



# CHIS 2015

## Child Questionnaire

### Version 2.72- Chinese

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(Children Ages 0-11 Answered by Adult Proxy Respondent)

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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 2015 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

## SECTION A – DEMOGRAPHICS PART I, HEALTH CONDITIONS

**PROGRAMMING NOTE QC15\_A1:**
**SET CADATE = CURRENT DATE (YYYYMMDD);**
**IF AR = SKA AND GENDER OF CHILD IS KNOWN, SKIP TO QC15\_A2;**
**ELSE CONTINUE WITH QC15\_A1**

**QC15\_A1** Some of the questions are based on (CHILD's) personal traits, like his or her age. So I will first ask you a few brief background questions.  
 某些問題是基於{} 的個人特徵而提出的, 例如{CHILD} 的年齡。因此, 我會首先向您提出幾個簡單的背景問題。

Is (CHILD) male or female?

{CHILD} 是男性還是女性?

**CA1**

MALE .....1  
 FEMALE .....2  
 REFUSED ..... -7

**QC15\_A2** What is {his/her} date of birth?  
 請告訴我 {他/她} 出生日期。

**CA2MON**

\_\_\_\_\_ MONTH [HR: 1-12]

1. JANUARY	7. JULY
2. FEBRUARY	8. AUGUST
3. MARCH	9. SEPTEMBER
4. APRIL	10. OCTOBER
5. MAY	11. NOVEMBER
6. JUNE	12. DECEMBER

**CA2DAY**

\_\_\_\_\_ DAY [HR: 1-31]

**CA2YR**

\_\_\_\_\_ YEAR [HR: 2004-2015]

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

**PROGRAMMING NOTE QC15\_A3:**
**IF QC15\_A2 = -7 OR -8 (REFUSED/DON'T KNOW) CONTINUE WITH QC15\_A3;**
**ELSE SKIP TO QC15\_A4**

**QC15\_A3** How old is {he/she}?  
 {He/she} 多大歲數了?

**CA3**

**[INTERVIEWER NOTE: FOR AGES ABOVE 4 YRS OR 48 MO, DO NOT RECORD MONTHS OR PARTIAL YRS]**

\_\_\_\_\_ YEARS  
 \_\_\_\_\_ MONTHS

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

**QC15\_A4** About how tall is (CHILD) now without shoes?

{CHILD} 目前不穿鞋大約有多高?

**CA4F/CA4I**

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

[IF NEEDED, SAY: "大概估計的數字就可以。"]

**CA4M/CA4C**

\_\_\_\_\_ FEET \_\_\_\_\_ INCHES

**CA4FMT**

\_\_\_\_\_ METERS \_\_\_\_\_ CENTIMETERS

FEET/INCHES .....1  
METERS/CENTIMETERS .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**QC15\_A5** About how much does (CHILD) weigh now without shoes?

{CHILD} 目前不穿鞋大約有多重?

**CA5P**

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

[IF NEEDED, SAY: "大概估計的數字就可以。"]

**CA5K**

\_\_\_\_\_ POUNDS

**CA5FMT**

\_\_\_\_\_ KILOGRAMS

POUNDS .....1  
KILOGRAMS .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QC15\_A5A:**

**IF CAGE > 3 YEARS GO TO PROGRAMMING NOTE QC15\_A6;**

**ELSE IF CAGE ≤ 3 YEARS CONTINUE WITH QC15\_A5A**

**QC15\_A5A** Was (CHILD) ever breastfed or fed breast milk?

(CHILD) 是否曾經被喂過母乳?

**CA14**

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

**[GO TO QC15\_A8]**

**[GO TO QC15\_A8]**

**[GO TO QC15\_A8]**

**QC15\_A5B** How old was (CHILD) when {he/she} stopped breastfeeding altogether?  
當(CHILD)完全停止被喂母乳時{他/她} 有多大年齡?

**CA15**

\_\_\_\_\_ DAYS  
\_\_\_\_\_ WEEKS  
\_\_\_\_\_ MONTHS  
\_\_\_\_\_ YEARS

STILL BREASTFEEDING ..... 93  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_A5C** How old was (CHILD) when you began giving {him/her} baby food or other solid foods?  
當(CHILD)開始吃嬰兒食物或其他固體食物時有多大年齡?

**CA16**

**[IF NEEDED SAY: "Solid food is anything other than milk, formula, juice, water, herbs or teas."]**

**[IF NEEDED SAY: 固體食物就是除了牛奶, 配方, 果汁, 水, 植物水或茶水的食品。]**

\_\_\_\_\_ MONTHS

NO SOLID FOOD YET ..... 93  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_A6:**

**IF CAGE < 5 YEARS GO TO QC15\_A8;**

**ELSE CONTINUE WITH QC15\_A6 AND IF CAGE = 5 YRS DISPLAY "Not including pre-school or nursery school,"**

**QC15\_A6** {Not including pre-school or nursery school,} Did (CHILD) attend school last week?  
{不包括學前班或托兒所, } (CHILD) 上週是否上學?

**CA42**

YES .....1 **[GO TO QC15\_A8]**  
NO .....2  
ON VACATION .....3  
HOME SCHOOLED .....4 **[GO TO QC15\_A8]**  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_A7:**

**IF CAGE = 5 YRS DISPLAY "Not including pre-school or nursery school,"**

**QC15\_A7** {Not including pre-school or nursery school,} Did (CHILD) attend school during the last school year?

{不包括學前班或托兒所,} (CHILD) 上個學年是否上學?

**CA43**

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

**QC15\_A8** In general, would you say (CHILD)'s health is excellent, very good, good, fair or poor?  
總的來說，您認為(CHILD)的健康狀況是極好、很好、較好、一般還是很差？

**CA6**

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

**QC15\_A9** Has a doctor ever told you that (CHILD) has asthma?  
是否有醫生曾經告訴您(CHILD)患有哮喘？

**CA12**

YES .....1  
NO .....2 [GO TO QC15\_A25]  
REFUSED .....-7 [GO TO QC15\_A25]  
DON'T KNOW .....-8 [GO TO QC15\_A25]

**QC15\_A10** Does {he/she} still have asthma?  
{他/她}是否依然患有哮喘病？

**CA31**

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

**QC15\_A11** During the past 12 months, has {he/she} had an episode of asthma or an asthma attack?  
在過去十二個月中，{他/她}是否曾經有過哮喘發作？

**CA32**

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



**PROGRAMMING NOTE QC15\_A12:**

**IF QC15\_A10 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) AND QC15\_A11 = 2, -7, OR -8 (NO, REFUSED, DON'T KNOW) GO TO QC15\_A16;  
ELSE CONTINUE WITH QC15\_A12**

**QC15\_A12** During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:  
在過去十二個月中, (CHILD)每隔多久會出現哮喘症狀, 例如咳嗽、  
氣喘、氣短、胸悶或粘痰? 您認為是.....

**CA12B**

Not at all, .....1  
過去十二個月中無任何症狀、 .....1  
Less than every month, .....2  
每月少於一次、 .....2  
Every month, .....3  
每月、 .....3  
Every week, or .....4  
每週、還是 .....4  
Every day? .....5  
每天? .....5  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_A13** During the past 12 months, has (CHILD) had to visit a hospital emergency room because of {his/her} asthma?

在過去十二個月中, (CHILD)是否曾因{他的/她的}哮喘病前往醫院急診室就診?

**CA33**

YES .....1  
NO .....2 [GO TO QC15\_A15]  
REFUSED ..... -7 [GO TO QC15\_A15]  
DON'T KNOW ..... -8 [GO TO QC15\_A15]

**QC15\_A14** Did you take (CHILD) to a hospital emergency room for {his/her} asthma because you were unable to see {his/her} doctor?

您是否曾經因{CHILD NAME /AGE/SEX}的哮喘病發作無法約見{him/her} 的醫生而  
將{him/her} 送到醫院急診室就診?

**CA48**

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

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

**QC15\_A15** During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?

在過去十二個月中，{他/她}曾經因哮喘住院一天或更長時間嗎？

**CA44**

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

**QC15\_A16** Is (CHILD) now taking a daily medication to control {his/her} asthma that was prescribed or given to you by a doctor?

(CHILD)目前是否每天服用控制{他的/她的}哮喘的醫生處方藥物或醫生給的藥物？

**CA12A**

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

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

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

**PROGRAMMING NOTE QC15\_A17:**

**IF QC15\_A10 = 1 (YES, STILL HAS ASTHMA) OR QC15\_A11 = 1 (YES, EPISODE IN LAST 12 MOS), GO TO QC15\_A21;**

**ELSE CONTINUE WITH QC15\_A17**

**QC15\_A17** During the past 12 months, how often has (CHILD) had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say:

在過去十二個月中，(CHILD)出現哮喘症狀的頻率有多高？例如，咳嗽、喘鳴、呼吸急促、胸悶或黏痰。您認為是.....

**CA40**

Not at all, .....1  
 過去十二個月中無任何症狀、 .....1  
 Less than every month, .....2  
 每月少於一次、 .....2  
 Every month, .....3  
 每月、 .....3  
 Every week, or .....4  
 每週、還是 .....4  
 Every day? .....5  
 每天? .....5  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QC15\_A18** During the past 12 months, has (CHILD) had to visit a hospital emergency room because of {his/her} asthma?

在過去十二個月中，(CHILD)是否曾因{他的/她的}哮喘病而必須前往醫院急診室就診？

**CA41**

YES .....	1	
NO .....	2	[GO TO QC15_A20]
REFUSED .....	-7	[GO TO QC15_A20]
DON'T KNOW .....	-8	[GO TO QC15_A20]

**QC15\_A19** Did you take (CHILD) to a hospital emergency room for {his/her} asthma because you were unable to see {his/her} doctor?

您是否曾經因(CHILD)的哮喘病發作無法約見{他的/她的}醫生而將{他/她}送到醫院急診室就診？

**CA49**

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

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

**QC15\_A20** During the past 12 months, was {he/she} admitted to the hospital overnight or longer for {his/her} asthma?

在過去十二個月中，{他/她}曾經因哮喘住院一天或更長時間嗎？

**CA45**

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

**QC15\_A21** During the past 12 months, how many days of day care or school did (CHILD) miss due to asthma?

在過去十二個月中，(CHILD)因為哮喘病有多少天沒有上日託所或上學？

**CA34**

\_\_\_\_\_ NUMBER OF DAYS

CHILD NOT IN DAYCARE OR SCHOOL .....	93
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_A22** Have (CHILD'S) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} asthma?

(CHILD)的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便讓您瞭解如何護理{他的/她的}糖尿病？

**CA35**

YES .....	1	
NO .....	2	[GO TO QC15_A24]
REFUSED .....	-7	[GO TO QC15_A24]
DON'T KNOW .....	-8	[GO TO QC15_A24]

**QC15\_A23** Do you have a written or printed copy of this plan?

您是否有一份這項計劃的書面或打印版本？

**CA50**

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

[IF NEEDED, SAY: "「可以是電子版本或打印件。」"]

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

**QC15\_A24** How confident are you that you can control and manage (CHILD's) asthma? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?  
您對自己能夠控制與管理(CHILD 的)哮喘信心有多高？

您認為是很有信心、較有信心、不太有信心還是毫無信心？

**CA51**

VERY CONFIDENT .....1  
SOMEWHAT CONFIDENT .....2  
NOT TOO CONFIDENT .....3  
NOT AT ALL CONFIDENT .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_A25** Does (CHILD) currently have any physical, behavioral, or mental conditions that limit or prevent {him/her} from doing childhood activities usual for {his/her} age?

(CHILD)目前是否有任何身體、行為或精神症狀限制或阻止 {他/她} 參加適合{他的/她的}年齡的兒童活動？

**CA7**

YES .....1  
NO .....2 [GO TO QC15\_B1]  
REFUSED ..... -7 [GO TO QC15\_B1]  
DON'T KNOW ..... -8 [GO TO QC15\_B1]

**QC15\_A26** What condition does (CHILD) have?  
(CHILD)患有哪種病症?

**CA10A**

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

**[PROBE: “「還有其它嗎？」”]**

ADD/ADHD .....	1
ASPERGER'S SYNDROME .....	2
AUTISM.....	3
CEREBRAL PALSY .....	4
CONGENITAL HEART DISEASE.....	5
CYSTIC FIBROSIS .....	6
DIABETES .....	7
DOWN'S SYNDROME.....	8
EPILEPSY.....	9
DEAFNESS OR OTHER HEARING PROBLEM ...	10
MENTAL RETARDATION, OTHER THAN	
DOWN'S.....	11
MUSCULAR DYSTROPHY .....	12
NEUROMUSCULAR DISORDER.....	13
ORTHOPEDIC PROBLEM (BONES OR JOINTS)	14
SICKLE CELL ANEMIA .....	15
BLINDNESS OR OTHER VISION PROBLEM.....	16
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_A27** Have (CHILD's) doctors or other medical providers worked with you to develop a plan so that you know how to take care of {his/her} (INSERT CONDITION(S) FROM QC15\_A26)?

(CHILD)的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便您瞭解如何控制{他的/她的}(INSERT CONDITION(S) FROM QC13\_A27)?

**CA55**

YES .....	1	
NO.....	2	<b>[GO TO QC15_A29]</b>
REFUSED .....	-7	<b>[GO TO QC15_A29]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_A29]</b>

**QC15\_A28** Do you have a written or printed copy of this plan?  
您是否有一份這項計劃的書面或打印版本？

**CA56**

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

**[IF NEEDED, SAY: “「這可以是電子版本或打印件。」”]**

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

**QC15\_A29**

How confident are you that you can control and manage (CHILD's) (INSERT CONDITION(S) FROM QC15\_A26)? Would you say you are very confident, somewhat confident, not too confident, or not at all confident?

您對自己能夠控制與管理(CHILD 的) (INSERT CONDITION(S) FROM QC13\_A27) 信心有多強? 您認為是很有信心、較有信心、不太有信心還是毫無信心?

**CA57**

VERY CONFIDENT .....	1
SOMEWHAT CONFIDENT .....	2
NOT TOO CONFIDENT .....	3
NOT AT ALL CONFIDENT .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

## SECTION B – DENTAL HEALTH

### PROGRAMMING NOTE QC15\_B1:

IF CAGE > 2 YEARS, GO TO QC15\_B2 AND DISPLAY “Now I’m going to ask about (CHILD)’s dental health”;

ELSE CONTINUE WITH QC15\_B1

**QC15\_B1** These questions are about (CHILD)’s dental health. Does (CHILD) have any teeth yet?  
 下面是有關(CHILD)的牙齒的問題。(CHILD)有沒有長牙？

**CC1**

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

**QC15\_B2** Now I’m going to ask about (CHILD)’s dental health.  
 下面是有關(CHILD)的牙齒健康的問題。

About how long has it been since your child last visited a dentist or dental clinic? Include dental hygienists and all types of dental specialists.

您的孩子最後一次看牙醫或去牙科診所大約是多久以前？請包括牙科保健員及各類牙科專家。

**CC5**

HAS NEVER VISITED .....	0
6 MONTHS AGO OR LESS .....	1
MORE THAN 6 MONTHS UP TO 1 YEAR AGO .....	2
MORE THAN 1 YEAR UP TO 2 YEARS AGO .....	3
MORE THAN 2 YEARS UP TO 5 YEARS AGO .....	4
MORE THAN 5 YEARS AGO .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_B3:**

**IF QC15\_B2 = 0 (HAD NEVER VISITED) or  $\geq 3$  (VISITED MORE THAN A YEAR AGO) CONTINUE WITH QC15\_B3;  
ELSE SKIP TO QC15\_B4;**

**IF QC15\_B2 = 0 (HAS NEVER VISITED), DISPLAY “never”;  
ELSE IF QC15\_B2  $\geq 3$  DISPLAY “not” AND “in the past year”**

**QC15\_B3** What is the main reason your child has {never/not} visited a dentist {in the past year}?  
您的孩子去年沒有看牙醫的主要原因是什麼?

**CB23**

NO REASON TO GO/NO PROBLEMS .....1  
NOT OLD ENOUGH .....2  
COULD NOT AFFORD IT/TOO EXPENSIVE/  
NO INSURANCE.....3  
FEAR, DISLIKES GOING .....4  
DO NOT HAVE/KNOW A DENTIST .....5  
CANNOT GET TO THE OFFICE/CLINIC .....6  
NO DENTIST AVAILABLE/NO APPOINTMENTS  
AVAILABLE .....7  
DIDN'T KNOW WHERE TO GO .....8  
HOURS NOT CONVENIENT .....9  
SPEAK A DIFFERENT LANGUAGE ..... 10  
OTHER..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_B4** Do you now have any type of insurance that pays for part or all of your child's dental care?  
您目前是否有任何類型的保險可支付 {CHILD NAME /AGE/SEX} 牙科護理的部分或全部費用?

**CC7A**

**[IF NEEDED, SAY: “Include dental insurance, prepaid dental plans such as HMOs, or government plans such as Medi-Cal or Healthy Families”]**

**[IF NEEDED, SAY: “「包括牙科保險、預付款牙科計劃，例如 HMO，或政府計劃，例 Medi-Cal 或 Healthy Families。」”]**

YES .....1  
NO .....2 **[GO TO QC15\_B6]**  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_B5** During the past 12 months, was there any time when {he/she} had no dental insurance at all?

在過去的十二個月中，{他/她}是否有過沒有牙科保險的時候？

**CB25**

YES .....1  
NO .....2 **[GO TO QC15\_B7]**  
REFUSED ..... -7 **[GO TO QC15\_B7]**  
DON'T KNOW ..... -8 **[GO TO QC15\_B7]**



**PROGRAMMING NOTE QC15\_B6:**

**IF QC15\_B4=2 (NO CURRENT DENTAL INSURANCE) OR QC15\_B5 = 1 (HAD NO DENTAL INSURANCE AT SOME TIME IN THE PAST 12 MONTHS) CONTINUE WITH QC15\_B6;  
ELSE GO TO QC15\_B7**

**QC15\_B6**

What is the ONE MAIN reason (CHILD) {does not have any insurance/did not have any dental insurance during the time {he/she} wasn't covered}?

{在那段(CHILD)沒有任何保險/沒有牙醫保險時間裏, }{他/她}沒有保險的一個主要原因是什麼?

**CB26**

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

**QC15\_B7**

During the past 12 months, was there any time when (CHILD) needed dental care, including checkups, but didn't get it?

在過去的十二個月中, 是否有(CHILD)需要牙科護理, 包括牙科檢查, 但沒有得到的時候?

**CB27**

YES .....1  
NO .....2 [GO TO QC15\_B9]  
REFUSED ..... -7 [GO TO QC15\_B9]  
DON'T KNOW ..... -8 [GO TO QC15\_B9]

**QC15\_B8** What is the ONE MAIN reason {he/she} didn't get the dental care?  
{他/她}沒有得到牙科護理的一個主要原因是什麼？

**CB28**

COULDN'T GET APPOINTMENT .....1  
MY INSURANCE NOT ACCEPTED .....2  
INSURANCE DID NOT COVER .....3  
LANGUAGE PROBLEMS .....4  
TRANSPORTATION PROBLEMS .....5  
HOURS NOT CONVENIENT .....6  
NO CHILD CARE FOR CHILDREN AT HOME .....7  
FORGOT OR LOST REFERRAL .....8  
I DIDN'T HAVE TIME .....9  
COULDN'T AFFORD/COST TOO MUCH ..... 10  
NO INSURANCE ..... 11  
OTHER (SPECIFY: ..... ) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_B9** During the past 12 months, did (CHILD) have to visit a hospital emergency because of a dental problem?

在過去的 12 個月中，(CHILD)是否曾因牙科問題必須去醫院的急診處？

**CB29**

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

**QC15\_B10** During the past 12 months, did (CHILD) have to visit an urgent care clinic because of a dental problem?

在過去的十二個月中，(CHILD)是否曾因牙科問題去緊急護理診所(也就是 urgent care clinic)？

**CB30**

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

**PROGRAMMING NOTE QC15\_B11:**  
**IF CAGE ≥ 6, SKIP TO SECTION C;**  
**ELSE CONTINUE WITH QC15\_B11**

**QC15\_B11** When (CHILD NAME/AGE/SEX) goes to sleep or takes a nap, does {he/she} sleep with a bottle in {his/her} mouth?

(CHILD NAME/AGE/SEX) 睡覺或小睡時，嘴裏會不會含著奶瓶嘴？

**CB31**

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

**[SKIP TO SECTION C]**  
**[SKIP TO SECTION C]**  
**[SKIP TO SECTION C]**

**QC15\_B12** What is usually in the bottle; for example, mother's milk, regular milk, chocolate milk, water, juice, or another drink with sugar in it?

奶瓶裏通常裝的是什麼; 例如, 母乳、牛奶、巧克力奶、水、果汁、或其他含糖飲料?

**CB32**

MOTHER'S MILK .....	1
REGULAR MILK .....	2
CHOCOLATE MILK, JUICE, OR SUGARY DRINK.....	3
WATER .....	4
OTHER (SPECIFY: _____).....	91
REFUSED .....	-7
DON'T KNOW .....	-8

## SECTION C – DIET, PHYSICAL ACTIVITY, PARK USE

### PROGRAMMING NOTE QC15\_C1:

IF CAGE < 2 YEARS, GO TO PROGRAMMING NOTE QC15\_C15;

ELSE CONTINUE WITH QC15\_C1

#### QC15\_C1

Now I'm going to ask you about the foods your child ate yesterday, including meals and snacks. Yesterday, how many servings of fruit, such as an apple or a banana, did {he/she} eat?

現在，我想向您提出一些有關您的孩子昨天吃的食物的問題，包括正餐及點心。(CHILD)昨天喝了幾杯或幾盒純果汁，例如橙汁或蘋果汁？

#### CC13

[IF NEEDED, SAY: "Servings are self-defined. A serving is the child's regular portion of this food."]

[IF NEEDED, SAY: "「份數」是自行定義的數量。一份是孩子通常吃這種食物的份量。"]

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-9]

REFUSED ..... -7

DON'T KNOW ..... -8

#### QC15\_C2

Yesterday, how many servings of vegetables like green salad, green beans, or potatoes did {he/she} have? Do not include fried potatoes.

昨天，{他/她}吃了幾份其他蔬菜，例如青菜沙拉、青豆或馬鈴薯？請勿包括油炸薯片。

#### CC31

\_\_\_\_\_ SERVINGS [HR: 0-20; SR 0-4]

REFUSED ..... -7

DON'T KNOW ..... -8

#### QC15\_C3

[Yesterday,] how many glasses or cans of soda that contain sugar, such as Coke, did your child drink? Do not include diet soda.

您的孩子[昨天]喝了多少杯或多少罐含糖汽水，例如可樂？請不要包括低卡節食汽水。

#### CC49

[IF NEEDED, SAY: "Do not include canned or bottled juices or teas."]

[IF NEEDED, SAY: "「請不要包括罐裝或瓶裝果汁或茶。」"]

\_\_\_\_\_ GLASSES, CANS OR BOTTLES

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_C4** [Yesterday,] how many glasses or cans of sweetened fruit drinks, sports, or energy drinks, did your child drink?

您的孩子[昨天]喝了多少杯或多少罐含糖果汁飲料、運動或能量飲料？

**CC50**

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

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

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

\_\_\_\_\_ GLASSES, CANS, OR BOTTLES

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_C5** Now think about the *past week*. In the past 7 days, how many times did {he/she} eat fast food? Include fast food meals eaten at school or at home, or at fast food restaurants, carryout, or drive thru.

現在，請想一想上一週的情況。在過去七天內，{he/she}曾經幾次吃 快餐食品？請包括在學校、家中、快餐店、外賣店或無需下車的得來 速快餐店吃的快餐食品。

**CC32**

[IF NEEDED, SAY: “Such as food you get at McDonald’s, KFC, Panda Express or Taco Bell.”]

[IF NEEDED, SAY: “「例如，您在麥當勞、肯塔基炸雞店、熊貓快餐店 或塔可鐘（Taco Bell）購買的食品。」”]

\_\_\_\_\_ TIMES [HR: 0-20; SR 0-4]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C6:**

IF QC15\_A6 = 4 (HOME SCHOOLED LAST WEEK) OR IF QC15\_A7 = 3 (HOME SCHOOLED LAST YEAR), GO TO PROGRAMMING NOTE QC15\_C13;

ELSE IF QC15\_A6 = 1 (ATTENDED SCHOOL LAST WEEK), CONTINUE WITH QC15\_C6 AND DISPLAY “How many days in the past week”;

IF QC15\_A7 = 1 (ATTENDED SCHOOL LAST YEAR), CONTINUE WITH QC15\_C6 AND DISPLAY “During the school year, on how many days during a typical week”;

ELSE GO TO PROGRAMMING NOTE QC15\_C13

**QC15\_C6** Now I'm going to ask you about physical activity.  
現在，我要向你提出一些有關體育活動的問題。

{How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) walk home from school?

上一週有幾天 {CHILD} 從學校走路回家？

在學年內，在普通的一週 {CHILD} 有幾天從學校走路回家？

**CC40**

[INTERVIEWER NOTE: IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, “I’ll ask about those next.”]

[IF R SAYS CHILD BIKES OR SKATEBOARDS HOME, SAY, “「我接下來會向您提出這方面的問題。」”]

[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE’S HOME, AFTER-SCHOOL PROGRAM, ETC.]

\_\_\_\_\_ DAYS

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C7:**

IF QC15\_C6 = 0 (DAYS), -7, OR -8, GO TO QC15\_C8;

ELSE IF QC15\_C6 > 0 (DAYS) CONTINUE WITH QC15\_C7;

IF QC15\_A6 = 1 (ATTENDED SCHOOL LAST WEEK) DISPLAY “does”;

IF QC15\_A7 = 1 (ATTENDED SCHOOL LAST YEAR) DISPLAY “did”

**QC15\_C7** About how many minutes {did/does} it take {him/her} without any stops?  
如果不停下，{他/她} 大約需要多少分鐘可以走到？

**CC41**

\_\_\_\_\_ MINUTES

[GO TO QC15\_C9]

REFUSED ..... -7

[GO TO QC15\_C9]

DON'T KNOW ..... -8

[GO TO QC15\_C9]

**QC15\_C8** Could {he/she} walk home from school in 30 minutes or less?  
他/她能夠在30 分鐘以內從學校走到家嗎？

**CC42**

YES ..... 1

NO ..... 2

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_C9** {How many days in the past week/During the school year, on how many days during a typical week} did (CHILD) bike or skateboard home from school?

{上一週有幾天/在學年內，在普通的一週} (CHILD)有幾天騎自行車或滑滑板從學校回家？

**CC43**

**[INTERVIEWER NOTE: THIS INCLUDES KIDS WHO RIDE ROLLERBLADES, ROLLERSHOES OR NON-MOTORIZED SCOOTERS HOME FROM SCHOOL.]**  
**[IF CHILD DOES NOT GO DIRECTLY HOME FROM SCHOOL, INCLUDE # OF DAYS WALKED, ETC. TO CHILDCARE, RELATIVE'S HOME, AFTER-SCHOOL PROGRAM, ETC.]**

\_\_\_\_\_ DAYS

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C10:**

**IF QC15\_C9 = 0 (DAYS), -7 OR -8, GO TO PROGRAMMING NOTE QC15\_C11;**

**ELSE IF QC15\_C9 > 0 DAYS, CONTINUE WITH QC15\_C10;**

**IF QC15\_A6 = 1, DISPLAY “does”;**

**ELSE IF QC15\_A7 = 1, DISPLAY “did”**

**QC15\_C10** About how many minutes {did/does} it take {him/her} without any stops?

如果不停下，{他/她} 大約需要多少分鐘可以到家？

**CC44**

**[IF NEEDED, SAY: “To bicycle or skateboard home from school.”]**

**[IF NEEDED, SAY: “「從學校騎自行車或滑滑板回家。」”]**

\_\_\_\_\_ MINUTES **[GO TO PN QC15\_C12]**

REFUSED ..... -7

**[GO TO PN QC15\_C12]**

DON'T KNOW ..... -8

**[GO TO PN QC15\_C12]**

**PROGRAMMING NOTE QC15\_C11:**

**IF QC15\_C7 ≤ 30 MINUTES OR QC15\_C8 = 1 THEN GO TO PROGRAMMING NOTE QC15\_C12;**

**ELSE CONTINUE WITH QC15\_C11**

**QC15\_C11** Could {he/she} bike or skateboard home from school in 30 minutes or less?

{He/she} 能夠在30分鐘以內從學校騎自行車或滑滑板到家嗎？

**CC45**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C12:**

If QC15\_A6 = 1 (ATTENDED SCHOOL LAST WEEK) OR QC15\_A7 = 1 (ATTENDED SCHOOL LAST YEAR) THEN CONTINUE WITH QC15\_C12;  
ELSE SKIP TO PROGRAMMING NOTE QC15\_C13

**QC15\_C12** What is the name of the school (CHILD) goes to or last attended?  
{CHILD} 所上學校或最後上的學校的名稱是什麼?

**CB22**

**[INTERVIEWER NOTE: RECORD VERBATIM, ASK FOR SPELLING IF NECESSARY]**

\_\_\_\_\_ NAME OF SCHOOL

CHILD NOT IN SCHOOL .....0  
PRE-SCHOOL/DAYCARE .....1  
KINDERGARTEN .....2  
ELEMENTARY .....3  
INTERMEDIATE .....4  
JUNIOR HIGH .....5  
MIDDLE SCHOOL .....6  
CHARTER .....7  
OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C13:**

IF CAGE < 5, SKIP TO PN QC15\_C15;  
ELSE CONTINUE WITH QC15\_C15

**QC15\_C13** Not including school PE, on how many days of the past 7 days was (CHILD) physically active for at least 60 minutes total?  
請勿包括學校的體育課，在過去七天中，{CHILD} 有幾天每天至少總共進行60分鐘的身體活動？

**CC35**

\_\_\_\_\_ DAYS [HR: 0-7]

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

**QC15\_C14** During a typical week, on how many days is (CHILD) physically active for at least 60 minutes total per day? Do not include PE.  
在普通的一週中，{CHILD}有幾天每天至少總共運動 60 分鐘？請不要包括體育課。

**CC51**

**[IF NEEDED, SAY: "Add up the time (he/she) was active for each day of the past 7. Then tell me how many days (he/she) active for at least 60 minutes."]**

**[IF NEEDED, SAY: "「將他/她在過去七天中每天的運動時間相加。然後告訴我他/她有幾天每天至少運動 60 分鐘。」"]**

\_\_\_\_\_ DAYS [HR: 0-7]

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



**PROGRAMMING NOTE QC15\_C15****IF CAGE ≤ 1 YEAR GO TO PROGRAMMING NOTE QC15\_C16****ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC15\_C15****QC15\_C15**

The next questions are about the time {your child/CHILD} spends mostly sitting when {he/she} is not in school or doing homework. During the weekends, about how much time does {your child/CHILD} spend on a typical or usual weekend day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

在星期一至星期五期間，{CHILD} 通常在一天內坐 在那裡看電視、玩電子遊戲、與朋友聊天或做其他坐著的活動的時間 有多長？

**CC53**

\_\_\_\_\_ HOURS  
\_\_\_\_\_ MINUTES

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C16:****IF CAGE ≤ 1 YEAR GO TO PN QC15\_C17;****ELSE IF CAGE > 1 YEAR, CONTINUE WITH QC15\_C16****QC15\_C16**

During the weekdays, about how much time does {your child/CHILD} spend on a typical or usual week day sitting and watching TV, playing computer games, talking with friends or doing other sitting activities?

