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

Adult Respondents Age 18 and Older

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

Contact:

California Health Interview Survey
UCLA Center for Health Policy Research
10960 Wilshire Blvd, Suite 1550
Los Angeles, CA 90024
Telephone: (866) 275-2447
Fax: (310) 794-2686
Web: **www.chis.ucla.edu**

Table of Contents

NOTE: Each question in the CHIS questionnaires (adult, child, and adolescent) has a unique, sequential question number by section that follows the administration of the survey. In addition, the variable name (in the CHIS data file) associated with a question, appears in a box beneath the question number. Please consult the CHIS 2013 Data Dictionaries for additional information on variables, the population universe answering a specific question, and data file content.

Section A – Demographic Information, Part I

> **PROGRAMMING NOTE QA13_A1:**
> **SET AADATE = CURRENT DATE (YYYYMMDD)**

Age

QA13_A1   What is your date of birth?
             Anong petsa kayo ipinanganak?

AA1MON

             MONTH _____   [RANGE: 1-12]

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

AA1DAY

             DAY _____   [RANGE: 1-31]

AA1YR

             YEAR _____   [RANGE: 1904-1996]

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

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

QA13_A2   What month and year were you born?
             Sa anong buwan at taon kayo ipinanganak?

AA1AMON

             MONTH _____   [RANGE: 1-12]

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

AA1AYR

             YEAR _____   [RANGE: 1904-1996]

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

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

QA13_A3   What is your age, please?
Kung puede po sanang matanong, ano ang edad ninyo?

AA2

_____YEARS OF AGE   [RANGE: 0-120]   **[GO TO QA13_A5]**

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

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

QA13_A4   Are you between 18 and 29, between 30 and 39, between 40 and 44, between 45 and 49,
between 50 and 64, or 65 or older?
Nasa pagitan ba kayo ng 18 at 29, 30 at 39, 40 at 44, 45 at 49, 50 at 64, o 65 o mas matanda
pa?

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

Gender
QA13_A5   Are you male or female?
Lalaki o babae ba po kayo?

AA3

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

Ethnicity

QA13_A6   Are you Latino or Hispanic?
Latino o Hispanic ba kayo?

AA4

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

QA13_A7   And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran-- and if you have more than one, tell me all of them.
At ano ang inyong mga ninuno o angkang pinanggalingan na Latino o Hispanic? Gaya ng Mexican, Salvadoran, Cuban, Honduran - at kung higit sa isa, sabihin ninyo ang lahat sa akin.

AA5

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

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

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

Race

QA13_A8   {You said you are Latino or Hispanic. Also,} please tell me which one <u>or more</u> of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White? {Sinabi ninyo na Latino o Hispanic kayo.} Pakisabi rin sa akin kung aling isa <u>o mahigit pa</u> sa sumusunod ang gagamitin ninyo sa pag-describe sa sarili ninyo. Masasabi ba ninyo ang sarili ninyo na Native Hawaiian, other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, o White?

AA5A

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

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

[CODE ALL THAT APPLY]

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

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

QA13_A9   You said, American Indian or Alaska Native, and what is your tribal heritage? If you have more than one tribe, tell me all of them.
Sinabi ninyo na American Indian o Alaska Native. Ano ang tribo ng inyong mga ninuno? Kung higit sa isang tribo, banggitin ninyo ang lahat sa akin.

AA5B

[CODE ALL THAT APPLY]

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

QA13_A10   Are you an enrolled member in a federally or state recognized tribe?
Naka-enroll ba kayo bilang miyembro ng sa isang tribong kinikilala ng pamahalaang pederal o estado?

AA5C

YES	1	
NO	2	**[GO TO PN QA13_A12]**
REFUSED	-7	**[GO TO PN QA13_A12]**
DON'T KNOW	-8	**[GO TO PN QA13_A12]**

9

QA13_A11   Which tribe are you enrolled in?
                    Sa aling tribo kayo naka-enroll?

AA5D

APACHE
        MESCALERO APACHE, NM 1
        APACHE (NOT SPECIFIED) 2
        OTHER APACHE [Ask for spelling] (SPECIFY): 3
BLACKFEET
        BLACKFOOT/BLACKFEET 4
CHEROKEE
        WESTERN CHEROKEE..5
        CHEROKEE (NOT SPECIFIED)..............................6
        OTHER CHEROKEE [Ask for spelling] (SPECIFY)...7
CHOCTAW
        CHOCTAW OKLAHOMA 8
        CHOCTAW (NOT SPECIFIED) 9
        OTHER CHOCTAW [Ask for spelling] (SPECIFY): ..10
NAVAJO
        NAVAJO (NOT SPECIFIED)...................................11
POMO
        HOPLAND BAND, HOPLAND RANCHERIA...........12
        SHERWOOD VALLEY RANCHERIA........................13
        POMO (NOT SPECIFIED) 14
        OTHER POMO [Ask for spelling] (SPECIFY): 15
PUEBLO
        HOPI 16
        YSLETA DEL SUR PUEBLO OF TEXAS 17
        PUEBLO (NOT SPECIFIED) 18
        OTHER PUEBLO [Ask for spelling] (SPECIFY): 19
SIOUX
        OGLALA/PINE RIDGE SIOUX................................20
        SIOUX (NOT SPECIFIED) 21
        OTHER SIOUX [Ask for spelling] (SPECIFY): 22
YAQUI
        PASCUA YAQUI TRIBE OF ARIZONA 23
        YAQUI (NOT SPECIFIED) 24
        OTHER YAQUI [Ask for spelling] (SPECIFY): 25

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

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

QA13_A12   You said Asian, and what specific ethnic group are you, such as Chinese, Filipino, Vietnamese?
If you are more than one, tell me all of them.
Sinabi ninyo na Asian. Aling espesipikong pangkating etniko kayo, gaya ng {Chinese, Filipino, Vietnamese}? Kung higit sa isa kayo, banggitin ninyo ang lahat sa akin.

AA5E

[CODE ALL THAT APPLY]

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

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

QA13_A13   You said you are Pacific Islander. What specific ethnic group are you, such as Samoan, Tongan,
or Guamanian? If you are more than one, tell me all of them.
Sinabi ninyo na Pacific Islander kayo. Aling espesipikong pangkating etniko kayo, gaya ng
Samoan, Tongan o Guamenian? Kung higit sa isa ang pangkating etniko ninyo, banggitin ang
lahat.

AA5E1

[CODE ALL THAT APPLY]

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

PROGRAMMING NOTE QA13_A14:
IF QA13_A6 = 1 (LATINO) AND [QA13_A8 = 6 (NATIVE HAWAIIAN) OR QA13_A8 = 5 (OTHER PACIFIC ISLANDER) OR QA13_A8 = 4 (AMERICAN INDIAN OR ALASKA NATIVE) OR QA13_A8 = 3 (ASIAN) OR QA13_A8 = 2 (BLACK/AFRICAN AMERICAN) OR QA13_A8 = 1 (WHITE) OR QA13_A8 = 91 (OTHER)], CONTINUE WITH QA13_A14;
ELSE IF THERE WERE MULTIPLE RESPONSES TO QA13_A8, QA13_A12, OR QA13_A13 [NOT COUNTING -7 OR -8 (REF/DK)], CONTINUE WITH QA13_A14;
ELSE SKIP TO QA13_A16

QA13_A14   You said that you are: {INSERT MULTIPLE RESPONSES FROM QA13_A7, QA13_A8, QA13_A12 AND QA13_A13}.
Sinabi ninyo na kayo ay: {INSERT MULTIPLE RESPONSES FROM QA13_A7, QA13_A8, QA13_A12 AND QA13_A13}.

Do you identify with any one race in particular?
Iniuugnay ba ninyo ang sarili ninyo sa alinmang isang particular na lahi?

AA5G

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

PROGRAMMING NOTE FOR QA13_A15:
IF QA13_A6 = 1 (YES, LATINO) AND QA13_A7 ≠ -7 OR -8, DO NOT DISPLAY QA13_A15 = 14 (LATINO);
IF QA13_A8 = 1 (YES, OTHER PACIFIC ISLANDER) AND QA13_A13 = 1 TO 4 OR 91, DO NOT DISPLAY QA13_A15 = 17 (OTHER PACIFIC ISLANDER);
IF QA13_A8 = 3 AND QA13_A12 = 1 TO 17 OR 91, DO NOT DISPLAY QA13_A15 = 19 (ASIAN)

QA13_A15   Which do you most identify with?
Sa aling lahi ninyo higit na iniuugnay ang sarili ninyo?

AA5F

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

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

```
RACE, OTHER SPECIFY .......................................22
BANGLADESHI.....................................................30
BURMESE .............................................................31
CAMBODIAN ........................................................32
CHINESE ..............................................................33
FILIPINO ...............................................................34
HMONG .................................................................35
INDIAN (INDIA) .....................................................36
INDONESIAN.........................................................37
JAPANESE ...........................................................38
KOREAN ...............................................................39
LAOTIAN ...............................................................40
MALAYSIAN...........................................................41
PAKISTANI ............................................................42
SRI LANKAN..........................................................43
TAIWANESE ..........................................................44
THAI ......................................................................45
VIETNAMESE ........................................................46
ASIAN, OTHER SPECIFY ......................................49
SAMOAN/AMERICAN SAMOAN.............................50
GUAMANIAN .........................................................51
TONGAN................................................................52
FIJIAN ...................................................................53
PACIFIC ISLANDER, OTHER SPECIFY.................55
BOTH/ALL/MULTIRACIAL.......................................90
NONE OF THESE..................................................95
REFUSED ...............................................................-7
DON'T KNOW ..........................................................-8
```

Marital Status

QA13_A16   Are you now married, living with a partner in a marriage-like relationship, widowed, divorced, separated, or never married?
Sa ngayon kayo ba ay kasal, may kinakasamang partner sa kaugnayang parang mag-asawa, biyudo/a, diborsyado/a, hiwalay, o hindi kinasal kailanman?

AH43

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

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

Section B – Health Conditions

General Health

QA13_B1   These next questions are about your health.

Would you say that in general your health is excellent, very good, good, fair, or poor?
Masasabi ba ninyo na sa pangkalahatan ang kalusugan ninyo ay mabuting-mabuti, napakabuti, mabuti, mabuti-buti o mahina?

AB1

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

Asthma

QA13_B2   Has a doctor <u>ever</u> told you that you have asthma?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na may asthma kayo?

AB17

YES 1
NO..2   **[GO TO PN QA13_B18]**
REFUSED .... -7   **[GO TO PN QA13_B18]**
DON'T KNOW .... -8   **[GO TO PN QA13_B18]**

QA13_B3   Do you still have asthma?
Mayroon pa ba kayong asthma?

AB40

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

QA13_B4   During the <u>past 12 months</u>, have you had an episode of asthma or an asthma attack?
Nitong <u>nakaraang 12 buwan</u>, nakaranas ba kayo ng pagsumpong ng asthma o ng atake ng asthma?

AB41

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

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

QA13_B5   During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say…
Nitong nakaraang 12 buwan, gaano kadalas kayo naka-experience ng mga synthoms ng asthma gaya ng pag-ubo, paghuni, kahirapang huminga, paninikip ng dibdib o plema? Masasabi ba ninyo na...

AB19

Not at all, ...1
Hindi kailanman, ...1
Less than every month, ...2
Mas bihira sa bawat buwan, ...2
Every month, ...3
Bawat buwan, ...3
Every week, or 4
Bawat linggo, o 4
Araw-araw? 5
Not at all, ...5
REFUSED .... -7
DON'T KNOW .... -8

QA13_B6   During the past 12 months, have you had to visit a hospital emergency room because of your asthma?
Nitong nakaraang 12 buwan, kinailangan ba ninyong magpatinginsa emergency room ng ospital dahil sa inyong asthma?

AH13A

YES 1
NO 2   **[GO TO QA13_B8]**
REFUSED .... -7   **[GO TO QA13_B8]**
DON'T KNOW .... -8   **[GO TO QA13_B8]**

QA13_B7   Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?
Nagpatingin ba kayo sa emergency room ng ospital para sa inyong asthma dahil hindi kayo nakapagpatingin sa doktor ninyo?

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

QA13_B8   During the past 12 months, were you admitted to the hospital overnight or longer for your asthma?
Nitong nakaraang 12 buwan, na-ospital ba kayo nang magdamag o mas matagal pa para sa inyong asthma?

AH15A

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

QA13_B9   Are you now taking a daily medication to control your asthma that was prescribed or given to you by a doctor?
Umiinom ba kayo ngayon ng pang-araw-araw na gamut na pampigil sa asthma ninyo na inireseta o ibinigay sa inyo ng doktor?

AB18

[IF NEEDED, SAY: "This includes both oral medicine and inhalers. This is different from inhalers used for quick relief."]
[IF NEEDED, SAY: "Kabilang dito ang mga gamot na nilulunok at ang mga inhaler. Iba ito sa mga inhaler na ginagamit para sa pangmadaliang ginhawa."]

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

PROGRAMMING NOTE QA13_B10:
IF QA13_B3 = 1 (YES, STILL HAVE ASTHMA) OR QA13_B4 = 1 (YES, EPISODE IN LAST 12 MOS) GO TO PROGRAMMING NOTE QA13_B14;
ELSE CONTINUE WITH QA13_B10

QA13_B10   During the past 12 months, how often have you had asthma symptoms such as coughing, wheezing, shortness of breath, chest tightness, or phlegm? Would you say…
Nitong nakaraang 12 buwan, gaano kadalas kayo nakaranas ng mga sintomas ng asthma gaya ng pag-ubo, paghuni, kahirapang huminga, paninikip ng dibdib o plema? Masasabi ba ninyo na...

AB66

```
                        Not at all, ............................................................1
                        Hindi kailanman,..................................................1
                        Less than every month,.........................................2
                        Mas bihira sa bawat buwan, ..................................2
                        Every month, ........................................................3
                        Bawat buwan,........................................................3
                        Every week, or .....................................................4
                        Bawat linggo, o.....................................................4
                        Every day? ............................................................5
                        Araw-araw? ...........................................................5
                        REFUSED ............................................................. -7
                        DON'T KNOW ....................................................... -8
```

QA13_B11   During the <u>past 12 months</u>**,** have you had to visit a hospital emergency room because of <u>your</u> asthma?
Nitong <u>nakaraang 12 buwan</u>, kinailangan ba ninyong magpagamot sa emergency room ng ospital dahil sa <u>inyong</u> asthma?

<div style="border:1px solid black; display:inline-block; padding:2px;">**AB67**</div>

YES 1
NO 2   **[GO TO QA13_B13]**
REFUSED .... -7   **[GO TO QA13_B13]**
DON'T KNOW .... -8   **[GO TO QA13_B13]**

QA13_B12   Did you visit a hospital emergency room for your asthma because you were unable to see your doctor?
Nagpatingin ba kayo sa emergency room ng ospital para sa inyong asthma dahil hindi kayo nakapagpatingin sa doktor ninyo?

<div style="border:1px solid black; display:inline-block; padding:2px;">**AB107**</div>

[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

QA13_B13   During the <u>past 12 months</u>**,** were you admitted to the hospital overnight or longer for your asthma?
Nitong <u>nakaraang 12 buwan</u>, na-ospital ba kayo nang magdamag o mas matagal pa para sa inyong asthma?

<div style="border:1px solid black; display:inline-block; padding:2px;">**AB80**</div>

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

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

QA13_B14   During the past 12 months, how many days of work did you miss due to asthma?
Nitong nakaraang 12 buwan, ilang araw kayong hindi nakapasok sa trabaho nang dahil sa asthma?

<div style="border:1px solid black; display:inline-block; padding:2px;">**AB42**</div>

[INTERVIEWER NOTE: IF NOT WORKING, ENTER ZERO]

_____ DAYS (0 - 365)

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

QA13_B15   Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your asthma?
Nakipagtulungan na ba sa inyo ang inyong mga doktor o mga iba pang medical provider na gumawa ng plano para malaman ninyo kung paano alagaan ang inyong asthma?

AB43

YES 1
NO...2   **[GO TO QA13_B17]**
REFUSED .... -7   **[GO TO QA13_B17]**
DON'T KNOW .... -8   **[GO TO QA13_B17]**

QA13_B16   Do you have a written or printed copy of this plan?
Mayroon ba kayong nakasulat o naka-print na kopya nitong plano?

AB98

[IF NEEDED, SAY: "This can be an electronic or hard copy."]
[IF NEEDED, SAY: "Puedeng electronic o nasa papel ang kopyang ito."]

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

QA13_B17   How confident are you that you can control and manage your asthma? Would you say you are…
Gaano ang tiwala ninyo na kaya ninyong pigilin at paggamot ang inyong asthma? Masasabi ba ninyo na kayo ay...

AB108

Very confident, ...1
Lubos na may tiwala, ...1
Somewhat confident, ...2
Medyo may tiwala, ...2
Not too confident, or..................................3
Walang masyadong tiwala, ...3
Not at all confident? 4
Walang tiwala kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

Diabetes

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

QA13_B18   {Other than during pregnancy, has/Has} a doctor <u>ever</u> told you that you have diabetes or sugar diabetes?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong diabetes o sugar diabetes?
Maliban sa panahon na buntis kayo, nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong diabetes o sugar diabetes?

AB22

                    YES 1
                    NO..2
                    BORDERLINE OR PRE-DIABETES........................3   **[GO TO PN QA13_B34]**
                    REFUSED .... -7
                    DON'T KNOW .... -8

Pre-Diabetes/Borderline Diabetes

PROGRAMMING NOTE QA13_B19:
IF QA13_A5 = 2 (FEMALE) DISPLAY "Other than during pregnancy, has";
ELSE BEGIN DISPLAY WITH "Has"

QA13_B19   {Other than during pregnancy, has/Has} a doctor <u>ever</u> told you that you have pre-diabetes or borderline diabetes?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong pre-diabetes, o borderline diabetes?
Maliban sa panahon na buntis kayo, nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong pre-diabetes, o borderline diabetes?

AB99

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

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

QA13_B20   How old were you when a doctor first told you that you have diabetes?
Gaano katanda kayo noong unang sinabi sa inyo ng doktor na may diabetes kayo?

AB23

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

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

QA13_B21   Were you told that you had Type 1 or Type 2 diabetes?
                 Nasabihan ba kayo na mayroon kayong Type 1 o Type 2 diabetes?

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

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

QA13_B22   Are you now taking insulin?
                 Gumagamit ba kayo ngayon ng insulin?

AB24

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

QA13_B23   Do you now take diabetic pills to lower your blood sugar?
                 Umiinom ba kayo ngayon ng pills na pang-diabetes para pababain ang blood sugar ninyo?

AB25

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

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

QA13_B24   About how many times per day, per week, or per month do you or a family member or friend check your blood for glucose or sugar?
Mga ilang beses ba kayo, o ng isang kaanak o ng kaibigan na nagtse-tsek ng dugo ninyo para sa glucose o asukal sa bawat araw, bawat linggo o bawat buwan?

AB26

[FILL IN TIME FRAME ANSWERED]

_____ TIMES

_____ PER DAY   [HR: 0-24; SR: 0-10]
_____ PER WEEK   [HR: 0-70; SR: 0-34]
_____ PER MONTH   [HR: 0-300; SR: 0-149]
_____ PER YEAR   [HR: 0-3650; SR: 0-599]

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

QA13_B25   About how many times in the last 12 months has a doctor or other health professional checked you for hemoglobin "A one C"?
Mga ilang beses nitong nakaraang 12 buwan kayo tsinek para sa hemoglobin "A one C" ng doktor o ng health professional?

AB27

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

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

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

QA13_B26   About how many times in the last 12 months has a doctor checked your feet for any sores or irritations?
Mga ilang beses nitong nakaraang 12 buwan tsinek ng doktor ang inyong paa para sa anumang mga sugat o mga pangangati?

AB28

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

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

QA13_B27   When was the last time you had an eye exam in which the pupils were dilated? This would have
made your eyes sensitive to bright light for a short time.
Kailan kayo huling nagpatingin sa mata kung saan na-dilate ang pupil o pinalaki ang itim ng
inyong mata? Nagkaroon ito ng epekto na nasisilaw sa liwanag ang inyong mata sa
loob ng maikling panahon.

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

QA13_B28   During the past 12 months, have you had to visit a hospital emergency room because of your
diabetes?
Nitong <u>nakaraang 12 buwan</u>, kinailangan ba ninyong magpagamot sa emergency room ng ospital
dahil sa inyong diabetes?

AB109

YES 1
NO...2   **[GO TO QA13_B30]**
REFUSED .... -7   **[GO TO QA13_B30]**
DON'T KNOW .... -8   **[GO TO QA13_B30]**

QA13_B29   Did you visit a hospital emergency room for your diabetes because you were unable to see your
doctor?
Nagpatingin ba kayo sa emergency room ng ospital para sa inyong diabetes dahil hindi kayo
nakapagpatingin sa doktor ninyo?

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

QA13_B30   During the past 12 months, were you admitted to the hospital overnight or longer for your
diabetes?
Nitong nakaraang 12 buwan, na-ospital ba kayo nang magdamag o mas matagal pa para sa
inyong diabetes?

AB111

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

QA13_B31   Have your doctors or other medical providers worked with you to develop a plan so that you know how to take care of your diabetes?
Nakipagtulungan na ba sa inyo ang inyong mga doctor o mga iba pang medical provider o nagkakaloob ng serbisyong medikal para makagawa ng plano para malaman ninyo kung paano alagaan ang inyong diabetes?

AB112

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

QA13_B32   Do you have a written or printed copy of this plan?
Mayroon ba kayong nakasulat o naka-print na kopya ng planong ito?

AB113

                 [IF NEEDED, SAY: "This can be an electronic or hard copy."]
                 [IF NEEDED, SAY: "Puedeng electronic o nasa papel ang kopyang ito."]

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

QA13_B33   How confident are you that you can control and manage your diabetes? Would you say you are…
Gaano ang tiwala ninyo na kaya ninyong pigilin at pangalagaan ang inyong diabetes? Masasabi ba ninyo na kayo ay...

AB114

                             Very confident, ...1
                             Lubos na may tiwala, ...1
                             Somewhat confident, ...2
                             Medyo may tiwala, ...2
                             Not too confident, or..3
                             Walang masyadong tiwala, o 3
                             Not at all confident? 4
                             Walang tiwala kahit kaunti? 4
                             REFUSED .... -7
                             DON'T KNOW .... -8

Gestational Diabetes

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

QA13_B34   Has a doctor ever told you that you had diabetes <u>only</u> during pregnancy?
Nasabihan na ba kayo ng doktor kailanman na nagkaroon kayo ng diabetes noong buntis <u>lamang</u> kayo?

AB81

[IF NEEDED, SAY: "This is also known as gestational diabetes."]
[IF NEEDED, SAY: "Kinikila din ito na gestational diabetes."]

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

Hypertension

QA13_B35   Has a doctor <u>ever</u> told you that you have high blood pressure?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong altapresyon?

AB29

YES 1
NO...2   **[GO TO QA13_B37]**
HIGH NORMAL/BORDERLINE/
PRE-HYPERTENSION 3   **[GO TO QA13_B37]**
REFUSED .... -7   **[GO TO QA13_B37]**
DON'T KNOW .... -8   **[GO TO QA13_B37]**

QA13_B36   Are you now taking any medications to control your high blood pressure?
Umiinom ba kayo ngayon ng anumang gamot para pigilin ang inyong altapresyon?

AB30

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

Heart Disease

QA13_B37   Has a doctor ever told you that you have any kind of heart disease?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong anumang uri ng sakit sa puso?

AB34

YES 1
NO...2   **[GO TO QA13_B45]**
REFUSED .... -7   **[GO TO QA13_B45]**
DON'T KNOW .... -8   **[GO TO QA13_B45]**

QA13_B38   Has a doctor <u>ever</u> told you that you have heart failure or congestive heart failure?
Nasabihan na ba kayo ng doktor <u>kailanman</u> na mayroon kayong heart failure o congestive heart failure?

AB52

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

QA13_B39   During the past 12 months, have you had to visit a hospital emergency room because of your heart disease?
Nitong <u>nakaraang 12 buwan</u>, kinailangan ba ninyong magpagamot sa emergency room ng ospital dahil sa inyong sakit sa puso?

AB115

YES 1
NO...2   **[GO TO QA13_B41]**
REFUSED .... -7   **[GO TO QA13_B41]**
DON'T KNOW .... -8   **[GO TO QA13_B41]**

QA13_B40   Did you visit a hospital emergency room for your heart disease because you were unable to see your doctor?
Nagpatingin ba kayo sa emergency room ng ospital para sa inyong sakit sa puso dahil hindi kayo nakapagpatingin sa doktor ninyo?

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

QA13_B41   During the past 12 months, were you admitted to the hospital overnight or longer for your heart disease?
Nitong nakaraang 12 buwan, na-ospital ba kayo nang magdamag o mas matagal pa para sa inyong sakit sa puso?

AB117

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

QA13_B42   Have your doctors or other medical providers worked with you to develop a plan so that you know
                how to take care of your heart disease?
                Nakipagtulungan na ba sa inyo ang inyong mga doktor o mga iba pang medical provider para
                makagawa ng plano upang malaman ninyo kung paano alagaan ang inyong sakit sa puso?

AB118

                    YES 1
                    NO 2   **[GO TO QA13_B45]**
                    REFUSED .... -7   **[GO TO QA13_B45]**
                    DON'T KNOW .... -8   **[GO TO QA13_B45]**

QA13_B43   Do you have a written or printed copy of this plan?
                Mayroon ba kayong nakasulat o naka-print na kopya ng planong ito?

AB119

                [IF NEEDED, SAY: "This can be an electronic or hard copy."]
                [IF NEEDED, SAY: "Puedeng electronic o nasa papel ang kopyang ito."]

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

QA13_B44   How confident are you that you can control and manage your heart disease? Would you say you
                are…
                Gaano ang tiwala ninyo na kaya ninyong pigilin at pangalagaan ang inyong sakit sa puso?
                Masasabi ba ninyo na kayo ay...

AB120

                    Very confident, ...1
                    Lubos na may tiwala, ...1
                    Somewhat confident, ...2
                    Medyo may tiwala, ...2
                    Not too confident, or.................................3
                    Walang masyadong tiwala, ...3
                    Not at all confident? 4
                    Walang tiwala kahit kaunti? 4
                    REFUSED .... -7
                    DON'T KNOW .... -8

Flu shot

QA13_B45   During the past 12 months, did you get a flu shot or the nasal flu vaccine, called Flumist?
                Nitong nakaraang 12 buwan, nagpa-flu shot ba kayo, o nagpa-nasal flu vaccine na tinatawag na
                Flumist?
                (CHIS 2014 ONLY)

AE30

                **[IF NEEDED, SAY: "A flu shot is usually given in the Fall and protects against influenza for
                the flu season."]**
                **[IF NEEDED, SAY: "Pangkaraniwan na ibinibigay ang flu shot tuwing fall at nagbibigay-
                proteksyon ito laban sa trangkaso sa panahon ng trangkaso."]**

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

Section C – Health Behaviors

Walking for Transportation and Leisure

QA13_C1   The next questions are about walking for transportation. I will ask you separately about walking
for relaxation or exercise.
Tungkol sa paglalakad bilang paraan ng transportasyon ang sumusunod na mga tanong.
Tatanungin ko kayo nang hiwalay tungkol sa paglalakad para maglibang o mag-ehersisyo.

During the past 7 days, did you walk to get some place that took you at least 10 minutes?
Nitong naraang 7 araw, naglakad ba kayo para marating ang isang lugar, at inabot kayo nang
kahit man lamang 10 minuto?

AD37W

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

QA13_C2   In the past 7 days, how many times did you do that?
Nitong nakaraang 7 araw, ilang beses ninyo ginawa iyon?

AD38W

[IF NEEDED, SAY: "Walk for at least 10 minutes to get some place."]
**[IF NEEDED, SAY: "Naglakad kahit man lamang 10 minuto upang marating ang isang
lugar."]**

_____ TIMES PER WEEK   **[IF 0, GO TO QA13_C4]**

REFUSED .... -7   **[GO TO QA13_C4]**
DON'T KNOW .... -8   **[GO TO QA13_C4]**

PROGRAMMING NOTE QA13_C3:
IF QA13_C2 = 1 DISPLAY "How long did that walk take";
IF QA13_C2 > 1 DISPLAY "On average, how long did those walks take"

QA13_C3   {How long did that walk take/On average, how long did those walks take}?
Sa karaniwan, gaano katagal inabot ang mga paglalakad na iyon?
Gaano katagal inabot ang paglalakad na iyon?

AD39W

_____ MINUTES PER DAY
_____ HOURS PER DAY

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

PROGRAMMING NOTE QA13_C4:
IF QA13_C1 = 1 (WALK FOR TRANSPORTATION) DISPLAY "Please do not include walking for transportation."

QA13_C4   Sometimes you may walk for fun, relaxation, exercise, or to walk the dog. During the past 7 days did you walk for at least 10 minutes for any of these reasons? {Please do not include walking for transportation.}
Paminsan-minsan, maaaring maglakad kayo para sa kasayahan, libangan, ehersisyo, o upang ilakad ang aso. Nitong nakaraang 7 araw, naglakad ba kayo kahit man lamang 10 minuto para sa anumang dahilan na ganito? Mangyaring huwag bilangin ang paglalakad bilang paraan ng transportasyon.

AD40W

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

QA13_C5   In the past 7 days, how many times did you do that?
Nitong nakaraang 7 araw, ilang beses ninyo ginawa iyon?

AD41W

[IF NEEDED, SAY: "Walk for at least 10 minutes for fun, relaxation, exercise, or to walk the dog."]
[IF NEEDED, SAY: "Naglakad kahit man lamang 10 minuto para sa kasayahan, libangan, ehersisyo, o upang ilakad ang aso."]

_____ TIMES PER WEEK   [IF 0, GO TO QA13_C7]

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

PROGRAMMING NOTE QA13_C6:
IF QA13_C5 = 1 DISPLAY "How long did that walk take";
IF QA13_C5 > 1 DISPLAY "On average, how long did those walks take"

QA13_C6   {How long did that walk take/On average, how long did those walks take}?
Sa karaniwan, gaano katagal inabot ang mga paglalakad na iyon?
Gaano katagal inabot ang paglalakad na iyon?

AD42W

_____ MINUTES PER DAY
_____ HOURS PER DAY

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

Dietary Intake

QA13_C7   [During the past month,] how often did you drink regular soda or pop that contains sugar? Do not include diet soda.
[Nitong nakaraang buwan,] gaano kadalas kayo uminom ng regular soda o softdrink na may asukal? Huwag ninyong bilangin ang diet soda.
[Puede ninyong sabihin sa akin kung bawat araw, bawat linggo o bawat buwan.]

AC11

[IF NEEDED, SAY: "Do not include canned or bottled juices or teas. Your best guess is fine."]
[IF NEEDED, SAY: "Huwag ninyong bilangin ang mga de-lata o naka-boteng juice o tsaa. Ayos lang ang inyong pinakamagaling na tantya."]

_____TIMES

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

QA13_C8   [During the past month,] how often did you drink sweetened fruit drinks, sports, or energy drinks?
[Nitong nakaraang buwan,] gaano kadalas kayo uminom ng pinatamis na mga inuming may katas ng prutas, at ng sports o energy drink?

AC46

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

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

_____TIMES

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

QA13_C9   Yesterday, how many glasses of water did you drink at work, home, and everywhere else? Count one cup as one glass and count one bottle of water as two glasses. Count only a few sips, like from a water fountain, as less than one glass. Your best guess is fine.
Kahapon, gaano karaming baso ng tubig ang ininom ninyo sa trabaho, sa bahay at saan pa man? Bilangin ang isang tasa na isang baso at bilangin ang isang bote ng tubig na dalawang baso. Bilangin ang ilang sipsip, gaya ng mula sa water fountain, na kulang sa isang baso. Ayos lang ang inyong pinakamagaling na tantya.

AC47

IF NEEDED SAY: "Include tap water, like from a sink, faucet, fountain, or pitcher, and bottled water like Aquafina®. Do not include flavored sweetened water."]
[IF NEEDED, SAY: "Bilangin ang tubig na galing sa gripo, gaya ng nakukuha sa lababo, gripo, fountain, o pitsel at saka tubig na nakabote gaya ng Aquafina. Huwag bilangin ang tubig na pinamatamis at hinaluan ng pampalasa."]

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

LESS THAN 1 GLASS
(eg, SIPS FROM A FOUNTAIN) 99
NONE 0
REFUSED .... -7
DON'T KNOW .... -8

QA13_C10   Yesterday, how many glasses of nonfat or low-fat milk did you drink? Do not include 2% milk or whole milk.
Kahapon, ilang baso ng gatas na nonfat o low-fat ang inyong ininom?" Huwag bilangin ang gatas na 2% o whole.

AC48

[IF NEEDED, SAY: "Count one cup or 8 ounces as one glass."]
[IF NEEDED, SAY: "Bilangin ang isang tasa o ang 8 onsa na isang baso."]

[INTERVIEWER NOTE: ONLY INCLUDE UNDERLINE DAIRY MILK.]

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

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

Fast Food

QA13_C11   Now think about the <u>past week</u>. 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.

Ngayon, isipin ninyo ang <u>nakaraang linggo</u>. Nitong nakaraang 7 araw, ilang beses kayo kumain ng fast food? Bilangin ninyo ang mga fast food na kinain sa trabaho, sa bahay o sa mga restaurant, sa carryout o sa drive through.

> **AC31**

[IF NEEDED, SAY: "Such as food you get at McDonald's, KFC, Panda Express, or Taco Bell."]
[IF NEEDED, SAY: "Gaya ng pagkain na binibili ninyo sa McDonald's, KFC, Panda Express o Taco Bell."]

_____# OF TIMES IN PAST 7 DAYS

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

Access to Fresh and Affordable Foods

QA13_C12   How often can you find fresh fruits and vegetables in your neighborhood? Would you say…

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

> **AC42**

Never,...1
Hindi kailanman,..1
Sometimes, ...2
Paminsan-minsan 2
Usually, or 3
Karaniwan, o 3
Always? 4
Palagi? 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 QA13_C13:**
> **IF QA13_C12 = 2, 3, OR 4, THEN CONTINUE WITH QA13_C13;**
> **ELSE GO TO PROGRAMMING NOTE QA13_C14**

QA13_C13   How often are they affordable? Would you say…
                 Gaano kadalas na abot-kaya ang mga iyon? Masasabi ba ninyo na...

