



## CHIS 2017 Adult Questionnaire

Version 2.19 Tagalog

October 3, 2019

Adult Respondents Age 18 and Older

Collaborating Agencies:

- *UCLA Center for Health Policy Research*
- *California Department of Health Care Services*
- *California Department of Public Health*

### Contact:

#### **California Health Interview Survey**

UCLA Center for Health Policy Research

10960 Wilshire Blvd, Suite 1550

Los Angeles, CA 90024

Telephone: (866) 275-2447

Fax: (310) 794-2686

Web: [www.chis.ucla.edu](http://www.chis.ucla.edu)

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

## Section A: Demographic Information, Part I

**'PN\_QA17\_A1' [PN\_AA1] -  
PROGRAMMING NOTE AA1 :  
SET AADATE = CURRENT DATE (YYYYMMDD)**

**'QA17\_A1' [AA1] -**

What is your date of birth?

Anong petsa kayo ipinanganak?

**'AA1MON' [AA1MON] -  
MONTH \_\_\_\_\_ [RANGE: 1-12]**

- ☐ 01 JANUARY
- ☐ 02 FEBRUARY
- ☐ 03 MARCH
- ☐ 04 APRIL
- ☐ 05 MAY
- ☐ 06 JUNE
- ☐ 07 JULY
- ☐ 08 AUGUST
- ☐ 09 SEPTEMBER
- ☐ 10 OCTOBER
- ☐ 11 NOVEMBER
- ☐ 12 DECEMBER

**'AA1DAY' [AA1DAY] -  
DAY \_\_\_\_\_ [RANGE: 1-31]**

**'AA1YR' [AA1YR] -  
YEAR \_\_\_\_\_ [RANGE: 1907-2000]**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_A2' [PN\_AA1A] -**  
**PROGRAMMING NOTE AA1A :**  
**IF AA1 = -7 OR -8 (REF/DK), CONTINUE WITH AA1A ;**  
**ELSE GO TO AA3**

**'QA17\_A2' [AA1A] –**

What month and year were you born?

Anong buwan at taon kayo ipinanganak?

**'AA1AMON' [AA1AMON] - MONTH \_\_\_\_\_ [RANGE: 1-12]**

- ☐ 01 JANUARY
- ☐ 02 FEBRUARY
- ☐ 03 MARCH
- ☐ 04 APRIL
- ☐ 05 MAY
- ☐ 06 JUNE
- ☐ 07 JULY
- ☐ 08 AUGUST
- ☐ 09 SEPTEMBER
- ☐ 10 OCTOBER
- ☐ 11 NOVEMBER
- ☐ 12 DECEMBER

**'AA1AYR' [AA1AYR] -**

**YEAR \_\_\_\_\_ [RANGE: 1904-2000]**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_A3' [PN\_AA2] -**  
**PROGRAMMING NOTE AA2 :**  
**IF AA1A = -7 OR -8 (REF/DK) THEN CONTINUE WITH AA2 ;**  
**ELSE GO TO AA3**

**'QA17\_A3' [AA2] –**

What is your age, please?

Kung puede po sanang matanong, ano ang edad ninyo?

\_\_\_\_\_YEARS OF AGE

[RANGE: 0-120]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_A4' [PN\_AA2A] -**  
**PROGRAMMING NOTE AA2A :**  
**IF AA2 = -7 OR -8 (REF/DK) THEN CONTINUE WITH AA2A ;**  
**ELSE GO TO AA3**

**'QA17\_A4' [AA2A] –**

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

Nasa pagitan ba kayo ng 18 at 29, 30 at 39, 40 at 44, 45 at 49, 50 at 64, o 65 o mas matanda pa?

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

**'POST\_QA17\_A4' [POST\_AA2A] -**  
**POST NOTE AA2A : AAGE ENUM.AGE**  
**CALCULATE VALUE OF AAGE BASED ON AA1 , AA1A , OR AA2 TO USE IN ALL AGE-RELATED**  
**QUESTIONS;**  
**IF AA1 , AA1A , OR AA2 = -7 OR -8 (REF/DK), THEN USE AA2A ;**  
**ELSE USE ENUM.AGE**

**'QA17\_A5' [AA3] –**

Are you male or female?

Lalaki o babae ba kayo?

- ☐ 01 MALE
- ☐ 02 FEMALE
- ☐ -7 REFUSED

**'QA17\_A6' [AA4] –**

Are you Latino or Hispanic?

Latino o Hispanic ba kayo?

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

**If = 2, -7, -8, goto 'PN\_QA17\_A8'**



**'QA17\_A7' [AA5] –**

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.

At ano ang inyong mga ninuno o angkang pinanggalingan na Latino o Hispanic? Gaya ng Mexican, Salvadoran, Cuban, Honduran - at kung higit sa isa, sabihin ninyo ang lahat sa akin.

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

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

OTHER LATINO (SPECIFY: \_\_\_\_\_)

**'PN\_QA17\_A8' [PN\_AA5A] -**

**PROGRAMMING NOTE AA5A :**

**IF AA4 = 1 (YES, LATINO/HISPANIC) DISPLAY "You said you are Latino or Hispanic. Also,";**

**IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR AA5A , CONTINUE WITH**

**PROGRAMMING NOTE AA5B ;**

**ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

**'QA17\_A8' [AA5A] –**

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

{Sinabi ninyo na Latino o Hispanic kayo.} Pakisabi rin sa akin kung aling isa o mahigit pa sa sumusunod ang gagamitin ninyo sa paglalarawan sa sarili ninyo. Masasabi ba ninyo na kayo ay Native Hawaiian, other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, o White?

**[IF R SAYS "NATIVE AMERICAN" CODE AS "4"]**

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

**[CODE ALL THAT APPLY]**

- ☐ 01 WHITE
- ☐ 02 BLACK OR AFRICAN AMERICAN
- ☐ 03 ASIAN
- ☐ 04 AMERICAN INDIAN OR ALASKA NATIVE
- ☐ 05 OTHER PACIFIC ISLANDER
- ☐ 06 NATIVE HAWAIIAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)

**If AA5A=1 Or 2, go to 'PN\_QA17\_A14'**

**If AA5A=3, go to 'PN\_QA17\_A12'**

**If AA5A=5, go to 'QA17\_A13'**

**If AA5A=6, go to 'QA17\_A16'**

**'PN\_QA17\_A9' [PN\_AA5B] -**  
**PROGRAMMING NOTE AA5B :**  
**IF AA5A = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH AA5B ;**  
**ELSE GO TO PROGRAMMING NOTE AA5E**

**'QA17\_A9' [AA5B] –**

You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.

Sinabi ninyo na American Indian o Alaska Native. Ano ang tribo ng inyong mga ninuno? Kung higit sa isang tribo, banggitin ninyo ang lahat sa akin.

**[CODE ALL THAT APPLY]**

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

OTHER TRIBE (SPECIFY: \_\_\_\_\_)

**'QA17\_A10' [AA5C] –**

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

Kayo ba ay nakatalang miyembro ng isang tribong kinikilala ng pamahalaang pederal o pangestado?

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

**If = 2, -7, -8, goto 'PN\_QA17\_A12'**

'QA17\_A11' [AA5D] –

Which tribe are you enrolled in?

Sa aling tribo kayo nakatala?

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

'APACHE' [APACHE] - APACHE

- ☐ 1 Mescalero Apache, NM
- ☐ 2 \_APACHE (NOT SPECIFIED)\_
- ☐ 3 \_OTHER APACHE (SPECIFY: )

OTHER\_APACHE

'BLACKFEET' [BLACKFEET] - BLACKFEET

- ☐ 4 BLACKFOOT/BLACKFEET

'CHEROKEE' [CHEROKEE] - CHEROKEE

- ☐ 5 WESTERN CHEROKEE
- ☐ 6 CHEROKEE (NOT SPECIFIED)
- ☐ 7 OTHER CHEROKEE (SPECIFY: \_\_\_\_\_)

OTHER\_CHEROKEE

'CHOCTAW' [CHOCTAW] - CHOCTAW

- ☐ 08 CHOCTAW OKLAHOMA
- ☐ 09 CHOCTAW (NOT SPECIFIED)
- ☐ 10 OTHER CHOCTAW (SPECIFY: \_\_\_\_\_)

OTHER\_CHOCTAW

'NAVAJO' [NAVAJO] - NAVAJO

- ☐ 11 NAVAJO (NOT SPECIFIED)

'POMO' [POMO] - POMO

- ☐ 12 HOPLAND BAND, HOPLAND RANCHERIA
- ☐ 13 SHERWOOD VALLEY RANCHERIA
- ☐ 14 POMO (NOT SPECIFIED)
- ☐ 15 OTHER POMO (SPECIFY: \_\_\_\_\_)

OTHER\_POMO

'PUEBLO' [PUEBLO] - PUEBLO

- ☐ 16 HOPI
- ☐ 17 YSLETA DEL SUR PUEBLO OF TEXAS
- ☐ 18 PUEBLO (NOT SPECIFIED)
- ☐ 19 OTHER PUEBLO (SPECIFY: \_\_\_\_\_)

OTHER\_PUEBLO

'SIOUX' [SIOUX] - SIOUX

- ☐ 20 OGLALA/PINE RIDGE SIOUX
- ☐ 21 SIOUX (NOT SPECIFIED)
- ☐ 22 OTHER SIOUX (SPECIFY: \_\_\_\_\_)

OTHER\_SIOUX

'YAQUI' [YAQUI] - YAQUI

- ☐ 23 PASCUA YAQUI TRIBE OF ARIZONA
- ☐ 24 YAQUI (NOT SPECIFIED)
- ☐ 25 OTHER YAQUI (SPECIFY: \_\_\_\_\_)

OTHER\_YAQUI

'OTHER' [OTHER] - OTHER

- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_OTHER

'PN\_QA17\_A12' [PN\_AA5E] -

**PROGRAMMING NOTE AA5E :**

**IF AA5A = 3 (ASIAN) CONTINUE WITH AA5E ;**  
**ELSE GO TO PROGRAMMING NOTE AA5E1**

'QA17\_A12' [AA5E] –

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

Sinabi ninyo na Asian. Aling tiyak na pangkating etniko ang kinabibilangan ninyo, gaya ng {Chinese, Filipino, Vietnamese}? Kung higit sa isa kayo, banggitin ninyo ang lahat sa akin.

**[CODE ALL THAT APPLY]**

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

OTHER ASIAN (SPECIFY: \_\_\_\_\_)

**'PN\_QA17\_A13' [PN\_AA5E1] -**  
**PROGRAMMING NOTE AA5E1 :**  
**IF AA5A = 5 (OTHER PACIFIC ISLANDER) CONTINUE WITH AA5E1 ;**  
**ELSE GO TO PROGRAMMING NOTE AA5G**

**'QA17\_A13' [AA5E1] –**

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.

Sinabi ninyo na Pacific Islander kayo. Aling tiyak na pangkating etniko ang kinabibilangan ninyo, gaya ng Samoan, Tongan o Guamenian? Kung higit sa isa ang pangkating etniko ninyo, banggitin ang lahat.

**[CODE ALL THAT APPLY]**

- ☐ 01 SAMOAN/AMERICAN SAMOAN\_
- ☐ 02 \_GUAMANIAN\_
- ☐ 03 \_TONGAN\_
- ☐ 04 \_FIJIAN\_
- ☐ 91 OTHER PACIFIC ISLANDER (SPECIFY: \_\_\_\_\_)
- ☐ -7 \_REFUSED\_
- ☐ -8 \_DON'T KNOW\_

OTHER PACIFIC ISLANDER (SPECIFY: \_\_\_\_\_)

**'PN\_QA17\_A14' [PN\_AA5G] -**  
**PROGRAMMING NOTE AA5G :**  
**IF AA4 = 1 (LATINO) AND [AA5A = 6 (NATIVE HAWAIIAN) OR AA5A = 5 (OTHER PACIFIC ISLANDER) OR**  
**AA5A = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR AA5A = 3 (ASIAN) OR AA5A = 2**  
**(BLACK/AFRICAN AMERICAN) OR AA5A = 1 (WHITE) OR AA5A = 91 (OTHER)], CONTINUE WITH AA5G ;**  
**ELSE IF THERE WERE MULTIPLE RESPONSES TO AA5A , AA5E , OR AA5E1 [NOT COUNTING -7 OR -8**  
**(REF/DK)], CONTINUE WITH AA5G ;**  
**ELSE SKIP TO AH43**

**'QA17\_A14' [AA5G] –**

You said that you are: {INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1}.

Sinabi ninyo na kayo ay:: {INSERT MULTIPLE RESPONSES FROM AA5, AA5A, AA5E AND AA5E1}.

Do you identify with any one race in particular?

Iniuugnay ba ninyo ang sarili ninyo sa alinmang isang partikular na lahi?

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

**If = 2, -7, -8, goto 'QA17\_A16'**

'PN\_QA17\_A15' [PN\_AA5F] -

**PROGRAMMING NOTE FOR AA5F :**

**IF AA4 = 1 (YES, LATINO) AND AA5 ≠ -7 OR -8, DO NOT DISPLAY AA5F = 14 (LATINO);**

**IF AA5A = 5 (YES, OTHER PACIFIC ISLANDER) AND AA5E1 = 1 TO 4 OR 91, DO NOT DISPLAY AA5F = 17 (OTHER PACIFIC ISLANDER);**

**IF AA5A = 3 AND AA5E = 1 TO 17 OR 91, DO NOT DISPLAY AA5F = 19 (ASIAN)**

'QA17\_A15' [AA5F] -

Which do you most identify with?

Sa aling lahi ninyo higit na iniuugnay ang inyong sarili?

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

- ☐ 01 MEXICAN/MEXICAN AMERICAN/CHICANO
- ☐ 04 SALVADORAN
- ☐ 05 GUATEMALAN
- ☐ 06 COSTA RICAN
- ☐ 07 HONDURAN
- ☐ 08 NICARAGUAN
- ☐ 09 PANAMANIAN
- ☐ 10 PUERTO RICAN
- ☐ 11 CUBAN
- ☐ 12 SPANISH-AMERICAN (FROM SPAIN)
- ☐ 13 LATINO, OTHER SPECIFY
- ☐ 14 LATINO
- ☐ 16 NATIVE HAWAIIAN
- ☐ 17 OTHER PACIFIC ISLANDER
- ☐ 18 AMERICAN INDIAN OR ALASKA NATIVE
- ☐ 19 ASIAN
- ☐ 20 BLACK OR AFRICAN AMERICAN
- ☐ 21 WHITE
- ☐ 22 RACE, OTHER SPECIFY
- ☐ 30 BANGLADESHI
- ☐ 31 BURMESE
- ☐ 32 CAMBODIAN
- ☐ 33 CHINESE
- ☐ 34 FILIPINO
- ☐ 35 HMONG
- ☐ 36 INDIAN (INDIA)
- ☐ 37 INDONESIAN
- ☐ 38 JAPANESE
- ☐ 39 KOREAN
- ☐ 40 LAOTIAN
- ☐ 41 MALAYSIAN
- ☐ 42 PAKISTANI
- ☐ 43 SRI LANKAN
- ☐ 44 TAIWANESE
- ☐ 45 THAI
- ☐ 46 VIETNAMESE
- ☐ 49 ASIAN, OTHER SPECIFY
- ☐ 50 SAMOAN/AMERICAN SAMOAN
- ☐ 51 GUAMANIAN
- ☐ 52 TONGAN
- ☐ 53 FIJIAN
- ☐ 55 PACIFIC ISLANDER, OTHER SPECIFY
- ☐ 90 BOTH/ALL/MULTIRACIAL
- ☐ 95 NONE OF THESE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER (SPECIFY: \_\_\_\_\_)

**‘QA17\_A16’ [AH43] –**

Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?

Sa ngayon, kayo ba ay kasal, may kinakasamang partner sa kaugnayang parang mag-asawa, biyudo/a, diborsyado/a, hiwalay, o hindi kinasal kailanman?

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

- ☐ 01 MARRIED
- ☐ 02 LIVING WITH PARTNER
- ☐ 03 WIDOWED
- ☐ 04 DIVORCED
- ☐ 05 SEPARATED
- ☐ 06 NEVER MARRIED
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section B: Health Conditions

**'QA17\_B1'** [AB1] –

These next questions are about your health.

Tungkol sa inyong kalusugan ang sumusunod na mga katanungan.

Would you say that in general your health is excellent, very good, good, fair, or poor?

Masasabi ba ninyo na sa pangkalahatan ang kalusugan ninyo ay mabuting-mabuti, napakabuti, mabuti, mabuti-buti o mahina?

- ☐ 01 EXCELLENT
- ☐ 02 VERY GOOD
- ☐ 03 GOOD
- ☐ 04 FAIR
- ☐ 05 POOR
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B2'** [AB17B] -

Has a doctor ever told you that you have asthma?

Nasabihan na ba kayo ng doktor kailanman na may asthma kayo?

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

**If = 2, -7, -8, goto 'QA17\_B18'**

**'QA17\_B3'** [AB40] –

Do you still have asthma?

Mayroon pa ba kayong asthma?

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

**'QA17\_B4'** [AB41] –

During the past 12 months, have you had an episode of asthma or an asthma attack?

Nitong nakaraang 12 buwan, nakaranas ba kayo ng pagsumpong ng asthma o ng atake ng asthma?

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



**'PN\_QA17\_B5' [PN\_AB19] -**

**PROGRAMMING NOTE AB19 :**

**IF [AB40 = 2, -7, OR -8 (DOES NOT HAVE ASTHMA)] AND [AB41 = 2, -7, OR -8 (NO EPISODE OF ASTHMA IN LAST 12 MOS)], GO TO AB18 ;  
ELSE IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AH13A;  
ELSE CONTINUE WITH AB19**

**'QA17\_B5' [AB19] –**

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...

Nitong nakaraang 12 buwan, gaano kadalas kayo nakaranas ng mga sintomas ng asthma gaya ng pag-ubo, paghuni, kahirapang huminga, paninikip ng dibdib o plema? Masasabi ba ninyo na...

- ☐ 01 Not at all,
- ☐ 01 Hindi kailanman,..
- ☐ 02 Less than every month,
- ☐ 02 Mas bihira sa bawat buwan,
- ☐ 03 Every month,
- ☐ 03 Bawat buwan,
- ☐ 04 Every week, or
- ☐ 04 Bawat linggo, o
- ☐ 05 Every day?
- ☐ 05 Araw-araw?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B6' [AH13A] -**

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

Nitong nakaraang 12 buwan, kinailangan ba ninyong magpatingin sa emergency room ng ospital dahil sa inyong asthma?

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

**If = 2, -7, -8, goto 'QA17\_B8'**

**'QA17\_B7' [AB106] -**

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

Nagpatingin ba kayo sa emergency room ng ospital para sa inyong asthma dahil hindi kayo nakapagpatingin sa doktor ninyo?

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

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

**'PN\_QA17\_B8' [PN\_AH15A] -****PROGRAMMING NOTE AH15A:****IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AB18;****'QA17\_B8' [AH15A] –**

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

Nitong nakaraang 12 buwan, na-ospital ba kayo nang magdamag o mas matagal pa para sa inyong asthma?

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

**'QA17\_B9' [AB18] –**

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

Umiinom ba kayo ngayon ng pang-araw-araw na inireseta o ibinigay sa inyo ng doktor na gamot para kontrolin ang asthma ninyo?

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

**[IF NEEDED, SAY: "Kabilang dito ang mga gamot na nilulunok at ang mga inhaler. Iba ito sa mga inhaler na ginagamit para sa pangmadaliang ginhawa."]**

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

**'PN\_QA17\_B10' [PN\_AB66] -****PROGRAMMING NOTE AB66 :****IF AB40 = 1 (YES, STILL HAVE ASTHMA) OR AB41 = 1 (YES, EPISODE IN LAST 12 MOS) GO TO PROGRAMMING NOTE AB42 ;****ELSE IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AB67;****ELSE CONTINUE WITH AB66****'QA17\_B10' [AB66] –**

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...

Nitong nakaraang 12 buwan, gaano kadalas kayo nakaranas ng mga sintomas ng asthma gaya ng pag-ubo, paghuni, kahirapang huminga, paninikip ng dibdib o plema? Masasabi ba ninyo na...

- ☐ 01 Not at all,
- ☐ 01 Hindi kailanman,.
- ☐ 02 Less than every month,
- ☐ 02 Mas bihira sa bawat buwan,
- ☐ 03 Every month,
- ☐ 03 Bawat buwan,
- ☐ 04 Every week, or
- ☐ 04 Bawat linggo, o
- ☐ 05 Every day?
- ☐ 05 Araw-araw?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B11'** [AB67] –

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

Nitong nakaraang 12 buwan, kinailangan ba ninyong magpagamot sa emergency room ng ospital dahil sa inyong asthma?

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

**If = 2, -7, -8, goto 'QA17\_B13'**

**'QA17\_B12'** [AB107] - Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

Nagpatingin ba kayo sa emergency room ng ospital para sa inyong asthma dahil hindi kayo nakapagpatingin sa doktor ninyo?

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

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

**'PN\_QA17\_B13'** [PN\_AB80] -

**PROGRAMMING NOTE AB80:**

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

**'QA17\_B13'** [AB80] –

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

Nitong nakaraang 12 buwan, na-ospital ba kayo nang magdamag o mas matagal pa para sa inyong asthma?

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

**'PN\_QA17\_B14'** [PN\_AB42] -

**PROGRAMMING NOTE AB42 :**

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

**'QA17\_B14'** [AB42] –

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

Nitong nakaraang 12 buwan, ilang araw kayong hindi nakapasok sa trabaho nang dahil sa asthma?

**[INTERVIEWER NOTE: IF NOT WORKING, ENTER ZERO]**

\_\_\_\_\_ DAYS (0 - 365)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B15'** [AB43] –

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

Nakipagtulungan na ba sa inyo ang inyong mga doktor o mga iba pang medical provider na gumawa ng plano para malaman ninyo kung paano pangalagaan ang inyong asthma?

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

**If = 2, -7, -8, goto 'QA17\_B17'**

**'QA17\_B16'** [AB98] –

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

Mayroon ba kayong nakasulat o naka-print na kopya nitong plano?

**[IF NEEDED, SAY: "This can be an electronic or hard copy."]**

**[IF NEEDED, SAY: "Puedeng electronic o nasa papel ang kopyang ito."]**

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

**'PN\_QA17\_B17'** [PN\_AB108] -

**PROGRAMMING NOTE AB108:**

**IF SAMPLED COUNTY IS NOT IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS NOT IMPERIAL COUNTY, THEN GO TO AB128;**

**'QA17\_B17'** [AB108] –

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

Gaano ang tiwala ninyo na kaya ninyong kontrolin at pangalagaan ang inyong asthma? Masasabi ba ninyo na kayo ay...

- ☐ 01 Very confident,
- ☐ 01 Lubos na may tiwala,
- ☐ 02 Somewhat confident,
- ☐ 02 Medyo may tiwala,
- ☐ 03 Not too confident, or
- ☐ 03 Walang masyadong tiwala,
- ☐ 04 Not at all confident?
- ☐ 04 Walang tiwala kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_B18' [PN\_AB128] -**  
**PROGRAMMING NOTE AB128:**  
**IF AB17B = 1, THEN SKIP TO AB130;**  
**ELSE IF SAMPLED COUNTY IS IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE)**  
**IS IMPERIAL COUNTY, THEN CONTINUE;**  
**ELSE SKIP TO AB130;**

**'QA17\_B18' [AB128] –**

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

Sa nakaraang labindalawang buwan, nakaranas ka ba ng mga sintomas na gaya ng pag-ubo, paghika, pagkapos sa paghinga, paninikip ng dibdib, o plema sa mga panahong HINDI ka sinisipon o nagkaroon ng respiratory infection?

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

**If = 2, -7, -8, goto 'QA17\_B20'**

**'QA17\_B19' [AB129] –**

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

Gaano ka kadalas nagkaroon ng mga sintomas na iyon? Masasabi mo bang...

- ☐ 01 NOT AT ALL
- ☐ 02 Once or twice in the past 12 months
- ☐ 02 Isa o dalawang beses sa nakalipas na labindalawang buwan
- ☐ 03 Every couple of months
- ☐ 03 Isang beses kada dalawang buwan
- ☐ 04 Every month, or
- ☐ 04 Isang beses kada buwan, o
- ☐ 05 Every week?
- ☐ 05 Isang beses kada linggo?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_B20' [PN\_AB130] -**  
**PROGRAMMING NOTE AB130:**  
**IF SAMPLED COUNTY IS IMPERIAL COUNTY OR SCREENER SELF-REPORT COUNTY (OR ZIP CODE) IS**  
**IMPERIAL COUNTY, THEN CONTINUE;**  
**ELSE SKIP TO AB22;**

**'QA17\_B20' [AB130] –**

During the past 12 months, have you been bothered by sneezing or a runny or blocked nose when you DID NOT have a cold or the flu?

Sa nakaraang labindalawang buwan, nagkaroon ka ba ng madalas na pagbahin, malabnaw na sipon o baradong ilong sa mga panahong HINDI ka sinipon o tinrangaso?

**[IF R MENTIONS ALLERGY, CODED 'YES']**

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

**If = 2, -7, -8, goto 'QA17\_B22'**

**'QA17\_B21' [AB131] –**

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

Gaano ka kadalas nagkaroon ng mga sintomas na iyon? Masasabi mo bang...

- ☐ 01 NOT AT ALL
- ☐ 02 Once or twice in the past 12 months
- ☐ 02 Isa o dalawang beses sa nakalipas na labindalawang buwan
- ☐ 03 Every couple of months
- ☐ 03 Isang beses kada dalawang buwan
- ☐ 04 Every month, or
- ☐ 04 Isang beses kada buwan, o
- ☐ 05 Every week?
- ☐ 05 Isang beses kada linggo?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B22' [AB132] –**

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

Sa nakaraang labindalawang buwan, nakaranas ka ba ng mamasa-masa, makati, o mahapding mga mata sa panahong HINDI ka sinipon o tinrangaso?

**[IF R MENTIONS ALLERGY, CODED 'YES']**

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

If = 2, -7, -8, goto 'QA17\_B24'

**'QA17\_B23' [AB133] –**

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

Gaano ka kadalas nagkaroon ng mga sintomas na iyon? Masasabi mo bang...

- ☐ 01 NOT AT ALL
- ☐ 02 Once or twice in the past 12 months
- ☐ 02 Isa o dalawang beses sa nakalipas na labindalawang buwan
- ☐ 03 Every couple of months
- ☐ 03 Isang beses kada dalawang buwan
- ☐ 04 Every month, or
- ☐ 04 Isang beses kada buwan, o
- ☐ 05 Every week?
- ☐ 05 Isang beses kada linggo?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_B24’ [AB134] –**

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

Gaano mo ikinababahala ang kalidad ng hangin sa inyong lugar? Masasabi mo bang...

- ☐ 01 It is not a concern
- ☐ 01 Hindi ikinababahala
- ☐ 02 A moderate concern
- ☐ 02 Medyo ikinababahala
- ☐ 03 A significant concern
- ☐ 03 Talagang ikinababahala
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_B25’ [AB135] –**

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

Ano ang sa tingin mo ang kalidad ng hangin sa inyong lugar? Masasabi mo bang...

- ☐ 01 Excellent
- ☐ 01 Napakaganda
- ☐ 02 Very good
- ☐ 02 Talagang maganda
- ☐ 03 Good
- ☐ 03 Maganda
- ☐ 04 Fair, or
- ☐ 04 Okay lang, o
- ☐ 05 Poor
- ☐ 05 Pangit
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_B26’ [AB136] –**

In the past 12 months, have you had an illness or symptoms that you think was caused by pollution in the air outdoors?

Sa nakaraang labindalawang buwan, nagkaroon ka ba ng sakit o mga sintomas na sa palagay mo ay sanhi ng polusyon sa hangin sa labas?

**[IF NEEDED, SAY: Things like dust, smog, automobile exhaust, and chemicals can cause outdoor air pollution].**

**[IF NEEDED, SAY: Dahil sa mga bagay tulad ng alikabok, smog, usok ng sasakyan, at mga kemikal na maaaring magdulot ng polusyon sa hangin]**

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

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

**'QA17\_B27' [AB137] –**

The next questions are about the outdoor air quality and how it affects your activities.

Please think of the past 12 months. How many times did you reduce or change your outdoor activity levels because you thought the air quality was bad or was affecting how well you felt? Would you say...

Ang mga sumusunod ay mga katanungan tungkol sa kalidad ng hangin sa inyong paligid at kung paano ito nakakaapekto sa inyong mga aktibidad. Pag-isipan ang nakalipas na labindalawang buwan. Gaano mo kadalas binawasan o binago ang inyong mga aktibidad sa labas dahil sa tingin mo ay masama ang kalidad ng hangin o dahil naaapektuhan nito ang inyong pakiramdam? Masasabi mo bang...

**[IF NEEDED: For example, avoiding outdoor exercise or strenuous outdoor activity.]**

**[IF NEEDED: Halimbawa, iniwasan mong mag-exercise sa labas o gumawa ng mabibigat na aktibidad sa labas.]**

- ☐ 01 None
- ☐ 01 Hindi kailanman
- ☐ 02 1 to 3 times,
- ☐ 02 Isa hanggang tatlong beses,
- ☐ 03 4 to 6 times, or
- ☐ 03 Apat hanggang anim na beses, o
- ☐ 04 More than 6 times?
- ☐ 04 Mahigit sa anim na beses?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B28' [AB138] -**

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

Maaaring may mga nagbabahagi ng impormasyon tungkol sa kalidad ng hangin para malaman ng publiko ang antas ng polusyon ng kanilang hangin. Nakarinig o nakabasa ka ba tungkol sa air quality index o mga alerto sa kalidad ng hangin sa lugar na kung saan ka nakatira?

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

**If = 2, -7, -8, goto 'QA17\_B30'**

**'QA17\_B29' [AB139] –**

Did you reduce or change your outdoor activity level based on the air quality index or air quality alerts?

Binawasan o binago mo ba ang aktibidad mo sa labas batay sa air quality index o mga alerto sa kalidad ng hangin?

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



**'PN\_QA17\_B30'** [PN\_AB22] -  
**PROGRAMMING NOTE AB22 :**  
**IF AA3 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";**  
**ELSE BEGIN DISPLAY WITH "Has"**

**'QA17\_B30'** [AB22] –

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

{Maliban sa panahon ng pagbubuntis, nasabihan na ba} kayo ng doktor kailanman na mayroon kayong diabetes o sugar diabetes? {Nasabihan na ba} kayo ng doktor kailanman na mayroon kayong diabetes o sugar diabetes?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 BORDERLINE OR PRE-DIABETES
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 3, goto 'AB81'**

**'PN\_QA17\_B31'** [PN\_AB99] -  
**PROGRAMMING NOTE AB99 :**  
**IF AA3 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";**  
**ELSE BEGIN DISPLAY WITH "Has"**

**'QA17\_B31'** [AB99] –

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

{Maliban sa panahon ng pagbubuntis, nasabihan na ba} kayo ng doktor kailanman na mayroon kayong pre-diabetes, o borderline diabetes? {Nasabihan na ba} kayo ng doktor kailanman na mayroon kayong pre-diabetes, o borderline diabetes?

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

**'PN\_QA17\_B32'** [PN\_AB23] -  
**PROGRAMMING NOTE AB23 :**  
**IF AB22 = 1 THEN CONINTUE WITH AB23 ;**  
**ELSE SKIP TO PROGRAMMING NOTE AB81**

**'QA17\_B32'** [AB23] –

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

Gaano katanda kayo noong unang sinabi sa inyo ng doktor na may diabetes kayo?

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

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_B33’ [AB51] –**

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

Nasabihan ba kayo na mayroon kayong Type 1 o Type 2 diabetes?

**[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: "Ang Type 1 diabetes ang resulta ng di paggawa ng katawan ng insulin at karaniwang nada-diagnose sa mga bata at mga kabataan. Ang Type 2 diabetes ang resulta ng pagkawala ng kakayahang gamitin ng katawan ang insulin at ito ang pinakakaraniwang uri ng diabetes."]**

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

ANOTHER TYPE (Specify:\_\_\_\_\_)

**‘QA17\_B34’ [AB24] –**

Are you now taking insulin?

Gumagamit ba kayo ngayon ng insulin?

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

**‘QA17\_B35’ [AB25] –**

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

Umiinom ba kayo ngayon ng pills na pang-diabetes para pababain ang blood sugar ninyo?

**[IF NEEDED, SAY: “These are sometimes called oral agents or oral hypoglycemic agents.”]**

**[IF NEEDED, SAY: "Kung minsan tinatawag ang mga ito na oral agents o oral hypoglycemic agents."]**

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

**‘QA17\_B36’ [AB28] –**

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

Mga ilang beses nitong nakaraang 12 buwan sinuri ng doktor ang inyong mga paa para sa anumang mga sugat o pangangati?

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

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B37'** [AB63] -

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.

Kailan kayo huling nagpatingin sa mata kung saan na-dilate o pinalaki ang itim ng inyong mata? Nagkaroon ito ng epekto na nasisilaw sa liwanag ang inyong mata sa loob ng maikling panahon.

- ☐ 01 WITHIN THE PAST MONTH
- ☐ 02 WITHIN THE PAST YEAR (1-12 MONTHS AGO)
- ☐ 03 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO)
- ☐ 04 2 OR MORE YEARS AGO
- ☐ 05 NEVER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_B38'** [AB112] –

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?

Natulungan na ba kayo ng inyong mga doktor o iba pang medical provider upang makagawa ng plano nang sa ganoon malalaman ninyo kung paano alagaan ang inyong diabetes?

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

**'QA17\_B39'** [AB114] –

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

Gaano ang tiwala ninyo na kaya ninyong kontrolin at pangalagaan ang inyong diabetes? Masasabi ba ninyo na kayo ay...

- ☐ 01 Very confident,  
01 Lubos na may tiwala
- ☐ 02 Somewhat confident,  
02 Medyo may tiwala.
- ☐ 03 Not Walang masyadong tiwala, o  
03 Not too confident, or
- ☐ 04 Not at all confident?  
04 Walang tiwala kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_B40'** [PN\_AB81] -  
**PROGRAMMING NOTE AB81 :**  
**IF AA3 = 2 (FEMALE) CONTINUE WITH AB81 ;**  
**ELSE GO TO AB29**

**'QA17\_B40'** [AB81] –

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

Nasabihan na ba kayo ng doktor kailanman na nagkaroon kayo ng diabetes noong panahon lamang ng pagbubuntis ninyo

**[IF NEEDED, SAY: "This is also known as gestational diabetes."]**

**[IF NEEDED, SAY: "Kilala rin ito bilang gestational diabetes."]**

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

**'QA17\_B41'** [AB29] –

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

Nasabihan na ba kayo ng doktor kailanman na mayroon kayong altapresyon?

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

**If = 2, 3, -7, -8, goto 'QA17\_B43'**

**'QA17\_B42'** [AB30] –

Are you now taking any medications to control your high blood pressure?

Umiinom ba kayo ngayon ng anumang gamot para kontrolin ang inyong altapresyon?

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

**'QA17\_B43'** [AB34] –

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

Nasabihan na ba kayo ng doktor kailanman na mayroon kayong anumang uri ng sakit sa puso?

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

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

**‘QA17\_B44’ [AB52] –**

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

Nasabihan na ba kayo ng doktor kailanman na mayroon kayong heart failure o congestive heart failure?

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

**‘QA17\_B45’ [AB118] –**

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?

Natulungan na ba kayo ng inyong mga doktor o iba pang medical provider upang makagawa ng plano nang sa ganoon malalaman ninyo kung paano alagaan ang inyong sakit sa puso?

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

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

## Section C : Health Behaviors

**'QA17\_C1'** [AD37W] –

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

Tungkol sa paglalakad bilang paraan ng transportasyon ang sumusunod na mga tanong. Tatanungin ko kayo nang hiwalay tungkol sa paglalakad para maglibang o mag-ehersisyo.

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

Nitong naraang 7 araw, naglakad ba kayo para marating ang isang lugar, at inabot kayo nang kahit man lamang 10 minuto?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 UNABLE TO WALK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, -7, -8, goto 'QA17\_C4'**

**If = 3, goto 'QA17\_C8'**

**'QA17\_C2'** [AD38W] –

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

Nitong nakaraang 7 araw, ilang beses ninyo ginawa iyon?

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

**[IF NEEDED, SAY: "Naglakad kahit man lamang 10 minuto upang marating ang isang lugar."]**

\_\_\_\_\_ times per week [HR: 0 - 999]

**If AD38W = 0, goto 'QA17\_C4'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, goto 'QA17\_C4'**

**'PN\_QA17\_C3'** [PN\_AD39W] -

**PROGRAMMING NOTE AD39W :**

**IF AD38W = 1 DISPLAY "How long did that walk take";**

**IF AD38W > 1 DISPLAY "On average, how long did those walks take"**

**'QA17\_C3'** [AD39W] –

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

Gaano katagal inabot ang paglalakad na iyon? Sa karaniwan, gaano katagal inabot ang mga paglalakad na iyon?

\_\_\_\_\_ MINUTES PER WALK

\_\_\_\_\_ HOURS PER DAY

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_C4' [PN\_AD40W] -**  
**PROGRAMMING NOTE AD40W :**  
**IF AD37W = 1 (WALK FOR TRANSPORTATION) DISPLAY "Please do not include walking for transportation."**

**'QA17\_C4' [AD40W] –**

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.

Paminsan-minsan, maaaring naglalakad kayo para sa kasiyahan, libangan, ehersisyo, o upang ilakad ang aso. Nitong nakaraang 7 araw, naglakad ba kayo kahit man lamang 10 minuto para sa anumang dahilan na ganito? {Mangyaring huwag bilangin ang paglalakad bilang paraan ng transportasyon.}

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

**If = 2, -7, -8, goto 'QA17\_C7'**

**'QA17\_C5' [AD41W] –**

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

Nitong nakaraang 7 araw, ilang beses ninyo ginawa iyon?

**[IF NEEDED, SAY: "Walk for at least 10 minutes for fun, relaxation, exercise, or to walk the dog."]**

**[IF NEEDED, SAY: "Naglakad kahit man lamang 10 minuto para sa kasiyahan, libangan, ehersisyo, o upang ilakad ang aso."]**

\_\_\_\_\_ times per week [HR: 0 - 180]

**If =0 , goto 'QA17\_C7'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, goto 'QA17\_C7'**

**'PN\_QA17\_C6' [PN\_AD42W] -**

**PROGRAMMING NOTE AD42W :**

**IF AD41W = 1 DISPLAY "How long did that walk take";**

**IF AD41W > 1 DISPLAY "On average, how long did those walks take"**

**'QA17\_C6' [AD42W] –**

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

Gaano katagal inabot ang paglalakad na iyon? Sa karaniwan, gaano katagal inabot ang mga paglalakad na iyon?

\_\_\_\_\_ MINUTES PER DAY

\_\_\_\_\_ HOURS PER DAY

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_C7' [AC100] –**

The next question is about your overall exercise. Exercise includes walking, housekeeping, jogging, weights, a sport or playing with your kids. It can be done on the job, around the house, just for fun or as a work-out. In the past 7 days, on how many days did you exercise for at least 20 minutes at a time?

Ang susunod na tanong ay tungkol sa lahat ng inyong exercise. Kabilang sa exercise ang paglalakad, pagliligpit at paglilinis ng bahay, pag-jo-jogging, pagbubuhay ng mga weight, sports o pakikipaglaro sa inyong mga anak. Pwede itong gawin habang kayo ay nasa trabaho, sa loob o labas ng bahay, para lang sa katuwaan o bilang isang work-out. Sa nakaraang pitong araw, ilang araw kang nag-exercise kahit papaano dalawampung minuto sa isang araw?

\_\_\_\_\_ DAYS PER WEEK

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_C8' [AE2] –**

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

Pag-isipan mo naman ang mga pagkain na kinain o ininom mo sa loob ng nakaraang buwan. Ibig sabihin nito ay sa loob ng nakaraang tatlong araw. Kabilang dito ang mga kinain at ininom mo sa almusal, tanghalian, merienda o hapunan. Sa loob nito, ilang beses kang kumain ng prutas? Huwag mong isama ang mga juice.

**[IF NEEDED, SAY: "Your best guess is fine."]**

**[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"]**

\_\_\_\_\_ TIMES

**'CAT\_AE2' [CAT\_AE2] –**

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

**'QA17\_C9' [AE3] –**

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

[Sa nakaraang buwan,] ilang beses ka kumain ng anumang uri ng piniritong patatas? Kasama dito ang French fries, home fries, at hash browns.

**[IF NEEDED, SAY: "You can tell me per day, per week, or month"]**

**[IF RESPONDENT ASKS, SAY: "Do not include potato chips."]**

**[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK "Was that per day, week, or month?"]**

\_\_\_\_\_ TIMES

**'CAT\_AE3' [CAT\_AE3] -**

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



**'QA17\_C10' [AE5] –**

During the past month, how many times did you eat cooked dried beans, such as refried beans, baked beans, or bean soup? Do not include green beans.

Sa loob ng nakaraang buwan, ilang beses kang kumain ng pagkaing gaya ng refried beans, baked beans, o bean soup? Huwag mong isama ang mga katulad ng sitaw.

**[IF NEEDED SAY: "You can tell me per day, per week, or month"]**

**[IF NEEDED, SAY: "Puede ninyong sabihin sa akin kung bawat araw, bawat linggo o bawat buwan."]**

**[IF NEEDED, SAY: "Your best guess is fine."]**

**[IF NEEDED, SAY: "Okay lang ang pinakamalapit mong tantiya."]**

**[IF R GIVES A NUMBER WITHOUT A TIME FRAME, ASK: "Was that per day, week or month?"]**

\_\_\_\_\_TIMES

**'CAT\_AE5' [CAT\_AE5] - \_\_\_\_\_PER MONTH**

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

**'PN\_QA17\_C11' [PN\_AE7] -**

**PROGRAMMING NOTE AE7:**

**IF AE3>0 (ATE FRIED POTATOES) THEN DISPLAY "Do not include fried potatoes."**

**ELSE DO NOT DISPLAY**

**'QA17\_C11' [AE7] –**

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

"[Sa loob ng nakaraang buwan,] ilang beses kang kumain ng iba pang mga gulay gaya ng salad, sitaw, o patatas? {Huwag mong isama ang mga patatas na pinirito.}

**[IF NEEDED, SAY: "You can tell me per day, per week, or month"]**

**[IF NEEDED, SAY: "Puede ninyong sabihin sa akin kung bawat araw, bawat linggo o bawat buwan."]**

**[IF STRONGLY NEEDED, SAY: "Such as tomatoes, carrots, onions, or broccoli."]**

**[IF NEEDED, SAY: "Tulad ng mga kamatis, carrot, sibuyas, o broccoli."]**

**][ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: "Rice is not a vegetable."]**

**[ONLY IF RESPONDENT ASKS ABOUT RICE, SAY: "Ang kanin ay hindi gulay."]**

\_\_\_\_\_TIMES

**'CAT\_AE7' [CAT\_AE7] -**

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

**'QA17\_C12'** [AC11] –

During the past month, how often did you drink regular soda or pop that contains sugar? Do not include diet soda.

