BOX_00	**(HH1000)**	**Item Type:** Route	**Type Class:** If Then

Route Details: 01 Box = BOX_00, BOX_10, BOX_20, BOX_30, BOX_40, BOX_50, BOX_60, BOX_70

04 Single Select = HH40, HH50, HH60, HH70, HH90, HH120

08 Multiple Select = HH10, HH20

09 Multiple Select with Display Roster = HH130

11 Multiple Select with Add/Edit/Delete = HH80

19 Numeric Field = HH30, HH100, HH110

23 Text Field = HH140

Roster 2 = HH130

Roster 3 = HH80

BOX_10	**(HH1001)**	**Item Type:** Route	**Type Class:** If Then

Route Details: Context header display instructions: display EVNT.EVNTBEGM as three letters.

BOX_20	**(HH1010)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If provider is flagged as 'AGENCY', in the current round or prior round (preload.HHType= 1), continue with HH10.

If provider is flagged as 'INFORMAL' in the current round or prior round (preload.HHType= 2) and it is Round 1, go to BOX_40.

If provider is flagged as 'PAID INDEPENDENT', in the current round or prior round (preload.HHType=3), go to BOX_30.

Otherwise, go to HH70.

HH10   **(HH1015)**   **BLAISE NAME:** CodeAllHcarWrkrProf

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THHPROFPR	**Answers allowed:** 10	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

📖HH-1

Please look at card HH-1. During {VISIT MONTH}, what types of health care workers from {PROVIDER} provided home care services for {you/{PERSON}}?

ENTER ALL THAT APPLY.

HELP: F1

Responses:

CERTIFIED NURSING ASSISTANT (CNA)	1	HH20	(HH1020)
DIETITIAN/NUTRITIONIST	2	HH20	(HH1020)
I.V. OR INFUSION THERAPIST	3	HH20	(HH1020)
MEDICAL DOCTOR	4	HH20	(HH1020)
NURSE/NURSE PRACTITIONER	5	HH20	(HH1020)
OCCUPATIONAL THERAPIST	6	HH20	(HH1020)
PHYSICAL THERAPIST	7	HH20	(HH1020)
RESPIRATORY THERAPIST	8	HH20	(HH1020)
SOCIAL WORKER	9	HH20	(HH1020)
SPEECH THERAPIST	10	HH20	(HH1020)
NONE OF THESE	95	HH20	(HH1020)
REFUSED	RF	HH20	(HH1020)
DON'T KNOW	DK	HH20	(HH1020)

Programmer Instructions: For specifications purposes only (this check is automatic): CAPI does not allow '95' (NONE OF THESE), 'RF' (REFUSED) or 'DK' (DON'T KNOW) in combination with any other code.

Display the following message if these codes are selected in combination with any other code "THIS CODE CANNOT BE SELECTED WITH OTHER OPTIONS. VERIFY AND RE-ENTER."

MHOP NOTE: Codes 1-10 represented providers who are skilled.

Display Instructions:

HH20   **(HH1020)**   **BLAISE NAME:** CodeAllHcarWrkrOth

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

☑ Help Available (CodeAllHHOthHelp)   ☑ Show Card (HH-2)   ☐ Look Up File ( )

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

📖HH-2

Please look at card HH-2. {Which/Other than what we have discussed, which} of these types of health care workers from {PROVIDER} provided home care services for {you/{PERSON}} during {VISIT MONTH}?

ENTER ALL THAT APPLY.

HELP: F1

Responses:	COMPANION	--------------------------------	1	HH30	(HH1025)
	HOMEMAKER/HOUSE CLEANER	----------------	2	HH30	(HH1025)
	HOME HEALTH AIDE/HOME CARE AIDE	-----	3	HH30	(HH1025)
	HOSPICE WORKER	--------------------------------	4	HH30	(HH1025)
	NURSE'S AIDE	--------------------------------	5	HH30	(HH1025)
	PERSONAL CARE ATTENDANT	------------------	6	HH30	(HH1025)
	NONE OF THESE	--------------------------------	95	HH30	(HH1025)
	REFUSED	--------------------------------	RF	HH30	(HH1025)
	DON'T KNOW	--------------------------------	DK	HH30	(HH1025)

Programmer Instructions:	For specifications purposes only (this check is automatic): CAPI does not allow '95' (NONE OF THESE), 'RF' (REFUSED) or 'DK' (DON'T KNOW) in combination with any other code.