接下來的問題是有關當{CHILD NAME/AGE/SEX} 不在上學或不在做 裡的時間。

在週末，{CHILD NAME/AGE/SEX} 通常在什氹漁佢'釵 h 長？

**CC52**

\_\_\_\_\_ HOURS  
\_\_\_\_\_ MINUTES

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_C17:****IF CAGE < 1 GO TO QC15\_D1;****ELSE CONTINUE WITH QC15\_C****QC15\_C17**

Has (CHILD) been to a park, playground, or open space in the past 30 days?

在過去三十天中，{CHILD NAME/AGE/SEX} 是否曾經到公園去？

**CC37**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_C18**

Is there a park, playground, or open space within 30 minutes walking distance of your home?

在你的住處步行30分鐘?可到的地方是否有公園、遊樂運動場或開闊 的空間？

**CC36**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_C19** Do you strongly agree, agree, disagree, or strongly disagree with the following statement?  
 您對以下陳述是極為贊成、贊成、不贊成還是極不贊成？

The park or playground closest to where I live is safe during the day.  
 離我的住處最近的公園或遊樂場白天很安全。

**CC39**

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 DON'T KNOW .....-7  
 REFUSED .....-8

**QC15\_C20** The park or playground closest to where I live is safe at night.  
 離我住處最近的公園或遊樂場夜間很安全。

**CC46**

[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]  
 [IF NEEDED, SAY: “「您是極為贊成、贊成、不贊成還是很不贊成？」”]

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

## SECTION D – HEALTH CARE ACCESS AND UTILIZATION

**QC15\_D1** The next questions are about where (CHILD) goes for health care.  
 下面的是有關 {孩子名字 /年齡/性別} 在哪裡尋求醫療護理的問題。

Is there a place you usually take {him/her} to when {he/she} is sick or you need advice about {his/her} health?

您有沒有一個常帶{他/她} 去的地方，當{他/她} 生病或您需要徵詢 有關{他/她} 健康建議？

**CD1**

YES .....	1	
NO .....	2	<b>[GO TO QC15_D3]</b>
DOCTOR/(HIS/HER) DOCTOR .....	3	
KAISER .....	4	
MORE THAN ONE PLACE .....	5	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QC15\_D2:**

**IF QC15\_D1 = 1, 5, -7, OR -8, DISPLAY “What kind of place do you take {him/her} to most often —a medical”;**

**ELSE IF QC15\_D1 = 3 DISPLAY “Is {his/her} doctor in a private”;**

**ELSE IF QC15\_D1 = 4, FILL QC15\_D2 = 1 AND GO TO PN QC15\_D3**

**QC15\_D2** {What kind of place do you take {him/her} to most often—a medical/Is {his/her} doctor a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?

您最常帶{他/她}去什麼樣的地方醫院診所、急診室或 其它地方？{他/她}的醫生 E 所或醫院診所、急診室還是其它地方工作？

**CD3**

DOCTOR'S OFFICE/KAISER/OTHER HMO .....	1
CLINIC/HEALTH CENTER/HOSPITAL CLINIC .....	2
EMERGENCY ROOM.....	3
SOME OTHER PLACE (SPECIFY: _____) ...	91
NO ONE PLACE .....	94
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_D3:**

**IF QC15\_A13 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA) OR IF QC15\_A18 = 1 (YES WENT TO ER PAST 12 MONTHS FOR ASTHMA), MARK YES ON QC15\_D3 AND GO TO QC15\_D4;**

**ELSE CONTINUE WITH QC15\_D3**

**QC15\_D3** During the past 12 months, did (CHILD) visit a hospital emergency room?  
 在過去 12 個月中， {孩子名字 /歲數/性別} 有沒有被送入醫院急診室？

**CD12**

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

**QC15\_D4** During the past 12 months, how many times has (CHILD) seen any kind of medical doctor?

在過去十二個月中，{ } 曾經幾次在任何類型的醫生處就診？

**CD6**

\_\_\_\_\_ TIMES

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_D5:**

**IF QC15\_D4 > 0, GO TO PROGRAMMING NOTE QC15\_D6;**

**ELSE IF QC15\_D4 = 0, -7, OR -8, CONTINUE WITH QC15\_D5**

**QC15\_D5** About how long has it been since {he/she} last saw a medical doctor?

{他/她} 上一次看醫生到現在已有多長時間？

**CD7**

ONE YEAR AGO OR LESS .....1

MORE THAN 1 YEAR UP TO 2 YEARS AGO .....2

MORE THAN 2 YEARS UP TO 3 YEARS AGO .....3

MORE THAN 3 YEARS AGO .....4

NEVER .....5

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_D6:**

**IF QC15\_D1 = 1 OR 3 OR 4 OR 5 (HAS A USUAL SOURCE OF CARE), CONTINUE WITH QC15\_D6;**

**ELSE SKIP TO PROGRAMMING NOTE QC15\_D7**

**QC15\_D6** Does (he/she) have a personal doctor or medical provider who is {his/her} main provider?

{He/she} 是否有一位個人醫生或醫療服務提供者擔任 {his/her} 主要 服務提供者？

**CD33**

**[IF NEEDED, SAY: "This can be a general doctor, a specialist doctor, a physician assistant, a nurse, or other health provider."]**

**[IF NEEDED, SAY: "「可以是一位全科醫生、專科醫生、醫生助理、護士或其他健康服務提供者。」"]**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTEQC15\_D7:**

**IF QC15\_D6 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QC15\_D7;  
ELSE SKIP TO QC15\_D9A**

**QC15\_D7** How often does (CHILD)'s doctor or medical provider listen carefully to you? Would you say...  
{CHILD NAME/AGE/SEX} 的醫生或醫療服務提供者仔細聽取 你的意見的頻率有多高？  
你認為是.....

**CD43**

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

**QC15\_D8** How often does (CHILD's) doctor or medical provider explain clearly what you need to do to take care of (CHILD)'s health? Would you say...  
{CHILD} 的醫生或醫療服務提供者明確地向你解釋如 何照顧 {CHILD NAME/AGE/SEX} 健康的頻率有多高？ 你認為是.....

**CD44**

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

**PROGRAMMING NOTEQC15\_D9A:**  
**IF CAGE<1, SKIP TO QC15\_D10;**  
**ELSE IF CAGE ≥ 1, CONTINUE WITH QC15\_D9A**

**QC15\_D9A** Many professionals such as health providers, teachers and counselors do developmental screening tests. Tests check how a child is growing, learning and behaving compared with children of the same age.

很多健康服務提供者、老師及心理諮詢顧問等專業人員進行發育狀況篩選測試。這些測試檢查兒童的成長、學習及行為狀況，並與同齡兒童的狀況進行比較。

Did (CHILD)'s doctor, other health providers, teachers or school counselors ever do an assessment or tests of (CHILD)'s development?

(CHILD)的醫生、其他健康服務提供者、老師或學校心理諮詢顧問是否曾經對(CHILD)的發育狀況進行評估或測試？

CF40

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

**QC15\_D9B** Did {his/her} doctor, other health providers, teachers or school counselors ever have (CHILD) rollover, pick up small objects, stack blocks, throw a ball, or recognize different colors?

(CHILD)的醫生、其他健康服務提供者、老師或學校心理諮詢顧問是否曾經讓{他/她}翻滾、撿起小物品、疊放積木、扔球或辨別不同的顏色？

CF41

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

**QC15\_D9C** Did they ever have you fill out a checklist about concerns you have about {his/her} learning, development, or behavior?

他們是否曾經讓您填寫一份有關您對{他的/她的}學習、發育或行為方面問題感到擔心的核查表？

CF42

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

**QC15\_D9D** Did they ever have you fill out a checklist of activities that (CHILD) can do, such as certain physical tasks, whether {her/she} can draw certain objects, or ways {he/she} can communicate with you?

他們是否曾經讓您填寫一份核查表，瞭解(CHILD)能夠完成的活動（例如完成某些身體方面的任務）、{他/她}是否能畫某些物體或{他/她}與您交流的方式？

CF43

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

**QC15\_D9E** Did they ever ask if you have concerns about {his/her} learning, development, or behavior?

他們是否曾經詢問您是否對{他的/她的}學習、發育或行為有任何擔心的問題?

**CF44**

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

**PROGRAMMING NOTE QC15\_D9F:**

**IF QC15\_A26 =1 (ADD/ADHD) OR 2 (ASPERGER'S) OR 3 (AUTISM) OR 8 (DOWN'S SYNDROME) OR 11 (NON-DOWN'S MENTAL RETARDATION) GO TO QC15\_D9G;  
 ELSE CONTINUE WITH QC15\_D9F**

**QC15\_D9F** Did a doctor or other professional ever note a concern about (CHILD) that should be monitored carefully?

是否有醫生或其他專業人員曾經注意到(CHILD)有應當進行認真監管的問題?

**CF45**

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

**QC15\_D9G** Did they ever refer {him/her} to a specialist regarding his development?

他們是否曾經就發育問題將{他/她}推薦給一位專科醫生?

**CF46**

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

**QC15\_D9H** Did they ever refer {him/her} for speech, language or hearing testing?

他們是否曾經推薦 <他/她> 接受言語、語言或聽力測試?

**CF47**

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

**PROGRAMMING NOTE QC15\_D10:**

**IF CHINSURE ≠ 2 (INSURED OR INSURANCE STATUS UNKNOWN) OR QC15\_D1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) THEN CONTINUE WITH QC15\_D10;  
ELSE GO TO PROGRAMMING NOTE QC15\_D12**

**QC15\_D10** In the past 12 months, did you try to get an appointment to see (CHILD)'s doctor or medical provider within two days because (CHILD) was sick or injured?  
在過去十二個月內，您是否曾因(CHILD)生病或受傷在兩天內約見(CHILD)的醫生或醫療服務提供者？

CD55

[IF NEEDED, SAY: "Do not include emergencies."]

[IF NEEDED, SAY: "請勿包括急診。"]

YES .....	1	
NO .....	2	[GO TO QC15_D12]
REFUSED .....	-7	[GO TO QC15_D12]
DON'T KNOW .....	-8	[GO TO QC15_D12]

**QC15\_D11** How often were you able to get an appointment within two days? Would you say...  
您能夠在兩天內就診的頻率有多高？您認為是...

CD45

Never, .....	1
從來沒有、 .....	1
Sometimes, .....	2
□ □ 、 .....	2
Usually, or .....	3
經常、還是 .....	3
Always? .....	4
總是？ .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_D12:**

**IF [QC15\_D4 > 0 (HAD A DOCTOR VISIT IN THE PAST 12 MONTHS) OR QC15\_D5 = 1 OR 2 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO)], CONTINUE WITH QC15\_D12;  
ELSE GO TO QC15\_D17**

**QC15\_D12** The last time you saw a doctor for (CHILD), did you have a hard time understanding the doctor?  
您上次帶(CHILD)去看醫生時，您是否很難聽懂醫生說的話？

CD25

YES .....	1	[GO TO QC15_D14]
NO .....	2	
NEVER ACCOMPANIED CHILD TO DOCTOR .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	



**PROGRAMMING NOTE QC15\_D13:**

IF QC15\_D12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING THE DOCTOR) AND  
 [INTERVIEW NOT CONDUCTED IN ENGLISH OR QA13\_G4 > 1 (ADULT R SPEAKS LANGUAGE  
 OTHER THAN ENGLISH AT HOME)], CONTINUE WITH QC15\_D13;  
 SET CD31ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QC15\_D13 WAS  
 ASKED;  
 ELSE SKIP TO QC15\_D14;

**QC15\_D13** In what language does (CHILD)'s doctor speak to you?  
 (CHILD)的醫生用哪一種語言與您交談?

**CD31**

ENGLISH .....	1	[GO TO QC15_D15]
SPANISH .....	2	[GO TO QC15_D17]
CANTONESE .....	3	[GO TO QC15_D17]
VIETNAMESE .....	4	[GO TO QC15_D17]
TAGALOG .....	5	[GO TO QC15_D17]
MANDARIN .....	6	[GO TO QC15_D17]
KOREAN .....	7	[GO TO QC15_D17]
ASIAN INDIAN LANGUAGES .....	8	[GO TO QC15_D17]
RUSSIAN .....	9	[GO TO QC15_D17]
OTHER1 (SPECIFY: _____) .....	91	[GO TO QC15_D17]
REFUSED .....	-7	[GO TO QC15_D17]
DON'T KNOW .....	-8	[GO TO QC15_D17]

**PROGRAMMING NOTE QC15\_D14:**

IF QC15\_D12 = 1 (HAD A HARD TIME UNDERSTANDING DOCTOR), CONTINUE WITH QC15\_D14;  
 ELSE SKIP TO QC15\_D17;

**QC15\_D14** Was this because you and the doctor spoke different languages?  
 這是不是因為您和醫生講的是不同的語言?

**CD26**

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

**QC15\_D15** Did you need someone to help you understand the doctor?  
 您是否需要有人幫助才能聽懂醫生的話?

**CD27**

YES .....	1	
NO .....	2	[GO TO QC15_D17]
REFUSED .....	-7	[GO TO QC15_D17]
DON'T KNOW .....	-8	[GO TO QC15_D17]

**QC15\_D16** Who was this person who helped you understand the doctor?  
誰幫助您理解醫生說的話?

**CD28**

MINOR CHILD (UNDER AGE 18) .....1  
AN ADULT FAMILY MEMBER OR FRIEND  
OF MINE .....2  
NON-MEDICAL OFFICE STAFF .....3  
MEDICAL STAFF INCLUDING NURSES AND  
DOCTORS .....4  
PROFESSIONAL INTERPRETER (BOTH IN  
PERSON AND ON THE TELEPHONE) .....5  
OTHER (PATIENTS, SOMEONE ELSE).....6  
DID NOT HAVE SOMEONE TO HELP.....7  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_D17** During the past 12 months, did you either delay or not get a medicine that a doctor  
prescribed for (CHILD)?

在過去十二個月內，您是否有延遲或沒有取醫生為(CHILD)開的處方藥？

**CE1**

YES .....1  
NO .....2 [GO TO QC15\_D19]  
REFUSED ..... -7 [GO TO QC15\_D19]  
DON'T KNOW ..... -8 [GO TO QC15\_D19]

**QC15\_D18** Was cost or lack of insurance a reason why you delayed or did not get the prescription?  
醫療費用或沒有保險是不是您延遲或沒有領取處方藥的一個原因？

**CE12**

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

**QC15\_D19** During the past 12 months, did you delay or not get any other medical care you felt  
(CHILD) needed—such as seeing a doctor, a specialist, or other health professional?  
在過去十二個月內，您有沒有延遲或沒有尋求任何您覺得(CHILD)需要的醫療護理，例如  
看醫生、專科醫生或其他醫療專業人員？

**CE7**

YES .....1  
NO .....2 [GO TO PN QC15\_D24]  
REFUSED ..... -7 [GO TO PN QC15\_D24]  
DON'T KNOW ..... -8 [GO TO PN QC15\_D24]

**QC15\_D20** Did (CHILD) get the care eventually?  
(CHILD)最終接受護理了嗎？

**CD66**

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

**QC15\_D21** Was cost or lack of insurance a reason why you delayed or did not get the medical care you felt (he/she) needed?

醫療費用或沒有保險是不是您延遲或沒有讓(他/她)接受您認為必要的醫療護理的一個原因?

**CE13**

YES .....	1	
NO .....	2	[GO TO PN QC15_D23]
REFUSED .....	-7	[GO TO PN QC15_D23]
DON'T KNOW .....	-8	[GO TO PN QC15_D23]

**QC15\_D22** Was that the main reason?

這是主要原因嗎?

**CD67**

YES .....	1	[GO TO PN QC15_D24]
NO .....	2	
REFUSED .....	-7	[GO TO PN QC15_D24]
DON'T KNOW .....	-8	[GO TO PN QC15_D24]

**QC15\_D23** What was the one main reason why you delayed getting the care you felt (he/she) needed?

您延遲讓(他/她)接受您認為需要的護理的一個最主要原因是什麼?

**CD68**

COULDN'T GET APPOINTMENT .....	1
MY INSURANCE NOT ACCEPTED .....	2
INSURANCE DID NOT COVER .....	3
LANGUAGE PROBLEMS .....	4
TRANSPORTATION PROBLEMS .....	5
HOURS NOT CONVENIENT .....	6
NO CHILD CARE FOR CHILDREN AT HOME .....	7
FORGOT OR LOST REFERRAL .....	8
I DIDN'T HAVE TIME .....	9
COULDN'T AFFORD/COST TOO MUCH .....	10
NO INSURANCE .....	11
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_D24** During the past 12 months, did you have any trouble finding a general doctor or provider who would see your child?

在過去十二個月中，您是否有任何困難找到能夠為您的孩子看病的全科醫生或醫療提供者?

**CD69**

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

**QC15\_D25** During the past 12 months, were you told by a doctor's office or clinic that they would not accept your child as a new patient?

在過去十二個月中，是否有醫生辦公室或診所告訴您他們不會接受您的孩子為新病人？

**CD70**

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

**QC15\_D26** During the past 12 months, were you told by a doctor's office or clinic that they did not accept your child's health care coverage?

在過去十二個月中，是否有醫生辦公室或診所告訴您他們不接受您的孩子的醫療保險計劃？

**CD71**

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

**PROGRAMMING NOTE QC15\_D27:**

**IF CAGE < 6 MONTHS, GO TO QC15\_D28;**

**ELSE IF CAGE ≥ 6 MONTHS, CONTINUE WITH QC15\_D27**

**QC15\_D27** During the past 12 months, did (CHILD) get a flu shot or the nasal flu vaccine, called "Flumist"?

在過去十二個月中，(CHILD)是否曾經注射流感防疫針或流感疫苗鼻噴劑 Flumist？

**CD30**

**[IF NEEDED, SAY: "A flu shot is usually given in the Fall and protects against influenza for the flu season."]**

**[IF NEEDED, SAY: "「流感防疫針通常在秋季注射，在流感流行季節預防 流感。」"]**

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

**PROGRAMMING NOTE QC15\_D28:**

**IF SKAID=ADULTID AND AJ108 ≠ 1 THEN AUTOCODE QC15\_D28 = AJ108 AND GO TO QC15\_E1;**

**ELSE CONTINUE WITH QC15\_D28;**

**QC15\_D28** The next questions are about using the Internet to get health information

以下是有關使用互聯網獲得健康資訊的問題。

Do you ever go on-line to use the Internet?

您是否曾經上網使用互聯網？

**CD46**

YES .....1  
NO .....2 **[GO TO QC15\_E1]**  
REFUSED .....-7 **[GO TO QC15\_E1]**  
DON'T KNOW .....-8 **[GO TO QC15\_E1]**

**QC15\_D29** [In the past 12 months, have you gone on-line to look for information that would help you with ...]

在過去十二個月內，您是否曾經使用互聯網找尋資訊幫助您解答...

... (CHILD)'s health?

... (CHILD)的健康狀況方面的問題？

**CD47**

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

**QC15\_D30** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

...how {he/she} is developing physically?

... {他/她}的身體發育狀況？

**CD48**

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

**QC15\_D31** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

...{his/her} speech?

...{他的/她的}語言能力？

**CD49**

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

**QC15\_D32** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

...how well {he/she} can hear?

... {他/她}的聽力狀況？

**CD50**

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

**QC15\_D33** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

... {his/her} diet or nutrition?

... {他的/她的}飲食或營養狀況？

**CD51**

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

**QC15\_D34** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

...{his/her} physical activity?

... {他的/她的}身體活動狀況？

**CD52**

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

**QC15\_D35** [In the past 12 months, have you gone on-line to look for information that would help you with...]

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

...{his/her} behavior?

[在過去十二個月內，您是否曾經上網查找資訊以幫助您了解]

**CD53**

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

**PROGRAMMING NOTE QC15\_D36:**

**IF QC15\_D29= 2 AND QC15\_D30 = 2 AND QC15\_D31 = 2 AND QC15\_D32 = 2 AND QC15\_D33 = 2  
AND QC15\_D34= 2 AND QC15\_D35 = 2, GO TO PROGRAMMING NOTE QC15\_E1;  
ELSE CONTINUE WITH QC15\_D36**

**QC15\_D36** In the past 12 months, did you talk to a doctor or other medical provider about child health information you found on-line?

在過去十二個月內，您是否曾經與醫生或其他醫療服務提供者談到您在網上查閱的有關這個孩子的健康資訊？

**CD54**

YES .....1  
NO .....2  
DID NOT FIND INFORMATION ON-LINE .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

## SECTION E – PUBLIC PROGRAMS

### PROGRAMMING NOTE SECTION E:

IF POVERTY = 1, 2, 3, OR 5 (INCOME LESS THAN OR EQUAL TO 300% OF POVERTY LEVEL) OR POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND KIDS1ST <> "Y" OR KIDS1ST = "Y", CONTINUE WITH QC15\_E1;  
ELSE SKIP TO QC15\_F1

**QC15\_E1** Is (CHILD) now on TANF or CalWORKs?  
(CHILD)目前是否參加 TANF 或 CalWORKs?

**CE11**

[IF NEEDED, SAY: "TANF means 'Temporary Assistance to Needy Families,' and CalWORKs means 'California Work Opportunities and Responsibilities to Kids.' Both replaced AFDC, California's old welfare entitlement program."]

[IF NEEDED, SAY: "「TANF 表示「貧困家庭臨時協助」； CalWORKS 表示「加州工作機會及對孩子的責任。這兩項計劃用於取代 AFDC，即加州原來的救濟計劃。」"]

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

**QC15\_E2** Is (CHILD) receiving Food Stamp benefits, also known as CalFresh?  
(CHILD)是否在領糧食券福利？糧食券福利也稱為 Cal Fresh。

**CE11A**

[IF NEEDED, SAY: "You receive benefits through an EBT card. EBT stands for Electronic Benefit Transfer card and is also known as the Golden State Advantage Card."]

[IF NEEDED, SAY: "「您通過 EBT 卡接受福利。EBT 表示電子福利轉帳卡，也稱為「黃金州優惠卡」。"]

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

### PROGRAMMING NOTE QC15\_E3:

IF CAGE > 6, GO TO QC15\_F1;  
ELSE CONTINUE WITH QC15\_E3

**QC15\_E3** Is (CHILD) on WIC now?  
(CHILD)目前是否參加了 WIC?

**CE11C**

[IF NEEDED, SAY: "WIC means 'Supplemental Food Program for Women, Infants and Children.'"]

[IF NEEDED, SAY: "「WIC 指為婦女、嬰兒和兒童提供的補助食品計劃。」"]

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



## SECTION F – PARENTAL INVOLVEMENT

### PROGRAMMING NOTE QC15\_F1:

IF CAGE > 5 YEARS GO TO PROGRAMMING NOTE QC15\_G1;

ELSE CONTINUE WITH QC15\_F1

**QC15\_F1** In a usual week, about how many days do you or any other family members read stories or look at picture books with (CHILD)?

在普通的一週內，您或任何其他家庭成員大約有幾天與(CHILD)一起讀故事書或看圖書？

**CG14**

EVERY DAY.....1  
 3-6 DAYS .....2  
 1-2 DAYS .....3  
 NEVER.....4  
 REFUSED.....-7  
 DON'T KNOW .....-8

**QC15\_F2** [In a usual week, about how many days do you or any other family member] play music or sing songs with (CHILD)?

[在普通的一週中，您或任何其他家庭成員大約有幾天會] 與(CHILD)一起播放或演奏音樂或唱歌？

**CG15**

EVERY DAY.....1  
 3-6 DAYS .....2  
 1-2 DAYS .....3  
 NEVER.....4  
 REFUSED.....-7  
 DON'T KNOW .....-8

**QC15\_F3** [In a usual week, about how many days do you or any other family member] take (CHILD) out somewhere, for example, to the park, store, or playground?

[在普通的一週中，您或任何其他家庭成員大約有幾天會] 帶(CHILD)外出，例如上公園、商店或兒童活動場地？

**CG16**

EVERY DAY.....1  
 3-6 DAYS .....2  
 1-2 DAYS .....3  
 NEVER.....4  
 REFUSED.....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QC15\_F3A:**

**IF CAGE < 5 YEARS OR HOUSEHOLD HAS CHILDREN < 5 YEARS, CONTINUE WITH QC15\_F3A;  
ELSE GO TO QC15\_G1**

**QC15\_F3A** Have you seen or heard messages encouraging you to talk, read and sing with your child?

您有沒有看到或聽到過鼓勵您多跟您的孩子說話，閱讀和唱歌的信息？

**CF64**

YES .....	1	
NO .....	2	[GO TO QC15_G1]
REFUSED .....	-7	[GO TO QC15_G1]
DON'T KNOW .....	-8	[GO TO QC15_G1]

**QC15\_F3B** Would you say that you talk with your child less, about the same, or more after hearing that message?

聽到這條信息以後，您覺得您跟您的孩子說話更少，差不多的，還是更多？

**CF65**

LESS .....	1
ABOUT THE SAME .....	2
MORE .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_F3C** Would you say that you sing with your child less, about the same, or more after hearing that message?

聽到這條信息以後，您覺得您跟您的孩子唱歌更少、差不多、還是更多了？

**CF66**

LESS .....	1
ABOUT THE SAME .....	2
MORE .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_F3D** Would you say that you read with your child less, about the same, or more after hearing that message?

聽到這條信息以後，您覺得您給您的孩子讀書更少，差不多的，還是更多？

**CF67**

LESS .....	1
ABOUT THE SAME .....	2
MORE .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

## SECTION G – CHILD CARE AND SOCIAL COHESION

### PROGRAMMING NOTE QC15\_G1:

IF CAGE ≥ 7, DO NOT DISPLAY LAST SENTENCE OF FIRST PARAGRAPH

#### QC15\_G1

These next questions are about childcare. By childcare we mean any arrangement where someone other than the parents, legal guardian, or stepparents takes care of (CHILD). {This includes preschool and nursery school, but not kindergarten.}

以下是有關幼兒看護的問題。幼兒看護是指由家長、法定監護人或繼父母之外的任何其他  
人照料(CHILD)的安排。{這包括學前班和託兒所，但不包括幼稚園。}

Do you currently have any kind of regular childcare arrangements for (CHILD) for 10  
hours or more per week?

您目前是否為(CHILD)作出了每週 10 小時或 10 小時以上的任何類型的定期幼兒看護安  
排?

CG1

YES .....	1	
NO .....	2	[GO TO QC15_G13]
REFUSED .....	-7	[GO TO QC15_G13]
DON'T KNOW .....	-8	[GO TO QC15_G13]

#### QC15\_G2

Altogether, how many hours is (CHILD) in childcare during a typical week? Include all  
combinations of care arrangements.

(CHILD)通常一週內接受幼兒看護的時間有多少小時? 請包括各種護理安排。

CG2

\_\_\_\_\_ HOURS [SR: 10-168 HRS]

REFUSED .....	-7	[GO TO QC15_G13]
DON'T KNOW .....	-8	[GO TO QC15_G13]

### PROGRAMMING NOTE QC15\_G3:

IF QC15\_G2 < 10 (HOURS IN CHILDCARE), GO TO QC15\_G11;  
ELSE CONTINUE WITH QC15\_G3

#### QC15\_G3

During a typical week does (CHILD) receive childcare from...a grandparent or other  
family member?

通常在一週中，(CHILD)是否由以下人員照看..祖父母（外祖父母）或其他家庭成員?

CG3A

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

**QC15\_G4** [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in your home?

[(CHILD)是由誰來照看? ]...一位非家庭成員在您的家中照看(CHILD) ?

**CG3E**

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

**QC15\_G5** [Does (CHILD) receive childcare from]...a non-family member who cares for (CHILD) in his or her home?

[(CHILD)是由誰來照看? ]...一位非家庭成員在他/她的家中照看(CHILD) ?

**CG3F**

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

**QC15\_G6** [Does (CHILD) receive childcare from]...a childcare center that is not in someone's home?

[(CHILD)是由誰來照看? ]...在一個不在任何人家中的托兒所/幼兒園 ?

**CG3D**

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

**PROGRAMMING NOTE QC15\_G7:**

**IF CAGE ≥ 7 YEARS, GO TO PROGRAMMING NOTE QC15\_G13;**

**ELSE CONTINUE WITH QC15\_G7**

**QC15\_G7** [Does (CHILD) receive childcare from]...a Head Start or state preschool program?

[(CHILD)是由誰來照看? ]...Head Start (啟蒙計劃) 或州政府學前班計劃

**CG3B**

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

**QC15\_G8** [Does (CHILD) receive childcare from]...some other preschool or nursery school?

[(CHILD)是由誰來照看? ] 其它學前班或托兒所

**CG3C**

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

**PROGRAMMING NOTE QC15\_G9:**

**IF QC15\_G6 = 1 OR QC15\_G7 = 1 OR QC15\_G8 = 1, CONTINUE WITH QC15\_G9;  
ELSE GO TO PROGRAMMING NOTE QC15\_G10**

**QC15\_G9** Please tell me if you strongly agree, agree, disagree, strongly disagree, or you're not sure about the following statements.

請告訴我您對以下陳述是極為贊成, 贊成, 不贊成, 極不贊成還是不確定

Your child's preschool is doing a good job at preparing children for their futures.

您的孩子上的幼稚園在為孩子的未來做準備方面做得很好。

**CG47**

STRONGLY AGREE.....1  
AGREE.....2  
DISAGREE.....3  
STRONGLY DISAGREE.....4  
NOT SURE.....5

**PROGRAMMING NOTE QC15\_G10:**

**IF [QC15\_G3 OR QC15\_G4 = 1 (CHILD RECEIVES CHILDCARE FROM GRANDPARENT OR NON-FAMILY MEMBER IN CHILD'S HOME)] OR IF [QC15\_G5 ≠ 1 AND QC15\_G6 ≠ 1 AND QC15\_G7 ≠ 1 AND QC15\_G8 ≠ 1 (NOT IN HEAD START, PRESCHOOL PROGRAM, OR IN CARE IN NON-FAMILY MEMBER HOME)], GO TO QC15\_G11;**

**ELSE CONTINUE WITH QC15\_G10;**

**IF ONLY ONE OF QC15\_G5, QC15\_G6, QC15\_G7, OR QC15\_G8 = 1, DISPLAY "Is this" AND "provider";**

**ELSE DISPLAY, "Are all of these" AND "providers"**

**QC15\_G10** {Is this/Are all of these} child care provider{s} licensed by the state of California?

{這名/所有}幼兒看護人是否有加州政府的執照？

**CG3G**

YES (ALL LICENSED).....1  
NO (NONE LICENSED).....2  
SOME LICENSED AND SOME NOT.....3  
REFUSED.....-7  
DON'T KNOW.....-8

**QC15\_G11** In the past 12 months, was there a time when you could not find childcare when you needed it for (CHILD) for a week or longer?

