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NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2017 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.
Section A: Demographic Information, Part I

‘PN_QA17_A1’ [PN_AA1] -
PROGRAMMING NOTE AA1:
SET AADATE = CURRENT DATE (YYYYMMDD)

‘QA17_A1’ [AA1] –
What is your date of birth?
您的出生日期是什麼？

‘AA1MON’ [AA1MON] -
MONTH _____ [RANGE: 1-12]
  ☒  01 JANUARY
  ☒  02 FEBRUARY
  ☒  03 MARCH
  ☒  04 APRIL
  ☒  05 MAY
  ☒  06 JUNE
  ☒  07 JULY
  ☒  08 AUGUST
  ☒  09 SEPTEMBER
  ☒  10 OCTOBER
  ☒  11 NOVEMBER
  ☒  12 DECEMBER

‘AA1DAY’ [AA1DAY] -
DAY _____ [RANGE: 1-31]

‘AA1YR’ [AA1YR] -
YEAR _____ [RANGE: 1907-2000]
  ☒  -7 REFUSED
  ☒  -8 DON'T KNOW
What month and year were you born?

您在哪年哪月出生？

**'AA1AMON' [AA1AMON] - MONTH _____ [RANGE: 1-12]**
- 01 JANUARY
- 02 FEBRUARY
- 03 MARCH
- 04 APRIL
- 05 MAY
- 06 JUNE
- 07 JULY
- 08 AUGUST
- 09 SEPTEMBER
- 10 OCTOBER
- 11 NOVEMBER
- 12 DECEMBER

**'AA1AYR' [AA1AYR] -**

YEAR _____ [RANGE: 1904-2000]
- 7 REFUSED
- 8 DON'T KNOW

What is your age, please?

請告訴我您的年齡？

_____YEARS OF AGE    [RANGE: 0-120]
- 7 REFUSED
- 8 DON'T KNOW
'PN_QA17_A4' [PN_AAA2A]

PROGRAMMING NOTE AA2A:
If AA2 = -7 OR -8 (REF/DK) THEN CONTINUE WITH AA2A;
ELSE GO TO AA3

'QA17_A4' [AA2A] –

Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?

您的年龄是在 18 到 29 岁、30 到 39 岁、40 到 44 岁、45 到 49 岁、50 到 64 岁之间，还是在 65 岁或 65 岁以上？

        ☑  01 BETWEEN 18 AND 29
        ☑  02 BETWEEN 30 AND 39
        ☑  03 BETWEEN 40 AND 44
        ☑  04 BETWEEN 45 AND 49
        ☑  05 BETWEEN 50 AND 64
        ☑  06 65 OR OLDER
        ☑  -7 REFUSED
        ☑  -8 DON'T KNOW

'POST_QA17_A4' [POST_AAA2A] -

POST NOTE AA2A : AAGE ENUM.AGE
CALCULATE VALUE OF AAGE BASED ON AA1, AA1A, OR AA2 TO USE IN ALL AGE-RELATED QUESTIONS;
IF AA1, AA1A, OR AA2 = -7 OR -8 (REF/DK), THEN USE AA2A;
ELSE USE ENUM.AGE

'QA17_A5' [AA3] –

Are you male or female?

您是男性还是女性？

        ☑  01 MALE
        ☑  02 FEMALE
        ☑  -7 REFUSED

'QA17_A6' [AA4] –

Are you Latino or Hispanic?

您是拉丁裔或西裔吗？

        ☑  01 YES
        ☑  02 NO
        ☑  -7 REFUSED
        ☑  -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_A8’
And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran— and if you have more than one, tell me all of them.

您的拉丁裔或西裔祖籍或原国籍是哪里？例如墨西哥人、萨尔瓦多人、古巴人、洪都拉斯人—如果有一个以上原国籍，请将所有的原国籍告诉我。

[IF NECESSARY, GIVE MORE EXAMPLES] [CODE ALL THAT APPLY]

- [ ] 01 MEXICAN/MEXICAN AMERICAN/CHICANO
- [ ] 04 SALVADORAN
- [ ] 05 GUATEMALAN
- [ ] 06 COSTA RICAN
- [ ] 07 HONDURAN
- [ ] 08 NICARAGUAN
- [ ] 09 PANAMANIAN
- [ ] 10 PUERTO RICAN
- [ ] 11 CUBAN
- [ ] 12 SPANISH-AMERICAN (FROM SPAIN)
- [ ] 91 OTHER LATINO (SPECIFY: ____________)
- [ ] -7 REFUSED
- [ ] -8 DON'T KNOW

OTHER LATINO (SPECIFY: ____________)

'PN_QA17_A8' [PN_A5A] -
PROGRAMMING NOTE AA5A:
IF AA4 = 1 (YES, LATINO/HISPANIC) DISPLAY “You said you are Latino or Hispanic. Also, ”;
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR AA5A, CONTINUE WITH
PROGRAMMING NOTE AA5B;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

'QA17_A8' [AA5A] –

{You said you are Latino or Hispanic. Also,} please tell me which one or more of the following you would use to
describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska
Native, Asian, Black, African American, or White?

{您說您是拉丁裔或西裔。另外，}請告訴我您會使用以下哪一項或幾項來描述您自己。您認為您是夏威夷土著人、其他
太群島人、美洲印地安人、阿拉斯加土著人、亞洲人、黑人、非裔美國人還是白人？

[IF R SAYS “NATIVE AMERICAN” CODE AS “4″] [IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY
WHAT IT IS] [CODE ALL THAT APPLY]

- [ ] 01 WHITE
- [ ] 02 BLACK OR AFRICAN AMERICAN
- [ ] 03 ASIAN
- [ ] 04 AMERICAN INDIAN OR ALASKA NATIVE
- [ ] 05 OTHER PACIFIC ISLANDER
- [ ] 06 NATIVE HAWAIIAN
- [ ] -7 REFUSED
- [ ] -8 DON’T KNOW
- [ ] 91 OTHER (SPECIFY: ____________)

If AA5A=1 Or 2, go to ‘PN_QA17_A14’
If AA5A=3, go to ‘PN_QA17_A12’
If AA5A=5, go to ‘QA17_A13’
If AA5A=6, go to ‘QA17_A16’
‘QA17_A9’ [AA5B] - You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.

您說您是美洲印地安人或阿拉斯加原住民。您屬於哪一個部落？如果屬於一個以上部落，請告訴我所有這些部落。

[CODE ALL THAT APPLY]

- 01 APACHE
- 02 BLACKFOOT/BLACKFEET
- 03 CHEROKEE
- 04 CHOCTAW
- 05 MEXICAN AMERICAN INDIAN
- 06 NAVAJO
- 07 POMO
- 08 PUEBLO
- 09 SIOUX
- 10 YAQUI
- 91 OTHER TRIBE (SPECIFY: _____________)
- -7 REFUSED
- -8 DON'T KNOW

OTHER TRIBE (SPECIFY: _____________)

‘QA17_A10’ [AA5C] –

Are you an enrolled member in a federally or state recognized tribe?

您是不是聯邦或州政府認可的部落的一名註冊成員？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_A12’

‘QA17_A11’ [AA5D] –

Which tribe are you enrolled in?

您在哪一個部落註冊？

- 01 APACHE
- 02 BLACKFEET
- 03 CHEROKEE
- 04 CHOCTAW
- 05 NAVAJO
- 06 POMO
- 07 PUEBLO
- 08 SIOUX
- 09 YAQUI
- 10 OTHER

'APACHE' [APACHE] - APACHE

- 1 MESCALERO APACHE, NM
- 2 _APACHE (NOT SPECIFIED)_
- 3 _OTHER APACHE (SPECIFY: )
OTHER_APACHE

'BLACKFEET' [BLACKFEET] - BLACKFEET
   ☑ 4 BLACKFOOT/BLACKFEET

'CHEROKEE' [CHEROKEE] - CHEROKEE
   ☑ 5 WESTERN CHEROKEE
   ☑ 6 CHEROKEE (NOT SPECIFIED)
   ☑ 7 OTHER CHEROKEE (SPECIFY: __________)

OTHER_CHEROKEE

'CHOCTAW' [CHOCTAW] - CHOCTAW
   ☑ 08 CHOCTAW OKLAHOMA
   ☑ 09 CHOCTAW (NOT SPECIFIED)
   ☑ 10 OTHER CHOCTAW (SPECIFY: __________)

OTHER_CHOCTAW

'NAVAJO' [NAVAJO] - NAVAJO
   ☑ 11 NAVAJO (NOT SPECIFIED)

'POMO' [POMO] - POMO
   ☑ 12 HOPLAND BAND, HOPLAND RANCHERIA
   ☑ 13 SHERWOOD VALLEY RANCHERIA
   ☑ 14 POMO (NOT SPECIFIED)
   ☑ 15 OTHER POMO (SPECIFY: __________)

OTHER_POMO

'PUEBLO' [PUEBLO] - PUEBLO
   ☑ 16 HOPI
   ☑ 17 YSLETA DEL SUR PUEBLO OF TEXAS
   ☑ 18 PUEBLO (NOT SPECIFIED)
   ☑ 19 OTHER PUEBLO (SPECIFY: __________)

OTHER_PUEBLO

'SIOUX' [SIOUX] - SIOUX
   ☑ 20 OGLALA/PINE RIDGE SIOUX
   ☑ 21 SIOUX (NOT SPECIFIED)
   ☑ 22 OTHER SIOUX (SPECIFY: __________)

OTHER_SIOUX

'YAQUI' [YAQUI] - YAQUI
   ☑ 23 PASCUA YAQUI TRIBE OF ARIZONA
   ☑ 24 YAQUI (NOT SPECIFIED)
   ☑ 25 OTHER YAQUI (SPECIFY: __________)

OTHER_YAQUI

'OTHER' [OTHER] - OTHER
   ☑ 91 OTHER (SPECIFY: __________)
   ☑ -7 REFUSED
   ☑ -8 DON'T KNOW

OTHER_OTHER
You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.

您選擇了亞裔，您指的是哪一個具體族裔，例如華裔、菲律賓裔、越南裔？如果屬於一個以上族裔，請告訴我所有這些族裔。

[CODE ALL THAT APPLY]

- 01 BANGLADESHI
- 02 BURMESE
- 03 CAMBODIAN
- 04 CHINESE
- 05 FILIPINO
- 06 HMONG
- 07 INDIAN (INDIA)
- 08 INDONESIAN
- 09 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER ASIAN (SPECIFY: _____________)

You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.

您說您是太平洋群島人。您具體屬於哪一個種族團體，例如薩摩亞人、湯加人或關岡人？如果您屬於一個以上種族團體，請告訴我所有的種族團體。

[CODE ALL THAT APPLY]

- 01 SAMOAN/AMERICAN SAMOAN
- 02 GUAMANIAN
- 03 TONGAN
- 04 FIJIAN
- 91 OTHER PACIFIC ISLANDER (SPECIFY: ________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER PACIFIC ISLANDER (SPECIFY: ________)

- 01 BANGLADESHI
- 02 BURMESE
- 03 CAMBODIAN
- 04 CHINESE
- 05 FILIPINO
- 06 HMONG
- 07 INDIAN (INDIA)
- 08 INDONESIAN
- 09 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER ASIAN (SPECIFY: _____________)

- 01 SAMOAN/AMERICAN SAMOAN
- 02 GUAMANIAN
- 03 TONGAN
- 04 FIJIAN
- 91 OTHER PACIFIC ISLANDER (SPECIFY: ________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER PACIFIC ISLANDER (SPECIFY: ________)

- 01 BANGLADESHI
- 02 BURMESE
- 03 CAMBODIAN
- 04 CHINESE
- 05 FILIPINO
- 06 HMONG
- 07 INDIAN (INDIA)
- 08 INDONESIAN
- 09 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER ASIAN (SPECIFY: _____________)

- 01 SAMOAN/AMERICAN SAMOAN
- 02 GUAMANIAN
- 03 TONGAN
- 04 FIJIAN
- 91 OTHER PACIFIC ISLANDER (SPECIFY: ________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER PACIFIC ISLANDER (SPECIFY: ________)

- 01 BANGLADESHI
- 02 BURMESE
- 03 CAMBODIAN
- 04 CHINESE
- 05 FILIPINO
- 06 HMONG
- 07 INDIAN (INDIA)
- 08 INDONESIAN
- 09 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER ASIAN (SPECIFY: _____________)

- 01 SAMOAN/AMERICAN SAMOAN
- 02 GUAMANIAN
- 03 TONGAN
- 04 FIJIAN
- 91 OTHER PACIFIC ISLANDER (SPECIFY: ________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER PACIFIC ISLANDER (SPECIFY: ________)

- 01 BANGLADESHI
- 02 BURMESE
- 03 CAMBODIAN
- 04 CHINESE
- 05 FILIPINO
- 06 HMONG
- 07 INDIAN (INDIA)
- 08 INDONESIAN
- 09 JAPANESE
- 10 KOREAN
- 11 LAOTIAN
- 12 MALAYSIAN
- 13 PAKISTANI
- 14 SRI LANKAN
- 15 TAIWANESE
- 16 THAI
- 17 VIETNAMESE
- 91 OTHER ASIAN (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER ASIAN (SPECIFY: _____________)
You said that you are: {INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1}.

您曾經說您是: {INSERT MULTIPLE RESPONSES FROM QA13_A7, QA13_A8, QA13_A12 AND QA13_A13}.

Do you identify with any one race in particular?

您是否認同任何一個特定的種族?

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_A16’

Which do you most identify with?

您最認同的是哪一個族裔？

[Interviewer Note: If r unable to choose one, offer “both/all/multiracial”]
Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

您現在是已婚、與伴侶像婚姻關係一樣同居、喪偶、離婚、分居還是從未結婚？

[IF R MENTIONS MORE THAN ONE, CODE THE LOWEST NUMBER THAT APPLIES]

- 01 MARRIED
- 02 LIVING WITH PARTNER
- 03 WIDOWED
- 04 DIVORCED
- 05 SEPARATED
- 06 NEVER MARRIED
- -7 REFUSED
- -8 DONT KNOW
Section B: Health Conditions

‘QA17_B1’ [AB1] –
These next questions are about your health.
接下來這些問題與您的健康有關。
Would you say that in general your health is excellent, very good, good, fair, or poor?
總體而言，您認為您的健康狀況是極好、很好、好、一般還是很差？
- 01 EXCELLENT
- 02 VERY GOOD
- 03 GOOD
- 04 FAIR
- 05 POOR
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_B2’ [AB17B] –
Has a doctor ever told you that you have asthma?
有沒有醫生曾經告訴過您患有哮喘病？
- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B18’

‘QA17_B3’ [AB40] –
Do you still have asthma?
您是否依然患有哮喘病？
- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_B4’ [AB41] –
During the past 12 months, have you had an episode of asthma or an asthma attack?
在過去十二個月中，您是否曾經有過哮喘發作？
- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

在過去十二個月中，每隔多久會出現哮喘症狀，例如咳嗽、氣喘、氣短、胸悶或粘痰？您認為是......

- 01 Not at all,
- 02 Less than every month,
- 03 Every month,
- 04 Every week, or
- 05 Every day?
- 06 Every day?
- 07 REFUSED
- 08 DON'T KNOW

During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

在過去十二個月中，您是否曾經因哮喘病發作前往醫院急診室就診？

- 01 YES
- 02 NO
- 03 DOESN'T HAVE A DOCTOR
- 04 REFUSED
- 05 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B8’

Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

您是否曾經因哮喘病發作無法約見自己的醫生而前往醫院急診室就診？

[Interviewer Note: Enter 3 only if R volunteers that he/she doesn’t have a doctor. Do not probe.]

- 01 YES
- 02 NO
- 03 DOESN'T HAVE A DOCTOR
- 04 REFUSED
- 05 DON'T KNOW
During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，您是否因哮喘病曾經住院一天或更長時間？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

您目前是否每天服用醫生開給您的或是醫生提供給您的控制哮喘的藥物？

[IF NEEDED, SAY: “This includes both oral medicine and inhalers. This is different from inhalers used for quick relief.”]

[IF NEEDED, SAY：「包括口服藥和吸入劑，但不是用於快速緩解症狀的吸入劑。」]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

在過去12個月中，您出現哮喘症狀的頻率有多高？哮喘症狀包括咳嗽、喘鳴、呼吸急促、胸悶或黏痰。您認為是......

- 01 Not at all,
- 01 從未,
- 02 Less than every month,
- 02 不到每月一次,
- 03 Every month,
- 03 每月,
- 04 Every week, or
- 04 每週，還是
- 05 Every day?
- 05 每天
- -7 REFUSED
- -8 DON'T KNOW
During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

您是否曾經因哮喘病發作而必須前往醫院急診室就診？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B13’

‘QA17_B12’ [AB107] –

Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

您是否曾經因哮喘病發作無法約見自己的醫生而前往醫院急診室就診？

[INTERVIEWER NOTE: ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN’T HAVE A DOCTOR. DO NOT PROBE.]

- 01 YES
- 02 NO
- 03 DOESN'T HAVE A DOCTOR
- 7 REFUSED
- 8 DON'T KNOW

‘PN_QA17_B13’ [PN_AB80] –

PROGRAMMING NOTE AB80:
IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AB42;

‘QA17_B13’ [AB80] –

During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，您是否因哮喘病曾經住院一天或更長時間？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW
‘PN_QA17_B14’ [PN_AB42] –

PROGRAMMING NOTE AB42:

IF AAGE > 69 OR AA2A = 6 (65 OR OLDER) GO TO AB43;
ELSE CONTINUE WITH AB42

‘QA17_B14’ [AB42] –

During the past 12 months, how many days of work did you miss due to asthma?

在過去十二個月中，您因為哮喘病有多少天沒有工作？

[INTERVIEWER NOTE: IF NOT WORKING, ENTER ZERO]

_____ DAYS (0 - 365)

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_B15’ [AB43] –

Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?

是否曾經有醫生或其他醫療服務提供者與您一起制定一項計劃，以便您瞭解如何控制自己的哮喘？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B17’

‘QA17_B16’ [AB98] –

Do you have a written or printed copy of this plan?

您是否有該項計劃的書面或列印副本？

[IF NEEDED, SAY: “This can be an electronic or hard copy.”] [IF NEEDED, SAY: “可以是電子版本或打印件。”]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW
‘PN_QA17_B17’ [PN_AB108] -
PROGRAMMING NOTE AB108:
IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AB128;

‘QA17_B17’ [AB108] –

How confident are you that you can control and manage your asthma? Would you say you are...

您對控制與管理自己的哮喘信心有多高？您認為是......

طلاق 01 Very confident,
طلاق 02 Somewhat confident,
طلاق 03 Not too confident, or
طلاق 04 Not at all confident?
طلاق -7 REFUSED
طلاق -8 DON'T KNOW

‘PN_QA17_B18’ [PN_AB128] -
PROGRAMMING NOTE AB128:
IF AB17B = 1, THEN SKIP TO AB130;
ELSE IF SAMPLED COUNTY IS IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS IMPERIAL COUNTY, THEN CONTINUE;
ELSE SKIP TO AB130;

‘QA17_B18’ [AB128] –

During the past 12 months, have you had symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm when you DID NOT have a cold or respiratory infection?

過去 12 個月內，您在並無傷風或呼吸系統感染疾病時，曾有咳嗽、氣喘、氣促、胸悶或痰等症狀嗎？

提款 01 YES
提款 02 NO
提款 -7 REFUSED
提款 -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B20’

‘QA17_B19’ [AB129] –

How often did you have those symptoms? Would you say...

您多常有這些症狀？您認為......

提款 01 NOT AT ALL
提款 02 Once or twice in the past 12 months
提款 03 Every couple of months
提款 04 Every month, or
提款 05 Every week?
提款 -7 REFUSED
提款 -8 DON'T KNOW
During the past 12 months, have you been bothered by sneezing or a runny or blocked nose when you DID NOT have a cold or the flu?

過去12個月內，您在並無傷風或感冒時，曾受打噴嚏、流鼻水或鼻塞困擾嗎？

**[IF R MENTIONS ALLERGY, CODED ‘YES’]**

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B22’

‘QA17_B21’ [AB131] –

How often did you have those symptoms? Would you say...

您多常有這些症狀？您認為......

- 01 NOT AT ALL
- 02 Once or twice in the past 12 months
- 03 Every couple of months
- 04 Every month, or
- 05 Every week?
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_B22’ [AB132] –

During the past 12 months, have you been bothered by watery, itchy, or burning eyes when you DID NOT have a cold or the flu?

過去12個月內，您在並無傷風或感冒時，曾受淚眼、眼睛痕癢或灼熱等困擾嗎？

**[IF R MENTIONS ALLERGY, CODED ‘YES’]**

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_B24’
How often did you have those symptoms? Would you say...

您多常有這些症狀？您認為......

- 01 NOT AT ALL
- 02 Once or twice in the past 12 months
- 03 Every couple of months
- 04 Every month, or
- 05 Every week?
- -7 REFUSED
- -8 DON'T KNOW

How concerned are you with the air quality in your neighborhood? Would you say...

您有多關注空氣品質？您認為......

- 01 It is not a concern
- 02 A moderate concern
- 03 A significant concern
- -7 REFUSED
- -8 DON'T KNOW

Please rate the air quality in your neighborhood? Would you say...

您覺得社區內的空氣品質怎樣？您認為......

- 01 Excellent
- 02 Very good
- 03 Good
- 04 Fair, or
- 05 Poor
- -7 REFUSED
- -8 DON'T KNOW
In the past 12 months, have you had an illness or symptoms that you think was caused by pollution in the air outdoors?

過去12個月內，您曾否患過您認為是室外空氣污染所造成的疾病或症狀？

[IF NEEDED, SAY: Things like dust, smog, automobile exhaust, and chemicals can cause outdoor air pollution]. [IF NEEDED, SAY: 塵埃、煙霧、汽車廢氣及化學物質等東西可導致室外空氣污染]

[NOTE: IF RESPONDENT HAD EXPERIENCE AN ILLNESS OR SYMPTOMS WITHIN THE PAST 12 MONTHS THAT WAS CAUSED BY SOMETHING IN THE AIR HE OR SHE ENCOUNTERED MORE THAN 12 MONTHS AGO, THEN CODE ‘YES’]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

The next questions are about the outdoor air quality and how it affects your activities. Please think of the past 12 months. How many times did you reduce or change your outdoor activity levels because you thought the air quality was bad or was affecting how well you felt? Would you say...

接下來的問題是關於室外空氣品質及其如何影響您的活動。回想過去12個月裡，您曾有多少次因認為空氣品質欠佳或受其影響而減少或更改室外活動？您認為......

[IF NEEDED: For example, avoiding outdoor exercise or strenuous outdoor activity.] [IF NEEDED: 例如，避免室外運動或劇烈的室外活動。]

- 01 None
- 1 沒有
- 02 1 to 3 times,
- 2 1至3次,
- 03 4 to 6 times, or
- 3 4至6次, 或
- 04 More than 6 times?
- 4 超過6次？
- -7 REFUSED
- -8 DON’T KNOW

Information on air quality that may be distributed to help inform the public about air pollution levels. Have you ever heard or read about the air quality index or air quality alerts where you live?

發放空氣品質資訊有助告知公眾空氣污染水平。您聽過或看過所住地方的空氣品質指數或空氣品質警告嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

If = 2, -7, -8, goto ‘QA17_B30’
‘QA17_B29’ [AB139] - Did you reduce or change your outdoor activity level based on the air quality index or air quality alerts?

您曾否基於空氣品質指數或空氣品質警告而減少或更改室外活動？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘PN_QA17_B30’ [PN_AB22] -
PROGRAMMING NOTE AB22 :
IF AA3  = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";
ELSE BEGIN DISPLAY WITH "Has"

‘QA17_B30’ [AB22] –

{Other than during pregnancy, has/Has} a doctor ever told you that you have diabetes or sugar diabetes?

{除了懷孕期間，} 是否有醫生曾經告訴您患有糖尿病？

- 01 YES
- 02 NO
- 03 BORDERLINE OR PRE-DIABETES
- 07 REFUSED
- 08 DON'T KNOW

If = 3, goto ‘QA17_B40’

‘PN_QA17_B31’ [PN_AB99] -
PROGRAMMING NOTE AB99 :
IF AA3  = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";
ELSE BEGIN DISPLAY WITH "Has"

‘QA17_B31’ [AB99] –

{Other than during pregnancy, has/Has} a doctor ever told you that you have pre-diabetes or borderline diabetes?

{除了懷孕期間，} 是否曾經有醫生告訴您患有前驅糖尿病或臨界糖尿病？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
‘PN_QA17_B32’ [PN_AB23] –

PROGRAMMING NOTE AB23:
IF AB22 = 1 THEN CONTITLE WITH AB23;
ELSE SKIP TO PROGRAMMING NOTE AB81

‘QA17_B32’ [AB23] –

How old were you when a doctor first told you that you have diabetes?

當醫生第一次告訴您患有糖尿病時，您的年齡多大？

____ AGE IN YEARS [HR: 1 THRU AAGE (OR 105 IF AAGE = -7)]

☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QA17_B33’ [AB51] –

Were you told that you had Type 1 or Type 2 diabetes?

您是否曾經被告知患有一類或二類糖尿病？

[IF NEEDED, SAY: “Type 1 diabetes results from the body’s failure to produce insulin and is usually diagnosed in children and young adults. Type 2 diabetes results from insulin resistance and is the most common form of diabetes.”]

[IF NEEDED, SAY: 「一類糖尿病是由於身體無法產生胰島素而引起，常見於兒童及年輕人。二類糖尿病是由於抗胰島素作用而引起，是最常見的糖尿病類型。」]

☐ 01 TYPE 1
☐ 02 TYPE 2
☐ 91 ANOTHER TYPE (Specify:________)
☐ 04 DOUBLE DIABETES (TYPE 1 AND TYPE 2)
☐ -7 REFUSED
☐ -8 DON'T KNOW

ANOTHER TYPE (Specify:________)

‘QA17_B34’ [AB24] –

Are you now taking insulin?

您目前在使用胰島素嗎？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW
Do you now take diabetic pills to lower your blood sugar?

您目前在服用降血糖的糖尿病药物吗？

[IF NEEDED, SAY: “These are sometimes called oral agents or oral hypoglycemic agents.”]  
[IF NEEDED, SAY: 「有時稱作口服藥劑或口服降血糖藥劑。」]

○ 01 YES  
○ 02 NO  
○ -7 REFUSED  
○ -8 DONT KNOW

About how many times in the last 12 months has a doctor checked your feet for any sores or irritations?

在過去12個月中，醫生約檢查過幾次您的腳部是否有任何瘡或發炎？

______ NUMBER OF TIMES [HR: 0-52; SR: 0-25]

○ -7 REFUSED  
○ -8 DONT KNOW

When was the last time you had an eye exam in which the pupils were dilated? This would have made your eyes sensitive to bright light for a short time.

您最近一次接受瞳孔放大眼科檢查是什麼時候？瞳孔放大會使您的眼睛在短時間內對亮光敏感。

○ 01 WITHIN THE PAST MONTH  
○ 02 WITHIN THE PAST YEAR (1-12 MONTHS AGO)  
○ 03 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO)  
○ 04 2 OR MORE YEARS AGO  
○ 05 NEVER  
○ -7 REFUSED  
○ -8 DONT KNOW

Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?

您的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便讓您了解如何照護自己的糖尿病？

○ 01 YES  
○ 02 NO  
○ -7 REFUSED  
○ -8 DONT KNOW
How confident are you that you can control and manage your diabetes? Would you say you are…

您對控制與管理自己的糖尿病信心有多高？您認為是……

- 01 Very confident, 有信心
- 02 Somewhat confident, 有信心
- 03 Not too confident, or 不太有信心，還是...
- 04 Not at all confident？ 毫無信心？
- -7 REFUSED
- -8 DON'T KNOW

Has a doctor ever told you that you had diabetes only during pregnancy?

是否有醫生曾經說過您僅在懷孕期間患過糖尿病？

[IF NEEDED, SAY: “This is also known as gestational diabetes.”] [IF NEEDED, SAY: 「這也稱為妊娠糖尿病。」]

- 01 YES
- 02 NO
- 03 BORDERLINE GESTATIONAL DIABETES
- -7 REFUSED
- -8 DON'T KNOW

Has a doctor ever told you that you have high blood pressure?

是否有醫生曾經告訴過您患有高血壓？

- 1 YES
- 2 NO
- 3 HIGH NORMAL/BORDERLINE/PRE-HYPERTENSION
- 4 REFUSED
- 5 DON'T KNOW

If = 2, 3, -7, -8, goto ‘QA17_B43’
Are you now taking any medications to control your high blood pressure?

您目前是否在服用任何控制高血壓的藥物？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

Has a doctor ever told you that you have any kind of heart disease?

有沒有醫生告訴過您患有任何一種心臟病？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto AC100

Has a doctor ever told you that you have heart failure or congestive heart failure?

是否有醫生曾經告訴您患有心力衰竭或充血性心力衰竭？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto AC100

Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your heart disease?

您的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便您瞭解如何護理自己的心臟病？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto AC100
Section C: Health Behaviors

`QA17_C1` [AD37W] –

The next questions are about walking for transportation. I will ask you separately about walking for relaxation or exercise.

以下是有關以步代車的問題。我會另外向您提出因休閒或運動目的步行問題。

During the past 7 days, did you walk to get some place that took you at least 10 minutes?

在過去七天內，您是否曾經步行至少10分鐘去某個地方？

- 01 YES
- 02 NO
- 03 UNABLE TO WALK
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_C4’
If = 3, goto ‘QA17_C8’

`QA17_C2` [AD38W] –

In the past 7 days, how many times did you do that?

在過去七天內，您曾經幾次這樣做？

[IF NEEDED, SAY: “Walk for at least 10 minutes to get some place.”]
[IF NEEDED, SAY: "至少步行10分鐘去某個地方。”]

______ times per week [HR: 0 - 999]

If AD38W = 0, goto ‘QA17_C4’

- 07 REFUSED
- 08 DON'T KNOW

If = -7, -8, goto ‘QA17_C4’

`PN_QA17_C3` [PN_AD39W] -

PROGRAMMING NOTE AD39W:
IF AD38W = 1 DISPLAY “How long did that walk take”;
IF AD38W > 1 DISPLAY “On average, how long did those walks take”

`QA17_C3` [AD39W] –

{How long did that walk take/On average, how long did those walks take}?

{此類步行花了多長時間/此類步行通常花多長時間}?

MINUTES PER WALK

- 07 REFUSED
- 08 DON'T KNOW
Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past 7 days did you walk for at least 10 minutes for any of these reasons? Please do not include walking for transportation.

Sometimes, you might walk for fun, relaxation, exercise, or to walk the dog. In the past 7 days, did you walk for at least 10 minutes for any of these reasons? Please do not include walking for transportation.

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_C7’

‘QA17_C5’ [AD41W] - In the past 7 days, how many times did you do that?

在過去七天內，您曾經幾次這樣做？

[IF NEEDED, SAY: “Walk for at least 10 minutes for fun, relaxation, exercise, or to walk the dog.”]
[IF NEEDED, SAY: “因娛樂、休閒、運動或溜狗至少步行10分鐘。”]

______ times per week [HR: 0 - 180]

If =0 , goto ‘QA17_C7’

○ -7 REFUSED
○ -8 DON'T KNOW

If = -7, -8, goto ‘QA17_C7’

‘QA17_C6’ [AD42W] –

(How long did that walk take/On average, how long did those walks take)?

此類步行花了多長時間/此類步行通常花多長時間？

______ MINUTES PER DAY

______ HOURS PER DAY

○ -7 REFUSED
○ -8 DON'T KNOW
The next question is about your overall exercise. Exercise includes walking, housekeeping, jogging, weights, a sport or playing with your kids. It can be done on the job, around the house, just for fun or as a work-out.

In the past 7 days, on how many days did you exercise for at least 20 minutes at a time?

下一道問題是關於您整體的運動情況。運動包括步行、做家務、慢跑、舉重、體育活動或跟子女玩樂。包括在工作中、家附近、為玩樂或鍛鍊而運動。過去 7 天內，您有多少天曾一次運動過至少 20 分鐘？

_______ DAYS PER WEEK

- 7 REFUSED
- 8 DON'T KNOW

Now think about the foods you ate or drank during the past month that is, the past 30 days, including meals and snacks. During the past month, how many times did you eat fruit? Do not count juices. You can tell me per day, per week, or month.

現在請想想您上個月（即過去 30 天）的飲食，包括正餐及零食。上月您吃過多少次水果？不包括果汁。您可以告訴我每天、每週或每個月的次數。

[IF NEEDED, SAY: “Your best guess is fine.”] [IF NEEDED, SAY: “盡量估計就可以了。”]

[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: “Was that per day, week or month?”]
[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: “那是每天、每週抑或每月？”]

_________ TIMES

‘CAT_AE2’ [CAT_AE2] -

- 01 PER DAY [HR: 0-20; SR: 0-9]
- 02 PER WEEK [HR: 0-20; SR: 0-9]
- 03 PER MONTH [HR: 0-210; SR: 0-149]
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_C9’ [AE3] –

[During the past month,] how many times did you eat any kind of fried potatoes, including French fries, home fries, or hash browns?

[上月內，]您吃過多少次任何類型的炸薯？包括炸薯條、家常炸薯或炸薯餅。

[IF NEEDED, SAY: “You can tell me per day, per week, or month”]
[IF NEEDED, SAY: “您可以告訴我每天、每週或每個月的次數。”]

[IF RESPONDENT ASKS, SAY: “Do not include potato chips.”]
[IF RESPONDENT ASKS, SAY: “不包括薯片。”]

[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK “Was that per day, week, or month?”]
[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK “那是每天、每週抑或每月？”]

_________ TIMES

‘CAT_AE3’ [CAT_AE3] -

- 01 PER DAY [HR: 0-20; SR: 0-9]
- 02 PER WEEK [HR: 0-20; SR: 0-9]
- 03 PER MONTH [HR: 0-210; SR: 0-149]
- 7 REFUSED
- 8 DON'T KNOW
During the past month, how many times did you eat cooked dried beans, such as refried beans, baked beans, or bean soup? Do not include green beans.