AC44

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

         Never,...1
         Hindi kailanman,.......................................1
         Sometimes, ...2
         Paminsan-minsan 2
         Usually, or 3
         Karaniwan, o 3
         Always? 4
         Palagi? 4
         REFUSED .... -7
         DON'T KNOW .... -8

Cigarette Use

QA13_C14   Now, I am going to ask about various health behaviors.
                 Ngayon, tatanungin ko kayo tungkol sa mga iba't-ibang ugaling pangkalusugan.

                 Altogether, have you smoked at least 100 or more cigarettes in your entire lifetime?
                 Sa kabuuan, higit pa sa 100 sigarilyo sa buong buhay ninyo?

AE15

         YES 1
         NO..2   **[GO TO QA13_C46]**
         REFUSED .... -7
         DON'T KNOW .... -8

QA13_C15   Do you now smoke cigarettes every day, some days, or not at all?
                 Naninigarilyo ba kayo ngayon nang araw-araw, ilang araw lamang, o hindi kailanman?

AE15A

         EVERY DAY...1
         SOME DAYS..2   **[GO TO PN QA13_C17]**
         NOT AT ALL..3   **[GO TO PN QA13_C18]**
         REFUSED .... -7   **[GO TO PN QA13_C18]**
         DON'T KNOW .... -8   **[GO TO PN QA13_C18]**

QA13_C16   On average, how many cigarettes do you now smoke a day?
                  Sa karaniwan, nakaka ilang sigarilyo ka sa isang araw?

AD32

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

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

                  REFUSED .... -7   **[GO TO PN QA13_C18]**
                  DON'T KNOW .... -8   **[GO TO PN QA13_C18]**

ROGRAMMING NOTE QA13_C17:
IF QA13_C15 = 2 (SMOKE SOME DAYS), CONTINUE WITH QA13_C17;
ELSE GO TO WITH QA13_C18

QA13_C17   In the past 30 days, when you smoked, how many cigarettes did you smoke per day?
                  Nitong nakaraang 30 araw, noong nanigarilyo kayo, naka-ilang sigarilo kayo sa bawat araw?

AE16

                  [IF NEEDED, SAY: "On the days you smoked." AND IF R SAYS, A "PACK", CODE THIS AS 20 CIGARETTES]
                  [IF NEEDED, SAY: "Sa mga araw na nanigarilyo kayo." 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 QA13_C18:
IF QA13_C15 = 1 (SMOKE EVERY DAY) OR 2 (SMOKE SOME DAYS), THEN CONTINUE WITH QA13_C18;
ELSE SKIP TO QA13_C46;

QA13_C18   How old were you when you <u>first</u> started to smoke cigarettes <u>fairly</u> regular?
                  Ano ang edad ninyo noong una kayong nagsimulang manigarilyo nang regular?
                  (CHIS 2014 ONLY)

AC52

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

                  NEVER SMOKED REGULARLY 0   **[SKIP TO QA13_C20]**
                  REFUSED .... -7   **[SKIP TO QA13_C20]**
                  DON'T KNOW .... -8   **[SKIP TO QA13_C20]**

QA13_C19   How long has it been since you smoked on a daily basis?
                  Gaanong katagal na kayo naninigarilyo nang araw-araw?
                  (CHIS 2014 ONLY)

AC53

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

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

> **PROGRAMMING NOTE QA13_C20:**
> **IF QA13_C15 = 2 (SMOKE SOME DAYS), THEN DISPLAY "On days when you smoke, how";**

QA13_C20   {On days when you smoke, how/How} soon after you awake do you usually smoke your first cigarette?
Sa karaniwang, gaanong katagal pagkatapos kayong gumising na humihithit kayo ng unang sigarilyo ninyo?
Sa mga araw na naninigarilyo kayo, gaanong katagal pagkatapos kayong gumising na humihithit kayo ng unang sigarilyo ninyo?
(CHIS 2014 ONLY)

AC54

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

_____ AMOUNT OF TIME

_____ UNIT OF TIME

MINUTES 1
HOURS 2
REFUSED .... -7
DON'T KNOW .... -8

QA13_C21   Where do you <u>usually</u> buy your cigarettes?
Saan kayo <u>karaniwang</u> bumibili ng mga sigarilyo ninyo?
(CHIS 2014 ONLY)

AC55

CONVENIENCE STORES OR GAS STATIONS......1
SUPER MARKETS 2
LIQUOR STORES OR DRUG STORES3 ....
TOBACCO DISCOUNT STORES...........................4
OTHER DISCOUNT OR WAREHOUSE STORES,
   SUCH AS WAL-MART OR COSTCO...................5
INDIAN RESERVATIONS.......................................6
MILITARY COMMISSARIES 7
ONLINE..8
SOMEWHERE ELSE? (Other specify:_____) . 91
I DON'T BUY.. 99   **[SKIP TO QA13_C23]**
REFUSED .... -7
DON'T KNOW .... -8

QA13_C22   How much do you usually pay for a pack of cigarettes?
Magkano ang karaniwang bayad ninyo para sa isang kaha ng sigarilyo?
 (CHIS 2014 ONLY)

AC56

_____ . _____ AMOUNT PER PACK

_____ . _____ AMOUNT PER CARTON

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

QA13_C23   The last time you purchased cigarettes, did you take advantage of coupons, rebates, buy 1 get 1
free, 2 for 1, or any other special promotions?
Noong huli kayong bumili ng sigarilyo, gumamit ba kayo ng mga coupon, rebate, bumili ng 1
bibigyan kayo ng 1 libre, 2 para sa 1, o anupamang ibang special promotion?
(CHIS 2014 ONLY)

AC57

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

QA13_C24   Do you usually smoke menthol or non-menthol cigarettes?
Sa karaniwan, menthol o non-menthol ba ang mga sigarilyo na hinihithit ninyo?
(CHIS 2014 ONLY)

AC58

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

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

QA13_C25   During the past 12 months, have you stopped smoking for one day or longer because you were
trying to quit smoking?
Nitong nakaraang 12 buwan, tumigil na ba kayo sa paninigarilyo nang isang araw man lang o
mas matagal pa dahil sinusubukan ninyong huminto sa paninigarilyo?
(CHIS 2014 ONLY)

AC49

YES 1
NO...2   **[GO TO QA13_C27]**
REFUSED .... -7   **[GO TO QA13_C27]**
DON'T KNOW .... -8   **[GO TO QA13_C27]**

QA13_C26   During the past 12 months, how many times have you tried to quit smoking for one day or longer?
Nitong nakaraang 12 buwan, ilang beses na kayo sumubok na huminto ng paninigarilyo nang
isang araw man lang o mas matagal?

AC59

_____ NUMBER OF TIMES

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

QA13_C27   Are you thinking about quitting smoking in the next six months?
Iniisip ba ninyong huminto sa paninigarilyo sa susunod na anim na buwan?

AC50

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

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

QA13_C29   There are many products called nicotine Replacement Therapy or NRT that replace nicotine to help people quit smoking. The last time you tried to quit, did you use a nicotine replacement therapy such as a…
May maraming produkto na tinatawag na Nicotine Replacement Therapy o NRT na kapalit ng nicotine para tulungan ang mga tao na huminto ng paninigarilyo. Noong huli kayong sumubok na huminto, gumamit ba kayo ng nicotine replacement therapy tulad ng...
(CHIS 2014 ONLY)

AC60

                        nicotine patch?
                        nicotine patch?

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

QA13_C30   [The last time you tried to quit, did you use a nicotine replacement therapy such as a…]
[Noong huli kayong sumubok na huminto, gumamit ba kayo ng nicotine replacement therapy tulad ng...]
(CHIS 2014 ONLY)

AC61

                        nicotine gum?
                        nicotine gum?

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

QA13_C30   [The last time you tried to quit, did you use a nicotine replacement therapy such as a…]
[Noong huli kayong sumubok na huminto, gumamit ba kayo ng nicotine replacement therapy tulad ng...]
(CHIS 2014 ONLY)

AC62

                        nicotine inhaler?
                        nicotine inhaler?

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

QA13_C31   [The last time you tried to quit, did you use a nicotine replacement therapy such as a…]
[Noong huli kayong sumubok na huminto, gumamit ba kayo ng nicotine replacement therapy tulad ng...]
(CHIS 2014 ONLY)

AC63

nicotine lozenge?
nicotine lozenge?

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

QA13_C32   There are prescription medications to help people quit smoking cigarettes. The last time you tried to quit, did you use …
May mga gamot na nirireseta para tulungan ang mga tao na huminto ng paninigarilyo. Noong huli kayong sumubok na huminto, gumamit ba kayo ng...
(CHIS 2014 ONLY)

AC64

Zyban, Wellbutrin, or Bupropion?
Zyban, Wellbutrin, o Bupropion?

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

QA13_C33   [The last time you tried to quit, did you use …]
[Noong huli kayong sumubok na huminto, gumamit ba kayo ng...]
(CHIS 2014 ONLY)

AC65

Prozac?
Prozac?

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

QA13_C34   [The last time you tried to quit, did you use …]
[Noong huli kayong sumubok na huminto, gumamit ba kayo ng...]
(CHIS 2014 ONLY)

AC66

Chantix or Varenicline?
Chantix o Varenicline?

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

QA13_C35   In the past 12 months, have you done any of the following to help you quit smoking? Did you…
Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan
kayong huminto ng paninigarilyo?
(CHIS 2014 ONLY)

AC67

Switch to "light" cigarettes?
Pinalitan ba ninyo ng "light" cigarette ang sigarilyo ninyo?

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

QA13_C36   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan
kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC68

Switch to smokeless tobacco?
Pinalitan ba ninyo ng smokeless tobacco ang sigarilyo ninyo?

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

QA13_C37   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan
kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC69

Quit completely on your own or "cold turkey"?
Lubusang huminto ba kayo sa sariling pagsisikap o nang "cold turkey"?

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

QA13_C38   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan
kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC70

Stop hanging out with friends who smoke?
Huminto ba kayo ng pakikihalubilo sa mga kaibigan na naninigarilyo?

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

QA13_C39   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC71

Try to quit with a friend?
Sinubukan ba ninyong huminto na kasabay ng isang kaibigan?

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

QA13_C40   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC72

Exercise more to help you quit smoking?
Nag-ehersisyo ba kayo nang mas matagal para tulungan kayong huminto ng paninigarilyo?

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

QA13_C41   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC73

Use herbal remedies for quitting smoking?
Gumamit ba kayo ng herbal remedies para huminto ng paninigarilyo?

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

QA13_C42   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC74

Use acupuncture or hypnosis to help you quit smoking?
Gumamit ba kayo ng acupuncture o ng hypnosis para tulungan kayong huminto ng paninigarilyo?

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

QA13_C43   [In the past 12 months, have you done any of the following to help you quit smoking? Did you…]
[Nitong nakaraang 12 buwan, ginawa ba ninyo ang alinman sa mga sumusunod para tulungan kayong huminto ng paninigarilyo?]
(CHIS 2014 ONLY)

AC75

Call a telephone quitting helpline?
Tumawag ba kayo sa telepono sa isang helpline para sa paghinto ng paninigarilyo?

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

QA13_C44   In the past 12 months, did a doctor or other health professional advise you to quit smoking?
Nitong nakaraang 12 buwan, pinayuhan ba kayo ng doktor o ng iba pang health professional na huminto ng paninigarilyo?
(CHIS 2014 ONLY)

AC77

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

QA13_C45   In the past 12 months, did a doctor or other health professional refer you to, or give you information about, a smoking cessation program?
Nitong nakaraang 12 buwan, ipinadala ba kayo ng doktor o ng iba pang health professional sa isang programa para sa paghinto ng paninigarilyo, o binigyan ba kayo ng impormasyon tungkol sa programa?
(CHIS 2014 ONLY)

AC78

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

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

QA13_C46   Have you ever smoked a Hookah pipe?
Humithit na ba kayo kahit kailan ng Hookah pipe?
(CHIS 2014 ONLY)

AC79

[IF NEEDED, SAY: "Hookah is also known as shisha (she-sha), nargila (nar-geela), argila (argeela), or lula. Smoke is passed through water in a glass waterpipe to cool and filter the smoke."]
[IF NEEDED, SAY: "Tinatawag din ang Hookah na shisha (she-sha), nargila (nar-geela), argila (argeela), o lula. Ipinadadaan ang usok sa tubig na nasa glass waterpipe para palamigin at salain ang usok.]

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

QA13_C47　　Do you now use a Hookah pipe every day, some days, or not at all?
　　　　　　Gumagamit ba kayo ngayon ng Hookah pipe araw-araw, may mga araw, o hindi kailanman?
　　　　　　(CHIS 2014 ONLY)

AC80

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

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

QA13_C48　　Have you ever smoked electronic cigarettes, also known as e-cigarettes or vaporizer cigarettes?
　　　　　　Humithit na ba kayo kahit kailan ng electronic cigarettes, tinatawag din na e-cigarettes o vaporizer cigarettes?
　　　　　　(CHIS 2014 ONLY)

AC81

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

[IF NEEDED, SAY: "Electronic cigarettes are devices that mimic traditional cigarette smoking, but the battery operated device produces vapor instead of smoke. The solutions used in the device may contain nicotine and are usually flavored."]
[IF NEEDED, SAY: "Ang electronic cigarettes ay mga aparato na tumutulad sa tradisyunal na paninigarilyo, pero ang aparato na gumagana sa pamamagitan ng baterya ay naglalabas ng singaw sa halip ng usok. Maaaring may nicotine ang mga solusyon na ginagamit sa aparato at karaniwang hinahaluan ng pampalasa.]

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

QA13_C49　　During the past 30 days, how many days did you use electronic cigarettes?
　　　　　　Nitong nakaraang 30 araw, ilang araw kayo gumamit ng electronic cigarettes?
　　　　　　(CHIS 2014 ONLY)

AC82

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

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

QA13_C50   What are your reasons for using electronic cigarettes?
Anu-ano ang mga dahilan ninyo sa paggamit ng electronic cigarettes?
(CHIS 2014 ONLY)

AC83

[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
OTHER (SPECIFY:_____)........................... 91
REFUSED .... -7
DON'T KNOW .... -8

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

QA13_C51   What are the current rules or restrictions about smoking inside your home? Would you say…
Anu-ano ang mga tuntunin o mga restriksyon sa kasalukuyan tungkol sa paninigarilyo sa loob ng inyong tahanan? Masasabi ba ninyo na...
(CHIS 2014 ONLY)

AC84

Smoking is completely banned for everyone, ...1
Lubusang ipinagbabawal sa lahat ang
paninigarilyo, ...1
Smoking is generally banned for everyone with
   few exceptions, ...2
Kalimitan, ipinagbabawal sa lahat ang
paninigarilyo pero may ilang eksepsyon, ...2
Smoking is allowed in some rooms only, or..............3
Pinahihintulutan ang paninigarilyo sa ilang
kwarto lamang, o...3
There are no rules or restrictions on smoking
inside your home?..4
Walang mga tuntunin o mga restriksyon sa
paninigarilyo sa loob ng inyong tahanan? 4
NO SMOKERS/NO NEED 5
VOLUNTARILY DON'T SMOKE INSIDE HOME 6
OTHER (SPECIFY:_____).............................. 91
REFUSED .... -7
DON'T KNOW .... -8

QA13_C52　Is your place of work completely smoke-free indoors?
Ang lugar na pinagtatrabahuhan ba ninyo ay ganap na walang naninigarilyo sa loob?
(CHIS 2014 ONLY)

AC85

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

QA13_C53　As far as you know, in the past 7 days, has anyone smoked in your work area?
Sa alam ninyo, nitong nakaraang 7 araw, mayroon bang nanigarilyo sa lugar na pinagtatrabahuhan ninyo?
(CHIS 2014 ONLY)

AC86

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

QA13_C54　How many people with whom you regularly interact, including close friends and family, smoke cigarettes?
Ilan sa mga taong nakakahalubilo ninyo nang regular, kasama ang matalik na mga kaibigan at kamag-anak, ang naninigarilyo?
(CHIS 2014 ONLY)

AC87

_____ NUMBER OF PEOPLE

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

QA13_C55　Please think about any messages against smoking that you saw on TV, heard on the radio, or saw on a billboard. In the past 60 days, did you see…
Mangyaring isipin ang anumang mensaheng kontra sa paninigarilyo na nakita ninyo sa TV, narinig ninyo sa radyo, o nakita ninyo sa billboard. Nitong nakaraang 60 araw, nakakita ba kayo ng...
(CHIS 2014 ONLY)

AC88

a lot of messages against smoking, ...1
Maraming mensahe na kontra sa paninigarilyo, ...1
a few messages against smoking, or 2
Kaunti lang na mga mensahe na kontra sa
paninigarilyo, o 2
no messages against smoking? 3
Walang mensahe na kontra sa paninigarilyo? 3
NEVER/RARELY WATCH TV OR LISTEN TO
　　THE RADIO 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_C56   In the last few years, do you think advertising for tobacco products has…
Nitong nakaraang ilang taon, sa palagay ba ninyo ang pag-aanunsyo para sa mga produkto ng tabako ay...
(CHIS 2014 ONLY)

AC89

increased a lot,...1
Malaki ang idinami, ...1
increased a little, ...2
Dumami nang bahagya,..2
stayed the same,..3
Nanatiling pareho lamang, ...3
decreased a little, or..4
Nabawasan nang bahagya, o 4
decreased a lot?...5
Malaki ang nabawas? 5
REFUSED .... -7
DON'T KNOW .... -8

QA13_C57   Please tell me if you agree or disagree with each of the following statements.

Mangyaring sabihin sa akin kung sang-ayon kayo o di-sang-ayon sa bawat isa sa sumusunod na mga pahayag.
(CHIS 2014 ONLY)

AC90

Taking a stand against smoking is important to you.
Importante para sa inyo ang paninindigan na kontra sa paninigarilyo.

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

QA13_C58   You want to be involved in efforts to get rid of smoking.
Gusto ninyong sumali sa mga pagpupunyagi na pawiin ang paninigarilyo.
(CHIS 2014 ONLY)

AC91

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

QA13_C59　　How much additional tax on a pack of cigarettes would you be willing to support if all the money raised was used to fund programs aimed at preventing smoking among children, and other health care programs? Would you support a tax increase of…

Magkanong karagdagang buwis sa isang kaha ng sigarilyo ang payag kayong itaguyod kung lahat ng perang maiipon ay gagamiting pampondo sa mga programang may layunin na pigilin ang paninigarilyo sa mga bata, at iba pang mga programa para sa pangangalaga sa kalusugan? Itataguyod ba ninyo ang karagdagang buwis na… (CHIS 2014 ONLY)

AC92

　　　　　　　50 cents a pack,..1
　　　　　　　50 cents sa bawat kaha, ...1
　　　　　　　$1.00, ...2
　　　　　　　$1.00, ...2
　　　　　　　$2.00, ...3
　　　　　　　$2.00, ...3
　　　　　　　$3.00, ...4
　　　　　　　$3.00, ...4
　　　　　　　more than $3.00 a pack, or 5
　　　　　　　Mahigit sa $3.00 sa bawat kaha, o 5
　　　　　　　no tax increase?...6
　　　　　　　Walang karagdagang buwis?...................................6
　　　　　　　REFUSED .... -7
　　　　　　　DON'T KNOW .... -8

QA13_C60　　Please tell me if you think smoking should be allowed or not allowed in each of the following places:

Mangyaring sabihin sa akin kung sa palagay ninyo dapat pahintulutan o hindi dapat pahintulutan ang paninigarilyo sa bawat isa sa sumusunod na mga lugar:

AC93

Outdoor public places like parks, beaches, golf courses, zoos, and sports stadiums.
Mga pampublikong lugar sa labas tulad ng parks, beaches, golf courses, zoos, at sports stadiums. (CHIS 2014 ONLY)

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

QA13_C61　　Outdoor restaurant dining patios.
Outdoor restaurant dining patios.

(CHIS 2014 ONLY)

AC94

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

QA13_C62   Indian casinos.
Indian casinos.
(CHIS 2014 ONLY)

AC95

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

QA13_C63   Do you agree or disagree that there should be a total ban on smoking everywhere in your city or town, except in one's home?
Sang-ayon ba kayo o di-sang-ayon na dapat may ganap na pagbabawal sa paninigarilyo sa lahat ng lugar sa loob ng inyong lungsod o bayan, maliban sa sariling tahanan?
(CHIS 2014 ONLY)

AC96

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

Alcohol use/Abuse

QA13_C64   Now think about the past 12 months. Over that time, did you have any kind of alcoholic drink?
Ngayon, isipin ninyo ang nakaraang 12 buwan. Sa panahong iyon, uminom ba kayo ng anumang uri ng inuming may alkohol?

AC32

[IF NEEDED, SAY: "Your best guess is fine."]
[IF NEEDED, SAY: Ayos lang ang inyong pinakamagaling na tantya.]"

> YES 1
> NO...2   **[GO TO QA13_D1]**
> REFUSED .... -7   **[GO TO QA13_D1]**
> DON'T KNOW .... -8   **[GO TO QA13_D1]**

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

QA13_C65   In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?
Nitong nakaraang 12 buwan, mga ilang beses kayo uminom ng 5 o mahigit pang inuming may alkohol sa isang araw?

AC34

[IF NEEDED, SAY: "By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor."]
[IF NEEDED, SAY: "Sa inumin, ang ibig naming sabihin ay isang 12-onsang lata o baso ng beer, isang 5-onsang baso ng wine, isang cocktail, o isang shot ng alak."]

> _____TIMES   [HR: 0-365; SR: 0-99]   **[GO TO QA13_D1]**
>
> REFUSED .... -7   **[GO TO QA13_D1]**
> DON'T KNOW .... -8   **[GO TO QA13_D1]**

QA13_C65   In the past 12 months, about how many times did you have 4 or more alcoholic drinks in a single day?
Nitong nakaraang 12 buwan, mga ilang beses kayo uminom ng 4 o mahigit pang inuming may alkohol sa isang araw?

AC35

[IF NEEDED, SAY: "By drink, we mean a 12 ounce can or glass of beer, a 5 ounce glass of wine, a mixed drink, or a shot of liquor."]
[IF NEEDED, SAY: "Sa inumin, ang ibig naming sabihin ay isang 12 onsang lata o baso ng beer, isang 5 onsang baso ng wine, isang cocktail, o isang shot ng alak."]

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

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

Section D – General Health, Disability, and Sexual Health

Height and Weight

QA13_D1   These next questions are about your height and weight.
Tungkol sa inyong tangkad at timbang ang sumusunod na mga tanong.

How tall are you without shoes?
Gaano katangkad kayo kapag walang suot na sapatos?

AE17

[IF NEEDED, SAY: "About how tall?"]
[IF NEEDED, SAY: "Humigit-kumulang, gaano katangkad?"]

_____ FEET   _____ INCHES   [FT HR: 3-7, IN HR: 0-11]
_____ METERS   _____ CENTIMETERS [M HR: 1-2, CM HR: 0-99]

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

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

QA13_D2   {When not pregnant, how/How} much do you weigh without shoes?
Gaano kabigat kayo kapag walang suot na sapatos?
Kapag hindi buntis, gaano kabigat kayo kapag walang suot na sapatos?

AE18

[IF NEEDED, SAY: "About how much?"]
[IF NEEDED, SAY:"Humigit-kumulang, gaano?"]

_____ POUNDS   [HR: 50-450]
_____ KILOGRAMS   [HR: 20-220]

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

Disability

QA13_D3   Are you blind or deaf, or do you have a severe vision or hearing problem?
Kayo ba ay bulag, o bingi, o may malubhang problema sa paningin o pandinig?

AD50

YES 1
NO 2   **[GO TO QA13_D5]**
REFUSED .... -7   **[GO TO QA13_D5]**
DON'T KNOW .... -8   **[GO TO QA13_D5]**

QA13_D4   Are you legally blind?
Kayo ba ay legally blind?

AL8

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

QA13_D5   Do you have a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?
Mayroon ba kayong karamdaman na naglilimita sa isa o higit pang pangunahing gawaing pisikal gaya ng paglalakad, pag-akyat ng hagdanan, pag-aabot, pagbubuhat, o pagbibitbit?

AD57

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

QA13_D6   Because of a physical, mental, or emotional condition lasting 6 months or more, do you have any of the following:
Dahil sa karamdamang pisikal, mental, o emosyonal na tumagal nang 6 na buwan o mahigit pa, nakakaranas ba kayo ng anuman sa sumusunod:

Any difficulty learning, remembering, or concentrating?
Anumang kahirapan na matuto, na makaalala, o na mag-concentrate?

AD51

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

QA13_D7   Any difficulty dressing, bathing, or getting around inside the home?
Anumang kahirapan sa pagbihis, sa pagligo, o sa pagkilos sa loob ng tahanan?

AD52

[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]
[IF NEEDED, SAY: "Dahil sa karamdamang pisikal, mental, o emosyonal na nagtagal nang 6 na buwan o mahigit pa."]

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

QA13_D8   Any difficulty going outside the home alone to shop or visit a doctor's office?
Anumang kahirapang umalis sa bahay nang mag-isa para mamili o magpatingin sa doktor?

AD53

[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]
[IF NEEDED, SAY: Dahil sa karamdamang pisikal, mental, o emosyonal na nagtagal nang 6 na buwan o mahigit pa."]

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

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

QA13_D9   Any difficulty working at a job or business?
Anumang kahirapang magtrabaho sa empleo o sa negosyo?

AD54

[IF NEEDED, SAY: "Because of a physical, mental, or emotional condition lasting 6 months or more."]
[IF NEEDED, SAY: Dahil sa karamdamang pisikal, mental, o emosyonal na nagtagal nang 6 na buwan o mahigit pa."]

YES 1
NO...2   **[GO TO PN QA13_D11]**
REFUSED .... -7   **[GO TO PN QA13_D11]**
DON'T KNOW .... -8   **[GO TO PN QA13_D11]**

QA13_D10   Do you have a physical or mental condition that has kept you from working for at least a year?
Mayroon ba kayong karamdamang pisikal o pang-isip na pumigil sa inyo na magtrabaho nang hindi kukulangin sa isang taon?

AL8A

[IF NEEDED, SAY "Current condition."]
[IF NEEDED, SAY: "Kasalukuyang karamdaman."]

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

Sexual Partners

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

QA13_D11   We are asking a few questions about people's sexual experiences. All answers will be kept private.
May ilang tanong kami tungkol sa mga karanasang sexual ng mga tao. Pananatilihing lihim ang lahat ng mga sagot.

In the <u>past 12 months</u>, how many sexual partners have you had?
Nitong <u>nakaraang 12 buwan</u>, ilan na ang naging katalik ninyo?

AD43

_____ NUMBER OF SEXUAL PARTNERS   **[GO TO PN QA13_D13]**

REFUSED .... -7   **[GO TO PN QA13_D13]**
DON'T KNOW .... -8

QA131_D12   Can you give me your best guess?
Maaari bang sabihin ninyo sa akin ang inyong pinakamagaling na tantya?

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

Sexual Orientation

PROGRAMMING NOTE QA13_D13:
IF QA13_D11 = 0 (NO SEXUAL PARTNERS IN LAST 12 MONTHS) OR QA13_D12=0, GO TO
PROGRAMMING NOTE QA13_D14;
ELSE CONTINUE WITH QA13_D13;
IF QA13_D11 OR QA13_D12 = 1 (ONE PARTNER IN LAST 12 MONTHS), DISPLAY "Is that partner male or
female";
ELSE DISPLAY "In the past 12 months, have your sexual partners been male, female, or both male and
female"

QA13_D13   {Is that partner male or female/In the past 12 months, have your sexual partners been male,
female, or both male and female}?
Nitong nakaraang 12 buwan, lalaki ba, babae o parehong lalaki at babae ang mga naging katalik
ninyo?
Lalaki ba o babae ang katalik na iyon?

AD45

MALE 1
FEMALE...2
BOTH MALE AND FEMALE 3
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_D14:
IF QA13_A5 = 1 (MALE), DISPLAY "Gay" IN QUESTION AND "Gay" IN HELP SCREEN;
ELSE IF QA13_A5 =2 (FEMALE), DISPLAY "Gay, Lesbian" IN QUESTION AND "Gay and Lesbian" IN HELP
SCREEN

QA13_D14   Do you think of yourself as straight or heterosexual, as gay {,lesbian} or homosexual, or bisexual?
Tinuturing ba ninyo ang sarili ninyo na straight o heterosexual, na gay, lesbian, o homosexual, o
bisexual?

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

STRAIGHT OR HETEROSEXUAL 1
GAY, LESBIAN, OR HOMOSEXUAL 2
BISEXUAL..3
NOT SEXUAL/CELIBATE/NONE 4
OTHER (SPECIFY: _____) 5
REFUSED .... -7
DON'T KNOW .... -8

HIV Testing

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

QA13_D15   Have you <u>ever</u> been tested for HIV, the virus that causes AIDS?
                 Na-test na po ba kayo para sa HIV, ang virus na sanhi ng AIDS?

AD55

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

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

QA13_D16   In the past year, how many times have you been tested for HIV?
                 Nitong nakaraang taon, ilang beses na kayo nagpa-test para sa HIV?

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

QA13_D17   When was your last HIV test?
                 Kailan ang inyong huling test para sa HIV?

AD63

                        MONTH _____   [RANGE: 1-12]

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

                        YEAR _____   [RANGE: 1985-2013]

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

QA13_D18   Was the result of your HIV test positive or negative?
                 Positibo ba o negatibo ang resulta ng inyong test para sa HIV?

AD64

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

Registered Domestic Partner

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

QA13_D19   Are you legally married to someone of the same sex?
                 Legal na kasal ba kayo sa taong may katulad na kasarian?

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 SECTION E]**
                          NO 2
                          REFUSED .... -7
                          DON'T KNOW .... -8

QA13_D20   Are you recognized by the state of California as a legally registered domestic partner to someone of the same sex?
                 Kinikilala ba kayo ng State of California bilang nakarehistrong legal na domestic partner ng taong may katulad na kasarian?

AD61

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

Section F – Mental Health

K6 Mental Health Assessment

QA13_F1   The next questions are about how you have been feeling during the past 30 days.
Tungkol sa inyong mga nadama nitong nakaraang 30 araw ang sumusunod na mga tanong.

About how often during the past 30 days did you feel nervous—Would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?
Humigit-kumulang, gaano kadalas nitong nakaraang 30 araw kayo nakaramdam ng pagkanerbiyos - Masasabi ba ninyong palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

AJ29

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

QA13_F2   During the past 30 days, about how often did you feel hopeless—all of the time, most of the time, some of the time, a little of the time, or none of the time?
Nitong nakaraang 30 araw, humigit-kumulang, gaano kadalas kayo nakaramdam na wala na kayong pag-asa - palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

AJ30

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

QA13_F3   During the past 30 days, about how often did you feel restless or fidgety?
Nitong nakaraang 30 araw, gaano kadalas kayo nakaramdam ng pagkabalisa o ng di-mapalagay?

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

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

QA13_F4   How often did you feel so depressed that nothing could cheer you up?
Gaano kadalas kayo nakaramdam ng masyadong pagka-depress na walang anumang
makapagpatuwa sa inyo?

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

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

QA13_F5   During the past 30 days, about how often did you feel that everything was an effort?
Nitong nakaraang 30 araw, gaano kadalas kayo nakaramdam na napakahirap gawin ang lahat?

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

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

QA13_F6   During the past 30 days, about how often did you feel worthless?
Nitong nakaraang 30 araw, gaano kadalas kayo nakaramdam na bale-wala kayo?

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

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

Repeated K6

QA13_F7   Was there ever a month in the past 12 months when these feelings occurred more often than they did in the past 30 days?
Mayroon bang buwan nitong nakaraang 12 buwan na mas madalas Ninyong naranasan ang mga damdaming ito kaysa nitong nakaraang 30 araw?

AF62

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

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

QA13_F8   The next questions are about the one month in the past 12 months when you were at your worst emotionally.
Ang sumusunod na mga tanong ay tungkol sa kaisa-isang buwan nitong nakaraang 12 buwan kung kailan pinakamalala ang kalagayan ng damdamin ninyo.

During that same month, how often did you feel nervous- all of the time, most, some, a little, or none of the time?
Noong buwan na iyon, gaano kadalas kayo nakaramdam ng pagkanerbiyos - palagi, kadalasan, paminsan-minsan, kaunting panahon lang, o hindi kailanman?

AF63

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

QA13_F9   During that same month, how often did you feel hopeless- all of the time, most, some, a little, or none of the time?
Noong buwan ding na iyon, gaano kadalas kayo nakaramdam ng kawalang pag-asa - palagi, kadalasan, paminsan- minsan, kaunting panahon lang, o hindi kailanman?

AF64

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

QA13_F10   How often did you feel restless or fidgety?
Gaano kadalas kayo nakaramdam ng pagkabalisa o di-mapalagay?

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

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

QA13_F11   How often did you feel so depressed that nothing could cheer you up?
Gaano kadalas kayo nakaramdam ng masyadong pagka-depress na walang anumang makapagpatuwa sa inyo?

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

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

QA13_F12   How often did you feel that everything was an effort?
Gaano kadalas kayo nakaramdam na napakahirap gawin ang lahat?

AF67

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]
[IF NEEDED, SAY: "Palagi, kadalasan, paminsan-minsan, kaunting panahon lang o hindi kailanman?"]

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

QA13_F13   How often did you feel worthless?
Gaano kadalas kayo nakaramdam na bale-wala kayo?

AF68

[IF NEEDED, SAY: "All of the time, most of the time, some of the time, a little of the time, or none of the time?"]
[IF NEEDED, SAY: "Palagi, kadalasan, paminsan- minsan, kaunting panahon lang o hindi kailanman?"]