在過去十二個月中，您是否遇到(CHILD)需要有人照看時卻無法找到人長達一個星期或更久的情況？

**CG5**

YES.....1  
NO.....2 [GO TO QC15\_G13]  
REFUSED.....-7 [GO TO QC15\_G13]  
DON'T KNOW.....-8 [GO TO QC15\_G13]

**QC15\_G12** What is the main reason you were unable to find childcare for (CHILD) at that time?  
當時您無法為(CHILD)找到幼兒看護的主要原因是什麼?

**CG6**

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

[IF NEEDED, SAY: "「主要原因是指最重要的原因。」"]

COULDN'T AFFORD ANY CHILD CARE .....1  
COULDN'T FIND A PROVIDER WITH A SPACE ....2  
THE HOURS AND LOCATION DIDN'T FIT MY  
NEEDS .....3  
COULDN'T AFFORD THE QUALITY OF  
CHILDCARE I WANTED .....4  
COULDN'T FIND THE QUALITY OF CHILDCARE  
I WANTED .....5  
OTHER REASON ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_G13:**

**IF QC15\_G13 THROUGH QC15\_G17 NOT ANSWERED IN ADULT INTERVIEW (AM19, AM20, AM21, AM35, AK28), CONTINUE WITH QC15\_G13;  
ELSE SKIP TO QC15\_H1**

**QC15\_G13** These next questions are about your neighborhood. Tell me if you strongly agree, agree, disagree or strongly disagree with the following statements:  
以下是有關您所在社區的問題。請告訴我您對以下陳述是極為贊成、贊成、不贊成還是極不贊成。

People in my neighborhood are willing to help each other.  
我所在社區的人願意互相幫助。

**CG39**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

[IF NEEDED, SAY: "「您是極為贊成、贊成、不贊成還是極不贊成？」"]

STRONGLY AGREE .....1  
AGREE .....2  
DISAGREE .....3  
STRONGLY DISAGREE .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_G14** People in this neighborhood generally do NOT get along with each other.  
這個社區裡的人總得來說相處不愉快。

**CG40**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

[IF NEEDED, SAY: "「您是極為贊成、贊成、不贊成還是極不贊成？」"]

[DO NOT PROBE A "DON'T KNOW" RESPONSE.]

STRONGLY AGREE .....1  
AGREE .....2  
DISAGREE .....3  
STRONGLY DISAGREE .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_G15** People in this neighborhood can be trusted.

可以信任本社區的人。

**CG41**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

[IF NEEDED, SAY: "「您是極為贊成、贊成、不贊成還是極不贊成？」"]

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QC15\_G16** You can count on adults in this neighborhood to watch out that children are safe and don't get into trouble.

您可以依賴本社區的成年人，注意兒童的安全，使他們避免遇到麻煩。

**CG34**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]

[IF NEEDED, SAY: "「您是極為贊成、贊成、不贊成還是極不贊成？」"]

STRONGLY AGREE.....1  
 AGREE.....2  
 DISAGREE.....3  
 STRONGLY DISAGREE.....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QC15\_G17** Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?

您在所在社區是所有的時間、大多數時間、部份時間還是沒有任何時間感到安全？

**CG42**

ALL OF THE TIME .....1  
 MOST OF THE TIME .....2  
 SOME OF THE TIME .....3  
 NONE OF THE TIME .....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

## SECTION H – DEMOGRAPHICS, PART II

So we can be sure we have included children of all races and ethnic groups in California, I need to ask a few questions about (CHILD)'s background.

為了確保我們包括了加州所有種族及種族團體的孩子，我最後需要問幾個有關 {孩子} 的背景的問題。

**QC15\_H1**

Is (CHILD) Latino or Hispanic?

{CHILD}是拉丁裔或西裔嗎？

**CH1**

**[IF NEEDED, SAY: “Such as Mexican or Central or South American?”]**

**[IF NEEDED, SAY: “例如，墨西哥人或中南美洲人？”]**

YES .....	1	
NO .....	2	<b>[GO TO QC15_H3]</b>
REFUSED .....	-7	<b>[GO TO QC15_H3]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_H3]</b>

**QC15\_H2**

And what is {his/her} Latino or Hispanic ancestry or origin? – such as Mexican, Salvadorian, Cuban, Honduran – and if {he/she} has more than one, tell me all of them.

{他的/她的}拉丁裔或西裔祖籍或原國籍是哪里？例如，墨西哥人、薩爾瓦多人、古巴人、洪都拉斯人 — 如果{他/她}有一個以上原國籍，請將所有的原國籍告訴我。

**CH2**

**[IF NECESSARY GIVE MORE EXAMPLES]**

**[CODE ALL THAT APPLY]**

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



**PROGRAMMING NOTE QC15\_H3:**

**IF QC15\_H1 = 1 (YES-CHILD IS LATINO), DISPLAY, “You said your child is Latino or Hispanic. Also,”**

**IF MORE THAN ONE RACE GIVEN, AFTER ENTERING RESPONSES FOR QC15\_H3, CONTINUE WITH PROGRAMMING NOTE QC15\_H4;**

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

**QC15\_H3**

{You said your child is Latino or Hispanic. Also,} Please tell me which one or more of the following you would use to describe (CHILD): Would you describe {him/her} as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?

請告訴我您會使用以下哪一項或幾項來描述{孩子}: 您認為{him or her}是夏威夷土著人、其他太平洋群島人、美國印地安人、阿拉斯加土著人、亞洲人、黑人、非裔美國人還是白人?

**CH3**

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

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

**[CODE ALL THAT APPLY]**

WHITE.....	1	[GO TO QC15_H10]	} IF ONLY ONE RACE
BLACK OR AFRICAN AMERICAN.....	2	[GO TO QC15_H10]	
ASIAN .....	3	[GO TO QC15_H8]	
AMERICAN INDIAN, ALASKA NATIVE.....	4	[GO TO QC15_H4]	
OTHER PACIFIC ISLANDER .....	5	[GO TO QC15_H9]	
NATIVE HAWAIIAN .....	6	[GO TO QC15_H10]	
OTHER (SPECIFY: _____).....	91	[GO TO QC15_H10]	
REFUSED .....	-7	[GO TO QC15_H10]	
DON'T KNOW .....	-8	[GO TO QC15_H10]	

**PROGRAMMING NOTE QC15\_H4:**

**IF QC15\_H3 = 4 (AMERICAN INDIAN, ALASKA NATIVE) CONTINUE WITH QC15\_H4;**

**ELSE GO TO PROGRAMMING NOTE QC15\_H8**

**QC15\_H4**

You said American Indian/Alaska Native, and what is (CHILD)'s tribal heritage? If {he/she} has more than one tribe, tell me all of them.

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

**CH4**

**[CODE ALL THAT APPLY]**

APACHE .....	1
BLACKFEET .....	2
CHEROKEE .....	3
CHOCTAW .....	4
MEXICAN AMERICAN INDIAN .....	5
NAVAJO.....	6
POMO .....	7
PUEBLO .....	8
SIOUX .....	9
YAQUI .....	10
OTHER TRIBE [Ask for spelling] (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_H5** Is (CHILD) an enrolled member in a federally or state recognized tribe?

{孩子} 是聯邦或州認可部落的註冊成員嗎？

**CH5**

YES .....	1	
NO .....	2	[GO TO QC15_H8]
REFUSED .....	-7	[GO TO QC15_H8]
DON'T KNOW .....	-8	[GO TO QC15_H8]

**QC15\_H6** In which Tribe is (CHILD) enrolled?

{孩子} 是在哪一個部落註冊的？

**CH6**

**APACHE**

MESCALERO APACHE, NM .....1  
 APACHE (NOT SPECIFIED) .....2  
 OTHER APACHE (SPECIFY: \_\_\_\_\_) . 91

**BLACKFEET**

BLACKFOOT / BLACKFEET .....3

**CHEROKEE**

WESTERN CHEROKEE .....4  
 CHEROKEE (NOT SPECIFIED) .....5  
 OTHER CHEROKEE (SPECIFY: \_\_\_\_\_) 92

**CHOCTAW**

CHOCTAW OKLAHOMA .....6  
 CHOCTAW (NOT SPECIFIED) .....7  
 OTHER CHOCTAW (SPECIFY: \_\_\_\_\_) . 93

**NAVAJO**

NAVAJO (NOT SPECIFIED) .....8

**POMO**

HOPLAND BAND, HOPLAND RANCHERIA ....9  
 SHERWOOD VALLEY RANCHERIA ..... 10  
 POMO (NOT SPECIFIED) ..... 11  
 OTHER POMO (SPECIFY: \_\_\_\_\_) . 94

**PUEBLO**

HOPI ..... 12  
 YSLETA DEL SUR PUEBLO OF TEXAS ..... 13  
 PUEBLO (NOT SPECIFIED) ..... 14  
 OTHER PUEBLO (SPECIFY: \_\_\_\_\_) . 95

**SIOUX**

OGLALA/PINE RIDGE SIOUX ..... 15  
 SIOUX (NOT SPECIFIED) ..... 16  
 OTHER SIOUX (SPECIFY: \_\_\_\_\_) ... 96

**YAQUI**

PASCUA YAQUI TRIBE OF ARIZONA ..... 17  
 YAQUI (NOT SPECIFIED) ..... 18  
 OTHER YAQUI (SPECIFY: \_\_\_\_\_) ... 97

**OTHER**

OTHER (SPECIFY: \_\_\_\_\_) ..... 98  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_H7** Does (CHILD) get any health care services through the Indian Health Service, a Tribal Health Program, or an Urban Indian clinic?

{孩子} 有沒有享受印地安人醫療服務、部落醫療計劃或都市 印地安人診所的醫療護理服？

**CH6A**

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

**PROGRAMMING NOTE QC15\_H8:**  
**IF QC15\_H3 = 3 (ASIAN) CONTINUE WITH QC15\_H8;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_H9**

**QC15\_H8** You said Asian, and what specific ethnic group is {he/she}, such as Chinese, Filipino, Vietnamese? If {he/she} is more than one, tell me all of them.  
 您說（他/她）是亞裔，您所指的是哪一族裔，例如華裔、菲律賓裔、越南裔？如果（他/她）有超過一種族裔的血統，請全部告訴我。

**CH7**

**[CODE ALL THAT APPLY]**

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

**PROGRAMMING NOTE QC15\_H9:**  
**IF QC15\_H3 = 5 (PACIFIC ISLANDER) CONTINUE WITH QC15\_H9;**  
**ELSE GO TO QC15\_H10**

**QC15\_H9** You said (CHILD) is Pacific Islander. What specific ethnic group is {he/she}, such as Samoan, Tongan, or Guamanian? If {he/she} is more than one, tell me all of them  
 您說(孩子)是太平洋群島人。{he/she} 具體屬於哪一個種族團體，例如薩摩亞人、湯加人或關島人？如果{他/她}屬於一個以上種族團體，請告訴我所有的種族團體。

**CH7A**

**[CODE ALL THAT APPLY]**

SAMOAN/AMERICAN SAMOAN.....	1
GUAMANIAN .....	2
TONGAN .....	3
FIJIAN .....	4
OTHER PACIFIC ISLANDER	
(SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_H10:**

**IF SKA = AR AND AI56C ≠ -1 (THIS QUESTION ALREADY ASKED DURING ADULT SURVEY), SKIP TO QC15\_H14;  
ELSE CONTINUE WITH QC15\_H10**

**QC15\_H10** In what country was (CHILD) born?

(孩子)是在哪一個國家出生的?

**CH8**

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

**PROGRAMMING NOTE QC15\_H11:**

**IF QC15\_H10 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15\_H14;  
ELSE CONTINUE WITH QC15\_H11**

**QC15\_H11** Is (CHILD) a citizen of the United States?

(孩子)是美國公民嗎?

**CH8A**

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

**[GO TO QC15\_H13]**

**QC15\_H12** Is (CHILD) a permanent resident with a green card?

(孩子)是持有綠卡的永久居民嗎？

**CH9**

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

**[IF NEEDED, SAY: "人們一般把它稱作“綠卡”，但它的顏色可以是粉紅色、藍色或白色的。"]**

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

**QC15\_H13** About how many years has (CHILD) lived in the United States?

(孩子)在美國居住大約多少年了？

**CH10**

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

\_\_\_\_\_ NUMBER OF YEARS {OR}

**CH10YR**

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

**CH10FMT**

NUMBER OF YEARS .....1  
 YEAR FIRST CAME TO LIVE IN US .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_H14:**  
**IF SKA = MOTHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE)**  
**THEN SKIP TO QC15\_H18;**  
**ELSE, CONTINUE WITH QC15\_H14 AND DISPLAY “was his mother/was her mother”**

**QC15\_H14** In what country {were you/was his mother/was her mother} born?  
 {您/他的母親/她的母親}是在哪一個國家出生的?

**CH11**

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

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

**PROGRAMMING NOTE QC15\_H15 AND QC15\_H16:**  
**IF QC15\_H14 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15\_H18;**  
**ELSE CONTINUE WITH QC15\_H15 AND IF RESPONDENT IS MOTHER OF CHILD DISPLAY “Are you”;**  
**ELSE DISPLAY “Is {his/her} mother”**

**QC15\_H15** {Are you/Is {his/her} mother} a citizen of the United States?  
 {您/{他的/她的}母親}是美國公民嗎?

CH11A

**[IF R SAYS SHE IS A NATURALIZED CITIZEN, CODE YES]**

YES .....	1	<b>[GO TO QC15_H17]</b>
NO .....	2	
APPLICATION PENDING .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_H16** {Are you/Is {his/her} mother} a permanent resident with a green card?  
 {您/{他的/她的}母親}是持有綠卡的永久居民嗎?

CH12

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

**PROGRAMMING NOTE QC15\_H17:**  
**IF RESPONDENT IS MOTHER OF CHILD, CONTINUE WITH QC15\_H17 AND DISPLAY “have you”;**  
**ELSE CONTINUE WITH QC15\_H17 AND DISPLAY “has {his/her} mother”**

**QC15\_H17** About how many years {have you/has {his/her} mother} lived in the United States?  
 您在美國居住了大約多少年? {他的/她的}母親在美國大約居住多少年了?

CH13

\_\_\_\_\_ NUMBER OF YEARS [HR: 0-AGE] {OR}

CH13YR

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

CH13FMT

NUMBER OF YEARS .....	1
YEAR FIRST CAME TO LIVE IN US .....	2
MOTHER DECEASED .....	3
NEVER LIVED IN U.S. ....	4
REFUSED .....	-7
DON'T KNOW .....	-8



**PROGRAMMING NOTE QC15\_H18:**

**IF SKA = FATHER OF CHILD AND AH33 ≠ -1 (ALREADY ASKED IN ADULT QUESTIONNAIRE THEN SKIP TO QC15\_H22;  
ELSE CONTINUE WITH QC15\_H18 AND DISPLAY, “was {his/her} father”**

**QC15\_H18**

In what country {were you/was his father/was her father} born?

您是在哪一個國家出生的？{他的/她的}父親是在哪個國家出生的？

**CH14****[SELECT FROM MOST LIKELY COUNTRIES]****[FOR CHILDREN WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

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

**PROGRAMMING NOTE QC15\_H19 AND QC15\_H20:**  
**IF QC15\_H18 = 1, 2, 9, 22, OR 26 (UNITED STATES OR ITS TERRITORIES), GO TO PROGRAMMING NOTE QC15\_H22;**  
**ELSE CONTINUE WITH QC15\_H19 AND IF RESPONDENT IS FATHER OF CHILD DISPLAY “Are you”;**  
**ELSE SAY “Is {his/her} father”**

**QC15\_H19** {Are you/Is {his/her} father} a citizen of the United States?  
 {您/{他的/她的}父親}是美國公民嗎?

**CH14A**

**[IF R SAYS HE IS A NATURALIZED CITIZEN, CODE YES]**

YES .....	1	<b>[GO TO PN QC15_H21]</b>
NO .....	2	
APPLICATION PENDING .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_H20** {Are you/Is {his/her} father} a permanent resident with a green card?  
 {您/{他的/她的}父親}是持有綠卡的永久居民嗎?

**CH15**

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

**PROGRAMMING NOTE QC15\_H21:**  
**IF RESPONDENT IS FATHER OF CHILD, CONTINUE WITH QC15\_H21 AND DISPLAY “have you”;**  
**ELSE, CONTINUE WITH QC15\_H21 AND DISPLAY “has {his/her} father”**

**QC15\_H21** About how many years {have you/has {his/her} father} lived in the United States?  
 您在美國大約居住多少年了? {他的/她的}父親在美國大約居住多少年了?

**CH16**

\_\_\_\_\_ NUMBER OF YEARS [HR: 0-AGE]

{OR}

**CH16YR**

\_\_\_\_\_ YEAR FIRST CAME TO LIVE IN U.S.

**CH16FMT**

NUMBER OF YEARS .....	1
YEAR FIRST CAME TO LIVE IN U.S. ....	2
FATHER DECEASED .....	3
NEVER LIVED IN U.S. ....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_H22:**  
**IF RESPONDENT IS SAMPLED ADULT, GO TO PROGRAMMING NOTE QC15\_H23;**  
**ELSE IF RESPONDENT ≠ ADULT RESPONDENT, CONTINUE WITH QC15\_H22**

**QC15\_H22** In general, what languages are spoken in (CHILD)'s home?

一般來說，在(CHILD)家中用什麼語言交談？

**CH17**

**[PROBE: "Any others?"]**

**[PROBE: "「還有其它語言嗎？」"]**

ENGLISH .....	1
SPANISH .....	2
CANTONESE .....	3
VIETNAMESE .....	4
TAGALOG .....	5
MANDARIN .....	6
KOREAN .....	7
ASIAN INDIAN LANGUAGES .....	8
RUSSIAN .....	9
OTHER1 (SPECIFY: _____) .....	91
OTHER2 (SPECIFY: _____) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_H23:**  
**IF INTERVIEW CONDUCTED IN ENGLISH AND QC15\_H22 > 1 (TWO OR MORE LANGUAGES SPOKEN AT HOME), CONTINUE WITH QC15\_H23 AND DISPLAY "Compared to the language spoken in (CHILD)'s home,";**  
**SET CH18ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QC15\_H23 WAS ASKED;**  
**ELSE IF QC15\_H22 = 1 (ONLY SPEAKS ENGLISH), GO TO PROGRAMMING NOTE QC15\_H24**

**QC15\_H23** {Compared to other languages spoken in (CHILD)'s home,} would you say you speak English....

{因為你在家裡說不止一種語言，我們很了解你自認為英文說得如何。} 你覺得你的英文說得...

**CH18**

Very well, .....	1
非常好, .....	1
Fairly well, .....	2
較好, .....	2
Not well, or .....	3
不好, 還是 .....	3
Not at all? .....	4
完全不會說? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_H24:**  
**IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC15\_H24;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_H26**

**QC15\_H24** What is the highest grade of education you have completed and received credit for?  
 你完成的最高教育和獲得學分的最高年級是什麼？

**CH22**

**GRADE SCHOOL**

1 <sup>ST</sup> GRADE .....	1
2 <sup>ND</sup> GRADE .....	2
3 <sup>RD</sup> GRADE .....	3
4 <sup>TH</sup> GRADE .....	4
5 <sup>TH</sup> GRADE .....	5
6 <sup>TH</sup> GRADE .....	6
7 <sup>TH</sup> GRADE .....	7
8 <sup>TH</sup> GRADE .....	8

**HIGH SCHOOL OR EQUIVALENT**

9 <sup>TH</sup> GRADE .....	9
10 <sup>TH</sup> GRADE .....	10
11 <sup>TH</sup> GRADE .....	11
12 <sup>TH</sup> GRADE .....	12

**4-YEAR COLLEGE OR UNIVERSITY**

1 <sup>ST</sup> YEAR (FRESHMAN) .....	13
2 <sup>ND</sup> YEAR (SOPHOMORE) .....	14
3 <sup>RD</sup> YEAR (JUNIOR) .....	15
4 <sup>TH</sup> YEAR (SENIOR) .....	16
5 <sup>TH</sup> YEAR .....	17

**GRADUATE OR PROFESSIONAL SCHOOL**

1 <sup>ST</sup> YEAR GRAD OR PROF SCHOOL .....	18
2 <sup>ND</sup> YEAR GRAD OR PROF	
SCHOOL (MA/MS) .....	19
3 <sup>RD</sup> YEAR GRAD OR PROF SCHOOL .....	20
MORE THAN 3 YEARS GRAD OR PROF	
SCHOOL (PhD) .....	21

**2-YEAR JUNIOR OR COMMUNITY COLLEGE**

1 <sup>ST</sup> YEAR .....	22
2 <sup>ND</sup> YEAR .....	23

**VOCATIONAL, BUSINESS, OR TRADE SCHOOL**

1 <sup>ST</sup> YEAR .....	24
2 <sup>ND</sup> YEAR .....	25
MORE THAN 2 YEARS .....	26
HAD NO FORMAL EDUCATION .....	30
REFUSED .....	-7
DON'T KNOW .....	-8

## Section K – CHILD FIRST

**PROGRAMMING NOTE QC15\_K1:**
**IF KIDS1ST = 'Y' AND SKAID = SCRESPX, CONTINUE WITH QC15\_K1;**
**ELSE SKIP TO PN QC15\_H25 (FOLLOW-UP)**

**QC15\_K1** Which of the following were you doing last week?  
您上週曾經從事以下哪些工作，是.....

**KAG8**

Working at a job or business,.....1	<b>[GO TO QC15_K3]</b>
從事工作或業務, .....1	
With a job or business but not at work, .....2	<b>[GO TO QC15_K3]</b>
有工作或業務，但不在工作, .....2	
Looking for work, or .....3	
在找工作，還是.....3	
Not working at a job/business? .....4	
沒有從事工作或業務? .....4	
REFUSED ..... -7	
DON'T KNOW ..... -8	

**QC15\_K2** Do you usually work?  
你通常工作嗎?

**KAG11**

YES .....1	
NO .....2	<b>[GO TO QC15_K5]</b>
LOOKING FOR WORK .....3	<b>[GO TO QC15_K5]</b>
REFUSED ..... -7	<b>[GO TO QC15_K5]</b>
DON'T KNOW ..... -8	<b>[GO TO QC15_K5]</b>

**QC15\_K3** How many hours per week do you usually work at all jobs or businesses?  
您在從事的#所有的\工作或業務中每週#通常\工作多少小時?

**KAK20**

**[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]**

\_\_\_\_\_ HOURS [HR: 0-95]

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

**PROGRAMMING NOTE QC15\_K4:**

**IF QC15\_K3 = 0 (ZERO HOURS WORKED), SKIP TO QC15\_K5;  
ELSE CONTINUE WITH QC15\_K4**

**QC15\_K4**

On your main job, are you employed by a private company, the government, or are you self-employed, or are you working without pay in a family business or farm?

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

<b>KAG9</b>
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**[IF NEEDED, SAY: "Where did you work MOST hours?"]**

**[IF NEEDED, SAY: 「您在哪裡工作的時間最長？」]**

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

**QC15\_K5**

What is the highest grade of education your spouse has completed and received credit for?

您完成的最高教育和獲得學分的最高年級是什麼？

<b>KAH47</b>
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<b>NO FORMAL EDUCATION</b> .....	30
<b>GRADE SCHOOL</b>	
1ST GRADE .....	1
2ND GRADE .....	2
3RD GRADE .....	3
4TH GRADE .....	4
5TH GRADE .....	5
6TH GRADE .....	6
7TH GRADE .....	7
8TH GRADE .....	8
<b>HIGH SCHOOL OR EQUIVALENT</b>	
9TH GRADE .....	9
10TH GRADE .....	10
11TH GRADE .....	11
12TH GRADE .....	12
<b>4-YEAR COLLEGE OR UNIVERSITY</b>	
1ST YEAR (FRESHMAN).....	13
2ND YEAR (SOPHOMORE) .....	14
3RD YEAR (JUNIOR).....	15
4TH YEAR (SENIOR) (BA/BS).....	16
5TH YEAR .....	17
<b>GRADUATE OR PROFESSIONAL SCHOOL</b>	
1ST YEAR GRAD OR PROF SCHOOL.....	18
2ND YEAR GRAD OR PROF	
SCHOOL (MA/MS) .....	19
3RD YEAR GRAD OR PROF SCHOOL .....	20
MORE THAN 3 YEARS GRAD OR	
PROF SCHOOL (PhD) .....	21
<b>2-YEAR JUNIOR OR COMMUNITY COLLEGE</b>	
1ST YEAR .....	22
2ND YEAR (AA/AS).....	23
<b>VOCATIONAL, BUSINESS, OR TRADE SCHOOL</b>	
1ST YEAR .....	24
2ND YEAR.....	25
MORE THAN 2 YEARS.....	26
REFUSED .....	-7
DON'T KNOW (OUT OF RANGE).....	-8

**QC15\_K6** Which of the following was YOUR SPOUSE doing last week?  
您的{配偶}上週曾經從事以下哪些工作，是.....

**KAK1**

Working at a job or business,.....	1	<b>[GO TO QC15_K8]</b>
從事工作或業務, .....	1	
With a job or business but not at work,.....	2	<b>[GO TO QC15_K8]</b>
有工作或業務，但不在工作, .....	2	
Looking for work, or .....	3	
在找工作，還是.....	3	
Not working at a job or business?.....	4	
沒有從事工作或業務? .....	4	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_K7** Does your spouse usually work?  
你的{配偶}通常工作嗎?

**KAG10**

YES .....	1	
NO.....	2	<b>[GO TO QC15_K10]</b>
LOOKING FOR WORK.....	3	<b>[GO TO QC15_K10]</b>
REFUSED .....	-7	<b>[GO TO QC15_K10]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_K10]</b>

**QC15\_K8** The next questions are about work your spouse does.  
下面的問題是關於您的配偶從事的工作。

How many hours per week does your spouse USUALLY work at ALL jobs or businesses?  
您的{配偶}在從事的的所有的工作或業務中每週通常工作多少小時?

**KAK3**

**[IF WORKS > 95 HOURS, ENTER 95. IF DOES NOT WORK, ENTER 0 (ZERO).]**

\_\_\_\_\_ HOURS [HR: 0-95]

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



**PROGRAMMING NOTE QC15\_K9:**

**IF QC15\_K8 = 0 (ZERO HOURS WORKED), SKIP TO QC15\_K10;  
ELSE CONTINUE WITH QC15\_K9**

**QC15\_K9** On your spouse's MAIN job, is {he/she/he or she} employed by a private company, the government, OR is {he/she/he or she} self-employed, OR is {he/she/he or she} working without pay in a family business or farm?

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

**KAK4**

**[IF NEEDED, SAY: "Where does he/she work MOST hours?"]**

**[IF NEEDED, SAY: "他/她在哪裡工作的時間最長?"]**

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

**QC15\_K10** What is your spouse's age, please?

請告訴我您{配偶}的年齡？

**KAA2**

\_\_\_\_\_ YEARS OF AGE [RANGE: 0-120]

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

**PROGRAMMING NOTE QC15\_K11:**

**IF QC15\_K10 = -7 OR -8 (REF/DK) THEN CONTINUE WITH QC15\_K11;  
ELSE GO TO QC15\_K12**

**QC15\_K11** Is your spouse between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?

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

**KAA2A**

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

**QC15\_K12** MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, is your spouse covered by MediCARE?  
Medicare (醫療保障計劃) 是為年滿 65 歲或患有某種殘障的 人士提供的健康保險計劃。  
您目前是否享受 Medicare 保賠?

**KAI1**

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

YES .....	1	<b>[GO TO QC15_K15]</b>
NO .....	2	
REFUSED .....	-7	<b>[GO TO QC15_K22]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_K22]</b>

**POST-NOTE QC15\_K12:**

**IF QC15\_K12 = 1, SET KARMCARE = 1 AND SET KARINSURE = 1**

**PROGRAMMING NOTE QC15\_K13:**

**IF [KAAGE > 64 OR QC15\_K11 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND QC15\_K12= 2 (NOT COVERED BY MEDICARE), CONTINUE WITH QC15\_K13;  
ELSE GO TO PROGRAMMING NOTE QC15\_K15**

**QC15\_K13** Is it correct that your spouse is NOT covered by MediCARE even though you told me earlier that your spouse is 65 or older?  
雖然您剛才告訴過我您的{配偶}年齡在 65 歲或 65 歲以上, 但您的{配偶沒有享受聯邦 醫療護理保險, 對不對?

**KAI2**

CORRECT, NOT COVERED BY MEDICARE .....	1	<b>[GO TO PN QC15_K22]</b>
NOT CORRECT, R IS COVERED BY MEDICARE ..	2	<b>[GO TO PN QC15_K15]</b>
AGE IS INCORRECT .....	93	
REFUSED .....	-7	<b>[GO TO PN QC15_K22]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QC15_K22]</b>

**POST-NOTE QC15\_K13:**

**IF QC15\_K13 =2, SET KARMCARE = 1 AND SET KARINSURE = 1**

**QC15\_K14** What is your spouse's age, please?  
請告訴我您{配偶}的年齡?

**KAI3**

_____ YEARS OF AGE [HR: 18-105]		<b>[GO TO PN QC15_K22]</b>
REFUSED .....	-7	<b>[GO TO PN QC15_K22]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QC15_K22]</b>

**POST NOTE QC15\_K14: AIDATE**

**SET KAIDATE = CURRENT DATE (YYYYMMDD);**

**SET KAAGE = QC15\_K14;**

**IF KAAGE < 18, CODE AS IA AND TERMINATE**

**PROGRAMMING NOTE QC15\_K15:**  
**IF KARMCARE = 1, CONTINUE WITH QC15\_K15;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K22**

**QC15\_K15** Is this a MediCARE Advantage Plan?  
 這是 MediCARE Advantage 醫療保險計劃嗎？

**KAH123**

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

IF NEEDED, SAY: MediCARE Advantage 醫療保險計劃，有時也稱為 C 部分醫療保險計劃，是經 MediCARE 批准，由私營公司提供的。MediCARE Advantage 醫療保險計劃提供 Medicare A 部分和 B 部分的承保。

YES .....	1	
NO .....	2	[GO TO QC15_K18]
REFUSED .....	-7	[GO TO QC15_K18]
DON'T KNOW .....	-8	[GO TO QC15_K18]

**POST-NOTE QC15\_K15;**  
**IF QC15\_K15 = 1, SET KARMADV= 1**

**QC15\_K16** Is your spouse's MediCARE Advantage plan provided through an HMO, PPO, or Private Fee-for-Service Plan?

您配偶的 MediCARE Advantage 醫療保險計劃是通過 HMO, PPO, 還是 Private Fee-for-Service 計劃獲得的？

**KAH124**

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

**IF NEEDED, SAY:** HMO 表示「健康維護機構」。在 HMO 計劃中，您必須接受網路內醫生和醫院的服務。除非是急診，如果您在網路外接受服務，計劃通常不支付服務費。

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

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

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

**IF NEEDED, SAY:** Private Fee-for-Service 表示 MediCARE 每月給私營保險公司支付一定數額的款項。保險公司，而不是 MediCARE，來決定您要為獲取的服務支付多少錢。

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

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

HMO (HEALTH MAINTENANCE ORGANIZATION)	1
PPO (PREFERRED PROVIDER ORGANIZATION)	2
PFFS (PRIVATE FEE FOR SERVICE)	3
SNP (SPECIAL NEEDS PLAN)	4
OTHER (SPECIFY: _____)	91
REFUSED	-7
DON'T KNOW	-8

**QC15\_K17** What is the name of your spouse's MediCARE plan?

您(配偶)的 MediCARE 計劃名稱是什麼?

