#### Private Health Insurance Detail (HP) Section

THROUGHOUT THE SPECIFICATIONS FOR THIS CAPI | SECTION, FOR SCREENS THAT SPECIFY THE REFERENCE | PERIOD {END DATE} AS PART OF THE CONTEXT HEADER, | CAPI DISPLAYS THE {END DATE} ONLY FOR ROUND 5. IN | ANY OTHER ROUND, CAPI DOES NOT DISPLAY THE {END | DATE IN THE CONTEXT HEADER. FOR MOST PERSONS, THE END DATE FOR ROUND 5 WILL BE DECEMBER 31 OF | THE SECOND YEAR OF THE PANEL. NOTE THAT 'HEALTH INSURANCE PURCHASING ALLIANCE' (CODE '4' AT HX03 AND CODE '2' AT HX23) WAS OMITTED IN PANEL 12 ROUND 2 AND WILL BE OMITTED IN | ALL FUTURE ROUNDS. NOTE THAT ESTABLISHMENT ADDRESS INFORMATION AND THE INFORMED CONSENT SCREENS WERE OMITTED STARTING| IN PANEL 12 ROUND 3. THIS INFORMATION WAS IN PANEL 12 ROUNDS 1 AND 2. | STARTING IN PANEL 13 THESE ITEMS WILL BE OMITTED | IN ALL ROUNDS.

BOX\_00

CONTEXT HEADER DISPLAY INSTRUCTIONS:

DISPLAY PERS.FULLNAME, ESTB.ESTBNAME,

PRND.BEGREFMM, PRND.BEGREFDD, PRND.BEGREFYY,

PRND.ENDREFMM, PRND.ENDREFDD, PRND.ENDREFYY,

'INSURANCE SOURCE'.

FOR 'INSURANCE SOURCE', DISPLAY THE CATEGORY TEXT |

FROM HX23. IF HX23=91, DISPLAY THE OTHER SPECIFY |

TEXT.

В	0	X	_	0	1
_	_	_	_	_	_

   	IF LOOPING ON ANY ESTABLISHMENT FLAGGED IN THE EMPLOYMENT (EM) SECTION AS 'PROVIDES HEALTH INSURANCE' AND NOT FLAGGED AS 'SELF-EMPLOYED' WITH A FIRM-SIZE-1, GO TO LOOP_01
.	IF LOOPING ON AN HX03 CATEGORY OR IF LOOPING ON AN HX23 CATEGORY (EXCEPT CODE '3' (DIRECTLY FROM A SCHOOL)), GO TO HP03
	IF LOOPING ON CODE '3' (DIRECTLY FROM A SCHOOL) AT HX23, CONTINUE WITH HP01

HP01

Does the insurance from the school cover only injuries caused by accidents, or does it have general health coverage?

GENE	RAL HEALTE	H COVERAGE		1	{HP02}
ONLY	INJURIES	CAUSED BY	ACCIDENTS	2	{BOX_11}
REF .				7	{HP02}
DK .				-8	{HP02}

HELP AVAILABLE FOR DEFINITION OF GENERAL HEALTH COVERAGE.

[Code One]

MEPS P15R5/P16R3/P17R1 November 3, 2011	Private	Health	Insurance	Detail	(HP)	Section
HP02 ====						

Would the insurance from the school cover health services outside of a school clinic?

YES	1	{HP03}
NO	2	{BOX_11}
REF	7	{HP03}
DK	8	{HP03}

HP03

I'd like to talk about the insurance which is from {CATEGORY NAME FROM HX03 OR HX23}, that is, the health insurance {through a self-employed business/someone in the family purchased or obtained directly from that source.}

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

CONTINUE ...... 1 {LOOP\_01} INSURANCE REPORTED IN ERROR ...... 2 {BOX\_11}

[Code One]

| DISPLAY 'through a self-employed business' IF | LOOPING ON AN HX03 CATEGORY. DISPLAY 'someone in | the family purchased or obtained directly from | that source.' IF LOOPING ON AN HX23 CATEGORY. |

DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03| OR HX23': - 'a professional association' IF CODED '1' AT - 'a small business group' IF CODED '2' AT HX03 - 'a union' IF CODED '3' AT HX03 - 'an insurance agent' IF CODED '5' AT HX03 - 'an insurance company' IF CODED '6' AT HX03 - 'an HMO' IF CODED '7' AT HX03 - 'a previous employer' IF CODED '8' AT HX03 - 'a previous employer (COBRA)' IF CODED '9' AT HX03 - 'a high risk pool { (e.g., {STATE NAME FOR HIGH RISK POOL ) ) ' IF CODED '10' AT HX03 - 'the {HX030V OTHER SPECIFY TEXT}' IF CODED '91' AT HX03 - 'source purchased for that business' IF CODED '-7' OR '-8' AT HX03 - 'a group or association' IF CODED '1' AT HX23 - 'a school' IF CODED '3' AT HX23 - 'an insurance agent' IF CODED '4' AT HX23 - 'an insurance company' IF CODED '5' AT HX23 - 'an HMO' IF CODED '6' AT HX23 - 'a union' IF CODED '7' AT HX23 - 'a previous employer (COBRA)' IF CODED '8' AT HX23 - 'a previous employer (not COBRA)' IF CODED '9' AT HX23 - 'a spouse's (or deceased spouse's) previous employer' IF CODED '10' AT HX23 - 'some other employer' IF CODED '11' AT HX23 - 'the plan of someone not living here' IF CODED '12' AT HX23 - 'a high risk pool { (e.g., {STATE NAME FOR HIGH RISK POOL})}' IF CODED '13' AT HX23 - 'the {HX23OV OTHER SPECIFY TEXT} IF CODED '91' AT HX23 - 'a source that provided directly purchased insurance' IF CODED '-7' OR '-8'