Display the following message if these codes are selected in combination with any other code "THIS CODE CANNOT BE SELECTED WITH OTHER OPTIONS. VERIFY AND RE-ENTER."

MHOP NOTE: Codes 1-6 represented providers who are unskilled. If HH10 and HH20 are only some combination of codes '95' (NONE OF THESE), 'RF' (REFUSED), and 'DK' (DON'T KNOW), the provider is also unskilled.

Display Instructions:	Display "Which" if HH10 is coded '95' (NONE OF THESE), 'RF' (REFUSED) or 'DK' (DON'T KNOW). Otherwise, display "Other than what we have discussed, which".

HH30   **(HH1025)**   **BLAISE NAME:** HHMPNum

Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1
Type Class:	Integer	**Field Size:** 2		
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 99

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

How many people from {PROVIDER} provided home care services for {you/{PERSON}}?

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

Programmer Instructions: If Round 1, go to BOX_40.
Otherwise, go to HH70.

Display Instructions:

BOX_30   (**HH1026**)   **Item Type:** Route   **Type Class:** If Then

---

Route Details: If provider is HHType=3 and HH40 is coded 1-10, or RF or HH50 is coded 1-6, or RF in this round for this provider, or preload.HHProvType<> empty for this provider, go to BOX_40.

Otherwise, continue with HH40.

Full Detail Spec

HH40	**(HH1027)**	**BLAISE NAME:** HHProfTp		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	THHPROFPR	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

📖HH-1

Please look at card HH-1. What type of health care worker is {PROVIDER} who provided home care services for {you/{PERSON}} during {VISIT MONTH} ?

HELP: F1

Responses:

CERTIFIED NURSING ASSISTANT (CNA)	1
DIETITIAN/NUTRITIONIST	2
I.V. OR INFUSION THERAPIST	3
MEDICAL DOCTOR	4
NURSE/NURSE PRACTITIONER	5
OCCUPATIONAL THERAPIST	6
PHYSICAL THERAPIST	7
RESPIRATORY THERAPIST	8
SOCIAL WORKER	9
SPEECH THERAPIST	10
NONE OF THESE	95
REFUSED	RF
DON'T KNOW	DK

Programmer Instructions: If coded 95, 'NONE OF THESE' or 'DK' (DON'T KNOW), go to HH50.

If round 1, and coded 1-10, RF go to BOX_40.
Otherwise, go to HH70

Display Instructions:

Full Detail Spec

HH50	**(HH1030)**	**BLAISE NAME:** HHProfTpOth

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

☑ Help Available (HHProfTpOthHelp)　　　　☑ Show Card (HH-2)　　　　☐ Look Up File (　)

Context Header:　　　{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

📖HH-2

Please look at card HH-2. Which of these types of health care workers, if any, is {PROVIDER} who provided home care services for {you/{PERSON}} during {VISIT MONTH}?

HELP:F1

Responses:　　　COMPANION ------------------------------- 1
　　　　　　　　　HOMEMAKER/HOUSE CLEANER --------------- 2
　　　　　　　　　HOME HEALTH AIDE/HOME CARE AIDE ----- 3
　　　　　　　　　HOSPICE WORKER ------------------------ 4
　　　　　　　　　NURSE'S AIDE --------------------------- 5
　　　　　　　　　PERSONAL CARE ATTENDANT ----------------- 6
　　　　　　　　　NONE OF THESE ------------------------- 95
　　　　　　　　　REFUSED ------------------------------- RF
　　　　　　　　　DON'T KNOW --------------------------- DK

Programmer Instructions:　　If round 1, go to BOX_40.
　　　　　　　　　　Otherwise, go to HH70.

