



# CHIS 2016

## Adult Questionnaire

### Version 2.8 Chinese

### September 19, 2017

Adult Respondents Age 18 and Older

*Collaborating Agencies:*

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- ☐ California Department of Health Care Services
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## Section A – Demographic Information, Part I

**PROGRAMMING NOTE QA15\_A1:**  
**SET AADATE = CURRENT DATE (YYYYMMDD)**

**QA15\_A1** What is your date of birth?  
 您的出生日期是什麼？

**AA1MON**

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

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

**AA1DAY**

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

**AA1YR**

YEAR \_\_\_\_\_ [RANGE: 1904-1997]

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

**PROGRAMMING NOTE QA15\_A2:**  
**IF QA15\_A1 = -7 OR -8 (REF/DK), CONTINUE WITH QA15\_A2;**  
**ELSE GO TO QA15\_A5**

**QA15\_A2** What month and year were you born?  
 您在哪年哪月出生？

**AA1AMON**

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

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

**AA1AYR**

YEAR \_\_\_\_\_ [RANGE: 1904-1997]

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

**PROGRAMMING NOTE QA15\_A3:**

**IF QA15\_A2 = -7 OR -8 (REF/DK) THEN CONTINUE WITH QA15\_A3;  
ELSE GO TO QA15\_A5**

**QA15\_A3** What is your age, please?  
請告訴我您的年齡？

**AA2**

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

**[GO TO QA15\_A5]**

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_A4:**

**IF QA15\_A3 = -7 OR -8 (REF/DK) THEN CONTINUE WITH QA15\_A4;  
ELSE GO TO QA15\_A5**

**QA15\_A4** Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49, between 50 and 64, or 65 or older?  
您的年齡是在 18 到 29 歲、30 到 39 歲、40 到 44 歲、45 到 49 歲、50 到 64 歲之間，還是在 65 歲或 65 歲以上？

**AA2A**

BETWEEN 18 AND 29 .....1

BETWEEN 30 AND 39 .....2

BETWEEN 40 AND 44 .....3

BETWEEN 45 AND 49 .....4

BETWEEN 50 AND 64 .....5

65 OR OLDER .....6

REFUSED ..... -7

DON'T KNOW ..... -8

**POST NOTE QA15\_A4: AAGE ENUM.AGE**

**CALCULATE VALUE OF AAGE BASED ON QA15\_A1, QA15\_A2, OR QA15\_A3 TO USE IN ALL AGE-RELATED QUESTIONS;**

**IF QA15\_A1, QA15\_A2, OR QA15\_A3 = -7 OR -8 (REF/DK), THEN USE QA15\_A4;  
ELSE USE ENUM.AGE**

**QA15\_A5** Are you male or female?  
您是男性還是女性？

**AA3**

MALE .....1

FEMALE .....2

REFUSED ..... -7

**QA15\_A6** Are you Latino or Hispanic?  
您是拉丁裔或西裔嗎？

**AA4**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QA15\_A8]**

**[GO TO PN QA15\_A8]**

**[GO TO PN QA15\_A8]**

**QA15\_A7** And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.  
 您的拉丁裔或西裔祖籍或原國籍是哪里？例如墨西哥人、薩爾瓦多人、古巴人、洪都拉斯人 — 如果有一個以上原國籍，請將所有的原國籍告訴我。

**AA5**

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

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

**PROGRAMMING NOTE QA15\_A8:**

**IF QA15\_A6 = 1 (YES, LATINO/HISPANIC) DISPLAY “You said you are Latino or Hispanic. Also,”;  
 IF MORE THAN ONE RACE GIVEN AFTER ENTERING RESPONSES FOR QA15\_A8, CONTINUE WITH  
 PROGRAMMING NOTE QA15\_A9;  
 ELSE FOLLOW SKIPS AS INDICATED FOR SINGLE RESPONSES**

**QA15\_A8** {You said you are Latino or Hispanic. Also,} please tell me which one or more of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?  
 {您說您是拉丁裔或西裔。另外，}請告訴我您會使用以下哪一項或幾項來描述您自己。您認為您是夏威夷土著人、其他太群島人、美洲印地安人、阿拉斯加土著人、亞洲人、黑人、非裔美國人還是白人？

**AA5A**

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

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

**[CODE ALL THAT APPLY]**

WHITE.....	1	<b>[GO TO PN QA15_A14]</b>
BLACK OR AFRICAN AMERICAN .....	2	<b>[GO TO PN QA15_A14]</b>
ASIAN .....	3	<b>[GO TO PN QA15_A12]</b>
AMERICAN INDIAN OR ALASKA NATIVE .....	4	<b>[GO TO PN QA15_A9]</b>
OTHER PACIFIC ISLANDER .....	5	<b>[GO TO PN QA15_A13]</b>
NATIVE HAWAIIAN .....	6	<b>[GO TO PN QA15_A16]</b>
OTHER (SPECIFY: _____) .....	91	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA15\_A9:**

**IF QA15\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA15\_A9;  
ELSE GO TO PROGRAMMING NOTE QA15\_A12**

**QA15\_A9**

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

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

**AA5B****[CODE ALL THAT APPLY]**

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

**QA15\_A10**

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

您是不是聯邦或州政府認可的部落的一名註冊成員？

**AA5C**

YES .....	1	
NO.....	2	<b>[GO TO PN QA15_A12]</b>
REFUSED .....	-7	<b>[GO TO PN QA15_A12]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_A12]</b>



**QA15\_A11** Which tribe are you enrolled in?  
您在哪一個部落註冊?

**AA5D**

<b>APACHE</b>	
MESCALERO APACHE, NM .....	1
APACHE (NOT SPECIFIED) .....	2
OTHER APACHE (SPECIFY: _____) .....	3
<b>BLACKFEET</b>	
BLACKFOOT/BLACKFEET .....	4
<b>CHEROKEE</b>	
WESTERN CHEROKEE .....	5
CHEROKEE (NOT SPECIFIED) .....	6
OTHER CHEROKEE (SPECIFY: _____) .....	7
<b>CHOCTAW</b>	
CHOCTAW OKLAHOMA .....	8
CHOCTAW (NOT SPECIFIED) .....	9
OTHER CHOCTAW (SPECIFY: _____) .....	10
<b>NAVAJO</b>	
NAVAJO (NOT SPECIFIED) .....	11
<b>POMO</b>	
HOPLAND BAND, HOPLAND RANCHERIA ..	12
SHERWOOD VALLEY RANCHERIA .....	13
POMO (NOT SPECIFIED) .....	14
OTHER POMO (SPECIFY: _____) .....	15
<b>PUEBLO</b>	
HOPI .....	16
YSLETA DEL SUR PUEBLO OF TEXAS .....	17
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SIOUX (NOT SPECIFIED) .....	21
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<b>OTHER</b>	
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_A12:**  
**IF QA15\_A8 = 3 (ASIAN) CONTINUE WITH QA15\_A12;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_A13**

**QA15\_A12** You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese? If you are more than one, tell me all of them.  
 您選擇了亞裔，您指的是哪一個具體族裔，例如華裔、菲律賓裔、越南裔？如果屬於一個以上族裔，請告訴我所有這些族裔。

**AA5E**

**[CODE ALL THAT APPLY]**

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

**PROGRAMMING NOTE QA15\_A13:**  
**IF QA15\_A8 = 5 (OTHER PACIFIC ISLANDER) CONTINUE WITH QA15\_A13;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_A14**

**QA15\_A13** You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan, or Guamanian? If you are more than one, tell me all of them.  
 您說您是太平洋群島人。您具體屬於哪一個種族團體，例如薩摩亞人、湯加人或關島人？如果您屬於一個以上種族團體，請告訴我所有的種族團體。

**AA5E1**

**[CODE ALL THAT APPLY]**

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

**PROGRAMMING NOTE QA15\_A14:**

IF QA15\_A6 = 1 (LATINO) AND [QA15\_A8 = 6 (NATIVE HAWAIIAN) OR QA15\_A8 = 5 (OTHER PACIFIC ISLANDER) OR QA15\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA15\_A8 = 3 (ASIAN) OR QA15\_A8 = 2 (BLACK/AFRICAN AMERICAN) OR QA15\_A8 = 1 (WHITE) OR QA15\_A8 = 91 (OTHER)], CONTINUE WITH QA15\_A14;  
 ELSE IF THERE WERE MULTIPLE RESPONSES TO QA15\_A8, QA15\_A12, OR QA15\_A13 [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH QA15\_A14;  
 ELSE SKIP TO QA15\_A16

**QA15\_A14** You said that you are: {INSERT MULTIPLE RESPONSES FROM QA15\_A7, QA15\_A8, QA15\_A12 AND QA15\_A13}.  
 您曾經說您是: {INSERT MULTIPLE RESPONSES FROM QA13\_A7, QA13\_A8, QA13\_A12 AND QA13\_A13}.  
 Do you identify with any one race in particular?  
 您是否認同任何一個特定的種族?

**AA5G**

YES .....	1	
NO .....	2	[GO TO QA15_A16]
REFUSED .....	-7	[GO TO QA15_A16]
DON'T KNOW .....	-8	[GO TO QA15_A16]

**PROGRAMMING NOTE FOR QA15\_A15:**

IF QA15\_A6 = 1 (YES, LATINO) AND QA15\_A7 ≠ -7 OR -8, DO NOT DISPLAY QA15\_A15 = 14 (LATINO);  
 IF QA15\_A8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA15\_A13 = 1 TO 4 OR 91, DO NOT DISPLAY QA15\_A15 = 17 (OTHER PACIFIC ISLANDER);  
 IF QA15\_A8 = 3 AND QA15\_A12 = 1 TO 17 OR 91, DO NOT DISPLAY QA15\_A15 = 19 (ASIAN)

**QA15\_A15** Which do you most identify with?  
 您最認同的是哪一個族裔?

**AA5F**

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

MEXICAN/MEXICAN AMERICAN/CHICANO .....	1
SALVADORAN.....	4
GUATEMALAN .....	5
COSTA RICAN.....	6
HONDURAN .....	7
NICARAGUAN .....	8
PANAMANIAN .....	9
PUERTO RICAN.....	10
CUBAN.....	11
SPANISH-AMERICAN (FROM SPAIN) .....	12
LATINO, OTHER SPECIFY .....	13
LATINO .....	14
NATIVE HAWAIIAN .....	16
OTHER PACIFIC ISLANDER .....	17
AMERICAN INDIAN OR ALASKA NATIVE .....	18
ASIAN .....	19
BLACK OR AFRICAN AMERICAN.....	20
WHITE.....	21
RACE, OTHER SPECIFY .....	22

BANGLADESHI.....	30
BURMESE .....	31
CAMBODIAN .....	32
CHINESE .....	33
FILIPINO .....	34
HMONG .....	35
INDIAN (INDIA) .....	36
INDONESIAN.....	37
JAPANESE .....	38
KOREAN .....	39
LAOTIAN.....	40
MALAYSIAN.....	41
PAKISTANI .....	42
SRI LANKAN.....	43
TAIWANESE .....	44
THAI .....	45
VIETNAMESE .....	46
ASIAN, OTHER SPECIFY .....	49
SAMOAN/AMERICAN SAMOAN.....	50
GUAMANIAN .....	51
TONGAN.....	52
FIJIAN .....	53
PACIFIC ISLANDER, OTHER SPECIFY.....	55
BOTH/ALL/MULTIRACIAL.....	90
NONE OF THESE.....	95
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_A16**

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

您現在是已婚、與伴侶像婚姻關係一樣同居、喪偶、離婚、分居還是從未結婚？

<b>AH43</b>
-------------

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

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

## Section B – Health Conditions

**QA15\_B1** These next questions are about your health.  
接下來這些問題與您的健康有關。

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

**AB1**

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

**QA15\_B2** Has a doctor ever told you that you have asthma?  
有沒有醫生曾經告訴過您患有哮喘病？

**AB17**

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

[GO TO PN QA15\_B18]  
[GO TO PN QA15\_B18]  
[GO TO PN QA15\_B18]

**QA15\_B3** Do you still have asthma?  
您是否依然患有哮喘病？

**AB40**

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

**QA15\_B4** During the past 12 months, have you had an episode of asthma or an asthma attack?  
在過去十二個月中，您是否曾經有過哮喘發作？

**AB41**

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

**PROGRAMMING NOTE QA15\_B5:**

**IF [QA15\_B3 = 2, -7, OR -8 (DOES NOT HAVE ASTHMA)] AND [QA15\_B4 = 2, -7, OR -8 (NO EPISODE OF ASTHMA IN LAST 12 MOS)], GO TO QA15\_B9;  
ELSE CONTINUE WITH QA15\_B5**

**QA15\_B5** During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...  
在過去十二個月中，您每隔多久會出現哮喘症狀，例如咳嗽、氣喘、氣短、胸悶或粘痰？您認為是.....

**AB19**

Not at all, .....	1
從未, .....	1
Less than every month, .....	2
不到每月一次.....	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

**QA15\_B6** During the past 12 months, have you had to visit a hospital emergency room because of your asthma?  
在過去十二個月中，您是否曾經因您的哮喘病發作前往醫院急診室就診？

**AH13A**

YES .....	1	
NO .....	2	[GO TO QA15_B8]
REFUSED .....	-7	[GO TO QA15_B8]
DON'T KNOW .....	-8	[GO TO QA15_B8]

**QA15\_B7** Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?  
您是否曾經因哮喘病發作無法約見自己的醫生而前往醫院急診室就診？

**AB106**

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

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

**QA15\_B8** During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，您是否因哮喘病曾經住院一天或更長時間？

**AH15A**

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

**QA15\_B9** Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?

您目前是否每天服用醫生開給您的或是醫生提供給您的控制哮喘的藥物？

**AB18**

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

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

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

**PROGRAMMING NOTE QA15\_B10:**

**IF QA15\_B3 = 1 (YES, STILL HAVE ASTHMA) OR QA15\_B4 = 1 (YES, EPISODE IN LAST 12 MOS) GO TO PROGRAMMING NOTE QA15\_B14;  
 ELSE CONTINUE WITH QA15\_B10**

**QA15\_B10** During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say...

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

**AB66**

Not at all, .....1  
 從未, .....1  
 Less than every month, .....2  
 不到每月一次 .....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

**QA15\_B11** During the past 12 months, have you had to visit a hospital emergency room because of your asthma?

您是否曾經因哮喘病發作而必須前往醫院急診室就診？

**AB67**

YES .....1  
 NO .....2 [GO TO QA15\_B13]  
 REFUSED ..... -7 [GO TO QA15\_B13]  
 DON'T KNOW ..... -8 [GO TO QA15\_B13]

**QA15\_B12** Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?

您是否曾經因哮喘病發作無法約見自己的醫生而前往醫院急診室就診？

**AB107**

**[INTERVIEWER NOTE: 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

**QA15\_B13** During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?

在過去十二個月中，您是否因哮喘病曾經住院一天或更長時間？

**AB80**

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

**PROGRAMMING NOTE QA15\_B14:**  
**IF AAGE > 69 GO TO QA15\_B15;**  
**ELSE CONTINUE WITH QA15\_B14**

**QA15\_B14** During the past 12 months, how many days of work did you miss due to asthma?  
 在過去十二個月中，您因為哮喘病有多少天沒有工作？

**AB42**

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

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

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



**QA15\_B15** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?  
 是否曾經有醫生或其他醫療服務提供者與您一起制定一項計劃，以便您瞭解如何控制自己的哮喘？

**AB43**

YES .....	1	
NO .....	2	<b>[GO TO QA15_B17]</b>
REFUSED .....	-7	<b>[GO TO QA15_B17]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_B17]</b>

**QA15\_B16** Do you have a written or printed copy of this plan?  
 您是否有該項計劃的書面或列印副本？

**AB98**

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

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

**QA15\_B17** How confident are you that you can control and manage your asthma? Would you say you are...  
 您對控制與管理自己的哮喘信心有多高？您認為是.....

**AB108**

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

**PROGRAMMING NOTE QA15\_B18:**

**IF QA15\_A5 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";  
ELSE BEGIN DISPLAY WITH "Has"**

**QA15\_B18** {Other than during pregnancy, has/Has} a doctor ever told you that you have diabetes or sugar diabetes?  
{除了懷孕期間, } 是否有醫生曾經告訴您患有糖尿病?

**AB22**

YES .....1  
NO .....2  
BORDERLINE OR PRE-DIABETES .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**[GO TO PN QA15\_B34]**

**PROGRAMMING NOTE QA15\_B19:**

**IF QA15\_A5 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";  
ELSE BEGIN DISPLAY WITH "Has"**

**QA15\_B19** {Other than during pregnancy, has/Has} a doctor ever told you that you have pre-diabetes or borderline diabetes?  
{除了懷孕期間, }, 是否曾經有醫生告訴您患有前驅糖尿病或臨界糖尿病?

**AB99**

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

**PROGRAMMING NOTE QA15\_B20:**

**IF QA15\_B18 = 1 THEN CONINTUE WITH QA15\_B20;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_B34**

**QA15\_B20** How old were you when a doctor first told you that you have diabetes?  
當醫生第一次告訴您患有糖尿病時, 您的年齡多大?

**AB23**

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

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

**QA15\_B21** Were you told that you had Type 1 or Type 2 diabetes?  
您是否曾經被告知患有一類或二類糖尿病？

**AB51**

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

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

TYPE 1 .....1  
TYPE 2 .....2  
ANOTHER TYPE (Specify:\_\_\_\_\_) .....91  
DOUBLE DIABETES (TYPE 1 AND TYPE 2) .....4  
REFUSED .....-7  
DON'T KNOW .....-8

**QA15\_B22** Are you now taking insulin?  
您目前正在使用胰島素嗎？

**AB24**

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

**QA15\_B23** Do you now take diabetic pills to lower your blood sugar?  
您目前在服用降血糖的糖尿病藥物嗎？

**AB25**

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

**[IF NEEDED, SAY: 「有時稱作口服藥劑或口服降血糖藥劑。」]**

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

**QA15\_B24** About how many times per day, per week, or per month do you or a family member or friend check your blood for glucose or sugar?  
您本人、您的家庭成員或朋友每天、每週或每月大約幾次檢查您的血糖？

**AB26**

**[FILL IN TIME FRAME ANSWERED]**

\_\_\_\_\_ TIMES

\_\_\_\_\_ PER DAY [HR: 0-24; SR: 0-10]

\_\_\_\_\_ PER WEEK [HR: 0-70; SR: 0-34]

\_\_\_\_\_ PER MONTH [HR: 0-300; SR: 0-149]

\_\_\_\_\_ PER YEAR [HR: 0-3650; SR: 0-599]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_B25** About how many times in the last 12 months has a doctor or other health professional checked you for hemoglobin "A one C"?  
在過去十二個月中，醫生或健康專業人員大約檢查過幾次您的血紅蛋白「A one C」？

**AB27**

**[IF R NEVER HEARD OF IT, ENTER 995.]**

\_\_\_\_\_ NUMBER OF TIMES [HR: 0-52, 995; SR: 0-25, 995]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_B26** About how many times in the last 12 months has a doctor checked your feet for any sores or irritations?  
在過去 12 個月中，醫生約檢查過幾次您的腳部是否有任何瘡或發炎？

**AB28**

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

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_B27** When was the last time you had an eye exam in which the pupils were dilated? This would have made your eyes sensitive to bright light for a short time.  
 您最近一次接受瞳孔放大眼科檢查是什麼時候？瞳孔放大會使您的眼睛在短時間內對亮光敏感。

**AB63**

WITHIN THE PAST MONTH .....1  
 WITHIN THE PAST YEAR (1-12 MONTHS AGO) ...2  
 WITHIN THE PAST 2 YEARS (1-2 YEARS AGO) ...3  
 2 OR MORE YEARS AGO.....4  
 NEVER .....5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_B28** During the past 12 months, have you had to visit a hospital emergency room because of your diabetes?  
 在過去 12 個月中，您是否曾經因糖尿病發作而必須前往醫院急診室就診？

**AB109**

YES .....1  
 NO .....2 [GO TO QA15\_B30]  
 REFUSED ..... -7 [GO TO QA15\_B30]  
 DON'T KNOW ..... -8 [GO TO QA15\_B30]

**QA15\_B29** Did you visit a hospital emergency room for your diabetes because you were unable to see your doctor?  
 您是否曾經因糖尿病發作無法約見自己的醫生而前往醫院急診室就診？

**AB110**

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

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

**QA15\_B30** During the past 12 months, were you admitted to the hospital overnight or longer for your diabetes?  
 在過去 12 個月中，您是否曾經因糖尿病而住院一整天或更長時間？

**AB111**

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

**QA15\_B31** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?  
 您的醫生或其他醫療服務提供者是否曾經與您一起制定一項計劃，以便讓您瞭解如何護理自己的糖尿病？

**AB112**

YES .....	1	
NO .....	2	[GO TO QA15_B33]
REFUSED .....	-7	[GO TO QA15_B33]
DON'T KNOW .....	-8	[GO TO QA15_B33]

**QA15\_B32** Do you have a written or printed copy of this plan?  
 您是否有該項計劃的書面或列印副本？

**AB113**

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

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

**QA15\_B33** How confident are you that you can control and manage your diabetes? Would you say you are...  
 您對控制與管理自己的糖尿病信心有多高？您認為是.....

**AB114**

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

**PROGRAMMING NOTE QA15\_B34:**  
**IF QA15\_A5 = 2 (FEMALE) CONTINUE WITH QA15\_B34;**  
**ELSE GO TO QA15\_B35**

**QA15\_B34** Has a doctor ever told you that you had diabetes only during pregnancy?  
 是否有醫生曾經說過您僅在懷孕期間患過糖尿病？

**AB81**

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

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

**QA15\_B35** Has a doctor ever told you that you have high blood pressure?  
 是否有醫生曾經告訴過您患有高血壓？

**AB29**

YES .....1  
 NO .....2 **[GO TO QA15\_B37]**  
 HIGH NORMAL/BORDERLINE/  
 PRE-HYPERTENSION .....3 **[GO TO QA15\_B37]**  
 REFUSED ..... -7 **[GO TO QA15\_B37]**  
 DON'T KNOW ..... -8 **[GO TO QA15\_B37]**

**QA15\_B36** Are you now taking any medications to control your high blood pressure?  
 您目前是否在服用任何控制高血壓的藥物？

**AB30**

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

**QA15\_B37** Has a doctor ever told you that you have any kind of heart disease?  
 有沒有醫生告訴過您患有任何一種心臟病？

**AB34**

YES .....1  
 NO .....2 **[GO TO QA15\_B45]**  
 REFUSED ..... -7 **[GO TO QA15\_B45]**  
 DON'T KNOW ..... -8 **[GO TO QA15\_B45]**

**QA15\_B38** Has a doctor ever told you that you have heart failure or congestive heart failure?  
 是否有醫生曾經告訴您患有心力衰竭或充血性心力衰竭？

**AB52**

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

**QA15\_B39** During the past 12 months, have you had to visit a hospital emergency room because of your heart disease?

在過去 12 個月中，您是否曾經因心臟病而必須前往醫院急診室就診？

**AB115**

YES .....1  
 NO .....2 [GO TO QA15\_B41]  
 REFUSED ..... -7 [GO TO QA15\_B41]  
 DON'T KNOW ..... -8 [GO TO QA15\_B41]

**QA15\_B40** Did you visit a hospital emergency room for your heart disease because you were unable to see your doctor?

您是否曾經因心臟病發作無法約見自己的醫生而前往醫院急診室就診？

**AB116**

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

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

**QA15\_B41** During the past 12 months, were you admitted to the hospital overnight or longer for your heart disease?

在過去 12 個月中，您是否因心臟病而住院一整天或更長時間？

**AB117**

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

**QA15\_B42** Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your heart disease?

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

**AB118**

YES .....1  
 NO .....2 [GO TO QA15\_B45]  
 REFUSED ..... -7 [GO TO QA15\_B45]  
 DON'T KNOW ..... -8 [GO TO QA15\_B45]



**QA15\_B43** Do you have a written or printed copy of this plan?  
您是否有該項計劃的書面或列印副本？

**AB119**

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

**[IF NEEDED, SAY: "可以是電子版本或打印件。"]**

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

**QA15\_B44** How confident are you that you can control and manage your heart disease? Would you say you are...  
您對控制與管理您的心臟病的信心有多高？您認為是.....

**AB120**

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

**QA15\_B45** During the past 12 months, did you get a flu shot or the nasal flu vaccine, called Flumist?  
在過去 12 個月中，您是否打過流感防疫針或使用過流感疫苗鼻噴劑 Flumist?

**AE30**

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

**[IF NEEDED, SAY: "流感防疫針通常是在秋季注射，以便為流感季節預防流感提供保護。"]**

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

## Section C – Health Behaviors

**QA15\_C1** The next questions are about walking for transportation. I will ask you separately about walking for relaxation or exercise.

以下是有關以步代車的問題。我會另外向您提出因休閒或運動目的步行問題。

During the past 7 days, did you walk **to get some place** that took you at least 10 minutes?  
在過去七天內，您是否曾經步行至少 10 分鐘去某個地方？

**AD37W**

YES .....	1	
NO .....	2	[GO TO QA15_C4]
UNABLE TO WALK .....	3	[GO TO QA15_C7]
REFUSED .....	-7	[GO TO QA15_C4]
DON'T KNOW .....	-8	[GO TO QA15_C4]

**QA15\_C2** In the past 7 days, how many times did you do that?

在過去七天內，您曾經幾次這樣做？

**AD38W**

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

[IF NEEDED, SAY: "至少步行 10 分鐘去某個地方。"]

\_\_\_\_\_ TIMES PER WEEK [IF 0, GO TO QA15\_C4]

REFUSED .....	-7	[GO TO QA15_C4]
DON'T KNOW .....	-8	[GO TO QA15_C4]

### PROGRAMMING NOTE QA15\_C3:

IF QA15\_C2 = 1 DISPLAY "How long did that walk take";

IF QA15\_C2 > 1 DISPLAY "On average, how long did those walks take"

**QA15\_C3** {How long did that walk take/On average, how long did those walks take}?  
{此類步行花了多長時間/此類步行通常花多長時間}？

**AD39W**

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

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

**PROGRAMMING NOTE QA15\_C4:**

**IF QA15\_C1 = 1 (WALK FOR TRANSPORTATION) DISPLAY "Please do not include walking for transportation."**

**QA15\_C4** Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past 7 days did you walk for at least 10 minutes for any of these reasons? Please do not include walking for transportation.

有時，您會為了娛樂、休閒、運動或溜狗而步行。在過去七天內，您是否曾經因任何此類原因而至少步行 10 分鐘？{請勿包括以步代車。}

**AD40W**

YES .....	1	
NO .....	2	[GO TO QA15_C7]
REFUSED .....	-7	[GO TO QA15_C7]
DON'T KNOW .....	-8	[GO TO QA15_C7]

**QA15\_C5** In the past 7 days, how many times did you do that?  
在過去七天內，您曾經幾次這樣做？

**AD41W**

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

[IF NEEDED, SAY: "因娛樂、休閒、運動或溜狗至少步行 10 分鐘。"]

\_\_\_\_\_ TIMES PER WEEK [IF 0, GO TO QA15\_C7]

REFUSED .....	-7	[GO TO QA15_C7]
DON'T KNOW .....	-8	[GO TO QA15_C7]

**PROGRAMMING NOTE QA15\_C6:**

**IF QA15\_C5 = 1 DISPLAY "How long did that walk take";**

**IF QA15\_C5 > 1 DISPLAY "On average, how long did those walks take"**

**QA15\_C6** {How long did that walk take/On average, how long did those walks take}?  
{此類步行花了多長時間/此類步行通常花多長時間}？

**AD42W**

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

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

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

**QA15\_C7** During the past month, how often did you drink regular soda or pop that contains sugar? Do not include diet soda.  
[在過去一個月中, ]您喝普通汽水或含糖汽水的頻率有多高? 請不要包括低卡節食汽水。

**AC11**

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

**[IF NEEDED, SAY: "請不要包括罐裝或瓶裝果汁或茶。給出最佳估計數字即可。"]**

\_\_\_\_\_TIMES

PER DAY .....	1	[HR: 0-10; SR: 0-7]
PER WEEK .....	2	[HR: 0-25; SR: 0-11]
PER MONTH.....	3	[HR: 0-60; SR: 0-30]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_C10** Now think about the past week. In the past 7 days, how many times did you eat fast food? Include fast food meals eaten at work, at home, or at fast-food restaurants, carryout or drive through.  
現在, 請想一想上一週的情況。在過去七天中, 您曾經幾次吃快餐食品? 包括在工作場所、家中或快餐店、外賣店或無需下車的得來速快餐店(drive through) 吃的快餐食品。

**AC31**

**[IF NEEDED, SAY: "Such as food you get at McDonald's, KFC, Panda Express, or Taco Bell."]**

**[IF NEEDED, SAY: "例如, 您在麥當勞、肯塔基炸雞店、熊貓快餐店或塔可鐘購買的食品。"]**

\_\_\_\_\_# OF TIMES IN PAST 7 DAYS

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

**QA15\_C11** How often can you find fresh fruits and vegetables in your neighborhood? Would you say...  
您在所在社區買到新鮮水果和蔬菜的頻率有多高? 您認為是.....

**AC42**

Never, .....	1
從未、 .....	1
Sometimes, .....	2
有時、 .....	2
Usually, or .....	3
經常、還是 .....	3
Always? .....	4
總是? .....	4
DOESN'T EAT F & V .....	5
DOESN'T SHOP FOR F&V .....	6
DOESN'T SHOP IN HIS/HER NEIGHBORHOOD....	7
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_C12:**  
**IF QA15\_C11 = 2, 3, OR 4, THEN CONTINUE WITH QA15\_C12;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_C13**

**QA15\_C12** How often are they affordable? Would you say...  
 您能夠負擔得起這些食品的頻率有多高？您認為是.....

AC44

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

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

Never.....	1
從未、.....	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

**QA15\_C13** Now, I am going to ask about various health behaviors.  
 現在，我想就各種不同的健康行為問題提問。

Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime? .  
 在您的一生中，您抽煙的總量是否至少有 100 支或 100 支以上？

AE15

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

**[GO TO QA15\_C37]**

**QA15\_C14** Do you now smoke cigarettes every day, some days, or not at all?  
 您現在是每天、某些天抽煙還是完全不抽煙？

AE15A

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

**[GO TO PN QA15\_C18]**

**[GO TO PN QA15\_C16]**

**[GO TO PN QA15\_C37]**

**[GO TO PN QA15\_C37]**

**QA15\_C15** On average, how many cigarettes do you now smoke a day?  
目前您每天平均抽多少支煙？

**AD32**

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

\_\_\_\_ NUMBER OF CIGARETTES [HR: 0-120] [GO TO PN QA15\_C18]

REFUSED ..... -7 [GO TO PN QA15\_C18]

DON'T KNOW ..... -8 [GO TO PN QA15\_C18]

**PROGRAMMING NOTE QA15\_C17:**

**IF QA15\_C14 = 3 (NOT AT ALL) CONTINUE WITH QA15\_C16;**

**ELSE GO TO PN QA15\_C18**

**QA15\_C16** Did you quit smoking within the last 2 years?  
您是否在過去兩年內戒煙了？

**AC101**

YES (QUIT WITHIN THE PAST 2 YEARS) .....1

NO (QUIT MORE THAN 2 YEARS AGO).....2 [GO TO PN QA15\_C37]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_C17** How many months ago did you quit?  
您幾個月前戒的煙？

**AC102**

\_\_\_\_ MONTHS [HR: 0-24] .....

DID NOT QUIT ..... 999

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C18:**

**IF QA15\_C14 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA15\_C18;**

**ELSE GO TO QA15\_C19**

**QA15\_C18** In the past 30 days, when you smoked, how many cigarettes did you smoke per day?  
在過去 30 天中您抽煙的日子裡，您每天抽多少支煙？

**AE16**

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

**[IF NEEDED, SAY: "在您抽煙的日子裡。" AND IF R SAYS, A "PACK", CODE THIS AS 20 CIGARETTES]**

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

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C19:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 = 1 (QUIT WITHIN THE PAST 2 YEARS), CONTINUE WITH QA15\_C19;  
ELSE SKIP TO PN QA15\_C20**

**QA15\_C19** How long has it been since you smoked on a daily basis?  
你每天抽煙已經有多長時間？

**AC53B**

\_\_\_\_\_ DAY(S) [HR: 0 - 365] ..... [SKIP TO PN QA15\_C26]  
 \_\_\_\_\_ MONTH(S) [HR: 0 - 12] ..... [SKIP TO PN QA15\_C26]  
 \_\_\_\_\_ YEAR(S) [HR: 0 - 99] ..... [SKIP TO PN QA15\_C26]  
 NEVER SMOKED DAILY ..... 999 [SKIP TO PN QA15\_C26]  
 REFUSED ..... -7 [SKIP TO PN QA15\_C26]  
 DON'T KNOW ..... -8 [SKIP TO PN QA15\_C26]

**PROGRAMMING NOTE QA15\_C20:**

**IF QA15\_C14 = 1 (SMOKE EVERY DAY) OR QA15\_C14 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA15\_C20;  
ELSE SKIP TO PN QA15\_C22;  
IF QA15\_C14 = 2 (SMOKE SOME DAYS), THEN DISPLAY "On days when you smoke, how"**

**QA15\_C20** {On days when you smoke, how/How} soon after you awake do you usually smoke your first cigarette?  
你通常在起床後多久開始抽第一支煙？

**AC54B****[IF R SAYS, "IMMEDIATELY", CODE 0]****[IF R SAYS, "I DON'T SMOKE AFTER WAKING UP", CODE 999]**

\_\_\_\_\_ AMOUNT OF TIME  
 \_\_\_\_\_ UNIT OF TIME  
 MINUTES ..... 1  
 HOURS ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_C21** Do you usually smoke menthol or non-menthol cigarettes?  
你通常是抽含薄荷醇的香煙還是不含薄荷醇的香煙？

**AC58B**

MENTHOL ..... 1  
 NON-MENTHOL ..... 2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C22:**

**IF QA15\_C14 = 1 (SMOKE EVERY DAY) OR QA15\_C14 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA15\_C22;  
ELSE GO TO PN QA15\_C37**

**QA15\_C22** During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?  
在過去十二個月中，您是否曾因嘗試戒煙而停止抽煙一天或更長時間？

**AC49**

YES .....	1	
NO .....	2	[GO TO QA15_C24]
REFUSED .....	-7	[GO TO QA15_C24]
DON'T KNOW .....	-8	[GO TO QA15_C24]

**QA15\_C23** During the past 12 months, how many times have you tried to quit smoking for one day or longer?  
在過去十二個月內，你曾經有多少次嘗試戒煙一天或更長時間？

**AC59**

\_\_\_\_\_ NUMBER OF TIMES

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

**QA15\_C24** Are you thinking about quitting smoking in the next six months?  
您是否在考慮在今後六個月內戒煙？

**AC50**

YES .....	1	
NO .....	2	[GO TO QA15_C26]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_C25** Do you plan to quit in the next month?  
您是否計劃下個月戒煙？

**AC103**

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



**PROGRAMMING NOTE QA15\_C26:**

**IF QA15\_C22 = 1 (TRIED QUITTING IN THE PAST 12 MONTHS) OR QA15\_C16 = 1 (QUIT WITHIN THE PAST 2 YEARS), CONTINUE WITH QA15\_C26;**

**ELSE SKIP TO QA15\_C35;**

**DISPLAYS:**

**IF QA15\_C16 = 1 (QUIT WITHIN PAST 2 YEARS) DISPLAY “The last time you tried to quit”;**

**IF QA15\_C22 = 1 (CURRENT SMOKERS TRIED QUITTING IN THE PAST 12 MONTHS) DISPLAY “In the past 12 months”**

**QA15\_C26** There are many products called Nicotine Replacement Therapy or NRT that replace nicotine to help people quit smoking. {The last time you tried to quit / In the past 12 months}, did you use a nicotine patch?  
有很多稱為尼古丁替代療法或 NRT 的產品，可幫助人們戒煙。你最後一次嘗試戒煙時，是否曾使用尼古丁貼片？

**AC60B**

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

**QA15\_C27** {The last time you tried to quit / In the past 12 months}, did you use nicotine gum, nicotine lozenges, or a nicotine inhaler?  
[你最後一次嘗試戒煙時，是否曾使用尼古丁口香糖，尼古丁糖錠，尼古丁吸入劑？

**AC104**

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

**QA15\_C28** There are prescription medications to help people quit smoking cigarettes. {The last time you tried to quit / In the past 12 months}, did you use Zyban, Wellbutrin, Bupropion, Prozac, Chantix or Varenicline?  
有可幫助人們戒煙的處方藥。你最後一次嘗試戒煙時，是否曾使用安非他酮（Zyban）、丁基丙酸苯（Wellbutrin）或丁胺苯丙酮（Bupropion）？

**AC105**

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

**PROGRAMMING NOTE QA15\_C29:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 (QUIT WITHIN PAST 2 YEARS) THEN DISPLAY “The last time you tried to quit, did you try”)**

**QA15\_C29** {The last time you tried to quit, did you try / In the past 12 months, have you done} any of the following to help you quit smoking? Did you...  
[在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾.....]

