, Bhutan, Maldives, Sri Lanka, Timor-Leste.]

[INTERVIEWER NOTE: CODE ALL THAT APPLY]

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native American, American Indian, or Alaskan Native
- 05 Native Hawaiian or Other Pacific Islander

- 06 HISPANIC, LATINO, SPANISH
- 97 OTHER
- 98 DK
- 99 REFUSED

Else if NIC in AS and S17/Race does not include (03/Asian)
then term as "Not Asian" and save data; go to termrace;

S.17a / If S17=97 ask /
How would you describe //your/Person in S1's// race?

- 01 /TEXT RANGE=70/ _____

- 98 DK
- 99 REFUSED

Termrace: I am sorry, unfortunately you are not eligible to participate in this survey as we are looking to specifically survey certain population groups. Thank you so much for your time and have a great day.

S17b: /If respondent gives more than one answer in S17, ask:/
"Which of these groups, that is //RECALL S17 ANSWERS// would you say best represents //your/ person in S1's//
race?

//Please limit response choices to those selected in S17//

- 01 (Skip to PREA1) White
- 02 (Skip to PREA1) Black or African American
- 03 (Skip to PREA1) Asian
- 04 (Skip to PREA1) Native American, American Indian, or Alaskan Native
- 05 (Skip to PREA1) Native Hawaiian or Other Pacific Islander

- 97 OTHER
- 98 DK
- 99 REFUSED

//If code '06' in S17 and S17b is NOT between '01' and '05', continue. Otherwise skip to PREA1//

S18. /If code "06" in S17 and S17b is NOT '01-05', ask:/
Do you consider //yourself/Person in S1// to be White Hispanic, Black Hispanic, Asian Hispanic, Native American
Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER NOTE: Do not easily accept "Hispanic", DK, or Refused, repeat question if necessary.]

- 01 White Hispanic
- 02 Black or African American Hispanic
- 03 Asian Hispanic
- 04 Native American, American Indian, or Alaskan Native Hispanic
- 05 Native Hawaiian or Pacific Islander Hispanic

- 97 Other race Hispanic
- 98 DON'T KNOW
- 99 REFUSES TO DISCRIMINATE

S.18a / If S18=97 ask, else continue//
How would you describe //your/Person in S1// race?

[INTERVIEWER NOTE: Do not accept "Hispanic, Latino or Spanish" here. If respondent answers "Hispanic, Latino, or Spanish," back up and choose "99"]

- 01 /TEXT RANGE=70/ _____
- 98 DK
- 99 REFUSED

S8 How long {have you/has RESTORE PERSON'S NAME FROM S1i} lived in Ohio? Has it been less than a month, more than a month but less than 12, a year, more than a year but less than 5, or five or more years?

[INTERVIEWER NOTE: If response is "ALL MY LIFE", select response option 05 "5 or more years".]³

- 01 **(SKIP TO THANKYOU)** LESS THAN 1 MONTH
- 02 MORE THAN 1 MONTH BUT LESS THAN 12 MONTHS
- 03 1 YEAR
- 04 MORE THAN 1 YEAR BUT LESS THAN 5 YEARS
- 05 5 OR MORE YEARS

- 98 **(GO TO THANK YOU)** DK
- 99 **(GO TO THANK YOU)** REFUSED

S9 In what county in the State of Ohio {do you/does RESTORE PERSON'S NAME FROM S1i} live?

[READ IF NECESSARY: Which county {do you/does RESTORE PERSON'S NAME FROM S1i} live in MOST OF THE TIME?]

[ANTICIPATED CODE FROM SAMPLE IS //restore county FIPS code//]

[INTERVIEWER NOTE: DO NOT READ LIST, FIND THE COUNTY RESPONDENTS NAME IN THE LIST AND CODE ACCORDINGLY. IF RESPONDENT SAYS MORE THAN ONE COUNTY NAME, CODE ONLY THE FIRST MENTIONED.]

- | | | | | | |
|-----|-------|-----|----------|-----|-------|
| 001 | Adams | 061 | Hamilton | 121 | Noble |
|-----|-------|-----|----------|-----|-------|

³ Interviewer note added; 8/17

003	Allen	063	Hancock	123	Ottawa
005	Ashland	065	Hardin	125	Paulding
007	Ashtabula	067	Harrison	127	Perry
009	Athens	069	Henry	129	Pickaway
011	Auglaize	071	Highland	131	Pike
013	Belmont	073	Hocking	133	Portage
015	Brown	075	Holmes	135	Preble
017	Butler	077	Huron	137	Putnam
019	Carroll	079	Jackson	139	Richland
021	Champaign	081	Jefferson	141	Ross
023	Clark	083	Knox	143	Sandusky
025	Clermont	085	Lake	145	Scioto
027	Clinton	087	Lawrence	147	Seneca
029	Columbiana	089	Licking	149	Shelby
031	Coshocton	091	Logan	151	Stark
033	Crawford	093	Lorain	153	Summit
035	Cuyahoga	095	Lucas	155	Trumbull
037	Darke	097	Madison	157	Tuscarawas
039	Defiance	099	Mahoning	159	Union
041	Delaware	101	Marion	161	Van Wert
043	Erie	103	Medina	163	Vinton
045	Fairfield	105	Meigs	165	Warren
047	Fayette	107	Mercer	167	Washington
049	Franklin	109	Miami	169	Wayne
051	Fulton	111	Monroe	171	Williams
053	Gallia	113	Montgomery	173	Wood
055	Geauga	115	Morgan	175	Wyandot
057	Greene	117	Morrow		
059	Guernsey	119	Muskingum		

997 OTHER
998 DK
999 REFUSED

**//If S9 = 001 to 175, GOTO S9b;
IF S9 = 998, GO TO S9a;
IF S9 = 999, GO TO S9a.//**

S9.1 **//If S9=997 then ask://**
[INTERVIEWER: RECORD THE COUNTY NAME HERE --- ASK FOR SPELLING IF NECESSARY.]

01 //TEXT RANGE=70// RESPONSE: _____
02 **(SKIP TO THANKYOU)** RESPONDENT VOLUNTEERS COUNTY NOT IN OHIO

98 DK
99 REFUSED

S9a **//If S9.1=98 or 99 OR S9 = 998 or 999//**
In what city or town {do you/does RESTORE PERSON'S NAME FROM S1i} live?

[INTERVIEWER - PROBE FOR SPELLING NEEDED]

01 //TEXT RANGE=70// RESPONSE: _____

98 DK
99 REFUSED

S.9b What is {your/RESTORE PERSON'S NAME FROM S1i} ZIP code?

01 // 43000-45999// (Code actual ZIP code FIVE DIGITS)

99998 DK [INTERVIEWER - PROBE, MUST HAVE TO ENSURE
ELIGIBILITY]
99999 REFUSED

S11 //If S10 = 01 then autocode S11 = 01 and skip to S12//

INCLUDING {YOURSELF/RESTORE PERSON'S NAME FROM S1i}, how many adult members of {your/his or her} FAMILY, age 18 and over, live in this household? Here, I am using the legal definition of FAMILY in the State of Ohio. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01-08 //Code response, see note below//
09 /See note below//9 OR MORE
98 (Skip to S12) DK
99 (Skip to S12) REFUSED

**//If S11 is less than or equal to S10, skip to S12;
If S11 is 98 or 99, skip to S12;
If S11 > S10, continue to S11b.//**

S11b Let me see if I have this right, earlier I thought you said that there were //RESTORE ANSWER FROM S10// adults living in {YOUR/RESTORE PERSON'S NAME FROM S1i} household, but now I thought you just said that there were //RESTORE ANSWER FROM S11// adults in {YOUR/RESTORE PERSON'S NAME FROM S1i} family? Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

//if respondent changes answer to S10 or S11, recode as directed//.

01 CHANGE NUMBER OF ADULTS IN HOUSEHOLD, ENTER NEW
NUMBER AND RECODE S10
02 CHANGE NUMBER OF ADULTS IN FAMILY, ENTER NEW
NUMBER AND RECODE S11
03 NO CHANGES

S12 How many children, persons 17 years of age or younger, live in this household whether they are family members or not?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00	(Skip to S14)	NONE
01-11		(Code Actual Number)
12		12 OR MORE
98		DK
99		REFUSED

//If S12 is code '00', autocode S13 as '00' and skip to S14//

S13 How many children, persons 17 years of age or younger, in {YOUR/RESTORE PERSON'S NAME FROM S1i} FAMILY live in this household?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00	(Skip to S14)	NONE	# CHILDREN	(Code Actual Number)
98	(Skip to S14)	DK		
99	(Skip to S14)	REFUSED		

**//If S13 <= S12, skip to S14;
If S13 = 98 or 99, skip to S14;
If S13 > S12, continue to S12a.//**

S12a //If S13 is greater than S12//

Let me see if I have this right. I thought you just told me that there were //RESTORE ANSWER FROM S12// total children in the household and //RESTORE ANSWER FROM S13// children in the household who are family members. Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01	CHANGE NUMBER OF CHILDREN IN HOUSEHOLD, ENTER NEW NUMBER AND RECODE S12
02	CHANGE NUMBER OF CHILDREN IN FAMILY, ENTER NEW NUMBER AND RECODE S13
03	NO CHANGES
99	REFUSED

S14 Please tell me how old {YOU WERE / RESTORE PERSON'S NAME FROM S1i WAS} on {your / his or her} last birthday.⁴

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

018-125 (Skip to S15) RECORD AGE
998 (Skip to S14a) DK
999 (Skip to S14a) REFUSED

S14a //IF S14="998" or "999" ASK//

On {YOUR / RESTORE PERSON'S NAME FROM S1i's} last birthday would you say that {YOU WERE / RESTORE PERSON'S NAME FROM S1i WAS}...

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]⁵

[INTERVIEWER READ LIST]

01 18-24
02 25-34
03 35-44
04 45-54
05 55-64
06 65 or older
98 (Skip to THANKYOU2) DK
99 (Skip to THANKYOU2) REFUSED

S15 [INTERVIEWER NOTE: Ask if necessary.]

I'm required to ask {YOUR / RESTORE PERSON'S NAME FROM S1i's} gender. Are {YOU /RESTORE PERSON'S NAME FROM S1i} male or female?⁶

[INTERVIEWER NOTE: Enter '99' Refused if the respondent fails to respond and you are unable to guess.]

01 MALE
02 FEMALE
99 REFUSED

ANS_1 Hi, my name is _____. I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important study on health insurance coverage and access to health care services. Your participation would help the State of Ohio make better health care policy decisions for its residents. Please call us at //RESTORE CENTER #// at your convenience."

⁴ Removed "your best guess is fine"; 8/17

⁵ Changed "Best guess" to "Best estimate"; 8/28

⁶ Changed question text to be consistent with BRFS. Question text has the note (Ask if necessary); 8/28

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

Privacy Manager Message

IF THE MESSAGE ASKS TO IDENTIFY WHO OR WHAT COMPANY IS CALLING:

"We are calling on behalf of the State of Ohio Department of Health and Ohio State University."

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:

Enter: **//RESTORE CENTER #//**

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

INTRODUCTION AND SCREENER QUESTIONS FOR MAIN SAMPLE

INTRODUCTION AND SCREENER QUESTIONS

//Programmer: Each section needs a timer. Please start timer for Section A. To be stored for complete and screened interviews //

INTRO1

Hello, my name is _____ [INTERVIEWER – SAY FIRST AND LAST NAME], and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage and access to health care services.

[INTERVIEWER, IF NECESSARY: We are conducting a survey on health insurance coverage, use of medical services, satisfaction with health care and problems getting health care. The survey's sponsors are the State of Ohio Department of Health and Ohio State University.]

- 01 (SKIP TO INTRO2) Continue
- 02 (CODE DISPO) No answer
- 03 (CODE DISPO) Normal busy
- 04 (CB MSG, DISPO) Answering machine
- 06 (CODE DISPO) Number is not the same
- 07 (CODE DISPO) Termination screen
- 08 (CODE DISPO) Hang up - Before/During INTRO
- 12 (CODE DISPO) Refused to transfer to selected 1x
- 13 (CODE DISPO) Refused to transfer to selected 2x
- 14 (CB IN SPANISH) CONTINUE IN SPANISH

INTRO2

Your telephone number was chosen randomly and all information will be kept strictly confidential. This call may be monitored for quality assurance.

[INTERVIEWER – IF NECESSARY, SAY: We are also interested in experiences of persons who do not have health insurance.]

[INTERVIEWER – IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[INTERVIEWER – IF NECESSARY, SAY: This survey should take 20-22 minutes to complete.]

[INTERVIEWER – IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the State of Ohio Department of Health and Ohio State University.]

[INTERVIEWER – IF NECESSARY, SAY: You may call the Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

- 01 (Skip to PS) PERSON AVAILABLE
- 02 (Skip to INTROa) PERSON PHYSICALLY-MENTALLY IMPAIRED OR CHILD
- 96 (Skip to CALLBACK) NOT AVAILABLE
- 99 (Skip to REFUSAL) REFUSED

INTROa

May I speak with an adult / another adult?

01 (Skip to INTRO1) ADULT COMING TO TELEPHONE
 02 (Skip to CALLBACK) NOT AVAILABLE
 99 (Skip to CALLBACK) REFUSED

PS //Programmer: Start timer for Screener. Required for both complete and screened interviews//
 First, have I reached you at a residential household, such as an apartment, a house, or a mobile home?

[INTERVIEWER NOTE: A non-residence would be a dormitory, hospital room, nursing home, group home or barracks]

01 YES, RESIDENTIAL HOUSEHOLD
 02 (Skip to THANKYOU1) NO, NON-RESIDENCE
 98 (Skip to THANKYOU1) DK
 99 (Skip to THANKYOU1) REFUSED

S10 I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, INCLUDING yourself, are 18 years of age or older?
 [INTERVIEWER NOTE: For purposes of this survey, "household" refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent.]

00 (Skip to S10c) NONE
 01 (Skip to S10a) 1 ADULT
 02 (Skip to S1) 2 ADULTS
 03 (Skip to S1) 3 ADULTS
 04 (Skip to S1) 4 ADULTS
 05 (Skip to S1) 5 ADULTS
 06 (Skip to S1) 6 ADULTS
 07 (Skip to S1) 7 ADULTS
 08 (Skip to S1) 8 ADULTS
 09 (Skip to S1) 9 OR MORE ADULTS
 98 (Thank, Terminate) DK
 99 (Thank, Terminate) REFUSED

S10a //If S10 = 01//
 Are you the adult?

01 (Skip to S10b) YES
 02 (Skip to S4a) NO
 98 (Thank, Terminate) DK
 99 (Thank, Terminate) REFUSED

S10b //If S10a = 01//
 Then you are the person I need to speak with

//Continue to PRE S8//

S10c //If S10 = 00//
Just to confirm, you said that there are no adults, 18 years of age or older in your household?

01	(Thank, Terminate)	YES, THERE ARE NO ADULTS
02	(Skip to S10)	NO, THERE ARE ADULTS
98	(Thank, Terminate)	DK
99	(Thank, Terminate)	REFUSED

S1 //If 02 <= S10 <=09 //

//Among those entering the survey, if S1a = 01, add the below 2 sentences.//

I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage and access to health care services.

Now, I would like to identify the adult currently living in your household, 18 or older, who had the most recent birthday. WHO WOULD THAT BE?

[INTERVIEWER NOTE: Household refers to all the people who are living in this house, apartment, or mobile home where I have reached you. Members of a household do not have to be related; this includes roommates.]

[INTERVIEWER: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS NOT JUST RELATIONSHIP]

[INTERVIEWER: SELECT THE PERSON WHO HAD THE LAST BIRTHDAY, NOT WHO WILL HAVE THE NEXT BIRTHDAY.]

[IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

[INTERVIEWER NOTE: If respondent says that twins, triplets, quadruplets etc, had he most recent birthday, say "Consider their order of birth, and tell me who was born last."]

01		SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
02		NOT SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
03	(Skip to S1a)	INDIVIDUAL ON PHONE DOES NOT KNOW HOUSEHOLD MEMBERS BIRTHDAYS
96	(Skip to THANKYOU2)	THERE ARE NO ADULTS 18 OR OVER IN HOUSEHOLD

//Assign unique disposition to allow for tallying//

98	(Skip to CALLBACK)	DK
99	(Skip to REFUSAL)	REFUSED

S1int //If S1 = 01, then "your". If S1 = 02, then "his or her".//

Could I have {your/his or her} first name or initials?

[INTERVIEWER - IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

//If S1=01, skip to PRES8. If S1=02, skip to S2a.//

S1a //If S1=03//
 May I speak to someone who knows about the household member's birthdays?

01	(Skip to S1)	RESPONDENT COMING TO THE TELEPHONE
99	(Skip to REFUSAL)	REFUSED

S2a “//If S1 = 02//”
 Is /RESTORE PERSON'S NAME FROM S1i/ available now?

[INTERVIEWER NOTE: If the selected respondent is TEMPORARILY ill and would be able to do the interview at a later time, select 02 Not Available.

Select option 03, ONLY IF the selected respondent cannot do the interview due to a LONG-TERM or PERMANENT physical or mental impairment.]

01		AVAILABLE
02	(Callback)	NOT AVAILABLE
03	(Go to S2B)	SELECTED RESPONDENT IS PHYSICALLY OR MENTALLY IMPAIRED AND CANNOT DO INTERVIEW
98	(Callback)	DK
99	(Callback)	REFUSED

S2a1 //If S2a = 01, ask S2a1.//
 Could you please ask /RESTORE PERSON'S NAME FROM S1i/ to come to the telephone and answer some questions?

[If the selected respondent is TEMPORARILY ill and would be able to do the interview at a later time, select 02 NO.

Select option 03, ONLY IF the selected respondent cannot do the interview due to a LONG-TERM or PERMANENT physical or mental impairment.]

01	(SKIP TO S5)	YES
02	(SKIP TO CALLBACK)	NO
03	(Go to S2B)	SELECTED RESPONDENT IS PHYSICALLY OR MENTALLY IMPAIRED AND CANNOT DO INTERVIEW
98	(SKIP TO CALLBACK)	DK
99	(SKIP TO CALLBACK)	REFUSED

S2b //If (S2a = 03) OR (S2a1 = 03), ask S2b. //
 Do you know about /RESTORE PERSON'S NAME FROM S1i/ health insurance?

01	(Skip to S2bb)	YES
02	(If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	NO
98	(If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	DK
99	(If S10=2, skip to callback, else if 3 <= S10 <=9, skip to S4)	REFUSED

S2bb //If S2b = 01, ask S2bb.//

Could I have your first name or initials?

[INTERVIEWER - IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also work.]

01 //TEXT RANGE=25// RESPONSE: _____

S2c //If S2b = 01, ask S2c.//

What is your relationship to /RESTORE PERSON'S NAME FROM S1i/?

[INTERVIEWER NOTE: READ LIST ONLY IF NECESSARY]

- 01 You are /RESTORE PERSON'S NAME FROM S1i/'s Wife / female partner
- 02 You are /RESTORE PERSON'S NAME FROM S1i/'s Husband / male partner
- 03 You are /RESTORE PERSON'S NAME FROM S1i/'s Mother
- 04 You are /RESTORE PERSON'S NAME FROM S1i/'s Father
- 05 You are /RESTORE PERSON'S NAME FROM S1i/'s Daughter
- 06 You are /RESTORE PERSON'S NAME FROM S1i/'s Son
- 07 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandmother
- 08 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandfather
- 09 You are /RESTORE PERSON'S NAME FROM S1i/'s Aunt
- 10 You are /RESTORE PERSON'S NAME FROM S1i/'s Uncle
- 11 You are /RESTORE PERSON'S NAME FROM S1i/'s Sister
- 12 You are /RESTORE PERSON'S NAME FROM S1i/'s Brother
- 13 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female relative
- 14 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male relative
- 15 You are /RESTORE PERSON'S NAME FROM S1i/'s female legal guardian
- 16 You are /RESTORE PERSON'S NAME FROM S1i/'s male legal guardian
- 17 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster mother
- 18 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster father
- 19 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female non-relative
- 20 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male non-relative
- 97 OTHER
- 98 DK
- 99 REFUSED

S2coth //If S2c =97, ask S2coth //

How would you describe your relationship to //person in S1//?

01 //TEXT RANGE=70// RESPONSE: _____

- 98 DK
- 99 REFUSED

S2cage //If S2b = 01, ask S2cage.//

I have another question about your age before I ask you about {RESTORE PERSON'S NAME FROM S1i}.

Please tell me how old you were on your last birthday.

- 018-125 (Skip to PRES8) RECORD AGE
- 998 (Skip to PRES8) DK
- 999 (Skip to PRES8) REFUSED

S4 //If (S2b = 02, 98 OR 99) AND (3 <= S10 <=9), ask S4.

Who could I speak to that knows about {RESTORE PERSON'S NAME FROM S1i} insurance?

[INTERVIEWER NOTE: Attempt to get a knowledgeable person on the line. If successful, code in '01' below. If unsuccessful, attempt to get the name of a knowledgeable person to call back later and code in '02'. If respondent says nobody in the household is knowledgeable, ask who is most knowledgeable]

01 OTHER AVAILABLE
02 (Skip to CALLBACK) NOT AVAILABLE
98 (Skip to THANKYOU2) DK
99 (Skip to REFUSAL) REFUSED

S4int Could I have a first name or initials of this person?

[INTERVIEWER NOTE: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS, NOT JUST RELATIONSHIP]

[INTERVIEWER NOTE: IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

S4a //If S4 = 01, ask://

Could you please ask /RESTORE PERSON'S NAME FROM S4int/ to come to the telephone and answer some questions?

//If S10a = 02, then skip to S4a_1//

May I please speak with the adult in the household?

01 (Skip to S5) YES
02 (Skip to CALLBACK) NO
98 (Skip to CALLBACK) DK
99 (Skip to CALLBACK) REFUSED

S5 Hello, my name is _____ [INTERVIEWER SAY FIRST AND LAST NAME], and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage, use of medical services, satisfaction with health care, and problems getting health care. Your telephone number was chosen randomly and all information will be kept strictly confidential. This call may be monitored for quality assurance.

[IF NECESSARY, SAY: we are also interested in experiences of persons who do not have health insurance.]

[IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the State of Ohio Department of Health and Ohio State University.]

[IF NECESSARY, SAY: This survey should take 20 to 22 minutes to complete.]

[IF NECESSARY, SAY: You may call the Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01		AVAILABLE
02	(SKIP TO CALLBACK)	NOT ABLE TO PARTICIPATE AT THIS TIME
98	(SKIP TO REFUSAL)	DK
99	(SKIP TO REFUSAL)	REFUSED

PRES8 Now, I would like to ask a few general questions about {YOURSELF/RESTORE PERSON'S NAME FROM S1i} and {YOURSELF/HIS OR HER} family. These questions are simply for survey classification purposes to ensure that our results will represent everyone in the state of Ohio.

You do not have to answer any question you do not want to, and you can end the interview at any time. If you have any questions, I will provide a telephone number for you to call to get more information. The interview will take approximately 20 to 22 minutes.

[INTERVIEWER: If you would like to speak to someone about this survey, please call //RESTORE CENTER #//.]

SPRX1 //If S4 = 01, ask SPRX1//

Before I start asking about //RESTORE PERSON'S NAME FROM S1i//, I need to ask about your relationship to //RESTORE PERSON'S NAME FROM S1i// and your age.

What is your relationship to /RESTORE PERSON'S NAME FROM S1i/?

[INTERVIEWER NOTE: READ LIST ONLY IF NECESSARY]

01	You are /RESTORE PERSON'S NAME FROM S1i/'s Wife
02	You are /RESTORE PERSON'S NAME FROM S1i/'s Husband
03	You are /RESTORE PERSON'S NAME FROM S1i/'s Mother
04	You are /RESTORE PERSON'S NAME FROM S1i/'s Father
05	You are /RESTORE PERSON'S NAME FROM S1i/'s Daughter
06	You are /RESTORE PERSON'S NAME FROM S1i/'s Son
07	You are /RESTORE PERSON'S NAME FROM S1i/'s Grandmother
08	You are /RESTORE PERSON'S NAME FROM S1i/'s Grandfather
09	You are /RESTORE PERSON'S NAME FROM S1i/'s Aunt
10	You are /RESTORE PERSON'S NAME FROM S1i/'s Uncle
11	You are /RESTORE PERSON'S NAME FROM S1i/'s Brother
12	You are /RESTORE PERSON'S NAME FROM S1i/'s Sister
13	You are /RESTORE PERSON'S NAME FROM S1i/'s Other female relative
14	You are /RESTORE PERSON'S NAME FROM S1i/'s Other male relative
15	You are /RESTORE PERSON'S NAME FROM S1i/'s female legal guardian
16	You are /RESTORE PERSON'S NAME FROM S1i/'s male legal guardian
17	You are /RESTORE PERSON'S NAME FROM S1i/'s Foster mother
18	You are /RESTORE PERSON'S NAME FROM S1i/'s Foster father
19	You are /RESTORE PERSON'S NAME FROM S1i/'s Other female non-relative
20	You are /RESTORE PERSON'S NAME FROM S1i/'s Other male non-relative
97	Other
98	DK
99	REFUSED

SPRX10 //If SPRX1 =97, ask SPRX10//

How would you describe your relationship to //person in S1//?

- 01 //TEXT RANGE=70// RESPONSE:_____
- 98 DK
- 99 REFUSED

SPRX2 //If S4 = 01, ask SPRX2.//

Please tell me how old you were on your last birthday.

- 018-125 RECORD AGE
- 998 DK
- 999 REFUSED

S8 How long {have you/has RESTORE PERSON’S NAME FROM S1i} lived in Ohio? Has it been less than a month, more than a month but less than 12, a year, more than a year but less than 5, or five or more years?

[INTERVIEWER NOTE: If response is “ALL MY LIFE”, select response option 05 “5 or more years”.]

- 01 (SKIP TO THANKYOU) LESS THAN 1 MONTH
- 02 MORE THAN 1 MONTH BUT LESS THAN 12 MONTHS
- 03 1 YEAR
- 04 MORE THAN 1 YEAR BUT LESS THAN 5 YEARS
- 05 5 OR MORE YEARS
- 98 (GO TO THANK YOU) DK
- 99 (GO TO THANK YOU) REFUSED

S9 In what county in the State of Ohio {do you/does RESTORE PERSON’S NAME FROM S1i} live?

[READ IF NECESSARY: Which county {do you/does RESTORE PERSON’S NAME FROM S1i} live in MOST OF THE TIME?]

[ANTICIPATED CODE FROM SAMPLE IS //restore county FIPS code//]

[INTERVIEWER NOTE: DO NOT READ LIST, FIND THE COUNTY RESPONDENTS NAME IN THE LIST AND CODE ACCORDINGLY. IF RESPONDENT SAYS MORE THAN ONE COUNTY NAME, CODE ONLY THE FIRST MENTIONED.]

- | | | |
|---------------|--------------|--------------|
| 001 Adams | 061 Hamilton | 121 Noble |
| 003 Allen | 063 Hancock | 123 Ottawa |
| 005 Ashland | 065 Hardin | 125 Paulding |
| 007 Ashtabula | 067 Harrison | 127 Perry |
| 009 Athens | 069 Henry | 129 Pickaway |
| 011 Auglaize | 071 Highland | 131 Pike |
| 013 Belmont | 073 Hocking | 133 Portage |
| 015 Brown | 075 Holmes | 135 Preble |

017	Butler	077	Huron	137	Putnam
019	Carroll	079	Jackson	139	Richland
021	Champaign	081	Jefferson	141	Ross
023	Clark	083	Knox	143	Sandusky
025	Clermont	085	Lake	145	Scioto
027	Clinton	087	Lawrence	147	Seneca
029	Columbiana	089	Licking	149	Shelby
031	Coshocton	091	Logan	151	Stark
033	Crawford	093	Lorain	153	Summit
035	Cuyahoga	095	Lucas	155	Trumbull
037	Darke	097	Madison	157	Tuscarawas
039	Defiance	099	Mahoning	159	Union
041	Delaware	101	Marion	161	Van Wert
043	Erie	103	Medina	163	Vinton
045	Fairfield	105	Meigs	165	Warren
047	Fayette	107	Mercer	167	Washington
049	Franklin	109	Miami	169	Wayne
051	Fulton	111	Monroe	171	Williams
053	Gallia	113	Montgomery	173	Wood
055	Geauga	115	Morgan	175	Wyandot
057	Greene	117	Morrow		
059	Guernsey	119	Muskingum		

997 OTHER
998 DK
999 REFUSED

//If S9 = 001 to 175, GOTO S9b;
IF S9 = 998, GO TO S9a;
IF S9 = 999, GO TO S9a.//

S9.1 **//If S9=997 then ask://**
[INTERVIEWER: RECORD THE COUNTY NAME HERE --- ASK FOR SPELLING IF NECESSARY.]

01 //TEXT RANGE=70// RESPONSE: _____
02 (SKIP TO THANKYOU) RESPONDENT VOLUNTEERS COUNTY NOT IN OHIO

98 DK
99 REFUSED

S9a **//If S9.1=98 or 99 OR S9 = 998 or 999//**
In what city or town {do you/does RESTORE PERSON'S NAME FROM S1i} live?

[INTERVIEWER - PROBE FOR SPELLING NEEDED]

01 //TEXT RANGE=70// RESPONSE: _____

98 DK
99 REFUSED

S.9b What is {your/RESTORE PERSON'S NAME FROM S1i} ZIP code?

01 // 43000-45999// (Code actual ZIP code FIVE DIGITS)

99998 DK [INTERVIEWER - PROBE, MUST HAVE TO ENSURE
ELIGIBILITY]
99999 REFUSED

S11 //If S10 = 01 then autocode S11 = 01 and skip to S12//

INCLUDING {YOURSELF/RESTORE PERSON'S NAME FROM S1i}, how many adult members of {your/his or her} FAMILY, age 18 and over, live in this household? Here, I am using the legal definition of FAMILY in the State of Ohio. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01-08 //Code response, see note below//
09 //See note below//9 OR MORE
98 (Skip to S12) DK
99 (Skip to S12) REFUSED

**/If S11 is less than or equal to S10, skip to S12;
If S11 is 98 or 99, skip to S12;
If S11 > S10, continue to S11b.//**

S11b Let me see if I have this right, earlier I thought you said that there were //RESTORE ANSWER FROM S10// adults living in {YOUR/RESTORE PERSON'S NAME FROM S1i} household, but now I thought you just said that there were //RESTORE ANSWER FROM S11// adults in {YOUR/RESTORE PERSON'S NAME FROM S1i} family? Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

//if respondent changes answer to S10 or S11, recode as directed//.

01 CHANGE NUMBER OF ADULTS IN HOUSEHOLD, ENTER NEW
NUMBER AND RECODE S10
02 CHANGE NUMBER OF ADULTS IN FAMILY, ENTER NEW
NUMBER AND RECODE S11
03 NO CHANGES
99 REFUSED

S12 How many children, persons 17 years of age or younger, live in this household whether they are family members or not?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00	(Skip to S14)	NONE
01-11		(Code Actual Number)
12		12 OR MORE
98		DK
99		REFUSED

//If S12 is code '00', autocode S13 as '00' and skip to S14//

S13 How many children, persons 17 years of age or younger, in { YOUR/RESTORE PERSON'S NAME FROM S1i } FAMILY live in this household?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00	(Skip to S14)	NONE	# CHILDREN	(Code Actual Number)
98	(Skip to S14)	DK		
99	(Skip to S14)	REFUSED		

**//If S13 <= S12, skip to S14;
If S13 = 98 or 99, skip to S14;
If S13 > S12, continue to S12a.//**

S12a //If S13 is greater than S12//

Let me see if I have this right. I thought you just told me that there were //RESTORE ANSWER FROM S12// total children in the household and //RESTORE ANSWER FROM S13// children in the household who are family members. Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01	CHANGE NUMBER OF CHILDREN IN HOUSEHOLD, ENTER NEW NUMBER AND RECODE S12
02	CHANGE NUMBER OF CHILDREN IN FAMILY, ENTER NEW NUMBER AND RECODE S13
03	NO CHANGES
99	REFUSED

S14 Please tell me how old { YOU WERE / RESTORE PERSON'S NAME FROM S1i WAS } on { your / his or her } last birthday.

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]⁷

018-125 (**Skip to S15**) RECORD AGE
998 (**Skip to S14a**) DK
999 (**Skip to S14a**) REFUSED

S14a //IF S14="998" or "999" ASK//

On {YOUR / RESTORE PERSON'S NAME FROM S1i's} last birthday would you say that {YOU WERE / RESTORE PERSON'S NAME FROM S1i WAS}...

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]⁸

[INTERVIEWER READ LIST]

01 18-24
02 25-34
03 35-44
04 45-54
05 55-64
06 65 or older
98 (**Skip to THANKYOU2**) DK
99 (**Skip to THANKYOU2**) REFUSED

S15 [INTERVIEWER NOTE: Ask if necessary.]

I'm required to ask {YOUR / RESTORE PERSON'S NAME FROM S1i's} gender. Are {YOU / RESTORE PERSON'S NAME FROM S1i} male or female?

[INTERVIEWER NOTE: Enter '99' Refused if the respondent fails to respond and you are unable to guess.]

01 MALE
02 FEMALE
99 REFUSED

S16 {Are YOU / is RESTORE PERSON'S NAME FROM S1i} of Hispanic or Latino origin?

01 YES
02 NO

98 DK
99 REFUSED

⁷ Changed "Best guess" to "Best estimate" ; 8/28

⁸ Changed "Best guess" to "Best estimate" ; 8/28

S17 Which one or more of the following would you say is {YOUR / RESTORE PERSON'S NAME FROM S1i's} race? {ARE YOU / IS RESTORE PERSON'S NAME FROM S1i} White, Black or African American, Asian, or Native American, American Indian, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned ?

[INTERVIEWER NOTE: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER NOTE: CODE ALL THAT APPLY]

//MUL=7//

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native American, American Indian, or Alaskan Native
- 05 Native Hawaiian or Other Pacific Islander
- 06 HISPANIC, LATINO, SPANISH
- 97 OTHER

- 98 DK
- 99 REFUSED

// If S17=97, GO TO S17a;
If S17 has more than one answer selected, go to S17b;
If S17 = 06 and S17 is NOT 01 to 05, go to S18;
If S17 has only one answer selected, go to PREA1. //

S17a **// If S17=97 then ask://**
How would you describe {YOUR / RESTORE PERSON'S NAME FROM S1i's} race?

- 01 //TEXT RANGE=70// RESPONSE: _____
- 98 DK
- 99 REFUSED

If S17 has more than one answer selected, go to S17b;
If S17 has only one answer selected, go to PREA1. //

S17b **// If respondent gives more than one answer in S17//**

Which of these groups, that is //RECALL S17 ANSWERS// would you say best represents {YOUR / RESTORE PERSON'S NAME FROM S1i's} race?

//Please limit response choices to those selected in S17//

- 01 **(Skip to PREA1)**White
- 02 **(Skip to PREA1)**Black or African American
- 03 **(Skip to PREA1)**Asian
- 04 **(Skip to PREA1)** Native American, American Indian, or Alaskan Native
- 05 **(Skip to PREA1)**Native Hawaiian or Other Pacific Islander

- 97 OTHER

- 98 **(Skip to PREA1)**DK

99 (Skip to PREA1)REFUSED

S18 //If S17 = 06 and S17 is NOT 01 to 05 then ask://

Do you consider { YOURSELF / RESTORE PERSON'S NAME FROM S1i } to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER NOTE: Do not easily accept "Hispanic", DK, or Refused, repeat question if necessary.]

- 01 (Skip to PREA1)White Hispanic
- 02 (Skip to PREA1)Black or African American Hispanic
- 03 (Skip to PREA1)Asian Hispanic
- 04 (Skip to PREA1) Native American, American Indian, or Alaskan Native Hispanic
- 05 (Skip to PREA1)Native Hawaiian or Pacific Islander Hispanic

- 97 (Skip to S18a) Other race Hispanic
- 98 (Skip to PREA1)DON'T KNOW
- 99 (Skip to PREA1)REFUSES TO DISCRIMINATE

S18a //If S18=97 then ask://

How would you describe { YOUR / RESTORE PERSON'S NAME FROM S1i's } race?

[INTERVIEWER NOTE: Do not accept "Hispanic, Latino or Spanish" here. If respondent answers "Hispanic, Latino, or Spanish," back up and choose "99"]

- 01 //TEXT RANGE=70// RESPONSE: _____
- 98 DK
- 99 REFUSED

ANS_1

Hi, my name is _____. I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important study on health insurance coverage and access to health care services. Your participation would help the State of Ohio make better health care policy decisions for its residents. Please call us at //RESTORE CENTER #// at your convenience."

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

Privacy Manager Message

IF THE MESSAGE ASKS TO IDENTIFY WHO OR WHAT COMPANY IS CALLING:

"We are calling on behalf of the State of Ohio Department of Health and Ohio State University."

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:

Enter: //RESTORE CENTER #//

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

**INTRODUCTION AND SCREENER QUESTIONS FOR CELL PHONE
SAMPLE**

Intro1. Hello, my name is [INTERVIEWER NAME], and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. **We are interviewing people on their cell phones about their health and access to health care services. Your cell phone number has been chosen randomly.** The interview takes about 20 - 22 minutes to complete and if you qualify and complete the interview you will receive a \$10 Amazon e-gift certificate immediately after the interview.

- 01 (SKIP TO Scell1) Continue
- 02 (CODE DISPO) No answer
- 03 (CODE DISPO) Normal busy
- 04 (CB MSG, DISPO) Voicemail
- 06 (code dispo) Already Interviewed
- 07 (CODE DISPO) Termination screen
- 08 (CODE DISPO) Hang up - Before/During INTRO
- 09 (CODE NEW DISPO) Does not live in Ohio
- 10 (SKIP TO SPCBACK) CALL BACK DIFFERENT NUMBER
- 11. (TERMINATE) PERSON MENTALLY OR PHYSICALLY IMPAIRED, CANNOT RESPOND
- 14 (CB IN SPANISH) CONTINUE IN SPANISH

Scell1. We realize that we are contacting people on their cell phones. Your safety is important to me. Are you driving a car or operating another motor vehicle right now?

- 01 (Skip to Ccbak1) Yes
- 02 No
- 98 (Skip to Ccbak1) DON'T KNOW
- 99 (Skip to Ccbak1) REFUSED

Scell2. Are you in a location where talking on the phone could jeopardize your safety or confidentiality?

- 01 Yes
- 02 (Skip to Scell3) No
- 98 DON'T KNOW
- 99 REFUSED

Ccbak1. Thank you very much. We will contact you at a later time.

Scell3. Scell3. Thank you, are you 18 years of age or older?

- 01 (Skip to Scell4) yes
- 02 no
- 98 DON'T KNOW
- 99 REFUSED

CREF2 Thank you very much, but we are only interviewing people age 18 and older.{Terminate: LT 18 yo}

Scell4. Are you a resident of Ohio?

- 01 (Skip to psTime) YES
- 02 NO
- 98 DON'T KNOW
- 99 REFUSED

CREF3. Thank you very much for your time, but we are only interviewing people who are residents in Ohio. {CODE DISPO Doesn't live in OH}

PSTime //Programmer: Start timer for Screener. Required for both complete and screened interviews//

Scell5. As I mentioned earlier, I am calling on behalf of the State of Ohio Department of Health and Ohio State University to gather information on the health of Ohio residents. Your cell phone number was chosen randomly and all information will be kept strictly confidential. You don't have to answer any question you don't want to, and you can end the interview at any time. This call may be monitored for quality assurance.

[INTERVIEWER, IF NECESSARY: We are conducting a survey on health insurance coverage, use of medical services, satisfaction with health care and problems getting health care. The survey's sponsors are the State of Ohio Department of Health and Ohio State University.]

[INTERVIEWER – IF NECESSARY, SAY: We are also interested in experiences of persons who do not have health insurance.]

[INTERVIEWER – IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[INTERVIEWER – IF NECESSARY, SAY: This survey should take 20- 22 minutes to complete.]

[INTERVIEWER – IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the State of Ohio Department of Health and Ohio State University.]

[INTERVIEWER – IF NECESSARY, SAY: You may call the Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01		PERSON AVAILABLE
02	(TERMINATE)	PERSON MENTALLY OR PHYSICALLY IMPAIRED
		CANNOT RESPOND
10	(SKIP TO SPCBACK)	CALL BACK DIFFERENT NUMBER
96	(Skip to CALLBACK)	NOT SAFE TO TALK AT THIS POINT
99	(TERMINATE)	REFUSED

SCell6. First, do you live in a residential household, such as an apartment, a house, or a mobile home?

[INTERVIEWER NOTE: A non-residence would be a dormitory, hospital room, nursing home, assisted living facility, group home or barracks]

01		YES, RESIDENTIAL HOUSEHOLD
02	(Skip to THANKYOU1)	NO, NON-RESIDENCE
98	(Skip to THANKYOU1)	DK
99	(Skip to THANKYOU1)	REFUSED

sCell7. How long {have you/has RESTORE PERSON'S NAME FROM S1i} lived in Ohio? Has it been less than a month, more than a month but less than 12, a year, more than a year but less than 5, or five or more years?

[INTERVIEWER NOTE: If response is "ALL MY LIFE", select response option 05 "5 or more years".]

01	(SKIP TO CREF4)	LESS THAN 1 MONTH
02		MORE THAN 1 MONTH BUT LESS THAN 12 MONTHS
03		1 YEAR
04		MORE THAN 1 YEAR BUT LESS THAN 5 YEARS
05		5 OR MORE YEARS
06	(SKIP TO CREF4)	DOES NOT LIVE IN OHIO
98	(GO TO CREF4)	DK
99	(GO TO CREF4)	REFUSED

CREF4. Thank you very much for your time, but we are only interviewing people who have lived in Ohio for more than a month. {CODE DISPO Doesn't live in OH}

Thankyou1. Thank you very much but we are only interviewing people who live in residential households for this study. {Terminate non-residential}

S9 In what county in the State of Ohio {do you/does RESTORE PERSON'S NAME FROM S1i} live?

[READ IF NECESSARY: Which county {do you/does RESTORE PERSON'S NAME FROM S1i} live in MOST OF THE TIME?]

[ANTICIPATED CODE FROM SAMPLE IS //restore county FIPS code//]

[INTERVIEWER NOTE: DO NOT READ LIST, FIND THE COUNTY RESPONDENTS NAME IN THE LIST AND CODE ACCORDINGLY. IF RESPONDENT SAYS MORE THAN ONE COUNTY NAME, CODE ONLY THE FIRST MENTIONED.]

001	Adams	061	Hamilton	121	Noble
003	Allen	063	Hancock	123	Ottawa
005	Ashland	065	Hardin	125	Paulding
007	Ashtabula	067	Harrison	127	Perry
009	Athens	069	Henry	129	Pickaway
011	Auglaize	071	Highland	131	Pike
013	Belmont	073	Hocking	133	Portage
015	Brown	075	Holmes	135	Preble
017	Butler	077	Huron	137	Putnam
019	Carroll	079	Jackson	139	Richland
021	Champaign	081	Jefferson	141	Ross
023	Clark	083	Knox	143	Sandusky
025	Clermont	085	Lake	145	Scioto
027	Clinton	087	Lawrence	147	Seneca
029	Columbiana	089	Licking	149	Shelby
031	Coshocton	091	Logan	151	Stark
033	Crawford	093	Lorain	153	Summit
035	Cuyahoga	095	Lucas	155	Trumbull
037	Darke	097	Madison	157	Tuscarawas
039	Defiance	099	Mahoning	159	Union
041	Delaware	101	Marion	161	Van Wert
043	Erie	103	Medina	163	Vinton
045	Fairfield	105	Meigs	165	Warren
047	Fayette	107	Mercer	167	Washington
049	Franklin	109	Miami	169	Wayne
051	Fulton	111	Monroe	171	Williams
053	Gallia	113	Montgomery	173	Wood
055	Geauga	115	Morgan	175	Wyandot
057	Greene	117	Morrow		

059 Guernsey 119 Muskingum

997 OTHER
998 DK
999 REFUSED

**//If S9 = 001 to 175, GOTO S9b;
IF S9 = 998, GO TO S9a;
IF S9 = 999, GO TO S9a.//**

S9.1 **//If S9=997 then ask://**
[INTERVIEWER: RECORD THE COUNTY NAME HERE --- ASK FOR SPELLING IF NECESSARY.]

01 //TEXT RANGE=70// RESPONSE: _____
02 **(SKIP TO THANKYOU)** RESPONDENT VOLUNTEERS COUNTY NOT IN OHIO

98 DK
99 REFUSED

S9a **//If S9.1=98 or 99 OR S9 = 998 or 999//**
In what city or town {do you/does RESTORE PERSON'S NAME FROM S1i} live?

[INTERVIEWER - PROBE FOR SPELLING NEEDED]

01 //TEXT RANGE=70// RESPONSE: _____

98 DK
99 REFUSED

S.9b What is {your/RESTORE PERSON'S NAME FROM S1i} ZIP code?

01 // 43000-45999// (Code actual ZIP code FIVE DIGITS)

99998 DK [INTERVIEWER - PROBE, MUST HAVE TO ENSURE
ELIGIBILITY]
99999 REFUSED

S10. How many members of your household, INCLUDING yourself, are 18 _____ years of age or older?

[INTERVIEWER NOTE: For purposes of this survey, "household" refers _____ to all of the people who are living in this house, apartment, or mobile _____ home where we reach the respondent.]

01 1 ADULT
02 2 ADULTS
03 3 ADULTS
04 4 ADULTS
05 5 ADULTS
06 6 ADULTS
07 7 ADULTS
08 8 ADULTS
09 9 OR MORE ADULTS

98 **(Thank, Terminate)** DK

99 (Thank, Terminate) REFUSED

//If S10 = 01 then autocode S11 = 01 and skip to S12//

S11. INCLUDING {YOURSELF/RESTORE PERSON'S NAME FROM S1i}, how many adult members of {your/his or her} FAMILY, age 18 and over, live in your household? Here, I am using the legal definition of FAMILY in the State of Ohio. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01-08 //Code response, see note below//
09 /See note below//9 OR MORE
98 (Skip to S12) DK
99 (Skip to S12) REFUSED

//If S11 is less than or equal to S10, skip to S12;
If S11 is 98 or 99, skip to S12;
If S11 > S10, continue to S11b.//

S11b Let me see if I have this right, earlier I thought you said that there were //RESTORE ANSWER FROM S10// adults living in {YOUR/RESTORE PERSON'S NAME FROM S1i} household, but now I thought you just said that there were //RESTORE ANSWER FROM S11// adults in {YOUR/RESTORE PERSON'S NAME FROM S1i} family? Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

//if respondent changes answer to S10 or S11, recode as directed//.

01 CHANGE NUMBER OF ADULTS IN HOUSEHOLD, ENTER NEW NUMBER AND RECODE S10
02 CHANGE NUMBER OF ADULTS IN FAMILY, ENTER NEW NUMBER AND RECODE S11
03 NO CHANGES
99 REFUSED

S12 How many children, persons 17 years of age or younger, live in your household whether they are family members or not?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00 (Skip to S14) NONE

01-11	(Code Actual Number)
12	12 OR MORE
98	DK
99	REFUSED

If S12 is code '00', autocode S13 as '00' and skip to S14//

S13 How many children, persons 17 years of age or younger, in { YOUR/RESTORE PERSON'S NAME FROM S1i} FAMILY live in your household?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

00	(Skip to S14)	NONE	# CHILDREN	(Code Actual Number)
98	(Skip to S14)	DK		
99	(Skip to S14)	REFUSED		

**//If S13 <= S12, skip to S14;
If S13 = 98 or 99, skip to S14;
If S13 > S12, continue to S12a.//**

S12a //If S13 is greater than S12//

Let me see if I have this right. I thought you just told me that there were //RESTORE ANSWER FROM S12// total children in the household and //RESTORE ANSWER FROM S13// children in the household who are family members. Is this correct, or did I make a mistake?

[INTERVIEWER NOTE: For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in this house, apartment, or mobile home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.]

01	CHANGE NUMBER OF CHILDREN IN HOUSEHOLD, ENTER NEW NUMBER AND RECODE S12
02	CHANGE NUMBER OF CHILDREN IN FAMILY, ENTER NEW NUMBER AND RECODE S13
03	NO CHANGES
99	REFUSED

S14 Please tell me how old you were on your last birthday.

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]

018-125	(Skip to S15)	RECORD AGE
998	(Skip to S14a)	DK
999	(Skip to S14a)	REFUSED

S14a //IF S14="998" or "999" ASK//
On your last birthday would you say that you were...

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]

[INTERVIEWER READ LIST]

01	18-24
02	25-34
03	35-44
04	45-54
05	55-64
06	65 or older
98 (Skip to THANKYOU2)	DK
99 (Skip to THANKYOU2)	REFUSED

S15 [INTERVIEWER NOTE: Ask if necessary.]

I'm required to ask {YOUR / RESTORE PERSON'S NAME FROM S1i's} gender. Are {YOU /RESTORE PERSON'S NAME FROM S1i} male or female?

[INTERVIEWER NOTE: Enter '99' Refused if the respondent fails to respond and you are unable to guess.]

01	MALE
02	FEMALE
99	REFUSED

S1int

Could I have {your } first name or initials?

[INTERVIEWER - IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

S16 {Are YOU / is RESTORE PERSON'S NAME FROM S1i} of Hispanic or Latino origin?

01	YES
02	NO
98	DK
99	REFUSED

S17 Which one or more of the following would you say is {YOUR / RESTORE PERSON'S NAME FROM S1i's} race? {ARE YOU / IS RESTORE PERSON'S NAME FROM S1i} White, Black or African American, Asian, or Native American, American Indian, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned ?

[INTERVIEWER NOTE: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER NOTE: CODE ALL THAT APPLY]

//MUL=7//

01	White
02	Black or African American
03	Asian
04	Native American, American Indian, or Alaskan Native
05	Native Hawaiian or Other Pacific Islander
06	HISPANIC, LATINO, SPANISH
97	OTHER
98	DK
99	REFUSED

// If S17=97, GO TO S17a;
If S17 has more than one answer selected, go to S17b;
If S17 = 06 and S17 is NOT 01 to 05, go to S18;
If S17 has only one answer selected, go to PREA1. //

S17a **// If S17=97 then ask://**
How would you describe {YOUR / RESTORE PERSON'S NAME FROM S1i's} race?

01	//TEXT RANGE=70//	RESPONSE: _____
98		DK
99		REFUSED

If S17 has more than one answer selected, go to S17b;
If S17 has only one answer selected, go to PREA1. //

S17b **// If respondent gives more than one answer in S17//**

Which of these groups, that is //RECALL S17 ANSWERS// would you say best represents {YOUR / RESTORE PERSON'S NAME FROM S1i's} race?

//Please limit response choices to those selected in S17//

01	(Skip to PREA1) White
02	(Skip to PREA1) Black or African American
03	(Skip to PREA1) Asian
04	(Skip to PREA1) Native American, American Indian, or Alaskan Native
05	(Skip to PREA1) Native Hawaiian or Other Pacific Islander
97	OTHER
98	(Skip to PREA1) DK
99	(Skip to PREA1) REFUSED

S18 **//If S17 = 06 and S17 is NOT 01 to 05 then ask://**
Do you consider {YOURSELF / RESTORE PERSON'S NAME FROM S1i} to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[INTERVIEWER NOTE: Do not easily accept "Hispanic", DK, or Refused, repeat question if necessary.]

- 01 (Skip to PREA1) White Hispanic
- 02 (Skip to PREA1) Black or African American Hispanic
- 03 (Skip to PREA1) Asian Hispanic
- 04 (Skip to PREA1) Native American, American Indian, or Alaskan Native Hispanic
- 05 (Skip to PREA1) Native Hawaiian or Pacific Islander Hispanic

- 97 (Skip to S18a) Other race Hispanic
- 98 (Skip to PREA1) DON'T KNOW
- 99 (Skip to PREA1) REFUSES TO DISCRIMINATE

S18a //If S18=97 then ask://
 How would you describe {YOUR / RESTORE PERSON'S NAME FROM S1i's} race?

[INTERVIEWER NOTE: Do not accept "Hispanic, Latino or Spanish" here. If respondent answers "Hispanic, Latino, or Spanish," back up and choose "99"]

- 01 //TEXT RANGE=70// RESPONSE: _____
- 98 DK
- 99 REFUSED

ANS_1 Hi, my name is _____. I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important study on health insurance coverage and access to health care services. Your participation would help the State of Ohio make better health care policy decisions for its residents. Please call us at //RESTORE CENTER #// at your convenience."

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

Privacy Manager Message

IF THE MESSAGE ASKS TO IDENTIFY WHO OR WHAT COMPANY IS CALLING:
 "We are calling on behalf of the State of Ohio Department of Health and Ohio State University."

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:
 Enter: //RESTORE CENTER #//

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

*****start the rest of the survey here. Will start at Prea1*****

Privacy Manager Message

IF THE MESSAGE ASKS TO IDENTIFY WHO OR WHAT COMPANY IS CALLING:
 "We are calling on behalf of the State of Ohio Department of Health and Ohio State University."

IF MESSAGE ASKS TO ENTER A PHONE NUMBER:
 Enter: //RESTORE CENTER #//

//PROGRAMMER: PLEASE RESTORE RELEVANT PHONE NUMBER//

SECTION A: CURRENT INSURANCE STATUS

//Programmer: Turn off prior timers. Please start timer for Section A. //

PREA1: My next questions are about //your/Person in S1's// CURRENT health insurance coverage, that is, the health coverage //you/Response in S1// had LAST WEEK, if any.

A1 //Are you/Is Person in S1// covered by health insurance or some other type of health care plan?

01	(Skip to PreB4.a)	YES
02		NO
98		DK
99		REFUSED

A1a. Health insurance or some other type of health care plan may include health insurance obtained through employment or purchased directly as well as government and military programs such as Medicare, Medicaid, Healthy Families, CHAMPUS, Champ-VA, TRICARE, and the Indian Health Service.

[IF NECESSARY: Keeping this in mind, //are you/is person in S1// covered by health insurance or some other type of health care plan?]

01		YES, INSURED
02	(Skip to C1)	NO, NOT INSURED
98	(Skip to ThankYou2)	DK
99	(Skip to ThankYou2)	REFUSED

SECTION B: CURRENTLY INSURED ADULT

PREB4A: //Programmer: Turn of prior timers. Please start timer for Section B. //

I would like to now ask you some more specific questions about //your/Person in S1's// health insurance coverage

B4A. //Are you/Is Person in S1// covered by a health insurance plan through a current or former employer or union?

[IF NECESSARY: Either through //your/person in S1's// own or someone else's employment.]

[IF NECESSARY: Include retiree coverage and COBRA]⁹

[IF NECESSARY: Do not include Medicare or Medicaid coverage.]

01		YES, covered by a health insurance plan through current/former employer or union
02	(Skip to B4B)	NO, not covered through current/former employer or union
98	(Skip to B4B)	DK
99	(Skip to B4B)	REFUSED

B4Aa. //if B4A = "01" then ask://

Is that insurance through //your/Person in S1's// work or //are you/is Person in S1// receiving insurance as a dependent through someone else's work?

[INTERVIEWER NOTE: This includes current or past work.]

[INTERVIEWER NOTE: The health insurance can come through a PAST EMPLOYER, but the coverage MUST be CURRENT]

01		//OWN/PERSON IN S1's// WORK
02		SOMEONE ELSE'S WORK
03		BOTH THROUGH //OWN/PERSON IN S1's//WORK AND SOMEONE ELSE'S WORK
98	(Skip to B4B)	DK
99	(Skip to B4B)	REFUSED

B4Aa1 //if B4Aa = '03' then ask://

Just to confirm, you said that //your/person in S1's// insurance is through //your OWN/PERSON IN S1's//work and someone else's work?

01		YES, INSURANCE BOTH THROUGH ///OWN/PERSON IN S1// and SOMEONE ELSE'S WORK
02		NO, INSURANCE THROUGH //OWN/PERSON IN S1'S// WORK ONLY
03		NO, INSURANCE THROUGH SOMEONE ELSE'S WORK
98	(Skip to B4B)	DK
99	(Skip to B4B)	REFUSED

// If B4Aa1 = 02, autocode B4Aa = 01. If B4Aa1 = 03, autocode B4Aa = 02.//

⁹ Changed interviewer note from "Include COBRA" to "Include retiree coverage and COBRA"; 8/26

B4Ab //if B4Aa =‘01’ or ‘03’, read//:
Is that through //your/person in S1’s// current work or past work?

//if B4Aa = ‘02’, read//:
//Are you/Is Person in S1// covered through that person’s current work or past work?

01	CURRENT WORK
02	PAST WORK
98	DK
99	REFUSED

B4B Are you/Is person in S1// covered by MEDICARE, the government-funded health insurance plan for people 65 years and older or persons with certain disabilities that includes

//PROGRAMMER: See Global References to determine S9’s region//

//if S9> 175, then restore: // Mt. Carmal Healthplan, Humana Insurance Company, Community Insurance Company, Summacare, Inc. McKinley Insurance Company, UMPC Health Benefits, Kaiser Foundation HP of Ohio, United Healthcare of Ohio, Inc., Wellcare Health Insurance of Ohio, Inc.?

//if S9 in Central, then restore: // Mt. Carmal Healthplan, Inc., AETNA Life Insurance Company, Humana Insurance Company, Community Insurance Company, United Healthcare of Ohio, Wellcare Health Insurance of Illinois, Inc.?

//if S9 in East Central, then restore: // McKinley Life Insurance Company, Summacare, Inc., AETNA Life Insurance, Community Insurance Company, Hometown Health Plan?

//in S9 in North East, then restore: // Community Insurance Company, AETNA Life Insurance Company, Humana Insurance Company, Kaiser Foundation HP of Ohio, Wellcare Health Insurance of Illinois, Inc.?

//in S9 in Northeast Central, then restore: // Community Insurance Company, United Healthcare of Ohio, Inc., AETNA Life Insurance Company?

//in S9 in Northwest: // AETNA Life Insurance Company, Paramount Care, Inc., Humana Insurance Company?

//in S9 in South East, then restore: // UMPC Health Benefits, Inc., AETNA Life Insurance Company, Health Plan of the Upper Ohio Valley?

//in S9 in South West, then restore: // United Healthcare of Ohio, Inc., Community Insurance Company, AETNA Insurance Company, Humana Insurance Company, Wellcare Health Insurance of Ohio, Inc.?

//in West Central, then restore: // United Healthcare of Ohio, Inc., Community Insurance Company, AETNA Life Insurance Company, Wellcare Health Insurance of Ohio, Inc.?

[INTERVIEWER HELP SCREEN - Medicare: health coverage for those 65 and older or with certain disabilities.]

[IF NECESSARY, READ:MEDICARE also includes Mt. Carmal Healthplan, Humana Insurance Company, Community Insurance Company, Summacare, Inc. McKinley Insurance Company, UMPC Health Benefits, Kaiser Foundation HP of Ohio, United Healthcare of Ohio, Inc., Wellcare Health Insurance of Ohio, Inc.]

[IF RESPONDENT IS UNSURE ABOUT THE MEANING OF ‘COVERED’: “//Are you/Is Person in S1// enrolled in the program now?” Or “//Are you/Is Person in S1// eligible to receive benefits now?” or “//Do you/Does Person in S1// get health care from one of these plans?”]

01 YES
 02 (Skip to B4Bc) NO
 98 (Skip to B4Bc) DK
 99 (Skip to B4Bc) REFUSED

B4Bb3 /Do you/Does Person in S1//have Medicare Part-D, prescription benefit coverage?

[AS NECESSARY: Medicare Part D is the Prescription Drug Plan that began in 2006. Enrollment is voluntary. It may be combined with supplemental medical coverage (also known as Medicare Part C). Participants may choose from multiple plans that offer different benefits.]

01 YES
 02 NO
 98 DK
 99 REFUSED

B4B_CON //If (B4B = 01) & ((S14 < 65) OR (S14a < 06)), ask B4B_CON.//

I noted that //you are /person in S1 is// //response in S14 or S14a// years old and that you are covered by Medicare, the government-funded health insurance plan for people 65 years and older or persons with certain disabilities. Is that correct or did I make a mistake?

01 (GO TO B4C) BOTH RESPONSES ARE CORRECT
 02 (GO TO B4BCAGE) AGE WAS WRONG – Above 65 Years Old
 03 (GO BACK TO B4B AND CHANGE VALUE) COVERAGE WAS WRONG
 98 (GO TO B4C) DK
 99 (GO TO B4C) REFUSED

B4Bc //If B4B = '02' AND (S14 = '065-125' OR S14a = '06') then ask://

I noted that //you are /person in S1 is// //response in S14 or S14a// years old but NOT covered by Medicare. Is that correct or did I make a mistake?

01 (Skip TO B4C) BOTH RESPONSES ARE CORRECT
 02 AGE WAS WRONG – Under 65 Years Old
 03 (reset to B4B) COVERAGE WAS WRONG
 98 (Skip TO B4C) DK
 99 (Skip TO B4C) REFUSED

B4BCAGE //If (B4Bc = "02") OR (B4B_CON = "02"), then ask B4BCAGE.//

On //your/Person in S1's// last birthday would you say that //you were/person in S1 was//.....

[READ IF NECESSARY: This question concerns just basic demographics. These questions are just to help ensure that this study's results represent everyone in the state of Ohio.]

[READ IF NECESSARY: Your best estimate is fine.]¹⁰

[INTERVIEWER READ LIST]

//overwrite data location for S14a (or else future skip patterns will reference two different ages)//

¹⁰ Changed "Best guess" to "Best estimate"; 8/28

01	18-24
02	25-34
03	35-44
04	45-54
05	55-64
06	65 or older

98 (Skip to ThankYou2) DK
99 (Skip to ThankYou2) REFUSED

B4C. //Are you/is person in S1// covered by MEDICAID, the government health care assistance program or managed health care plan that includes Healthy Families, Healthy Start, Disability Assistance¹¹

//PROGRAMMER: See Global References to determine S9’s region//

//if S9 > 175, then restore: // CareSource, Molina Healthcare, or Medicaid waiver programs?
//if S9 in Central, then restore: //CareSource, Molina Healthcare, or Medicaid waiver programs?
//if S9 in East Central, then restore: // Buckeye Community Health Plan, CareSource, Unison Health Plan, or Medicaid waiver programs?
//if S9 in NorthEast, then restore: // CareSource, WellCare, or Medicaid waiver programs?
//if S9 in NorthEast Central, then restore:// CareSource, Unison Health Plan, or Medicaid waiver programs?
//if S9 in NorthWest, then restore:// Buckeye Community Health Plan, CareSource, Paramount Advantage or Medicaid waiver programs?¹²
//if S9 in SouthEast, then restore:// CareSource, Molina Healthcare, Unison Health Plan, or Medicaid waiver programs?
//if S9 in SouthWest, then restore:// AMERIGROUP Community Care, CareSource, Molina Healthcare, or Medicaid waiver programs?
//if S9 in West Central, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, Spenddown Medicaid, and MBI WD. Medicaid waiver programs include Passport, Choices Waiver, Level One, Individual Options or IO, Ohio Home Care Waiver, and Transition Waiver.]

[IF RESPONDENT IS UNSURE ABOUT THE MEANING OF ‘COVERED’: “//Are you/Is Person in S1// enrolled in the program now?” Or “//Are you/Is Person in S1// eligible to receive benefits now?” or “//Do you/Does Person in S1// get health care from one of these plans?”]

01	YES
02	NO
98	DK
99	REFUSED

B4D. //Do you/Does Person in S1// have Military or Veterans coverage such as CHAMPUS, CHAMPUS-VA, OR TRICARE?

01	YES
02	NO

¹¹ Due to programming errors, the lists of plans were not being displayed for some regions. Adjustments were made to ensure the correct plans were displayed by region.; 8/28

¹² “Paramount Advantage” added to the Northwest Medicaid plan names; 8/26

98 DK
99 REFUSED

B4E. //Are you/Is person in S1// covered by health insurance purchased directly, that is, a private plan not related to current or past employment?

01 YES
02 NO
98 DK
99 REFUSED

//PROGRAMMER: B4F does not exist//

B4G. //Do you/Does Person in S1// have any OTHER health care coverage that I have NOT mentioned?¹³

[PROBE IF RESPONDENT MENTIONS A PROGRAM YOU ALREADY ASKED ABOUT: That sounds like a plan I asked you about before //Do you/Does person in s1// have any OTHER health care coverage that I did NOT mention earlier?]

01 YES
02 (Skip to B4CHK) NO
98 (Skip to B4CHK) DK
99 (Skip to B4CHK) REFUSED

B4G1 //if B4G = "01" ask//
What type of coverage is that?

[INTERVIEWER: UNAIDED RESPONSE. DO NOT READ LIST. UP TO 3 RESPONSES.]

[NOTE: IF RESPONDENT STATES NAME OF A SPECIFIC HEALTH PLAN PROBE "that sounds like the name of an insurance company. Can you tell me whether that insurance company provides //you/person in s1// with medical, dental, vision or some other type of insurance?"]

//MUL=3//

01 MEDICAL, HMO, or PPO
02 SUPPEMENTAL
03 DENTAL
04 VISION
05 CANCER INSURANCE
06 LONG TERM CARE OR NURSING HOME INSURANCE
07 ACCIDENT, DISABILITY, LIFE, OR ANY INSURANCE THAT PAYS CASH BENEFITS AND NOT MEDICAL EXPENSES.
08 COBRA
97 OTHER (SPECIFY)
98 DK
99 REFUSED

¹³ Capitalized "OTHER" and "NOT" for emphasis; 9/3

//PROGRAMMER: If B4G1 includes 08 then set B4A = 01 and B4Aa= 99//
 //PROGRAMMER: If the only response is 07 then set B4G = 02, Skip to B4Chk//
 //PROGRAMMER: If the only response is 08 then set B4G = 02, Skip to B4Chk//
 //Post Processing: If B4G= 02 then B4G1 = Missing//

PB4G1a //if B4G1=97 ASK, else continue//
 RECORD NON-LISTED RESPONSE:

01 //TEXT RANGE=250// RESPONSE: _____
 98 DK
 99 REFUSED

B4H: //if B4G = '01' ask//
 Who pays for most of this health insurance plan – is it //you/person in S1// or //your/his/her// family, an employer or union, a state or local government or community program, or someone else?

01 /YOU OR YOUR FAMILY/PERSON IN S1// OR FAMILY
 02 EMPLOYER OR UNION
 03 STATE, LOCAL, OR COMMUNITY PROGRAM
 04 SOMEONE ELSE
 98 DK
 99 REFUSED

B4CHK //if there is more than one response to B4A through B4G then ask://

To confirm, you said //you are/person in S1 is// covered by:

//if B4A = 01 then restore:// a health insurance plan through a current or former employer or union
 //if B4B = 01 then restore:// MEDICARE, the health insurance plan for people 65 years and older or persons with certain disabilities

//if B4C = 01 then restore:// MEDICAID, the government health care assistance program or managed health care plan

//if B4D = 01 then restore:// Military or Veterans coverage such as CHAMPUS, CHAMPUS-VA, OR TRICARE

//if B4E = 01 then restore:// health insurance purchased directly, that is not related to current or past employment

//B4F does not exist//

//if {B4G = 01 & (B4G1 ~= 98,99 OR PB4G1A ~=98,99)}, then restore:// other coverage involving //restore B4G1, B4G1a responses//

//if {B4G = 01 & (B4G1 = 98,99 OR PB4G1A =98,99)}, then restore:// some other health coverage

Is that correct?

01 YES
 02 (Reset to B4A) NO (resets to prior question)
 98 (Reset to B4A) DK (resets to prior question)
 99 (Reset to B4A) REFUSED (resets to prior question)

//Programmer: B6 does not exist//

//if code "01" in B4A , B4E, or B4G and (code " 02, 98, 99" in B4B), continue; Otherwise, Skip to B9//

B7 //if (B4A="01", B4E="01", OR B4G="01") AND (B4B="02", "98", or "99") then ask://
 Is //your/Person in S1's// primary health insurance plan family coverage, single coverage, coverage for //you/person in S1// and //you/his/her// spouse only, or some other type?

[IF RESPONDENT HAS DIFFICULTY ANSWERING BECAUSE COVERED BY MORE THAN ONE INSURANCE PLAN, READ: Tell me about //your/person in S1's// primary plan, the plan that pays the medical bills first or pays most of the medical bills. Is that plan family coverage, single coverage, coverage for //you/person in S1// and //you/his/her// spouse only, or some other type?

[IF NECESSARY, READ: Family coverage would cover both //you/person in S1// and other family members, while single coverage would cover only //you/person in S1//.]

- 01 FAMILY COVERAGE
- 02 //SELF/person in s1// AND SPOUSE ONLY, EXCLUDES CHILDREN
- 03 SINGLE COVERAGE
- 97 SOME OTHER TYPE OF ARRANGEMENT
- 98 DK
- 99 REFUSED

B.7a //if B7=97 ASK//
 How would you describe //your/ Person in S1's// primary health insurance plan?

- 01 /TEXT RESPONSE=70/_____
- 98 DK
- 99 REFUSED

B8a. How much //do you/does Person in S1// or //your/Person in S1's// family spend for health insurance premiums for this primary health insurance plan? Please include payroll deductions for premiums.

[READ IF NECESSARY: Do NOT include deductibles or copayments for services.]
 [READ IF NECESSARY: Your best estimate is fine.]¹⁴

[INTERVIEWER: Enter the dollar amount here and how often each payment is made on next screen. If necessary, you can tell respondent: "For this question, I just need the amount you pay. In the next question, I will ask you how often you make that payment, whether it is weekly, every two weeks, monthly etc.,"]

- ___ RECORD DOLLAR AMOUNT
- [00000 NONE/EMPLOYER PAYS ALL]
- [00001-99997 ENTER NUMBER IN DOLLARS]
- [99998 DON'T KNOW]
- [99999 REFUSED]

B8a2. //if B8a=00 then ask://

¹⁴ Changed "Best guess" to "Best estimate" ; 8/28

To verify, you said that you do not pay premiums for your insurance plan, not even through payroll deductions?

01 CORRECT, there is NO PREMIUM
02 INCORRECT, there IS a premium¹⁵ //PROGRAMMER: Set
B8a = 00//

B8b. //if B8a = 01 then ask://
How often is each payment of //restore B8a1// made?

[INTERVIEWER NOTE: READ ONLY IF NECESSARY.]

01	Weekly
02	Every Two Weeks
03	Monthly
04	Twice Each Month
05	Every Two Months
06	Every Quarter/Every Three Months
07	Twice a Year
08	Once a Year
97	OTHER
98	DK
99	REFUSED

B8b1. //if B8b=97 ask//
How often is each payment made?

01 //TEXT RANGE=70// RESPONSE: _____

B9A Thinking about //your/Person in S1's//current health insurance coverage, how would you rate...

B9A. //Your/Person in S1's//choice of doctors using any number from 0 to 10 where 0 is the worst insurance possible, and 10 is the best insurance possible? Please rate your CHOICE of doctors, NOT your doctors.¹⁶

00	WORST
01	
02	
03	
04	
05	
06	
07	
08	
09	

¹⁵ Changed text in response options so 01 displays "CORRECT – there is NO PREMIUM" and 02 displays "INCORRECT – there IS a premium" ; 8/26

¹⁶ Changed the wording of the question to the following: "//Your/Person in S1's//choice of doctors using any number from 0 to 10 where 0 is the worst insurance possible and 10 is the best insurance possible? Please rate your CHOICE of doctors, NOT your doctors." Previously, the part "Please rate your CHOICE of doctors, NOT your doctors" was the interviewer note.; 8/17

10 BEST
 98 DK
 99 REFUSED

B10 Do any of //your/Person in S1's// current insurance plans cover¹⁷

//Randomize order of questions B10A, B10B, B10C, B10D://

B10A Mental health services?

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]

[INTERVIEWER NOTE: For this question, accept “DON’T KNOW” response without probes.]

B10B Dental care except emergency care?

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]8/17/

[INTERVIEWER NOTE: For this question, accept “DON’T KNOW” response without probes.]

B10C. Vision services except emergency care?

[IF NECESSARY: Include eyeglasses]¹⁸

[INTERVIEWER NOTE: IF RESPONDENT UNSURE OF MEANING ASK: “Do you//person in S1// have coverage for routine vision exams or eyeglasses?”]

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]

[INTERVIEWER NOTE: For this question, accept “DON’T KNOW” response without probes.]

B10D. Prescription medications?

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]

[INTERVIEWER NOTE: For this question, accept “DON’T KNOW” response without probes.]

01 YES
 02 NO
 98 DON’T KNOW IF PLAN COVERS THIS
 99 REFUSED

B18. How long //have you/has Person in S1// been covered by //your/his/her// current primary health insurance plan?

[IF NECESSARY: Your best estimate is fine.]¹⁹

¹⁷ Added an interviewer note to each section of this question along with expanding response 98 to display “Don’t know if plan covers this”; 9/3

¹⁸ Line moved to the next line; 8/17

¹⁹ Changed “Best guess” to “Best estimate” ; 8/28

01 _____ Days {1-90} {programmer: B18days = B18}
 02 _____ Weeks {1-51} {programmer: B18days = B18 * 7}
 03 _____ Months{1-35} {programmer: B18days = B18 * 30}
 04 _____ Years {1-(s14-1)} {programmer: B18days = B18 * 365}

98 DK
 99 REFUSED

**// IF [(B18days < 365 & B18~=12 months) OR (B18 = 98, 99)], ask B19.
 Else, skip to B25.//**

B19. // IF [(B18days < 365 & B18~=12 months) OR (B18 = 98, 99)], ask B19.//

Before //you/person in S1// became covered by //your/his/her// current primary plan, //were you/was Person in S1//covered by any other health insurance plan in the PAST 12 MONTHS?

01 YES
 02 **(Skip to B25)** NO
 98 **(Skip to B25)** DK
 99 **(Skip to B25)** REFUSED

B20. //if code "01" in B19 AND B4C = '02', '98', OR '99' then ask://

Just prior to //your/Person in S1's// current health insurance coverage //were you/ was Person in S1// covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spenddown Medicaid. Medicaid waiver programs include Passport, Choices Waiver, Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

01 YES
 02 **(Skip to B21)** NO
 98 **(Skip to B21)** DK
 99 **(Skip to B21)** REFUSED

B20a //if B20 = "01" then ask://

Why do you no longer have this coverage? (DO NOT READ LIST)
 [INTERVIEWER: IF RESPONSE Is "No longer qualify", "Do not need anymore",
 ASK WHY.] [IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why
 that means you no longer have coverage?"] [When R finishes, ask "Are there
 any other reasons?" ASK UNTIL RESPONDENT SAYS "No" or "DK".]²⁰

//MUL = 5//

01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays
 more money)
 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company
 changed to new plan etc.)²¹

²⁰ Moved interviewer notes to fit on one screen; 8/17

04 No longer qualify – NO LONGER DISABLED OR DO NOT QUALIFY AS
DISABLED.

03 No longer qualify – DO NOT RECEIVE WELFARE/CASH
ASSISTANCE/ADC/TANF

10 No longer qualify – OTHER REASON (expiration of benefits, change in age,
change in marital status, pregnancy status, custody, living arrangements)

05 No longer qualify – NOT SURE WHY

08 Do not need anymore - IN GOOD HEALTH

06 Do not need anymore

11 Paperwork delay or problems

09 Waiting to become eligible for coverage

07 Do not want to go through application process again

97 Other (Specify) /Text Range 270/ : _____

98 Don't know

99 Refused

// ALL GO TO B25.//

B21. //if B4C = '01' OR B20 in ('02, 98, 99') then ask://
Just prior to //your/Person in S1's// current health insurance coverage, //were you/was Person in S1// covered
by a health insurance plan obtained through an employer or union?

01 (Skip to B25) YES

02 NO

98 DK

99 REFUSED

B22 //If (B21 = 02,98 or 99), then ask B22.//
//Were you/was Person in S1// covered by any other insurance that //you/Person in S1// or //your/his/her//
family paid for completely?

01 YES

02 NO

98 DK

99 REFUSED

B25. //if B19 = '02' then autocode B25 = '01' and skip to B27//
// IF [(B18days < 365 & B18~=12 months) OR (B18 = 98, 99)], then ask://
IN THE PAST 12 MONTHS, Was there any time that //you/Person in S1// did NOT have health insurance?

01 YES

02 (Skip to B29b) NO

²¹ Changed response option 02 to "02 OBTAINED OTHER COVERAGE (such as new/better job with benefits,
company changed to new plan etc.)"; 8/26

- B29bA Did //you/Person in S1// have any major medical costs?
[IF NECESSARY: Including co-pays]
[INTERVIEWER: RESPONDENT SHOULD DEFINE WHAT THEY CONSIDER A “MAJOR MEDICAL COST”]
- B29bB Did //you/Person in S1// delay or avoid getting care that //you/person in s1// felt //you/person in s1// needed but could NOT afford?
[IF NECESSARY: include delays because of health plan approval]
[IF NECESSARY: “Care” means any health care, including prescription drugs.]
- B29bC Did //you/Person in S1// have any problems getting the care //you/Person in S1// needed?
[IF NECESSARY: include delays because of health plan approval]
[IF NECESSARY: “Care” means any health care, including prescription drugs.]

01	YES
02	NO
98	DK
99	REFUSED

SECTION C: CURRENTLY UNINSURED ADULT

//Programmer: Turn of prior timers. Please start timer for Section C. //

C1: **//If (A1 = "01") or (A1A = "01") then skip to PreD30//**
//If A1A = "02", "98" OR "99", then ask://
 DURING THE PAST 12 MONTHS, at any time //Were you/Was Person in S1// covered by any type of health insurance plan?

01		YES
02	(skip to C26)	NO
98	(skip to C26)	DK
99	(skip to C26)	REFUSED

C2. **//If C1 = "01" then ask://**
 When was the last time //you/Person in S1// had health insurance coverage?

[IF NECESSARY, READ: Your best estimate is fine.]²³

01	_____ Days	{ 1-364 } {programmer: C2days = C2 }
02	_____ Weeks	{ 1-51 } {programmer: C2days = C2 * 7 }
03	_____ Months	{ 1-12 } {programmer: C2days = C2 * 30 }
98		DK
99		REFUSED

C3. The last time //you/person in S1// had health insurance //were you/was Person in S1// covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spenddown Medicaid. Medicaid waiver programs include Passport, Choices Waiver, Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

01		YES
02	(Skip to C4)	NO
98	(Skip to C4)	DK
99	(Skip to C4)	REFUSED

C3a Why do you no longer have this coverage? (DO NOT READ LIST)
 [INTERVIEWER: IF RESPONSE IS "No longer qualify", "Do not need anymore", ASK WHY.] [IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why that means you no longer have coverage?"] [When R finishes, ask "Are there any other reasons?" ASK UNTIL RESPONDENT SAYS "No" or "DK".]²⁴

//mul 5//

01	No longer qualify – more money)	EARN TOO MUCH MONEY (such as new job that pays
----	---------------------------------	--

²³ Changed "Best guess" to "Best estimate"; 8/28

²⁴ Moved interviewer notes to fit on one screen; 8/17

02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company
 changed to new plan etc.)²⁵
 04 No longer qualify – NO LONGER DISABLED OR DO NOT QUALIFY AS
 DISABLED.
 03 No longer qualify – DO NOT RECEIVE WELFARE/CASH
 ASSISTANCE/ADC/TANF
 10 No longer qualify – OTHER REASON (expiration of benefits, change in age,
 change in marital status, pregnancy status, custody, living arrangements)
 05 No longer qualify – NOT SURE WHY

08 Do not need anymore - IN GOOD HEALTH
 06 Do not need anymore

11 Paperwork delay or problems
 09 Waiting to become eligible for coverage

07 Do not want to go through application process again

97 Other (Specify) /Text Range 270/ : _____
 98 Don't know
 99 Refused

C4 //if code “02, 98, 99” in C3 then ask://

The last time //you/person in s1// had health insurance, //were you/was Person in S1//covered by a plan
 obtained through an employer or union?

