



CHIS 2013-2014 Adult Questionnaire Version 5.4 (Chinese) January 8, 2015

Adult Respondents Age 18 and Older

Collaborating Agencies:

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- ☐ California Department of Health Care Services
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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 2013 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 QA13_A1:
SET AADATE = CURRENT DATE (YYYYMMDD)

Age

QA13_A1 What is your date of birth?
 您的出生日期是什麼？

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: 1904-1996]

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_A2:
IF QA13_A1 = -7 OR -8 (REF/DK), CONTINUE WITH QA13_A2;
ELSE GO TO QA13_A5

QA13_A2 What month and year were you born?
 您在哪年哪月出生？

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: 1904-1996]

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_A3:
IF QA13_A2 = -7 OR -8 (REF/DK) THEN CONTINUE WITH QA13_A3;
ELSE GO TO QA13_A5

QA13_A3 What is your age, please?
 請告訴我您的年齡？

AA2

_____ YEARS OF AGE [RANGE: 0-120] [GO TO QA13_A5]

REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_A4:
IF QA13_A3 = -7 OR -8 (REF/DK) THEN CONTINUE WITH QA13_A4;
ELSE GO TO QA13_A5

QA13_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 291
 BETWEEN 30 AND 392
 BETWEEN 40 AND 443
 BETWEEN 45 AND 494
 BETWEEN 50 AND 645
 65 OR OLDER6
 REFUSED -7
 DON'T KNOW -8

POST NOTE QA13_A4: AAGE ENUM.AGE
CALCULATE VALUE OF AAGE BASED ON QA13_A1, QA13_A2, OR QA13_A3 TO USE IN ALL AGE-
RELATED QUESTIONS;
IF QA13_A1, QA13_A2, OR QA13_A3 = -7 OR -8 (REF/DK), THEN USE QA13_A4;
ELSE USE ENUM.AGE

Gender

QA13_A5 Are you male or female?
 您是男性還是女性？

AA3

MALE1
 FEMALE2
 REFUSED -7

Ethnicity**QA13_A6**

Are you Latino or Hispanic?

您是拉丁裔或西裔嗎？

AA4

YES	1	
NO	2	[GO TO PN QA13_A8]
REFUSED	-7	[GO TO PN QA13_A8]
DON'T KNOW	-8	[GO TO PN QA13_A8]

QA13_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。

AA5**[IF NECESSARY, GIVE MORE EXAMPLES]****[CODE ALL THAT APPLY]**

MEXICAN/MEXICAN AMERICAN/CHICANO	1
SALVADORAN	4
GUATEMALAN	5
COSTA RICAN	6
HONDURAN	7
NICARAGUAN	8
PANAMANIAN	9
PUERTO RICAN	10
CUBAN	11
SPANISH-AMERICAN (FROM SPAIN)	12
OTHER LATINO (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_A8:

**IF QA13_A6 = 1 (YES, LATINO/HISPANIC) DISPLAY “You said you are Latino or Hispanic. Also,”;
IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR QA13_A8, CONTINUE WITH
PROGRAMMING NOTE QA13_A9;
ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

Race**QA13_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?

另外，請告訴我您會使用以下哪一項或幾項來描述您自己。您認為您是夏威夷土著人、其他太平洋島人、美國印地安人、阿拉斯加土著人、亞洲人、黑人、非裔美國人還是白人？

AA5A

[IF R SAYS “NATIVE AMERICAN” CODE AS “4”]

[IF R GIVES ANOTHER RESPONSE YOU MUST SPECIFY WHAT IT IS]

[CODE ALL THAT APPLY]

WHITE.....	1	[GO TO PN QA13_A16]
BLACK OR AFRICAN AMERICAN.....	2	[GO TO PN QA13_A16]
ASIAN	3	[GO TO PN QA13_A12]
AMERICAN INDIAN OR ALASKA NATIVE	4	[GO TO PN QA13_A9]
OTHER PACIFIC ISLANDER	5	[GO TO PN QA13_A13]
NATIVE HAWAIIAN	6	[GO TO PN QA13_A16]
OTHER (SPECIFY: _____)	91	
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_A9:

**IF QA13_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA13_A9;
ELSE GO TO PROGRAMMING NOTE QA13_A12**

QA13_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

QA13_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	[GO TO PN QA13_A12]
REFUSED	-7	[GO TO PN QA13_A12]
DON'T KNOW	-8	[GO TO PN QA13_A12]

QA13_A11 Which tribe are you enrolled in?
 您在哪一個部落註冊?

AA5D

APACHE

MESCALERO APACHE, NM1
 APACHE (NOT SPECIFIED)2
 OTHER APACHE [Ask for spelling] (SPECIFY):3

BLACKFEET

BLACKFOOT/BLACKFEET4

CHEROKEE

WESTERN CHEROKEE5
 CHEROKEE (NOT SPECIFIED)6
 OTHER CHEROKEE [Ask for spelling] (SPECIFY) ...7

CHOCTAW

CHOCTAW OKLAHOMA8
 CHOCTAW (NOT SPECIFIED)9
 OTHER CHOCTAW [Ask for spelling] (SPECIFY): ..10

NAVAJO

NAVAJO (NOT SPECIFIED)11

POMO

HOPLAND BAND, HOPLAND RANCHERIA12
 SHERWOOD VALLEY RANCHERIA13
 POMO (NOT SPECIFIED)14
 OTHER POMO [Ask for spelling] (SPECIFY):15

PUEBLO

HOPI16
 YSLETA DEL SUR PUEBLO OF TEXAS17
 PUEBLO (NOT SPECIFIED)18
 OTHER PUEBLO [Ask for spelling] (SPECIFY):19

SIOUX

OGLALA/PINE RIDGE SIOUX20
 SIOUX (NOT SPECIFIED)21
 OTHER SIOUX [Ask for spelling] (SPECIFY):22

YAQUI

PASCUA YAQUI TRIBE OF ARIZONA23
 YAQUI (NOT SPECIFIED)24
 OTHER YAQUI [Ask for spelling] (SPECIFY):25

OTHER

OTHER [Ask for spelling] (SPECIFY: _____)91
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_A12:
IF QA13_A8 = 3 (ASIAN) CONTINUE WITH QA13_A12;
ELSE GO TO PROGRAMMING NOTE QA13_A13

QA13_A12 You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese?
 If you are more than one, tell me all of them.
 您選擇了亞裔，您指的是哪一個具體族裔，例如{華裔、菲律賓裔、越南裔}？

AA5E

[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 QA13_A13:
IF QA13_A8 = 5 (OTHER PACIFIC ISLANDER) CONTINUE WITH QA13_A13;
ELSE GO TO PROGRAMMING NOTE QA13_A14

QA13_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.
 您說您是太平洋群島人。您具體屬於哪一個種族團體，例如薩摩亞人、湯加人或關島人？
 如果您屬於一個以上種族團體，請告訴我所有的種族團體。

AA5E1

[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 QA13_A14:

IF QA13_A6 = 1 (LATINO) AND [QA13_A8 = 6 (NATIVE HAWAIIAN) OR QA13_A8 = 5 (OTHER PACIFIC ISLANDER) OR QA13_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA13_A8 = 3 (ASIAN) OR QA13_A8 = 2 (BLACK/AFRICAN AMERICAN) OR QA13_A8 = 1 (WHITE) OR QA13_A8 = 91 (OTHER)],
CONTINUE WITH QA13_A14;

ELSE IF THERE WERE MULTIPLE RESPONSES TO QA13_A8, QA13_A12, OR QA13_A13 [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH QA13_A14;

ELSE SKIP TO QA13_A16

QA13_A14 You said that you are: {INSERT MULTIPLE RESPONSES FROM QA13_A7, QA13_A8, QA13_A12 AND QA13_A13}.
您曾經說您是：{INSERT MULTIPLE RESPONSES FROM QA13_A7, QA13_A8, QA13_A12 AND QA13_A13}.

Do you identify with any one race in particular?

您是否認同任何一個特定的種族？

AA5G

YES	1	
NO	2	[GO TO QA13_A16]
REFUSED	-7	[GO TO QA13_A16]
DON'T KNOW	-8	[GO TO QA13_A16]

PROGRAMMING NOTE FOR QA13_A15:

IF QA13_A6 = 1 (YES, LATINO) AND QA13_A7 ≠ -7 OR -8, DO NOT DISPLAY QA13_A15 = 14 (LATINO);

IF QA13_A8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA13_A13 = 1 TO 4 OR 91, DO NOT DISPLAY QA13_A15 = 17 (OTHER PACIFIC ISLANDER);

IF QA13_A8 = 3 AND QA13_A12 = 1 TO 17 OR 91, DO NOT DISPLAY QA13_A15 = 19 (ASIAN)

QA13_A15 Which do you most identify with?

您#最\認同的是哪一個族裔？

AA5F

**[INTERVIEWER NOTE: IF R UNABLE TO CHOOSE ONE, OFFER
"BOTH/ALL/MULTIRACIAL"]**

MEXICAN/MEXICAN AMERICAN/CHICANO	1
SALVADORAN.....	4
GUATEMALAN	5
COSTA RICAN.....	6
HONDURAN	7
NICARAGUAN	8
PANAMANIAN	9
PUERTO RICAN	10
CUBAN.....	11
SPANISH-AMERICAN (FROM SPAIN)	12
LATINO, OTHER SPECIFY	13
LATINO	14
NATIVE HAWAIIAN	16
OTHER PACIFIC ISLANDER	17
AMERICAN INDIAN OR ALASKA NATIVE	18
ASIAN	19
BLACK OR AFRICAN AMERICAN	20
WHITE.....	21
RACE, OTHER SPECIFY	22
BANGLADESHI.....	30
BURMESE	31
CAMBODIAN	32
CHINESE	33
FILIPINO	34
HMONG	35
INDIAN (INDIA)	36
INDONESIAN.....	37
JAPANESE	38
KOREAN	39
LAOTIAN.....	40
MALAYSIAN.....	41
PAKISTANI	42
SRI LANKAN.....	43
TAIWANESE	44
THAI	45
VIETNAMESE	46
ASIAN, OTHER SPECIFY	49
SAMOAN/AMERICAN SAMOAN.....	50
GUAMANIAN	51
TONGAN.....	52
FIJIAN	53
PACIFIC ISLANDER, OTHER SPECIFY	55

BOTH/ALL/MULTIRACIAL	90
NONE OF THESE	95
REFUSED	-7
DON'T KNOW	-8

Marital Status**QA13_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、與伴侶像婚姻關係一樣同居、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

General Health

QA13_B1 These next questions are about your health.

Would you say that in general your health is excellent, very good, good, fair, or poor?
總體而言，您認為您的健康狀況是極好、很好、好、一般還是很差？

AB1

EXCELLENT1
VERY GOOD2
GOOD3
FAIR4
POOR5
REFUSED-7
DON'T KNOW-8

Asthma

QA13_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

YES1
NO2 [GO TO PN QA13_B18]
REFUSED-7 [GO TO PN QA13_B18]
DON'T KNOW-8 [GO TO PN QA13_B18]

QA13_B3 Do you still have asthma?
您是否依然患有哮喘病？

AB40

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_B5:

**IF [QA13_B3 = 2, -7, OR -8 (DOES NOT HAVE ASTHMA)] AND [QA13_B4 = 2, -7, OR -8 (NO EPISODE OF ASTHMA IN LAST 12 MOS)], GO TO QA13_B9;
ELSE CONTINUE WITH QA13_B5**

QA13_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.....

AB19

Not at all,1
Less than every month,2
Every month,3
Every week, or4
Every day?5
REFUSED -7
DON'T KNOW -8

QA13_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？

AH13A

YES1
NO2 [GO TO QA13_B8]
REFUSED -7 [GO TO QA13_B8]
DON'T KNOW -8 [GO TO QA13_B8]

QA13_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？

AB106

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

YES1
NO2
DOESN'T HAVE A DOCTOR3
REFUSED -7
DON'T KNOW -8

QA13_B8 During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?
在#過去十二個月中\，您是否因哮喘病曾經住院一天或更長時間？

AH15A

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_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

[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。」]

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_B10:

IF QA13_B3 = 1 (YES, STILL HAVE ASTHMA) OR QA13_B4 = 1 (YES, EPISODE IN LAST 12 MOS) GO TO PROGRAMMING NOTE QA13_B14;

ELSE CONTINUE WITH QA13_B10

QA13_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、呼吸急促、胸悶或黏痰。您認為是.....

AB66

Not at all,1
Less than every month,2
Every month,3
Every week, or4
Every day?5
REFUSED -7
DON'T KNOW -8

QA13_B11 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

YES1
NO2 **[GO TO QA13_B13]**
REFUSED -7 **[GO TO QA13_B13]**
DON'T KNOW -8 **[GO TO QA13_B13]**

QA13_B12 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

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

YES1
 NO2
 DOESN'T HAVE DOCTOR3
 REFUSED-7
 DON'T KNOW-8

QA13_B13 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

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_B14:
IF AAGE > 69 GO TO QA13_B15;
ELSE CONTINUE WITH QA13_B14

QA13_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

[INTERVIEWER NOTE: IF NOT WORKING, ENTER ZERO]

_____ DAYS (0 - 365)

REFUSED-7
 DON'T KNOW-8

QA13_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？

AB43

YES1
 NO2 **[GO TO QA13_B17]**
 REFUSED-7 **[GO TO QA13_B17]**
 DON'T KNOW-8 **[GO TO QA13_B17]**

QA13_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？

AB98

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

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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.....

AB108

Very confident,1
很有信心、1
Somewhat confident,2
較有信心、2
Not too confident, or3
不太有信心還是3
Not at all confident?4
毫無信心？4
REFUSED-7
DON'T KNOW-8

Diabetes

PROGRAMMING NOTE QA13_B18:
IF QA13_A5 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";
ELSE BEGIN DISPLAY WITH "Has"

QA13_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

YES1
NO2
BORDERLINE OR PRE-DIABETES3
REFUSED-7
DON'T KNOW-8

[GO TO PN QA13_B34]

Pre-Diabetes/Borderline Diabetes**PROGRAMMING NOTE QA13_B19:**

**IF QA13_A5 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";
ELSE BEGIN DISPLAY WITH "Has"**

QA13_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

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_B20:

**IF QA13_B18 = 1 THEN CONINTUE WITH QA13_B20;
ELSE SKIP TO PROGRAMMING NOTE QA13_B34**

QA13_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

QA13_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？

AB51

**[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 11
TYPE 22
ANOTHER TYPE3
REFUSED-7
DON'T KNOW-8

QA13_B22 Are you now taking insulin?
您目前正在使用胰島素嗎？

AB24

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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？

AB25

[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。」]

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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、您的家庭成員或朋友每天、每週或每月大約幾次檢查您的血糖？

AB26

[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

QA13_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」？

AB27

[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

QA13_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瘡或發炎？

AB28

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

QA13_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.

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

AB63

WITHIN THE PAST MONTH1
 WITHIN THE PAST YEAR (1-12 MONTHS AGO) ...2
 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO) ...3
 2 OR MORE YEARS AGO.....4
 NEVER5
 REFUSED -7
 DON'T KNOW -8

QA13_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發作前往醫院急診室就診？

AB109

YES1
 NO2 [GO TO QA13_B30]
 REFUSED -7 [GO TO QA13_B30]
 DON'T KNOW -8 [GO TO QA13_B30]

QA13_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發作無法約見自己的醫生而前往醫院急診室就診？

AB110

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

YES1
 NO2
 DOESN'T HAVE DOCTOR.....3
 REFUSED -7
 DON'T KNOW -8

QA13_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？

AB111

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_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？

AB112

YES	1	
NO	2	[GO TO QA13_B33]
REFUSED	-7	[GO TO QA13_B33]
DON'T KNOW	-8	[GO TO QA13_B33]

QA13_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？

AB113

[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

QA13_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.....

AB114

Very confident,	1
Somewhat confident,	2
Not too confident, or	3
Not at all confident?	4
REFUSED	-7
DON'T KNOW	-8

Gestational Diabetes

PROGRAMMING NOTE QA13_B34:
IF QA13_A5 = 2 (FEMALE) CONTINUE WITH QA13_B34;
ELSE GO TO QA13_B35

QA13_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: 「這也稱為妊娠糖尿病。」]

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

Hypertension

QA13_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 QA13_B37]
HIGH NORMAL/BORDERLINE/ PRE-HYPERTENSION	3	[GO TO QA13_B37]
REFUSED	-7	[GO TO QA13_B37]
DON'T KNOW	-8	[GO TO QA13_B37]

QA13_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

Heart Disease

QA13_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 QA13_B45]
REFUSED	-7	[GO TO QA13_B45]
DON'T KNOW	-8	[GO TO QA13_B45]

QA13_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過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

QA13_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 QA13_B41]
REFUSED	-7	[GO TO QA13_B41]
DON'T KNOW	-8	[GO TO QA13_B41]

QA13_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

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

YES1
 NO2
 DOESN'T HAVE DOCTOR3
 REFUSED -7
 DON'T KNOW -8

QA13_B41 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

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_B42 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

YES1
 NO2 **[GO TO QA13_B45]**
 REFUSED -7 **[GO TO QA13_B45]**
 DON'T KNOW -8 **[GO TO QA13_B45]**

QA13_B43 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。"]**

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_B44 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
 Somewhat confident,2
 Not too confident, or.....3
 Not at all confident?4
 REFUSED -7
 DON'T KNOW -8

Flu shot

QA13_B45 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?
 (CHIS 2014 ONLY)

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。"]

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

Section C – Health Behaviors

Walking for Transportation and Leisure

QA13_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？

AD37W

YES	1	
NO	2	[GO TO QA13_C4]
UNABLE TO WALK	3	[GO TO QA13_C7]
REFUSED	-7	[GO TO QA13_C4]
DON'T KNOW	-8	[GO TO QA13_C4]

QA13_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？

AD38W

[IF NEEDED, SAY: "Walk for at least 10 minutes to get some place."]

[IF NEEDED, SAY: "至少步行10分鐘去某個地方。"]

_____ TIMES PER WEEK		[IF 0, GO TO QA13_C4]
REFUSED	-7	[GO TO QA13_C4]
DON'T KNOW	-8	[GO TO QA13_C4]

PROGRAMMING NOTE QA13_C3:

IF QA13_C2 = 1 DISPLAY "How long did that walk take";

IF QA13_C2 > 1 DISPLAY "On average, how long did those walks take"

QA13_C3 {How long did that walk take/On average, how long did those walks take}?
此類步行通常多長時間？

AD39W

_____ MINUTES PER DAY	
_____ HOURS PER DAY	
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_C4:

IF QA13_C1 = 1 (WALK FOR TRANSPORTATION) DISPLAY "Please do not include walking for transportation."

QA13_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而至少步行10分鐘？請勿包括以步代車。

AD40W

YES	1	
NO	2	[GO TO QA13_C7]
REFUSED	-7	[GO TO QA13_C7]
DON'T KNOW	-8	[GO TO QA13_C7]

QA13_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 QA13_C7]**

REFUSED	-7	[GO TO QA13_C7]
DON'T KNOW	-8	[GO TO QA13_C7]

PROGRAMMING NOTE QA13_C6:

IF QA13_C5 = 1 DISPLAY "How long did that walk take";

IF QA13_C5 > 1 DISPLAY "On average, how long did those walks take"

QA13_C6 {How long did that walk take/On average, how long did those walks take}?
此類步行通常多長時間？

AD42W

_____ MINUTES PER DAY
_____ HOURS PER DAY

REFUSED	-7
DON'T KNOW	-8

Dietary Intake

QA13_C7 [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。

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	

QA13_C8 [During the past month,] how often did you drink sweetened fruit drinks, sports, or energy drinks?
[過去一個月中，]你喝加糖果汁飲料、運動或能量飲料的頻率有多高？

AC46

[IF NEEDED, SAY: "Such as lemonade, Gatorade, Snapple, or Red Bull."]

[IF NEEDED, SAY: 「例如檸檬水、Gatorade、Snapple或Red Bull。」]

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

_____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	

QA13_C9

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

你昨天在工作場所、家中和所有其他地方加起來總共喝了多少杯水？
請將一杯水

計算為一杯水，將一瓶水計算為兩杯水。將喝了幾口水（例如在飲水機上喝水）計算為不足一杯水。請給出你的最佳估計數字。

AC47

IF NEEDED SAY: “Include tap water, like from a sink, faucet, fountain, or pitcher, and bottled water like Aquafina®. Do not include flavored sweetened water.”]

[IF NEEDED, SAY: 「請包括自來水（例如水池、水龍頭、飲水機或水壺中的水）和瓶裝水（例如Aquafina）。請不要包括有調味的加糖的水。」]

_____ **Glasses** [HR: 0-20; SR: 0-15]

LESS THAN 1 GLASS

(eg, SIPS FROM A FOUNTAIN) 99

NONE 0

REFUSED -7

DON'T KNOW -8

QA13_C10

Yesterday, how many glasses of nonfat or low-fat milk did you drink? Do not include 2% milk or whole milk.

你昨天喝了多少杯無脂或低脂牛奶？不要包括2% 牛奶或全脂牛奶。

AC48

[IF NEEDED, SAY: “Count one cup or 8 ounces as one glass.”]

[IF NEEDED, SAY: 「將一杯或8盎司計算為一杯。」]

[INTERVIEWER NOTE: ONLY INCLUDE DAIRY MILK.]

_____ **GLASSES** [HR: 0-10; SR: 0-7]

REFUSED -7

DON'T KNOW -8

Fast Food**QA13_C11**

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#上一週的情況。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、外賣店或得來速快餐店購買的快餐食品。

AC31

[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

Access to Fresh and Affordable Foods**QA13_C12**

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……

AC42

Never,1

從未、1

Sometimes,2

有時、2

Usually, or3

經常、還是3

Always?4

總是？4

DOESN'T EAT F & V5

DOESN'T SHOP FOR F&V6

DOESN'T SHOP IN HIS/HER NEIGHBORHOOD....7

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_C13:
IF QA13_C12 = 2, 3, OR 4, THEN CONTINUE WITH QA13_C13;
ELSE GO TO PROGRAMMING NOTE QA13_C14

QA13_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
Sometimes	2
Usually, or	3
Always?	4
REFUSED	-7
DON'T KNOW	-8

Cigarette Use

QA13_C14 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 QA13_C46]
REFUSED	-7	
DON'T KNOW	-8	

QA13_C15 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	
SOME DAYS	2	[GO TO PN QA13_C17]
NOT AT ALL	3	[GO TO PN QA13_C18]
REFUSED	-7	[GO TO PN QA13_C18]
DON'T KNOW	-8	[GO TO PN QA13_C18]

QA13_C16 On average, how many cigarettes do you now smoke a day?
目前您每天平均抽多少枝煙？

AD32

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

_____ NUMBER OF CIGARETTES [HR: 0-120] **[GO TO PN QA13_C18]**

REFUSED -7 **[GO TO PN QA13_C18]**

DON'T KNOW -8 **[GO TO PN QA13_C18]**

PROGRAMMING NOTE QA13_C17:

IF QA13_C15 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA13_C17;

ELSE GO TO WITH QA13_C18

QA13_C17 In the past 30 days, when you smoked, how many cigarettes did you smoke per day?
在過去30天中您抽煙的日子裡，您每天抽多少枝煙？

AE16

[IF NEEDED, SAY: "On the days you smoked." AND IF R SAYS, A "PACK", CODE THIS AS 20 CIGARETTES]

[IF NEEDED, SAY: "在您抽煙的日子裡。"]

_____ NUMBER OF CIGARETTES [HR: 0-120]

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_C18:

**IF QA13_C15 = 1 (SMOKE EVERY DAY) OR 2 (SMOKE SOME DAYS), THEN CONTINUE WITH QA13_C18;
ELSE SKIP TO QA13_C46;**

QA13_C18 How old were you when you first started to smoke cigarettes fairly regular?
當你第一次開始比較經常地抽煙時，你多大歲數？
(CHIS 2014 ONLY)

AC52

_____ YEARS OLD [HR: 0, 5 - 99]

NEVER SMOKED REGULARLY0 **[SKIP TO QA13_C20]**

REFUSED -7 **[SKIP TO QA13_C20]**

DON'T KNOW -8 **[SKIP TO QA13_C20]**

QA13_C19 How long has it been since you smoked on a daily basis?

你每天抽煙已經有多長時間？
(CHIS 2014 ONLY)

AC53

_____ DAY(S) [HR: 0 - 365]
 _____ MONTH(S) [HR: 0 - 12]
 _____ YEAR(S) [HR: 0 - 99]

NEVER SMOKED DAILY..... 999
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_C20:

IF QA13_C15 = 2 (SMOKE SOME DAYS), THEN DISPLAY "On days when you smoke, how";

QA13_C20 {On days when you smoke, how/How} soon after you awake do you usually smoke your first cigarette?

你通常在起床後多久開始抽第一支煙？
(CHIS 2014 ONLY)

AC54

[IF R SAYS, "IMMEDIATELY", CODE 0]

[IF R SAYS, "I DON'T SMOKE AFTER WAKING UP", CODE 999]

_____ AMOUNT OF TIME

_____ UNIT OF TIME

MINUTES1
 HOURS2
 REFUSED -7
 DON'T KNOW -8

QA13_C21 Where do you usually buy your cigarettes?

你#通常\在哪裡買煙？
(CHIS 2014 ONLY)

AC55

CONVENIENCE STORES OR GAS STATIONS.....1
 SUPER MARKETS2
 LIQUOR STORES OR DRUG STORES3
 TOBACCO DISCOUNT STORES.....4
 OTHER DISCOUNT OR WAREHOUSE STORES,
 SUCH AS WAL-MART OR COSTCO5
 INDIAN RESERVATIONS.....6
 MILITARY COMMISSARIES7
 ONLINE8
 SOMEWHERE ELSE? (Other specify:_____) . 91
 I DON'T BUY 99
 REFUSED -7
 DON'T KNOW -8

[SKIP TO QA13_C23]

QA13_C22 How much do you usually pay for a pack of cigarettes?

你通常為一包煙付多少錢？
(CHIS 2014 ONLY)

AC56

_____ . _____ AMOUNT PER PACK
_____ . _____ AMOUNT PER CARTON

REFUSED -7

DON'T KNOW -8

QA13_C23 The last time you purchased cigarettes, did you take advantage of coupons, rebates, buy 1 get 1 free, 2 for 1, or any other special promotions?

你最後一次買煙時，是否利用減價券、折扣、買一送一、買二送一或任何其他特別減價促銷？
(CHIS 2014 ONLY)

AC57

YES1

NO2

REFUSED -7

DON'T KNOW -8

QA13_C24 Do you usually smoke menthol or non-menthol cigarettes?

你通常是抽含薄荷醇的香煙還是不含薄荷醇的香煙？
(CHIS 2014 ONLY)

AC58

MENTHOL1

NON-MENTHOL2

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_C25:

**IF QA13_C15 = 1 (SMOKE EVERY DAY) OR C15 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA13_C25;
ELSE CONTINUE WITH QA13_C46**

QA13_C25 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

在過去十二個月中，你是否曾因嘗試戒煙而停止抽煙一天或更長時間？
(CHIS 2014 ONLY)

AC49

YES1

NO2

REFUSED -7

DON'T KNOW -8

[GO TO QA13_C27]

[GO TO QA13_C27]

[GO TO QA13_C27]

QA13_C26 During the past 12 months, how many times have you tried to quit smoking for one day or longer?
在過去十二個月內，你曾經有多少次嘗試戒煙一天或更長時間？

AC59

_____ NUMBER OF TIMES

REFUSED -7

DON'T KNOW -8

QA13_C27 Are you thinking about quitting smoking in the next six months?
你是否在考慮在今後六個月內戒煙？

AC50

YES1

NO2

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_C28:

**IF QA13_C25 = 1 (TRIED QUITTING IN THE PAST 12 MONTHS), CONTINUE WITH QA13_C28;
ELSE SKIP TO QA13_C44;**

QA13_C29 There are many products called nicotine Replacement Therapy or NRT that replace nicotine to help people quit smoking. The last time you tried to quit, did you use a nicotine replacement therapy such as a...

有很多稱為尼古丁替代療法或NRT的產品，可幫助人們戒煙。你最後一次嘗試戒煙時，是否曾使用尼古丁替代療法，例如……
(CHIS 2014 ONLY)

AC60

nicotine patch?

尼古丁貼片？

YES1

NO2

REFUSED -7

DON'T KNOW -8

QA13_C30 [The last time you tried to quit, did you use a nicotine replacement therapy such as a...]

[你最後一次嘗試戒煙時，是否曾使用尼古丁替代療法，例如……]
(CHIS 2014 ONLY)

AC61

nicotine gum?

