CHIS 2011-2012
Adult Questionnaire
Version 10.3
March 24, 2014

Adult Respondents Age 18 and Older

Collaborating Agencies:
UCLA Center for Health Policy Research
California Department of Health Care Services
California Department of Public Health

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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 2011-2012 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.
Section A – Demographic Information, Part I

PROGRAMMING NOTE QA11_A1:
SET AADATE = CURRENT DATE (YYYYMMDD)

QA11_A1  What is your date of birth?

你的出生日期是？

AA1MON

MONTH _____  [RANGE: 1-12]
1. JANUARY    7. JULY
2. FEBRUARY   8. AUGUST
3. MARCH      9. SEPTEMBER
4. APRIL      10. OCTOBER
5. MAY        11. NOVEMBER
6. JUNE       12. DECEMBER

AA1DAY

DAY _____  [RANGE: 1-31]

AA1YR

YEAR _____  [RANGE: 1898-1994]

REFUSED..........................................................-7
DON'T KNOW.....................................................-8

PROGRAMMING NOTE QA11_A2:
IF QA11_A1 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11_A2;
ELSE GO TO QA11_A5

QA11_A2  What month and year were you born?

您在哪一月及哪一年出生？

AA1AMON

MONTH _____  [RANGE: 1-12]
1. JANUARY    7. JULY
2. FEBRUARY   8. AUGUST
3. MARCH      9. SEPTEMBER
4. APRIL      10. OCTOBER
5. MAY        11. NOVEMBER
6. JUNE       12. DECEMBER

AA1AYR

YEAR _____  [RANGE: 1898-1994]

REFUSED..........................................................-7
DON'T KNOW.....................................................-8
PROGRAMMING NOTE QA11_A3:
IF QA11_A2 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11_A3;
ELSE GO TO QA11_A5

QA11_A3  What is your age, please?

請告訴我您的年齡。

AA2

______YEARS OF AGE  [RANGE: 0-120]  [GO TO QA11_A5]

REFUSED.............................................-7
DON'T KNOW......................................-8

PROGRAMMING NOTE QA11_A4:
IF QA11_A3 = -7 OR -8 (REF/DK), THEN CONTINUE WITH QA11_A4;
ELSE GO TO QA11_A5

QA11_A4  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?

您的年齡是在 18 到 29 歲、30 到 39 歲、40 到 44 歲、45 到 49 歲、50 到 64 歲之間，還是在 65 歲或 65 歲以上

AA2A

BETWEEN 18 AND 29......................................1
BETWEEN 30 AND 39....................................2
BETWEEN 40 AND 44....................................3
BETWEEN 45 AND 49....................................4
BETWEEN 50 AND 64....................................5
65 OR OLDER .............................................6
REFUSED..................................................-7
DON'T KNOW.........................................-8

POST NOTE QA11_A4: AAGE ENUM.AGE
CALCULATE VALUE OF AAGE BASED ON QA11_A1, QA11_A2, OR QA11_A3 TO USE IN ALL AGE-RELATED QUESTIONS;
IF QA11_A1, QA11_A2, OR QA11_A3 = -7 OR -8 (REF/DK), THEN USE QA11_A4;
ELSE USE ENUM.AGE

QA11_A5  Are you male or female?

您是男性還是女性？

AA3

MALE ......................................................1
FEMALE ...............................................2
REFUSED..............................................-7
QA11_A6  Are you Latino or Hispanic?

您是拉丁裔或西裔嗎？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>.................................................................1</td>
</tr>
<tr>
<td>NO</td>
<td>.................................................................2 [GO TO PN QA11_A8]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.............................................................-7 [GO TO PN QA11_A8]</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.............................................................-8 [GO TO PN QA11_A8]</td>
</tr>
</tbody>
</table>

QA11_A7  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國籍是哪里？例如，墨西哥人、薩爾瓦多人、古巴人、洪都拉斯人—如果有一個以上原國籍，請將所有的原國籍告訴我。

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[IF NECESSARY, GIVE MORE EXAMPLES]</td>
<td></td>
</tr>
<tr>
<td>[CODE ALL THAT APPLY]</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>MEXICAN/MEXICAN AMERICAN/CHICANO</th>
<th>........1</th>
</tr>
</thead>
<tbody>
<tr>
<td>SALVADORAN</td>
<td>........4</td>
</tr>
<tr>
<td>GUATEMALAN</td>
<td>........5</td>
</tr>
<tr>
<td>COSTA RICAN</td>
<td>........6</td>
</tr>
<tr>
<td>HONDURAN</td>
<td>........7</td>
</tr>
<tr>
<td>NICARAGUAN</td>
<td>........8</td>
</tr>
<tr>
<td>PANAMANIAN</td>
<td>........9</td>
</tr>
<tr>
<td>PUERTO RICAN</td>
<td>..........10</td>
</tr>
<tr>
<td>CUBAN</td>
<td>..........11</td>
</tr>
<tr>
<td>SPANISH-AMERICAN (FROM SPAIN)</td>
<td>..........12</td>
</tr>
<tr>
<td>OTHER LATINO (SPECIFY: ____________)</td>
<td>..........91</td>
</tr>
<tr>
<td>REFUSED</td>
<td>..........-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>..........-8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_A8:
IF QA11_A6 = 1 (YES, LATINO/HISPANIC), THEN DISPLAY “You said you are Latino or Hispanic. Also,”
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR QA11_A8, THEN CONTINUE
WITH PROGRAMMING NOTE QA11_A9;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES

QA11_A8  {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?

此外，請告訴我您會用以下哪一項或哪幾項來描述您自己。您認為自己是夏威夷原住民、其他太平
洋群島人、美洲印地安人、阿拉斯加原住民、亞洲人、黑人、非裔美國人還是白人？

AA5A

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

<table>
<thead>
<tr>
<th>Race</th>
<th>Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHITE</td>
<td>1</td>
<td>[GO TO PN QA11_A16]</td>
</tr>
<tr>
<td>BLACK OR AFRICAN AMERICAN</td>
<td>2</td>
<td>[GO TO PN QA11_A16]</td>
</tr>
<tr>
<td>ASIAN</td>
<td>3</td>
<td>[GO TO PN QA11_A12]</td>
</tr>
<tr>
<td>AMERICAN INDIAN OR ALASKA NATIVE</td>
<td>4</td>
<td>[GO TO PN QA11_A9]</td>
</tr>
<tr>
<td>OTHER PACIFIC ISLANDER</td>
<td>5</td>
<td>[GO TO PN QA11_A13]</td>
</tr>
<tr>
<td>NATIVE HAWAIIAN</td>
<td>6</td>
<td>[GO TO PN QA11_A16]</td>
</tr>
<tr>
<td>OTHER (SPECIFY: ____________)</td>
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<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_A9:
IF QA11_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), THEN CONTINUE WITH QA11_A9;
ELSE GO TO PROGRAMMING NOTE QA11_A12

QA11_A9

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。

AA5B

[CODE ALL THAT APPLY]

APACHE ..............................................................1
BLACKFOOT/BLACKFEET ........................................2
CHEROKEE .............................................................3
CHOCTAW ..............................................................4
MEXICAN AMERICAN INDIAN .................................5
NAVAJO .................................................................6
POMO ........................................................................7
PUEBLO .....................................................................8
SIOUX .........................................................................9
YAQUI .........................................................................10
OTHER TRIBE (SPECIFY: ____________) ........... 91
REFUSED ......................................................................7
DON'T KNOW .......................................................... 8

QA11_A10

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？

AA5C

YES ..............................................................................1
NO ...............................................................................2
REFUSED ......................................................................7
DON'T KNOW .......................................................... 8
**Table:** Which tribe are you enrolled in?

<table>
<thead>
<tr>
<th>Tribe</th>
<th>Location</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>APACHE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mescalero Apache, NM</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Apache (Not Specified)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Other Apache [Ask for spelling] (Specify: _______)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>BLACKFEET</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blackfoot/Blackfeet</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Cherokee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Western Cherokee</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Cherokee (Not Specified)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Other Cherokee [Ask for spelling] (Specify: _______)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>CHEROKEE</strong></td>
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<tr>
<td>Cherokee</td>
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<tr>
<td>Western Cherokee</td>
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<tr>
<td>Cherokee (Not Specified)</td>
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<td></td>
</tr>
<tr>
<td>Other Cherokee [Ask for spelling] (Specify: _______)</td>
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<tr>
<td><strong>CHOCRAW</strong></td>
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<tr>
<td>Choctaw Okahoma</td>
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<td></td>
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<tr>
<td>Choctaw (Not Specified)</td>
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<tr>
<td>Other Choctaw [Ask for spelling] (Specify: _______)</td>
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<tr>
<td><strong>NAVAJO</strong></td>
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<td>Navajo (Not Specified)</td>
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</tr>
<tr>
<td>Pomo</td>
<td>12</td>
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<tr>
<td>Hopland Band, Hopland Rancheria</td>
<td>13</td>
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</tr>
<tr>
<td>Pomo (Not Specified)</td>
<td>14</td>
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<tr>
<td>Other Pomo [Ask for spelling] (Specify: _______)</td>
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</tr>
<tr>
<td><strong>PUEBLO</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hopi</td>
<td>16</td>
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</tr>
<tr>
<td>Ysleta Del Sur Pueblo of Texas</td>
<td>17</td>
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<tr>
<td>Pueblo (Not Specified)</td>
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<td>Other Pueblo [Ask for spelling] (Specify: _______)</td>
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</tr>
<tr>
<td><strong>SIOUX</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oglala/Pine Ridge Sioux</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Sioux (Not Specified)</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>Other Sioux [Ask for spelling] (Specify: _______)</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td><strong>YAQUI</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pascua Yaqui Tribe of Arizona</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>Yaqui (Not Specified)</td>
<td>24</td>
<td></td>
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<tr>
<td>Other Yaqui [Ask for spelling] (Specify: _______)</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td><strong>OTHER</strong></td>
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<tr>
<td>Other [Ask for spelling] (Specify: _______)</td>
<td>91</td>
<td></td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Don't Know</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_A12:
IF QA11_A8 = 3 (ASIAN), THEN CONTINUE WITH QA11_A12;
ELSE GO TO PROGRAMMING NOTE QA11_A13

QA11_A12 You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, or 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？如果您有一種以上族裔的血統，請全部告訴我。

CODE ALL THAT APPLY

BANGLADESHI ................................................. 1
BURMESE .................................................. 2
CAMBODIAN ................................................ 3
CHINESE .................................................... 4
FILIPINO ..................................................... 5
HMONG .......................................................... 6
INDIAN (INDIA) ................................................. 7
INDONESIAN .................................................. 8
JAPANESE ..................................................... 9
KOREAN ......................................................... 10
LAOTIAN ....................................................... 11
MALAYSIAN ................................................... 12
PAKISTANI ..................................................... 13
SRI LANKAN .................................................. 14
TAIWANESE ................................................... 15
THAI .............................................................. 16
VIETNAMESE .................................................. 17
OTHER ASIAN (SPECIFY: ____________)............. 91
REFUSED ....................................................... 7
DON'T KNOW .................................................. 8

PROGRAMMING NOTE QA11_A13:
IF QA11_A8 = 5 (OTHER PACIFIC ISLANDER), THEN CONTINUE WITH QA11_A13;
ELSE GO TO PROGRAMMING NOTE QA11_A14

QA11_A13 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.

您選擇了其他太平洋島嶼人。您屬於哪一個具體族裔？例如 薩摩亞人、湯加人或關島人。如果您有一種以上族裔的血統，請全部告訴我。

CODE ALL THAT APPLY

SAMOAN/AMERICAN SAMOAN ......................... 1
GUAMANIAN .................................................. 2
TONGAN ........................................................ 3
FIJIAN .......................................................... 4
OTHER PACIFIC ISLANDER (SPECIFY: ________) 91
REFUSED ....................................................... 7
DON'T KNOW .................................................. 8
PROGRAMMING NOTE QA11_A14:
IF QA11_A6 = 1 (LATINO) AND [QA11_A8 = 6 (NATIVE HAWAIIAN) OR QA11_A8 = 5 (OTHER PACIFIC ISLANDER) OR QA11_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA11_A8 = 3 (ASIAN) OR QA11_A8 = 2 (BLACK/AFRICAN AMERICAN) OR QA11_A8 = 1 (WHITE) OR QA11_A8 = 91 (OTHER)], THEN CONTINUE WITH QA11_A14;
ELSE IF THERE WERE MULTIPLE RESPONSES TO QA11_A8, QA11_A12, OR QA11_A13 [NOT COUNTING -7 OR -8 (REF/DK)], THEN CONTINUE WITH QA11_A14;
ELSE GO TO QA11_A16

QA11_A14
You said that you are: {INSERT MULTIPLE RESPONSES FROM QA11_A7, QA11_A8, QA11_A12 AND QA11_A13}.

您曾經說您是: {INSERT MULTIPLE RESPONSES FROM QA11_A7, QA11_A8, QA11_A12 AND QA11_A13}.

Do you identify with any one race in particular?

您是否認同任何一個特定的種族?

AA5G

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>...............................................1</td>
<td>...............................................2</td>
<td>...............................................-7</td>
<td>...............................................-8</td>
</tr>
</tbody>
</table>

[GO TO QA11_A16] [GO TO QA11_A16] [GO TO QA11_A16] [GO TO QA11_A16]
<table>
<thead>
<tr>
<th>QA11_A15</th>
<th>Which do you most identify with?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>您最認同的是哪一個族裔？</td>
</tr>
</tbody>
</table>

**PROGRAMMING NOTE QA11_A15:**

IF QA11_A6 = 1 (YES, LATINO) AND QA11_A7 ≠ -7 OR -8, THEN DO NOT DISPLAY QA11_A15 = 14 (LATINO);
IF QA11_A8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA11_A13 = 1 TO 4 OR 91, THEN DO NOT DISPLAY QA11_A15 = 17 (OTHER PACIFIC ISLANDER);
IF QA11_A8 = 3 AND QA11_A12 = 1 TO 17 OR 91, THEN DO NOT DISPLAY QA11_A15 = 19 (ASIAN)

**[IF R UNABLE TO CHOOSE ONE, OFFER “BOTH/ALL/MULTIRACIAL”]**

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
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</thead>
<tbody>
<tr>
<td>MEXICAN/MEXICAN AMERICAN/CHICANO</td>
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<tr>
<td>SALVADORAN</td>
<td>4</td>
</tr>
<tr>
<td>GUATEMALAN</td>
<td>5</td>
</tr>
<tr>
<td>COSTA RICAN</td>
<td>6</td>
</tr>
<tr>
<td>HONDURAN</td>
<td>7</td>
</tr>
<tr>
<td>NICARAGUAN</td>
<td>8</td>
</tr>
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<td>PANAMANIAN</td>
<td>9</td>
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<tr>
<td>PUERTO RICAN</td>
<td>10</td>
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<tr>
<td>CUBAN</td>
<td>11</td>
</tr>
<tr>
<td>SPANISH-AMERICAN (FROM SPAIN)</td>
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</tr>
<tr>
<td>LATINO, OTHER SPECIFY</td>
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<tr>
<td>LATINO</td>
<td>14</td>
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<tr>
<td>NATIVE HAWAIIAN</td>
<td>16</td>
</tr>
<tr>
<td>OTHER PACIFIC ISLANDER</td>
<td>17</td>
</tr>
<tr>
<td>AMERICAN INDIAN OR ALASKA NATIVE</td>
<td>18</td>
</tr>
<tr>
<td>ASIAN</td>
<td>19</td>
</tr>
<tr>
<td>BLACK OR AFRICAN AMERICAN</td>
<td>20</td>
</tr>
<tr>
<td>WHITE</td>
<td>21</td>
</tr>
<tr>
<td>RACE, OTHER SPECIFY</td>
<td>22</td>
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<tr>
<td>BANGLADESHI</td>
<td>30</td>
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<tr>
<td>BURMESE</td>
<td>31</td>
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<td>CAMBODIAN</td>
<td>32</td>
</tr>
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<td>CHINESE</td>
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</tr>
<tr>
<td>FILIPINO</td>
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<tr>
<td>HMONG</td>
<td>35</td>
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<td>INDIAN (INDIA)</td>
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<td>INDONESIAN</td>
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<td>TAIWANESE</td>
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<td>THAI</td>
<td>45</td>
</tr>
<tr>
<td>VIETNAMESE</td>
<td>46</td>
</tr>
<tr>
<td>ASIAN, OTHER SPECIFY</td>
<td>49</td>
</tr>
<tr>
<td>SAMOAN/AMERICAN SAMOAN</td>
<td>50</td>
</tr>
<tr>
<td>GUAMANIAN</td>
<td>51</td>
</tr>
<tr>
<td>TONGAN</td>
<td>52</td>
</tr>
<tr>
<td>FIJIAN</td>
<td>53</td>
</tr>
<tr>
<td>PACIFIC ISLANDER, OTHER SPECIFY</td>
<td>55</td>
</tr>
<tr>
<td>BOTH/ALL/MULTIRACIAL</td>
<td>90</td>
</tr>
<tr>
<td>NONE OF THESE</td>
<td>95</td>
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<tr>
<td>REFUSED</td>
<td>96</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
**QA11_A16** 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、與伴侶像婚煙關係一樣同居、喪偶、離婚、分居還是從未結婚？

**AH43**

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

- MARRIED ................................................................. 1
- LIVING WITH PARTNER ............................................. 2
- WIDOWED ......................................................................... 3
- DIVORCED ....................................................................... 4
- SEPARATED ....................................................................... 5
- NEVER MARRIED ......................................................... 6
- REFUSED .......................................................................... 7
- DON'T KNOW ................................................................. 8
Section B – Health Conditions

QA11_B1 These next questions are about your health.
以下是有關您的健康的幾個問題。
Would you say that in general your health is excellent, very good, good, fair, or poor?
以下是有關您的健康的幾個問題。總體而言，您認為您的健康狀況是極好、很好、較好、一般還是很差?

AB1

EXCELLENT ...........................................1
VERY GOOD ...........................................2
GOOD .....................................................3
FAIR .......................................................4
POOR .....................................................5
REFUSED ...............................................-7
DON'T KNOW .........................................-8

QA11_B2 Has a doctor ever told you that you have asthma?
有沒有醫生告訴過您患有哮喘病？

AB17

YES ..........................................................1
NO ...........................................................2  [GO TO PN QA11_B18]
REFUSED ...............................................-7  [GO TO PN QA11_B18]
DON'T KNOW .........................................-8  [GO TO PN QA11_B18]

QA11_B3 Do you still have asthma?
您是否依然患有哮喘病？

AB40

YES ..........................................................1
NO ...........................................................2
REFUSED ...............................................-7
DON'T KNOW .........................................-8

QA11_B4 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？

AB41

YES ..........................................................1
NO ...........................................................2
REFUSED ...............................................-7
DON'T KNOW .........................................-8
PROGRAMMING NOTE QA11_B5:
IF [QA11_B3 = 2, -7, OR -8 (DOES NOT HAVE ASTHMA OR REF/DK)] AND [QA11_B4 = 2, -7, OR -8 (NO EPISODE OF ASTHMA IN LAST 12 MOS OR REF/DK)], THEN GO TO QA11_B9;
ELSE CONTINUE WITH QA11_B5

QA11_B5

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，您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......

<table>
<thead>
<tr>
<th>AB19</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Not at all, ..............................................................1</td>
<td></td>
</tr>
<tr>
<td>根本沒有， ..............................................................1</td>
<td></td>
</tr>
<tr>
<td>Less than every month, ..................................................2</td>
<td></td>
</tr>
<tr>
<td>每月少於一次， ..........................................................2</td>
<td></td>
</tr>
<tr>
<td>Every month, .............................................................3</td>
<td></td>
</tr>
<tr>
<td>每月， .................................................................3</td>
<td></td>
</tr>
<tr>
<td>Every week, or ............................................................4</td>
<td></td>
</tr>
<tr>
<td>每週，還是 ..............................................................4</td>
<td></td>
</tr>
<tr>
<td>Every day? ...............................................................5</td>
<td></td>
</tr>
<tr>
<td>每天？ .................................................................5</td>
<td></td>
</tr>
<tr>
<td>REFUSED .................................................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ............................................................-8</td>
<td></td>
</tr>
</tbody>
</table>

QA11_B6

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，你是否曾經因你的哮喘病發作前往醫院急診室就診？

<table>
<thead>
<tr>
<th>AH13A</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
</tr>
<tr>
<td>NO .................................................................2</td>
<td></td>
</tr>
<tr>
<td>[GO TO QA11_B8]</td>
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</tr>
<tr>
<td>REFUSED ............................................................-7</td>
<td></td>
</tr>
<tr>
<td>[GO TO QA11_B8]</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ........................................................-8</td>
<td></td>
</tr>
<tr>
<td>[GO TO QA11_B8]</td>
<td></td>
</tr>
</tbody>
</table>

QA11_B7

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

你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？

<table>
<thead>
<tr>
<th>AB106</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ENTER 3 ONLY IF R VOLUNTEERS THAT HE/SHE DOESN'T HAVE A DOCTOR. DO NOT PROBE.]</td>
<td></td>
</tr>
<tr>
<td>YES .................................................................1</td>
<td></td>
</tr>
<tr>
<td>NO .................................................................2</td>
<td></td>
</tr>
<tr>
<td>DOESN'T HAVE A DOCTOR .............................................3</td>
<td></td>
</tr>
<tr>
<td>REFUSED ............................................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ........................................................-8</td>
<td></td>
</tr>
</tbody>
</table>
QA11_B8  During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月，您是否因哮喘病曾經住院一天或更長時間？

AH15A
[1] YES ..............................................................
[2] NO .............................................................
[7] REFUSED ........................................................
[8] DON'T KNOW ...................................................

QA11_B9  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？

AB18
[1] YES ..............................................................
[2] NO .............................................................
[7] REFUSED ........................................................
[8] DON'T KNOW ...................................................

[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。”]

PROGRAMMING NOTE QA11_B10:
IF QA11_B3 = 1 (YES, STILL HAVE ASTHMA) OR QA11_B4 = 1 (YES, EPISODE IN LAST 12 MOS), THEN GO TO PROGRAMMING NOTE QA11_B14;  ELSE CONTINUE WITH QA11_B10

QA11_B10  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、氣短、胸悶或黏痰。您認為是......

AB66
[1] Not at all, .........................................................
[2] Less than every month, .....................................
[3] Every month, ...................................................
[3] Every week, or ...............................................4
[4] Every day? .......................................................
[5] REFUSED ........................................................
[8] DON'T KNOW ...................................................
During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

在過去12個月中，你是否曾經因哮喘病發作前往醫院急診室就診？

**AB67**

YES ..........................................................1
NO ............................................................2  [GO TO QA11_B13]
REFUSED ...............................................-7  [GO TO QA11_B13]
DON'T KNOW ...........................................-8  [GO TO QA11_B13]

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

你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？

**AB107**

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

YES ..........................................................1
NO ............................................................2
DOESN'T HAVE DOCTOR .................................3
REFUSED ...............................................-7
DON'T KNOW ...........................................-8

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，您是否曾經因哮喘病住院一天或更長時間？

**AB80**

YES ..........................................................1
NO ............................................................2
REFUSED ...............................................-7
DON'T KNOW ...........................................-8

PROGRAMMING NOTE QA11_B14:
IF AAGE > 69, THEN GO TO QA11_B15;
ELSE CONTINUE WITH QA11_B14

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？

**AB42**

[IF NOT WORKING, ENTER ZERO]

_______ DAYS (0 - 365)

REFUSED ...............................................-7
DON'T KNOW ...........................................-8
QA11_B15  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？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
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<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>-7</td>
</tr>
<tr>
<td>Don't Know</td>
<td>-8</td>
</tr>
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</table>

[GO TO QA11_B17]

QA11_B16  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？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>-7</td>
</tr>
<tr>
<td>Don't Know</td>
<td>-8</td>
</tr>
</tbody>
</table>

[GO TO QA11_B17]

QA11_B17  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......

<table>
<thead>
<tr>
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<th>Code</th>
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</thead>
<tbody>
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<td>Very confident</td>
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</tr>
<tr>
<td>Somewhat confident</td>
<td>2</td>
</tr>
<tr>
<td>Not too confident, or</td>
<td>3</td>
</tr>
<tr>
<td>Not at all confident?</td>
<td>4</td>
</tr>
<tr>
<td>Refused</td>
<td>-7</td>
</tr>
<tr>
<td>Don't Know</td>
<td>-8</td>
</tr>
</tbody>
</table>

[GO TO QA11_B17]
PROGRAMMING NOTE QA11_B18:
IF QA11_A5 = 2 (FEMALE), THEN DISPLAY "Other than during pregnancy, has";
ELSE DISPLAY "Has"

QA11_B18  (Other than during pregnancy, has/Has) a doctor ever told you that you have diabetes or sugar diabetes?

是否有醫生曾經告訴您患有糖尿病？

AB22

YES .................................................................1
NO .................................................................2
BORDERLINE OR PRE-DIABETES ....................3   [GO TO PN QA11_B34]
REFUSED ..........................................................-7
DON'T KNOW .....................................................-8

PROGRAMMING NOTE QA11_B19:
IF QA11_A5 = 2 (FEMALE), THEN DISPLAY "Other than during pregnancy, has";
ELSE DISPLAY "Has"

QA11_B19  (Other than during pregnancy, has/Has) a doctor ever told you that you have pre-diabetes or borderline diabetes?

是否曾經有醫生告訴您患有前驅糖尿病或臨界糖尿病？

AB99

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW .....................................................-8

PROGRAMMING NOTE QA11_B20:
IF QA11_B18 = 1 (YES, HAS DIABETES), THEN CONTINUE WITH QA11_B20;
ELSE GO TO PROGRAMMING NOTE QA11_B39

QA11_B20  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？

AB23

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

REFUSED ..........................................................-7
DON'T KNOW .....................................................-8
QA11_B21  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。”]

TYPE 1 ..................................................................................1
TYPE 2 ..................................................................................2
ANOTHER TYPE .................................................................3
REFUSED .............................................................................-7
DON'T KNOW .......................................................................-8

QA11_B22  Are you now taking insulin?

您目前在使用胰島素嗎?

[AB24]

YES .....................................................................................1
NO .....................................................................................2
REFUSED .............................................................................-7
DON'T KNOW .......................................................................-8

QA11_B23  Do you now take diabetic pills to lower your blood sugar?

您目前在服用降血糖的糖尿病藥物嗎?

[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。”]

YES .....................................................................................1
NO .....................................................................................2
REFUSED .............................................................................-7
DON'T KNOW .......................................................................-8
QA11_B24  About how many times per day, per week, or per month do you or a family member or friend check your blood for glucose or sugar?

您本人、您的家庭成员或朋友每天、每週或每月大約幾次檢查您的血糖？

[FILL IN TIME FRAME ANSWERED]

_____ TIMES
_____ PER DAY [HR: 0-24; SR: 0-10]
_____ PER WEEK [HR: 0-70; SR: 0-34]
_____ PER MONTH [HR: 0-300; SR: 0-149]
_____ PER YEAR [HR: 0-3650; SR: 0-599]
REFUSED .................................................. -7
DON'T KNOW ............................................. -8

QA11_B25 About how many times in the last 12 months has a doctor or other health professional checked you for hemoglobin "A one C"?

在過去十二個月中，醫生或健康專業人員大約檢查過幾次您的血紅蛋白「A one C」？

[IF R NEVER HEARD OF IT, ENTER 995]

_____ NUMBER OF TIMES [HR: 0-52, 995; SR: 0-25, 995]
REFUSED .................................................. -7
DON'T KNOW ............................................. -8

QA11_B26 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疼痛或發炎？

_____ NUMBER OF TIMES [HR: 0-52; SR: 0-25]
REFUSED .................................................. -7
DON'T KNOW ............................................. -8
### QA11_B27
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.

您最後一次接受瞳孔放大眼科檢查是什麼時間？瞳孔放大會使您的眼睛在短時間內對亮光敏感。

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Within the past month</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Within the past year (1-12 months ago)</strong></td>
<td>2</td>
</tr>
<tr>
<td><strong>Within the past 2 years (1-2 years ago)</strong></td>
<td>3</td>
</tr>
<tr>
<td><strong>2 or more years ago</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>Never</strong></td>
<td>5</td>
</tr>
<tr>
<td><strong>Refused</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Don’t know</strong></td>
<td>8</td>
</tr>
</tbody>
</table>

### QA11_B28
During the past 12 months, have you had to visit a hospital emergency room because of your diabetes?

在過去12個月中，你是否曾經因糖尿病而前往醫院急診室就診？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>No</strong></td>
<td>2</td>
</tr>
<tr>
<td><strong>Refused</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Don’t know</strong></td>
<td>8</td>
</tr>
</tbody>
</table>

### QA11_B29
Did you visit a hospital emergency room for your diabetes because you were unable to see your doctor?

你是否曾經因糖尿病而無法約見自己的醫生而前往醫院急診室就診？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>No</strong></td>
<td>2</td>
</tr>
<tr>
<td><strong>Doesn’t have doctor</strong></td>
<td>3</td>
</tr>
<tr>
<td><strong>Refused</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Don’t know</strong></td>
<td>8</td>
</tr>
</tbody>
</table>

### QA11_B30
During the past 12 months, were you admitted to the hospital overnight or longer for your diabetes?

在過去12個月中，您是否曾經因糖尿病而住院一整天或更長時間？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>No</strong></td>
<td>2</td>
</tr>
<tr>
<td><strong>Refused</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Don’t know</strong></td>
<td>8</td>
</tr>
</tbody>
</table>
QA11_B31  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，以便讓您瞭解如何護理自己的 糖尿病？

<table>
<thead>
<tr>
<th>AB112</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ..........................................................1</td>
<td>[GO TO QA11_B33]</td>
</tr>
<tr>
<td>NO .............................................................2</td>
<td>[GO TO QA11_B33]</td>
</tr>
<tr>
<td>REFUSED .......................................................-7</td>
<td>[GO TO QA11_B33]</td>
</tr>
<tr>
<td>DON'T KNOW ...................................................-8</td>
<td>[GO TO QA11_B33]</td>
</tr>
</tbody>
</table>

QA11_B32  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？

<table>
<thead>
<tr>
<th>AB113</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[IF NEEDED, SAY: “This can be an electronic or hard copy.”]</td>
<td></td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “可以是電子或列印副本。”]</td>
<td></td>
</tr>
<tr>
<td>YES ..........................................................1</td>
<td></td>
</tr>
<tr>
<td>NO .............................................................2</td>
<td></td>
</tr>
<tr>
<td>REFUSED .......................................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ...................................................-8</td>
<td></td>
</tr>
</tbody>
</table>

QA11_B33  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......

<table>
<thead>
<tr>
<th>AB114</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Very confident, ..................................................1</td>
<td></td>
</tr>
<tr>
<td>Somewhat confident, ..........................................2</td>
<td></td>
</tr>
<tr>
<td>Not too confident, or .........................................3</td>
<td></td>
</tr>
<tr>
<td>Not at all confident? ...........................................4</td>
<td></td>
</tr>
<tr>
<td>REFUSED .........................................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW .....................................................-8</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_B34:
IF QA11_A5 = 2 (FEMALE), THEN CONTINUE WITH QA11_B34;
ELSE GO TO QA11_B35

QA11_B34 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？

AB81
[IF NEEDED, SAY: “This is also known as gestational diabetes.”]
[IF NEEDED, SAY: “這是妊娠期糖尿病。”]

YES .......................................................... 1
NO ............................................................ 2
BORDERLINE GESTATIONAL DIABETES ............ 3
REFUSED ..................................................... -7
DON’T KNOW ............................................. -8

QA11_B35 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？

AB29

YES .......................................................... 1
NO ............................................................ 2 [GO TO QA11_B37]
HIGH NORMAL/BORDERLINE/
PRE-HYPERTENSION .................................. 3 [GO TO QA11_B37]
REFUSED ..................................................... -7 [GO TO QA11_B37]
DON’T KNOW ............................................. -8 [GO TO QA11_B37]

QA11_B36 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？

AB30

YES .......................................................... 1
NO ............................................................ 2
REFUSED ..................................................... -7
DON’T KNOW ............................................. -8
QA11_B37  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？

AB34

YES .................................................................1
NO .................................................................2 [GO TO QA11_B45]
REFUSED ......................................................-7 [GO TO QA11_B45]
DON'T KNOW ................................................-8 [GO TO QA11_B45]

QA11_B38  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？

AB52

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW ................................................-8

QA11_B39  During the past 12 months, have you had to visit a hospital emergency room because of your heart disease?

在過去12個月 中，你是否曾經因心臟病前往醫院急診室就診？

AB115

YES .................................................................1
NO .................................................................2 [GO TO QA11_B41]
REFUSED ......................................................-7 [GO TO QA11_B41]
DON'T KNOW ................................................-8 [GO TO QA11_B41]

QA11_B40  Did you visit a hospital emergency room for your heart disease because you were unable to see your doctor?

你是否曾經因心臟病發作無法約見自己的醫生而前往醫院急診室就診？

AB116

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

YES .................................................................1
NO .................................................................2
DOESN'T HAVE DOCTOR .....................................3
REFUSED ......................................................-7
DON'T KNOW ................................................-8
During the past 12 months, were you admitted to the hospital overnight or longer for your heart disease?

在過去12個月中，您是否因心臟病而住院一整天或更長時間？

**AB117**

YES .............................................................................1
NO .............................................................................2
REFUSED .....................................................................-7
DON'T KNOW ..............................................................-8

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？

**AB118**

YES .............................................................................1
NO .............................................................................2 [GO TO QA11_B44]
REFUSED .....................................................................-7 [GO TO QA11_B44]
DON'T KNOW ..............................................................-8 [GO TO QA11_B44]

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？

**AB119**

[IF NEEDED, SAY: “This can be an electronic or hard copy.”]
[IF NEEDED, SAY: “可以是電子或列印副本。”]

YES .............................................................................1
NO .............................................................................2
REFUSED .....................................................................-7
DON'T KNOW ..............................................................-8

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

您對控制與管理您的心臟病的信心有多高？您認為是......

**AB120**

Very confident, .........................................................1
Đơn giản sẽ là có tự tin rất cao.

Somewhat confident, ...............................................2
Có chút tự tin.

Not too confident, or ................................................3
Không tự tin.

Not at all confident? ....................................................4
Không tự tin丝毫.

REFUSED .....................................................................-7
DON'T KNOW ..............................................................-8
QA11_B45  Has a doctor ever told you that you had a stroke?

是否曾經有醫生告訴過您患有中風？

AC6

YES .................................................................1
NO .................................................................2
REFUSED .........................................................7
DON'T KNOW ......................................................8

QA11_B46  Have you EVER been told by a doctor that you have some form of ARTHRITIS, gout, lupus or fibromyalgia [fy-bro-my-AL-jee-uh]?

是否曾經有醫生告訴你，說你患有某種類型的關節炎、痛風、狼瘡或纖維肌痛？

AB64

YES .................................................................1
NO .................................................................2
REFUSED .........................................................7
DON'T KNOW ......................................................8

QA11_B47  In the past 30 days, did you have any pain, aching, or stiffness in or around a joint?

在過去30天內，你是否曾經出現關節或關節周圍疼痛或僵硬？

AB127

[IF NEEDED, SAY: “Do not include the back or neck.”]
[IF NEEDED, SAY: “請勿包括背部或頸部。”]

YES .................................................................1
NO .................................................................2
REFUSED .........................................................7
DON'T KNOW ......................................................8
PROGRAMMING NOTE QA11_B48:
IF QA11_B46 = 1 (DIAGNOSED WITH ARTHRITIS, GOUT, LUPUS, OR FIBROMYALGIA) OR QA11_B47 = 1 (HAD SYMPTOMS OF JOINT PROBLEM IN PAST 30 DAYS), THEN CONTINUE WITH QA11_B48;
ELSE GO TO QA11_B49

QA11_B48  How much are you limited in your activities by these problems? Would you say...

這些問題在多大程度上限制了你的活動？你覺得是...

AB16

Not at all, .................................................................1
毫無限制， ..............................................................1
A little bit, ....................................................................2
有很少限制， ...........................................................2
Moderately, ..................................................................3
有一些限制， ............................................................3
Quite a lot, or ...............................................................
都沒有限制，或 .........................................................4
Extremely? ....................................................................5
有極大的限制？ .........................................................5
REFUSED ....................................................................-7
DON'T KNOW ..............................................................-8

QA11_B49  During the past 12 months, did you get a flu shot or the nasal flu vaccine, called Flumist?
在過去12個月中，您是否打過流感防疫針或使用過流感疫苗鼻噴劑Flumist?

AE30

[IF NEEDED, SAY: “A flu shot is usually given in the Fall and protects against influenza for the flu season.”]
[IF NEEDED, SAY: “流感防疫針通常是在秋季注射，以便為流感季節預防流感提供保護。”]

YES ........................................................................1
NO ..........................................................................2 [GO TO QA11_B52]
REFUSED .................................................................-7 [GO TO QA11_B52]
DON'T KNOW ..............................................................-8 [GO TO QA11_B52]

QA11_B50  Did you have the flu shot or the nasal flu vaccine?
您是否曾經打過流感防疫針或使用過流感疫苗鼻噴劑？

AB100

FLU SHOT .................................................................1
NASAL/FLUMIST .......................................................2
BOTH ..........................................................................3
REFUSED .................................................................-7
DON'T KNOW ..............................................................-8
PROGRAMMING NOTE QA11_B51:
IF QA11_B50 = 1, THEN DISPLAY “flu shot”; 
ELSE IF QA11_B50 = 2, THEN DISPLAY “nasal flu vaccine”; 
ELSE DISPLAY “vaccine”

QA11_B51  At what kind of place did you get your last {flu shot/nasal flu vaccine/vaccine}? 