01 (Skip to C6) YES
 02 NO

98 DK
 99 REFUSED

C5 //Were you/was Person in S1// covered by any other insurance that //you/Person in S1// or //your/his/her//
 family paid for completely?

01 YES
 02 NO

98 DK
 99 REFUSED

C6. DURING THE PAST 12 MONTHS, how long //were you/was Person in S1// without health insurance
 coverage?

[IF NECESSARY: Your best estimate is fine.]²⁶

01 _____ Days {1-364} {programmer: C6days = C6 }
 02 _____ Weeks {1-51} {programmer: C6days = C6 * 7}
 03 _____ Months {1-12} {programmer: C6days = C6 * 30}

²⁵ Changed response option 02 to “02 OBTAINED OTHER COVERAGE (such as new/better job with benefits,
 company changed to new plan etc.)”; 8/17

²⁶ Changed “Best guess” to “Best estimate”; 8/28

98 DK
99 REFUSED

//Programmer: Questions C7 through C25 do not exist//

C26. **//If C1 = "02, 98, 99", then ask://**

When was the last time //you/Person in S1// had health insurance coverage?

[IF NECESSARY: Your best estimate is fine.]²⁷

00 Never had health insurance²⁸
03 _____ Months {12-35} {programmer: C26days = C26 * 30}
04 _____ Years {1-(s14-1)} {programmer: C26days = C26 * 365}

98 DK
99 REFUSED

²⁷ Changed "Best guess" to "Best estimate"; 8/28

²⁸ Changed 00 to never had insurance; 8/8

PC27 DURING THE PAST 12 MONTHS, what are the reasons //you were/Person in S1 was// uninsured?

[DO NOT READ CHOICES]

- 01 GIVEN REASONS
- 98 DK
- 99 REFUSED

NC27

[INTERVIEWER: IF RESPONSE IS ONLY "COST", ASK R WHY COST WAS HIGH. SELECT "01 COST TOO HIGH" AND ANY OTHER REASONS R GIVES. IF RESPONSE IS "NOT ELIGIBLE/ NOT QUALIFIED/CUT OFF/LOST COVERAGE", ASK R WHY. RECORD ALL REASONS. IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why that means you were uninsured during the past 12 months?"] WHEN R FINISHES, ASK "Are there any other reasons?" ASK UNTIL R SAYS "NO/DK"]

[MUL = 13]

[DO NOT READ CHOICES]

- 01 COST TOO HIGH / TOO EXPENSIVE/COULDN'T AFFORD
- 02 EMPLOYER DIDN'T PROVIDE COVERAGE / NOT ELIGIBLE FOR EMPLOYER'S COVERAGE / PART-TIME WORKER
- 03 NOT WORKING OR FAMILY MEMBER NOT WORKING OR LOST JOB
- 04 CHANGE IN (OWN/PERSON IN S1.S) OR FAMILY MEMBER'S JOB
- 05 CHANGE IN AGE, MARITAL, OR STUDENT STATUS
- 06 TURNED DOWN BY INSURANCE COMPANY OR LOST COVERAGE FOR HEALTH REASONS
- 07 MAKE TOO MUCH MONEY/LOST OR TOLD INELIGIBLE FOR MEDICAID, HEALTHY FAMILIES, MEDICAL CARD, OR OTHER PUBLIC ASSISTANCE
- 08 DON'T NEED IT / IN GOOD HEALTH
- 09 WAITING TO BECOME ELIGIBLE FOR COVERAGE
- 10 LOST COVERAGE, OTHER REASONS OR REASONS NOT SPECIFIED
- 11 SELF EMPLOYED/ NOT ELIGIBLE/PART-TIME (UNSPECIFIED)
- 12 DIDN'T WANT/ BY CHOICE / NEVER APPLIED/JUST HAVEN'T
- 97 (GO TO NC27OTH) OTHER
- 98 DK
- 99 REFUSED

NC27OTH //If NC27 = 97, ASK NC27OTH//

RECORD OTHER RESPONSE.

//TEXT RANGE=270// RESPONSE: _____

C28. DURING THE PAST 12 MONTHS, did any of the following things happen to //you/Person in S1// while //you were/Person in S1 was//uninsured?

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

//Randomize order of questions C28A, C28B, and C28C://

C28A. Did //you/Person in S1//have any major medical costs while //you were/ Person in S1 was// uninsured?

[INTERVIEWER: RESPONDENT SHOULD DEFINE WHAT THEY CONSIDER A “MAJOR MEDICAL COST”]

C28B. Did //you/Person in S1//delay or avoid getting care because //you were/ Person in S1 was// uninsured?
[IF NECESSARY: “Care” means any health care, including prescription drugs.]

C28C. Did //you/Person in S1// have any problems getting the care //you/Person in S1// needed //you were/
Person in S1 was// uninsured?
[IF NECESSARY: “Care” means any health care, including prescription drugs.]

01	YES
02	NO
98	DK
99	REFUSED

SECTION D: ADULT HEALTH STATUS & CARE GIVING

PRED30//Programmer: Turn of prior timers. Please start timer for Section D. //

Now I would like to ask about //your//person in s1's// health.

D30 In general, would you say //your/Person in S1's// health is excellent, very good, good, fair, or poor?

01	EXCELLENT
02	VERY GOOD
03	GOOD
04	FAIR
05	POOR
98	DK
99	REFUSED

D30a1 http://www.cdc.gov/OralHealth/publications/library/pdf/jop2007_supplement.pdf

//if D30 = 04 OR 05 then ASK://

Overall, how would you rate the health of your teeth and gums? Excellent, very good, good, fair, or poor?

01	EXCELLENT
02	VERY GOOD
03	GOOD
04	FAIR
05	POOR
98	DK
99	REFUSED

D30a2. http://www.cdc.gov/nchs/data/nhanes/nhanes_05_06/sp_viq_d.pdf (NOTE SCALE)

//if D30 = 04 OR 05 then ask://

At the present time, would you say {your/SP's} eyesight, with glasses or contact lenses if {you/s/he} wear them, is excellent, good, fair, poor, or very poor?

01	EXCELLENT
02	GOOD
03	FAIR
04	POOR
05	VERY POOR
98	DK
99	REFUSED

D30h. Now thinking about //your/Person in S1's// physical health, which includes physical illness and injury, how many days DURING THE PAST 30 DAYS was //your/Person in S1's// physical health not good?

[INTERVIEWER NOTE: If respondent says "NO", probe for the exact number of days]²⁹

²⁹ Interviewer note added; 8/26

01 _____ # OF DAYS/30
 98 DK
 99 REFUSED

D30i. Now, thinking about //your/Person in S1's//mental health, which includes stress, depression, and problems with emotions or substance abuse, for how many days DURING THE PAST 30 DAYS did //your/Person in S1's//mental health condition or emotional problem keep //you/person in S1's//from doing //your//person in S1's/work or other usual activities?

[INTERVIEWER NOTE: If respondent says "NO", probe for the exact number of days]³⁰

[INTERVIEWER NOTE: If respondent answers 'Don't Know' code as such. Many people do not know this information]³¹

01 _____ # OF DAYS/30
 98 DK
 99 REFUSED

D31. //If (S14 < 55 or S14a=01-04) and S15= '02' or '99' ask://
 Do you/Does Person in S1// currently need or take prescription medicine other than vitamins or birth control pills?

If S15 ='01' or (S15='02' and (S14 >=55 or S14a=05 or 06)) ask:

// Do you/Does Person in S1// currently need or take prescription medicine other than vitamins?

01 YES
 02 (Skip to D31c) NO
 98 (Skip to D31c) DK
 99 (Skip to D31c) REFUSED

D31a Is this because of ANY medical, mental health or other health condition?

01 YES
 02 (Skip to D31c) NO
 98 (Skip to D31c) DK
 99 (Skip to D31c) REFUSED

D31b. Is this a condition that has lasted or is expected to last for *at least* 12 months

01 YES
 02 NO
 98 DK
 99 REFUSED

³⁰ Interviewer note added; 8/26

³¹ Interviewer note added; 8/28

D31c. //Do you/does Person in S1// need or use medical care, mental health or other health services on a regular basis?

01		YES
02	(Skip to D31f)	NO
98	(Skip to D31f)	DK
99	(Skip to D31f)	REFUSED

D31d. Is this because of ANY medical, mental health or other health condition?

01		YES
02	(Skip to D31f)	NO
98	(Skip to D31f)	DK
99	(Skip to D31f)	REFUSED

D31e. Is this a condition that has lasted or is expected to last for *at least* 12 months?

01		YES
02		NO
98		DK
99		REFUSED

D31f. //Do you/does Person in S1//have difficulty doing or need assistance to do day-to-day activities?

[IF NECESSARY: For example: work, go to school, do housework, socialize, cook, do paperwork]³²

01		YES
02	(Skip to D31i)	NO
98	(Skip to D31i)	DK
99	(Skip to D31i)	REFUSED

D31g. Is this because of ANY medical, mental health or other health condition?

01		YES
02	(Skip to D31i)	NO
98	(Skip to D31i)	DK
99	(Skip to D31i)	REFUSED

D31h. Is this a condition that has lasted or is expected to last for *at least* 12 months?

³² Interviewer note added; 8/8

01
02

98
99

YES
NO

DK
REFUSED

D31i. //Do you/does Person in S1// need or get special therapy?

[IF NEEDED: Special therapy includes physical, occupational, or speech therapy. Special therapy does NOT include psychological therapy or medical therapies such as chemotherapy.]

01 YES
02 (Skip to D31L) NO
98 (Skip to D31L) DK
99 (Skip to D31L) REFUSED

D31j. Is this because of ANY medical, mental health or other health condition?

01 YES
02 (Skip to D31L) NO
98 (Skip to D31L) DK
99 (Skip to D31L) REFUSED

D31k. Is this a condition that has lasted or is expected to last for *at least* 12 months?

01 YES
02 NO
98 DK
99 REFUSED

D31l. //Do you/does Person in S1// need or get treatment or counseling for any kind of mental health, substance abuse or emotional problem?

01 YES
02 (Skip to D32) NO
98 (Skip to D32) DK
99 (Skip to D32) REFUSED

D31m Has this problem lasted or is it expected to last for *at least* 12 months?

01 YES
02 NO
98 DK
99 REFUSED

D32 //If code '01' in D31b, D31e, D31h, D31k or D31m continue: Otherwise, skip to D41//
//Do you /Does Person in S1// currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEM(S) you just told me about?

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

//RANDOMLY ROTATE A-F//

- D32A Assistance with personal care, such as bathing, dressing, toileting, or feeding?
- D32B Domestic assistance, such as shopping, laundry, housekeeping, cooking, or transportation?
- D32C Help with household maintenance, such as painting or yard work?
- D32D Social or emotional support, such as companionship, recreation, and socialization?
- D32E Coordinating health care, such as making appointments for doctor's visits or therapies?
- D32F Assistance managing financial affairs, such as managing //your/person in S1's// checkbook or legal affairs?
- D32G Other kinds of assistance that I have NOT mentioned?

- 01 YES
- 02 NO

- 98 DK
- 99 REFUSED

PD32G1 //if D32G=01 then ask: //

What other kind of assistance //do you/does person in S1// currently need, BECAUSE OF THE HEALTH PROBLEM(S) that you told me about?

- 01 ENTER RESPONSE
- 98 DK
- 99 REFUSED

ND32G1 What other kind of assistance //do you/does person in S1// currently need, BECAUSE OF THE HEALTH PROBLEM(S) that you told me about? (DO NOT READ LIST)

[INTERVIEWER NOTE: IF UNCLEAR OF HOW SPECIFIED ASSISTANCE RELATES TO HEALTH PROBLEM, PROBE THE RESPONDENT.]

[MUL = 2]

- 01 WALKING, TRANSFERRING TO A WHEELCHAIR, OR OTHER MOVEMENT
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

//If ND32G1=97, then ask ND32G10. Else, skip to D34.//

ND32G10 //If ND32G1=97, then ask ND32G10. //

- 01 //TEXT RANGE=270// RESPONSE: _____

D34. //Ask if code '01' for any of D32A-D32G, otherwise skip to D41://

How many hours of assistance //do you/does person in S1// currently require on average for the types of assistance that were just mentioned?

[IF NECESSARY: Your best estimate is fine.]³³

³³ Changed "Best guess" to "Best estimate"; 8/28

[IF NECESSARY: I am referring to //insert text from D32A-G for each one coded as 01.//]

01	_____	Hours per Day	{1-24}
02	_____	Hours per Week	{1-168}
03	_____	Hours per Month	{1-720}
97		OTHER	
98		DK	
99		REFUSED	

D35 / If D34=97 then ask: /

INTERVIEWER RECORD THE TIME PERIOD RESPONDENT NEEDS THESE HOURS OF ASSISTANCE

01 //TEXT RANGE=70// RESPONSE: _____

D41. /Have you/Has person in S1// ever been told by a doctor or any other health professional that //you/he/she// had high blood pressure or hypertension?

[INTERVIEWER NOTE: IF RESPONDENT SAYS 'Boarderline', "Pre-Hypertension" or "High Normal" THEN CODE AS '02']

[INTERVIEWER NOTE: Only High Blood Pressure in its chronic form that requires lifelong medical treatment should be counted.]³⁴

01	YES
02	NO
98	DK
99	REFUSED

D41a Has a doctor, nurse or other health professional ever told (you / person in S1int) that (you / person in S1int) had any of the following? For each, tell me "Yes", "No" or you're not sure:

A heart attack, also called a myocardial infarction?

[MYOCARDIAL: mahy-uh-kahr-dee-uh-1]

[INFARCTION: in-fahrk-shuh n]

01	YES
02	NO
98	DK
99	REFUSED

D41b Coronary heart disease also known as coronary ARTERY disease, congestive heart disease, angina (an-jy-na)?³⁵

³⁴ Interviewer note added; 8/28

³⁵ Fixed the extra "d" in "disease"; 8/12

[ARTERY : ARTUREE]
[CONGESTIVE : KUN-JES- TIV]
[CORONARY : KAWR-E-NEREE]

01 YES
02 NO

98 DK
99 REFUSED

D41c A stroke?

01 YES
02 NO

98 DK
99 REFUSED

D41d Congestive heart failure?

01 YES
02 NO

98 DK
99 REFUSED

D43. //Have you/Has person in S1// ever been told by a doctor or any other health professional that //you/he// had diabetes or sugar diabetes?

01 YES
02 (Skip to D45) NO
03 [VOLUNTEERED:] BORDERLINE

98 DK
99 REFUSED

D43a //Have you/Has person in S1// ever been told by a doctor or any other health professional that //you/he/she// had TYPE 1 CHILD ONSET DIABETES or TYPE 2 ADULT ONSET, DIABETES?
[INTERVIEWER NOTE: PROBE FOR TYPE, AND IF RESPONDENT SAYS 'BORDERLINE' CODE A8/S '03']

//Display response option 97, only if S15 = 02, 99.//

97 (Skip to D45) [VOLUNTEERED:] YES, "GESTATIONAL" OR "ONLY WHEN PREGNANT" MENTIONED³⁶

01 YES - TYPE I (JUVENILE)

³⁶ "Gestational" response moved to the top; 8/8

02		YES - TYPE II (ADULT ONSET)
03		[VOLUNTEERED:] BORDERLINE DIAGNOSIS ONLY
04	(Skip to D45)	NO, NEVER DIAGNOSED WITH DIABETES

98	(Skip to D45)	DK
99	(Skip to D45)	REFUSED

D43b. //If (s15 = 02) then ask://

//Was your/Was person in S1's// DIABETES only during a time associated with a pregnancy?
 [INTERVIEWER: PROBE FOR PROPER CODE]

01	(Skip to D45)	YES ONLY WHEN PREGNANT
02		NO

98	(Skip to D45)	DK
99	(Skip to D45)	REFUSED

D44. //Is your/Is person on S1's// blood sugar or glucose level, which affects diabetes, USUALLY under control or where a physician wants it, even if medication is required Always, Usually, Sometimes, Rarely, or Never?

01		ALWAYS
02		USUALLY
03		SOMETIMES
04		RARELY
05		NEVER

98		DK
99		REFUSED

D45. Have //you/Person in S1// smoked at least 100 cigarettes in your entire life?

[NOTE: 5 packs contain 100 cigarettes]

01		YES
02	(Skip to D45b)	NO
98		DK
99		REFUSED

D45a. //Do you/Does Person in S1// smoke cigarettes every day, some days, or not at all?³⁷

01		EVERY DAY
02		SOME DAYS
03		NOT AT ALL

98		DK/NOT SURE
99		REFUSED ³⁸

³⁷ Deleted skip "Skip to D46" for responses 03 and 99 in D45a, so that everyone gets to D45b; 8/17

³⁸ Skips in D45a removed; 8/11

D45b. Which statement best describes the rules about smoking inside your home? Do not include decks, garages, or porches. Would you say Smoking is NOT allowed anywhere inside your home, or Smoking is allowed in SOME places or at SOME times, or Smoking is allowed anywhere inside your home?

(Note: The data from this question is different for 1654 respondents as of 8/11. Now everyone is getting to this question instead of just smokers)

01	NOT ALLOWED ANYWHERE INSIDE HOME
02	SOME PLACES OR AT SOME TIMES
03	ALLOWED ANYWHERE
98	DK
99	REFUSED

D46. DURING THE PAST 30 DAYS, on how many days did //you/Person in S1// have at least one drink of alcoholic beverage such as beer, wine, a malt beverage or liquor?

[INTERVIEWER NOTE: If respondent says "NO", probe for the exact number of days]³⁹

01	_____ # DRINKING DAYS {RANGE 0 – 30}
98	DK
99	REFUSED

D46a. **//If D46 > 0 then ask://**
 DURING THE PAST 30 DAYS, considering all types of alcoholic beverages, on how many days, if any, did //you/Person in S1// have
//If S15 = 01 then restore:// 5 or more drinks on an occasion?
//If S15 = 02 then restore:// 4 or more drinks on an occasion?

[INTERVIEWER NOTE: If respondent says "NO", probe for the exact number of days]⁴⁰

01	_____ # DRINKING DAYS {RANGE 0 – D46, MAX=30}
98	DK
99	REFUSED

D47. //Have you/Has Person in S1// ever been told by a doctor that //you/he/she// had CANCER of any type?

01	YES
02	(Skip to D30a) NO
98	(Skip to D30a) DK
99	(Skip to D30a) REFUSED

³⁹ Interviewer note added; 8/26

⁴⁰ Interviewer note added; 8/26

D47a. Are //you/is Person in S1// CURRENTLY being treated for cancer, were //you/he/she// treated in the past, or were //you/they// never treated?

- 01 CURRENTLY UNDER CANCER TREATMENT
- 02 PAST CANCER TREATMENT

- 97 **(Skip to D30a)** NEVER TREATED

- 98 **(Skip to D30a)** DK
- 99 **(Skip to D30a)** REFUSED

D47b. //If D47a = '01' then restore:// During //your/Person in S1's// cancer treatment //is //your/his/her//pain or discomfort under control, even if pain medication is required... [READ]

//If D47a = '02' then restore:// During //your/Person in S1's// cancer treatment //was //your/his/her//pain or discomfort under control, even if pain medication was required Always, Usually, Sometimes, Rarely, or Never?

- 01 ALWAYS
- 02 USUALLY
- 03 SOMETIMES
- 04 RARELY
- 05 NEVER

- 97 [DO NOT READ] NEVER TREATED

- 98 DK
- 99 REFUSED

D30a. About how much //do you/does Person in S1// weigh without shoes?
[Note: If respondent answers in metric units enter where indicated. Round fractions UP]

- 01 _____ POUNDS {D30aLBS = D30a01 }
- 02 _____ KILOGRAMS {D30aLBS = D30a02 * 2.2 }

- 998 DK
- 999 REFUSED

//Upper limit for pounds is 700lbs, and upper limit for kg is 318kg.//⁴¹

D30b. About how tall //are you/is Person in S1// without shoes?

[NOTE: If respondent answers in metric units, enter where indicated. Round fractions UP]

[EXAMPLES: 6 feet 2 = 602, 6 feet = 600]

- 01 _____ FEET
- 02 _____ INCHES {D30binch = D30b01A * 12 + D30b01B }
- 03 _____ CENTIMETERS {D30binch = round(D30b * 0.394)}

- 998 DK
- 999 REFUSED

⁴¹ Upper limit for pounds is 700lbs, and upper limit for kg is 318kg ; 10/06

SECTION E: UTILIZATION AND QUALITY OF ADULT HEALTH CARE SERVICES

PREE59 //Programmer: Turn of prior timers. Please start timer for Section E. //

I would now like to ask about //your/Person in S1's// use of health care services.

E59. NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since //you/person in S1// last saw a doctor or other health care professional about //your/his or her// own health?

[READ IF NECESSARY: Your best estimate is fine. How long ago was //your/person in S1's// last visit to a doctor or health professional.]⁴²

00		NEVER
01	_____ Days	{1-90} {programmer: E59days = E59}
02	_____ Weeks	{1-51} {programmer: E59days = E59 * 7}
03	_____ Months	{1-35} {programmer: E59days = E59 * 30}
04	_____ Years	{1-(s14-1)} {programmer: E59days = E59 * 365}
98		DK
99		REFUSED

E59.1 //if (E59=00) then ask://

I want to make sure I have this right, //you have/person in S1has// never visited a doctor or any other health care professional in their offices for a routine check-up, physical, or for any reason?

01	(SKIP to E60)	NEVER BEEN TO A DOCTOR/HEALTH CARE PROFESSIONAL IN THEIR OFFICES
02	(SKIP to E59A)	BEEN TO A DOCTOR/HEALTH CARE PROFESSIONAL BUT NOT IN AN OFFICE
03	(RESET to E59)	INCORRECT RESPONSE – BACK UP TO PREVIOUS QUESTION
98	(SKIP to E60)	DK
99	(SKIP to E60)	REFUSED

E59A. NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since you/person in S1// last visited a doctor for a ROUTINE CHECK-UP? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. ⁴³⁴⁴

[READ IF NECESSARY: Your best estimate is fine.]⁴⁵

00		NEVER {programmer: E59Adays = 0}
01	_____ Days	{1-90} {programmer: E59Adays = E59A}
02	_____ Weeks	{1-51} {programmer: E59Adays = E59A * 7}
03	_____ Months	{1-35} {programmer: E59Adays = E59A * 30}
04	_____ Years	{1-(s14-1)} {programmer: E59Adays = E59A*365}

⁴² Changed “Best guess” to “Best estimate”; 8/28

⁴³ Added specifications on what a routine check-up is; 8/11

⁴⁴ Moved “routine check up” after the “?”, instead of the next line; 8/17

⁴⁵ Changed “Best guess” to “Best estimate”; 8/28

98 DK
 99 REFUSED

E59_CON //Ask E59_CON, if (E59Adays < E59DAYS) & (E59Adays ~= 0, 98 or 99) & (E59DAYS ~= 0, 98 or 99).

Let me see if I have this right, earlier I thought you said that, excluding overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, the last time you saw a doctor or other health care professional about //your/his or her// own health was //enter response from E59// ago. However, the last time you had your routine healthcare check up was // enter response from E59A//. Is this correct, or did I make a mistake?

01 Change response to E59 (last time you saw a doctor or other healthcareprofessional)
 02 Change response to E59A (last time you saw a doctor for a routine checkup)
 03 NO CHANGES
 99 REFUSED

E60. DURING THE PAST 12 MONTHS, how many times //were you/was Person in S1// admitted to a hospital for a stay that was OVERNIGHT or longer?

[IF NECESSARY: I am asking you about the number of stays that were overnight or longer, NOT the number of nights you stayed in the hospital. For example, if you have only been admitted to the hospital ONCE for a 5 night long stay, the correct response would be “1 time”.]

[IF NECESSARY: Your best estimate is fine.]⁴⁶

00 None⁴⁷
 01-12 (Code actual value)
 13 More than 12
 98 DK
 99 REFUSED

E62. DURING THE PAST 12 MONTHS, how many times //were you/was Person in S1// a patient in a hospital EMERGENCY room? Include EMERGENCY room visits where //you were/Person in S1 was// admitted to the hospital.⁴⁸

[IF NECESSARY: Your best estimate is fine.]⁴⁹

00 None⁵⁰
 01-20 (Code actual value)
 21 More than 20

⁴⁶ Changed “Best guess” to “Best estimate”; 8/28

⁴⁷ Changed 00 equal to “no”; 8/8

⁴⁸ Capitalizing references from “emergency” to “EMERGENCY”; 8/26

⁴⁹ Changed “Best guess” to “Best estimate”; 8/28

⁵⁰ Changed 00 to equal “no”; 8/8

98 DK
 99 REFUSED⁵¹

E62b. DURING THE PAST 12 MONTHS, how many times //were you/was Person in S1// a patient in an urgent care center?

[IF NECESSARY: Your best estimate is fine.]⁵²

[IF NECESSARY: Urgent care centers provide medical care outside of a hospital emergency room without a scheduled appointment.]⁵³⁵⁴

00 None
 01-20 (Code actual value)
 21 More than 20

98 DK
 99 REFUSED

D31eye1 About how long has it been, if ever, since //you/person in S1// last had //your/person in S1// eyes examined by any doctor or eye care providers?

[IF NECESSARY: Your best estimate is fine.] – (CATI CONVERT TO DAYS!)⁵⁵

00 _____ NEVER {programmer: D31eye1days = 0}
 01 _____ Days {1-90} {programmer: D31eye1days = D31}
 02 _____ Weeks {1-51} {programmer: D31eye1days = D31 * 7}
 03 _____ Months {1-35} {programmer: D31eye1days = D31 * 30}
 04 _____ Years {1-(s14-1)} {programmer: D31eye1days=D31*365}

98 DK
 99 REFUSED

D31eye2 //If (D31eye1days > 730), then ask D31eye2. Else, go to E63./

What is the MAIN reason //you have/person in S1 had// not visited an eye care professional in the past 24 months?

[DO NOT READ OPTIONS]

01 NO PROBLEMS WITH EYES (NO REASON TO GO)
 02 HAVE NOT THOUGHT OF IT
 03 OTHER PRIORITIES
 04 NOT SERIOUS ENOUGH TO REQUIRE HELP
 05 COST/CAN'T AFFORD CARE
 06 NO INSURANCE
 07 NO REGULAR PROVIDER
 09 NO CONVENIENT APPOINTMENTS AVAILABLE

⁵¹ Removed “Skip to E63” for responses 00, 98, and 99; 8/27

⁵² Changed “Best guess” to “Best estimate”; 8/28

⁵³ Question changed to be similar to Child MEDICARE and MEDICAID questions; 8/8

⁵⁴ Definition of “Urgent Care Center” added; 9/3

⁵⁵ Changed “Best guess” to “Best estimate”; 8/28

10 CAN'T GET TO THE OFFICE/CLINIC (TOO FAR AWAY, NO
TRANSPORTATION)
11 CHILD/ADULT CARE PROBLEM
12 FEAR

16 DON'T THINK IT CAN BE HELPED BY A HEALTH PROFESSIONAL
17 OTHER

98 DK
99 REFUSED

//If D31eye2 = 17, ask D31eye2o. Else, go to E63.//

D31eye2o **//if D31eye2 =17 ask://**

What is the MAIN reason //you have/person in S1 had// not visited an eye care professional in the past 24 months?

[INTERVIEWER NOTE: Please code probe for ONE primary reason.]

01 //TEXT RANGE=70// RESPONSE: _____

98 DK
99 REFUSED

E63. About how long has it been since //you/person in S1// last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.

[IF NECESSARY: Your best estimate is fine. How long ago was //your/person in S1's// last dental visit.⁵⁶

00 NEVER {programmer: E63days = 0}
01 _____ Days {1-90} {programmer: E63days = E63}
02 _____ Weeks {1-51} {programmer: E63days = E63 * 7}
03 _____ Months {1-35} {programmer: E63days = E63 * 30}
04 _____ Years {1-(s14-1)} {programmer: E63days = E63 * 365}

98 DK
99 REFUSED

E64. **//If (0<E59days<366) OR (0<E59Adays<366) OR (code "01-13" in E60) OR (code '01-21' in E62b) OR (0< D31eye1days <366), then ask E64; Otherwise, skip to note in E65.//**

How would you rate the overall quality of ALL of the HEALTH care that //you/person in S1// received DURING THE PAST 12 MONTHS, using any number from 0 to 10 where 0 is the worst HEALTH care possible, and 10 is the best HEALTH care possible:

[IF NECESSARY: dental care is included]

00 WORST HEALTH CARE POSSIBLE
01
02
03
04

⁵⁶ Changed "Best guess" to "Best estimate"; 8/28

05	
06	
07	
08	
09	
10	BEST HEALTH CARE POSSIBLE
98	DK
99	REFUSED

E65. //If (S15 = "02") AND ((S14 in "018-044") OR (S14a = 01,02 or 03)), then ask E65. Else, skip to F67. ://
 During the past 12 months, //were you/was Person in S1// pregnant at any time?

01		YES
02	(Skip to F67)	NO
98	(Skip to F67)	DK
99	(Skip to F67)	REFUSED

E65a. //If E65 = 01 then ask://
 Are //you/Person in S1// CURRENTLY pregnant?

01		YES
02		NO
98	(Skip to F67)	DK
99	(Skip to F67)	REFUSED

E65b //If (E65a = '01') then ask://
 //Are you //is Person in S1// receiving ANY prenatal care?

01	(Skip to E65c)	YES
02	(Skip to F67)	NO
98	(Skip to F67)	DK
99	(Skip to F67)	REFUSED

E65b_1 //If (E65a = '02') then ask://
 Did (you / person in S1) receive any prenatal care for your most recent pregnancy in the past 12 months?

01	(Skip to E65c)	YES
02	(Skip to F67)	NO
98	(Skip to F67)	DK
99	(Skip to F67)	REFUSED

E65c //If (E65b = '01') or (E65b_1 = '01'), then ask://

How many weeks or months pregnant //were you //was Person in S1// in the past 12 months, when //you/she// had //your/her// first visit for prenatal care? Do not count a visit that was only for a pregnancy test or only for WIC, the Special Supplemental Nutrition Program for Women, Infants, and Children. If //you/she// did not have any prenatal care, please tell me.

02 _____ Weeks {1-38} {programmer: E65Cdays = E65C * 7}
03 _____ Months {1-9} {programmer: E65Cdays = E65C * 30}

997 HAD NO PRENATAL CARE IN PAST 12 MONTHS WHEN
PREGNANT (INTERVIEWER VERIFY BY PROBING E.G., "SO NO
PRENATAL CARE WAS RECEIVED IN THE PAST 12 MONTHS?")

998 DK (PROBE TO AVOID IF POSSIBLE)

999 REFUSED

SECTION F: ACCESS TO CARE AND UNMET NEEDS OF ADULT

F67. //Programmer: Turn of prior timers. Please start timer for Section F. //
Is there ONE place that //you USUALLY go /Person in S1 USUALLY goes// to when //you are/Person in S1 is// sick or //you need / person in S1 needs// advice about //your/his or her// health?".⁵⁷

[INTERVIEWER NOTE: This question asks IF the respondent has a usual provider, NOT if they have seen the provider recently (this includes those who have never seen their usual provider)]

01 (Skip to F67A) YES
02 NO
03 (Skip to F67A) YES, VOLUNTEERED THAT THERE IS MORE THAN ONE PLACE⁵⁸
98 (Skip to F67d) DK
99 (Skip to F67d) REFUSED

F67.1 Just to be sure, is it that there is NO PLACE at all that //you USUALLY go/ Person in S1 USUALLY goes// to when sick or needing advice about health, OR is it that //you go/ Person in S1 goes//to more than ONE place?

01 NO PLACE AT ALL
02 (Skip to F67a) MORE THAN ONE PLACE
98 (Skip to F67d) DK
99 (Skip to F67d) REFUSED

NF67C What is the MAIN reason //you do/person in S1 does//NOT have a usual source of care?

01 SELDOM OR NEVER GET SICK
02 DON'T KNOW WHERE TO GO FOR CARE
03 PREVIOUS DOCTOR/SOURCE NO LONGER AVAILABLE
04 LIKE TO GO TO DIFFERENT PLACES FOR DIFFERENT HEALTH NEEDS
05 JUST CHANGED INSURANCE PLANS
06 DON'T USE OR LIKE DOCTORS/TREAT MYSELF
07 COST/TOO EXPENSIVE
08 NO INSURANCE
09 USE BOOKS/INTERNET/HOTLINE (get needed info from)
97 OTHER
98 DK
99 REFUSED

//If NF67C = 97, go to F67CO. ELSE, GO TO F67d.//

NF67CO //If NF67C = 97, go to F67CO.//

01 (Skip to F67d) //TEXT RANGE=270// RESPONSE: _____

⁵⁷ Changed the question text from "a place" to "ONE place"; 8/28

⁵⁸ Changed the response option from "THERE IS MORE THAN ONE PLACE" to "YES, VOLUNTEERED THAT THERE IS MORE THAN ONE PLACE"; 8/28

F67a. //if (F67 = "01") then restore:// What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?
[IF MORE THAN ONE PLACE: What kind of place //do you/does person in S1// go to most often?]

//if (F67 = "03") OR (F67.1 = "02") then restore://

What kind of place //do you/does person in S1// go to most often? Is it a clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?⁵⁹

- 01 (Skip to F67c1) CLINIC OR HEALTH CENTER
- 02 (Skip to F67c1) DOCTOR'S OFFICE OR HMO
- 03 (Skip to NF67b) HOSPITAL EMERGENCY ROOM
- 04 (Skip to F67c1) HOSPITAL OUTPATIENT DEPARTMENT

- 06 (Skip to F67c1) DOES NOT GO TO ONE PLACE MOST OFTEN

- 97 (Skip to F67a.0) SOME OTHER PLACE
- 98 (skip to F67d) DK
- 99 (skip to F67d) REFUSED

F67a.0 //If F67a = 97, then ask://

What kind of place //do you/does person in S1/ go to most often?

- 01 (Skip to F67c1) //TEXT RANGE=270// RESPONSE: _____

- 98 (Skip to F67d) DK
- 99 (Skip to F67d) REFUSED

NF67b: //If F67a = 03, then ask://

What is the MAIN reason //you/person in S1// usually//go/goes// to the emergency room instead of a doctor's office or clinic? (DO NOT READ LIST)

[INTERVIEWER: IF RESPONDENT PROVIDES MORE THAN ONE REASON, ASK FOR MAIN REASON]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means you do go to the emergency room instead of a doctor's office or clinic?"]

- 01 (Skip to F67c1) CAN'T AFFORD TO GO ELSEWHERE/THEY DON.T TURN ANYONE AWAY
- 02 (Skip to F67c1) DIDN'T KNOW WHERE ELSE TO GO
- 03 (Skip to F67c1) CONVENIENCE/DON'T NEED AN APPOINTMENT
- 04 (Skip to F67c1) BEST PLACE TO GET CARE FOR CONDITION
- 05 (Skip to F67c1) PREFERS/LIKES THIS AS USUAL SOURCE
- 06 (Skip to F67c1) NO REGULAR DOCTOR
- 97 (GO TO N67bo) OTHER (SPECIFY)
- 98 (Skip to F67c1) DK
- 99 (Skip to F67c1) REFUSED

NF67bo //If NF67b = 97, ask NF67bo.//

- 01 //TEXT RANGE=270// RESPONSE: _____

⁵⁹ Removed "Rarely" from the text; 8/8

F67c1. From the time //you/Person in S1// leave home, on average, about how long does it take to get to //your/his/her// MAIN source for routine medical care?

//Programmer: Minimum value is 0 minutes.//

_____ MINUTES
_____ HOURS {programmer: F67c1TIME=F67c1MIN+(60*F67c1HR)}

9998 DK
9999 REFUSED

F67a1 A personal doctor or nurse is a health professional who knows (**you / person in S1**) well and is familiar with (**your / person in S1's**) health history. This can be a general doctor, a specialist doctor, a nurse practitioner, or a physician's assistant.

(Do you / does person in S1) have one or more persons (you think / person in S1 thinks) of as (your / person in S1's) personal doctor or nurse?

[INTERVIEWER NOTE: If respondent sees a doctor and nurse in the same visit, code as 01 – DOCTOR]⁶⁰

01 YES, ONE PERSON
02 YES, MORE THAN ONE PERSON
03 NO

98 DK
99 REFUSED

F67a2 // If code '01' in D31b, D31e, D31h, D31k or D31m, then ask://

During the past 12 months, was there any time //you/person in s1// needed professional help coordinating care or coordinating referrals among different health care providers and services that //you/person in s1//uses?

[IF NECESSARY: A professional who assists in coordinating care is a person who makes sure that //you get /person in S1 gets// all the services that are needed and makes sure that these services fit together in a way that works for //you/person in S1//].

[COORDINATING REFERRALS MEANS MAKING SURE THAT //YOU GET/PERSON IN S1 GETS// ALL THE SERVICES THAT ARE NEEDED FROM DIFFERENT PROVIDERS]

[Referrals for specialist care should be included.]

01 YES
02 (**skip to F67d**) NO

98 (**skip to F67d**) DK
99 (**skip to F67d**) REFUSED

F67a3 //If F67a2 = 1 then ask://

During the past 12 months, how often did you get as much help as you wanted with arranging or coordinating //person in S__// care? Would you say Always, Usually, Sometimes, Rarely or Never?

⁶⁰ Interviewer note added; 8/28

05	ALWAYS
04	USUALLY
03	SOMETIMES
02	RARELY
01	NEVER
98	DK
99	REFUSED

F67d During the PAST 12 MONTHS, did //you/person in S1// NEED to see a specialist to get special care?

[IF NECESSARY: Special care includes care from specialists such as surgeons, allergists, obstetricians, gynecologists, orthopedists, cardiologists, and dermatologists. Specialists mainly treat just one type of problem.]⁶¹

[INTERVIEWER NOTE: If the respondent is still confused, ask if the specialist is a medical specialist. If so, treat it as a “NO” response]⁶²

[OBSTETRICIANS: OB-STA-TRISH-ENS]
 [GYNECOLOGISTS: GUY-NA-COL-A-JISTS]
 [ORTHOPEDISTS: ORTHO-PEED-ISTS]
 [CARDIOLOGISTS: CAR-DEE-ALL-A-JISTS]
 [DERMATOLOGISTS: DERM-A-TOL-A-JISTS]

01		YES
02	(Skip to F68)	NO
98	(Skip to F68)	DK
99	(Skip to F68)	REFUSED

F67e How much problem, if any, was it for //you/person in S1// to see a specialist? Was it a big problem, small problem, or no problem?

[INTERVIEWER NOTE: The question asks how much of a problem it was to see a specialist, NOT why they saw a specialist.]⁶³

01		BIG PROBLEM
02		SMALL PROBLEM
03	(Skip to F68)	NO PROBLEM
98	(Skip to F68)	DK
99	(Skip to F68)	REFUSED

F67f / If F67e=01,02 then ask:/

We are interested in knowing why was it a problem for //you/person in S1// to see a specialist. Was it because there were no specialists near where //you live/person in S1lives//, was it because to see a specialist was too expensive, was it because //your/person in S1’s//insurance plan places restrictions on //your/person in S1’s//ability to see one, was it because //you/person in S1// experienced difficulty or delay in getting an appointment or some other reason that you could tell me about?

⁶¹ Interviewer note added; 8/8

⁶² Interviewer note added; 8/28

⁶³ Interviewer note added; 8/11

[INTERVIEWER NOTE: If the respondent gives more than one reason then ask "If you had to choose one, which would be the MAIN reason //you/person in S1//had a problem seeing the specialist?"]

01 NO SPECIALIST NEARBY
02 TOO EXPENSIVE
03 INSURANCE PLAN RESTRICTIONS/RULES
04 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT

97 OTHER REASONS
98 DK
99 REFUSED

F67g //If F67f=97 then ask:
Why was it a problem for //you/Person in S1// to see a specialist?

01 //TEXT RANGE=270// RESPONSE: _____
98 DK
99 REFUSED

F.1 UNMET NEEDS OF ADULT

F68. DURING THE PAST 12 MONTHS, was there a time when //you/person in S1// needed dental care but could NOT get it at that time?

01 YES
02 (Skip to F68b) NO

98 (Skip to F68b) DK
99 (Skip to F68b) REFUSED

NF68a What was the MAIN reason //you/person in S1// could not get dental care?

[INTERVIEWER NOTE: IF RESPONSE IS VAGUE, SUCH AS "They said care wasn't needed", PROBE TO FIND OUT WHAT THE MAIN BARRIER WAS.]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means you could not get dental care?"]

01 TOO EXPENSIVE/COULDN'T AFFORD IT
02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
03 COULDN'T FIND DENTIST
04 DENTIST WOULDN'T ACCEPT MEDICAL CARD
05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT

- 06 DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED
- 07 TRANSPORTATION
- 08 MEDICALLY UNABLE TO MAKE THE APPOINTMENT
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

//If NF68a = 97, go to NF68ao. Else, go to F68b.//

NF68ao

01 //TEXT RANGE=270// RESPONSE: _____

F68b IN THE PAST 12 MONTHS, //have you/has person in S1// NOT filled a prescription because of the cost?

[IF NECESSARY, ADD: This includes refills.]

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

F68c DURING THE PAST 12 MONTHS, was there any time when //you/person in S1// did NOT get any other health care that //you/she/he// needed, such as a medical exam, medical supplies, mental health care, or eyeglasses?

- 01 YES
- 02 **(Skip to F69)** NO
- 98 **(Skip to F69)** DK
- 99 **(Skip to F69)** REFUSED

NF68D What was the health care that you needed but did NOT get? (DO NOT READ LIST)

[INTERVIEWER NOTE: If respondent mentions only insurance or lack of insurance, ask that care insurance did NOT pay for, and record that. If respondent mentions a symptom or condition rather than needed health care (e.g., "back problem"), ask what care they wanted but did NOT get for that symptom/condition and code. KEEP PROBING UNTIL THE RESPONDENT SAYS "DK" OR "NOTHING ELSE."]

[MUL = 10]

- 01 A DOCTOR VISIT, CHECKUP, OR EXAM
- 02 MENTAL HEALTH CARE (counseling)
- 03 EYEGLASSES OR VISION CARE (cataracts, ophthalmologist)
- 04 MEDICAL SUPPLIES OR EQUIPMENT
- 05 APPOINTMENT OR REFERRAL TO A SPECIALIST (dermatologist, endocrinologist, chiropractor, gastroenterologist, gynecologist)
- 06 DENTAL

- 07 OTHER MEDICAL TREATMENT (TESTS/SURGERY/OTHER PROCEDURES/THERAPIES) (x-rays, cancer or heart attack tests)
- 08 MEDICATIONS/PRESCRIPTIONS (patches, pills, shots)
- 09 CARE FOR OTHER AILMENT OR BODYPART
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NF68D = 97, ask NF68DO. If NF68D = 98 or 99, go to F69. Else, go to NF68e01.//

NF68DO INTERVIEWER RECORD OTHER HEALTHCARE NEEDED BUT DID NOT GET

01 //TEXT RANGE=270// RESPONSE: _____

NF68e01 What was the main reason //you/person in S1// did not get//response in //list first response from NF68D//?

[INTERVIEWER NOTE: IF THE RESPONSE IS TOO GENERAL SUCH AS "They said care was not needed"), THEN ASK: "Can you please tell me why that means you did not get this healthcare?"]

[MUL = 10]

- 01 TOO EXPENSIVE/COULDN'T AFFORD IT
- 02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03 COULDN'T FIND DOCTOR OR DENTIST
- 04 DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06 DOCTOR OR DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED
- 07 TRANSPORTATION
- 08 DIDN'T HAVE THE TIME / TOO BUSY
- 09 CHOSE NOT TO / DIDN.T FEEL LIKE IT / DIDN.T THINK IT WAS IMPORTANT
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NF68e1 = 97, ask NF68e1o. Else, skip to F69.//

NF68e01o **//If NF68e1 = 97, ask NF68e1o.//**

01 //TEXT RANGE=270// RESPONSE: _____

NF68e02 What was the main reason //you/person in S1// did not get//response in //list second response from NF68D//?

[INTERVIEWER NOTE: IF THE RESPONSE IS TOO GENERAL SUCH AS "They said care was not needed"), THEN ASK: "Can you please tell me why that means you did not get this healthcare?"]

[MUL = 10]

- 01 TOO EXPENSIVE/COULDN'T AFFORD IT
- 02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03 COULDN'T FIND DOCTOR OR DENTIST
- 04 DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06 DOCTOR OR DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED
- 07 TRANSPORTATION
- 08 DIDN'T HAVE THE TIME / TOO BUSY
- 09 CHOSE NOT TO / DIDN.T FEEL LIKE IT / DIDN.T THINK IT WAS IMPORTANT
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NF68e1 = 97, ask NF68e1o. Else, skip to F69.//

NF68e02o //If NF68e1 = 97, ask NF68e1o.//

01 //TEXT RANGE=270// RESPONSE: _____

F69 Compared with THREE YEARS AGO, is getting the medical care //you need/person in S1 needs//becoming easier, harder, or has it stayed the same?

- 01 EASIER
- 02 HARDER
- 03 STAYED THE SAME
- 98 DK
- 99 REFUSED

F.2 FINANCIAL STRESS DUE TO MEDICAL BILLS

F70. During the last 12 months, were there times when //you/ Person in S1// had problems paying or //you were/ Person in S1 was// unable to pay for medical bills for //yourself/himself/ or herself// or anyone else?

- 01 YES
- 02 (Skip to G71) NO
- 98 (Skip to G71) DK
- 99 (Skip to G71) REFUSED

F70b1. Have any of the following happened because //you/ Person in S1// had to pay medical bills?

Have //you/ Person in S1// been unable to pay for basic necessities like food, heat or rent?

01	YES
02	NO
98	DK
99	REFUSED

F70b2. Have any of the following happened because //you/ Person in S1//had to pay medical bills?

Used up all or most of //your / Person in S1's// savings?

01	YES
02	NO
98	DK
99	REFUSED

F70b3. Have any of the following happened because //you/ Person in S1//had to pay medical bills?

Had large credit card debt OR had to take a loan or debt against //your / Person in S1's// home OR had to take any kind of loan?⁶⁴

01	YES
02	NO
98	DK
99	REFUSED

⁶⁴ “Your” changed to “you”; 8/8

SECTION G: EMPLOYMENT

//Programmer: Turn of prior timers. Please start timer for Section G.//

//If code "065-125" in S14 OR "06" in S14a, then skip to PREH76//

//If (code "01" or "03" in B4Aa) AND (code '01' in B4Ab) then autocode "01" in G71 and skip to G71a//

G71. LAST WEEK did //you/Person in S1//have a job either full or part-time? Include any job from which //you were/Person in S1 was// temporarily absent.

[IF NECESSARY: The sponsors want to know how much more difficult it is for people without jobs or for people in certain kinds of jobs to get health insurance.]

01		YES
02	(Skip to PREH76)	NO
98	(Skip to PREH76)	DK
99	(Skip to PREH76)	REFUSED

G71a //Do you/Does Person in S1// work for the government, private industry, or //are you/is he/is she// self-employed?

[INTERVIEWER NOTE: PROBE IF RESPONDENT IS UNSURE. . "Is the employer the city, county, state, or federal government, or a private organization?"]

[INTERVIEWER NOTE: Code non-profits, Publicly traded companies as "private." Use "other" only when the respondents gives an answer not listed and is unwilling to state whether the employer is government, private industry, or self-employed.]

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	(Skip to note before G72)	GOVERNMENT
02	(Skip to note before G72)	PRIVATE INDUSTRY
03	(Skip to G73)	SELF-EMPLOYED
97	(Skip to G71a_1)	OTHER
98	(Skip to note before G72)	DK
99	(Skip to note before G72)	REFUSED

G71b //If G71a=97 ask://

How would you describe where //you work/person in S1 works//?

[INTERVIEWER NOTE: PROBE IF RESPONDENT IS UNSURE. . "Is the employer the city, county, state, or federal government, or a private organization?"]

[INTERVIEWER NOTE: Code non-profits, Publicly traded companies as "private." Use "other" only when the respondents gives an answer not listed and is unwilling to state whether the employer is government, private industry, or self-employed.]

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

G72. //If (B4Aa = "01", "03") AND (B4Ab = "01") then autocode G72 = "01" and skip to G72A. Otherwise ask://
Does //your/person in S1's// employer or union offer a health insurance plan to any of its employees?

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01		YES
02	(Skip to G73)	NO
98	(Skip to G73)	DK
99	(Skip to G73)	REFUSED

G72a //if (B4Aa = "01") AND (B4Ab = "01") AND (B7 = "01"), then autocode "02" in G72a and skip to G72b//
Does //your/Person in S1's// employer or union offer coverage to employees only, OR to both employees and their families OR to both employees and their spouses only?

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

[INTERVIEWER NOTE: This question refers to insurance offered by the employer, not necessarily insurance the respondent has.]⁶⁵

01	EMPLOYEES ONLY
02	EMPLOYEES AND THEIR FAMILIES
03	EMPLOYEES AND SPOUSE ONLY (NOT CHILDREN)
97	OTHER
98	DK
99	REFUSED

G72a.1 //If G72a=97 then ask://
Who does the employer or union offer coverage to?

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	//TEXT RANGE=70//	RESPONSE: _____
98		DK
99		REFUSED

G72b //if (B4Aa = "01", "03") AND (B4Ab = "01") then autocode G72b = "01" and skip to G73. Otherwise ask://
You may have already told me this, but //are you/is person in S1// CURRENTLY eligible to participate in //your/his/her// employer or union health plan?

⁶⁵ Interviewer note added; 8/26

[NOTE: If respondent states that they are in a waiting period, they are not currently eligible.]

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01		YES
02	(Skip to G72d)	NO
98	(Skip to G73)	DK
99	(Skip to G73)	REFUSED

G72c //If G72b = 01 and NOT (B4aa = 01,03 and b4ab = 01), ask G72c.//

//Are you/Is person in S1// NOT participating in //your/his/her// employer or union health insurance plan because the plan costs too much, because //you have/she has/he has// other insurance, because //you do/he does/she does//NOT need or want insurance, or for some other reason?

[IF OTHER REASON AND IF NECESSARY, PROBE FOR REASON AND CODE.]
CODE ONE RESPONSE. IF MORE THAN ONE RESPONSE GIVEN, PROBE FOR MAIN REASON]

[DO NOT READ LIST]

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	(Skip to G73)	COSTS TOO MUCH
02	(Skip to G73)	HAVE OTHER INSURANCE
03	(Skip to G73)	HOPE TO GET OTHER INSURANCE
04	(Skip to G73)	DO NOT NEED OR WANT INSURANCE
05	(Skip to G73)	DID NOT LIKE PLAN/BENEFIT PACKAGE
06	(Skip to G73)	DID NOT LIKE CHOICE OF DOCTORS OR HOSPITALS
07	(Skip to G73)	NO REASON/JUST HAVEN'T GOTTEN AROUND TO IT
97		OTHER
98	(Skip to G73)	DK
99	(Skip to G73)	REFUSED

G72c.1 / If G72c=97 then ask://

Why //are you/is person in S1// not participating in //your/his/her// employer or union health insurance plan?

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	(Skip to G73)	/TEXT RANGE=70/ _____
98	(Skip to G73)	DK
99	(Skip to G73)	REFUSED

G72d //Are you/ Is person in S1// ineligible because //you have/she has/he has// NOT worked long enough, because //you do NOT/person in S1 does NOT//work enough hours, because //you are/he is/she is// on call, because of medical problems, or for some other reason .

[IF OTHER REASON AND IF NECESSARY, PROBE FOR REASON]

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	NOT WORKED THERE LONG ENOUGH
02	NOT WORKING ENOUGH HOURS
03	ON CALL
04	MEDICAL PROBLEMS
05	INSURANCE ONLY OFFERED TO MANAGERS/UNION/PROFESSIONALS
97	OTHER
98	DK
99	REFUSED

G72d.1 / If G72d=97 ask/

Why //are you/is person in S1// not eligible?

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01	//TEXT RANGE=70//	RESPONSE: _____
98		DK
99		REFUSED

G73. How many hours PER WEEK //do you/does Person in S1// usually work at //your/his/her// current primary job?

[INTERVIEWER NOTE: Make sure to record number of hours PER WEEK. Probe for hours PER WEEK, if respondent tells you hours PER DAY.]⁶⁶⁶⁷

[IF NECESSARY: Your best estimate is fine.]⁶⁸

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

01-84	(skip to NG73b_1)	(Code actual number of hours)
85	(skip to NG73b_1)	85 or more hours
98		DK
99		REFUSED

G73a: //Do you/does person in S1// USUALLY work less than 35 hours per week or 35 or more hours per week at //your/his/her// primary job?

⁶⁶ Interviewer note added; 8/8

⁶⁷ Interviewer note added; 8/11

⁶⁸ Changed "Best guess" to "Best estimate"; 8/28

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

- 01 LESS THAN 35 HOURS/WEEK
- 02 35 HOURS/WEEK OR MORE

- 98 DK
- 99 REFUSED

NG73b_1 What kind of business or industry //do you/does person in S1// primarily work in?

- 01 SHOW LIST OF BUSINESSES/INDUSTRIES THAT INVOLVE MAKING SOMETHING
- 02 SHOW LIST OF BUSINESSES/INDUSTRIES THAT INVOLVE SELLING
- 03 SHOW LIST OF BUSINESSES/INDUSTRIES THAT INVOLVE EXECUTING A TASK OR SERVICE
- 97 OTHER (CODE VERBATIM _____)
- 98 DK
- 99 REFUSED

// If NG73b_1 = 1, go to NG73b_1a.
If NG73b_1 = 2, go to NG73b_1b.
If NG73b_1 = 3, go to NG73b_1c.
If NG73b_1 = 7, go to NG73b_1O.//

NG73b_1O INTERVIEWER ENTER RESPONSE

- 01 //TEXT RANGE=70// RESPONSE: _____

NG73b_1a //If NG73b_1 = 1, ask NG73b_1a.//

INTERVIEWER – Select from list of businesses/industries which involve making something.

[INTERVIEWER NOTE: Probe until the respondent has provided a description that captures the nature of the business or industry. Ask “What do they make or do where //you work/person in S1 works//?”]

[If you do not see the business/industry in this list, go back and select another list.]

[INTERVIEWER NOTE: The response for this question is not based on occupation, but the industry under which the job/occupation can be categorized. If a respondent says that she works as a computer programmer or a recruiter, probe to find out which industry her employer falls under.]⁶⁹

- 110 agriculture, forestry, fishing, & hunting
- 210 mining, quarrying, oil & gas extraction
- 220 utilities (electric, sewage, water, natural gas)
- 230 construction (contractors, carpentry, repair buildings, plumbing, heat, A/C)
- 310 manufacturing (food, clothes, printing, paper, chemicals, metal, factory work, glass)
- 720 accommodation and food services (hotels, caterers)

⁶⁹ Interviewer note added; 8/26

- 810 other services (repair & maintenance, laundry)
- 997 other mention

NG73b_1b //If NG73b_1 = 2, ask NG73b_1b.//⁷⁰

INTERVIEWER – Select from list of businesses/industries which involve selling something.

[INTERVIEWER NOTE: Probe until the respondent has provided a description that captures the nature of the business or industry. Ask “What do you sell or do where //you work/person in S1 works//?”]

[If you do not see the business/industry in this list, go back and select another list.]

[INTERVIEWER NOTE: The response for this question is not based on occupation, but the industry under which the job/occupation can be categorized. If a respondent says that she works as a computer programmer or a recruiter, probe to find out which industry her employer falls under.]

- 110 agriculture, forestry, fishing, & hunting
- 420 wholesale trade (items sold to retailers or businesses to sell)
- 440 retail trade (sells to general public for personal or household use incl. stores and restaurant)
- 510 information (publishing, movies, data processing, telecommunication, broadcasting)
- 520 finance & insurance
- 530 real estate & rental & leasing
- 720 accommodation and food services (hotels, caterers)
- 810 other services (repair & maintenance, laundry, religion, political)
- 997 other mention

NG73b_1c //If NG73b_1 = 3, ask NG73b_1c.//⁷¹

INTERVIEWER – Select from list of businesses/industries which involve executing a task or providing a service.

[INTERVIEWER NOTE: Probe until the respondent has provided a description that captures the nature of the business or industry. Ask “What service do you provide or what do you do where //you work/person in S1 works//?”]

[If you do not see the business/industry in this list, go back and select another list.]

[INTERVIEWER NOTE: The response for this question is not based on occupation, but the industry under which the job/occupation can be categorized. If a respondent says that she works as a computer programmer or a recruiter, probe to find out which industry her employer falls under.]

- 110 agriculture, forestry, fishing, & hunting
- 210 mining, quarrying, oil & gas extraction
- 220 utilities (electric, sewage, water, natural gas)
- 230 construction (contractors, carpentry, repair buildings, plumbing, heat, air conditioning)
- 480 transportation & warehousing (post office, distribution, railroad, shipping, trucking, oil pipelines)

⁷⁰ Fixed prompt to “What does the company sell where [you work/person in S1 works]”; 8/26

⁷¹ Fixed prompt to “What service does the place where [you work/person in S1 works] provide?”; 8/26

- 510 information (publishing, movies, data processing, telecommunication, broadcasting)
- 520 finance & insurance
- 530 real estate & rental & leasing
- 540 professional, scientific, & technical services (legal, accounting, engineer, advertising)
- 550 management of companies & enterprises
- 560 administrative & support & waste management & remediation services (lawn care, travel agent, guard, janitorial)
- 610 educational services
- 620 health care & social assistance (dentists, hospitals, ambulance, physicians, social worker, child care)
- 710 arts, entertainment, & recreation (zoos, amusement parks, gambling)
- 720 accommodation and food services (hotels, caterers)
- 810 other services (repair & maintenance, laundry, religion, political)
- 920 public administration (military, courts, government, police, firefighter, jail)
- 997 other mention

G73c. //if (G71a = 03) then restore:// Counting all locations where //your/Person in S1’S// business operates or operated IN THE PAST 12 MONTHS, what is the total number of persons who work for //you/person in S1//? //Else restore:// Counting all locations where //your/Person in S1’S// employer operates or operated IN THE PAST 12 MONTHS, what is the total number of persons who work for //your/person in S1’s// employer?

[INTERVIEWER NOTE: Your best estimate is fine.]⁷²

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

00	(skip to PREH76)	0 employees
01	(skip to PREH76)	1 employee
02	(skip to PREH76)	2 - 9 employees
03	(skip to PREH76)	10 - 24 employees
04	(skip to PREH76)	25 - 49 employees
05	(skip to PREH76)	50 - 99 employees
06	(skip to PREH76)	100 - 249 employees
07	(skip to PREH76)	250 - 499 employees
08	(skip to PREH76)	500 - 999 employees
09	(skip to PREH76)	1,000 employees or more
98		DK
99		REFUSED

G73d Do you think it is more or less than 50 people?

[INTERVIEWER NOTE: Your best estimate is fine.]⁷³

[INTERVIEWER NOTE: If respondent has more than one job, ask respondent to refer to the job where he or she works the most hours.]

⁷² Changed “Best guess” to “Best estimate”; 8/28

⁷³ Changed “Best guess” to “Best estimate”; 8/28

01	50 or more people
02	Less than 50 people
03	About 50 people
98	DK
99	REFUSED

SECTION H: ADULT DEMOGRAPHICS AND FAMILY INCOME

//PROGRAMMER: H75 does not exist//

PREH76: //Programmer: Turn of prior timers. Please start timer for Section H.//

The next few questions are for general classification purposes:

H76. //Are you/Is Person in S1// ...

[READ RESPONSES]

01	(Skip to H76a)	married
02	(Skip to H77)	divorced
03	(Skip to H77)	widowed
04	(Skip to H77)	separated
05	(Skip to H77)	never married, OR
06	(Skip to H76_1)	a member of an unmarried couple?
98	(Skip to H77)	DK
99	(Skip to H77)	REFUSED

H76_1. What is //your/Person in S1's// partner's gender?

01	MALE
02	FEMALE
98	DK
99	REFUSED

H76a. //If (code "18-64" in S14) OR (code "01, 02, 03,04, 05" in S14a), then ask://

Is //your/Person in S1's// spouse or partner currently employed?

01	YES
02	NO
98	DK
99	REFUSED

H77. What is the highest level of school //you have/Person in S1 has// completed or the highest degree received?

[INTERVIEWER NOTE: READ ONLY IF ABSOLUTELY NECESSARY.]

[If response is "high school", "college" or "degree", PROBE. If response is "high school", ask if this means "some high school" or "high school graduate". If response is "college", ask if this means "some college" or "four year college graduate". If response is degree, ask what type of degree.]⁷⁴

01	Less than first grade
02	First through 8th grade

⁷⁴ Interviewer note added to clarify this issue; 8/8

03	Some high school, but no diploma
04	High school graduate or equivalent (GED/Vocational/Trade School graduate)
05	Some college, but no degree
06	Associate degree (1-2 year occupational, technical or academic program)
07	Four year college graduate
08	Advanced degree (including master's, professional degree, or doctorate)
98	DK
99	REFUSED

FAMILY INCOME

H84. /Autocode the total number of persons in the family by adding the response in S11 plus the response in S13//

01-22 (S11+S13)
99 (Missing data, including if S11= "98" or "99" or if S13= "98" or "99")

H85. //If (S11 = "01") AND (S13 = "00") then restore://

The next question asks about //your/Person in S1's// income so that the survey sponsors can find out how income relates to health insurance coverage, access and problems with medical care.

Please tell me //your/Person in S1's// total gross income during the calendar year 2007. This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and other money income received.

[IF NECESSARY, read: "Gross income includes all income before taxes or other deductions."]

[INTERVIEWER NOTE: If the respondent does not know the income of all family members code as "DON'T KNOW"]⁷⁵

//Otherwise restore://

The next question asks about //your/Person in S1's// family income so that the survey sponsors can find out how income relates to health insurance coverage and problems with medical care.

Please tell me //your/Person in S1's// total FAMILY gross income during the calendar year 2007. Family income includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and any other money income received by members of this FAMILY who are 15 years of age and older.

[IF NECESSARY read: Gross income includes all income before taxes and other deductions."]

[INTERVIEWER NOTE: If the respondent does not know the income of all family members code as "DON'T KNOW"]⁷⁶

01 ENTER YEARLY INCOME
02 (SKIP TO H85M) ENTER MONTHLY INCOME
98 (SKIP TO H86) DK
99 (SKIP TO H86) REFUSED

H85y. ENTER YEARLY INCOME

01 (Skip to H89) // 000,000-999,000// (Code actual value)
999,997 (Skip to H89) \$1 MILLION/YEAR OR MORE

⁷⁵ Interviewer note added; 8/28

⁷⁶ Interviewer note added; 8/28

H85m. ENTER MONTHLY INCOME

01 (Skip to H89) // 000,000-999,000// (Code actual value)

999,997 (Skip to H89) \$1 MILLION/YEAR OR MORE

//Create H85y_1 = H85m*12.//

H86. //Autocode H86 based on responses to H85y, H85m and H84. Response codes rounded to the nearest thousand dollars.//

//If H85 = 98 or 99, then ask H86.//

I just want to assure you that your responses will be kept strictly confidential. The survey asks about income since this information helps researchers understand how income groups differ in health insurance coverage and in problems getting health care.

If H84='01':

Which category represents (your/person in S1's) total income during the calendar year 2007? Is it (read 01-07, as appropriate)?

If H84='02-22':

Which category represents the total combined income of all members of this FAMILY during the calendar year 2007? Is it (read 08-56, as appropriate)?

[IF NECESSARY: Your best estimate is fine.]⁷⁷

DOCUMENTATION: 2007 HHS Poverty Guidelines
<http://aspe.hhs.gov/POVERTY/07poverty.shtml> :

Persons in Family or Household	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$10,210	\$12,770	\$11,750
2	13,690	17,120	15,750
3	17,170	21,470	19,750
4	20,650	25,820	23,750
5	24,130	30,170	27,750
6	27,610	34,520	31,750
7	31,090	38,870	35,750
8	34,570	43,220	39,750
For each add'l person, add	3,480	4,350	4,000

SOURCE: Federal Register, Vol. 72, No. 15, January 24, 2007, pp. 3147-3148

For each family size:

- 01 Less than 63% of the 48 States FPL figure corresponding to the number of ppl in the family
- 02 63% - 100%
- 03 101% - 150%
- 04 151% - 200%
- 05 201% - 250%

⁷⁷ Changed "Best guess" to "Best estimate"; 8/28

06	251% - 300%
07	301% or more
98	DK
99	REFUSED

//if code "01" in H84, read://

01	\$6,000 or less
02	Over \$6,000 to \$10,000
03	Over \$10,000 to \$15,000
04	Over \$15,000 to \$20,000
05	Over \$20,000 to \$26,000
06	Over \$26,000 to \$31,000
07	More than \$31,000

//if code "02" in H84, read://

01	\$9,000 or less
02	Over \$9,000 to \$14,000
03	Over \$14,000 to \$21,000
04	Over \$21,000 to \$27,000
05	Over \$27,000 to \$34,000
06	Over \$34,000 to \$41,000
07	More than \$41,000

//if code "03" in H84, read://

01	\$11,000 or less
02	Over \$11,000 to \$17,000
03	Over \$17,000 to \$26,000
04	Over \$26,000 to \$34,000
05	Over \$34,000 to \$43,000
06	Over \$43,000 to \$52,000
07	More than \$52,000

//if code "04" in H84, read://

01	\$13,000 or less
02	Over \$13,000 to \$21,000
03	Over \$21,000 to \$31,000
04	Over \$31,000 to \$41,000
05	Over \$41,000 to \$52,000
06	Over \$52,000 to \$62,000
07	More than \$62,000

//if code "05" in H84, read://

01	\$15,000 or less
02	Over \$15,000 to \$24,000
03	Over \$24,000 to \$36,000
04	Over \$36,000 to \$48,000
05	Over \$48,000 to \$60,000
06	Over \$60,000 to \$72,000
07	More than \$72,000

//if code "06" in H84, read://

01	\$17,000 or less
02	Over \$17,000 to \$28,000
03	Over \$28,000 to \$41,000
04	Over \$41,000 to \$55,000
05	Over \$55,000 to \$69,000

06 Over \$69,000 to \$83,000
07 More than \$83,000

//if code "07" in H84, read://

01 \$20,000 or less
02 Over \$20,000 to \$31,000
03 Over \$31,000 to \$47,000
04 Over \$47,000 to \$62,000
05 Over \$62,000 to \$78,000
06 Over \$78,000 to \$93,000
07 More than \$93,000

//if code "08" in H84, read://

01 \$22,000 or less
02 Over \$22,000 to \$35,000
03 Over \$35,000 to \$52,000
04 Over \$52,000 to \$69,000
05 Over \$70,000 to \$86,000
06 Over \$87,000 to \$104,000
07 More than \$104,000

//if code "09" and above in H84, read://

01 \$24,000 or less
02 Over \$24,000 to \$38,000
03 Over \$38,000 to \$57,000
04 Over \$57,000 to \$76,000
05 Over \$76,000 to \$95,000
06 Over \$96,000 to \$114,000
07 More than \$114,000

//If '99', attempt to convert refusal and ask://

Your response would really help the survey sponsors understand how lower and higher income groups differ in health insurance coverage and problems getting health care. Your response would be kept completely confidential and only used for statistical analysis of large income groups such as persons at or near poverty level. Will you tell me about how much income //your/person in s1's// family received last year?⁷⁸

[If necessary, repeat choices in H86].

//If H86 = 98 or 99, go to R1.//

H87 //Post-Processing: Autocode H87 as appropriate based on response in H86.//

1 //if code "01", "08", "15", "22", "29", "36", "43" or "50" in H86, code as:// Less than 63%
2 //if code "02", "09", "16", "23", "30", "37", "44" or "51" in H86, code as:// 63% - 100%
3 //if code "03", "10", "17", "24", "31", "38", "45" or "52" in H86, code as:// 101% - 150%
4 //if code "04", "11", "18", "25", "32", "39", "46" or "53" in H86, code as:// 151% - 200%
5 //if code "05", "12", "19", "26", "33", "40", "47" or "54" in H86, code as:// 201% - 250%
6 //if code "06", "13", "20", "27", "34", "41", "48" or "55" in H86, code as:// 251% - 300%
7 //if code "07", "014", "21", "28", "35", "42", "49" or "56" in H86, code as:// 301% or more
8 //If H86 = "98" or "99", code as://
Missing information

⁷⁸ Changed condition so only those who answer 98 and 99 in H85 see H86t; 8/8

H88 //Autocode the total number of persons in the household by adding the response in S10 plus the response in S12//

01-22 (S10+S12)
99 (Missing data, including if S10= "98" or "99" or if S12= "98" or "99")

H89 //IF (H88 > H84) AND (H84 ~ = 99) AND (H88 ~ = 99) then ask://

You had mentioned that there were other members of //your/person in S1's// household, in addition to //your/person in S1's// family.

Please tell me //your/Person in S1's// total HOUSEHOLD gross income during the calendar year 2007⁷⁹. Household income includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and any other money income received by ALL members of this HOUSEHOLD who are 15 years of age and older.⁸⁰

[IF NECESSARY read: Gross income includes all income before taxes and other deductions.]

01 ENTER YEARLY INCOME
02 (Skip to H89m) ENTER MONTHLY INCOME
98 (Skip to H90) DK
99 (Skip to H90) REFUSED

H89y. //If H89 = "01" then ask://
ENTER YEARLY INCOME

01 (Skip to H89_CON) // 000,000-999,000// (Code actual value)
999,997 (Skip to H89_CON) \$1 MILLION/YEAR OR MORE

H89m. //If H89 = "02" then ask://
ENTER MONTHLY INCOME

01 (Skip to H89_CON) // 000,000-999,000// (Code actual value)
999,997 (Skip to H89_CON) \$1 MILLION/YEAR OR MORE

// Create H89y_1 = H89m*12.//

H89_CON //Ask H98_CON, if:

- (H89y < H85y) OR
- (H89y_1 < H85y_1) OR
- (H89y_1 < H85y) OR
- (H89y < H85y_1) OR
- (H89y < lower limit of range chosen in H86) OR
- (H89y_1 < lower limit of range chosen in H86)

Else, skip to R1.//

⁷⁹ Changed the text of this sentence; 8/28

⁸⁰ Removed the word "family" before "HOUSEHOLD gross income"; 8/17

Let me see if I have this right, earlier I thought you said that your family income was //INSERT RESPONSE FROM H85 OR H86// but your household income is //INSERT RESPONSE FROM H89//. Is this correct, or did I make a mistake?

- 01 **(Reset to H85)** Change response to H85 or H86 (family income)
- 02 **(Reset to H89)** Change response to H89 (household income)
- 03 **(Skip to R1)** NO CHANGES
- 99 **(Skip to R1)** REFUSED

//All go to note in R1.//

H90 **//Ask H90 if:**

- **(H89 = 98, 99) AND (family annual income in H85 < 45,776); OR**
- **(H89 = 98, 99)AND [(H84 = 01 & H86 = 01 to 07) OR (H84 = 02 & H86 = 01 to 07) OR (H84 = 03 & H86 = 01 to 06) OR (H84 = 04 & H86 = 01 to 05) OR (H84 = 05 & H86 = 01 to 04) OR (H84 = 06 & H86 = 01 to 04) OR (H84 = 07 & H86 = 01 to 03) OR (H84 = 08 & H86 = 01 to 03) OR (H84 = 09 & H86 = 01 to 03)]**

Otherwise, skip to R1.//

DOCUMENTATION: Question for imputation purposes. The figure 45,776 is the Ohio State Two-Year-Average Median Household Income by State: 2004-2006, with income in 2006 dollars.
<http://www.census.gov/hhes/www/income/income06/statemhi2.html>

Is //your/Person in S1's// total HOUSEHOLD gross income during the calendar year 2007 above or below 46,000 dollars?

- 01 ABOVE \$46K/YR
- 02 BELOW \$46K/YR
- 03 2007 HOUSEHOLD INCOME EQUALS \$46K/YR

- 98 DK
- 99 REFUSED

//All go to note in R1.//

SECTION R: ADULT VIOLENCE

R1. //Programmer: Turn of prior timers. Please start timer for Section R. //
//if S1 = "01" OR S5 = "01" then continue, else skip to Q153.//

The next questions are about violence, that is, when someone physically hurts you on purpose. This is a sensitive topic. Some people may feel uncomfortable with these questions. Please keep in mind that if you are not in a safe place, you can ask me to skip any question you do not want to answer.

Are you in a safe place to answer these questions?

01 YES
02 (Skip to Q153) NO
98 (Skip to Q153) DK
99 (Skip to Q153) REFUSED

R2 //If R1 = 01, ask R2.//
DURING THE PAST 12 MONTHS, how many times, if any, has anyone hit, slapped, pushed, kicked or physically hurt //you//Person in S1)?

00 (Skip to Q153)
01-89 (Skip to R2A) (Code actual value)
90 (Skip to R2A) 90 times or more
98 (Skip to Q153) DK
99 (Skip to Q153) REFUSED

R2A //If R2 = 01 to 90, ask R2A.//
We realize that this topic may bring up past experiences that some people may wish to talk about. If you or someone you know would like to talk to a trained counselor, there is a toll-free and confidential intimate partner hotline you can call.

The number is 1-800-799-SAFE, which is 7233.

Would you like me to repeat the number?

R3 Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt //you/him/her//. What was that person's relationship to //you/him/her//?

[DO NOT READ LIST. MULTIPLE RESPONSES ALLOWED FOR SINGLE INCIDENT. PROBE AS NEEDED FOR DETAILS]

01 Stranger
02 Coworker
03 Professional caretaker (e.g., home health aide)
04 Male/Female first date
05 Someone you were dating
06 Former boyfriend/girlfriend
07 Current boyfriend/girlfriend or fiancé
08 Spouse or live-in partner
09 Former spouse or live-in partner
10 S/he is my my Child

11	S/he is my Stepchild
12	Another family member (including in-laws)
13	Acquaintance/friend (non-intimate)
97	OTHER
98	DK
99	REFUSED

R3oth // If R3 = "97" then ask://

How would you describe {YOUR / RESTORE PERSON'S NAME FROM S1i's} relationship?

01 //TEXT RANGE=70// RESPONSE: _____

R4_1 Did THE MOST RECENT INCIDENT result in your seeking help from A DOCTOR OR NURSE?

01	YES
02	NO
98	DK
99	REFUSED

R4_2 Did THE MOST RECENT INCIDENT result in your seeking help from A MENTAL HEALTH PROFESSIONAL, COUNSELOR OR SOCIAL WORKER?

01	YES
02	NO
98	DK
99	REFUSED

R4_3 Did THE MOST RECENT INCIDENT result in your seeking help from ANOTHER HEALTH CARE PROFESSIONAL

01	YES
02	NO
98	DK
99	REFUSED

R4_4 Did THE MOST RECENT INCIDENT result in your seeking help from FAMILY OR FRIEND

01	YES
02	NO
98	DK
99	REFUSED

R4_5 Did THE MOST RECENT INCIDENT result in your seeking help from EMPLOYER/ EMPLOYEE ASSISTANCE PROGRAM?

- | | |
|----|---------|
| 01 | YES |
| 02 | NO |
| 98 | DK |
| 99 | REFUSED |

R4_6 Did THE MOST RECENT INCIDENT result in your seeking help from HOT LINE OR HELP LINE?

- | | |
|----|---------|
| 01 | YES |
| 02 | NO |
| 98 | DK |
| 99 | REFUSED |

**SECTION Q (MAIN AND OVER SAMPLE): HOUSEHOLD WEIGHTING
QUESTIONS**

Q153. We have a few questions about the general characteristics of your household.

INCLUDING THIS PHONE NUMBER, how many telephone numbers are there in //your/person in S1's// house that are primarily for non-business use? Do not include cell phones or NUMBERS that are only used by a computer or fax machine.⁸¹

- | | | |
|-------|----------------|----------------------|
| 01 | (Skip to Q155) | ONE |
| 02-10 | | (Code actual number) |
| 11 | | MORE THAN 10 |
| 98 | | DK |
| 99 | | REFUSED |

Q154. //if code "02-99" in Q153 then ask://

Is this telephone line the main line into //your/person in S1's// home?

- | | |
|----|---------|
| 01 | YES |
| 02 | NO |
| 98 | DK |
| 99 | REFUSED |

Q155. At any time, DURING THE PAST 12 MONTHS, had //your/person in S1's// household been without telephone service for 24 hours or more?

- | | |
|----|------------------------|
| 01 | YES |
| 02 | (Skip to Q157) NO |
| 98 | (Skip to Q157) DK |
| 99 | (Skip to Q157) REFUSED |

Q156. For how long did //you/person in S1// NOT have telephone service DURING THE PAST 12 MONTHS?

[IF NECESSARY: Your best estimate is fine.]⁸²

- | | | | |
|----|-------|---------|---|
| 01 | _____ | Days | {1-90} {programmer: Q156days = Q156} |
| 02 | _____ | Weeks | {1-51} {programmer: Q156days = Q156 * 7} |
| 03 | _____ | Months | {1-12} {programmer: Q156days = Q156 * 30} |
| 98 | | DK | |
| 99 | | REFUSED | |

NP156 What is the MAIN reason that //you/person in S1// did NOT have telephone service at //your/person in s1's// household DURING THE PAST 12 MONTHS?

⁸¹ Part of the question was capitalized for emphasis: "or NUMBERS"; 8/28

⁸² Changed "Best guess" to "Best estimate"; 8/28

[INTERVIEWER NOTE: IF THE RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why you did not have telephone service during the past 12 months?"]

- 01 DISCONNECTED BECAUSE OF NONPAYMENT OF BILL
- 02 COULDN'T AFFORD ONE
- 03 MOVED & WAITING FOR SERVICE TO START
- 04 HOMELESS OR LIVING IN A TEMPORARY RESIDENCE OR SHELTER
- 05 IN A CONFINED ENVIRONMENT (jail, hospital)
- 06 TEMPORARY OUTAGE DUE TO WEATHER
- 07 TEMPORARY OUTAGE DUE TO KNOCKING DOWN OR DAMAGING LINES
- 08 OUT OF COUNTRY / NOT AT HOME FOR TIME PERIOD
- 09 OTHER PHONE COMPANY PROBLEMS
- 10 HAVE CELL PHONE
- 11 SWITCHED PHONE COMPANIES/ SERVICES/NUMBER
- 12 DIDN'T WANT/NEED/ VOLUNTARILY TURNED OFF
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NP156 = 97, GO TO NP156O. ELSE, GO TO NQ157.//

NP156O//If NP156 = 97, GO TO NP156O.//

01 //TEXT RANGE=70// RESPONSE: _____

NQ157 Is (your/person in S1int's) place of residence/home built before the year 1950?

[IF NECESSARY: Your best estimate is fine.]⁸³

- 01 YES
- 02 NO

- 9998 DK
- 9999 REFUSED

CELL1 Are your living quarters: Owned or being bought by (you // restore if #adults in HH > 1: or someone in your household//), Rented for cash, OR Occupied without payment of cash rent?

