MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 00</u>	<u>(OE1000)</u>	Item Type: Route	Type Class: If Then
Route Details:	01 Box: BOX BOX_80, BO BOX_170, BO 02 Loop: LOO 03 End Loop 04 Single Sel 0E160, OE1 05 Single Sel 06 Single Sel 08 Multiple 14 Regular D 15 Regular D 17 Dollar Ite	_00, BOX_10, BOX_20, BOX_2 X_90, BOX_100, BOX_110, BO DX_180, BOX_190, BOX_200, DP_10. : END_LP10. ect: OE20_01, OE20_05, OE4 70, OE190, OE200, OE220. ect with Display Roster: OE50	25, BOX_30, BOX_40, BOX_50, BOX_60, BOX_70, bx_120, BOX_130, BOX_140, BOX_150, BOX_160, BOX_210. 0, OE60_05, OE80, OE90, OE100, OE110, OE150, 0_01, OE70. 0E10, OE30_01, OE60_01, OE210.
	23 Text Field	l: OE120, OE140.	

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 10</u>	<u>(OE1001)</u>	Item Type: Route	Type Class: If Then
Route Details:		ader Instructions: son.FullName, Insurance.Plcył	ıldr, Insurance.HISrcName.
	'{you/{POLIC PersID as th Otherwise, c policyholder 'PLCYHLDR I	e policyholder for the insuranc display '{POLICYHOLDER}' subs r is 'POLICYHOLDER NOT LISTEE NOT IN DU-' followed by the 15	if the current round respondent is the same
	followed by	the first 15 characters of the e	ntry at HP110 (see HP specifications).
	For '{START always Jan 1		ference period start date (typically-but not Ind interview date if Rds 2-5). Display as full
	current rour		rence period end date (typically but not always Dec 31 if Round 5). Display as full month, xx, EndRefDt.
	as full mont		person level reference period start date. Display D16". Use variables Person.BegRefM,
	full month,		rson level reference period end date. Display as 5". Use variables Person.EndRefM,
	the variable if Insurance	'Insurance.Insurer', display the	on provided at the item level, for any fill using e text entry stored or display "Refused Insurer" now Insurer" if Insurance.Insurer=DK. Items 120, OE160.

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 20</u>	<u>(OE1010)</u>	Item Type: Route	Type Class: If Then
Route Details:	private healt interview dat covered pers Preload.Cov continue wit	h insurance source (employer, te [Insurance.HIPubPriv=Priv son array where Person.MostR dPers.LRndCovd ={previous	listed as a policyholder or covered person on a , union, direct purchase) as of the previous round rate and there is at least one RU member on the tecentRU=RUUnit and round} and Insurance.OrigRnd<>current round],
Programmer Instructions:	- Insurance so - Insurance in provides hea - At least one insurance - At least one	urce (employer, union, direct s flagged as a current or forme lth insurance e current RU member is flagge	ticyholder or covered person on a private health purchase) as of the previous round interview date: er employer, union or direct purchase source that ed as a policyholder or a covered person for this person on the previous round's interview date for e source

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
LOOP 10	<u>(OE1015)</u>	Item Type: Route	Type Class: Begin Loop
Route Details:	For each pri	vate insurance, ask BOX_25	END_LP10.
	in a previou dependent by insurance first. [Insura person arra	nation about private insurance that was created nt RU member is covered as a policyholder or a iew date. This loop cycles by policyholder, then holder on any insurance, cycle on that insurance ere is at least one RU member on the covered J=RUUnit and Preload.CovdPers.LRndCovd <>current round]	
	NOTE: LOOF	2_10 collects information about	It the following situations:
	 The continuation of insurance coverage associated with an employer from the Employment (EM) section that provides health insurance and is through a 'CURRENT MAIN' or 'CURRENT MISCELLANEOUS' job that was collected in a previous round (tha employer may now be either current or non-current depending on responses in RJ). The continuation of insurance coverage associated with an employer or union from Employment (EM) section that provides health insurance collected in a previous round was not through a current main or miscellaneous job reviewed during the RJ section 		
	collected in	a previous round. This include arked as "POLICYHOLDER NOT	through a direct purchase source that was is insurance where the policyholder was LISTED IN DU" and "POLICYHOLDER
	dependent(have left the RJ. This last and left dep (without the Policyholded they are cov	s) are separated from the poli e original RU). When a jobhold set of conditions handles the endents behind, or the situation e policyholder). This situation r'. This situation can be associa	e through insurance where the eligible cyholder (the policyholder or the dependents ler/policyholder leaves an RU, we will never ask situation where the policyholder has left the RU on where the dependents have left the RU will be treated as 'Dependent(s) Separated from ated with any insurance in a particular RU where older is in another RU. This situation will and.
	same RU as 'POLICYHOL	all of the dependents or wher	nce in an RU where the policyholder is in the e the policyholder was originally created as LICYHOLDER DECEASED'. See HX BOX_10 for
	was a cover		least one RU member (or the policyholder) who nd's interview date for this insurance to be

MEPS_V2 Full Detail Spec			Old Emp	ol\Priv Related Ins (OE) Section
<u>BOX 25</u>	<u>(OE1025)</u>	Item Type: Route	Type Class	: If Then
Route Details:	If the policyho HP90=98), continue with Otherwise, go	OE10.	NOT LISTED IN	DU' (Insurance.Plcyhldr=902 ,
	otherwise, go	10 0120_01.		
<u>OE10</u>	<u>(OE1030)</u>	BLAISE NAME: OEP	lcyhldrRoster	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TFMLNAME_	NOTO Answers allowed:	1 ArrayMax:	Max value:
□ Help Available (()	□ Show Card	()	□ Look Up File ()
Context Header:	{POLICYHOLD SOURCE}	ER'S FIRST MIDDLE LAST NA	ME} INSURANCE T	HROUGH {NAME OF INSURANCE
Question Text:				
INTERVIEWER: IF SELECT 'NAME NO		R}'S NAME IS LISTED ON T AND CONTINUE.	THE ROSTER BELC	DW, SELECT IT. IF NOT,

Responses:	{FIRST NAME, [MIDDLE NAME], LAST NAME}1	1	OE20_01	(OE1035)
	{FIRST NAME, [MIDDLE NAME], LAST NAME}2	2	OE20_01	(OE1035)
	{FIRST NAME, [MIDDLE NAME], LAST NAME}3	3	OE20_01	(OE1035)
	{FIRST NAME, [MIDDLE NAME], LAST NAME}4	4	OE20_01	(OE1035)
	{FIRST NAME, [MIDDLE NAME], LAST NAME}N	5	OE20_01	(OE1035)
	NAME NOT ON ROSTER	99	OE20_01	(OE1035)

Programmer Instructions:	Roster 2 – no add/edit/delete Roster behavior: 1. Single select allowed.
	If a DU member's name is selected from the roster, replace this name as the current policyholder of this insurance. [Set Insurance.Plcyhldr=PersID if DU member selected] If 'NAME NOT ON ROSTER' selected leave the policyholder name as is.
Display Instructions:	Roster Definition: This item displays persons in the DU-members-roster for selection. Roster filter:
	No filter; display all. This can include DU members where PriorRndInelig=YES or EMPTY, but should exclude RU members where RemovedAtRE330=YES. This setting will exclude RU members who were deceased in a prior round as well as any RU members marked as non-key living away, unrelated 1 person RU and incorrectly listed but continues to show persons who could eventually rejoin the RU such as those who are in jail or outside the country.

<u>OE20 01</u>	<u>(OE1035)</u>	BLAISE NAME: ConfCo	ovd	
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:	{POLICYHOLDE SOURCE}	ER'S FIRST MIDDLE LAST NAME	E} INSURANCE T	HROUGH {NAME OF INSURANCE

Question Text:

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

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

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

Programmer Instructions:	Preloaded grid type 1- forced navigation including OE20_01, OE20_02, OE20_03, OE20_04, OE20_N.
	At grid completion, if OE20 is coded '2' (NO), for at least one person, continue with OE30_
	01. Otherwise, (if OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for all persons listed at OE20), go to BOX_30.
	If insurance is through a current employer (Insurance.HISrc=Employer and Jobs.JobTp=Current Main or Current Misc), set Jobs.ConfCovd= OE20_01 entry for the policyholder. (Check OE20_N for the policyholder. If OE20_N= '1' (YES), set Jobs.ConfCovd=Yes. If OE20_N= '2' (NO), set Jobs.ConfCovd=No. If OE20_N= 'RF' (REFUSED), set Jobs.ConfCovd=RF. If OE20_N= 'DK' (DON'T KNOW), set Jobs.ConfCovd=DK.)
	Note: Persons coded '1' (YES), 'DK' (DON'T KNOW), or 'RF' (REFUSED) are considered covered RU members for the current round.
Display Instructions:	Roster 1 – Report
	Col #1 Header: PlcyHldr Instructions: Display an "X" for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.
	Col #2 Header: RU member Instructions: Display the covered person's name (Person.FullName) from the covered person array. This is a protected, uneditable field.
	Roster Filter: Policyholder or person was covered on the previous round's interview date by the insurance (the policyholder or person is an RU member on the covered person array where Person.MostRecentRU=RUUnit and Preload.CovdPers.LRndCovd ={previous round})
	Col #3 Header: Still Covered? Instructions: Entry field for OE20_01 – OE20_N
	For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".
	NOTE: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.