**AC68B**

Switch to smokeless tobacco, such as chewing tobacco, snus or snuff?

換抽無煙菸草？

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C30:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 = 1 (QUIT WITHIN PAST 2 YEARS), THEN DISPLAY “The last time you tried to quit”)**

**QA15\_C30** [{The last time you tried to quit / In the past 12 months}] did you  
[在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾.....]

**AC69B**

Quit completely on your own or “cold turkey”?

自己完全戒煙或果斷地戒煙？

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C30:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 = 1 (QUIT WITHIN PAST 2 YEARS), THEN DISPLAY “The last time you tried to quit”)**

**QA15\_C31** [{The last time you tried to quit attempt/ In the past 12 months}] did you  
您是否藉助科技，比如移動通信 APP，電話短信，或戒煙網站？

**AC106**

Use technology such as an app, texting or quitting website?

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C32:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 (QUIT WITHIN PAST 24 MONTHS), THEN DISPLAY “The last time you tried to quit”**

**QA15\_C32** [{The last time you tried to quit / In the past 12 months}] did you  
[在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾.....]

**AC107**

Use social media such as Facebook, Instagram, Twitter, or WhatsApp?

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

**PROGRAMMING NOTE QA15\_C33:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 (QUIT WITHIN PAST 2 YEARS) THEN DISPLAY “The last time you tried to quit”**

**QA15\_C33** [{The last time you tried to quit / In the past 12 months}] did you  
[在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾.....]

**AC72B**

Exercise more to help you quit smoking?

更多地運動幫助戒煙？

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

**PROGRAMMING NOTE QA15\_C34:**

**IF QA15\_C14 = 3 (NOT AT ALL) AND QA15\_C16 (QUIT WITHIN PAST 2 YEARS) THEN DISPLAY “The last time you tried to quit”**

**QA15\_C34** [{The last time you tried to quit / In the past 12 months}] did you  
[在過去十二個月內，你是否曾做過以下任何一件幫助你戒煙的事？你是否曾.....]

**AC75B**

Call a telephone quitting helpline?

打電話給戒煙幫助熱線？

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

**PROGRAMMING NOTE QA15\_C35:**

**IF QA15\_C14 = 1 (EVERY DAY) OR QA15\_C14 = 2 (SOME DAYS), CONTINUE WITH QA15\_C35;  
ELSE IF QA15\_C14 = 3 (NOT AT ALL), SKIP TO PN QA15\_C37**

**QA15\_C35** In the past 12 months, did a doctor or other health professional advise you to quit smoking?  
在過去十二個月內，是否曾有醫生或其他健康專業人員建議您戒煙？

**AC77**

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

**QA15\_C36** In the past 12 months, did a doctor or other health professional refer you to, or give you information about, a smoking cessation program?  
在過去十二個月內，是否曾有醫生或其他健康專業人員讓您參加戒煙計劃或向您提供有關戒煙計劃的資訊？

**AC78**

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

**PROGRAMMING NOTE QA15\_C37:**

**IF AGE <= 65 THEN CONTINUE WITH QA15\_C37;  
ELSE SKIP TO PN QA15\_C46;**

**QA15\_C37** Have you ever smoked a Hookah pipe?  
您是否曾抽過水煙筒？

**AC79**

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

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

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

**[GO TO QA15\_C39]**

**[GO TO QA15\_C39]**

**[GO TO QA15\_C39]**

**QA15\_C38** During the past 30 days how many days did you use a hookah?  
過去 30 天內，您用水煙有多少天？

**AC108**

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

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

**QA15\_C39** Have you ever used any type of e-cigarette, vape pen or e-hookah, such as Blu, NJOY, or Vuse, or any larger devices for vaping, sometimes called vapes, tanks or mods?  
 您是否曾經抽過任何一種電子煙 (就是 e-cigarette)、氣霧煙筆、或電子水煙，如 Blu, NJOY, 或者 Vuse, 或者用過體積更大的, 有時被稱為 ``vapes``, ``tanks``或 ``mods`` 的工具吸煙?

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

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

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

**AC81B**

YES .....	1	
NO .....	2	<b>[GO TO QA15_C46]</b>
REFUSED .....	-7	<b>[GO TO QA15_C46]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_C46]</b>

**QA15\_C40** During the past 30 days, on how many days did you use electronic cigarettes?  
 在過去三十天內，您有多少天會抽電子煙？

**AC82B**

_____ NUMBER OF DAYS [RANGE: 0-30]		<b>[IF 0, THEN SKIP TO QA15_C46]</b>
REFUSED .....	-7	<b>[SKIP TO QA15_C46]</b>
DON'T KNOW .....	-8	<b>[SKIP TO QA15_C46]</b>

**QA15\_C41** What best describes your reasons for using e-cigarettes?  
 您是因為什麼原因抽電子煙？

**AC83B**

**[CODE ALL THAT APPLY]**

QUIT SMOKING.....	1
REPLACE SMOKING .....	2
CUT DOWN OR REDUCE SMOKING .....	3
USE IN PLACES WHERE SMOKING NOT IS NOT ALLOWED .....	4
CURIOSITY, JUST TRY IT .....	5
NO LINGERING ODOR .....	6
HELPS ME CONCENTRATE/STAY ALERT .....	7
COME IN MANY FLAVORS .....	8
LESS EXPENSIVE .....	9
HEALTHIER THAN CIGARETTES.....	10
OTHER (SPECIFY: _____).....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_ C42** How long ago did you start using e-cigarettes regularly?  
您多久之前您開始經常使用電子煙？

**AC109**

\_\_\_\_ MONTHS  
\_\_\_\_ YEARS  
LESS THAN ONE MONTH ..... 00  
NEVER USED E-CIGARETTES REGULARLY ..... 99  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_ C43** Where do you usually buy your e-cigarettes or e-liquid?  
你通常在哪裡買煙？

**AC110**

CONVENIENCE STORES OR GAS STATIONS.....1  
SUPER MARKETS .....2  
PHARMACY OR DRUG STORES.....3  
TOBACCO OR VAPE SHOP .....4  
ONLINE .....5  
OTHER DISCOUNT OR WAREHOUSE STORES,  
SUCH AS WAL-MART OR COSTCO .....6  
SOMEWHERE ELSE? (Other specify:\_\_\_\_\_)91  
I DON'T BUY E-CIGARETTES OR E-FLUIDS ..... 99  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_ C44** During the day you last used an electronic nicotine product, how many puffs  
did you take?

**AC111**

\_\_\_\_ PUFFS  
DID NOT USE A NICOTINE PRODUCT ..... -3 (?)  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_ C45** What concentration or strength of nicotine is in the liquid or cartridge you typically use  
with your e-cigarette? For example, is it zero nicotine, 3, 6, 12, or 24 milligrams per  
milliliter, or some other concentration?  
您通常和電子煙一起使用的煙液或煙彈里，尼古丁的濃度或強度是多少？例  
如，每毫升含零尼古丁、有 3 毫克、6 毫克、12 毫克、24 毫克，还是某些其  
它濃度？

**AC112**

ZERO.....1  
THREE .....2  
SIX .....3  
TWELVE .....4  
TWENTY-FOUR.....5  
OTHER (Specify:\_\_\_\_\_) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C46:**

**IF QA15\_C14 = 1 (SMOKE EVERY DAY) OR QA15\_C14 = 2 (SMOKE SOME DAYS) OR QA15\_C40 > 0 (USED E-CIGARETTES WITHIN PAST MONTH), CONTINUE WITH QA15\_C46;  
ELSE SKIP TO QA15\_C50**

**QA15\_C46** What are the current rules or restrictions about smoking inside your home? Would you say...  
在你們家中目前是否有任何對抽煙的規定或限制？你認為是  
**[IF NEEDED, SAY: "This is for regular, tobacco cigarettes".]**  
**[IF NEEDED, SAY: 這是指常規的煙草香煙。]**

**AC84B**

Smoking is completely banned for everyone, .....1  
完全禁止每個人抽煙， .....1  
Smoking is completely banned for everyone  
few exceptions, .....2  
通常禁止每個人抽煙，只有極少的例外情況， .....2  
Smoking is allowed in some rooms only, or.....3  
僅允許在某些房間裡抽煙，還是.....3  
There are no rules or restrictions on smoking inside  
your home? .....4  
在你們家中對抽煙沒有規定或限制？ .....4  
NO SMOKERS/NO NEED .....5  
VOLUNTARILY DON'T SMOKE INSIDE HOME .....6  
OTHER (SPECIFY:.....)..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_C47** What are the current rules or restrictions about **using E-CIGARETTES (vaping) inside your home?** Would you say...  
目前在你們家中吸電子煙有哪些規定或限制？您會說...

**AC113**

Vaping is completely banned for everyone, .....1  
Vaping is generally banned for everyone with  
few exceptions, .....2  
Vaping is allowed in some rooms only, or .....3  
There are no rules or restrictions on vaping inside  
your home? .....4  
NO VAPERS/NO NEED .....5  
VOLUNTARILY DON'T VAPE INSIDE HOME .....6  
OTHER (SPECIFY:.....)..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_C48** Do you agree or not with the following statement: The use of e-cigarettes should not be allowed in the places where cigarette smoking is not allowed?  
您是否同意下面的說法：禁止抽煙草煙的地方也應該禁止吸電子煙。

**AC114**

YES (AGREE) .....1  
NO (DO NOT AGREE) .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_C49**

**IF QA15\_C14 = 1 (SMOKE EVERY DAY) OR QA15\_C14 = 2 (SMOKE SOME DAYS) CONTINUE WITH QA15\_C49;  
ELSE SKIP TO QA15\_C50**

**QA15\_C49** How much additional tax on a pack of cigarettes would you be willing to support if all the money raised was used to fund programs aimed at preventing smoking among children, and other health care programs? Would you support a tax increase of...  
如果增收的煙稅全部被用於贊助旨在預防兒童抽煙的計劃和其他健康 護理計劃，你願意支持每包煙增加多少稅款？你是否支持對每包煙增收稅款.....

**AC92**

50 cents a pack, .....	1
\$1.00, .....	2
\$2.00, .....	3
\$3.00, .....	4
more than \$3.00 a pack, or .....	5
no tax increase? .....	6
REFUSED .....	-7
DON'T KNOW .....	-8



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

**QA15\_D1** These next questions are about your height and weight. How tall are you without shoes?  
 以下是幾個有關您的身高和體重的問題。您不穿鞋時身高是多少？

**AE17**

[IF NEEDED, SAY: “About how tall?”]

[IF NEEDED, SAY: 「大約有多高？」]

\_\_\_\_\_ FEET \_\_\_\_\_ INCHES [FT HR: 3-7, IN HR: 0-11]

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

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA15\_D2:

IF QA15\_A5 = 2 (FEMALE) and AAGE < 50, DISPLAY "When not pregnant, how";  
 ELSE DISPLAY "How"

**QA15\_D2** {When not pregnant, how/How} much do you weigh without shoes?  
 您不穿鞋時體重是多少？

**AE18**

[IF NEEDED, SAY: “About how much?”]

[IF NEEDED, SAY: 「大約有多重？」]

\_\_\_\_\_ POUNDS [HR: 50-450]

\_\_\_\_\_ KILOGRAMS [HR: 20-220]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_D3** Are you blind or deaf, or do you have a severe vision or hearing problem?  
 您是盲人或聾人，或有嚴重視力或聽力障礙嗎？

**AD50**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

[GO TO QA15\_D5]

[GO TO QA15\_D5]

[GO TO QA15\_D5]

**QA15\_D4** Are you legally blind?  
 您是不是法律認可的盲人？

**AL8**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_D5** Do you have a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?  
 您是否有任何一種嚴重限制一種或多種基本身體活動的症狀？例如，步行、上樓梯、伸手取物或提拿物體。

**AD57**

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

**QA15\_D6** Because of a physical, mental, or emotional condition lasting 6 months or more, do you have any of the following:

您是否由於持續六個月或以上的身體、精神或情感疾病，出現以下任何症狀：

Any difficulty learning, remembering, or concentrating?

學習、記憶或集中注意力方面的任何困難？

**AD51**

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

**QA15\_D7** Any difficulty dressing, bathing, or getting around inside the home?

穿衣、洗澡或在家中走動時有任何困難嗎？

**AD52**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]**

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

**QA15\_D8** Any difficulty going outside the home alone to shop or visit a doctor's office?

單獨外出購物或前往醫生診所就診時有任何困難嗎？

**AD53**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]**

**[IF NEEDED, SAY: 「由於延續六個月或以上的身體、精神或情感狀況。」]**

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

**PROGRAMMING NOTE QA15\_D9:  
IF AAGE > 64 GO TO PN QA15\_D11**

**QA15\_D9** Any difficulty working at a job or business?  
工作或從事業務方面遇到任何困難嗎?

**AD54**

**[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]**

**[IF NEEDED, SAY: 「由於延續六個月或以上的身體、精神或情感狀況。」]**

YES .....	1	
NO .....	2	<b>[GO TO PN QA15_D11]</b>
REFUSED .....	-7	<b>[GO TO PN QA15_D11]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_D11]</b>

**QA15\_D10** Do you have a physical or mental condition that has kept you from working for at least a year?  
您是否有使您至少一年無法工作的身體或精神症狀?

**AL8A**

**[IF NEEDED, SAY "Current condition."]**

**[IF NEEDED, SAY: "目前的狀況。"]**

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

**PROGRAMMING NOTE QA15\_D11:  
IF AAGE ≥ 65 GO TO PROGRAMMING NOTE QA15\_D12;  
ELSE CONTINUE WITH QA15\_D11**

**QA15\_D11** Has Social Security or the State Department of Social Services determined that you have a disability that is expected to last one year or longer?  
您是否有已被社會安全 (就是 Social Security) 或州社會服務處確認且會持續一年以上的殘疾?

**AD73**

**[IF NEEDED, SAY: "This does not include short-term disability for illness, injury, pregnancy, or childbirth.."]**

**[IF NEEDED, SAY: "不包括短期的殘疾如疾病，受傷，懷孕或生育.."]**

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

**QA15\_D12** We are asking a few questions about people's sexual experiences. All answers will be kept private.

我們會提出幾個有關性經歷的問題。所有的答案都會予以保密。

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

在過去十二個月中，您有過幾位性伴侶？

**AD43**

\_\_\_\_\_ NUMBER OF SEXUAL PARTNERS [GO TO PN QA15\_D14]

REFUSED ..... -7 [GO TO PN QA15\_D14]

DON'T KNOW ..... -8

**QA15\_D13** Can you give me your best guess?

您能不能儘量估計有幾個人？

**AD44**

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

\_\_\_\_\_ NUMBER OF PARTNERS

1 PARTNER .....1

2-3 PARTNERS .....2

4-5 PARTNERS .....3

6-10 PARTNERS .....4

MORE THAN 10 PARTNERS .....5

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_D14:**

**IF QA15\_D12 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR QA15\_D13=0, GO TO**

**PROGRAMMING NOTE QA15\_D15;**

**ELSE CONTINUE WITH QA15\_D14;**

**IF QA15\_D12 OR QA15\_D13 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner male or female";**

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

**QA15\_D14** {Is that partner male or female/In the past 12 months, have your sexual partners been male, female, or both male and female}?

在過去十二個月中，您的性伴侶是男性、女性還是既有男性又有女性？

**AD45**

MALE .....1

FEMALE .....2

BOTH MALE AND FEMALE .....3

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_D15:**

**IF QA15\_A5 = 1 (MALE), DISPLAY “Gay” IN QUESTION AND “Gay” IN HELP SCREEN;**

**ELSE IF QA15\_A5 = 2 (FEMALE), DISPLAY “Gay, Lesbian” IN QUESTION AND “Gay and Lesbian” IN HELP SCREEN**

**QA15\_D15**

Do you think of yourself as straight or heterosexual, as gay {,lesbian} or homosexual, or bisexual?  
您認為自己是異性戀、男同性戀、女同性戀、同性戀還是雙性戀？

**AD46**

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

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

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

**PROGRAMMING NOTE QA15\_D15:**

**IF [QA15\_D12 > 1 OR QA15\_D13 > 1 (MORE THAN ONE SEXUAL PARTNER IN LAST 12 MONTHS)] OR [QA15\_A5 = 1 (MALE) AND (QA15\_D15=2 (GAY) OR QA15\_D15=3 (BISEXUAL)], CONTINUE WITH QA15\_D16;**

**HIV SAMPLING FOR AMERICAN INDIAN ALASKA NATIVE RESPONDENTS;**

**IF QA15\_A8 = 4 OR QA15\_A15 = 18 (AMERICAN INDIAN OR ALASKA NATIVE)], CONTINUE WITH QA15\_D16;**

**CONTROL GROUP: IF RANDOMLY ASSIGNED TO THE CONTROL GROUP, CONTINUE WITH QA15\_D16;  
CONTROL GROUP: QA15\_D12 ≤ 1 OR QA15\_D13 ≤ 1 (1 OR FEWER SEXUAL PARTNERS) AND QA15\_D15 = 1 (STRAIGHT OR HETEROSEXUAL) AND QA15\_A8 ≠ 4 OR QA15\_A15 ≠ 18 (NOT AMERICAN INDIAN OR ALASKA NATIVE)];**

**(MINIMUM N = 1,200 equally spread across each replicate);**

**ELSE GO TO PROGRAMMING NOTE QA15\_D20**

**QA15\_D16**

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

您是否曾經接受過艾茲病病毒 HIV 測試？

**AD55**

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

**PROGRAMMING NOTE QA15\_D17:**  
**IF QA15\_D16 = 1 CONTINUE WITH QA15\_D17;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_D20;**

**QA15\_D17** In the past year, how many times have you been tested for HIV?  
 在過去一年中，你曾經接受過幾次 HIV 測試？

AD62

NOT TESTED IN PAST YEAR .....0  
 ONE TIME .....1  
 TWO TIMES .....2  
 THREE TIMES .....3  
 FOUR TIMES .....4  
 FIVE TIMES .....5  
 SIX OR MORE TIMES .....6  
 REFUSED .....-7  
 DON'T KNOW .....-8

**QA15\_D18** When was your last HIV test?  
 你最後一次接受 HIV 測試是什麼時間？

AD63

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

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

YEAR \_\_\_\_\_ [RANGE: 1985-2016]

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

**QA15\_D19** Was the result of your HIV test positive or negative?  
 你的 HIV 測試結果是陽性還是陰性？

AD64

POSITIVE .....1  
 NEGATIVE .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_D20:**

**IF [QA15\_A5 = 1 (MALE) AND QA15\_D14 = 1 (MALE)] OR [QA15\_A5 = 2 (FEMALE) AND QA15\_D14 = 2 (FEMALE)] OR [QA15\_D14 = 3, -7, OR -8] OR [IF QA15\_D15 ≠ 1] CONTINUE WITH QA15\_D20;  
ELSE GO TO QA15\_D22**

**QA15\_D20** Are you legally married to someone of the same sex?  
你是否與同性別的人合法登記結婚？

**AD60**

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

YES .....1 **[GO TO PN QA15\_D22]**  
NO .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**QA15\_D21** Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?

你與同性別的人合法登記為同居伴侶是否獲得加利福尼亞 州政府的認可？

**AD61**

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

**PROGRAMMING NOTE QA15\_D22;**

**IF RANDOMLY ASSIGNED ORIGINAL VERSION, THEN ASK QA15\_D22;  
ELSE SKIP TO QA15\_D22A**

**QA15\_D22** What sex were you assigned at birth, on your original birth certificate?  
您的原始出生證明裡所寫的性別是什麼？

**AD65**

MALE .....1  
FEMALE .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_D22A:**

**ALTERNATE TESTING OF QA15\_D22;**

**QA15\_D22A** On your original birth certificate, was your sex assigned as male or female?  
您的原始出生證明裡所寫的性別是男性還是女性？

**AD65A**

MALE .....1  
FEMALE .....2  
REFUSED .....-7  
DON'T KNOW .....-8

**QA15\_D23** Do you currently describe yourself as male, female, or transgender?  
目前您認為自己是男性，女性，還是跨性別者？

**AD66**

MALE .....	1	[GO TO PN QA15_D25]
FEMALE .....	2	[GO TO PN QA15_D25]
TRANSGENDER.....	3	[GO TO PN QA15_D25]
NONE OF THESE.....	4	
REFUSED .....	-7	[GO TO SECTION E]
DON'T KNOW .....	-8	[GO TO SECTION E]

**PROGRAMMING NOTE QA15\_D24:**  
**IF QA15\_D23 = 4 THEN CONTINUE WITH QA15\_D24;**  
**ELSE SKIP TO QA15\_D25**

**QA15\_D24** What is your current gender identity?  
目前您認為自己是什麼性別？

**AD67**

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

**PROGRAMMING NOTE QA15\_D25:**  
**IF [QA15\_D22 = 1 OR QA15\_D22A = 1 (MALE) AND QA15\_D23 = 1 (MALE)] OR [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 2 (FEMALE)] THEN SKIP TO SECTION E;**  
**ELSE CONTINUE WITH QA15\_D25;**

**DISPLAYS;**  
**IF [QA15\_D22 = 1 OR QA15\_D22A = 1 (MALE) AND QA15\_D23 = 2 (FEMALE), THEN DISPLAY {male} and {female};**  
**IF [QA15\_D22 = 1 OR QA15\_D22A = 1 (MALE) AND QA15\_D23 = 3 (TRANSGENDER), THEN DISPLAY {male} and {transgender};**  
**IF [QA15\_D22 = 1 OR QA15\_D22A = 1 (MALE) AND QA15\_D24 = -1,-7,-8 (OTHER GENDER IDENTITY), THEN DISPLAY {male} and {<QA15\_D24>};**  
**IF [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 1 OR QA15\_D22A = 1 (MALE), THEN DISPLAY {female} and {male};**  
**IF [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 3 (TRANSGENDER), THEN DISPLAY {female} and {transgender};**  
**IF [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D24 = -1,-7,-8 (OTHER GENDER IDENTITY), THEN DISPLAY {female} and {<QA15\_D24>};**

**QA15\_D25** Just to confirm, you were assigned {INSERT RESPONSE FROM QA15\_D22 OR QA15\_D22A} at birth and now describe yourself as {INSERT RESPONSE FROM QA15\_D23 OR QA15\_D24}. Is that correct?

我想確認一下，您出生時是{ INSERT RESPONSE FROM QA15\_D22 OR QA15\_D22A }，現在您認為自己是 INSERT RESPONSE FROM QA15\_D23 OR QA15\_D24。對嗎？

**AD68**

YES .....	1	
NO .....	2	[GO BACK TO QA15_D23]
REFUSED .....	-7	
DON'T KNOW .....	-8	



## Section E – Women’s Health

### PROGRAMMING NOTE QA15\_E1:

IF QA15\_A5 = 1 (MALE), THEN GO TO QA15\_F1;

IF AGE > 45, THEN GO TO PROGRAMMING NOTE QA15\_E2;

ELSE CONTINUE WITH QA15\_E1

### DISPLAYS;

IF [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 2 (FEMALE)], DISPLAY “These next questions are about women’s health.”;

IF [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 1, 3, 4, -7 OR -8 (MALE, TRANSGENDER, NONE, REFUSED, OR DON’T KNOW)], DISPLAY “These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.”

**QA15\_E1** {These next questions are about women’s health. /These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.}  
{以下是有關婦女健康的問題。/以下問題可能與您有關，因為您的出生証上寫的是女性。如果不是，請告訴我，我會跳過這些問題。}

To your knowledge, are you now pregnant?

据您所知，您現在懷孕了嗎？

**AD13**

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

**PROGRAMMING NOTE QA15\_E2:**

IF AAGE < 40 OR QA15\_A4 = 1 OR 2 (BETWEEN 18 AND 29 OR BETWEEN 30 AND 39) OR ENUM.AGE < 40, THEN GO TO QA15\_F1;  
ELSE CONTINUE WITH QA15\_E2;

**DISPLAYS;**

IF [AAGE > 45 OR UNKNOWN], AND [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 2 (FEMALE)], DISPLAY "These next questions are about women's health.";

IF [AAGE > 45 OR UNKNOWN] AND [QA15\_D22 = 2 OR QA15\_D22A = 2 (FEMALE) AND QA15\_D23 = 1, 3, 4, -7 OR -8 (MALE, TRANSGENDER, NONE, REFUSED, OR DON'T KNOW)], DISPLAY "These next questions may be relevant to you because you were assigned female at birth. If not, let me know and I will skip them.";

**QA15\_E2**

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

{以下是有關婦女健康的問題。/以下問題可能與您有關，因為您的出生証上寫的是女性。如果不是，請告訴我，我會跳過這些問題。}

Have you ever had a mammogram?

您曾經做過乳房 X 光照射檢查嗎？

**AD14**

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

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

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

[READ DEFINITION, GO TO SECTION F]

[GO TO SECTION F]

[GO TO SECTION F]

**QA15\_E3**

How long has it been since you had your last mammogram?

從您上次的乳房 X 光照射到現在有多久了？

**AD17**

A YEAR AGO OR LESS .....1

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

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

MORE THAN 3 UP TO 5 YEARS AGO .....4

MORE THAN 5 YEARS AGO .....5

REFUSED ..... -7

DON'T KNOW ..... -8

[GO TO QA15\_F1]

[GO TO QA15\_F1]

**QA15\_E4** How long did your provider advise you to wait until your next mammogram?  
 您的醫療服務提供者建議您多久以後進行下一次乳房 X 線檢查？

AE95
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**[INTERVIEWER NOTE: PROMPT ONLY IF RESPONDENT ASKS FOR CLARIFICATION.]**

3 MONTHS AGO OR LESS .....	1
MORE THAN 3 AND UP TO 6 MONTHS .....	2
MORE THAN 6 MONTHS UP TO 1 YEAR .....	3
MORE THAN 1 UP TO 2 YEARS .....	4
MORE THAN 2 YEARS .....	5
PROVIDER DIDN'T ADVISE ME/DIDN'T SAY .....	6
NO LONGER NEEDS MAMMOGRAMS .....	7
REFUSED .....	-7
DON'T KNOW .....	-8

## Section F – Mental Health

QA15\_F1

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

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

以下是關於在過去 30 天內您的感覺的問題。在過去 30 天內，您大約每隔多久會感到緊張不安 — 您認為是始終、大多數時間、有時、很少還是從不？

AJ29

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

QA15\_F2

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

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

AJ30

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

QA15\_F3

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

在過去 30 天內，您大約每隔多久會感到不安或煩躁？

AJ31

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

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

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

**QA15\_F4** How often did you feel so depressed that nothing could cheer you up?  
您每隔多久會感到極為憂鬱，以致任何事都無法讓您高興起來？

**AJ32**

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

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

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

**QA15\_F5** During the past 30 days, about how often did you feel that everything was an effort?  
在過去 30 天內，您大約每隔多久會感到做每件事都非常吃力？

**AJ33**

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

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

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

**QA15\_F6** During the past 30 days, about how often did you feel worthless?  
在過去 30 天內，您大約每隔多久會感到自己毫無價值？

**AJ34**

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

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

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

**QA15\_F7** Please tell me yes or no. Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?  
 在過去十二個月中，是否曾經有任何一個月這種感覺出現的頻率比過去 30 天更頻繁？

**AF62**

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

**PROGRAMMING NOTE QA15\_F8:**  
**IF QA15\_F7 = 1 THEN CONTINUE WITH QA15\_F8;**  
**ELSE SKIP TO PROGRAMMING NOTE QA15\_F14intro**

**QA15\_F8** The next questions are about the one month in the past 12 months when you were at your worst emotionally.  
 以下是有關在過去十二個月中您的精神狀態最差的一個月的問題。

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

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

**AF63**

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

**QA15\_F9** During that same month, how often did you feel hopeless- all of the time, most, some, a little, or none of the time?  
 在那個月中，您感到毫無希望的頻率有多高？是所有的時間、大多數時間、某些時間、少數時間還是根本沒有？

**AF64**

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

**QA15\_F10** How often did you feel restless or fidgety?  
您感到不安或煩躁的頻率有多高?

**AF65**

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

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

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

**QA15\_F11** How often did you feel so depressed that nothing could cheer you up?  
您感到非常壓抑以致任何事情都無法讓您高興起來的頻率有多高?

**AF66**

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

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

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

**QA15\_F12** How often did you feel that everything was an effort?

**AF67**

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

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

**QA15\_F13** How often did you feel worthless?

**AF68**

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

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

**ADD REVERSE CODING OF K6 CALCULATION AS TEMPORARY VARIABLE HERE:**

**PROGRAMMING NOTE QA15\_F14intro:**

**IF (QA15\_F1 + QA15\_F2 + QA15\_F3 + QA15\_F4 + QA15\_F5 + QA15\_F6 > 8) OR**

**(QA15\_F8 + QA15\_F9 + QA15\_F10 + QA15\_F11 + QA15\_F12 + QA15\_F13 > 8) OR**

**(IF QA15\_F1-F6 = ONE OUT OF RANGE RESPONSE AND F1-F6 > 7) OR**

**(IF QA15\_F8-F13 = ONE OUT OF RANGE RESPONSE AND F8-F13 > 7) THEN CONTINUE WITH**

**QA15\_F14intro;**

**IF QA15\_F7 = 1 THEN DISPLAY "again, please";**

**ELSE SKIP TO QA15\_F19**

**QA15\_F14intro**

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

想一想過去十二個月中您的情緒處於最差狀況的一個月

**PROGRAMMING NOTE QA15\_F14:**

**IF AGE > 70 GO TO QA15\_F15;**

**ELSE CONTINUE WITH QA15\_F14**

**QA15\_F14** Did your emotions interfere a lot, some, or not at all with your performance at work?

您的情緒對您在工作中的表現是影響很大、有一些影響還是根本沒有影響？

**AF69B**

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



**QA15\_F15** Did your emotions interfere a lot, some, or not at all with your household chores?  
 您的情緒對您做家務是影響很大、有一些影響還是根本沒有影響？

**AF70B**

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

**QA15\_F16** Did your emotions interfere a lot, some, or not at all with your social life?  
 您的情緒對您的社交生活是影響很大、有一些影響還是根本沒有影響？

**AF71B**

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

**QA15\_F17** Did your emotions interfere a lot, some, or not at all with your relationship with friends and family?  
 您的情緒對您與朋友及家人的關係是影響很大、有一些影響還是根本沒有影響？

**AF72B**

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

**QA15\_F18** Now think about the past 12 months. About how many days out of the past 365 days were you totally unable to work or carry out your normal activities because of your feeling nervous, depressed, or emotionally stressed?  
 請想一想過去十二個月的情況。在過去的 365 天中，大約有多少天因為您感到精神緊張、壓抑或情緒壓力而完全無法工作或從事正常的活動？

**AF73B**

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

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

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

**QA15\_F19** Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your mental health emotions or nerves or your use of alcohol or drugs?