您最後一次打流感防疫針是在哪里？

AB57

A DOCTOR’S OFFICE, KAISER, OR HMO ..........1
A COMMUNITY HEALTH CENTER,
HEALTH DEPT., HEALTH DEPT. CLINIC,
OR OTHER TYPE OF CLINIC......................2
A STORE (FOR EXAMPLE, MARKET,
DRUGSTORE, OR PHARMACY)....................3
WORKPLACE ......................................4
A SENIOR, RECREATION,
OR COMMUNITY CENTER.........................5
A HOSPITAL OR EMERGENCY ROOM............6
PLACE OF WORSHIP...............................7
OTHER (SPECIFY: ________________) ..........91
REFUSED ........................................7
DON'T KNOW/ NOT SURE ......................-8

PROGRAMMING NOTE QA11_B52:
IF AAGE < 65 YEARS, GO TO QA11_C1; 
ELSE CONTINUE WITH QA11_B52;

QA11_B52  During the past 12 months, have you fallen to the ground more than once? 

在過去十二個月中，您是否曾經不止一次昏倒在地？

AC7

YES .....................................................1
NO ....................................................2 [GO TO QA11_C1]
REFUSED ........................................-7 [GO TO QA11_C1]
DON'T KNOW ....................................-8 [GO TO QA11_C1]

QA11_B53  Did you get any medical care because of those falls? 

您在任何一次摔跤後是否接受過醫療護理？

AB91

YES .....................................................1
NO ....................................................2 [GO TO QA11_B56]
REFUSED ........................................-7 [GO TO QA11_B56]
DON'T KNOW ....................................-8 [GO TO QA11_B56]
QA11_B54  Did you go to the emergency room because of any of those falls?

你是否因為這些摔跤前往急診室就診？

AB140

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ..................................................-8

QA11_B55  Were you hospitalized because of any of those falls?

你是否因為這些摔跤住院？

AB141

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ..................................................-8

QA11_B56  Did a health care professional talk with you about how to avoid falling?

您的健康護理專業人員是否曾經與您討論過如何預防摔跤的問題？

AB92  

[IF NEEDED, SAY: “A health care professional is a doctor, nurse, or other health care provider.”]  
[IF NEEDED, SAY: “健康護理專業人員指醫生、護士或其他健康護理專業人員。”]

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ..................................................-8

QA11_B57  Did the health care professional make any specific recommendations?

健康護理專業人員是否曾經提出任何具體的建議？

AB142

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ..................................................-8

QA11_B58  Because of those falls, did a health care professional review your medications?

是否有健康護理專業人員因為這些摔跤而檢查您服用的藥物？

AB93

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ..................................................-8
QA11_B59  Did the health care professional recommend any changes to your medications?

健康護理專業人員是否曾經建議更換你服用的任何藥物？

<p>| | | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>YES</td>
<td>.................................................</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>.................................................</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.................................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.................................................</td>
<td>8</td>
</tr>
</tbody>
</table>

QA11_B60  Because of those falls, did you start a physical therapy or exercise program?

您是否因為這些摔跤而開始物理療法或運動計劃？

<p>| | | |</p>
<table>
<thead>
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<tbody>
<tr>
<td>YES</td>
<td>.................................................</td>
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</tr>
<tr>
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<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.................................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.................................................</td>
<td>8</td>
</tr>
</tbody>
</table>

QA11_B61  Did you do this because a health care professional recommended it?

你這樣做是否是因為有健康護理專業人員提出建議？

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<tbody>
<tr>
<td>YES</td>
<td>.................................................</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>.................................................</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.................................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.................................................</td>
<td>8</td>
</tr>
</tbody>
</table>

QA11_B62  Because of those falls, did you make changes to your home, such as adding grab bars or removing rugs?

您是否因為這些摔跤而對您的住宅進行改善，例如增加扶手或移除小塊地毯？

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<table>
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<tr>
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<tbody>
<tr>
<td>YES</td>
<td>.................................................</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>.................................................</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.................................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.................................................</td>
<td>8</td>
</tr>
</tbody>
</table>
**QA11_B63** Did you do this because a health care professional recommended it?

你這樣做是否是因為有健康護理專業人員提出建議？

<table>
<thead>
<tr>
<th>AB145</th>
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<tbody>
<tr>
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</tr>
<tr>
<td>NO..............................2</td>
</tr>
<tr>
<td>REFUSED..............................7</td>
</tr>
<tr>
<td>DON'T KNOW.........................8</td>
</tr>
</tbody>
</table>

**QA11_B64** Did you start using a cane or walker?

您是否開始使用手杖或助步器?

<table>
<thead>
<tr>
<th>AB96</th>
</tr>
</thead>
<tbody>
<tr>
<td>[IF NEEDED, SAY: “Because of those falls”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “因為這些摔跤。”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “Include temporary changes during your recovery.”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “包括在康復期作出的臨時改變。”]</td>
</tr>
<tr>
<td>YES..............................1</td>
</tr>
<tr>
<td>NO..............................2</td>
</tr>
<tr>
<td>REFUSED..............................7</td>
</tr>
<tr>
<td>DON'T KNOW.........................8</td>
</tr>
</tbody>
</table>

**QA11_B65** Did you do this because a health care professional recommended it?

你這樣做是否是因為有健康護理專業人員提出建議？

<table>
<thead>
<tr>
<th>AB146</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES..............................1</td>
</tr>
<tr>
<td>NO..............................2</td>
</tr>
<tr>
<td>REFUSED..............................7</td>
</tr>
<tr>
<td>DON'T KNOW.........................8</td>
</tr>
</tbody>
</table>

**QA11_B66** Did you change your daily routines?

您是否對日常生活作出了改變?

<table>
<thead>
<tr>
<th>AB97</th>
</tr>
</thead>
<tbody>
<tr>
<td>[IF NEEDED, SAY: “Because of those falls”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “因為這些摔跤。”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “Include temporary changes during your recovery.”]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: “包括在康復期作出的臨時改變。”]</td>
</tr>
<tr>
<td>YES..............................1</td>
</tr>
<tr>
<td>NO..............................2</td>
</tr>
<tr>
<td>REFUSED..............................7</td>
</tr>
<tr>
<td>DON'T KNOW.........................8</td>
</tr>
</tbody>
</table>
QA11_B67 Did you do this because a health care professional recommended it?

你這樣做是否是因為有健康護理專業人員提出建議？

<table>
<thead>
<tr>
<th>AB147</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES .................................................................1</td>
</tr>
<tr>
<td>NO .................................................................2</td>
</tr>
<tr>
<td>REFUSED ...........................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW .........................................................-8</td>
</tr>
</tbody>
</table>
Section C – Health Behaviors

QA11_C1 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？

YES ................................................................. 1
NO ................................................................. 2 [GO TO QA11_C4]
UNABLE TO WALK .............................................. 3 [GO TO QA11_C7]
REFUSED .................................................................. -7 [GO TO QA11_C4]
DON'T KNOW ................................................................ -8 [GO TO QA11_C4]

QA11_C2 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分鐘至某個地方。”]

______ TIMES PER WEEK .......................................................... [IF 0, GO TO QA11_C4]

REFUSED .................................................................. -7 [GO TO QA11_C4]
DON'T KNOW ................................................................ -8 [GO TO QA11_C4]

PROGRAMMING NOTE QA11_C3:
IF QA11_C2 = 1, THEN DISPLAY “How long did that walk take”;
IF QA11_C2 > 1, THEN DISPLAY “On average, how long did those walks take”

QA11_C3 {How long did that walk take/On average, how long did those walks take}?

在那些日子裡，您通常每天步行多長時間？

______ MINUTES PER DAY ................................................
______ HOURS PER DAY ................................................

REFUSED .................................................................. -7
DON'T KNOW ................................................................ -8
PROGRAMMING NOTE QA11_C4:
IF QA11_C1 = 1 (WALK FOR TRANSPORTATION), THEN DISPLAY “Please do not include walking for transportation.”

QA11_C4 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.}

有時，您會為了娛樂、休閒、運動或溜狗而步行。在過去七天內，您是 否曾經因任何此類原因一次至少步行10分鐘？請勿包括您已經告訴 我的步行。

AD40W

YES ...........................................................................................................1
NO ..................................................................................................................2 [GO TO QA11_C7]
REFUSED ........................................................................................................-7 [GO TO QA11_C7]
DON’T KNOW ............................................................................................-8 [GO TO QA11_C7]

QA11_C5 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？

AD41W

[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 [IF 0, GO TO QA11_C7]

REFUSED ........................................................................................................-7 [GO TO QA11_C7]
DON’T KNOW ............................................................................................-8 [GO TO QA11_C7]

PROGRAMMING NOTE QA11_C6:
IF QA11_C5 = 1, THEN DISPLAY “How long did that walk take”;
IF QA11_C5 > 1, THEN DISPLAY “On average, how long did those walks take”

QA11_C6 {How long did that walk take/On average, how long did those walks take}?

在那些日子裡，您通常每天步行多長時間？

AD42W

______ MINUTES PER DAY

______ HOURS PER DAY

REFUSED ........................................................................................................-7
DON’T KNOW ............................................................................................-8
During the past month, how many times did you eat fruit? Do not count juices.

Now think about the foods you ate or drank during the past month, that is, the past 30 days, including meals and snacks.

QA11_C7

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

QA11_C8

<table>
<thead>
<tr>
<th>TIMES</th>
<th>PER DAY</th>
<th>PER WEEK</th>
<th>PER MONTH</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>.........................................</td>
<td>1 [HR: 0-20; SR: 0-9]</td>
<td>2 [HR: 0-20; SR: 0-29]</td>
<td>3 [HR: 0-210; SR: 0-149]</td>
<td>-7</td>
</tr>
</tbody>
</table>

QA11_C8

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

QA11_C8

<table>
<thead>
<tr>
<th>TIMES</th>
<th>PER DAY</th>
<th>PER WEEK</th>
<th>PER MONTH</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
</table>
PROGRAMMING NOTE QA11_C9:
IF QA11_C8 > 0 (ATE FRIED POTATOES) THEN DISPLAY “Do not include fried potatoes.”
ELSE DO NOT DISPLAY

QA11_C9  [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.]

[在過去一個月中，] 您吃過幾次任何其他蔬菜，例如青菜沙拉、四季豆或馬鈴薯？請不要包括油炸馬鈴薯。

AE7

[IF STRONGLY NEEDED, SAY: “Such as tomatoes, carrots, onions, or broccoli.”]
[IF STRONGLY NEEDED, SAY: “例如西紅柿、胡蘿蔔、洋蔥或綠花椰菜。”]

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

[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: “這是每天、每個月還是每個月？”]

__________TIMES

PER DAY ..................................................1 [HR: 0-10; SR: 0-4]
PER WEEK ..............................................2 [HR: 0-70; SR: 0-28]
PER MONTH .........................................3 [HR: 0-300; SR: 0-120]
REFUSED ..............................................-7
DON'T KNOW .........................................-8

QA11_C10  [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。[您可以告訴我每天、每週或每個月的次數。]

AC11

[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。”]

__________TIMES

PER DAY ..................................................1 [HR: 0-10; SR: 0-7]
PER WEEK ..............................................2 [HR: 0-25; SR: 0-11]
PER MONTH .........................................3 [HR: 0-60; SR: 0-30]
REFUSED ..............................................-7
DON'T KNOW .........................................-8
Now think about the past week. In the past 7 days, how many times did you eat fast food? Include fast food meals eaten at work, at home, or at fast-food restaurants, carryout or drive through.

現在，請想一想上週的情況。在過去七天中，您曾經幾次吃快餐食品？包括在工作場所、家中或快餐店、外賣店或驅車購買快餐店購買的快餐食品。

[IF NEEDED, SAY: “Such as food you get at McDonald's, KFC, Panda Express, or Taco Bell.”]
[IF NEEDED, SAY: “例如，您在麥當勞、肯塔基炸雞店、熊貓快餐店或塔可鐘購買的食品。”]

__________# OF TIMES IN PAST 7 DAYS

REFUSED ......................................................... -7
DON'T KNOW .................................................. -8

How often can you find fresh fruits and vegetables in your neighborhood? Would you say...

你在所在社區買到新鮮水果和蔬菜的頻率有多高？你認為是......
PROGRAMMING NOTE QA11_C13:
IF QA11_C12 = 2, 3, OR 4, THEN CONTINUE WITH QA11_C13;
ELSE GO TO PROGRAMMING NOTE QA11_C14

QA11_C13
How often are they affordable? Would you say...

你能夠負擔得起這些食品的頻率有多高？你認為是……

AC44

(IF NEEDED, SAY: “How often are the fresh fruits and vegetables you find in your neighborhood affordable? Would you say...”)
(IF NEEDED, SAY: “「你能夠負擔得起你所在社區的新鮮水果和蔬菜的頻率有多高？你認為是從未、有時、通常還是總是？」”]

Never.........................................................1
從未、.........................................................1
Sometimes ...................................................2
有時、.........................................................2
Usually, or ....................................................3
通常、還是..................................................3
Always?......................................................4
總是？.......................................................4
REFUSED .....................................................-7
DON'T KNOW ..............................................-8

PROGRAMMING NOTE QA11_C14:
IF QA11_C12 = 5 (DOESN'T EAT FRUITS AND VEGETABLES) OR AAGE > 64, THEN GO TO QA11_C16;
ELSE CONTINUE WITH QA11_C14

QA11_C14
How often can you find fresh fruits and vegetables at or near your workplace? Would you say...

你在你的工作場所或附近買到新鮮水果和蔬菜的頻率有多高？你認為是……

AC43

Never..............................................................1
從未、..............................................................1
Sometimes ....................................................2
有時、.........................................................2
Usually, or ....................................................3
經常、還是..................................................3
Always?......................................................4
總是？.......................................................4
DOESN'T WORK ..............................................5
WORKS AT HOME ..........................................6
OTHER NOT APPLICABLE (DOESN'T WORK IN ONE PLACE, CAN'T LEAVE WORK, ETC.) ..........7
REFUSED .....................................................-7
DON'T KNOW ..............................................-8
PROGRAMMING NOTE QA11_C15:
IF QA11_C14 = 2, 3, OR 4 THEN CONTINUE WITH QA11_C15;
ELSE GO TO QA11_C16

QA11_C15 How often are they affordable? Would you say …

你能夠負擔得起這些食品的頻率有多高？

AC45

[IF NEEDED, SAY: 「你能夠負擔得起你的工作場所或附近的新鮮水果和蔬菜的頻率有多高？你認為是從未、有時、通常還是 總是？」 ]

Never........................................................................1
從未、 ........................................................................1
Sometimes ..............................................................2
有時、 ........................................................................2
Usually, or..................................................................3
通常、還是 ..................................................................3
Always?........................................................................4
總是？ ........................................................................4
REFUSED.....................................................................-7
DON'T KNOW.........................................................-8

QA11_C16 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枝或100枝以上？

AE15

YES ...............................................................................1
NO................................................................................2 [GO TO QA11_C20]
REFUSED.....................................................................-7
DON'T KNOW.........................................................-8

QA11_C17 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？

AE15A

EVERY DAY.....................................................................1
每天............................................................................1
SOME DAYS..................................................................2 [GO TO QA11_C19]
某些天.........................................................................2
NOT AT ALL....................................................................3 [GO TO QA11_C20]
完全不抽煙 ...................................................................3
REFUSED.....................................................................-7 [GO TO QA11_C20]
DON'T KNOW.........................................................-8 [GO TO QA11_C20]
QA11_C18  On average, how many cigarettes do you now smoke a day?

您目前平均每天抽多少枝煙？

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

_____ NUMBER OF CIGARETTES  [HR: 0-120]  [GO TO QA11_C20]

REFUSED ................................................. -7  [GO TO QA11_C20]
DON'T KNOW .............................................-8  [GO TO QA11_C20]

QA11_C19  In the past 30 days, when you smoked, how many cigarettes did you smoke per day?

在過去三十天中，當您抽煙時 [在您抽煙的日子裡]，您每天抽多少枝煙？

[IF NEEDED, SAY: “On the days you smoked.”]

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

_____ NUMBER OF CIGARETTES  [HR: 0-120]

REFUSED ................................................. -7
DON'T KNOW .............................................-8

QA11_C20  Is smoking ever allowed inside your home?

你們家中是否允許任何人抽煙？

AC17

YES ...........................................................1
NO ............................................................2  [GO TO QA11_C22]
REFUSED ...................................................-7  [GO TO QA11_C22]
DON'T KNOW .............................................-8  [GO TO QA11_C22]

QA11_C21  On average, about how many days per week is there smoking inside your home?

一週平均大約有幾天有人在您家中的任何地方抽煙？

[IF RARELY OR LESS THAN 1 DAY PER WEEK, ENTER 0]

_____ DAYS PER WEEK  [HR: 0-7]

REFUSED ................................................... -7
DON'T KNOW .............................................-8
QA11_C22  Now think about the past 12 months. Over that time, did you have any kind of alcoholic drink?  
在過去十二個月中，您飲用任何含酒精飲料的頻率有多高？

AC32  
[IF NEEDED, SAY: “Your best guess is fine.”]
[IF NEEDED, SAY: “給出您的最佳估計數字。”]

YES .................................................................1
NO .................................................................2 [GO TO QA11_D1]
REFUSED .......................................................-7 [GO TO QA11_D1]
DON’T KNOW ....................................................-8 [GO TO QA11_D1]

PROGRAMMING NOTE QA11_C23:
IF QA11_A5 = 1 (MALE), THEN CONTINUE WITH QA11_C23;
ELSE GO TO QA11_C24

QA11_C23  In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?  
在過去十二個月內，你在一天內飲酒量達到5份或5份以上的次數約有多少？

AC34  
[IF NEEDED, SAY: “By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor.”]
[IF NEEDED, SAY: “一份飲酒是指一罐12盎斯的啤酒或一杯啤酒、一杯5盎斯的葡萄酒、一杯混合飲料或一小杯烈酒。”]

________ TIMES [HR: 0-365; SR: 0-99] [GO TO QA11_D1]
REFUSED ................................................................-7 [GO TO QA11_D1]
DON’T KNOW ................................................................-8 [GO TO QA11_D1]
<table>
<thead>
<tr>
<th>TIMES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>REFUSED</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

**QA11_C24** In the past 12 months, about how many times did you have 4 or more alcoholic drinks in a single day?

在過去十二個月內，你在一天內飲酒量達到4份或4份以上的次數約有多少﹖

**AC35**

[IF NEEDED, SAY: “By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor.”]

[IF NEEDED, SAY: “「一份飲酒是指一罐12盎斯的啤酒或一杯啤酒、一杯5盎斯的葡萄酒、一杯混合飲料或一小杯烈酒。」”]

REFUSED

DON'T KNOW
Section D – General Health, Disability, and Sexual Health

QA11_D1 These next questions are about your height and weight.

以下是幾個有關您的身高和體重的問題。

How tall are you without shoes?

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 [FT HR: 3-7, IN HR: 0-11]

_____ METERS _____ CENTIMETERS [M HR: 1-2, CM HR: 0-99]

REFUSED ............................................................... -7
DON’T KNOW ............................................................ -8

PROGRAMMING NOTE QA11_D2:
IF QA11_A5 = 2 (FEMALE) AND AAGE < 50, THEN DISPLAY "When not pregnant, how";
ELSE DISPLAY "How"

QA11_D2 (When not pregnant, how/How) much do you weigh without shoes?

您不穿鞋時體重是多少？

您不懷孕時，不穿鞋體重是多少？

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

_____ POUNDS [HR: 50-450]

_____ KILOGRAMS [HR: 20-220]

REFUSED ............................................................... -7
DON’T KNOW ............................................................ -8
## PROGRAMMING NOTE QA11_D3:

| IF AAGE = 18, THEN GO TO QA11_D4; |
| ELSE CONTINUE WITH QA11_D3     |

<table>
<thead>
<tr>
<th>QA11_D3</th>
<th>How much did you weigh at age 18?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>您在18岁时体重有多少？</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AE19</th>
<th>[IF NEEDED, SAY: “About how much?”]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[IF NEEDED, SAY: 「大约有多重？」]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>_____ POUNDS</th>
<th>[HR: 50-450]</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____ KILOGRAMS</td>
<td>[HR: 20-220]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

## PROGRAMMING NOTE QA11_D2:

| IF QA11_A5 = 2 (FEMALE) AND AAGE < 50, THEN DISPLAY "When not pregnant, how"; |
| ELSE DISPLAY "How"                                           |

<table>
<thead>
<tr>
<th>QA11_D4</th>
<th>Are you blind or deaf, or do you have a severe vision or hearing problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>您是盲人或聋人或有严重视力或听力障碍吗？</td>
</tr>
</tbody>
</table>

| AD50    | YES .............................................1 |
|         | NO .............................................2 [GO TO QA11_D6] |
|         | REFUSED .................................................................-7 [GO TO QA11_D6] |
|         | DON'T KNOW .................................................................-8 [GO TO QA11_D6] |

<table>
<thead>
<tr>
<th>QA11_D5</th>
<th>Are you legally blind?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>您是不是法律认可的盲人？</td>
</tr>
</tbody>
</table>

| AL8     | YES .............................................1 |
|         | NO .............................................2 |
|         | REFUSED .................................................................-7 |
|         | DON'T KNOW .................................................................-8 |

<table>
<thead>
<tr>
<th>QA11_D6</th>
<th>Do you have a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>您是否有任何一种严重限制一种或多基本身体活动的症狀？例如，步行、上楼梯、伸手取物或提拿物體。</td>
</tr>
</tbody>
</table>

| AD57    | YES .............................................1 |
|         | NO .............................................2 |
|         | REFUSED .................................................................-7 |
|         | DON'T KNOW .................................................................-8 |
QA11_D7  Because of a physical, mental, or emotional condition lasting 6 months or more, do you have any of the following:

您是否由於持續六個月或以上的身體、精神或情感狀況，出現以下任何症狀：

Any difficulty learning, remembering, or concentrating?

學習、記憶或集中注意力方面的任何困難？

AD51

YES .................................................................1
NO ........................................................................2
REFUSED .............................................................-7
DON'T KNOW .....................................................-8

QA11_D8  Any difficulty dressing, bathing, or getting around inside the home?

穿衣、洗澡或在家中走動時有任何困難嗎？

AD52

[IF NEEDED, SAY: “Because of a physical, mental, or emotional condition lasting 6 months or more”]
[IF NEEDED, SAY: “由於延續六個月或以上的身體、精神或情感狀況。”]

YES .................................................................1
NO ........................................................................2
REFUSED .............................................................-7
DON'T KNOW .....................................................-8

QA11_D9  Any difficulty going outside the home alone to shop or visit a doctor’s office?

單獨外出購物或前往醫生診所就診時有任何困難嗎？

AD53

[IF NEEDED, SAY: “Because of a physical, mental, or emotional condition lasting 6 months or more”]
[IF NEEDED, SAY: “由於延續六個月或以上的身體、精神或情感狀況。”]

YES .................................................................1
NO ........................................................................2
REFUSED .............................................................-7
DON'T KNOW .....................................................-8
**PROGRAMMING NOTE QA11_D10:**
IF AAGE > 64 GO TO PROGRAMMING NOTE QA11_D12; ELSE CONTINUE WITH QA11_D10

**QA11_D10**  Any difficulty working at a job or business?

工作或從事業務方面遇到任何困難嗎？

**AD54**

[IF NEEDED, SAY: “Because of a physical, mental, or emotional condition lasting 6 months or more.”]
[IF NEEDED, SAY: “由於延續六個月或以上的身體、精神或情緒狀況。”]

YES ..................................................................................1  
NO ..........................................................................................2  [GO TO PN QA11_D12]  
REFUSED ..............................................................................-7  [GO TO PN QA11_D12]  
DON'T KNOW ..........................................................................-8  [GO TO PN QA11_D12]

**QA11_D11**  Do you have a physical or mental condition that has kept you from working for at least a year?

您有沒有身體或精神障礙，導致您至少一年無法工作？

**AL8A**

[IF NEEDED, SAY: “Current condition.”]
[IF NEEDED, SAY: “目前的狀況。”]

YES ..................................................................................1  
NO ..........................................................................................2  
REFUSED ..............................................................................-7  
DON'T KNOW ..........................................................................-8

**PROGRAMMING NOTE QA11_D12:**
IF AAGE > 70 OR QA11_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 70 OR IF AGE IS UNKNOWN, GO TO PROGRAMMING NOTE QA11_E1; ELSE CONTINUE WITH QA11_D12

**QA11_D12**  We are asking a few questions about people’s sexual experiences. All answers will be kept private.

我們會提出幾個有關性經歷的問題。所有的答案都會予以保密。

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？

**AD43**

________ NUMBER OF SEXUAL PARTNERS  
[GO TO PN QA11_D14]  
REFUSED ..............................................................................-7  [GO TO PN QA11_D14]  
DON'T KNOW ..........................................................................-8
QA11_D13  Can you give me your best guess?

您能不能儘量估計有幾個人？

AD44  [IF R PROVIDES EXACT NUMBER, ENTER AS GIVEN. OTHERWISE, CODE INTO CATEGORIES PROVIDED]

_____ NUMBER OF PARTNERS

1 PARTNER ................................................. 1
2-3 PARTNERS ............................................. 2
4-5 PARTNERS ............................................. 3
6-10 PARTNERS .......................................... 4
MORE THAN 10 PARTNERS ......................... 5
REFUSED .................................................. -7
DON'T KNOW ........................................... -8

PROGRAMMING NOTE QA11_D14:
IF QA11_D12 = 0 OR QA11_D13 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS), THEN GO TO
PROGRAMMING NOTE QA11_D15;
ELSE CONTINUE WITH QA11_D14;
IF QA11_D12 = 1 OR QA11_D13 = 1 (ONE PARTNER IN LAST 12 MONTHS), THEN 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
donna".

QA11_D14  {Is that partner male or female/In the past 12 months, have your sexual partners been male,
female, or both male and female}?

在過去十二個月中，您的性伴侶是男性、女性還是既有男性又有女性？

AD45

MALE ...................................................... 1
FEMALE .................................................. 2
BOTH MALE AND FEMALE ....................... 3
REFUSED .............................................. -7
DON'T KNOW ......................................... -8
PROGRAMMING NOTE QA11_D15:
IF QA11_A5 = 1 (MALE), THEN DISPLAY “Gay” IN QUESTION AND “Gay” IN HELP SCREEN;
ELSE IF QA11_A5 = 2 (FEMALE), THEN DISPLAY “Gay, Lesbian” IN QUESTION AND “Gay and Lesbian”
IN HELP SCREEN

QA11_D15   Do you think of yourself as straight or heterosexual, as {gay/gay, lesbian} or homosexual, or
            bisexual?

您認為自己是異性戀、男同性戀、女同性戀、同性戀還是雙性戀？

AD46

[IF NEEDED, SAY: “Straight or Heterosexual people have sex with, or are primarily
attracted to people of the opposite sex, [Gay/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系。」”]

STRAIGHT OR HETEROSEXUAL ....................1
GAY, LESBIAN, OR HOMOSEXUAL ................2
BISEXUAL......................................3
NOT SEXUAL/CELIBATE/NONE ....................4
OTHER (SPECIFY: ____________) ...............91
REFUSED.....................................-7
DON'T KNOW..................................-8

PROGRAMMING NOTE QA11_D16:
IF [QA11_A5 = 1 (MALE) AND QA11_D14 = 1 (MALE)] OR [QA11_A5 = 2 (FEMALE) AND QA11_D14 = 2
(FEMALE)] OR [QA11_D14 = 3, -7, OR -8] OR [IF QA11_D15 ≠ 1], THEN CONTINUE WITH QA11_D16;
ELSE GO TO QA11_E1

QA11_D16   Are you legally married to someone of the same sex?

你是否與同性別的人合法登記結婚？

AD60

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

YES ....................................................1   [GO TO PN NEXT SECTION]
NO .....................................................2
REFUSED ............................................2
DON'T KNOW ......................................-8

51
<table>
<thead>
<tr>
<th>QA11_D17</th>
<th>Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>你與同性別的人合法登記為同居伴侶是否獲得加利福尼亞州政府的認可？</td>
</tr>
<tr>
<td>AD61</td>
<td>YES ........................................................................................................................................... 1</td>
</tr>
<tr>
<td></td>
<td>NO .......................................................................................................................................... 2</td>
</tr>
<tr>
<td></td>
<td>REFUSED ............................................................................................................................ -7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW ....................................................................................................................... -8</td>
</tr>
</tbody>
</table>
Section E – Women’s Health

PROGRAMMING NOTE SECTION E:
IF QA11_A5 = 1 (MALE), THEN GO TO NEXT SECTION;
ELSE CONTINUE WITH SECTION E

PROGRAMMING NOTE QA11_E1:
IF AGE > 45, THEN GO TO PROGRAMMING NOTE QA11_E2;
ELSE CONTINUE WITH QA11_E1

QA11_E1
These next questions are about women's health.

以下是有關婦女健康的問題。

To your knowledge, are you now pregnant?

據你所知，你 現在 懷孕了嗎？

AD13

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON’T KNOW .................................................-8

PROGRAMMING NOTE QA11_E2:
IF AAGE < 30 OR QA11_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE < 30, THEN GO TO
PROGRAMMING NOTE QA11_E21;
ELSE CONTINUE WITH QA11_E2 (INCLUDE WOMEN WITH AGE UNKNOWN);
IF AGE > 45, THEN DISPLAY “These next questions are about women’s health.”

QA11_E2
{These next questions are about women’s health.} In the past 12 months, has a doctor examined your breasts for lumps?

在過去十二個月中，是否有醫生為您作乳房腫塊檢查？

AF37

[IF NEEDED, SAY: “This is when a doctor touches your breasts to check for bumps, cysts, or abnormal growth.”]
[IF NEEDED, SAY: “這是指醫生用手觸摸乳房，檢查是否有腫塊、囊腫或不正常的生長物。”]

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON’T KNOW .................................................-8
### QA11_E3
**Have you ever had a mammogram?**

您是否曾經作過乳房X光照射？

**AD14**

[IF NEEDED, SAY: "A mammogram is an x-ray taken of each breast separately by a machine that flattens or squeezes each breast."]

[IF NEEDED, SAY: "「乳房X光照射是用機器將每隻乳房壓扁或擠壓並分別拍攝每隻乳房的X射線照片。」"]

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

### PROGRAMMING NOTE QA11_E4:
**IF AGE IS BETWEEN 40 AND 49, THEN CONTINUE WITH QA11_E4; ELSE GO TO PROGRAMMING NOTE QA11_E5**

### QA11_E4
**Has a doctor ever told you that women your age only need a mammogram every other year?**

你的醫生是否曾經告訴過你像你這樣年齡的女性僅需要每隔一年接受一次乳房X光檢查？

**AE92**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
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<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>

### PROGRAMMING NOTE QA11_E5:
**IF AGE IS BETWEEN 35 AND 49, THEN CONTINUE WITH QA11_E5; ELSE GO TO PROGRAMMING NOTE QA11_E6**

### QA11_E5
**Has a doctor ever talked with you about when women should start having mammograms?**

你的醫生是否曾經告訴過你婦女應當何時開始接受乳房X光檢查？

**AE93**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_E6:
IF AGE > 69, THEN CONTINUE WITH QA11_E6;
ELSE GO TO PROGRAMMING NOTE QA11_E7

QA11_E6  Has a doctor ever talked with you about stopping your mammograms?

是否曾經有醫生讓你停止接受乳房X光檢查？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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<tbody>
<tr>
<td>AE94</td>
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<td>YES</td>
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<td>NO</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
</tr>
</tbody>
</table>

PROGRAMMING NOTE QA11_E7:
IF QA11_E3 = 2 (NEVER HAD A MAMMOGRAM), THEN GO TO PROGRAMMING NOTE QA11_E19;
ELSE IF QA11_E3 = -7 OR -8, THEN GO TO PROGRAMMING NOTE QA11_E21;
ELSE CONTINUE WITH QA11_E7

QA11_E7  How many mammograms have you had in the last 6 years? Your best estimate is fine.

在過去六年中，您接受了幾次乳房X光照射？大概估計的次數就可以。

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AD16</td>
<td></td>
</tr>
<tr>
<td>_____ MAMMOGRAMS</td>
<td>[HR: 0-99]</td>
</tr>
<tr>
<td>NONE</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
</tr>
</tbody>
</table>

QA11_E8  How long ago did you have your most recent mammogram?

您最後一次作乳房X光照射是在多久以前？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>AD17</td>
<td></td>
</tr>
<tr>
<td>A YEAR AGO OR LESS</td>
<td></td>
</tr>
<tr>
<td>MORE THAN 1 UP TO 2 YEARS AGO</td>
<td></td>
</tr>
<tr>
<td>MORE THAN 2 UP TO 3 YEARS AGO</td>
<td></td>
</tr>
<tr>
<td>MORE THAN 3 UP TO 5 YEARS AGO</td>
<td></td>
</tr>
<tr>
<td>MORE THAN 5 YEARS AGO</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
</tr>
</tbody>
</table>

QA11_E9  Was your most recent mammogram recommended by a doctor?

您最近一次做的乳房X光照片是否由醫生建議？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>AE50</td>
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<tr>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_E10:
IF QA11_E8 = 3, 4, OR 5 (MAMMOGRAM MORE THAN 2 YEARS AGO), THEN GO TO QA11_E11;
ELSE CONTINUE WITH QA11_E10

**QA11_E10**
Tell me the main reason you had a mammogram. Was it...

請告訴我您做乳房X光照片的主要原因，是……

**AD18**

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

<table>
<thead>
<tr>
<th>Reason</th>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>Part of a routine exam, ...........................................</td>
<td>1</td>
</tr>
<tr>
<td>Because of a specific breast problem, ................................</td>
<td>2</td>
</tr>
<tr>
<td>A follow-up to a previously identified breast problem, or .............</td>
<td>3</td>
</tr>
<tr>
<td>Due to family history? ................................................................</td>
<td>4</td>
</tr>
<tr>
<td>REFUSED ...........................................................................</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW ......................................................................</td>
<td>-8</td>
</tr>
</tbody>
</table>

**PROGRAMMING NOTE QA11_E11:**
IF QA11_E8 = 1 (MOST RECENT MAMMOGRAM A YEAR AGO OR LESS), THEN CONTINUE WITH QA11_E11;
ELSE GO TO QA11_E12

**QA11_E11**
How much did you pay for your most recent mammogram—did you pay none, some or all of the cost?

你為最近一次接受的乳房X線檢查付了多少錢—是免費、支付部份費用或是全部費用？

**AE91**

<table>
<thead>
<tr>
<th>Cost Type</th>
<th>Code</th>
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<tbody>
<tr>
<td>NONE OF THE COST ............</td>
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</tr>
<tr>
<td>SOME OF THE COST ............</td>
<td>2</td>
</tr>
<tr>
<td>ALL OF THE COST .............</td>
<td>3</td>
</tr>
<tr>
<td>REFUSED ..........................</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW ........................</td>
<td>-8</td>
</tr>
</tbody>
</table>

**QA11_E12**
Have you ever had a mammogram where the results were not normal?

您是否曾經有不正常的乳房X光照片結果？

**AD19**

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Next Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ..........................</td>
<td>1</td>
<td>[GO TO PN QA11_E19]</td>
</tr>
<tr>
<td>NO ..................................</td>
<td>2</td>
<td>[GO TO PN QA11_E19]</td>
</tr>
<tr>
<td>REFUSED ..................................</td>
<td>-7</td>
<td>[GO TO PN QA11_E19]</td>
</tr>
<tr>
<td>DON'T KNOW ..........................</td>
<td>-8</td>
<td>[GO TO PN QA11_E19]</td>
</tr>
</tbody>
</table>
Have you ever had an operation to remove a lump from your breast?

您是否曾經接受移除乳房腫塊的手術？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
<th>Description</th>
<th>Page</th>
</tr>
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<tbody>
<tr>
<td>YES</td>
<td>AD20</td>
<td>........................................</td>
<td>1</td>
</tr>
<tr>
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<td>...........................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td>...........................................</td>
<td>8</td>
</tr>
</tbody>
</table>

Did the lump turn out to be cancer?

該乳房腫塊是不是癌症？

<table>
<thead>
<tr>
<th>Option</th>
<th>AD21</th>
<th>Description</th>
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<tbody>
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<td>........................................</td>
<td>1</td>
</tr>
<tr>
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<td>........................................</td>
<td>2</td>
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<tr>
<td>REFUSED</td>
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<td>........................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td>........................................</td>
<td>8</td>
</tr>
</tbody>
</table>

How many operations have you had to remove a lump that wasn't cancer?

您曾經動過幾次切除腫塊的手術？請不要包括切除癌症腫瘤的手術。

<table>
<thead>
<tr>
<th>Option</th>
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<th>Description</th>
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</thead>
<tbody>
<tr>
<td>______ NUMBER OF OPERATIONS</td>
<td></td>
<td>........................................</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
<td>........................................</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td>........................................</td>
<td>8</td>
</tr>
</tbody>
</table>

Tell me how you first found out about your breast cancer. Was it by...

請告訴我，您最初是如何發現自己患有乳癌（乳腺癌/乳房癌）的。是......

<table>
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<tr>
<th>Option</th>
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<th>Page</th>
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</thead>
<tbody>
<tr>
<td>Finding it yourself by accident</td>
<td></td>
<td>........................................</td>
<td>1</td>
</tr>
<tr>
<td>Finding it yourself during a self-breast examination</td>
<td></td>
<td>....................................</td>
<td>1</td>
</tr>
<tr>
<td>Your husband or partner finding it</td>
<td></td>
<td>....................................</td>
<td>2</td>
</tr>
<tr>
<td>Your doctor finding it during a routine breast exam</td>
<td></td>
<td>....................................</td>
<td>3</td>
</tr>
<tr>
<td>Finding it by a mammogram, or透过乳房X線照片發現的</td>
<td></td>
<td>....................................</td>
<td>4</td>
</tr>
<tr>
<td>Some other way? (IF OTHER, SPECIFY: ______)</td>
<td></td>
<td>....................................</td>
<td>5</td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
<td>........................................</td>
<td>91</td>
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<tr>
<td>DON'T KNOW</td>
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<td>........................................</td>
<td>8</td>
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</tbody>
</table>
QA11_E17  Did you have any other tests and/or surgery when your mammogram was not normal?