尼古丁口香糖？

YES1

NO2

REFUSED -7

DON'T KNOW -8

QA13_C30 [The last time you tried to quit, did you use a nicotine replacement therapy such as a...]
 [你最後一次嘗試戒煙時，是否曾使用尼古丁替代療法，例如……]
 (CHIS 2014 ONLY)

AC62

nicotine inhaler?
 尼古丁吸入劑？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C31 [The last time you tried to quit, did you use a nicotine replacement therapy such as a...]
 [你最後一次嘗試戒煙時，是否曾使用尼古丁替代療法，例如……]
 (CHIS 2014 ONLY)

AC63

nicotine lozenge?
 尼古丁糖錠？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C32 There are prescription medications to help people quit smoking cigarettes. The last time you tried to quit, did you use ...
 有可幫助人們戒煙的處方藥。你最後一次嘗試戒煙時，是否曾使用……
 (CHIS 2014 ONLY)

AC64

Zyban, Wellbutrin, or Bupropion?
 安非他酮（Zyban）、丁基丙酸苯（Wellbutrin）或丁胺苯丙酮（Bupropion）？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C33 [The last time you tried to quit, did you use ...]
 [你最後一次嘗試戒煙時，是否曾使用……]
 (CHIS 2014 ONLY)

AC65

Prozac?
 氟西汀（Prozac）？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C34 [The last time you tried to quit, did you use ...]
 [你最後一次嘗試戒煙時，是否曾使用……]
 (CHIS 2014 ONLY)

AC66

Chantix or Varenicline?
 伐尼克蘭 (Chantix) 或瓦倫尼克林 (Varenicline) ?

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C35 In the past 12 months, have you done any of the following to help you quit smoking? Did you...
 在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……
 (CHIS 2014 ONLY)

AC67

Switch to "light" cigarettes?
 換抽淡煙？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C36 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC68

Switch to smokeless tobacco?
 換抽無煙菸草？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C37 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC69

Quit completely on your own or "cold turkey"?
 自己完全戒煙或果斷地戒煙？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C38 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC70

Stop hanging out with friends who smoke?
 不再出去與抽煙的朋友一起玩？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C39 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC71

Try to quit with a friend?
 嘗試與一位朋友一起戒煙？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C40 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC72

Exercise more to help you quit smoking?
 更多地運動幫助戒煙？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C41 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC73

Use herbal remedies for quitting smoking?
 使用戒煙草藥？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C42 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC74

Use acupuncture or hypnosis to help you quit smoking?
 用針灸或催眠幫助戒煙？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C43 [In the past 12 months, have you done any of the following to help you quit smoking? Did you...]
 [在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾……]
 (CHIS 2014 ONLY)

AC75

Call a telephone quitting helpline?
 打電話給戒煙幫助熱線？

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C44 In the past 12 months, did a doctor or other health professional advise you to quit smoking?
 在過去十二個月內，是否有醫生或其他健康專業人員建議您戒煙？
 (CHIS 2014 ONLY)

AC77

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_C45 In the past 12 months, did a doctor or other health professional refer you to, or give you information about, a smoking cessation program?
 在過去十二個月內，是否有醫生或其他健康專業人員讓您參加戒煙計劃或向您提供有關戒煙計劃的資訊？
 (CHIS 2014 ONLY)

AC78

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_C46:
IF AGE <= 65 THEN CONTINUE WITH QA13_C46;
ELSE SKIP TO QA13_C48;

QA13_C46 Have you ever smoked a Hookah pipe?

您是否曾抽過水煙筒？

(CHIS 2014 ONLY)

AC79

[IF NEEDED, SAY: "Hookah is also known as shisha (she-sha), nargila (nar-geela), argila (argeela), or lula. Smoke is passed through water in a glass waterpipe to cool and filter the smoke."]

[IF NEEDED, SAY: 「水煙筒也稱為shisha、nargila、argila 或lula。煙通過玻璃水管中的水，使煙冷卻和過濾。」]

YES	1	
NO	2	[GO TO QA13_C48]
REFUSED	-7	[GO TO QA13_C48]
DON'T KNOW	-8	[GO TO QA13_C48]

QA13_C47 Do you now use a Hookah pipe every day, some days, or not at all?

你現在是否每天、有些天還是根本不抽水煙筒？

(CHIS 2014 ONLY)

AC80

EVERY DAY	1
SOME DAYS	2
NOT AT ALL	3
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_C48:
IF AGE <= 65 THEN CONTINUE WITH QA13_C48;
ELSE SKIP TO QA13_C51;

QA13_C48 Have you ever smoked electronic cigarettes, also known as e-cigarettes or vaporizer cigarettes?

你是否曾抽過電子煙？電子煙也稱為氣霧煙。

(CHIS 2014 ONLY)

AC81

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

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

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

YES	1	
NO	2	[GO TO QA13_C51]
REFUSED	-7	[GO TO QA13_C51]
DON'T KNOW	-8	[GO TO QA13_C51]

QA13_C49 During the past 30 days, how many days did you use electronic cigarettes?
 在過去三十天內，你有多少天曾抽電子煙？
 (CHIS 2014 ONLY)

AC82

_____ NUMBER OF DAYS [IF 0, THEN SKIP TO QA13_C51]

REFUSED -7 [SKIP TO QA13_C51]
 DON'T KNOW -8 [SKIP TO QA13_C51]

QA13_C50 What are your reasons for using electronic cigarettes?
 你是因為什?原因抽電子煙？
 (CHIS 2014 ONLY)

AC83

[CODE ALL THAT APPLY]
 [PROBE: 「還有任何其他原因嗎？」]

QUIT SMOKING 1
 REPLACE SMOKING 2
 CUT DOWN OR REDUCE SMOKING 3
 USE IN PLACES WHERE SMOKING NOT IS
 NOT ALLOWED 4
 CURIOSITY, JUST TRY IT 5
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_C51:
IF QA13_C15 = 1 (SMOKE EVERY DAY) OR C15 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA13_C51;
ELSE SKIP TO QA13_C64;

QA13_C51 What are the current rules or restrictions about smoking inside your home? Would you say...
 在你們家中目前是否有任何對抽煙的規定或限制？你認為是……
 (CHIS 2014 ONLY)

AC84

Smoking is completely banned for everyone,1
 完全禁止每個人抽煙，1
 Smoking is generally banned for everyone with
 few exceptions,2
 通常禁止每個人抽煙，只有極少的例外情況，2
 Smoking is allowed in some rooms only, or3
 僅允許在某些房間裡抽煙，還是3
 There are no rules or restrictions on smoking inside
 your home?4
 在你們家中對抽煙沒有規定或限制？4
 NO SMOKERS/NO NEED5
 VOLUNTARILY DON'T SMOKE INSIDE HOME6
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

QA13_C52 Is your place of work completely smoke-free indoors?

你的工作場所是不是完全禁止在室內抽煙？
(CHIS 2014 ONLY)

AC85

YES	1	
NO	2	
DON'T WORK/RETIRED	3	[SKIP TO QA13_C54]
NOT APPLICABLE	4	[SKIP TO QA13_C54]
WORK OUTDOORS	5	[SKIP TO QA13_C54]
REFUSED	-7	[SKIP TO QA13_C54]
DON'T KNOW	-8	[SKIP TO QA13_C54]

QA13_C53 As far as you know, in the past 7 days, has anyone smoked in your work area?

據你所知，在過去七天內，在你的工作場所是否有任何人抽煙？
(CHIS 2014 ONLY)

AC86

YES	1
NO	2
DON'T WORK/RETIRED	3
NOT APPLICABLE	4
WORK OUTDOORS	5
REFUSED	-7
DON'T KNOW	-8

QA13_C54 How many people with whom you regularly interact, including close friends and family, smoke cigarettes?

你通常打交道的人（包括好友和家人）中有多少人抽煙？
(CHIS 2014 ONLY)

AC87

_____ NUMBER OF PEOPLE

REFUSED	-7
DON'T KNOW	-8

QA13_C55 Please think about any messages against smoking that you saw on TV, heard on the radio, or saw on a billboard. In the past 60 days, did you see...

請想一想你在電視上看到、在廣播裡聽到或在廣告牌上看到的反對抽煙的任何訊息。在過去六十天內，你是否曾看到……
(CHIS 2014 ONLY)

AC88

a lot of messages against smoking,	1
很多反對抽煙的訊息、	1
a few messages against smoking, or	2
很少反對抽煙的訊息、還是	2
no messages against smoking?	3
沒有反對抽煙的訊息？	3
NEVER/RARELY WATCH TV OR LISTEN TO THE RADIO	4
REFUSED	-7
DON'T KNOW	-8

QA13_C56 In the last few years, do you think advertising for tobacco products has...
 在過去幾年內，你認為菸草產品廣告是……
 (CHIS 2014 ONLY)

AC89

increased a lot,	1
增加了很多、	1
increased a little,	2
增加了一些、	2
stayed the same,	3
保持不變、	3
decreased a little, or	4
減少了一些、還是	4
decreased a lot?	5
減少了許多？	5
REFUSED	-7
DON'T KNOW	-8

QA13_C57 Please tell me if you agree or disagree with each of the following statements.
 請告訴我你是否同意以下每一項陳述。
 (CHIS 2014 ONLY)

AC90

Taking a stand against smoking is important to you.
 對抽煙採取反對的立場對你很重要。

AGREE	1
DISAGREE	2
REFUSED	-7
DON'T KNOW	-8

QA13_C58 [請告訴我你是否同意以下每一項陳述。]

You want to be involved in efforts to get rid of smoking.
 你希望參加禁煙活動。
 (CHIS 2014 ONLY)

AC91

AGREE	1
DISAGREE	2
REFUSED	-7
DON'T KNOW	-8

QA13_C59

How much additional tax on a pack of cigarettes would you be willing to support if all the money raised was used to fund programs aimed at preventing smoking among children, and other health care programs? Would you support a tax increase of...

如果增收的煙稅全部被用於贊助旨在預防兒童抽煙的計劃和其他健康

護理計劃，你願意支持每包煙增加多少稅款？你是否支持對每包煙增收稅款……

(CHIS 2014 ONLY)

AC92

50 cents a pack,	1
50美分、	1
\$1.00,	2
1.00美元、	2
\$2.00,	3
2.00美元、	3
\$3.00,	4
3.00美元、	4
more than \$3.00 a pack, or	5
3.00美元以上、還是	5
no tax increase?	6
不增收稅款？	5
REFUSED	-7
DON'T KNOW	-8

QA13_C60

Please tell me if you think smoking should be allowed or not allowed in each of the following places:

請告訴我你認為在以下每一個場所是否應當允許抽煙：

AC93

Outdoor public places like parks, beaches, golf courses, zoos, and sports stadiums.

戶外公共場所，例如公園、海灘、高爾夫球場、動物園和體育館。

(CHIS 2014 ONLY)

NOT ALLOWED	1
ALLOWED	2
REFUSED	-7
DON'T KNOW	-8

QA13_C61

[請告訴我你認為在以下每一個場所是否應當允許抽煙：]

Outdoor restaurant dining patios.

戶外餐館的就餐陽臺。

(CHIS 2014 ONLY)

AC94

NOT ALLOWED	1
ALLOWED	2
REFUSED	-7
DON'T KNOW	-8

QA13_C62 [請告訴我你認為在以下每一個場所是否應當允許抽煙：]

Indian casinos.

印第安人賭場。
(CHIS 2014 ONLY)

AC95

NOT ALLOWED1
ALLOWED2
REFUSED -7
DON'T KNOW -8

QA13_C63 Do you agree or disagree that there should be a total ban on smoking everywhere in your city or town, except in one's home?

你是否贊成除了自己的家中你所在城市或城鎮的所有地方應完全禁煙？
(CHIS 2014 ONLY)

AC96

AGREE1
DISAGREE2
REFUSED -7
DON'T KNOW -8

Alcohol use/Abuse

QA13_C64 Now think about the past 12 months. Over that time, did you have any kind of alcoholic drink?
現在請想一想過去十二個月的情況。在此期間，您是否曾經飲用任何類型的含酒精飲料？

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 QA13_D1]
REFUSED	-7	[GO TO QA13_D1]
DON'T KNOW	-8	[GO TO QA13_D1]

PROGRAMMING NOTE QA13_C65:
IF QA13_A5 = 1 (MALE) CONTINUE WITH QA13_C65;
ELSE SKIP TO QA13_C66

QA13_C65 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 QA13_D1]**

REFUSED -7 **[GO TO QA13_D1]**

DON'T KNOW -8 **[GO TO QA13_D1]**

QA13_C65 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。」]

_____TIMES [HR: 0-365; SR: 0-99]

REFUSED -7

DON'T KNOW -8

Section D – General Health, Disability, and Sexual Health

Height and Weight

QA13_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？

AE17

[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 QA13_D2:
IF QA13_A5 = 2 (FEMALE) and AAGE < 50, DISPLAY "When not pregnant, how";
ELSE DISPLAY "How"

QA13_D2 {When not pregnant, how/How} much do you weigh without shoes?
 您不穿鞋時體重是多少？

AE18

[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

Disability

QA13_D3 Are you blind or deaf, or do you have a severe vision or hearing problem?
 您是盲人或聾人，或有嚴重視力或聽力障礙嗎？

AD50

YES1
 NO2 [GO TO QA13_D5]
 REFUSED -7 [GO TO QA13_D5]
 DON'T KNOW -8 [GO TO QA13_D5]

QA13_D4 Are you legally blind?
您是不是法律認可的盲人？

AL8

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_D5 Do you have a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?
您是否有任何一種嚴重限制一種或多種基本身體活動的症狀？
例如，步行、上樓梯、伸手取物或提拿物體。

AD57

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_D6 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、精神或情感疾病，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

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_D7 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。」]

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_D8 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。」]

YES1
NO2
REFUSED -7
DON'T KNOW -8

**PROGRAMMING NOTE QA13_D9:
IF AAGE > 64 GO TO PN QA13_D11**

QA13_D9 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、精神或情感狀況。」]

YES1
NO2 **[GO TO PN QA13_D11]**
REFUSED -7 **[GO TO PN QA13_D11]**
DON'T KNOW -8 **[GO TO PN QA13_D11]**

QA13_D10 Do you have a physical or mental condition that has kept you from working for at least a year?
您是否有使您至少一年無法工作的身體或精神症狀？

AL8A

[IF NEEDED, SAY "Current condition."]

[IF NEEDED, SAY: "目前的狀況。"]

YES1
NO2
REFUSED -7
DON'T KNOW -8

Sexual Partners**PROGRAMMING NOTE QA13_D11:**

**IF AAGE > 70 OR QA13_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 70 OR IF AGE IS UNKNOWN, GO TO PROGRAMMING NOTE QA13_E1;
ELSE CONTINUE WITH QA13_D11**

QA13_D11 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 QA13_D13]

REFUSED -7 [GO TO PN QA13_D13]

DON'T KNOW -8

QA131_D12 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 PARTNER1

2-3 PARTNERS2

4-5 PARTNERS3

6-10 PARTNERS4

MORE THAN 10 PARTNERS5

REFUSED -7

DON'T KNOW -8

Sexual Orientation

PROGRAMMING NOTE QA13_D13:

IF QA13_D11 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR QA13_D12=0, GO TO PROGRAMMING NOTE QA13_D14;

ELSE CONTINUE WITH QA13_D13;

IF QA13_D11 OR QA13_D12 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY “Is that partner male or female”;

ELSE DISPLAY “In the past 12 months, have your sexual partners been male, female, or both male and female”

QA13_D13 {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

MALE1
 FEMALE2
 BOTH MALE AND FEMALE3
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_D14:

IF QA13_A5 = 1 (MALE), DISPLAY “Gay” IN QUESTION AND “Gay” IN HELP SCREEN;

ELSE IF QA13_A5 =2 (FEMALE), DISPLAY “Gay, Lesbian” IN QUESTION AND “Gay and Lesbian” IN HELP SCREEN

QA13_D14 Do you think of yourself as straight or heterosexual, as 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 {and Lesbian} people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes”.]

[IF NEEDED, SAY: 「異性戀者主要受異性吸引並與異性發生性關係；男同性戀者和女同性戀者主要受同性吸引並與同性發生性關係；雙性戀者受兩種性別的人吸引並與兩種性別的人發生性關係。」]

STRAIGHT OR HETEROSEXUAL1
 GAY, LESBIAN, OR HOMOSEXUAL2
 BISEXUAL.....3
 NOT SEXUAL/CELIBATE/NONE4
 OTHER (SPECIFY: _____)5
 REFUSED -7
 DON'T KNOW -8

HIV Testing**PROGRAMMING NOTE QA13_D15:**

IF [QA13_D11 > 1 OR QA13_D12 > 1 (MORE THAN ONE SEXUAL PARTNER IN LAST 12 MONTHS)] OR
 [QA13_A5 = 1 (MALE) AND (QA13_D14=2 (GAY) OR QA13_D14=3 (BISEXUAL))]
 CONTINUE WITH QA13_D15;
 ELSE GO TO PROGRAMMING NOTE QA13_D19;

QA13_D15 Have you ever been tested for HIV, the virus that causes AIDS?
 您是否曾經接受過艾茲病毒HIV測試?

AD55

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_D16:

IF QA13_D15 = 1 CONTINUE WITH QA13_D16;
 ELSE GO TO PROGRAMMING NOTE QA13_D19;

QA13_D16 In the past year, how many times have you been tested for HIV?
 在過去一年中，你曾經接受過幾次HIV測試？

AD62

NOT TESTED IN PAST YEAR0
 ONE TIME1
 TWO TIMES2
 THREE TIMES3
 FOUR TIMES4
 FIVE TIMES5
 SIX OR MORE TIMES6
 REFUSED-7
 DON'T KNOW-8

QA13_D17 When was your last HIV test?
 你最後一次接受HIV測試是什麼時間？

AD63

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

YEAR _____ [RANGE: 1985-2013]

REFUSED-7
 DON'T KNOW-8

QA13_D18 Was the result of your HIV test positive or negative?
你的HIV測試結果是陽性還是陰性？

AD64

POSITIVE.....1
NEGATIVE2
REFUSED -7
DON'T KNOW -8

Registered Domestic Partner

PROGRAMMING NOTE QA13_D19:

IF [QA13_A5 = 1 (MALE) AND QA13_D13 = 1 (MALE)] OR [QA13_A5 = 2 (FEMALE) AND QA13_D13 = 2 (FEMALE)] OR [QA13_D13 = 3, -7, OR -8] OR [IF QA13_D14 ≠ 1] CONTINUE WITH QA13_D19; ELSE GO TO PROGRAMMING NOTE SECTION E

QA13_D19 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.]

YES1 **[GO TO PN SECTION E]**
NO2
REFUSED -7
DON'T KNOW -8

QA13_D20 Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?
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？

AD61

YES1
NO2
REFUSED -7
DON'T KNOW -8

Section F – Mental Health

K6 Mental Health Assessment

QA13_F1 The next questions are about how you have been feeling during the past 30 days.

以下是關於在過去30天內您的感覺的問題。

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

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

AJ29

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

QA13_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 — 所有的時間、大多數時間、部份時間、較少的時間還是從來沒有？

AJ30

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

QA13_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不安或煩躁？

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: "大多數時間、部份時間、較少的時間還是從來沒有? "]

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

QA13_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，以致任何事都無法讓您高興起來？

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: "大多數時間、部份時間、較少的時間還是從來沒有? "]

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

QA13_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做每件事都非常吃力？

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: "大多數時間、部份時間、較少的時間還是從來沒有? "]

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

QA13_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價值？

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: "大多數時間、部份時間、較少的時間還是從來沒有? "]

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

Repeated K6

QA13_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？

AF62

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_F8:
IF QA13_F7 = 1 THEN CONTINUE WITH QA13_F8;
ELSE SKIP TO PROGRAMMING NOTE QA13_F14

QA13_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？

AF63

ALL1
 MOST2
 SOME3
 A LITTLE4
 NONE5
 REFUSED-7
 DON'T KNOW-8

QA13_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？

AF64

ALL1
 MOST2
 SOME3
 A LITTLE4
 NONE5
 REFUSED-7
 DON'T KNOW-8

QA13_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

QA13_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

QA13_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

QA13_F13 How often did you feel worthless?
您感到自己毫無用處的頻率有多高?

AF68

[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

Sheehan Scale

ADD REVERSE CODING OF K6 CALCULATION AS TEMPORARY VARIABLE HERE:

PROGRAMMING NOTE QA13_F14intro:

IF (QA13_F1 + QA13_F2 + QA13_F3 + QA13_F4 + QA13_F5 + QA13_F6 > 8) OR

(QA13_F8 + QA13_F9 + QA13_F10 + QA13_F11 + QA13_F12 + QA13_F13 > 8) OR

(IF QA13_F1-F6 = ONE OUT OF RANGE RESPONSE AND F1-F6 > 7) OR

(IF QA13_F8-F13 = ONE OUT OF RANGE RESPONSE AND F8-F13 > 7) THEN CONTINUE WITH

QA13_F14intro;

IF QA13_F7 = 1 THEN DISPLAY "again, please";

ELSE SKIP TO QA13_F19

QA13_F14intro 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 QA13_F14:

IF AGE > 70 GO TO QA13_F15;

ELSE CONTINUE WITH QA13_F14

QA13_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?

AF69B

A LOT	1
SOME	2
NOT AT ALL.....	3
DOES NOT WORK	4
REFUSED	-7
DON'T KNOW	-8

QA13_F15 Did your emotions interfere a lot, some, or not at all with your household chores?
 您的情緒對您做家务是影響很大、有一些影響還是根本沒有影響？

AF70B

A LOT1
 SOME2
 NOT AT ALL3
 REFUSED -7
 DON'T KNOW -8

QA13_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 LOT1
 SOME2
 NOT AT ALL3
 REFUSED -7
 DON'T KNOW -8

QA13_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 LOT1
 SOME2
 NOT AT ALL3
 REFUSED -7
 DON'T KNOW -8

QA13_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

Access & Utilization

QA13_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 or 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、酗酒或吸毒的問題感到需要約見專業人士呢

AF81

YES	1	
NO	2	[GO TO QA13_F21]
REFUSED	-7	[GO TO QA13_F21]
DON'T KNOW	-8	[GO TO QA13_F21]

QA13_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。

AJ1

YES	1
NO	2
DON'T HAVE INSURANCE	3
REFUSED	-7
DON'T KNOW	-8

QA13_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？

AF74

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

QA13_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？

AF75

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

PROGRAMMING NOTE QA13_F23:

**IF QA13_F21 = 1 OR QA13_F22 = 1 THEN CONTINUE WITH QA13_F23;
ELSE SKIP TO QA13_F28**

QA13_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？

AF76

MENTAL-EMOTIONAL HEALTH.....1
ALCOHOL-DRUG PROBLEM2
BOTH MENTAL & ALCOHOL-DRUG3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_F24:

IF QA13_F23 = 1, DISPLAY: "mental or emotional health";

IF QA13_F23 = 2, DISPLAY: "use of alcohol or drugs";

IF QA13_F23 = 3, DISPLAY: "mental or emotional health and your use of alcohol or drugs";

ELSE SKIP TO QA13_F25

QA13_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。

AF77

_____ NUMBER OF VISITS

REFUSED -7
DON'T KNOW -8

QA13_F25 Are you still receiving treatment for these problems from one or more of these providers?
您現在仍然因為這些問題在約見其中的一位或多位服務提供者嗎？

AF78

YES1 [GO TO QA13_F28]
NO2
REFUSED -7 [GO TO QA13_F28]
DON'T KNOW -8 [GO TO QA13_F28]

QA13_F26 Did you complete the recommended full course of treatment?
您是否已經完成了建議的全部療程？

AF79

YES1 [GO TO QA13_F28]
NO2
REFUSED -7 [GO TO QA13_F28]
DON'T KNOW -8 [GO TO QA13_F28]

QA13_F27 What is the MAIN REASON you are no longer receiving treatment?
您不再接受治療的#主要原因\是什麼?

AF80

GOT BETTER/NO LONGER NEEDED1
NOT GETTING BETTER2
WANTED TO HANDLE PROBLEM ON OWN.....3
HAD BAD EXPERIENCES WITH TREATMENT4
LACK OF TIME/TRANSPORTATION.....5
TOO EXPENSIVE6
INSURANCE DOES NOT COVER7
OTHER (SPECIFY:_____).8
REFUSED -7
DON'T KNOW -8

QA13_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?
在過去十二個月中，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，例如抗憂鬱藥或鎮靜劑?

AJ5

YES1
NO2
REFUSED -7
DON'T KNOW -8

Stigma

PROGRAMING NOTE QA13_F29:

IF QA13_F19 = 1 AND (QA13_F21 ≠ 1 AND QA13_F22 ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT)
CONTINUE WITH QA13_F29;
ELSE SKIP TO QA13_G1

QA13_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.

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

You were concerned about the cost of treatment.
您擔心治療的費用。

AF82

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_F30 You did not feel comfortable talking with a professional about your personal problems.
您與專業人員談論自己的個人問題感到不自在。

AF83

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_F31 You were concerned about what would happen if someone found out you had a problem.
您擔心如果有人知道了您的問題後會出現什麼情況。

AF84

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_F32 You had a hard time getting an appointment.
您在預約時遇到了困難。

AF85

YES1
NO2
REFUSED -7
DON'T KNOW -8

Section G – Demographic Information, Part II

Country of Birth (Self, Parents)

QA13_G1 Now a few more questions about your background.
現在，我想問幾個有關您的背景的問題。

In what country were you born?
您是在哪一個國家出生的？

AH33

[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

PROGRAMMING NOTE QA13_G2:**IF QA13_G1 ≠ 1 (NOT BORN IN US) GO TO QA13_G4;****ELSE IF QA13_G1 = 1, -7, OR -8 (BORN IN US, DON'T KNOW, REFUSED) CONTINUE WITH QA13_G2**

QA13_G2 In what country was your mother born?
 您的母親是在哪一個國家出生的？

AH34**[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	-7
DON'T KNOW	-8

QA13_G3 In what country was your father born?
 您的父親是在哪一個國家出生的?

AH35

[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	-7
DON'T KNOW	-8

Language Spoken at Home**QA13_G4** What languages do you speak at home?

您在家中用什麼語言交談？

AH36**[CODE ALL THAT APPLY.][PROBE: "Any others?"]**

ENGLISH	1
SPANISH	2
CANTONESE	3
VIETNAMESE	4
TAGALOG	5
MANDARIN	6
KOREAN	7
ASIAN INDIAN LANGUAGES	8
RUSSIAN	9
OTHER 1 (SPECIFY: _____)	91
OTHER 2 (SPECIFY: _____)	92
REFUSED	-7
DON'T KNOW	-8

Additional Language Use**PROGRAMMING NOTE QA13_G5:****IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA13_G5;****IF INTERVIEW CONDUCTED IN ENGLISH AND QA13_G4 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA13_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 QA13_G4 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO QA13_G7****QA13_G5** In what languages are the TV shows, radio stations, or newspapers that you usually watch, listen or read?

您通常觀看、收聽或閱讀的電視節目、廣播或報紙是用哪幾種語言？

AG21

ONLY ENGLISH	1
BOTH ENGLISH AND OTHER LANGUAGE(S)	2
ONLY OTHER LANGUAGE(S)	3
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_G6:

IF INTERVIEW CONDUCTED IN ENGLISH AND QA13_G4 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA13_G6 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English" AND DROP RESPONSE CATEGORY "Not at all?";

ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA13_G6.

ELSE GO TO PROGRAMMING NOTE QA13_G7

QA13_G6 {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English...
因為您在家中說的語言不是英文，我們很了解您認為自己英語說得怎樣。
您認為您的英語說得……

AH37

Very well,.....	1
Well,	2
Not well, or	3
Not at all?	4
REFUSED	-7
DON'T KNOW	-8

Citizenship and Immigration**PROGRAMMING NOTE QA13_G7:**

IF QA13_G1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PROGRAMMING NOTE QA13_G10;

ELSE CONTINUE WITH QA13_G7

QA13_G7 The next questions are about citizenship and immigration.
以下是有關公民身份及移民的幾個問題。

Are you a citizen of the United States?
您是美國公民嗎？

AH39

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

[GO TO QA13_G9]

QA13_G8

Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.