在過去十二個月中，您是否曾經因為您的精神健康、情感、神經、酗酒或吸毒的問題感到需要約見專業人士呢？

**AF81**

YES .....	1	
NO .....	2	<b>[GO TO QA15_F21]</b>
REFUSED .....	-7	<b>[GO TO QA15_F21]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_F21]</b>

**QA15\_F20** Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?

您的保險是否為精神健康疾病治療提供保賠？例如，心理學家或精神病學家門診？

**AJ1**

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

**QA15\_F21** In the past 12 months have you seen your primary care physician or general practitioner for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?  
 在過去十二個月中，您是否曾經因為您的精神健康、情感、神經、酗酒或吸毒的問題約見過您的主治醫生或全科醫生？

**AF74**

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

**QA15\_F22** In the past 12 months have you seen any other professional, such as a counselor, psychiatrist, or social worker for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?  
 在過去十二個月中，您是否曾經因為您的精神健康、情感、神經、酗酒或吸毒的問題約見過任何其他專業人員，例如心理諮詢師、精神病醫生或社會工作者？

**AF75**

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

**PROGRAMMING NOTE QA15\_F23:**

**IF QA15\_F21 = 1 OR QA15\_F22 = 1 THEN CONTINUE WITH QA15\_F23;  
 ELSE SKIP TO QA15\_F28**

**QA15\_F23** Did you seek help for your mental or emotional health or for an alcohol or drug problem?  
 您是否曾經因為精神或情感健康、酗酒或吸毒的問題尋求幫助？

**AF76**

MENTAL-EMOTIONAL HEALTH .....1  
 ALCOHOL-DRUG PROBLEM .....2  
 BOTH MENTAL & ALCOHOL-DRUG .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_F24:**

IF QA15\_F23 = 1, DISPLAY: "mental or emotional health";

IF QA15\_F23 = 2, DISPLAY: "use of alcohol or drugs";

IF QA15\_F23 = 3, DISPLAY: "mental or emotional health and your use of alcohol or drugs";

ELSE SKIP TO QA15\_F25

**QA15\_F24** In the past 12 months, how many visits did you make to a professional for problems with your {mental or emotional health/use of alcohol or drugs/mental or emotional health and your use of alcohol or drugs}? Do not count overnight hospital stays.

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

**AF77**

\_\_\_\_\_ NUMBER OF VISITS

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_F25** Are you still receiving treatment for these problems from one or more of these providers?  
您現在仍然因為這些問題從一位或多位專業人員那裏得到治療嗎？

**AF78**

YES .....1 [GO TO QA15\_F28]

NO .....2

REFUSED ..... -7 [GO TO QA15\_F28]

DON'T KNOW ..... -8 [GO TO QA15\_F28]

**QA15\_F26** Did you complete the recommended full course of treatment?  
您是否已經完成了建議的全部療程？

**AF79**

YES .....1 [GO TO QA15\_F28]

NO .....2

REFUSED ..... -7 [GO TO QA15\_F28]

DON'T KNOW ..... -8 [GO TO QA15\_F28]

**QA15\_F27** What is the MAIN REASON you are no longer receiving treatment?  
您不再接受治療的主要原因是什麼？

**AF80**

GOT BETTER/NO LONGER NEEDED .....1

NOT GETTING BETTER .....2

WANTED TO HANDLE PROBLEM ON OWN .....3

HAD BAD EXPERIENCES WITH TREATMENT .....4

LACK OF TIME/TRANSPORTATION .....5

TOO EXPENSIVE .....6

INSURANCE DOES NOT COVER .....7

OTHER (SPECIFY: \_\_\_\_\_) .....8

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_F28** During the past 12 months, did you take any prescription medications, such as an antidepressant or sedative, almost daily for two weeks or more, for an emotional or personal problem?  
 在過去十二個月中，您是否曾經因情感或個人問題連續兩週或以上幾乎每天服用一些處方藥，例如抗憂鬱藥或鎮靜劑？

**AJ5**

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

**PROGRAMING NOTE QA15\_F29:**

**IF QA15\_F19 = 1 AND (QA15\_F21 ≠ 1 AND QA15\_F22 ≠ 1) (PERCEIVED NEED, BUT NO TREATMENT)  
 CONTINUE WITH QA15\_F29;  
 ELSE SKIP TO QA15\_F33**

**QA15\_F29** Here are some reasons people have for not seeking help even when they think they might need it. Please tell me “yes” or “no” for whether each statement applies to why you did not see a professional.  
 以下是人們在感到需要尋求幫助時沒有尋求幫助的一些原因。請對以下每一項陳述回答「是」或「否」，說明您沒有約見專業人員的原因。

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

**AF82**

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

**QA15\_F30** You did not feel comfortable talking with a professional about your personal problems.  
 您與專業人員談論自己的個人問題感到不自在。

**AF83**

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

**QA15\_F31** You were concerned about what would happen if someone found out you had a problem.  
 您擔心如果有人知道了您的問題後會出現什麼情況。

**AF84**

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

**QA15\_F32** You had a hard time getting an appointment.  
您在預約時遇到了困難。

**AF85**

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

**PROGRAMMING NOTE QA15\_F33:**

**IF QA15\_A12 = 9 (JAPANESE) OR QA15\_A15 = 38 (JAPANESE), THEN CONTINUE WITH QA15\_F33;  
ELSE GO TO SECTION G;**

**QA15\_F33** The next questions are about how you feel about different aspects of your life. For each one, please tell me how often you feel that way.

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

**AF107**

Hardly ever .....1  
Some of the time, or .....2  
Often? .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**QA15\_F34** How often do you feel left out? Is it...

**AF108**

Hardly ever .....1  
Some of the time, or .....2  
Often? .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**QA15\_F35** How often do you feel isolated from others? Is it...

**AF109**

Hardly ever .....1  
Some of the time, or .....2  
Often? .....3  
REFUSED .....-7  
DON'T KNOW .....-8

## Section G – Demographic Information, Part II

QA15\_G1

Now a few more questions about your background.

現在，我想問幾個有關您的背景的問題

In what country were you born?

您 是在哪一個國家出生的？

AH33

[SELECT FROM MOST LIKELY COUNTRIES]

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

**PROGRAMMING NOTE QA15\_G2:****IF QA15\_G1 ≠ 1 (NOT BORN IN US) GO TO QA15\_G4;****ELSE IF QA15\_G1 = 1, -7, OR -8 (BORN IN US, DON'T KNOW, REFUSED) CONTINUE WITH QA15\_G2**

**QA15\_G2** In what country was your mother born?  
 您的母親是在哪一個國家出生的?

**AH34****[SELECT FROM MOST LIKELY COUNTRIES]****[FOR RESPONDENTS WHO WERE ADOPTED, QUESTION REFERS TO ADOPTIVE PARENTS]**

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



**QA15\_G3** In what country was your father born?  
 您的父親是在哪一個國家出生的？

<b>AH35</b>
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**[SELECT FROM MOST LIKELY COUNTRIES]**

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

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

**PROGRAMMING NOTE QA15\_G4:**

**IF QA15\_A12 ≠ 9 (NOT JAPANESE) AND QA15\_A15 ≠ 38 (NOT JAPANESE), THEN SKIP TO QA15\_G7;  
ELSE IF QA15\_G1 ≠ 1, 2, 9, OR 22 (USA, AMERICAN SAMOA, GUAM, PUERTO RICO, VIRGIN ISLANDS)  
AND AAGE ≤ 70, SKIP TO QA15\_G6;**

**QA15\_G4** You said you are of Japanese heritage, did you or your Japanese ancestors immigrate to the US after 1945?

**AG25**

YES .....1 [SKIP TO QA15\_G6]  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_G5** Which generation of Japanese immigrant are you?

**AG26**

1<sup>ST</sup> GENERATION (ISSEI) .....1 [SKIP TO QA15\_G7]  
2<sup>ND</sup> GENERATION (NISEI) .....2 [SKIP TO QA15\_G7]  
3<sup>RD</sup> GENERATION (SANSEI) .....3 [SKIP TO QA15\_G7]  
4<sup>TH</sup> GENERATION (YONSEI) .....4 [SKIP TO QA15\_G7]  
5<sup>TH</sup> GENERATION (GOSEI) .....5 [SKIP TO QA15\_G7]  
OTHER SPECIFY: ( ) ..... 91 [SKIP TO QA15\_G7]  
REFUSED ..... -7 [SKIP TO QA15\_G7]  
DON'T KNOW ..... -8 [SKIP TO QA15\_G7]

**QA15\_G6** {You said you were of Japanese heritage,} which generation of Japanese immigrant are you?

**AG27**

1<sup>ST</sup> GENERATION (SHIN-ISSEI) .....1  
2<sup>ND</sup> GENERATION (SHIN-NISEI) .....2  
3<sup>RD</sup> GENERATION (SHIN-SANSEI) .....3  
OTHER SPECIFY: ( ) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_G7** What languages do you speak at home?  
您在家中用什麼語言交談？

**AH36**

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

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

**PROGRAMMING NOTE QA15\_G8**

**IF QA15\_G7 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO PROGRAMMING NOTE QA15\_G9;**

**IF INTERVIEW CONDUCTED IN ENGLISH AND QA15\_G7 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA15\_G8 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English" AND DROP RESPONSE CATEGORY "Not at all?";**

**ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA15\_G8.**

**SET AH37ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QA15\_G8 WAS ASKED**

**QA15\_G8** {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English...  
"因為您在家中說的語言不是英文，我們很想知道您認為自己英語說得怎樣。  
", 您認為 您 的英語說得.....

**AH37**

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

**PROGRAMMING NOTE QA15\_G9:**

**IF QA15\_G1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PROGRAMMING NOTE QA15\_G12  
ELSE CONTINUE WITH QA15\_G9**

**QA15\_G10** The next questions are about citizenship and immigration.  
以下是有關公民身份及移民的幾個問題。

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

**AH39**

YES .....	1	<b>[GO TO QA15_G12]</b>
NO .....	2	
APPLICATION PENDING .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_G11** Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.  
您是持有綠卡的永久居民嗎？您的回答會得到保密，不會向移民局報告。

**AH40**

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

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

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

**QA15\_G12** About how many years have you lived in the United States?  
您在美國已經居住了大約多少年？

**AH41**

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

\_\_\_\_\_ NUMBER OF YEARS  
\_\_\_\_\_ YEAR (FIRST CAME TO LIVE IN U.S.)  
  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_G12A**  
**IF QA15\_G10 = 1 (NATURALIZED) CONTINUE WITH QA15\_12A**  
**ELSE GO TO QA15\_G12B;**

**QA15\_G12A** In what year did you become naturalized?  
您在哪一年入籍美國？

**AG30**

**[IF NEEDED, PROBE: "How long ago did you become naturalized?"]**  
**[IF NEEDED, PROBE: "多久之前您入籍了？"]**

**[INTERVIEWER: TRY TO GET A SPECIFIC YEAR IF POSSIBLE. "YEARS AGO" AND "MONTHS AGO" SHOULD ONLY BE USED IF R CANNOT GIVE A DATE.]**

\_\_\_\_\_ CALENDAR YEAR [RANGE 1900-2015] [CANNOT BE EARLIER THAN AA1YR]  
\_\_\_\_\_ YEARS AGO  
\_\_\_\_\_ MONTHS AGO  
  
OTHER (SPECIFY: \_\_\_\_\_).....91  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_G11B**

**IF QA15\_G9 ≠ 1 (NOT NATURALIZED) AND QA15\_G10 ≠ 1 (NO GREEN CARD), CONTINUE WITH QA15\_G11B;  
ELSE GO TO PROGRAMMING NOTE QA15\_G12**

**QA15\_G11B** Tell me if you are currently here on any of the following: a tourist visa, a student visa, a work visa or permit, or another document which permits you to stay in the U.S. for a limited amount of time?  
請告訴我，目前您有以下哪一項：旅遊簽證，學生簽證，工作簽證或工作許可，還是其他允許您在美國居留一段時間的文件？

**AG36**

**[INTERVIEWER: CHECK FIRST MENTION.]**

**[INTERVIEWER: CIRCLE "4" OR "5" ONLY IF VOLUNTEERED. DO NOT PROBE.]**

TOURIST VISA .....	1	<b>[GO TO QA15_G12D]</b>
STUDENT VISA .....	2	<b>[GO TO QA15_G12D]</b>
WORK VISA OR PERMIT .....	3	
DEFERRED ACTION FOR CHILDHOOD ARRIVALS OR "DACA" .....	4	<b>[GO TO QA15_G12D]</b>
DEFERRED ACTION FOR PARENTAL ACCOUNTABILITY OR "DAPA" .....	5	<b>[GO TO QA15_G12D]</b>
ANOTHER DOCUMENT WHICH PERMITS STAY FOR LIMITED TIME .....	6	
REFUSED .....	-7	<b>[GO TO QA15_G13]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_G13]</b>

**QA15\_G11C** Was this visa or permit through Deferred Action for Childhood Arrivals or "DACA" or Deferred Action for Parental Accountability or "DAPA"?  
這項簽證或許可是通過兒童暫緩遣返(Deferred Action for Childhood Arrivals, 簡稱為"DACA") 還是父母暫緩遞解(Deferred Action for Parental Accountability, 簡稱為"DAPA")？

**AG43**

YES, DACA (DEFERRED ACTION FOR CHILDHOOD ARRIVALS) .....	1
YES, DAPA (DEFERRED ACTION FOR PARENTAL ACCOUNTABILITY) .....	2
NO .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_G11D** Is this visa or document still valid or has it expired?  
這份簽證或文件仍然有效還是已經過期？

**AG37**

VALID .....	1
EXPIRED .....	2
APPLICATION PENDING .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_G13:**

IF [QA15\_A16 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [QA15\_D23 = 1 OR QA15\_D24 = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA15\_G13;

IF QA15\_A16 = 1, THEN DISPLAY "spouse";

IF QA15\_A16 = 2 OR QA15\_D23 = 1 OR QA15\_D24 = 1, THEN DISPLAY "partner";

ELSE GO TO PROGRAMMING NOTE QA15\_G15

**QA15\_G12** Is your {spouse/partner} also living in your household?

您的{配偶/伴侶}是不是也住在您的住戶中？

**AH44**

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

**QA15\_G13** May I have your {spouse/partner}'s first name and age?

您是否能夠告訴我您的{配偶/伴侶}的名字和年齡？

**SC11A**

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

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

SPOUSE/PARTNER AGE \_\_\_\_\_

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

**PROGRAMMING NOTE QA15\_G15:**

IF [AAGE < 30 OR QA15\_A4 = 1 (AGE 18-29)] AND QA15\_G10 = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH, CONTINUE WITH QA15\_G15;

IF [AAGE < 30 OR QA15\_A4 = 1 (AGE 18-29)] AND QA15\_A16 = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, CONTINUE WITH QA15\_G15;

ELSE GO TO PROGRAMMING NOTE QA15\_G16

**QA15\_G14** Are you now living with either of your parents?

您目前有沒有與您的父母之中一人住在一起？

**AH43A**

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

**PROGRAMMING NOTE QA15\_G15:**

**IF SC7 + SC8 > 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN SC13A ARE AGE 13 OR LESS, CONTINUE WITH QA15\_G15;**

**ELSE GO TO QA15\_G17;**

**IF ANY CHILD IN ROSTER SC13A < 14 AND ≥ 14 DISPLAY “for any children under age 14”;**

**IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY “you or your spouse”;**

**ELSE IF QA15\_G12 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY “you or your partner”;**

**ELSE DISPLAY “you”**

**QA15\_G15** In the past month, did you use any paid childcare {for any children under age 14} while {you or your spouse/you or your partner/you} worked, were in school, or looked for work?  
在過去一個月中，當{您或您的配偶/您或您的伴侶/您}在工作、上學或尋找工作時，是否{讓任何年齡在 14 歲以下的孩子}接受任何付費幼兒看護服務？

**AH44A**

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

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

YES .....	1	
NO .....	2	<b>[GO TO QA15_G18]</b>
REFUSED .....	-7	<b>[GO TO QA15_G18]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_G18]</b>

**QA15\_G16** In the past month, how much did you pay for all child care arrangements and programs?  
在上個月中，您為所有的幼兒看護安排及計劃支付了多少費用？

**AH44B**

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

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

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

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

NO PAYMENT IN LAST MONTH OR WEEK .....3

REFUSED ..... -7

DON'T KNOW ..... -8



**QA15\_G17** What is the highest grade of education you have completed and received credit for?  
您完成的最高教育和獲得學分的最高年級是什麼？

**AH47**

<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

**QA15\_G18** Did you ever serve on active duty in the Armed Forces of the United States?  
您是否曾經在美國軍隊當過現役軍人？

**AG22**

YES .....	1	
NO .....	2	[GO TO QA15_G22]
REFUSED .....	-7	[GO TO QA15_G22]
DON'T KNOW .....	-8	[GO TO QA15_G22]

**QA15\_G19** When did you serve?  
您是什麼時候在軍隊服役的？

**AG23**

FROM \_\_\_\_\_ TO \_\_\_\_\_

{OR}

**[CHECK ALL THAT APPLY]**

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

**QA15\_G20** Altogether, how long did you serve?  
您總共服役多長時間？

**AG24**

\_\_\_\_\_ YEARS

\_\_\_\_\_ MONTHS

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

**QA15\_G21** Which of the following were you doing last week?  
您上週曾經從事以下哪些工作，是.....

**AK1**

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

**[GO TO QA15\_G26]**

**[GO TO QA15\_G26]**

**[GO TO QA15\_G26]**

**[GO TO QA15\_G26]**

**QA15\_G22** What is the main reason you did not work last week?  
 您上週沒有工作的主要原因是什麼?

**AK2**

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

TAKING CARE OF HOUSE OR FAMILY .....1  
 ON PLANNED VACATION .....2  
 COULDN'T FIND A JOB .....3  
 GOING TO SCHOOL/STUDENT .....4  
 RETIRED .....5  
 DISABLED .....6  
 UNABLE TO WORK TEMPORARILY .....7  
 ON LAYOFF OR STRIKE .....8  
 ON FAMILY OR MATERNITY LEAVE .....9  
 OFF SEASON ..... 10  
 SICK ..... 11  
 OTHER ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

[GO TO PN QA15\_G25]  
 [GO TO PN QA15\_G25]

**QA15\_G23** Do you usually work?  
 您通常工作嗎?

**AG10**

YES .....1  
 NO .....2  
 LOOKING FOR WORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_G25:**  
 IF [AAGE = -7 OR -8 OR AAGE < 65] AND QA15\_G24 = 2 (NO) CONTINUE WITH QA15\_G25;  
 IF [AAGE = -7 OR -8 OR AAGE < 65] AND [QA15\_G23 = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH QA15\_G25;  
 ELSE GO TO PROGRAMMING NOTE QA15\_G26

**QA15\_G24** Are you receiving Social Security Disability Insurance or SSDI?  
 您是否在領取社會安全殘障保險(Social Security Disability Insurance, 簡稱 SSDI)?

**AL22**

YES .....1 [GO TO PN QA15\_G27]  
 NO .....2 [GO TO PN QA15\_G27]  
 REFUSED ..... -7 [GO TO PN QA15\_G27]  
 DON'T KNOW ..... -8 [GO TO PN QA15\_G27]

**PROGRAMMING NOTE QA15\_G25:**

**IF QA15\_G21 = 1, 2, -7, OR -8 (WORKING, WITH JOB, DK, OR RF) OR QA15\_G23 = 1 (USUALLY WORKS),  
CONTINUE WITH QA15\_G25;  
ELSE GO TO PROGRAMMING NOTE QA15\_G28**

**QA15\_G25** 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、還是您是自行經營者（個體經營者）或者從事家庭企業或農場內不付薪水的工作？

AK4

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

**[IF NEEDED, SAY: 「您在哪裡工作的時間最長？」]**

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

**PROGRAMMING NOTE QA15\_G27:**

**IF QA15\_G26 = 2 (GOVERNMENT EMPLOYEE), DISPLAY "What kind of agency or department is this?"  
and "[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E.G., STATE, LOCAL) AND THE  
FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.)]";  
ELSE DISPLAY "What kind of business or industry is this?" AND "[IF NEEDED, SAY: "What do they make  
or do at this business?"]"**

**QA15\_G26** {What kind of agency or department is this?/What kind of business or industry is this?}  
{這是屬於什麼樣的機構或部門?/這是屬於什麼樣的企業或行業?}.....

AK5

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

**[IF NEEDED, SAY: "What do they make or do at this business?"]**

**[IF NEEDED, SAY: 「在這企業中他們製造什麼或做什麼？」]**

**[INTERVIEWER: ENTER DESCRIPTION]**

\_\_\_\_\_ (GOVERNMENT AGENCY OR  
DEPARTMENT/BUSINESS OR INDUSTRY)

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

**QA15\_G27** What is the main kind of work you do?  
 您主要從事何種類型的工作？

**AK6**

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

\_\_\_\_\_ (OCCUPATION)

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

**PROGRAMMING NOTE QA15\_G28:**

**IF QA15\_G25 = 2 (GOVERNMENT EMPLOYEE), CODE QA15\_G28 = 8 AND GO TO QA15\_G29;**

**IF QA15\_G25 = 3 (SELF-EMPLOYED), CONTINUE WITH QA15\_G28 AND DISPLAY "Including yourself, about" and "you";**

**ELSE CONTINUE WITH QA15\_G28 AND DISPLAY "About" and "your employer";**

**QA15\_G28** {Including yourself, about/About} how many people are employed by {your employer/you} at all locations?  
 {包括您在內}, {您的雇主/您}在所有地點總共聘用了大約多少名雇員？

**AK8**

**[IF NEEDED, SAY: "Your best guess is fine."]**  
**[IF NEEDED, SAY: 「請盡量估計人數。」]**

1 OR 2 .....1  
 3-9 .....2  
 10-24 .....3  
 25-50 .....4  
 51-100 .....5  
 101-200 .....6  
 201-999 .....7  
 1,000 OR MORE .....8  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_G30:**

IF QA15\_ A16 = 1 (MARRIED) OR QA15\_ D23 = 1 OR QA15\_ D24 = 1, CONTINUE WITH QA15\_ G30;

IF QA15\_ A16 = 1, THEN DISPLAY “spouse”;

ELSE IF QA15\_ D23 = 1 OR QA15\_ D24 = 1, THEN DISPLAY “partner”;

ELSE GO TO QA15\_ H1

**QA15\_G29** Which of the following was your {spouse/partner} doing last week?  
您的{配偶/伴侶}上週曾經從事以下哪些工作，是.....

**AG8**

Working at a job or business,.....	1	[GO TO QA15_G32]
從事工作或經營業務, .....	1	[GO TO QA15_G32]
With a job or business but not at work,.....	2	[GO TO QA15_G32]
有工作或業務，但不在工作, .....	2	[GO TO QA15_G32]
Looking for work, or .....	3	
找工作，還是.....	3	
Not working at a job/business? .....	4	
不在從事工作或經營業務? .....	4	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_G30** Does your {spouse/partner} usually work?  
您的{配偶/伴侶}通常工作嗎?

**AG11**

YES .....	1	
NO .....	2	[GO TO QA15_H1]
LOOKING FOR WORK .....	3	[GO TO QA15_H1]
REFUSED .....	-7	[GO TO QA15_H1]
DON'T KNOW .....	-8	[GO TO QA15_H1]

**QA15\_G31** On your {spouse's/partner's} main job, is {he/she} employed by a private company, the government, or is {he/she} self-employed, or is {he/she} working without pay in a family business or farm?  
您的{配偶/伴侶}從事的主要工作的僱主是：私人公司、政府部門、還是{他/她}是自行經營者（個體經營者），還是從事家庭企業或農場內不付薪水的工作？

**AG9**

[IF NEEDED, SAY: “Where did {he/she} work MOST hours?”]

[IF NEEDED, SAY: 「他/她在哪裡工作的時間最長？」]

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

## Section H – Health Insurance

**QA15\_H1** The next topics are about health insurance and health care.  
 以下是有關健康保險及健康護理的問題。

Is there a place that you usually go to when you are sick or need advice about your health?  
 當您生病或需要接受健康諮詢時，您是否有一個通常可以去的地方？

**AH1**

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

YES .....	1	
NO .....	2	[GO TO QA15_H3]
DOCTOR/MY DOCTOR .....	3	
KAISER .....	4	
MORE THAN ONE PLACE .....	5	
REFUSED .....	-7	[GO TO QA15_H3]
DON'T KNOW .....	-8	[GO TO QA15_H3]

**PROGRAMMING NOTE QA15\_H2:**

IF QA15\_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often--a medical";

ELSE IF QA15\_H1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";

ELSE IF QA15\_H1 = 4 (KAISER) CIRCLE "1" FOR QA15\_H2 AND GO TO QA15\_H3

**QA15\_H2** {What kind of place do you go to most often—a medical/Is your doctor in a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?  
 {您最常去什麼樣的地方—/您的醫生是否在一個私人} 醫生辦公室、診所或醫院診所、急診室或其它地方？

**AH3**

DOCTOR'S OFFICE/KAISER/OTHER HMO .....	1
CLINIC/HEALTH CENTER/HOSPITAL CLINIC .....	2
EMERGENCY ROOM .....	3
SOME OTHER PLACE (SPECIFY: _____) ....	91
NO ONE PLACE .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_H3:**

IF QA15\_B6 = 1 OR QA15\_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA15\_B28 = 1 (YES, R VISITED ER FOR DIABETES) OR QA15\_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE) SKIP TO QA15\_H4;  
ELSE CONTINUE WITH QA15\_H3

**QA15\_H3** During the past 12 months, did you visit a hospital emergency room for your own health?  
在過去 12 個月中，您有沒有因為自身的健康去過醫院急診室？

**AH12**

YES .....	1	
NO .....	2	[GO TO QA15_H5]
REFUSED .....	-7	[GO TO QA15_H5]
DON'T KNOW .....	-8	[GO TO QA15_H5]

**PROGRAMMING NOTE QA15\_H4:**

IF QA15\_B6 = 1 OR QA15\_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA15\_B28 = 1 (YES, R VISITED ER FOR DIABETES) OR QA15\_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN DISPLAY  
“During the past 12 month, how many times did you visit a hospital emergency room for your own health?”;  
ELSE DISPLAY “How many times did you do that?”

**QA15\_H4** {During the past 12 months, how many times did you visit a hospital emergency room for your own health/How many times did you do that}?  
{在過去十二個月中，您因自己的健康問題去了多少次醫院急診室就診？/您去過多少次}？

**AH95**

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

[IF NEEDED, SAY: “在過去十二個月中，您因自己的健康問題去了多少次醫院急診室就診？”]

\_\_\_\_\_ NUMBER OF TIMES

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

**QA15\_H5** MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE?  
MediCARE（醫療保障計劃）是為年滿 65 歲或患有某種殘障的人士提供的健康保險計劃。您目前是否享受 MediCARE 保賠？

**AI1**

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

YES .....	1	[GO TO QA15_H8]
NO .....	2	
REFUSED .....	-7	[GO TO QA15_H16]
DON'T KNOW .....	-8	[GO TO QA15_H16]

**POST-NOTE QA15\_H5:**

IF QA15\_H5 = 1, SET ARM CARE = 1 AND SET ARINSURE = 1



**PROGRAMMING NOTE QA15\_H6:**

**IF [AAGE > 64 OR QA15\_A4 = 6 (65 OR OLDER) OR ENUM.AGE > 64] AND QA15\_H5= 2 (NOT COVERED BY MEDICARE), CONTINUE WITH QA15\_H6;  
ELSE GO TO PROGRAMMING NOTE QA15\_H8**

**QA15\_H6** Is it correct that you are not covered by MediCARE even though you told me earlier that you are 65 or older?  
雖然您剛才告訴過我您的年齡在 65 歲或 65 歲以上，但您沒有享受 MediCARE（醫療保障計劃），對不對？

**AI2**

CORRECT, NOT COVERED BY MEDICARE .....	1	<b>[GO TO PN QA15_H16]</b>
NOT CORRECT, R IS COVERED BY MEDICARE..	2	<b>[GO TO PN QA15_H8]</b>
AGE IS INCORRECT .....	93	
REFUSED .....	-7	<b>[GO TO PN QA15_H16]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_H16]</b>

**POST-NOTE QA15\_H6:**

**IF QA15\_H6 =2, SET ARM CARE = 1 AND SET ARINSURE = 1**

**QA15\_H7** What is your age, please?  
請告訴我您的年齡多大。

**AI3**

_____ YEARS OF AGE [HR: 18-105]		<b>[GO TO PN QA15_H16]</b>
REFUSED .....	-7	<b>[GO TO PN QA15_H16]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_H16]</b>

**POST NOTE QA15\_H7: AIDATE**

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

**SET AAGE = QA15\_H7;**

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

**PROGRAMMING NOTE QA15\_H8:**  
**IF ARM CARE = 1, CONTINUE WITH QA15\_H8;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H16**

**QA15\_H8** Is this a MediCARE Advantage Plan?  
 這個醫療保險是 MediCARE Advantage 計劃嗎？

**AH123**

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

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

YES .....	1	
NO .....	2	[GO TO QA15_H11]
REFUSED .....	-7	[GO TO QA15_H11]
DON'T KNOW .....	-8	[GO TO QA15_H11]

**POST-NOTE QA15\_H8;**  
**IF QA15\_H8 = 1, SET ARMADV = 1**

**QA15\_H9**

Is your MediCARE Advantage plan provided through an HMO, PPO, or Private Fee-for-Service Plan?

您的 MediCARE Advantage 醫療保險計劃是通過 HMO, PPO, 還是私營有償醫療服務 (Private Fee-for-Service) 提供的?

**AH124**

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

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

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

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

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

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

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

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

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

**QA15\_H10** What is the name of your MediCARE plan?  
您的 MediCARE 計劃名稱是什麼?

**AH125**

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

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

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 QA15\_H10:**  
**ALL ANSWERS GO TO PROGRAMMING NOTE QA15\_H12;**  
**IF QA15\_H10 = 93, 87, OR 89 THEN ARMILIT = 1**

**QA15\_H11** Some people who are eligible for MediCARE also have private insurance that is sometimes called Medigap or Medicare Supplement. Do you have this type of health insurance?  
 有些有資格享受 MediCARE 的人另外還有私人保險，有時稱為 Medigap 或 Medicare 補充保險。  
 您有此類健康保險嗎？

**AI4**

[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 QA15_H16]
REFUSED .....	-7	[GO TO PN QA15_H16]
DON'T KNOW .....	-8	[GO TO PN QA15_H16]

**POST-NOTE FOR QA15\_H11:**  
**IF QA15\_H11 = 1, SET ARSUPP = 1**

**PROGRAMMING NOTE QA15\_H12:**  
**IF ARMADV = 1 (MEDICARE ADVANTAGE) CONTINUE WITH QA15\_H12 AND DISPLAY "MediCARE Advantage plan";**  
**IF ARSUPP = 1 (HAS SUPPLEMENT) CONTINUE WITH QA15\_H12 AND DISPLAY "MediCARE Supplement plan";**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H16**

**QA15\_H12** For the {MediCARE Advantage plan/MediCARE Supplement plan}, did you sign up directly, or did you get this insurance through a current employer, a former employer, a union, a family business, AARP, or some other way?  
 有關 {MediCARE Advantage 醫保計劃/MediCARE 補充保險}，您是直接註冊參加還是通過目前的雇主、以前的雇主、工會、家庭企業、AARP 還是以其他方式獲得該保險？

**AH126**

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

[IF NEEDED, SAY: "AARP 代表「美國退休人協會」。"]

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

**QA15\_H13**

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

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

**AH53**

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

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

[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

**QA15\_H14**

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

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

**AH54**

YES .....1  
 NO .....2 [GO TO PN QA15\_H16]  
 REFUSED ..... -7 [GO TO PN QA15\_H16]  
 DON'T KNOW ..... -8 [GO TO PN QA15\_H16]

**QA15\_H15** Who is that?  
是誰?

**AH55**

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

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

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其他人或機構嗎？」]

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

**POST-NOTE FOR QA15\_H15:**  
**IF QA15\_H15 = 7, SET ARMCAL = 1;**

**PROGRAMMING NOTE QA15\_H16:**  
**IF ARMCAL = 1, DISPLAY "Is it correct that you are";**  
**ELSE DISPLAY "Are you"**

**QA15\_H16** {Is it correct that you are/Are you} covered by Medi-CAL?  
您享受 Medi-CAL 的保賠，{對嗎/嗎}？

**A16**

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

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

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

**POST-NOTE FOR QA15\_H16:**  
**IF QA15\_H16 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;**  
**IF ARMCAL = 1 AND QA15\_H16 = 2, SET ARMCAL = 0**



**PROGRAMMING NOTE QA15\_H17:**

**IF ARSUPP = 1, DISPLAY “Besides the Medicare supplement plan you told me about” AND “any other”;**  
**ELSE IF ARMADV = 1, DISPLAY “Besides the Medicare Advantage plan you told me about” AND “any other”;**  
**ELSE DISPLAY “a”**

**QA15\_H17** {Besides the Medicare supplemental plan you told me about/Besides the Medicare Advantage plan you told me about}, Are you covered by {any other/a} health insurance plan or HMO through a current or former employer or union?  
 {除了您告訴我的 Medicare 補充計劃/除了您告訴我的 Medicare Advantage 計劃}, 您是否享有目前或以前的雇主或工會提供的{其他任何}醫療保險計劃或 HMO?

**AI8**

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

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

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

**POST-NOTE FOR QA15\_H17:**

**IF QA15\_H17 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1**

**PROGRAMMING NOTE QA15\_H18:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, AND EMPLOYER), CONTINUE WITH QA15\_H18;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H20**

**QA15\_H18** Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?  
 您是否享受您直接從保險公司或 HMO 或透過 Covered California 購買的醫療保險計劃的承保?