Nitong nakaraang buwan, gaano kadalang kayo uminom ng regular soda o softdrink na may asukal? Huwag ninyong bilangin ang diet soda.

**[IF NEEDED, SAY: "Do not include canned or bottled juices or teas. Your best guess is fine."]**

**[IF NEEDED, SAY: "Huwag ninyong bilangin ang mga de-lata o naka-boteng juice o tsaa. Ayos lang ang inyong pinakamagaling na tantya."]**

**'CAT\_AC11'** [CAT\_AC11] -

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

**'QA17\_C13'** [AC46] –

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

Nitong nakaraang buwan, gaano kadalang kayo uminom ng pinatamis na mga inuming may katas ng prutas, at ng sports o energy drink?

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

**[IF NEEDED, SAY: 「Gaya ng lemonada, Gatorade, Snapple, o 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

**'CAT\_AC46'** [CAT\_AC46] –

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

**'QA17\_C14' [AC47] –**

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

Kahapon, gaano karaming baso ng tubig ang ininom ninyo sa trabaho, sa bahay at saan pa man? Bilangin ang isang tasa na isang baso at bilangin ang isang bote ng tubig na dalawang baso. Bilangin ang ilang sipsip, gaya ng mula sa water fountain, na kulang sa isang baso. Ayos lang ang inyong pinakamagaling na tantya.

**[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: 「Bilangin ang tubig na galing sa gripo, gaya ng nakukuha sa lababo, gripo, fountain, o pitsel at saka tubig na nakabote gaya ng Aquafina®. Huwag bilangin ang tubig na pinamatamis at hinaluan ng pampalasa.」 ]**

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

**[IF NEEDED, SAY: 「Bilangin ang isang tasa o ang 8 onsa na isang baso.」 ]**

**'CAT\_AC47' [CAT\_AC47] –**

- ☐ 99 LESS THAN 1 GLASS (e.g., SIPS FROM A FOUNTAIN)
- ☐ 00 NONE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_C15' [AC42] –**

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

Gaano kadalas kayo nakakahanap ng sariwang mga prutas at mga gulay sa inyong kapitbahayan? Masasabi ba ninyo na...

- ☐ 01 Never,
- ☐ 02 Sometimes,
- ☐ 03 Usually, or
- ☐ 04 Always?
- ☐ 05 DOESN'T EAT F & V
- ☐ 06 DOESN'T SHOP FOR F&V
- ☐ 07 DOESN'T SHOP IN HIS/HER NEIGHBORHOOD\_
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_C16'** [PN\_AC44] -  
**PROGRAMMING NOTE AC44 :**  
**IF AC42 = 2, 3, OR 4, THEN CONTINUE WITH AC44 ;**  
**ELSE GO TO PROGRAMMING NOTE AE15**

**'QA17\_C16'** [AC44] –

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

Gaano kadalas na abot-kaya ang mga iyon? Masasabi ba ninyo na...

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

**[IF NEEDED, SAY: 「Gaano kadalas abot-kaya ang mga sariwang prutas at gulay na makukuha ninyo sa inyong kapitbahayan? Masasabi ba ninyo na...」 ]**

- ☐ 01 Never
- ☐ 02 Sometimes\_
- ☐ 03 Usually, or
- ☐ 04 Always?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_C17'** [AE15] –

Now, I am going to ask about various health behaviors. Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?

Ngayon, tatanungin ko kayo tungkol sa mga iba't-ibang ugaling pangkalusugan. Sa buong buhay ninyo, hindi kukulangin sa 100 sigarilyo ba ang nahithit ninyo sa kabuuan?

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

**If = 2, goto 'QA17\_C27'**

**'QA17\_C18'** [AE15A] –

Do you now smoke cigarettes every day, some days, or not at all?

Naninigarilyo ba kayo ngayon nang araw-araw, ilang araw lamang, o hindi kailanman?

- ☐ 01 EVERY DAY
- ☐ 02 SOME DAYS
- ☐ 03 NOT AT ALL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, goto 'QA17\_C20'**

**If =3, -7, -8, goto 'QA17\_C27'**

**‘QA17\_C19’ [AD32] –**

On average, how many cigarettes do you now smoke a day?  
Sa karaniwan, nakaka-ilang sigarilyo ka sa isang araw?

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

\_\_\_\_\_ NUMBER OF CIGARETTES [HR: 0-120]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, go to ‘QA17\_C21’**

**‘PN\_QA17\_C20’ [PN\_AE16] -**

**PROGRAMMING NOTE AE16 :**

**IF AE15A = 2 (SMOKE SOME DAYS), CONTINUE WITH AE16 ;**

**ELSE GO TO PN\_AC49**

**‘QA17\_C20’ [AE16] –**

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

Nitong nakaraang 30 araw, noong nanigarilyo kayo, naka-ilang sigarilo kayo sa bawat araw?

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

**[IF NEEDED, SAY: " Noong mga araw na nanigarilyo kayo." AND IF R SAYS, A “PACK”, CODE THIS AS 20 CIGARETTES]**

\_\_\_\_\_ NUMBER OF CIGARETTES [HR: 0-120]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘PN\_QA17\_C21’ [PN\_AC49] -**

**PROGRAMMING NOTE AC49 :**

**IF AE15A = 1 (SMOKE EVERY DAY) OR AE15A = 2 (SMOKE SOME DAYS), CONTINUE WITH AC49 ;**

**ELSE GO TO PN AC81B**

**‘QA17\_C21’ [AC49] –**

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

Nitong nakaraang 12 buwan, tumigil na ba kayo sa paninigarilyo nang isang araw man lang o mas matagal pa dahil sinusubukan ninyong huminto sa paninigarilyo?

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

**‘QA17\_C22’ [AC50] –**

Are you thinking about quitting smoking in the next six months?

Iniisip ba ninyong huminto sa paninigarilyo sa susunod na anim na buwan?

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

'AC104B' [AC104B] –

In the past 12 months, did you use nicotine gum, nicotine lozenges, or a nicotine inhaler?

{Noong huli kayong sumubok na huminto, sinubukan ba ninyo/ Nitong nakaraang 12 buwan, nasubukan ba ninyo}, gumamit ba kayo ng nicotine gum, nicotine lozenges, o nicotine inhaler?

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

'QA17\_C24' [AC75C] –

[{The last time you tried to quit / In the past 12 months}] did you

{Noong huli kayong sumubok na huminto, sinubukan ba ninyo/ Nitong nakaraang 12 buwan, nasubukan ba ninyo}, sinubukan ba ninyo

Call a telephone quitting helpline?

Ang pagtawag sa telepono ng isang helpline para sa paghinto ng paninigarilyo?

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

'PN\_QA17\_C25' [PN\_AC77] -

**PROGRAMMING NOTE AC77 :**

**IF AE15A = 1 (EVERY DAY) OR AE15A = 2 (SOME DAYS), CONTINUE WITH AC77 ;  
ELSE IF AE15A =3 (NOT AT ALL), SKIP TO PN AC81B**

'QA17\_C25' [AC77] –

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

Nitong nakaraang 12 buwan, pinayuhan ba kayo ng doktor o ng iba pang health professional na huminto ng paninigarilyo?

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

'QA17\_C26' [AC78] -

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

Nitong nakaraang 12 buwan, ipinadala ba kayo ng doktor o ng iba pang health professional sa isang programa, o binigyan ba kayo ng impormasyon tungkol sa programa para sa paghinto ng paninigarilyo?

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

**'QA17\_C27'** [AC81B] -

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

Humithit na ba kayo kahit kailan ng electronic cigarettes, tinatawag din na e-cigarettes o vaporizer cigarettes?

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

**If = 2, -7, -8, go to 'QA17\_C30'**

**'QA17\_C28'** [AC82B] -

During the past 30 days, on how many days did you use electronic cigarettes?

Anu-ano ang mga dahilan ninyo sa paggamit ng electronic cigarettes?

\_\_\_\_\_ NUMBER OF DAYS [HR: 0 - 30]

**If = 0, go to 'QA17\_C30'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, go to 'QA17\_C30'**

**'QA17\_C29'** [AC83B] -

What best describes your reasons for using e-cigarettes?

Ano ang pinakamabuting dahilan ninyo sa paggamit ng e-cigarettes?

**[CODE ALL THAT APPLY]**

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

OTHER (SPECIFY: \_\_\_\_\_)

**'QA17\_C30'** [AC115] –

The next questions are about marijuana also called cannabis or weed, hashish, and other products containing THC. There are many methods for consuming these products, such as smoking, vaporizing, dabbing, eating, or drinking.

Have you ever, even once, tried marijuana or hashish in any form?

Ang mga sumusunod ay mga tanong tungkol sa marijuana, na tinatawag ding cannabis o damo, hashish, at iba pang mga produkto na may THC. Maraming paraan ng paggamit ng mga produktong ito, tulad ng paghithit, pagkain, pag-inom, pagvaporize (o pagsingaw), o dabbing. Nakasubok ka na ba, kahit Gaano na katagal mula noong huli kang gumamit ng marijuana o hashish?

**[IF NEEDED: THC is the active ingredient in marijuana.]**

**[IF NEEDED: THC ay ang aktibong sangkap sa marijuana.]**

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

**If = 2, -7, -8, go to AC128**

**'QA17\_C31'** [AC116] –

How long has it been since you last used marijuana or hashish in any form?

Gaano na katagal mula noong huli kang gumamit ng marijuana o hashish?

**'CAT\_AC116'** [CAT\_AC116] -

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

**'PN\_QA17\_C32'** [PN\_AC117] -

**PROGRAMMING NOTE AC117:**

**IF AGE >25, THEN GO TO AC128;**

**IF AC116 >=30 DAYS OR >1 MONTH, THEN GO TO AC128;**

**ELSE CONTINUE WITH AC117;**

**'QA17\_C32'** [AC117] –

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

Sa nakaraang tatlong araw, ilang araw kang gumamit ng marijuana, hashish, o iba pang produktong may THC?

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

**If = 1, go to AC128**



**‘QA17\_C33’ [AC118] –**

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

Gaano kadalas kang gumamit ng tabako sa panahong gumagamit ka rin ng marijuana? Masasabi mo bang...

- ☐ 01 Usually
- ☐ 02 Sometimes
- ☐ 03 Never
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_C34’ [AC119] –**

During the past 30 days, how did you use marijuana? Did you...Smoke it in a joint, bong, or pipe?

Sa loob ng nakaraang tatlung araw, paano mo ginamit ang marijuana? Hinithit mo ba ito nang nakabilot (sa isang joint) o gamit ng isang bong o pipe?

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

**‘QA17\_C35’ [AC120] –**

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

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

Sa loob ng nakaraang tatlung araw, paano mo ginamit yung marijuana? Sumigarilyo ka ba ng isang cigar na may parte na ang laman ay marijuana o isang buong cigar na ang laman lang ay marijuana, na minsan ay tinatawag ring isang blunt?

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

**‘QA17\_C36’ [AC121] –**

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

[Sa loob ng nakaraang tatlung araw, paano mo ginamit ang marijuana?] Kinain mo ba ito?

**[IF NEEDED SAY: For example, in brownies, cakes, cookies or candy]**

**[IF NEEDED, SAY: Halimbawa, kahalo ng brownies, cake, cookies, o candy]**

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

**‘QA17\_C37’ [AC122] –**

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

[Sa loob ng nakaraang tatlong araw, paano mo ginamit ang marijuana?] Ininom mo ba ito?

**[IF NEEDED SAY: For example, in tea, cola, alcohol or other drinks]**

**[IF NEEDED SAY: Halimbawa, kahalo ng tea, cola, alak o iba pang mga inumin]**

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

**‘QA17\_C38’ [AC123] –**

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

[Sa loob ng nakaraang tatlong araw, paano mo ginamit ang marijuana?] Pinasingaw o vinaporize mo ba ito?

**[IF NEEDED SAY: For example, in an e-cigarette type vaporizer]**

**[IF NEEDED, SAY: Halimbawa, sa isang vaporizer na parang e-cigarette]**

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

**‘QA17\_C39’ [AC124] –**

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

[Sa loob ng nakaraang tatlong araw, paano mo ginamit ang marijuana?] Dinab mo ba ito?

**[IF NEEDED SAY: For example, using butane hash oil, wax or concentrates]**

**[IF NEEDED SAY: Halimbawa, gamit ng butane hash oil, wax o mga concentrate]**

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

**‘QA17\_C40’ [AC125] –**

[During the past 30 days, how did you use marijuana?] Did you...Use it some other way?

[Sa loob ng nakaraang tatlong araw, paano mo ginamit ang marijuana?] Ginamit mo ba ito sa iba pang pamamaraan?

- ☐ 01 YES ( SPECIFY\_\_\_\_\_)
- ☐ 02 NO
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_C41’ [AC126] –**

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

Inirekomenda ba ng isang doktor o ibang health care provider ang paggamit mo ng marijuana sa nakaraang buwan?

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

**If = 2, go to AC128**

**‘QA17\_C42’ [AC127] –**

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

Inirekomenda ba ng isang doktor o ibang health care provider ang paggamit mo ng marijuana sa nakaraang buwan?

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

**‘QA17\_C43’ [AC128] –**

Have you used heroin in the past 12 months?

Gumamit ka ba ng heroin sa loob ng nakaraang labindalawang buwan?

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

**‘QA17\_C44’ [AC129] –**

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

Sa loob ng nakaraang labindalawang buwan, gumamit ka ba ng mga inireresetang painkiller sa paraang hindi sumusunod sa mga direksyon na ibinigay ng inyong doktor? Halimbawa, Vicodin, OxyContin, Norco, Hydrocodone, Percocet at Methadone.

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

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

**'QA17\_C45' [AC130] –**

How many of these prescription pain killers are you taking?

Ilan sa mga inireresetang painkiller na ito ang iniinom mo ngayon?

- ☐ 00 0
- ☐ 01 1
- ☐ 02 2
- ☐ 03 3
- ☐ 04 More than 3
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_C46' [AC131] –**

Did you get the prescription(s) from one doctor or from more than one doctor?

Nakuha mo ba ang reseta mula sa isang doktor o mahigit sa isang doktor?

- ☐ 01 ONE DOCTOR
- ☐ 02 MORE THAN ONE DOCTOR
- ☐ 03 I DIDN'T GET IT FROM A DOCTOR
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 32, -7, -8, go to AC133**

**'QA17\_C47' [AC132] –**

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

Pumirma ka ba ng isang kontrata sa inyong doktor tungkol sa mga gamot na ito?

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

**'QA17\_C48' [AC133] –**

What condition or conditions are you taking the medicine for?

Para sa anong kondisyon o mga kondisyon mo iniinom ang gamot?

**[CHECK ALL THAT APPLY]**

- ☐ 01 DENTAL WORK/DENTAL PAIN
- ☐ 02 SURGERY, NOT ACCIDENT-RELATED
- ☐ 03 RECENT INJURY
- ☐ 04 CHRONIC PAIN, REGARDLESS OF CAUSE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section D: General Health, Disability, and Sexual Health

**'QA17\_D1' [AE17] –**

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

Tungkol sa inyong tangkad at timbang ang sumusunod na mga tanong. Gaano katangkad kayo kapag walang suot na sapatos?

**[IF NEEDED, SAY: "About how tall?"]**

**[IF NEEDED, SAY: 「 "Humigit-kumulang, gaano katangkad? 」 ]**

\_\_\_\_\_ FEET

\_\_\_\_\_ INCHES

\_\_\_\_\_ METERS

\_\_\_\_\_ CENTIMETERS

☐ -7 REFUSED

☐ -8 DON'T KNOW

**'PN\_QA17\_D2' [PN\_AE18] -**

**PROGRAMMING NOTE AE18 :**

**IF AA3 = 2 (FEMALE) AND [AAGE < 50 OR AA2A < 5 (YOUNGER THAN 50 YEARS OLD)], DISPLAY "When not pregnant, how";**

**ELSE DISPLAY "How"**

**'QA17\_D2' [AE18] –**

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

{Kapag hindi buntis, gaano} kabigat kayo kapag walang suot na sapatos? {Gaano} kabigat kayo kapag walang suot na sapatos?

**[IF NEEDED, SAY: "About how much?"]**

**[IF NEEDED, SAY: 「 Humigit-kumulang, gaano? 」 ]**

\_\_\_\_\_ POUNDS

\_\_\_\_\_ KILOGRAMS

☐ -7 REFUSED

☐ -8 DON'T KNOW

**'QA17\_D3' [AD50] –**

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

Kayo ba ay bulag, o bingi, o may malubhang problema sa paningin o pandinig?

☐ 01 YES

☐ 02 NO

☐ -7 REFUSED

☐ -8 DON'T KNOW

**If = 2, -7, -8, goto 'QA17\_D5'**

**'QA17\_D4' [AL8] –**

Are you legally blind?

Kayo ba ay legally blind?

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

**'QA17\_D5' [AD43B] –**

We are asking a few questions about people's sexual experiences. All answers will be kept private.  
May ilang tanong kami tungkol sa mga karanasang sexual ng mga tao. Pananatiliing lihim ang lahat ng mga sagot.

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

Nitong nakaraang 12 buwan, ilan na ang naging katalik ninyo?

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

**If  $\geq 0$ , goto 'QA17\_D7'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, goto 'QA17\_D7'**

**'QA17\_D6' [AD44B] –**

Can you give me your best guess?

Maaari bang sabihin ninyo sa akin ang inyong pinakamagaling na tantya?

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

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

**'CAT\_AD44B' [CAT\_AD44B] - CAT\_AD44B**

- ☐ 01 0 PARTNERS
- ☐ 02 1 PARTNER
- ☐ 03 2-3 PARTNERS
- ☐ 04 4-5 PARTNERS
- ☐ 05 6-10 PARTNERS
- ☐ 06 MORE THAN 10 PARTNERS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_D7' [PN\_AD45B] -**

**PROGRAMMING NOTE AD45 :**

**IF AD43B = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR AD44 =0, GO TO PROGRAMMING NOTE AD46B ;**

**ELSE CONTINUE WITH AD45 ;**

**IF AD43B OR AD44 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner male or female";**

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

'QA17\_D7' [AD45B] –

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

{Lalaki ba o babae ang katalik na iyon}? {Nitong nakaraang 12 buwan, lalaki ba, babae o kapwa lalaki at babae ang mga naging katalik ninyo}?

- ☐ 01 MALE
- ☐ 02 FEMALE
- ☐ 03 BOTH MALE AND FEMALE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_D8' [PN\_AD46B] -

**PROGRAMMING NOTE AD46 :**

**IF AA3 = 1 (MALE), DISPLAY "Gay" IN QUESTION AND "Gay" IN HELP SCREEN;**

**ELSE IF AA3 =2 (FEMALE), DISPLAY "Gay, Lesbian" IN QUESTION AND "Gay and Lesbian" IN HELP SCREEN**

'QA17\_D8' [AD46B] –

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

Itiinuturing ba ninyo ang sarili ninyo na straight o heterosexual, na gay {,lesbian}, o homosexual, o bisexual?

**[IF NEEDED, SAY: "Straight or Heterosexual people have sex with, or are primarily attracted to people of the opposite sex, Gay {and Lesbian} people have sex with or are primarily attracted to people of the same sex, and Bisexuals have sex with or are attracted to people of both sexes."]**

**[IF NEEDED, SAY: "Nakikipagtalik o pangunahing naaakit ang mga taong Straight o Heterosexual sa mga tao sa kabilang kasarian, nakikipagtalik o pangunahing naaakit ang mga taong Gay {at Lesbian} sa mga taong may katulad na kasarian, at nakikipagtalik o naakit ang mga taong Bisexual sa mga tao sa magkabilang kasarian.]**

- ☐ 01 STRAIGHT OR HETEROSEXUAL
- ☐ 02 GAY, LESBIAN, OR HOMOSEXUAL
- ☐ 03 BISEXUAL
- ☐ 04 NOT SEXUAL/CELIBATE/NONE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER (SPECIFY: \_\_\_\_\_)

'PN\_QA17\_D9' [PN\_AD60B] -

**PROGRAMMING NOTE AD60 :**

**IF [AA3 = 1 (MALE) AND AD45B = 1 (MALE)] OR [AA3 = 2 (FEMALE) AND AD45B = 2 (FEMALE)] OR [AD45B = 3, -7, OR -8] OR [IF AD46B ≠ 1] CONTINUE WITH AD60B ;**

**ELSE GO TO AD65a**

**'QA17\_D9'** [AD60B] –

Are you legally married to someone of the same sex?

Legal na kasal ba kayo sa taong may kasarian na katulad ng inyo?

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

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

**If = 1, goto 'QA17\_D11'**

**'QA17\_D10'** [AD61B] –

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

Kinikilala ba kayo ng State of California bilang legally registered domestic partner ng taong may kasarian na katulad ng inyo?

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

**'QA17\_D11'** [AD65A] –

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

Anong kasarian ang itinala para sa inyo sa inyong orihinal na birth certificate noong ipinanganak kayo?

- ☐ 01 MALE
- ☐ 02 FEMALE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_D12'** [AD66B] –

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

Sa kasalukuyan, inilalarawan ba ninyo ang inyong sarili bilang lalaki, babae, o transgender?

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

**If = 1, 2, 3, goto 'PN\_QA17\_D14'**

**If = -7, -8, goto 'QA17\_D15'**



**'PN\_QA17\_D13'** [PN\_AD67B] -  
**PROGRAMMING NOTE AD67 :**  
**IF AD66 = 4 THEN CONTINUE WITH AD67 ;**  
**ELSE SKIP TO AD68**

**'QA17\_D13'** [AD67B] –

What is your current gender identity?

Ano ang inyong kasalukuyang gender identity, o ang inyong itinuturing na kasarian ninyo?

- ☐ -1 SPECIFY: (\_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'SPECIFY\_AD67B'** [SPECIFY\_AD67B] -  
 SPECIFY: (\_\_\_\_\_)

**'PN\_QA17\_D14'** [PN\_AD68B] -  
**PROGRAMMING NOTE AD68 :**  
**IF [AD65A = 1 (MALE) AND AD66 = 1 (MALE)] OR [AD65A = 2 (FEMALE) AND AD66 = 2 (FEMALE)] THEN**  
**SKIP TO AD79 ;**  
**ELSE CONTINUE WITH AD68 ;**  
**DISPLAYS;**  
**IF [AD65 = 1 OR AD65A = 1 (MALE) AND AD66 = 2 (FEMALE), THEN DISPLAY {male} and {female};**  
**IF [AD65 = 1 OR AD65A = 1 (MALE) AND AD66 = 3 (TRANSGENDER), THEN DISPLAY {male} and**  
**{transgender};**

**'QA17\_D14'** [AD68B] –

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

Upang matiyak lamang, {INSERT RESPONSE FROM QA15\_D25} ang itinala para sa inyo noong ipinanganak kayo, subalit sa kasalukuyan inilalarawan ninyo ang sarili na {INSERT RESPONSE FROM QA15\_D26 OR QA15\_D27}. Tama ba ito?

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

**If = 2, Go back to 'QA17\_D12'**

**'PN\_QA17\_D15' [PN\_AD79] -  
PROGRAMMING NOTE AD79;  
IF [AA3 = 1 OR AD65A = 1 (MALE AT BIRTH OR IDENTIFIES AS MALE)] AND AD45B = 1 OR 3 (SEXUAL PARTNERS MALE OR BOTH FEMALE AND MALE), THEN CONTINUE WITH AD79;  
ELSE IF (AA3 = 1 AND AD65A = 2) OR (AA3 = 2 AND AD65A = 1), THEN CONTINUE WITH AD79;  
ELSE IF AA3 = 1 AND AD46 = 2 OR 3, THEN CONTINUE WITH AD79;  
ELSE SKIP TO AD83;**

**'QA17\_D15' [AD79] –**

People who do not have HIV can take one pill a day to lower their risk of getting HIV. This is called pre-exposure prophylaxis, or PrEP. The pill is also called Truvada®.

At any time in the past 30 days, have you taken PrEP or Truvada®?

Ang mga taong walang HIV ay pwedeng uminom ng isang pill kada araw upang pababain ang panganib nila na magkaroon ng HIV. Tinatawag itong pre-exposure prophylaxis, o PrEP. Ang pill na ito ay tinatawag ding Truvada®. Uminom ka ba ng PrEP o Truvada® sa loob ng nakaraang tatlong araw?

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

**If = 1, goto 'QA17\_D19'**

**'QA17\_D16' [AD80] –**

In the past 12 months, have you taken any PrEP or Truvada®?

Sa loob ng nakaraang labindalawang buwan, uminom ka ba ng PrEP o Truvada®?

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

**If = 1, goto 'QA17\_D19'**

**'QA17\_D17' [AD81] –**

Have you ever taken any PrEP or Truvada®?

Nakainom ka na ba ng PrEP o Truvada®?

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

**If = 1, goto 'QA17\_D19'**

**'QA17\_D18' [AD82] –**

Before today, have you ever heard of PrEP or Truvada®?

Bago ang araw na ito, narinig mo na ba ang tungkol sa PrEP o Truvada®?

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

**'QA17\_D19'** [AD83] –

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

Nagpa-test na po ba kayo, kahit kailan, para sa HIV, ang virus na sanhi ng AIDS?

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

**If = 2, -7, -8, goto 'QA17\_D21'**

**'QA17\_D20'** [AD84] –

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

Para sa pinakahuli mong HIV test, inalukan ka ba na magpatest o ikaw ba mismo ang nagtanong para magpatest?

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

**If = 1, 2, 3, 91, -7, -8, goto PN\_AD13**

**'QA17\_D21'** [AD85] –

Were you ever offered an HIV test?

Naalukan ka na bang magpatest para sa HIV?

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

## Section E: Women's Health

'PN\_QA17\_E1' [PN\_AD13] -

**PROGRAMMING NOTE AD13 :**

**IF AA3 = 1 (MALE), THEN GO TO AJ29 ;**

**IF AGE > 45, THEN GO TO AJ29 ;**

**DISPLAYS;**

**IF [AD65 = 2 OR AD65A = 2 (FEMALE) AND AD66 = 2 (FEMALE)], DISPLAY "These next questions are about women's health.";**

**IF [AD65 = 2 OR AD65A = 2 (FEMALE) AND AD66 = 1, 3, 4, -7 OR -8 (MALE, TRANSGENDER, NONE, REFUSED, OR DON'T KNOW)], DISPLAY "These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them."**

'QA17\_E1' [AD13] -

{These next questions are about women's health. /These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.}

{Tungkol sa kalusugan ng mga babae ang sumusunod na mga katanungan./Itong sumusunod na mga katanungan ay maaaring may-kinalaman sa inyo dahil babae ang kasarian na itinala para sa inyo noong ipinanganak kayo. Kung hindi, mangyaring sabihin sa akin at lalaktawan ko ang mga ito.}

To your knowledge, are you now pregnant?

Sa inyong kaalaman, buntis ba kayo sa kasalukuyan?

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

'QA17\_E2' [AE96] -

In the past 12 months, did you deliver a baby?

Sa loob ng nakaraang labindalawang buwan, nanganak ka ba?

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

**If = 2, -7, -8, -9, goto 'Section F\_Mental Health'**

'QA17\_E3' [AE97] -

In the 8 weeks after your baby was born, did you see a doctor or other health care provider?

Sa loob ng walong linggo pagkatapos maipanganak ang inyong sanggol, bumisita ka ba sa isang doktor o ibang health care provider?

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

**IF AE97 =1 go to AE102**

**'QA17\_E4'** [AE98] –

Did your doctor tell you to have a follow up visit after the birth of your baby?

Sinabihan ka ba ng inong doktor na bumalik ka para sa isang follow up checkup pagkatapos maipanganak ang inyong sanggol?

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

**'QA17\_E5'** [AE99] –

Did you try to get an appointment?

Sinubukan mo bang magpa-appointment?

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

**'QA17\_E6'** [AE100] –

Did you have a way to get to your appointment?

Nagkaroon ka ba ng paraan para makapunta sa inyong appointment?

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

**'QA17\_E7'** [AE101] –

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

Ano ang pangunahing dahilan kung bakit hindi ka pumunta at nagpatingin sa doktor?

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

**'QA17\_E8'** [AE102] –

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

Tinanong ka ba ng doktor o ng ibang health care provider kung nakakaramdam ka ba ng lungkot o depresyon o hindi?

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

## Section F: Mental Health

**'QA17\_F1' [AJ29] –**

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

Tungkol sa inyong pakiramdam nitong nakaraang 30 araw ang sumusunod na mga tanong

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?

Humigit-kumulang, gaano kadalasan nitong nakaraang 30 araw kayo nakaramdam ng pagkanerbiyos - Masasabi ba ninyong palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

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

**'QA17\_F2' [AJ30] –**

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

Nitong nakaraang 30 araw, humigit-kumulang, gaano kadalasan kayo nakaramdam na wala na kayong pag-asa - palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

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

**'QA17\_F3' [AJ31] –**

During the past 30 days, about how often did you feel restless or fidgety?

Nitong nakaraang 30 araw, gaano kadalasan kayo nakaramdam ng pagkabalisa o ng dimapalagay?

**[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: " palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman? "]**

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

**‘QA17\_F4’ [AJ32] –**

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

Gaano kadalasan kayo nakaramdam ng matinding kalungkutan na walang anumang makapagpatuwa sa inyo?

**[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: "Palagi, kadalasan, paminsan-minsan, kaunting panahon lamang, o hindi kailanman? "]**

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

**‘QA17\_F5’ [AJ33] –**

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

Nitong nakaraang 30 araw, gaano kadalasan kayo nakaramdam na napakahirap gawin ang lahat?

**[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: " Palagi, kadalasan, paminsan-minsan, kaunting panahon lamang, o hindi kailanman? "]**

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

**‘QA17\_F6’ [AJ34] –**

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

Nitong nakaraang 30 araw, gaano kadalasan kayo nakaramdam na bale-wala kayo?

**[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: " Palagi, kadalasan, paminsan-minsan, kaunting panahon lamang, o hindi kailanman?"]**

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

**'QA17\_F7' [AF62] –**

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

Mayroon bang buwan nitong nakaraang 12 buwan na mas madalas ninyong naranasan ang mga damdaming ito kaysa nitong nakaraang 30 araw?

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

**'PN\_QA17\_F8' [PN\_AF63] -**

**PROGRAMMING NOTE AF63 :**

**IF AF62 = 1 THEN CONTINUE WITH AF63 ;**

**ELSE SKIP TO PROGRAMMING NOTE AF69B intro**

**'QA17\_F8' [AF63] –**

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

Ang sumusunod na mga tanong ay tungkol sa kaisa-isang buwan nitong nakaraang 12 buwan kung kailan pinakamalala ang kalagayan ng damdamin ninyo.

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

Noong buwan na iyon, gaano kadalasan kayo nakaramdam ng pagkanerbiyos - palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

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

**'QA17\_F9' [AF64] –**

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

Noong buwan ding na iyon, gaano kadalasan kayo nakaramdam ng kawalang pag-asa - palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

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



**‘QA17\_F10’ [AF65] –**

How often did you feel restless or fidgety?

Gaano kadalasan kayo nakaramdam ng pagkabalisa o di-mapalagay?

**[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: "Palagi, kadalasan, paminsan-minsan, kaunting panahon lamang, o hindi kailanman? "]**

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

**‘QA17\_F11’ [AF66] –**

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

Gaano kadalasan kayo nakaramdam ng matinding kalungkutan na walang anumang makapagpatuwa sa inyo?

**[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: ""Palagi, kadalasan, paminsan-minsan, kaunting panahon lamang, o hindi kailanman? "]**

- ☐ 01 ALL
- ☐ 02 MOST
- ☐ 03 SOME
- ☐ 04 A LITTLE
- ☐ 05 NONE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_F12’ [AF67] –**

How often did you feel that everything was an effort?

Gaano kadalasan kayo nakaramdam na napakahirap gawin ang lahat?

**[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: "Palagi, kadalasan, paminsan-minsan, kaunting panahon lang o hindi kailanman?"]**

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

'QA17\_F13' [AF68] –

How often did you feel worthless?

Gaano kadalasan kayo nakaramdam na bale-wala kayo?

[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: " "Palagi, kadalasan, paminsan- minsan, kaunting panahon lang o hindi kailanman?" ]

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

'PN\_SS\_INTRO' [PN\_SS\_INTRO] -

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

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

IF (AJ29\_R - AJ34\_R) >= 0 (NON-MISSING) THEN DO;  
 IF (AJ29\_R + AJ30\_R + AJ31\_R + AJ32\_R + AJ33\_R + AJ34\_R) > 8 OR  
 (AF63\_R + AF64\_R + AF65\_R + AF66\_R + AF67\_R + AF68\_R) > 8, THEN CONTINUE WITH AF69B INTRO;

IF (AF63\_R - AF68\_R) > 7 OR  
 (AF63\_R + AF64\_R + AF65\_R + AF66\_R + AF67\_R + AF68\_R) > 7, THEN CONTINUE WITH AF69B INTRO;

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

'SS\_INTRO' [SS\_INTRO] –

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

{Mangyaring muling} isipin ninyo ang kaisa-isang buwan nitong nakaraang 12 buwan kung kailan pinakamalala ang kalagayan ng emosyon ninyo.

'PN\_QA17\_F14' [PN\_AF69B] -

**PROGRAMMING NOTE AF69B :**  
**IF AGE > 70 GO TO AF70B ;**  
**ELSE CONTINUE WITH AF69B**

'QA17\_F14' [AF69B] –

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

Masyado bang nakasagabal ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa paggawa ninyo ng trabaho?

- ☐ 01 A LOT
- ☐ 02 SOME
- ☐ 03 NOT AT ALL
- ☐ 04 DOES NOT WORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_F15' [AF70B] –

Did your emotions interfere a lot, some, or not at all with your household chores?

Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa mga gawaing-bahay?

- ☐ 01 A LOT
- ☐ 02 SOME
- ☐ 03 NOT AT ALL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_F16' [AF71B] –

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

Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa inyong pakikipagsosyalan?

- ☐ 01 A LOT
- ☐ 02 SOME
- ☐ 03 NOT AT ALL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_F17' [AF72B] –

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

Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa pakikipag- kapwa ninyo sa mga kaibigan at kaanak?

- ☐ 01 A LOT
- ☐ 02 SOME
- ☐ 03 NOT AT ALL
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_F18'** [AF73B] –

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?

Isipin ang nakaraang 12 buwan.. Humigit-kumulang, ilang araw sa nakaraang 365 araw kayo lubusang nawalan ng kakayahan na magtrabaho o gumawa ng mga pangkaraniwang gawain dahil kinakabahan, sobrang nalulungkot, o naguguluhan ang emosyon ninyo?

**[IF NEEDED, SAY: "You can use any number between 0 and 365 to answer."]**

**[IF NEEDED, SAY: Maaari kayong sumagot ng anumang bilang sa pagitan ng 0 at 365.]**

\_\_\_\_\_NUMBER OF DAYS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_F19'** [AF81] –

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?

Nagkaroon ba ng panahon nitong nakaraang 12 buwan na nadama ninyong maaaring kailangan ninyong magpatingin sa propesyonal dahil sa mga problema sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom ng alak o paggamit ng mga droga?

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

**If = 2, -7, -8, goto 'QA17\_F21'**

**'QA17\_F20'** [AJ1] –

Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?

Saklaw ba ng inyong insurance ang paggagamot sa mga karamdamang nauugnay sa kalusugang pangkaisipan, gaya ng mga pagpatingin sa psychologist o psychiatrist?

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

**'QA17\_F21'** [AF74] –

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?

Nitong nakaraang 12 buwan. nagpatingin na ba kayo sa inyong primary care doctor o sa general practitioner para sa mga problema sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom ng alak o paggamit ng mga droga?

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

‘QA17\_F22’ [AF75] –

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?

Nitong nakaraang 12 buwan, nagpatingin na ba kayo sa sinumang iba pang propesyonal, gaya ng counselor, psychiatrist, o social worker para sa mga problem sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom ng alak o paggamit ng mga droga?

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

‘PN\_QA17\_F23’ [PN\_AF76] -

**PROGRAMMING NOTE AF76 :****IF AF74 = 1 OR AF75 = 1 THEN CONTINUE WITH AF76 ;****ELSE SKIP TO AJ5**

‘QA17\_F23’ [AF76] –

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

Humingi ba kayo ng tulong para sa inyong kalusugang pangkaisipan o pang-emosyon, o para sa problema sa pag-inom ng alak o sa paggamit ng droga?

- ☐ 01 MENTAL-EMOTIONAL HEALTH
- ☐ 02 ALCOHOL-DRUG PROBLEM
- ☐ 03 BOTH MENTAL & ALCOHOL-DRUG
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

‘PN\_QA17\_F24’ [PN\_AF77] -

**PROGRAMMING NOTE AF77 :****IF AF76 = 1, display: “mental or emotional health”;****IF AF76 = 2, display: “use of alcohol or drugs”;****IF AF76 = 3, display: “mental or emotional health and your use of alcohol or drugs”;****ELSE SKIP TO AF78**

‘QA17\_F24’ [AF77] –

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.

Nitong nakaraang 12 buwan, ilang beses kayo nagpatingin sa propesyonal para sa mga problema sa inyong {kalusugang pangkaisipan o pang-emosyon/pag-inom ng alak o paggamit ng mga droga/ kalusugang pangkaisipan o pang-emosyon at pag-inom ng alak o paggamit ng mga droga}? Huwag bilangin ang mga magdamag na pagpapaspital.

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

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_F25'** [AF78] –

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

Patuloy pa ba kayong nagpapagamot para sa ganitong mga problema sa isa o higit pang tinukoy na mga provider?

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

**If = 1, -7, -8, goto 'QA17\_F28'**

**'AF79B'** [AF79B] –

Did you complete the recommended full course of treatment?

Kinumpleto ba ninyo ang buong inirekomendang programa ng paggagamot?

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

**If = 1, -7, -8, goto 'QA17\_F28'**

**'QA17\_F27'** [AF80] –

What is the MAIN REASON you are no longer receiving treatment?

Ano ang PANGUNAHING DAHILAN kung bakit hindi na kayo ginagamot?

- ☐ 01 GOT BETTER/NO LONGER NEEDED
- ☐ 02 NOT GETTING BETTER
- ☐ 03 WANTED TO HANDLE PROBLEM ON OWN
- ☐ 04 HAD BAD EXPERIENCES WITH TREATMENT
- ☐ 05 LACK OF TIME/TRANSPORTATION
- ☐ 06 TOO EXPENSIVE
- ☐ 07 INSURANCE DOES NOT COVER
- ☐ 08 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AF80

**'QA17\_F28'** [AJ5] –

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?

Nitong nakaraang 12 buwan, uminom ba kayo ng anumang mga gamot na inireseta, gaya ng antidepressant o sedative, nang halos araw-araw sa loob ng dalawang linggo o higit pa, para sa problemang emotional o personal?

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

**'PN\_QA17\_F29' [PN\_AF82] -**  
**PROGRAMING NOTE AF82 :**  
**IF AF81 = 1 AND (AF74 ≠ 1 AND AF75 ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT) CONTINUE WITH AF82 ;**  
**ELSE SKIP TO PN\_AF107**

**'QA17\_F29' [AF82] –**

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.

Narito ang ilang katwiran ng iba kung bakit hindi sila humihingi ng tulong kahit na sa kanilang palagay maaaring kailangan nila ito. Pakisagot ng "oo" o "hindi" kung tugma ang bawat pahayag sa katwiran kung bakit hindi kayo nagpatingin sa isang propesyonal.

You were concerned about the cost of treatment.

Nabahala kayo sa gastos ng paggamot.

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

**'QA17\_F30' [AF83] –**

You did not feel comfortable talking with a professional about your personal problems.

Hindi kayo komportableng nakikipag-usap sa isang propesyonal tungkol sa inyong personal na mga problema.

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

**'QA17\_F31' [AF84] –**

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

Nag-alala kayo kung ano ang mangyayari kapag may makaalam na may problema kayo.

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

**'QA17\_F32' [AF85] –**

You had a hard time getting an appointment.

Nahirapan kayong makakuha ng appointment.

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

**'PN\_QA17\_F33' [PN\_AF107] -****PROGRAMMING NOTE AF107 :****IF AA5E = 9 (JAPANESE) OR AA5F = 38 (JAPANESE), THEN CONTINUE WITH AF107 ;****ELSE GO TO SECTION G;****'QA17\_F33' [AF107] –**

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

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

Ang sumusunod na mga tanong ay tungkol sa inyong pakiramdam tungkol sa iba-ibang aspekto o bahagi ng inyong buhay. Para sa bawat isa, mangyaring sabihin sa akin kung gaano kadalas ninyo nadadama ito. Una, sabihin gaano kadalas ninyo nadadama na kulang kayo sa pagsasamahan? Ito ba ay...

- ☐ 01 Hardly ever
- ☐ 01 Bihira
- ☐ 02 Some of the time, or
- ☐ 02 Kung minsan, o
- ☐ 03 Often?
- ☐ 03 Madalas
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_F34' [AF108] –**

How often do you feel left out? Is it...

Gaano kadalas ninyo nadadama na napupuwera kayo? Ito ba ay...

- ☐ 01 Hardly ever
- ☐ 01 Bihira
- ☐ 02 Some of the time, or
- ☐ 02 Kung minsan, o
- ☐ 03 Often?
- ☐ 03 Madalas
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_F35' [AF109] –**

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

Gaano kadalas ninyo nadadama na napapalayo kayo sa iba? Ito ba ay...

- ☐ 01 Hardly ever
- ☐ 01 Bihira
- ☐ 02 Some of the time, or
- ☐ 02 Kung minsan, o
- ☐ 03 Often?
- ☐ 03 Madalas
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



## Section G: Demographic Information, Part II

**'QA17\_G1' [AH33] –**

Now a few more questions about your background.

Ngayon, mayroon akong ilang tanong pa tungkol sa inyong background.