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

OE20_02: What about {you/{PERSON 2}}? {{Are/Is}/{Were/Was}} {you/he/she} still covered through {INSURANCE SOURCE NAME} as of {today,} {END DATE}? OE20_03: What about {PERSON 3}? OE20_04: What about {PERSON 4}? OE20_N: Repeat question text for OE20_02-OE20_N for as many RU members that fit the roster filter criteria.

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

Display '{Are/Is}' if not round 5. Display '{Were/Was}' if round 5.

Display 'today,' if the current round RU reference period end date is equal to the computer date. Otherwise, use a null display.

<u>OE30_01</u>	<u>(OE1046)</u>	BLAISE NAME: EnterH	IEndDate	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TDateVolunteer	Answers allowed: 1	ArrayMax:	Max value:
□ Help Available	()	\Box Show Card ()	□ Look Up File ()
Context Header:	{POLICYHOLD OF INSURANC		ST NAME} IN	ISURANCE THROUGH {NAME
Question Text:				
	{START DATE} di URCE NAME} end	d {your/{PERSON}'s} hea ?	lth insurance th	nrough
{IF INSURANCE END	DED AFTER 12/31/{Y	EAR}, BACK-UP AND CHANG	GE OE20 TO 'YE	S'.}
Responses:		D, ENDED BEFORE	1 C	0E30_02 (OE1047)

{START DATE}

Programmer Instructions:	 Preloaded grid type 2 – forced navigation, including items OE30_01, OE30_02, OE_30_03, OE30_04, OE30_05. Only display OE30_01 and applicable follow-up items for row entries where OE20_01 is coded '2' (NO) for this person. If coded '2' (VOLUNTEERED, ENDED BEFORE {START DATE}), go to the next person in the grid. If no next person in grid, go to BOX_30. Note: Persons coded '1' (ENTER DATE) are considered covered RU members for the current round.
Display Instructions:	Roster Report 1 Col #1 Header: PlcyHldr Instructions: Display an "X" for the row of the person who is the policyholder. If no current RU member covered person is the policyholder, this column is empty. This is a protected, uneditable field.
	Col #2 Header: RU member Instructions: Display the covered person's name (Person.FullName) from the covered person array. This is a protected, uneditable field.
	Roster Filter: Use OE20_01 filter.
	NOTE: Ideally, if the policyholder is a current RU member covered person, that person will be listed first in the form pane grid, followed by RU members in descending PID order. However, that might not be possible without first creating a separate person array for this item. If not possible (grid order is predetermined by single person array), policyholder may not be listed first in the form pane grid.
	Col #3 Header: Still Covered? Instructions: Display the entered responses from OE20_01 for each person in a protected, uneditable field.
	Col#4 Header: When Ended Instructions: Item OE30_01. Only display as an active cell if OE20_01 is coded '2' (NO) for this person.
	Col #5 Header: Month Instructions: Item OE30_02. Only display as an active cell if OE30_01 is answered '1'.
	Col #6 Header: Day Instructions: Item OE30_03. Only display as an active cell if OE30_01 is answered '1' and OE30_02 <> 'RF' (REFUSED) or 'DK' (DON'T KNOW).
	Col#7 Header: Year Instructions: Item OE30_04. Only display as an active cell if OE30_01 is answered '1'.
	Col #8 Header: Whole Month? Instructions: Item OE30_05. Only display as an active cell if OE30_02 < > RF, DK and OE30_ 03=RF, DK.

Display 'IF INSURANCE ENDED .. YES'.' if Round 5, where 'YEAR' is the second calendar year of the panel (SecondPanYear). Otherwise, use a null display.

OE30 02 Item Type: Type Class: Answer Type:	(OE1047) Question Integer {Continuous Answe	BLAISE NAME: HIEndM Field kind: Datafield Field Size: 2 er.} Answers allowed: 1	MM ArrayMin ArrayMa	
□ Help Available ()	\Box Show Card ()	\Box Look Up File ()
Context Header:	{POLICYHOLDER'S SOURCE}	5 FIRST MIDDLE LAST NAME	E} INSURAN	CE THROUGH {NAME OF INSURANCE
Question Text: [On what date after {INSURANCE SOU ENTER MONTH		d {your/{PERSON}'s} hea ']	lth insuranc	e through
Responses: Display Instructions:	REFUSED DON'T KNOW	text in brackets and in light	RF DK	OE30_03 (OE1048) OE30_04 (OE1049) OE30_04 (OE1049) nt text.

MEPS_V2			Old]	Empl\Priv Relate	d Ins (OE) Sect	tion
Full Detail Spec						
<u>OE30 03</u>	<u>(OE1048)</u>	BLAISE NAME: HIEndl	DD			
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min value	:1	
Type Class:	Integer	Field Size: 2				
Answer Type:	{Continuous Answer	.} Answers allowed: 1	ArrayMa	x: Max value	e: 31	
□ Help Available ()	\Box Show Card ()		ook Up File ()
Context Header:	{POLICYHOLDER OF INSURANCE \$	R'S FIRST MIDDLE LAS SOURCE}	ST NAME}	INSURANCE TH	IROUGH {NAM	ИE
Question Text:						
	{START DATE} did JRCE NAME} end?]	{your/{PERSON}'s} hea	lth insuranc	e through		
ENTER DAY						
Responses:			-	OE30_04 OE30_04	(OE1049) (OE1049)	
				OE30_04 OE30_04	(OE1049) (OE1049)	
			211		(52101))	
Display Instructions:	Display question te	xt in brackets and in light	er grayed ou	ut text.		

MEPS V2 **Old Empl\Priv Related Ins (OE) Section Full Detail Spec** (OE1049) BLAISE NAME: HIEndYYYY **OE30 04** Item Type: Question Field kind: Datafield ArrayMin: Min value: 1900 **Type Class:** Field Size: 4 Integer Answer Type: {Continuous Answer.} Answers allowed: 1 Max value: 2100 ArrayMax: \Box Help Available () \Box Show Card () \Box Look Up File () {POLICYHOLDER'S FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME **Context Header:** OF INSURANCE SOURCE } **Ouestion Text:** [On what date after {START DATE} did {your/{PERSON}'s} health insurance through {INSURANCE SOURCE NAME} end?] ENTER YEAR **Responses:** RF REFUSED DON'T KNOW DK Programmer If OE30 03 (day) is coded 'RF' (REFUSED) or 'DK' (DON'T KNOW) and OE30 02 **Instructions:** (month) is NOT coded 'RF' (REFUSED) or 'DK' (DON'T KNOW), continue with OE30 5. Otherwise, return to OE30 01 for next person on grid. Hard check: 1. Complete date entered at OE30 02 - OE30 04 must not be prior to the current round's RU level reference period start date. If full date is prior to start date, display the following message: "IF COVERAGE ENDED PRIOR TO {REF PERIOD START DATE}, BACK-UP TO OE30 01 (EnterHIEndDate) AND CORRECT RESPONSE." 2. Complete date entered at OE30 02 - OE30 04 must be on or before (i.e., < or =) the person's reference period end date for this round (EndRefM, EndRefD). In round 5, that is typically Dec. 31 for panel year 2. If not, display the following message: "COVERAGE END DATE MUST BE ON OR BEFORE {PERSON'S REFERENCE PERIOD END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT ENTRIES. IF COVERAGE ENDED AFTER PERSON LEFT RU, ENTER {PERSON'S REFERENCE PERIOD END DATE}."

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

MEPS_V2			Old Emp	l\Priv Related Ins (OE) Section
Full Detail Spec				
<u>OE30 05</u>	<u>(OE1050)</u>	BLAISE NAME: HIEnd	WholeMth	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TENDMONTH	Answers allowed: 1	ArrayMax:	Max value:
□ Help Available ()	\Box Show Card ()	Look Up File ()
Context Header:	{POLICYHOLDER': SOURCE}	S FIRST MIDDLE LAST NAM	E} INSURANCE TI	HROUGH {NAME OF INSURANCE
Question Text:				
[On what date after {INSURANCE SOU		id {your/{PERSON}'s} hea ?]	alth insurance the	rough
{Were/Was} {you/h	e/she} covered und	er that insurance the whole	e month or part	of the month?
Responses:	WHOLE MONT	Н	1	
	PART OF THE N	MONTH	2	
	REFUSED		RF	
	DON'T KNOW		DK	
Programmer Instructions:	Return to OE30_0	01 for next person on grid.		
Display Instructions:	Display first para	graph of question text in br	ackets and in lig	hter grayed out text.

<u>BOX 30</u>

<u>(OE1051)</u>

Item Type: Route

Type Class: If Then

Route Details: Continue with BOX_40.