當您的乳房X光照片不正常時，您是否接受任何其他測試及/或手術?

AD23

YES ...............................................1
NO ...............................................2 [GO TO PN QA11_E19]
REFUSED .....................................-7 [GO TO PN QA11_E19]
DON'T KNOW .................................-8 [GO TO PN QA11_E19]

QA11_E18  What additional tests and/or surgery did you have?

您還接受了哪些其他測試及/或手術?

AD24

[CODE ALL THAT APPLY]

[IF NEEDED, SAY: “Any others?”]
[IF NEEDED, SAY: “還有任何其他測試及/或手術嗎?”]

NO TESTS/NO SURGERY ..........................1
MASTECTOMY (SURGERY TO REMOVE BREAST) ...............................2
LUMPECTOMY (SURGERY TO REMOVE LUMP) ...................................3
NEEDLE BIOPSY ....................................4
ULTRASOUND TEST ..................................5
ANOTHER MAMMOGRAM ..........................6
CLINICAL BREAST EXAM ..........................7
REFUSED .........................................-7
DON'T KNOW .......................................-8

PROGRAMMING NOTE QA11_E19:
IF QA11_E3 = 2 OR QA11_E7 = 0 OR QA11_E8 > 2 YEARS, THEN CONTINUE WITH QA11_E19;
ELSE GO TO PROGRAMMING NOTE QA11_E20

QA11_E19  In the past 2 years, has a doctor recommended that you have a mammogram?

在過去兩年內，是否有醫生建議您照乳房X光片？

AD26

YES ...............................................1
NO ...............................................2
REFUSED .....................................-7
DON'T KNOW .................................-8
Section F – Mental Health

QA11_F1 The next questions are about how you have been feeling during the past 30 days.

以下是關於您在過去30天內感覺的問題。

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？

AJ29

ALL.................................................................1
MOST...........................................................2
SOME..........................................................3
A LITTLE .........................................................4
NONE............................................................5
REFUSED ................................................................-7
DON'T KNOW .....................................................-8

QA11_F2 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— 始終、大多數時間、有時、很少還是從不？

AJ30

ALL.................................................................1
MOST...........................................................2
SOME..........................................................3
A LITTLE .........................................................4
NONE............................................................5
REFUSED ................................................................-7
DON'T KNOW .....................................................-8

QA11_F3 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焦慮或煩躁？

AJ31

[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: “始終、大多數時間、有時、很少還是從不？”]

ALL.................................................................1
MOST...........................................................2
SOME..........................................................3
A LITTLE .........................................................4
NONE............................................................5
REFUSED ................................................................-7
DON'T KNOW .....................................................-8
QA11_F4  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，任何事也無法使您高興起來？

AJ32

[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: “始終、大多數時間、有時、很少還是從不?”]

ALL .................................................. 1
MOST .................................................. 2
SOME .................................................. 3
A LITTLE ............................................. 4
NONE ............................................... 5
REFUSED .......................................... 7
DON’T KNOW ................................. 8

QA11_F5  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每件事做起來都很費力？

AJ33

[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: “始終、大多數時間、有時、很少還是從不?”]

ALL .................................................. 1
MOST .................................................. 2
SOME .................................................. 3
A LITTLE ............................................. 4
NONE ............................................... 5
REFUSED .......................................... 7
DON’T KNOW ................................. 8

QA11_F6  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用處？

AJ34

[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: “始終、大多數時間、有時、很少還是從不?”]

ALL .................................................. 1
MOST .................................................. 2
SOME .................................................. 3
A LITTLE ............................................. 4
NONE ............................................... 5
REFUSED .......................................... 7
DON’T KNOW ................................. 8
QA11_F7 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？

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<tbody>
<tr>
<td>AF62</td>
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</tr>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>

**PROGRAMMING NOTE QA11_F8:**

IF QA11_F7 = 1, THEN CONTINUE WITH QA11_F8;
ELSE GO TO PROGRAMMING NOTE QA11_F14

QA11_F8 The next questions are about the one month in the past 12 months when you were at your worst emotionally.

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?

在這個月中，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？

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<td>AF63</td>
<td></td>
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<tr>
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<td>1</td>
</tr>
<tr>
<td>MOST</td>
<td>2</td>
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<tr>
<td>SOME</td>
<td>3</td>
</tr>
<tr>
<td>A LITTLE</td>
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<tr>
<td>NONE</td>
<td>5</td>
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<tr>
<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</table>

QA11_F9 During that same month, how often did you feel hopeless—all of the time, most, some, a little, or none of the time?

在這個月中，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？

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<td>AF64</td>
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<tr>
<td>ALL</td>
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</tr>
<tr>
<td>MOST</td>
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</tr>
<tr>
<td>SOME</td>
<td>3</td>
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<tr>
<td>A LITTLE</td>
<td>4</td>
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<td>NONE</td>
<td>5</td>
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<td>REFUSED</td>
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<td>DON'T KNOW</td>
<td>-8</td>
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</tbody>
</table>
QA11_F10  How often did you feel restless or fidgety?
您感到不安或煩躁的頻率有多高？

AF65  
[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？”]

ALL ........................................... 1
MOST ........................................... 2
SOME .......................................... 3
A LITTLE ..................................... 4
NONE .......................................... 5
REFUSED ...................................... 7
DON’T KNOW ................................. 8

QA11_F11  How often did you feel so depressed that nothing could cheer you up?
您感到非常壓抑以致任何事情都無法讓您高興起來的頻率有多高？

AF66  
[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: “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？”]

ALL ........................................... 1
MOST ........................................... 2
SOME .......................................... 3
A LITTLE ..................................... 4
NONE .......................................... 5
REFUSED ...................................... 7
DON’T KNOW ................................. 8

QA11_F12  How often did you feel that everything was an effort?
您感到做每件事都很費力的頻率有多高？

AF67  
[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: “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？”]

ALL ........................................... 1
MOST ........................................... 2
SOME .......................................... 3
A LITTLE ..................................... 4
NONE .......................................... 5
REFUSED ...................................... 7
DON’T KNOW ................................. 8
How often did you feel worthless?

您感到自己毫無用處的頻率有多高？

[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: “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？”]

ALL ..............................................................1
MOST ..................................................................2
SOME .............................................................3
A LITTLE ..........................................................4
NONE ............................................................5
REFUSED ......................................................-7
DON'T KNOW ..............................................-8

ADD REVERSE CODING OF K6 CALCULATION AS TEMPORARY VARIABLE HERE:
PROGRAMMING NOTE QA11_F14INTRO:
IF (QA11_F1 + QA11_F2 + QA11_F3 + QA11_F4 + QA11_F5 + QA11_F6 > 8) OR
(QA11_F8 + QA11_F9 + QA11_F10 + QA11_F11 + QA11_F12 + QA11_F13 > 8) OR
(QA11_F1-F6 = ONE OUT OF RANGE RESPONSE AND F1-F6 > 7) OR
(QA11_F8-F13 = ONE OUT OF RANGE RESPONSE AND F8-F13 > 7), THEN CONTINUE WITH
QA11_F14INTRO;
IF QA11_F7 = 1, THEN DISPLAY “again, please”;
ELSE GO TO QA11_F19

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

請想一想過去十二個月中您的情緒處於最差狀況的一個月。

PROGRAMMING NOTE QA11_F14:
IF AGE > 70, THEN GO TO QA11_F15;
ELSE CONTINUE WITH QA11_F14

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

您的情緒對您在工作中的表現是影響很大、有一些影響還是根本沒有影響？

A LOT .............................................................1
SOME ............................................................2
NOT AT ALL ..................................................3
DOES NOT WORK ...........................................4
REFUSED ......................................................-7
DON'T KNOW ..............................................-8
QA11_F15  Did your emotions interfere a lot, some, or not at all with your household chores?

您的情緒對您做家務是影響很大、有一些影響還是根本沒有影響?

**AF70B**

A LOT .................................................................1
SOME .......................................................................2
NOT AT ALL ..........................................................3
REFUSED .................................................................7
DON'T KNOW ..........................................................8

QA11_F16  Did your emotions interfere a lot, some, or not at all with your social life?

您的情緒對您的社交生活是影響很大、有一些影響還是根本沒有影響?

**AF71B**

A LOT .................................................................1
SOME .......................................................................2
NOT AT ALL ..........................................................3
REFUSED .................................................................7
DON'T KNOW ..........................................................8

QA11_F17  Did your emotions interfere a lot, some, or not at all with your relationship with friends and family?

您的情緒對您與朋友及家人的關係是影響很大、有一些影響還是根本沒有影響?

**AF72B**

A LOT .................................................................1
SOME .......................................................................2
NOT AT ALL ..........................................................3
REFUSED .................................................................7
DON'T KNOW ..........................................................8

QA11_F18  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?

請想一想過去十二個月的情況。在過去的365天中，大約有多少天因為您感到精神緊張、壓抑或情緒壓力而完全無法工作或從事正常的活動？

**AF73B**

[IF NEEDED, SAY: “You can use any number between 0 and 365 to answer.”]
[IF NEEDED, SAY: “您可以使用0-365之間的任何一個數字回答這個問題。”]

__________ NUMBER OF DAYS

REFUSED .................................................................7
DON'T KNOW ..........................................................8
**QA11_F19**  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, 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情感、神經、酗酒或吸毒的問題曾經需要約見專業人士？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</table>

[GO TO QA11_F21]

**QA11_F20**  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。

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T HAVE INSURANCE</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</table>

[GO TO QA11_F21]

**QA11_F21**  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？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</table>

[GO TO QA11_F21]

**QA11_F22**  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？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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</table>

[GO TO QA11_F21]
PROGRAMMING NOTE QA11_F23:
IF QA11_F21 = 1 OR QA11_F22 = 1, THEN CONTINUE WITH QA11_F23;
ELSE GO TO QA11_F28

QA11_F23 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？

<table>
<thead>
<tr>
<th>AF76</th>
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<tbody>
<tr>
<td>MENTAL-EMOTIONAL HEALTH.............1</td>
</tr>
<tr>
<td>ALCOHOL-DRUG PROBLEM..................2</td>
</tr>
<tr>
<td>BOTH MENTAL &amp; ALCOHOL-DRUG...........3</td>
</tr>
<tr>
<td>REFUSED.........................................-7</td>
</tr>
<tr>
<td>DON'T KNOW......................................-8</td>
</tr>
</tbody>
</table>

PROGRAMMING NOTE QA11_F24:
IF QA11_F23 = 1, THEN DISPLAY “mental or emotional health”;  
ELSE IF QA11_F23 = 2, THEN DISPLAY “use of alcohol or drugs”;  
ELSE IF QA11_F23 = 3, THEN DISPLAY “mental or emotional health and your use of alcohol or drugs”;  
ELSE GO TO QA11_F25

QA11_F24 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的問題約見專業人員多少次？請勿包括住院的次數。

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>NUMBER OF VISITS</td>
</tr>
<tr>
<td>REFUSED..................-7</td>
</tr>
<tr>
<td>DON'T KNOW..................-8</td>
</tr>
</tbody>
</table>

QA11_F25 Are you still receiving treatment for these problems from one or more of these providers?

您現在仍然在約見其中的一位服務提供者嗎？

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<tr>
<th>AF78</th>
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<tbody>
<tr>
<td>YES........................................1 [GO TO QA11_F28]</td>
</tr>
<tr>
<td>NO.........................................2 [GO TO QA11_F28]</td>
</tr>
<tr>
<td>REFUSED...................................-7 [GO TO QA11_F28]</td>
</tr>
<tr>
<td>DON'T KNOW................................-8 [GO TO QA11_F28]</td>
</tr>
</tbody>
</table>

QA11_F26 Did you complete the recommended full course of treatment?

您是否因為已經戒酒或戒毒或者已經完成了建議的全部療程而不再接受治療了呢？

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<thead>
<tr>
<th>AF79</th>
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<tbody>
<tr>
<td>YES........................................1 [GO TO QA11_F28]</td>
</tr>
<tr>
<td>NO.........................................2</td>
</tr>
<tr>
<td>REFUSED...................................-7 [GO TO QA11_F28]</td>
</tr>
<tr>
<td>DON'T KNOW................................-8 [GO TO QA11_F28]</td>
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</tbody>
</table>
QA11_F27  What is the MAIN REASON you are no longer receiving treatment?

您戒酒/戒毒的主要原因是什么？

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<tr>
<td>GOT BETTER/NO LONGER NEEDED</td>
<td>1</td>
</tr>
<tr>
<td>NOT GETTING BETTER</td>
<td>2</td>
</tr>
<tr>
<td>WANTED TO HANDLE PROBLEM ON OWN</td>
<td>3</td>
</tr>
<tr>
<td>HAD BAD EXPERIENCES WITH TREATMENT</td>
<td>4</td>
</tr>
<tr>
<td>LACK OF TIME/TRANSPORTATION</td>
<td>5</td>
</tr>
<tr>
<td>TOO EXPENSIVE</td>
<td>6</td>
</tr>
<tr>
<td>INSURANCE DOES NOT COVER</td>
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<td>OTHER (SPECIFY: ________)</td>
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<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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QA11_F28  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12個月中，您是否曾經因情感或個人問題連續兩週或以上幾乎每天服用任何處方藥物，例如抗憂鬱藥或鎮靜劑？

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<td>AJ5</td>
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<tr>
<td>YES</td>
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<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
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<tr>
<td>DON'T KNOW</td>
<td>-8</td>
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PROGRAMING NOTE QA11_F29:
IF QA11_F19 = 1 AND (QA11_F21 ≠ 1 AND QA11_F22 ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT), THEN CONTINUE WITH QA11_F29;
ELSE GO TO QA11_G1

QA11_F29  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.

以下任何一項陈述是否说明您沒有約見專業人員的原因？

You were concerned about the cost of treatment.

我擔心治療的費用。

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<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
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</table>
QA11_F30  You did not feel comfortable talking with a professional about your personal problems.

我認為我能夠更好地處理自己的問題。

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<thead>
<tr>
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<th>YES ...............................................................1</th>
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<tbody>
<tr>
<td></td>
<td>NO ........................................................................2</td>
</tr>
<tr>
<td></td>
<td>REFUSED ...........................................................-7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW ......................................................-8</td>
</tr>
</tbody>
</table>

QA11_F31  You were concerned about what would happen if someone found out you had a problem.

我擔心如果有人知道了我的問題會發生什麼情況。

<table>
<thead>
<tr>
<th>AF84</th>
<th>YES ...............................................................1</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NO ........................................................................2</td>
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<tr>
<td></td>
<td>REFUSED ...........................................................-7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW ......................................................-8</td>
</tr>
</tbody>
</table>

QA11_F32  You had a hard time getting an appointment.

我在預約時遇到了困難。

<table>
<thead>
<tr>
<th>AF85</th>
<th>YES ...............................................................1</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NO ........................................................................2</td>
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<tr>
<td></td>
<td>REFUSED ...........................................................-7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW ......................................................-8</td>
</tr>
</tbody>
</table>
Section G – Demographic Information, Part II

QA11_G1 Now a few more questions about your background.

現在，我想再問幾個有關您本人的問題。

In what country were you born?

您是在哪一個國家出生的？

[SELECT FROM MOST LIKELY COUNTRIES]

- UNITED STATES………………………………………1
- AMERICAN SAMOA………………………………2
- CANADA……………………………………………………3
- CHINA………………………………………………………4
- EL SALVADOR…………………………………………5
- ENGLAND…………………………………………………6
- FRANCE……………………………………………………7
- GERMANY…………………………………………………8
- GUAM………………………………………………………9
- GUATEMALA………………………………………10
- HUNGARY…………………………………………………11
- INDIA……………………………………………………12
- IRAN………………………………………………………13
- IRELAND…………………………………………………14
- ITALY………………………………………………………15
- JAPAN………………………………………………………16
- KOREA……………………………………………………17
- MEXICO……………………………………………………18
- PHILIPPINES……………………………………………19
- POLAND…………………………………………………20
- PORTUGAL………………………………………………21
- PUERTO RICO……………………………………………22
- RUSSIA……………………………………………………23
- TAIWAN…………………………………………………24
- VIETNAM…………………………………………………25
- VIRGIN ISLANDS………………………………………26
- OTHER (SPECIFY: ____________) ……………………91
- REFUSED…………………………………………………-7
- DON'T KNOW…………………………………………..-8
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]

- UNITED STATES
- AMERICAN SAMOA
- CANADA
- CHINA
- EL SALVADOR
- ENGLAND
- FRANCE
- GERMANY
- GUAM
- GUATEMALA
- HUNGARY
- INDIA
- IRAN
- IRELAND
- ITALY
- JAPAN
- KOREA
- MEXICO
- PHILIPPINES
- POLAND
- PORTUGAL
- PUERTO RICO
- RUSSIA
- TAIWAN
- VIETNAM
- VIRGIN ISLANDS
- OTHER (SPECIFY: ______________)
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]

- UNITED STATES ............................................. 1
- AMERICAN SAMOA ........................................ 2
- CANADA ....................................................... 3
- CHINA .......................................................... 4
- EL SALVADOR ................................................ 5
- ENGLAND ....................................................... 6
- FRANCE ........................................................ 7
- GERMANY ....................................................... 8
- GUAM ........................................................... 9
- GUATEMALA .................................................. 10
- HUNGARY ....................................................... 11
- INDIA ........................................................... 12
- IRAN ............................................................. 13
- IRELAND ......................................................... 14
- ITALY ............................................................. 15
- JAPAN ............................................................ 16
- KOREA ........................................................... 17
- MEXICO .......................................................... 18
- PHILIPPINES ................................................ 19
- POLAND .......................................................... 20
- PORTUGAL ....................................................... 21
- PUERTO RICO .................................................. 22
- RUSSIA .......................................................... 23
- TAIWAN .......................................................... 24
- VIETNAM .......................................................... 25
- VIRGIN ISLANDS ............................................. 26
- OTHER (SPECIFY:__________________) ............... 91
- REFUSED .......................................................... 9
- DON'T KNOW ..................................................... 8
**QA11_G4** 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: “「還有任何其他人或機構嗎？」”]**

<table>
<thead>
<tr>
<th>Language</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGLISH</td>
<td>1</td>
</tr>
<tr>
<td>SPANISH</td>
<td>2</td>
</tr>
<tr>
<td>CANTONESE</td>
<td>3</td>
</tr>
<tr>
<td>VIETNAMESE</td>
<td>4</td>
</tr>
<tr>
<td>TAGALOG</td>
<td>5</td>
</tr>
<tr>
<td>MANDARIN</td>
<td>6</td>
</tr>
<tr>
<td>KOREAN</td>
<td>7</td>
</tr>
<tr>
<td>ASIAN INDIAN LANGUAGES</td>
<td>8</td>
</tr>
<tr>
<td>RUSSIAN</td>
<td>9</td>
</tr>
<tr>
<td>OTHER 1 (SPECIFY: ____)</td>
<td>91</td>
</tr>
<tr>
<td>OTHER 2 (SPECIFY: ____)</td>
<td>92</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_G5 AND QA11_G6:
IF INTERVIEW NOT CONDUCTED IN ENGLISH, THEN CONTINUE WITH QA11_G5;
IF INTERVIEW CONDUCTED IN ENGLISH AND QA11_G4 > 1 (SPEAKS LANGUAGE OTHER THAN
ENGLISH AT HOME), THEN CONTINUE WITH QA11_G5 AND DISPLAY: “Since you speak a language
other than English at home, we are interested in the languages you use in other situations”;  
ELSE IF QA11_G4 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), THEN GO TO QA11_G8
PROGRAMMING NOTE QA11_G7:
IF INTERVIEW CONDUCTED IN ENGLISH AND QA11_G4 > 1 (SPEAKS LANGUAGE OTHER THAN
ENGLISH AT HOME), THEN CONTINUE WITH QA11_G7 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, THEN CONTINUE WITH QA11_G7;
ELSE GO TO PROGRAMMING NOTE QA11_G8

QA11_G7: (Since you speak a language other than English at home, we are interested in your own opinion
of how well you speak English.) Wouldn’t you say you speak English...

| AH37 |
|-----------------|-----------------|-----------------|-----------------|
| Very well, | 1 |
| Not well, or, | 3 |
| Not at all? | 4 |
| REFUSED | -7 |
| DON'T KNOW | -8 |

PROGRAMMING NOTE QA11_G8:
IF QA11_G1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN
ISLANDS), THEN GO TO PROGRAMMING NOTE QA11_G11;
ELSE CONTINUE WITH QA11_G8

QA11_G8: The next questions are about citizenship and immigration.

Are you a citizen of the United States?

| AH39 |
|-----------------|-----------------|-----------------|-----------------|
| YES | 1 |
| NO | 2 |
| APPLICATION PENDING | 3 |
| REFUSED | -7 |
| DON'T KNOW | -8 |
QA11_G9  Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

您是擁有綠卡的永久居民嗎？

AH40  [IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]

YES .................................................................1
NO ......................................................................2
APPLICATION PENDING ........................................3
REFUSED ................................................................-7
DON'T KNOW ........................................................8

QA11_G10  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？

AH41  [FOR LESS THAN A YEAR, ENTER 1 YEAR]

____ NUMBER OF YEARS

____ YEAR (FIRST CAME TO LIVE IN U.S.)

REFUSED ..................................................................-7
DON'T KNOW ............................................................-8

PROGRAMMING NOTE QA11_G11:
IF [QA11_A16 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA11_G11;
IF QA11_A16 = 1, THEN DISPLAY “spouse”;
IF QA11_A16 = 2 OR QA11_D16 = 1 OR QA11_D17 = 1, THEN DISPLAY “partner”;
ELSE GO TO PROGRAMMING NOTE QA11_G13

QA11_G11  Is your {spouse/partner} also living in your household?

你的{配偶}是不是也住在你的家中？

AH44  YES ........................................................................1
NO ...........................................................................2
REFUSED ....................................................................7
DON'T KNOW ............................................................8
QA11_G12  May I have your {spouse/partner}'s first name and age?

你是否能夠告訴我你的{伴侶}的名字和年齡？

SC11A  [ENTER SPOUSE’/PARTNER’S NAME, AGE, AND SEX]

SPouse/Partner Name ____________________
SPouse/Partner Age ____________________
SPouse/Partner Sex ____________________

PROGRAMMING NOTE QA11_G13:
IF [AAGE < 30 OR QA11_A4 = 1 (AGE 18-29)] AND QA11_G11 = 1 (SPouse/Partner living in HH) AND 3 OR MORE ADULTS LIVE IN HH, THEN CONTINUE WITH QA11_G13;
IF [AAGE < 30 OR QA11_A4 = 1 (AGE 18-29)] AND QA11_A16 = 3, 4, 5, 6, 7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, THEN CONTINUE WITH QA11_G13;
ELSE GO TO PROGRAMMING NOTE QA11_G14

QA11_G13  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？

AH43A

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW .....................................................-8

PROGRAMMING NOTE QA11_G14:
IF COMPLETED CHILD 1ST INTERVIEW, THEN GO TO QA11_G20;
ELSE CONTINUE WITH QA11_G14

QA11_G14  Are there any children under the age of 18 living in the household, including babies?

是否有任何年齡在18歲以下的兒童住在這個家中？請包括嬰兒。

SC12

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW .....................................................-8

[GO TO QA11_G22]
QA11_G15  Please tell me only the first names and ages of all the children under 18, including babies, who normally live in your household.

請給我通常住在你家裡、年齡在18歲以下，包括嬰兒在內的每個小孩的名字和年齡。

SC13A  
(PROBE: “Is there anyone else?”)
(PROBE: “還有其他人嗎？”)

[ENTER AGE OF 0 (ZERO), IF LESS THAN 1 YEAR OLD]

<table>
<thead>
<tr>
<th>CHILD</th>
<th>FIRST NAME</th>
<th>AGE</th>
<th>M/F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
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<td></td>
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<tr>
<td>4</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

QA11_G16  Is (CHILD) ...

{CHILD NAME/AGE/SEX} is...

SC15A

0 To 11 years old or ..............................................1  [CODE AS CHILD]
0歲至11歲，還是..............................................1  [CODE AS CHILD]
12 To 17 years old? ..............................................2  [CODE AS TEEN]
12歲至17歲? ..............................................2  [CODE AS TEEN]
REFUSED ..............................................-7  [CODE AS TEEN]
DON'T KNOW ..............................................-8  [CODE AS TEEN]

QA11_G17  I have recorded {number} {child/children} under 18 in the household. Have I missed any children under 18 who usually live here but are temporarily away?

我的記錄顯示這個家中沒有18歲以下的兒童。您是不是漏掉了哪位通常住在這裡但臨時外出的、18歲以下的兒童？

SC13

NO ONE MISSED -- ROSTER IS CORRECT ..........1
RETURN TO ROSTER ..............................................2  [GO BACK TO QA11_G15]

PROGRAMMING NOTE QA11_G18:
IF ANY PEOPLE IN HH UNDER AGE 18, ASK QA11_G18 ABOUT EACH PERSON UNDER 18

QA11_G18  Are you the parent or legal guardian of (PERSON NAME/AGE/SEX)?

你是不是(PERSON NAME/AGE/SEX)的父親/母親或法定監護人？

SC14A

YES ..............................................................1
NO ..............................................................2
REFUSED ......................................................-7
DON'T KNOW ..................................................-8
PROGRAMMING NOTE QA11_G19:
IF ANY PEOPLE IN HH UNDER AGE 18 AND QA11_G11 = 1 (SPOUSE/PARTNER LIVING IN HOUSEHOLD),
THEN ASK QA11_G19 ABOUT THE SPOUSE/PARTNER AND EACH PERSON UNDER 18;
ELSE GO TO QA11_G20

QA11_G19  Is (NAME/AGE/SEX) the parent or legal guardian of (PERSON NAME/AGE/SEX)?

{NAME/AGE/SEX} 是不是 {PERSON NAME/AGE/SEX} 的父母或法定監護人？

SC14B

YES .................................................................1
NO ...............................................................2
REFUSED ......................................................-7
DON'T KNOW ................................................-8

PROGRAMMING NOTE QA11_G20:
IF QA11_G14 = 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA11_G15 ARE AGE 13 OR LESS, THEN CONTINUE WITH QA11_G20;
ELSE GO TO QA11_G22;
IF ANY CHILD IN ROSTER QA11_G15 ≥ 14, DISPLAY “for any children under age 14”;
IF QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVING IN HH), THEN DISPLAY “you or your spouse”;
ELSE IF QA11_G11 = 1, THEN DISPLAY “you or your partner”;
ELSE DISPLAY “you”

QA11_G20  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，您是否當 { } 在工作、上學或尋找工作時讓 { } 接受付費幼兒看護服務？

AH44A

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

[IF NEEDED, SAY: “這包括學前起步計畫（Head Start）、日託所、上學前和放學後的看護計畫以及任何臨時嬰兒照看安排。”]

YES .................................................................1
NO ...............................................................2
REFUSED ......................................................-7
DON'T KNOW ................................................-8
In the past month, how much did you pay for all child care arrangements and programs?

[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。」「您或您家裡任何一位成年人。」”]

$______________ AMOUNT LAST MONTH  [HR: 0-8,000]

$______________ AMOUNT IN TYPICAL WEEK  [HR: 0-3,000]

NO PAYMENT IN LAST MONTH OR WEEK .........3
REFUSED .................................................. -7
DON'T KNOW .............................................. -8
**QA11_G22**  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？

<table>
<thead>
<tr>
<th>NO FORMAL EDUCATION</th>
<th>GRADE SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1ST GRADE</td>
</tr>
<tr>
<td></td>
<td>2ND GRADE</td>
</tr>
<tr>
<td></td>
<td>3RD GRADE</td>
</tr>
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<td></td>
<td>4TH GRADE</td>
</tr>
<tr>
<td></td>
<td>5TH GRADE</td>
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<td></td>
<td>6TH GRADE</td>
</tr>
<tr>
<td></td>
<td>7TH GRADE</td>
</tr>
<tr>
<td></td>
<td>8TH GRADE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HIGH SCHOOL OR EQUIVALENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>9TH GRADE</td>
</tr>
<tr>
<td>10TH GRADE</td>
</tr>
<tr>
<td>11TH GRADE</td>
</tr>
<tr>
<td>12TH GRADE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4-YEAR COLLEGE OR UNIVERSITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1ST YEAR (FRESHMAN)</td>
</tr>
<tr>
<td>2ND YEAR (SOPHOMORE)</td>
</tr>
<tr>
<td>3RD YEAR (JUNIOR)</td>
</tr>
<tr>
<td>4TH YEAR (SENIOR) (BA/BS)</td>
</tr>
<tr>
<td>5TH YEAR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GRADUATE OR PROFESSIONAL SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1ST YEAR GRAD OR PROF SCHOOL</td>
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<tr>
<td>2ND YEAR GRAD OR PROF SCHOOL</td>
</tr>
<tr>
<td>3RD YEAR GRAD OR PROF SCHOOL</td>
</tr>
</tbody>
</table>

| MORE THAN 3 YEARS GRAD OR     |
| PROF SCHOOL (PhD)             |
| 2-YEAR JUNIOR OR COMMUNITY COLLEGE |
| 1ST YEAR                      |
| 2ND YEAR                      |

<table>
<thead>
<tr>
<th>VOCATIONAL, BUSINESS, OR TRADE SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1ST YEAR</td>
</tr>
<tr>
<td>2ND YEAR</td>
</tr>
<tr>
<td>MORE THAN 2 YEARS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>REFUSED</th>
<th>DON'T KNOW (OUT OF RANGE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**QA11_G23**  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？

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

[GO TO QA11_G26] [GO TO QA11_G26]
QA11_G24  When did you serve?

您是什麼時候在軍隊服役的？

AG23  

FROM _____ TO _____

OR

[CHECK ALL THAT APPLY]

World War II (Sept 1940 to July 1947) ......................1
Korean War (June 1950 to Jan 1955) .......................2
Vietnam War (Aug 1964 to April 1975) ....................3
Gulf War/Operation Desert
Storm (1990 to 1991) ........................................4
Afghanistan/Operation Enduring
Freedom (2001 to present) ..................................5
Iraq War/Operation Iraqi
Freedom (2003 to present) .................................6
REFUSED ..................................................................7
DON'T KNOW ......................................................8

QA11_G25  Altogether, how long did you serve?

您總共服役多長時間？

AG24  

_____ YEARS

_____ MONTHS

REFUSED .........................................................-7
DON'T KNOW ..................................................-8

QA11_G26  Which of the following were you doing last week?

您上週曾經從事以下哪些工作？

AK1  

Working at a job or business, ..................................1
從事工作或業務， ...........................................1
With a job or business but not at work, ..................2
有工作或業務，但不在工作， .............................2
Looking for work, or .........................................3
在找工作，還是 ...........................................3
Not working at a job or business? .........................4
沒有從事工作或業務？ .................................4
REFUSED .........................................................-7
DON'T KNOW ..................................................-8
QA11_G27 What is the main reason you did not work last week?

你上周没有工作的主要原因是什么？

AK2

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

<table>
<thead>
<tr>
<th>Reason</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taking care of house or family</td>
<td>1</td>
</tr>
<tr>
<td>On planned vacation</td>
<td>2</td>
</tr>
<tr>
<td>Couldn’t find a job</td>
<td>3</td>
</tr>
<tr>
<td>Going to school/student</td>
<td>4</td>
</tr>
<tr>
<td>Retired</td>
<td>5</td>
</tr>
<tr>
<td>Disabled</td>
<td>6</td>
</tr>
<tr>
<td>Unable to work temporarily</td>
<td>7</td>
</tr>
<tr>
<td>On layoff or strike</td>
<td>8</td>
</tr>
<tr>
<td>On family or maternity leave</td>
<td>9</td>
</tr>
<tr>
<td>Off season</td>
<td>10</td>
</tr>
<tr>
<td>Sick</td>
<td>11</td>
</tr>
<tr>
<td>Other</td>
<td>91</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
</tbody>
</table>

QA11_G28 Do you usually work?

你通常工作吗？

AG10

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Looking for work</td>
<td>3</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
</tbody>
</table>

PROGRAMMING NOTE QA11_G29:

IF [AAGE = -7 OR AAGE < 65] AND QA11_G28 = 2 (DOES NOT USUALLY WORK), THEN CONTINUE WITH QA11_G29;
IF [AAGE = -7 OR AAGE < 65] AND [QA11_G27 = 5 (RETIRED) OR 6 (DISABLED)], THEN CONTINUE WITH QA11_G29;
ELSE GO TO PROGRAMMING NOTE QA11_G30

QA11_G29 Are you receiving Social Security Disability Insurance or SSDI?

您是否在领取安全残障保险补助金或SSDI?

AL22

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_G30:
IF (QA11_G26 = 1, 2,  -7, OR -8 (WORKING AT A JOB, WITH A JOB BUT NOT AT WORK, REF, DK) OR QA11_G28 = 1 (USUALLY WORKS), THEN CONTINUE WITH QA11_G30;
ELSE GO TO PROGRAMMING NOTE QA11_G31

QA11_G30  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?

您從事的主要工作的僱主是：私人公司、政府部門、還是自行經營者（個體經營者）或者從事家庭企業或農場內不付薪水的工作？

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

PROGRAMMING NOTE QA11_G31:
IF QA11_A16 = 1 (MARRIED) OR [QA11_D16 = 1 OR QA11_D17 = 1 5 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA11_G31;
IF QA11_A16 = 1, THEN DISPLAY “spouse”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1, THEN DISPLAY “partner”;
ELSE GO TO QA11_H1

QA11_G31  Which of the following was your {spouse/partner} doing last week?

您的配偶上週曾經從事以下哪些工作？

AG8

Working at a job or business, ...........................................1  [GO TO QA11_G33]
有工作或業務, ..................................................1  [GO TO QA11_G33]
With a job or business but not at work, ...........................2  [GO TO QA11_G33]
有工作或業務,但不在工作, ......................................2  [GO TO QA11_G33]
Looking for work, or ...........................................3  [GO TO QA11_G33]
在找工作，還是 .............................................3  [GO TO QA11_G33]
Not working at a job/business? ....................................4  [GO TO QA11_G33]
沒有從事工作或業務？ ........................................4  [GO TO QA11_G33]
REFUSED ..................................................................7  [GO TO QA11_G33]
DON'T KNOW ......................................................8  [GO TO QA11_G33]

QA11_G32  Does your {spouse/partner} usually work?

你的{配偶}通常工作嗎？

AG11

YES ...........................................................................1  [GO TO QA11_H1]
NO ..........................................................................2  [GO TO QA11_H1]
LOOKING FOR WORK .................................................3  [GO TO QA11_H1]
REFUSED ..................................................................7  [GO TO QA11_H1]
DON'T KNOW ......................................................8  [GO TO QA11_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?

您的配偶從事的主要工作的僱主是：私人公司、政府部門、還是自行經營者（個體經營者）或者從事家庭企業或農場內不付薪水的工作？

<table>
<thead>
<tr>
<th>AG9</th>
<th>[IF NEEDED, SAY: “Where did {he/she} work MOST hours?”] [IF NEEDED, SAY: “「他/她在哪裡工作的時間最長？」”]</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIVATE COMPANY, NON-PROFIT ORGANIZATION, OR FOUNDATION</td>
<td>1</td>
</tr>
<tr>
<td>GOVERNMENT</td>
<td>2</td>
</tr>
<tr>
<td>SELF-EMPLOYED</td>
<td>3</td>
</tr>
<tr>
<td>FAMILY BUSINESS OR FARM</td>
<td>4</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>8</td>
</tr>
</tbody>
</table>
Section H – Health Insurance

QA11_H1  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?

[CODE "3" OR "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

YES ...........................................................1
NO ...........................................................2 [GO TO QA11_H3]
DOCTOR/MY DOCTOR ....................................3
KAISER ......................................................4
MORE THAN ONE PLACE ................................5 [GO TO QA11_H3]
REFUSED ..................................................-7 [GO TO QA11_H3]
DON'T KNOW ..............................................-8

PROGRAMMING NOTE QA11_H2:
IF QA11_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE), THEN DISPLAY "What kind of place do you go to most often—a medical";
ELSE IF QA11_H1 = 3 (DOCTOR/MY DOCTOR), THEN DISPLAY "Is your doctor in a private";
ELSE IF QA11_H1 = 4 (KAISER), THEN CODE “1” FOR QA11_H2 AND GO TO QA11_H3

QA11_H2  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—醫生辦公室、診所或醫院診所、急診室或其他地方?

AH3

DOCTOR’S OFFICE/KAISER/OTHER HMO ..........1
CLINIC/HEALTH CENTER/HOSPITAL CLINIC ......2
EMERGENCY ROOM .......................................3
SOME OTHER PLACE (SPECIFY: __________) ... 91
NO ONE PLACE ...........................................92
REFUSED ..................................................-7
DON'T KNOW ..............................................-8
PROGRAMMING NOTE QA11_H3:
IF QA11_B6 = 1 OR QA11_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA11_B27 = 1 (YES, R VISITED ER FOR DIABETES) OR QA11_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN GO TO QA11_H4;
ELSE CONTINUE WITH QA11_H3

QA11_H3  During the past 12 months, did you visit a hospital emergency room for your own health?