"上月內，您吃過多少次炸豆蓉、焗豆或豆湯等食品？不包括青豆。

[IF NEEDED SAY: "You can tell me per day, per week, or month"]
[IF NEEDED, SAY: "您可以告訴我每天、每週或每個月的次數。"]
[IF NEEDED, SAY: "Your best guess is fine."]
[IF NEEDED, SAY: "盡量估計就可以了。

[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"]
[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "那是每天、每週抑或每個月？"]

__________TIMES

'CAT_AE5' [CAT_AE5] - __________PER MONTH
  01 PER DAY [HR: 0-20; SR: 0-9]
  02 PER WEEK [HR: 0-20; SR: 0-9]
  03 PER MONTH [HR: 0-210; SR: 0-149]
  -7 REFUSED
  -8 DON'T KNOW

'PN_QA17_C11' [PN_AE7] -
PROGRAMMING NOTE AE7:
IF AE3>0 (ATE FRIED POTATOES) THEN DISPLAY "Do not include fried potatoes."
ELSE DO NOT DISPLAY

'QA17_C11' [AE7] –

[During the past month,] how many times did you eat any other vegetables like green salad, green beans, or potatoes? {Do not include fried potatoes.}

〔上月〕您吃過多少次任何其他蔬菜，例如蔬菜沙律、青豆或薯仔？{不包括炸薯。}

[IF NEEDED, SAY: "You can tell me per day, per week, or month"]
[IF NEEDED, SAY: "您可以告訴我每天、每週或每個月的次數。"]
[IF STRONGLY NEEDED, SAY: "Such as tomatoes, carrots, onions, or broccoli."]
[IF STRONGLY NEEDED, SAY: "例如蕃茄、胡蘿蔔、洋蔥或西蘭花。

][ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: "Rice is not a vegetable."]
[ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: "米飯不是蔬菜。

__________TIMES

'CAT_AE7' [CAT_AE7] -
  01 PER DAY [HR: 0-20; SR: 0-9]
  02 PER WEEK [HR: 0-20; SR: 0-9]
  03 PER MONTH [HR: 0-210; SR: 0-149]
  -7 REFUSED
  -8 DON'T KNOW
During the past month, how often did you drink regular soda or pop that contains sugar?  Do not include diet soda.

[在過去一個月中，]您喝普通汽水或含糖汽水的頻率有多高？請不要包括低卡節食汽水。

[IF NEEDED, SAY: “Do not include canned or bottled juices or teas. Your best guess is fine.”]
[IF NEEDED, SAY: “請不要包括罐裝或瓶裝果汁或茶。給出最佳估計數字即可。”]

‘CAT_AC11’ [CAT_AC11] -
- 01 PER DAY [HR: 0-20; SR: 0-9]
- 02 PER WEEK [HR: 0-20; SR: 0-9]
- 03 PER MONTH [HR: 0-210; SR: 0-149]
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_C13’ [AC46] –

During the past month, how often did you drink sweetened fruit drinks, sports, or energy drinks?

[過去一個月中，] 您喝加糖果汁飲料、運動或能量飲料的頻率有多高？

[IF NEEDED, SAY: “Such as lemonade, Gatorade, Snapple, or Red Bull.”]
[IF NEEDED, SAY: “例如檸檬水、Gatorade、Snapple或Red Bull。”]

[DO NOT READ.  FOR INTERVIEWER INFORMATION ONLY.  THIS ALSO INCLUDES DRINKS SUCH AS: FRUIT JUICES OR DRINKS YOU MADE AT HOME AND ADDED SUGAR TO, KOOL-AID, TAMPOCO, HAWAIIAN PUNCH, CRANBERRY COCKTAIL, HI-C, SNAPPELE, SUGAR CANE JUICE, AND VITAMIN WATER. DO NOT INCLUDE: 100% FRUIT JUICES OR SODA, YOGURT DRINKS, CARBONATED WATER, OR FRUIT-FLAVORED TEAS.]

__________TIMES

‘CAT_AC46’ [CAT_AC46] -
- 01 PER DAY [HR: 0-20; SR: 0-9]
- 02 PER WEEK [HR: 0-20; SR: 0-9]
- 03 PER MONTH [HR: 0-210; SR: 0-149]
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_C14’ [AC47] –

Yesterday, how many glasses of water did you drink at work, home, and everywhere else?  Count one cup as one glass and count one bottle of water as two glasses.  Count only a few sips, like from a water fountain, as less than one glass.  Your best guess is fine.

您昨天在工作場所、家中和所有其他地方加起來總共喝了多少杯水？請將一杯水計算為一杯水，將一瓶水計算為兩杯水，將喝了幾口水（例如在飲水機上喝水）計算為不足一杯水。請給出您的最佳估計數字。

[IF NEEDED SAY: “Include tap water, like from a sink, faucet, fountain, or pitcher, and bottled water like Aquafina®.  Do not include flavored sweetened water.”] [IF NEEDED, SAY: “請包括自來水（例如水池、水龍頭、飲水機或水壺中的水）和瓶裝水（例如 Aquafina®）。請不要包括有調味的加糖的水。”]

[IF NEEDED, SAY: “Count one cup or 8 ounces as one glass.”]
[IF NEEDED, SAY: “一杯或 8 盎斯計算為一杯。”]

‘CAT_AC47’ [CAT_AC47] -
- 99 LESS THAN 1 GLASS (e.g., SIPS FROM A FOUNTAIN)
- 00 NONE
- -7 REFUSED
- -8 DON'T KNOW
How often can you find fresh fruits and vegetables in your neighborhood? Would you say...

您在所在社區買到新鮮水果和蔬菜的頻率有多高？您認為是……

- 01 Never, 從未
- 02 Sometimes, 有時
- 03 Usually, or 通常，還是
- 04 Always? 總是？
- 05 DOESN'T EAT F & V
- 06 DOESN'T SHOP FOR F&V
- 07 DOESN'T SHOP IN HIS/HER NEIGHBORHOOD_
- -7 REFUSED
- -8 DON'T KNOW

PROGRAMMING NOTE AC44:
IF AC42 = 2, 3, OR 4, THEN CONTINUE WITH AC44;
ELSE GO TO PROGRAMMING NOTE AE15

How often are they affordable? Would you say...

您能夠負擔得起這些食品的頻率有多高？您認為是……

[IF NEEDED, SAY: “How often are the fresh fruits and vegetables you find in your neighborhood affordable? Would you say...”]

[IF NEEDED, SAY: 「您能夠負擔得起您所在社區的新鮮水果和蔬菜的頻率有多高？您認為是...」]

- 01 Never, 從未
- 02 Sometimes, 有時
- 03 Usually, or 通常，還是
- 04 Always? 總是？
- 05 DOESN'T EAT F & V
- 06 DOESN'T SHOP FOR F&V
- 07 DOESN'T SHOP IN HIS/HER NEIGHBORHOOD_
- -7 REFUSED
- -8 DON'T KNOW

Now, I am going to ask about various health behaviors.

現在，我想就各種不同的健康行為問題提問。

Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?

在您的一生中，您抽煙的總量是否至少有100支或100支以上?

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, goto 'QA17_C27'
Do you now smoke cigarettes every day, some days, or not at all?

您現在是每天，某些天抽煙還是完全不抽煙？

- 01 EVERY DAY
- 02 SOME DAYS
- 03 NOT AT ALL
- 07 REFUSED
- 08 DON'T KNOW

If = 2, goto ‘QA17_C20’
If = 3, -7, -8, goto ‘QA17_C27’

On average, how many cigarettes do you now smoke a day?

目前您每天平均抽多少支煙？

[INTERVIEWER NOTE: IF R SAYS, A “PACK”, CODE AS 20 CIGARETTES]

_____ NUMBER OF CIGARETTES     [HR: 0-120]
- 07 REFUSED
- 08 DON'T KNOW

If = -7, -8, go to ‘QA17_C21’

In the past 30 days, when you smoked, how many cigarettes did you smoke per day?


_____ NUMBER OF CIGARETTES     [HR: 0-120]
- 07 REFUSED
- 08 DON'T KNOW
'QA17_C21' [AC49] –
During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

在過去十二個月中，您是否曾因嘗試戒煙而停止抽煙一天或更長時間？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

'QA17_C22' [AC50] –
Are you thinking about quitting smoking in the next six months?

您是否在考慮在今後六個月內戒煙？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

'AC104B' [AC104B] –
In the past 12 months, did you use nicotine gum, nicotine lozenges, or a nicotine inhaler?

[你最後一次嘗試戒煙時，是否曾使用尼古丁口香糖、尼古丁糖錠、尼古丁吸入劑？]

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

'QA17_C24' [AC75C] –
In the past 12 months did you

在過去十二個月中，您是否

Call a telephone quitting helpline?

打电话給戒煙幫助熱線？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW
‘QA17_C25’ [AC77] –

In the past 12 months, did a doctor or other health professional advise you to quit smoking?

在過去十二個月內，是否曾有醫生或其他健康專業人員建議您戒煙？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_C26’ [AC78] –

In the past 12 months, did a doctor or other health professional refer you to, or give you information about, a smoking cessation program?

在過去十二個月內，是否曾有醫生或其他健康專業人員讓您參加戒煙 計劃或向您提供有關戒煙計 劃的資訊？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_C27’ [AC81B] -

Have you ever used any type of e-cigarette, vape pen or e-hookah, such as Blu, NJOY, or Vuse, or any larger devices for vaping, sometimes called vapes, tanks or mods?

您是否曾經抽過任何一種電子煙 (就是 e-cigarette)、氣霧煙筆、或電子水煙, 如 Blu, NJOY, 或者 Vuse, 或者用過 体积更大的, 有時被稱為 “vapes”, “tanks” 或 “mods” 的工具吸煙？

[INTERVIEWER NOTE: CODE ‘YES’ IF R MENTIONS VAPE OR VAPING.]

[IF NEEDED, SAY: “Electronic cigarettes are devices that mimic traditional cigarette smoking, but the battery operated device produces vapor instead of smoke. The solutions used in the device may contain nicotine and are usually flavored.”]

[IF NEEDED, SAY: 「電子煙是模仿傳統抽煙的設備，但由電池操作的設備產生氣霧，而不是煙，該設備中使用的溶 液可能含有尼古丁，通常帶有香味。」]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, go to ‘QA17_C30’
During the past 30 days, on how many days did you use electronic cigarettes?

在過去三十天內，您有多少天曾抽電子煙？

____ NUMBER OF DAYS [HR: 0 - 30]

If = 0, go to ‘QA17_C30’

-7 REFUSED

-8 DON'T KNOW

If = -7, -8, go to ‘QA17_C30’

‘QA17_C29’ [AC83B] –

What best describes your reasons for using e-cigarettes?

您是因為什麼原因抽電子煙？

[CODE ALL THAT APPLY]

- 01 QUIT SMOKING
- 02 REPLACE SMOKING
- 03 CUT DOWN OR REDUCE SMOKING
- 04 USE IN PLACES WHERE SMOKING NOT IS NOT ALLOWED
- 05 CURIOSITY, JUST TRY IT
- 06 NO LINGERING ODOR
- 07 HELPS ME CONCENTRATE/STAY ALERT
- 08 COME IN MANY FLAVORS
- 09 LESS EXPENSIVE
- 10 HEALTHIER THAN CIGARETTES
- 91 OTHER (SPECIFY: ____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER (SPECIFY: ____________)

‘QA17_C30’ [AC115] –

The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking. Have you ever, even once, tried marijuana or hashish in any form?

“接下來的問題是關於大麻，又稱大麻或大麻草、哈希什及其他含有四氫大麻酚的產品。使用這些產品有多種方法，包括吸食、蒸氣抽吸、塗抹、進食或進飲。您曾否使用（即使只是一次）大麻或哈希什？

[IF NEEDED: THC is the active ingredient in marijuana.] [IF NEEDED: 四氫大麻酚（THC）是大麻中的主要成份。]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, go to AC128
How long has it been since you last used marijuana or hashish in any form?

自您上次使用大麻或哈希什起有多久了？

'CAT_AC116' [CAT_AC116] -
- 01 DAYS [HR: 0-365]
- 02 MONTHS [HR: 0-12]
- 03 YEARS [0-99]
- 04 7 REFUSED
- 05 8 DON'T KNOW

'PN_QA17_C32' [PN_AC117] -
PROGRAMMING NOTE AC117:
IF AGE >25, THEN GO TO AC128;
IF AC116 >=30 DAYS OR >1 MONTH, THEN GO TO AC128;
ELSE CONTINUE WITH AC117;

'During the past 30 days, on how many days did you use marijuana, hashish, or another THC product?'

過去 30 天內，您有多少天使用過大麻、哈希什或其他含有四氫大麻酚的產品？

- 01 0 DAYS
- 02 1-2 DAYS
- 03 3-5 DAYS
- 04 6-9 DAYS
- 05 10-19 DAYS
- 06 20-29 DAYS
- 07 30 DAYS OR MORE
- 08 7 REFUSED
- 09 8 DON'T KNOW

If = 1, go to AC128

'QA17_C33' [AC118] –

How often have you used tobacco when you have also been using marijuana? Would you say...

您多常在吸煙時亦有使用大麻？您認為......

- 01 Usually
- 02 通常
- 03 Sometimes
- 04 有時
- 05 Never
- 06 從未
- 07 7 REFUSED
- 08 8 DON'T KNOW
During the past 30 days, how did you use marijuana? Did you...

Smoke it in a joint, bong, or pipe?

過去 30 天內，您如何使用大麻？您曾否......用煙卷、水煙壺或煙斗吸食？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

During the past 30 days, how did you use marijuana? Did you...

Smoke part or all of a cigar with marijuana in it, which is sometimes called a blunt?

過去 30 天內，您如何使用大麻？您曾否......吸食內含部分或全部大麻的雪茄（有時稱為小雪茄煙）？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

[During the past 30 days, how did you use marijuana?] Did you...

Eat it?

過去 30 天內，您如何使用大麻？您有否......進食大麻？

[IF NEEDED SAY: For example, in brownies, cakes, cookies or candy]
[IF NEEDED SAY: 例如布朗尼、蛋糕、曲奇/餅乾或糖果形式]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

[During the past 30 days, how did you use marijuana?] Did you...

Drink it?

[過去 30 天內，您如何使用大麻？] 您有否......進飲大麻？

[IF NEEDED SAY: For example, in tea, cola, alcohol or other drinks]
[IF NEEDED SAY: 例如茶、可樂、酒或其他飲品形式]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW
During the past 30 days, how did you use marijuana?

Vaporize it?

During the past 30 days, how did you use marijuana?

Dab it?

During the past 30 days, how did you use marijuana?

Use it some other way?

Was any of your marijuana use in the past month recommended by a doctor or other health care provider?

If = 2, go to AC128
'QA17_C42' [AC127] –
Was all of your marijuana use in the past month recommended by a doctor or other health care provider?

上月您使用大麻，是醫生或其他醫護人員建議的嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA17_C43' [AC128] –
Have you used heroin in the past 12 months?

過去 12 個月，您曾否使用海洛英？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

'QA17_C44' [AC129] –
In the past 12 months, did you use any prescription pain killer in a way that did not follow your doctor's directions? Examples include Vicodin, OxyContin, Norco, Hydrocodone, Percocet and Methadone.

過去 12 個月內，您曾否並非按醫囑而服用任何處方止痛藥？例如維柯丁（Vicodin）、奧施康定（OxyContin）、耐可（Norco）、氫可酮（Hydrocodone）、波考賽特（Percocet ）、美沙酮（Methadone）。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, go to AE17

'QA17_C45' [AC130] –
How many of these prescription pain killers are you taking?

您現正服用多少種上述處方止痛藥？

- 0 0
- 01 1
- 02 2
- 03 3
- 04 More than 3
- 7 REFUSED
- 8 DON'T KNOW
Did you get the prescription(s) from one doctor or from more than one doctor?

您有否獲一位或多位醫生處方？

- 01 ONE DOCTOR
- 02 MORE THAN ONE DOCTOR
- 03 I DIDN'T GET IT FROM A DOCTOR
- 07 REFUSED
- 08 DON'T KNOW

If = 3, -7, -8, go to AC133

Did you sign a contract with your doctor regarding these medicines?

您有否就這些藥物與醫生簽約？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

What condition or conditions are you taking the medicine for?

您基於甚麼狀況而服用這些藥物？

[CHECK ALL THAT APPLY]

- 01 DENTAL WORK/DENTAL PAIN
- 02 SURGERY, NOT ACCIDENT-RELATED
- 03 RECENT INJURY
- 04 CHRONIC PAIN, REGARDLESS OF CAUSE
- 09 OTHER (SPECIFY:_________________)
- 07 REFUSED
- 08 DON'T KNOW
‘QA17_D1’ [AE17] –

These next questions are about your height and weight. How tall are you without shoes?

以下是幾個有關您的身高和體重的問題。您不穿鞋時身高是多少？

[IF NEEDED, SAY: “About how tall?”] [IF NEEDED, SAY: 「大約有多高？」]

____ FEET
____ INCHES
____ METERS
____ CENTIMETERS
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘PN_QA17_D2’ [PN_AE18] -
PROGRAMMING NOTE AE18:
IF AA3 = 2 (FEMALE) AND [AAGE < 50 OR AA2A < 5 (YOUNGER THAN 50 YEARS OLD)], DISPLAY "When not pregnant, how";
ELSE DISPLAY "How"

‘QA17_D2’ [AE18] –

{When not pregnant, how/How} much do you weigh without shoes?

{不懷孕時。} 您不穿鞋時體重是多少？

[IF NEEDED, SAY: “About how much?”] [IF NEEDED, SAY: 「大約有多重？」]

____ POUNDS
____ KILOGRAMS
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QA17_D3’ [AD50] –

Are you blind or deaf, or do you have a severe vision or hearing problem?

您是盲人或聾人，或有嚴重視力或聽力障礙嗎？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_D5’
Are you legally blind?

您是不是法律認可的盲人？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_D5’ [AD43B] -

We are asking a few questions about people’s sexual experiences. All answers will be kept private.

In the past 12 months, how many sexual partners have you had?

在過去十二個月中，您有過幾位性伴侶？

_______ NUMBER OF PARTNERS [HR: 0 - 999, SR: 0 - 20]

If >=0 , goto ‘QA17_D7’

- 7 REFUSED
- 8 DON'T KNOW

If = -7, goto ‘QA17_D7’

‘QA17_D6’ [AD44B] -

Can you give me your best guess?

您能不能儘量估計有幾個人?

[IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE CODE INTO CATEGORIES PROVIDED]

_______ NUMBER OF PARTNERS [HR: 0 - 999, SR: 0 - 20]

'CAT_AD44B' [CAT_AD44B] - CAT_AD44B

- 01 0 PARTNERS
- 02 1 PARTNER
- 03 2-3 PARTNERS
- 04 4-5 PARTNERS
- 05 6-10 PARTNERS
- 06 MORE THAN 10 PARTNERS
- 7 REFUSED
- 8 DON'T KNOW
PROGRAMMING NOTE AD45:
IF AD43B = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR AD44 ≠0, GO TO PROGRAMMING NOTE AD46B;
ELSE CONTINUE WITH AD45;
IF AD43B OR AD44 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY “Is that partner male or female”;
ELSE DISPLAY “In the past 12 months, have your sexual partners been male, female, or both male and female”

QA17_D7 [AD45B] –
(Is that partner male or female/In the past 12 months, have your sexual partners been male, female, or both male and female)?

- 01 MALE
- 02 FEMALE
- 03 BOTH MALE AND FEMALE
- 07 REFUSED
- 08 DON'T KNOW

PROGRAMMING NOTE AD46:
IF AA3 = 1 (MALE), DISPLAY “Gay” IN QUESTION AND “Gay” IN HELP SCREEN;
ELSE IF AA3 = 2 (FEMALE), DISPLAY “Gay, Lesbian” IN QUESTION AND “Gay and Lesbian” IN HELP SCREEN

QA17_D8 [AD46B] –
Do you think of yourself as straight or heterosexual, as gay (,lesbian) or homosexual, or bisexual?

[IF NEEDED, SAY: “Straight or Heterosexual people have sex with, or are primarily attracted to people of the opposite sex, Gay (and Lesbian) people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes.”]
[IF NEEDED, SAY: 「異性戀者主要受異性吸引並與異性發生性關係；男同性戀者和女同性戀者主要受同性吸引並與同性發生性關係；雙性戀者受兩種性別的人吸引並與兩種性別的人發生性關係。」]

- 01 STRAIGHT OR HETEROSEXUAL
- 02 GAY, LESBIAN, OR HOMOSEXUAL
- 03 BISEXUAL
- 04 NOT SEXUAL/CELIBATE/NONE
- 91 OTHER (SPECIFY: _____________)
- 07 REFUSED
- 08 DON'T KNOW

OTHER (SPECIFY: _____________)
’QA17_D9’ [AD60B] –

Are you legally married to someone of the same sex?

[INTERVIEWER NOTE: DO NOT INCLUDE LEGAL DOMESTIC PARTNERSHIP. INCLUDE LEGAL SAME SEX MARRIAGES PERFORMED IN CALIFORNIA AND OTHER STATES.]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON’T KNOW

If = 1, goto ‘QA17_D11’

’QA17_D10’ [AD61B] –

Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON’T KNOW

’QA17_D11’ [AD65A] –

On your original birth certificate, was your sex assigned as male or female?

- 01 MALE
- 02 FEMALE
- 7 REFUSED
- 8 DON’T KNOW

’QA17_D12’ [AD66B] –

Do you currently describe yourself as male, female, or transgender?

- 01 MALE
- 02 FEMALE
- 03 TRANSGENDER
- 04 NONE OF THESE
- 7 REFUSED
- 8 DON’T KNOW

If = 1, 2, 3, goto ‘PN_QA17_D14’
If = -7, -8, goto ‘QA17_D15’
What is your current gender identity?

目前您認為自己是什麼性別?

- 1 SPECIFY: (________________________)
- 7 REFUSED
- 8 DON'T KNOW

Just to confirm, you were assigned {INSERT RESPONSE FROM AD65A} at birth and now describe yourself as {INSERT RESPONSE FROM AD66 OR AD67B}. Is that correct?

我想確認一下，您出生時是assigned {INSERT RESPONSE FROM AD65A}，現在您認為自己是as {INSERT RESPONSE FROM AD66 OR AD67B}。對嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, Go back to ‘QA17_D12’
‘PN_QA17_D15’ [PN_AD79] – [AD79]
PROGRAMMING NOTE AD79;
IF [AA3 = 1 OR AD65A = 1 (MALE AT BIRTH OR IDENTIFIES AS MALE)] AND AD45B = 1 OR 3 (SEXUAL PARTNERS MALE OR BOTH FEMALE AND MALE), THEN CONTINUE WITH AD79;
ELSE IF [AA3 = 1 AND AD65A = 2] OR (AA3 = 2 AND AD65A = 1), THEN CONTINUE WITH AD79;
ELSE IF AA3 = 1 AND AD46 = 2 OR 3, THEN CONTINUE WITH AD79;
ELSE SKIP TO AD83;

‘QA17_D15’ [AD79] – [AD79]
People who do not have HIV can take one pill a day to lower their risk of getting HIV. This is called pre-exposure prophylaxis, or PrEP. The pill is also called Truvada®.
At any time in the past 30 days, have you taken PrEP or Truvada®?

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 1, goto ‘QA17_D19’

‘QA17_D16’ [AD80] – [AD80]
In the past 12 months, have you taken any PrEP or Truvada®?

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 1, goto ‘QA17_D19’

‘QA17_D17’ [AD81] – [AD81]
Have you ever taken any PrEP or Truvada®?

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 1, goto ‘QA17_D19’

‘QA17_D18’ [AD82] – [AD82]
Before today, have you ever heard of PrEP or Truvada®?

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW
‘QA17_D19’ [AD83] –

Have you ever been tested for HIV, the virus that causes AIDS?

您是否曾經接受過艾滋病毒HIV測試？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_D21’

‘QA17_D20’ [AD84] –

For your most recent HIV test, were you offered the test or did you ask for the test?

您最近一次接受愛滋病毒測試，是獲提供測試，還是自己主動要求接受測試？

- 01 I WAS OFFERED THE TEST
- 02 I ASKED FOR THE TEST
- 03 I DON’T REMEMBER
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, 91, -7, -8, goto PN_AD13

‘QA17_D21’ [AD85] –

Were you ever offered an HIV test?

您曾否獲提供愛滋病毒測試？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
Section E: Women’s Health

'PN_QA17_E1' [PN_AD13] -
PROGRAMMING NOTE AD13:
IF AA3 = 1 (MALE), THEN GO TO AJ29;
IF AGE > 45, THEN GO TO AJ29;
DISPLAYS;
IF [AD65 = 2 OR AD65A = 2 (FEMALE) AND AD66 = 2 (FEMALE)], DISPLAY “These next questions are about women’s health.”;
IF [AD65 = 2 OR AD65A = 2 (FEMALE) AND AD66 = 1, 3, 4, -7 OR -8 (MALE, TRANSGENDER, NONE, REFUSED, OR DON’T KNOW)], DISPLAY “These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.”

'QA17_E1' [AD13] –
{These next questions are about women’s health. /These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.}
{以下是有關婦女健康的問題。/以下問題可能與您有關，因為您的出生証上寫的是女性。如果不是，請告訴我，我會跳過這些問題。}

To your knowledge, are you now pregnant?

据您所知，您現在懷孕了嗎？
- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'QA17_E2' [AE96] –
In the past 12 months, did you deliver a baby?

過去 12 個月內，您曾否生小孩？
- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, -9, go to ‘Section F_Mental Health’

'QA17_E3' [AE97] –
In the 8 weeks after your baby was born, did you see a doctor or other health care provider?

嬰兒出生後 8 週內，您曾否看醫生或其他醫療人員？
- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

IF AE97 =1 go to AE102
Did your doctor tell you to have a follow up visit after the birth of your baby?

醫生有否囑咐您生小孩後覆診？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW

Did you try to get an appointment?

您有否嘗試預約？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW

Did you have a way to get to your appointment?

您有否出席預約？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW

What is the main reason you did not see the doctor?

您沒有看醫生的主因是甚麼？

- 01 I FELT WELL/ I DIDN'T THINK I NEEDED IT
- 02 INSURANCE PROBLEMS
- 03 COULDN'T GET AN APPOINTMENT WITHIN 8 WEEKS
- 04 TOO BUSY/TIME GOT AWAY FROM ME
- 05 HAD A VISIT MORE THAN 8 WEEKS POSTPARTUM
- 06 NO TRANSPORTATION
- 91 OTHER (SPECIFY: __________)
- 7 REFUSED
- 8 DONT KNOW

Did that doctor or other health care provider ask you about whether or not you were feeling sad or depressed?

那位醫生或其他醫護人員曾否問您有沒有感到悲傷或抑鬱？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW
Section F: Mental Health

‘QA17_F1’ [AJ29] –

The next questions are about how you have been feeling during the past 30 days.

以下是關於在過去30天內您的感覺的問題。

About how often during the past 30 days did you feel nervous—Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

在過去30天內，您大約每隔多久會感到緊張不安 — 您認為是始終、大多數時間、有時、很少還是從不？

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 06 REFUSED
- 07 DON'T KNOW

‘QA17_F2’ [AJ30] –

During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?

在過去30天內，您大約每隔多久會感到毫無希望 — 所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 06 REFUSED
- 07 DON'T KNOW

‘QA17_F3’ [AJ31] - During the past 30 days, about how often did you feel restless or fidgety?

在過去30天內，您大約每隔多久會感到不安或煩躁？

[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]

[IF NEEDED, SAY: ”是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？”]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 06 REFUSED
- 07 DON'T KNOW
How often did you feel so depressed that nothing could cheer you up?

您每隔多久會感到極為憂鬱，以致任何事都無法讓您高興起來？

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, little of the time, or none of the time?"]

[IF NEEDED, SAY: "是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？"]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 07 REFUSED
- 08 DON'T KNOW

During the past 30 days, about how often did you feel that everything was an effort?

在過去30天內，您大約每隔多久會感到做每件事都非常吃力？

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？"]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 07 REFUSED
- 08 DON'T KNOW

During the past 30 days, about how often did you feel worthless?

在過去30天內，您大約每隔多久會感到自己毫無價值？

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]

[IF NEEDED, SAY: "所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？"]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 07 REFUSED
- 08 DON'T KNOW

Please tell me yes or no. Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?

在過去十二個月中，是否曾經有任何一個月這種感覺出現的頻率比過去30天更頻繁？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
PROGRAMMING NOTE AF63:
IF AF62 = 1 THEN CONTINUE WITH AF63;
ELSE SKIP TO PROGRAMMING NOTE AF69B intro

‘QA17_F8’ [AF63] –

The next questions are about the one month in the past 12 months when you were at your worst emotionally. During that same month, how often did you feel nervous - all of the time, most, some, a little, or none of the time?

以下是有關在過去十二個月中您的精神狀態最差的一個月的問題。

During that same month, how often did you feel nervous - all of the time, most, some, a little, or none of the time?

在那個月中，您感到精神緊張的頻率有多高？是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？

01 ALL
02 MOST
03 SOME
04 A LITTLE
05 NONE / NEVER
-7 REFUSED
-8 DON'T KNOW

‘QA17_F9’ [AF64] –

During that same month, how often did you feel hopeless - all of the time, most, some, a little, or none of the time?

在那個月中，您感到毫無希望的頻率有多高？是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？

01 ALL
02 MOST
03 SOME
04 A LITTLE
05 NONE / NEVER
-7 REFUSED
-8 DON'T KNOW

‘QA17_F10’ [AF65] –

How often did you feel restless or fidgety?

您感到不安或煩躁的頻率有多高？

[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]
[IF NEEDED, SAY: ”是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？”]

01 ALL
02 MOST
03 SOME
04 A LITTLE
05 NONE / NEVER
-7 REFUSED
-8 DON'T KNOW
'QA17_F11' [AF66] –

How often did you feel so depressed that nothing could cheer you up?

[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]
[IF NEEDED, SAY: "是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？”]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE
- 07 REFUSED
- 08 DON'T KNOW

'QA17_F12' [AF67] –

How often did you feel that everything was an effort?

[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]
[IF NEEDED, SAY: "是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？”]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 07 REFUSED
- 08 DON'T KNOW

'QA17_F13' [AF68] –

How often did you feel worthless?

[IF NEEDED, SAY: “All of the time, most of the time, some of the time, little of the time, or none of the time?”]
[IF NEEDED, SAY: "是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？”]

- 01 ALL
- 02 MOST
- 03 SOME
- 04 A LITTLE
- 05 NONE / NEVER
- 07 REFUSED
- 08 DON'T KNOW
'PN_SS_INTRO' [PN_SS_INTRO] -

IF AJ29-AJ34 > 0 THEN,
IF AJ29-AJ34 = 1 THEN AJ29_R-AJ34_R = 4;
ELSE IF AJ29-AJ34 = 2 THEN AJ29_R-AJ34_R = 3;
ELSE IF AJ29-AJ34 = 3 THEN AJ29_R-AJ34_R = 2;
ELSE IF AJ29-AJ34 = 4 THEN AJ29_R-AJ34_R = 1;
ELSE IF AJ29-AJ34 = 5 THEN AJ29_R-AJ34_R = 0;
ELSE AJ29_R-AJ34_R = AJ29-AJ34;

IF AF63-AF68 > 0 THEN,
IF AF63-AF68 = 1 THEN AF63_R-AF68_R = 4;
ELSE IF AF63-AF68 = 2 THEN AF63_R-AF68_R = 3;
ELSE IF AF63-AF68 = 3 THEN AF63_R-AF68_R = 2;
ELSE IF AF63-AF68 = 4 THEN AF63_R-AF68_R = 1;
ELSE IF AF63-AF68 = 5 THEN AF63_R-AF68_R = 0;
ELSE AF63_R-AF68_R = AF63-AF68;

IF (AJ29_R - AJ34_R) >= 0 (NON-MISSING) THEN DO;
IF (AJ29_R + AJ30_R + AJ31_R + AJ32_R + AJ33_R + AJ34_R) > 8 OR
(AF63_R + AF64_R + AF65_R + AF66_R + AF67_R + AF68_R) > 8, THEN CONTINUE WITH AF69B INTRO;

IF (AF63_R – AF68_R)  7 OR
(AF63_R + AF64_R + AF65_R + AF66_R + AF67_R + AF68_R) > 7, THEN CONTINUE WITH AF69B INTRO;

IF AF62 = 1 THEN DISPLAY “again, please”;
ELSE SKIP TO AF81;

'SS_INTRO' [SS_INTRO] –

Think {again, please} about the month in the past 12 months when you were at your worst emotionally.

'PN_QA17_F14' [PN_AF69B] -
PROGRAMMING NOTE AF69B :
IF AGE > 70 GO TO AF70B ;
ELSE CONTINUE WITH AF69B

'QA17_F14' [AF69B] –

Did your emotions interfere a lot, some, or not at all with your performance at work?

예시: 

- 01 A LOT
- 02 SOME
- 03 NOT AT ALL
- 04 DOES NOT WORK
- 05 -7 REFUSED
- 06 -8 DON'T KNOW
Did your emotions interfere a lot, some, or not at all with your household chores?

您的情绪对您做家务是影响很大、有一些影响还是根本没有影响？

- 01 A LOT
- 02 SOME
- 03 NOT AT ALL
- 7 REFUSED
- 8 DONT KNOW

Did your emotions interfere a lot, some, or not at all with your social life?

您的情绪对您的社交生活是影响很大、有一些影响还是根本没有影响？

- 01 A LOT
- 02 SOME
- 03 NOT AT ALL
- 7 REFUSED
- 8 DONT KNOW

Did your emotions interfere a lot, some, or not at all with your relationship with friends and family?

您的情绪对您与朋友及家人的关系是影响很大、有一些影响还是根本没有影响？

- 01 A LOT
- 02 SOME
- 03 NOT AT ALL
- 7 REFUSED
- 8 DONT KNOW

Now think about the past 12 months. About how many days out of the past 365 days were you totally unable to work or carry out your normal activities because of your feeling nervous, depressed, or emotionally stressed?

请想一想过去十二个月的情况。在过去的365天中，大约有多少天因为您感到精神紧张、压抑或情绪压力而完全无法工作或从事正常的活动?

_________NUMBER OF DAYS
- 7 REFUSED
- 8 DONT KNOW

Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your mental health, emotions or nerves or your use of alcohol or drugs?

在过去的十二个月中，您是否曾经因为您的精神健康、情感、神經、酗酒或吸毒的问题感到需要约见专业人士呢？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW

If = 2, -7, -8, goto 'QA17_F21'
Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?

您的保險是否為精神健康疾病治療提供保賠？例如，心理學家或精神病學家門診。

- 01 YES
- 02 NO
- 03 DON'T HAVE INSURANCE
- 07 REFUSED
- 08 DON'T KNOW

In the past 12 months have you seen your primary care physician or general practitioner for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?

在過去十二個月中，您是否曾經因為您的精神健康、情感、神經、酗酒或吸毒的問題約見過您的主治醫生或全科醫生？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

In the past 12 months have you seen any other professional, such as a counselor, psychiatrist, or social worker for problems with your mental health, emotions, nerves, OR your use of alcohol or drugs?