**AI11**

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

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

YES .....1  
 NO .....2 **[GO TO PN QA15\_H20]**  
 REFUSED ..... -7 **[GO TO PN QA15\_H20]**  
 DON'T KNOW ..... -8 **[GO TO PN QA15\_H20]**

**POST-NOTE FOR QA15\_H18:**

**IF QA15\_H18 = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1**

**PROGRAMMING NOTE QA15\_H19:**  
**IF ARDIRECT = 1, THEN CONTINUE WITH QA15\_H19;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H20**

**QA15\_H19** How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
 您是如何購買這項健康保險的 — 是直接從保險公司或 HMO 購買還是透過 Covered California 購買？

**AH104**

**POST-NOTE FOR QA15\_H19:**  
**IF QA15\_H19 = 2, THEN SET ARHBEX = 1**  
**PROGRAMMING NOTE FOR QA15\_H20:**  
**IF QA15\_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA15\_H18 = 1 (PURCHASED OWN COVERAGE),**  
**CONTINUE WITH QA15\_H20;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H22**

**QA15\_H20** Was this plan obtained in your own name or in the name of someone else?  
 這項計劃是用您的姓名申請還是用其他人的姓名申請的？

**AI9**

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

IN OWN NAME .....	1	<b>[GO TO PN QA15_H22]</b>
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	<b>[GO TO PN QA15_H22]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_H22]</b>

**POST-NOTE FOR QA15\_H20:**  
**IF QA15\_H17 = 1 AND QA15\_H20 = 1 SET AREMPOW = 1 AND SET ARINSURE = 1 AND SET AREMPOTH = 0;**  
**IF QA15\_H17 = 1 AND QA15\_H20 = 2, -7, OR -8 SET AREMPOTH = 1 AND SET ARINSURE = 1;**  
**IF QA15\_H18 = 1 AND QA15\_H20 = 1 SET ARDIROWN = 1 AND ARINSURE = 1;**  
**IF QA15\_H18 = 1 AND QA15\_H20 = 2, -7, OR -8 SET ARDIROTH = 1 AND ARINSURE = 1**

**PROGRAMMING NOTE QA15\_H21:**

IF QA15\_A16 = 1 (MARRIED) OR QA15\_D23 = 1 OR QA15\_D24 = 1 OR IF QA15\_G15 = 1 (LIVING WITH PARENTS) OR IF AAGE < 26, CONTINUE WITH QA15\_H21;  
 ELSE GO TO PROGRAMMING NOTE QA15\_H22;  
 IF QA15\_A16 = 1, THEN DISPLAY "spouse's name";  
 IF QA15\_A16 ≠ 1 AND (QA15\_D23 = 1 OR QA15\_D24 = 1), THEN DISPLAY "partner's name";  
 IF QA15\_G15 = 1 OR AAGE < 26, THEN DISPLAY "parent's name";

**QA15\_H21** Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?  
 是否以您的{配偶}{伴侶}{父母}名義或其他人的名義參加該項計劃?

**AI9A**

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

**POST-NOTE FOR QA15\_H21:**

IF QA15\_H17 = 1 AND QA15\_H21 = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1;  
 IF QA15\_H19 = 1 AND QA15\_H21 = 1 SET AREMPSP = 1 AND AREMPOTH = 0 AND ARSAMESP=1 AND SPHBEX = 1;  
 IF QA15\_H17 = 1 AND QA15\_H21 = 2 SET AREMPPAR =1 AND AREMPOTH = 0;  
 IF QA15\_H18 = 1 AND QA15\_H21 = 1 SET ARDIRSP = 1 AND ARDIROTH = 0 AND ARSAMESP=1;  
 IF QA15\_H18 = 1 AND QA15\_H21 = 2 SET ARDIRPAR = 1 AND ARDIROTH = 0

**PROGRAMMING NOTE QA15\_H22:**

IF QA15\_H17 = 1 (EMPLOYER-BASED COVERAGE) AND QA15\_G28 < 5 (FIRM SIZE ≤100), CONTINUE WITH QA15\_H22 AND DISPLAY;  
 IF AREMPOWN = 1 THEN DISPLAY {you};  
 IF AREMPSP = 1 OR AREMPPAR =1 OR AREMPOTH = 1 THEN DISPLAY {he or she};  
 ELSE GO TO PROGRAMMING NOTE QA15\_H23;

**QA15\_H22** How did {you/he or she} sign up for this health insurance – through an employer, through a union, or through Covered California's SHOP program?  
 {您/他或她}是如何註冊參加這項健康保險的 — 透過雇主、工會還是透過 Covered California 的 SHOP 計劃?

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

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

**AH105**

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

**POST-NOTE FOR QA15\_H22:**

IF QA15\_H22 = 3, THEN SET ARHBEX = 1

**PROGRAMMING NOTE QA15\_H23**  
**IF ARHBEX = 1, THEN CONTINUE WITH QA15\_H23;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H25;**

**QA15\_H23**      Was this a bronze, silver, gold or platinum plan?  
                      這是銅、銀、金還是白金計劃？

**AH106**

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

**PROGRAMMING NOTE QA15\_H24:**  
**IF QA15\_H21 = 3, THEN GO TO QA15\_H25;**  
**ELSE CONTINUE WITH QA15\_H24;**

**QA15\_H24** Was there a subsidy or discount on the premium for this plan?  
 這項計劃的保費是否有補貼或折扣？

**AH107**

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

**PROGRAMMING NOTE QA15\_H25:**  
**IF QA15\_H17 = 1 (EMPLOYER-BASED COVERAGE) OR QA15\_H18 = 1 (PURCHASED OWN COVERAGE),**  
**CONTINUE WITH QA15\_H25;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H28**

**QA15\_H25** Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.  
 您是否為該項保健計劃支付任何或全部保費或費用？請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

**AH57**

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

[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 [GO TO PN QA15\_H27]  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_H26** Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?  
 是否有任何其他人（例如雇主、工會或專業機構）支付該項保健計劃的全部或部份保費或費用？

**AH58**

YES .....1  
 NO .....2 [GO TO PN QA15\_H28]  
 REFUSED ..... -7 [GO TO PN QA15\_H28]  
 DON'T KNOW ..... -8 [GO TO PN QA15\_H28]

**PROGRAMMING NOTE QA15\_H27:**

**IF QA15\_H25 = 2 THEN DISPLAY “Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization”;**  
**ELSE DISPLAY “Who is that”**

**QA15\_H27** {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?  
 {除了您本人，還有誰支付這項計劃的任何費用？例如，您的雇主、工會或專業機構？/是誰}？

**AH56**

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

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

**[CODE ALL THAT APPLY]**

**[PROBE: “Any others?”]**

**[PROBE: 「還有任何其他人或機構嗎？」]**

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

**POST-NOTE QA15\_H27:**

**IF QA15\_H27 = 1, 2, OR 3, THEN SET AREMPOWN = 1;**

**IF QA15\_H27 = 4 OR 5, THEN SET AREMPSP = 1;**

**IF QA15\_H27 = 6, THEN SET AROTHER = 1;**

**IF QA15\_H27 = 9, SET ARMCARE = 1 AND SET ARDIRECT = 0;**

**IF QA15\_H27 = 7, SET ARMCAL = 1 AND SET ARDIRECT = 0;**

**IF QA15\_H27 = 11, SET ARHBEX = 1;**

**IF QA15\_H27 = 91, THEN SET AROTHER = 1**

**PROGRAMMING NOTE QA15\_H28:**

**IF [QA15\_G22 = 1 OR 2 (R WORKED LAST WEEK) OR QA15\_G24 = 1 (R USUALLY WORKS)] AND QA15\_G26 ≠ 3 (NOT SELF-EMPLOYED) AND AREMPOW ≠ 1 (NO EMPLOYER-BASED COVERAGE), CONTINUE WITH QA15\_H28;  
ELSE GO TO PROGRAMMING NOTE QA15\_H32**

**QA15\_H28** Does your employer offer health insurance to any of its employees?  
您的雇主有沒有提供醫療保險給任何員工？

**AI13**

**QA15\_H29** Are you eligible to be in this plan?  
您是否有資格參加該項計劃？

**AI14**

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

[GO TO QA15\_H31]  
[GO TO PN QA15\_H32]

**QA15\_H30** What is the one main reason why you aren't in this plan?  
您沒有參加該項計劃的一個主要原因是什麼？

**AI15**

COVERED BY ANOTHER PLAN .....1  
TOO EXPENSIVE .....2  
DIDN'T LIKE PLAN OFFERED .....3  
DON'T NEED OR BELIEVE IN  
HEALTH INSURANCE .....4  
OTHER (SPECIFY: \_\_\_\_\_) . 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]  
[GO TO PN QA15\_H32]

**QA15\_H31** What is the one main reason why you are not eligible for this plan?  
您沒有資格參加該項計劃的一個主要原因是什麼？

**AI15A**

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

**PROGRAMMING NOTE QA15\_H32:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, OR PRIVATE PLAN),  
CONTINUE WITH QA15\_H32;  
ELSE GO TO PN QA15\_H33**

**QA15\_H32** Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?  
您是否享受 CHAMPUS/ CHAMP-VA、TRICARE、VA 或其它軍隊醫療護理計劃？

**AI16**

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

**POST-NOTE QA15\_H32:**

**IF QA15\_H32 = 1, SET ARMILIT = 1 AND SET ARINSURE = 1**

**PROGRAMMING NOTE QA15\_H33:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN) CONTINUE WITH QA15\_H33;  
ELSE GO TO PROGRAMMING NOTE QA15\_H34**

**QA15\_H33** Are you covered by some other government health program, such as AIM, "Mister MIP," the Family PACT program, PCIP, or something else?  
您是否享受其他政府醫療保險計劃，例如 AIM、Mister MIP、Family PACT、Healthy Kids、或其他計劃？

**AI17**

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

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

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

**POST-NOTE QA15\_H33:**

**IF QA15\_H33 = 1, SET AROTHGOV = 1 AND SET ARINSURE = 1**



**PROGRAMMING NOTE QA15\_H34:**

**IF ARINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, EMPLOYER, PRIVATE PLAN, MILITARY PLAN, AND OTHER GOVERNMENT PLAN), CONTINUE WITH QA15\_H34;  
ELSE GO TO PROGRAMMING NOTE QA15\_H38**

**QA15\_H34** Do you have any health insurance coverage through a plan that I missed?  
您有沒有享受任何我可能漏掉的其它醫療保險計劃？

<b>AI18</b>
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YES .....	1	
NO .....	2	<b>[GO TO PN QA15 H38]</b>
REFUSED .....	-7	<b>[GO TO PN QA15 H38]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15 H38]</b>

**QA15\_H35** What type of health insurance do you have?  
您有哪種醫療保險計劃？

**AI19**

**[CODE ALL THAT APPLY.]**

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

**[PROBE: "還有任何其他保險嗎? "]**

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

**[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 QA15\_H35:**

**IF QA15\_H35 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 2, SET AREMPOTH = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 3, SET ARDIRECT = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 4, SET ARMCARE = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 5, SET ARMCAL = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 7, SET ARMILIT = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 8, SET ARIHS = 1;**

**IF QA15\_H35 = 10, SET ARHBEX = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 11, SET ARHBEX = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 91, SET AROTHGOV = 1 AND SET ARINSURE = 1;**

**IF QA15\_H35 = 92, -7, OR -8, SET AROTHER = 1 AND SET ARINSURE = 1**

**PROGRAMMING NOTE QA15\_H36:**

IF QA15\_H35 = 1, 2, OR 3 CONTINUE WITH QA15\_H36;  
ELSE GO TO PROGRAMMING NOTE QA15\_H38

**QA15\_H36** Was this plan obtained in your own name or in the name of someone else?  
該項計劃是以您自己的名義還是以其他人的名義獲得的?

**AH59**

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

[PROBE: 「甚至不是住在您的家中的人？」]

IN OWN NAME .....	1	[GO TO PN QA15_H38]
IN SOMEONE ELSE'S NAME .....	2	
REFUSED .....	-7	[GO TO PN QA15_H38]
DON'T KNOW .....	-8	[GO TO PN QA15_H38]

**POST-NOTE QA15\_H36:**

IF (QA15\_H35 = 1 OR 2) AND QA15\_H36 = 1 THEN SET AREMPOWN = 1 AND SET AREMPOTH = 0 AND SET ARINSURE = 1;  
IF QA15\_H35 = 3 AND QA15\_H36 = 1 THEN SET ARDIROWN = 1 AND SET ARDIROTH = 0 AND SET ARINSURE = 1;  
IF (QA15\_H35 = 1 OR 2) AND (QA15\_H36 = 2, -7, OR -8), SET AREMPOTH = 1 AND AREMPOWN = 0 AND SET ARINSURE = 1;  
IF QA15\_H35 = 3 AND (QA15\_H36 = 2, -7, OR -8) SET ARDIROTH = 1 AND ARDIROWN = 0 AND SET ARINSURE = 1

**PROGRAMMING NOTE QA15\_H37:**

IF QA15\_A16 = 1 (MARRIED) OR QA15\_D23 = 1 OR QA15\_D24 = 1 OR IF QA15\_G15 = 1 (LIVING WITH PARENTS) OR AAGE < 26, CONTINUE WITH QA15\_H37;  
ELSE GO TO PROGRAMMING NOTE QA15\_H38;  
IF QA15\_A16 = 1 THEN DISPLAY “spouse’s name”;  
IF QA15\_A16 ≠ 1 AND (QA15\_D23 = 1 OR QA15\_D24 = 1), THEN DISPLAY “partner’s name”;  
IF QA15\_G15 = 1 OR AAGE < 26, THEN DISPLAY “parent’s name”;

**QA15\_H37** Is the plan in your {spouse’s name,} {partner’s name,} {parent’s name,} or someone else’s name?  
該項計劃是以您的{配偶名字、}{伴侶名字、}{父母名字、}或其他人名義獲得的嗎?

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

**POST-NOTE QA15\_H37:**

IF QA15\_H37 = 1, SET AREMPSP = 1 AND SET AREMPOTH = 0 AND ARSAMESP=1;  
IF QA15\_H37 = 2, SET AREMPPAR = 1 AND SET AREMPOTH = 0

**PROGRAMMING NOTE QA15\_H37:**

**IF ARIHS ≠ 1 AND QA15\_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE), CONTINUE WITH QA15\_H38;  
ELSE GO TO PROGRAMMING NOTE QA15\_H39\_INTRO**

**QA15\_H38** Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?  
您有沒有享受印地安人醫療服務、部落醫療計劃或都市印地安人診所計劃？

**AI20**

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

**POST-NOTE QA15\_H38:**

**IF QA15\_H38 = 1, SET ARIHS = 1**

**PROGRAMMING NOTE QA15\_H39\_INTRO:**

**IF [QA15\_A16 = 1 (MARRIED) OR QA15\_D23 = 1 OR QA15\_D24 = 1] AND QA15\_G13 = 1  
(SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH QA15\_H39\_INTRO;  
IF QA15\_A16 = 1, THEN DISPLAY “spouse”;  
ELSE IF QA15\_D23 = 1 OR QA15\_D24 = 1, THEN DISPLAY “partner”;  
ELSE GO TO PROGRAMMING NOTE QA15\_H60**

**QA15\_H39\_INTRO** These next questions are about the type of health insurance your {spouse/partner} may have.  
接下來這些問題和您的{配偶/伴侶}可能有的健康保險種類有關。

**AI37intro**

**PROGRAMMING NOTE QA15\_H39:**

**IF SPOUSE 65 OR OLDER THEN**

**IF ARM CARE ≠ 1, CONTINUE WITH QA15\_H39 WITHOUT DISPLAY**

**ELSE IF ARM CARE = 1, CONTINUE WITH QA15\_H39 AND DISPLAY “You said that you are covered by Medicare.” AND “also”;**

**ELSE GO TO PROGRAMMING NOTE QA15\_H42**

**QA15\_H39** {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by Medicare?  
{您說您有Medicare.} 您的{配偶/伴侶} {也}能享受Medicare保賠嗎？

**AI37**

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

**POST-NOTE QA15\_H39:**

**IF QA15\_H39 = 1, SET SPM CARE = 1 AND SET SPINSURE = 1**

**PROGRAMMING NOTE QA15\_H40:**

IF SPMCARE ≠ 1 AND ARMADV ≠ 1, SKIP TO PROGRAMMING NOTE QA15\_H41;

DISPLAYS;

IF SPMCARE = 1 AND ARMADV ≠ 1, CONTINUE WITH QA15\_H40 WITHOUT DISPLAY;

ELSE IF SPMCARE = 1 AND ARMADV = 1, CONTINUE WITH QA15\_H40 AND DISPLAY “You said that you have a Medicare Advantage plan.” AND “also”;

IF QA15\_A16 = 1 (MARRIED) THEN DISPLAY “spouse’s”;

ELSE IF QA15\_D20 = 1 OR QA15\_D21 = 1 THEN DISPLAY “partner’s”;

**QA15\_H40** {You said that you have a Medicare Advantage plan.} Does your {spouse/partner} {also} have a Medicare Advantage plan?

{您說您有 Medicare Advantage 計劃。} 您的{配偶/伴侶} 是否{也} 加入了 Medicare Advantage 計劃？

**AH127**

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

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

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

**POST-NOTE QA15\_H40:**

IF QA15\_H40 = 1, THEN SET SPMADV = 1 AND SET SPINSURE = 1

**PROGRAMMING NOTE QA15\_H41:**

IF SPMADV = 1, THEN SKIP TO PROGRAMMING NOTE QA15\_H42;

ELSE IF SPMCARE = 1 AND ARSUPP ≠ 1, CONTINUE WITH QA15\_H41 WITHOUT DISPLAY;

ELSE IF SPMCARE = 1 AND ARSUPP = 1, CONTINUE WITH QA15\_H41 AND DISPLAY “You said that you have a Medicare Supplement plan.” AND “also”;

IF QA15\_A16 = 1 (MARRIED), THEN DISPLAY “spouse”;

ELSE IF QA15\_D23 = 1 OR QA15\_D24 = 1 THEN DISPLAY “partner”;

ELSE GO TO PROGRAMMING NOTE QA15\_H42

**QA15\_H41** {You said that you have a Medicare Supplement plan.} Does your {partner/spouse} {also} have a Medicare supplement plan?

{您說您有 Medicare 補充計劃。} 您的{伴侶/丈夫/妻子/配偶} 是否{也} 加入了 Medicare 補充計劃？

**AI37A**

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

**POST-NOTE QA15\_H41:**

IF QA15\_H41 = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1

**PROGRAMMING NOTE QA15\_H42:**  
**IF ARMCAL = 1, CONTINUE WITH QA15\_H42 WITHOUT DISPLAY;**  
**IF ARMCARE = 1, THEN DISPLAY “also”;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H43**

**QA15\_H42** You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?  
 您說您{也}可以享受 Medi-Cal (加州醫療保健計劃)。您的{配偶/伴侶} 是否也能享受 Medi-Cal 保  
 賠?

**AI38**

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

**POST-NOTE QA15\_H42:**  
**IF QA15\_H42 = 1, SET SPMCAL = 1 AND SET SPINSURE = 1**

**PROGRAMMING NOTE QA15\_H43:**  
**IF AREMPOW = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA15\_H43;**  
**IF ARMCARE = 1 OR ARMCAL = 1, THEN DISPLAY “also”;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_H45**

**QA15\_H43** You said you have insurance from your current or former employer or union. Is  
 (SPOUSE/PARTNER) {also} covered by the insurance from your employer or union?  
 您說您有您目前或以前雇主或工會提供的保險。您的{配偶/伴侶}是否{也}能享受您的雇主或工會提  
 供的承保？

**AI40**

YES .....1 **[GO TO PN QA15 H46]**  
 NO .....2  
 OTHER .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA15\_H43:**  
**IF QA15\_H43 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;**

**PROGRAMMING NOTE QA15\_H44:**

**IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH QA15\_H44;**

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

**ELSE GO TO PROGRAMMING NOTE QA15\_H45**

**QA15\_H44** You said you have health insurance through Covered California’s SHOP program. Is (SPOUSE/PARTNER) {also} covered by this health insurance?  
 您說您是透過 Covered California 的 SHOP 計劃參加保健計劃。您的{配偶/伴侶}{也}享受這項保健計劃的承保嗎？

**AH108**

**[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	<b>[GO TO PN QA15 H46]</b>
NO .....	2	
OTHER .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QA15\_H44:**

**IF QA15\_H44 = 1, SET SEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP = 1 AND SPHBEX = 1; PROGRAMMING NOTE QA15\_H45:**

**IF QA15\_G29 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA15\_G30 = 1 (USUALLY WORKS), CONTINUE WITH QA15\_H45;**

**IF AREMPSP = 1 AND QA15\_A16 = 1, DISPLAY “You said you have insurance from your spouse’s employer or union.”;**

**ELSE IF AREMPSP = 1 AND (QA15\_D20 = 1 OR QA15\_D21 = 1), THEN DISPLAY “You said you have insurance from your partner’s employer or union.”;**

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

**ELSE GO TO PROGRAMMING NOTE QA15\_H46**

**QA15\_H45** {You said you have insurance from your spouse’s employer or union./You said you have insurance from your partner’s employer or union.} Does (SPOUSE/PARTNER) {also} have coverage through {his/her} own employer?  
 {您說您從您配偶的僱主或工會那兒獲得的保險。/您說您從您伴侶的僱主或工會那兒獲得的保險。}  
 您的{配偶/伴侶} 是否{也} 能夠通過{他/她} 自己的僱主獲得保賠？

**AI40A**

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

**POST-NOTE QA15\_H45:**

**IF QA15\_H45 = 1, SET SEMPOWN = 1 AND SET SPINSURE = 1**

**PROGRAMMING NOTE QA15\_H46:****IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA15\_H46;****IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA15\_H47****QA15\_H46**

You said you {also} have a plan you purchased directly from the insurer. Is (SPOUSE/PARTNER) {also} covered by this plan?

您說您{也} 有一項直接從保險公司購買的計劃。您的{配偶/伴侶} 是否{也}能享受該項計劃的保賠？

**AI41**

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

**POST-NOTE QA15\_H46:****IF QA15\_H46 = 1, SET SPDIRECT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;****PROGRAMMING NOTE QA15\_H47:****IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH QA15\_H47;****IF ARMCARE = 1 OR ARMCAL = 1 OR AREMPOWN = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA15\_H48****QA15\_H47**

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

您說您有一項直接從 Covered California 購買的計劃。您的{配偶/伴侶}{也}享受這項計劃的承保嗎？

**AH109**

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

**POST-NOTE QA15\_H47:****IF QA15\_H47 = 1, SET SPDIRECT =1 AND SET SPINSURE =1 AND ARSAMESP=1 AND SPHBEX= 1;****PROGRAMMING NOTE QA15\_H48:****IF ARMILIT = 1, CONTINUE WITH QA15\_H48;****IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1, DISPLAY “also”;****ELSE GO TO PROGRAMMING NOTE QA15\_H49****QA15\_H48**

You said you {also} have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or some other military healthcare. Is (SPOUSE/PARTNER) also covered by this plan?

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

**AI42**

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



**POST-NOTE QA15\_H48:**

IF QA15\_H48 = 1, SET SPMLIT = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

**PROGRAMMING NOTE QA15\_H49:**

IF AROTHGOV = 1, CONTINUE WITH QA15\_H49;

IF QA15\_H36 = 1, THEN DISPLAY "AIM";

IF QA15\_H36 = 2, THEN DISPLAY "MRMIP";

IF QA15\_H36 = 3, THEN DISPLAY "Family PACT";

IF QA15\_H36 = 4, THEN DISPLAY "PCIP";

IF QA15\_H36 = 91, THEN DISPLAY "some government health plan";

IF ARMCARE = 1 OR ARMCAL = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, DISPLAY "also";

ELSE GO TO PROGRAMMING NOTE QA15\_H50

**QA15\_H49** You said you {also} have health insurance through {AIM/MRMIP/Family PACT/PCIP/some government health plan}. Is (SPOUSE/PARTNER) also covered by this plan?  
您說您{還}透過{ AIM/MRMIP/Family PACT/PCIP/一些政府醫療保險計劃}享受醫療保險。您的{配偶/伴侶}是否也在這項計劃的承保範圍內?

**AI42A**

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

**POST-NOTE QA15\_H49:**

IF QA15\_H49 = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1

**PROGRAMMING NOTE QA15\_H50:**

IF SPINSURE ≠ 1, DISPLAY "any";

ELSE DISPLAY "through any other source"

**QA15\_H50** Does (SPOUSE/PARTNER) have {any} health insurance coverage {through any other source}?  
您的{配偶/伴侶} 是否有{任何} {從其他地方獲得的}健康保險?

**AI46**

YES .....1  
NO .....2 [GO TO QA15\_H52]  
REFUSED ..... -7 [GO TO QA15\_H56]  
DON'T KNOW ..... -8 [GO TO QA15\_H56]

**QA15\_H51** What type of health insurance does {he/she} have?  
{他/她}有哪一種健康保險?

**AI47**

**[CODE ALL THAT APPLY.]**

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

**[PROBE: "還有任何其他保險嗎? "]**

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

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

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

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: {他/她}是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的? "]**

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 QA15\_H51:**

IF QA15\_H51 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 8, SET SPIHS = 1;  
 IF QA15\_H51 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;  
 IF QA15\_H51 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1

**PROGRAMMING NOTE QA15\_H52:****IF SPINSURE  $\neq$  1, CONTINUE WITH QA15\_H52;****ELSE IF SPINSURE = 1 AND (SPEMPOTH = 1 OR SPDIRECT = 1), THEN SKIP TO PROGRAMMING NOTE QA15\_H54;****ELSE GO TO PROGRAMMING NOTE QA15\_H56**

**QA15\_H52** You said that (SPOUSE/PARTNER) has no health insurance from any source. Is this correct?  
 您說您的{配偶/伴侶} 沒有來自任何來源的健康保險，對不對？

<b>AI48</b>
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YES .....	1	<b>[GO TO QA15_H56]</b>
NO .....	2	
REFUSED .....	-7	<b>[GO TO QA15_H56]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_H52]</b>

**QA15\_H53** What type of health insurance does {he/she} have?  
{他/她}有哪一種健康保險？

**AI49**

**[CODE ALL THAT APPLY]**

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

**[PROBE: "還有任何其他保險嗎? "]**

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

**[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "{他/她}是通過目前或以前的雇主/工會、學校、專業協會、同業團體、其他機構，還是直接向保健計劃獲得這項計劃的? "]**

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 QA15\_H53:**

IF QA15\_H53 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 4, SET SPMPCARE = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 8, SET SPIHS = 1;  
 IF QA15\_H53 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;  
 IF QA15\_H53 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;

**PROGRAMMING NOTE QA15\_H54:**

IF QA15\_H51 = (1, 2, 3, 10, 11) OR QA15\_H53 = (1, 2, 3, 10, 11) THEN CONTINUE WITH QA15\_H54;  
 IF QA15\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";  
 ELSE IF QA15\_D20 = 1 OR QA15\_D21 = 1 THEN DISPLAY "partner's";  
 ELSE SKIP TO PROGRAMMING NOTE QA15\_H56

**QA15\_H54** Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?  
 這項計劃是以您的{配偶/伴侶}名義還是以其他人的名義獲得的?

**AH62**

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

[IF NEEDED, SAY: 「甚至包括不住在您住戶中的人。」]

IN SPOUSE'S/PARTNER'S NAME .....	1	[GO TO QA15_H56]	IN
SOMEONE ELSE'S NAME .....	2		
REFUSED .....	-7	[GO TO QA15_H56]	DON'T
KNOW .....	-8	[GO TO QA15_H56]	

**POST-NOTE QA15\_H54:**

IF QA15\_H54 = 1 (SPOUSE'S/PARTNER'S NAME) AND [QA15\_H51 = (1, 2, 3) OR QA15\_H53 = (1, 2, 3)], SET SPEMPOWN = 1 AND SET SPEMPOTH = 0;  
 IF QA15\_H54 = 1 (SPOUSE'S/PARTNER'S NAME) AND [QA15\_H51 = (10, 11) OR QA15\_H53 = (10, 11)], SET SPHBEX = 1;

**QA15\_H55** Is the plan in your name, parent's name, or someone else's name?  
 該項計劃是以您本人、您的父母還是以其他人的名義獲得的?

**AH63**

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

**POST-NOTE QA15\_H55:**

IF QA15\_H55 = 1 AND [QA15\_H51 = (1, 2, 3) OR QA15\_H53 = (1, 2, 3)], SET SPEMPAR = 1 AND SET SPEMPOTH = 0 AND ARSAMESP=1;  
 IF QA15\_H55 = 1 AND [QA15\_H51 = (10, 11) OR QA15\_H53 = (10, 11)], SET SPHBEX = 1 AND ARSAMESP=1;  
 IF QA15\_H55 = 2, SET SPARPAR = 1 AND SET SPEMPOTH = 0

**PROGRAMMING NOTE QA15\_H56:**

IF SPEMPOWN = 1 (HAS EMPLOYER BASED COVERAGE IN OWN NAME), GO TO QA15\_H60;  
 ELSE IF [QA15\_G29 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA15\_G30 = 1 (USUALLY WORKS)]  
 AND QA15\_G31 ≠ 3 (SPOUSE/PARTNER NOT SELF EMPLOYED), CONTINUE WITH QA15\_H56;  
 IF QA15\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";  
 ELSE IF QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE) THEN DISPLAY "partner's"  
 ELSE GO TO PROGRAMMING NOTE QA15\_H60

**QA15\_H56** Does your {spouse's/partner's} employer offer health insurance to any of its employees?  
 您的{配偶/伴侶}的僱主是否向其僱員提供健康保險?

**AI43**

YES .....	1	
NO .....	2	[GO TO QA15_H60]
REFUSED .....	-7	[GO TO QA15_H60]
DON'T KNOW .....	-8	[GO TO QA15_H60]

**QA15\_H57** Is {he/she} eligible to be in this plan?  
 {他/她} 是否有資格參加該項計劃?

**AI44**

YES .....	1	
NO .....	2	[GO TO QA15_H59]
REFUSED .....	-7	[GO TO QA15_H60]
DON'T KNOW .....	-8	[GO TO QA15_H60]

**QA15\_H58** What is the ONE main reason why {he/she} isn't in this plan?  
 {他/她} 未參加該項計劃的一個主要原因是什麼?

**AI45**

COVERED BY ANOTHER PLAN .....	1	[GO TO QA15_H60]
TOO EXPENSIVE .....	2	[GO TO QA15_H60]
DOESN'T LIKE PLAN OFFERED .....	3	[GO TO QA15_H60]
DOESN'T NEED OR BELIEVE IN HEALTH INSURANCE .....	4	[GO TO QA15_H60]
OTHER (SPECIFY: _____) .....	91	[GO TO QA15_H60]
REFUSED .....	-7	[GO TO QA15_H60]
DON'T KNOW .....	-8	[GO TO QA15_H60]

**QA15\_H59** What is the one main reason why {he/she} is not eligible for this plan?  
 {他/她} 沒有資格參加該項計劃的一個主要原因是什麼?

**AI45A**

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

**PROGRAMMING NOTE QA15\_H60:**

**IF ARM CARE = 1 (R HAS MEDICARE) AND (AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARM CAL ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHGOV ≠ 1 AND AROTHER ≠ 1), THEN SKIP TO PN QA15\_H63;**

**IF ARM CARE ≠ 1 AND AREMPOWN ≠ 1 AND AREMPOTH ≠ 1 AND ARDIRECT ≠ 1 AND ARM CAL ≠ 1 AND ARMILIT ≠ 1 AND ARIHS ≠ 1 AND ARHBEX ≠ 1 AND AROTHGOV ≠ 1 AND AROTHER ≠ 1, THEN SKIP TO GO TO QA15\_H76;**

**ELSE CONTINUE WITH QA15\_H60 DISPLAY;**

**IF [QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARM CARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARM CAL = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1)], DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “other” ;**

**IF [QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND [IF ARM CARE = 1 (R HAS MEDICARE) AND (ARM CAL = 1)], DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “Medi-CAL” ;**

**IF ARM CARE = 1 (R HAS MEDICARE) AND (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “other” ;**

**[IF ARM CARE = 1 (R HAS MEDICARE) AND (ARM CAL = 1)], DISPLAY “Besides your MediCARE plan you told me about earlier, I have some questions about your other health plan.” AND “Medi-CAL” ;**

**IF [QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND [(AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARM CARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY “Next, I have some questions about your own main health plan.”; AND “ “;**

**IF [QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND [ARM CAL = 1 AND ARM CARE ≠ 1 (R DOES NOT HAVE MEDICARE)], DISPLAY Next, I have some questions about your own main health plan.” AND “Medi-Cal”;**

**IF (AREMPOWN = 1 OR AREMPOTH = 1 OR ARDIRECT = 1 OR OR ARMILIT = 1 OR ARIHS = 1 OR ARHBEX = 1 OR AROTHGOV = 1 OR AROTHER = 1), AND ARM CARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY “ “;**

**IF ARM CAL = 1 AND ARM CARE ≠ 1 (R DOES NOT HAVE MEDICARE), DISPLAY “Medi-Cal”;**

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

**QA15\_H60** {Besides your MediCARE plan you told me about earlier, I have some questions about **your** other health plan./Next, I have some questions about **your** own main health plan.}  
 {除了您已經告訴我的您的 MediCARE 醫療保險計劃以外，我想問一下您的其他醫療保險方面的問題/接下來，我要提出一些有關您的主要保健計劃的問題。}

Is your {Medi-Cal/other} health plan an HMO?  
 您的{Medi-Cal/其他}醫療保險計劃是 HMO 嗎?

**AI22C**

[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, you must use the doctors and hospitals belonging to its network. If you go outside the network, generally it will not be paid for unless it's an emergency."]

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

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

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

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

YES .....	1	[GO TO QA15_H62]
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	



**PROGRAMMING NOTE QA15\_H61:**  
**IF ARMCAL = 1 (R HAS MEDI-CAL), GO TO QA15\_H62;**  
**ELSE CONTINUE WITH QA15\_H61;**

**QA15\_H61** Is your health plan a PPO or EPO?  
 您的保健計劃是一項 PPO 計劃還是 EPO 計劃？

**AH122**

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

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

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

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

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

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

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

**PROGRAMMING NOTE QA15\_H62:**  
**IF ARINSURE = 1 AND ARMCARE ≠ 1, THEN CONTINUE WITH QA15\_H62 AND DISPLAY "your main";**  
**IF ARINSURE = 1 AND ARMCARE = 1, THEN CONTINUE WITH QA15\_H62 AND DISPLAY "this"**

**QA15\_H62** What is the name of {your main/this} health plan?  
 {您的主要/這個}健康保險計劃的名稱是什麼？

**AI22A**

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

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

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
CALIFORNIA KIDS (CAL KIDS) .....	15
CAL OPTIMA (CAL OPTIMA ONE CARE).....	16
CALVIVA HEALTH.....	17
CARE 1 <sup>ST</sup> HEALTH PLAN .....	18
CAREMORE HEALTH PLAN.....	19
CENTER FOR ELDER'S 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 HEALTH PLAN .....	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 JOE 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 HEALTH PLAN 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 QA15\_H62:**

IF QA15\_H62 = 93, 87, OR 89 THEN SET ARMILIT=1

**PROGRAMMING NOTE QA15\_H63:**

IF ARM CARE = 1 (R HAS MEDI-CARE) AND (AREMPOTH ≠ 1 OR ARDIRECT ≠ 1 OR ARMCAL ≠ 1 OR ARMILIT ≠ 1 OR ARIHS ≠ 1 OR ARHBEX ≠ 1 OR AROTHGOV ≠ 1 OR AROTHGOV ≠ 1) AND QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "Next I have some questions about your own main health plan."