**KAH125**

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

**[IF R HAS DIFFICULTY RECALLING NAME, PROBE: 您配偶是否有醫療保險計劃卡或其他東西，上面有計劃名稱的？]**

ACCESS SENIOR HEALTHCARE .....	1
AETNA .....	2
AETNA GOLDEN MEDICARE .....	3
AIDS HEALTHCARE FOUNDATION, LA .....	4
ALAMEDA ALLIANCE FOR HEALTH .....	5
ALTAMED HEALTH SERVICES.....	83
ANTHEM BLUE CROSS OF CALIFORNIA .....	7
ASPIRE HEALTH PLAN .....	8
BLUE CROSS CALIFORNIACARE .....	9
BLUE CROSS SENIOR SECURE .....	79
BLUE SHIELD 65 PLUS .....	11
BLUE SHIELD OF CALIFORNIA .....	12
BRAND NEW DAY (UNIVERSAL CARE) .....	13
CALIFORNIA HEALTH AND WELLNESS PLAN ..	14
CALIFORNIAKIDS (CALKIDS) .....	15
CAL OPTIMA (CALOPTIMA ONE CARE) .....	16
CALVIVA HEALTH.....	17
CARE 1 <sup>ST</sup> HEALTH PLAN .....	18
CAREMORE HEALTH PLAN.....	19
CENTER FOR ELDERS' INDEPENDENCE.....	21
CEN CAL HEALTH .....	80
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .....	22
CENTRAL HEALTH PLAN.....	23
CHINESE COMMUNITY HEALTH PLAN .....	24
CHOICE PHYSICIANS NETWORK.....	25
CIGNA HEALTHCARE .....	26
CITIZENS CHOICE HEALTHPLAN .....	27
COMMUNITY CARE HEALTH PLAN .....	28
COMMUNITY HEALTH GROUP .....	29
CONTRA COSTA HEALTH PLAN.....	81
DAVITA HEALTHCARE PARTNERS PLAN .....	31
EASY CHOICE HEALTH PLAN.....	32
EPIC HEALTH PLAN .....	33
GEM CARE HEALTH PLAN .....	34
GOLD COAST HEALTH PLAN.....	35
GOLDEN STATE MEDICARE HEALTH PLAN.....	36
HEALTH NET .....	38
HEALTH NET SENIORITY PLUS.....	39
HEALTH PLAN OF SAN JOAQUIN .....	40
HEALTH PLAN SAN JP AUTHORITY .....	41
HERITAGE PROVIDER NETWORK .....	42
HUMANA GOLD PLUS .....	43
HUMANA HEALTH PLAN .....	44
IEHP (INLAND EMPIRE HEALTH PLAN) .....	45
INTER VALLEY HEALTH PLAN .....	46
HEALTH ADVANTAGE .....	82

KAISER PERMANENTE .....	47
KAISER PERMANENTE SENIOR ADVANTAGE..	48
KERN FAMILY HEALTH CARE .....	49
L.A. CARE HEALTH PLAN .....	50
MD CARE .....	51
MOLINA HEALTHCARE OF CALIFORNIA .....	54
MONARCH HEALTH PLAN .....	55
ON LOK SENIOR HEALTH SERVICES .....	56
PARTNERSHIP HEALTHPLAN OF CALIFORNIA	57
PIH HEALTH CARE SOLUTIONS .....	58
PREMIER HEALTH PLAN SERVICES .....	59
PRIMECARE MEDICAL NETWORK .....	60
PROVIDENCE HEALTH NETWORK .....	61
SCRIPPS HEALTH PLAN SERVICES .....	68
SEASIDE HEALTH PLAN .....	69
SAN FRANCISCO HEALTH PLAN .....	84
SANTA CLARA FAMILY HEALTH PLAN .....	90
SAN MATEO HEALTH COMMISION .....	86
SANTA BARBARA .....	88
SATELLITE HEALTH PLAN .....	92
SCAN HEALTH PLAN .....	67
SHARP HEALTH PLAN .....	70
SUTTER HEALTH PLAN .....	71
SUTTER SENIOR CARE .....	72
UNITED HEALTHCARE .....	73
UNITED HEALTHCARE SECURE HORIZON .....	74
UNIVERSITY HEALTHCARE ADVANTAGE .....	75
VALLEY HEALTH PLAN .....	76
VENTURA COUNTY HEALTH CARE PLAN .....	77
WESTERN HEALTH ADVANTAGE .....	78
CHAMPUS/CHAMP-VA .....	93
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	87
VA HEALTH CARE SERVICES .....	89
MEDI-CAL .....	52
MEDICARE .....	53
OTHER (SPECIFY: _____) .....	85
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE FOR QC15\_K17:****ALL ANSWERS GO TO PROGRAMMING NOTE QC15\_K19;****IF QC15\_K17 = 93, 87, OR 89 THEN KARMILIT = 1**

**QC15\_K18** Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Does your spouse have this type of health insurance?  
 有些有資格享受 MediCARE 的人另外還有私人保險，有時稱為 Medigap 或 Medicare 補充保險。您有此類健康保險嗎？

**KAI4**

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

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

YES .....	1	
NO .....	2	[GO TO PN QC15_K23]
REFUSED .....	-7	[GO TO PN QC15_K23]
DON'T KNOW .....	-8	[GO TO PN QC15_K23]

**POST-NOTE FOR QC15\_K18:**

IF QC15\_K18 = 1, SET KARSUPP = 1

**PROGRAMMING NOTE QC15\_K19:**

IF KARMADV = 1 (MEDICARE ADVANTAGE) CONTINUE WITH QC15\_K19 AND DISPLAY "MediCARE Advantage plan";

IF KARSUPP = 1 (HAS SUPPLEMENT) CONTINUE WITH QC15\_K19 AND DISPLAY "MediCARE Supplement plan";

ELSE GO TO PROGRAMMING NOTE QC15\_K23

**QC15\_K19** For the {MediCARE Advantage plan/MediCARE Supplement plan}, did your spouse sign up directly, or did your spouse get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?  
 有關{MediCARE Supplement plan}，您{配偶}是直接註冊參加還是通過目前的 雇主、以前的雇主、工會、家庭企業、AARP 還是以其他方式獲得該保險？

**KAH126**

[IF NEEDED, SAY: "AARP stands for the American Association of Retired Persons."]

[IF NEEDED, SAY: "AARP 代表「美國退休人協會」。"]

DIRECTLY .....	1
ADULT RESPONDENT'S CURRENT EMPLOYER .....	2
ADULT RESPONDENT'S FORMER EMPLOYER .....	3
ADULT RESPONDENT'S UNION .....	4
FAMILY BUSINESS .....	5
AARP .....	6
SKA'S EMPLOYER .....	7
SKA'S UNION .....	8
PROFESSIONAL/FRATERNAL ORGANIZATION .....	9
OTHER .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_K20**

Does your spouse pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles your spouse or your family may have had to pay.

您的配偶是否為這項醫療保險計劃支付任何或全部保費或費用？請勿包括您的配偶或您的家庭可能必須支付的任何共付款或自付額費用。

**KAH53**

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]**

**[IF NEEDED, SAY: 「協同付款是您每次看病或使用健康護理系統時支付的部份健康護理[費用，而保險計劃支付您的主要健康護理保賠費。」]**

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

**[IF NEEDED, SAY:免賠額是您的保險計劃開始付款之前您支付的醫療護理費。]**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY:保費是您的醫療保險計劃的每月收費。]**

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

**QC15\_K21**

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

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

**KAH54**

YES .....1  
NO .....2 **[GO TO PN QC15\_K23]**  
REFUSED ..... -7 **[GO TO PN QC15\_K23]**  
DON'T KNOW ..... -8 **[GO TO PN QC15\_K23]**



**QC15\_K22** Who is that?  
是誰?

**KAH55**

[IF NEEDED, SAY: "Who besides your spouse pays any portion of that cost for that plan, such as your employer, a union, or professional organization?"]

[IF NEEDED, SAY: 「除了你本人，還有誰支付這項計劃的任何費用？例如，你的雇主、工會或專業機構。」]

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他人或機構嗎？」]

ADULT RESPONDENT'S CURRENT EMPLOYER .1  
ADULT RESPONDENT'S FORMER EMPLOYER ...2  
ADULT RESPONDENT'S UNION .....3  
SKA'S CURRENT EMPLOYER .....4  
SKA'S FORMER EMPLOYER .....5  
PROFESSIONAL/FRATERNAL ORGANIZATION...6  
MEDICAID/MEDI-CAL ASSISTANCE .....7  
OTHER..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE FOR QC15\_K22:**

IF QC15\_K22 = 7, SET KARMCAL = 1;

**PROGRAMMING NOTE QC15\_K23:**

IF KARMCAL = 1, DISPLAY "Is it correct that your spouse is";

ELSE DISPLAY "Is your spouse"

**QC15\_K23** {Is it correct that your spouse is/Is your spouse} covered by Medi-CAL?  
您(配偶) 享受 Medi-CAL 的保賠嗎?

**KAI6**

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

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

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

**POST-NOTE FOR QC15\_K23:**

IF QC15\_K23 = 1, SET KARMCAL = 1 AND SET KARINSUR = 1;

IF KARMCAL = 1 AND QC15\_K23 = 2, SET KARMCAL = 0

**PROGRAMMING NOTE QC15\_K24:** IF KARSUPP = 1, DISPLAY "Besides the Medicare supplement plan you told me about, is" AND "any other";  
 ELSE IF ARMADV = 1, DISPLAY "Besides the Medicare Advantage plan you told me about, is" AND "any other";  
 ELSE DISPLAY "Is" AND "a"

**QC15\_K24** {Besides the Medicare supplement plan you told me about, is/Besides the Medicare Advantage plan you told me about}, is your spouse covered by {any other/a} health insurance plan or HMO through a current or former employer or union?  
 您(配偶) 有沒有享受目前或以前的雇主或工會提供的醫療保險計劃或 HMO ?

**KAI8**

[IF NEEDED, SAY: "...either through your spouse's own or someone else's employment?"]

[IF NEEDED, SAY: 「... 可以是通過您(配偶) 本人或其他人的工作？」]

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

**POST-NOTE FOR QC15\_K24:**

IF QC15\_K24 = 1, SET KAREMPOT = 1 AND SET KARINSUR = 1

**PROGRAMMING NOTE QC15\_K25:**

IF KARINSUR ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, AND EMPLOYER), CONTINUE WITH QC15\_K25;  
 ELSE GO TO PROGRAMMING NOTE QC15\_K27

**QC15\_K25** Is your spouse covered by a health insurance plan that your spouse purchased directly from an insurance company or HMO, or through Covered California?  
 你的配偶是否享受你直接從保險公司或 HMO 或透過 Covered California 購買的醫療保險計劃的承保?

**KAI11**

[IF NEEDED, SAY: "Don't include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital."]

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

YES .....1  
 NO .....2 [GO TO PN QC15\_K27]  
 REFUSED ..... -7 [GO TO PN QC15\_K27]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K27]

**POST-NOTE FOR QC15\_K25:**

IF QC15\_K25 = 1, SET KARDIREC = 1 AND SET KARINSUR = 1

**PROGRAMMING NOTE QC15\_K26:**  
**IF KARDIREC = 1, THEN CONTINUE WITH QC15\_K26;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K27**

**QC15\_K26** How did your spouse purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
 你的配偶是如何購買這項健康保險的 — 是直接從保險公司或 HMO 購買還是透過 Covered California 購買？

**KAH104**

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

**POST-NOTE FOR QC15\_K26:**  
**IF QC15\_K26= 2, THEN SET KARHBEX = 1**

**PROGRAMMING NOTE FOR QC15\_K27:**  
**IF QC15\_K24 = 1 (EMPLOYER-BASED COVERAGE) OR QC15\_K25 = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH QC15\_K27;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K35**

**QC15\_K27** Was this plan obtained in your spouse's own name or in the name of someone else?  
 這項計劃是用您的配偶姓名申請還是用其他人的姓名申請的？

**KAI9**

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

IN SPOUSE'S OWN NAME .....1 [GO TO PN QC15\_K29]  
 IN SOMEONE ELSE'S NAME .....2  
 REFUSED ..... -7 [GO TO PN QC15\_K29]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K29]

**POST-NOTE FOR QC15\_K27:**  
**IF QC15\_K24 = 1 AND QC15\_K29 = 1 SET KAREMPOW = 1 AND SET KARINSUR = 1 AND SET KAREMPOT = 0;**  
**IF QC15\_K24 = 1 AND QC15\_K29 = 2, -7, OR -8 SET KAREMPOT = 1 AND SET KARINSUR = 1;**  
**IF QC15\_K25 = 1 AND QC15\_K29 = 1 SET KARDIROW = 1 AND KARINSUR = 1;**  
**IF QC15\_K25 = 1 AND QC15\_K29 = 2, -7, OR -8 SET KARDIROT = 1 AND KARINSUR = 1**

**PROGRAMMING NOTE QC15\_K28:**  
**IF KAAGE < 26, DISPLAY "spouse's parent's name";**

**QC15\_K28** Is the plan in your own name {or} {your spouse's parent's name}  
是否以您的名義或您的配偶姓參加該項計劃？

**KAI9A**

IN OWN NAME .....1  
IN SPOUSE'S PARENT'S NAME .....2  
IN SOMEONE ELSE'S NAME .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE FOR QC15\_K28:**

IF QC15\_K24 = 1 AND QC15\_K28 = 1 SET KAREMPSP = 1 AND KAREMPOT = 0 AND KARSAMES=1;  
IF QC15\_K26 = 1 AND QC15\_K28 = 1 SET KAREMPSP = 1 AND KAREMPOT = 0 AND KARSAMES=1 AND KSPHBEX = 1;  
IF QC15\_K24 = 1 AND QC15\_K28 = 2 SET KAREMPPA =1 AND KAREMPOT = 0;  
IF QC15\_K25 = 1 AND QC15\_K28 = 1 SET KARDIRSP = 1 AND KARDIROT = 0 AND KARSAMES=1;  
IF QC15\_K25 = 1 AND QC15\_K28 = 2 SET KARDIRPA = 1 AND KARDIROT = 0

**PROGRAMMING NOTE QC15\_K29:**

IF QC15\_K24 = 1 (EMPLOYER-BASED COVERAGE), CONTINUE WITH QC15\_K29;  
IF KAREMPOW = 1 THEN DISPLAY {you};  
IF KAREMPSP = 1 OR KAREMPPA =1 OR KAREMPOT = 1 THEN DISPLAY {he or she};  
ELSE GO TO PROGRAMMING NOTE QC15\_K30;

**QC15\_K29** How did {you/he or she} sign up for this health insurance – through an employer, through a union, or through Covered California's SHOP program?  
{你/他或她}是如何註冊參加這項健康保險的 — 透過雇主、工會還是透過 Covered California 的 SHOP 計劃？

**KAH105**

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

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

EMPLOYER .....1  
UNION.....2  
SHOP / COVERED CALIFORNIA .....3  
OTHER (SPECIFY: .....).92  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE FOR QC15\_K29:**

IF QC15\_K29 = 3, THEN SET KARHBEX = 1

**PROGRAMMING NOTE QC15\_K30**

**IF KARHBEX = 1, THEN CONTINUE WITH QC15\_K30;  
ELSE GO TO PROGRAMMING NOTE QC15\_K32;**

**QC15\_K30** Was this a bronze, silver, gold or platinum plan?  
這是銅、銀、金還是白金計劃？

**KAH106**

BRONZE .....1  
SILVER .....2  
GOLD .....3  
PLATINUM .....4  
MEDI-CAL / MEDICAID .....5  
MINIMUM COVERAGE/CATASTROPHIC .....6  
OTHER (SPECIFY: .....). 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K31:**

**IF QC15\_K30 = 3, THEN GO TO QC15\_K32;  
ELSE CONTINUE WITH QC15\_K31;**

**QC15\_K31** Was there a subsidy or discount on the premium for this plan?  
這項計劃的保費是否有補貼或折扣？

**KAH107**

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

**PROGRAMMING NOTE QC15\_K32:**

**IF QC15\_K24 = 1 (EMPLOYER-BASED COVERAGE) OR QC15\_K25 = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH QC15\_K32;  
ELSE GO TO PROGRAMMING NOTE QC15\_K35**

**QC15\_K32**

Does your spouse pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles your spouse or your family may have had to pay.

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

**KAH57**

**[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while a health plan pays for your main health care coverage."]**

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

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

**[IF NEEDED, SAY: "自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"]**

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

**[IF NEEDED, SAY: "保費是您的健康保險計劃的每月收費。"]**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QC15\_K34]**

**QC15\_K33**

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

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

**KAH58**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QC15\_K35]**

**[GO TO PN QC15\_K35]**

**[GO TO PN QC15\_K35]**

**PROGRAMMING NOTE QC15\_K34:**

**IF QC15\_K32 = 2 THEN DISPLAY “Who besides your spouse pays any portion of the cost for this plan, such as your spouse’s employer, a union, or professional organization”;**  
**ELSE DISPLAY “Who is that”**

**QC15\_K34**

Who besides your spouse pays any portion of the cost for this plan, such as your spouse’s employer, a union, or professional organization/Who is that?

除了你配偶本人，還有誰支付這項計劃的任何費用？例如，你的配偶雇主、工會或專業機構。是？

**KAH56**

**[IF NEEDED, SAY: “Who besides your spouse pays any portion of that cost for that plan, such as your spouse’s employer, a union, or professional organization?”]**

**[IF NEEDED, SAY: 「除了你配偶本人，還有誰支付這項計劃的任何費用？例如，你的配偶雇主、工會或專業機構。」]**

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

**[PROBE: 「還有任何其他人或機構嗎？」]**

ADULT RESPONDENT’S CURRENT EMPLOYER	.1
ADULT RESPONDENT’S FORMER EMPLOYER	...2
ADULT RESPONDENT’S UNION	.....3
SKA’S CURRENT EMPLOYER	.....4
SKA’S FORMER EMPLOYER	.....5
PROFESSIONAL/FRATERNAL ORGANIZATION	...6
MEDICAID/MEDI-CAL ASSISTANCE	.....7
MEDICARE	.....9
COVERED CALIFORNIA	..... 11
OTHER	..... 91
REFUSED	..... -7
DON’T KNOW	..... -8

**POST-NOTE QC15\_K34:**

**IF (QC15\_K34\_1 OR QC15\_K34\_2 OR QC15\_K34\_3) = 1, SET KAREMPOW = 1;**

**IF (QC15\_K34\_4 OR QC15\_K34\_5) = 1, SET KAREMPSP = 1;**

**IF QC15\_K34\_7 = 1, SET KARMCAL = 1 AND SET KARDIREC = 0;**

**IF QC15\_K34\_9 = 1, SET KARMCARE = 1 AND SET KARDIREC = 0;**

**IF QC15\_K34\_12 = 1, SET KARHBEX = 1**

**PROGRAMMING NOTE QC15\_K35:**

**IF [QC15\_K6 = 1 OR 2 (R WORKED LAST WEEK) OR QC15\_K7 = 1 (R USUALLY WORKS)] AND QC15\_K9 ≠ 3 (NOT SELF-EMPLOYED) AND KAREMPOW ≠ 1 (NO EMPLOYER-BASED COVERAGE), CONTINUE WITH QC15\_K35;  
ELSE GO TO PROGRAMMING NOTE QC15\_K39**

**QC15\_K35** Does your spouse's employer offer health insurance to any of its employees?  
您的配偶雇主有沒有提供醫療保險給任何員工？

**KAI13**

YES .....	1	
NO .....	2	[GO TO PN QC15_K39]
REFUSED .....	-7	[GO TO PN QC15_K39]
DON'T KNOW .....	-8	[GO TO PN QC15_K39]

**QC15\_K36** Is {he/she/he or she} eligible to be in this plan?  
您 {配偶} 是否有資格參加該項計劃？

**KAI14**

YES .....	1	
NO .....	2	[GO TO QC15_K38]
REFUSED .....	-7	[GO TO PN QC15_K39]
DON'T KNOW .....	-8	

**QC15\_K37** What is the ONE main reason why {he/she/he or she} isn't in this plan?  
您 {配偶} 沒有參加該項計劃的一個主要原因是什麼？

**KAI15**

COVERED BY ANOTHER PLAN .....	1	[GO TO PN QC15_K39]
TOO EXPENSIVE .....	2	[GO TO PN QC15_K39]
DIDN'T LIKE PLAN OFFERED .....	3	[GO TO PN QC15_K39]
DON'T NEED OR BELIEVE IN HEALTH INSURANCE .....	4	[GO TO PN QC15_K39]
OTHER (SPECIFY: _____) .....	91	[GO TO PN QC15_K39]
REFUSED .....	-7	[GO TO PN QC15_K39]
DON'T KNOW .....	-8	[GO TO PN QC15_K39]

**QC15\_K38** What is the ONE main reason why {he/she/he or she} is not eligible for this plan?  
您 {配偶} 沒有資格參加該項計劃的一個主要原因是什麼？

**KAI15A**

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



**PROGRAMMING NOTE QC15\_K39:**

**IF KARINSUR ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, OR PRIVATE PLAN), CONTINUE WITH QC15\_K39;  
ELSE GO TO PN QC15\_K40**

**QC15\_K39** Is your spouse covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?

您 {配偶} 是否享受 CHAMPUS/CHAMP VA, Tricare, 或其它軍隊醫療護理計劃？

**KAI16**

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

**POST-NOTE QC15\_K39:**

**IF QC15\_K39 = 1, SET KARMILIT = 1 AND SET KARINSUR = 1**

**PROGRAMMING NOTE QC15\_K40:**

**IF KARINSUR ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, OR HEALTHY KIDS) CONTINUE WITH QC15\_K40;  
ELSE GO TO PROGRAMMING NOTE QC15\_K41**

**QC15\_K40** Is your spouse covered by some other government health program, such as AIM, "Mister MIP," the Family PACT program, Healthy Kids, or something else?

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

**KAI17**

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers; Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and Healthy Kids is program for children in your county."]**

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

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

**POST-NOTE QC15\_K40:**

**IF QC15\_K40 = 1, SET KAROTHGO = 1 AND SET KARINSUR = 1**

**PROGRAMMING NOTE QC15\_K41:**

**IF KARINSUR ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, AND OTHER GOVERNMENT PLAN), CONTINUE WITH QC15\_K41; ELSE GO TO PROGRAMMING NOTE QC15\_K45**

**QC15\_K41** Does your spouse have any health insurance coverage through a plan that I missed?  
您 {配偶} 有沒有享受任何我可能漏掉的其它醫療保險計劃？

**KAI18**

YES .....	1	
NO .....	2	[GO TO PN QC15_K45]
REFUSED .....	-7	[GO TO PN QC15_K45]
DON'T KNOW .....	-8	[GO TO PN QC15_K45]

**QC15\_K42** What type of health insurance does your spouse have?  
您 {配偶} 有哪一種健康保險？

**KAI19**

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: "還有任何其他保險嗎？"]

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

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP, OR OTHER ORGANIZATION.....	2
PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL .....	5
CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC .....	8
COVERED CALIFORNIA.....	10
SHOP THROUGH COVERED CALIFORNIA.....	11
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN.....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QC15\_K42:**

IF QC15\_K42\_1 = 1, SET KAREMPOT = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_2 = 1, SET KAREMPOT = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_3 = 1, SET KARDIREC = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_4 = 1, SET KARMCARE = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_5 = 1, SET KARMCAL = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_7 = 1, SET KARMILIT = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_8 = 1, SET KARIHS = 1;  
IF QC15\_K42\_10 = 1, SET KAROTHER = 1 AND SET KARINSUR = 1;  
IF QC15\_K42\_12 = 1, SET KARHBEX = 1 AND KARINSUR = 1;  
IF QC15\_K42\_13 = 1, SET KARHBEX = 1 AND KARINSUR = 1;  
IF QC15\_K42\_1 = -7 OR -8, SET KAROTHER = 1 AND SET KARINSUR = 1

**PROGRAMMING NOTE QC15\_K43:**  
**IF QC15\_K42 = 1, 2, OR 3 CONTINUE WITH QC15\_K43;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K45**

**QC15\_K43** Was this plan obtained in your spouse's name or in the name of someone else?  
 該項計劃是以您 {配偶} 的名義還是以其他人的名義獲得?

**KAH59**

[PROBE: "Even someone who does not live in this household?"]

[PROBE: "甚至包括不住在您家中的人。"]

IN SPOUSE'S OWN NAME .....	1	[GO TO PN QC15_K45]
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	[GO TO PN QC15_K45]
DON'T KNOW .....	-8	[GO TO PN QC15_K45]

**POST-NOTE QC15\_K43:**  
**IF (QC15\_K42\_1 = 1 OR QC15\_K42\_2 = 1) AND QC15\_K43 = 1, SET KAREMPOW = 1, KAREMPOT = 0, AND KARINSUR = 1;**  
**IF QC15\_K42\_3 = 1 AND QC15\_K43 = 1, SET KARDIROW = 1, KARDIROT = 0, AND KARINSUR = 1;**  
**IF (QC15\_K42\_1 = 1 OR QC15\_K42\_2 = 1) AND (QC15\_K43 = 2, -7, -8), SET KAREMPOT = 1, KAREMPOW = 0, AND KARINSUR = 1;**  
**IF QC15\_K42\_3 = 1 AND (QC15\_K43 = 2, -7, -8), SET KARDIROT = 1, KARDIROW = 0, AND KARINSOW = 1**

**PROGRAMMING NOTE QC15\_K44:**  
**IF KAAGE < 25, THEN DISPLAY "spouse's parent's name";**

**QC15\_K44** Is the plan in your own name {or} {your spouse's parent's name,}?  
 該項計劃是以您的{ spouse's/parent's/spouse's, parent's, or someone else's} 名義獲得的嗎?

**KAH60**

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

**POST-NOTE QC15\_K44:**  
**IF QC15\_K44 = 1, SET KAREMPSP = 1 AND SET KAREMPOT = 0;**  
**IF QC15\_K44 = 2, SET KAREMPPA = 1 AND SET KAREMPOT = 0**

**QC15\_K45** These next questions are about the type of health insurance you may have.  
您的 {配偶} 能享受 Medicare 保賠嗎?

**KAI37intro**

**PROGRAMMING NOTE QC15\_K46:**  
**IF ARM CARE = 1, CONTINUE WITH QC15\_K49 AND DISPLAY “You said that your spouse is covered by Medicare.” AND “also”;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K49**

**QC15\_K46** {You said that your spouse is covered by Medicare.} Are you {also} covered by Medicare?  
您的 {配偶} 能享受 Medicare 保賠嗎?

**KAI37**

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

**POST-NOTE QC15\_K46:**  
**IF QC15\_K46 = 1, SET KSPMCARE = 1 AND SET KSPINSUR = 1**

**PROGRAMMING NOTE QC15\_K47:**  
**IF KSPMCARE = 1 AND KARMADV ≠ 1, CONTINUE WITH QC15\_K47 WITHOUT DISPLAY;**  
**ELSE IF KSPMCARE = 1 AND ARMADV = 1, CONTINUE WITH QC15\_K47 AND DISPLAY “You said that your spouse has a Medicare Advantage plan.” AND “also”;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K48**

**QC15\_K47** {You said that your spouse has a Medicare Advantage plan.} Do you {also} have a Medicare Advantage plan?  
你的 {配偶} 的 Medicare 是通過 HMO 提供的嗎?

**KAH127**

**[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.”]**

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

**POST-NOTE QC15\_K47:**  
**IF QC15\_K47 = 1, THEN SET KSPMHMO = 1 AND SET SKPINSUR = 1**

**PROGRAMMING NOTE QC15\_K48:****IF KSPMADV = 1, THEN SKIP TO PROGRAMMING NOTE QC15\_K49;****ELSE IF KSPMCARE = 1, CONTINUE WITH QC15\_K48 WITHOUT DISPLAY;****IF KARSUPP = 1, CONTINUE WITH QC15\_K48 AND DISPLAY “You said that your spouse has a Medicare Supplement plan.” AND “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K49****QC15\_K48** {You said that your spouse has a Medicare Supplement plan.} Do you have a Medicare supplement plan?

您說您的配偶享受 Medicare 補充計劃保賠。您也享受 Medicare 補充計劃保賠嗎?您享受 Medicare 補充計劃保賠嗎?

**KAI37A**

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

**POST-NOTE QC15\_K48:****IF QC15\_K48 = 1, THEN SET KSPSUPP = 1 AND SET KSPINSUR = 1****PROGRAMMING NOTE QC15\_K49:****IF KARMCAL = 1, CONTINUE WITH QC15\_K49 WITHOUT DISPLAY;****IF KARMCARE = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K50****QC15\_K49** You said your spouse {also} has Medi-Cal. Are you also covered by Medi-Cal?  
 您曾經說您的配偶(也)享受 Medi-Cal。您也享受 Medi-Cal 保賠嗎?**KAI38**

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

**POST-NOTE QC15\_K49:****IF QC15\_K49 = 1, SET KSPMCAL = 1 AND SET KSPINSURE = 1**

**PROGRAMMING NOTE QC15\_K50:****IF KAREMPOW = 1 AND KARHBEX ≠ 1, CONTINUE WITH QC15\_K50;****IF KARMCARE = 1 OR KARMCAL = 1 OR KARHFAM = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K52**

**QC15\_K50** You said your spouse {also} has insurance from YOUR SPOUSE'S current or former employer or union. Are you also covered by the insurance from YOUR SPOUSE'S employer or union?