您是持有綠卡的永久居民嗎？您的回答會得到保密，不會向移民局報告。

AH40

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

[IF NEEDED, SAY: "人們通常把它稱作「綠卡」，但卡的顏色可能是粉紅色、藍色或白色。"]

YES1
 NO2
 APPLICATION PENDING3
 REFUSED-7
 DON'T KNOW-8

QA13_G9

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

Spouse/Partner

PROGRAMMING NOTE QA13_G10:

IF [QA13_A16 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA13_G10;

IF QA13_A16 = 1, THEN DISPLAY "spouse";

IF QA13_A16 = 2 OR QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";

ELSE GO TO PROGRAMMING NOTE QA13_G12

QA13_G10

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

你的{配偶}是不是也住在你的家中？

AH44

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

QA13_G11 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'S/PARTNER'S NAME, AGE, AND SEX]

SPOUSE/PARTNER NAME _____
SPOUSE/PARTNER AGE _____
SPOUSE/PARTNER SEX _____

Living with Parents

PROGRAMMING NOTE QA13_G12:

IF [AAGE < 30 OR QA13_A4 = 1 (AGE 18-29)] AND QA13_G10 = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH, CONTINUE WITH QA13_G12;

IF [AAGE < 30 OR QA13_A4 = 1 (AGE 18-29)] AND QA13_A16 = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, CONTINUE WITH QA13_G12;

ELSE GO TO PROGRAMMING NOTE QA13_G13

QA13_G12 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

YES1
NO2
REFUSED -7
DON'T KNOW -8

Child and Teen Selection

PROGRAMMING NOTE QA13_G13:

IF COMPLETED CHILD 1ST INTERVIEW, SKIP TO QA13_G19;

ELSE CONTINUE WITH QA13_G13

QA13_G13 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

YES1
NO2 **[GO TO QA13_G21]**
REFUSED -7 **[GO TO QA13_G21]**
DON'T KNOW -8 **[GO TO QA13_G21]**

QA13_G14 Please tell me only the first names and ages of all the children under 18, including babies, who normally live in your household.
請告訴我所有通常住在你們家中年齡在18歲以下的兒童的名字和年齡，包括嬰兒。

SC13A

[PROBE: "Is there anyone else?"]

[PROBE: 還有任何其他人嗎?]

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

CHILD	FIRST NAME	AGE	M/F
1			
2			
3			
4			
5			

QA13_G15 Is (CHILD) ...
{CHILD NAME/AGE/SEX} 是.....

SC15A

0 To 11 years old or1 [CODE AS CHILD]
0歲至11歲，還是1
12 To 17 years old?2 [CODE AS TEEN]
12歲至17歲?2
REFUSED-7 [CODE AS TEEN]
DON'T KNOW-8 [CODE AS TEEN]

QA13_G16 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有一名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 CORRECT1
RETURN TO ROSTER2 [GO BACK TO QA13_G14]

PROGRAMMING NOTE QA13_G17:
IF ANY PEOPLE IN HH UNDER AGE 18, ASK QA13_G17 ABOUT EACH PERSON UNDER 18

QA13_G17 Are you the parent or legal guardian of (PERSON NAME/AGE/SEX)?
您是不是{PERSON NAME/AGE/SEX}的父親/母親或法定監護人?

SC14A

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_G18:

**IF ANY PEOPLE IN HH UNDER AGE 18 AND QA13_G10= 1, ASK QA13_G18 ABOUT THE SPOUSE/PARTNER AND EACH PERSON UNDER 18;
ELSE SKIP TO QA13_G19**

QA13_G18 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

YES1
NO2
REFUSED -7
DON'T KNOW -8

Paid Child Care**PROGRAMMING NOTE QA13_G19:**

**IF QA13_G13 = 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA13_G14 ARE AGE 13 OR LESS, CONTINUE WITH QA13_G19;
ELSE GO TO QA13_G21;**

IF ANY CHILD IN ROSTER QA13_G14 < 14 AND ≥ 14 DISPLAY “for any children under age 14”;

IF QA13_A16 = 1 (MARRIED) AND QA13_G10 =1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY “you or your spouse”;

**ELSE IF QA13_G10 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY “you or your partner”;
ELSE DISPLAY “you”**

QA13_G19 In the past month, did you use any paid childcare {for any children under age 14} while {you or your spouse/you or your partner/you} worked, were in school, or looked for work?
在過去一個月中，當{you or your partner}在工作、上學或
尋找工作時，是否讓任何年齡在14歲以下的孩子接受任何付費幼
兒看護服務？

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: “這包括學前起步計劃 (Head Start)、日
託所、上學前及放學後的看護計劃以及任何臨時幼兒照看安排。”]**

YES1
NO2 [GO TO QA13_G21]
REFUSED -7 [GO TO QA13_G21]
DON'T KNOW -8 [GO TO QA13_G21]

QA13_G20

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

在上個月中，您為所有的幼兒看護安排及計劃支付了多少費用？

AH44B**[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 WEEK3

REFUSED -7

DON'T KNOW -8

Educational Attainment

QA13_G21 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？

AH47

NO FORMAL EDUCATION	30
GRADE SCHOOL	
1ST GRADE	1
2ND GRADE	2
3RD GRADE	3
4TH GRADE.....	4
5TH GRADE.....	5
6TH GRADE.....	6
7TH GRADE.....	7
8TH GRADE.....	8
HIGH SCHOOL OR EQUIVALENT	
9TH GRADE.....	9
10TH GRADE.....	10
11TH GRADE.....	11
12TH GRADE.....	12
4-YEAR COLLEGE OR UNIVERSITY	
1ST YEAR (FRESHMAN)	13
2ND YEAR (SOPHOMORE).....	14
3RD YEAR (JUNIOR)	15
4TH YEAR (SENIOR) (BA/BS)	16
5TH YEAR.....	17
GRADUATE OR PROFESSIONAL SCHOOL	
1ST YEAR GRAD OR PROF SCHOOL	18
2ND YEAR GRAD OR PROF SCHOOL (MA/MS) ..	19
3RD YEAR GRAD OR PROF SCHOOL	20
MORE THAN 3 YEARS GRAD OR PROF SCHOOL (PhD)	21
2-YEAR JUNIOR OR COMMUNITY COLLEGE	
1ST YEAR.....	22
2ND YEAR (AA/AS)	23
VOCATIONAL, BUSINESS, OR TRADE SCHOOL	
1ST YEAR	24
2ND YEAR	25
MORE THAN 2 YEARS	26
REFUSED	-7
DON'T KNOW (OUT OF RANGE)	-8

Veteran Status

QA13_G22 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？

AG22

YES	1	
NO	2	[GO TO QA13_G25]
REFUSED	-7	[GO TO QA13_G25]
DON'T KNOW	-8	[GO TO QA13_G25]

QA13_G23 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

QA13_G24 Altogether, how long did you serve?
 您總共服役多長時間？

AG24

_____ YEARS

_____ MONTHS

REFUSED -7
 DON'T KNOW -8

Employment

QA13_G25 Which of the following were you doing last week?
 您上週曾經從事以下哪些工作，是……

AK1

Working at a job or business,.....1	[GO TO QA13_G29]
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, or3	
在找工作，還是2	
Not working at a job or business?.....4	
沒有從事工作或業務？4	
REFUSED -7	[GO TO QA13_G29]
DON'T KNOW -8	[GO TO QA13_G29]

QA13_G26 What is the main reason you did not work last week?
你上週沒有工作的#主要原因\是什麼?

AK2

[IF NEEDED, SAY: "Main reason is the most important reason."]

[IF NEEDED, SAY: 「主要原因指最重要的原因。」]

TAKING CARE OF HOUSE OR FAMILY1
ON PLANNED VACATION2
COULDN'T FIND A JOB3
GOING TO SCHOOL/STUDENT4
RETIRED5
DISABLED6
UNABLE TO WORK TEMPORARILY7
ON LAYOFF OR STRIKE8
ON FAMILY OR MATERNITY LEAVE9
OFF SEASON 10
SICK 11
OTHER 91
REFUSED -7
DON'T KNOW -8

[GO TO PN QA13_G28]
[GO TO PN QA13_G28]

QA13_G27 Do you usually work?
你通常工作嗎?

AG10

YES1
NO2
LOOKING FOR WORK3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_G28:

IF [AAGE = -7 OR -8 OR AAGE < 65] AND QA13_G27 = 2 (NO) CONTINUE WITH QA13_G28;

IF [AAGE = -7 OR -8 OR AAGE < 65] AND [QA13_G26 = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH QA13_G28;

ELSE GO TO PROGRAMMING NOTE QA13_G29

QA13_G28 Are you receiving Social Security Disability Insurance or SSDI?
您是否在領取社會安全殘障保險或SSDI?

AL22

YES1
NO2
REFUSED -7
DON'T KNOW -8

[GO TO PN QA13_G30]
[GO TO PN QA13_G30]
[GO TO PN QA13_G30]
[GO TO PN QA13_G30]

PROGRAMMING NOTE QA13_G29:

**IF QA13_G25 = 1, 2, -7, OR -8 (WORKING, WITH JOB, DK, OR RF) OR QA13_G27 = 1 (USUALLY WORKS),
CONTINUE WITH QA13_G29;
ELSE GO TO PROGRAMMING NOTE QA13_G32**

QA13_G29 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？

AK4

[IF NEEDED, SAY: "Where did you work most hours?"]

[IF NEEDED, SAY: 「您在哪裡工作的時間最長？」]

PRIVATE COMPANY
NON-PROFIT ORGANIZATION, FOUNDATION1
GOVERNMENT2
SELF-EMPLOYED3
FAMILY BUSINESS OR FARM4
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_G30:

**IF QA13_G29= 2 (GOVERNMENT EMPLOYEE), DISPLAY "What kind of agency or department is this?" and "[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E.G., STATE, LOCAL) AND THE FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.)]";
ELSE DISPLAY "What kind of business or industry is this?" AND "[IF NEEDED, SAY: "What do they make or do at this business?"]"**

QA13_G30 {What kind of agency or department is this?/What kind of business or industry is this?}
這是屬於什麼樣的企業或行業？

AK5

{[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E.G., STATE, LOCAL) AND THE FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.) / [IF NEEDED, SAY: "What do they make or do at this business?"]}

[IF NEEDED, SAY: 「在這企業中他們製造什麼或做什麼？」]

[INTERVIEWER: ENTER DESCRIPTION]

_____ (GOVERNMENT AGENCY OR
DEPARTMENT/BUSINESS OR INDUSTRY)
REFUSED -7
DON'T KNOW -8

QA13_G31 What is the main kind of work you do?
您主要從事何種類型的工作？

AK6

[MAIN JOB = WHERE WORKS MOST HOURS.]

[NOTE: 主要工作 = 工作時數最多的地方。]

[INTERVIEWER: ENTER DESCRIPTION]

_____ (OCCUPATION)
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_G32:

IF QA13_G29 = 2 (GOVERNMENT EMPLOYEE), CODE QA13_G32 = 8 AND GO TO QA13_G33;

IF QA13_G29 = 3 (SELF-EMPLOYED), CONTINUE WITH QA13_G32 AND DISPLAY "Including yourself, about" and "you";

ELSE CONTINUE WITH QA13_G32 AND DISPLAY "About" and "your employer";

QA13_G32 {Including yourself, about/About} how many people are employed by {your employer/you} 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 21
3-92
10-243
25-504
51-1005
101-2006
201-9997
1,000 OR MORE8
REFUSED -7
DON'T KNOW -8

Employment (Spouse/Partner)**PROGRAMMING NOTE QA13_G33:**

IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1, CONTINUE WITH QA13_G33;
 IF QA13_A16 = 1, THEN DISPLAY "spouse";
 ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";
 ELSE GO TO QA13_H1

QA13_G33 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，是……

AG8

Working at a job or business,.....	1	[GO TO QA13_G35]
With a job or business but not at work,	2	[GO TO QA13_G35]
Looking for work, or	3	
Not working at a job/business?	4	
REFUSED	-7	
DON'T KNOW	-8	

QA13_G34 Does your {spouse/partner} usually work?
 你的{配偶}通常工作嗎?

AG11

YES	1	
NO	2	[GO TO QA13_H1]
LOOKING FOR WORK	3	[GO TO QA13_H1]
REFUSED	-7	[GO TO QA13_H1]
DON'T KNOW	-8	[GO TO QA13_H1]

QA13_G35 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？

AG9

[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？」]

PRIVATE COMPANY, NON-PROFIT ORGANIZATION, FOUNDATION	1
GOVERNMENT	2
SELF-EMPLOYED	3
FAMILY BUSINESS OR FARM	4
REFUSED	-7
DON'T KNOW	-8

Section H – Health Insurance

Usual Source of Care

QA13_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？

AH1

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

YES	1	
NO	2	[GO TO QA13_H3]
DOCTOR/MY DOCTOR	3	
KAISER	4	
MORE THAN ONE PLACE	5	
REFUSED	-7	[GO TO QA13_H3]
DON'T KNOW	-8	[GO TO QA13_H3]

PROGRAMMING NOTE QA13_H2:

IF QA13_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often--a medical";

ELSE IF QA13_H1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";

ELSE IF QA13_H1 = 4 (KAISER) CIRCLE "1" FOR QA13_H2 AND GO TO QA13_H3

QA13_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、急診室或其它地方？

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

Emergency Room Visits**PROGRAMMING NOTE QA13_H3:**

IF QA13_B6 = 1 OR QA13_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA13_B28 = 1 (YES, R VISITED ER FOR DIABETES) OR QA13_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE) SKIP TO QA13_H4;
ELSE CONTINUE WITH QA13_H3

QA13_H3 During the past 12 months, did you visit a hospital emergency room for your own health?
在過去 12 個月中，您有沒有因為自身的健康去過醫院急診室？

AH12

YES	1	
NO	2	[GO TO QA13_H5]
REFUSED	-7	[GO TO QA13_H5]
DON'T KNOW	-8	[GO TO QA13_H5]

PROGRAMMING NOTE QA13_H4:

IF QA13_B6 = 1 OR QA13_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA13_B28 = 1 (YES, R VISITED ER FOR DIABETES) OR QA13_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN DISPLAY
“During the past 12 month, how many times did you visit a hospital emergency room for your own health?”;
ELSE DISPLAY “How many times did you do that?”

QA13_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}?
你曾經這樣做過幾次？

AH95

[IF NEEDED, SAY: “During the past 12 months, how many times did you visit a hospital emergency room for your own health?”]

_____ NUMBER OF TIMES

REFUSED	-7
DON'T KNOW	-8

Medicare Coverage

QA13_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?
Medicare（醫療保障計劃）是為年滿65歲或患有某種殘障的人士提供的健康保險計劃。您目前是否享受**Medicare**保賠？

A11

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

[NOTE: 包括**Medicare**管理護理計劃以及原來的**Medicare**計劃。]

YES	1	[GO TO QA13_H8]
NO	2	
REFUSED	-7	[GO TO QA13_H15]
DON'T KNOW	-8	[GO TO QA13_H15]

POST-NOTE QA13_H5:
IF QA13_H5 = 1, SET ARM CARE = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA13_H6:
IF [AAGE > 64 OR QA13_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND QA13_H5= 2 (NOT COVERED BY MEDICARE), CONTINUE WITH QA13_H6;
ELSE GO TO PROGRAMMING NOTE QA13_H8

QA13_H6 Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?
 雖然您剛才告訴過我您的年齡在 65 歲或 65 歲以上，但您沒有享受聯邦醫療護理保險，對不對？

A12

CORRECT, NOT COVERED BY MEDICARE	1	[GO TO PN QA13_H15]
NOT CORRECT, R IS COVERED BY MEDICARE ..	2	[GO TO PN QA13_H8]
AGE IS INCORRECT	93	
REFUSED	-7	[GO TO PN QA13_H15]
DON'T KNOW	-8	[GO TO PN QA13_H15]

POST-NOTE QA13_H6:
IF QA13_H6 =2, SET ARM CARE = 1 AND SET ARINSURE = 1

QA13_H7 What is your age, please?
 請告訴我您的年齡多大。

A13

_____ YEARS OF AGE	[HR: 18-105]	[GO TO PN QA13_H15]
REFUSED	-7	[GO TO PN QA13_H15]
DON'T KNOW	-8	[GO TO PN QA13_H15]

POST NOTE QA13_H7: AIDATE
SET AIDATE = CURRENT DATE (YYYYMMDD);
SET AAGE = QA13_H7;
IF AAGE < 18, CODE AS IA AND TERMINATE

PROGRAMMING NOTE QA13_H8:
IF ARM CARE = 1, CONTINUE WITH QA13_H8;
ELSE GO TO PROGRAMMING NOTE QA13_H15

QA13_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計劃通常要求您必須從HMO醫生處接受護理，否則就不提供醫療費保賠，除非是醫療急診。"]

[INTERVIEWER NOTE: IF R MENTIONS A HEALTH PLAN SUCH AS "Kaiser" CODE "1" (YES).]

YES	1	
NO	2	[GO TO QA13_H10]
REFUSED	-7	[GO TO QA13_H10]
DON'T KNOW	-8	[GO TO QA13_H10]

POST-NOTE QA13_H8:
IF QA13_H8 = 1, SET ARMHMO = 1

QA13_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 1 ST 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
KAISER	37
KERN COUNTY HEALTH PLAN.....	38
L.A. CARE HEALTH PLAN	39
MD CARE.....	40
MOLINA HEALTH PLAN.....	41
MOLINA MEDICARE OPTIONS	42
ON LOK.....	43
ON LOK SENIOR HEALTH SERVICES.....	44
ONE CARE	45
PACIFICARE.....	46
PARTNERSHIP HEALTH PLAN OF CALIFORNIA.....	47
SALUD CON HEALTH NET	48
SAN FRANCISCO HEALTH PLAN	49
SANTA CLARA FAMILY HEALTH PLAN	50
SCAN HEALTH PLAN.....	51
SECURE HORIZONS	52
SENIOR ADVANTAGE	53
SENIORITY PLUS.....	54
SERVICE TO SENIORS	55
SHARP HEALTH PLAN	56
TOTAL FIT	57
VALLEY HEALTH PLAN	58
VENTURA COUNTY HEALTH CARE PLAN.....	59
WESTERN HEALTH ADVANTAGE	60
WESTERN HEALTH ADVANTAGE CARE+	61
CHAMPUS/CHAMP-VA	62
TRICARE/TRICARE FOR LIFE/TRICARE PRIME.....	63
VA HEALTH CARE SERVICES	64
MEDI-CAL	65
MEDICARE	66
MEDICARE ADVANTAGE	67
OTHER.....	91
OTHER (SPECIFY:.....)	92
REFUSED	-7
DON'T KNOW	-8

POST-NOTE FOR QA13_H9:
ALL ANSWERS GO TO PROGRAMMING NOTE QA13_H11;
IF QA13_H9 = 62, 63, OR 64 THEN ARMILIT = 1

QA13_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?
 有些有資格享受MediCARE的人另外還有私人保險，有時稱為Medigap
 或Medicare補充保險。您有此類健康保險嗎？

A14

[IF NEEDED, SAY: "These are policies that cover health care costs not covered by MediCARE alone."]

[IF NEEDED, SAY: "這些是為Medicare不提供保賠的健康護理費用提供保賠的保險。"]

YES	1	
NO	2	[GO TO PN QA13_H15]
REFUSED	-7	[GO TO PN QA13_H15]
DON'T KNOW	-8	[GO TO PN QA13_H15]

POST-NOTE FOR QA13_H10:
IF QA13_H10 = 1, SET ARSUPP = 1

PROGRAMMING NOTE QA13_H11:
IF QA13_H8 = 1 (MEDICARE HMO) CONTINUE WITH QA13_H11 AND DISPLAY "MediCARE HMO";
IF QA13_H10 = 1 (HAS SUPPLEMENT) CONTINUE WITH QA13_H11 AND DISPLAY "MediCARE Supplement plan";
ELSE GO TO PROGRAMMING NOTE QA13_H15

QA13_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

QA13_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."

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

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

[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。」

「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。」

「保費是您的醫療保險計劃的每月收費。」]

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_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

YES1
 NO2 **[GO TO PN QA13_H15]**
 REFUSED -7 **[GO TO PN QA13_H15]**
 DON'T KNOW -8 **[GO TO PN QA13_H15]**

QA13_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，你的僱主、工會或專業機構。」]

[CODE ALL THAT APPLY] [PROBE: "Any others?"]

[CODE ALL THAT APPLY.] [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 QA13_H14:

IF QA13_H14 = 7, SET ARMCAL = 1;

IF QA13_H14 = 8, SET ARHFAM = 1

Medi-Cal Coverage**PROGRAMMING NOTE QA13_H15:**

**IF ARMCAL = 1, DISPLAY "Is it correct that you are";
ELSE DISPLAY "Are you"**

QA13_H15 {Is it correct that you are/Are you} covered by Medi-CAL?
您享受Medi-CAL的保賠嗎?

A16

[IF NEEDED, SAY: "A plan for certain low-income children and their families, pregnant women, and disabled or elderly people."]

[IF NEEDED, SAY: "這是一項向某些低收入兒童及其家人、孕婦、殘障人士或年長者提供的計劃。"]

YES1 **[GO TO QA13_H17]**
NO2
REFUSED-7
DON'T KNOW-8

POST-NOTE FOR QA13_H15:

**IF QA13_H15 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;
IF ARMCAL = 1 AND QA13_H15 = 2, SET ARMCAL = 0**

Healthy Families Coverage**PROGRAMMING NOTE QA13_H16:**

IF AAGE > 18 OR [QA13_A4 ≠ -7 OR -8 (REF/DK)] OR ENUM.AGE > 18 OR IF AGE IS UNKNOWN, GO TO PROGRAMMING NOTE QA13_H17;

ELSE IF [AAGE = 18 OR QA13_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18] AND ARHFAM = 1, CONTINUE WITH QA13_H16 AND DISPLAY "Is it correct, then, that you are";

ELSE IF [AAGE = 18 OR QA13_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18], CONTINUE WITH QA13_H16 AND DISPLAY: "Are you"

QA13_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)?

A17

[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。」]

YES1
NO2
REFUSED-7
DON'T KNOW-8

POST-NOTE FOR QA13_H16:

**IF QA13_H16 = 1, SET ARHFAM = 1 AND SET ARINSURE = 1;
IF ARHFAM = 1 AND QA13_H16 = 2, SET ARHFAM = 0**

Employer-Based Coverage**PROGRAMMING NOTE QA13_H17:**

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

QA13_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 ?

AI8

[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？」]

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE FOR QA13_H17:

IF QA13_H17 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1

Private Coverage**PROGRAMMING NOTE QA13_H18:**

IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, AND EMPLOYER),
CONTINUE WITH QA13_H18;
ELSE GO TO PROGRAMMING NOTE QA13_H20

QA13_H18 Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?
 你的配偶是否享受你直接從保險公司或HMO或透過Covered California購買的醫療保險計劃的承保?
 (MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

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: 「請不要包括僅支付某些疾病（例如癌症或中風）

費用的計劃或當你住院時僅向你支付「額外現金」的計劃。」]

YES1
 NO2 **[GO TO PN QA13_H20]**
 REFUSED -7 **[GO TO PN QA13_H20]**
 DON'T KNOW -8 **[GO TO PN QA13_H20]**

POST-NOTE FOR QA13_H18:

IF QA13_H18 = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1

PROGRAMMING NOTE QA13_H19:
IF ARDIRECT = 1, THEN CONTINUE WITH QA13_H19;
ELSE GO TO PROGRAMMING NOTE QA13_H20

QA13_H19 How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?

你是如何購買這項健康保險的 — 是直接從保險公司或HMO購買還是透過Covered California購買？
 (CHIS 2014 ONLY)

AH104

INSURANCE COMPANY OR HMO1
 COVERED CALIFORNIA.....2
 OTHER (SPECIFY:.....)..... 92
 REFUSED -7
 DON'T KNOW -8

POST-NOTE FOR QA13_H19:
IF QA13_H19= 2, THEN SET ARHBEX = 1

PROGRAMMING NOTE FOR QA13_H20:
IF QA13_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA13_H18 = 1 (PURCHASED OWN COVERAGE),
CONTINUE WITH QA13_H20;
ELSE GO TO PROGRAMMING NOTE QA13_H22

QA13_H20 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？

A19

[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 NAME1 [GO TO PN QA13_22]
 IN SOMEONE ELSE'S NAME2
 REFUSED -7 [GO TO PN QA13_22]
 DON'T KNOW -8 [GO TO PN QA13_22]

POST-NOTE FOR QA13_H20:
IF QA13_H17 = 1 AND QA13_H20 = 1 SET AREMPOW = 1 AND SET ARINSURE = 1 AND SET AREMPOTH = 0;
IF QA13_H17 = 1 AND QA13_H20 = 2, -7, OR -8 SET AREMPOTH = 1 AND SET ARINSURE = 1;
IF QA13_H18 = 1 AND QA13_H20 = 1 SET ARDIROWN = 1 AND ARINSURE = 1;
IF QA13_H18 = 1 AND QA13_H20 = 2, -7, OR -8 SET ARDIROTH = 1 AND ARINSURE = 1

PROGRAMMING NOTE QA13_H21:

IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 OR IF QA13_G13 = 1 (LIVING WITH PARENTS) OR IF AAGE < 26, CONTINUE WITH QA13_H21;
 ELSE GO TO PROGRAMMING NOTE QA13_H22;
 IF QA13_A16 = 1, THEN DISPLAY "spouse's name";
 IF QA13_A16 ≠ 1 AND (QA13_D16 = 1 OR QA13_D17 = 1), THEN DISPLAY "partner's name";
 IF QA13_G13 = 1 OR AAGE < 26, THEN DISPLAY "parent's name";

QA13_H21 Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?
 是否以您的{ } 名義參加該項計劃?

AI9A

IN SPOUSE'S/PARTNER'S NAME1
 IN PARENT'S NAME2
 IN SOMEONE ELSE'S NAME3
 REFUSED-7
 DON'T KNOW-8

POST-NOTE FOR QA13_H21:

IF QA13_H17 = 1 AND QA13_H21 = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;
 IF QA13_H19 = 1 AND QA13_H21 = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1 AND SPHBEX = 1;
 IF QA13_H17 = 1 AND QA13_H21 = 2 SET AREMPAR = 1 AND AREMPOTH = 0;
 IF QA13_H18 = 1 AND QA13_H21 = 1 SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP=1;
 IF QA13_H18 = 1 AND QA13_H21 = 2 SET ARDIRPAR = 1 AND ARDIROTH = 0

PROGRAMMING NOTE QA13_H22:

IF QA13_H17 = 1 (EMPLOYER-BASED COVERAGE) AND AK8 < 5 (FIRM SIZE ≤100), CONTINUE WITH QA13_H22 AND DISPLAY;
 IF AREMPOWN = 1 THEN DISPLAY {you};
 IF AREMPSP = 1 OR AREMPAR = 1 OR AREMPOTH = 1 THEN DISPLAY {he or she};
 ELSE GO TO PROGRAMMING NOTE QA13_H23;

QA13_H22 How did {you/he or she} sign up for this health insurance – through an employer, through a union, or through Covered California's SHOP program?
 {你/他或她}是如何註冊參加這項健康保險的 — 透過雇主、工會還是透過Covered California的SHOP計劃?
 (CHIS 2014 ONLY)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]

[IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

AH105

EMPLOYER1
 UNION.....2
 SHOP / COVERED CALIFORNIA3
 OTHER (SPECIFY:.....)..... 92
 REFUSED-7
 DON'T KNOW-8

POST-NOTE FOR QA13_H22:**IF QA13_H22 = 3, THEN SET ARHBEX = 1****PROGRAMMING NOTE QA13_H23****IF ARHBEX = 1, THEN CONTINUE WITH QA13_H23;****ELSE GO TO PROGRAMMING NOTE QA13_H25;****QA13_H23** Was this a bronze, silver, gold or platinum plan?

這是銅、銀、金還是白金計劃？

(CHIS 2014 ONLY)

AH106

Bronze	1
Silver	2
Gold	3
Platinum	4
MEDI-CAL / MEDICAID	5
CATASTROPHIC	6
OTHER (SPECIFY: _____)	92
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_H24:**IF QA13_H22 = 3, THEN GO TO QA13_H25;****ELSE CONTINUE WITH QA13_H24;****QA13_H24** Was there a subsidy or discount on the premium for this plan?

這項計劃的保費是否有補貼或折扣？

(CHIS 2014 ONLY)

AH107

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

PROGRAMMING NOTE QA13_H25:

**IF QA13_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA13_H18 = 1 (PURCHASED OWN COVERAGE),
CONTINUE WITH QA13_H25;
ELSE GO TO PROGRAMMING NOTE QA13_H28**

QA13_H25 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."

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

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

[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，由其他人支付您的主要健康護理保賠費用。"

"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。"

"保費是您的健康保險計劃的每月收費。"]

YES	1	
NO	2	[GO TO PN QA13_H27]
REFUSED	-7	
DON'T KNOW	-8	

QA13_H26 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	[GO TO PN QA13_H28]
REFUSED	-7	[GO TO PN QA13_H28]
DON'T KNOW	-8	[GO TO PN QA13_H28]

PROGRAMMING NOTE QA13_H27:

IF QA13_H25 = 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”

QA13_H27 {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?
 是誰?

AH56

[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?”]