DISPLAY '(e.g., {STATE NAME FOR HIGH RISK POOL})' |
IF STATE IN WHICH INTERVIEW IS BEING CONDUCTED |
OFFERS A HIGH RISK POOL HEALTH INSURANCE PLAN. |
THIS INCLUDES ALL STATES EXCEPT: AZ, DE, DC, GA, |
HI, ME, MA, MI, NV, NJ, NY, OH, PA, RI, VT, VA. |
IF INTERVIEW STATE IS ONE OF THESE STATES, USE A |
NULL DISPLAY.

| FOR 'STATE NAME FOR HIGH RISK POOL' DISPLAY THE | HIGH RISK POOL PLAN NAME ASSOCIATED WITH THE STATE| IN WHICH INTERVIEW IS BEING CONDUCTED. |

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| IF CODED '2' (INSURANCE REPORTED IN ERROR), FLAG | ITEM FOR SOURCE CLEAN-UP. |

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LOOP\_01

FOR EACH OF THE FOLLOWING:

| ESTABLISHMENT 1
| ESTABLISHMENT 2
| ESTABLISHMENT 3
| ESTABLISHMENT 4
| ASK BOX\_01A-END\_LP01

| LOOP DEFINITION: LOOP-01 COLLECTS DETAILED | INFORMATION ABOUT INSURANCE PROVIDED THROUGH AN | EMPLOYER OR THE ESTABLISHMENT NAMES OF THE | INSURANCE SOURCE COLLECTED IN EITHER HX03 OR HX23.| IF LOOPING ON INSURANCE PROVIDED FROM AN EMPLOYER | ONLY ONE LOOP CYCLE IS COMPLETED.

| IF LOOPING ON INSURANCE PROVIDED THROUGH AN | INSURANCE SOURCE COLLECTED IN HX03 OR HX23, THE | FIRST LOOP CYCLE COLLECTS THE MAIN ESTABLISHMENT | NAME OF THE INSURANCE SOURCE. SUBSEQUENT CYCLES, | IF ANY, ARE DETERMINED BY THE RESPONSE TO HP18. | IF HP18 IS CODED '1' (YES), THE LOOP CYCLES AGAIN | TO COLLECT THE NEXT ESTABLISHMENT NAME. IF HP18 | IS NOT ASKED OR IS CODED '2' (NO), '-7' (REFUSED), | OR '-8' (DON'T KNOW), THE LOOP ENDS.

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| IF LOOPING ON ANY ESTABLISHMENT FLAGGED IN |
| EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE' AND NOT |
| FLAGGED AS 'SELF-EMPLOYED' WITH A FIRM-SIZE-1, |
| GO TO HP09 |

HP04A

OMITTED.

HP04

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}

{Please give me the name of the {professional association/small business group/union/insurance company/HMO/previous employer/previous employer (using COBRA)/group or association/school/spouse's (or deceased spouse's) previous employer/employer/high risk pool {(e.g., {STATE NAME FOR HIGH RISK POOL})}/{HX03OV/HX23OV OTHER SPECIFY}/the source} {from which someone in the family {purchased/obtained} this insurance/for the insurance purchased from an agent}. / You mentioned that someone in the family receives health insurance from the plan of someone not living here. How does that policyholder get this insurance?}

VERIFY WITH RESPONDENT AND SELECT (ESTABLISHMENT) BELOW:

ROS	STER. ESTABLISE	HMENT
1.	Establishment	Name-30
2.	Establishment	Name-30
3.	Establishment	Name-30

| DISPLAY 'Please give ... an agent.' IF NOT LOOPING |
| ON HX23 CODE '12' (UNDER PLAN OF SOMEONE NOT |
| LIVING HERE). DISPLAY 'You mentioned...this |
| insurance?' IF LOOPING ON HX23 CODE '12' (UNDER |
| PLAN OF SOMEONE NOT LIVING HERE).

| DISPLAY 'professional association' IF LOOPING ON | HX03 CODE '1' (FROM A PROFESSIONAL ASSOCIATION).

| DISPLAY 'small business group' IF LOOPING ON HX03 | CODE '2' (FROM A SMALL BUSINESS GROUP).

| DISPLAY 'union' IF LOOPING ON HX03 CODE '3' (FROM A UNION) OR LOOPING ON HX23 CODE '7' (FROM A UNION).

DISPLAY 'insurance company' IF LOOPING ON HX03 | CODE '5' (DIRECTLY FROM AN INSURANCE AGENT) OR '6' | (DIRECTLY FROM INSURANCE COMPANY) OR LOOPING ON | HX23 CODE '4' (DIRECTLY FROM AN INSURANCE AGENT) | OR '5' (DIRECTLY FROM INSURANCE COMPANY).

DISPLAY 'HMO' IF LOOPING ON HX03 CODE '7' |
(DIRECTLY FROM AN HMO) OR LOOPING ON HX23 CODE '6' |
(DIRECTLY FROM AN HMO).

DISPLAY 'previous employer' IF LOOPING ON HX03
CODE '8' (FROM A PREVIOUS EMPLOYER) OR LOOPING ON
HX23 CODE '9' (FROM ANYONE'S PREVIOUS EMPLOYER).

DISPLAY 'previous employer (using COBRA)' IF | LOOPING ON HX03 CODE '9' (FROM A PREVIOUS EMPLOYER (COBRA)) OR LOOPING ON HX23 CODE '8' (FROM | ANYONE'S PREVIOUS EMPLOYER (COBRA)).