在過去 12 個月中，你是否曾因自身的健康問題前往醫院急診室就診？

AH12

YES ..............................................................1
NO ...............................................................2 [GO TO QA11_H5]
REFUSED .....................................................-7 [GO TO QA11_H5]
DON'T KNOW ..................................................-8 [GO TO QA11_H5]

PROGRAMMING NOTE QA11_H4:
IF QA11_B6 = 1 OR QA11_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA11_B27 = 1 (YES, R VISITED ER FOR DIABETES) OR QA11_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN DISPLAY “During the past 12 months, how many times did you visit a hospital emergency room for your own health?”;
ELSE DISPLAY “How many times did you do that?”

QA11_H4  {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}?

AH95

________ NUMBER OF TIMES

REFUSED .....................................................-7
DON'T KNOW ..................................................-8

QA11_H5  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?

以下是有關您可能享有的健康保險類型的幾個問題。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 賠償?

AI1

[INCLUDE MEDICARE MANAGED PLANS AS WELL AS THE ORIGINAL MEDICARE PLAN.]

YES .....................................................................1 [GO TO PN QA11_H8]
NO .....................................................................2 [GO TO PN QA11_H15]
REFUSED ............................................................-7 [GO TO PN QA11_H15]
DON'T KNOW ..........................................................-8 [GO TO PN QA11_H15]

POST-NOTE QA11_H5:
IF QA11_H5 = 1, SET ARMCARE = 1 AND SET ARINSURE = 1
PROGRAMMING NOTE QA11_H6:
IF [AAGE > 64 OR QA11_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND QA11_H5 = 2 (NOT COVERED BY MEDICARE), THEN CONTINUE WITH QA11_H6;
ELSE GO TO PROGRAMMING NOTE QA11_H8

QA11_H6  Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?

雖然您刚才告诉过我您的年龄在65岁或65岁以上，但您没有享受联邦医疗护理保险，对不对？

   AI2   
   CORRECT, NOT COVERED BY MEDICARE ..........1 [GO TO PN QA11_H15]
   NOT CORRECT, R IS COVERED BY MEDICARE ....2 [GO TO PN QA11_H8]
   AGE IS INCORRECT .................................. 93
   REFUSED ............................................. -7 [GO TO PN QA11_H15]
   DON'T KNOW .......................................... -8 [GO TO PN QA11_H15]

POST-NOTE QA11_H6:
IF QA11_H6 = 2, SET ARMCCARE = 1 AND SET ARINSURE = 1

QA11_H7  What is your age, please?

請告诉我您的年龄多大。

   AI3   
   _______ YEARS OF AGE [HR: 18-105] [GO TO PN QA11_H15]
   REFUSED ............................................. -7 [GO TO PN QA11_H15]
   DON'T KNOW .......................................... -8 [GO TO PN QA11_H15]

POST NOTE QA11_H7: AIDATE
SET AIDATE = CURRENT DATE (YYYYMMDD);
SET AAGE = QA11_H7;
IF AAGE < 18, CODE AS IA AND TERMINATE
PROGRAMMING NOTE QA11_H8:
IF ARMCARE = 1, THEN CONTINUE WITH QA11_H8;
ELSE GO TO PROGRAMMING NOTE QA11_H15

QA11_H8   Is your MediCARE coverage provided through an HMO?

您的MediCARE保賠是通過HMO提供的嗎？

AH49

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

[IF R MENTIONS A HEALTH PLAN SUCH AS "Kaiser" OR "Blue Cross," CODE "1" (YES).]

YES.................................................................1
NO.................................................................2  [GO TO QA11_H10]
REFUSED......................................................-7  [GO TO QA11_H10]
DON'T KNOW..................................................-8  [GO TO QA11_H10]

POST-NOTE QA11_H8:
IF QA11_H8 = 1, SET ARMHMO = 1

QA11_H9   What is the name of your MediCARE HMO plan?

您的MediCARE HMO計劃名稱是什麼？

AH50

AARP MEDICARE COMPLETE ..................................1
AETNA .............................................................2
AETNA MEDICARE (SELECT/PREMIER) ..................3
ALAMEDA ALLIANCE FOR HEALTH .........................4
ALLIANCE COMPLETE CARE .............................5
ANTHEM BLUE CROSS/BLUE CROSS ......................6
ARCADIAN COMMUNITY CARE ..........................7
BLUE CROSS SENIOR SECURE ...........................8
BLUE SHIELD 65 PLUS ......................................9
BLUE SHIELD OF CALIFORNIA ..........................10
CAL OPTIMA .....................................................11
CARE 1ST HEALTH PLAN ..................................12
CARE ADVANTAGE ............................................13
CARE MORE ....................................................14
CEN CAL HEALTH.............................................15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH ......16
CENTRAL HEALTH PLAN OF CALIFORNIA ...........17
CHINESE COMMUNITY HEALTH PLAN ...............18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM ...........................................19
CIGNA ............................................................20
CITIZENS CHOICE HEALTHPLAN .......................21
COMMUNICARE ADVANTAGE ..............................22
COMMUNITY HEALTH GROUP ...........................23
COMMUNITY HEALTH PLAN ...............................24
CONTRA COSTA HEALTH PLAN .........................25
DEPARTMENT OF HEALTH SERVICES .................26
EASY CHOICE HEALTH PLAN .............................27
GEM CARE .......................................................... 28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN 29
GREAT-WEST ...................................................... 30
HEALTH NET ...................................................... 31
HEALTH PLAN OF SAN JOAQUIN .............................. 32
HEALTH PLAN OF SAN MATEO ................................. 33
HUMANA GOLD PLUS ........................................... 34
IEHP (INLAND EMPIRE HEALTH PLAN) ...................... 35
IEHP MEDICARE DUAL CHOICE ................................ 36
INTER VALLEY HEALTH PLAN ................................ 37
KAISER .............................................................. 38
KERN COUNTY HEALTH PLAN ................................ 39
L.A. CARE HEALTH PLAN ........................................ 40
MD CARE .................................................................. 41
MOLINA HEALTH PLAN .......................................... 42
MOLINA MEDICARE OPTIONS ................................. 43
ON LOK .................................................................. 44
ON LOK SENIOR HEALTH SERVICES ....................... 45
ONE CARE ............................................................ 46
PACIFICARE ......................................................... 47
PARTNERSHIP HEALTH PLAN OF CALIFORNIA .......... 48
SALUD CON HEALTH NET ....................................... 49
SAN FRANCISCO HEALTH PLAN ............................... 50
SANTA CLARA FAMILY HEALTH PLAN ..................... 51
SCAN HEALTH PLAN .............................................. 52
SECURE HORIZONS ............................................... 53
SENIOR ADVANTAGE ........................................... 54
SENIORITY PLUS .................................................. 55
SERVICE TO SENIORS .......................................... 56
SHARP HEALTH PLAN ............................................ 57
TOTAL FIT .................................................................. 58
VALLEY HEALTH PLAN .......................................... 59
VENTURA COUNTY HEALTH CARE PLAN ................ 60
WESTERN HEALTH ADVANTAGE ......................... 61
WESTERN HEALTH ADVANTAGE CARE+ .................. 62
CHAMPUS/CHAMP-VA .......................................... 63
TRICARE/TRICARE FOR LIFE/TRICARE PRIME ........ 64
VA HEALTH CARE SERVICES ................................. 65
MEDI-CAL ............................................................ 66
MEDI-CARE ........................................................ 67
MEDICARE ADVANTAGE ........................................ 68
OTHER ..................................................................... 91
OTHER (SPECIFY: ................................................ 92
REFUSED .................................................................. 92
DON'T KNOW ....................................................... 88
QA11_H10 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?

是您也享受聯邦醫療護理補充計劃保險？

AI4

[IF NEEDED, SAY: “These are policies that cover health care costs not covered by MediCARE alone.”]
[IF NEEDED, SAY: “此類保險支付聯邦醫療護理計劃不支付的醫療費用。”]

YES ..................................................................................1
NO..........................................................................................2 [GO TO PN QA11_H15]
REFUSED ..............................................................................-7 [GO TO PN QA11_H15]
DON’T KNOW .................................................................-8 [GO TO PN QA11_H15]

QA11_H11 For the {MediCARE HMO/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 Supplement plan}，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?

AH52

[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」。”]

DIRECTLY ...........................................................................1
CURRENT EMPLOYER ......................................................2
FORMER EMPLOYER .....................................................3
UNION ..............................................................................4
FAMILY BUSINESS ................................................................5
AARP ..................................................................................6
SPOUSE’S EMPLOYER ......................................................7
SPOUSE’S UNION ............................................................8
PROFESSIONAL/FRATERNAL ORGANIZATION ...9
OTHER ..............................................................................91
REFUSED ............................................................................-7
DON’T KNOW ......................................................................-8
QA11_H12  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？

AH53

[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。」]

"A deductible is the amount you pay for medical care before your health plan starts paying.”

“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。”

"Premium is the monthly charge for the cost of your health insurance plan.”]

“保費是您的醫療保險計劃的每月收費。”]

YES ..........................................................1
NO ..............................................................2
REFUSED ......................................................-7
DON’T KNOW .................................................-8

QA11_H13  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？

AH54

YES ..........................................................1
NO ..............................................................2 [GO TO PN QA11_H15]
REFUSED ......................................................-7 [GO TO PN QA11_H15]
DON’T KNOW .................................................-8 [GO TO PN QA11_H15]
QA11_H14  Who is that?
是誰？

[AH55]
[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: 「除了你本人，還有誰支付這項計劃的任何費用？例如，你的雇主、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？」]

CURRENT EMPLOYER ........................................1
FORMER EMPLOYER .........................................2
UNION......................................................................3
SPOUSE’S/PARTNER’S CURRENT EMPLOYER...4
SPOUSE’S/PARTNER’S FORMER EMPLOYER....5
PROFESSIONAL/FRATERNAL ORGANIZATION...6
MEDICAID/MEDI-CAL ASSISTANCE .....................7
HEALTHY FAMILIES ...........................................8
OTHER.....................................................................91
REFUSED .................................................................-7
DON’T KNOW .......................................................-8

POST-NOTE FOR QA11_H14:
IF QA11_H14 = 7, SET ARMCAL = 1;
IF QA11_H14 = 8, SET ARHFAM = 1

PROGRAMMING NOTE QA11_H15:
IF ARMCAL = 1, THEN DISPLAY "Is it correct that you are";
ELSE DISPLAY "Are you"

QA11_H15  {Is it correct that you are/Are you) covered by Medi-CAL?
您有沒有享受加州醫療輔助計劃( Medi-CAL )？

[AI6]
[IF NEEDED, SAY: “A plan for certain low-income children and their families, pregnant women, and disabled or elderly people.”]
[IF NEEDED, SAY: 「加州醫療輔助計劃是為某些低收入兒童及其家庭、孕婦、殘障人士或年長者提供的醫療計劃。」]

YES .................................................................1  [GO TO QA11_H17]
NO .................................................................2
REFUSED ..........................................................-7
DON’T KNOW .................................................-8

POST-NOTE FOR QA11_H15:
IF QA11_H15 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;
IF ARMCAL = 1 AND QA11_H15 = 2, SET ARMCAL = 0
PROGRAMMING NOTE QA11_H16:
IF AAGE > 18 OR [QA11_A4 ≠ -7 OR -8 (REF/DK)] OR ENUM.AGE > 18 OR IF AGE IS UNKNOWN, THEN GO TO PROGRAMMING NOTE QA11_H17;
ELSE IF [AAGE = 18 OR QA11_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18] AND ARHFAM = 1, THEN CONTINUE WITH QA11_H16 AND DISPLAY "Is it correct, then, that you are";
ELSE IF [AAGE = 18 OR QA11_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18], THEN CONTINUE WITH QA11_H16 AND DISPLAY "Are you"

QA11_H16  (Is it correct, then, that you are/Are you) covered by the Healthy Families Program?
您是否享受健康家庭計劃(Healthy Families)?

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]
[IF NEEDED, SAY: “健康家庭計劃是一項州立計劃，為年齡在19歲以下的孩子支付醫療保險費用。”]

YES .................................................................1
NO .................................................................2
REFUSED ....................................................... -7
DON'T KNOW ................................................... -8

POST-NOTE FOR QA11_H16:
IF QA11_H16 = 1, THEN SET ARHFAM = 1 AND ARINSURE = 1;
IF ARHFAM = 1 AND QA11_H16 = 2, THEN SET ARHFAM = 0

PROGRAMMING NOTE QA11_H17:
IF ARSUPP = 1, THEN DISPLAY “Besides the Medicare supplemental plan you told me about” AND “any other”;
ELSE IF ARMHMO = 1, THEN DISPLAY “Besides the Medicare HMO plan you told me about” AND “any other”;
ELSE DISPLAY “a”

QA11_H17  (Besides the Medicare supplemental plan you told me about/Besides the Medicare HMO 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?
您有沒有享受目前或以前的雇主或工會提供的醫療保險計劃或 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？”]

YES .................................................................1
NO .................................................................2
REFUSED ....................................................... -7
DON'T KNOW ................................................... -8

POST-NOTE FOR QA11_H17:
IF QA11_H17 = 1, THEN SET AREMPOTH = 1 AND ARINSURE = 1
PROGRAMMING NOTE QA11_H18:  
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, AND EMPLOYER),  
THEN CONTINUE WITH QA11_H18;  
ELSE GO TO PROGRAMMING NOTE QA11_H19

QA11_H18 Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO?

您有沒有享受您直接從保險公司或HMO 購買的醫療保險計劃？

AI11

[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: “不要包括只支付某些疾病如癌症或中風費用、或只在您住院時才給您「額外現金」的計劃。”]

YES .........................................................1  
NO ..........................................................2  
REFUSED ...................................................-7  
DON'T KNOW ................................................-8

POST-NOTE FOR QA11_H18:  
IF QA11_H18 = 1, THEN SET ARDIRECT = 1 AND ARINSURE = 1  
PROGRAMMING NOTE QA11_H19:  
IF QA11_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA11_H18 = 1 (PURCHASED OWN COVERAGE),  
THEN CONTINUE WITH QA11_H19;  
ELSE GO TO PROGRAMMING NOTE QA11_H24

QA11_H19 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？

AI9

[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？」”]

IN OWN NAME ..................................................1  
[GO TO PN QA11_H21]  
IN SOMEONE ELSE’S NAME .................................2  
[GO TO PN QA11_H21]  
REFUSED ...................................................-7  
[GO TO PN QA11_H21]  
DON'T KNOW ................................................-8  
[GO TO PN QA11_H21]

POST-NOTE FOR QA11_H19:  
IF QA11_H17 = 1 AND QA11_H19 = 1, THEN SET AREMPOWN = 1 AND ARINSURE = 1 AND AREMPOTH = 0;  
IF QA11_H17 = 1 AND QA11_H19 = 2, -7, OR -8, THEN SET AREMPOTH = 1 AND ARINSURE = 1;  
IF QA11_H18 = 1 AND QA11_H19 = 1, THEN SET ARDIROWN = 1 AND ARINSURE = 1;  
IF QA11_H18 = 1 AND QA11_H19 = 2, -7, OR -8, THEN SET ARDIROTH = 1 AND ARINSURE = 1
PROGRAMMING NOTE QA11_H20:
IF QA11_A16 = 1 (MARRIED) OR [QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] OR QA11_G13 = 1 (LIVING WITH PARENTS) OR AAGE < 26, THEN CONTINUE WITH QA11_H20;
ELSE GO TO PROGRAMMING NOTE QA11_H21;
IF QA11_A16 = 1, THEN DISPLAY “spouse’s name”; 
IF QA11_A16 ≠ 1 AND (QA11_D16 = 1 OR QA11_D17 = 1), THEN DISPLAY “partner’s name; 
IF QA11_G13 = 1 OR AAGE < 26, THEN DISPLAY “parent’s name”;

<table>
<thead>
<tr>
<th>QA11_H20</th>
<th>Is the plan in your {spouse’s name,} {partner’s name,} {parent’s name,} or someone else’s name?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>是否以您的{}名義參加該項計劃？</td>
</tr>
</tbody>
</table>

| A19A     | IN SPOUSE’S/PARTNER’S NAME ..................................1 |
|          | IN PARENT’S NAME ..............................................2 |
|          | IN SOMEONE ELSE’S NAME .....................................3 |
|          | REFUSED ..................................................................7 |
|          | DON’T KNOW .........................................................8 |

POST-NOTE FOR QA11_H20:
IF QA11_H17 = 1 AND QA11_H20 = 1, THEN SET AREMPS = 1 AND AREMPOTH = 0 AND ARSAMEP=1;
IF QA11_H17 = 1 AND QA11_H20 = 2, THEN SET AREMPAR =1 AND AREMPOTH = 0;
IF QA11_H18 = 1 AND QA11_H20 = 1, THEN SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMEP=1;
IF QA11_H18 = 1 AND QA11_H20 = 2, THEN SET ARDIRPAR = 1 AND ARDIROTH = 0
PROGRAMMING NOTE QA11_H21:
IF QA11_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA11_H18 = 1 (PURCHASED OWN COVERAGE),
THEN CONTINUE WITH QA11_H21;
ELSE GO TO PROGRAMMING NOTE QA11_H24

QA11_H21  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。

AH57

[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 a health plan pays for your
main health care coverage.”]

[IF NEEDED, SAY: “A deductible is the amount you pay for medical care before your health plan starts
paying.”]

“A deductible is the amount you pay for medical care before your health plan starts
paying.”

“共付款是您每次看病或使用健康護理系統服務時支付的部份健康護理費用，由其他人支付您
的主要健康護理保賠費用。”

“Premium is the monthly charge for the cost of your health insurance plan.”]

“保費是您的健康保險計劃的每月收費。”

YES ................................................................. 1
NO ................................................................. 2
REFUSED ......................................................... -7
DON'T KNOW ...................................................... -8

[GO TO PN QA11_H23]

QA11_H22  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？

AH58

YES ................................................................. 1
NO ................................................................. 2
REFUSED ......................................................... -7
DON'T KNOW ...................................................... -8

[GO TO PN QA11_H24]

[GO TO PN QA11_H24]
PROGRAMMING NOTE QA11_H23:
IF QA11_H21 = 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”

QA11_H23  (Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that)?

AH56

[IF NEEDED, SAY: “Who besides yourself pays any portion of the cost for that plan, such as your employer, a union, or professional organization?] [IF NEEDED, SAY: “除了你本人，還有誰支付這項計劃的任何費用？例如，你的雇主、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？”]

CURRENT EMPLOYER ........................................1
FORMER EMPLOYER ....................................2
UNION .........................................................3
SPOUSE’S/Partner’S CURRENT EMPLOYER ....4
SPOUSE’S/Partner’S FORMER EMPLOYER .......5
PROFESSIONAL/FRATERNAL ORGANIZATION ..6
MEDICAID/MEDICAL ASSISTANCE ..............7
HEALTHY FAMILIES .....................................8
MEDICARE ..................................................9
HEALTHY KIDS ..........................................10
OTHER .......................................................91
REFUSED ....................................................7
DON’T KNOW ..............................................-8

POST-NOTE QA11_H23:
IF QA11_H23 = 1, 2, OR 3, THEN SET AREMPOWN = 1;
IF QA11_H23 = 4 OR 5, THEN SET AREMPSP = 1;
IF QA11_H23 = 6, THEN SET AROTHER = 1;
IF QA11_H23 = 10, THEN SET ARHKID = 1;
IF QA11_H23 = 9, THEN SET ARMPC.ARDCARE = 1 AND ARDIRECT = 0;
IF QA11_H23 = 7, THEN SET ARMPC.ARMCAL = 1 AND ARDIRECT = 0;
IF QA11_H23 = 8, THEN SET ARHFAM = 1 AND ARDIRECT = 0;
IF QA11_H23 = 91, THEN SET AROTHER = 1
PROGRAMMING NOTE QA11_H24:
IF [QA11_G26 = 1 OR 2 (R WORKED LAST WEEK) OR QA11_G28 = 1 (R USUALLY WORKS)] AND QA11_G30 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOWN ≠ 1 (NO EMPLOYER-BASED COVERAGE), THEN CONTINUE WITH QA11_H24;
ELSE GO TO PROGRAMMING NOTE QA11_H28

QA11_H24  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？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
</tbody>
</table>

[GO TO PN QA11_H28]

QA11_H25  Are you eligible to be in this plan?

您是否有資格參加該項計劃？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
</tbody>
</table>

[GO TO QA11_H27]

[GO TO PN QA11_H28]

QA11_H26  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么？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>COVERED BY ANOTHER PLAN</td>
<td>1</td>
</tr>
<tr>
<td>TOO EXPENSIVE</td>
<td>2</td>
</tr>
<tr>
<td>DIDN'T LIKE PLAN OFFERED</td>
<td>3</td>
</tr>
<tr>
<td>DON'T NEED OR BELIEVE IN HEALTH INSURANCE</td>
<td>4</td>
</tr>
<tr>
<td>OTHER (SPECIFY: ____________)</td>
<td>91</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
</tbody>
</table>

[GO TO PN QA11_H28]

[GO TO PN QA11_H28]

QA11_H27  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么？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HAVEN'T YET WORKED FOR THIS EMPLOYER LONG ENOUGH TO BE COVERED</td>
<td>1</td>
</tr>
<tr>
<td>CONTRACT OR TEMPORARY EMPLOYEES NOT ALLOWED IN PLAN</td>
<td>2</td>
</tr>
<tr>
<td>DON'T WORK ENOUGH HOURS PER WEEK OR WEEKS PER YEAR</td>
<td>3</td>
</tr>
<tr>
<td>OTHER (SPECIFY: ____________)</td>
<td>91</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
</tbody>
</table>

[GO TO PN QA11_H28]

[GO TO PN QA11_H28]
PROGRAMMING NOTE QA11_H28:
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, OR PRIVATE PLAN), THEN CONTINUE WITH QA11_H28;
ELSE GO TO PROGRAMMING NOTE QA11_H29

QA11_H28 Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?
您是否享受 CHAMPUS/CHAMP VA、 Tricare、或其他軍隊醫療護理計劃？

AI16
YES ..............................................................................1
NO ..............................................................................2
REFUSED .....................................................................-7
DON'T KNOW .................................................................-8

POST-NOTE QA11_H28:
IF QA11_H28 = 1, THEN SET ARMILIT = 1 AND ARINSURE = 1

PROGRAMMING NOTE QA11_H29:
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) AND AAGE = 18, THEN CONTINUE WITH QA11_H29 AND DISPLAY “Healthy Kids”;
ELSE GO TO PROGRAMMING NOTE QA11_H30

QA11_H29 Are you covered by the Healthy Kids program?
您是否享受Healthy Kids計劃保賠？

AH70
[IF NEEDED, SAY: “Healthy Kids is a program for children in your county.”]
[IF NEEDED, SAY: “Healthy Kids是一個為您郡內的兒童提供的計劃。”]
YES .................................................................1
NO .................................................................2
REFUSED .............................................................-7
DON'T KNOW ..................................................-8

POST-NOTE QA11_H29:
IF QA11_H29 = 1, THEN SET ARHKID = 1 AND ARINSURE = 1
**PROGRAMMING NOTE QA11_H30:**

IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, OR HEALTHY KIDS), THEN CONTINUE WITH QA11_H30;
ELSE GO TO PROGRAMMING NOTE QA11_H32.

**QA11_H30**

Are you covered by some other government health program, such as AIM, “Mister MIP,” the Family PACT program, PCIP, or something else?

你是否享受其他政府醫療保險計劃，例如AIM、Mister MIP、Family PACT、PCIP或其他計劃？

**AI17**

[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；PCIP是原有病症保險計劃。”]

YES.................................................................1
NO.................................................................2
REFUSED.........................................................7
DON'T KNOW...................................................8

**POST-NOTE QA11_H30:**

IF QA11_H30 = 1, THEN SET AROTHGOV = 1 AND ARINSURE = 1

**QA11_H31**

ASK IF NECESSARY: "What is the name of this program?"

ASK IF NECESSARY: “保險計劃的名稱是什麼?”

**AI17A**

AIM.................................................................1
MRMIP ("Mister Mip")...........................................2
FAMILY PACT....................................................3
PCIP...............................................................4
OTHER (SPECIFY: _____________) .................. 91
REFUSED.........................................................7
DON'T KNOW...................................................8
PROGRAMMING NOTE QA11_H32:
IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, HEALTHY KIDS, AND OTHER GOVERNMENT PLAN), THEN CONTINUE WITH QA11_H32; ELSE GO TO PROGRAMMING NOTE QA11_H36

QA11_H32 Do you have any health insurance coverage through a plan that I missed?

您有沒有享受任何我可能漏掉的其他醫療保險計劃？

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Refused</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>-7</td>
<td>-8</td>
</tr>
</tbody>
</table>
QA11_H33  What type of health insurance do you have?

您的醫療保險屬於哪一種類型？

[code all that apply]

[probe: "Any others?"]
[probe: "還有任何其他人或機構嗎？"]

[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: "您是從目前或過去的雇主/工會、學校、專業社團、商業集團或其他組織，還是直接從醫療計劃獲得這項計劃？"]

through current or former employer/union ..................................................1
through school, professional association, trade group, or other organization ...................................2
purchased directly from health plan (by r or anyone else) ...........................................3
medicare .............................................................................................................4
medi-cal .............................................................................................................5
healthy families .................................................................................................6
champus/champ-va, tricare, va or some other military health care ............................................7
indian health service, tribal health program or urban indian clinic .............................................8
healthy kids .......................................................................................................9
other government health plan ................................................................. 91
other non-government health plan.......................................................... 92
refused ...............................................................................................................7
don't know ......................................................................................................-8

post-note qa11_h33:
if qa11_h33 = 1, then set arempoth = 1 and arinsurance = 1;
if qa11_h33 = 2, then set arempoth = 1 and arinsurance = 1;
if qa11_h33 = 3, then set ardirect = 1 and arinsurance = 1;
if qa11_h33 = 4, then set armcare = 1 and arinsurance = 1;
if qa11_h33 = 5, then set armcal = 1 and arinsurance = 1;
if qa11_h33 = 6, then set arhfam = 1 and arinsurance = 1;
if qa11_h33 = 7, then set armilit = 1 and arinsurance = 1;
if qa11_h33 = 8, then set arihs = 1;
if qa11_h33 = 9, then set arhkid = 1 and arinsurance = 1;
if qa11_h33 = 91, then set arothgov = 1 and arinsurance = 1;
if qa11_h33 = 92, -7, or -8, then set aother = 1 and arinsurance = 1
PROGRAMMING NOTE QA11_H34:
IF QA11_H33 = 1, 2, OR 3, THEN CONTINUE WITH QA11_H34;
ELSE GO TO PROGRAMMING NOTE QA11_H36

QA11_H34  Was this plan obtained in your own name or in the name of someone else?

該項目計劃是以您的名義還是以其他人的名義獲得？

[PROBE: “Even someone who does not live in this household?”]
[PROBE: “甚至包括不住在您家中的人。”]

IN OWN NAME ......................................................................1 [GO TO PN QA11_H36]
IN SOMEONE ELSE’S NAME .................................................2
REFUSED ..................................................................................7 [GO TO PN QA11_H36]
DON’T KNOW ...........................................................................8 [GO TO PN QA11_H36]

POST-NOTE QA11_H34:
IF (QA11_H33 = 1 OR 2) AND QA11_H34 = 1, THEN SET AREMPOWN = 1 AND AREMPOTH = 0 AND ARINSURE = 1;
IF QA11_H33 = 3 AND QA11_H34 = 1, THEN SET ARDIROWN = 1 AND ARDIROTH = 0 AND ARINSURE = 1;
IF (QA11_H33 = 1 OR 2) AND (QA11_H34 = 2, -7, OR -8), THEN SET AREMPOTH = 1 AND AREMPOWN = 0 AND ARINSURE = 1;
IF QA11_H33 = 3 AND (QA11_H34 = 2, -7, OR -8), THEN SET ARDIROTH = 1 AND ARDIROWN = 0 AND ARINSURE = 1

PROGRAMMING NOTE QA11_H35:
IF QA11_A16 = 1 (MARRIED) OR [QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] OR QA11_G13 = 1 (LIVING WITH PARENTS) OR AAGE < 26, THEN CONTINUE WITH QA11_H35;
ELSE GO TO PROGRAMMING NOTE QA11_H36;
IF QA11_A16 = 1 THEN DISPLAY “spouse’s name”;
IF QA11_A16 ≠ 1 AND QA11_D16 = 1 OR QA11_D17 = 1, THEN DISPLAY “partner’s name”;
IF QA11_G13 = 1 OR AAGE < 26, THEN DISPLAY “parent’s name”;

QA11_H35  Is the plan in your {spouse’s name,} {partner’s name,} {parent’s name,} or someone else’s name?

該項計劃是以您的{spouse's/partner's/spouse's, partner's, or someone else's}
名義獲得的嗎？

IN SPOUSE’S/PARTNER’S NAME ..............................................1
IN PARENT’S NAME ..............................................................2
IN SOMEONE ELSE’S NAME ................................................3
REFUSED ..................................................................................7
DON’T KNOW ...........................................................................8

POST-NOTE QA11_H35:
IF QA11_H35 = 1, SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;
IF QA11_H35 = 2, SET AREMPPAR = 1 AND AREMPOWN = 0
PROGRAMMING NOTE QA11_H36:
IF ARIHS ≠ 1 AND QA11_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), THEN CONTINUE WITH QA11_H36;
ELSE GO TO PROGRAMMING NOTE QA11_H37_INTRO

QA11_H36  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?

AI20

YES .................................................................1
NO .................................................................2
REFUSED ...........................................................-7
DON'T KNOW ......................................................-8

POST-NOTE QA11_H36:
IF QA11_H36 = 1, THEN SET ARIHS = 1

PROGRAMMING NOTE QA11_H37_INTRO:
IF [QA11_A16 = 1 (MARRIED) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11_G11 = 1 (SPOUSE/PARTNER LIVING IN HH), THEN CONTINUE WITH QA11_H37_INTRO;
IF QA11_A16 = 1, THEN DISPLAY “spouse”;  
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1, THEN DISPLAY “partner”;  
ELSE GO TO PROGRAMMING NOTE QA11_H57

QA11_H37_INTRO
These next questions are about the type of health insurance your {spouse/partner} may have.

以下問題是關于您的{spouse}的健康保險類型的。

AI37intro

PROGRAMMING NOTE QA11_H37:
IF SPOUSE 65 OR OLDER AND ARMCARE ≠ 1, THEN CONTINUE WITH QA11_H37 WITHOUT DISPLAY;
ELSE IF SPOUSE 65 OR OLDER AND ARMCARE = 1, THEN CONTINUE WITH QA11_H37 AND DISPLAY “You said that you are covered by Medicare.” AND “also”;
ELSE GO TO PROGRAMMING NOTE QA11_H40

QA11_H37  {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?

{} 能享受Medicare保賠嗎？

AI37

YES .................................................................1
NO .................................................................2
REFUSED ...........................................................-7
DON'T KNOW ......................................................-8

POST-NOTE QA11_H37:
IF QA11_H37 = 1, THEN SET SPMCARE = 1 AND SPINSURE = 1
PROGRAMMING NOTE QA11_H38:
IF QA11_H37 = 1 AND ARMHMO ≠ 1, THEN CONTINUE WITH QA11_H38 WITHOUT DISPLAY;
ELSE IF QA11_H37 = 1 AND ARMHMO = 1, THEN CONTINUE WITH QA11_H38 AND DISPLAY “You said that your Medicare coverage is provided through an HMO.” AND “also”;
IF QA11_A16 = 1 (MARRIED) THEN DISPLAY “spouse’s”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner’s”;
ELSE GO TO PROGRAMMING NOTE QA11_H39

QA11_H38  {You said that your Medicare coverage is provided through an HMO.} Is your {spouse’s/partner’s} Medicare {also} provided through an HMO?

你{spouse}的Medicare是通過HMO提供的嗎？

AH61

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................7
DON'T KNOW .................................................-8

POST-NOTE QA11_H38:
IF QA11_H38 = 1, THEN SET SPMHMO = 1 AND SPINSURE = 1

PROGRAMMING NOTE QA11_H39:
IF SPHMO = 1, THEN GO TO PROGRAMMING NOTE QA11_H40;
ELSE IF QA11_H37 = 1 AND ARSUPP ≠ 1, THEN CONTINUE WITH QA11_H39 WITHOUT DISPLAY;
ELSE IF QA11_H37 = 1 AND ARSUPP = 1, THEN CONTINUE WITH QA11_H39 AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”;
IF QA11_A16 = 1 (MARRIED), THEN DISPLAY “spouse”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner”;
ELSE GO TO PROGRAMMING NOTE QA11_H40

QA11_H39  {You said that you have a Medicare Supplement plan.} Does your {spouse/partner} {also} have a Medicare supplemental policy?

您說您可以享受Medicare保賠。{} 是否也能享受Medicare保賠？

AI37A

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................7
DON'T KNOW .................................................-8

POST-NOTE QA11_H39:
IF QA11_H39 = 1, THEN SET SPSUPP = 1 AND SPINSURE = 1
PROGRAMMING NOTE QA11_H40:
IF ARMCAL = 1, THEN CONTINUE WITH QA11_H40 WITHOUT DISPLAY;
IF ARMHCARE = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA11_H41

QA11_H40  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）。 (也) 是否也能享受 Medi-Cal 保賠？

<table>
<thead>
<tr>
<th>AI38</th>
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<tbody>
<tr>
<td>YES .................................................................................................................. 1</td>
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<tr>
<td>NO .................................................................................................................. 2</td>
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<tr>
<td>REFUSED ........................................................................................................... 7</td>
</tr>
<tr>
<td>DON'T KNOW ................................................................................................. 8</td>
</tr>
</tbody>
</table>

POST-NOTE QA11_H40:
IF QA11_H40 = 1, THEN SET SPMCAL = 1 AND SPINSURE = 1

PROGRAMMING NOTE QA11_H41:
IF ARHFAM = 1 AND SPOUSE/PARTNER AGE ≤ 18, THEN CONTINUE WITH QA11_H41;
IF ARMHCARE = 1 OR ARMCAL = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA11_H42

QA11_H41  You said you (also) have Healthy Families. Is (SPOUSE/PARTNER) (also) covered by Healthy Families?

您說您 (也) 可以享受 Healthy Families（健康家庭計劃）。 (也) 是否也能享受 Healthy Families 計劃保賠？

<table>
<thead>
<tr>
<th>AI39</th>
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<tbody>
<tr>
<td>YES .................................................................................................................. 1</td>
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<tr>
<td>NO .................................................................................................................. 2</td>
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<td>REFUSED ........................................................................................................... 7</td>
</tr>
<tr>
<td>DON'T KNOW ................................................................................................. 8</td>
</tr>
</tbody>
</table>

POST-NOTE QA11_H41:
IF QA11_H41 = 1, THEN SET SPHFAM = 1 AND SPINSURE = 1
**PROGRAMMING NOTE QA11_H42:**

IF AREMPOWN = 1, THEN CONTINUE WITH QA11_H42;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE QA11_H43

**QA11_H42**

You said you have insurance from your current or former employer or union. Is (SPOUSE/PARTNER) {also} covered by the insurance from your employer?

您說您享受您目前或以前僱主或工會提供的保險。是否也能享受您的僱主所提供的保險的保賠？

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<tbody>
<tr>
<td>YES</td>
<td>..........................................................1</td>
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<td>...........................................................2</td>
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<tr>
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<td>.........................................................3</td>
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<td>..................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>..................................................-8</td>
</tr>
</tbody>
</table>

**POST-NOTE QA11_H42:**

IF QA11_H42 = 1, THEN SET SPEMSP = 1 AND SPINSURE = 1 AND ARSAMESP=1;

**PROGRAMMING NOTE QA11_H43:**

IF [QA11_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED)] OR QA11_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), THEN CONTINUE WITH QA11_H43;
IF AREMPSP = 1 AND QA11_A16 = 1, THEN DISPLAY “You said you have insurance from your spouse’s employer or union.”;
ELSE IF AREMPSP = 1 AND QA11_D16 = 1 OR QA11_D17 = 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 QA11_H44

**QA11_H43**

{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?

是否能夠透過自己的僱主獲得保賠？

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<tr>
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<td>REFUSED</td>
<td>..................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>..................................................-8</td>
</tr>
</tbody>
</table>

**POST-NOTE QA11_H43:**

IF QA11_H43 = 1, THEN SET SPEMPOWN = 1 AND SPINSURE = 1
You said you (also) have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) also covered by this plan?

您說您（）有一項直接從保險公司購買的計劃。（）是否也能享受該項計劃的保賠？

**AI41**

**YES** ..............................................................1
**NO** .................................................................2
**REFUSED** .........................................................-7
**DON'T KNOW** .....................................................-8

**POST-NOTE QA11_H44:**
**IF QA11_H44 = 1, THEN SET SPDIRECT = 1 AND SPINSURE = 1 AND ARSAMESP=1;**
**PROGRAMMING NOTE QA11_H45:**
**IF ARMILIT = 1, THEN CONTINUE WITH QA11_H45;**
**IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, THEN DISPLAY “also”;**
**ELSE GO TO PROGRAMMING NOTE QA11_H46**

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?

您說您是透過（）CHAMPUS/CHAMPUS-VA，VA，TRICARE，VA或其他某種軍隊健康護理計劃享受健康保險。（）是否也能享受該項計劃的保賠？

**AI42**

**YES** ..............................................................1
**NO** .................................................................2
**REFUSED** .........................................................-7
**DON'T KNOW** .....................................................-8

**POST-NOTE QA11_H45:**
**IF QA11_H45 = 1, THEN SET SPMILIT = 1 AND SPINSURE = 1 AND ARSAMESP=1;**
**PROGRAMMING NOTE QA11_H46:**

IF AROTHGOV = 1, THEN CONTINUE WITH QA11_H46;
IF QA11_H31 = 1, THEN DISPLAY “AIM”;
IF QA11_H31 = 2, THEN DISPLAY “MRMIP”;
IF QA11_H31 = 3, THEN DISPLAY “Family PACT”;
IF QA11_H31 = 4, THEN DISPLAY “PCIP”;
IF QA11_H31 = 91, THEN DISPLAY “some government health plan”;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, THEN DISPLAY “also”;
ELSE GO TO PROGRAMMING NOTE QA11_H47

**QA11_H46**

You said you {also} have health insurance through {AIM/MRMIP/Family PACT/PCIP/some government health plan}. Is (SPOUSE/PARTNER) also covered by this plan?