In what country were you born?

Saang bansa kayo ipinanganak?

**[SELECT FROM MOST LIKELY COUNTRIES]**

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

OTHER\_AH33

**'PN\_QA17\_G2' [PN\_AH34] -****PROGRAMMING NOTE AH34 :****IF AH33  $\neq$  1 (NOT BORN IN US) GO TO AG25 ;****ELSE IF AH33 = 1, -7, OR -8 (BORN IN US, DON'T KNOW, REFUSED) CONTINUE WITH AH34****'QA17\_G2' [AH34] -**

In what country was your mother born?

Saang bansa ipinanganak ang nanay ninyo?

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

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

OTHER\_AH34

**'QA17\_G3'** [AH35] –

In what country was your father born?

Saang bansa ipinanganak ang tatay ninyo?

**[SELECT FROM MOST LIKELY COUNTRIES]**

**[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

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

OTHER\_AH35

**'PN\_QA17\_G4'** [PN\_AG25] -

**PROGRAMMING NOTE AG25 :**

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

**'QA17\_G4'** [AG25] –

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

Sinabi ninyo na Hapon ang inyong mga ninuno. Nangibang bayan ba sa US kayo at ang inyong mga Hapon na ninuno pagkatapos ng 1945?

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

**If = 1, goto 'QA17\_G6'**

**'QA17\_G5'** [AG26] –

Which generation of Japanese immigrant are you?

Aling generation ng immigrant (salinlahi ng nangingibang lupain) na Hapon ba kayo?

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

**If = 1, 2, 3, 4, 5, 6, 7, 8, goto 'QA17\_G7'****'QA17\_G6'** [AG27] –

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

{Sinabi ninyo na Hapon ang inyong mga ninuno.} Aling generation ng immigrant (salinlahi ng nangingibang lupain) na Hapon kayo?

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

**'QA17\_G7'** [AH36] –

What languages do you speak at home?

Aling mga wika ang sinasalita ninyo sa tahanan?

**[CODE ALL THAT APPLY.]****[PROBE: "Any others?"]****[PROBE: "Mayroon pa bang iba?"]**

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

'OTHER1\_AH36' [OTHER1\_AH36] - OTHER1\_AH36

'OTHER2\_AH36' [OTHER2\_AH36] - OTHER2\_AH36

**'PN\_QA17\_G8' [PN\_AH37] -  
PROGRAMMING NOTE AH37 :**  
**IF AH36 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO PROGRAMMING NOTE AH39**  
**;**  
**IF INTERVIEW CONDUCTED IN ENGLISH AND AH36 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH AH37 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English" AND DROP RESPONSE CATEGORY "Not at all?";**  
**ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH AH37 .**  
**SET AH37ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME AH37 WAS ASKED**

**'QA17\_G8' [AH37] –**

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

{Dahil nagsasalita kayo sa tahanan ng wikang iba sa Ingles, interesado kami sa inyong palagay kung gaano kahusay kayo mag-Ingles.} Masasabi ba ninyo na nag-i-Ingles kayo nang...

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

**'PN\_QA17\_G9' [PN\_AH39] -  
PROGRAMMING NOTE AH39 :**  
**IF AH33 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PROGRAMMING NOTE AH44**  
**ELSE CONTINUE WITH AH39**

**'QA17\_G9' [AH39] –**

The next questions are about citizenship and immigration.

Tungkol sa citizenship at immigration ang mga sumusunod na tanong.

Are you a citizen of the United States?

Citizen ba kayo ng United States?

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

**If = 1, goto 'QA17\_G11'**

**'QA17\_G10'** [AH40] –

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

Permanent resident ba kayo na may green card? Kumpidensyal po ang mga sagot ninyo at hindi ito iuulat sa Immigration Services.

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

**[IF NEEDED, SAY: Karaniwang tinatawag itong "Green Card" ngunit maaari ding rosas, asul o puti ang kulay nito."]**

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

**'QA17\_G11'** [AH41] –

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

Humigit-kumulang, ilang taon na kayong nakatira sa United States?

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

\_\_\_\_\_ NUMBER OF YEARS

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

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_G12'** [PN\_AH44] -

**PROGRAMMING NOTE AH44 :**

**IF [AH43 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH AH44 ;**

**IF AH43 = 1, THEN DISPLAY "spouse";**

**IF AH43 = 2 OR AD60B = 1 OR AD61B = 1, THEN DISPLAY "partner";**

**ELSE GO TO PROGRAMMING NOTE AH43A**

**'QA17\_G12'** [AH44] –

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

Nakatira din ba ang inyong {asawa/partner} sa inyong pamamahay?

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

**'QA17\_G13'** [SC11A] -

May I have your {spouse/partner}'s first name, age, and gender?

Maaari ko bang makuha ang pangalan lang na walang apelyido at ang edad ng inyong {asawa/partner}?

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

'TEXT\_NAME\_SC11A' [TEXT\_NAME\_SC11A] -

SPOUSE/PARTNER NAME \_\_\_\_\_

SPOUSE/PARTNER AGE \_

'TEXT\_SEX\_SC11A' [TEXT\_SEX\_SC11A] -

SPOUSE/PARTNER SEX \_\_\_\_\_

**'PN\_QA17\_G14'** [PN\_AH43A] -

**PROGRAMMING NOTE AH43A :**

**IF [AAGE < 30 OR AA2A = 1 (AGE 18-29)] AND [AH44 = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH OR AH43 = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH)], CONTINUE WITH AH43A ; ELSE GO TO PROGRAMMING NOTE AH44A**

**'QA17\_G14'** [AH43A] –

Are you now living with either of your parents?

Nakatira ba kayo ngayon na kasama ang sinuman sa mga magulang ninyo?

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

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

**'QA17\_G15'** [SC13A1] –

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

{Magsimula tayo sa pinakamatanda} Ano ang pangalan o mga initials (ng bata/ng batang ito/ng kasunod na bata)?

Name/ Initials given/Pangalan/ Initials na ibinigay (SPECIFY) \_\_\_\_\_

- ☐ -7 REFUSED

**'QA17\_G16'** [SC13A2] –

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

Ano ang edad (ng bata/ng batang ito)?

- ☐ -7 REFUSED

**'PN\_QA17\_G17'** [PN\_GENDER6] - PN\_GENDER6

**PROGRAMMING NOTE GENDER6:**

**IF KIDCNT =1 INSERT "the child's"**

**IF KIDCNT >1 INSERT "this child's"**

'QA17\_G17' [GENDER6] –

What is {the child's/this child's} gender?

Ano ang kasarian o gender {ng bata/ng batang ito}?

- ☐ 1 MALE
- ☐ 2 FEMALE
- ☐ 3 REFUSED

'PN\_QA17\_G18' [PN\_SC15A4] -

**PROGRAMMING NOTE SC15A:**

**IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK SC15A FOR EACH ROSTER MEMBER WITHOUT AN AGE**

**NOTE SC15A IS PART OF THE CHILD ROSTER**

**(IF SC13A2 =9. ASK SC15A IMMEDIATELY FOR THAT CHILD BEFORE ROSTERING NEXT CHILD)**

**(IF SC13A1=9 AND SC13A2=9 INSERT "the child"**

**AND DO NOT DISPLAY CHILD NAME/SEX)**

'QA17\_G18' [SC15A4] –

Is {CHILD NAME/ the child} (READ LIST. ENTER ONE ONLY)

{Si CHILD NAME/Ang bata} ba ay

- ☐ 01 0 to 5 years old, or
- ☐ 01 0 hanggang sa 5 taong gulang, o
- ☐ 02 6 to 11 years old, or
- ☐ 02 6 hanggang sa 11 taong gulang, o
- ☐ 03 12 to 17 years old?
- ☐ 03 12 hanggang sa 17 taong gulang?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_SC14B1' [PN\_SC14B1] - PN\_SC14B

**PROGRAMMING NOTE SC14B:**

**IF KIDCNT =1 INSERT "the child"**

**IF KIDCNT >1 INSERT "all the children"**

'QA17\_G19' [SC14B4] –

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

Pakibigay po ng first name lang ng asawa ni (AR ADULT NAME /AGE/SEX)"/"Ano ang inyong first name o mga initials?

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



**'PN\_QA17\_G20' [PN\_SC14B] - PN\_SC14B**  
**ASK SC14B3 FOR EACH CHILD IN ROSTER**

**'QA17\_G20' [SC14B] –**

Are you the parent or legal guardian of {CHILD NAME/AGE/SEX}?

Kayo ba ang magulang o ang legal na guardian ni (PERSON NAME/AGE/SEX)?

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

**'PN\_QA17\_G21' [PN\_SC14C1] - PN\_SC14C1**  
**PROGRAMMING NOTE SC14C1:**  
**IF NAME GIVEN AT SC11A INSERT SC11A NAME**  
**ELSE INSERT AR ADULT NAME/AGE/SEX's spouse/partner)IF KIDCNT =1 INSERT "the child"**  
**IF KIDCNT >1 INSERT "all the children"**

**'QA17\_G21' [SC14C1] –**

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

Pakibigay po ng first name lang ng asawa ni (AR ADULT NAME /AGE/SEX)"/"Ano ang inyong first name o mga initials?

- ☐ 1 YES
- ☐ 2 NO
- ☐ 3 REFUSED
- ☐ 4 DON'T KNOW

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

**'PN\_QA17\_G22' [PN\_SC14C2] - PN\_SC14C2**  
**PROGRAMMING NOTE SC14C2: IF SC14C1 =2**  
**ASK SC14C2 FOR EACH CHILD IN THE ROSTER**

**'QA17\_G22' [SC14C2] –**

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

Kayo ba ang magulang o ang legal na guardian ni (PERSON NAME/AGE/SEX)?

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

**'PN\_QA17\_G23' [PN\_SC15A1] -**  
**PROGRAMMING NOTE SC15A1:**  
**IF AGE IS REFUSED FOR ANY CHILD ROSTER MEMBER, ASK SC15A FOR EACH ROSTER MEMBER WITHOUT AN AGE**  
**NOTE: SC15A IS PART OF THE CHILD ROSTER**  
**'PN\_N4' [PN\_N4] -**  
**PROGRAMMING NOTE:**  
**IF SC14B=1 THEN**  
**CHILD1CNT = COUNT OF CHILDREN IN SC14B AGED 0 TO 5 YRS**  
**CHILD2CNT = COUNT OF CHILDREN IN SC14B AGED 6 TO 11 YRS**  
**TEENCNT = COUNT OF CHILDREN IN SC14B AGED 12 TO 17 YRS**  
**# Child selection from only those with SC14A=1 or SC14B=1**  
**IF CHILD2CNT=0,**  
**IF CHILD1CNT=1, CHILD AGED 0 TO 5 YRS IS [SELECTED CHILD],**  
**ELSE IF CHILD1CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD1CNT**  
**ELSE IF CHILD1CNT=0,**  
**IF CHILD2CNT=1, CHILD AGED 6 TO 11 YRS IS [SELECTED CHILD],**  
**ELSE IF CHILD2CNT>1, SELECT [SELECTED CHILD] WITH PROBABILITY 1/CHILD2CNT**  
**ELSE,**  
**FOR EACH CHILD AGED 0 TO 5: SET CHILDPROB = 2 / (2 × CHILD1CNT + CHILD2CNT)**  
**FOR EACH CHILD AGED 6 TO 11: SET CHILDPROB = 1 / (2 × CHILD1CNT + CHILD2CNT)**  
**SELECT [SELECTED CHILD] FROM CHILDREN AGED 0 TO 11 WITH PROBABILITY CHILDPROB**  
**# Teen selection from only those with SC14A=1 or SC14B=1**  
**IF TEENCNT=1, CHILD AGED 12 TO 17 YRS IS [SELECTED TEEN] ,**  
**ELSE IF TEENCNT IS > 1, SELECT [SELECTED TEEN] WITH PROBABILITY 1/TEENCNT**  
**'SELECT\_KID\_TEEN1' [SELECT\_KID\_TEEN1] -**

**'QA17\_G24' [SC13A] –**

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

Ang isinulat ko dito ay {NUMBER}{bata/na mga bata} na mas bata pa sa 18 taong gulang sa inyong sambahayan. Mayroon ba kaming nakalimutan na mga bata na mas bata pa sa 18 taong gulang na karaniwang nakatira dito, pero kasalukuyang wala?

- ☐ 1 No, no one missed  
☐ 2 Yes

**If = 2, Go back to 'SC13A\_Loop1'**

**'POST\_QA17\_G24' [POST\_SC13A] -**  
**POST NOTE SC13:**  
**DO CHILD AND TEEN SELECTION BASED ON CRITERIA**  
**CHILD\_INDEX HOLDS THE VALUE OF THE SELECTED CHILD**  
**TEEN\_INDEX HOLDS THE VALUE OF THE SELECTED TEEN**  
**SET\_CHILD IS SET TO 1 IF A CHILD IS SELECTED**  
**SET\_TEEN IS SET TO 1 IF A TEEN IS SELECTED**

**'PN\_QA17\_G25' [PN\_AH44A] -  
PROGRAMMING NOTE AH44A :  
ANY CHILDREN IN SC13A ARE AGE 13 OR LESS, CONTINUE WITH AH44A ;  
ELSE GO TO AH47 ;  
IF ANY CHILD IN ROSTER SC13A < 14 AND ≥ 14 DISPLAY "for any children under age 14";  
IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or your spouse";  
ELSE IF AH44 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or your partner";  
ELSE DISPLAY "you"**

**'QA17\_G25' [AH44A] –**

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

Nitong nakaraang buwan, gumamit ba kayo ng anumang binabayaranang childcare {para sa sinumang bata na hindi pa 14 taong gulang} habang {kayo o ang asawa ninyo/kayo o ang partner ninyo/kayo} ay nagtatrabaho, nasa eskwelahan, o naghahanap ng trabaho?

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

**[IF NEEDED, SAY: "Kabilang dito ang Head Start, mga day care center, mga program ng before- o after-school care, at anumang mga kasunduan para sa baby-sitting."]**

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

**If = 2, -7, -8, goto 'QA17\_G27'**

**'QA17\_G26' [AH44B] –**

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

Nitong nakaraang buwan, magkano ang binayad ninyo para sa lahat ng mga kasunduan at mga program para sa child care?

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

**[IF NEEDED, SAY: "Kung mas madali sa inyo, maaari ninyong sabihin sa akin kung magkano ang binayad ninyo sa isang karaniwang linggo noong nakaraang buwan." "Kayo o sinumang iba pang adult sa inyong pamamahay."]**

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

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

- ☐ 03 NO PAYMENT IN LAST MONTH OR WEEK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_G27' [AH47] –**

What is the highest grade of education you have completed and received credit for?

Ano ang pinakamataas na baitang sa pag-aaral ang nakumpleto ninyo at nakatanggap ng credit para sa pagtatapos?

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

**'GRADE' [GRADE] - GRADE**

- ☐ 1 1ST GRADE
- ☐ 2 2ND GRADE
- ☐ 3 3RD GRADE
- ☐ 4 4TH GRADE
- ☐ 5 5TH GRADE
- ☐ 6 6TH GRADE
- ☐ 7 7TH GRADE
- ☐ 8 8TH GRADE

**'HIGH' [HIGH] - HIGH**

- ☐ 09 9TH GRADE
- ☐ 10 10TH GRADE
- ☐ 11 11TH GRADE
- ☐ 12 12TH GRADE

**'COLLEGE' [COLLEGE] - COLLEGE**

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

**'GRADUATE' [GRADUATE] - GRADUATE**

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

**'COMMUNITY' [COMMUNITY] - COMMUNITY**

- ☐ 22 1ST YEAR
- ☐ 23 2ND YEAR (AA/AS)

**'BUSINESS' [BUSINESS] - BUSINESS**

- ☐ 24 1ST YEAR
- ☐ 25 2ND YEAR
- ☐ 26 MORE THAN 2 YEARS

**'QA17\_G28'** [AG22] –

Did you ever serve on active duty in the Armed Forces of the United States?

Nag-active duty ba kayo kailanman sa Hukbong Sandatahan ng United States?

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

**If = 2, -7, -8, goto 'QA17\_G30'**

**'QA17\_G29'** [AG23] –

When did you serve?

Kailan kayo naglingkod?

FROM \_\_\_\_\_

TO \_\_\_\_\_

OR

**[CHECK ALL THAT APPLY]**

- ☐ 01 WORLD WAR II (SEPT 1940 TO JULY 1947)
- ☐ 02 KOREAN WAR (JUNE 1950 TO JAN 1955)
- ☐ 03 VIETNAM WAR (AUG 1964 TO APRIL 1975)
- ☐ 04 GULF WAR/OPERATION DESERT STORM (1990 TO 1991)
- ☐ 05 AFGHANISTAN/ OPERATION ENDURING FREEDOM (2001 TO PRESENT)
- ☐ 06 IRAQ WAR / OPERATION IRAQI FREEDOM (2003 TO PRESENT)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'AG24'** [AG24] –

Altogether, how long did you serve?

Sa kabuuan, gaano katagal kayong naglingkod?

**'AG24Y'** [AG24Y] - \_\_\_\_\_ YEARS

**'AG24M'** [AG24M] - \_\_\_\_\_ MONTHS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_G30' [AK1] –**

Which of the following were you doing last week?

Alin sa sumusunod ang ginawa ninyo noong nakaraang linggo?

- ☐ 01 Working at a job or business,
- ☐ 01 Nagtrabaho sa pinapasukan o sa negosyo
- ☐ 02 With a job or business but not at work,
- ☐ 02 May pinapasukan o may negosyo ngunit hindi nagtrabaho
- ☐ 03 Looking for work, or
- ☐ 03 Naghanap ng trabaho, o
- ☐ 04 Not working at a job or business?
- ☐ 04 Walang pinapasukan na trabaho o negosyo?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, -7, -8, goto 'PN\_QA17\_G34'**

**'QA17\_G31' [AK2] –**

What is the main reason you did not work last week?

Ano ang pangunahing dahilan na hindi kayo nagtrabaho nitong nakaraang linggo?

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

**[IF NEEDED, SAY: "Ang pangunahing dahilan ay ang pinakamahalagang dahilan."]**

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

**If = 5, 6, goto 'QA17\_G33'**

**'QA17\_G32' [AG10] –**

Do you usually work?

Karaniwan ba kayong nagtatrabaho?

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

**'PN\_QA17\_G33' [PN\_AL22] -  
PROGRAMMING NOTE AL22 :  
IF [AAGE = -7 OR -8 OR AAGE < 65] AND [AG10 = 2 (DOES NOT USUALLY WORK) OR  
AK2 = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH AL22 ;  
ELSE GO TO PROGRAMMING NOTE AK4**

**'QA17\_G33' [AL22] -**

Are you receiving Social Security Disability Insurance or SSDI?

Tumatanggap ba kayo ng Social Security Disability Insurance o SSDI?

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

**If = 1, 2, -7, -8, goto 'PN\_QA17\_G38'**

**'PN\_QA17\_G34' [PN\_AK4] -  
PROGRAMMING NOTE AK4 :  
IF AK1 = 1, 2, -7, OR -8 (working, with job, DK, or RF) OR AG10 = 1 (usually works), CONTINUE WITH AK4 ;  
ELSE GO TO PROGRAMMING NOTE AG8**

**'QA17\_G34' [AK4] -**

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?

Sa inyong pangunahing trabaho, empleado ba kayo ng isang pribadong kompanya, ng gobyerno, o nagtatrabaho para sa inyong sarili, o nagtatrabaho nang walang sahod sa isang negosyo o sakahan ng pamilya?

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

**[IF NEEDED, SAY: "Saan kayo nagtatrabaho nang pinakamaraming oras?"]**

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

**'PN\_QA17\_G35' [PN\_AK5] -  
PROGRAMMING NOTE AK5 :  
IF AK4 = 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?"]"**

**'QA17\_G35' [AK5] –**

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

{Anong uri ng ahensya o departamento ito? / Anong uri ng negosyo o industriya ito?}

**{[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: "Anong produkto ang yinayari o anong gawain ang ginagawa sa negosyong ito?]**

**[INTERVIEWER: ENTER DESCRIPTION]**

**'TEXT\_SPE\_AK5' [TEXT\_SPE\_AK5] -**

\_\_\_\_\_ (GOVERNMENT AGENCY OR DEPARTMENT/BUSINESS OR INDUSTRY)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_G36' [AK6] –**

What is the main kind of work you do?

Ano ang pangunahing trabaho na inyong ginagawa?

**[MAIN JOB = WHERE WORKS MOST HOURS.]**

**[INTERVIEWER: ENTER DESCRIPTION]**

**'OCC\_AK6' [OCC\_AK6] -** \_\_\_\_\_ (OCCUPATION)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'PN\_QA17\_G37' [PN\_AK8] -**

**PROGRAMMING NOTE AK8 :**

**IF AK4 = 2 (GOVERNMENT EMPLOYEE), CODE AK8 = 8 AND GO TO AG8 ;**

**IF AK4 = 3 (SELF-EMPLOYED), CONTINUE WITH AK8 AND DISPLAY "Including yourself, about" and "you"; ELSE CONTINUE WITH AK8 AND DISPLAY "About" and "your employer";**

**'QA17\_G37' [AK8] –**

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

Ilang ang empleado ng inyong employer sa lahat ng mga sangay? Kabilang ang sarili ninyo, ilan ang empleado ninyo sa lahat ng mga sangay?

{Kabilang ang sarili ninyo, humigi-kumulang/Humigit-Kumulang} ilan ang empleado {ng inyong employer /ninyo} sa lahat ng mga sangay?

**[IF NEEDED, SAY: "Your best guess is fine."]**

**[IF NEEDED, SAY: Ayos lang ang inyong pinakamahasay na tantya.]"**

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

**'PN\_QA17\_G38' [PN\_AG8] -**

**PROGRAMMING NOTE AG8 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1, CONTINUE WITH AG8 ;**

**IF AH43 = 1, THEN DISPLAY "spouse";**

**ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY "partner";**

**ELSE GO TO AH1**

**'QA17\_G38' [AG8] –**

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

Alin sa sumusunod ang ginawa ng inyong {asawa/partner} nitong nakaraang linggo?

- ☐ 01 Working at a job or business,
- ☐ 01 Nagtrabaho sa pinapasukan o sa negosyo,
- ☐ 02 With a job or business but not at work,
- ☐ 02 May pinapasukan o may negosyo ngunit hindi nagtrabaho,
- ☐ 03 Looking for work, or
- ☐ 03 Naghanap ng trabaho, o
- ☐ 04 Not working at a job or business?
- ☐ 04 Walang pinapasukan na trabaho o negosyo?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, goto 'QA17\_G40'**

**'QA17\_G39'** [AG11] –

Does your {spouse/partner} usually work?

Karaniwan bang nagtatrabaho and {asawa/partner} ninyo?

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

**If = 2, 3, -7, -8, goto 'QA17\_H1'**

**'QA17\_G40'** [AG9] –

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?

Sa pangunahing katungkulan ng inyong {asawa/partner}, nagtatrabaho ba {siya/siya} sa isang kompanyang pribado, sa gobyerno, o nagtatrabaho ba {siya/siya} para sa kanyang sarili, o nagtatrabaho ba {siya/siya} nang walang sahod sa negosyo o sakahan ng pamilya?

**[IF NEEDED, SAY: "Where did {he/she} work MOST hours?"]**

**[IF NEEDED, SAY: "Saan {siya/siya} nagtrabaho nang PINAKAMARAMING oras?"]**

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

## Section H: Health Insurance

**'QA17\_H1' [AH1] –**

The next topics are about health insurance and health care.

Tungkol sa health insurance at health care ang sumusunod na mga paksa.

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

Mayroon bang lugar na karaniwang pinupuntahan ninyo kapag may sakit kayo o nangangailangan ng payo tungkol sa inyong kalusugan?

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

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

**If = 2, -7, -8, goto 'QA17\_H3'**

**'PN\_QA17\_H2' [PN\_AH3] -**

**PROGRAMMING NOTE AH3 :**

**IF AH1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often--a medical";**

**ELSE IF AH1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";**

**ELSE IF AH1 = 4 (KAISER) CIRCLE "1" FOR AH3 AND GO TO AH12**

**'QA17\_H2' [AH3] –**

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

{Sa anong uri ng lugar kayo pinakamadalas na nagpapatingin - isang medical /Ang doctor ba ninyo ay nasa isang pribadong} office ng doktor isang clinic o sa clinic sa ospital, sa emergency room, o sa iba pang lugar?

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

**OTHER\_AH3**

**'PN\_QA17\_H3' [PN\_AH12] -**

**PROGRAMMING NOTE AH12 :**

**IF AH13A = 1 OR AB67 = 1 (YES, R VISITED ER FOR ASTHMA) OR SKIP TO AH95 ;  
ELSE CONTINUE WITH AH12**

**'QA17\_H3' [AH12] –**

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

Nitong nakaraang 12 buwan, nagpatingin ba kayo sa emergency room ng ospital para sa inyong sariling kalusugan?

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

**If = 2, -7, -8, goto 'QA17\_H5'**

**'PN\_QA17\_H4' [PN\_AH95] -**

**PROGRAMMING NOTE AH95 :**

**IF AH13A = 1 OR AB67 = 1 (YES, R VISITED ER FOR ASTHMA) OR AB109 = 1 (YES, R VISITED ER FOR DIABETES) OR AB115 = 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?"**

**'QA17\_H4' [AH95] –**

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

{Nitong nakaraang 12 buwan, ilang beses kayo nagpagamot sa emergency room ng ospital para sa inyong kalusugan/ Ilang beses ninyo ginawa iyon?}

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

**[IF NEEDED SAY: "Nitong nakaraang 12 buwan, ilang beses kayo nagpagamot sa emergency room ng ospital para sa inyong sariling kalusugan?"]**

\_\_\_\_\_ NUMBER OF TIMES [HR: 0 - 200]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H5' [AI1] –**

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?

Ang MediCARE ay health insurance program para sa mga taong 65 taong gulang o higit o mga taong may mga partikular na kapansanan. Naka-insure ba kayo sa MediCARE ngayon?

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

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

**If = 1, goto 'QA17\_H8'**

**If = -7, -8, goto 'QA17\_H16'**

**'POST\_QA17\_H5' [POST\_AI1] -**

**POST-NOTE AI1 :**

**IF AI1 = 1, SET ARMCARE = 1 AND SET ARINSURE = 1**

**'PN\_QA17\_H6' [PN\_AI2] -**

**PROGRAMMING NOTE AI2 :**

**IF [AAGE > 64 OR AA2A = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND AI1 = 2 (NOT COVERED BY MEDICARE), CONTINUE WITH AI2 ;**

**ELSE GO TO PROGRAMMING NOTE AH123**

**'QA17\_H6' [AI2] –**

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

Tama ba na hindi kayo naka-insure sa MediCARE kahit na sinabi ninyo sa akin kanina na 65 taong gulang o higit na kayo?

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

**If = 1, -7, -8, goto 'PN\_QA17\_H16'**

**If = 2, goto 'PN\_QA17\_H8'**

**'POST\_QA17\_H6' [POST\_AI2] -**

**POST-NOTE AI2 :**

**IF AI2 =2, SET ARMCARE = 1 AND SET ARINSURE = 1**

**'QA17\_H7' [AI3] –**

What is your age, please?

Kung pwede po sanang matanong, ano ang edad ninyo?

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

**If >=0 , goto 'PN\_QA17\_H16'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, goto 'PN\_QA17\_H16'**

**'POST\_QA17\_H7' [POST\_AI3] -**  
**POST NOTE AI3 : AIDATE**  
**SET AIDATE = CURRENT DATE (YYYYMMDD);**  
**SET AAGE = AI3 ;**  
**IF AAGE < 18, CODE AS IA AND TERMINATE**  
**'PN\_QA17\_H8' [PN\_AH123] -**  
**PROGRAMMING NOTE AH123 :**  
**IF ARM CARE = 1, CONTINUE WITH AH123 ;**  
**ELSE GO TO PROGRAMMING NOTE AI6**

**'QA17\_H8' [AH123] –**

Is this a MediCARE Advantage Plan?

MediCare Advantage Plan ba ito?

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

**[IF NEEDED, SAY: Ang MediCARE Advantage plans, na kung minsan tinatawag na Part C plans, ay inaalok ng mga pribadong kompanyang aprobado ng MediCARE. Nagbibigay ang mga MediCARE Advantage plans ng Medicare Part A at Part B coverage.”]**

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

**If = 2, -7, -8, goto 'QA17\_H11'**

**'POST\_QA17\_H8' [POST\_AH123] -**  
**POST-NOTE AH123 ;**  
**IF AH123 = 1, SET ARMADV= 1**

'QA17\_H9' [AH124] –

Is your MediCARE Advantage plan provided through an HMO, PPO, or Private Fee-for-Service Plan?

Ipinagkakaloob ba ang inyong MediCARE Advantage plan sa pamamagitan ng isang HMO, PPO o Private Fee-for-Service Plan?

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

[IF NEEDED, SAY: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangan ninyong gamitin ang mga doktor sa HMO upang masakop ang gastos. Kung gagamit kayo ng doktor na hindi sa HMO, sa karaniwan hindi mababayaran ito maliban kung ito'y emergency."]

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

[IF NEEDED, SAY: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doktor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doktor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doktor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

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

[IF NEEDED, SAY: "Sa Private Fee-for-Service, nagbabayad ang MediCARE sa private insurance company ng tiyak na halaga buwan-buwan. Sa Private Fee-for-Service, ang insurance company, hindi ang MediCARE, ang nagpapasya kung ano ang inyong babayaran para sa mga serbisyo."]

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

[INTERVIEWER NOTE: KUNG NAGBANGGIT SI R NG ISANG HEALTH PLAN GAYA NG "Kaiser" ILAGAY ANG "1" (HMO) SA CODE.] [INTERVIEWER NOTE: CIRCLE "4" ONLY IF VOLUNTEERED. DO NOT PROBE.]

[INTERVIEWER NOTE: BILUGAN ANG "4" KUNG KUSANG IBINIGAY LAMANG. HUWAG USISAIN.]

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

OTHER\_AH124

'QA17\_H10' [AH125] –

What is the name of your MediCARE plan?

Ano ang pangalan ng inyong MediCARE plan?

**[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 DIFFICULTY RECALLING NAME, PROBE: "Mayroon ba kayong insurance card o anumang bagay kung saan nakasulat ang pangalan ng plan?"]**

- ☐ 01 ACCESS SENIOR HEALTHCARE
- ☐ 02 AETNA
- ☐ 03 AETNA GOLDEN MEDICARE
- ☐ 04 AIDS HEALTHCARE FOUNDATION, LA
- ☐ 05 ALAMEDA ALLIANCE FOR HEALTH
- ☐ 83 ALTAMED HEALTH SERVICES
- ☐ 07 ANTHEM BLUE CROSS OF CALIFORNIA
- ☐ 08 ASPIRE HEALTH PLAN
- ☐ 09 BLUE CROSS CALIFORNIACARE
- ☐ 79 BLUE CROSS SENIOR SECURE
- ☐ 11 BLUE SHIELD 65 PLUS
- ☐ 12 BLUE SHIELD OF CALIFORNIA
- ☐ 13 BRAND NEW DAY (UNIVERSAL CARE)
- ☐ 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- ☐ 15 CALIFORNIAKIDS (CALKIDS)
- ☐ 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- ☐ 17 CALVIVA HEALTH
- ☐ 18 CARE 1ST HEALTH PLAN
- ☐ 19 CAREMORE HEALTH PLAN
- ☐ 21 CENTER FOR ELDERS' INDEPENDENCE
- ☐ 80 CEN CAL HEALTH
- ☐ 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- ☐ 23 CENTRAL HEALTH PLAN
- ☐ 24 CHINESE COMMUNITY HEALTH PLAN
- ☐ 25 CHOICE PHYSICIANS NETWORK
- ☐ 26 CIGNA HEALTHCARE
- ☐ 27 CITIZENS CHOICE HEALTHPLAN
- ☐ 28 COMMUNITY CARE HEALTH PLAN
- ☐ 29 COMMUNITY HEALTH GROUP
- ☐ 81 CONTRA COSTA HEALTH PLAN
- ☐ 31 DAVITA HEALTHCARE PARTNERS PLAN
- ☐ 32 EASY CHOICE HEALTH PLAN
- ☐ 33 EPIC HEALTH PLAN
- ☐ 34 GEM CARE HEALTH PLAN
- ☐ 35 GOLD COAST HEALTH PLAN
- ☐ 36 GOLDEN STATE MEDICARE HEALTH PLAN
- ☐ 38 HEALTH NET
- ☐ 39 HEALTH NET SENIORITY PLUS
- ☐ 40 HEALTH PLAN OF SAN JOAQUIN
- ☐ 41 HEALTH PLAN SAN JOE AUTHORITY
- ☐ 42 HERITAGE PROVIDER NETWORK
- ☐ 43 HUMANA GOLD PLUS
- ☐ 44 HUMANA HEALTH PLAN
- ☐ 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- ☐ 46 INTER VALLEY HEALTH PLAN
- ☐ 82 HEALTH ADVANTAGE
- ☐ 47 KAISER PERMANENTE
- ☐ 48 KAISER PERMANENTE SENIOR ADVANTAGE
- ☐ 49 KERN FAMILY HEALTH CARE
- ☐ 50 L.A. CARE HEALTH PLAN
- ☐ 51 MD CARE
- ☐ 54 MOLINA HEALTHCARE OF CALIFORNIA
- ☐ 55 MONARCH HEALTH PLAN
- ☐ 56 ON LOK SENIOR HEALTH SERVICES



- ☐ 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- ☐ 58 PIH HEALTH CARE SOLUTIONS
- ☐ 59 PREMIER HEALTH PLAN SERVICES
- ☐ 60 PRIMECARE MEDICAL NETWORK
- ☐ 61 PROVIDENCE HEALTH NETWORK
- ☐ 68 SCRIPPS HEALTH PLAN SERVICES
- ☐ 69 SEASIDE HEALTH PLAN
- ☐ 84 SAN FRANCISCO HEALTH PLAN
- ☐ 90 SANTA CLARA FAMILY HEALTH PLAN
- ☐ 86 SAN MATEO HEALTH COMMISION
- ☐ 88 SANTA BARBARA
- ☐ 92 SATELLITE HEALTH PLAN
- ☐ 67 SCAN HEALTH PLAN
- ☐ 70 SHARP HEALTH PLAN
- ☐ 71 SUTTER HEALTH PLAN
- ☐ 72 SUTTER SENIOR CARE
- ☐ 73 UNITED HEALTHCARE
- ☐ 74 UNITED HEALTHCARE SECURE HORIZON
- ☐ 75 UNIVERSITY HEALTHCARE ADVANTAGE
- ☐ 76 VALLEY HEALTH PLAN
- ☐ 77 VENTURA COUNTY HEALTH CARE PLAN
- ☐ 78 WESTERN HEALTH ADVANTAGE
- ☐ 93 CHAMPUS/CHAMP-VA
- ☐ 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- ☐ 89 VA HEALTH CARE SERVICES
- ☐ 52 MEDI-CAL
- ☐ 53 MEDICARE
- ☐ 85 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AH125

**'POST\_QA17\_H10'** [POST\_AH125] -**POST-NOTE FOR AH125 :****ALL ANSWERS GO TO PROGRAMMING NOTE AH126 ;****IF AH125 = 93, 87, OR 89 THEN ARMILIT = 1**

**'QA17\_H11' [AI4] –**

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?

Ang ilang tao na karapat-dapat para sa MediCARE ay mayroon ding pribadong insurance na paminsan-minsan tinatawag na Medigap o Medicare Supplement. Mayroon ba kayong ganitong uri ng health insurance?

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

**[IF NEEDED, SAY: "Mga policy ito na sumasaklaw sa mga gastos sa pangangalaga sa kalusugan na hindi saklaw nang nag-iisa ng Medicare."]**

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

**If = 2, -7, -8, goto 'PN\_QA17\_H16'**

**'POST\_QA17\_H11' [POST\_AI4] -**

**POST-NOTE FOR AI4 :**

**IF AI4 = 1, SET ARSUPP = 1**

**'PN\_QA17\_H12' [PN\_AH126] -**

**PROGRAMMING NOTE AH126 :**

**IF ARMADV ≠ 1 (DOES NOT HAVE MEDICARE ADVANTAGE) AND ARSUPP ≠ 1 (DOES NOT HAVE SUPPLEMENT), THEN SKIP TO PROGRAMMING NOTE AI6 ;**

**DISPLAYS;**

**IF ARMADV = 1 (MEDICARE ADVANTAGE), DISPLAY "MediCARE Advantage plan";**

**IF ARSUPP = 1 (HAS SUPPLEMENT), DISPLAY "MediCARE Supplement plan";**

**'QA17\_H12' [AH126] –**

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

Para sa {MediCARE HMO/MediCARE Supplement plan}, nag-enrol ba kayo nang direkta, o nakuha ba ninyo ang insurance na ito sa kasalukuyang employer, sa dating employer, sa union, sa negosyong pampamilya, sa AARP, o sa iba pang paraan?

**[IF NEEDED, SAY: "AARP stands for the American Association of Retired Persons."]**

**[IF NEEDED, SAY: "American Association of Retired Persons ang kahulugan ng AARP."]**

- ☐ 01 DIRECTLY
- ☐ 02 CURRENT EMPLOYER
- ☐ 03 FORMER EMPLOYER
- ☐ 04 UNION
- ☐ 05 FAMILY BUSINESS
- ☐ 06 AARP
- ☐ 07 SPOUSE'S EMPLOYER
- ☐ 08 SPOUSE'S UNION
- ☐ 09 PROFESSIONAL/FRATERNAL ORGANIZATION
- ☐ 91 OTHER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H13' [AH53] –**

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.

Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan na ito? Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]**

**[IF NEEDED, SAY: "Ang mga co-pay ay ang inyong mga kabahaging bayad para sa pangangalagang pangkalusugan tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang may ibang nagbabayad para sa inyong pangunahing health care coverage."]**

**[IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying."]** **[IF NEEDED, SAY: "Ang deductible ang halagang binabayaran ninyo para sa pagpapagamot bago magsimulang magbayad ang inyong health plan."]**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY: "Ang premium ang singil buwan-buwan para sa bayad sa inyong health insurance plan."]**

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

**'QA17\_H14' [AH54] –**

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

Mayroon bang sinumang iba pa, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan na ito?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H16'**

**'QA17\_H15'** [AH55] –

Who is that?

Sino iyon?

**[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: "Sino maliban sa inyo ang nagbabayad ng anumang bahagi ng gastos para sa plan na ito, gaya ng inyong employer, union, o samahang pampropesyonal?"]**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

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

**'POST\_QA17\_H15'** [POST\_AH55] -

**POST-NOTE FOR AH55 :**

**IF AH55 = 7, SET ARMCAL = 1;**

**'PN\_QA17\_H16'** [PN\_AI6] -

**PROGRAMMING NOTE AI6 :**

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

**ELSE DISPLAY "Are you"**

**'QA17\_H16'** [AI6] –

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

{Tama ba na naka-insure kayo/Naka-insure ba kayo} sa Medi-CAL?

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

**[IF NEEDED, SAY: " Plan para sa ilang mga bata at pamilya nila na mabababa ang kita, mga babaeng buntis at mga taong may kapansanan o nakatatanda na"]**

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

**'POST\_QA17\_H16'** [POST\_AI6] -

**POST-NOTE FOR AI6 :**

**IF AI6 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;**

**IF ARMCAL = 1 AND AI6 = 2, SET ARMCAL = 0**

**'PN\_QA17\_H17'** [PN\_AI8] -

**PROGRAMMING NOTE AI8 :**

**IF ARSUPP = 1, DISPLAY “Besides the Medicare supplement plan you told me about” AND “any other”;**  
**ELSE IF ARMADV = 1, DISPLAY “Besides the Medicare Advantage plan you told me about” AND “any other”;**  
**ELSE DISPLAY “a”**

**‘QA17\_H17’ [AI8] –**

{Besides the Medicare supplement plan you told me about/Besides the Medicare Advantage plan you told me about},  
 Are you covered by {any other/a} health insurance plan or HMO through a current or former employer or union?

{Maliban sa Medicare supplement plan/Maliban sa Medicare Advantage Plan na binanggit ninyo sa akin}, Naka-insure ba kayo sa {anumang iba pang/isang health insurance plan o HMO sa pamamagitan ng isang kasalukuyan o dating employer o union? Naka-insure ba kayo sa health insurance plan o sa HMO sa pamamagitan ng kasalukuyan o dating employer o union?

**[IF NEEDED, SAY: "...either through your own or someone else's employment?"]**

**[IF NEEDED, SAY: "... sa pamamagitan ng inyong sariling trabaho o kaya'y sa trabaho ng ibang tao?"]**

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

**‘POST\_QA17\_H17’ [POST\_AI8] -**

**POST-NOTE FOR AI8 :**

**IF AI8 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1**

**‘PN\_QA17\_H18’ [PN\_AI11] -**

**PROGRAMMING NOTE AI11 :**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, AND EMPLOYER), CONTINUE WITH AI11 ;**  
**ELSE GO TO PROGRAMMING NOTE AI9**

**‘QA17\_H18’ [AI11] –**

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

Naka-insure ba kayo sa isang health insurance plan na binili ninyo nang direkta mula sa isang insurance company o HMO, o sa pamamagitan ng Covered California?

**[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: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital."]**

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

**If = 2, -7, -8, goto ‘PN\_QA17\_H20’**

**‘POST\_QA17\_H18’ [POST\_AI11] -**

**POST-NOTE FOR AI11 :**

**IF AI11 = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1**

**'PN\_QA17\_H19' [PN\_AH104] -**

**PROGRAMMING NOTE AH104 :**  
**IF ARDIRECT = 1, THEN CONTINUE WITH AH104 ;**  
**ELSE GO TO PROGRAMMING NOTE AI9**

**'QA17\_H19' [AH104] –**

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

Paano ninyo binili itong health insurance - direkta mula sa isang insurance company, HMO, o sa pamamagitan ng Covered California?

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

OTHER\_AH104

**'POST\_QA17\_H19' [POST\_AH104] -**

**POST-NOTE FOR AH104 :**  
**IF AH104 = 2, THEN SET ARHBEX = 1**

**'PN\_QA17\_H20' [PN\_AI9] -**

**PROGRAMMING NOTE FOR AI9 :**  
**IF AI8 = 1 (EMPLOYER-BASED COVERAGE) OR AI11 = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH AI9 ;**  
**ELSE GO TO PROGRAMMING NOTE AH105**

**'QA17\_H20' [AI9] –**

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

Kinuha ba ang plan na ito sa pangalan ninyo o sa pangalan ng ibang tao?