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

Sheehan Scale

```
ADD REVERSE CODING OF K6 CALCULATION AS TEMPORARY VARIABLE HERE:
PROGRAMMING NOTE QA13_F14intro:
IF (QA13_F1 + QA13_F2 + QA13_F3 + QA13_F4 + QA13_F5 + QA13_F6 > 8) OR
(QA13_F8 + QA13_F9 + QA13_F10 + QA13_F11 + QA13_F12 + QA13_F13 > 8) OR
(IF QA13_F1-F6 = ONE OUT OF RANGE RESPONSE AND F1-F6 > 7) OR
(IF QA13_F8-F13 = ONE OUT OF RANGE RESPONSE AND F8-F13 > 7) THEN CONTINUE WITH
QA13_F14intro;
IF QA13_F7 = 1 THEN DISPLAY "again, please";
ELSE SKIP TO QA13_F19
```

QA13_F14intro   Think {again, please} about the month in the past 12 months when you were at your worst emotionally.
Isipin ninyo ang kaisa-isang buwan nitong nakaraang 12 buwan kung kailan pinakamalala ang kalagayan ng emosyon ninyo.

```
PROGRAMMING NOTE QA13_F14:
IF AGE > 70 GO TO QA13_F15;
ELSE CONTINUE WITH QA13_F14
```

QA13_F14   Did your emotions interfere a lot, some, or not at all with your performance at work?
Masyado bang nakasagabal ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa paggawa ninyo ng trabaho?

AF69B

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

QA13_F15   Did your emotions interfere a lot, some, or not at all with your household chores?
Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa
mga gawaing-bahay?

AF70B

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

QA13_F16   Did your emotions interfere a lot, some, or not at all with your social life?
Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa
inyong pakikipagsosyalan?

AF71B

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

QA13_F17   Did your emotions interfere a lot, some, or not at all with y our relationship with friends and
family?
Sobra bang nakasagabal ba ang inyong mga emosyon, paminsan-minsan, o hindi kailanman sa
pakikipag- kapwa ninyo sa mga kaibigan at kaanak?

AF72B

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

QA13_F18   Now think about the past 12 months. About how many days out of the past 365 days were you
<u>totally unable</u> to work or carry out your normal activities because of your feeling nervous,
depressed, or emotionally stressed?
Isipin ang nakaraan taon. Humigit-kumulang, ilang araw sa nakaraang 365 araw kayo
<u>masyadong nawalan ng kakayahan</u> na magtrabaho o gumawa ng mga pangkaraniwang gawain
dahil kinakabahan, nadi-depress, o naguguluhan ang emosyon ninyo?

AF73B

                  [IF NEEDED, SAY: "You can use any number between 0 and 365 to answer."]
                  [IF NEEDED, SAY: Maaari kayong sumagot ng anumang bilang sa pagitan ng 0 at 365.]

                  _____NUMBER OF DAYS

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

Access & Utilization

QA13_F19   Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your mental health emotions or nerves or your use of alcohol or drugs?
Nagkaroon ba ng panahon nitong nakaraang 12 buwan na nadama ninyong maaaring kailanganin magpatingin sa propesyonal dahil sa mga problema sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom ng alcohol o paggamit ng mga droga?

AF81

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

QA13_F20   Does your insurance cover treatment for mental health problems, such as visits to a psychologist or psychiatrist?
Saklaw ba ng inyong insurance ang paggagamot sa mga karamdamang nauugnay sa kalusugang pangkaisipan, gaya ng mga pagpapatingin sa psychologist o psychiatrist?

AJ1

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

QA13_F21   In the past 12 months have you seen your primary care physician or general practitioner for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?
Nitong nakaraang 12 buwan nagpatingin na ba kayo sa inyong primary care doctor o sa general practitioner para sa mga problema sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom alkohol o paggamit ng mga droga?

AF74

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

QA13_F22   In the past 12 months have you seen any other professional, such as a counselor, psychiatrist, or social worker for problems with your mental health, emotions, nerves, or your use of alcohol or drugs?
Nitong nakaraang 12 buwan, nagpatingin na ba kayo sa sinumang iba pang propesyonal, gaya ng counselor, psychiatrist, o social worker para sa mga problem sa inyong kalusugang pangkaisipan, mga emosyon, mga nerbiyos o sa inyong pag-inom alkohol o paggamit ng mga droga?

AF75

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

PROGRAMMING NOTE QA13_F23:
IF QA13_F21 = 1 OR QA13_F22 = 1 THEN CONTINUE WITH QA13_F23;
ELSE SKIP TO QA13_F28

QA13_F23   Did you seek help for your mental or emotional health or for an alcohol or drug problem?
Humingi ba kayo ng tulong para sa inyong kalusugang pangkaisipan o pang-emogyon, o para sa problema sa pag-inom ng alcohol o sa paggamit ng droga?

AF76

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

PROGRAMMING NOTE QA13_F24:
IF QA13_F23 = 1, DISPLAY: "mental or emotional health";
IF QA13_F23 = 2, DISPLAY: "use of alcohol or drugs";
IF QA13_F23 = 3, DISPLAY: "mental or emotional health and your use of alcohol or drugs";
ELSE SKIP TO QA13_F25

QA13_F24   In the past 12 months, how many visits did you make to a professional for problems with your {mental or emotional health/use of alcohol or drugs/mental or emotional health and your use of alcohol or drugs}? Do not count overnight hospital stays.
Nitong nakaraang 12 buwan, ilang beses kayo nagpatingin sa propesyonal para sa mga problema sa inyong kalusugang pangkaisipan o pang-emogyon? Huwag bilangin ang mga magdamag na pagpapa-ospital

AF77

_____ NUMBER OF VISITS

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

QA13_F25   Are you still receiving treatment for these problems from one or more of these providers?
Patuloy pa ba kayong nagpapagamot para sa ganitong mga problema sa isa o higit pang tinukoy na mga provider?

AF78

YES 1   [GO TO QA13_F28]
NO..2
REFUSED .... -7   [GO TO QA13_F28]
DON'T KNOW .... -8   [GO TO QA13_F28]

QA13_F26   Did you complete the recommended full course of treatment?
Kinumpleto ba ninyo ang buong inirekomendang program ng paggagamot?

AF79

YES 1   [GO TO QA13_F28]
NO..2
REFUSED .... -7   [GO TO QA13_F28]
DON'T KNOW .... -8   [GO TO QA13_F28]

QA13_F27   What is the MAIN REASON you are no longer receiving treatment?
Ano ang <u>pangunahing dahilan</u> na hindi na kayo ginagamot?

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

QA13_F28   During the past 12 months, did you take any prescription medications, such as an antidepressant or sedative, almost daily for two weeks or more, for an emotional or personal problem?
Nitong nakaraang 12 buwan, uminom ba kayo ng anumang mga gamot na inireseta, gaya ng antidepressant o sedative, nang halos araw-araw nang dalawang lingo o higit pa, para sa problemang emotional o personal?

AJ5

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

Stigma

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

QA13_F29   Here are some reasons people have for not seeking help even when they think they might need it. Please tell me "yes" or "no" for whether each statement applies to why you did not see a professional.
Narito ang ilang katwiran ng iba kung bakit hindi sila humigni ng tulong kahit na sa palagay nila na kakailanganin nila ito. Pakisagot ng "oo" o "hindi" kung tugma ang bawat statement sa katwiran kung bakit hindi nagpatingin sa propesyonal.

You were concerned about the cost of treatment.
Nabahala kayo sa gastos ng paggamot.

AF82

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

QA13_F30   You did not feel comfortable talking with a professional about your personal problems.
Hindi kayo komportableng nakikipag-usap sa propesyonal tungkol sa inyong personal na mga problema.

AF83

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

QA13_F31   You were concerned about what would happen if someone found out you had a problem.
Kayo ay worried sa mangyayari kung maka-alam na may problema kayo.

AF84

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

QA13_F32   You had a hard time getting an appointment.
Nahirapan kayong makakuha ng appointment.

AF85

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

Section G – Demographic Information, Part II

Country of Birth (Self, Parents)

QA13_G1   Now a few more questions about your background.
Ngayon, mayroon akong ilang tanong tungkol sa inyong
background.

In what country were you born?
Saang bansa kayo ipinanganak?

| AH33 |

[SELECT FROM MOST LIKELY COUNTRIES]

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

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

QA13_G2   In what country was your mother born?
Saang bansa ipinanganak ang nanay ninyo?

AH34

[SELECT FROM MOST LIKELY COUNTRIES]

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

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

QA13_G3   In what country was your father born?
Saang bansa ipinanganak ang tatay ninyo?

AH35

[SELECT FROM MOST LIKELY COUNTRIES]

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

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

Language Spoken at Home

QA13_G4 What languages do you speak at home?
Ano ang mga wika na ginagamit niyo sa tahanan?

AH36

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

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

Additional Language Use

PROGRAMMING NOTE QA13_G5:
IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA13_G5;
IF INTERVIEW CONDUCTED IN ENGLISH AND QA13_G4 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA13_G5 AND DISPLAY: "Since you speak a language other than English at home, we are interested in the languages you use in other situations";
ELSE IF QA13_G4 = 1 ONLY (ENGLISH IS ONLY LANGUAGE SPOKEN AT HOME), GO TO QA13_G7

QA13_G5 In what languages are the TV shows, radio stations, or newspapers that you usually
watch, listen or read?
Sa anong wika ang mga palabas sa TV, ang mga istasyon ng radio o ang mga pahayagan na
karaniwang pinapanuod, pinakikinggan, o binabasa ninyo?

AG21

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

PROGRAMMING NOTE QA13_G6:
IF INTERVIEW CONDUCTED IN ENGLISH AND QA13_G4 >1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME), CONTINUE WITH QA13_G6 AND DISPLAY: "Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English" AND DROP RESPONSE CATEGORY "Not at all?";
ELSE IF INTERVIEW NOT CONDUCTED IN ENGLISH, CONTINUE WITH QA13_G6.
ELSE GO TO PROGRAMMING NOTE QA13_G7

QA13_G6   {Since you speak a language other than English at home, we are interested in your own opinion of how well you speak English.} Would you say you speak English…
Dahil nagsasalita kayo sa tahanan ng wikang iba sa Ingles, interesado kami sa inyong palagay kung gaano kahusay kayo mag-Ingles. Masasabi ba ninyo na nag-i-Ingles kayo nang...

AH37

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

Citizenship and Immigration

PROGRAMMING NOTE QA13_G7:
IF QA13_G1 = 1 (USA) OR 2 (AMERICAN SAMOA) OR 9 (GUAM) OR 22 (PUERTO RICO) OR 26 (VIRGIN ISLANDS), GO TO PROGRAMMING NOTE QA13_G10;
ELSE CONTINUE WITH QA13_G7

QA13_G7   The next questions are about citizenship and immigration.
Tungkol sa citizenship at immigration ang mga sumusunod na tanong.

Are you a citizen of the United States?
Citizen ba kayo ng United States?

AH39

YES 1   **[GO TO QA13_G9]**
NO..2
APPLICATION PENDING 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_G8   Are you a permanent resident with a green card? Your answers are confidential and will not be reported to Immigration Services.
Permanent resident ba kayo na may green card? Kumpidensyal po ang mga sagot ninyo at hindi it iuulat sa Immigration Services.

AH40

[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]
[IF NEEDED, SAY: Tinatawag ito na "Green Card" ngunit maaari ding rosas, asul o puti ang kulay nito."]

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

QA13_G9   About how many years have you lived in the United States?
Humigit-kumulang, ilang taon na kayong nakatira sa United States?

AH41

[FOR LESS THAN A YEAR, ENTER 1 YEAR]

_____ NUMBER OF YEARS
_____ YEAR (FIRST CAME TO LIVE IN U.S.)

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

Spouse/Partner

PROGRAMMING NOTE QA13_G10:
IF [QA13_A16 = 1 OR 2 (MARRIED OR LIVING WITH PARTNER)] OR [QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)], THEN CONTINUE WITH QA13_G10;
IF QA13_A16 = 1, THEN DISPLAY "spouse";
IF QA13_A16 = 2 OR QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";
ELSE GO TO PROGRAMMING NOTE QA13_G12

QA13_G10   Is your {spouse/partner} also living in your household?
Nakatira din ba ang inyong {asawa} sa inyong bahay?

AH44

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

QA13_G11   May I have your {spouse/partner}'s first name and age?
                 Maaari ko bang makuha ang unang pangalan at ang edad ng inyong {partner}?

SC11A

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

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

Living with Parents

PROGRAMMING NOTE QA13_G12:
IF [AAGE < 30 OR QA13_A4 = 1 (AGE 18-29)] AND QA13_G10 = 1 (SPOUSE/PARTNER LIVING IN HH) AND 3 OR MORE ADULTS LIVE IN HH, CONTINUE WITH QA13_G12;
IF [AAGE < 30 OR QA13_A4 = 1 (AGE 18-29)] AND QA13_A16 = 3, 4, 5, 6, -7, OR -8 (WIDOWED, DIVORCED, SEPARATED, NEVER MARRIED, REF, DK) AND 2 OR MORE ADULTS LIVING IN HH, CONTINUE WITH QA13_G12;
ELSE GO TO PROGRAMMING NOTE QA13_G13

QA13_G12   Are you now living with either of your parents?
                 Nakatira ba kayo ngayon na kasama ang sinuman sa mga magulang ninyo?

AH43A

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

Child and Teen Selection

PROGRAMMING NOTE QA13_G13:
IF COMPLETED CHILD 1ST INTERVIEW, SKIP TO QA13_G19;
ELSE CONTINUE WITH QA13_G13

QA13_G13   Are there any children under the age of 18 living in the household, including babies?
                 Mayroong bang anumang mga bata na mas bata sa 18 taong gulang na nakatira sa bahay, kabilang ang mga sanggol?

SC12

                        YES 1
                        NO 2   **[GO TO QA13_G21]**
                        REFUSED .... -7   **[GO TO QA13_G21]**
                        DON'T KNOW .... -8   **[GO TO QA13_G21]**

QA13_G14   Please tell me only the first names and ages of all the children under 18, including babies, who normally live in your household.
  Pakisabi nga po ang pangalan lang at edad ng lahat ng mga bata na wala pang labing walong (18) taong gulang, kasama ang mga sanggol, na nakatira sa bahay n'yo.

SC13A

[PROBE: "Is there anyone else?"]
[PROBE: Meron pa po bang iba?]

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

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

QA13_G15   Is (CHILD) …
Si {CHILD} ba ay ...

SC15A

0 To 11 years old or 1   **[CODE AS CHILD]**
0 hanggang 11 taong gulang, o 1   **[CODE AS CHILD]**
12 To 17 years old? 2   **[CODE AS TEEN]**
12 hanggang 17 taong gulang? 2   **[CODE AS TEEN]**
REFUSED .... -7   **[CODE AS TEEN]**
DON'T KNOW .... -8   **[CODE AS TEEN]**

QA13_G16   I have recorded {number} {child/children} under 18 in the household. Have I missed any children under 18 who usually live here but are temporarily away?
Itinala ko na walang mga bata na mas bata sa 18 taong gulang sa bahay. May nakaligtaan ba tayo na sinumang bata na mas bata sa 18 na karaniwang nakatira dito pero pansamantalang wala dito?
Itinala ko na may 1 bata na mas bata sa 18 taong gulang sa bahay. May nakaligtaan ba tayo na sinumang bata na mas bata sa 18 na karaniwang nakatira dito pero pansamantalang wala dito?

SC13

NO ONE MISSED -- ROSTER IS CORRECT 1
RETURN TO ROSTER 2   **[GO BACK TO QA13_G14]**

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

QA13_G17   Are you the parent or legal guardian of (PERSON NAME/AGE/SEX)?
Kayo ba ang magulang o ang legal na tagapag-alaga ni {PERSON NAME/AGE/SEX}?

SC14A

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

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

QA13_G18   Is (NAME/AGE/SEX) the parent or legal guardian of (PERSON NAME/AGE/SEX)?
Si {NAME/AGE/SEX} ba ang magulang o ang legal na tagapag- alaga ni {PERSON NAME/AGE/SEX}?

SC14B

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

Paid Child Care

PROGRAMMING NOTE QA13_G19:
IF QA13_G13 = 1 (YES, CHILDREN UNDER 18 IN HH) AND ANY CHILDREN IN QA13_G14 ARE AGE 13 OR
LESS, CONTINUE WITH QA13_G19;
ELSE GO TO QA13_G21;
IF ANY CHILD IN ROSTER QA13_G14 < 14 AND ≥ 14 DISPLAY "for any children under age 14";
IF QA13_A16 = 1 (MARRIED) AND QA13_G10 =1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or
your spouse";
 ELSE IF QA13_G10 = 1 (SPOUSE/PARTNER LIVING IN HH), DISPLAY "you or your partner";
ELSE DISPLAY "you"

QA13_G19   In the past month, did you use any paid childcare {for any children under age 14} while {you or
your spouse/you or your partner/you} worked, were in school, or looked for work?
Nitong nakaraang buwan, gumamit ba kayo ng anumang binabayarang child care para sa
sinumang bata na wala pang 14 taong gulang habang {kayo o ang partner ninyo} ay nagtatrabaho,
nasa paaralan, o naghahanap ng trabaho?

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: "Kabilang dito ang Head Start, mga day care center, mga program ng
before- o after-school care, at anumang mga kasunduan para sa baby-sitting."]

YES 1
NO...2   **[GO TO QA13_G21]**
REFUSED .... -7   **[GO TO QA13_G21]**
DON'T KNOW .... -8   **[GO TO QA13_G21]**

QA13_G20   In the past month, how much did you pay for all child care arrangements and programs?
Nitong nakaraang buwan, magkano ang binayad ninyo para sa lahat ng mga kasunduan at mga program para sa child care?

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, SAY: "Kung mas madali sa inyo, maaaring ninyong sabihin sa akin kung magkano ang binayad ninyo sa isang karaniwang linggo noong nakaraang buwan." "Kayo o sinumang iba pang adult sa inyong bahay."]

$_____ 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

Educational Attainment

QA13_G21   What is the highest grade of education you have completed and received credit for?
Ano ang pinakamataas na baitang sa pag-aaral ang nakumpleto ninyo at nakatanggap ba kayo
ng credit para sa pagtatapos?

AH47

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

Veteran Status

QA13_G22   Did you ever serve on active duty in the Armed Forces of the United States?
Nag-active duty ba kayo kailanman sa Hukbong Sandatahan ng United States?

AG22

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

QA13_G23   When did you serve?
Kailan kayo naglingkod?

AG23

FROM _____   TO_____

OR

[CHECK ALL THAT APPLY]

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

QA13_G24   Altogether, how long did you serve?
Sa kabuuan, gaano katagal kayong naglingkod?

AG24

_____ YEARS

_____ MONTHS

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

Employment

QA13_G25   Which of the following were <u>you</u> doing last week?
Alin sa mga sumusunod ang ginawa <u>ninyo</u> noong nakaraang linggo?

AK1

Working at a job or business,...................................1   **[GO TO QA13_G29]**
Nagtrabaho sa pinapasukan o sa negosyo, ...1   **[GO TO QA13_G29]**
With a job or business but not at work,....................2
May pinapasukan o may negosyo ngunit
hindi nagtrabaho, ...2
Looking for work, or 3
Naghanap ng trabaho, o 3
Not working at a job or business?............................4
Walang pinapasukan na trabaho o negosyo? 4
REFUSED .... -7   **[GO TO QA13_G29]**
DON'T KNOW .... -8   **[GO TO QA13_G29]**

QA13_G26   What is the <u>main reason</u> you did not work last week?
             Ano ang <u>pangunahing dahilan</u> na hindi kayo nagtrabaho nitong nakaraang linggo?

AK2

[IF NEEDED, SAY: "Main reason is the most important reason."]
[IF NEEDED, SAY: "Ang pangunahing dahilan ay ang pinakamahalagang dahilan."]

```
            TAKING CARE OF HOUSE OR FAMILY .................1
            ON PLANNED VACATION .......................................2
            COULDN'T FIND A JOB ...........................................3
            GOING TO SCHOOL/STUDENT.............................4
            RETIRED ....................................................................5     [GO TO PN QA13_G28]
            DISABLED ..................................................................6     [GO TO PN QA13_G28]
            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
```

QA13_G27   Do you usually work?
             Karaniwan bang nagtatrabaho ang asawa ninyo?

AG10

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

PROGRAMMING NOTE QA13_G28:
IF [AAGE = -7 OR -8 OR AAGE < 65] AND QA13_G27 = 2 (NO) CONTINUE WITH QA13_G28;
IF [AAGE = -7 OR -8 OR AAGE < 65] AND [QA13_G26 = 5 (RETIRED) OR 6 (DISABLED)] CONTINUE WITH QA13_G28;
ELSE GO TO PROGRAMMING NOTE QA13_G29

QA13_G28   Are you receiving Social Security Disability Insurance or SSDI?
             Tumatanggap ba kayo ng Social Security Disability Insurance o SSDI?

AL22

```
            YES .........................................................................1     [GO TO PN QA13_G30]
            NO............................................................................2     [GO TO PN QA13_G30]
            REFUSED ................................................................ -7     [GO TO PN QA13_G30]
            DON'T KNOW .......................................................... -8     [GO TO PN QA13_G30]
```

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

QA13_G29   On your main job, are you employed by a private company, the government, or are you self-
            employed, or are you working without pay in a family business or farm?
            Sa inyong pangunahing trabaho, empleado ba kayo ng: pribadong kompanya, ng gobyerno, o
            nagtatrabaho para sa sarili , o nagtatrabaho nang walang sahod sa pakikipag-negosyo o farm ng
            pamilya?

AK4

            [IF NEEDED, SAY: "Where did you work most hours?"]
            [IF NEEDED, SAY: "Saan kayo nagtrabaho nang pinakamaraming oras?"]

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

PROGRAMMING NOTE QA13_G30:
IF QA13_G29= 2 (GOVERNMENT EMPLOYEE), DISPLAY "What kind of agency or department is this?" and
"[PROBE FOR AND RECORD BOTH THE LEVEL OF GOVERNMENT (E>G., STATE, LOCAL) AND THE
FUNCTION (E.G., BUDGET OFFICE, POLICE, ETC.]";
ELSE DISPLAY "What kind of business or industry is this?" AND "[IF NEEDED, SAY: "What do they make
or do at this business?']"

QA13_G30   {What kind of agency or department is this?/What kind of business or industry is this?}
            Anong uri ng negosyo o industria ito?

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?"]}**
            [INTERVIEWER: ENTER DESCRIPTION]

            **{[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: "Anong
            produkto ang yinayari o anong gawain ang ginagawa sa negosyong ito?"]}**
            [INTERVIEWER: ENTER DESCRIPTION]

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

QA13_G31   What is the <u>main</u> kind of work <u>you</u> do?
                      Ano ang <u>pangunahing</u> trabaho ang <u>inyong</u> ginagawa?

AK6

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

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

PROGRAMMING NOTE QA13_G32:
IF QA13_G29 = 2 (GOVERNMENT EMPLOYEE), CODE QA13_G32 = 8 AND GO TO QA13_G33;
IF QA13_G29 = 3 (SELF-EMPLOYED), CONTINUE WITH QA13_G32 AND DISPLAY "Including yourself, about" and "you";
ELSE CONTINUE WITH QA13_G32 AND DISPLAY "About" and "your employer";

QA13_G32   {Including yourself, about/About} how many people are employed by {your employer/you} at all locations?
                      Ilang ang empleado ng inyong employer sa lahat ng mga sangay?
                      Kabilang ang sarili ninyo, ilan ang empleado ninyo sa lahat ng mga sangay?

AK8

                      [IF NEEDED, SAY: "Your best guess is fine."]
                      [IF NEEDED, SAY: Ayos lang ang inyong pinakamahusay na tantya.]"

                      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

Employment (Spouse/Partner)

PROGRAMMING NOTE QA13_G33:
IF QA13_ A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1, CONTINUE WITH QA13_G33;
IF QA13_A16 = 1, THEN DISPLAY "spouse";
ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";
ELSE GO TO QA13_H1

QA13_G33   Which of the following was your {spouse/partner} doing last week?
Alin sa sumusunod ang ginawa ng inyong {asawa} nitong nakaraang linggo?

AG8

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

QA13_G34   Does your {spouse/partner} usually work?
Karaniwan bang nagtatrabaho and {asawa} ninyo?

AG11

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

QA13_G35   On your {spouse's/partner's} <u>main</u> job, is {he/she} employed by a private company, the government, <u>or</u> is {he/she} self-employed, <u>or</u> is {he/she} working without pay in a family business or farm?
Sa <u>pangunahing</u> katungkulan ng inyong {asawa}, nagtatrabaho ba {siya/siya} sa: kompanyang pribado, sa gobyerno, <u>o</u> nagtatrabaho ba {siya/siya} para sa sarili, <u>o</u> nagtatrabaho ba {siya/siya} nang walang sahod sa negosyo o farm ng pamilya?

AG9

[IF NEEDED, SAY: "Where did {he/she} work MOST hours?"]
[IF NEEDED, SAY: "Saan {siya/siya} nagtrabaho nang PINAKAMARAMING oras?"]

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

Section H – Health Insurance

Usual Source of Care

QA13_H1   The next topics are about health insurance and health care.
Tungkol sa health insurance at health care ang sumusunod na mga paksa.

Is there a place that you <u>usually</u> go to when you are sick or need advice about your health?
Mayroon bang lugar na <u>karaniwang</u> pinupuntahan ninyo kapag may sakit kayo o nangangailangan ng payo tungkol sa inyong kalusugan?

AH1

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

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

PROGRAMMING NOTE QA13_H2:
IF QA13_H1 = 1 (YES) OR 5 (MORE THAN ONE PLACE) DISPLAY "What kind of place do you go to most often--a medical";
ELSE IF QA13_H1 = 3 (DOCTOR/MY DOCTOR), DISPLAY "Is your doctor in a private";
ELSE IF QA13_H1 = 4 (KAISER) CIRCLE "1" FOR QA13_H2 AND GO TO QA13_H3

QA13_H2   {What kind of place do you go to most often—a medical/Is your doctor in a private} doctor's office, a clinic or hospital clinic, an emergency room, or some other place?
Sa anong uri ng lugar kayo pinakamadalas na nagpapatingin - sa opisina ng doktor, sa clinic o sa clinic sa ospital, sa emergency room, o sa iba pang lugar?

AH3

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

Emergency Room Visits

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

QA13_H3   During the past 12 months, did you visit a hospital emergency room for your own health?
            Nitong nakaraang 12 buwan, nagpatingin ba kayo sa emergency room ng ospital para sa inyong sariling kalusugan?

AH12

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

PROGRAMMING NOTE QA13_H4:
IF QA13_B6 = 1 OR QA13_B11 = 1 (YES, R VISITED ER FOR ASTHMA) OR QA13_B28 = 1 (YES, R VISITED ER FOR DIABETES) OR QA13_B39 = 1 (YES, R VISITED ER FOR HEART DISEASE), THEN DISPLAY "During the past 12 month, how many times did you visit a hospital emergency room for your own health?";
ELSE DISPLAY "How many times did you do that?"

QA13_H4   {During the past 12 months, how many times did you visit a hospital emergency room for your own health/How many times did you do that}?
            Ilang beses ninyo ginawa iyon?
            Nitong nakaraang 12 buwan, ilang beses kayo nagpagamot sa emergency room ng ospital para sa inyong kalusugan?

AH95

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

                    _____ NUMBER OF TIMES

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

Medicare Coverage

QA13_H5   MediCARE is a health insurance program for people 65 years and older or persons with certain disabilities. At this time, are you covered by MediCARE?
Ang Medicare ay program ng health insurance para sa mga taong 65 taong gulang o mas matanda pa o mga taong may mga partikular na kapansanan. Naka-insure ba kayo sa Medicare ngayon?

> **AI1**

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

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

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

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

QA13_H6   Is it correct that you are <u>not</u> covered by MediCARE even though you told me earlier that you are 65 or older?
Tama ba na <u>hindi</u> kayo naka-insure sa Medicare kahit na sinabi ninyo sa akin kanina na 65 taong gulang na kayo o mas matanda pa?

> **AI2**

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

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

QA13_H7   What is your age, please?
Kung puede po sanang matanong, ano ang edad ninyo?

> **AI3**

> _____ YEARS OF AGE   [HR: 18-105]   **[GO TO PN QA13_H15]**

> REFUSED .... -7   **[GO TO PN QA13_H15]**
> DON'T KNOW .... -8   **[GO TO PN QA13_H15]**

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

> **PROGRAMMING NOTE QA13_H8:**
> **IF ARMCARE = 1, CONTINUE WITH QA13_H8;**
> **ELSE GO TO PROGRAMMING NOTE QA13_H15**

QA13_H8   Is your MediCARE coverage provided through an HMO?
Ipinagkakaloob ba ang paggagamot sa inyo na saklaw ng MediCARE sa pamamagitan ng HMO?

AH49

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

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

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

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

QA13_H9   What is the name of your MediCARE HMO plan?
Anong pangalan ng inyong MediCARE HMO plan?

AH50

AARP MEDICARE COMPLETE 1
AETNA 2
AETNA MEDICARE (SELECT/PREMIER) 3
ALAMEDA ALLIANCE FOR HEALTH 4
ALLIANCE COMPLETE CARE 5
ANTHEM BLUE CROSS/BLUE CROSS 6
ARCADIAN COMMUNITY CARE 7
BLUE CROSS SENIOR SECURE 8
BLUE SHIELD 65 PLUS 9
BLUE SHIELD OF CALIFORNIA 10
CAL OPTIMA 11
CARE 1ST HEALTH PLAN 12
CARE ADVANTAGE 13
CARE MORE 14
CEN CAL HEALTH... 15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH 16
CENTRAL HEALTH PLAN OF CALIFORNIA 17
CHINESE COMMUNITY HEALTH PLAN... 18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM 19
CIGNA.. 20
CITIZENS CHOICE HEALTHPLAN 21
COMMUNICARE ADVANTAGE 22
COMMUNITY HEALTH GROUP 23
COMMUNITY HEALTH PLAN... 24
CONTRA COSTA HEALTH PLAN 25
EASY CHOICE HEALTH PLAN 26
GEM CARE 27
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN 28
GREAT-WEST 29
HEALTH NET 30
HEALTH PLAN OF SAN JOAQUIN... 31
HEALTH PLAN OF SAN MATEO.. 32

HUMANA GOLD PLUS 33
IEHP (INLAND EMPIRE HEALTH PLAN) 34
IEHP MEDICARE DUAL CHOICE.. 35
INTER VALLEY HEALTH PLAN 36
KAISER 37
KERN COUNTY HEALTH PLAN.. 38
L.A. CARE HEALTH PLAN 39
MD CARE.. 40
MOLINA HEALTH PLAN 41
MOLINA MEDICARE OPTIONS 42
ON LOK... 43
ON LOK SENIOR HEALTH SERVICES.. 44
ONE CARE 45
PACIFICARE.. 46
PARTNERSHIP HEALTH PLAN OF CALIFORNIA 47
SALUD CON HEALTH NET 48
SAN FRANCISCO HEALTH PLAN 49
SANTA CLARA FAMILY HEALTH PLAN 50
SCAN HEALTH PLAN.. 51
SECURE HORIZONS 52
SENIOR ADVANTAGE 53
SENIORITY PLUS.. 54
SERVICE TO SENIORS 55
SHARP HEALTH PLAN 56
TOTAL FIT 57
VALLEY HEALTH PLAN 58
VENTURA COUNTY HEALTH CARE PLAN... 59
WESTERN HEALTH ADVANTAGE 60
WESTERN HEALTH ADVANTAGE CARE+ 61
CHAMPUS/CHAMP-VA 62
TRICARE/TRICARE FOR LIFE/TRICARE PRIME... 63
VA HEALTH CARE SERVICES 64
MEDI-CAL 65
MEDICARE 66
MEDICARE ADVANTAGE 67
OTHER.. 91
OTHER (SPECIFY:_____) 92
REFUSED ....-7
DON'T KNOW ....-8

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

QA13_H10   Some people who are eligible for MediCARE also have private insurance that is sometimes called
Medigap or Medicare Supplement. Do you have this type of health insurance?
Ang ilang tao na karapat-dapat para sa Medicare ay mayroon ding pribadong insurance na
paminsan-minsan tinatawag na Medigap o Medicare Supplement. Mayroon ba kayong ganitong
uri ng health insurance?

AI4

**[IF NEEDED, SAY: "These are policies that cover health care costs not covered by
MediCARE alone."]**
**[IF NEEDED, SAY: "Mga policy ito na sumasaklaw sa mga gastos sa pangangalaga sa
kalusugan na hindi saklaw nang nag-iisa ng Medicare."]**

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

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

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

QA13_H11   For the {MediCARE HMO/MediCARE Supplement plan}, did you sign up directly, or did you get
this insurance through a current employer, a former employer, a union, a family business, AARP,
or some other way?
Para sa {MediCARE Supplement plan}, nag-enrol ba kayo nang direkta, o nakuha ba ninyo ang
insurance na ito sa kasalukuyang employer, sa dating employer, sa union, sa negosyong
pampamilya, sa AARP, o sa iba pang paraan?

AH52

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

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

QA13_H12   Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.
Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan na ito? Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

AH53

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

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

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

[IF NEEDED, SAY: "Ang mga co-pay ang parsyal na mga bayad ninyo para sa pangangalaga sa kalusugan ninyo tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang ang health plan ang nagbabayad ng pinakamalaking bahagi ng mga gastos ng health insurance ninyo."

"Ang deductible ang halagang binabayaran ninyo para sa pagpapagamot bago magsimulang magbayad ang inyong health plan."

"Ang premium ang singil buwan-buwan para sa bayad sa inyong health insurance plan."]

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

QA13_H13   Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?
Mayroon bang sinumang iba pa, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan na ito?

AH54

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

QA13_H14   Who is that?
Sino iyon?

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: "Sino maliban sa inyo ang nagbabayad ng anumang bahagi ng gastos para sa plan na ito, gaya ng inyong employer, union, o samahang pampropesyonal?"]

[CODE ALL THAT APPLY] [PROBE: "Any others?"]
[CODE ALL THAT APPLY] [PROBE: "May iba pa ba?"]