MEPS_V2

Programmer Instructions:	 Placeholder for MHOP specifications. This will be deleted once those specifications are available. (Data delivery needs to review to make sure these are the correct settings.) Determine 'CONTINUOUS COVERAGE' (decide what is needed for CAPI vs. MHOP). For any covered persons where OE30_01 is coded '2' (VOLUNTEERED, ENDED BEFORE {REF PERIOD START DATE}), flag person as not a covered person for even 1 day under this incurrence (important for insurance varies)
	 1 day under this insurance (important for insurance verifications series). For all covered persons where OE20_01 is coded '1' (YES, STILL COVERED), 'RF' (REFUSED) or 'DK' (DON'T KNOW), flag person as 'CONTINUOUS COVERAGE' from that person's start date to that person's end date. For all covered persons where OE30_01 is coded '1' (ENTER DATE), flag person as 'CONTINUOUS COVERAGE' from that person's start date to the date entered at OE30_02-OE30_05 or person's end date (whichever is earlier).

<u>BOX 40</u>	<u>(OE1065)</u>	Item Type: Route	Type Class: If Then	
Route Details:		continue with BOX_50. go to BOX_60.		
<u>BOX 50</u>	<u>(OE1070)</u>	Item Type: Route	Type Class: If Then	
Route Details:	Continue wi	th OE40 if insurance meets th	e following conditions:	

• If HP50 was coded '2' (NO, PLAN IS NOT EXCHANGE), 'RF' (REFUSED) or 'DK'(DON'T KNOW) the round the insurance was created (Preload.Insurance.HP50AnsRndCreated) And

• If insurance direct purchase or SE, FS=1 and is with an 'INSURANCE CO', 'INSURANCE CO.-FROM AGENT' or 'HMO' ((Insurance.DirectPurchTp=Agent, Insurance Co, HMO) or [(Insurance.HISrc=Employer and Jobs.SELFEMP=SelfEmpl and Jobs.EmpEstm= 1) and (HP40 is coded '4' (DIRECTLY FROM AN INSURANCE AGENT), '5' (DIRECTLY FROM AN INSURANCE COMPANY), or '6' (DIRECTLY FROM AN HMO) the round in which the insurance was first created (Preload.Insurance.HP40AnsRndCreated)]) And

• Policyholder is 64 years of age or younger or in age categories 1-8 or Policyholder is "Policyholder deceased or "Policyholder outside the DU" (Insurance.Plcyhldr=901 or 902).

Otherwise, go to BOX_60.

<u>OE40</u>	<u>(OE1075)</u>	BLAISE NAME: OEStExCovg				
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 ()	\Box Show Card ()	□ Look Up File ()		
Context Header:	{POLICYHOLD SOURCE}	ER'S FIRST MIDDLE LAST NAM	E} INSURANCE T	HROUGH {NAME OF INSURANCE		

Question Text:

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

Responses:	YES 1	BOX_60	(OE1110)		
	NO 2	BOX_60	(OE1110)		
	REFUSED RF	BOX_60	(OE1110)		
	DON'T KNOW DK	BOX_60	(OE1110)		
Display Instructions:	Display ', [which may also be known as {ALIAS B} {or {ALIAS C}}]' if there is more than one exchange name associated with the state in which interview is being conducted.				
	Display 'or {ALIAS C}' if there are three exchange nam interview is being conducted.	es associated with the	he state in which		
	For 'STATE EXCHANGE NAME-A', 'ALIAS B', and 'a name(s) associated with the state in which interview is b		ne exchange		

MEPS_V2			Old Empl\Priv Related Ins (OE) Section
Full Detail Spec <u>BOX_60</u>	(OE1110)	Item Type: Route	Type Class: If Then
		item i jper noute	

Route Details: If at least one current RU member not displayed at OE20_01, continue with OE50_01. NOTE: This means at least one current RU member not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <> {previous round}].

Otherwise, go to BOX_80.

<u>OE50 01</u>	<u>(OE1115)</u>	BLAISE NAME: CovdHISrc			
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:	
Type Class:	Enumerated	Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:	
Help Available ()		\Box Show Card ()	\Box Look Up File ()	

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

Question Text:

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

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

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

Programmer Instructions:	Preloaded grid type 2 – forced navigation including OE50_01, OE50_02, OE50_03, OE50_04, OE50_N.
	At grid completion, if OE50 is coded '1' (YES), for at least one person, continue with OE60_ 01. Otherwise (OE50 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for all persons listed at OE50), go to BOX_90.
	Note: Persons coded '1' (YES) are considered covered RU members for the current round.
Display Instructions:	Roster Report 1
	Col #1 Header: RU member Instructions: Display RU members' first, middle, and last names (Person.FullName)
	Roster Filter:
	Display all current RU members that were not displayed at OE20_01. That is, display persons who were not covered by the insurance being looped on, (this includes all new RU members and previous RU members not covered by this insurance on the previous round's interview date, but excludes RU members just marked as no longer covered in OE20) (at least one person where Person.PersID not on covered person array where Person.MostRecentRU=RUID and Preload.CovdPers.LRndCovd <>{previous round}].
	For the display of person names in the first paragraph: {PERSON 1, PERSON 2, PERSON 3, PERSON 4, PERSON N}, display the list of RU members according to the above roster filter specifications. Display first names only. Substitute "you" for the person's first name if the respondent is included in this list. If exactly two names displayed, separate names with the word "and" and no comma. If more than two names listed, separate names using commas, except for between the last two names displayed. Between the last two names displayed, separate names using the word "and".
	Col #2 Header: Covered?
	Instructions: Entry field for OE50_01 – OE50_N
	Variable text display. Replace "{Since {START DATE}/Between {START DATE} and {END DATE}}, {{have/has}/{were/was}}{ you/{PERSON 1}} {been} covered by {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME}?" with:
	OE50_02: What about {you/{PERSON 2}}? {{Has/Have}/{Were/Was}} {you/he/she} {been} covered by {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME} {since
	{START DATE}/between {START DATE} and {END DATE}}?
	OE50_03: What about {PERSON 3}? OE50_04: What about {PERSON 4}?
	OE50_N: Repeat question text for OE50_02-OE50_N for as many RU members that fit the roster filter criteria.
	Display 'since {START DATE}' if not round 5. Display 'between {START DATE} and {END DATE}' if round 5.
	Display '{have/has}' if not Round 5. Display '{were/was}' if Round 5. Display 'been' if not

Round 5. Otherwise, use a null display.

VOLUNTEERED, BEGAN BEFORE

{START DATE}

<u>OE60 01</u>	<u>(OE1120)</u>	BLAISE NAME: CovgSt	artDate	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TDateVolunteer2	Answers allowed: 1	ArrayMax:	Max value:
Help Available ()	\Box Show Card ()	Look Up File ()
Context Header:	{POLICYHOLDER'S SOURCE}	FIRST MIDDLE LAST NAME	E} INSURANCE TH	IROUGH {NAME OF INSURANCE
Question Text:				
On what date since { for {you/{PERSON	. ,	d the health insurance throu	igh {INSURANC	CE SOURCE NAME} begin
Responses:	ENTER DATE		1 OE	60_02 (OE1125)

----- 2

Programmer Instructions:	Preloaded grid type 2 – forced navigation including items OE60_01, OE60_02, OE60_03, OE60_04, OE60_05. Only display OE60_01 and applicable follow-up items for row entries where OE50_01 is coded '1' (YES) for this person. If coded '2' (VOLUNTEERED, BEGAN BEFORE {START DATE}), go to the next person in the
	grid. If no next person in grid, go to BOX_70.
Display Instructions:	Roster Report 1 Col #1 Header: RU Member Instructions: Display RU members' full name. (Person.FullName)
	Roster Filter: Use OE50_01 filter.
	Col #2 Header: Covered? Instructions: Display the entered responses from OE50_01 for each person in a protected, uneditable field.
	Col #3 Header: When Begin Instructions: Item OE60_01. Only display as an active cell if OE50_01 is coded '1' (YES) for this person.
	Col #4 Header: Month Instructions: Item OE60_02. Only display as an active cell if OE60_01 is answered '1'.
	Col #5 Header: Day Instructions: Item OE60_03. Only display as an active cell if OE60_01 is answered '1' and OE60_02 <> 'RF' (REFUSED) or 'DK' (DON'T KNOW).
	Col#6 Header: Year Instructions: Item OE60_04. Only display as an active cell if OE60_01 is answered '1'.
	Col#7 Header: Whole Month? Instructions: Item OE60_05. Only display as an active cell if OE60_02 < > RF, DK and OE60_03 =RF, DK.

MEPS_V2	Old Empl\Priv Related Ins (OE) Section				ction	
Full Detail Spec						
<u>OE60 02</u>	<u>(OE1125)</u>	BLAISE NAME: CovgSt	artMM			
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min	value:	
Type Class:	Date	Field Size:				
Answer Type:	{Continuous Answer	Answers allowed: 1	ArrayMa	ax: Max	value:	
□ Help Available ()	\Box Show Card ()		□ Look Up File ()
Context Header:	{POLICYHOLDER'S F SOURCE}	IRST MIDDLE LAST NAME	E} INSURAN	CE THROUGI	H {NAME OF INSURA	NCE
Question Text:						
[On what date since for {you/{PERSON		the health insurance thro	ugh {INSU	RANCE SO	URCE NAME} begin	1
ENTER MONTH						
Responses:			1	OE60_03	(OE1130)	
	REFUSED		RF	OE60_04	(OE1135)	
	DON'T KNOW		DK	OE60_04	(OE1135)	
Display Instructions:	Display question te	xt in brackets and in light	er grayed o	ut text.		