你說你 {還} 透過 {一些政府醫療保險計劃} 享受醫療保險。你的 {配偶} 是否也在這項計劃的承保範圍內？

**AI42A**

YES ................................................................. 1
NO ................................................................. 2
REFUSED ......................................................-7
DON’T KNOW ...................................................-8

**POST-NOTE QA11_H46:**

IF QA11_H46 = 1, THEN SET SPOTHGOV = 1 AND SPINSURE = 1

**PROGRAMMING NOTE QA11_H47:**

IF SPINSURE ≠ 1, THEN DISPLAY “any”;
ELSE DISPLAY “through any other source”

**QA11_H47**

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

{} 是否有任何健康保險？

**AI46**

YES ................................................................. 1
NO ................................................................. 2
[GO TO PN QA11_H49]
REFUSED ......................................................-7
[GO TO QA11_H53]
DON’T KNOW ...................................................-8
[GO TO QA11_H53]
What type of health insurance does {he/she} have?

(CODE ALL THAT APPLY.)

[PROBE: "Any others?"]
[PROBE: 「還有任何其他類型的健康保險嗎？」]

[IF NEEDED, SAY: "Such as from a current or former employer, or that they purchased directly from a health plan."]

[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?"]

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THROUGH CURRENT OR FORMER EMPLOYER/UNION</td>
</tr>
<tr>
<td>2</td>
<td>THROUGH SCHOOL, PROFESSION ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION</td>
</tr>
<tr>
<td>3</td>
<td>PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE)</td>
</tr>
<tr>
<td>4</td>
<td>MEDICARE</td>
</tr>
<tr>
<td>5</td>
<td>MEDI-CAL</td>
</tr>
<tr>
<td>6</td>
<td>HEALTHY FAMILIES</td>
</tr>
<tr>
<td>7</td>
<td>CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE</td>
</tr>
<tr>
<td>8</td>
<td>INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC</td>
</tr>
<tr>
<td>9</td>
<td>HEALTHY KIDS</td>
</tr>
<tr>
<td>91</td>
<td>OTHER GOVERNMENT HEALTH PLAN</td>
</tr>
<tr>
<td>92</td>
<td>OTHER NON-GOVERNMENT HEALTH PLAN</td>
</tr>
<tr>
<td>7</td>
<td>REFUSED</td>
</tr>
<tr>
<td>8</td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

POST-NOTE QA11_H48:

- IF QA11_H48 = 1, THEN SET SPEMPOTH = 1 AND SPINSURE = 1;
- IF QA11_H48 = 2, THEN SET SPOther = 1 AND SPINSURE = 1;
- IF QA11_H48 = 3, THEN SET SPDIRECT = 1 AND SPINSURE = 1;
- IF QA11_H48 = 4, THEN SET SPMCARE = 1 AND SPINSURE = 1;
- IF QA11_H48 = 5, THEN SET SPMCAL = 1 AND SPINSURE = 1;
- IF QA11_H48 = 6, THEN SET SPHFAM = 1 AND SPINSURE = 1;
- IF QA11_H48 = 7, THEN SET SPMILIT = 1 AND SPINSURE = 1;
- IF QA11_H48 = 8, THEN SET SPIHS = 1;
- IF QA11_H48 = 9, THEN SET SPKID = 1 AND SPINSURE = 1;
- IF QA11_H48 = 91, THEN SET SPOTHGOV = 1 AND SPINSURE = 1;
- IF QA11_H48 = 92, -7, OR -8, THEN SET SPOther = 1 AND SPINSURE = 1
PROGRAMMING NOTE QA11_H49:
IF SPINSURE ≠ 1, THEN CONTINUE WITH QA11_H49;
ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN GO TO PROGRAMMING NOTE QA11_H51;
ELSE GO TO PROGRAMMING NOTE QA11_H53

QA11_H49  You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?

您說 {} 沒有來自任何來源的健康保險，對不對？

AI48

YES .................................................................1  [GO TO PN QA11_H53]
NO .................................................................2  [GO TO PN QA11_H53]
REFUSED .........................................................-7  [GO TO PN QA11_H53]
DON'T KNOW ....................................................-8  [GO TO PN QA11_H53]
What type of health insurance does (he/she) have?

{} 享受哪一種類型的健康保險？

[CODE ALL THAT APPLY]

[PROBE: "Any others?"
[PROBE: "還享受任何其他類型的健康保險嗎？"]

[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: “{} 是透過目前或以前的僱主/工會、學校、專業協會、行業團體、其他機構還是直接從健康計劃獲得這項計劃的？”]

EMPLOYER/UNION .................................................................1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION,
TRADE GROUP OR OTHER ORGANIZATION ..........2
PURCHASED DIRECTLY FROM HEALTH PLAN
(BY R OR ANYONE ELSE) .........................................................3
MEDICARE ..............................................................................4
MEDI-CAL .................................................................5
HEALTHY FAMILIES .................................................................6
CHAMPUS/CHAMP-VA, TRICARE, VA OR
SOME OTHER MILITARY HEALTH CARE ....................7
INDIAN HEALTH SERVICE, TRIBAL HEALTH
PROGRAM OR URBAN INDIAN CLINIC ....................8
HEALTHY KIDS .................................................................9
OTHER GOVERNMENT HEALTH PLAN ................... 91
OTHER NON-GOVERNMENT HEALTH PLAN ............ 92
REFUSED ................................................................. -7
DON'T KNOW ................................................................ -8

POST-NOTE QA11_H50:
IF QA11_H50 = 1, THEN SET SPEMPOTH = 1 AND SPINSURE = 1;
IF QA11_H50 = 2, THEN SET SPOOTHER = 1 AND SPINSURE = 1;
IF QA11_H50 = 3, THEN SET SPDIRECT = 1 AND SPINSURE = 1;
IF QA11_H50 = 4, THEN SET SPMCARE = 1 AND SPINSURE = 1;
IF QA11_H50 = 5, THEN SET SPMCAL = 1 AND SPINSURE = 1;
IF QA11_H50 = 6, THEN SET SPHFAM = 1 AND SPINSURE = 1;
IF QA11_H50 = 7, THEN SET SPMILIT = 1 AND SPINSURE = 1;
IF QA11_H50 = 8, THEN SET SPIHS = 1;
IF QA11_H50 = 9, THEN SET SPKID = 1 AND SPINSURE = 1;
IF QA11_H50 = 91, THEN SET SPOTHGOV = 1 AND SPINSURE = 1;
IF QA11_H50 = 92, -7, OR -8, THEN SET SPOOTHER = 1 AND SPINSURE = 1;
PROGRAMMING NOTE QA11_H51:
IF (QA11_H48 = 1, 2, OR 3) OR (QA11_H50 = 1, 2, OR 3), THEN CONTINUE WITH QA11_H51;
IF QA11_A16 = 1 (MARRIED), THEN DISPLAY “spouse’s”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner’s”;
ELSE GO TO PROGRAMMING NOTE QA11_H53

<table>
<thead>
<tr>
<th>QA11_H51</th>
<th>Was this plan obtained in your {spouse’s/partner’s} name or in the name of someone else?</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN SPOUSE’S/PARTNER’S NAME ..............................................1</td>
<td>[GO TO PN QA11_H53]</td>
</tr>
<tr>
<td>IN SOMEONE ELSE’S NAME ......................................................2</td>
<td></td>
</tr>
<tr>
<td>REFUSED ..............................................................................-7</td>
<td>[GO TO PN QA11_H53]</td>
</tr>
<tr>
<td>DON’T KNOW .........................................................................-8</td>
<td>[GO TO PN QA11_H53]</td>
</tr>
</tbody>
</table>

POST-NOTE QA11_H51:
IF QA11_H51 = 1 (SPOUSE’S/PARTNER’S NAME), THEN SET SPEMPOWN = 1 AND SPEMPOTH = 0;

<table>
<thead>
<tr>
<th>QA11_H52</th>
<th>Is the plan in your name, parent’s name, or someone else’s name?</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN ADULT RESPONDENT’S NAME ..............................................1</td>
<td></td>
</tr>
<tr>
<td>IN ADULT RESPONDENT’S PARENT’S NAME ..........2</td>
<td></td>
</tr>
<tr>
<td>IN SOMEONE ELSE’S NAME ....................................................3</td>
<td></td>
</tr>
<tr>
<td>REFUSED ...............................................................................-7</td>
<td></td>
</tr>
<tr>
<td>DON’T KNOW .........................................................................-8</td>
<td></td>
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</tbody>
</table>

POST-NOTE QA11_H52:
IF QA11_H52 = 1, THEN SET SPEMPAR = 1 AND SPEMPOTH = 0 AND ARSAMESP=1;
IF QA11_H52 = 2, THEN SET SPARPAR = 1 AND SPEMPOTH = 0;
PROGRAMMING NOTE QA11_H53:
IF SPEMPOWN = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), THEN GO TO QA11_H57;
ELSE IF [QA11_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA11_G32 = 1 (USUALLY WORKS)]
AND QA11_G33 ≠ 3 (SPOUSE/PARTNER NOT SELF EMPLOYED), THEN CONTINUE WITH QA11_H53;
IF QA11_A16 = 1 (MARRIED), THEN DISPLAY “spouse’s”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY “partner’s”
ELSE GO TO PROGRAMMING NOTE QA11_H57

QA11_H53  Does your {spouse’s/partner’s} employer offer health insurance to any of its employees?

您的配偶的僱主是否向其僱員提供健康保險？

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<tbody>
<tr>
<td><strong>YES</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>NO</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>REFUSED</strong></td>
<td>............................................................</td>
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<tr>
<td><strong>DON'T KNOW</strong></td>
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</table>

QA11_H54  Is {he/she} eligible to be in this plan?

{} 是否有資格參加該項計劃？

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<tbody>
<tr>
<td><strong>YES</strong></td>
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<tr>
<td><strong>NO</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>REFUSED</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>DON'T KNOW</strong></td>
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QA11_H55  What is the ONE main reason why {he/she} isn’t in this plan?

{} 未參加該項計劃的一個主要原因是什麼？

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<thead>
<tr>
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<tbody>
<tr>
<td><strong>COVERED BY ANOTHER PLAN</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>TOO EXPENSIVE</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>DOESN'T LIKE PLAN OFFERED</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>OTHER (SPECIFY: __________)</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>REFUSED</strong></td>
<td>............................................................</td>
</tr>
<tr>
<td><strong>DON'T KNOW</strong></td>
<td>............................................................</td>
</tr>
</tbody>
</table>
QA11_H56 What is the one main reason why {he/she} is not eligible for this plan?

{} 沒有資格參加該項計劃的一個主要原因是什麼？

**AI45A**

HASN'T YET WORKED FOR THIS EMPLOYER
LONG ENOUGH TO BE COVERED ..................1
CONTRACT OR TEMPORARY EMPLOYEES
NOT ALLOWED IN PLAN............................2
DOESN'T WORK ENOUGH HOURS PER WEEK
OR WEEKS PER YEAR .............................3
OTHER (SPECIFY: _______________) .............91
REFUSED ................................................-7
DON'T KNOW ..........................................8

**PROGRAMMING NOTE QA11_H57:**
IF ARMHMO = 1 (R HAS MEDICARE HMO), THEN GO TO QA11_H59;
ELSE IF ARHFAM = 1 OR ARHKID = 1, THEN GO TO QA11_H58;
ELSE IF ARINSURE = 1 (R HAS ANY COVERAGE), THEN CONTINUE WITH QA11_H57;
IF QA11_A16 = 1 (MARRIED) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN DISPLAY “Next, I have some questions about your own main health plan.”
IF ARMCAL = 1, THEN DISPLAY “Medi-Cal”;
ELSE GO TO QA11_H72

QA11_H57 {Next, I have some questions about your own main health plan.}

接下來，我要提出一些有關您的配偶的主要保健計劃的問題。

Is your {Medi-Cal} health plan an HMO?

您參加的 {} 計畫是HMO（健康維護機構）嗎？

**AI22C**

[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 R ASKS WHAT AN HMO IS, SAY：「在HMO計劃中，您通常必須接受HMO醫生的醫療護理，除非經HMO轉介或遇到急診，否則醫療費用不予保賠。」]


[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]
[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “「你的主要醫療保險計劃。」”]

YES ..............................................................1
NO ..................................................................2
REFUSED ......................................................-7
DON'T KNOW ..............................................-8
PROGRAMMING NOTE QA11_H58:
IF (ARMCAL = 1 AND QA11_H56 = 1) OR (AROTHGOV = 1 AND QA11_H31 = 1), THEN LIST HMO MEDICAL BY COUNTY;
ELSE IF (ARHFAM = 1 OR ARHKIDS = 1) AND QA11_H57 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;
ELSE IF QA11_H57 = 1 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA11_H31 = 2)], THEN LIST HMO COMMERCIAL BY COUNTY;
ELSE IF QA11_H57 = 2 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA11_H31 = 2)], THEN LIST NON-HMO BY COUNTY

QA11_H58  What is the name of your main health plan?

您的主要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: “您是否有印有保險計劃名稱的保險卡或其他材料？」]

AARP MEDICARE COMPLETE ..................................................1
AETNA ..............................................................................2
AETNA MEDICARE (SELECT/PREMIER) ..................3
ALAMEDA ALLIANCE FOR HEALTH ..........................4
ALLIANCE COMPLETE CARE ........................................5
ANTHEM BLUE CROSS/BLUE CROSS .........................6
ARCADIAN COMMUNITY CARE ..................................7
BLUE CROSS SENIOR SECURE .....................................8
BLUE SHIELD 65 PLUS .................................................9
BLUE SHIELD OF CALIFORNIA ..................................10
CAL OPTIMA .................................................................11
CARE 1ST HEALTH PLAN .............................................12
CARE ADVANTAGE ......................................................13
CARE MORE ...............................................................14
CEN CAL HEALTH.........................................................15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .......16
CENTRAL HEALTH PLAN OF CALIFORNIA .............17
CHINESE COMMUNITY HEALTH PLAN ...................18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM ..................................................19
CIGNA ..............................................................................20
CITIZENS CHOICE HEALTHPLAN ................................21
COMMUNICARE ADVANTAGE ....................................22
COMMUNITY HEALTH GROUP ....................................23
COMMUNITY HEALTH PLAN ........................................24
CONTRA COSTA HEALTH PLAN ...............................25
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EASY CHOICE HEALTH PLAN .....................................27
GEM CARE .................................................................28
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN 29
GREAT-WEST ..............................................................30
HEALTH NET ...............................................................31
HEALTH PLAN OF SAN JOAQUIN ............................32
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IEHP MEDICARE DUAL CHOICE ................................36
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MD CARE..................................................41
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ONE CARE................................................46
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TRICARE/TRICARE FOR LIFE/TRICARE PRIME......64
VA HEALTH CARE SERVICES..........................65
MEDI-CAL.................................................66
MEDICARE...............................................67
MEDICARE ADVANTAGE..............................68
OTHER....................................................91
OTHER (SPECIFY:________________).............92
REFUSED..................................................7
DON'T KNOW............................................8

POST NOTE QA11_H58:
IF QA11_H58 = 62, 63, OR 64 THEN SET ARMILIT=1

PROGRAMMING NOTE QA11_H59:
IF ARMHMO = 1 (R HAS MEDI-CARE HMO) AND [QA11_A16 = 1 (MARRIED) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX PARTNER)], THEN DISPLAY “Next, I have some questions about your own main health plan.”

QA11_H59  {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，我要提出一些有關您自己的保健計劃的問題。您是否享受處方藥保險？即是否有保健計劃支付任何部份處方藥費用？

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？

AI25

YES ......................................................................1
NO ......................................................................2
REFUSED ..........................................................7
DON'T KNOW ..................................................8
PROGRAMMING NOTE QA11_H60:
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA11_H60;
ELSE GO TO QA11_H65

QA11_H60  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 have to pay before your plan begins to pay for your medical care.”】

【IF NEEDED, SAY: ‘自付額是您的保健計劃開始為您的醫療護理付款之前您必須支付的數額。’】

YES .................................................................1
NO ..................................................................2
YES, ONLY WHEN I GO OUT OF NETWORK ........3  [GO TO QA11_H62]
REFUSED ..........................................................-7
DON'T KNOW .......................................................-8

PROGRAMMING NOTE QA11_H61:
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA11_H61;
ELSE GO TO QA11_H62

QA11_H61  Does your health plan have a deductible that is more than $2,000?

你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 have to pay before your plan begins to pay for your medical care.”】

【IF NEEDED, SAY: 「免賠額是指你的醫療保險計劃開始為你的醫療護理付款之前你必須支付的數額。」】

YES .....................................................................1  [GO TO PN QA11_H63]
NO ..................................................................2
YES, ONLY WHEN I GO OUT OF NETWORK ........3
REFUSED ..........................................................-7
DON'T KNOW .......................................................-8
QA11_H62  Does your health plan have a deductible for all covered persons that is more than $2,000?

您的保健計劃是否要求為所有受保人支付超過2,000美元的自付額？

[IF NEEDED, SAY: “A deductible is the amount you have to pay before your plan begins to pay for your medical care.”]

AH72

[IF NEEDED, SAY: “自付額是您的保健計劃開始為您的醫療護理付款之前您必須支付的數額。”]

YES ...............................................................................1
NO ...............................................................................2
YES, ONLY WHEN I GO OUT OF NETWORK ........3
REFUSED ........................................................................7
DON’T KNOW ....................................................................8

PROGRAMMING NOTE QA11_H63:
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOCH = 1, THEN CONTINUE WITH
QA11_H63;
ELSE GO TO PROGRAMMING NOTE QA11_H64

QA11_H63  Does your health plan have a deductible for all covered persons that is more than $4,000?

你的醫療保險計劃對於所有受保人是否有超過4,000美元的免賠額？

AH97

[IF NEEDED, SAY: “A deductible is the amount you have to pay before your plan begins to pay for your medical care.”]

YES ...............................................................................1
NO ...............................................................................2
YES, ONLY WHEN I GO OUT OF NETWORK ........3
REFUSED ........................................................................7
DON’T KNOW ....................................................................8
PROGRAMMING NOTE QA11_H64:
IF (QA11_H60 = 1 OR 3) OR (QA11_H61 = 1 OR 3) OR (QA11_H62 = 1 OR 3), THEN CONTINUE WITH QA11_H64;
ELSE GO TO QA11_H65

QA11_H64  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。”]

YES .................................................................................. 1
NO .................................................................................. 2
REFUSED ........................................................................... -7
DON'T KNOW ................................................................. -8

QA11_H65  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？

[GO TO PN QA11_H78]

YES .................................................................................. 1
NO .................................................................................. 2
REFUSED ........................................................................... -7
DON'T KNOW ................................................................. -8

QA11_H66  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，您是否有任何其他健康保險？

[GO TO QA11_H69]

YES .................................................................................. 1
NO .................................................................................. 2
REFUSED ........................................................................... -7
DON'T KNOW ................................................................. -8
QA11_H67  Was your other health insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, or some other plan?

你的其他醫療保險是 Medi-Cal、Healthy Families、通過雇主獲得的 計劃、你從保險公司直接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？”]

MEDI-CAL ......................................................................................1
HEALTHY FAMILIES ..............................................................2
THROUGH CURRENT OR FORMER EMPLOYER/UNION ..................3
HEALTHY KIDS ........................................................................4
PURCHASED DIRECTLY ............................................................5
OTHER HEALTH PLAN ...............................................................91
REFUSED ....................................................................................-7
DON'T KNOW .............................................................................-8

QA11_H68  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？

AI34

YES .................................................................................................1
NO .................................................................................................2 [GO TO PN QA11_H78]
REFUSED ....................................................................................-7 [GO TO PN QA11_H78]
DON'T KNOW .............................................................................-8 [GO TO PN QA11_H78]

QA11_H69  For how many months of the past 12 months did you have no health insurance at all?

在過去 12 個月中，你有多少個月完全沒有醫療保險？

AI35

[IF MORE THAN 0 DAYS BUT LESS THAN 1 MONTH, CODE AS 1 MONTH]

_____________ NUMBER OF MONTHS [HR: 0-11] [IF 0 GO TO PN QA11_H78]

REFUSED ....................................................................................-7 [GO TO PN QA11_H78]
DON'T KNOW .............................................................................-8 [GO TO PN QA11_H78]
**QA11_H70**  What is the ONE MAIN reason why you did not have any health insurance during those months?

在這些月份中，您沒有任何健康保險的一個主要原因是什麼？

<table>
<thead>
<tr>
<th>Reason</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can't afford/too expensive</td>
<td>1</td>
</tr>
<tr>
<td>Not eligible due to working status/changed employer/lost job</td>
<td>2</td>
</tr>
<tr>
<td>Not eligible due to health or other problems</td>
<td>3</td>
</tr>
<tr>
<td>Not eligible due to citizenship/immigration status</td>
<td>4</td>
</tr>
<tr>
<td>Family situation changed</td>
<td>5</td>
</tr>
<tr>
<td>Don't believe in insurance</td>
<td>6</td>
</tr>
<tr>
<td>Switched insurance companies, delay between</td>
<td>7</td>
</tr>
<tr>
<td>Can get health care for free/pay for own care</td>
<td>8</td>
</tr>
<tr>
<td>Other (specify: ___________)</td>
<td>9</td>
</tr>
</tbody>
</table>

**QA11_H71**  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？

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>8</td>
</tr>
</tbody>
</table>
QA11_H72  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？

AI24  [IF R SAYS NO NEED, PROBE WHY]

- CAN'T AFFORD/TOO EXPENSIVE .......................1
- NOT ELIGIBLE DUE TO WORKING STATUS/CHANGED EMPLOYER/LOST JOB ......................2
- NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS ........................................3
- NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS ....................................4
- FAMILY SITUATION CHANGED .........................................................5
- DON'T BELIEVE IN INSURANCE ......................................................6
- SWITCHED INSURANCE COMPANIES, DELAY BETWEEN ........................................7
- CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE .........................................8
- OTHER (SPECIFY: ____________) .....................................................9
- REFUSED ....................................................................................-7
- DON'T KNOW .............................................................................-8

QA11_H73  During the time that you have been uninsured, have you tried to find health insurance on your own?

在你沒有保險的那段時間內，你是否曾經嘗試自己尋找醫療保險？

AH75

- YES ..................................................................................1
- NO ...................................................................................2
- DON'T KNOW ....................................................................-7
- REFUSED ...............................................................................-8

QA11_H74  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？

AI27

- YES ..................................................................................1
- NO ...................................................................................2
- REFUSED ....................................................................-7
- DON'T KNOW .....................................................................-8

[GO TO QA11_H76]
QA11_H75  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？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AI28</strong></td>
<td></td>
</tr>
<tr>
<td>MORE THAN 12 MONTHS AGO, BUT NOT</td>
<td></td>
</tr>
<tr>
<td>MORE THAN 3 YEARS AGO ..................1</td>
<td>[GO TO PN QA11_H78]</td>
</tr>
<tr>
<td>MORE THAN 3 YEARS AGO ..................2</td>
<td>[GO TO PN QA11_H78]</td>
</tr>
<tr>
<td>NEVER HAD HEALTH INSURANCE ............3</td>
<td>[GO TO PN QA11_H78]</td>
</tr>
<tr>
<td>REFUSED ..................................-7</td>
<td>[GO TO PN QA11_H78]</td>
</tr>
<tr>
<td>DON'T KNOW ..................................-8</td>
<td>[GO TO PN QA11_H78]</td>
</tr>
</tbody>
</table>

QA11_H76  For how many months out of the last 12 months did you have health insurance?

在過去 12 個月內，你有多少個月有醫療保險？

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AI29</strong></td>
<td></td>
</tr>
<tr>
<td>[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]</td>
<td></td>
</tr>
<tr>
<td>_____ MONTHS          [HR: 0-12]</td>
<td>[IF 0, THEN GO TO PN QA11_H78]</td>
</tr>
<tr>
<td>REFUSED ..................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ..................................-8</td>
<td></td>
</tr>
</tbody>
</table>

QA11_H77  During that time when you had health insurance, was your insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, a plan you purchased directly from an insurance company, or some other plan?

在你有醫療保險的那段時間內，你的保險是Medi-Cal、Healthy Families、通過雇主獲得的計劃、你直接從保險公司購買的計劃還是其他計劃？

<p>| | |</p>
<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>AI30</strong></td>
<td></td>
</tr>
<tr>
<td>[CODE ALL THAT APPLY]</td>
<td></td>
</tr>
<tr>
<td>[PROBE: “Any others?”]</td>
<td></td>
</tr>
<tr>
<td>[PROBE: “還有任何其他計劃嗎？”]</td>
<td></td>
</tr>
<tr>
<td>MEDI-CAL ..................................1</td>
<td></td>
</tr>
<tr>
<td>HEALTHY FAMILIES ...........................2</td>
<td></td>
</tr>
<tr>
<td>THROUGH CURRENT OR FORMER EMPLOYER OR UNION ..................3</td>
<td></td>
</tr>
<tr>
<td>HEALTHY KIDS ..................................4</td>
<td></td>
</tr>
<tr>
<td>PURCHASED DIRECTLY ..........................5</td>
<td></td>
</tr>
<tr>
<td>OTHER HEALTH PLAN ...........................91</td>
<td></td>
</tr>
<tr>
<td>REFUSED ..................................-7</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW ..................................-8</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_H78:
IF ARINSURE ≠ 1 OR QA11_H66 = 2 OR ARDIRECT = 1 OR QA11_H77 = 5 OR QA11_H67 = 5 THEN CONTINUE WITH QA11_H78;
ELSE GO TO PROGRAMMING NOTE QA11_H83

QA11_H78 In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO?

在過去12個月中，你是否曾經嘗試直接從保險公司或HMO購 買醫療保險計劃？

AH103

YES .................................................................1
NO .................................................................2 [GO TO PN QA11_H83]
REFUSED ..........................................................-7 [GO TO PN QA11_H83]
DONT KNOW ...........................................................-8 [GO TO PN QA11_H83]

QA11_H79 How difficult was it to find a plan with the coverage you needed? Was it...

找到一項你需要的保賠範圍的計劃有多困難？你認為是.....

AH98

Very difficult, ......................................................1
非常困難， ......................................................1
Somewhat difficult, .............................................2
較為困難， .....................................................2
Not too difficult, or .............................................3
不太困難還是 ..................................................3
Not at all difficult? ...............................................4
毫無困難？ .....................................................4
REFUSED ..........................................................-7
DONT KNOW ...........................................................-8

QA11_H80 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.....

AH99

Very difficult, ......................................................1
非常困難， ......................................................1
Somewhat difficult, .............................................2
較為困難， .....................................................2
Not too difficult, or .............................................3
不太困難還是 ..................................................3
Not at all difficult? ...............................................4
毫無困難？ .....................................................4
REFUSED ..........................................................-7
DONT KNOW ...........................................................-8
QA11_H81  Did anyone help you find a health plan?

是否有人幫助你尋找醫療保險計劃？

AH100

YES ......................................................... 1
NO ......................................................... 2 [GO TO PN QA11_H83]
REFUSED .............................................. -7 [GO TO PN QA11_H83]
DON’T KNOW .......................................... -8 [GO TO PN QA11_H83]

QA11_H82  Who helped you?

是誰幫助你的？

AH101

BROKER ............................................... 1
FAMILY MEMBER/FRIEND .......................... 2
INTERNET .............................................. 3
OTHER (SPECIFY: ____________) ............... 91
REFUSED .............................................. -7
DON’T KNOW .......................................... -8

PROGRAMMING NOTE QA11_H83:
IF QA11_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA11_B41 = 1 (HOSPITALIZED FOR HEART DISEASE) THEN GO TO PROGRAMMING NOTE QA11_H84;
ELSE CONTINUE WITH QA11_H83

QA11_H83  During the past 12 months, were you a patient in a hospital overnight or longer?

在過去十二個月中，您的配偶是否曾經住院一天或更長時間？

AH14

YES ......................................................... 1
NO ......................................................... 2 [GO TO PN QA11_H86]
REFUSED .............................................. -7 [GO TO PN QA11_H86]
DON’T KNOW .......................................... -8 [GO TO PN QA11_H86]

PROGRAMMING NOTE QA11_H84:
IF QA11_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA11_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA11_B41 = 1 (HOSPITALIZED FOR HEART DISEASE), THEN DISPLAY “During the past 12 months, when you were hospitalized for any reason,”

QA11_H84  (During the past 12 months, when you were hospitalized for any reason,) Altogether how many nights were you in the hospital?

你總共住院幾天？

AH102

_________ NUMBER OF NIGHTS (HR: 1-365)

REFUSED .............................................. -7
DON’T KNOW .......................................... -8
PROGRAMMING NOTE QA11_H85:
IF ARINSURE ≠ 1 OR QA11_H69 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH QA11_H85;
ELSE GO TO PROGRAMMING NOTE QA11_H86

QA11_H85  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？

AH76

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW ...............................................-8

PROGRAMMING NOTE QA11_H86:
IF [ARINSURE ≠ 1 OR QA11_H69 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND QA11_A5 = 2 (FEMALE) AND [QA11_E1 = 1 (PREGNANT) OR QA11_G18 = 1 (R IS PARENT OR LEGAL GUARDIAN FOR ANY CHILD IN ROSTER UNDER 1 YEAR OLD)], THEN CONTINUE WITH QA11_H86;
ELSE GO TO PROGRAMMING NOTE QA11_I1

QA11_H86  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？

AH77

YES .................................................................1
NO .................................................................2  [GO TO PN QA11_I1]
REFUSED ......................................................-7  [GO TO PN QA11_I1]
DON'T KNOW ...............................................-8  [GO TO PN QA11_I1]

QA11_H87  Was it paid for by Medi-Cal?

這是由 Medi-Cal 付費的嗎？

AH78

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW ...............................................-8
Section I – Child and Adolescent Health Insurance

PROGRAMMING NOTE QA11_I1:
IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QA11_I37 TO ASK ABOUT SELECTED ADOLESCENT;
IF ARINSURE ≠ 1, THEN GO TO PROGRAMMING NOTE QA11_I2;
ELSE CONTINUE WITH QA11_I1

QA11_I1

These next questions are about health insurance (CHILD) may have.

以下是關於{}可能有的健康保險的問題。

Does (CHILD) have the same insurance as you?

{}的保險是否與您的保險相同?

<table>
<thead>
<tr>
<th>CF10A</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
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<td>..........................                        1</td>
<td>[GO TO QA11_I31]</td>
</tr>
<tr>
<td>NO</td>
<td>..........................                        2</td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>.................................................. -7</td>
<td></td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>.................................................. -8</td>
<td></td>
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</tbody>
</table>

POST-NOTE QA11_I1:
IF QA11_I1 = 1 AND ARMCARE = 1, THEN SET CHMCARE = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARMCAL = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARHFAM = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARHKID = 1, THEN SET CHHKID = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND AREMPOWN = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND AREMPSP = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND AREMPPAR = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND AREMPOTH = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARDIRECT = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARMILIT = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND AROTHER = 1, THEN SET CHOTHER = 1 AND CHINSURE = 1 AND ARSAMECH=1;
IF QA11_I1 = 1 AND ARIHS = 1, THEN SET CHIHS = 1
PROGRAMMING NOTE QA11_I2:
IF SPINSURE ≠ 1, THEN GO TO QA11_I3;
ELSE IF QA11_I1 = 2 AND ARSAMESP = 1, THEN GO TO QA11_I3;
ELSE CONTINUE WITH QA11_I2

QA11_I2

Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/PARTNER NAME}?

{}的保險是否與您的{}的保險相同？

<table>
<thead>
<tr>
<th>MA1</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ..................................................1 [GO TO QA11_I18]</td>
</tr>
<tr>
<td>NO ..................................................2</td>
</tr>
<tr>
<td>REFUSED .............................................-7</td>
</tr>
<tr>
<td>DON’T KNOW .........................................-8</td>
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</table>

POST-NOTE QA11_I2:
IF QA11_I2 = 1 AND SPMCARE = 1, THEN SET CHMCARE = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SMCAL = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPHFAM = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPHKID = 1, THEN SET CHHKID = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPEMPOWN = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPEMPSP = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPEMPPAR = 1, THEN SET CHEMP = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPDIRECT = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPMILIT = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1 AND SPSAMECH=1;
IF QA11_I2 = 1 AND SPIHS = 1, THEN SET CHIHS = 1

QA11_I3

Is {he/she} currently covered by Medi-CAL?

{}目前是否享受Medi-CAL（加州醫療保健計劃）的保賠？

<table>
<thead>
<tr>
<th>CF1</th>
</tr>
</thead>
<tbody>
<tr>
<td>[IF NEEDED, SAY: &quot;Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people.&quot;]</td>
</tr>
<tr>
<td>[IF NEEDED, SAY: &quot;「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。」&quot;]</td>
</tr>
<tr>
<td>YES ..................................................1 [GO TO QA11_I5]</td>
</tr>
<tr>
<td>NO ..................................................2</td>
</tr>
<tr>
<td>REFUSED .............................................-7</td>
</tr>
<tr>
<td>DON’T KNOW .........................................-8</td>
</tr>
</tbody>
</table>

POST-NOTE QA11_I3:
IF QA11_I3 = 1, THEN SET CHMCAL = 1 AND CHINSURE = 1
QA11_I4  Is (CHILD) covered by the Healthy Families Program?

{孩子的名字/年齡/性別} 有沒有享受健康家庭計劃 (Healthy Families)？

[CF2]

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]

[IF NEEDED SAY: “「健康家庭計劃是一項州立計劃，為年齡在19歲以下的孩子支付醫療保險費用。」"]

YES .......................................................... 1
NO ............................................................ 2
REFUSED ...................................................... 7
DON'T KNOW ................................................. 8

POST-NOTE QA11_I4:
IF QA11_I4 = 1, THEN SET CHHFAM = 1 AND CHINSURE = 1

QA11_I5  Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?

{孩子的名字/年齡/性別} 是否通過您或其他人的工作或工會享受醫療保險或管理式保健組織 (HMO) 計劃？

[CF3]

YES .......................................................... 1  [GO TO QA11_I7]
NO ............................................................ 2
REFUSED ...................................................... 7
DON'T KNOW ................................................. 8

POST-NOTE QA11_I5:
IF QA11_I5 = 1, THEN SET CHEMP = 1 AND CHINSURE = 1

QA11_I6  Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO? 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.

{} 是否享受您直接從保險公司或HMO購買的健康保險計劃的保賠？請不要包括僅支付某些疾病（例如癌症或中風）的計劃或當您住院時僅向您支付「額外現金」的計劃。

[CF4]

YES .......................................................... 1  [GO TO PN QA11_I10]
NO ............................................................ 2  [GO TO PN QA11_I10]
REFUSED ...................................................... 7  [GO TO PN QA11_I10]
DON'T KNOW ................................................. 8  [GO TO PN QA11_I10]

POST-NOTE QA11_I6:
IF QA11_I6 = 1, THEN SET CHDIRECT = 1 AND CHINSURE = 1
**QA11_I7**

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.

您是否支付任何(CHILD NAME/AGE/SEX)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。

**AI54**

[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: “共付款是您每次看病或使用健康護理系統服務時支 付的部份健康護理費用，而由其他人支付您的主要健康護理保賠費用。”]

“A deductible is the amount you pay for medical care before your health plan starts paying.”

“A deductible is the amount you pay for medical care before your health plan starts paying.”

“自付額是您的保健計劃開始付款之前您支付的醫療護理費用。”

“Premium is the monthly charge for the cost of your health insurance plan.”

“保費是您的健康保險計劃的每月收費。”

YES .................................................................1
NO ...........................................................................2
REFUSED .........................................................................-7
DON’T KNOW ...............................................................-8

**QA11_I8**

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 NAME/AGE/SEX)的保健計劃的全部或部份保費或費用？

**AI50**

YES ........................................................................ 1
NO ........................................................................... 2
REFUSED .........................................................................-7
DON’T KNOW ...............................................................-8

[GO TO PN QA11_I10]

[GO TO PN QA11_I10]

[GO TO PN QA11_I10]
QA11_I9 Who else pays all or some portion of the cost for (CHILD)'s health plan?

還有誰支付( CHILD NAME/AGE/SEX)的醫療保險計劃的全部或部份費用?

<table>
<thead>
<tr>
<th>AI51</th>
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<tbody>
<tr>
<td>CURRENT EMPLOYER ..............................................1</td>
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<tr>
<td>FORMER EMPLOYER ................................................2</td>
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<tr>
<td>UNION ........................................................................3</td>
</tr>
<tr>
<td>SPOUSE/S/PARTNER’S CURRENT EMPLOYER ...4</td>
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<td>SPOUSE’S/PARTNER’S FORMER EMPLOYER ....5</td>
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<tr>
<td>PROFESSIONAL/FRATERNAL ORGANIZATION ....6</td>
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<tr>
<td>MEDICAID/MEDI-CAL ASSISTANCE ....................7</td>
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<tr>
<td>HEALTHY FAMILIES ................................................8</td>
</tr>
<tr>
<td>HEALTHY KIDS ........................................................9</td>
</tr>
<tr>
<td>OTHER .....................................................................91</td>
</tr>
<tr>
<td>REFUSED ................................................................-9</td>
</tr>
<tr>
<td>DON'T KNOW ............................................................-7</td>
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</tbody>
</table>

Post-Note QA11_I9:
IF QA11_I9 = 1 THRU 6, THEN SET CHEMP = 1 AND CHDIRECT = 0;
IF QA11_I9 = 8, THEN SET CHFAM = 1;
IF QA11_I9 = 7, THEN SET CHMCAL = 1;
IF QA11_I9 = 9, THEN SET CHHKID = 1

Programming Note QA11_I10:
IF CHINSURE = 1, THEN GO TO PROGRAMMING NOTE QA11_I18;
ELSE CONTINUE WITH QA11_I10

QA11_I10 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 或其他軍隊醫療護理計劃？

<table>
<thead>
<tr>
<th>CF6</th>
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<tr>
<td>YES ........................................................................1</td>
</tr>
<tr>
<td>NO ......................................................................2</td>
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<td>REFUSED ...............................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW ...........................................................-8</td>
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Post-Note QA11_I10:
IF QA11_I10 = 1, THEN SET CHMILIT = 1 AND CHINSURE = 1
PROGRAMMING NOTE QA11_I11:
IF CHINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), THEN CONTINUE WITH QA11_I11 AND DISPLAY “Healthy Kids”;

QA11_I11  Is (he/she) covered by the Healthy Kids program?