**[IF NEEDED, SAY: "Even someone who does not live in this household."]**  
**[IF NEEDED, SAY: "Kahit ibang taong hindi tumitira sa pamamahay na ito."]**

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

**If = 1, -7, -8, goto 'PN\_QA17\_H22'**

**'POST\_QA17\_H20' [POST\_AI9] -**

**POST-NOTE FOR AI9 :**  
**IF AI8 = 1 AND AI9 = 1 SET AREMPOWN = 1 AND SET ARINSURE = 1 AND SET AREMPOTH = 0;**  
**IF AI8 = 1 AND AI9 = 2, -7, OR -8 SET AREMPOTH = 1 AND SET ARINSURE = 1;**  
**IF AI11 = 1 AND AI9 = 1 SET ARDIROWN = 1 AND ARINSURE = 1;**  
**IF AI11 = 1 AND AI9 = 2, -7, OR -8 SET ARDIROTH = 1 AND ARINSURE = 1**

**'PN\_QA17\_H21' [PN\_AI9A] -**  
**PROGRAMMING NOTE AI9A :**  
 IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 OR IF AH43A = 1 (LIVING WITH PARENTS) OR IF [AAGE < 26 OR AA2A = 1 (BETWEEN 18 AND 29)], CONTINUE WITH AI9A ;  
 ELSE GO TO PROGRAMMING NOTE AH105 ;  
 IF AH43 = 1, THEN DISPLAY "spouse's name";  
 IF AH43 ≠ 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY "partner's name";  
 IF AH43A = 1 OR AAGE < 26, THEN DISPLAY "parent's name";

**'QA17\_H21' [AI9A] -**

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

Ang plan ba ay nasa {pangalan ng inyong asawa,} {pangalan ng inyong partner,} {pangalan ng inyong magulang,} o pangalan ng iba pang tao?

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

**'POST\_QA17\_H21' [POST\_AI9A] -**  
**POST-NOTE FOR AI9A :**  
 IF AI8 = 1 AND AI9A = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;  
 IF AH104 = 2 AND AI9A = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1 AND SPHBEX = 1;  
 IF AI8 = 1 AND AI9A = 2 SET AREMPPAR =1 AND AREMPOTH = 0;  
 IF AI11 = 1 AND AI9A = 1 SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP=1;  
 IF AI11 = 1 AND AI9A = 2 SET ARDIRPAR = 1 AND ARDIROTH = 0  
**'PN\_QA17\_H22' [PN\_AH105] -**  
**PROGRAMMING NOTE AH105 :**  
 IF AI8 = 1 (EMPLOYER-BASED COVERAGE) AND AK8 ≤ 5 (FIRM SIZE ≤100), CONTINUE WITH AH105 AND DISPLAY;  
 IF AREMPOWN = 1 THEN DISPLAY {you};  
 IF AREMPSP = 1 OR AREMPPAR =1 OR AREMPOTH = 1 THEN DISPLAY {he or she};  
 ELSE GO TO PROGRAMMING NOTE AH106 ;

**'QA17\_H22'** [AH105] –

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

Paano {kayo/siya} nagpatala para sa health insurance na ito - sa pamamagitan ng isang employer, union, o SHOP program ng Covered California?

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

**[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]**

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

**'POST\_QA17\_H22'** [POST\_AH105] -

**POST-NOTE FOR AH105 :**

**IF AH105 = 3, THEN SET ARHBEX = 1**

**'PN\_QA17\_H23'** [PN\_AH106] -

**PROGRAMMING NOTE AH106**

**IF ARHBEX = 1, THEN CONTINUE WITH AH106 ;**

**ELSE GO TO PROGRAMMING NOTE AH57 ;**

**'QA17\_H23'** [AH106] –

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

Bronze, silver, gold o platinum plan ba ito?

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

OTHER\_AH106

**'PN\_QA17\_H24'** [PN\_AH107] -

**PROGRAMMING NOTE AH107 :**

**IF AH105 = 3, THEN GO TO AH57 ;**

**ELSE CONTINUE WITH AH107 ;**

**'QA17\_H24'** [AH107] –

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

Mayroon bang subsidy (pananalaping tulong ) para sa o diskwento sa premium para sa plan na ito?

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



**'PN\_QA17\_H25' [PN\_AH57] -**

**PROGRAMMING NOTE AH57 :**

**IF AI8 = 1 (EMPLOYER-BASED COVERAGE) OR AI11 = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH AH57 ;  
ELSE GO TO PROGRAMMING NOTE AI13**

**'QA17\_H25' [AH57] –**

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.

Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan na ito? Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]**

**[IF NEEDED, SAY: "Ang mga co-pay ay ang inyong mga kabahaging bayad para sa pangangalagang pangkalusugan tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang may ibang nagbabayad para sa inyong pangunahing health care coverage."]**

**[IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying."]** **[IF NEEDED, SAY: "Ang deductible ang halagang binabayaran ninyo para sa pagpapagamot bago magsimulang magbayad ang inyong health plan."]**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY: "Ang premium ang singil buwan-buwan para sa bayad sa inyong health insurance plan."]**

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

**If = 2, goto 'PN\_QA17\_H28'**

**'QA17\_H26' [AH128] –**

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

Magkano ang binabayaran mo {ng inyong pamilya} bawat buwan para sa inyong health insurance plan {ng inyong pamilya}? Okay lang ang pinakamalapit mong tantiya.

\_\_\_\_\_ **(AMOUNT) [HR: 0 -9997, SR: 0 - 2000]**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H27' [AH58] –**

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?

Mayroon bang sinumang iba pa, gaya ng isang employer, union, o samahang pampropesyon, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan na ito?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H30'**

**'PN\_QA17\_H28' [PN\_AH56] -**

**PROGRAMMING NOTE AH56 :**

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

**'QA17\_H28' [AH56] -**

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

{Sino, maliban sa inyo, ang nagbabayad ng anumang bahagi ng gastos para sa plan na ito , gaya ng isang employer, union, o samahang pampropesyonal/ Sino iyon}?

**[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: "Sino maliban sa inyo ang nagbabayad ng anumang bahagi ng gastos para sa plan na ito, gaya ng inyong employer, union, o samahang pampropesyonal?"]**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

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

**'POST\_QA17\_H28' [POST\_AH56] -**

**POST-NOTE AH56 :**

**IF AH56 = 1, 2, OR 3, THEN SET AREMPOWN = 1;**

**IF AH56 = 4 OR 5, THEN SET AREMPSP = 1;**

**IF AH56 = 6, THEN SET AROTHER = 1;**

**IF AH56 = 9, SET ARMCARE = 1 AND SET ARDIRECT = 0;**

**IF AH56 = 7, SET ARMCAL = 1 AND SET ARDIRECT = 0;**

**IF AH56 = 11, SET ARHBEX = 1;**

**IF AH56 = 91, THEN SET AROTHER = 1**

**'QA17\_H29' [AH129] -**

How much do they contribute to your plan each month?

Magkano ang inaambag nila sa inyong plan bawat buwan?

\_\_\_\_\_ (AMOUNT) **[HR: 0 -9997, SR: 0 - 2000]**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H30' [PN\_AI13] -****PROGRAMMING NOTE AI13 :****IF [AK1 = 1 OR 2 (R WORKED LAST WEEK) OR AG10 = 1 (R USUALLY WORKS)] AND AK4 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOWN ≠ 1 (NO EMPLOYER-BASED COVERAGE), CONTINUE WITH AI13 ; ELSE GO TO PROGRAMMING NOTE AI16****'QA17\_H30' [AI13] –**

Does your employer offer health insurance to any of its employees?

Nag-aalok ba ng health insurance ang inyong employer sa mga empleado nito?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H34'****'QA17\_H31' [AI14] –**

Are you eligible to be in this plan?

Karapat-dapat ba kayong sumali sa plan na ito?

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

**If = 2, goto 'QA17\_H33'****If = -7, goto 'PN\_QA17\_H34'****'QA17\_H32' [AI15] –**

What is the one main reason why you aren't in this plan?

Ano ang isang pangunahing dahilan na hindi kayo kasali sa plan na ito?

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

**If = 1, 2, 3, 4, 91, -7, -8, goto 'PN\_QA17\_H34'**

OTHER\_AI15

**'QA17\_H33'** [AI15A] –

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

Ano ang isang pangunahing dahilan na hindi kayo karapat-dapat para sa plan na ito?

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

OTHER\_AI15A

**'PN\_QA17\_H34'** [PN\_AI16] -**PROGRAMMING NOTE AI16 :**

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

**'QA17\_H34'** [AI16] –

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

Naka-insure ba kayo sa CHAMPUS/CHAMP-VA, TRICARE, VA o sa iba pang pangangalagang pangkalusugan ng militar?

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

**'POST\_QA17\_H34'** [POST\_AI16] -**POST-NOTE AI16 :**

**IF AI16 = 1, SET ARMILIT = 1 AND SET ARINSURE = 1**

**'PN\_QA17\_H35' [PN\_AI17] -**

**PROGRAMMING NOTE AI17 :**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN) CONTINUE WITH AI17 ;**

**ELSE GO TO PROGRAMMING NOTE AI18**

**'QA17\_H35' [AI17] –**

Are you covered by some other government health program, such as AIM, "Mister MIP," the Family PACT program, Healthy Kids, or something else?

Naka-insure ba kayo sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," Family Pact, Healthy Kids, o iba pa?

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

**[IF NEEDED, SAY: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program; ang Family PACT ang programa ng estado na nagbabayad para sa serbisyong pangkalusugang para sa pagpipigil sa pagbubuntis/pag-aanak para sa mga hindi naka-insure na mga babae't lalake na mabababa ang kita; at ang PCIP ang insurance plan para sa mga dati nang umiiral na karamdaman.]**

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

**'POST\_QA17\_H35' [POST\_AI17] -**

**POST-NOTE AI17 :**

**IF AI17 = 1, SET AROTHGOV = 1 AND SET ARINSURE = 1**

**'PN\_QA17\_H36' [PN\_AI18] -**

**PROGRAMMING NOTE AI18 :**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, AND OTHER GOVERNMENT PLAN), CONTINUE WITH AI18 ;**

**ELSE GO TO PROGRAMMING NOTE AI20**

**'QA17\_H36' [AI18] –**

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

Mayroon ba kayong anumang health insurance sa pamamagitan ng isang plan na di ko nabanggit?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H40'**

**'QA17\_H37' [AI19] –**

What type of health insurance do you have?

Anong uri ng health insurance ang mayroon kayo?

**[CODE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

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

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakukuha ba ninyo ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng eskwelawhan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o direkta mula sa health plan?"]**

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

**'POST\_QA17\_H37' [POST\_AI19] -**

**POST-NOTE AI19 :**

**IF AI19 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1;**

**IF AI19 = 2, SET AREMPOTH = 1 AND SET ARINSURE = 1;**

**IF AI19 = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1;**

**IF AI19 = 4, SET ARMCARE = 1 AND SET ARINSURE = 1;**

**IF AI19 = 5, SET ARMCAL = 1 AND SET ARINSURE = 1;**

**IF AI19 = 7, SET ARMILIT = 1 AND SET ARINSURE = 1;**

**IF AI19 = 8, SET ARIHS = 1;**

**IF AI19 = 10, SET ARHBEX = 1 AND ARDIRECT = 1 AND ARINSURE = 1 AND ARDIROTH = 1;**

**IF AI19 = 11, SET ARHBEX = 1 AND SET ARINSURE = 1 AND AREMPOTH = 1;**

**IF AI19 = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1;**

**IF AI19 = 92, -7, OR -8, SET AROTHER = 1 AND SET ARINSURE = 1**

**'PN\_QA17\_H38' [PN\_AH59] -  
PROGRAMMING NOTE AH59 :  
IF AI19 = 1, 2, OR 3 CONTINUE WITH AH59 ;  
ELSE GO TO PROGRAMMING NOTE AI20**

**'QA17\_H38' [AH59] –**

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

Kinuha ba ang plan na ito sa inyong pangalan o sa pangalan ng ibang tao?

**[PROBE: "Even someone who does not live in this household?"]**

**[PROBE: "Kahit ibang taong hindi tumitira sa pamamahay na ito."]**

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

**If = 1, -7, -8, goto 'PN\_QA17\_H40'**

**'POST\_QA17\_H38' [POST\_AH59] -**

**POST-NOTE AH59 :**

**IF (AI19 = 1 OR 2 OR KAI19 =11) AND AH59 = 1 THEN SET AREMPOWN = 1 AND SET AREMPOTH = 0 AND SET ARINSURE = 1;**

**IF (AI19 = 3 OR 10) AND AH59 = 1 THEN SET ARDIROWN = 1 AND SET ARDIROTH = 0 AND SET ARINSURE = 1;**

**IF (AI19 = 1 OR 2) AND (AH59 = 2, -7, OR -8), SET AREMPOTH = 1 AND AREMPOWN = 0 AND SET ARINSURE = 1;**

**IF AI19 = 1 AND (AH59 = 2, -7, OR -8) SET ARDIROTH = 1 AND ARDIROWN = 0 AND SET ARINSURE = 1**

**'PN\_QA17\_H39' [PN\_AH60] -**

**PROGRAMMING NOTE AH60 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 OR IF AH43A = 1 (LIVING WITH PARENTS) OR AAGE < 26, CONTINUE WITH AH60 ;**

**ELSE GO TO PROGRAMMING NOTE AI20 ;**

**IF AH43 = 1 THEN DISPLAY "spouse's name";**

**IF AH43 ≠ 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY "partner's name";**

**IF AH43A = 1 OR AAGE < 26, THEN DISPLAY "parent's name";**

**'QA17\_H39' [AH60] –**

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

Nasa pangalan ba ng inyong {asawa} {partner} {magulang} o iba pa ang plan?

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

**'POST\_QA17\_H39' [POST\_AH60] -**

**POST-NOTE AH60 :**

**IF AH60 = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 AND ARSAMESP=1;**

**IF AH60 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0**

**'PN\_QA17\_H40'** [PN\_AI20] -  
**PROGRAMMING NOTE AI20 :**  
**IF ARIHS ≠ 1 AND AA5A = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH AI20 ;**  
**ELSE GO TO PROGRAMMING NOTE AI37intro**

**'QA17\_H40'** [AI20] –

Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?

Naka-insure ba kayo sa Indian Health Service, sa Tribal Health Program o sa Urban Indian Clinic?

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

**'POST\_QA17\_H40'** [POST\_AI20] -  
**POST-NOTE AI20 :**  
**IF AI20 = 1, SET ARIHS = 1**  
**'PN\_AI37\_INTRO'** [PN\_AI37\_INTRO] -  
**PROGRAMMING NOTE AI37intro :**  
**IF [AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1] AND AH44 = 1 (SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH AI37intro ;**  
**IF AH43 = 1, THEN DISPLAY “spouse”;**  
**ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY “partner”;**  
**ELSE GO TO PROGRAMMING NOTE AI22C**

**'AI37intro'** [AI37intro] –

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

Ang susunod na mga tanong ay tungkol sa uri ng health insurance na maaaring mayroon ang inyong {asawa/partner}.

**'PN\_QA17\_H41'** [PN\_AI37] -  
**PROGRAMMING NOTE AI37 :**  
**IF SPOUSE 65 OR OLDER THEN**  
**IF ARM CARE ≠ 1, CONTINUE WITH AI37 WITHOUT DISPLAY**  
**ELSE IF ARM CARE = 1, CONTINUE WITH AI37 AND DISPLAY “You said that you are covered by Medicare.”**  
**AND “also”;**  
**ELSE GO TO PROGRAMMING NOTE AI38**

**'QA17\_H41'** [AI37] –

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

{Sinabi ninyo na naka-insure kayo sa Medicare.} Naka-insure {rin} ba sa Medicare ang inyong (asawa/partner)?

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

**'POST\_QA17\_H41'** [POST\_AI37] -  
**POST-NOTE AI37 :**  
**IF AI37 = 1, SET SPM CARE = 1 AND SET SPINSURE = 1**  
**'PN\_QA17\_H42'** [PN\_AI127] -



**PROGRAMMING NOTE AH127 :**

**IF SPM CARE ≠ 1 AND ARMADV ≠ 1, SKIP TO PROGRAMMING NOTE AI37A ;**

**DISPLAYS;**

**IF SPM CARE = 1 AND ARMADV ≠ 1, CONTINUE WITH AH127 WITHOUT DISPLAY;**

**ELSE IF SPM CARE = 1 AND ARMADV = 1, CONTINUE WITH AH127 AND DISPLAY “You said that you have a Medicare Advantage plan.” AND “also”;**

**IF AH43 = 1 (MARRIED) THEN DISPLAY “spouse’s”;**

**ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY “partner’s”;**

**‘QA17\_H42’ [AH127] –**

{You said that you have a Medicare Advantage plan.} Does your {spouse/partner}{also} have a Medicare Advantage plan?

{Sinabi ninyo na mayroon kayong Medicare Advantage plan.} Mayroon {din} bang isang Medicare Advantage Plan ang inyong {asawa/partner}?

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

**[IF NEEDED, SAY: Ang MediCARE Advantage plans, na kung minsan tinatawag na Part C plans, ay inaalok ng mga pribadong kompanyang aprobado ng MediCARE. Nagbibigay ang mga MediCARE Advantage plans ng Medicare Part A at Part B coverage.”]**

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

**‘POST\_QA17\_H42’ [POST\_AH127] -**

**POST-NOTE AH127 :**

**IF AH127 = 1, THEN SET SPMADV = 1 AND SET SPINSURE = 1**

**‘PN\_QA17\_H43’ [PN\_AI37A] -**

**PROGRAMMING NOTE AI37A :**

**IF SPMADV = 1, THEN SKIP TO PROGRAMMING NOTE AI38 ;**

**ELSE IF SPM CARE = 1 AND ARSUPP ≠ 1, CONTINUE WITH AI37A WITHOUT DISPLAY;**

**ELSE IF SPM CARE = 1 AND ARSUPP = 1, CONTINUE WITH AI37A AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”;**

**IF AH43 = 1 (MARRIED), THEN DISPLAY “spouse”;**

**ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY “partner”;**

**ELSE GO TO PROGRAMMING NOTE AI38**

**‘QA17\_H43’ [AI37A] –**

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

{Sinabi ninyo na mayroon kayong Medicare supplement plan.} Mayroon {din} bang Medicare supplemental policy ang inyong {partner/asawa}?

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

**‘POST\_QA17\_H43’ [POST\_AI37A] -**

**POST-NOTE AI37A :**

**IF AI37A = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1**

**'PN\_QA17\_H44'** [PN\_AI38] -

**PROGRAMMING NOTE AI38 :**  
**IF ARMCAL = 1, CONTINUE WITH AI38 ;**  
**DISPLAY "also" IF ARMCARE =1;**  
**ELSE GO TO PROGRAMMING NOTE AI40**

**'QA17\_H44'** [AI38] –

You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?

Sinabi ninyo na mayroon {din} kayong Medi-Cal. Naka-insure din ba sa Medi-Cal ang inyong (ASAWA/PARTNER)?

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

**'POST\_QA17\_H44'** [POST\_AI38] -

**POST-NOTE AI38 :**  
**IF AI38 = 1, SET SPMCAL = 1 AND SET SPINSURE = 1**  
**'PN\_QA17\_H45'** [PN\_AI40] -  
**PROGRAMMING NOTE AI40 :**  
**IF AREMPOWN = 1 AND ARHBEX ≠ 1, CONTINUE WITH AI40 ;**  
**IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY "also";**  
**ELSE GO TO PROGRAMMING NOTE AH108**

**'QA17\_H45'** [AI40] –

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

Sinabi ninyo na mayroon {din} kayong insurance mula sa inyong kasalukuyan o dating employer o union. Naka-insure {rin} ba ang inyong (ASAWA/PARTNER)? sa insurance mula sa inyong employer o union?

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

**If = 1, goto 'PN\_QA17\_H48'**

**'POST\_QA17\_H45'** [POST\_AI40] -

**POST-NOTE AI40 :**  
**IF AI40 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**  
**'PN\_QA17\_H46'** [PN\_AH108] -  
**PROGRAMMING NOTE AH108 :**  
**IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH AH108 ;**  
**IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY "also";**  
**ELSE GO TO PROGRAMMING NOTE AI40A**

**'QA17\_H46'** [AH108] –

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

Sinabi ninyo na mayroon kayong health insurance sa pamamagitan ng SHOP program ng Covered California. Naka-insure {rin} ba ang inyong (ASAWA/PARTNER) sa health insurance na ito?

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

**[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]**

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

**If = 1, goto 'PN\_QA17\_H48'**

**'POST\_QA17\_H46'** [POST\_AH108] -

**POST-NOTE AH108 :**

**IF AH108 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;**

**'PN\_QA17\_H47'** [PN\_AI40A] -

**PROGRAMMING NOTE AI40A :**

**IF AG8 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR AG11 = 1 (USUALLY WORKS), CONTINUE WITH AI40A ;**

**IF AREMPSP = 1 AND AH43 = 1, DISPLAY "You said you have insurance from your spouse's employer or union.";**

**ELSE IF AREMPSP = 1 AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY "You said you have insurance from your partner's employer or union.";**

**IF SPINSURE = 1, THEN DISPLAY "also";**

**ELSE GO TO PROGRAMMING NOTE AI41**

**'QA17\_H47'** [AI40A] –

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

{Sinabi ninyo na mayroon kayong insurance mula sa employer o union ng inyong asawa./Sinabi ninyo na mayroon kayong insurance mula sa employer o union ng inyong partner.} Mayroon {din} bang insurance ang inyong (ASAWA/PARTNER) mula sa {kanyang} sariling employer?

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

**'POST\_QA17\_H47'** [POST\_AI40A] -

**POST-NOTE AI40A :**

**IF AI40A = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1**

**'PN\_QA17\_H48' [PN\_AI41] -**  
**PROGRAMMING NOTE AI41 :**  
**IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH AI41 ;**  
**IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY "also";**  
**ELSE GO TO PROGRAMMING NOTE AH109**

**'QA17\_H48' [AI41] –**

You said you {also} have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) {also} covered by this plan?

Sinabi ninyo na mayroon {din} kayong plan na binili ninyo nang direkta mula sa kompanya ng insurance. Naka-insure {rin} ba sa plan na ito ang inyong (ASAWA/PARTNER)?

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

**'POST\_QA17\_H48' [POST\_AI41] -**  
**POST-NOTE AI41 :**  
**IF AI41 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**  
**'PN\_QA17\_H49' [PN\_AH109] -**  
**PROGRAMMING NOTE AH109 :**  
**IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH AH109 ;**  
**IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY "also";**  
**ELSE GO TO PROGRAMMING NOTE AI42**

**'QA17\_H49' [AH109] –**

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

Sinabi ninyo na mayroon kayong plan na binili ninyo nang direkta mula sa Covered California. Naka-insure {rin} ba sa plan na ito ang inyong (ASAWA/PARTNER)?

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

**'POST\_QA17\_H49' [POST\_AH109] -**  
**POST-NOTE AH109 :**  
**IF AH109 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;**

**'PN\_QA17\_H50'** [PN\_AI42] -

**PROGRAMMING NOTE AI42 :**

**IF ARMILIT = 1, CONTINUE WITH AI42 ;**

**IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, DISPLAY "also";**

**ELSE GO TO PROGRAMMING NOTE AI42A**

**'QA17\_H50'** [AI42] –

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?

Sinabi ninyo na mayroon {din} kayong health insurance sa pamamagitan ng CHAMPUS/CHAMPUS-VA, TRICARE, VA o sa iba pang pangangalagang pangkalusugan ng militar. Naka-insure rin ba sa plan na ito ang inyong (ASAWA/PARTNER)?

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

**'POST\_QA17\_H50'** [POST\_AI42] -

**POST-NOTE AI42 :**

**IF AI42 = 1, SET SPMLIT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**

**'PN\_QA17\_H51'** [PN\_AI42A] -

**PROGRAMMING NOTE AI42A :**

**IF AROTHGOV = 1, CONTINUE WITH AI42A ;**

**IF AH59 = 91, THEN DISPLAY "some government health plan":**

**IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, DISPLAY "also";**

**ELSE GO TO PROGRAMMING NOTE AI46**

**'QA17\_H51'** [AI42A] –

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

Sinabi ninyo na mayroon {din} kayong health insurance sa pamamagitan ng {AIM/MRMIP/Family PACT/PCIP/isang health plan ng gobyerno}. Naka-insure din ba sa plan na ito ang inyong (ASAWA/PARTNER)?

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

**'POST\_QA17\_H51'** [POST\_AI42A] -

**POST-NOTE AI42A :**

**IF AI42A = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1 AND ARSAMESP =1**

**'PN\_QA17\_H52' [PN\_AI46] -**  
**PROGRAMMING NOTE AI46 :**  
**IF SPINSURE ≠ 1, DISPLAY "any";**  
**ELSE DISPLAY "through any other source"**

**'QA17\_H52' [AI46] –**

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

Mayroon bang {anumang} health insurance ang inyong (ASAWA/PARTNER) sa pamamagitan ng iba pang pinanggagalingan?

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

**If = 2, goto 'PN\_QA17\_H54'**

**If = -7, -8, goto 'PN\_QA17\_H58'**

**'QA17\_H53' [AI47] –**

What type of health insurance does {he/she} have?

Anong uri ng health insurance ang mayroon {siya}?

**[CODE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: May iba pa ba?]**

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

**[IF NEEDED, SAY: "Gaya ng mula sa kasalukuyan o dating employer, o na binili nila nang direkta mula sa health plan."]**

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

**[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakuha ba {niya} ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng eskwelahan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o nang direkta mula sa health plan?"]**

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

**'POST\_QA17\_H53' [POST\_AI47] -**

**POST-NOTE AI47 :**

**IF AI47 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;**

**IF AI47 = 2, SET SPEMOTH = 1 AND SET SPINSURE = 1;**

**IF AI47 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;**

**IF AI47 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1;**

**IF AI47 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;**

**IF AI47 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;**

**IF AI47 = 8, SET SPIHS = 1;**

**IF AI47 = 10, SET SPHBEX = 1 AND SPDIRECT = 1 AND SPINSURE = 1 AND SPDIRECTH = 1 ;**

**IF AI47 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1 AND SET SPEMPOTH = 1;**

**IF AI47 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;**

**IF AI47 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1**

**'PN\_QA17\_H54' [PN\_AI48] -**

**PROGRAMMING NOTE AI48 :**

**IF SPINSURE ≠ 1, CONTINUE WITH AI48 ;**

**ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN SKIP TO PROGRAMMING NOTE AH62**

**;**

**ELSE GO TO PROGRAMMING NOTE AI43**

**'QA17\_H54' [AI48] –**

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

Sinabi ninyo na walang health insurance ang inyong (ASAWA/PARTNER) mula sa anumang iba pang pinagkukunan? Tama ba ito?

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

**If = 1, -7, -8, goto 'PN\_QA17\_H58'**

**'QA17\_H55' [AI49] –**

What type of health insurance does {he/she} have?

Anong uri ng health insurance ang mayroon {siya}?

**[CODE ALL THAT APPLY] [PROBE: "Any others?"] [PROBE: "May iba pa ba?"]**

**[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: "Nakuha ba {niya} ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng eskwelahan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o nang direkta mula sa health plan?"]**

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

**'POST\_QA17\_H55' [POST\_AI49] -**

**POST-NOTE AI49 :**

**IF AI49 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;**

**IF AI49 = 2, SET SPEMPOTH = 1 AND SET SPINSURE = 1;**

**IF AI49 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;**

**IF AI49 = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;**

**IF AI49 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;**

**IF AI49 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;**

**IF AI49 = 8, SET SPIHS = 1;**

**IF AI49 = 10, SET SPHBEX = 1 AND SET SPDIRECT = 1 AND SET SPINSURE = 1 AND SPDIRECTH = 1;**

**IF AI49 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1 AND SPEMOTH = 1;**

**IF AI49 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;**

**IF AI49 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;**

**'PN\_QA17\_H56' [PN\_AH62] -**

**PROGRAMMING NOTE AH62 :**

**IF AI47 = (1, 2, 3, 10, 11) OR AI49 = (1, 2, 3, 10, 11) THEN CONTINUE WITH AH62 ;**

**IF AH43 = 1 (MARRIED), THEN DISPLAY "spouse's";**

**ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY "partner's";**

**ELSE SKIP TO PROGRAMMING NOTE AI43**



**'QA17\_H56'** [AH62] –

Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?

Kinuha ba ang plan na ito sa pangalan ng inyong {asawa/partner} o sa pangalan ng ibang tao?

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

**[IF NEEDED, SAY: "Kahit ibang taong hindi tumitira sa pamamahay na ito."]**

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

**If = 1, -7, -8, goto 'PN\_QA17\_H58'**

**'POST\_QA17\_H56'** [POST\_AH62] -

**POST-NOTE AH62 :**

**IF AH62 = 1 AND [AI47 = (1 OR 2) OR AI49 = (1 OR 2)], SET SPEMPOW = 1 AND SPEMPOT = 0;**

**IF AH62 = 1 AND [AI47 = 3 OR AI49 = 3], SET KSPDIROW = 1;**

**IF AH62 = 1 AND [AI47 = 10 OR AI49 = 10], SET SPHBEX = 1 AND SPDIROW = 1;**

**IF AH62 = 1 AND [AI47 = 11 OR AI49 = 11], SET SPHBEX = 1 AND SPEMPOW = 1;**

**'QA17\_H57'** [AH63] –

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

Nasa pangalan ba ninyo ang plan, pangalan ng magulang ninyo, o pangalan ng ibang tao?

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

**'POST\_QA17\_H57'** [POST\_AH63] -

**POST NOTE AH63:**

**IF AH63 = 1 AND [AI47 = (1 OR 2) OR AI49 = (1 OR 2)], SET SPEMPAR = 1 AND SPEMPOT = 0 AND ARSAMES = 1;**

**IF AH63 = 1 AND [AI47 = 3 OR AI49 = 3], SET SPDILAR = 1 AND ARSAMES = 1;**

**IF AH63 = 1 AND [AI47 = 10 OR AI49 = 10], SET SPHBEX = 1 AND SPDILAR = 1 AND ARSAMES = 1;**

**IF AH63 = 1 AND [AI47 = 11 OR AI49 = 11], SET SPHBEX = 1 AND SPEMPAR = 1 AND ARSAMES = 1;**

**IF AH63 = 2, SET SPARPAR = 1 AND SET SPEMPOT = 0;**

**'PN\_QA17\_H58'** [PN\_AI43] -

**PROGRAMMING NOTE AI43 :**

**IF SPEMPOW = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO AI22C ;**

**ELSE IF [(AG8=1 OR 2) OR (AG11=1)] AND AG9#3 CONTINUE WITH AI43 ;**

**IF AH43 = 1 (MARRIED), THEN DISPLAY "spouse's";**

**ELSE IF AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY "partner's"**

**ELSE GO TO PROGRAMMING NOTE AI22C**

**'QA17\_H58'** [AI43] –

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

Nag-aalok ba ng health insurance ang employer ng inyong {asawa/partner} sa sinuman sa mga empleado nito?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H62'**

**'QA17\_H59'** [A144] –

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

Karapat-dapat ba {siyang} sumali sa plan na ito?

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

**If = 2, goto 'QA17\_H61'**

**If = -7, -8, goto 'PN\_QA17\_H62'**

**'QA17\_H60'** [A145] –

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

Ano ISANG pangunahing dahilan na hindi {siya} kasali sa plan na ito?

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

**If = 1, 2, 3, 4, 91, -7, -8, goto 'PN\_QA17\_H62'**

**'QA17\_H61'** [A145A] –

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

Ano ang isang pangunahing dahilan na hindi {siya} karapat-dapat para sa plan na ito?

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

'PN\_QA17\_H62' [PN\_AI22C] -

**PROGRAMMING NOTE AI22C :**

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

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

ELSE CONTINUE WITH AI22C DISPLAY;

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

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

IF ARMCARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "other"

; IF [IF ARMCARE = 1 (R HAS MEDICARE) AND (ARMCAL = 1)], DISPLAY "Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan." AND "Medi-CAL" ;

IF [AH43 = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [(AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY "Next, I have some questions about your own main health plan."; AND " " ;

IF [AH43 = 1 (MARRIED) OR AD60 = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)] AND [ARMCAL = 1 AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY Next, I have some questions about your own main health plan." AND "Medi-Cal";

IF (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARMCARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY " " ;

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

ELSE DISPLAY, "Is your health plan an HMO?"

'QA17\_H62' [AI22C] –

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

{Maliban sa MediCARE plan na binaggit ninyo sa akin kanina, mayroon akong mga katanungan tungkol sa inyong ibang health plan.} Isang HMO ba ang inyong {Medi-Cal/ibang} health plan?

[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: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin ninyo ang mga doktor at ospital na kaanib sa kanilang network. Kung lalabas kayo sa network, sa karaniwan hindi mababayaran ito maliban kung ito'y emergency."]

[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: "Ang PANGUNAHING health plan ninyo."]

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

If = 1, goto 'PN\_QA17\_H64'

**'PN\_QA17\_H63' [PN\_AH122] -  
PROGRAMMING NOTE AH122 :  
IF ARMCAL = 1 (R HAS MEDI-CAL), GO TO AI22A ;  
ELSE CONTINUE WITH AH122 ;**

**'QA17\_H63' [AH122] –**

Is your health plan a PPO or EPO?

PPO o EPO ba ang inyong health plan?

**[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: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doktor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doctor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**

**[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: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doctor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doctor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doktor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**

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

**[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Iyong PANGUNAHING health plan ninyo."]**

- ☐ 01 PPO
- ☐ 02 EPO
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H64' [PN\_AI22A] -**

**PROGRAMMING NOTE AI22A :**

**IF ARINSURE = 1 AND ARM CARE ≠ 1, THEN CONTINUE WITH AI22A AND DISPLAY "your main";**

**IF ARINSURE = 1 AND ARM CARE = 1, THEN CONTINUE WITH AI22A AND DISPLAY "this"**

**'QA17\_H64' [AI22A] -**

What is the name of {your main/this} health plan?

Ano ang pangalan ng inyong pangunahing health plan?

**[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 DIFFICULTY RECALLING NAME, PROBE: "Mayroon ba kayong insurance card o anumang bagay kung saan nakasulat ang pangalan ng plan?"]**

- ☐ 01 ACCESS SENIOR HEALTHCARE
- ☐ 02 AETNA
- ☐ 03 AETNA GOLDEN MEDICARE
- ☐ 04 AIDS HEALTHCARE FOUNDATION, LA
- ☐ 05 ALAMEDA ALLIANCE FOR HEALTH
- ☐ 83 ALTAMED HEALTH SERVICES
- ☐ 07 ANTHEM BLUE CROSS OF CALIFORNIA
- ☐ 08 ASPIRE HEALTH PLAN
- ☐ 09 BLUE CROSS CALIFORNIACARE
- ☐ 79 BLUE CROSS SENIOR SECURE
- ☐ 11 BLUE SHIELD 65 PLUS
- ☐ 12 BLUE SHIELD OF CALIFORNIA
- ☐ 13 BRAND NEW DAY (UNIVERSAL CARE)
- ☐ 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- ☐ 15 CALIFORNIAKIDS (CALKIDS)
- ☐ 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- ☐ 17 CALVIVA HEALTH
- ☐ 18 CARE 1ST HEALTH PLAN
- ☐ 19 CAREMORE HEALTH PLAN
- ☐ 21 CENTER FOR ELDERS' INDEPENDENCE
- ☐ 80 CEN CAL HEALTH
- ☐ 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- ☐ 23 CENTRAL HEALTH PLAN
- ☐ 24 CHINESE COMMUNITY HEALTH PLAN
- ☐ 25 CHOICE PHYSICIANS NETWORK
- ☐ 26 CIGNA HEALTHCARE
- ☐ 27 CITIZENS CHOICE HEALTHPLAN
- ☐ 28 COMMUNITY CARE HEALTH PLAN
- ☐ 29 COMMUNITY HEALTH GROUP
- ☐ 81 CONTRA COSTA HEALTH PLAN
- ☐ 31 DAVITA HEALTHCARE PARTNERS PLAN
- ☐ 32 EASY CHOICE HEALTH PLAN
- ☐ 33 EPIC HEALTH PLAN
- ☐ 34 GEM CARE HEALTH PLAN
- ☐ 35 GOLD COAST HEALTH PLAN
- ☐ 36 GOLDEN STATE MEDICARE HEALTH PLAN
- ☐ 38 HEALTH NET
- ☐ 39 HEALTH NET SENIORITY PLUS
- ☐ 40 HEALTH PLAN OF SAN JOAQUIN
- ☐ 41 HEALTH PLAN SAN JP AUTHORITY
- ☐ 42 HERITAGE PROVIDER NETWORK
- ☐ 43 HUMANA GOLD PLUS
- ☐ 44 HUMANA HEALTH PLAN
- ☐ 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- ☐ 46 INTER VALLEY HEALTH PLAN
- ☐ 82 HEALTH ADVANTAGE
- ☐ 47 KAISER PERMANENTE
- ☐ 48 KAISER PERMANENTE SENIOR ADVANTAGE
- ☐ 49 KERN FAMILY HEALTH CARE

- ☐ 50 L.A. CARE HEALTH PLAN
- ☐ 51 MD CARE
- ☐ 54 MOLINA HEALTHCARE OF CALIFORNIA
- ☐ 55 MONARCH HEALTH PLAN
- ☐ 56 ON LOK SENIOR HEALTH SERVICES
- ☐ 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- ☐ 58 PIH HEALTH CARE SOLUTIONS
- ☐ 59 PREMIER HEALTH PLAN SERVICES
- ☐ 60 PRIMECARE MEDICAL NETWORK
- ☐ 61 PROVIDENCE HEALTH NETWORK
- ☐ 68 SCRIPPS HEALTH PLAN SERVICES
- ☐ 69 SEASIDE HEALTH PLAN
- ☐ 84 SAN FRANCISCO HEALTH PLAN
- ☐ 90 SANTA CLARA FAMILY HEALTH PLAN
- ☐ 86 SAN MATEO HEALTH COMMISION
- ☐ 88 SANTA BARBARA
- ☐ 92 SATELLITE HEALTH PLAN
- ☐ 67 SCAN HEALTH PLAN
- ☐ 70 SHARP HEALTH PLAN
- ☐ 71 SUTTER HEALTH PLAN
- ☐ 72 SUTTER SENIOR CARE
- ☐ 73 UNITED HEALTHCARE
- ☐ 74 UNITED HEALTHCARE SECURE HORIZON
- ☐ 75 UNIVERSITY HEALTHCARE ADVANTAGE
- ☐ 76 VALLEY HEALTH PLAN
- ☐ 77 VENTURA COUNTY HEALTH CARE PLAN
- ☐ 78 WESTERN HEALTH ADVANTAGE
- ☐ 93 CHAMPUS/CHAMP-VA
- ☐ 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- ☐ 89 VA HEALTH CARE SERVICES
- ☐ 52 MEDI-CAL
- ☐ 53 MEDICARE
- ☐ 85 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'POST\_QA17\_H64' [POST\_AI22A] -**

**POST NOTE AI22A :**

**IF AI22A = 93, 87, OR 89 THEN SET ARMILIT=1**

**'PN\_QA17\_H65' [PN\_AI25] -**

**PROGRAMMING NOTE AI25 :**

**IF ARMCARE = 1 (R HAS MEDI-CARE) AND (AREMPOTH ≠ 1 OR ARDIRECT ≠ 1 OR ARMCAL ≠ 1 OR ARMILIT ≠ 1 OR ARIHS ≠ 1 OR ARHBEX ≠ 1 OR AROTHGOV ≠ 1 OR**

**AROTHER ≠ 1) AND AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE),  
DISPLAY "Next I have some questions about your own main health plan."**

**'QA17\_H65' [AI25] –**

{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?

{Susunod, may ilang katanungan ako tungkol sa inyong pangunahing health plan.} Naka-insure ba kayo para sa mga gamot na inirereseta sa inyo? Ibig sabihin, may plan bang nagbabayad ng anumang bahagi ng gastos?

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

**'PN\_QA17\_H66' [PN\_AH71] -**

**PROGRAMMING NOTE AH71 :**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 THEN  
CONTINUE WITH AH71 ;  
ELSE GO TO AI31**

**'QA17\_H66' [AH71] –**

Does your health plan have a deductible that is more than \$1,000?

May deductible ba na higit sa \$1,000 ang health plan ninyo?

**[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: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN I GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H67' [AH72] –**

Does your health plan have a deductible **for all covered persons** that is more than \$2,000?

May deductible ba na mahigit sa \$2,000 para sa lahat ng taong naka-insure ang inyong health plan?

**[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: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN I GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H68' [PN\_AH73B] -**

**PROGRAMMING NOTE AH73B :**

**IF ARINSURE = 1 AND (AREMPOTH=1 OR ARDIRECT=1 OR ARHBEX = 1 OR AREMPOWN =1 OR ARDIROWN =1 OR ARDIROTH =1 OR AREMPSP =1 OR ARDIRSP =1 OR AREMPPAR =1 OR SPHBEX =1 OR ARDIRPAR =1 THEN CONTINUE WITH AH73B ;  
ELSE CONTINUE WITH AI31**

**'QA17\_H68' [AH73B] –**

Do you have a special account or fund you can use to pay for medical expenses?

Mayroon ba kayong tanging account o pondo na maaari ninyong gamiting pambayad sa mga gastos sa pagpapagamot?

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

**If = 2, -7, -8, goto 'QA17\_H71'**

**'QA17\_H69'** [AH130] –

Do you have money in this account?

May pera ka ba sa account na ito?

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

**If = 2, -7, -8, goto 'QA17\_H71'**

**'QA17\_H70'** [AH131] –

How much money do you have in this account? Your best guess is fine. \_\_\_\_\_ (AMOUNT)

Magkano ang pera na mayroon ka sa account na ito? Okay lang ang pinakamalapit mong tantiya.

\_\_\_\_\_ (HALAGA)

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H71'** [AI31] –

Thinking about your current health insurance, did you have this same insurance for all 12 of the past 12 months?

Isipin ninyo ang inyong kasalukuyang health insurance, ito rin ba mismo ang insurance ninyo sa kabuuan 12 ng nakaraang 12 buwan.