- 01 Owned or being bought (mortgaged)
- 02 Rented
- 03 Occupied without payment of cash rent

- 98 DK
- 99 REFUSED

[INTERVIEWER HELP SCREEN:

⁸³ Changed "Best guess" to "Best estimate"; 8/28

Owned or Being Bought: Living quarters are "Owned or being bought" if the owner or coowner is a household member of the unit even if (s)he still has a mortgage or has not fully paid for the unit. A condominium or a cooperative unit is "Owned or being bought" only if the owner lives in it.

Rented for Cash: Living quarters are "Rented for cash" if the occupants pay or have a contract for any money rent (even by persons not living in the unit).

Occupied Without Payment of Cash Rent: Living quarters are "Occupied without payment of cash rent" if the unit is not "Owned or being bought" and if the money rent is paid or contracted. Persons usually live in these units in exchange for services, or as a gift from a relative or friend not living in the unit. If occupants pay only for their utilities but do not pay any money rent, report the unit as "Occupied without payment of cash rent".]

CELL "In addition to your residential landline telephone, do you also use one or more cell phone numbers?"

Yes

No

DK

REF

//if response in S13 is code "01" – "12" then skip to child questionnaire//

SECTION Q (CELL PHONE): HOUSEHOLD WEIGHTING QUESTIONS

Q153. We have a few questions about the general characteristics of your household.

In addition to your cell phone, is there at least one telephone inside your home that is currently working and is not a cell phone? Do not include telephones only used for business or telephones only used for computers or fax machines.

01	YES
02	NO
98	DK
99	REFUSED

Q154. //if code "01" in Q153 then ask://

Of all the telephone calls that you receive, are ...

01	All or almost all calls received on a cell phone?
02	Some received on a cell phone and some on a regular landline phone?
03	Very few or none received on a cell phone?
98	DK
99	REFUSED

NQ157 Is (your/person in S1int's) place of residence/home built before the year 1950?

[IF NECESSARY: Your best estimate is fine.]⁸⁴

01	YES
02	NO
9998	DK
9999	REFUSED

CELL1 Are your living quarters: Owned or being bought by (**you // restore if #adults in HH > 1: or someone in your household//**), Rented for cash, OR Occupied without payment of cash rent?

01	Owned or being bought (mortgaged)
02	Rented
03	Occupied without payment of cash rent
98	DK
99	REFUSED

[INTERVIEWER HELP SCREEN:

Owned or Being Bought: Living quarters are "Owned or being bought" if the owner or co owner is a household member of the unit even if (s)he still has a mortgage or has not fully paid for the unit. A condominium or a cooperative unit is "Owned or being bought" only if the owner lives in it.

Rented for Cash: Living quarters are "Rented for cash" if the occupants pay or have a contract for any money rent (even by persons not living in the unit).

Occupied Without Payment of Cash Rent: Living quarters are "Occupied without payment of cash rent" if the unit is not "Owned or being bought" and if the money rent is paid or contracted. Persons usually live in these units in exchange for services, or as a gift from a relative or friend not living in the unit. If occupants pay only for their utilities but do not pay any money rent, report the unit as "Occupied without payment of cash rent".]

//if response in S13 is code "01" – "12" then skip to child questionnaire//

⁸⁴ Changed "Best guess" to "Best estimate" ; 8/28

SECTION I (MAIN AND OVER SAMPLE): SCREENING QUESTIONS FOR ELIGIBLE CHILD

//PROGRAMMER: Turn of prior timers. Please start timer for Section I.//

i90 **//If code “01” in S13 then ask://** Earlier you said there was one child in //your/Person in s1i’s// family. What is that child’s first name, nickname, or initials?

//If code “02-97” in S13 then ask:// We would now like to identify the child in //your/Person in s1i’s// family, age 17 or younger, who had the most recent birthday. What is that child’s first name, nickname, or initials?

[INTERVIEWER NOTE: Be sure to record the person’s name, nickname, or initials - NOT just relationship]

[IF NECESSARY: I’m going to use this information to help in making the questions I ask you more friendly and conversational, and it won’t be reported with any of the data or results.]

[INTERVIEWER NOTE: If the respondent says that twins, triplets, quadruplets etc, had the most recent birthday, say “Consider their order of birth, and tell me about the child who was born last.”]

01 **//TEXT RANGE=25//** ENTER CHILD’S NAME: _____

66 **(Skip to REF1)** REFUSED TO CONTINUE, NO TIME

98 **(Skip to REF1)** DK⁸⁵

99 **(Use “the child” for name, Skip to i90a)** REFUSED TO GIVE NAME

REF1 **//If (i90 = “98, 66”) then ask://**

Your responses are very important. The sponsors need your/your household’s input to make health care policy decisions that may help you and your family.

[IF NECESSARY: You may call the Ohio Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01 **(Go back to previous question.)** CONTINUE

99 **(Go to Suspend.)** REFUSED⁸⁶

i90a Please tell me how old //response in i90// was on (his/her) last birthday.

00 LESS THAN ONE YEAR

01–17 CODE ACTUAL AGE IN YEARS

98 DK/NOT SURE

99 REFUSED

The dates cited below refer to the time around which the issue was identified. They do not represent the exact dates on which the program was changed. Also, changes made to the program were in place for households who were newly contacted after the changes were made. The changes were not in place for households with suspended interviews prior to when the changes were made.

⁸⁵ Changed skip responses from “Skip to PAR1” to “Skip to REF1”; 8/17

⁸⁶ Changed PAR1 to REF1; 8/17

PAR2 //IF INTERVIEW TERMINATES AFTER i90a AND BEFORE i95//
Would you be able to answer just 2 to 4 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio assess how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
99 (Skip to ChRefusal) REFUSED TO CONTINUE

//PROGRAMMER: Continue with abbreviated interview consisting of i95, i95a, ((J100c) or (K96 & K103)). Code interview as an abbreviated complete.//

i90b What is //your/person in S1's// relationship to //child in i90//?

01 PERSON IS //child in i90//'s MOTHER
02 PERSON IS //child in i90//'s FATHER
03 PERSON IS //child in i90//'s GRANDPARENT
04 PERSON IS //child in i90//'s AUNT/UNCLE
05 PERSON IS //child in i90//'s BROTHER/SISTER
06 PERSON IS //child in i90//'s OTHER RELATIVE
07 PERSON IS //child in i90//'s LEGAL GUARDIAN
08 PERSON IS //child in i90//'s FOSTER PARENT
09 PERSON IS //child in i90//'s OTHER NON-RELATIVE
10 PERSON IS //child in i90//'s STEP-MOTHER
11 PERSON IS //child in i90//'s STEP-FATHER

97 OTHER
98 DK
99 REFUSED

i90c //If i90b=97//
How would you describe //your/person in S1's// to //child in i90//?

01 //TEXT RANGE=70// RESPONSE: _____
98 DK
99 REFUSED

i91a I would now like to speak to someone IN THIS HOUSEHOLD who BEST KNOWS about the //child in i90//'s health insurance coverage and health status. Is that you, or a different person?

[IF NECESSARY: we are also interested in experiences of children who do not have health insurance.]

[INTERVIEWER NOTE: IF RESPONDENT SAYS NOBODY IN THE HOUSEHOLD IS WELL INFORMED, ASK WHO IS MOST KNOWLEDGEABLE.]

02 (Skip to note in i92_dpr1) PERSON ON PHONE IS THE ONE WHO IS MOST KNOWLEDGEABLE ABOUT THE CHILD'S INSURANCE COVERAGE
01 DIFFERENT PERSON

98 (Force Callback)DK
99 (Force Callback)REFUSED

i91b What is that person's first name?

[BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS NOT JUST RELATIONSHIP]

[IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would be fine.]

01 //TEXT RANGE=25// RESPONSE: _____

98 (Skip to PAR3) DK
99 (Skip to PAR3) REFUSED

i91c Is //person in i91b// available?

01 YES
02 (Force Callback)NO

66 (Skip to PAR3) CHILD PROXY NOT IN HH
98 (Force Callback)DK
99 (Force Callback)REFUSED

i91d Could you please ask //person i91b// to come to the telephone and answer some questions?

01 YES
02 (Force Callback)NO

98 (Force Callback)DK
99 (Force Callback)REFUSED

i92 Hello, my name is _____ [INTERVIEWER SAY FIRST AND LAST NAME], and I am calling for the State of Ohio Department of Health and Ohio State University.

We are conducting an important survey on health insurance coverage, use of medical services, satisfaction with health care, and problems getting health care.

//For those who get into this question, if i90 = 99, then add extra line below://

We are asking about the child with the most recent birthday in //response in S1int's// family.

We have identified //response in i90// as the eligible child in your family and would like to ask you some questions about //response in i90's// health insurance coverage and care. Your telephone number and //response in i90's// were chosen randomly and all information will be kept strictly confidential.

You do not have to answer any question you do not want to, and you can end the interview at anytime. If you have any questions, I will provide a telephone number for you to call to get more information. The interview will take approximately 8 to 10 minutes.

[IF NECESSARY: we are also interested in experiences of children who do not have health insurance.]

[IF NECESSARY, SAY: I work for Macro International, a survey research company contracted by the Ohio State University.]

[IF NECESSARY, SAY: The sponsors need your household's input to make health care policy decisions that may help you and your family.]

[IF NECESSARY, SAY: You may call the department of health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01 CONTINUE

99 (Skip to ChRefusal) REFUSED

i92_dpr1 // If {i92 = 01} OR {i91a = 02 AND [(s2c = 01 to 99) OR (sprx1 = 01 to 99)]}, ask i92_dpr1.//

What is your relationship to //child in i90//?

01 PERSON IS //child in i90//s MOTHER
02 PERSON IS //child in i90//s FATHER
03 PERSON IS //child in i90//s GRANDMOTHER
04 PERSON IS //child in i90//s GRANDFATHER
05 PERSON IS //child in i90//s AUNT
06 PERSON IS //child in i90//s UNCLE
07 PERSON IS //child in i90//s BROTHER
08 PERSON IS //child in i90//s SISTER
09 PERSON IS //child in i90//s OTHER FEMALE RELATIVE
10 PERSON IS //child in i90//s OTHER MALE RELATIVE
11 PERSON IS //child in i90//s FEMALE LEGAL GUARDIAN
12 PERSON IS //child in i90//s MALE LEGAL GUARDIAN
13 PERSON IS //child in i90//s FOSTER MOTHER
14 PERSON IS //child in i90//s FOSTER FATHER
15 PERSON IS //child in i90//s OTHER FEMALE NON-RELATIVE
16 PERSON IS //child in i90//s OTHER MALE NON-RELATIVE
17 PERSON IS //child in i90//s STEP-MOTHER
18 PERSON IS //child in i90//s STEP-FATHER

97 OTHER
98 DK
99 REFUSED

i92_dpo //If i92_dpr1=97, ask i92_dpo. //

How would you describe //your/person in S1's// to //child in i90//?

01 //TEXT RANGE=70// RESPONSE: _____
98 DK
99 REFUSED

i92_dpr3 // If {i92 = 01} OR {i91a = 02 AND [(s2c = 01 to 99) OR (sprx1 = 01 to 99)]}, ask i92_dpr3.//

Please tell me how old you were on your last birthday.

018-125 RECORD AGE
998 DK
999 REFUSED

i95 These next few questions ask about some general information related to //response in i90//’s health insurance coverage.

Last week was //response in i90// covered by health insurance or some other type of health care plan?

01 (Skip to J96) YES
02 NO
98 DK
99 REFUSED

//IF INTERVIEW TERMINATES HERE//

PAR3. Would you be able to answer just 1 to 3 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio asses how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
99 (Skip to ChRefusal) REFUSED TO CONTINUE

//ASK i95a, ((j100c) or (K96 & K103)) THEN IF PROTOCOL IS MET WITHOUT THE RECORD BECOMING A COMPLETE, CODE AS COMPLETE//

i95a Health insurance or some other type of health care plan may include health insurance obtained through employment or purchased directly as well as Government and military programs such as Medicare, Medicaid, Healthy Start, Champus, Champ-VA, TRICARE and the Indian Health Service. Keeping this in mind, last week was //response in i90// covered by health insurance or some other type of health care plan?

01 YES
02 (Skip to K96) NO
98 (Skip to L125) DK
99 (Skip to L125) REFUSED

HELP SCREEN

Medicare: health coverage for those 65 and older or with certain disabilities
Medicaid: health coverage for low-income persons.
Healthy Families: OH Medicaid’s health coverage for low-income children & parents
CHAMPUS (“CHAMPUS” not “C-H-A-M-P-U-S”) or TRICARE: health coverage to inactive military personnel and their family
CHAMP – VA (“CHAMP – V-A” not “CHAMPVA”): fee-for-service health coverage for families of disabled or

//IF INTERVIEW TERMINATES ANYTIME AFTER i95a AND BEFORE j100c or K96//

PAR4. Would you be able to answer just 1 or 2 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio assess how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01		CONTINUE
99	(Skip to ChRefusal)	REFUSED TO CONTINUE

//ASK ((j100c) or (K96 & K103)), THEN IF PROTOCOL IS MET WITHOUT THE RECORD BECOMING A COMPLETE, CODE AS COMPLETE//

SECTION I (CELL PHONE): SCREENING QUESTIONS FOR ELIGIBLE CHILD

//PROGRAMMER: Turn of prior timers. Please start timer for Section I.//

i90 //If code “01” in S13 then ask:// Earlier you said there was one child in //your/Person in s1i’s// family. What is that child’s first name, nickname, or initials?

//If code “02-97” in S13 then ask:// We would now like to identify the child in //your/Person in s1i’s// family, age 17 or younger, who had the most recent birthday. What is that child’s first name, nickname, or initials?

[INTERVIEWER NOTE: Be sure to record the person’s name, nickname, or initials - NOT just relationship]

[IF NECESSARY: I’m going to use this information to help in making the questions I ask you more friendly and conversational, and it won’t be reported with any of the data or results.]

[INTERVIEWER NOTE: If the respondent says that twins, triplets, quadruplets etc, had the most recent birthday, say “Consider their order of birth, and tell me about the child who was born last.”]

01 //TEXT RANGE=25// ENTER CHILD’S NAME: _____

66 (term) REFUSED TO CONTINUE, NO TIME

98 (term) DK⁸⁷

99 (Use “the child” for name, Skip to i90a) REFUSED TO GIVE NAME

REF1 //If (i90 = “98, 66”) then ask://

Your responses are very important. The sponsors need your/your household’s input to make health care policy decisions that may help you and your family.

[IF NECESSARY: You may call the Ohio Department of Health at 1-800-282-0546 if you have any other questions or concerns about the survey.]

01 (Go back to previous question.) CONTINUE

99 (Go to Suspend.) REFUSED⁸⁸

i90a Please tell me how old //response in i90// was on (his/her) last birthday.

00 LESS THAN ONE YEAR

01–17 CODE ACTUAL AGE IN YEARS

98 DK/NOT SURE

99 REFUSED

The dates cited below refer to the time around which the issue was identified. They do not represent the exact dates on which the program was changed. Also, changes made to the program were in place for households who were newly contacted after the changes were made. The changes were not in place for households with suspended interviews prior to when the changes were made.

⁸⁷ Changed skip responses from “Skip to PAR1” to “Skip to REF1”; 8/17

⁸⁸ Changed PAR1 to REF1; 8/17

PAR2 //IF INTERVIEW TERMINATES AFTER i90a AND BEFORE i95//
Would you be able to answer just 2 to 4 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio assess how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
99 (Skip to ChRefusal) REFUSED TO CONTINUE

//PROGRAMMER: Continue with abbreviated interview consisting of i95, i95a, ((J100c) or (K96 & K103)). Code interview as an abbreviated complete.//

i90b What is //your/person in S1's// relationship to //child in i90//?

01 PERSON IS //child in i90//'s MOTHER
02 PERSON IS //child in i90//'s FATHER
03 PERSON IS //child in i90//'s GRANDPARENT
04 PERSON IS //child in i90//'s AUNT/UNCLE
05 PERSON IS //child in i90//'s BROTHER/SISTER
06 PERSON IS //child in i90//'s OTHER RELATIVE
07 PERSON IS //child in i90//'s LEGAL GUARDIAN
08 PERSON IS //child in i90//'s FOSTER PARENT
09 PERSON IS //child in i90//'s OTHER NON-RELATIVE
10 PERSON IS //child in i90//'s STEP-MOTHER
11 PERSON IS //child in i90//'s STEP-FATHER

97 OTHER
98 DK
99 REFUSED

i90c //If i90b=97//
How would you describe //your/person in S1's// to //child in i90//?

01 //TEXT RANGE=70// RESPONSE: _____
98 DK
99 REFUSED

i91a I would now like to speak to someone IN THIS HOUSEHOLD who BEST KNOWS about the //child in i90//'s health insurance coverage and health status. Is that you, or a different person?

[IF NECESSARY: we are also interested in experiences of children who do not have health insurance.]

[INTERVIEWER NOTE: IF RESPONDENT SAYS NOBODY IN THE HOUSEHOLD IS WELL INFORMED, ASK WHO IS MOST KNOWLEDGEABLE.]

02 (Skip to i95) PERSON ON PHONE IS THE ONE WHO IS MOST KNOWLEDGEABLE ABOUT THE CHILD'S INSURANCE COVERAGE
01 (skip to PAR3) DIFFERENT PERSON

98 (term) DK
99 (term) REFUSED

i95 These next few questions ask about some general information related to //response in i90//’s health insurance coverage.

Last week was //response in i90// covered by health insurance or some other type of health care plan?

01 (Skip to J96) YES
02 NO
98 DK
99 REFUSED

//IF INTERVIEW TERMINATES HERE//

PAR3. Would you be able to answer just 1 to 3 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio asses how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
99 (term) REFUSED TO CONTINUE

//ASK i95a, ((j100c) or (K96 & K103)) THEN IF PROTOCOL IS MET WITHOUT THE RECORD BECOMING A COMPLETE, CODE AS COMPLETE//

PAR3 i95 These next few questions ask about some general information related to //response in i90//’s health insurance coverage.

Last week was //response in i90// covered by health insurance or some other type of health care plan?

01 (Skip to j100c) YES
02 NO
98 DK
99 REFUSED

PAR3 i95a Health insurance or some other type of health care plan may include health insurance obtained through employment or purchased directly as well as Government and military programs such as Medicare, Medicaid, Healthy Start, Champus, Champ-VA, TRICARE and the Indian Health Service. Keeping this in mind, last week was //response in i90// covered by health insurance or some other type of health care plan?

01 YES
02 (Skip to K96) NO

98 (Skip to K96) DK
 99 (Skip to K96) REFUSED

PAR3 J100c Is //response in i90// covered by MEDICAID, the government health care assistance program or managed health care plan that includes Healthy Families, Healthy Start,⁸⁹

//PROGRAMMER: See Global References to determine S9's region//

//if S9 > 175, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?
 //if S9 in Central, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?
 //if S9 in East Central, then restore:// Buckeye Community Health Plan, CareSource, Unison Health Plan, or Medicaid waiver programs?
 //if S9 in NorthEast, then restore:// CareSource, WellCare, or Medicaid waiver programs?
 //if S9 in NorthEast Central, then restore:// CareSource, Unison Health Plan, or Medicaid waiver programs?
 //if S9 in NorthWest, then restore:// Buckeye Community Health Plan, CareSource, Paramount Advantage or Medicaid waiver programs?⁹⁰
 //if S9 in SouthEast, then restore:// CareSource, Molina Healthcare, Unison Health Plan, or Medicaid waiver programs?
 //if S9 in SouthWest, then restore:// AMERIGROUP Community Care, CareSource, Molina Healthcare, or Medicaid waiver programs?
 //if S9 in West Central, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spend-down Medicaid. Medicaid waiver programs include Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

[IF RESPONDENT IS UNSURE ABOUT THE MEANING OF 'COVERED': "Is he/she enrolled in the program now? "Is he/she eligible to receive benefits now?" "Does he/she get health care from one of these plans?"]

01 (SURVEY ENDS) YES
 02 (SURVEY ENDS) NO
 98 (SURVEY ENDS) DK
 99 (SURVEY ENDS) REFUSED

PAR3 K96 //If code "02" in i95a ask//:

At any time DURING THE PAST 12 MONTHS, was //response in i90// covered by any type of health insurance plan?

01 (SURVEY ENDS) YES
 02 (skip to K103) NO
 98 (skip to K103) DK
 99 (skip to K103) REFUSED

PAR 3K103 //If K96 = "02", "98", "99" then ask//:

When was the last time //response in i90// had health care coverage?

[READ IF NECESSARY: Your best guess is fine.]

00 Never had health insurance coverage {programmer: K103days= i90a * 365 }

⁸⁹ Due to programming errors, the lists of plans were not being displayed for some regions. Adjustments were made to ensure the correct plans were displayed by region.; 8/28

⁹⁰ Paramount Advantage" added to the Northwest Medicaid plan names; 8/26

01	_____	Days {1-90} {programmer: K103days= K103 }
02	_____	Weeks {1-51} {programmer: K103days = K103 * 7}
03	_____	Months{1-35} {programmer: K103days = K103 * 30}
04	_____	Years {1-i90a}){programmer: K103days = K103 * 365}
98		DK
99		REFUSED

(SURVEY ENDS)

i95a Health insurance or some other type of health care plan may include health insurance obtained through employment or purchased directly as well as Government and military programs such as Medicare, Medicaid, Healthy Start, Champus, Champ-VA, TRICARE and the Indian Health Service. Keeping this in mind, last week was //response in i90// covered by health insurance or some other type of health care plan?

01		YES
02	(Skip to K96)	NO
98	(Skip to L125)	DK
99	(Skip to L125)	REFUSED

HELP SCREEN

Medicare: health coverage for those 65 and older or with certain disabilities
 Medicaid: health coverage for low-income persons.
 Healthy Families: OH Medicaid's health coverage for low-income children & parents
 CHAMPUS ("CHAMPUS" not "C-H-A-M-P-U-S") or TRICARE: health coverage to inactive military personnel and their family
 CHAMP - VA ("CHAMP - V-A" not "CHAMPVA": fee-for-service health coverage for families of disabled or

//IF INTERVIEW TERMINATES ANYTIME AFTER i95a AND BEFORE j100c or K96//

PAR4. Would you be able to answer just 1 or 2 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio assess how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01		CONTINUE
99	(Skip to ChRefusal)	REFUSED TO CONTINUE

//ASK ((j100c) or (K96 & K103)), THEN IF PROTOCOL IS MET WITHOUT THE RECORD BECOMING A COMPLETE, CODE AS COMPLETE//

SECTION J: CHILD'S INSURANCE COVERAGE

//Programmer: Turn of prior timers. Please start timer for Section J.//

J96 //If ((A1 = 01 or A1A = 01) AND (i95=01 or i95a = 01) AND (i91a = 02)) then ask://
Last week, was //response in i90//’s health insurance coverage the same as //your/Person in s1i’s// insurance coverage that you told me about earlier?

01		YES
02	(Skip to PREJ100a)	NO
98	(Skip to PREJ100a)	DK
99	(Skip to PREJ100a)	REFUSED

J96a //If J96=01 then ask://

So, the health insurance coverage that //response in i90// has is //List health insurance coverage types based on responses of Yes to B4A, B4B, B4C, B4D, B4E, B4F or B4G// and it has the same benefits and covers the same services, and //response in i90// does NOT have any other health insurance coverage. Is this correct?⁹¹

01	(Skip to J104)	YES
02		NO
98		DK
99		REFUSED

PREJ100a //encountered when the child’s health insurance does not match the profiled adult//

I would like to now ask you some more specific questions about //response in i90//’s health insurance coverage

J100a Is //response in i90// covered by a health insurance plan through someone’s current or former employer or union?

[IF NECESSARY: Include COBRA]

[IF NECESSARY: Do not include Medicare or Medicaid coverage.]

01		YES, covered by a health insurance plan through current/former employer or union
02		NO, not covered
98		DK
99		REFUSED

J100b Are you//Is person in S1// covered by MEDICARE, the government-funded health insurance plan for people 65 years and older or persons with certain disabilities that includes

//PROGRAMMER: See Global References to determine S9’s region//

//if S9> 175, then restore: // Mt. Carmal Healthplan, Humana Insurance Company, Community Insurance Company, Summacare, Inc. McKinley Insurance Company, UMPC Health Benefits, Kaiser Foundation HP of Ohio, United Healthcare of Ohio, Inc., Wellcare Health Insurance of Ohio, Inc.?

⁹¹ Added “Is this correct?” at the end of the question; 8/26

//if S9 in Central, then restore: // Mt. Carmal Healthplan, Inc., AETNA Life Insurance Company, Humana Insurance Company, Community Insurance Company, United Healthcare of Ohio, Wellcare Health Insurance of Illinois, Inc.?

//if S9 in East Central, then restore: // McKinley Life Insurance Company, Summacare, Inc., AETNA Life Insurance, Community Insurance Company, Hometown Health Plan?

//in S9 in North East, then restore: // Community Insurance Company, AETNA Life Insurance Company, Humana Insurance Company, Kaiser Foundation HP of Ohio, Wellcare Health Insurance of Illinois, Inc.?

//in S9 in Northeast Central, then restore: // Community Insurance Company, United Healthcare of Ohio, Inc., AETNA Life Insurance Company?

//in S9 in Northwest: // AETNA Life Insurance Company, Paramount Care, Inc., Humana Insurance Company?

//in S9 in South East, then restore: // UMPC Health Benefits, Inc., AETNA Life Insurance Company, Health Plan of the Upper Ohio Valley?

//in S9 in South West, then restore: // United Healthcare of Ohio, Inc., Community Insurance Company, AETNA Insurance Company, Humana Insurance Company, Wellcare Health Insurance of Ohio, Inc.?

//in West Central, then restore: // United Healthcare of Ohio, Inc., Community Insurance Company, AETNA Life Insurance Company, Wellcare Health Insurance of Ohio, Inc.?

[INTERVIEWER HELP SCREEN - Medicare: health coverage for those 65 and older or with certain disabilities.]

[IF NECESSARY, READ:MEDICARE also includes Mt. Carmal Healthplan, Humana Insurance Company, Community Insurance Company, Summacare, Inc. McKinley Insurance Company, UMPC Health Benefits, Kaiser Foundation HP of Ohio, United Healthcare of Ohio, Inc., Wellcare Health Insurance of Ohio, Inc.]

[IF RESPONDENT IS UNSURE ABOUT THE MEANING OF 'COVERED': “//Are you/Is Person in S1// enrolled in the program now?” Or “//Are you/Is Person in S1// eligible to receive benefits now?” or “//Do you/Does Person in S1// get health care from one of these plans?”]

01	YES
02	NO
98	DK
99	REFUSED

J100bcon **//If NJ100b = 01.**

Just to confirm, you said that //response in I90// is covered by Medicare, the government-funded insurance plan for people 65 years and older or persons with certain disabilities.

01	(GO TO J100c)	CORRECT, CHILD IS COVERED BY MEDICARE
02	(GO TO NJ100B &CHANGE VALUE)	INCORRECT, CHILD IS NOT COVERED BY MEDICARE
98	(GO TO J100c)	DK
99	(GO TO J100c)	REFUSED

J100c Is //response in i90// covered by MEDICAID, the government health care assistance program or managed health care plan that includes Healthy Families, Healthy Start,⁹²

//PROGRAMMER: See Global References to determine S9's region//

//if S9 > 175, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?

//if S9 in Central, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?

//if S9 in East Central, then restore:// Buckeye Community Health Plan, CareSource, Unison Health Plan, or Medicaid waiver programs?

//if S9 in NorthEast, then restore:// CareSource, WellCare, or Medicaid waiver programs?

//if S9 in NorthEast Central, then restore:// CareSource, Unison Health Plan, or Medicaid waiver programs?

//if S9 in NorthWest, then restore:// Buckeye Community Health Plan, CareSource, Paramount Advantage or Medicaid waiver programs?⁹³

//if S9 in SouthEast, then restore:// CareSource, Molina Healthcare, Unison Health Plan, or Medicaid waiver programs?

//if S9 in SouthWest, then restore:// AMERIGROUP Community Care, CareSource, Molina Healthcare, or Medicaid waiver programs?

//if S9 in West Central, then restore:// CareSource, Molina Healthcare, or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spend-down Medicaid. Medicaid waiver programs include Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

[IF RESPONDENT IS UNSURE ABOUT THE MEANING OF 'COVERED': "Is he/she enrolled in the program now? "Is he/she eligible to receive benefits now?" "Does he/she get health care from one of these plans?"]

01	YES
02	NO
98	DK
99	REFUSED

HELP SCREEN

Medicaid: health coverage for low-income persons.

Healthy Families: OH Medicaid's health coverage for low-income children & parents

Healthy Start: Medicaid expansion program to provide free and low cost health coverage to pregnant women and children

Disability Assistance: insurance or cash benefits against loss through disability because of an accident or illness.

Medicaid Wavier Programs: provide community services to those who would otherwise be institutionalized such as

J100d Is //response in i90// covered by Military or Veterans coverage, such as TRICARE?

01	YES
02	NO

⁹² Due to programming errors, the lists of plans were not being displayed for some regions. Adjustments were made to ensure the correct plans were displayed by region.; 8/28

⁹³ Paramount Advantage" added to the Northwest Medicaid plan names; 8/26

98 DK
99 REFUSED

J100e Is //response in i90// covered by health insurance purchased directly, that is, a private plan not related to someone's current or past employment?

01 YES
02 NO
98 DK
99 REFUSED

J100f Is //response in i90// covered by the Bureau for Children with Medical Handicaps (BCMh) or any OTHER state-sponsored or public health insurance program that I have NOT mentioned?

[INTERVIEWER NOTE: BCMh stands for: Bureau for Children with Medical Handicaps. The purpose of the program is to promote the early identification of children with medically handicapping conditions. The mission of the program is to assure that children with special health care needs and their families obtain care that is family centered, comprehensive, culturally sensitive, and community based.]

[PROBE IF RESPONDENT MENTIONS A PROGRAM YOU ALREADY ASKED ABOUT: That sounds like a plan I asked you about before. Does //response in i90// have any OTHER health care coverage that I did NOT mention earlier?]

01 YES (SPECIFY)
02 (Skip to J100g) NO
98 (Skip to J100g) DK
99 (Skip to J100g) REFUSED

NJ100f1 What is the name of that program?

[INTERVIEWER NOTE: If respondent says Care Source, Healthy Start, Health Families, Job & Family Services, code as 02 Medicaid.]

[INTERVIEWER NOTE: Probe for anything that might identify the program and code verbatim]

01 BUREAU FOR CHILDREN WITH MEDICAL HANDICAPS (BCMh)
02 MEDICAID (do not read: includes Care Source, Healthy Start, & Healthy Family, Job & Family Services)
97 OTHER (SPECIFY)
98 DK
99 REFUSED

//If NJ100f1 = 97, go to NJ100f1O. Else, go to J100g.//

J100f1 //If NJ100f1 = 97, go to NJ100f1O.//

01 /TEXT RANGE=70/ NAME OF PROGRAM: _____
98 DK

J100g Does //response in i90// have any OTHER health care coverage that I have NOT mentioned?

[INTERVIEWER: THE FOLLOWING PROGRAMS HAVE BEEN RECORDED:]
 //If J100a = "01" then restore:// HEALTH PLAN THROUGH EMPLOYER
 //If J100b = "01" then restore:// MEDICARE (65+ & Disabilities)
 //If J100c = "01" then restore:// MEDICAID (Government Assistance Program)
 //If J100d = "01" then restore:// MILITARY/VETERANS COVERAGE (e.g. TRICARE)
 //If J100e = "01" then restore:// DIRECT PURCHASE INSURANCE PLAN
 //If J100f = "01" then restore:// STATE-SPONSORED (//restore J100f1//)

- 01 YES
- 02 (Skip to J100chk) NO
- 98 (Skip to J100chk) DK
- 99 (Skip to J100chk) REFUSED

J100g1 What type of coverage is that?

[IF RESPONDENT MENTIONS ONLY ACCIDENT, DISABILITY, LIFE, OR ANY OTHER INSURANCE THAT PAYS CASH BENEFITS RATHER THAN MEDICAL EXPENSES, RECODE THE LAST QUESTION TO "02"]

[INTERVIEWER NOTE: DO NOT READ LIST, ALLOW UP TO 3 RESPONSES.]

[NOTE: IF RESPONDENT STATES NAME OF A SPECIFIC HEALTH PLAN PROBE "That sounds like the name of an insurance company. Can you tell me whether that insurance company provides //response in i90// with medical, dental, vision or some other type of insurance?"]

//MUL=3//

- 01 MEDICAL, HMO, or PPO
- 02 SUPPLEMENTAL
- 03 DENTAL
- 04 VISION
- 05 MENTAL HEALTH
- 06 CANCER INSURANCE
- 07 HEARING
- 08 ACCIDENT, DISABILITY, LIFE, OR ANY INSURANCE THAT PAYS CASH BENEFITS AND NOT MEDICAL EXPENSES.
- 09 (Force J100a="01") COBRA
- 97 OTHER
- 98 DK
- 99 REFUSED

//If the only selection to J100g is "08"/CASH BENEFITS OR "09"/COBRA, then force J100g="02" and skip to J100chk.

If the only selections to J100g are "08"/CASH BENEFITS AND "09"/COBRA, then force J100a="01", force J100g="02" and skip to J100chk.//

HELP SCREEN

Medical, HMO, or PPO: any type of insurance plan that covers expenses for a range of different health needs or problems that require the attention of a doctor or other professional staff.

Supplemental: a health care plan purchased in addition to another health plan to improve benefits they already receive or aren't covered.

Dental: an insurance benefit specifically for the health of the teeth (surgery, dental exams..)

Vision: an insurance benefit specifically for the health of the eyes (glasses, eye exams, surgery.)

Cancer Insurance: a benefit in the event they are diagnosed with cancer, typically covering hospital expenses or cash benefits

Long term care: a range of services provided by a medical staff, such as personal care and skilled nursing, for people with chronic diseases or with a long-term disability

Nursing home insurance: financial support in the event they need to go to a nursing home.

Accidental, disability, or life insurance: insurance or cash benefits against loss through accidental bodily injury, disability through an accident or illness, or upon death of the insured.

COBRA: opportunity from an employer to temporarily continue their health care coverage if it would otherwise end because of termination, divorce, or no longer a dependent of the person insured

J100g1a //If J100g1 = 97 then ask://

What type of coverage is that?

[INTERVIEWER: SPECIFY "OTHER" RESPONSE FROM PREVIOUS QUESTION]

01 //TEXT RANGE=270// RECORD NON-LISTED RESPONSE: _____

98 DK
99 REFUSED

J100h Who pays for most of this health insurance plan?

Is it you or your family, an employer or union, a state or local government or community program, or someone else?

01 (Skip to J100chk) SELF OR FAMILY
02 (Skip to J100chk) EMPLOYER OR UNION
03 STATE OR LOCAL GOVERNMENT OR COMMUNITY PROGRAMS
04 (Skip to J100chk) SOMEONE ELSE

98 (Skip to J100chk) DK
99 (Skip to J100chk) REFUSED

J100chk //J100A-G has more than one "01" response then ask://

To confirm, you said //response in i90// is covered by

//If J100a = "01" then restore:// a health insurance plan through an employer or union,

//If J100b = "01" then restore:// MediCare,

//If J100c = "01" then restore:// a Medicaid program,

//If J100d = "01" then restore:// Military or Veterans coverage such as TriCare,

//If J100e = "01" then restore:// a private health insurance plan purchased directly,

//If J100f = "01" then restore:// (/J100f1//), which is a public health insurance program,

//If J100g = "01" then restore:// // J100g1// // J100g1a// .

Is that correct?

01 YES

- 02 (reset to J100a) NO
- 98 (reset to J100a) DK
- 99 (reset to J100a) REFUSED

J104 Thinking about //response in i90's// current health insurance coverage, how would you rate

- A. //response in i90's// choice of doctors
[IF NECESSARY: Please rate the choice of doctors, NOT the doctors]

using any number from 0 to 10 where 0 is the worst insurance possible, and 10 is the best insurance possible.

- 00 WORST
- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 10 BEST
- 98 DK
- 99 REFUSED

J105 //if (J96 = 01 & J96A = 01) then go to J105e.//⁹⁴
If (J96 = 02, 98 or 99) OR if (J96A = 02, 98 or 99) OR if (A1A = 02, 98 or 99) OR if (i91a = 01) then ask://

Do any of //response in i90's// current insurance plans cover

(RANDOMLY ROTATE A-E.)

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

- A. Dental care except emergency care?
[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]
- B. Vision services except emergency care?
[IF NECESSARY: Include eyeglasses]
[INTERVIEWER NOTE: IF RESPONDENT UNSURE OF MEANING ASK: "Do you//response in i90// have coverage for routine vision exams or eyeglasses?"]
[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]
- C. Mental health care?
[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]
- D. Prescription medications?

⁹⁴ Changed the condition from "//if (J96 = 01 & J96A = 01) then go to J113.// " to "//if (J96 = 01 & J96A = 01) then go to J105e.//".

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]

//If(i95 = 01) OR (i95a=01), ask J105e.//⁹⁵

E. Hearing care except emergency care?

[INTERVIEWER NOTE: This includes any coverage for these services even if it is from a separate health plan]

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

01	YES
02	NO
98	DK
99	REFUSED

HELP SCREEN: Non-emergency vision services include routine vision exams (to get glasses, for example). Emergency vision services include services for sudden, unplanned visits to evaluate problems such as an eye injury or the onset of sudden, serious vision or eye problems.

J113 How long has //Person in i90// been covered by (his/her) current primary health insurance plan?

[READ ONLY IF NECESSARY: Your best guess is fine.]

01	_____	Days	{1-90}	{programmer: J113days = J113}
02	_____	Weeks	{1-51}	{programmer: J113days = J113 * 7}
03	_____	Months	{1-35}	{programmer: J113days = J113 * 30}
04	_____	Years	{1-i90a}	{programmer: J113days = J113 * 365}
98		DK		
99		REFUSED		

// IF [(J113days < 365 & J113~=12 months) OR (J113 = 98, 99)], ask J116.
Else, skip to J124b.//

J116 // IF [(J113days < 365 & J113~=12 months) OR (J113 = 98, 99)], ask J116.

Before //response in i90's// became covered by (his/her) current primary plan, was //response in i90// covered by any other health insurance plan in the PAST 12 MONTHS?

01	YES
02	(Autocode J120 = "01", Skip to J122) NO
98	(Skip to J120) DK
99	(Skip to J120) REFUSED

J117 //If (J116 = "01") AND (J100C = "02", "98", "99" OR (J96a="01" and B4C="02", "98", or "99")) AND (J113days < 365 & J113~=12 months) then ask://

⁹⁵ Prior to J105e, the following condition was added: //If(i95 = 01) OR (i95a=01), ask J105e.//; 10/06

Just prior to //response in i90//s current health insurance coverage was //response in i90// covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spenddown Medicaid. Medicaid waiver programs include Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

- 01 YES
- 02 **(Skip to J117b)** NO
- 98 **(Skip to J117b)** DK
- 99 **(Skip to J117b)** REFUSED

HELP SCREEN

Medicaid: health coverage for low-income persons.
Healthy Families: OH Medicaid's health coverage for low-income children & parents
Healthy Start: Medicaid expansion program to provide free and low cost health coverage to pregnant women and children
Disability Assistance: insurance or cash benefits against loss through disability because of an accident or illness.
Medicaid Wavier Programs: provide community services to those who would otherwise be institutionalized, such as in a nursing home.

NJ117a //If code "01" in J117, ask//:

Why does //response in i90// no longer have this coverage?

[INTERVIEWER: IF RESPONSE IS "No longer qualify", "Do not need anymore", ASK WHY.] [IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why that means the child no longer has coverage?"] [When R finishes, ask "Are there any other reasons?" ASK UNTIL RESPONDENT SAYS "No" or "DK".]⁹⁶

[MUL = 11]

- 01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc.)⁹⁷
- 04 No longer qualify – NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED.
- 03 No longer qualify – DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 10 No longer qualify – OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements)
- 05 No longer qualify – NOT SURE WHY
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again

⁹⁶ Interviewer notes fitted to one screen and changed "...no longer have coverage?" to "no longer has coverage?"; 8/17

⁹⁷ Removed "No longer qualify" from response option 02; 8/17

97 Other (Specify) /Text Range 270/ : _____
 98 Don't know
 99 Refused
 97 OTHER
 98 DK
 99 REFUSED

//If NJ117a = 97, then ask NJ117ao. Else skip to J120//.

J117a //If NJ117a = 97, then ask NJ117ao.

01 //TEXT RANGE=270// RESPONSE: _____

J117b //If (J117 = 02, 98 or 99) OR (J100c = 01) OR (J96A = 01 and B4c = 01) then ask://

Just prior to //response in i90//’s current health insurance coverage, was //response in i90// covered by a health insurance plan obtained through someone’s employment or union?

01 **(Skip to J120)** YES
 02 NO
 98 DK
 99 REFUSED

J117c //If code “02, 98, 99 ” in J117b ask//:

Was //response in i90// covered by any other insurance that you or your family paid for completely?

01 YES
 02 NO
 98 DK
 99 REFUSED

J120 Was there any time IN THE PAST 12 MONTHS that //response in i90// did NOT have health insurance?

01 YES
 02 **(Skip to J124b)** NO
 98 **(Skip to J124b)** DK
 99 **(Skip to J124b)** REFUSED

J122 //If code “01” in J120, ask//:

DURING THE PAST 12 MONTHS, how long was //response in i90// without health insurance coverage?

[READ IF NECESSARY: Your best guess is fine.]

00 **(recode J120="02", Skip to J124b)** NO MONTHS / WAS INSURED ALL YEAR
 01 _____ Days {1-90} {programmer: J122days = J122}

02	_____	Weeks {1-51} {programmer: J122days = J122 * 7}
03	_____	Months {1-12} {programmer: J122days = J122 * 30}
98		DK
99		REFUSED

J124a //if J120 = "01" then ask://

During the past 12 months, did any of the following things happen to //response in i90//while (she/he) was uninsured?

(RANDOMLY ROTATE A, B, & C)

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

- A Did //response in i90// have any major medical costs while (he/she) was uninsured?
[INTERVIEWER: RESPONDENT SHOULD DEFINE WHAT THEY CONSIDER A "MAJOR MEDICAL COST"]
- B Did you or your family delay or avoid getting care for //response in i90// because (he/she) was uninsured?
[IF NECESSARY: "Care" means any health care, including prescription drugs.]
- C Did you or your family have any problems getting the care //response in i90// needed while (she/she) was uninsured?
[IF NECESSARY: "Care" means any health care, including prescription drugs.]

01	YES
02	NO
98	DK
99	REFUSED

//All in J124a, Skip to L125 //

J124b //If (J113days >= 360) OR (J120 = "02", "98", "99" in J120 then ask://

During the past 12 months, did any of the following things happen to //response in i90?

(RANDOMLY ROTATE A, B, & C)

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

- A Did //response in i90// have any major medical costs
[IF NECESSARY: including co pays]
[INTERVIEWER: RESPONDENT SHOULD DEFINE WHAT THEY CONSIDER A "MAJOR MEDICAL COST"]
- B Did you or your family delay or avoid getting care for //response in i90// that you felt (she/he) needed but could NOT afford?
[IF NECESSARY: include delays because of health plan approval]
[IF NECESSARY: "Care" means any health care, including prescription drugs.]
- C Did you or your family have any problems getting needed care for //response in i90//? [IF NECESSARY: include delays because of health plan approval]
[IF NECESSARY: "Care" means any health care, including prescription drugs.]

01	YES
02	NO

98
99

DK
REFUSED

//All in J124b, Skip to L125//

SECTION K: CHILD CURRENTLY UNINSURED

//Programmer: Turn of prior timers. Please start timer for Section K.//

K96 **//If code "02" in i95a ask//:**

At any time DURING THE PAST 12 MONTHS, was **//response in i90//** covered by any type of health insurance plan?

01 YES
02 **(skip to K103)** NO
98 **(skip to K103)** DK
99 **(skip to K103)** REFUSED

//IF INTERVIEW TERMINATES ANYTIME AFTER K96 AND BEFORE K103, AND K96=02, 98, OR 99.//

PAR5 Would you be able to answer one last question before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio asses how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
99 **(Skip to ChRefusal)** REFUSED TO CONTINUE

//ASK K103, THEN IF PROTOCOL IS MET WITHOUT THE RECORD BECOMING A COMPLETE, CODE AS COMPLETE//

K97 When was the last time **//response in i90//** had health insurance?

[IF NECESSARY, READ: Your best guess is fine.]

01 _____ Days {1-90} {programmer: K97days = K97}
02 _____ Weeks {1-51} {programmer: K97days = K97 * 7}
03 _____ Months{1-35} {programmer: K97days = K97 * 30}
04 _____ Years {1-i90a} {programmer: K97days=K97*365}
98 DK
99 REFUSED

**//If (C1 = "02", "98", "99") OR (i91a= "01") then skip to K99.
Otherwise continue.//**

K98 **//If C1 = "01" AND (i91a = "02") then ask//:**

Was **//response in i90//**'s most recent health insurance coverage the same as **//yours/(Person in S1's)//**, that is did **//response in i90//** have the same insurance coverage that you told me about earlier?

01 YES
02 **(Skip to K99)** NO

98 (Skip to K99) DK
 99 (Skip to K99) REFUSED

K98a //If (C3 = "01") OR (C4 = "01") OR (C5 = "01") then ask://
 So, the health insurance coverage that //response in i90// had was

//If C3 = "01" then restore:// Medicaid which includes Healthy Families, Healthy Start, or Medicaid waiver programs

//If C4 = "01" then restore:// A plan obtained through an employer or union

//If C5 = "01" then restore:// Insurance that //you/person in S1// or //your/his/her// family paid for completely

//If C3 = "01" then restore:// [IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spenddown Medicaid. Medicaid waiver programs include Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

01 (Skip to note before NK99a) YES
 02 NO
 98 DK
 99 REFUSED

K99 //If (K98 = "02", "98", "99") OR (C1 = "02", "98", "99", or BLANK) OR (i91a = "01") OR (K98a="02", "98" or "99", then ask://

The last time //response in i90// had insurance, was //response in i90// covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?

[IF NECESSARY, READ: Medicaid also includes Ohio Works First Cash Assistance, Medicaid for the Aged, Blind and Disabled, and Spenddown Medicaid. Medicaid waiver programs include Individual Options or IO, Ohio Home Care Waiver, Level One and Transition Waiver.]

01 YES
 02 (Skip to note before K99b) NO
 98 (Skip to note before K99b) DK
 99 (Skip to note before K99b) REFUSED

HELP SCREEN

Medicaid: health coverage for low-income persons.
 Healthy Families: OH Medicaid's health coverage for low-income children & parents
 Healthy Start: Medicaid expansion program to provide free and low cost health coverage to pregnant women and children
 Medicaid Wavier Programs: provide community services to those who would otherwise be institutionalized, such as in a nursing home.

//If (K99= "01") OR (K98a = "01" and C3 = "01") then continue, else skip to K99b//

NK99A Why does //response in i90// no longer have this coverage? (DO NOT READ LIST)

[INTERVIEWER: IF RESPONSE IS "No longer qualify", "Do not need anymore", ASK WHY.] [IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why that means the child no longer have coverage?"] [When R finishes, ask "Are there any other reasons?" ASK UNTIL RESPONDENT SAYS "No" or "DK".]

[MUL = 11]

- 01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc.)⁹⁸
- 04 No longer qualify – NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED.
- 03 No longer qualify – DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 10 No longer qualify – OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements)
- 05 No longer qualify – NOT SURE WHY
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again
- 97 Other (Specify) /Text Range 270/ : _____
- 98 Don't know
- 99 Refused
- 97 OTHER
- 98 DK
- 99 REFUSED

// If NK99A = 97, go to K99A. Else, go to K102. //⁹⁹

K99A

01 /TEXT RANGE=270/ _____

//Go to K102. //¹⁰⁰

K99b //If (K99 = "02", "98", "99") OR (K98 = "01" AND C3 = "02", "98", "99"), then ask K99b.//

Did anyone try to get Medicaid, Healthy Families, or Healthy Start for //response in i90// DURING THE PAST 12 MONTHS.¹⁰¹

- 01 YES
- 02 (Skip to NK99d) NO

⁹⁸ Changed response option 02 to "02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc.)"; 8/17

⁹⁹ Changed from "//If NK99A = 97, go to NK99AO. Else, skip to K102. Otherwise, if (K98a = "01") and (C3 = "01") then skip to K102, else continue://" to //"If NK99A = 97, go to K99A. Else, go to K102"//. The logic remains the same. The latter is a clearer version of the former.

¹⁰⁰ Changed from: "//Skip to K102. Otherwise, if (K98a = "01") and (C3 = "01") then skip to K102, else continue://" to "//Go to K102. //". The logic remains the same. The latter is a clearer version of the former.

¹⁰¹ Fixed logic to enter this question from "//If (K99 = "02", "98", "99") OR (K98 = "01" AND C3 = "02", "98", "99") AND K99 = "02", "98", "99"), then ask K99b.//" to the following "//If (K99 = "02", "98", "99") OR (K98 = "01" AND C3 = "02", "98", "99"), then ask K99b.//"; 10/2

- 98 (Skip to K100) DK
- 99 (Skip to K100) REFUSED

HELP SCREEN: AVAILABLE IN K99B-D AND K104-106

Medicaid: health coverage for low-income persons.
 Healthy Families: OH Medicaid's health coverage for low-income children & parents
 Healthy Start: Medicaid expansion program to provide free and low cost health coverage to pregnant women and children

NK99c Why was //response in i90// unable to get Medicaid, Healthy Families, or Healthy Start?

[INTERVIEWER NOTE: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means the child was unable to get Medicaid, Healthy Families, or Healthy Start?"]

[INTERVIEWER NOTE: When respondent finishes, probe with "Are there any other reasons?" Keep probing until respondent says "No" or "DK".]

[DO NOT READ CHOICES]

[MUL = 5]

[DO NOT READ CHOICES]

- 01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- 02 ALREADY HAVE INSURANCE
- 03 PARENT WORKING
- 04 APPLICATION IN PROCESS
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NK99c = 97, go to NK99co. Else skip to K100//

K99c //If NK99c = 97, go to NK99co.//

01 /TEXT RANGE=270/ _____

//Skip to K100.//

NK99d //If code "02" in K99b, ask//:

Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for //response in i90//?
 (DO NOT READ LIST)

[INTERVIEWER NOTE: When respondent finishes, probe with "Are there any other reasons?" Keep probing until respondent says "No" or "DK".]

[INTERVIEWER NOTE: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means no one tried to get Medicaid, Healthy Families, or Healthy Start for the child?"]

[MUL = 5]

- 01 CHILD ALREADY HAS INSURANCE
- 02 CHILD DOES NOT NEED THE COVERAGE

- 03 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- 04 DIDN'T THINK CHILD WAS ELIGIBLE OR QUALIFIED
- 05 DIDN'T KNOW ABOUT IT/NEVER HEARD OF IT
- 06 APPLICATION PROCESS TOO INVOLVED/HASSLE/TOO INTRUSIVE
- 07 CHILD WAS PREVIOUSLY TURNED DOWN
- 08 ANTICIPATE OBTAINING ADDITIONAL COVERAGE / FINDING ANOTHER JOB
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NK99d = 97, go to NK99do. Else, go to K100.//

NK99do //If NK99d = 97, go to NK99do.//

01 /TEXT RANGE=270/ _____

K100 //If code "01" in K98 then skip to K102//

//If code '02, 98, 99' in K99 ask//:

The last time //response in i90// had health insurance, was //response in i90// covered by a health insurance plan obtained through someone's employment or union?

- 01 (Skip to K102) YES
- 02 NO
- 98 DK
- 99 REFUSED

K101 Was //response in i90// covered by any other insurance that //you or your family paid for completely?

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

K102 // If K96 = 01, ask K102.//

DURING THE PAST 12 MONTHS, how long was //response in i90// without health insurance coverage?

(READ IF NECESSARY): Your best guess is fine

- 01 _____ Days {1-90} {programmer: K102days = K102}
- 02 _____ Weeks {1-51} {programmer: K102days = K102 * 7}
- 03 _____ Months{1-12} {programmer: K102days = K102 * 30}
- 98 DK
- 99 REFUSED

//All in K102 skip to NK123//

K103 //If K96 = "02", "98", "99" then ask://:

When was the last time //response in i90// had health care coverage?

[READ IF NECESSARY: Your best guess is fine.]

00 Never had health insurance coverage {programmer: K103days= i90a * 365 }
 01 _____ Days {1-90} {programmer: K103days= K103 }
 02 _____ Weeks {1-51} {programmer: K103days = K103 * 7}
 03 _____ Months{1-35} {programmer: K103days = K103 * 30}
 04 _____ Years {1-i90a}}{programmer: K103days = K103 * 365}
 98 DK
 99 REFUSED

//IF INTERVIEW TERMINATES AFTER THIS POINT AND PROTOCOL IS MET WITHOUT BECOMING A COMPLETE, CODE AS COMPLETE//

K104 Did anyone try to get Medicaid, Healthy Families, or Healthy Start for //response in i90// DURING THE PAST 12 MONTHS.

01 YES
 02 (Skip to NK106)NO
 98 (Skip to NK123)DK
 99 (Skip to NK123)REFUSED

NK105 Why was //response in i90// unable to get Medicaid, Healthy Families, or Healthy Start?

[INTERVIEWER NOTE: When respondent finishes, probe with "Are there any other reasons?" Keep probing until respondent says "No" or "DK".]

[INTERVIEWER NOTE: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means the child was unable to get Medicaid, Healthy Families, or Healthy Start?"]

[MUL = 6]

[DO NOT READ CHOICES]

01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
 02 ALREADY HAVE INSURANCE
 03 PARENT WORKING
 04 APPLICATION IN PROCESS/WAITING FOR APPLICATION
 05 APPLICATION DENIED/REFUSED/DIDN'T QUALIFY
 97 OTHER
 98 DK
 99 REFUSED

//If NK105 = 97, go to NK105O. Else, skip to NK123.//

01 /TEXT RANGE=270/ _____

// All go to NK123.//

NK106 **//If code "02" in K104 then ask://**

Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for //response in i90//

[INTERVIEWER NOTE: When respondent finishes, probe with "Are there any other reasons?" Keep probing until respondent says "No" or "DK".]

[INTERVIEWER NOTE: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means no one tried to get Medicaid, Healthy Families, or Healthy Start for the child?"]

[MUL = 10]

[DO NOT READ CHOICES]

- 01 CHILD ALREADY HAS INSURANCE
- 02 CHILD DOES NOT NEED THE COVERAGE
- 03 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- 04 DIDN'T THINK CHILD WAS ELIGIBLE OR QUALIFIED
- 05 DIDN'T KNOW ABOUT IT/NEVER HEARD OF IT
- 06 APPLICATION PROCESS TOO INVOLVED/HASSLE/TOO INTRUSIVE
- 07 CHILD WAS PREVIOUSLY TURNED DOWN
- 08 APPLICATION IN PROCESS
- 09 DIDN'T WANT GOVERNMENT ASSISTANCE
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NK106 = 97, go to NK106O. Else, go to NK123.//

NK106 O

01 /TEXT RANGE=270/ _____

PK123 DURING THE PAST 12 MONTHS, what are the reasons //response in i90// was uninsured ? (DO NOT READ CHOICES)

NK123 [INTERVIEWER: IF RESPONSE IS ONLY "COST", ASK R WHY COST WAS HIGH. SELECT "01"AND ANY OTHER REASONS R GIVES. IF RESPONSE IS "NOT ELIGIBLE/ NOT QUALIFIED/ CUT OFF/LOST COVERAGE", ASK R WHY. RECORD ALL REASONS. IF RESPONSE IS TOO GENERAL, ASK: "Can you please tell me why that means you were uninsured during the past 12 months?"] WHEN R FINISHES, ASK "Are there any other reasons?" ASK UNTIL R SAYS "NO/DK"]

[MUL = 13]

- 01 COST TOO HIGH / TOO EXPENSIVE/COULDN'T AFFORD
- 02 EMPLOYER DIDN'T PROVIDE COVERAGE / NOT ELIGIBLE FOR EMPLOYER'S COVERAGE / PART-TIME WORKER
- 03 NOT WORKING OR FAMILY MEMBER NOT WORKING OR LOST JOB
- 04 CHANGE IN (OWN/PERSON IN S1.S) OR FAMILY MEMBER.S JOB
- 05 CHANGE IN AGE, MARITAL, OR STUDENT STATUS
- 06 TURNED DOWN BY INSURANCE COMPANY OR LOST COVERAGE FOR HEALTH REASONS

- 07 MAKE TOO MUCH MONEY/LOST OR TOLD INELIGIBLE FOR MEDICAID,
HEALTHY FAMILIES, MEDICAL CARD, OR OTHER PUBLIC ASSISTANCE
- 08 DON'T NEED IT / IN GOOD HEALTH
- 09 WAITING TO BECOME ELIGIBLE FOR COVERAGE
- 10 LOST COVERAGE, OTHER REASONS OR REASONS NOT SPECIFIED
- 11 SELF EMPLOYED/ NOT ELIGIBLE/PART-TIME (UNSPECIFIED)
- 12 DIDN'T WANT/ BY CHOICE / NEVER APPLIED/JUST HAVEN'T
- 97 OTHER
- 98 DK
- 99 REFUSED

//If NK123 = 97, go to NK123O. Else, go to K124.//

K123 //If NK123 = 97, go to NK123O.//

01 /TEXT RANGE=270/ _____

K124 Did any of the following things happen to //response in i90// while (he/she) was uninsured DURING THE PAST 12 MONTHS?

(RANDOMLY ROTATE A, B, & C)

[INTERVIEWER: READ INTRODUCTION FIRST TIME AND THEN AS NEEDED]

- A Did //response in i90// have any major medical costs while (he/she) was uninsured?
[INTERVIEWER: RESPONDENT SHOULD DEFINE WHAT THEY CONSIDER A "MAJOR MEDICAL COST"]
- B Did you or your family delay or avoid getting care for //response in i90// because (he/she) was uninsured?
[IF NECESSARY: "Care" means any health care, including prescription drugs.]
- C Did you or your family(have any problems getting the care //response in i90// needed while (he/she) uninsured?
[IF NECESSARY: "Care" means any health care, including prescription drugs.]

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

SECTION L: HEALTH STATUS OF CHILD

//PROGRAMMER: Turn of prior timers. Please start timer for Section L.//

L125 Now I would like to ask about //response in i90's// health.
 In general, how would you describe //response in i90's//s health? Would you say [his/her] health is excellent, very good, good, fair, or poor? (NSCH)

- | | | |
|----|--|------------|
| 01 | | EXCELLENT, |
| 02 | | VERY GOOD, |
| 03 | | GOOD, |
| 04 | | FAIR, OR |
| 05 | | POOR? |
| | | |
| 98 | | DK |
| 99 | | REFUSED |

L125a **//If i90a >= 5 then ask://**
 In general how would you describe //response in i90's// MENTAL health? Would you say [his/her] health is excellent, very good, good, fair, or poor? (NSCH)

- | | | |
|----|--|------------|
| 01 | | EXCELLENT, |
| 02 | | VERY GOOD, |
| 03 | | GOOD, |
| 04 | | FAIR, OR |
| 05 | | POOR? |
| | | |
| 98 | | DK |
| 99 | | REFUSED |

L125a1 **//If (i90a > 9) and (i90a < 18) then ask://**
 (NSCH K2Q02)
 How tall is //response in i90's// now?

- | | | | | |
|----|-------------------|-------------|----------------|---------------------------------|
| 01 | <u> </u> | FEET | {range 3-6} | |
| | <u> </u> | INCHES | {range 0-11} | {L125inch=L125_01A*12+L125_01B} |
| 02 | <u> </u> | CENTIMETERS | {range 91-211} | {L125inch=round(L125_02*0.394)} |
| | | | | |
| 98 | | DK | | |
| 99 | | REFUSED | | |

L125a2
//If (i90a > 9) and (i90a < 18) then ask://
 (K2Q03)
 How much does //response in i90's// weigh now?

- | | | | | |
|----|---------------------------|-----------|-----------------|--|
| 01 | <u> </u> | POUNDS | {range 40-500} | {L125LBS = L125_01 } |
| 02 | <u> </u> | KILOGRAMS | {range 88- 227} | {L125LBS = L125_02 * 2.2} ¹⁰² |
| | | | | |
| 98 | | DK | | |
| 99 | | REFUSED | | |

¹⁰² Fixed limit on child's weight. For L125a2, changed the upper limit of pounds from 199 to 500.
 For kgs, the upper limit was changed from 438 to 227 ; 10/06

Pre_L126A

(NSCH K2Q10)

The next questions are about any kind of health problems, concerns, or conditions that may affect //response in i90's// behavior, learning, growth, or physical development.

[PRESS ANY KEY TO CONTINUE...]

L126a (NSCH K2Q10)

Does //response in i90// currently need or use medicine prescribed by a doctor, other than vitamins?

[IF NEEDED: This only applies to medications prescribed by a doctor. Over-the-counter medications such as cold or headache medication, or other vitamins, minerals, or supplements purchased without a prescription are not included.]

- 01 YES
- 02 **(Skip to L126d)** NO
- 98 **(Skip to L126d)** DON'T KNOW
- 99 **(Skip to L126d)** REFUSED

L126b (NSCH K2q11)

Is//response in i90// in need for prescription medicine because of ANY medical, behavioral, or other health condition?

- 01 YES
- 02 **(Skip to L126d)** NO
- 98 **(Skip to L126d)** DON'T KNOW
- 99 **(Skip to L126d)** REFUSED

L126c (NSCH K2Q12)

Is this a condition that has lasted or is expected to last 12 months or longer?

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

L126d (NSCH K2Q13)

Does // response in i90// need or use more medical care, mental health, or educational services than is usual for most children of the same age?

[IF NEEDED: The child requires more medical care, the use of more mental health services, or the use of more educational services than most children the same age.]

- 01 YES
- 02 **(Skip to L126g)** NO

98 (Skip to L126g) DON'T KNOW
99 (Skip to L126g) REFUSED

L126e (NSCH K2Q14)
Is // response in i90// in need of medical care, mental health or educational services because of ANY medical, behavioral, or other health condition?

01 YES
02 (Skip to L126g) NO
98 (Skip to L126g) DON'T KNOW
99 (Skip to L126g) REFUSED

L126f (NSCH K2Q15)
Is this a condition that has lasted or is expected to last 12 months or longer?

01 YES
02 NO
98 DON'T KNOW
99 REFUSED

L126g (NSCH K2Q16)
Is //response in i90// limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

[IF NEEDED: A child is limited or prevented when there are things the child can't do as much or can't do at all that most children the same age can.]

01 YES
02 (Skip to L126j) NO
98 (Skip to L126j) DON'T KNOW
99 (Skip to L126j) REFUSED

L126h (NSCH K2Q17)
Does //response i90// have any limitation in abilities because of ANY medical, behavioral, or other health condition?

01 YES
02 (Skip to L126j) NO
98 (Skip to L126j) DON'T KNOW
99 (Skip to L126j) REFUSED

L126i (NSCH K2Q18)
Is this a condition that has lasted or is expected to last 12 months or longer?

01 YES

02 NO
98 DON'T KNOW
99 REFUSED

L126j (NSCH K2Q19)
Does //response in i90// need or get special therapy, such as physical, occupational, or speech therapy?

[IF NEEDED: Special therapy includes physical, occupational, or speech therapy. Special therapy does NOT include psychological therapy or medical therapies such as chemotherapy.]

01 YES
02 (Skip to L126m) NO
98 (Skip to L126m) DON'T KNOW
99 (Skip to L126m) REFUSED

L126k (NSCH K2Q20)
Is //response in i90// in need for special therapy because of ANY medical, behavioral, or other health condition?

01 YES
02 (Skip to L126m) NO
98 (Skip to L126m) DON'T KNOW
99 (Skip to L126m) REFUSED

L126l (NSCH K2Q21)
Is this a condition that has lasted or is expected to last 12 months or longer?

01 YES
02 NO
98 DON'T KNOW
99 REFUSED

L126m (NSCH K2Q22)
Does //response in i90// have any kind of emotional, developmental, or behavioral problem for which //response in i90// needs treatment or counseling?

[IF NEEDED: These are remedies, therapy, or guidance a child may receive for his/her emotional, developmental, or behavioral problem.]

01 YES
02 (Skip to LAS1) NO
98 (Skip to LAS1) DON'T KNOW
99 (Skip to LAS1) REFUSED

L126n (NSCH K2Q23)

Has //response in i90's// emotional, developmental or behavioral problem lasted or is it expected to last 12 months or longer?

01	YES
02	NO
98	DON'T KNOW
99	REFUSED

LAS1a Has a doctor or other health professional EVER told you that //response in i90// has asthma?

01	YES
02	NO
98	DK
99	REFUSED

LAS1b (NSCH K2Q40B)
Does //response in i90// currently have asthma?

01	YES
02	(Skip to LAS5) NO
98	(Skip to LAS5) DK
99	(Skip to LAS5) REFUSED

LAS2 (NSCH K2Q40C)
Would you describe (his/her) asthma as mild, moderate, or severe?

01	MILD
02	MODERATE
03	SEVERE
98	DK
99	REFUSED

LAS5 (NSCH K2Q41B)
Does //response in i90// currently have diabetes?

[IF NEEDED: Diabetes is a disease in which the body does not properly make or use insulin.]

01	YES
02	(Skip to LAS7) NO
98	(Skip to LAS7) DK
99	(Skip to LAS7) REFUSED

LAS6 (NSCH K2Q41C)
Would you describe (his/her) diabetes as mild, moderate, or severe?

- 01 MILD
- 02 MODERATE
- 03 SEVERE

- 98 DK
- 99 REFUSED

LAS7 About how long has it been, if ever, since //response in i90// was tested for LEAD, such as from paint?

[IF NECESSARY: Your best guess is fine.]

- 00 _____ NEVER {programmer: LAS7days = i90a * 365}
- 01 _____ Days {1-90} {programmer: LAS7days = LAS7 }
- 02 _____ Weeks {1-51} {programmer: LAS7days = LAS7 * 7}
- 03 _____ Months{1-35} {programmer: LAS7days = LAS7 * 30}
- 04 _____ Years {1-i90a} {programmer: LAS7days = LAS7 * 365}

- 98 DK
- 99 REFUSED

LAS8 // If LAS7 = 01, 02, 03 or 04 then ask://
Why was //response in i90// tested for lead?

[INTERVIEWER NOTE: MULTIPLE RESPONSES ALLOWED]

//MUL=3//

- 01 HAD HEALTH PROBLEMS
- 02 CONDITION OF THE HOME, PEELING PAINT
- 03 MEDICAID REQUIREMENT
- 04 OTHER

- 98 DK
- 99 REFUSED

LAS8oth //If LAS8 includes "04" then ask://
Why was //response in i90// tested for lead?

[INTERVIEWER: RECORDED //restore responses of LAS8//]
[SPECIFY "OTHER" RESPONSE]

- 01 /TEXT RESPONSE=70/ _____

- 98 DK
- 99 REFUSED

LAS9 //If L126c = "01" OR L126f = "01" OR L126i = "01" OR L126l = "01" OR L126n = "01" then ask://

(C3Q02)

//If i90a = "00" then restore:// Since his/her birth, how often have //response in i90's//

//else restore:// During the past 12 months, how often have //response in i90's//

//If L126c = "01" OR L126f = "01" OR L126i = "01" OR L126l = "01" then restore:// medical, behavioral, or other health conditions

//If L126n = "01" then restore:// emotional, developmental, or behavioral problems

// If both the above sets of conditions exist, then restore "medical, behavioral, emotional, developmental or other health conditions"

affected //his or her// ability to do things other children //his or her// age do? Would you say:

[READ IF NECESSARY: "This question asks how often your child's abilities are affected by his/her health. It does not ask about the severity, intensity, or magnitude of the effect."]

[IF NEEDED: FOR EXAMPLE, IF A CHILD'S ASTHMA WAS SEVERE BUT THE ATTACKS WERE RARE, THIS QUESTION WOULD BE ANSWERED WITH "SOMETIMES." IF THE CONDITION IS EPISODIC, RESPONDENTS SHOULD THINK ABOUT HOW OFTEN THE CONDITION HAS AFFECTED THE CHILD'S ABILITIES DURING THE PAST ENTIRE 12 MONTHS.]

01 (Skip to LAS13) Never
02 Sometimes
03 Usually
04 Always

98 (Skip to LAS13) DK
99 (Skip to LAS13) REFUSED

LAS10 //If (i90a > 3) AND (L126c = "01" or L126f = "01" or L126i = "01" or L126l = "01" or L126n = "01") then ask://

(S3Q07)

//if i90a < 18 then restore:// Compared to other //restore i90a //-year-old children, would you say //he/she// experiences any difficulty taking care of //himself or herself//, for example, doing things like eating, dressing and bathing?

//else restore:// Compared to other children his/her age, would you say //he/she// experiences any difficulty taking care of //himself or herself//, for example, doing things like eating, dressing and bathing?

01 YES
02 NO

98 DK
99 REFUSED

LAS11 //If (i90a > 3) AND (L126c = "01" or L126f = "01" or L126i = "01" or L126l = "01" or L126n = "01") then ask://

(S3Q10)

//if i90a < 18 then restore:// Compared to other //restore i90a //-year-old children, would you say //he/she// experiences any difficulty learning, understanding, or paying attention?

//else restore:// Compared to other children his/her age, would you say //he/she// experiences any difficulty learning, understanding, or paying attention?

01 YES
02 NO

98 DK
99 REFUSED

LAS12 //If (i90a > 3) AND (L126c = "01" or L126f = "01" or L126i = "01" or L126l = "01" or L126n = "01")
then ask://

(S3Q11)

//if i90a < 18 then restore:// Compared to other //restore i90a //-year-old children, would you say
//he/she// experiences any difficulty speaking, communicating, or being understood

//else restore:// Compared to other children his/her age, would you say //he/she// experiences any
difficulty speaking, communicating, or being understood

01 YES
02 NO

98 DK
99 REFUSED

LAS13 At the present time, would you say // response in i90's// eyesight, with glasses or contact lenses if he/she wears
them, is excellent, good, fair, poor, or very poor?

01 EXCELLENT
02 GOOD
03 FAIR
04 POOR
05 VERY POOR

98 DK
99 REFUSED

SECTION M: UTILIZATION AND QUALITY OF CHILD HEALTH CARE SERVICES

//Programmer: Turn of prior timers. Please start timer for Section M.//

M130 //if i90a = "00" then restore:// Since his or her birth did //response in i90// receive a well-child or well-baby checkup, that is a general checkup when (she/he) was NOT sick or injured?
 //else restore:// During the past 12 months did //response in i90// receive a well-child or well-baby checkup, that is a general checkup when (she/he) was NOT sick or injured?

- 01 YES
- 02 NO
- 98 DK
- 99 REFUSED

M131 NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since //response in i90// last saw a doctor or other health care professional about (his/her) health?

[READ IF NECESSARY: Include either care for sickness or injury, or a general checkup.]

[READ IF NECESSARY: Your best guess is fine. About how long ago was //response in i90's// last visit to a doctor or health professional?]

- 00 _____ NEVER {programmer: M131days = i90a * 365}
- 01 _____ Days {1-90} {programmer: M131days= M131 }
- 02 _____ Weeks {1-51} {programmer: M131days= M131 * 7}
- 03 _____ Months{1-35} {programmer: M131days= M131 * 30}
- 04 _____ Years {1-i90a} {programmer: M131days= M131*365}
- 98 DK
- 99 REFUSED

M131a //If M131=00 then ask M131a://

I want to make sure I have this right, //response in i90// has never visited a doctor or any other health care professional in their offices for a routine check-up, physical, or for any reason?

- 01 CORRECT – Never been to a doctor/ health care professional.
- 02 CORRECT – Have been to a doctor/health care professional, but not in their office.
- 98 DK
- 99 REFUSED

M132 DURING THE PAST 12 MONTHS, how many times was //response in i90// admitted to a hospital for a stay that was OVERNIGHT or longer?¹⁰³

[IF NECESSARY: I am asking you about the number of stays that were overnight or longer, NOT the number of nights //response in i90// stayed in the hospital. For example, if the child has only been admitted to the

¹⁰³ Fixed typo from "hospital" to "hospital"; 8/26

hospital ONCE for a 5 night long stay, the correct response would be “1 time”.]

[IF NECESSARY: Your best guess is fine.]

00	NONE
01-12	(Code actual value)
13	MORE THAN 12
98	DK
99	REFUSED

M134 DURING THE PAST 12 MONTHS, how many times was //response in i90// a patient in a hospital emergency room, include emergency room visits where (he/she) was admitted to the hospital?

[PROMPT IF NECESSARY: Your best guess is fine.]

00	(Skip to LAS14) NONE
01-20	(Code actual value)
21	MORE THAN 20
98	(Skip to LAS14) DK
99	(Skip to LAS14) REFUSED

LAS14 About how long has it been, if ever, since //response in i90// last had //his/her// eyes examined by any doctor or eye care providers?

[IF NECESSARY: Your best guess is fine.]

00	_____	NEVER {programmer: LAS14days = i90a*365}
01	_____	Days {1-90} {programmer: LAS14days=LAS14 }
02	_____	Weeks {1-51} {programmer: LAS14days=LAS14 * 7}
03	_____	Months{1-35} {programmer: LAS14days=LAS14 * 30}
04	_____	Years {1-i90a} {programmer: LAS14days=LAS14*365}
98		DK
99		REFUSED

M135 //If i90a > 00 then ask://

About how long has it been since //response in i90// last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists [HY-JEN-IST].

[READ IF NECESSARY: Your best guess is fine. How long ago was //response in i90' s// last dental visit?]

00	_____	NEVER {programmer: M135days = i90a * 365}
01	_____	Days {1-90} {programmer: M135days= M135 }
02	_____	Weeks {1-51} {programmer: M135days= M135 * 7}
03	_____	Months{1-35} {programmer: M135days= M135 * 30}
04	_____	Years {1-i90a} {programmer: M135days= M135*365}
98		DK
99		REFUSED

M135a //If i90a > 00 then ask:// (NSCH K4Q21)

During the past 12 months did //response in i90// see a dentist for preventive dental care, such as check-ups and dental cleanings?

01	YES
02	NO
98	DK
99	REFUSED

M136 //If (M130 = 01) OR (M131days = 001 to 365) OR (M132 = 01 to 13) OR (M134 = 01 to 21) OR (M135days = 001 to 365) OR (M135a = 01) then ask://

How would you rate the overall quality of ALL of the HEALTH care that //response in i90// received DURING THE PAST 12 MONTHS, using any number from 0 to 10 where 0 is the worst HEALTH care possible, and 10 is the best HEALTH care possible?

[IF NECESSARY: "Dental care is included."]

00	WORST
01	
02	
03	
04	
05	
06	
07	
08	
09	
10	BEST
98	DK
99	REFUSED

SECTION N: ACCESS TO CARE FOR CHILD

//PROGRAMMER: Turn of prior timers. Please start timer for Section N.//

N137 Is there ONE place that //response in i90// USUALLY goes when (he/she) is sick or needs advice about (his/her) health?

[INTERVIEWER NOTE: This question asks IF the respondent has a usual provider, NOT if they have seen the provider recently (this includes those who have never seen their usual provider)]

- 01 (Skip to N137a1) YES
- 02 NO
- 03 (Skip to N137a2) YES, VOLUNTEERED THAT THERE IS MORE THAN ONE PLACE
- 98 (Skip to K4Q24) DK
- 99 (Skip to K4Q24) REFUSED

N137chek Just to be sure, is it that there is NO PLACE at all that //response in i90// usually goes to when sick or needing advice about health, OR is it that //response in i90// goes to more than ONE place?

- 01 (Skip to NN137f) NO PLACE AT ALL
- 02 (Skip to N137a2) MORE THAN ONE PLACE
- 98 (Skip to K4Q24) DK
- 99 (Skip to K4Q24) REFUSED

N137a1 What kind of place is it-- a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place?

[IF NECESSARY: Hospital Emergency Room: an operating room reserved for emergency operations, Hospital Outpatient: a patient that does not stay overnight in the hospital where they are being treated]

- 01 (Skip to N137b) DOCTOR'S OFFICE OR HMO
- 02 (Skip to N137b) HOSPITAL EMERGENCY ROOM
- 03 (Skip to N137b) HOSPITAL OUTPATIENT DEPARTMENT
- 04 (Skip to N137b) CLINIC OR HEALTH CENTER
- 05 (Skip to N137b) SCHOOL (NURSE'S OFFICE, ATHLETIC TRAINER'S OFFICE, ETC)
- 07 (Skip to N137aOth) SOME OTHER PLACE
- 09 (Skip to N137b) DOES NOT GO TO ONE PLACE MOST OFTEN
- 98 (Skip to NN137f) DK
- 99 (Skip to NN137f) REFUSED

N137a2 What kind of place does //response in i90// go to most often? Is it a clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

[IF NECESSARY: Hospital Emergency Room: an operating room reserved for emergency operations, Hospital Outpatient: a patient that does not stay overnight in the hospital where they are being treated.]

- 01 (Skip to N137b) DOCTOR'S OFFICE
- 02 (Skip to N137b) HOSPITAL EMERGENCY ROOM
- 03 (Skip to N137b) HOSPITAL OUTPATIENT DEPARTMENT

- 04 (Skip to N137b) CLINIC OR HEALTH CENTER
- 05 (Skip to N137b) SCHOOL (NURSE'S OFFICE, ATHLETIC TRAINER'S OFFICE, ETC)
- 06 (Skip to N137b) FRIEND/RELATIVE
- 07 (Skip to N137aOth) SOME OTHER PLACE
- 09 (Skip to N137b) DOES NOT GO TO ONE PLACE MOST OFTEN

- 98 (Skip to N137f) DK
- 99 (Skip to N137f) REFUSED

N137aOth //If (N137a = 07) OR (N137a1 = 07) then ask://

What kind of place does //response in i90// go to most often?

- 01 /TEXT RANGE=270/ _____

- 98 DK
- 99 REFUSED

N137b (NSCH K4Q04)

A personal doctor or nurse is a health professional who knows your child well and is familiar with your child's health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner, or a physician's assistant.

Do you have one or more persons you think of as //Response in i90's//'s personal doctor or nurse?

[INTERVIEWER NOTE: If respondent sees a doctor and nurse in the same visit, code as 01 – DOCTOR]¹⁰⁴

- 01 YES, ONE PERSON
- 02 YES, MORE THAN ONE PERSON
- 03 NO

- 98 DK
- 99 REFUSED

N137c //If L126c = 01 OR L126f = 01 OR L126i = 01 OR L126l = 01 OR L126n = 01 then ask://

During the past 12 months, was there any time //response in i90// needed professional help coordinating care or coordinating referrals among different health care providers and services that //response in i90// uses?

[IF NECESSARY: A professional who assists in coordinating care is a person who makes sure that //response in i90// gets all the services that are needed and makes sure that these services fit together in a way that works for //response in i90//.]

[Coordinating referrals means making sure that //response in i90// gets all the services that are needed from different providers]

- 01 YES
- 02 (Skip to NN137e)¹⁰⁵ NO

- 98 (Skip to NN137e) DK
- 99 (Skip to NN137e) REFUSED

¹⁰⁴ Interviewer note added; 8/28

¹⁰⁵ Changed skip for response options 02, 98 and 99 from "Skip to K4Q24" to "Skip to NN137e"; 10/2

N137d During the past 12 months, how often did you get as much help as you wanted with arranging or coordinating //person in i90// care? Would you say: Never, Sometimes, Usually, or Always?