MEPS_V2			Old	Empl\Priv Related Ins (OE) Section
Full Detail Spec				
<u>OE60 03</u>	<u>(OE1130)</u>	BLAISE NAME: CovgS	tartDD	
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min value:
Type Class:	Date	Field Size:		
Answer Type:	{Continuous Answer	r.} Answers allowed: 1	ArrayMa	x: Max value:
□ Help Available ()	\Box Show Card ()	\Box Look Up File ()
Context Header:	{POLICYHOLDE OF INSURANCE		ST NAME}	INSURANCE THROUGH {NAME
Question Text:				
[On what date since for {you/{PERSON	. ,	the health insurance thro	ugh {INSU	RANCE SOURCE NAME} begin
ENTER DAY				
Responses:			1	OE60_04 (OE1135)
	REFUSED		RF	OE60_04 (OE1135)
	DON'T KNOW		DK	OE60_04 (OE1135)
Display Instructions:	Display question te	ext in brackets and in light	er grayed o	it text.

MEPS_V2 Full Detail Spec			Old Empl	\Priv Related Ins (OE) Section
<u>OE60 04</u>	<u>(OE1135)</u>	BLAISE NAME: CovgSta	artYYYY	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Date	Field Size:		
Answer Type:	{Continuous Answ	er.} Answers allowed: 1	ArrayMax:	Max value:
☐ Help Available (Context Header:		□ Show Card (S FIRST MIDDLE LAST NAME	,	Look Up File ()
Question Text: [On what date since for {you/{PERSON	. ,	lid the health insurance throu	igh {INSURAN	CE SOURCE NAME} begin

Responses:		
	REFUSED	RF
	DON'T KNOW	DK

Programmer Instructions:	If OE60_03 (day) is coded 'RF' (REFUSED) or 'DK' (DON'T KNOW) and OE60_02 (month) is NOT coded 'RF' (REFUSED) or 'DK' (DON'T KNOW), continue with OE60_ 05. Otherwise, return to OE60_01 for next person on grid. Hard checks: 1. Complete date entered at OE60_02-OE60_04 must not be prior to the current round's RU level reference period start date. If full date is prior to start date, display the following message: "IF COVERAGE BEGAN PRIOR TO {REF PERIOD START DATE}, BACK- UP TO OE60_01 (CovgStartDate) AND CORRECT RESPONSE."
	2. Complete date entered at OE60_02-OE60_04 must be on or before the person's reference period end date. If not, display the following message: "COVERAGE FOR {PERSON} CANNOT BEGIN AFTER {PERSON'S END DATE} (DATE PERSON NO LONGER IS PART OF RU). VERIFY AND CORRECT DATE ENTRIES OR BACK-UP TO OE50 (insert blaise name) AND CODE PERSON AS NOT COVERED."
	Soft Check: Complete date entered at OE60_02-OE60_04 should be on or before the complete date entered at OE30_02-OE30_04 for the policyholder (if applicable). If not, display the following message: "UNLIKELY RESPONSE. POLICYHOLDER'S COVERAGE ENDED ON {OE30_02-OE30_ 04 DATE}. COVERAGE FOR {PERSON} BEGAN AFTER THAT DATE. VERIFY AND CORRECT DATE ENTRIES IF NECESSARY."
Display Instructions:	Display question text in brackets and in lighter grayed out text.

MEPS_V2 Full Detail Spec			Old Emp	l\Priv Related Ins (OE) Section
<u>OE60 05</u>	<u>(OE1140)</u>	BLAISE NAME: OECov	dWholeTime	
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:
Type Class:	Enumerated	Field Size:		
Answer Type:	TENDMONTH	Answers allowed: 1	ArrayMax:	Max value:
□ Help Available (()	\Box Show Card ()	□ Look Up File ()
Context Header:	{POLICYHOLDEF SOURCE}	R'S FIRST MIDDLE LAST NAM	E} INSURANCE TI	HROUGH {NAME OF INSURANCE
Question Text:				
[On what date since for {you/{PERSON		did the health insurance thro	ough {INSURAN	CE SOURCE NAME} begin
{Were/Was} {you/h	ne/she} covered un	der that insurance the whole	month or part of	the month?
Responses:	WHOLE MON	ГН	1	
	PART OF THE	MONTH	2	
	REFUSED -		RF	
	DON'T KNOW		DK	
Programmer Instructions:	Return to OE60	_01 for next person on grid.		
Display Instructions:	Display first par	ragraph of question text in bi	ackets and in lig	hter grayed out text.
<u>BOX 70</u>	<u>(OE1145)</u>	Item Type: Route	Type Class:	If Then

Route Details: Continue with BOX_80.

Programmer Instructions:	 Placeholder for MHOP specifications. This will be deleted once those specifications are available. (Data delivery needs to review to make sure these are the correct settings.) Determine 'CONTINUOUS COVERAGE' (decide what is needed for CAPI vs. MHOP). If OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) for the policyholder, flag all persons where OE50 is coded '1' (YES) as 'CONTINUOUS COVERAGE' from the date entered at OE60_02-OE60_04 until the RU level reference period end date (interview date). If OE20 is coded '2' (NO) for the policyholder, flag all persons where OE50 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) as 'CONTINUOUS COVERAGE' from the date entered at OE60_02-OE60_04 until the date entered at OE30_02-OE30_04 for the policyholder. If OE20 was not asked for the policyholder, use the OE20 value for the oldest PID with coverage to determine continuous coverage settings.

<u>BOX 80</u>	<u>(OE1146)</u>	Item Type: Route	Type Class: If Then	
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Route Details:	If: • At least one current RU member is coded as still covered today or newly covered [(OE20_01 is coded `1' (YES), `RF' (REFUSED) or `DK' (DON'T KNOW) for at least one RU member) or (OE50_01 is coded `1' (YES) for at least one RU member)] and
	• the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job [(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) in the current round)], go to OE70. If:
	• No current RU member is coded as still covered today and no one is newly covered [(OE20_01 is coded '2' (NO) for all RU members listed) and (OE50_01 is coded '2' (NO), 'RF' (REFUSED) or 'DK' (DON'T KNOW) for all RU members listed)] and
	• the insurance being looped on changed this round from a current main or current misc job to a former main or former misc job [(Insurance.HISrc=Employer) and (RJ10 or RJ60 is coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) in the current round)], go to OE80.
	Otherwise, go to BOX_90.

MEPS_V2 Full Detail Spec			Old Em	pl\Priv Relat	ed Ins (OE) Section
<u>OE70</u>	<u>(OE1147)</u>	BLAISE NAME: OECO	BRAPlan		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value	e:
Type Class:	Enumerated	Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max valu	ie:
✓ Help Available	(COBRAHelp)	\Box Show Ca	urd ()		Look Up File ()
Context Header:	{POLICYHOLDE SOURCE}	R'S FIRST MIDDLE LAST NAM	E} INSURANCE T	THROUGH {NA	ME OF INSURANCE
Question Text:					
		th insurance through {INSUF 3, PERSON 4, PERSON N			
Responses:	NO	 	2 BC	DX_90 DX_90 DX_90 DX_90 DX_90	(OE1150) (OE1150) (OE1150) (OE1150)
Display Instructions:	Roster Definition Roster Filter: Person or polic insurance being KNOW) for this For the display PERSON 4, PER specifications. respondent is in word "and" and except for betw	t no add/edit/delete allowed on: Display the covered perso yholder is on the covered pe g looped on. [(OE20_01 is cou RU member) or (OE50_01 is of person names in the first SON N}, display the list of F Display full name. Substitute ncluded in this list. If exactly d no comma. If more than tw veen the last two names disp s using the word "and".	on's name (Person rson array and i ded '1' (YES), 'RI coded '1' (YES) paragraph: {PER U members acc "you" for the po two names disp vo names listed,	s currently co F' (REFUSED) for this RU m SON 1, PERSO cording to the erson's first n layed, separa separate nan	overed by the or 'DK' (DON'T ember)] DN 2, PERSON 3, above roster filter ame if the te names with the nes using commas,

MEPS_V2 Full Detail Spec			Old Emp	ol\Priv Related Ins (OE) Section
<u>OE80</u>	<u>(OE1148)</u>	BLAISE NAME: CovgC	ontinAftEmp	
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	()	\Box Show Card ()	□ Look Up File ()
Context Header:	{POLICYHOLDE SOURCE}	R'S FIRST MIDDLE LAST NAMI	E} INSURANCE TI	HROUGH {NAME OF INSURANCE

Question Text:

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

Responses:	YES		OE90	(OE1149)
	NO		OE90	(OE1149)
	REFUSED	RF	OE90	(OE1149)
	DON'T KNOW	DK	OE90	(OE1149)