DISPLAY 'group or association' IF LOOPING ON HX23 CODE '1' (FROM A GROUP OR ASSOCIATION).

DISPLAY 'school' IF LOOPING ON HX23 CODE '3' (DIRECTLY THROUGH A SCHOOL).

DISPLAY 'spouse's (or deceased spouse's) previous employer' IF LOOPING ON HX23 CODE '10' (FROM SPOUSE'S/DECEASED SPOUSE'S PREVIOUS EMPLOYER).

DISPLAY 'employer' IF LOOPING ON HX23 CODE '11' (FROM SOME OTHER EMPLOYER).

DISPLAY 'high risk pool {(e.g., {STATE NAME FOR HIGH RISK POOL})}' IF LOOPING ON HX03 CODE '10' (DIRECTLY FROM A HIGH RISK POOL) OR LOOPING ON HX23 CODE '13' (DIRECTLY FROM A HIGH RISK POOL).

| DISPLAY '{HX030V/HX230V OTHER SPECIFY}' IF LOOPING | ON HX03 CODE '91' (OTHER) OR LOOPING ON HX23 CODE | '91' (OTHER SOURCE).

FOR 'HX030V/HX230V OTHER SPECIFY' DISPLAY THE TEXT ENTERED AT EITHER HX030V OR HX230V.

| DISPLAY 'the source' IF LOOPING ON HX03 OR HX23 | CODES '-7' (REF) OR '-8' (DK).

| DISPLAY 'from which someone in the family | {purchased/obtained} this insurance' IF NOT | LOOPING ON HX03 CODE '5' (DIRECTLY FROM AN INSURANCE AGENT) OR HX23 CODE '4' (DIRECTLY FROM AN INSURANCE AGENT) IF LOOPING ON HX03 CODE '5' OR HX23 CODE '4', DISPLAY, 'for the insurance purchased from an agent'.

DISPLAY 'purchased' IF LOOPING ON HX03 CODES '1', | '2', '3', '6', '7', '10', '-7,' OR '-8' OR IF | LOOPING ON HX23 CODES '1', '3', '5', '6', '7', | '13', '-7,' OR '-8'.

| DISPLAY 'obtained' IF LOOPING ON HX03 CODES '8', | '9', OR '91' OR IF LOOPING ON HX23 CODES '8', '9', | '10', '11', OR '91'. |

DISPLAY '(e.g., {STATE NAME FOR HIGH RISK POOL})' |
IF STATE IN WHICH INTERVIEW IS BEING CONDUCTED |
OFFERS A HIGH RISK POOL HEALTH INSURANCE PLAN. |
THIS INCLUDES ALL STATES EXCEPT: AZ, DE, DC, GA, |
HI, ME, MA, MI, NV, NJ, NY, OH, PA, RI, VT, VA. |
IF INTERVIEW STATE IS ONE OF THESE STATES, USE A |
NULL DISPLAY.

FOR 'STATE NAME FOR HIGH RISK POOL' DISPLAY THE | HIGH RISK POOL PLAN NAME ASSOCIATED WITH THE STATE| IN WHICH INTERVIEW IS BEING CONDUCTED.

| THE CONTEXT HEADER DISPLAYED ON SCREENS | HP04 - HP08 DEPENDS ON THE PATH THAT LEADS TO | THE SCREEN. IF ASKING ABOUT A SPECIFIC PERSON | (I.E., JOBHOLDER WHEN COMING FROM AN HX03 | CATEGORY), CAPI DISPLAYS THE PERSON AND START | DATE. IF ASKING ABOUT A SPECIFIC ESTABLISHMENT, | CAPI DISPLAYS THE ESTABLISHMENT AND START DATE. | OTHERWISE, CAPI DISPLAYS THE START DATE. FOR | ROUND 5, CAPI ALSO DISPLAYS THE END DATE OF THE | REFERENCE PERIOD.

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DISPLAY AN "ADD ESTABLISHMENT" OPTION ON THIS | IF 'ADD ESTABLISHMENT' OPTION IS SELECTED, CONTINUE WITH BOX 01B OTHERWISE (ESTABLISHMENT WAS SELECTED FROM THE | LIST), GO TO BOX 02 | ROSTER DETAILS: TITLE: RU\_ESTB\_3 | COL # 1 HEADER: ESTABLISHMENT | INSTRUCTIONS: DISPLAY ESTABLISHMENT NAME (ESTB.ESTBNAME) \_\_\_\_\_\_ | ROSTER DEFINITION: | THIS ITEM DISPLAYS RU-ESTABLISHMENTS-ROSTERS FOR | | DISPLAY OF PRIVATE INSURANCE ESTABLISHMENTS. ROSTER BEHAVIOR: 1. SELECT ALLOWED. | 2. MULTIPLE SELECT, ADD, DELETE, AND EDIT DISALLOWED. ROSTER FILTER: | DISPLAY ESTABLISHMENTS THAT ARE SOURCES OF PRIVATE| INSURANCE. THIS DOES NOT INCLUDE ESTABLISHMENTS | FLAGGED AS 'EMPLOYER' AND 'SELF-EMPLOYED' WITH A | | FIRM-SIZE-1 THAT ARE COMING FROM THE HX03 SERIES. |