- 01 Never
- 02 Sometimes
- 03 Usually
- 04 Always

- 98 DK
- 99 REFUSED

NN137e //If N137a1 = "02" OR N137a2 = "02" then ask//:

What is the main reason //response in i90// usually goes to the emergency room instead of a doctor's office or clinic?

[INTERVIEWER: IF RESPONDENT PROVIDES MORE THAN ONE REASON, ASK FOR MAIN REASON]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means you do go to the emergency room instead of a doctor's office or clinic?"]

- 01 CAN'T AFFORD TO GO ELSEWHERE/THEY DON'T TURN ANYONE AWAY
- 02 DIDN'T KNOW WHERE ELSE TO GO
- 03 CONVENIENCE/DON'T NEED AN APPOINTMENT
- 04 BEST PLACE TO GET CARE FOR CONDITION
- 05 PREFERS/LIKES THIS AS USUAL SOURCE
- 06 NO REGULAR DOCTOR
- 07 OTHER
- 98 DK
- 99 REFUSED

// If NN137e = 97, ask NN137eo. Else, go to NN137f.//

N137e // If NN137e = 97, ask NN137eo.//

01 /TEXT RANGE=270/ _____

NN137f //If (N137chek = 01) or (N137a1= 98 or 99) or (N137a2= 98 or 99), ask NN137f.://

What is the main reason //response in i90// does NOT have a usual source of care? (DO NOT READ LIST)

[INTERVIEWER: IF RESPONDENT PROVIDES MORE THAN ONE REASON, ASK FOR MAIN REASON]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why that means you do go to the emergency room instead of a doctor's office or clinic?"]

- 01 SELDOM OR NEVER GET SICK

02 DON'T KNOW WHERE TO GO FOR CARE
 03 PREVIOUS DOCTOR/SOURCE NO LONGER AVAILABLE
 04 LIKE TO GO TO DIFFERENT PLACES FOR DIFFERENT HEALTH NEEDS
 05 JUST CHANGED INSURANCE PLANS
 06 DON'T USE OR LIKE DOCTORS/TREAT MYSELF
 07 COST/TOO EXPENSIVE
 08 NO INSURANCE
 09 BOOKS/INTERNET/HOTLINE (get needed info from)
 97 OTHER
 98 DK
 99 REFUSED

// If NN137f = 97, go to NN137fo. Else, go to K4Q24.//

N137f

01 /TEXT RANGE=270/ _____

K4Q24 Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

//if i90 = "00" then restore:// Since his/her birth, did //response in i90's// see a specialist?

//otherwise restore:// During the past 12 months, did //response in i90's// see a specialist?

01 (Skip to K4Q26) YES
 02 NO
 98 DON'T KNOW
 99 REFUSED

K4Q25 //if i90 = "00" then restore:// Since his/her birth, did you or a doctor think that [he/she] needed to see a specialist?

//otherwise restore:// During the past 12 months, did you or a doctor think that [he/she] needed to see a specialist?

01 YES
 02 (Skip to O139) NO
 98 (Skip to O139) DON'T KNOW
 99 (Skip to O139) REFUSED

K4Q26 //if i90 = "00" then restore:// Since his/her birth, how much problem, if any, was it for //response in i90's// to see a specialist? Was it a big problem, small problem, or no problem?

//otherwise restore:// During the past 12 months, how much problem, if any, was it for //response in i90's// to see a specialist? Was it a big problem, small problem, or no problem?

01 BIG PROBLEM
 02 (Skip to O139) SMALL PROBLEM
 03 (Skip to O139) NOT A PROBLEM
 98 (Skip to O139) DON'T KNOW
 99 (Skip to O139) REFUSED

J104c Can you please tell me why was it a big problem for //response in i90// to see a SPECIALIST?

[INTERVIEWER NOTE: MULTIPLE RESPONSES ALLOWED. PROBE: "Are there any other reasons?"
PROBE UNTIL RESPONSE SAYS "No" OR "DK".]

//MUL=15//

01	NO SPECIALIST NEARBY
02	INSURANCE PLAN RESTRICTIONS/RULES
03	NO REASON TO GO (NO PROBLEMS)
04	HAVE NOT THOUGHT OF IT
05	OTHER PRIORITIES
06	COST/CAN'T AFFORD CARE/NO INSURANCE
07	NO REGULAR PROVIDER
08	PROFESSIONAL SAID NOT NEEDED (YET)
09	NO CONVENIENT APPOINTMENTS AVAILABLE
10	CANNOT GET TO THE OFFICE/CLINIC (TOO FAR AWAY, NO TRANSPORTATION)
11	CHILD/ADULT CARE PROBLEM
12	FEAR - BAD NEWS
13	FEAR - PAIN
14	FEAR - EMBARRASSMENT
15	FEAR THE PROCEDURE MAY CAUSE OTHER HEALTH PROBLEM
97	OTHER
98	DK
99	REFUSED

J104d //If J104c=97 then ask://

Why was it a problem for //response in i90// to see a specialist?

01	/TEXT RANGE=270/ REASON: _____
98	DK
99	REFUSED

SECTION O: UNMET HEALTH NEEDS OF FAMILY

//PROGRAMMER: Turn of prior timers. Please start timer for Section O.//

O139 DURING THE PAST 12 MONTHS, was there a time when //person in i90// needed dental care but could NOT get it at that time?

01	YES
02	(Skip to O140) NO
98	(Skip to O140) DK
99	(Skip to O140) REFUSED

NO139 What was the main reason //person in i90// could not get dental care? (DO NOT READ CHOICES)

[INTERVIEWER NOTE: If response is vague, such as "They said care wasn't needed", probe to find out what the MAIN barrier is]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why the child did not have dental care?"]

- 01 TOO EXPENSIVE/COULDN'T AFFORD IT
- 02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03 COULDN'T FIND DENTIST
- 04 DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06 DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T
NEEDED
- 07 TRANSPORTATION
- 97 OTHER
- 98 DK
- 99 REFUSED

// If NO139 = 97, go to NO1390. Else, go to O140.//

O139spec

01 /TEXT RANGE=270/ _____

O140 In the PAST 12 MONTHS, has //response in i90// NOT had a prescription filled because of the cost?
[IF NECESSARY, ADD: This includes refills.]

- 01 YES
- 02 NO
- 03 VOLUNTEERED: NO, NEVER HAD A PRESCRIPTION

- 98 DK
- 99 REFUSED

O141 DURING THE PAST 12 MONTHS, was there any time when //person in i90// did NOT get any other health care that //she/he// needed, such as a medical exam, medical supplies, mental health care, or eyeglasses?

- 01 YES
- 02 **(Skip to O144)** NO

- 98 **(Skip to O144)** DK
- 99 **(Skip to O144)** REFUSED

NO142A What was the health care that //person in i90// needed but did NOT get?
//MUL=10//

[INTERVIEWER NOTE: If respondent mentions only insurance or lack of insurance, ask what care insurance did NOT pay for, and record that. If respondent mentions a symptom or condition rather than needed health care (e.g., "back problem"), ask what care they/wanted but did NOT get for that symptom/condition and code. KEEP PROBING UNTIL THE RESPONDENT SAYS "DK" OR "NOTHING ELSE.]

- 01 A DOCTOR VISIT, CHECKUP, OR EXAM
- 02 MENTAL HEALTH CARE (counseling)
- 03 EYEGLASSES OR VISION CARE (cataracts, ophthalmologist)

- 04 MEDICAL SUPPLIES OR EQUIPMENT
- 05 APPOINTMENT OR REFERRAL TO A SPECIALIST (dermatologist, endocrinologist, chiropractor, gastroenterologist, gynecologist)
- 06 DENTAL
- 07 OTHER MEDICAL TREATMENT (TESTS/SURGERY/OTHER PROCEDURES/THERAPIES) (x-rays, cancer or heart attack tests)
- 08 MEDICATIONS/PRESCRIPTIONS (patches, pills, shots)
- 09 CARE FOR OTHER AILMENT OR BODYPART
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

O142A

01 /TEXT RANGE=270/ _____

NO14301 //If NO142a=01to 97, ask NO14301.//

What was the main reason //person in i90// did not get//first response in NO142A//?

[INTERVIEWER NOTE: If response is vague (e.g. "They said care wasn't needed"), probe to find out what the main barrier was.]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why the child did not get this health care?"]

[DO NOT READ CHOICES]

- 01 TOO EXPENSIVE/COULDN'T AFFORD IT
- 02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03 COULDN'T FIND DOCTOR OR DENTIST
- 04 DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06 DOCTOR OR DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED
- 07 TRANSPORTATION
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

NO14301O

01 /TEXT RANGE=270/ _____

NO14302 What was the main reason //person in i90// did not get//second response in NO142A//?

[INTERVIEWER NOTE: If response is vague (e.g. "They said care wasn't needed"), probe to find out what the main barrier was.]

[INTERVIEWER: IF RESPONSE IS TOO GENERAL, THEN ASK: "Can you please tell me why the child did not get this health care?"]

[DO NOT READ CHOICES]

- 01 TOO EXPENSIVE/COULDN'T AFFORD IT
- 02 NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03 COULDN'T FIND DOCTOR OR DENTIST
- 04 DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06 DOCTOR OR DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED
- 07 TRANSPORTATION
- 96 NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97 OTHER
- 98 DK
- 99 REFUSED

NO143020

01 /TEXT RANGE=270/ _____

O144 Compared with three years ago, is getting the medical care //response in i90// needs becoming easier, harder, or has it stayed the same?

[IF NEEDED: "In general, do the guardians of //response in i90// find getting medical care for //response in i90// is easier, harder, or about the same compared to three years ago?"]

- 01 EASIER
- 02 HARDER
- 03 STAYED THE SAME

- 98 DK
- 99 REFUSED

SECTION P: CHILD'S DEMOGRAPHICS

//PROGRAMMER: Turn of prior timers. Please start timer for Section P.//

P148 And finally a few questions for classification and verification purposes...
What is //response in i90//’s gender?

01	MALE
02	FEMALE
99	REFUSED

P149 Is //response in i90// of Hispanic or Latino origin?

01	YES
02	NO
98	DK
99	REFUSED

P150 Which one or more of the following would you say is //response in i90’s// race? Is //response in i90// White, Black or African-American, Asian, Native American, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned?

[CODE ALL THAT APPLY]

[Probe if respondent states Hispanic/Latino/Spanish to determine if they are White, Black, Asian, Native American, or Native Hawaiian...]

//MUL=7//

01	White
02	Black or African American
03	Asian
04	Native American, American Indian, or Alaska Native
05	Native Hawaiian or Other Pacific Islander
06	HISPANIC, LATINO, OR SPANISH
97	(GO TO P150o) OTHER
98	DK
99	REFUSED

P150o // If P150 = “97” then ask://
How would you describe //response in i90’s// race?

01	/TEXT RANGE=70/ _____
98	DK
99	REFUSED

P150a //If more than one selection in P150 then ask://

ChRefusal //Skip to Q158//

CLOSING SECTION FOR MAIN AND OVER SAMPLE

Q160 This concludes our interview. We want to reassure you that your responses will be kept strictly confidential.
Thank you so very much!

//PROGRAMMER: INTERVIEW FINISH TIME. Use 24 hour clock//

//PROGRAMMER: Close all timers//

CLOSING SECTION FOR CELL PHONE SAMPLE

Q160 This concludes our interview. We want to reassure you that your responses will be kept strictly confidential.
Thank you so very much!

//PROGRAMMER: INTERVIEW FINISH TIME. Use 24 hour clock//

Closec. In appreciation for the time you have spent answering our questions, we would like to give a \$10 Amazon.com gift certificate code.

Would you like the number of the Amazon.com gift certificate now?

[INTERVIEWER IF ASKED: "The code is something you can use online at AMAZON.COM. It's like a gift certificate. We just give you the unique code and you enter the code in online when you make a purchase at AMAZON.COM. There is no expiration date."]

1 Get it now

2 Get it later

(skip thanx) 9 DECLINED INCENTIVE/REFUSED }

If closec=1

Ok. Your gift code is \\Gcode|

If closec=2

Getnow2. No problem. Would you like us to text message the gift certificate or would you like to call us back at your convenience?

1 Text message

2 Call back when convenient

If getnow2=1

We'll text you the gift certificate within 24 hours. Please let us know your carrier.

- 01 Alltel
- 02 AT&T (Cingular)
- 03 Cellular One
- 04 Centennial
- 05 Leaps (Cricket)
- 06 Metrics
- 07 Nextel
- 08 Quest
- 09 Sprint
- 10 Suncom
- 11 T-Mobile
- 12 UniceL (Rural Cellular)
- 13 US Cellular
- 14 Verizon
- 15 None of these
- 98 Don't know
- 99 Refused }

If text1=15, 98, 99

Notext. I'm sorry, we can't text message this provider. Would you like the number of the Amazon.com gift certificate now or would you like to call us back at your convenience?

- 1 Get it now
- 2 Call back when convenient }

If notext=1

Ok. Your gift code is \\Gcode|

If you have any questions about your gift code, please call 1-888-871-0272.

If getnow2=2 or notext=2

OK, please call us at 1-888-871-0272 to get the gift certificate. It will be available for 30 days.

Thank you again for your participation

END

//PROGRAMMER: Close all timers//

SECTION T: INTERVIEWER ASSESSMENT OF INTERVIEW QUALITY

(The following are questions for interviewers to answer)

POST1 INTERVIEWER:

OVERALL, HOW WOULD YOU RATE THIS INTERVIEW EXPERIENCE?

- | | |
|----|-----------|
| 01 | Poor |
| 02 | Fair |
| 03 | Good |
| 04 | Very good |
| 05 | Excellent |

POST2 INTERVIEWER:

HOW WOULD YOU (THE INTERVIEWER) RATE THE QUALITY OF THE INFORMATION OBTAINED IN THIS INTERVIEW?

PLEASE REMEMBER THAT WE ARE CONCERNED ABOUT THE ACCURACY OF THE DATA, NOT THE DIFFICULTY OF OBTAINING THE INTERVIEW.

- | | |
|----|--|
| 01 | Poor (Extreme number of problems) |
| 02 | Fair (Many problems, overall quality open to question) |
| 03 | Good (Some problems, overall quality was good) |
| 04 | Very good (Few problems, overall quality was good) |
| 05 | Excellent (No problems at all) |

POST3 //if code "01-03" in POST2 then ask://

INTERVIEWER: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT?

ENTER ALL RESPONSES

//MUL=13//

- | | |
|----|--|
| 01 | Interview not in respondent's native language |
| 02 | Hearing (hearing loss or background noise) |
| 03 | Interruptions or distractions |
| 04 | Poor phone connection |
| 05 | Lack of mental or physical competency to respond |
| 06 | Infirm or ill |
| 07 | Intoxication |
| 08 | r. was rushed |
| 09 | r. did not take interview seriously |
| 10 | r. did not understand the meaning of some of the questions |
| 11 | r. may not have been truthful because someone else was listening |
| 12 | r. was offended by interview |
| 97 | OTHER (SPECIFY) _____ |

POST3_OTHER //IF POST3 INCLUDES "97"//

INTERVIEWER: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT?

01 //TEXT RANGE=270// OTHER SPECIFY: _____

98

DK

99

REFUSED

POST4 INTERVIEWER: LANGUAGE INTERVIEW CONDUCTED IN:

01 ENGLISH

02 SPANISH

(THIS IS THE END OF THE ADULT SECTION)

APPENDIX E: RESPONSE RATE FORMULAS

Lower Bound Response Rate

Definition for this survey:

$$\frac{I}{(I + P) + (R + NC + O) + (UH + UO)}$$

Common Response Rate

Definition for this survey:

$$\frac{I}{(I + P) + (R + NC + O) + e * (UH + UO)}$$

Upper Bound Response Rate

Definition for this survey:

$$\frac{I}{(I + P) + R}$$

Category			Examples
I	=	Complete interview	Full Interview
P	=	Partial interview	Full adult, partial child information obtained
R	=	Refusal and break-off	Resistance or refusal on household or selected respondent level
NC	=	Non-contacts	Answering machine
O	=	Other	Language barrier, mentally incompetent
UH	=	Unknown if a household	Repeated busy tone, blocking devices
UO	=	Unknown, Other	No screener completed
e	=	Estimated proportion of cases of unknown eligibility that are eligible	$(I + P + R + NC + O) / (I + P + R + NC + O + \text{non-working numbers} + \text{business numbers} + \text{all other numbers which are not eligible for the study})$

APPENDIX F: QUALIFICATIONS OF INTERVIEWERS

Interviewer Selection

Macro International places a high value on the recruitment, qualifications, and monitoring of the field and telephone interviewing staff. This section outlines the strategies and standards that Macro International employs to ensure the consistent, accurate, and professional administration of surveys by the interviewers.

Interviewer recruitment

Macro International has an ongoing organizational commitment to interviewer recruitment. Continuous recruitment is necessary to accommodate growth in the contracted workload and to keep pace with the normal turnover that occurs in a large workforce.

To accomplish this goal, Macro International remains in contact with the local market and maintains a database of available interviewers, enabling us to respond quickly to sudden increases in business volume or a need for special skills on short notice. Macro International's continual interviewer recruitment process is managed by a full-time team that includes a full-time human resources manager, the data collection manager, a payroll supervisor and a team of experienced interviewing supervisors located at the Burlington and St. Albans, VT, and Plattsburgh NY Computer Assisted Telephone Interviewing (CATI) Research Centers. Telephone and field interviewers are recruited through the local daily and weekly newspapers, the college newspapers, and regular job fairs at colleges in the immediate vicinity. The CATI Research Center's human resource manager also works closely with the Employment Services Office of the Vermont and New York Departments of Labor.

Interviewer qualifications

Prospective interviewers must meet three criteria before becoming part of Macro International's interviewing staff:

- **A minimum high school-level educational standing.** While Macro International's interviewers must meet minimum high school education standards, many of Macro International's interviewers exceed this requirement. Macro International's long-term recruiting strategy includes targeting local colleges with programs and courses in specific fields related to Macro International's survey research projects. The CATI Operations Manager develops relationships with college advisors and program administrators in an effort to obtain interviewers experienced in fields such as counseling, community development, nursing, nutritional sciences, public health, psychology, and social work. Interviewers with this type of background are considered highly eligible for public health survey projects.
- **Communication skills.** Interviewers must exhibit good communication skills and in order to be hired, must first pass an individual job interview that seeks to evaluate their abilities in this area. A prospective employee's performance in the initial interview is generally a good indicator of his or her future performance as a survey interviewer. During this interview,

each applicant completes a brief spelling and keyboarding test, reads a standard diagnostic text, and is asked to participate in several role-playing exercises. These mock interviews involve hypothetical interviews with the recruiter following pre-arranged scenarios. During the initial recruitment interview, recruiters assess the applicant's overall ability to understand, retain, and follow complex instruction information related to completing a survey. All interviewers must have a thorough command of the English language; additional languages are considered highly desirable as well. Bilingual interviewers may be specifically recruited to work on surveys administered in languages other than English.

- **Professional manner.** Macro International's recruiters are trained to look for clues regarding specific personality traits or qualities of prospective interviewers that will facilitate the tasks of interviewing. Good interviewers are persuasive, patient, calm, compassionate, optimistic, and empathetic. They must maintain a positive and fresh approach in a job that is repetitive in nature. They must remain alert and focused. They must also remain calm and courteous in the face of potential objections or outright rejection by respondents. Macro International is fully aware of the importance of these qualities in a strong interviewing staff and works diligently to achieve them in the recruitment, hiring, and retention of interviewing staff.

General Training

Following recruitment, Macro International's telephone interviewers receive initial training consisting of the CATI program training, interview protocol training, and administrative issues before they participate in project-specific training. Field interviewers receive a similar training that focuses on the administration of surveys in person.

General training takes place over two days. The first day of general training introduces interviewers to survey research, the role of the interviewer, and the CATI or Computer Assisted Personal Interviewing (CAPI) system, and covers several topics in a 4-hour session:

- Survey research techniques,
- Telephone and field surveys,
- CATI system, along with group practice interviews,
- The role of the interviewer in survey research,
- Types of samples,
- Types of respondents,
- Determining household and respondent eligibility, and
- Interviewing techniques such as question reading, entering responses, probing for responses, the use of appropriate feedback, and avoiding refusals.

The second day of general training combines more advanced discussion of interviewing techniques with practice interviewing, monitored interviewing with supervisors and senior interviewers, and monitored live calling. Supervisors review interviewing techniques for handling difficult respondents, probing for answers in difficult situations, and the proper enumeration of eligible adults residing in a household at the time of contact. Following this discussion, interviewers conduct practice interviews with one another, and interviews are monitored by a supervisor or senior interviewer, who introduces them to different situations that may arise during an interview. Interviewers who receive satisfactory monitoring scores are then allowed to conduct live calling on a practice project. Successful completion of practice calling means that an interviewer can be scheduled for a project training session.

Structured survey experience

After receiving general and project-specific training for their first studies, Macro International interviewers gain hands-on experience in a way that is structured to teach them specific skills in order of importance. For example, interviewers typically begin by conducting interviews for our Fair Market Rent surveys (FMR) for the Department of Housing and Urban Development (HUD). These surveys are short and relatively simple instruments designed to gather information about rental housing in areas where HUD provides housing subsidies; more importantly, the target population, rental households in primarily urban areas, tends to consist heavily of lower-income households receiving subsidies. As a result, interviewers receive initial experience in conducting a relatively simple interview among a relatively challenging population, an experience that serves to raise interviewer confidence in handling more difficult surveys later in their careers. Macro International interviewers who demonstrate superior interviewing skills are elevated to specialized project teams, such as the Public Health Interviewing Team.

Specialized Public Health Interviewing Team

The interviewers who worked on the OFHS were selected from Macro International's Public Health Interviewing Team. These individuals have met minimum standards with respect to tenure, response rate, non-response conversion capabilities, and interview performance based on monitoring sessions and have been invited to join an elite interviewing team that works on only the most difficult public health-related survey research. Compensation for these interviewers is on average higher than that for our other interviewers, and many perform additional functions as team leaders such as informally monitoring the performance of their peers and helping the supervisory staff to disseminate project information. At the same time, much more is expected of these interviewers; they are held to higher standards with respect to response rates and non-response conversion rates and are required to attend regular retraining sessions in refusal avoidance, non-response conversion, and general interview technique in order to retain their membership on the team.

Members of the Public Health Interviewing Team have an average tenure at Macro International of well over one and a half years, and many have worked continuously for three to five years. The average age of this group is higher than that of the interviewing staff as a whole. More mature members of the staff tend to perform well enough to join this team, and have more

experience on the job. Because Macro International is required to conduct continuous surveillance in Spanish for our state-level Behavioral Risk Factor Surveillance System (BRFSS) survey work, several team members are bilingual and bicultural.

Performance Measures

As mentioned above, Macro International sets high standards for those interviewers who want to join and to remain on the public health interviewing team. Among the standards are maintaining:

- At least a 70% Upper Bound response rate on general population surveys;
- Consistently high monitoring scores averaging at least 85 points on Macro International's 100-point scale;
- Relatively low or consistently normal item non-response rates on study variables that encounter high non-response (e.g., respondent income, race); and
- Maintaining a willingness to schedule and work consistent shifts averaging at least 16 hours per week, with minimal cancellations and no cancellations without notice.

APPENDIX G - INTERVIEWER TRAINING

The following is a description of the aspects of the survey research process covered during initial interviewer training sessions for the OFHS. Following that, the full Interviewer Training Manual is reproduced.

- **Background.** The first part of Macro International’s training introduced the interviewers to the survey’s purpose and scope. This part of the training explained the significance of a high response rate, the effect that a high number of refusals has on the study, the importance of confidentiality, types of health insurance, and any project-specific terminology.
- **The Surveyed Population.** The second section discussed the type of sampling being used in the 2008-2009 OFHS, the interview targets, and the roles of refusal conversion and in-language interviewers. In this section, Macro International stressed the importance of making multiple attempts and converting refusals.
- **The Role of Macro International.** In this training section, the role of Macro International’s project team was explained—particularly that of project managers, the data collection management team, interviewers, quality assurance assistants (QA assistants), and data processing team.
- **An Overview of the OFHS.** The next step in the training process involved reviewing the overall questionnaire as well as the most important pieces of information related to survey administration, such as survey length, verification of telephone numbers, protocol, and question types.
- **Types of Insurance Coverage.** This section explains the many different types of health insurance that exist in the state of Ohio. The section also explains what types of insurance are not considered forms of health insurance, due to providing cash benefits.
- **Approaches to Interviewing.** This brief refresher section focused on how to move a respondent through a survey and ask the questions appropriately. This section also covered keeping question non-response to a minimum and avoiding respondent refusals. Probing techniques included clarification of respondent responses, open-end verification, and re-reading of response categories.
- **Know the Questionnaire.** In this section, interviewers learned the importance of using the correct disposition on every record, leaving descriptive, complete messages for the next interviewer, handling the selection process carefully, and how to suspend and resume an interview.
- **OFHS Survey Protocols.** In this section, the project managers conducting the training emphasized the 2008-2009 OFHS protocols, such as reading verbatim, respondent selection procedures, assuring respondent confidentiality, probing and clarifying, and dealing with refusals. Interviewers carefully reviewed the introduction and CATI screens to assure proper selection protocol.
- **CATI Program Hands-on Practice.** This part of the training dealt specifically with administering the 2008-2009 OFHS; it included a word-for-word review of the questionnaire, done interactively with the CATI program. Each interviewer worked on a terminal, working through each screen of the CATI survey. Different scenarios—such as selecting respondents in various household compositions, handling respondent reactions,

skip pattern scenarios, and disposition protocols—gave interviewers a comprehensive understanding of the CATI program and the questionnaire.

Interviewer refresher trainings were held throughout OFHS data collection. The purpose of the refresher trainings was to review parts of the questionnaire and protocol that were causing confusion for the interviewers – such as the adult and child selection processes, the determination of partially completed interviews, different types of insurance, how to conduct proxy interviews, and ways to increase response rates. The trainings also paid close attention to open-ended responses in which the interviewers were having difficulty with.

Training was also performed for the Asian and Hispanic oversample studies and the cell phone study. The oversample study training emphasized sensitivity in discussing race/ethnicity with respondents as well as changes to the survey. Cell phone procedures such as screening, respondent safety and location, identifying business-only cell phone numbers, refusal conversion, call answering and ring tones, and changes to the questionnaire were reviewed in an abbreviated training manual.

2008 Ohio Family Health Survey

(OFHS)

Interviewer Training Manual



Table of Contents

<u>BACKGROUND</u>	238
<u>WHAT IS THE OFHS?</u>	238
<u>WHAT IS THE PURPOSE OF THE OFHS?</u>	238
<u>WHAT HAPPENS TO THE OFHS DATA AFTER IT IS COLLECTED?</u>	239
<u>THE IMPORTANCE OF CONDUCTING HIGH QUALITY INTERVIEWS</u>	239
<u>THE SURVEYED POPULATION</u>	239
<u>INTERVIEW TARGETS</u>	240
<u>SAMPLE</u>	240
<u>REPRESENTING THE ENTIRE POPULATION</u>	241
<u>NUMBER OF ATTEMPTS</u>	241
<u>SPECIAL INTERVIEWERS</u>	242
<u>RESPONSE RATES</u>	242
<u>THE ROLE OF MACRO INTERNATIONAL</u>	243
<u>THE PROJECT MANAGERS</u>	243
<u>DATA COLLECTIONS</u>	243
<u>INTERVIEWERS</u>	243
<u>QUALITY ASSURANCE</u>	243
<u>THE DATA PROCESSING TEAM</u>	243
<u>AN OVERVIEW OF THE OFHS</u>	246
<u>TYPES OF INSURANCE COVERAGE:</u>	248
<u>APPROACHES TO INTERVIEWING</u>	252
<u>SELL THE SURVEY</u>	252
<u>USE YOUR BEST VOICE AND PHONE MANNER</u>	254
<u>READ EVERY QUESTION VERBATIM</u>	255
<u>MAINTAIN A PROFESSIONAL APPROACH</u>	255
<u>FOCUS ON RESPONDENTS AND LISTEN CAREFULLY</u>	256
<u>BE RESPECTFUL AND SENSITIVE AT ALL TIMES</u>	256
<u>MAKE AN EFFORT TO REASSURE HESITANT RESPONDENTS</u>	257
<u>STAY IN CONTROL OF THE INTERVIEW</u>	257
<u>BE PREPARED TO DEAL WITH PROBLEM SITUATIONS</u>	258
<u>MAINTAIN NEUTRALITY</u>	259
<u>AVOID LEADING</u>	260
<u>MAKE QUALITY AND ACCURACY A PRIORITY IN ALL ASPECTS OF INTERVIEWING</u>	260
<u>TRANSITIONAL PHRASES</u>	261
<u>KNOW THE QUESTIONNAIRE</u>	261
<u>BE PREPARED</u>	261
<u>PAY ATTENTION TO THE SCREEN FOR INFORMATION AND INSTRUCTIONS</u>	261
<u>MAKE EVERY INTRODUCTION COUNT; MAKE EVERY CONTACT COUNT</u>	262

<u>USE THE CORRECT DISPOSITION AND LEAVE GOOD MESSAGES</u>	262
<u>MOVE SMOOTHLY FROM THE INTRODUCTION TO THE FIRST QUESTION</u>	263
<u>THE SELECTION PROCESS REQUIRES CARE AND ATTENTION</u>	263
<u>A LOOK AT THE QUESTIONNAIRE</u>	264
<u>KNOW HOW TO SUSPEND AND RESUME</u>	264
<u>CORRECT ERRORS</u>	264
<u>ASK QUESTIONS</u>	265
<u>OFFER SUGGESTIONS TO SUPERVISORS OR QA ASSISTANTS</u>	265
<u>OFHS SURVEY PROTOCOLS</u>	266
<u>READING VERBATIM</u>	266
<u>RESPONDENT SELECTION</u>	266
<u>RESELECTING A RESPONDENT</u>	268
<u>UNIQUE SITUATIONS IN THE HOUSEHOLD SELECTION PROCESS:</u>	268
<u>PROXY INTERVIEWS</u>	269
<u>THE OFHS SURVEY CHILD SECTION</u>	270
<u>ENSURING RESPONDENT CONFIDENTIALITY</u>	273
<u>ANSWERING MACHINES AND PRIVACY MANAGERS</u>	274
<u>ACCURACY: PROBING AND CLARIFYING</u>	274
<u>BEING ASSERTIVE</u>	276
<u>DEALING WITH REFUSALS</u>	276
<u>GLOSSARY</u>	284
<u>APPENDIX A – SPECIAL INTERVIEWERS AND SPANISH INTERVIEWERS</u>	286
<u>APPENDIX B – CLIENT CONTACT INFORMATION</u>	289
<u>APPENDIX C – DISPOSITIONS</u>	290
<u>APPENDIX D – SCHEDULING CALLBACKS</u>	294
<u>APPENDIX E – LEAVING MESSAGES</u>	295
<u>APPENDIX F – PUBLIC SERVICE ANNOUNCEMENT</u>	297
<u>APPENDIX G – FAQ</u>	298
<u>APPENDIX H – INTERVIEWING RESPONDENTS OF MINORITY GROUPS</u>	301
<u>APPENDIX I – CRISIS PROTOCOL</u>	302

The following are separate documents:

- APPENDIX J - OFHS ADULT QUESTIONNAIRE
- APPENDIX K - OFHS CHILD QUESTIONNAIRE
- APPENDIX L - LIST OF SPECIAL ATTENTION QUESTIONS

Background

What is the OFHS?

The Ohio Family Health Survey (OFHS) is an important survey project sponsored by:

- State of Ohio Department of Health
- Ohio Department of Job and Family Services

With additional sponsors:

- The Ohio State University;
- The Ohio Department of Insurance;
- The Ohio Department of Mental Health; and
- The Health Policy Institute of Ohio.

The survey is designed to gather information for a number of different health related topics, such as the following:

- The type of health insurance coverage Ohio residents have, if any;
- General health status;
- Health care use and needs;
- Perceptions of health care quality; and
- Access to health care.

While the survey questionnaire covers a number of different topics, it is divided between two major sections:

1. One section asks questions of a randomly selected adult in the household.
2. The other section has questions that are targeted toward a randomly selected child under the age of 18, if there is one residing in the household.

The questionnaire is further subdivided into multiple sections — but not everyone will answer questions in each section, and many of these sections are very short. Despite how it sounds, the survey on average should take approximately 20-22 minutes to complete.

The 2008 OFHS is a follow-up survey to OFHS surveys conducted in 1998 and 2003/2004. The OFHS is a follow-up in the sense that the study sponsors are interested in seeing how Ohioans health insurance costs, health care needs, and so forth have evolved over the past decade. We are not intentionally contacting the same people again, although it is possible that some people we contact may have participated in the study during previous years.

What is the purpose of the OFHS?

The OFHS will provide essential information regarding health insurance status of residents throughout the state of Ohio, as well as critical data concerning residents' general health status, health care use, health care needs, health care quality, and health care access. To accomplish this, a questionnaire was developed by the survey sponsors. This questionnaire will be

administered through the protocol of the existing Behavioral Risk Factor Surveillance Survey (BRFSS), the world's largest on-going telephone health survey system sponsored by the United States Centers for Disease Control and Prevention (CDC).

What happens to the OFHS data after it is collected?

After you have collected the data, the data processing team at Macro International cleans, edits, and analyzes the data before we send it to the ODJFS. This process includes cleaning the data that is entered into the “specify” responses in the questionnaire. During this process, each response is checked to see if it should have been coded as one of the response options that were provided. If it is, it will be changed, and if not, the response will be checked for spelling and delivered to the client verbatim.

The data processing department also codes the dispositions. All the dispositions you record must be coded as a final BRFSS-like disposition. This coding process is accomplished by looking at all of the attempts made on each record and determining which final code is appropriate. For this reason, it is crucial that you record the correct disposition on every attempt.

Last, reports are run on the data to determine the response rate, how many records were required to complete the appropriate number of interviews, how many days it took to make the required number of attempts on all records, and to ensure that there is no conflicting information in the data.

The Importance of Conducting High Quality Interviews

In making important decisions that will affect the health of millions of Ohioans, lawmakers and policymakers rely on the data collected in the OFHS. They rely on the validity of the data collected. The OFHS is the primary data source linking Ohio residents' health insurance status with their health care needs. The data is used for decisions by ODJFS (Ohio Department of Jobs and Family Services) as well as decision-makers for relevant programs and policies. Lawmakers and policymakers also depend on the fact that the data is reliable, meaning that the data are accurate and represents what evaluators need to know with minimal errors.

The most important factor in obtaining valid, reliable data is the OFHS interviewer. After the interviews are completed, the only information to be analyzed are the data that the interviewers have recorded. Answers that are not recorded cannot be analyzed, and those that are recorded incorrectly could lead to inaccurate conclusions. It is important to be consistent in conducting the survey, and to obtain answers that are as accurate and complete as possible during every interview. Interviewing technique affects data quality, and data quality influences important decisions. You are an important part of a team, not only at Macro International, but also those committed to ensuring proper and effective healthcare policies in the State of Ohio.

The Surveyed Population

It is important to follow established protocols behind fielding the OFHS to ensure reliability and to prevent bias in the data. Ideally, in order to collect data that reflect the knowledge and attitudes of the residents in Ohio, data would be collected from everyone. But, of course, this is impossible. A statistical probability sample such as the one used by the OFHS gathers

information from the general population through random sampling. Researchers then formulate conclusions based on sophisticated mathematical calculations.

The OFHS survey protocols are designed to ensure that the data that are produced are *representative, consistent, and complete*. In the end, statisticians analyzing the data will be able to draw conclusions about the health insurance and health care needs that are true for not only the entire state of Ohio, but also for special sub-populations and geographic areas. They will be able to do this in a cost effective manner that does not require them to contact every resident in the state.

Interview Targets

 In order to ensure enough data for analyses, Macro International has minimum number of completes required for many distinct sub-groups including county and county-group targets as well as race/ethnicity targets. We will be managing the completion of interviews within each of these target groups through sampling and survey design. In total, the OFHS requires over 42,000 interviews to be completed.

County Targets

There are 88 counties in Ohio; all counties will receive some interviews, but several will be over-sampled. The over-sampled counties are Metropolitan; in addition, non-Metropolitan counties will be divided into similar groups – called “clusters” – and over-sampled as groups.

Race/Ethnicity Type Targets

Portions of some counties will be over-sampled (i.e. proportionally over-represented) to ensure enough interviews from African-American residents to permit analyses regarding that subpopulation. In addition, we will be using lists of Hispanic and Asian-American respondents to increase their representation in the survey. Appendix H provides some suggestions for *sensitively, and successfully*, interviewing respondents from minority populations.

In order to achieve the targeted number of interviews for specific Race/Ethnicity combinations, questions regarding the demographics (characteristics) of the selected respondent will be asked after the confirmation process at the beginning of the survey. For the OFHS, there will be circumstances when it is necessary to interview a proxy regarding a selected respondent (i.e. a knowledgeable person will answer for the selected respondent, ONLY IF the respondent has a LONG TERM or PERMANENT physical or mental impairment.). *In order to meet our Race/Ethnicity targets, it will be critical for you the interviewer to make sure that you either are interviewing the correct selected respondent, or if you are interviewing a proxy that the proxy is answering in terms of the correct selected respondent and not himself or herself. It is critical that you always code correctly the race/ethnicity information for the selected respondent and not for the proxy.*

Sample

Macro International will create the sample that will be used to conduct the interviews. The important thing to know about the sample is that it is limited. We have a certain number of records from which we need to get a target number of completed interviews. It is imperative that you try your best to make every record a complete.

Random Sample

To further prevent bias and ensure that the sample is random, the telephone numbers in the OFHS are selected at random. The computer is provided with the area code and a three-digit exchange in order to select the region for calling. The computer then randomly selects the last four digits of the telephone number. Therefore, all possible numbers within a region have an equal probability of being selected for calling. Selection is not based on whether or not a phone number is listed or assigned, or whether or not it is on the Do Not Call Registry. Any number within the area code may be called.

As mentioned earlier, the random sample for the OFHS will be a targeted Random Digit Dial (RDD) sample. The sample will be drawn across each of Ohio's 88 counties.

The sample will be released only as necessary to achieve the targeted number of completes in every county; however, every number released must be dialed until protocol is fulfilled. Sample must be tightly regulated since too much sample often a sign of troubles with population representation.

Representing the Entire Population

Within each eligible household, the interviewer will identify the target respondent by randomly selecting an adult using the "most recent birthday" method. The selected respondent will always be the adult in the household with the *most recent* birthday; that is the adult who had the last birthday, *not* the person with the birthday closest in time to the interview date. The goal of this selection process is to ensure that the demographics of the people who are surveyed in a given state match the demographics of the population in that state. This includes factors such as age, sex, race, parents of children, adults without children, etc. The best way to ensure representativeness is to use a consistent rule to randomly choose a specific person within in the households we contact, not simply profile the person most willing to complete the survey (which would skew results, for example, by age and gender).

You will not necessarily interview the selected respondent. The OFHS requires that under certain circumstances, the selected respondent has a permanent physical or mental impairment, a proxy interview be conducted; that is someone will answer questions about the selected respondent for the selected respondent.

Number of Attempts

According to the protocols that the OFHS adheres to, each record in the sample must receive a terminal disposition or 15 attempts before it is resolved and no more calling is made to the telephone number. In addition, attempts on records need to be made on different "calling occasions." There will be three designated calling occasions: weekday (9am–5pm), weekday evening (5pm–9pm), and weekends. The protocols require that the attempts be allocated to 20% weekday, 50% weekday evening, and 30% weekend. These calling protocols minimize bias (such as only calling people available in the evening) and maximize completeness (the effort designed to reach every eligible respondent). In addition, it improves cooperation rates since it increases the chances that we will speak to various people in the household, some of whom will be more willing than others to help us screen the household.



Special Interviewers

There are only two types of special interviewers for the OFHS:

- “Comma four” interviewers who handle “difficult” cases; and
- “Comma five” interviewers who handle records designated as potentially Spanish-speaking households.

“Comma four” interviewers are more skilled and experienced interviewers who are able to administer difficult records. There are two main types of “difficult” records that these interviewers deal with:

- They attempt to *convert initial refusals* to completed interviews; and
- They *verify* records designated as “unable to complete due to impairment,” “no eligible respondent during time period,” and similar dispositions, to ensure that these records were dispositioned correctly.

“Comma Five” interviewers call records identified as belonging to Spanish-speaking households or where the initial interviewer was not able to identify the language of the respondent.

See Appendix A for more information on special interviewer types.

Response Rates

The *response rate* measures the extent to which interviews were completed from among the telephone numbers selected for the sample. The higher the response rate, the lower the potential for bias in the data.

We have a limited number of records from which to get completed interviews. Our goal is to collect *completed interviews from 70% to 75% of eligible households contacted*. This requires interviewing staff to take particular care in averting refusals and converting resistant contacts to participants. Interviewers must also broker callback appointments for times that work well for the respondent. Each successfully profiled household helps us toward our goal, and every failed profile counts against us. This is why we emphasize that *every contact counts!*

Interviewers hold the key responsibility for meeting the goal of 70%–75% completion. The way to meet this goal is to use your best calling skills on every interview, to become successful in dealing with resistance and refusals, to know and use the strict protocols for dispositions, and to make and execute callbacks to reach respondents. We will be discussing these in detail later.

To assist in obtaining high response rates, the survey sponsors will distribute a news release about the survey that can be included in local newspapers. The news release that will be used can be found in Appendix F. Please be familiar with this announcement, as a respondent may refer to it during the introduction of the questionnaire.

The Role of Macro International

The Project Managers

The project management team at Macro International includes individuals with over 20 years of social research and statistical analysis experience. The OFHS project was awarded to Macro International through a competitive process. The project management team submitted a winning proposal specifying specific conditions, protocols, and goals for entering into a contract with the client. Once an agreement with the client was reached, the project management team, computer programmers, and the data collections department began working together to prepare for fielding the study. Project managers have trained data collections staff on survey protocols that have been written into our contract with the client. These protocols are intended to ensure reliable data. As the study progresses, project managers will monitor data collections reports and provide clients with monthly status reports. Finally, project managers will present a final clean “dataset” and report to the client.

Data Collections

Data collections staff train interviewers and assign them to the survey project. Data collections staff run reports to track response rates, the number of attempts made on each record, the number of records required to complete the desired number of interviews, and the number of days it took to make the required number of attempts on all records. These reports measure the efficiency, productivity, and thoroughness of the calling room effort, and determine how to staff and run the study.

Interviewers

This is where you the interviewers come in. Conducting the interview is the most important part of the OFHS contract – All other processes rely on it. You have been selected as a member of the data collection team. When you conduct each interview professionally, without bias, and record the responses accurately, you help ensure that the data Macro International produces for its OFHS client are valid and of the highest quality. The figure on the next page highlights your importance to this process.

Quality Assurance

Data collections staff and project managers review the work of the call-room overall and the work of individual interviewers in regard to accuracy of dispositions, quality of CfMC messages, frequency of “don’t know” responses, rates of refusal, and other calling practices. In addition, the Macro International contract with the ODJFS specifies that the quality assurance department monitor 20% of each interviewer’s work and 10% of all completed OFHS interviews.

The Data Processing Team

The data processing team reviews the data collected in interviews before sending the data to the ODJFS. This review “cleans and edits” the data. An example of “cleaning” is an examination of responses recorded under “specify” or “other” to see if these responses could have been coded as one of the response options that were provided on the CATI screen. If not, the response is

checked for spelling and is sent to the client verbatim. The data processing team also looks for conflicting information or ambiguous answers that “just don’t add up.” They review dispositions for accuracy, and to see if frequency of dispositions fall within expected ranges. If and when we find “suspicious” responses in the data, we must contact respondents again for verification. This is expensive, time consuming, and can introduce a source of error into the data. Respondents sometimes do not remember what information they gave when first asked. They frequently answer differently if a question is asked in isolation and not part of an original series. And, they are often difficult to locate and speak with at a future point in time.

All of these steps are taken to ensure that the work performed at Macro International is of the highest quality. In summary, the figure on the next page represents how all of us work together to successfully collect the data for the OFHS survey.

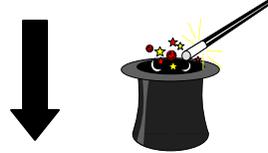
**INTERVIEWERS
TALK TO RESPONDENTS AND GATHER THE DATA**



ENTER THE DATA INTO CATI



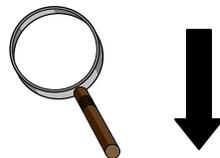
DATA PROCESSORS DO THEIR MAGIC



SAMPLERS WEIGHT THE DATA



PROJECT MANAGERS ANALYZES AND WRITES UP THE DATA



DATA ANALYSIS AND WRITE-UP IS DELIVERED TO THE CLIENT



GARBAGE IN means GARBAGE OUT



An Overview of the OFHS

The OFHS Questionnaire is organized as follows:

The Introduction

- > go to the selection process -or-
- > go to a disposition choice or screen

The Selection Process

- > go to the survey questions -or-
- > go to a disposition choice or screen

The Survey Questions

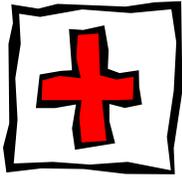
The Close and Thank-You

Other aspects of the OFHS that are important to know: (suggestion: use this list as a worksheet when you go on practice. Keep it as a reference for making notes when you have questions).

- Each survey takes on average 20 minutes, depending on the type of interview it is.
-  The verification number for the OFHS is the call-center number posted at each station. Supervisors can direct respondents to call the Ohio Department of Health (1-800-282-0546), if they are unable to assist respondents with their questions.
- The *limited* nature of the sample dictates approaches to interviewing, refusal conversions, handling dispositions, and scheduling callbacks.
- The first screen to come up (before the introduction screen) presents a call history and the message left by the last interviewer.
- The introduction screen can offer good information on what has occurred on a record in previous calls. Look for: CfMC messages, Selected respondent, Reason for termination, etc.
- Interviewers are responsible for knowing and following all OFHS protocols. These include: Reading Verbatim; Respondent Selection; Reselecting a Respondent; Proxy Interviews; Ensuring Respondent Confidentiality; Accuracy; Probing and Clarifying; Dispositions; Scheduling Callbacks; Leaving Messages; and Refusal Conversion.
- Read **100% verbatim** on all questions. The one exception is on the introduction in a refusal situation.
- The respondent selection process requires care and attention.

- Sometimes the only way to deal with a record will be to contact a supervisor.
- There are many different *types* of questions in the OFHS. These types include: scales, tests of knowledge, questions with multiple responses, questions of opinion, factual questions, open-ended questions, questions asking “how many times per day, week, month, year,” and others.
- The screens containing OFHS survey questions also include instructions to interviewers: [READ LIST], [MULTIPLE RESPONSES ALLOWED], etc.
- The OFHS contains *skip patterns* in which the answer to one question influences the structure or choices of the following questions.
- The OFHS contains vocabulary that may be new and must be learned.
- It is possible to suspend and resume on the OFHS. When a suspended survey is resumed, the screen contains specific information for interviewers.

Types of Insurance Coverage:



As stated earlier, one of the primary purposes of the OFHS is to gather information about respondents' health insurance coverage or lack of coverage. It is very difficult to craft survey questions asking people about their health insurance because of the great variety in types of coverage people have, their understanding of that coverage, and the differences in terminology between different plans, companies, states, and so forth. In order for you the interviewer to be able to successfully administer the OFHS, to gather the data that the ODJFS and the ODH need, it is necessary for you to understand some key terms regarding specific types of coverage that respondents with health insurance have. The better you understand these terms, the easier it will be for you to probe respondents thoroughly, accurately, and in a neutral and objective manner. The more thoroughly you understand these terms, the easier it will be for you to recognize what a respondent is talking about, and how to record the information they give you. Some of the important terms you need to know are the following:

- 1. Medical insurance:** This refers to any type of insurance plan that covers expenses for a range of different health needs or problems that require the attention of a doctor or other professional medical staff. This can include vision and dental care. Examples include: Medicare, Medicaid, Anthem - Blue Cross/Blue Shield, Kaiser, Aetna, United, and Cigna.
- 2. HMO (also known as, *Health Maintenance Organization*):** An HMO is a type of managed care health insurance plan. Generally, HMOs require individuals to see certain, in-network health care providers. *Examples include: Kaiser, Anthem - Blue Cross/Blue Shield, and Cigna.*
- 3. PPO (as known as, *Preferred Provider Organization*):** A PPO is another type of managed care health insurance plan. Generally, PPO's allow smaller co-pays for in-network health care providers, and larger co-pays for out-of-network health care providers. *Examples include: Blue Cross/Blue Shield, Cigna, MVP, and Group Health.*
- 4. FFS (also known as, *Fee For Service or Indemnity*):** Traditional insurance that does not place restrictions on which doctors you can use. The insurer pays for the expense you incur. *Examples include: Cigna, and Medical Mutual of Ohio.*
- 5. Supplemental Insurance:** This is a health care plan that is purchased in addition to another insurance plan to either improve medical benefits that the insured already receives or to "fill in the gaps" of another policy that doesn't cover certain medical expenses (i.e., vision, dental, etc.) *Examples include: AFLAC, and Anthem – Blue Cross/Blue Shield.*

6. **Dental Insurance:** This insurance's benefit is specifically for the health of the teeth (i.e., surgery, dental exams, etc.).
7. **Vision Insurance:** This insurance's benefit is specifically for the health of the eyes (i.e., glasses, eye exams, etc.).
8. **Cancer Insurance:** This type of insurance is for people who want to protect themselves in the event that they are diagnosed with cancer. It can cover hospital expenses or give cash benefits for treatment and/or recovery for one suffering from the disease.
9. **Long-Term Care:** This includes a range of services under the supervision of a professional medical staff. It can include personal care, nursing homes or skilled nursing for people suffering from chronic diseases, illnesses, or disabilities that are expected to last for an extended period of time.
10. **Nursing Home Insurance:** This is a policy that provides financial support to the insured who is unable to care for themselves (because of chronic illness, age or disability) and needs the maintenance, personal or nursing care of a trained staff.
11. **Medicare Supplemental Insurance:** This is a Medigap policy. It is sold by private insurance companies to fill "gaps" in Original Medicare Plan coverage including additional hospice or institutional coverage. There are 10 standardized Policies labeled Plan A through Plan J. Medigap policies only work with the Original Medicare Plan.
12. **Medigap Plan:** This is a Medicare Supplement insurance policy sold by private insurance companies to fill "gaps" in Original Medicare Plan coverage, usually things like additional physician visits, prescriptions, and physical therapy. There are 10 standardized plans labeled Plan A through Plan J. Medigap policies only work with the Original Medicare Plan.
13. **Medicare:** A government program of medical care for those 65 years or older or people with certain disabilities. Medicare Part A covers hospital expenses, and Medicare Part B covers many other medical expenses such as doctor's visits. Medicare Part D is the Prescription Drug Plan that began in 2006. Enrollment is voluntary. It may be combined with supplemental medical coverage (also known as Medicare Part C).
14. **Medicaid:** A program of medical aid designed for low-income persons. Eligibility for this program is based on income and assets (i.e. car, real estate, etc.)
15. **Medicaid Waiver Programs:** Programs that provide community services to people who would otherwise be institutionalized, such as in a skilled nursing home. There are six waivers in Ohio, which include: Individual Options, Level One, Ohio Home Care, PASSPORT, Residential Facilities, and Transitions.

16. **CHAMPUS** (*stands for “Civilian Health and Medical Program of the Uniformed Services”*): A program of medical benefits available to people who are no longer active in the military, as well as, their spouses, and dependents (such as children).
17. **CHAMP-VA**: Civilian Health and Medical Program of the Department of Veterans Affairs. A cost-sharing health plan for the dependents of qualifying disabled or deceased veterans. This is a “fee-for-service” program, which means that one pays for care, as they need it rather than a set amount paid in advance.
18. **Military or Veterans Coverage / TRICARE**: This type of insurance coverage is exclusively offered to people who are either actively in the military, or veterans. The program can be extended to include spouses and children of the military personnel or veteran.
19. **Indian Health Service**: This program is for federally recognized Indian tribes and their descendants. It ensures acceptable personal and public health services are available and accessible to American Indians and Alaskan Natives.
20. **Healthy Families**: This is one of Ohio Medicaid’s health coverage programs for low-income children and parents.
21. **Healthy Start**: This program is a Medicaid expansion program that provides free and low cost health coverage to eligible pregnant women, and children up to age 19.
22. **SCHIP (State Children’s Health Insurance Program)**: SCHIP is a Medicaid expansion for low-income children and parents, and the program covers the cost of insurance, as well as outreach services to get children enrolled in the program. In Ohio it’s usually referred to as Healthy Start.
23. **COBRA (The Consolidated Omnibus Budget Reconciliation Act of 1985)**: This Act requires most employers with group health plans to offer employees the opportunity to temporarily continue their group health care coverage under their employer's plan if their coverage otherwise would end due to termination, divorce, or no longer *being* considered a dependent of the person insured (i.e. child loses coverage when graduates from college.)
24. **Premiums**: Agreed upon fees paid for coverage of medical benefits for a defined benefit period. Premiums can be paid by employers, unions, employees, or shared by both the insured individual and the plan sponsor.
25. **Deductibles**: A specified dollar amount of medical expenses that the individual must pay before an insurance policy will pay.
26. **Co-Pays**: A specified dollar amount or percentage of covered expenses that an insurance policy requires an individual to pay toward eligible medical bills.

The insurance types listed below are NOT considered forms of health insurance, as they typically provide cash benefits, rather than coverage for specific medical expenses.

1. **Accident Insurance**: This is insurance against loss through accidental bodily injury to the insured.
2. **Disability Insurance**: This insurance can help financially support, either with cash benefits or help with medical expenses, someone who becomes disabled through an accident or illness.
3. **Life Insurance**: Upon death of the insured, this insurance provides a payment of a set amount of money, from the deceased, to certain persons listed on the insurance contract.
4. **Cash Benefits**: This refers to benefits in the form of money that the insured recipient receives rather than the payment of medical expenses.

Approaches to Interviewing

There are four elements to an interview: the survey questionnaire; the protocols; the respondent; and the interviewer. The questionnaire and the protocols are fixed and unchanging. Respondents are the biggest variable; they represent the whole range of human behavior and experience. Every respondent presents a different degree or kind of challenge. Interviewers can learn to *follow protocols and at the same time successfully handle any challenge* a respondent might present.

Sell the Survey

Most people today are very suspicious of unsolicited telephone calls. When people answer the telephone and hear an unfamiliar voice reading an apparent script, they immediately begin to wonder what you want to sell them. Even though you are not a telemarketer, and even though you are working as an interviewer for an important state government study, you need to **SELL** the survey. You need to convince respondents of yours and the survey's legitimacy. You need to promote the OFHS purpose and objectives. You need to persuade them about the importance of the OFHS. Therefore, in the first moments of contact, you will need to try and act like a good sales person:

- **Capture** respondents' attention;
- **Convert** their natural reluctance; and
- **Close the deal** --- that is **complete** the survey.

Even though you are not selling a product or a service, classic sales techniques are useful for selling the idea of survey participation and for selling the survey's importance of the survey. Keep in mind that good sales people, and successful interviewers, all share the following characteristics for the same results:

Characteristic:	Results
They are courteous	<ul style="list-style-type: none"> • They are focused, and start their pitch/script when they get their first opportunity (i.e. when the respondent picks up the phone) • Frequently say "Sir," "Ma'am" and "thank you"
They use their voice effectively	<ul style="list-style-type: none"> • Say their words clearly, correctly, and distinctly • They vary their tone • Match their pace to their respondent • Sound conversational and not like a robot reading a script • Imagine that they are talking to the respondent face-to-face • They put warmth and enthusiasm into

	<p>their speech</p> <ul style="list-style-type: none"> • They sound interested in the respondent • They make the respondent wonder what is next
They project confidence	<ul style="list-style-type: none"> • They feel self-assured and project this feeling • They do not raise their tone of voice at the end of a sentence, thereby turning a statement into a question – and thereby giving the respondent an opportunity to question the survey sponsors, legitimacy, them, etc. • They expect cooperation, not rejection
They are persuasive	<ul style="list-style-type: none"> • They believe they have the ability to convince anyone to buy/do anything • They can explain to anyone why they should participate
They don't hesitate	<ul style="list-style-type: none"> • They don't hesitate to start the introduction, ask a question – to do so invites an objection • They assume the respondent will be cooperative and don't give the respondent an opportunity not to be • Know and use appropriate “cue-tips” to address respondent concerns or questions • They take advantage of “freedom of choice” points in a survey, recognizing and exploiting those moments when respondents have an opportunity to speak freely, and to potentially end the conversation • They sound as if they have a good reason to be calling
They have excellent listening skills	<ul style="list-style-type: none"> • They hear what a respondent is saying and address the concern • They also hear what the respondent is <i>not</i> saying and use the opportunity to their advantage.

But you ask yourself, how can I be a good salesperson? You can be a good salesperson by trying to develop all of the characteristics listed above. See these as areas that you can work on as an interviewer. These characteristics will make you not only successful on the OFHS, but also on any survey that you will conduct.

In addition:

Sell yourself – sell yourself on the important role you play as an interviewer, the data you collect, and the importance of the survey for the state of Ohio and the individuals you speak to. This is up to you and you alone.

Know the study – know the content, the length, the order, the intentions, etc of the OFHS so that you have the content knowledge to address all of your respondents’ concerns and questions – both the unspoken and spoken. This training manual will give you all the information you need.

Recognize key words that respondents might use, what these words are possibly implying, and how to respond. Some examples are in the table below:

Key Words	Means
I’m not interested	Convince me, tell me why I should care and why I should take the time
I don’t have time	Tell me why I should make the time
What is this about	I don’t trust you, make me
I don’t do surveys	I don’t think my opinions count, I really think you want to sell me something, make me believe this is legitimate and will make a difference
Who are you?	I don’t trust you, I think this is a scam, prove me wrong
What’s in it for me	I think you want something from me and you aren’t telling me, why should I do this
I don’t know anything about this	Tell me more about why you called
I won’t buy anything on the telephone	Convince me you are not selling me something and that you won’t sell my information to someone else

In the sections that appear below, this manual will provide you with more detail and concrete examples of how to respond to these key words and the situations that they imply.

Use Your Best Voice and Phone Manner

The first 15 seconds of the introduction can mean success or resistance. “Smile while you dial,” works for some callers. Be focused. Sit up straight in your chair. Talk directly into the mouthpiece. Be courteous and friendly, pleasant, and professional. Maintain an even tone of voice. Speak as clearly as possible. Read the script with good expression and in a natural, conversational manner. *Listen carefully to the person with whom you are speaking, and adjust your volume, pace, and expression accordingly.*

Give the introduction enough time. Don’t rush. You may have said this introduction hundreds of times, but the person with whom you are speaking has never heard it before. If a respondent has to strain to understand what you are saying and why you are calling, what are the chances this person will cooperate? Just “reading the words” is not enough. You must think about

communicating with the person who is on the phone, and building a relationship with that person so he/she feels comfortable speaking with you.

Approach introductions with confidence, and be patient and polite at all times.

Read Every Question Verbatim

Read every question exactly as written as it comes up on your screen. Read every question in full. Do not paraphrase a question based on a previous answer the respondent has given you. Interviewers must read verbatim to *ensure that every survey with every respondent is conducted in the same way*. Data collected in a survey are reliable and valid only if *every question is read verbatim*.

Reading verbatim is the absolute foundation of conducting an interview. Reading verbatim is the *only way to obtain reliable information*. In addition, interviews move along *more smoothly* when interviewers read verbatim. Here is what can happen when interviewers stray from verbatim:

- The interviewer’s voice loses authority and confidence and begins to sound hesitant.
- Respondents get anxious. (“Who are you? Where did you say you were calling from?”)
- The interview *takes longer*, because you have to go back and correct for the inaccuracies or misunderstandings that arose from changing the script.
- The interviewer loses control of the interview.
- The data entered are invalid or skewed.

“I was afraid the guy was going to hang up on me” is *not a valid excuse* for not reading verbatim. There is NO valid excuse for not reading verbatim.

Read verbatim. Do not change or abbreviate the wording of any question. No matter what is going on with a respondent in a particular interview, as long as you are conducting the interview, you must read every question verbatim. Changing even one word in the question can change the intention and meaning of the question, and as a result, introduce unknowable bias into the results.

Be comfortable with brief silence on the phone with the respondent. This doesn’t necessarily mean they do not understand the question being asked. Read the question verbatim and allow them to think about their answer. Stay calm and use the probes provided rather than going completely off of script.

Maintain a Professional Approach

The interviewer on the OFHS has a *job* to do. This job makes the matter of speaking on the phone different from a phone conversation with a friend.

In a conversation with a friend, it is “natural” to provide “normal human responses.” But doing any of the following in an interview leads to practices that are unprofessional and unacceptable: commenting on positive information (“That’s good!”), commiserating with a respondent (“That’s so sad!”); sharing your own experience, knowledge, or opinion (“My uncle has that disease.”); apologizing for questions (“This is gross, but I have to ask...”); or helping the respondent to decide on an answer.

You are not a friend or therapist for the respondent. You do not have to “fix things” for the respondent. To the extent that you take on these roles, you are engaging in “off-task” behavior. You may have strong feelings about what a respondent tells you. You may strongly agree or disagree with what the person is saying. But you need to *keep these feelings and opinions to yourself*. It’s not professional to bias the interview with your own feelings and opinions. And doing so makes the data unscientific and invalid. *Your job* is to obtain reliable, valid, complete, and unbiased information.

You can build rapport with a respondent by maintaining a pleasant voice quality, reading the questions in a natural, conversational manner, reading with expression, and sounding interested.

Remind yourself that as an interviewer on the OFHS, you have a *very important job to do*. Being professional means being prepared, reading verbatim, understanding the survey, building your skills as an interviewer, and giving every call your best effort.

Observation: Excellent interviewers, who also have very high completion rates, will be able to conduct OFHS interviews *without an extra syllable* of commentary, not even “Okay.” They are thoroughly neutral and professional. Respondents do not often hang up on them. Why? These interviewers have excellent clarity, pace, expression, and voice quality. They read every question as if they are *thinking about the question*. They sound as if their whole attention is *focused on the respondent*.

Focus on Respondents and Listen Carefully

Pay close attention to what respondents are saying and how they are saying it. If the respondent seems rushed, pick up the pace a little. Listen for hesitation or pauses that might indicate uncertainty and a time for you to probe or verify. An interviewer’s *tone of voice, attentiveness, and receptive manner* can make the difference between a hang up and a completed interview.

Be Respectful and Sensitive at all Times

Remember that in agreeing to participate in a survey, the respondents are revealing parts of their character and behavior to a total stranger. This alone deserves respect. On the OFHS, some of the questions can be personal, and interviewers should be especially alert to respondents’ reactions.

In sensitive or potentially sensitive situations, keep in mind:

- Any question may be sensitive to a particular respondent. For example, a respondent who has just lost a relative and they believe it is because their health insurance would not pay for a required medical treatment, may react emotionally to questions on that topic.
- Listen carefully. Adjust your pace or tone of voice if necessary.
- If the respondent is answering “yes” to sensitive questions, this does not mean that the respondent will soon hang up. Continue to read the questions in an even tone of voice.
- Many respondents who become emotional are adamant that they want to continue the survey. They understand that this is their opportunity to be represented when public policy is being made.
- It is possible to be both neutral and sensitive.

Remain focused and professional when asking sensitive questions or encountering emotional responses.

Make an Effort to Reassure Hesitant Respondents

Interviewers are expected to handle any respondent objections, questions, or complaints smoothly and professionally. Remain polite, respectful, professional, and informative. This is the best way to reassure a respondent who is hesitant and obtain cooperation from a respondent who expresses objections. Answer a respondent’s questions in a *courteous, confident manner*.

If you have a problem answering any particular question, make a note of it. Look up the answer or ask for help. Be ready with an answer the next time.

Stay in Control of the Interview

The interviewer must establish and maintain control of the interview. Here are some situations that can lead to a loss of control:

- The respondent is rushed and “just wants to get this over with.”
- The respondent is overly chatty and gives a narrative.
- The respondent is confused or unable to focus.
- The respondent is argumentative.
- The respondent is emotional or giving answers that may be sad, depressing, or alarming.

When presented with these situations, interviewers are sometimes tempted to abbreviate the script, rush the interview, or engage in off-task conversation, or other practices that compromise gathering valid data. An interviewer who does these things has *lost control of the interview!*

Your task is to read every question verbatim and to obtain valid answers and record those answers accurately. Be prepared with strategies to maintain control.

Be Prepared to Deal with Problem Situations

Experienced interviewers build up a repertoire of phrases to use in difficult situations that arise during an interview. Here are some suggestions for dealing with difficult situations. Other approaches may also work. Keep track of these in your Notes.

Types of Respondent	Strategies to Maintain Control
The Respondent “Rushes You”	<ul style="list-style-type: none"> • Say, “We have only about (X) minutes left until the end of the survey. We can go through this quickly if we both focus on the questions.” • Say, “It is possible to suspend the interview and complete it at another time. All the information we’ve collected so far will be saved.” • <u>Read verbatim</u>. Do not allow a respondent who is in a hurry to compromise the interview.
The Respondent is chatty (you get a life history on every question)	<ul style="list-style-type: none"> • Say, “We’ll be getting to some of those questions in a little while. By the end of the interview, if there’s anything we haven’t covered, you can tell me then.” • Listen politely, wait for this person to take a breath or pause. Then repeat the question or read the next question.
The Confused Respondent: The Respondent does not seem to understand the question	<ul style="list-style-type: none"> • Repeat the entire question verbatim. Pay attention to clarity, expression, and phrasing. Pick out the main idea and emphasize these words. • Use the prompts on the screen, if any. • Use a probe (in accordance with study protocols).
The Confused Respondent: The Respondent does not give an answer that fits the answer choices.	<ul style="list-style-type: none"> • Repeat the answer choices or scale. • Repeat the question. • Use an appropriate probe, as suggested in survey protocols.
The Distracted Respondent	<ul style="list-style-type: none"> • Listen carefully. Try to analyze what is going on. • Re-read the question verbatim, and re-read the choices. • Offer to suspend (sometimes helps the person focus better).

	<ul style="list-style-type: none"> • Say, “Would you like to take a minute to (turn down the TV, deal with a crying baby, answer the door, etc.)?”
The Argumentative Respondent: Once you are in the survey questions, this is rare.	<ul style="list-style-type: none"> • Say, “These are the questions the Ohio Department of Job and Family Services considers to be important.” • Say, “Remember, you can refuse to answer any question. All your answers are confidential.”
The Abrupt Respondent: The Respondent has answered the question previously, or interrupts before hearing the entire question	<ul style="list-style-type: none"> • Say, “I have to read every question as it comes up on my screen so that everyone who participates in this study answers the same questions.” • Read every question verbatim, and in full. • Say, “I have to read every question in full.”
The Respondent who becomes emotional.	<ul style="list-style-type: none"> • Maintain focus and listen. • Adjust your pace and tone of voice, if necessary. • <u>Do not assume</u> that the Respondent cannot continue. • <u>Do not comment</u> on remarks (until end of survey).

All of these strategies help interviewers stay in control of the interview. When done smoothly and confidently, with a pleasant voice and manner, these techniques can also help you *to build rapport with the respondent*.

Note: After a difficult interview, take a deep breath and count to five to clear your mind before beginning the next interview. Promise yourself to take extra good care of yourself on the next break.

Maintain Neutrality

The interviewer must make every effort not to influence the respondent’s opinions, suggest answers, or lead the respondent to a specific answer. Interviewers should be *nonjudgmental, noncommittal, and objective*. Nothing in the interviewer’s words or manner should imply criticism, surprise, approval, or disapproval of either the questions or a respondent’s answers. Even a slight gasp or “Okay” can clue a respondent to a reaction. Read the script in an even, neutral tone, and *avoid reacting in any way* to the respondent’s answers.

Sometimes interviewers feel that they must affirm a respondent’s answers in order to keep the respondent’s attention and continue the respondent’s cooperation. (The respondent says, “I stopped smoking three years ago.” The interviewer says, “That’s great!”) *This is unacceptable, unnecessary, and counter-productive*. Think about this: if you make a comment about stopping smoking, you set up in the mind of the respondent that you are now judging their behavior. Your previous judgment may actually *inhibit the respondent* from giving an honest answer later in the survey.

In conducting an interview, you are giving the respondent something valuable. You are giving the respondent *your full, unbiased attention*. You are *focused on the respondent and listening carefully*. You are giving the respondent an opportunity *to be represented* in an important study.

A neutral approach *helps the respondent to feel comfortable* answering the questions truthfully and completely. The questionnaire is designed to elicit a free flow of ideas and opinions. Respondents *need the freedom* to say what they think and feel *without being influenced* by anything an interviewer might say.

Avoid Leading

The survey questions are carefully written, revised, and then tested. In most instances, it should be sufficient to read the question and obtain an answer on the first try.

If the respondent is having trouble answering the question within the choices given, re-read the question and the answers. It is your job to get the *respondent to commit to an answer*. Use neutral probes, if necessary. You want the answer to *come from the respondent*, and not from anything you have suggested or influenced.

Interviewers who lead respondents often do so because they fear a break-off, they feel the respondent is rushing them, or they feel a lack of confidence in their ability to probe skillfully.

Here are some forms of leading: An interviewer must *never* say these things:

- “Are you the person with the most recent birthday in your house?”
- “So you said you it’s been 2-3 years since you went to the doctor. Is that more like 3?”
- “And no physician has told you that you have asthma.”
- “I don’t suppose you’ve visited a specialist in the last year?”

All of these examples of leading also demonstrate paraphrasing the script, and not *reading verbatim*!

Make Quality and Accuracy a Priority in all Aspects of Interviewing

While you are conducting an interview, keep in mind the objectives of the OFHS. Remember that this is an important study that has the potential to affect the health of all Ohio residents. Remember that the client is relying on you and is counting on your best effort on this and every interview. Be prepared; know the survey; use your best voice quality; read verbatim; probe when necessary; record all answers accurately. *Strive to meet productivity standards without sacrificing quality.*

Transitional Phrases

Transitional phrases can be used throughout the survey. These rapport-building sentences can be used between sections, at difficult questions, in reaction to the emotions of the respondent, and in the encouragement of the person's efforts.

- I understand how you feel, many people feel that way.
- I certainly understand your concern. Let me explain why we ask this question/how we use this information.
- May I take a moment to address your concern?
- I would like to mention...
- I understand what you're saying; please let me point out that...
- I appreciate your patience, my next question is...
- Please allow me to explain the importance of our survey.
- That's a good question; let me provide you with an answer.
- Please let me explain why I'm asking these types of questions.
- Your time is appreciated; let me take a minute to explain that...
- (Respondent states they are busy) I am sorry I caught you/called at a bad time...
- That's a concern many people have nowadays...
- We have just finished the hardest part of the survey; thanks again for your patience/help
- Thanks for your help in getting through the (insert section); it's the toughest. I'll go through the rest more quickly.
- We'll be done soon. I know your time is valuable, and that's why I'm going quickly. I really appreciate that you are helping me.

Know the Questionnaire

The interviewer's job is to complete interviews honestly and accurately with respondents who meet the selection criteria. If a particular record cannot be completed on the present call, it is also the interviewer's job to make the best effort possible to enable the next interviewer to get a complete or resolve the record with an appropriate terminal disposition.

Be Prepared

Before you log in and begin calling, have a FAQ sheet at your station. If you are unsure about dispositions, have the list of dispositions ready. Think over the kinds of questions asked by respondents, especially those questions that have given you problems. Think about how you can better answer those questions. Review protocols, mechanics, and any other parts of the survey.

Pay Attention to the Screen for Information and Instructions

The first screen on a record gives the call history and message from the previous caller. The introduction screen indicates whether or not a selection has taken place, the reason (if given) for

a termination after the selection process, previous refusals, etc. Scan these screens for any information that indicates how you might approach the introduction, and adapt your introduction accordingly.

On the survey questions, pay close attention to any and all instructions to interviewers. These appear in bold or in brackets on the screen. They include:

[Please read]
[Do not read]
[Multiples allowed] i.e. {mul = 5}
[Read only if necessary]
[Round up fractions]

Prompts that are specific to certain questions
Keystroke instructions

Make Every Introduction Count; Make Every Contact Count

Keep in mind that we need to meet a very specific and rigorous protocol for each element of sample loaded into the system, and we have to obtain high response rates. This is different from studies in which we load more sample to achieve a certain *number* of completes and do not need to meet a protocol. This means that attention and care must be given to introductions, refusal conversion, correct dispositions, and messages.

- Think about how you are either going to get a complete on this call, or do your best so that the next caller can get a complete or resolve the record.
- You play a part in avoiding wasted effort. For example: a business phone put back into calling means that another interviewer will call that number again. This wastes time and lowers productivity.

Use the Correct Disposition and Leave Good Messages

Learning and using correct dispositions and leaving good messages for the next interviewer are two of the most important factors in making every contact count and in increasing the chances of getting a complete on the next call. [P1]The list of dispositions is in Appendix C. Please keep this sheet at your station and refer to it often. If you are ever unsure how to code a record, see a supervisor. Disposition Protocols and Leaving Messages are also covered in Appendix E of this manual.

Move Smoothly From the Introduction to the First Question

Unless you have encountered resistance or questions, move to the first question without interruption. A pause gives the impression that the interviewer is waiting for approval or disapproval. It also allows the respondent time to refuse the interview. Asking, “So, do you want to do the survey now?” or “Would you mind answering some questions?” invites a refusal. Move right into the selection process or survey questions.

The Selection Process Requires Care and Attention

The process to select a respondent occurs immediately after the introduction and verification of the phone number. The introduction, disposition screens, and selection screens begin on page 46. These will be reviewed in detail.

Here, it is important to know that you will be asking respondents to tell you which adult 18 years old or older in the household had the most recent birthday. This person’s name, nickname, or initials is then entered into the computer, and the computer then uses this information to cue questions. The interview *can then be continued with the selected respondent* or a *proxy* if the selected respondent has a physical or mental impairment and unable to answer the questions. However, if a proxy answers questions in the survey, the proxy must be able to answer questions for the selected respondent and to provide information about the selected respondent and not about himself or herself.

Don’t rush this process. Listen carefully to be sure that the person with whom you are speaking *understands the selection process*. You will only be able to proceed with the interview if one of the following two conditions is met:

1. The selected respondent is available, willing, and able to answer questions about his/her health insurance.
2. The selected respondent has a LONG TERM or PERMANENT physical or mental impairment and unable to answer any questions, but a proxy (also an adult 18 or older) is available, willing, and able to answer questions *for* and *about* the selected respondent concerning the selected respondent’s health insurance.

The questionnaire provides a series of questions or prompts to help you ensure that one of these two conditions is met. It is up to you to make sure that the respondent understands you when you ask the questions. No substantive questions will be asked until there is a selected respondent on the telephone or a knowledgeable and willing proxy if the selected respondent has a LONG TERM or PERMANENT physical or mental impairment.

Occasionally a respondent will feel hesitant answering these questions about household composition. Reassure this person that the information gathered in the study is confidential. Offer the verification numbers: the general 1-800 number at your station and the Ohio Department of Health number from the FAQ sheet. Then you can say:

Since we cannot interview everyone, the OFHS is designed to ensure that the people we interview are as representative as possible of the entire population.

A Look at the Questionnaire

Understand the nature and content of the questions. Be prepared to answer any questions that come up in the course of the survey. Be prepared with specific probes on certain questions. Know the length of the survey and be able to estimate the number of minutes left to complete.

As you go through practice, try to anticipate the kinds of challenges posed by different questions. Refer to the OFHS Questionnaire for clarification about the intent of any question in the survey. A copy of the complete questionnaire can be found in Appendix J.

Know How to Suspend and Resume

Suspending an interview allows all of the information collected up to that point in the survey to be saved. The interview can be resumed at the next question without having to go back to the beginning. (In the event of a break-off, typing “term” in the middle of an interview erases the information collected to that point.)

To suspend: Type “suspend” at the arrow prompt: → suspend. A screen will appear giving instructions to the interviewer. Below the screen is a space to leave a message for the next interviewer. Leave a very specific message stating why the interview was suspended, whether or not the respondent requested a callback, and when the respondent requested a callback, etc.

11/14 SSPND sf’s baby woke up; req C/B 11/15 6:00PM 999b
06/05 SSPND sm refused on demographic question & HU! 999b
03/20 SSPND ¾ done, in child section?’ s; C/B 3/23 10:00AM 999b

On the next screen, an instruction will appear to enter a time to call back. Enter a time. We must schedule a callback rather than allow the computer to automatically reschedule. If the computer reschedules the call it will change the disposition to 105-System Scheduled Callback; therefore, refusals will not be accurately tracked and our whole refusal protocol is thrown out the window.

To resume: The call history screen gives the first indication that a record has previously been suspended. A new line appears saying, “Message typed when interview suspended:” A message from the interviewer who suspended the record appears below that line. While you are still on the intro screen, and before you resume the interview, *be sure that you are speaking with the selected respondent or the previous proxy!* After the introduction screen, the next screen to come up could be the first survey question. You might have to ask two questions before arriving at the question that resumes the survey. Ask for patience reading the first few questions again. Say, “We can go ahead and continue the survey now,” and then ask the first question.

Correct Errors

If at any point, you or the respondent realizes that a previous question was answered incorrectly, back up and change the answer, even if this means you have to re-ask an entire section. Remember, lawmakers and policymakers depend on the fact that the data is reliable, and accurate. In addition, one erroneous answer could bring the respondent down the wrong path of the questionnaire, making the interview frustrating for you and the respondent and causing the data to be useless.

Ask Questions

Ask for help from a supervisor any time you encounter a problem and don't know what to do.

Offer Suggestions to Supervisors or QA Assistants

Interviewers have first-hand, front line experience with the OFHS. Your observations and suggestions are valuable to the project managers and the clients. The ODJFS and ODH have asked that project managers record all interviewer comments and share the comments with them. If you see any problems or have ideas to improve the survey, please document them. Give your suggestions in writing to a supervisor or QA assistant and ask that they pass it along to the project manager.

OFHS Survey Protocols



The following procedures must be followed to ensure that the data collected by Macro International are valid and reliable. Macro International's contract with the client specifies that these protocols will be followed. It is your responsibility as an interviewer to understand and implement these protocols.

Reading Verbatim

Much work has gone into the writing and testing of the OFHS questions. Every question should be read to the respondent exactly as written. Methodological studies have shown that even slight wording changes, such as substituting "should" for "could" drastically influence the respondents' perception of what is being asked and their responses to the question.

- The questionnaire should be thought of as a script, and the questions should be *read exactly as they appear*.
- Questions must be read in the *exact order* in which they appear.
- Read all questions *in full*. Never accept an answer if you are interrupted and have not read the entire question.
- Interviewers must ask *every question*. In answering one question, a respondent may sometimes answer another question that appears later. If that happens, the interviewer must *still ask the question*.

The questions that appear on the screen are part of the contract agreement between Macro International and the client. These are the questions the *client wants interviewers to read*. Macro International, in signing the contract, is guaranteeing that interviewers are *reading verbatim*. Quality assurance assistants and supervisors monitor interviewers to verify that interviewers read verbatim.

Respondent Selection

Proper administration of the selection process is extremely important. None of the survey questions can be asked until an eligible respondent has been selected. Give this process enough time and attention. The selection process ensures that we are interviewing all types of people. If this is done correctly, the data gathered are valid. This process has a number of steps.