您說您的配偶有通過您的配偶的目前或以前雇主或工會提供的保險

。 您也享受您的配偶的雇主提供的保險保賠嗎？

**KAI40**

YES .....1 [GO TO PN QC15\_K53]  
 NO .....2  
 OTHER .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QC15\_K50:****IF QC15\_K50 = 1, SET KSPEMPSP = 1 AND SET KSPINSUR = 1 AND KARSAMES=1;****PROGRAMMING NOTE QC15\_K51:****IF KARHBEX = 1 AND (KAREMPOW = 1 OR KAREMPOT = 1 OR KAREMPSP = 1), THEN CONTINUE WITH QC15\_K51;****IF KARMCARE = 1 OR KARMCAL = 1 OR KARHFAM = 1, THEN DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K52**

**QC15\_K51** You said you have health insurance through Covered California's SHOP program. Is your (SPOUSE/PARTNER) {also} covered by this health insurance?  
 你說你是透過Covered California的SHOP計劃參加保健計劃。 你的{配偶/同居者}{也}享受這項保健計劃的承保嗎？

**KAH108**

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

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

YES .....1 [GO TO PN QC15\_K53]  
 NO .....2  
 OTHER .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QC15\_K51:****IF QC15\_K51 = 1, SET KSPEMPSP = 1 AND SET KSPINSUR = 1 AND KARSAMES=1 AND KSPHBEX = 1;**

**PROGRAMMING NOTE QC15\_K52:**

**IF QC15\_K1 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QC15\_K2 = 1 (USUALLY WORKS),  
CONTINUE WITH QC15\_K52;**

**IF AREMPSP = 1 DISPLAY “You said your spouse has insurance from your employer or union.”;**

**IF SPINSURE = 1, THEN DISPLAY “also”;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K53**

**QC15\_K52** {You said your spouse has insurance from your employer or union. Do you {also} have coverage through you OWN employer?

您說您的配偶享受您的雇主或工會提供的保險。您是否通過您自己的雇主享受保賠？

**KAI40A**

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

**POST-NOTE QC15\_K52:**

**IF QC15\_K52 = 1, SET KSPEMPOW = 1 AND SET KSPINSUR = 1**

**PROGRAMMING NOTE QC15\_K53:**

**IF KARDIREC = 1 AND KARHBEX ≠ 1, CONTINUE WITH QC15\_K53;**

**IF KARMCARE = 1 OR KARMCAL = 1 OR KAREMPOW = 1, DISPLAY “also”;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K54**

**QC15\_K53** You said your spouse {also} has a plan your spouse purchased directly from the insurer. Are you also covered by this plan?

您說您的配偶有一項您的配偶直接從保險公司購買的計劃。您也享受這項計劃的保賠嗎？

**KAI41**

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

**POST-NOTE QC15\_K53:**

**IF QC15\_K53 = 1, SET KSPDIREC = 1 AND SET KSPINSUR = 1 AND KARSAMES=1;**

**PROGRAMMING NOTE QC15\_K54:****IF KARDIREC = 1 AND KARHBEX = 1, CONTINUE WITH QC15\_K54;****IF KARMCARE = 1 OR KARMCAL = 1 OR KARHFAM = 1 OR KAREMPOW = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K55****QC15\_K54** You said you have a plan you purchased directly from Covered California. Is your (SPOUSE/PARTNER) {also} covered by this plan?

您說您有一項直接從 Covered California 購買的計劃。您的配偶/伴侶享受這項計劃的承保嗎？

**KAH109**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**POST-NOTE QC15\_K54:****IF QC15\_K54 = 1, SET KSPDIREC = 1 AND SET KSPINSUR = 1 AND KARSAMES=1 AND KSPHBEX = 1;****PROGRAMMING NOTE QC15\_K55:****IF KARMILIT = 1, CONTINUE WITH QC15\_K55;****IF KARMCARE = 1 OR KARMCAL = 1 OR KARDIRECT = 1 OR KAREMPOW = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QC15\_K56****QC15\_K55** You said your spouse {also} has health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Are you also covered by this plan?

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

**KAI42**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**POST-NOTE QC15\_K54:****IF QC15\_K54 = 1, SET KSPMILIT = 1 AND SET KSPINSURE = 1 AND KARSAMES=1;**



**PROGRAMMING NOTE QC15\_K56:**

**IF KAROTHGO = 1, CONTINUE WITH QC15\_K56;**

**IF QC15\_K40 = 1, THEN DISPLAY “AIM”;**

**IF QC15\_K40 = 2, THEN DISPLAY “MRMIP”;**

**IF QC15\_K40 = 3, THEN DISPLAY “Family PACT”;**

**IF QC15\_K40 = 91, THEN DISPLAY “some government health plan”;**

**IF KARMCARE = 1 OR KARMCAL = 1 OR KARDIREC = 1 OR KAREMPOW = 1 OR KARMILIT = 1, DISPLAY “also”;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K57**

**QC15\_K56** You said your spouse {also} has health insurance through {AIM/MRMIP/Family PACT/PCIP/some government health plan}. Are you also covered by this plan?  
你說你{配偶}透過一些政府醫療保險計劃享受醫療保險。你是否也在這項計劃的承保範圍內?

**KAI42A**

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

**POST-NOTE QC15\_K56:**

**IF QC15\_K56 = 1, SET KSPOTHGO = 1 AND SET KSPINSUR = 1**

**PROGRAMMING NOTE QC15\_K57:**

**IF KSPINSUR ≠ 1, DISPLAY “any”;**

**ELSE DISPLAY “through any other source”**

**QC15\_K57** Do you have {any} health insurance coverage {through any other source}?  
您是否有任何健康保險?

**KAI46**

YES .....1  
NO .....2 [GO TO PN QC15\_K59]  
REFUSED .....-7 [GO TO QC15\_K59]  
DON'T KNOW .....-8 [GO TO QC15\_K59]

**QC15\_K58** What type of health insurance do you have?  
您有哪一種健康保險？

**KAI47**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "還有任何其他保險嗎？"]**

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

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

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

**[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的？"]**

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION .....	2
PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL .....	5
CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC .....	8
COVERED CALIFORNIA .....	10
SHOP THROUGH COVERED CALIFORNIA .....	11
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QC15\_K58:**

**IF QC15\_K58\_1 = 1, SET KSPEMPOT = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_2 = 1, SET KSPEMPOT = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_3 = 1, SET KSPDIREC = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_4 = 1, SET KSPMCARE = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_5 = 1, SET KSPMCAL = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_7 = 1, SET KSPMILIT = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_8 = 1, SET KSPIHS = 1;**

**IF QC15\_K58\_10 = 1, SET KSPOTHER = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_12 = 1, SET KSPHBEX = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_13 = 1, SET KSPHBEX = 1 AND SET KSPINSUR = 1;**

**IF QC15\_K58\_1 = -7 OR -8, SET KSPOTHER = 1 AND SET KSPINSUR = 1**

**PROGRAMMING NOTE QC15\_K59:**

**IF KSPINSUR ≠ 1, CONTINUE WITH QC15\_K59;**

**ELSE IF KSPINSUR = 1 AND (KSPEMPOT = 1 OR KSPDIREC = 1), THEN SKIP TO PROGRAMMING NOTE QC15\_K61;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K67**

**QC15\_K59** You said you have NO health insurance from any source. Is this correct?  
 您說您沒有來自任何來源的健康保險，對不對？

**KAI48**

YES .....	1	<b>[GO TO PN QC15_K63]</b>
NO .....	2	
REFUSED .....	-7	<b>[GO TO PN QC15_K63]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QC15_K63]</b>

**QC15\_K60** What type of health insurance do you have?  
 您有哪一種健康保險？

**KAI49**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: "還有任何其他保險嗎？"]**

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

**[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的？"]**

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION .....	2
PURCHASED DIRECTLY FROM HEALTH PLAN (BY R OR ANYONE ELSE) .....	3
MEDICARE .....	4
MEDI-CAL .....	5
CHAMPUS/CHAMP-VA, TRICARE, VA OR SOME OTHER MILITARY HEALTH CARE .....	7
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM OR URBAN INDIAN CLINIC .....	8
COVERED CALIFORNIA .....	10
SHOP THROUGH COVERED CALIFORNIA .....	11
OTHER GOVERNMENT HEALTH PLAN .....	91
OTHER NON-GOVERNMENT HEALTH PLAN .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QC15\_K60:**

IF QC15\_K60\_1 = 1, SET KSPEMPOT = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_2 = 1, SET KSPEMPOT = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_3 = 1, SET KSPDIREC = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_4 = 1, SET KSPMCARE = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_5 = 1, SET KSPMCAL = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_7 = 1, SET KSPMILIT = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_8 = 1, SET KSPIHS = 1;  
 IF QC15\_K60\_10 = 1, SET KSPOTHER = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_12 = 1, SET KSPHBEX = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_13 = 1, SET KSPHBEX = 1 AND SET KSPINSUR = 1;  
 IF QC15\_K60\_1 = -7 OR -8, SET KSPOTHER = 1 AND SET KSPINSUR = 1

**PROGRAMMING NOTE QC15\_K61:**

**IF QC15\_K58 = (1, 2, 3, 10, 11) OR QC15\_K63 = (1, 2, 3, 10, 11) THEN CONTINUE WITH QC15\_K61;  
ELSE SKIP TO PROGRAMMING NOTE QC15\_K63**

**QC15\_K61** Was this plan obtained in your name or in the name of someone else?  
這項計劃是以你的名義還是以其他人的名義獲得的?

**KAH62**

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

**[IF NEEDED, SAY: 「甚至包括不住在你家中的人。」]**

IN SKA'S NAME .....	1	<b>[GO TO PN QC15_K63]</b>
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	<b>[GO TO PN QC15_K63]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QC15_K63]</b>

**POST-NOTE QC15\_K61:**

**IF QC15\_K61 = 1 (SKA'S NAME) AND [QC15\_K58\_1 = 1 OR QC15\_K58\_2 = 1 OR QC15\_K58\_3 = 1  
OR QC15\_K60\_1 = 1 OR QC15\_K60\_2 = 1 OR QC15\_K60\_3 = 1], SET KSPENPOW = 1 AND  
KSPEMPOT = 0;**

**ELSE IF QC15\_K61 = 1 AND [QC15\_K58\_12 = 1 OR QC15\_K58\_13 = 1 OR QC15\_K60\_12 = 1 OR  
QC15\_K60\_13 = 1], SET KSPHBEX = 1**

**QC15\_K62** Is the plan in your spouse's or your spouse's parent's, or someone else's name?  
該項計劃是以您(配偶), 您(配偶)的父母還是以其他人的名義獲得?

**KAH63**

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

**POST-NOTE QC15\_K62:**

**IF QC15\_K62 = 1 (ADULT RESPONDENT'S NAME) AND [QC15\_K58\_1 = 1 OR QC15\_K58\_2 = 1 OR  
QC15\_K58\_3 = 1 OR QC15\_K60\_1 = 1 OR QC15\_K60\_2 = 1 OR QC15\_K60\_3 = 1], SET KSPENPAR  
= 1 AND KSPEMPOT = 0 AND KARSAMES = 1;**

**IF QC15\_K62 = 1 AND [QC15\_K58\_12 = 1 OR QC15\_K58\_13 = 1 OR QC15\_K60\_12 = 1 OR  
QC15\_K60\_13 = 1], SET KSPHBEX = 1 AND  
KARSAMES = 1;**

**IF QC15\_K62 = 2 (ADULT RESPONDENT'S PARENT'S NAME), SET KSPARPAR = 1 AND SET  
KSPEMPOT = 0**

**PROGRAMMING NOTE QC15\_K63:**

**IF KSPEMPOW = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO QC15\_K67;  
 ELSE IF [QC15\_K1 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QC15\_K2 = 1 (USUALLY WORKS)] AND QC15\_K4 ≠ 3 (SPOUSE/PARTNER NOT SELF EMPLOYED), CONTINUE WITH QC15\_K63;  
 ELSE GO TO PROGRAMMING NOTE QC15\_K67**

**QC15\_K63** Does your employer offer health insurance to any of its employees?  
 您的僱主是否向其僱員提供健康保險?

**KAI43**

YES .....	1	
NO .....	2	[GO TO PN QC15_K67]
REFUSED .....	-7	[GO TO PN QC15_K67]
DON'T KNOW .....	-8	[GO TO PN QC15_K67]

**QC15\_K64** Are you eligible to be in this plan?  
 您是否有資格參加該項計劃?

**KAI44**

YES .....	1	
NO .....	2	[GO TO QC15_K66]
REFUSED .....	-7	[GO TO PN QC15_K67]
DON'T KNOW .....	-8	[GO TO PN QC15_K67]

**QC15\_K65** What is the ONE main reason why you aren't on this plan?  
 您未參加該項計劃的一個主要原因是什麼?

**KAI45**

COVERED BY ANOTHER PLAN .....	1	[GO TO PN QC15_K67]
TOO EXPENSIVE .....	2	[GO TO PN QC15_K67]
DOESN'T LIKE PLAN OFFERED .....	3	[GO TO PN QC15_K67]
DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE .....	4	[GO TO PN QC15_K67]
OTHER (SPECIFY: _____) .....	91	[GO TO PN QC15_K67]
REFUSED .....	-7	[GO TO PN QC15_K67]
DON'T KNOW .....	-8	[GO TO PN QC15_K67]

**QC15\_K66** What is the ONE main reason why you are not eligible for this plan?  
 您沒有資格參加該項計劃的一個主要原因是什麼?

**KAI45A**

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

**PROGRAMMING NOTE QC15\_K67:**

IF KARMCARE = 1 (R HAS MEDICARE) AND (KAREMPOW ≠ 1 OR KAREMPOTH ≠ 1 OR KARDIRECT ≠ 1 OR KARMCAL ≠ 1 OR KARMILIT ≠ 1 OR KARIHS ≠ 1 OR KARHBEX ≠ 1 OR KAROTHGO ≠ 1 OR KAROTHER ≠ 1), THEN SKIP TO PN QC15\_K70;

IF KARMCARE = 1 (R HAS MEDICARE) AND (KAREMPOW = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARM CARE = 1 OR ARM CAL = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR

AROTHER = 1), CONTINUE WITH QC15\_K67 AND DISPLAY “Besides your spouse’s MediCARE plan you told me about earlier, I have some questions about your spouse’s other health coverage.” AND “other”;

IF (KAREMPOW = 1 OR KAREMPOTH = 1 OR KARDIRECT = 1 OR KARMCARE = 1 OR KARMCAL = 1 OR KARMILIT = 1 OR KARIHS = 1 OR KARHBEX = 1 OR KAROTHGO = 1 OR KAROTHER = 1), AND ARM CARE ≠ 1 (R DOES NOT HAVE MEDICARE), CONTINUE WITH QC15\_K67 AND DISPLAY “Next, I have some questions about your spouse’s main health plan.”;

IF KARMCAL = 1 DISPLAY “Medi-Cal”;

ELSE GO TO QC15\_K77

**QC15\_K67** {Besides your spouse’s MediCARE plan you told me about earlier, I have some questions about your spouse’s other health coverage./Next, I have some questions about your spouse’s main health plan.}

接下來，我要提出一些有關您的配偶的主要保健計劃的問題。

Is your spouse’s {Medi-Cal/other} health plan an HMO?

你{配偶}的{Medi-Cal}醫療保險計劃是 HMO 嗎？

**KAI22C**

[IF NEEDED, SAY: “HMO stands for Health Maintenance Organization. With an HMO, you must use the doctors and hospitals belonging to its network. If you go outside the network, generally it will not be paid for unless it’s an emergency.”]

[IF NEEDED, SAY: 「HMO代表「健康維護機構」。在HMO計劃中，你必須接受網路內醫生和醫院的服務。除非是急診，如果你在網路外接受服務，計劃通常不支付服務費。」]

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

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

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

YES .....1 [GO TO QC15\_K69]

NO .....2

REFUSED .....-7

DON'T KNOW .....-8

**PROGRAMMING NOTE QC15\_K68:**

IF KARMCAL = 1 (R HAS MEDI-CAL), GO TO QC15\_K69;

ELSE CONTINUE WITH QC15\_K68;

QC15\_K68

Is your spouse's health plan a PPO or EPO?

你{配偶}的保健計劃是一項 PPO 計劃還是 EPO 計劃

KAH122

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

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

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

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

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Your spouse's MAIN health plan."]

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: 「你{配偶}的#主要\保健計劃。」]

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

**PROGRAMMING NOTE QC15\_K69:**

**IF KARINSUR = 1 AND KARMCARE ≠ 1, THEN CONTINUE WITH QC15\_K69 AND DISPLAY “your spouse’s main”;**

**IF KARINSUR = 1 AND KARMCARE = 1, THEN CONTINUE WITH QC15\_K69 AND DISPLAY “this”**

**QC15\_K69**

What is the name of {your spouse’s main/this} health plan?

您(配偶)的主要健康保險計劃的名稱是什麼?

**KAI22A**

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

**[NOTE: IF SPOUSE HAS MORE THAN ONE HEALTH PLAN, SAY: “Your spouse’s MAIN health plan”.]**

ACCESS SENIOR HEALTHCARE .....	1
AETNA .....	2
AETNA GOLDEN MEDICARE .....	3
AIDS HEALTHCARE FOUNDATION, LA .....	4
ALAMEDA ALLIANCE FOR HEALTH .....	5
ALTAMED HEALTH SERVICES.....	83
ANTHEM BLUE CROSS OF CALIFORNIA .....	7
ASPIRE HEALTH PLAN .....	8
BLUE CROSS CALIFORNIA CARE .....	9
BLUE CROSS SENIOR SECURE .....	79
BLUE SHIELD 65 PLUS .....	11
BLUE SHIELD OF CALIFORNIA .....	12
BRAND NEW DAY (UNIVERSAL CARE) .....	13
CALIFORNIA HEALTH AND WELLNESS PLAN ..	14
CALIFORNIAKIDS (CALKIDS) .....	15
CAL OPTIMA (CALOPTIMA ONE CARE) .....	16
CALVIVA HEALTH.....	17
CARE 1 <sup>ST</sup> HEALTH PLAN .....	18
CAREMORE HEALTH PLAN.....	19
CENTER FOR ELDERS’ INDEPENDENCE.....	21
CEN CAL HEALTH .....	80
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .....	22
CENTRAL HEALTH PLAN.....	23
CHINESE COMMUNITY HEALTH PLAN .....	24
CHOICE PHYSICIANS NETWORK.....	25
CIGNA HEALTHCARE .....	26
CITIZENS CHOICE HEALTHPLAN .....	27
COMMUNITY CARE HEALTH PLAN .....	28
COMMUNITY HEALTH GROUP .....	29
CONTRA COSTA HEALTH PLAN.....	81
DAVITA HEALTHCARE PARTNERS PLAN .....	31
EASY CHOICE HEALTH PLAN.....	32
EPIC HEALTH PLAN .....	33
GEM CARE HEALTH PLAN .....	34
GOLD COAST HEALTH PLAN.....	35
GOLDEN STATE MEDICARE HEALTH PLAN.....	36
HEALTH NET .....	38
HEALTH NET SENIORITY PLUS.....	39
HEALTH PLAN OF SAN JOAQUIN .....	40
HEALTH PLAN SAN JP AUTHORITY .....	41



HERITAGE PROVIDER NETWORK .....	42
HUMANA GOLD PLUS .....	43
HUMANA HEALTH PLAN .....	44
IEHP (INLAND EMPIRE HEALTH PLAN) .....	45
INTER VALLEY HEALTH PLAN .....	46
HEALTH ADVANTAGE .....	82
KAISER PERMANENTE .....	47
KAISER PERMANENTE SENIOR ADVANTAGE..	48
KERN FAMILY HEALTH CARE .....	49
L.A. CARE HEALTH PLAN .....	50
MD CARE.....	51
MOLINA HEALTHCARE OF CALIFORNIA .....	54
MONARCH HEALTH PLAN.....	55
ON LOK SENIOR HEALTH SERVICES .....	56
PARTNERSHIP HEALTHPLAN OF CALIFORNIA	57
PIH HEALTH CARE SOLUTIONS .....	58
PREMIER HEALTH PLAN SERVICES.....	59
PRIMECARE MEDICAL NETWORK .....	60
PROVIDENCE HEALTH NETWORK.....	61
SCRIPPS HEALTH PLAN SERVICES .....	68
SEASIDE HEALTH PLAN.....	69
SAN FRANCISCO HEALTH PLAN.....	84
SANTA CLARA FAMILY HEALTH PLAN .....	90
SAN MATEO HEALTH COMMISION .....	86
SANTA BARBARA.....	88
SATELLITE HEALTH PLAN .....	92
SCAN HEALTH PLAN .....	67
SHARP HEALTH PLAN .....	70
SUTTER HEALTH PLAN .....	71
SUTTER SENIOR CARE .....	72
UNITED HEALTHCARE .....	73
UNITED HEALTHCARE SECURE HORIZON.....	74
UNIVERSITY HEALTHCARE ADVANTAGE .....	75
VALLEY HEALTH PLAN.....	76
VENTURA COUNTY HEALTH CARE PLAN.....	77
WESTERN HEALTH ADVANTAGE.....	78
CHAMPUS/CHAMP-VA .....	93
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	87
VA HEALTH CARE SERVICES.....	89
MEDI-CAL .....	52
MEDICARE .....	53
OTHER (SPECIFY: _____) .....	85
REFUSED .....	-7
DON'T KNOW .....	-8

**POST NOTE QC15\_K69:**

**IF QC15\_K69 = 93, 87, OR 89 THEN SET KARMILIT=1**

**PROGRAMMING NOTE QC15\_K70:**

**IF KARMCARE = 1 (R HAS MEDI-CARE) AND (KAREMPOTH ≠ 1 OR KARDIRECT ≠ 1 OR KARMCAL ≠ 1 OR KARMILIT ≠ 1 OR KARIHS ≠ 1 OR KARHBEX ≠ 1 OR KAROTHGO ≠ 1 OR KAROTHER ≠ 1) AND, DISPLAY "Next I have some questions about your spouse's main health plan."**

**QC15\_K70** {Next, I have some questions about **your spouse's** main health plan.} Is your spouse covered for {his/her/his or her} prescription drugs? That is, does some plan pay any part of the cost?

您配偶享受處方藥物保賠嗎？也就是說，是否有某項計劃可支付處方藥物的部份費用？

**KAI25**

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

**PROGRAMMING NOTE QC15\_K71:**

**IF KAREMPOW = 1 OR KAREMPSP = 1 OR KAREMPPA = 1 OR KARDIREC = 1 OR KAREMPOT = 1 THEN CONTINUE WITH QC15\_K71;  
 ELSE GO TO QC15\_K76**

**QC15\_K71** Does your spouse's health plan have a deductible that is more than \$1,000?  
 您配偶的保健計劃是否要求支付超過 1,000 美元的自付額？

**KAH71**

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

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

YES .....1  
 NO .....2 **[GO TO QC15\_K73]**  
 YES, ONLY WHEN HE OR SHE GOES OUT  
 OF NETWORK.....3 **[GO TO QC15\_K73]**  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K72:**

**IF KAREMPOW = 1 OR KAREMPSP = 1 OR KAREMPPA = 1 OR KAREMPOT = 1, THEN CONTINUE WITH QC15\_K72;  
ELSE GO TO QC15\_K73**

**QC15\_K72** Does your spouse's health plan have a deductible that is more than \$2,000?

你配偶的醫療保險計劃是否有超過 2,000 美元的免賠額？

**KAH96**

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

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

YES .....1 **[GO TO PN QC15\_K74]**  
 NO .....2  
 YES, ONLY WHEN HE OR SHE GOES OUT OF  
 NETWORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K73** Does your spouse's health plan have a deductible for all covered persons that is more than \$2,000?

您配偶的保健計劃是否要求為所有受保人支付超過 2,000 美元的自付 額？

**KAH72**

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

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

YES .....1  
 NO .....2 **[GO TO PN QC15\_K75]**  
 YES, ONLY WHEN HE OR SHE GOES OUT OF  
 NETWORK .....3 **[GO TO PN QC15\_K75]**  
 REFUSED ..... -7 **[GO TO PN QC15\_K75]**  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K74:**

**IF KAREMPOW = 1 OR KAREMPSP = 1 OR KAREMPPA = 1 OR KAREMPOT = 1, THEN CONTINUE WITH QC15\_K74;  
ELSE GO TO PROGRAMMING NOTE QC15\_K75**

**QC15\_K74** Does your spouse's health plan have a deductible for all covered persons that is more than \$4,000?

你配偶的醫療保險計劃對於所有受保人是否有超過 4,000 美元的免賠額？

**KAH97**

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

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

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

**PROGRAMMING NOTE QC15\_K75:**

**IF KARINSUR ≠ 1 (CURRENTLY UNINSURED) OR KARMCAL = 1 (CURRENTLY HAS MEDICAL) OR KARMCARE = 1 (CURRENTLY HAS MEDICARE) OR KAROTHGO = 1 (CURRENTLY HAS OTHER GOVT COVERAGE LIKE AIM, MRMP, PCIP), SKIP TO QC15\_K76;  
ELSE CONTINUE WITH QC15\_K75**

**QC15\_K75** Do your spouse have a special account or fund {he/she} can use to pay for medical expenses?

您配偶是否有一個可用於支付醫療費用的特別帳戶或基金？

**KAH73**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include- Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts."]**

**[IF NEEDED, SAY: "帳戶有時指保健儲蓄帳戶（HSA）、保健 償付帳戶（HRA）或其他類似帳戶。其他帳戶名稱包括個人護理 帳戶、個人醫療基金或選擇基金。此類帳戶與僱主提供的靈活開支帳戶不同。"]**

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

**QC15\_K76** Thinking about your spouse's current health insurance, did your spouse have this same insurance for all 12 of the past 12 months?

請想一想您目前的醫療保險，您配偶在過去 12 個月中，是不是每個月使用的都是 同一個保險？

**KAI31**

YES .....1 **[GO TO PN QC15\_K89]**  
NO .....2  
REFUSED ..... -7 **[GO TO QC15\_K79]**  
DON'T KNOW ..... -8

**QC15\_K77** During the past 12 months, when your spouse was not covered by {his/her/his or her} current health insurance, did {he/she/he or she} have any other health insurance?  
 在過去十二個月中，當您配偶沒有享受當前的健康保險保賠時，您是 否有任何其它健康保險？

**KAI32**

YES .....1  
 NO .....2 [GO TO QC15\_K80]  
 REFUSED ..... -7 [GO TO QC15\_K79]  
 DON'T KNOW ..... -8 [GO TO QC15\_K79]

**QC15\_K78** Was your spouse's other health insurance Medi-CAL, a plan {he/she/he or she} obtained through an employer, a plan you purchased directly from an insurance company, a plan {he/she/he or she} purchased through Covered California, or some other plan?  
 你配偶的其他醫療保險是 Medi-Cal、Healthy Families、你透過雇主獲得的 計劃、你從保險公司直接購買的計劃、你透過 Covered California 購買 的計劃還是其他計劃？

**MODIFIED  
KAI33**

[CODE ALL THAT APPLY]  
 [PROBE: "Any others?"]  
 [PROBE: 「還有任何其他計劃嗎？」]

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

**QC15\_K79** During the past 12 months, was there any time when your spouse had no health insurance at all?  
 在過去 12 個月中，您配偶有沒有任何時間完全沒有醫療保險？

**KAI34**

YES .....1  
 NO .....2 [GO TO PN QC15\_K89]  
 REFUSED ..... -7 [GO TO PN QC15\_K89]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K89]

**QC15\_K80** For how many months of the past 12 months did your spouse had no health insurance at all?  
 在過去 12 個月中，你配偶有多少個月完全沒有醫療保險？

**KAI35**

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

\_\_\_\_\_ NUMBER OF MONTHS [HR: 0-11] [IF 0 GO TO PN  
 QC15\_K89]  
 REFUSED ..... -7 [GO TO PN QC15\_K89]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K89]

**QC15\_K81** What is the ONE MAIN reason why your spouse did not have any health insurance during those months?

在這些月份中，您配偶沒有任何健康保險的一個主要原因是什麼？

**KAI36**

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

**QC15\_K82** During the time that your spouse was uninsured, did {he or she} try to find health insurance on {his or her} own?

在您配偶沒有保險的期間，{他还是她} 是否曾經嘗試自己尋找醫療保險？

**KAH74**

YES .....1 [GO TO PN QC15\_K89]  
 NO .....2 [GO TO PN QC15\_K89]  
 REFUSED ..... -7 [GO TO PN QC15\_K89]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K89]

**QC15\_K83** What is the ONE MAIN reason why your spouse does not have any health insurance? 在這些月份中，您配偶沒有任何健康保險的一個主要原因是什麼？

**KAI24**

[IF R SAYS NO NEED, PROBE WHY]

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

**QC15\_K84** During the time that your spouse has been uninsured, has {he or she} tried to find health insurance on {his or her} own?  
 在您配偶沒有保險的期間，{他还是她} 是否曾經嘗試自己尋找醫療保險？

**KAH75**

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

**QC15\_K85** Was your spouse covered by health insurance at any time during the past 12 months?  
 您配偶在過去 12 個月中的任何時間內有沒有享受過醫療保險？

**KAI27**

YES .....1 **[GO TO QC15\_K91]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K86** How long has it been since your spouse last had health insurance?  
 您配偶上一次有醫療保險到現在已經有多長時間？

**KAI28**

MORE THAN 12 MONTHS AGO, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO PN QC15\_K89]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO PN QC15\_K89]**  
 NEVER HAD HEALTH INSURANCE.....3 **[GO TO PN QC15\_K89]**  
 REFUSED ..... -7 **[GO TO PN QC15\_K89]**  
 DON'T KNOW ..... -8 **[GO TO PN QC15\_K89]**

**QC15\_K87** For how many months out of the last 12 months did your spouse have health insurance?  
 在過去 12 個月內，你配偶有多少個月有醫療保險？

**KAI29**

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

\_\_\_\_\_ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QC15\_K89]**  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K88** During that time when your spouse had health insurance, was {his/her/his or her} insurance Medi-CAL, a plan {he/she/he or she} obtained from an employer, a plan {he/she/he or she} purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?  
 在你配偶有醫療保險的那段時間內，你配偶的保險是 Medi-Cal、Healthy Families、你配偶透過雇主獲得的計劃，直接從保險公司購買的計劃，透過 Covered California 購買的計劃還是其他計劃？

**KAI30**

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他人或機構嗎？」]

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

**PROGRAMMING NOTE QC15\_K89:**

**IF KARINSUR ≠ 1 OR QC15\_K77 = 2 OR KARDIREC = 1 OR QC15\_K78 = (5, 6) OR QC15\_K88 = (5, 6) OR KARHBEX =1 OR KSPHBEX = 1; THEN CONTINUE WITH QC15\_K89;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K106**

**QC15\_K89** In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?  
 在過去 12 個月中，你是否曾經嘗試直接從保險公司或 HMO 或透過 Covered California 購買醫療保險計劃？

**KAH103h**

YES .....1  
 NO .....2 [GO TO PN QC15\_K106]  
 REFUSED ..... -7 [GO TO PN QC15\_K106]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K106]



**QC15\_K90** Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?  
這是直接從保險公司或 HMO 購買、還是透過 Covered California 購買、還是既從保險公司又透過 Covered California 購買的計劃？

**KAH110h**

DIRECTLY FROM AN INSURANCE COMPANY	
OR HMO, OR .....	1
THROUGH COVERED CALIFORNIA, OR .....	2
BOTH, FROM AN INSURANCE COMPANY AND	
THROUGH COVERED CALIFORNIA .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

[GO TO PN QC15\_K93]  
[GO TO PN QC15\_K93]

**PROGRAMMING NOTE QC15\_K91:**

IF QC15\_K90 = 1; THEN CONTINUE WITH QC15\_K91;

IF QC15\_K90 = 3; THEN CONTINUE WITH QC15\_K91 AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."