[CODE ALL THAT APPLY] [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
MEDICARE	9
HEALTHY KIDS	10
COVERED CALIFORNIA.....	11
OTHER.....	91
REFUSED	-7
DON'T KNOW	-8

POST-NOTE QA13_H27:

IF QA13_H27 = 1, 2, OR 3, THEN SET AREMPOWN = 1;

IF QA13_H27 = 4 OR 5, THEN SET AREMPSP = 1;

IF QA13_H27 = 6, THEN SET AROTHER = 1;

IF QA13_H27 = 10, THEN SET ARHKID =1;

IF QA13_H27 = 9, SET ARM CARE = 1 AND SET ARDIRECT = 0;

IF QA13_H27 = 7, SET ARM CAL = 1 AND SET ARDIRECT = 0;

IF QA13_H27 = 8, SET, ARHFAM = 1 AND SET ARDIRECT = 0;

IF QA13_H27 = 11, SET ARHBEX = 1;

IF QA13_H27 = 91, THEN SET AROTHER = 1

Employer Offer of Health Insurance**PROGRAMMING NOTE QA13_H28:**

IF [QA13_G26 = 1 OR 2 (R WORKED LAST WEEK) OR QA13_G28 = 1 (R USUALLY WORKS)] AND
QA13_G30 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOW ≠ 1 (NO EMPLOYER-BASED COVERAGE),
CONTINUE WITH QA13_H28;
ELSE GO TO PROGRAMMING NOTE QA13_H32

QA13_H28 Does your employer offer health insurance to any of its employees?
您的僱主有沒有提供醫療保險給任何員工？

AI13

YES	1	
NO	2	[GO TO PN QA13_H32]
REFUSED	-7	[GO TO PN QA13_H32]
DON'T KNOW	-8	[GO TO PN QA13_H32]

QA13_H29 Are you eligible to be in this plan?
您是否有資格參加該項計劃？

AI14

YES	1	
NO	2	[GO TO QA13_H31]
REFUSED	-7	[GO TO PN QA13_H32]
DON'T KNOW	-8	

QA13_H30 What is the one main reason why you aren't in this plan?
您沒有參加該項計劃的一個主要原因是什麼？

AI15

COVERED BY ANOTHER PLAN	1	[GO TO PN QA13_H32]
TOO EXPENSIVE	2	[GO TO PN QA13_H32]
DIDN'T LIKE PLAN OFFERED	3	[GO TO PN QA13_H32]
DON'T NEED OR BELIEVE IN HEALTH INSURANCE	4	[GO TO PN QA13_H32]
OTHER (SPECIFY: _____) .	91	[GO TO PN QA13_H32]
REFUSED	-7	[GO TO PN QA13_H32]
DON'T KNOW	-8	[GO TO PN QA13_H32]

QA13_H31 What is the one main reason why you are not eligible for this plan?
您沒有資格參加該項計劃的一個主要原因是什麼？

AI15A

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

CHAMPUS/CHAMP-VA, TRICARE, VA Coverage**PROGRAMMING NOTE QA13_H32:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, OR PRIVATE PLAN), CONTINUE WITH QA13_H32;
ELSE GO TO PN QA13_H33**

QA13_H32 Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?
您是否享受 CHAMPUS/CHAMP VA、Tricare、或其它軍隊醫療護理計劃？

AI16

YES1
NO2
REFUSED -7
DON'T KNOW -8

POST-NOTE QA13_H32:

IF QA13_H32 = 1, SET ARMILIT = 1 AND SET ARINSURE = 1

Healthy Kids**PROGRAMMING NOTE QA13_H33:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) AND AAGE = 18, CONTINUE WITH QA13_H33 AND DISPLAY "Healthy Kids";
ELSE GO TO PROGRAMMING NOTE QA13_H34**

QA13_H33 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是一項為您郡內的兒童提供的計劃。"]**

YES1
NO2
REFUSED -7
DON'T KNOW -8

POST-NOTE QA13_H33:

IF QA13_H33 = 1, SET ARHKID = 1 AND SET ARINSURE = 1

AIM, MRMIP, Family PACT, PCIP, Other Government Coverage**PROGRAMMING NOTE QA13_H34:**

IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, OR HEALTHY KIDS) CONTINUE WITH QA13_H34; ELSE GO TO PROGRAMMING NOTE QA13_H36

QA13_H34 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	[GO TO PN QA13_H36]
REFUSED	-7	[GO TO PN QA13_H36]
DON'T KNOW	-8	[GO TO PN QA13_H36]

POST-NOTE QA13_H34:

IF QA13_H34 = 1, SET AROTHGOV = 1 AND SET ARINSURE = 1

QA13_H35 **ASK IF NECESSARY:** "What is the name of this program?"
ASK IF NECESSARY: 這項計劃的名稱是什麼？

AI17A

AIM	1
MRMIP ("Mister Mip")	2
FAMILY PACT	3
PCIP	4
OTHER (SPECIFY: _____) .	91
REFUSED	-7
DON'T KNOW	-8

Other Coverage**PROGRAMMING NOTE QA13_H36:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, HEALTHLY KIDS, AND OTHER GOVERNMENT PLAN), CONTINUE WITH QA13_H36;
ELSE GO TO PROGRAMMING NOTE QA13_H40**

QA13_H36 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它醫療保險計劃？

AI18

YES	1	
NO	2	[GO TO PN QA13_H40]
REFUSED	-7	[GO TO PN QA13_H40]
DON'T KNOW	-8	[GO TO PN QA13_H40]

QA13_H37 What type of health insurance do you have?
您有哪一種健康保險？

AI19

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎？"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]

[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？"]

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
COVERED CALIFORNIA.....	10
SHOP THROUGH COVERED CALIFORNIA	11
OTHER GOVERNMENT HEALTH PLAN	91
OTHER NON-GOVERNMENT HEALTH PLAN.....	92
REFUSED	-7
DON'T KNOW	-8

POST-NOTE QA13_H37:

**IF QA13_H37 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 2, SET AREMPOTH = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 4, SET ARMCARE = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 5, SET ARMCAL = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 6, SET ARHFAM = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 7, SET ARMILIT = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 8, SET ARIHS = 1;
IF QA13_H37 = 9, SET ARHKID = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 10, SET ARHBEX = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 11, SET ARHBEX = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1;
IF QA13_H37 = 92, -7, OR -8, SET AROTHER = 1 AND SET ARINSURE = 1**

PROGRAMMING NOTE QA13_H38:
IF QA13_H37 = 1, 2, OR 3 CONTINUE WITH QA13_H38;
ELSE GO TO PROGRAMMING NOTE QA13_H40

QA13_H38 Was this plan obtained in your own name or in the name of someone else?
 該項計劃是以您自己的名義還是以其他人的名義獲得?

AH59

[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 QA13_H40]
IN SOMEONE ELSE'S NAME	2	
REFUSED	-7	[GO TO PN QA13_H40]
DON'T KNOW	-8	[GO TO PN QA13_H40]

POST-NOTE QA13_H38:
IF (QA13_H37 = 1 OR 2) AND QA13_H38 = 1 THEN SET AREMPOWN = 1 AND SET AREMPOTH = 0 AND SET ARINSURE = 1;
IF QA13_H37 = 3 AND QA13_H38 = 1 THEN SET ARDIROWN = 1 AND SET ARDIROTH = 0 AND SET ARINSURE = 1;
IF (QA13_H37 = 1 OR 2) AND (QA13_H38 = 2, -7, OR -8), SET AREMPOTH = 1 AND AREMPOWN = 0 AND SET ARINSURE = 1;
IF QA13_H37 = 3 AND (QA13_H38 = 2, -7, OR -8) SET ARDIROTH = 1 AND ARDIROWN = 0 AND SET ARINSURE = 1

PROGRAMMING NOTE QA13_H39:
IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 OR IF QA13_G13 = 1 (LIVING WITH PARENTS) OR AAGE < 26, CONTINUE WITH QA13_H39;
ELSE GO TO PROGRAMMING NOTE QA13_H40;
IF QA13_A16 = 1 THEN DISPLAY "spouse's name";
IF QA13_A16 ≠ 1 AND (QA13_D16 = 1 OR QA13_D17 = 1), THEN DISPLAY "partner's name";
IF QA13_G13 = 1 OR AAGE < 26, THEN DISPLAY "parent's name";

QA13_H39 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/parent's/spouse's, parent's, or someone else's }
 名義獲得的嗎?

AH60

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 QA13_H39:
IF QA13_H39 = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 AND ARSAMESP=1;
IF QA13_H39 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0

Indian Health Service Participation**PROGRAMMING NOTE QA13_H40:**

**IF ARIHS ≠ 1 AND QA13_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA13_H40;
ELSE GO TO PROGRAMMING NOTE QA13_H41_INTRO**

QA13_H40 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

YES1
NO2
REFUSED -7
DON'T KNOW -8

POST-NOTE QA13_H40:

IF QA13_H40 = 1, SET ARIHS = 1

Spouse's Insurance Coverage Type & Eligibility**PROGRAMMING NOTE QA13_H41_INTRO:**

**IF [QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1] AND QA13_G11 = 1
(SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH QA13_H41_INTRO;**

IF QA13_A16 = 1, THEN DISPLAY "spouse";

ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";

ELSE GO TO PROGRAMMING NOTE QA13_H63

QA13_H41_INTRO These next questions are about the type of health insurance your {spouse/partner} may have.
您的{spouse} 能享受Medicare保賠嗎？

AI37intro

PROGRAMMING NOTE QA13_H41:

IF SPOUSE 65 OR OLDER THEN

IF ARMCARE ≠ 1, CONTINUE WITH QA13_H41 WITHOUT DISPLAY

ELSE IF ARMCARE = 1, CONTINUE WITH QA13_H41 AND DISPLAY "You said that you are covered by Medicare." AND "also";

ELSE GO TO PROGRAMMING NOTE QA13_H44

QA13_H41 {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?
您的{spouse} 能享受Medicare保賠嗎？

AI37

YES1
NO2
REFUSED -7
DON'T KNOW -8

POST-NOTE QA13_H41:

IF QA13_H41 = 1, SET SPM CARE = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H42:

IF QA13_H41 = 1 AND ARMHMO ≠ 1, CONTINUE WITH QA13_H42 WITHOUT DISPLAY;
 ELSE IF QA13_H41 = 1 AND ARMHMO = 1, CONTINUE WITH QA13_H42 AND DISPLAY “You said that your Medicare coverage is provided through an HMO.” AND “also”;
 IF QA13_A16 = 1 (MARRIED) THEN DISPLAY “spouse’s”;
 ELSE IF QA13_D16 = 1 OR QA13_D17 = 1 THEN DISPLAY “partner’s”;
 ELSE GO TO PROGRAMMING NOTE QA13_H43

QA13_H42 {You said that your Medicare coverage is provided through an HMO.} Is your {spouse’s/partner’s} Medicare {also} provided through an HMO?
 你的{spouse}的Medicare是通過HMO提供的嗎?

AH61

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

POST-NOTE QA13_H42:

IF QA13_H42 = 1, THEN SET SPMHMO = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H43:

IF SPMHMO = 1, THEN SKIP TO PROGRAMMING NOTE QA13_H44;
 ELSE IF QA13_H41 = 1 AND ARSUPP ≠ 1, CONTINUE WITH QA13_H43 WITHOUT DISPLAY;
 ELSE IF QA13_H41 = 1 AND ARSUPP = 1, CONTINUE WITH QA13_H43 AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”;
 IF QA13_A16 = 1 (MARRIED), THEN DISPLAY “spouse”;
 ELSE IF QA13_D16 = 1 OR QA13_D17 = 1 THEN DISPLAY “partner”;
 ELSE GO TO PROGRAMMING NOTE QA13_H44

QA13_H43 {You said that you have a Medicare Supplement plan.} Does your {partner/husband/wife/spouse} {also} have a Medicare supplemental policy?
 您的{spouse} 是否加入了 Medicare 補充計劃?

AI37A

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

POST-NOTE QA13_H43:

IF QA13_H43 = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H44:**IF ARMCAL = 1, CONTINUE WITH QA13_H44 WITHOUT DISPLAY;****IF ARMCARE = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA13_H45**

QA13_H44 You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?
 您說您{also}可以享受Medi-Cal（加州醫療保健計劃）。
 您的{}是否也能享受Medi-Cal保賠？

AI38

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_H44:**IF QA13_H44 = 1, SET SPMCAL = 1 AND SET SPINSURE = 1****PROGRAMMING NOTE QA13_H45:****IF ARHFAM = 1 AND SPOUSE/PARTNER AGE ≤ 18, CONTINUE WITH QA13_H45;****IF ARMCARE = 1 OR ARMCAL = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA13_H46**

QA13_H45 You said you {also} have Healthy Families. Is (SPOUSE/PARTNER) also covered by Healthy Families?
 您說您{}可以享受Healthy Families（健康家庭計劃）。
 您的{}是否也能享受Healthy Families計劃保賠？

AI39

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_H45:**IF QA13_H45 = 1, SET SPHFAM = 1 AND SET SPINSURE = 1****PROGRAMMING NOTE QA13_H46:****IF AREMPOWN = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA13_H46;****IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA13_H48**

QA13_H46 You said you have insurance from your current or former employer or union. Is (SPOUSE/PARTNER) {also} covered by the insurance from your employer or union?
 你說你{還}有#你\目前或以前雇主或工會提供的保險。你的{配偶}是否也能享受#你的\雇主或工會提供的承保？

AI40

YES1
 NO2
 OTHER3
 REFUSED -7
 DON'T KNOW -8

[GO TO PN QA13_H49]

POST-NOTE QA13_H46:

IF QA13_H46 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

PROGRAMMING NOTE QA13_H47:

IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH QA13_H47;

IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY “also”;

ELSE GO TO PROGRAMMING NOTE QA13_H48

QA13_H47 You said you have health insurance through Covered California’s SHOP program. Is (SPOUSE/PARTNER) {also} covered by this health insurance?

你說你是透過Covered California的SHOP計劃參加保健計劃。

你的{配偶/同居者}{也}享受這項保健計劃的承保嗎？

(CHIS 2014 ONLY)

[IF NEEDED, SAY: “SHOP is the Small Business Health Options Program administered by Covered California.”]

[IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃。」]

AH108

YES	1	[GO TO PN QA13_H49]
NO	2	
OTHER	3	
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_H47:

IF QA13_H47 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

PROGRAMMING NOTE QA13_H48:

IF QA13_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA13_G32 = 1 (USUALLY WORKS), CONTINUE WITH QA13_H48;

IF AREMPSP = 1 AND QA13_A16 = 1, DISPLAY “You said you have insurance from your spouse’s employer or union.”;

ELSE IF AREMPSP = 1 AND (QA13_D16 = 1 OR QA13_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 QA13_H49

QA13_H48 {You said you have insurance from your spouse’s employer or union./You said you have insurance from your partner’s employer or union.} Does (SPOUSE/PARTNER) {also} have coverage through {his/her} own employer?

您的{} 是否{} 能夠通過{} 自己的僱主獲得保賠？

AI40A

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

POST-NOTE QA13_H48:

IF QA13_H48 = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H49:

**IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA13_H49;
 IF ARM CARE = 1 OR ARM CAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, DISPLAY “also”;
 ELSE GO TO PROGRAMMING NOTE QA13_H50**

QA13_H49 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。
 您的{} 是否也能享受該項計劃的保賠?

AI41

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

**POST-NOTE QA13_H49:
 IF QA13_H49 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**

**PROGRAMMING NOTE QA13_H50:
 IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH QA13_H50;
 IF ARM CARE = 1 OR ARM CAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, DISPLAY “also”;
 ELSE GO TO PROGRAMMING NOTE QA13_H51**

QA13_H50 You said you have a plan you purchased directly from Covered California. Is
 (SPOUSE/PARTNER) {also} covered by this plan?
 你說你有一項直接從Covered California購買的計劃。你的
 {配偶/同居者}{也}享受這項計劃的承保嗎？
 (CHIS 2014 ONLY)

AH109

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

**POST-NOTE QA13_H50:
 IF QA13_H50 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;**

PROGRAMMING NOTE QA13_H51:**IF ARMILIT = 1, CONTINUE WITH QA13_H51;****IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, DISPLAY "also";****ELSE GO TO PROGRAMMING NOTE QA13_H52**

QA13_H51 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、TRICARE、VA
 或其它某種軍隊健康護理計劃享受健康保險。
 您的{} 是否也能享受該項計劃的保賠?

AI42

YES1

NO2

REFUSED -7

DON'T KNOW -8

POST-NOTE QA13_H51:**IF QA13_H51 = 1, SET SPILIT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**

PROGRAMMING NOTE QA13_H52:

IF AROTHGOV = 1, CONTINUE WITH QA13_H52;

IF QA13_H35 = 1, THEN DISPLAY "AIM";

IF QA13_H35 = 2, THEN DISPLAY "MRMIP";

IF QA13_H35 = 3, THEN DISPLAY "Family PACT";

IF QA13_H35 = 4, THEN DISPLAY "PCIP";

IF QA13_H35 = 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, DISPLAY "also";

ELSE GO TO PROGRAMMING NOTE QA13_H53

QA13_H52 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

YES1
NO2
REFUSED-7
DON'T KNOW-8

POST-NOTE QA13_H52:

IF QA13_H52 = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H53:

IF SPINSURE ≠ 1, DISPLAY "any";

ELSE DISPLAY "through any other source"

QA13_H53 Does (SPOUSE/PARTNER) have {any} health insurance coverage {through any other source}?
您的{} 是否有任何健康保險?

AI46

YES1
NO2 [GO TO PN QA13_H55]
REFUSED-7 [GO TO QA13_H59]
DON'T KNOW-8 [GO TO QA13_H59]

QA13_H54 What type of health insurance does {he/she} have?
{he}有哪一種健康保險？

AI47

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎? "]

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

[IF NEEDED, SAY: "例如目前或以前的雇主提供的保險，或者他們直接向保健計劃購買的保險。"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]

[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "{he}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? "]

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
COVERED CALIFORNIA.....	10
SHOP THROUGH COVERED CALIFORNIA	11
OTHER GOVERNMENT HEALTH PLAN	91
OTHER NON-GOVERNMENT HEALTH PLAN.....	92
REFUSED	-7
DON'T KNOW	-8

POST-NOTE QA13_H54:

IF QA13_H54 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 8, SET SPIHS = 1;
IF QA13_H54 = 9, SET SPKID = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;

**IF QA13_H54 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1**

PROGRAMMING NOTE QA13_H55:**IF SPINSURE ≠ 1, CONTINUE WITH QA13_H55;****ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN SKIP TO PROGRAMMING NOTE QA13_H57;****ELSE GO TO PROGRAMMING NOTE QA13_H59**

QA13_H55 You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?
 您說您的{ } 沒有來自任何來源的健康保險，對不對？

AI48

YES	1	[GO TO PN QA13_H59]
NO	2	
REFUSED	-7	[GO TO PN QA13_H59]
DON'T KNOW	-8	[GO TO PN QA13_H59]

QA13_H56 What type of health insurance does {he/she} have?
 {he}有哪一種健康保險？

AI49**[CODE ALL THAT APPLY]****[PROBE: "Any others?"]****[PROBE: "還有任何其他保險嗎？"]**

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]

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
COVERED CALIFORNIA	10
SHOP THROUGH COVERED CALIFORNIA	11
OTHER GOVERNMENT HEALTH PLAN	91
OTHER NON-GOVERNMENT HEALTH PLAN	92
REFUSED	-7
DON'T KNOW	-8

POST-NOTE QA13_H56:**IF QA13_H56 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;****IF QA13_H56 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;****IF QA13_H56 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;****IF QA13_H56 = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;****IF QA13_H56 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;****IF QA13_H56 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1;**

IF QA13_H56 = 7, SET SPMLIT = 1 AND SET SPINSURE = 1;
 IF QA13_H56 = 8, SET SPIHS = 1;
 IF QA13_H56 = 9, SET SPKID = 1 AND SET SPINSURE = 1;
 IF QA13_H56 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;
 IF QA13_H56 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;
 IF QA13_H56 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
 IF QA13_H56 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;

PROGRAMMING NOTE QA13_H57:

IF QA13_H54 = (1, 2, 3, 10, 11) OR QA13_H56 = (1, 2, 3, 10, 11) THEN CONTINUE WITH QA13_H57;
 IF QA13_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";
 ELSE IF QA13_D16 = 1 OR QA13_D17 = 1 THEN DISPLAY "partner's";
 ELSE SKIP TO PROGRAMMING NOTE QA13_H59

QA13_H57 Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?
 這項計劃是以你的{配偶的}名義還是以其他人的名義獲得的?

AH62

[IF NEEDED, SAY: "Even someone who does not live in this household."]

[IF NEEDED, SAY: 「甚至包括不住在你家中的人。」]

IN SPOUSE'S/PARTNER'S NAME	1	[GO TO PN QA13_H59]
IN SOMEONE ELSE'S NAME	2	
REFUSED	-7	[GO TO PN QA13_H59]
DON'T KNOW	-8	[GO TO PN QA13_H59]

POST-NOTE QA13_H57:

IF QA13_H57 = 1 (SPOUSE'S/PARTNER'S NAME) AND [QA12_H54 = (1, 2, 3) OR QA13_H56 = (1, 2, 3)], SET
 SPEMPOW = 1 AND SET SPEMPOTH = 0;
 IF QA13_H57 = 1 (SPOUSE'S/PARTNER'S NAME) AND [QA12_H54 = (10, 11) OR QA13_H56 = (10, 11)], SET
 SPHBEX = 1;

QA13_H58 Is the plan in your name, parent's name, or someone else's name?
 該項計劃是以您本人、您的父母還是以其他人的名義獲得?

AH63

IN ADULT RESPONDENT'S NAME	1
IN ADULT RESPONDENT'S PARENT'S NAME	2
IN SOMEONE ELSE'S NAME	3
REFUSED	-7
DON'T KNOW	-8

POST-NOTE QA13_H58:

IF QA13_H58 = 1 AND [QA12_H54 = (1, 2, 3) OR QA13_H56 = (1, 2, 3)], SET SPEMPAR = 1 AND SET
 SPEMPOTH = 0 AND ARSAMESP=1;
 IF QA13_H58 = 1 AND [QA12_H54 = (10, 11) OR QA13_H56 = (10, 11)], SET SPHBEX = 1 AND
 ARSAMESP=1;
 IF QA13_H58 = 2, SET SPARPAR = 1 AND SET SPEMPOTH = 0

PROGRAMMING NOTE QA13_H59:

IF SPEMPOWN = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO QA13_H63;
 ELSE IF [QA13_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA13_G32 = 1 (USUALLY WORKS)]
 AND QA13_G33 ≠ 3 (SPOUSE/PARTNER NOT SELF EMPLOYED), CONTINUE WITH QA13_H59;
 IF QA13_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";
 ELSE IF QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY "partner's"
 ELSE GO TO PROGRAMMING NOTE QA13_H63

QA13_H59 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?

AI43

YES	1	
NO	2	[GO TO PN QA13_H63]
REFUSED	-7	[GO TO PN QA13_H63]
DON'T KNOW	-8	[GO TO PN QA13_H63]

QA13_H60 Is {he/she} eligible to be in this plan?
 {} 是否有資格參加該項計劃?

AI44

YES	1	
NO	2	[GO TO QA13_H62]
REFUSED	-7	[GO TO PN QA13_H63]
DON'T KNOW	-8	[GO TO PN QA13_H63]

QA13_H61 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?

AI45

COVERED BY ANOTHER PLAN	1	[GO TO PN QA13_H63]
TOO EXPENSIVE	2	[GO TO PN QA13_H63]
DOESN'T LIKE PLAN OFFERED	3	[GO TO PN QA13_H63]
DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE	4	[GO TO PN QA13_H63]
OTHER (SPECIFY: _____)	91	[GO TO PN QA13_H63]
REFUSED	-7	[GO TO PN QA13_H63]
DON'T KNOW	-8	[GO TO PN QA13_H63]

QA13_H62 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

Managed-Care Plan Characteristics**PROGRAMMING NOTE QA13_H63:**

IF ARMHMO = 1 (R HAS MEDICARE HMO), GO TO QA13_H65;

IF ARHFAM = 1 OR ARHKID = 1; GO TO QA13_H64;

IF ARINSURE = 1 (R HAS ANY COVERAGE), CONTINUE WITH QA13_H63;

**IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE),
DISPLAY “Next, I have some questions about your own main health plan.”**

IF ARMCAL = 1 DISPLAY “Medi-Cal”;

ELSE GO TO QA13_H78

QA13_H63 {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?

你的{Medi-Cal}醫療保險計劃是HMO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 NEEDED, SAY: 「HMO代表「健康維護機構」。在HMO計劃中，
你必須接受網路內醫生和醫院的服務。除非是急診，如果你在網路外
接受服務，計劃通常不支付服務費。」]**

**[IF R SAYS “POS” OR “POINT OF SERVICE”, CODE AS “YES.” IF R SAYS PPO, CODE
“NO.”]**

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]

[NOTE: IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 「你的主要醫療保險計劃。」]

YES	1	[GO TO QA13_H64]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_H63B:
IF ARMCAL = 1 (R HAS MEDI-CAL), GO TO QA13_H64;
ELSE CONTINUE WITH QA13_H63B;

QA13_H63B Is your health plan a PPO or EPO?
 你的保健計劃是一項PPO計劃還是EPO計劃？
 (CHIS 2014 ONLY)

AH122

[IF NEEDED, SAY: “EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it’s an emergency and you can access doctors and specialists directly without a referral from your primary care provider.]

[IF NEEDED, SAY: 「EPO代表「專有服務提供者團體」。在EPO中，除非是急診，你必須使用網路內的醫生和醫院，你可以直接與醫生和專科醫生約診，無需由你的主治醫生轉介。」]

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

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

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: “Your MAIN health plan.”]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 「你的#主要保健計劃。」]

PPO.....	1
EPO.....	2
OTHER (SPECIFY:.....)	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_H64:

IF (ARMCAL = 1 AND QA13_H63 = 1) OR (AROTHGOV = 1 AND QA13_H35 = 1) THEN LIST HMO MEDI-CAL BY COUNTY;

ELSE IF (ARHFAM = 1 OR ARHKIDS = 1) AND QA13_H63 = 1 THEN LIST HMO HEALTHY FAMILIES BY COUNTY;

ELSE IF QA13_H63 = 1 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA13_H35 = 2)] THEN LIST HMO COMMERCIAL BY COUNTY;

ELSE IF QA13_H63 = 2 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA13_H35 = 2)] THEN LIST NON-HMO BY COUNTY

QA13_H64 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？

AI22A

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

[NOTE: IF R HAS DIFICULTY RECALING NAME, PROBE: "您是否有註明保健計劃名稱的保險卡或其他文件? "]

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 1 ST HEALTH PLAN	12
CARE ADVANTAGE	13
CARE MORE	14
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MEDI-CAL	65
MEDICARE	66
MEDICARE ADVANTAGE	67
OTHER.....	91
OTHER (SPECIFY: _____)	92
REFUSED	-7
DON'T KNOW	-8

POST NOTE QA13_H64:

IF QA13_H64 = 62, 63, OR 64 THEN SET ARMILIT=1

PROGRAMMING NOTE QA13_H65:

IF ARMHMO = 1 (R HAS MEDI-CARE HMO) AND QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "Next I have some questions about your own main health plan."

QA13_H65 {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?
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

High Deductible Health Plans**PROGRAMMING NOTE QA13_H66:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 THEN
CONTINUE WITH QA13_H66;
ELSE GO TO QA13_H71**

QA13_H66 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?

AH71

[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	[GO TO QA13_H68]
YES, ONLY WHEN I GO OUT OF NETWORK	3	[GO TO QA13_H68]
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_H67:

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH
QA13_H67;
ELSE GO TO QA13_H68**

QA13_H67 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?

AH96

[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 QA13_H69]
NO	2	
YES, ONLY WHEN I GO OUT OF NETWORK	3	
REFUSED	-7	
DON'T KNOW	-8	

QA13_H68 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?

AH72

[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。"]

YES1
 NO2
 YES, ONLY WHEN I GO OUT OF NETWORK3
 REFUSED-7
 DON'T KNOW-8

[GO TO PN QA13_H70]

[GO TO PN QA13_H70]

PROGRAMMING NOTE QA13_H69:

IF AREMPOW = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA13_H69;

ELSE GO TO PROGRAMMING NOTE QA13_H70

QA13_H69 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."]

[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。」]

YES1
 NO2
 YES, ONLY WHEN I GO OUT OF NETWORK3
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_H70:

**IF ARINSURE ≠ 1 (CURRENTLY UNINSURED) OR ARMCAL = 1 (CURRENTLY HAS MEDICAL) OR ARMCARE = 1 (CURRENTLY HAS MEDICARE) OR ARHFAM = 1 (CURRENTLY HAS HEALTHY FAMILIES) OR ARHKID = 1 (CURRENTLY HAS HEALTHY KIDS) OR AROTHGOV = 1 (CURRENTLY HAS OTHER GOVT COVERAGE LIKE AIM, MRMIP, PCIP),, SKIP TO QA13_H71;
ELSE CONTINUE WITH QA13_H70**

QA13_H70 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？

AH73

[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。"]

YES1
NO2
REFUSED-7
DON'T KNOW-8

Coverage over Past 12 Months

QA13_H71 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？

AI31

YES1 **[GO TO PN QA13_H84]**
NO2
REFUSED-7 **[GO TO QA13_H74]**
DON'T KNOW-8

QA13_H72 During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?
在過去十二個月中，當您沒有享受當前的健康保險保賠時，您是否有任何其它健康保險？

AI32

YES1
NO2 **[GO TO QA13_H75]**
REFUSED-7 **[GO TO QA13_H74]**
DON'T KNOW-8 **[GO TO QA13_H74]**

QA13_H73 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, a plan you purchased through Covered California, or some other plan?