Eligible Household: An eligible household is any residential housing unit such as an apartment, a house, or a mobile home. Non-eligible households include the following: dormitories, hospital rooms, nursing homes, group homes, sororities/fraternities, halfway houses, shelters, prisons or barracks.

You may come across situations where the telephone number rings into businesses, cell phones, computer and fax lines, pay phones, etc. These are to be considered “non-residential” numbers and are to be assigned the appropriate disposition.

Selection Process: Interviewers will ask for the adult 18 years old or older in the household who has had the most recent birthday. In a single adult household, that adult will be the selected respondent. If a proxy conducts the interview for the selected respondent, you will be prompted to enter the name, nickname, or initials of the selected respondent. This name/initials will be used to help make the survey questions more personable. |

[P2]

- Be careful if another person answers for the respondent. There is the possibility they will answer for themselves rather than the adult they are speaking for. Using the initial of the person in each question should guide the respondent to answer for the correct adult. Any resistance or confusion, alert a supervisor. If the person on the phone does not cooperate, terminate the call with an appropriate note and alert the supervisor to the situation.

Eligible Residents: Eligible household members include all related adults (aged 18 years or older), unrelated adults, roomers, and domestic workers who consider the household their home. Household members do not include adult family members who are living elsewhere.

As you go through the selection process, remember the following:

- Everyone 18 or older should be counted among the adults living in the household. High school students who are 18 years old or older should be included, as should adult children living at home. *College students who are living away from home should not be included.*
- The respondent needs to live in a residential household. People living in group homes, half-way houses, dormitories, barracks, nursing homes, jails, hospitals, rehabilitation units, and so forth do not qualify as eligible respondents.

Verifying that the proxy is knowledgeable: In order to proceed into the survey, *it is necessary to verify that the proxy is knowledgeable about the selected respondent’s health insurance.* It is then necessary to get the knowledgeable proxy to the telephone. If at any time you begin to question whether you have the correct respondent on the phone, verify with whom you are speaking. You may have to ask the correct person to come to the phone, and then back up and repeat questions with that person. You may have to end the call and put in a callback to reach the correct person at another time. Both of these are better options than completing the interview with the wrong person. |

[P3]

If the selected adult is uninsured, the interview should proceed with the selected adult, if at all possible, since knowledge of health insurance coverage is not an issue.

Rectifying errors in the selection process: Once a respondent has been selected, the interviewer cannot re-select a respondent. If you feel that the selection process was invalid for

any reason, write down the master ID number and stay on the screen and contact a supervisor. Explain the reason you are concerned. The supervisor will confirm that the selected respondent is correct or will enter a code to change the selected respondent.

Definition of a household: The State of Ohio declares a family to be two or more persons residing together who are related by birth, marriage, or adoption. For legal purposes, unmarried couples are NOT included under the definition of family.

Reselecting a Respondent

Occasionally something goes wrong in the selection process: e.g., the selected respondent has moved out (or is now deceased); or the selected respondent is actually at the residence so infrequently as to be a non-resident (i.e. stays with friends, picks up the mail at the house). The interviewer should follow these steps:

- Verify that the selected respondent is not the adult with the most recent birthday or that they are not considered a resident of the household.
- Explain the situation to the resident with whom you are speaking.
- Contact a supervisor to back up in the survey to the beginning of the selection process. Have the appropriate person come to the phone and repeat the introduction.
- Go through the selection process with the appropriate respondent, and complete the interview or schedule a callback.

If the respondent is no longer on the phone, schedule a callback, using a 104- hard scheduled callback or 105 – system scheduled callback disposition.

Unique Situations in the Household Selection Process:

Interviewers must make a determination as to whether the telephone number reaches a household, and determine the correct disposition. This becomes especially important when summer approaches and we reach people at timeshares and summer homes.

What are the criteria for a private residence?

- The person answering the phone does NOT say that the number is a business, institution, group home, pager, fax machine, cell phone, or modem.

What is the proper disposition for a cell phone?

- Code cell phone numbers as “121-Non-residential, Cellular, Phone Booth”

What is the proper disposition for dedicated faxes and modems?

- Code faxes and modems identified as such on each call attempt as “122-Fax machine”

What if the number is both a phone and a fax?

- If the first call placed is something other than a fax and the next call is a fax, the number may not be a dedicated fax line. Code any fax as “122 Fax machine” and continue to call. The system will put the record back into calling a specified number of times to cover the possibility that the number is used for both phone and fax. If a specified number of consecutive additional calls are faxes and there is no evidence the number rings into a residence, the number will be automatically taken out after a specific number of attempts.

What is EFAX and how should it be coded?

- EFAX is a service that permits voice messages and faxes to be sent to an e-mail account. When a number is called, a message identifies this number as an “EFAX subscriber.” These numbers will never ring into a residence and should receive a final code of “Not a private residence.”

If a respondent states they reside at this number for less than 30 days a year, should the interview continue?

- The interview should be terminated and coded as “Not a private residence.” If the respondents state they live at the residence 30 days or more, then continue the interview.

How are timeshares handled?

- If the respondent indicates the residence reached is a timeshare, and they do not live there for 30 or more days a year, code as “Not a private residence.”

Proxy Interviews

A proxy interview is one in which one person answers for another. Proxy interviews **are** allowed for the OFHS, ONLY if the selected respondent has a LONG TERM or PERMANENT physical or mental impairment. If the selected respondent is temporarily ill (for example with the flu), you would attempt to do a callback and try to get the selected respondent next time.

If the selected respondent has a LONG TERM or PERMANENT physical or mental impairment, proxy interviews can be conducted with a knowledgeable and willing adult. Since the proxy is answering for the selected respondent, if the proxy has already begun the survey and refuses to continue, we should treat this as a “160-Selected respondent refusal”.

What is a “knowledgeable adult”? A knowledgeable adult is someone 18 years old or older who is able to answer questions about the selected respondent’s health insurance.

Given that the selected respondent is usually the most knowledgeable person about his/her own life, your first course of action should be to try and see if the selected respondent can come to the telephone. If the selected respondent cannot come to the telephone, you have two options:

1. You can try and schedule an appointment for a time when the selected respondent may be available to do the interview.
2. If the selected respondent has a LONG TERM or PERMANENT mental or physical impairment and is NOT cognitively/physically capable of answering questions over the telephone regarding his/her health insurance status, AND the person on the telephone is not knowledgeable about the selected respondent's health insurance status, you can try to have the person on the phone transfer you to someone who will be knowledgeable, or set-up a callback to reach this other "knowledgeable" adult.

It is important to keep in mind that most interviews are successfully completed on the contact where respondent selection takes place. If the proxy is willing to do the interview at that time, and they are knowledgeable about the selected respondent; you should always try and complete the interview.

During a Proxy interview, the selected respondent's name is heavily repeated. Interviewers are allowed to say 'he' or 'she' some of the time, rather than always stating the selected respondent's name.

The OFHS Survey Child Section

The main section of the survey asks questions about household composition:

- Of the adults living in the household, who has had the most recent birthday?
- How many adults age 18 and older live in the household?
- How many adult family members live in the household?
- How many children, persons 17 years of age or younger, live in this household, whether they are family members or not?

If the answer to the last of these questions is "none," then the interview will terminate at the end of the Adult Section of the OFHS.

However, if there are one or more children in the household, and they are related to the selected adult respondent from the first part of the interview, the interview will continue with the Child Section. The OFHS Child Section is organized as follows:

- The Selection Process of Child Respondent (to determine which child will be the respondent to whom the questions refer)
- The Selection Process of an Adult Respondent (to determine which adult in the household is knowledgeable about the child's health and health insurance coverage)

- The Survey Questions
- The Close and Thank-you

Other aspects of the OFHS Child Section that are important to know:

- Each child survey takes 10 minutes on average.
- It may be necessary to conduct the interview with a different adult in order to conduct the interview with the adult who is knowledgeable about the child.
- The survey may need to be suspended and a call-back entered in order to reach the knowledgeable adult.
- The questions cover topics similar to those in the adult section.
- The skip patterns are similar to those in the adult section.
- People are understandably protective of their children, and this may be a factor in encountering refusals.

The Selection Process for a Child

Selecting the Child Respondent: Interviewers will ask for the child who is related to the adult respondent and had the most recent birthday. Then the interviewer will ask for the name, nickname or initials of that child. This is done to ensure that *all* the questions refer to the *same child*, no matter when or with whom the interview is conducted.

Selecting the Adult Respondent: The interviewer then asks the current respondent's relationship to the child. The interviewer then asks, "Now I would like to speak to someone IN THIS HOUSEHOLD who can answer questions about (selected child's) health insurance coverage. Is that you, or a different person?"

If the respondent on the phone is a knowledgeable person, the interview can continue. If a knowledgeable person is a different person, then the interviewer will ask for that person's name or initial, and if he or she is available.

- If a new person comes to the phone, a new introduction script will appear on the screen.
- If a knowledgeable person is not available, the interview will terminate and the screens will prompt for a time to call back and for a CfMC message. Interviewers should always leave a CfMC message for the next interviewer.

- If there is no knowledgeable adult in the household, try to continue the interview with the adult currently on the phone – they may at least know if the child has health care coverage – our top priority for this section of the survey.

Verifying that the proxy are knowledgeable: As in the adult section, it is crucial that you verify that you are speaking with the correct person, and that both you and the respondent are referring to the same child on every question. Interviewers who are reaching the household on a call-back must verify that you are:

- Referring to the correct child-respondent, using the initials or nickname or name provided.
- Speaking with a knowledgeable adult respondent.

If at any time you are in doubt about either of these, take time to verify before continuing the interview with the wrong person or in reference to the wrong person.

Reselecting the Child Respondent or the Knowledgeable Adult: The reselection process for either or both of these is similar to reselecting an adult respondent.

Refusal Conversion: Issues Special to the Child Section

It is understandable that parents and other adults are sensitive to privacy issues concerning their children. Parents may be reluctant to give out information about their children. Parents may also be concerned that the interviewer or the people conducting the study are judging their care of their children. Interviewers need to be prepared to answer questions and deal with refusals.

- Listen carefully to what the respondent is saying.
- Be prepared to offer assurances of confidentiality.

Make use of additional approaches:

- Your participation and the participation of other families in Ohio will help the state of Ohio to develop better programs to ensure better health care for our children.
- The state of Ohio is interested in assessing how many children have health care coverage, and how their coverage (or lack of it) affects their lives. The best way of finding this out is to speak with people who actually care for children.
- Children have different needs than adults do. For instance, they need routine physical exams, and immunizations and other preventive care. If we only asked questions about adults, we wouldn't be able to find out about the health needs of the children in the household.

- We are interested in health care as it relates to the needs of the whole family, not just individuals. We're hoping to obtain a picture of health care coverage and health needs of people of all ages.
- The questions are very similar to those asked in the previous section.

When the respondent wants to terminate before the child section is complete:

If a child has been identified and you attempt to suspend the interview during the child section, the program will prompt you to gather five to six key questions before suspending. The text will look something like this:

PAR1. Would you be able to answer just 3 to 5 of the most important questions before we end?

[IF RESPONDENT HESITATES: There are just a few key questions that would help the state of Ohio assess how many children have health care coverage and how it affects their lives. Your responses to just these few questions is very important to the state.]

01 CONTINUE
 99 (Skip to CHREFUSAL) REFUSED TO CONTINUE

If five of the six key questions have already been answered when you suspend, the respondent will only have to answer one final question before suspending. We will still call the respondent back to attempt to gather all of the questions for the child. The record will not be coded as complete until either all the questions are answered, or the record has reached protocol.

Ensuring Respondent Confidentiality

The OFHS contains sensitive questions and information. It is natural and understandable that respondents will question where the data are going and how the information will be used. When a respondent asks questions about confidentiality, be prepared with an explanation. Take enough time; don't rush the explanation. Use the FAQ sheet. Mention these points:

- No information that can identify you is ever used in an OFHS report.
- The data are only reported in aggregate or group form.
- Any identifying information, such as a telephone number or an initial, is separated from your responses once the data have been collected and compiled. The computer separates the identifying information data from the final report.
- As an interviewer, I have signed a confidentiality agreement as a condition of employment, and I am not allowed to discuss this study or any study with anyone outside the call-room and outside of work-related conversations.

- Some respondents may have privacy issues because we ask for the name of the selected respondent and the selected child. We do not necessarily need a name; a nickname or initials will do. These names do not become part of the data sent to the client. They are used as internal variables in the program to help the CATI script work better and to help us with administering this survey efficiently.
 1. We use the name to help make the questions asked more conversational.
 2. We also use this name to help keep proxy respondents focused on answering in terms of the selected respondents.
 3. We use the name to assist us in identifying the correct selected respondent if it is necessary to do a callback or resume a suspended interview.
 4. We use the name to assist with the verification process if necessary.

Answering Machines and Privacy Managers

The OFHS protocol requires interviewers to leave messages on answering machines and privacy managers on the 4th and 9th attempt of every record. The CATI program will instruct you as to when you should leave this message, and what message should be left (if NOT prompted by the computer, do NOT attempt to get through privacy managers or leave messages on answering machines). The following script will appear when the interviewer should leave a message on answering machines or privacy managers:

For answering machines:

Hi, my name is _____. I am calling on behalf of the Ohio Department of Health. We are conducting an important study on health insurance coverage. Your participation would help the State of Ohio make better health care policy decisions for its residents of our State. Please call us at 1-800-639-2030 at your convenience."

For Privacy Managers:

- If the message asks to identify who or what company is calling:
"We are calling on behalf of the Ohio Department of Job and Family Services and the Ohio Department of Health."
- If the message asks to enter a phone number:
Enter the Macro toll free number:
1-800-639-2030

Accuracy: Probing and Clarifying

Probing and clarifying, or using words to obtain more information or more precise information, is one of the most challenging and important aspects of interviewing. Probes are used when an answer is inadequate and requires the interviewer to seek more information. Probes are also used when a respondent is unsure of an answer and is having trouble making a choice.

Here are some general ideas about probing and clarifying to keep in mind:

- Effective probing requires that the interviewer understand a question's rationale. Different questions ask for different kinds of information. Learn the intent of the question. Different kinds of questions require different kinds of probes or clarifying techniques.
- Use neutral questions or statements to clarify a response or elaborate on an inadequate response:

Can you explain that?

I can only enter one answer. Which would you like me to record?

The question means whatever you think it means to you.

Which choice would you like me to use?

What would be your best estimate of the average number of times?

So, in terms of "how many days," what would be your best estimate?

Would you like me to enter "yes" or "no" for that?

So, on a scale of "excellent, very good, good, fair, or poor, what would you like me to put?

- Use "bounded recall" to probe on questions involving a date. Don't accept "don't know" without trying to arrive at the respondent's best recollection.

Do you remember what season that was?

Okay, in the winter, do you think that would have been December, January, or February?

Last June would have been June of 2007. Was it 2007 or a year before that?

Can you remember anything else that was going on at the time?

(You don't have to tell me; I'm just wondering about the date.)

Do you remember what you were wearing when you went for that appointment; were you wearing an overcoat or shorts?

- Some questions ask for multiple responses. Ask "Anything else" until the respondent says, "no," or until you have entered the number of answers allowed.
- When the respondent is unable to decide on an answer, does not understand the question, or misinterprets the question, the entire question and the choices should be repeated.
- The silent probe is also useful. Pausing or hesitating indicates that more or better information is needed.
- Respondents often dodge a question with "I don't know." An initial "I don't know" should be probed. Sometimes the respondent just needs a little time to think over the answer. If the respondent really does not know the answer, record "Don't know."

(Occasionally “Don’t know” is a legitimate choice, as in a question of knowledge. In this instance, no probe is needed.)

- The best verbal probes are deft, skillful and quick. This can be learned with practice. You want to be able to probe and still keep the interview moving right along.
- It is especially important to probe on questions that are part of a skip pattern. Future questions depend on the answer to these questions. Make a note of where skip patterns occur in the survey.
- You can verify that you have recorded the correct answer by repeating the answer back to the respondent.

Being Assertive

What is assertiveness?

- To put into words positively and with conviction,
- To maintain, or insist on the recognition of the question, or
- To be persistently positive or confident.

Assertive approaches that can be used in the OFHS include:

- Using a strong and confident tone of voice.
- Promptly and appropriately responding to all questions and concerns voiced by the respondent.
- Smoothly pacing with the respondent throughout the survey.
- Being in control of the survey – compared to being AGGRESSIVE, which is being out of control, or being PASSIVE, where there is no control.

Dealing with Refusals

OFHS protocol specifies that with the exception of verbally abusive respondents, selected respondents who initially refuse to be interviewed will be contacted one additional time to give them the opportunity to complete the interview. In addition, we will attempt to contact households again where a proxy has refused for the selected respondent; here, we will hope to reach either the selected respondent or a suitable, willing proxy the next time we make contact. If the proxy has already begun the survey and is refusing to continue when we attempt to resume the interview, treat this refusal as a “160-Selected Respondent Refusal.” It is best for this second contact to be made by a supervisor or a different interviewer.



Here are a few things to keep in mind about refusals and your approach to them:

- Respondents are sometimes rude and hostile for reasons that have nothing to do with your skill as an interviewer or you as a person. Don’t take these reactions personally.

- Rather than reacting to a respondent's anger or resistance, *remain calm* and *listen*. Use what you are hearing to address the respondent's objection.
- Refusal conversion skills get better with practice. *Make the effort* at refusal conversion every time you encounter resistance.
- Listen to other interviewers who are successful at refusal conversion. Notice what they do. For one thing, often their voices become even more pleasant, conversational, and gentle. For another, they don't say the same line every time. They adapt their approach to the particular respondent.
- Do not be afraid to be assertive with hesitant respondents; use all of your powers of persuasion to get the interview. *Now is better than later*. Research has shown that the highest completion rates occur at the initial contact and decline with each successive call. Unless it is clearly a bad time, the interviewer should always try to convince the respondent to do the interview at that time.
- Project a confident and reassuring manner while conveying a genuine interest in the respondent. For example, if the respondent is in the middle of cooking dinner, apologize for calling at an inconvenient time, and offer to call back later. This will convey the interviewer's willingness to accommodate the respondent and an understanding of the importance of the respondent's time.
- It is very important to document the reason for the initial refusal because this information may help convert a refused interview into a completed interview on a later call.
- Use the information in the message field (from the initial refusal) to prepare specific responses and approaches on the present call.
- Distinguish between a refusal and an appointment. "I don't have time to talk right now," may indeed mean that the person is busy. In this case, try to set an appointment for a callback time.
- If a respondent seems willing to participate, but is concerned about the survey's legitimacy, explain the purpose of the survey. Offer the supervisor 1-800 number at your call station. You can also offer the contact person and phone number at the ODJFS.
- In your refusal statement we are hoping to say that the survey is conducted by "State of Ohio Department of Health and Ohio Department of Job and Family Services" as they are the primary contract holder. Our goal is to give credit to the full list of sponsors if possible.
- A list of refusal statements and FAQs will be provided that contain suggestions to help with the refusal process that will be provided to interviewers.

Refusal Protocol Modification: Interviewers should inform a supervisor about a number being removed from active calling only under all the following conditions:

- A non-selected respondent of a household has refused to transfer the call to the selected respondent, or a knowledgeable proxy and states that he or she will never allow the call to be passed onto the selected respondent or knowledgeable proxy;
- After repeated call-backs, the interviewer has no indication of an appropriate call back time to reach the selected respondent or knowledgeable proxy – and the household is upset that we keep calling; and
- Future calls are unlikely to result in a completed interview based on the judgment of the interviewer.

The number of selected respondent records that will be removed from active calling under this refusal protocol will be relatively small. However, these records will be tracked closely. Project managers may decide to return selected records to active calling on a case-by-case basis, if the possibility of obtaining completes on these records might improve the response rate.

Dealing with Specific Refusal Situations: If you see this CfMC message “06/23 sel fem ref x1 not interested 999B,” (or similar message) try some of these approaches:

- I realize we have called you already on behalf of the Ohio Department of Job and Family Services. I’d like to have a chance to give you a little more information about this study and why we’re doing it.
- The results of the study are used by the press, lawmakers, researchers, and health care professionals.
- Your input is important so that policymakers and the health care community can make better decisions in planning health care and health insurance programs.
- We cannot replace you with anybody else. We have a limited number of households that we can contact. When someone does not participate, this makes the results less representative. This is your chance to be represented in policy-making decisions.
- We want to give everyone who was selected a chance to participate.
- As we all know, resources are limited. The information collected in this survey helps determine funding levels and public policy for health care and health insurance programs statewide. One of the purposes of this study is to assess where the needs are greatest.

- Nothing is ever reported in any way that can identify you. The company I work for, Macro International is very strict about guarding confidentiality. The computer drops all information that can identify you from the report. Results are only reported in group form.
- This is not a political group or business. Nobody will try to sell you anything as a result of your participation.
- Most people find the survey interesting. We could begin, and if you don't have time to finish it now, we can call later at your convenience.
- The fact that more than 1 million people living in Ohio are without health insurance and that many have problems getting health care is a major concern. This survey will help policy makers better understand the issue. That is why it is very important for us to also talk with people who don't have health insurance.

Handling a contact when you need to interview a selected respondent or knowledgeable proxy

- {Read the introduction again and explain.} We are conducting a study in which we need an equal number of men and women to participate. It is important that we speak to your husband or wife. I will be asking some questions about health care programs. This information is important to improve programs of the Ohio Department of Job and Family Services and the Ohio Department of Health.
- Don't accept the following: "He wouldn't be interested in that," or "He hates telephone surveys." Explain that it is very important to speak directly with the person who is selected for the study, or someone who is knowledgeable about the selected respondent's health insurance. Sometimes the spouse can become an ally in enlisting the cooperation of the selected respondent; sometimes the spouse is the more knowledgeable person about the selected respondent's health insurance. Encourage him or her to explain the purpose of the study and the importance of participating. Try to make an appointment for a more convenient time. If the selected respondent comes to the phone, read the introduction and ask the first question.

How did you get my phone number? It's unlisted.

- The computer dials telephone numbers at random. The computer has the area codes and prefixes for the areas covered by the study. The computer then dials the last four digits at random. We get all kinds of numbers: fire stations, real estate offices, pay phones, etc. The computer can dial an unlisted number as a matter of pure chance. The study is confidential, and nothing can ever be traced back to you.

I don't know anything about that.

- This isn't a test. We only want to ask about your health care experiences and health practices that affect you. Many people find the survey to be interesting.

Why should I participate?

- This data will be used to improve health care and health insurance programs in Ohio. Participating is one way for you to be represented at the state and federal level. The information is used for planning purposes at all levels of government to develop more effective health care and health insurance programs.
- For one thing, this has to do with how lawmakers spend taxpayer dollars, and putting resources into programs that benefit the most people and do the most good.
- The more people we have participating (the higher the response rate), the more accurate the results will be. When you don't participate, it leaves a "hole" in the data.

Why do you need to know which adult had the most recent birthday?

- Our survey protocols require that we randomly select one adult from your household. We ask for the adult with the most recent birthday can be sure that the study represents all adults in your state: men, women, young, old, healthy, not healthy, etc. The "birthday" method is an easy and quick way to make sure the selection is random.

I don't do surveys over the phone / Please put the survey in the mail.

- We can only conduct this survey over the phone. After years of experience conducting these surveys, the Ohio Department of Health and the Ohio Department of Job and Family Services believes that this is the most efficient, representative, and thorough method of gathering this information. Many people like yourself have participated in this survey, and many find it interesting. You can refuse to answer specific questions.

Remove my name, you can't call me, refers to the do not call law.

- I know you are referring to the law that controls telemarketing companies that are selling over the phone. We are a survey research company, and companies like ours do not fall under these laws when we do our research calls. May I explain the importance of our work and why we're calling you?
- I understand how the federal law may be confusing, but research calls are not included in the federal regulations that apply to telemarketing calls. We're not selling anything; we'd just like to include your opinions in our research study. Information about telephone consumer rights can be obtained from the Federal Communications Commission (FCC): phone: 202-418-0200 or at www.fcc.gov. and the Federal Trade Commission (FTC) phone: 202-382-4357 or at www.ftc.gov.

You can't call me at this time

- Let me apologize if I disturbed you, as that was not my intention. You are referring to the laws on telemarketing. Opinion and research calls are permitted legally at this time. That law governs sales calls and we are not selling anything.
- We often call people at this time because we find many individuals are not home, or busy earlier in the day.
- Let me arrange a time that is less disturbing to you, so we can do this survey. What time tomorrow would be better for you?

Why keep calling me?

- The reason we keep calling is because it is important in research surveys to contact all types of people – the difficult to reach as well as those that are eager to participate. The reason we call more than once is to explain why it is important that you participate, because you represent thousands in your area that were not selected to do this survey.

Concern about privacy

- We in the research industry understand completely your concern about privacy today. There are so many companies trying to sell things to you, and to sell your information. Good research companies belong to several industry associations that follow these practices:
 - Your information is never available individually; your answers are combined with the answers of everyone else. And we never sell or give your name for sales purposes.
- Macro International is a research company that's been doing research for 30 years. In all of that time, we have never released any individual answers to anyone. We never report the results of our studies in any manner that could result in your being identified.

Refusal Basics

1. Be prepared. Have refusal statements at hand.
2. Remain calm and listen carefully.
3. Look for openings.
4. Acknowledge the concern: "I understand. Let me explain...."
5. Answer the specific concern.

6. Remember, as long as *someone is on the line*, you have not lost the interview. Keep talking (unless the respondent is just thinking of their answer)!
7. Listen carefully for a respondent's consent. Once the respondent has agreed to continue, stop the refusal conversion, and ask the first or next question.
8. At the completion of the interview, be sure to show genuine and sufficient appreciation for this respondent's participation.

Refused Interview: The percentage of refusals of total numbers called in a given interviewing period is an indicator of both interviewer performance and degree of potential bias in the survey data.¹

Recognize Key Words

What are they really saying? Are they asking you to convince them that the survey is worth their time? Observations are a good thing. As long as the respondent is on the line you have a chance to convince them to do the survey.

I'm not interested

The questions I have for you cover a wide variety of topics that affect you and your family, your health care, your health status, your needs, your experiences and insurance. There is also the opportunity to let the state know what you think about this survey itself.

I have no time

I understand that your time is extremely valuable. I will go as quickly as possible so you can be done.

If the respondent is still reluctant: Since your opinions are so valuable to us, I would like to schedule a time when I can call you back. What time later this afternoon/evening/tomorrow is the most convenient time to call you back?

What is this about?

The Ohio Department of Job and Family Services and the Ohio Department of Health are conducting this survey to determine the health care needs of people throughout the state.

Your household has been randomly selected by our computer program to represent thousands in your area.

I don't do surveys

Let me assure you that this survey is in no way related to sales and our information is kept confidential. All individual answers are protected within our company.

¹ 1999 BRFSS Quality Control Report, CDC

Who is Macro International?

Macro International is a full service survey research organization that has been conducting surveys for over 30 years.

Glossary

Accurate information: Conforming exactly to fact; errorless.

CATI Computerized Assisted Telephone Interviewing.

CfMC The software Macro International uses; Computers for Marketing Corporation.

Client: The party for which professional services are rendered. The party who pays for this service.

Contract: An agreement between two or more parties, especially one that is written and enforceable by law. The contract defines what will be done, and who will do it.

Data: Factual information, especially information organized for analysis or used to reason or make decisions.

Dataset: An organized group of pieces of related information. In social science and market research, datasets consist of coded responses to questionnaires. For example, a question regarding gender may be coded 1 for male and 2 for female as opposed to saving the entire word as the piece of datum. This allows the data collected to be analyzed by statistical software such as SAS. Statistical functions may be run and the information can be formatted to be accessible to the user and ultimately the client.

Demographics: The characteristics of human populations and population segments, especially when used to identify consumer markets.

Disposition: A numerical code associated with each attempt made on a record (e.g. 101 – no answer). The Disposition Code represents the outcome of the call as a numerical value.

Fielding: The process of collecting data using the survey instrument. The fielding “period” represents the start and end date of data collection.

Method: 1. A body of practices, procedures, and rules used by those who work in a discipline or engage in an inquiry; a set of working methods: the method of genetic studies; a poll marred by faulty methods. 2. The study or theoretical analysis of such working methods.

Loading: The addition of more sample, in this case telephone numbers, to the CATI system. Also, the process of initializing a study on the CATI system.

Objective: 1. Uninfluenced by emotions or personal prejudices: an objective critic. 2. Based on observable phenomena; presented factually: an objective appraisal. 3. Something worked toward or striven for; a goal.

Probability: *Statistics.* A number expressing the likelihood that a specific event will occur, expressed as the ratio of the number of actual occurrences to the number of possible occurrences.

Productivity: 1.The quality of being productive. 2.*Economics.* The rate at which goods or services are produced especially output per unit of labor.

Protocols: Rules determining the format and transmission of data.

Reliable data: Yielding the same or compatible results when the interview is administered multiple times with both the same or different respondents.

Representative: One who, or that which, represents (anything); that which exhibits a likeness or similitude.

Sample: *Statistics.* A set of elements drawn from and analyzed to estimate the characteristics of a population. Also called **sampling**. In the case of OFHS, sample consists of telephone numbers.

Skip pattern: An automated function of CATI interviewing that sequences the questions depending on respondent answers. Skip patterns are often modeled in such a way as to avoid asking respondents to provide irrelevant information. For example, in the OFHS, the skip pattern ensures that male respondents are not asked questions about recent pregnancies.

Terminal disposition: Terminal dispositions have a numerical value of less than 100 and greater than 0. (e.g. 001 – complete; 002 – hard refusal; 005 – non working number; etc.) Terminal dispositions will remove the telephone number from active calling. The telephone number will not be called by the CATI system again and it will not be accessible to the interviewer through the manual retrieval of records.

Valid: In the case of a survey, the response to a given question answers the intent of that question.

Logic. a. Containing premises from which the conclusion may logically be derived: a valid argument. b. Correctly inferred or deduced from a premise: a valid conclusion.

Verbatim: Using exactly the same words; corresponding word for word: *a verbatim report of the conversation.*

Appendix A – Special Interviewers and Spanish Interviewers

Comma 4 Interviewers



The computer automatically assigns records given certain dispositions to type 4 interviewers.

Records with these dispositions are sent to Comma 4 interviewers when they have the following dispositions:

- 111 Ineligible residence (Dorm, Barrack)
- 112 No Eligible respondent during time period
- 115 No Adults in Household
- 114 Physical/Mental impairment
- 113 Language barrier
- 121 Non-residential, Cellular, Phone Booth
- 129 Move to Refusal study
- 133 Teen/Child Line
- 160 Selected Resp. Refusal: (or resp has abusive language or threatens lawsuit)
- 161 Non-Selected resp. refusal: record received specified number of refusals
- 164 Refused to Transfer to selected resp x2
- 172 Selected person not available during time period
- 173 Selected person unable to complete-language barrier
- 174 Selected person unable to complete-impairment

Interviewers who are assigned as “Comma Four” are chosen for their excellent interviewing skills, their excellent refusal conversion skills, and their level of effort and determination in getting completes.

The job of the Comma 4 interviewer is of two kinds.

Ineligible dispositions: If the record has received an “ineligible” disposition (the first group above), your job is to verify that the disposition given to the record is correct. (Occasionally these dispositions are used incorrectly.) Probe as necessary; schedule callbacks, if necessary. If it is possible, try to get a complete with the selected respondent on these records. If getting a complete is not possible, assign the correct terminal disposition.

Refusal Conversions: These are records that have received an initial refusal and/or HU’s. The records should show an appropriate call history and message. You should have some idea about who refused and why. Your job is to make a final effort to get a complete on these records.

Why are we calling these records again?

- It's possible that previous interviewers were less skilled or motivated in attempting refusal conversions. We're giving our best interviewers a chance to persuade the respondents to participate.
- The rate of refusal is a measure of both interviewer performance and the degree of potential *bias* in the survey. A lower refusal rate increases the *reliability* of the data. A lower refusal rate is an indicator that the participants are *representative* of the entire population.
- Finally, studies have shown that the characteristics of people interviewed in the first third of the fielding period differ markedly from those people interviewed in the final third. In other words, by failing to enlist the cooperation of these respondents, the data are potentially skewed in certain ways. (This point is something to keep in mind to motivate you; this is NOT something you would mention to a respondent.)

Is it possible to get a complete when a record has been refused? Yes, absolutely. Try these approaches:

- Use the information on the Introduction screen, including CfMC messages from a previous interviewer, to help you to choose an approach.
- You can ask, "Has anyone explained to you what this study is about?" It is possible that in the previous call, no one has done this.
- Sell yourself on the study. Use the information in this guide, or even on the website, to explain in your own words why participating in the study is important.
- Listen attentively to what the person is saying, and try to pick up cues from the voice.
- Apologize. "I am very sorry if any previous caller was rude to you (or gave you incorrect information, etc.)."
- "I'd like to get started and see how far we get. You can refuse to answer any specific question you don't want to answer."
- If the person hangs up on you, you may call back and apologize for getting disconnected.
- If it works for you, approach refusal conversion as a challenge and a game. This is the approach of many interviewers who are excellent at dealing with refusals.
- Stay on your toes. Listen hard. Think fast.
- Share what you learn with other interviewers.

- Supervisors: If a person calls the 1-800 line on order to say they are refusing, it is possible for you to convert this refusal into a complete. Give this your best effort.

Comma 5 Spanish Interviewers

OFHS interviews will be conducted in English and Spanish.

On the Intro if the respondent says, “No English” or can’t understand or speak English, ask what language is spoken in the household. If the person speaks Spanish, code the record 116, Definite Spanish. Say, “Thank-you, we’ll have someone who speaks Spanish call you back.”

If the person speaks some other language, or if it is unclear what language is spoken in the home, code the record 113 Language Barrier, or 173 Selected person-language barrier-language unknown/other, as appropriate. Say, “Thank-you very much for your time.”

113 and 173 Dispositions will go to Comma 4 Interviewers for verification that no one in the household speaks English or Spanish

116 Dispositions go to Interviewers who will conduct the interview in Spanish. Comma 5 Interviewers are screened carefully to be sure that they are able to perform all aspects of interviewing in Spanish. They read a script that has been translated into Spanish and programmed into CATI. No interviews are ever conducted in another language “on the fly.”

Appendix B – Client Contact Information

Client Contact Information	
Ohio Department of Health	1-800-282-0546

APPENDIX C – Dispositions



Coding the disposition properly at every attempt is crucial to the quality of the data we collect. On the following page is a chart that shows each disposition with a description of when it should be used.

Dispositions for Hang-ups:

- Hang Up Before/During Intro: Non-Selected Respondent code as 156
- Hang Up After Intro: Non-Selected Respondent code as 169
- Refusal to Transfer to Selected Respondent 1x code as 170
- Refusal to Transfer to Selected Respondent 2x code as 164

- Before/During Intro means up to the point of verifying phone number.

Dispositions for Refusals: If the record has not gone through the selection process, *anyone in the household* is a non-selected respondent. If the record has gone through the selection process, anyone *other than* the selected respondent is a non-selected respondent. When a respondent listens to an entire introduction and verbally refuses, use these dispositions:

- Non-Selected Respondent 1st Refusal: code as 161
- Non-Selected Respondent 2nd Refusal: code as 161
(Second use of 161 will move the record to Refusal Study automatically.)

- Selected Respondent Refusal: code as 160
(Refusal by the selected respondent will automatically move the record to the Refusal Study.)

- Swearing: Treat this as a Regular Refusal: code as 161 or 160

- “Take My Number Off Your List” code as 129
(Requires Supervisor Password; Will be called once more In Refusal Study)

- Threatening Lawsuit: code as 002
(Available to regular interviewers; Requires Supervisor password in Regular Study.)



Who can assign from terminate screen:

- R** = regular interviewer
- S** = special interviewer/supervisor
- B** = both

002	Def. refusal-NS-HANG UP BEFORE INTRO	S
	(Available to regular interviewers; Requires Supervisor password in regular study.)	
003	Language barrier.....	S
005	Non-working number.....	B
006	Business phone.....	B
007	Non-residential, Cellular, Phone booth.....	B
013	No Adults 18 or Over in Household.....	S
014	Number changed.....	B
015	Physical/Mental impairment.....	S
016	Ineligible residence (Dorm, Barrack).....	S
017	No eligible respondent during time period	S
020	Def. refusal-NS-HANG UP AFTER INTRO	S
025	Def. refusal-NS-Refuses to transfer to selected.....	S
026	Def. refusal-Selected ref. BEFORE INTRO.....	S
028	Def. refusal-Selected ref. AFTER INTRO.....	S
030	Teen/Child Line	S
101	No answer.....	B
102	Busy	B
104	Scheduled call back (Leave a message.).....	B
105	System scheduled call back	B
110	Answering machine (Confirms Residence).....	B
111	Ineligible residence (Dorm, Barracks).....	R
112	No eligible resp. during time period	R
113	Language barrier.....	R
114	Physical/Mental impairment.....	R
115	No Adults in Household.....	B
116	Definite Spanish.....	B
117	Privacy manager (Confirms Residence).....	B
118	Call block	B
121	Non-Residential, Cellular, Phone Booth.....	R
122	Fax Machine	B
129	Move to refusal study (Needs Supervisor Approval.....	R
131	Answering Machine (Residence Not Confirmed)	B
132	Privacy Manager (Residence Not Confirmed).....	R
133	Teen/Child Line	R
155	CLEAR INTERVIEWER TYPE	R

156	Hang up, non-selected respondent before intro	S
160	Selected resp refusal	B
161	Non-selected resp ref	B
164	Refused to transfer to selected – x2	S
165	Not available at Intro2	S
169	Hang up, non-selected respondent after intro	B
170	Respondent refuses to transfer to selected person x1	B
171	Selected person not available	B
172	Selected person not available during time period	B
173	Selected person-language barrier	B
174	Selected person unable to complete-impairment	B
175	Selected person refuses BEFORE INTRO	B
176	Selected person refuses AFTER INTRO	B
178	Temporarily out of service	B

The following dispositions are assigned to a record by the computer. Interviewers are not required to disposition themselves but they may be helpful in understanding the call history of the record.

- 21** Wrong number
- 22** Not a household
- 23** Not in market area
- 27** 20+ Attempts, DK eligibility
- 31** Selected Resp refused age
- 32** Selected Resp not in age range
- 33** DK at household question
- 34** Refused at household question
- 35** Refused at hh members
- 36** Refused at hh member birthdays
- 37** DK at benefits question
- 38** Refused at benefits question
- 39** Lived in Ohio less than 1 month
- 40** DK at lived in Ohio question
- 41** Refused at lived in Ohio question
- 42** DK at number of adults question
- 43** Refused at number of adults question
- 44** DK respondent's age
- 45** Refused respondent's age
- 46** DK to knows about insurance question
- 47** Refused to knows about insurance question
- 48** Dk at Re-intro
- 49** Refused at Re-intro
- 50** DK if covered by health insurance
- 51** Refused to say if covered by health insurance
- 52** Asian sample/Race not Asian

- 120** Answering machine for leaving messages
- 127** Privacy manager for leaving messages
- 134** DK at HH members
- 168** Partial child complete, answered required questions
- 179** Suspended (CB/BO)

These dispositions represent completed interviews. As an interviewer, you will not have to code respondents with these, but they are shown here for completeness.

- 61** COMPLETED ADULT AND CHILD QX
- 63** COMPLETED ADULT QX/CHILD PROXY NOT IN HH
- 64** COMPLETED ADULT QX/NO CHILD

APPENDIX D – Scheduling Callbacks

Properly scheduling callbacks is essential to maximizing the response rate, achieving target completes, and meeting the OFHS protocol. For these reasons, guidelines have been established for scheduling callbacks:

- On fresh records (records that have no attempts), use a 105 (system scheduled callback). This allows all records in the fresh sample to receive one attempt. However, if someone *offers a specific time* to reach an adult member of the household, use a 104 (scheduled callback).
- Callbacks should *never* be set for more than five days without explicit supervisor approval. If callbacks are set too far in the future, it is not possible to meet the protocol that every record be given 15 attempts.
- If the record has gone through the selection process, use a 104 only if someone offers a *specific time* to reach the *selected respondent*.
- If the selected respondent is unavailable (recovering from surgery, on a vacation, studying for exams, etc.), ask a supervisor to authorize a different callback schedule if the callback is to be more than five days.
- If there is no selected respondent, your goal is to schedule a callback to reach someone who is able to go through the selection process.
- If a respondent has been selected, your goal is to find out when that person is available, and schedule the call for the time most likely to reach that person.
- Use a 104 when you have specific information on when to reach the respondent, or when you are setting an appointment. Use 105 when there is no specific information on when the respondent can be reached.

Always leave a message with any kind of callback!

APPENDIX E – Leaving Messages

Always leave a message in the system when the computer prompts you for one!

The only dispositions that require a message are 104 (Scheduled Callback) and 002 (Hard Refusal). On Scheduled Callbacks, think about the information that will be useful for the next caller. All information pertinent to the call should be contained in your message:

- Specifics on the person with whom you spoke: baby-sitter, elderly male, child, etc.
- If the person was busy, going out the door, on another call, and your assessment of the situation.
- The person's request for a specific callback time.

Remember that the system can only display the *last message entered*. Your message erases any previous messages. It is important to include relevant information from the previous call in your message.

Very Important: Your messages should always be professional in language and content! Never use slang, profanity, or insulting remarks.

Ask a supervisor for the sheet of common messages and abbreviations. Learn this material or have the sheet at your station. Use the standard abbreviations in your messages. A message should follow this format:

Date contact remarks Caller ID#

Message Abbreviations

SM	Selected Male
SF	Selected Female
NA	Not Available
CB	Call back
REF	Refusal
H/U	Hung-up
RES	Resident
EVE	Evening
MORN	Morning
AFT	Afternoon
REQ	Requested
X	Times
PAR	Parents
SD	Said
SSPND	Suspend

Use these standard abbreviations in messages. Use this format: the **date** and the **message content** and **your id #**.

Please remember that your new message erases previous messages. You must always retype important information from the previous message. After typing the old message, enter the new message with **the date** and your **id #** without brackets. Below are some examples:

Examples of Messages for Call Backs:

1/13 CFNS SD CB FOR SM 1/15 EVE 644S

5/26 SM REQ CB 6:00 5/29 999W

3/25 SF busy now, REQ CB 7:00 EST 999B

Examples of Messages for Refusals:

1/15 SF REF X2, not interested 1/15 101S

9/15 CMNS Refused 3X, send in mail 999B

8/05 SF very angry, REF 3X 999b

APPENDIX F – Public Service Announcement

This is currently a placeholder for a PSA should one be forthcoming.

APPENDIX G – FAQ

Frequently Asked Questions Project Information

- + Client (*Who; can we release name; if not statement to provide*)

Ohio Department of Health and the Ohio Department of Job and Family Services.

- + 800 Phone lines (*other than general verification*)

(800) 282-0546

This number is to the Ohio Dept. of Health. (Give this number to the respondent ONLY if they *specifically* ask to speak with someone from the Department of Health, otherwise give them the general verification number).

- + Purpose of study (*please provide a statement for interviewer use*)

This is an important study aimed at people who are insured as well as those without health insurance. The study's focus is on health coverage, use of medical services, satisfaction with health care, and problems getting health care.

+ Selection process:

Respondent

Adult Interview: Person age 18 years of age or older with the most recent birthday.

Child interview: A proxy age 18 years of age or older who is knowledgeable of the selected child's health coverage and can answer these questions on their behalf.

+ Phone

Numbers are dialed at random.

+ Proxy (please *provide protocols*)

Proxy interviews are allowed if the selected adult respondent has a long-term or permanent physical or mental impairment. Proxy interviews are always conducted for children. Proxy must have knowledge of the selected person's health insurance, or the selected child's health insurance.

+ Suspends

yes

*If in demographics portion of survey please consult with a supervisor before refusing through rest of Questionnaire.

+ Survey Length

20-22 minutes

+ Introduction (*verbatim required yes or no*)

yes

+ Confidentiality Statement

Information is kept strictly confidential. Your phone number was randomly dialed.

+ Refusal Statement

Your input is very important and will shape health care policy decisions that may help you and your family. Your phone number cannot be replaced with another so your participation would be greatly appreciated.

I understand that you are on a “Do Not Call List” for your state, allow me to clarify that we are not trying to sell you something and therefore that list does not prohibit us from calling you.

The study is confidential, your name and phone number will not be reported with any of the final data.

+

We wish to best represent the population so it is important that we collect data from people like yourself so it remains accurate and unbiased.

Refusal Protocols

NON-SELECTED RESPONDENT REF x1- code as 161 (non-selected respondent refusal) leave a brief message (i.e. “7/23/03 nsfr ref x1 100b”) *”nsfr” stands for “non-selected female respondent” use “m” for “male”.

NON-SELECTED RESPONDENT REF x2- code as 161 (non-selected respondent refusal) leave a brief message (i.e. “7/23/03 nsfr ref x2 100b”)—it will then be moved to the refusal study.

SELECTED RESPONDENT REF x1-code as 160 (selected respondent refusal) leave a brief message (i.e. “7/23/03 sfr ref x1 100b”)—it will then be moved to a refusal study

Once in the **REFUSAL STUDY**, you are logged in as comma 4, if a selected respondent or a non-selected respondent **refuses again**, code as **002- Definite Refusal**. They will not be called back.

*If a respondent hangs up **AFTER** introduction, treat as a refusal **NOT** a hang-up.

APPENDIX H – Interviewing Respondents of Minority Groups

Research suggests that conducting interviews with members of minority or ethnic groups may be affected in these ways:

- Members of minority groups may be somewhat more sensitive to concerns about confidentiality than people of other groups.
- Many respondents are reluctant to give answers to questions they perceive as very personal and sensitive. Among minority groups this reluctance is more pronounced in CATI research than in other modes of interviewing.
- Members of minority groups are somewhat more likely to give free and unbiased answers if the interviewer is of the same race/ethnicity. But this is more pronounced in face-to-face interviewing than in CATI research.
- Interviews can be affected by the expectations and preconceptions of the interviewer. This can result in biased data, and loss of interviews.

As noted previously, the OFHS will over-sample metropolitan areas to achieve Race/Ethnicity targets for African-American, Hispanic, and Asian populations. Interviewers should approach interviews with minorities in a professional manner, and use proper interviewing practices:

- Be prepared with assurances of confidentiality: in the introduction to encourage cooperation, and in the questionnaire to avoid “Don’t know” and “Refused” responses.
- Read verbatim. The most important factor in avoiding bias in the collection of survey data is to have every interviewer read questions exactly as scripted.
- Keep an open mind. Avoid being judgmental about other people, their views, and circumstances. Be respectful of other people’s views. Avoid making assumptions about the respondent. This approach works for you in two ways: It enlists cooperation and reduces bias in data collection.
- Remain neutral. Avoid commenting on a respondent’s answers, and never lead the respondent to what *you think* is a correct answer.
- Be patient with people who speak English as a second language. It is more important to gather accurate data and ensure the respondent’s continuing cooperation than to hurry the survey along.

Remember, the interviews collected with respondents representing minorities are important. They will help the state of Ohio to understand and evaluate the particular needs of these groups. Then the state of OHIO will be better able to develop strategies to address the needs of all its citizens.

APPENDIX I – Crisis Protocol

For the OFHS project and at Macro International in general, we have what we describe as “Respondent Driven” protocol for dealing with crisis situations. This means that whenever possible we react to the respondent’s need by offering her choices.

Step 1: Recognize that a respondent is possibly distressed.

Signs that a respondent is possibly in crisis:

Hesitancy to answer a question or questions;
Refusal to answer questions or to continue the interviewing process;
Lowering of the volume or tone of her voice;
Responding in an agitated manner by raising her voice or using inappropriate language;
Crying;
Indications of tremors, a quavering in the respondent's voice;
Hearing the respondent tap her fingers, or an instrument on the telephone or surface; or
Disorganization, dissociation, or non-responsiveness to questions asked.

Step 2: Assess the level of distress that a respondent is apparently experiencing.

Below is a table that provides the some guidance to you as to what indicators you might become aware of on the telephone indicating that a person is in distress or approaching a crisis.

Level of Distress	Signs or Indicators of Distress
Level 1 : Minimal	Change in voice tone or volume. Changes in focus. Hesitancy to answer questions. Fidgeting, finger tapping. Level 1 signs plus any of the following:
Level 2: In-Need of Referral	Use of inappropriate language. Provides non-relevant answers to questions Displays an unwillingness or hesitancy to continue. Sobbing, weeping, and/or crying on the telephone. Displays other obvious signs of agitation. Includes a combination or all of the signs for Level 1 and/or Level 2 plus the following:
Level 3: Immediate Help	Respondent openly states the intention to hurt herself. Respondent openly states her intention to hurt other people. Respondent openly asks for help.

Step 3: Respond appropriately to the situation.

Based on your assessment of the level of distress it is imperative that you react appropriately and with sensitivity based on their level of distress:

Distress Level	Interviewer Actions	Supervisor Actions	Project Management Actions
Level 1	<p>Offer the respondent a break:</p> <p><i>“I know that this is a long interview and can be stressful. Would you like to take a break so that you can get a drink of water or just get up and stretch? Please, let me know when you are ready to continue.”</i></p> <p>Afterwards:</p> <p><i>Would you like to continue, or would you like me to call back later?</i></p> <p>Depending on how she answers you may do the following:</p> <ul style="list-style-type: none"> • Yes - Continue with sensitivity. • Yes, but not now - Suspend and schedule a callback or offer the 1-800 number and her masterid if she won't provide a time. Alert supervisor. • No, don't want to continue ever – terminate and thank. Write “DO NOT CALL BACK” in message field and alert supervisor. • Hangs up – suspend with a note about the situation and alert 	<p>Supervisor is alerted for all interviews that terminate or result in a hangup after the offer of a break.</p> <p>Supervisor will get the masterid for the case and will inform the project managers about the situation – date, time, and a detailed description of the interaction between the interviewer and the respondent, including the survey question at which it occurred.</p>	<p>Project Managers review the case and possibly follow-up with the supervisor and interviewer for more information.</p> <p>Project Management decides if any follow-up calls are made to the hang-ups or terminated interviews.</p>

Distress Level	Interviewer Actions	Supervisor Actions	Project Management Actions
Level 2	<p data-bbox="381 304 511 346">supervisor.</p> <p data-bbox="462 357 755 525">Raise your hand and get a supervisor’s attention while you affirm what you hear:</p> <p data-bbox="462 588 763 955"><i>I can hear that this interview is upsetting you. Would you like some help? I have some names of organizations that you could contact. Would you like me to tell you about them?</i></p> <p data-bbox="462 1018 755 1260">If the respondent says YES – refer to the table for the appropriate referral based on what the respondent seems to be upset about.</p> <p data-bbox="462 1323 722 1522">If the respondent says NO - ask if she would like to continue the interview now or later:</p> <ul data-bbox="365 1543 755 1875" style="list-style-type: none"> • Yes - Continue with sensitivity. • Yes, but not now - Suspend and schedule a callback or offer the 1-800 number and her masterid if she won’t provide a time. Alert the supervisor. • No, don’t want to continue ever – terminate and thank. Write “DO NOT CALL BACK” in 	<p data-bbox="901 357 1112 661">Come over to the interviewer and be prepared to help out by getting prepared for an evaluation of risk.</p> <p data-bbox="901 724 1128 1491">File an adverse event report with project management staff informing them that a referral was given, the masterid, the interviewer id, date, time, details of the interaction, if QA was listening, where it occurred in the interview, and if the appropriate protocols were followed.</p>	<p data-bbox="1274 357 1502 556">Project Management reviews and files the adverse event report.</p> <p data-bbox="1274 577 1502 808">This type of report is kept by project management but not forwarded to the IRB.</p> <p data-bbox="1274 871 1510 1144">Project Management decides if any follow-up calls are made to the hang-ups or terminated interviews.</p>

Distress Level	Interviewer Actions	Supervisor Actions	Project Management Actions
	<p>message field and alert a supervisor.</p> <ul style="list-style-type: none"> • Hangs up – suspend with a note about the situation, and alert a supervisor. 		
Level 3	<p>Raise your hand and get a supervisor’s attention while you Affirm what you hear:</p> <p><i>I can tell that this interview is upsetting you.</i></p> <p>Assess the level of risk for suicide or homicide by asking the following questions with a supervisor/QA present:</p> <p><i>Do you have a plan on how to do this?</i></p> <p><i>Do you have the means or ability to carry out your plan?</i></p> <p><i>Are you thinking of doing this now?</i></p> <p>3 YES=HIGH RISK so then you need to act:</p> <p><i>Would you like me to call someone to</i></p>	<p>Come over to the interviewer and be prepared to help out by getting prepared for an evaluation of risk.</p> <p>Signal for QA to get on the line too and take notes.</p> <p>Help in the evaluation of risk, confirm if the respondent provides 1-3 YES’s and instruct the interviewer as to what to do – offer the call, offer referral, immediately ask if Emergency services can be contacted, find location, etc.</p> <p>Make the necessary</p>	<p>Project Management reviews and files the adverse event report.</p> <p>Project Management debriefs with the interviewer, supervisor and QA who filed the report as soon as possible.</p> <p>Project Management then contacts Macro’s IRB and the client to inform them of the situation.</p> <p>Macro’s IRB may advise about the need to change or revise protocols as a result of the event, or the appropriate follow-up to the event.</p>

Distress
Level

Interviewer Actions

come and help you?

If YES – *Who would you like me to call?*

Get the name and telephone number – have a supervisor or QA make the call and say,

I would like to stay on the line with you while my colleague calls X? OK?

Keep the person informed about what is happening, do what the respondent says.

If you can't reach the person the respondent asked to be called, ask for someone else or if you can call emergency services in her area. Do only what she gives permission for.

If the person does not know, or won't provide information, offer to call emergency services in her area and try to find out where she is.

Supervisor Actions

calls.

If the respondent terminates the call before someone can be contacted for her, or before we can obtain her locations – call Mike McCarns to find out whether additional calls can or should be made immediately.

File an adverse event report with project management staff informing them that a referral was given, the masterid, the interviewer id, date, time, details of the interaction, if QA was listening, where it occurred in the interview, and if the appropriate protocols were

Project Management Actions

Project Management implements and follows-up as directed.

Macro's IRB files a report with DHHS.

Project Management informs the call center staff about the outcomes of the event to the extent that they are able to and it is legally possible.

If there is to be a follow-up call to the respondent, Project Management will direct the call center as to how the callback is to be made (e.g., using an interviewer with special training.)

Distress
Level

Interviewer Actions

Supervisor
Actions

Project
Management
Actions

TWO YES and ONE
NO=LOW RISK.
Say:

*It appears that this is a
difficult time right
now, would you like
me to call someone
or would you like
me to put you in
contact with
someone who has
specific training in
this area and could
provide you with
support?*

YES to call – do the
same as above, or
offer the referral
that seems
appropriate.

**In either a high-risk or
low-risk situation,
if the answer is NO
to making a call on
their behalf, then
you must end the
call:**

***This interview can be
very stressful, and I
think we should
stop for now, but
sometimes talking
to someone can be
helpful. I have
some names of
organizations that
you could contact.
Would you like me***

followed.

**The form needs
to be filed on
that shift. If a
level 3
situation is
encountered
call center an
project
management
need to be
called.**

Distress
Level

Interviewer Actions

Supervisor
Actions

Project
Management
Actions

to tell you about them?

If the respondent says YES, provide referral telephone numbers before getting off the call.

If the person just asks to stop at any point, suspend with a callback and a note about the case, midterminate with a note, or if she hangs up, midterminate with a note.

Step 4: Document the case.

Once a Level 2 or Level 3 situation is encountered it is necessary to document the case immediately while the event is fresh in your mind. There is an Adverse Event Form included in the training materials and available on the network and ISite for you to use for this purpose. More detail and information is better than less. This needs to be filled out on the shift in which it occurs and immediately sent electronically to project management and the hard copy sent to the Project Director, Tom Duffy.

It needs to include at a minimum the masterid, time, date, details of the event – which should include the survey question at which the event occurred – so someone else can understand why it was assessed as a level 2 or 3, and the names and signatures of the call center staff who observed the event.

It is paramount that once you think you are in a level 2 or level 3 situation that you get someone else to be listening to the call – get the floor supervisor over, get QA on the line, get the interviewer next to you too until a supervisor comes over. Everyone and anyone who listens to all of part of the interaction needs to fill out the Adverse Event Form.

Step 5: Self- Care for You

Dealing with a difficult or crisis situation on the telephone can be emotionally draining and take a toll on you. After the call is over and you have documented, take a break. And when you go home at the end of your shift – take care of yourself even more. Refer to the training manual section on self-care for more information.

Situations Involving Other Individuals

If at anytime during the telephone interview you believe that someone is listening in – perhaps you hear a telephone picked-up or you hear someone breathing other than the respondent, you should stop asking questions and ask if she would still like to continue the interview and do what she says – continue, suspend and schedule a callback, suspend with providing her information to call in, or terminate. Leave a message as to what occurred.

If you hear someone, anyone, enter the location where the respondent is participating in the interview – you should ask her if she wants to continue at another time– continue, suspend and schedule a callback, suspend with providing her information to call in, or terminate. Leave a message as to what occurred.

In either of the above cases, if the situation is too complex to be adequately described in the message field, alert a supervisor, who will document the situation in an email that will be sent to Project Management.

If someone enters the location where the respondent is participating in the interview, and you start to hear what sounds like abuse or that the respondent is in trouble, you are in the equivalent of a level 3 distressed respondent you need to do the following:

- Ask the respondent if she is okay and/or needs help.
- Get a supervisor/QA over for help, or the interviewer next to you until they arrive.
- If she says she needs help – ask what she wants you to do, call a friend/police/emergency services.
 - Get her location
 - Get the name and telephone number if possible of who she wants called.
 - Stay on the line while the supervisor/qa makes the call, keep her informed about what’s going on if possible.
 - QA/supervisors make the calls.
 - Document what happened on an Adverse Event Form
- If she does not have time to respond or the call terminates prior to this, get the telephone number and masterid. Supervisor will immediately contact Mike McCarns and he will advise about further action. Document the case as an adverse event.

The client requested that we refer crisis cases to both national and local suicide prevention hotlines. They are listed below.

Suicide Prevention Network and Hotlines:2

State and National - [800.784.2433 & 800.273.8255]

County and Local

Akron area [330.434.9144 & 330.762.6110]

Athens area [740.593.3344 & 800.222.8336 (teens) & 800.475.8484 adjacent counties]

Bowling Green area [419.352.1545 & 800.472.9411]

Bucyrus area [419.562.9010 & 419.468.9081 & 800.755.9010]

Canton area [330.4525.6000 & 800.956.6630]

2 Added August 28th, 2008, after request from client/

Chillicothe area [740.773.4357 & 740.773.0959 (teen)]
Cincinnati area [513.281.2273]
Cleveland area [216.623.6888 & 216.721.1115 & 216.251.7722]
Columbus area [614.221.5445 & 614.294.3300 (teen) & 614.294.3309 (senior)]
Dayton area [800.320.4357 & 937.229.7777 & 937.463.2961]
Delaware area [740.369.3316 & 419.947.2520 & 800.684.2324]
Gallipolis area [800.252.5554]
Kent area [330.678.4357 & 330.296.3255]
Lancaster area [740.687.0500]
Lima area [800.567.4673 & 419.227.8443]
Mansfield area [419.522.4357]
Marion area [740.383.2273]
Medina area [330.725.9195]
Mount Gilead area [740.369.3316 & 419.947.2520 & 800.684.2324]
Napoleon area [800.468.4357 & 877.419.7233 (teen)]
New Philadelphia area [330.627.5240 & 330.343.1811]
Newark area [740.345.4357 & 800.544.1601]
Oxford area [513.424.5498 & 513.523.4149 & 513.894.7002 & 513.418.6423, 359 (teen)]
Portage County area [330.296.3555 & 877.796.3555]
Toledo area [419.255.9585]
Warren area [330.393.1565 & 330.545.4371 & 330.395.8764 (teen)]
West Liberty area [800.224.0422]
Wilmington area [800.932.3366]
Xenia area [937.376.8701 & 937.426.2302]
Youngstown area [330.747.2696 & 330.424.7767 & 800.344.5818 & 330.747.5437 (teens) & 800.427.3622 (teens) & 330.747.5437 (senior) & 800.344.5818 (senior)]
Zanesville area [740.453.5718 & 800.344.5818]

Project management contacts:

- 1) Seth Muzzy: Cell: 347 624 7400. Office: 646 695 8182. Email: Seth.H.Muzzy@macrointernational.com
- 2) Sara Bausch: (Will be the primary contact after September 1). Cell: 703-304-6559. Office: 646 695 8156). Email: Sara.H.Bausch@macrointernational.com
- 3) Anupa Fabian: Cell: 646 496 6553. Office: 646 695 8178. Email: anupa.a.r.fabian@macrointernational.com

APPENDIX H: QUALITY OF ASSURANCE FORMS

QA Monitoring Definitions

INTRODUCTION

The interviewer delivers the introduction professionally, quickly, smoothly, and without hesitation. The interviewer is prepared to answer any questions and deal with situations that arise during the introduction. The interviewer makes good use of the information on the introduction screen (such as selected respondent, CfMC message from previous caller, resuming a suspended interview, etc.) The interviewer listens attentively to the person on the phone and adjusts the delivery of the introduction accordingly. The interviewer understands the task of enlisting cooperation.

The interviewer reads the entire introduction verbatim to an eligible respondent. However, the introduction is one area where an interviewer may deviate from absolute verbatim in order to deal with a specific situation. In dealing with the specific situation (refusal conversion, arranging for a callback time, dealing with a gatekeeper, answering questions, probing to reach the correct respondent, etc.) the interviewer must remain within professional boundaries. The interviewer should follow the protocols of the specific study in these situations. When the situation has been dealt with, the interviewer returns to reading verbatim. No part of an introduction or introductions (if more than one) should be omitted.

The interviewer moves directly from the introduction to the first question without hesitation. The interviewer does not ask permission to conduct the interview.

PACE/TIMING

The interviewer should conduct the interview at a pace which is comfortable for the respondent. The interviewer should move smoothly without stammering or confusion. Interviewers should listen carefully and adjust the pace to the respondent.

CLARITY/TONE

The interviewer should pay attention to voice quality and speak clearly, enunciating every word. Avoid mumbling and running words together. Voice quality should demonstrate a desire to *communicate* with the respondent. The voice should convey interest in the respondent and the survey.

The interviewer should have a professional, polite, cheerful, and friendly tone while conducting interviews. The speech pattern should be even, without drastic ups and downs in speech. Read the script in a conversational, natural manner, with good expression.

PROBING “DON’T KNOW” RESPONSES/CLARIFY

Interviewers should not accept a response of “Don’t Know” without attempting to solicit a valid response. Interviewers should listen carefully and attentively for hesitation and other signals that the respondent requires clarification. Interviewers should know *when* to probe, *how* to probe, and *what kind* of probe to use in the situation.

In re-reading the question, the interviewer should read the *whole* question (and choices, if necessary). The interviewer should be skilled in using standard probes such as, “Based on everything you know,” “Based on what you may have read, heard, seen in advertisement, etc.” “I can only enter one number. Which choice would you like me to record?” “What is your best estimate?” Once respondents understand that the interviewer will not accept “Don’t Know,” they tend to provide valid answers from that point on.

Examples of situations in which it is important to probe include: the respondent selection process if there is any doubt about eligibility or whether the right person is on the phone; any answer that is a narrative (and not one of the choices offered); any time the respondent gives an answer using a term the interviewer doesn't understand; any response that is not a choice offered by the computer; hesitancy on the part of the respondent, etc.

Open-ends must be probed to exhaustion unless otherwise specified in the interviewer instructions. Exhaustion means the respondent says something indicating they have no further information to give on the subject. Always probe with "What Else?" unless otherwise specified. Follow up "What else?" with "Anything else?" until the respondent says, "No."

All vague and/or ambiguous responses must be probed for clarity. For example, "It's a good product" could mean anything from it tastes good to it is reasonably priced. Always probe these types of responses with "Why in particular would you say it's a good product? What do you like about it?" Try to obtain specific information that will be as helpful as possible to the client.

Open-ends are the only area in a questionnaire where a respondent is allowed to answer questions in his/her own words. This is very valuable data to our clients, and it is very important to make these open-ends as detailed and specific as possible.

CONTROL OF INTERVIEW

The interviewer must remain in control of the interview at all times. The interviewer must observe standard protocols and specific survey protocols regardless of what is going on with a respondent. The interviewer demonstrates command of strategies to maintain control.

Interviewers should keep the respondent moving through the questionnaire. The respondent should not be allowed to wander into irrelevant tangents. Politely move the respondent back to the questionnaire by saying "We will be getting to some of those points in a little while. If we haven't covered everything, you can tell me at the end of the survey." By the end of the survey, the respondent will generally be ready to get off the phone without further comment. If a respondent still wants to give extraneous information, keep this as brief as possible, but do so politely.

The interviewer should not let the data collected be compromised by allowing the respondent to interrupt questions or rush the interview. Interviewers should maintain control to ensure that quality data is obtained on every question. Interviewers should follow the guideline of being "amiably stubborn," pleasant, and professional while maintaining control.

REFUSAL CONVERSION/ BREAK-OFF AVOIDANCE

The interviewer is not required to convert all initial refusals but is expected to ATTEMPT to convert EVERY initial refusal. The interviewer remains courteous and professional while attempting to convert initial refusals.

The interviewer does not make false or misleading statements during refusal conversion.

The interviewer is not required to convert all mid-terms/break offs but is expected to ATTEMPT to convert EVERY mid-term/break off. The interviewer remains courteous and professional. The interviewer does not make false or misleading statements.

The interviewer should follow the specific survey refusal protocols with regard to refusal conversion statements and approaches.

PROFESSIONALISM

Interviewers must conduct themselves in a professional manner at all times. Interviewers should be polite, friendly, and professional. Interviewers should project a confident manner. Refrain from using “Umm’s” etc.

Interviewers should focus on interviewing, and should never engage in chitchat, flirting, or joking with respondents. They should never be rude or rush the respondent unnecessarily. No matter how sensitive the topic, maintain a professional and pleasant tone.

Be prepared. Interviewers should demonstrate a knowledge and understanding of the study and study protocols. Go to supervisors or QA assistants to ask questions when necessary.

The interviewer should develop a rapport with the respondent so the respondent feels comfortable giving information and feels as if they are participating in something worthwhile. Respondents should NEVER feel as though they are wasting their time or that the interviewer does not value their opinions. The interviewer should sound interested in the respondent and in the survey.

Interviewers should keep the client’s interests and protocols in mind in all aspects of interviewing.

NEUTRALITY/DOESN’T LEAD RESPONDENT

The interviewer must remain neutral at all times while conducting a survey. Interviewers must be nonjudgmental, noncommittal, and objective. An interviewer should never express his/her opinion to a respondent even if the respondent asks for an opinion.

While it may seem minor, saying “yes” or “OK” or any other type of affirmative after a respondent answers could be telling the respondent “You’re giving me the right answer.” Interviewers must keep the interview free of any bias.

Interviewers should never make a negative remark about the client, the survey, or any question/response.

Never lead a respondent into an answer. If a respondent is vacillating between two answers or gives an answer that combines two acceptable answers, always respond with all choices available. Never respond with “So you’re saying...(and interpret or make the choice).” The answer must come from the respondent. It is the interviewer’s job to *get the respondent to commit to an answer*.

DIALING HABITS OVERALL

Moves from call to call efficiently. Does not sit on the disposition screen unnecessarily. Does not listen to answering machine messages. Does not listen to disconnect messages. Does not get out of seat unnecessarily.

Is always prepared for the respondent to come online. Does not hang-up the phone between calls. Demonstrates an appreciation of productivity goals overall.

VERBATIM

Interviewers must ALWAYS read verbatim. Read every question in full, exactly as written. When interviewers paraphrase, adlib, abbreviate the script or change the wording, the meaning of the question could be changed. When a question needs to be repeated, the interviewer should repeat the *entire question verbatim*.

In order for data to be statistically valid, questions must be administered in the same way in every questionnaire.

The only times in which an interviewer may deviate from the script is in the introduction, in a refusal conversion situation, when probing and clarifying, or staying in control of the interview. When the situation has been dealt with, the interviewer must return to reading verbatim.

DISPOSITIONS/ MESSAGES /CALLBACKS

It is crucial that interviewers record the correct disposition on every call. For example, recording refusals as anything other than a refusal could be considered falsification. Interviewers should follow the specific study protocols in choosing dispositions and leaving good messages.

Follow study protocols regarding callbacks. In general, first attempt to get the interview NOW if an eligible respondent is on the phone. If this is not possible, get the respondent to commit to a callback time.

Interviewers should record pertinent information in the message field, using the standard message format. Repeat the callback time to the respondent. Thank respondents for agreeing to the callback and explain how important their opinions are.

SCALES

When reading scale questions, the interviewer must read the entire scale. Respondents should NEVER be allowed to answer before they hear all their choices. Interviewers should follow any and all directions on the screen.

Once a respondent gets the rhythm of a scale question, it is not necessary to read the scale every time; this usually takes three to five times through the scale. The interviewer may say, "Using the same scale, how would you rate....?" However, if a respondent is stumbling on a scale, the choices must be read every time to obtain correct data.

Whenever the scale changes, interviewers must start repeating the scale until the respondent understands the new scale. Respondents are sometimes confused when a survey has more than one set of scales. Interviewers must listen attentively when administering scales questions.

MECHANICS

Interviewers should be able to use the CfMC/Terminal interface with efficiency. Interviewers should learn and be able to use the basic keystrokes: term, backing up, recording multiple responses, suspend, etc.

Interviewers should learn the specific keystrokes for every project.

Interviewers should be able to record data accurately and correctly on every question.

OPEN-ENDS

Open-end data must be recorded verbatim in first person, NEVER in third person. If the respondent were to reply, "I like it very much, I use it," that is exactly how it should be recorded. Never record it as "She likes it very much, she uses it."

Every open-end should end with words similar to "That's all", "I can't think of anything else," etc. This shows the open-end has been probed to exhaustion. If there are specific instructions to only probe for clarity or to record the first response only, this will not be necessary.

MULTIPLE RESPONSE LISTS

There are two types of multiple response lists, aided and unaided. On an unaided list, the interviewer must ask “What others” until the respondent can think of no other mentions. In an aided situation, the interviewer MUST read EVERY item on the list and get an answer for each. Pause after each item to obtain a “yes” or “no.” Interviewers should always follow the instructions on the screen. Examples: [READ LIST], [READ ONLY IF NECESSARY].

EFFICIENCY RATE

The efficiency rate is total score divided by possible score.

QUALITY ASSURANCE MONITORING FORM

Interviewer: _____ **Project:** _____

Date: __/__/__

<u>Verbatim</u>									
1	2	3	4	5	6	7	8	9	10
<u>Dispositions/Messages/Callbacks</u>									
1	2	3	4	5	6	7	8	9	10
<u>Scales</u>									
1	2	3	4	5	6	7	8	9	10
<u>Mechanics (Data Entry)</u>									
1	2	3	4	5	6	7	8	9	10
<u>Open Ends</u>									
1	2	3	4	5	6	7	8	9	10
<u>Lists (Multiple Responses)</u>									
1	2	3	4	5	6	7	8	9	10

<u>Introduction</u>									
1	2	3	4	5	6	7	8	9	10
<u>Pace/Timing</u>									
1	2	3	4	5	6	7	8	9	10
<u>Clarity/Tone</u>									
1	2	3	4	5	6	7	8	9	10
<u>Probing/Clarify</u>									
1	2	3	4	5	6	7	8	9	10
<u>Control of Interview</u>									
1	2	3	4	5	6	7	8	9	10
<u>Refusals</u>									
1	2	3	4	5	6	7	8	9	10
<u>Professionalism</u>									
1	2	3	4	5	6	7	8	9	10
<u>Neutrality/Leading</u>									
1	2	3	4	5	6	7	8	9	10
<u>Dialing habits overall</u>									
1	2	3	4	5	6	7	8	9	10

Total Score _____ out of a possible _____.
 We strive for a 90% efficiency rate. Your efficiency rate is _____%.

Efficiency Scales:

- | | |
|--|--|
| <p>100%- Exceptional Performance.</p> <p>90-99%- Excellent Performance</p> <p>80-89%- Above Average Performance</p> <p>70-79%- Average Performance</p> | <p>60-69%- Below Average Performance</p> <p>50-59%- Poor Performance (Follow up Monitor Required)</p> <p>40-49%- Area of Concern (May require re-training)</p> <p>10-39%- Unacceptable Performance (May result in Disciplinary Action)</p> |
|--|--|

COMMENTS/SUGGESTION

Interviewer signature

QA Assistant signature

	Master/Case ID	Disposition Outcome		Master / Case ID	Disposition Outcome
1			6		
2			7		
3			8		
4			9		
5			10		

Appendix I: Open-Ended Response Cleaning and Coding

PROCEDURES FOR CODING OPEN-ENDED QUESTIONS

Questions in a survey research instrument may be presented to the respondent with differing degrees of structure depending on data usage and error checking requirements. A close-ended question provides a list of possible answers from which the respondent may choose. An open-ended question does not provide a response list, and therefore requires the respondent to answer in his or her own words. Then there are situations where a close ended question has an open ended response option. In this instance, the respondent may choose the option “Other (specify)” and then the respondent answers in his or her own words. This option is only used when none of the possible answers in the list fit the response.

An example of a close-ended question is “Which spreadsheet program are you most familiar with: Excel, Quattro Pro, or Lotus 1-2-3?” In this case, the respondent must choose from a limited roster, perhaps based on previous answer choices or due to restrictions imposed by the researchers. However, the question could easily be modified to the open-ended version, “Which spreadsheet program are you most familiar with?” In this situation, programs not mentioned previously, such as Fox Pro, might be documented. In cases where there is a list of response options and an “other (specify) option, the other specify is used to record the respondent’s answer verbatim. In post processing, these verbatim answers can be coded according to the existing codes and/or new codes can be applied to these answers. In 2008, unlike the 2003-2004 study, most of the questions that will need to be coded are “other (specify)” options of questions.

This document describes the procedures followed by Macro International staff to collect accurate data, monitor data quality, code responses, and ensure the quality of coding.

Interviewer Training

Since open-ended questions are frequently encountered while conducting surveys, each new employee on the interviewing staff is trained in the proper techniques of collecting verbatim data. Issues such as clarifying answers that are unclear and probing for more information are covered with emphasis on the use of neutral questions that do not influence the respondents’ answers. Interviewers are instructed to type in responses verbatim, but are permitted to omit restatements of the question and nonessential words such as “a”, “an” and “the”. Commonly recognized abbreviations are also acceptable, although discouraged if time allows for typing full words. Quizzes are conducted at the end of training to insure concepts are understood and able to be applied.

Monitoring of Quality of Data Collection

Open-ended questions are monitored for data quality on a routine basis. Quality Assurance Monitors observed interviewing and documentation techniques at the time of survey. Weaknesses in method were addressed with interviewers as quickly as appropriate, with specific details of what deficiency occurred and how situations should be addressed in the future. Senior staff members and Research Associates also reviewed responses for quality on a routine basis. For the majority of fielding, a sampling of responses was reviewed on a frequent basis. Any potential problems or suggestions were conveyed to the manager of the data collection center.

Procedures Used to Code Open-Ended Responses

This year Macro initiated a new method to handle the open-end responses. In the 2003-2004 there were more open-ended questions that allowed for verbal responses. These questions were then back coded. For the 2008-2009 OFHS survey those back coded responses were utilized as question responses, thus making open-ended answers into closed with the option for a verbal response.

Another difference in the 2008-2009 OFHS survey was the verbal responses were not completed in one file but were split up into more manageable chunks, usually delivered in sync with client deliverables. These seventeen batches files contained anywhere between 100 and 4,000 open-ended responses per batch.

The generated file is a text file that includes the ID of the respondent, the question number, the open-ended question number, the amount of responses allowed for that question, the question response (in brackets), and the verbal response. An example can be seen below:

B20A PB20A 1 (97) WHY NO LONGER COVERED BY MEDICAID-VERBAL.

Note that every open-ended response will have a question response of 97. The point of the coding process is change the “97” and match the respondent’s verbal response with an appropriate survey question response. Some respondents may mention multiple answers verbally, so each answer is coded adequately. However, if there is no adequate response, the “97” is left as is, and the verbal response remains.

At the same time OFHS launched, an Excel program was written, OPEN, to read and edit the open-ended keyword file. The program allowed coders to code the open-ended responses more efficiently than before. It also allowed coders to validate their work, sort and filter open-end responses, and keep track of their process.

After the coding is completed, an edited open-ended file is created for every batch, combined with other batches to be subsequently read back in, and the merged with the final data set.

An advantage to above approach is that it determines what changes have been made to any call or open-ended variable.

Quality Assurance for Coding Classifications

The manual coding of open-ended survey responses carries a variety of quality assurance steps to ensure the validity and reliability of data. An assistant OFHS project manager hand-coded every

open-ended response. This was followed by different persons using the original open-ends as a base coding the open-ended responses. If there was a difference in opinion, another code was requested. The original coder then compared the two works if a difference exists; a decision was made between the two. Since different sets of eyes have different biases, this double check procedure should code the open-ended answer to the best code possible. It also allows one to double check any mistakes or typos.

Data Formatting

Formatting data involved labeling each variable. Upon producing each deliverable dataset, only the final variables in the dataset were kept.