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

POST-NOTE FOR QA13_H14:
IF QA13_H14 = 7, SET ARMCAL = 1;
IF QA13_H14 = 8, SET ARHFAM = 1

Medi-Cal Coverage

PROGRAMMING NOTE QA13_H15:
IF ARMCAL = 1, DISPLAY "Is it correct that you are";
ELSE DISPLAY "Are you"

QA13_H15   {Is it correct that you are/Are you} covered by Medi-CAL?
Naka-insure ba kayo sa Medi-CAL?
Tama ba na naka-insure kayo sa Medi-CAL?

AI6

[IF NEEDED, SAY: "A plan for certain low-income children and their families, pregnant women, and disabled or elderly people."]
[IF NEEDED, SAY: " Plan para sa ilang mga bata at pamilya nila na maliliit ang kita, mga babaeng buntis at mga taong may kapansanan o may-edad na."]

YES 1   **[GO TO QA13_H17]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE FOR QA13_H15:
IF QA13_H15 = 1, SET ARMCAL = 1 AND SET ARINSURE = 1;
IF ARMCAL = 1 AND QA13_H15 = 2, SET ARMCAL = 0

Healthy Families Coverage

PROGRAMMING NOTE QA13_H16:
IF AAGE > 18 OR [QA13_A4 ≠ -7 OR -8 (REF/DK)] OR ENUM.AGE > 18 OR IF AGE IS UNKNOWN, GO TO
PROGRAMMING NOTE QA13_H17;
ELSE IF [AAGE = 18 OR QA13_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18] AND ARHFAM = 1,
CONTINUE WITH QA13_H16 AND DISPLAY "Is it correct, then, that you are";
ELSE IF [AAGE = 18 OR QA13_A4 = 1 (BETWEEN 18 AND 29) OR ENUM.AGE = 18], CONTINUE WITH
QA13_H16 AND DISPLAY: "Are you"

QA13_H16   {Is it correct, then, that you are/Are you} covered by the Healthy Families Program?
                  Naka-insure ba kayo sa Healthy Families Program?
                  Tama nga ba, kung ganoon, na naka-insure kayo sa Healthy Families Program?

<div style="border:1px solid">AI7</div>

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for
children up to age 19."]
[IF NEEDED, SAY: Ang Healthy Families ay program ng state na nagbabayad ng health
insurance para sa mga bata hanggang sa 19 taong gulang."]

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

POST-NOTE FOR QA13_H16:
IF QA13_H16 = 1, SET ARHFAM = 1 AND SET ARINSURE = 1;
IF ARHFAM = 1 AND QA13_H16 = 2, SET ARHFAM = 0

Employer-Based Coverage

> **PROGRAMMING NOTE QA13_H17:**
> **IF ARSUPP = 1, DISPLAY "Besides the Medicare supplemental plan you told me about" AND "any other";**
> **ELSE IF ARMHMO = 1, DISPLAY "Besides the Medicare HMO plan you told me about" AND "any other";**
> **ELSE DISPLAY "a"**

QA13_H17   {Besides the Medicare supplemental plan you told me about/Besides the Medicare HMO plan you told me about}, Are you covered by {any other/a} health insurance plan or HMO through a current or former employer or union?
Naka-insure ba kayo sa health insurance plan o sa HMO sa pamamagitan ng kasalukuyan o dating employer o union?
Maliban sa Medicare supplemental plan na binanggit ninyo sa akin, naka-insure ba kayo sa iba pang health insurance plan o sa HMO sa pamamagitan ng kasalukuyan o dating employer o union?

> **AI8**

> **[IF NEEDED, SAY: "…either through your own or someone else's employment?"]**
> **[IF NEEDED, SAY: "... sa pamamagitan ng inyong sariling trabaho o kaya'y sa trabaho ng ibang tao?"]**

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

> **POST-NOTE FOR QA13_H17:**
> **IF QA13_H17 = 1, SET AREMPOTH = 1 AND SET ARINSURE = 1**

Private Coverage

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

QA13_H18   Are you covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?
Naka-insure ba kayo sa health insurance plan na Binili ninyo nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

> **AI11**

> **[IF NEEDED, SAY: "Don't include a plan that pays only for certain illnesses such as cancer or stroke, or only gives you 'extra cash' if you are in a hospital."]**
> **[IF NEEDED, SAY: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital."]**

                    YES 1
                    NO 2   **[GO TO PN QA13_H20]**
                    REFUSED .... -7   **[GO TO PN QA13_H20]**
                    DON'T KNOW .... -8   **[GO TO PN QA13_H20]**

> **POST-NOTE FOR QA13_H18:**
> **IF QA13_H18 = 1, SET ARDIRECT = 1 AND SET ARINSURE = 1**

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

QA13_H19   How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?
Paano ninyo binili itong health insurance - direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(CHIS 2014 ONLY)

AH104

INSURANCE COMPANY OR HMO..........................1
COVERED CALIFORNIA..2
OTHER (SPECIFY:_____)......................... 92
REFUSED .... -7
DON'T KNOW .... -8

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

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

QA13_H20   Was this plan obtained in your own name or in the name of someone else?
Kinuha ba ang plan na ito sa pangalan ninyo o sa pangalan ng ibang tao?

AI9

[IF NEEDED, SAY: "Even someone who does not live in this household."]
[PROBE: "Kahit ibang taong hindi nakatira sa sambahayang ito."]

IN OWN NAME 1   **[GO TO PN QA13_22]**
IN SOMEONE ELSE'S NAME 2
REFUSED .... -7   **[GO TO PN QA13_22]**
DON'T KNOW .... -8   **[GO TO PN QA13_22]**

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

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

QA13_H21   Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?
Nasa pangalan ba ng inyong {asawang lalaki o asawang babae o mga magulang} ang plan?

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

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

QA13_H22   How did {you/he or she} sign up for this health insurance – through an employer, through a union, or through Covered California's SHOP program?
Paano {kayo/siya o siya} nagpatala para sa health insurance na ito - sa pamamagitan ng employer, ng union, o ng SHOP program ng Covered California?
(CHIS 2014 ONLY)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]
[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]

AH105

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

POST-NOTE FOR QA13_H22:
IF QA13_H22 = 3, THEN SET ARHBEX = 1

PROGRAMMING NOTE QA13_H23
IF ARHBEX = 1, THEN CONTINUE WITH QA13_H23;
ELSE GO TO PROGRAMMING NOTE QA13_H25;

QA13_H23   Was this a bronze, silver, gold or platinum plan?
Bronze, silver, gold o platinum plan ba ito?
(CHIS 2014 ONLY)

AH106

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

PROGRAMMING NOTE QA13_H24:
IF QA13_H22 = 3, THEN GO TO QA13_H25;
ELSE CONTINUE WITH QA13_H24;

QA13_H24   Was there a subsidy or discount on the premium for this plan?
Mayroon bang tulong na pinansyal o diskwento sa
bayad sa seguro para sa plan na ito?
(CHIS 2014 ONLY)

AH107

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

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

QA13_H25   Do you pay any or all of the premium or cost for this health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.
Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan na ito? Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

| AH57 |

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

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

"Premium is the monthly charge for the cost of your health insurance plan."]
[IF NEEDED, SAY: "Ang co-pay ay parsyal na mga bayad ninyo para sa pangangalaga sa kalusugan ninyo tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang ang health plan ang nagbabayad ng pinakamalaking bahagi ng mga gastos ng health insurance ninyo."

"Ang deductible ay halagang binabayaran ninyo para sa pagpapagamot bago magsimulang magbayad ang inyong health plan."

"Ang premium ay singil buwan-buwan para sa bayad sa inyong health insurance plan."]

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

QA13_H26   Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for this health plan?
Mayroon bang sinumang iba pa, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan na ito?

| AH58 |

```
YES .......................................................................1
NO .........................................................................2     [GO TO PN QA13_H28]
REFUSED ............................................................. -7     [GO TO PN QA13_H28]
DON'T KNOW ....................................................... -8     [GO TO PN QA13_H28]
```

PROGRAMMING NOTE QA13_H27:
IF QA13_H25 = 2 THEN DISPLAY "Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization";
ELSE DISPLAY "Who is that"

QA13_H27   {Who besides yourself pays any portion of the cost for this plan, such as your employer, a union, or professional organization/Who is that}?
Sino iyon?
Sino ang nagbabayad ng anumang bahagi ng gastos para sa plan na iyon?

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: "Sino maliban sa inyo ang nagbabayad ng anumang bahagi ng gastos para sa plan na ito, gaya ng inyong employer, union, o samahang pampropesyonal?"]

[CODE ALL THAT APPLY] [PROBE: "Any others?"]
[CODE ALL THAT APPLY.] [PROBE: "May iba pa ba?"]

```
CURRENT EMPLOYER ...........................................1
FORMER EMPLOYER ...........................................2
UNION...................................................................3
SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4
SPOUSE'S/PARTNER'S FORMER EMPLOYER.....5
PROFESSIONAL/FRATERNAL ORGANIZATION ...6
MEDICAID/MEDI-CAL ASSISTANCE .....................7
HEALTHY FAMILIES .............................................8
MEDICARE ...........................................................9
HEALTHY KIDS .................................................... 10
COVERED CALIFORNIA...................................... 11
OTHER................................................................. 91
REFUSED ............................................................ -7
DON'T KNOW ....................................................... -8
```

POST-NOTE QA13_H27:
IF QA13_H27 = 1, 2, OR 3, THEN SET AREMPOWN = 1;
IF QA13_H27 = 4 OR 5, THEN SET AREMPSP = 1;
IF QA13_H27 = 6, THEN SET AROTHER = 1;
IF QA13_H27 = 10, THEN SET ARHKID =1;
IF QA13_H27 = 9, SET ARMCARE = 1 AND SET ARDIRECT = 0;
IF QA13_H27 = 7, SET ARMCAL = 1 AND SET ARDIRECT = 0;
IF QA13_H27 = 8, SET, ARHFAM = 1 AND SET ARDIRECT = 0;
IF QA13_H27 = 11, SET ARHBEX = 1;
IF QA13_H27 = 91, THEN SET AROTHER = 1

Employer Offer of Health Insurance

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

QA13_H28   Does your employer offer health insurance to any of its employees?
                 Nag-aalok ba ng health insurance ang inyong employer sa mga empleado nito?

AI13

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

QA13_H29   Are you eligible to be in this plan?
                 Karapat-dapat ba kayong sumali sa plan na ito?

AI14

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

QA13_H30   What is the one main reason why you aren't in this plan?
                 Ano ang isang pangunahing dahilan na hindi kayo kasali sa plan na ito?

AI15

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

QA13_H31   What is the one main reason why you are not eligible for this plan?
                 Ano ang isang pangunahing dahilan na hindi kayo karapat-dapat para sa plan na ito?

AI15A

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

CHAMPUS/CHAMP-VA, TRICARE, VA Coverage

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

QA13_H32   Are you covered by CHAMPUS/CHAMP-VA, TRICARE, VA or some other military health care?
Naka-insure ba kayo sa CHAMPUS/CHAMP-VA, TRICARE, VA o ng iba pang pangangalagang pangkalusugan ng militar?

AI16

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

> **POST-NOTE QA13_H32:**
> **IF QA13_H32 = 1, SET ARMILIT = 1 AND SET ARINSURE = 1**

Healthy Kids

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

QA13_H33   Are you covered by the Healthy Kids program?
Saklaw ba kayo sa program ng Healthy Kids?

AH70

[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]
[IF NEEDED, SAY: "Ang Healthy Kids ay program para sa mga bata sa inyong county."]

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

> **POST-NOTE QA13_H33:**
> **IF QA13_H33 = 1, SET ARHKID = 1 AND SET ARINSURE = 1**

AIM, MRMIP, Family PACT, PCIP, Other Government Coverage

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

QA13_H34   Are you covered by some other government health program, such as AIM, "Mister MIP," the Family PACT program, PCIP, or something else?
Naka-insure ba kayo sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," Family Pact, PCIP, o iba pa?

<div style="border:1px solid">AI17</div>

[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: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program; ang Family PACT ang program ng state na nagbabayad para sa serbisyong pangkalusugang para sa pagpipigil sa pagbubuntis/pag- aanak para sa mga hindi naka-insure na mga babae't lalake na maliliit ang kita; at ang PCIP ang insurance plan para sa mga dati nang umiiral na karamdaman.

YES	1	
NO	2	**[GO TO PN QA13_H36]**
REFUSED	-7	**[GO TO PN QA13_H36]**
DON'T KNOW	-8	**[GO TO PN QA13_H36]**

POST-NOTE QA13_H34:
IF QA13_H34 = 1, SET AROTHGOV = 1 AND SET ARINSURE = 1

QA13_H35   **ASK IF NECESSARY:** "What is the name of this program?"
ASK IF NECESSARY: Ano ang pangalan nitong program?

<div style="border:1px solid">AI17A</div>

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

Other Coverage

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

QA13_H36   Do you have any health insurance coverage through a plan that I missed?
Naka-insure ba kayo sa anumang health insurance plan na di ko nabanggit?

AI18

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

QA13_H37   What type of health insurance do you have?
                 Anong uri ng health insurance ang mayroon kayo?

| AI19 |

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]
[PROBE: "May iba pa?"]

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]
[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakukuha ba ninyo ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng paaralan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o direkta mula sa health plan?"]

                 THROUGH CURRENT OR FORMER
                   EMPLOYER/UNION 1
                 THROUGH SCHOOL, PROFESSIONAL
                   ASSOCIATION, TRADE GROUP,
                   OR OTHER ORGANIZATION................................2
                 PURCHASED DIRECTLY FROM HEALTH PLAN
                   (BY R OR ANYONE ELSE) 3
                 MEDICARE 4
                 MEDI-CAL 5
                 HEALTHY FAMILIES 6
                 CHAMPUS/CHAMP-VA, TRICARE, VA
                   OR SOME OTHER MILITARY HEALTH CARE 7
                 INDIAN HEALTH SERVICE, TRIBAL HEALTH
                   PROGRAM OR URBAN INDIAN CLINIC 8
                 HEALTHY KIDS 9
                 COVERED CALIFORNIA...................................... 10
                 SHOP THROUGH COVERED CALIFORNIA 11
                 OTHER GOVERNMENT HEALTH PLAN 91
                 OTHER NON-GOVERNMENT HEALTH PLAN..... 92
                 REFUSED .... -7
                 DON'T KNOW .... -8

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

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

QA13_H38   Was this plan obtained in your own name or in the name of someone else?
Kinuha ba ang plan na ito sa pangalan ninyo o sa pangalan ng ibang tao?

AH59

[PROBE: "Even someone who does not live in this household?"]
[PROBE: "Kahit ibang taong hindi nakatira sa bahay nito."]

IN OWN NAME 1   **[GO TO PN QA13_H40]**
IN SOMEONE ELSE'S NAME 2
REFUSED .... -7   **[GO TO PN QA13_H40]**
DON'T KNOW .... -8   **[GO TO PN QA13_H40]**

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

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

QA13_H39   Is the plan in your {spouse's name,} {partner's name,} {parent's name,} or someone else's name?
Nasa pangalan ba ng inyong {asawang lalaki o asawang babae o mga magulang} ang plan?

AH60

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

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

Indian Health Service Participation

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

QA13_H40   Are you covered by the Indian Health Service, Tribal Health Program, or Urban Indian Clinic?
Naka-insure ba kayo sa Indian Health Service, sa Tribal Health Program o sa Urban Indian Clinic?

> **AI20**

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

POST-NOTE QA13_H40:
IF QA13_H40 = 1, SET ARIHS = 1

Spouse's Insurance Coverage Type & Eligibility

PROGRAMMING NOTE QA13_H41_INTRO:
IF [QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1] AND QA13_G11 = 1
(SPOUSE/PARTNER LIVING IN HH) CONTINUE WITH QA13_H41_INTRO;
IF QA13_A16 = 1, THEN DISPLAY "spouse";
ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner";
ELSE GO TO PROGRAMMING NOTE QA13_H63

QA13_H41_INTRO   These next questions are about the type of health insurance your {spouse/partner} may
have.
Ang susunod na mga tanong ay tungkol sa uri ng health insurance na maaaring

AI37intro

PROGRAMMING NOTE QA13_H41:
IF SPOUSE 65 OR OLDER THEN
        IF ARMCARE ≠ 1, CONTINUE WITH QA13_H41 WITHOUT DISPLAY
        ELSE IF ARMCARE = 1, CONTINUE WITH QA13_H41 AND DISPLAY "You said that you are
        covered by Medicare." AND "also";
ELSE GO TO PROGRAMMING NOTE QA13_H44

QA13_H41   {You said that you are covered by Medicare.} Is (SPOUSE/PARTNER) {also} covered by
Medicare?
Naka-insure ba sa Medicare ang inyong {asawa}?
Sinabi ninyo na naka-insure kayo sa Medicare. Naka-insure din ba sa Medicare ang inyong
{asawa}?

AI37

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

POST-NOTE QA13_H41:
IF QA13_H41 = 1, SET SPMCARE = 1 AND SET SPINSURE = 1

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

QA13_H42   {You said that your Medicare coverage is provided through an HMO.} Is your {spouse's/partner's}
Medicare {also} provided through an HMO?
Ipinagkakaloob ba ang MediCARE ng inyong {asawa} sa pamamagitan ng HMO?
Sinabi ninyo na sa pamamagitan ng HMO ipinagkakaloob ang mga paggagamot na saklaw ng
inyong Medicare. Ipinagkakaloob din ba ang MediCARE ng inyong {asawa} sa pamamagitan
ng HMO?

> **AH61**

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

POST-NOTE QA13_H42:
IF QA13_H42 = 1, THEN SET SPMHMO = 1 AND SET SPINSURE = 1

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

QA13_H43   {You said that you have a Medicare Supplement plan.} Does your {partner/husband/wife/spouse}
{also} have a Medicare supplemental policy?
Mayroon bang Medicare supplemental policy ang inyong {asawa}?
Sinabi ninyo na mayroon kayong Medicare supplement plan. Mayroon din bang Medicare
supplemental policy ang inyong {asawa}?

> **AI37A**

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

POST-NOTE QA13_H43:
IF QA13_H43 = 1, THEN SET SPSUPP = 1 AND SET SPINSURE = 1

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

QA13_H44   You said you {also} have Medi-Cal. Is (SPOUSE/PARTNER) also covered by Medi-Cal?
Sinabi ninyo na mayroon {din} kayong Medi-Cal. Naka-insure din ba sa Medi-Cal ang inyong {asawa}?

AI38

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

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

QA13_H45   You said you {also} have Healthy Families. Is (SPOUSE/PARTNER) also covered by Healthy Families?
Sinabi ninyo na mayroon {din} kayong Healthy Families. Naka-insure din ba sa Healthy Families ang inyong {asawa}?

AI39

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

POST-NOTE QA13_H45:
IF QA13_H45 = 1, SET SPHFAM = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H46:
IF AREMPOWN = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA13_H46;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H48

QA13_H46   You said you have insurance from <u>your</u> current or former employer or union. Is
(SPOUSE/PARTNER) {also} covered by the insurance from <u>your</u> employer or union?
Sinabi ninyo na mayroon {din} kayong insurance mula sa <u>inyong</u> kasalukuyan o dating employer
o union. Naka-insure din ba ang inyong {asawa} sa insurance mula sa <u>inyong</u> employer o union?

AI40

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

POST-NOTE QA13_H46:
IF QA13_H46 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1;

PROGRAMMING NOTE QA13_H47:
IF ARHBEX = 1 AND (AREMPOWN = 1 OR AREMPOTH = 1 OR AREMPSP = 1), THEN CONTINUE WITH
QA13_H47;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H48

QA13_H47   You said you have health insurance through Covered California's SHOP program. Is
(SPOUSE/PARTNER) {also} covered by this health insurance?
Sinabi ninyo na mayroon kayong health insurance sa pamamagitan ng SHOP program ng
Covered California. Sakop {din} ba nitong health insurance ang inyong {ASAWA/PARTNER}?
(CHIS 2014 ONLY)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by
Covered California."]
[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na
pinangangasiwaan ng Covered California."]

AH108

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

POST-NOTE QA13_H47:
IF QA13_H47 = 1, SET SPEMPSP = 1 AND SET SPINSURE = 1 AND ARSAMESP=1 AND SPHBEX = 1;

PROGRAMMING NOTE QA13_H48:
IF QA13_G31 = 1 OR 2 (SPOUSE/PARTNER EMPLOYED) OR QA13_G32 = 1 (USUALLY WORKS),
CONTINUE WITH QA13_H48;
IF AREMPSP = 1 AND QA13_A16 = 1, DISPLAY "You said you have insurance from your spouse's
employer or union.";
ELSE IF AREMPSP = 1 AND (QA13_D16 = 1 OR QA13_D17 = 1), THEN DISPLAY "You said you have
insurance from your partner's employer or union.";
IF SPINSURE = 1, THEN DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H49

QA13_H48   {You said you have insurance from your spouse's employer or union./You said you have
insurance from your partner's employer or union.} Does (SPOUSE/PARTNER) {also} have
coverage through {his/her} <u>own</u> employer?
Mayroon {din} bang insurance ang inyong {asawa} mula sa {kanyang} <u>sariling</u> employer?
Sinabi ninyo na mayroon kayong insurance mula sa employer o union ng inyong {asawa}.
Mayroon {din} ba {siyang/siyang} insurance mula sa {kanyang} <u>sariling</u> employer?

> **AI40A**

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

POST-NOTE QA13_H48:
IF QA13_H48 = 1, SET SPEMPOWN = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H49:
IF ARDIRECT = 1 AND ARHBEX ≠ 1, CONTINUE WITH QA13_H49;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H50

QA13_H49   You said you {also} have a plan you purchased directly from the insurer. Is
(SPOUSE/PARTNER) {also} covered by this plan?
Sinabi ninyo na mayroon {din} kayong plan na binili ninyo nang direkta mula sa kompanya ng
insurance. Naka-insure din ba sa plan na ito ang inyong {asawa}?

> **AI41**

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

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

PROGRAMMING NOTE QA13_H50:
IF ARDIRECT =1 AND ARHBEX = 1, CONTINUE WITH QA13_H50;
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR AREMPOWN = 1, DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H51

QA13_H50   You said you have a plan you purchased directly from Covered California. Is
(SPOUSE/PARTNER) {also} covered by this plan?
Sinabi ninyo na mayroon kayong plan na binili ninyo nang direkta mula sa Covered California.
Sakop {din} ba nitong plan ang inyong {asawa/partner}?
(CHIS 2014 ONLY)

AH109

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

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

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

QA13_H51   You said you {also} have health insurance through CHAMPUS/CHAMPUS-VA, VA, TRICARE, or
some other military healthcare. Is (SPOUSE/PARTNER) also covered by this plan?
Sinabi ninyo na mayroon {din} kayong health insurance sa pamamagitan ng
CHAMPUS/CHAMPUS-VA, TRICARE, VA o iba pang pangangalagang pangkalusugan ng militar.
Naka-insure din ba sa plan na ito ang inyong {asawa}?

AI42

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

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

PROGRAMMING NOTE QA13_H52:
IF AROTHGOV = 1, CONTINUE WITH QA13_H52;
IF QA13_H35 = 1, THEN DISPLAY "AIM";
IF QA13_H35 = 2, THEN DISPLAY "MRMIP";
IF QA13_H35 = 3, THEN DISPLAY "Family PACT";
IF QA13_H35 = 4, THEN DISPLAY "PCIP";
IF QA13_H35 = 91, THEN DISPLAY "some government health plan":
IF ARMCARE = 1 OR ARMCAL = 1 OR ARHFAM = 1 OR ARDIRECT = 1 OR AREMPOWN = 1 OR ARMILIT = 1, DISPLAY "also";
ELSE GO TO PROGRAMMING NOTE QA13_H53

QA13_H52   You said you {also} have health insurance through {AIM/MRMIP/Family PACT/PCIP/some government health plan}. Is (SPOUSE/PARTNER) also covered by this plan?
Sinabi ninyo na mayroon {din} kayong health insurance sa pamamagitan ng {health plan ng gobyerno}. Naka-insure din ba sa plan na ito ang inyong {asawa}?

AI42A

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

POST-NOTE QA13_H52:
IF QA13_H52 = 1, SET SPOTHGOV = 1 AND SET SPINSURE = 1

PROGRAMMING NOTE QA13_H53:
IF SPINSURE ≠ 1, DISPLAY "any";
ELSE DISPLAY "through any other source"

QA13_H53   Does (SPOUSE/PARTNER) have {any} health insurance coverage {through any other source}?
Mayroon bang anumang health insurance ang inyong {asawa}?
Mayroon bang health insurance ang inyong {asawa} sa pamamagitan ng iba pang mapagkukunan?

AI46

YES 1
NO...2   **[GO TO PN QA13_H55]**
REFUSED .... -7   **[GO TO QA13_H59]**
DON'T KNOW .... -8   **[GO TO QA13_H59]**

QA13_H54   What type of health insurance does {he/she} have?
                    Anong uri ng health insurance ang mayroon {siya}?

AI47

                    [CODE ALL THAT APPLY.] [PROBE: "Any others?"]
                    [CODE ALL THAT APPLY.] [PROBE: May iba pa?]

                    **[IF NEEDED, SAY: "Such as from a current or former employer, or that they purchased
                    directly from a health plan."]**
                    **[IF NEEDED, SAY: "Gaya ng mula sa kasalukuyan o dating employer, o na binili nila nang
                    direkta mula sa health plan."]**

                    **[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a
                    current or former employer/union, through a school, professional association, trade
                    group, or other organization, or directly from the health plan?"]**
                    **[NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakuha ba ninyo ang plan
                    na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng
                    paaralan, samahang professional, grupo ng manggagawa, o iba pang samahan, o direct
                    mula sa health insurance company?"]**

                    THROUGH CURRENT OR FORMER
                        EMPLOYER/UNION 1
                    THROUGH SCHOOL, PROFESSIONAL
                        ASSOCIATION, TRADE GROUP OR
                        OTHER ORGANIZATION 2
                    PURCHASED DIRECTLY FROM HEALTH PLAN
                        (BY R OR ANYONE ELSE) 3
                    MEDICARE 4
                    MEDI-CAL 5
                    HEALTHY FAMILIES 6
                    CHAMPUS/CHAMP-VA, TRICARE, VA OR
                        SOME OTHER MILITARY HEALTH CARE 7
                    INDIAN HEALTH SERVICE, TRIBAL HEALTH
                        PROGRAM OR URBAN INDIAN CLINIC 8
                    HEALTHY KIDS 9
                    COVERED CALIFORNIA...................................... 10
                    SHOP THROUGH COVERED CALIFORNIA 11
                    OTHER GOVERNMENT HEALTH PLAN 91
                    OTHER NON-GOVERNMENT HEALTH PLAN..... 92
                    REFUSED .... -7
                    DON'T KNOW .... -8

POST-NOTE QA13_H54:
IF QA13_H54 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 8, SET SPIHS = 1;
IF QA13_H54 = 9, SET SPKID = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
IF QA13_H54 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1

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

QA13_H55   You said that (SPOUSE/PARTNER) has <u>no</u> health insurance from any source. Is this correct?
             Sinabi ninyo na <u>walang</u> health insurance ang inyong {asawa} mula sa anumang iba pang mapagkukunan? Tama ba ito?

AI48

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

QA13_H56   What type of health insurance does {he/she} have?
             Anong uri ng health insurance ang mayroon {siya}?

AI49

             [CODE ALL THAT APPLY] [PROBE: "Any others?"]
             [CODE ALL THAT APPLY] [PROBE: "May iba pa ba?"]

             [IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Did {he/she} get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]
             [NOTE: IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakuha ba {niya} ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng paaralan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o nang direkta mula sa health plan?]

                        EMPLOYER/UNION 1
                        THROUGH SCHOOL, PROFESSIONAL
                          ASSOCIATION, TRADE GROUP OR OTHER
                          ORGANIZATION 2
                        PURCHASED DIRECTLY FROM HEALTH PLAN
                          (BY R OR ANYONE ELSE)..................................... 3
                        MEDICARE.. 4
                        MEDI-CAL... 5
                        HEALTHY FAMILIES... 6
                        CHAMPUS/CHAMP-VA, TRICARE, VA OR
                          SOME OTHER MILITARY HEALTH CARE 7
                        INDIAN HEALTH SERVICE, TRIBAL HEALTH
                          PROGRAM OR URBAN INDIAN CLINIC................ 8
                        HEALTHY KIDS... 9
                        COVERED CALIFORNIA 10
                        SHOP THROUGH COVERED CALIFORNIA.......... 11
                        OTHER GOVERNMENT HEALTH PLAN 91
                        OTHER NON-GOVERNMENT HEALTH PLAN 92
                        REFUSED.. -7
                        DON'T KNOW... -8

POST-NOTE QA13_H56:
IF QA13_H56 = 1, SET SPEMPOTH = 1 AND SET SPINSURE = 1;

IF QA13_H56 = 2, SET SPOTHER = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 3, SET SPDIRECT = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 4, SET SPMCARE = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 5, SET SPMCAL = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 6, SET SPHFAM = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 7, SET SPMILIT = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 8, SET SPIHS = 1;
IF QA13_H56 = 9, SET SPKID = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 10, SET SPHBEX = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 11, SET SPHBEX = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 91, SET SPOTHGOV = 1 AND SET SPINSURE = 1;
IF QA13_H56 = 92, -7, OR -8, SET SPOTHER = 1 AND SET SPINSURE = 1;

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

QA13_H57   Was this plan obtained in your {spouse's/partner's} name or in the name of someone else?
Kinuha ba ang plan na ito sa pangalan ng inyong {asawa} o sa pangalan ng ibang tao?

AH62

[IF NEEDED, SAY: "Even someone who does not live in this household."]
[IF NEEDED, SAY: "Kahit ibang taong hindi nakatira sa sambahayang ito."]

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

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

QA13_H58   Is the plan in your name, parent's name, or someone else's name?
Nasa pangalan ba ninyo ang plan, pangalan ng Magulang ninyo, o pangalan ng ibang tao?

AH63

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

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

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

QA13_H59   Does your {spouse's/partner's} employer offer health insurance to any of its employees?
Nag-aalok ba ng health insurance ang employer ng inyong {asawa} sa sinuman sa mga empleado nito?

AI43

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

QA13_H60   Is {he/she} eligible to be in this plan?
Karapat-dapat ba {siyang} sumali sa plan na ito?

AI44

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

QA13_H61   What is the ONE main reason why {he/she} isn't in this plan?
Ano ang isang pangunahing dahilan na hindi {siya} kasali sa plan na ito?

AI45

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

QA13_H62   What is the one main reason why {he/she} is not eligible for this plan?
Ano ang pangunahing dahilan na hindi {siya} karapat-dapat para sa plan na ito?

AI45A

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

Managed-Care Plan Characteristics

PROGRAMMING NOTE QA13_H63: **IF ARMHMO = 1 (R HAS MEDICARE HMO), GO TO QA13_H65;** **IF ARHFAM = 1 OR ARHKID = 1; GO TO QA13_H64;** **IF ARINSURE = 1 (R HAS ANY COVERAGE), CONTINUE WITH QA13_H63;** **IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE),** **DISPLAY "Next, I have some questions about your own main health plan."** **IF ARMCAL = 1 DISPLAY "Medi-Cal";** **ELSE GO TO QA13_H78**

QA13_H63   {Next, I have some questions about your own main health plan.}
Susunod, may ilang katanungan ako tungkol sa inyong pangunahing health plan.

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

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: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin ninyo ang mga doktor at ospital na kaanib sa kanilang network. Kung lalabas kayo sa network, sa karaniwan hindi mababayaran ito maliban kung ito'y emergency."]

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

[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Your MAIN health plan."]
[NOTE: IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Ang pangunahing health plan ninyo."]

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

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

QA13_H63B   Is your health plan a PPO or EPO?
PPO o EPO ba ang inyong health plan?
(CHIS 2014 ONLY)

AH122

> **[IF NEEDED, SAY: "EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it's an emergency and you can access doctors and specialists directly without a referral from your primary care provider.]**
> **[IF NEEDED, SAY: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doctor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doctor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**
>
> **[IF NEEDED, SAY: "PPO stand for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can access doctors and specialists directly without a referral from your primary care provider.]**
> **[IF NEEDED, SAY: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doctor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doctor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doctor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]**
>
> **[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Your MAIN health plan."]**
> **[IF R HAS MORE THAN ONE HEALTH PLAN, SAY: "Iyong PANGUNAHING health plan ninyo."]**

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

> **PROGRAMMING NOTE QA13_H64:**
> **IF (ARMCAL = 1 AND QA13_H63 = 1) OR (AROTHGOV = 1 AND QA13_H35 = 1) THEN LIST HMO MEDI-CAL BY COUNTY;**
> **ELSE IF (ARHFAM = 1 OR ARHKIDS = 1) AND QA13_H63 = 1 THEN LIST HMO HEALTHY FAMILIES BY COUNTY;**
> **ELSE IF QA13_H63 = 1 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA13_H35 = 2)] THEN LIST HMO COMMERCIAL BY COUNTY;**
> **ELSE IF QA13_H63 = 2 AND [AREMPOWN = 1 OR ARDIRECT = 1 OR AREMPOTH = 1 OR AREMPPAR = 1 OR AREMPSP = 1 OR AROTHER = 1 OR (AROTHGOV = 1 AND QA13_H35 = 2)] THEN LIST NON-HMO BY COUNTY**

QA13_H64   What is the name of your main health plan?
Ano ang pangalan ng inyong {Medi-Cal} health plan?

AI22A

[IF R HAS DIFFICULTY RECALLING NAME, PROBE: "Do you have an insurance card or something else with the plan name on it?"]
[NOTE: IF R HAS DIFFICULTY RECALLING NAME, PROBE: "Mayroon ba kayong insurance card o anumang bagay na nakasulat ang na pangalan ng plan?