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

**If = 2, goto 'QA17\_H73'**

**If = -7, goto 'QA17\_H79'**

**If = -8, goto 'QA17\_H74'**

**'QA17\_H72'** [AH132] –

How long have you had your current health insurance?

Nitong nakaraang 12 buwan, noong hindi kayo naka-insure sa inyong kasalukuyang health insurance, mayroon ba kayong anumang iba pang health insurance?

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

'AH132M' [AH132M] - \_\_\_\_\_ NUMBER OF MONTHS

**If >=0, goto 'QA17\_H77'**

'AH132Y' [AH132Y] - \_\_\_\_\_ NUMBER OF YEARS

**If >=0, goto 'QA17\_H77'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If =-7, -8,, goto 'QA17\_H77'**



**‘QA17\_H73’ [AH133] –**

Out of the last 12 months, how many months did you have your current health insurance plan?

Sa loob ng nakaraang labindalawang buwan, ilang buwan ka nagkaroon ng insurance sa kasalukuyan mong health insurance?

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

\_\_\_\_\_ NUMBER OF MONTHS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_H74’ [AI32] –**

During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?

Nitong nakaraang 12 buwan, noong hindi kayo naka-insure sa inyong kasalukuyang health insurance, mayroon ba kayong anumang iba pang health insurance?

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

**If =2, -7, -8, goto ‘QA17\_H77’**

**‘QA17\_H75’ [AI33] –**

Was your other health insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Medi-Cal ba ang iba pang insurance ninyo, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang tuwiran mula sa insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: 「May iba pa ba? 」 ]**

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H76' [PN\_AH134] -**  
**PROGRAMMING NOTE AH134:**  
**IF MORE THAN ONE RESPONSE FROM AI33, THEN CONTINUE WITH AH134;**  
**ELSE CONTINUE WITH AH135**

**'QA17\_H76' [AH134] –**

Prior to your current plan, which health insurance did you have?

Nitong nakaraang 12 buwan, mayroon bang panahon na wala kayong anumang health insurance?

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H77' [PN\_AH135] -**  
**PROGRAMMING NOTE AH135:**  
**IF AI32#1 OR AI31 = 1, THEN CONTINUE WITH AH135;**  
**ELSE CONTINUE WITH AH136**

**'QA17\_H77' [AH135] –**

Prior to your current plan, did you have other health insurance through Medi-CAL, through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Bago ang kasalukuyan mong plan, may iba ka bang health insurance na inilalaan ng Medi-CAL, ng isang employer, isang plan na direkta mong binili mula sa isang insurance company, isang plan na binili mo sa pamamagitan ng Covered California, o iba pang plan?

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ 95 NO OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H78' [PN\_AH136] -**  
**PROGRAM NOTE AH136:**  
**IF AH135 = 95, THEN SKIP TO AH137, ELSE CONTINUE.**  
**IF ONLY ONE RESPONSE FROM AI33 THEN DISPLAY THAT RESPONSE**  
**ELSE IF AH134 >0 DISPLAY RESPONSE FROM AH134**  
**ELSE IF AH135 >0 DISPLAY RESPONSE FROM AH135**

**'QA17\_H78' [AH136] –**

How long did you have the plan from {AH134/AH135/AI33}?

Gaano ka katagal nagkaroon ng plan mula sa {AH134/AH135/AI33}?

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

'AH136M' [AH136M] - \_\_\_\_\_ NUMBER OF MONTHS

'AH136Y' [AH136Y] - \_\_\_\_\_ NUMBER OF YEARS

**If >=0, goto 'QA17\_H79'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H79' [AH137] -**

During the past 12 months, did you change your health insurance plan?

Sa loob ng nakaraang labindalawang buwan, binago ba ng inyong asawa ang kanyang health insurance plan?

**[IF NEEDED: Please include changes in health plan from the same or different health insurance companies.]**  
**[IF NEEDED: Paki-bilang ang mga pagbabago sa kanyang health plan mula sa mga pareho o magkakaibang health insurance companies.]**

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

**'PN\_QA17\_H80' [PN\_AI34] -**  
**PROGRAMMING NOTE AI34:**  
**IF AI31 = 2, -7, -8 OR AI32 = 1, -7, -8 THEN CONTINUE,**  
**ELSE SKIP TO AI35**

**'QA17\_H80' [AI34] –**

During the past 12 months, was there any time when you had no health insurance at all?

Nitong nakaraang 12 buwan, mayroon bang panahon na wala kayong anumang health insurance?

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

**'PN\_QA17\_H81'** [PN\_AI35] -

**If AI34 HAS 1 OR AI32 HAS 2, Only ask 'QA17\_H81'**

**PROGRAMMING NOTE AI35:**

**IF AI34=1 OR AI32=2, THEN CONTINUE WITH AI35, ELSE SKIP TO PN AH103H.**

**'QA17\_H81'** [AI35] -

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

Ilang buwan nitong nakaraang 12 buwan na wala kayong health insurance?

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

\_\_\_\_\_ NUMBER OF MONTHS [HR: 0-11]

**If = 0, goto 'PN\_QA17\_H90'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, goto 'PN\_QA17\_H90'**

**'QA17\_H82'** [AI36] -

What is the ONE MAIN reason why you did not have any health insurance during those months?

Ano ang isang pangunahing dahilan kung bakit wala kayong anumang health insurance sa mga buwan na iyon?

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI36

**'QA17\_H83'** [AH74] -

During the time that you were uninsured, did you try to find health insurance on your own?

Noong panahon na hindi kayo naka-insure, sinubukan ba ninyong maghanap ng health insurance nang walang tulong?

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

**If = 1, 2, -7, -8, goto 'PN\_QA17\_H90'**

**‘QA17\_H84’ [A124] –**

What is the ONE MAIN reason why you do not have any health insurance?

Ano ang isang pangunahing dahilan kung bakit wala kayong anumang health insurance?

**[IF R SAYS NO NEED, PROBE WHY]**

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_H85’ [AH75] –**

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

Noong panahon na hindi kayo naka-insure, sinubukan ba ninyong maghanap ng health insurance nang walang tulong?

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

**‘QA17\_H86’ [A127] –**

Were you covered by health insurance at any time during the past 12 months?

May health insurance ba kayo kailanman nitong nakaraang 12 buwan?

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

**If = 1, goto ‘QA17\_H88’**

**‘QA17\_H87’ [A128] –**

How long has it been since you last had health insurance?

Gaano katagal na mula noong huling may health insurance kayo?

- ☐ 01 MORE THAN 12 MONTHS AGO, BUT NOT MORE THAN 3 YEARS AGO
- ☐ 02 MORE THAN 3 YEARS AGO
- ☐ 03 NEVER HAD HEALTH INSURANCE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, -7, -8, goto ‘PN\_QA17\_H90’**

**'QA17\_H88'** [AI29] –

For how many months out of the last 12 months did you have health insurance?  
Ilang buwan nitong nakaraang 12 buwan may health insurance kayo?

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

\_\_\_\_\_ MONTHS [HR: 0-12]

**If =0 , goto 'PN\_QA17\_H90'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H89'** [AI30] –

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

Noong mayroon kayong health insurance, Medi-CAL ba ang inyong insurance, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang direkta mula sa isang insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER OR UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H90'** [PN\_AH103h] -

**PROGRAMMING NOTE AH103h :**

**IF ARINSURE ≠ 1 OR AI32 = 2 OR ARDIRECT = 1 OR AI30 = (5, 6) OR AI33 = (5, 6) OR ARHBEX =1 OR SPHBEX = 1; THEN CONTINUE WITH AH103h ;  
ELSE GO TO PROGRAMMING NOTE AH139**

**'QA17\_H90'** [AH103h] –

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

Nitong nakaraang 12 buwan, sinubukan ba ninyong bumili ng health insurance plan nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H107'**

**'QA17\_H91'** [AH110h] –

Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?

Binibili ba ninyo nang direkta mula sa insurance company o HMO, o sa pamamagitan ng Covered California, o kapwa mula sa insurance company at sa pamamagitan ng Covered California?

- ☐ 01 DIRECTLY FROM AN INSURANCE COMPANY OR HMO, OR
- ☐ 02 THROUGH COVERED CALIFORNIA, OR
- ☐ 03 BOTH, FROM AN INSURANCE COMPANY AND THROUGH COVERED CALIFORNIA
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

If = -7, -8, goto **'QA17\_H94'**

**'PN\_QA17\_H92'** [PN\_AH98h] -

**PROGRAMMING NOTE AH98h :**

**IF AH110h = 1; THEN CONTINUE WITH AH98h ;**

**IF AH110h = 3; THEN CONTINUE WITH AH98h AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."**

**ELSE GO TO PROGRAMMING NOTE AH111h ;**

**'QA17\_H92'** [AH98h] –

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

{Una isipin ninyo ang inyong karanasan sa pagsisikap bumili ng insurance nang direkta mula sa insurance company o HMO.}

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

Gaano kahirap makahanap ng plan na may mga coverage na kailangan ninyo? Ito ba ay...

- ☐ 01 Very difficult,
- ☐ 01 Talagang mahirap,
- ☐ 02 Somewhat difficult,
- ☐ 02 Medyo mahirap,
- ☐ 03 Not too difficult, or
- ☐ 03 Hindi masyadong mahirap, o
- ☐ 04 Not at all difficult?
- ☐ 04 Hindi mahirap kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H93'** [AH99h] –

How difficult was it to find a plan you could afford? Was it...

Gaano kahirap makahanap ng plan na kaya ninyo? Ito ba ay...

- ☐ 01 Very difficult,
- ☐ 01 Talagang mahirap,
- ☐ 02 Somewhat difficult,
- ☐ 02 Medyo mahirap,
- ☐ 03 Not too difficult, or
- ☐ 03 Hindi masyadong mahirap, o
- ☐ 04 Not at all difficult?
- ☐ 04 Hindi mahirap kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H94'** [AH100h] –

Did anyone help you find a health plan?

Mayroon bang tumulong sa inyong humanap ng health plan?

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

**If = 2, -7, -8, goto 'PN\_QA17\_H96'**

**'QA17\_H95'** [AH101h] –

Who helped you?

Sino ang tumulong sa inyo?

- ☐ 01 BROKER
- ☐ 02 FAMILY MEMBER/FRIEND
- ☐ 03 INTERNET
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H96'** [PN\_AH111h] -

**PROGRAMMING NOTE AH111h :**

**IF AH110h = 2; THEN CONTINUE WITH AH111h ;**

**IF AH110h = 3; THEN CONTINUE WITH AH111h AND DISPLAY "Now, think about your experience with Covered California."**

**ELSE GO TO PROGRAMMING NOTE AH115h ;**

**'QA17\_H96'** [AH111h] –

{Now, think about your experience with Covered California.}

{Ngayon, isipin ang inyong karanasan sa Covered California.}

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

Was it... Gaano kahirap humanap ng plan na may coverage na kailangan ninyo sa pamamagitan ng Covered California? Ito ba ay...

- ☐ 01 Very difficult,
- ☐ 01 Talagang mahirap,
- ☐ 02 Somewhat difficult,
- ☐ 02 Medyo mahirap,
- ☐ 03 Not too difficult, or
- ☐ 03 Hindi masyadong mahirap, o
- ☐ 04 Not at all difficult?
- ☐ 04 Hindi mahirap kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'QA17\_H97'** [AH112h] –

How difficult was it to find a plan you could afford? Was it...

Gaano kahirap humanap ng plan na abot-kaya ninyo? Ito ba ay...

- ☐ 01 Very difficult,
- ☐ 01 Talagang mahirap,
- ☐ 02 Somewhat difficult,
- ☐ 02 Medyo mahirap,
- ☐ 03 Not too difficult, or
- ☐ 03 Hindi masyadong mahirap, o
- ☐ 04 Not at all difficult?
- ☐ 04 Hindi mahirap kahit kaunti?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H98'** [AH113h] –

Did anyone help you find a health plan?

Mayroon bang tumulong sa inyong humanap ng health plan?

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

**If = 2, -7, -8, goto 'QA17\_H100'****'QA17\_H99'** [AH114h] –

Who helped you?

Sinong tumulong sa inyo?

- ☐ 01 BROKER
- ☐ 02 FAMILY MEMBER / FRIEND
- ☐ 03 INTERNET
- ☐ 04 CERTIFIED ENROLLMENT COUNSELOR
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AH114h

**'QA17\_H100'** [AH115h] –

Did you have all the information you felt you needed to make a good decision on a health plan?

Nasa inyo ba ang lahat ng impormasyon na sa tingin ninyo ay kailangan ninyo para makapagdesisyon nang mabuti tungkol sa health plan?

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

**'PN\_QA17\_H101'** [PN\_AH116h] -**PROGRAMMING NOTE AH116h :****IF AH37 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH AH116h ;  
ELSE GO TO AH117h ;****'QA17\_H101'** [AH116h] –

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

Nakakuha ba kayo ng impormasyon sa inyong wika tungkol sa mga maaari ninyong mapili sa health plan?

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

**'QA17\_H102'** [AH117h] –

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

Ang presyo ba ng plan na pinili ninyo ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?

- ☐ 01 VERY IMPORTANT
- ☐ 02 SOMEWHAT IMPORTANT
- ☐ 03 NOT IMPORTANT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H103'** [AH118h] –

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

Ang abilidad ba na makapagpagamot sa isang partikular na doctor ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?

- ☐ 01 VERY IMPORTANT
- ☐ 02 SOMEWHAT IMPORTANT
- ☐ 03 NOT IMPORTANT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H104'** [AH119h] –

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

Ang abilidad ba na makapagpagamot sa isang partikular na ospital ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?

- ☐ 01 VERY IMPORTANT
- ☐ 02 SOMEWHAT IMPORTANT
- ☐ 03 NOT IMPORTANT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_H105' [AH120h] –

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

Iyong mapagpipiliang mga doktor ba na kaanib sa network ng plan ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan

- ☐ 01 VERY IMPORTANT
- ☐ 02 SOMEWHAT IMPORTANT
- ☐ 03 NOT IMPORTANT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_H106' [PN\_AH121h] -

**PROGRAMMING NOTE AH121h :**

```
IF AH106 = 1 THEN DISPLAY "Bronze"
ELSE IF AH106 = 2 THEN DISPLAY "Silver"
ELSE IF AH106 = 3 THEN DISPLAY "Gold"
ELSE IF AH106 = 4 THEN DISPLAY "Platinum"
ELSE IF AH106 = 6 THEN DISPLAY "Minimum coverage"
ELSE DISPLAY " ";
```

'QA17\_H106' [AH121h] –

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

Pangwakas, ano ang naging pinaka-importanteng dahilan kung bakit pinili ninyo ang inyong {Bronze/Silver/Gold/Platinum} plan? Iyon ba ay ang presyo, ang abilidad ninyong magpagamot sa isang partikular na doctor, ang abilidad ninyong makapunta sa isang partikular na ospital, ang inyong mapagpipiliang mga provider na kaanib sa network ng inyong plan, o iba pang dahilan?

- ☐ 01 COST
- ☐ 02 SPECIFIC DOCTOR
- ☐ 03 SPECIFIC HOSPITAL
- ☐ 04 CHOICE OF DOCTORS IN NETWORK
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AH121h

'PN\_QA17\_H107' [PN\_AH139] - PN\_AH139

**PROGRAMMING NOTE AH139:**

```
IF ARINSURE = 1, CONTINUE WITH AH139;
ELSE SKIP TO AH14;
```

'QA17\_H107' [AH139] –

Overall, how satisfied are you with your current health insurance plan? Are you...

Sa pangkalahatan, gaano ka nasisiyahan sa kasalukuyan mong health insurance plan? Masasabi mo bang ikaw ay...

- ☐ 01 Very satisfied
- ☐ 02 Somewhat satisfied
- ☐ 03 Somewhat dissatisfied, or
- ☐ 04 Very dissatisfied?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_H108' [PN\_AH14] -  
PROGRAMMING NOTE AH14 :  
IF AH15A = 1 (HOSPITALIZED FOR ASTHMA) OR AB80 = 1 (HOSPITALIZED FOR ASTHMA) THEN GO TO  
PROGRAMMING NOTE AH76 ;  
ELSE CONTINUE WITH AH14**

**'QA17\_H108' [AH14] –**

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

Nitong nakaraang 12 buwan, naging pasyente ba kayo na na-ospital nang magdamag o mas matagal pa?

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

**If = 2, -7, -8, goto 'PN\_PN\_AH77'**

**'PN\_QA17\_H109' [PN\_AH76] -  
PROGRAMMING NOTE AH76:  
IF ARINSURE ≠ 1 OR AI35 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS),  
THEN CONTINUE WITH AH76 AND IF AH15=1 OR AB80 =1 display "Previously you mentioned you were a  
patient in a hospital overnight or longer" ;  
ELSE GO TO PROGRAMMING NOTE AH77**

**'QA17\_H109' [AH76] –**

Was any of that hospital care paid for by Medi-Cal?

Binayaran ba ng Medi-Cal ang anumang bahagi ng paggagamot ng ospital?

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

**'PN\_QA17\_H110' [PN\_AH77] -  
PROGRAMMING NOTE AH77 :  
[IF ARINSURE ≠ 1 OR AI35 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)]  
AND AA3 =2 (FEMALE) AND AD13 =1 (PREGNANT) OR SC14A =1 , THEN CONTINUE WITH AH77 ;  
ELSE GO TO NEXT SECTION**

**'QA17\_H110' [AH77] –**

During the last 12 months, did you get prenatal care that you didn't have to pay for?

Nitong nakaraang 12 buwan, nakapagpatingin ba kayo para sa pangangalaga habang buntis na hindi ninyo kinailangang bayaran?

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

**If = 2, -7, -8, goto 'AH79'**

'QA17\_H111' [AH78] –

Was it paid for by Medi-Cal?

Binayaran ba ito ng Medi-Cal?

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

'PN\_AH79' [PN\_AH79] -

**PROGRAM NOTE AH79:**

**IF ARMCAL =1 OR ARINSURE ≠ 1, SKIP TO AH81B**

**ELSE IF AI32 = 1 (COVERAGE IN THE PAST 12 MONTHS) DISPLAY "The following questions are about your spouse's current health plan", AND CONTINUE WITH AH79**

'AH79' [AH79] –

{The following questions are about your current health plan.} While you've had your current health plan, have you reached the limit of what your insurance company would pay for?

{Ang mga sumusunod na katanungan ay tungkol sa kasalukuyan mong health plan.} Naabot mo ba ang limit ng kaya lang bayaran ng inyong insurance company sa loob ng panahon na may insurance plan ka sa kanila?

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

**If = 2, -7, -8, goto 'QA17\_H114'**

'QA17\_H113' [AH80B] –

Did this happen in the past 12 months?

Nangyari ba ito sa loob ng nakaraang labindalawang buwan?

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

'QA17\_H114' [AH81B] –

During the past 12 months, did you have medical bills that you had problems paying or were unable to pay, either for yourself or any family member in your household?

Sa loob ng nakaraang labindawalang buwan, mayroon bang mga medical bill na nahirapan kang bayaran o hindi mo nabayaran, para sa sarili mo o sa sinumang miyembro ng pamilya sa inyong tahanan?

**[IF NEEDED, SAY: "Dental bills should be included."]**

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

**If = 2, -7, -8, goto PN\_CF10A**

**'QA17\_H115'** [AH83B] –

What is the total amount of medical bills?

Magkano ang kabuuang halaga ng mga medical bill na ito?

**[IF NEEDED, SAY: "The bills can be from earlier years as well as this year."]**

- ☐ 01 LESS THAN \$1,000
- ☐ 02 \$1,000 TO LESS THAN \$2,000
- ☐ 03 \$2,000 TO LESS THAN \$4,000
- ☐ 04 \$4,000 TO LESS THAN \$8,000
- ☐ 05 \$8,000 OR MORE
- ☐ 06 NONE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H116'** [AH84B] –

Were you or your family member uninsured at the time care was provided?

Ikaw ba o ang mga miyembro ng inyong pamilya ay walang insurance noong binigyan kayo ng pangangalaga?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 MORE THAN ONE PERSON WITH MEDICAL BILL PROBLEMS AND ONE PERSON UNINSURED AND THE OTHER INSURED
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_H117'** [AH85B] –

Because of these medical bills, were you unable to pay for basic necessities like food, heat, or rent?

Dahil sa mga medical bill na ito, hindi ka ba nakabayad ng mga pangunahing pangangailangan gaya ng pagkain, heat, o renta?

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

**'QA17\_H118'** [AH86B] –

Because of these medical bills, did you take on credit card debt?

Dahil sa mga medical bill na ito, nagkaroon ka ba ng utang sa inyong credit card?

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

## Section I: Child Adolescent Health Insurance

**'PN\_QA17\_I1'** [PN\_CF10A] -**PROGRAMMING NOTE CF10A :****IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE IA10A TO ASK ABOUT SELECTED ADOLESCENT;****IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE MA1 ;****ELSE CONTINUE WITH CF10A****'QA17\_I1'** [CF10A] –

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

Ang sumusunod na mga katanungan ay tungkol sa health insurance na maaaring mayroon si (CHILD).

Does (CHILD) have the same insurance as you?

Iisa ba ang insurance ninyo at ni {CHILD}?

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

**If = 1, goto 'QA17\_I19'****'POST\_QA17\_I1'** [POST\_CF10A] -**POST-NOTE CF10A :****IF CF10A = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AREMPOW = 1, SET CHEMA = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AREMPSP = 1, SET CHEMA = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AREMPPAR = 1, SET CHEMA = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AREMPOTH = 1, SET CHEMA = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND AROTH = 1, SET CHOTH = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;****IF CF10A = 1 AND ARIHS = 1, SET CHIHS = 1****IF CF10A = 1 AND ARHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**

**'PN\_QA17\_I2' [PN\_MA1] -**

**PROGRAMMING NOTE MA1 :**

**IF SPINSURE ≠ 1, THEN SKIP TO CF1 ;**

**ELSE IF CF10A = 2 AND ARSAMESP = 1, THEN SKIP TO CF1 ;**

**ELSE CONTINUE WITH MA1**

**'QA17\_I2' [MA1] –**

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

lisa ba ang insurance ni (CHILD) at ng inyong {asawa/partner/ PANGALAN NG ASAWA/PARTNER }?

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

**If = 1, goto 'QA17\_I19'**

**'POST\_QA17\_I2' [POST\_MA1] -**

**IF MA1 = 1 AND SPOTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPIHS = 1, SET CHIHS = 1**

**IF MA1 = 1 AND SPHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPARPAR = 1, THEN SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH = 1**

**IF MA1 = 1 AND SPEMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPENPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPENPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**POST-NOTE MA1 :**

**IF MA1 = 1 AND SPMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**IF MA1 = 1 AND SPENPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;**

**'QA17\_I3' [CF1] –**

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

Naka-insure ba {siya/siya} sa kasalukuyan sa Medi-CAL?

**[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: "Ang Medi-CAL ay plan para sa ilang mga bata at pamilya nila na mabababa ang kita, mga babaeng buntis, at mga taong may kapansanan o nakatatanda."]**

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

**'POST\_QA17\_I3' [POST\_CF1] -**

**POST-NOTE CF1 :**

**IF CF1 = 1, SET CHMCAL = 1 AND SET CHINSURE = 1**



'QA17\_I4' [CF3] –

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

Naka-insure ba si (CHILD) sa health insurance plan o sa HMO sa pamamagitan ng inyong trabaho o union o ng ibang tao?

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

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

If = 2, -7, -8, goto 'PN\_QA17\_I6'

'POST\_QA17\_I4' [POST\_CF3] -

**POST-NOTE CF3 :**

**IF CF3 = 1, SET CHEMP = 1 AND CHINSURE = 1**

'QA17\_I5' [AI90] –

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

Nakuha ba itong plan sa pamamagitan ng isang employer, union, o ng SHOP program ng Covered California?

**[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California"] [IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]**

- ☐ 01 EMPLOYER
- ☐ 02 UNION
- ☐ 03 SHOP / COVERED CALIFORNIA
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI90

'POST\_QA17\_I5' [POST\_AI90] -

**POST-NOTE FOR AI90 :**

**IF AI90 = 3, THEN SET CHHBEX = 1**

**'PN\_QA17\_I6'** [PN\_CF4] -  
**PROGRAM NOTE CF4 :**  
**IF CHINSURE = 1 THEN GO TO AI92 ;**  
**ELSE CONTINUE WITH CF4**

**'QA17\_I6'** [CF4] –

Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?

Naka-insure ba si (CHILD) sa health insurance plan na binili ninyo nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

**[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: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital kayo."]**

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

**If = 2, -7, -8, goto 'PN\_QA17\_I13'**

**'POST\_QA17\_I6'** [POST\_CF4] -  
**POST-NOTE CF4 :**  
**IF CF4 = 1, SET CHDIRECT = 1 AND CHINSURE = 1**  
**'PN\_QA17\_I7'** [PN\_AI91] -  
**PROGRAMMING NOTE AI91 :**  
**IF CHDIRECT = 1, THEN CONTINUE WITH AI91 ;**  
**ELSE GO TO PROGRAMMING NOTE AI92**

**'QA17\_I7'** [AI91] –

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

Paano ninyo binili itong health insurance - direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

- ☐ 01 INSURANCE COMPANY OR HMO
- ☐ 02 COVERED CALIFORNIA
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI91

**'POST\_QA17\_I7'** [POST\_AI91] -  
**POST-NOTE FOR AI91 :**  
**IF AI91 = 2, THEN SET CHHBEX = 1**  
**'PN\_QA17\_I8'** [PN\_AI92] -  
**PROGRAMMING NOTE AI92**  
**IF CHHBEX = 1, THEN CONTINUE WITH AI92 ;**  
**ELSE GO TO PROGRAMMING NOTE AI54 ;**

'QA17\_I8' [AI92] –

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

Bronze, silver, gold o platinum plan ba ito?

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

OTHER\_AI92

'PN\_QA17\_I9' [PN\_AI93] -

**PROGRAMMING NOTE AI93**

**IF CHHBEX = 1 AND CHDIRECT = 1, THEN CONTINUE WITH AI93 ;  
ELSE GO TO PROGRAMMING NOTE AI54 ;**

'QA17\_I9' [AI93] –

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

Mayroon bang subsidy (pananalaping tulong) para sa o diskwento sa premium (buwanang bayad) para sa plan na ito?

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

**'PN\_QA17\_I10' [PN\_AI54] -  
PROGRAMMING NOTE AI54 :  
IF CHEMP = 1 (EMPLOYER-BASED COVERAGE) OR CHDIRECT = 1 (PURCHASED OWN COVERAGE),  
CONTINUE WITH AI54 ;  
ELSE GO TO CF6**

**'QA17\_I10' [AI54] –**

Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan ni (CHILD) ?  
Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]**

**[IF NEEDED, SAY: "Ang mga co-pay ay ang inyong mga kabahaging bayad para sa pangangalagang pangkalusugan tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang may ibang nagbabayad para sa inyong pangunahing health care coverage."]**

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

**[IF NEEDED, SAY: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong health plan para sa inyong pagpapagamot."]**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY: "Ang premium ang singil buwan-buwan para sa gastos ng inyong health insurance plan."]**

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

**'QA17\_I11' [AI50] –**

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

Mayroon bang sinumang iba, gaya ng isang employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan ni (CHILD)?

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

**If = 2, -7, -8, goto 'PN\_QA17\_I13'**

**'QA17\_I12'** [AI51] –

Who else pays all or some portion of the cost for (CHILD)'s health plan?

Sino pang iba ang nagbabayad ng lahat o ng bahagi ng gastos sa health plan ni (CHILD)?

**[CODE ALL THAT APPLY.]**

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

**'POST\_QA17\_I12'** [POST\_AI51] -

**POST-NOTE AI51 :**

**IF AI51 = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;**

**IF AI51 = 7, SET CHMCAL = 1**

**IF AI51 = 10, SET CHHBEX = 1;**

**'PN\_QA17\_I13'** [PN\_CF6] -

**PROGRAMMING NOTE CF6 :**

**IF CHINSURE = 1, GO TO PN MA3 ;**

**ELSE CONTINUE WITH CF6**

**'QA17\_I13'** [CF6] –

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

Naka-insure ba {siya/siya} sa CHAMPUS/CHAMP-VA, TRICARE, VA o sa iba pang pangangalagang pangkalusugan ng militar?

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

**If = 1, goto 'PN\_QA17\_I19'**

**'POST\_QA17\_I13'** [POST\_CF6] -

**POST-NOTE CF6 :**

**IF CF6 = 1, SET CHMILIT = 1 AND CHINSURE = 1**

**'QA17\_I14'** [CF7] –

Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Healthy Kids, or something else?

Naka-insure ba {siya/siya} sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," Healthy Kids, o sa iba pa?

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program."]**

**[IF NEEDED, SAY: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program.]**

- ☐ 01 AIM
- ☐ 02 MISTER MIP/MRMIP
- ☐ 03 HEALTHY KIDS
- ☐ 04 NO OTHER PLAN
- ☐ 91 SOMETHING ELSE (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, 91, goto 'PN\_QA17\_I19'**

OTHER\_CF7

**'POST\_QA17\_I14'** [POST\_CF7] -

**POST-NOTE CF7 :**

**IF CF7 = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1**

**'QA17\_I15'** [CF8] –

Does {he/she} have any health insurance coverage through a plan that I missed?

Naka-insure ba {siya/siya} para sa anumang health insurance sa pamamagitan ng plan na hindi ko nabanggit?

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

**If = 2, -7, -8, goto 'PN\_QA17\_I18'**

**'QA17\_I16' [CF9] –**

What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

Anong uri ng health insurance ang mayroon siya? Nakukuha ba niya ito sa pamamagitan ng Medi-CAL, isang employer o union, o mula sa iba pang pinagkukunan?

**[CIRCLE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

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

**'POST\_QA17\_I16' [POST\_CF9] -**

**POST-NOTE CF9 :**

**IF CF9 = 1, SET CHEMP = 1 AND CHINSURE = 1**

**IF CF9 = 2, SET CHEMP = 1 AND CHINSURE = 1**

**IF CF9 = 3, SET CHDIRECT = 1 AND CHINSURE = 1**

**IF CF9 = 4, SET CHMCARE = 1 AND CHINSURE = 1**

**IF CF9 = 5, SET CHMCAL = 1 AND CHINSURE = 1**

**IF CF9 = 7, SET CHMILIT = 1 AND CHINSURE = 1**

**IF CF9 = 8, SET CHIHS = 1**

**IF CF9 = 10, SET CHHBEX = 1 AND CHINSURE = 1 AND CHDIRECT =1;**

**IF CF9 = 11, SET CHHBEX = 1 AND CHINSURE = 1 AND CHEMP = 1;**

**IF CF9 = 91, SET CHOTHGOV = 1 AND CHINSURE = 1**

**IF CF9 = 92, SET CHOTHER = 1 AND CHINSURE = 1**

**IF CF9 = -7 OR -8, SET CHINSURE = 1**

**'PN\_QA17\_I17' [PN\_CF9VER] -**

**PROGRAMMING NOTE CF9VER :**

**IF CF9 = 4 (CHILD HAS MEDICARE), CONTINUE WITH CF9VER ;**

**ELSE SKIP TO PROGRAMMING NOTE CF1A**

**'QA17\_I17' [CF9VER] –**

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

Upang beripikahin lamang, sinabi ba ninyo na nakakakuha si (CHILD) ng health insurance sa pamamagitan ng Medicare?

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

**'PN\_QA17\_I18' [PN\_CF1A] -  
PROGRAMMING NOTE CF1A :  
IF CHINSURE ≠ 1 CONTINUE WITH CF1A ;  
ELSE GO TO MA3 ;**

**'QA17\_I18' [CF1A] –**

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

Ano ang ISANG pangunahing dahilan kung bakit hindi naka-enroll sa Medi-CAL program si (CHILD)?

- ☐ 01 PAPERWORK TOO DIFFICULT
- ☐ 02 DIDN'T KNOW IF ELIGIBLE
- ☐ 03 INCOME TOO HIGH, NOT ELIGIBLE
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 OTHER NOT ELIGIBLE
- ☐ 06 DON'T BELIEVE IN HEALTH INSURANCE
- ☐ 07 DON'T NEED IT BECAUSE HEALTHY
- ☐ 08 ALREADY HAVE INSURANCE
- ☐ 09 DIDN'T KNOW IT EXISTED
- ☐ 10 DON'T LIKE / WANT WELFARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_CF1A

**'PN\_QA17\_I19' [PN\_MA3] -  
PROGRAMMING NOTE MA3 :  
IF CF10A = 1 AND ARMCARE = 1 AND AH124 = 1, THEN MA3 = AH124 AND MA2 = AH125 AND SKIP  
TO CF14 ;  
ELSE IF CF10A = 1, THEN MA3 = AI22C AND MA2 = AI22A AND CF14 = AI25 AND GO TO PN AI79 ;  
ELSE IF CHINSURE = 1, THEN CONTINUE WITH MA3 ;  
ELSE GO TO PN AI79**

**'QA17\_I19' [MA3] –**

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

Isang HMO, o Health Maintenance Organization, ba ang pangunahing health plan ni (CHILD)?

**[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: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin {niya o niya} ang mga doktor at mga ospital na kaanib sa kanilang network, o pagkakaugnay. Kung lalabas {siya o siya} sa network, sa karaniwan hindi mababayaran ito maliban na lamang kung emergency ito."]**

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

**If = 1, goto 'QA17\_I21'**



**'PN\_QA17\_I20'** [PN\_AI115] -  
**PROGRAMMING NOTE AI115 :**  
**IF CHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO MA2 ;**  
**ELSE CONTINUE WITH AI115 ;**

**'QA17\_I20'** [AI115] –

Is (CHILD)'s health plan a PPO or EPO?

PPO o EPO ba ang health plan ni (CHILD)?

[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: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doktor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doktor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

[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: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doktor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doctor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doktor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

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

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: "Ang kanyang PANGUNAHING health plan."]

- ☐ 01 PPO
- ☐ 02 EPO
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI115

'QA17\_I21' [MA2] –

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

Ano ang pangalan ng pangunahing health plan ni (CHILD)?

**[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: Mayroon bang insurance card si (CHILD) o anumang bagay kung saan nakasulat ang pangalan ng plan?"]**

- ☐ 01 ACCESS SENIOR HEALTHCARE
- ☐ 02 AETNA
- ☐ 03 AETNA GOLDEN MEDICARE
- ☐ 04 AIDS HEALTHCARE FOUNDATION, LA
- ☐ 05 ALAMEDA ALLIANCE FOR HEALTH
- ☐ 83 ALTAMED HEALTH SERVICES
- ☐ 07 ANTHEM BLUE CROSS OF CALIFORNIA
- ☐ 08 ASPIRE HEALTH PLAN
- ☐ 09 BLUE CROSS CALIFORNIACARE
- ☐ 79 BLUE CROSS SENIOR SECURE
- ☐ 11 BLUE SHIELD 65 PLUS
- ☐ 12 BLUE SHIELD OF CALIFORNIA
- ☐ 13 BRAND NEW DAY (UNIVERSAL CARE)
- ☐ 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- ☐ 15 CALIFORNIAKIDS (CALKIDS)
- ☐ 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- ☐ 17 CALVIVA HEALTH
- ☐ 18 CARE 1ST HEALTH PLAN
- ☐ 19 CAREMORE HEALTH PLAN
- ☐ 21 CENTER FOR ELDERS' INDEPENDENCE
- ☐ 80 CEN CAL HEALTH
- ☐ 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- ☐ 23 CENTRAL HEALTH PLAN
- ☐ 24 CHINESE COMMUNITY HEALTH PLAN
- ☐ 25 CHOICE PHYSICIANS NETWORK
- ☐ 26 CIGNA HEALTHCARE
- ☐ 27 CITIZENS CHOICE HEALTHPLAN
- ☐ 28 COMMUNITY CARE HEALTH PLAN
- ☐ 29 COMMUNITY HEALTH GROUP
- ☐ 81 CONTRA COSTA HEALTH PLAN
- ☐ 31 DAVITA HEALTHCARE PARTNERS PLAN
- ☐ 32 EASY CHOICE HEALTH PLAN
- ☐ 33 EPIC HEALTH PLAN
- ☐ 34 GEM CARE HEALTH PLAN
- ☐ 35 GOLD COAST HEALTH PLAN
- ☐ 36 GOLDEN STATE MEDICARE HEALTH PLAN
- ☐ 38 HEALTH NET
- ☐ 39 HEALTH NET SENIORITY PLUS
- ☐ 40 HEALTH PLAN OF SAN JOAQUIN
- ☐ 41 HEALTH PLAN SAN JOE AUTHORITY
- ☐ 42 HERITAGE PROVIDER NETWORK
- ☐ 43 HUMANA GOLD PLUS
- ☐ 44 HUMANA HEALTH PLAN
- ☐ 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- ☐ 46 INTER VALLEY HEALTH PLAN
- ☐ 82 HEALTH ADVANTAGE
- ☐ 47 KAISER PERMANENTE
- ☐ 48 KAISER PERMANENTE SENIOR ADVANTAGE
- ☐ 49 KERN FAMILY HEALTH CARE
- ☐ 50 L.A. CARE HEALTH PLAN
- ☐ 51 MD CARE
- ☐ 54 MOLINA HEALTHCARE OF CALIFORNIA
- ☐ 55 MONARCH HEALTH PLAN
- ☐ 56 ON LOK SENIOR HEALTH SERVICES

- ☐ 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- ☐ 58 PIH HEALTH CARE SOLUTIONS
- ☐ 59 PREMIER HEALTH PLAN SERVICES
- ☐ 60 PRIMECARE MEDICAL NETWORK
- ☐ 61 PROVIDENCE HEALTH NETWORK
- ☐ 68 SCRIPPS HEALTH PLAN SERVICES
- ☐ 69 SEASIDE HEALTH PLAN
- ☐ 84 SAN FRANCISCO HEALTH PLAN
- ☐ 90 SANTA CLARA FAMILY HEALTH PLAN
- ☐ 86 SAN MATEO HEALTH COMMISION
- ☐ 88 SANTA BARBARA
- ☐ 92 SATELLITE HEALTH PLAN
- ☐ 67 SCAN HEALTH PLAN
- ☐ 70 SHARP HEALTH PLAN
- ☐ 71 SUTTER HEALTH PLAN
- ☐ 72 SUTTER SENIOR CARE
- ☐ 73 UNITED HEALTHCARE
- ☐ 74 UNITED HEALTHCARE SECURE HORIZON
- ☐ 75 UNIVERSITY HEALTHCARE ADVANTAGE
- ☐ 76 VALLEY HEALTH PLAN
- ☐ 77 VENTURA COUNTY HEALTH CARE PLAN
- ☐ 78 WESTERN HEALTH ADVANTAGE
- ☐ 93 CHAMPUS/CHAMP-VA
- ☐ 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- ☐ 89 VA HEALTH CARE SERVICES
- ☐ 52 MEDI-CAL
- ☐ 53 MEDICARE
- ☐ 85 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_MA2

**'POST\_QA17\_I21'** [POST\_MA2] - POST\_MA2**POST NOTE MA2 :****IF MA2 = 93, 87, OR 89 THEN SET CHMILIT=1****'QA17\_I22'** [CF14] –

Is (CHILD) covered for prescription drugs?

Naka-insure ba si (CHILD) para sa mga inireresetang gamot?

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

**'PN\_QA17\_I23' [PN\_AI79] -**  
**PROGRAMMING NOTE FOR AI79 :**  
**IF (ARINSURE  $\neq$  1 OR CF10A  $\neq$  1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN**  
**CONTINUE WITH AI79 ;**  
**ELSE SKIP TO PROGRAMMING NOTE CF18**

**'QA17\_I23' [AI79] –**

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

Mayroon bang deductible na higit sa \$1,000 ang health plan ni (CHILD)?

**[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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I24' [AI80] –**

Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$2,000?

Mayroon bang deductible na higit sa \$2,000 para sa lahat ng taong naka-insure ang health plan ni (CHILD)?

**[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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_I25' [PN\_AI81] -**  
**PROGRAMMING NOTE AI81 :**  
**IF (AI79 = 1 OR 3) OR (AI80 = 1 OR 3), CONTINUE WITH AI81 ;**  
**ELSE SKIP TO PROGRAMMING NOTE CF18**

**'QA17\_I25' [AI81] –**

Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?

Mayroon ba kayong tanging account o pondo na maaari ninyong gamiting pambayad sa mga gastos sa pagpapagamot ni (CHILD)?

**[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: Paminsan-minsan, tinatawag ang mga account na Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), o iba pang mga katulad na account. Kabilang sa mga iba pang pangalan ang Personal care accounts, Personal medical funds, o Choice funds, at naiiba sa mga Flexible Spending Account, na ipinagkakaloob ng mga employer."]**

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

**'PN\_QA17\_I26' [PN\_CF18] -**  
**PROGRAMMING NOTE CF18 :**  
**IF CHINSURE = 1, GO TO CF24 ;**  
**ELSE CONTINUE WITH CF18**

**'QA17\_I26' [CF18] –**

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

Ano ang isang pangunahing dahilan kung bakit walang anumang health insurance si (CHILD) ?

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_CF18

**'QA17\_I27' [CF20] –**

Was (CHILD) covered by health insurance at any time during the past 12 months?

May health insurance ba si (CHILD) kailanman nitong nakaraang 12 na buwan?

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

**If = 1, goto 'QA17\_I29'**

**'QA17\_I28' [CF21] –**

How long has it been since (CHILD) last had health insurance?

Gaano katagal na mula noong huling may health insurance si (CHILD)?

- ☐ 01 MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
- ☐ 02 MORE THAN 3 YEARS AGO
- ☐ 03 NEVER HAD HEALTH INSURANCE COVERAGE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, -7, -8, goto 'PN\_QA17\_I37'**

**'QA17\_I29' [CF22] –**

For how many of the last 12 months did {he/she} have health insurance?

Ilang buwan ba { siyang / siyang } may health insurance nitong nakaraang 12 buwan?

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

\_\_\_\_ MONTHS [HR: 0-12]\_

**If = 0, goto 'PN\_QA17\_I37'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I30' [CF23] -**

During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Noong panahon na may health insurance si (CHILD) ang kanyang insurance ba ay MediCAL, isang planong nakuha ninyo mula sa isang employer, isang planong binili ninyo nang direkta mula sa isang insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CIRCLE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If =1, 3, 5, 6, 91, -7, -8, goto 'PN\_QA17\_I37'**

**'QA17\_I31' [CF24] –**

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

Isipin ninyo ang kasalukuyang health insurance (CHILD) ito rin ba ang insurance {niya/niya} para sa KABUUAN ng nakaraang 12 buwan?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 HAD SAME INSURANCE SINCE BIRTH (FOR CHILDREN LESS THAN ONE YEAR OLD)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 3, goto 'PN\_QA17\_I37'**

**'QA17\_I32' [CF25] –**

When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?