(CHILD NAME/AGE/SEX) 是否享受 Healthy Kids 計劃保賠？

       YES ........................................................................................................1  [GO TO PN QA11_I18]
       NO .......................................................................................................2
       REFUSED ..............................................................................................7
       DON’T KNOW ........................................................................................-8

PROGRAMMING NOTE QA11_I11:
IF CHINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), THEN CONTINUE WITH QA11_I11 AND DISPLAY “Healthy Kids”;

QA11_I12  Is (he/she) covered by some other government health plan such as AIM, "Mister MIP", PCIP, or something else?

{他/她} 是否享受其他政府醫療計劃，如 AIM、「Mister MIP」或其他計劃？

       AIM .............................................................................................................1 [GO TO PN QA11_I18]
       "MISTER MIP"/MRMIP .............................................................................2 [GO TO PN QA11_I18]
       PCIP .........................................................................................................3 [GO TO PN QA11_I18]
       NO OTHER PLAN ....................................................................................4 [GO TO PN QA11_I18]
       SOMETHING ELSE (SPECIFY: __________) ..................91 [GO TO PN QA11_I18]
       REFUSED ...............................................................................................7
       DON’T KNOW ...........................................................................................-8

POST-NOTE QA11_I12:
IF QA11_I12 = 1, 2, 3, OR 91, THEN SET CHOTHGOV = 1 AND CHINSURE = 1
QA11_I13 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醫療保險？

<table>
<thead>
<tr>
<th></th>
<th>Chinese</th>
<th>Code</th>
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<tbody>
<tr>
<td>YES</td>
<td>是</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>否</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>否</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>否</td>
<td>8</td>
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</tbody>
</table>

[GO TO PN QA11_I18]

QA11_I14 What type of health insurance does (he/she) have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?

{他/她} 的醫療保險屬於哪一類型？是來自加州醫療輔助計劃、健康家庭計劃、雇主或工會、還是來自其他來源？

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]
[PROBE: “還有其他來源嗎？”]

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<tr>
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<tr>
<td>THROUGH CURRENT OR FORMER EMPLOYER/UNION</td>
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<tr>
<td>THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>MEDICARE</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>MEDI-CAL</td>
<td>5</td>
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<td>HEALTHY FAMILIES</td>
<td>6</td>
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</tr>
<tr>
<td>CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE</td>
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<tr>
<td>INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC</td>
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<tr>
<td>HEALTHY KIDS</td>
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<tr>
<td>OTHER GOVERNMENT HEALTH PLAN</td>
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<td></td>
</tr>
<tr>
<td>OTHER NON-GOVERNMENT HEALTH PLAN</td>
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<td></td>
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<tr>
<td>REFUSED</td>
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<tr>
<td>DON'T KNOW</td>
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</tbody>
</table>

[GO TO PN QA11_I18]
POST-NOTE QA11_I14:
IF QA11_I14 = 1, THEN SET CHEMP = 1 AND CHINSURE = 1
IF QA11_I14 = 2, THEN SET CHEMP = 1 AND CHINSURE = 1
IF QA11_I14 = 3, THEN SET CHDIRECT = 1 AND CHINSURE = 1
IF QA11_I14 = 4, THEN SET CHMCARE = 1 AND CHINSURE = 1
IF QA11_I14 = 5, THEN SET CHMCAL = 1 AND CHINSURE = 1
IF QA11_I14 = 6, THEN SET CHHFAM = 1 AND CHINSURE = 1
IF QA11_I14 = 7, THEN SET CHMILIT = 1 AND CHINSURE = 1
IF QA11_I14 = 8, THEN SET CHIHS = 1
IF QA11_I14 = 9, THEN SET CHOTHGOV = 1 AND CHINSURE = 1
IF QA11_I14 = 91, THEN SET CHOTHER = 1
IF QA11_I14 = -7 OR -8, THEN SET CHINSURE = 1

PROGRAMMING NOTE QA11_I15:
IF QA11_I14 = 4 (CHILD HAS MEDICARE), THEN CONTINUE WITH QA11_I15;
ELSE GO TO PROGRAMMING NOTE QA11_I16

QA11_I15  Just to verify, you said that (CHILD) gets health insurance through Medicare?

我只是要確定一下，你說過 (孩子的名字/年齡/性別) 有從 聯邦醫療照顧(Medicare) 獲得醫療保險？

CF9VER

YES .........................................................................1
NO...........................................................................2
REFUSED ..................................................................-7
DON’T KNOW .........................................................-8

PROGRAMMING NOTE QA11_I16:
IF CHINSURE ≠ 1, THEN CONTINUE WITH QA11_I16;
ELSE GO TO PROGRAMMING NOTE QA11_I18;

QA11_I16  What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?

{孩子名字/年齡/性別} 沒有加入加州醫療輔助計畫 (Medi-CAL) 的一個主要原因是什麼？

CF1A

PAPERWORK TOO DIFFICULT .............................1
DIDN’T KNOW IF ELIGIBLE ..............................2
INCOME TOO HIGH, NOT ELIGIBLE ..................3
NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS ..................................4
OTHER NOT ELIGIBLE ......................................5
DONT BELIEVE IN HEALTH INSURANCE ..........6
DONT NEED IT BECAUSE HEALTHY .................7
ALREADY HAVE INSURANCE ...........................8
DIDN’T KNOW IT EXISTED ...............................9
DONT LIKE / WANT WELFARE ........................10
OTHER (SPECIFY:_________________) .............91
REFUSED .........................................................-7
DON’T KNOW ..................................................-8
QA11_I17  What is the ONE main reason why (CHILD) is not enrolled in the Healthy Families program?

{CHILD NAME /AGE/SEX}沒有註冊參加Healthy Families計劃的 一個主要原因什麼?

- PAPERWORK TOO DIFFICULT ............................1
- DIDN'T KNOW IF ELIGIBLE ..................................2
- INCOME TOO HIGH, NOT ELIGIBLE ..........................3
- NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS ..........................4
- OTHER NOT ELIGIBLE ..................................................5
- DON'T BELIEVE IN HEALTH INSURANCE ..................6
- DON'T NEED IT BECAUSE HEALTHY ..........................7
- ALREADY HAVE INSURANCE ......................................8
- DIDN'T KNOW IT EXISTED ............................................9
- DON'T LIKE / WANT WELFARE ...................................10
- OTHER (SPECIFY: __________________) .......................91
- REFUSED ......................................................................7
- DON'T KNOW .............................................................8

PROGRAMMING NOTE QA11_I18:
IF QA11_I1 = 1 AND ARM CARE = 1, THEN SET QA11_I18 = QA11_H8 AND QA11_I19 = QA11_H9 AND GO TO QA11_I20;
ELSE IF QA11_I1 = 1, THEN SET QA11_I18 = QA11_H57 AND QA11_I19 = QA11_H58 AND QA11_I20 = QA11_H59 AND GO TO PN QA11_I21;
ELSE IF CHINSURE = 1, THEN CONTINUE WITH QA11_I18;
ELSE GO TO PROGRAMMING NOTE QA11_I21

QA11_I18  Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?

{CHILD NAME /AGE/SEX}參加的保健計劃是HMO（即健康維護機構計劃）嗎？

- YES ...........................................................................1
- NO .............................................................................2
- REFUSED ....................................................................7
- DON'T KNOW ...........................................................8
**PROGRAMMING NOTE QA11_I19:**

```plaintext
IF CHINSURE = 1 (CHILD HAS ANY COVERAGE), THEN CONTINUE WITH QA11_I19;
IF CHMCARE = 1 AND QA11_I18 = 1, THEN LIST HMO MEDICARE BY COUNTY;
ELSE IF [CHMCAL = 1 OR (CHOTHGOV = 1 AND QA11_I12 = 1)] AND QA11_I18 = 1, THEN LIST HMO MEDICAL CAL BY COUNTY;
ELSE IF (CHHFAM = 1 OR CHHKIDS = 1) AND QA11_I18 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;
ELSE IF [CHEMP = 1 OR CHDIRECT = 1 OR (CHOTHGOV = 1 AND QA11_I12 = 2) OR CHOTHER = 1] AND QA11_I18 = 1, THEN LIST HMO COMMERCIAL BY COUNTY;
ELSE IF (CHEMP = 1 OR CHDIRECT =1 OR CHOTHER = 1) AND QA11_I18 = 2, THEN LIST NON-HMO BY COUNTY
```

**QA11_I19** What is the name of (CHILD)’s main health plan?

**(CHILD NAME/AGE/SEX)参加的(Medi-Cal)保健計劃的名稱 什麼是？**

**MA2**

```
[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (CHILD) have an insurance card or something else with the plan name on it?"]

[NOTE: 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？]
```

<table>
<thead>
<tr>
<th>Health Plan Name</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>AARP MEDICARE COMPLETE</td>
<td>1</td>
</tr>
<tr>
<td>AETNA</td>
<td>2</td>
</tr>
<tr>
<td>AETNA MEDICARE (SELECT/PREMIER)</td>
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<td>CHINESE COMMUNITY HEALTH PLAN</td>
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<td>IEHP MEDICARE DUAL CHOICE</td>
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<tr>
<td>INTER VALLEY HEALTH PLAN</td>
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</table>
QA11_I20  Is (CHILD) covered for prescription drugs?

計劃是否支付[孩子的名字/年齡/性別]的處方藥品？

YES .............................................. 1
NO ............................................. 2
REFUSED ...................................... -7
DON'T KNOW .................................. -8
PROGRAMMING NOTE QA11_I21:
IF (ARINSURE ≠ 1 OR QA11_I1 ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN CONTINUE WITH QA11_I21;
ELSE GO TO PROGRAMMING NOTE QA11_I26

QA11_I21  Does (CHILD)'s health plan have a deductible that is more than $1,000?

{CHILD NAME/AGE/SEX}的健康保險計劃是否有超過1,000美元的免賠額？

AI79

[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: “免賠額是指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。”]

YES .................................................................1
NO .................................................................2
YES, ONLY WHEN GO OUT OF NETWORK ..........3 [GO TO QA11_I23]
REFUSED ......................................................-7 [GO TO QA11_I23]
DON'T KNOW .................................................-8

PROGRAMMING NOTE FOR QA11_I22:
IF CHEMP = 1, THEN CONTINUE WITH QA11_I22;
ELSE GO TO QA11_I23

QA11_I22  Does (CHILD)'s health plan have a deductible that is more than $2,000?

{CHILD NAME/AGE/SEX}的醫療保險計劃是否有超過2,000美元的免賠額？

AI85

[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: “免賠額是指你的醫療保險計劃開始為你的醫療護理付款之前，您必須支付的數額。”]

YES .................................................................1 [GO TO PN QA11_I24]
NO .................................................................2
YES, ONLY WHEN GO OUT OF NETWORK ..........3
REFUSED ......................................................-7
DON'T KNOW .................................................-8
QA11_I23  Does (CHILD)'s health plan have a deductible for all covered persons that is more than $2,000?  
{CHILD NAME/AGE/SEX}的健康保險計劃對於所有受保人是否 有超過2,000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。”]

YES .................................................1  [GO TO PN QA11_I25]
NO .........................................................2
YES, ONLY WHEN GO OUT OF NETWORK ........3  [GO TO PN QA11_I25]
REFUSED ..................................................-7
DON'T KNOW ..............................................-8

PROGRAMMING NOTE FOR QA11_I24:
IF CHEMP = 1, THEN CONTINUE WITH QA11_I24;
ELSE GO TO PROGRAMMING NOTE QA11_I25

QA11_I24  Does (CHILD)'s health plan have a deductible for all covered persons that is more than $4,000?  
{CHILD NAME/AGE/SEX}的醫療保險計劃對於所有受保人是否有超過4,000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: “免賠額是指你的醫療保 險計劃開始為你的醫療護理付款之前你必須支付的數額。”]

YES .................................................1
NO .........................................................2
YES, ONLY WHEN GO OUT OF NETWORK ........3
REFUSED ..................................................-7
DON'T KNOW ..............................................-8
PROGRAMMING NOTE QA11_I25:
IF (QA11_I21 = 1 OR 3) OR (QA11_I22 = 1 OR 3) OR (QA11_I23 = 1 OR 3), THEN CONTINUE WITH QA11_I25;
ELSE GO TO PROGRAMMING NOTE QA11_I26

QA11_I25    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。” ]

YES .................................................................1
NO .................................................................2
REFUSED ..................................................................-7
DON'T KNOW ...........................................................-8

PROGRAMMING NOTE QA11_I26:
IF CHINSURE = 1, THEN GO TO QA11_I31;
ELSE CONTINUE WITH QA11_I26

QA11_I26    What is the one main reason (CHILD) does not have any health insurance?

[孩子的名字/年齡/性別] 沒有醫療保險的一個主要原因是什麼？

CF18

CAN'T AFFORD/TOO EXPENSIVE .............................1
NOT ELIGIBLE DUE TO WORKING STATUS/
CHANGED EMPLOYER/LOST JOB ..........................2
NOT ELIGIBLE DUE TO HEALTH OR
OTHER PROBLEMS .............................................3
NOT ELIGIBLE DUE TO CITIZENSHIP/
IMMIGRATION STATUS ........................................4
FAMILY SITUATION CHANGED ...............................5
DON'T BELIEVE IN INSURANCE .............................6
SWITCHED INSURANCE COMPANIES,
DELAY BETWEEN .................................................7
CAN GET HEALTH CARE FOR FREE/PAY
FOR OWN CARE .......................................................8
OTHER (SPECIFY: ____________) .........................91
REFUSED ..............................................................-7
DON'T KNOW ..........................................................-8
QA11_I27  Was (CHILD) covered by health insurance at any time during the past 12 months?
{孩子的名字/年齡/性別} 是否在過去 12 個月中的任何時間均享受醫療保險？

CF20

YES ...........................................................................1  [GO TO QA11_I29]
NO ...........................................................................2
REFUSED .................................................................-7
DON'T KNOW ...........................................................-8

QA11_I28  How long has it been since (CHILD) last had health insurance?
{孩子的名字/年齡/性別} 上一次有醫療保險到現在已經有多長時間？

CF21

MORE THAN 12 MONTHS, BUT NOT
MORE THAN 3 YEARS AGO .................................1  [GO TO PN QA11_I37]
MORE THAN 3 YEARS AGO .................................2  [GO TO PN QA11_I37]
NEVER HAD HEALTH INSURANCE COVERAGE ..3  [GO TO PN QA11_I37]
REFUSED .................................................................-7  [GO TO PN QA11_I37]
DON'T KNOW ...........................................................-8  [GO TO PN QA11_I37]

QA11_I29  For how many of the last 12 months did {he/she} have health insurance?
在過去 12 個月中，有多少個月份 {他/她} 有醫療保險？

CF22

[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]

_____ MONTHS [HR: 0-12]  [IF 0, THEN GO TO PN QA11_I37]

REFUSED .................................................................-7
DON'T KNOW ...........................................................-8
QA11_I30 During that time when (CHILD) had health insurance, was (his/her) insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan?

在 {孩子的名字/年齡/性別} 有醫療保險的月份中，{他/她} 的保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險，還是其他計劃？

CF23

[CODE ALL THAT APPLY]

[PROBE: “Any others?”]
[PROBE: “還有其他計劃嗎？”]

MEDI-CAL.........................................................1
HEALTHY FAMILIES........................................2
THROUGH CURRENT OR FORMER EMPLOYER/
UNION............................................................3
HEALTHY KIDS......................................................4
OTHER HEALTH PLAN.........................................91
REFUSED ..........................................................-7
DON'T KNOW .....................................................-8

QA11_I31 Thinking about (his/her) current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

請想一想 {孩子的名字/年齡/性別} 目前的醫療保險，{他/她} 在過去 12 個月中，是不是都是享受的同一種保險？

CF24

YES .................................................................1
NO .................................................................2
HAD SAME INSURANCE SINCE BIRTH
(FOR CHILDREN LESS THAN ONE YEAR OLD) ....3
REFUSED ..........................................................-7
DON'T KNOW .....................................................-8

QA11_I32 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} 有沒有其他任何醫療保險？

CF25

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW .....................................................-8
QA11_I33  Was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, or some other plan?

其他醫療保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險，還是其他計劃？

CF26  

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: “還有其他計劃嗎？”]

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<tr>
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<td>THROUGH CURRENT OR FORMER EMPLOYER/UNION........4</td>
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<td>-8</td>
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QA11_I34  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？

CF27  

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<td>2</td>
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<td>DON'T KNOW...............-8 [GO TO PN QA11_I37]</td>
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QA11_I35  For how many of the past 12 months did {he/she} have no health insurance?

在過去12個月中，{他/她}有多少個月完全沒有醫療保險？

CF28  

[IF < 1 MONTH, ENTER ”1”]

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<td>-8</td>
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</table>
QA11_I36  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}沒有醫療保險的一個主要原因是什么？

[IF R SAYS, "No need," PROBE WHY]

- CAN'T AFFORD/TOO EXPENSIVE .........................1
- NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB ......................2
- NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS ........................................3
- NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS ...................................4
- FAMILY SITUATION CHANGED .............................5
- DON'T BELIEVE IN INSURANCE ..............................6
- SWITCHED INSURANCE COMPANIES, DELAY BETWEEN .................................7
- CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE ........................................8
- OTHER (SPECIFY: __________) .............................91
- REFUSED .......................................................9
- DON'T KNOW ...............................................-7
- DON'T KNOW ...............................................-8
These next questions are about health insurance (TEEN) may have.

以下是有關{}可能享有的健康保險的問題。

Does (TEEN) have the same insurance as {you/ADULT RESPONDENT NAME}?

{}的保險是否與您的保險相同？

IA10A

| YES ........................................................................| 1 | [GO TO QA11_I67] |
| NO ...................................................................... | 2 |
| REFUSED ................................................................ | -7 |
| DON'T KNOW ......................................................... | -8 |

POST-NOTE QA11_I37:

IF QA11_I37 = 1 AND ARMCARE = 1, THEN SET TEMCARE = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARMCAL = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARHFAM = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARHKID = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND AREMPOWN = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND AREMPPAR = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARDIRECT = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARMILIT = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND AROTHGOV = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND AROTHER = 1, THEN SET TEOTHER = 1 AND TEINSURE = 1;
IF QA11_I37 = 1 AND ARIHS = 1, THEN SET TEIHS = 1
PROGRAMMING NOTE QA11_I38:
IF SPINSURE ≠ 1, THEN GO TO QA11_I39;
ELSE IF QA11_I37 = 2 AND ARSAMESP = 1 THEN GO TO PROGRAMMING NOTE QA11_I39;
ELSE CONTINUE WITH QA11_I38

QA11_I38  Does (TEEN) have the same insurance as {your spouse/your partner/SPOUSE/PARTNER}? 
()

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<th>YES</th>
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<th>DON'T KNOW</th>
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\[GO TO QA11_I54] \[GO TO QA11_I54]

POST-NOTE QA11_I38:
IF QA11_I38 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPEMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPEMPTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPOTH = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;
IF QA11_I38 = 1 AND SPIHS = 1, SET TEIHS = 1
PROGRAMMING NOTE QA11_I39:
IF CHINSURE ≠ 1, THEN GO TO QA11_I40;
ELSE IF (QA11_I37 = 2 AND ARSAMECH = 1) OR (QA11_I38 = 2 AND SPSAMECH = 1), THEN GO TO QA11_I40;
ELSE CONTINUE WITH QA11_I39;

QA11_I39  Does (TEEN) have the same insurance as (CHILD)?

MA6

YES .................................................................1  [GO TO PN QA11_I67]
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

POST-NOTE QA11_I39:
IF QA11_I39 = 1 AND CHMCARE = 1, THEN SET TEMCARE = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHMCAL = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHHFAM = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHHKID = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHEMP = 1, THEN SET TEEMP = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHDIRECT = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHMILIT = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHOTHGOV = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;
IF QA11_I39 = 1 AND CHIHS = 1, THEN SET TEIHS = 1

QA11_I40  Is (he/she) currently covered by Medi-CAL?

IA1

[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。」”]

YES .................................................................1  [GO TO QA11_I42]
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

POST-NOTE QA11_I40:
IF QA11_I40 = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1
QA11_I41  Is (TEEN) covered by the Healthy Families Program?
{孩子的名字/年齡/性別} 有沒有享受健康家庭計劃 (Healthy Families)?

IA2  
[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]
[IF NEEDED, SAY: "健康家庭計劃是一項州立計劃，為年齡在19歲以下的孩子支付醫療保險費用。"]
YES ................................................1
NO ................................................2
REFUSED ..............................................-7
DON'T KNOW .......................................-8

POST-NOTE QA11_I41:  
IF QA11_I41 = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1

QA11_I42  Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?
{孩子的名字/年齡/性別} 有沒有享受通過你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)?

IA3  
YES .........................................................1  [GO TO QA11_I44]
NO .......................................................2
REFUSED ...............................................-7
DON'T KNOW .........................................-8

POST-NOTE QA11_I42:  
IF QA11_I42 = 1, THEN SET TEEMP = 1 AND TEINSURE = 1

QA11_I43  Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO? 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.
{是否享受您直接從保險公司或HMO購買的健康保險計劃的保賠？請不要包括僅支付某些疾病（例如癌症或中風）的計劃或當您住院時僅向您支付「額外現金」的計劃。}

IA4  
YES .........................................................1  [GO TO PN QA11_I47]
NO .......................................................2  [GO TO PN QA11_I47]
REFUSED ...............................................-7  [GO TO PN QA11_I47]
DON'T KNOW .........................................-8  [GO TO PN QA11_I47]

POST-NOTE QA11_I43:  
IF QA11_I43 = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1
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.

您是否支付任何{CHILD NAME/AGE/SEX}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。

A deductible is the amount you pay for medical care before your health plan starts paying.

自付額是您的保健計劃開始付款之前您支付的醫療護理費用。

Premium is the monthly charge for the cost of your health insurance plan."

保費是您的健康保險計劃的每月收費。"

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 {CHILD NAME/AGE/SEX}的保健計劃的全部或部份保費或費用？
QA11_I46  Who else pays all or some portion of the cost for (TEEN)’s health plan?

還有誰支付(ADOLESCENT/AGE/SEX)的醫療保險計劃的全部或部份費用？

AI53

CURRENT EMPLOYER .....................................1
FORMER EMPLOYER .....................................2
UNION..........................................................3
SPOUSE’S/PARTNER’S CURRENT EMPLOYER.....4
SPOUSE’S/PARTNER’S FORMER EMPLOYER....5
PROFESSIONAL/FRATERNAL ORGANIZATION...6
MEDICAID/MEDI-CAL ASSISTANCE ...............7
HEALTHY FAMILIES ........................................8
HEALTHY KIDS ...............................................9
OTHER..........................................................91
REFUSED .......................................................-7
DON’T KNOW ..................................................-8

POST-NOTE QA11_I46:
IF QA11_I46 = 1-6, SET TEEMP = 1 AND TEDITRACT = 0;
IF QA11_I46 = 7, SET TEMCAL = 1;
IF QA11_I46 = 8, SET TEHFAM = 1;
IF QA11_I46 = 9, SET TEHKID = 1 AND SET TEINSURE = 1

PROGRAMMING NOTE QA11_I47:
IF TEINSURE = 1, GO TO PROGRAMMING NOTE QA11_I54;
ELSE CONTINUE WITH QA11_I47

QA11_I47  Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

{}是否享受CHAMPUS/CHAMP VA、Tricare、VA或某些其他軍隊健康護理計劃的保賠？

IA6

YES .................................................................1  [GO TO PN QA11_I54]
NO.........................................................................2
REFUSED .......................................................-7
DON’T KNOW ..................................................-8

POST-NOTE QA11_I47:
IF QA11_I47 = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1
PROGRAMMING NOTE QA11_I48:
IF TEINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN), THEN CONTINUE WITH QA11_I50 AND DISPLAY “Healthy Kids”;

QA11_I48  Is (he/she) covered by the Healthy Kids program?

{CHILD NAME/AGE/SEX}是否享受Healthy Kids計劃保賠？

AI71

[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]
[IF NEEDED, SAY: “Healthy Kids是為您郡內的 兒童提供的計劃。"]

YES ........................................................................1 [GO TO PN QA11_I54]
NO .........................................................................2
REFUSED .....................................................................-7
DON'T KNOW .........................................................-8

POST-NOTE QA11_I48:
IF QA11_I48 = 1, THEN SET TEHKID = 1 AND TEINSURE = 1

QA11_I49  Is (he/she) covered by some other government health plan such as AIM, "Mister MIP", Family PACT, PCIP or something else?

{}是否享受某些其他政府健康計劃的保賠，例如AIM、Mister MIP或其他計劃？

IA7

[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指「母嬰服務計畫」；Mister MIP或MRMIP指「重大風險醫療保險計劃」。"]

AIM .........................................................................1 [GO TO PN QA11_I54]
"MISTER MIP"/MRMIP .............................................2 [GO TO PN QA11_I54]
Family PACT ...........................................................3 [GO TO PN QA11_I54]
PCIP ........................................................................4 [GO TO PN QA11_I54]
NO OTHER PLAN ....................................................5 [GO TO PN QA11_I54]
SOMETHING ELSE (SPECIFY: __________) .................91 [GO TO PN QA11_I54]
REFUSED .....................................................................-7
DON'T KNOW .........................................................-8

POST-NOTE QA11_I49:
IF QA11_I49 = 1, 2, 3, 4, OR 91, THEN SET TEOTHGOV = 1 AND TEINSURE = 1
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他醫療保險計劃？

IA8

YES .................................................................1
NO .................................................................2 [GO TO PN QA11_I54]
REFUSED ......................................................-7 [GO TO PN QA11_I54]
DON'T KNOW ...................................................-8 [GO TO PN QA11_I54]
What type of health insurance does (he/she) have? Does it come through Medi-Cal, Healthy Families, an employer or union, or from some other source?

{}享受哪種類型的健康保險？該健康保險是透過Medi-Cal（加州醫療保健計劃）、Healthy Families（健康家庭計劃）、僱主或工會獲得的、還是從某些其他來源獲得的？

**[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?”]**

**[NOTE: 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？”]**

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

**[PROBE: 「還有任何其他計畫嗎？」]**

<table>
<thead>
<tr>
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<th>Description</th>
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<tr>
<td>1</td>
<td>Through current or former employer/union</td>
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<tr>
<td>2</td>
<td>Through school, professional association, trade group or other organization</td>
</tr>
<tr>
<td>3</td>
<td>Purchased directly from a health plan (by R or anyone else)</td>
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<tr>
<td>4</td>
<td>Medicare</td>
</tr>
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<td>5</td>
<td>Medi-Cal</td>
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<tr>
<td>6</td>
<td>Healthy Families</td>
</tr>
<tr>
<td>7</td>
<td>CHAMPUS/CHAMP-VA, TRICARE, VA, or some other military health care</td>
</tr>
<tr>
<td>8</td>
<td>Indian health service, tribal health program, urban Indian clinic</td>
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<tr>
<td>9</td>
<td>Healthy kids</td>
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<tr>
<td>91</td>
<td>Other government health plan</td>
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<tr>
<td>92</td>
<td>Other non-government health plan</td>
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**POST-NOTE QA11_I51:**

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<tr>
<td>1</td>
<td>IF QA11_I51_2 = 1, THEN SET TEMP = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_3 = 1, THEN SET TEDIRECT = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_4 = 1, THEN SET TEMCARE = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_5 = 1, THEN SET TEMCAL = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_6 = 1, THEN SET TEHFAM = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_7 = 1, THEN SET TEMILIT = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_8 = 1, THEN SET TEIHS = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_9 = 1, THEN SET TEHKID = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_91 = 1, THEN SET TEOTHGOV = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51_92 = 1, THEN SET TEOTHER = 1 AND TEINSURE = 1;</td>
</tr>
<tr>
<td>1</td>
<td>IF QA11_I51 = -7 OR -8, THEN SET TEINSURE = 1</td>
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</table>
PROGRAMMING NOTE QA11_I52:
IF TEINSURE ≠ 1, THEN CONTINUE WITH QA11_I52;
ELSE GO TO QA11_I54;

QA11_I52 What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?

[孩子的名字/年齡/性別] 沒有加入加州醫療輔助計劃 (Medi-CAL) 的一個主要原因是什麼？

IA1A

- PAPERWORK TOO DIFFICULT .........................1
- DIDN'T KNOW IF ELIGIBLE ............................2
- INCOME TOO HIGH, NOT ELIGIBLE ................3
- NOT ELIGIBLE DUE TO CITIZENSHIP/
  IMMIGRATION STATUS ................................4
- OTHER NOT ELIGIBLE ..................................5
- DON'T BELIEVE IN HEALTH INSURANCE ..........6
- DON'T NEED IT BECAUSE HEALTHY ................7
- ALREADY HAVE INSURANCE .........................8
- DIDN'T KNOW IT EXISTED .............................9
- DON'T LIKE / WANT WELFARE ......................10
- OTHER (SPECIFY:_________________) ..........91
- REFUSED ..................................................-7
- DON'T KNOW ..............................................-8

QA11_I53 What is the ONE main reason why (TEEN) is not enrolled in the Healthy Families program?

[CHILD NAME/AGE/SEX] 沒有註冊參加 Healthy Families 計劃的#一個主要原因是什麼？

IA2A

- PAPERWORK TOO DIFFICULT .........................1
- DIDN'T KNOW IF ELIGIBLE ............................2
- INCOME TOO HIGH, NOT ELIGIBLE ................3
- NOT ELIGIBLE DUE TO CITIZENSHIP/
  IMMIGRATION STATUS ................................4
- OTHER NOT ELIGIBLE ..................................5
- DON'T BELIEVE IN HEALTH INSURANCE ..........6
- DON'T NEED IT BECAUSE HEALTHY ................7
- ALREADY HAVE INSURANCE .........................8
- DIDN'T KNOW IT EXISTED .............................9
- DON'T LIKE / WANT WELFARE ......................10
- OTHER (SPECIFY:_________________) ..........91
- REFUSED ..................................................-7
- DON'T KNOW ..............................................-8
PROGRAMMING NOTE QA11_I54:
IF QA11_I37 = 1 AND ARMCARE = 1, THEN SET QA11_I54 = QA11_H8 AND QA11_I55 = QA11_H9 AND GO TO QA11_I56;
ELSE IF QA11_I37 = 1, THEN SET QA11_I54 = QA11_H57 AND QA11_I55 = QA11_H58 AND QA11_I56 = QA11_H59 AND GO TO PN QA11_I57;
ELSE IF QA11_I39 = 1, THEN SET QA11_I54 = QA11_I18 AND QA11_I55 = QA11_I19 AND QA11_I56 = QA11_I20 AND GO TO PN QA11_I57;
ELSE IF TEINSURE = 1, THEN CONTINUE WITH QA11_I54;
ELSE GO TO PROGRAMMING NOTE QA11_I57

QA11_I54  Is (TEEN)'s (Medi-Cal) health plan an HMO?

(CHILD NAME /AGE/SEX) 參加的主要保健計劃是 HMO（健康維護機構計劃）嗎？

MA8

[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 代表「健康維護機構」。在 HMO 計劃中，{he or she}必須使用網路內的醫生及醫院的服務，除非是急診，如果{he or she}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.”]
[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: “[his or her]#主要保健計劃。”]


<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
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<tr>
<td>YES</td>
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<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
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</table>
PROGRAMMING NOTE QA11_I55:
IF TEINSURE = 1 (TEEN HAS ANY COVERAGE), THEN CONTINUE WITH QA11_I55;
IF TEMCARE = 1 AND QA11_I54 = 1, THEN LIST HMO MEDICARE BY COUNTY;
ELSE IF [TEMCAL = 1 OR (TEOTHGOV = 1 AND QA11_I49 = 1)] AND QA11_I54 = 1, THEN LIST HMO MEDICAL BY COUNTY;
ELSE IF (TEHFAM = 1 OR TEHKIDS = 1) AND QA11_I54 = 1, THEN LIST HMO HEALTHY FAMILIES BY COUNTY;
ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR (TEOTHGOV = 1 AND QA11_I49 = 2) OR TEOTHER = 1) AND QA11_I54 = 1, THEN LIST HMO COMMERCIAL BY COUNTY;
ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1) AND QA11_I54 = 2 THEN LIST NON-HMO BY COUNTY

QA11_I55 What is the name of (TEEN)’s main health plan?

{}參加的主要健康計劃的名稱是什麼？

MA7

[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: ”「{}是否有保險卡或印有計劃名稱的其他文件？」”]

AARP MEDICARE COMPLETE ..............................................1
AETNA .............................................................................2
AETNA MEDICARE (SELECT/PREMIER) ............................3
ALAMEDA ALLIANCE FOR HEALTH ....................................4
ALLIANCE COMPLETE CARE ............................................5
ANTHEM BLUE CROSS/BLUE CROSS ................................6
ARCADIAN COMMUNITY CARE .........................................7
BLUE CROSS SENIOR SECURE ..........................................8
BLUE SHIELD 65 PLUS ....................................................9
BLUE SHIELD OF CALIFORNIA .......................................10
CAL OPTIMA ...................................................................11
CARE 1ST HEALTH PLAN ................................................12
CARE ADVANTAGE ........................................................13
CARE MORE .................................................................14
CEN CAL HEALTH ..........................................................15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .............16
CENTRAL HEALTH PLAN OF CALIFORNIA ......................17
CHINESE COMMUNITY HEALTH PLAN .............................18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM ....19
CIGNA ............................................................................20
CITIZENS CHOICE HEALTHPLAN ....................................21
COMMUNICARE ADVANTAGE .......................................22
COMMUNITY HEALTH GROUP .........................................23
COMMUNITY HEALTH PLAN ............................................24
CONTRA COSTA HEALTH PLAN ......................................25
EASY CHOICE HEALTH PLAN .........................................26
GEM CARE .....................................................................27
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN ..28
GREAT-WEST ...............................................................29
HEALTH NET .................................................................30
HEALTH PLAN OF SAN JOAQUIN ..................................31
HEALTH PLAN OF SAN MATEO .......................................32
HUMANA GOLD PLUS ....................................................33
IEHP (INLAND EMPIRE HEALTH PLAN) .........................34
IEHP MEDICARE DUAL CHOICE ....................................35
INTER VALLEY HEALTH PLAN ........................................36
QA11_I56  Is (TEEN) covered for prescription drugs?

{孩子的名字/年齡/性別} 的計劃是否支付處方藥品？

IA14

YES ......................................................... 1
NO ....................................................... 2
REFUSED ............................................ 7
DON’T KNOW ....................................... 8
PROGRAMMING NOTE QA11_I57:
IF (ARINSURE ≠ 1 OR QA11_I37 ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN CONTINUE WITH QA11_I57;
ELSE GO TO PROGRAMMING NOTE QA11_I62

QA11_I57

Does (TEEN)'s health plan have a deductible that is more than $1,000?

{CHILD NAME/AGE/SEX}的健康保險計劃是否有超過1,000美元的免賠額？

AI82

[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支付醫療護理費用之前，您必須支付的數額。”]

YES ........................................................................1
NO ........................................................................2
YES, ONLY WHEN GO OUT OF NETWORK ........3 [GO TO QA11_I59]
REFUSED .................................................................-7
DON'T KNOW .........................................................-8

PROGRAMMING NOTE QA11_I58:
IF TEEMP = 1, THEN CONTINUE WITH QA11_I58;
ELSE GO TO QA11_I59

QA11_I58

Does (TEEN)'s health plan have a deductible that is more than $2,000?

{CHILD NAME/AGE/SEX}的醫療保險計劃是否有超過2,000美元的免 賠額？

AI87

[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: “免賠額是在您的計劃開始為您支付醫療護理費用之前，您必須支付的數額。”]

YES ........................................................................1 [GO TO PN QA11_I60]
NO ........................................................................2
YES, ONLY WHEN GO OUT OF NETWORK ........3
REFUSED .................................................................-7
DON'T KNOW .........................................................-8
QA11_I59  Does (TEEN)'s health plan have a deductible for all covered persons that is more than $2,000?  
(CHILD NAME/AGE/SEX)的健康保險計劃對於所有受保人是否 有超過2,000的免賠額？

A83  
[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。”]

YES .................................................1  [GO TO PN QA11_I61]  
NO ...............................................2  [GO TO PN QA11_I61]  
YES, ONLY WHEN GO OUT OF NETWORK ......3  
REFUSED ..........................................7  
DON'T KNOW .....................................8

PROGRAMMING NOTE QA11_I60:  
IF TEEMP = 1, THEN CONTINUE WITH QA11_I60;  
ELSE GO TO PROGRAMMING NOTE QA11_I61

QA11_I60  Does (TEEN)'s health plan have a deductible for all covered persons that is more than $4,000?  
(CHILD NAME/AGE/SEX)的醫療保險計劃對於所有受保人是否有超過 4,000美元的免賠額？

A88  
[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: “免賠額是指你的醫療保險計劃開始為你的醫療護理付款之前，您必須支付的數額。”]

YES ....................................................1  
NO ....................................................2  
YES, ONLY WHEN GO OUT OF NETWORK ......3  
REFUSED .............................................7  
DON'T KNOW .......................................8
PROGRAMMING NOTE QA11_I61:
IF (QA11_I57 = 1 OR 3) OR (QA11_I58 = 1 OR 3) OR (QA11_I59 = 1 OR 3), THEN CONTINUE WITH QA11_I61;
ELSE GO TO PROGRAMMING NOTE QA11_I62

QA11_I61 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{CHILD NAME/AGE/SEX}的醫療費用的特殊帳戶或資金？

A184

[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。”]

YES ..........................................................1
NO .............................................................2
REFUSED ......................................................7
DON'T KNOW ...............................................8

PROGRAMMING NOTE QA11_I62:
IF TEINSURE = 1, THEN GO TO QA11_I67;
ELSE CONTINUE WITH QA11_I62

QA11_I62 What is the one main reason (TEEN) does not have any health insurance?