Display Instructions:

MEPS_V2	Old Empl\Priv Related Ins				
Full Detail Spec	<u>(OE1149)</u>	BLAISE NAME: CovgC	ontinCOBRA		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min valu	e:
Type Class:	Enumerated	Field Size:	· · · · · · · · · · · · · · · · · · ·		
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max valu	ıe:
	1125110				
✓ Help Available	e (COBRAHelp)	\Box Show Ca	urd ()		Look Up File ()
Context Header:	{POLICYHOLDER SOURCE}	'S FIRST MIDDLE LAST NAM	E} INSURANCE T	HROUGH {N/	AME OF INSURANCE
Question Text:					
Did that health ins	urance continue through	ugh COBRA?			
					HELP: F1
Responses:	YES			DX_90	(OE1150)
Responses.)X_90	(OE1150)
)X_90	(OE1150)
	DON'T KNOW			DX_90	(OE1150)
Display Instructions:					
<u>BOX 90</u>	<u>(OE1150)</u>	Item Type: Route	Type Class	: If Then	
Route Details:	covered person where Person.M person array whe KNOW) or OE5 least one current reference period Person.MostRec array where OE2	is part of RU and at least on with coverage during the ref ostRecentRU=RUUnit and a ere OE20_01 is coded '1' (Y 0_01 is coded '1' (YES))] of RU member is listed as a co) (Insurance.Plcyhldr=901 of entRu<>RUID and at least of 20_01 is coded '1' (YES), '1 ed '1' (YES))], go to BOX_	erence period (In at least one other (TES), 'RF' (REF or [(if policyhold overed person w or 902 or PersID one other RU ma RF' (REFUSED)	nsurance.Plcy r RU member FUSED) or 'I ler not part of ith coverage where ember is on th	yhldr=PersID r is on the covered DK' (DON'T f the RU) and (at during the ne covered person

Otherwise, continue with OE100.

MEPS_V2 Full Detail Spec			Old Empl	\Priv Relate	ed Ins (OE) Section
<u>OE100</u>	<u>(OE1155)</u>	BLAISE NAME: OEC	ovPersOutRU		
Item Type:	Question	Field kind: Datafield		Min value	:
Type Class:	Enumerated	Field Size:	-		
Answer Type:	TYESNO	Answers allowed:	1 ArrayMax:	Max valu	e:
✓ Help Available	(CovdDependH	elp)	ow Card ()		Look Up File ()
Context Header:	{POLICYHOL SOURCE}	DER'S FIRST MIDDLE LAST NA	ME} INSURANCE TH	IROUGH {NA	AME OF INSURANCE
Question Text:					
		and {END DATE}, did} {you NAME} cover as dependents			
					HELP: F1
Responses:)W	2 BO2 RF BO2	X_100 X_100 X_100 X_100	(OE1160) (OE1160) (OE1160) (OE1160)
Programmer Instructions:	If coded '1'	(YES), set Insurance.CovPers	OutRU=Yes.		
Display Instructions:	Display 'doe round 5.	s' if not round 5. Display 'be	tween {START DA	TE} and {EI	ND DATE}, did' if
<u>BOX 100</u>	<u>(OE1160)</u>	Item Type: Route	Type Class:	If Then	
Route Details:	round's inter (REFUSED) (YES) (At le '1' (YES), 'I and [insuran	ore current RU members are s view date, that is, at least one or 'DK' (DON'T KNOW) of ast one RU member is on the RF' (REFUSED) or 'DK' (DC ce is not treated as 'Depender policyholder is still part of th	person at OE20_01 r at least one person covered person arra DN'T KNOW) or O tt(s) Separated from	1 is coded '1 at OE50_01 ay where OE E50_01 is co Policyholde	' (YES), 'RF' is coded '1' 20_01 is coded oded '1' (YES))]

Otherwise, go to END_LP10.

<u>OE110</u> Item Type: Type Class:	(OE1165) Question Enumerated	BLAISE NAME: PlanNameChange Field kind: Datafield ArrayMin: Min value: Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:	
□ Help Available ()	\Box Show Card ()	□ Look Up File ()	
Context Header:	{POLICYHOLDER SOURCE}	'S FIRST MIDDLE LAST NAME	E} INSURANCE TH	IROUGH {NAME OF INSURANCE	

Question Text:

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

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

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

Programmer Instructions:	If coded '1' (YES) and insurance is an 'INSURANCE CO.', 'INSURANCE CO. – FROM AGENT', OR 'HMO' (Insurance.DirectPurchTp=Agent, Insurance Co, HMO), continue with OE120. Else, if coded '1' (YES), go to OE130.				
	If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW) and Round 3 and OE40 is coded '1' (YES), go to BOX_150. Else, if coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), go to BOX_160.				
	Note: If coded '2' (NO), 'RF' (REFUSED), or 'DK' (DON'T KNOW), the Insurance Source Name and the Insurer Name stay the same as the preloaded values.				
Display Instructions:	Display first paragraph if there is a value for PRELOAD.INSURANCE.INSURER (Preload.Insurance.Insurer <> EMPTY, RF or DK]. Otherwise, use a null display. For 'PRELOAD.INSURANCE.INSURER', display the name of this insurance's previous round's				
	insurer. That is, display the name of the plan (providing Medicare Supplement/Medigap benefits or hospital/physician benefits) entered at HX630, HX640, or OE140 in the previous round (Preload.Insurance.Insurer).				
	For 'PRELOAD.INSURANCE.HISRCNAME', display the name of this insurance's previous round's insurance source name (Preload.Insurance.HISrcName).				
	Display 'Since {START DATE}, has there been' and '{have/has}' if not round 5. Display 'Between {START DATE} and {END DATE}, was there' and 'had' if round 5.				

MEPS_V2 Old Empl\Priv Related Ins (OE)				Related Ins (OE) Section	
Full Detail Spec					
<u>OE120</u>	<u>(OE1170)</u>	BLAISE NAME: Pla	nName		
Item Type:	Question	Field kind: Datafie	ld ArrayMi	in: Mir	n value:
Type Class:	String	Field Size: 30			
Answer Type:	{Continuous Ans	swer.} Answers allowed	:1 ArrayMa	ax: Ma	x value:
□ Help Available ()	\Box Show Car	d ()		\Box Look Up File ()
Context Header:	{POLICYHOLDE SOURCE}	R'S FIRST MIDDLE LAST N	AME} INSURAN	ICE THROUG	6H {NAME OF INSURANCE
Question Text:					
What is the new plan {PRELOAD.INSUR		POLICYHOLDER}'s} h AME}?	ealth insurance	through	
Responses:			1	OE130	(OE1175)
	REFUSED		RF	OE130	(OE1175)
	DON'T KNOW	/	DK	OE130	(OE1175)
Programmer Instructions:	Write correctio	on to the insurance sourc	e name. [Set Ins	surance.HIS	rcName to OE120 entry]
instructions.	from an insura Therefore, any	ce of insurance was direc nce agent, the insurance change in plan name aut rer name (which is auton	source name is omatically dicta	the same a ates a chang	s the insurer name. ge in the insurance source
Display Instructions:		D.INSURANCE.HISRCM nce source name (Preload			f this insurance's previous

MEPS_V2			Old	Empl\Priv R	elated Ins (OE) Section
Full Detail Spec					
<u>OE130</u>	<u>(OE1175)</u>	BLAISE NAME: Code	AllOEHICov	g	
Item Type:	Question	Field kind: Datafield	ArrayM	in: Min v	value:
Type Class:	Enumerated	Field Size:			
Answer Type:	TOE102437	Answers allowed:	2 ArrayM	ax: Max	value:
✓ Help Available	(CodeAllHICovgH	elp) 🗹 Sho	w Card (HX-	7)	□ Look Up File ()
Context Header:	{POLICYHOLI OF INSURANC	DER'S FIRST MIDDLE L CE SOURCE}	AST NAME	} INSURANC	E THROUGH {NAME
Question Text:					
		alth insurance coverage {{ OURCE NAME}'s new pl			
PROBE: Any other	health coverage thi	rough this plan?			
ENTER ALL THA	T APPLY.				HELP: F1
Responses:	INCLUDING C HMO DENTAL PRESCRIPTION VISION MEDICARE SU LONG TERM C EXTRA CASH SERIOUS DISE DISABILITY WORKER'S CC ACCIDENT OTHER	D PHYSICIAN BENEFIT OVERAGE THROUGH A N DRUGS JPPLEMENT/MEDIGAP CARE IN A NURSING HO FOR HOSPITAL STAYS EASE OR DREAD DISEA OMPENSATION	N 2 2 3 4 5 DME 6 7 SE 8 9 10 11 91 RF	OE130OS BOX_110 BOX_110	(OE1180) (OE1190) (OE1190)

Programmer Instructions:	If coded '91' (OTHER), alone or in combination with any other codes, continue with OE130OS.
	Otherwise, go to BOX_110.
	For specifications purposes only: CAPI does not allow 'RF' (REFUSED) or 'DK' (DON'T KNOW) in combination with any other code.
	If '1' (HOSPITAL AND PHYSICIAN BENEFITS, INCLUDING COVERAGE THROUGH AN HMO) is one of the selections and '5' (MEDIGAP) is not one of the selections, set Insurance.HospHI=Yes and set Insurance.MedigapHI=EMPTY.
	If '5' (MEDIGAP) is one of the selections, set Insurance.MedigapHI=Yes and set Insurance.HospHI=EMPTY.
	If 'DK' (DON'T KNOW) or 'RF' (REFUSED), set both Insurance.HospHI and Insurance.MedigapHI to EMPTY.
Display Instructions:	Display '{do/does}'if not round 5. Display 'did' if round 5.
	Display 'now' if not round 5 and if insurance is still current for at least one RU member (OE20 is coded '1' (YES), 'RF' (REFUSED), or 'DK' (DON'T KNOW) or OE50_01 is coded '1' (YES) for at least one RU member). Otherwise, use a null display.
	Display 'as of {END DATE}' if round 5. Otherwise, use a null display.
	Display OE130 and OE130OS on the same form pane.