在過去十二個月中，您是否曾經因為您的精神健康、情感、神經、酗酒或吸毒的問題約見過任何其他專業人員，例如心理諮詢師、精神病醫生或社會工作者？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

Did you seek help for your mental or emotional health OR for an alcohol or drug problem?

您是否曾經因為精神或情感健康、酗酒或吸毒的問題尋求幫助？

- 01 MENTAL-EMOTIONAL HEALTH
- 02 ALCOHOL-DRUG PROBLEM
- 03 BOTH MENTAL & ALCOHOL-DRUG
- 07 REFUSED
- 08 DON'T KNOW
In the past 12 months, how many visits did you make to a professional for problems with your {mental or emotional health/use of alcohol or drugs/mental or emotional health and your use of alcohol or drugs}? Do not count overnight hospital stays.

在過去十二個月中，您{因為精神或情感健康/酗酒或吸毒/精神情感健康以及酗酒或吸毒的問題}約見專業人員多少次？請勿包括住院的次數。

_________ NUMBER OF VISITS [HR: 0 - 365, SR: 0 - 52]

☐ -7 REFUSED
☐ -8 DON'T KNOW

Are you still receiving treatment for these problems from one or more of these providers?

您現在仍然因為這些問題在約見其中的一位或多位服務提供者嗎？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 1, -7, -8, goto ‘QA17_F28’

Did you complete the recommended full course of treatment?

您是否已經完成了建議的全部療程？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 1, -7, -8, goto ‘QA17_F28’
What is the MAIN REASON you are no longer receiving treatment?

您不再接受治療的主要原因是什麼？

- 01 GOT BETTER/NO LONGER NEEDED
- 02 NOT GETTING BETTER
- 03 WANTED TO HANDLE PROBLEM ON OWN
- 04 HAD BAD EXPERIENCES WITH TREATMENT
- 05 LACK OF TIME/TRANSPORTATION
- 06 TOO EXPENSIVE
- 07 INSURANCE DOES NOT COVER
- 08 OTHER (SPECIFY: _____________)
- 07 REFUSED
- 08 DON'T KNOW

During the past 12 months, did you take any prescription medications, such as an antidepressant or sedative, almost daily for two weeks or more, for an emotional or personal problem?

在過去十二個月中，您是否曾經因情感或個人問題連兩週或以上幾乎每天服用任何處方藥，例如抗憂鬱藥或鎮靜劑？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

Here are some reasons people have for not seeking help even when they think they might need it. Please tell me “yes” or “no” for whether each statement applies to why you did not see a professional.

以下是人們在感到需要尋求幫助時沒有尋求幫助的一些原因。請對以下每一項陳述回答「是」或「否」，說明您沒有約見專業人員的原因。

You were concerned about the cost of treatment.

您擔心治療的費用。

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
‘QA17_F30’ [AF83] –
You did not feel comfortable talking with a professional about your personal problems.

您與專業人員談論自己的個人問題感到不自在。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_F31’ [AF84] –
You were concerned about what would happen if someone found out you had a problem.

您擔心如果有人知道了您的問題後會出現什麼情況。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_F32’ [AF85] –
You had a hard time getting an appointment.

您在預約時遇到了困難。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘PN_QA17_F33’ [PN_AF107] -
PROGRAMMING NOTE AF107:
IF AA5E  = 9 (JAPANESE) OR AA5F  = 38 (JAPANESE), THEN CONTINUE WITH AF107;
ELSE GO TO SECTION G;

‘QA17_F33’ [AF107] –

The next questions are about how you feel about different aspects of your life. For each one, please tell me how often you feel that way.

以下的問題關於您對您的生活不同方面的感受

First, how often do you feel that you lack companionship? Is it...

請您告訴我您多經常有那些感受。首先，您多常感到自己缺少陪伴？是...?

- 01 Hardly ever
- 01 幾乎從不.
- 02 Some of the time, or
- 02 有時，還是
- 03 Often?
- 03 經常
- 7 REFUSED
- 8 DON'T KNOW
How often do you feel left out? Is it...

您多常感到自己被冷落？是...?

- 01 Hardly ever
- 02 Some of the time, or
- 03 Often?
- -7 REFUSED
- -8 DON'T KNOW

How often do you feel isolated from others? Is it...

您有多常感到自己與世隔絕？是...?

- 01 Hardly ever
- 02 Some of the time, or
- 03 Often?
- -7 REFUSED
- -8 DON'T KNOW
Now a few more questions about your background.

In what country were you born?

[SELECT FROM MOST LIKELY COUNTRIES]

- 01 UNITED STATES
- 02 AMERICAN SAMOA
- 03 CANADA
- 04 CHINA
- 05 EL SALVADOR
- 06 ENGLAND
- 07 FRANCE
- 08 GERMANY
- 09 GUAM
- 10 GUATEMALA
- 11 HUNGARY
- 12 INDIA
- 13 IRAN
- 14 IRELAND
- 15 ITALY
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 20 POLAND
- 21 PORTUGAL
- 22 PUERTO RICO
- 23 RUSSIA
- 24 TAIWAN
- 25 VIETNAM
- 26 VIRGIN ISLANDS
- 91 OTHER (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER_AH33
In what country was your mother born?

您的母親是在哪一個國家出生的？

[SELECT FROM MOST LIKELY COUNTRIES]
[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]
In what country was your father born?

您的父親是在哪一個國家出生的?

[SELECT FROM MOST LIKELY COUNTRIES]
[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]

- 01 UNITED STATES
- 02 AMERICAN SAMOA
- 03 CANADA
- 04 CHINA
- 05 EL SALVADOR
- 06 ENGLAND
- 07 FRANCE
- 08 GERMANY
- 09 GUAM
- 10 GUATEMALA
- 11 HUNGARY
- 12 INDIA
- 13 IRAN
- 14 IRELAND
- 15 ITALY
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 20 POLAND
- 21 PORTUGAL
- 22 PUERTO RICO
- 23 RUSSIA
- 24 TAIWAN
- 25 VIETNAM
- 26 VIRGIN ISLANDS
- 91 OTHER (SPECIFY: _____________)
- -7 REFUSED
- -8 DON'T KNOW

OTHER_AH35

‘PN_QA17_G4’ [PN_AG25] –

PROGRAMMING NOTE AG25 :
IF AA5E ≠ 9 (NOT JAPANESE) AND AA5F ≠ 38 (NOT JAPANESE), THEN SKIP TO AH36;
ELSE IF AH33 ≠ 1, 2, 9, OR 22 (USA, AMERICAN SAMOA, GUAM, PUERTO RICO, VIRGIN ISLANDS) AND [AAGE ≤ 70 OR AA2A = 6 ], SKIP TO AG27;

‘QA17_G4’ [AG25] –

You said you are of Japanese heritage, did you or your Japanese ancestors immigrate to the US after 1945?

您說 您是日本人後代，您或您的日本祖輩是在 1945 年後移民美國的嗎

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘QA17_G6’

If = 1, goto ‘QA17_G6’
Which generation of Japanese immigrant are you?

您是哪一代日本移民？

- 01 1ST GENERATION (ISSEI)
- 02 2ND GENERATION (NISEI)
- 03 3RD GENERATION (SANSEI)
- 04 4TH GENERATION (YONSEI)
- 05 5TH GENERATION (GOSEI)
- 91 OTHER SPECIFY: (_________________)
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, 4, 5, 6, 7, 8, goto ‘QA17_G7’

‘QA17_G6’ [AG27] –

[You said you were of Japanese heritage,] which generation of Japanese immigrant are you?

您說您是日本人後代, 您是哪一代日本移民？

- 01 1ST GENERATION (ISSEI)
- 02 2ND GENERATION (NISEI)
- 03 3RD GENERATION (SANSEI)
- 91 OTHER SPECIFY: (_________________)
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_G7’ [AH36] –

What languages do you speak at home?

您在家中用什麼語言交談？

[CODE ALL THAT APPLY.]
[PROBE: “Any others?”]
[PROBE: “還有其它語言嗎？”]

- 01 ENGLISH
- 02 SPANISH
- 03 CANTONESE
- 04 VIETNAMESE
- 05 TAGALOG
- 06 MANDARIN
- 07 KOREAN
- 08 ASIAN INDIAN LANGUAGES
- 09 RUSSIAN
- 91 OTHER 1 (SPECIFY: ____________)
- 92 OTHER 2 (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

'OTHER1_AH36' [OTHER1_AH36] - OTHER1_AH36
'OTHER2_AH36' [OTHER2_AH36] - OTHER2_AH36
PROGRAMMING NOTE AH37:
IF AH36 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO PROGRAMMING NOTE AH39.
IF INTERVIEW CONDUCTED IN ENGLISH AND AH36 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH AH37 AND DISPLAY: “Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English” AND DROP RESPONSE CATEGORY “Not at all?”;
ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH AH37.
SET AH37ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME AH37 WAS ASKED.

QA17_G8’ [AH37] –

{Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English…

{因為您在家中說的語言不是英文，我們很想了解您認為自己英語說得怎樣。} 您認為您的英語說得……

- 01 Very well,
- 02 Well,
- 03 Not well, or
- 04 Not at all?
- -7 REFUSED
- -8 DON'T KNOW

PROGRAMMING NOTE AH39:
IF AH33 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PROGRAMMING NOTE AH44.
ELSE CONTINUE WITH AH39.

‘QA17_G9’ [AH39] –

The next questions are about citizenship and immigration.

以下是有關公民身份及移民的幾個問題。

Are you a citizen of the United States?

您是美國公民嗎？

- 01 YES
- 02 NO
- 03 APPLICATION PENDING
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘QA17_G11’
Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

您是持有綠卡的永久居民嗎？您的回答會得到保密，不會向移民局報告。

[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]
[IF NEEDED, SAY: “人們通常把它稱作「綠卡」，但卡的顏色可能是粉紅色、藍色或白色。”]

- 01 YES
- 02 NO
- 03 APPLICATION PENDING
- -7 REFUSED
- -8 DON'T KNOW

About how many years have you lived in the United States?

您在美國已經居住了大約多少年？

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS

'AH41Y' [AH41Y] - _____ YEAR (FIRST CAME TO LIVE IN U.S.)

- 07 REFUSED
- 08 DON'T KNOW

Is your (spouse/partner) also living in your household?

您的(配偶/伴侶)是不是也住在您的住戶中？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
May I have your {spouse/partner}'s first name, age, and gender?

您是否能夠告訴我您的配偶/伴侶的名字和年齡？

[ENTER SPOUSE'/PARTNER'S NAME, AGE, AND SEX]

'SPOUSE/PARTNER NAME ____________________________
SPOUSE/PARTNER AGE ____________________________
'SPOUSE/PARTNER SEX ____________________________

Are you now living with either of your parents?

您目前有沒有與您的父母之中一人住在一起？

[INTERVIEWER NOTE: IF R MENTIONS IN-LAWS, CODE AS YES]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

(Let's start with the oldest) What is (the child's/this child's/the next child's) first name or initials?

{從年紀最大的開始} (兒童/這名兒童/下一名兒童)的姓名或姓名縮寫是什麼？

Name/ Initials given (SPECIFY) ___________

- 7 REFUSED

What is (the child's/this child's) age?

(兒童/這名兒童)年紀多大？

- 7 REFUSED

Let KIDCNT be the number of children (KIDCNT = 1 if only one child is present). If KIDCNT = 1, the program prompts for information about the child. Otherwise, it prompts for information about the next child. The program then prompts for information about the next child, and so on, until all children have been entered.
What is {the child's/this child's} gender?

{兒童/這名兒童}的性別是什麼？

- 1 MALE
- 2 FEMALE
- 3 REFUSED

**PROGRAMMING NOTE SC15A:**
IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK SC15A FOR EACH ROSTER MEMBER WITHOUT AN AGE
NOTE SC15A IS PART OF THE CHILD ROSTER
(IF SC13A2 =9, ASK SC15A IMMEDIATELY FOR THAT CHILD BEFORE ROSTERING NEXT CHILD)
(IF SC13A1=9 AND SC13A2=9 INSERT "the child"
AND DO NOT DISPLAY CHILD NAME/SEX)

**PROGRAMMING NOTE SC14B:**
IF KIDCNT =1 INSERT "the child"
IF KIDCNT >1 INSERT "all the children"

Are you the parent or legal guardian of (the child/all the children) in your household?

您是家庭內(兒童/所有兒童)的家長或法定監護人嗎？

- 1 YES
- 2 NO
- 7 REFUSED
- 8 DON'T KNOW
Are you the parent or legal guardian of {CHILD NAME/AGE/SEX}?

您是{CHILD NAME/AGE/SEX}的家長或法定監護人嗎？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

PROGRAMMING NOTE SC14C1:
IF NAME GIVEN AT SC11A INSERT SC11A NAME
ELSE INSERT AR ADULT NAME/AGE/SEX’s spouse/partner
IF KIDCNT =1 INSERT "the child"
IF KIDCNT >1 INSERT "all the children"

Is {SC11A NAME/ AR ADULT NAME/AGE/SEX’s spouse/partner} the parent or legal guardian of (the child/all the children) in your household?

{SC11A NAME/ AR ADULT NAME/AGE/SEX的配偶/伴侶}是您家庭(兒童/所有兒童)的家長或法定監護人嗎？

- 01 YES
- 02 NO
- 03 REFUSED
- 04 DON'T KNOW

POST NOTE: IF SC14C1 =1 AUTO POPULATE SC14C2 AS 'YES' FOR ALL CHILDREN IN HH

PROGRAMMING NOTE SC14C2: IF SC14C1 =2
ASK SC14C2 FOR EACH CHILD IN THE ROSTER

Is (INSERT AR ADULT NAME/ AGE/SEX’s husband/wife/partner) the parent or legal guardian of (PERSON NAME/AGE/SEX)?

(AR NAME/AGE/SEX)是(CHILD NAME/AGE/SEX)的家長或法定監護人嗎？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
PROGRAMMING NOTE SC15A1:
IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK SC15A FOR EACH ROSTER MEMBER WITHOUT AN AGE
NOTE: SC15A IS PART OF THE CHILD ROSTER

PROGRAMMING NOTE:
IF SC14B=1 THEN
CHILD1CNT = COUNT OF CHILDREN IN SC14B AGED 0 TO 5 YRS
CHILD2CNT = COUNT OF CHILDREN IN SC14B AGED 6 TO 11 YRS
TEENCNT = COUNT OF CHILDREN IN SC14B AGED 12 TO 17 YRS
# Child selection from only those with SC14A=1 or SC14B=1
IF CHILD2CNT=0,
IF CHILD1CNT=1, CHILD AGED 0 TO 5 YRS IS [SELECTED CHILD],
ELSE IF CHILD1CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD1CNT
ELSE IF CHILD1CNT=0,
IF CHILD2CNT=1, CHILD AGED 6 TO 11 YRS IS [SELECTED CHILD],
ELSE IF CHILD2CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD2CNT
ELSE,
FOR EACH CHILD AGED 0 TO 5: SET CHILDPROB = 2 / (2 × CHILD1CNT + CHILD2CNT)
FOR EACH CHILD AGED 6 TO 11: SET CHILDPROB = 1 / (2 × CHILD1CNT + CHILD2CNT)
SELECT [SELECTED CHILD] FROM CHILDREN AGED 0 TO 11 WITH PROBABILITY CHILDPROB
# Teen selection from only those with SC14A=1 or SC14B=1
IF TEENCNT=1, CHILD AGED 12 TO 17 YRS IS [SELECTED TEEN],
ELSE IF TEENCNT IS > 1, SELECT [SELECTED TEEN] WITH PROBABILITY 1/TEENCNT

SELECT_KID_TEEN1 [SELECT_KID_TEEN1] -
PUA17_G24 [SC13A] –
I have recorded {NUMBER} child/children under 18 in the household. Have we missed any children under 18 who usually live here but are temporarily away?
我在家庭内记录到{NUMBER}名18岁以下儿童。我們有沒有漏掉任何18岁以下，通常居住在這裡但暫時離家的兒童？

☐ 1 No, no one missed
☐ 2 Yes
If = 2, Go back to 'SC13A Loop1'

POST_QA17_G24 [POST_SC13A] -
POST NOTE SC13:
DO CHILD AND TEEN SELECTION BASED ON CRITERIA
CHILD_INDEX HOLDS THE VALUE OF THE SELECTED CHILD
TEEN_INDEX HOLDS THE VALUE OF THE SELECTED TEEN
SET_CHILD IS SET TO 1 IF A CHILD IS SELECTED
SET_TEEN IS SET TO 1 IF A TEEN IS SELECTED
'PN_QA17_G25' [PN_AH44A] –

PROGRAMMING NOTE AH44A:
ANY CHILDREN IN SC13A ARE AGE 13 OR LESS, CONTINUE WITH AH44A;
ELSE GO TO AH47;

IF ANY CHILD IN ROSTER SC13A < 14 AND ≥ 14 DISPLAY "for any children under age 14";
IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or your spouse";
ELSE IF AH44 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or your partner";
ELSE DISPLAY "you"

'QA17_G25' [AH44A] –

In the past month, did you use any paid childcare (for any children under age 14) while (you or your spouse/you or your partner/you) worked, were in school, or looked for work?

在過去一個月中，當(您或您的配偶/您或您的伴侶/您)在工作、上學或尋找工作時，是否讓任何年齡在14歲以下的孩子接受任何付費幼兒看護服務?

[IF NEEDED, SAY: “This includes Head Start, day care centers, before- or after-school care programs, and any baby-sitting arrangements.”]

[IF NEEDED, SAY: “這包括學前啟蒙計劃（Head Start）、日託所、上學前及放學後的看護計劃以及任何臨時幼兒照看安排。”]  

○ 01 YES  
○ 02 NO  
○ -7 REFUSED  
○ -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_G27’

'QA17_G26' [AH44B] –

In the past month, how much did you pay for all child care arrangements and programs?

在上個月中，您為所有的幼兒看護安排及計劃支付了多少費用?

[IF NEEDED, SAY: "If it is easier for you, you can tell me what you paid in a typical week last month.  You or any other adult in your household.”]

[IF NEEDED, ASK: 「如果這樣比較容易，您可以告訴我您在上個月最有代表性的一週中支付了多少費用。您或您的住戶裡任何一位成年人。」]

'AH44BM' [AH44BM] - $_______ AMOUNT LAST MONTH  [HR: 0-8,000]

'AH44BW' [AH44BW] - $_______ AMOUNT IN TYPICAL WEEK  [HR: 0-3,000]

○ 03 NO PAYMENT IN LAST MONTH OR WEEK
○ -7 REFUSED
○ -8 DON'T KNOW
What is the highest grade of education you have completed and received credit for?

您完成的最高教育和獲得學分的最高年級是什麼？

- 30 NO FORMAL EDUCATION
- 02 GRADE SCHOOL
- 03 HIGH SCHOOL OR EQUIVALENT
- 04 4-YEAR COLLEGE OR UNIVERSITY
- 05 GRADUATE OR PROFESSIONAL SCHOOL
- 06 2-YEAR JUNIOR OR COMMUNITY COLLEGE
- 07 VOCATIONAL, BUSINESS, OR TRADE SCHOOL
- -7 REFUSED
- -8 DON'T KNOW (OUT OF RANGE)

'GRADE' [GRADE] - GRADE
- 1 1ST GRADE
- 2 2ND GRADE
- 3 3RD GRADE
- 4 4TH GRADE
- 5 5TH GRADE
- 6 6TH GRADE
- 7 7TH GRADE
- 8 8TH GRADE

'HIGH' [HIGH] - HIGH
- 09 9TH GRADE
- 10 10TH GRADE
- 11 11TH GRADE
- 12 12TH GRADE

'COLLEGE' [COLLEGE] - COLLEGE
- 13 1ST YEAR (FRESHMAN)
- 14 2ND YEAR (SOPHOMORE)
- 15 3RD YEAR (JUNIOR)
- 16 4TH YEAR (SENIOR) (BA/BS)
- 17 5TH YEAR

'GRADUATE' [GRADUATE] - GRADUATE
- 18 1ST YEAR GRAD OR PROF SCHOOL
- 19 2ND YEAR GRAD OR PROF SCHOOL (MA/MS)
- 20 3RD YEAR GRAD OR PROF SCHOOL
- 21 MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD)

'COMMUNITY' [COMMUNITY] - COMMUNITY
- 22 1ST YEAR
- 23 2ND YEAR (AA/AS)

'BUSINESS' [BUSINESS] - BUSINESS
- 24 1ST YEAR
- 25 2ND YEAR
- 26 MORE THAN 2 YEARS
Did you ever serve on active duty in the Armed Forces of the United States?

您是否曾經在美國軍隊當過現役軍人？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_G30’

When did you serve?

您是什麼時候在軍隊服役的？

FROM __________
TO __________

[CHECK ALL THAT APPLY]
- 01 WORLD WAR II (SEPT 1940 TO JULY 1947)
- 02 KOREAN WAR (JUNE 1950 TO JAN 1955)
- 03 VIETNAM WAR (AUG 1964 TO APRIL 1975)
- 04 GULF WAR/OPERATION DESERT STORM (1990 TO 1991)
- 05 AFGHANISTAN/ OPERATION ENDURING FREEDOM (2001 TO PRESENT)
- 06 IRAQ WAR / OPERATION IRAQI FREEDOM (2003 TO PRESENT)
- 07 REFUSED
- 08 DON'T KNOW

Altogether, how long did you serve?

您總共服役多長時間？

'AG24' [AG24] –

'AG24Y' [AG24Y] - _____ YEARS
'AG24M' [AG24M] - _____ MONTHS

- 07 REFUSED
- 08 DON'T KNOW

Which of the following were you doing last week?

您上週曾經從事以下哪些工作，是……

- 01 Working at a job or business,
- 02 With a job or business but not at work,
- 03 Looking for work, or
- 04 Not working at a job or business?
- 07 REFUSED
- 08 DON'T KNOW

If = 1, -7, -8, goto ‘PN_QA17_G34’
What is the main reason you did not work last week?

您上週沒有工作的主要原因是什麼?

[IF NEEDED, SAY: “Main reason is the most important reason.”]
[IF NEEDED, SAY: 「主要原因指最重要的原因。」]

- 01 TAKING CARE OF HOUSE OR FAMILY
- 02 ON PLANNED VACATION
- 03 COULDN’T FIND A JOB
- 04 GOING TO SCHOOL/STUDENT
- 05 RETIRED
- 06 DISABLED
- 07 UNABLE TO WORK TEMPORARILY
- 08 ON LAYOFF OR STRIKE
- 09 ON FAMILY OR MATERNITY LEAVE
- 10 OFF SEASON
- 11 SICK
- 91 OTHER
- -7 REFUSED
- -8 DON’T KNOW

If = 5, 6, goto ‘QA17_G33’

‘QA17_G32’ [AG10] –
Do you usually work?

您通常工作嗎?

- 01 YES
- 02 NO
- 03 LOOKING FOR WORK
- -7 REFUSED
- -8 DON’T KNOW

‘PN_QA17_G33’ [PN_AL22] -
PROGRAMMING NOTE AL22:
IF [AAGE = -7 OR -8 OR AAGE < 65] AND [AG10 = 2 (DOES NOT USUALLY WORK) OR AK2 = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH AL22 ;
ELSE GO TO PROGRAMMING NOTE AK4

‘QA17_G33’ [AL22] –
Are you receiving Social Security Disability Insurance or SSDI?

您是否在領取社會安全殘障保險(Social Security Disability Insurance，簡稱SSDI)？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

If = 1, 2, -7, -8, goto ‘PN_QA17_G38’
On your main job, are you employed by a private company, the government, or are you self-employed, or are you working without pay in a family business or farm?

[IF NEEDED, SAY: “Where did you work most hours?”]
[IF NEEDED, SAY: “您在哪裡工作的時間最長？”]

- 01 PRIVATE COMPANY NON-PROFIT ORGANIZATION, FOUNDATION
- 02 GOVERNMENT
- 03 SELF-EMPLOYED
- 04 FAMILY BUSINESS OR FARM
- -7 REFUSED
- -8 DON'T KNOW

What is the main kind of work you do?

[MAIN JOB = WHERE WORKS MOST HOURS.] [INTERVIEWER: ENTER DESCRIPTION]

What kind of agency or department is this? / What kind of business or industry is this?

[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E.G., STATE, LOCAL) AND THE FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.)];

What do they make or do at this business?

[IF NEEDED, SAY: “What do they make or do at this business?”]
‘PN_QA17_G37’ [PN_AK8] –
PROGRAMMING NOTE AK8 :
IF AK4 = 2 (GOVERNMENT EMPLOYEE), CODE AK8 = 8 AND GO TO AG8 ;
IF AK4 = 3 (SELF-EMPLOYED), CONTINUE WITH AK8 AND DISPLAY "Including yourself, about" and "you"; ELSE CONTINUE WITH AK8 AND DISPLAY "About" and "your employer";

‘QA17_G37’ [AK8] –

(Including yourself, about/About) how many people are employed by (your employer/you) at all locations?

(IF NEEDED, SAY: “Your best guess is fine.”) [IF NEEDED, SAY: 「請盡量估計人數。」]

✓ 01 1 OR 2
✓ 02 3-9
✓ 03 10-24
✓ 04 25-50
✓ 05 51-100
✓ 06 101-200
✓ 07 201-999
✓ 08 1,000 OR MORE
✓ -7 REFUSED
✓ -8 DON'T KNOW

‘PN_QA17_G38’ [PN_AG8] –
PROGRAMMING NOTE AG8 :
IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1, CONTINUE WITH AG8 ;
IF AH43 = 1, THEN DISPLAY “spouse”;
ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY “partner”;
ELSE GO TO AH1

‘QA17_G38’ [AG8] –

Which of the following was your (spouse/partner) doing last week?

您的(配偶/伴侶)上週曾經從事以下哪些工作，是……

✓ 01 Working at a job or business,
✓ 01 從事工作或經營業務
✓ 02 With a job or business but not at work,
✓ 02 有工作或業務, 但不在工作
✓ 03 Looking for work, or
✓ 03 找工作，還是
✓ 04 Not working at a job or business?
✓ 04 不在從事工作或經營業務?
✓ -7 REFUSED
✓ -8 DON'T KNOW

If = 1, 2, goto ‘QA17_G40’
Does your {spouse/partner} usually work?

您的{配偶/伴侶}通常工作嗎?

- 01 YES
- 02 NO
- 03 LOOKING FOR WORK
- 07 REFUSED
- 08 DON'T KNOW

If = 2, 3, -7, -8, goto ‘QA17_H1’

On your {spouse's/partner's} main job, is {he/she} employed by a private company, the government, or is {he/she} self-employed, or is {he/she} working without pay in a family business or farm?

您的{配偶/伴侶}從事的主要工作的僱主是：私人公司、政府部門、還是{他/她}是自行經營者（個體經營者），還是從事家庭企業或農場內不付薪水的工作？

- 01 PRIVATE COMPANY NON-PROFIT ORGANIZATION, FOUNDATION
- 02 GOVERNMENT
- 03 SELF-EMPLOYED
- 04 FAMILY BUSINESS OR FARM
- 07 REFUSED
- 08 DON'T KNOW
Section H: Health Insurance

‘QA17_H1’ [AH1] –

The next topics are about health insurance and health care.

以下是有關健康保險及健康護理的問題。

Is there a place that you usually go to when you are sick or need advice about your health?

當您生病或需要接受健康諮詢時，您是否有一個通常可以去的地方？

[INTERVIEWER NOTE: CIRCLE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

ุม  01 YES
ุม  02 NO
ุม  03 DOCTOR/MY DOCTOR
ุม  04 KAISER
ุม  05 MORE THAN ONE PLACE
ุม -7 REFUSED
ุม -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H3’

‘PN_QA17_H2’ [PN_AH3] -
PROGRAMMING NOTE AH3:
IF AH1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often—a medical";
ELSE IF AH1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";
ELSE IF AH1 = 4 (KAISER) CIRCLE “1” FOR AH3 AND GO TO AH12

‘QA17_H2’ [AH3] –

{What kind of place do you go to most often—a medical/Is your doctor in a private} doctor’s office, a clinic or hospital clinic, an emergency room, or some other place?

{您最常去什麼樣的地方—/您的醫生是否在一個私人} 醫生辦公室、診所或醫院診所、急診室或其它地方？

ุม  01 DOCTOR’S OFFICE/KAISER/OTHER HMO
蝰  02 CLINIC/HEALTH CENTER/HOSPITAL CLINIC
蝰  03 EMERGENCY ROOM
蝰  91 SOME OTHER PLACE (SPECIFY: __________)
蝰  92 NO ONE PLACE
蝰 -7 REFUSED
蝰 -8 DON'T KNOW

OTHER_AH3
‘QA17_H3’ [AH12] –

During the past 12 months, did you visit a hospital emergency room for your own health?

在過去 12 個月中，您有沒有因為自身的健康去過醫院急診室？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H5’

‘QA17_H4’ [AH95] –

{During the past 12 months, how many times did you visit a hospital emergency room for your own health?/How many times did you do that?

{在過去十二個月中，您因自己的健康問題去了多少次醫院急診室就診?/您去過多少次?)

[IF NEEDED, SAY: “During the past 12 months, how many times did you visit a hospital emergency room for your own health?”] [IF NEEDED, SAY: “在過去十二個月中，您因自己的健康問題去了多少次醫院急診室就診?”]

________ NUMBER OF TIMES [HR: 0 - 200]
- 07 REFUSED
- 08 DON'T KNOW
MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE?

MediCARE（醫療保障計劃）是為年滿65歲或患有某種殘障的人士提供的健康保險計劃。您目前是否享受MediCARE保賠？

[Interviewer Note: Include Medicare Managed Plans as well as the Original Medicare Plan.]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto 'QA17_H8'
If = -7, -8, goto 'QA17_H16'

`POST_QA17_H5` [POST_AI1] -
POST-NOTE AI1:
IF AI1 = 1, SET ARMCARE = 1 AND SET ARINSURE = 1

`PN_QA17_H6` [PN_AI2] -

PROGRAMMING NOTE AI2:
IF [AAGE > 64 OR AA2A = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND AI1 = 2 (NOT COVERED BY MEDICARE), CONTINUE WITH AI2;
ELSE GO TO PROGRAMMING NOTE AH123

`QA17_H6` [AI2] –

Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?

雖然您剛才告訴過我您的年齡在65歲或65歲以上，但您沒有享受MediCARE（醫療保障計劃），對不對？

- 01 CORRECT, NOT COVERED BY MEDICARE
- 02 NOT CORRECT, R IS COVERED BY MEDICARE
- 93 AGE IS INCORRECT
- -7 REFUSED
- -8 DON'T KNOW

If = 1, -7, -8, goto 'PN_QA17_H16'
If = 2, goto 'PN_QA17_H8'

`POST_QA17_H6` [POST_AI2] -
POST-NOTE AI2:
IF AI2 = 2, SET ARMCARE = 1 AND SET ARINSURE = 1
What is your age, please?
請告訴我您的年齡多大。

'AI3Y' [AI3Y] - _____ YEARS OF AGE [HR: 18-105]

If >=0, goto ‘PN_QA17_H16’
- 7 REFUSED
- 8 DONT KNOW

If = -7, -8, goto ‘PN_QA17_H16’

‘POST_QA17_H7’ [POST_AI3] -
POST NOTE AI3 : ADATE
SET ADATE = CURRENT DATE (YYYYMMDD);
SET AAGE = AI3 ;
IF AAGE < 18, CODE AS IA AND TERMINATE

‘PN_QA17_H8’ [PN_AH123] -
PROGRAMMING NOTE AH123 :
IF ARMCARE = 1, CONTINUE WITH AH123 ;
ELSE GO TO PROGRAMMING NOTE AI6

‘QA17_H8’ [AH123] –
Is this a MediCARE Advantage Plan?
這個醫療保險是 MediCARE Advantage計劃嗎？

[IF NEEDED, SAY: “MediCARE Advantage plans, sometimes called Part C plans, are offered by private companies approved by MediCARE. MediCARE Advantage plans provide Medicare Part A and Part B coverage.”]

[IF NEEDED, SAY: MediCARE Advantage醫療保險計劃，有時也被稱為Part C plans，是由MediCARE認可的私營醫保公司提供的。MediCARE Advantage醫療保險計劃提供Medicare Part A和Medicare Part B醫療保險。]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DONT KNOW

If = 2, -7, -8, goto ‘QA17_H11’

‘POST_QA17_H8’ [POST_AH123] -
POST-NOTE AH123 ;
IF AH123 = 1, SET ARMADV= 1
Is your MediCARE Advantage plan provided through an HMO, PPO, or Private Fee-for-Service Plan?

您的MediCARE Advantage医疗保险计划是通过HMO、PPO，还是私营有偿医疗服务（Private Fee-for-Service）提供的？

[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, you must generally receive care from HMO doctors or the expense is not covered, unless there was a medical emergency.”]

[IF NEEDED, SAY: ”HMO計劃通常要求您必須從HMO醫生處接受護理，否則就不提供醫療費保賠，除非是醫療急診。”]

[IF NEEDED, SAY: “PPO stands for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan’s network. Also, you can access doctors and specialists directly without a referral from your primary care provider.”]

[IF NEEDED, SAY: 「PPO表示「首選服務提供者團體」。在PPO中，您可以使用任何醫生和醫院，但如果您使用屬於您的計劃網路的醫生和醫院時，可支付較低的費用。另外，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。」]

[IF NEEDED, SAY: “Private Fee-for-Service is where MediCARE pays the set amount of money every month to the private insurance company. With Private Fee-for-Service, the insurance company decides how much you pay for services, not MediCARE.”]

[IF NEEDED, SAY: “私营有償醫療服務（Private Fee-for-Service）計劃，是由MediCARE每月支付私营保险公司的固定的醫療保險資金，然後由這家私营保險公司，而不是MediCARE，決定你支付多少醫療費。”]

[INTERVIEWER NOTE: IF R MENTIONS A HEALTH PLAN SUCH AS ”Kaiser” CODE ”1” (HMO).]
[INTERVIEWER NOTE: CIRCLE “4” ONLY IF VOLUNTEERED. DO NOT PROBE.]

- 01 HMO (HEALTH MAINTENANCE ORGANIZATION)
- 02 PPO (PREFERRED PROVIDER ORGANIZATION)
- 03 PFFS (PRIVATE FEE FOR SERVICE)
- 04 SNP (SPECIAL NEEDS PLAN)
- 91 OTHER (SPECIFY: _______________)
- -7 REFUSED
- -8 DON'T KNOW

OTHER_AH124
What is the name of your MediCARE plan?

您的 MediCARE 計劃名稱是什麼？

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: “Do you have an insurance card or something else with the plan name on it?”]