APPENDIX A

Coding Categories and Instructions for Adult Questionnaire

RELATIONSHIP WITH RESPONDENT

Question

(S2C) *What is your relationship to /RESTORE PERSON'S NAME FROM S1i/?*

(S2Coth) *How would you describe your relationship to //person in S1//?*

TYPE:

Open

Coding Categories and Examples:

S2Coth (Verbal)

- 01 You are /RESTORE PERSON'S NAME FROM S1i/'s Wife / female partner
- 02 You are /RESTORE PERSON'S NAME FROM S1i/'s Husband / male partner
- 03 You are /RESTORE PERSON'S NAME FROM S1i/'s Mother
- 04 You are /RESTORE PERSON'S NAME FROM S1i/'s Father
- 05 You are /RESTORE PERSON'S NAME FROM S1i/'s Daughter
- 06 You are /RESTORE PERSON'S NAME FROM S1i/'s Son
- 07 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandmother
- 08 You are /RESTORE PERSON'S NAME FROM S1i/'s Grandfather
- 09 You are /RESTORE PERSON'S NAME FROM S1i/'s Aunt
- 10 You are /RESTORE PERSON'S NAME FROM S1i/'s Uncle
- 11 You are /RESTORE PERSON'S NAME FROM S1i/'s Sister
- 12 You are /RESTORE PERSON'S NAME FROM S1i/'s Brother
- 13 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female relative
- 14 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male relative
- 15 You are /RESTORE PERSON'S NAME FROM S1i/'s female legal guardian
- 16 You are /RESTORE PERSON'S NAME FROM S1i/'s male legal guardian
- 17 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster mother
- 18 You are /RESTORE PERSON'S NAME FROM S1i/'s Foster father
- 19 You are /RESTORE PERSON'S NAME FROM S1i/'s Other female non-relative
- 20 You are /RESTORE PERSON'S NAME FROM S1i/'s Other male non-relative
- 97 OTHER
- 98 DK
- 99 REFUSED

COUNTY OF RESIDENCE

Question: (S9) *In what county in the State of Ohio //do you/does Person in S1// live?*

TYPE:

Other

Coding Categories and Examples:

S91 (Verbal)

001	Adams	061	Hamilton (<i>Cincinnati</i>)	121	Noble
003	Allen	063	Hancock	123	Ottawa
005	Ashland	065	Hardin	125	Paulding
007	Ashtabula	067	Harrison	127	Perry
009	Athens	069	Henry	129	Pickaway
011	Auglaize	071	Highland	131	Pike
013	Belmont	073	Hocking	133	Portage
015	Brown	075	Holmes	135	Preble
017	Butler	077	Huron	137	Putnam
019	Carroll	079	Jackson	139	Richland
021	Champaign	081	Jefferson	141	Ross
023	Clark	083	Knox	143	Sandusky
025	Clermont	085	Lake	145	Scioto
027	Clinton	087	Lawrence	147	Seneca
029	Columbiana	089	Licking	149	Shelby
031	Coshocton	091	Logan	151	Stark
033	Crawford	093	Lorain	153	Summit (<i>Akron</i>)
035	Cuyahoga (<i>Cleveland</i>)	095	Lucas	155	Trumbull
037	Darke	097	Madison	157	Tuscarawas
039	Defiance	099	Mahoning	159	Union
041	Delaware	101	Marion	161	Van Wert
043	Erie	103	Medina	163	Vinton
045	Fairfield	105	Meigs	165	Warren
047	Fayette	107	Mercer	167	Washington
049	Franklin	109	Miami	169	Wayne
051	Fulton	111	Monroe	171	Williams
053	Gallia	113	Montgomery	173	Wood
055	Geauga	115	Morgan	175	Wyandot
057	Greene	117	Morrow	997	OTHER
059	Guernsey	119	Muskingum	998	DK
				999	REFUSED

- Some responses may actually be cities. Please use:
 - Hard copy in office of Business Control Atlas
 - [http://dir.yahoo.com/Regional/U S States/Ohio/Counties and Regions](http://dir.yahoo.com/Regional/U_S_States/Ohio/Counties_and_Regions) to identify in which county each city or township provided belongs or code appropriately.
- If city cannot be identified, try searching by the zip code to identify the city and county by using: <http://www.zipinfo.com/cgi-local/zipsrch.exe?cnty=cnty&zip=45679&Go=Go>.
- **Zip codes (zip) and FIPS codes (ctyfps) are listed in the data file.**

SUMMARY:

FOR USING ZIP CODE TO LOCATE COUNTY:

<http://www.zipinfo.com/cgi-local/zipsrch.exe?cnty=cnty&zip=45679&Go=Go>

FOR USING FIPS CODE TO LOCATE COUNTY:

<http://www.eia.doe.gov/cneaf/electricity/page/statecodes/ohio.html>

RACE

Question: (S17_a/_b/_c/_d/_e/_f/_g) /MUL=7/ Which one or more of the following would you say is //your/person in S1's// race?//Are you/Is Person in S1// White, Black or African American, Asian, or Native American, American Indian, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned ?

TYPE:

Other

Coding Categories and Examples:

S17a (Verbal)

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native American, American Indian, or Alaskan Native
- 05 Native Hawaiian or Other Pacific Islander

- 06 HISPANIC, LATINO, SPANISH
- 97 OTHER
- 98 DK
- 99 REFUSED

- If a person indicated ethnicity such as Caucasian, Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish, that response was coded as White. Also having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race or races as White, Caucasian, Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish; Europe: Austria, Belgium, Britain, Croatia, Cyprus; Czech Republic, Estonia, France, Germany, Greece, Holland, Hungary, Ireland, Italy, Luxembourg, Malta, Monaco, Poland, Portugal, Romania, Denmark, Finland, Iceland, Norway, Sweden, Slovenia, Spain, & Switzerland; Middle East: Bahrain, Cyprus, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Palestine, Qatar, Saudi Arabia, Syria, Turkey, Yemen; North Africa: Algeria, Canary Islands (Spain); Egypt, Libya, Sudan, Morocco, Tunisia.
- Responses such as African American, Negro, Nigerian, or Haitian were coded as Black. It includes people who indicate their race or races are Black, African American, Negro, Nigerian, or Haitian.
- Responses such as "Native American" were coded as American Indian.
- Responses such as "human", "American" or "guess" were coded as a refusal. Also recorded as a refusal were responses such as "mixed", "multi-race" or "multi-ethnic".

- "Hispanic or Latino origin is: A person of Cuban, Mexican, Puerto Rican, South American, Central American, or other Spanish culture or origin, regardless of race."
- Each open-ended response given was reviewed to determine whether the Hispanic question should be re-coded. The Hispanic question was coded as "yes" when the response indicated the person was Cuban, Mexican, Puerto Rican, South American, Latino, Central American, or any other Spanish culture or origin regardless of race.
- Asian origin is Chinese, Japanese, Korean, Taiwanese, Cambodian, Indonesian, Vietnamese, Laotian, Philippino, Malaysian, or from: India, Singapore, Thailand, Nepal, Pakistan, Afghanistan, Bangladesh, Bhutan, Maldives, Sri Lanka, Timor-Leste. Responses that indicated ethnicity of the Far East, Southeast Asia, or the **Indian subcontinent** but not fitting into the given Asian races, were coded as Other Asian with the Asian race recorded. **Thus, any responses just recorded as "Indian" were coded as "Asian."**
- <http://www.census.gov/mso/www/rsf/racedata/index.htm> is an excellent website that will provide PowerPoint slides listing detailed categories for American Indian, Asian, Hispanic or Latino, Alaska Native and Detailed Native Hawaiian and Pacific Islander categories.

RACE IF HISPANIC

Question: (S18) *Do you consider //yourself/Person in S1// to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?*

TYPE:

Other

Coding Categories and Examples:

S18a (Verbal)

- 01 White Hispanic
- 02 Black or African American Hispanic
- 03 Asian Hispanic
- 04 Native American, American Indian, or Alaskan Native Hispanic
- 05 Native Hawaiian or Pacific Islander Hispanic

- 97 Other race Hispanic
- 98 DON'T KNOW
- 99 REFUSES TO DISCRIMINATE

- S16, S17, S17b and S18 have been coded to be consistent with response to race in S17.

TYPE OF COVERAGE

Question: (B4G1_a/_b/_c) //Do you/Does Person in S1// have any OTHER health care coverage that I have NOT mentioned? What type of coverage is that?

TYPE:

Other

Coding Categories and Examples:

/MUL=3/

B4G1A (Verbal)

- 01 MEDICAL, HMO, or PPO
- 02 SUPPLEMENTAL
 - Includes **“Medigap”** or Intensive Care. Also includes references to limited coverage such as ‘Prescriptions only’, ‘heart and stroke policy’, ‘hospital’, and organizations that sell limited supplemental policies such as ‘AARP’
- 03 DENTAL
- 04 VISION
- 05 CANCER INSURANCE
- 06 LONG TERM CARE OR NURSING HOME INSURANCE
- 07 ACCIDENT, DISABILITY, LIFE, OR ANY INSURANCE THAT PAYS CASH BENEFITS AND NOT MEDICAL EXPENSES (IF ONLY RESPONSE, RESET B4G TO 2 and Skip to B4CHK)
- 08 COBRA (RESET B4a TO 1) (IF ONLY RESPONSE, RESET B4G TO 2 AND Skip to B4CHK)
 - Example might be Former Employer.
- 09 **COVERED THROUGH WORK**
- 10 **COVERED THROUGH SOMEONE ELSE’S WORK**
 - Includes mentions of “husband”, “father”, “spouse” “parent” or “wife” and **MUST mention work (non-work related mentions would be coded as “12”)**
- 11 **SPECIFIC PLAN NAME GIVEN**
- 12 **INSURED THROUGH A FAMILY MEMBER.**
 - Includes mentions of “husband”, “father”, “spouse” “parent”, “step-parent”, “ex spouse” or “wife” **that do not include a work-related plan that may be directly purchased rather than at work.**
- 13 **STUDENT INSURANCE / THROUGH COLLEGE OR UNIVERSITY**
- 14 **MEDICAID**
 - CareSource, Molina Healthcare, Medicaid waiver programs, Buckeye Community Health Plan, Unison Health Plan, Paramount Advantage, AMERIGROUP Community Care
- 97 OTHER (SPECIFY)
 - Church Groups.
- 98 DK

99 REFUSED

- **For any responses not referencing health insurance, such as “life insurance”, “Mortgage”, “Car Insurance”, “none”, etc., set to missing and recode the previous question (B4G) to ‘02’.**
 - **Example of life insurance is “50,000 TERM”. This would be Flagged.**
- In 1998, the category of “Specific Plan Name” was added for respondents who gave an insurance company name such as AARP, Anthem, Aetna, Blue Cross, Kaiser, Medical Mutual, Nationwide, Ohio Med, State Teachers Retirement System, United Health Care, etc. without any additional information that would allow coders to categorize.
- INTERVIEWER NOTE: [NOTE: IF RESPONDENT STATES NAME OF A SPECIFIC HEALTH PLAN PROBE “that sounds like the name of an insurance company. Can you tell me whether that insurance company provides //you/person in s1// with medical, dental, vision or some other type of insurance?”]

COVERAGE DESCRIPTION

Question: (B7) Is //your/Person in S1's// primary health insurance plan family coverage, single coverage, coverage for //you/person in S1// and //you/his/her// spouse only, or some other type?

TYPE:

Other

Coding Categories and Examples:

B7A (Verbal)

01 FAMILY COVERAGE

- Includes employee and children.

02 //SELF/person in s1// AND SPOUSE ONLY, EXCLUDES CHILDREN

03 SINGLE COVERAGE

04 SINGLE PLUS ONE (CHILD)

- **Includes myself and my daughter/son**

97 SOME OTHER TYPE OF ARRANGEMENT

98 DK

99 REFUSED

- **INADEQUATE OR "A": SOME RESPONDENTS ARE RATING THEIR COVERAGE. EXAMPLES WOULD BE "ADEQUATE" OR "PRETTY GOOD". In these cases, code them as "A". Other examples of an "A" would be "HMO".**

HOW OFTEN PAYMENT IS MADE

Question:

(B8b) *How often is each payment of //restore B8a1// made?*

(B8b1) *How often is each payment made?*

TYPE:

Open End

Coding Categories and Examples

B8b1 (Verbal)

- 01 Weekly
- 02 Every Two Weeks
- 03 Monthly
- 04 Twice Each Month
- 05 Every Two Months
- 06 Every Quarter/Every Three Months
- 07 Twice a Year
- 08 Once a Year

- 97 OTHER
- 98 DK
- 99 REFUSED

WHY NO LONGER COVERED BY MEDICAID

Question:

(B20) Just prior to //your/Person in S1's// current health insurance coverage //were you/ was Person in S1// covered by Medicaid, which includes Healthy Families, Healthy Start; Disability Assistance; or Medicaid waiver programs?

(PB20A) Why //do you/does person in S1// no longer have this coverage?

TYPE:

Open End

Coding Categories and Examples:

PB20a (Verbal)

- 01 No longer qualify - EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better or changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc)
- New/better or changing job, **while mentioning obtaining insurance or coverage**. A less obvious example would be “Company changed over to new plan”.
- 04 No longer qualify - NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 03 No longer qualify - DO NOT RECEIVE WELFARE/CASH ASSISTANCE/AFDC/TANF
- 10 No longer qualify - OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements
- No longer qualifying due to age (“Turned 18”), no longer pregnant, time issues/expiring (“They took me off of it since my time was done”)
- 05 No longer qualify - NOT SURE WHY
- **“Because I didn’t need it” and “No longer needed”.**
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again
- 97 Other (SPECIFY)
- 98 (DK)
- 99 Refused

- “COULDN’T AFFORD IT” doesn’t make sense and “Because she was waiting for disability to come through and you didn’t” and “Didn’t have insurance” should be coded as “A”.

REASONS NO LONGER COVERED BY MEDICAID

Question:

(C3) The last time //you/person in S1// had health insurance //were you/was Person in S1// covered by Medicaid, which includes Healthy Families, Healthy Start; Disability Assistance; or Medicaid waiver programs?

(PC3A) Why //do you/does person in S1// no longer have this coverage?

TYPE:

Open End

Coding Categories and Examples:

C3a (Verbal)

- 01 No longer qualify - EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better or changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc)
- New/better or changing job, **while mentioning obtaining insurance or coverage**. A less obvious example would be “Company changed over to new plan”.
- 04 No longer qualify - NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 03 No longer qualify - DO NOT RECEIVE WELFARE/CASH ASSISTANCE/AFDC/TANF
- 10 No longer qualify - OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements)
- No longer qualifying due to age (“Turned 18”), no longer pregnant, time issues/expiring (“They took me off of it since my time was done”)
- 05 No longer qualify - NOT SURE WHY
- **“Because I didn’t need it” and “No longer needed”.**
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again
- 97 Other (SPECIFY)
- 98 (DK)
- 99 Refused

- “COULDN’T AFFORD IT” doesn’t make sense and “Because she was waiting for disability to come through and you didn’t” and “**Didn’t have insurance**” should be coded as “A”.

REASONS UNINSURED DURING THE PAST 12 MONTHS

Question: (NC27) *What are the reasons //you were/Person in S1 was// uninsured DURING THE PAST 12 MONTHS?*

TYPE:

Open End

Coding Categories and Examples:

NC27oth (Verbal)

- 01 Cost Too High / Too Expensive/Could Not Afford
- 02 Employer Did Not Provide Coverage / Not Eligible for Employer's Coverage / Part-Time Worker
 - Example includes "Because of his job. They don't offer it and it's too expensive to buy." Other examples include "Couldn't get it though the job" and "No job would give me insurance."
- 03 Not Working or Family Member Not Working or Lost Job
 - Includes mentions of "layoffs", "retirement", "quitting" or "unemployment".
- 04 Change in (Own/Person in S1's) or Family Member's Job
- 05 Change in Age, Marital, or Student Status
 - Includes mentions of divorce, turning 18 or leaving school/college.
- 06 Turned Down by Insurance Company or Lost Coverage for Health Reasons
 - Includes being turned down as a result of a disability, health condition or pre-existing condition. Mentions of declined or denied.
- 07 Make Too Much Money/Lost or Told Ineligible for Medicaid, Healthy Families, Medical Card, or other Public Assistance
 - Example includes "Because the job and family services said I was losing my Medicaid." and "**Medicaid took him off because he gets too much income from disability**".
- 08 Do Not Need It / In Good Health
 - Includes mentions of having another plan, relying on churches or other charitable organizations, or not thinking about getting coverage. **Example would be "I didn't have enough medical needs to get insurance." Must mention lack of need or good health.**
- 09 Waiting to Become Eligible for Coverage
 - Not working enough hours yet, but will eventually become eligible. Example includes "**First 3 months were a waiting period at employer, then the last two months....**".
- 10 Lost coverage, other reasons or reasons not specified
 - Includes mentions of being "dropped", "lapsing", "**cancelled**" or moving. Also includes any change in carrier or coverage. Time limits ("One year coverage") "Too lazy to re-register". Include here all mentions of losing coverage without mentioning a health reason ("**Insurance company cancelled me**", "They dropped the insurance – Don't know why")
- 11 **Self Employed/ Not Eligible/Part-time (UNSPECIFIED)**
 - **Includes all relevant responses with no additional information that would enable a code to be assigned.**

12	Didn't Want/ By Choice / Never Applied
97	Other (code)
98	(DK)
99	(Refused)

- Code “self-employed” as “other” if respondent did not give any other information that could be coded into one of the other categories.
- **“Part-time worker” could be classified as 01, 02, or 97 depending on whether the respondent also mentioned not making enough money (01), the employer not making coverage available to part-time workers (02), or neither (97).**
- “Not enough hours” could mean either ‘02’ or ‘09’ – if there was not enough additional information to determine which it was coded as “other”, but it should be a separate category if volume warrants.
- References to moving were classified under ‘10’.
- **“Not eligible”, “Wasn’t qualified” and “Did not have coverage” without any other information distinguishing between employer, public assistance eligibility, or health problems was coded as “Other” (97). Those who lost public assistance because of age were classified under both ‘05’ and ‘07’ since they fit both categories.**
- Responses such as “didn’t have insurance” or any responses that are non-responsive should be coded as “A”.

ASSISTANCE REQUIRED AS A RESULT OF HEALTH PROBLEMS

Question: (D32G1) *What other kind of assistance //do you/does person in S1// currently need, BECAUSE OF THE HEALTH PROBLEM(S) that you told me about?*

TYPE:

Other

Coding Categories and Examples:

D32G1o (Verbal)

- 01 Walking, transferring to a wheelchair, or other movement**
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

Can be coded back to these options:

- 101 Assistance with personal care, such as bathing, dressing, toileting, or feeding?
- 102 Domestic assistance, such as shopping, laundry, housekeeping, cooking, or transportation?
 - Includes any mentions of taking respondent somewhere, daycare, driving or cleaning or day-to-day tasks.
- 103 Help with household maintenance, such as painting or yard work?
 - Issues of labor, shoveling snow, cutting grass. Moving/lifting heavy objects
- 104 Social or emotional support, such as companionship, recreation, and socialization?
- 105 Coordinating health care, such as making appointments for doctor's visits or therapies?
 - Issues of medical or psychiatric help.
- 106. Assistance managing financial affairs, such as managing //your/person in S1's// checkbook or legal affairs?
 - Any mentions of money.
 - Includes paying bills.
- 107. Other kinds of assistance that I have NOT mentioned?
 - Some respondents are listing ailments rather than specific assistance required because of the ailment (i.e. Having diabetes). THESE SHOULD BE CODED AS "A".

HOURS OF ASSISTANCE

(D34) *How many hours of assistance //do you/does person in S1// currently require on average for the types of assistance that were just mentioned?*

(D35) *INTERVIEWER RECORD THE TIME PERIOD RESPONDENT NEED THESE HOURS OF ASSISTANCE*

TYPE:

Open-end

Coding Categories and Examples

D35 (Verbal)

HOURS PER DAY	[RANGE 1001-1024]
HOURS PER WEEK	[RANGE 2001-2168]
HOURS PER MONTH	[RANGE 3001-3720]
OTHER	9997
DK	9998
REFUSED	9999

MAIN REASON AN EYE CARE PROFESSIONAL WAS NOT SCENE

(D31eye2) *What is the MAIN reason //you have/person in S1 had// not visited an eye care professionals in the past 24 months?*

TYPE:
OTHER

Coding Categories and Examples:

D31eye2o (Verbal)

01	NO PROBLEMS WITH EYES (NO REASON TO GO)
02	HAVE NOT THOUGHT OF IT
03	OTHER PRIORITIES
04	NOT SERIOUS ENOUGH TO REQUIRE HELP
05	COST/CAN'T AFFORD CARE
06	NO INSURANCE
07	NO REGULAR PROVIDER
09	NO CONVENIENT APPOINTMENTS AVAILABLE
10	CAN'T GET TO THE OFFICE/CLINIC (TOO FAR AWAY, NO TRANSPORTATION)
11	CHILD/ADULT CARE PROBLEM
12	FEAR
16	DON'T THINK IT CAN BE HELPED BY A HEALTH PROFESSIONAL
17	OTHER
98	DK
99	REFUSED

KIND OF PLACE USUALLY GO TO REGARDING HEALTH

Question: (F67A) *What kind of place is it; a clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?*

TYPE:
OTHER

Coding Categories and Examples:

F67a_O (Verbal)

- 01 Clinic or health center
 - Includes community or medical centers. Would also include “medical group” or “mental health office”.
- 02 Doctor's office or HMO
 - Includes visits to the chiropractor, or gastrologist. Also includes physician, cardiologist and chiropractor. Also includes “**D.O.**”, “**Family Practice**” and “**PPO Doctor's Group**”. Would include “Psychiatrist”.
- 03 Hospital emergency room
- 04 Hospital outpatient department
 - Includes after care.
- 05 **Military hospital**
 - **Includes all references to “VA Hospital” or veteran’s hospital. “Wright Patterson AFB”, “Air Force Base”**
- 06 **Does not go to one place most often**
- 07 **Use Books/Internet/Hotline**
- 08 **Hospital (Unspecified)**
 - **Includes references to a hospital that does not mention emergency room or outpatient department. May include “Hospital where I work.”**
- 09 **Urgent Care**
- 10 **Family member of friend**
- 97 Other
 - Includes “where I work” (Non-hospital related reference).
- 98 DK
- 99 REFUSED

REASON FOR NOT HAVING USUAL SOURCE OF CARE

Question: (NF67C) What is the main reason //you do/person in SI does//NOT have a usual source of care?

TYPE:

OPEN END

Coding Categories and Examples:

F67co (Verbal)

01 Seldom or Never Get Sick

- Includes mentions of not having a need for health care, such as “not **needing** to go”, “**Hasn’t needed any**”, “**Because haven’t needed health care recently**” and “**Don’t need it**” (*reference each case by age – younger are more likely to be ‘01’ while older are more likely to be ‘06*) and “**Don’t go often enough.**”

02 Do Not Know Where to Go for Care

- Example is “Because I just moved back up to Geneva from Columbus” (Just moved here and doesn’t know where to go). Includes “been working for medical services and looking for other health care”. “Just **moved** to area” or “I’ve traveled a lot and just recently settled in one spot”.

03 Previous Doctor/Source no Longer Available

- Includes “doctor retired”.

04 Like to Go to Different Places for Different Health Needs

05 Just Changed Insurance Plans

06 Don't Use or Like Doctors/Treat Myself

- Includes getting health care from family/friends. “I take care of myself”. “Wife is a nurse”, “**Don’t go to the doctor unless it is an emergency**”, “**I just don’t go**”, “**Doesn’t go to doctor**”.

07 Cost/Too Expensive

08 No Insurance

- Includes mentions of “**Not having a medical card.**”

09 Use Books/Internet/Hotline

97 OTHER (SPECIFY)

- “I go to who is available”, “Have not went and looked for a doctor”. These are “other” because they don’t necessary lend themselves to a specific code without additional information. Also includes “Doctor too far away” and “Primary plan doesn’t permit it”.

98 DK

99 REFUSED

REASON FOR USUALLY GOING TO THE ER

Question: (NF67B) *What is the main reason //you/person in S1// usually//go/goes// to the emergency room instead of a doctor's office or clinic?*

TYPE:

OPEN END

Coding Categories and Examples:

F67bo (Verbal)

- 01 Can't Afford to go Elsewhere/They Don't Turn Anyone Away
- Includes mentions of insurance or cost. "No money or insurance to pay for it."
- 02 Didn't Know Where Else to Go
- Example is "Because I just moved back up to Geneva from Columbus" (Just moved here and doesn't know where to go). Includes "been working for medical services and looking for other health care".
- 03 Convenience/Don't Need an Appointment
- Includes mentions of "quick", "fast", better "hours", **easier**, immediate appointments or their doctor's office was closed. Examples include "**Usually can't get into the doctor's office if it's urgent**", "**Well, if I get sick in the night I get sick in the night.**" And "**Doctor is usually closed.**" Other examples include "Because John's father doesn't get out of work until all the doctors..." "It's **quicker** to get into", and "Usually **after hours** when he ends up sick." Another example is "**Easier** access because it's usually **late at night**".
- 04 Best Place to Get Care for Condition
- Includes **specific conditions** for which quick care is necessary; i.e. accidents, asthma, heart problems, seizures, etc. Example includes "Fever and flu symptoms". For "**Emergencies**".
- 05 Prefers/Likes This as Usual Source
- Includes mentions of preference – **must mention preference for ER.**
- 06 **No Regular Doctor**
- Mentioning not having a regular doctor **without mentioning a specific preference for ER.**
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

WHY IT WAS A PROBLEM TO SEE A SPECIALIST

Question: (F67F) *We are interested in knowing why was it a problem for //you/person in SI// to see a specialist? Was it because there were no specialists near where //you live/person in SI lives//, was it because to see a specialist was too expensive, was it because //your/person in SI's//insurance plan places restrictions on //your/person in SI's//ability to see one, or some other reason that you could tell me about?*

TYPE:
OTHER

Coding Categories and Examples:

F67G (Verbal)

01 NO SPECIALIST NEARBY

- Includes mentions of distance or location or trying to find one in the area.

Transportation.

02 TOO EXPENSIVE

- Includes mentions that there is no insurance or **not covered**.

03 INSURANCE PLAN RESTRICTIONS/RULES

- Includes mentions of needing approval or a second opinion, needing a **referral** or difficulty with trying to find the right specialist to take insurance. Additional, less obvious examples might include “Doctor wanted to perform many tests”, “Didn’t have **Medicaid card with me**” (anything regarding the doctor or insurance restricting or standing in the way of the ability to see a specialist). “Didn’t accept the medical card” and “Specialist needs to be able to be included on HMO to avoid extra...”.

04 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT

- Includes mentions of waiting or taking a long time for an appointment, **availability** or simply that the doctor was “booked”. Includes cases where it was a holiday or weekend, closed or office too busy. Also includes when vacation, office is closed on a “Saturday or Sunday” or otherwise being temporarily unavailable.

97 OTHER REASON

98 DK

99 REFUSED

- **Inadequate or “A”** when respondent doesn’t come close to answering the question, such as “Doctor” or “Cervical Cancer” (specific symptoms are not answering the question). However, initial attempts should be made to discern possible meanings with limited information before coding as “A”.
- **“Other”** would be any legitimately decipherable answer provided that cannot fit any of the codes provided.

REASON FOR NOT RECEIVING DENTAL CARE

Question: (NF68A) What was the main reason //you/person in S1// could not get dental care?

TYPE:

OPEN END

Coding Categories and Examples:

F68Ao (Verbal)

- 01 Too Expensive/Could Not Afford It
 - **“Became unemployed” and “out of work”** implying cannot afford the dental care.
- 02 No Insurance/Insurance Did Not Cover Care
 - Includes “making too much money” to get medical card, Medicaid, welfare or similar responses. “Because welfare took my health care card for a month”. Other examples include “uninsurable under our plan because of age” and “Can only get them every two years” (because it is an indirect reference to insurance – some insurance plans only pay for some procedures every two years). “Because I lost my health card for a month”
- 03 Could Not Find Dentist
 - Includes “not taking new patients”, not accepting anybody” and similar responses. Examples include **“A lot of dentists won’t take me because I don’t have insurance”, “My dentist wouldn’t take me back because I’m at risk” and “They wouldn’t take any patients.”** “Didn’t have a dentist”.
- 04 Dentist Would Not Accept **Medical Card**
 - Example is “Trying to find dentist. Don’t take **Medicaid.**”
- 05 Difficulty or Delay in Getting an Appointment
 - Includes cases where it was a holiday or weekend, closed or office too busy. Also includes **when dentist is on vacation, office is closed on a “Saturday or Sunday” or otherwise being temporarily unavailable.**
- 06 Dentist/Someone Else Besides Insurer Said Care was Not Needed
 - “Never really needed it.”
- 07 Transportation**
- 08 Medically Unable to make the appointment**

- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

* Code list obtained via *Open-Ended Coding Guidelines by Question*, received from OFHS

- Make sure to code multiple responses with the first mention. I.E. “Money and Insurance” would be coded as “01”.

HEALTH CARE NEEDED BUT DID NOT RECEIVE

Question: (NF68D01/02/03) *What was the health care that //you/person in S1// needed but did NOT get? /MUL=3/*

TYPE:

OPEN END

Coding Categories and Examples:

F68D01 / 02 / 03 (Verbal)

- 01 A Doctor Visit, Checkup, or Exam
- Mainly for primary care doctor and includes prenatal care. **Annual Exams.**
- 02 MENTAL HEALTH CARE (counseling)
- Includes references to a psychologist, **counseling** or psychiatrist.
- 03 EYEGASSES OR VISION CARE (cataracts, ophthalmologist)
- Includes cataracts, ophthalmologist.
- 04 Medical Supplies or Equipment
- 05 APPOINTMENT OR REFERRAL TO A SPECIALIST (dermatologist, endocrinologist, chiropractor, gastroenterologist, gynecologist)
- Will accept “heart doctor” or “foot doctor”.
- 06 Dental**
- Includes oral surgery.
- 07 OTHER MEDICAL TREATMENT (TESTS/SURGERY/OTHER PROCEDURES/THERAPIES) (x-rays, cancer or heart attack tests)
- Includes physical therapy, bypasses, hysterectomy, thyroid, x-rays, **tests for cancer and for heart attack**, etc. Also includes **mammogram and colonoscopy**.
 - Vague responses such as “medical”, and “health care” were coded under other medical treatment along with ER and other hospital –based care.
 - Other **hospital based care** that supports a primary care doctor - includes Pap smear and **Blood Test/Work**.
- 08 MEDICATIONS/PRESCRIPTIONS** (patches, pills, shots)
- 09 Care for other ailment or body part**
- Includes any mention of a specific ailment or body part without associating the specific healthcare or action required but didn’t receive, covering aches, blood pressure, arthritis, asthma, flu, sickness, bladder, knee, ankle or wrist problems (**without specifically mentioning a specialist or test or the kind of healthcare needed**).
- 96 No more Healthcare needed but did not get.
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

* Code list obtained via Open-Ended Coding Guidelines by Question, received from OFHS

- **PROBLEMS: GIVING US REASONS FOR NOT GETTING HEALTH CARE (I.E. COST). Currently coded as “A”.**

REASON FOR NOT GETTING THE HEALTH CARE NEEDED BUT DID NOT RECEIVE

Question: (NF68E01/02) What was the main reason //you/person in S1// did not get//response in F68d//?

TYPE:

OPEN END

Coding Categories and Examples:

F68E01 / 02 / 03 (Verbal)

01 Too Expensive/Could Not Afford It

- Includes all mentions of “money” or “cost”. **“Became unemployed” and “out of work”** implying cannot afford the care.

02 No Insurance/Insurance Did Not Cover Care

- Includes “making too much money” to get medical card, Medicaid, welfare or similar responses. Example includes “Medicare doesn’t cover them”, “Medicare will not pay for the eyeglasses”, and “Coverage only pays every two years.” Includes all mentions of “insurance.” Other examples include “uninsurable under our plan because of age” and “Can only get them every two years” (because it is an indirect reference to insurance – some insurance plans only pay for some procedures every two years). “Because I lost my health card for a month”

03 Could Not Find Doctor or Dentist

- Includes “not taking new patients”, not accepting anybody” and similar responses. “Because I don’t want to go back to the same doctor .” Examples include **“A lot won’t take me because I don’t have insurance”, “Wouldn’t take me back because I’m at risk” and “They wouldn’t take any patients.”**

04 Doctor or Dentist Would Not Accept Medical Card

- Example is “Trying to find one. Don’t take **Medicaid.**”

05 Difficulty or Delay in Getting an Appointment

- Includes cases where it was a holiday or weekend, closed or office too busy. Also includes **when on vacation, office is closed on a “Saturday or Sunday” or otherwise being temporarily unavailable.**

06 Doctor or Dentist/Someone Else Besides Insurer Said Care was Not Needed

- “Never really needed it.”

07 Transportation

08 Did not have the time / Too Busy

09 Chose not to / Didn’t feel like it / Didn’t think it was important

96 No more Healthcare needed but did not get.

97 OTHER (SPECIFY)

- Includes mentions of “Changed doctors”.

98 DK

99 REFUSED

** Code list obtained via Open-Ended Coding Guidelines by Question, received from OFHS*

DESCRIPTION OF PLACE OF WORK

Question: (G71A) Do you/Does Person in S1// work for the government, private industry, or //are you/is he/is she// self-employed?

TYPE:
OTHER

Coding Categories and Examples:

G71b (Verbal)

01 GOVERNMENT

- Includes city, county, community, local, district, state or public. **Schools should be government unless otherwise noted.** “Health Department”. Includes social services, post office, police and fire department.

02 PRIVATE INDUSTRY

- Includes companies, stores, and churches. Examples include “**bank**”, “**bartender**”, “**dealership**”, “**factory**”, etc. Many others can be coded here that made no reference to government-type work or being self-employed. **Hospitals are private unless it states “VA or State”.** Construction or labor private unless otherwise noted. Would also include “Non-Profit”, “office” or “nurse”. Includes mentions of non-profit, volunteer or charity work.

03 SELF-EMPLOYED

- “Babysitter” and “Childcare”.

97 OTHER

- Includes housekeeper or consultant.

98 DK

99 REFUSED

COVERAGE OFFERED BY EMPLOYEE

Question: (G72A) *Does //your/Person in SI's// employer or union offer coverage to employees only, or to both employees and their families?*

TYPE:
OTHER

Coding Categories and Examples:

G72a1 (Verbal)

01	Employees only
02	Employees and their families
03	Employees and spouses only (not children)
97	Other
98	DK
99	REFUSED

- **“RETIRED” OR “NOT EMPLOYED” SHOULD BE FLAGGED AND QUESTIONS SHOULD BE RE-CODED.**

REASON NOT PARTICIPATING

Question: (G72C) //Are you/Is person in S1// NOT participating in //your/his/her// employer or union health insurance plan because the plan costs too much, because //you have/she has/he has// other insurance, because //you do/he does/she does//NOT need or want insurance, or for some other reason?

TYPE:
OTHER

Coding Categories and Examples:

G72c1 (Verbal)

- 01 COSTS TOO MUCH
- Includes losing job (“Released from job”), which includes union members who have lost their job.
- 02 HAVE OTHER INSURANCE
- Includes mentions of family members’ insurance. “Are participating in your employer because employer is husband”
- 03 HOPE TO GET OTHER INSURANCE
- 04 DO NOT NEED OR WANT INSURANCE
- 05 DID NOT LIKE PLAN/BENEFIT PACKAGE
- Includes “not worth it”, or “**not offering it to the family**”.
- 06 DID NOT LIKE CHOICE OF DOCTORS OR HOSPITALS
- “Doesn’t have coverage that I want” or “Doesn’t offer to family”
- 07 NO REASON/JUST HAVEN’T GOTTEN AROUND TO IT
- “Does not have enough time to get it right now” and “Missing signup deadline”
- 08 NOT WORKED THERE LONG ENOUGH/DON’T QUALIFY FOR EMPLOYER’S PLAN**
- Examples include “**He has to be employed 90 days before he can get it**”, “**Just got started**” and “**Not covered for six months.**” Also includes “Part Time”, “No Union”, “Laid off” and “Need to Wait for Open Enrollment”.
- 97 Other (SPECIFY)
- 98 DK
- 99 REFUSED
- **TOO MANY RESPONSES MENTIONING “DO HAVE” OR REFERRING TO PLANS WITH EITHER A PAST EMPLOYER OR A PLAN WITH SOMEONE ELSE – TRAINING ISSUE TO FURTHER PROBE OR BACKUP TO BETTER UNDERSTAND RESPONDENT’S SITUATION.**

REASON FOR INELIGIBILITY

Question: (G72D) //Are you/ Is person in S1// ineligible because //you have/she has/he has// NOT worked long enough, because //you do NOT/person in S1 does NOT//work enough hours, because //you are/he is/she is// on call, because of medical problems, or for some other reason.

TYPE:
OTHER

Coding Categories and Examples:

G72d1 (Verbal)

- 01 NOT WORKED THERE LONG ENOUGH
 - Includes all time-related issues. “Because it on a year to year. Only a specific time you can apply”. “Window has closed”.
 - 02 NOT WORKING ENOUGH HOURS
 - Includes temporary, part-time or seasonal work. Includes **“Laid Off”**
 - 03 ON CALL
 - 04 MEDICAL PROBLEMS
 - 05 INSURANCE ONLY OFFERED TO MANAGERS/UNION/PROFESSIONALS
 - Includes mentions of offering to certain “levels” or “status”. **May also include “student”, “intern” or “substitute”**. Includes “Not in Union”.
 - 06 **Missed Open Enrollment/Window Closed**
 - 07 **Ineligible because on another insurance policy**
 - 97 OTHER (SPECIFY)
 - 98 DK
 - 99 REFUSED
- Inadequate “A” would include any mentions of “Not able to afford it”. This does not answer why they are ineligible.

KIND OF BUSINESS

Question: (NG73b_1a, NG73b_1b, NG73b_1c) What kind of business or industry //do you/does person in S1// primarily work in?

TYPE:
OTHER

Coding Categories and Examples:

NG73b_1a, NG73b_1b, NG73b_1c

- 110 Agriculture, forestry, and fisheries (e.g. farming, greenhouse work, landscaping, lawn care)
- 210 Mining, quarrying, oil & gas extraction (includes coal-mining)
- 220 Utilities (electric, sewage, water, natural gas)
- 230 Construction (e.g. contractors, carpentry, repair buildings, plumbing, heat, air conditioning)
 - Includes all mentions of “**Carpet Installation**” “**electricians**”
- 310 Manufacturing (food, clothing, printing and publishing, furniture, paper, chemicals, glass, metal, steel, wood, factory or machine work)
- 420 Wholesale trade (items sold to retailers or other businesses to resell)
- 440 Retail trade (sells items to general public for personal or household use, includes stores, restaurant, other food service to public)
 - Does not include sales
- 480 Transportation & warehousing (e.g. post office, distribution, railroad, shipping, trucking, oil pipelines)
- 510 Information (publishing, movies, data processing, telecommunication, broadcasting)
- 520 Finance and insurance\
- 530 Real estate & rental and leasing
- 540 Professional, scientific, and technical services (legal, accounting, engineer, advertising)
- 550 Management of companies and enterprises
- 560 Administrative and support and waste management and remediation services (lawn care, travel agent, guard, janitorial)
- 610 Educational services
- 620 Health care and social assistance (dentists, hospitals, ambulance, physicians, social worker, child care)
- 710 Arts, entertainment, and recreation (zoos, amusement parks, gambling)
- 720 Accommodation and food services (hotels, caterers)
- 810 Other services (repair and maintenance, laundry)
- 920 Public administration (military, courts, government, police, firefighter, jail)
- 997 Other mention
- 998 (DK)
- 999 (Refused)

- Utilize <http://www.census.gov/naics/2007/index.html> to search for classification.
- “Administrative Assistant”, “Land Surveyor” and “Law” (Without “Enforcement”) are not necessarily government. Also too vague is “Collections”, “Bookkeeper”, “Automotive”, “Computer” and “Chef”. These are occupations, not industries. Therefore, they should be coded as “A”.

RELATIONSHIP OF PERSON WHO HURT YOU

Question:

(R3) *Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked, or physically hurt //you/him/her//. What was that person's relationship to //you/him/her//?*

TYPE:

OPEN END

Coding Categories and Examples:

R30th (Verbal)

- 01 Stranger
- 02 Coworker
- 03 Professional caretaker (e.g., home health aide)
- 04 Male/Female first date
- 05 Someone you were dating
- 06 Former boyfriend/girlfriend
- 07 Current boyfriend/girlfriend or fiancé
- 08 Spouse or live-in partner
- 09 Former spouse or live-in partner
- 10 S/he is my Child
- 11 S/he is my Stepchild
- 12 Another family member (including in-laws)
- 13 Acquaintance/friend (non-intimate)
- 97 OTHER
- 98 DK
- 99 REFUSED

REASON FOR NO PHONE SERVICE LAST 12 MONTHS

Question: (NP156) What is the MAIN reason that //you/person in S1// did NOT have telephone service at //your/person in s1's// household DURING THE PAST 12 MONTHS?

TYPE:

OPEN END

Coding Categories and Examples:

P1560 (Verbal)

- 01 Disconnected because of nonpayment of bill
 - Includes service shut-off for financial reasons. “Because my phone got **shut-off**”, “Disconnected”. All mentions of not being able to afford it should refer to the bill (Can’t afford the bill). Otherwise, should be coded as “02”.
- 02 Could not afford one
 - Includes “wasn’t working” or “financial reasons”. “Can’t afford (without mentioning the bill).
- 03 Moved and waiting for service to start
 - Includes changing or moving homes, relocation.
- 04 Homeless or living in a temporary residence or shelter
- 05 In a confined environment (jail, hospital, etc.)
 - **“Incarcerated”**.
- 06 Temporary outage due to weather
 - Includes **storm**, ice, rain, lightning, flood, wind, blizzard, flood or tornado. “Accident on the tree, tree fell”. Includes “Technical problem because of flood”.
- 07 Temporary outage due to knocking down or damaging lines
 - Includes wiring, **line**, cable or pole problems. Also includes construction. “Bad connection to house”, “Telephone lines had problems w/ animals eating at the line”. Includes faulty wiring in apartment.
- 08 Out of country / **Not at home for time period**
- 09 Other phone company problems
 - Includes equipment, technical or office problems. “Bad phone services” “Power went out (unrelated to knocking down or damaging of lines (07))”, “SBC made a mistake”, “Because of **blackout**” and “Trouble with phone company”.
- 10 Have Cell Phone**
- 11 Switched Phone Companies/ Services/Number**
- 12 Didn’t Want/Need/ Voluntarily Turned off**
- 97 OTHER (SPECIFY)
 - Phone not working, disconnection unspecified, didn’t want it, switching service, live with parents.
- 98 DK
- 99 REFUSED

REASON FOR LOWER QUALITY OF SURVEY

Question: (*post3_a/_b/_c/_d/_e/_f/_g/_h/_i/_j/_k/_l/_m*) *What were the reasons that the quality of information was less than excellent? (Enter all responses)*

TYPE:

Open End

Coding Categories and Examples:

post3O (Verbal)

- 01 Interview not in respondent's native language
- 02 Hearing (hearing loss or background noise)
- 03 Interruptions or distractions
 - Includes distraction of respondent being too “chatty”.
- 04 Poor phone connection
- 05 Lack of mental or physical competency to respond
- 06 Infirm or ill
- 07 Intoxication
- 08 Respondent was rushed
 - Includes answering before the interviewer finished reading the questions.
- 09 Respondent did not take interview seriously
 - Includes mentions of the respondent being “disinterested”.
- 10 Respondent did not understand the meaning of some of the questions
 - Includes mentions of the respondent being unsure of answers or not knowing all of the information.
- 11 Respondent may not have been truthful because someone else was listening in
- 12 Respondent was offended by interview
 - Mentions of respondent being hostile, rude or upset.
- 13 Respondent refused questions**
 - Generally refers to the income or children questions. Includes mentions of the respondent not wanting to or hesitating to answer.
- 14 Elderly**
- 15 Took too long/Tiring**
- 97 Other (SPECIFY)

APPENDIX B

Coding Categories and Instructions for Child Questionnaire

RELATIONSHIP TO CHILD

Question: (I90B) What is //your/person in SI's// relationship to //response in i90//?

TYPE:
OTHER

Coding Categories and Examples

I90c (Verbal)

- 01 Mother
- 02 Father
- 03 Grandparent
- 04 Aunt/Uncle
- 05 Brother/Sister
- 06 Other relative
- 07 Legal guardian
- 08 Foster parent
- 09 Other non-relative
- 10 Step-Mother
- 11 Step-Father

- 97 OTHER
- 98 DK
- 99 REFUSED

NAME OF BCMH/OTHER STATE PLAN

Question: (NJ100F1) Is //response in i90// covered by the Bureau for Children with Medical Handicaps (BCMh) or any OTHER state-sponsored or public health insurance program that I have NOT mentioned? What is the name of that program?

TYPE:
J100F1

Coding Categories and Examples

J100F1 (Verbal)

01 Bureau for Children with Medical Handicaps (BCMh)

02 Medicaid

- Includes “Care Source”, “Healthy Start”, and “Healthy Family”, Job and Family Services.

97 OTHER (SPECIFY)

98 DK

99 REFUSED

- For any responses not referencing health insurance, such as “life insurance”, “Mortgage”, “none”, etc., set to missing and recode the previous question (J100F) to ‘02’

CHILD'S OTHER HEALTH CARE COVERAGE

Question: (J100G1_a/_b/_c) Does //response in i90// have any OTHER health care coverage that I have NOT mentioned? What type of coverage is that?

TYPE:
OTHER

Coding Categories and Examples

J100G1A (Verbal)

- 01 MEDICAL, HMO, or PPO
 - 02 SUPPLEMENTAL
 - Includes “Medigap” or Intensive Care
 - 03 DENTAL
 - 04 VISION
 - 05 MENTAL HEALTH
 - 06 CANCER INSURANCE
 - 07 HEARING
 - 08 ACCIDENT, DISABILITY, LIFE, OR ANY INSURANCE THAT PAYS CASH BENEFITS AND NOT MEDICAL EXPENSES.)
 - 09 COBRA
 - 10 COVERED THROUGH WORK
 - 11 COVERED THROUGH SOMEONE ELSE’S WORK
 - Includes mentions of “husband”, “father”, “spouse” “parent” or “wife” and MUST mention work (non-work related mentions would be coded as “12”)
 - 12 SPECIFIC PLAN NAME GIVEN
 - 13 INSURED THROUGH A FAMILY MEMBER.
 - Includes mentions of “husband”, “father”, “spouse” “parent” or “wife” that do not include a work-related plan that may be directly purchased rather than at work.
 - 14 STUDENT INSURANCE / THROUGH COLLEGE OR UNIVERSITY
 - 15 MEDICAID
 - CareSource, Molina Healthcare, Medicaid waiver programs, Buckeye Community Health Plan, Unison Health Plan, Paramount Advantage, AMERIGROUP Community Care
 - 97 OTHER (SPECIFY)
 - Church Groups.
 - 98 DK
 - 99 REFUSED
- For any responses not referencing to health insurance, such as “life insurance”, “Mortgage”, “none”, etc., set to missing and recode the previous question (J100G) to ‘02’.

- Example of life insurance is “50,000 TERM”. This would be Flagged.
- In 1998, the category of “Specific Plan Name” was added for respondents who gave an insurance company name such as AARP, Anthem, Aetna, Blue Cross, Care Source, Kaiser, Medical Mutual, Nationwide, Ohio Med, State Teachers Retirement System, United Health Care, etc. without any additional information that would allow coders to categorize.

WHY WAS IT A PROBLEM TO SEE A SPECIALIST

Question:

(J104c) *Can you please tell me why was it a big problem for //response in i90// to see a SPECIALIST?*

TYPE:

Open-end

Coding Categories and Examples

- 01 NO SPECIALIST NEARBY
- 02 INSURANCE PLAN RESTRICTIONS/RULES
- 03 NO REASON TO GO (NO PROBLEMS)
- 04 HAVE NOT THOUGHT OF IT
- 05 OTHER PRIORITIES
- 06 COST/CAN'T AFFORD CARE/NO INSURANCE
- 07 NO REGULAR PROVIDER
- 08 PROFESSIONAL SAID NOT NEEDED (YET)
- 09 NO CONVENIENT APPOINTMENTS AVAILABLE
- 10 CANNOT GET TO THE OFFICE/CLINIC (TOO FAR AWAY, NO TRANSPORTATION)
- 11 CHILD/ADULT CARE PROBLEM
- 12 FEAR - BAD NEWS
- 13 FEAR - PAIN
- 14 FEAR - EMBARRASSMENT
- 15 FEAR THE PROCEDURE MAY CAUSE OTHER HEALTH PROBLEM
- 97 OTHER
- 98 DK
- 99 REFUSED

REASON NO LONGER COVERED BY MEDICAID

Question:

(NJ117) Just prior to //response in i90//s current health insurance coverage was //response in i90// covered by Medicaid, which includes Healthy Families, Healthy Start; Disability Assistance; or Medicaid waiver programs?

(NJ117A) Why does //response in i90// no longer have this coverage?

TYPE:

Open-end

Coding Categories and Examples

J117a (Verbal)

- 01 No longer qualify - EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better** or **changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc)
- New/better or changing job, **while mentioning obtaining insurance or coverage**. A less obvious example would be “Company changed over to new plan”.
- 04 No longer qualify - NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 03 No longer qualify - DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 10 No longer qualify - OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements)
- No longer qualifying due to age (“Turned 18”), no longer pregnant, time issues/expiring (“They took me off of it since my time was done”)
- 05 No longer qualify - NOT SURE WHY
- **“Because I didn’t need it” and “No longer needed”.**
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again
- 97 Other (SPECIFY)
- 98 (DK)
- 99 Refused

REASON NO LONGER COVERED BY MEDICAID

Question: (NK99A) *The last time //response in i90// had insurance, was //response in i90// covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs? Why does //response in i90// no longer have this coverage?*

TYPE:

K99a

Coding Categories and Examples

K99a (Verbal)

- 01 No longer qualify - EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better or changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 OBTAINED OTHER COVERAGE (such as new/better job with benefits, company changed to new plan etc)
- New/better or changing job, **while mentioning obtaining insurance or coverage**. A less obvious example would be “Company changed over to new plan”.
- 04 No longer qualify - NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 03 No longer qualify - DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 10 No longer qualify - OTHER REASON (expiration of benefits, change in age, change in marital status, pregnancy status, custody, living arrangements)
- No longer qualifying due to age (“Turned 18”), no longer pregnant, time issues/expiring (“They took me off of it since my time was done”)
- 05 No longer qualify - NOT SURE WHY
- **“Because I didn’t need it” and “No longer needed”.**
- 08 Do not need anymore - IN GOOD HEALTH
- 06 Do not need anymore
- 11 Paperwork delay or problems
- 09 Waiting to become eligible for coverage
- 07 Do not want to go through application process again
- 97 Other (SPECIFY)
- 98 (DK)
- 99 Refused
- **“COULDN’T AFFORD IT”** doesn’t make sense and **“Because she was waiting for disability to come through and you didn’t”** and **“Didn’t have insurance”** should be coded as “A”.

REASON NO LONGER COVERED BY MEDICAID

Question: (NK99C) Why was //response in i90// unable to get Medicaid, Healthy Families, or Healthy Start?

TYPE:

K99c

Coding Categories and Examples

K99c (Verbal)

- 01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better or changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 Already have insurance
- 03 Parent Working
- 04 Application in Process
- **Examples include “Just applied” and “We’re working on it”.**
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

* Code list obtained via *Open-Ended Coding Guidelines by Question*, received from OFHS

REASON DIDN'T TRY TO GET MEDICAID

Question: (NK99D) *Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for //response in i90//?*

TYPE:
K99D

Coding Categories and Examples

K99d (Verbal)

- 01 Child Already has Insurance
- 02 Child Does Not Need the Coverage
 - “I take care of it myself” or “Pays cash”.
- 03 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
 - Example is “Not possible on \$12,000 a month”. A less obvious example would be having a **better** or **changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 04 Did Not Think Child was Eligible or Qualified
- 05 Did Not Know About It/Never Heard of It
 - Example is “I didn’t think we realized there was anything out there”
- 06 Application Process too Involved/Hassle/Too Intrusive
- 07 Child Was Previously Turned Down
- 08 Anticipate obtaining additional coverage / Finding another job
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

* Code list obtained via Open-Ended Coding Guidelines by Question, received from OFHS

REASON UNABLE TO GET MEDICAID

Question: (NK105) Why was //response in i90// unable to get Medicaid, Healthy Families, or Healthy Start?

TYPE:

K105

Coding Categories and Examples

K105 (Verbal)

- 01 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
- A less obvious example would be having a **better** or **changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security. “After I received Social Security I was no longer eligible.”**
- 02 Already have insurance
- 03 Parent Working
- 04 Application in Process/Waiting for Application
- Examples include “Just applied” and “We’re working on it”.
- 05 Application Denied/Refused/Did Not Qualify
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

REASON DIDN'T TRY TO GET MEDICAID

Question: (NK106) Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for //response in i90//?

TYPE:

K106

Coding Categories and Examples

PK106 (Verbal)

- 01 Child Already has Insurance
- 02 Child Does Not Need the Coverage
 - **“I take care of it myself”.**
- 03 No longer qualify – EARN TOO MUCH MONEY (such as new job that pays more money)
 - Example is “Not possible on \$12,000 a month”. A less obvious example would be having a **better** or **changing job**, providing more money (providing new benefits would be “02”). **Also, not being able to meet Spend Down or Social Security.**
 - **“After I received Social Security I was no longer eligible.”**
- 04 Did Not Think Child was Eligible or Qualified
- 05 Did Not Know About It/Never Heard of It
 - Example is “I didn’t think we realized there was anything out there”
- 06 Application Process too Involved/Hassle/Too Intrusive
- 07 Child Was Previously Turned Down
- 08 Application in Process
 - Examples include “Just applied” and “We’re working on it”.
- 09 Did Not Want Government Assistance
 - Includes “Won’t apply”

- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

REASON FOR NO INSURANCE

Question: (NK123) *What are the reasons //response in i90// was uninsured DURING THE PAST 12 MONTHS?*

TYPE:

K123

Coding Categories and Examples

K123 (Verbal)

- 01 Cost Too High / Too Expensive/Could Not Afford
- 02 Employer Did Not Provide Coverage / Not Eligible for Employer's Coverage / Part-Time Worker
 - Example includes "Because of his job. They don't offer it and it's too expensive to buy." Other examples include "Couldn't get it though the job" and "No job would give me insurance."
- 03 Not Working or Family Member Not Working or Lost Job
 - Includes mentions of "layoffs", "retirement", "quitting" or "unemployment".
- 04 Change in (Own/Person in S1's) or Family Member's Job
- 05 Change in Age, Marital, or Student Status
 - Includes mentions of divorce, turning 18 or leaving school/college.
- 06 Turned Down by Insurance Company or Lost Coverage for Health Reasons
 - Includes being turned down as a result of a disability, health condition or pre-existing condition. Mentions of declined or denied.
- 07 Make Too Much Money/Lost or Told Ineligible for Medicaid, Healthy Families, Medical Card, or other Public Assistance
 - Example includes "Because the job and family services said I was losing my Medicaid." and "**Medicaid took him off because he gets too much income from disability**".
- 08 Do Not Need It / In Good Health
 - Includes mentions of having another plan, relying on churches or other charitable organizations, or not thinking about getting coverage. **Example would be "I didn't have enough medical needs to get insurance." Must mention lack of need or good health.**
- 09 Waiting to Become Eligible for Coverage
 - Not working enough hours yet, but will eventually become eligible. Example includes "First 3 months were a waiting period at employer, then the last two months....".
- 10 Lost coverage, other reasons or reasons not specified
 - Includes mentions of being "dropped", "lapsing", "**cancelled**" or moving. Also includes any change in carrier or coverage. Time limits ("One year coverage") "Too lazy to re-register"
- 11 Self Employed/ Not Eligible/Part-time (UNSPECIFIED)
 - Includes all relevant responses with no additional information that would enable a code to be assigned.
- 12 Didn't Want/ By Choice / Never Applied

13 Child not born yet/less than one year old

97 Other (code)

98 (DK)

99 (Refused)

- “Part-time worker” could be classified as 01, 02, or 11 depending on whether the respondent also mentioned not making enough money (01), the employer not making coverage available to part-time workers (02), or neither (11).
- “Not enough hours” could mean either ‘02’ or ‘09’ – if there was not enough additional information to determine which it was coded as “other”, but it should be a separate category if volume warrants.
- References to moving were classified under ‘10’. “Not eligible” without any other information distinguishing between employer, public assistance eligibility, or health problems was coded as (11). Those who lost public assistance because of age were classified under both ‘05’ and ‘07’ since they fit both categories.
- Responses such as “didn’t have insurance” or any responses that are non-responsive should be coded as “A”.
- Code “self-employed” as “other” if respondent did not give any other information that could be coded into one of the other categories.
- References to moving were classified under ‘10’.
- **“Not eligible”, “Wasn’t qualified” and “Did not have coverage” without any other information distinguishing between employer, public assistance eligibility, or health problems was coded as (11). Those who lost public assistance because of age were classified under both ‘05’ and ‘07’ since they fit both categories.**
- **Responses such as “didn’t have insurance” or any responses that are non-responsive should be coded as “A”.**

REASON CHILD WAS TESTED FOR LEAD

Question: (LAS8)Why was //response in i90// tested for lead?

TYPE:
OTHER

Coding Categories and Examples

LAS8oth (Verbal)

- 01 Had health problems
 - Category covers all health problems that might have something to do with lead paint. For example infant diseases requiring regular testing.
- 02 Condition of the home, peeling paint
- 03 Medicaid Requirement
- 04 Other
- 05 At doctor's suggestion
 - Includes any mention related to a doctor suggesting/requiring/ordering tests.
- 06 Part of a routine check-up
 - Category covers any sort of routine check-up/physical that involved lead testing.
- 07 School run testing
 - Includes any mention of school tests/required school tests.
- 08 Regional consideration
 - Examples for this include any references to testing by zip code, wells, common testing to the area, etc.
- 09 WIC requirement
- 10 Guardian elected to have child tested
 - For example: "Just in case" or parent opted for treatment.

- **USUAL SOURCE OF HEALTH CARE**

Question: (N137A) *What kind of place is it-- a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place?*

TYPE:
OTHER

Coding Categories and Examples

N137Aoth (Verbal)

- 01 Doctor's office or HMO
 - Includes visits to the chiropractor, or gastrologist. Also includes physician, cardiologist and chiropractor. Also includes **“D.O”, “Family Practice” and “PPO Doctor’s Group”**. Would include **“Psychiatrist”, Clinic or health center**
- 02 Hospital emergency room
- 03 Hospital outpatient department
 - Includes after care.
- 04 Clinic or health center
 - Includes community or medical centers. Would also include **“medical group” or “mental health office”**.
- 05 School (nurse’s office, athletic trainer’s office, etc.)
- 06 Family member or friend
- 07 Some other place
- 08 Urgent Care
- 09 Does not go to one place most often
- 98 DK
- 99 REFUSED

REASON CHILD HAS NO USUAL SOURCE OF HEALTH CARE

Question: (PN137C) What is the main reason //response in i90// does NOT have a usual source of care?

TYPE:
OTHER

Coding Categories and Examples:

N137c (Verbal)

- 01 Seldom or Never Get Sick
 - Includes mentions of not having a need for health care, such as “not **needing** to go”, “Hasn’t **needed** any”, “Because haven’t **needed** health care recently” and “Don’t **need** it” and “Don’t go often enough.”
- 02 Do Not Know Where to Go for Care
 - Example is “Because I just moved back up to Geneva from Columbus” (Just moved here and doesn’t know where to go). Includes “been working for medical services and looking for other health care”. “Just **moved** to area” or “I’ve traveled a lot and just recently settled in one spot”.
- 03 Previous Doctor/Source no Longer Available
 - Includes “doctor retired”.
- 04 Like to Go to Different Places for Different Health Needs
- 05 Just Changed Insurance Plans
- 06 Don't Use or Like Doctors/Treat Myself
 - Includes getting health care from family/friends. “I take care of myself”. “Wife is a nurse”, “**Don’t go to the doctor unless it is an emergency**”, “**I just don’t go**”, “**Doesn’t go to doctor**”.
- 07 Cost/Too Expensive
- 08 No Insurance
 - Includes mentions of “**Not having a medical card.**”
- 09 Books/Internet/Hotline**
- 97 OTHER (SPECIFY)
 - “I go to who is available”, “Have not went and looked for a doctor”, “I just don’t go”, “Don’t go to the doctor unless it is an emergency”. These are “other” because they don’t necessary lend themselves to a specific code without additional information. Also includes “Doctor too far away” and “Primary plan doesn’t permit it”.
- 98 DK
- 99 REFUSED

REASON FOR USUALLY GOING TO THE ER

Question: (NN137e) What is the main reason //response in i90// usually goes to the emergency room instead of a doctor's office or clinic?

TYPE:

N137e

Coding Categories and Examples:

N137e (Verbal)

- 01 Can't Afford to go Elsewhere/They Don't Turn Anyone Away
 - Includes mentions of insurance or cost. "No money or insurance to pay for it."
- 02 Didn't Know Where Else to Go
 - Example is "Because I just moved back up to Geneva from Columbus" (Just moved here and doesn't know where to go). Includes "been working for medical services and looking for other health care".
- 03 Convenience/Don't Need an Appointment
 - Includes mentions of "quick", "fast", better "hours", **easier**, immediate appointments or their doctor's office was closed. Examples include "**Usually can't get into the doctor's office if it's urgent**", "**Well, if I get sick in the night I get sick in the night.**" And "**Doctor is usually closed.**" Other examples include "Because John's father doesn't get out of work until all the doctors..." "It's **quicker** to get into", and "Usually **after hours** when he ends up sick." Another example is "**Easier** access because it's usually **late at night**".
- 04 Best Place to Get Care for Condition
 - Includes **specific conditions** for which quick care is necessary; i.e. accidents, asthma, heart problems, seizures, etc. Example includes "Fevers and flu symptoms". For "**Emergencies**".
- 05 Prefers/Likes This as Usual Source
 - Includes mentions of preference – **must mention preference for ER.**
- 06 No Regular Doctor
 - Mentioning not having a regular doctor **without mentioning a specific preference for ER.**
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED

REASON THERE IS NOT USUAL SOURCE OF CARE

Question:

(NN137f) *What is the main reason //response in i90// does NOT have a usual source of care?*

TYPE:

Other

Coding Categories and Examples:

N137f (Verbal)

- 01 SELDOM OR NEVER GET SICK
- 02 DON'T KNOW WHERE TO GO FOR CARE
- 03 PREVIOUS DOCTOR/SOURCE NO LONGER AVAILABLE
- 04 LIKE TO GO TO DIFFERENT PLACES FOR DIFFERENT HEALTH NEEDS
- 05 JUST CHANGED INSURANCE PLANS
- 06 DON'T USE OR LIKE DOCTORS/TREAT MYSELF
- 07 COST/TOO EXPENSIVE
- 08 NO INSURANCE
- 09 BOOKS/INTERNET/HOTLINE (get needed info from)
- 97 OTHER
- 98 DK
- 99 REFUSED

REASON WAS PROBLEM TO SEE SPECIALIST

Question: (NOI39) *We are also interested in knowing why was it a problem for //response in i90// to see a specialist? Was it because there were no specialists near where //response in i90// lives, was it because to see a specialist was too expensive, was it because //response in i90's// insurance plan places restrictions on //response in i90's// ability to see one, or some other reason that you could tell me about?*

TYPE:

Other

Coding Categories and Examples:

N138C (Verbal)

02 TOO EXPENSIVE/COULDN'T AFFORD IT

- Includes mentions that there is no insurance or **not covered**.

03 NO INSURANCE/INSURANCE DID NOT COVER IT

- Includes mentions of needing approval or a second opinion, needing a **referral** or difficulty with trying to find the right specialist to take insurance. Additional, less obvious examples might include "Doctor wanted to perform many tests", "Didn't have Medicaid card with me" (**anything regarding the doctor or insurance restricting or standing in the way of the ability to see a specialist**). "Didn't accept the medical card" and "Specialist needs to be able to be included on HMO to avoid extra...".

04 DENTIST WOULD NOT ACCEPT MEDICAL CARD

05 DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT

- Includes mentions of waiting or taking a long time for an appointment, **availability** or simply that the doctor was "booked". Includes cases where it was a holiday or weekend, closed or office too busy. Also includes when vacation, office is closed on a "Saturday or Sunday" or otherwise being temporarily unavailable.

06 DENTIST/SOMEONE ELSE BESIDES INSURER SAID CARE WASN'T NEEDED

07 TRANSPORTATION

97 OTHER REASON

98 DK

99 REFUSED

- **Inadequate or "A"** when respondent doesn't come close to answering the question, such as "Doctor" or "Cervical Cancer" (specific symptoms are not answering the question). However, initial attempts should be made to discern possible meanings with limited information before coding as "A".
- "Other" would be any legitimately decipherable answer provided that cannot fit any of the codes provided.

- **Potential code to add. Waiting to see more open-ended responses. Considering taking all mentions of transportation and adding a code that refers to any issues of being able to physically get to the doctor.**

HEALTH CARE CHILD NEEDED BUT DID NOT RECEIVE

Question: (PO142A1/2/3) *What was the health care that //response in i90// needed but did NOT get?*

TYPE:

OPEN END

Coding Categories and Examples:

O142A1/A2/A3 (Verbal)

- 01 A Doctor Visit, Checkup, or Exam
 - Mainly for primary care doctor and includes prenatal care. **Annual Exams.**
- 02 MENTAL HEALTH CARE (counseling)
 - Includes references to a psychologist, **counseling** or psychiatrist.
- 03 EYEGASSES OR VISION CARE (cataracts, ophthalmologist)
 - Includes cataracts, ophthalmologist.
- 04 Medical Supplies or Equipment
- 05 APPOINTMENT OR REFERRAL TO A SPECIALIST (dermatologist, endocrinologist, chiropractor, gastroenterologist, gynecologist)
 - Will accept “heart doctor” or “foot doctor”.
- 06 **Dental**
 - Includes oral surgery.
- 07 OTHER MEDICAL TREATMENT (TESTS/SURGERY/OTHER PROCEDURES/THERAPIES) (x-rays, cancer or heart attack tests)
 - Includes physical therapy, bypasses, hysterectomy, thyroid, x-rays, **tests for cancer and for heart attack**, etc. Also includes **mammogram and colonoscopy**.
 - Vague responses such as “medical”, and “health care” were coded under other medical treatment along with ER and other hospital –based care.
 - Other **hospital based care** that supports a primary care doctor - includes Pap smear and **Blood Test/Work**.
- 08 MEDICATIONS/PRESCRIPTIONS (patches, pills, shots)
- 09 Care for other ailment or body part
 - Includes any mention of a specific ailment or body part without associating the specific healthcare or action required but didn’t receive, covering aches, blood pressure, arthritis, asthma, flu, sickness, bladder, knee, ankle or wrist problems (**without specifically mentioning a specialist or test or the kind of healthcare needed**).
- 96 No more Healthcare needed but did not get.
- 97 OTHER (SPECIFY)
- 98 DK
- 99 REFUSED
 - **PROBLEMS: GIVING US REASONS FOR NOT GETTING HEALTH CARE (I.E. COST). Currently coded as “A”.**

REASON NOT GETTING HEALTH CARE NEEDED

Question: (PO143a/b/c) What was the main reason //response in i90// did NOT get //response in o142A//?

TYPE:

OPEN END

Coding Categories and Examples:

O143a/b/c (Verbal)

- 01 Too Expensive/Could Not Afford It
 - Includes all mentions of “money” or “cost”. **“Became unemployed” and “out of work”** implying cannot afford the care.
- 02 No Insurance/Insurance Did Not Cover Care
 - Includes “making too much money” to get medical card, Medicaid, welfare or similar responses. Example includes “Medicare doesn’t cover them”, “Medicare will not pay for the eyeglasses”, and “Coverage only pays every two years.” Includes all mentions of “insurance.” Other examples include “uninsurable under our plan because of age” and “Can only get them every two years” (because it is an indirect reference to insurance – some insurance plans only pay for some procedures every two years). “Because I lost my health card for a month”
- 03 Could Not Find Doctor or Dentist
 - Includes “not taking new patients”, not accepting anybody” and similar responses. “Because I don’t want to go back to the same doctor and you to find a d..” Examples include **“A lot won’t take me because I don’t have insurance”, “Wouldn’t take me back because I’m at risk” and “They wouldn’t take any patients.”**
- 04 Doctor or Dentist Would Not Accept Medical Card
 - Example is “Trying to find one. Don’t take **Medicaid.**”
- 05 Difficulty or Delay in Getting an Appointment
 - Includes cases where it was a holiday or weekend, closed or office too busy. Also includes **when on vacation, office is closed on a “Saturday or Sunday” or otherwise being temporarily unavailable.**
- 06 Doctor or Dentist/Someone Else Besides Insurer Said Care was Not Needed
 - “Never really needed it.”
- 07 Transportation**
- 96 No more Healthcare needed but did not get.
- 97 OTHER (SPECIFY)
 - Includes mentions of **“unemployment”** or “Changed doctors”.
- 98 DK
- 99 REFUSED

Code list obtained via Open-Ended Coding Guidelines by Question, received from OFHS

CHILD'S RACE

Question: (P150_a/_b/_c/_d/_e/_f/_g) Which one or more of the following would you say is //response in i90's// race? Is //response in i90// White, Black or African-American, Asian, Native American, Alaskan Native, Native Hawaiian, Pacific Islander, or some other race I have not mentioned?

TYPE:
OTHER

Coding Categories and Examples:

PO1500 (Verbal)

- 01 White
- 02 Black or African American
- 03 Asian
- 04 Native American, American Indian, or Alaskan Native
- 05 Native Hawaiian or Other Pacific Islander

- 06 HISPANIC, LATINO, SPANISH
- 97 OTHER
- 98 DK
- 99 REFUSED

- If a person indicated ethnicity such as Caucasian, Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish, that response was coded as White. Also having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicate their race or races as White, Caucasian, Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish; Europe: Austria, Belgium, Britain, Croatia, Cyprus; Czech Republic, Estonia, France, Germany, Greece, Holland, Hungary, Ireland, Italy, Luxembourg, Malta, Monaco, Poland, Portugal, Romania, Denmark, Finland, Iceland, Norway, Sweden, Slovenia, Spain, & Switzerland; Middle East: Bahrain, Cyprus, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Palestine, Qatar, Saudi Arabia, Syria, Turkey, Yemen; North Africa: Algeria, Canary Islands (Spain); Egypt, Libya, Sudan, Morocco, Tunisia.
- Responses such as African American, Negro, Nigerian, or Haitian were coded as Black. It includes people who indicate their race or races are Black, African American, Negro, Nigerian, or Haitian.
- Responses that indicated ethnicity of the Far East, Southeast Asia, or the Indian subcontinent but not fitting into the given Asian races, were coded as Other Asian with the Asian race recorded.

- Also, responses such as "Native American" were coded as American Indian.
- Responses such as "human" or "guess" were coded as a refusal.
- Each open-ended response given was reviewed to determine whether the Hispanic question should be re-coded. The Hispanic question was coded as "yes" when the response indicated the person was Cuban, Mexican, Puerto Rican, South American, Latino, Central American, or any other Spanish culture or origin regardless of race.
- "Hispanic or Latino origin is: A person of Cuban, Mexican, Puerto Rican, South American, Central American, or other Spanish culture or origin, regardless of race."
- Asian origin is Chinese, Japanese, Korean, Taiwanese, Cambodian, Indonesian, Vietnamese, Laotian, Philippino, Malaysian, or from: India, Singapore, Thailand, Nepal, Pakistan, Afghanistan, Bangladesh, Bhutan, Maldives, Sri Lanka, Timor-Leste.
- Responses that should have been coded rather than recorded in the "other" field were back-coded. For example there were some responses such as "Chinese" or "Filipino," which should have been coded as Asian."

RACE IF HISPANIC

Question: (P150b) Do you consider //yourself/Person in S1// to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

TYPE:

Other

Coding Categories and Examples:

P150BO (Verbal)

- 01 White Hispanic
- 02 Black or African American Hispanic
- 03 Asian Hispanic
- 04 Native American, American Indian, or Alaskan Native Hispanic
- 05 Native Hawaiian or Pacific Islander Hispanic

- 97 Other race Hispanic
- 98 DON'T KNOW
- 99 REFUSES TO DISCRIMINATE

- P149, P150, P150a and P150b have been coded to be consistent with response to race in P150.

- 06 Family member or friend
- 07 Some other place
- 08 Urgent Care
- 09 Does not go to one place most often
- 98 DK
- 99 REFUSED

APPENDIX J: DATA DICTIONARY / CODE BOOK

- This is an alphabetical index of variables in the final data file.
- The notation “(same)” means values are formatted the same as the preceding variable and have been omitted from the listing for conciseness.

a1 ARE YOU/IS [FILL IN] COVERED BY HEALTH INSURANCE OR SOME OTHER TYPE OF HEALTH CARE PLAN?

01-YES
02-NO
98-DK
99-REFUSED

a1a HEALTH INSURANCE OR SOME OTHER TYPE OF HEALTH CARE PLAN MAY INCLUDE HEALTH INSURANCE OBTAINED THROUGH EMPLOYMENT OR PURCHASED DIRECTLY AS WELL AS GOVERNMENT AND MILITARY PROGRAMS SUCH AS...

01-YES, INSURED
02-NO, NOT INSURED
98-DK
99-REFUSED

age Age based on S14/S14A

age_a Adult's Age

01-18-24
02-25-34
03-35-44
04-45-54
05-55-64
06-65+

age_c Child's Age

01-< 1
02-1-5
03-6-12
04-13-17
98-DON'T KNOW
99-REFUSED

age_p Proxy's Age

01-18-24
02-25-34
03-35-44
04-45-54
05-55-64
06-65+

asst_hpm How many hours of assistance do you/does [FILL IN] currently require on average for the types of assistance that were just mentioned? (hours/month)

avoid_a Delayed treatment - adult

01-YES
02-NO
97-UNKNOWN

avoid_c Delayed treatment - child

(same)

b10a DO ANY OF YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE PLANS COVER MENTAL HEALTH SERVICES?

(same)

b10b DO ANY OF YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE PLANS COVER DENTAL CARE EXCEPT EMERGENCY CARE?

(same)

b10c DO ANY OF YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE PLANS COVER VISION SERVICES EXCEPT EMERGENCY CARE?

(same)

b10d DO ANY OF YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE PLANS COVER PRESCRIPTION MEDICATIONS?

(same)

b18 HOW LONG HAVE YOU/HAS [FILL IN] BEEN COVERED BY YOUR/[FILL IN] CURRENT PRIMARY HEALTH INSURANCE PLAN?

- 01-DAYS
- 02-WEEKS
- 03-MONTHS
- 04-YEARS
- 98-DK
- 99-REFUSED

b1801 HOW LONG HAVE YOU/HAS [FILL IN] BEEN COVERED BY YOUR/[FILL IN] CURRENT PRIMARY HEALTH INSURANCE PLAN? (DAYS)

b1802 HOW LONG HAVE YOU/HAS [FILL IN] BEEN COVERED BY YOUR/[FILL IN] CURRENT PRIMARY HEALTH INSURANCE PLAN? (WEEKS)

b1803 HOW LONG HAVE YOU/HAS [FILL IN] BEEN COVERED BY YOUR/[FILL IN] CURRENT PRIMARY HEALTH INSURANCE PLAN? (MONTHS)

b1804 HOW LONG HAVE YOU/HAS [FILL IN] BEEN COVERED BY YOUR/[FILL IN] CURRENT PRIMARY HEALTH INSURANCE PLAN? (YEARS)

b18days How long have you/has [FILL IN] been covered by your/[FILL IN] current primary health insurance plan? (days)

b19 BEFORE YOU/[FILL IN] BECAME COVERED BY YOUR/HIS/HER CURRENT PRIMARY PLAN, WERE YOU/WAS [FILL IN] COVERED BY ANY OTHER HEALTH INSURANCE PLAN IN THE PAST 12 MONTHS?

- 01-YES
- 02-NO
- 98-DK
- 99-REFUSED

b20 JUST PRIOR TO YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE COVERAGE, WERE YOU/WAS [FILL IN] COVERED BY MEDICAID, WHICH INCLUDES HEALTHY

FAMILIES, HEALTHY START; OR MEDICAID WAIVER PROGRAMS?

(same)

b20a_a WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (1ST RESPONSE)

- 01-EARN TOO MUCH MONEY
- 02-OBTAINED OTHER COVERAGE
- 03-DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 04-NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 05-NOT SURE WHY
- 06-DO NOT NEED ANYMORE
- 07-DO NOT WANT TO GO THROUGH APPLICATION PROCESS AGAIN
- 08-DO NOT NEED ANYMORE - IN GOOD HEALTH
- 09-WAITING TO BECOME ELIGIBLE FOR COVERAGE
- 10-NO LONGER QUALIFY - OTHER REASON
- 11-PAPERWORK DELAY OR PROBLEMS
- 97-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

b20a_b WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (2ND RESPONSE)

(same)

b20a_c WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (3RD RESPONSE)

(same)

b20a_d WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (4TH RESPONSE)

(same)

b20ao WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (OTHER)

b21 JUST PRIOR TO YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE COVERAGE, WERE YOU/WAS [FILL IN] COVERED BY A HEALTH INSURANCE PLAN OBTAINED

THROUGH AN EMPLOYER OR UNION?

01-YES

02-NO

98-DK

99-REFUSED

b22 WERE YOU/WAS [FILL IN] COVERED BY ANY OTHER INSURANCE THAT YOU/[FILL IN] OR YOUR/HIS/HER FAMILY PAID FOR COMPLETELY?
(same)

b25 IN THE PAST 12 MONTHS, WAS THERE ANY TIME THAT YOU/[FILL IN] DID NOT HAVE HEALTH INSURANCE?

(same)

b27 DURING THE PAST 12 MONTHS, HOW LONG WERE YOU/WAS [FILL IN] WITHOUT HEALTH INSURANCE COVERAGE?

(same)

b2701 DURING THE PAST 12 MONTHS, HOW LONG WERE YOU/WAS [FILL IN] WITHOUT HEALTH INSURANCE COVERAGE? (DAYS)

b2702 DURING THE PAST 12 MONTHS, HOW LONG WERE YOU/WAS [FILL IN] WITHOUT HEALTH INSURANCE COVERAGE? (WEEKS)

b2703 DURING THE PAST 12 MONTHS, HOW LONG WERE YOU/WAS [FILL IN] WITHOUT HEALTH INSURANCE COVERAGE? (MONTHS)

b27days DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage? (days)

b29a_a DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] WHILE YOU WERE/HE OR SHE WAS UNINSURED DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] HAVE ANY MAJOR MEDICAL COSTS WHILE YOU WERE/HE OR SHE WAS UNINSURED?

01-YES
02-NO
98-DK
99-REFUSED

b29a_b DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] WHILE YOU WERE/HE OR SHE WAS UNINSURED DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] DELAY OR AVOID GETTING CARE BECAUSE YOU WERE/HE OR SHE WAS UNINSURED?

(same)

b29a_c DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] WHILE YOU WERE/HE OR SHE WAS UNINSURED DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] HAVE ANY PROBLEMS GETTING THE CARE YOU/[FILL IN] NEEDED WHILE UNINSURED?

(same)

b29b_a DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] HAVE ANY MAJOR MEDICAL COSTS

(same)

b29b_b DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] DELAY OR AVOID GETTING CARE THAT YOU/[FILL IN] FELT YOU/[FILL IN] NEEDED BUT COULD NOT AFFORD

(same)

b29b_c DID ANY OF THE FOLLOWING THINGS HAPPEN TO YOU/[FILL IN] DURING THE PAST 12 MONTHS? DID YOU/[FILL IN] HAVE ANY PROBLEMS GETTING THE CARE YOU/[FILL IN] NEEDED

(same)

b4a ARE YOU/IS [FILL IN] COVERED BY A HEALTH INSURANCE PLAN THROUGH A CURRENT OR FORMER EMPLOYER OR UNION?

01-YES, THROUGH CURRENT/FORMER EMPLOYER OR UNION
02-NO, NOT THROUGH CURRENT/FORMER EMPLOYER OR UNION
98-DK

99-REFUSED

b4aa IS THAT INSURANCE THROUGH YOUR/[FILL IN]'S WORK OR ARE YOU/IS [FILL IN] RECEIVING INSURANCE AS A DEPENDENT THROUGH SOMEONE ELSE'S WORK?

01-[YOUR OWN][FILL IN]'s WORK

02-SOMEONE ELSE'S WORK

03-BOTH [YOUR OWN][FILL IN]'s WORK AND SOMEONE ELSE'S WORK

98-DK

99-REFUSED

b4aa1 JUST TO CONFIRM, YOU SAID THAT YOUR/[FILL IN]'S INSURANCE IS THROUGH YOUR OWN/[FILL IN]'S WORK AND SOMEONE ELSE'S WORK?

01-YES, INSURANCE THROUGH BOTH

02-NO, INSURANCE THROUGH OWN WORK ONLY

03-NO, INSURANCE THROUGH SOMEONE ELSE'S WORK

98-DK

99-REFUSED

b4ab IS THAT THROUGH YOUR/[FILL IN]'S CURRENT WORK OR PAST WORK? ARE YOU/IS [FILL IN] COVERED THROUGH THAT PERSON'S CURRENT WORK OR PAST WORK?