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	IF LOOPING ON CODE '12' (UNDER PLAN OF SOMEONE NOT   LIVING HERE) AT HX23 AND IF 'ADD ESTABLISHMENT'   IS SELECTED, GO TO HP07. (NOTE THAT HP07 IS NOT A   SEPARATE SCREEN; IT REPRESENTS A POPUP ON HP04.)
	IF 'ADD ESTABLISHMENT' IS SELECTED AND IF NOT   LOOPING ON CODE '12' (UNDER PLAN OF SOMEONE NOT   LIVING HERE) AT HX23, CONTINUE WITH HP06 (NOTE   THAT HP06 IS NOT A SEPARATE SCREEN; IT REPRESENTS   A POPUP ON HP04.)
HP05 ====	OMITTED.
HP06 ====	
	{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}
	INSURANCE SOURCE: {CATEGORY NAME FROM HX03 OR HX23}
	ENTER NAME OF ESTABLISHMENT WHERE PERSON PURCHASED INSURANCE.
	{ESTABLISHMENT: [] {BOX_02}

BOX 01B

> DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03| OR HX23': - 'PROFESSIONAL ASSOCIATION' IF CODED '1' AT HX03 | - 'SMALL BUSINESS GROUP' IF CODED '2' AT HX03 - 'UNION' IF CODED '3' AT HX03 - 'INSURANCE AGENT' IF CODED '5' AT HX03 - 'INSURANCE COMPANY' IF CODED '6' AT HX03 - 'HMO' IF CODED '7' AT HX03 - 'PREVIOUS EMPLOYER' IF CODED '8' AT HX03 - 'PREVIOUS EMPLOYER [COBRA]' IF CODED '9' AT HX03| - 'HIGH RISK POOL' IF CODED '10' AT HX03 - THE TEXT ENTERED AT HX030V IF CODED '91' AT HX03| - 'SOURCE PURCHASED FROM FOR THAT BUSINESS' IF CODED '-7' OR '-8' AT HX03 - 'GROUP OR ASSOCIATION' IF CODED '1' AT HX23 - 'SCHOOL' IF CODED '3' AT HX23 - 'INSURANCE AGENT' IF CODED '4' AT HX23 - 'INSURANCE COMPANY' IF CODED '5' AT HX23 - 'HMO' IF CODED '6' AT HX23 - 'UNION' IF CODED '7' AT HX23 - 'PREVIOUS EMPLOYER [COBRA]' IF CODED '8' AT HX23 - 'PREVIOUS EMPLOYER [NOT COBRA]' IF CODED '9' AT HX23 - 'SPOUSE'S/DECEASED SPOUSE'S PREVIOUS EMPLOYER' IF CODED '10' AT HX23 - 'SOME OTHER EMPLOYER' IF CODED '11' AT HX23 - 'PLAN OF SOMEONE NOT LIVING HERE' IF CODED '12' | AT HX23 - 'HIGH RISK POOL' IF CODED '13' AT HX23 - THE TEXT ENTERED AT HX23OV IF CODED '91' AT HX23| - 'SOURCE THAT PROVIDED DIRECTLY PURCHASED INSURANCE' IF CODED '-7' OR '-8' WRITE ESTABLISHMENT TO THE RU-ESTABLISHMENTS-| ROSTER.

> > 150

ΗP	07
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{STR-DT} {END-DT}

You mentioned that someone in the family receives health insurance from the plan of someone not living here. How does that policyholder get this insurance?

INTERVIEWER: RECORD ESTABLISHMENT NAME BELOW.

[Establishment Name] ...... {BOX\_02}

ONLY CATEGORY '12' (UNDER PLAN OF SOMEONE NOT | LIVING HERE) OF HX23 IS ASKED HP07. |

WRITE ESTABLISHMENT TO THE RU-ESTABLISHMENTS- | ROSTER. |

HP08

OMITTED.

### BOX\_02

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| IF HX03 IS CODED '1' OR '2' FLAG ESTABLISHMENT AS |
  'GROUP'.
| IF HX03 IS CODED '3', FLAG ESTABLISHMENT AS
  'UNION'.
| IF HX03 IS CODED '5', FLAG ESTABLISHMENT AS
  'INSURANCE COMPANY-FROM AN AGENT'.
  IF HX03 IS CODED '6', FLAG ESTABLISHMENT AS
 'INSURANCE COMPANY'.
| IF HX03 IS CODED '7', FLAG ESTABLISHMENT AS 'HMO'.|
 IF HX03 IS CODED '8', FLAG ESTABLISHMENT AS
  'PREVIOUS EMPLOYER, NOT COBRA'.
| IF HX03 IS CODED '9', FLAG ESTABLISHMENT AS
  'COBRA'.
  IF HX03 IS CODED '10', FLAG ESTABLISHMENT AS
  'HIGH RISK POOL'.
| IF HX03 IS CODED '91', FLAG ESTABLISHMENT AS
| 'UNKNOWN TYPE-COLLECTED AT OTHER'.
| IF HX23 IS CODED '1', FLAG ESTABLISHMENT AS
  'GROUP'.
  IF HX23 IS CODED '3', FLAG ESTABLISHMENT AS
  'SCHOOL'.
| IF HX23 IS CODED '4', FLAG ESTABLISHMENT AS
  'INSURANCE COMPANY-FROM AN AGENT'.
 IF HX23 IS CODED '5', FLAG ESTABLISHMENT AS
  'INSURANCE COMPANY'.
| IF HX23 IS CODED '6', FLAG ESTABLISHMENT AS
  'HMO'.
  IF HX23 IS CODED '7', FLAG ESTABLISHMENT AS
  'UNION'.
| IF HX23 IS CODED '8', FLAG ESTABLISHMENT AS
  'COBRA'.
| IF HX23 IS CODED '9', FLAG ESTABLISHMENT AS
  'PREVIOUS EMPLOYER, NOT COBRA'.
| IF HX23 IS CODED '10', FLAG ESTABLISHMENT AS
  'SPOUSE PREVIOUS EMPLOYER'.
| IF HX23 IS CODED '11', FLAG ESTABLISHMENT AS
  'EMPLOYER'.
| IF HX23 IS CODED '12', FLAG ESTABLISHMENT AS
  'UNKNOWN TYPE-OUTSIDE RU'.
IF HX23 IS CODED '13', FLAG ESTABLISHMENT AS
  'HIGH RISK POOL'.
| IF HX23 IS CODED '91', FLAG ESTABLISHMENT AS
'UNKNOWN TYPE - COLLECTED AT OTHER'.
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	NOTE THAT 'HEALTH INSURANCE PURCHASING ALLIANCE'     (CODE '4' AT HX03 AND CODE '2' AT HX23) WAS     OMITTED IN PANEL 12 ROUND 2 AND WILL BE OMITTED IN    ALL FUTURE ROUNDS.
BOX_03 =====	
	IF LOOPING ON AN HX23 CATEGORY, GO TO HP11
	OTHERWISE, CONTINUE WITH HP09
HP09 ====	
	{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}
	{(Are/Is)/As of (END DATE), was} (PERSON) the primary insured person or policyholder of this health coverage through (ESTABLISHMENT)?
	YES
	HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.
	DISPLAY '(Are/Is)' IF NOT ROUND 5. DISPLAY 'As of    (END DATE), was' IF ROUND 5.
	PERSON REFERS TO JOBHOLDER.