MEPS_V2 Full Detail Spec			Old Emp	l\Priv Relat	ted Ins (OE) Section
<u>OE130OS</u>	<u>(OE1180)</u>	BLAISE NAME: OEH	ICovgOS		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min valu	le:
Type Class:	String	Field Size: 25			
Answer Type:	{Continuous	Answer. } Answers allowed: 1	ArrayMax:	Max val	ue:
□ Help Available (()	\Box Show Card (()		Look Up File ()
Context Header:	{POLICYHOLDER FIRST MIDDLE LAST NAME} INSURANCE THROUGH {NAME OF INSURANCE SOURCE}				
Question Text: SPECIFY:					
Responses:	REFUSED DON'T KNO	OW	RF BO	X_110 X_110 X_110	(OE1190) (OE1190) (OE1190)
Display Instructions:	Display OE1	30 and OE130OS on the same	form pane.		
<u>BOX 110</u>	<u>(OE1190)</u>	Item Type: Route	Type Class:	If Then	
Route Details:	(Insurance.I response en 140.	is an 'INSURANCE CO.', 'IN DirectPurchTp=Agent, Insuranc tered at OE120 [Set Insurance.]	ce Co, HMO), auto	matically co	ode OE140 with
	Otherwise,	continue with BOX_120.			

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 120</u>	<u>(OE1195)</u>	Item Type: Route	Type Class: If Then
Route Details:	SUPPLEME (Insurance.N	ENT/MEDIGAP), alone or wit	PHYSICIAN BENEFITS) or '5' (MEDICARE h any other combination of codes HospHI=Yes), continue with OE140.
Programmer Instructions:	'HMO' (Ins '1' (HOSPI' SUPPLEME there is no lo provides eitl	urance.DirectPurchTp∽Agen ΓAL AND PHYSICIAN BEN ENT/MEDIGAP) (Insurance.M	IedigapHI >> Yes and Insurance.HospHI <> Yes), th this insurance because the pair no longer
	insurance is		struction is not currently at OE130 because if the company, or HMO, the insurer name is ge provided.

<u>OE140</u>	(OE1200) BLAISE NAME: HospMedigapPlanName						
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min value:			
Type Class:	String	Field Size: 30					
Answer Type:	{Continuous Answe	er. } Answers allowed: 1	ArrayMax:	Max value:			
Help Available ()	□ Show Card ()	□ Look Up File ()			
Context Header:	{POLICYHOLDER'S SOURCE}	FIRST MIDDLE LAST NAMI	E} INSURANCE TH	ROUGH {NAME OF INSURANCE			
Question Text:							
What is the new plan name for {your/{POLICYHOLDER}'s} health insurance through {INSURANCE SOURCE NAME} which provides the {hospital and physician benefits/Medicare Supplement or Medigap benefits}?							
IF MORE THAN ONE NAME, PROBE: What is the main new plan name?							
ENTER NAME OF M	AIN INSURER THAT P	PROVIDES THE {HOSPITAL A	ND PHYSICIAN/N	IEDIGAP} BENEFITS.			

Responses:			BOX_130	(OE1205)
	REFUSED	RF	BOX_130	(OE1205)
	DON'T KNOW	DK	BOX_130	(OE1205)

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
Programmer Instructions:	Set Insurance	e.Insurer = OE140.	
Display Instructions:	coded '1' (H SUPPLEME Display 'Mec	OSPITAL AND PHYSICIAN NT/MEDIGAP) (Insurance.H licare Supplement or Medigar	ad 'HOSPITAL AND PHYSICIAN' if OE130 is I BENEFITS), but not coded '5' (MEDICARE ospHI=Yes and Insurance.MedigapHI<>Yes). b benefits' and 'MEDIGAP' if OE130 is coded '5' (Insurance.MedigapHI=Yes).
<u>BOX 130</u>	<u>(OE1205)</u>	Item Type: Route	Type Class: If Then

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

At completion of Managed Care (MC) section, continue with BOX_140.

MEPS_V2			Old Empl\Priv Related Ins (OE) Section
Full Detail Spec			
<u>BOX 140</u>	<u>(OE1210)</u>	Item Type: Route	Type Class: If Then

Route Details:	Small business determination
	If insurance being asked about meets the following conditions: Insurance is associated with an employer from the Employment (EM) section that provides health insurance (Insurance.HISrc=Employer), and Job is a 'CURRENT-MAIN-JOB' (Jobs.JobTp=CURRENT MAIN), and Job is 'SELF-EMPLOYED' (Jobs.SELFEMP=SelfEmpl), and EM740 (total employees) or RJ110 (total employees) is greater than 1 but <= 200 (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or 101-200), continue with OE150
	Small business determination
	 If insurance being asked about meets the following conditions: Insurance is associated with an employer from the Employment (EM) section that provides health insurance (Insurance.HISrc=Employer), and
	• Job is a 'CURRENT-MAIN-JOB' (Jobs.JobTp=CURRENT MAIN), and
	 Job is 'NOT SELF-EMPLOYED' (Jobs.SELFEMP< >SelfEmpl), and Firm size is small (see determination below), and
	 EM430 (firm size) is greater than 1 but <= 200 (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or 101-200), or
	• EM440 (firm size category) is coded '2' (2 TO 9), '3' (10 TO 25), '4' (26 TO 50), '5' (51 TO 100), or '6' (101 TO 200) (Jobs.EmpEstm = 2-9 or 10-25 or 26-50 or 51-100 or101-200)
	• EM450 (multiple locations) is coded '2' (NO) (MORELOCTN=No),
	continue with OE150.

Otherwise, go to BOX_150.

MEPS_V2 Full Detail Spec			Old	Empl\Priv R	celated Ins (OE) Section
<u>OE150</u>	<u>(OE1215)</u>	BLAISE NAME: OEStSI	HOP		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min v	value:
Type Class:	Enumerated	Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMa	x: Max	value:
□ Help Available ()	\Box Show Card ()		□ Look Up File ()
Context Header:	{POLICYHOLDER SOURCE}	'S FIRST MIDDLE LAST NAM	E} INSURAN	CE THROUGH	H {NAME OF INSURANCE
Question Text:					
a program where sma	all businesses will l LDER}'s} health in	ME-A} {, [which may also b be able to shop for health in isurance coverage through {	surance plar	ns for their en	nployees. Is
Responses:	YES		1	BOX_150	(OE1220)
	NO		2	BOX_150	(OE1220)
				BOX_150	(OE1220)
	DON'T KNOW		DK	BOX_150	(OE1220)
Display Instructions:	For 'RU STATE	', display the full state name	e associated	with this RU	's address.
		a may also be known as {AL ssociated with the state in w			
	Display 'or {ALI interview is being	AS C}' if there are three sh g conducted.	op names as	ssociated with	h the state in which
		OP NAME-A' 'ALIAS B', a name associated with the sta			

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 150</u>	<u>(OE1220)</u>	Item Type: Route	Type Class: If Then
Route Details:	 [If HP50 or created] or (Insurance.] insurance the was created in Round 3 (current OE And Insurance benefits in the Insurance. Mathematication of the set to current And Policyhold 	[if this insurance set to 'EXCH DirectPurchTp=Exchange) the rough a SE, FS=1 job (Insuran ; Preload.Insurance.HP40AnsI (OE40 was coded '1' (YES)) of 40 value or if OE40=EMPTY provides HOSPITAL AND PI he current or previous round [fedigapHI<>Yes). Use OE130 nt round values as described ea der is 64 years of age or young	EXCHANGE) the round this insurance was IANGE COVERAGE' round it was created] or [if insurance is exchange nce.HISrc=Employer and HP40=8) the round it RndCreated] or [if insurance was made exchange during the current round or in a previous round , check Preload.Insurance.OE40AnsRnd3)] HYSICIAN BENEFITS but not MEDIGAP (Insurance.HospHI=Yes and) value if asked, otherwise use preloaded values