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: “您是否有註明保健計劃名稱的保險卡或其他文件？”]

- 01 ACCESS SENIOR HEALTHCARE
- 02 AETNA
- 03 AETNA GOLDEN MEDICARE
- 04 AIDS HEALTHCARE FOUNDATION, LA
- 05 ALAMEDA ALLIANCE FOR HEALTH
- 07 ANTHEM BLUE CROSS OF CALIFORNIA
- 08 ASPIRE HEALTH PLAN
- 09 BLUE CROSS CALIFORNIA
- 03 AETNA GOLDEN MEDICARE
- 05 ALAMEDA ALLIANCE FOR HEALTH
- 07 ANTHEM BLUE CROSS OF CALIFORNIA
- 09 BLUE CROSS CALIFORNIA
SELECT "00 - NOT SPECIFIED"
ON "1 - YES"
ON "2 - NO"
ON "3 - DON'T KNOW"
ON "4 - REFUSED"
ON "5-6 OTHER (SPECIFY: _____________)"

OTHER_AH125

`POST_QA17_H10` [POST_AH125] -
POST-NOTE FOR AH125 :
ALL ANSWERS GO TO PROGRAMMING NOTE AH126 ;
IF AH125 = 93, 87, OR 89 THEN ARMILIT = 1
Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Do you have this type of health insurance?

有些有資格享受MediCARE的人另外還有私人保險，有時稱為Medigap或Medicare補充保險。您有此類健康保險嗎？

[IF NEEDED, SAY: “These are policies that cover health care costs not covered by MediCARE alone.”]
[IF NEEDED, SAY: “這些是為MediCARE不提供保賠的健康護理費用提供保賠的保險。”]

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H16’

For the {MediCARE Advantage plan/MediCARE Supplement plan}, did you sign up directly, or did you get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?

有關 {MediCARE Advantage 醫保計劃/MediCARE補充保險}，您是直接註冊參加還是通過目前的雇主、以前的雇主、工會、家庭企業、AARP還是以其他方式獲得該保險？

[IF NEEDED, SAY: “AARP stands for the American Association of Retired Persons.”]
[IF NEEDED, SAY: “AARP代表「美國退休人協會」。”]

○ 01 DIRECTLY
○ 02 CURRENT EMPLOYER
○ 03 FORMER EMPLOYER
○ 04 UNION
○ 05 FAMILY BUSINESS
○ 06 AARP
○ 07 SPOUSE’S EMPLOYER
○ 08 SPOUSE’S UNION
○ 09 PROFESSIONAL/FRATERNAL ORGANIZATION
○ 91 OTHER
○ -7 REFUSED
○ -8 DON'T KNOW
Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否為該項保健計劃支付任何或全部保費或費用？請勿包括您或您的家庭可能必須支付的任何協同付款或免賠額費用。

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]
[IF NEEDED, SAY: 「協同付款是您每次看病或使用健康護理系統時支付的部份健康護理費用，而保險計劃支付您的主要健康護理保賠費。」]

[IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying."]
[IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]
[IF NEEDED, SAY: 「保費是您的醫療保險計劃的每月收費。」]

☑ 01 YES  ☑ 02 NO  ☑ -7 REFUSED  ☑ -8 DON'T KNOW

‘QA17_H14’ [AH54] –

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

是否有任何其他人（例如雇主、工會或專業機構）支付該項保健計劃的全部或部份保費或費用？

☑ 01 YES  ☑ 02 NO  ☑ -7 REFUSED  ☑ -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H16’
Who is that?

是誰?

[IF NEEDED, SAY: “Who besides yourself pays any portion of that cost for that plan, such as your employer, a union, or professional organization?”]
[IF NEEDED, SAY：「除了您本人，還有誰支付這項計劃的任何費用？例如，您的雇主，工會或專業機構。」]

[CODE ALL THAT APPLY]
[PROBE: “Any others?”]  [PROBE: 「還有任何其他人或機構嗎？」]

- 01 CURRENT EMPLOYER
- 02 FORMER EMPLOYER
- 03 UNION
- 04 SPOUSE’S/PARTNER’S CURRENT EMPLOYER
- 05 SPOUSE’S/PARTNER’S FORMER EMPLOYER
- 06 PROFESSIONAL/FRATERNAL ORGANIZATION
- 07 MEDICAID/MEDI-CAL ASSISTANCE
- 91 OTHER
- 7 REFUSED
- 8 DON’T KNOW

{Is it correct that you are/Are you} covered by Medi-Cal?

您享受Medi-Cal的保賠，{對嗎/嗎}？

[IF NEEDED, SAY: "A plan for certain low-income children and their families, pregnant women, and disabled or elderly people."]
[IF NEEDED, SAY：「這是一項向某些低收入兒童及其家人、孕婦、殘障人士或年長者提供的計劃。」]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON’T KNOW
(Besides the Medicare supplement plan you told me about/Besides the Medicare Advantage plan you told me about), Are you covered by [any other/a] health insurance plan or HMO through a current or former employer or union?

(除了您告訴我的Medicare 補充計劃/除了您告訴我的Medicare Advantage 計劃)，您是否享有目前或以前的雇主或工會提供的[其他任何]醫療保險計劃或 HMO？

[IF NEEDED, SAY: "...either through your own or someone else's employment?"]
[IF NEEDED, SAY: 「... 可以是通過您本人或其他人的工作？」]

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

POST_QA17_H17 [POST_AI8] -
POST-NOTE FOR AI8:
IF AI8 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1

QA17_H18 [AI11] –
Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?

您是否享受您直接從保險公司或HMO或透過Covered California購買的醫療保險計劃的承保？

[IF NEEDED, SAY: “Don't include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital.”]
[IF NEEDED, SAY：「請不要包括僅支付某些疾病（例如癌症或中風）費用的計劃或當您住院時僅向您支付「額外現金」的計劃。」]

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H20’
How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

您是如何購買這項健康保險的 — 是直接從保險公司或HMO購買還是透過Covered California購買？

- 01 INSURANCE COMPANY OR HMO
- 02 COVERED CALIFORNIA
- 92 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

OTHER_AH104

POST_QA17_H19'[POST_AH104]' -
POST NOTE FOR AH104:
IF AH104 = 2, THEN SET ARHBEX = 1

‘PN_QA17_H20’ [PN_A9] -
PROGRAMMING NOTE FOR A9:
IF A11 = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH A9; ELSE GO TO PROGRAMMING NOTE AH105

‘QA17_H20’ [A9] –
Was this plan obtained in your own name or in the name of someone else?

這項計劃是用您的姓名申請還是用其他人的姓名申請的？

- 01 IN OWN NAME
- 02 IN SOMEONE ELSE'S NAME
- -7 REFUSED
- -8 DON'T KNOW

If = 1, -7, -8, goto ‘PN_QA17_H22’

‘POST_QA17_H20’ [POST_A19] -

POST NOTE FOR A9:
IF A18 = 1 AND A9 = 1 SET AREMPOWN = 1 AND SET ARINSURE = 1 AND SET AREMPOTH = 0;
IF A18 = 1 AND A9 = 2, -7, OR -8 SET AREMPOTH = 1 AND SET ARINSURE = 1;
IF A11 = 1 AND A9 = 1 SET ARDIROWN = 1 AND ARINSURE = 1;
IF A11 = 1 AND A9 = 2, -7, OR -8 SET ARDIROTH = 1 AND ARINSURE = 1

‘PN_QA17_H21’ [PN_A19A] -
PROGRAMMING NOTE A9A:
IF A43 = 1 (MARRIED) OR A60B = 1 OR A61B = 1 OR IF A43A = 1 (LIVING WITH PARENTS) OR IF [AAGE < 26 OR AA2A =1 (BETWEEN 18 AND 29)], CONTINUE WITH A9A; ELSE GO TO PROGRAMMING NOTE AH105;
IF A43 = 1, THEN DISPLAY “spouse’s name”;
IF A43 ≠ 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY “partner’s name”;
IF A43A = 1 OR AAGE < 26, THEN DISPLAY “parent’s name”;
Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?

是否以您的{配偶}{伴侶}{父母}或其他人的名義參加該項計劃？

- 01 IN SPOUSE’S/PARTNER’S NAME
- 02 IN PARENT’S NAME
- 03 IN SOMEONE ELSE’S NAME
- -7 REFUSED
- -8 DON'T KNOW

**POST_QA17_H21** [POST_A19A] -

**POST-NOTE FOR A19A:**

IF A18 = 1 AND A19A = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP = 1;
IF AH104 = 2 AND A19A = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP = 1 AND SPHBEX = 1;
IF A18 = 1 AND A19A = 2 SET AREMPPAR = 1 AND AREMPOTH = 0;
IF A111 = 1 AND A19A = 1 SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP = 1;
IF A111 = 1 AND A19A = 2 SET ARDIRPAR = 1 AND ARDIROTH = 0

**PN_QA17_H22** [PN_AH105] -

**PROGRAMMING NOTE AH105:**

IF A18 = 1 (EMPLOYER-BASED COVERAGE) AND AK8 <= 5 (FIRM SIZE <= 100), CONTINUE WITH AH105 AND DISPLAY;
IF AREMPOWN = 1 THEN DISPLAY {you};
IF AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1 THEN DISPLAY {he or she};
ELSE GO TO PROGRAMMING NOTE AH106;

**QA17_H22** [AH105] –

How did {you/he or she} sign up for this health insurance — through an employer, through a union, or through Covered California’s SHOP program?

{(您/他或她)是如何註冊參加這項健康保險的 — 透過雇主、工會還是透過Covered California的SHOP計劃？}

**[IF NEEDED, SAY: “SHOP is the Small Business Health Options Program administered by Covered California”]** [IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

- 01 EMPLOYER
- 02 UNION
- 03 SHOP/ COVERED CALIFORNIA
- 92 OTHER (SPECIFY: ___________)
- -7 REFUSED
- -8 DON'T KNOW

**POST_QA17_H22** [POST_AH105] -

**POST-NOTE FOR AH105**:

IF AH105 = 3, THEN SET ARHBEX = 1

**PN_QA17_H23** [PN_AH106] -

**PROGRAMMING NOTE AH106**

IF ARHBEX = 1, THEN CONTINUE WITH AH106;
ELSE GO TO PROGRAMMING NOTE AH57;
Was this a bronze, silver, gold or platinum plan?

這是銅、銀、金還是白金計劃？

- 01 BRONZE
- 02 SILVER
- 03 GOLD
- 04 PLATINUM
- 05 MEDI-CAL / MEDICAID
- 06 MINIMUM COVERAGE PLAN/CATASTROPHIC
- 92 OTHER (SPECIFY: ___________)
- -7 REFUSED
- -8 DON'T KNOW

PROGRAMMING NOTE AH107:
IF AH105 = 3, THEN GO TO AH57;
ELSE CONTINUE WITH AH107;

Was there a subsidy or discount on the premium for this plan?

這項計劃的保費是否有補貼或折扣？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否為該項保健計劃支付任何或全部保費或費用？請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto 'PN_QA17_H28'

How much do you {does your family} pay each month for your {your family} health insurance plan? Your best guess is fine.

您{您家人}每月就您{您家人}的健康保險計劃支付多少錢？盡量估計就可以了。

- 7 REFUSED
- 8 DON'T KNOW
Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?

是否有任何其他人（例如雇主、工會或專業機構）支付該項保健計劃的全部或部份保費或費用？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H30’

‘PN_QA17_H28’ [PN_AH56] -

PROGRAMMING NOTE AH56:

IF AH57  = 2 THEN DISPLAY “Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization”;
ELSE DISPLAY “Who is that”

‘QA17_H28’ [AH56] - {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?

[IF NEEDED, SAY: ‘除了您本人，還有誰支付這項計劃的任何費用？例如，您的雇主、工會或專業機構？是誰’]?

[IF NEEDED, SAY: ‘除了您本人，還有誰支付這項計劃的任何費用？例如，您的雇主、工會或專業機構。’]?

[CODE ALL THAT APPLY]

[PROBE: “Any others?”]

[PROBE: 「還有其他任何人或機構嗎？」]

- 01 CURRENT EMPLOYER
- 02 FORMER EMPLOYER
- 03 UNION
- 04 SPOUSE/S/PARTNER’S CURRENT EMPLOYER
- 05 SPOUSE/S/PARTNER’S FORMER EMPLOYER
- 06 PROFESSIONAL/FRATERNAL ORGANIZATION
- 07 MEDICAID/MEDI-CAL ASSISTANCE
- 09 MEDIGARE
- 11 COVERED CALIFORNIA
- 91 OTHER
- -7 REFUSED
- -8 DON'T KNOW

‘POST_QA17_H28’ [POST_AH56] -

POST-NOTE AH56:

IF AH56  = 1, 2, OR 3, THEN SET AREMPOWN = 1;
IF AH56  = 4 OR 5, THEN SET AREMPSP = 1;
IF AH56  = 6, THEN SET AROTHER = 1;
IF AH56  = 9, SET ARMCA = 1 AND SET ARDIRECT = 0;
IF AH56  = 7, SET ARMCA = 1 AND SET ARDIRECT = 0;
IF AH56  = 11, SET ARHBEX = 1;
IF AH56  = 91, THEN SET AROTHER = 1
'QA17_H29' [AH129] - How much do they contribute to your plan each month?

他們每月就您的計劃供款多少？

__________________________________________ (AMOUNT) [HR: 0 - 9997, SR: 0 - 2000]

-7 REFUSED
-8 DON'T KNOW

'PN_QA17_H30' [PN_AI13] -
PROGRAMMING NOTE AI13:
IF [AK1 = 1 OR 2 (R WORKED LAST WEEK) OR AG10 = 1 (R USUALLY WORKS)] AND AK4 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOWN ≠ 1 (NO EMPLOYER-BASED COVERAGE), CONTINUE WITH AI13 ; ELSE GO TO PROGRAMMING NOTE AI16

'QA17_H30' [AI13] –
Does your employer offer health insurance to any of its employees?

您的雇主有沒有提供醫療保險給任何員工？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H34’

'QA17_H31' [AI14] –
Are you eligible to be in this plan?

您是否有資格參加該項計劃？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, goto ‘QA17_H33’
If = -7, goto ‘PN_QA17_H34’

'QA17_H32' [AI15] –
What is the one main reason why you aren't in this plan?

您沒有參加該項計劃的一個主要原因是什麼？

- 01 COVERED BY ANOTHER PLAN
- 02 TOO EXPENSIVE
- 03 DIDN'T LIKE PLAN OFFERED
- 04 DON'T NEED OR BELIEVE IN HEALTH INSURANCE
- 91 OTHER (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, 4, 91, -7, -8, goto ‘PN_QA17_H34’

OTHER_AI15
What is the one main reason why you are not eligible for this plan?

您沒有資格參加該項計劃的一個主要原因是什麼？

- 01 HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED
- 02 CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN
- 03 DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR
- 91 OTHER (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?

您是否享受 CHAMPUS/CHAMP-VA、TRICARE、VA或其它軍隊醫療護理計劃？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, OR PRIVATE PLAN), CONTINUE WITH AI16; ELSE GO TO PN AI17

If AI16 = 1, SET ARMILIT = 1 AND SET ARINSURE = 1
Are you covered by some other government health program, such as AIM, “Mister MIP,” the Family PACT program, Healthy Kids, or something else?

([IF NEEDED, SAY: "AIM means Access for Infants and Mothers; Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and PCIP is the pre-existing condition insurance plan."]

([IF NEEDED, SAY: 「AIM 表示「母嬰保險計劃」; Mister MIP或MRMIP表示「重大風險醫療保險計劃」; Family PACT是一項州立計劃，為沒有保險的低收入男女的避孕/生育醫療服務支付費用。」]

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW
What type of health insurance do you have?

您有哪種醫療保險計劃？

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]
[PROBE: "還有任何其他保險嗎？"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]
[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的？"]

- 01 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 02 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION
- 03 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)
- 04 MEDICARE
- 05 MEDI-CAL
- 07 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 08 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_H37' [POST_A19] :
POST-NOTE A19 :
 IF A19 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1;
 IF A19 = 2, SET AREMPOTH = 1 AND SET ARINSURE = 1;
 IF A19 = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1;
 IF A19 = 4, SET ARMCAL = 1 AND SET ARINSURE = 1;
 IF A19 = 5, SET ARMILIT = 1 AND SET ARINSURE = 1;
 IF A19 = 7, SET AROTHGOV = 1 AND SET ARINSURE = 1;
 IF A19 = 8, SET AROTH = 1;
 IF A19 = 10, SET ARHBEX = 1 AND ARDIRECT = 1 AND ARINSURE = 1 AND ARDIROTH = 1;
 IF A19 = 11, SET ARHBEX = 1 AND SET ARINSURE = 1 AND AREMPOTH = 1;
 IF A19 = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1;
 IF A19 = 92, -7, OR -8, SET AROTHER = 1 AND SET ARINSURE = 1
PROGRAMMING NOTE AH59:
IF AI19 = 1, 2, OR 3 CONTINUE WITH AH59;
ELSE GO TO PROGRAMMING NOTE AI20

‘QA17_H38’ [AH59] –
Was this plan obtained in your own name or in the name of someone else?

[IF NEEDED, SAY: “Even someone who does not live in this household.”]
[IF NEEDED, SAY: 「甚至不是住在您的家中的人？」]

01 IN OWN NAME
02 IN SOMEONE ELSE’S NAME
-7 REFUSED
-8 DON’T KNOW

If = 1, -7, -8, goto ‘PN_QA17_H40’

POST-NOTE AH59:
IF (AI19 = 1 OR 2 OR KAI19 =11) AND AH59 = 1 THEN SET AREMPOWN = 1 AND SET AREMPOTH = 0 AND SET ARINSURE = 1;
IF (AI19 = 3 OR 10) AND AH59 = 1 THEN SET ARDIROWN = 1 AND SET ARDIROTH = 0 AND SET ARINSURE = 1;
IF (AI19 = 1 OR 2) AND (AH59 = 2, -7, OR -8), SET AREMPOTH = 1 AND AREMPOWN = 0 AND SET ARINSURE = 1;
IF AI19 = 1 AND (AH59 = 2, -7, OR -8) SET ARDIROTH = 1 AND ARDIROWN = 0 AND SET ARINSURE = 1

‘PN_QA17_H39’ [PN_AH60] -
PROGRAMMING NOTE AH60:
IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 OR IF AH43A = 1 (LIVING WITH PARENTS) OR AAGE < 26, CONTINUE WITH AH60;
ELSE GO TO PROGRAMMING NOTE AI20;
IF AH43 = 1 THEN DISPLAY “spouse’s name”;
IF AH43 ≠ 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY “partner’s name”;
IF AH43A = 1 OR AAGE < 26, THEN DISPLAY “parent’s name”;
PROGRAMMING NOTE AI20:
IF ARIHS ≠ 1 AND AA5A = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH AI20;
ELSE GO TO PROGRAMMING NOTE AI37intro

'QA17_H40' [AI20] –
Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?
您有沒有享受印地安人醫療服務、部落醫療計劃或都市印地安人診所計劃？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

'POST_QA17_H40' [POST_AI20] -
POST-NOTE AI20:
IF AI20 = 1, SET ARIHS = 1

'PN_AI37_INTRO' [PN_AI37_INTRO] -
PROGRAMMING NOTE AI37intro:
IF [AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1] AND AH44 = 1 (SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH AI37intro;
IF AH43 = 1, THEN DISPLAY “spouse”;
ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY “partner”;
ELSE GO TO PROGRAMMING NOTE AI22C

'AI37intro' [AI37intro] –
These next questions are about the type of health insurance your {spouse/partner} may have.
接下來這些問題和您的 {配偶/伴侶} 可能有的健康保險種類有關。

'PN_QA17_H41' [PN_AI37] -
PROGRAMMING NOTE AI37:
IF SPOUSE 65 OR OLDER THEN
IF ARMCARE ≠ 1, CONTINUE WITH AI37 WITHOUT DISPLAY
ELSE IF ARMCARE = 1, CONTINUE WITH AI37 AND DISPLAY “You said that you are covered by Medicare.” AND “also”;
ELSE GO TO PROGRAMMING NOTE AI38

'QA17_H41' [AI37] –
{You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?
{您說您有Medicare.} 您的 {配偶/伴侶} {也} 能享受Medicare保賠嗎？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

'POST_QA17_H41' [POST_AI37] -
POST-NOTE AI37:
IF AI37 = 1, SET SPMCARE = 1 AND SET SPINSURE = 1

'PN_QA17_H42' [PN_AH127] -
PROGRAMMING NOTE AH127:
IF SPMCARE ≠ 1 AND ARMADV ≠ 1, SKIP TO PROGRAMMING NOTE AI37A;

DISPLAYS:
IF SPMCARE = 1 AND ARMADV ≠ 1, CONTINUE WITH AH127 WITHOUT DISPLAY;
ELSE IF SPMCARE = 1 AND ARMADV = 1, CONTINUE WITH AH127 AND DISPLAY “You said that you have a Medicare Advantage plan.” AND “also”; 
IF AH43 = 1 (MARRIED) THEN DISPLAY “spouse’s”;
ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY “partner’s”;

‘QA17_H42’ [AH127] –
{You said that you have a Medicare Advantage plan.} Does your {spouse/partner}{also} have a Medicare Advantage plan?
{您說您有Medicare Advantage計劃。} 您的{配偶/伴侶} 是否{也} 加入了 Medicare Advantage計劃？

[IF NEEDED, SAY: “MediCARE Advantage plans, sometimes called Part C plans, are offered by private companies approved by MediCARE. MediCARE Advantage plans provide Medicare Part A and Part B coverage.”]
[IF NEEDED, SAY: MediCARE Advantage計劃，有時也被稱為Part C計劃，是由MediCARE認可的私營醫保公司提供的。MediCARE Advantage醫療保險計劃提供Medicare Part A和Medicare Part B醫療保險。]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘POST_QA17_H42’ [POST_AH127] -
POST-NOTE AH127:
IF AH127 = 1, THEN SET SPMADV = 1 AND SET SPINSURE = 1

‘PN_QA17_H43’ [PN_AI37A] -
PROGRAMMING NOTE AI37A:
IF SPMADV = 1, THEN SKIP TO PROGRAMMING NOTE AI38;
ELSE IF SPMCARE = 1 AND ARSUPP ≠ 1, CONTINUE WITH AI37A WITHOUT DISPLAY;
ELSE IF SPMCARE = 1 AND ARSUPP = 1, CONTINUE WITH AI37A AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”; 
IF AH43 = 1 (MARRIED), THEN DISPLAY “spouse”;
ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY “partner”;
ELSE GO TO PROGRAMMING NOTE AI38

‘QA17_H43’ [AI37A] –
{You said that you have a Medicare Supplement plan.} Does your {partner/spouse} {also} have a Medicare supplement plan?
{您說您有Medicare 補充計劃。} 您的{伴侶/丈夫/妻子/配偶} 是否{也} 加入了 Medicare 補充計劃？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘POST_QA17_H43’ [POST_AI37A] -
POST-NOTE AI37A:
IF AI37A = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1

‘PN_QA17_H44’ [PN_AI38] -
PROGRAMMING NOTE AI38:
IF ARMCAL = 1, CONTINUE WITH AI38;
DISPLAY "also" IF ARMCARE = 1;
ELSE GO TO PROGRAMMING NOTE AI40

‘QA17_H44’ [AI38] –
You said you (also) have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?

您說您{也}可以享受Medi-Cal（加州醫療保健計劃）。您的{配偶/伴侶} 是否也能享受Medi-Cal保賠？

-  01 YES
-  02 NO
-  -7 REFUSED
-  -8 DON'T KNOW

‘POST_QA17_H44’ [POST_AI38]
POST-NOTE AI38:
IF AI38 = 1, SET SPMCAL = 1 AND SET SPINSURE = 1

‘PN_QA17_H45’ [PN_AI40] –

PROGRAMMING NOTE AI40:
IF AREMPOWN = 1 AND ARHBEX ≠ 1, CONTINUE WITH AI40;
IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE AH108

‘QA17_H45’ [AI40] –
You said you have insurance from your current or former employer or union. Is (SPOUSE/PARTNER) {also} covered by the insurance from your employer or union?

您說您{也}可以享受由您的{配偶/伴侶}從您的雇主或工會提供的保險。

-  01 YES
-  02 NO
-  03 OTHER
-  -7 REFUSED
-  -8 DON'T KNOW

If = 1, goto ‘PN_QA17_H48’

‘POST_QA17_H45’ [POST_AI40]
POST-NOTE AI40:
IF AI40 = 1, SET SEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMEP=1;

‘PN_QA17_H46’ [PN_AH108] –

PROGRAMMING NOTE AH108:
IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH AH108;
IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE AI40A
You said you have health insurance through Covered California’s SHOP program. Is (SPOUSE/PARTNER) (also) covered by this health insurance?

[IF NEEDED, SAY: “SHOP is the Small Business Health Options Program administered by Covered California”] [IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃。」]

- 01 YES
- 02 NO
- 91 OTHER
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto 'PN_QA17_H48'

'POST_QA17_H46' [POST_AH108] -
POST-NOTE AH108 :
IF AH108 = 1, SET SPEMSPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

'PN_QA17_H47' [PN_AI40A] -
PROGRAMMING NOTE AI40A :
IF AG8 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR AG11 = 1 (USUALLY WORKS), CONTINUE WITH AI40A ;
IF AREMPSP = 1 AND AH43 = 1, DISPLAY “You said you have insurance from your spouse’s employer or union.”;
ELSE IF AREMPSP = 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY “You said you have insurance from your partner’s employer or union.”;
IF SPINSURE = 1, THEN DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE AI41

'QA17_H47' [AI40A] –

{You said you have insurance from your spouse’s employer or union./You said you have insurance from your partner’s employer or union.} Does (SPOUSE/PARTNER) (also) have coverage through (his/her) own employer?

{您說您從您配偶的僱主或工會那兒獲得的保險。/您說您從您伴侶的僱主或工會那兒獲得的保險。} 您的(配偶/伴侶)是否(也)能夠通過(他/她)自己的僱主獲得保障？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_H47' [POST_AI40A] -
POST-NOTE AI40A :
IF AI40A = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1

'PN_QA17_H48' [PN_AI41] -
PROGRAMMING NOTE AI41 :
IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH AI41 ;
IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE AH109
You said you (also) have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) (also) covered by this plan?

您說您（也）有一項直接從保險公司購買的計劃。您的配偶/伴侶是否（也）能享受該項計劃的承保？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

**POST_QA17_H48** [POST_AI41] -
POST-NOTE AI41:
IF AI41 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

**PN_QA17_H49** [PN_AH109] -
PROGRAMMING NOTE AH109:
IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH AH109;
IF ARMILIT = 1, CONTINUE WITH AI42;
ELSE GO TO PROGRAMMING NOTE AI42

You said you have a plan you purchased directly from Covered California. Is (SPOUSE/PARTNER) (also) covered by this plan?

您說您有一項直接從Covered California購買的計劃。您的配偶/伴侶是否（也）能享受該項計劃的承保？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

**POST_QA17_H49** [POST_AH109] -
POST-NOTE AH109:
IF AH109 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

**PN_QA17_H50** [PN_AI42] -
PROGRAMMING NOTE AI42:
IF ARMILIT = 1, CONTINUE WITH AI42;
IF ARMCARE = 1 OR ARMAL = 1 OR AREMPOWN = 1, DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE AI42A
You said you (also) have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Is (SPOUSE/PARTNER) also covered by this plan?

您說您(還)透過CHAMPUS/CHAMPUS-VA、TRICARE、VA或其它某種軍隊健康護理計劃享受健康保險。您的(配偶/伴侶)是否也能享受該項計劃的保賠？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_H50' [POST_AI42]

POST-NOTE AI42:
IF AI42 = 1, SET SPMILIT = 1 AND SET SPINSURE = 1 AND ARSAMESP = 1;

'PN_QA17_H51' [PN_AI42A]

PROGRAMMING NOTE AI42A:
IF AROTHGOV = 1, CONTINUE WITH AI42A;
IF AH59 = 91, THEN DISPLAY “some government health plan”;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE AI46

'QA17_H51' [AI42A] –

You said you (also) have health insurance through some government health plan. Is (SPOUSE/PARTNER) also covered by this plan?

您說您(還)透過 AIM/MRMIP/Family PACT/PCIP/一些政府醫療保險計劃享受醫療保險。您的(配偶/伴侶)是否也在這項計劃的承保範圍內？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_H51' [POST_AI42A]

POST-NOTE AI42A:
IF AI42A = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1 AND ARSAMESP = 1

'PN_QA17_H52' [PN_AI46]

PROGRAMMING NOTE AI46:
IF SPINSURE ≠ 1, DISPLAY “any”;
ELSE DISPLAY “through any other source”

'QA17_H52' [AI46] –

Does (SPOUSE/PARTNER) have {any} health insurance coverage (through any other source)?

您的(配偶/伴侶)是否有任何(從其他地方獲得的)健康保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, goto ‘PN_QA17_H54’
If = -7, -8, goto ‘PN_QA17_H58’
他(她)有哪一種健康保險?

[COPY ALL THAT APPLY.] [PROBE: "Any others?""] [PROBE: "還有任何其他保險嗎?"]

[IF NEEDED, SAY: "Such as from a current or former employer, or that they purchased directly from a health plan."] [IF NEEDED, SAY: "例如目前或以前的雇主提供的保險，或者他們直接向保健計劃購買的保險。"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did (he/she) get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?" ] [IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "(他/她) 是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構，還是直接向保健計劃獲得這項計劃的?"]

- 01 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 02 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 03 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)
- 04 MEDICARE
- 05 MEDI-CAL
- 07 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 08 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

"POST_QA17_H53" [POST_AI47] -
POST NOTE AI47:
IF AI47 = 1, SET SPEMPO TH = 1 AND SET SPINSURE = 1;
IF AI47 = 2, SET SPEMOTH = 1 AND SET SPINSURE = 1;
IF AI47 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;
IF AI47 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1;
IF AI47 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;
IF AI47 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;
IF AI47 = 8, SET SPIHS = 1;
IF AI47 = 10, SET SPHBEX = 1 AND SPDIRECT = 1 AND SPINSURE = 1 AND SPDIO TH = 1;
IF AI47 = 11, SET SPHBEX = 1 AND SPINSURE = 1 AND SET SPEMPO TH = 1;
IF AI47 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
IF AI47 = 92, -7, OR -8, SET SPOOTHER = 1 AND SET SPINSURE = 1

"PN_QA17_H54" [PN_AI48] -
PROGRAMMING NOTE AI48:
IF SPINSURE ≠ 1, CONTINUE WITH AI48;
ELSE IF SPINSURE = 1 AND (SPEMPO TH = 1 OR SPDIRECT = 1), THEN SKIP TO PROGRAMMING NOTE AH62;
ELSE GO TO PROGRAMMING NOTE AI43

"QA17_H54" [AI48] –
You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?

您說您的配偶/伴侶沒有來自任何來源的健康保險，對不對?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto ‘PN_QA17_H58’
What type of health insurance does {he/she} have?

{他/她}有哪一種健康保險？

[CODE ALL THAT APPLY]
[PROBE: "Any others?"] [PROBE:"還有任何其他保險嗎？"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: “Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?”] [IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: {他/她}是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的？”]

- 01 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 02 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 03 PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)
- 04 MEDICARE
- 05 MEDI-CAL
- 07 CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE
- 08 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

`POST_QA17_H55` [POST_AI49] :
POST-NOTE A49 :
IF Ai49 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;
IF Ai49 = 2, SET SPEMPOTH = 1 AND SET SPINSURE = 1;
IF Ai49 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;
IF Ai49 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1;
IF Ai49 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;
IF Ai49 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;
IF Ai49 = 8, SET SPIHS = 1;
IF Ai49 = 10, SET SPHBEX = 1 AND SET SPDIRECT = 1 AND SET SPINSURE = 1 AND SPDROTH = 1;
IF Ai49 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1 AND SPEMOTH = 1;
IF Ai49 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
IF Ai49 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;

`PN_QA17_H56` [PN_AH62] :
PROGRAMMING NOTE AH62 :
IF Ai47 = (1, 2, 3, 10, 11) OR Ai49 = (1, 2, 3, 10, 11) THEN CONTINUE WITH AH62;
IF AH43 = 1 (MARRIED), THEN DISPLAY “spouse’s”;
ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY “partner’s”;
ELSE SKIP TO PROGRAMMING NOTE A43
Was this plan obtained in your (spouse's/partner's) name or in the name of someone else?

這項計劃是以您的(配偶/伴侶)名義還是以其他人的名義獲得的?

[IF NEEDED, SAY: “Even someone who does not live in this household.”]
[IF NEEDED, SAY: 「甚至包括不住在您住所中的人。」]

- 01 IN SPOUSE’S/PARTNER’S NAME
- 02 IN SOMEONE ELSE’S NAME
- 7 REFUSED
- 8 DON’T KNOW

If = 1, -7, -8, goto ‘PN_QA17_H58’

Is the plan in your name, parent’s name, or someone else’s name?

該項計劃是以您本人、您的父母還是以其他人的名義獲得的?

- 01 IN ADULT RESPONDENT’S NAME
- 02 IN ADULT RESPONDENT’S PARENT’S NAME
- 03 IN SOMEONE ELSE’S NAME
- 7 REFUSED
- 8 DON’T KNOW

IF AH62 = 1 AND [AI47 = (1 OR 2) OR AI49 = (1 OR 2)], SET SPEMPOW = 1 AND SPEMPOT = 0;
IF AH62 = 1 AND [AI47 = 3 OR AI49 = 3], SET KSPDIROW = 1;
IF AH62 = 1 AND [AI47 = 10 OR AI49 = 10], SET SPHBEX = 1 AND SPDIROW = 1;
IF AH62 = 1 AND [AI47 = 11 OR AI49 = 11], SET SPHBEX = 1 AND SPEMPOW = 1;

‘QA17_H57’ [AH63] –

If = 1, -7, -8, goto ‘PN_QA17_H58’

‘POST_QA17_H56’ [POST_AH62] - POST-NOTE AH62:

'POST_QA17_H57' [POST_AH63] - POST NOTE AH63:

'PN_QA17_H58' [PN_AI43] - PROGRAMMING NOTE AI43:

IF SPEMPOWN = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO AI22C;
ELSE IF [(AG8=1 OR 2) OR (AG11=1)] AND AG9#3 CONTINUE WITH AI43;
IF AH43 = 1 (MARRIED), THEN DISPLAY “spouse’s”;
ELSE IF AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner’s”;
ELSE GO TO PROGRAMMING NOTE AI22C
Does your {spouse's/partner's} employer offer health insurance to any of its employees?