**QA15\_H63** {Next, I have some questions about **your** own main health plan.} Are you covered for your prescription drugs? That is, does some plan pay any part of the cost?  
{接下來，我要問您一些關於您主要的健康保險計劃的問題。} 您享受處方藥物保賠嗎？也就是說，是否有某項計劃可支付處方藥物的部份費用？

**AI25**

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

**PROGRAMMING NOTE QA15\_H64:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 THEN  
CONTINUE WITH QA15\_H64;  
ELSE GO TO QA15\_H69**

**QA15\_H64** Does your health plan have a deductible that is more than \$1,000?  
您的保健計劃是否要求支付超過 1,000 美元的自付額?

**AH71**

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

**[IF NEEDED, SAY: 「免賠額是指您的醫療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 QA15_H66]</b>
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	<b>[GO TO QA15_H66]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA15\_H65:**

**IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH  
QA15\_H65;  
ELSE GO TO QA15\_H66**

**QA15\_H65** Does your health plan have a deductible that is more than \$2,000?  
您的醫療保險計劃是否有超過 2,000 美元的免賠額?

**AH96**

**[IF EDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]**

**[IF NEEDED, SAY: 「免賠額是指您的醫療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	<b>[GO TO QA15_H67]</b>
NO .....	2	
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_H66** Does your health plan have a deductible for all covered persons that is more than \$2,000?  
 您的保健計劃是否要求為所有受保人支付超過 2,000 美元的自付額？

**AH72**

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

[IF NEEDED, SAY: 「免賠額是指您的醫療保險計劃開始為您的醫療護理付款之前您必須支付的數額。」]

YES .....	1	
NO .....	2	[GO TO QA15_H68]
YES, ONLY WHEN I GO OUT OF NETWORK .....	3	[GO TO QA15_H68]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA15\_H67:**

IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA15\_H67;

ELSE GO TO PROGRAMMING NOTE QA15\_H68

**QA15\_H67** Does your health plan have a deductible for all covered persons that is more than \$4,000?  
 您的醫療保險計劃對於所有受保人是否有超過 4,000 美元的免賠額？

**AH97**

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

[IF NEEDED, SAY: 「免賠額是指您的醫療保險計劃開始為您的醫療護理付款之前您必須支付的數額。」]

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

**PROGRAMMING NOTE QA15\_H68:**

**IF ARINSURE ≠ 1 (CURRENTLY UNINSURED) OR ARMCAL = 1 (CURRENTLY HAS MEDICAL) OR ARMCARE = 1 (CURRENTLY HAS MEDICARE) OR AROTHGOV = 1 (CURRENTLY HAS OTHER GOVT COVERAGE LIKE AIM, MRMP, HK), SKIP TO QA15\_H69;  
ELSE CONTINUE WITH QA15\_H68**

**QA15\_H68** Do you have a special account or fund you can use to pay for medical expenses?  
您是否有一個可用於支付醫療費用的特別帳戶或基金？

**AH73**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include- Personal care accounts, Personal medical funds, or Choice funds, and are different from employer-provided Flexible Spending Accounts."]**

**[IF NEEDED, SAY: "帳戶有時指保健儲蓄帳戶（HSA）、保健償付帳戶（HRA）或其他類似帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療基金或選擇基金。此類帳戶與僱主提供的靈活開支帳戶不同。"]**

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

**QA15\_H69** Thinking about your current health insurance, did you have this same insurance for all 12 of the past 12 months?  
請想一想您目前的醫療保險，您在過去 12 個月中，是不是每個月使用的都是同一個保險？

**AI31**

YES .....1 **[GO TO QA15\_H62]**  
NO .....2  
REFUSED ..... -7 **[GO TO QA15\_H72]**  
DON'T KNOW ..... -8

**QA15\_H70** During the past 12 months, when you were not covered by your current health insurance, did you have any other health insurance?  
在過去十二個月中，當您沒有享受當前的健康保險保賠時，您是否有任何其它健康保險？

**AI32**

YES .....1 **[GO TO QA15\_H73]**  
NO .....2 **[GO TO QA15\_H72]**  
REFUSED ..... -7 **[GO TO QA15\_H72]**  
DON'T KNOW ..... -8

**QA15\_H71** Was your other health insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?  
 您的其他醫療保險是 Medi-Cal、您透過雇主獲得的計劃、您從保險公司直接購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

**MODIFIED**  
**AI33**

[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

**QA15\_H72** During the past 12 months, was there any time when you had no health insurance at all?  
 在過去 12 個月中，您有沒有任何時間完全沒有醫療保險？

**AI34**

YES .....1  
 NO.....2 [GO TO QA15\_H82]  
 REFUSED ..... -7 [GO TO QA15\_H82]  
 DON'T KNOW ..... -8 [GO TO QA15\_H82]

**QA15\_H73** For how many months of the past 12 months did you have no health insurance at all?  
 在過去 12 個月中，您有多少個月完全沒有醫療保險？

**AI35**

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

\_\_\_\_\_ NUMBER OF MONTHS [HR: 0-11] [IF 0 GO TO PN QA15-H82]

REFUSED ..... -7 [GO TO QA15\_H82]  
 DON'T KNOW ..... -8 [GO TO QA15\_H82]

**QA15\_H74** What is the ONE MAIN reason why you did not have any health insurance during those months?  
在這些月份中，您沒有任何健康保險的一個主要原因是什麼？

**AI36**

CAN'T AFFORD/TOO 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

**QA15\_H75** During the time that you were uninsured, did you try to find health insurance on your own?  
在您沒有保險的期間，您是否曾經嘗試自己尋找醫療保險？

**AH74**

YES .....1 [GO TO QA15\_H82]  
NO .....2 [GO TO QA15\_H82]  
REFUSED ..... -7 [GO TO QA15\_H82]  
DON'T KNOW ..... -8 [GO TO QA15\_H82]

**QA15\_H76** What is the ONE MAIN reason why you do not have any health insurance?  
您沒有任何健康保險的一個主要原因是什麼？

**AI24**

**[IF R SAYS NO NEED, PROBE WHY]**

CAN'T AFFORD/TOO 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



**QA15\_H77** During the time that you have been uninsured, have you tried to find health insurance on your own?

在您沒有保險的那段時間內，您是否曾經嘗試自己尋找醫療保險？

**AH75**

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

**QA15\_H78** Were you covered by health insurance at any time during the past 12 months?

您在過去 12 個月中的任何時間內有沒有享受過醫療保險？

**AI27**

YES .....1 **[GO TO QA15\_H80]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_H79** How long has it been since you last had health insurance?

您上一次有醫療保險到現在已經有多長時間？

**AI28**

MORE THAN 12 MONTHS AGO, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO QA15\_H82]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO QA15\_H82]**  
 NEVER HAD HEALTH INSURANCE .....3 **[GO TO QA15\_H82]**  
 REFUSED ..... -7 **[GO TO QA15\_H82]**  
 DON'T KNOW ..... -8 **[GO TO QA15\_H82]**

**QA15\_H80** For how many months out of the last 12 months did you have health insurance?

在過去 12 個月內，您有多少個月有醫療保險？

**AI29**

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

\_\_\_\_\_ MONTHS [HR: 0-12] **[IF 0, THEN GO TO PN QA15\_H82]**

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

**QA15\_H81** During that time when you had health insurance, was your insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?  
 在您的醫療保險的那段時間內，您的保險是 Medi-Cal、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

**AI30**

**[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 QA15\_H82:**

**IF ARINSURE ≠ 1 OR QA15\_H70 = 2 OR ARDIRECT = 1 OR QA15\_H81 = (5, 6) OR QA15\_H71 = (5, 6) OR ARHBEX = 1 OR SPHBEX = 1; THEN CONTINUE WITH QA15\_H82;  
 ELSE GO TO PROGRAMMING NOTE QA15\_H99**

**QA15\_H82** In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?  
 在過去 12 個月中，您是否曾經嘗試直接從保險公司或 HMO 或透過 Covered California 購買醫療保險計劃？

**AH103h**

YES .....	1	
NO .....	2	<b>[GO TO QA15_H99]</b>
REFUSED .....	-7	<b>[GO TO QA15_H99]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_H99]</b>

**QA15\_H83** 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？

**AH110h**

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	<b>[GO TO QA15_H86]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_H86]</b>

**PROGRAMMING NOTE QA15\_H84:****IF QA15\_H83 = 1; THEN CONTINUE WITH QA15\_H84;****IF QA15\_H83 = 3; THEN CONTINUE WITH QA15\_H84 AND DISPLAY “First, think about your experience trying to purchase insurance directly from an insurance company or HMO.”****ELSE GO TO PROGRAMMING NOTE QA15\_H88;****QA15\_H84** {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

{首先，請考慮您在嘗試直接從保險公司或 HMO 購買保險時的經歷。}

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

找到一項您需要的保賠範圍的計劃有多困難？您認為是.....

**AH98h**

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

**QA15\_H85** 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.....

**AH99h**

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

**QA15\_H86** Did anyone help you find a health plan?

是否有人幫助您尋找醫療保險計劃？

**AH100h**

YES .....	1	
NO .....	2	[GO TO PN QA15-H88]
REFUSED .....	-7	[GO TO PN QA15-H88]
DON'T KNOW .....	-8	[GO TO PN QA15-H88]

**QA15\_H87** Who helped you?  
是誰幫助您的？

**AH101h**

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

**PROGRAMMING NOTE QA15\_H88:**

**IF QA15\_H83 = 2; THEN CONTINUE WITH QA15\_H88;**

**IF QA15\_H83 = 3; THEN CONTINUE WITH QA15\_H88 AND DISPLAY “Now, think about your experience with Covered California.”**

**ELSE GO TO PROGRAMMING NOTE QA15\_H92;**

**QA15\_H88** {Now, think about your experience with Covered California.}  
{現在，請想一想您與 Covered California 交往的經歷。}  
How difficult was it to find a plan with the coverage you needed through Covered California? Was it...  
透過 Covered California 找到一項您需要的承保計劃難度有多大？是.....

**AH111h**

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

**QA15\_H89** 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.....

**AH112h**

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

**QA15\_H90** Did anyone help you find a health plan?  
是否有人幫助您找到一項保健計劃？

**AH113h**

YES .....	1	
NO .....	2	[GO TO QA15_H92]
REFUSED .....	-7	[GO TO QA15_H92]
DON'T KNOW .....	-8	[GO TO QA15_H92]

**QA15\_H91** Who helped you?  
是誰幫助您的？

**AH114h**

BROKER .....	1
FAMILY MEMBER / FRIEND .....	2
INTERNET .....	3
CERTIFIED ENROLLMENT COUNSELOR .....	4
OTHER (SPECIFY: _____) .....	92
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_H92** Did you have all the information you felt you needed to make a good decision on a health plan?  
您是否有您認為幫助作出有關保健計劃的良好決定所需的所有資訊？

**AH115h**

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

**PROGRAMMING NOTE QA15\_H93:**

**IF QA15\_G8 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QA15\_H93;  
ELSE GO TO QA15\_H94;**

**QA15\_H93** Were you able to get information about your health plan options in your language?  
您是否能夠用您自己的語言獲得有關您的保健計劃選擇的資訊？

**AH116h**

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

**QA15\_H94** 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？

**AH117h**

VERY IMPORTANT .....	1
SOMEWHAT IMPORTANT .....	2
NOT IMPORTANT .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_H95** Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?  
 從某一位特定的醫生處接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要？

**AH118h**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_H96** 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？

**AH119h**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_H97** 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？

**AH120h**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_H98:**

IF QA15\_H23 = 1 THEN DISPLAY "Bronze"  
 ELSE IF QA15\_H23 = 2 THEN DISPLAY "Silver"  
 ELSE IF QA15\_H23 = 3 THEN DISPLAY "Gold"  
 ELSE IF QA15\_H23 = 4 THEN DISPLAY "Platinum"  
 ELSE IF QA15\_H23 = 6 THEN DISPLAY "Minimum coverage"  
 ELSE DISPLAY " ";

**QA15\_H98** 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？

**AH121h**

COST .....1  
 SPECIFIC DOCTOR .....2  
 SPECIFIC HOSPITAL.....3  
 CHOICE OF DOCTORS IN NETWORK.....4  
 OTHER (SPECIFY: \_\_\_\_\_)..... 92  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_H99:**

IF QA15\_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA15\_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA15\_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA15\_B41 = 1 (HOSPITALIZED FOR HEART DISEASE) THEN GO TO PROGRAMMING NOTE QA15\_H100;  
 ELSE CONTINUE WITH QA15\_H99

**QA15\_H99** During the past 12 months, were you a patient in a hospital overnight or longer?  
 在過去十二個月內，您是否曾經因病住院一天或以上？

**AH14**

YES .....1  
 NO .....2 [GO TO QA15\_H101]  
 REFUSED ..... -7 [GO TO QA15\_H101]  
 DON'T KNOW ..... -8 [GO TO QA15\_H101]

**PROGRAMMING NOTE QA15\_H100:**

IF ARINSURE ≠ 1 OR QA15\_H73 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS), THEN CONTINUE WITH QA15\_H100;  
 ELSE GO TO PROGRAMMING NOTE QA15\_H101

**QA15\_H100** Was any of that hospital care paid for by Medi-Cal?  
 那次醫院護理的任何費用是由 Medi-Cal 支付的嗎？

**AH76**

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

**PROGRAMMING NOTE FOR QA15\_H101:**

**IF [ARINSURE  $\neq$  1 OR QA15\_H73 > 0 (HAD NO INSURANCE FOR AT LEAST 1 MONTH OUT OF PAST 12 MONTHS)] AND QA15\_A5 = 2 (FEMALE) AND [QA15\_E1 = 1 (PREGNANT) OR SC14A = 1 (R IS PARENT OR LEGAL GUARDIAN FOR ANY CHILD IN ROSTER UNDER 1 YEAR OLD)] CONTINUE WITH QA15\_H101; ELSE SKIP TO PROGRAMMING NOTE QA15\_I1**

**QA15\_H101** During the last 12 months, did you get prenatal care that you didn't have to pay for?  
在過去十二個月中，您是否曾經接受免費產前護理？

**AH77**

YES .....	1	
NO .....	2	[GO TO PN QA15_I1]
REFUSED .....	-7	[GO TO PN QA15_I1]
DON'T KNOW .....	-8	[GO TO PN QA15_I1]

**QA15\_H102** Was it paid for by Medi-Cal?  
這是由 Medi-Cal 付費的嗎？

**AH78**

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



## Section I – Child and Adolescent Health Insurance

**PROGRAMMING NOTE QA15\_I1:**  
**IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QA15\_I39 TO ASK ABOUT SELECTED ADOLESCENT;**  
**IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE QA15\_I2;**  
**ELSE CONTINUE WITH QA15\_I1**

**QA15\_I1**      These next questions are about health insurance (CHILD) may have.  
 Does (CHILD) have the same insurance as you?  
 以下是關於(CHILD)可能有的健康保險的問題。  
 (CHILD) 的保險是否與您的保險相同?

**CF10A**

YES .....	1	<b>[GO TO QA15_I19]</b>
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QA15\_I1:**  
**IF QA15\_I1 = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AREMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AREMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AREMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AREMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND AROTHR = 1, SET CHOTHR = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**  
**IF QA15\_I1 = 1 AND ARIHS = 1, SET CHIHS = 1**  
**IF QA15\_I1 = 1 AND ARHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;**

**PROGRAMMING NOTE QA15\_I2:****IF SPINSURE ≠ 1, THEN SKIP TO QA15\_I3;****ELSE IF QA15\_I1 = 2 AND ARSAMESP = 1, THEN SKIP TO QA15\_I3;****ELSE CONTINUE WITH QA15\_I2****QA15\_I2**Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/  
PARTNER NAME}?

(CHILD) 的保險是否與{您配偶/您伴侶/SPOUSE NAME/ PARTNER NAME} 的保險相同?

**MA1**

YES .....1      **[GO TO QA15\_I19]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA15\_I2:****IF QA15\_I2 = 1 AND SPMPCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMPPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPOTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPOTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPIHS = 1, SET CHIHS = 1****IF QA15\_I2 = 1 AND SPHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND SPSAMECH=1;****IF QA15\_I2 = 1 AND SPARPAR = 1, THEN SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH = 1****QA15\_I3**

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

{他/她} 目前是否享受 Medi-CAL (加州醫療保健計劃) 的保險?

**CF1****[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]****[IF NEEDED, SAY: 「Medi-CAL 是為某些低收入家庭的兒童及其家人、孕婦、殘障人士或年長者提供的一項計畫。」]**

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

**POST-NOTE QA15\_I3:****IF QA15\_I3 = 1, SET CHMCAL = 1 AND SET CHINSURE = 1**

**QA15\_I4** Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?  
(CHILD) 是否通過您或其他人的工作或工會享受醫療保險或管理式保健組織 (HMO) 計劃？

**CF3**

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

YES .....	1	
NO .....	2	[GO TO PN QA15_I6]
REFUSED .....	-7	[GO TO PN QA15_I6]
DON'T KNOW .....	-8	[GO TO PN QA15_I6]

**POST-NOTE QA15\_I4:**

**IF QA15\_I4 = 1, SET CHEMP = 1 AND CHINSURE = 1**

**QA15\_I5** Is this plan through an employer, through a union, or through Covered California's SHOP program?  
這項計劃是透過雇主、工會、還是 Covered California 的 SHOP 計劃購買的？

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

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

**AI90**

EMPLOYER .....	1
UNION .....	2
SHOP / COVERED CALIFORNIA .....	3
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**POST-NOTE FOR QA15\_I5:**

**IF QA15\_I5 = 3, THEN SET CHHBEX = 1**

**PROGRAM NOTE QA15\_I6:**

**IF CHINSURE = 1 THEN GO TO QA15\_I8;  
ELSE CONTINUE WITH QA15\_I6**

**QA15\_I6** Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?  
(CHILD)是否享受您直接從保險公司或 HMO 或透過 Covered California 購買的醫療保險計劃的承保？

**CF4**

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

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

YES .....	1	
NO .....	2	[GO TO PN QA15_I13]
REFUSED .....	-7	[GO TO PN QA15_I13]
DON'T KNOW .....	-8	[GO TO PN QA15_I13]

**POST-NOTE QA15\_I6:**  
**IF QA15\_I6 = 1, SET CHDIRECT = 1 AND CHINSURE = 1**

**PROGRAMMING NOTE QA15\_I7:**  
**IF CHDIRECT = 1, THEN CONTINUE WITH QA15\_I7;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I8**

**QA15\_I7** How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
 您是如何購買這項保健計劃的 — 是直接從保險公司或 HMO 購買還是透過 Covered California 購買？

**AI91**

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

**POST-NOTE FOR QA15\_I7:**  
**IF QA15\_I7 = 2, THEN SET CHHBEX = 1**

**PROGRAMMING NOTE QA15\_I8**  
**IF CHHBEX = 1, THEN CONTINUE WITH QA15\_I8;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I10;**

**QA15\_I8** Was this a bronze, silver, gold or platinum plan?  
 這是銅、銀、金還是白金計劃？

**AI92**

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

**PROGRAMMING NOTE QA15\_I9**  
**IF CHHBEX = 1 AND CHDIRECT = 1, THEN CONTINUE WITH QA15\_I9;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I10;**

**QA15\_I9** Was there a subsidy or discount on the premium for this plan?  
 這項計劃的保費是否有補貼或折扣？

**AI93**

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

**PROGRAMMING NOTE QA15\_I10:**  
**IF CHEMP = 1 (EMPLOYER-BASED COVERAGE) OR CHDIRECT = 1 (PURCHASED OWN COVERAGE),**  
**CONTINUE WITH QA15\_I10;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_14**

**QA15\_I10** Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.  
 您是否支付(CHILD)的保健計劃的任何或全部保費或費用? 請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

**AI54**

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

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

[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

**QA15\_I11** Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?  
 是否有任何其他人, 例如雇主、工會或專業機構, 支付(CHILD)的保健計劃的全部或部份保費或費用?

**AI50**

YES .....	1	
NO .....	2	[GO TO PN QA15_I13]
REFUSED .....	-7	[GO TO PN QA15_I13]
DON'T KNOW .....	-8	[GO TO PN QA15_I13]

**QA15\_I12** Who else pays all or some portion of the cost for (CHILD)'s health plan?  
還有誰支付(CHILD)保健計劃的全部或部份費用?

**AI51**

**[CODE ALL THAT APPLY.]**

CURRENT EMPLOYER .....1  
FORMER EMPLOYER .....2  
UNION.....3  
SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4  
SPOUSE'S/PARTNER'S FORMER EMPLOYER....5  
PROFESSIONAL/FRATERNAL ORGANIZATION...6  
MEDICAID/MEDI-CAL ASSISTANCE .....7  
COVERED CALIFORNIA..... 10  
OTHER..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QA15\_I12:**

**IF QA15\_I12 = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;**

**IF QA15\_I12 = 7, SET CHMCAL = 1**

**IF QA15\_I12 = 10, SET CHHBEX = 1;**

**PROGRAMMING NOTE QA15\_I13:**

**IF CHINSURE = 1, GO TO PN QA15\_I19;**

**ELSE CONTINUE WITH QA15\_I13**

**QA15\_I13** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

{他/她} 是否享受 CHAMPUS/CHAMP VA, TRICARE, VA, 或其它軍隊醫療護理計劃?

**CF6**

YES .....1 **[GO TO PN QA15\_I19]**  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**POST-NOTE QA15\_I13:**

**IF QA15\_I13 = 1, SET CHMILIT = 1 AND CHINSURE = 1**

**QA15\_I14** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Healthy Kids, or something else?  
{他/她}是否享受其他政府醫療保險計劃，例如 AIM、Mister MIP、Healthy Kids 或其他計劃？

**CF7**

**[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program."]**

**[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」]**

AIM .....	1	<b>[GO TO PN QA15_I19]</b>
"MISTER MIP"/MRMIP .....	2	<b>[GO TO PN QA15_I19]</b>
HEALTHY KIDS .....	3	<b>[GO TO PN QA15_I19]</b>
NO OTHER PLAN .....	4	
SOMETHING ELSE (SPECIFY: _____) ..	91	<b>[GO TO PN QA15_I19]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QA15\_I14:**

**IF QA15\_I14 = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1**

**QA15\_I15** 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？

**CF8**

YES .....	1	
NO .....	2	<b>[GO TO PN QA15_I18]</b>
REFUSED .....	-7	<b>[GO TO PN QA15_I18]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_I18]</b>

**QA15\_I16** What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?

{他/她}有哪一種健康保險？此保險來自Medi-CAL加州醫療輔助計劃、雇主或工會、還是來自其它來源？

**CF9**

**[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 QA15\_I16:**

IF QA15\_I16 = 1, SET CHEMP = 1 AND CHINSURE = 1  
IF QA15\_I16 = 2, SET CHEMP = 1 AND CHINSURE = 1  
IF QA15\_I16 = 3, SET CHDIRECT = 1 AND CHINSURE = 1  
IF QA15\_I16 = 4, SET CHMCARE = 1 AND CHINSURE = 1  
IF QA15\_I16 = 5, SET CHMCAL = 1 AND CHINSURE = 1  
IF QA15\_I16 = 7, SET CHMILIT = 1 AND CHINSURE = 1  
IF QA15\_I16 = 8, SET CHIHS = 1  
IF QA15\_I16 = 10, SET CHHBEX = 1 AND CHINSURE = 1  
IF QA15\_I16 = 11, SET CHHBEX = 1 AND CHINSURE = 1  
IF QA15\_I16 = 91, SET CHOTHGOV = 1 AND CHINSURE = 1  
IF QA15\_I16 = 92, SET CHOTHER = 1 AND CHINSURE = 1  
IF QA15\_I16 = -7 OR -8, SET CHINSURE = 1

**PROGRAMMING NOTE QA15\_I17:**

IF QA15\_I16 = 4 (CHILD HAS MEDICARE), CONTINUE WITH QA15\_I17;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_I18

**QA15\_I17** Just to verify, you said that (CHILD) gets health insurance through Medicare?

我只是要確定一下，您說過 (CHILD) 有從聯邦醫療保險(Medicare) 獲得醫療保險？

**CF9VER**

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



**PROGRAMMING NOTE QA15\_I18:**  
**IF CHINSURE ≠ 1 CONTINUE WITH QA15\_I18;**  
**ELSE GO TO QA15\_I19;**

**QA15\_I18** What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?  
 (CHILD) 沒有加入加州醫療輔助計劃 (Medi-CAL) 的一個主要原因是什麼？

**CF1A**

PAPERWORK TOO DIFFICULT .....1  
 DIDN'T KNOW IF ELIGIBLE .....2  
 INCOME TOO HIGH, NOT ELIGIBLE .....3  
 NOT ELIGIBLE DUE TO CITIZENSHIP/  
 IMMIGRATION STATUS .....4  
 OTHER NOT ELIGIBLE .....5  
 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 QA15\_I19:**  
**IF QA15\_I1 = 1 AND ARMCARE = 1 AND QA15\_H9 = 1, THEN QA15\_I19 = QA15\_H9 AND QA15\_I21 =**  
**QA15\_H10 AND SKIP TO QA15\_I22;**  
**ELSE IF QA15\_I1 = 1, THEN QA15\_I19 = QA15\_H60 AND QA15\_I21 = QA15\_H62 AND QA15\_I22 =**  
**QA15\_H63 AND GO TO PN QA15\_I23;**  
**ELSE IF CHINSURE = 1, THEN CONTINUE WITH QA15\_I19;**  
**ELSE GO TO PN QA15\_I23**

**QA15\_I19** Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?  
 (CHILD)參加的保健計劃是 HMO (即健康維護機構計劃) 嗎？

**MA3**

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

**[IF NEEDED, SAY: "HMO 表示「健康維護機構」。在 HMO 計劃中, {他/她}必須使用網路內的醫生及醫院的服務。除非是急診, 如果{他/她}在網路外醫生或醫院處接受服務, 計劃通常不支付服務費。"]**

YES .....1 **[GO TO QA15\_I21]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I20:**  
**IF CHMCAL = 1 (CHILD HAS MEDI-CAL), GO TO QA15\_I21;**  
**ELSE CONTINUE WITH QA15\_I20;**

**QA15\_I20** Is (CHILD)'s health plan a PPO or EPO?  
 (CHILD) 的保健計劃是一項 PPO 計劃還是 EPO 計劃？

**AI115**

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

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

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

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

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

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

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

**QA15\_I21** What is the name of (CHILD)'s main health plan?  
 (CHILD) 參加的主要健康計劃的名稱是什麼？

**MA2**

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

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: (CHILD) 是否有保險卡或註明計劃名稱的其他文件？"]

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

**QA15\_I22** Is (CHILD) covered for prescription drugs?  
計劃是否支付 (CHILD) 的處方藥品？

**CF14**

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

**PROGRAMMING NOTE FOR QA15\_I23:**  
**IF (ARINSURE ≠ 1 OR QA15\_I1 ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN**  
**CONTINUE WITH QA15\_I23;**  
**ELSE SKIP TO PROGRAMMING NOTE QA15\_I28**

**QA15\_I23** Does (CHILD)'s health plan have a deductible that is more than \$1,000?  
(CHILD) 的健康保險計劃是否有超過 1,000 美元的免賠額？

**AI79**

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

**[IF NEEDED, SAY: 「免賠額是指您的醫療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 QA15_I25]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO QA15_I25]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE FOR QA15\_I24:**  
**IF CHEMP = 1, THEN CONTINUE WITH QA15\_I24;**  
**ELSE GO TO QA15\_I25**

**QA15\_I24** Does (CHILD)'s health plan have a deductible that is more than \$2,000?  
 (CHILD) 的醫療保險計劃是否有超過 2,000 美元的免賠額？

**AI85**

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

**[IF NEEDED, SAY: 「免賠額是指您的醫療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	<b>[GO TO PN QA15_I26]</b>
NO .....	2	
YES, ONLY WHEN GO OUT OF NETWORK .....	3	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_I25** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$2,000?  
 (CHILD) 的醫療保險計劃對於所有受保人是否有超過 2,000 美元的免賠額？

**AI80**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....	1	
NO .....	2	<b>[GO TO PN QA15_I27]</b>
YES, ONLY WHEN GO OUT OF NETWORK .....	3	<b>[GO TO PN QA15_I27]</b>
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE FOR QA15\_I26:**  
**IF CHEMP = 1, THEN CONTINUE WITH QA15\_I26;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I27**

**QA15\_I26** Does (CHILD)'s health plan have a deductible for all covered persons that is more than \$4,000?  
 (CHILD)的醫療保險計劃對於所有受保人是否有超過 4,000 美元的免賠額？

**AI86**

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

**[IF NEEDED, SAY: "免賠額是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  
 YES, ONLY WHEN GO OUT OF NETWORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I27:**  
**IF (QA15\_I23 = 1 OR 3) OR (QA15\_I24 = 1 OR 3) OR (QA15\_I25 = 1 OR 3), CONTINUE WITH QA15\_I27;**  
**ELSE SKIP TO PROGRAMMING NOTE QA15\_I28**

**QA15\_I27** Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?  
 您是否有可以用於支付 (CHILD)的醫療費用的特殊帳戶或資金？

**AI81**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts."]**

**[IF NEEDED, SAY: "帳戶有時稱為健康儲蓄帳戶 (HSA)、健康補償帳戶 (HRA) 或其他類似的帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療資金或選擇資金，這些帳戶與雇主提供的靈活開支帳戶不同。"]**

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

**PROGRAMMING NOTE QA15\_I28:**  
**IF CHINSURE = 1, GO TO QA15\_I33;**  
**ELSE CONTINUE WITH QA15\_I28**

**QA15\_I28** What is the one main reason (CHILD) does not have any health insurance?  
 (CHILD) 沒有醫療保險的一個主要原因是什麼？

**CF18**

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

**QA15\_I29** Was (CHILD) covered by health insurance at any time during the past 12 months?  
 (CHILD) 是否在過去 12 個月中的任何時間享受醫療保險？

**CF20**

YES .....1 **[GO TO QA15\_I31]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_I30** How long has it been since (CHILD) last had health insurance?  
 (CHILD) 上一次有醫療保險到現在已經有多長時間？

**CF21**

MORE THAN 12 MONTHS, BUT NOT  
 MORE THAN 3 YEARS AGO .....1 **[GO TO PN QA15\_I39]**  
 MORE THAN 3 YEARS AGO .....2 **[GO TO PN QA15\_I39]**  
 NEVER HAD HEALTH INSURANCE COVERAGE ..3 **[GO TO PN QA15\_I39]**  
 REFUSED ..... -7 **[GO TO PN QA15\_I39]**  
 DON'T KNOW ..... -8 **[GO TO PN QA15\_I39]**

**QA15\_I31** 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?

**CF22**

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

\_\_\_\_\_ MONTHS [HR: 0-12]

**[IF 0, THEN GO TO PN QA15\_I39]**

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_I32** During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?  
在(CHILD) 有醫療保險期間, {他的/她的}保險是 Medi-Cal、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃?

**CF23**

**[CIRCLE ALL THAT APPLY]**

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

**[PROBE: 「還有任何其他計劃嗎? 」]**

MEDI-CAL .....1 **[GO TO PN QA15\_I39]**

THROUGH CURRENT OR FORMER EMPLOYER

UNION.....3 **[GO TO PN QA15\_I39]**

PURCHASED DIRECTLY.....5 **[GO TO PN QA15\_I39]**

COVERED CALIFORNIA.....6 **[GO TO PN QA15\_I39]**

OTHER HEALTH PLAN..... 91 **[GO TO PN QA15\_I39]**

REFUSED ..... -7 **[GO TO PN QA15\_I39]**

DON'T KNOW ..... -8 **[GO TO PN QA15\_I39]**

**QA15\_I33** 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, (CHILD) 在過去 12 個月中, 是不是都是享受同一種保險?

**CF24**

YES .....1 **[GO TO PN QA15\_I39]**

NO.....2

HAD SAME INSURANCE SINCE BIRTH

(FOR CHILDREN LESS THAN ONE YEAR OLD) ...3 **[GO TO PN QA15\_I39]**

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_I34** When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?

當 {他/她} 沒有享受{他的/她的} 目前的醫療保險計劃時, {他/她} 有沒有其它任何醫療保險?

**CF25**

YES .....1

NO.....2 **[GO TO QA15\_I36]**

REFUSED ..... -7 **[GO TO QA15\_I36]**

DON'T KNOW ..... -8 **[GO TO QA15\_I36]**



**QA15\_I35**

Was this other health insurance Medi-CAL, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

該其他醫療保險是 Medi-CAL、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California 購買的計劃還是其他計劃？

**CF26****[CODE ALL THAT APPLY.]****[PROBE: "Any others?"]**

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

**QA15\_I36**

During the past 12 months, was there any time when {he/she} had no health insurance at all?  
 在過去 12 個月中，{他/她} 有沒有任何時間完全沒有醫療保險？

**CF27**

YES .....1  
 NO .....2 **[GO TO PN QA15\_I39]**  
 REFUSED ..... -7 **[GO TO PN QA15\_I39]**  
 DON'T KNOW ..... -8 **[GO TO PN QA15\_I39]**

**QA15\_I37**

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？

**CF28****[IF < 1 MONTH, ENTER "1"]**

\_\_\_\_\_ MONTHS [RANGE: 1-12]

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

**QA15\_I38** What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?  
 在(CHILD) 沒有保險的日子裡, {他/她} 沒有醫療保險的一個主要原因是什麼?

**CF29**

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

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

**PROGRAMMING NOTE QA15\_I39:**

**IF NO TEEN SELECTED, GO TO PN QA15\_I78;  
 IF ARINSURE = 1, CONTINUE WITH QA15\_I39;  
 IF ARINSURE = 0, GO TO PN QA15\_I40;  
 ELSE CONTINUE WITH QA15\_I39**

**QA15\_I39** 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 {you/ADULT RESPONDENT NAME}?  
 (TEEN) 的保險是否與 {您/ADULT RESPONDENT NAME} 的保險相同?