你的其他醫療保險是Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你從保險公司直接購買的計劃、你透過Covered California購買的計劃還是其他計劃？

**MODIFIED
AI33**

[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
COVERED CALIFORNIA	6
OTHER HEALTH PLAN	91
REFUSED	-7
DON'T KNOW	-8

QA13_H74 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 QA13_H84]
REFUSED	-7	[GO TO PN QA13_H84]
DON'T KNOW	-8	[GO TO PN QA13_H84]

QA13_H75 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 QA13_H84]
REFUSED	-7	[GO TO PN QA13_H84]
DON'T KNOW	-8	[GO TO PN QA13_H84]

Reasons for Lack of Coverage

QA13_H76 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？

AI36

CAN'T AFFORD/TOO EXPENSIVE1
 NOT ELIGIBLE DUE TO WORKING STATUS/
 CHANGED EMPLOYER/LOST JOB2
 NOT ELIGIBLE DUE TO HEALTH OR
 OTHER PROBLEMS3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 FAMILY SITUATION CHANGED5
 DON'T BELIEVE IN INSURANCE6
 SWITCHED INSURANCE COMPANIES,
 DELAY BETWEEN7
 CAN GET HEALTH CARE FOR FREE/PAY
 FOR OWN CARE8
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

QA13_H77 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？

AH74

YES	1	[GO TO PN QA13_H84]
NO	2	[GO TO PN QA13_H84]
REFUSED	-7	[GO TO PN QA13_H84]
DON'T KNOW	-8	[GO TO PN QA13_H84]

QA13_H78 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麼？

AI24

[IF R SAYS NO NEED, PROBE WHY]

CAN'T AFFORD/TOO EXPENSIVE1
 NOT ELIGIBLE DUE TO WORKING STATUS/
 CHANGED EMPLOYER/LOST JOB2
 NOT ELIGIBLE DUE TO HEALTH OR
 OTHER PROBLEMS3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 FAMILY SITUATION CHANGED5
 DON'T BELIEVE IN INSURANCE6
 SWITCHED INSURANCE COMPANIES,
 DELAY BETWEEN7
 CAN GET HEALTH CARE FOR FREE/PAY
 FOR OWN CARE8
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

QA13_H79 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

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

QA13_H80 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

YES1 **[GO TO QA13_H82]**
 NO2
 REFUSED-7
 DON'T KNOW-8

QA13_H81 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？

AI28

MORE THAN 12 MONTHS AGO, BUT NOT
 MORE THAN 3 YEARS AGO1 **[GO TO PN QA13_H84]**
 MORE THAN 3 YEARS AGO2 **[GO TO PN QA13_H84]**
 NEVER HAD HEALTH INSURANCE3 **[GO TO PN QA13_H84]**
 REFUSED-7 **[GO TO PN QA13_H84]**
 DON'T KNOW-8 **[GO TO PN QA13_H84]**

QA13_H82 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？

AI29

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

_____ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA13_H84]**

REFUSED-7
 DON'T KNOW-8

QA13_H83 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, a plan you purchased through Covered California, 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、你透過雇主獲得的計劃、你直接從保險公司購買的計劃、你透過Covered California購買的計劃還是其他計劃？
 (MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

AI30

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他人或機構嗎？」]

MEDI-CAL	1
HEALTHY FAMILIES	2
THROUGH CURRENT OR FORMER EMPLOYER OR UNION	3
HEALTHY KIDS	4
PURCHASED DIRECTLY	5
COVERED CALIFORNIA	6
OTHER HEALTH PLAN	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_H84:

**IF ARINSURE ≠ 1 OR QA13_H72 = 2 OR ARDIRECT = 1 OR QA13_H83 = (5, 6) OR QA13_H73 = (5, 6) OR ARHBEX =1 OR SPHBEX = 1; THEN CONTINUE WITH QA13_H84;
 ELSE GO TO PROGRAMMING NOTE QA13_H101**

QA13_H84 In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?
 在過去12個月中，你是否曾經嘗試直接從保險公司或HMO或透過Covered California購買醫療保險計劃？
 (MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

AH103

YES	1	
NO	2	[GO TO PN QA13_H101]
REFUSED	-7	[GO TO PN QA13_H101]
DON'T KNOW	-8	[GO TO PN QA13_H101]

QA13_H85 Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?
 這是直接從保險公司或HMO購買、還是透過Covered California購買、還是既從保險公司又透過Covered California購買的計劃？
 (CHIS 2014 ONLY)

AH110

Directly from an insurance company or HMO, or.....	1	
Through Covered California, or.....	2	
Both, from an insurance company and through Covered California	3	
REFUSED	-7	[GO TO PN QA13_H88]
DON'T KNOW	-8	[GO TO PN QA13_H88]

PROGRAMMING NOTE QA13_H86:

IF QA13_H85 = 1; THEN CONTINUE WITH QA13_H86;

IF QA13_H85 = 3; THEN CONTINUE WITH QA13_H86 AND DISPLAY “First, think about your experience trying to purchase insurance directly from an insurance company or HMO.”

ELSE GO TO PROGRAMMING NOTE QA13_H90;

QA13_H86 {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

{首先，請考慮你在嘗試直接從保險公司或HMO購買保險時的經歷。}
 (MODIFIED FOR CHIS 2014)

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
DON'T KNOW	-8

QA13_H87 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

QA13_H88 DON'T KNOW -8
 Did anyone help you find a health plan?
 是否有人幫助你尋找醫療保險計劃？

AH100

YES1
 NO2 [GO TO PN QA13_H90]
 REFUSED -7 [GO TO PN QA13_H90]
 DON'T KNOW -8 [GO TO PN QA13_H90]

QA13_H89 Who helped you?
 是誰幫助你的？

AH101

BROKER1
 FAMILY MEMBER/FRIEND2
 INTERNET3
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_H90:

IF QA13_H85 = 2; THEN CONTINUE WITH QA13_H90;

IF QA13_H85 = 3; THEN CONTINUE WITH QA13_H90 AND DISPLAY “Now, think about your experience with Covered California.”

ELSE GO TO PROGRAMMING NOTE QA13_H94;

QA13_H90 {Now, think about your experience with Covered California.}
 {現在，請想一想你與Covered California交往的經歷。}

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

透過Covered California找到一項你需要的承保計劃難度有多大？是.....
 (CHIS 2014 ONLY)

AH111

Very difficult,1
 非常困難、1
 Somewhat difficult,2
 較為困難、2
 Not too difficult, or3
 不太困難還是3
 Not at all difficult?4
 毫無困難？4
 REFUSED -7
 DON'T KNOW -8

QA13_H91 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難度有多大？是……
(CHIS 2014 ONLY)

AH112

Very difficult,1
非常困難、1
Somewhat difficult,2
較為困難、2
Not too difficult, or3
不太困難還是3
Not at all difficult?4
毫無困難？4
REFUSED -7
DON'T KNOW -8

QA13_H92 Did anyone help you find a health plan?
是否有人幫助你找到一項保健計劃？
(CHIS 2014 ONLY)

AH113

YES1
NO2 [GO TO QA13_H94]
REFUSED -7 [GO TO QA13_H94]
DON'T KNOW -8 [GO TO QA13_H94]

QA13_H93 Who helped you?
是誰幫助你的？
(CHIS 2014 ONLY)

AH114

BROKER1
FAMILY MEMBER / FRIEND2
INTERNET3
CERTIFIED ENROLLMENT COUNSELOR4
OTHER (SPECIFY: _____) 92
REFUSED -7
DON'T KNOW -8

QA13_H94 Did you have all the information you felt you needed to make a good decision on a health plan?
你是否有你認為幫助作出有關保健計劃的良好決定所需的所有資訊？
(CHIS 2014 ONLY)

AH115

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_H95:

**IF QA13_G6 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QA13_H95;
ELSE GO TO QA13_H96;**

QA13_H95 Were you able to get information about your health plan options in your language?

你是否能夠用你自己的語言獲得有關你的保健計劃選擇的資訊？
(CHIS 2014 ONLY)

AH116

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_H96 Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?

你選擇的計劃費用在你選擇計劃時是非常重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH117

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

QA13_H97 Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?

從某一位特定的醫生處接受護理服務在你選擇計劃時是十分重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH118

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

QA13_H98 Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?

從某一家特定的醫院接受護理服務在你選擇計劃時是十分重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH119

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

QA13_H99 Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?

計劃網路內的醫生選擇在你選擇計劃時是非常重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH120

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_H100:

IF QA13_H23 = 1 THEN DISPLAY "Bronze"
ELSE IF QA13_H23 = 2 THEN DISPLAY "Silver"
ELSE IF QA13_H23 = 3 THEN DISPLAY "Gold"
ELSE IF QA13_H23 = 4 THEN DISPLAY "Platinum"
ELSE DISPLAY " ";

QA13_H100 Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/ } plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?

最後，你選擇{白金}計劃的#最\重要的一個原因是什? 是費用、你可以從某一位特定的醫生處接受護理服務、你可以在某一家醫院就診、你的計劃網路內的服務提供者選擇、還是其他一些原因？
(CHIS 2014 ONLY)

AH121

COST1
SPECIFIC DOCTOR2
SPECIFIC HOSPITAL3
CHOICE OF DOCTORS IN NETWORK4
OTHER (SPECIFY: _____) 92
REFUSED -7
DON'T KNOW -8

Hospitalizations

PROGRAMMING NOTE QA13_H101:

IF QA13_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA13_B41 = 1 (HOSPITALIZED FOR HEART DISEASE) THEN GO TO PROGRAMMING NOTE QA13_H102;
ELSE CONTINUE WITH QA13_H101

QA13_H101 During the past 12 months, were you a patient in a hospital overnight or longer?
在過去十二個月內，您是否曾經因病住院一天或以上？

AH14

YES1
NO2 [GO TO PN QA13_H104]
REFUSED -7 [GO TO PN QA13_H104]
DON'T KNOW -8 [GO TO PN QA13_H104]

PROGRAMMING NOTE QA13_H102:

IF QA13_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA13_B41 = 1 (HOSPITALIZED FOR HEART DISEASE), THEN DISPLAY "During the past 12 months, when you were hospitalized for any reason,"

QA13_H102 {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

Partial Scope Medi-Cal**PROGRAMMING NOTE QA13_H103:**

**IF ARINSURE ≠ 1 OR QA13_H75 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH QA13_H103;
ELSE GO TO PROGRAMMING NOTE QA13_H104**

QA13_H103 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

YES1

NO2

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE FOR QA13_H104:

**IF [ARINSURE ≠ 1 OR QA13_H75 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND QA13_A5 = 2 (FEMALE) AND [QA13_E1 = 1 (PREGNANT) OR QA13_G18 = 1 (R IS PARENT OR LEGAL GUARDIAN FOR ANY CHILD IN ROSTER UNDER 1 YEAR OLD)] CONTINUE WITH QA13_H104;
ELSE SKIP TO PROGRAMMING NOTE QA13_I1**

QA13_H104 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

YES1

NO2

REFUSED -7

DON'T KNOW -8

[GO TO PN QA13_I1]

[GO TO PN QA13_I1]

[GO TO PN QA13_I1]

QA13_H105 Was it paid for by Medi-Cal?
這是由Medi-Cal付費的嗎？

AH78

YES1

NO2

REFUSED -7

DON'T KNOW -8

Section I – Child and Adolescent Health Insurance

Child's Health Insurance

PROGRAMMING NOTE QA13_I1:

IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QA13_I41 TO ASK ABOUT SELECTED ADOLESCENT;

IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE QA13_I2;

ELSE CONTINUE WITH QA13_I1

QA13_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?

CF10A

YES	1	[GO TO QA13_I35]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_I1:

IF QA13_I1 = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARHFAM = 1, SET CHHFAM = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARHKID = 1, SET CHHKID = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AREMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AREMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AREMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AREMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND AROTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

IF QA13_I1 = 1 AND ARIHS = 1, SET CHIHS = 1

IF QA13_I1 = 1 AND ARHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;

PROGRAMMING NOTE QA13_I2:**IF SPINSURE ≠ 1, THEN SKIP TO QA13_I3;****ELSE IF QA13_I1 = 2 AND ARSAMESP = 1, THEN SKIP TO QA13_I3;****ELSE CONTINUE WITH QA13_I2**

QA13_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?

MA1

YES1 **[GO TO QA13_I22]**
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I2:**IF QA13_I2 = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPHFAM = 1, SET CHHFAM = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPHKID = 1, SET CHHKID = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPEMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPEMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPEMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPEMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPOTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA13_I2 = 1 AND SPIHS = 1, SET CHIHS = 1****IF QA13_I2 = 1 AND SPHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****Medi-Cal Coverage (Child)**

QA13_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?

CF1

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]

[IF NEEDED, SAY: 「Medi-CAL是為某些低收入家庭的兒童及其家人、孕婦、殘障人士或年長者提供的一項計劃。」]

YES1 **[GO TO QA13_I5]**
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I3:**IF QA13_I3 = 1, SET CHMCAL = 1 AND SET CHINSURE = 1**

Healthy Families Coverage (Child)

QA13_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。」]

YES1
NO2
REFUSED -7
DON'T KNOW -8

POST-NOTE QA13_I4:

IF QA13_I4 = 1, SET CHHFAM = 1 AND SET CHINSURE = 1

Employer-Based Coverage (Child)

QA13_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

[INTERVIEW NOTE: CODE 'YES' IF R MENTIONS 'SHOP' PROGRAM THROUGH COVERED CALIFORNIA]

YES1
NO2 [GO TO PN QA13_I7]
REFUSED -7 [GO TO PN QA13_I7]
DON'T KNOW -8 [GO TO PN QA13_I7]

POST-NOTE QA13_I5:

IF QA13_I5 = 1, SET CHEMP = 1 AND CHINSURE = 1

QA13_I6 Is this plan through an employer, through a union, or through Covered California's SHOP program?

這項計劃是透過雇主、工會、還是Covered California的SHOP計劃購買的?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]

[IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

AI90

EMPLOYER1
UNION.....2
SHOP / COVERED CALIFORNIA3
OTHER (SPECIFY: _____)..... 91
REFUSED -7
DON'T KNOW -8

POST-NOTE FOR QA13_I6:
IF QA13_I6 = 3, THEN SET CHHBEX = 1

PROGRAM NOTE QA13_I7:
IF CHINSURE = 1 THEN GO TO QA13_I9;
ELSE CONTINUE WITH QA13_I7

Private Coverage (Child)

QA13_I7 Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?
 {CHILD NAME /AGE/SEX}是否享受你直接從保險公司或HMO或透過Covered California購買的醫療保險計劃的承保？
 (MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

CF4

[IF NEEDED, SAY: “Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital”]

[IF NEEDED, SAY: 「請不要包括僅支付某些疾病（例如癌症或中風）費用的計劃或當你住院時僅向你支付「額外現金」的計劃。」]

YES	1	
NO	2	[GO TO PN QA13_I14]
REFUSED	-7	[GO TO PN QA13_I14]
DON'T KNOW	-8	[GO TO PN QA13_I14]

POST-NOTE QA13_I7:
IF QA13_I7 = 1, SET CHDIRECT = 1 AND CHINSURE = 1

PROGRAMMING NOTE QA13_I8:
IF CHDIRECT = 1, THEN CONTINUE WITH QA13_I8;
ELSE GO TO PROGRAMMING NOTE QA13_I9

QA13_I8 How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?
 你是如何購買這項保健計劃的 — 是直接從保險公司或HMO購買還是透過Covered California購買？
 (CHIS 2014 ONLY)

AI91

INSURANCE COMPANY OR HMO	1
COVERED CALIFORNIA	2
OTHER (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

POST-NOTE FOR QA13_I8:
IF QA13_I8 = 2, THEN SET CHHBEX = 1

PROGRAMMING NOTE QA13_I9
IF CHHBEX = 1, THEN CONTINUE WITH QA13_I9;
ELSE GO TO PROGRAMMING NOTE QA13_I11;

QA13_I9 Was this a bronze, silver, gold or platinum plan?

這是銅、銀、金還是白金計劃？

(CHIS 2014 ONLY)

AI92

Bronze1
 Silver2
 Gold3
 Platinum4
 MEDI-CAL / MEDICAID5
 CATASTROPHIC6
 OTHER (SPECIFY:.....)..... 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I10
IF CHHBEX = 1 AND CHDIRECT = 1, THEN CONTINUE WITH QA13_I10;
ELSE GO TO PROGRAMMING NOTE QA13_I11;

QA13_I10 Was there a subsidy or discount on the premium for this plan?

這項計劃的保費是否有補貼或折扣？

AI93

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I11:
IF CHEMP = 1 (EMPLOYER-BASED COVERAGE) OR CHDIRECT = 1 (PURCHASED OWN COVERAGE),
CONTINUE WITH QA13_I11;
ELSE GO TO PROGRAMMING NOTE QA13_14

QA13_I11 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{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."

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

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

[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。"

"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。"

"保費是您的健康保險計劃的每月收費。"]

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_I12 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

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

[GO TO PN QA13_I14]

[GO TO PN QA13_I14]

[GO TO PN QA13_I14]

QA13_I13 Who else pays all or some portion of the cost for (CHILD)'s health plan?
 還有誰支付{CHILD NAME/AGE/SEX}保健計劃的全部或部分費用?

AI51

CURRENT EMPLOYER1
 FORMER EMPLOYER2
 UNION.....3
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4
 SPOUSE'S/PARTNER'S FORMER EMPLOYER.....5
 PROFESSIONAL/FRATERNAL ORGANIZATION ...6
 MEDICAID/MEDI-CAL ASSISTANCE7
 HEALTHY FAMILIES8
 HEALTHY KIDS9
 COVERED CALIFORNIA..... 10
 OTHER..... 91
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I13:

IF QA13_I13 = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;

IF QA13_I13 = 8, SET CHHFAM = 1;

IF QA13_I13 = 7, SET CHMCAL = 1

IF QA13_I13 = 9, SET CHHKID = 1

IF QA13_I13 = 10, SET CHHBEX = 1;

CHAMPUS/CHAMP-VA, TRICARE, VA Coverage (Child)

PROGRAMMING NOTE QA13_I14:
IF CHINSURE = 1, GO TO PN QA13_I22;
ELSE CONTINUE WITH QA13_I14

QA13_I14 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 或其它軍隊醫療護理計劃?

CF6

YES1 **[GO TO PN QA13_I22]**
 NO2
 REFUSED-7
 DON'T KNOW-8

POST-NOTE QA13_I14:
IF QA13_I14 = 1, SET CHMILIT = 1 AND CHINSURE = 1

Healthy Kids (Child)

PROGRAMMING NOTE QA13_I15:
IF CHINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) CONTINUE WITH QA13_I11 AND DISPLAY "Healthy Kids";

QA13_I15 Is {he/she} covered by the Healthy Kids program?
 {CHILD NAME/AGE/SEX} 是否享受 Healthy Kids 計劃保賠?

AI70

[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]
[IF NEEDED, SAY: "Healthy Kids是一項為您郡內的兒童提供的計劃。"]

YES1 **[GO TO PN QA13_I22]**
 NO2
 REFUSED-7
 DON'T KNOW-8

POST-NOTE QA13_I15:
IF QA13_I15 = 1, SET CHHKID = 1 AND SET CHINSURE = 1

AIM, MRMIP, PCIP, Other Government Coverage (Child)

QA13_I16 Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", PCIP, or something else?
{he/she}是否享受其他政府醫療保險計劃，例如AIM、Mister MIP、PCIP或其他計劃？

CF7

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; and PCIP is the pre-existing condition insurance plan."]

[IF NEEDED, SAY: 「AIM 表示「母嬰營養計劃」； Mister MIP或 MRMIP表示「重大風險醫療保險計劃」； PCIP是原有病症保險計劃。」]

AIM.....	1	[GO TO PN QA13_I22]
"MISTER MIP"/MRMIP.....	2	[GO TO PN QA13_I22]
PCIP.....	3	[GO TO PN QA13_I22]
NO OTHER PLAN.....	4	
SOMETHING ELSE (SPECIFY: _____).....	91	[GO TO PN QA13_I22]
REFUSED.....	-7	
DON'T KNOW.....	-8	

POST-NOTE QA13_I16:

IF QA13_I16 = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1

Other Coverage (Child)

QA13_I17 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？

CF8

YES.....	1	
NO.....	2	[GO TO PN QA13_I20]
REFUSED.....	-7	[GO TO PN QA13_I20]
DON'T KNOW.....	-8	[GO TO PN QA13_I20]

QA13_I18 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} 的醫覽來自加州醫療輔助計劃、健康家庭計劃、雇主或工會、還是來自其它來源？

CF9

[CIRCLE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: 「還有其它來源嗎？」]

THROUGH CURRENT OR FORMER
 EMPLOYER/UNION1
 THROUGH SCHOOL, PROFESSIONAL
 ASSOCIATION, TRADE GROUP OR OTHER
 ORGANIZATION.....2
 PURCHASED DIRECTLY FROM A HEALTH
 PLAN (BY R OR ANYONE ELSE)3
 MEDICARE4
 MEDI-CAL5
 HEALTHY FAMILIES6
 CHAMPUS/CHAMP-VA, TRICARE, VA, OR
 SOME OTHER MILITARY HEALTH CARE7
 INDIAN HEALTH SERVICE, TRIBAL HEALTH
 PROGRAM, URBAN INDIAN CLINIC.....8
 HEALTHY KIDS9
 COVERED CALIFORNIA..... 10
 SHOP THROUGH COVERED CALIFORNIA 11
 OTHER GOVERNMENT HEALTH PLAN 91
 OTHER NON-GOVERNMENT HEALTH PLAN..... 92
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I18:

IF QA13_I18 = 1, SET CHEMP = 1 AND CHINSURE = 1
 IF QA13_I18 = 2, SET CHEMP = 1 AND CHINSURE = 1
 IF QA13_I18 = 3, SET CHDIRECT = 1 AND CHINSURE = 1
 IF QA13_I18 = 4, SET CHMCARE = 1 AND CHINSURE = 1
 IF QA13_I18 = 5, SET CHMCAL = 1 AND CHINSURE = 1
 IF QA13_I18 = 6, SET CHHFAM = 1 AND CHINSURE = 1
 IF QA13_I18 = 7, SET CHMILIT = 1 AND CHINSURE = 1
 IF QA13_I18 = 8, SET CHIHS = 1
 IF QA13_I18 = 9, SET CHHKID = 1 AND CHINSURE = 1
 IF QA13_I18 = 10, SET CHHBEX = 1 AND CHINSURE = 1
 IF QA13_I18 = 11, SET CHHBEX = 1 AND CHINSURE = 1
 IF QA13_I18 = 91, SET CHOTHGOV = 1 AND CHINSURE = 1
 IF QA13_I18 = 92, SET CHOTHER = 1 AND CHINSURE = 1
 IF QA13_I18 = -7 OR -8, SET CHINSURE = 1

PROGRAMMING NOTE QA13_I19:
IF QA13_I18 = 4 (CHILD HAS MEDICARE), CONTINUE WITH QA13_I19;
ELSE SKIP TO PROGRAMMING NOTE QA13_I20

QA13_I19 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

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I20:
IF CHINSURE ≠ 1 CONTINUE WITH QA13_I20;
ELSE GO TO QA13_I22;

QA13_I20 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劃 (Medi-CAL) 的一個主要原因是什麼？

CF1A

PAPERWORK TOO DIFFICULT1
 DIDN'T KNOW IF ELIGIBLE2
 INCOME TOO HIGH, NOT ELIGIBLE3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 OTHER NOT ELIGIBLE5
 DON'T BELIEVE IN HEALTH INSURANCE6
 DON'T NEED IT BECAUSE HEALTHY7
 ALREADY HAVE INSURANCE8
 DIDN'T KNOW IT EXISTED.....9
 DON'T LIKE / WANT WELFARE 10
 OTHER (SPECIFY)..... 91
 REFUSED -7
 DON'T KNOW -8

QA13_I21 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¹是什麼?

CF2A

PAPERWORK TOO DIFFICULT1
 DIDN'T KNOW IF ELIGIBLE2
 INCOME TOO HIGH, NOT ELIGIBLE3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 OTHER NOT ELIGIBLE5
 DON'T BELIEVE IN HEALTH INSURANCE6
 DON'T NEED IT BECAUSE HEALTHY7
 ALREADY HAVE INSURANCE8
 DIDN'T KNOW IT EXISTED.....9
 DON'T LIKE / WANT WELFARE 10
 OTHER (SPECIFY)..... 91
 REFUSED -7
 DON'T KNOW -8

Managed-Care Plan Characteristics (Child)**PROGRAMMING NOTE QA13_I22:**

IF QA13_I1 = 1 AND ARMCARE = 1, THEN QA13_I22 = QA13_H8 AND QA13_I23 = QA13_H9 AND SKIP TO QA13_I24;

ELSE IF QA13_I1 = 1, THEN QA13_I22 = QA13_H63 AND QA13_I23 = QA13_H64 AND QA13_I24 = QA13_H65 AND GO TO PN QA13_I25;

ELSE IF CHINSURE = 1, THEN CONTINUE WITH QA13_I22;

ELSE GO TO PN QA13_I25

QA13_I22 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？

MA3

[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid for unless its 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。"]

YES1 [GO TO QA13_I23]
 NO2
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I22B:
IF CHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO QA13_I23;
ELSE CONTINUE WITH QA13_I22B;

QA13_I22B Is (CHILD)'s health plan a PPO or EPO?
 {他的或她的}保健計劃是一項PPO計劃還是EPO計劃?
 (CHIS 2014 ONLY)

AI115

[IF NEEDED, SAY: "EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it's an emergency and you can access doctors and specialists directly without a referral from your primary care provider."]

[IF NEEDED, SAY: 「EPO代表「專有服務提供者團體」。在EPO中，除非是急診，你必須使用網路內的醫生和醫院，你可以直接與醫生和專科醫生約診，無需由你的主治醫生轉介。」]

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

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

[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: "{His/Her} MAIN health plan."]

[IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: 「{他的或她的}#主要\保健計劃。」]

PPO.....	1
EPO.....	2
OTHER (SPECIFY:_____)	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_I23:

IF CHINSURE = 1 (CHILD HAS ANY COVERAGE), CONTINUE WITH QA13_I23;

IF CHMCARE = 1 AND QA13_I22 = 1 THEN list HMO MediCare by county;

ELSE IF CHMCAL = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 1) AND QA13_I22 = 1 THEN list HMO MEDICAL by county;

ELSE IF (CHHFAM = 1 OR CHHKIDS = 1) AND QA13_I22 = 1 THEN list HMO Healthy Families by county;

ELSE IF (CHEMP = 1 OR CHDIRECT = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 2) OR CHOTHER = 1) AND QA13_I22 = 1 THEN list HMO Commercial by county;

ELSE IF (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1) AND QA13_I22 = 2 THEN list Non-HMO by county

QA13_I23

What is the name of (CHILD)'s main health plan?

{ }參加的主要健康計劃的名稱是什麼?