AARP MEDICARE COMPLETE	1
AETNA	2
AETNA MEDICARE (SELECT/PREMIER)	3
ALAMEDA ALLIANCE FOR HEALTH	4
ALLIANCE COMPLETE CARE	5
ANTHEM BLUE CROSS/BLUE CROSS	6
ARCADIAN COMMUNITY CARE	7
BLUE CROSS SENIOR SECURE	8
BLUE SHIELD 65 PLUS	9
BLUE SHIELD OF CALIFORNIA	10
CAL OPTIMA	11
CARE 1ST HEALTH PLAN	12
CARE ADVANTAGE	13
CARE MORE	14
CEN CAL HEALTH	15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH	16
CENTRAL HEALTH PLAN OF CALIFORNIA	17
CHINESE COMMUNITY HEALTH PLAN	18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM	19
CIGNA	20
CITIZENS CHOICE HEALTHPLAN	21
COMMUNICARE ADVANTAGE	22
COMMUNITY HEALTH GROUP	23
COMMUNITY HEALTH PLAN	24
CONTRA COSTA HEALTH PLAN	25
EASY CHOICE HEALTH PLAN	26
GEM CARE	27
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN	28
GREAT-WEST	29
HEALTH NET	30
HEALTH PLAN OF SAN JOAQUIN	31
HEALTH PLAN OF SAN MATEO	32
HUMANA GOLD PLUS	33
IEHP (INLAND EMPIRE HEALTH PLAN)	34
IEHP MEDICARE DUAL CHOICE	35
INTER VALLEY HEALTH PLAN	36
KAISER	37
KERN COUNTY HEALTH PLAN	38

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

PROGRAMMING NOTE QA13_H65:
IF ARMHMO = 1 (R HAS MEDI-CARE HMO) AND QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "Next I have some questions about your own main health plan."

QA13_H65   {Next, I have some questions about your own main health plan.} Are you covered for your prescription drugs? That is, does some plan pay any part of the cost?
Susunod, may ilang katanungan ako tungkol sa inyong health plan. Nasasaklaw ba ang para sa mga gamot na inireseta sa iyo? Ibig sabihin, may plan bang nagbabayad ng anumang bahagi ng gastos?
Naka-insure ba kayo para sa inyong mga iniresetang gamot? Ibig sabihin, may plan bang nagbabayad ng anumang bahagi ng gastos?

AI25

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

High Deductible Health Plans

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

QA13_H66 Does your health plan have a deductible that is more than $1,000?
Ang health plan ba ninyo ay may deductible na mahigit sa $1,000?

| 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: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

YES 1
NO..2 **[GO TO QA13_H68]**
YES, ONLY WHEN I GO OUT OF NETWORK ....3 **[GO TO QA13_H68]**
REFUSED .... -7
DON'T KNOW .... -8

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

QA13_H67 Does your health plan have a deductible that is more than $2,000?
Ang health plan ba ninyo ay may deductible na mahigit sa $2,000?

| AH96 |

[IF NEEDED, SAY: "A deductible is the amount you have to pay before your plan begins to pay for your medical care."]
[IF NEEDED, SAY: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

YES ....1 **[GO TO PN QA13_H69]**
NO..2
YES, ONLY WHEN I GO OUT OF NETWORK 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_H68   Does your health plan have a deductible for all covered persons that is more than $2,000?
Ang health plan ba ninyo ay may deductible na mahigit sa $2,000 para sa lahat ng taong naka-insure?

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: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."

YES 1
NO 2   **[GO TO PN QA13_H70]**
YES, ONLY WHEN I GO OUT OF NETWORK 3   **[GO TO PN QA13_H70]**
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_H69:
IF AREMPOWN = 1 OR AREMPSP = 1 OR AREMPPAR = 1 OR AREMPOTH = 1, THEN CONTINUE WITH QA13_H69;
ELSE GO TO PROGRAMMING NOTE QA13_H70

QA13_H69   Does your health plan have a deductible for all covered persons that is more than $4,000?
Ang health plan ba ninyo ay may deductible na mahigit sa $4,000 para sa lahat ng taong naka-insure?

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: "Ang deductible ay halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

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

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

QA13_H70   Do you have a special account or fund you can use to pay for medical expenses?
Mayroon ba kayong tanging account o pondo na maaari ninyong magamit para pambayad sa
mga gastos sa pagpapagamot?

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: Paminsan-minsan, tinatawag ang mga account na Health Savings
Accounts (HSAs), Health Reimbursement Accounts (HRAs), o iba pang mga katulad na
account. Kabilang sa mga iba pang pangalan ang Personal care accounts, Personal
medical funds, o Choice funds, at naiiba sa mga Flexible Spending Account,**

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

Coverage over Past 12 Months

QA13_H71   Thinking about your current health insurance, did you have this same insurance for <u>all</u> 12 of the
past 12 months?
Isipin ninyo ang inyong kasalukuyang health insurance, ito rin ba mismo ang insurance ninyo sa
<u>kabuuan</u> 12 ng nakaraang 12 buwan.

AI31

                    YES 1   **[GO TO PN QA13_H84]**
                    NO..2
                    REFUSED .... -7   **[GO TO QA13_H74]**
                    DON'T KNOW .... -8

QA13_H72   During the past 12 months, when you were not covered by your current health insurance, did you
have any other health insurance?
Nitong nakaraang 12 buwan, noong hindi kayo naka-insure sa inyong kasalukuyang health
insurance, mayroon ba kayong ibang health insurance?

AI32

                    YES 1
                    NO..2   **[GO TO QA13_H75]**
                    REFUSED .... -7   **[GO TO QA13_H74]**
                    DON'T KNOW .... -8   **[GO TO QA13_H74]**

QA13_H73   Was your other health insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
Medi-Cal ba ang iba pang insurance ninyo, o Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

MODIFIED AI33

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: "May iba pa ba?"]

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

QA13_H74   During the past 12 months, was there any time when you had no health insurance at all?
Nitong nakaraang 12 buwan, mayroon bang panahon na kayo ay walang health insurance?

AI34

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

QA13_H75   For how many months of the past 12 months did you have no health insurance at all?
Ilang buwan nitong nakaraang 12 buwan na kayo ay walang health insurance?

AI35

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

            _____ NUMBER OF MONTHS   [HR: 0-11]   **[IF 0 GO TO PN QA13_H84]**

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

Reasons for Lack of Coverage

QA13_H76   What is the ONE MAIN reason why you did not have any health insurance during those months?
Ano ang <u>pangunahing</u> dahilan na kayo ay walang anumang health insurance noong mga buwan na iyon?

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
```

QA13_H77   During the time that you were uninsured, did you try to find health insurance on your own?
Noong panahon na hindi kayo naka-insure, sinubukan ba ninyong kayo na lang ang maghanap ng health insurance?

AH74

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

QA13_H78   What is the ONE MAIN reason why you do not have any health insurance?
Ano ang isang <u>pangunahing</u> dahilan na wala kayong anumang health insurance?

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
```

QA13_H79   During the time that you have been uninsured, have you tried to find health insurance on your own?
Noong panahon na hindi kayo naka-insure, sinubukan ba ninyong kayo na lang ang maghanap ng health insurance?

AH75

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

QA13_H80   Were you covered by health insurance at any time during the past 12 months?
May health insurance ba kayo kailanman nitong nakaraang 12 buwan?

AI27

                         YES 1   **[GO TO QA13_H82]**
                         NO...2
                         REFUSED .... -7
                         DON'T KNOW .... -8

QA13_H81   How long has it been since you last had health insurance?
Gaano katagal na mula noong huling may health insurance kayo?

AI28

                         MORE THAN 12 MONTHS AGO, BUT NOT
                         MORE THAN 3 YEARS AGO 1   **[GO TO PN QA13_H84]**
                         MORE THAN 3 YEARS AGO 2   **[GO TO PN QA13_H84]**
                         NEVER HAD HEALTH INSURANCE.......................3   **[GO TO PN QA13_H84]**
                         REFUSED .... -7   **[GO TO PN QA13_H84]**
                         DON'T KNOW .... -8   **[GO TO PN QA13_H84]**

QA13_H82   For how many months out of the last 12 months did you have health insurance?
Ilang buwan nitong nakaraang 12 buwan kayo may health insurance?

AI29

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

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

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

QA13_H83   During that time when you had health insurance, was your insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
Noong mayroon kayong health insurance, ang inyong insurance ba ay Medi-Cal, Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

AI30

[CODE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: "May iba pa ba?"]

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

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

QA13_H84   In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?
Nitong nakaraang 12 buwan, sinubukan ba ninyong bumili ng health insurance plan nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

AH103

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

QA13_H85   Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?
Iyon ba ay direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California, o parehong mula sa insurance company at sa pamamagitan ng Covered California? (CHIS 2014 ONLY)

AH110

DIRECTLY FROM AN INSURANCE COMPANY
OR HMO, OR 1
THROUGH COVERED CALIFORNIA, OR 2
BOTH, FROM AN INSURANCE COMPANY AND
THROUGH COVERED CALIFORNIA 3
REFUSED .... -7   **[GO TO PN QA13_H88]**
DON'T KNOW .... -8   **[GO TO PN QA13_H88]**

PROGRAMMING NOTE QA13_H86:
IF QA13_H85 = 1; THEN CONTINUE WITH QA13_H86;
IF QA13_H85 = 3; THEN CONTINUE WITH QA13_H86 AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."
ELSE GO TO PROGRAMMING NOTE QA13_H90;

QA13_H86   {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}
{Una, isipin ninyo ang inyong karanasan sa pagsusumikap na bumili ng insurance nang direkta mula sa insurance company o sa HMO}. (MODIFIED FOR CHIS 2014)

How difficult was it to find a plan with the coverage you needed? Was it…
Gaano kahirap makahanap ng plan na may mga saklaw na serbisyo na kailangan ninyo? Ito ba ay...

AH98

Very difficult,...1
Talagang mahirap, ...1
Somewhat difficult, ...2
Medyo mahirap, ...2
Not too difficult, or 3
Hindi masyadong mahirap, o 3
Not at all difficult? 4
Hindi mahirap kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_H87   How difficult was it to find a plan you could afford? Was it…
                 Gaano kahirap makahanap ng plan na kaya ninyo? Ito ba ay...

AH99

Very difficult,...1
Talagang mahirap, ...1
Somewhat difficult, ...2
Medyo mahirap, ...2
Not too difficult, or 3
Hindi masyadong mahirap, o 3
Not at all difficult? 4
Hindi mahirap kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_H88   Did anyone help you find a health plan?
                 Mayroon bang sinumang tumulong sa inyo na humanap ng health plan?

AH100

YES 1
NO..2   **[GO TO PN QA13_H90]**
REFUSED .... -7   **[GO TO PN QA13_H90]**
DON'T KNOW .... -8   **[GO TO PN QA13_H90]**

QA13_H89   Who helped you?
                 Sino ang tumulong sa inyo?

AH101

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

PROGRAMMING NOTE QA13_H90:
IF QA13_H85 = 2; THEN CONTINUE WITH QA13_H90;
IF QA13_H85 = 3; THEN CONTINUE WITH QA13_H90 AND DISPLAY "Now, think about your experience with Covered California."
ELSE GO TO PROGRAMMING NOTE QA13_H94;

QA13_H90   {Now, think about your experience with Covered California.}
                {Ngayon, isipin ninyo ang karanasan ninyo sa Covered California.}

                How difficult was it to find a plan with the coverage you needed through Covered California? Was it…
                Gaano kahirap ang naging karanasan ninyo sa paghahanap ng plan na may coverage na kailangan ninyo sa pamamagitan ng Covered California? Ito ba ay...
                (CHIS 2014 ONLY)

AH111

                Very difficult,...1
                Talagang mahirap, ...1
                Somewhat difficult, ...2
                Medyo mahirap, ...2
                Not too difficult, or 3
                Hindi masyadong mahirap, o 3
                Not at all difficult? 4
                Hindi mahirap kahit kaunti? 4
                REFUSED .... -7
                DON'T KNOW .... -8

QA13_H91   How difficult was it to find a plan you could afford? Was it…
                (CHIS 2014 ONLY)

AH112

                Very difficult,...1
                Talagang mahirap, ...1
                Somewhat difficult, ...2
                Medyo mahirap, ...2
                Not too difficult, or 3
                Hindi masyadong mahirap, o 3
                Not at all difficult? 4
                Hindi mahirap kahit kaunti? 4
                REFUSED .... -7
                DON'T KNOW .... -8

QA13_H92   Did anyone help you find a health plan?
                Mayroon bang tumulong sa inyo na humanap ng health plan?
                (CHIS 2014 ONLY)

AH113

                YES 1
                NO..2   **[GO TO QA13_H94]**
                REFUSED .... -7   **[GO TO QA13_H94]**
                DON'T KNOW .... -8   **[GO TO QA13_H94]**

QA13_H93   Who helped you?
Sinong tumulong sa inyo?
(CHIS 2014 ONLY)

AH114

BROKER 1
FAMILY MEMBER / FRIEND 2
INTERNET 3
CERTIFIED ENROLLMENT COUNSELOR 4
OTHER (SPECIFY:_____) 92
REFUSED .... -7
DON'T KNOW .... -8

QA13_H94   Did you have all the information you felt you needed to make a good decision on a health plan?
Nasa inyo ba ang lahat ng impormasyon na sa tingin ninyo ay kailangan ninyo para
makapagdesisyon nang mabuti tungkol sa health plan?
(CHIS 2014 ONLY)

AH115

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

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

QA13_H95   Were you able to get information about your health plan options in your language?
Nakuha ba ninyo ang impormasyon tungkol sa mga maaari ninyong mapili sa health plan sa
inyong wika?
(CHIS 2014 ONLY)

AH116

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

QA13_H96   Was the cost of the plan you selected very important, somewhat important, or not important in
choosing your plan?
Ang presyo ba ng plan na pinili ninyo ay napaka- importante, medyo importante, o hindi
importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH117

VERY IMPORTANT 1
SOMEWHAT IMPORTANT.....................................2
NOT IMPORTANT 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_H97   Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?
Ang abilidad ba na makapagpagamot sa isang partikular na doctor ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH118

> VERY IMPORTANT 1
> SOMEWHAT IMPORTANT.....................................2
> NOT IMPORTANT 3
> REFUSED .... -7
> DON'T KNOW .... -8

QA13_H98   Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?
Ang abilidad ba na makapagpagamot sa isang partikular na ospital ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH119

> VERY IMPORTANT 1
> SOMEWHAT IMPORTANT.....................................2
> NOT IMPORTANT 3
> REFUSED .... -7
> DON'T KNOW .... -8

QA13_H99   Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?
Iyong pagpili ba ng mga doctor na kaanib sa network ng plan ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH120

> VERY IMPORTANT 1
> SOMEWHAT IMPORTANT.....................................2
> NOT IMPORTANT 3
> REFUSED .... -7
> DON'T KNOW .... -8

PROGRAMMING NOTE QA13_H100:
IF QA13_H23 = 1 THEN DISPLAY "Bronze"
ELSE IF QA13_H23 = 2 THEN DISPLAY "Silver"
ELSE IF QA13_H23 = 3 THEN DISPLAY "Gold"
ELSE IF QA13_H23 = 4 THEN DISPLAY "Platinum"
ELSE DISPLAY " ";

QA13_H100   Finally, what was the <u>most</u> important reason you chose your {Bronze/Silver/Gold/Platinum/} plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?
Pangwakas, ano ang naging <u>pinaka</u> importanteng dahilan na pinili ninyo ang {Platinum} plan? Iyon ba ay ang presyo, ang abilidad ninyong makapagpagamot sa isang particular na doctor, ang abilidad ninyong makapunta sa isang particular na ospital, ang pagpili ng mga provider na kaanib sa network ng inyong plan, o iba pang dahilan? (CHIS 2014 ONLY)

AH121

COST	1
SPECIFIC DOCTOR	2
SPECIFIC HOSPITAL	3
CHOICE OF DOCTORS IN NETWORK	4
OTHER (SPECIFY:_____)	92
REFUSED	-7
DON'T KNOW	-8

Hospitalizations

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

QA13_H101   During the past 12 months, were you a patient in a hospital overnight or longer?
Nitong nakaraang 12 buwan, naging pasyente ba kayo na na-ospital nang magdamag o mas matagal pa?

AH14

YES	1	
NO	2	**[GO TO PN QA13_H104]**
REFUSED	-7	**[GO TO PN QA13_H104]**
DON'T KNOW	-8	**[GO TO PN QA13_H104]**

PROGRAMMING NOTE QA13_H102:
IF QA13_B8 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B13 = 1 (HOSPITALIZED FOR ASTHMA) OR QA13_B30 = 1 (HOSPITALIZED FOR DIABETES) OR QA13_B41 = 1 (HOSPITALIZED FOR HEART DISEASE), THEN DISPLAY "During the past 12 months, when you were hospitalized for any reason,"

QA13_H102   {During the past 12 months, when you were hospitalized for any reason,} Altogether how many nights were you in the hospital?
Sa kabuuan, ilang gabi kayo na-ospital?
Nitong nakaraang 12 buwan, noong na-ospital kayo para sa anumang dahilan, sa kabuuan, ilang gabi kayo na-ospital?

AH102

_____ NUMBER OF NIGHTS (HR: 1-365)

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

Partial Scope Medi-Cal

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

QA13_H103   Was any of that hospital care paid for by Medi-Cal?
Binayaran ba ng Medi-Cal ang anumang bahagi nuong paggagamot ng ospital?

AH76

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

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

QA13_H104   During the last 12 months, did you get prenatal care that you didn't have to pay for?
Nitong nakaraang 12 buwan, nakapagpatingin ba kayo para sa pangangalaga habang buntis na hindi ninyo kinailangang bayaran?

AH77

YES 1
NO...2   **[GO TO PN QA13_I1]**
REFUSED .... -7   **[GO TO PN QA13_I1]**
DON'T KNOW .... -8   **[GO TO PN QA13_I1]**

QA13_H105   Was it paid for by Medi-Cal?
Binayaran ba ito ng Medi-Cal?

AH78

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

Section I – Child and Adolescent Health Insurance

Child's Health Insurance

```
PROGRAMMING NOTE QA13_I1:
IF NO SELECTED CHILD, GO TO PROGRAMMING NOTE QA13_I41 TO ASK ABOUT SELECTED
ADOLESCENT;
IF ARINSURE ≠ 1, GO TO PROGRAMMING NOTE QA13_I2;
ELSE CONTINUE WITH QA13_I1
```

QA13_I1   These next questions are about health insurance (CHILD) may have.

Does (CHILD) have the same insurance as you?
Iisa ba ang insurance ninyo ni {CHILD}?

CF10A

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

```
POST-NOTE QA13_I1:
IF QA13_I1 = 1 AND ARMCARE = 1, SET CHMCARE = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARMCAL = 1, SET CHMCAL = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARHFAM = 1, SET CHHFAM = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARHKID = 1, SET CHHKID = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AREMPOWN = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AREMPSP = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AREMPPAR = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AREMPOTH = 1, SET CHEMP = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARDIRECT = 1, SET CHDIRECT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARMILIT = 1, SET CHMILIT = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AROTHGOV = 1, SET CHOTHGOV = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND AROTHER = 1, SET CHOTHER = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
IF QA13_I1 = 1 AND ARIHS = 1, SET CHIHS = 1
IF QA13_I1 = 1 AND ARHBEX = 1, SET CHHBEX = 1 AND SET CHINSURE = 1 AND ARSAMECH=1;
```

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

QA13_I2   Does (CHILD) have the same insurance as {your spouse/your partner/SPOUSE NAME/ PARTNER NAME}?
Iisa ba ang insurance ni {CHILD} at ng inyong {spouse}?

MA1

YES 1   **[GO TO QA13_I22]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

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

Medi-Cal Coverage (Child)

QA13_I3   Is {he/she} currently covered by Medi-CAL?
Naka-insure ba {siya/siya} sa kasalukuyan sa Medi-CAL?

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: "Ang Medi-CAL ay plan para sa ilang mga bata at pamilya nila na maliliit
ang kita, mga babaeng buntis, at mga taong may kapansanan o may-edad na."]

YES 1   **[GO TO QA13_I5]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

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

Healthy Families Coverage (Child)

QA13_I4   Is (CHILD) covered by the Healthy Families Program?
Naka-insure ba si {CHILD} sa Healthy Families Program?

CF2

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]
[IF NEEDED SAY: "Ang Healthy Families ay programa ng estado na nagbabayad ng health insurance ng mga bata hanggang sa sila'y umabot ng 19 taong gulang."]

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

POST-NOTE QA13_I4:
IF QA13_I4 = 1, SET CHHFAM = 1 AND SET CHINSURE = 1

Employer-Based Coverage (Child)

QA13_I5   Is (CHILD) covered by a health insurance plan or HMO through your own or someone else's employment or union?
Naka-insure ba si {CHILD} sa health insurance plan o sa HMO sa pamamagitan
ng inyong trabaho o union o ng ibang tao?

CF3

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

YES 1
NO..2   **[GO TO PN QA13_I7]**
REFUSED .... -7   **[GO TO PN QA13_I7]**
DON'T KNOW .... -8   **[GO TO PN QA13_I7]**

POST-NOTE QA13_I5:
IF QA13_I5 = 1, SET CHEMP = 1 AND CHINSURE = 1

QA13_I6   Is this plan through an employer, through a union, or through Covered California's SHOP program?
Itong plan ba ay sa pamamagitan ng employer, ng union, o ng SHOP program ng Covered California?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]
[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]

AI90

EMPLOYER 1
UNION..2
SHOP / COVERED CALIFORNIA 3
OTHER (SPECIFY:_____)........................ 91
REFUSED .... -7
DON'T KNOW .... -8

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

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

Private Coverage (Child)

QA13_I7   Is (CHILD) covered by a health insurance plan that you purchased directly from an insurance company or HMO, or through Covered California?
Naka-insure ba si {CHILD} sa health insurance plan na binili ninyo nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(MODIFIED FOR CHIS 2014 – COVERED CA ADDED)

CF4

[IF NEEDED, SAY: "Do not include a plan that pays only for certain illnesses, such as cancer or stroke, or only gives you "extra cash" if you are in a hospital"]
[IF NEEDED, SAY: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital kayo."]

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

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

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

QA13_I8   How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?
Paano ninyo binili itong health insurance - direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(CHIS 2014 ONLY)

AI91

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

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

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

QA13_I9   Was this a bronze, silver, gold or platinum plan?
Bronze, silver, gold o platinum plan ba ito?
(CHIS 2014 ONLY)

AI92

```
                   Bronze.....................................................................1
                   Silver ......................................................................2
                   Gold .......................................................................3
                   Platinum .................................................................4
                   MEDI-CAL / MEDICAID ...........................................5
                   CATASTROPHIC.....................................................6
                   OTHER (SPECIFY:_____)........................ 91
                   REFUSED ............................................................ -7
                   DON'T KNOW ....................................................... -8
```

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

QA13_I10   Was there a subsidy or discount on the premium for this plan?
Mayroon bang tulong na pinansyal o diskwento sa bayad sa seguro para sa plan na ito?

AI93

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

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

QA13_I11   Do you pay any or all of the premium or cost for (CHILD)'s health plan? Do not include the cost of any co-pays or deductibles you or your family may have had to pay.
Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan ni {CHILD}? Huwag bilangin ang gastos para sa anumang mga co-pay o mga deductible na maaaring kinailangang bayaran ninyo o ng inyong pamilya.

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: "Ang mga co-pay ang parsyal na mga bayad ninyo para sa pangangalaga sa kalusugan ninyo tuwing nagpapatingin kayo sa doktor o tuwing ginagamit ang health care system, samantalang ang health plan ang nagbabayad ng pinakamalaking bahagi ng mga gastos ng health insurance ninyo."

"A deductible is the amount you pay for medical care before your health plan starts paying."
"Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong health plan para sa inyong pagpapagamot."

"Premium is the monthly charge for the cost of your health insurance plan."]
"Ang premium ang singil buwan-buwan para sa gastos ng inyong health insurance plan."]

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

QA13_I12   Does anyone else, such as an employer, a union, or professional organization pay all or some portion of the premium or cost for (CHILD)'s health plan?
Mayroon bang sinumang iba, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad ng lahat o ng bahagi ng premium o gastos para sa health plan ni {CHILD}?

AI50

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

QA13_I13   Who else pays all or some portion of the cost for (CHILD)'s health plan?
Sino pang iba ang nagbabayad ng lahat o ng bahagi ng gastos sa health plan ni {CHILD}?

AI51

                        CURRENT EMPLOYER 1
                        FORMER EMPLOYER 2
                        UNION...3
                        SPOUSE'S/PARTNER'S CURRENT EMPLOYER...4
                        SPOUSE'S/PARTNER'S FORMER EMPLOYER.....5
                        PROFESSIONAL/FRATERNAL ORGANIZATION ...6
                        MEDICAID/MEDI-CAL ASSISTANCE 7
                        HEALTHY FAMILIES 8
                        HEALTHY KIDS 9
                        COVERED CALIFORNIA...................................... 10
                        OTHER.. 91
                        REFUSED .... -7
                        DON'T KNOW .... -8

POST-NOTE QA13_I13:
IF QA13_I13 = 1 THRU 6, SET CHEMP = 1 AND CHDIRECT = 0;
IF QA13_I13 = 8, SET CHHFAM = 1;
IF QA13_I13 = 7, SET CHMCAL = 1
IF QA13_I13 = 9, SET CHHKID = 1
IF QA13_I13 = 10, SET CHHBEX = 1;

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

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

QA13_I14   Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health
care?
Naka-insure ba {siya/siya} sa CHAMPUS/CHAMP-VA, TRICARE, VA o sa iba pang
pangangalagang pangkalusugan ng militar?

CF6

                        YES 1   **[GO TO PN QA13_I22]**
                        NO...2
                        REFUSED .... -7
                        DON'T KNOW .... -8

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

Healthy Kids (Child)

PROGRAMMING NOTE QA13_I15:
IF CHINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) CONTINUE WITH QA13_ I11 AND DISPLAY "Healthy Kids";

QA13_I15   Is {he/she} covered by the Healthy Kids program?
Naka-insure ba si {CHILD} sa Healthy Kids program?

AI70

[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]
[IF NEEDED, SAY: "Ang Healthy Kids ay program para sa mga bata sa inyong county."]

YES 1   **[GO TO PN QA13_I22]**
NO..2
REFUSED .... -7
DON'T KNOW .... -8

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

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

QA13_I16   Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", PCIP, or something else?
Naka-insure ba {siya/siya} sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," PCIP, o ng iba pa?

CF7

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; and PCIP is the pre-existing condition insurance plan."]
[IF NEEDED, SAY: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program, at ang PCIP ay Pre-existing Condition Insurance Plan."]

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

POST-NOTE QA13_I16:
IF QA13_I16 = 1 OR 2 OR 3 OR 91, SET CHOTHGOV = 1 AND CHINSURE = 1

Other Coverage (Child)

QA13_I17　　Does {he/she} have any health insurance coverage through a plan that I missed?
Naka-insure ba {siya/siya} para sa anumang health insurance sa pamamagitan ng plan na hindi ko nabanggit?

CF8

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

QA13_I18   What type of health insurance does {he/she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?
Anong uri ng health insurance ang mayroon {siya/siya}? Sa pamamagitan ba ito ng Medi-CAL, Healthy Families, employer o union, o mula sa iba pang pinagkukunan?

CF9

[CIRCLE ALL THAT APPLY.]

[PROBE: "Any others?"]
[PROBE: "May iba pa ba?"]

```
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
HEALTHY FAMILIES ..............................................6
CHAMPUS/CHAMP-VA, TRICARE, VA, OR
  SOME OTHER MILITARY HEALTH CARE ............7
INDIAN HEALTH SERVICE, TRIBAL HEALTH
PROGRAM, URBAN INDIAN CLINIC......................8
HEALTHY KIDS ......................................................9
COVERED CALIFORNIA.................................... 10
SHOP THROUGH COVERED CALIFORNIA ........ 11
OTHER GOVERNMENT HEALTH PLAN .............. 91
OTHER NON-GOVERNMENT HEALTH PLAN..... 92
REFUSED ............................................................. -7
DON'T KNOW ....................................................... -8
```

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

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

QA13_I19   Just to verify, you said that (CHILD) gets health insurance through Medicare?
Upang beripikahin lamang, sinabi niyo na nakukuha ni {CHILD} ang health insurance sa
pamamagitan ng Medicare?

CF9VER

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

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

QA13_I20   What is the ONE main reason why (CHILD) is not enrolled in the Medi-CAL program?
Ano ang ISANG pangunahing dahilan na hindi naka- enroll sa program ng Medi-CAL si {CHILD}?

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

QA13_I21   What is the ONE main reason why (CHILD) is not enrolled in the Healthy Families program?
Ano ang ISANG pangunahing dahilan na hindi naka-enroll sa Healthy Families Program si {CHILD}?

CF2A

```
            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
```

Managed-Care Plan Characteristics (Child)

PROGRAMMING NOTE QA13_I22: **IF QA13_I1 = 1 AND ARMCARE = 1, THEN QA13_I22 = QA13_H8 AND QA13_I23 = QA13_H9 AND SKIP TO QA13_I24;** **ELSE IF QA13_I1 = 1, THEN QA13_I22 = QA13_H63 AND QA13_I23 = QA13_H64 AND QA13_I24 = QA13_H65 AND GO TO PN QA13_I25;** **ELSE IF CHINSURE = 1, THEN CONTINUE WITH QA13_I22;** **ELSE GO TO PN QA13_I25**

QA13_I22   Is (CHILD)'s main health plan an HMO, that is, a Health Maintenance Organization?
HMO ba ang pangunahing health plan ni {CHILD }, ang ibig sabihin, Health Maintenance Organization?

MA3

[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, {he/she} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid for unless its an emergency."]
[IF NEEDED, SAY: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin {niya o niya} ang mga doktor at mga ospital na kaanib sa kanilang network. Kung lalabas {siya o siya} sa network, sa karaniwan hindi mababayaran ito maliban na lang kung emergency ito."]

```
            YES .........................................................................1        [GO TO QA13_I23]
            NO ...........................................................................2
            REFUSED ............................................................. -7
            DON'T KNOW ....................................................... -8
```

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

QA13_I22B   Is (CHILD)'s health plan a PPO or EPO?
              PPO o EPO ba ang {kanyang o kanyang} health plan?
               (CHIS 2014 ONLY)

AI115

[IF NEEDED, SAY: "EPO stands for Exclusive Provider Organization. With an EPO, you must use the in-network doctors and hospitals, unless it's an emergency and you can access doctors and specialists directly without a referral from your primary care provider."]
[IF NEEDED, SAY: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doctor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doctor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

[IF NEEDED, SAY: "PPO stand for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can access doctors and specialists directly without a referral from your primary care provider."]
[IF NEEDED, SAY: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doctor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doctor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doctor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

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

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

PROGRAMMING NOTE QA13_I23:
IF CHINSURE = 1 (CHILD HAS ANY COVERAGE), CONTINUE WITH QA13_I23;
IF CHMCARE = 1 AND QA13_I22 = 1 THEN list HMO MediCare by county;
ELSE IF CHMCAL = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 1) AND QA13_I22 = 1 THEN list HMO MEDI-CAL by county;
ELSE IF (CHHFAM = 1 OR CHHKIDS = 1) AND QA13_I22 = 1 THEN list HMO Healthy Families by county;
ELSE IF (CHEMP = 1 OR CHDIRECT = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 2) OR CHOTHER = 1) AND QA13_I22 = 1 THEN list HMO Commercial by county;
ELSE IF (CHEMP = 1 OR CHDIRECT =1 OR CHOTHER = 1) AND QA13_I22 = 2 THEN list Non-HMO by county

---

QA13_I23   What is the name of (CHILD)'s main health plan?
Anong pangalan ng {Medi-Cal} health plan ni {CHILD}?

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: Mayroon bang insurance card si {CHILD} o anumang bagay na may nakasulat na pangalan ng plan?"]

AARP MEDICARE COMPLETE 1
AETNA 2
AETNA MEDICARE (SELECT/PREMIER) 3
ALAMEDA ALLIANCE FOR HEALTH 4
ALLIANCE COMPLETE CARE 5
ANTHEM BLUE CROSS/BLUE CROSS 6
ARCADIAN COMMUNITY CARE 7
BLUE CROSS SENIOR SECURE 8
BLUE SHIELD 65 PLUS 9
BLUE SHIELD OF CALIFORNIA 10
CAL OPTIMA 11
CARE 1^(ST) HEALTH PLAN 12
CARE ADVANTAGE 13
CARE MORE 14
CEN CAL HEALTH... 15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH 16
CENTRAL HEALTH PLAN OF CALIFORNIA 17
CHINESE COMMUNITY HEALTH PLAN.. 18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM 19
CIGNA.. 20
CITIZENS CHOICE HEALTHPLAN 21
COMMUNICARE ADVANTAGE 22
COMMUNITY HEALTH GROUP 23
COMMUNITY HEALTH PLAN... 24
CONTRA COSTA HEALTH PLAN 25
EASY CHOICE HEALTH PLAN 26
GEM CARE 27
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN 28
GREAT-WEST 29
HEALTH NET.. 30
HEALTH PLAN OF SAN JOAQUIN... 31
HEALTH PLAN OF SAN MATEO.. 32
HUMANA GOLD PLUS 33
IEHP (INLAND EMPIRE HEALTH PLAN) 34
IEHP MEDICARE DUAL CHOICE... 35
INTER VALLEY HEALTH PLAN 36
KAISER 37
KERN COUNTY HEALTH PLAN... 38
L.A. CARE HEALTH PLAN 39

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

QA13_I24   Is (CHILD) covered for prescription drugs?
                 Naka-insure ba si {CHILD} para sa mga gamot na inirereseta?