**IA10A**

YES .....1 **[GO TO QA15\_I58]**  
 NO .....2  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA15\_I39:**

**IF QA15\_I39 = 1 AND ARM CARE = 1, SET TEM CARE = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND ARM CAL = 1, SET TEM CAL = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AREMPOW = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AREMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND AROTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;  
 IF QA15\_I39 = 1 AND ARIHS = 1, SET TEIHS = 1  
 IF QA15\_I39 = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;  
 PROGRAMMING NOTE QA15\_I40:**

IF SPINSURE ≠ 1 THEN SKIP TO QA15\_I41;  
 ELSE IF QA15\_I39 = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE QA15\_I41;  
 ELSE CONTINUE WITH QA15\_I40

**QA15\_I40** Does (TEEN) have the same insurance as your spouse?  
 (TEEN) 的保險是否與您配偶的保險相同?

**MA5**

YES .....1 [GO TO QA15\_I58]  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA15\_I40:**

IF QA15\_I40 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SEMPAPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPIHS = 1, SET TEIHS = 1  
 IF QA15\_I40 = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;  
 IF QA15\_I40 = 1 AND SPAPAR = 1, THEN SET CHOTHER = 1 AND SET CHINSURE = 1 AND SPSAMECH = 1

**PROGRAMMING NOTE QA15\_I41:**

IF CHINSURE ≠ 1, THEN SKIP TO QA15\_I42;  
 ELSE IF (QA15\_I39 = 2 AND ARSAMECH = 1) OR (QA15\_I40 = 2 AND SPSAMECH = 1), THEN SKIP TO QA15\_I42;  
 ELSE CONTINUE WITH QA15\_I41;

**QA15\_I41** Does (TEEN) have the same insurance as (CHILD)?  
 (TEEN) 的保險是否與(CHILD) 的保險相同?

**MA6**

YES .....1 [GO TO PN QA15\_I72]  
 NO .....2  
 REFUSED .....-7  
 DON'T KNOW .....-8

**POST-NOTE QA15\_I41:**

IF QA15\_I41 = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;  
 IF QA15\_I41 = 1 AND CHIHS = 1, SET TEIHS = 1;  
 IF QA15\_I41 = 1 AND CHOTHER = 1, SET TEOTHER = 1;  
 IF QA15\_I41 = 1 AND CHHBEX = 1, SET TEHBEX = 1

**QA15\_I42** Is {he/she} currently covered by Medi-CAL?  
{他/她} 目前是否享受 Medi-CAL (加州醫療保健計劃) 的保險?

**IA1**

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

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

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

**POST-NOTE QA15\_I42:**

**IF QA15\_I42 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1**

**QA15\_I43** Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?  
(TEEN) 有沒有享受通過您或其他人的工作或工會提供的醫療保險計劃或管理式保健組織計劃 (HMO)?

**IA3**

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

YES .....1  
NO .....2 [GO TO QA15\_I45]  
REFUSED ..... -7 [GO TO QA15\_I45]  
DON'T KNOW ..... -8 [GO TO QA15\_I45]

**POST-NOTE QA15\_I43:**

**IF QA15\_I43 = 1, SET TEEMP = 1 AND SET TEINSURE = 1**

**QA15\_I44** 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?

**AI94**

[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 QA15\_I44:**

**IF QA15\_I44 = 3, THEN SET TEHBEX = 1**

**PROGRAMMING NOTE QA15\_I45:**  
**IF TEINSURE = 1 THEN GO TO QA15\_I46;**  
**ELSE CONTINUE WITH QA15\_I45**

**QA15\_I45** Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO?  
 (TEEN) 是否享受您直接從保險公司或 HMO 購買的醫療保險計劃的承保？

**IA4**

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

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

YES .....	1	
NO .....	2	<b>[GO TO PN QA15_I52]</b>
REFUSED .....	-7	<b>[GO TO PN QA15_I52]</b>
DON'T KNOW .....	-8	<b>[GO TO PN QA15_I52]</b>

**POST-NOTE QA15\_I45:**  
**IF QA15\_I45 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1**

**PROGRAMMING NOTE QA15\_I46:**  
**IF TEDIRECT = 1, THEN CONTINUE WITH QA15\_I46;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I47**

**QA15\_I46** How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?  
 您是如何購買這項保健計劃的 — 是直接從保險公司或 HMO 購買還是透過 Covered California 購買？

**AI95**

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

**POST-NOTE FOR QA15\_I46:**  
**IF QA15\_I46 = 2, THEN SET TEHBEX = 1**

**PROGRAMMING NOTE QA15\_I47**

**IF TEHBEX = 1, THEN CONTINUE WITH QA15\_I47;  
ELSE GO TO PROGRAMMING NOTE QA15\_I49;**

**QA15\_I47** Was this a bronze, silver, gold or platinum plan?  
這是銅、銀、金還是白金計劃？

**AI96**

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

**PROGRAMMING NOTE QA15\_I48**

**IF QA15\_I44 = 3, THEN GO TO PN QA15\_I49;  
ELSE CONTINUE WITH QA15\_I48;**

**QA15\_I48** 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？

**AI97**

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

**PROGRAMMING NOTE QA15\_I49:**

**IF TEEMP = 1 (EMPLOYER-BASED COVERAGE) OR TEDIRECT = 1 (PURCHASED OWN COVERAGE),  
CONTINUE WITH QA15\_I49;  
ELSE GO TO PROGRAMMING NOTE QA15\_I52**

**QA15\_I49**

Do you pay any or all of the premium or cost for (TEEN)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.

您是否支付(TEEN)的保健計劃的任何或全部保費或費用? 請勿包括您或您的家庭可能需要支付的任何共付款或自付額。

**AI55**

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

**[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

**QA15\_I50**

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?

**AI52**

YES .....1  
NO .....2 **[GO TO PN QA15\_I52]**  
REFUSED ..... -7 **[GO TO PN QA15\_I52]**  
DON'T KNOW ..... -8 **[GO TO PN QA15\_I52]**

**QA15\_I51** 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?

**AI53**

**[CODE ALL THAT APPLY.]**

CURRENT EMPLOYER .....1  
 FORMER EMPLOYER .....2  
 UNION.....3  
 SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4  
 SPOUSE'S/PARTNER'S FORMER EMPLOYER.....5  
 PROFESSIONAL/FRATERNAL ORGANIZATION...6  
 MEDICAID/MEDI-CAL ASSISTANCE .....7  
 COVERED CALIFORNIA..... 10  
 OTHER..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**POST-NOTE QA15\_I51:**

**IF QA15\_I51 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;**

**IF QA15\_I51 = 7, SET TEMCAL = 1;**

**IF QA15\_I51 = 10, SET TEHBEX =1;**

**PROGRAMMING NOTE QA15\_I52:**

**IF TEINSURE = 1, GO TO PROGRAMMING NOTE QA15\_I57;**

**ELSE CONTINUE WITH QA15\_I52**

**QA15\_I52** Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health care?

{他/她} 是否享受 CHAMPUS/CHAMP VA, TRICARE, VA, 或其它軍隊醫療護理計劃?

**IA6**

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

**[GO TO PN QA15\_I58]**



**POST-NOTE QA15\_I52:**  
**IF QA15\_I52 = 1, SET TEMILIT = 1 AND SET TEINSURE = 1**

**QA15\_I53** Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, Healthy Kids or something else?  
 {他/她}是否享有其他政府醫療保險計劃，例如AIM、Mister MIP、Family PACT、Healthy Kids或其他計劃？

**IA7**

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

[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。」]

AIM .....	1	[GO TO PN QA15_I58]
"MISTER MIP"/MRMIP .....	2	[GO TO PN QA15_I58]
Family PACT .....	3	[GO TO PN QA15_I58]
HEALTHY KIDS .....	4	[GO TO PN QA15_I58]
NO OTHER PLAN .....	5	
SOMETHING ELSE (SPECIFY: _____) ..	91	[GO TO PN QA15_I58]
REFUSED .....	-7	
DON'T KNOW .....	-8	

**POST-NOTE QA15\_I53:**  
**IF QA15\_I53 = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1**

**QA15\_I54** 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？

**IA8**

YES .....	1	
NO .....	2	[GO TO PN QA15_I58]
REFUSED .....	-7	[GO TO PN QA15_I58]
DON'T KNOW .....	-8	[GO TO PN QA15_I58]

**QA15\_I55** What type of health insurance does {he/she} have? Does it come through Medi-CAL, an employer or union, or from some other source?  
 {他/她}有哪一種健康保險？此保險是透過Medi-CAL（加州醫療保健計劃）、僱主或工會獲得的、還是從某些其它來源獲得的？

IA9
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[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僱主/工會、學校、專業協會、同業團體、其他機構還是直接向保健計劃獲得這項計劃的？"]

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: 「還有任何其它計劃嗎？」]

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 QA15\_I55:**

IF QA15\_I55\_1 = 1, SET TEEMP = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_2 = 1, SET TEEMP = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_3 = 1, SET TEDIRECT = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_4 = 1, SET TEMCARE = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_5 = 1, SET TEMCAL = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_7 = 1, SET TEMILIT = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_8 = 1, SET TEIHS = 1;  
 IF QA15\_I55 = 10, SET TEHBEX = 1 AND TEINSURE = 1;  
 IF QA15\_I55 = 11, SET TEHBEX = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_91 = 1, SET TEOTHGOV = 1 AND TEINSURE = 1;  
 IF QA15\_I55\_92 = 1, SET TEOTHER = 1 AND TEINSURE = 1;  
 IF QA15\_I55 = -7 OR -8, SET TEINSURE = 1

**PROGRAMMING NOTE QA15\_I56:**

**IF QA15\_I55 = 4 (TEEN HAS MEDICARE), CONTINUE WITH QA15\_I56;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_I57**

**QA15\_I56** Just to verify, you said that (TEEN) gets health insurance through Medicare?  
我只要確定一下，您說過 (TEEN) 有從聯邦醫療保險(Medicare) 獲得醫療保險？

**IA9VER**

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

**PROGRAMMING NOTE QA15\_I57:**

**IF TEINSURE ≠ 1 CONTINUE WITH QA15\_I57;  
ELSE GO TO QA15\_I58;**

**QA15\_I57** What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?  
{ TEEN} 沒有加入加州醫療輔助計劃 ( Medi-CAL ) 的一個主要原因是什麼？

**IA1A**

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

**PROGRAMMING NOTE QA15\_I58:**

IF QA15\_I39 = 1 AND ARMCARE = 1 AND QA15\_H9 = 1, THEN QA15\_I58 = QA15\_H9 AND QA15\_I60 = QA15\_H10 AND SKIP TO QA15\_I61;  
 ELSE IF QA15\_I39 = 1, THEN QA15\_I58 = QA15\_H60 AND QA15\_I60 = QA15\_H62 AND QA15\_I61 = QA15\_H63 AND GO TO PN QA15\_I62;  
 ELSE IF QA15\_I41 = 1, THEN QA15\_I58 = QA15\_I19 AND QA15\_I60 = QA15\_I21 AND QA15\_I61 = QA15\_I22 AND GO TO PN QA15\_I62;  
 ELSE IF TEINSURE = 1, THEN CONTINUE WITH QA15\_I58;  
 ELSE GO TO PROGRAMMING NOTE QA15\_I62

**QA15\_I58** Is (TEEN)'s main health plan an HMO, that is, a Health Maintenance Organization?  
 (TEEN) 參加的 {Medi-Cal} 保健計劃是HMO (健康維護機構計劃) 嗎?

**MA8**

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

[IF NEEDED, SAY: "HMO 表示「健康維護機構」。在 HMO 計劃中, {他/她} 必須使用網路內的醫生及醫院的服務。除非是急診, 如果{他/她}在網路外醫生或醫院處接受服務, 計劃通常不支付服務費。"]

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her} MAIN health plan."]

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

YES .....	1	[GO TO QA15_I60]
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA15\_I59:**  
**IF TEMCAL = 1 (TEEN HAS MEDI-CAL), GO TO QA15\_I60;**  
**ELSE CONTINUE WITH QA15\_I59;**

**QA15\_I59** Is (TEEN)'s health plan a PPO or EPO?  
 (TEEN) 的保健計劃是一項 PPO 計劃還是 EPO 計劃？

**AI116**

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

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

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

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

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

[IF TEEN HAS MORE THAN ONE HEALTH PLAN, SAY: 「{他的/她的}主要保健計劃。」]

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

**QA15\_I60** What is the name of (TEEN)'s main health plan?  
 (TEEN) 參加的主要保健計劃名稱是什麼？

**MA7**

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

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
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OTHER (SPECIFY: _____) .....	85
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_I61** Is (TEEN) covered for prescription drugs?  
(TEEN) 的計劃是否支付處方藥品？

**IA14**

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

**PROGRAMMING NOTE FOR QA15\_I62:**

**IF [(ARINSURE ≠ 1 OR QA15\_I39 ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN  
CONTINUE WITH QA15\_I62;  
ELSE SKIP TO PN QA15\_I67**

**QA15\_I62** Does (TEEN)'s health plan have a deductible that is more than \$1,000?  
(TEEN) 的健康保險計劃是否有超過 1,000 美元的免賠額？

**AI82**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

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

**[GO TO QA15\_I64]**

**[GO TO QA15\_I64]**

**PROGRAMMING NOTE QA15\_I63:**  
**IF TEEMP = 1, THEN CONTINUE WITH QA15\_I63;**  
**ELSE GO TO QA15\_I61**

**QA15\_I63** Does (TEEN)'s health plan have a deductible that is more than \$2,000?  
 (TEEN) 的醫療保險計劃是否有超過 2,000 美元的免賠額？

**AI87**

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

**[IF NEEDED, SAY: "免賠額是在您的健康保險計劃開始為您的醫療護理付款之前，您必須支付的數額。"]**

YES .....1 **[GO TO PN QA15\_I65]**  
 NO .....2  
 YES, ONLY WHEN GO OUT OF NETWORK .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_I64** Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$2,000?  
 (TEEN) 的健康保險計劃對於所有受保人是否有超過 2,000 美元的免賠額？

**AI83**

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

**[IF NEEDED, SAY: "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 QA15\_I66]**  
 YES, ONLY WHEN GO OUT OF NETWORK .....3 **[GO TO PN QA15\_I66]**  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I65:**  
**IF TEEMP = 1, THEN CONTINUE WITH QA15\_I65;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_I66**

**QA15\_I65** Does (TEEN)'s health plan have a deductible for all covered persons that is more than \$4,000?  
 (TEEN) 的醫療保險計劃對於所有受保人是否有超過 4,000 美元的免賠額？

**AI88**

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

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

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



**PROGRAMMING NOTE QA15\_I66:**

**IF (QA15\_I62 = 1 OR 3) OR (QA15\_I63 = 1 OR 3) OR (QA15\_I64 = 1 OR 3), CONTINUE WITH QA15\_I66;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_I67**

**QA15\_I66**

Do you have a special account or fund you can use to pay for (TEEN)'s medical expenses?  
您是否有可以用於支付(TEEN) 的醫療費用的特殊帳戶或資金？

**AI84**

**[IF NEEDED, SAY: "The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) or other similar accounts. Other account names include Personal care accounts, Personal medical funds, or Choice funds, and are different from employer provided Flexible Spending Accounts."]**

**[IF NEEDED, SAY: "帳戶有時稱為健康儲蓄帳戶 (HSA)、健康補償帳戶 (HRA) 或其他類似的帳戶。其他帳戶名稱包括個人護理帳戶、個人醫療資金或選擇資金，這些帳戶與雇主提供的靈活開支帳戶不同。"]**

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

**PROGRAMMING NOTE QA15\_I67:**

**IF TEINSURE = 1, GO TO QA15\_I72;  
ELSE CONTINUE WITH QA15\_I67**

**QA15\_I67**

What is the one main reason (TEEN) does not have any health insurance?  
(TEEN) 沒有任何健康保險的一個主要原因是什麼？

**IA18**

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

**QA15\_I68** Was (TEEN) covered by health insurance at any time during the past 12 months?  
(TEEN) 在過去 12 個月中的任何時間是否享受醫療保險？

**IA20**

YES .....	1	<b>[GO TO QA15_I70]</b>
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**QA15\_I69** How long has it been since (TEEN) last had health insurance?  
(TEEN) 從上一次有醫療保險到現在已有多長時間？

**IA21**

MORE THAN 12 MONTHS, BUT NOT MORE THAN 3 YEARS AGO .....	1	<b>[GO TO QA15_I78]</b>
MORE THAN 3 YEARS AGO .....	2	<b>[GO TO QA15_I78]</b>
NEVER HAD HEALTH INSURANCE COVERAGE ..	3	<b>[GO TO QA15_I78]</b>
REFUSED .....	-7	<b>[GO TO QA15_I78]</b>
DON'T KNOW/NOT SURE .....	-8	<b>[GO TO QA15_I78]</b>

**QA15\_I70** 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？

**IA22**

**[INTERVIEWER NOTE: IF LESS THAN ONE MONTH BUT MORE THAN 0 DAYS, ENTER 1]**

_____ MONTHS [HR: 0-12]	<b>[IF 0, THEN GO TO PN QA15_I78]</b>
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_I71** During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?

在(TEEN) 有醫療保險期間，{他的/她的}保險是Medi-Cal、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過Covered California購買的計劃還是其他計劃？

**IA23**

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

MEDI-CAL .....	1	<b>[GO TO QA15_I78]</b>
THROUGH CURRENT OR FORMER EMPLOYER/UNION .....	3	<b>[GO TO QA15_I78]</b>
PURCHASED DIRECTLY .....	5	<b>[GO TO QA15_I78]</b>
COVERED CALIFORNIA.....	6	<b>[GO TO QA15_I78]</b>
OTHER HEALTH PLAN.....	91	<b>[GO TO QA15_I78]</b>
REFUSED .....	-7	<b>[GO TO QA15_I78]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_I78]</b>

**QA15\_I72** Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?  
請想一想{他的/她的} 目前參加的健康保險, (TEEN) 是否在過去十二個月中一直參加這個相同的健康保險計劃?

**IA24**

YES .....1 **[GO TO QA15\_I78]**  
NO .....2  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_I73** When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?  
當 {他/她} 沒有享受{他的/她的} 目前的醫療保險計劃時, {他/她} 有沒有其它任何醫療保險?

**IA25**

YES .....1  
NO .....2 **[GO TO QA15\_I75]**  
REFUSED ..... -7 **[GO TO QA15\_I75]**  
DON'T KNOW ..... -8 **[GO TO QA15\_I75]**

**QA15\_I74** Was this other health insurance Medi-Cal, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?  
該其他醫療保險是Medi-CAL、您透過雇主獲得的計劃、您直接從保險公司購買的計劃、您透過 Covered California購買的計劃還是其他計劃?

**IA26**

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

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

**QA15\_I75** During the past 12 months, was there any time when {he/she} had no health insurance at all?  
在過去 12 個月中, {他/她} 有沒有任何時間完全沒有醫療保險?

**IA27**

YES .....1  
NO .....2 **[GO TO QA15\_I78]**  
REFUSED ..... -7 **[GO TO QA15\_I78]**  
DON'T KNOW ..... -8 **[GO TO QA15\_I78]**

**QA15\_I76** 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?

**IA28**

**[IF < 1 MONTH, ENTER "1"]**

\_\_\_\_\_ MONTHS [RANGE: 1-12]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_I77** What is the one main reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?  
 在(TEEN)不享有保險的期間, {他/她} 沒有任何健康保險的一個主要原因是什麼?

**IA29**

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

CAN'T AFFORD/TOO EXPENSIVE .....1

NOT ELIGIBLE DUE TO WORKING STATUS/

CHANGED EMPLOYER/LOST JOB .....2

NOT ELIGIBLE DUE TO HEALTH OR OTHER

PROBLEMS .....3

NOT ELIGIBLE DUE TO CITIZENSHIP/

IMMIGRATION STATUS .....4

FAMILY SITUATION CHANGED .....5

DON'T BELIEVE IN INSURANCE .....6

SWITCHED INSURANCE COMPANIES, DELAY

BETWEEN .....7

CAN GET HEALTH CARE FOR FREE/PAY FOR

OWN CARE .....8

OTHER (SPECIFY: \_\_\_\_\_). 91

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I78:**

**IF NOT ANSWERED IN SECTION H (AH103h = -1 AND KAH103h = -1), THEN CONTINUE;**

**[IF CHILD SELECTED]**

**IF CHINSURE ≠ 1 OR QA15\_I29 = 2 OR QA15\_I34 = 2 OR QA15\_I36 = 1 OR QA15\_I32 = (5, 6) OR QA15\_I35 = (5, 6) OR CHHBEX = 1 OR CHDIRECT = 1; THEN CONTINUE WITH QA15\_I78;**

**[IF TEEN SELECTED]**

**IF TEINSURE ≠ 1 OR QA15\_I68 = 2 OR QA15\_I73 = 2 OR QA15\_I75 = 1 OR QA15\_I71 = (5, 6) OR QA15\_I74 = (5, 6) OR TEHBEX = 1 OR TEDIRECT = 1; THEN CONTINUE WITH QA15\_I78;**

**ELSE GO TO PROGRAMMING NOTE QA15\_I95**

**QA15\_I78** In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?  
在過去 12 個月中，您是否曾經嘗試直接從保險公司或 HMO 或透過 Covered California 購買醫療保險計劃？

**AH103i**

YES .....	1	
NO .....	2	[GO TO PN QA15_I95]
REFUSED .....	-7	[GO TO PN QA15_I95]
DON'T KNOW .....	-8	[GO TO PN QA15_I95]

**QA15\_I79** 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？

**AH110i**

DIRECTLY FROM AN INSURANCE		
COMPANY OR HMO, OR .....	1	
THROUGH COVERED CALIFORNIA, OR .....	2	
BOTH, FROM AN INSURANCE COMPANY,		
AND THROUGH COVERED CALIFORNIA .....	3	
REFUSED .....	-7	[GO TO PN QA15_I82]
DON'T KNOW .....	-8	[GO TO PN QA15_I82]

**PROGRAMMING NOTE QA15\_I80:****IF QA15\_I79 = 1; THEN CONTINUE WITH QA15\_I80;****IF QA15\_I79 = 3; THEN CONTINUE WITH QA15\_I80 AND DISPLAY “First, think about your experience trying to purchase insurance directly from an insurance company or HMO.”****ELSE GO TO PROGRAMMING NOTE QA15\_I84;**

**QA15\_I80** {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}

{首先，請考慮您在嘗試直接從保險公司或 HMO 購買保險時的經歷。}

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

找到一項您需要的保賠範圍的計劃有多困難？您認為是.....

**AH98i**

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

**QA15\_I81** 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.....

**AH99i**

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

**QA15\_I82** Did anyone help you find a health plan?

是否有人幫助您尋找醫療保險計劃？

**AH100i**

YES .....	1	
NO .....	2	[GO TO PN QA15_I84]
REFUSED .....	-7	[GO TO PN QA15_I84]
DON'T KNOW .....	-8	[GO TO PN QA15_I84]

**QA15\_I83** Who helped you?  
是誰幫助您的？

**AH101i**

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

**PROGRAMMING NOTE QA15\_I84:**

**IF QA15\_I79 = 2; THEN CONTINUE WITH QA15\_I84;**

**IF QA15\_I79 = 3; THEN CONTINUE WITH QA15\_I84 AND DISPLAY “Now, think about your experience with Covered California.”**

**ELSE GO TO PROGRAMMING NOTE QA15\_I88;**

**QA15\_I84** {Now, think about your experience with Covered California.}  
{現在，請想一想您與 Covered California 交往的經歷。}

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

透過 Covered California 找到一項您需要的承保計劃難度有多大？是.....

**AH111i**

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

**QA15\_I85** How difficult was it to find a plan you could afford? Was it...  
找到一項您能負擔得起的計劃難度有多大？是.....

**AH112i**

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

**QA15\_I86** Did anyone help you find a health plan?  
是否有人幫助您尋找醫療保險計劃？

**AH113i**

YES .....	1	
NO .....	2	[GO TO QA15_I88]
REFUSED .....	-7	[GO TO QA15_I88]
DON'T KNOW .....	-8	[GO TO QA15_I88]

**QA15\_I87** Who helped you?  
是誰幫助您的？

**AH114i**

BROKER .....	1
FAMILY MEMBER / FRIEND .....	2
INTERNET .....	3
CERTIFIED INSURANCE AGENTS .....	4
OTHER (SPECIFY: _____) .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_I88** Did you have all the information you felt you needed to make a good decision on a health plan?  
您是否有您認為幫助作出有關保健計劃的良好決定所需的所有資訊？

**AH115i**

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

**PROGRAMMING NOTE QA15\_I89:**  
**IF QA15\_G8 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QA15\_I89;**  
**ELSE GO TO QA15\_I90;**

**QA15\_I89** Were you able to get information about your health plan options in your language?  
您是否能夠用您自己的語言獲得有關您的保健計劃選擇的資訊？

**AH116i**

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

**QA15\_I90** 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？

**AH117i**

VERY IMPORTANT .....	1
SOMEWHAT IMPORTANT .....	2
NOT IMPORTANT .....	3
REFUSED .....	-7
DON'T KNOW .....	-8



**QA15\_I91** Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?  
 從某一位特定的醫生處接受護理服務在您選擇計劃時是十分重要、較為重要還是不重要？

**AH118i**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_I92** 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？

**AH119i**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**QA15\_I93** 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？

**AH120i**

VERY IMPORTANT .....1  
 SOMEWHAT IMPORTANT.....2  
 NOT IMPORTANT .....3  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I94:**

IF QA15\_I8 = 1 OR QA15\_I47 = 1, THEN DISPLAY "Bronze"  
 ELSE IF QA15\_I8 = 2 OR QA15\_I47 = 2, THEN DISPLAY "Silver"  
 ELSE IF QA15\_I8 = 3 OR QA15\_I47 = 3, THEN DISPLAY "Gold"  
 ELSE IF QA15\_I8 = 4 OR QA15\_I47 = 4, THEN DISPLAY "Platinum"  
 ELSE IF QA15\_I8 = 6 OR QA15\_I47 = 6, THEN DISPLAY "Minimum coverage"  
 ELSE DISPLAY " ";

**QA15\_I94**

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？

**AH121i**

COST .....1  
 SPECIFIC DOCTOR .....2  
 SPECIFIC HOSPITAL.....3  
 CHOICE OF DOCTORS IN NETWORK.....4  
 OTHER (SPECIFY: \_\_\_\_\_). 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_I95:**  
**IF NO TEEN SELECTED, GO TO SECTION J;**  
**IF QA15\_A5 = 1 (R IS MALE), DISPLAY “mother”;**  
**IF QA15\_A5 = 2 (R IS FEMALE), DISPLAY “father”;**

**QA15\_I95** In what country was (TEEN)'s {mother/father} born?  
 (TEEN)的{母親/父親}是在哪個國家出生的?

**AI56**

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

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

**PROGRAMMING NOTE QA15\_I96:**

**IF QA15\_I95 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), SKIP TO SECTION J;**

**ELSE CONTINUE WITH QA15\_I96;**

**IF QA15\_A5 = 1 (R IS MALE), DISPLAY “mother”;**

**IF QA15\_A5 = 2 (R IS FEMALE), DISPLAY “father”**

**QA15\_I96** Does (TEEN)'s {mother/father} now live in the U.S.?  
{TEEN} 的{母親/父親}目前住在美國嗎?

**AI57**

YES .....1  
NO .....2  
MOTHER/FATHER DECEASED .....3  
MOTHER/FATHER NEVER LIVED IN US .....4  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_I97:**

**IF QA15\_A5 = 1 (R IS MALE), DISPLAY “mother”;**

**IF QA15\_A5 = 2 (R IS FEMALE), DISPLAY “father”;**

**IF QA15\_I96 = 3 (MOTHER/FATHER DECEASED), DISPLAY “Was”;**

**ELSE DISPLAY “Is”**

**QA15\_I97** {Is/Was} (TEEN)'s {mother/father} a citizen of the United States?  
(TEEN) 的{母親/父親}是美國公民嗎?

**AI58**

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

YES .....1 **[GO TO PN QA15\_I99]**  
NO .....2  
APPLICATION PENDING .....3  
REFUSED .....-7  
DON'T KNOW .....-8

**PROGRAMMING NOTE QA15\_I98:**

IF QA15\_A5 = 1 (R IS MALE), DISPLAY "mother";  
 IF QA15\_A5 = 2 (R IS FEMALE), DISPLAY "father";  
 IF QA15\_I96 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";  
 ELSE DISPLAY "Is"

**QA15\_I98** {Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?  
 (TEEN)的{母親/父親}是持有綠卡的永久居民嗎?

**AI59**

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

[IF NEEDED, SAY: "人們通常將永久居民卡稱為「綠卡」，但永久居民卡的顏色可能是粉紅色、藍色或白色。"]

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

**PROGRAMMING NOTE QA15\_I99:****IF QA15\_A5 = 1 (R IS MALE), DISPLAY "mother";****IF QA15\_A5 = 2 (R IS FEMALE), DISPLAY "father"****QA15\_I99** About how many years has (TEEN)'s {mother/father} lived in the United States?

{TEEN } 的母親在美國已居住大約多少年?

(TEEN)的{母親/父親}在美國已居住大約多少年?

**AI60****[IF < 1 YEAR, ENTER "1"]**

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

\_\_\_\_\_ YEAR FIRST COME AND LIVE IN U.S.

MOTHER/FATHER DECEASED .....3

MOTHER/FATHER NEVER LIVED IN US .....4

REFUSED ..... -7

DON'T KNOW ..... -8

## Section J – Health Care Utilization and Access

### PROGRAMMING NOTE QA15\_J1:

IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY “Now, I’d like to ask about the health care YOU receive”;

ELSE BEGIN QUESTION WITH “During the past 12 months, how many times have you seen a medical doctor”

**QA15\_J1** {Now, I’d like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor}?

{現在，我想提出幾個有關您所接受的健康護理的問題。} 在過去 12 個月中，您看過幾次醫生？

**AH5**

\_\_\_\_\_ TIMES [HR: 0-365]

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA15\_J2:

IF QA15\_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH QA15\_J2;

ELSE GO TO PROGRAMMING NOTE QA15\_J3

**QA15\_J2** About how long has it been since you last saw a doctor about your own health?

自從您上次就自身的健康狀況去看醫生以來到現在已經有多長時間？

**AH6**

ONE YEAR AGO OR LESS.....0

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

MORE THAN 2 UP TO 5 YEARS AGO .....2

MORE THAN 5 YEARS AGO .....3

NEVER .....4

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_J3:**  
**IF QA15\_J2 = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO PROGRAMMING NOTE QA15\_J4;**  
**ELSE CONTINUE WITH QA15\_J3**

**QA15\_J3** About how long has it been since you last saw a doctor or medical provider for a routine check-up?  
 自從您上次接受醫生或其他醫療提供者的常規體檢以來大約有多長時間了？

**AJ114**

**[IF NEEDED: A routine check-up is a visit not for an illness or problem. This visit may include questions about health behaviors such as smoking.]**

**[IF NEEDED, SAY: 「常規體檢指並非因生病或病症而接受的門診檢查。該常規體檢可能包括有關健康行為（例如抽煙）的問題。」]**

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

**PROGRAMMING NOTE QA15\_J4:**  
**IF QA15\_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA15\_J4;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_J5**

**QA15\_J4** Do you have a personal doctor or medical provider who is your main provider?  
 您是否有一位作為您的主要服務提供者的個人醫生或醫療服務提供者？

**AJ77**

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

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

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



**PROGRAMMING NOTE QA15\_J5:**  
**IF QA15\_J4 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QA15\_J5;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_J7**

**QA15\_J5** How often does your doctor or medical provider listen carefully to you? Would you say...  
 您的醫生或醫療服務提供者仔細聽您敘述的頻率有多高？您認為是.....

**AJ112**

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

**QA15\_J6** How often does your doctor or medical provider explain clearly what you need to do to take care of your health? Would you say...  
 您的醫生或醫療服務提供者明確地向您解釋如何護理自身健康的頻率有多高？您認為是.....

**AJ113**

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

**PROGRAMMING NOTE QA15\_J7:**

**IF ARINSURE = 1 OR AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA15\_J7;**

**ELSE GO TO PROGRAMMING NOTE QA15\_J9;**

**IF QA15\_J4 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY “your”;**

**ELSE DISPLAY “a”;**

**QA15\_J7** Please tell me yes or no. In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?  
在過去 12 個月中，您是否曾經因為生病或受傷嘗試預約在兩天內看醫生或醫療服務提供者？

**AJ102**

**[IF NEEDED, SAY: Do not include urgent care or emergency care visits. I am only asking about appointments.]**

**[IF NEEDED, SAY: 「請勿包括緊急護理或急診護理就診。我只是詢問有關普通預約就診的情況。」]**

YES .....	1	
NO .....	2	<b>[GO TO QA15_J9]</b>
REFUSED .....	-7	<b>[GO TO QA15_J9]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_J9]</b>

**QA15\_J8** How often were you able to get an appointment within two days? Would you say...  
能夠在兩天內為您安排就診的頻率有多高？您認為是.....

**AJ103**

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

**QA15\_J9** During the past 12 months, did you receive care from a doctor or health professional through a video or telephone conversation rather than an office visit?  
過去 12 個月裡，您是否通過視頻或者電話而不是辦公室會面，來獲得醫生或者其他健康從業人員的護理？

**AJ152**

**[IF NEEDED, SAY: “Do not include calls about appointments or prescription refills. Do not include calls made to a nurse helpline.”]**

**[IF NEEDED, SAY: 請不要包括預約就診或再次領取處方藥物。不包括護士熱線。]**

YES .....	1	
NO .....	2	<b>[GO TO QA15_J11]</b>
REFUSED .....	-7	<b>[GO TO QA15_J11]</b>
DON'T KNOW .....	-8	<b>[GO TO QA15_J11]</b>

**QA15\_J10** Was this care for a skin or eye problem, an emotional or mental health problem, or some other health problem?  
此護理是因為皮膚或眼睛問題、情緒或心理健康問題、還是其他健康問題嗎？

**AJ153**

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]

[PROBE: "還有其他問題嗎?"]