01-CURRENT WORK

02-PAST WORK

98-DK

99-REFUSED

b4b ARE YOU/IS [FILL IN] COVERED BY MEDICARE, THE GOVERNMENT-FUNDED HEALTH INSURANCE PLAN FOR PEOPLE 65 YEARS AND OLDER OR PERSONS WITH CERTAIN DISABILITIES THAT INCLUDES ...

01-YES

02-NO

98-DK

99-REFUSED

b4bb3 DO YOU/DOES [FILL IN] HAVE MEDICARE PART-D, PRESCRIPTION BENEFIT COVERAGE?

(same)

b4bc I NOTED THAT YOU ARE/[FILL IN] IS [X] YEARS OLD, BUT NOT COVERED BY MEDICARE. IS THAT CORRECT OR DID I MAKE A MISTAKE?

01-BOTH RESPONSES ARE CORRECT
02-AGE WAS WRONG - UNDER 65 YEARS OLD
03-COVERAGE WAS WRONG
98-DK
99-REFUSED

b4bcage ON YOUR/[FILL IN]'S LAST BIRTHDAY WOULD YOU SAY THAT YOU WERE/[FILL IN] WAS...?

01-18-24
02-25-34
03-35-44
04-45-54
05-55-64
06-65 OR OLDER
98-DK
99-REFUSED

b4c ARE YOU/IS [FILL IN] COVERED BY MEDICAID, THE GOVERNMENT HEALTH ASSISTANCE PROGRAM OR MANAGED HEALTH CARE PLAN THAT INCLUDES HEALTHY FAMILIES, HEALTHY START; DISABILITY ASSISTANCE,...

01-YES
02-NO
98-DK
99-REFUSED

b4d DO YOU/DOES [FILL IN] HAVE MILITARY OR VETERANS COVERAGE SUCH AS CHAMPUS, CHAMPUS-VA, OR TRICARE?

01-YES

02-NO
98-DK
99-REFUSED

b4e ARE YOU/IS [FILL IN] COVERED BY HEALTH INSURANCE PURCHASED DIRECTLY, THAT IS, A PRIVATE PLAN NOT RELATED TO CURRENT OR PAST EMPLOYMENT?

(same)

b4g DO YOU/DOES [FILL IN] HAVE ANY OTHER HEALTH CARE COVERAGE THAT I HAVE NOT MENTIONED?

(same)

b4g1_a WHAT TYPE OF COVERAGE IS THAT? (1ST RESPONSE)

01-MEDICAL, HMO, OR PPO
02-SUPPLEMENTAL
03-DENTAL
04-VISION
05-CANCER INSURANCE
06-LONG TERM CARE OR NURSING HOME INSURANCE
07-ACCIDENT, DISABILITY, LIFE, ANY THAT PAYS CASH BENEFITS
08-COBRA
09-COVERED THROUGH WORK
10-COVERED THROUGH SOMEONE ELSE'S WORK
11-SPECIFIC PLAN NAME GIVEN
12-INSURED THROUGH A FAMILY MEMBER
13-STUDENT INSURANCE / THROUGH COLLEGE OR UNIVERSITY
14-MEDICAID
97-OTHER (SPECIFY)
98-DK
99-REFUSED

b4g1_b WHAT TYPE OF COVERAGE IS THAT? (2ND RESPONSE)

(same)

b4g1_c WHAT TYPE OF COVERAGE IS THAT? (3RD RESPONSE)

(same)

pb4g1a INTERVIEWER: ENTER TYPE OF COVERAGE

01-GIVEN NAME

98-DK

99-REFUSED

b4g1a WHAT TYPE OF COVERAGE IS THAT? (OTHER)

b4h WHO PAYS FOR MOST OF THIS HEALTH INSURANCE PLAN?

01-YOU OR YOUR FAMILY/[FILL IN]'s FAMILY

02-EMPLOYER OR UNION

03-STATE, LOCAL, OR COMMUNITY PROGRAM

04-SOMEONE ELSE

98-DK

99-REFUSED

b4chk TO CONFIRM, YOU SAID YOU ARE/[FILL IN] IS COVERED BY [FILL IN]. IS THAT CORRECT?

01-YES

02-NO

98-DK

99-REFUSED

b7_a IS YOUR/[FILL IN]'S PRIMARY HEALTH INSURANCE PLAN FAMILY COVERAGE, SINGLE COVERAGE, COVERAGE FOR YOU/[FILL IN] AND YOUR/HIS/HER SPOUSE ONLY, OR SOME OTHER TYPE?

01-FAMILY COVERAGE

02-YOU/[FILL IN] AND SPOUSE ONLY, EXCLUDES CHILDREN

03-SINGLE COVERAGE

04-SINGLE PLUS ONE (CHILD)

97-SOME OTHER TYPE OF ARRANGEMENT

98-DK

99-REFUSED

b7_b IS YOUR/[FILL IN]'S PRIMARY HEALTH INSURANCE PLAN FAMILY COVERAGE, SINGLE COVERAGE, COVERAGE FOR YOU/[FILL IN] AND YOUR/HIS/HER SPOUSE ONLY, OR SOME OTHER TYPE?

(same)

b7_c IS YOUR/[FILL IN]'S PRIMARY HEALTH INSURANCE PLAN FAMILY COVERAGE, SINGLE COVERAGE, COVERAGE FOR YOU/[FILL IN] AND YOUR/HIS/HER SPOUSE ONLY, OR SOME OTHER TYPE?

(same)

pb7a How would you describe your/[FILL IN]'s primary health insurance plan?

01-GIVEN RESPONSE

98-DK

99-REFUSED

b7a IS YOUR/[FILL IN]'S PRIMARY HEALTH INSURANCE PLAN FAMILY COVERAGE, SINGLE COVERAGE, COVERAGE FOR YOU/[FILL IN] AND YOUR/HIS/HER SPOUSE ONLY, OR SOME OTHER TYPE? (OTHER)

b8a HOW MUCH DO YOU/DOES [FILL IN] OR YOUR/[FILL IN] FAMILY SPEND FOR HEALTH INSURANCE PREMIUMS FOR THIS PRIMARY HEALTH INSURANCE PLAN? PLEASE INCLUDE PAYROLL DEDUCTIONS FOR PREMIUMS.

b8a2 TO VERIFY, YOU SAID THAT YOU DO NOT PAY PREMIUMS FOR YOUR INSURANCE PLAN, NOT EVEN THROUGH PAYROLL DEDUCTIONS?

01-YES, DO NOT PAY PREMIUMS

02-NO, DO PAY PREMIUMS

b8b HOW OFTEN IS EACH PAYMENT OF \$[B8A] MADE?

01-WEEKLY

- 02-EVERY 2 WEEKS
- 03-MONTHLY
- 04-TWICE EACH MONTH
- 05-EVERY 2 MONTHS
- 06-EVERY QUARTER/EVERY 3 MONTHS
- 07-TWICE A YEAR
- 08-ONCE A YEAR
- 97-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

b8b1 HOW OFTEN IS EACH PAYMENT MADE? (OTHER_

b9a THINKING ABOUT YOUR/[FILL IN]'S CURRENT HEALTH INSURANCE COVERAGE,
HOW WOULD YOU RATE YOUR/[FILL IN]'S CHOICE OF DOCTORS, USING ANY
NUMBER FROM 0 TO 10?

- 00-WORST
- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09
- 10-BEST
- 98-DK
- 99-REFUSED

barier_a Adult - barriers to care

- 01-INSURANCE PLAN RESTRICTIONS/RULES
- 02-COST/CAN'T AFFORD CARE/NO INSURANCE
- 03-NO CONVENIENT APPOINTMENTS AVAILABLE
- 04-NO SPECIALIST NEARBY/TOO FAR/NO TRANSPORT
- 05-OTHER
- 97-UNKNOWN

barrier_c Child - barriers to care
(same)

bmi_a Body mass index - adult

bmi_a_cat BMI category - adult
01-UNDERWEIGHT
02-NORMAL OR HEALTHY WEIGHT
03-OVERWEIGHT
04-OBESE
05-BMI/age out of range: BMI_C_PCT/BMI_C_Z not computed

bmi_c Body mass index - child

bmi_c_pct BMI percentile - child

bmi_c_cat BMI category - child
01-UNDERWEIGHT
02-NORMAL OR HEALTHY WEIGHT
03-OVERWEIGHT
04-OBESE
05-BMI/age out of range: BMI_C_PCT/BMI_C_Z not computed

bmi_c_z BMI Z score - child
c1 DURING THE PAST 12 MONTHS, AT ANY TIME WERE YOU/WAS [FILL IN]
COVERED BY ANY TYPE OF HEALTH INSURANCE PLAN?
01-YES
02-NO
98-DK
99-REFUSED

c2 WHEN WAS THE LAST TIME YOU/[FILL IN] HAD HEALTH INSURANCE
COVERAGE?

01-DAYS
02-WEEKS
03-MONTHS
98-DK
99-REFUSED

c201 When was the last time you/[FILL IN] had health insurance coverage? (DAYS)

c202 When was the last time you/[FILL IN] had health insurance coverage? (WEEKS)

c203 When was the last time you/[FILL IN] had health insurance coverage? (MONTHS)

c26 When was the last time you/[FILL IN] had health insurance coverage?

00-NEVER HAD HEALTH INSURANCE
01-MONTHS
02-YEARS
98-DK
99-REFUSED

c2601 When was the last time you/[FILL IN] had health insurance coverage? (MONTHS)

c2602 When was the last time you/[FILL IN] had health insurance coverage? (YEARS)

c26days When was the last time you/[FILL IN] had health insurance coverage? (days)

c28a DURING THE PAST 12 MONTHS, did any of the following things happen to you/[FILL IN] while you were/[FILL IN] was uninsured? Did you/[FILL IN] have any major medical costs while you were or he/she was uninsured?

- 01-YES
- 02-NO
- 98-DK
- 99-REFUSED

c28b DURING THE PAST 12 MONTHS, did any of the following things happen to you/[FILL IN] while you were/[FILL IN] was uninsured? Did you/[FILL IN] delay or avoid getting care because you were or he/she was uninsured?

(same)

c28c DURING THE PAST 12 MONTHS, did any of the following things happen to you/[FILL IN] while you were/[FILL IN] was uninsured? Did you/[FILL IN] have any problems getting the care you/[FILL IN] needed while uninsured?

(same)

c2days When was the last time you/[FILL IN] had health insurance coverage? (days)

c3 THE LAST TIME YOU/[FILL IN] HAD HEALTH INSURANCE WERE YOU/WAS [FILL IN] COVERED BY MEDICAID, WHICH INCLUDES HEALTHY FAMILIES, HEALTHY START, DISABILITY ASSISTANCE, OR MEDICAID WAIVER PROGRAMS?

(same)

c3a_a WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (1ST RESPONSE)

- 01-EARN TOO MUCH MONEY
- 02-OBTAINED OTHER COVERAGE
- 03-DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
- 04-NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
- 05-NOT SURE WHY
- 06-DO NOT NEED ANYMORE
- 07-DO NOT WANT TO GO THROUGH APPLICATION PROCESS AGAIN
- 08-DO NOT NEED ANYMORE - IN GOOD HEALTH
- 09-WAITING TO BECOME ELIGIBLE FOR COVERAGE
- 10-NO LONGER QUALIFY - OTHER REASON

11-PAPERWORK DELAY OR PROBLEMS

97-OTHER (SPECIFY)

98-DK

99-REFUSED

c3a_b WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (2ND RESPONSE)

(same)

c3a_c WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (3RD RESPONSE)

(same)

c3a_d WHY DO YOU/DOES [FILL IN] NO LONGER HAVE THIS COVERAGE? (4TH RESPONSE)

(same)

c3ao Why do you/does [FILL IN] no longer have this coverage? (Other)

c4 The last time you/[FILL IN] had health insurance, were you/was [FILL IN] covered by a plan obtained through an employer or union?

01-YES

02-NO

98-DK

99-REFUSED

c5 Were you/Was [FILL IN] covered by any other insurance that you/[FILL IN] or your/his/her family paid for completely?

(same)

c6 DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage?

01-DAYS

02-WEEKS

03-MONTHS
98-DK
99-REFUSED

c601 DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage? (DAYS)

c602 DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage? (WEEKS)

c603 DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage? (MONTHS)

c6days DURING THE PAST 12 MONTHS, how long were you/was [FILL IN] without health insurance coverage? (days)

cell In addition to your residential landline telephone, do you also use one or more cell phone numbers?

01-YES
02-NO
98-DK
99-REFUSED

cell1 Are your living quarters: owned or being bought by you/someone in your household.; rented for cash, OR occupied without payment of cash rent?

01-OWNED OR BEING BOUGHT (MORTGAGED)
02-RENTED
03-OCCUPIED WITHOUT PAYMENT OF CASH RENT
97-SEE HELP SCREEN
98-DK
99-REFUSED

cell1_imp Own vs. rent, imputed

01-Owned
02-Not owned

cintro1 Hello, my name is, and I am calling on behalf of the State of Ohio Department of Health and Ohio State University...Your cell phone number has been chosen randomly.

- 01-CORRECT NUMBER (PROCEED TO NEXT QUESTION)
- 02-NO ANSWER
- 03-NORMAL BUSY
- 04-VOICE MAIL
- 05-SELECTED ON THE PHONE (PROCEED TO NEXT QUESTION)
- 06-ALREADY INTERVIEWED
- 07-TERMINATION SCREEN
- 08-HANG UP - BEFORE/DURING INTRO
- 12-RESPONDENT DOES NOT LIVE IN OHIO
- 13-CALLBACK AT DIFFERENT NUMBER
- 14-CONTINUE IN SPANISH

county County, Anticipated from Sample

- 001 Adams
- 003 Allen
- 005 Ashland
- 007 Ashtabula
- 009 Athens
- 011 Auglaize
- 013 Belmont
- 015 Brown
- 017 Butler
- 019 Carroll
- 021 Champaign
- 023 Clark
- 025 Clermont
- 027 Clinton
- 029 Columbiana
- 031 Coshocton
- 033 Crawford
- 035 Cuyahoga
- 037 Darke
- 039 Defiance
- 041 Delaware
- 043 Erie
- 045 Fairfield
- 047 Fayette

049 Franklin
051 Fulton
053 Gallia
055 Geauga
057 Greene
059 Guernsey
061 Hamilton
063 Hancock
065 Hardin
067 Harrison
069 Henry
071 Highland
073 Hocking
075 Holmes
077 Huron
079 Jackson
081 Jefferson
083 Knox
085 Lake
087 Lawrence
089 Licking
091 Logan
093 Lorain
095 Lucas
097 Madison
099 Mahoning
101 Marion
103 Medina
105 Meigs
107 Mercer
109 Miami
111 Monroe
113 Montgomery
115 Morgan
117 Morrow
119 Muskingum
121 Noble
123 Ottawa
125 Paulding
127 Perry
129 Pickaway
131 Pike
133 Portage

135 Preble
137 Putnam
139 Richland
141 Ross
143 Sandusky
145 Scioto
147 Seneca
149 Shelby
151 Stark
153 Summit
155 Trumbull
157 Tuscarawas
159 Union
161 Van Wert
163 Vinton
165 Warren
167 Washington
169 Wayne
171 Williams
173 Wood
175 Wyandot

county_a County for analysis: This is the county that the respondent said that they lived in, and should be used for most analyses.

cq153 We have a few questions about the general characteristics of your household. In addition to your cell phone, is there at least one working land-line telephone in your home? (Exclude business/computer/fax telephones)

01-YES
02-NO
98-DK
99-REFUSED

cq154 Of all the telephone calls that you receive, are most on a cellphone or regular landline?

01-All or almost all calls received on a cell phone?
02-Some received on cell phone and some on landline phone?
03-Very few or none received on a cell phone?
98-DK
99-REFUSED

- d30 In general, would you say your/[FILL IN]'s health is excellent, very good, good, fair, or poor?
- 01-EXCELLENT
 - 02-VERY GOOD
 - 03-GOOD
 - 04-FAIR
 - 05-POOR
 - 98- DK
 - 99- REFUSED
- d30a About how much do you/does [FILL IN] weigh without shoes?
- 001-ANSWERED IN POUNDS
 - 002-ANSWERED IN KILOGRAMS
 - 998-DK
 - 999-REFUSED
- d30a1 Overall, how would you rate the health of your/[FILL IN]'s teeth and gums?
- 01-EXCELLENT
 - 02-VERY GOOD
 - 03-GOOD
 - 04-FAIR
 - 05-POOR
 - 98-DK
 - 99-REFUSED
- d30a2 At the present time, would you say your/[FILL IN]'s eyesight, with glasses or contact lenses if you/[FILL IN] wear them, is . . . ?
- 01-EXCELLENT,
 - 02-GOOD,
 - 03-FAIR,
 - 04-POOR, OR
 - 05-VERY POOR?
 - 98-DK
 - 99-REFUSED
- d30ak About how much do you/does [FILL IN] weigh without shoes?

(KILOGRAMS)

d30ap About how much do you/does [FILL IN] weigh without shoes? (POUNDS)

d30b About how tall Are you/is [FILL IN] without shoes?

001-ANSWERED IN FEET/INCHES

002-ANSWERED IN CENTIMETERS

998-DK

999-REFUSED

d30bc About how tall Are you/is [FILL IN] without shoes? (CENTIMETERS)

d30bf About how tall Are you/is [FILL IN] without shoes? (Fill, where F=FEET and II=INCHES))

d30h For how many days DURING THE PAST 30 DAYS was your/[FILL IN]'s physical health not good?

d30i For how many days DURING THE PAST 30 DAYS did your/[FILL IN]'s mental health condition or emotional problem keep you/[FILL IN] from doing your/[FILL IN]'s work or other usual activities?

d31 Do you/Does [FILL IN] currently need or take prescription medicine other than vitamins or birth control pills?

01-YES

02-NO

98-DK

99-REFUSED

d31a Is this because of ANY medical, mental health or other health condition?

(same)

d31b Is this a condition that has lasted or is expected to last for at least 12 months?

(same)

d31c Do you/Does [FILL IN] need or use medical care, mental health or other health services on a regular basis?

(same)

d31d Is this because of ANY medical, mental health or other health condition?

(same)

d31e Is this a condition that has lasted or is expected to last for at least 12 months?

(same)

d31eye01 About how long has it been, if ever, since you/[FILL IN] last had your/his/her eyes examined by any doctor or eye care providers?
(DAYS)

d31eye02 About how long has it been, if ever, since you/[FILL IN] last had your/his/her eyes examined by any doctor or eye care providers?
(WEEKS)

d31eye03 About how long has it been, if ever, since you/[FILL IN] last had your/his/her eyes examined by any doctor or eye care providers?
(MONTHS)

d31eye04 About how long has it been, if ever, since you/[FILL IN] last had your/his/her eyes examined by any doctor or eye care providers?
(YEARS)

d31eye2a What is the MAIN reason you have/[FILL IN] has not visited an eye care professional in the past 24 months?

01-NO PROBLEMS WITH EYES (NO REASON TO GO)

02-HAVE NOT THOUGHT OF IT

- 03-OTHER PRIORITIES
- 04-NOT SERIOUS ENOUGH TO REQUIRE HELP
- 05-COST/CAN'T AFFORD CARE
- 06-NO INSURANCE
- 07-NO REGULAR PROVIDER
- 09-NO CONVENIENT APPOINTMENTS AVAILABLE
- 10-CAN'T GET TO THE OFFICE/CLINIC
- 11-CHILD/ADULT CARE PROBLEM
- 12-FEAR
- 16-DON'T THINK IT CAN BE HELPED BY A HEALTH PROFESSIONAL
- 17-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

d31eye2b What is the MAIN reason you have/[FILL IN] has not visited an eye care professional in the past 24 months?

(same)

d31eye2c What is the MAIN reason you have/[FILL IN] has not visited an eye care professional in the past 24 months?

(same)

d31eye2o What is the MAIN reason you have/[FILL IN] has not visited an eye care professional in the past 24 months? (Other)

d31f Do you/Does [FILL IN] have difficulty doing or need assistance to do day-to-day activities?

- 01-YES
- 02-NO
- 98-DK
- 99-REFUSED

d31g Is this because of ANY medical, mental health or other health condition?

(same)

d31h Is this a condition that has lasted or is expected to last for at

least 12 months?

(same)

d31i Do you/Does [FILL IN] need or get special therapy?

(same)

d31j Is this because of ANY medical, mental health or other health condition?

(same)

d31k Is this a condition that has lasted or is expected to last for at least 12 months?

(same)

d31l Do you/Does [FILL IN] need or get treatment or counseling for any kind of mental health, substance abuse or emotional problem?

(same)

d31m Has this problem lasted or is it expected to last for at least 12 months?

(same)

d32a Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Assistance with personal care, such as bathing, dressing, toileting, or feeding?

(same)

d32b Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Domestic assistance, such as shopping, laundry, housekeeping, cooking, or transportation?

(same)

d32c Do you/Does [FILL IN] currently need any of the following types of

assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Help with household maintenance, such as painting or yard work?

(same)

d32d Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Social or emotional support, such as companionship, recreation, and socialization?

(same)

d32e Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Coordinating health care, such as making appointments for doctor's visits or therapies?

(same)

d32f Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Assistance managing financial affairs?

(same)

d32g Do you/Does [FILL IN] currently need any of the following types of assistance BECAUSE OF THAT/THOSE HEALTH PROBLEMS you just told me about? Other kinds of assistance that I have NOT mentioned?

(same)

d34 How many hours of assistance do you/does [FILL IN] currently require on average for the types of assistance that were just mentioned? (IHHH, where I=1 (HHH hours per day), 2 (HHH hours per week) or 3 (HHH hours per month))

d34c RECORD THE TIME PERIOD RESPONDENT NEEDS THESE HOURS OF ASSISTANCE.

d41 Have you/Has [FILL IN] ever been told by a doctor or any other health professional that you/he/she had high blood pressure or hypertension?

01-YES
02-NO
98-DK
99-REFUSED

d41a Has a doctor, nurse, or other health professional EVER told you/[FILL IN] that you/he/she had any of the following? A heart attack, also called a myocardial infarction?

(same)

d41b Has a doctor, nurse, or other health professional EVER told you/[FILL IN] that you/he/she had any of the following? Coronary heart disease also known as coronary ARTERY disease, congestive heart disease, angina?

(same)

d41c Has a doctor, nurse, or other health professional EVER told you/[FILL IN] that you/he/she had any of the following? A stroke?

(same)

d41d Has a doctor, nurse, or other health professional EVER told you/[FILL IN] that you/he/she had any of the following? Congestive heart failure?

(same)

d43 Have you/Has [FILL IN] ever been told by a doctor or any other health professional that you/he/she had diabetes or sugar diabetes?

01-YES
02-NO
03-BORDERLINE
98-DK
99-REFUSED

d43a Have you/Has [FILL IN] ever been told by a doctor or any other health professional that you/he/she had TYPE 1 CHILD ONSET DIABETES

or TYPE 2 ADULT ONSET, DIABETES?

01-YES - TYPE I (JUVENILE)

02-YES - TYPE II (ADULT ONSET)

03-BORDERLINE DIAGNOSIS ONLY

04-NO, NEVER DIAGNOSED WITH DIABETES

97-YES, GESTATIONAL OR ONLY WHEN PREGNANT MENTIONED

98-DK

99-REFUSED

d43b Was your/[FILL IN]'s DIABETES only during a time associated with a pregnancy?

01-YES ONLY WHEN PREGNANT

02-NO

98-DK

99-REFUSED

d44 Is your/[FILL IN]'s blood sugar or glucose level, which affects diabetes USUALLY under control or where a physician wants it, even if medication is required? Would you say ... ?

01-ALWAYS,

02-USUALLY,

03-SOMETIMES,

04-RARELY

05-NEVER

98-DK

99-REFUSED

d45 Have you/Has [FILL IN] smoked at least 100 cigarettes in your/his/her entire life?

01-YES

02-NO

98-DK

99-REFUSED

d45a Do you/Does [FILL IN] smoke cigarettes every day, some days, or

not at all?

01-EVERY DAY
02-SOME DAYS
03-NOT AT ALL
98-DK/NOT SURE
99-REFUSED

d45b Which statement best describes the rules about smoking inside your/[FILL IN]'s home? Do not include decks, garages, or porches. Would you say ... ?

01-SMOKING IS NOT ALLOWED ANYWHERE INSIDE THE HOME
02-SMOKING IS ALLOWED IN SOME PLACES OR AT SOME TIMES
03-SMOKING IS ALLOWED ANYWHERE INSIDE THE HOME?
98-DON'T KNOW
99-REFUSED

d46 DURING THE PAST 30 DAYS, on how many days did you/[FILL IN] have at least one drink of alcoholic beverage such as beer, wine, a malt beverage or liquor?

d46a DURING THE PAST 30 DAYS, considering all types of alcoholic beverages, on how many days, if any, did you/[FILL IN] have [5][4] or more drinks on an occasion?

d47 Have you/Has [FILL IN] ever been told by a doctor that you/he/she had CANCER of any type?

01-YES
02-NO
98-DK
99-REFUSED

d47a Are you/Is [FILL IN] CURRENTLY being treated for cancer, were you/he/she treated in the past, or were you/he/she never treated?

01-CURRENTLY UNDER CANCER TREATMENT
02-PAST CANCER TREATMENT
97-NEVER TREATED
98-DK
99-REFUSED

- d47b During your/[FILL IN]'s cancer treatment is/was your/[FILL IN]'s pain or discomfort under control, even if pain medication was required ... ?
- 01-ALWAYS,
02-USUALLY,
03-SOMETIMES,
04-RARELY
05-NEVER
98-DK
99-REFUSED
- dayseye About how long has it been, if ever,since you/[FILL IN] last had your/his/her eyes examined by any doctor or eye care providers?
(DAYS)
- e59 NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since you/[FILL IN] last saw a doctor about your/his/her own health?
- 00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED
- e59_1 I want to make sure I have this right, you have/[FILL IN] has never visited a doctor or any other health care professional in their offices for a routine check-up, physical, or for any reason?
- 01-NEVER BEEN TO DOCTOR/HEALTH CARE PROFESSIONAL IN OFFICE
02-BEEN TO DOCTOR/HEALTH CARE PROFESSIONAL BUT NOT OFFICE
03-INCORRECT RESPONSE - BACK UP TO PREVIOUS QUESTION
98-DK
99-REFUSED
- e59_con Let me see if I have this right, earlier I thought you said that...Is this correct, or did I make a mistake?

01-RESPONSE TO LAST TIME DOCTOR OR OTHER HEALTH CARE PRO
02-RESPONSE TO LAST TIME DOCTOR FOR A ROUTINE CHECKUP
03-NO CHANGES
99-REFUSED

e5901 About how long has it been since you/[FILL IN] last saw a doctor
or other health care professional about your/his/her own health?
(DAYS)

e5902 About how long has it been since you/[FILL IN] last saw a doctor
or other health care professional about your/his/her own health?
(WEEKS)

e5903 About how long has it been since you/[FILL IN] last saw a doctor
or other health care professional about your/his/her own health?
(MONTHS)

e5904 About how long has it been since you/[FILL IN] last saw a doctor
or other health care professional about your/his/her own health?
(YEARS)

e59a NOT including overnight hospital stays, visits to hospital
emergency rooms, home visits, or telephone calls, about how long
has it been since you/[FILL IN] last visited a doctor for a ROUTINE
CHECK-UP?

00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED

e59a01 About how long has it been since you/[FILL IN] last visited a
doctor for a ROUTINE CHECK-UP? (DAYS)

- e59a02 About how long has it been since you/[FILL IN] last visited a doctor for a ROUTINE CHECK-UP? (WEEKS)
- e59a03 About how long has it been since you/[FILL IN] last visited a doctor for a ROUTINE CHECK-UP? (MONTHS)
- e59a04 About how long has it been since you/[FILL IN] last visited a doctor for a ROUTINE CHECK-UP? (YEARS)
- e59adays NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since you/[FILL IN] last visited a doctor for a ROUTINE CHECK-UP? (days)
- e59days NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since you/[FILL IN] last saw a doctor about your/his/her own health? (days)
- e60 DURING THE PAST 12 MONTHS, how many times were you/was [FILL IN] admitted to a hospital for a stay that was OVERNIGHT or longer?
- e62 DURING THE PAST 12 MONTHS, how many times were you/was [FILL IN] a patient in a hospital emergency room? Include emergency room visits where you were/[FILL IN] was admitted to the hospital.
- e62b DURING THE PAST 12 MONTHS, how many times were you/was [FILL IN] a patient in an urgent care center?
- e63 About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.
- 00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS

98-DK
99-REFUSED

- e6301 About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (DAYS)
- e6302 About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (WEEKS)
- e6303 About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (MONTHS)
- e6304 About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (YEARS)
- e63days About how long has it been since you/[FILL IN] last visited a dentist? Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (days)
- e64 How would you rate the overall quality of ALL of the HEALTH care that you/[FILL IN] received DURING THE PAST 12 MONTHS, using any number from 0 to 10?

00-WORST HEALTH CARE POSSIBLE

01
02
03
04

05
06
07
08
09
10-BEST HEALTH CARE POSSIBLE
98-DK
99-REFUSED

e65 DURING THE PAST 12 MONTHS, were you/was [FILL IN] pregnant at any time?

01-YES
02-NO
98-DK
99-REFUSED

e65a Are you/Is [FILL IN] CURRENTLY pregnant?

(same)

e65b Are you/Is [FILL IN] receiving ANY prenatal care?

(same)

e65b_1 Did you/[FILL IN] receive any prenatal care for your/[FILL IN]'s most recent pregnancy in the past 12 months?

(same)

e65c How many weeks or months pregnant were you/was [FILL IN] in the past 12 months, when you/[FILL IN] had your/[FILL IN]'s 1st visit for prenatal care?

002-ANSWERED IN WEEKS
003-ANSWERED IN MONTHS
997-HAD NO PRENATAL CARE IN PAST 12 MONTHS WHEN PREGNANT
998-DK
999-REFUSED

e65c02 How many weeks or months pregnant were you/was [FILL IN] in the past 12 months, when you/[FILL IN] had your/[FILL IN]'s 1st visit for prenatal care? (WEEKS)

e65c03 How many weeks or months pregnant were you/was [FILL IN] in the past 12 months, when you/[FILL IN] had your/[FILL IN]'s 1st visit for prenatal care? (MONTHS)

e65cdays How many weeks or months pregnant were you/was [FILL IN] in the past 12 months, when you/[FILL IN] had your/[FILL IN]'s 1st visit for prenatal care? (days)

educ Level of education

- 01-UP TO HIGH SCHOOL BUT NO DIPLOMA
- 02-HIGH SCHOOL GRADUATE OR EQUIVALENT
- 03-SOME COLLEGE
- 04-ASSOCIATE DEGREE
- 05-4-YEAR COLLEGE GRADUATE
- 06-ADVANCED DEGREE
- 98-DON'T KNOW
- 99-REFUSED

educ_imp Level of education, imputed

- 01-LESS THAN 1st GRADE
- 02-FIRST THROUGH 8TH GRADE
- 03-SOME HIGH SCHOOL, BUT NO DIPLOMA
- 04-HIGH SCHOOL GRADUATE OR EQUIVALENT
- 05-SOME COLLEGE, BUT NO DEGREE
- 06-ASSOCIATE DEGREE
- 07-FOUR YEAR COLLEGE GRADUATE
- 08-ADVANCED DEGREE
- 98-DK
- 99-REFUSED

employ50 Employer size over 50 ppl

- 01-LESS THAN 50
- 02-50+
- 03-UNKNOWN

98-DON'T KNOW
99-REFUSED

employsz Employer size

01-0-9
02-10-24
03-25-49
04-50-99
05-100-249
06-250-499
07-500-999
08-1000+
98-DON'T KNOW
99-REFUSED

ervt_a Adult - number of ER visits

00-0
01-1+
98-DON'T KNOW
99-REFUSED

ervt_amn Adult - mean # of ER visits

ervt_c Child - number of ER visits

00-0
01-1+
98-DON'T KNOW
99-REFUSED

ervt_cmn Child - mean # of ER visits

f67 Is there a place that you/[FILL IN] USUALLY go/goes to when you are/[FILL IN] is sick or you/[FILL IN] need advice about your/his/her health?

01-YES
02-NO
03-THERE IS MORE THAN ONE PLACE
98-DK
99-REFUSED

f67_1 Just to be sure, is it that there is NO PLACE at all that you/[FILL IN] USUALLY go/goes to when sick or needing advice about health, OR is it that you/[FILL IN] go/goes to more than ONE place?

01-NO PLACE AT ALL
02-MORE THAN ONE PLACE
98-DK
99-REFUSED

f67a_a What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

01-CLINIC OR HEALTH CENTER
02-DOCTOR'S OFFICE OR HMO
03-HOSPITAL EMERGENCY ROOM
04-HOSPITAL OUTPATIENT DEPT
05-MILITARY HOSPITAL
06-DOES NOT GO TO ONE PLACE MOST OFTEN
07-USE BOOKS/INTERNET/HOTLINE
08-HOSPITAL (UNSPECIFIED)
09-URGENT CARE
10-FAMILY MEMBER OF FRIEND
97-SOME OTHER PLACE
98-DK
99-REFUSED

f67a_b What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

(same)

f67a_c What kind of place is it? A clinic or health center, a doctor's

office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

(same)

f67a_o What kind of place do you/does [FILL IN] go to most often?

f67a1 Do you/Does [FILL IN] usually see the same doctor, nurse, or other health provider each time you/he/she go/goes there?

01-YES, ONE PERSON

02-YES, MORE THAN ONE PERSON

03-NO

98-DK

99-REFUSED

f67a2 During the past 12 months, was there any time you/[FILL IN] needed professional help coordinating care or coordinating referrals among different health care providers and services that you use/[FILL IN] uses?.

01-YES

02-NO

98-DK

99-REFUSED

f67a3 DURING THE PAST 12 MONTHS, how often did you/[FILL IN] get as much help as you/he/she wanted with arranging or coordinating your/[FILL IN]'s care? Would you say ... Always, Usually, Sometimes, rarely or Never?

01-NEVER

02-RARELY

03-SOMETIMES

04-USUALLY

05-ALWAYS

98-DK

99-REFUSED

f67c1 From the time you/[FILL IN] leave home, on average, about how long does it take to get to your/[FILL IN]'s MAIN source for routine

- f67d medical care?
 During the PAST 12 MONTHS, did you/[FILL IN] NEED to see a specialist to get special care?
- 01-YES
 02-NO
 98-DK
 99-REFUSED
- f67e How much of a problem, if any, was it for you/[FILL IN] to see a specialist? Was it a big problem, small problem, or not a problem?
- 01-BIG PROBLEM
 02-SMALL PROBLEM
 03-NOT A PROBLEM
 98-DK
 99-REFUSED
- f67f We are interested in knowing why was it a problem for you/[FILL IN] to see a specialist. Was it because...
- 01-NO SPECIALIST NEARBY
 02-TOO EXPENSIVE
 03-INSURANCE PLAN RESTRICTIONS/RULES
 04-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
 97-OTHER REASON
 98-DK
 99-REFUSED
- f67g Why was it a problem for you/[FILL IN] to see a specialist?
- f68 DURING THE PAST 12 MONTHS, was there a time when you/[FILL IN] needed dental care but could NOT get it at that time?
- 01-YES
 02-NO
 98-DK
 99-REFUSED
- f68b IN THE PAST 12 MONTHS, have you/has [FILL IN] NOT filled a

prescription because of the cost?

(same)

f68c DURING THE PAST 12 MONTHS, was there any time when you/[FILL IN] did NOT get any other health care that you/he/she needed, such as a medical exam, medical supplies, mental health care, or eyeglasses?

(same)

f69 Compared with 3 YEARS AGO, is getting the medical care you need/[FILL IN] needs becoming easier, harder, or has it stayed the same?

01-EASIER

02-HARDER

03-STAYED THE SAME

98-DK

99-REFUSED

f70 DURING THE LAST 12 MONTHS, were there times when you/[FILL IN] had problems paying or you were/[FILL IN] was unable to pay for medical bills for yourself/himself/herself or anyone else?

01-YES

02-NO

98-DK

99-REFUSED

f70b1 Have any of the following happened because you/[FILL IN] had to pay medical bills? Been unable to pay for basic necessities like food, heat, or rent?

(same)

f70b2 Have any of the following happened because you/[FILL IN] had to pay medical bills? Used up all or most of your/[FILL IN]'s savings?

(same)

f70b3 Have any of the following happened because you/[FILL IN] had to

pay medical bills? Had large credit card debt OR had to take a loan or debt against your/[FILL IN]'s home OR had to take any kind of loan?

(same)

fam_type Household composition

01-1 ADULT, 0 KIDS
02-1 ADULT, 1 KID
03-2 ADULTS, 0 KIDS
04-2 ADULTS, 1 KID
97-UNKNOWN

flag_90 Less than 90 percent of poverty level

g71 LAST WEEK did you/[FILL IN] have a job either full or part-time? Include any job from which you were/[FILL IN] was temporarily absent.

01-YES
02-NO
98-DK
99-REFUSED

g71a Do you/Does [FILL IN] work for the government, private industry, or are you/is he or she self-employed?

01-GOVERNMENT
02-PRIVATE INDUSTRY
03-SELF-EMPLOYED
97-OTHER (PROBE)
98-DK
99-REFUSED

g71b How would you describe where you work/[FILL IN] works

g72 Does your/[FILL IN]'s employer or union offer a health insurance plan to any of its employees?

01-YES

02-NO
98-DK
99-REFUSED

g72a Does your/[FILL IN]'s employer or union offer coverage to employees only, OR to both employees and their families OR to both employees and their spouses only?

01-EMPLOYEES ONLY
02-EMPLOYEES AND THEIR FAMILIES
03-EMPLOYEES AND SPOUSES ONLY (NOT CHILDREN)
97-OTHER
98-DK
99-REFUSED

g72a1 Who does the employer or union offer coverage to?

g72b You may have already told me this, but are you/Is [FILL IN] currently eligible to participate in your/his/her employer or union health plan?

01-YES
02-NO
98-DK
99-REFUSED

g72c Are you/Is [FILL IN] NOT participating in your/his/her employer or union health insurance plan because it costs too much, you have/he/she has other insurance, you do/he/she does NOT need/want it, or for some other reason?

01-COSTS TOO MUCH
02-HAVE OTHER INSURANCE
03-HOPE TO GET OTHER INSURANCE
04-DO NOT NEED OR WANT INSURANCE
05-DID NOT LIKE PLAN/BENEFIT PACKAGE
06-DID NOT LIKE CHOICE OF DOCTORS OR HOSPITALS
07-NO REASON/JUST HAVEN'T GOTTEN AROUND TO IT
08-NOT WORK THERE LONG ENOUGH/DON'T QUAL FOR EMPLOYER'S PLAN
97-OTHER (SPECIFY)

98-DK
99-REFUSED

g72c1 Why are you/is [FILL IN] not participating in your/his/her employer or union health insurance plan?

g72d_a Are you/Is [FILL IN] ineligible because you have/he/she has NOT worked long enough, because you do/[FILL IN] does NOT work enough hours, because you are/he/she is on call, because of medical problems, or for some other reason.

01-NOT WORKED THERE LONG ENOUGH
02-NOT WORKING ENOUGH HOURS
03-ON CALL
04-MEDICAL PROBLEMS
05-INSURANCE ONLY OFFERED TO MANAGERS/UNION/PROFESSIONALS
06-MISSED OPEN ENROLLMENT / WINDOW CLOSED
07-INELIBIBLE BECAUSE OF ANOTHER INSURANCE POLICY
97-OTHER (SPECIFY)
98-DK
99-REFUSED

g72d_b Are you/Is [FILL IN] ineligible because you have/he/she has NOT worked long enough, because you do/[FILL IN] does NOT work enough hours, because you are/he/she is on call, because of medical problems, or for some other reason.

(same)

g72d_c Are you/Is [FILL IN] ineligible because you have/he/she has NOT worked long enough, because you do/[FILL IN] does NOT work enough hours, because you are/he/she is on call, because of medical problems, or for some other reason.

(same)

g72d1 Why are you/[FILL IN] not eligible?

g73 How many hours PER WEEK do you/does [FILL IN] usually work at your/his/her current primary job?

g73a Do you/Does [FILL IN] USUALLY work less than 35 hours per week or 35 or more hours per week at your/his/her primary job?

01-LESS THAN 35 HOURS/WEEK

02-35 HOURS/WEEK OR MORE

98-DK

99-REFUSED

g73c Counting all locations where your/[FILL IN]'s employer operates or operated IN THE PAST 12 MONTHS, what is the total number of persons who work for your/[FILL IN]'s employer?

00-0 EMPLOYEES

01-1 EMPLOYEE

02-2-9 EMPLOYEES

03-10-24 EMPLOYEES

04-25-49 EMPLOYEES

05-50-99 EMPLOYEES

06-100-249 EMPLOYEES

07-250-499 EMPLOYEES

08-500-999 EMPLOYEES

09-1,000 EMPLOYEES OR MORE

98-DK

99-REFUSED

g73d Do you think it is more or less than 50 people?

01-50 OR MORE PEOPLE

02-LESS THAN 50 PEOPLE

03-ABOUT 50 PEOPLE

98-DK

99-REFUSED

h76 Are you/Is [FILL IN] married, divorced, widowed, separated, never married OR a member of an unmarried couple?

01-MARRIED

02-DIVORCED

03-WIDOWED

04-SEPARATED
05-NEVER MARRIED, OR
06-A MEMBER OF AN UNMARRIED COUPLE
98-DK
99-REFUSED

h76_1 What is your/[FILL IN]'s partner's gender?

01-MALE
02-FEMALE
98-DK
99-REFUSED

h76a Is your/[FILL IN]'s spouse or partner currently employed?

01-YES
02-NO
98-DK
99-REFUSED

h77 What is the highest level of school you have/[FILL IN] has completed or the highest degree received?

01-LESS THAN 1st GRADE
02-FIRST THROUGH 8TH GRADE
03-SOME HIGH SCHOOL, BUT NO DIPLOMA
04-HIGH SCHOOL GRADUATE OR EQUIVALENT
05-SOME COLLEGE, BUT NO DEGREE
06-ASSOCIATE DEGREE
07-FOUR YEAR COLLEGE GRADUATE
08-ADVANCED DEGREE
98-DK
99-REFUSED

h84 Total number of people in family

h84_imp Number of persons in the family, imputed

h85 Please tell me your/[FILL IN]'s total income during the calendar

year 2007.

01-ENTER YEARLY INCOME
02-ENTER MONTHLY INCOME
98-DK
99-REFUSED

h85m MONTHLY INCOME

h85y YEARLY INCOME

h86 Income categories

01-\$6,000 OR LESS
02-OVER \$6,000 TO \$10,000
03-OVER \$10,000 TO \$15,000
04-OVER \$15,000 TO \$20,000
05-OVER \$20,000 TO \$26,000
06-OVER \$26,000 TO \$31,000
07-MORE THAN \$31,000
08-\$9,000 OR LESS
09-OVER \$9,000 TO \$14,000
10-OVER \$14,000 TO \$21,000
11-OVER \$21,000 TO \$27,000
12-OVER \$27,000 TO \$34,000
13-OVER \$34,000 TO \$41,000
14-MORE THAN \$41,000
15-\$11,000 OR LESS
16-OVER \$11,000 TO \$17,000
17-OVER \$17,000 TO \$26,000
18-OVER \$26,000 TO \$34,000
19-OVER \$34,000 TO \$43,000
20-OVER \$43,000 TO \$52,000
21-MORE THAN \$52,000
22-\$13,000 OR LESS
23-OVER \$13,000 TO \$21,000
24-OVER \$21,000 TO \$31,000
25-OVER \$31,000 TO \$41,000
26-OVER \$41,000 TO \$52,000
27-OVER \$52,000 TO \$62,000
28-MORE THAN \$62,000
29-\$15,000 OR LESS
30-OVER \$15,000 TO \$24,000

- 31-OVER \$24,000 TO \$36,000
- 32-OVER \$36,000 TO \$48,000
- 33-OVER \$48,000 TO \$60,000
- 34-OVER \$60,000 TO \$72,000
- 35-MORE THAN \$72,000
- 36-\$17,000 OR LESS
- 37-OVER \$17,000 TO \$28,000
- 38-OVER \$28,000 TO \$41,000
- 39-OVER \$41,000 TO \$55,000
- 40-OVER \$55,000 TO \$69,000
- 41-OVER \$69,000 TO \$83,000
- 42-MORE THAN \$83,000
- 43-\$20,000 OR LESS
- 44-OVER \$20,000 TO \$31,000
- 45-OVER \$31,000 TO \$47,000
- 46-OVER \$47,000 TO \$62,000
- 47-OVER \$62,000 TO \$78,000
- 48-OVER \$78,000 TO \$93,000
- 49-MORE THAN \$93,000
- 50-\$22,000 OR LESS
- 51-OVER \$22,000 TO \$35,000
- 52-OVER \$35,000 TO \$52,000
- 53-OVER \$52,000 TO \$69,000
- 54-OVER \$70,000 TO \$86,000
- 55-OVER \$87,000 TO \$104,000
- 56-MORE THAN \$104,000
- 57-\$24,000 OR LESS
- 58-OVER \$24,000 TO \$38,000
- 59-OVER \$38,000 TO \$57,000
- 60-OVER \$57,000 TO \$76,000
- 61-OVER \$76,000 TO \$95,000
- 62-OVER \$96,000 TO \$114,000
- 63-MORE THAN \$114,000
- 98-DK
- 99-REFUSED

h86a

Your response would really help the survey sponsors understand...Will you tell me about how much income your/[FILL IN]'s family received last year?

- 01-AGREES TO GIVE INCOME
- 02-REFUSE TO GIVE INCOME

h87 Percentage income values

01-LESS THAN 63%
02-63% - 100%
03-101% - 150%
04-151% - 200%
05-201% - 250%
06-251% - 300%
07-301% OR MORE
08-MISSING INFORMATION

h87_imp Poverty level, imputed

(same)

h88 Total number of people in household

h89 Please tell me your/[FILL IN]'s total HOUSEHOLD gross income during the calendar year 2007

01-ENTER YEARLY INCOME
02-ENTER MONTHLY INCOME
98-DK
99-REFUSED

h89_con Let me see if I have this right, earlier I thought you said that your family income was [X] but your household income is [X]. Is this correct, or did I make a mistake?

01-CHANGE RESPONSE TO FAMILY INCOME
02-CHANGE RESPONSE TO HOUSEHOLD INCOME
03-NO CHANGES
99-REFUSED

h89m MONTHLY INCOME

h89y YEARLY INCOME

h90 Is your/[FILL IN]'s total HOUSEHOLD gross income during the calendar year 2007 above or below 46,000 dollars?

01-ABOVE \$46K/YR

02-BELOW \$46K/YR
03-2007 HOUSEHOLD INCOME EQUALS \$46K/YR
98-DK
99-REFUSED

height_a About how tall Are you/is [FILL IN] without shoes? (decimal FEET)

height_c How tall is the child now? (decimal FEET)

hisp_a Adult Hispanic ethnicity

01-HISPANIC
02-NOT HISPANIC
98-DON'T KNOW
99-REFUSED

hisp_c Child Hispanic ethnicity

(same)

hlth3yr Ability to get health care

01-EASIER
02-HARDER
03-STAYED THE SAME
98-DON'T KNOW
99-REFUSED

hlthcr_a Adult - health care rating

01-0-4
02-5-6
03-7-8
04-9-10
97-DON'T KNOW, REFUSED, AND MISSING

hlthcr_c Child - health care rating

(same)

hlthnd_a Getting needed medical care - adult

01-DID NOT GET NEEDED HEALTH CARE
02-RECEIVED NEEDED HEALTH CARE
97-UNKNOWN

hlthnd_c Getting needed medical care - child

(same)

hospvt_a Adult - # of overnight hospital visits

00-0
01-1+
98-DON'T KNOW
99-REFUSED

hospvt_c Child - # of overnight hospital visits

(same)

hpvt_amn Adult - mean # of ovrnght hospital visits

hpvt_cmn Child - mean # of ovrnght hospital visits

hrs_work Work 35 hours or more per week

01-LESS THAN 35 HOURS PER WEEK
02-35 HOURS OR MORE PER WEEK
98-DON'T KNOW
99-REFUSED

i_type_a Adult insurance type

01-MEDICAID AND MEDICARE
02-MEDICAID, NO MEDICARE
03-MEDICARE, NO MEDICAID
04-JOB-BASED COVERAGE
05-DIRECTLY PURCHASED

06-OTHER
07-INSURED TYPE UNKNOWN
08-UNINSURED
97-INSURANCE STATUS UNKNOWN

i_type_c Child insurance type

(same)

i90a Please tell me how old the child was on his or her last birthday.

i90b What is your/[FILL IN]'s relationship to the child?

01-PERSON IS THE CHILD'S MOTHER
02-PERSON IS THE CHILD'S FATHER
03-PERSON IS THE CHILD'S GRANDPARENT
04-PERSON IS THE CHILD'S AUNT/UNCLE
05-PERSON IS THE CHILD'S BROTHER/SISTER
06-PERSON IS THE CHILD'S OTHER RELATIVE
07-PERSON IS THE CHILD'S LEGAL GUARDIAN
08-PERSON IS THE CHILD'S FOSTER PARENT
09-PERSON IS THE CHILD'S OTHER NON-RELATIVE
10-PERSON IS THE CHILD'S STEP-MOTHER
11-PERSON IS THE CHILD'S STEP-FATHER
97-OTHER
98-DK
99-REFUSED

i90c ENTER RELATIONSHIP TO THE CHILD

i91a I would now like to speak to someone IN THIS HOUSEHOLD who BEST KNOWS about the child's health insurance coverage and health status. Is that you, or a different person?

01-DIFFERENT PERSON
02-PERSON ON PHONE IS MOST KNOWLEDGEABLE
98-DK
99-REFUSED

i91c Is [I91B] available?

01-YES
02-NO
66-CHILD PROXY NOT IN HH
98-DK
99-REFUSED

i91d Could you please ask [I91B] to come to the telephone and answer some questions?

01-YES
02-NO
98-DK
99-REFUSED

i92 Hello, my name is, and I am calling on behalf of the State of Ohio Department of Health and Ohio State University. We are conducting an important survey on health insurance coverage...

01-CONTINUE
99-REFUSED

i92_dpo How would you describe your relationship to the child?

i92_dpr1 What is your relationship to the child?

01-PERSON IS THE CHILD'S MOTHER
02-PERSON IS THE CHILD'S FATHER
03-PERSON IS THE CHILD'S GRANDMOTHER
04-PERSON IS THE CHILD'S GRANDFATHER
05-PERSON IS THE CHILD'S AUNT
06-PERSON IS THE CHILD'S UNCLE
07-PERSON IS THE CHILD'S SISTER
08-PERSON IS THE CHILD'S BROTHER
09-PERSON IS THE CHILD'S OTHER FEMALE RELATIVE
10-PERSON IS THE CHILD'S OTHER MALE RELATIVE
11-PERSON IS THE CHILD'S FEMALE LEGAL GUARDIAN
12-PERSON IS THE CHILD'S MALE LEGAL GUARDIAN
13-PERSON IS THE CHILD'S FOSTER MOTHER
14-PERSON IS THE CHILD'S FOSTER FATHER
15-PERSON IS THE CHILD'S OTHER FEMALE NON-RELATIVE

16-PERSON IS THE CHILD'S OTHER MALE NON-RELATIVE
17-PERSON IS THE CHILD'S STEP-MOTHER
18-PERSON IS THE CHILD'S STEP-FATHER
97-OTHER
98-DK
99-REFUSED

i92_dpr3 Please tell me how old you were on your last birthday.

i95 Last week was the child covered by health insurance or some other type of health care plan?

01-YES
02-NO
98-DK
99-REFUSED

i95a Health insurance or some other type of health care plan may include...Keeping this in mind, Last week was the child covered by health insurance or some other type of health care plan?

(same)

ind_naics NAICS Industry type

11-AGRICULTURE
21-MINING
22-UTILITIES
23-CONSTRUCTION
31-MANUFACTURING
42-WHOLESALE
44-RETAIL
48-TRANSPORTATION
51-INFORMATION
52-FINANCE
53-REAL ESTATE
54-PROFESSIONAL AND SCIENTIFIC
55-MANAGEMENT
56-ADMINISTRATIVE & SUPPORT
61-EDUCATION
62-HEALTH CARE
71-ENTERTAINMENT
72-FOOD SERVICES

81-OTHER SERVICES
92-PUBLIC ADMINISTRATION
98-DON'T KNOW
99-REFUSED

ind_sic SIC Industry type

01-A
02-B
03-C
04-D
05-E
06-F
07-G
08-H
09-I
10-J
98-DON'T KNOW
99-REFUSED

indus2 Industry type v2

01-NON-SERVICE
02-SERVICE
98-DON'T KNOW
99-REFUSED

industry Industry type

01-MANUFACTURING
03-TRANSPORTATION
04-CONSTRUCTION
05-PUBLIC ADMINISTRATION
06-FINANCE/INSURANCE/REAL ESTATE
07-RETAIL TRADE
08-WHOLESALE TRADE
09-COMMUNICATIONS & OTHER PUBLIC UTILITIES
10-BUSINESS & REPAIR SERVICES
11-ENTERTAINMENT & RECREATIONAL SERVICES
12-HEALTH SERVICES
13-EDUCATIONAL SERVICES
14-AGRICULTURE, FORESTRY & FISHERIES

15-PERSONAL SERVICES
16-SOCIAL SERVICES
17-OTHER PROFESSIONAL & RELATED SERVICES
18-SERVICES, UNSPECIFIED
19-OTHER
20-INFORMATION
98-DON'T KNOW
99-REFUSED

ins_emp Enrolled in employer plan-whose employer

01-OWN EMPLOYER
02-OTHER EMPLOYER
03-DUAL EMPLOYER
97-UNKNOWN

ins_emp2 Insured by Own Current Employer

01-ENROLLED
02-NOT ENROLLED
97-UNKNOWN

insrd_a Adult Insurance Status

01-YES, INSURED
02-NO, UNINSURED
97-UNKNOWN

insrd_c Child Insurance Status

(same)

intro1 Hello, my name is, and I am calling on behalf of the State of Ohio
Department of Health and Ohio State University...Have I reached you
at (XXX)XXX - XXXX?

01-CORRECT NUMBER (PROCEED TO NEXT QUESTION)
02-NO ANSWER
03-NORMAL BUSY
04-ANSWERING MACHINE
05-SELECTED ON THE PHONE (PROCEED TO NEXT QUESTION)
06-NUMBER IS NOT THE SAME

07-TERMINATION SCREEN
08-HANG UP - BEFORE/DURING INTRO
12-RESPONDENT REFUSED TO TRANSFER TO SELECTED-1X
13-RESPONDENT REFUSED TO TRANSFER TO SELECTED-2X
14-CONTINUE IN SPANISH

intro2 Your telephone number was chosen randomly and all information will be kept strictly confidential. This call may be monitored for quality assurance.

01-AVAILABLE
02-PHYSICAL MENTAL IMPAIRMENT/CHILD
96-NOT AVAILABLE
98-DK
99-REFUSED

introa May I speak with an adult/another adult?

01-ADULT COMING TO TELEPHONE
02-NOT AVAILABLE
99-RESPONDENT REFUSED

inttype Adult or adult/child interview

Adult only interview
Adult and child interview

j100a Is the child covered by a health insurance plan through someone's current or former employer or union?

01-YES, THROUGH CURRENT/FORMER EMPLOYER OR UNION
02-NO, NOT COVERED
98-DK
99-REFUSED

j100b Is the child covered by MEDICARE, the government-funded health insurance plan for people 65 years and older or persons with certain disabilities that includes ...

01-YES
02-NO

98-DK
99-REFUSED

j100bcon Just to confirm, you said that the child is covered by Medicare, the government-funded insurance plan for people 65 years and older or persons with certain disabilities. Is that correct or did I make a mistake?

01-CORRECT, THE CHILD IS COVERED BY MEDICARE
02-INCORRECT, THE CHILD IS NOT COVERED NY MEDICARE
98-DK
99-REFUSED

j100c Is the child covered by MEDICAID, the government health care assistance program or managed health care plan that includes Healthy Families, Healthy Start, ...

01-YES
02-NO
98-DK
99-REFUSED

j100ck To confirm, you said the child is covered by [FILL IN TYPES MENTIONED]. Is that correct?

(same)

j100d Is the child covered by Military or Veterans coverage, such as TRICARE?

(same)

j100e Is the child covered by health insurance purchased directly, that is, a private plan not related to current or past employment?

(same)

j100f Is the child covered by the Bureau for Children with Medical Handicaps (BCMh) or any OTHER state-sponsored or public health insurance program that I have NOT mentioned?

01-YES (SPECIFY)

02-NO
98-DK
99-REFUSED

j100f1 What is the name of that program? (Other)

j100g Does the child have any OTHER health care coverage that I have NOT mentioned? INTERVIEWER: THE FOLLOWING PROGRAMS HAVE BEEN RECORDED: [FILL IN TYPES MENTIONED]

01-YES
02-NO
98-DK
99-REFUSED

j100g1_a What type of coverage is that? (1st Response)

01-MEDICAL, HMO, OR PPO
02-SUPPLEMENTAL
03-DENTAL
04-VISION
05-MENTAL HEALTH
06-CANCER INSURANCE
07-HEARING
08-ACCIDENT, DISABILITY, LIFE, ANY THAT PAYS CASH BENEFITS
09-COBRA
10-COVERED THROUGH WORK
11-COVERED THROUGH SOMEONE ELSE'S WORK
12-SPECIFIC PLAN NAME GIVEN
13-INSURED THROUGH A FAMILY MEMBER
14-STUDENT INSURANCE / THROUGH COLLEGE OR UNIVERSITY
15-MEDICAID
97-OTHER (SPECIFY)
98-DK
99-REFUSED

j100g1_b What type of coverage is that? (2nd Response)

(same)

j100g1_c What type of coverage is that? (3rd Response)

(same)

j100g1a What type of coverage is that? (Other)

j100h Who pays for most of this health insurance plan? Is it you or your family, an employer or union, a state or local government or community program, or someone else?

01-SELF OR FAMILY

02-EMPLOYER OR UNION

03-STATE OR LOCAL GOVERNMENT OR COMMUNITY PROGRAM

04-SOMEONE ELSE

98-DK

99-REFUSED

j104_a Thinking about the child's current health insurance coverage, how would you rate ... the child's choice of doctors using any number from 0 to 10.

00-WORST

01

02

03

04

05

06

07

08

09

10-BEST

98-DK

99-REFUSED

j104agrp Child - doctor's rating

01-0-4

02-5-6

03-7-8

04-9-10

98-DON'T KNOW

99-REFUSED

j104c_a Can you please tell me why it was a big problem for the child to see a specialist? (1st Response)

- 01-NO SPECIALIST NEARBY
- 02-INSURANCE PLAN RESTRICTIONS/RULES
- 03-NO REASON TO GO (NO PROBLEMS)
- 04-HAVE NOT THOUGHT OF IT
- 05-OTHER PRIORITIES
- 06-COST/CAN'T AFFORD CARE/NO INSURANCE
- 07-NO REGULAR PROVIDER
- 08-PROFESSIONAL SAID NOT NEEDED (YET)
- 09-NO CONVENIENT APPOINTMENTS AVAILABLE
- 10-CANNOT GET TO THE OFFICE/CLINIC
- 11-CHILD/ADULT CARE PROBLEM
- 12-FEAR - BAD NEWS
- 13-FEAR - PAIN
- 14-FEAR - EMBARRASSMENT
- 15-FEAR THE PROCEDURE MAY CAUSE OTHER HEALTH PROBLEM
- 97-OTHER REASON
- 98-DK
- 99-REFUSED

j104c_b Can you please tell me why it was a big problem for the child to see a specialist? (2nd Response)

(same)

j104c_c Can you please tell me why it was a big problem for the child to see a specialist? (3rd Response)

(same)

j104c_d Can you please tell me why it was a big problem for the child to see a specialist? (4th Response)

(same)

j104d Can you please tell me why it was a big problem for the child to see a specialist? (Other)

j105a Do any of the child's current insurance plans cover ... Dental care other than emergency care?

01-YES

02-NO

98-DK

99-REFUSED

j105b Do any of the child's current insurance plans cover ... Vision services except emergency care?

(same)

j105c Do any of the child's current insurance plans cover ... Mental health care?

(same)

j105d Do any of the child's current insurance plans cover ... Prescription medications?

(same)

j105e Do any of the child's current insurance plans cover ... Hearing care other than emergency care?

(same)

j105newa Dental care coverage

01-COVERED

02-NOT COVERED

97-UNKNOWN

j105newb Vision service coverage

(same)

j105newc Mental health coverage

(same)

j105newd Prescription med coverage

(same)

j113 How long has the child been covered by his or her current primary health insurance plan?

01-DAYS

02-WEEKS

03-MONTHS

04-YEARS

98-DK

99-REFUSED

j11301 How long has the child been covered by his or her current primary health insurance plan? (DAYS)

j11302 How long has the child been covered by his or her current primary health insurance plan? (WEEKS)

j11303 How long has the child been covered by his or her current primary health insurance plan? (MONTHS)

j11304 How long has the child been covered by his or her current primary health insurance plan? (YEARS)

j113days How long has the child been covered by his or her current primary health insurance plan? (days)

j116 Before the child became covered by his or her current primary plan, was the child covered by any other health insurance plan in the PAST 12 MONTHS?

01-YES

02-NO
98-DK
99-REFUSED

j117 Just prior to the child's current health insurance coverage was the child covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?

(same)

j117a Why does the child no longer have this coverage? (Verbatim)

j117b Just prior to the child's current health insurance coverage, was the child covered by a health insurance plan obtained through someone's employment or union?

(same)

j117c Was the child covered by any other insurance that you or your family paid for completely?

(same)

j120 Was there any time IN THE PAST 12 MONTHS that the child did NOT have health insurance?

(same)

j122 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage?

00-NO MONTHS/WAS INSURED ALL YEAR
01-DAYS
02-WEEKS
03-MONTHS
98-DK
99-REFUSED

j12201 DURING THE PAST 12 MONTHS, how long was the child without health

insurance coverage? (DAYS)

j12202 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (WEEKS)

j12203 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (MONTHS)

j122days DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (days)

j124a_a DURING THE PAST 12 MONTHS, did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? The child have any major medical costs while he or she was uninsured?

01-YES

02-NO

98-DK

99-REFUSED

j124a_b DURING THE PAST 12 MONTHS, did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? Delay or avoid getting care for the child because he or she was uninsured?

(same)

j124a_c DURING THE PAST 12 MONTHS, did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? Have any problems getting the care she needed while he or she was uninsured?

(same)

j124b_a DURING THE PAST 12 MONTHS, did any of the following things happen to the child? Did the child have any major medical costs

(same)

j124b_b DURING THE PAST 12 MONTHS, did any of the following things happen to the child? Did you or your family delay or avoid getting care for the child that you felt he or she needed but could NOT afford

(same)

j124b_c DURING THE PAST 12 MONTHS, did any of the following things happen to the child? Did you or your family have any problems getting needed care for the child?

(same)

j96 Last week, was the child's health insurance coverage the same as your/[FILL IN]'s insurance coverage that you told me about earlier?

(same)

j96a So, the health insurance coverage that the child has is [FILL IN THOSE MENTIONED] and it has the same benefits and covers the same services, and the child does NOT have any other health insurance coverage?

(same)

k100 The last time the child had health insurance, was the child covered by a health insurance plan obtained through someone's employment or union?

(same)

k101 Was the child covered by any other insurance that you or your family paid for completely?

(same)

k102 DURING THE PAST 12 MONTHS how long was the child without health insurance coverage?

01-DAYS

02-WEEKS

03-MONTHS
98-DK
99-REFUSED

k10201 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (DAYS)

k10202 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (WEEKS)

k10203 DURING THE PAST 12 MONTHS, how long was the child without health insurance coverage? (MONTHS)

k102days DURING THE PAST 12 MONTHS how long was the child without health insurance coverage? (days)

k103 When was the last time the child had health care coverage?

00-NEVER HAD HEALTH INSURANCE COVERAGE
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED

k10301 When was the last time the child had health care coverage? (DAYS)

k10302 When was the last time the child had health care coverage? (WEEKS)

k10303 When was the last time the child had health care coverage?
(MONTHS)

k10304 When was the last time the child had health care coverage? (YEARS)

k103days When was the last time the child had health care coverage? (days)

k104 Did anyone try to get Medicaid, Healthy Families, or Healthy Start for the child DURING THE PAST 12 MONTHS.

01-YES

02-NO

98-DK

99-REFUSED

k105 Why was the child unable to get Medicaid, Healthy Families, or Healthy Start?

k106 Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child?

k123 DURING THE PAST 12 MONTHS, what are the reasons the child was uninsured ?

k124a Did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? Did the child have any major medical costs while he or she was uninsured?

01-YES

02-NO

98-DK

99-REFUSED

k124b Did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? Did you or your family delay or avoid getting care for the child because he or she was uninsured?

(same)

k124c Did any of the following things happen to the child while he or she was uninsured DURING THE PAST 12 MONTHS? Did you or your family have any problems getting the care the child needed while he or she was uninsured?

(same)

k4q24 Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care. Since his or her birth/During the past 12 months, did the child see a specialist?

(same)

k4q25 Since his or her birth/During the past 12 months, did you or a doctor think that he/she needed to see a specialist?

(same)

k4q26 Since his or her birth/During the past 12 months, how much of a problem, if any, was it to get the care from the specialists that the child needed? Would you say it was a big problem, small problem, or not a problem?

01-BIG PROBLEM

02-SMALL PROBLEM

03-NOT A PROBLEM

98-DK

99-REFUSED

k96 At any time DURING THE PAST 12 MONTHS, was the child covered by any type of health insurance plan?

01-YES

02-NO

98-DK

99-REFUSED

k97 When was the last time the child had health insurance?

01-DAYS

02-WEEKS

03-MONTHS

04-YEARS

98-DK

99-REFUSED

- k9701 When was the last time the child had health insurance? (DAYS)
- k9702 When was the last time the child had health insurance? (WEEKS)
- k9703 When was the last time the child had health insurance? (MONTHS)
- k9704 When was the last time the child had health insurance? (YEARS)
- k97days When was the last time the child had health insurance? (days)
- k98 Was the child's most recent health insurance coverage the same as your/[FILL IN]'s, that is did the child have the same insurance coverage that you told me about earlier?
- 01-YES
 02-NO
 98-DK
 99-REFUSED
- k98a So, the health insurance coverage that the child had was [FILL IN FROM C3, C4, C5]
- (same)
- k99 The last time the child had insurance, was the child covered by Medicaid, which includes Healthy Families, Healthy Start; or Medicaid waiver programs?
- (same)
- k99a Why does the child no longer have this coverage? (Other)
- k99b Did anyone try to get Medicaid, Healthy Families, or Healthy Start

for the child DURING THE PAST 12 MONTHS?

01-YES

02-NO

98-DK

99-REFUSED

k99c Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (Other)

k99d Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (Other)

l125 In general, how would you describe the child's health? Would you say the child's health is excellent, very good, good, fair, or poor?

01-EXCELLENT

02-VERY GOOD

03-GOOD

04-FAIR

05-POOR

98-DK

99-REFUSED

l125a In general, how would you describe the child's MENTAL health? Would you say the child's health is excellent, very good, good, fair, or poor?

(same)

l125a2k How much does the child weigh now? (KILOGRAMS)

l125a2p How much does the child weigh now? (POUNDS)

l125ac How tall is the child now? (CENTIMETERS)

l125ap How tall is the child now? (FII, where F=FEET and II=INCHES)

l126a Does the child currently need or use medicine prescribed by a doctor other than vitamins?

01-YES

02-NO
98-DK
99-REFUSED

I126b Is the child in need for prescription medicine because of ANY medical, behavioral or other health condition?

(same)

I126c Is this a condition that has lasted or is expected to last 12 months or longer?

(same)

I126d Does the child need or use more medical care, mental health or educational services than is usual for most children of the same age?

(same)

I126e Is the child in need of medical care, mental health or educational services because of ANY medical, behavioral or other health condition?

(same)

I126f Is this a condition that has lasted or is expected to last 12 months or longer?

(same)

I126g Is the child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

(same)

I126h Does the child have any limitation in abilities because of ANY medical, behavioral or other health condition?

(same)

- l126i Is this a condition that has lasted or is expected to last 12 months or longer?

(same)
- l126j Does the child need or get special therapy, such as physical, occupational or speech therapy?

(same)
- l126k Is the child in need for special therapy because of ANY medical, behavioral or other health condition?

(same)
- l126l Is this a condition that has lasted or is expected to last 12 months or longer?

(same)
- l126m Does the child have any kind of emotional, developmental or behavioral problem for which the child needs treatment or counseling?

(same)
- l126n Has the child's emotional, developmental or behavioral problem lasted or is it expected to last 12 months or longer?

(same)
- las10 Compared to other [X YEAR OLD CHILDREN], would you say he or she experiences any difficulty taking care of himself or herself, for example, doing things like eating, dressing and bathing?

(same)
- las11 Compared to other [X YEAR OLD CHILDREN], would you say he or she experiences any difficulty learning, understanding, or paying attention?

(same)

las12 Compared to other [X YEAR OLD CHILDREN], would you say he or she experiences any difficulty speaking, communicating, or being understood?

(same)

las14 About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers?

00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED

las1401 About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers? (DAYS)

las1402 About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers? (WEEKS)

las1403 About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers? (MONTHS)

las1404 About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers? (YEARS)

las14day About how long has it been, if ever, since the child last had his or her eyes examined by any doctor or eye care providers? (days)

las1a Has a doctor or other health professional EVER told you that the child has asthma?

01-YES
02-NO
98-DK
99-REFUSED

- las1b Does the child currently have asthma?

(same)
- las2 Would you describe the child's asthma as mild, moderate, or severe?

01-MILD
02-MODERATE
03-SEVERE
98-DK
99-REFUSED
- las5 Does the child currently have diabetes?

01-YES
02-NO
98-DK
99-REFUSED
- las6 Would you describe the child's diabetes as mild, moderate, or severe?

01-MILD
02-MODERATE
03-SEVERE
98-DK
99-REFUSED
- las7 About how long has it been, if ever, since the child was tested for LEAD, such as from paint?

00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS

98-DK
99-REFUSED

las701 About how long has it been, if ever, since the child was tested for LEAD, such as from paint? (DAYS)

las702 About how long has it been, if ever, since the child was tested for LEAD, such as from paint? (WEEKS)

las703 About how long has it been, if ever, since the child was tested for LEAD, such as from paint? (MONTHS)

las704 About how long has it been, if ever, since the child was tested for LEAD, such as from paint? (YEARS)

las7days About how long has it been, if ever, since the child was tested for LEAD, such as from paint? (days)

las8_a Why was the child tested for lead? (1st Response)

01-HAD HEALTH PROBLEMS
02-CONDITION OF THE HOME, PEELING PAINT
03-MEDICAID REQUIREMENT
04-OTHER
05-DOCTOR SUGGESTED
06-AS PART OF A ROUTINE CHECK-UP
07-SCHOOL TESTED
08-REGIONAL CONSIDERATION
09-WIC REQUIREMENT
10-OPTED TO HAVE THE TEST DONE
98-DK
99-REFUSED

las8_b Why was the child tested for lead? (2nd Response)

(same)

las8_c Why was the child tested for lead? (3rd Response)

(same)

las8oth Why was the child tested for lead? (Other)

las9 Since his/her birth/During the last 12 months, how often have the child's: [FILL IN FROM L126] affected his or her ability to do things other children his or her age do?

01-NEVER
02-SOMETIMES
03-USUALLY
04-ALWAYS
98-DK
99-REFUSED

lastdate Interview date - Last day of calling

lehman Lehman collapse

00-Interview completed on or before September 16, 2008
01-Interview completed after September 16, 2008

m130 Since his/her birth/During the last 12 months, did the child receive a well-child or well-baby checkup - that is, a general checkup when he or she was NOT sick or injured?

01-YES
02-NO
98-DK
99-REFUSED

m131 NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since the child last saw a doctor or other health care professional about (his/her) health?

00-NEVER
01-DAYS

02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED

- m13101 About how long has it been since the child last saw a doctor or other health care professional about (his/her) health? (DAYS)
- m13102 About how long has it been since the child last saw a doctor or other health care professional about (his/her) health? (WEEKS)
- m13103 About how long has it been since the child last saw a doctor or other health care professional about (his/her) health? (MONTHS)
- m13104 About how long has it been since the child last saw a doctor or other health care professional about (his/her) health? (YEARS)
- m131days NOT including overnight hospital stays, visits to hospital emergency rooms, home visits, or telephone calls, about how long has it been since the child last saw a doctor or other health care professional about (his/her) health? (days)
- m131a I want to make sure I have this right, the child has never visited a doctor or any other health care professional in their offices for a routine check-up, physical, or for any reason?
- 01-CORRECT - NEVER BEEN TO A DOCTOR/HEALTH CARE PRO
02-CORRECT - BEEN DOCTOR/HEALTH CARE PRO, BUT NOT OFFICE
98-DK
99-REFUSED
- m132 DURING THE PAST 12 MONTHS, how many times was the child admitted to a hospital for a stay that was OVERNIGHT or longer?

m134 DURING THE PAST 12 MONTHS, how many times was the child a patient in a hospital emergency room, include emergency room visits where he or she was admitted to the hospital?

m135 About how long has it been since the child last visited a dentist. Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists?

- 00-NEVER
- 01-DAYS
- 02-WEEKS
- 03-MONTHS
- 04-YEARS
- 98-DK
- 99-REFUSED

m13501 About how long has it been since the child last visited a dentist. Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists?
(DAYS)

m13502 About how long has it been since the child last visited a dentist. Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists?
(WEEKS)

m13503 About how long has it been since the child last visited a dentist. Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists?
(MONTHS)

m13504 About how long has it been since the child last visited a dentist. Include all types of dentists such as orthodontists, oral surgeons, and all other dental specialists as well as dental hygienists?
(YEARS)

m135a DURING THE PAST 12 MONTHS, did the child see a dentist for preventive dental care, such as check-ups and dental cleanings?

01-YES
02-NO
98-DK
99-REFUSED

m135days About how long has it been since the child last visited a dentist.
Include all types of dentists such as orthodontists, oral surgeons,
and all other dental specialists as well as dental hygienists?
(days)

m136 How would you rate the overall quality of ALL of the HEALTH care
that the child received DURING THE PAST 12 MONTHS, using any number
from 0 to 10?

00-WORST
01
02
03
04
05
06
07
08
09
10-BEST
98-DK
99-REFUSED

major_a Major medical costs - adult

01-OCCURRED
02-DID NOT OCCUR
97-UNKNOWN

major_c Major medical costs - child

(same)

marital Marital status

01-MARRIED
02-DIVORCED/SEPARATED

03-WIDOWED
04-NEVER MARRIED
05-UNMARRIED COUPLE
98-DON'T KNOW
99-REFUSED

masterid Masterid

medicd_a Adult uses medicaid

01-MEDICAID
02-NOT MEDICAID
97-UNKNOWN

medicd_a_ imp Adult Medicaid, imputed

(same)

medicd_c Child uses medicaid

(same)

medicd_c_ imp Child Medicaid, imputed when inttype=2

(same)

n137 Is there ONE place that the child USUALLY goes when he or she is sick or needs advice about his or her health?

01-YES
02-NO
03-YES, VOLUNTEERED THAT THERE IS MORE THAN ONE PLACE
98-DK
99-REFUSED

n137a1 What kind of place is it -- a clinic or health center, doctor's office or HMO, hospital emergency room, hospital outpatient department, or some other place?

01-DOCTOR'S OFFICE OR HMO
02-HOSPITAL EMERGENCY ROOM
03-HOSPITAL OUTPATIENT DEPT
04-CLINIC OR HEALTH CENTER
05-SCHOOL (NURSE'S OFFICE, ATHLETIC TRAINER, ETC)

06-FAMILY MEMBER OR FRIEND
07-SOME OTHER PLACE
08-URGENT CARE
09-DOES NOT GO TO ONE PLACE MOST OFTEN
98-DK
99-REFUSED

n137a2 What kind of place does the child go to most often? Is it a clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

(same)

n137aoth What kind of place does the child go to most often? (Other)

n137b Do you have one or more persons you think of as the child's personal doctor or nurse?

01-YES, ONE PERSON
02-YES, MORE THAN ONE PERSON
03-NO
98-DK
99-REFUSED

n137c During the past 12 months, was there any time the child needed professional help coordinating care or coordinating referrals among different health care providers and services that the child uses?

01-YES
02-NO
98-DK
99-REFUSED

n137chek Just to be sure, is it that there is NO PLACE at all that the child usually goes to when sick or needing advice about health, OR is it that the child goes to more than ONE place?

01-NO PLACE AT ALL
02-MORE THAN ONE PLACE
98-DK

99-REFUSED

n137d During the past 12 months, how often did you get as much help as you wanted with arranging or coordinating the child care? Would you say: Never, Sometimes, Usually, or Always?

01-NEVER

02-SOMETIMES

03-USUALLY

04-ALWAYS

98-DK

99-REFUSED

n137e What is the main reason the child usually goes to the emergency room instead of a doctor's office or clinic? (Verbatim)

n137fo What is the main reason the child does NOT have a usual source of care?

nc27_a DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (1st Response)

01-COST TOO HIGH / TOO EXPENSIVE/COULDN'T AFFORD

02-EMPLOYER COVERAGE - DIDN'T PROVIDE/NOT ELIG./PART-TIME

03-NOT WORKING OR FAMILY MEMBER NOT WORKING OR LOST JOB

04-CHANGE IN [YOUR OWN][FILL IN]'s OR FAMILY MEMBER'S JOB

05-CHANGE IN AGE, MARITAL, OR STUDENT STATUS

06-TURNED DOWN/LOST COVERAGE FOR FOR HEALTH REASONS

07-MAKE TOO MUCH/LOST/TOLD INELIG. FOR PUBLIC ASSISTANCE

08-DON'T NEED IT / IN GOOD HEALTH

09-WAITING TO BECOME ELIGIBLE FOR COVERAGE

10-LOST COVERAGE, OTHER REASONS OR REASONS NOT SPECIFIED

11-SELF EMPLOYED/ NOT ELIGIBLE/PART-TIME (UNSPECIFIED)

12-DIDN'T WANT/ BY CHOICE / NEVER APPLIED/JUST HAVEN'T

97-OTHER (SPECIFY)

98-DON'T KNOW

99-REFUSED

nc27_b DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (2nd Response)

(same)

nc27_c DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (3rd Response)

(same)

nc27_d DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (4th Response)

(same)

nc27_e DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (5th Response)

(same)

nc27_f DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (6th Response)

(same)

nc27oth DURING THE PAST 12 MONTHS, what are the reasons you were/[FILL IN] was uninsured? (Other)

nd32g1_a What other kind of assistance do you/does [FILL IN] currently need BECAUSE OF THE HEALTH PROBLEM(S) that you told me about? (1st Response)

01-WALKING, TRANSFERRING TO A WHEELCHAIR, OTHER MOVEMENT

97-OTHER (SPECIFY)

98-DON'T KNOW

99-REFUSED

nd32g1_b What other kind of assistance do you/does [FILL IN] currently need BECAUSE OF THE HEALTH PROBLEM(S) that you told me about? (2nd Response)

(same)

nd32g1o What other kind of assistance do you/does [FILL IN] currently need

BECAUSE OF THE HEALTH PROBLEM(S) that you told me about? (Other)

f67a_a What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

01-CLINIC OR HEALTH CENTER
02-DOCTOR'S OFFICE OR HMO
03-HOSPITAL EMERGENCY ROOM
04-HOSPITAL OUTPATIENT DEPT
05-MILITARY HOSPITAL
06-DOES NOT GO TO ONE PLACE MOST OFTEN
07-USE BOOKS/INTERNET/HOTLINE
08-HOSPITAL (UNSPECIFIED)
09-URGENT CARE
10-FAMILY MEMBER OF FRIEND
97-SOME OTHER PLACE
98-DK
99-REFUSED

f67a_b What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

(same)

f67a_c What kind of place is it? A clinic or health center, a doctor's office or HMO, a hospital emergency room, a hospital outpatient department, or some other place?