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? "]

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 1 ST 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
KAISER.....	37
KERN COUNTY HEALTH PLAN.....	38
L.A. CARE HEALTH PLAN	39
MD CARE.....	40

MOLINA HEALTH PLAN	41
MOLINA MEDICARE OPTIONS	42
ON LOK.....	43
ON LOK SENIOR HEALTH SERVICES	44
ONE CARE	45
PACIFICARE.....	46
PARTNERSHIP HEALTH PLAN OF CALIFORNIA	47
SALUD CON HEALTH NET	48
SAN FRANCISCO HEALTH PLAN	49
SANTA CLARA FAMILY HEALTH PLAN	50
SCAN HEALTH PLAN	51
SECURE HORIZONS	52
SENIOR ADVANTAGE	53
SENIORITY PLUS.....	54
SERVICE TO SENIORS	55
SHARP HEALTH PLAN	56
TOTAL FIT	57
VALLEY HEALTH PLAN	58
VENTURA COUNTY HEALTH CARE PLAN.....	59
WESTERN HEALTH ADVANTAGE	60
WESTERN HEALTH ADVANTAGE CARE+	61
CHAMPUS/CHAMP-VA	62
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	63
VA HEALTH CARE SERVICES	64
MEDI-CAL	65
MEDICARE	66
MEDICARE ADVANTAGE	67
OTHER.....	91
OTHER (SPECIFY: _____)	92
REFUSED	-7
DON'T KNOW	-8

QA13_I24

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？

CF14

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

High Deductible Health Plans (Child)**PROGRAMMING NOTE FOR QA13_I25:**

**IF (ARINSURE ≠ 1 OR QA13_I1 ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN
CONTINUE WITH QA13_I25;
ELSE SKIP TO PROGRAMMING NOTE QA13_I30**

QA13_I25 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	
NO	2	[GO TO QA13_I27]
YES, ONLY WHEN GO OUT OF NETWORK	3	[GO TO QA13_I27]
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE FOR QA13_I26:

**IF CHEMP = 1, THEN CONTINUE WITH QA13_I26;
ELSE GO TO QA13_I27**

QA13_I26 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你必須支付的數額。”]

YES	1	[GO TO PN QA13_I28]
NO	2	
YES, ONLY WHEN GO OUT OF NETWORK	3	
REFUSED	-7	
DON'T KNOW	-8	

QA13_I27 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美元的免賠額？

AI80

[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	
NO	2	[GO TO PN QA13_I29]
YES, ONLY WHEN GO OUT OF NETWORK	3	[GO TO PN QA13_I29]
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE FOR QA13_I28:
IF CHEMP = 1, THEN CONTINUE WITH QA13_I28;
ELSE GO TO PROGRAMMING NOTE QA13_I29

QA13_I28 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？

AI86

[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 QA13_I29:

**IF (QA13_I25 = 1 OR 3) OR (QA13_I26 = 1 OR 3) OR (QA13_I27 = 1 OR 3), CONTINUE WITH QA13_I29;
ELSE SKIP TO PROGRAMMING NOTE QA13_I30**

QA13_I29

Do you have a special account or fund you can use to pay for (CHILD)'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？

AI81

[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。"]

YES1
NO2
REFUSED -7
DON'T KNOW -8

Reasons for Lack of Coverage (Child)**PROGRAMMING NOTE QA13_I30:**

**IF CHINSURE = 1, GO TO QA13_I35;
ELSE CONTINUE WITH QA13_I30**

QA13_I30

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 EXPENSIVE1
NOT ELIGIBLE DUE TO WORKING STATUS/
CHANGED EMPLOYER/LOST JOB2
NOT ELIGIBLE DUE TO HEALTH OR
OTHER PROBLEMS3
NOT ELIGIBLE DUE TO CITIZENSHIP/
IMMIGRATION STATUS4
FAMILY SITUATION CHANGED5
DON'T BELIEVE IN INSURANCE6
SWITCHED INSURANCE COMPANIES,
DELAY BETWEEN7
CAN GET HEALTH CARE FOR FREE/PAY
FOR OWN CARE8
OTHER (SPECIFY) 91
REFUSED -7
DON'T KNOW -8

Coverage over Past 12 Months (Child)

QA13_I31 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 QA13_I33]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

QA13_I32 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 QA13_I41]
MORE THAN 3 YEARS AGO	2	[GO TO PN QA13_I41]
NEVER HAD HEALTH INSURANCE COVERAGE ..	3	[GO TO PN QA13_I41]
REFUSED	-7	[GO TO PN QA13_I41]
DON'T KNOW	-8	[GO TO PN QA13_I41]

QA13_I33 For how many of the last 12 months did {he/she} have health insurance?
 在過去 12 個月內，{he/she}有多少個月有醫療保險？

CF22

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

_____ MONTHS [HR: 0-12]	[IF 0, THEN GO TO PN QA13_I41]
REFUSED	-7
DON'T KNOW	-8

QA13_I34 During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
 在{CHILD NAME/AGE/SEX}有醫療保險期間，{他的/她的}保險是
 Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你直接從保險
 公司購買的計劃、你透過Covered California購買的計劃還是其他計劃？

CF23

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他計劃嗎？」]

MEDI-CAL	1	[GO TO PN QA13_I41]
HEALTHY FAMILIES	2	[GO TO PN QA13_I41]
THROUGH CURRENT OR FORMER EMPLOYER		
UNION	3	[GO TO PN QA13_I41]
HEALTHY KIDS	4	[GO TO PN QA13_I41]
PURCHASED DIRECTLY	5	[GO TO PN QA13_I41]
COVERED CALIFORNIA	6	[GO TO PN QA13_I41]
OTHER HEALTH PLAN	91	[GO TO PN QA13_I41]
REFUSED	-7	[GO TO PN QA13_I41]
DON'T KNOW	-8	[GO TO PN QA13_I41]

QA13_I35 Thinking about {his/her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

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

CF24

YES	1	[GO TO PN QA13_I41]
NO	2	
HAD SAME INSURANCE SINCE BIRTH		
(FOR CHILDREN LESS THAN ONE YEAR OLD) ...	3	[GO TO PN QA13_I41]
REFUSED	-7	
DON'T KNOW	-8	

QA13_I36 When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?
 當 {他/她} 沒有享受{} 目前的醫療保險時，{他/她} 有沒有其它任何醫療保險？

CF25

YES	1	
NO	2	[GO TO QA13_I38]
REFUSED	-7	[GO TO QA13_I38]
DON'T KNOW	-8	[GO TO QA13_I38]

QA13_I37 Was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

該其他醫療保險是Medi-CAL、Healthy Families、你透過雇主獲得的計劃、你直接從保險公司購買的計劃、你透過Covered California購買的計劃還是其他計劃？

CF26

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他計劃嗎？」]

MEDI-CAL	1
HEALTHY FAMILIES	2
HEALTHY KIDS	3
THROUGH CURRENT OR FORMER EMPLOYER/UNION	4
PURCHASED DIRECTLY	5
COVERED CALIFORNIA	6
OTHER HEALTH PLAN	91
REFUSED	-7
DON'T KNOW	-8

QA13_I38 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

YES	1	
NO	2	[GO TO PN QA13_I41]
REFUSED	-7	[GO TO PN QA13_I41]
DON'T KNOW	-8	[GO TO PN QA13_I41]

QA13_I39 For how many of the past 12 months did {he/she} have no health insurance?
在過去12個月中，{he/she}有幾個月沒有健康保險？

CF28

[IF < 1 MONTH, ENTER "1"]

_____ MONTHS [RANGE: 1-12]

REFUSED	-7
DON'T KNOW	-8

QA13_I40

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麼？

CF29

[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

Teen's Health Insurance

PROGRAMMING NOTE QA13_I41:

IF NO TEEN SELECTED, GO TO PN QA13_I81;
 IF ARINSURE = 1, CONTINUE WITH QA13_I41;
 IF ARINSURE = 0, GO TO PN QA13_I42;
 ELSE CONTINUE WITH QA13_I41

QA13_I41 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

YES1 [GO TO QA13_I75]
 NO2
 REFUSED-7
 DON'T KNOW-8

POST-NOTE QA13_I41:

IF QA13_I41 = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AREMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AREMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND AROTH = 1, SET TEOTH = 1 AND SET TEINSURE = 1;
 IF QA13_I41 = 1 AND ARIHS = 1, SET TEIHS = 1;
 IF QA13_I41 = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;

PROGRAMMING NOTE QA13_I42:

IF SPINSURE ≠ 1 THEN SKIP TO QA13_I43;

ELSE IF QA13_I41 = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE QA13_I43;

ELSE CONTINUE WITH QA13_I42

QA13_I42 Does (TEEN) have the same insurance as your spouse?

{ } 的保險是否與您的{ } 的保險相同?

MA5

YES1 [GO TO QA13_I62]
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I42:

IF QA13_I42 = 1 AND SPMPCARE = 1, SET TEMPCARE = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPEMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;

IF QA13_I42 = 1 AND SPIHS = 1, SET TEIHS = 1

IF QA13_I42 = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;

PROGRAMMING NOTE QA13_I43:

IF CHINSURE ≠ 1, THEN SKIP TO QA13_I44;

ELSE IF (QA13_I41 = 2 AND ARSAMECH = 1) OR (QA13_I42 = 2 AND SPSAMECH = 1), THEN SKIP TO QA13_I44;

ELSE CONTINUE WITH QA13_I43;

QA13_I43 Does (TEEN) have the same insurance as (CHILD)?

{ } 的保險是否與{ } 的保險相同?

MA6

YES1 [GO TO PN QA13_I75]
 NO2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I43:

IF QA13_I43 = 1 AND CHMCARE = 1, SET TEMPCARE = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;

IF QA13_I43 = 1 AND CHIHS = 1, SET TEIHS = 1

Medi-Cal Coverage (Teen)

QA13_I44 Is {he/she} currently covered by Medi-CAL?
 {} 是否享受Medi-CAL（加州醫療保健計劃）的保賠？

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 QA13_I46]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_I44:

IF QA13_I44 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1

Healthy Families Coverage (Teen)

QA13_I45 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 QA13_I45:

IF QA13_I45 = 1, SET TEHFAM = 1 AND SET TEINSURE = 1

Employer-Based Coverage (Teen)

QA13_I46 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} 有沒有享受通過您或其他人的工作或工會提供的醫療保險計劃或管理式保健組織計劃 (HMO)?

IA3

[INTERVIEW NOTE: CODE 'YES' IF R MENTIONS 'SHOP' PROGRAM THROUGH COVERED CALIFORNIA]

YES	1	
NO	2	[GO TO QA13_I48]
REFUSED	-7	[GO TO QA13_I48]
DON'T KNOW	-8	[GO TO QA13_I48]

POST-NOTE QA13_I46:

IF QA13_I45 = 1, SET TEEMP = 1 AND SET TEINSURE = 1

QA13_I47 Is this plan through an employer, through a union, or through Covered California's SHOP program?

這項計劃是透過雇主、工會、還是Covered California的SHOP計劃購買的？
(CHIS 2014 ONLY)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]

[IF NEEDED, SAY: 「SHOP是Covered California開展的小企業保健選擇計劃」]

AI94

EMPLOYER	1
UNION	2
SHOP / COVERED CALIFORNIA	3
OTHER (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

POST-NOTE FOR QA13_I47:

IF QA13_I47 = 3, THEN SET TEHBEX = 1

PROGRAM NOTE QA13_I48:
IF TEINSURE = 1 THEN GO TO QA13_I49;
ELSE CONTINUE WITH QA13_I48

Private Coverage (Teen)

QA13_I48 Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO?
 {CHILD NAME /AGE/SEX}是否享受你直接從保險公司或HMO或透過Covered California購買的醫療保險計劃的承保？

IA4

[IF NEEDED, SAY: "Do not include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you "extra cash" if you are in a hospital."]

[IF NEEDED, SAY: 「請不要包括僅支付某些疾病（例如癌症或中風）費用的計劃或當你住院時僅向你支付「額外現金」的計劃。」]

YES	1	
NO	2	[GO TO PN QA13_I55]
REFUSED	-7	[GO TO PN QA13_I55]
DON'T KNOW	-8	[GO TO PN QA13_I55]

POST-NOTE QA13_I48:
IF QA13_I48 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1

PROGRAMMING NOTE QA13_I49:
IF TEDIRECT = 1, THEN CONTINUE WITH QA13_I49;
ELSE GO TO PROGRAMMING NOTE QA13_I50

QA13_I49 How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?
 你是如何購買這項保健計劃的 — 是直接從保險公司或HMO購買還是透過Covered California購買？
 (CHIS 2014 ONLY)

AI95

INSURANCE COMPANY OR HMO	1
COVERED CALIFORNIA.....	2
OTHER (SPECIFY:.....)	91
REFUSED	-7
DON'T KNOW	-8

POST-NOTE FOR QA13_I49:
IF QA13_I49 = 2, THEN SET TEHBEX = 1

PROGRAMMING NOTE QA13_I50
IF TEHBEX = 1, THEN CONTINUE WITH QA13_I50;
ELSE GO TO PROGRAMMING NOTE QA13_I52;

QA13_I50 Was this a bronze, silver, gold or platinum plan?

這是銅、銀、金還是白金計劃？

(CHIS 2014 ONLY)

AI90

Bronze1
 Silver2
 Gold3
 Platinum4
 MEDI-CAL / MEDICAID5
 CATASTROPHIC6
 OTHER (SPECIFY:.....)..... 91
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_I51
IF QA13_I47 = 3, THEN GO TO PN QA13_I52;
ELSE CONTINUE WITH QA13_I51;

QA13_I51 Was there a subsidy or discount on the premium for this plan?

這項計劃的保費是否有補貼或折扣？

(CHIS 2014 ONLY)

AI97

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_I52:

**IF TEEMP = 1 (EMPLOYER-BASED COVERAGE) OR TEDIRECT = 1 (PURCHASED OWN COVERAGE),
CONTINUE WITH QA13_I52;
ELSE GO TO PROGRAMMING NOTE QA13_I55**

QA13_I52

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{ ADOLESCENT /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。

AI55

[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.

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

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

[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，由其他人支付您的主要健康護理保賠費用。"

"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。"

"保費是您的健康保險計劃的每月收費。"]

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_I53

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{ADOLESCENT/AGE/SEX}的保健計劃的全部或部份保費或費用?

AI52

YES1
NO2
REFUSED -7
DON'T KNOW -8

[GO TO PN QA13_I55]

[GO TO PN QA13_I55]

[GO TO PN QA13_I55]

QA13_I54 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分費用?

AI53

CURRENT EMPLOYER1
 FORMER EMPLOYER2
 UNION.....3
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4
 SPOUSE'S/PARTNER'S FORMER EMPLOYER....5
 PROFESSIONAL/FRATERNAL ORGANIZATION ...6
 MEDICAID/MEDI-CAL ASSISTANCE7
 HEALTHY FAMILIES8
 HEALTHY KIDS9
 OTHER..... 91
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I54:
IF QA13_I54 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;
IF QA13_I54 = 7, SET TEMCAL = 1;
IF QA13_I54 = 8, SET TEHFAM = 1;
IF QA13_I54 = 9, SET TEHKID = 1 AND SET TEINSURE = 1
IF QA13_I54 = 10, SET TEHBEX = 1;

CHAMPUS/CHAMP VA, TRICARE, VA Coverage (Teen)

PROGRAMMING NOTE QA13_I55:
IF TEINSURE = 1, GO TO PROGRAMMING NOTE QA13_I62;
ELSE CONTINUE WITH QA13_I55

QA13_I55 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 或其它軍隊醫療保險計劃?

IA6

YES1 **[GO TO PN QA13_I62]**
 NO.....2
 REFUSED -7
 DON'T KNOW -8

POST-NOTE QA13_I55:
IF QA13_I55 = 1, SET TEMILIT = 1 AND SET TEINSURE = 1

Healthy Kids (Teen)**PROGRAMMING NOTE FOR QA13_I56:**

IF TEINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) CONTINUE WITH QA13_I48 AND DISPLAY "Healthy Kids";

QA13_I56 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是一項為您郡內的兒童提供的計劃。"]

YES	1	[GO TO PN QA13_I62]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_I56:

IF QA13_I56 = 1, SET TEHKID = 1 AND SET TEINSURE = 1

AIM, MRMIP, Family PACT, PCIP, Other Government Coverage (Teen)

QA13_I57 Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, PCIP or something else?
{he/she}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？

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 表示「母嬰營養計劃」；Mister MIP或MRMIP表示「重大風險醫療保險計劃」；Family PACT是一項州立計劃，為沒有保險的低收入男女的避孕/生育醫療服務支付費用；PCIP是原有病症保險計劃。」]

AIM	1	[GO TO PN QA13_I62]
"MISTER MIP"/MRMIP	2	[GO TO PN QA13_I62]
Family PACT	3	[GO TO PN QA13_I62]
PCIP	4	[GO TO PN QA13_I62]
NO OTHER PLAN	5	
SOMETHING ELSE (SPECIFY: _____)	91	[GO TO PN QA13_I62]
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_I57:

IF QA13_I57 = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1

Other Coverage (Teen)

QA13_I58 Does {he/she} have any health insurance coverage through a plan that I missed?
{他/她} 有沒有享受任何我漏掉的其它醫療保險計劃？

IA8

YES	1	
NO	2	[GO TO PN QA13_I62]
REFUSED	-7	[GO TO PN QA13_I62]
DON'T KNOW	-8	[GO TO PN QA13_I62]

QA13_I59

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?

麥格保險是透過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、還是從某些其它來源獲得的？

IA9

[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僱主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的?"]

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其它計畫嗎?」]

THROUGH CURRENT OR FORMER EMPLOYER/UNION	1	
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION.....	2	
PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE)	3	
MEDICARE	4	(VERIFY)
MEDI-CAL	5	
HEALTHY FAMILIES	6	
CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE	7	
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC.....	8	
HEALTHY KIDS	9	
COVERED CALIFORNIA.....	10	
SHOP THROUGH COVERED CALIFORNIA	11	
OTHER GOVERNMENT HEALTH PLAN	91	
OTHER NON-GOVERNMENT HEALTH PLAN.....	92	
REFUSED	-7	
DON'T KNOW	-8	

POST-NOTE QA13_I59:

**IF QA13_I59_1 = 1, SET TEEMP = 1 AND TEINSURE = 1;
IF QA13_I59_2 = 1, SET TEEMP = 1 AND TEINSURE = 1;
IF QA13_I59_3 = 1, SET TEDIRECT = 1 AND TEINSURE = 1;
IF QA13_I59_4 = 1, SET TEMCARE = 1 AND TEINSURE = 1;
IF QA13_I59_5 = 1, SET TEMCAL = 1 AND TEINSURE = 1;
IF QA13_I59_6 = 1, SET TEHFAM = 1 AND TEINSURE = 1;
IF QA13_I59_7 = 1, SET TEMILIT = 1 AND TEINSURE = 1;
IF QA13_I59_8 = 1, SET TEIHS = 1;
IF QA13_I59_9 = 1, SET TEHKID = 1 AND TEINSURE = 1;
IF QA13_I59 = 10, SET TEHBEX = 1 AND CHINSURE = 1;
IF QA13_I59 = 11, SET TEHBEX = 1 AND CHINSURE = 1;
IF QA13_I59_91 = 1, SET TEOTHGOV = 1 AND TEINSURE = 1;
IF QA13_I59_92 = 1, SET TEOTHER = 1 AND TEINSURE = 1;
IF QA13_I59 = -7 OR -8, SET TEINSURE = 1**

PROGRAMMING NOTE QA13_I60:
IF TEINSURE # 1 CONTINUE WITH QA13_I60;
ELSE GO TO QA13_I62;

QA13_I60 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 DIFFICULT1
 DIDN'T KNOW IF ELIGIBLE2
 INCOME TOO HIGH, NOT ELIGIBLE3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 OTHER NOT ELIGIBLE5
 DON'T BELIEVE IN HEALTH INSURANCE6
 DON'T NEED IT BECAUSE HEALTHY7
 ALREADY HAVE INSURANCE8
 DIDN'T KNOW IT EXISTED.....9
 DON'T LIKE / WANT WELFARE 10
 OTHER (SPECIFY:.....) 91
 REFUSED -7
 DON'T KNOW -8

QA13_I61 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 DIFFICULT1
 DIDN'T KNOW IF ELIGIBLE2
 INCOME TOO HIGH, NOT ELIGIBLE3
 NOT ELIGIBLE DUE TO CITIZENSHIP/
 IMMIGRATION STATUS4
 OTHER NOT ELIGIBLE5
 DON'T BELIEVE IN HEALTH INSURANCE6
 DON'T NEED IT BECAUSE HEALTHY7
 ALREADY HAVE INSURANCE8
 DIDN'T KNOW IT EXISTED.....9
 DON'T LIKE / WANT WELFARE 10
 OTHER (SPECIFY:.....) 91
 REFUSED -7
 DON'T KNOW -8

Managed-Care Plan Characteristics (Teen)**PROGRAMMING NOTE QA13_I62:**

IF QA13_I41 = 1 AND ARMCARE = 1, THEN QA13_I62 = QA13_H8 AND QA13_I63 = QA13_H9 AND SKIP TO QA13_I64;

ELSE IF QA13_I41 = 1, THEN QA13_I62 = QA13_H63 AND QA13_I63 = QA13_H64 AND QA13_I64 = QA13_H65 AND GO TO PN QA13_I65;

ELSE IF QA13_I43 = 1, THEN QA13_I62 = QA13_I22 AND QA13_I63 = QA13_I23 AND QA13_I64 = QA13_I24 AND GO TO PN QA13_I65;

ELSE IF TEINSURE = 1, THEN CONTINUE WITH QA13_I62;

ELSE GO TO PROGRAMMING NOTE QA13_I65

QA13_I62

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？
(CHIS 2014 ONLY)

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."]

[NOTE: IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY:

"{his or her}#主要保健計劃。"]

[IF R SAYS "POS" OR "POINT OF SERVICE," CODE AS "YES." IF R SAYS "PPO," CODE AS "NO."]

YES	1	[GO TO QA13_I63]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_I62B:
IF TEMCAL = 1 (TEEN HAS MEDI-CAL), GO TO QA13_I63;
ELSE CONTINUE WITH QA13_I62B;

QA13_I62B Is (TEEN)'s health plan a PPO or EPO?
 {他的或她的}保健計劃是一項PPO計劃還是EPO計劃？

AI116

[IF NEEDED, SAY: "EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it's an emergency and you can access doctors and specialists directly without a referral from your primary care provider."]

[IF NEEDED, SAY: 「EPO代表「專有服務提供者團體」。在EPO中，除非是急診，你必須使用網路內的醫生和醫院，你可以直接與醫生和專科醫生約診，無需由你的主治醫生轉介。」]

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

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

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: "{His/Her} MAIN health plan."]

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: 「{他的或她的}#主要\保健計劃。」]

PPO.....	1
EPO.....	2
OTHER (SPECIFY:_____)	91
REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_I63:

IF TEINSURE = 1 (TEEN HAS ANY COVERAGE), CONTINUE WITH QA13_I63;

IF TEMCARE = 1 AND QA13_I62 = 1 THEN list HMO MediCare by county;

ELSE IF TEMCAL = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 1) AND QA13_I62 = 1 THEN list HMO MEDICAL by county;

ELSE IF (TEHFAM = 1 OR TEHKIDS = 1) AND QA13_I62 = 1 THEN list HMO Healthy Families by county;

ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR (TEOTHGOV = 1 AND QA13_I57 = 2) OR TEOTHER = 1) AND QA13_I62 = 1 THEN list HMO Commercial by county;

ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1) AND QA13_I62 = 2 THEN list Non-HMO by county

QA13_I63

What is the name of (TEEN)'s main health plan?

{CHILD NAME/AGE/SEX}參加的{Medi-Cal}保健計劃名稱是什麼?

MA7

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

[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? "]

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 1 ST 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
KAISER.....	37
KERN COUNTY HEALTH PLAN.....	38
L.A. CARE HEALTH PLAN	39

MD CARE	40
MOLINA HEALTH PLAN	41
MOLINA MEDICARE OPTIONS	42
ON LOK	43
ON LOK SENIOR HEALTH SERVICES	44
ONE CARE	45
PACIFICARE	46
PARTNERSHIP HEALTH PLAN OF CALIFORNIA	47
SALUD CON HEALTH NET	48
SAN FRANCISCO HEALTH PLAN	49
SANTA CLARA FAMILY HEALTH PLAN	50
SCAN HEALTH PLAN	51
SECURE HORIZONS	52
SENIOR ADVANTAGE	53
SENIORITY PLUS	54
SERVICE TO SENIORS	55
SHARP HEALTH PLAN	56
TOTAL FIT	57
VALLEY HEALTH PLAN	58
VENTURA COUNTY HEALTH CARE PLAN	59
WESTERN HEALTH ADVANTAGE	60
WESTERN HEALTH ADVANTAGE CARE+	61
CHAMPUS/CHAMP-VA	62
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	63
VA HEALTH CARE SERVICES	64
MEDI-CAL	65
MEDICARE	66
MEDICARE ADVANTAGE	67
OTHER	91
OTHER (SPECIFY: _____)	92
REFUSED	-7
DON'T KNOW	-8

QA13_I64

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

High Deductible Health Plans (Teen)**PROGRAMMING NOTE FOR QA13_I65:**

**IF [(ARINSURE ≠ 1 OR QA13_I41 ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN
CONTINUE WITH QA13_I65;
ELSE SKIP TO PN QA13_I70**

QA13_I65 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的醫療護理付款之前，您必須支付的數額。"]

YES	1	
NO	2	[GO TO QA13_I67]
YES, ONLY WHEN GO OUT OF NETWORK	3	[GO TO QA13_I67]
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_I66:

**IF TEEMP = 1, THEN CONTINUE WITH QA13_I66;
ELSE GO TO QA13_I64**

QA13_I66 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 QA13_I68]
NO	2	
YES, ONLY WHEN GO OUT OF NETWORK	3	
REFUSED	-7	
DON'T KNOW	-8	

QA13_I67 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美元的免賠額？

AI83

[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	
NO	2	[GO TO PN QA13_I69]
YES, ONLY WHEN GO OUT OF NETWORK	3	[GO TO PN QA13_I69]
REFUSED	-7	
DON'T KNOW	-8	

PROGRAMMING NOTE QA13_I68:
IF TEEMP = 1, THEN CONTINUE WITH QA13_I68;
ELSE GO TO PROGRAMMING NOTE QA13_I69

QA13_I68 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？

AI88

[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 QA13_I69:

**IF (QA13_I65 = 1 OR 3) OR (QA13_I66 = 1 OR 3) OR (QA13_I67 = 1 OR 3), CONTINUE WITH QA13_I69;
ELSE SKIP TO PROGRAMMING NOTE QA13_I70**

QA13_I69

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？

AI84

[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。"]

YES1
NO2
REFUSED-7
DON'T KNOW-8

Reasons for Lack of Coverage (Teen)**PROGRAMMING NOTE QA13_I70:**

**IF TEINSURE = 1, GO TO QA13_I75;
ELSE CONTINUE WITH QA13_I70**

QA13_I70

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什麼？

IA18

CAN'T AFFORD/TOO EXPENSIVE1
NOT ELIGIBLE DUE TO WORKING STATUS/
CHANGED EMPLOYER/LOST JOB2
NOT ELIGIBLE DUE TO HEALTH OR
OTHER PROBLEMS3
NOT ELIGIBLE DUE TO CITIZENSHIP/
IMMIGRATION STATUS4
FAMILY SITUATION CHANGED5
DON'T BELIEVE IN INSURANCE6
SWITCHED INSURANCE COMPANIES,
DELAY BETWEEN7
CAN GET HEALTH CARE FOR FREE/PAY
FOR OWN CARE8
OTHER (SPECIFY: _____) 91
REFUSED-7
DON'T KNOW-8

Coverage over Past 12 months (Teen)

QA13_I71 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？

IA20

YES1 **[GO TO QA13_I73]**
 NO2
 REFUSED-7
 DON'T KNOW-8

QA13_I72 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？

IA21

MORE THAN 12 MONTHS, BUT NOT
 MORE THAN 3 YEARS AGO1 **[GO TO QA13_I81]**
 MORE THAN 3 YEARS AGO2 **[GO TO QA13_I81]**
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 **[GO TO QA13_I81]**
 REFUSED-7 **[GO TO QA13_I81]**
 DON'T KNOW/NOT SURE-8 **[GO TO QA13_I81]**

QA13_I73 For how many of the last 12 months did {he/she} have health insurance?
在過去十二個月內，{he/she}有幾個月有醫療保險？

IA22

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

_____ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA13_I81]**

REFUSED-7
 DON'T KNOW-8

QA13_I74 During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
在{CHILD NAME/AGE/SEX}有醫療保險期間，{他的/她的}保險是
 Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你直接從保險
 公司購買的計劃、你透過Covered California購買的計劃還是其他計劃？

IA23

[CODE ALL THAT APPLY.][PROBE: "Any others?"]
[CODE ALL THAT APPLY.][PROBE: 「還有任何其他計劃嗎？」]

MEDI-CAL1 **[GO TO QA13_I81]**
 HEALTHY FAMILIES2 **[GO TO QA13_I81]**
 THROUGH CURRENT OR FORMER
 EMPLOYER/UNION3 **[GO TO QA13_I81]**
 HEALTHY KIDS4 **[GO TO QA13_I81]**
 PURCHASED DIRECTLY.....5 **[GO TO QA13_I81]**
 COVERED CALIFORNIA.....6 **[GO TO QA13_I81]**
 OTHER HEALTH PLAN..... 91 **[GO TO QA13_I81]**
 REFUSED-7 **[GO TO QA13_I81]**
 DON'T KNOW-8 **[GO TO QA13_I81]**

QA13_I75 Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?

請想一想{ } 目前參加的健康保險，{ } 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

YES1 **[GO TO QA13_I81]**
NO2
REFUSED-7
DON'T KNOW-8

QA13_I76 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{ } 目前的醫療保險計劃時，{他/她} 有沒有其它任何醫療保險？

IA25

YES1
NO2 **[GO TO QA13_I78]**
REFUSED-7 **[GO TO QA13_I78]**
DON'T KNOW-8 **[GO TO QA13_I78]**

QA13_I77 Was this other health insurance Medi-Cal, Healthy Families, a plan you obtained from an employer, or some other plan?