CF14

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

High Deductible Health Plans (Child)

PROGRAMMING NOTE FOR QA13_I25:
IF (ARINSURE ≠ 1 OR QA13_I1 ≠ 1) AND (CHEMP = 1 OR CHDIRECT = 1 OR CHOTHER = 1), THEN
CONTINUE WITH QA13_I25;
ELSE SKIP TO PROGRAMMING NOTE QA13_I30

QA13_I25   Does (CHILD)'s health plan have a deductible that is more than $1,000?
Ang health plan ba ni {CHILD} ay may deductible na mahigit sa $1,000?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago
magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

```
YES ..........................................................1
NO..............................................................2      [GO TO QA13_I27]
YES, ONLY WHEN GO OUT OF NETWORK ..........3      [GO TO QA13_I27]
REFUSED ............................................... -7
DON'T KNOW ........................................ -8
```

PROGRAMMING NOTE FOR QA13_I26:
IF CHEMP = 1, THEN CONTINUE WITH QA13_I26;
ELSE GO TO QA13_I27

QA13_I26   Does (CHILD)'s health plan have a deductible that is more than $2,000?
Ang health plan ba ni {CHILD} ay may deductible na mahigit sa $2,000?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago
magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

```
YES ..........................................................1      [GO TO PN QA13_I28]
NO..............................................................2
YES, ONLY WHEN GO OUT OF NETWORK ..........3
REFUSED ............................................... -7
DON'T KNOW ........................................ -8
```

QA13_I27   Does (CHILD)'s health plan have a deductible for all covered persons that is more than $2,000?
Ang health plan ba ni {CHILD} ay may deductible na mahigit sa $2,000 para sa lahat ng taong naka-insure?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

YES 1
NO..2   **[GO TO PN QA13_I29]**
YES, ONLY WHEN GO OUT OF NETWORK 3   **[GO TO PN QA13_I29]**
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE FOR QA13_I28:
IF CHEMP = 1, THEN CONTINUE WITH QA13_I28;
ELSE GO TO PROGRAMMING NOTE QA13_I29

QA13_I28   Does (CHILD)'s health plan have a deductible for all covered persons that is more than $4,000?
Ang health plan ba ni {CHILD} ay may deductible na mahigit sa $4,000 para sa lahat ng taong naka-insure?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]

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

PROGRAMMING NOTE QA13_I29:
IF (QA13_I25 = 1 OR 3) OR (QA13_I26 = 1 OR 3) OR (QA13_I27 = 1 OR 3), CONTINUE WITH QA13_I29;
ELSE SKIP TO PROGRAMMING NOTE QA13_I30

QA13_I29   Do you have a special account or fund you can use to pay for (CHILD)'s medical expenses?
Mayroon ba kayong tanging account o pondo na maaari ninyong magamit para pambayad sa mga gastos sa pagpapagamot ni {CHILD}?

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: Paminsan-minsan, tinatawag ang mga account na Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), o iba pang mga katulad na account. Kabilang sa mga iba pang pangalan ang Personal care accounts, Personal medical funds, o Choice funds, at naiiba sa mga Flexible Spending Account, na ipinagkakaloob ng mga employer."]

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

Reasons for Lack of Coverage (Child)

PROGRAMMING NOTE QA13_I30:
IF CHINSURE = 1, GO TO QA13_I35;
ELSE CONTINUE WITH QA13_I30

QA13_I30   What is the <u>one main</u> reason (CHILD) does not have any health insurance?
Ano ang <u>isang pangunahing</u> dahilan na walang health insurance si {CHILD}?

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

Coverage over Past 12 Months (Child)

QA13_I31   Was (CHILD) covered by health insurance at any time during the past 12 months?
                 May health insurance ba si {CHILD} kailanman nitong nakaraang 12 na buwan?

CF20

                 YES 1   **[GO TO QA13_I33]**
                 NO 2
                 REFUSED .... -7
                 DON'T KNOW .... -8

QA13_I32   How long has it been since (CHILD) last had health insurance?
                 Gaano katagal na mula noong huling may health insurance si {CHILD}?

CF21

                 MORE THAN 12 MONTHS, BUT NOT
                 MORE THAN 3 YEARS AGO 1   **[GO TO PN QA13_I41]**
                 MORE THAN 3 YEARS AGO 2   **[GO TO PN QA13_I41]**
                 NEVER HAD HEALTH INSURANCE COVERAGE ..3   **[GO TO PN QA13_I41]**
                 REFUSED .... -7   **[GO TO PN QA13_I41]**
                 DON'T KNOW .... -8   **[GO TO PN QA13_I41]**

QA13_I33   For how many of the last 12 months did {he/she} have health insurance?
                 Ilang buwan ba { siyang / siyang } may health insurance nitong nakaraang 12 buwan?

CF22

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

                 _____ MONTHS [HR: 0-12]   **[IF 0, THEN GO TO PN QA13_I41]**

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

QA13_I34   During that time when (CHILD) had health insurance, was {his/her} insurance Medi-CAL, Healthy Families, a plan you obtained through an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
Noong panahon na may health insurance si {CHILD} ang insurance ba {niya/niya} ay Medi-CAL, Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

CF23

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: "May iba pa ba?"]

MEDI-CAL 1	**[GO TO PN QA13_I41]**
HEALTHY FAMILIES 2	**[GO TO PN QA13_I41]**
THROUGH CURRENT OR FORMER EMPLOYER	
UNION..3	**[GO TO PN QA13_I41]**
HEALTHY KIDS 4	**[GO TO PN QA13_I41]**
PURCHASED DIRECTLY..................................5	**[GO TO PN QA13_I41]**
COVERED CALIFORNIA...................................6	**[GO TO PN QA13_I41]**
OTHER HEALTH PLAN.................................. 91	**[GO TO PN QA13_I41]**
REFUSED .... -7	**[GO TO PN QA13_I41]**
DON'T KNOW .... -8	**[GO TO PN QA13_I41]**

QA13_I35   Thinking about {his/her} current health insurance, did (CHILD) have this same insurance for ALL of the past 12 months?
Isipin ninyo ang kasalukuyang health insurance {CHILD} ito rin ba ang insurance {niya/niya} para sa KABUUAN ng nakaraang 12 buwan?

CF24

YES 1	**[GO TO PN QA13_I41]**
NO...2	
HAD SAME INSURANCE SINCE BIRTH	
(FOR CHILDREN LESS THAN ONE YEAR OLD) ...3	**[GO TO PN QA13_I41]**
REFUSED .... -7	
DON'T KNOW .... -8	

QA13_I36   When {he/she} wasn't covered by {his/her} current health insurance, did {he/she/he or she} have any other health insurance?
Noong hindi {siya/siya} naka-insure sa {kanyang/kanyang} kasalukuyang health insurance, mayroon ba {siyang/siyang} anumang iba pang health insurance?

CF25

YES 1	
NO...2	**[GO TO QA13_I38]**
REFUSED .... -7	**[GO TO QA13_I38]**
DON'T KNOW .... -8	**[GO TO QA13_I38]**

QA13_I37   Was this other health insurance Medi-CAL, Healthy Families, a plan you obtained from an employer, a plan you purchased directly from an insurance company, a plan you purchased through Covered California, or some other plan?
Medi-CAL ba itong iba pang health insurance, Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California, o iba pang plan?

CF26

[CODE ALL THAT APPLY.]

[PROBE: "Any others?"]
[PROBE: "May iba pa ba?"]

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

QA13_I38   During the past 12 months, was there any time when {he/she} had no health insurance at all?
Nitong nakaraang 12 buwan, mayroon bang anumang panahon na {siya/siya} ay ganap na walang health insurance?

CF27

             YES 1
             NO 2   **[GO TO PN QA13_I41]**
             REFUSED .... -7   **[GO TO PN QA13_I41]**
             DON'T KNOW .... -8   **[GO TO PN QA13_I41]**

QA13_I39   For how many of the past 12 months did {he/she} have no health insurance?
Ilang buwan ba {siyang/siyang} walang health insurance nitong nakaraang 12 buwan?

CF28

[IF < 1 MONTH, ENTER "1"]

             _____ MONTHS   [RANGE: 1-12]

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

QA13_I40   What is the ONE MAIN reason (CHILD) did not have any health insurance during the time {he/she} wasn't covered?
Ano ang ISANG PANGUNAHING dahilan na walang health insurance si {CHILD} noong panahon na hindi {siya/siya} naka-insure?

CF29

[IF R SAYS, "No need," PROBE WHY]
[IF R SAYS, "Hindi kailangan." PROBE WHY]

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

Teen's Health Insurance

> **PROGRAMMING NOTE QA13_I41:**
> **IF NO TEEN SELECTED, GO TO PN QA13_I81;**
> **IF ARINSURE = 1, CONTINUE WITH QA13_I41;**
> **IF ARINSURE = 0, GO TO PN QA13_I42;**
> **ELSE CONTINUE WITH QA13_I41**

QA13_I41   These next questions are about health insurance (TEEN) may have.

Does (TEEN) have the same insurance as {you/ADULT RESPONDENT NAME}?
Iisa ba ang insurance ninyo ni {you/ADULT RESPONDENT NAME}?

| IA10A |

```
YES ..............................................................1     [GO TO QA13_I75]
NO ................................................................2
REFUSED ................................................... -7
DON'T KNOW .......................................... -8
```

> **POST-NOTE QA13_I41:**
> **IF QA13_I41 = 1 AND ARMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AREMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AREMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AREMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AREMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AROTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND AROTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;**
> **IF QA13_I41 = 1 AND ARIHS = 1, SET TEIHS = 1**
> **IF QA13_I41 = 1 AND ARHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;**

```
PROGRAMMING NOTE QA13_I42:
IF SPINSURE ≠ 1 THEN SKIP TO QA13_I43;
ELSE IF QA13_I41 = 2 AND ARSAMESP = 1 THEN SKIP TO PROGRAMMING NOTE QA13_I43;
ELSE CONTINUE WITH QA13_I42
```

QA13_I42   Does (TEEN) have the same insurance as your spouse?
             Iisa ba ang insurance ni {TEEN} at ng inyong {asawa}?

| MA5 |

                        YES 1   **[GO TO QA13_I62]**
                        NO 2
                        REFUSED .... -7
                        DON'T KNOW .... -8

```
POST-NOTE QA13_I42:
IF QA13_I42 = 1 AND SPMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPEMPOWN = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPEMPSP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPEMPPAR = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPEMPOTH = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPOTHER = 1, SET TEOTHER = 1 AND SET TEINSURE = 1;
IF QA13_I42 = 1 AND SPIHS = 1, SET TEIHS = 1
IF QA13_I42 = 1 AND SPHBEX = 1, SET TEHBEX = 1 AND SET TEINSURE = 1;
```

```
PROGRAMMING NOTE QA13_I43:
IF CHINSURE ≠ 1, THEN SKIP TO QA13_I44;
ELSE IF (QA13_I41= 2 AND ARSAMECH = 1) OR (QA13_I42 = 2 AND SPSAMECH = 1), THEN SKIP TO
QA13_I44;
ELSE CONTINUE WITH QA13_I43;
```

QA13_I43   Does (TEEN) have the same insurance as (CHILD)?
             Iisa ba ang insurance ni {TEEN} at ni {CHILD}?

| MA6 |

                        YES 1   **[GO TO PN QA13_I75]**
                        NO 2
                        REFUSED .... -7
                        DON'T KNOW .... -8

```
POST-NOTE QA13_I43:
IF QA13_I43 = 1 AND CHMCARE = 1, SET TEMCARE = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHMCAL = 1, SET TEMCAL = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHHFAM = 1, SET TEHFAM = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHHKID = 1, SET TEHKID = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHEMP = 1, SET TEEMP = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHDIRECT = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHMILIT = 1, SET TEMILIT = 1 AND SET TEINSURE = 1;
IF QA13_I43 = 1 AND CHOTHGOV = 1, SET TEOTHGOV = 1 AND SET TEINSURE = 1;
```

IF QA13_I43= 1 AND CHIHS = 1, SET TEIHS = 1

Medi-Cal Coverage (Teen)

QA13_I44   Is {he/she} currently covered by Medi-CAL?
Naka-insure ba {siya/siya} sa Medi-CAL?

IA1

[IF NEEDED, SAY: "Medi-CAL is a plan for certain low income children and their families, pregnant women, and disabled or elderly people."]
[IF NEEDED, SAY: "Ang Medi-CAL ay plan para sa ilang mga bata at pamilya nila na maliliit ang kita, mga babaeng buntis, at mga taong may kapansanan o may-edad na."]

YES 1   **[GO TO QA13_I46]**
NO 2
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE QA13_I44:
IF QA13_I44 = 1, SET TEMCAL = 1 AND SET TEINSURE = 1

Healthy Families Coverage (Teen)

QA13_I45   Is (TEEN) covered by the Healthy Families Program?
Naka-insure ba si {TEEN} sa Healthy Families Program?

IA2

[IF NEEDED, SAY: "Healthy Families is a state program that pays for health insurance for children up to age 19."]
[IF NEEDED, SAY: "Program ng state ang Healthy Families na nagbabayad ng health insurance para sa mga bata hanggang 19 taong gulang."]

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

POST-NOTE QA13_I45:
IF QA13_I45 = 1, SET TEHFAM = 1 AND SET TEINSURE = 1

Employer-Based Coverage (Teen)

QA13_I46   Is (TEEN) covered by a health insurance plan or HMO through your own or someone else's employment or union?
Naka-insure ba si {TEEN} sa health insurance plan o sa HMO sa pamamagitan ng inyong trabaho o union o ng ibang tao?

```
IA3
```

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

YES 1
NO..2   **[GO TO QA13_I48]**
REFUSED .... -7   **[GO TO QA13_I48]**
DON'T KNOW .... -8   **[GO TO QA13_I48]**

POST-NOTE QA13_I46:
IF QA13_I45 = 1, SET TEEMP = 1 AND SET TEINSURE = 1

QA13_I47   Is this plan through an employer, through a union, or through Covered California's SHOP program?
Itong plan ba ay sa pamamagitan ng employer, ng union, o ng SHOP program ng Covered California?
(CHIS 2014 ONLY)

[IF NEEDED, SAY: "SHOP is the Small Business Health Options Program administered by Covered California."]
[IF NEEDED, SAY: "Ang SHOP ay ang Small Business Health Options Program na pinangangasiwaan ng Covered California."]

```
AI94
```

EMPLOYER 1
UNION...2
SHOP / COVERED CALIFORNIA 3
OTHER (SPECIFY:_____)........................ 91
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE FOR QA13_I47:
IF QA13_I47 = 3, THEN SET TEHBEX = 1

PROGRAM NOTE QA13_I48:
IF TEINSURE = 1 THEN GO TO QA13_I49;
ELSE CONTINUE WITH QA13_I48

Private Coverage (Teen)

QA13_I48   Is (TEEN) covered by a health insurance plan that you purchased directly from an insurance company or HMO?
Naka-insure ba si {TEEN} sa health insurance plan na binili ninyo nang
direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?

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: "Huwag ninyong bilangin ang plan na nagbabayad lamang para sa tiyak na mga sakit kagaya ng cancer o stroke, o naglalaan lamang ng "ekstrang pera" kung ma-ospital kayo."]

YES 1
NO...2   **[GO TO PN QA13_I55]**
REFUSED .... -7   **[GO TO PN QA13_I55]**
DON'T KNOW .... -8   **[GO TO PN QA13_I55]**

POST-NOTE QA13_I48:
IF QA13_I48 = 1, SET TEDIRECT = 1 AND SET TEINSURE = 1

PROGRAMMING NOTE QA13_I49:
IF TEDIRECT = 1, THEN CONTINUE WITH QA13_I49;
ELSE GO TO PROGRAMMING NOTE QA13_I50

QA13_I49   How did you purchase this health insurance – directly from an insurance company or HMO, or through Covered California?
Paano ninyo binili itong health insurance - direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(CHIS 2014 ONLY)

AI95

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

POST-NOTE FOR QA13_I49:
IF QA13_I49 = 2, THEN SET TEHBEX = 1

PROGRAMMING NOTE QA13_I50
IF TEHBEX = 1, THEN CONTINUE WITH QA13_I50;
ELSE GO TO PROGRAMMING NOTE QA13_I52;

QA13_I50   Was this a bronze, silver, gold or platinum plan?
Bronze, silver, gold o platinum plan ba ito?
(CHIS 2014 ONLY)

AI96

Bronze 1
Silver 2
Gold 3
Platinum 4
MEDI-CAL / MEDICAID 5
CATASTROPHIC 6
OTHER (SPECIFY:_____) 91
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_I51
IF QA13_I47 = 3, THEN GO TO PN QA13_I52;
ELSE CONTINUE WITH QA13_I51;

QA13_I51   Was there a subsidy or discount on the premium for this plan?
Mayroon bang tulong na pinansyal o diskwento sa bayad sa seguro para sa plan na ito?
(CHIS 2014 ONLY)

AI97

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

PROGRAMMING NOTE QA13_I52:
IF TEEMP = 1 (EMPLOYER-BASED COVERAGE) OR TEDIRECT = 1 (PURCHASED OWN COVERAGE),
CONTINUE WITH QA13_I52;
ELSE GO TO PROGRAMMING NOTE QA13_I55

QA13_I52   Do you pay any or all of the premium or cost for (TEEN)'s health plan? Do not include the cost of
any co-pays or deductibles you or your family may have had to pay.
Binabayaran ba ninyo ang anumang bahagi o ang lahat ng premium o gastos para sa health plan
ni {TEEN}? Huwag bilangin ang gastos para sa anumang mga co-pay o deductible na maaaring
kinailangang bayaran ninyo o ng inyong pamilya.

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: "Ang mga co-pay ang parsyal na mga bayad ninyo para sa
pangangalaga sa kalusugan ninyo tuwing nagpapatingin kayo sa doktor o tuwing
ginagamit ang health care system, samantalang ang health plan ang nagbabayad ng
pinakamalaking bahagi ng mga gastos ng health insurance ninyo."**

A deductible is the amount you pay for medical care before your health plan starts paying.
**"Ang deductible ang halagang binabayaran ninyo para sa pagpapagamot bago
magsimulang magbayad ang inyong health plan."**

Premium is the monthly charge for the cost of your health insurance plan."]
"Ang premium ang singil buwan-buwan para sa gastos ng inyong health insurance plan."]

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

QA13_I53   Does anyone else, such as an employer, a union, or professional organization pay all or some
portion of the premium or cost for (TEEN)'s health plan?
Mayroon bang iba pa, gaya ng employer, union, o samahang pampropesyonal, na nagbabayad
ng lahat o ng bahagi ng premium o gastos sa health plan ni {TEEN}?

AI52

YES 1
NO 2   **[GO TO PN QA13_I55]**
REFUSED .... -7   **[GO TO PN QA13_I55]**
DON'T KNOW .... -8   **[GO TO PN QA13_I55]**

QA13_I54   Who else pays all or some portion of the cost for (TEEN)'s health plan?
                    Sino pang iba ang nagbabayad ng lahat o ng bahagi ng gastos sa health plan ni {TEEN}?

AI53

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

POST-NOTE QA13_I54:
IF QA13_I54 = 1-6, SET TEEMP = 1 AND TEDIRECT = 0;
IF QA13_I54 = 7, SET TEMCAL = 1;
IF QA13_I54 = 8, SET TEHFAM = 1;
IF QA13_I54 = 9, SET TEHKID = 1 AND SET TEINSURE = 1
IF QA13_I54 = 10, SET TEHBEX =1;

CHAMPUS/CHAMP VA, TRICARE, VA Coverage (Teen)

PROGRAMMING NOTE QA13_I55:
IF TEINSURE = 1, GO TO PROGRAMMING NOTE QA13_I62;
ELSE CONTINUE WITH QA13_I55

QA13_I55   Is {he/she} covered by CHAMPUS/CHAMP VA, TRICARE, VA, or some other military health
                    care?
                    Naka-insure ba {siya/siya} sa CHAMPUS/CHAMP-VA, TRICARE, VA o ng iba pang
                    pangangalagang pangkalusugan ng militar?

IA6

                    YES 1   **[GO TO PN QA13_I62]**
                    NO 2
                    REFUSED .... -7
                    DON'T KNOW .... -8

POST-NOTE QA13_I55:
IF QA13_I55 = 1, SET TEMILIT = 1 AND SET TEINSURE = 1

Healthy Kids (Teen)

PROGRAMMING NOTE FOR QA13_I56:
IF TEINSURE ≠ 1 (NO COVERAGE FROM MEDICARE, MEDI-CAL, HEALTHY FAMILIES, EMPLOYER, PRIVATE PLAN, OR MILITARY PLAN) CONTINUE WITH QA13_ I48 AND DISPLAY "Healthy Kids";

QA13_I56   Is {he/she} covered by the Healthy Kids program?
Naka-insure ba si {he/she} sa Healthy Kids program?

AI71

[IF NEEDED, SAY: "Healthy Kids is a program for children in your county."]

[IF NEEDED, SAY: "Ang Healthy Kids ay program para sa mga bata sa inyong county."]

YES 1   **[GO TO PN QA13_I62]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE QA13_I56:
IF QA13_I56 = 1, SET TEHKID = 1 AND SET TEINSURE = 1

AIM, MRMIP, Family PACT, PCIP, Other Government Coverage (Teen)

QA13_I57   Is {he/she} covered by some other government health plan such as AIM, "Mister MIP", Family PACT, PCIP or something else?
Naka-insure ba {siya/siya} sa iba pang health plan ng gobyerno, gaya ng AIM, "Mister MIP," Family PACT, PCIP, o ng iba pa?

IA7

[IF NEEDED, SAY: "AIM means Access for Infants and Mothers, Mister MIP or MRMIP means Major Risk Medical Insurance Program; Family PACT is the state program that pays for contraception/reproductive health services for uninsured lower income women and men; and PCIP is the pre-existing condition insurance plan."]
[IF NEEDED, SAY: "Ang kahulugan ng AIM ay Access for Infants and Mothers; ang 'Mister MIP' o MRMIP ay Major Risk Medical Insurance Program; ang Family PACT ang program ng state na nagbabayad para sa serbisyong pangkalusugang para sa pagpipigil sa pagbubuntis/pag- aanak para sa mga hindi naka-insure na mga babae't lalake na maliliit ang kita; at ang PCIP ang insurance plan para sa mga dati nang umiiral na karamdaman."]

AIM...1   **[GO TO PN QA13_I62]**
"MISTER MIP"/MRMIP..2   **[GO TO PN QA13_I62]**
Family PACT 3   **[GO TO PN QA13_I62]**
PCIP...4   **[GO TO PN QA13_I62]**
NO OTHER PLAN..5
SOMETHING ELSE (SPECIFY:_____) 91   **[GO TO PN QA13_I62]**
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE QA13_I57:
IF QA13_I57 = 1 OR 2 OR 3 OR 4 OR 91, SET TEOTHGOV = 1 AND SET TEINSURE = 1

Other Coverage (Teen)

QA13_I58   Does {he/she} have any health insurance coverage through a plan that I missed?
Naka-insure ba {siya/siya} sa anumang health insurance sa pamamagitan ng plan na hindi ko nabanggit?

IA8

YES 1
NO..2   **[GO TO PN QA13_I62]**
REFUSED .... -7   **[GO TO PN QA13_I62]**
DON'T KNOW .... -8   **[GO TO PN QA13_I62]**

QA13_I59   What type of health insurance does {he/she} have? Does it come through Medi-CAL, Healthy Families, an employer or union, or from some other source?
Anong uri ng health insurance ang mayroon {siya/siya}? Sa pamamagitan ba ito ng Medi-CAL, Healthy Families, employer o union, o mula sa iba pang pinagkukunan?

IA9

[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Do you get this plan through a current or former employer/union, through a school, professional association, trade group, or other organization, or directly from the health plan?"]
[IF R GIVES NAME OF PRIVATE PLAN, THEN PROBE: "Nakukuha ba ninyo ang plan na ito sa pamamagitan ng kasalukuyan o dating employer/union, sa pamamagitan ng paaralan, samahang pampropesyonal, grupo ng manggagawa, o iba pang samahan, o direkta mula sa health plan?"]

[CIRCLE ALL THAT APPLY]

[PROBE: "Any others?"]
[PROBE: "May iba pa?"]

THROUGH CURRENT OR FORMER
 EMPLOYER/UNION 1
THROUGH SCHOOL, PROFESSIONAL
ASSOCIATION, TRADE GROUP OR OTHER
ORGANIZATION...2
PURCHASED DIRECTLY FROM A HEALTH
PLAN (BY R OR ANYONE ELSE) 3
MEDICARE 4   (VERIFY)
MEDI-CAL 5
HEALTHY FAMILIES 6
CHAMPUS/CHAMP-VA, TRICARE, VA,
OR SOME OTHER MILITARY HEALTH CARE 7
INDIAN HEALTH SERVICE, TRIBAL HEALTH
PROGRAM, URBAN INDIAN CLINIC.......................8
HEALTHY KIDS 9
COVERED CALIFORNIA....................................... 10
SHOP THROUGH COVERED CALIFORNIA 11
OTHER GOVERNMENT HEALTH PLAN.............. 91
OTHER NON-GOVERNMENT HEALTH PLAN..... 92
REFUSED .... -7
DON'T KNOW .... -8

POST-NOTE QA13_I59:
IF QA13_I59_1 = 1, SET TEEMP = 1 AND TEINSURE = 1;
IF QA13_I59_2 = 1, SET TEEMP = 1 AND TEINSURE = 1;

IF QA13_I59_3 = 1, SET TEDIRECT = 1 AND TEINSURE = 1;
IF QA13_I59_4 = 1, SET TEMCARE = 1 AND TEINSURE = 1;
IF QA13_I59_5 = 1, SET TEMCAL = 1 AND TEINSURE = 1;
IF QA13_I59_6 = 1, SET TEHFAM = 1 AND TEINSURE = 1;
IF QA13_I59_7 = 1, SET TEMILIT = 1 AND TEINSURE = 1;
IF QA13_I59_8 = 1, SET TEIHS = 1;
IF QA13_I59_9 = 1, SET TEHKID = 1 AND TEINSURE = 1;
IF QA13_I59 = 10, SET TEHBEX = 1 AND CHINSURE = 1;
IF QA13_I59 = 11, SET TEHBEX = 1 AND CHINSURE = 1;
IF QA13_I59_91 = 1, SET TEOTHGOV = 1 AND TEINSURE = 1;
IF QA13_I59_92 = 1, SET TEOTHER = 1 AND TEINSURE = 1;
IF QA13_I59 = -7 OR -8, SET TEINSURE = 1

PROGRAMMING NOTE QA13_I60:
IF TEINSURE ≠ 1 CONTINUE WITH QA13_I60;
ELSE GO TO QA13_I62;

QA13_I60   What is the ONE main reason why (TEEN) is not enrolled in the Medi-CAL program?
Ano ang ISANG pangunahing dahilan na hindi naka-enroll sa program ng Medi-CAL si {TEEN}?

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

QA13_I61   What is the ONE main reason why (TEEN) is not enrolled in the Healthy Families program?
Ano ang ISANG pangunahing dahilan na hindi naka- enroll sa Healthy Families Program si {TEEN}?

IA2A

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

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

Managed-Care Plan Characteristics (Teen)

> **PROGRAMMING NOTE QA13_I62:**
> **IF QA13_I41 = 1 AND ARMCARE = 1, THEN QA13_I62 = QA13_H8 AND QA13_I63 = QA13_H9 AND SKIP TO QA13_I64;**
> **ELSE IF QA13_I41 = 1, THEN QA13_I62 = QA13_H63 AND QA13_I63 = QA13_H64 AND QA13_I64 = QA13_H65 AND GO TO PN QA13_I65;**
> **ELSE IF QA13_I43 = 1, THEN QA13_I62 = QA13_I22 AND QA13_I63 = QA13_I23 AND QA13_I64 = QA13_I24 AND GO TO PN QA13_I65;**
> **ELSE IF TEINSURE = 1, THEN CONTINUE WITH QA13_I62;**
> **ELSE GO TO PROGRAMMING NOTE QA13_I65**

QA13_I62   Is (TEEN)'s {Medi-Cal} health plan an HMO?
HMO ba ang pangunahing health plan ni {TEEN}, ang ibig sabihin, Health Maintenance Organization?
(CHIS 2014 ONLY)

MA8

[IF NEEDED, SAY: "HMO stands for Health Maintenance Organization. With an HMO, {he/she/} must use the doctors and hospitals belonging to its network. If {he/she} goes outside the network, generally it will not be paid unless it's an emergency."]
[IF NEEDED, SAY: "Ang kahulugan ng HMO ay Health Maintenance Organization. Sa HMO, kailangang gamitin {niya o niya} ang mga doktor at mga ospital na kaanib sa kanilang network, o pagkakaugnay. Kung lalabas {siya o siya} sa network, sa karaniwan hindi mababayaran ito maliban na lamang kung emergency ito."

[IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "{his/her} MAIN health plan."]
[NOTE: IF ADOLESCENT HAS MORE THAN ONE HEALTH PLAN, SAY: "ang PANGUNAHING health plan {niya o niya}."]

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

YES 1   **[GO TO QA13_I63]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_I62B:
IF TEMCAL = 1 (TEEN HAS MEDI-CAL), GO TO QA13_I63;
ELSE CONTINUE WITH QA13_I62B;

QA13_I62B   Is (TEEN)'s health plan a PPO or EPO?
PPO o EPO ba ang {kanyang o kanyang} health plan?

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: "Ang kahulugan ng EPO ay Exclusive Provider Organization. Sa EPO, kailangan ninyong gamitin ang mga doctor at mga ospital na kaanib sa kanilang network, maliban lang kung ito ay isang emergency, at maaari kayong magpagamot nang tuwiran sa mga doctor at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

[IF NEEDED, SAY: "PPO stand for Preferred Provider Organization. With a PPO, you can use any doctors and hospitals, but you pay less if you use doctors and hospitals that belong to your plan's network. Also, you can access doctors and specialists directly without a referral from your primary care provider."]
[IF NEEDED, SAY: "Ang kahulugan ng PPO ay Preferred Provider Organization. Sa PPO, maaari kayong magpagamot sa sinumang mga doctor at sa anumang mga ospital, pero mas mababa ang bayad ninyo kapag nagpagamot kayo sa mga doctor at mga ospital na kaanib sa network ng plan ninyo. At saka, maaari kayong tuwirang magpagamot sa mga doctor at mga at mga espesyalista na wala nang referral mula sa inyong primary care provider."]

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

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

PROGRAMMING NOTE QA13_I63:
IF TEINSURE = 1 (TEEN HAS ANY COVERAGE), CONTINUE WITH QA13_I63;
IF TEMCARE = 1 AND QA13_I62= 1 THEN list HMO MediCare by county;
ELSE IF TEMCAL = 1 OR (CHOTHGOV = 1 AND QA13_I16 = 1) AND QA13_I62 = 1 THEN list HMO MEDI-CAL by county;
ELSE IF (TEHFAM = 1 OR TEHKIDS = 1) AND QA13_I62 = 1 THEN list HMO Healthy Families by county;
ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR (TEOTHGOV = 1 AND QA13_I57 = 2) OR TEOTHER = 1) AND QA13_I62 = 1 THEN list HMO Commercial by county;
ELSE IF (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1) AND QA13_I62 = 2 THEN list Non-HMO by county

---

QA13_I63   What is the name of (TEEN)'s main health plan?
Anong pangalan ng {Medi-Cal} health plan ni {TEEN}?

MA7

[IF R HAS DIFFICULTY RECALLING NAME, THEN PROBE: "Does (TEEN) have an insurance card or something else with the plan name on it?"]
[NOTE: IF R HAS DIFFICULTY RECALLING NAME, PROBE: Mayroon bang insurance card si {TEEN} o anumang bagay na may nakasulat na pangalan ng plan?"]

AARP MEDICARE COMPLETE	1
AETNA	2
AETNA MEDICARE (SELECT/PREMIER)	3
ALAMEDA ALLIANCE FOR HEALTH	4
ALLIANCE COMPLETE CARE	5
ANTHEM BLUE CROSS/BLUE CROSS	6
ARCADIAN COMMUNITY CARE	7
BLUE CROSS SENIOR SECURE	8
BLUE SHIELD 65 PLUS	9
BLUE SHIELD OF CALIFORNIA	10
CAL OPTIMA	11
CARE 1ST HEALTH PLAN	12
CARE ADVANTAGE	13
CARE MORE	14
CEN CAL HEALTH	15
CENTRAL CALIFORNIA ALLIANCE FOR HEALTH	16
CENTRAL HEALTH PLAN OF CALIFORNIA	17
CHINESE COMMUNITY HEALTH PLAN	18
CHINESE COMMUNITY HEALTH PLAN SENIOR PROGRAM	19
CIGNA	20
CITIZENS CHOICE HEALTHPLAN	21
COMMUNICARE ADVANTAGE	22
COMMUNITY HEALTH GROUP	23
COMMUNITY HEALTH PLAN	24
CONTRA COSTA HEALTH PLAN	25
EASY CHOICE HEALTH PLAN	26
GEM CARE	27
GOLDEN/GOLDEN STATE MEDICARE HEALTH PLAN	28
GREAT-WEST	29
HEALTH NET	30
HEALTH PLAN OF SAN JOAQUIN	31
HEALTH PLAN OF SAN MATEO	32
HUMANA GOLD PLUS	33
IEHP (INLAND EMPIRE HEALTH PLAN)	34
IEHP MEDICARE DUAL CHOICE	35
INTER VALLEY HEALTH PLAN	36
KAISER	37
KERN COUNTY HEALTH PLAN	38
L.A. CARE HEALTH PLAN	39

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

QA13_I64   Is (TEEN) covered for prescription drugs?
Naka-insure ba si {TEEN} para sa mga gamot na inirireseta?

IA14

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

High Deductible Health Plans (Teen)

PROGRAMMING NOTE FOR QA13_I65:
IF [(ARINSURE ≠ 1 OR QA13_I41 ≠ 1) AND (TEEMP = 1 OR TEDIRECT = 1 OR TEOTHER = 1), THEN CONTINUE WITH QA13_I65;
ELSE SKIP TO PN QA13_I70

QA13_I65   Does (TEEN)'s health plan have a deductible that is more than $1,000?
Ang health plan ba ni {TEEN} ay may deductible na mahigit sa $1,000?

> **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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

> YES 1
> NO..2   **[GO TO QA13_I67]**
> YES, ONLY WHEN GO OUT OF NETWORK 3   **[GO TO QA13_I67]**
> REFUSED .... -7
> DON'T KNOW .... -8

PROGRAMMING NOTE QA13_I66:
IF TEEMP = 1, THEN CONTINUE WITH QA13_I66;
ELSE GO TO QA13_I64

QA13_I66   Does (TEEN)'s health plan have a deductible that is more than $2,000?
Ang health plan ba ni {TEEN} ay may deductible na mahigit sa $2,000?