ELSE GO TO PROGRAMMING NOTE QC15\_K95;

**QC15\_K91** {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}  
{首先，請考慮你在嘗試直接從保險公司或 HMO 購買保險時的經歷。}

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

找到一項你需要的保賠範圍的計劃有多困難？你認為是.....

**KAH98h**

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

**QC15\_K92** How difficult was it to find a plan you could afford? Was it...  
找到一項你能負擔得起的計劃有多困難？你認為是.....

**KAH99h**

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

**QC15\_K93** Did anyone help you find a health plan?  
是否有人幫助你尋找醫療保險計劃？

**KAH100h**

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

[GO TO PN QC15\_K95]

[GO TO PN QC15\_K95]

[GO TO PN QC15\_K95]

**QC15\_K94** Who helped you?  
是誰幫助你的？

**KAH101h**

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

**PROGRAMMING NOTE QC15\_K95:****IF QC15\_K90 = 2; THEN CONTINUE WITH QC15\_K95;****IF QC15\_K90 = 3; THEN CONTINUE WITH QC15\_K95 AND DISPLAY “Now, think about your experience with Covered California.”****ELSE GO TO PROGRAMMING NOTE QC15\_K99;**

**QC15\_K95** {Now, think about your experience with Covered California.}  
 {現在，請想一想你與 Covered California 交往的經歷。}

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

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

**KAH111h**

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

**QC15\_K96** How difficult was it to find a plan you could afford? Was it...  
 找到一項你能負擔得起的計劃難度有多大？是.....

**KAH112h**

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

**QC15\_K97** Did anyone help you find a health plan?  
 是否有人幫助你找到一項保健計劃？

**KAH113h**

YES .....	1	
NO .....	2	[GO TO QC15_K99]
REFUSED .....	-7	[GO TO QC15_K99]
DON'T KNOW .....	-8	[GO TO QC15_K99]

**QC15\_K98** Who helped you?  
是誰幫助你的？

**KAH114h**

BROKER .....1  
FAMILY MEMBER / FRIEND.....2  
INTERNET .....3  
CERTIFIED ENROLLMENT COUNSELOR .....4  
OTHER (SPECIFY: \_\_\_\_\_)..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K99** Did you have all the information you felt you needed to make a good decision on a health plan?

你是否有你認為幫助作出有關保健計劃的良好決定所需的所有資訊？

**KAH115h**

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

**PROGRAMMING NOTE QC15\_K100:**  
**IF QC15\_H23 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QC15\_K100;**  
**ELSE GO TO QC15\_K101;**

**QC15\_K100** Were you able to get information about your health plan options in your language?  
你是否能夠用你自己的語言獲得有關你的保健計劃選擇的資訊？

**KAH116h**

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

**QC15\_K101** Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?

你選擇的計劃費用在你選擇計劃時是非常重要、較為重要還是不重要

**KAH117h**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT.....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K102** Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?

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

**KAH118h**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT.....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K103** Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?  
從某一家特定的醫院接受護理服務在你選擇計劃時是十分重要、較為重要還是不重要？

**KAH119h**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT.....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K104** Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?  
計劃網路內的醫生選擇在你選擇計劃時是非常重要、較為重要還是不重要？

**KAH120h**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT.....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K105:**  
IF QC15\_K31 = 1 THEN DISPLAY "Bronze"  
ELSE IF QC15\_K30 = 2 THEN DISPLAY "Silver"  
ELSE IF QC15\_K30 = 3 THEN DISPLAY "Gold"  
ELSE IF QC15\_K30 = 4 THEN DISPLAY "Platinum"  
ELSE IF QC15\_K30 = 6 THEN DISPLAY "Minimum Coverage"  
ELSE DISPLAY " ";

**QC15\_K105** Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/Minimum Coverage} plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?  
最後，你選擇{白金}計劃的#最\重要的一個原因是什??是費用、你可以從某一位特定的醫生處接受護理服務、你可以在某一家醫院就診、你的計劃網路內的服務提供者選擇、還是其他一些原因？

**KAH121h**

COST .....1  
SPECIFIC DOCTOR.....2  
SPECIFIC HOSPITAL.....3  
CHOICE OF DOCTORS IN NETWORK.....4  
OTHER (SPECIFY: \_\_\_\_\_)..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K106** During the past 12 months, was your spouse a patient in a hospital overnight or longer?  
在過去十二個月內，您配偶是否曾經因病住院一天或以上？

**KAH14**

YES .....1  
NO.....2 [GO TO PN QC15\_K108]  
REFUSED ..... -7 [GO TO PN QC15\_K108]  
DON'T KNOW ..... -8 [GO TO PN QC15\_K108]

**PROGRAMMING NOTE QC15\_K107:**

**IF KARINSUR  $\neq$  1 OR QC15\_K80 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH QC15\_K107;  
ELSE GO TO PROGRAMMING NOTE QC15\_K108**

**QC15\_K107** Was any of that hospital care paid for by Medi-Cal?  
那次醫院護理的任何費用是由 Medi-Cal 支付的嗎?

KAH76

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

**PROGRAMMING NOTE FOR QC15\_K108:**

**IF [KARINSUR  $\neq$  1 OR QC15\_K80 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND SELECTED ADULT = FEMALE OR SC14A = 1 (R IS PARENT OR LEGAL GUARDIAN FOR ANY CHILD IN ROSTER UNDER 1 YEAR OLD)] CONTINUE WITH QC15\_K108;  
ELSE SKIP TO PROGRAMMING NOTE QC15\_K111**

**QC15\_K108** During the last 12 months, did your spouse get prenatal care that she didn't have to pay for?  
在過去十二個月中，您配偶是否曾經接受免費產前護理？

KAH77

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

[GO TO PN QC15\_K111]  
[GO TO PN QC15\_K111]  
[GO TO PN QC15\_K111]

**QC15\_K109** Was it paid for by Medi-Cal?  
這是由 Medi-Cal 付費的嗎？

KAH78

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

**PROGRAMMING NOTE QC15\_K110:**  
**IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QC15\_K148 TO ASK ABOUT SELECTED ADOLESCENT;**  
**ELSE CONTINUE WITH QC15\_K110**

**QC15\_K110** These next questions are about health insurance (CHILD) may have.  
 以下是關於孩子可能有的健康保險的問題。

Does (CHILD) have the same insurance as your spouse?  
 孩子的保險是否與您配偶的保險相同?

**KCF10A**

YES .....1      **[GO TO QC15\_K130]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QC15\_K110:**  
**IF QC15\_K110 = 1 AND KARIHS = 1, SET KCHIHS = 1;**  
**IF QC15\_K110 = 1 AND KARMCARE = 1, SET KCHMCARE = 1 AND KCHINSUR = 1 AND KARSAMEC = 1;**  
**ELSE IF QC15\_K110 = 1, SET KCHINSUR = 1 AND KARSAMEC = 1 AND**  
**IF KARMCAL = 1, SET KCHMCAL = 1;**  
**IF KAREMPOW = 1, SET KCHEMP = 1;**  
**IF KAREMPSP = 1, SET KCHEMP = 1;**  
**IF KAREMPPA = 1, SET KCHEMP = 1;**  
**IF KAREMPOT = 1, SET KCHEMP = 1;**  
**IF KARDIREC = 1, SET KCHDIREC = 1;**  
**IF KARMILIT = 1, SET KCHMILIT = 1;**  
**IF KAROTHGO = 1, SET KCHOTHGO = 1;**  
**IF KAROTHER = 1, SET KCHOTHER = 1;**  
**IF KARHBEX = 1, SET KCHHBEX = 1**

**PROGRAMMING NOTE QC15\_K111:****IF KSPINSUR ≠ 1, THEN SKIP TO QC15\_K112;****ELSE IF QC15\_K110 = 2 AND KARSAMES = 1, THEN SKIP TO QC15\_K112;****ELSE CONTINUE WITH QC15\_K111****QC15\_K111** Does (CHILD) have the same insurance as you?

孩子的保險是否與您的保險相同?

**KMA1**

YES .....1 [GO TO QC15\_K130]  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QC15\_K111:****IF QC15\_K111 = 1 AND KSPIHS = 1, SET KCHIHS = 1;****IF QC15\_K111 = 1 AND KSPMCARE = 1, SET KCHMCARE = 1 AND KCHINSUR = 1 AND KSPSAMEC = 1;****ELSE IF QC15\_K111 = 1, SET KCHINSUR = 1 AND KSPSAMEC = 1 AND****IF KSPMCAL = 1, SET KCHMCAL = 1;****IF KSPEMPOW = 1, SET KCHEMP = 1;****IF KSPEMPSP = 1, SET KCHEMP = 1;****IF KSPEMPPA = 1, SET KCHEMP = 1;****IF KSPEMPOT = 1, SET KCHEMP = 1;****IF KSPDIREC = 1, SET KCHDIREC = 1;****IF KSPMILIT = 1, SET KCHMILIT = 1;****IF KSPOTHGO = 1, SET KCHOTHGO = 1;****IF KSPOTHER = 1, SET KCHOTHER = 1;****IF KSPHBEX = 1, SET KCHHBEX = 1****QC15\_K112** Is {he/she} currently covered by Medi-CAL?

{他她}目前是否享受Medi-CAL (加州醫療保健計劃) 的保賠?

**KCF1****[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]****[IF NEEDED, SAY: 「Medi-CAL 是為某些低收入家庭的兒童 及其家人、孕婦、殘障人士或年長者提供的一項計劃。」]**

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

**POST-NOTE QC15\_K112:****IF QC15\_K112 = 1, SET KCHMCAL = 1 AND SET KCHINSUR = 1**



**QC15\_K113** Is (CHILD) covered by a health insurance plan or HMO through your spouse's own or someone else's employment or union?  
<CHILD>是否通過您的配偶自己的或其他人的工作或 工會享受醫療保險計劃或HMO保賠？

**KCF3**

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

YES .....	1	
NO .....	2	[GO TO PN QC15_K115]
REFUSED .....	-7	[GO TO PN QC15_K115]
DON'T KNOW .....	-8	[GO TO PN QC15_K115]

**POST-NOTE QC15\_K113:**

**IF QC15\_K113 = 1, SET KCHEMP = 1 AND KCHINSUR = 1**

**QC15\_K114** Is this plan through an employer, through a union, or through Covered California's SHOP program?  
這項計劃是透過雇主、工會、還是 Covered California 的 SHOP 計劃購買的？

**KAI90**

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

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

EMPLOYER .....	1
UNION .....	2
SHOP / COVERED CALIFORNIA .....	3
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE FOR QC15\_K114:**

**IF QC15\_K114 = 3, THEN SET KCHHBEX = 1**

**PROGRAMING NOTE QC15\_K115:**

**IF KCHINSUR = 1 THEN GO TO QC15\_K115;  
ELSE CONTINUE WITH QC15\_K115**

**QC15\_K115** Is (CHILD) covered by a health insurance plan that your spouse purchased directly from an insurance company or HMO, or through Covered California?  
孩子是否享受你配偶直接從保險公司或HMO或透 過Covered California購買的醫療保險計劃的承保？

**KCF4**

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

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

YES .....	1	
NO .....	2	[GO TO PN QC15_K122]
REFUSED .....	-7	[GO TO PN QC15_K122]
DON'T KNOW .....	-8	[GO TO PN QC15_K122]

**POST-NOTE QC15\_K115:**

**IF QC15\_K115 = 1, SET KCHDIREC = 1 AND KCHINSUR = 1**

**PROGRAMMING NOTE QC15\_K116:**  
**IF KCHDIRECT = 1, THEN CONTINUE WITH QC15\_K116;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K117**

**QC15\_K116** How did your spouse purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
 你配偶是如何購買這項保健計劃的 — 是直接從保險公司或 HMO 購買還是 透過 Covered California 購買？

**KAI91**

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

**POST-NOTE FOR QC15\_K116:**  
**IF QC15\_K116 = 2, THEN SET KCHHBEX = 1**

**PROGRAMMING NOTE QC15\_K117**  
**IF KCHHBEX = 1, THEN CONTINUE WITH QC15\_K117;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K119;**

**QC15\_K117** Was this a bronze, silver, gold or platinum plan?  
 這是銅, 銀, 金還是白金計劃？

**KAI92**

BRONZE .....1  
 SILVER .....2  
 GOLD .....3  
 PLATINUM.....4  
 MEDI-CAL / MEDICAID .....5  
 CATASTROPHIC .....6  
 OTHER (SPECIFY: \_\_\_\_\_)..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K118**  
**IF KCHHBEX = 1 AND KCHDIREC = 1, THEN CONTINUE WITH QC15\_K118;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K119;**

**QC15\_K118** Was there a subsidy or discount on the premium for this plan?  
 這項計劃的保費是否有補貼或折扣？

**KAI93**

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

**PROGRAMMING NOTE QC15\_K119:**  
**IF KCHEMP = 1 (EMPLOYER-BASED COVERAGE) OR KCHDIREC = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH QC15\_K119;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K122**

**QC15\_K119** Does your spouse 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 your spouse or your family may have had to pay.  
 您配偶是否支付孩子的保健計劃的任何或全部保費 或費用？請勿包括您配偶或您的家庭可能需要支付的任何共付款或自付額。

**KAI54**

[IF NEEDED, SAY: "Copays are the partial payments you make for your health care each time you see a doctor or use the health care system, while someone else pays for your main health care coverage."]

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

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

[IF NEEDED, SAY: "自付額是您的保健計劃開始付款之前您支付的醫療護理費用。"]

[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]

[IF NEEDED, SAY: "保費是您的健康保險計劃的每月收費。"]

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

**QC15\_K120** Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?  
 是否有任何其他人，例如雇主、工會或專業機構，支付孩子的保健計劃的全部或部份保費或費用？

**KAI50**

YES .....1  
 NO .....2 [GO TO PN QC15\_K122]  
 REFUSED ..... -7 [GO TO PN QC15\_K122]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K122]

**QC15\_K121** Who else pays all or some portion of the cost for (CHILD)'s health plan?  
還有誰支付孩子保健計劃的全部或部分費用?

**KAI51**

[CODE ALL THAT APPLY.]

ADULT RESPONDENT'S CURRENT EMPLOYER .1  
ADULT RESPONDENT'S FORMER EMPLOYER ...2  
ADULT RESPONDENT'S UNION .....3  
SKA'S CURRENT EMPLOYER .....4  
SKA'S FORMER EMPLOYER .....5  
PROFESSIONAL/FRATERNAL ORGANIZATION ...6  
MEDICAID/MEDI-CAL ASSISTANCE .....7  
COVERED CALIFORNIA..... 10  
OTHER..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QC15\_K121:**IF (QC15\_K121\_1 OR QC15\_K121\_2 OR QC15\_K121\_3 OR QC15\_K121\_4 OR QC15\_K121\_5 OR QC15\_K121\_6) = 1, SET KCHEMP = 1 AND (IF KCHDIREC = 1, SET KCHDIREC = 0);  
IF QC15\_K121\_7 = 1, SET KCHMCAL = 1;  
IF QC15\_K121\_10 = 1, SET KCHHBEX = 1

**PROGRAMMING NOTE QC15\_K122:**  
IF KCHINSUR = 1, GO TO PN QC15\_K128;  
ELSE CONTINUE WITH QC15\_K122

**QC15\_K122** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?  
{他/她} 是否享受 CHAMPUS/CHAMP VA, Tricare 或其它軍隊醫療護理計劃?

**KCF6**

YES .....1 [GO TO PN QC15\_K128]  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QC15\_K122:**  
IF QC15\_K122 = 1, SET KCHMILIT = 1 AND KCHINSUR = 1

**QC15\_K123** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Healthy Families, or something else?  
{他/她}是否享受其他政府醫療保險計劃，例如 AIM、Mister MIP、PCIP 或其他計劃？

**KCF7**

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; and Healthy Families is a program for children in your county."]

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

AIM.....	1	[GO TO PN QC15_K128]
"MISTER MIP"/MRMIP.....	2	[GO TO PN QC15_K128]
HEALTHY KIDS .....	3	[GO TO PN QC15_K128]
NO OTHER PLAN.....	4	
SOMETHING ELSE (SPECIFY: _____) .....	91	[GO TO PN QC15_K128]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QC15\_K123:**

**IF QC15\_K123 = 1 OR 2 OR 3 OR 91, SET KCHOTHGO = 1 AND KCHINSUR = 1**

**QC15\_K124** Does {he/she} have any health insurance coverage through a plan that I missed?  
{他/她} 有沒有通過我漏掉的計劃享受任何醫療保險？

**KCF8**

YES .....	1	
NO.....	2	[GO TO PN QC15_K127]
REFUSED .....	-7	[GO TO PN QC15_K127]
DON'T KNOW .....	-8	[GO TO PN QC15_K127]

**QC15\_K125** What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?  
{他/她} 的醫靚來自加州醫療輔助計劃、健康家庭計劃、雇主或工會、還是來自其它來源？

**KCF9**

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

**[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是 通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的"]**

**[CIRCLE ALL THAT APPLY.]**

**[PROBE: "Any others?"]**

**[PROBE: 「還有其它來源嗎？」]**

THROUGH CURRENT OR FORMER  
EMPLOYER/UNION .....1  
THROUGH SCHOOL, PROFESSIONAL  
ASSOCIATION, TRADE GROUP OR OTHER  
ORGANIZATION.....2  
PURCHASED DIRECTLY FROM A HEALTH  
PLAN (BY R OR ANYONE ELSE) .....3  
MEDICARE .....4  
MEDI-CAL .....5  
CHAMPUS/CHAMP-VA, TRICARE, VA, OR  
SOME OTHER MILITARY HEALTH CARE .....7  
INDIAN HEALTH SERVICE, TRIBAL HEALTH  
PROGRAM, URBAN INDIAN CLINIC.....8  
COVERED CALIFORNIA..... 10  
SHOP THROUGH COVERED CALIFORNIA ..... 11  
OTHER GOVERNMENT HEALTH PLAN ..... 91  
OTHER NON-GOVERNMENT HEALTH PLAN..... 92  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QC15\_K124:**

IF QC15\_K125\_1 = 1, SET KCHEMP = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_2 = 1, SET KCHEMP = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_3 = 1, SET KCHDIREC = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_4 = 1, SET KCHMCARE = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_5 = 1, SET KCHMCAL = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_7 = 1, SET KCHMILIT = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_8 = 1, SET KCHIHS = 1;  
IF QC15\_K125\_10 = 1, SET KCHHBEX = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_11 = 1, SET KCHHBEX = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_91 = 1, SET KCHOTHGOV = 1 AND SET KCHINSUR = 1;  
IF QC15\_K125\_1 = 92, -7 OR -8, SET KCHOTHER = 1 AND KCHINSUR = 1

**PROGRAMMING NOTE QC15\_K126:**  
**IF QC15\_K125 = 4 (CHILD HAS MEDICARE), CONTINUE WITH QC15\_K126;**  
**ELSE SKIP TO PROGRAMMING NOTE QC15\_K127**

**QC15\_K126** Just to verify, you said that (CHILD) gets health insurance through Medicare?  
 我只是要確定一下，你說過 {孩子} 有從 聯邦醫療照顧(Medicare) 獲得醫療保險？

**KCF9VER**

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

**PROGRAMMING NOTE QC15\_K127:**  
**IF KCHINSUR ≠ 1 CONTINUE WITH QC15\_K127;**  
**ELSE GO TO QC15\_K128;**

**QC15\_K127** What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?  
 {孩子} 沒有加入加州醫療輔助計劃 (Medi-CAL ) 的一個主要原因是什麼？

**KCF1A**

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

**PROGRAMMING NOTE QC15\_K128:**

IF QC15\_K110 = 1 AND KARMCARE = 1 AND QC15\_K16 = 1, THEN QC15\_K128 = QC15\_K16 AND QC15\_K130 = QC15\_K17 AND SKIP TO QC15\_K131;  
 ELSE IF QC15\_K110 = 1, THEN QC15\_K128 = QC15\_K67 AND QC15\_K130 = QC15\_K69 AND QC15\_K131 = QC15\_K70 AND GO TO PN QC15\_K131;  
 ELSE IF KCHINSUR = 1, THEN CONTINUE WITH QC15\_K128;  
 ELSE GO TO PN QC15\_K132

**QC15\_K128** Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?  
 孩子參加的保健計劃是 HMO (即健康維護機構計劃) 嗎?

**KMA3**

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

[IF NEEDED, SAY: "HMO代表「健康維護機構」。在HMO計劃中, {he or she}必須使用網路內的醫生及醫院的服務。除非是急診, 如果{he or she}在網路外醫生或醫院處接受服務, 計劃通常不支付服務費。"]

[NOTE: IF CHILD HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her/his or her} MAIN health plan."]

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

[NOTE: IF R SAYS "POS" OR POINT OF SERVICE, CODE AS "YES.". IF R SAYS "PPO" OR "EPO," CODE AS "NO."]

YES .....	1	[GO TO QC15_K130]
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QC15\_K129:**

IF KCHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO QC15\_K130;  
 ELSE CONTINUE WITH QC15\_K129;



**QC15\_K129** Is (CHILD)'s health plan a PPO or EPO?  
{孩子}保健計劃是一項 PPO 計劃還是 EPO 計劃？

**KAI115**

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

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

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

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

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

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

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

**QC15\_K130** What is the name of (CHILD)'s main health plan?

{孩子}參加的主要健康計劃的名稱是什麼？

**KMA2**

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

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: {孩子}是否有保險卡或註明計劃名稱的其他文件? "]

ACCESS SENIOR HEALTHCARE .....	1
AETNA .....	2
AETNA GOLDEN MEDICARE .....	3
AIDS HEALTHCARE FOUNDATION, LA .....	4
ALAMEDA ALLIANCE FOR HEALTH .....	5
ALTAMED HEALTH SERVICES.....	83
ANTHEM BLUE CROSS OF CALIFORNIA .....	7
ASPIRE HEALTH PLAN .....	8
BLUE CROSS CALIFORNIACARE .....	9
BLUE CROSS SENIOR SECURE .....	79
BLUE SHIELD 65 PLUS .....	11
BLUE SHIELD OF CALIFORNIA .....	12
BRAND NEW DAY (UNIVERSAL CARE) .....	13
CALIFORNIA HEALTH AND WELLNESS PLAN ..	14
CALIFORNIAKIDS (CALKIDS) .....	15
CAL OPTIMA (CALOPTIMA ONE CARE) .....	16
CALVIVA HEALTH.....	17
CARE 1 <sup>ST</sup> HEALTH PLAN .....	18
CAREMORE HEALTH PLAN.....	19
CENTER FOR ELDERS' INDEPENDENCE.....	21
CEN CAL HEALTH .....	80
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH .....	22
CENTRAL HEALTH PLAN.....	23
CHINESE COMMUNITY HEALTH PLAN .....	24
CHOICE PHYSICIANS NETWORK.....	25
CIGNA HEALTHCARE .....	26
CITIZENS CHOICE HEALTHPLAN .....	27
COMMUNITY CARE HEALTH PLAN .....	28
COMMUNITY HEALTH GROUP .....	29
CONTRA COSTA HEALTH PLAN.....	81
DAVITA HEALTHCARE PARTNERS PLAN .....	31
EASY CHOICE HEALTH PLAN.....	32
EPIC HEALTH PLAN .....	33
GEM CARE HEALTH PLAN .....	34
GOLD COAST HEALTH PLAN.....	35
GOLDEN STATE MEDICARE HEALTH PLAN.....	36
HEALTH NET .....	38
HEALTH NET SENIORITY PLUS.....	39
HEALTH PLAN OF SAN JOAQUIN .....	40
HEALTH PLAN SAN JP AUTHORITY .....	41
HERITAGE PROVIDER NETWORK .....	42
HUMANA GOLD PLUS .....	43
HUMANA HEALTH PLAN .....	44
IEHP (INLAND EMPIRE HEALTH PLAN) .....	45
INTER VALLEY HEALTH PLAN .....	46

HEALTH ADVANTAGE .....	82
KAISER PERMANENTE .....	47
KAISER PERMANENTE SENIOR ADVANTAGE..	48
KERN FAMILY HEALTH CARE .....	49
L.A. CARE HEALTH PLAN .....	50
MD CARE .....	51
MOLINA HEALTHCARE OF CALIFORNIA .....	54
MONARCH HEALTH PLAN .....	55
ON LOK SENIOR HEALTH SERVICES .....	56
PARTNERSHIP HEALTHPLAN OF CALIFORNIA	57
PIH HEALTH CARE SOLUTIONS .....	58
PREMIER HEALTH PLAN SERVICES .....	59
PRIMECARE MEDICAL NETWORK .....	60
PROVIDENCE HEALTH NETWORK .....	61
SCRIPPS HEALTH PLAN SERVICES .....	68
SEASIDE HEALTH PLAN .....	69
SAN FRANCISCO HEALTH PLAN .....	84
SANTA CLARA FAMILY HEALTH PLAN .....	90
SAN MATEO HEALTH COMMISION .....	86
SANTA BARBARA .....	88
SATELLITE HEALTH PLAN .....	92
SCAN HEALTH PLAN .....	67
SHARP HEALTH PLAN .....	70
SUTTER HEALTH PLAN .....	71
SUTTER SENIOR CARE .....	72
UNITED HEALTHCARE .....	73
UNITED HEALTHCARE SECURE HORIZON .....	74
UNIVERSITY HEALTHCARE ADVANTAGE .....	75
VALLEY HEALTH PLAN .....	76
VENTURA COUNTY HEALTH CARE PLAN .....	77
WESTERN HEALTH ADVANTAGE .....	78
CHAMPUS/CHAMP-VA .....	93
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	87
VA HEALTH CARE SERVICES .....	89
MEDI-CAL .....	52
MEDICARE .....	53
OTHER (SPECIFY: _____) .....	85
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_K131** Is (CHILD) covered for prescription drugs?  
計劃是否支付 孩子的處方藥品？

**KCF14**

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

**PROGRAMMING NOTE FOR QC15\_K132:**

**IF (KARINSUR ≠ 1 OR QC15\_K110 ≠ 1) AND (KCHEMP = 1 OR KCHDIREC = 1 OR KCHOTHER = 1),  
THEN CONTINUE WITH QC15\_K132;  
ELSE SKIP TO PROGRAMMING NOTE QC15\_K137**

**QC15\_K132** Does (CHILD)'s health plan have a deductible that is more than \$1,000?  
{孩子}的健康保險計劃是否有超過1,000美元的免賠額？

**KAI79**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....	1	
NO .....	2	<b>[GO TO QC15_K134]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO QC15_K134]</b>
REFUSED .....	-7	<b>[GO TO QC15_K134]</b>
DON'T KNOW .....	-8	

**PROGRAMMING NOTE FOR QC15\_K133:**

**IF KCHEMP = 1, THEN CONTINUE WITH QC15\_K133;  
ELSE GO TO QC15\_K134**

**QC15\_K133** Does (CHILD)'s health plan have a deductible that is more than \$2,000?  
{孩子}的健康保險計劃是否有超過2,000美元的免賠額？

**KAI85**

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

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

YES .....	1	<b>[GO TO PN QC15_K135]</b>
NO .....	2	
YES, ONLY WHEN GO OUT OF NETWORK .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_K134** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$2,000?  
{孩子}的健康保險計劃對於所有受保人是否有超過2,000美元的免賠額？

**KAI80**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....	1	
NO .....	2	<b>[GO TO PN QC15_K136]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO PN QC15_K136]</b>
REFUSED .....	-7	<b>[GO TO PN QC15_K136]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QC15_K136]</b>

**PROGRAMMING NOTE FOR QC15\_K135:**  
**IF KCHEMP = 1, THEN CONTINUE WITH QC15\_K135;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K136**

**QC15\_K135** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$4,000?

{孩子}的醫療保險計劃對於所有受保人是否有超過 4,000美元的免賠額？

**KAI86**

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

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

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

**PROGRAMMING NOTE QC15\_K136:**  
**IF (QC15\_K132 = 1 OR 3) OR (QC15\_K133 = 1 OR 3) OR (QC15\_K134 = 1 OR 3), CONTINUE WITH QC15\_K136;**  
**ELSE SKIP TO PROGRAMMING NOTE QC15\_K137**

**QC15\_K136** Does your spouse have a special account or fund {he/she} can use to pay for (CHILD)'s medical expenses?

您配偶是否有可以用於支付{孩子}的醫療費用的特殊帳戶或資金？

**KAI81**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts."]**

**[IF NEEDED, SAY: "帳戶有時稱為健康儲蓄帳戶（HSA）、健康補償帳戶（HRA）或其他類似的帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療資金或選擇資金，這些帳戶與雇主提供的靈活開支帳戶不同。"]**

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

**PROGRAMMING NOTE QC15\_K137:**  
**IF KCHINSUR = 1, GO TO QC15\_K142;**  
**ELSE CONTINUE WITH QC15\_K137**

**QC15\_K137** What is the one main reason (CHILD) does not have any health insurance?  
 孩子沒有任何健康保險的一個主要原因是什麼？

**KCF18**

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

**QC15\_K138** Was (CHILD) covered by health insurance at any time during the past 12 months?  
 孩子是否在過去 12 個月中的任何時間均享受醫療保險？

**KCF20**

YES .....1 [GO TO QC15\_K140]  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K139** How long has it been since (CHILD) last had health insurance?  
 孩子上一次有醫療保險到現在已經有多長時間？

**KCF21**

MORE THAN 12 MONTHS, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 [GO TO PN QC15\_K148]  
 MORE THAN 3 YEARS AGO .....2 [GO TO PN QC15\_K148]  
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 [GO TO PN QC15\_K148]  
 REFUSED ..... -7 [GO TO PN QC15\_K148]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K148]

**QC15\_K140** For how many of the last 12 months did {he/she} have health insurance?  
 在過去 12 個月內,{他/她}有多少個月有醫療保險？

**KCF22**

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS,  
 ENTER 1]**

\_\_\_\_\_ MONTHS [HR: 0-12] [IF 0, THEN GO TO PN  
 QC15\_K156]  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K141** During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, a plan your spouse obtained through an employer, a plan purchased directly from an insurance company, a plan purchased through Covered California, or some other plan?  
 在孩子有醫療保險期間, {他的/她的}保險是 Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你直接從保險公司購買的計劃、你透過Covered California購買的計劃還是其他計劃?