{他的/她的}其他醫療保險是Medi-CAL、Healthy Families、你透過雇
主獲得的計劃、你直接從保險公司購買的計劃、你透過Covered
California購買的計劃還是其他計劃？

IA26

[CODE ALL THAT APPLY.][PROBE: "Any others?"]
[CODE ALL THAT APPLY.][PROBE: 「還有任何其他計劃嗎？」]

MEDI-CAL1
HEALTHY FAMILIES2
THROUGH CURRENT OR FORMER
EMPLOYER/UNION3
HEALTHY KIDS4
OTHER HEALTH PLAN 91
REFUSED-7
DON'T KNOW-8

QA13_I78 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

YES1
NO2 **[GO TO QA13_I81]**
REFUSED-7 **[GO TO QA13_I81]**
DON'T KNOW-8 **[GO TO QA13_I81]**

QA13_I79 For how many of the past 12 months did {he/she} have no health insurance?
 在過去12個月中，{he/she}有幾個月沒有健康保險？

IA28

[IF < 1 MONTH, ENTER "1"]

_____ MONTHS [RANGE: 1-12]

REFUSED -7

DON'T KNOW -8

QA13_I80 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]

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

CAN'T AFFORD/TOO EXPENSIVE1

NOT ELIGIBLE DUE TO WORKING STATUS/

CHANGED EMPLOYER/LOST JOB2

NOT ELIGIBLE DUE TO HEALTH OR

OTHER PROBLEMS3

NOT ELIGIBLE DUE TO CITIZENSHIP/

IMMIGRATION STATUS4

FAMILY SITUATION CHANGED.....5

DON'T BELIEVE IN INSURANCE6

SWITCHED INSURANCE COMPANIES,

DELAY BETWEEN7

CAN GET HEALTH CARE FOR FREE/PAY

FOR OWN CARE.....8

OTHER (SPECIFY)..... 91

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_I81:

IF NOT ANSWERED IN SECTION H (AH103 = -1 AND KAH103 = -1), THEN CONTINUE;

[IF CHILD SELECTED]

IF CHINSURE ≠ 1 OR QA13_I31 = 2 OR QA13_I36 = 2 OR QA13_I38 = 1 OR QA13_I34 = (5, 6) OR QA13_I37 = (5, 6) OR CHHBEX = 1 OR CHDIRECT = 1; THEN CONTINUE WITH QA13_I81;

[IF TEEN SELECTED]

IF TEINSURE ≠ 1 OR QA13_I71 = 2 OR QA13_I76 = 2 OR QA13_I78 = 1 OR QA13_I74 = (5, 6) OR QA13_I77 = (5, 6) OR TEHBEX = 1 OR TEDIRECT = 1; THEN CONTINUE WITH QA13_I81;

ELSE GO TO PROGRAMMING NOTE QA13_I98

QA13_I81

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

在過去12個月中，你是否曾經嘗試直接從保險公司或HMO或透過 Covered California購買醫療保險計劃？

(CHIS 2014 ONLY)

AH103

YES	1	
NO	2	[GO TO PN QA13_I98]
REFUSED	-7	[GO TO PN QA13_I98]
DON'T KNOW	-8	[GO TO PN QA13_I98]

QA13_I82

Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?

這是直接從保險公司或HMO購買、還是透過 Covered California 購買、還是既從保險公司又透過 Covered California 購買的計劃？

(CHIS 2014 ONLY)

AH110

DIRECTLY FROM AN INSURANCE COMPANY		
OR HMO, OR	1	
THROUGH COVERED CALIFORNIA, OR	2	
BOTH, FROM AN INSURANCE COMPANY		
AND THROUGH COVERED CALIFORNIA.....	3	
REFUSED	-7	[GO TO PN QA13_I85]
DON'T KNOW	-8	[GO TO PN QA13_I85]

PROGRAMMING NOTE QA13_I83:**IF QA13_I82 = 1; THEN CONTINUE WITH QA13_I83;****IF QA13_I82 = 3; THEN CONTINUE WITH QA13_I83 AND DISPLAY “First, think about your experience trying to purchase insurance directly from an insurance company or HMO.”****ELSE GO TO PROGRAMMING NOTE QA13_I87;****QA13_I83** {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

{首先，請考慮你在嘗試直接從保險公司或HMO購買保險時的經歷。}

How difficult was it to find a plan 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.....

(CHIS 2014 ONLY)

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
DON'T KNOW	-8

QA13_I84 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.....

(CHIS 2014 ONLY)

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
DON'T KNOW	-8

QA13_I85 Did anyone help you find a health plan?

是否有人幫助你尋找醫療保險計劃？

(CHIS 2014 ONLY)

AH100

YES	1	
NO	2	[GO TO PN QA13_I87]
REFUSED	-7	[GO TO PN QA13_I87]
DON'T KNOW	-8	[GO TO PN QA13_I87]

QA13_I86 Who helped you?是誰幫助你的？
(CHIS 2014 ONLY)**AH101**

BROKER1
 FAMILY MEMBER/FRIEND2
 INTERNET3
 OTHER (SPECIFY: _____) 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I87:**IF QA13_I82 = 2; THEN CONTINUE WITH QA13_I87;****IF QA13_I82 = 3; THEN CONTINUE WITH QA13_I87 AND DISPLAY “Now, think about your experience with Covered California.”****ELSE GO TO PROGRAMMING NOTE QA13_I91;****QA13_I87** {Now, think about your experience with Covered California.}

現在，請想一想你與Covered California交往的經歷。

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

透過Covered California找到一項你需要的承保計劃難度有多大？是……
(CHIS 2014 ONLY)**AH111**

Very difficult,1
 非常困難、1
 Somewhat difficult,2
 較為困難、2
 Not too difficult, or3
 不太困難還是3
 Not at all difficult?4
 毫無困難？4
 REFUSED -7
 DON'T KNOW -8

QA13_I88 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難度有多大？是……
(CHIS 2014 ONLY)**AH112**

Very difficult,1
 非常困難、1
 Somewhat difficult,2
 較為困難、2
 Not too difficult, or3
 不太困難還是3
 Not at all difficult?4
 毫無困難？4
 REFUSED -7
 DON'T KNOW -8

QA13_I89 Did anyone help you find a health plan?

是否有人幫助你找到一項保健計劃？
(CHIS 2014 ONLY)

AH113

YES	1	
NO	2	[GO TO QA13_I91]
REFUSED	-7	[GO TO QA13_I91]
DON'T KNOW	-8	[GO TO QA13_I91]

QA13_I90 Who helped you?

是誰幫助你的？
(CHIS 2014 ONLY)

AH114

BROKER	1
FAMILY MEMBER / FRIEND	2
INTERNET	3
CERTIFIED INSURANCE AGENTS	4
OTHER (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

QA13_I91 Did you have all the information you felt you needed to make a good decision on a health plan?

你是否有你認為幫助作出有關保健計劃的良好決定所需的所有資訊？
(CHIS 2014 ONLY)

AH115

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

PROGRAMMING NOTE QA13_I92:

**IF QA13_G6 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QA13_I92;
ELSE GO TO QA13_I93;**

QA13_I92 Were you able to get information about your health plan options in your language?

你是否能夠用你自己的語言獲得有關你的保健計劃選擇的資訊？
(CHIS 2014 ONLY)

AH116

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

QA13_I93 Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?

你選擇的計劃費用在你選擇計劃時是非常重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH117

VERY IMPORTANT	1
SOMEWHAT IMPORTANT	2
NOT IMPORTANT	3
REFUSED	-7
DON'T KNOW	-8

QA13_I94 Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?

從某一位特定的醫生處接受護理服務在你選擇計劃時是十分重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH118

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

QA13_I95 Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?

從某一家特定的醫院接受護理服務在你選擇計劃時是十分重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH119

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

QA13_I96 Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?

計劃網路內的醫生選擇在你選擇計劃時是非常重要、較為重要還是不重要？
(CHIS 2014 ONLY)

AH120

VERY IMPORTANT1
SOMEWHAT IMPORTANT2
NOT IMPORTANT3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_I97:

IF QA13_I9 = 1 OR QA13_I50 = 1, THEN DISPLAY "Bronze"
 ELSE IF QA13_I9 = 2 OR QA13_I50 = 2, THEN DISPLAY "Silver"
 ELSE IF QA13_I9 = 3 OR QA13_I50 = 3, THEN DISPLAY "Gold"
 ELSE IF QA13_I9 = 4 OR QA13_I50 = 4, THEN DISPLAY "Platinum"
 ELSE DISPLAY " ";

QA13_I97

Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/ } plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?

最後，你選擇{白金}計劃的#最\重要的一個原因是什??是費用、你可以從某一位特定的醫生處接受護理服務、你可以在某一家醫院就診、你的計劃網路內的服務提供者選擇、還是其他一些原因?

(CHIS 2014 ONLY)

AH121

COST1
 SPECIFIC DOCTOR2
 SPECIFIC HOSPITAL.....3
 CHOICE OF DOCTORS IN NETWORK.....4
 OTHER (SPECIFY:.....)..... 91
 REFUSED -7
 DON'T KNOW -8

Country of Birth (Parents)**PROGRAMMING NOTE QA13_I98:****IF QA13_A5 = 1 (R IS MALE), DISPLAY “mother”;****IF QA13_A5 = 2 (R IS FEMALE), DISPLAY “father”;**

QA13_I98 In what country was (TEEN)'s {mother/father} born?
 {ADOLESCENT/AGE/SEX}的母親是在哪個國家出生的?

AI56**[FOR CHILDREN 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	-7
DON'T KNOW	-8

Citizenship and Immigration (Parents)**PROGRAMMING NOTE QA13_I99:**

IF QA13_I98 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), SKIP TO NEXT SECTION;
ELSE CONTINUE WITH QA13_I99;

IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";

IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father"

QA13_I99 Does (TEEN)'s {mother/father} now live in the U.S.?
{TEEN}的母親目前住在美國嗎?

AI57

YES1
NO2
MOTHER/FATHER DECEASED3
MOTHER/FATHER NEVER LIVED IN US4
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_I100:

IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";

IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father";

IF QA13_I99 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";

ELSE DISPLAY "Is"

QA13_I100 {Is/Was} (TEEN)'s {mother/father} a citizen of the United States?
{TEEN /AGE/SEX} 的母親是美國公民嗎?

AI58

[IF R SAYS HE/SHE IS A NATURALIZED CITIZEN, CODE YES]

YES1 **[GO TO PN QA13_I102]**
NO2
APPLICATION PENDING3
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_I101:

IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
 IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father";
 IF QA13_I99 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";
 ELSE DISPLAY "Is"

QA13_I101 {Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?
 {ADOLESCENT/AGE/SEX} 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。"]

YES1
 NO2
 APPLICATION PENDING3
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_I102:

IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
 IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father"

QA13_I102 About how many years has (TEEN)'s {mother/father} lived in the United States?
 {ADOLESCENT/AGE/SEX} 的母親在美國已居住大約多少年?

AI60

[IF < 1 YEAR, ENTER "1"]

_____ NUMBER OF YEARS
 _____ YEAR FIRST CAME AND LIVE IN U.S.

MOTHER/FATHER DECEASED3
 MOTHER/FATHER NEVER LIVED IN US4
 REFUSED -7
 DON'T KNOW -8

Section J – Health Care Utilization and Access

Visits to medical doctor

PROGRAMMING NOTE QA13_J1:

IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY “Now, I’d like to ask about the health care YOU receive”;

ELSE BEGIN QUESTION WITH “During the past 12 months, how many times have you seen a medical doctor”

QA13_J1 {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?}

現在，我想提出幾個有關您所接受的健康護理的問題。在過去 12 個月中，您看過幾次醫生？

AH5

_____ TIMES

[HR: 0-365]

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_J2:

IF QA13_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH QA13_J2;

ELSE GO TO PROGRAMMING NOTE QA13_J3

QA13_J2 About how long has it been since you last saw a doctor about your own health?

自從您上次就自身的健康狀況去看醫生以來到現在已經有多長時間？

AH6

ONE YEAR AGO OR LESS0

MORE THAN 1 UP TO 2 YEARS AGO1

MORE THAN 2 UP TO 5 YEARS AGO2

MORE THAN 5 YEARS AGO3

NEVER4

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_J3:

**IF QA13_J2 = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO PROGRAMMING NOTE QA13_J4;
ELSE CONTINUE WITH QA13_J3**

QA13_J3 About how long has it been since you last saw a doctor or medical provider for a routine check-up?

自從你上次接受醫生或其他醫療提供者的#常規體檢\以來大約有多長時間了？

[IF NEEDED: A routine check-up is a visit not for an illness or problem. This visit may include questions about health behaviors such as smoking.]

[IF NEEDED, SAY: 「常規體檢指並非因生病或病症而接受的門診檢查。該常規體檢可能包括有關健康行為（例如抽煙）的問題。」]

AJ114

ONE YEAR AGO OR LESS.....0
MORE THAN 1 UP TO 2 YEARS AGO1
MORE THAN 2 UP TO 5 YEARS AGO2
MORE THAN 5 YEARS AGO3
NEVER.....4
REFUSED -7
DON'T KNOW -8

Personal Doctor**PROGRAMMING NOTE QA13_J4:**

**IF QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J4;
ELSE GO TO PROGRAMMING NOTE QA13_J5**

QA13_J4 Do you have a personal doctor or medical provider who is your main provider?

您是否有一位作為您的主要服務提供者的個人醫生或醫療服務提供者？

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: "可以是全科醫生、專科醫生、醫生助理、護士或其他健康服務提供者。"]

YES1
NO2
REFUSED -7
DON'T KNOW -8

Patient-Centered Care**PROGRAMMING NOTE QA13_J5:**

**IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR) OR [QA13_J1 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QA13_J2 = 0 (SAW DOCTOR LESS THAN A YEAR AGO)], THEN CONTINUE WITH QA13_J5;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J7**

QA13_J5 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，您是否曾經打電話或發電子郵件給醫生診所，提出醫療方面的問題？

AJ78

YES1
NO2 **[GO TO QA13_J7]**
REFUSED -7 **[GO TO QA13_J7]**
DON'T KNOW -8 **[GO TO QA13_J7]**

QA13_J6 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覆的頻率有多高？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 QA13_J7:
IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QA13_J7;
ELSE GO TO PROGRAMMING NOTE QA13_J9

QA13_J7 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

QA13_J8 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

Timely Appointments

PROGRAMMING NOTE QA13_J9:

IF ARINSURE = 1 OR AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J9;

ELSE GO TO PROGRAMMING NOTE QA13_J11;

IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY “your”;

ELSE DISPLAY “a”;

QA13_J9 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	
NO	2	[GO TO QA13_J11]
REFUSED	-7	[GO TO QA13_J11]
DON'T KNOW	-8	[GO TO QA13_J11]

QA13_J10 How often were you able to get an appointment within two days? Would you say...
 能夠在兩天內為你安排就診的頻率有多高？你認為是.....

AJ103

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

Care Coordination**PROGRAMMING NOTE FOR QA13_J11:**

IF QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND QA13_J4 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [(QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)) OR QA13_B18 = 1 (HAS DIABETES) OR QA13_B37 = 1 (HAS HEART DISEASE)] CONTINUE WITH QA13_J11;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J12

QA13_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?

在您的醫生辦公室或診所內是否有人幫助協調其他醫生對您的護理或服務，例如測試或治療？

AJ80

YES1
NO2
REFUSED -7
DON'T KNOW -8

Communication Problems with a Doctor**PROGRAMMING NOTE QA13_J12:**

IF QA13_J1 > 0 OR QA13_J2 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO),
CONTINUE WITH QA13_J12;
ELSE GO TO PROGRAMMING NOTE QA13_J17

QA13_J12 The last time you saw a doctor, did you have a hard time understanding the doctor?
您上次看醫生時，是否很難聽懂醫生說的話？

AJ8

YES1 [GO TO PN QA13_J14]
NO2
REFUSED -7 [GO TO QA13_J17]
DON'T KNOW -8 [GO TO QA13_J17]

PROGRAMMING NOTE QA13_J13:

IF QA13_J12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA13_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)],
CONTINUE WITH QA13_J13;
ELSE SKIP TO PROGRAMMING NOTE QA13_J17

QA13_J13 In what language did the doctor speak to you?
你的醫生用哪一種語言與你交談？

AJ50

ENGLISH1 [GO TO QA13_J15]
SPANISH2 [GO TO PN QA13_J17]
CANTONESE3 [GO TO PN QA13_J17]
VIETNAMESE4 [GO TO PN QA13_J17]
TAGALOG5 [GO TO PN QA13_J17]
MANDARIN6 [GO TO PN QA13_J17]
KOREAN7 [GO TO PN QA13_J17]
ASIAN INDIAN LANGUAGES8 [GO TO PN QA13_J17]
RUSSIAN9 [GO TO PN QA13_J17]
OTHER (SPECIFY: _____) 91 [GO TO PN QA13_J17]
REFUSED -7 [GO TO PN QA13_J17]
DON'T KNOW -8 [GO TO PN QA13_J17]

QA13_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?

AJ9

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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?

AJ10

YES1
NO2
REFUSED-7
DON'T KNOW-8

[GO TO PN QA13_J17]

[GO TO PN QA13_J17]

[GO TO PN QA13_J17]

QA13_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 MINE2
NON-MEDICAL OFFICE STAFF3
MEDICAL STAFF INCLUDING
NURSES/DOCTORS4
PROFESSIONAL INTERPRETER (BOTH IN
PERSON AND ON THE TELEPHONE)5
OTHER (PATIENTS, SOMEONE ELSE)6
DID NOT HAVE SOMEONE TO HELP7
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_J17:

**IF QA13_G7 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH QA13_J17;
ELSE GO TO PROGRAMMING NOTE QA13_J18**

QA13_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。你在今天之前是否知道這項服務？

AJ105

YES1
NO2
REFUSED-7
DON'T KNOW-8

Change of Usual Source of Care**PROGRAMMING NOTE QA13_J18:**

**IF [ARINSURE = 1 OR QA13_H80 = 1 (HAD INSURANCE AT LEAST 1 MONTH DURING THE PAST 12 MONTHS)] AND QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J18;
ELSE GO TO QA13_J20**

QA13_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 QA13_J20]
REFUSED	-7	[GO TO QA13_J20]
DON'T KNOW	-8	[GO TO QA13_J20]

QA13_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

Delays in Care

QA13_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，您有沒有延遲或沒有去拿醫生為您開的藥？

AH16

YES	1	
NO	2	[GO TO QA13_J25]
REFUSED	-7	[GO TO QA13_J25]
DON'T KNOW	-8	[GO TO QA13_J25]

QA13_J21 Was cost or lack of insurance a reason why you delayed or did not get the prescription?
缺少醫療費用或沒有保險是不是您延遲或沒有領取處方藥物的一個原因？

AJ19

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

PROGRAMMING NOTE FOR QA13_J22:

**IF [QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)) AND QA13_J21= 1 (COST/LACK OF INSURANCE REASON FOR DELAY)] CONTINUE WITH QA13_J22;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J23**

QA13_J22 Was this prescription for your asthma?
這是不是治療您的哮喘的處方藥？

AJ81

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE FOR QA13_J23:

**IF QA13_B18 = 1 (HAS DIABETES) AND QA13_J21= 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J23;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J24**

QA13_J23 Was this prescription for your diabetes?
這是不是治療您的糖尿病的處方藥？

AJ82

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE FOR QA13_J24:

**IF QA13_B37 = 1 (HAS HEART DISEASE) AND QA13_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J24;
ELSE GO TO QA13_J25**

QA13_J24 Was this prescription for your heart disease?
這是不是治療您的心臟病的處方藥？

AJ83

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_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?
在過去十二個月中，您有沒有延遲或沒有接受任何您認為必要的
醫療護理 — 例如看醫生、專科醫生或其他健康護理專業人員？

AH22

YES1
NO2 [GO TO QA13_J33]
REFUSED-7 [GO TO QA13_J33]
DON'T KNOW-8 [GO TO QA13_J33]

QA13_J26 Did you get the care eventually?
你最終接受了護理嗎？

AJ129

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_J27 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？

AJ20

YES1
NO2 [GO TO QA13_J29]
REFUSED-7 [GO TO QA13_J29]
DON'T KNOW-8 [GO TO QA13_J29]

QA13_J28 Was that the main reason?
這是主要原因嗎？

AJ130

YES1 [GO TO PN QA13_J30]
NO2
REFUSED-7 [GO TO PN QA13_J30]
DON'T KNOW-8 [GO TO PN QA13_J30]

QA13_J29 What was the one main reason why you delayed getting the care you felt you needed?
你延遲接受你認為自己需要的護理的一個最主要原因是什？

AJ131

COULDN'T GET APPOINTMENT1
MY INSURANCE NOT ACCEPTED2
INSURANCE DID NOT COVER3
LANGUAGE PROBLEMS4
TRANSPORTATION PROBLEMS5
HOURS NOT CONVENIENT6
NO CHILD CARE FOR CHILDREN AT HOME7
FORGOT OR LOST REFERRAL8
I DIDN'T HAVE TIME9
COULDN'T AFFORD/COST TOO MUCH 10
NO INSURANCE 11
OTHER (SPECIFY _____) 91
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_J30:

**IF [QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)] AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J30;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J31**

QA13_J30 Was this medical care for your asthma?
這是不是為您的哮喘提供的醫療護理？

AJ84

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_J31:

**IF QA13_B18 = 1 (HAS DIABETES) AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J31;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J32**

QA13_J31 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

YES1
NO2
REFUSED-7
DON'T KNOW-8

PROGRAMMING NOTE QA13_J32:

**IF QA13_B37 = 1 (HAS HEART DISEASE) AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J32;
ELSE GO TO QA13_J33**

QA13_J32 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

YES1
NO2
REFUSED-7
DON'T KNOW-8

QA13_J33 The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.

接下來是有關專科醫生的問題。專科醫生是指外科醫生、心臟病醫生、過敏醫生、皮膚科醫生和其他針對某個健康護理領域的專科醫生。

In the past 12 months, did you or a doctor think you needed to see a medical specialist?
在過去十二個月中，你或醫生是否曾認為你應當去看專科醫生？

[IF NEEDED, SAY: "Do not include dental visits."]

[IF NEEDED, SAY: 「請不要包括牙科門診。」]

AJ136

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_J34:

**IF QA13_J33 = 1 (NEEDED A MEDICAL SPECIALIST) CONTINUE WITH QA13_J34;
ELSE GO TO QA13_J37**

QA13_J34 During the past 12 months, did you have any trouble finding a medical specialist who would see you?

在過去十二個月中，你是否有任何困難找到一位能夠為你看病的專科醫生？

AJ137

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_J35 During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?

在過去十二個月中，是否有專科醫生診所告訴你他們不願接受你作為他們的新病人？

AJ138

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_J36:

**IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA13_J36;
ELSE SKIP TO QA13_J37**

QA13_J36 During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?

在過去十二個月中，是否有專科醫生辦公室告訴你他們不接受你的主要健康保險？

AJ139

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_J37 Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?

現在是有關全科醫生的問題。在過去十二個月中，你是否有任何困難尋找一位為你看病的全科醫生？

AJ133

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_J38 During the past 12 months, did a doctor's office tell you that they would not take you as a new patient?

在過去十二個月中，是否有醫生診所告訴你他們不願接受你作為他們的新病人？

AJ134

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_J39:

**IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA13_J39;
ELSE SKIP TO QA13_J40**

QA13_J39 During the past 12 months, did a doctor's office tell you that they would not take your main health insurance?

在過去十二個月中，是否有醫生診所告訴你他們不願接受你的主要醫療保險？

AJ135

YES1
NO2
REFUSED -7
DON'T KNOW -8

End of Life Care

PROGRAMMING NOTE QA13_J40:

**IF AGE >49 AND SONOMA COUNTY RESIDENT CONTINUE WITH QA13_J40;
ELSE SKIP TO QA13_J41**

QA13_J40 Do you currently have something in writing that states your wishes regarding end-of-life medical care?
你目前是否有任何陳述你的臨終醫療護理願望的文件？

AJ151

[INTERVIEWER NOTE: IF R MENTIONS “advance health care directive” or “ power of attorney for health care” THEN CODE “Yes”]

YES1
NO2
REFUSED -7
DON'T KNOW -8

Internet Use

QA13_J41 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.]

YES1
NO2 [GO TO QA13_J44]
REFUSED -7 [GO TO QA13_J44]
DON'T KNOW -8 [GO TO QA13_J44]

QA13_J42 How confident are you that you can fill out an application on-line on your own? Would you say you are...
你對自己在網上填寫申請的信心有多高？你認為是.....

AJ110

Very confident,1 [GO TO PN QA13_J45]
很有信心、1
Somewhat confident,2 [GO TO PN QA13_J45]
較有信心、2
Not too confident, or,3
不太有信心還是3
Not at all confident?,4
毫無信心？4
REFUSED -7
DON'T KNOW -8

QA13_J43 If you wanted to fill out an application on-line, is there someone who could help you with it?
 如果你想在網上填寫申請，是否有人能幫助你？

AJ111

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

Family Planning

PROGRAMMING NOTE QA13_J44:
IF QA13_A5 = 1 (MALE) OR AGE >44 YEARS OLD THEN GO TO PN QA13_J48;
ELSE CONTINUE WITH QA13_J44;

QA13_J44 During the past 12 months, have you received counseling or information about birth control from a doctor or medical provider?
 在過去十二個月中，#你\是否曾接受過醫生或醫療提供者有關避孕的諮詢或資訊？

AJ140

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_J45 During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor or medical provider?
 在過去十二個月中，#你\是否曾接受過醫生或醫療提供者建議的避孕方法或開出的避孕處方藥？

AJ141

[INTERVIEWER NOTE: CODE 'YES' IF R MENTIONS VASECTOMY OF PARTNER]

YES1
 NO2 **[GO TO QA13_J51]**
 REFUSED -7 **[GO TO QA13_J51]**
 DON'T KNOW -8 **[GO TO QA13_J51]**

QA13_J46What MAIN birth control method or prescription did you receive?

你曾接受過哪一種#主要的\避孕方法或領取過哪一種處方藥？

AJ142**[INTERVIEWER NOTE: If more than one method ask: "Which method did you receive most recently?"]****[IF MORE THAN ONE METHOD, ASK: 「你最近接受的是哪一種方法？」]****If two methods were received at the same time, mark the one that appears first on the list below.**

TUBAL LIGATION (TUBES TIED OR CUT)1
 VASECTOMY (MALE STERILIZATION)2
 IUD (MIRENA, PARAGARD)3
 IMPLANT (IMPLANON, NEXPLANON)4
 BIRTH CONTROL PILLS.....5
 OTHER HORMONAL METHODS
 (INJECTION/DEPO-PROVERA, PATCH,
 VAGINAL RING/NUVA RING)6
 CONDOMS (MALE)7
 OTHER (SPECIFY:.....)8
 REFUSED -7
 DON'T KNOW -8

QA13_J47

Where did you receive the main birth control method or prescription?

你是從哪裡接受主要避孕方法或領取處方藥的？

AJ143

PRIVATE DOCTOR'S OFFICE.....1
 HMO FACILITY2
 HOSPITAL OR HOSPITAL CLINIC3
 PLANNED PARENTHOOD.....4
 COUNTY HEALTH DEPARTMENT, FAMILY
 PLANNING CLINIC, COMMUNITY CLINIC.....5
 SCHOOL OR SCHOOL-BASED CLINIC6
 EMPLOYER OR COMPANY CLINIC.....7
 INDIAN HEALTH SERVICE8
 PHARMACY9
 SOME OTHER PLACE (SPECIFY:.....) .. 91
 REFUSED -7
 DON'T KNOW -8

PROGRAMMING NOTE QA13_J48:
IF AGE >44 YEARS OLD OR AA3=2 (FEMALE) THEN GO TO QA13_J51;
ELSE CONTINUE WITH QA13_J48;

QA13_J48 During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?
 在過去十二個月中，你是否曾接受過醫生或醫療提供者有關男性或女性避孕的諮詢或資訊？

AJ144

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

QA13_J49 During the past 12 months, have you received a male birth control method such as a condoms or vasectomy from a doctor or medical provider?
 在過去十二個月中，你是否曾接受醫生或醫療提供者有關男性的避孕方法的建議，例如避孕套或輸精管切除術？

AJ145

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

[GO TO QA13_J51]
 [GO TO QA13_J51]
 [GO TO QA13_J51]

QA13_J50 Where did you receive it?
 你是在哪裡接受的？

AJ146

PRIVATE DOCTOR'S OFFICE1
 HMO FACILITY2
 HOSPITAL OR HOSPITAL CLINIC3
 PLANNED PARENTHOOD4
 COUNTY HEALTH DEPARTMENT, FAMILY
 PLANNING CLINIC, COMMUNITY CLINIC5
 SCHOOL OR SCHOOL-BASED CLINIC6
 EMPLOYER OR COMPANY CLINIC7
 INDIAN HEALTH SERVICE8
 PHARMACY9
 SOME OTHER PLACE (SPECIFY: _____) .. 91
 REFUSED -7
 DON'T KNOW -8

Dental Health**QA13_J51** These next questions are about dental health.