Noong hindi {siya/siya} naka-insure sa {kanyang/kanyang} kasalukuyang health insurance, mayroon ba {siyang/siyang} anumang iba pang health insurance?

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

**If = 2, -7, -8, goto 'QA17\_I34'**

**'QA17\_I33' [CF26] –**

Was this other health insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Medi-CAL ba itong iba pang health insurance, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang tuwiran mula sa insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"] [PROBE: "May iba pa ba?"]**

- ☐ 01 MEDI-CAL
- ☐ 04 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I34' [CF27] -**

During the past 12 months, was there any time when {he/she} had no health insurance at all?

Nitong nakaraang 12 buwan, mayroon bang anumang panahon na {siya/siya} aywalang anumang health insurance?

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

**If = 2, -7, -8, goto 'PN\_IA10A'**

**'QA17\_I35'** [CF28] -

For how many of the past 12 months did {he/she} have no health insurance?

Nitong nakaraang 12 buwan, ilang buwan ba {siya/siya} walang health insurance?

**[IF < 1 MONTH, ENTER "1"]**

MONTHS [RANGE: 1-12]  
☐ -7 REFUSED  
☐ -8 DON'T KNOW

**'QA17\_I36'** [CF29] –

What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?

Ano ang ISANG PANGUNAHING dahilan kung bakit walang health insurance si (CHILD) noong panahon na hindi {siya/siya} naka-insure?

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

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'PN\_QA17\_I37'** [PN\_IA10A] -

**PROGRAMMING NOTE IA10A :**

**IF NO TEEN SELECTED, GO TO PN AI56 ;**

**IF ARINSURE = 1, CONTINUE WITH IA10A ;**

**IF ARINSURE ≠ 1, GO TO PN MA5 ;**

**ELSE CONTINUE WITH IA10A**

**'QA17\_I37'** [IA10A] –

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

Ang mga sumusunod na mga tanong ay tungkol sa health insurance na maaaring mayroon si (TEEN).

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

lisa ba ang insurance {ninyo/PANGALAN NG ADULT RESPONDENT} at ni (TEEN)?

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

**If = 1, goto 'QA17\_I56'**

**'POST\_QA17\_I37'** [POST\_IA10A] -

**POST-NOTE IA10A :**

**IF IA10A = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND ARMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AREMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AREMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND AROTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;**

**IF IA10A = 1 AND ARIHS = 1, SET TEIHS = 1**

**IF IA10A = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;**

**'PN\_QA17\_I38' [PN\_MA5] -**  
**PROGRAMMING NOTE MA5 :**  
**IF SPINSURE ≠ 1 THEN SKIP TO MA6 ;**  
**ELSE IF IA10A = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE MA6 ;**  
**ELSE CONTINUE WITH MA5**

**'QA17\_I38' [MA5] –**

Does (TEEN) have the same insurance as your spouse?

lisa ba ang insurance ni (TEEN) at ng inyong {asawa}?

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

**If = 1, goto 'QA17\_I56'**

**'POST\_QA17\_I38' [POST\_MA5] -**  
**POST-NOTE MA5 :**  
**IF MA5 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPEMPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPIHS = 1, SET TEIHS = 1**  
**IF MA5 = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;**  
**IF MA5 = 1 AND SPARPAR = 1, THEN SET TEOTHER = 1 AND SET TEINSURE = 1 AND SPSAMETE = 1**

**'PN\_QA17\_I39' [PN\_MA6] -**

**PROGRAMMING NOTE MA6 :**

**IF TEINSURE  $\neq$  1, THEN SKIP TO IA1 ;**

**ELSE IF (IA10A = 2 AND ARSAMECH = 1) OR (MA5 = 2 AND SPSAMECH = 1), THEN SKIP TO IA1 ;**

**ELSE CONTINUE WITH MA6 ;**

**'QA17\_I39' [MA6] -**

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

lisa ba ang insurance ni (TEEN) at ni (CHILD)?

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

**If = 1, goto 'QA17\_I68'**

**'POST\_QA17\_I39' [POST\_MA6] -**

**POST-NOTE MA6 :**

**IF MA6 = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;**

**IF MA6 = 1 AND CHIHS = 1, SET TEIHS = 1;**

**IF MA6 = 1 AND CHOTHER = 1, SET TEOTHER = 1;**

**IF MA6 = 1 AND CHHBEX = 1, SET TEHBEX = 1**

**'QA17\_I40' [IA1] -**

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

Naka-insure ba {siya/siya} sa kasalukuyan sa Medi-CAL?

**[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: "Ang Medi-CAL ay plan para sa ilang mga bata at pamilya nila na mabababa ang kita, mga babaeng buntis, at mga taong may kapansanan o nakatatanda."]**

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

**'POST\_QA17\_I40' [POST\_IA1] -**

**POST-NOTE IA1 :**

**IF IA1 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1**

'QA17\_I41' [IA3] –

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

Naka-insure ba si (TEEN) sa health insurance plan o sa HMO sa pamamagitan ng trabaho o union ninyo o ng ibang tao?

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

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

If = 2, -7, -8, goto 'QA17\_I43'

'POST\_QA17\_I41' [POST\_IA3] -

**POST-NOTE IA3 :**

**IF IA3 = 1, SET TEEMP = 1 AND SET TEINSURE = 1**

'QA17\_I42' [AI94] –

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

Nakuha ba itong plan sa pamamagitan ng isang employer, ng union, o ng SHOP program ng Covered California?

**[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California"] [IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]**

- ☐ 01 EMPLOYER
- ☐ 02 UNION
- ☐ 03 SHOP / COVERED CALIFORNIA
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI94

'POST\_QA17\_I42' [POST\_AI94] -

**POST-NOTE FOR AI94 :**

**IF AI94 = 3, THEN SET TEHBEX = 1**

**'PN\_QA17\_I43'** [PN\_IA4] -  
**PROGRAMMING NOTE IA4 :**  
**IF TEINSURE = 1 THEN GO TO AI95 ;**  
**ELSE CONTINUE WITH IA4**

**'QA17\_I43'** [IA4] –

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

Naka-insure ba si (TEEN) sa health insurance plan na binili ninyo nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

**[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: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital kayo."]**

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

**If = 2, -7, -8, goto 'QA17\_I50'**

**'POST\_QA17\_I43'** [POST\_IA4] -  
**POST-NOTE IA4 :**  
**IF IA4 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1**

**'PN\_QA17\_I44'** [PN\_AI95] -  
**PROGRAMMING NOTE AI95 :**  
**IF TEDIRECT = 1, THEN CONTINUE WITH AI95 ;**  
**ELSE GO TO PROGRAMMING NOTE AI96**

**'QA17\_I44'** [AI95] –

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

Paano ninyo binili itong health insurance - direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

- ☐ 01 INSURANCE COMPANY OR HMO
- ☐ 02 COVERED CALIFORNIA
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_AI95

**'POST\_QA17\_I44'** [POST\_AI95] -  
**POST-NOTE FOR AI95 :**  
**IF AI95 = 2, THEN SET TEHBEX = 1**

**'PN\_QA17\_I45' [PN\_AI96] -**  
**PROGRAMMING NOTE AI96**  
**IF TEHBEX = 1, THEN CONTINUE WITH AI96 ;**  
**ELSE GO TO PROGRAMMING NOTE AI55 ;**

**'QA17\_I45' [AI96] –**

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

Bronze, silver, gold o platinum plan ba ito?

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

OTHER\_AI96

**'PN\_QA17\_I46' [PN\_AI97] -**  
**PROGRAMMING NOTE AI97**  
**IF AI94 = 3, THEN GO TO PN AI55 ;**  
**ELSE CONTINUE WITH AI97 ;**

**'QA17\_I46' [AI97] –**

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

Mayroon bang subsidy (pananalaping tulong) para sa o diskwento sa premium (buwanang bayad) para sa plan na ito?

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

**'PN\_QA17\_I47' [PN\_AI55] -**  
**PROGRAMMING NOTE AI55 :**  
**IF TEEMP = 1 (EMPLOYER-BASED COVERAGE) OR TEDIRECT = 1 (PURCHASED OWN COVERAGE),**  
**CONTINUE WITH AI55 ;**  
**ELSE GO TO PROGRAMMING NOTE IA6**

**'QA17\_I47' [AI55] –**

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.

Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan ni (TEEN)? Huwag bilangin ang gastos para sa anumang mga co-pay o deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage.]**

**[IF NEEDED, SAY: "Ang mga co-pay ay ang inyong mga kabahaging bayad para sa pangangalagang pangkalusugan tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang may ibang nagbabayad para sa inyong pangunahing health care coverage.]**

**[IF NEEDED, SAY: "A deductible is the amount you pay for medical care before your health plan starts paying."]** **[IF NEEDED, SAY: "Ang deductible ang halagang binabayaran ninyo para sa pagpapagamot bago magsimulang magbayad ang inyong health plan.']**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY: "Ang premium ang singil buwan-buwan para sa bayad sa inyong health insurance plan."]**

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

**'QA17\_I48' [AI52] –**

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?

Mayroon bang iba pa, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos sa health plan ni (TEEN)?

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

**If = 2, -7, -8, goto 'PN\_QA17\_I50'**

**'QA17\_I49'** [AI53] –

Who else pays all or some portion of the cost for (TEEN)'s health plan?

Sino pang iba ang nagbabayad ng lahat o ng bahagi ng gastos sa health plan ni (TEEN)?

**[CODE ALL THAT APPLY.]**

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

**'POST\_QA17\_I49'** [POST\_AI53] -

**POST-NOTE AI53 :**

**IF AI53 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;**

**IF AI53 = 7, SET TEMCAL = 1;**

**IF AI53 = 10, SET TEHBEX =1;**

**'PN\_QA17\_I50'** [PN\_IA6] -

**PROGRAMMING NOTE IA6 :**

**IF TEINSURE = 1, GO TO PROGRAMMING NOTE IA1A ;**

**ELSE CONTINUE WITH IA6**

**'QA17\_I50'** [IA6] –

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

Naka-insure ba {siya/siya} sa CHAMPUS/CHAMP-VA, TRICARE, VA o sa iba pang pangangalagang pangkalusugan ng militar?

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

**If = 1, goto 'PN\_QA17\_I56'**

**'POST\_QA17\_I50'** [POST\_IA6] -

**POST-NOTE IA6 :**

**IF IA6 = 1, SET TEMILIT = 1 AND SET TEINSURE = 1**



**‘QA17\_I51’ [IA7] –**

Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, Healthy Kids or something else?

Naka-insure ba {siya/siya} sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," Family PACT, Healthy Kids, o ng iba pa?

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

**[IF NEEDED, SAY: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program; ang Family PACT ang programa ng estado na nagbabayad para sa serbisyong pangkalusugang para sa pagpipigil sa pagbubuntis/pag- anak para sa mga hindi naka-insure na mga babae't lalake na mabababa ang kita.]**

- ☐ 01 AIM
- ☐ 02 MISTER MIP/MRMIP
- ☐ 03 Family PACT
- ☐ 04 HEALTHY KIDS
- ☐ 05 NO OTHER PLAN
- ☐ 91 SOMETHING ELSE (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, 4, 91, goto ‘PN\_QA17\_I56’**

OTHER\_IA7

**‘POST\_QA17\_I51’ [POST\_IA7] -**

**POST-NOTE IA7 :**

**IF IA7 = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1**

**‘QA17\_I52’ [IA8] –**

Does {he/she} have any health insurance coverage through a plan that I missed?

Naka-insure ba {siya/siya} sa anumang health insurance sa pamamagitan ng plan na hindi ko nabanggit?

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

**If = 2, -7, -8, goto ‘PN\_QA17\_I56’**

**'QA17\_I53' [IA9] –**

What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

Anong uri ng health insurance ang mayroon siya? Nakuha ba ito sa pamamagitan ng MediCAL, isang employer o union, o mula sa iba pang pinagkukunan?

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

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakukuha ba ninyo ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng eskwelahan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o direkta mula sa health plan?"]**

**[CIRCLE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa?"]**

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

**'POST\_QA17\_I53' [POST\_IA9] -**

**POST-NOTE IA9 :**

**IF IA9 = 1, SET TEEMP = 1 AND TEINSURE = 1;**

**IF IA9 = 2, SET TEEMP = 1 AND TEINSURE = 1;**

**IF IA9 = 3, SET TEDIRECT = 1 AND TEINSURE = 1;**

**IF IA9 = 4, SET TEMCARE = 1 AND TEINSURE = 1;**

**IF IA9 = 5, SET TEMCAL = 1 AND TEINSURE = 1;**

**IF IA9 = 7, SET TEMILIT = 1 AND TEINSURE = 1;**

**IF IA9 = 8, SET TEIHS = 1;**

**IF IA9 = 10, SET TEHBEX = 1 AND TEINSURE = 1 AND TEDIRECT = 1;**

**IF IA9 = 11, SET TEHBEX = 1 AND TEINSURE = 1 AND TEEMP = 1;**

**IF IA9 = 91, SET TEOTHGOV = 1 AND TEINSURE = 1;**

**IF IA9 = 92, SET TEOTHER = 1 AND TEINSURE = 1;**

**IF IA9 = -7 OR -8, SET TEINSURE = 1**

**'PN\_QA17\_I54' [PN\_IA9VER] -**

**PROGRAMMING NOTE IA9VER :**

**IF IA9 = 4 (TEEN HAS MEDICARE), CONTINUE WITH IA9VER ;  
ELSE SKIP TO PROGRAMMING NOTE IA1A**

**'QA17\_I54' [IA9VER] –**

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

Upang beripikahin lamang, sinabi ba ninyo na nakakakuha si (TEEN) ng health insurance sa pamamagitan ng Medicare?

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

**'PN\_QA17\_I55' [PN\_IA1A] -**

**PROGRAMMING NOTE IA1A :**

**IF TEINSURE ≠ 1 CONTINUE WITH IA1A ;  
ELSE GO TO MA8 ;**

**'QA17\_I55' [IA1A] –**

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

Ano ang ISANG pangunahing dahilan kung bakit hindi naka-enroll sa Medi-CAL program si (TEEN)?

- ☐ 01 PAPERWORK TOO DIFFICULT
- ☐ 02 DIDN'T KNOW IF ELIGIBLE
- ☐ 03 INCOME TOO HIGH, NOT ELIGIBLE
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 OTHER NOT ELIGIBLE
- ☐ 06 DON'T BELIEVE IN HEALTH INSURANCE
- ☐ 07 DON'T NEED IT BECAUSE HEALTHY
- ☐ 08 ALREADY HAVE INSURANCE
- ☐ 09 DIDN'T KNOW IT EXISTED
- ☐ 10 DON'T LIKE / WANT WELFARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_IA1A

**'PN\_QA17\_I56' [PN\_MA8] -**  
**PROGRAMMING NOTE MA8 :**  
**IF IA10A = 1 AND ARMCARE = 1 AND AH124 = 1, THEN MA8 = AH124 AND MA7 = AH125 AND SKIP TO IA14 ;**  
**ELSE IF IA10A = 1, THEN MA8 = AI22C AND MA7 = AI22A AND IA14 = AI25 AND GO TO PN AI82 ;**  
**ELSE IF MA6 = 1, THEN MA8 = MA3 AND MA7 = MA2 AND IA14 = CF14 AND GO TO PN AI82 ;**  
**ELSE IF TEINSURE = 1, THEN CONTINUE WITH MA8 ;**  
**ELSE GO TO PROGRAMMING NOTE AI82**

**'QA17\_I56' [MA8] –**

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

HMO, o Health Maintenance Organization, ba ang pangunahing health plan ni (TEEN)?

[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: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin {niya o niya} ang mga doktor at mga ospital na kaanib sa kanilang network, o pagkakaugnay. Kung lalabas {siya o siya} sa network, sa karaniwan hindi mababayaran ito maliban na lamang kung emergency ito."]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her} MAIN health plan."]

[NOTE: IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "ang PANGUNAHING health plan {niya o niya}."]

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

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

If = 1, goto 'QA17\_I58'

**'PN\_QA17\_I57' [PN\_AI116] -**  
**PROGRAMMING NOTE AI116 :**  
**IF TEMCAL = 1 (TEEN HAS MEDI-CAL), GO TO MA7 ;**  
**ELSE CONTINUE WITH AI116 ;**

**'QA17\_I57'** [A1116] –

Is (TEEN)'s health plan a PPO or EPO?

PPO o EPO ba ang health plan ni (TEEN)?

**[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: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doktor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doktor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**

**[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: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doktor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doktor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doktor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**

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

**[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: "Ang kanyang PANGUNAHING health plan."]**

- ☐ 01 PPO
- ☐ 02 EPO
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_I58' [MA7] –

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

Ano ang pangalan ng pangunahing health plan ni {TEEN}?

**[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: Mayroon bang insurance card si (TEEN) o anumang bagay kung saan nakasulat ang pangalan ng plan?"]**

- ☐ 01 ACCESS SENIOR HEALTHCARE
- ☐ 02 AETNA
- ☐ 03 AETNA GOLDEN MEDICARE
- ☐ 04 AIDS HEALTHCARE FOUNDATION, LA
- ☐ 05 ALAMEDA ALLIANCE FOR HEALTH
- ☐ 83 ALTAMED HEALTH SERVICES
- ☐ 07 ANTHEM BLUE CROSS OF CALIFORNIA
- ☐ 08 ASPIRE HEALTH PLAN
- ☐ 09 BLUE CROSS CALIFORNIACARE
- ☐ 79 BLUE CROSS SENIOR SECURE
- ☐ 11 BLUE SHIELD 65 PLUS
- ☐ 12 BLUE SHIELD OF CALIFORNIA
- ☐ 13 BRAND NEW DAY (UNIVERSAL CARE)
- ☐ 14 CALIFORNIA HEALTH AND WELLNESS PLAN
- ☐ 15 CALIFORNIAKIDS (CALKIDS)
- ☐ 16 CAL OPTIMA (CALOPTIMA ONE CARE)
- ☐ 17 CALVIVA HEALTH
- ☐ 18 CARE 1ST HEALTH PLAN
- ☐ 19 CAREMORE HEALTH PLAN
- ☐ 21 CENTER FOR ELDERS' INDEPENDENCE
- ☐ 80 CEN CAL HEALTH
- ☐ 22 CENTRAL CALIFORNIA ALLIANCE FOR HEALTH
- ☐ 23 CENTRAL HEALTH PLAN
- ☐ 24 CHINESE COMMUNITY HEALTH PLAN
- ☐ 25 CHOICE PHYSICIANS NETWORK
- ☐ 26 CIGNA HEALTHCARE
- ☐ 27 CITIZENS CHOICE HEALTHPLAN
- ☐ 28 COMMUNITY CARE HEALTH PLAN
- ☐ 29 COMMUNITY HEALTH GROUP
- ☐ 81 CONTRA COSTA HEALTH PLAN
- ☐ 31 DAVITA HEALTHCARE PARTNERS PLAN
- ☐ 32 EASY CHOICE HEALTH PLAN
- ☐ 33 EPIC HEALTH PLAN
- ☐ 34 GEM CARE HEALTH PLAN
- ☐ 35 GOLD COAST HEALTH PLAN
- ☐ 36 GOLDEN STATE MEDICARE HEALTH PLAN
- ☐ 38 HEALTH NET
- ☐ 39 HEALTH NET SENIORITY PLUS
- ☐ 40 HEALTH PLAN OF SAN JOAQUIN
- ☐ 41 HEALTH PLAN SAN JOE AUTHORITY
- ☐ 42 HERITAGE PROVIDER NETWORK
- ☐ 43 HUMANA GOLD PLUS
- ☐ 44 HUMANA HEALTH PLAN
- ☐ 45 IEHP (INLAND EMPIRE HEALTH PLAN)
- ☐ 46 INTER VALLEY HEALTH PLAN
- ☐ 82 HEALTH ADVANTAGE
- ☐ 47 KAISER PERMANENTE
- ☐ 48 KAISER PERMANENTE SENIOR ADVANTAGE
- ☐ 49 KERN FAMILY HEALTH CARE
- ☐ 50 L.A. CARE HEALTH PLAN
- ☐ 51 MD CARE
- ☐ 54 MOLINA HEALTHCARE OF CALIFORNIA
- ☐ 55 MONARCH HEALTH PLAN
- ☐ 56 ON LOK SENIOR HEALTH SERVICES

- ☐ 57 PARTNERSHIP HEALTHPLAN OF CALIFORNIA
- ☐ 58 PIH HEALTH CARE SOLUTIONS
- ☐ 59 PREMIER HEALTH PLAN SERVICES
- ☐ 60 PRIMECARE MEDICAL NETWORK
- ☐ 61 PROVIDENCE HEALTH NETWORK
- ☐ 68 SCRIPPS HEALTH PLAN SERVICES
- ☐ 69 SEASIDE HEALTH PLAN
- ☐ 84 SAN FRANCISCO HEALTH PLAN
- ☐ 90 SANTA CLARA FAMILY HEALTH PLAN
- ☐ 86 SAN MATEO HEALTH COMMISION
- ☐ 88 SANTA BARBARA
- ☐ 92 SATELLITE HEALTH PLAN
- ☐ 67 SCAN HEALTH PLAN
- ☐ 70 SHARP HEALTH PLAN
- ☐ 71 SUTTER HEALTH PLAN
- ☐ 72 SUTTER SENIOR CARE
- ☐ 73 UNITED HEALTHCARE
- ☐ 74 UNITED HEALTHCARE SECURE HORIZON
- ☐ 75 UNIVERSITY HEALTHCARE ADVANTAGE
- ☐ 76 VALLEY HEALTH PLAN
- ☐ 77 VENTURA COUNTY HEALTH CARE PLAN
- ☐ 78 WESTERN HEALTH ADVANTAGE
- ☐ 93 CHAMPUS/CHAMP-VA
- ☐ 87 TRICARE/TRICARE FOR LIFE/TRICARE PRIME
- ☐ 89 VA HEALTH CARE SERVICES
- ☐ 52 MEDI-CAL
- ☐ 53 MEDICARE
- ☐ 85 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_MA7

**'POST\_QA17\_I58'** [POST\_MA7] - POST\_MA7

**POST NOTE MA7 :**

**IF MA7 = 93, 87, OR 89 THEN SET TEMILIT=1**

**'QA17\_I59'** [IA14] –

Is (TEEN) covered for prescription drugs?

Naka-insure ba si (TEEN) para sa inireresetang mga gamot?

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

**'PN\_QA17\_I60'** [PN\_AI82] -**PROGRAMMING NOTE FOR AI82 :****IF [(ARINSURE ≠ 1 OR IA10A ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN CONTINUE WITH AI82 ;  
ELSE SKIP TO PN IA18****'QA17\_I60'** [AI82] –

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

Mayroon bang deductible na higit sa \$1,000 ang health plan ni (TEEN)?

**[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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I61'** [AI83] –

Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$2,000?

Mayroon bang deductible na higit sa \$2,000 para sa lahat ng taong naka-insure ang health plan ni (TEEN)?

**[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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 YES, ONLY WHEN GO OUT OF NETWORK
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'PN\_QA17\_I62' [PN\_AI84] -**  
**PROGRAMMING NOTE AI84 :**  
**IF (AI82 = 1 OR 3) OR (AI83 = 1 OR 3), CONTINUE WITH AI84 ;**  
**ELSE SKIP TO PROGRAMMING NOTE IA18**

**'QA17\_I62' [AI84] –**

Do you have a special account or fund you can use to pay for (TEEN)'s medical expenses?

Mayroon ba kayong tanging account o pondo na maaari ninyong gamiting pambayad sa mga gastos sa pagpapagamot ni (TEEN)?

**[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: Paminsan-minsan, tinatawag ang mga account na Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), o iba pang mga katulad na account. Kabilang sa mga iba pang pangalan ang Personal care accounts, Personal medical funds, o Choice funds, at naiiba sa mga Flexible Spending Account, na ipinagkakaloob ng mga employer."]**

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

**'PN\_QA17\_I63' [PN\_IA18] -**  
**PROGRAMMING NOTE IA18 :**  
**IF TEINSURE = 1, GO TO IA24 ;**  
**ELSE CONTINUE WITH IA18**

**'QA17\_I63' [IA18] –**

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

Ano ang isang pangunahing dahilan na walang anumang health insurance si (TEEN)?

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_IA18

**'QA17\_I64' [IA20] –**

Was (TEEN) covered by health insurance at any time during the past 12 months?

May health insurance ba si (TEEN) sa anumang panahon nitong nakaraang 12 buwan?

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

If = 1, goto 'QA17\_I66'

**'QA17\_I65' [IA21] –**

How long has it been since (TEEN) last had health insurance?

Gaano katagal na mula noong huling may health insurance si (TEEN)?

- ☐ 01 MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO
- ☐ 02 MORE THAN 3 YEARS AGO
- ☐ 03 NEVER HAD HEALTH INSURANCE COVERAGE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, -7, -8, goto 'PN\_QA17\_I74'**

**'QA17\_I66' [IA22] –**

For how many of the last 12 months did {he/she} have health insurance?

Ilang buwan nitong nakaraang 12 buwan ba {siya/siya} may health insurance?

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

\_\_\_\_\_ MONTHS [HR: 0-12]

**If = 0 , goto 'PN\_QA17\_I74'**

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I67' [IA23] –**

During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Noong panahon na may health insurance si (TEEN), ang insurance ba niya ay Medi-CAL, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang direkta mula sa insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CODE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

- ☐ 01 MEDI-CAL
- ☐ 03 THROUGH CURRENT OR FORMER EMPLOYER UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 3, 5, 6, 91, -7, -8, goto 'PN\_QA17\_I74'**

**'QA17\_I68'** [IA24] –

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

Isipin ninyo ang kanyang kasalukuyang health insurance. Ito rin ba mismo ang insurance ni (TEEN) para sa KABUUAN ng nakaraang 12 buwan?

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

**If = 1, goto 'PN\_QA17\_I74'**

**'QA17\_I69'** [IA25] -

When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?

Noong hindi {siya/siya} naka-insure sa {kanyang/kanyang} kasalukuyang health insurance, mayroon ba {siyang/siyang} anumang iba pang health insurance?

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

**If = 2, -7, -8, goto 'QA17\_I71'**

**'QA17\_I70'** [IA26] –

Was this other health insurance Medi-Cal, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

Medi-Cal ba ang iba pang insurance ninyo, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang direkta mula sa insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

Medi-Cal ba ang iba pang insurance ninyo, isang plan na nakuha ninyo mula sa isang employer, isang plan na binili ninyo nang direkta mula sa insurance company, isang plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

**[CODE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

- ☐ 01 MEDI-CAL
- ☐ 04 THROUGH CURRENT OR FORMER EMPLOYER/UNION
- ☐ 05 PURCHASED DIRECTLY
- ☐ 06 COVERED CALIFORNIA
- ☐ 91 OTHER HEALTH PLAN
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I71' [IA27] –**

During the past 12 months, was there any time when {he/she} had no health insurance at all?

Nitong nakaraang 12 buwan, mayroon bang panahon na wala {siyang} anumang health insurance?

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

**If = 2, -7, -8, goto 'PN\_QA17\_I74'**

**'QA17\_I72' [IA28] –**

For how many of the past 12 months did {he/she} have no health insurance?

Nitong nakaraang buwan, ilang buwan ba siya walang health insurance?

**[IF < 1 MONTH, ENTER "1"]**

\_\_\_\_\_ MONTHS [RANGE: 1-12]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_I73' [IA29] –**

What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?

Ano ang isang pangunahing dahilan kung bakit walang health insurance si (TEEN) noong panahon na hindi {siya/siya} naka-insure?

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

- ☐ 01 CAN'T AFFORD/TOO EXPENSIVE
- ☐ 02 NOT ELIGIBLE DUE TO WORKING STATUS/ CHANGED EMPLOYER/LOST JOB
- ☐ 03 NOT ELIGIBLE DUE TO HEALTH OR OTHER PROBLEMS
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/IMMIGRATION STATUS
- ☐ 05 FAMILY SITUATION CHANGED
- ☐ 06 DON'T BELIEVE IN INSURANCE
- ☐ 07 SWITCHED INSURANCE COMPANIES, DELAY BETWEEN
- ☐ 08 CAN GET HEALTH CARE FOR FREE/PAY FOR OWN CARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

OTHER\_IA29

**'PN\_QA17\_I74' [PN\_AI56] -**

**PROGRAMMING NOTE AI56 :**

**IF NO TEEN SELECTED, GO TO SECTION J;**

**IF AA3 = 1 (R IS MALE), DISPLAY "mother";**

**IF AA3 = 2 (R IS FEMALE), DISPLAY "father";**

**IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex =1 DISPLAY "father" OR If SC11A =2 DISPLAY "mother"**

**ELSE IF DISPLAY "other parent"**

**'QA17\_I74' [AI56] –**

In what country was (TEEN)'s {mother/father} born?

Saang bansa ipinanganak ang nanay ni {TEEN}?

**[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

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

**'PN\_QA17\_I75' [PN\_AI57] -**  
**PROGRAMMING NOTE AI57 :**  
**IF AI56 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), SKIP TO SECTION J;**  
**ELSE CONTINUE WITH AI57 ;**  
**IF AA3 = 1 (R IS MALE), DISPLAY "mother";**  
**IF AA3 = 2 (R IS FEMALE), DISPLAY "father"**  
**IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex =1 DISPLAY "father" OR If SC11A =2 DISPLAY "mother"**  
**ELSE IF DISPLAY "other parent"**

**'QA17\_I75' [AI57] –**

Does (TEEN)'s {mother/father} now live in the U.S.?

Nakatira ba ngayon sa U.S. ang nanay ni {TEEN}?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 MOTHER/FATHER DECEASED
- ☐ 04 MOTHER/FATHER NEVER LIVED IN US
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_I76' [PN\_AI58] -**  
**PROGRAMMING NOTE AI58 :**  
**IF AA3 = 1 (R IS MALE), DISPLAY "mother";**  
**IF AA3 = 2 (R IS FEMALE), DISPLAY "father";**  
**IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex =1 DISPLAY "father" OR If SC11A =2 DISPLAY "mother"**  
**ELSE IF DISPLAY "other parent"**  
**IF AI57 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";**  
**ELSE DISPLAY "Is"**

**'QA17\_I76' [AI58] –**

{Is/Was} (TEEN)'s {mother/father} a citizen of the United States?

Citizen ba ng United States ang nanay ni {TEEN}?

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

'PN\_QA17\_I77' [PN\_AI59] -

**PROGRAMMING NOTE AI59 :**

IF AI58 =1 SKIP TO PN\_AI60  
 IF AA3 = 1 (R IS MALE), DISPLAY "mother";  
 IF AA3 = 2 (R IS FEMALE), DISPLAY "father";  
 IF AA3 = 3 (REFUSED/DON'T KNOW) AND SC11A Sex =1 DISPLAY "father" OR If SC11A =2 DISPLAY "mother"  
 ELSE IF DISPLAY "other parent"  
 IF AI57 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";  
 ELSE DISPLAY "Is"

'QA17\_I77' [AI59] –

{Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?

Permanent resident na may green card ba ang nanay ni {TEEN}?

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

[IF NEEDED, SAY: Karaniwang tinatawag ito na "Green Card" ngunit maaari ding rosas, asul o puti ang kulay nito."]

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

'PN\_QA17\_I78' [PN\_AI60] -

**PROGRAMMING NOTE AI60 :**

IF AA3 = 1 (R IS MALE), DISPLAY "mother";  
 IF AA3 = 2 (R IS FEMALE), DISPLAY "father"

'QA17\_I78' [AI60] –

About how many years has (TEEN)'s {mother/father} lived in the United States?

Humigit-kumulang, ilang taon nang nakatira sa United States ang {nanay/tatay} ni (TEEN)?

NUMBER OF YEARS

YEAR FIRST CAME AND LIVE IN U.S.

OTHER\_AI60

- ☐ 01 NUMBER OF YEARS
- ☐ 02 YEAR FIRST CAME TO LIVE IN US
- ☐ 03 MOTHER/FATHER DECEASED
- ☐ 04 MOTHER/FATHER NEVER LIVED IN US
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section J: Health Care Utilization and Access

**'PN\_QA17\_J1' [PN\_AH5] -**

**PROGRAMMING NOTE AH5 :**

**IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY "Now, I'd like to ask about the health care YOU receive";**

**ELSE BEGIN QUESTION WITH "During the past 12 months, how many times have you seen a medical doctor"**

**'QA17\_J1' [AH5] –**

{Now, I'd like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor?

{Ngayon, gusto kong magtanong tungkol sa pangangalagang pangkalusugan na tinatanggap ninyo.} Nitong nakaraang 12 buwan, ilang beses na kayong nagpatingin sa medical doctor?

\_\_\_\_\_ TIMES [HR: 0-365]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J2' [PN\_AH6] -**

**PROGRAMMING NOTE AH6 :**

**IF AH5 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH AH6 ; ELSE GO TO PROGRAMMING NOTE AJ114**

**'QA17\_J2' [AH6] –**

About how long has it been since you last saw a doctor about your own health?

Humigit-kumulang, gaano katagal na mula noong huling nagpatingin kayo sa medical doctor tungkol sa inyong kalusugan?

- ☐ 00 ONE YEAR AGO OR LESS
- ☐ 01 MORE THAN 1 UP TO 2 YEARS AGO
- ☐ 02 MORE THAN 2 UP TO 5 YEARS AGO
- ☐ 03 MORE THAN 5 YEARS AGO
- ☐ 04 NEVER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'PN\_QA17\_J3' [PN\_AJ114] -  
PROGRAMMING NOTE AJ114 :  
IF AH6 = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO PROGRAMMING NOTE AJ77 ;  
ELSE CONTINUE WITH AJ114**

**'QA17\_J3' [AJ114] –**

About how long has it been since you last saw a doctor or medical provider for a routine check-up?

Humigit-kumulang, gaano katagal na mula noong huling nagpatingin kayo sa doktor o iba pang medical provider para sa isang routine r na check-up?

**[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: "Ang rutinang check-up ay hindi para sa sakit o karamdaman. Maaaring pag-usapan sa dalaw na ito ang mga tanong tungkol sa mga gawaing pangkalusugan gaya ng paninigarilyo.]**

- ☐ 00 ONE YEAR AGO OR LESS
- ☐ 01 MORE THAN 1 UP TO 2 YEARS AGO
- ☐ 02 MORE THAN 2 UP TO 5 YEARS AGO
- ☐ 03 MORE THAN 5 YEARS AGO
- ☐ 04 NEVER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J4' [PN\_AJ77] -  
PROGRAMMING NOTE AJ77 :  
IF AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH AJ77 ;  
ELSE GO TO PROGRAMMING NOTE AJ102**

**'QA17\_J4' [AJ77] –**

Do you have a personal doctor or medical provider who is your main provider?

Mayroon ba kayong personal doctor o medical provider na siyang main provider ninyo?

**[IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider."]** **[IF NEEDED, SAY: Maaaring general doctor ito, espesyalistang doktor, physician assistant, nurse, o iba pang health provider."]**

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

**'PN\_QA17\_J5'** [PN\_AJ102] - PN\_AJ102

**PROGRAMMING NOTE AJ102:**

**IF ARINSURE =1 OR AH1 = 1,3,4, OR 5 (HAS USUAL SOURCE OF CARE), THEN CONTINUE WITH AJ102**

**ELSE GO TO PROGRAMMING NOTE AJ80**

**IF AJ77 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY "your";**

**ELSE DISPLAY "a";**

**'QA17\_J5'** [AJ102] –

In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?

Nitong nakaraang 12 buwan, sinubukan ba ninyong makipag-appointment upang magpatingin sa inyong doctor o medical provider sa loob ng dalawang araw dahil nagkasakit o nasaktan kayo?

**[IF NEEDED, SAY: Do not include urgent care or emergency care visits. I am only asking about appointments.] [IF NEEDED, SAY: "Huwag bilangin ang pagpapatingin sa urgent care, o pagpapagamot sa emergency. Tungkol sa mga appointment lamang ang tanong ko."]**

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

**IF = 2, -7, -8 go to 'PN\_QA17\_J7'**

**'QA17\_J6'** [AJ103] –

How often were you able to get an appointment within two days? Would you say...

Gaano kadalas kayo nakakuha ng appointment sa loob ng dalawang araw? Masasabi ba ninyo na...

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

**'PN\_QA17\_J7'** [PN\_AJ80] -

**PROGRAMMING NOTE AJ80:**

**IF AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND AJ77 = 1 (HAS A PERSONAL DOCTOR/MEDICAL PROVIDER) AND [(AB40 = 1 OR AB41 = 1 (HAS ASTHMA)) OR AB22 = 1 (HAS DIABETES) OR AB34 = 1 (HAS HEART DISEASE)], THEN CONTINUE WITH AJ80; ELSE GO TO AJ152**

**'QA17\_J7'** [AJ80] –

Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors or services such as tests or treatments?

Mayroon bang sinuman sa opisina o clinic ng inyong doktor na tumutulong na isaayos ang pangangalaga sa inyo sa iba pang mga doktor o mga serbisyo, gaya ng mga test o mga paggagamot?

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

**'QA17\_J8' [AJ152] –**

During the past 12 months, did you receive care from a doctor or health professional through a video or telephone conversation rather than an office visit?

Nitong nakaraan 12 buwan, tumanggap ba kayo ng pangangalaga mula sa isang doktor o health professional sa pamamagitan ng isang salitaan na video o sa telepono sa halip ng isang dalaw sa kanyang opisina? IF NEEDED, SAY: Huwag bilangin ang mga tawag tungkol sa mga appointment o mga prescription refills. Huawag bilangin ang mga tawag sa isang nurse helpline.

**[IF NEEDED, SAY: “Do not include calls about appointments or prescription refills. Do not include calls made to a nurse helpline.”]**

**[IF NEEDED, SAY: “Huwag bilangin ang mga tawag tungkol sa mga appointment o mga prescription refills. Huawag bilangin ang mga tawag sa isang nurse helpline.”]**

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

**If = 2, -7, -8, goto 'PN\_QA17\_J10'**

**'QA17\_J9' [AJ153] –**

Was this care for a skin or eye problem, an emotional or mental health problem, or some other health problem?

Itong pagpapagamot ba ay para sa isang problema sa balat o mata, isang problema sa emosyon o kalusugan ng kaisipan, o iba pang problema sa kalusugan?

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

**[PROBE: “May iba pa ba?”]**

- ☐ 01 SKIN PROBLEM
- ☐ 02 EYE PROBLEM
- ☐ 03 MENTAL OR EMOTIONAL HEALTH PROBLEM
- ☐ 91 OTHER HEALTH PROBLEM (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J10' [PN\_AJ8B] -**

**PROGRAMMING NOTE AJ8 :**

**IF AH5 > 0 OR AH6 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO), CONTINUE WITH AJ8 ;**

**ELSE GO TO PROGRAMMING NOTE AJ105**

**'QA17\_J10' [AJ8B] –**

The last time you saw a doctor, did you have a hard time understanding the doctor?

Noong huli kayong nagpatingin sa doktor, nahirapan ba kayong intindihin ang doktor?

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

**If = 1, goto 'QA17\_J12'**

**If = -7, -8, goto 'PN\_QA17\_J15'**

'PN\_QA17\_J11' [PN\_AJ50] -

**PROGRAMMING NOTE AJ50 :**

**IF AJ8B = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT CONDUCTED IN ENGLISH OR AH36 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)], CONTINUE WITH AJ50 ;**

**SET AJ50ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME AJ50 WAS ASKED;  
ELSE SKIP TO PROGRAMMING NOTE AJ105**

'QA17\_J11' [AJ50] -

In what language did the doctor speak to you?

Sa anong wika kayo kinausap ng doktor?

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

**If = 1, goto 'QA17\_J13'**

**If = 2, 3, 4, 5, 6, 7, 8, 9, 91, -7, -8, goto 'PN\_QA17\_J15'**

OTHER\_AJ50

'QA17\_J12' [AJ9] -

Was this because you and the doctor spoke different languages?

Ito ba ay dahil kayo at ang doctor ninyo ay nagsasalita ng magkaibang wika?

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

'QA17\_J13' [AJ10] -

Did you need someone to help you understand the doctor?

Nangailangan ba kayo ng ibang tao upang maintindihan ninyo ang doctor?

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

**If = 2, -7, -8, goto 'PN\_QA17\_J15'**

**'QA17\_J14'** [AJ11] –

Who was this person who helped you understand the doctor?

Sino ang tumulong sa inyo na maintindihan ang doktor?

**[IF R RESPONDS "MY CHILD," PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS "ADULT FAMILY MEMBER".]**

- ☐ 01 MINOR CHILD (UNDER AGE 18)
- ☐ 02 AN ADULT FAMILY MEMBER OR FRIEND OF MINE
- ☐ 03 NON-MEDICAL OFFICE STAFF
- ☐ 04 MEDICAL STAFF INCLUDING NURSES/DOCTORS
- ☐ 05 PROFESSIONAL INTERPRETER (BOTH IN PERSON AND ON THE TELEPHONE)
- ☐ 06 OTHER (PATIENTS, SOMEONE ELSE)
- ☐ 07 DID NOT HAVE SOMEONE TO HELP
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J15'** [PN\_AJ105] -

**PROGRAMMING NOTE AJ105 :**

**IF AH37 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH AJ105 ;  
ELSE GO TO PROGRAMMING NOTE AJ106**

**'QA17\_J15'** [AJ105] –

In California, you have the right to get help from an interpreter for free during your medical visits. Did you know this before today?

Sa California, may karapatan kayong humingi ng tulong mula sa interpreter nang walang bayad para sa pagpapatingin ninyo. Alam ba ninyo ito bago ngayong araw?

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

**'PN\_QA17\_J16'** [PN\_AJ106] -

**PROGRAMMING NOTE AJ106 :**

**IF [ARINSURE = 1 OR AI27 = 1 (HAD INSURANCE AT LEAST 1 MONTH DURING THE PAST 12 MONTHS)]  
AND AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH AJ106 ;  
ELSE GO TO AH16**

**'QA17\_J16'** [AJ106] –

In the past 12 months, did you change where you usually go for health care?

Nitong huling 12 buwan, iniba ba ninyo ang karaniwan ninyong pinupuntahan para sa pagpapagamot?