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            | IF CODED '1' (YES), FLAG JOBHOLDER AS
            | 'POLICYHOLDER'.
HP10
         {NAME OF ESTABLISHMENT} {STR-DT}
         {END-DT}
         Who {is/was} the primary insured person or policyholder of this
         health coverage through (ESTABLISHMENT) {on (END DATE)}?
         {JOBHOLDER/EMPLOYER-PAIR 1}
         {JOBHOLDER/EMPLOYER-PAIR 2}
         {JOBHOLDER/EMPLOYER-PAIR 3}
             JOBHOLDER/EMPLOYER IS LISTED ...... 1 {END LP01}
             JOBHOLDER/EMPLOYER IS NOT LISTED ..... 2 {END LP01}
             REF ..... -7 {END LP01}
             DK ..... -8 {END LP01}
             HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.
                           [Code One]
              _____
            | DISPLAY 'is' IF NOT ROUND 5. DISPLAY 'was' IF |
            | ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5.
            OTHERWISE, USE NULL DISPLAY.
            | IF CODED '2' (NO), '-7' (REFUSED) OR '-8' (DON'T |
            KNOW), FLAG FOR EVENT CLEANUP.
             _____
             ROSTER DETAILS:
            | TITLE: RU ESTB PERS PAIRS 2
            | COL # 1 HEADER: JOBHOLDER/EMPLOYER PAIR
            | INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE,
            AND LAST NAME/ESTABLISHMENT NAME (PERS.FULLNAME/
            | ESTB.ESTBNAME)
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| ROSTER DEFINITION: THIS ITEM DISPLAYS RU-ESTABLISHMENT-PERSON-PAIRS-| ROSTER FOR DISPLAY OF EMPLOYER/JOBHOLDER PAIRS. ROSTER BEHAVIOR: | 1. DISPLAY ONLY. 2. SELECT, ADD, DELETE, AND EDIT DISALLOWED. ROSTER FILTER: DISPLAY ALL PAIRS ON THE RU-ESTABLISHMENT-PERSON-PAIRS-ROSTER THAT MEET BOTH OF THE FOLLOWING CONDITIONS: | 1. ESTABLISHMENT IS FLAGGED AS AN 'EMPLOYER' THAT | IS ALSO FLAGGED AS 'PROVIDES HEALTH INSURANCE' I AND | 2. PERSON IS A JOBHOLDER AT THE JOB PROVIDED BY | ESTABLISHMENT -----

HP11

{NAME OF ESTABLISHMENT} {STR-DT}
{END-DT}

Who  $\{is/was\}$  the primary insured person or policyholder of this health coverage through (ESTABLISHMENT)  $\{on (END DATE)\}$ ?

- [1. First Name, [Middle Name], Last Name-35] ..
- [2. First Name, [Middle Name], Last Name-35] ...
- [3. First Name, [Middle Name], Last Name-35] ...

HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.

[Code All that Apply]

DISPLAY 'is' IF NOT ROUND 5. DISPLAY 'was' IF ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5. OTHERWISE, USE NULL DISPLAY. DISPLAY A POLICYHOLDER NOT LISTED IN DU" AND "POLICYHOLDER DECEASED" OPTION ON THIS SCREEN.

	IF BOTH 'POLICYHOLDER NOT LISTED IN DU' AND 'POLICYHOLDER DECEASED' ARE NOT SELECTED, GO TO LOOP_02	-     
	IF 'POLICYHOLDER DECEASED' SELECTED, ALONE OR IN COMBINATION WITH OTHER NAMES EXCEPT 'POLICYHOLDER NOT LISTED IN DU', GO TO HP11B	-     
	IF 'POLICYHOLDER NOT LISTED IN DU' SELECTED, ALONE OR IN COMBINATION WITH OTHER NAMES AND/OR 'POLICYHOLDER DECEASED', CONTINUE WITH HP11A	- 3     
	ROSTER DETAILS: TITLE: DU_MEMBERS_1  COL # 1 HEADER: NAME INSTRUCTIONS: DISPLAY DU MEMBER'S FIRST, MIDDLE, AND LAST NAMES (PERS.FULLNAME)	-         
     	ROSTER DEFINITION: THIS ITEM DISPLAYS DU-MEMBERS-ROSTER FOR SELECTION.	-   
	ROSTER BEHAVIOR: 1. MULTIPLE SELECT ALLOWED. 2. ADD, DELETE, AND EDIT DISALLOWED.	-     
	ROSTER FILTER: NO FILTER; DISPLAY ALL DU MEMBERS.	-   