> **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: "Ang deductible ang halagang kailangan ninyong bayaran bago magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

> YES 1   **[GO TO PN QA13_I68]**
> NO..2
> YES, ONLY WHEN GO OUT OF NETWORK 3
> REFUSED .... -7
> DON'T KNOW .... -8

QA13_I67   Does (TEEN)'s health plan have a deductible for all covered persons that is more than $2,000?
Ang health plan ba ni {TEEN} ay may deductible na mahigit sa $2,000 para sa lahat ng
taong naka-insure?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago
magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

YES 1	
NO...2	**[GO TO PN QA13_I69]**
YES, ONLY WHEN GO OUT OF NETWORK 3	**[GO TO PN QA13_I69]**
REFUSED .... -7	
DON'T KNOW .... -8	

PROGRAMMING NOTE QA13_I68:
IF TEEMP = 1, THEN CONTINUE WITH QA13_I68;
ELSE GO TO PROGRAMMING NOTE QA13_I69

QA13_I68   Does (TEEN)'s health plan have a deductible for all covered persons that is more than $4,000?
Ang health plan ba ni {TEEN} ay may deductible na mahigit sa $4,000 para sa lahat ng
taong naka-insure?

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: "Ang deductible ang halagang kailangan ninyong bayaran bago
magsimulang magbayad ang inyong plan para sa inyong pagpapagamot."]**

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

PROGRAMMING NOTE QA13_I69:
IF (QA13_I65 = 1 OR 3) OR (QA13_I66 = 1 OR 3) OR (QA13_I67 = 1 OR 3), CONTINUE WITH QA13_I69;
ELSE SKIP TO PROGRAMMING NOTE QA13_I70

QA13_I69   Do you have a special account or fund you can use to pay for (TEEN)'s medical expenses?
Mayroon ba kayong tanging account o pondo na maaari ninyong magamit para pambayad sa mga gastos sa pagpapagamot ni {TEEN}?

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: Paminsan-minsan, tinatawag ang mga account na Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), o iba pang mga katulad na account. Kabilang sa mga iba pang pangalan ang Personal care accounts, Personal medical funds, o Choice funds, at naiiba sa mga Flexible Spending Account, na ipinagkakaloob ng mga employer."]

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

Reasons for Lack of Coverage (Teen)

PROGRAMMING NOTE QA13_I70:
IF TEINSURE = 1, GO TO QA13_I75;
ELSE CONTINUE WITH QA13_I70

QA13_I70   What is the <u>one main</u> reason (TEEN) does not have any health insurance?
Ano ang <u>isang pangunahing</u> dahilan na walang anumang health insurance si {TEEN}?

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

Coverage over Past 12 months (Teen)

QA13_I71   Was (TEEN) covered by health insurance at any time during the past 12 months?
            May health insurance ba si {TEEN} sa anumang panahon nitong nakaraang 12 buwan?

IA20

                        YES 1   **[GO TO QA13_I73]**
                        NO..2
                        REFUSED .... -7
                        DON'T KNOW .... -8

QA13_I72   How long has it been since (TEEN) last had health insurance?
            Gaano katagal na mula noong huling may health insurance si {TEEN}?

IA21

                        MORE THAN 12 MONTHS, BUT NOT
                        MORE THAN 3 YEARS AGO 1   **[GO TO QA13_I81]**
                        MORE THAN 3 YEARS AGO 2   **[GO TO QA13_I81]**
                        NEVER HAD HEALTH INSURANCE COVERAGE ..3   **[GO TO QA13_I81]**
                        REFUSED .... -7   **[GO TO QA13_I81]**
                        DON'T KNOW/NOT SURE .... -8   **[GO TO QA13_I81]**

QA13_I73   For how many of the last 12 months did {he/she} have health insurance?
            Ilang buwan nitong nakaraang 12 buwan ba {siya/siya} may health insurance?

IA22

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

            _____ MONTHS [HR: 0-12]   **[IF 0, THEN GO TO PN QA13_I81]**

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

QA13_I74   During that time when (TEEN) had health insurance, was {his/her} insurance Medi-CAL, Healthy
            Families, a plan you obtained through an employer, a plan you purchased directly from an
            insurance company, a plan you purchased through Covered California, or some other plan?
            Noong panahon na may health insurance si {TEEN}, ang insurance ba {niya/niya} ay Medi-CAL,
            Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula
            sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California, o iba pang
            plan?

IA23

            [CODE ALL THAT APPLY.][PROBE: "Any others?"]
            [CODE ALL THAT APPLY.][PROBE: "May iba pa ba?"]

                        MEDI-CAL 1   **[GO TO QA13_I81]**
                        HEALTHY FAMILIES 2   **[GO TO QA13_I81]**
                        THROUGH CURRENT OR FORMER
                        EMPLOYER/UNION 3   **[GO TO QA13_I81]**
                        HEALTHY KIDS 4   **[GO TO QA13_I81]**
                        PURCHASED DIRECTLY.......................................5   **[GO TO QA13_I81]**
                        COVERED CALIFORNIA..6   **[GO TO QA13_I81]**
                        OTHER HEALTH PLAN.. 91   **[GO TO QA13_I81]**
                        REFUSED .... -7   **[GO TO QA13_I81]**
                        DON'T KNOW .... -8   **[GO TO QA13_I81]**

QA13_I75   Thinking about {his/her} current health insurance, did (TEEN) have this same insurance for ALL of the past 12 months?
Isipin ninyo ang kasalukuyang health insurance {niya/niya}, ito rin ba mismo ang insurance ni {TEEN} para sa KABUUAN ng nakaraang 12 buwan?

IA24

YES 1   **[GO TO QA13_I81]**
NO...2
REFUSED .... -7
DON'T KNOW .... -8

QA13_I76   When {he/she} wasn't covered by {his/her} current health insurance, did {he/she} have any other health insurance?
Noong hindi {siya/siya} naka-insure sa {kanyang/kanyang} kasalukuyang health insurance, mayroon ba {siyang/siyang} anumang iba pang health insurance?

IA25

YES 1
NO...2   **[GO TO QA13_I78]**
REFUSED .... -7   **[GO TO QA13_I78]**
DON'T KNOW .... -8   **[GO TO QA13_I78]**

QA13_I77   Was this other health insurance Medi-Cal, Healthy Families, a plan you obtained from an employer, or some other plan?
Medi-Cal ba itong iba pang insurance {niya/niya}, Healthy Families, plan na nakuha ninyo mula sa employer, plan na binili ninyo nang direkta mula sa insurance company, plan na binili ninyo sa pamamagitan ng Covered California o iba pang plan?

IA26

[CODE ALL THAT APPLY.][PROBE: "Any others?"]
[CODE ALL THAT APPLY.] [PROBE: "May iba pa ba?"]

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

QA13_I78   During the past 12 months, was there any time when {he/she} had no health insurance at all?
Nitong nakaraang 12 buwan, mayroon bang panahon na {siya/siya} ay ganap na walang health insurance?

IA27

YES 1
NO...2   **[GO TO QA13_I81]**
REFUSED .... -7   **[GO TO QA13_I81]**
DON'T KNOW .... -8   **[GO TO QA13_I81]**

QA13_I79   For how many of the past 12 months did {he/she} have no health insurance?
Ilang buwan ba {siya/siya} walang health insurance nitong nakaraang 12 buwan?

IA28

[IF < 1 MONTH, ENTER "1"]

_____ MONTHS [RANGE: 1-12]

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

QA13_I80   What is the <u>one main</u> reason why (TEEN) did not have any health insurance during the time {he/she} wasn't covered?
Ano ang <u>isang pangunahing</u> dahilan na walang health insurance si {TEEN} noong panahon na hindi {siya/siya} naka-insure?

IA29

[IF R SAYS, "No need," PROBE WHY]
[IF R SAYS "Hindi kailangan." 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 QA13_I81:
IF NOT ANSWERED IN SECTION H (AH103 = -1 AND KAH103 =-1), THEN CONTINUE;

[IF CHILD SELECTED]
IF CHINSURE ≠ 1 OR QA13_I31 = 2 OR QA13_I36 = 2 OR QA13_I38 = 1 OR QA13_I34 = (5, 6) OR QA13_I37 = (5, 6) OR CHHBEX = 1 OR CHDIRECT = 1; THEN CONTINUE WITH QA13_I81;

[IF TEEN SELECTED]
IF TEINSURE ≠ 1 OR QA13_I71 = 2 OR QA13_I76 = 2 OR QA13_I78 = 1 OR QA13_I74 = (5, 6) OR QA13_I77 = (5, 6) OR TEHBEX = 1 OR TEDIRECT = 1; THEN CONTINUE WITH QA13_I81;

ELSE GO TO PROGRAMMING NOTE QA13_I98

QA13_I81   In the past 12 months, did you try to purchase a health insurance plan directly from an insurance company or HMO, or through Covered California?
Nitong nakaraang 12 buwan, sinubukan ba ninyong bumili ng health insurance plan nang direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California?
(CHIS 2014 ONLY)

AH103

YES 1
NO..2   **[GO TO PN QA13_I98]**
REFUSED .... -7   **[GO TO PN QA13_I98]**
DON'T KNOW .... -8   **[GO TO PN QA13_I98]**

QA13_I82   Was that directly from an insurance company or HMO, or through Covered California, or both from an insurance company and through Covered California?
Iyon ba ay direkta mula sa insurance company o sa HMO, o sa pamamagitan ng Covered California, o parehong mula sa insurance company at sa pamamagitan ng Covered California?
(CHIS 2014 ONLY)

AH110

Directly from an insurance company or HMO, or......1
Through Covered California, or.................................2
Both, from an insurance company and through
  Covered California 3
REFUSED .... -7   **[GO TO PN QA13_I85]**
DON'T KNOW .... -8   **[GO TO PN QA13_I85]**

> **PROGRAMMING NOTE QA13_I83:**
> **IF QA13_I82 = 1; THEN CONTINUE WITH QA13_ I83;**
> **IF QA13_I82 = 3; THEN CONTINUE WITH QA13_ I83 AND DISPLAY "First, think about your experience trying to purchase insurance directly from an insurance company or HMO."**
> **ELSE GO TO PROGRAMMING NOTE QA13_ I87;**

QA13_I83   {First, think about your experience trying to purchase insurance directly from an insurance company or HMO.}
{Una, isipin ninyo ang inyong karanasan sa pagsusumikap na bumili ng insurance nang direkta mula sa insurance company o sa HMO.}

How difficult was it to find a plan with the coverage you needed? Was it…
Gaano kahirap makahanap ng plan na may mga saklaw na serbisyo na kailangan ninyo? Ito ba ay...
(CHIS 2014 ONLY)

AH98

Very difficult,...1
Talagang mahirap, ...1
Somewhat difficult, ...2
Medyo mahirap, ...2
Not too difficult, or 3
Hindi masyadong mahirap, o 3
Not at all difficult? 4
Hindi mahirap kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_I84   How difficult was it to find a plan you could afford? Was it…
Gaano kahirap makahanap ng plan na kaya ninyo?
(CHIS 2014 ONLY)

AH99

Very difficult,...1
Talagang mahirap, ...1
Somewhat difficult, ...2
Medyo mahirap, ...2
Not too difficult, or 3
Hindi masyadong mahirap, o 3
Not at all difficult? 4
Hindi mahirap kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_I85   Did anyone help you find a health plan?
Mayroon bang sinumang tumulong sa inyo na humanap ng health plan?
(CHIS 2014 ONLY)

AH100

YES 1
NO...2   **[GO TO PN QA13_ I87]**
REFUSED .... -7   **[GO TO PN QA13_ I87]**
DON'T KNOW .... -8   **[GO TO PN QA13_ I87]**

QA13_I86   Who helped you?
                    Sino ang tumulong sa inyo?
                    (CHIS 2014 ONLY)

AH101

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

PROGRAMMING NOTE QA13_I87:
IF QA13_I82 = 2; THEN CONTINUE WITH QA13_ I87;
IF QA13_I82 = 3; THEN CONTINUE WITH QA13_ I87 AND DISPLAY "Now, think about your experience with Covered California."
ELSE GO TO PROGRAMMING NOTE QA13_ I91;

QA13_ I87   {Now, think about your experience with Covered California.}
                    How difficult was it to find a plan with the coverage you needed through Covered California? Was it…
                    Gaano kahirap ang naging karanasan ninyo sa paghahanap ng plan na may coverage na kailangan ninyo sa pamamagitan ng Covered California? Ito ba ay...
                    (CHIS 2014 ONLY)

AH111

                              Very difficult,...1
                              Talagang mahirap, ...1
                              Somewhat difficult, ...2
                              Medyo mahirap, ...2
                              Not too difficult, or 3
                              Hindi masyadong mahirap, o 3
                              Not at all difficult? 4
                              Hindi mahirap kahit kaunti? 4
                              REFUSED .... -7
                              DON'T KNOW .... -8

QA13_I88   How difficult was it to find a plan you could afford? Was it…
                    Gaano kahirap ba ang naging karanasan ninyo sa paghahanap ng plan na abot-kaya ninyo? Ito ba ay...
                    (CHIS 2014 ONLY)

AH112

                              Very difficult,...1
                              Talagang mahirap, ...1
                              Somewhat difficult, ...2
                              Medyo mahirap, ...2
                              Not too difficult, or 3
                              Hindi masyadong mahirap, o 3
                              Not at all difficult? 4
                              Hindi mahirap kahit kaunti? 4
                              REFUSED .... -7
                              DON'T KNOW .... -8

QA13_I89   Did anyone help you find a health plan?
Mayroon bang tumulong sa inyo na humanap ng health plan?
(CHIS 2014 ONLY)

AH113

                         YES 1
                         NO..2   **[GO TO QA13_ I91]**
                         REFUSED .... -7   **[GO TO QA13_ I91]**
                         DON'T KNOW .... -8   **[GO TO QA13_ I91]**

QA13_I90   Who helped you?
Sinong tumulong sa inyo?
(CHIS 2014 ONLY)

AH114

                         BROKER 1
                         FAMILY MEMBER / FRIEND...................................2
                         INTERNET 3
                         CERTIFIED INSURANCE AGENTS........................4
                         OTHER (SPECIFY:_____)......................... 91
                         REFUSED .... -7
                         DON'T KNOW .... -8

QA13_I91   Did you have all the information you felt you needed to make a good decision on a health plan?
Nasa inyo ba ang lahat ng impormasyon na sa tingin ninyo ay kailangan ninyo para
makapagdesisyon nang mabuti tungkol sa health plan?
 (CHIS 2014 ONLY)

AH115

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

PROGRAMMING NOTE QA13_I92:
IF QA13_G6 > 1 (R SPEAKS ENGLISH LESS THAN VERY WELL), THEN CONTINUE WITH QA13_I92;
ELSE GO TO QA13_I93;

QA13_I92   Were you able to get information about your health plan options in your language?
Nakuha ba ninyo ang impormasyon tungkol sa mga maaari ninyong mapili sa health plan sa
inyong wika?
(CHIS 2014 ONLY)

AH116

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

QA13_I93   Was the cost of the plan you selected very important, somewhat important, or not important in choosing your plan?
Ang presyo ba ng plan na pinili ninyo ay napaka- importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH117

VERY IMPORTANT 1
SOMEWHAT IMPORTANT......................................2
NOT IMPORTANT 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_I94   Was getting care from a specific doctor very important, somewhat important, or not important in choosing your plan?
Ang abilidad ba na makapagpagamot sa isang partikular na doctor ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH118

VERY IMPORTANT 1
SOMEWHAT IMPORTANT......................................2
NOT IMPORTANT 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_I95   Was getting care from a specific hospital very important, somewhat important, or not important in choosing your plan?
Ang abilidad ba na makapagpagamot sa isang partikular na ospital ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH119

VERY IMPORTANT 1
SOMEWHAT IMPORTANT......................................2
NOT IMPORTANT 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_I96   Was the choice of doctor's in the plan's network very important, somewhat important, or not important in choosing your plan?
Iyong pagpili ba ng mga doctor na kaanib sa network ng plan ay napaka-importante, medyo importante, o hindi importante sa pagpili ninyo ng inyong plan?
(CHIS 2014 ONLY)

AH120

VERY IMPORTANT 1
SOMEWHAT IMPORTANT......................................2
NOT IMPORTANT 3
REFUSED .... -7
DON'T KNOW .... -8

> **PROGRAMMING NOTE QA13_I97:**
> **IF QA13_I9 = 1 OR QA13_I50 = 1, THEN DISPLAY "Bronze"**
> **ELSE IF QA13_I9 = 2 OR QA13_I50 = 2, THEN DISPLAY "Silver"**
> **ELSE IF QA13_I9 = 3 OR QA13_I50 = 3, THEN DISPLAY "Gold"**
> **ELSE IF QA13_I9 = 4 OR QA13_I50 = 4, THEN DISPLAY "Platinum"**
> **ELSE DISPLAY " ";**

QA13_I97   Finally, what was the <u>most</u> important reason you chose your {Bronze/Silver/Gold/Platinum} plan? Was it the cost, that you could get care from a specific doctor, that you could go to a certain hospital, the choice of providers in your plan's network, or was it something else?
Pangwakas, ano ang naging <u>pinaka</u> importanteng dahilan na pinili ninyo ang {Bronze/Silver/Gold/Platinum} plan? Iyon ba ay ang presyo, ang abilidad ninyong makapagpagamot sa isang particular na doctor, ang abilidad ninyong makapunta sa isang particular na ospital, ang pagpili ng mga provider na kaanib sa network ng inyong plan, o iba pang dahilan?
(CHIS 2014 ONLY)

> **AH121**

    COST 1
    SPECIFIC DOCTOR...2
    SPECIFIC HOSPITAL...3
    CHOICE OF DOCTORS IN NETWORK..................4
    OTHER (SPECIFY:_____)...................... 91
    REFUSED .... -7
    DON'T KNOW .... -8

Country of Birth (Parents)

> **PROGRAMMING NOTE QA13_I98:**
> **IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";**
> **IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father";**

QA13_I98   In what country was (TEEN)'s {mother/father} born?
Saang bansa ipinanganak ang nanay ni {TEEN}?

> **AI56**

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

    UNITED STATES..1
    AMERICAN SAMOA 2
    CANADA 3
    CHINA 4
    EL SALVADOR 5
    ENGLAND...6
    FRANCE 7
    GERMANY 8
    GUAM 9
    GUATEMALA 10
    HUNGARY 11
    INDIA.. 12
    IRAN... 13
    IRELAND.. 14
    ITALY 15
    JAPAN.. 16
    KOREA... 17

                    MEXICO 18
                    PHILIPPINES 19
                    POLAND 20
                    PORTUGAL 21
                    PUERTO RICO 22
                    RUSSIA 23
                    TAIWAN 24
                    VIETNAM 25
                    VIRGIN ISLANDS 26
                    OTHER (SPECIFY:_____) 91
                    REFUSED .... -7
                    DON'T KNOW .... -8

Citizenship and Immigration (Parents)

PROGRAMMING NOTE QA13_I99:
IF QA13_I98 = 1, 2, 9, 22, OR 26 (BORN IN THE USA OR US TERRITORY), SKIP TO NEXT SECTION;
ELSE CONTINUE WITH QA13_I99;
IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father"

QA13_I99   Does (TEEN)'s {mother/father} now live in the U.S.?
                    Nakatira ba ngayon sa U.S. ang nanay ni {TEEN}?

> **AI57**

                    YES 1
                    NO...2
                    MOTHER/FATHER DECEASED 3
                    MOTHER/FATHER NEVER LIVED IN US 4
                    REFUSED .... -7
                    DON'T KNOW .... -8

PROGRAMMING NOTE QA13_I100:
IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father";
IF QA13_I99 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";
ELSE DISPLAY "Is"

QA13_I100   {Is/Was} (TEEN)'s {mother/father} a citizen of the United States?
                    Citizen ba ng United States ang nanay ni {TEEN}?
                    Citizen ba ng United States ang tatay ni {TEEN}?

> **AI58**

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

                    YES ....1 **[GO TO PN QA13_I102]**
                    NO...2
                    APPLICATION PENDING.......................................3
                    REFUSED .... -7
                    DON'T KNOW .... -8

PROGRAMMING NOTE QA13_I101:
IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father";
IF QA13_I99 = 3 (MOTHER/FATHER DECEASED), DISPLAY "Was";
ELSE DISPLAY "Is"

QA13_I101   {Is/Was} (TEEN)'s {mother/father} a permanent resident with a green card?
Permanent resident na may green card ba ang nanay ni {TEEN}?
Permanent resident na may green card ba ang tatay ni {TEEN}?

AI59

[IF NEEDED, SAY: "People usually call this a "Green Card" but the color can also be pink, blue, or white."]
[IF NEEDED, SAY: Karaniwang tinatawag ito na "Green Card" ngunit maaari ding rosas, asul o puti ang kulay nito."]

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

PROGRAMMING NOTE QA13_I102:
IF QA13_A5 = 1 (R IS MALE), DISPLAY "mother";
IF QA13_A5 = 2 (R IS FEMALE), DISPLAY "father"

QA13_I102   About how many years has (TEEN)'s {mother/father} lived in the United States?
Humigit-kumulang, ilang taon nang nakatira sa United States ang nanay ni {TEEN}?

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

Visits to medical doctor

PROGRAMMING NOTE QA13_J1:
IF CHILD OR TEEN SELECTED OR SPOUSE IN HH, DISPLAY "Now, I'd like to ask about the health care YOU receive";
ELSE BEGIN QUESTION WITH "During the past 12 months, how many times have you seen a medical doctor"

QA13_J1   {Now, I'd like to ask about the health care you receive.} During the past 12 months, how many times have you seen a medical doctor}?
{Ngayon, gusto kong magtanong tungkol sa pangangalagang pangkalusugan na tinatanggap ninyo.} Nitong nakaraang 12 buwan, ilang beses na kayong nagpatingin sa medical doctor?

AH5

_____ TIMES   [HR: 0-365]

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

PROGRAMMING NOTE QA13_J2:
IF QA13_J1 = 0, -7, OR -8 (HAS NOT SEEN A DOCTOR IN LAST 12 MONTHS OR REF/DK), CONTINUE WITH QA13_J2;
ELSE GO TO PROGRAMMING NOTE QA13_J3

QA13_J2   About how long has it been since you last saw a doctor about your own health?
Gaano katagal na mula noong huling nagpatingin kayo sa medical doctor tungkol sa inyong kalusugan?

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 QA13_J3:
IF QA13_J2 = 4 (HAS NEVER SEEN A DOCTOR), SKIPTO PROGRAMMING NOTE QA13_J4;
ELSE CONTINUE WITH QA13_J3

QA13_J3   About how long has it been since you last saw a doctor or medical provider for a <u>routine check-up</u>?
Gaano katagal na mula noong huling pagpapatingin ninyo sa doktor o iba pang medical provider para sa <u>regular check-up</u>?

[IF NEEDED: A routine check-up is a visit not for an illness or problem. This visit may include questions about health behaviors such as smoking.]
[IF NEEDED, SAY: "Ang regular check-up ay hindi para sa sakit o karamdaman. Maaaring kabilang sa pagpapatingin na ito ang mga tanong tungkol sa mga gawing pangkalusugan gaya ng paninigarilyo.]

AJ114

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

Personal Doctor

PROGRAMMING NOTE QA13_J4:
IF QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J4;
ELSE GO TO PROGRAMMING NOTE QA13_J5

QA13_J4   Do you have a personal doctor or medical provider who is your main provider?
Mayroon ba kayong personal doctor o medical provider na siyang main provider ninyo?

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: Maaaring general doctor ito, espesyalistang doktor, physician assistant, nurse, o iba pang health."]

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

Patient-Centered Care

```
PROGRAMMING NOTE QA13_J5:
IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR) OR [QA13_J1 > 0 (HAD A DOCTOR VISIT IN THE PAST 12
MONTHS) OR QA13_J2 = 0 (SAW DOCTOR LESS THAN A YEAR AGO)], THEN CONTINUE WITH QA13_J5;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J7
```

QA13_J5   During the past 12 months, did you phone or e-mail the doctor's office with a medical question?
            Nitong nakaraang 12 buwan, tumawag ba kayo o nag-email sa opisina ng dokor na may tanong
            tungkol sa paggamot?

AJ78

            YES 1
            NO...2   **[GO TO QA13_J7]**
            REFUSED .... -7   **[GO TO QA13_J7]**
            DON'T KNOW .... -8   **[GO TO QA13_J7]**

QA13_J6   How often did you get an answer as soon as you needed it? Would you say…
            Gaano kadalas na nasagot kayo sa mismong oras na kinailangan ninyo? Masasabi ba ninyo
            na...

AJ79

            Never,..1
            Sometimes, ...2
            Usually, or 3
            Always? 4
            REFUSED .... -7
            DON'T KNOW .... -8

```
PROGRAMMING NOTE QA13_J7:
IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR), THEN CONTINUE WITH QA13_J7;
ELSE GO TO PROGRAMMING NOTE QA13_J9
```

QA13_J7   How often does your doctor or medical provider listen carefully to you? Would you say…
            Gaano kadalas nakikinig ng mabuti sa sinasabi ninyo ang inyong doktor o medical provider?
            Masasabi ba ninyo na...

AJ112

            Never,..1
            Hindi kailanman,..1
            Sometimes, ...2
            Paminsan-minsan 2
            Usually, or 3
            Karaniwan, o 3
            Always? 4
            Palagi? 4
            REFUSED .... -7
            DON'T KNOW .... -8

QA13_J8   How often does your doctor or medical provider explain clearly what you need to do to take care of your health? Would you say…
Gaano kadalas ipinaliliwanag ng inyong doktor o medical provider kung ano ang kailangan ninyong gawin upang pangalagaan ang inyong kalusugan? Masasabi ba ninyo na...

AJ113

Never,...1	
Hindi kailanman,...1	
Sometimes, ...2	
Paminsan-minsan 2	
Usually, or 3	
Karaniwan, o 3	
Always?...4	
Palagi? 4	
REFUSED .... -7	
DON'T KNOW .... -8	

Timely Appointments

> **PROGRAMMING NOTE QA13_J9:**
> **IF ARINSURE = 1 OR AH1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J9;**
> **ELSE GO TO PROGRAMMING NOTE QA13_J11;**
> **IF QA13_J4 = 1 (HAS A PERSONAL DOCTOR), THEN DISPLAY "your";**
> **ELSE DISPLAY "a";**

QA13_J9   In the past 12 months, did you try to get an appointment to see {your/a} doctor or medical provider within two days because you were sick or injured?
Nitong nakaraang 12 buwan, sinubukan ba ninyong makipag-appointment upang magpatingin sa inyong doctor o medical provider sa loob ng dalawang araw dahil may sakit o nasaktan kayo?
Nitong nakaraang 12 buwan, sinubukan ba ninyong makipag-appointment upang magpatingin sa inyong doctor o medical provider sa loob ng dalawang araw dahil kayo ay may sakit o nasaktan?

AJ102

[IF NEEDED, SAY: "Do not include urgent care or emergency care visits. I am only asking about appointments."]
[IF NEEDED, SAY: "Huwag bilangin ang pagpapatingin sa urgent care, o pagpapagamot sa emergency. Tungkol sa mga appointment lamang ang tanong ko."]

YES 1		
NO..2	**[GO TO QA13_J11]**
REFUSED .... -7	**[GO TO QA13_J11]**
DON'T KNOW .... -8	**[GO TO QA13_J11]**

QA13_J10   How often were you able to get an appointment within two days? Would you say…
Gaano kadalas kayo nakakuha ng appointment sa loob ng dalawang araw? Masasabi ba ninyo na...

AJ103

Never,...1
Hindi kailanman,...1
Sometimes, ...2
Paminsan-minsan 2
Usually, or 3
Karaniwan, o 3
Always? 4
Palagi? 4
REFUSED .... -7
DON'T KNOW .... -8

Care Coordination

PROGRAMMING NOTE FOR QA13_J11:
IF QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE) AND QA13_J4 = 1 (HAS A PERSONAL
DOCTOR/MEDICAL PROVIDER) AND [(QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)) OR QA13_B18 = 1
(HAS DIABETES) OR QA13_B37 = 1 (HAS HEART DISEASE)] CONTINUE WITH QA13_J11;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J12

QA13_J11   Is there anyone at your doctor's office or clinic who helps coordinate your care with other doctors
or services such as tests or treatments?
Mayroon bang sinuman sa opisina o clinic ng inyong doktor na tumutulong na pagtugmain ang
pangangalaga sa inyo sa iba pang mga doktor o mga serbisyo, gaya ng mga test o mga
paggagamot?

AJ80

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

Communication Problems with a Doctor

PROGRAMMING NOTE QA13_J12:
IF QA13_J1 > 0 OR QA13_J2 = 0 OR 1 (SEEN A DOCTOR IN LAST 12 MONTHS OR 1-2 YEARS AGO),
CONTINUE WITH QA13_J12;
ELSE GO TO PROGRAMMING NOTE QA13_J17

QA13_J12   The last time you saw a doctor, did you have a hard time understanding the doctor?
Noong huli kayong nagpatingin sa doktor, nahirapan ba kayong intindihin ang doktor?

AJ8

YES 1   **[GO TO PN QA13_J14]**
NO...2
REFUSED .... -7   **[GO TO QA13_J17]**
DON'T KNOW .... -8   **[GO TO QA13_J17]**

PROGRAMMING NOTE QA13_J13:
IF QA13_J12 = 2 (DID NOT HAVE A HARD TIME UNDERSTANDING DOCTOR) AND [INTERVIEW NOT
CONDUCTED IN ENGLISH OR QA13_G4 > 1 (SPEAKS LANGUAGE OTHER THAN ENGLISH AT HOME)],
CONTINUE WITH QA13_J13;
ELSE SKIP TO PROGRAMMING NOTE QA13_J17

QA13_J13   In what language did the doctor speak to you?
                 Sa anong wika kayo kinausap ng doktor?

AJ50

ENGLISH 1	**[GO TO QA13_J15]**	
SPANISH 2	**[GO TO PN QA13_J17]**	
CANTONESE...3	**[GO TO PN QA13_J17]**	
VIETNAMESE 4	**[GO TO PN QA13_J17]**	
TAGALOG..5	**[GO TO PN QA13_J17]**	
MANDARIN 6	**[GO TO PN QA13_J17]**	
KOREAN 7	**[GO TO PN QA13_J17]**	
ASIAN INDIAN LANGUAGES..................................8	**[GO TO PN QA13_J17]**	
RUSSIAN 9	**[GO TO PN QA13_J17]**	
OTHER (SPECIFY:_____)..................... 91	**[GO TO PN QA13_J17]**	
REFUSED ....-7	**[GO TO PN QA13_J17]**	
DON'T KNOW ....-8	**[GO TO PN QA13_J17]**	

QA13_J14   Was this because you and the doctor spoke different languages?
                 Ito ba ay dahil kayo at ang doctor ninyo ay nagsasalita ng magkaibang wika?

AJ9

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

QA13_J15   Did you need someone to help you understand the doctor?
                 Nangailangan ba kayo ng ibang tao upang maintindihan ninyo ang doktor?

AJ10

YES 1	
NO..2	**[GO TO PN QA13_J17]**
REFUSED .... -7	**[GO TO PN QA13_J17]**
DON'T KNOW .... -8	**[GO TO PN QA13_J17]**

QA13_J16   Who was this person who helped you understand the doctor?
                 Sino ang tumulong sa inyo na maintindihan ang doktor?

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 QA13_J17:
IF QA13_G7 = 3 OR 4 (SPEAKS ENGLISH NOT WELL OR NOT AT ALL), THEN CONTINUE WITH QA13_J17;
ELSE GO TO PROGRAMMING NOTE QA13_J18

QA13_J17   In California, you have the right to get help from an interpreter for free during your medical visits. Did you know this before today?
                 Sa California, may karapatan kayong humingi ng tulong mula sa interpreter nang walang bayad para sa pagpapatingin ninyo. Alam ba ninyo ito bago ngayong araw?

AJ105

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

Change of Usual Source of Care

PROGRAMMING NOTE QA13_J18:
IF [ARINSURE = 1 OR QA13_H80 = 1 (HAD INSURANCE AT LEAST 1 MONTH DURING THE PAST 12 MONTHS)] AND QA13_H1 = 1, 3, 4, OR 5 (HAS A USUAL SOURCE OF CARE), THEN CONTINUE WITH QA13_J18;
ELSE GO TO QA13_J20

QA13_J18   In the past 12 months, did you change where you usually go for health care?
                 Nitong huling 12 buwan, nagpalit ba kayo ng karaniwan ninyong pinupuntahan para sa pagpapagamot?

AJ106

                 YES 1
                 NO...2   **[GO TO QA13_J20]**
                 REFUSED .... -7   **[GO TO QA13_J20]**
                 DON'T KNOW .... -8   **[GO TO QA13_J20]**

QA13_J19   Did you have to change because of your health insurance plan?
Kinailangan ba ninyong magpalit dahil sa inyong health insurance plan?

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: "Nagpalit ba kayo ng lugar na karaniwan pinupuntahan para sa pagpapagamot dahil sa inyong health insurance plan?"]

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

Delays in Care

QA13_J20   During the past 12 months, did you delay or not get a medicine that a doctor prescribed for you?
Nitong nakaraang 12 buwan, ipinagpaliban ba ninyong bumili o kaya'y hindi kayo bumili ng gamot na inireseta sa inyo ng doktor?

AH16

```
YES .............................................................1
NO................................................................2    [GO TO QA13_J25]
REFUSED ................................................... -7    [GO TO QA13_J25]
DON'T KNOW ............................................. -8    [GO TO QA13_J25]
```

QA13_J21   Was cost or lack of insurance a reason why you delayed or did not get the prescription?
Ang gastos ba o ang kawalan ng insurance ang dahilan na ipinagpaliban ninyo ang pagbili o ang hindi ninyo pagbili ng reseta?

AJ19

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

PROGRAMMING NOTE FOR QA13_J22:
IF [QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)) AND QA13_J21= 1 (COST/LACK OF INSURANCE REASON FOR DELAY)] CONTINUE WITH QA13_J22;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J23

QA13_J22   Was this prescription for your asthma?
Reseta ba ito para sa inyong asthma?