Display Instructions:

BOX_40	**(HH1032)**	**Item Type:** Route	**Type Class:** If Then

Route Details: If HH60 was already asked for this same RU member-provider pair, go to HH70.

Otherwise, continue with HH60.

HH60	**(HH1033)**	**BLAISE NAME:** HHCareBefYr		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TYESNO	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

Did {someone from} {PROVIDER} <u>ever</u> provide home care services for {you/{PERSON}} before January 1, {YEAR}?

Responses:	YES	--	1	HH70	(HH1040)
	NO	--	2	HH70	(HH1040)
	REFUSED	--	RF	HH70	(HH1040)
	DON'T KNOW	-------------------------------------	DK	HH70	(HH1040)

Display Instructions: Display 'someone from' if provider is flagged as 'AGENCY'. Otherwise, use a null display.

For specifications purposes only; CAPI handles automatically: 'YEAR' in question text is first calendar year of panel.

HH70	**(HH1040)**	**BLAISE NAME:** HHSpecCond		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TYESNO	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER......} {EVN-MO}

Question Text:

Thinking about all of the home care services {you/ {PERSON}} {have/has} received from {someone from} {PROVIDER} during {VISIT MONTH}, were any of these home care services related to any specific health problem?

IF OLD AGE MENTIONED, SELECT 'YES' AND ENTER 'OLD AGE' AS CONDITION

HELP: F1

Responses:	YES	--	1	HH80	(HH1045)
	NO	--	2	HH90	(HH1085)
	REFUSED	--	RF	HH90	(HH1085)
	DON'T KNOW	--	DK	HH90	(HH1085)

Display Instructions: Display 'someone from' if provider is flagged as 'AGENCY'.

HH80 (HH1045) **BLAISE NAME:** HHCondRoster

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

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

What health condition led {you/{PERSON}} to receive home health care services from {someone from} {PROVIDER} during {VISIT MONTH}?

PROBE: Any other health condition?

ENTER ALL THAT APPLY.

CTRL-A: ADD
CTRL-E: EDIT
CTRL-D: DELETE
HELP: F1

Responses:

{MEDICAL CONDITION} 1	----------------------	1	HH90	(HH1085)
{MEDICAL CONDITION} 2	----------------------	2	HH90	(HH1085)
{MEDICAL CONDITION} 3	----------------------	3	HH90	(HH1085)
{MEDICAL CONDITION} 4	----------------------	4	HH90	(HH1085)
{MEDICAL CONDITION}N	----------------------	5	HH90	(HH1085)

Programmer Instructions:	Roster Behavior: 1. Multiple select allowed. 2. Multiple add allowed. 3. Limited delete allowed. Interviewer may delete a condition added at this item until CAPI creates the link between this condition and the event. The link is created when the collection of utilization and/or charge/payment data is complete. 4. Limited edit allowed. Interviewer may edit a condition name newly added at this item until CAPI creates the link between this condition and the event. The link is created when the collection of utilization and/or charge/payment data is complete.
Display Instructions:	Roster 3 – Add/Edit/Delete Allowed Roster Definition: Display the Person's-Medical-Conditions Roster for the selection and/or addition of one or more medical condition (s) associated with this event. Display name of medical condition (COND.CONDNAM). Roster Filter: Display all conditions on person's roster; no filter. Display 'someone from' if provider is flagged as 'AGENCY'.

HH90	**(HH1085)**	**BLAISE NAME:** HHFreq		
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**
Type Class:	Enumerated	**Field Size:**		
Answer Type:	TFREQCY	**Answers allowed:** 1	**ArrayMax:**	**Max value:**

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

During {VISIT MONTH}, did {someone from} {PROVIDER} <u>usually</u> come to the home to help {you/ {PERSON}} <u>every week</u>, only <u>some weeks</u>, or did they come <u>only once</u> during {VISIT MONTH}?