您的{配偶/伴侶}的僱主是否向其僱員提供健康保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_H62’

‘QA17_H59’ [AI44] –

Is {he/she} eligible to be in this plan?

{他/她}是否有資格參加該項計劃？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, goto ‘QA17_H61’
If = -7, -8, goto ‘PN_QA17_H62’

‘QA17_H60’ [AI45] –

What is the ONE main reason why {he/she} isn't in this plan?

{他/她}未參加該項計劃的一個主要原因是什麼？

- 01 COVERED BY ANOTHER PLAN
- 02 TOO EXPENSIVE
- 03 DOESN'T LIKE PLAN OFFERED
- 04 DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, 4, 91, -7, -8, goto ‘PN_QA17_H62’

‘QA17_H61’ [AI45A] –

What is the one main reason why {he/she} is not eligible for this plan?

{他/她}沒有資格參加該項計劃的一個主要原因是什麼？

- 01 HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED
- 02 CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN
- 03 DOESN'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW
CHIS 2017 Adult Questionnaire

PROGRAMMING NOTE AI22C:

IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHGOV ≠ 1 AND AROTHER ≠ 1), THEN SKIP TO PN AI25;

IF ARMCARE = 1 AND AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHER ≠ 1, THEN SKIP TO GO TO AI24;

ELSE CONTINUE WITH AI22C DISPLAY;

IF [AH43 = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1)], DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “other”;

IF [AH43 = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARMCARE = 1 (R HAS MEDICARE) AND (ARMILIT = 1)], DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “other”;

[IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1)], AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY “Next, I have some questions about your own main health plan.”;

IF ARMCAL = 1 AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY “Medi-Cal”;

ELSE DISPLAY, “Is your health plan an HMO?”

‘QA17_H62’ [AI22C] -

Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan./Next, I have some questions about your own main health plan.} Is your {Medi-Cal/other} health plan an HMO?

(除了您已經告訴我的您的MediCARE醫療保險計劃以外，我想問一下您的其他醫療保險方面的問題/接下來，我要提出一些有關您的主要保健計劃的問題。) 您的{Medi-Cal/其他}醫療保險計劃是HMO嗎?

[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, you must use the doctors and hospitals belonging to its network. If you go outside the network, generally it will not be paid for unless it’s an emergency.”] [IF NEEDED, SAY: “HMO代表「健康維護機構」。在HMO計劃中，您必須接受網路內醫生和醫院的服務，除非是急診，如果您在網路外接受服務，計劃通常不支付服務費。”]

[IF R SAYS “POS” OR “POINT OF SERVICE”, CODE AS “YES.” IF R SAYS PPO, CODE “NO.”]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]

[NOTE: IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “您的主要醫療保險計劃。”]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

If = 1, goto ‘PN_QA17_H64’
‘QA17_H63’ [AH122] –

Is your health plan a PPO or EPO?

您的保健計劃是一項PPO計劃還是EPO計劃？

[IF NEEDED, SAY: “EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it’s an emergency and you can access doctors and specialists directly without a referral from your primary care provider.”]

[IF NEEDED, SAY: 「EPO表示「專有服務提供者團體」。在EPO中，除非是急診，您必須使用網絡內的醫生和醫院，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。」]

[IF NEEDED, SAY: “PPO stands for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan’s network. Also, you can access doctors and specialists directly without a referral from your primary care provider.”]

[IF NEEDED, SAY: 「PPO表示「首選服務提供者團體」。在PPO中，您可以使用任何醫生和醫院，但如果您使用屬於您的計劃網路的醫生和醫院時，可支付較低的費用。另外，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。」]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 「您的主要醫療保險計劃。」]

- 01 PPO
- 02 EPO
- 91 OTHER (SPECIFY: ____________)
- 7 REFUSED
- 8 DON’T KNOW
PROGRAMMING NOTE AI22A:
IF ARINSURE = 1 AND ARMCARE ≠ 1, THEN CONTINUE WITH AI22A AND DISPLAY “your main”;
IF ARINSURE = 1 AND ARMCARE = 1, THEN CONTINUE WITH AI22A AND DISPLAY “this”

‘QA17_H64’ [AI22A] –

What is the name of {your main/this} health plan?

{您的主要/這個}健康保險計劃的名稱是什麼？

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: “Do you have an insurance card or something else with the plan name on it?”]
[IF R HAS DIFFICULTY RECALLING NAME, PROBE: ”您是否有註明保健計劃名稱的保險卡或其他文件? ”]

- 01 ACCESS SENIOR HEALTHCARE
- 02 AETNA
- 03 AETNA GOLDEN MEDICARE
- 04 AIDS HEALTHCARE FOUNDATION, LA
- 05 ALAMEDA ALLIANCE FOR HEALTH
- 06 ALAMEDA ALLIANCE FOR MEDICAL
- 07 ANTHEM BLUE CROSS OF CALIFORNIA
- 08 ASPIRE HEALTH PLAN
- 09 BLUE CROSS CALIFORNIA
- 10 BLUE CROSS SOUTHERN CALIFORNIA
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIA KIDS (CALKIDS)
- 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 20 C.C. CARE HEALTH PLAN
- 21 CENTER FOR ELDER'S INDEPENDENCE
- 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 23 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTHPLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 30 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 37 HEALTH NET
- 38 HEALTH NET SENIORITY PLUS
- 39 HEALTH PLAN OF SAN JOAQUIN
- 40 HEALTH PLAN SAN JP AUTHORITY
- 41 HERITAGE PROVIDER NETWORK
- 42 HUMANA GOLD PLUS
- 43 HUMANA HEALTH PLAN
- 44 IEHP (INLAND EMPIRE HEALTH PLAN)
- 45 INTER VALLEY HEALTH PLAN
- 46 KAITAI HEALTH PLAN
- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
50 L.A. CARE HEALTH PLAN
51 MD CARE
54 MOLINA HEALTHCARE OF CALIFORNIA
55 MONARCH HEALTH PLAN
56 ON LOK SENIOR HEALTH SERVICES
57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
58 PHH HEALTH CARE SOLUTIONS
59 PREMIER HEALTH PLAN SERVICES
60 PRIMECARE MEDICAL NETWORK
61 PROVIDENCE HEALTH NETWORK
68 SCRIPPS HEALTH PLAN SERVICES
69 SEASIDE HEALTH PLAN
84 SAN FRANCISCO HEALTH PLAN
90 SANTA CLARA FAMILY HEALTH PLAN
86 SAN MATEO HEALTH COMMISION
88 SANTA BARBARA
92 SATELLITE HEALTH PLAN
67 SCAN HEALTH PLAN
70 SHARP HEALTH PLAN
71 SUTTER HEALTH PLAN
72 SUTTER SENIOR CARE
73 UNITED HEALTHCARE
74 UNITED HEALTHCARE SECURE HORIZON
75 UNIVERSITY HEALTHCARE ADVANTAGE
76 VALLEY HEALTH PLAN
77 VENTURA COUNTY HEALTH CARE PLAN
78 WESTERN HEALTH ADVANTAGE
93 CHAMPUS/CHAMP-VA
87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
89 VA HEALTH CARE SERVICES
52 MEDI-CAL
53 MEDICARE
85 OTHER (SPECIFY: _____________)
-7 REFUSED
-8 DON'T KNOW

‘POST_QA17_H64’ [POST_AI22A] -
POST NOTE AI22A :
IF AI22A  = 93, 87, OR 89 THEN SET ARMILIT=1

‘PN_QA17_H65’ [PN_AI25] -
PROGRAMMING NOTE AI25 :
IF ARMCARE = 1 (R HAS MEDI-CARE) AND (AREMPOTH ≠ 1 OR ARDIRECT ≠ 1 OR ARMCAL ≠ 1 OR ARMILIT ≠ 1 OR ARHINS ≠ 1 OR ARHSEX ≠ 1 OR AROTHGOV ≠ 1 OR AROTHER ≠ 1) AND AH43  = 1 (MARRIED) OR AD60B  = 1 OR AD61B  = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “Next I have some questions about your own main health plan.”
(Next, I have some questions about your own main health plan.) Are you covered for your prescription drugs? That is, does some plan pay any part of the cost?

(接下來，我要問您一些關於您主要的健康保險計劃的問題。) 您享受處方藥物保賠嗎？也就是說，是否有某項計劃可支付處方藥物的部份費用？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘PN_QA17_H66’ [PN_AH71] –

PROGRAMMING NOTE AH71:
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 THEN CONTINUE WITH AH71;
ELSE GO TO AI31

‘QA17_H66’ [AH71] –

Does your health plan have a deductible that is more than $1,000?

您的保健計劃是否要求支付超過1,000美元的自付額？

[IF NEEDED, SAY: “A deductible is the amount you pay for medical care before your health plan starts paying.”]
[IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

- 01 YES
- 02 NO
- 03 YES, ONLY WHEN I GO OUT OF NETWORK
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_H67’ [AH72] –

Does your health plan have a deductible for all covered persons that is more than $2,000?

您的醫療保險計劃是否有超過2,000美元的免賠額？

[IF NEEDED, SAY: “A deductible is the amount you pay for medical care before your health plan starts paying.”]
[IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

- 01 YES
- 02 NO
- 03 YES, ONLY WHEN I GO OUT OF NETWORK
- 07 REFUSED
- 08 DON'T KNOW
'PN_QA17_H68' [PN_AH73B] -
PROGRAMMING NOTE AH73B:
IF ARINSURE = 1 AND (AREMPOTH=1 OR ARDIRECT=1 OR ARHBEX = 1 OR AREMPPON =1 OR ARDIROWN =1 OR ARDIROTH =1 OR AREMPPSP =1 OR ARDIRSP =1 OR AREMPPAR =1 OR SPHBEX =1 OR ARDIRPAR =1 THEN CONTINUE WITH AH73B;
ELSE CONTINUE WITH AI31

‘QA17_H68’ [AH73B] –
Do you have a special account or fund you can use to pay for medical expenses?

您是否有一個可用於支付醫療費用的特別帳戶或基金？

[IF NEEDED, SAY: “The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include- Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts.”] [IF NEEDED, SAY: "帳戶有時指保健儲蓄帳戶（HSA）、保健償付帳戶（HRA）或其他類似帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療基金或選擇基金。此類帳戶與僱主提供的靈活開支帳戶不同。"]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H71’

‘QA17_H69’ [AH130] –
Do you have money in this account?

您在這個帳戶有錢嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H71’

‘QA17_H70’ [AH131] –
How much money do you have in this account? Your best guess is fine.

___________________ (AMOUNT) [HR: 0 -9997]

您在這個帳戶有多少錢？盡量估計就可以了。___________________（金額）

- 7 REFUSED
- 8 DON'T KNOW
Thinking about your current health insurance, did you have this same insurance for all 12 of the past 12 months?

請想一想您目前的醫療保險，您在過去12個月中，是不是每個月使用的都是同一個保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, goto ‘QA17_H73’
If = -7, goto ‘QA17_H79’
If = -8, goto ‘QA17_H74’

‘QA17_H72’ [AH132] - How long have you had your current health insurance?

您持有目前的健康保險計劃多久了？

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

‘AH132M’ [AH132M] - _____ NUMBER OF MONTHS

If >=0, goto ‘QA17_H77’

‘AH132Y’ [AH132Y] - _____ NUMBER OF YEARS

If >=0, goto ‘QA17_H77’

- -7 REFUSED
- -8 DON’T KNOW

If =-7, -8, goto ‘QA17_H77’

‘QA17_H73’ [AH133] –

Out of the last 12 months, how many months did you have your current health insurance plan?

“過去12個月中，您持有目前的健康保險計劃多少個月？

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF MONTHS

- -7 REFUSED
- -8 DON'T KNOW

‘QA17_H74’ [AI32] –

During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?

在過去十二個月中，當您沒有享受當前的健康保險保賠時，您是否有任何其它健康保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If =2, -7, -8, goto ‘QA17_H77’
Was your other health insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

您的其他醫療保險是 Medi-Cal、您透過雇主獲得的計劃、您從保險公司直接購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

[CODE ALL THAT APPLY]
[PROBE: "Any others?"]
[PROBE: 「還有任何其他計劃嗎？」]

☐ 01 MEDI-CAL
☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
☐ 05 PURCHASED DIRECTLY
☐ 06 COVERED CALIFORNIA
☐ 91 OTHER HEALTH PLAN
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QA17_H76’ [AH134] –

Prior to your current plan, which health insurance did you have?

在目前的計劃之前，您曾持有哪家健康保險計劃？

☐ 01 MEDI-CAL
☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
☐ 05 PURCHASED DIRECTLY
☐ 06 COVERED CALIFORNIA
☐ 91 OTHER HEALTH PLAN
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QA17_H77’ [AH135] –

Prior to your current plan, did you have other health insurance through Medi-CAL, through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在目前的計劃之前，您曾否透過加州醫療保健計劃（ Medi-Cal）、僱主、從保險公司直接投買的計劃、經加州全保（ Covered California）購買的計劃或其他計劃而持有其他健康保險計劃？

☐ 01 MEDI-CAL
☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
☐ 05 PURCHASED DIRECTLY
☐ 06 COVERED CALIFORNIA
☐ 91 OTHER HEALTH PLAN
☐ -7 REFUSED
☐ -8 DON'T KNOW
How long did you have the plan from \{AH134/AH135/AI33\}?

自 \{AH134/AH135/AI33\} 起，您持有這份保險計劃多久了？

*[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]*

\'AH136M' [AH136] - NUMBER OF MONTHS
\'AH136Y' [AH136] - NUMBER OF YEARS

If >=0, goto 'QA17_H79'

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

During the past 12 months, did you change your health insurance plan?

過去 12 個月內，您曾否改變您的主要健康保險計劃？

*[IF NEEDED: Please include changes in health plan from the same or different health insurance companies.]*

01 YES
02 NO
07 REFUSED
08 DON'T KNOW

During the past 12 months, was there any time when you had no health insurance at all?

在過去 12 個月中，您有沒有任何時間完全沒有醫療保險？

01 YES
02 NO
07 REFUSED
08 DON'T KNOW
For how many months of the past 12 months did you have no health insurance at all?

在過去12個月中，您有多少個月完全沒有醫療保險？

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____ NUMBER OF MONTHS [HR: 0-11]

If = 0, goto ‘PN_QA17_H90’

- 01 CAN'T AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DON'T BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: ____________)

If = -7, -8, goto ‘PN_QA17_H90’

During the time that you were uninsured, did you try to find health insurance on your own?

在您沒有保險的期間，您是否曾經嘗試自己尋找醫療保險？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, -7, -8, goto ‘PN_QA17_H90’
What is the ONE MAIN reason why you do not have any health insurance?

您沒有任何健康保險的一個主要原因是什么?

[IF R SAYS NO NEED, PROBE WHY]

- 01 CANT AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DONT BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

'QA17_H85' [AH75] –

During the time that you have been uninsured, have you tried to find health insurance on your own?

在您沒有保險的那段時間內，您是否曾經嘗試自己尋找醫療保險?

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'QA17_H86' [AI27] –

Were you covered by health insurance at any time during the past 12 months?

您在過去 12 個月中的任何時間內有沒有享受過醫療保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘QA17_H88’

‘QA17_H87’ [AI28] - How long has it been since you last had health insurance?

您上一次有醫療保險到現在已經有多長時間？

- 01 MORE THAN 12 MONTHS AGO, BUT NOT MORE THAN 3 YEARS AGO
- 02 MORE THAN 3 YEARS AGO
- 03 NEVER HAD HEALTH INSURANCE
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto ‘PN_QA17_H90’
For how many months out of the last 12 months did you have health insurance?

在過去 12 個月內，您有多少個月有醫療保險？

[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]

If =0, goto ‘PN_QA17_H90’

☐ -7 REFUSED
☐ -8 DONT KNOW

‘QA17_H89’ [AI30] –

During that time when you had health insurance, was your insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在您有醫療保險的那段時間內，您的保險是 Medi-Cal、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

[CODE ALL THAT APPLY]
[PROBE: "Any others?"]
[PROBE: 「還有任何其他人或機構嗎？」]

☐ 01 MEDI-CAL
☐ 03 THROUGH CURRENT OR FORMER EMPLOYER OR UNION
☐ 05 PURCHASED DIRECTLY
☐ 06 COVERED CALIFORNIA
☐ 91 OTHER HEALTH PLAN
☐ -7 REFUSED
☐ -8 DONT KNOW

‘PN_QA17_H90’ [PN_AH103h] -

PROGRAMMING NOTE AH103h :
IF ARINSURE ≠ 1 OR AI32  = 2 OR ARDIRECT = 1 OR AI30  = (5, 6) OR AI33  = (5, 6) OR ARHBEX =1 OR SPHBEX = 1; THEN CONTINUE WITH AH103h ;
ELSE GO TO PROGRAMMING NOTE AH139

‘QA17_H90’ [AH103h] –

In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?

在過去 12 個月中，您是否曾經嘗試直接從保險公司或 HMO 或透過 Covered California 購買醫療保險計劃？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DONT KNOW

If = 2, -7, -8, goto ‘PN_QA17_H107’
Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?

01 DIRECTLY FROM AN INSURANCE COMPANY OR HMO, OR
02 THROUGH COVERED CALIFORNIA, OR
03 BOTH, FROM AN INSURANCE COMPANY AND THROUGH COVERED CALIFORNIA
-7 REFUSED
-8 DON'T KNOW

If = -7, -8, goto ‘QA17_H94’

(First, think about your experience trying to purchase insurance directly from an insurance company or HMO.)

{首先，請考慮您在嘗試直接從保險公司或HMO購買保險時的經歷。}

How difficult was it to find a plan you could afford? Was it...

01 Very difficult,
01 非常困難,
02 Somewhat difficult,
02 較為困難,
03 Not too difficult, or
03 不太困難還是...
04 Not at all difficult?
04 毫無困難?
-7 REFUSED
-8 DON'T KNOW

How difficult was it to find a plan you could afford? Was it...

{First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

How difficult was it to find a plan you needed? Was it...

01 Very difficult,
01 非常困難,
02 Somewhat difficult,
02 較為困難,
03 Not too difficult, or
03 不太困難還是...
04 Not at all difficult?
04 毫無困難?
-7 REFUSED
-8 DON'T KNOW
Did anyone help you find a health plan?

是否有人幫助您尋找醫療保險計劃？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If 2, 7, -8, goto 'PN_QA17_H96'

Who helped you?

是誰幫助您的？

- 01 BROKER
- 02 FAMILY MEMBER/FRIEND
- 03 INTERNET
- 91 OTHER (SPECIFY: ____________)
- 7 REFUSED
- 8 DON'T KNOW

{Now, think about your experience with Covered California.}

{現在，請想一想您與Covered California交往的經歷。}

How difficult was it to find a plan with the coverage you needed through Covered California? Was it...

透過Covered California找到一項您需要的承保計劃難度有多大？是……

- 01 Very difficult,
- 01 非常困難、
- 02 Somewhat difficult,
- 02 較為困難、
- 03 Not too difficult, or
- 03 不太困難還是. 
- 04 Not at all difficult?
- 04 毫無困難？
- 7 REFUSED
- 8 DON'T KNOW
How difficult was it to find a plan you could afford? Was it...

找到一項你能負擔得起的計劃有多困難？你認為是......

- 01 Very difficult,
- 01 非常困難、
- 02 Somewhat difficult, 02 較為困難、
- 03 Not too difficult, or 03 不太困難還是.
- 04 Not at all difficult? 04 毫無困難？
- 04 REFUSED
- 04 DON'T KNOW

Did anyone help you find a health plan?

是否有人幫助您找到一項保健計劃？

- 01 YES
- 02 NO
- 02 REFUSED
- 02 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H100’

Did you have all the information you felt you needed to make a good decision on a health plan?

您是否有您認為幫助作出有關保健計劃的良好決定所需的所有資訊？

- 01 YES
- 02 NO
- 02 REFUSED
- 02 DON'T KNOW
PROGRAMMING NOTE AH116h:
IF AH37 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH AH116h; ELSE GO TO AH117h;

‘QA17_H101’ [AH116h] –
Were you able to get information about your health plan options in your language?
是您能用您自己的語言獲得有關您的保健計劃選擇的資訊？
- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_H102’ [AH117h] –
Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?
您選擇的計劃費用在您選擇計劃時是非常重要、較為重要還是不重要?
- 01 VERY IMPORTANT
- 02 SOMEWHAT IMPORTANT
- 03 NOT IMPORTANT
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_H103’ [AH118h] –
Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?
從某一位特定的醫生處接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要?
- 01 VERY IMPORTANT
- 02 SOMEWHAT IMPORTANT
- 03 NOT IMPORTANT
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_H104’ [AH119h] –
Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?
從某一家特定的醫院接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要?
- 01 VERY IMPORTANT
- 02 SOMEWHAT IMPORTANT
- 03 NOT IMPORTANT
- 07 REFUSED
- 08 DON'T KNOW
Was the choice of doctor’s in the plan’s network very important, somewhat important, or not important in choosing your plan?

計畫網路內的醫生選擇在您選擇計劃時是非常重要、較為重要還是不重要？

- 01 VERY IMPORTANT
- 02 SOMEWHAT IMPORTANT
- 03 NOT IMPORTANT
- -7 REFUSED
- -8 DON'T KNOW

Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/Minimum coverage/} plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan’s network, or was it something else?

最後，您選擇{銅/銀/金/白金/最低保額}計劃的最重要的一個原因是什麼？是費用、您可以從某一位特定的醫生處接受護理服務、您可以在某一家醫院就診、您的計劃網路內的服務提供者選擇、還是其他一些原因？

- 01 COST
- 02 SPECIFIC DOCTOR
- 03 SPECIFIC HOSPITAL
- 04 CHOICE OF DOCTORS IN NETWORK
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

Overall, how satisfied are you with your current health insurance plan? Are you…

整體來說，您有多滿意目前的健康保險計劃？您是……

- 01 Very satisfied
- 02 Somewhat satisfied
- 03 Somewhat dissatisfied, or
- 04 Very dissatisfied?
- -7 REFUSED
- -8 DON'T KNOW
"PN_QA17_H108" [PN_AH14] -
PROGRAMMING NOTE AH14:
IF AH15A = 1 (HOSPITALIZED FOR ASTHMA) OR AB80 = 1 (HOSPITALIZED FOR ASTHMA) THEN GO TO
PROGRAMMING NOTE AH76;
ELSE CONTINUE WITH AH14

"QA17_H108" [AH14] –

During the past 12 months, were you a patient in a hospital overnight or longer?

在過去十二個月內，您是否曾經因病住院一天或以上？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_PN_AH77'

"PN_QA17_H109" [PN_AH76] -
PROGRAMMING NOTE AH76:
IF ARINSURE ≠ 1 OR AI35 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH AH76 AND IF AH15=1 OR AB80 =1 display "Previously you mentioned you were a patient in a hospital overnight or longer";
ELSE GO TO PROGRAMMING NOTE AH77

"QA17_H109" [AH76] –

Was any of that hospital care paid for by Medi-Cal?

那次醫院護理的任何費用是由Medi-Cal支付的嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

"PN_QA17_H110" [PN_AH77] -
PROGRAMMING NOTE AH77:
[IF ARINSURE ≠ 1 OR AI35 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND AA3 =2 (FEMALE) AND AD13 =1 (PREGNANT) OR SC14A =1 , THEN CONTINUE WITH AH77;
ELSE GO TO NEXT SECTION

"QA17_H110" [AH77] –

During the last 12 months, did you get prenatal care that you didn’t have to pay for?

在過去十二個月中，您是否曾經接受免費產前護理？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H112’
Was it paid for by Medi-Cal?

這是由 Medi-Cal 付費的嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘PN_QA17_H112’ [PN_AH79B]:

PROGRAM NOTE AH79B:
IF ARMCAL = 1 OR ARINSURE ≠ 1, SKIP TO AH81B
ELSE IF AI32 = 1 (COVERAGE IN THE PAST 12 MONTHS) DISPLAY "The following questions are about your spouse's current health plan", AND CONTINUE WITH AH79B

‘QA17_H112’ [AH79B] –

(The following questions are about your current health plan.)

While you've had your current health plan, have you reached the limit of what your insurance company would pay for?

整體來說，您有多滿意目前的健康保險計劃？您是……

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_H114’

‘QA17_H113’ [AH80B] –

Did this happen in the past 12 months?

這是在過去 12 個月內發生的嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_H114’ [AH81B] –

During the past 12 months, did you have medical bills that you had problems paying or were unable to pay, either for yourself or any family member in your household?

過去 12 個月內，您曾否難以支付或未能支付醫療帳單？不論為您自己或任何家庭成員亦然。

[IF NEEDED, SAY: “Dental bills should be included.”]
[IF NEEDED, SAY: “不包括牙科帳單。”]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto PN_CF10A
What is the total amount of medical bills?

[IF NEEDED, SAY: “The bills can be from earlier years as well as this year.”]
[IF NEEDED, SAY: “帳單可以來自早些年以及今年。”]

01 LESS THAN $1,000
02 $1,000 TO LESS THAN $2,000
03 $2,000 TO LESS THAN $4,000
04 $4,000 TO LESS THAN $8,000
05 $8,000 OR MORE
06 NONE
-7 REFUSED
-8 DON’T KNOW

Were you or your family member uninsured at the time care was provided?

01 YES
02 NO
03 MORE THAN ONE PERSON WITH MEDICAL BILL PROBLEMS AND ONE PERSON UNINSURED AND THE OTHER INSURED
-7 REFUSED
-8 DON’T KNOW

Because of these medical bills, were you unable to pay for basic necessities like food, heat, or rent?

01 YES
02 NO
-7 REFUSED
-8 DON’T KNOW

Because of these medical bills, did you take on credit card debt?

01 YES
02 NO
-7 REFUSED
-8 DON’T KNOW
Section I: Child Adolescent Health Insurance

‘PN_QA17_I1’ [PN_CF10A] -
PROGRAMMING NOTE CF10A :
IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE IA10A TO ASK ABOUT SELECTED ADOLESCENT;
IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE MA1;
ELSE CONTINUE WITH CF10A

‘QA17_I1’ [CF10A] –

These next questions are about health insurance (CHILD) may have.
以下是關於(CHILD)可能有的健康保險的問題。

Does (CHILD) have the same insurance as you?
(CHILD) 的保險是否與您的保險相同？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON’T KNOW

If = 1, goto ‘QA17_I19’

‘POST_QA17_I1’ [POST_CF10A] -
POST-NOTE CF10A :
IF CF10A = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AREMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AREMPS = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AREMPPAT = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AREDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND AROTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF CF10A = 1 AND ARIHS = 1, SET CHIHS = 1

‘PN_QA17_I2’ [PN_MA1] -
PROGRAMMING NOTE MA1 :
IF SPINSURE ≠ 1, THEN SKIP TO CF1;
ELSE IF CF10A = 2 AND ARSAMESP = 1, THEN SKIP TO CF1;
ELSE CONTINUE WITH MA1
Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/ PARTNER NAME}?

(CHILD) 的保險是否與{您配偶/您伴侶/SPOUSE NAME/ PARTNER NAME}的保險相同？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA17_I19'

```
'POST_QA17_I2' [POST_MA1] :
IF MA1  = 1 AND SPOTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPIHS = 1, SET CHIHS = 1
IF MA1  = 1 AND SPHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPARPAR = 1, THEN SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH = 1
IF MA1  = 1 AND SPEMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPEMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPEMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPMOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPEMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
POST-NOTE MA1 :
IF MA1  = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
IF MA1  = 1 AND SPEMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;
```

'QA17_I3' [CF1] –

Is {he/she} currently covered by Medi-CAL?

(他/她) 目前是否享受Medi-CAL（加州醫療保健計劃）的保險？

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]
[IF NEEDED, SAY: 「Medi-CAL是為某些低收入家庭的兒童及其家人、孕婦、殘障人士或年長者提供的一項計劃。」]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

```
'POST_QA17_I3' [POST_CF1] :
POST-NOTE CF1 :
IF CF1  = 1, SET CHMCAL = 1 AND SET CHINSURE = 1
```
Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?

[INTERVIEW NOTE: CODE ‘YES’ IF R MENTIONS ‘SHOP’ PROGRAM THROUGH COVERED CALIFORNIA]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I6’

Is this plan through an employer, through a union, or through Covered California’s SHOP program?

[IF NEEDED, SAY: “SHOP is the Small Business Health Options Program administered by Covered California”] [IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

- 01 EMPLOYER
- 02 UNION
- 03 SHOP / COVERED CALIFORNIA
- 91 OTHER (SPECIFY: ___________)
- 07 REFUSED
- 08 DON’T KNOW

OTHER_AI90

PRIVATE COVERAGE (CHILD)
‘PN_QA17_I6’ [PN_CF4] -
PROGRAM NOTE CF4 :
IF CHINSURE = 1 THEN GO TO AI92 ;
ELSE CONTINUE WITH CF4

‘QA17_I6’ [CF4] –

Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?

(CHILD)是否享受您直接從保險公司或 HMO 或透過 Covered California 購買的醫療保險計劃的承保?

[IF NEEDED, SAY: “Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital”]

[IF NEEDED, SAY: 「請不要包括僅支付某些疾病（例如癌症或中風）費用的計劃或當您住院時僅向您支付「額外現金」的計劃。」]

- 01 YES
- 02 NO
- 07 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I13’

‘POST_QA17_I6’ [POST_CF4] -
POST-NOTE CF4 :
IF CF4 = 1, SET CHDIRECT = 1 AND CHINSURE = 1

‘PN_QA17_I7’ [PN_AI91] -

PROGRAMMING NOTE AI91 :
IF CHDIRECT = 1, THEN CONTINUE WITH AI91 ;
ELSE GO TO PROGRAMMING NOTE AI92

‘QA17_I7’ [AI91] –

How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

您是如何購買這項保健計劃的 — 是直接從保險公司或HMO購買還是透過Covered California購買？

- 01 INSURANCE COMPANY OR HMO
- 02 COVERED CALIFORNIA
- 91 OTHER (SPECIFY: ___________
- 07 REFUSED
- 08 DON'T KNOW

OTHER_AI91

‘POST_QA17_I7’ [POST_AI91] -
POST-NOTE FOR AI91 :
IF AI91 = 2, THEN SET CHHBEX = 1

‘PN_QA17_I8’ [PN_AI92] -
PROGRAMMING NOTE AI92
IF CHHBEX = 1, THEN CONTINUE WITH AI92 ;
ELSE GO TO PROGRAMMING NOTE AI54 ;
Was this a bronze, silver, gold or platinum plan?

這是銅、銀、金還是白金計劃？

- 01 BRONZE
- 02 SILVER
- 03 GOLD
- 04 PLATINUM
- 05 MEDI-CAL / MEDICAID
- 06 MINIMUM COVERAGE PLAN/CATASTROPHIC
- 91 OTHER (SPECIFY: ___________)
- -7 REFUSED
- -8 DON'T KNOW

PROGRAMMING NOTE AI93

IF CHHBEX = 1 AND CHDIRECT = 1, THEN CONTINUE WITH AI93;
ELSE GO TO PROGRAMMING NOTE AI54;

Was there a subsidy or discount on the premium for this plan?

這項計劃的保費是否有補貼或折扣？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
'PN_QA17_I10' [PN_AI54] -
PROGRAMMING NOTE AI54:
IF CHEMP = 1 (EMPLOYER-BASED COVERAGE) OR CHDIRECT = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH AI54;
ELSE GO TO CF6

'QA17_I10' [AI54] –
Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

[IF NEEDED, SAY: ”Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.”]
[IF NEEDED, SAY: ”协付款是您每次看病或使用健康護理系統時支付的部份健康護理費用，而保险計劃支付您的主要健康護理保賠費。”]
[IF NEEDED, SAY: ”A deductible is the amount you pay for medical care before your health plan starts paying.”]
[IF NEEDED, SAY: ”免賠額是您的保險計劃開始付款之前您支付的醫療護理費。”]
[IF NEEDED, SAY: ”Premium is the monthly charge for the cost of your health insurance plan.”]
[IF NEEDED, SAY: ”保費是您的醫療保險計劃的每月收費。”]

❖ 01 YES
❖ 02 NO
❖ -7 REFUSED
❖ -8 DON’T KNOW

'QA17_I11' [AI50] –
Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?

是否有任何其他人，例如雇主、工會或專業機構，支付(CHILD)的保健計劃的全部或部份保費或費用？

❖ 01 YES
❖ 02 NO
❖ -7 REFUSED
❖ -8 DON’T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I13’
Who else pays all or some portion of the cost for (CHILD)'s health plan?

還有誰支付 (CHILD) 保健計劃的全部或部份費用？

[CODE ALL THAT APPLY.]

- 01 CURRENT EMPLOYER
- 02 FORMER EMPLOYER
- 03 UNION
- 04 SPOUSE’S/PARTNER’S CURRENT EMPLOYER
- 05 SPOUSE’S/PARTNER’S FORMER EMPLOYER
- 06 PROFESSIONAL/FRATERNAL ORGANIZATION
- 07 MEDICAID/MEDI-CAL ASSISTANCE
- 10 COVERED CALIFORNIA
- 91 OTHER
- -7 REFUSED
- -8 DON’T KNOW

'POST_QA17_I12' [POST_AI51] -
POST-NOTE AI51 :
IF AI51 = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;
IF AI51 = 7, SET CHMCAL = 1
IF AI51 = 10, SET CHHBEX = 1;

'PN_QA17_I13' [PN_CF6] -
PROGRAMMING NOTE CF6 :
IF CHINSURE = 1, GO TO PN MA3 ;
ELSE CONTINUE WITH CF6

'QA17_I13' [CF6] –
Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

{他/她} 是否享受 CHAMPUS/CHAMP VA, TRICARE, VA, 或其它軍隊醫療護理計劃？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

If = 1, goto 'PN_QA17_I19'

'POST_QA17_I13' [POST_CF6] -
POST-NOTE CF6 :
IF CF6 = 1, SET CHMILIT = 1 AND CHINSURE = 1
Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Healthy Kids, or something else?

(他/她) 是否享受其他政府医疗保险计划，例如 AIM、Mister MIP、Healthy Kids 或其他计划？

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program."]

[IF NEEDED, SAY: 「AIM 表示「母婴營養計劃」；Mister MIP或MRMIP表示「重大風險醫療保險計劃」]

- 01 AIM
- 02 MISTER MIP/MRMIP
- 03 HEALTHY KIDS
- 04 NO OTHER PLAN
- 91 SOMETHING ELSE (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, 91, goto ‘PN_QA17_I19’

OTHER_CF7

POST_QA17_I14’ [POST_CF7] -
POST-NOTE CF7 : IF CF7 = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1

‘QA17_I15’ [CF8] –

Does {he/she} have any health insurance coverage through a plan that I missed?