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

**If = 2, -7, -8, goto 'QA17\_J18'**

**‘QA17\_J17’ [AJ107] –**

Did you have to change because of your health insurance plan?

Kinailangan ba ninyong ibahin dahil sa inyong health insurance plan?

**[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: "Kinailangan ba ninyong ibahin ang lugar kung saan kayo karaniwang pumupunta para sa pagpapagamot sa dahilang may-kinalaman sa inyong health insurance plan?"]**

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

**‘QA17\_J18’ [AH16] –**

During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?

Nitong nakaraang 12 buwan, ipinagpaliban ba ninyong bumili o kaya'y hindi kayo bumili ng gamot na inireseta sa inyo ng doktor?

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

**If = 2, -7, -8, goto ‘QA17\_J21’**

**‘QA17\_J19’ [AJ19] –**

Was cost or lack of insurance a reason why you delayed or did not get the prescription?

Ang gastos ba o ang kawalan ng insurance ang dahilan na ipinagpaliban ninyo ang pagbili ng reseta o hindi ninyo binili ang reseta?

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

**‘PN\_QA17\_J20’ [PN\_AJ176] -  
PROGRAMMING NOTE AJ167a:  
IF ARINSURE = 1, THEN CONTINUE WITH AJ167a;  
ELSE GO TO AH22**

**‘QA17\_J20’ [AJ176] –**

Did you delay or not get a medicine while you had your current insurance plan?

Naghintay ka ba bago bumili ng gamot o hindi ka bumili ng gamot habang insured ka sa kasalukuyan mong insurance plan?

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

**'QA17\_J21'** [AH22] –

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?

Nitong nakaraang 12 buwan, ipinagpaliban ba ninyo o hindi kayo nagpatingin para sa anumang iba pang paggagamot na sa akala ninyo ay kinakailangan ninyo - gaya ng pagpapatingin sa doktor, espesyalista o iba pang health professional?

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

**If = 2, -7, -8, goto 'QA17\_J27'**

**'QA17\_J22'** [AJ129] –

Did you get the care eventually?

Nagamot din ba kayo sa bandang huli?

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

**'QA17\_J23'** [AJ20] –

Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?

Ang gastos ba o ang kawalan ng insurance ang dahilan na ipinagpaliban ninyo ang pagpapagamot o na hindi kayo nakapagpatingin para sa pagpapagamot na nadama ninyong kinakailangan ninyo?

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

**If = 2, -7, -8, goto 'QA17\_J25'**

**'QA17\_J24'** [AJ130] –

Was that the main reason?

Iyon ba ang pangunahing dahilan?

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

**If = 1, -7, -8, goto 'QA17\_J27'**

**'QA17\_J25'** [AJ131] –

What was the one main reason why you delayed getting the care you felt you needed?

Ano ang pangunahing dahilan sa inyong pagpapaliban ng pagpapagamot na sa tingin ninyong kinakailangan ninyo?

- ☐ 01 COULDN'T GET APPOINTMENT
- ☐ 02 MY INSURANCE NOT ACCEPTED
- ☐ 03 INSURANCE DID NOT COVER
- ☐ 04 LANGUAGE PROBLEMS
- ☐ 05 TRANSPORTATION PROBLEMS
- ☐ 06 HOURS NOT CONVENIENT
- ☐ 07 NO CHILD CARE FOR CHILDREN AT HOME
- ☐ 08 FORGOT OR LOST REFERRAL
- ☐ 09 I DIDN'T HAVE TIME
- ☐ 10 COULDN'T AFFORD/COST TOO MUCH
- ☐ 11 NO INSURANCE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J26'** [PN\_AJ177] -**PROGRAMMING NOTE AJ168a:****IF ARINSURE = 1, THEN CONTINUE WITH AJ168a;****ELSE GO TO AH136****'QA17\_J26'** [AJ177] –

Did you delay or not get other medical care you felt you needed while you had your current insurance plan?

Naghintay ka ba bago tumanggap o hindi na lang talaga tumanggap ng ibang medikal na pangangalaga na pakiramdam mo ay kinailangan mo habang insured ka sa kasalukuyan mong insurance plan?

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

**'QA17\_J27'** [AJ136] –

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.

Ang susunod na mga tanong ay tungkol sa mga espesyalista. Ang mga espesyalista ay mga doktor gaya ng mga surgeon (siruhano), mga doktor sa puso, mga doktor sa allergy (alerhiya), mga doktor sa balat, at iba pang mga nagdadalubhasa sa isang larangan ng paggagamot.

In the past 12 months, did you or a doctor think you needed to see a medical specialist?

Nitong nakaraang 12 buwan, naisip ba ninyo o ng doctor na kailangan ninyong magpatingin sa espesyalistang doktor?

**[IF NEEDED: Do not include dental visits.]****[IF NEEDED, SAY: 「Huwag bilangin ang pagbisita sa dentista.」 ]**

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



**'PN\_QA17\_J28' [PN\_AJ137] -**

**PROGRAMMING NOTE AJ137 :**

**IF AJ136 = 1 (NEEDED A MEDICAL SPECIALIST) CONTINUE WITH AJ137 ;  
ELSE GO TO AJ133**

**'QA17\_J28' [AJ137] –**

During the past 12 months, did you have any trouble finding a medical specialist who would see you?

Nitong nakaraang 12 buwan, nahirapan ba kayong makahanap ng espesyalistang doktor na titingin sa inyo?

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

**'QA17\_J29' [AJ138] –**

During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?

Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng espesyalistang doktor na hindi nila kayo tatanggapin bilang bagong pasyente?

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

**'PN\_QA17\_J30' [PN\_AJ139] -**

**PROGRAMMING NOTE AJ139 :**

**IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH AJ139 ;  
ELSE SKIP TO AJ133**

**'QA17\_J30' [AJ139] –**

During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?

Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng espesyalistang doktor na hindi nila tinanggap ang inyong pangunahing health insurance?

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

**'QA17\_J31' [AJ133] –**

Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?

Ngayon, isipin ninyo ang mga general doctor. Nitong naraang 12 buwan, nahirapan ba kayong makahanap ng general doctor na titingin sa inyo?

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

'QA17\_J32' [AJ134] –

During the past 12 months, did a doctor's office tell you that they would not take you as a new patient?

Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng doktor na hindi nila kayo tatanggapin bilang bagong pasyente?

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

'PN\_QA17\_J33' [PN\_AJ135] -

**PROGRAMMING NOTE AJ135 :**

**IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH AJ135 ;  
ELSE SKIP TO AJ169**

'QA17\_J33' [AJ135] –

During the past 12 months, did a doctor's office tell you that they would not take your main health insurance?

Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng doktor na hindi nila tatanggapin ang inyong pangunahing health insurance?

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

'PN\_QA17\_J34' [PN\_AJ169] -

**PROGRAMMING NOTE AJ169:**

**IF AGE > 49 YEARS GO TO AG1;  
ELSE IF AA3 = 1 THEN GO TO AJ144B;  
ELSE CONTINUE WITH AJ169**

'QA17\_J34' [AJ169] –

Which of the following statements best describes your pregnancy plans? Would you say...

Alin sa mga sumusunod na pahayag ang pinakanaglalarawan sa inyong mga plano tungkol sa pagbubuntis? Masasabi mo bang...

- ☐ 01 You do not plan to get pregnant within the next 12 months,
- ☐ 01 Wala kang planong mabuntis sa loob ng susunod na labindalawang buwan,
- ☐ 02 You are not sexually active
- ☐ 02 Hindi ka aktibo sa seks
- ☐ 03 You are planning to get pregnant within the next 12 months, or
- ☐ 03 May plano kang mabuntis sa loob ng susunod na labindalawang buwan, o
- ☐ 04 You are currently pregnant?
- ☐ 04 Kasalukuyan ka bang buntis?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_J35' [PN\_AF40B] -  
PROGRAMMING NOTE AF40B:  
IF AD13 = 1 (PREGNANT), GO TO AG1;  
IF AA3 = 2 (FEMALE) AND AD46 = 2 (GAY, LESBIAN, OR HOMOSEXUAL), GO TO AG1; IF AJ169= 2, 4 (NOT SEXUALLY ACTIVE OR PREGNANT) THEN GO TO AJ144B;  
ELSE CONTINUE WITH AF40B**

**'QA17\_J35' [AF40B] -**

Are you or your male sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.

Gumagamit ba kayo o ang inyong lalaking katalik ng isang paraan na pampigil sa pagbubuntis upang mahadlangan ang pagkabuntis? Kabilang dito ang male o female sterilization

**[IF NEEDED, SAY: "Sterilization includes having your tubes tied, getting a vasectomy, or having an operation so you cannot have children."]**

**[IF NEEDED, SAY: "Kabilang sa sterilization ang pagpapatali (tubal ligation at vasectomy) o pagpapa-opera upang hindi maaaring magkaroon ng mga anak."]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 NO MALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, 3, -7, -8, goto 'QA17\_J39'**

**'PN\_AJ154' [PN\_AJ154] -  
PROGRAMMING NOTE AJ154:  
IF AF40B = 2(NO) OR -7 (REF) OR -8 (DK), GO TO AJ170;  
ELSE CONTINUE WITH AJ154**

**'AJ154' [AJ154] -**

Which birth control method or methods are you using?

Aling paraan o mga paraan ng pampigil sa pagbubuntis ang inyong ginagamit?

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

- ☐ 01 TUBAL LIGATION (TUBES TIED OR CUT)
- ☐ 02 VASECTOMY (MALE STERILIZATION)
- ☐ 03 IUD (MIRENA, PARAGARD)
- ☐ 04 IMPLANT (IMPLANON, NEXPLANON)
- ☐ 05 BIRTH CONTROL PILLS
- ☐ 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH, VAGINAL RING/NUVA RING)
- ☐ 07 CONDOMS (MALE)
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_J37' [AJ170] –

What is the MAIN reason you are NOT currently using birth control?

Ano ang PANGUNAHING dahilan kung bakit HINDI ka kasalukuyang gumagamit ng birth control?

- ☐ 01 TRYING TO GET PREGNANT/WANT A BABY
- ☐ 02 HAVEN'T FOUND A METHOD I LIKE
- ☐ 03 COST
- ☐ 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- ☐ 05 NO TRANSPORTATION
- ☐ 06 DON'T KNOW WHERE TO GET IT
- ☐ 07 DON'T BELIEVE IN BIRTH CONTROL
- ☐ 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- ☐ 09 PARTNER WON'T LET ME
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_J38' [AJ171] –

Has a doctor, medical provider, or family planning counselor ever talked to you about an IUD or an implant (that thing in your arm)?

Mayroon na bang doktor, medical provider, o family planning counselor na nakipag-usap sa iyo tungkol sa IUD o sa isang implant (ang bagay na nasa inyong braso)?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 NO MALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_J39' [PN\_AJ144B] -

**PROGRAMMING NOTE AJ144B:**

**IF AA3=2 (FEMALE) THEN GO TO AG1;**

**ELSE IF AA3=1 (MALE) CONTINUE WITH AJ144B;**

'QA17\_J39' [AJ144B] –

During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?

Nitong nakaraang 12 buwan, nakatanggap ba kayo mula sa doktor o medical provider ng counseling o impormasyon tungkol a pagpigil sa pagbubuntis para sa lalaki o para sa babae?

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

'QA17\_J40' [AJ172] –

Are you or your female sex partner currently using a birth control method to prevent pregnancy? This includes male or female sterilization.

Gumagamit ba kayo o ang inyong lalaking katalik ng isang paraan na pampigil sa pagbubuntis upang mahadlangan ang pagkabuntis? Kabilang dito ang male o female sterilization.

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 NO FEMALE SEXUAL PARTNER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_J41' [PN\_AJ174] -

**PROGRAMMING NOTE AJ174:**

**IF AJ172 = 2 (NO) or 3 (NO FEMALE PARTNER) THEN GO TO AJ175;**

**ELSE CONTINUE WITH AJ174;**

'QA17\_J41' [AJ174] –

Which birth control method or methods are you using?

Aling paraan o mga paraan ng pampigil sa pagbubuntis ang inyong ginagamit?

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "May iba pa ba?"]**

- ☐ 03 IUD (MIRENA, PARAGARD)
- ☐ 04 IMPLANT (IMPLANON, NEXPLANON)
- ☐ 05 BIRTH CONTROL PILLS
- ☐ 06 OTHER HORMONAL METHODS (INJECTION/DEPO-PROVERA, PATCH,VAGINAL RING/NUVA RING)
- ☐ 07 CONDOMS (MALE)
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_J42' [PN\_AJ175] -

**PROGRAMMING NOTE AJ175:**

**IF AJ172=2 (NO), CONTINUE WITH AJ175;**

**ELSE GO TO AG1;**

'QA17\_J42' [AJ175] –

What is the MAIN reason you are NOT currently using birth control?

Ano ang PANGUNAHING dahilan kung bakit HINDI ka kasalukuyang gumagamit ng birth control?

- ☐ 01 TRYING TO GET PREGNANT/WANT A BABY
- ☐ 02 HAVEN'T FOUND A METHOD I LIKE
- ☐ 03 COST
- ☐ 04 HAVEN'T HAD TIME TO GO IN FOR BIRTH CONTROL
- ☐ 05 NO TRANSPORTATION
- ☐ 06 DON'T KNOW WHERE TO GET IT
- ☐ 07 DON'T BELIEVE IN BIRTH CONTROL
- ☐ 08 WORRIED ABOUT SIDE EFFECTS AND/OR HEALTH RISKS
- ☐ 09 PARTNER WON'T LET ME
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_J43'** [AG1] –

These next questions are about dental health. About how long has it been since you visited a dentist or dental clinic? Include hygienists and all types of dental specialists.

Tungkol sa kalusugan ng ngipin ang sumusunod na mga tanong. Humigit-kumulang, gaano katagal na mula noong huli kayong nagpatingin sa dentista o sa pagamutan ng ngipin? Bilangin ang mga hygienist at lahat ng uri ng mga espesyalista sa ngipin.

- ☐ 00 HAVE NEVER VISIT
- ☐ 01 6 MONTHS AGO OR LESS
- ☐ 02 MORE THAN 6 MONTHS UP TO 1 YEAR AGO
- ☐ 03 MORE THAN 1 YEAR UP TO 2 YEARS AGO
- ☐ 04 MORE THAN 2 YEARS UP TO 5 YEARS AGO
- ☐ 05 MORE THAN 5 YEARS AGO
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 0, -7, -8, goto 'QA17\_J45'**

**'QA17\_J44'** [AJ167] –

Was it for a routine checkup or cleaning, or was it for a specific problem?

Para ba ito sa rutinang checkup o paglilinis, o para sa partikular na problema?

- ☐ 01 ROUTINE CHECKUP OR CLEANING
- ☐ 02 SPECIFIC PROBLEM
- ☐ 03 BOTH
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_J45'** [AG3] –

Do you now have any type of insurance that pays for part or all of your dental care?

Mayroon ba kayo ngayon na anumang uri ng insurance na nagbabayad sa bahagi o sa lahat ng iyong pangangalagang dental?

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

**'QA17\_J46'** [AJ168] –

How would you describe the condition of your teeth: excellent, very good, good, fair, or poor?

Paano mo ilalarawan ang kalagayan ng iyong mga ngipin: mabuting-mabuti, napakabuti, mabuti, mabuti-buti, o mahina?

- ☐ 01 EXCELLENT
- ☐ 02 VERY GOOD
- ☐ 03 GOOD
- ☐ 04 FAIR
- ☐ 05 POOR
- ☐ 06 HAS NO NATURAL TEETH
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**Section DM: Discrimination****'QA17\_DM1'** [DMC8] –

These next questions are about things that have happened to you while receiving medical care.

Ang mga sumusunod na katanungan ay tungkol sa mga bagay na nangyari sa inyo habang ginagamot kayo.

Was there ever a time when you would have gotten better medical care if you had belonged to a different race or ethnic group?

May panahon ba kahit kailan na mas mabuting paggagamot ang dapat ninyong natanggap kung iba sana ang inyong lahi o pangkating etniko na kinabibilangan ninyo?

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

**If = 2, -7, -8, goto 'QA17\_DM3'**

**'QA17\_DM2'** [DMC9] –

Think about the last time this happened. How long ago was that?

Isipin ninyo noong huling nangyari ito. Gaano katagal na nangyari iyon?

- ☐ 01 A YEAR AGO OR LESS
- ☐ 02 MORE THAN 1 UP TO 2 YEARS AGO
- ☐ 03 MORE THAN 2 UP TO 3 YEARS AGO
- ☐ 04 MORE THAN 3 UP TO 5 YEARS AGO
- ☐ 05 MORE THAN 5 UP TO 10 YEARS AGO
- ☐ 06 MORE THAN 10 UP TO 20 YEARS AGO
- ☐ 07 MORE THAN 20 YEARS AGO
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_DM3'** [DMC3] -

Over your entire lifetime, how often have you been treated unfairly when getting medical care? Would you say...

Sa inyong buong buhay, gaano kadalas kayo trinato nang di-matwid noong ginagamot kayo? Masasabi ba ninyo na...

- ☐ 01 Never,
- ☐ 02 Rarely,
- ☐ 03 Sometimes, or
- ☐ 04 Often?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, -7, -8, goto 'QA17\_K1'**

**'QA17\_DM4'** [DMC6B] –

Which of these do you think is the main reason why you have been treated unfairly, over your entire lifetime? Was it because of...

Sa inyong palagay, alin sa mga ito ang pangunahing dahilan kung bakit trinato kayo nang dimatwid, sa inyong buong buhay? Dahil ba ito sa ...

- ☐ 01 Your ancestry or national origin
- ☐ 01 Inyong lahi o bansang pinanggalingan
- ☐ 02 Because of your gender or sex
- ☐ 02 Dahil sa inyong gender or kasarian
- ☐ 03 Because of your race or skin color
- ☐ 03 Dahil sa inyong lipi (race) o kulay ng balat
- ☐ 04 Because of your age, or
- ☐ 04 Dahil sa inyong edad, o
- ☐ 05 Because of the way you speak English, or
- ☐ 05 Dahil sa kung paano kayo nagsasalita ng Ingles, o
- ☐ 06 For some other reason? (Specify: \_\_\_\_\_)
- ☐ 06 Iba pang dahilan? (Tukuyin: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_DM5'** [DMC7] –

Over your entire lifetime, how stressful have these experiences of unfair treatment usually been for you? Would you say...

Sa inyong buong buhay, gaano ang stress na naidudulot sa inyo ng ganitong mga karanasan ng di-matwid na pagtrato? Masasabi ba ninyo na...

- ☐ 01 Not at all stressful
- ☐ 01 Walang anumang stress
- ☐ 02 A little stressful
- ☐ 02 Nakaka-stress nang kaunti
- ☐ 03 Somewhat stressful, or
- ☐ 03 Medyo nakaka-stress
- ☐ 04 Extremely stressful?
- ☐ 04 Labis na nakaka-stress?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



## Section K: Employment, Income, Poverty Status, Food Security

**'PN\_QA17\_K1' [PN\_AK3] -**

**PROGRAMMING NOTE AK3 :**

**IF AK1 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUSINESS BUT NOT AT WORK) OR**

**AG10 = 1 (R USUALLY WORKS) CONTINUE WITH AK3 ;**

**ELSE GO TO PROGRAMMING NOTE AK20**

**'QA17\_K1' [AK3] -**

The next questions are about your employment.

Tungkol sa inyong empleo ang sumusunod na mga katanungan.

How many hours per week do you usually work at all jobs or businesses?

Ilang oras sa bawat linggo kayo karaniwang nagtatrabaho sa lahat ninyong mga trabaho bilang isang empleo o sa mga negosyo?

[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).

\_\_\_\_\_ HOURS [HR: 0-95]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_K2' [AK7] -**

How long have you worked at your main job?

How long have you worked at your main job?

Gaano katagal na kayo nagtatrabaho sa inyong pangunahing trabaho?

**[IF NEEDED, SAY: "That is, for your current employer."]**

**[IF NEEDED, SAY: 'Sa ibang salita, para sa inyong kasalukuyang employer.']**

**[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]**

'AK7M' [AK7M] - \_\_\_\_\_ MONTHS [HR: 0-12]

'AK7Y' [AK7Y] - \_\_\_\_\_ YEARS [HR: 0-50]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K3' [PN\_AK10] -**

**PROGRAMMING NOTE AK10 :**

**IF AK1 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT WORK)] OR AG10 = 1 (USUALLY WORKS), CONTINUE WITH AK10 ;  
ELSE SKIP TO PROGRAMMING NOTE AK20**

**'QA17\_K3' [AK10] -**

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?

Ano ang pinakamahasay ninyong tantya sa lahat ng inyong kinita nitong nakaraang buwan mula sa lahat ng mga trabaho at negosyo, kabilang ang mga sahod na por-hora, mga suweldo, mga tip at mga commission bago binawasan ng buwis at ng iba pang binabawas?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K4' [PN\_AK20] -**

**PROGRAMMING NOTE AK20 ;**

**IF AG8 = [1 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK)] OR AG11 = 1 (SPOUSE/PARTNER USUALLY WORKS), CONTINUE WITH AK20 AND:**

**IF AK1 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND AG10 ≠ 1 (R DOES NOT USUALLY WORK), AND AH43 = 1 (MARRIED), DISPLAY "The next question is about your spouse's employment."**

**ELSE IF AK1 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND AG10 ≠ 1 (R DOES NOT USUALLY WORK), AND (AD60B = 1 OR AD61B = 1), THEN DISPLAY "The next question is about your partner's employment."**

**IF AH43 = 1 THEN DISPLAY "spouse";**

**ELSE IF AD60B = 1 OR AD61B = 1 THEN DISPLAY "partner";**

**ELSE SKIP TO AK22**

**'QA17\_K4' [AK20] -**

{The next question is about your spouse's employment.}

{Tungkol sa empleo ng inyong {asawa} ang susunod na tanong.}

How many hours per week does your {husband/wife/spouse} usually work at all jobs or businesses?

Ilang oras sa bawat linggo karaniwang nagtatrabaho ang inyong {asawa} sa lahat ng kanyang trabaho bilang empleo o sa mga negosyo?

\_\_\_\_\_ HOURS [HR: 0-95]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_K5' [PN\_AK10A] -

**PROGRAMMING NOTE AK10A :**

**IF AK20  $\neq$  0 CONTINUE WITH AK10A ;**

**IF AH43 = 1 (MARRIED), THEN DISPLAY "spouse's";**

**ELSE IF AD60B = 1 OR AD61B = 1, THEN DISPLAY "partner's";**

**ELSE GO TO AK22**

'QA17\_K5' [AK10A] –

What is your best estimate of all your {spouse's/partner's} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

Ano ang pinakamahasay ninyong tantya sa lahat ng kinita ng inyong {asawa/partner} nitong nakaraang buwan mula sa lahat ng mga trabaho at negosyo, kabilang ang mga sahod na porhora, mga suweldo, mga tip at mga commission bago binawasan ng buwis at ng iba pang binabawas?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

NUM\_HOU\_AK10A

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'QA17\_K6' [AK22] –

What is your best estimate of your household's total annual income from all sources before taxes in 2016?

Ano ang pinakamahasay ninyong tantya sa kita ng buong pamamahay sa isang taon mula sa lahat ng pinanggagalingan bago nabuwisan noong 2014?

**[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: "Bilangin ang pera mula sa mga trabaho, social security, retirement income, bayad para sa unemployment, tulong mula sa gobyerno, at iba pa. Bilangin din ninyo ang kita mula sa interest, mga dividend, netong kita mula sa negosyo, sa sakahan o upa at anumang iba pang kinikitang pera."]**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = -7, -8, goto 'PN\_QA17\_K8'**

'QA17\_K7' [AK22A] –

PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?

MANGYARING TIYAKIN ANG HALAGANG NAKATALALA: Itinala ko ang kita ng inyong pamamahay na {AMOUNT}. Tama ba ito?

- ☐ 1 YES
- ☐ 2 NO

**If = 1, goto 'PN\_QA17\_K14'**

**If = 2, Go back to 'QA17\_K6'**

**'PN\_QA17\_K8' [PN\_AK11] -**  
**PROGRAMMING NOTE AK11 :**  
**IF AK22 = -7 OR -8 CONTINUE WITH AK11 ;**  
**ELSE GO TO PROGRAMMING NOTE AK17**

**'QA17\_K8' [AK11] –**

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?

Hindi namin kailangang malaman nang eksakto, ngunit masasabi ba ninyo sa akin kung higit ba o mas mababa sa \$20,000 ang taunang kita ng inyong pamamahay mula sa lahat ng pinanggagalingan bago nabuwisan?

- ☐ 01 MORE
- ☐ 02 EQUAL TO \$20K OR LESS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, goto 'QA17\_K10'**

**If = -7, -8, goto 'PN\_QA17\_K14'**

**'QA17\_K9' [AK12] –**

Is it ...

Ito ba ay...

- ☐ 01 \$5,000 or less,
- ☐ 02 \$5,001 to \$10,000,
- ☐ 03 \$10,001 to \$15,000, or
- ☐ 04 \$15,001 to 20,000?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, 4, -7, -8, goto 'PN\_QA17\_K14'**

**'QA17\_K10' [AK13] –**

Is it more or less than \$70,000 per year?

Higit ba o mas mababa sa \$70,000 sa bawat taon?

- ☐ 01 MORE
- ☐ 02 EQUAL TO \$70K OR LESS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, goto 'QA17\_K12'**

**If = -7, -8, goto 'PN\_QA17\_K14'**

**'QA17\_K11'** [AK14] –

Is it ...

Ito ba ay...

- ☐ 01 \$20,001 to \$30,000,
- ☐ 02 \$30,001 to \$40,000,
- ☐ 03 \$40,001 to \$50,000,
- ☐ 04 \$50,001 to \$60,000, or
- ☐ 05 \$60,001 to \$70,000?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 2, 3, 4, 5, -7, -8, goto 'PN\_QA17\_K14'**

**'QA17\_K12'** [AK15] –

Is it more or less than \$135,000 per year?

Higit ba o mas mababa sa \$135,000 sa bawat taon?

- ☐ 01 MORE
- ☐ 02 EQUAL TO \$135K OR LESS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, -7, -8, goto 'PN\_QA17\_K14'**

**'QA17\_K13'** [AK16] –

Is it ...

Ito ba ay...

- ☐ 01 \$70,001 to \$80,000,
- ☐ 02 \$80,001 to \$90,000,
- ☐ 03 \$90,001 to \$100,000, or
- ☐ 04 \$100,001 to \$135,000?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K14'** [PN\_AK17] -

**PROGRAMMING NOTE AK17 :**

**IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE AK18 ;**

**ELSE CONTINUE WITH AK17**

**'QA17\_K14'** [AK17] –

Including yourself, how many people living in your household are supported by your total household income

Kabilang ang inyong sarili, ilang tao na tumitira sa inyong pamamahay ang tinutustusan ng buong kita ng inyong pamamahay?

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K15' [PN\_AK18] -**  
**PROGRAMMING NOTE AK18 :**  
**AK18 MUST BE LESS THAN AK17 ;**  
**IF R IS ONLY MEMBER OF HH, GO TO AK32 ;**  
**IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR TOTAL**  
**NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) = AK17 GO**  
**TO PROGRAMMING NOTE AK32 ;**  
**ELSE CONTINUE WITH AK18**

**'QA17\_K15' [AK18] –**

How many of these {INSERT NUMBER FROM AK17} people are children under the age of 18?

Ilan sa {INSERT NUMBER FROM QA15\_K15} taong ito ay mga bata na hindi pa 18 taong gulang?

\_\_\_\_\_ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_K16' [AK32] –**

Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?

Mayroon bang sinumang nakatira sa U.S., ngunit hindi kasalukuyang tumitira sa inyong pamamahay, na tinutustusan ng kita ng inyong pamamahay?

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

**If = 2, -7, -8, goto 'PN\_AM1'**

**'QA17\_K17' [AK33] –**

How many?

Ilan?

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K18'** [PN\_AM1B] -  
**PROGRAMMING NOTE AM1B :**  
 IF POVERTY < 5 (HH Income ≤ 200% FPL) OR [8 (HH INCOME NOT KNOWN) AND (ARMCAL=1 OR ARINSURE ≠ 1)], CONTINUE WITH AM1B ;  
 IF HH Income ≤ 300% FPL) OR [8 (HH INCOME NOT KNOWN) AND (ARMCAL=1 OR ARINSURE ≠ 1) AND SAMPLED COUNTY IS SAN FRANCISCO OR ALAMEDA], CONTINUE WITH AM1B;**ELSE GO TO AL2**

**'PN\_AM1B\_2'** [PN\_AM1B\_2] -  
**PROGRAMMING NOTE AM1B :**  
**IF AK17 = 1, THEN DISPLAY "I",**  
**ELSE IF AK17 > 1 DISPLAY "We"**

**'QA17\_K18'** [AM1B] -

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

Tungkol sa mga pagkain na kinain sa inyong pamamahay nitong nakaraang 12 buwan ang sumusunod na mga tanong at kung nakaya ninyong mamili ng pagkain.

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:

Babasahin ko ang dalawang pahayag ng mga tao tungkol sa kanilang kalagayan sa pagkain. Para sa bawat isa, pakisabi sa akin kung isinasalarawan ng pahayag ang isang bagay na totoo nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong pamamahay nitong nakaraang 12 buwan.

"The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."

Ang unang pahayag ay: "Talagang hindi nagtagal ang pagkaing binili {ko/namin}, at wala {akong/kaming} pera upang bumili ng pandagdag."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

Totoo ba iyon nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong pamamahay nitong nakaraang 12 buwan?

- ☐ 01 OFTEN TRUE
- ☐ 02 SOMETIMES TRUE
- ☐ 03 NEVER TRUE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_K19'** [PN\_AM2B] -  
**PROGRAMMING NOTE AM2B :**  
**IF AK17 = 1, THEN DISPLAY "I",**  
**ELSE IF AK17 > 1 DISPLAY "We"**

**'QA17\_K19'** [AM2B] –

The second statement is:

"{I/We} couldn't afford to eat balanced meals."

Ang ikalawang pahayag ay: "Hindi {ko/namin} kayang kumain ng balanseng agahan/tanghalian/hapunan."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

Totoo ba iyon nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong pamamahay nitong nakaraang 12 buwan?

- ☐ 01 OFTEN TRUE
- ☐ 02 SOMETIMES TRUE
- ☐ 03 NEVER TRUE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_K20'** [AM3B] –

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?

Pakisagot ng oo o hindi. Nitong nakaraang 12 buwan, binawasan ba ninyo o ng iba pang adult sa inyong pamamahay ang dami ng pagkain o hindi kumain ng almusal/tanghalian/hapunan dahil sa hindi sapat ang pera para sa pagkain?

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

**If = 2, -7, -8, goto 'QA17\_K22'**

**'QA17\_K21'** [AM3C] –

How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?

Gaano kadalas ito nangyayari -- halos bawat buwan, ilang buwan ngunit hindi bawat buwan, o sa isa o dalawang buwan lamang?

- ☐ 01 ALMOST EVERY MONTH
- ☐ 02 SOME MONTHS BUT NOT EVERY MONTH
- ☐ 03 ONLY IN 1 OR 2 MONTHS
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'QA17\_K22'** [AM4B] –

In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

Nitong nakaraang 12 buwan, kumain ba kayo kailanman ng mas kaunti kaysa sa inyong nadadamang dapat kainin dahil walang sapat na pera upang ipambili ng pagkain?

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

**'QA17\_K23'** [AM5B] –

In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

Nitong nakaraang 12 buwan, nagutom ba kayo kailanman ngunit hindi kumain dahil hindi ninyo kayang bumili ng sapat na pagkain?

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

## Section L: Public Program Participation

**IF HOUSEHOLD INCOME IS  $\leq$  300% FPL (POVERTY = <6) OR [IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND (ARMCAL=1 OR ARINSURE  $\neq$  1)] CONTINUE WITH SECTION L;**

**ELSE GO TO AK23**

**'QA17\_L1' [AL2] –**

Are you now receiving TANF or CalWORKs?

Tumatanggap ba kayo ngayon ng TANF o CalWORKS?

**[IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."]**

**[IF NEEDED, SAY: "Temporary Assistance to Needy Families ang kahulugan ng TANF; California Work Opportunities and Responsibilities to Kids ang CalWORKS. Itong dalawa ang pumalit sa AFDC, ang dating programa ng California na tagabigay ng tulong sa mga karapat-dapat."]**

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

**'PN\_QA17\_L2' [PN\_IAP1] -  
PROGRAMMING NOTE IAP1 :  
IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH IAP1 ;  
ELSE GO TO AL5 ;**

**'QA17\_L2' [IAP1] –**

Is(TEEN) now receiving TANF or CalWORKs?

Tumatanggap ba ngayon si (TEEN) ng TANF or CalWORKS?

**[IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."]**

**[IF NEEDED, SAY: "Temporary Assistance to Needy Families ang kahulugan ng TANF; California Work Opportunities and Responsibilities to Kids ang CalWORKS. Itong dalawa ang kapalit sa AFDC, ang dating programa ng California na tagabigay ng tulong sa mga karapat-dapat."]**

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

'QA17\_L3' [AL5] –

Are you receiving Food Stamp benefits, also known as CalFresh?

Tumatanggap ba kayo ng mga benepisyo ng Food Stamp na kilala rin bilang CalFresh?

**[IF NEEDED, SAY: "You receive benefits through an EBT card." EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card]**

**[IF NEEDED, SAY: "Tinatanggap ninyo ang mga benepisyo sa pamamagitan ng EBT card. Ang EBT ay nangangahulugang Electronic Benefits Transfer card at kilala rin ito bilang Golden State Advantage Card.]**

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

'PN\_QA17\_L4' [PN\_IAP2] -

**PROGRAMMING NOTE LAP2 :**

**IF ELIGIBLE TEEN IN HOUSEHOLD, CONTINUE WITH LAP2 ;**

**ELSE GO TO AL6**

'QA17\_L4' [IAP2] –

Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?

Tumatanggap ba si {TEEN} ng mga benepisyong Food Stamp na kilala din bilang CalFresh?

**[IF NEEDED, SAY: "You may receive benefits as stamps or through an EBT card." EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card]**

**[IF NEEDED, SAY: "Tinatanggap ninyo ang mga benepisyo sa pamamagitan ng EBT card. Ang EBT ay nangangahulugan na Electronic Benefits Transfer card at kilala rin ito bilang Golden State Advantage Card.]**

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

'QA17\_L5' [AL6] –

Are you receiving Supplemental Security Income (SSI)?

Tumatanggap ba kayo ng SSI?

**[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security".]**

**[IF NEEDED, SAY: "Ang kahulugan ng SSI ay Supplemental Security Income. Iba ito sa Social Security.]**

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

**'PN\_QA17\_L6' [PN\_AL7] -**

**PROGRAMMING NOTE AL7 :**

**IF AA3 = 2 (FEMALE) AND [AD13 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)]  
CONTINUE WITH AL7 ;  
ELSE GO TO PROGRAMMING NOTE AL9**

**'QA17\_L6' [AL7] -**

Are you on WIC?

Naka-enrol ba kayo sa WIC?

**[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and children."]**

**[IF NEEDED, SAY: Ang WIC ay ang 'Supplemental Food Program for Women, Infants and Children']**

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

**'PN\_QA17\_L7' [PN\_AL9] -**

**PROGRAMMING NOTE AL9 :**

**IF AL8 = 1 (LEGALLY BLIND) OR [(AAGE > 64 OR AA2A = 6) AND (POVERTY < 6 (HH INCOME ≤ 300% FPL) OR 8 (HH INCOME NOT KNOWN))], CONTINUE WITH AL9 ; ELSE SKIP TO PROGRAMMING NOTE AL15B ;  
OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL  
PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM AK17 .**

**IF AK17 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY  
CATI VARIABLE RADLTCNT).**

**IF AK17 = 1 DISPLAY \$2000;**

**IF AK17 = 2 DISPLAY \$3000;**

**IF AK17 = 3 DISPLAY \$3150;**

**IF AK17 = 4 DISPLAY \$3300;**

**IF AK17 = 5 DISPLAY \$3450;**

**IF AK17 = 6 DISPLAY \$3600;**

**IF AK17 = 7 DISPLAY \$3750;**

**IF AK17 = 8 DISPLAY \$3900;**

**IF AK17 = 9 DISPLAY \$4050;**

**IF AK17 ≥ 10 DISPLAY \$4200;**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your  
family's";**

**ELSE DISPLAY "your"**

**'QA17\_L7' [AL9] -**

Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?

Huwag bibilangin ang halaga ng anumang bahay o kotse na maaaring pag-aari ninyo, masasabi ba ninyo na higit sa {PROPERTY LIMIT} ang halaga ng mga ari-arian {ninyo/ng inyong pamilya}, ibig sabihin, lahat ng inyong perang cash, mga savings, mga investment na pinagsama-sama ?

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

**If = 1, goto 'PN\_QA17\_L14'**

**'PN\_QA17\_L8' [PN\_AL34] -**

**PROGRAMMING NOTE AL34 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "does your family"; ELSE DISPLAY "do you"**

**'QA17\_L8' [AL34] –**

About how much {do you/does your family} have in cash, savings, and investments?

Humigit kumulang, gaano ang cash, savings, at mga investment {ninyo/ng inyong pamilya}?

**[IF NEEDED, SAY: "Again, do not count the value of any house or car you may own."]**

**[IF NEEDED, SAY: "Inuulit ko ho, huwag ninyong ibilang ang halaga ng anumang bahay o kotse ninyo."]**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]\_

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L9' [PN\_AL35] -**

**PROGRAMMING NOTE AL35 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "does your family"; ELSE DISPLAY "do you"**

**'QA17\_L9' [AL35] –**

Besides your primary car or truck, {do you/does your family} own other cars or trucks?

Maliban sa inyong pangunahing kotse o truck, may pag-aari ba {kayo/ang inyong pamilya} na ibang mga kotse o truck?

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

**If = 2, -7, -8, goto 'QA17\_L12'**

**'QA17\_L10' [AL36] –**

Are these cars or trucks only for personal use? Do not include cars or trucks used for transporting disabled persons or for business purposes.

Itong mga kotse at mga truck ba ay para sa inyong personal na pangangailangan? Huwag bilangin ang mga kotse o truck na ginagamit para isakay ang mga taong may kapansanan o para sa negosyo.

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

**If = 2, -7, -8, goto 'QA17\_L12'**

**'PN\_QA17\_L11' [PN\_AL37] -**

**PROGRAMMING NOTE AL37 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family"; ELSE DISPLAY "your";**

**'QA17\_L11' [AL37] -**

Not counting what {you/your family} owe, what is your estimated value of these cars or trucks?

Huwag bibilangin ang halaga ng utang {ninyo/ng inyong pamilya} sa mga kotse at mga truck, ano ang inyong tinayang halaga nitong mga kotse at mga truck.

**[IF NEEDED: Do not include your primary cars or trucks.]**

**[IF NEEDED: Huwag bilangin ang inyong pangunahing kotse o truck.]**

**[IF NEEDED: Do not include cars or trucks used for transporting disabled persons or business purposes.]**

**[IF NEEDED: Huwag bilangin ang mga kotse o truck na ginagamit para isakay ang mga taong may kapansanan o para sa negosyo.]**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L12' [PN\_AL38] -**

**PROGRAMMING NOTE AL38 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "Does your family"; ELSE DISPLAY "Do you"**

**'QA17\_L12' [AL38] -**

{Do you/ Does your family} own a motorcycle, boat, trailer, or other non-commercial vehicle?

May pag-aari ba (kayo/ang inyong pamilya) na isang motorsiklo, bapor, trailer, o iba pang sasakyang di pang-negosyo?

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

**If = 2, -7, -8, goto 'PN\_QA17\_L14'**

**'PN\_QA17\_L13'** [PN\_AL39] -

**PROGRAMMING NOTE AL39 :**

**IF AH43 = 1 (MARRIED) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family"; ELSE DISPLAY "you"**

**'QA17\_L13'** [AL39] –

Not counting what {you/your family} owe, what is your estimated value of the motorcycle, boat, trailer, or other non-commercial vehicle {you/your family} own?

Huwag bibilangin ang halaga ng utang {ninyo/ng inyong pamilya} sa motorsiklo, bapor, trailer o iba pang sasakyang di pang-negosyo, ano ang inyong tinayang halaga ng mga ito?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L14'** [PN\_AL15B] -

**PROGRAMMING NOTE AL15 :**

**IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";**

**ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)] AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner"; ELSE DISPLAY "you"**

**'QA17\_L14'** [AL15B] –

Did {you or your spouse/you or your partner/you} receive any money last month for child support?

Nakatanggap ba {kayo o ang inyong asawa/kayo o ang inyong partner/kayo} ng anumang pera nitong nakaraang buwan para sa child support o sustento sa anak?

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

**If = 2, -7, -8, goto 'PN\_QA17\_L16'**

**'PN\_QA17\_L15' [PN\_AL16B] -**  
**PROGRAMMING NOTE AL16 :**  
 IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined"  
 AND "and your spouse";  
 ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61 = 1 (LEGAL SAME-SEX COUPLE)]  
 AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";  
 ELSE CONTINUE WITHOUT DISPLAYS

**'QA17\_L15' [AL16B] -**

What was the {combined} total amount that you {and your spouse/and your partner} received from child support last month {for both you and your spouse/partner}?

Ano ang {pinagsama-samang} kabuuang halaga na natanggap ninyo {at ng inyong asawa/at ng inyong partner} mula sa child support nitong nakaraang buwan?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [000001-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L16' [PN\_AL17] -**

**PROGRAMMING NOTE AL17 :**  
 IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";  
 ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)]  
 AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you"  
 ELSE DISPLAY "you"

**'QA17\_L16' [AL17] -**

Did {you or your partner or both of you/you or your spouse or both of you/you} pay any child support last month?

Nagbayad ba {kayo o ang inyong partner o kayong dalawa/ kayo o ang inyong asawa o kayong dalawa} ng anumang child support nitong nakaraang buwan?

- ☐ 01 YES, RESPONDENT PAID
- ☐ 02 YES, SPOUSE/PARTNER PAID
- ☐ 03 YES, BOTH PAID
- ☐ 04 NO
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 4, -7, -8, goto 'PN\_QA17\_L18'**



**'PN\_QA17\_L17' [PN\_AL18] -**  
**PROGRAMMING NOTE AL18 :**  
**IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";**  
**ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)]**  
**AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";**  
**ELSE DISPLAY "you"**

**'QA17\_L17' [AL18] –**

What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in child support last month?