Responses:

EVERY WEEK	-----------------------------	1	HH100	(HH1090)
SOME WEEKS	-----------------------------	2	HH110	(HH1095)
ONLY CAME ONCE	-----------------------------	3	BOX_50	(HH1125)
REFUSED	-----------------------------	RF	BOX_50	(HH1125)
DON'T KNOW	-----------------------------	DK	BOX_50	(HH1125)

Display Instructions: Display 'someone from' if provider is flagged as 'AGENCY'.

Full Detail Spec

HH100	**(HH1090)**	**BLAISE NAME:** HHDaysWeek			
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1	
Type Class:	Integer	**Field Size:** 1			
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 7	

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

Context Header:　　{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

During {VISIT MONTH}, about how many days <u>per week</u> did {someone from} {PROVIDER} come?

PROBE: We just need to know <u>in general</u>.

ENTER DAYS PER WEEK

Responses:

	---	1	BOX_50	(HH1125)
REFUSED	--	RF	BOX_50	(HH1125)
DON'T KNOW	------------------------------------	DK	BOX_50	(HH1125)

Programmer Instructions:

Hard range: 1-7.

 Display the following message if an out of range response is entered: "THE VALUE MUST BE BETWEEN 1 AND 7. VERIFY WITH RESPONDENT AND RE-ENTER."

Display Instructions:　　Display 'someone from' if provider is flagged as 'AGENCY'.

Full Detail Spec

HH110	**(HH1095)**	**BLAISE NAME:** HHDaysMth				
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:** 1		
Type Class:	Integer	**Field Size:** 2				
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:** 31		

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

Context Header:　{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

About how many days <u>during</u> {VISIT MONTH} did {someone from} {PROVIDER} come?

PROBE: We just need to know <u>in general</u>.

ENTER 1-{28/29/30/31} DAYS PER MONTH

Responses:	--	1	BOX_50	(HH1125)
	REFUSED -------------------------------------	RF	BOX_50	(HH1125)
	DON'T KNOW -----------------------------	DK	BOX_50	(HH1125)

Programmer Instructions:　Hard range: 1-31.

Range Check:
CAPI will display an error message and force the interviewer to rectify the data if any of the following situations occur:

If (VISIT MONTH) is: January, March, May, July, August, October or December: 1-31 for number of days.
If (VISIT MONTH) is: April, June, September or November: 1-30 for number of days.
If (VISIT MONTH) is: February: 1-29 for leap years.
Otherwise, 1-28 for number of days.

Display Instructions:　Display 'someone from' if provider is flagged as 'AGENCY'.

Display '28' if HH visit month is February and event year is not a leap year.
Display '29' if HH visit month is February and event year is a leap year.
Display '30' if HH visit month is April, June, September or November.
Display '31' if HH visit month is January, March, May, July, August, October or December.

BOX_50   **(HH1125)**   **Item Type:** Route   **Type Class:** If Then

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Route Details: If 2 or more months, excluding interview month, for this provider for this person have not completed the Home Health (HH) utilization section and if this event is not part of a flat fee group, continue with HH120.

Otherwise, go to BOX_60.

HH120   **(HH1130)**   **BLAISE NAME:** HHFreqOthMth

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

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

I have recorded that {you/{PERSON}} received services from {PROVIDER} during other months. In the other months, did {PROVIDER} visit {only once/the same number of times/{FREQUENCY OF SERVICES…}}?

Responses: YES   --- 1   HH130   (HH1135)
                        NO   --- 2   BOX_60   (HH1145)
                        REFUSED   --- RF   BOX_60   (HH1145)
                        DON'T KNOW   --- DK   BOX_60   (HH1145)

Display Instructions:	Display 'only once' if HH90 was coded '3' (ONLY CAME ONCE). Display 'the same number of times' if HH90, HH100 or HH110 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW). Otherwise, display '{FREQUENCY OF SERVICES}'.
	For 'FREQUENCY OF SERVICES': Display number entered at HH100 and the phrase 'days per week' if a response was recorded at HH100. Display number entered at HH110 and the phrase 'days per month' if a response was recorded at HH110.