(他/她) 有沒有通過我漏掉的計劃享受任何医疗保险？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I18’
What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

(他/她)有哪一種健康保險？此保險來自Medi-CAL加州醫療輔助計劃、雇主或工會、還是來自其它來源？

[CIRCLE ALL THAT APPLY.]
[PROBE: "Any others?"] [PROBE: 「還有其它來源嗎？」]

- 01 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 02 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 03 PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE)
- 04 MEDICARE
- 05 MEDI-CAL
- 07 CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE
- 08 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_I16' [POST_CF9] -
POST-NOTE CF9:
IF CF9 = 1, SET CHEMP = 1 AND CHINSURE = 1
IF CF9 = 2, SET CHEMP = 1 AND CHINSURE = 1
IF CF9 = 3, SET CHDIRECT = 1 AND CHINSURE = 1
IF CF9 = 4, SET CHMCARE = 1 AND CHINSURE = 1
IF CF9 = 5, SET CHMCAL = 1 AND CHINSURE = 1
IF CF9 = 7, SET CHMILIT = 1 AND CHINSURE = 1
IF CF9 = 8, SET CHIHS = 1
IF CF9 = 10, SET CHHBEX = 1 AND CHINSURE = 1 AND CHDIRECT = 1;
IF CF9 = 11, SET CHHBEX = 1 AND CHINSURE = 1 AND CHEMP = 1;
IF CF9 = 91, SET CHOTHGOV = 1 AND CHINSURE = 1
IF CF9 = 92, SET CHOTHER = 1 AND CHINSURE = 1
IF CF9 = -7 OR -8, SET CHINSURE = 1

'PN_QA17_I17' [PN_CF9VER] -
PROGRAMMING NOTE CF9VER:
IF CF9 = 4 (CHILD HAS MEDICARE), CONTINUE WITH CF9VER;
ELSE SKIP TO PROGRAMMING NOTE CF1A

'QA17_I17' [CF9VER] –
Just to verify, you said that (CHILD) gets health insurance through Medicare?

我只是要確定一下，您說過 (CHILD) 有從聯邦醫療保險(Medicare) 獲得醫療保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
‘PN_QA17_I18’ [PN_CF1A] -
PROGRAMMING NOTE CF1A :
IF CHINSURE ≠ 1 CONTINUE WITH CF1A ;
ELSE GO TO MA3 ;

‘QA17_I18’ [CF1A] –

What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?

(CHILD) 沒有加入加州醫療輔助計劃（Medi-CAL）的一個主要原因是什么？

- 01 PAPERWORK TOO DIFFICULT
- 02 DIDN'T KNOW IF ELIGIBLE
- 03 INCOME TOO HIGH, NOT ELIGIBLE
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 OTHER NOT ELIGIBLE
- 06 DON'T BELIEVE IN HEALTH INSURANCE
- 07 DON'T NEED IT BECAUSE HEALTHY
- 08 ALREADY HAVE INSURANCE
- 09 DIDN'T KNOW IT EXISTED
- 10 DONT LIKE / WANT WELFARE
- 91 OTHER (SPECIFY: ___________)
- -7 REFUSED
- -8 DONT KNOW

OTHER_CF1A

‘PN_QA17_I19’ [PN_MA3] -
PROGRAMMING NOTE MA3 :
IF CF10A  = 1 AND ARMCARE = 1 AND AH124  = 1, THEN MA3  = AH124  AND MA2  = AH125  AND SKIP TO CF14 ;
ELSE IF CF10A  = 1, THEN MA3  = AI22C  AND MA2  = AI22A  AND CF14  = AI25  AND GO TO PN AI79 ;
ELSE IF CHINSURE = 1, THEN CONTINUE WITH MA3 ;
ELSE GO TO PN AI79

‘QA17_I19’ [MA3] –

Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?

(CHILD) 加入的主要保健計劃是HMO（即健康維護機構計劃）嗎？

[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, (he/she) must use the doctors and hospitals belonging to its network. If (he/she) goes outside the network, generally it will not be paid for unless it's an emergency.”]

[IF NEEDED, SAY: "HMO 表示「健康維護機構」。在 HMO 計劃中，(他/她)必須使用網絡內的醫生及醫院的服務。除非是緊急，如果(他/她)在網絡外醫生或醫院處接受服務，計劃通常不支付服務費。"]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DONT KNOW

If = 1, goto ‘QA17_I21’
PROGRAMMING NOTE AI115:
IF CHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO MA2;
ELSE CONTINUE WITH AI115;

‘QA17_I20’ [AI115] –
Is (CHILD)’s health plan a PPO or EPO?

[IF NEEDED, SAY: “EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it’s an emergency and you can access doctors and specialists directly without a referral from your primary care provider.”
[IF NEEDED, SAY: 「EPO表示「專有服務提供者團體」。在EPO中，除非是急診，您必須使用網路內的醫生和醫院，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。」]

[IF NEEDED, SAY: “PPO stand for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan’s network. Also, you can access doctors and specialists directly without a referral from your primary care provider.”
[IF NEEDED, SAY: 「PPO表示「首選服務提供者團體」。在PPO中，您可以使用任何醫生和醫院，但如果您使用屬於您的計劃網路的醫生和醫院時，可支付較低的費用。另外，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。」]

[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: “{His/Her} MAIN health plan.”]
[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: 「{他的或她的}主要保健計劃。」]

- 01 PPO
- 02 EPO
- 91 OTHER (SPECIFY: ___________)
- 7 REFUSED
- 8 DON’T KNOW

OTHER_AI115
What is the name of (CHILD)'s main health plan?

(CHILD) 參加的主要健康計劃的名稱是什麼？

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: “Does (CHILD) have an insurance card or something else with the plan name on it?”]
[IF R HAS DIFFICULTY RECALLING NAME, PROBE: (CHILD) 是否有保險卡或註明計劃名稱的其他文件？”]

- 01 ACCESS SENIOR HEALTHCARE
- 02 AETNA
- 03 AETNA GOLDEN MEDICARE
- 04 AIDS HEALTHCARE FOUNDATION, LA
- 05 ALAMEDA ALLIANCE FOR HEALTH
- 83 ALTAMED HEALTH SERVICES
- 07 ANTHEM BLUE CROSSOF CALIFORNIA
- 08 ASPIRE HEALTH PLAN
- 09 BLUE CROSS CALIFORNIA
- 79 BLUE CROSS SENIOR SECURE
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIAKIDS (CALKIDS)
- 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 21 CENTER FOR ELDERS' INDEPENDENCE
- 80 CEN CAL HEALTH
- 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 23 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTHPLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 81 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 38 HEALTH NET
- 39 HEALTH NET SENIORITY PLUS
- 40 HEALTH PLAN OF SAN JOAQUIN
- 41 HEALTH PLAN SAN JP AUTHORITY
- 42 HERITAGE PROVIDER NETWORK
- 43 HUMANA GOLD PLUS
- 44 HUMANA HEALTH PLAN
- 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- 46 INTER VALLEY HEALTH PLAN
- 82 HEALTH ADVANTAGE
- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
- 50 L.A. CARE HEALTH PLAN
- 51 MD CARE
- 54 MOLINA HEALTHCARE OF CALIFORNIA
- 55 MONARCH HEALTH PLAN
- 56 ON LOK SENIOR HEALTH SERVICES
- 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
Is (CHILD) covered for prescription drugs?

計劃是否支付 (CHILD) 的處方藥品？
Does (CHILD)'s health plan have a deductible that is more than $1,000?

(IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying.")

(IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

☐ 01 YES
☐ 02 NO
☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘QA17_I24’ [AI80] –

Does (CHILD)'s health plan have a deductible for all covered persons that is more than $2,000?

(IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying.")

(IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

☐ 01 YES
☐ 02 NO
☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
☐ -7 REFUSED
☐ -8 DON'T KNOW

‘PN_QA17_I25’ [PN AI81] -

PROGRAMMING NOTE AI81 :
IF (AI79 = 1 OR 3) OR (AI80 = 1 OR 3), CONTINUE WITH AI81 ;
ELSE SKIP TO PROGRAMMING NOTE CF18

‘QA17_I25’ [AI81] –

Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?

(IF NEEDED, SAY: “The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts.”)

(IF NEEDED, SAY: 「帳戶有時稱為健康儲蓄帳戶 (HSA)、健康補償帳戶 (HRA) 或其他類似的帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療資金或選擇資金，這些帳戶與雇主提供的靈活開支帳戶不同。”]

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW
What is the one main reason (CHILD) does not have any health insurance?

(CHILD) 沒有醫療保險的一個主要原因是什么？

- 01 CAN'T AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DON'T BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: ____________)
- 7 REFUSED
- 8 DON'T KNOW

Other_CF18

Was (CHILD) covered by health insurance at any time during the past 12 months?

{孩子的名字/年齡/性別} 是否在过去12个月的任何时间均享受医疗保险？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto 'QA17_I29'

How long has it been since (CHILD) last had health insurance?

{孩子的名字/年齡/性別} 上一次有医疗保险到现在已经有多长时间？

- 01 MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
- 02 MORE THAN 3 YEARS AGO
- 03 NEVER HAD HEALTH INSURANCE COVERAGE
- 7 REFUSED
- 8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto ‘PN_QA17_I37’
For how many of the last 12 months did (he/she) have health insurance?

在過去12個月內，(he/she)有多少個月有醫療保險？

[Interviewer Note: If less than one month but more than 0 days, enter 1]

____ MONTHS [HR: 0-12]

If = 0, goto ‘PN_QA17_I37’

☑ -7 REFUSED
☑ -8 DON’T KNOW

‘QA17_I30’ [CF23] –

During that time when (CHILD) had health insurance, was (his/her) insurance Medi-Cal, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在{CHILD}有醫療保險期間，{他的/她的}保險是Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你直接從保險公司購買的計劃、你透過Covered California購買的計劃還是其他計劃

[CIRCLE ALL THAT APPLY]
[PROBE: “Any others?”]
[PROBE: 「還有任何其他計劃嗎？」]

☑ 01 MEDI-CAL
☑ 03 THROUGH CURRENT OR FORMER EMPLOYER UNION
☑ 05 PURCHASED DIRECTLY
☑ 06 COVERED CALIFORNIA
☑ 91 OTHER HEALTH PLAN
☑ -7 REFUSED
☑ -8 DON’T KNOW

If = 1, 3, 5, 6, 91, -7, -8, goto ‘PN_QA17_I37’

‘QA17_I31’ [CF24] –

Thinking about (his/her) current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

請想一想 {他/她}目前的醫療保險，{孩子的名字/年齡/性別}在過去12個月中，是不是都是享受同一種保險？

☑ 01 YES
☑ 02 NO
☑ 03 HAD SAME INSURANCE SINCE BIRTH (FOR CHILDREN LESS THAN ONE YEAR OLD)
☑ -7 REFUSED
☑ -8 DON’T KNOW

If = 1, 3, goto ‘PN_QA17_I37’
When (he/she) wasn’t covered by (his/her) current health insurance, did (he/she/he or she) have any other health insurance?

當 (他/她) 沒有享受目前的醫療保險時，(他/她) 有沒有其它任何醫療保險？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_I34’

Was this other health insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

該其他醫療保險是 Medi-CAL、Healthy Families、你透過雇主獲得的計劃、你直接從保險公司購買 的計劃、你透過 Covered California 購買的計劃還是其他計劃？

[CODE ALL THAT APPLY]
[PROBE: “Any others?”]
[PROBE: 「還有任何其他計劃嗎？」]

- 01 MEDI-CAL
- 04 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 05 PURCHASED DIRECTLY
- 06 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 7 REFUSED
- 8 DON'T KNOW

During the past 12 months, was there any time when (he/she) had no health insurance at all?

在過去 12 個月中，(他/她) 有沒有任何時間完全沒有醫療保險？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_IA10A' 

For how many of the past 12 months did (he/she) have no health insurance?

在過去 12 個月中，(他/她) 有幾個月沒有健康保險？

[IF < 1 MONTH, ENTER "1"]

MONTHS [RANGE: 1-12]

- 7 REFUSED
- 8 DON'T KNOW
What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn’t covered?

在{孩子的名字/年齡/性別}沒有保險的日子裡，{他/她}沒有醫療保險的主要原因是什麼?

[IF R Says, "No need," PROBE WHY]

- 01 CAN’T AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DONT BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 09 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON’T KNOW

"PN_QA17_I37" [PN_IA10A] -
PROGRAMMING NOTE IA10A:
IF NO TEEN SELECTED, GO TO PN AI56;
IF ARINSURE = 1, CONTINUE WITH IA10A;
IF ARINSURE ≠ 1, GO TO PN MA5;
ELSE CONTINUE WITH IA10A

"QA17_I37" [IA10A] –

These next questions are about health insurance (TEEN) may have.

以下有關於 (TEEN) 可能享有的健康保險的問題。

Does (TEEN) have the same insurance as {you/ADULT RESPONDENT NAME}? (TEEN) 的保險是否與 {您/ADULT RESPONDENT NAME} 的保險相同?

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW

If = 1, goto "QA17_I56"

"POST_QA17_I37" [POST_IA10A] -
POST-NOTE IA10A:
IF IA10A = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND ARMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND AREMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND AROOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;
IF IA10A = 1 AND ARIHS = 1, SET TEIHS = 1
IF IA10A = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;
PROGRAMMING NOTE MA5:

IF SPINSURE ≠ 1 THEN SKIP TO MA6;
ELSE IF IA10A = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE MA6;
ELSE CONTINUE WITH MA5

Does (TEEN) have the same insurance as your spouse?

(TEEN) 的保險是否與您配偶的保險相同?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto ‘QA17_I56’

POST-NOTE MA5:

IF MA5 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPEMPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPOTHEGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPIHS = 1, SET TEIHS = 1
IF MA5 = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;
IF MA5 = 1 AND SPARPAR = 1, THEN SET TEOTHER = 1 AND SET TEINSURE = 1 AND SPSAMETE = 1
PROGRAMMING NOTE MA6:
IF TEINSURE ≠ 1, THEN SKIP TO IA1;
ELSE IF (IA10A = 2 AND ARSAMECH = 1) OR (MA5 = 2 AND SPSAMECH = 1), THEN SKIP TO IA1;
ELSE CONTINUE WITH MA6;

Does (TEEN) have the same insurance as (CHILD)?

(TEEN) 的保險是否與 (CHILD) 的保險相同?

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 1, goto 'QA17_I68'

POST-NOTE MA6:
IF MA6 = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHMICAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHEMP = 1, SET TEMP = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
IF MA6 = 1 AND CHIHS = 1, SET TEIHS = 1;
IF MA6 = 1 AND CHOTHER = 1, SET TEOTHER = 1;
IF MA6 = 1 AND CHHBEX = 1, SET TEHBEX = 1

Is {he/she} currently covered by Medi-CAL?

(他/她) 是否享受 Medi-CAL（加州醫療保健計劃）的保賠?

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."] [IF NEEDED, SAY: 「Medi-CAL是為某些低收入家庭的兒童及其家人、孕婦、殘障人士或年長者提供的一項計畫。」]

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

POST-NOTE IA1:
IF IA1 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1
Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?

(TEEN) 有沒有享受通過您或其他人的工作或工會提供的醫療保險計劃或管理式保健組織計劃 (HMO)?

**[INTERVIEW NOTE: CODE ‘YES’ IF R MENTIONS ‘SHOP’ PROGRAM THROUGH COVERED CALIFORNIA]**

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If = 2, -7, -8, goto 'QA17_I43'

**'POST_QA17_I41' [POST_IA3] -**
**POST-NOTE IA3 :**
IF IA3 = 1, SET TEEMP = 1 AND SET TEINSURE = 1

**'QA17_I42' [AI94] –**

Is this plan through an employer, through a union, or through Covered California’s SHOP program?

這項計劃是透過雇主、工會、還是Covered California的SHOP計劃購買的？

**[IF NEEDED, SAY: “SHOP is the Small Business Health Options Program administered by Covered California”]**  [IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

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<td>91 OTHER (SPECIFY: _____________)</td>
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**OTHER_AI94**

**'POST_QA17_I42' [POST_AI94] -**
**POST-NOTE FOR AI94 :**
IF AI94 = 3, THEN SET TEHBEX = 1
PROGRAMMING NOTE IA4:
IF TEINSURE = 1 THEN GO TO AI95;
ELSE CONTINUE WITH IA4

'QA17_I43' [IA4] –
Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO?

(TEEN) 是否享受您直接從保險公司或HMO購買的醫療保險計劃的承保？

[IF NEEDED, SAY: “Do not include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you "extra cash" if you are in a hospital”] [IF NEEDED, SAY: 「請不要包括僅支付某些疾病（例如癌症或中風）費用的計劃或當您住院時僅向您支付「額外現金」的計劃。」]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'QA17_I50'

POST NOTE IA4:
IF IA4 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1

PROGRAMMING NOTE AI95:
IF TEDIRECT = 1, THEN CONTINUE WITH AI95;
ELSE GO TO PROGRAMMING NOTE AI96

'QA17_I44' [AI95] –
How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

您是如何購買這項保健計劃的 — 是直接從保險公司或HMO購買還是透過Covered California購買？

- 01 INSURANCE COMPANY OR HMO
- 02 COVERED CALIFORNIA
- 91 OTHER (SPECIFY: ___________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER_AI95

POST NOTE FOR AI95:
IF AI95 = 2, THEN SET TEHBEX = 1
PROGRAMMING NOTE AI96
IF TEHBEX = 1, THEN CONTINUE WITH AI96 ;
ELSE GO TO PROGRAMMING NOTE AI55 ;

'QA17_I45' [AI96] –

Was this a bronze, silver, gold or platinum plan?

❖ 01 BRONZE
❖ 02 SILVER
❖ 03 GOLD
❖ 04 PLATINUM
❖ 05 MEDI-CAL / MEDICAID
❖ 06 MINIMUM COVERAGE PLAN/CATASTROPHIC
❖ 91 OTHER (SPECIFY: __________)
❖ -7 REFUSED
❖ -8 DON'T KNOW

OTHER_AI96

PROGRAMMING NOTE AI97
IF AI94  = 3, THEN GO TO PN AI55 ;
ELSE CONTINUE WITH AI97 ;

'QA17_I46' [AI97] –

Was there a subsidy or discount on the premium for this plan?

❖ 01 YES
❖ 02 NO
❖ -7 REFUSED
❖ -8 DON'T KNOW
Do you pay any or all of the premium or cost for (TEEN)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否支付(TEEN)的保健計劃的任何或全部保費或費用？請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]

[IF NEEDED, SAY: 「協同付款是您每次看病或使用健康護理系統時支付的部份健康護理費用，而保險計劃支付您的主要健康護理保賠費。」]

[IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying."

[IF NEEDED, SAY: 「免賠額是您的保險計劃開始付款之前您支付的醫療護理費。」]

[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]

[IF NEEDED, SAY: 「保費是您的醫療保險計劃的每月收費。」]

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (TEEN)'s health plan?

是否有任何其他人，例如雇主、工會或專業機構，支付 (TEEN) 的保健計劃的全部或部份保費或費用？

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I50’
Who else pays all or some portion of the cost for (TEEN)'s health plan?

還有誰支付(TEEN) 的醫療保險計劃的全部或部份費用？

[CODE ALL THAT APPLY.]

- 01 CURRENT EMPLOYER
- 02 FORMER EMPLOYER
- 03 UNION
- 04 SPOUSE'S/PARTNER'S CURRENT EMPLOYER
- 05 SPOUSE'S/PARTNER'S FORMER EMPLOYER
- 06 PROFESSIONAL FRATERNAL ORGANIZATION
- 07 MEDICAID MEDI-CAL ASSISTANCE
- 10 COVERED CALIFORNIA
- 91 OTHER
- 7 REFUSED
- 8 DON'T KNOW

**POST_QA17_I49** [POST_AI53] -
**POST-NOTE AI53 :**
IF AI53 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;
IF AI53 = 7, SET TEMCAL = 1;
IF AI53 = 10, SET TEHBEX = 1;

**PN_QA17_I50** [PN_IA6] -
**PROGRAMMING NOTE IA6 :**
IF TEINSURE = 1, GO TO PROGRAMMING NOTE IA1A;
ELSE CONTINUE WITH IA6

**QA17_I50** [IA6] –
Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

(他/她) 是否享受 CHAMPUS/CHAMP VA, TRICARE, VA, 或其它軍隊醫療護理計劃？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto **PN_QA17_I56**

**POST_QA17_I50** [POST_IA6] -
**POST-NOTE IA6 :**
IF IA6 = 1, SET TEMILIT = 1 AND SET TEINSURE = 1
Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, Healthy Kids or something else?

(他/她)是否享有其他政府医疗保险计划，例如AIM、Mister MIP、Family PACT、Healthy Kids或其他计划？

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men."]

[IF NEEDED, SAY: 「AIM表示「母婴營養計劃」；Mister MIP或MRMIP表示「重大風險醫療保險計劃」；Family PACT是一項州立計劃，為沒有保險的低收入男女的避孕/生育醫療服務支付費用。」]

- 01 AIM
- 02 MISTER MIP/MRMIP
- 03 Family PACT
- 04 HEALTHY KIDS
- 05 NO OTHER PLAN
- 91 SOMETHING ELSE (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, 4, 91, goto ‘PN_QA17_I56’

OTHER_IA7

‘POST_QA17_I51’ [POST_IA7]

POST-NOTE IA7 :
IF IA7  = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1

‘QA17_I52’ [IA8] –

Does {he/she} have any health insurance coverage through a plan that I missed?

(他/她)有沒有享受任何我漏掉的其它医疗保险計劃？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_I56’
What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

(他/她)有哪一種健康保險？此保險是透過Medi-CAL（加州醫療保健計劃）、僱主或工會獲得的、還是從某些其它來獲得的？

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: “Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?”]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: “您是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的？”]

[CIRCLE ALL THAT APPLY] [PROBE: "Any others?"] [PROBE: 還有其它計劃嗎？]

- 01 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 02 THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION
- 03 PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE)
- 04 MEDICARE
- 05 MEDI-CAL
- 07 CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE
- 08 INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC
- 10 COVERED CALIFORNIA
- 11 SHOP THROUGH COVERED CALIFORNIA
- 91 OTHER GOVERNMENT HEALTH PLAN
- 92 OTHER NON-GOVERNMENT HEALTH PLAN
- -7 REFUSED
- -8 DON'T KNOW

'POST_QA17_I53' [POST_IA9] -
POST-NOTE IA9:
IF IA9 = 1, SET TEEMP = 1 AND TEINSURE = 1;
IF IA9 = 2, SET TEEMP = 1 AND TEINSURE = 1;
IF IA9 = 3, SET TEDIRECT = 1 AND TEINSURE = 1;
IF IA9 = 4, SET TEMCARE = 1 AND TEINSURE = 1;
IF IA9 = 5, SET TEMCAL = 1 AND TEINSURE = 1;
IF IA9 = 7, SET TEMILIT = 1 AND TEINSURE = 1;
IF IA9 = 8, SET TEIHS = 1;
IF IA9 = 10, SET TEHBEX = 1 AND TEINSURE = 1 AND TEDIRECT = 1;
IF IA9 = 11, SET TEHBEX = 1 AND TEINSURE = 1 AND TEEMP = 1;
IF IA9 = 91, SET TEOTHGOV = 1 AND TEINSURE = 1;
IF IA9 = 92, SET TEOTHER = 1 AND TEINSURE = 1;
IF IA9 = -7 OR -8, SET TEINSURE = 1

'PN_QA17_I54' [PN_IA9VER] -
PROGRAMMING NOTE IA9VER:
IF IA9 = 4 (TEEN HAS MEDICARE), CONTINUE WITH IA9VER;
ELSE SKIP TO PROGRAMMING NOTE IA1A

'QA17_I54' [IA9VER] –

Just to verify, you said that (TEEN) gets health insurance through Medicare?

我只是要確定一下，您說過 (TEEN) 有從聯邦醫療保險(Medicare) 獲得醫療保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
'QA17_I55' [IA1A] –

What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?

(TEEN) 沒有加入加州醫療輔助計劃 (Medi-CAL) 的一個主要原因什麼？

- 01 PAPERWORK TOO DIFFICULT
- 02 DIDN'T KNOW IF ELIGIBLE
- 03 INCOME TOO HIGH, NOT ELIGIBLE
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 OTHER NOT ELIGIBLE
- 06 DON'T BELIEVE IN HEALTH INSURANCE
- 07 DON'T NEED IT BECAUSE HEALTHY
- 08 ALREADY HAVE INSURANCE
- 09 DIDN'T KNOW IT EXISTED
- 10 DON'T LIKE / WANT WELFARE
- 91 OTHER (SPECIFY: ___________)
- 7 REFUSED
- 8 DON'T KNOW

OTHER_IA1A

‘PN_QA17_I56’ [PN_MA8] -

PROGRAMMING NOTE MA8:
IF IA10A = 1 AND ARMCARE = 1 AND AH124 = 1, THEN MA8 = AH124 AND MA7 = AH125 AND SKIP TO IA14;
ELSE IF IA10A = 1, THEN MA8 = AI22C AND MA7 = AI22A ANDIA14 = AI25 AND GO TO PN AI82;
ELSE IF MA6 = 1, THEN MA8 = MA3 AND MA7 = MA2 AND IA14 = CF14 AND GO TO PN AI82;
ELSE IF TEINSURE = 1, THEN CONTINUE WITH MA8;
ELSE GO TO PROGRAMMING NOTE AI82

‘QA17_I56’ [MA8] –

Is (TEEN)'s main health plan an HMO, that is, a Health Maintenance Organization?

(TEEN) 參加的 {Medi-Cal} 保健計劃是HMO（健康維護機構計劃）嗎？

[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, {he/she/} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid unless it’s an emergency.”] [IF NEEDED, SAY: “HMO表示「健康維護機構」。在HMO計劃中，(他/她)必須使用網絡內的醫生及醫院的服務。除非是急診，如果(他/她)在網路外醫生或醫院處接受服務，計劃通常不支付服務費。”]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: “{his/her} MAIN health plan.”]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto ‘QA17_I58’
Is (TEEN)'s health plan a PPO or EPO?

[IF NEEDED, SAY: “EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it’s an emergency and you can access doctors and specialists directly without a referral from your primary care provider.”]

[IF NEEDED, SAY: “EPO表示「專有服務提供者團體」。在EPO中，除非是急診，您必須使用網路內的醫生和醫院，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。”]

[IF NEEDED, SAY: “PPO stand for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan’s network. Also, you can access doctors and specialists directly without a referral from your primary care provider.”]

[IF NEEDED, SAY: “PPO表示「首選服務提供者團體」。在PPO中，您可以使用任何醫生和醫院，但如果您使用屬於您的計劃網路的醫生和醫院時，可支付較低的費用。另外，您可以直接與醫生和專科醫生約診，無需由您的主治醫生轉介。”]

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: “{His/Her} MAIN health plan.”]

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: “{他的/她的}主要保健計劃。”]
What is the name of (TEEN)’s main health plan?

(TEEN) 參加的主要保健計劃名稱是什麼？

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: “Does (TEEN) have an insurance card or something else with the plan name on it?”]
[IF R HAS DIFFICULTY RECALLING NAME, PROBE: (TEEN) 是否有保險卡或註明計劃名稱的其他文件？”]

- 01 ACCESS SENIOR HEALTHCARE
- 02 AETNA
- 03 AETNA GOLDEN MEDICARE
- 04 AIDS HEALTHCARE FOUNDATION, LA
- 05 ALAMEDA ALLIANCE FOR HEALTH
- 08 ASPIRE HEALTH PLAN
- 09 BLUE CROSS CALIFORNIA
- 11 BLUE SHIELD 65 PLUS
- 12 BLUE SHIELD OF CALIFORNIA
- 13 BRAND NEW DAY (UNIVERSAL CARE)
- 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- 15 CALIFORNIA KIDS (CALKIDS)
- 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- 17 CALVIVA HEALTH
- 18 CARE 1ST HEALTH PLAN
- 19 CAREMORE HEALTH PLAN
- 20 CENTER FOR ELDERS’ INDEPENDENCE
- 80 CEN CAL HEALTH
- 21 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- 22 CENTRAL HEALTH PLAN
- 24 CHINESE COMMUNITY HEALTH PLAN
- 25 CHOICE PHYSICIANS NETWORK
- 26 CIGNA HEALTHCARE
- 27 CITIZENS CHOICE HEALTHPLAN
- 28 COMMUNITY CARE HEALTH PLAN
- 29 COMMUNITY HEALTH GROUP
- 81 CONTRA COSTA HEALTH PLAN
- 31 DAVITA HEALTHCARE PARTNERS PLAN
- 32 EASY CHOICE HEALTH PLAN
- 33 EPIC HEALTH PLAN
- 34 GEM CARE HEALTH PLAN
- 35 GOLD COAST HEALTH PLAN
- 36 GOLDEN STATE MEDICARE HEALTH PLAN
- 38 HEALTH NET
- 39 HEALTH NET SENIORITY PLUS
- 40 HEALTH PLAN OF SAN JOAQUIN
- 41 HEALTH PLAN SAN JP AUTHORITY
- 42 HERITAGE PROVIDER NETWORK
- 43 HUMANA GOLD PLUS
- 44 HUMANA HEALTH PLAN
- 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- 46 INTER VALLEY HEALTH PLAN
- 47 KAISER PERMANENTE
- 48 KAISER PERMANENTE SENIOR ADVANTAGE
- 49 KERN FAMILY HEALTH CARE
- 50 L.A. CARE HEALTH PLAN
- 51 MD CARE
- 54 MOLINA HEALTHCARE OF CALIFORNIA
- 55 MONARCH HEALTH PLAN
- 56 ON LOK SENIOR HEALTH SERVICES
- 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
☑ 58 PIH HEALTH CARE SOLUTIONS
☑ 59 PREMIER HEALTH PLAN SERVICES
☑ 60 PRIMECARE MEDICAL NETWORK
☑ 61 PROVIDENCE HEALTH NETWORK
☑ 68 SCRIPPS HEALTH PLAN SERVICES
☑ 69 SEASIDE HEALTH PLAN
☑ 84 SAN FRANCISCO HEALTH PLAN
☑ 90 SANTA CLARA FAMILY HEALTH PLAN
☑ 86 SAN MATEO HEALTH COMMISSION
☑ 88 SANTA BARBARA
☑ 92 SATELLITE HEALTH PLAN
☑ 67 SCAN HEALTH PLAN
☑ 70 SHARP HEALTH PLAN
☑ 71 SUTTER HEALTH PLAN
☑ 72 SUTTER SENIOR CARE
☑ 73 UNITED HEALTHCARE
☑ 74 UNITED HEALTHCARE SECURE HORIZON
☑ 75 UNIVERSITY HEALTHCARE ADVANTAGE
☑ 76 VALLEY HEALTH PLAN
☑ 77 VENTURA COUNTY HEALTH CARE PLAN
☑ 78 WESTERN HEALTH ADVANTAGE
☑ 93 CHAMPUS/CHAMP-VA
☑ 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
☑ 89 VA HEALTH CARE SERVICES
☑ 52 MEDI-CAL
☑ 53 MEDICARE
☑ 85 OTHER (SPECIFY: _____________)
☑ -7 REFUSED
☑ -8 Don't Know

OTHER_MA7

‘POST_QA17_I58’ [POST_MA7] - POST_MA7

POST NOTE MA7:
IF MA7 = 93, 87, OR 89 THEN SET TEMILIT=1

‘QA17_I59’ [IA14] –

Is (TEEN) covered for prescription drugs?

(TEEN) 的計劃是否支付處方藥品？

☑ 01 Yes
☑ 02 No
☑ -7 Refused
☑ -8 Don't Know
’PN_QA17_I60’ [PN_AI82] –
PROGRAMMING NOTE FOR AI82:
IF [(ARINSURE ≠ 1 OR IA10A ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOOTHER = 1), THEN CONTINUE WITH AI82; ELSE SKIP TO PN IA18]

’QA17_I60’ [AI82] –
Does (TEEN)’s health plan have a deductible that is more than $1,000?

(TEEN) 的健康保險計劃是否有超過 1,000 美元的免賠額？

[IF NEEDED, SAY: “A deductible is the amount you have to pay before your plan begins to pay for your medical care.”]
[IF NEEDED, SAY: ”免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。”]

- 01 YES
- 02 NO
- 03 YES, ONLY WHEN GO OUT OF NETWORK
- -7 REFUSED
- -8 DONT KNOW

’QA17_I61’ [AI83] –
Does (TEEN)’s health plan have a deductible for all covered persons that is more than $2,000?

(TEEN) 的健康保險計劃是否有超過 2,000 美元的免賠額？

[IF NEEDED, SAY: “A deductible is the amount you have to pay before your plan begins to pay for your medical care.”]
[IF NEEDED, SAY: ”免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。”]

- 01 YES
- 02 NO
- 03 YES, ONLY WHEN GO OUT OF NETWORK
- -7 REFUSED
- -8 DONT KNOW

’PN_QA17_I62’ [PN_AI84] –
PROGRAMMING NOTE AI84:
IF (AI82 = 1 OR 3) OR (AI83 = 1 OR 3), CONTINUE WITH AI84; ELSE SKIP TO PROGRAMMING NOTE IA18

’QA17_I62’ [AI84] –
Do you have a special account or fund you can use to pay for (TEEN)’s medical expenses?

您是否有可以用於支付 (TEEN) 的醫療費用的特殊帳戶或資金？

[IF NEEDED, SAY: “The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts.”] [IF NEEDED, SAY: ”帳戶有時稱為健康儲蓄帳戶 (HSA)、健康補償帳戶 (HRA) 或其他類似的帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療資金或選擇資金，這些帳戶與雇主提供的靈活開支帳戶不同。”]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DONT KNOW
What is the main reason (TEEN) does not have any health insurance?

(TEEN) 沒有任何健康保險的主要原因是什麼？

- 01 CAN'T AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DON'T BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 09 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

OTHER_IA18

Was (TEEN) covered by health insurance at any time during the past 12 months?

(TEEN) 在過去 12 個月中的任何時間是否享受醫療保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘QA17_I66’

How long has it been since (TEEN) last had health insurance?

(TEEN) 從上一次有醫療保險到現在已有多長時間？

- 01 MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
- 02 MORE THAN 3 YEARS AGO
- 03 NEVER HAD HEALTH INSURANCE COVERAGE
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 2, 3, -7, -8, goto ‘PN_QA17_I74’
For how many of the last 12 months did (he/she) have health insurance?

在過去十二個月內, (他/她) 有幾個月有醫療保險?