Ano ang kabuuang halaga ng child support ang binayaran {ninyo o ng inyong asawa o ninyong dalawa/ ninyo o ng inyong partner o ninyong dalawa} nitong nakaraang buwan?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\_\_\_\_\_ AMOUNT [000001-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L18' [PN\_AL32] -**  
**PROGRAMMING NOTE AL32 :**  
**IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";**  
**ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)]**  
**AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";**  
**ELSE DISPLAY "you"**

**'QA17\_L18' [AL32] –**

Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?

Tumanggap ba{ kayo o ang inyong asawa/kayo o ang inyong partner/kayo } ng anumang pera para sa workers compensation nitong nakaraang buwan?

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

**If = 2, -7, -8, goto 'PN\_QA17\_L20'**

'PN\_QA17\_L19' [PN\_AL33] -

**PROGRAMMING NOTE AL33 :**

**IF AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";**  
**ELSE IF [AH43 = 2 (LIVING WITH PARTNER) OR AD60B = 1 OR AD61B = 1 (LEGAL SAME-SEX COUPLE)] AND AH44 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";**  
**ELSE CONTINUE WITHOUT DISPLAYS**

'QA17\_L19' [AL33] -

What was the {combined} total amount that you {and your spouse/and your partner} received from workers compensation last month?

Ano ang {pinagsama-samang} kabuuang halaga na natanggap ninyo {at ng inyong asawa/at ng inyong partner} mula sa workers compensation nitong nakaraang buwan?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [000001-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_L20' [PN\_AL18A] -

**PROGRAMMING NOTE AL18A :**

**IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND AH43 = 1 (MARRIED) AND AH44 = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH AL18A AND DISPLAY "you or your spouse";**  
**ELSE IF AGE ≥ 65 AND AH44 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH AL18A AND DISPLAY "you or your partner";**  
**ELSE IF AGE ≥ 65, THEN CONTINUE WITH AL18A AND DISPLAY "you";**  
**ELSE GO TO PROGRAMMING NOTE AL19**

'QA17\_L20' [AL18A] -

Did {you or your spouse/you or your partner/you} receive any Social Security or Pension payments last month?

Nakatanggap ba {kayo o ang inyong asawa/kayo o ang inyong partner} ng anumang bayad mula sa Social Security o Pension nitong nakaraang buwan?

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

**If = 2, -7, -8, goto 'PN\_QA17\_L22'**

**'PN\_QA17\_L21' [PN\_AL18B] -**  
**PROGRAMMING NOTE AL18B :**  
**IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND AH43 = 1 (MARRIED) AND AH44 = 1**  
**(SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY "you or your spouse";**  
**ELSE IF AGE ≥ 65 AND AH44 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), DISPLAY "you or your partner";**  
**ELSE IF AGE ≥ 65, DISPLAY "you";**

**'QA17\_L21' [AL18B] –**

What was the total amount received last month from Social Security and Pensions {for both you and your spouse/partner}?

Ano ang kabuuang halagang tinanggap nitong nakaraang buwan mula sa Social Security at mga Pension?

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\_\_\_\_\_ AMOUNT [000001-999995]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L22' [PN\_AL19] -**  
**PROGRAMMING NOTE AL19 :**  
**IF ARINSURE ≠ 1 (UNINSURED) CONTINUE WITH AL19 ;**  
**ELSE GO TO AL40**

**'QA17\_L22' [AL19] –**

What is the one main reason why you are not enrolled in the Medi-Cal program?

Ano ang isang pangunahing dahilan kung bakit hindi kayo naka-enroll sa program ng Medi-Cal?

- ☐ 01 PAPERWORK TOO DIFFICULT
- ☐ 02 DIDN'T KNOW IF ELIGIBLE
- ☐ 03 INCOME TOO HIGH, NOT ELIGIBLE
- ☐ 04 NOT ELIGIBLE DUE TO CITIZENSHIP/ IMMIGRATION STATUS
- ☐ 05 OTHER NOT ELIGIBLE
- ☐ 06 DON'T BELIEVE IN HEALTH INSURANCE
- ☐ 07 DON'T NEED IT BECAUSE HEALTHY
- ☐ 08 ALREADY HAVE INSURANCE
- ☐ 09 DIDN'T KNOW IT EXISTED
- ☐ 10 DON'T LIKE / WANT WELFARE
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L23'** [PN\_AL40] -  
**PROGRAMMING NOTE AL40:**  
**IF ARMCAL = 1 (MEDI-CAL) OR AI33=1, AH134=1 OR AH135 =1 (HAD PRIOR MEDI-CAL COVERAGE),**  
**CONTINUE WITH AL40;**  
**ELSE GO TO PN AL49**

**'QA17\_L23'** [AL40] –

You previously said you had Medi-Cal. How long did you have Medi-Cal?

Nasabi ninyo dati na mayroon kayong Medi-Cal. Gaano na katagal kayong mayroong Medi-Cal?

'AL40Y' [AL40Y] - \_\_\_\_\_ YEARS

'AL40M' [AL40M] - \_\_\_\_\_ MONTHS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_L24'** [PN\_AL41] -  
**PROGRAMMING NOTE AL41:**  
**IF AL40 > 1 YEAR, THEN CONTINUE WITH AL41;**  
**ELSE GO TO PN AL49**

**'QA17\_L24'** [AL41] –

Was your Medi-Cal renewed automatically in the past year (with no input or action needed on your part)?

Automatic bang na-renew ang inyong Medi-Cal sa nakaraang taon (na wala kang karagdagang kailangang gawin)?

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 DID NOT RENEW
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, 3, -7, -8, go to PN\_AL49**

**'QA17\_L25'** [AL42] –

Did you need to provide additional information for your Medi-Cal renewal by phone, mail, fax, online, or in person?

Kinailangan ba ninyong magbigay ng karagdagang impormasyon para sa inyong Medi-Cal sa telepono, mail, fax, online, o personal kang pumunta para mag-renew?

**[CHECK ALL THAT APPLY]**

- ☐ 01 PHONE
- ☐ 02 MAIL
- ☐ 03 FAX
- ☐ 04 ONLINE
- ☐ 05 IN PERSON
- ☐ 06 DIDN'T NEED TO PROVIDE INFORMATION
- ☐ 07 OTHER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**IF AL42 = 6, -7 , -8 goto AL44**

**‘QA17\_L26’ [AL43] –**

What information was needed?

Anong impormasyon ang kinailangan?

**[CHECK ALL THAT APPLY]**

- ☐ 01 INCOME INFORMATION
- ☐ 02 HOUSEHOLD INFORMATION
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**‘QA17\_L27’ [AL44] –**

Did you have any problems when renewing your Medi-Cal?

Noong nag-renew kayo ng inyong Medi-Cal, may naranasan ka bang anumang mga isyu o problema? Nagkaroon ka ba ng anumang problema nang ni-renew ninyo ang inyong Medi-Cal?

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

**‘QA17\_L28’ [AL45] –**

Did you temporarily lose coverage for 1 to 2 months, lost coverage completely, or had to reapply?

Pansamantala ka bang nawalan ng coverage ng isa o dalawang buwan, tuluyang nawalan ng coverage, o kinailalang mong mag-apply ulit?

- ☐ 1 LOST COVERAGE FOR 1-2 MONTHS
- ☐ 2 LOST COVERAGE
- ☐ 3 HAD TO REAPPLY
- ☐ 4 REFUSED
- ☐ 5 DON'T KNOW

**‘QA17\_L29’ [AL46] –**

Prior to having Medi-Cal coverage, what health coverage did you have?

Bago ka nagkaroon ng Medi-Cal coverage, anong health coverage ang dating mayroon ka?

- ☐ 01 UNINSURED
- ☐ 02 EMPLOYER-BASED
- ☐ 03 PRIVATE
- ☐ 04 COVERED CALIFORNIA
- ☐ 05 OTHER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_L30' [PN\_AL47] -

**PROGRAMMING NOTE AL47:**  
**IF AL46 = 4, THEN CONTINUE WITH AL47;**  
**ELSE GO TO PN AL49**

'QA17\_L30' [AL47] -

Did you have problem in changing to Medi-Cal?

Nagkaroon ka ba ng problema sa paglipat sa Medi-Cal?

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

**If = 2, -7, -8, goto 'QA17\_L32'**

'QA17\_L31' [AL48] -

What kind of problem?

Anong klaseng problema?

- ☐ 01 GAP IN HEALTH COVERAGE
- ☐ 02 FILED AN APPEAL AS ELIGIBILITY DECISIONS WAS INCORRECT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_L32' [PN\_AL49] - PN\_AL49

**PROGRAMMING NOTE AL49:**

**IF AL7 =1 (YES) GO TO AL73**

**IF HH INCOME <=300% FPL AND (HHS WITH FEMALES <=45 YEARS OLD OR CHILDREN <= 10 YEARS OLD OR AD13 =1 OR AJ169 =4 (AR FEMALE IS PREGNANT), THEN CONTINUE WITH AL49;**  
**ELSE GO TO AK23;**

'QA17\_L32' [AL49] -

During the past 12 months, did you or any member of your household receive benefits from the WIC program, that is, the Special Supplemental Nutrition Program for Women, Infants and Children?

Sa loob ng nakaraang labindalawang buwan, nakatanggap ka ba o sinumang miyembro ng inyong sambahayan ng mga benepisyo mula sa WIC program, o ang Special Supplemental Nutrition Program for Women, Infants and Children?

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

**If = 1, goto 'QA17\_L56'**

**If = -7, -8, goto AK23**

**'QA17\_L33'** [AL50] –

Have you or any member of your household received benefits from the WIC program in the past 5 years?

Nakatanggap ka ba o ang sinuman sa inyong sambahayan ng mga benepisyo mula sa WIC program sa nakaraang limang taon?

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

**If = 2 goto 'QA17\_L45'**

**If = -7, -8 goto AK23**

**'QA17\_L34'** [AL51] –

Why did you leave WIC? Did you leave because you were no longer eligible?

Bakit ka umalis sa WIC program? Umalis ka ba dahil hindi ka na kwalipikado?

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

**If = 1 goto PN AL73**

**'QA17\_L35'** [AL52] –

Did you leave because you only wanted baby formula?

Umalis ka ba dahil gusto mo lang ng baby formula o gatas na tinitimpla para sa mga sanggol?

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

**'QA17\_L36'** [AL53] –

Did you leave because shopping for WIC foods was a hassle?

Umalis ka ba dahil nakakaasar bumili ng mga pagkain na WIC?

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

**'QA17\_L37'** [AL54] –

[Did you leave because]....you had a bad experience at WIC?

[Umalis ka ba dahil]... may hindi ka magandang karanasan sa WIC?

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

**'QA17\_L38'** [AL55] –

[Did you leave because]....you didn't value the information received?

[Umalis ka ba dahil]... hindi mo pinahalagahan ang natanggap mong impormasyon?

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

**'QA17\_L39'** [AL56] –

[Did you leave because]....you thought you were taking the place of someone who needed WIC more?

[Umalis ka ba dahil]... sa tingin mo kinukuha mo ang lugar ng ibang taong mas nangangailangan ng WIC?

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

**'QA17\_L40'** [AL57] –

[Did you leave because]....the amount of food benefits received were not worth your time and effort?

[Umalis ka ba dahil]... ang halaga ng mga benepisyo na pagkain ay hindi katumbas ng inyong panahon?

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

**'QA17\_L41'** [AL58] –

[Did you leave because]....you would rather not rely on a government program?

[Umalis ka ba dahil]... mas gusto mong huwag umasa sa isang programa ng gobyerno?

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

**'QA17\_L42'** [AL59] –

[Did you leave because]....of transportation issues?

[Umalis ka ba dahil]... sa mga problema sa transportasyon?

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



**'QA17\_L43'** [AL60] –

Did you leave because of any other reasons?

Umalis ka ba dahil sa anumang iba pang mga dahilan?

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

**If = 2, -7, -8, goto 'PN AL73'**

**'QA17\_L44'** [AL61] –

What were those reasons?

Ano ang mga kadahilanang iyon?

- ☐ 01 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1,-7,-8 goto PN AL73**

**'QA17\_L45'** [AL62] –

Why didn't you enroll yourself or any member of your household on WIC? Was it because you didn't know about wic?

Bakit hindi mo inenroll ang inyong sarili o ang sinumang miyembro ng inyong sambahayan sa program ng WIC? Dahil ba dati hindi mo alam ang tungkol sa WIC?

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

**If = 1,-7,-8 goto AK23**

**'QA17\_L46'** [AL63] –

Was it because you didn't qualify?

Dahil ba hindi ka kwalipikado?

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

**If = 1, 3, 4, goto 'QA17\_M1'**

**'QA17\_L47'** [AL64] –

[Was it]...because you didn't think you needed WIC?

Dahil ba hindi mo inisip na kinakailangan mo ang WIC?

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

**‘QA17\_L48’ [AL65] –**

[Was it]...because you didn't value what WIC offered?

Dahil ba hindi mo pinahalagahan ang mga inalok ng WIC?

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

**‘QA17\_L49’ [AL66] –**

[Was it]...because it was too difficult to apply?

Dahil ba masyadong mahirap mag-apply?

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

**‘QA17\_L50’ [AL67] –**

[Was it]...because of language issues?

Dahil ba hindi sila nagsasalita ng inyong wika at mahirap silang maintindihan?

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

**‘QA17\_L51’ [AL68] –**

[Was it]...because you didn't trust WIC?

Dahil ba hindi ka nagtiwala sa WIC?

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

**‘QA17\_L52’ [AL69] –**

[Was it]...because you heard negative things about WIC?

Dahil ba may mga narinig kang mga negatibong bagay tungkol sa WIC?

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

**'QA17\_L53'** [AL70] –

[Was it]...because of transportation issues?

Dahil ba sa mga problema sa transportasyon?

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

**'QA17\_L54'** [AL71] –

Did you not enroll because of any other reasons?

Hindi ka ba nag-enroll dahil sa anumang iba pang mga dahilan?

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

**If = 2, -7, -8, goto 'QA17\_M1'**

**'QA17\_L55'** [AL72] –

What were those reasons?

Ano ang mga kadahilanang iyon?

- ☐ 01 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, -7, -8 goto 'QA17\_M1'**

**'PN\_QA17\_L56'** [PN\_AL73] - PN\_AL73

**PROGRAM NOTE AL73:**

**IF AL7 = 1 OR AL50 = 1 DISPLAY "You previously mentioned you were on WIC"**

**ELSE IF AL49 =1, GO TO AL73**

**ELSE IF AL49=2 AND AL50 =2 SKIP TO AK23**

**'QA17\_L56'** [AL73] - [INTRO]:

You previously mentioned you were on WIC.

What benefits have you liked getting from the WIC program?

Did you like WIC checks for food?

Nabanggit mo na dati kang nasa program ng WIC. Anong nakuha mong mga benepisyo ang nagustuhan mo na mula sa WIC program? Nagustuhan mo ba ang mga tseke mula sa WIC para sa pagkain?

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

**‘QA17\_L57’ [AL74] –**

Did you like WIC checks for baby formula?

Nagustuhan mo ba ang mga tseke mula sa WIC para sa baby formula o gatas na gawa o tinitimpla para sa mga sanggol?

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

**‘QA17\_L58’ [AL75] –**

[Did you like]... education for having healthy pregnancy?

[Nagustuhan mo ba]... ang nakuha mong edukasyon para sa pagkakaroon ng malusog na pagbubuntis?

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

**‘QA17\_L59’ [AL76] –**

[Did you like]... individual counseling?

[Nagustuhan mo ba]... ang indibidwal na counseling?

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

**‘QA17\_L60’ [AL77] –**

[Did you like]... education on improving the health and nutrition of my family?

[Nagustuhan mo ba]... ang nakuha mong edukasyon sa pagpapabuti ng kalusugan at nutrisyon ng inyong pamilya?

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

**‘QA17\_L61’ [AL78] –**

[Did you like]... support for breastfeeding?

[Nagustuhan mo ba]... ang binigay na suporta sa inyo para sa pagpapasuso?

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

**‘QA17\_L62’ [AL79] –**

[Did you like]... help getting a breast pump?

[Nagustuhan mo ba]... ang tulong na ibinigay sa inyo para makakuha ng isang breast pump?

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

**‘QA17\_L63’ [AL80] –**

[Did you like]... information on how to get health care services?

[Nagustuhan mo ba]... ang mga impormasyon kung paano makakuha ng mga mga serbisyo sa pangangalaga sa kalusugan?

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

**‘QA17\_L64’ [AL81] –**

[Did you like]... information on community programs?

[Nagustuhan mo ba]... ang impormasyon tungkol sa mga programa sa komunidad?

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

**‘QA17\_L65’ [AL82] –**

[Did you like]... one-on-one education?

[Nagustuhan mo ba]... ang one-on-one na pagtuturo?

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

**‘QA17\_L66’ [AL83] –**

[Did you like]... group classes?

[Nagustuhan mo ba]... ang mga klaseng panggrupo?

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

'QA17\_L67' [AL84] –

Did you like WIC benefits for any other reasons?

Nagustuhan mo ba ang mga benepisyo ng WIC para sa anumang iba pang mga dahilan?

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

**If = 2,-7,-8 go to AK23**

'QA17\_L68' [AL85] –

What were those reasons?

Ano ang mga kadahilanang iyon?

REDK\_AL85

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section M: Housing and Social Cohesion

**'QA17\_M1'** [AK23] –

These next questions are about your housing and neighborhood.

Tungkol sa inyong pabahay at kapitbahayan ang susunod na mga tanong.

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?

Nakatira ba kayo sa bahay, sa duplex, sa gusaling may 3 o higit pang unit, o sa mobile home?

**[IF NEEDED, SAY: "A duplex is a building with 2 units."]**

**[IF NEEDED, SAY: "Gusali na may dalawang unit ang duplex."]**

- ☐ 01 HOUSE
- ☐ 02 DUPLEX
- ☐ 03 BUILDING WITH 3 OR MORE UNITS
- ☐ 04 MOBILE HOME
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M2'** [AK25] –

Do you own or rent your home?

Pag-aari ba ninyo o inuupahanang inyong bahay?

- ☐ 01 OWN
- ☐ 02 RENT
- ☐ 03 OTHER ARRANGEMENT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_M3'** [PN\_AM37] - PN\_AM37

**If AAGE >= 65 AND AK25 = 1, Only ask 'QA17\_M3'**

**'QA17\_M3'** [AM37] –

Are you currently paying off a mortgage or loan on this home?

Kasalukuyan ka bang nagbabayad ng buwanang hulog o mortgage, o utang sa bahay na ito?

**[IF SPOUSE/PARTNER IS PAYING, CODE AS "YES"]**

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

**'QA17\_M4'** [AM14] –

About how long have you lived at your current address?

Humigit-kumulang, gaano katagal na kayong nakatira sa inyong kasalukuyang address?

**[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]**

'AM14M' [AM14M] - \_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]

'AM14Y' [AM14Y] - \_\_\_\_\_ YEARS [HR: 1 - AAGE]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_M5'** [PN\_AM15] -

**PROGRAMMING NOTE AM15 :**

**IF AM14 ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE AM19 ;  
ELSE CONTINUE WITH AM15**

**'QA17\_M5'** [AM15] –

About how long have you lived in your current neighbourhood

Humigit-kumulang, gaano katagal na kayong nakatira sa inyong kasalukuyang kapitbahayan?

**[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]**

'AM15M' [AM15M] - \_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]

'AM15Y' [AM15Y] - \_\_\_\_\_ YEARS [HR: 1 - AAGE]

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M6'** [AM38] –

The last time you moved, what was your main reason for moving?

Noong huli kayong lumipat, ano ang inyong pangunahing dahilan sa paglipat?

- ☐ 01 CHANGE IN MARITAL/RELATIONSHIP STATUS
- ☐ 02 TO ESTABLISH OWN HOUSEHOLD
- ☐ 03 FOR CHILD'S EDUCATION
- ☐ 04 TO ATTEND OR LEAVE COLLEGE
- ☐ 05 WORK RELATED
- ☐ 06 COULDN'T AFFORD MORTGAGE/RENT
- ☐ 07 OTHER HOUSING RELATED
- ☐ 08 BETTER NEIGHBORHOOD/LESS CRIME
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW



**'PN\_QA17\_M7' [PN\_AM19] -**

**PROGRAMMING NOTE AM19 :**

**IF AM19 THROUGH AK28 NOT ANSWERED IN CHILD INTERVIEW (CG39, CG40, CG41, CG34, CG42), THEN CONTINUE WITH AM19 ;  
ELSE GO TO AM36**

**'QA17\_M7' [AM19] –**

Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:

Sabihin sa akin kung talagang sang-ayon kayo, sang-ayon, di-sang-ayon, o talagang di-sangayon sa mga sumusunod na pahayag.

People in my neighborhood are willing to help each other.

Handang tumulong sa isa't-isa ang mga tao sa aking kapitbahayan.

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

**[IF NEEDED, SAY: ““Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang disang-ayon?”]**

**[DO NOT PROBE A “DON'T KNOW” RESPONSE.]**

- ☐ 01 STRONGLY AGREE
- ☐ 02 AGREE
- ☐ 03 DISAGREE
- ☐ 04 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M8' [AM20] –**

People in this neighborhood generally do NOT get along with each other.

Hindi nagkakasundo nang mabuti sa isa't-isa ang mga tao sa kapitbahayang ito.

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

**[IF NEEDED, SAY: ““Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang disang-ayon?”]**

**[DO NOT PROBE A “DON'T KNOW” RESPONSE.]**

- ☐ 01 STRONGLY AGREE
- ☐ 02 AGREE
- ☐ 03 DISAGREE
- ☐ 04 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M9' [AM21] –**

People in this neighborhood can be trusted.

Mapagkakatiwalaan ang mga tao sa kapitbahayang ito.

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

**[IF NEEDED, SAY: ““Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang disang-ayon?”]**

**[DO NOT PROBE A “DON'T KNOW” RESPONSE.]**

- ☐ 01 STRONGLY AGREE
- ☐ 02 AGREE
- ☐ 03 DISAGREE
- ☐ 04 STRONGLY DISAGREE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M10'** [AM35] –

You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble.

Maaasahan ninyo na babantayan ng mga adult sa kapitbahayang ito ang mga bata upang matiyak na ligtas at hindi napapasok sa gulo.

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]

[IF NEEDED, SAY: ““Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang disang-ayon?”]

[DO NOT PROBE A “DON'T KNOW” RESPONSE.]

- ☐ 01 STRONGLY AGREE
- ☐ 02 AGREE
- ☐ 03 DISAGREE
- ☐ 04 STRONGLY DISAGREE
- ☐ 05 NOT APPLICABLE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_M11'** [AK28] –

Do you feel safe in your neighborhood...

Panatag ba ang pakiramdam ninyo sa inyong kapitbahayan...

- ☐ 01 All of the time,
- ☐ 01 palagi,
- ☐ 02 Most of the time,
- ☐ 02 kadalasan,
- ☐ 03 Some of the time, or
- ☐ 03 paminsan- minsan, o
- ☐ 04 None of the time
- ☐ 04 hindi kailanman?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_M12'** [PN\_AM36] - PN\_AM36

**IF AM36 WAS ASKED IN CHILD INTERVIEW, THEN AM36 = KAM36, AND SKIP TO SECTION P  
ELSE CONTINUE WITH AMC36**

**'QA17\_M12'** [AM36] –

In the past 12 months, have you done any volunteer work or community service that you have not been paid for?

Nitong nakaraang 12 buwan, mayroon ka bang ginawang boluntaryong trabaho o serbisyo sa pamayanan na hindi ka pa nababayaran?

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

**'PN\_QA17\_M13'** [PN\_AM41] -  
**PROGRAMMING NOTE AM41 :**  
**IF AA5E = 9 (JAPANESE) OR AA5F = 38 (JAPANESE), THEN CONTINUE WITH AM41 ;**  
**ELSE GO TO AF86 ;**

**'QA17\_M13'** [AM41] –

In the past 12 months, have you donated money to a charity or non-profit organization?

Nitong nakaraang 12 buwan, nagbigay ba kayo ng abuloy sa isang samahang pangkawangggawa o sa isang hindi pinagkakakitaang samahan?

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

**'QA17\_M14'** [AM42] –

In the next 12 months, how likely are you to donate money to a charity or non-profit organization? Are you...

Sa susunod na 12 buwan, gaano ang posibilidad na magbibigay kayo ng abuloy sa isang samahang pangkawangggawa o sa isang hindi pinagkakakitaang samahan? Ito ba ay...

- ☐ 01 Very likely
- ☐ 01 Malamang na malamang
- ☐ 02 Somewhat likely
- ☐ 02 Medyo malamang
- ☐ 03 A little likely, or
- ☐ 03 Malamang nang kaunti
- ☐ 04 Not likely
- ☐ 04 Hindi malamang
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section P: Voter Engagement

**'PN\_QA17\_S1'** [PN\_AP70] - PN\_AP70

**PROGRAMMING NOTE AP70:**

**IF AH39=1 (CITIZEN) OR [IF AH33 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS)], THEN CONTINUE WITH AP70;  
ELSE GO TO AF86;**

**'QA17\_S1'** [AP70] –

Are you currently registered to vote?

Kasalukuyan ka bang nakarehistro para bumoto?

- ☐ 01 YES, REGISTERED
- ☐ 02 NOT REGISTERED
- ☐ 03 NOT SURE IF REGISTERED
- ☐ 04 NOT ELIGIBLE TO VOTE/REGISTER
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 1, -7, -8, goto 'QA17\_P3'**

**If = 4, goto 'QA17\_S1'**

**'QA17\_P2'** [AP71] –

What is the main reason why you are not registered to vote?

Ano ang pangunahing dahilan kung bakit hindi ka nakarehistro para bumoto?

- ☐ 01 TOO BUSY
- ☐ 02 VOTING DOESN'T MAKE A DIFFERENCE
- ☐ 03 I DON'T KNOW HOW
- ☐ 04 I DON'T KNOW WHERE TO GO TO REGISTER
- ☐ 05 LANGUAGE BARRIER
- ☐ 06 I'M NOT ELIGIBLE
- ☐ 07 I DON'T KNOW ENOUGH ABOUT THE ISSUES
- ☐ 08 I DON'T KNOW ENOUGH ABOUT THE CANDIDATES
- ☐ 09 I DON'T LIKE ANY OF THE CANDIDATES
- ☐ 91 OTHER (SPECIFY: \_\_\_\_\_)
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 6, goto 'QA17\_S1'**

**'QA17\_P3'** [AP72] –

Did you vote in the last general elections in November 2016?

Bumoto ka ba sa mga nakaraang pangkalahatang eleksyon noong Nobyembre 2016?

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

**'QA17\_P4' [AP73] –**

How often do you vote in presidential elections?

Gaano ka kadalas bumoboto sa mga eleksyon para sa presidente?

- ☐ 01 Always,
- ☐ 01 palagi,
- ☐ 02 Sometimes, or
- ☐ 02 paminsan- minsan, o
- ☐ 03 Never?
- ☐ 03 Hindi kailanman
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_P5' [AP74] –**

How often do you vote in state elections, such as for Governor or state proposition?

Gaano ka kadalas bumoboto sa mga eleksyon ng estado, gaya ng para sa Gorbenador o proposisyon sa estado?

- ☐ 01 Always,
- ☐ 01 palagi,
- ☐ 02 Sometimes, or
- ☐ 02 paminsan- minsan, o
- ☐ 03 Never?
- ☐ 03 Hindi kailanman
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'QA17\_P6' [AP75] –**

How often do you vote in local elections, such as for Mayor or school board?

Gaano ka kadalas bumoboto sa mga lokal na eleksyon, gaya ng para sa Mayor o lupon ng paaralan?

- ☐ 01 Always,
- ☐ 01 palagi,
- ☐ 02 Sometimes, or
- ☐ 02 paminsan- minsan, o
- ☐ 03 Never?
- ☐ 03 Hindi kailanman
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

## Section S: Suicide Ideation and Attempts

**'QA17\_S1'** [AF86] –

The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

Ang susunod na bahagi ay tungkol sa mga iniisip na pananakit sa sarili. Sa uulitin, kung may anumang tanong na nakakagulo sa inyo, hindi ninyo kailangang sagutin iyon.

Have you ever seriously thought about committing suicide?

May pagkakataon ba kailanman na seryoso ninyong pinag-isipan na magpakamatay?

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

**If = 2, -7, -8, goto 'PN\_QA17\_N1'**

**'QA17\_S2'** [AF87] –

Have you seriously thought about committing suicide at any time in the past 12 months?

May pagkakataon ba kailanman na seryoso ninyong pinag-isipan ang pagpapakamatay nitong nakaraang 12 buwan?

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

**If = 2, -7, -8, goto 'QA17\_S4'**

**'QA17\_S3'** [AF91] –

Have you seriously thought about committing suicide at any time in the past 2 months?

May pagkakataon bang seryoso ninyong pinag-isipan ang pagpapakamatay kailanman nitong nakaraang 2 buwan?

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

**'QA17\_S4'** [AF88] –

Have you ever attempted suicide?

Nagtangka na ba kayong magpakamatay kailanman?

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

**'PN\_QA17\_S5' [PN\_AF89] -**

**PROGRAMMING NOTE AF89 :**

**IF AF87 = (2, -7, -8) AND AF88 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**IF AF91 = (2, -7, -8) AND AF88 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**IF AF91 = 1 AND AF88 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**ELSE CONTINUE WITH AF89**

**'QA17\_S5' [AF89] –**

Have you attempted suicide at any time in the past 12 months?

Nagtangka na ba kayong magpakamatay kailanman nitong nakaraang 12 buwan?

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

**'SUICIDE RESOURCE:' [SUICIDE RESOURCE:] -**

**SUICIDE RESOURCE:**

We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.] The number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.] The number is 1-800-273-TALK (8255).

Or, you can visit a website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org). [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

**'POST\_SUICIDE RESOURCE' [POST\_SUICIDE RESOURCE] -**

**POST-NOTE FOR SUICIDE RESOURCE:**

**IF AF87 = (2, -7, -8) AND AF88 = (2, -7, -8) THEN SKIP TO PN AH42 (NEXT SECTION); ELSE CONTINUE**

**'QA17\_S6' [AF90] –**

Would you like to discuss your thoughts with this person or would you like to continue with the survey?

Gusto ba ninyong pag-usapan ang mga iniisip ninyo sa taong ito?

- ☐ 01 DISCUSS THOUGHTS WITH PERSON
- ☐ 02 CONTINUE WITH SURVEY
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, -7, -8, goto 'PN\_QA17\_N1'**

## Section N: Demographic Information Part III and Closing

**'PN\_QA17\_N1' [PN\_AH42] -**

**PROGRAMMING NOTE AH42 :**

**IF AH42 WAS ASKED IN THE CHILD INTERVIEW, THEN AH42 = KAH42, AND SKIP TO AM33 :**

**IF SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT), SKIP TO AO1**

**IF SR ≠ AR (SCREENER RESPONDENT IS NOT THE ADULT RESPONDENT), CONTINUE WITH AH42 ;**

**'QA17\_N1' [AH42] –**

Just a few final questions and then we are done.

Ilang pangwakas na tanong na lang at tapos na tayo.

To be sure we are covering the entire state, what county do you live in?

Upang matiyak na nasasakop namin ang buong estado, {mangyaring sabihin kung saang county kayo nakatira/saang county kayo nakatira?}

- ☐ 01 ALAMEDA
- ☐ 02 ALPINE
- ☐ 03 AMADOR
- ☐ 04 BUTTE
- ☐ 05 CALAVERAS
- ☐ 06 COLUSA
- ☐ 07 CONTRA COSTA
- ☐ 08 DEL NORTE
- ☐ 09 EL DORADO
- ☐ 10 FRESNO
- ☐ 11 GLENN
- ☐ 12 HUMBOLDT
- ☐ 13 IMPERIAL
- ☐ 14 INYO
- ☐ 15 KERN
- ☐ 16 KINGS
- ☐ 17 LAKE
- ☐ 18 LASSEN
- ☐ 19 LOS ANGELES
- ☐ 20 MADERA
- ☐ 21 MARIN
- ☐ 22 MARIPOSA
- ☐ 23 MENDOCINO
- ☐ 24 MERCED
- ☐ 25 MODOC
- ☐ 26 MONO
- ☐ 27 MONTEREY
- ☐ 28 NAPA
- ☐ 29 NEVADA
- ☐ 30 ORANGE
- ☐ 31 PLACER
- ☐ 32 PLUMAS
- ☐ 33 RIVERSIDE
- ☐ 34 SACRAMENTO
- ☐ 35 SAN BENITO
- ☐ 36 SAN BERNARDINO
- ☐ 37 SAN DIEGO
- ☐ 38 SAN FRANCISCO
- ☐ 39 SAN JOAQUIN
- ☐ 40 SAN LUIS OBISPO
- ☐ 41 SAN MATEO
- ☐ 42 SANTA BARBARA
- ☐ 43 SANTA CLARA
- ☐ 44 SANTA CRUZ



- ☐ 45 SHASTA
- ☐ 46 SIERRA
- ☐ 47 SISKIYOU
- ☐ 48 SOLANO
- ☐ 49 SONOMA
- ☐ 50 STANISLAUS
- ☐ 51 SUTTER
- ☐ 52 TEHAMA
- ☐ 53 TRINITY
- ☐ 54 TULARE
- ☐ 55 TUOLUMNE
- ☐ 56 VENTURA
- ☐ 57 YOLO
- ☐ 58 YUBA
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_N2' [PN\_AO1] -**

**PROGRAMMING NOTE AO1 :**

**IF ADVANCE LETTER SENT AND R'S ADDRESS IS NOT A P.O. BOX, ASK AO1 ;**

**IF SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT) DISPLAY "Just a few final questions and then we are done.";**

**ELSE GO TO AM7**

**'QA17\_N2' [AO1] -**

{Just a few final questions and then we are done.}

{Ilang pangwakas na tanong na lang at tapos na tayo.}

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.

Ala-swerteng napili ng computer ang inyong phone number para sa pagsusuring ito. Napagtugma namin ang address sa inyong phone number upang magpadala ng sulat sa inyong bahay na nagpapaliwanag ng layunin nitong pagsusuri. Upang matulungan kaming maintindihan nang mas mabuti ang kapaligiran na inyong tinitirahan at kung paano maaaring maka-apekto ito sa inyong kalusugan, gusto naming tiyakin ang inyong address. Pananatiliing kompidensyal ang impormasyong ito at sisirain pagkatapos makumpleto ang buong pagsusuri.

Do you now live at {R's ADDRESS AND STREET}?

Nakatira ba kayo ngayon sa {R's ADDRESS AND STREET}?

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

**If = 1, goto 'QA17\_N6'**

**'PN\_QA17\_N3' [PN\_AM7] -**  
**PROGRAMMING NOTE AM7 :**  
**IF R'S ADDRESS IS A P.O. BOX AND SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT),**  
**DISPLAY "Just a few final questions and then we are done".**

**'QA17\_N3' [AM7] –**

{Just a few final questions and then we are done.}

{Ilang pangwakas na tanong na lang at tapos na tayo.}  
 What is your zip code?

Ano ang inyong zip code?

\_\_\_\_\_ ZIP CODE  
☐ -7 REFUSED  
☐ -8 DON'T KNOW

**'QA17\_N4' [AO2] –**

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.

Upang matulungan kaming maintindihan nang mas mabuti ang kapaligiran na inyong tinitirahan at kung paano maaaring maka-apekto ito sa inyong kalusugan, gusto naming tiyakin ang inyong address. Pananatiliing kompidensyal ang impormasyong ito at sisirain pagkatapos makumpleto ang buong pagsusuri.

'AO2ANUM' [AO2ANUM] - \_\_\_\_\_ HOUSE ADDRESS NUMBER

'AO2ADDR' [AO2ADDR] - \_\_\_\_\_ NAME OF STREET (VERIFY SPELLING)

**If TRUE, goto 'QA17\_N6'**

'AO2STTY' [AO2STTY] - \_\_\_\_\_ STREET TYPE

'AO2ADD2' [AO2ADD2] - \_\_\_\_\_ APT. NO  
☐ -7 REFUSED  
☐ -8 DON'T KNOW

**'PN\_QA17\_N5' [PN\_AM8] -**  
**PROGRAMMING NOTE AM8 :**  
**IF ADDRESS WAS GIVEN IN AO2 , SKIP TO AM9 ;**  
**ELSE CONTINUE WITH AM8**

**'QA17\_N5' [AM8] –**

Can you tell me just the name of the street you live on?

'TEXT\_NASTR\_AM8' [TEXT\_NASTR\_AM8] - Can you tell me just the name of the street you live on?

Masasabi ba ninyo sa akin ang pangalan lamang ng kalye na tinitirahan ninyo?

☐ -7 REFUSED  
☐ -8 DON'T KNOW

'QA17\_N6' [AM9] –

And what is the name of the street down the corner from you that crosses your street?

'TEXT\_NAXSTR\_AM9' [TEXT\_NAXSTR\_AM9] - TEXT\_NAXSTR\_AM9

At ano ang pangalan ng kalye sa kanto na tumatawid sa kalye ninyo?

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_N7' [PN\_AM33] -

**PROGRAMMING NOTE AM33 :**

**IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE AM10 ;  
ELSE CONTINUE WITH AM33**

'QA17\_N7' [AM33] –

I'm won't ask you for the number, but do you have a working cell phone?

Hindi ko hihilingin ang inyong number, pero mayroon ba kayong gumaganang cell phone?

**[CODE "SHARES CELL PHONE" ONLY IF VOLUNTEERED]**

- ☐ 01 YES
- ☐ 02 NO
- ☐ 03 SHARES CELL PHONE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, -7, -8, goto 'PN\_QA17\_N9'**

'QA17\_N8' [AN10] –

How many different cell phone numbers do you currently use for personal calls?

Ilang iba-ibang cell phone phone number ang ginagamit ninyo sa kasalukyan para sa mga personal na tawag?

\_\_\_\_\_ CELL PHONE NUMBERS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

'PN\_QA17\_N9' [PN\_AN6] -

**PROGRAMMING NOTE AN6 :**

**IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE AM34 ;  
ELSE CONTINUE WITH AN6**

'QA17\_N9' [AN6] –

Is there a regular or landline telephone in your household?

Mayroon bang regular na telepono o landline sa inyong pamamahay?

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

**If = 2, -7, -8, goto 'PN\_QA17\_N13'**

**'QA17\_N10'** [AN7] –

Is that telephone for personal use or business use only?

Ang teleponong iyon ba ay para sa personal na pangangailangan o pangnegosyong pangangailangan lamang?

- ☐ 01 PERSONAL USE ONLY
- ☐ 02 BUSINESS USE ONLY
- ☐ 03 BOTH PERSONAL USE AND BUSINESS USE
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**If = 2, goto 'PN\_QA17\_N13'**

**'QA17\_N11'** [AN11] –

How many telephone lines do you have for personal use?

Ilang linya ng telepono mayroon kayo para sa personal na gamit?

\_\_\_\_\_ REGULAR OR LANDLINE NUMBERS

- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_34'** [PN\_34] -

**PROGRAMMING NOTE AM34 :**

**IF AM33 = 1 (YES) OR 3 (SHARES CELL PHONE), OR AN7 = 1 (HAS A LANDLINE FOR PERSONAL USE) OR 3 (LANDLINE IS FOR PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH AM34 ;  
ELSE SKIP TO PROGRAMMING AM10**

**'QA17\_N12'** [AM34] –

Of all the telephone calls that you receive, are...

Sa lahat ng tawag sa telepono na inyong natatanggap, ...

- ☐ 01 All or almost all calls received on a cell phone,\
- ☐ 01 Lahat ba o halos lahat ng tawag ay natatanggap sa mga cell phone,
- ☐ 02 Some on cell phones & some on regular phones, or
- ☐ 02 Ang ilan ba ay natatanggap sa cell phone at ang ilan ay sa regular na mga telepono, o
- ☐ 03 Very few or none on cell phones
- ☐ 03 Kaunting-kaunti o wala sa mga cell phone?
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_QA17\_N13' [PN\_AM10] -**  
**PROGRAMMING NOTE AM10 :**  
**IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;**  
**ELSE CONTINUE WITH AM10**

**'QA17\_N13' [AM10] –**

Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?

Sa wakas, sa palagay ba ninyo papayag kayo sa isang follow-up sa survey na ito sa hinaharap? Sa wakas, sa palagay ba ninyo papayag kayo sa isang follow-up sa survey na ito sa hinaharap?

- ☐ 01 YES
- ☐ 02 MAYBE/PROBABLY YES
- ☐ 03 DEFINITELY NOT
- ☐ -7 REFUSED
- ☐ -8 DON'T KNOW

**'PN\_SR2' [PN\_SR2] -**  
**PROGRAMMING NOTE SUICIDE RESOURCE 2:**  
**IF AF90 = (2, -7, -8),**  
**AND [AF91 = 1 OR (AF91 = 2, -7, -8 AND AF89 =1)], THEN CONTINUE WITH SUICIDE RESOURCE 2;**  
**ELSE GO TO PROGRAMMING NOTE CLOSE1**

**'SR2' [SR2] -**

SUICIDE RESOURCE 2:

As I mentioned earlier, if you'd like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.]The toll-free number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

Or you can visit their website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)[IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

**'QA17\_N14' [AN8] –**

Would you like to speak with someone now?

Gusto ba ninyong makipag-usap sa isang tao ngayon?

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

**If = 2, -7, -8, goto 'CLOSE1'**

'PN\_CLOSE1&2' [PN\_CLOSE1&2] -

**PROGRAMMING NOTE CLOSE1 AND CLOSE2:**

**IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;  
ELSE CONTINUE WITH CLOSE1**

'CLOSE1' [CLOSE1] - Let me check to see if there is anyone else.

**If true, goto 'HH\_SELECT'**

Titingnan ko kung mayroon sinumang iba pang kailangan naming kausapin

'CLOSE2' [CLOSE2] - Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. Ninez Ponce, the Principal Investigator. Dr. Ponce can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.

Salamat. Napakamahalaga sa amin ang inyong panahon at tulong. Nakatulong kayo sa napakamahalagang survey sa buong estado. Kung mayroon kayong anumang mga katanungan tungkol sa pagsusuri, mangyaring kontakin si Dr. Ninez Ponce, ang namumuno sa pagsusuri. Maaari kayong makipag-ugnay kay Dr. Ponce sa 1-866-275-2447. Salamat. Good-bye.