HP11A =====	
	{NAME OF ESTABLISHMENT} {STR-DT} {END-DT}
	INTERVIEWER: ENTER NAME OR DESCRIPTION OF POLICYHOLDER WHO IS NOT IN THE DU:
	[Enter Specify-15] {LOOP_02}
	HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.
	WHENEVER THIS POLICYHOLDER IS BEING ASKED ABOUT     IN THE REMAINDER OF HP, HQ, HX, AND OE, THE     POLICYHOLDER NAME IN THE CONTEXT HEADER WILL BE     DISPLAYED AS 'PLCYHLDR NOT IN DU-' FOLLOWED BY     THE 15 CHARACTER ENTRY AT HP11A.
	IF 'POLICYHOLDER DECEASED' SELECTED AT HP11,     CONTINUE WITH HP11B
	OTHERWISE, GO TO LOOP_02
HP11B ====	
	{NAME OF ESTABLISHMENT} {STR-DT} {END-DT}
	INTERVIEWER: ENTER NAME OF DECEASED POLICYHOLDER:
	[Enter Specify-40] {LOOP_02}
	HELP AVAILABLE FOR DEFINITION OF POLICYHOLDER.
	FLAG POLICYHOLDER AS 'DECEASED'.

| WHENEVER THE POLICYHOLDER IS BEING ASKED ABOUT | | IN THE REMAINDER OF HP, HQ, HX, AND OE, THE | POLICYHOLDER NAME IN THE CONTEXT HEADER WILL BE | | DISPLAYED AS 'PLCYHLDR DECEASED-' FOLLOWED BY THE | | FIRST 15 CHARACTERS OF THE ENTRY AT HP11B. | \_\_\_\_\_\_ LOOP\_02 ====== \_\_\_\_\_\_ FOR EACH ELEMENT ON THE RU-ESTABLISHMENT-PERSON-PAIRS-ROSTER, ASK BOX 04 - END LP02 | LOOP DEFINITION: LOOP 02 COLLECTS INFORMATION ABOUT THE POLICYHOLDER AND DEPENDENTS FOR EACH | ESTABLISHMENT-PERSON. THIS LOOP CYCLES ON EACH | | ESTABLISHMENT-PERSON-PAIR CREATED AT HP09 AND HP11| DURING THE CURRENT ROUND FOR THE ESTABLISHMENT | BEING CYCLED ON IN LOOP\_01. BOX 04 ===== | IF LOOPING ON AN ESTABLISHMENT FLAGGED IN | EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE', GO TO | | BOX 07 OTHERWISE, CONTINUE WITH BOX 05

BOX_05 =====	
	IF HX23 IS CODED '8' (PREVIOUS EMPLOYER-COBRA),   '9' (PREVIOUS EMPLOYER-NOT COBRA), '10' (SPOUSE   PREVIOUS EMPLOYER), OR '11' (OTHER EMPLOYER)   CONTINUE WITH BOX_06
	OTHERWISE, GO TO BOX_07
BOX_06 =====	
	IF POLICYHOLDER WAS FLAGGED AT HP11 AS 'DECEASED',   CODE HP12 AS '4' (DECEASED) AUTOMATICALLY BY CAPI   AND GO TO HP13
	IF POLICYHOLDER IS NOT A CURRENT RU MEMBER, GO TO   BOX_07
	OTHERWISE, CONTINUE WITH HP12

MEPS	P15R5,	/P16R3,	/P17R1	Private	Health	Insurance	Detail	(HP)	Section
Noven	mber 3,	, 2011							

HP12 ====		
	{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}	
	(Are/Is) (POLICYHOLDER) currently employed at this job, retired from this job, previously employed at this job, or it some other situation?	is
	CURRENTLY EMPLOYED	
	[Code One]	
	IF CODED '4' (DECEASED), FLAG POLICYHOLDER AS     'DECEASED'.	
	HARD CHECK:     CODE '4' (DECEASED) CANNOT BE SELECTED FOR A     POLICYHOLDER WHO IS A CURRENT RU MEMBER.	
HP12OV =====		
	SPECIFY:	
	[Enter Other Specify]	

DK .....-8 {HP13}

# HP13

# BOX\_07

IF ESTABLISHMENT THAT PROVIDES INSURANCE IS | FLAGGED AS: 'EMPLOYER' AND JOB SUBTYPE IS NOT 'CURRENT MAIN', 'CURRENT MISCELLANEOUS JOB WITHIN REFERENCE | PERIOD', OR 'RETIREMENT JOB' 'EMPLOYER' AND [JOB SUBTYPE IS 'FORMER MAIN', 'FORMER MISCELLANEOUS' OR 'LAST JOB OUTSIDE | REFERENCE PERIOD'] AND JOB IS ALSO FLAGGED AS 'NOT RETIRED FROM' 'PREVIOUS EMPLOYER, NOT COBRA' (I.E., HX03-CODE '8'; HX23-CODE '9') 'EMPLOYER' (I.E., HX23-CODE '11') AND HP12 IS NOT | | CODED '1' (CURRENTLY EMPLOYED) 'SPOUSE PREVIOUS EMPLOYER' (I.E., HX23-CODE '10') 'UNKNOWN TYPE-OUTSIDE RU' (I.E., HX23-CODE '12') 'UNKNOWN TYPE-COLLECTED AT OTHER' (I.E., HX23-| CODE '91'), | CONTINUE WITH HP14 | OTHERWISE, GO TO HP15

HP14

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}

Some employer insurance can be continued after leaving the company by continuing to pay the premium. This is sometimes referred to as a COBRA plan.