SKIN PROBLEM .....1  
EYE PROBLEM .....2  
MENTAL OR EMOTIONAL HEALTH PROBLEM.....3  
OTHER HEALTH PROBLEM  
(SPECIFY: \_\_\_\_\_) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_J11:**

IF QA15\_J1 > 0 OR QA15\_J2 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO),  
CONTINUE WITH QA15\_J11;

ELSE GO TO PROGRAMMING NOTE QA15\_J16

**QA15\_J11** The last time you saw a doctor, did you have a hard time understanding the doctor?  
您上次看醫生時，是否很難聽懂醫生說的話？

**AJ8**

YES .....1 [GO TO PN QA15\_J13]  
NO .....2  
REFUSED ..... -7 [GO TO QA15\_J16]  
DON'T KNOW ..... -8 [GO TO QA15\_J16]

**PROGRAMMING NOTE QA15\_J12:**

IF QA15\_J11 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT  
CONDUCTED IN ENGLISH OR QA15\_G7 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)],  
CONTINUE WITH QA15\_J12;

SET AJ50ENGL = ENGLSPAN TO STORE INTERVIEW LANGUAGE AT TIME QA15\_J12 WAS ASKED;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_J16

**QA15\_J12** In what language did the doctor speak to you?  
您的醫生用哪一種語言與您交談？

**AJ50**

ENGLISH .....1 [GO TO QA15\_J14]  
SPANISH .....2 [GO TO PN QA15\_J16]  
CANTONESE.....3 [GO TO PN QA15\_J16]  
VIETNAMESE .....4 [GO TO PN QA15\_J16]  
TAGALOG.....5 [GO TO PN QA15\_J16]  
MANDARIN .....6 [GO TO PN QA15\_J16]  
KOREAN .....7 [GO TO PN QA15\_J16]  
ASIAN INDIAN LANGUAGES.....8 [GO TO PN QA15\_J16]  
RUSSIAN .....9 [GO TO PN QA15\_J16]  
OTHER (SPECIFY: \_\_\_\_\_)..... 91 [GO TO PN QA15\_J16]  
REFUSED ..... -7 [GO TO PN QA15\_J16]  
DON'T KNOW ..... -8 [GO TO PN QA15\_J16]

**QA15\_J13** Was this because you and the doctor spoke different languages?  
這是不是因為您和醫生講的是不同的語言?

**AJ9**

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

**QA15\_J14** Did you need someone to help you understand the doctor?  
您是否需要有人幫助您聽懂醫生的話?

**AJ10**

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

[GO TO PN QA15\_J16]

[GO TO PN QA15\_J16]

[GO TO PN QA15\_J16]

**QA15\_J15** Who was this person who helped you understand the doctor?  
是誰幫助您聽懂醫生說的話?

**AJ11**

**[IF R RESPONDS "MY CHILD," PROBE TO SEE IF CHILD IS UNDER AGE 18. IF AGE 18 OR MORE, CODE AS "ADULT FAMILY MEMBER".]**

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

**PROGRAMMING NOTE QA15\_J16:**

**IF QA15\_G8 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH QA15\_J16;  
ELSE GO TO PROGRAMMING NOTE QA15\_J17**

**QA15\_J16** In California, you have the right to get help from an interpreter for free during your medical visits.  
Did you know this before today?  
在加州，您有權在就診時獲得免費口譯服務。您在今天之前是否知道這項服務？

**AJ105**

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

**PROGRAMMING NOTE QA15\_J17:**

**IF [ARINSURE = 1 OR QA15\_H78 = 1 (HAD INSURANCE AT LEAST 1 MONTH DURING THE PAST 12 MONTHS)] AND QA15\_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA15\_J17;  
ELSE GO TO QA15\_J19**

**QA15\_J17** In the past 12 months, did you change where you usually go for health care?  
在過去十二個月內，您是否曾經改變通常接受醫療護理的地點？

**AJ106**

YES .....	1	
NO .....	2	[GO TO QA15_J19]
REFUSED .....	-7	[GO TO QA15_J19]
DON'T KNOW .....	-8	[GO TO QA15_J19]

**QA15\_J18** Did you have to change because of your health insurance plan?  
您是不是因為醫療保險計劃的原因而改變？

**AJ107**

[IF NEEDED, SAY: "Did you have to change where you usually go for health care because of a reason related to your health insurance plan?"]

[IF NEEDED, SAY: 「您是否因與您的醫療保險計劃相關的原因不得不改變通常接受醫療護理的地點？」]

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

**QA15\_J19** During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?  
在過去 12 個月中，您有沒有延遲或沒有去拿醫生為您開的藥？

**AH16**

YES .....	1	
NO .....	2	[GO TO QA15_J21]
REFUSED .....	-7	[GO TO QA15_J21]
DON'T KNOW .....	-8	[GO TO QA15_J21]

**QA15\_J20** Was cost or lack of insurance a reason why you delayed or did not get the prescription?  
醫療費用或沒有保險是不是您延遲或沒有領取處方藥物的一個原因？

**AJ19**

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

**QA15\_J21** During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?  
 在過去十二個月中，您有沒有延遲或沒有接受任何您認為必要的醫療護理——例如看醫生、專科醫生或其他健康護理專業人員？

**AH22**

YES .....	1	
NO .....	2	[GO TO QA15_J26]
REFUSED .....	-7	[GO TO QA15_J26]
DON'T KNOW .....	-8	[GO TO QA15_J26]

**QA15\_J22** Did you get the care eventually?  
 您最終接受了護理嗎？

**AJ129**

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

**QA15\_J23** Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?  
 醫療費用或沒有保險是不是您延遲或沒有獲得您認為自己需要的醫療護理的一個原因？

**AJ20**

YES .....	1	
NO .....	2	[GO TO QA15_J25]
REFUSED .....	-7	[GO TO QA15_J25]
DON'T KNOW .....	-8	[GO TO QA15_J25]

**QA15\_J24** Was that the main reason?  
 這是主要原因嗎？

**AJ130**

YES .....	1	[GO TO PN QA15_J26]
NO .....	2	
REFUSED .....	-7	[GO TO PN QA15_J26]
DON'T KNOW .....	-8	[GO TO PN QA15_J26]

**QA15\_J25** What was the one main reason why you delayed getting the care you felt you needed?  
您延遲接受您認為自己需要的護理的一個最主要原因是什麼？

**AJ131**

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

**QA15\_J26** The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.  
接下來是有關專科醫生的問題。專科醫生是指外科醫生、心臟病醫生、過敏醫生、皮膚科醫生和其他針對某個健康護理領域的專科醫生。

In the past 12 months, did you or a doctor think you needed to see a medical specialist?  
在過去十二個月中，您或醫生是否曾認為您應當去看專科醫生

**AJ136**

[IF NEEDED: Do not include dental visits.]  
[IF NEEDED, SAY: 「請不要包括牙科門診。」]

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

**PROGRAMMING NOTE QA15\_J27:**  
**IF QA15\_J26 = 1 (NEEDED A MEDICAL SPECIALIST) CONTINUE WITH QA15\_J27;**  
**ELSE GO TO QA15\_J30**

**QA15\_J27** During the past 12 months, did you have any trouble finding a medical specialist who would see you?  
在過去十二個月中，您是否有任何困難找到一位能夠為您看病的專科醫生？

**AJ137**

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

**QA15\_J28** During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?  
 在過去十二個月中， 是否有專科醫生診所告訴您他們不願接受您作為他們的新病人？

**AJ138**

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

**PROGRAMMING NOTE QA15\_J29:**

**IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA15\_J29;  
 ELSE SKIP TO QA15\_J30**

**QA15\_J29** During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?  
 在過去十二個月中， 是否有專科醫生辦公室告訴您他們不接受您的主要健康保險？

**AJ139**

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

**QA15\_J30** Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?  
 現在是有關全科醫生的問題。在過去十二個月中， 您是否有任何困難尋找一位為您看病的全科醫生？

**AJ133**

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

**QA15\_J31** During the past 12 months, did a doctor's office tell you that they would not take you as a new patient?  
 在過去十二個月中， 是否有醫生診所告訴您他們不願接受您作為他們的新病人？

**AJ134**

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



**PROGRAMMING NOTE QA15\_J32:****IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA15\_J32;****ELSE SKIP TO QA15\_J33**

**QA15\_J32** During the past 12 months, did a doctor's office tell you that they would not take your main health insurance?

在過去十二個月中，是否有醫生診所告訴您他們不願接受您的主要醫療保險？

**AJ135**

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

**QA15\_J33** Have you ever used the Internet?

您是否曾經使用過互聯網？

**AJ108**

**[INTERVIEWER NOTE: THIS INCLUDES SENDING OR RECEIVING EMAIL, USING FACEBOOK, TWITTER, ETC. INCLUDE USING A COMPUTER, PHONE, TABLET, OR ANY OTHER ELECTRONIC DEVICE FOR ACCESSING THE INTERNET.]**

YES .....1  
 NO .....2 **[GO TO QA15\_J35]**  
 REFUSED .....-7 **[GO TO QA15\_J35]**  
 DON'T KNOW .....-8 **[GO TO QA15\_J35]**

**QA15\_J34** In the past 12 months, did you use the internet to look for health or medical information? 在過去十二個月中，您是否曾經使用過互聯網來查找健康或醫療信息？

**AJ109**

**[IF NEEDED, SAY: "Include information about disease symptoms, diet, or nutrition, physical activity, healthcare providers, and health insurance plans."]**

**[IF NEEDED, SAY: "請包括關於疾病症狀、飲食、營養、體力活動、醫療服務提供商和醫療保險計劃的信息。"]**

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

**PROGRAMMING NOTE QA15\_J35:**

**IF QA15\_A5 = 1 (MALE) OR AGE >44 YEARS OLD THEN GO TO PN QA15\_J41;  
ELSE CONTINUE WITH QA15\_J35;**

**QA15\_J35** During the past 12 months, have you received counseling or information about birth control from a doctor or medical provider?  
在過去十二個月中，您是否曾接受過醫生或醫療提供者有關避孕的諮詢或資訊？

**AJ140**

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

**QA15\_J36** During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor or medical provider?  
在過去十二個月中，您是否曾接受過醫生或醫療提供者建議的避孕方法或開出的避孕處方藥？

**AJ141**

**[INTERVIEWER NOTE: CODE 'YES' IF R MENTIONS VASECTOMY OF PARTNER]**

YES .....1  
NO .....2 **[GO TO QA15\_J39]**  
REFUSED ..... -7 **[GO TO QA15\_J39]**  
DON'T KNOW ..... -8 **[GO TO QA15\_J39]**

**QA15\_J37** What MAIN birth control method or prescription did you receive?  
您曾接受過哪一種主要的避孕方法或領取過哪一種處方藥？

**AJ142**

**[INTERVIEWER NOTE: IF MORE THAN ONE METHOD, ASK: "Which method did you receive most recently?"]**

**[INTERVIEWER NOTE: IF TWO METHODS WERE RECEIVED AT THE SAME TIME, MARK THE ONE THAT APPEARS FIRST ON THE LIST BELOW.]**

TUBAL LIGATION (TUBES TIED OR CUT) .....1  
VASECTOMY (MALE STERILIZATION) .....2  
IUD (MIRENA, PARAGARD) .....3  
IMPLANT (IMPLANON, NEXPLANON) .....4  
BIRTH CONTROL PILLS .....5  
OTHER HORMONAL METHODS  
(INJECTION/DEPO-PROVERA, PATCH,  
VAGINAL RING/NUVA RING) .....6  
CONDOMS (MALE) .....7  
OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_J38** Where did you receive the main birth control method or prescription?  
您是從哪裡接受主要避孕方法或領取處方藥的？

**AJ143**

PRIVATE DOCTOR'S OFFICE.....1  
HMO FACILITY .....2  
HOSPITAL OR HOSPITAL CLINIC .....3  
PLANNED PARENTHOOD.....4  
COUNTY HEALTH DEPARTMENT, FAMILY  
PLANNING CLINIC, COMMUNITY CLINIC.....5  
SCHOOL OR SCHOOL-BASED CLINIC .....6  
EMPLOYER OR COMPANY CLINIC.....7  
INDIAN HEALTH SERVICE.....8  
PHARMACY.....9  
SOME OTHER PLACE (SPECIFY: \_\_\_\_\_) . 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_J39:**

IF QA15\_E1 = 1 (PREGNANT), GO TO QA15\_J44;

IF QA15\_A5 = 2 (FEMALE) AND IF QA15\_D18 = 2 (GAY, LESBIAN, OR HOMOSEXUAL), GO TO QA15\_J44;

IF QA15\_J37 = 1 OR 2 (TUBAL LIGATION OR VASECTOMY), GO TO QA15\_J44;

ELSE CONTINUE WITH QA15\_J39

**QA15\_J39** Are you or your male sex partner currently using a birth control method to prevent pregnancy?  
This includes male or female sterilization.  
您或您的男性性伴侶是否採用某種避孕方法避孕？這包括男性或女性絕育。

**AF40**

[IF NEEDED, SAY: "Sterilization includes having your tubes tied, getting a vasectomy, or having an operation so you cannot have children."]

[IF NEEDED SAY: 「絕育包括輸卵管結扎、輸精管切除術或絕育手術，導致你們不能生育。」]

YES.....1  
NO.....2 [GO TO QA15\_J44]  
NO MALE SEXUAL PARTNER .....3 [GO TO QA15\_J44]  
REFUSED ..... -7 [GO TO QA15\_J44]  
DON'T KNOW ..... -8 [GO TO QA15\_J44]

**QA15\_J40** Which birth control method or methods are you using?  
您正在使用哪種避孕方法？

**AJ154**

**[CODE ALL THAT APPLY]**

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

**[PROBE: 「還有任何其他人或機構嗎？」]**

TUBAL LIGATION (TUBES TIED OR CUT) .....1  
 VASECTOMY (MALE STERILIZATION) .....2  
 IUD (MIRENA, PARAGARD) .....3  
 IMPLANT (IMPLANON, NEXPLANON) .....4  
 BIRTH CONTROL PILLS .....5  
 OTHER HORMONAL METHODS  
 (INJECTION/DEPO-PROVERA, PATCH,  
 VAGINAL RING/NUVA RING) .....6  
 CONDOMS (MALE) .....7  
 OTHER (SPECIFY: \_\_\_\_\_) ..... 91  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_J41:**

**IF AGE >44 YEARS OLD OR AA3=2 (FEMALE) THEN GO TO QA15\_J44;  
 ELSE CONTINUE WITH QA15\_J41;**

**QA15\_J41** During the past 12 months, have you received counseling or information about male or female birth control from a doctor or medical provider?  
 在過去十二個月中，您是否曾接受過醫生或醫療提供者有關男性或女性避孕的諮詢或資訊？

**AJ144**

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

**QA15\_J42** During the past 12 months, have you received a male birth control method such as a condoms or vasectomy from a doctor or medical provider?  
 在過去十二個月中，您是否曾接受醫生或醫療提供者有關男性的避孕方法的建議，例如避孕套或輸精管切除術？

**AJ145**

YES .....1  
 NO .....2 **[GO TO QA15\_J44]**  
 REFUSED ..... -7 **[GO TO QA15\_J44]**  
 DON'T KNOW ..... -8 **[GO TO QA15\_J44]**

**QA15\_J43** Where did you receive it?  
您是在哪裡接受的？

**AJ146**

PRIVATE DOCTOR'S OFFICE.....1  
HMO FACILITY .....2  
HOSPITAL OR HOSPITAL CLINIC .....3  
PLANNED PARENTHOOD.....4  
COUNTY HEALTH DEPARTMENT, FAMILY  
PLANNING CLINIC, COMMUNITY CLINIC.....5  
SCHOOL OR SCHOOL-BASED CLINIC .....6  
EMPLOYER OR COMPANY CLINIC.....7  
INDIAN HEALTH SERVICE .....8  
PHARMACY.....9  
SOME OTHER PLACE (SPECIFY: \_\_\_\_\_) . 91  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_J44** These next questions are about dental health.

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

以下是有關牙科健康的幾個問題。

自從你上次看牙醫或前往牙科診所就診以來到現在已經有多長時間？請包括牙科保健員以及各類專科牙醫。

**AG1**

HAVE NEVER VISIT ..... 0 **[GO TO QA15\_J46]**  
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 **[GO TO QA15\_J46]**  
DON'T KNOW ..... -8 **[GO TO QA15\_J46]**

**QA15\_J45** Was it for a routine checkup or cleaning, or was it for a specific problem?

您是去接受常規檢查或洗牙還是因為某一具體問題接受治療？

**AJ167**

ROUTINE CHECKUP OR CLEANING .....1  
SPECIFIC PROBLEM .....2  
BOTH .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_J46** Do you now have any type of insurance that pays for part or all of your dental care?  
您目前是否有任何類型的保險可支付牙科護理的部分或全部費用?

<b>AG3</b>
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YES .....	1
NO .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_J47** How would you describe the condition of your teeth: excellent, very good, good, fair, or poor?  
 您如何描述您的牙齒狀況：極好、很好、較好、一般還是較差？

**AJ168**

EXCELLENT .....1  
 VERY GOOD .....2  
 GOOD .....3  
 FAIR .....4  
 POOR .....5  
 HAS NO NATURAL TEETH .....6  
 DON'T KNOW .....-7  
 REFUSED .....-8

**PROGRAMMING NOTE QA15\_J48:**

**IF QA15\_A12 = 9 (JAPANESE) OR QA15\_A15 = 38 (JAPANESE), THEN CONTINUE WITH QA15\_J48;  
 ELSE GO TO SECTION DM;**

**QA15\_J48** Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:  
 You should return a favor when someone helps you or gives you something. Do you strongly agree, agree, disagree, or strongly disagree?

**AJ155**

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

**QA15\_J49** It's natural that the eldest son inherits the house. Do you strongly agree, agree, disagree, or strongly disagree?

**AJ156**

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

**QA15\_J50** Children should take care of their parents.

**AJ157**

**[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

**QA15\_J51** You should behave in accordance with systems around you.

**AJ158**

[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

**QA15\_J52** Everything will be fine if you do things the way you have always done.

**AJ159**

[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

**QA15\_J53** You tend to ask someone's opinions before taking actions.

**AJ160**

[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

**QA15\_J54** You are nervous about what other people say about you or how they feel about you.

**AJ161**

[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

**QA15\_J55** You should behave hoping that people around you have good impressions of you.



AJ162

[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

QA15\_J56

You are careful about your behaviors and what you wear.

AJ163

[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

QA15\_J57

You do not want to be embarrassed in front of people.

AJ164

[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

QA15\_J58

You are concerned about your appearance.

AJ165

[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

**QA15\_J59** You are careful about not doing something that people may laugh at.

**AJ166**

**[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

## Section DM – Discrimination

**QA15\_DM1** These next questions are about things that have happened to you while receiving medical care. Was there ever a time when you would have gotten better medical care if you had belonged to a different race or ethnic group?

接下來的問題關於您接受醫療服務時發生在您身上的事情。

是否有過這樣的時候 --- 如果您是屬於不同的種族您會接受到更好的醫療服務？

### DMC8

YES .....	1	
NO .....	2	[GO TO QA15_DM3]
REFUSED .....	-7	[GO TO QA15_DM3]
DON'T KNOW .....	-8	[GO TO QA15_DM3]

**QA15\_DM2** Think about the last time this happened. How long ago was that?  
回想上一次發生這種情況的時候。那是多久之前？

### DMC9

A YEAR AGO OR LESS .....	1
MORE THAN 1 UP TO 2 YEARS AGO .....	2
MORE THAN 2 UP TO 3 YEARS AGO .....	3
MORE THAN 3 UP TO 5 YEARS AGO .....	4
MORE THAN 5 UP TO 10 YEARS AGO .....	5
MORE THAN 10 UP TO 20 YEARS AGO .....	6
MORE THAN 20 YEARS AGO .....	7
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_DM3** Over your entire lifetime, how often have you been treated unfairly when getting medical care? Would you say...

有生以來，您有多經常在獲取醫療護理時被不平等對待？

### DMC3

Never, .....	1	[GO TO QA15_K1]
從不, .....	1	[GO TO QA15_K1]
Rarely, .....	2	
很少, .....	2	
Sometimes, or .....	3	
有時, 還是 .....	3	
Often? .....	4	
經常? .....	4	
REFUSED .....	-7	[GO TO QA15_K1]
DON'T KNOW .....	-8	[GO TO QA15_K1]

**QA15\_DM4** Which of these do you think is the main reason why you have been treated unfairly, over your entire lifetime? Was it because of...  
 下面哪項原因您認為是有生以來受到不平等待遇的主要原因？是因為...？

**DMC6B**

Your ancestry or national origin .....	1
您的祖籍或者原國籍 .....	1
Because of your gender or sex .....	2
因為您的性別 .....	2
Because of your race or skin color .....	3
因為您的種族或皮膚顏色 .....	3
Because of your age, or .....	4
因為年齡，還是 .....	4
Because of the way you speak English, or .....	5
因為說英語的方式，還是 .....	5
For some other reason? (Specify: _____) .....	91
其他原因？（註明：） .....	91
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_DM5** Over your entire lifetime, how stressful have these experiences of unfair treatment usually been for you? Would you say...  
 有生以來，這些不公平待遇的經歷給您帶來多大壓力？您認為...

**DMC7**

Not at all stressful.....	1
完全沒壓力 .....	1
A little stressful .....	2
一點點壓力 .....	2
Somewhat stressful, or .....	3
有點壓力，還是 .....	3
Extremely stressful?.....	4
極大壓力？ .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

## Section K – Employment, Income, Poverty Status, Food Security

### PROGRAMMING NOTE QA15\_K1:

IF QA15\_G21 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUSINESS BUT NOT AT WORK) OR QA15\_G23 = 1 (USUALLY WORKS) CONTINUE WITH QA15\_K1;  
ELSE GO TO PROGRAMMING NOTE QA15\_K5

**QA15\_K1** The next questions are about your employment.

以下是有關您的就業問題。

How many hours per week do you usually work at all jobs or businesses?

您在從事的所有的工作或業務中每週通常工作多少小時？

**AK3**

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

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

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_K2** How long have you worked at your main job?

您從事這份主要工作多久了？

**AK7**

[IF NEEDED, SAY: "That is, for your current employer."]

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

\_\_\_\_\_ MONTHS [HR: 0-12]

\_\_\_\_\_ YEARS [HR: 0-50]

REFUSED ..... -7

DON'T KNOW ..... -8

### PROGRAMMING NOTE QA15\_K4:

IF QA15\_G21 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT WORK) OR QA15\_G23 = 1 (USUALLY WORKS), CONTINUE WITH QA15\_K4;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_K5

**QA15\_K4** What is your best estimate of all your earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?

您上個月在所有工作和業務中，包括小時工資、薪水、小費和佣金，稅前和其它扣除額之前的總收入是多少？請提供您的最佳估計數字。

**AK10**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_K5;**

IF QA15\_G29 = [1 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA15\_G30 = 1 (SPOUSE/PARTNER USUALLY WORKS), CONTINUE WITH QA15\_K5 AND:

IF QA15\_G21 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA15\_G23 ≠ 1 (R DOES NOT USUALLY WORK), AND QA15\_A16 = 1 (MARRIED), DISPLAY "The next question is about your spouse's employment."

ELSE IF QA15\_G21 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA15\_G23 ≠ 1 (R DOES NOT USUALLY WORK), AND (QA15\_D20 = 1 OR QA15\_D21 = 1), THEN DISPLAY "The next question is about your partner's employment."

IF QA15\_A16 = 1 THEN DISPLAY "spouse";

ELSE IF QA15\_D20 = 1 OR QA15\_D21 = 1 THEN DISPLAY "partner";

ELSE SKIP TO QA15\_K7

**QA15\_K5** {The next question is about your spouse's employment.}  
{接下來的問題和您配偶的工作有關。}

How many hours per week does your {husband/wife/spouse} usually work at all jobs or businesses?

您的{丈夫/妻子/配偶}在從事的所有的工作或業務中每週通常工作多少小時?

**AK20**

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

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

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_K6:**

IF QA15\_K5 ≠ 0 CONTINUE WITH QA15\_K6;

IF QA15\_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";

ELSE IF QA15\_D20 = 1 OR QA15\_D21 = 1, THEN DISPLAY "partner's";

ELSE GO TO QA15\_K7

**QA15\_K6** What is your best estimate of all your {spouse's/partner's} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?

據您估計，您的{配偶/伴侶}上個月從事所有的工作和業務的收入有多少？這是指在沒有扣除各項稅款和其它扣除額之前的收入，請包括小時工資、薪資、小費和佣金。

**AK10A**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_K7** 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？

**AK22**

[IF NEEDED, SAY: "Include money from jobs, social security, retirement income, unemployment payments, public assistance and so forth. Also include income from interest, dividends, net income from business, farm, or rent and any other money income."]

[IF NEEDED, SAY: 「請包括工作、社會安全、退休收入、失業補助金、公共援助等收入。另外還請包括利息、紅利、業務、農場或租金淨收入以及任何其他資金收入。」]

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7 [GO TO PN QA15\_K9]

DON'T KNOW ..... -8 [GO TO PN QA15\_K9]

**QA15\_K8** PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?

根據我的記錄，您的住戶年收入是 (AMOUNT)。這是否正確？

**AK22A**

YES .....1 [GO TO PN QA15\_K15]

NO .....2 [GO BACK TO QA15\_K7]

**PROGRAMMING NOTE QA15\_K9:**

**IF QA15\_K7 = -7 OR -8 CONTINUE WITH QA15\_K9;**

**ELSE GO TO PROGRAMMING NOTE QA15\_K15**

**QA15\_K9** We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes is more than \$20,000 per year or is it less?  
我們不需要知道詳細的數字，但您可不可以告訴我，你們住戶所有來源的稅前年收入是否超過還是不足 20,000 美元？

**AK11**

MORE .....1 [GO TO QA15\_K11]

EQUAL TO \$20K OR LESS .....2

REFUSED ..... -7 [GO TO PN QA15\_K15]

DON'T KNOW ..... -8 [GO TO PN QA15\_K15]

**QA15\_K10** Is it ...  
是.....

**AK12**

\$5,000 or less,.....	1	[GO TO PN QA15_K15]
\$5,000 或以下, 或 .....	1	[GO TO PN QA15_K15]
\$5,001 to \$10,000, .....	2	[GO TO PN QA15_K15]
\$5,001 到 \$10,000, 或 .....	2	[GO TO PN QA15_K15]
\$10,001 to \$15,000, or .....	3	[GO TO PN QA15_K15]
\$10,001 到 \$15,000, 或 .....	3	[GO TO PN QA15_K15]
\$15,001 to 20,000? .....	4	[GO TO PN QA15_K15]
\$15,001 到 \$20,000? .....	4	[GO TO PN QA15_K15]
REFUSED .....	-7	[GO TO PN QA15_K15]
DON'T KNOW .....	-8	[GO TO PN QA15_K15]

**QA15\_K11** Is it more or less than \$70,000 per year?  
收入每年是否超過還是不足 70,000 美元？

**AK13**

MORE .....	1	[GO TO QA15_K13]
EQUAL TO \$70K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QA15_K15]
DON'T KNOW .....	-8	[GO TO PN QA15_K15]

**QA15\_K12** Is it ...  
是.....

**AK14**

\$20,001 to \$30,000, .....	1	[GO TO PN QA15_K15]
\$20,001 到 \$30,000, .....	1	[GO TO PN QA15_K15]
\$30,001 to \$40,000, .....	2	[GO TO PN QA15_K15]
\$30,001 到 \$40,000, .....	2	[GO TO PN QA15_K15]
\$40,001 to \$50,000, .....	3	[GO TO PN QA15_K15]
\$40,001 到 \$50,000, .....	3	[GO TO PN QA15_K15]
\$50,001 to \$60,000, or .....	4	[GO TO PN QA15_K15]
\$50,001 到 \$60,000, 或 .....	4	[GO TO PN QA15_K15]
\$60,001 to \$70,000? .....	5	[GO TO PN QA15_K15]
\$60,001 到 \$70,000? .....	5	[GO TO PN QA15_K15]
REFUSED .....	-7	[GO TO PN QA15_K15]
DON'T KNOW .....	-8	[GO TO PN QA15_K15]

**QA15\_K13** Is it more or less than \$135,000 per year?  
收入每年是否超過還是不足 135,000 美元？

**AK15**

MORE .....	1	[GO TO PN QA15_K15]
EQUAL TO \$135K OR LESS.....	2	
REFUSED .....	-7	[GO TO PN QA15_K15]
DON'T KNOW .....	-8	[GO TO PN QA15_K15]



**QA15\_K14** Is it ...  
是.....

**AK16**

\$70,001 to \$80,000, .....1  
\$70,001 到 \$80,000, .....1  
\$80,001 to \$90,000, .....2  
\$80,001 到 \$90,000, .....2  
\$90,001 to \$100,000, or .....3  
\$90,001 到 \$100,000, 或 .....3  
\$100,001 to \$135,000? .....4  
\$100,001 到 \$135,000? .....4  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_K15:**  
**IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QA15\_K16;**  
**ELSE CONTINUE WITH QA15\_K15**

**QA15\_K15** Including yourself, how many people living in your household are supported by your total household income?  
包括您自己在內，住在您的住戶裡的多少人需要依靠您的住戶總收入生活？

**AK17**

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

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

**PROGRAMMING NOTE QA15\_K16:**  
**QA15\_K16 MUST BE LESS THAN QA15\_K15;**  
**IF R IS ONLY MEMBER OF HH, GO TO QA15\_K17;**  
**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) =**  
**QA15\_K15 GO TO PROGRAMMING NOTE QA15\_K19;**  
**ELSE CONTINUE WITH QA15\_K16**

**QA15\_K16** How many of these {INSERT NUMBER FROM QA15\_K15} people are children under the age of 18?  
在這{INSERT NUMBER FROM QA15\_K15} 口人中，有多少是 18 歲以下的孩子？

**AK18**

\_\_\_\_\_ NUMBER OF CHILDREN (UNDER AGE 18) [HR: 0-20]

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

**QA15\_K17** Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?  
 是否有住在美國、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？

**AK32**

YES .....1  
 NO .....2 [GO TO PN QA15\_K19]  
 REFUSED ..... -7 [GO TO PN QA15\_K19]  
 DON'T KNOW ..... -8 [GO TO PN QA15\_K19]

**QA15\_K18** How many?  
 有幾個人？

**AK33**

\_\_\_\_\_ NUMBER OF PEOPLE [HR: 1-20]

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

**PROGRAMMING NOTE QA15\_K19:**

OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2011 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA15\_K15 AND QA15\_K16 RESPECTIVELY.

(THE 50%, 133%, 200%, 300%, AND 400% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2012 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 2012" 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 QA15\_K15 OR QA15\_K16 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

**ASCERTAIN IF THE HOUSEHOLD INCOME IS ...**

- 1) AT OR BELOW 50% FPL;
- 2) ABOVE 50% FPL BUT AT OR BELOW 100% FPL;
- 3) ABOVE 100% FPL BUT AT OR BELOW 133% FPL;
- 4) ABOVE 133 % FPL BUT AT OR BELOW 200% FPL;
- 5) ABOVE 200% FPL BUT AT OR BELOW 300% FPL;
- 6) ABOVE 300% FPL BUT AT OR BELOW 400% FPL;
- 7) ABOVE 400% FPL; OR
- 8) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QA15\_K7 ≠ -7 OR -8 THEN GO TO PROGRAMMING NOTE QA15\_K25;

ELSE IF QA15\_K7 = -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12, OR QA15\_K14, ASK QA15\_K19 USING POVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT);

ELSE IF QA15\_K7 = -7 OR -8 (REF/DK) AND IF QA15\_K9 = -7 OR QA15\_K11 = -7 OR QA15\_K13 = -7, GO TO PROGRAMMING NOTE QA15\_K25

ELSE GO TO PROGRAMMING NOTE QA15\_K20

**QA15\_K19** I need to ask just one more question about income.  
 我只需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。

**AK29**

EQUAL TO OR LESS .....	1	[GO TO PN QA15_K25]
MORE .....	2	[GO TO PN QA15_K25]
REFUSED .....	-7	[GO TO PN QA15_K25]
DON'T KNOW .....	-8	[GO TO PN QA15_K25]

**PROGRAMMING NOTE QA15\_K20:**  
 IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12,  
 OR QA15\_K14, THEN CONTINUE WITH QA15\_K20 USING POVRT100 (100% POVERTY CUTOFF DISPLAY  
 AMOUNT);  
 ELSE GO TO PROGRAMMING NOTE QA15\_K21

**QA15\_K20** I need to ask just one or two more questions about income.  
 我想再問您一、兩個收入方面的問題。  
  
 Was your total annual household income before taxes less than or more than \${POVRT100}?  
 您的住戶年度稅前總收入是不足還是超過{POVRT100}美元?

**AK18A**

EQUAL TO OR LESS .....	1	[GO TO PN QA15_K25]
MORE .....	2	[GO TO PN QA15_K25]
REFUSED .....	-7	[GO TO PN QA15_K25]
DON'T KNOW .....	-8	[GO TO PN QA15_K25]

**PROGRAMMING NOTE QA15\_K21:**  
 IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12,  
 OR QA15\_K14, THEN CONTINUE WITH QA15\_K21 USING POVRT133 (133% POVERTY CUTOFF DISPLAY  
 AMOUNT);  
 IF QA15\_K20 WAS NOT ASKED, DISPLAY "I need to ask just one more question about income.";  
 ELSE DISPLAY "Was it";  
 ELSE GO TO PROGRAMMING NOTE QA15\_K22

**QA15\_K21** {I need to ask just one more question about income. Was your total annual household income  
 before taxes/ Was it} less than or more than \${POVRT133}?  
 {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?

**AK30**

EQUAL TO OR LESS .....	1	[GO TO PN QA15_K25]
MORE .....	2	[GO TO PN QA15_K25]
REFUSED .....	-7	[GO TO PN QA15_K25]
DON'T KNOW .....	-8	[GO TO PN QA15_K25]

**PROGRAMMING NOTE QA15\_K22:**

**IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12, OR QA15\_K14, CONTINUE WITH QA15\_K22 USING POVRT200 (200% POVERTY CUTOFF DISPLAY AMOUNT);  
ELSE GO TO PROGRAMMING NOTE QA15\_K23**

**QA15\_K22** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT200}?  
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？

**AK18B**

EQUAL TO OR LESS .....	1	[GO TO PN QA15_K25]
MORE .....	2	[GO TO PN QA15_K25]
REFUSED .....	-7	[GO TO PN QA15_K25]
DON'T KNOW .....	-8	[GO TO PN QA15_K25]

**PROGRAMMING NOTE QA15\_K23:**

**IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12, OR QA15\_K14, CONTINUE WITH QA15\_K23 USING POVRT300 (300% POVERTY CUTOFF DISPLAY AMOUNT);  
ELSE GO TO PROGRAMMING NOTE QA15\_K24**

**QA15\_K23** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT300}?  
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？

**AK18C**

EQUAL TO OR LESS .....	1	[GO TO PN QA15_K25]
MORE .....	2	[GO TO PN QA15_K25]
REFUSED .....	-7	[GO TO PN QA15_K25]
DON'T KNOW .....	-8	[GO TO PN QA15_K25]

**PROGRAMMING NOTE QA15\_K24:**

**IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA15\_K10, QA15\_K12, OR QA15\_K14, THEN CONTINUE WITH QA15\_K24 USING POVRT400 (400% POVERTY CUTOFF DISPLAY AMOUNT);  
ELSE GO TO PROGRAMMING NOTE QA15\_K25**

**QA15\_K24** I need to ask just one more question about income. Was your total annual household income before taxes less than or more than \${POVRT400}?  
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？

**AK31**

EQUAL TO OR LESS .....	1
MORE .....	2
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_K25:**

**IF POVERTY < 5 (HH Income ≤ 200% FPL) OR [8 (HH INCOME NOT KNOWN) AND (INSMD=1 OR ARINSURE ≠ 1)], CONTINUE WITH QA15\_K25;  
ELSE GO TO QA15\_L1**

**PROGRAMMING NOTE QA15\_K25:**

**IF QA15\_K15 = 1, THEN DISPLAY "I",  
ELSE IF QA15\_K15 > 1 DISPLAY "We"**

**QA15\_K25**

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.