以下是有關牙科健康的幾個問題。

About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.

自從你上次看牙醫或前往牙科診所就診以來到現在已經有多長時間？請包括牙科保健員以及各類專科牙醫。

AG1

HAVE NEVER VISIT 1
 6 MONTHS AGO OR LESS 2
 MORE THAN 6 MONTHS UP TO 1 YEAR AGO 3
 MORE THAN 1 YEAR UP TO 2 YEARS AGO 4
 MORE THAN 2 YEARS UP TO 5 YEARS AGO 5
 MORE THAN 5 YEARS AGO 6
 REFUSED -7
 DON'T KNOW -8

QA13_J52 Do you now have any type of insurance that pays for part or all of your dental care?

您目前是否有任何類型的保險可以支付牙科護理的部份或全部費用？

AG3

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

PROGRAMMING NOTE QA13_J53:
IF NO TEEN SELECTED, GO TO Section K;
ELSE CONTINUE WITH QA13_J53

QA13_J53 Do you now have any type of insurance that pays for part or all of (TEEN) dental care?

您目前是否有任何類型的保險可以支付{} 的部份或全部牙科護理費用？

MA10

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

Section K – Employment, Income, Poverty Status, Food Security

Hours Worked

PROGRAMMING NOTE QA13_K1:

IF QA13_G26 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUSINESS BUT NOT AT WORK) OR QA13_G28 = 1 (R USUALLY WORKS) CONTINUE WITH QA13_K1;
ELSE GO TO PROGRAMMING NOTE QA13_K5

QA13_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

QA13_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

Income Last Month

PROGRAMMING NOTE QA13_K4:

**IF QA13_G26 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA13_G28 = 1 (USUALLY WORKS), CONTINUE WITH QA13_K4;
ELSE SKIP TO PROGRAMMING NOTE QA13_K5**

QA13_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，
稅前和其它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 QA13_K5:

IF QA13_G31 = [1 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA13_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), CONTINUE WITH QA13_K5 AND:

IF QA13_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA13_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND QA13_A16 = 1 (MARRIED), DISPLAY "The next question is about your spouse's employment."

ELSE IF QA13_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA13_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND (QA13_D16 = 1 OR QA13_D17 = 1), THEN DISPLAY "The next question is about your partner's employment."

IF QA13_A16 = 1 THEN DISPLAY "spouse";

ELSE IF QA13_D16 = 1 OR QA13_D17 = 1 THEN DISPLAY "partner";

ELSE SKIP TO QA13_K7

QA13_K5 {The next question is about your spouse's employment.}

How many hours per week does your {husband/wife/spouse} usually work at all jobs or businesses?

您的{配偶}在從事的所有的工作或業務中每週通常工作多少小時？

AK20

[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 QA13_K6:**IF QA13_K5 \neq 0 CONTINUE WITH QA13_K6;****IF QA13_QA13_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";****ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner's";****ELSE GO TO QA13_K7****QA13_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它扣除額之前的收入，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

Annual Household Income

QA13_K7 What is your best estimate of your household's total annual income from all sources before taxes in 2012/2013?

你的2012/2013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、社會安全、退休收入、失業補助金、公共援助等收入。另外還請包括利息、紅利、業務、農場或租金淨收入以及任何其他資金收入。」]

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$_____ AMOUNT [HR: 0-999995]

REFUSED -7 **[GO TO PN QA13_K9]**

DON'T KNOW -8 **[GO TO PN QA13_K9]**

QA13_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\${999,999}。這是否正確？

AK22A

YES1 **[GO TO PN QA13_K15]**

NO2 **[GO BACK TO QA13_K7]**

PROGRAMMING NOTE QA13_K9:

IF QA13_K7 = -7 OR -8 CONTINUE WITH QA13_K9;

ELSE GO TO PROGRAMMING NOTE QA13_K15

QA13_K9 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？

AK11

MORE1 **[GO TO QA13_K11]**

EQUAL TO \$20K OR LESS2

REFUSED -7 **[GO TO PN QA13_K15]**

DON'T KNOW -8 **[GO TO PN QA13_K15]**

QA13_K10 Is it ...
是.....

AK12

\$5,000 or less,.....	1	[GO TO PN QA13_K15]
\$5,000 或以下，或	1	
\$5,001 to \$10,000,	2	[GO TO PN QA13_K15]
\$5,001 到 \$10,000，或	2	
\$10,001 to \$15,000, or	3	[GO TO PN QA13_K15]
\$10,001 到 \$15,000，或	3	
\$15,001 to 20,000?	4	[GO TO PN QA13_K15]
\$15,001 到 \$20,000?	4	
REFUSED	-7	[GO TO PN QA13_K15]
DON'T KNOW	-8	[GO TO PN QA13_K15]

QA13_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？

AK13

MORE	1	[GO TO QA13_K13]
EQUAL TO \$70K OR LESS.....	2	
REFUSED	-7	[GO TO PN QA13_K15]
DON'T KNOW	-8	[GO TO PN QA13_K15]

QA13_K12 Is it ...
是.....

AK14

\$20,001 to \$30,000,	1	[GO TO PN QA13_K15]
\$20,001 到 \$30,000,	1	
\$30,001 to \$40,000,	2	[GO TO PN QA13_K15]
\$30,001 到 \$40,000,	2	
\$40,001 to \$50,000,	3	[GO TO PN QA13_K15]
\$40,001 到 \$50,000,	3	
\$50,001 to \$60,000, or	4	[GO TO PN QA13_K15]
\$50,001 到 \$60,000, 或	4	
\$60,001 to \$70,000?	5	[GO TO PN QA13_K15]
\$60,001 到 \$70,000?	5	
REFUSED	-7	[GO TO PN QA13_K15]
DON'T KNOW	-8	[GO TO PN QA13_K15]

QA13_K13 Is it more or less than \$135,000 per year?
收入每年是否超過還是不足 135,000美元？

AK15

MORE	1	[GO TO PN QA13_K15]
EQUAL TO \$135K OR LESS.....	2	
REFUSED	-7	[GO TO PN QA13_K15]
DON'T KNOW	-8	[GO TO PN QA31_K15]

QA13_K14 Is it ...
是.....

AK16

\$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, or3
\$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

Number of Persons Supported

PROGRAMMING NOTE QA13_K15:
IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QA13_K16;
ELSE CONTINUE WITH QA13_K15

QA13_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？

AK17

_____ NUMBER OF PEOPLE [HR: 1-20]

REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_K16:
QA13_K16 MUST BE LESS THAN QA13_K15;
IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR
TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) =
QA13_K15 GO TO PROGRAMMING NOTE QA13_19;
ELSE CONTINUE WITH QA13_K16

QA13_K16 How many of these {INSERT NUMBER FROM QA13_K15} people are children under the age of 18?
在這{插入 K17 的答案} 口人中，有多少是 18 歲以下的孩子？

AK18

_____ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

REFUSED -7
DON'T KNOW -8

QA13_K17 Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?

是否有住在美國、但目前不住在你們家中、依靠你們的家庭收入生活的任何其他人士？

AK32

YES1

NO2

REFUSED-7

DON'T KNOW-8

[GO TO PN QA13_K19]

[GO TO PN QA13_K19]

[GO TO PN QA13_K19]

QA13_K18 How many?
有幾個人？

AK33

_____ NUMBER OF PEOPLE [HR: 1-20]

REFUSED-7

DON'T KNOW-8

Poverty Level Test**PROGRAMMING NOTE QA13_K19:**

OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2011 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA13_K15 AND QA13_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% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT100, THE 133% VALUE IN CATI VARIABLE POVRT133, THE 200% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT200, THE 300% VALUE IN CATI VARIABLE POVRT300, AND THE 400% VALUE IN CATI VARIABLE POVRT400.)

IF EITHER QA13_K15 OR QA13_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 QA13_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 QA13_K7 ≠ -7 OR -8 THEN GO TO PROGRAMMING NOTE QA13_K25;

ELSE IF QA13_K7 = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, ASK QA13_K19 USING POVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT);

ELSE IF QA13_K7 = -7 OR -8 (REF/DK) AND IF QA13_K9 = -7 OR QA13_K11 = -7 OR QA13_K13 = -7, GO TO PROGRAMMING NOTE QA13_K25

ELSE GO TO PROGRAMMING NOTE QA13_K20

QA13_K19 I need to ask just one more question about income.
我想再問您一、兩個收入方面的問題。

Was your total annual household income before taxes less than or more than \${POVRT50}?
您的家庭年度稅前總收入是不足還是超過{X,X}美元?

AK29

EQUAL TO OR LESS	1	[GO TO PN QA13_K25]
MORE	2	[GO TO PN QA13_K25]
REFUSED	-7	[GO TO PN QA13_K25]
DON'T KNOW	-8	[GO TO PN QA13_K25]

PROGRAMMING NOTE QA13_K20:

IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, THEN CONTINUE WITH QA13_K20 USING POVRT100 (100% POVERTY CUTOFF DISPLAY AMOUNT);

ELSE GO TO PROGRAMMING NOTE QA13_K21

QA13_K20 I need to ask just one or two more questions about income.
我想再問您一、兩個收入方面的問題。

Was your total annual household income before taxes less than or more than \${POVRT100}?
您的家庭年度稅前總收入是不足還是超過{XX,XXX}美元?

AK18A

EQUAL TO OR LESS	1	[GO TO PN QA13_K25]
MORE	2	
REFUSED	-7	[GO TO PN QA13_K25]
DON'T KNOW	-8	[GO TO PN QA13_K25]

PROGRAMMING NOTE QA13_K21:

IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, THEN CONTINUE WITH QA13_K21 USING POVRT133 (133% POVERTY CUTOFF DISPLAY AMOUNT);

IF QA13_K20 WAS NOT ASKED, DISPLAY "I need to ask just one more question about income.";

ELSE DISPLAY "Was it";

ELSE GO TO PROGRAMMING NOTE QA13_K22

QA13_K21 {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}?
是低於還是超過{XX,XXX}美元?

AK30

EQUAL TO OR LESS	1	[GO TO PN QA13_K25]
MORE	2	[GO TO PN QA13_K25]
REFUSED	-7	[GO TO PN QA13_K25]
DON'T KNOW	-8	[GO TO PN QA13_K25]

PROGRAMMING NOTE QA13_K22:

IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, CONTINUE WITH QA13_K22 USING POVRT200 (200% POVERTY CUTOFF DISPLAY AMOUNT);

ELSE GO TO PROGRAMMING NOTE QA13_K23

QA13_K22 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT200}?
是不足還是超過 {XX,XXX} 美元?

AK18B

EQUAL TO OR LESS	1	[GO TO PN QA13_K25]
MORE	2	[GO TO PN QA13_K25]
REFUSED	-7	[GO TO PN QA13_K25]
DON'T KNOW	-8	[GO TO PN QA13_K25]

PROGRAMMING NOTE QA13_K23:
IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, CONTINUE WITH QA13_K23 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K24

QA13_K23 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT300}?
 是不足還是超過 {XX,XXX} 美元?

AK18C

EQUAL TO OR LESS	1	[GO TO PN QA13_K25]
MORE	2	[GO TO PN QA13_K25]
REFUSED	-7	[GO TO PN QA13_K25]
DON'T KNOW	-8	[GO TO PN QA13_K25]

PROGRAMMING NOTE QA13_K24:
IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, THEN CONTINUE WITH QA13_K24 USING POVRT400 (400% POVERTY CUTOFF DISPLAY AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K25

QA13_K24 I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT400}?
 是不足還是超過 {XX,XXX} 美元?

AK31

EQUAL TO OR LESS	1
MORE	2
REFUSED	-7
DON'T KNOW	-8

Availability of Food in Household**PROGRAMMING NOTE QA13_K25:**

**IF POVERTY < 5 (HH Income ≤ 200% FPL) OR 8 (HH INCOME NOT KNOWN), CONTINUE WITH QA13_K25;
ELSE GO TO QA13_L1**

QA13_K25

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:

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况。

AM1

"The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."

第一句話是：「{ } 購買的食物總是不夠，{ } 沒有錢買更多的食物。」

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

這是經常符合、有時符合還是從不符合您和您的家庭在過去十二個月的情况？

OFTEN TRUE	1
SOMETIMES TRUE	2
NEVER TRUE	3
REFUSED	-7
DON'T KNOW	-8

QA13_K26

The second statement is:

"{I/We} couldn't afford to eat balanced meals."

第二個句子是：「{我/我們} 無法負擔營養均衡的飲食。」

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

這句話對您和您的家人在過去 12 個月的情况，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

QA13_K27

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 QA13_K29]
REFUSED	-7	[GO TO QA13_K29]
DON'T KNOW	-8	[GO TO QA13_K29]

QA13_K28

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

Hunger**QA13_K29**

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

QA13_K30

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 \leq 300% FPL (POVERTY = <6) OR IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) CONTINUE WITH SECTION L;
ELSE GO TO QA13_M1

TANF/CalWORKs

QA13_L1 Are you now receiving TANF or CalWORKs?
您目前正在接受TANF或CalWORKs嗎?

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: "TANF代表「貧困家庭臨時協助」；CalWORKs代表「加州工作機會及對孩子的責任」。這兩項計劃用於替代加州原來的福利計劃AFDC。"]

YES1
NO2
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_L2:

IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH QA13_L2;
ELSE GO TO QA13_L3;

QA13_L2 Is (TEEN) now receiving TANF or CalWORKs?
{ 目前是否在領取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: 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。這兩項計劃代替了加州舊的福利權力計劃AFDC。]

YES1
NO2
REFUSED -7
DON'T KNOW -8

Food Stamps

QA13_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。

AL5

[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」。]

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE QA13_L4:
IF ELIGIBLE TEEN IN HOUSEHOLD, CONTINUE WITH QA13_L4;
ELSE GO TO QA13_L5

QA13_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」。]

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

Supplemental Security Income

QA13_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，這和社會安全金不同。」]

YES1
 NO2
 REFUSED-7
 DON'T KNOW-8

WIC**PROGRAMMING NOTE QA13_L6:**

**IF QA13_A5 = 2 (FEMALE) AND [QA13_E1 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)]
CONTINUE WITH QA13_L6;
ELSE GO TO PROGRAMMING NOTE QA13_L7**

QA13_L6

Are you on WIC?

{ } 目前是否參加了WIC?

AL7

[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and children."]

[IF NEEDED, SAY: 「WIC指為婦女、嬰兒和兒童提供的補助食品計畫。」]

YES1

NO2

REFUSED -7

DON'T KNOW -8

Assets**PROGRAMMING NOTE QA13_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 QA13_K15.

IF QA13_K15 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT).

IF QA13_K15 = 1 DISPLAY \$3000;
 IF QA13_K15 = 2 DISPLAY \$3000;
 IF QA13_K15 = 3 DISPLAY \$3150;
 IF QA13_K15 = 4 DISPLAY \$3300;
 IF QA13_K15 = 5 DISPLAY \$3450;
 IF QA13_K15 = 6 DISPLAY \$3600;
 IF QA13_K15 = 7 DISPLAY \$3750;
 IF QA13_K15 = 8 DISPLAY \$3900;
 IF QA13_K15 = 9 DISPLAY \$4050;
 IF QA13_K15 ≥ 10 DISPLAY \$4200;

IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family's";
 ELSE DISPLAY "your"

QA13_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

YES1
 NO2
 REFUSED -7
 DON'T KNOW -8

Alimony/Child Support**PROGRAMMING NOTE QA13_L8:**

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
 ELSE DISPLAY "you"

QA13_L8 Did {you or your spouse/you or your partner/you} receive any money last month for alimony, or child support?
 你{或你的配偶}#上個月\有沒有領取贍養費或子女扶養費?

AL15

YES	1	
NO	2	[GO TO PN QA13_L10]
REFUSED	-7	[GO TO PN QA13_L10]
DON'T KNOW	-8	[GO TO PN QA13_L10]

PROGRAMMING NOTE QA13_L9:

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";
 ELSE CONTINUE WITHOUT DISPLAYS

QA13_L9 What was the {combined} total amount that you {and your spouse/and your partner} received from alimony or child support last month?
 你{和你的妻子/丈夫}#上個月\所領取的贍養費或子女扶養費的{合計}總額是多少?

AL16**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$_____ AMOUNT [000001-999995]

REFUSED	-7
DON'T KNOW	-8

PROGRAMMING NOTE QA13_L10:

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you"
 ELSE DISPLAY "you"

QA13_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贍養費或子女扶養費？

AL17

YES, RESPONDENT PAID	1	
YES, SPOUSE/PARTNER PAID	2	
YES, BOTH PAID.....	3	
NO	4	[GO TO PN QA13_L12]
REFUSED	-7	[GO TO PN QA13_L12]
DON'T KNOW	-8	[GO TO PN QA13_L12]

PROGRAMMING NOTE QA13_L11:

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";
 ELSE DISPLAY "you"

QA13_L11 What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in alimony or support last month?
 {您/您的配偶/您的伴侶/你們兩人} 上個月花費總數是多少？

AL18

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

_____ AMOUNT [000001-999995]

REFUSED	-7
DON'T KNOW	-8

Worker's Compensation**PROGRAMMING NOTE QA13_L12:**

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
 ELSE DISPLAY "you"

QA13_L12 Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?
 你{或你的配偶}上個月是否領取任何工傷賠償付款？

AL32

YES	1	
NO	2	[GO TO PN QA13_L14]
REFUSED	-7	[GO TO PN QA13_L14]
DON'T KNOW	-8	[GO TO PN QA13_L14]

PROGRAMMING NOTE QA13_L13:

IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";
 ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";
 ELSE CONTINUE WITHOUT DISPLAYS

QA13_L13 What was the {combined} total amount that you {and your spouse/and your partner} received from workers compensation last month?
 你{和你的妻子/丈夫}上個月從工傷賠償領取的{合計}總額是多少？

AL33

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$_____ AMOUNT [000001-999995]

REFUSED	-7
DON'T KNOW	-8

Social Security/Pension Payments**PROGRAMMING NOTE QA13_L14:**

IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH QA13_L12 AND DISPLAY "you or your spouse";

ELSE IF AGE ≥ 65 AND QA13_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA13_L14 AND DISPLAY "you or your partner";

ELSE IF AGE ≥ 65, THEN CONTINUE WITH QA13_L14 AND DISPLAY "you";

ELSE GO TO PROGRAMMING NOTE QA13_L16

QA13_L14 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

YES1

NO2

REFUSED -7

DON'T KNOW -8

[GO TO PN QA13_L16]

[GO TO PN QA13_L16]

[GO TO PN QA13_L16]

QA13_L15 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

Reasons for Non-Participation in Medi-Cal**PROGRAMMING NOTE QA13_L16:**

**IF ARINSURE ≠ 1 (UNINSURED) CONTINUE WITH QA13_L16;
ELSE GO TO QA13_M1**

QA13_L16 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？

AL19

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

Section M – Housing and Social Cohesion

Housing

QA13_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

QA13_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 QA13_M3:

IF AGE ≥ 65 AND QA13_M2 = 1 (OWNS HOME), THEN CONTINUE WITH QA13_M3

ELSE GO TO QA13_M4

QA13_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

QA13_M4 About how long have you lived at your current address?
您在目前的地址已大約居住多長時間?

AM14

_____ MONTHS [HR: 1 - AAGEx12MONTHS]
_____ YEARS [HR: 1 - AAGE]

REFUSED -7

DON'T KNOW -8

PROGRAMMING NOTE QA13_M5:
IF QA13_M4 ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE QA13_M7;
ELSE CONTINUE WITH QA13_M5

QA13_M5 About how long have you lived in your current neighborhood?
你在目前所在的鄰里社區大約已經居住多長時間?

AM15

_____ MONTHS [HR: 1 - AAGEx12MONTHS]
_____ YEARS [HR: 1 - AAGE]

REFUSED -7

DON'T KNOW -8

QA13_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么?

AM38

CHANGE IN MARITAL/RELATIONSHIP STATUS...1
TO ESTABLISH OWN HOUSEHOLD.....2
FOR CHILD'S EDUCATION3
TO ATTEND OR LEAVE COLLEGE4
WORK RELATED5
COULDN'T AFFORD MORTGAGE/RENT6
OTHER HOUSING RELATED7
BETTER NEIGHBORHOOD/LESS CRIME8
OTHER..... 91
REFUSED -7
DON'T KNOW -8

Social Cohesion**PROGRAMMING NOTE QA13_M7:**

**IF QA13_M7 THROUGH QA13_M11 NOT ANSWERED IN CHILD INTERVIEW, THEN CONTINUE WITH QA13_M7;
ELSE GO TO QA13_M12**

QA13_M7 Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:
People in my neighborhood are willing to help each other.
請告訴我您對以下陳述的贊成程度。您是極為贊成、贊成、不贊成還是極不贊成？我所在社區的居民很願意互相幫助。

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

QA13_M8 People in this neighborhood generally do NOT get along with each other.
本社區的人通常無法和睦相處。

AM20

[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

QA13_M9 People in this neighborhood can be trusted.
 本社區的人值得信賴。

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

QA13_M10 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。

AM35

[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

Safety

QA13_M11 Do you feel safe in your neighborhood...
 您在居住區附近是……感到安全?

AK28

All of the time,	1
所有的時間,	1
Most of the time,	2
大多數時間,	2
Some of the time, or	3
某些時間, 還是	3
None of the time	4
沒有任何時間	3
REFUSED	-7
DON'T KNOW	-8

Civic Engagement

QA13_M12 In the past 12 months, have you done any volunteer work or community service that you have not been paid for?
在過去十二個月內，您是否曾經做任何義工或不領取報酬的社區服務工作？

AM36

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_M13 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

YES1
NO2
REFUSED -7
DON'T KNOW -8

QA13_M14 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。」]**

YES1
NO2
REFUSED -7
DON'T KNOW -8

Section S – Suicide Ideation and Attempts

Suicide Ideation and Attempts

QA13_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？

AF86

YES	1	
NO	2	[GO TO PN QA13_N1]
REFUSED	-7	[GO TO PN QA13_N1]
DON'T KNOW	-8	[GO TO PN QA13_N1]

QA13_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？

AF87

YES	1	
NO	2	[GO TO QA13_S4]
REFUSED	-7	[GO TO QA13_S4]
DON'T KNOW	-8	[GO TO QA13_S4]

QA13_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

QA13_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 QA13_S5:

IF QA13_S2 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;

IF QA13_S3 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;

IF QA13_S3 = 1 AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;

ELSE CONTINUE WITH QA13_S5

QA13_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

YES1
NO2
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。每天二十四小時有人提供幫助您的資訊。我會很樂意地等候您去拿來紙和筆，我可以將這個電話號碼告訴您。這個電話號碼是1-800-273-TALK (8255)。

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 QA13_S2 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN SKIP TO PN QA13_N1 (NEXT SECTION); ELSE CONTINUE

QA13_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

YES1	[GO TO SUICIDE PROTOCOL]
NO2	[GO TO PN QA13_N1]
REFUSED -7	[GO TO PN QA13_N1]
DON'T KNOW -8	[GO TO PN QA13_N1]

Section N –Demographic Information Part III and Closing

County of Residence

PROGRAMMING NOTE QA13_N1:
IF NOT ALREADY ASKED IN CHILD INTERVIEW, CONTINUE WITH QA13_N1;
ELSE SKIP TO QA13_N7

QA13_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？

AH42

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

SAN LUIS OBISPO	40
SAN MATEO	41
SANTA BARBARA	42
SANTA CLARA	43
SANTA CRUZ	44
SHASTA	45
SIERRA	46
SISKIYOU	47
SOLANO	48
SONOMA	49
STANISLAUS	50
SUTTER	51
TEHAMA	52
TRINITY	53
TULARE	54
TUOLUMNE	55
VENTURA	56
YOLO	57
YUBA	58
REFUSED	-7
DON'T KNOW	-8

Address Confirmation, Cross Streets, Zip Code

PROGRAMMING NOTE QA13_N2:
IF ADVANCE LETTER SENT, ASK QA13_N2;
IF R'S ADDRESS IS A P.O. BOX, GO TO QA13_N3;
ELSE GO TO QA13_N3

QA13_N2 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.

您的電話號碼是透過電腦以隨機方式被選擇參加本項研究的。我們已經根據您的電話號碼查到您的住址，並給您寄出了一封信，解釋本項研究的目的。

為了幫助我們更好地瞭解您的生活環境以及您的生活環境對您的健康的影響，我們希望確認您的住址。我們會對您的住址保密，並在問卷調查全部完成後銷毀。

Do you now live at {R's ADDRESS AND STREET}?

您目前是否住在.....？

AO1

YES	1	[GO TO QA13_N6]
NO	2	
REFUSED	-7	
DON'T KNOW	-8	

QA13_N3 What is your zip code?
您的郵遞區號是？

AM7

_____ ZIP CODE

REFUSED -7

DON'T KNOW -8

QA13_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.

為了幫助我們更好地瞭解您的生活環境以及您的生活環境對您的健康的影響，請告訴我您的住址。我們會對您的住址保密，並在問卷調查全部完成後銷毀。

A02

_____ HOUSE ADDRESS NUMBER

_____ NAME OF STREET (VERIFY SPELLING) **[GO TO QA13_N6]**

_____ STREET TYPE

_____ APT. NO

REFUSED -7

DON'T KNOW -8

QA13_N5 Can you tell me just the name of the street you live on?
您是否能夠只告訴我您居住的街道名稱？

AM8

_____ NAME OF STREET

REFUSED -7 **[GO TO QA13_N7]**

DON'T KNOW -8 **[GO TO QA13_N7]**

QA13_N6 And what is the name of the street down the corner from you that crosses your street?
在您所住的街道轉角處與您所住的街道交叉的街道名稱是什麼？

AM9

_____ NAME OF CROSS-STREET

REFUSED -7

DON'T KNOW -8

Cell Phone Use**PROGRAMMING NOTE QA13_N7:**

**IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QA13_N11;
ELSE CONTINUE WITH QA13_N7**

QA13_N7 I'm 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，但是，你是否有一個可以使用的手機？

AM33**[CODE "SHARES CELL PHONE" ONLY IF VOLUNTEERED]**

YES1
NO2
SHARES CELL PHONE3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_N8:

**IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE QA13_N10;
ELSE CONTINUE WITH QA13_N8**

QA13_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

YES1
NO2
REFUSED -7
DON'T KNOW -8

**[GO TO PN QA13_N10]
[GO TO PN QA13_N10]
[GO TO PN QA13_N10]**

QA13_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 ONLY1
BUSINESS USE ONLY2
BOTH PERSONAL USE AND BUSINESS USE3
REFUSED -7
DON'T KNOW -8

PROGRAMMING NOTE QA13_N10:

**IF QA13_N7 = 1 (YES) OR 3 (SHARES CELL PHONE), OR QA13_N9 = 1 OR 3 (LANDLINE IS FOR
PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH QA13_N10;
ELSE SKIP TO PROGRAMMING QA13_N11**

QA13_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

Follow-Up Survey Permission

PROGRAMMING NOTE QA13_N11:
IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;
ELSE CONTINUE WITH QA13_N11

QA13_N11 Finally, do you think you would be willing to do a follow-up to this survey some time in the future?
 最後，我想問一下您是否願意今後參加本項研究的一次後續調查？

AM10

YES1
 MAYBE/PROBABLY YES2
 DEFINITELY NOT3
 REFUSED-7
 DON'T KNOW-8

PROGRAMMING NOTE SUICIDE RESOURCE 2:
IF QA13_S6 = (2, -7, -8),
AND [QA13_S3 = 1 OR (QA13_S3 = 2, -7, -8 AND QA13_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).

我前面已經說過，如果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。

QA13_N12 Would you like to speak with someone now?
 您現在希望與人交談嗎？

AN8

YES1	[GO TO SUICIDE PROTOCOL]
NO2	[GO TO CLOSE1 AND CLOSE2]
REFUSED-7	[GO TO CLOSE1 AND CLOSE2]
DON'T KNOW-8	[GO TO CLOSE1 AND CLOSE2]

**PROGRAMMING NOTE CLOSE1 AND CLOSE2:
IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;
ELSE CONTINUE WITH CLOSE1**

CLOSE1 Let me check to see if there is anyone else. [GO TO HHSELECT]
讓我檢查一下我們是不是還需要和任何其他人談話

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. Ninez Ponce, the Principal Investigator. Dr. Ponce 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，請與研究負責人Ninez Ponce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Ponce博士聯繫。]