(same)

nf67bo What is the MAIN reason you/[FILL IN] usually go/goes to the emergency room instead of a doctor's office or clinic? (Other)

nf67c What is the MAIN reason you do/[FILL IN] does NOT have a usual source of care?

01-SELDOM OR NEVER GET SICK
02-DON'T KNOW WHERE TO GO FOR CARE
03-PREVIOUS DOCTOR/SOURCE NO LONGER AVAILABLE
04-LIKE DIFFERENT PLACES FOR DIFFERENT HEALTH NEEDS

- 05-JUST CHANGED INSURANCE PLANS
- 06-DON'T USE OR LIKE DOCTORS/TREAT MYSELF
- 07-COST/TOO EXPENSIVE
- 08-NO INSURANCE
- 09-USE BOOKS/INTERNET/HOTLINE (GET NEEDED INFO FROM)
- 97-OTHER
- 98-DON'T KNOW
- 99-REFUSED

nf67co What is the MAIN reason you do/[FILL IN] does NOT have a usual source of care? (Other)

nf68a_a What was the MAIN reason you/[FILL IN] could not get dental care?

- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
- 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03-COULDN'T FIND DENTIST
- 04-DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06-DENTIST/SOMEONE BESIDES INSURER SD CARE WASN'T NEEDED
- 07-TRANSPORTATION
- 08-MEDICALLY UNABLE TO MAKE THE APPOINTMENT
- 97-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

nf68a_b What was the MAIN reason you/[FILL IN] could not get dental care?
(same)

nf68a_c What was the MAIN reason you/[FILL IN] could not get dental care?
(same)

nf68ao What was the MAIN reason you/[FILL IN] could not get dental care?
(Other)

nf68d_a What was the health care that you/[FILL IN] needed but did NOT get? (1st Response)

- 01-A DOCTOR VISIT, CHECKUP, OR EXAM
- 02-MENTAL HEALTH CARE (COUNSELING)

- 03-EYEGASSES OR VISION CARE (CATARACTS, OPHTHALMOLOGIST)
- 04-MEDICAL SUPPLIES OR EQUIP
- 05-APPOINTMENT OR REFERRAL TO A SPECIALIST
- 06-DENTAL
- 07-OTHER MEDICAL TREATMENT
- 08-MEDICATIONS/PRESCRIPTIONS (PATCHES, PILLS, SHOTS)
- 09-CARE FOR OTHER AILMENT OR BODY PART
- 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97-OTHER
- 98-DK
- 99-REFUSED

nf68d_b What was the health care that you/[FILL IN] needed but did NOT get? (2nd Response)

(same)

nf68d_c What was the health care that you/[FILL IN] needed but did NOT get? (3rd Response)

(same)

nf68d_d What was the health care that you/[FILL IN] needed but did NOT get? (4th Response)

(same)

nf68d_e What was the health care that you/[FILL IN] needed but did NOT get? (5th Response)

(same)

nf68d_f What was the health care that you/[FILL IN] needed but did NOT get? (6th Response)

(same)

nf68d_g What was the health care that you/[FILL IN] needed but did NOT get? (7th Response)

(same)

- nf68d_h What was the health care that you/[FILL IN] needed but did NOT get? (8th Response)
- (same)
- nf68do What was the health care that you/[FILL IN] needed but did NOT get? (Other)
- nf68e01a What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]?
- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
 03-COULDN'T FIND DOCTOR OR DENTIST
 04-DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
 06-DOCTOR/DENTIST/SOMEONE BESIDES INSURER SD CARE NOT NEEDED
 07-TRANSPORTATION
 08-DIDN'T HAVE THE TIME / TOO BUSY
 09-CHOSE NOT/DIDN'T FEEL LIKE IT/DIDN'T THINK WAS IMPORTANT
 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
 97-OTHER
 98-DK
 99-REFUSED
- nf68e01b What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]?
- (same)
- nf68e01c What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]?
- (same)
- nf68e01o What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]? (Other)
- nf68e02 What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]?

- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
- 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03-COULDN'T FIND DOCTOR OR DENTIST
- 04-DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06-DOCTOR/DENTIST/SOMEONE BESIDES INSURER SD CARE NOT NEEDED
- 07-TRANSPORTATION
- 08-DIDN'T HAVE THE TIME / TOO BUSY
- 09-CHOSE NOT/DIDN'T FEEL LIKE IT/DIDN'T THINK WAS IMPORTANT
- 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97-OTHER
- 98-DK
- 99-REFUSED

nf68e02o What was the MAIN reason you/[FILL IN] did not get [FILL IN FROM NF68D]? (Other)

ng73b What kind of business or industry do you/does [FILL IN] primarily work in?

- 110-AGRICULTURE, FORESTRY, FISHING, & HUNTING
- 210-MINING, QUARRYING, OIL & GAS EXTRACTION
- 220-UTILITIES
- 230-CONSTRUCTION
- 310-MANUFACTURING
- 420-WHOLESALE TRADE
- 440-RETAIL TRADE
- 480-TRANSPORTATION & WAREHOUSING
- 510-INFORMATION
- 520-FINANCE & INSURANCE
- 530-REAL ESTATE & RENTAL & LEASING
- 540-PROFESSIONAL/SCIENTIFIC/TECHNICAL SERV
- 550-MANAGEMENT OF COMPANIES & ENTERPRISES
- 560-ADMINISTRATIVE/SUPPORT/WASTE MANAGEMENT/REMEDIATION
- 610-EDUCATIONAL SERVICES
- 620-HEALTH CARE/SOCIAL ASSISTANCE
- 710-ARTS, ENTERTAINMENT, & RECREATION
- 720-ACCOMMODATION AND FOOD SERVICES
- 810-OTHER SERVICES
- 920-PUBLIC ADMINISTRATION
- 997-OTHER MENTION

998-DK
999-REFUSED

ng73b_o What kind of business or industry do you/does [FILL IN] primarily work in? (Other)

nj100f1 What is the name of that program?

01-BUREAU FOR CHILDREN WITH MEDICAL HANDICAPS (BCMh)
02-MEDICAID
97-OTHER (SPECIFY)
98-DK
99-REFUSED

nj117a_a Why does the child no longer have this coverage? (1st Response)

01-EARN TOO MUCH MONEY (SUCH AS NEW JOB THAT PAYS MORE)
02-OBTAINED OTHER COVERAGE
03-DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF
04-NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED
05-NOT SURE WHY
06-DO NOT NEED ANYMORE
07-DO NOT WANT TO GO THROUGH APPLICATION PROCESS AGAIN
08-DO NOT NEED ANYMORE - IN GOOD HEALTH
09-WAITING TO BECOME ELIGIBLE FOR COVERAGE
10-NO LONGER QUALIFY - OTHER REASON
11-PAPERWORK DELAY OR PROBLEMS
97-OTHER (SPECIFY)
98-DK
99-REFUSED

nj117a_b Why does the child no longer have this coverage? (2nd Response)

(same)

nj117a_c Why does the child no longer have this coverage? (3rd Response)

(same)

nj117a_d Why does the child no longer have this coverage? (4th Response)

(same)

nk105_a Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (1st Response)

01-FAMILY MAKES TOO MUCH MONEY/ASSETS TOO HIGH/SPEND DOWN
02-ALREADY HAVE INSURANCE
03-PARENT WORKING
04-APPLICATION IN PROCESS/WAITING FOR APPLICATION
05-APPLICATION DENIED/REFUSED/DIDN'T QUALIFY
97-OTHER
98-DK
99-REFUSED

nk105_b Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (2nd Response)

(same)

nk105_c Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (3rd Response)

(same)

nk105_d Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (4th Response)

(same)

nk106_a Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (1st Response)

01-CHILD ALREADY HAS INSURANCE
02-CHILD DOES NOT NEED THE COVERAGE
03-FAMILY MAKES TOO MUCH MONEY TO QUALIFY
04-DIDN'T THINK CHILD WAS ELIGIBLE OR QUALIFIED
05-DIDN'T KNOW ABOUT IT/NEVER HEARD OF IT
06-APPLICATION PROCESS TOO INVOLVED/HASSLE/TOO INTRUSIVE
07-CHILD WAS PREVIOUSLY TURNED DOWN
08-APPLICATION IN PROCESS
09-DIDN'T WANT GOVERNMENT ASSISTANCE
97-OTHER (SPECIFY)

98-DK
99-REFUSED

nk106_b Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (2nd Response)

(same)

nk106_c Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (3rd Response)

(same)

nk106_d Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (4th Response)

(same)

nk123_a DURING THE PAST 12 MONTHS, what are the reasons the child was uninsured? (1st Response)

01-COST TOO HIGH / TOO EXPENSIVE/COULDN'T AFFORD
02-EMPLOYER COVERAGE - DIDN'T PROVIDE/NOT ELIG./PART-TIME
03-NOT WORKING OR FAMILY MEMBER NOT WORKING OR LOST JOB
04-CHANGE IN [YOUR OWN][FILL IN]'s OR FAMILY MEMBER'S JOB
05-CHANGE IN AGE, MARITAL, OR STUDENT STATUS
06-TURNED DOWN/LOST COVERAGE FOR HEALTH REASONS
07-MAKE TOO MUCH MONEY/LOST-INELIG. FOR PUBLIC ASSISTANCE
08-DON'T NEED IT / IN GOOD HEALTH
09-WAITING TO BECOME ELIGIBLE FOR COVERAGE
10-LOST COVERAGE, OTHER REASONS OR REASONS NOT SPECIFIED
11-SELF EMPLOYED/ NOT ELIGIBLE/PART-TIME (UNSPECIFIED)
12-DIDN'T WANT/ BY CHOICE / NEVER APPLIED/JUST HAVEN'T
13-CHILD NOT BORN YET / LESS THAN ONE YEAR OLD
97-OTHER
98-DK
99-REFUSED

nk123_b DURING THE PAST 12 MONTHS, what are the reasons the child was uninsured? (2nd Response)

(same)

nk123_c DURING THE PAST 12 MONTHS, what are the reasons the child was uninsured? (3rd Response)

(same)

nk123_d DURING THE PAST 12 MONTHS, what are the reasons the child was uninsured? (4th Response)

(same)

nk99a_a Why does the child no longer have this coverage? (1st Response)

01-EARN TOO MUCH MONEY

02-OBTAINED OTHER COVERAGE

03-DO NOT RECEIVE WELFARE/CASH ASSISTANCE/ADC/TANF

04-NO LONGER DISABLED OR DO NOT QUALIFY AS DISABLED

05-NOT SURE WHY

06-DO NOT NEED ANYMORE

07-DO NOT WANT TO GO THROUGH APPLICATION PROCESS AGAIN

08-DO NOT NEED ANYMORE - IN GOOD HEALTH

09-WAITING TO BECOME ELIGIBLE FOR COVERAGE

10-NO LONGER QUALIFY - OTHER REASON

11-PAPERWORK DELAY OR PROBLEMS

97-OTHER (SPECIFY)

98-DK

99-REFUSED

nk99a_b Why does the child no longer have this coverage? (2nd Response)

(same)

nk99a_c Why does the child no longer have this coverage? (3rd Response)

(same)

nk99a_d Why does the child no longer have this coverage? (4th Response)

(same)

nk99c_a Why was the child unable to get Medicaid, Healthy Families, or

Healthy Start? (1st Response)

- 01-FAMILY MAKES TOO MUCH MONEY/ASSETS TOO HIGH/SPEND DOWN
- 02-ALREADY HAVE INSURANCE
- 03-PARENT WORKING
- 04-APPLICATION IN PROCESS
- 97-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

nk99c_b Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (2nd Response)

(same)

nk99c_c Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (3rd Response)

(same)

nk99c_d Why was the child unable to get Medicaid, Healthy Families, or Healthy Start? (4th Response)

(same)

nk99d_a Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (1st Response)

- 01-CHILD ALREADY HAS INSURANCE
- 02-CHILD DOES NOT NEED THE COVERAGE
- 03-FAMILY MAKES TOO MUCH MONEY TO QUALIFY
- 04-DIDN'T THINK CHILD WAS ELIGIBLE OR QUALIFIED
- 05-DIDN'T KNOW ABOUT IT/NEVER HEARD OF IT
- 06-APPLICATION PROCESS TOO INVOLVED/HASSLE/TOO INTRUSIVE
- 07-CHILD WAS PREVIOUSLY TURNED DOWN
- 08-ANTICIPATE OBTAINING MORE COVERAGE/FINDING ANOTHER JOB
- 97-OTHER (SPECIFY)
- 98-DK
- 99-REFUSED

nk99d_b Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (2nd Response)

(same)

nk99d_c Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (3rd Response)

(same)

nk99d_d Why didn't anyone try to get Medicaid, Healthy Families, or Healthy Start coverage for the child? (4th Response)

(same)

nn137e_a What is the MAIN reason the child usually goes to the emergency room instead of a doctor's office or clinic?

01-CAN'T AFFORD ELSEWHERE/THEY DON'T TURN ANYONE AWAY
02-DIDN'T KNOW WHERE ELSE TO GO
03-CONVENIENCE/DON'T NEED AN APPOINTMENT
04-BEST PLACE TO GET CARE FOR CONDITION
05-PREFERS/LIKES THIS AS USUAL SOURCE
06-NO REGULAR DOCTOR
97-OTHER
98-DK
99-REFUSED

nn137e_b What is the MAIN reason the child usually goes to the emergency room instead of a doctor's office or clinic?

(same)

nn137e_c What is the MAIN reason the child usually goes to the emergency room instead of a doctor's office or clinic?

(same)

nn137f What is the MAIN reason the child does NOT have a usual source of care?

01-SELDOM OR NEVER GET SICK

- 02-DON'T KNOW WHERE TO GO FOR CARE
- 03-PREVIOUS DOCTOR/SOURCE NO LONGER AVAILABLE
- 04-LIKE DIFFERENT PLACES FOR DIFFERENT HEALTH NEEDS
- 05-JUST CHANGED INSURANCE PLANS
- 06-DON'T USE OR LIKE DOCTORS/TREAT MYSELF
- 07-COST/TOO EXPENSIVE
- 08-NO INSURANCE
- 09-BOOKS/INTERNET/HOTLINE (GET NEEDED INFO FROM)
- 97-OTHER
- 98-DK
- 99-REFUSED

no139 What was the MAIN reason the child could not get dental care?

- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
- 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03-COULDN'T FIND DENTIST
- 04-DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06-DENTIST/SOMEONE BESIDES INSURER SD CARE WASN'T NEEDED
- 07-TRANSPORTATION
- 97-OTHER
- 98-DK
- 99-REFUSED

no142a_a What was the health care that the child needed but did NOT get?
(1st Response)

- 01-A DOCTOR VISIT, CHECKUP, OR EXAM
- 02-MENTAL HEALTH CARE (COUNSELING)
- 03-EYEGASSES OR VISION CARE (CATARACTS, OPHTHALMOLOGIST)
- 04-MEDICAL SUPPLIES OR EQUIP
- 05-APPOINTMENT OR REFERRAL TO A SPECIALIST
- 06-DENTAL
- 07-OTHER MEDICAL TREATMENT
- 08-MEDICATIONS/PRESCRIPTIONS (PATCHES, PILLS, SHOTS)
- 09-CARE FOR OTHER AILMENT OR BODYPART
- 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97-OTHER
- 98-DK
- 99-REFUSED

no142a_b What was the health care that the child needed but did NOT get?

(2nd Response)

(same)

no142a_c What was the health care that the child needed but did NOT get?
(3rd Response)

(same)

no142a_d What was the health care that the child needed but did NOT get?
(4th Response)

(same)

no14301 What was the MAIN reason you/[FILL IN] did not get [FILL IN 1ST
RESPONSE FROM NO142A]?

- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
- 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03-COULDN'T FIND DOCTOR OR DENTIST
- 04-DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD
- 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06-DOCTOR/DENTIST/SOMEONE BESIDES INSURER SD CARE NOT NEEDED
- 07-TRANSPORTATION
- 08-DIDN'T HAVE THE TIME / TOO BUSY
- 09-CHOSE NOT/DIDN'T FEEL LIKE IT/DIDN'T THINK WAS IMPORTANT
- 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97-OTHER
- 98-DK
- 99-REFUSED

no14301o What was the MAIN reason you/[FILL IN] did not get [FILL IN 1ST
RESPONSE FROM NO142A]? (Other)

no14302 What was the MAIN reason you/[FILL IN] did not get [FILL IN 2ND
RESPONSE FROM NO142A]?

- 01-TOO EXPENSIVE/COULDN'T AFFORD IT
- 02-NO INSURANCE/INSURANCE DIDN'T COVER CARE
- 03-COULDN'T FIND DOCTOR OR DENTIST
- 04-DOCTOR OR DENTIST WOULDN'T ACCEPT MEDICAL CARD

- 05-DIFFICULTY OR DELAY IN GETTING AN APPOINTMENT
- 06-DOCTOR/DENTIST/SOMEONE BESIDES INSURER SD CARE NOT NEEDED
- 07-TRANSPORTATION
- 08-DIDN'T HAVE THE TIME / TOO BUSY
- 09-CHOSE NOT/DIDN'T FEEL LIKE IT/DIDN'T THINK WAS IMPORTANT
- 96-NO MORE HEALTHCARE NEEDED BUT DIDN'T GET
- 97-OTHER
- 98-DK
- 99-REFUSED

no14302o What was the MAIN reason you/[FILL IN] did not get [FILL IN 2ND RESPONSE FROM NO142A]? (Other)

np156 What is the MAIN reason that you/[FILL IN] did NOT have telephone service at your/[FILL IN]'s household DURING THE PAST 12 MONTHS?

- 01-DISCONNECTED BECAUSE OF NONPAYMENT OF BILL
- 02-COULDN'T AFFORD ONE
- 03-MOVED & WAITING FOR SERVICE TO START
- 04-HOMELESS OR LIVING IN A TEMPORARY RESIDENCE OR SHELTER
- 05-IN A CONFINED ENVIRONMENT (JAIL, HOSPITAL)
- 06-TEMPORARY OUTAGE DUE TO WEATHER
- 07-TEMPORARY OUTAGE DUE TO KNOCKING DOWN OR DAMAGING LINES
- 08-OUT OF COUNTRY / NOT AT HOME FOR TIME PERIOD
- 09-OTHER PHONE COMPANY PROBLEMS
- 10-HAVE CELL PHONE
- 11-SWITCHED PHONE COMPANIES/ SERVICES/NUMBER
- 12-DIDN'T WANT/NEED/ VOLUNTARILY TURNED OFF
- 97-OTHER
- 98-DK
- 99-REFUSED

np156o What is the MAIN reason that you/[FILL IN] did NOT have telephone service at your/[FILL IN]'s household DURING THE PAST 12 MONTHS? (Verbatim)

nq157 Is your/[FILL IN]'s place of residence/home built before the year 1950?

- 01-YES
- 02-NO

98-DON'T KNOW

99-REFUSED

o139 DURING THE PAST 12 MONTHS, was there a time when the child needed dental care but could NOT get it at that time?

01-YES

02-NO

98-DK

99-REFUSED

o139spec DURING THE PAST 12 MONTHS, was there a time when the child needed dental care but could NOT get it at that time? (Other)

o140 In the PAST 12 MONTHS, has the child NOT had a prescription filled because of the cost?

01-YES

02-NO

03-VOLUNTEERED: NO, NEVER HAD A PRESCRIPTION

98-DK

99-REFUSED

o141 DURING THE PAST 12 MONTHS, was there any time when the child did NOT get any other health care that he or she needed, such as a medical exam, medical supplies, mental health care, or eyeglasses?

01-YES

02-NO

98-DK

99-REFUSED

o142a What was the health care that the child needed but did NOT get?

o144 Compared with 3 years ago, is getting the medical care the child needs becoming easier, harder, or has it stayed the same?

01-EASIER

02-HARDER

03-STAYED THE SAME

98-DK

99-REFUSED

otprob_a Other problems getting treatment - adult

01-HAD PROBLEMS

02-NO PROBLEMS

97-UNKNOWN

otprob_c Other problems getting treatment - child

(same)

p148 What is the child's gender?

01-MALE

02-FEMALE

p149 Is the child of Hispanic or Latino origin?

01-YES

02-NO

98-DK

99-REFUSED

p150_a Which one or more of the following would you say is the child's race? (1st Response)

01-WHITE

02-BLACK OR AFRICAN AMERICAN

03-ASIAN

04-NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE

05-NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

06-HISPANIC, LATINO, SPANISH

97-OTHER

98-DK

99-REFUSED

p150_b Which one or more of the following would you say is the child's race? (2nd Response)

(same)

p150_c Which one or more of the following would you say is the child's race? (3rd Response)

(same)

p150_d Which one or more of the following would you say is the child's race? (4th Response)

(same)

p150a Which of these groups, that is would you say best represents the child's race?

- 01-WHITE
- 02-BLACK OR AFRICAN AMERICAN
- 03-ASIAN
- 04-NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE
- 05-NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 06-HISPANIC, LATINO, O SPANISH
- 97-\:P1500:
- 98-DK
- 99-REFUSED

p150b Do you consider the child to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

- 01-WHITE HISPANIC
- 02-BLACK OR AFRICAN AMERICAN HISPANIC
- 03-ASIAN HISPANIC
- 04-NATIVE AMERICAN, AMERICAN INDIAN, OR AK NATIVE HISPANIC
- 05-NATIVE HAWAIIAN OR PACIFIC ISLANDER HISPANIC
- 97-OTHER RACE HISPANIC
- 98-DON'T KNOW
- 99-REFUSES TO DISCRIMINATE

p150bo Do you consider the child to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic? (Other)
Which one or more of the following would you say is the child's

p150o

race? (Other)

p151

You may have mentioned this already, but are either of the child's parents employed?

01-YES

02-NO

98-DK

99-REFUSED

par1

Would you be able to answer just 3 to 5 of the most important questions before we end?

01-CONTINUE

99-REFUSED TO CONTINUE

par2

Would you be able to answer just 2 to 4 of the most important questions before we end?

(same)

par3

Would you be able to answer just one of the most important questions before we end?

(same)

par4

Would you be able to answer just one of the most important questions before we end?

(same)

par5

Would you be able to answer just one of the most important questions before we end?

(same)

partial
pb4g1a

Partial flag
INTERVIEWER: ENTER TYPE OF COVERAGE

01-GIVEN NAME

98-DK

99-REFUSED

- pb7a How would you describe your/[FILL IN]'s primary health insurance plan?
- (same)
- pd31eye1 About how long has it been, if ever, since you/[FILL IN] had your/[FILL IN]'s eyes examined by any doctor or eye care providers?
- 00-NEVER
01-DAYS
02-WEEKS
03-MONTHS
04-YEARS
98-DK
99-REFUSED
- pd34c INTERVIEWER: RECORD THE TIME PERIOD RESPONDENT NEEDS THESE HOURS OF ASSISTANCE.
- 01-GIVEN TIME PERIOD
98-DK
99-REFUSED
- pf67a_o What kind of place do you/does [FILL IN] go to most often? (Other)
- 01-GIVEN NAME
98-DK
99-REFUSED
- pf67c What is the main reason you do/[FILL IN] does NOT have a usual source of care?
- 01-GIVEN REASON
98-DK
99-REFUSED
- pf67g Why was it a problem for you/[FILL IN] to see a specialist?
- (same)
- pi90 Earlier you said there was one child in your/[FILL IN]'s family. What is that child's 1st name, nickname, or initials?

01-GIVEN CHILD'S NAME
66-REFUSED TO CONTINUE, NO TIME
98-DK
99-REFUSED TO GIVE NAME

pi90c How would you describe your/[FILL IN]'s relationship to the child?

01-GIVEN RELATIONSHIP
98-DK
99-REFUSED

pi91b What is that person's 1st name?

01-GIVEN NAME
98-DK
99-REFUSED

pj100g1a INTERVIEWER: RECORD OTHER TYPE OF INSURANCE.

01-GAVE RESPONSE
98-DK
99-REFUSED

pj104d Why was it a problem for the child to see a specialist?

01-GIVEN REASON
98-DK
99-REFUSED

pl125a1 How tall is the child now?

01-ANSWERED IN FEET/INCHES
02-ANSWERED IN CENTIMETERS
98-DK
99-REFUSED

pl125a2 How much does the child weigh now?

01-ANSWERED IN POUNDS
02-ANSWERED IN KILOGRAMS
98-DK
99-REFUSED

pn137ao What kind of place does the child go to most often?

01-GAVE RESPONSE

98-DK

99-REFUSED

po139spc What was the main reason the child could not get dental care?

(same)

post1 THE FOLLOWING QUESTIONS ARE FOR YOU - THE INTERVIEWER TO ANSWER.
INTERVIEWER: OVERALL, HOW WOULD YOU RATE THIS INTERVIEW EXPERIENCE?

01-POOR

02-FAIR

03-GOOD

04-VERY GOOD

05-EXCELLENT

post2 INTERVIEWER: HOW WOULD YOU (THE INTERVIEWER) RATE THE QUALITY OF
THE INFORMATION OBTAINED IN THIS INTERVIEW? PLEASE REMEMBER THAT WE
ARE CONCERNED ABOUT THE ACCURACY OF THE DATA, NOT THE DIFFICULTY OF
OBTAINING THE INTERVIEW.

01-POOR (EXTREME NUMBER OF PROBLEMS)

02-FAIR (MANY PROBLEMS, OVERALL QUALITY OPEN TO QUESTION)

03-GOOD (SOME PROBLEMS, OVERALL QUALITY WAS GOOD)

04-VERY GOOD (FEW PROBLEMS, OVERALL QUALITY WAS GOOD)

05-EXCELLENT (NO PROBLEMS AT ALL)

post3_a INTERVIEWER: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION
WAS LESS THAN EXCELLENT? (1st RESPONSE)

01-INTERVIEW NOT IN RESPONDENT'S NATIVE LANGUAGE

02-HEARING (HEARING LOSS OR BACKGROUND NOISE)

03-INTERRUPTIONS OR DISTRACTIONS

04-POOR PHONE CONNECTION

05-LACK OF MENTAL OR PHYSICAL COMPETENCY TO RESPOND

06-INFIRM OR ILL

07-INTOXICATION

08-RESPONDENT WAS RUSHED

09-RESPONDENT DID NOT TAKE INTERVIEW SERIOUSLY

10-RESP. DID NOT UNDERSTAND THE MEANING OF SOME QUESTIONS
11-RESPONDENT MAY NOT BEEN TRUTHFUL-SOMEONE ELSE LISTENING
12-RESPONDENT WAS OFFENDED BY INTERVIEW
13-RESPONDENT REFUSED QUESTIONS
14-ELDERLY
15-TOOK TOO LONG / TIRING
97-OTHER (SPECIFY)

post3_b INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (2nd RESPONSE)

(same)

post3_c INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (3rd RESPONSE)

(same)

post3_d INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (4th RESPONSE)

(same)

post3_e INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (5th RESPONSE)

(same)

post3_f INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (6th RESPONSE)

(same)

post3_g INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (7th RESPONSE)

(same)

post3_h INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (8th RESPONSE)

(same)

post3o INTERVIEWE: WHAT WERE THE REASONS THAT THE QUALITY OF INFORMATION WAS LESS THAN EXCELLENT? (Other)

post4 LANGUAGE INTERVIEW CONDUCTED IN

01-ENGLISH
02-SPANISH

poverty Income as a % of Poverty

01-100% OR LESS
02-101%-150%
03-151%-200%
04-201%-300%
05-301% OR MORE
97-UNKNOWN

pp150 How would you describe the child's race?

01-GIVEN RESPONSE
98-DK
99-REFUSED

pp150bo How would you describe the child's race?

01-GIVEN RESPONSE
02-ANSWERED HISPANIC, LATINO, OR SPANISH
98-DK
99-REFUSED

pre72a1 Who does the employer or union offer coverage to?

01-GIVEN RESPONSE
98-DK
99-REFUSED

pre72c1 Why Are you/Is [FILL IN] not participating in your/his/her employer or union health insurance plan?

(same)

pre72d1 Why Are you/Is [FILL IN] not eligible?

(same)

preg71b How would you describe where you/[FILL IN] work/works?

01-GIVEN DESCRIPTION
98-DK
99-REFUSED

prior_a Adult - previous insurance type

01-MEDICAID
02-EMPLOYER/UNION
03-DIRECT PURCHASE
04-OTHER
97-UNKNOWN

prior_c Child - previous insurance type

(same)

ps First, have I reached you at a residential household, such as an apartment, a house, or a mobile home?

01-YES, RESIDENTIAL HOUSEHOLD
02-NO, NON-RESIDENCE
98-DK
99-REFUSED

ps17a How would you describe your/[FILL IN]'s race?

01-GIVEN RESPONSE
98-DK
99-REFUSED

ps18a How would you describe your/[FILL IN]'s race?

01-GIVEN RESPONSE
02-ANSWERED HISPANIC, LATINO, OR SPANISH
98-DK
99-REFUSED

ps91 INTERVIEWER RECORD THE COUNTY NAME HERE --- ASK FOR SPELLING IF NECESSARY.

- 01-GIVEN COUNTY
- 02-RESPONDENT VOLUNTEERS COUNTY NOT IN OH
- 98-DK
- 99-REFUSED

ps9a In what city or town do you/does [FILL IN] live?

- 01-GIVEN CITY OR TOWN
- 98-DK
- 99-REFUSED

q153 We have a few questions about the general characteristics of your/[FILL IN]'s household. INCLUDING THIS PHONE NUMBER, how many telephone numbers are there in your/[FILL IN]'s house that are primarily for NON-business use?

q154 Is this telephone line the main line into your/[FILL IN]'s home?

- 01-YES
- 02-NO
- 98-DK
- 99-REFUSED

q155 At any time, DURING THE PAST 12 MONTHS, has your/[FILL IN]'s household been without telephone service for 24 hours or more?

(same)

q156 For how long did you/[FILL IN] NOT have telephone service DURING THE PAST 12 MONTHS?

- 01-DAYS
- 02-WEEKS
- 03-MONTHS
- 98-DK
- 99-REFUSED

q15601 For how long did you/[FILL IN] NOT have telephone service DURING THE PAST 12 MONTHS? (DAYS)

q15602 For how long did you/[FILL IN] NOT have telephone service DURING THE PAST 12 MONTHS? (WEEKS)

q15603 For how long did you/[FILL IN] NOT have telephone service DURING THE PAST 12 MONTHS? (MONTHS)

q156days For how long did you/[FILL IN] NOT have telephone service DURING THE PAST 12 MONTHS? (days)

r1 The next questions are about violence, that is, when someone physically hurts you on purpose. This is a sensitive topic. Some people may feel uncomfortable with these questions...Are you in a safe place to answer these questions?

01-YES

02-NO

98-DK

99-REFUSED

r2 DURING THE PAST 12 MONTHS, how many times, if any, has anyone hit, slapped, pushed, kicked or physically hurt you?

r3_a Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (1st Response)

01-STRANGER

02-COWORKER

03-PROFESSIONAL CARETAKER (E.G., HOME HEALTH AIDE)

04-MALE/FEMALE 1st DATE

05-SOMEONE YOU WERE DATING

06-FORMER BOYFRIEND/GIRLFRIEND

07-CURRENT BOYFRIEND/GIRLFRIEND OR FIANCE

08-SPOUSE OR LIVE-IN PARTNER

09-FORMER SPOUSE OR LIVE-IN PARTNER

10-S/HE IS MY CHILD

11-S/HE IS MY STEPCHILD

12-ANOTHER FAMILY MEMBER (INCLUDING IN-LAWS)

13-ACQUAINTANCE/FRIEND (NON-INTIMATE)
97-OTHER (SPECIFY)
98-DK
99-REFUSED

r3_b Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (2nd RESPONSE)

(same)

r3_c Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (3rd RESPONSE)

(same)

r3_d Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (4th RESPONSE)

(same)

r3_e Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (5th RESPONSE)

(same)

r3_f Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (6th RESPONSE)

(same)

r3_g Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (7th RESPONSE)

(same)

r3_h Think about the time of the most recent incident involving a

person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (8th RESPONSE)

(same)

r3_i Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (9th RESPONSE)

(same)

r3_j Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (10th RESPONSE)

(same)

r3_k Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (11th RESPONSE)

(same)

r3_l Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (12th RESPONSE)

(same)

r3_m Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (13th RESPONSE)

(same)

r3_n Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (14th

RESPONSE)

(same)

r3o Think about the time of the most recent incident involving a person or persons who hit, slapped, pushed, kicked or physically hurt you. What was that persons relationship to you? (Other)

r4_1 Did THE MOST RECENT INCIDENT result in your seeking help from A DOCTOR OR NURSE?

01-YES

02-NO

98-DK

99-REFUSED

r4_2 Did THE MOST RECENT INCIDENT result in your seeking help from A MENTAL HEALTH PROFESSIONAL, COUNSELOR OR SOCIAL WORKER?

(same)

r4_3 Did THE MOST RECENT INCIDENT result in your seeking help from ANOTHER HEALTH CARE PROFESSIONAL

(same)

r4_4 Did THE MOST RECENT INCIDENT result in your seeking help from FAMILY OR FRIEND

(same)

r4_5 Did THE MOST RECENT INCIDENT result in your seeking help from EMPLOYER/ EMPLOYEE ASSISTANCE PROGRAM?

(same)

r4_6 Did THE MOST RECENT INCIDENT result in your seeking help from HOT LINE OR HELP LINE?

(same)

race_a Adult's Race

 01-WHITE
 02-BLACK/AFRICAN AMERICAN
 03-ASIAN
 04-OTHER
 98-DON'T KNOW
 99-REFUSED

race_c Child's Race

 (same)

race4_a_i mp Race-ethnicity adult, 4 categories, imputed

 01-WHITE/OTHER
 02-BLACK/AFRICAN AMERICAN
 03-HISPANIC
 04-ASIAN

race4_c_i mp Race-ethnicity child, 4 categories, imputed when inttype=2

 (same)

region Region

 Appalachian
 Metropolitan
 Rural Non-Appalachian
 Suburban

relate_a Relationship of proxy to respondent

 01-SPOUSE/PARTNER
 02-PARENT
 03-CHILD
 04-GRANDPARENT
 05-AUNT/UNCLE
 06-BROTHER/SISTER
 07-OTHER RELATIVE

08-LEGAL GUARDIAN
09-FOSTER PARENT OR OTHER NON RELATIVE
10-OTHER NON-RELATIVE
97-OTHER
98-DON'T KNOW
99-REFUSED

relate_c Relationship of child to proxy

01-PARENT
02-GRANDPARENT
03-AUNT/UNCLE
04-BROTHER/SISTER
05-OTHER RELATIVE
06-LEGAL GUARDIAN
07-FOSTER PARENT OR OTHER NON RELATIVE
08-STEP-MOTHER/STEP-FATHER
97-OTHER
98-DON'T KNOW
99-REFUSED

s1 Now, I would like to identify the adult currently living in your household, 18 or older, who had the most recent birthday. WHO WOULD THAT BE?

01-SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
02-NOT SPEAKING TO ADULT WITH MOST RECENT BIRTHDAY
03-DOES NOT KNOW HOUSEHOLD MEMBERS BIRTHDAYS
96-THERE ARE NO ADULTS 18 OR OVER IN HOUSEHOLD
98-DK
99-REFUSED

s10 I need to randomly select one adult who lives in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

s10a Are you the adult?

01-YES
02-NO
98-DK

99-REFUSED

s10c Just to confirm, you said that there are no adults, 18 years of age or older in your household?

(same)

s11 Including yourself/[FILL IN], how many adult members of your/his/her family, age 18 and over, live in this household? Here, I am using the legal definition of FAMILY in the State of Ohio.

s11_imp Number of adults in the family, imputed

s11b Let me see if I have this right, earlier I had recorded [X] adults living in the household, but now I recorded that there were [X] adults in the household? Is this correct, or did I make a mistake?

01-CHANGE NUMBER OF ADULTS IN HOUSEHOLD

02-CHANGE NUMBER OF ADULTS IN FAMILY

03-NO CHANGES

99-REFUSED

s12 How many children, persons 17 years of age or younger, live in this household whether they are family members or not?

s13 How many children, persons 17 years of age or younger, in your/his/her family live in this household?

s13_imp Number of children in the family, imputed

s13a I thought you just told me that there were [X] total children in the household and [X] children in the household who are family members. Is this correct, or did I make a mistake?

01-CHANGE NUMBER OF CHILDREN IN HOUSEHOLD

02-CHANGE NUMBER OF CHILDREN IN FAMILY

03-NO CHANGES

99-REFUSED

s14 Please tell me how old you were/[FILL IN] was on your/his/her last

birthday.

s14a On your/[FILL IN]'s last birthday would you say that you were/[FILL IN] ... ?

01-18-24
02-25-34
03-35-44
04-45-54
05-55-64
06-65 OR OLDER
98-DK
99-REFUSED

s15 I'm required to ask your/[FILL IN]'s gender. Are you/Is [FILL IN] male or female?

01-MALE
02-FEMALE
99-REFUSED

s15_imp Gender, imputed

(same)

s16 Are you/Is [FILL IN] of Hispanic or Latino origin?

01-YES
02-NO
98-DK
99-REFUSED

s17_a Which one or more of the following would you say is your/[FILL IN]'s race? (1st Response)

01-WHITE
02-BLACK OR AFRICAN AMERICAN
03-ASIAN
04-NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE
05-NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
06-HISPANIC, LATINO, SPANISH
97-OTHER

98-DK
99-REFUSED

s17_b Which one or more of the following would you say is your/[FILL IN]'s race? (2nd Response)

(same)

s17_c Which one or more of the following would you say is your/[FILL IN]'s race? (3rd Response)

(same)

s17_d Which one or more of the following would you say is your/[FILL IN]'s race? (4th Response)

(same)

s17_e Which one or more of the following would you say is your/[FILL IN]'s race? (5th Response)

(same)

s17_f Which one or more of the following would you say is your/[FILL IN]'s race? (6th Response)

(same)

s17_g Which one or more of the following would you say is your/[FILL IN]'s race? (7th Response)

(same)

s17a How would you describe your/[FILL IN]'s race? (Other Specify)

s17b Which of these groups would you say best represents your/[FILL IN]'s race? (Single Response)

01-WHITE
02-BLACK OR AFRICAN AMERICAN
03-ASIAN

04-NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE
05-NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
97-VERBATIM RESPONSE PROVIDED IN S17A
98-DK
99-REFUSED

s18 Do you consider yourself/[FILL IN] to be White Hispanic, Black Hispanic, Asian Hispanic, Native American Hispanic, Pacific Islander Hispanic, or some other race and Hispanic?

01-WHITE HISPANIC
02-BLACK OR AFRICAN AMERICAN HISPANIC
03-ASIAN HISPANIC
04-NATIVE AMERICAN, AMERICAN INDIAN, OR AK NATIVE HISPANIC
05-NATIVE HAWAIIAN OR PACIFIC ISLANDER HISPANIC
97-OTHER RACE HISPANIC
98-DON'T KNOW
99-REFUSES TO DISCRIMINATE

s18a ENTER OTHER HISPANIC RACE.

s1a May I speak to someone who knows about the household member's birthdays?

01-RESPONDENT COMING TO THE TELEPHONE
99-REFUSED

s2a Is [FILL IN] available now?

01-AVAILABLE
02-NOT AVAILABLE
03-SELECTED RESPONDENT IS PHYSICALLY OR MENTALLY IMPAIRED
98-DK
99-REFUSED

s2a1 Could you please ask [FILL IN] to come to the telephone and answer some questions?

01-YES
02-NOT AVAILABLE/ARRANGE CALLBACK

03-SELECTED RESPONDENT IS PHYSICALLY OR MENTALLY IMPAIRED
98-DK/ARRANGE CALLBACK
99-REFUSED/ARRANGE CALLBACK

s2b Do you know about [FILL IN]'s health insurance?

01-YES
02-NO
98-DK
99-REFUSED

s2c What is your relationship to [FILL IN]?

01-YOU ARE [FILL IN]'S WIFE/FEMALE PARTNER
02-YOU ARE [FILL IN]'S HUSBAND/MALE PARTNER
03-YOU ARE [FILL IN]'S MOTHER
04-YOU ARE [FILL IN]'S FATHER
05-YOU ARE [FILL IN]'S DAUGHTER
06-YOU ARE [FILL IN]'S SON
07-YOU ARE [FILL IN]'S GRANDMOTHER
08-YOU ARE [FILL IN]'S GRANDFATHER
09-YOU ARE [FILL IN]'S AUNT
10-YOU ARE [FILL IN]'S UNCLE
11-YOU ARE [FILL IN]'S SISTER
12-YOU ARE [FILL IN]'S BROTHER
13-YOU ARE [FILL IN]'S OTHER FEMALE RELATIVE
14-YOU ARE [FILL IN]'S OTHER MALE RELATIVE
15-YOU ARE [FILL IN]'S FEMALE LEGAL GUARDIAN
16-YOU ARE [FILL IN]'S MALE LEGAL GUARDIAN
17-YOU ARE [FILL IN]'S FOSTER MOTHER
18-YOU ARE [FILL IN]'S FOSTER FATHER
19-YOU ARE [FILL IN]'S OTHER FEMALE NON-RELATIVE
20-YOU ARE [FILL IN]'S OTHER MALE NON-RELATIVE
97-OTHER
98-DK
99-REFUSED

s2coth How would you describe your relationship to [FILL IN]?

- s4 Who could I speak to that knows about [FILL IN]'s insurance?
- 01-OTHER AVAILABLE
02-NOT AVAILABLE
98-DK
99-REFUSED
- s4a Could you please ask [FILL IN] to come to the telephone and answer some questions?
- 01-YES
02-NO
98-DK
99-REFUSED
- s5 Hello, my name is, and I am calling on behalf of the State of Ohio Department of Health and Ohio State University...This call may be monitored for quality assurance.
- 01-AVAILABLE
02-NOT ABLE TO PARTICIPATE AT THIS TIME
98-DK
99-REFUSED
- s8 How long have you/has [FILL IN] lived in Ohio? Has it been less than a month, more than a month but less than 12, a year, more than a year but less than 5, or 5 or more years?
- 01-LESS THAN 1 MONTH
02-MORE THAN 1 MONTH BUT LESS THAN 12 MONTHS
03-1 YEAR
04-MORE THAN 1 YEAR BUT LESS THAN 5 YEARS
05-5 OR MORE YEARS
98-DK
99-REFUSED
- s9 In what county in the State of OH do you/does [FILL IN] live?
- 001-ADAMS
003-ALLEN

005-ASHLAND
007-ASHTABULA
009-ATHENS
011-AUGLAIZE
013-BELMONT
015-BROWN
017-BUTLER
019-CARROLL
021-CHAMPAIGN
023-CLARK
025-CLERMONT
027-CLINTON
029-COLUMBIANA
031-COSHOCTON
033-CRAWFORD
035-CUYAHOGA
037-DARKE
039-DEFIANCE
041-DELAWARE
043-ERIE
045-FAIRFIELD
047-FAYETTE
049-FRANKLIN
051-FULTON
053-GALLIA
055-GEAUGA
057-GREENE
059-GUERNSEY
061-HAMILTON
063-HANCOCK
065-HARDIN
067-HARRISON
069-HENRY
071-HIGHLAND
073-HOCKING
075-HOLMES
077-HURON
079-JACKSON
081-JEFFERSON
083-KNOX
085-LAKE
087-LAWRENCE
089-LICKING

091-LOGAN
093-LORAIN
095-LUCAS
097-MADISON
099-MAHONING
101-MARION
103-MEDINA
105-MEIGS
107-MERCER
109-MIAMI
111-MONROE
113-MONTGOMERY
115-MORGAN
117-MORROW
119-MUSKINGUM
121-NOBLE
123-OTTAWA
125-PAULDING
127-PERRY
129-PICKAWAY
131-PIKE
133-PORTAGE
135-PREBLE
137-PUTNAM
139-RICHLAND
141-ROSS
143-SANDUSKY
145-SCIOTO
147-SENECA
149-SHELBY
151-STARK
153-SUMMIT
155-TRUMBULL
157-TUSCARAWAS
159-UNION
161-VAN WERT
163-VINTON
165-WARREN
167-WASHINGTON
169-WAYNE
171-WILLIAMS
173-WOOD
175-WYANDOT

997-OTHER
998-DK
999-REFUSED

s9_new In what county in the State of OH do you/does [FILL IN] live?
(corrected version of S9 (supercedes S9))

(same)

s91 INTERVIEWER RECORD THE COUNTY NAME HERE --- ASK FOR SPELLING IF
NECESSARY.

s9a In what city or town do you/does [FILL IN] live?

s9b What is your/[FILL IN]'s zip code?

scell1 We realize that we are contacting people on their cell phones.
Your safety is important to me. Are you driving a car or operating
another motor vehicle right now?

01-YES
02-NO
98-DK
99-REFUSED

scell2 Are you in a location where talking on the phone could jeopardize
your safety or confidentiality?

(same)

scell3 Are you 18 years of age or older?

(same)

scell4 Are you a resident of Ohio?

(same)

scell5 As I mentioned earlier, I am calling on behalf of the State of

Ohio Department of Health and Ohio State University...This call may be monitored for quality assurance.

01-PERSON AVAILABLE

02-PERSON PHYSICALLY-MENTALLY IMPAIRED, CANNOT RESPOND

10-CALL BACK DIFFERENT NUMBER

96-NOT SAFE TO TALK AT THIS POINT

99-REFUSED

scell6 First, do you live in a residential household, such as an apartment, a house, or a mobile home?

01-YES

02-NO

98-DK

99-REFUSED

scell7 How long have you/has [FILL IN] lived in Ohio? Has it been less than a month, more than a month but less than 12, a year, more than a year but less than 5, or five or more years?

01-LESS THAN 1 MONTH

02-MORE THAN 1 MONTH BUT LESS THAN 12 MONTHS

03-1 YEAR

04-MORE THAN 1 YEAR BUT LESS THAN 5 YEARS

05-5 OR MORE YEARS

06-DOES NOT LIVE IN OHIO

98-DK

99-REFUSED

shcn_a Adults w/ or w/o special health care needs

01-HAS SHCN

02-DOES NOT HAVE SHCN

97-UNKNOWN

shcn_c Children w/ or w/o special health care needs

(same)

spec_a Adult -needing specialist care

01-NEEDED SPECIALIST
02-DID NOT NEED SPECIALIST
97-UNKNOWN

spec_c Child - needing specialist care

(same)

specp_a Adult - problem seeing a specialist

01-BIG PROBLEM
02-SMALL PROBLEM
03-NOT A PROBLEM
97-UNKNOWN

specp_c Child - problem seeing a specialist

(same)

sprx1 Before I start asking about [FILL IN], I need to ask about your relationship to [FILL IN] and your age. What is your relationship to [FILL IN]?

01-YOU ARE [FILL IN]'S WIFE/FEMALE PARTNER
02-YOU ARE [FILL IN]'S HUSBAND/MALE PARTNER
03-YOU ARE [FILL IN]'S MOTHER
04-YOU ARE [FILL IN]'S FATHER
05-YOU ARE [FILL IN]'S DAUGHTER
06-YOU ARE [FILL IN]'S SON
07-YOU ARE [FILL IN]'S GRANDMOTHER
08-YOU ARE [FILL IN]'S GRANDFATHER
09-YOU ARE [FILL IN]'S AUNT
10-YOU ARE [FILL IN]'S UNCLE
11-YOU ARE [FILL IN]'S SISTER
12-YOU ARE [FILL IN]'S BROTHER
13-YOU ARE [FILL IN]'S OTHER FEMALE RELATIVE
14-YOU ARE [FILL IN]'S OTHER MALE RELATIVE
15-YOU ARE [FILL IN]'S FEMALE LEGAL GUARDIAN
16-YOU ARE [FILL IN]'S MALE LEGAL GUARDIAN

17-YOU ARE [FILL IN]'S FOSTER MOTHER
18-YOU ARE [FILL IN]'S FOSTER FATHER
19-YOU ARE [FILL IN]'S OTHER FEMALE NON-RELATIVE
20-YOU ARE [FILL IN]'S OTHER MALE NON-RELATIVE
97-OTHER
98-DK
99-REFUSED

sprx1o How would you describe your relationship to [FILL IN]?

sprx2 Please tell me how old you were on your last birthday.

strata Design stratum for variance computations

001 Adams
003 Allen
005 Ashland
007 Ashtabula
009 Athens
011 Auglaize
013 Belmont
015 Brown
017 Butler
019 Carroll
021 Champaign
023 Clark
025 Clermont
027 Clinton
029 Columbiana
031 Coshocton
033 Crawford
035 Cuyahoga
035 Cuyahoga - Low
035 Cuyahoga - Medium
035 Cuyahoga - High
037 Darke
039 Defiance
041 Delaware
043 Erie
045 Fairfield
047 Fayette

049 Franklin
049 Franklin - Low
049 Franklin - Medium
049 Franklin - High
051 Fulton
053 Gallia
055 Geauga
057 Greene
059 Guernsey
061 Hamilton
061 Hamilton - Low
061 Hamilton - Medium
061 Hamilton - High
063 Hancock
065 Hardin
067 Harrison
069 Henry
071 Highland
073 Hocking
075 Holmes
077 Huron
079 Jackson
081 Jefferson
083 Knox
085 Lake
087 Lawrence
089 Licking
091 Logan
093 Lorain
095 Lucas
095 Lucas - Low
095 Lucas - Medium
095 Lucas - High
097 Madison
099 Mahoning
101 Marion
103 Medina
105 Meigs
107 Mercer
109 Miami
111 Monroe
113 Montgomery
113 Montgomery - Low

113 Montgomery - Medium
113 Montgomery - High
115 Morgan
117 Morrow
119 Muskingum
121 Noble
123 Ottawa
125 Paulding
127 Perry
129 Pickaway
131 Pike
133 Portage
135 Preble
137 Putnam
139 Richland
141 Ross
143 Sandusky
145 Scioto
147 Seneca
149 Shelby
151 Stark
153 Summit
153 Summit - Low
153 Summit - Medium
153 Summit - High
155 Trumbull
157 Tuscarawas
159 Union
161 Van Wert
163 Vinton
165 Warren
167 Washington
169 Wayne
171 Williams
173 Wood
175 Wyandot
Asian surname sample
Cellphone sample
Hispanic surname sample

stratum Numeric variable stratum for variance estimation

(same)

study_cat Study category

tract Census tract

uninsd_a Length of time uninsured, Adult

00-NEVER HAD INSURANCE
01-1-3 MONTHS AGO
02-4-6 MONTHS AGO
03-6-12 MONTHS AGO
04-1-2 YEARS AGO
05-2-3 YEARS AGO
06-3+ YEARS AGO
98-DON'T KNOW
99-REFUSED

uninsd_c Length of time uninsured, Child

(same)

usual_a Usual source of care - adult

01-USUAL SOURCE OF CARE
02-NO USUAL PLACE
97-UNKNOWN

usual_c Usual source of care - child

(same)

weight_a About how much do you/does [FILL IN] weigh without shoes? (POUNDS)

weight_c How much does the child weigh now? (POUNDS)

wt_a Final adult weight

wt_c Final child weight

APPENDIX K: CONFIDENTIALITY AGREEMENT

Statement of Policy

Macro International is firmly committed to the principle that the confidentiality of individual data obtained through Macro International surveys must be protected. This principal holds whether or not any specific guarantee of confidentiality was given at the time of interview (or self-response), or whether or not there are specific contractual obligations regarding confidentiality have been entered into, they may impose additional requirements which are to be adhered to strictly.

Procedures for maintaining Confidentiality

1. All Macro International employees and field workers shall sign this assurance of confidentiality. This assurance may be suspended by another assurance for a particular project.
2. Field workers shall keep completely confidential the names of respondents, all information or opinions collected in the course of interviews, and any information about respondents learned incidentally during fieldwork. Field workers shall exercise reasonable caution to prevent access by others to survey data in their possession.
3. Unless specifically instructed otherwise for a particular project, an employee or files worker, upon encountering a respondent or information pertaining to a respondent that s/he knows personally, shall immediately terminate the activity and contact her/his supervisor for instructions.
4. Survey data containing personal identifiers in Macro International offices shall be kept in a locked container or a locked room when not being used each working day in routine survey activities. Reasonable caution shall be exercised in limiting access to survey data to only those persons who are working on the specific project and who have been instructed in the application confidentiality requirements for that project. Where survey data has been determined to be particularly sensitive by the Corporate Officer in charge of the project or the President of Macro International, such survey data shall be kept in locked containers or in a locked room except when actually being used and attended by a staff member who has signed this pledge.
5. Ordinarily, serial numbers shall be assigned to respondents prior to creating a machine-processible record and identifiers such as name, address, and social security number shall not, ordinarily, be a part of the machine record. When identifiers are part of the machine data record, Macro International's Manager of Data Processing shall be responsible for determining adequate confidentiality measures in consultation with the project director. When a separate file is set up containing identifiers or linkage information, which could be used to identify data records, this separate file shall be kept locked up when not actually being used each day in routine survey activities.
6. When records with identifiers are to be transmitted to another party, such as for keypunching or key taping, the other party shall be informed of these procedures and shall sign an Assurance of Confidentiality form.
7. Each project director shall be responsible for ensuring that all personnel and contractors involved in handling survey data on a project are instructed in these procedures, have signed this pledge and comply with these procedures throughout the period of survey performance. When there are specific contractual obligations to the client regarding confidentiality, the project director shall develop additional procedures to comply with the project in these additional procedures. At the end of the period of survey performance, the project director shall arrange for proper storage or disposal of survey data including any particular contractual requirements for storage or disposition. When required to turn over survey data to our clients, we must provide proper safeguards to ensure confidentiality up to the time of delivery.
8. Project directors shall ensure that survey practices adhere to the provisions of the US Privacy Act of 1974 with regards to surveys of individuals for the Federal Governments. Project directors must ensure that procedures are established in each survey to inform each respondent of the authority for the survey, the purpose and use of the survey, the voluntary nature of the study (where applicable) and the effects of the respondents if any, of not responding.

PLEDGE

I hereby certify that I have carefully read and understand the aforementioned policies and procedures and will cooperate fully with them. I will keep completely confidential all information arising from surveys concerning individual respondents to which I gain access. I will not discuss, disclose, disseminate, or provide access to survey data and identifiers except as authorized by Macro International. In addition, I will comply with any additional procedures established by Macro International for a particular contract. I will devote my best efforts to ensure that there is compliance with the required procedures established by Macro International for a particular contract. I understand that violation of the privacy rights of individuals through such unauthorized discussion, disclosure, dissemination, or access may make me subject to criminal or civil penalties. I give my personal pledge that I shall abide by this assurance of confidentiality.

Print Name (Clearly Please)

Signature

Witness Signature

____/____/2009

Date

____/____/2009

Date

Please return this form to your supervisor after reviewing and signing.

APPENDIX L: DATA DICTIONARY / CODE BOOK AND RECORD LAYOUT

Notation:

Type	Location	Date*
A=Addition C=Change D=Deletion	H=Help Screen N=Interviewers' Note O=Question Order P=Programmer's Note Q=Question (incl. Wording) R=Response List (incl. Item) S=Skip Pattern T=Transition Statement V=Verification Screen	-8/12/08

**Date is included only for changes taking place during the fielding period.*

Example:

A(Q)	Question Added
A(T)	Transition Statement Added
A(N)	Interviewers' Note Added
C(S,Q)	Change in Skip pattern and Question Wording
C(O)	Change in Question Order
C(R)-8/12/03	Change in Response List applied on 8/12/03
D(Q)	Question Deleted

Variable Name	Questionnaire Changes		
	Cognitive Interview → Pre-test	Pre-test → Final	Final → Fielding period*
SCREENER- OVERSAMPLE			
Intro1	C(Q)	C(Q)	
Intro2	C(Q, S)		
Introa			
S			A(N); C(Q) – 8/8/2008
S10			
S10a			
S10b			
S10c			
S1	C(Q)		
S1int			
S1a		C(Q)	
S2	D(Q)		
S2a			
S2a.1			
S2b	C(S)		
S2bb	C(S)		
S2c	C(S)		
S2coth	A(Q)		

S2cage	A(Q)		
S3	D(Q)		
S4			
S4int			
S4a	C(Q)		
S5	C(Q)		
Pre S8	C(Q)		
SPRX1	A(Q)		
SPRX2	A(Q)		
S16	C(O)		
S17	C(O, S)		
S17a	C(O)		
S17b	C(O)		
S18	C(O)		
S18a	C(O)		
S8	C(O)		A(N) – 8/17/2008
S9	C(O)		
S9.1	C(O)		
S9a	C(O)		
S9b	C(O)		
S11	C(O)	C(Q, N)	
S11b	C(O)		
S12	C(O)	C(N)	
S13	C(O)	C(N)	
S13a	C(O, S)		
Pre S14	D(Q)		
S14	C(O)		
S14a	C(O)		
S15	C(O)		
ANS_1	A(Q)	C(Q)	
SCREENER – MAIN SAMPLE			
Intro1	C(Q)	C(Q)	
Intro2	C(Q)		
Introa			
S			A(N); C(Q) – 8/8/2008
S10			
S10a			
S10b			
S10c			
S1	C(Q)		
S1int			
S1a		C(Q)	
S2	D(Q)		
S2a			
S2a.1			
S2b	C(S)		
S2bb	C(S)		
S2c	C(S)		
S2coth	A(Q)		
S2cage	A(Q)		
S3	D(Q)		
S4			

S4int			
S4a	C(Q)		
S5	C(Q)		
Pre S8	C(Q)		
SPRX1	A(Q)		
SPRX2	A(Q)		
S8			A(N) – 8/17/2008
S9			
S9.1			
S9a			
S9b			
S11	C(P)	C(Q, N)	
S11b			
S12		C(N)	
S13		C(N)	
S13a	C(S)		
Pre S14			
S14	C(O)		
S14a			
S15	C(O)		
S16			
S17	C(S)		
S17a			
S17b			
S18			
S18a			
ANS_1	A(Q)	C(Q)	
SCREENER – CELL PHONE SAMPLE			
Intro1	A(Q); C(Q)		
Scell1	A(Q)		
Scell2	A(Q)		
Scell3	A(Q)		
Scell4	A(Q)		
Scell5	A(Q)		
Scell6	A(Q)		
Scell7	A(Q)		
S9			
S9.1			
S9a			
S9b			
S10			
S11	C(P)	C(N)	
S11b			
S12		C(N)	
S13		C(N)	
S13a			
S14			
S14a			
S15			
S1int			
S16			
S17			

S17a			
S17b			
S18			
S18a			
SECTION A: CURRENT INSURANCE STATUS			
Pre A1			
A1			
A1a			
SECTION B: CURRENTLY INSURED ADULT			
Pre B4A			
B4A			C(N) - 8/26/2008
B4Aa			
B4Aa1			
B4Ab			
B4B		C(Q)	
B4Ba	D(Q)		
B4Bb	D(Q)		
B4Bb1a	D(Q)		
B4b2	D(Q)		
B4Bb3	A(Q, N)		
B4B_CON	A(Q)		
B4Bc			
B4BCAGE	C(O)		C(H) - 8/28/2008
B4C	C(R)	C(Q)	C(H,Q) - 8/28/2008; C(Q) - 8/26/2008
B4D			
B4E			
B4F	D(Q)		
B4F1	D(Q)		
B4F1a	D(Q)		
B4G			C(Q) - 9/3/2008
B4G1	C(P)		
B4G1a			
B4G2	D(Q)		
B4H			
B4H1	D(Q)		
B4CHK	C(S)		
B7			
B7a			
B8a	A(Q)	C(N)	C(H) - 8/28/2008
B8a2	A(V)		C(Q) - 8/26/2008
B8b			
B8b1	A(Q)		
B9a			C(Q) - 8/17/2008
B9b	D(Q)		
B9c	D(Q)		
B9d	D(Q)		
B10a			C(N) - 9/3/2008
B10b			C(N) - 9/3/2008
B10c			C(N) - 9/3/2008 C(H) - 8/17/2008
B10d			C(N) - 9/3/2008

B18	C(S)		C(H) – 8/28/2008
B19	C(S)		
B20			
B20a	C(R)		C(N) – 8/17/2008 C(Q) – 8/26/2008
B21			
B22	C(S)		
B25	C(S)		
B27	A(Q)		C(H) – 8/28/2008
B28	D(Q)		
B29a			
B29b	C(S)		
SECTION C: CURRENTLY UNINSURED ADULTS			
C1	C(S)		
C2			
C3			
C3a			C(N)
C4			
C5			
C6			C(H) – 8/28/2008
C26			C(Q) – 8/8/2008 C(H) – 8/28/2008
NC27	A(Q)	C(S)	
C28	A(Q)	C(Q)	
C29	D(Q)		
SECTION D: ADULT HEALTH STATUS, TOBACCO USE, AND CARE GIVING			
PRED30			
D30			
D30a1	A(Q)		
D30a2	A(Q)		
D30h	A(Q)		
D30i	A(Q); C(Q)		A(N) – 8/26/2008 A(N) – 8/28/2008
D31	A(Q); C(S)		
D31a			
D31b			
D31c	C(S)		
D31d	C(S)		
D31e			
D31f			
D31g			
D31h			
D31i		C(N)	
D31j			
D31k			
D31l			
D31m			
D31n	A(Q)		
D32	A(Q); C(S)		
PD32G1	A(Q)		
ND32G1	A(Q)	C(S)	
ND32G10	A(Q)		

D34	A(Q)		C(N) – 8/28/2008
D35	A(Q)		
PRE D37	D(Q)		
D37	D(Q)		
D37G1	D(Q)		
D38	D(Q)		
D38a	D(Q)		
D38b	D(Q)		
D38c	D(Q)		
PRE D39	D(Q)		
D39	D(Q)		
D40	D(Q)		
D41	A(Q); C(Q)		
D41a	A(Q); C(Q)	A(N)	
D41b	A(Q); C(Q)	D(N)	
D41c	A(Q); C(Q)	D(N)	
D41d	A(Q); C(Q)		
D42	D(Q)		
D43	A(Q)		
D43a	A(Q); C(P)		C(Q) – 8/8/2008
D43b	A(Q)		
D44		C(Q)	
D44c	D(Q)		
D45	C(S, Q)		
D45a	A(Q); C(S)		C(S) – 8/11/2008
D45b	A(Q)		
D46	A(Q)	C(Q)	A(N) – 8/26/2008
D46a	A(Q)		A(N) – 8/26/2008
D47	A(Q)		
D47a	A(Q); C(S)		
D47b	A(Q); C(S)		
D30a	A(Q)		
D30b	A(Q); C(Q)	A(N)	C(Q) – 10/06/2008
D49	D(Q)		
D50	D(Q)		
D51	D(Q)		
D53	D(Q)		
PRED54	D(Q)		
D54	D(Q)		
D55	D(Q)		
D56	D(Q)		
D56ver	D(Q)		
D57	D(Q)		
D58	D(Q)		
SECTION E: UTILIZATION AND QUALITY OF ADULT HEALTH CARE SERVICES			
PRE5E9			
E59	C(Q)		C(H) – 8/28/2008
E59.1			
E59A		C(Q)	C(Q) – 8/11/2008 C(Q) – 8/17/2008 C(H) – 8/28/2008

E59_CON	A(V); C(S)		
E60		C(Q); A(N)	C(R) – 8/8/2008 C(N) – 8/28/2008
E60A	D(Q)		
E62			C(R) – 8/8/2008 C(Q) – 8/26/2008 C(S) – 8/27/2008 C(N) – 8/28/2008
E62A	D(Q)		
E62B			C(Q) – 8/8/2008 C(N) – 8/28/2008 C(H) – 9/3/2008
D31eye1	C(S, O)		C(N) – 8/28/2008
D31eye2	C(S, O)		
D31eye2o	C(S, O)		
E63	C(Q, H)		C(N) – 8/28/2008
E63A	D(Q)		
E63B	D(Q)		
E64	C(S, P)		
E64A	D(Q)		
E65	A(Q); C(S)		
E65a	A(Q); C(S)		
E65b	A(Q); C(S)		
E65b_1	A(Q); C(S)		
E65c	A(Q); C(S, R)		
SECTION F: ACCESS TO CARE AND UNMET NEEDS OF ADULTS			
F67			C(Q, R) – 8/28/2008
F67.1			
NF67C	A(Q); C(R)		
NF67CO	A(Q)		
F67A	C(O); A(R)	C(S)	C(Q) – 8/8/2008
F67A.0	A(P)		
NF67b	A(Q, P); C(R)	C(Q)	
NF67bo	A(Q)		
F67c1	A(Q, R, N)	C(S)	
F67a1	C(O, Q); A(S, R)		
F67A2	C(S)		
F67A3	C(R)	C(Q)	
F67B	D(Q)		
F67C	D(Q)		
F67d	C(S)		A(H) – 8/8/2008 A(N) – 8/28/2008
F67e	C(Q)		A(N) – 8/11/2008
F67f	C(R)	C(Q, R)	
F67g			
F68			
F68a	D(Q)		
Nf68a	A(Q); C(R)		
NF68ao	A(Q)		
F68b			
F68c			
F68d	D(Q)		
NF68d	A(Q); C(R)		

NF68do	A(Q)		
F68e	D(Q)		
NF68e01	A(Q); C(R)		
NF68e01o	A(Q)		
NF68e02	A(Q);C(R)		
NF68e02o	A(Q)		
F69		C(Q)	
F70	A(Q); C(Q)	C(Q)	
F70b1	A(Q)		
F70b2	A(Q)		
F70b3	A(Q)		
SECTION G: EMPLOYMENT			
G71			
G71a		A(N)	
G71b		A(N)	
G72		A(N)	
G72a		A(N); C(Q)	
G72a.1	C(R)	A(N)	
G72b		A(N)	
G72c		A(N)	
G72c.1		A(N)	
G72d		A(N)	
G72d.1		A(N)	
G73		A(N); C(S)	
G73a		A(N)	
G73b_1	D(Q)	A(N)	
NG73b_1	A(Q)		
NG73b_1o	A(Q)		
NG73b_1a	A(Q)		
NG73b_1b	A(Q)		
NG73b_1c	A(Q)		
G73c		A(N, R)	C(N) – 8/28/2008
G73d		A(N)	C(N) – 8/28/2008
SECTION H: ADULT DEMOGRAPHICS AND FAMILY INCOME			
PRE H76			
H76			
H76_1	A(Q)		
H76a	C(S)		
H77			
H84			
H85	C(Q)	C(Q)	A(N) – 8/28/2008
H85y	C(R)		
H85m	C(R)		
H86	C(R, S)	A(T)	C(N) – 8/28/2008
H87			
H88	A(Q)		
H89	A(Q); C(Q, S)		
H89y	A(Q); C(R)		
H89m	A(Q)		
H89_CON	A(Q); C(S)		
H90	A(Q); C(S)		
SECTION R: ADULT VIOLENCE			

R1	A(Q); C(Q, S)		
R2	A(Q); C(S)		
R2A	A(Q); C(S)		
R3	A(Q); C(R)		
R3oth	A(Q); C(Q)		
R4_1	A(Q)		
R4_2	A(Q)		
R4_3	A(Q)		
R4_4	A(Q)		
R4_5	A(Q)		
R4_6	A(Q)		
SECTION Q: (MAIN AND OVERSAMPLE) HOUSEHOLD WEIGHTING QUESTIONS			
Q153	C(Q)		C(Q) - 8/28/2008
Q154			
Q155	C(Q)		
Q156			C(N) - 8/28/2008
NP156	A(Q); C(R)		
NP156O	A(Q)		
Q156a	D(Q)		
NQ157			C(N) - 8/28/2008
CELL1	A(Q, H)		
SECTION Q: (CELL PHONE) HOUSEHOLD WEIGHTING QUESTIONS			
Q153	C(Q)		
Q154			
NQ157	A(Q)	C(Q)	C(N) - 8/28/2008
CELL1	A(Q)		
SECTION I: (MAIN AND OVERSAMPLE) SCREENING QUESTIONS FOR ELIGIBLE CHILD			
i90			C(S) - 8/17/2008
REF1	A(Q)		
PAR1		D(Q)	
i90a			
PAR2		C(S)	
i90b			
i90c			
i91a			
i91b			
i91bb	D(V)		
i91c			
i91d			
i92			
i92_dpr1	A(Q)		
i92_dpo	A(Q)		
i92_dpr3	A(Q)		
i95			
PAR3			
i95a			
PAR4			
SECTION I: (CELL PHONE) SCREENING QUESTIONS FOR ELIGIBLE CHILD			
i90			

REF1	A(Q)		
i90a			
PAR2			
i90b			
i90c			
i91a			
i95			
PAR3			
PAR3 i95	A(Q)		
PAR3 i95a	A(Q)		
PAR3 J100c	A(Q)		
PAR3 K96	A(Q)		
PAR3 K103	A(Q)		
i95a			
PAR4			
SECTION J: CHILD'S INSURANCE COVERAGE			
J96			
J96a			C(Q) - 8/26/2008
PRE J100A			
J100A			
J100B		C(Q, R)	
J100Bcon	A(V)		
J100C			C(Q) - 8/26/2008 C(S, Q) - 8/28/2008
J100D			
J100E			
J100F			
NJ100F1	A(Q); C(R)		
J100F1	C(O)		
J100G			
J100G1	C(P)		
J100G1a			
J100H			
J100H1	D(Q)		
J100CHK			
J104			
J104a			
J104b	D(Q)		
J104c	D(Q)		
J104d	D(Q)		
J105			C(S) - 10/06/2008
J113			
J116			
J117			
NJ117a	A(Q); C(R)		C(N, R) - 8/17/2008
J117a	C(O)		
J117b	C(Q, S)	C(S)	C(S) - 11/06/03; C(S) - 01/27/04
J117c			
J120			
J122			
J123	D(Q)		

J124a			
J124b	A(N)		
SECTION K: CHILD CURRENTLY UNINSURED			
K96			
PAR5			
K97			
K98			
K98a		C(S)	
K99			
NK99a	A(Q); C(R)	C(S)	C(R) - 8/17/2008
K99a	C(O)		C(S) - 10/02/2008
K99b			C(S) -10/02/2008
NK99c	A(Q); C(R)		
K99c	C(O)		
NK99d	A(Q); C(R)	C(S)	
K99d	D(Q)		
NK99do	A(Q)		
K100			
K101			
K102		C(S)	
K103			
K104		C(S)	
NK105	A(Q); C(R)	C(S)	
NK105o	A(Q)		
K105	D(Q)		
K106	D(Q)		
NK106	A(Q); C(R)	C(S)	
NK106O	A(Q)		
NK123	A(Q); C(R)		
K123	C(O)		
K124			
SECTION L: HEALTH STATUS OF CHILD			
L125			
L125a	A(Q)		
L125a1	A(Q)		
L125a2	A(Q)		C(S) - 10/06/2008
Pre_L126a	A(T)		
L126a	C(O)		
L126b			
L126c			
L126d			
L126e			
L126f			
L126g			
L126h			
L126i			
L126j			
L126k			
L126L			
L126m			
L126n			
L127	D(Q)		

L127G1	D(Q)		
L128	D(Q)		
L128a	D(Q)		
L128c	D(Q)		
LAS1	D(Q)		
LAS1a	A(Q)		
LAS1b	A(Q)		
LAS2			
LAS3	D(Q)		
LAS5	A(Q)		
LAS6	A(Q)		
LAS7	A(Q)		
LAS8	A(Q)		
LAS8oth	A(Q)		
LAS9	A(Q)		
LAS10	A(Q)		
LAS11	A(Q)		
LAS12	A(Q)		
LAS13	A(Q)	C(R)	
SECTION M: UTILIZATION AND QUALITY OF CHILD HEALTH CARE SERVICES			
M130			
M131		C(Q)	
M131a			
M132			C(Q) - 8/26/2008
M132A	D(Q)		
M134			
LAS14	A(Q)		
M134A	D(Q)		
M134B	D(Q)		
M135			
M135A		C(S)	
M135B	D(Q)		
M136			
M136A	D(Q)		
SECTION N: ACCESS TO CARE FOR CHILD			
N137			
N137chek	A(V)		
N137.1	D(Q)		
N137A	D(Q)		
N137A.0	D(Q)		
N137A1			
N137A2		D(R)	
N137A3	D(Q)		
N137aOth	A(Q)		
N137B			
N137C			
N137d			
NN137e	A(Q)		
N137e	A(Q); C(R)		
NN137f	A(Q); C(P, R)		
N137f	A(Q)		

N138	D(Q)		
N138a	D(Q)		
N138b	D(Q)		
N138c	D(Q)		
K4Q24	A(Q)		
K4Q25	A(Q)		
K4Q26	A(Q)		
J104c	A(Q)		
J104d	A(Q)		
SECTION O: UNMET HEALTH NEEDS OF FAMILY			
O139			
NO139	A(Q); C(R)		
O139sepc	A(Q)		
O139a	D(Q)		
O139b	D(Q)		
O139c	D(Q)		
O139d	D(Q)		
O140			
O140a	D(Q)		
O141			
NO142A	A(Q); C(R)		
O142A	A(Q)		
O141a	D(Q)		
O141b	D(Q)		
O141c	D(Q)		
O142	D(Q)		
O143	D(Q)		
NO14301	A(Q); C(R)		
NO14301O	A(Q)		
NO14302	A(Q); C(R)		
NO14302O	A(Q)		
O144			
SECTION P: CHILD'S DEMOGRAPHICS			
P148			
P149			
P150			
P150o			
P150a			
P150b			
P150bo			
P151			
SECTION Q: CLOSING SECTION FOR MAIN AND OVER SAMPLE			
Q157	D(Q)		
Q157o	D(Q)		
Q160	A(T)		
SECTION Q: CLOSING SECTION FOR CELL PHONE SAMPLE			
Q160	A(T)	C(T)	
Closec	A(Q)		
CLOSING			
Q158	D(Q)		
SECTION T: INTERVIEWER ASSESSMENT			

R159	D(Q)		
R160	D(Q)		
R162	D(Q)		
POST1	A(Q): C(Q)		
POST2	A(Q): C(Q)		
POST3	A(Q)		
POST3_OTHER	A(Q)		
POST4	A(Q)		

APPENDIX M: REASONS FOR BARRIER_A / BARRIER_C DISCREPANCY BETWEEN 2003 AND 2008

During reporting an issue arisen with the derived variables BARRIER_A and BARRIER_C. A discrepancy existed between the values in the 2003 study compared to the 2008 study. In the 2003 study there were a significantly more values for this variable then the 2008 study. This issue was brought to the front but with some careful analysis, the changing of the questionnaire greatly affected the amount of values for these variables.

In 2003, BARRIER_A, is quite different then the variable in 2008. First, the coded values have changed. In 2003 the responses were:

- 1 = financial or coverage
- 2 = geographic
- 3 = other
- 97 = unknown

However, in 2008 the responses were expanded to the following:

- 1 = insurance plan restrictions / rules
- 2 = cost / affordability / no insurance
- 3 = no convenient appointments available
- 4 = transportation
- 5 = other
- 97 = DK / Refused

This was not the only change. The second change is the code used to generate BARRIER_A. The change in the code is based around the elimination of a variable in the 2008 study. In 2003, BARRIER_A was generated using two questions F67f and B9c; seen by the code below:

```
if (f67f=02 or 03) or (b9c= 02 or 03) then barrier_a=1;
  else
    if (f67f=01) or (b9c = 01) then barrier_a=2;
  else
    if (f67f=04, 77 or 97) or (b9c = 04, 77 or 97) then barrier_a=3;
  else
    if (f67f=98 or 99) or (b9c=98 or 99) then barrier_a=97
```

In 2008, B9c was eliminated, and BARRIER_A is only generated using F67f; see the code below:

```
if (f67f= 03) then barrier_a=1;
  else
    if (f67f=02) then barrier_a=2;
  else
    if (f67f=04) then barrier_a=3;
```

```

else
    if (f67f = 01) then barrier_a = 4;
else
    if (f67f = 97) then barrier_a = 5;
else
    if (f67f=98 or 99) then barrier_a=97

```

Using the code above, in 2003 BARRIER_A had a total of 3,106 responses. Of those 2,530 came from responses to B9c and the remaining 576 came from responses to F67f. In 2008, there BARRIER_A only had 923 responses. However, since BARRIER_A in 2008 only referenced F67f in its creation, when compared to the amount of responses to F67f in 2003 that generate BARRIER_A, it's comparable.

For a detailed look at the cross-tabulations, see the tables below.

The discrepancy for BARRIER_C is also similar with changes made to the questionnaire and the code used to generate the variable. First, the question's responses for J104c are different for the 2003 and 2008 questionnaires. In 2003, J104c only had the following responses:

- 01 = no specialist nearby
- 02 = too expensive
- 03 = insurance plan places restrictions
- 97 = other reason

Due to an overwhelming amount of other responses, in 2008 additional responses categories were added to the question. Those response categories are:

- 01 = no specialist nearby
- 02 = insurance plan restriction / rules
- 03 = no reason to go (no problems)
- 04 = have not thought of it
- 05 = other priorities
- 06 = cost / can't afford care / no insurance
- 07 = no regular provider
- 08 = professionals said not needed (yet)
- 09 = no convenient appointments available
- 10 = cannot get to the office / clinic (too far away, no transportation)
- 11 = child / adult care problem
- 12 = fear – bad news
- 13 = fear – pain
- 14 = fear – embarrassment
- 15 = fear the procedure may cause other health problems
- 97 = other

This is not the only change as the coded values were also changed to match BARRIER_A, described earlier.

In 2003, BARRIER_C was generated using responses from questions J104c and N138b. However, in 2008 question N138b was eliminated and BARRIER_C is only generated using responses from J104c. Unlike 2008, the elimination of N138b was not the cause of the difference. Of the 723 responses for BARRIER_C in 2003, only 39 came from N138b. There are though only 204 responses for BARRIER_C in 2008. The main reason for this difference is in 2003 J104c was asked to respondents who said it was a problem to a specialist, big or small. In 2008, only respondents who said it was a big problem to see a specialist were asked J104c.

One additional change is the code used to generate BARRIER_C. Not only did the coded responses change but also the amount of responses to chose from. In the 2003 the code for BARRIER_C was:

```

if inttype = 1 then barrier_c=.;
  else
    if (N138b=02 or 03) or (j104c=02 or 03) then barrier_c=1;
  else
    if (N138b=01) or (j104c=01) then barrier_c=2;
  else
    if (n138b = 04 or 97) or (j104c=04 or 97) then barrier_c=3;
  else
    if (N138b=98 or 99) or (j104c=77, 98 or 99) then barrier_c=97

```

In 2008 the code was changed to the following:

```

if inttype = 1 then barrier_c=.;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D = 02) then barrier_c=1;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D =06) then barrier_c=2;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D =09) then barrier_c=3;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D = 01, 10) then barrier_a = 4;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D = 3, 4, 5, 7, 8, 11, 12, 13, 14, 15, 97) then
      barrier_c = 5;
  else
    if (j104c_A, j104c_B, j104c_C, j104c_D =98 or 99) then barrier_c=97

```