[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]

If = 0 , goto ‘PN_QA17_I74’

-7 REFUSED
-8 DON'T KNOW

‘QA17_I67’ [IA23] –

During that time when (TEEN) had health insurance, was (his/her) insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在(TEEN) 有醫療保險期間, (他的/她的) 保險是 Medi-CAL、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃?

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他人或機構嗎？」]

- 01 MEDI-CAL
- 03 THROUGH CURRENT OR FORMER EMPLOYER UNION
- 05 PURCHASED DIRECTLY
- 06 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- -7 REFUSED
- -8 DON'T KNOW

If = 1, 3, 5, 6, 91, -7, -8, goto ‘PN_QA17_I74’

‘QA17_I68’ [IA24] –

Thinking about (his/her) current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?

請想一想 (他的/她的) 目前參加的健康保險, (TEEN) 是否在過去十二個月中一直參加這個相同的健康保險計劃?

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ’PN_QA17_I74’
When {he/she} wasn’t covered by {his/her} current health insurance, did {he/she} have any other health insurance?

當 (他/她) 沒有享受(他的/她的) 目前的醫療保險計劃時, (他/她) 有沒有其它任何醫療保險？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto 'QA17_I71'

Was this other health insurance Medi-Cal, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

該其他醫療保險是 Medi-CAL、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

[CODE ALL THAT APPLY.]
[PROBE: "Any others?"]
[PROBE: 「還有任何其他計劃嗎？】]

- 01 MEDI-CAL
- 04 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- 05 PURCHASED DIRECTLY
- 06 COVERED CALIFORNIA
- 91 OTHER HEALTH PLAN
- 07 REFUSED
- 08 DON'T KNOW

During the past 12 months, was there any time when {he/she} had no health insurance at all?

在過去 12 個月中，(他/她) 有沒有任何時間完全沒有醫療保險？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto 'PN_QA17_I74'

For how many of the past 12 months did {he/she} have no health insurance?

在過去 12 個月中，(他/她)有幾個月沒有健康保險？

[IF < 1 MONTH, ENTER "1"]

_____ MONTHS [RANGE: 1-12]
- 07 REFUSED
- 08 DON'T KNOW
What is the **one main** reason why (TEEN) did not have any health insurance during the time {he/she} wasn’t covered?

在(TEEN)不享有保險的期間，{他/她}沒有任何健康保險的主要原因是什麼？

**[IF R SAYS, "No need," PROBE WHY]**

- 01 CAN'T AFFORD/TOO EXPENSIVE
- 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- 05 FAMILY SITUATION CHANGED
- 06 DONT BELIEVE IN INSURANCE
- 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- 91 OTHER (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

**OTHER_IA29**

**‘PN_QA17_I74’ [PN_AI56]**

PROGRAMMING NOTE AI56:
IF NO TEEN SELECTED, GO TO SECTION J;
IF AA3 = 1 (R IS MALE), DISPLAY “mother”;
IF AA3 = 2 (R IS FEMALE), DISPLAY “father”;
IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex =1 DISPLAY "father" OR If SC11A =2 DISPLAY "mother”
ELSE IF DISPLAY "other parent"

**‘QA17_I74’ [AI56]**

In what country was (TEEN)'s {mother/father} born?

(TEEN)的(母親/父親)是在哪個國家出生的？

**[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

- 01 UNITED STATES
- 02 AMERICAN SAMOA
- 03 CANADA
- 04 CHINA
- 05 EL SALVADOR
- 06 ENGLAND
- 07 FRANCE
- 08 GERMANY
- 09 GUAM
- 10 GUATEMALA
- 11 HUNGARY
- 12 INDIA
- 13 IRAN
- 14 IRELAND
- 15 ITALY
- 16 JAPAN
- 17 KOREA
- 18 MEXICO
- 19 PHILIPPINES
- 20 POLAND
- 21 PORTUGAL
- 22 PUERTO RICO
Does (TEEN)'s {mother/father} now live in the U.S.?

- 01 YES
- 02 NO
- 03 MOTHER/FATHER DECEASED
- 04 MOTHER/FATHER NEVER LIVED IN US
- -7 REFUSED
- -8 DON'T KNOW
`PROGRAMMING NOTE AI59:
IF AA3 = 1 (R IS MALE), DISPLAY "mother";
IF AA3 = 2 (R IS FEMALE), DISPLAY "father";
IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex = 1 DISPLAY "father" OR IF SC11A = 2 DISPLAY "mother"
ELSE IF DISPLAY "other parent"
IF AI57 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";
ELSE DISPLAY "Is"

`QA17_I77' [AI59] –
{Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?

[TEEN]的{母親/父親}是持有綠卡的永久居民嗎？

[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]
[IF NEEDED, SAY: "人們通常將永久居民卡稱為「綠卡」，但永久居民卡的顏色可能是粉紅色、藍色或白色。"]

❖ 01 YES
❖ 02 NO
❖ 03 APPLICATION PENDING
❖ -7 REFUSED
❖ -8 DON'T KNOW

`PROGRAMMING NOTE AI60:
IF AA3 = 1 (R IS MALE), DISPLAY "mother";
IF AA3 = 2 (R IS FEMALE), DISPLAY "father"

`QA17_I78' [AI60] –
About how many years has (TEEN)'s {mother/father} lived in the United States?

{ADOLESCENT/AGE/SEX} 的母親在美國已居住大約多少年？

[TEEN]的{母親/父親}在美國已居住大約多少年？

NUMBER OF YEARS

YEAR FIRST COME AND LIVE IN U.S.

OTHER_AI60
❖ 01 NUMBER OF YEARS
❖ 02 YEAR FIRST CAME TO LIVE IN US
❖ 03 MOTHER/FATHER DECEASED
❖ 04 MOTHER/FATHER NEVER LIVED IN US
❖ -7 REFUSED
❖ -8 DON'T KNOW
Section J: Health Care Utilization and Access

**‘PN_QA17_J1’ [PN_AH5] -**

PROGRAMMING NOTE AH5:
IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY “Now, I’d like to ask about the health care YOU receive”;
ELSE BEGIN QUESTION WITH “During the past 12 months, how many times have you seen a medical doctor”

**‘QA17_J1’ [AH5] –**

(Now, I’d like to ask about the health care you receive.)

During the past 12 months, how many times have you seen a medical doctor?

在過去 12 個月中，您看過幾次醫生？

_____ TIMES [HR: 0-365]

-7 REFUSED
-8 DON’T KNOW

**‘PN_QA17_J2’ [PN_AH6] -**

PROGRAMMING NOTE AH6:
IF AH5 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH AH6 ;
ELSE GO TO PROGRAMMING NOTE AJ114

**‘QA17_J2’ [AH6] –**

About how long has it been since you last saw a doctor about your own health?

自從您上次就自身的健康狀況去看醫生以來到現在已經有多長時間？

- 00 ONE YEAR AGO OR LESS
- 01 MORE THAN 1 UP TO 2 YEARS AGO
- 02 MORE THAN 2 UP TO 5 YEARS AGO
- 03 MORE THAN 5 YEARS AGO
- 04 NEVER
- -7 REFUSED
- -8 DON’T KNOW
**‘PN_QA17_J3’ [PN_AJ114] -**

PROGRAMMING NOTE AJ114:

IF AH6 = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO PROGRAMMING NOTE AJ77;
ELSE CONTINUE WITH AJ114

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‘QA17_J3’ [AJ114] –

About how long has it been since you last saw a doctor or medical provider for a routine check-up?

自從您上次接受醫生或其他醫療提供者的常規體檢以來大約有多長時間了？

**[IF NEEDED: A routine check-up is a visit not for an illness or problem. This visit may include questions about health behaviors such as smoking.]**

**[IF NEEDED, SAY:「常規體檢指並非因生病或病症而接受的門診檢查。該常規體檢可能包括有關健康行為（例如抽煙）的問題。」]**

- 00 ONE YEAR AGO OR LESS
- 01 MORE THAN 1 UP TO 2 YEARS AGO
- 02 MORE THAN 2 UP TO 5 YEARS AGO
- 03 MORE THAN 5 YEARS AGO
- 04 NEVER
- -7 REFUSED
- -8 DON'T KNOW

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**‘PN_QA17_J4’ [PN_AJ77] -**

PROGRAMMING NOTE AJ77:

IF AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH AJ77;
ELSE GO TO PROGRAMMING NOTE AJ102

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‘QA17_J4’ [AJ77] –

Do you have a personal doctor or medical provider who is your main provider?

您是否有一位作為您的主要服務提供者的個人醫生或醫療服務提供者？

**[IF NEEDED, SAY: “This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider.”]**

**[IF NEEDED, SAY: “可以是全科醫生、專科醫生、醫生助理、護士或其他健康服務提供者”]**

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
‘QA17_J5’ [AJ102] –

In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

在過去12個月中，您是否曾經因為生病或受傷嘗試預約在兩天內看醫生或醫療服務提供者？

[IF NEEDED, SAY: Do not include urgent care or emergency care visits. I am only asking about appointments.]

[IF NEEDED, SAY: 「請勿包括緊急護理或急診護理就診。我只是詢問有關普通預約就診的情況。」]

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON\\n\\nIF = 2, -7, -8 go to ‘PN_QA17_J7’

‘QA17_J6’ [AJ103] –

How often were you able to get an appointment within two days? Would you say…

能夠在兩天內為您安排就診的頻率有多高？您認為是……

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON\\n\\n‘PN_QA17_J7’ [PN_AJ80] –

PROGRAMMING NOTE AJ80:

IF AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND AJ77 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [(AB40 = 1 OR AB41 = 1 (HAS ASTHMA)) OR AB22 = 1 (HAS DIABETES) OR AB34 = 1 (HAS HEART DISEASE)], THEN CONTINUE WITH AJ80;

ELSE GO TO AJ152

‘QA17_J7’ [AJ80] –

Is there anyone at your doctor’s office or clinic who helps coordinate your care with other doctors or services such as tests or treatments?

在您的醫生辦公室或診所內是否有人幫助協調其他醫生對您的護理或服務，例如測試或治療？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON\\n
During the past 12 months, did you receive care from a doctor or health professional through a video or telephone conversation rather than an office visit?

過去12個月裡，您是否通過視頻或者電話而不是辦公室會面，來獲得醫生或者其他健康從業人員的護理？

[IF NEEDED, SAY: “Do not include calls about appointments or prescription refills. Do not include calls made to a nurse helpline.”]

[IF NEEDED, SAY: 請不要包括預約就診或再次領取處方藥物。不包括護士熱線。]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_J10’

Was this care for a skin or eye problem, an emotional or mental health problem, or some other health problem?

此護理是因為皮膚或眼睛問題、情緒或心理健康問題、還是其他健康問題嗎？

[CODE ALL THAT APPLY]

(PROBE: “Any others?”)

(PROBE: “還有其他問題嗎？”)

- 01 SKIN PROBLEM
- 02 EYE PROBLEM
- 03 MENTAL OR EMOTIONAL HEALTH PROBLEM
- 91 OTHER HEALTH PROBLEM (SPECIFY: ____________)
- -7 REFUSED
- -8 DON'T KNOW

The last time you saw a doctor, did you have a hard time understanding the doctor?

您上次看醫生時，是否很難聽懂醫生說的話？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘QA17_J12’
If = -7, -8, goto ‘PN_QA17_J15’
‘PN_QA17_J11’ [PN_AJ50] –

PROGRAMMING NOTE AJ50:
IF AJ8B = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR AH36 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], CONTINUE WITH AJ50;
SET AJ50ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME AJ50 WAS ASKED;
ELSE SKIP TO PROGRAMMING NOTE AJ105

‘QA17_J11’ [AJ50] –

In what language did the doctor speak to you?

您的醫生用哪一種語言與您交談?

- 01 ENGLISH
- 02 SPANISH
- 03 CANTONESE
- 04 VIETNAMESE
- 05 TAGALOG
- 06 MANDARIN
- 07 KOREAN
- 08 ASIAN INDIAN LANGUAGES
- 09 RUSSIAN
- 91 OTHER (SPECIFY: ____________)
- 7 REFUSED
- 8 DON'T KNOW

If = 1, goto ‘QA17_J13’

If = 2, 3, 4, 5, 6, 7, 8, 9, 91, -7, -8, goto ‘PN_QA17_J15’

‘QA17_J12’ [AJ9] –

Was this because you and the doctor spoke different languages?

這是不是因為您和醫生講的是不同的語言?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_J13’ [AJ10] –

Did you need someone to help you understand the doctor?

您是否需要有人幫助您聽懂醫生的話?

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_J15’
Who was this person who helped you understand the doctor?

是誰幫助您聽懂醫生說的話?

[IF R RESPONDS “MY CHILD,” PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS “ADULT FAMILY MEMBER.”]

- 01 MINOR CHILD (UNDER AGE 18)
- 02 AN ADULT FAMILY MEMBER OR FRIEND OF MINE
- 03 NON-MEDICAL OFFICE STAFF
- 04 MEDICAL STAFF INCLUDING NURSES/DOCTORS
- 05 PROFESSIONAL INTERPRETER (BOTH IN PERSON AND ON THE TELEPHONE)
- 06 OTHER (PATIENTS, SOMEONE ELSE)
- 07 DID NOT HAVE SOMEONE TO HELP
- 07 REFUSED
- 08 DON'T KNOW

In California, you have the right to get help from an interpreter for free during your medical visits. Did you know this before today?

在加州，您有權在就診時獲得免費口譯服務。您在今天之前是否知道這項服務？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

In the past 12 months, did you change where you usually go for health care?

在過去十二個月內，您是否曾經改變通常接受醫療護理的地點？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_J18’
Did you have to change because of your health insurance plan?

您是不是因為醫療保險計劃的原因而改變？

[IF NEEDED, SAY: “Did you have to change where you usually go for health care because of a reason related to your health insurance plan?”]

[IF NEEDED, SAY: 「您是否因與您的醫療保險計劃相關的原因不得不改變通常接受醫療護理的地點？」]

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

在過去 12 個月中，您有沒有延遲或沒有去拿醫生為您開的藥？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If 2, -7, -8, goto ‘QA17_J21’

Was cost or lack of insurance a reason why you delayed or did not get the prescription?

醫療費用或沒有保險是不是您延遲或沒有領取處方藥物的一個原因？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

Did you delay or not get a medicine while you had your current insurance plan?

在持有目前的保險計劃期間，您曾否延遲或沒有取藥？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?

在過去十二個月中，您有沒有延遲或沒有接受任何您認為必要的醫療護理—例如看醫生、專科醫生或其他健康護理專業人員？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_J27’

‘QA17_J22’ [AJ129] –

Did you get the care eventually?

您最終接受了護理嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

‘QA17_J23’ [AJ20] –

Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

醫療費用或沒有保險是不是您延遲或沒有領取處方藥物的一個原因？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_J25’

‘QA17_J24’ [AJ130] –

Was that the main reason?

這是主要原因嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 1, -7, -8, goto ‘QA17_J27’
What was the one main reason why you delayed getting the care you felt you needed?

您延遲接受您認為自己需要的護理的一個最主要原因是什么？

- 01 Couldn’t get appointment
- 02 My insurance not accepted
- 03 Insurance did not cover
- 04 Language problems
- 05 Transportation problems
- 06 Hours not convenient
- 07 No child care for children at home
- 08 Forgot or lost referral
- 09 I didn’t have time
- 10 Couldn’t afford/cost too much
- 11 No insurance
- 91 Other (specify: ____________)
- 7 Refused
- 8 Don’t know

Did you delay or not get other medical care you felt you needed while you had your current insurance plan?

在持有目前的保險計劃期間，您曾否延遲或沒有獲取其他您認為需要的醫護服務？

- 01 Yes
- 02 No
- 7 Refused
- 8 Don’t know

The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

接下來是有關專科醫生的問題。專科醫生是指外科醫生、心臟病醫生、過敏醫生、皮膚科醫生和其他針對某個健康護理領域的專科醫生。

In the past 12 months, did you or a doctor think you needed to see a medical specialist?

在過去十二個月中，您或醫生是否曾認為您應當去看專科醫生？

[IF NEEDED: Do not include dental visits.]
[IF NEEDED, SAY: 「請不要包括牙科門診。」]

- 01 Yes
- 02 No
- 7 Refused
- 8 Don’t know
During the past 12 months, did you have any trouble finding a medical specialist who would see you?

在過去十二個月中，您是否有任何困難找到一位能夠為您看病的專科醫生？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?

在過去十二個月中，是否有專科醫生診所告訴您他們不願接受您作為他們的新病人？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?

在過去十二個月中，是否有專科醫生辦公室告訴您他們不接受您的主要健康保險？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?

現在是有關全科醫生的問題。在過去十二個月中，您是否有任何困難尋找一位為您看病的全科醫生？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
During the past 12 months, did a doctor’s office tell you that they would not take you as a new patient?

在過去十二個月中，是否有醫生診所告訴您他們不願接受您作為他們的新病人？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE AJ135:
IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH AJ135;
ELSE SKIP TO AJ169

During the past 12 months, did a doctor’s office tell you that they would not take your main health insurance?

在過去十二個月中，是否有醫生診所告訴您他們不願接受您的主要醫療保險？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

PROGRAMMING NOTE AJ169:
IF AGE > 49 YEARS GO TO AG1;
ELSE IF AA3 = 1 THEN GO TO AJ144B;
ELSE CONTINUE WITH AJ169

Which of the following statements best describes your pregnancy plans? Would you say...

下列哪項陳述最能形容您的生育計劃？您認為......

- 01 You do not plan to get pregnant within the next 12 months.
- 02 You are not sexually active
- 03 You are planning to get pregnant within the next 12 months, or
- 04 You are currently pregnant?
- 7 REFUSED
- 8 DON'T KNOW
'PN_QA17_J35' [PN_AF40B] -
PROGRAMMING NOTE AF40B:
IF AD13 = 1 (PREGNANT), GO TO AG1;
IF AA3 = 2 (FEMALE) AND AD46 = 2 (GAY, LESBIAN, OR HOMOSEXUAL), GO TO AG1; IF AJ169 = 2, 4 (NOT SEXUALLY ACTIVE OR PREGNANT) THEN GO TO AJ144B;
ELSE CONTINUE WITH AF40B

'QA17_J35' [AF40B] –
Are you or your male sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.
您或您的男性性伴侣是否采用某种避孕方法避孕？这包括男性或女性绝育。

[IF NEEDED, SAY: “Sterilization includes having your tubes tied, getting a vasectomy, or having an operation so you cannot have children.”]
[IF NEEDED SAY：「絕育包括輸卵管結扎、輸精管切除術或絕育手術，導致你們不能生育。」]
◆ 01 YES
◆ 02 NO
◆ 03 NO MALE SEXUAL PARTNER
◆ -7 REFUSED
◆ -8 DON'T KNOW
If = 2, 3, -7, -8, goto ‘QA17_J39’

'PN_AJ154' [PN_AJ154] -
PROGRAMMING NOTE AJ154:
IF AF40B = 2(NO) OR -7 (REF) OR -8 (DK), GO TO AJ170;
ELSE CONTINUE WITH AJ154

Which birth control method or methods are you using?
您正在使用哪种避孕方法？

[CODE ALL THAT APPLY]
[PROBE: “Any others?”] [PROBE: 「還有任何其他人或機構嗎？」]
◆ 01 TUBAL LIGATION (TUBES TIED OR CUT)
◆ 02 VASECTOMY (MALE STERILIZATION)
◆ 03 IUD (MIRENA, PARAGARD)
◆ 04 IMPLANT (IMPLANON, NEXPLANON)
◆ 05 BIRTH CONTROL PILLS
◆ 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
◆ 07 CONDOMS (MALE)
◆ 91 OTHER (SPECIFY: ______________)
◆ -7 REFUSED
◆ -8 DON'T KNOW
What is the MAIN reason you are NOT currently using birth control?

您目前並無避孕的主因是甚麼？

- 01 TRYING TO GET PREGNANT/WANT A BABY
- 02 HAVEN'T FOUND A METHOD I LIKE
- 03 COST
- 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- 05 NO TRANSPORTATION
- 06 DON'T KNOW WHERE TO GET IT
- 07 DON'T BELIEVE IN BIRTH CONTROL
- 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- 09 PARTNER WON'T LET ME
- 91 OTHER (SPECIFY: _____________)
- 7 REFUSED
- 8 DON'T KNOW

Has a doctor, medical provider, or family planning counselor ever talked to you about an IUD or an implant (that thing in your arm)?

醫生、醫療服務者或家庭計劃顧問曾否向您談及子宮環（IUD）或植入式避孕（手臂皮下植入）？

- 01 YES
- 02 NO
- 03 NO MALE SEXUAL PARTNER
- 7 REFUSED
- 8 DON'T KNOW

During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?

在過去十二個月中，您是否曾接受過醫生或醫療提供者有關男性或女性避孕的諮詢或資訊？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

Are you or your female sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.

您或您的女性伴侶是否採用某種避孕方法避孕？這包括男性或女性絕育。

- 01 YES
- 02 NO
- 03 NO FEMALE SEXUAL PARTNER
- 7 REFUSED
- 8 DON'T KNOW
‘PN_QA17_J41’ [PN_AJ174] -
PROGRAMMING NOTE AJ174:
IF AJ172 = 2 (NO) or 3 (NO FEMALE PARTNER) THEN GO TO AJ175;
ELSE CONTINUE WITH AJ174;

‘QA17_J41’ [AJ174] –

Which birth control method or methods are you using?

您正在使用哪種避孕方法？

[CODE ALL THAT APPLY]
[PROBE: “Any others?”]
[PROBE: 「還有任何其他人或機構嗎？」]

☐ 03 IUD (MIRENA, PARAGARD)
☐ 04 IMPLANT (IMPLANON, NEXPLANON)
☐ 05 BIRTH CONTROL PILLS
☐ 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
☐ 07 CONDOMS (MALE)
☐ 91 OTHER (SPECIFY: _____________)
-7 REFUSED
-8 DON'T KNOW

‘PN_QA17_J42’ [PN_AJ175] -
PROGRAMMING NOTE AJ175:
IF AJ172=2 (N0), CONTINUE WITH AJ175;
ELSE GO TO AG1;

‘QA17_J42’ [AJ175] –

What is the MAIN reason you are NOT currently using birth control?

您目前並無避孕的主因是甚麼？

☐ 01 TRYING TO GET PREGNANT/WANT A BABY
☐ 02 HAVEN'T FOUND A METHOD I LIKE
☐ 03 COST
☐ 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
☐ 05 NO TRANSPORTATION
☐ 06 DON'T KNOW WHERE TO GET IT
☐ 07 DON'T BELIEVE IN BIRTH CONTROL
☐ 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
☐ 09 PARTNER WON'T LET ME
☐ 91 OTHER (SPECIFY: _____________)
-7 REFUSED
-8 DON'T KNOW
These next questions are about dental health. About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.

以下是有關牙科健康的幾個問題。自從你上次看牙醫或前往牙科診所就診以來到現在已經有多長時間？請包括牙科保健員以及各類專科牙醫。

- 00 HAVE NEVER VISIT
- 01 6 MONTHS AGO OR LESS
- 02 MORE THAN 6 MONTHS UP TO 1 YEAR AGO
- 03 MORE THAN 1 YEAR UP TO 2 YEARS AGO
- 04 MORE THAN 2 YEARS UP TO 5 YEARS AGO
- 05 MORE THAN 5 YEARS AGO
- -7 REFUSED
- -8 DON'T KNOW

If = 0, -7, -8, goto ‘QA17_J45’

‘QA17_J44’ [AJ167] –

Was it for a routine checkup or cleaning, or was it for a specific problem?

您是去接受常規檢查或洗牙還是因為某一具體問題接受治療？

- 01 ROUTINE CHECKUP OR CLEANING
- 02 SPECIFIC PROBLEM
- 03 BOTH
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_J45’ [AG3] –

Do you now have any type of insurance that pays for part or all of your dental care?

您目前是否有任何類型的保險可以支付牙科護理的部份或全部費用？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_J46’ [AJ168] –

How would you describe the condition of your teeth: excellent, very good, good, fair, or poor? 您如何描述您的牙齒狀況：極好、很好、較好、一般還是較差？

- 01 EXCELLENT
- 02 VERY GOOD
- 03 GOOD
- 04 FAIR
- 05 POOR
- 06 HAS NO NATURAL TEETH
- -7 REFUSED
- -8 DON'T KNOW
‘QA17_DM1’ [DMC8] –

These next questions are about things that have happened to you while receiving medical care.

是否有過這樣的時候 --- 如果您是屬於不同的種族您會接受到更好的醫療服務？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_DM3’

‘QA17_DM2’ [DMC9] –

Think about the last time this happened. How long ago was that?

回想上一次發生這種情況的時候。那是多久之前？

- 01 A YEAR AGO OR LESS
- 02 MORE THAN 1 UP TO 2 YEARS AGO
- 03 MORE THAN 2 UP TO 3 YEARS AGO
- 04 MORE THAN 3 UP TO 5 YEARS AGO
- 05 MORE THAN 5 UP TO 10 YEARS AGO
- 06 MORE THAN 10 UP TO 20 YEARS AGO
- 07 MORE THAN 20 YEARS AGO
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_DM3’ [DMC3] –

Over your entire lifetime, how often have you been treated unfairly when getting medical care? Would you say…

有生以來，您有多經常在獲取醫療護理時被不平等對待？

- 01 Never,
- 02 Rarely,
- 03 Sometimes, or
- 04 Often?
- -7 REFUSED
- -8 DON'T KNOW

If = 1, -7, -8, goto ‘QA17_K1’
Which of these do you think is the main reason why you have been treated unfairly, over your entire lifetime? Was it because of...

- Your ancestry or national origin
- Because of your gender or sex
- Because of your race or skin color
- Because of your age, or
- Because of the way you speak English, or
- For some other reason? (Specify: __________)
- REFUSED
- DON'T KNOW

Over your entire lifetime, how stressful have these experiences of unfair treatment usually been for you?  Would you say...

- Not at all stressful
- A little stressful
- Somewhat stressful, or
- Extremely stressful?
- REFUSED
- DON'T KNOW
Section K: Employment, Income, Poverty Status, Food Security

**'PN_QA17_K1' [PN_AK3] -**

PROGRAMMING NOTE AK3:
IF AK1 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUSINESSES BUT NOT AT WORK) OR AG10 = 1 (R USUALLY WORKS) CONTINUE WITH AK3;
ELSE GO TO PROGRAMMING NOTE AK20

**'QA17_K1' [AK3] -**

The next questions are about your employment.

以下是有關您的就業問題。

How many hours per week do you usually work at all jobs or businesses?

您在從事的所有的工作或業務中每週通常工作多少小時?

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

_____ HOURS [HR: 0-95]
 -7 REFUSED
 -8 DON'T KNOW

**'QA17_K2' [AK7] -**

How long have you worked at your main job?

您從事這份主要工作多久了?

[IF NEEDED, SAY: “That is, for your current employer.”]

[IF NEEDED, SAY: 就是為現在的僱主工作]

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

'AK7M' [AK7M] - _____ MONTHS [HR: 0-12]

'AK7Y' [AK7Y] - _____ YEARS [HR: 0-50]
 -7 REFUSED
 -8 DON'T KNOW
What is your best estimate of all your earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

您上個月在所有工作和業務中,包括小時工資、薪水、小費和佣金,稅前和其它扣除額之前的總收入是多少? 請提供您的最佳估計數字。

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____________ AMOUNT [HR: 0-999995]

-7 REFUSED
-8 DON'T KNOW
‘PN_QA17_K5’ [PN_AK10A] -
PROGRAMMING NOTE AK10A :
IF AK20  ≠ 0 CONTINUE WITH AK10A ;
IF AH43 = 1 (MARRIED), THEN DISPLAY “spouse's”;
ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY “partner's”;
ELSE GO TO AK22

‘QA17_K5’ [AK10A] -
What is your best estimate of all your (spouse's/partner's) earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

What is your best estimate of your {spouse’s/partner’s} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

据您估計，您的{配偶/伴侶}上個月從事所有的工作和業務的收入有多少？這是指在沒有扣除各項稅款和其它扣除額之前
的收入，請包括小時工資、薪資、小費和佣金。

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_______________ AMOUNT     [HR: 0-999995] 
   7 REFUSED
   8 DON'T KNOW

‘QA17_K6’ [AK22] -
What is your best estimate of your household’s total annual income from all sources before taxes in 2016?

您的住戶2016年來自所有來源的稅前全年總收入是多少？

[IF NEEDED, SAY: “Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income.”]

[IF NEEDED, SAY: “請包括工作、社會安全、退休收入、失業補助金、公共援助等收入。另外還請包括利息、紅利、業務、農場或租金淨收入以及任何其他資金收入。”]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

If = -7, -8, goto ‘PN_QA17_K8’

‘QA17_K7’ [AK22A] - PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?

根據我的記錄，您的住戶年收入是 (AMOUNT)。這是否正確？

If = 1, goto ‘PN_QA17_K14’
If = 2, Go back to ‘QA17_K6’
We don’t need to know exactly, but could you tell me if your household’s annual income from all sources before taxes is more than $20,000 per year or is it less?

我們不需要知道詳細的數字，但您可不可以在告訴我，你們住戶所有來源的稅前年收入是否超過還是不足 $20,000 美元？

- 01 MORE
- 02 EQUAL TO $20K OR LESS
- 07 REFUSED
- 08 DON’T KNOW

If = 1, goto ‘QA17_K10’
If = 07, 08, goto ‘PN_QA17_K14’

Is it …

- 01 $5,000 or less,
- 02 $5,001 to $10,000,
- 03 $10,001 to $15,000, or
- 04 $15,001 to $20,000?
- 07 REFUSED
- 08 DON’T KNOW

If = 1, 2, 3, 4, 07, 08, goto ‘PN_QA17_K14’

Is it more or less than $70,000 per year?

收入每年是否超過或是不足70,000美元？

- 01 MORE
- 02 EQUAL TO $70K OR LESS
- 07 REFUSED
- 08 DON’T KNOW

If = 1, goto ‘QA17_K12’
If = 07, 08, goto ‘PN_QA17_K14’

Is it …

- 01 $20,001 to $30,000,
- 02 $30,001 to $40,000,
- 03 $40,001 to $50,000,
- 04 $50,001 to $60,000, or
- 05 $60,001 to $70,000?
- 07 REFUSED
- 08 DON’T KNOW

If = 1, 2, 3, 4, 5, 07, 08, goto ‘PN_QA17_K14’
Is it more or less than $135,000 per year?

收入每年是否超過還是不足135,000美元？

- 01 MORE
- 02 EQUAL TO $135K OR LESS
- -7 REFUSED
- -8 DON'T KNOW

If = 1, -7, -8, goto ‘PN_QA17_K14’

‘QA17_K13’ [AK16] –

Is it ...

是......

- 01 $70,001 to $80,000,
- 02 $80,001 to $90,000,
- 03 $90,001 to $100,000, or
- 04 $100,001 to $135,000?
- -7 REFUSED
- -8 DON'T KNOW

‘PN_QA17_K14’ [PN_AK17] -
PROGRAMMING NOTE AK17 :
IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE AK18 ;
ELSE CONTINUE WITH AK17

‘QA17_K15’ [AK18] –

Including yourself, how many people living in your household are supported by your total household income?

包括您自己在內，住在您的住戶裡的多少人需要依靠您的住戶總收入生活？

_____ NUMBER OF PEOPLE [HR: 1-20]
- -7 REFUSED
- -8 DON'T KNOW

‘PN_QA17_K15’ [PN_AK18] -
PROGRAMMING NOTE AK18 :
AK18 MUST BE LESS THAN AK17 ;
IF R IS ONLY MEMBER OF HH, GO TO AK32 ;
IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) = AK17 GO TO PROGRAMMING NOTE AK32 ;
ELSE CONTINUE WITH AK18

‘QA17_K15’ [AK18] –

How many of these {INSERT NUMBER FROM AK17} people are children under the age of 18?

在這{INSERT NUMBER FROM QA15_K15}口人中，有多少是 18 歲以下的孩子？

_____ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]
- -7 REFUSED
- -8 DON'T KNOW
Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?

是否有住在美國、目前不在您們住戶中、但依靠您們的住戶收入生活的任何其他人？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'PN_AM1'

How many?

有幾個人？

_____ NUMBER OF PEOPLE [HR: 1-20]
- 7 REFUSED
- 8 DON'T KNOW

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food. I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months. The first statement is:

"The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."

第一句話是：「{我/我們} 購買的食物總是不夠，{我/我們} 沒有錢買更多的食物。」

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

這是經常符合、有時符合還是從不符合您和您的住戶在過去十二個月的情況？

- 01 OFTEN TRUE
- 02 SOMETIMES TRUE
- 03 NEVER TRUE
- 7 REFUSED
- 8 DON'T KNOW
"I/We) couldn't afford to eat balanced meals."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

第二句話是：「{我/我們}沒有錢吃均衡的食物。」

這是經常符合、有時符合還是從不符合您和您的住戶在過去十二個月的狀況？

- 01 OFTEN TRUE
- 02 SOMETIMES TRUE
- 03 NEVER TRUE
- 7 REFUSED
- 8 DON'T KNOW

Please tell me yes or no. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

請告訴我，在過去12個月中，您或住戶中的其他成年人有沒有因為沒有足夠的錢購買食物而減少食物量或減少用餐次數？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto 'AM4'
In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

在過去12個月中，您有沒有因為買不起足夠的食物而挨餓？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW
Section L: Public Program Participation

IF HOUSEHOLD INCOME IS ≤ 300% FPL (POVERTY = <6) OR [IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND (ARMCAL=1 OR ARINSURE ≠ 1)] CONTINUE WITH SECTION L;

ELSE GO TO AK23

‘QA17_L1’ [AL2] –
Are you now receiving TANF or CalWORKs?

您目前在領取TANF或CalWORKs嗎？

[IF NEEDED, SAY: “TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California’s old welfare entitlement program.”]

[IF NEEDED, SAY: “TANF 表示「貧困家庭臨時協助」；CalWORKs 表示「加州工作機會及對孩子的責任」。這兩項計劃用於替代加州原來的福利計劃 AFDC。”]

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON’T KNOW

‘PN_QA17_L2’ [PN_IAP1] -
PROGRAMMING NOTE IAP1:
IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH IAP1 ;
ELSE GO TO AL5 ;

‘QA17_L2’ [IAP1] –

s(TEEN) now receiving TANF or CalWORKs?

(TEEN) 目前是否在領取 TANF 或 CalWORKs?

[IF NEEDED, SAY: “TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California’s old welfare entitlement program.”]

[IF NEEDED, SAY: “TANF 表示「貧困家庭臨時協助」；CalWORKs 表示「加州工作機會及對孩子的責任」。這兩項計劃用於替代加州原來的福利計劃 AFDC。”]

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON’T KNOW

‘QA17_L3’ [AL5] –

Are you receiving Food Stamp benefits, also known as CalFresh?