以下是有關您們住戶在過去十二個月中所吃的食物以及是否有錢購買所需的食物的問題。

I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months. The first statement is: 我馬上會讀出兩句話，這是一般人針對家庭的食物狀況所說的。請就每一句話告訴我，這是否經常符合、有時符合還是從不符合您和您的住戶在過去十二個月的情況。

"The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."  
第一句話是：「{我/我們} 購買的食物總是不夠，{我/我們} 沒有錢買更多的食物。」

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

這是經常符合、有時符合還是從不符合您和您的住戶在過去十二個月的情況？

**AM1**

OFTEN TRUE .....1  
SOMETIMES TRUE .....2  
NEVER TRUE .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_K26:**

**IF QA15\_K15 = 1, THEN DISPLAY "I",  
ELSE IF QA15\_K15 > 1 DISPLAY "We"**

**QA15\_K26**

The second statement is:

"{I/We} couldn't afford to eat balanced meals."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?

第二句話是：「{我/我們} 沒有錢吃均衡的食物。」

這是經常符合、有時符合還是從不符合您和您的住戶在過去十二個月的情況？

**AM2**

OFTEN TRUE .....1  
SOMETIMES TRUE .....2  
NEVER TRUE .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**QA15\_K27**

Please tell me yes or no. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

請告訴我，在過去 12 個月中，您或住戶中的其他成年人有沒有因為沒有足夠的錢購買食物而減少食物量或減少用餐次數？

**AM3**

YES .....	1	
NO .....	2	[GO TO QA15_K29]
REFUSED .....	-7	[GO TO QA15_K29]
DON'T KNOW .....	-8	[GO TO QA15_K29]

**QA15\_K28**

How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?

這種情況多久會出現一次—幾乎每個月、有的月份但不是每個月、或只是在 1 或 2 個月裡？

**AM3A**

ALMOST EVERY MONTH .....	1
SOME MONTHS BUT NOT EVERY MONTH .....	2
ONLY IN 1 OR 2 MONTHS .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_K29**

In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?

在過去 12 個月中，您有沒有因為沒有足夠的錢購買食物而吃不飽？

**AM4**

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

**QA15\_K30**

In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?

在過去 12 個月中，您有沒有因為買不起足夠的食物而挨餓？

**AM5**

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

## Section L – Public Program Participation

**PROGRAMMING NOTE FOR BEGINNING OF SECTION L: .....**  
**IF HOUSEHOLD INCOME IS  $\leq$  300% FPL (POVERTY = <6) OR [IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) AND (INSMD=1 OR ARINSURE  $\neq$  1)] CONTINUE WITH SECTION L;**  
**ELSE GO TO QA15\_M1TANF/CalWORKs**

**QA15\_L1** Are you now receiving TANF or CalWORKs?  
 您目前在接受 TANF 或 CalWORKS 嗎?

**AL2**

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

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

**PROGRAMMING NOTE QA15\_L2:**  
**IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH QA15\_L2;**  
**ELSE GO TO QA15\_L3;**

**QA15\_L2** Is (TEEN) now receiving TANF or CalWORKs?  
 (TEEN) 目前是否在領取 TANF 或 CalWORKS?

**IAP1**

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

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

**QA15\_L3**

Are you receiving Food Stamp benefits, also known as CalFresh?  
您是否在領糧食券福利？糧食券也稱為 CalFresh。

**AL5**

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

**[IF NEEDED, SAY: 「您可能透過 EBT 卡獲得福利。EBT 表示電子福利轉換卡。又稱作「黃金州優惠卡」。]**

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



**PROGRAMMING NOTE QA15\_L4:**  
**IF ELIGIBLE TEEN IN HOUSEHOLD, CONTINUE WITH QA15\_L4;**  
**ELSE GO TO QA15\_L5**

**QA15\_L4** Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?  
 (TEEN) 是否在領糧食券福利？糧食券福利也稱為 CalFresh。

**IAP2**

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

**[IF NEEDED, SAY: 「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

**QA15\_L5** Are you receiving SSI?  
 您是否在領取 SSI?

**AL6**

**[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security".]**

**[IF NEEDED, SAY: 「SSI 指安全補助收入，這和社會安全金不同。」]**

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

**PROGRAMMING NOTE QA15\_L6:**  
**IF QA15\_A5 = 2 (FEMALE) AND [QA15\_E1 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)]**  
**CONTINUE WITH QA15\_L6;**  
**ELSE GO TO PROGRAMMING NOTE QA15\_L7**

**QA15\_L6** Are you on WIC?  
 您目前是否參加了 WIC?

**AL7**

**[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and children."]**

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

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

**PROGRAMMING NOTE QA15\_L7:**

IF QA15\_D4 = 1 (LEGALLY BLIND) OR QA15\_D11 = 1 (DISABILITY DETERMINATION) OR [AAGE > 64 AND (POVERTY < 5 (HH INCOME ≤ 300% FPL) OR 8 (HH INCOME NOT KNOWN))], CONTINUE WITH QA15\_L7;  
ELSE SKIP TO PROGRAMMING NOTE QA15\_L14;

OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM QA15\_K15.

IF QA15\_K15 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT).

IF QA15\_K15 = 1 DISPLAY \$2000;  
IF QA15\_K15 = 2 DISPLAY \$3000;  
IF QA15\_K15 = 3 DISPLAY \$3150;  
IF QA15\_K15 = 4 DISPLAY \$3300;  
IF QA15\_K15 = 5 DISPLAY \$3450;  
IF QA15\_K15 = 6 DISPLAY \$3600;  
IF QA15\_K15 = 7 DISPLAY \$3750;  
IF QA15\_K15 = 8 DISPLAY \$3900;  
IF QA15\_K15 = 9 DISPLAY \$4050;  
IF QA15\_K15 ≥ 10 DISPLAY \$4200;

IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “your family’s”;  
ELSE DISPLAY “your”

**QA15\_L7** Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?  
不把您擁有的任何房子或汽車計算在內，您認為{您/您家}的資產，也就是說{您/您家}所有的現金、儲蓄、投資的總值，有沒有超過{PROPERTY LIMIT}?

<b>AL9</b>
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YES .....	1	<b>[SKIP TO QA15_L14]</b>
NO .....	2	
REFUSED .....	-7	
DON'T KNOW .....	-8	

**PROGRAMMING NOTE QA15\_L8:**

**IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “does your family”; ELSE DISPLAY “do you”**

**QA15\_L8** About how much {do you/does your family} have in cash, savings, and investments?  
{您/您家} 所有的現金、儲蓄、投資的總值大約是多少？

**AL34**

**[IF NEEDED, SAY: “Again, do not count the value of any house or car you may own.”]**

**[IF NEEDED, SAY: “再說一遍，請不要把您擁有的任何房子或車輛計算在內”]**

**[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]**

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_L9:**

**IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY “does your family”; ELSE DISPLAY “do you”**

**QA15\_L9** Besides your primary car or truck, {do you/does your family} own other cars or trucks?  
除了您主要的車輛或貨車，{您/您家} 還有其他的車輛或貨車嗎？

**AL35**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[SKIP TO QA15\_L12]**

**[SKIP TO QA15\_L12]**

**[SKIP TO QA15\_L12]**

**QA15\_L10** Are these cars or trucks only for personal use? Do not include cars or trucks used for transporting disabled persons or for business purposes.  
這些車輛或貨車是只供個人使用的嗎？不包括用於殘疾人或商用的車或貨車。

**AL36**

YES .....1

NO .....2

REFUSED ..... -7

DON'T KNOW ..... -8

**[GO TO PN QA15\_L12]**

**[GO TO PN QA15\_L12]**

**[GO TO PN QA15\_L12]**

**PROGRAMMING NOTE QA15\_L11:**

**IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family"; ELSE DISPLAY "your";**

**QA15\_L11** Not counting what {you/your family} owe, what is your estimated value of these cars or trucks?  
不包括{您/您家}欠的款，您對這些車輛或貨車估價多少？

**AL37**

[IF NEEDED: Do not include your primary cars or trucks.]

[IF NEEDED: 不包括您主要用的車輛或貨車。]

[IF NEEDED: Do not include cars or trucks used for transporting disabled persons or business purposes.]

[IF NEEDED: 不包括用於殘疾人或商用的車輛或貨車。]

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_L12:**

**IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "Does your family"; ELSE DISPLAY "Do you"**

**QA15\_L12** {Do you/ Does your family} own a motorcycle, boat, trailer, or other non-commercial vehicle?  
{ 您／您家 } 有摩托車，船，拖車或其他非商用交通工具嗎？

**AL38**

YES .....1  
NO .....2 [SKIP TO QA15\_L14]  
REFUSED ..... -7 [SKIP TO QA15\_L14]  
DON'T KNOW ..... -8 [SKIP TO QA15\_L14]

**PROGRAMMING NOTE QA15\_L13:**

**IF QA15\_A16 = 1 (MARRIED) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family"; ELSE DISPLAY "you"**

**QA15\_L13** Not counting what {you/your family} owe, what is your estimated value of the motorcycle, boat, trailer, or other non-commercial vehicle {you/your family} own?  
不包括{您/您家}欠的款，您對這些摩托車，船，拖車或其他非商用交通工具估價多少？

**AL39**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [HR: 0-999995]  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_L14:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";  
 ELSE DISPLAY "you"

**QA15\_L14** Did {you or your spouse/you or your partner/you} receive any money last month for child support?  
 {您或您的配偶/您或您的伴侶/你們} 上個月有沒有收到任何子女扶養費？

**AL15**

YES .....	1	
NO .....	2	[GO TO PN QA15_L16]
REFUSED .....	-7	[GO TO PN QA15_L16]
DON'T KNOW .....	-8	[GO TO PN QA15_L16]

**PROGRAMMING NOTE QA15\_L15:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";  
 ELSE CONTINUE WITHOUT DISPLAYS

**QA15\_L15** What was the {combined} total amount that you {and your spouse/and your partner} received from child support last month?  
 {您或您的配偶/您或您的伴侶/你們} 上個月收到的子女扶養費{合計}總額是多少？

**AL16**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$ \_\_\_\_\_ AMOUNT [000001-999995]

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

**PROGRAMMING NOTE QA15\_L16:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you"  
 ELSE DISPLAY "you"

**QA15\_L16** Did {you or your partner or both of you/you or your spouse or both of you/you} pay any child support last month?

{您或您的配偶/您或您的伴侶/你們} 上個月 有沒有支付任何子女扶養費？

**AL17**

YES, RESPONDENT PAID .....	1	
YES, SPOUSE/PARTNER PAID .....	2	
YES, BOTH PAID .....	3	
NO .....	4	[GO TO PN QA15_L18]
REFUSED .....	-7	[GO TO PN QA15_L18]
DON'T KNOW .....	-8	[GO TO PN QA15_L18]

**PROGRAMMING NOTE QA15\_L17:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";  
 ELSE DISPLAY "you"

**QA15\_L17** What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in child support last month?

{您或您的配偶或你們兩人/您或您的伴侶或你們兩人 } 上個月 支付的子女扶養費總共是多少？

**AL18**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\_\_\_\_\_ AMOUNT [000001-999995]

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

**PROGRAMMING NOTE QA15\_L18:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";  
 ELSE DISPLAY "you"

**QA15\_L18** Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?  
 {您或您的配偶/您或您的伴侶/您}上個月是否領取任何工傷賠償付款？

<b>AL32</b>
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YES .....	1	
NO .....	2	[GO TO PN QA15_L20]
REFUSED .....	-7	[GO TO PN QA15_L20]
DON'T KNOW .....	-8	[GO TO PN QA15_L20]

**PROGRAMMING NOTE QA15\_L19:**

IF QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";  
 ELSE IF [QA15\_A16 = 2 (LIVING WITH PARTNER) OR QA15\_D20 = 1 OR QA15\_D21 = 1 (LEGAL SAME-SEX COUPLE)] AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";  
 ELSE CONTINUE WITHOUT DISPLAYS

**QA15\_L19** What was the {combined} total amount that you {and your spouse/and your partner} received from workers compensation last month?  
 您{和您的配偶/伴侶}上個月從工傷賠償領取的{合計}總額是多少？

<b>AL33</b>
-------------

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

\$\_\_\_\_\_ AMOUNT [000001-999995]

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

**PROGRAMMING NOTE QA15\_L20:**

IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND QA15\_A16 = 1 (MARRIED) AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH QA15\_L20 AND DISPLAY "you or your spouse";

ELSE IF AGE ≥ 65 AND QA15\_G12 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA15\_L20 AND DISPLAY "you or your partner";

ELSE IF AGE ≥ 65, THEN CONTINUE WITH QA15\_L20 AND DISPLAY "you";

ELSE GO TO PROGRAMMING NOTE QA15\_L22

**QA15\_L20** Did {you or your spouse/you or your partner/you} receive any Social Security or Pension payments last month?  
{您或您的配偶/您或您的伴侶/您} 上個月有沒有領取任何社會安全金 (Social Security)或退休金？

**AL18A**

YES .....	1	
NO .....	2	[GO TO PN QA15_L22]
REFUSED .....	-7	[GO TO PN QA15_L22]
DON'T KNOW .....	-8	[GO TO PN QA15_L22]

**QA15\_L21** What was the total amount received last month from Social Security and Pensions?  
您上個月領取的社會安全金和養老金總額是多少？

**AL18B**

[IF AMOUNT GREATER THAN \$999,995, ENTER "999,995"]

_____ AMOUNT	[000001-999995]
REFUSED .....	-7
DON'T KNOW .....	-8



**PROGRAMMING NOTE QA15\_L22:**  
**IF ARINSURE ≠ 1 (UNINSURED) CONTINUE WITH QA15\_L22;**  
**ELSE GO TO QA15\_M1**

**QA15\_L22** What is the one main reason why you are not enrolled in the Medi-Cal program?  
 您{和您的配偶/伴侶}上個月從工傷賠償領取的{合計}總額是多少？

**AL19**

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

## Section M – Housing and Social Cohesion

QA15\_M1

These next questions are about your housing and neighborhood.  
 以下是有關您的住宅及所在社區的問題。

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?  
 您是住在獨立屋、雙連屋、三單元或多單元建築物還是活動房屋中？

AK23

[IF NEEDED, SAY: "A duplex is a building with 2 units."]

[IF NEEDED, SAY: "雙連屋指有兩個單元的建築物。"]

HOUSE .....	1
DUPLEX .....	2
BUILDING WITH 3 OR MORE UNITS .....	3
MOBILE HOME .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

QA15\_M2

Do you own or rent your home?  
 您是自己擁有住宅還是租用住宅？

AK25

OWN .....	1
RENT .....	2
OTHER ARRANGEMENT .....	3
REFUSED .....	-7
DON'T KNOW .....	-8

QA15\_M3

About how long have you lived at your current address?  
 您在目前的地址已居住了多長時間？

[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]

AM14

\_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]

\_\_\_\_\_ YEARS [HR: 1 - AAGE]

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

**PROGRAMMING NOTE QA15\_M4:**  
**IF QA15\_M4 ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE QA15\_M6;**  
**ELSE CONTINUE WITH QA15\_M4**

**QA15\_M4** About how long have you lived in your current neighborhood?  
 您在目前的社區已大約居住多長時間?

**[INTERVIEWER NOTE: IF LESS THAN 1 MONTH BUT MORE THAN 0 DAYS, ENTER 1 MONTH]**

**AM15**

\_\_\_\_\_ MONTHS [HR: 1 - AAGEx12MONTHS]

\_\_\_\_\_ YEARS [HR: 1 - AAGE]

REFUSED ..... -7

DON'T KNOW ..... -8

**QA15\_M5** The last time you moved, what was your main reason for moving?  
 您最後一次搬家的主要原因是什么？

**AM38**

CHANGE IN MARITAL/RELATIONSHIP STATUS...1

TO ESTABLISH OWN HOUSEHOLD.....2

FOR CHILD'S EDUCATION .....3

TO ATTEND OR LEAVE COLLEGE .....4

WORK RELATED .....5

COULDN'T AFFORD MORTGAGE/RENT .....6

OTHER HOUSING RELATED .....7

BETTER NEIGHBORHOOD/LESS CRIME .....8

OTHER..... 91

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_M6:**

**IF QA15\_M6 THROUGH QA15\_M10 NOT ANSWERED IN CHILD INTERVIEW (CG39, CG40, CG41, CG34, CG42), THEN CONTINUE WITH QA15\_M6;  
ELSE GO TO QA15\_M11**

**QA15\_M6**

Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements:  
People in my neighborhood are willing to help each other.

請告訴我您對以下陳述的贊成程度。您是極為贊成、贊成、不贊成還是極不贊成：我所在社區的居民很願意互相幫助。

**AM19**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

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

**[DO NOT PROBE A “DON’T KNOW” RESPONSE.]**

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

**QA15\_M7**

People in this neighborhood generally do NOT get along with each other.  
本社區的人通常無法和睦相處。

**AM20**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

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

**[DO NOT PROBE A “DON’T KNOW” RESPONSE.]**

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

**QA15\_M8**

People in this neighborhood can be trusted.  
本社區的人值得信賴。

**AM21**

**[IF NEEDED, SAY: “Do you strongly agree, agree, disagree, or strongly disagree?”]**

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

**[“DO NOT PROBE A “DON’T KNOW” RESPONSE.]**

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

**QA15\_M9** You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble.  
您可以依靠本社區的成年人注意孩子們的安全，避免孩子惹麻煩。

**AM35**

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]  
[IF NEEDED, SAY: 您是極為贊成、贊成、不贊成還是極不贊成? ]

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

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

**QA15\_M10** Do you feel safe in your neighborhood...  
您在居住區附近感到安全.....

**AK28**

All of the time, .....	1
所有的時間, .....	1
Most of the time, .....	2
大多數時間, .....	2
Some of the time, or .....	3
某些時間, 還是 .....	3
None of the time .....	4
沒有任何時間 .....	4
REFUSED .....	-7
DON'T KNOW .....	-8

**QA15\_M11** In the past 12 months, have you done any volunteer work or community service that you have not been paid for?  
在過去十二個月內，您是否曾經做任何義工或不領取報酬的社區服務工作？

**AM36**

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

**QA15\_M12** In the past 12 months, have you served as a volunteer on any local board, council, or organization that deals with community problems?  
在過去十二個月內，您是否曾經在任何處理社區問題的地方委員會、協會或組織做義工？

**AM39**

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

**QA15\_M13** In the past 12 months, have you gotten together informally with others to deal with community problems?  
 在過去十二個月內，您是否曾經以非正式的方式與其他人一起處理社區的問題？

**AM40**

**[IF NEEDED SAY: "For example, with a neighborhood watch group."]  
 [IF NEEDED SAY: 「例如，與鄰里守望小組。」]**

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

**PROGRAMMING NOTE QA15\_M14:**

**IF QA15\_A12 = 9 (JAPANESE) OR QA15\_A15 = 38 (JAPANESE), THEN CONTINUE WITH QA15\_M14;  
 ELSE GO TO QA15\_S1;**

**QA15\_M14** In the past 12 months, have you donated money to a charity or non-profit organization?  
 在過去十二個月內，您 您是否向慈善組織或非營利組織捐過款？

**AM41**

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

**QA15\_M15** In the next 12 months, how likely are you to donate money to a charity or non-profit organization?  
 Are you...  
 下來的 12 月裡，您 向慈善組織或非營利組織捐款的可能性為多大？

**AM42**

Very likely.....1  
 Somewhat likely .....2  
 A little likely, or .....3  
 Not likely.....4  
 REFUSED .....-7  
 DON'T KNOW .....-8

## Section S – Suicide Ideation and Attempts

QA15\_S1

The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.

下一節是有關自我傷害的想法。再說一遍，如果提出的任何問題使您感到不安，您不需要回答。

Have you ever seriously thought about committing suicide?

您是否曾經認真地考慮過自殺？

AF86

YES .....	1	
NO .....	2	[GO TO PN QA15_N1]
REFUSED .....	-7	[GO TO PN QA15_N1]
DON'T KNOW .....	-8	[GO TO PN QA15_N1]

QA15\_S2

Have you seriously thought about committing suicide at any time in the past 12 months?

您在過去十二個月內的任何時間是否認真地考慮過自殺？

AF87

YES .....	1	
NO .....	2	[GO TO QA15_S4]
REFUSED .....	-7	[GO TO QA15_S4]
DON'T KNOW .....	-8	[GO TO QA15_S4]

QA15\_S3

Have you seriously thought about committing suicide at any time in the past 2 months?

您在過去兩個月的任何時間是否曾經認真地考慮過自殺的問題？

AF91

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

QA15\_S4

Have you ever attempted suicide?

您是否曾經嘗試過自殺？

AF88

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

**PROGRAMMING NOTE QA15\_S5:**

**IF QA15\_S2 = (2, -7, -8) AND QA15\_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**IF QA15\_S3 = (2, -7, -8) AND QA15\_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**IF QA15\_S3 = 1 AND QA15\_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**

**ELSE CONTINUE WITH QA15\_S5**

**QA15\_S5** Have you attempted suicide at any time in the past 12 months?  
您在過去十二個月內的任何時間是否曾經嘗試過自殺？

**AF89**

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

**SUICIDE RESOURCE:**

We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.] The number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.] The number is 1-800-273-TALK (8255).

Or, you can visit a website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org). [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

**POST-NOTE FOR SUICIDE RESOURCE:**

**IF QA15\_S2 = (2, -7, -8) AND QA15\_S4 = (2, -7, -8) THEN SKIP TO PN QA15\_N1 (NEXT SECTION); ELSE CONTINUE**

**QA15\_S6** Would you like to discuss your thoughts with this person?  
您是否願意與這個人討論您的想法？

**AF90**

YES .....1 [GO TO SUICIDE PROTOCOL]  
NO .....2 [GO TO PN QA15\_N1]  
REFUSED ..... -7 [GO TO PN QA15\_N1]  
DON'T KNOW ..... -8 [GO TO PN QA15\_N1]



## Section N –Demographic Information Part III and Closing

### PROGRAMMING NOTE QA15\_N1:

IF AH42 WAS ASKED IN THE CHILD INTERVIEW, THEN AH42 = KAH42, AND SKIP TO QA15\_N8:

IF SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT), SKIP TO QA15\_N2

IF SR ≠ AR (SCREENER RESPONDENT IS NOT THE ADULT RESPONDENT), CONTINUE WITH QA15\_N1;

**QA15\_N1** Just a few final questions and then we are done.

{最後再有幾個問題，我們就完成了。}

To be sure we are covering the entire state, what county do you live in?

為了確保我們把全州都包括在研究範圍內，您住在哪個縣？

### AH42

ALAMEDA .....	1
ALPINE .....	2
AMADOR .....	3
BUTTE .....	4
CALAVERAS.....	5
COLUSA .....	6
CONTRA COSTA.....	7
DEL NORTE.....	8
EL DORADO .....	9
FRESNO .....	10
GLENN .....	11
HUMBOLDT .....	12
IMPERIAL .....	13
INYO .....	14
KERN .....	15
KINGS .....	16
LAKE .....	17
LASSEN .....	18
LOS ANGELES .....	19
MADERA.....	20
MARIN.....	21
MARIPOSA .....	22
MENDOCINO.....	23
MERCED.....	24
MODOC .....	25
MONO .....	26
MONTEREY .....	27
NAPA .....	28
NEVADA .....	29
ORANGE.....	30
PLACER.....	31
PLUMAS .....	32
RIVERSIDE.....	33
SACRAMENTO.....	34
SAN BENITO .....	35
SAN BERNARDINO.....	36
SAN DIEGO .....	37
SAN FRANCISCO.....	38
SAN JOAQUIN.....	39
SAN LUIS OBISPO .....	40

SAN MATEO .....	41
SANTA BARBARA .....	42
SANTA CLARA .....	43
SANTA CRUZ .....	44
SHASTA .....	45
SIERRA .....	46
SISKIYOU .....	47
SOLANO .....	48
SONOMA .....	49
STANISLAUS .....	50
SUTTER .....	51
TEHAMA .....	52
TRINITY .....	53
TULARE .....	54
TUOLUMNE .....	55
VENTURA .....	56
YOLO .....	57
YUBA .....	58
REFUSED .....	-7
DON'T KNOW .....	-8

**PROGRAMMING NOTE QA15\_N2:**

**IF ADVANCE LETTER SENT AND R'S ADDRESS IS NOT A P.O. BOX, ASK QA15\_N2;**

**IF SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT) DISPLAY "Just a few final questions and then we are done.";**

**ELSE GO TO QA15\_N3**

**QA15\_N2** {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} ?

**AO1**

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

**[GO TO QA15\_N6]**

**PROGRAMMING NOTE QA15\_N3:**  
**IF R'S ADDRESS IS A P.O. BOX AND SR = AR (SCREENER RESPONDENT IS THE ADULT RESPONDENT),**  
**DISPLAY "Just a few final questions and then we are done".**

**QA15\_N3** {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？

**AM7**

\_\_\_\_\_ ZIP CODE

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

**QA15\_N4**

To help us better understand the environment you live in and how it may affect your health, please tell me the address where you live. This information will be kept confidential and will be destroyed after the entire survey has been completed.

為了幫助我們更好地瞭解您的生活環境以及您的生活環境對您的健康的影響，請告訴我您的住址。我們會對您的住址保密，並在問卷調查全部完成後銷毀。

**AO2**

\_\_\_\_\_ HOUSE ADDRESS NUMBER

\_\_\_\_\_ NAME OF STREET (VERIFY SPELLING) **[GO TO QA15\_N6]**

\_\_\_\_\_ STREET TYPE

\_\_\_\_\_ APT. NO

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_N5:**  
**IF ADDRESS WAS GIVEN IN QA15\_N4, SKIP TO QA15\_N6;**  
**ELSE CONTINUE WITH QA15\_N5**

**QA15\_N5**

Can you tell me just the name of the street you live on?

您是否能夠只告訴我您居住的街道名稱？

**AM8**

\_\_\_\_\_ NAME OF STREET

REFUSED ..... -7 **[GO TO QA15\_N7]**DON'T KNOW ..... -8 **[GO TO QA15\_N7]****QA15\_N6**

And what is the name of the street down the corner from you that crosses your street?

在您所住的街道轉角處與您所住的街道交叉的街道名稱是什麼？

**AM9**

\_\_\_\_\_ NAME OF CROSS-STREET

REFUSED ..... -7

DON'T KNOW ..... -8

**PROGRAMMING NOTE QA15\_N7:**

IF [AM7 = 90012 OR 90021 OR 90031 OR 90032 OR 90033 OR 90063 OR 90023 OR 90058 (BOYLE HEIGHTS)] OR [AM7 = 92104 OR 92116 OR 92115 OR 92105 OR 92102 (CITY HEIGHTS)] OR [AM7 = 00049 OR 00054 OR 95555 OR 95556 OR 95568 OR 96039 OR 95531 OR 95567 OR 95548 OR 95543 OR 95546 (DEL NORTE AND ADJACENT TRIBAL LANDS)] OR [AM7 = 94577 OR 94601 OR 94621 OR 94603 OR 94605 OR 94601 (EAST OAKLAND)] OR [AM7 = 93905 (EAST SALINAS/ALISAL)] OR [AM7 = 92254 OR 92274 OR 92236 OR 92201 (EASTERN COACHELLA VALLEY)] OR [AM7 = 93703 OR 93728 OR 93727 OR 93702 OR 93701 OR 93721 OR 93706 OR 93725 (CENTRAL/SOUTHEAST/SOUTHWEST FRESNO)] OR [AM7 = 90755 OR 90802 OR 90804 OR 90810 OR 90813 OR 90806 (WEST AND CENTRAL LONG BEACH)] OR [AM7 = 93653 OR 95306 OR 95365 OR 95340 OR 95369 OR 95333 OR 95348 OR 93610 OR 93541 (SOUTHWEST MERCED AND EAST MERCED COUNTY)] OR [AM7 = 94804 OR 94801 OR 94530 OR 94805 OR 94806 (RICHMOND)] OR [AM7 = 93241 OR 92707 OR 92701 OR 92703 OR 92704 OR 92705 (CENTRAL SANTA ANA)] OR [AM7 = 93307 OR 93203 OR 93313 OR 93304 (SOUTH KERN)] OR [AM7 = 90007 OR 90011 OR 90037 OR 90044 OR 90003 (SOUTH LOS ANGELES)] OR [AM7 = 95822 OR 95823 OR 95826 OR 95820 OR 95824 OR 95828 OR 95817 OR 95818 (SOUTH SACRAMENTO)],  
 CONTINUE WITH QA15\_N7;  
 ELSE SKIP TO QA15\_N8

**QA15\_N7** Have you ever heard of “Building Healthy Communities”, a program supported by The California Endowment?  
 您有聽說過“建造健康社區” (“Building Healthy Communities”) 嗎, 那是一項由加州捐贈基金會 (The California Endowment) 支持的項目?

**AM43**

[IF NEEDED, SAY: “The Building Healthy Communities program is a 10-year project to improve the health of kids and youth. It is working to improve job opportunities, schools, housing, safety, and access to healthy foods in the neighborhood.”]

[IF NEEDED, SAY: “這個項目是一個十年計劃, 致力於促進兒童和青少年的健康。它改善社區的就業機會, 學校, 住房, 安全, 以及健康食物的獲取。”]

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

**PROGRAMMING NOTE QA15\_N8:**

IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QA15\_N14;  
 ELSE CONTINUE WITH QA15\_N8

**QA15\_N8** 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?

**AM33**

[CODE “SHARES CELL PHONE” ONLY IF VOLUNTEERED]

YES .....1  
 NO .....2 [GO TO PN QA15\_N10]  
 SHARES CELL PHONE .....3  
 REFUSED ..... -7 [GO TO PN QA15\_N10]  
 DON'T KNOW ..... -8 [GO TO PN QA15\_N10]

**QA15\_N9** How many different cell phone numbers do you currently use for personal calls?  
您目前有多少個供您個人使用的手機電話號碼？

**AN10**

\_\_\_\_\_ CELL PHONE NUMBERS

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

**PROGRAMMING NOTE QA15\_N10:**  
**IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE QA15\_N13;**  
**ELSE CONTINUE WITH QA15\_N10**

**QA15\_N10** Is there a regular or landline telephone in your household?  
您的家中是否有一部普通的或有線固定電話？

**AN6**

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

**[GO TO PN QA15\_N14]**  
**[GO TO PN QA15\_N14]**  
**[GO TO PN QA15\_N14]**

**QA15\_N11** Is that telephone for personal use or business use only?  
這部電話是僅限用於個人用途還是業務用途？

**AN7**

PERSONAL USE ONLY .....1  
BUSINESS USE ONLY .....2  
BOTH PERSONAL USE AND BUSINESS USE .....3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**[GO TO PN QA15\_N14]**

**QA15\_N12** How many telephone lines do you have for personal use?  
您目前有多少條個人使用的電話線路？

**AN11**

\_\_\_\_\_ REGULAR OR LANDLINE NUMBERS

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

**PROGRAMMING NOTE QA15\_N13:**

**IF QA15\_N8 = 1 (YES) OR 3 (SHARES CELL PHONE), OR QA15\_N11 = 1 (HAS A LANDLINE FOR PERSONAL USE) OR 3 (LANDLINE IS FOR PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH QA15\_N13;  
ELSE SKIP TO PROGRAMMING QA15\_N14**

**QA15\_N13** Of all the telephone calls that you receive, are...  
在您的接聽的所有電話中，是.....

**AM34**

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

**PROGRAMMING NOTE QA15\_N14:**

**IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;  
ELSE CONTINUE WITH QA15\_N14**

**QA15\_N14** Finally, do you think you would be willing to do a follow-up to this survey sometime in the future?  
最後，我想問一下您是否願意今後參加本項研究的一次後續調查？

**AM10**

YES ..... 1  
MAYBE/PROBABLY YES ..... 2  
DEFINITELY NOT ..... 3  
REFUSED ..... -7  
DON'T KNOW ..... -8

**PROGRAMMING NOTE SUICIDE RESOURCE 2:**

IF QA15\_S6 = (2, -7, -8),  
 AND [QA15\_S3 = 1 OR (QA15\_S3 = 2, -7, -8 AND QA15\_S5=1)], THEN CONTINUE WITH SUICIDE  
 RESOURCE 2;  
 ELSE GO TO PROGRAMMING NOTE CLOSE1

**SUICIDE RESOURCE 2:**

As I mentioned earlier, if you'd like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. Do you have something to write with? [WAIT UNTIL THEY HAVE SOMETHING TO WRITE DOWN THE NUMBER AND/OR WEBSITE AND THEN CONTINUE WITH THE SCRIPT. SPEAK SLOWLY WHEN GIVING THE HOTLINE NUMBER.] The toll-free number is 1-800-273-TALK (8255). [IF NEEDED, REPEAT THE NUMBER OR ASK THEM TO READ IT BACK TO YOU.]

Or you can visit their website to find out information about getting help. [SPEAK SLOWLY WHEN GIVING OUT THE WEBSITE ADDRESS.] The website address is [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org) [IF NEEDED, REPEAT THE ADDRESS OR ASK THEM TO READ IT BACK TO YOU.]

QA15\_N15 Would you like to speak with someone now?  
 您現在希望與人交談嗎？

AN8

YES .....	1	[GO TO SUICIDE PROTOCOL]
NO .....	2	[GO TO CLOSE1 AND CLOSE2]
REFUSED .....	-7	[GO TO CLOSE1 AND CLOSE2]
DON'T KNOW .....	-8	[GO TO CLOSE1 AND CLOSE2]

**PROGRAMMING NOTE CLOSE1 AND CLOSE2:**

IF ALL INTERVIEWS FOR HOUSEHOLD COMPLETE, SKIP TO CLOSE2;  
 ELSE CONTINUE WITH CLOSE1

**CLOSE1** Let me check to see if there is anyone else. **[GO TO HHSELECT]**  
 讓我檢查一下我們是不是還需要和任何其他他人談話。

**CLOSE2** Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. Ninez Ponce, the Principal Investigator. Dr. Ponce can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.  
 謝謝您的時間與合作！您幫助我們進行了一項非常重要的健康調查。如果您有任何疑問，請與研究負責人 Ninez Ponce 博士聯繫。他的免費電話號碼是 1-866-275-2447。再次感謝，再見。