{Is/Was} (POLICYHOLDER)'s (ESTABLISHMENT) insurance like that
{on (END DATE)}?

YES	1	{HP15}
NO	2	{HP15}
REF	-7	{HP15}
DK	- 8	{HP15}

HELP AVAILABLE FOR DEFINITION OF COBRA.

| DISPLAY 'Is' IF NOT ROUND 5. DISPLAY 'Was' IF | ROUND 5. DISPLAY 'on (END DATE)' IF ROUND 5. | OTHERWISE, USE NULL DISPLAY.

HP15

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

Was anyone {living here} covered as a dependent under (POLICYHOLDER)'s health coverage through (ESTABLISHMENT) at any time {since (START DATE)/between (START DATE) and (END DATE)}?

```
      YES
      1 {HP16}

      NO
      2 {HP17}

      REF
      -7 {HP17}

      DK
      -8 {HP17}
```

HELP AVAILABLE FOR DEFINITION OF DEPENDENT.

HP16

DISPLAY 'living here' IF LOOPING ON CODE '12' | (OUTSIDE RU) AT HX23. | DISPLAY 'since (START DATE)' IF NOT ROUND 5. | DISPLAY 'between (START DATE) and (END DATE)' IF | | ROUND 5. {POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF {END-DATE} Who is that? PROBE: Was anyone else covered as a dependent {since (START DATE) / between (START DATE) and (END DATE) }? [1. First Name, [Middle Name], Last Name-35] [2. First Name, [Middle Name], Last Name-35] [3. First Name, [Middle Name], Last Name-35] [Code All That Apply] \_\_\_\_\_ DISPLAY 'since (START DATE)' IF NOT ROUND 5. | DISPLAY 'between (START DATE) and (END DATE)' IF | | ROUND 5. \_\_\_\_\_ | IF 'PERSON NOT LISTED IN RU' IS SELECTED, FLAG | | INSURANCE THROUGH THIS ESTABLISHMENT-PERSON-PAIR | AS 'COVERING PERSON NOT LISTED IN RU'. | GO TO BOX 08

	ROSTER DETAILS: TITLE: RU_MEMBERS_1
	COL # 1 HEADER: NAME INSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, AND LAST NAMES (PERS.FULLNAME)
_	
	ROSTER DEFINITION: THIS ITEM DISPLAYS RU-MEMBERS-ROSTER FOR SELECTION OF RU-MEMBERS.
     	ROSTER BEHAVIOR: 1. MULTIPLE SELECT ALLOWED.
i -	2. ADD, DELETE, AND EDIT DISALLOWED.
_	
	ROSTER FILTER:
	DISPLAY ALL PERSONS ON THE RU-MEMBERS-ROSTER
	EXCLUDING THE PERSON WHO IS THE POLICYHOLDER FOR
	THIS INSURANCE; THAT IS, DO NOT DISPLAY THE NAME OF PERSON IN THE ESTABLISHMENT-PERSON-PAIR BEING
	ASKED ABOUT.
-	
   	DISPLAY 'PERSON NOT LISTED IN RU' AS LAST ITEM ON ROSTER.

HP17	
	{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT} {END-DT}
	{Does/Between (START DATE) and (END DATE), did} (POLICYHOLDER)'s health coverage through (ESTABLISHMENT) cover as dependents any persons who do not live here?
	YES       1 {BOX_08}         NO       2 {BOX_08}         REF       -7 {BOX_08}         DK       -8 {BOX_08}
	HELP AVAILABLE FOR DEFINITION OF DEPENDENT.
	DISPLAY 'Does' IF NOT ROUND 5. DISPLAY 'Between   (START DATE) and (END DATE), did' IF ROUND 5.
	IF CODED '1' (YES), FLAG INSURANCE THROUGH THIS     ESTABLISHMENT-PERSON-PAIR AS 'COVERING PERSON NOT     LISTED IN RU' IN HP16.
BOX_08 =====	
	IF THERE ARE NO POLICYHOLDERS OR DEPENDENTS WHO     ARE CURRENT RU MEMBERS, THAT IS, POLICYHOLDER IS A     DU MEMBER BUT NOT A CURRENT RU MEMBER, OR IS     FLAGGED AS 'NOT LISTED IN DU' OR 'POLICYHOLDER     DECEASED' AND INSURANCE ALSO FLAGGED ONLY AS     'COVERING PERSON NOT IN RU', GO TO END_LP02
	OTHERWISE, CONTINUE WITH LOOP 03

## LOOP\_03

FOR EACH ELEMENT IN THE RU-ESTB-PLCYHLDR-COVRDPERS-TRPLS-ROSTER, ASK NAV\_HP03 - END\_LP03

LOOP DEFINITION: LOOP\_03 COLLECTS TIME PERIOD
COVERAGE FOR ALL CURRENT RU MEMBERS COVERED BY THE
INSURANCE THROUGH THIS ESTABLISHMENT-PERSON-PAIR.
THIS LOOP CYCLES ON CURRENT RU MEMBERS WHO ARE
SELECTED AS DEPENDENTS AT HP16 AND THE RU MEMBER
WHO IS FLAGGED AS THE POLICYHOLDER FOR THIS
INSURANCE.