MEPS_V2			Old	Empl\Priv Re	elated Ins (OE) Section
Full Detail Spec					
<u>OE160</u>	<u>(OE1225)</u>	BLAISE NAME: Metal	Plan		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min va	alue:
Type Class:	Enumerated	Field Size:			
Answer Type:	TPLANMETL	Answers allowed: 1	ArrayMa	ax: Max v	alue:
✓ Help Available	(METALPLANSHel	p) 🗆 Show	v Card ()	l	Look Up File ()
Context Header:	{POLICYHOLDER F SOURCE}	IRST MIDDLE LAST NAME}	INSURANCI	E THROUGH {N	IAME OF INSURANCE
Question Text:					
Is {your/{POLICY; plan?	HOLDER}'s} {INSU	RANCE.INSURER } plan	a platinum,	gold, silver, b	ronze, or catastrophic
					HELP: F1
Responses:	PLATINUM PLA	N	1	BOX_160	(OE1230)
	GOLD PLAN		2	BOX_160	(OE1230)
	SILVER PLAN		3	BOX_160	(OE1230)
	BRONZE PLAN		4	BOX_160	(OE1230)
	CATASTROPHIC	CPLAN	5	BOX_160	(OE1230)
	IF VOLUNTEER	ED: SOMETHING ELSE	6	BOX_160	(OE1230)
	REFUSED		RF	BOX_160	(OE1230)
	DON'T KNOW		DK	BOX_160	(OE1230)
Display Instructions:	an entry other than Otherwise, use a n Note: This may b (YES) or it may b	E.INSURER' display the r n 'RF' or 'DK' or EMPTY null display. e the text entry made or at e the name of the insurer f was coded '2' (NO), 'RF'	(Insurance) ito-coded at from the prel	Insurer $\sim RF$, OE140 if OE oad that was s	DK or EMPTY). 110 was coded '1' et as the current round

<u>BOX 160</u>	<u>(OE1230)</u>	Item Type: Route	Type Class: If Then				
Route Details:	If round 2 of	If round 2 or round 4, continue with BOX_170.					
	If round 3, go to OE170.						
	Otherwise (i	f Round 5), go to END_LP10					

<u>BOX 170</u>	<u>(OE1240)</u>	Item Type: Route	Type Class: If Then
Route Details:		only are routed to BOX_170 in I check. BOX_180 is a similar ch	Rounds 2 and 4. This box specifies a "likely eck made in Round 3.
	• [Is a 'PRC HP40=2) or HP40=4) or (HX200 or or HP40=8) or HP40=9 Agent, Insu	· 'INSURANCE COMPANY- · 'INSURANCE COMPANY' HX300=5 or HP40=6) or 'EX0 or 'UNKNOWN TYPE- COL I) in the round the pair was firs rance Co, HMO, Exchange, Ot	ets the following conditions: N' (HP40=1), 'GROUP' (HX200 or HX300=1 or FROM AN AGENT' (HX200 or HX300=3 or (HX200 or HX300=4 or HP40=5) or 'HMO' CHANGE COVERAGE' (HX200 or HX300=11 LECTED AT OTHER' (HX200 or HX300=91 t created [(Insurance.DirectPurchTp=Group, her) or (Insurance.HISrc=Employer and HP40= ted; Preload.Insurance.HP40AnsRndCreated]
	benefits in t Insurance.M set to curren And	he current or previous round [(IedigapHI<>Yes). Use OE130 ht round values as described ea	value if asked, otherwise use preloaded values rlier.]
	-		er or in age categories 1-8 or Policyholder is outside the DU" (Insurance.Plcyhldr=901 or 902).
	Otherwise,	go to END_LP10.	

MEPS_V2 Full Detail Spec			Old E	Cmpl\Priv Rela	ted Ins (OE) Section	1
<u>OE170</u>	<u>(OE1245)</u>	BLAISE NAME: OEFan	nPayPrem			
Item Type:	Question	Field kind: Datafield	ArrayMin	: Min valu	ıe:	
Type Class:	Enumerated	Field Size:	U			
Answer Type:	TMSUPPAY	Answers allowed: 1	ArrayMax	: Max val	ue:	_
✓ Help Available	(PREMPAYHelp)	\Box Show C	Card ()		Look Up File ()	
Context Header:	{POLICYHOLDER' SOURCE}	S FIRST MIDDLE LAST NAM	E} INSURANC	E THROUGH {N	AME OF INSURANCE	
Question Text:						
		E SOURCE NAME}, does one of the premium or cost?		e family pay all	of the premium or	
[<u>Do not</u> include the pay.]	e cost of any copaym	ents, coinsurance or deduc	tibles anyon	e in the family i	may have had to	
[<u>Do</u> include any co	ntribution made to t	he plan as part of a payche	ck.]		HELP: F1	
Responses:	YES, PAY SOM YES, BUT DON SOME OF PREN NO, DO NOT PA		2 2 3 3 4 RF	BOX_190 BOX_190 BOX_190	(OE1280) (OE1280) (OE1280)	
Programmer Instructions:	PREMIUM/COS PREMIUM/COS If coded '1' (YES, '3' (YES, BUT DOI	S, PAY SOME OF PREMI (T) or '3' (YES, BUT DON (T) and Round 3, continue v PAY SOME OF PREMIUM/C N'T KNOW IF PAY ALL OR SC and Rounds 2 or 4, go to C	'T KNOW IF vith OE180. COST), '2' (YES DME OF	PAY ALL OR	SOME OF	r

Display Instructions:

MEPS_V2 Full Detail Spec			Old	Empl\Priv Rela	ted Ins (OE) Section
<u>OE180</u>	(OE1255)	BLAISE NAME: OEPay	PremAmt		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min valu	1 e: 0
Type Class:	Real	Field Size: 9,2			
Answer Type:	{Continuous Answer	r.} Answers allowed: 1	ArrayMa	x: Max val	ue: 9999999.99
□ Help Available ()	\Box Show Card ()		Look Up File ()
Context Header:	{POLICYHOLDER'S SOURCE}	FIRST MIDDLE LAST NAMI	E} INSURAN	CE THROUGH {N	AME OF INSURANCE
Question Text:					
How much {do/does	;} {you/ {POLICYHO	DLDER} } pay for the {IN	SURANCE	SOURCE NAM	IE} coverage?
ENTER AMOUNT					
Responses:			1	OE190	(OE1260)
-	REFUSED		RF	BOX_180	(OE1270)
	DON'T KNOW		DK	BOX_180	(OE1270)
Programmer Instructions:	Allow for an entry	of dollars and cents.			
Display Instructions:	Display OE180, Ol	E190, and OE190OS on t	he same for	n pane.	

MEPS_V2 Full Detail Spec			Old	Empl\Priv l	Related Ins (OE) Section
<u>OE190</u>	<u>(OE1260)</u>	BLAISE NAME: OEPay	PremUnit		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min	value:
Type Class:	Enumerated	Field Size:			
Answer Type:	TCOVRUNIT	Answers allowed: 1	ArrayMa	x: Max	x value:
Help Available ()	\Box Show Card ()		Look Up File ()
Context Header:	{POLICYHOLDEF SOURCE}	'S FIRST MIDDLE LAST NAMI	E} INSURAN	CE THROUG	H {NAME OF INSURANCE
Question Text:					
Is that per year, per mo	onth, per week, or w	hat?			
UNIT OF COVERAG	E:				
Responses:	PER YEAR		1	BOX_180	(OE1270)
	EVERY 3 MON	THS (QUARTERLY)	2	BOX_180	(OE1270)
	EVERY 2 MON	THS (BIMONTHLY)	3	BOX_180	(OE1270)
	PER MONTH		4	BOX_180	(OE1270)
	PER WEEK		5	BOX_180	(OE1270)
	EVERY 2 WEE	KS (BIWEEKLY)	6	BOX_180	(OE1270)
	2 TIMES PER	YEAR (SEMI-ANNUALLY)	7	BOX_180	(OE1270)
		MONTH (SEMI-MONTHLY	,	BOX_180	(OE1270)
	OTHER		91	OE190OS	(OE1265)
	REFUSED -		RF	BOX_180	(OE1270)
	DON'T KNOW		DK	BOX_180	(OE1270)

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

MEPS_V2 Full Detail Spec			Old	Empl\Priv Rel	ated Ins (OE) Sect	ion
<u>OE190OS</u>	<u>(OE1265)</u>	BLAISE NAME: OEPay	PremUnitO	5		
Item Type:	Question	Field kind: Datafield	ArrayMi	n: Min val	lue:	
Type Class:	String	Field Size: 30				
Answer Type:	{Continuous Answer	Answers allowed: 1	ArrayMa	x: Max va	llue:	
□ Help Available ()	\Box Show Card ()		Look Up File ()
Context Header:	{POLICYHOLDEI OF INSURANCE \$	R FIRST MIDDLE LAST SOURCE}	NAME} I	NSURANCE T	HROUGH {NAME	r
Question Text:						
SPECIFY: UNIT O	F COVERAGE					
Responses:			1	BOX_180	(OE1270)	
	REFUSED		RF	BOX_180	(OE1270)	
	DON'T KNOW		DK	BOX_180	(OE1270)	
Display Instructions:	Display OE180, OE1	190 and OE190OS on the	same form	pane.		