{}沒有任何健康保險的一個主要原因是多少？

IA18

CAN'T AFFORD/TOO EXPENSIVE .......................1
NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB ......................2
NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS .............................................3
NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS .....................................4
FAMILY SITUATION CHANGED ............................5
DON'T BELIEVE IN INSURANCE .......................6
SWITCHED INSURANCE COMPANIES, DELAY BETWEEN ..............................................7
CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE .............................................8
OTHER (SPECIFY:________________) ..................9
REFUSED ......................................................7
DON'T KNOW ...............................................8
**QA11_I63**  Was (TEEN) covered by health insurance at any time during the past 12 months?

{孩子的名字/年齡/性別} 在過去12個月中的任何時間是否享受醫療保險？

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<tr>
<th>IA20</th>
<th>YES ...........................................................................1 [GO TO QA11_I65]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NO ............................................................................2</td>
</tr>
<tr>
<td></td>
<td>REFUSED ......................................................................7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW .................................................................-8</td>
</tr>
</tbody>
</table>

**QA11_I64**  How long has it been since (TEEN) last had health insurance?

{孩子的名字/年齡/性別} 從上一次有醫療保險到現在已有多長時間？

<table>
<thead>
<tr>
<th>IA21</th>
<th>MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO ................1 [GO TO PN QA11_I73]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MORE THAN 3 YEARS AGO ..................2 [GO TO PN QA11_I73]</td>
</tr>
<tr>
<td></td>
<td>NEVER HAD HEALTH INSURANCE COVERAGE ..3 [GO TO PN QA11_I73]</td>
</tr>
<tr>
<td></td>
<td>REFUSED ......................................................................7 [GO TO PN QA11_I73]</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW/NOT SURE ............................-8 [GO TO PN QA11_I73]</td>
</tr>
</tbody>
</table>

**QA11_I65**  For how many of the last 12 months did {he/she} have health insurance?

在過去十二個月中，{}有幾個月享有健康保險？

<table>
<thead>
<tr>
<th>IA22</th>
<th>[IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER “1”]</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>_____ MONTHS [HR: 0-12] [IF 0, THEN GO TO PN QA11_I73]</td>
</tr>
<tr>
<td></td>
<td>REFUSED ......................................................................7</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW .................................................................-8</td>
</tr>
</tbody>
</table>
QA11_I66  During that time when (TEEN) had health insurance, was (his/her) insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, or some other plan?

在 {孩子的名字/年齡/性別} 有醫療保險的月份裡，{他/她} 的保險是加州醫療輔助計劃、健康家庭計劃、雇主為您提供的保險、還是其他計劃？

IA23  

[CODE ALL THAT APPLY]

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

MEDI-CAL.................................................................1  [GO TO PN QA11_I73]
HEALTHY FAMILIES ...............................................2  [GO TO PN QA11_I73]
THROUGH CURRENT OR FORMER
EMPLOYER/UNION ..............................................3  [GO TO PN QA11_I73]
HEALTHY KIDS ....................................................4  [GO TO PN QA11_I73]
OTHER HEALTH PLAN ............................................91  [GO TO PN QA11_I73]
REFUSED ..............................................................-7  [GO TO PN QA11_I73]
DON'T KNOW .........................................................-8  [GO TO PN QA11_I73]

QA11_I67  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/她} 目前參加的健康保險，{他/她} 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？

IA24

YES .................................................................1  [GO TO PN QA11_I73]
NO .................................................................2  [GO TO PN QA11_I73]
REFUSED ..............................................................-7  [GO TO PN QA11_I73]
DON'T KNOW .........................................................-8  [GO TO PN QA11_I73]

QA11_I68  When (he/she) wasn’t covered by (his/her) current health insurance, did (he/she) have any other health insurance?

當 {他/她} 沒有享受目前的醫療保険計劃時，{他/她} 有沒有其他任何醫療保険？

IA25

YES .................................................................1  [GO TO QA11_I70]
NO .................................................................2  [GO TO QA11_I70]
REFUSED ..............................................................-7  [GO TO QA11_I70]
DON'T KNOW .........................................................-8  [GO TO QA11_I70]
QA11_I69  Was this other health insurance Medi-Cal, Healthy Families, a plan you obtained from an employer, or some other plan?

{他/她} 他的醫療保險是加州醫療補助計劃、健康家庭計劃、雇主為您提供的保險、還是其他計劃？

IA26  [CODE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: “還有其他計劃嗎?”]

MEDI-CAL .........................................................1
HEALTHY FAMILIES ........................................2
THROUGH CURRENT OR FORMER EMPLOYER/UNION ................................3
HEALTHY KIDS ...............................................4
OTHER HEALTH PLAN ..................................... 91
REFUSED ..........................................................-7
DON'T KNOW ....................................................-8

QA11_I70  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？

IA27  YES .................................................................1
NO .................................................................2  [GO TO PN QA11_I73]
REFUSED ..........................................................-7  [GO TO PN QA11_I73]
DON'T KNOW ....................................................-8  [GO TO PN QA11_I73]

QA11_I71  For how many of the past 12 months did {he/she} have no health insurance?

在過去十二個月中，{他/她}有幾個月完全沒有醫療保險？

IA28  [IF < 1 MONTH, ENTER "1"]

______ MONTHS [HR: 1-12]

REFUSED ..........................................................-7
DON'T KNOW ....................................................-8
QA11_I72  What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn’t covered?

在{}不享有保險的期間，{}沒有任何健康保險的一個主要原因是什麼？

IA29  [IF R SAYS, "No need," PROBE WHY]

  CAN’T AFFORD/TOO EXPENSIVE .........................1
  NOT ELIGIBLE DUE TO WORKING STATUS/
  CHANGED EMPLOYER/LOST JOB .........................2
  NOT ELIGIBLE DUE TO HEALTH OR
  OTHER PROBLEMS ........................................3
  NOT ELIGIBLE DUE TO CITIZENSHIP/
  IMMIGRATION STATUS ..................................4
  FAMILY SITUATION CHANGED ............................5
  DON’T BELIEVE IN INSURANCE .........................6
  SWITCHED INSURANCE COMPANIES,
  DELAY BETWEEN ..........................................7
  CAN GET HEALTH CARE FOR FREE/PAY
  FOR OWN CARE ...............................................8
  OTHER (SPECIFY: ____________) ..................... 91
  REFUSED ....................................................-7
  DON’T KNOW ..............................................-8
**PROGRAMMING NOTE QA11_I73:**

IF TI3 ≠ -1 (ALREADY ANSWERED IN ADOLESCENT QUESTIONNAIRE), THEN GO TO QA11_I77; ELSE CONTINUE WITH QA11_I73

<table>
<thead>
<tr>
<th>QA11_I73</th>
<th>In what country was (TEEN) born?</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED STATES</td>
<td>........................................ 1</td>
</tr>
<tr>
<td>AMERICAN SAMOA</td>
<td>........................................ 2</td>
</tr>
<tr>
<td>CANADA</td>
<td>........................................ 3</td>
</tr>
<tr>
<td>CHINA</td>
<td>........................................ 4</td>
</tr>
<tr>
<td>EL SALVADOR</td>
<td>........................................ 5</td>
</tr>
<tr>
<td>ENGLAND</td>
<td>........................................ 6</td>
</tr>
<tr>
<td>FRANCE</td>
<td>........................................ 7</td>
</tr>
<tr>
<td>GERMANY</td>
<td>........................................ 8</td>
</tr>
<tr>
<td>GUAM</td>
<td>........................................ 9</td>
</tr>
<tr>
<td>GUATEMALA</td>
<td>........................................ 10</td>
</tr>
<tr>
<td>HUNGARY</td>
<td>........................................ 11</td>
</tr>
<tr>
<td>INDIA</td>
<td>........................................ 12</td>
</tr>
<tr>
<td>IRAN</td>
<td>........................................ 13</td>
</tr>
<tr>
<td>IRELAND</td>
<td>........................................ 14</td>
</tr>
<tr>
<td>ITALY</td>
<td>........................................ 15</td>
</tr>
<tr>
<td>JAPAN</td>
<td>........................................ 16</td>
</tr>
<tr>
<td>KOREA</td>
<td>........................................ 17</td>
</tr>
<tr>
<td>MEXICO</td>
<td>........................................ 18</td>
</tr>
<tr>
<td>PHILIPPINES</td>
<td>........................................ 19</td>
</tr>
<tr>
<td>POLAND</td>
<td>........................................ 20</td>
</tr>
<tr>
<td>PORTUGAL</td>
<td>........................................ 21</td>
</tr>
<tr>
<td>PUERTO RICO</td>
<td>........................................ 22</td>
</tr>
<tr>
<td>RUSSIA</td>
<td>........................................ 23</td>
</tr>
<tr>
<td>TAIWAN</td>
<td>........................................ 24</td>
</tr>
<tr>
<td>VIETNAM</td>
<td>........................................ 25</td>
</tr>
<tr>
<td>VIRGIN ISLANDS</td>
<td>........................................ 26</td>
</tr>
<tr>
<td>OTHER (SPECIFY: ____________)</td>
<td>.................. 91</td>
</tr>
<tr>
<td>REFUSED</td>
<td>........................................ -7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>........................................ -8</td>
</tr>
</tbody>
</table>
Is (TEEN) a citizen of the United States?

AI58T

YES .................................................................1 [GO TO QA11_I76]
NO .................................................................2
APPLICATION PENDING .......................................3
REFUSED .........................................................-7
DON'T KNOW ...................................................-8

Is (TEEN) a permanent resident with a green card?

AI59T

[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。”]

YES .................................................................1
NO .................................................................2
APPLICATION PENDING .......................................3
REFUSED .........................................................-7
DON'T KNOW ...................................................-8

About how many years has (TEEN) lived in the United States?

AI60T

[IF < 1 YEAR, ENTER "1 YEAR"]

____ NUMBER OF YEARS
____ YEAR FIRST COME AND LIVE IN U.S.

REFUSED .........................................................-7
DON'T KNOW ...................................................-8
**PROGRAMMING NOTE QA11_I77:**

IF QA11_A5 = 1 (R IS MALE), THEN DISPLAY "mother";
ELSE IF QA11_A5 = 2 (R IS FEMALE), THEN DISPLAY "father";

<table>
<thead>
<tr>
<th>QA11_I77</th>
<th>In what country was (TEEN)'s {mother/father} born?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHILD</td>
<td>{CHILD}的母親是在哪個國家出生的?</td>
</tr>
</tbody>
</table>

**[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

<table>
<thead>
<tr>
<th>Country</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNITED STATES</td>
<td>1</td>
</tr>
<tr>
<td>AMERICAN SAMOA</td>
<td>2</td>
</tr>
<tr>
<td>CANADA</td>
<td>3</td>
</tr>
<tr>
<td>CHINA</td>
<td>4</td>
</tr>
<tr>
<td>EL SALVADOR</td>
<td>5</td>
</tr>
<tr>
<td>ENGLAND</td>
<td>6</td>
</tr>
<tr>
<td>FRANCE</td>
<td>7</td>
</tr>
<tr>
<td>GERMANY</td>
<td>8</td>
</tr>
<tr>
<td>GUAM</td>
<td>9</td>
</tr>
<tr>
<td>GUATEMALA</td>
<td>10</td>
</tr>
<tr>
<td>HUNGARY</td>
<td>11</td>
</tr>
<tr>
<td>INDIA</td>
<td>12</td>
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<tr>
<td>IRAN</td>
<td>13</td>
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<tr>
<td>IRELAND</td>
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<tr>
<td>ITALY</td>
<td>15</td>
</tr>
<tr>
<td>JAPAN</td>
<td>16</td>
</tr>
<tr>
<td>KOREA</td>
<td>17</td>
</tr>
<tr>
<td>MEXICO</td>
<td>18</td>
</tr>
<tr>
<td>PHILIPPINES</td>
<td>19</td>
</tr>
<tr>
<td>POLAND</td>
<td>20</td>
</tr>
<tr>
<td>PORTUGAL</td>
<td>21</td>
</tr>
<tr>
<td>PUERTO RICO</td>
<td>22</td>
</tr>
<tr>
<td>RUSSIA</td>
<td>23</td>
</tr>
<tr>
<td>TAIWAN</td>
<td>24</td>
</tr>
<tr>
<td>VIETNAM</td>
<td>25</td>
</tr>
<tr>
<td>VIRGIN ISLANDS</td>
<td>26</td>
</tr>
<tr>
<td>OTHER (SPECIFY:_________________)</td>
<td>91</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_I78:
IF QA11_I77 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), THEN GO TO PROGRAMMING NOTE QA11_I82;
ELSE CONTINUE WITH QA11_I78;
IF QA11_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;
ELSE IF QA11_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”

QA11_I78   Does (TEEN)’s {mother/father} now live in the U.S.?
{CHILD}的母親目前住在美國嗎？

AI57

YES ..............................................................1
NO ...............................................................2
MOTHER/FATHER DECEASED ..............................3
MOTHER/FATHER NEVER LIVED IN US ...............4
REFUSED ......................................................-7
DON’T KNOW ................................................-8

PROGRAMMING NOTE QA11_I79:
IF QA11_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;
ELSE IF QA11_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”;
IF QA11_I78 = 3 (MOTHER/FATHER DECEASED), THEN DISPLAY “Was”;
ELSE DISPLAY “Is”

QA11_I79   {Is/Was} (TEEN)’s {mother/father} a citizen of the United States?
{CHILD}的母親是美國公民嗎？

AI58

[IF R SAYS HE/SHE IS A NATURALIZED CITIZEN, CODE YES]

YES ..............................................................1 [GO TO PN QA11_I81]
NO ...............................................................2
APPLICATION PENDING ..................................3
REFUSED ......................................................-7
DON’T KNOW ................................................-8
PROGRAMMING NOTE QA11_I80:
IF QA11_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;
ELSE IF QA11_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”;
IF QA11_I78 = 3 (MOTHER/FATHER DECEASED), THEN DISPLAY “Was”;
ELSE DISPLAY “Is”

QA11_I80 {Is/Was} (TEEN)’s (mother/father) a permanent resident with a green card?

{CHILD}的母親是持有綠卡的永久居民嗎？

AI59

[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。”]

YES .........................................................................................1
NO ....................................................................................................2
APPLICATION PENDING .....................................................................3
REFUSED .............................................................................................7
DON’T KNOW ..................................................................................-8

PROGRAMMING NOTE QA11_I81:
IF QA11_A5 = 1 (R IS MALE), THEN DISPLAY “mother”;
ELSE IF QA11_A5 = 2 (R IS FEMALE), THEN DISPLAY “father”

QA11_I81 About how many years has (TEEN)’s {mother/father} lived in the United States?

{CHILD}的母親在美國已居住大約多少年？

AI60

[IF < 1 YEAR, ENTER “1”]

_____ NUMBER OF YEARS
_____ YEAR FIRST COME AND LIVE IN U.S.

MOTHER/FATHER DECEASED ..............................................3
MOTHER/FATHER NEVER LIVED IN US ....................4
REFUSED .....................................................................................7
DON’T KNOW ............................................................................-8
PROGRAMMING NOTE QA11_I82:
IF CH8 ≠ -1 (ALREADY ANSWERED IN CHILD QUESTIONNAIRE), THEN GO TO SECTION J;
ELSE CONTINUE WITH QA11_I82

QA11_I82 In what country was (CHILD) born?

{}是在哪一個國家出生的？

AI56C

UNITED STATES ...........................................1
AMERICAN SAMOA ......................................2
CANADA ..................................................3
CHINA .....................................................4
EL SALVADOR ...........................................5
ENGLAND ..................................................6
FRANCE ...................................................7
GERMANY ..................................................8
GUAM .....................................................9
GUATEMALA ..............................................10
HUNGARY ..................................................11
INDIA ......................................................12
IRAN .........................................................13
IRELAND ...................................................14
ITALY .......................................................15
JAPAN .......................................................16
KOREA .......................................................17
MEXICO .....................................................18
PHILIPPINES ...........................................19
POLAND ....................................................20
PORTUGAL ...............................................21
PUERTO RICO ...........................................22
RUSSIA .....................................................23
TAIWAN ....................................................24
VIETNAM ...................................................25
VIRGIN ISLANDS .........................................26
OTHER (SPECIFY: ____________) .....................91
REFUSED ....................................................7
DON'T KNOW ............................................-8

PROGRAMMING NOTE QA11_I83:
IF QA11_I73 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), THEN GO TO SECTION J;
ELSE CONTINUE WITH QA11_I83

QA11_I83 Is (CHILD) a citizen of the United States?

{}(孩子的名字/年齡/性別) 是美國公民嗎？

AI58C

YES ..............................................................1  [GO TO QA11_I85]
NO .............................................................2
APPLICATION PENDING ................................3
REFUSED .....................................................7
DON'T KNOW .............................................-8
QA11.I84  Is (CHILD) a permanent resident with a green card?

{孩子的名字/年齡/性別} 是持有綠卡的永久居民嗎？

AI59C  [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。”]

YES ................................................................. 1
NO ................................................................. 2
APPLICATION PENDING .................................... 3
REFUSED ......................................................... 7
DON'T KNOW .................................................. 8

QA11.I85  About how many years has (CHILD) lived in the United States?

{孩子的名字/年齡/性別} 在美國居住了大約多少年？

AI60C  [IF < 1 YEAR, ENTER "1 YEAR"]

_____ NUMBER OF YEARS

_____ YEAR FIRST COME AND LIVE IN U.S.

REFUSED ......................................................... 7
DON'T KNOW .................................................. 8
Section J – Health Care Utilization and Access

PROGRAMMING NOTE QA11_J1:
IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, THEN 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”

<table>
<thead>
<tr>
<th>QA11_J1</th>
<th>{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?</th>
</tr>
</thead>
<tbody>
<tr>
<td>AH5</td>
<td>____ TIMES [HR: 0-365] REFUSED ...........................................................................................................-7</td>
</tr>
<tr>
<td></td>
<td>DON’T KNOW .......................................................................................................................................-8</td>
</tr>
</tbody>
</table>

PROGRAMMING NOTE QA11_J2:
IF QA11_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), THEN CONTINUE WITH QA11_J2;
ELSE GO TO PROGRAMMING NOTE QA11_J3

<table>
<thead>
<tr>
<th>QA11_J2</th>
<th>About how long has it been since you last saw a doctor about your own health?</th>
</tr>
</thead>
<tbody>
<tr>
<td>AH6</td>
<td>ONE YEAR AGO OR LESS...........................................................................0</td>
</tr>
<tr>
<td></td>
<td>MORE THAN 1 UP TO 2 YEARS AGO ......................................................1</td>
</tr>
<tr>
<td></td>
<td>MORE THAN 2 UP TO 5 YEARS AGO .......................................................2</td>
</tr>
<tr>
<td></td>
<td>MORE THAN 5 YEARS AGO .......................................................................3</td>
</tr>
<tr>
<td></td>
<td>NEVER ..................................................................................................4</td>
</tr>
<tr>
<td></td>
<td>REFUSED .............................................................................................-7</td>
</tr>
<tr>
<td></td>
<td>DON’T KNOW ......................................................................................-8</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_J3:
IF QA11_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11_J3;
ELSE GO TO PROGRAMMING NOTE QA11_J4

**QA11_J3**
Do you have a personal doctor or medical provider who is your main provider?

您是否有一位作为您的主要服务提供者的个人医生或医疗服务提供者？

**AJ77**

[IF NEEDED, SAY: “This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider.”]

[IF NEEDED, SAY: "可以是一名全科医生、专科医生、医生助理、护士或其他健康服务提供者。"]

YES ................................................................................. 1
NO .................................................................................. 2
REFUSED ............................................................................. 7
DON’T KNOW ......................................................................... 8

PROGRAMMING NOTE QA11_J4:
IF QA11_J3 = 1 (HAS A PERSONAL DOCTOR) OR [QA11_J1 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QA11_J1 = 0 (SAW DOCTOR LESS THAN A YEAR AGO)], THEN CONTINUE WITH QA11_J4;
ELSE GO TO PROGRAMMING NOTE QA11_J6

**QA11_J4**
During the past 12 months, did you phone or e-mail the doctor’s office with a medical question?

在過去12個月中，您是否曾經打開電話或發電子郵件給醫生診所，提出醫療方面的問題？

**AJ78**

YES .................................................................................. 1
NO .................................................................................. 2
REFUSED ............................................................................. 7
DON’T KNOW ......................................................................... 8

**QA11_J5**
How often did you get an answer as soon as you needed it? Would you say...

您在需要時立即得到答案的频率有多高？您認為是.....

**AJ79**

Never, ................................................................................. 1
從未， ................................................................................. 1
Sometimes, .......................................................................... 2
有時， ................................................................................. 2
Usually, or ............................................................................ 3
通常還是 ............................................................................ 3
Always? ................................................................................ 4
總是？ ................................................................................ 4
REFUSED ............................................................................. 7
DON’T KNOW ......................................................................... 8
PROGRAMMING NOTE QA11_J6:
IF QA11_J3 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QA11_J6;
ELSE GO TO PROGRAMMING NOTE QA11_J8

QA11_J6  How often does your doctor or medical provider listen carefully to you? Would you say...

你的醫生或醫療服務提供者仔細聽你敘述的頻率有多高？你認為是......

AJ112
Never,.................................................................1
從來沒有、 ..................................................1
Sometimes, .......................................................2
有時、 ...........................................................2
Usually, or .........................................................3
經常還是 .........................................................3
Always? ............................................................4
總是？ .............................................................4
REFUSED ..........................................................7
DON'T KNOW ....................................................8

QA11_J7  How often does your doctor or medical provider explain clearly what you need to do to take care of your health? Would you say...

你的醫生或醫療服務提供者明確地向你解釋如何護理自身健康的頻率 有多高？你認為是......

AJ113
Never,.................................................................1
從來沒有、 ..................................................1
Sometimes, .......................................................2
有時、 ...........................................................2
Usually, or .........................................................3
經常還是 .........................................................3
Always? ............................................................4
總是？ .............................................................4
REFUSED ..........................................................7
DON'T KNOW ....................................................8
PROGRAMMING NOTE QA11_J8:
IF ARINSURE = 1 OR AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11_J8;
ELSE GO TO PROGRAMMING NOTE QA11_J11;
IF QA11_J3 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY “your”;
ELSE DISPLAY “a”;

QA11_J8
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，你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？

AJ102
[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。”]

YES ..........................................................................................1 [GO TO QA11_J10]
NO .........................................................................................2 [GO TO QA11_J10]
REFUSED ............................................................................-7 [GO TO QA11_J10]
DON’T KNOW .......................................................................-8 [GO TO QA11_J10]

QA11_J9
How often were you able to get an appointment within two days? Would you say...

能夠在兩天內你安排就診的頻率有多高？你認為是......

AJ103
Never .............................................................................1 [GO TO PN QA11_J11]
從來沒有、 .................................................................1 [GO TO PN QA11_J11]
Sometimes, .................................................................2 [GO TO PN QA11_J11]
有時、 ..............................................................2 [GO TO PN QA11_J11]
Usually, or .................................................................3 [GO TO PN QA11_J11]
經常還是 .................................................................3 [GO TO PN QA11_J11]
Always? ..........................................................................4 [GO TO PN QA11_J11]
總是？ ...........................................................................4 [GO TO PN QA11_J11]
REFUSED ...........................................................................-7 [GO TO PN QA11_J11]
DON’T KNOW ......................................................................-8 [GO TO PN QA11_J11]
PROGRAMMING NOTE QA11_J10:
IF QA11_J3 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY "your";
ELSE DISPLAY "a";

QA11_J10  Could you get an appointment to see {your/a} doctor or medical provider within two days if you needed to?

โปรแกรมการคัดค้าน QA11_J10:
ถ้า QA11_J3 = 1 (มีแพทย์ส่วนตัว) ให้แสดง "your"; อย่างอื่นให้แสดง "a";

AJ104

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ...................................................-8

PROGRAMMING NOTE QA11_J11:
IF QA11_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND QA11_J3 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [(QA11_B3 = 1 OR QA11_B4 = 1 (HAS ASTHMA)) OR QA11_B18 = 1 (HAS DIABETES) OR QA11_B37 = 1 (HAS HEART DISEASE)], THEN CONTINUE WITH QA11_J11;
ELSE GO TO PROGRAMMING NOTE QA11_J12

QA11_J11  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?

โปรแกรมการคัดค้าน QA11_J11:
ถ้า QA11_H1 = 1, 3, 4, OR 5 (มีแหล่งความสามารถในการดูแลสุขภาพส่วนตัว) และ QA11_J3 = 1 (มีแพทย์ส่วนตัว) และ [(QA11_B3 = 1 OR QA11_B4 = 1 (มีโรคเรื้อน)) OR QA11_B18 = 1 (มีโรคเบาหวาน) OR QA11_B37 = 1 (มีโรคหัวใจ)] ให้ต่อไปใน QA11_J11;
อย่างอื่นไปที่โปรแกรมการคัดค้าน QA11_J12

AJ80

YES .................................................................1
NO .................................................................2
REFUSED .......................................................-7
DON'T KNOW ...................................................-8

PROGRAMMING NOTE QA11_J12:
IF QA11_J1 > 0 OR QA11_J2 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO), THEN CONTINUE WITH QA11_J12;
ELSE GO TO PROGRAMMING NOTE QA11_J17

QA11_J12  The last time you saw a doctor, did you have a hard time understanding the doctor?

โปรแกรมการคัดค้าน QA11_J12:
ถ้า QA11_J1 > 0 OR QA11_J2 = 0 OR 1 (ได้ดูแพทย์ใน 12 เดือนล่าสุดหรือ 1-2 ปีที่แล้ว) ให้ต่อไปใน QA11_J12;
อย่างอื่นไปที่โปรแกรมการคัดค้าน QA11_J17

AJ8

YES .................................................................1 [GO TO PN QA11_J14]
NO .................................................................2 [GO TO PN QA11_J17]
REFUSED .......................................................-7 [GO TO PN QA11_J17]
DON'T KNOW ...................................................-8 [GO TO PN QA11_J17]
PROGRAMMING NOTE QA11_J13:
IF QA11_J12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA11_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], THEN CONTINUE WITH QA11_J13;
ELSE GO TO PROGRAMMING NOTE QA11_J17

QA11_J13  In what language did the doctor speak to you?

your doctor用哪一种语言与你交谈？

<table>
<thead>
<tr>
<th>Language</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGLISH</td>
<td>[GO TO QA11_J15]</td>
</tr>
<tr>
<td>SPANISH</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>CANTONESE</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>VIETNAMESE</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>TAGALOG</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>MANDARIN</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>KOREAN</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>ASIAN INDIAN LANGUAGES</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>RUSSIAN</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>OTHER (SPECIFY:____________)</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>[GO TO PN QA11_J17]</td>
</tr>
</tbody>
</table>

QA11_J14  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？

<table>
<thead>
<tr>
<th>Action</th>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
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</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>

QA11_J15  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？

<table>
<thead>
<tr>
<th>Action</th>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
</tr>
</tbody>
</table>
QA11_J16  Who was this person who helped you understand the doctor?
是誰幫助您聽懂醫生說的話？

AJ11  [IF R RESPONDS “MY CHILD,” PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS “ADULT FAMILY MEMBER”.

MINOR CHILD (UNDER AGE 18) ..........................1
AN ADULT FAMILY MEMBER OR
FRIEND OF MINE.............................................2
NON-MEDICAL OFFICE STAFF .............................3
MEDICAL STAFF INCLUDING
NURSES/DOCTORS..........................................4
PROFESSIONAL INTERPRETER (BOTH IN
PERSON AND ON THE TELEPHONE) ...............5
OTHER (PATIENTS, SOMEONE ELSE).................6
DID NOT HAVE SOMEONE TO HELP...............7
REFUSED ....................................................7
DON'T KNOW .............................................8

PROGRAMMING NOTE QA11_J17:
IF QA11_G7 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH
QA11_J17;
ELSE GO TO PROGRAMMING NOTE QA11_J18

QA11_J17  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，你有權在就診時獲得免費口譯服務。你今天之前是否知道這項服務？

AJ105  YES .........................................................1
NO ...........................................................2
REFUSED ..................................................7
DON'T KNOW .............................................8
PROGRAMMING NOTE QA11_J18:
[IF [ARINSURE = 1 OR QA11_H74 = 1 (HAD INSURANCE AT ANY TIME DURING THE PAST 12 MONTHS)]
AND QA11_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA11_J18;
ELSE GO TO QA11_J20]

QA11_J18 In the past 12 months, did you change where you usually go for health care?

在過去十二個月內，你是否曾經改變通常接受醫療護理的地點？

AJ106

YES ..................................................................................1
NO ..................................................................................2 [GO TO QA11_J20]
REFUSED ........................................................................-7 [GO TO QA11_J20]
DON'T KNOW ..................................................................-8 [GO TO QA11_J20]

QA11_J19 Did you have to change because of your health insurance plan?

你是不是因為醫療保險計劃的原因而改變？

AJ107

[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: “「你是否因與你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？」”]

YES ..................................................................................1
NO ..................................................................................2
REFUSED ........................................................................-7
DON'T KNOW ..................................................................-8

QA11_J20 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，你有沒有延遲或沒有去拿醫生開給你的藥？

AH16

YES ..................................................................................1
NO ..................................................................................2 [GO TO PN QA11_J25]
REFUSED ........................................................................-7 [GO TO PN QA11_J25]
DON'T KNOW ..................................................................-8 [GO TO PN QA11_J25]

QA11_J21 Was cost or lack of insurance a reason why you delayed or did not get the prescription?

以下是有關牙科健康的幾個問題。自從您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。

AJ19

YES ..................................................................................1
NO ..................................................................................2
REFUSED ........................................................................-7
DON'T KNOW ..................................................................-8
PROGRAMMING NOTE QA11_J22:
IF [QA11_B3 = 1 OR QA11_B4 = 1 (HAS ASTHMA)] AND QA11_J13 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J22;
ELSE GO TO PROGRAMMING NOTE QA11_J23

QA11_J22  Was this prescription for your asthma?

AJ81

YES ..............................................................1
NO ..............................................................2
REFUSED ......................................................-7
DON'T KNOW .................................................-8

PROGRAMMING NOTE QA11_J23:
IF QA11_B18 = 1 (HAS DIABETES) AND QA11_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J23;
ELSE GO TO PROGRAMMING NOTE QA11_J24

QA11_J23  Was this prescription for your diabetes?

AJ82

YES ..............................................................1
NO ..............................................................2
REFUSED ......................................................-7
DON'T KNOW .................................................-8

PROGRAMMING NOTE QA11_J24:
IF QA11_B37 = 1 (HAS HEART DISEASE) AND QA11_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J24;
ELSE GO TO QA11_J25

QA11_J24  Was this prescription for your heart disease?

AJ83

YES ..............................................................1
NO ..............................................................2
REFUSED ......................................................-7
DON'T KNOW .................................................-8
**QA11_J25**  
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 12 個月中，你有沒有延遲或沒去做任何你覺得有需要的醫療照顧—比如看醫生、專家或其他的醫療專業人員？

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<tbody>
<tr>
<td><strong>AH22</strong></td>
<td></td>
</tr>
<tr>
<td>YES</td>
<td>.................................................................1</td>
</tr>
<tr>
<td>NO</td>
<td>.................................................................2 [GO TO QA11_J30]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>..........................................................-7 [GO TO QA11_J30]</td>
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<tr>
<td>DON'T KNOW</td>
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**QA11_J26**  
Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

缺少醫療費用或沒有保險是不是您延遲或沒有獲得您認為自己需要的醫療護理的一個原因？

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<tbody>
<tr>
<td><strong>AJ20</strong></td>
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<tr>
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<tr>
<td>NO</td>
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</tr>
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<td>REFUSED</td>
<td>..........................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>..........................................................-8</td>
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</table>

**PROGRAMMING NOTE QA11_J27:**

IF [QA11_B3 = 1 OR QA11_B4 = 1 (HAS ASTHMA)] AND QA11_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J27;  
ELSE GO TO PROGRAMMING NOTE QA11_J28

**QA11_J27**  
Was this medical care for your asthma?

這是不是為您的哮喘提供的醫療護理？

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<tbody>
<tr>
<td><strong>AJ84</strong></td>
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<td>YES</td>
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<td>..........................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>..........................................................-8</td>
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</tbody>
</table>
PROGRAMMING NOTE QA11_J28:
IF QA11_B18 = 1 (HAS DIABETES) AND QA11_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J28;
ELSE GO TO PROGRAMMING NOTE QA11_J29

QA11_J28  Was this medical care for your diabetes?

這是不是為您的糖尿病提供的醫療護理？

AJ85

YES ................................................................. 1
NO ................................................................. 2
REFUSED ...................................................... -7
DON'T KNOW .................................................. -8

PROGRAMMING NOTE QA11_J29:
IF QA11_B37 = 1 (HAS HEART DISEASE) AND QA11_J26 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY), THEN CONTINUE WITH QA11_J29;
ELSE GO TO QA11_J30

QA11_J29  Was this medical care for your heart disease?

這是不是為您的心臟病提供的醫療護理？

AJ86

YES ................................................................. 1
NO ................................................................. 2
REFUSED ...................................................... -7
DON'T KNOW .................................................. -8

QA11_J30  Have you ever used the Internet?

你是否曾經使用過互聯網？

AJ108

[INTERVIEWER NOTE: THIS INCLUDES SENDING OR RECEIVING EMAIL, USING FACEBOOK, TWITTER, ETC. INCLUDE USING A COMPUTER, PHONE, TABLET, OR ANY OTHER ELECTRONIC DEVICE FOR ACCESSING THE INTERNET.]

YES ................................................................. 1
NO ................................................................. 2  [GO TO QA11_J33]
REFUSED ...................................................... -7  [GO TO QA11_J33]
DON'T KNOW .................................................. -8  [GO TO QA11_J33]
QA11_J31  In the past 12 months, did you use the Internet to look for health or medical information?

在過去十二個月內，你是否曾經使用互聯網查看健康或醫療資訊？

AJ109  [IF NEEDED, SAY: “Include information about disease symptoms, diet or nutrition, physical activity, healthcare providers, and health insurance plans.”]
[IF NEEDED, SAY “包括有關疾病症狀、飲食或營養、身體活動、健康護理服務提供者以及醫療保險計劃。”]

YES ................................................................. 1
NO ........................................................................... 2
REFUSED ................................................................... -7
DON'T KNOW ............................................................ -8
**Section K – Employment, Income, Poverty Status, Food Security**

**PROGRAMMING NOTE QA11_K1:**

IF QA11_G26 = 1 OR 2 (WORKING AT JOB OR BUSINESS OR WITH A JOB OR BUSINESS BUT NOT AT WORK) OR QA11_G28 = 1 (R USUALLY WORKS), THEN CONTINUE WITH QA11_K1;
ELSE GO TO PROGRAMMING NOTE QA11_K5

QA11_K1 The next questions are about your employment.

以下是有關您的職業問題。

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？

AK3 [IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

______ HOURS [HR: 0-95]

REFUSED ........................................ -7
DON'T KNOW ...................................... -8

QA11_K2 How long have you worked at your main job?

您從事主要工作多久了？

AK7 [IF NEEDED, SAY: “That is, for your current employer.”] [IF NEEDED, SAY: “就是為您現在的僱主工作。”]

______ MONTHS [HR: 0-12]

______ YEARS [HR: 0-50]

REFUSED ........................................ -7
DON'T KNOW ...................................... -8
**PROGRAMMING NOTE QA11_K3:**
IF QA11_G30 = 2 (GOVERNMENT EMPLOYEE), THEN CODE QA11_K3 = 8 AND GO TO QA11_K4;
ELSE IF QA11_G30 = 3 (SELF-EMPLOYED), THEN CONTINUE WITH QA11_K3 AND DISPLAY "Including yourself, about" AND "you";
ELSE CONTINUE WITH QA11_K3 AND DISPLAY "About" AND "your employer"

**QA11_K3**
{Including yourself, about/About} how many people are employed by {you/your employer} at all locations?

你的雇主在所有地點總共聘用了大約多少名雇員

**AK8**

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

1 OR 2 .........................................................1
3-9 ......................................................................2
10-24 ..................................................................3
25-50 ..................................................................4
51-100 ..................................................................5
101-200 ..................................................................6
201-999 ..................................................................7
1,000 OR MORE .............................................8
REFUSED ..................................................................-7
DON'T KNOW ..................................................-8

**PROGRAMMING NOTE QA11_K4:**
IF QA11_G26 = 1 OR 2 (WORKING AT JOB OR BUSINESS OR WITH JOB OR BUSINESS BUT NOT AT WORK) OR QA11_G28 = 1 (USUALLY WORKS), THEN CONTINUE WITH QA11_K4;
ELSE GO TO PROGRAMMING NOTE QA11_K5

**QA11_K4**
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生意中, 包括小時工資、薪水、小費和佣金, 稅前和其他扣除額之前的總收入是多少? 請提供您的最佳估計數字。

**AK10**

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_________________ AMOUNT [HR: 0-999995]

REFUSED ..................................................................-7
DON'T KNOW ..................................................-8
PROGRAMMING NOTE QA11_K5:
IF QA11_G31 = 1 OR 2 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS OR SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK) OR QA11_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), THEN CONTINUE WITH QA11_K5;
IF QA11_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA11_G28 ≠ 1 (R DOES NOT USUALLY WORK) AND QA11_A16 = 1 (MARRIED), THEN DISPLAY “The next question is about your spouse’s employment.”
ELSE IF QA11_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA11_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN DISPLAY “The next question is about your partner’s employment.”
IF QA11_A16 = 1 THEN DISPLAY “spouse”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1 THEN DISPLAY “partner”; ELSE GO TO QA11_K7

QA11_K5  {The next question is about your spouse’s employment./ The next question is about your partner’s employment.}

接下來是有關你的{spouse}工作的問題。你的{spouse/partner}在所有的工作或業務中 通常 每週工作多少小時？
你的{spouse/partner}在所有的工作或業務中 通常 每週工作多少小時？

How many hours per week does your {spouse/partner} usually work at all jobs or businesses?