您是否在領糧食券福利？糧食券也稱為 CalFresh。

[IF NEEDED, SAY: “You receive benefits through an EBT card.” EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card]

[IF NEEDED, SAY: 「您可能透過 EBT 卡獲得知惠。EBT 表示電子福利轉換卡。又稱作「黃金州優惠卡」。]
‘QA17_L4’ [IAP2] –

Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?

(TEEN) 是否在領糧食券福利？糧食券福利也稱為 CalFresh。

[IF NEEDED, SAY: "You may receive benefits as stamps or through an EBT card.” EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card]

[IF NEEDED, SAY: 「您通過EBT卡接受福利。EBT表示電子福利轉帳卡，也稱為「黃金州優惠卡」。」]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_L5’ [AL6] –

Are you receiving Supplemental Security Income (SSI)?

您是否在領取 SSI?

[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security”.]

[IF NEEDED, SAY: 「SSI 指安全補助收入，這和社會安全金不同。」]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

‘PN_QA17_L6’ [PN_AL7] -

PROGRAMMING NOTE AL7:
IF AA3  = 2 (FEMALE) AND [AD13  = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)]
CONTINUE WITH AL7;
ELSE GO TO PROGRAMMING NOTE AL9

‘QA17_L6’ [AL7] –

Are you on WIC?

您目前是否參加了 WIC?

[IF NEEDED, SAY: “WIC is the Supplemental Food Program for Women, Infants and children.”]

[IF NEEDED, SAY: 「WIC 指為婦女、嬰兒和兒童提供的補助食品計畫。」]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
PROGRAMMING NOTE AL9:

IF AL8  = 1 (LEGALLY BLIND) OR [(AAGE > 64 OR AA2A = 6) AND (POVERTY < 6 (HH INCOME ≤ 300% FPL) OR 8 (HH INCOME NOT KNOWN))], CONTINUE WITH AL9 ; ELSE SKIP TO PROGRAMMING NOTE AL15B ;

OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM AK17.

IF AK17  IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT). IF AK17 = 1 DISPLAY $2000; IF AK17 = 2 DISPLAY $3000; IF AK17 = 3 DISPLAY $3150; IF AK17 = 4 DISPLAY $3300; IF AK17 = 5 DISPLAY $3450; IF AK17 = 6 DISPLAY $3600; IF AK17 = 7 DISPLAY $3750; IF AK17 = 8 DISPLAY $3900; IF AK17 = 9 DISPLAY $4050; IF AK17 ≥ 10 DISPLAY $4200;

IF AH43  = 1 (MARRIED) OR AD60B  = 1 OR AD61B  = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “your family’s”; ELSE DISPLAY “your”

QA17_L7 [AL9] –

Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?

不把您擁有的任何房子或汽車計算在內，您認為{您/您家}的資產，也就是說{您/您家}所有的現金、儲蓄、投資的總值，有沒有超過{PROPERTY LIMIT}?

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1, goto ‘PN_QA17_L14’

QA17_L8 [AL34] –

About how much {do you/does your family} have in cash, savings, and investments?

{您/您家}所有的現金、儲蓄、投資的總值大約是多少？

[IF NEEDED, SAY: “Again, do not count the value of any house or car you may own.”]
[IF NEEDED, SAY: “再說一遍，請不要把您擁有的任何房子或車輛計算在內”]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____________ AMOUNT  [HR: 0-999995]
- 07 REFUSED
- 08 DON'T KNOW
‘QA17_L9’ [AL35] –

Besides your primary car or truck, {do you/does your family} own other cars or trucks?

除了您主要的車輛或貨車，〔您／您家〕還有其他的車輛或貨車嗎？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_L12’

‘QA17_L10’ [AL36] –

Are these cars or trucks only for personal use? Do not include cars or trucks used for transporting disabled persons or for business purposes.

這些車輛或貨車是只供個人使用的嗎？不包括用於殘疾人或商用的車或貨車。

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_L12’

‘PN_QA17_L11’ [PN_AL37] -

PROGRAMMING NOTE AL37 : 
IF AH43  = 1 (MARRIED) OR AD60B  = 1 OR AD61B  = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “your family”; ELSE DISPLAY “your”;

‘QA17_L11’ [AL37] –

Not counting what {you/your family} owe, what is your estimated value of these cars or trucks?

不包括(您／您家)欠的款，您對這些車輛或貨車估價多少？

[IF NEEDED: Do not include your primary cars or trucks.]
[IF NEEDED: Do not include cars or trucks used for transporting disabled persons or business purposes.]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____________ AMOUNT [HR: 0-999995]

- 7 REFUSED
- 8 DON'T KNOW
‘QA17_L12’ [AL38] –

(Do you/ Does your family) own a motorcycle, boat, trailer, or other non-commercial vehicle?

{您/您家}有摩托車, 船, 拖車或其他非商用交通工具嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_L14’

‘QA17_L13’ [AL39] –

Not counting what {you/your family} owe, what is your estimated value of the motorcycle, boat, trailer, or other non-commercial vehicle {you/your family} own?

不包括{您/您家}欠的款，您對這些摩托車, 船, 拖車或其他非商用交通工具估價多少？

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____________ AMOUNT [HR: 0-999995]

- 7 REFUSED
- 8 DON'T KNOW

‘QA17_L14’ [AL15B] –

Did {you or your spouse/you or your partner/you} receive any money last month for child support?

{您或您的配偶(您或您的伴侶/你們) 上個月有沒有收到任何子女扶養費？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_L16’
What was the (combined) total amount that you (and your spouse/and your partner) received from child support last month (for both you and your spouse/partner)?

{您或您的配偶/您或您的伴侶/你們}上個月收到的子女扶養費(合計)總額是多少？

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$______________ AMOUNT          [000001-999995]

-7 REFUSED
-8 DON'T KNOW

Did (you or your partner or both of you) pay any child support last month?

{您或您的配偶/您或您的伴侶/你們}上個月有沒有支付任何子女扶養費？

01 YES, RESPONDENT PAID
02 YES, SPOUSE/PARTNER PAID
03 YES, BOTH PAID
04 NO
-7 REFUSED
-8 DON'T KNOW

If = 4, -7, -8, goto ‘PN_QA17_L18’
‘PN_QA17_L17’ [PN_AL18] -
PROGRAMMING NOTE AL18 :
IF AH43  = 1 (MARRIED) AND AH44  = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
ELSE IF [AH43  = 2 (LIVING WITH PARTNER) OR AD60B  = 1 OR AD61B  = 1 (LEGAL SAME-SEX COUPLE)]
AND AH44  = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";
ELSE DISPLAY "you"

‘QA17_L17’ [AL18] –
What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in child support last month?

{您或您的配偶或你們兩人/您或您的伴侶或你們兩人} 上個月支付的子女扶養費總共是多少？

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

_________________ AMOUNT [000001-999995]
○ -7 REFUSED
○ -8 DON'T KNOW

‘PN_QA17_L18’ [PN_AL32] -
PROGRAMMING NOTE AL32 :
IF AH43  = 1 (MARRIED) AND AH44  = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";
ELSE IF [AH43  = 2 (LIVING WITH PARTNER) OR AD60B  = 1 OR AD61B  = 1 (LEGAL SAME-SEX COUPLE)]
AND AH44  = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
ELSE DISPLAY "you"

‘QA17_L18’ [AL32] - Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?

{您或您的配偶/您或您的伴侶/您}上個月是否領取任何工傷賠償付款？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_L20’
PROGRAMMING NOTE AL33:

IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY “combined” AND “and your spouse”;
ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)] AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY “combined” AND “and your partner”; ELSE CONTINUE WITHOUT DISPLAYS

‘QA17_L19’ [AL33] –

What was the (combined) total amount that you (and your spouse/and your partner) received from workers compensation last month?

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$______________ AMOUNT [000001-999995]

☐ -7 REFUSED
☐ -8 DON’T KNOW

PROGRAMMING NOTE AL18A:

IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH AL18A AND DISPLAY “you or your spouse”; ELSE IF AGE ≥ 65 AND AH44 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH AL18A AND DISPLAY “you or your partner”; ELSE IF AGE ≥ 65, THEN CONTINUE WITH AL18A AND DISPLAY “you”; ELSE GO TO PROGRAMMING NOTE AL19

‘QA17_L20’ [AL18A] –

Did (you or your spouse/you or your partner/you) receive any Social Security or Pension payments last month?

{您或您的配偶/您或您的伴侶/您} 上個月有沒有領取任何社會安全金 (Social Security) 或退休金？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON’T KNOW

If = 2, -7, -8, goto ‘PN_QA17_L22’
PROGRAMMING NOTE AL18B:

IF \[AGE > 50 \text{ OR } (AGE \text{ RANGE IS BETWEEN} 50 \text{ AND} 64)\] AND \(AH43 = 1\) (MARRIED) AND \(AH44 = 1\) (SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY "you or your spouse";
ELSE IF \(AGE \geq 65\) AND \(AH44 = 1\) (SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY "you or your partner";
ELSE IF \(AGE \geq 65\), DISPLAY "you";

QA17_L21 [AL18B] –

What was the total amount received last month from Social Security and Pensions (for both you and your spouse/partner)?

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

<table>
<thead>
<tr>
<th>AMOUNT</th>
<th>[000001-999995]</th>
</tr>
</thead>
<tbody>
<tr>
<td>-7 REFUSED</td>
<td></td>
</tr>
<tr>
<td>-8 DON'T KNOW</td>
<td></td>
</tr>
</tbody>
</table>

QA17_L22 [AL19] –

What is the one main reason why you are not enrolled in the Medi-Cal program?

01 PAPERWORK TOO DIFFICULT
02 DIDN'T KNOW IF ELIGIBLE
03 INCOME TOO HIGH, NOT ELIGIBLE
04 NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS
05 OTHER NOT ELIGIBLE
06 DON'T BELIEVE IN HEALTH INSURANCE
07 DON'T NEED IT BECAUSE HEALTHY
08 ALREADY HAVE INSURANCE
09 DIDN'T KNOW IT EXISTED
10 DON'T LIKE / WANT WELFARE
91 OTHER (SPECIFY: _____________)
-7 REFUSED
-8 DON'T KNOW
PROGRAMMING NOTE AL40:
IF ARMCAL = 1 (MEDI-CAL) OR AI33=1, AH134=1 OR AH135 =1 (HAD PRIOR MEDI-CAL COVERAGE),
CONTINUE WITH AL40;
ELSE GO TO PN AL49

‘QA17_L23’ [AL40] –
You previously said you had Medi-Cal. How long did you have Medi-Cal?
您之前提及您曾經有Medi-Cal，您擁有Medi-Cal的時間有多長？

‘AL40Y’ [AL40Y] - _____ YEARS
‘AL40M’ [AL40M] - _____ MONTHS
☐ -7 REFUSED
☐ -8 DON'T KNOW

PROGRAMMING NOTE AL41:
IF AL40 > 1 YEAR, THEN CONTINUE WITH AL41;
ELSE GO TO PN AL49

‘QA17_L24’ [AL41] –
Was your Medi-Cal renewed automatically in the past year (with no input or action needed on your part)?
您的加州醫療保健計劃有否在去年自動續期（您無需輸入資料或採取行動）？

☐ 01 YES
☐ 02 NO
☐ 03 DID NOT RENEW
☐ -7 REFUSED
☐ -8 DON'T KNOW
If = 1, 3, -7, -8, go to PN_AL49

‘QA17_L25’ [AL42] –
Did you need to provide additional information for your Medi-Cal renewal by phone, mail, fax, online, or in person?
您是否需要透過電話、郵件、傳真、網路或親身提供額外資訊以更新 Medi-Cal？

[CHECK ALL THAT APPLY]
☐ 01 PHONE
☐ 02 MAIL
☐ 03 FAX
☐ 04 ONLINE
☐ 05 IN PERSON
☐ 06 DIDN'T NEED TO PROVIDE INFORMATION
☐ 07 OTHER
☐ -7 REFUSED
☐ -8 DON'T KNOW
If AL42 = 6, -7, -8 goto AL44
What information was needed?

需要什麼資訊？

[CHECK ALL THAT APPLY]

- 01 INCOME INFORMATION
- 02 HOUSEHOLD INFORMATION
- 91 OTHER (SPECIFY: _____________)
- -7 REFUSED
- -8 DON'T KNOW

Did you have any problems when renewing your Medi-Cal?

加州醫療健保計劃續期時，您有否遇到任何事宜或問題？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

Did you temporarily lose coverage for 1 to 2 months, lost coverage completely, or had to reapply?

您曾否暫時失去受保1至2個月，失去受保，或要重新申請？

- 1 LOST COVERAGE FOR 1-2 MONTHS
- 2 LOST COVERAGE
- 3 HAD TO REAPPLY
- 4 REFUSED
- 5 DON'T KNOW

Prior to having Medi-Cal coverage, what health coverage did you have?

獲加州醫療健保計劃保障前，您曾有甚麼健康保險？

- 01 UNINSURED
- 02 EMPLOYER-BASED
- 03 PRIVATE
- 04 COVERED CALIFORNIA
- 05 OTHER
- -7 REFUSED
- -8 DON'T KNOW
PROGRAMMING NOTE AL47:
IF AL46 = 4, THEN CONTINUE WITH AL47;
ELSE GO TO PN AL49

‘QA17_L30’ [AL47] –
Did you have problem in changing to Medi-Cal?
轉用加州醫療保健計劃時，您有遇到問題嗎？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_L32’

‘QA17_L31’ [AL48] –
What kind of problem?
遇到哪類問題？

☐ 01 GAP IN HEALTH COVERAGE
☐ 02 FILED AN APPEAL AS ELIGIBILITY DECISIONS WAS INCORRECT
☐ -7 REFUSED
☐ -8 DON'T KNOW

PROGRAMMING NOTE AL49:
IF AL7 =1 (YES) GO TO AL73
IF HH INCOME <=300% FPL AND (HHS WITH FEMALES <=45 YEARS OLD OR CHILDREN <= 10 YEARS OLD OR AD13 =1 OR AJ169 =4 (AR FEMALE IS PREGNANT), THEN CONTINUE WITH AL49;
ELSE GO TO AK23;

‘QA17_L32’ [AL49] –
During the past 12 months, did you or any member of your household receive benefits from the WIC program, that is, the Special Supplemental Nutrition Program for Women, Infants and Children?
過去 12 個月內，您或任何家庭成員曾否獲取婦嬰幼兒特殊營養補充計劃（WIC）的輔助？

☐ 01 YES
☐ 02 NO
☐ -7 REFUSED
☐ -8 DON'T KNOW

If = 1, goto ‘QA17_L56’
If = -7, -8, goto AK23
Have you or any member of your household received benefits from the WIC program in the past 5 years?

過去 5 年內，您或任何家庭成員曾否獲取婦幼兒特殊營養補充計劃的輔助？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2 goto ‘QA17_L45’
If = -7, -8 goto AK23

‘QA17_L34’ [AL51] –

Why did you leave WIC? Did you leave because you were no longer eligible?

您為何退出婦幼兒特殊營養補充計劃？因不再符合資格而退出計劃嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 1 goto PN AL73

‘QA17_L35’ [AL52] –

Did you leave because you only wanted baby formula?

因只想要嬰幼兒配方奶粉而退出計劃嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L36’ [AL53] –

Did you leave because shopping for WIC foods was a hassle?

因購買婦幼兒特殊營養補充計劃食物很麻煩而退出計劃嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L37’ [AL54] –

[Did you leave because]….you had a bad experience at WIC?

因參與婦幼兒特殊營養補充計劃的體驗欠佳，而退出計劃嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
"QA17_L38" [AL55] –

[Did you leave because]....you didn’t value the information received?

因不覺得所獲資料有用〔而退出計劃嗎〕？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

"QA17_L39" [AL56] –

[Did you leave because]....you thought you were taking the place of someone who needed WIC more?

因覺得有人比自己更需要婦幼兒特殊營養補充計劃輔助〔而退出計劃嗎〕？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

"QA17_L40" [AL57] –

[Did you leave because]....the amount of food benefits received were not worth your time and effort?

因覺得不值得為所獲的食物輔助而花費時間心力〔而退出計劃嗎〕？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

"QA17_L41" [AL58] –

[Did you leave because]....you would rather not rely on a government program?

因不想依靠政府項目〔而退出計劃嗎〕？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

"QA17_L42" [AL59] –

[Did you leave because]....of transportation issues?

因交通問題〔而退出計劃嗎〕？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW
Did you leave because of any other reasons?

基於任何其他原因而退出計劃嗎？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON’T KNOW

If = 2, -7, -8, goto ‘PN AL73’

‘QA17_L44’ [AL61] –

What were those reasons?

那是甚麼原因呢？

- 01 OTHER (SPECIFY: ________________)
- 07 REFUSED
- 08 DON’T KNOW

If = 1, -7, -8 goto PN AL73

‘QA17_L45’ [AL62] –

Why didn’t you enroll yourself or any member of your household on WIC? Was it because you didn’t know about WIC?

為什麼您或任何家庭成員沒有參與婦幼兒特殊營養補充計劃？那是因不知道有婦幼兒特殊營養補充計劃嗎？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON’T KNOW

If = 1, -7, -8 goto AK23

‘QA17_L46’ [AL63] –

Was it because you didn’t qualify?

那是因自己不符合資格嗎？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON’T KNOW

If = 1, 3, 4, goto ‘QA17_M1’
Was it...because you didn’t think you needed WIC?

Was it...because you didn’t value what WIC offered?

Was it...because it was too difficult to apply?

Was it...because of language issues?

Was it...because you didn’t trust WIC?
Was it...because you heard negative things about WIC?

[那是]......因聽過關於婦嬰幼兒特殊營養補充計劃的負面事情嗎？

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

Was it...because of transportation issues?

[那是]......基於交通問題嗎？

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

Did you not enroll because of any other reasons?

您是因為任何其他原因而沒有參與計劃嗎？

01 YES
02 NO
-7 REFUSED
-8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_M1’

What were those reasons?

那是甚麼原因呢？

01 OTHER (SPECIFY:___________________)
-7 REFUSED
-8 DON'T KNOW

If = 1, -7, -8 goto ‘QA17_M1’
**PROGRAM NOTE AL73:**

- IF AL7 = 1 OR AL50 = 1 DISPLAY "You previously mentioned you were on WIC"
- ELSE IF AL49 = 1, GO TO AL73
- ELSE IF AL49=2 AND AL50 =2 SKIP TO AK23

**‘QA17_L56’ [AL73]**

**INTRO:**

You previously mentioned you were on WIC. What benefits have you liked getting from the WIC program? Did you like WIC checks for food?

您提及過自己曾參與婦嬰幼兒特殊營養補充計劃。您喜歡哪些從婦嬰幼兒特殊營養補充計劃得到的輔助？您喜歡婦幼幼兒特殊營養補充計劃的食物支票嗎？

- **01** YES
- **02** NO
- **03** NOT APPLICABLE
- **-7** REFUSED
- **-8** DONT KNOW

**‘QA17_L57’ [AL74]**

Did you like WIC checks for baby formula?

您喜歡婦幼幼兒特殊營養補充計劃的嬰幼兒配方奶粉支票嗎？

- **01** YES
- **02** NO
- **03** NOT APPLICABLE
- **-7** REFUSED
- **-8** DONT KNOW

**‘QA17_L58’ [AL75]**

[Did you like]... education for having healthy pregnancy?

〔您喜歡〕......健康懷孕教育嗎？

- **01** YES
- **02** NO
- **03** NOT APPLICABLE
- **-7** REFUSED
- **-8** DONT KNOW

**‘QA17_L59’ [AL76]**

[Did you like]... individual counseling?

〔您喜歡〕......個別輔導嗎？

- **01** YES
- **02** NO
- **03** NOT APPLICABLE
- **-7** REFUSED
- **-8** DONT KNOW
‘QA17_L60’ [AL77] –

[Did you like]… education on improving the health and nutrition of my family?

〔您喜歡〕……關於改善家人健康與營養狀況的教導嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L61’ [AL78] –

[Did you like]… support for breastfeeding?

〔您喜歡〕……哺乳支援嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L62’ [AL79] –

[Did you like]… help getting a breast pump?

〔您喜歡〕……受助獲取奶泵嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L63’ [AL80] –

[Did you like]… information on how to get health care services?

〔您喜歡〕……介紹如何獲享醫護服務的資訊嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- -7 REFUSED
- -8 DON'T KNOW

‘QA17_L64’ [AL81] –

[Did you like]… information on community programs?

〔您喜歡〕……關於社區計劃的資訊嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- -7 REFUSED
- -8 DON'T KNOW
[Did you like]... one-on-one education?

[您喜歡]......單對單教導嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- 07 REFUSED
- 08 DON'T KNOW

[Did you like]... group classes?

[您喜歡]......分組上課嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- 07 REFUSED
- 08 DON'T KNOW

Did you like WIC benefits for any other reasons?

基於任何其他原因，而喜歡婦嬰幼兒特殊營養補充計劃的輔助嗎？

- 01 YES
- 02 NO
- 03 NOT APPLICABLE
- 07 REFUSED
- 08 DON'T KNOW

If = 2,7,8 go to AK23

What were those reasons?

那是甚麼原因呢？

- 07 REFUSED
- 08 DON'T KNOW
Section M: Housing and Social Cohesion

‘QA17_M1’ [AK23] –
These next questions are about your housing and neighborhood.

以下是有關您的住宅及所在社區的問題。

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?

您是住在獨立屋、雙連屋、三單元或多單元建築物還是活動房屋中？

[IF NEEDED, SAY: “A duplex is a building with 2 units.”]
[IF NEEDED, SAY: “雙連屋指有兩個單元的建築物。”]

- 01 HOUSE
- 02 DUPLEX
- 03 BUILDING WITH 3 OR MORE UNITS
- 04 MOBILE HOME
- 07 REFUSED
- 08 DON'T KNOW

‘QA17_M2’ [AK25] -
Do you own or rent your home?

您是自己擁有住宅還是租用住宅？

- 01 OWN
- 02 RENT
- 03 OTHER ARRANGEMENT
- 07 REFUSED
- 08 DON'T KNOW

‘PN_QA17_M3’ [PN_AM37] - PN_AM37
If AAGE >= 65 AND AK25 = 1, Only ask ‘QA17_M3’

‘QA17_M3’ [AM37] –
Are you currently paying off a mortgage or loan on this home?

您目前正償還家居按揭或貸款嗎？

[IF SPOUSE/PARTNER IS PAYING, CODE AS "YES"]

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW
About how long have you lived at your current address?
您在目前的地址已居住了多長時間？

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

'AM14M' [AM14M] - ____________ MONTHS [HR: 1 - AAGEx12MONTHS]

'AM14Y' [AM14Y] - ____________ YEARS [HR: 1 - AAGE]

- 7 REFUSED
- 8 DON'T KNOW

‘PN_QA17_M5’ [PN_AM15] -
PROGRAMMING NOTE AM15 :
IF AM14 ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE AM19 ;
ELSE CONTINUE WITH AM15

About how long have you lived in your current neighborhood?
你在目前所在的鄰里社區大約已經居住多長時間？

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

'AM15M' [AM15M] - ____________ MONTHS [HR: 1 - AAGEx12MONTHS]

'AM15Y' [AM15Y] - ____________ YEARS [HR: 1 - AAGE]

- 7 REFUSED
- 8 DON'T KNOW

‘QA17_M6’ [AM38] –
The last time you moved, what was your main reason for moving?
你最後一次搬家的主要原因是什么？

- 01 CHANGE IN MARITAL/RELATIONSHIP STATUS
- 02 TO ESTABLISH OWN HOUSEHOLD
- 03 FOR CHILD’S EDUCATION
- 04 TO ATTEND OR LEAVE COLLEGE
- 05 WORK RELATED
- 06 COULDN’T AFFORD MORTGAGE/RENT
- 07 OTHER HOUSING RELATED
- 08 BETTER NEIGHBORHOOD/LESS CRIME
- 91 OTHER (SPECIFY:_________)

- 7 REFUSED
- 8 DON'T KNOW
Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

People in my neighborhood are willing to help each other.

Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

People in this neighborhood generally do NOT get along with each other.

Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

People in this neighborhood can be trusted.
You can count on adults in this neighborhood to watch out that children are safe and don’t get in trouble.

您可以依靠本社區的成年人注意孩子們的安全，避免孩子惹麻煩。

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]
[IF NEEDED, SAY: 您是極為贊成、贊成、不贊成還是極不贊成？]
[“DO NOT PROBE A “DON'T KNOW” RESPONSE.”]

- 01 STRONGLY AGREE
- 02 AGREE
- 03 DISAGREE
- 04 STRONGLY DISAGREE
- 05 NOT APPLICABLE
- -7 REFUSED
- -8 DON’T KNOW

Do you feel safe in your neighborhood...

您在居住區附近感到安全……

- 01 All of the time,
- 02 Most of the time,
- 03 Some of the time, or
- 04 None of the time
- -7 REFUSED
- -8 DON’T KNOW

In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

在過去十二個月內，您是否曾經做任何義工或不領取報酬的社區服務工作？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON’T KNOW
In the past 12 months, have you donated money to a charity or non-profit organization?

在過去十二個月內，您是否向慈善組織或非營利組織捐過款？

- 01 YES
- 02 NO
- 07 REFUSED
- 08 DON'T KNOW

In the next 12 months, how likely are you to donate money to a charity or non-profit organization? Are you...

下來的12月裡，您向慈善組織或非營利組織捐款的可能性為多大？

- 01 Very likely
- 02 Somewhat likely
- 03 A little likely, or
- 04 Not likely
- 07 REFUSED
- 08 DON'T KNOW
Section P: Voter Engagement

'PN_QA17_S1' [PN_AP70] - PN_AP70

PROGRAMMING NOTE AP70:
IF AH39=1 (CITIZEN) OR [IF AH33 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS)], THEN CONTINUE WITH AP70;
ELSE GO TO AF86;

'QA17_S1' [AP70] –

Are you currently registered to vote?

您目前是否登记选民？

○ 01 YES, REGISTERED
○ 02 NOT REGISTERED
○ 03 NOT SURE IF REGISTERED
○ 04 NOT ELIGIBLE TO VOTE/REGISTER
○ -7 REFUSED
○ -8 DON'T KNOW

If = 1, -7, -8, goto 'QA17_P3'
If = 4, goto 'QA17_S1'

'QA17_P2' [AP71] –

What is the main reason why you are not registered to vote?

您不是登记选民的主要原因是什么？

○ 01 TOO BUSY
○ 02 VOTING DOESN'T MAKE A DIFFERENCE
○ 03 I DON'T KNOW HOW
○ 04 I DON'T KNOW WHERE TO GO TO REGISTER
○ 05 LANGUAGE BARRIER
○ 06 I'M NOT ELIGIBLE
○ 07 I DON'T KNOW ENOUGH ABOUT THE ISSUES
○ 08 I DON'T KNOW ENOUGH ABOUT THE CANDIDATES
○ 09 I DON'T LIKE ANY OF THE CANDIDATES
○ 91 OTHER (SPECIFY: ________________)
○ -7 REFUSED
○ -8 DON'T KNOW

If = 6, goto 'QA17_S1'

'QA17_P3' [AP72] –

Did you vote in the last general elections in November 2016?

您曾否在 2016 年 11 月的上次普选投票？

○ 01 YES
○ 02 NO
○ -7 REFUSED
○ -8 DON'T KNOW
How often do you vote in presidential elections?

您多常在總統選舉中投票？

- 01 Always,
- 02 Sometimes, or
- 03 Never?
- -7 REFUSED
- -8 DON'T KNOW

How often do you vote in state elections, such as for Governor or state proposition?

您多常在州選舉（例如州長或州提案）中投票？

- 01 Always,
- 02 Sometimes, or
- 03 Never?
- -7 REFUSED
- -8 DON'T KNOW

How often do you vote in local elections, such as for Mayor or school board?

您多常在本地選舉（例如市長或教育委員會）中投票？

- 01 Always,
- 02 Sometimes, or
- 03 Never?
- -7 REFUSED
- -8 DON'T KNOW
'QA17_S1' [AF86] –

The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don’t have to answer it.

下一節是有關自我傷害的想法。再說一遍，如果提出的任何問題使您感到不安，您不需要回答。

Have you ever seriously thought about committing suicide?

您是否曾經認真地考慮過自殺？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_N1’

'QA17_S2' [AF87] –

Have you seriously thought about committing suicide at any time in the past 12 months?

您在過去十二個月內的任何時間是否認真地考慮過自殺？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘QA17_S4’

'QA17_S3' [AF91] –

Have you seriously thought about committing suicide at any time in the past 2 months?

您在過去兩個月的任何時間是否曾經認真地考慮過自殺的問題？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'QA17_S4' [AF88] –

Have you ever attempted suicide?

您是否曾嘗試過自殺？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW
Have you attempted suicide at any time in the past 12 months?

您在過去十二個月內的任何時間是否曾經嘗試過自殺？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

'SUICIDE RESOURCE:' [SUICIDE RESOURCE:]

SUICIDE RESOURCE:
We have a number you can call if you’d like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.] The number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.] The number is 1-800-273-TALK (8255).

Or, you can visit a website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is www.suicidepreventionlifeline.org. [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

'POST_SUIUCIDE RESOURCE' [POST_SUIUCIDE RESOURCE] -
POST-NOTE FOR SUICIDE RESOURCE:
 IF AF87 = (2, -7, -8) AND AF88 = (2, -7, -8) THEN SKIP TO PN AH42  (NEXT SECTION); ELSE CONTINUE

'QA17_S6' [AF90] –

Would you like to discuss your thoughts with this person or would you like to continue with the survey?

您是否願意與這個人討論您的想法？

- 01 DISCUSS THOUGHTS WITH PERSON
- 02 CONTINUE WITH SURVEY
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_N1’
To be sure we are covering the entire state, what county do you live in?

为了确保我们把全州都包括在研究范围内，您住在哪个县？

```markdown
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<td>44</td>
</tr>
<tr>
<td>SHASTA</td>
<td>45</td>
</tr>
</tbody>
</table>
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Your phone number was randomly selected for this study by a computer. We were able to match an address to your phone number to send a letter to your home explaining the purpose of this study. To help us better understand the environment you live in and how it may affect your health, we would like to confirm your address. This information will be kept confidential and will be destroyed after the entire survey has been completed.

Do you now live at {R’s ADDRESS AND STREET}? 

If = 1, goto ‘QA17_N6’
What is your zip code?

_____ ZIP CODE

- 7 REFUSED
- 8 DON'T KNOW

Can you tell me just the name of the street you live on?

- 7 REFUSED
- 8 DON'T KNOW
And what is the name of the street down the corner from you that crosses your street?

在您所住的街道转角处与您所住的街道交叉的街道名称是什么？

- 7 REFUSED
- 8 DON'T KNOW

I'm won't ask you for the number, but do you have a working cell phone?

我不會問您的手機號碼，但是，您是否有一個可以使用的手機？

[CODE “SHARES CELL PHONE” ONLY IF VOLUNTEERED]  
- 01 YES
- 02 NO
- 03 SHARES CELL PHONE
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_N9’

Is there a regular or landline telephone in your household?

您的家中是否有一部普通的或有線固定電話？

- 01 YES
- 02 NO
- 7 REFUSED
- 8 DON'T KNOW

If = 2, -7, -8, goto ‘PN_QA17_N13’
Is that telephone for personal use or business use only?

這部電話是僅限用於個人用途還是業務用途？

- 01 PERSONAL USE ONLY
- 02 BUSINESS USE ONLY
- 03 BOTH PERSONAL USE AND BUSINESS USE
- 07 REFUSED
- 08 DON'T KNOW

If = 2, goto 'PN_QA17_N13'

‘QA17_N11’ [AN11] –

How many telephone lines do you have for personal use?

您目前有多少條個人使用的電話線路？

_______ REGULAR OR LANDLINE NUMBERS

- 07 REFUSED
- 08 DON'T KNOW

‘PN_34’ [PN_34] -
PROGRAMMING NOTE AM34 :
IF AM33  = 1 (YES) OR 3 (SHARES CELL PHONE), OR AN7  = 1 (HAS A LANDLINE FOR PERSONAL USE) OR 3 (LANDLINE IS FOR PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH AM34 ;
ELSE SKIP TO PROGRAMMING AM10

‘QA17_N12’ [AM34] –

Of all the telephone calls that you receive, are...

在您接聽的所有電話中，是......

- 01 All or almost all calls received on a cell phone,
- 02 Some on cell phones & some on regular phones, or
- 03 Very few or none on cell phones
- 07 REFUSED
- 08 DON'T KNOW

‘PN_QA17_N13’ [PN_AM10] -
PROGRAMMING NOTE AM10 :
IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;
ELSE CONTINUE WITH AM10

‘QA17_N13’ [AM10] - Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?

最後，我想問一下您是否願意今後參加本項研究的一次後續調查？

- 01 YES
- 02 MAYBE/PROBABLY YES
- 03 DEFINITELY NOT
- 07 REFUSED
- 08 DON'T KNOW
'PN_SR2' [PN_SR2] -
PROGRAMMING NOTE SUICIDE RESOURCE 2:
IF AF90 = (2,-7,-8),
AND [AF91 = 1 OR (AF91 = 2, -7, -8 AND AF89 =1)], THEN CONTINUE WITH SUICIDE RESOURCE 2;
ELSE GO TO PROGRAMMING NOTE CLOSE1

'SR2' [SR2] -
SUICIDE RESOURCE 2:
As I mentioned earlier, if you’d like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.] The toll-free number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

Or you can visit their website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is www.suicidepreventionlifeline.org [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

'QA17_N14' [AN8] –
Would you like to speak with someone now?

您現在希望與人交談嗎？

- 01 YES
- 02 NO
- -7 REFUSED
- -8 DON'T KNOW

If = 2, -7, -8, goto 'CLOSE1'

'PN_CLOSE1&2' [PN_CLOSE1&2] -
PROGRAMMING NOTE CLOSE1 AND CLOSE2:
IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;
ELSE CONTINUE WITH CLOSE1

'CLOSE1' [CLOSE1] - Let me check to see if there is anyone else.
If true, goto 'HH_SELECT'

我們是不是還需要和任何人交談。

'CLOSE2' [CLOSE2] –
Thank you. I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. Ninez Ponce, the Principal Investigator. Dr. Ponce can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.

謝謝您的時間與合作！您幫助我們進行了一項非常重要的健康調查。如果您有任何疑問，請與研究負責人 Ninez Ponce 博士聯繫。他的免費電話號碼是 1-866-275-2447。再次感謝，再見。