MEPS_V2 Full Detail Spec			Old Emp	ol\Priv Related Ins (OE) Section
<u>BOX 180</u>	<u>(OE1270)</u>	Item Type: Route	Type Class:	: If Then
Route Details:		nly are routed to BOX_180 in I _170 is a similar check made in		ox specifies a "likely exchange"
	 [Is a 'PROF HP40=2) or ' HP40=4) or ' (HX200 or H or HP40=8) or or HP40=91): Agent, Insura 1, 2, 4, 5, 6, 8 And Insurance p benefits in the Insurance.Me set to current And Policyholde 	n OE200 if this insurance meets FESSIONAL ASSOCIATION' INSURANCE COMPANY- FI INSURANCE COMPANY' (F X300=5 or HP40=6) or 'EXCH or 'UNKNOWN TYPE- COLL in the round the pair was first c nce Co, HMO, Exchange, Othe 8, or 91) the round it was create rovides HOSPITAL AND PHY e current or previous round [(In edigapHI<>Yes). Use OE130 v round values as described earlied r is 64 years of age or younger deceased or "Policyholder our	(HP40=1), 'GR(ROM AN AGEN IX200 or HX300 IANGE COVER ECTED AT OTI reated] [(Insurance. d; Preload.Insurance. d; Preload.Insurance. SICIAN BENE Isurance.HospHI alue if asked, oth iter.] or in age catego	OUP' (HX200 or HX300=1 or IT' (HX200 or HX300=3 or)=4 or HP40=5) or 'HMO' AGE' (HX200 or HX300=11 HER' (HX200 or HX300=91 ace.DirectPurchTp=Group, .HISrc=Employer and HP40= ance.HP40AnsRndCreated] FITS but not MEDIGAP =Yes and herwise use preloaded values
	Otherwise, go	o to BOX_190.		
<u>OE200</u> Itom Type:	(OE1275) Question	BLAISE NAME: OEPre Field kind: Datafield		Min voluo:
Item Type: Type Class:	Enumerated	Field Size:	Arraymin:	Min value:
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max value:
Help Available	()	\Box Show Card ()	Look Up File ()
Context Header:	{POLICYHOLE SOURCE}	DER FIRST MIDDLE LAST NAME	INSURANCE TH	ROUGH {NAME OF INSURANCE

Question Text:

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

Responses:	YES 1	BOX_190	(OE1280)
	NO 2	BOX_190	(OE1280)
	REFUSED RF	BOX_190	(OE1280)
	DON'T KNOW DK	BOX_190	(OE1280)

MEPS_V2 Full Detail Spec

Display Instructions:

<u>BOX 190</u>	<u>(OE1280)</u>	Item Type: Route	Type Class: If Then	
Route Details:		, continue with BOX_20 , go to END_LP10.).	
<u>BOX 200</u>	<u>(OE1285)</u>	Item Type: Route	Type Class: If Then	
Route Details:	If insurance being asked about provides Medicare supplement/Medigap coverage [(Insurance.MedigapHI=Yes) use OE130 value if asked, otherwise use preloaded values to current round values as described earlier], go to END_LP10.			
	Otherwise,	continue with OE210.		

MEPS_V2 Full Detail Spec	Old Empl\Priv Related Ins (OE) Section				
<u>OE210</u> Item Type:	(OE1290) Question	BLAISE NAME: OEAnt Field kind: Datafield	nDeductAmt ArrayMir	n: Min valu	e:
Type Class:	Enumerated	Field Size:			
Answer Type:	TANNDEDCT	Answers allowed: 1	ArrayMa	x: Max valu	ie:
Help Available	(ANNDEDCTHelp)		Card ()		Look Up File ()
Context Header:	{POLICYHOLDER' SOURCE}	S FIRST MIDDLE LAST NAM	E} INSURANG	CE THROUGH {NA	AME OF INSURANCE
Question Text:					
\$2,700} or more? I		edical care for this plan less deductible for prescription s here.			
					HELP:F1
Responses:		1,350/\$2,700}		END_LP10	(OE1300)
Responses:	{\$1,350/\$2,700}	OR MORE	2	OE220	(OE1295)
Responses:	{\$1,350/\$2,700} NO ANNUAL D	OR MORE	2 	OE220 END_LP10	(OE1295) (OE1300)
Responses:	{\$1,350/\$2,700} NO ANNUAL D	OR MORE	2 	OE220	(OE1295)
Responses: Display Instructions:	 {\$1,350/\$2,700} NO ANNUAL D REFUSED DON'T KNOW Use a null display response category [The policyhold in covered person OR The policyhold 	OR MORE EDUCTIBLE y for 'family' and display '\$ y options if insurance meets der is the only covered pers	2 RF CH,350' in the s the followin on (PersID of exactly one c	OE220 END_LP10 END_LP10 END_LP10 e question text and ng conditions: f Insurance.Plcyl	(OE1295) (OE1300) (OE1300) (OE1300) d '\$1,350' in the hldr = only PersID
Display	 {\$1,350/\$2,700} NO ANNUAL D REFUSED DON'T KNOW Use a null display response category [The policyhold in covered person OR The policyhold 	OR MORE EDUCTIBLE y for 'family' and display 'S y options if insurance meets der is the only covered pers n array) er is deceased and there is o	2 RF CH,350' in the s the followin on (PersID of exactly one c	OE220 END_LP10 END_LP10 END_LP10 e question text and ng conditions: f Insurance.Plcyl	(OE1295) (OE1300) (OE1300) (OE1300) d '\$1,350' in the hldr = only PersID
Display	 {\$1,350/\$2,700} NO ANNUAL D REFUSED DON'T KNOW Use a null display response category [The policyhold in covered person OR The policyhold 901 and only one AND 	OR MORE EDUCTIBLE y for 'family' and display 'S y options if insurance meets der is the only covered pers n array) er is deceased and there is o	2 RF RF DK 31,350' in the s the followin ion (PersID of exactly one c array)]	OE220 END_LP10 END_LP10 END_LP10 equestion text and g conditions: of Insurance.Plcyl	(OE1295) (OE1300) (OE1300) (OE1300) d '\$1,350' in the hldr = only PersID nsurance.Plcyhldr=

MEPS_V2	Old Empl\Priv Related Ins (ted Ins (OE) Section
Full Detail Spec					
<u>OE220</u>	<u>(OE1295)</u>	BLAISE NAME: OEPla	nHasHSA		
Item Type:	Question	Field kind: Datafield	ArrayMin:	Min valu	e:
Type Class:	Enumerated	Field Size:			
Answer Type:	TYESNO	Answers allowed: 1	ArrayMax:	Max valu	ue:
Help Available	(HSAHelp)	\Box Show Car	d ()		Look Up File ()
Context Header:	{POLICYHOLI SOURCE}	DER'S FIRST MIDDLE LAST NAM	E} INSURANCE T	HROUGH {N/	AME OF INSURANCE
Question Text:					
referred to as Health	Savings Accounts	nt or fund that can be used to pay f (HSAs), Health Reimbursement A e different from Flexible Spending	ccounts (HRAs), I		
					HELP: F1
Responses:	YES		1 EN	ND_LP10	(OE1300)
	NO			ID_LP10	(OE1300)
	REFUSED			ID_LP10	(OE1300)
	DON'T KNC	0W	DK EN	ID_LP10	(OE1300)
Display Instructions:					
END LP10	<u>(OE1300)</u>	Item Type: Route	Type Class	: If Then	
Route Details:	Cycle on nex	t insurance that meets the cond	itions stated in th	ne loop defin	ition.
	If no other in 210.	surance meet the stated conditi	ons, end LOOP_	10 and conti	nue with BOX_

MEPS_V2 Full Detail Spec			Old Empl\Priv Related Ins (OE) Section
<u>BOX 210</u>	<u>(OE1305)</u>	Item Type: Route	Type Class: If Then
Route Details:	Return to or	iginal questionnaire section ir	HX.
Programmer Instructions:	considered o used in the (eligible RU n Flag will be t review in Ro	covered for the following rou DE and PR sections to determ nember. This setting will need the current round. If the RU n und 2, the flag will be set to d	red Person Array to determine if an RU member is nd. This flag will be called LRndCovd and will be ine whether coverage is asked about for each I to be made prior to rounds 2-5. The value of the nember was considered covered in Round 1, for 1'. If the RU member was considered covered in
	1. Private In: private insur eligible to be interview da	rance that was created in the e reviewed for private covera ite of the previous round.	=Private, OrigRnd=current round] – Settings for current round is included in the HQ section. To be ge, the RU member must have been covered on the
		s.LRndCovd = <current round<br="">_01 = '1' (YES)</current>	> for this RU member for this insurance if:
	was cur policyho	rent RU member and asked C older, use the OE20 value for	'1' (YES) for the policyholder (if the policyholder E20_01). If OE20 was not asked for the the oldest PID with coverage to determine whether d be considered as covered on the interview date

of the previous round.

[End of OE]