NAVIGATOR DETAILS: LOOP\_03 USES NAV\_HP03 TO
CONTROL THE FLOW OF THE LOOP.

## NAV\_HP03

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF ESTABLISHMENT} {STR-DT}

SERIES: {Insurance Coverage Duration during Reference Period / Self-Employed RU Member's Insurance Coverage}

USE THE LINKS BELOW TO COMPLETE ALL QUESTIONS WITHIN THIS SERIES.

WHEN ALL LINKS ARE MARKED "DONE," USE [Continue Interview] TO GO PAST THIS SERIES.

IF NEEDED, [Previous Page] WILL TAKE YOU TO QUESTIONS  $\underline{\text{BEFORE}}$  THIS SERIES.

#### Question Series

- [1. Coverage duration for [Person's Name-65] through
   [Establishment Name-30]] [Status-25]
- [2. Coverage duration for [Person's Name-65] through
   [Establishment Name-30]] [Status-25]
- [3. Coverage duration for [Person's Name-65] through [Establishment Name-30]] [Status-25]

C I A C I S	OSTER DETAILS: OL # 1 HEADER: QUESTION SERIES NSTRUCTIONS: DISPLAY RU MEMBER'S FIRST, MIDDLE, ND LAST NAMES (PERS.FULLNAME) OL # 2 HEADER: EMPTY NSTRUCTIONS: DISPLAY THE MOST CURRENT NAVIGATOR TATUS FOR EACH RU MEMBER EACH TIME THE NAVIGATOR S PRESENTED
Т	OSTER DEFINITION: HIS ITEM DISPLAYS THE RU-ESTB-PLCYHLDR-COVRD- ERS-TRPLS-ROSTER FOR SELECTION.
1	OSTER BEHAVIOR: . SELECT ALLOWED MULTIPLE SELECT, ADD, DELETE, AND EDIT DISALLOWED.
	OSTER FILTER: ISPLAY ALL RU MEMBERS SELECTED AT HP16.
 C	ONTINUE WITH BOX_09 FOR SELECTED RU MEMBER.

BOX\_09

END_LP03 ======	
 	CYCLE ON NEXT PERSON IN THE RU-ESTB-PLCYHLDR-COVRD-PERS-TRPLS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION.
	IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_03 AND CONTINUE WITH END_LP02
END_LP02	
 	CYCLE ON NEXT PAIR IN THE RU-ESTABLISHMENT-PERSON-PAIRS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION.
	IF NO OTHER PAIRS MEET THE STATED CONDITIONS, END LOOP_02 AND CONTINUE WITH BOX_10
BOX_10 =====	
     	IF LOOPING ON AN ESTABLISHMENT FLAGGED IN EMPLOYMENT AS 'PROVIDES HEALTH INSURANCE' AND NOT FLAGGED AS 'SELF-EMPLOYED' WITH A FIRM-SIZE-1, GO TO END_LP01
I	OTHERWISE, CONTINUE WITH HP18

HP18 ====

{POLICYHOLDER FIRST MIDDLE LAST NAME} {NAME OF
ESTABLISHMENT} {STR-DT}
{END-DT}

Aside from (POLICYHOLDER)'s (ESTABLISHMENT) insurance, is there another health insurance plan that anyone in the family obtains from {CATEGORY NAME FROM HX03 OR HX23}?

YES	1	{END_LP01}
NO	2	{END_LP01}
REF	-7	{END_LP01}
DK	-8	{END_LP01}

DISPLAY THE FOLLOWING FOR 'CATEGORY NAME FROM HX03| OR HX23': - 'a professional association' IF CODED '1' AT - 'a small business group' IF CODED '2' AT HX03 - 'a union' IF CODED '3' AT HX03 - 'an insurance agent' IF CODED '5' AT HX03 - 'an insurance company' IF CODED '6' AT HX03 - 'an HMO' IF CODED '7' AT HX03 - 'a previous employer' IF CODED '8' AT HX03 - 'a previous employer (COBRA)' IF CODED '9' AT HX03 - 'a high risk pool' IF CODED '10' AT HX03 - 'the {HX030V OTHER SPECIFY TEXT}' IF CODED '91' | AT HX03 - 'source purchased for that business' IF CODED '-7' OR '-8' AT HX03 - 'a group or association' IF CODED '1' AT HX23 - 'a school' IF CODED '3' AT HX23 - 'an insurance agent' IF CODED '4' AT HX23 - 'an insurance company' IF CODED '5' AT HX23 - 'an HMO' IF CODED '6' AT HX23 - 'a union' IF CODED '7' AT HX23 - 'a previous employer (COBRA)' IF CODED '8' AT HX23 - 'a previous employer (not COBRA)' IF CODED '9' AT HX23 - 'a spouse's (or deceased spouse's) previous employer' IF CODED '10' AT HX23 - 'some other employer' IF CODED '11' AT HX23 - 'the plan of someone not living here' IF CODED **`**12' AT HX23 - 'a high risk pool' IF CODED '13' AT HX23 - 'the {HX230V OTHER SPECIFY TEXT} IF CODED '91' AT HX23 - 'a source that provided directly purchased insurance' IF CODED '-7' OR '-8'

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END_LP01	
	IF HP18 IS CODED '1' (YES), CYCLE TO COLLECT NEXT   ESTABLISHMENT NAME.
	IF HP18 IS NOT ASKED OR IS CODED '2' (NO), '-7'   (REFUSED), OR '-8' (DON'T KNOW), END LOOP_01 AND   CONTINUE WITH BOX_11
BOX_11 =====	
	RETURN TO THE HEALTH INSURANCE (HX) SECTION.