**KCF23**

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他計劃嗎? 」]

MEDI-CAL .....	1	[GO TO PN QC15_K148]
THROUGH CURRENT OR FORMER EMPLOYER UNION.....	3	[GO TO PN QC15_K148]
PURCHASED DIRECTLY.....	5	[GO TO PN QC15_K148]
COVERED CALIFORNIA.....	6	[GO TO PN QC15_K148]
OTHER HEALTH PLAN.....	91	[GO TO PN QC15_K148]
REFUSED .....	-7	[GO TO PN QC15_K148]
DON'T KNOW .....	-8	[GO TO PN QC15_K148]

**QC15\_K142** Thinking about {his/her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?

請想一想 {他/她}目前的醫療保險, 孩子在過去 12 個月中, 是不是都是享受同一種保險?

**KCF24**

YES .....	1	[GO TO PN QC15_K148]
NO.....	2	
HAD SAME INSURANCE SINCE BIRTH (FOR CHILDREN LESS THAN ONE YEAR OLD) ...	3	[GO TO PN QC15_K148]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_K143** When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?

請想一想 {他/她}目前的醫療保險, 孩子在過去 12 個月中, 是不是都是享受同一種保險?

**KCF25**

YES .....	1	
NO.....	2	[GO TO QC15_K145]
REFUSED .....	-7	[GO TO QC15_K145]
DON'T KNOW .....	-8	[GO TO QC15_K145]

**QC15\_K144** Was this other health insurance Medi-CAL, a plan your spouse obtained from an employer, a plan purchased directly from an insurance company, a plan purchased through Covered California, or some other plan?  
該其他醫療保險是Medi-CAL, 你透過雇主獲得的 計劃、你直接從保險公司購買的計劃、你透過Covered California購買 的計劃還是其他計劃？

**KCF26**

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他計劃嗎？」]

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

**QC15\_K145** During the past 12 months, was there any time when {he/she} had no health insurance at all?

在過去 12 個月中, {他/她} 有沒有任何時間完全沒有醫療保險？

**KCF27**

YES .....	1	
NO .....	2	[GO TO PN QC15_K148]
REFUSED .....	-7	[GO TO PN QC15_K148]
DON'T KNOW .....	-8	[GO TO PN QC15_K148]

**QC15\_K146** For how many of the past 12 months did {he/she} have no health insurance?  
在過去 12 個月中, {他/她}有幾個月沒有健康保險？

**KCF28**

[IF < 1 MONTH, ENTER "1"]

\_\_\_\_\_ MONTHS [RANGE: 1-12]

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



**QC15\_K147** What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?  
 在孩子沒有保險的日子裡, {他/她} 沒有醫療保險的 一個主要原因是什麼?

**KCF29**

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

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

**PROGRAMMING NOTE QC15\_K148:**

**IF NO TEEN SELECTED, GO TO PN QC15\_K187;**

**IF KARINSUR = 1, CONTINUE WITH QC15\_K148;**

**IF KARINSUR = 0, GO TO PN QC15\_K149;**

**ELSE CONTINUE WITH QC15\_K148**

**QC15\_K148** These next questions are about health insurance (TEEN) may have.  
 以下是有關{ TEEN } 可能享有的健康保險的問題。

Does (TEEN) have the same insurance as your spouse?  
 { TEEN } 的保險是否與您配偶的保險相同?

**KIA10A**

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

**[GO TO QC15\_K167]**

**POST-NOTE QC15\_K148:**

IF QC15\_K148 = 1 AND KARIHS = 1, SET KTEIHS = 1;

IF QC15\_K148 = 1 AND KARMCARE = 1, SET KTEMCARE = 1 AND KTEINSUR = 1;

ELSE IF QC15\_K148 = 1, SET KTEINSURE = 1 AND

IF KARMCAL = 1, SET KTEMCAL = 1;

IF KAREMPOW = 1, SET KTEEMP = 1;

IF KAREMPSP = 1, SET KTEEMP = 1;

IF KAREMPPA = 1, SET KTEEMP = 1;

IF KAREMPOT = 1, SET KTEEMP = 1;

IF KARDIREC = 1, SET KTEDIRECT = 1;

IF KARMILIT = 1, SET KTEMILIT = 1;

IF KAROTHGO = 1, SET KTEOTHGOV = 1;

IF KAROTHER = 1, SET KTEOTHER = 1;

IF KARHBEX = 1, SET KTEHBEX = 1

**PROGRAMMING NOTE QC15\_K149:**

IF KSPINSUR ≠ 1 THEN SKIP TO QC15\_K150;

ELSE IF QC15\_K148 = 2 AND KARSAMES = 1 THEN SKIP TO PROGRAMMING NOTE QC15\_K150;

ELSE CONTINUE WITH QC15\_K149

**QC15\_K149** Does (TEEN) have the same insurance as you?

(TEEN)的保險是否與您的保險相同?

**KMA5**

YES .....1

**[GO TO QC15\_K167]**

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**POST-NOTE QC15\_K149:**

IF QC15\_K149 = 1 AND KSPIHS = 1, SET KTEIHS = 1;

IF QC15\_K149 = 1 AND KSPMCARE = 1, SET KTEMCARE = 1 AND KTEINSUR = 1 AND QC15\_K167 = QC15\_K47;

ELSE IF QC15\_K149 = 1, SET KTEINSUR = 1 AND

IF KSPMCAL = 1, SET KTEMCAL = 1;

IF KSPEMPOW = 1, SET KTEEMP = 1;

IF KSPEMPSP = 1, SET KTEEMP = 1;

IF KSPEMPPA = 1, SET KTEEMP = 1;

IF KSPEMPOT = 1, SET KTEEMP = 1;

IF KSPDIREC = 1, SET KTEDIRECT = 1;

IF KSPMILIT = 1, SET KTEMILIT = 1;

IF KSPOTHGO = 1, SET KTEOTHGO = 1;

IF KSPOTHER = 1, SET KTEOTHER = 1;

IF KSPHBEX = 1, SET KTEHBEX = 1

**PROGRAMMING NOTE QC15\_K150:**

**IF KCHINSUR ≠ 1, THEN SKIP TO QC15\_K151;**

**ELSE IF (QC15\_K148 = 2 AND KARSAMEC = 1) OR (QC15\_K149 = 2 AND KSPSAMEC = 1), THEN SKIP TO QC15\_K151;**

**ELSE CONTINUE WITH QC15\_K150;**

**QC15\_K150** Does (TEEN) have the same insurance as (CHILD)?

{TEEN} 的保險是否與孩子 的保險相同?

**KMA6**

YES .....1

**[GO TO PN QC15\_K181]**

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**POST-NOTE QC15\_K150:**

**IF QC15\_K149 = 1 AND KCHHS = 1, SET KTEIHS = 1;**

**ELSE IF QC15\_K150 = 1, SET KTEINSURE = 1 AND QC15\_K167 = QC15\_K128 AND QC15\_K169 = QC15\_K130 AND**

**IF KCHMCARE = 1, SET KTEMCARE = 1;**

**IF KCHMCAL = 1, SET KTEMCAL = 1;**

**IF KCHEMP = 1, SET KTEEMP = 1;**

**IF KCHDIREC = 1, SET KTEDIREC = 1;**

**IF KCHMILIT = 1, SET KTEMILIT = 1;**

**IF KCHOTHG = 1, SET KTEOTHGO = 1;**

**IF KCHOTHER = 1, SET KTEOTHER = 1;**

**IF KCHHBEX = 1, SET KTEHBEX = 1**

**QC15\_K151** Is {he/she} currently covered by Medi-CAL?

{他/她} 是否享受Medi-CAL (加州醫療保健計劃) 的保賠?

**KIA1**

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

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

YES .....1

**[GO TO QC15\_K161]**

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**POST-NOTE QC15\_K151:**

**IF QC15\_K151 = 1, SET KTEMCAL = 1 AND SET KTEINSUR = 1**

**QC15\_K152** Is (TEEN) covered by a health insurance plan or HMO through your spouse's own or someone else's employment or union?

孩子有沒有享受通過您 {配偶} 或其他人的工作或工會提供的醫療 保險計劃或管理式保健組織計劃 (HMO)?

**KIA3**

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

YES .....1

NO .....2

**[GO TO QC15\_K154]**

REFUSED ..... -7

**[GO TO QC15\_K154]**

DON'T KNOW ..... -8

**[GO TO QC15\_K154]**

**POST-NOTE QC15\_K152:****IF QC15\_K152 = 1, SET KTEEMP = 1 AND SET KTEINSUR = 1**

**QC15\_K153** Is this plan through an employer, through a union, or through Covered California's SHOP program?

這項計劃是透過雇主、工會、還是 Covered California 的 SHOP 計劃購買的？

**KAI94**

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

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

EMPLOYER .....1  
 UNION.....2  
 SHOP / COVERED CALIFORNIA .....3  
 OTHER (SPECIFY: \_\_\_\_\_)..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE FOR QC15\_K153:****IF QC15\_K153 = 3, THEN SET KTEHBEX = 1****PROGRAMING NOTE QC15\_K154:**

**IF KTEINSUR = 1 THEN GO TO QC15\_K155;  
 ELSE CONTINUE WITH QC15\_K154**

**QC15\_K154** Is (TEEN) covered by a health insurance plan that your spouse purchased directly from an insurance company or HMO?

(TEEN)是否享受你 {配偶} 直接從保險公司或HMO或透 過Covered California購買的醫療保險計劃的承保？

**KIA4**

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

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

YES .....1  
 NO.....2 **[GO TO PN QC15\_K161]**  
 REFUSED ..... -7 **[GO TO PN QC15\_K161]**  
 DON'T KNOW ..... -8 **[GO TO PN QC15\_K161]**

**POST-NOTE QC15\_K154:****IF QC15\_K154 = 1, SET KTEDIREC = 1 AND SET KTEINSUR = 1**

**PROGRAMMING NOTE QC15\_K155:**  
**IF KTEDIREC = 1, THEN CONTINUE WITH QC15\_K155;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K156**

**QC15\_K155** How did your spouse purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
你 {配偶} 是如何購買這項保健計劃的 — 是直接從保險公司或 HMO 購買還是 透過 Covered California 購買？

**KAI95**

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

**POST-NOTE FOR QC15\_K155:**  
**IF QC15\_K155 = 2, THEN SET KTEHBEX = 1**

**PROGRAMMING NOTE QC15\_K156**

**IF KTEHBEX = 1, THEN CONTINUE WITH QC15\_K156;  
ELSE GO TO PROGRAMMING NOTE QC15\_K156;**

**QC15\_K156** Was this a bronze, silver, gold or platinum plan?  
這是銅、銀、金還是白金計劃？

**KAI96**

BRONZE .....1  
SILVER .....2  
GOLD .....3  
PLATINUM.....4  
MEDI-CAL / MEDICAID .....5  
CATASTROPHIC .....6  
OTHER (SPECIFY: .....). 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K157**

**IF QC15\_K153 = 3, THEN GO TO PN QC15\_K158;  
ELSE CONTINUE WITH QC15\_K157;**

**QC15\_K157** Was there a subsidy or discount on the premium for this plan?  
這項計劃的保費是否有補貼或折扣？

**KAI97**

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

**PROGRAMMING NOTE QC15\_K158:**

**IF KTEEMP = 1 (EMPLOYER-BASED COVERAGE) OR KTEDIREC = 1 (PURCHASED OWN COVERAGE), CONTINUE WITH QC15\_K158;  
ELSE GO TO PROGRAMMING NOTE QC15\_K159**

**QC15\_K158** Do your spouse 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 your spouse or your family may have had to pay.  
您 {配偶} 是否支付(TEEN)的保健計劃的任何或全部保費 或費用？請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

**KAI55**

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

**[IF NEEDED, SAY: "Premium is the monthly charge for the cost of your health insurance plan."]**

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

**QC15\_K159** Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (TEEN)'s health plan?  
 是否有任何其他人，例如雇主、工會或專業機構，支付(TEEN)的保健計劃的全部或部份保費或費用？

**KAI52**

YES .....1  
 NO .....2 [GO TO PN QC15\_K161]  
 REFUSED ..... -7 [GO TO PN QC15\_K161]  
 DON'T KNOW ..... -8 [GO TO PN QC15\_K161]

**QC15\_K160** Who else pays all or some portion of the cost for (TEEN)'s health plan?  
 還有誰支付(TEEN)的醫療保險計劃的全部或部份費用？

**KAI53**

[CODE ALL THAT APPLY.]

ADULT RESPONDENT'S CURRENT EMPLOYER .1  
 ADULT RESPONDENT'S FORMER EMPLOYER ...2  
 ADULT RESPONDENT'S UNION .....3  
 SKA'S CURRENT EMPLOYER .....4  
 SKA'S FORMER EMPLOYER .....5  
 PROFESSIONAL/FRATERNAL ORGANIZATION ...6  
 MEDICAID/MEDI-CAL ASSISTANCE .....7  
 COVERED CALIFORNIA..... 11  
 OTHER..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QC15\_K160:**

IF QC15\_K160\_1 OR QC15\_K160\_2 OR QC15\_K160\_3 OR QC15\_K160\_4 OR QC15\_K160\_5 OR  
 QC15\_K160\_6 = 1, SET KTEEMP = 1 AND KTEINSUR = 1  
 AND (IF KTEDIREC = 1, SET KTEDIREC = 0);  
 IF QC15\_K160\_7 = 1, SET KTEMCAL = 1 AND KTEINSUR = 1;  
 IF QC15\_K160\_11 = 1, SET KTEHBEX = 1 AND KTEINSUR = 1

**PROGRAMMING NOTE QC15\_K161:**

IF KTEINSUR = 1, GO TO PROGRAMMING NOTE QC15\_K167;  
 ELSE CONTINUE WITH QC15\_K161

**QC15\_K161** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?  
 {他/她} 是否享受CHAMPUS/CHAMP VA、Tricare 或其它軍隊醫療保險計劃？

**KIA6**

YES .....1 [GO TO PN QC15\_K167]  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QC15\_K161:**

IF QC15\_K161 = 1, SET KTEMILIT = 1 AND SET KTEINSUR = 1

**QC15\_K162** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, or something else?  
{他/她}是否享受其他政府醫療保險計劃，例如AIM、Mister MIP、Family PACT，或其他計劃？

**KIA7**

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and Healthy Kids is a program for children in your county."]

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

AIM .....	1	[GO TO PN QC15_K167]
"MISTER MIP"/MRMIP .....	2	[GO TO PN QC15_K167]
Family PACT .....	3	[GO TO PN QC15_K167]
HEALTHY KIDS .....	4	[GO TO PN QC15_K167]
NO OTHER PLAN .....	5	
SOMETHING ELSE (SPECIFY: _____) .....	91	[GO TO PN QC15_K167]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QC15\_K162:**

**IF QC15\_K162 = 1 OR 2 OR 3 OR 4 OR 91, SET KTEOTHGO = 1 AND SET KTEINSUR = 1**

**QC15\_K163** Does {he/she} have any health insurance coverage through a plan that I missed?  
{他/她} 有沒有享受任何我漏掉的其它醫療保險計劃？

**KIA8**

YES .....	1	
NO .....	2	[GO TO PN QC15_K166]
REFUSED .....	-7	[GO TO PN QC15_K166]
DON'T KNOW .....	-8	[GO TO PN QC15_K166]



**QC15\_K164** What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

麥格保險是透過Medi-CAL（加州醫療保健計劃）、Healthy Families（健康家庭計劃）、僱主或工會獲得的、還是從某些其它來源獲得的？

**KIA9**

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

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "您是 通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構 還是直接向保健計劃獲得這項計劃的?"]

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其它計畫嗎? 」]

THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	1	
THROUGH SCHOOL, PROFESSIONAL ASSOCIATION, TRADE GROUP OR OTHER ORGANIZATION.....	2	
PURCHASED DIRECTLY FROM A HEALTH PLAN (BY R OR ANYONE ELSE) .....	3	
MEDICARE .....	4	(VERIFY)
MEDI-CAL .....	5	
CHAMPUS/CHAMP-VA, TRICARE, VA, OR SOME OTHER MILITARY HEALTH CARE .....	7	
INDIAN HEALTH SERVICE, TRIBAL HEALTH PROGRAM, URBAN INDIAN CLINIC.....	8	
COVERED CALIFORNIA.....	10	
SHOP THROUGH COVERED CALIFORNIA .....	11	
OTHER GOVERNMENT HEALTH PLAN .....	91	
OTHER NON-GOVERNMENT HEALTH PLAN.....	92	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QC15\_K164:**

IF QC15\_K164\_1 = 1, SET KTEEMP = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_2 = 1, SET KTEEMP = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_3 = 1, SET KTEDIREC = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_4 = 1, SET KTEMCARE = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_5 = 1, SET KTEMCAL = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_7 = 1, SET KTEMILIT = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_8 = 1, SET KTEIHS = 1;  
 IF QC15\_K164\_10 = 1, SET KTEHBEX = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_11 = 1, SET KTEHBEX = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164\_91 = 1, SET KTEOTHGOV = 1 AND SET KTEINSUR = 1;  
 IF QC15\_K164 = 92, -7 OR -8, SET KTEOTHER = 1 AND SET KTEINSUR = 1

**PROGRAMMING NOTE QC15\_K165:**  
**IF QC15\_K164\_4 = 1 (MEDICARE), CONTINUE WITH QC15\_K165;**  
**ELSE SKIP TO PN QC15\_K166**

**QC15\_K165** Just to verify, you said that {TEEN} gets health insurance through Medicare?  
 我只是要確定一下, 你說過 { TEEN } 有從 聯邦醫療照顧(Medicare) 獲得醫療保險?

**KIA9VER**

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

**PROGRAMMING NOTE QC15\_K166:**  
**IF KTEINSUR ≠ 1 CONTINUE WITH QC15\_K166;**  
**ELSE GO TO QC15\_K167;**

**QC15\_K166** What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?  
 孩子沒有加入加州醫療輔助計劃 ( Medi-CAL ) 的一個主要原因是什?

**KIA1A**

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

**PROGRAMMING NOTE QC15\_K167:**

IF QC15\_K148 = 1 AND KARMCARE = 1 AND QC15\_K16 = 1, THEN QC15\_K167 = QC15\_K16 AND QC15\_K169 = QC15\_K17 AND SKIP TO QC15\_K170;  
 ELSE IF QC15\_K148 = 1, THEN QC15\_K167 = QC15\_K67 AND QC15\_K169 = QC15\_K69 AND QC15\_K170 = QC15\_K70 AND GO TO PN QC15\_K171;  
 ELSE IF QC15\_K150 = 1, THEN QC15\_K167 = QC15\_K128 AND QC15\_K169 = QC15\_K129 AND QC15\_K170 = QC15\_K131 AND GO TO PN QC15\_K171;  
 ELSE IF KTEINSUR = 1, THEN CONTINUE WITH QC15\_K167;  
 ELSE GO TO PROGRAMMING NOTE QC15\_K171

**QC15\_K167** Is (TEEN)'s main health plan an HMO, that is, a Health Maintenance Organization?  
 孩子參加的主要保健計劃是 HMO（健康維護機構計劃）嗎？

**KMA8**

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

[IF NEEDED, SAY: "HMO代表「健康維護機構」。在HMO計劃中，{he or she}必須使用網路內的醫生及醫院的服務。除非是急診，如果{he or she}在網路外醫生或醫院處接受服務，計劃通常不支付服務費。"]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her} MAIN health plan."]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{他/她}主要保健計劃。"]

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

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

**PROGRAMMING NOTE QC15\_K168:**

IF KTEMCAL = 1 (TEEN HAS MEDI-CAL), GO TO QC15\_K169;  
 ELSE CONTINUE WITH QC15\_K168;

**QC15\_K168** Is (TEEN)'s health plan a PPO or EPO?  
{他的或她的}保健計劃是一項 PPO 計劃還是 EPO 計劃？

**KAI116**

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

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

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

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

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

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

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

**QC15\_K169** What is the name of (TEEN)'s main health plan?  
 {TEEN}參加的{Medi-Cal}保健計劃名稱是什麼?

**KMA7**

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

**[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: { TEEN }是否有保險卡或註明計劃名稱的其他文件? "]**

ACCESS SENIOR HEALTHCARE .....	1
AETNA .....	2
AETNA GOLDEN MEDICARE .....	3
AIDS HEALTHCARE FOUNDATION, LA .....	4
ALAMEDA ALLIANCE FOR HEALTH .....	5
ALTAMED HEALTH SERVICES.....	83
ANTHEM BLUE CROSS OF CALIFORNIA.....	7
ASPIRE HEALTH PLAN .....	8
BLUE CROSS CALIFORNIACARE .....	9
BLUE CROSS SENIOR SECURE .....	79
BLUE SHIELD 65 PLUS .....	11
BLUE SHIELD OF CALIFORNIA .....	12
BRAND NEW DAY (UNIVERSAL CARE) .....	13
CALIFORNIA HEALTH AND WELLNESS PLAN ..	14
CALIFORNIAKIDS (CALKIDS) .....	15
CAL OPTIMA (CALOPTIMA ONE CARE).....	16
CALVIVA HEALTH.....	17
CARE 1 <sup>ST</sup> HEALTH PLAN .....	18
CAREMORE HEALTH PLAN.....	19
CENTER FOR ELDERS' INDEPENDENCE.....	21
CEN CAL HEALTH .....	80
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH.....	22
CENTRAL HEALTH PLAN.....	23
CHINESE COMMUNITY HEALTH PLAN .....	24
CHOICE PHYSICIANS NETWORK.....	25
CIGNA HEALTHCARE .....	26
CITIZENS CHOICE HEALTHPLAN .....	27
COMMUNITY CARE HEALTH PLAN .....	28
COMMUNITY HEALTH GROUP .....	29
CONTRA COSTA HEALTH PLAN.....	81
DAVITA HEALTHCARE PARTNERS PLAN .....	31
EASY CHOICE HEALTH PLAN.....	32
EPIC HEALTH PLAN .....	33
GEM CARE HEALTH PLAN .....	34
GOLD COAST HEALTH PLAN.....	35
GOLDEN STATE MEDICARE HEALTH PLAN.....	36
HEALTH NET.....	38
HEALTH NET SENIORITY PLUS.....	39
HEALTH PLAN OF SAN JOAQUIN .....	40
HEALTH PLAN SAN JP AUTHORITY .....	41
HERITAGE PROVIDER NETWORK .....	42
HUMANA GOLD PLUS.....	43
HUMANA HEALTH PLAN.....	44
IEHP (INLAND EMPIRE HEALTH PLAN) .....	45
INTER VALLEY HEALTH PLAN.....	46

HEALTH ADVANTAGE .....	82
KAISER PERMANENTE .....	47
KAISER PERMANENTE SENIOR ADVANTAGE..	48
KERN FAMILY HEALTH CARE .....	49
L.A. CARE HEALTH PLAN .....	50
MD CARE .....	51
MOLINA HEALTHCARE OF CALIFORNIA .....	54
MONARCH HEALTH PLAN .....	55
ON LOK SENIOR HEALTH SERVICES .....	56
PARTNERSHIP HEALTHPLAN OF CALIFORNIA	57
PIH HEALTH CARE SOLUTIONS .....	58
PREMIER HEALTH PLAN SERVICES .....	59
PRIMECARE MEDICAL NETWORK .....	60
PROVIDENCE HEALTH NETWORK .....	61
SCRIPPS HEALTH PLAN SERVICES .....	68
SEASIDE HEALTH PLAN .....	69
SAN FRANCISCO HEALTH PLAN .....	84
SANTA CLARA FAMILY HEALTH PLAN .....	90
SAN MATEO HEALTH COMMISION .....	86
SANTA BARBARA .....	88
SATELLITE HEALTH PLAN .....	92
SCAN HEALTH PLAN .....	67
SHARP HEALTH PLAN .....	70
SUTTER HEALTH PLAN .....	71
SUTTER SENIOR CARE .....	72
UNITED HEALTHCARE .....	73
UNITED HEALTHCARE SECURE HORIZON.....	74
UNIVERSITY HEALTHCARE ADVANTAGE .....	75
VALLEY HEALTH PLAN .....	76
VENTURA COUNTY HEALTH CARE PLAN .....	77
WESTERN HEALTH ADVANTAGE .....	78
CHAMPUS/CHAMP-VA .....	93
TRICARE/TRICARE FOR LIFE/TRICARE PRIME	87
VA HEALTH CARE SERVICES .....	89
MEDI-CAL .....	52
MEDICARE .....	53
OTHER (SPECIFY: _____) .....	85
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE QC15\_K169:****IF QC15\_K169 = 18, 72, OR 75, SET KTEMILIT = 1**

**QC15\_K170** Is (TEEN) covered for prescription drugs?  
 孩子 的計劃是否支付處方藥品？

**KIA14**

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

**PROGRAMMING NOTE FOR QC15\_K171:**

**IF [(KARINSUR ≠ 1 OR QC15\_K156 ≠ 1) AND (KTEEMP = 1 OR KTEDIREC = 1 OR KTEOTHER = 1),  
THEN CONTINUE WITH QC15\_K171;  
ELSE SKIP TO PN QC15\_K176**

**QC15\_K171** Does (TEEN)'s health plan have a deductible that is more than \$1,000?

孩子的健康保險計劃是否有超過1,000美元的免賠額？

**KAI82**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....	1	
NO .....	2	<b>[GO TO QC15_K173]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO QC15_K173]</b>
REFUSED .....	-7	<b>[GO TO QC15_K173]</b>
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QC15\_K172:**

**IF KTEEMP = 1, THEN CONTINUE WITH QC15\_K172;  
ELSE GO TO QC15\_K173**

**QC15\_K172** Does (TEEN)'s health plan have a deductible that is more than \$2,000?

孩子的醫療保險計劃是否有超過2,000美元的免賠額？

**KAI87**

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

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

YES .....	1	<b>[GO TO PN QC15_K174]</b>
NO .....	2	
YES, ONLY WHEN GO OUT OF NETWORK .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_K173** Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$2,000?

孩子的健康保險計劃對於所有受保人是否有超過 2,000 美元的免賠額？

**KAI83**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....	1	
NO .....	2	<b>[GO TO PN QC15_K186]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO PN QC15_K186]</b>
REFUSED .....	-7	<b>[GO TO PN QC15_K186]</b>
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QC15\_K174:**  
**IF KTEEMP = 1, THEN CONTINUE WITH QC15\_K174;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K175**

**QC15\_K174** Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$4,000?

孩子的醫療保險計劃對於所有受保人是否有超過 4,000 美元的免賠額？

**KAI88**

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

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

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

**PROGRAMMING NOTE QC15\_K175:**  
**IF (QC15\_K171 = 1 OR 3) OR (QC15\_K172 = 1 OR 3) OR (QC15\_K173 = 1 OR 3), CONTINUE WITH QC15\_175;**  
**ELSE SKIP TO PROGRAMMING NOTE QC15\_K176**

**QC15\_K175** Do your spouse have a special account or fund {he or she} can use to pay for (TEEN)'s medical expenses?

您 {配偶} 是否有可以用於支付孩子的醫療費用的 特殊帳戶或資金？

**KAI84**

**[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."]**

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



**PROGRAMMING NOTE QC15\_K176:**  
**IF KTEINSURE = 1, GO TO QC15\_K181;**  
**ELSE CONTINUE WITH QC15\_K176**

**QC15\_K176** What is the one main reason (TEEN) does not have any health insurance?  
 孩子沒有任何健康保險的一個主要原因是什麼？

**KIA18**

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

**QC15\_K177** Was (TEEN) covered by health insurance at any time during the past 12 months?  
 孩子在過去12個月中的任何時間是否享受醫療保險？

**KIA20**

YES .....1 [GO TO QC15\_K179]  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K178** How long has it been since (TEEN) last had health insurance?  
 孩子從上一次有醫療保險到現在已有多長時間？

**KIA21**

MORE THAN 12 MONTHS, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 [GO TO QC15\_K187]  
 MORE THAN 3 YEARS AGO .....2 [GO TO QC15\_K187]  
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 [GO TO QC15\_K187]  
 REFUSED ..... -7 [GO TO QC15\_K187]  
 DON'T KNOW/NOT SURE ..... -8 [GO TO QC15\_K187]

**QC15\_K179** For how many of the last 12 months did {he/she} have health insurance?  
 在過去十二個月內，{他/她}有幾個月有醫療保險？

**KIA22**

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS,  
 ENTER 1]**

\_\_\_\_\_ MONTHS [HR: 0-12] [IF 0, THEN GO TO PN  
 QC15\_K198]  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QC15\_K180** During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, , a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在孩子有醫療保險期間, {他/她}保險是 Medi-Cal、Healthy Families、你透過雇主獲得的計劃、你直接從保險 公司購買的計劃、你透過Covered California購買的計劃還是其他計?

**KIA23**

**[CODE ALL THAT APPLY]**

**[PROBE: "Any others?"]**

**[PROBE: 「還有任何其他計劃嗎」]**

MEDI-CAL .....	1	<b>[GO TO QC15_K187]</b>
THROUGH CURRENT OR FORMER		
EMPLOYER/UNION .....	3	<b>[GO TO QC15_K187]</b>
PURCHASED DIRECTLY .....	5	<b>[GO TO QC15_K187]</b>
COVERED CALIFORNIA .....	6	<b>[GO TO QC15_K187]</b>
OTHER HEALTH PLAN .....	91	<b>[GO TO QC15_K187]</b>
REFUSED .....	-7	<b>[GO TO QC15_K187]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_K187]</b>

**QC15\_K181** Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?

請想一想{他/她}目前參加的健康保險, 孩子是否在過去十二個月中 一直參加這個相同的健康保險計劃?

**KIA24**

YES .....	1	<b>[GO TO QC15_K187]</b>
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QC15\_K182** When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?

當 {他/她} 沒有享受目前的醫療保險計劃時, {他/她} 有沒有其它任何醫療保險?