你的{spouse/partner}在所有的工作或業務中 通常 每週工作多少小時？

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]

_____ HOURS     [HR: 0-95]

REFUSED ................................................................. -7
DON’T KNOW ............................................................ -8
**PROGRAMMING NOTE QA11_K6:**

IF QA11_K5 > 0, THEN CONTINUE WITH QA11_K6;

IF QA11_QA11_A16 = 1 (MARRIED), THEN DISPLAY “spouse’s”;
ELSE IF QA11_D16 = 1 OR QA11_D17 = 1, THEN DISPLAY “partner’s”;
ELSE GO TO QA11_K7

---

**QA11_K6**

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?

據您估計，您的配偶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他扣除額之前的收入，請包括小時工資、薪資、小費和佣金。

**AK10A**

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_______________ AMOUNT [HR: 0-999995]

REFUSED .......................................................... -7
DON'T KNOW ......................................................... -8

**QA11_K7**

What is your best estimate of your household’s total annual income from all sources before taxes in 2010?

你2010年#來自所有來源的稅前 家庭全年總收入是多少？

**AK22**

[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: “請包括工作收入，社會安全金、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、企業、農場淨收入或租金以及任何其他資金收入。”]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_______________ AMOUNT [HR: 0-999995]

REFUSED .......................................................... -7
DON'T KNOW ......................................................... -8

[GO TO PN QA11_K9]

**QA11_K8**

PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?

根據我的記錄，您的家庭收入是 ${AMOUNT}$。這是否正確？

**AK22A**

YES ................................................................. 1
NO ................................................................. 2

[GO TO PN QA11_K15]
[GO BACK TO QA11_K7]
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，但您可不可以告訴我，你們家庭所有來源的稅前年收入是否超過還是不足20,000美元？

**QA11_K9**

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>MORE</td>
<td>1</td>
<td>[GO TO QA11_K11]</td>
</tr>
<tr>
<td>EQUAL TO $20K OR LESS</td>
<td>2</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
</tbody>
</table>

**QA11_K10**

Is it…

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,000 or less</td>
<td>1</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>$5,001 to $10,000</td>
<td>2</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>$10,001 to $15,000</td>
<td>3</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>$15,001 to $20,000?</td>
<td>4</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
</tbody>
</table>

**QA11_K11**

Is it more or less than $70,000 per year?

收入每年是否超過還是不足 70,000美元？

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>MORE</td>
<td>1</td>
<td>[GO TO QA11_K13]</td>
</tr>
<tr>
<td>EQUAL TO $70K OR LESS</td>
<td>2</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>REFUSED</td>
<td>-7</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>-8</td>
<td>[GO TO PN QA11_K15]</td>
</tr>
</tbody>
</table>
**QA11_K12**  Is it …  

| $20,001 to $30,000, ................................... | 1 |
| $20,001到$30,000, ................................... | 1 |
| $30,001 to $40,000, .................................. | 2 |
| $30,001到$40,000, .................................. | 2 |
| $40,001 to $50,000, .................................. | 3 |
| $40,001到$50,000, .................................. | 3 |
| $50,001 to $60,000, or ................................ | 4 |
| $50,001到$60,000,或 ................................ | 4 |
| $60,001 to $70,000? ................................... | 5 |
| $60,001到$70,000? ................................... | 5 |
| REFUSED ................................................. | 7 |
| DON’T KNOW ............................................. | 8 |

[GO TO PN QA11_K15]

**QA11_K13**  Is it more or less than $135,000 per year?  

收入每年是否超过还是不足$135,000美元？

| MORE ...................................................... | 1 |
| EQUAL TO $135K OR LESS ................................ | 2 |
| REFUSED ................................................. | 7 |
| DON’T KNOW ............................................. | 8 |

[GO TO PN QA11_K15]

**QA11_K14**  Is it …  

是……

| $70,001 to $80,000, .................................. | 1 |
| $70,001到$80,000, .................................. | 1 |
| $80,001 to $90,000, .................................. | 2 |
| $80,001到$90,000, .................................. | 2 |
| $90,001 to $100,000, or ................................ | 3 |
| $90,001到$100,000,或 ................................ | 3 |
| $100,001 to $135,000? ................................ | 4 |
| $100,001到$135,000? ................................ | 4 |
| REFUSED ................................................. | 7 |
| DON’T KNOW ............................................. | 8 |

[GO TO PN QA11_K15]
Including yourself, how many people living in your household are supported by your total household income?

包括您自己在內，住在您家裡的多少人需要依靠您的家庭總收入生活？

QA11_K15

_____ NUMBER OF PEOPLE [HR: 1-20]

REFUSED .............................................. -7
DON'T KNOW ....................................... -8

How many of these {INSERT NUMBER FROM QA11_K15} people are children under the age of 18?

在這{插入 K17 答案}口人中，有多少是 18 歲以下的孩子？

QA11_K16

_____ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

REFUSED .............................................. -7
DON'T KNOW ....................................... -8
PROGRAMMING NOTE QA11_K17:
OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2010 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA11_K15 AND QA11_K16 RESPECTIVELY. (THE 50%, 133%, 200% 300%, AND 400% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2010 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 0.5, 1.33, 2.3, AND 4, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM “Poverty Level 2010” DOCUMENT FOR THE TABLE OF VALUES. THE 50% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT50, THE 100% VALUE IN CATI VARIABLE POVRT100, THE 133% VALUE IN CATI VARIABLE POVRT133, THE 200% VALUE IN CATI VARIABLE POVRT200, THE 300% VALUE IN CATI VARIABLE POVRT300, AND THE 400% VALUE IN CATI VARIABLE POVRT400.) IF EITHER QA11_K15 OR QA11_K16 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT QA11_G15 OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

ASCERTAIN IF THE HOUSEHOLD INCOME IS ...
1) AT OR BELOW 50% FPL;
2) ABOVE 50% FPL BUT AT OR BELOW 100% FPL;
3) ABOVE 100% FPL BUT AT OR BELOW 133% FPL;
4) ABOVE 133% FPL BUT AT OR BELOW 200% FPL;
5) ABOVE 200% FPL BUT AT OR BELOW 300% FPL;
6) ABOVE 300% FPL BUT AT OR BELOW 400% FPL;
7) ABOVE 400% FPL; OR
8) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QA11_K7 ≠ -7 OR -8 THEN GO TO PROGRAMMING NOTE QA11_K23; ELSE IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14, ASK QA11_K17 USING POVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT); ELSE IF QA11_K7 = -7 OR -8 (REF/DK) AND IF QA11_K9 = -7 OR QA11_K11 = -7 OR QA11_K13 = -7, GO TO PROGRAMMING NOTE QA11_K23 ELSE GO TO PROGRAMMING NOTE QA11_K18

QA11_K17

I need to ask just one more question about income.

我需要再問最後一個有關收入的具體問題，然後我們就差不多結束了。

Was your total annual household income before taxes less than or more than ${POVRT50}?

你家庭在扣稅前的年收入總數是少過還是超過 ${XX,XXX}?

AK29

EQUAL TO OR LESS ..................................................1 [GO TO PN QA11_K23]
MORE .........................................................................2 [GO TO PN QA11_K23]
REFUSED .....................................................................-7 [GO TO PN QA11_K23]
DON'T KNOW .............................................................-8 [GO TO PN QA11_K23]
**PROGRAMMING NOTE QA11_K18:**

IF THE HOUS, THEN CONTINUE WITH QA11_K18 USING POVRT100 (100% POVERTY CUTOFF DISPLAY AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA11_K19
EHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14

**QA11_K18**  
I need to ask just one or two more questions about income.

我需要再問最後一個有關收入的具體問題，然後我們就差不多結束了。

Was your total annual household income before taxes less than or more than ${POVRT100}?

你家庭在扣稅前的年收入總數是少過還是超過 ${XX,XXX}？

<table>
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<th>1</th>
<th>2</th>
<th>7</th>
<th>8</th>
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<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>MORE</td>
<td></td>
<td></td>
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<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
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</tbody>
</table>

**PROGRAMMING NOTE QA11_K19:**

IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14, THEN CONTINUE WITH QA11_K17 USING POVRT133 (133% POVERTY CUTOFF DISPLAY AMOUNT);
IF QA11_K18 WAS NOT ASKED, DISPLAY “I need to ask just one more question about income.”;
ELSE DISPLAY “Was it”;
ELSE GO TO PROGRAMMING NOTE QA11_K20

<table>
<thead>
<tr>
<th>QA11_K19</th>
<th>{I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than ${POVRT133}?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
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<th>1</th>
<th>2</th>
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<tbody>
<tr>
<td>EQUAL TO OR LESS</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>MORE</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>REFUSED</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td></td>
<td></td>
<td></td>
<td>[GO TO PN QA11_K23]</td>
</tr>
</tbody>
</table>
PROGRAMMING NOTE QA11_K20:
IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14, THEN CONTINUE WITH QA11_K20 USING POVRT200 (200% POVERTY CUTOFF DISPLAY AMOUNT); ELSE GO TO PROGRAMMING NOTE QA11_K21

QA11_K20 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than ${POVRT200}?

是低於還是超過{XX,XXX}美元？

AK18B

EQUAL TO OR LESS .........................................1 [GO TO PN QA11_K23]
MORE ..........................................................2 [GO TO PN QA11_K23]
REFUSED .........................................................-7 [GO TO PN QA11_K23]
DON'T KNOW ..................................................-8 [GO TO PN QA11_K23]

PROGRAMMING NOTE QA11_K21:
IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14, THEN CONTINUE WITH QA11_K21 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT); ELSE GO TO PROGRAMMING NOTE QA11_K23

QA11_K21 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than ${POVRT300}?

是低於還是超過{XX,XXX}美元？

AK18C

EQUAL TO OR LESS .........................................1 [GO TO PN QA11_K23]
MORE ..........................................................2 [GO TO PN QA11_K23]
REFUSED .........................................................-7 [GO TO PN QA11_K23]
DON'T KNOW ..................................................-8 [GO TO PN QA11_K23]

PROGRAMMING NOTE QA11_K22:
IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA11_K10, QA11_K12, OR QA11_K14, THEN CONTINUE WITH QA11_K22 USING POVRT400 (400% POVERTY CUTOFF DISPLAY AMOUNT); ELSE GO TO PROGRAMMING NOTE QA11_K23

QA11_K22 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than ${POVRT400}?

是低於還是超過{XX,XXX}美元？

AK31

EQUAL TO OR LESS .........................................1
MORE ..........................................................2
REFUSED .........................................................-7
DON'T KNOW ..................................................-8
PROGRAMMING NOTE QA11_K23:
IF POVERTY < 3 (HH Income ≤ 200% FPL) OR 5 (HH INCOME NOT KNOWN), THEN CONTINUE WITH QA11_K23;
ELSE GO TO QA11_L1

QA11_K23

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

以下是有關你們家在過去十二個月中所吃的食物以及是否有錢購買所需的食物的問題。

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.”

我馬上會讀出兩句話，這是一般人針對家庭的食物狀況所說的。請就每一句話告訴我，這是否經常符合、有時符合還是從不符合您和您的家庭在過去十二個月的情況。

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

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。』這句話對您和您的家人在過去十二個月的情況。

AM1

OFTEN TRUE .................................................................1
SOMETIMES TRUE .........................................................2
NEVER TRUE ...............................................................3
REFUSED ........................................................................-7
DON’T KNOW ...............................................................-8

QA11_K24

The second statement is:
“(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?

第二個句子是：『{我/我們}無法負擔營養均衡的飲食。』這句話對您和您的家人在過去十二個月的情況，是通常正確、有時正確、還是完全不正確？

AM2

OFTEN TRUE .................................................................1
SOMETIMES TRUE .........................................................2
NEVER TRUE ...............................................................3
REFUSED ........................................................................-7
DON’T KNOW ...............................................................-8
QA11_K25
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，您或家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？

AM3

YES .................................................................1
NO .................................................................2 [GO TO QA11_K27]
REFUSED .........................................................-7 [GO TO QA11_K27]
DON'T KNOW .....................................................-8

QA11_K26
How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?

這種情況多久會出現一次－幾乎每個月、有的月份過但不是每個月、或只是在1或2個月裡

AM3A

ALMOST EVERY MONTH ........................................1
SOME MONTHS BUT NOT EVERY MONTH .................2
ONLY IN 1 OR 2 MONTHS ......................................3
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

QA11_K27
In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

在過去 12 個月中，您有沒有因為沒有足夠的錢購買食物而吃不飽？

AM4

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

QA11_K28
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？

AM5

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8
Section L - Public Program Participation

PROGRAMMING NOTE FOR BEGINNING OF SECTION L:
IF HOUSEHOLD INCOME IS ≤ 300% FPL (POVERTY = 1, 2 OR 3) OR IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 5), THEN CONTINUE WITH SECTION L;
ELSE GO TO QA11_M1

QA11_L1 Are you now receiving TANF or CalWORKs?
您目前是否在領取AFDC、TANF或CalWORKS？

AL2

[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: “AFDC是向需要贍養子女的家庭提供資助的計劃；TANF指貧困家庭臨時協助計劃；CalWORKS指加州工作機會與對兒童承擔責任的計劃”]

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON’T KNOW ..................................................-8

PROGRAMMING NOTE QA11_L2:
IF SAMPLED TEEN IN HOUSEHOLD, THEN CONTINUE WITH QA11_L2;
ELSE GO TO QA11_L3;

QA11_L2 Is (TEEN) now receiving TANF or CalWORKs?
{}目前是否在領取AFDC、TANF或CalWORKS？

IAP1

[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: “AFDC是向需要贍養子女的家庭提供資助的計劃；TANF指貧困家庭臨時協助計劃；CalWORKS指加州工作機會與對兒童承擔責任的計劃”]

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON’T KNOW ..................................................-8
QA11_L3  Are you receiving Food Stamp benefits, also known as CalFresh?

你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: 「你可能透過EBT卡獲得福利。EBT代表電子福利轉換卡。又稱作「黃金州優惠卡」。」]

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

PROGRAMMING NOTE QA11_L4:
IF ELIGIBLE TEEN IN HOUSEHOLD, THEN CONTINUE WITH QA11_L4;
ELSE GO TO QA11_L5

QA11_L4  Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?

(ADOLESCENT/AGE/SEX) 是否在領糧食券福利？糧食券福利也稱為CalFresh。

[IAP2]

[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: 「你通過EBT卡接受福利。EBT代表電子福利轉帳卡，也稱為「黃金州優惠卡」。」]

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8

QA11_L5  Are you receiving SSI?

您是否在領取SSI?

[AL6]

[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。」："]

YES .................................................................1
NO .................................................................2
REFUSED ..........................................................-7
DON'T KNOW ......................................................-8
PROGRAMMING NOTE QA11_L6:
IF QA11_A5 = 2 (FEMALE) AND [QA11_E3 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)], THEN CONTINUE WITH QA11_L6;
ELSE GO TO PROGRAMMING NOTE QA11_L7

QA11_L6 Are you on WIC?
您是否参加了WIC?

AL7
[IF NEEDED, SAY: “WIC is the Supplemental Food Program for Women, Infants and children.”]
[IF NEEDED, SAY: “WIC是為婦女、嬰兒和兒童提供的補助食品計劃。”]

YES ..............................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW ..................................................-8
PROGRAMMING NOTE QA11_L7:
OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL
PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM QA11_K15.

IF QA11_K15 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER
(GIVEN BY CATI VARIABLE RADLTCNT).

IF QA11_K15 = 1, THEN DISPLAY $3000;
IF QA11_K15 = 2, THEN DISPLAY $3000;
IF QA11_K15 = 3, THEN DISPLAY $3150;
IF QA11_K15 = 4, THEN DISPLAY $3300;
IF QA11_K15 = 5, THEN DISPLAY $3450;
IF QA11_K15 = 6, THEN DISPLAY $3600;
IF QA11_K15 = 7, THEN DISPLAY $3750;
IF QA11_K15 = 8, THEN DISPLAY $3900;
IF QA11_K15 = 9, THEN DISPLAY $4050;
IF QA11_K15 ≥ 10, THEN DISPLAY $4200;

IF QA11_A16 = 1 (MARRIED) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE), THEN
DISPLAY “your family’s”; ELSE DISPLAY “your”

QA11_L7 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，您認為您的資產，也就是說您所有的現金、儲蓄、投資及家俱的總值，有沒有超過{5,000美元}？

AL9

YES.................................................................1
NO...............................................................2
REFUSED........................................................7
DON’T KNOW.....................................................8

PROGRAMMING NOTE QA11_L8:
IF QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY
“you or your spouse”;
ELSE IF [QA11_A16 = 2 (LIVING WITH PARTNER) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
ELSE DISPLAY "you"

QA11_L8 Did {you or your spouse/you or your partner/you} receive any money last month for alimony, child support, or money from a government or veteran program?

您 {或您的配偶} 上個月有沒有從政府或退伍軍人計劃領取瞻養費、子女扶養費或資金？

AL15

YES.................................................................1
NO...............................................................2
REFUSED........................................................7
DON’T KNOW.....................................................8

[GO TO PN QA11_L10]
PROGRAMMING NOTE QA11_L9:
IF QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";
ELSE IF [QA11_A16 = 2 (LIVING WITH PARTNER) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";
ELSE CONTINUE WITHOUT DISPLAYS

QA11_L9 What was the {combined} total amount that you {and your spouse/and your partner} received from all these sources last month?

您 {和您的妻子/丈夫} 上個月從所有這些來源獲得的（總）收入是多少？

AL16

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$______________ AMOUNT [000001-999995]

REFUSED ........................................... -7
DON'T KNOW ........................................... -8

PROGRAMMING NOTE QA11_L10:
IF QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
ELSE IF [QA11_A16 = 2 (LIVING WITH PARTNER) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";
ELSE DISPLAY "you"

QA11_L10 Did {you or your partner or both of you/you or your spouse or both of you/you} pay any alimony or child support last month?

您 {或您的配偶或你們兩人} 上個月有沒有支付任何瞻養費或子女扶養費？

AL17

YES, RESPONDENT PAID ...............................................1
YES, SPOUSE/PARTNER PAID ......................................2
YES, BOTH PAID .........................................................3
NO .................................................................4 [GO TO PN QA11_L12]
REFUSED ..........................................................-7 [GO TO PN QA11_L12]
DON'T KNOW .........................................................-8 [GO TO PN QA11_L12]
**PROGRAMMING NOTE QA11_L11:**

```
IF QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
ELSE IF [QA11_A16 = 2 (LIVING WITH PARTNER) OR QA11_D16 = 1 OR QA11_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA11_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";
ELSE DISPLAY "you"
```

**QA11_L11** What was the total amount {you/your spouse/your partner/you both} paid in alimony or support last month?

{您/您的配偶/您的伴侶/你們兩人} 上個月費總數是多少？

**AL18**

```
[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]
```

```
_______________ AMOUNT          [000001-999995]

REFUSED...............................................-7
DON'T KNOW.........................................-8
```

**PROGRAMMING NOTE QA11_L12:**

```
IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND QA11_A16 = 1 (MARRIED) AND QA11_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA11_L12 AND DISPLAY "you or your spouse";
ELSE IF AGE ≥ 65 AND QA11_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA11_L12 AND DISPLAY "you or your partner";
ELSE IF AGE ≥ 65, THEN CONTINUE WITH QA11_L12 AND DISPLAY "you";
ELSE GO TO PROGRAMMING NOTE QA11_L14
```

**QA11_L12** 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} 上個月有沒有領取任何社會安全救濟金或退休金？

**AL18A**

```
YES.................................................................1
NO...............................................................2 [GO TO PN QA11_L14]
REFUSED......................................................-7 [GO TO PN QA11_L14]
DON'T KNOW..................................................-8 [GO TO PN QA11_L14]
```

**QA11_L13** What was the total amount received last month from Social Security and Pensions?

您上個月領取的社會安全金和養老金總額是多少？

**AL18B**

```
[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]
```

```
_______________ AMOUNT          [000001-999995]

REFUSED...............................................-7
DON'T KNOW.........................................-8
```
PROGRAMMING NOTE QA11_L14:
IF ARINSURE ≠ 1 (UNINSURED), THEN CONTINUE WITH QA11_L14;
ELSE GO TO QA11_M1

QA11_L14  What is the one main reason why you are not enrolled in the Medi-Cal program?

您沒有參加 Medi-Cal計劃的 一個 主要原因是什麼？

<table>
<thead>
<tr>
<th>AL19</th>
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<tbody>
<tr>
<td></td>
<td>PAPERWORK TOO DIFFICULT</td>
</tr>
<tr>
<td></td>
<td>DIDN'T KNOW IF ELIGIBLE</td>
</tr>
<tr>
<td></td>
<td>INCOME TOO HIGH, NOT ELIGIBLE</td>
</tr>
<tr>
<td></td>
<td>NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS</td>
</tr>
<tr>
<td></td>
<td>OTHER NOT ELIGIBLE</td>
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<tr>
<td></td>
<td>DON'T BELIEVE IN HEALTH INSURANCE</td>
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<tr>
<td></td>
<td>DON'T NEED IT BECAUSE HEALTHY</td>
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<tr>
<td></td>
<td>ALREADY HAVE INSURANCE</td>
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<tr>
<td></td>
<td>DIDN'T KNOW IT EXISTED</td>
</tr>
<tr>
<td></td>
<td>DON'T LIKE / WANT WELFARE</td>
</tr>
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<td></td>
<td>OTHER (SPECIFY:__________)</td>
</tr>
<tr>
<td></td>
<td>REFUSED</td>
</tr>
<tr>
<td></td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>
Section M – Housing and Social Cohesion

QA11_M1  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？

AK23
[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。」”]

HOUSE ......................................................1
DUPLEX ..................................................2
BUILDING WITH 3 OR MORE UNITS .............3
MOBILE HOME ...........................................4
REFUSED ..................................................-7
DON'T KNOW .............................................-8

QA11_M2  Do you own or rent your home?

您是自己擁有住宅還是租用住宅？

AK25

OWN .......................................................1
RENT ......................................................2
OTHER ARRANGEMENT ..............................3
REFUSED ..................................................-7
DON'T KNOW .............................................-8

PROGRAMMING NOTE QA11_M3:
IF AGE ≥ 65 AND QA11_M2 = 1 (OWNS HOME), THEN CONTINUE WITH QA11_M3
ELSE GO TO QA11_M4

QA11_M3  Are you currently paying off a mortgage or loan on this home?

你目前是否在付清這座住宅的按揭或貸款？

AM37

[IF SPOUSE/PARTNER IS PAYING, CODE AS “YES”]

YES .............................................................1
NO .............................................................2
REFUSED ..................................................-7
DON'T KNOW .............................................-8
QA11_M4  About how long have you lived at your current address?

以下是有關您的住宅和社區的問題。您在目前的住址大約已經居住多久了？

AM14

__________________ MONTHS [HR: 1 - AAGEx12MONTHS]

__________________ YEARS [HR: 1 - AAGE]

REFUSED............................................. -7
DON'T KNOW....................................... -8

PROGRAMMING NOTE QA11_M5:
IF QA11_M4 ≥ 5 YEARS, THEN GO TO PROGRAMMING NOTE QA11_M7;
ELSE CONTINUE WITH QA11_M5

QA11_M5  About how long have you lived in your current neighborhood?

你在目前所在的社區大約已經居住多長時間？

AM15

__________________ MONTHS [HR: 1 - AAGEx12MONTHS]

__________________ YEARS [HR: 1 - AAGE]

REFUSED............................................. -7
DON'T KNOW....................................... -8

QA11_M6  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麼？

AM38

CHANGE IN MARITAL/RELATIONSHIP STATUS...1
TO ESTABLISH OWN HOUSEHOLD...............2
FOR CHILD'S EDUCATION.......................3
TO ATTEND OR LEAVE COLLEGE ..............4
WORK RELATED....................................5
COULDN'T AFFORD MORTGAGE/RENT.........6
OTHER HOUSING RELATED....................7
BETTER NEIGHBORHOOD/LESS CRIME .......8
OTHER............................................... 91
REFUSED.......................................... -7
DON'T KNOW....................................... -8
PROGRAMMING NOTE QA11_M7:
IF QA11_M7 THROUGH QA11_M10 NOT ANSWERED IN CHILD INTERVIEW, THEN CONTINUE WITH QA11_M7;
ELSE GO TO QA11_M11

**QA11_M7**
Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

以下是有關您所在社區的問題。請告訴我您對以下陳述是極為贊成、贊成、不贊成還是極不贊成。

People in my neighborhood are willing to help each other.

我所在社區的人願意互相幫助。

**AM19**

[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.]

STRONGLY AGREE..................................................1
AGREE.................................................................2
DISAGREE...........................................................3
STRONGLY DISAGREE................................................4
REFUSED............................................................-7
DON’T KNOW........................................................-8

**QA11_M8**
People in this neighborhood can be trusted.

可以信任本社區的人。

**AM21**

[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.”]

STRONGLY AGREE..................................................1
AGREE.................................................................2
DISAGREE...........................................................3
STRONGLY DISAGREE................................................4
REFUSED............................................................-7
DON’T KNOW........................................................-8
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.]

STRONGLY AGREE..............................................1
AGREE..........................................................2
DISAGREE.......................................................3
STRONGLY DISAGREE...........................................4
REFUSED.......................................................-7
DON’T KNOW..................................................-8

Do you feel safe in your neighborhood…

您在居住區附近是……感到安全?

All of the time, .................................................1
Most of the time, .............................................2
Some of the time, or .........................................3
None of the time ..............................................4
REFUSED.......................................................-7
DON’T KNOW..................................................-8

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，您是否曾經做任何不領取報酬的義工或社區服務工作？

YES.............................................................1
NO..............................................................2
REFUSED.......................................................-7
DON’T KNOW..................................................-8
QA11_M12  In the past 12 months, have you served as a volunteer on any local board, council, or organization that deals with community problems?

在過去十二個月內，你是否曾經在任何處理社區問題的地方委員會、協會或組織做義工？

AM39

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW .................................................-8

QA11_M13  In the past 12 months, have you gotten together informally with others to deal with community problems?

在過去十二個月內，你是否曾經以非正式的方式與其他人一起處理社區的問題？

AM40

[IF NEEDED SAY: “For example, with a neighborhood watch group.”]
[IF NEEDED SAY: “例如，與鄰里守望小組。”]

YES .................................................................1
NO .................................................................2
REFUSED ......................................................-7
DON'T KNOW .................................................-8
Section S – Suicide Ideation and Attempts

QA11_S1  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的問題？

| AF86 | YES .................................................................1 |
|      | NO .................................................................2 | [GO TO PN QA11_N1] |
|      | REFUSED ......................................................-7 | [GO TO PN QA11_N1] |
|      | DON'T KNOW .................................................-8 | [GO TO PN QA11_N1] |

QA11_S2  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的問題？

| AF87 | YES .................................................................1 |
|      | NO .................................................................2 | [GO TO QA11_S4] |
|      | REFUSED ......................................................-7 | [GO TO QA11_S4] |
|      | DON'T KNOW .................................................-8 | [GO TO QA11_S4] |

QA11_S3  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？

| AF91 | YES .................................................................1 |
|      | NO .................................................................2 |
|      | REFUSED ......................................................-7 |
|      | DON'T KNOW .................................................-8 |

QA11_S4  Have you ever attempted suicide?

您是否曾經嘗試過自殺？

| AF88 | YES .................................................................1 |
|      | NO .................................................................2 |
|      | REFUSED ......................................................-7 |
|      | DON'T KNOW .................................................-8 |
PROGRAMMING NOTE QA11_S5:
IF QA11_S2 = 1 (SERIOUSLY THOUGHT ABOUT SUICIDE IN PAST 12 MONTHS) AND QA11_S4 = 1 (EVER ATTEMPTED SUICIDE), THEN CONTINUE WITH QA11_S5;
ELSE GO TO SUICIDE RESOURCE

QA11_S5  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？

AF89

YES .................................................................1
NO .................................................................2
REFUSED .........................................................-7
DON'T KNOW ..................................................-8

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. The number is 1-800-273-TALK (8255).

如果您希望與人討論有關自殺的想法或企圖，您可以撥打我們的免費電話號碼 1-800-273-TALK (8255)，每天二十四小時有人提供幫助您的資訊。

Or, you can visit a website to find out information about getting help. The website address is www.suicidepreventionlifeline.org.

您還可以查閱我們的網站，查找有關獲取幫助的資訊，該網址是 www.suicidepreventionlifeline.org。

POST-NOTE FOR SUICIDE RESOURCE:
IF QA11_S2 = (2, -7, -8) AND QA11_S4 = (2, -7, -8), THEN GO TO PROGRAMMING NOTE QA11_N1 (NEXT SECTION);
ELSE CONTINUE WITH QA11_S6

QA11_S6  Would you like to discuss your thoughts with this person?

您是否願意與這個人討論您的想法？

AF90

YES .................................................................1[GO TO SUICIDE PROTOCOL]
NO .................................................................2[GO TO PN QA11_N1]
REFUSED .........................................................-7[GO TO PN QA11_N1]
DON'T KNOW ..................................................-8[GO TO PN QA11_N1]
Section N – Demographic Information Part III and Closing

PROGRAMMING NOTE QA11_N1:
IF NOT ALREADY ASKED IN CHILD INTERVIEW, CONTINUE WITH QA11_N1;
ELSE GO TO QA11_N7

QA11_N1 Just a few final questions and then we are done.
最後再有幾個問題，我們就完成了。
To be sure we are covering the entire state, what county do you live in?
為了確保我們把全州都包括在研究範圍內，您住在哪個縣？

ALAMEDA ......................................................... 1
ALPINE ......................................................... 2
AMADOR ......................................................... 3
BUTTE .......................................................... 4
CALAVERAS .................................................... 5
COLUSA .......................................................... 6
CONTRA COSTA ................................................. 7
DEL NORTE ....................................................... 8
EL DORADO ....................................................... 9
FRESNO ........................................................ 10
GLENN .......................................................... 11
HUMBOLDT ....................................................... 12
IMPERIAL ......................................................... 13
INYO ............................................................. 14
KERN ............................................................. 15
KINGS ............................................................ 16
LAKE ............................................................. 17
LASSEN .......................................................... 18
LOS ANGELES .................................................. 19
MADERA .......................................................... 20
MARIN ............................................................ 21
MARIPOSA ....................................................... 22
MENDOCINO ..................................................... 23
MERCED .......................................................... 24
MODOC .......................................................... 25
MONO ............................................................. 26
MONTEREY ......................................................... 27
NAPA ............................................................. 28
NEVADA ........................................................ 29
ORANGE ........................................................ 30
PLACER .......................................................... 31
PLUMAS .......................................................... 32
RIVERSIDE ....................................................... 33
SACRAMENTO .................................................. 34
SAN BENITO ..................................................... 35
SAN BERNARDINO ............................................. 36
SAN DIEGO ....................................................... 37
SAN FRANCISCO ............................................... 38
SAN JOAQUIN .................................................. 39
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)?

**QA11_N2**

**YES** .................................................................1  [GO TO QA11_N6]
**NO** .................................................................2
**REFUSED** ............................................................-7
**DON’T KNOW** .....................................................-8

**QA11_N3** What is your zip code?

您的郵遞區號是？

**AM7**

_________ ZIP CODE

**REFUSED** ............................................................-7
**DON’T KNOW** .....................................................-8
QA11_N4  To help us better understand the environment you live in and how it may affect your health; please tell me the address where you live. This information will be kept confidential and will be destroyed after the entire survey has been completed.

为了帮助我们更好地理解您生活所处的环境以及您的生活环境对您的健康的影响，请告诉我您的住址。这些信息将会保密，并在问卷调查全部完成之后销毁。

______ HOUSE ADDRESS NUMBER
______ NAME OF STREET (VERIFY SPELLING)  [GO TO QA11_N6]
______ STREET TYPE
______ APT. NO

REFUSED ...........................................-7
DON'T KNOW ....................................-8

QA11_N5  Can you tell me just the name of the street you live on?

您是否能够只告诉我您居住的街道名称？

____________________________ NAME OF STREET

REFUSED ...........................................-7  [GO TO PN QA11_N7]
DON'T KNOW ....................................-8  [GO TO PN QA11_N7]

QA11_N6  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？

____________________________ NAME OF CROSS-STREET

REFUSED ...........................................-7
DON'T KNOW ....................................-8

PROGRAMMING NOTE QA11_N7:
IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QA11_N11;
ELSE CONTINUE WITH QA11_N7

QA11_N7  I won’t ask you for the number, but do you have a working cell phone?

我不會問你的手機號碼。你是否有一個可以使用的手機？

[CODE “SHARES CELL PHONE” ONLY IF VOLUNTEERED]

YES ...................................................1
NO .....................................................2
SHARES CELL PHONE .............................3
REFUSED ..........................................-7
DON'T KNOW .....................................-8
PROGRAMMING NOTE QA11_N8:
IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE QA11_N10;
ELSE CONTINUE WITH QA11_N8

QA11_N8 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？

| AN6 | YES .................................................................1 |
|     | NO .................................................................2 |
|     | REFUSED ..................................................................-7 |
|     | DON'T KNOW ................................................................-8 |

QA11_N9 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？

| AN7 | PERSONAL USE ONLY ..................................................1 |
|     | BUSINESS USE ONLY ...................................................2 |
|     | BOTH PERSONAL USE AND BUSINESS USE .....................3 |
|     | REFUSED ..................................................................-7 |
|     | DON'T KNOW ................................................................-8 |

PROGRAMMING NOTE QA11_N10:
IF QA11_N7 = 1 OR 3 (HAS CELL PHONE OR SHARES CELL PHONE) OR QA11_N9 = 1 OR 3 (LANDLINE IS FOR PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH QA11_N10;
ELSE GO TO PROGRAMMING NOTE QA11_N11

QA11_N10 Of all the telephone calls that you receive, are...

在您接聽的所有電話中，是......

| AM34 | All or almost all calls received on a cell phone, .......1 |
|      | Some on cell phones & some on regular phones, or ..............2 |
|      | Very few or none on cell phones ..........................3 |
|      | REFUSED .................................................................-7 |
|      | DON'T KNOW ...........................................................-8 |
PROGRAMMING NOTE QA11_N11:

IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;
ELSE CONTINUE WITH QA11_N11

QA11_N11 Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?
最後，您是否願意在未來的某個時間點參加本項研究的後續調查？

<table>
<thead>
<tr>
<th>AM10</th>
<th></th>
</tr>
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<tbody>
<tr>
<td>YES</td>
<td>.................................................................1</td>
</tr>
<tr>
<td>MAYBE/PROBABLY YES</td>
<td>.........................................................2</td>
</tr>
<tr>
<td>DEFINITELY NOT</td>
<td>.........................................................3</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.........................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.....................................................-8</td>
</tr>
</tbody>
</table>

PROGRAMMING NOTE SUICIDE RESOURCE 2:

IF QA11_S6 = (2, -7, -8) AND [QA11_S3 = 1 OR (QA11_S3 = 2, -7, -8 AND QA11_S5=1)], THEN CONTINUE WITH SUICIDE RESOURCE 2;
ELSE GO TO PROGRAMMING NOTE CLOSE1

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. The toll-free number is 1-800-273-TALK (8255).

我前面已經說明，如您希望與人談論有關自殺的想法或企圖的問題，有人可以每天二十四小時向您提供資訊，為您提供幫助。該免費電話號碼是1-800-273-TALK (8255)。

Or you can visit their website at www.suicidepreventionlifeline.org

您也可以查閱他們的網站 www.suicidepreventionlifeline.org。

QA11_N12 Would you like to speak with someone now?
您現在希望與人交談嗎？

<table>
<thead>
<tr>
<th>AN8</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>.................................................................1</td>
</tr>
<tr>
<td>NO</td>
<td>............................................................2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.........................................................-7</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>.....................................................-8</td>
</tr>
</tbody>
</table>

[GO TO SUICIDE PROTOCOL]
[GO TO PN CLOSE1]
[GO TO PN CLOSE1]
PROGRAMMING NOTE CLOSE1:
IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, GO TO CLOSE2;
ELSE CONTINUE WITH CLOSE1

CLOSE1  Let me check to see if there is anyone else. [GO TO HHSELECT]

讓我查一下看我們還需不需要和其他人說話。

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. E. Richard Brown, the Principal Investigator. Dr. Brown can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.

謝謝！你幫助我們進行了一項在全州範圍開展的非常重要的問卷調查。如果你有任何疑問，請與主研究員Brown博士接洽。你要他的電話號碼嗎？[IF YES, SAY: 你可以撥打免費電話號碼1-866-275-2447，與Brown博士聯絡。]