HH130   **(HH1135)**   **BLAISE NAME:** HHMthRoster

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

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

During which of the following months did {PROVIDER} visit {only once/the same number of times/{FREQUENCY OF SERVICES}}?

PROBE: Any other months with the same number of visits?

ENTER ALL THAT APPLY.

Responses:	{SELECT ALL EVENTS}	------------------------------	0	HH140	(HH1140)
	{MONTH,YEAR}1	------------------------------------	1	HH140	(HH1140)
	{MONTH,YEAR}2	------------------------------------	2	HH140	(HH1140)
	{MONTH,YEAR}3	------------------------------------	3	HH140	(HH1140)
	{MONTH,YEAR}4	------------------------------------	4	HH140	(HH1140)
	{MONTH,YEAR}N	------------------------------------	5	HH140	(HH1140)

Programmer Instructions: If coded '0' SELECT ALL EVENTS, CAPI should automatically select all of the events displayed on the roster and flag as being part of the repeat visit group.

Flag each month selected at HH130 as a repeat visit related to the event being asked about. (NOTE: The event being cycled on through this HH section administration is the "stem" repeat visit. The events selected at HH130 are each a "leaf". The event driver (ED) section will not serve these repeat visits for the HH section.)

Assign next repeat visit number at the household level. (NOTE: Each repeat visit grouping, whether OP, MV, or HH is assigned this number at a household level. The number will start over every round.)

Roster Behavior:
1. Multiple select allowed.

2. Add, delete, and edit disallowed.

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

Roster definition:
Display the person's Medical-Events-Roster for selection.

Roster filter:
Display only those events that meet the following criteria:
- Have event type 'HH'.

- Created this round, excluding the interview month. (If round 5, do not exclude Dec.)

- Are associated with the same provider as the event asked about during this round.

- Have not been processed through utilization.

Display 'only once' if HH90 was coded '3' (ONLY CAME ONCE). Display 'the same number of times' if HH90, HH100 or HH110 was coded 'RF' (REFUSED) or 'DK' (DON'T KNOW). Otherwise, display '{FREQUENCY OF SERVICES}'.

For 'FREQUENCY OF SERVICES':
Display number entered at HH100 and the phrase 'days per week' if a response was recorded at HH100.
Display number entered at HH110 and the phrase 'days per month' if a response was recorded at HH110.

For "MONTH,YEAR" in the response option area, display visit dates as "MON, YYYY". Abbreviate the month name as three letters.

Display the response option '0' SELECT ALL EVENTS when there is more than one event to display on the roster, otherwise use a null display.

HH140	**(HH1140)**	**BLAISE NAME:** HHVstGrp			
Item Type:	Question	**Field kind:** Datafield	**ArrayMin:**	**Min value:**	
Type Class:	String	**Field Size:** 30			
Answer Type:	{Continuous Answer.}	**Answers allowed:** 1	**ArrayMax:**	**Max value:**	

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

Context Header: {PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER......} {EVN-MO}

Question Text:

INTERVIEWER: RECORD 'NAME OF REPEAT VISIT GROUP' FOR MONTHS SELECTED IN PREVIOUS QUESTION.

Responses: -- 1   BOX_60   (HH1145)

Display Instructions:

BOX_60	**(HH1145)**	**Item Type:** Route	**Type Class:** If Then

Route Details: Go to the Charge/Payment (CP) section if it needs to be asked for this home health event, i.e. its status wasn't set to 'Completed' because it was part of a Flat Fee situation where the charges were collected in the CP section for another event in that Flat Fee group.

Otherwise, continue with BOX_70.

BOX_70	**(HH1150)**	**Item Type:** Route	**Type Class:** If Then

Route Details: Go to the Event Driver (ED) section.

[End of HH]