**KIA25**

YES .....	1	
NO .....	2	<b>[GO TO QC15_K184]</b>
REFUSED .....	-7	<b>[GO TO QC15_K184]</b>
DON'T KNOW .....	-8	<b>[GO TO QC15_K184]</b>

**QC15\_K183** Was {his/her/his or her} other health insurance Medi-Cal, a plan your spouse obtained from an employer, a plan purchased directly from an insurance company, a plan purchased through Covered California, or some other plan?  
 該其他醫療保險是Medi-CAL, 你 {配偶} 透過雇主獲得的 計劃、你 {配偶} 直接從保險公司購買的計劃、你透過Covered California購買 的計劃還是其他計劃？

**KIA26**

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他計劃嗎？」]

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

**QC15\_K184** During the past 12 months, was there any time when {he/she} had no health insurance at all?

在過去 12 個月中, {他/她} 有沒有任何時間完全沒有醫療保險？

**KIA27**

YES .....1  
 NO .....2 [GO TO QC15\_K187]  
 REFUSED ..... -7 [GO TO QC15\_K187]  
 DON'T KNOW ..... -8 [GO TO QC15\_K187]

**QC15\_K185** For how many of the past 12 months did {he/she} have no health insurance?

在過去 12 個月中, {he/she}有幾個月沒有健康保險？

**KIA28**

[IF < 1 MONTH, ENTER "1"]

\_\_\_\_\_ MONTHS [RANGE: 1-12]

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

**QC15\_K186** What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?  
 在孩子沒有保險的日子裡, {他/她} 沒有醫療保險的 一個主要原因是什麼?

**KIA29**

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

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

**PROGRAMMING NOTE QC15\_K187:**

**IF NOT ANSWERED IN EARLIER IN THE CHILD-FIRST (QC15\_K89 = -1), THEN CONTINUE;**

**[IF CHILD SELECTED]**

**IF KCHINSUR ≠ 1 OR QC15\_K138 = 2 OR QC15\_K143 = 2 OR QC15\_K145 = 1 OR QC15\_K141 = (5, 6) OR QC15\_K144 = (5, 6) OR KCHHBEX = 1 OR KCHDIREC = 1; THEN CONTINUE WITH QC15\_K187;**

**[IF TEEN SELECTED]**

**IF TEINSURE ≠ 1 OR QC15\_K177 = 2 OR QC15\_K182 = 2 OR QC15\_K184 = 1 OR QC15\_K180 = (5, 6) OR QC15\_K183 = (5, 6) OR KTEHBEX = 1 OR KTEDIREC = 1; THEN CONTINUE WITH QC15\_K187;**

**ELSE GO TO PROGRAMMING NOTE QC15\_K204**

**QC15\_K187** In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?  
 在過去12個月中, 你是否曾經嘗試直接從保險公司或HMO或透過 Covered California購買醫療保險計劃?

**KAH103i**

YES .....1  
 NO .....2 **[GO TO PN QC15\_K204]**  
 REFUSED ..... -7 **[GO TO PN QC15\_K204]**  
 DON'T KNOW ..... -8 **[GO TO PN QC15\_K204]**

**QC15\_K188** Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?  
這是直接從保險公司或HMO購買、還是透過Covered California 購買、還是既從保險公司又透過Covered California購買的計劃？

**KAH110i**

DIRECTLY FROM AN INSURANCE	
COMPANY OR HMO, OR.....	1
THROUGH COVERED CALIFORNIA, OR.....	2
BOTH, FROM AN INSURANCE COMPANY	
AND THROUGH COVERED CALIFORNIA.....	3
REFUSED .....	-7
DON'T KNOW .....	-8

[GO TO PN QC15\_K191]  
[GO TO PN QC15\_K191]

**PROGRAMMING NOTE QC15\_K189:**

IF QC15\_K188 = 1; THEN CONTINUE WITH QC15\_K189;

IF QC15\_K188 = 3; THEN CONTINUE WITH QC15\_K189 AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."

ELSE GO TO PROGRAMMING NOTE QC15\_K204;

**QC15\_K189** {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}  
{首先，請考慮你在嘗試直接從保險公司或 HMO 購買保險時的經歷。}

How difficult was it to find a plan with the coverage you needed? Was it...  
找到一項你需要的保賠範圍的計劃有多困難？你認為是.....

**KAH98i**

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

**QC15\_K190** How difficult was it to find a plan you could afford? Was it...  
找到一項你能負擔得起的計劃有多困難？你認為是.....

**KAH99i**

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

**QC15\_K191** Did anyone help you find a health plan?  
是否有人幫助你尋找醫療保險計劃？

**KAH100i**

YES .....	1	
NO .....	2	[GO TO PN QC15_K204]
REFUSED .....	-7	[GO TO PN QC15_K204]
DON'T KNOW .....	-8	[GO TO PN QC15_K204]

**QC15\_K192** Who helped you?  
是誰幫助你的？

**KAH101i**

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

**PROGRAMMING NOTE QC15\_K193:**

**IF QC15\_K188 = 2; THEN CONTINUE WITH QC15\_K193;**

**IF QC15\_K188 = 3; THEN CONTINUE WITH QC15\_K193 AND DISPLAY "Now, think about your experience with Covered California."**

**ELSE GO TO PROGRAMMING NOTE QC15\_K197;**

**QC15\_K193** {Now, think about your experience with Covered California.}  
{現在，請想一想你與 Covered California 交往的經歷。}

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

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

**KAH111i**

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

**QC15\_K194** How difficult was it to find a plan you could afford? Was it...  
找到一項你能負擔得起的計劃難度有多大？是.....

**KAH112i**

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

**QC15\_K195** Did anyone help you find a health plan?  
是否有人幫助你找到一項保健計劃？

**KAH113i**

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

[GO TO QC15\_K197]

[GO TO QC15\_K197]

[GO TO QC15\_K197]

**QC15\_K196** Who helped you?  
是誰幫助你的？

**KAH114i**

BROKER .....	1
FAMILY MEMBER / FRIEND .....	2
INTERNET .....	3
CERTIFIED INSURANCE AGENTS .....	4
OTHER (SPECIFY: _____).....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QC15\_K197** Did you have all the information you felt you needed to make a good decision on a health plan?

你是否有你認為幫助作出有關保健計劃的良好決定所需的所有資訊？

**KAH115i**

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

**PROGRAMMING NOTE QC15\_K198:**

**IF QC15\_H23 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QC15\_K198;  
ELSE GO TO QC15\_K199;**

**QC15\_K198** Were you able to get information about your health plan options in your language?  
你是否能夠用你自己的語言獲得有關你的保健計劃選擇的資訊？

**KAH116i**

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

**QC15\_K199** Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?  
您選擇的計劃費用在您選擇計劃時是非常重要、較為重要還是不重要？

**KAH117i**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT .....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K200** Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?  
從某一家特定的醫院接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要？

**KAH118i**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT .....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K201** Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?  
從某一家特定的醫院接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要？

**KAH119i**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT .....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8



**QC15\_K202** Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?  
計劃網路內的醫生選擇在您選擇計劃時是**非常重要**、**較為重要**還是**不重要**？

**KAH120i**

VERY IMPORTANT .....1  
SOMEWHAT IMPORTANT.....2  
NOT IMPORTANT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K203:**

IF QC15\_K117 = 1 OR QC15\_K165 = 1, THEN DISPLAY "Bronze"  
ELSE IF QC15\_K117 = 2 OR QC15\_K156 = 2, THEN DISPLAY "Silver"  
ELSE IF QC15\_K117 = 3 OR QC15\_K156 = 3, THEN DISPLAY "Gold"  
ELSE IF QC15\_K117 = 4 OR QC15\_K156 = 4, THEN DISPLAY "Platinum"  
ELSE IF QC15\_K117 = 4 OR QC15\_K156 = 6, THEN DISPLAY "Minimum Coverage"  
ELSE DISPLAY " ";

**QC15\_K203** Finally, what was the most important reason you chose your {Bronze/Silver/Gold/Platinum/Minimum Coverage} plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?  
最後, 您選擇{銅/銀/金/白金/最低保額}計劃的**最重要**的一個原因是什麼？是費用、您可以從某一位特定的醫生處接受護理服務、您可以在某一家醫院就診、您的計劃網路內的服務提供者選擇、還是其他一些原因？

**KAH121i**

COST .....1  
SPECIFIC DOCTOR.....2  
SPECIFIC HOSPITAL.....3  
CHOICE OF DOCTORS IN NETWORK.....4  
OTHER (SPECIFY: \_\_\_\_\_)..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QC15\_K204** What is your best estimate of your household's total annual income from all sources before taxes in 2014?

您的住戶 2014 年來自所有來源的**稅前全年總收入**是多少？

**KAK22**

[IF NEEDED, SAY: "Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income."]

[IF NEEDED, SAY: 「請包括工作、社會安全、退休收入、失業補助金、公共援助等收入。另外還請包括利息、紅利、業務、農場或租金淨收入以及任何其他資金收入。」]

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$ \_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7 [GO TO PN QC15\_K206]  
DON'T KNOW ..... -8 [GO TO PN QC15\_K206]

**QC15\_K205** PLEASE VERIFY AMOUNT ENTERED:  
I have entered that your annual household income is (AMOUNT). Is that correct?  
根據我的記錄，您的住戶年收入是 (AMOUNT)。這是否正確？

**KAK22A**

YES .....	1	[GO TO PN QC15_K212]
NO .....	2	[GO BACK TO QC15_K204]
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**PROGRAMMING NOTE QC15\_K206:**  
**IF QC15\_K204 = -7 OR -8 CONTINUE WITH QC15\_K206;**  
**ELSE GO TO PROGRAMMING NOTE QC15\_K212**

**QC15\_K206** We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes is more than \$20,000 per year or is it less?  
我們不需要知道詳細的數字，但您可不可以告訴我，你們住戶所有來源的稅前年收入是否超過還是不足 20,000 美元？

**KAK11**

MORE .....	1	[GO TO QC15_K208]
EQUAL TO \$20K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**QC15\_K207** Is it ...  
是.....

**KAK12**

\$5,000 or less,.....	1	[GO TO PN QC15_K212]
\$5,000 或以下 .....	1	
\$5,001 to \$10,000, .....	2	[GO TO PN QC15_K212]
\$5,001 to \$10,000, .....	2	
\$10,001 to \$15,000, or .....	3	[GO TO PN QC15_K212]
\$5,001 到 \$10,000, 或 .....	3	
\$15,001 to 20,000? .....	4	[GO TO PN QC15_K212]
\$15,001 到 20,000? .....	4	
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**QC15\_K208** Is it more or less than \$70,000 per year?  
收入每年是否超過還是不足 70,000 美元？

**KAK13**

MORE .....	1	[GO TO QC15_K210]
EQUAL TO \$70K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**QC15\_K209** Is it ...  
是.....

**KAK14**

\$20,001 to \$30,000, .....	1	[GO TO PN QC15_K212]
\$20,001 到 \$30,000, .....	1	
\$30,001 to \$40,000, .....	2	[GO TO PN QC15_K212]
\$30,001 到 \$40,000, .....	2	
\$40,001 to \$50,000, .....	3	[GO TO PN QC15_K212]
\$40,001 到 \$50,000, .....	3	
\$50,001 to \$60,000, or .....	4	[GO TO PN QC15_K212]
\$50,001 到 \$60,000, 還是 .....	4	
\$60,001 to \$70,000? .....	5	[GO TO PN QC15_K212]
\$60,001 到 \$70,000? .....	5	
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**QC15\_K210** Is it more or less than \$135,000 per year?  
收入每年是否超過還是不足 135,000 美元？

**KAK15**

MORE .....	1	[GO TO PN QC15_K212]
EQUAL TO \$135K OR LESS .....	2	
REFUSED .....	-7	[GO TO PN QC15_K212]
DON'T KNOW .....	-8	[GO TO PN QC15_K212]

**QC15\_K211** Is it ...  
是.....

**KAK16**

\$70,001 to \$80,000, .....	1
\$70,001 到 \$80,000, .....	1
\$80,001 to \$90,000, .....	2
\$80,001 到 \$90,000, .....	2
\$90,001 to \$100,000, or .....	3
\$90,001 到 \$100,000, 還是 .....	3
\$100,001 to \$135,000? .....	4
\$100,001 到 \$135,000? .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_K212:**  
**IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QC15\_K216;**  
**ELSE CONTINUE WITH QC15\_K212**

**QC15\_K212** Including yourself, how many people living in your household are supported by your total household income?  
包括您自己在內，住在您的住戶裡的多少人需要依靠您的住戶總收入生活？

**KAK17**

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

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

**PROGRAMMING NOTE QC15\_K213:**  
**QC15\_K213 MUST BE LESS THAN QC15\_K212;**  
**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) = QC15\_K216 GO TO PROGRAMMING NOTE QC15\_K6;**  
**ELSE CONTINUE WITH QC15\_K213**

**QC15\_K213** How many of these {INSERT NUMBER FROM QC15\_K211} people are children under the age of 18?

在這{ INSERT NUMBER FROM QC15\_K211} 口人中，有多少是 18 歲以下的孩子？

**KAK18**

\_\_\_\_\_ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

REFUSED ..... -7

DON'T KNOW ..... -8

**QC15\_K214** Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?

是否有住在美國、目前不住在你們住戶中、但依靠你們的住戶收入生活的任何其他人？

**KAK32**

YES ..... 1

NO ..... 2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QC15\_K216]**

**[GO TO PN QC15\_K216]**

**[GO TO PN QC15\_K216]**

**QC15\_K215** How many?  
有幾個人？

**KAK33**

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K216:**

OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2011 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QC15\_K210 AND QC15\_K211 RESPECTIVELY. (THE 50%, 133%, 200%, 300%, AND 400% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2010 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 0.5, 1.33, 2, 3, AND 4, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM "Poverty Level 2010" DOCUMENT FOR THE TABLE OF VALUES. THE 50% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT50, THE 100% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT100, THE 133% VALUE IN CATI VARIABLE POVRT133, THE 200% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT200, THE 300% VALUE IN CATI VARIABLE POVRT300, AND THE 400% VALUE IN CATI VARIABLE POVRT400.) IF EITHER QC15\_K212 OR QC15\_K213 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT SC13A OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

ASCERTAIN IF THE HOUSEHOLD INCOME IS (VALUES FOR BASE.KPOVERTY)...

- 1) AT OR BELOW 50% FPL;
- 2) ABOVE 50% FPL BUT AT OR BELOW 100% FPL;
- 3) ABOVE 100% FPL BUT AT OR BELOW 133% FPL;
- 4) ABOVE 133 % FPL BUT AT OR BELOW 200% FPL;
- 5) ABOVE 200% FPL BUT AT OR BELOW 300% FPL;
- 6) ABOVE 300% FPL BUT AT OR BELOW 400% FPL;
- 7) ABOVE 400% FPL; OR
- 8) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QC15\_K204 > -7 OR -8 (INCOME GIVEN) OR [QC15\_K204 = -7 OR -8 (REF/DK) AND (QC15\_K206 = -7 OR QC15\_K208 = -7 OR QC15\_K210 = -7 (INCOME RANGE REFUSED))], SKIP TO QC15\_K222; ELSE IF QC15\_K204 = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, ASK QC15\_K215 USING KPVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT); ELSE SKIP TO PN QC15\_K217

**QC15\_K216** I need to ask just one more question about income.

我想再問您一個收入方面的問題。

Was your total annual household income before taxes less than or more than

\${POVRT50}?

我想再問您一個收入方面的問題。

**KAK29**

EQUAL TO OR LESS .....	1	[GO TO PN QC15_K222]
MORE .....	2	[GO TO PN QC15_K222]
REFUSED .....	-7	[GO TO PN QC15_K222]
DON'T KNOW .....	-8	[GO TO PN QC15_K222]

**POST NOTE QC15\_K216:**

IF QC15\_K216 = 1, THEN KPOVERTY = 1;

ELSE IF QC15\_K216 = 2, THEN KPOVERTY = 2

**PROGRAMMING NOTE QC15\_K217:**

IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, THEN CONTINUE WITH QC15\_K217 USING POVRT100 (100% POVERTY CUTOFF DISPLAY AMOUNT) AND IF QC15\_K216 WAS NOT ASKED, DISPLAY "I need to ask one or two more questions about income. Was your total annual household income before taxes";

ELSE DISPLAY, "Was it";

ELSE GO TO PROGRAMMING NOTE QC15\_K218

**QC15\_K217** I need to ask just one or two more questions about income.  
我想再問您一、兩個收入方面的問題。

Was your total annual household income before taxes/Was it less than or more than \${POVRT100}?

您的住戶年度稅前總收入是不足還是超過{POVRT100}美元?

**KAK18A**

EQUAL TO OR LESS .....	1	[GO TO PN QC15_K222]
MORE .....	2	
REFUSED .....	-7	[GO TO PN QC15_K222]
DON'T KNOW .....	-8	[GO TO PN QC15_K222]

**POST NOTE QC15\_K217:**

IF QC15\_K217 = 1 THEN KPOVERTY = 2;

ELSE IF QC15\_K217 = 2, SKIP TO PN QC15\_K218

**PROGRAMMING NOTE QC15\_K218:**

IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, THEN CONTINUE WITH QC15\_K218 USING POVRT133 (133% POVERTY CUTOFF DISPLAY AMOUNT);

IF QC15\_K216 AND QC15\_K217 WERE NOT ASKED, DISPLAY "I need to ask just one more question about income. Was your total income before taxes";

ELSE DISPLAY "Was it";

ELSE GO TO PROGRAMMING NOTE QC15\_K219

**QC15\_K218** {I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than \${POVRT133}?

{我只需再問您一個收入方面的問題。您的住戶年度稅前總收入} 是低於還是超過 {POVRT133}美元？

**KAK30**

EQUAL TO OR LESS .....	1	[GO TO PN QC15_K222]
MORE .....	2	[GO TO PN QC15_K222]
REFUSED .....	-7	[GO TO PN QC15_K222]
DON'T KNOW .....	-8	[GO TO PN QC15_K222]

**POST NOTE QC15\_K218:**

IF QC15\_K218 = 1, THEN KPOVERTY = 3;

ELSE IF QC15\_K218 = 2, THEN KPOVERTY = 4

**PROGRAMMING NOTE QC15\_K219:**

IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, CONTINUE WITH QC15\_K219 USING POVRT200 (200% POVERTY CUTOFF DISPLAY AMOUNT) AND IF QC15\_K216 AND QC15\_K217, AND QC15\_K218 WERE NOT ASKED, DISPLAY "I need to ask just one more question about income. Was your total income before taxes";

ELSE DISPLAY "Was it";

ELSE GO TO PROGRAMMING NOTE QC15\_K220

**QC15\_K219** {I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than \${POVRT200}?

我只需再問您一個收入方面的問題。您的住戶年度稅前總收入是低於還是超過 {POVRT200}美元？

**KAK18B**

EQUAL TO OR LESS .....	1	[GO TO PN QC15_K222]
MORE .....	2	[GO TO PN QC15_K222]
REFUSED .....	-7	[GO TO PN QC15_K222]
DON'T KNOW .....	-8	[GO TO PN QC15_K222]

**POST NOTE QC15\_K219:**

IF QC15\_K219 = 1, THEN KPOVERTY = 4;

ELSE IF QC15\_K219 = 2, THEN KPOVERTY = 5

**PROGRAMMING NOTE QC15\_K219:**

IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, CONTINUE WITH QC15\_K220 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT) AND IF QC15\_K216 AND QC15\_K217, AND QC15\_K218 AND QC15\_K219 WERE NOT ASKED, DISPLAY "I need to ask just one more question about income. Was your total income before taxes";

ELSE GO TO PROGRAMMING NOTE QC15\_K222

**QC15\_K220** {I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than \${POVRT300}?

我只需再問您一個收入方面的問題。您的住戶年度稅前總收入是低於還是超過 {POVRT300}美元？

**KAK18C**

EQUAL TO OR LESS .....	1	[GO TO PN QC15_K222]
MORE .....	2	[GO TO PN QC15_K222]
REFUSED .....	-7	[GO TO PN QC15_K222]
DON'T KNOW .....	-8	[GO TO PN QC15_K222]

**POST NOTE QC15\_K220:**

IF QC15\_K220 = 1, THEN KPOVERTY = 5;

ELSE IF QC15\_K220 = 2, THEN KPOVERTY = 6

**PROGRAMMING NOTE QC15\_K221:**

IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QC15\_K207, QC15\_K209, OR QC15\_K211, THEN CONTINUE WITH QC15\_K221 USING POVRT400 (400% POVERTY CUTOFF DISPLAY AMOUNT) AND IF QC15\_K216 AND QC15\_K217, AND QC15\_K218 AND QC15\_K219 AND QC15\_K220 WERE NOT ASKED, DISPLAY "I need to ask just one more question about income. Was your total income before taxes";  
ELSE GO TO PROGRAMMING NOTE QC15\_K222

**QC15\_K221** {I need to ask just one more question about income. Was your total annual household income before taxes/Was it} less than or more than \${POVRT400}?  
我只需再問您一個收入方面的問題。您的住戶年度稅前總收入是低於還是超過 {POVRT400}美元？

**KAK31**

EQUAL TO OR LESS .....1  
MORE .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST NOTE QC15\_K221:**

IF QC15\_K221 = 1, THEN KPOVERTY = 6;  
ELSE IF QC15\_K221 = 2, THEN KPOVERTY = 7

**POST NOTE KPOVERTY:**

IF KPOVERTY = 8 AND [(QC15\_K207 = 1, 2, 3, OR 4) OR (QC15\_K209 = 1, 2, 3, 4, OR 5) OR (QC15\_K211 = 1, 2, 3, OR 4)] (RANGE QUESTIONS ANSWERED AND NO POVERTY LEVEL FALLS WITHIN THE GIVEN RANGE), SET THIGH = HIGH END OF RANGE OF FINAL RANGE ITEM ASKED (For instance, if QC15\_K209 = 3, then THIGH=50000);

THEN SET KPOVERTY:

IF THIGH <= KPVRT50 THEN KPOVERTY = 1;  
ELSE IF THIGH <= KPVRT100 THEN KPOVERTY = 2;  
ELSE IF THIGH <= KPVRT133 THEN KPOVERTY = 3;  
ELSE IF THIGH <= KPVRT200 THEN KPOVERTY = 4;  
ELSE IF THIGH <= KPVRT300 THEN KPOVERTY = 5;  
ELSE IF THIGH <= KPVRT400 THEN KPOVERTY = 6;  
ELSE KPOVERTY = 7

**QC15\_K222** Do you own or rent your home?  
您是自己擁有住宅還是租用住宅？

**KAK25**

OWN .....1  
RENT .....2  
OTHER ARRANGEMENT .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K223:**

IF SR ≠ KA (SCREENER RESPONDENT IS NOT THE KNOWLEDGEABLE ADULT), CONTINUE WITH QC15\_K223;  
IF SR = KA (SCREENER RESPONDENT IS KNOWLEDGEABLE ADULT), SKIP TO QC15\_K224



**QC15\_K223** Just a few final questions and then we are done.  
最後再有幾個問題，我們就完成了。

To be sure we are covering the entire state, what  
county do you live in?

為了確保我們把全州都包括在研究範圍內，您住在哪個縣？

**KAH42**

ALAMEDA .....	1
ALPINE .....	2
AMADOR .....	3
BUTTE .....	4
CALAVERAS.....	5
COLUSA .....	6
CONTRA COSTA.....	7
DEL NORTE.....	8
EL DORADO .....	9
FRESNO .....	10
GLENN.....	11
HUMBOLDT .....	12
IMPERIAL .....	13
INYO .....	14
KERN .....	15
KINGS .....	16
LAKE .....	17
LASSEN .....	18
LOS ANGELES .....	19
MADERA.....	20
MARIN.....	21
MARIPOSA .....	22
MENDOCINO.....	23
MERCED.....	24
MODOC .....	25
MONO .....	26
MONTEREY .....	27
NAPA .....	28
NEVADA .....	29
ORANGE.....	30
PLACER.....	31
PLUMAS .....	32
RIVERSIDE.....	33
SACRAMENTO.....	34
SAN BENITO .....	35
SAN BERNARDINO.....	36
SAN DIEGO .....	37
SAN FRANCISCO.....	38
SAN JOAQUIN.....	39
SAN LUIS OBISPO.....	40
SAN MATEO.....	41
SANTA BARBARA.....	42
SANTA CLARA .....	43
SANTA CRUZ .....	44
SHASTA.....	45
SIERRA.....	46
SISKIYOU .....	47

SOLANO .....	48
SONOMA .....	49
STANISLAUS.....	50
SUTTER.....	51
TEHAMA .....	52
TRINITY .....	53
TULARE .....	54
TUOLUMNE .....	55
VENTURA .....	56
YOLO .....	57
YUBA .....	58
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QC15\_K224:**

**IF ADVANCE LETTER SENT AND R'S ADDRESS IS NOT A P.O. BOX, ASK QC15\_K224;  
 IF SR = AR (SCREENER RESPONDENT IS THE KNOWLEDGEABLE ADULT) DISPLAY "Just a few final questions and then we are done.";  
 ELSE GO TO QC15\_K225**

**QC15\_K224** {Just a few final questions and then we are done.}  
 {最後再有幾個問題，我們就完成了。}

Your phone number was randomly selected for this study by a computer. We were able to match an address to your phone number to send a letter to your home explaining the purpose of this study. To help us better understand the environment you live in and how it may affect your health, we would like to confirm your address. This information will be kept confidential and will be destroyed after the entire survey has been completed.

您的電話號碼是透過電腦以隨機方式被選擇參加本項研究的。我們已經根據您的電話號碼查到您的住址，並給您寄出了一封信，解釋本項研究的目的。為了幫助我們更好地瞭解您的生活環境以及您的生活環境對您的健康的影響，我們希望確認您的住址。我們會對您的住址保密，並在問卷調查全部完成後銷毀。

Do you now live at {R's ADDRESS AND STREET}?  
 您目前是否住在 {R's ADDRESS AND STREET} ?

**KA01**

**[VERIFY SPELLING]**

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

**[GO TO QC15\_K228]**

**PROGRAMMING NOTE QC15\_K225:**  
**IF R'S ADDRESS IS A P.O. BOX AND SR =KA (SCREENER RESPONDENT IS THE KNOWLEDGEABLE), DISPLAY "Just a few final questions and then we are done";**

**QC15\_K225** {Just a few final questions and then we are done.}  
 {最後再有幾個問題，我們就完成了。}

What is your zip code?  
 您的郵遞區號是？

KAM7

\_\_\_\_\_ ZIP CODE

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

**QC15\_K226** To help us better understand the environment you live in and how it may affect your health, please tell me the address where you live. This information will be kept confidential and will be destroyed after the entire survey has been completed.  
 為了幫助我們更好地瞭解您的生活環境以及您的生活環境對您的健康的影響，請告訴我您的住址。我們會對您的住址保密，並在問卷調查全部完成後銷毀。

KAO2

\_\_\_\_\_ HOUSE ADDRESS NUMBER

\_\_\_\_\_ NAME OF STREET (VERIFY SPELLING) **[GO TO QC15\_K228]**

\_\_\_\_\_ STREET TYPE

\_\_\_\_\_ APT. NO

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

**PROGRAMMING NOTE QC15\_K227:**  
**IF ADDRESS WAS GIVEN IN QC15\_K226, SKIP TO QC15\_K228;**  
**ELSE CONTINUE WITH QC15\_K227**

**QC15\_K227** Can you tell me just the name of the street you live on?  
 您是否能夠只告訴我您居住的街道名稱？

KAM8

\_\_\_\_\_ NAME OF STREET

REFUSED ..... -7 **[GO TO QC15\_K229]**  
 DON'T KNOW ..... -8 **[GO TO QC15\_K229]**

**QC15\_K228** And what is the name of the street down the corner from you that crosses your street?  
 在您所住的街道轉角處與您所住的街道交叉的街道名稱是什麼？

KAM9

\_\_\_\_\_ NAME OF CROSS-STREET

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

**PROGRAMMING NOTE QC15\_K229:**  
**IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QC15\_H25 (FOLLOW-UP);**  
**ELSE CONTINUE WITH QC15\_K229**

**QC15\_K229** I'm won't ask you for the number, but do you have a working cell phone?  
 我不會問您的手機號碼，但是，您是否有一個可以使用的手機？

**KAM33**

**[CODE "SHARES CELL PHONE" ONLY IF VOLUNTEERED]**

YES .....1  
 NO .....2  
 SHARES CELL PHONE .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QC15\_K230:**  
**IF QC15\_K229 = 1 (YES) OR 3 (SHARES CELL PHONE), THEN CONTINUE WITH QC15\_K230;**  
**ELSE SKIP TO PROGRAMMING QC15\_H25 (FOLLOW-UP)**

**QC15\_K230** Of all the telephone calls that you receive, are...  
 在您接聽的所有電話中，是.....

**KAM34**

All or almost all calls received on a cell phone, ..... 1  
 全部或幾乎全部電話在手機上接聽， ..... 1  
 Some on cell phones & some on regular phones, or ..... 2  
 部份電話在手機上接聽，  
 部份電話在普通電話上接聽，還是 ..... 2  
 Very few or none on cell phones..... 3  
 很少或幾乎沒有電話在手機上接聽？ ..... 3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

## SECTION H – DEMOGRAPHICS, PART III

**PROGRAMMING NOTE QC15\_H25:**  
**IF RESPONDENT IS NOT SAMPLED ADULT, CONTINUE WITH QC15\_H25;**  
**ELSE GO TO QC15\_H26**

**QC15\_H25** Based on the questions in this survey about (CHILD), is there another adult in the household who is more knowledgeable about questions we asked about (CHILD)?  
 根據您所了解的本次訪談中有關 (CHILD)的問題，您住戶中有沒有另一位成年人對關於 (CHILD)的這些問題更清楚？

**CH30**

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

**QC15\_H26** Those are my final questions. I appreciate your patience. Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?  
 以下是最後幾個問題。感謝您的耐心合作。最後，您是否願意在今後 參加本項問卷調查的後續調查？

**CG38**

YES .....1  
 MAYBE/PROBABLY YES .....2  
 DEFINITELY NOT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**END** Thank you. You have helped with a very important statewide survey. If you have any questions, you can contact Dr. Ponce, the Principal Investigator. Do you want that number? **[IF YES, SAY:** Dr. Ponce can be reached toll-free at 1-866-275-2447. **IF NO, SAY:** Goodbye.]  
 謝謝！你幫助我們進行了一項在全州範圍開展的非常重要的問卷調查。如果你有任何疑問，請與研究負責人Ninez Ponce 博士接洽。你要他 的電話號碼嗎？**[IF YES, SAY:**“你可以撥打免費電話號碼1-866-275-2447，與 Ponce 博士聯繫。” **IF NO, SAY:** “再見。”]