AJ81

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

PROGRAMMING NOTE FOR QA13_J23:
IF QA13_B18 = 1 (HAS DIABETES) AND QA13_J21= 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J23;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J24

QA13_J23   Was this prescription for your diabetes?
                 Reseta ba ito para sa inyong diabetes?

| AJ82 |

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

PROGRAMMING NOTE FOR QA13_J24:
IF QA13_B37 = 1 (HAS HEART DISEASE) AND QA13_J21 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J24;
ELSE GO TO QA13_J25

QA13_J24   Was this prescription for your heart disease?
                 Reseta ba ito para sa inyong sakit sa puso?

| AJ83 |

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

QA13_J25   During the past 12 months, did you delay or not get any other medical care you felt you needed—such as seeing a doctor, a specialist, or other health professional?
                 Nitong nakaraang 12 buwan, ipinagpaliban ba ninyo o hindi kayo nagpatingin para sa anumang iba pang paggagamot na sa akala ninyo ay kinakailangan ninyo - gaya ng pagpapatingin sa doktor, espesyalista o iba pang health professional?

| AH22 |

                         YES 1
                         NO...2   **[GO TO QA13_J33]**
                         REFUSED .... -7   **[GO TO QA13_J33]**
                         DON'T KNOW .... -8   **[GO TO QA13_J33]**

QA13_J26   Did you get the care eventually?
                 Nagamot din ba kayo sa bandang huli?

| AJ129 |

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

192

QA13_J27   Was cost or lack of insurance a reason why you delayed or did not get the care you felt you needed?
Ang gastos ba o ang kawalan ng insurance ang dahilan na ipinagpaliban ninyo ang pagpapagamot o na hindi kayo nakapagpatingin para sa pagpapagamot na nadama ninyong kinakailangan ninyo?

AJ20

> YES 1
> NO 2   **[GO TO QA13_J29]**
> REFUSED .... -7   **[GO TO QA13_J29]**
> DON'T KNOW .... -8   **[GO TO QA13_J29]**

QA13_J28   Was that the <u>main</u> reason?
Iyon ba ang pangunahing dahilan?

AJ130

> YES 1   **[GO TO PN QA13_J30]**
> NO 2
> REFUSED .... -7   **[GO TO PN QA13_J30]**
> DON'T KNOW .... -8   **[GO TO PN QA13_J30]**

QA13_J29   What was the <u>one</u> main reason why you delayed getting the care you felt you needed?
Ano ang pangunahing dahilan sa inyong pagpapaliban ng pagpapagamot na sa tingin ninyong kinakailangan ninyo?

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

PROGRAMMING NOTE QA13_J30:
IF [QA13_B3 = 1 OR QA13_B4 = 1 (HAS ASTHMA)] AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J30;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J31

QA13_J30   Was this medical care for your asthma?
                Para sa asthma ba ninyo ang paggamot na ito?

AJ84

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

PROGRAMMING NOTE QA13_J31:
IF QA13_B18 = 1 (HAS DIABETES) AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J31;
ELSE GO TO PROGRAMMING NOTE FOR QA13_J32

QA13_J31   Was this medical care for your diabetes?
                Para sa diabetes ba ninyo ang paggamot na ito?

AJ85

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

PROGRAMMING NOTE QA13_J32:
IF QA13_B37 = 1 (HAS HEART DISEASE) AND QA13_J27 = 1 (COST/LACK OF INSURANCE REASON FOR DELAY) CONTINUE WITH QA13_J32;
ELSE GO TO QA13_J33

QA13_J32   Was this medical care for your heart disease?
                Para sa inyong sakit sa puso ba ang paggamot na ito?

AJ86

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

QA13_J33   The next questions ask about specialists. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.
Ang susunod na mga tanong ay tungkol sa mga espesyalista. Ang mga espesyalista ay mga doktor gaya ng mga surgeon, mga doktor sa puso, mga doktor sa allergy, mga doktor sa balat, at iba pang mga nagdadalubhasa sa isang larangan ng paggagamot.

In the past12 months, did you or a doctor think you needed to see a medical specialist?
Nitong nakaraang 12 buwan, naisip ba ninyo o ng doctor na kailangan ninyong magpatingin sa espesyalistang doktor.

[IF NEEDED, SAY: "Do not include dental visits."]
[IF NEEDED, SAY: "Huwag bilangin ang pagpapatingin para sa ngipin."]

AJ136

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

PROGRAMMING NOTE QA13_J34:
IF QA13_J33 = 1 (NEEDED A MEDICAL SPECIALIST) CONTINUE WITH QA13_J34;
ELSE GO TO QA13_J37

QA13_J34   During the past 12 months, did you have any trouble finding a medical specialist who would see you?
Nitong nakaraang 12 buwan, nahirapan ba kayong makahanap ng espesyalistang doktor na titingin sa inyo?

AJ137

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

QA13_J35   During the past 12 months, did a medical specialist's office tell you that they would not take you as a new patient?
Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng espesyalistang doktor na hindi nila kayo tatanggapin bilang bagong pasyente?

AJ138

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

> **PROGRAMMING NOTE QA13_J36:**
> **IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA13_J36;**
> **ELSE SKIP TO QA13_J37**

QA13_J36   During the past 12 months, did a medical specialist's office tell you that they did not take your main health insurance?
Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng espesyalistang doktor na hindi nila tinanggap ang inyong pangunahing health insurance?

AJ139

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

QA13_J37   Now think about general doctors. During the past 12 months, did you have any trouble finding a general doctor who would see you?
Ngayon, isipin ninyo ang mga general doctor. Nitong naraang 12 buwan, nahirapan ba kayong makahanap ng general doctor na titingin sa inyo?

AJ133

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

QA13_J38   During the past 12 months, did a doctor's office tell you that they would not take you as a new patient?
Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng doktor na hindi nila kayo tatanggapin bilang bagong pasyente?

AJ134

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

> **PROGRAMMING NOTE QA13_J39:**
> **IF ARINSURE = 1 (CURRENTLY INSURED) CONTINUE WITH QA13_J39;**
> **ELSE SKIP TO QA13_J40**

QA13_J39   During the past 12 months, did a doctor's office tell you that they would not take your main health insurance?
Nitong nakaraang 12 buwan, nasabihan ba kayo ng opisina o clinic ng doktor na hindi nila tatanggapin ang inyong pangunahing health insurance?

AJ135

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

End of Life Care

> **PROGRAMMING NOTE QA13_J40:**
> **IF AGE >49 AND SONOMA COUNTY RESIDENT CONTINUE WITH QA13_J40;**
> **ELSE SKIP TO QA13_J41**

QA13_J40   Do you currently have something in writing that states your wishes regarding end-of-life medical care?
Sa kasalukuyan, mayroon ba kayong anumang kasulatan na nagpapahayag ng inyong mga kagustuhan tungkol sa medikal na pangangalaga sa panahon na malapit nang mamayapa o end-of-life.

AJ151

[INTERVIEWER NOTE: IF R MENTIONS "advance health care directive" or " power of attorney for <u>health care</u>" THEN CODE "Yes"]

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

Internet Use

QA13_J41   Have you ever used the Internet?
Gumamit na ba kayo kailanman ng Internet?

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 QA13_J44]**
REFUSED .... -7   **[GO TO QA13_J44]**
DON'T KNOW .... -8   **[GO TO QA13_J44]**

QA13_J42   How confident are you that you can fill out an application on-line on your own? Would you say you are…
Gaano ang tiwala ninyo na kaya ninyong sagutin on-line ang application na walang tulong? Masasabi ba ninyo na kayo ay...

AJ110

Very confident, ...1   **[GO TO PN QA13_J45]**
Lubos na may tiwala, ...1   **[GO TO PN QA13_J45]**
Somewhat confident, ...2   **[GO TO PN QA13_J45]**
Medyo may tiwala, ...2   **[GO TO PN QA13_J45]**
Not too confident, or, ...3
Walang masyadong tiwala, o 3
Not at all confident?, ...4
Walang tiwala kahit kaunti? 4
REFUSED .... -7
DON'T KNOW .... -8

QA13_J43　　　If you wanted to fill out an application on-line, is there someone who could help you with it?
Kung gusto ninyong sagutin on-line ang application, mayroon bang makakatulong sa inyo na gawin ito?

AJ111

<div align="center">

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

</div>

Family Planning

> **PROGRAMMING NOTE QA13_J44:**
> **IF QA13_A5 = 1 (MALE) OR AGE >44 YEARS OLD THEN GO TO PN QA13_J48;**
> **ELSE CONTINUE WITH QA13_J44;**

QA13_J44　　　During the past 12 months, have you received counseling or information about birth control from a doctor or medical provider?
Nitong nakaraang 12 buwan, nakatanggap ba kayo ng counseling o impormasyon tungkol sa pagpigil sa pagbubuntis mula sa doktor o medical provider?

AJ140

<div align="center">

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

</div>

QA13_J45　　　During the past 12 months, have you received a birth control method or a prescription for birth control from a doctor or medical provider?
Nitong nakaraang 12 buwan, nakatanggap ba kayo ng paraan sa pagpigil sa o reseta para sa pagpigil sa pagbubuntis mula sa doktor o medical provider?

AJ141

[INTERVIEWER NOTE: CODE 'YES' IF R MENTIONS VASECTOMY OF PARTNER]

YES 1
NO...2　　**[GO TO QA13_ J51]**
REFUSED .... -7　**[GO TO QA13_ J51]**
DON'T KNOW .... -8　**[GO TO QA13_ J51]**

QA13_J46　　　What <u>MAIN</u> birth control method or prescription did you receive?
Anong PANGUNAHING paraan o reseta na pampigil sa pagbubuntis ang inyong natanggap?

AJ142

[IF MORE THAN ONE METHOD: "Which method did you receive most recently?"]
[IF MORE THAN ONE METHOD, ASK: "Aling paraan ang pinakahuli ninyong natanggap?"]

If two methods were received at the same time, mark the one that appears first on the list below.

TUBAL LIGATION (TUBES TIED OR CUT) 1
VASECTOMY (MALE STERILIZATION) 2
IUD (MIRENA, PARAGARD) 3
IMPLANT (IMPLANON, NEXPLANON) 4

BIRTH CONTROL PILLS...5
OTHER HORMONAL METHODS
(INJECTION/DEPO-PROVERA, PATCH,
VAGINAL RING/NUVA RING) 6
CONDOMS (MALE) 7
OTHER (SPECIFY:_____) 8
REFUSED .... -7
DON'T KNOW .... -8

QA13_J47   Where did you receive the main birth control method or prescription?
Saan ninyo natanggap ang pangunahing paraan o reseta na pampigil sa pagbubuntis?

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 QA13_J48:
IF AGE >44 YEARS OLD OR AA3=2 (FEMALE) THEN GO TO QA13_J51;
ELSE CONTINUE WITH QA13_J48;

QA13_J48   During the past 12 months, have you received counseling or information about male or female
birth control from a doctor or medical provider?
Nitong nakaraang 12 buwan, nakatanggap ba kayo ng counseling o impormasyon tungkol sa
pagpigil sa pagbubuntis para sa lalaki o para sa babae mula sa doktor o medical provider?

AJ144

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

QA13_J49   During the past 12 months, have you received a male birth control method such as a condoms
or vasectomy from a doctor or medical provider?
Nitong nakaraang 12 buwan, nakatanggap ba kayo ng isang paraang pampigil sa pagbubuntis
para sa lalaki gaya ng mga condom o vasectomy mula sa doctor o medical provider?

AJ145

YES 1
NO...2   **[GO TO QA13_ J51]**
REFUSED .... -7   **[GO TO QA13_ J51]**
DON'T KNOW .... -8   **[GO TO QA13_ J51]**

QA13_J50   Where did you receive it?
                 Saan ninyo natanggap ito?

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

Dental Health

QA13_J51   These next questions are about dental health.

                 About how long has it been since you visited a dentist or dental clinic? Include hygienists and all
                 types of dental specialists.
                 Tungkol sa kalusugan ng ngipin ang sumusunod na mga tanong.
                 Humigit-kumulang, gaano katagal na mula noong huli kayong nagpatingin sa dentista o sa
                 pagamutan ng ngipin? Bilangin ang mga hygienist at lahat ng uri ng mga espesyalista sa ngipin.

AG1

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

QA13_J52   Do you now have any type of insurance that pays for part or all of your dental care?
                 Mayroon ba kayo ngayon na anumang uri ng insurance na nagbabayad sa bahagi o sa lahat
                 ng inyong pangangalagang dental?

AG3

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

> **PROGRAMMING NOTE QA13_J53:**
> **IF NO TEEN SELECTED, GO TO Section K;**
> **ELSE CONTINUE WITH QA13_J53**

QA13_J53   Do you now have any type of insurance that pays for part or all of (TEEN) dental care?
Mayroon ba kayo ngayon na anumang uri ng insurance na nagbabayad ng bahagi o ng lahat ng pangangalaga sa ngipin ni {TEEN}?

MA10

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

Section K – Employment, Income, Poverty Status, Food Security

Hours Worked

> **PROGRAMMING NOTE QA13_K1:**
> **IF QA13_G26 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH A JOB OR BUISNESS BUT NOT AT WORK) OR QA13_G28 = 1 (R USUALLY WORKS) CONTINUE WITH QA13_K1;**
> **ELSE GO TO PROGRAMMING NOTE QA13_K5**

QA13_K1   The next questions are about your employment.
Tungkol sa inyong empleo ang sumusunod na mga katanungan.

How many hours per week do you <u>usually</u> work at <u>all</u> jobs or businesses?
Ilang oras sa bawat linggo kayo nagtatrabaho sa <u>karaniwan</u> sa <u>lahat</u> bilang isang empleo o sa mga negosyo?

AK3

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

_____ HOURS   [HR: 0-95]

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

QA13_K2   How long have you worked at your <u>main</u> job?
Gaano katagal na kayo nagtatrabaho sa inyong <u>pangunahing</u> trabaho?

AK7

[IF NEEDED, SAY: "That is, for your <u>current</u> employer."]
[IF NEEDED, SAY:"Sa ibang salita, para sa inyong <u>kasalukuyang</u> employer."]

_____ MONTHS   [HR: 0-12]
_____ YEARS   [HR: 0-50]

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

Income Last Month

PROGRAMMING NOTE QA13_K4:
IF QA13_G26 = 1 (WORKING AT JOB OR BUSINESS) OR 2 (WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA13_G28 = 1 (USUALLY WORKS), CONTINUE WITH QA13_K4;
ELSE SKIP TO PROGRAMMING NOTE QA13_K5

QA13_K4   What is your best estimate of all your earnings <u>last month</u> before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips and commissions?
Ano ang pinakamahusay ninyong tantya sa lahat ng inyong kinita nitong <u>nakaraang buwan</u> mula sa lahat ng mga trabaho at negosyo, kabilang ang mga sahod na por-hora, mga suweldo, mga tip at mga commission bago binawasan ng buwis at ng iba pang binabawas?

AK10

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT   [HR: 0-999995]

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

PROGRAMMING NOTE QA13_K5;
IF QA13_G31 = [1 (SPOUSE/PARTNER WORKING AT JOB OR BUSINESS) OR 2 (SPOUSE/PARTNER WITH JOB OR BUSINESS BUT NOT AT WORK)] OR QA13_G32 = 1 (SPOUSE/PARTNER USUALLY WORKS), CONTINUE WITH QA13_K5 AND:
IF QA13_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA13_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND QA13_A16 = 1 (MARRIED), DISPLAY "The next question is about your spouse's employment."

ELSE IF QA13_G26 ≠ 1 OR 2 (R NOT AT A JOB OR BUSINESS LAST WEEK, DID NOT WORK, AND DOES NOT HAVE A JOB) AND QA13_G28 ≠ 1 (R DOES NOT USUALLY WORK), AND (QA13_D16 = 1 OR QA13_D17 = 1), THEN DISPLAY "The next question is about your partner's employment."
IF QA13_A16 = 1 THEN DISPLAY "spouse";
ELSE IF QA13_D16 = 1 OR QA13_D17 = 1THEN DISPLAY "partner";
ELSE SKIP TO QA13_K7

QA13_K5   {The next question is about your spouse's employment.}
{Tungkol sa empleo ng inyong {asawa} ang susunod na tanong.}

How many hours per week does your {husband/wife/spouse} usually work at all jobs or businesses?
Ilang oras sa bawat linggo nagtatrabaho ang inyong {asawa} sa karaniwan sa lahat bilang empleo o sa mga negosyo?

AK20

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

_____ HOURS   [HR: 0-95]

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

PROGRAMMING NOTE QA13_K6:
IF QA13_K5 ≠ 0 CONTINUE WITH QA13_K6;
    IF QA13_QA13_A16 = 1 (MARRIED), THEN DISPLAY "spouse's";
    ELSE IF QA13_D16 = 1 OR QA13_D17 = 1, THEN DISPLAY "partner's";
ELSE GO TO QA13_K7

QA13_K6   What is your best estimate of all your {spouse's/partner's} earnings last month before taxes and other deductions from all jobs and businesses, including hourly wages, salaries, tips, and commissions?
Ano ang pinakamahusay ninyong tantya sa lahat ng kinita ng inyong {asawa} nitong nakaraang buwan mula sa lahat ng mga trabaho at negosyo, kabilang ang mga sahod na por-hora, mga suweldo, mga tip at mga commission bago binawasan ng buwis at ng iba pang binabawas?

AK10A

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT   [HR: 0-999995]

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

Annual Household Income

QA13_K7   What is your best estimate of your household's total annual income from all sources before taxes in 2012/2013?
Ano ang pinakamahusay ninyong tantya sa kita ng buong bahay sa isang taon mula sa lahat ng pinanggagalingan bago bawasan ng buwis noong 2012/2013?

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: "Bilangin ang pera mula sa mga trabaho, social security, retirement income, bayad para sa unemployment, tulong mula sa gobyerno, at iba pa. Bilangin din ninyo ang kita mula sa interest, mga dividend, netong kita mula sa negosyo, sa sakahan o upa at anumang iba pang kinikitang pera."]

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT   [HR: 0-999995]

REFUSED .... -7   **[GO TO PN QA13_K9]**
DON'T KNOW .... -8   **[GO TO PN QA13_K9]**

QA13_K8   PLEASE VERIFY AMOUNT ENTERED:

I have entered that your annual household income is (AMOUNT). Is that correct?
Itinala ko ang kita ng inyong bahay na {AMOUNT}. Tama ba ito?

AK22A

YES 1   **[GO TO PN QA13_K15]**
NO 2   **[GO BACK TO QA13_K7]**

> **PROGAMMING NOTE QA13_K9:**
> **IF QA13_K7 = -7 OR -8 CONTINUE WITH QA13_K9;**
> **ELSE GO TO PROGRAMMING NOTE QA13_K15**

QA13_K9   We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes is more than $20,000 per year or is it less?
Hindi namin kailangang malaman nang eksakto, ngunit masasabi ba ninyo sa akin kung higit sa $20,000 sa bawat taon o mas mababa ang kita sa isang taon ng inyong buong bahay mula sa lahat ng pinanggagalingan bago bawasan ng buwis?

AK11

MORE	1	**[GO TO QA13_K11]**
EQUAL TO $20K OR LESS	2	
REFUSED	-7	**[GO TO PN QA13_K15]**
DON'T KNOW	-8	**[GO TO PN QA13_K15]**

QA13_K10   Is it …
Ito ba ay...

AK12

$5,000 or less,	1	**[GO TO PN QA13_K15]**
$5,000 o mas mababa, o	1	**[GO TO PN QA13_K15]**
$5,001 to $10,000,	2	**[GO TO PN QA13_K15]**
$5,001 hanggang $10,000, o	2	**[GO TO PN QA13_K15]**
$10,001 to $15,000, or	3	**[GO TO PN QA13_K15]**
$10,001 hanggang $15,000, o	3	**[GO TO PN QA13_K15]**
$15,001 to 20,000?	4	**[GO TO PN QA13_K15]**
$15,001 hanggang $20,000?	4	**[GO TO PN QA13_K15]**
REFUSED	-7	**[GO TO PN QA13_K15]**
DON'T KNOW	-8	**[GO TO PN QA13_K15]**

QA13_K11   Is it more or less than $70,000 per year?
Higit ba o mas mababa sa $70,000 sa bawat taon?

AK13

MORE	1	**[GO TO QA13_K13]**
EQUAL TO $70K OR LESS	2	
REFUSED	-7	**[GO TO PN QA13_K15]**
DON'T KNOW	-8	**[GO TO PN QA13_K15]**

QA13_K12   Is it …
                      Ito ba ay...

AK14

$20,001 to $30,000, ...1   **[GO TO PN QA13_K15]**
$20,001 hanggang $30,000, ...1   **[GO TO PN QA13_K15]**
$30,001 to $40,000, ...2   **[GO TO PN QA13_K15]**
$30,001 hanggang $40,000, ...2   **[GO TO PN QA13_K15]**
$40,001 to $50,000, ...3   **[GO TO PN QA13_K15]**
$40,001 hanggang $50,000, ...3   **[GO TO PN QA13_K15]**
$50,001 to $60,000, or 4   **[GO TO PN QA13_K15]**
$50,001 hanggang $60,000, o 4   **[GO TO PN QA13_K15]**
$60,001 to $70,000? 5   **[GO TO PN QA13_K15]**
$60,001 hanggang $70,000? 5   **[GO TO PN QA13_K15]**
REFUSED ....-7   **[GO TO PN QA13_K15]**
DON'T KNOW ....-8   **[GO TO PN QA13_K15]**

QA13_K13   Is it more or less than $135,000 per year?
                 Higit ba o mas mababa sa $135,000 sa bawat taon?

AK15

MORE 1   **[GO TO PN QA13_K15]**
EQUAL TO $135K OR LESS...................................2
REFUSED ....-7   **[GO TO PN QA13_K15]**
DON'T KNOW ....-8   **[GO TO PN QA31_K15]**

QA13_K14   Is it …
                 Ito ba ay...

AK16

$70,001 to $80,000, ...1
$70,001 hanggang $80,000, ...1
$80,001 to $90,000, ...2
$80,001 hanggang $90,000, ...2
$90,001 to $100,000, or 3
$90,001 hanggang $100,000, o 3
$100,001 to $135,000? 4
$100,001 hanggang $135,000? 4
REFUSED ....-7
DON'T KNOW ....-8

Number of Persons Supported

> **PROGRAMMING NOTE QA13_K15:**
> **IF R IS ONLY MEMBER OF HH, GO TO PROGRAMMING NOTE QA13_K16;**
> **ELSE CONTINUE WITH QA13_K15**

QA13_K15   Including yourself, how many people living in your household are supported by your total household income?
Kabilang ang inyong sarili, ilang tao na nakatira sa inyong bahay ang tinutustusan ng buong kita ng inyong bahay?

| AK17 |

_____ NUMBER OF PEOPLE [HR: 1-20]

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

> **PROGRAMMING NOTE QA13_K16:**
> **QA13_K16 MUST BE LESS THAN QA13_K15;**
> **IF NO CHILDREN UNDER 18 IN HH (AS DETERMINED FROM CHILD ENUMERATION QUESTIONS) OR TOTAL NUMBER OF PEOPLE LIVING IN HH (AS DETERMINED BY ADULT PLUS CHILD ENUMERATION) = QA13_K15 GO TO PROGRAMMING NOTE QA13_19;**
> **ELSE CONTINUE WITH QA13_K16**

QA13_K16   How many of these {INSERT NUMBER FROM QA13_K15} people are children under the age of 18?
Ilan sa {INSERT NUMBER FROM QA13_K15} taong ito ay mga bata na wala pang 18 taong gulang?

| AK18 |

_____ NUMBER OF CHILDREN (UNDER AGE 18)   [HR: 0-20]

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

QA13_K17   Is there anyone else living in the U.S., but not currently living in your household, that is supported by your household income?
Mayroon bang sinumang nakatira sa U.S., ngunit hindi kasalukuyang nakatira sa inyong bahay, na tinutustusan ng kita ng inyong bahay?

| AK32 |

YES 1
NO...2   **[GO TO PN QA13_K19]**
REFUSED .... -7   **[GO TO PN QA13_K19]**
DON'T KNOW .... -8   **[GO TO PN QA13_K19]**

QA13_K18   How many?
Ilan?

| AK33 |

_____ NUMBER OF PEOPLE [HR: 1-20]

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

Poverty Level Test

PROGRAMMING NOTE QA13_K19:
OBTAIN THE FEDERAL POVERTY 50%, 100%, 133%, 200%, 300%, AND 400% LEVEL CUTOFF POINTS FROM THE 2011 FEDERAL POVERTY GUIDELINE USING THE TOTAL HOUSEHOLD SIZE AND NUMBER OF CHILDREN FROM QA13_K15 AND QA13_K16 RESPECTIVELY.
(THE 50%, 133%, 200%, 300%, AND 400% VALUES WERE DERIVED BY MULTIPLYING THE CENSUS POVERTY 2010 THRESHOLD "SIZE OF FAMILY UNIT" BY "RELATED CHILDREN UNDER 18 YEARS" TABLE AMOUNTS BY 0.5, 1.33, 2, 3, AND 4, RESPECTIVELY, THEN ROUNDING TO THE NEAREST 100 DOLLARS. REFER TO SPECIFICATIONS ADDENDUM "Poverty Level 2010" DOCUMENT FOR THE TABLE OF VALUES. THE 50% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT50, THE 100% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT100, THE 133% VALUE IN CATI VARIABLE POVRT133, THE 200% POVERTY CUTOFF VALUE WILL BE STORED IN CATI VARIABLE POVRT200, THE 300% VALUE IN CATI VARIABLE POVRT300, AND THE 400% VALUE IN CATI VARIABLE POVRT400.)
IF EITHER QA13_K15 OR QA13_K16 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT) AND THE TOTAL NUMBER OF CHILDREN ENUMERATED AT QA13_G15 OF THE ADULT INTERVIEW (GIVEN BY CATI VARIABLE KIDCNT) INSTEAD.

ASCERTAIN IF THE HOUSEHOLD INCOME IS ...
1) AT OR BELOW 50% FPL;
2) ABOVE 50% FPL BUT AT OR BELOW 100% FPL;
3) ABOVE 100% FPL BUT AT OR BELOW 133% FPL;
4) ABOVE 133 % FPL BUT AT OR BELOW 200% FPL;
5) ABOVE 200% FPL BUT AT OR BELOW 300% FPL;
6) ABOVE 300% FPL BUT AT OR BELOW 400% FPL;
7) ABOVE 400% FPL; OR
8) UNKNOWN BECAUSE HOUSEHOLD INCOME WAS NOT GIVEN.

IF QA13_K7 ≠ -7 OR -8 THEN GO TO PROGRAMMING NOTE QA13_K25;
ELSE IF QA13_K7= -7 OR -8 (REF/DK) AND IF THE HOUSEHOLD'S 50% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12, OR QA13_K14, ASK QA13_K19 USING POVRT50 (THE 50% FPL CUTOFF DISPLAY AMOUNT);
ELSE IF QA13_K7= -7 OR -8 (REF/DK) AND IF QA13_K9 = -7 OR QA13_K11 = -7 OR QA13_K13 = -7, GO TO PROGRAMMING NOTE QA13_K25
ELSE GO TO PROGRAMMING NOTE QA13_K20

QA13_K19   I need to ask just one more question about income.
Kailangan kong magtanong ng isa o dalawa pang tanong tungkol sa kinikita.

Was your total annual household income before taxes less than or more than ${POVRT50}?
Mas mababa ba o higit sa ${POVRT50} ang kabuuang kita ng inyong bahay sa isang taon bago binawasan ng buwis?

AK29

EQUAL TO OR LESS 1   **[GO TO PN QA13_K25]**
MORE 2   **[GO TO PN QA13_K25]**
REFUSED .... -7   **[GO TO PN QA13_K25]**
DON'T KNOW .... -8   **[GO TO PN QA13_K25]**

PROGRAMMING NOTE QA13_K20:
IF THE HOUSEHOLD'S 100% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12,
OR QA13_K14, THEN CONTINUE WITH QA13_K20 USING POVRT100 (100% POVERTY CUTOFF DISPLAY
AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K21

QA13_K20   I need to ask just one or two more questions about income.
Kailangan kong magtanong ng isa o dalawa pang tanong tungkol sa kinikita.

Was your total annual household income before taxes less than or more than ${POVRT100}?
Mas mababa ba o higit sa ${POVRT100} ang kabuuang kita ng inyong bahay sa isang taon bago
binawasan ng buwis?

AK18A

```
EQUAL TO OR LESS ...............................................1     [GO TO PN QA13_K25]
MORE ........................................................2
REFUSED ............................................................. -7     [GO TO PN QA13_K25]
DON'T KNOW ........................................................ -8     [GO TO PN QA13_K25]
```

PROGRAMMING NOTE QA13_K21:
IF THE HOUSEHOLD'S 133% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12,
OR QA13_K14, THEN CONTINUE WITH QA13_K21 USING POVRT133 (133% POVERTY CUTOFF DISPLAY
AMOUNT);
IF QA13_K20 WAS NOT ASKED, DISPLAY "I need to ask just one more question about income.";
ELSE DISPLAY "Was it";
ELSE GO TO PROGRAMMING NOTE QA13_K22

QA13_K21   {I need to ask just one more question about income. Was your total annual household income
before taxes/Was it} less than or more than ${POVRT133}?
Mas mababa ba o higit sa ${POVRT133}?

AK30

```
EQUAL TO OR LESS ...............................................1     [GO TO PN QA13_K25]
MORE ........................................................2     [GO TO PN QA13_K25]
REFUSED ............................................................. -7     [GO TO PN QA13_K25]
DON'T KNOW ........................................................ -8     [GO TO PN QA13_K25]
```

PROGRAMMING NOTE QA13_K22:
IF THE HOUSEHOLD'S 200% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12,
OR QA13_K14, CONTINUE WITH QA13_K22 USING POVRT200 (200% POVERTY CUTOFF DISPLAY
AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K23

QA13_K22   I need to ask just one more question about income. Was your total annual household income
before taxes less than or more than ${POVRT200}?
Kailangan kong magtanong ng isa o dalawa pang tanong tungkol sa kinikita. Mas mababa ba o
higit sa ${POVRT200} ang kabuuang kita ng inyong bahay sa isang taon bago binawasan ng
buwis?

AK18B

```
EQUAL TO OR LESS ...............................................1     [GO TO PN QA13_K25]
MORE ........................................................2     [GO TO PN QA13_K25]
REFUSED ............................................................. -7     [GO TO PN QA13_K25]
DON'T KNOW ........................................................ -8     [GO TO PN QA13_K25]
```

PROGRAMMING NOTE QA13_K23:
IF THE HOUSEHOLD'S 300% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10,
QA13_K12, OR QA13_K14, CONTINUE WITH QA13_K23 USING POVRT300 (300% POVERTY CUTOFF
DISPLAY AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K24

QA13_K23   I need to ask just one more question about income. Was your total annual household income before taxes less than or more than ${POVRT300}?
Kailangan kong magtanong ng isa o dalawa pang tanong tungkol sa kinikita. Mas mababa ba o higit sa ${POVRT300} ang kabuuang kita ng inyong bahay sa isang taon bago binawasan ng buwis?

AK18C

EQUAL TO OR LESS 1	**[GO TO PN QA13_K25]**
MORE 2	**[GO TO PN QA13_K25]**
REFUSED .... -7	**[GO TO PN QA13_K25]**
DON'T KNOW .... -8	**[GO TO PN QA13_K25]**

PROGRAMMING NOTE QA13_K24:
IF THE HOUSEHOLD'S 400% CUTOFF VALUE FALLS WITHIN A RESPONSE FROM QA13_K10, QA13_K12,
OR QA13_K14, THEN CONTINUE WITH QA13_K24 USING POVRT400 (400% POVERTY CUTOFF DISPLAY
AMOUNT);
ELSE GO TO PROGRAMMING NOTE QA13_K25

QA13_K24   I need to ask just one more question about income. Was your total annual household income before taxes less than or more than ${POVRT400}?
Kailangan kong magtanong ng isa o dalawa pang tanong tungkol sa kinikita. Mas mababa ba o higit sa ${POVRT400} ang kabuuang kita ng inyong bahay sa isang taon bago binawasan ng buwis?

AK31

EQUAL TO OR LESS 1
MORE 2
REFUSED .... -7
DON'T KNOW .... -8

Availability of Food in Household

> **PROGRAMMING NOTE QA13_K25:**
> **IF POVERTY < 5 (HH Income ≤ 200% FPL) OR 8 (HH INCOME NOT KNOWN), CONTINUE WITH QA13_K25;**
> **ELSE GO TO QA13_L1**

QA13_K25   These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford food.
Tungkol sa mga pagkain na kinain sa inyong bahay nitong nakaraang 12 buwan ang sumusunod na mga tanong at ang kakayahanninyong mamili ng pagkain.

I'm going to read two statements that people have made about their food situation. For each, please tell me whether the statement describes something that was often true, sometimes true, or never true for you and your household in the last 12 months. The first statement is:
Babasahin ko ang dalawang pahayag ng sinabi na mga tao tungkol sa kanilang kalagayan ukol sa pagkain. Para sa bawat isa, pakisabi sa akin kung isinasalarawan ng pahayag ang isang bagay na totoo nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong sambahayan nitong nakaraang 12 buwan.

AM1

"The food that {I/we} bought just didn't last, and {I/we} didn't have money to get more."
Ang unang pahayag ay: "Talagang hindi nagtagal ang pagkaing binili {ko/namin}, at wala {akong/kaming} pera upang bumili ng pandagdag."
Was that often true, sometimes true, or never true for you and your household in the last 12 months?

Totoo ba iyon nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong bahay nitong nakaraang 12 buwan?

OFTEN TRUE 1
SOMETIMES TRUE..2
NEVER TRUE 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_K26   The second statement is:
"{I/We} couldn't afford to eat balanced meals."
Ang ikalawang pahayag ay:
"Hindi {ko/namin} kayang kumain ng balanseng agahan/tanghalian/hapunan."

Was that often true, sometimes true, or never true for you and your household in the last 12 months?
Totoo ba iyon nang madalas, totoo paminsan-minsan, o hindi totoo kailanman para sa inyo at sa inyong bahay nitong nakaraang 12 buwan?

AM2

OFTEN TRUE 1
SOMETIMES TRUE..2
NEVER TRUE 3
REFUSED .... -7
DON'T KNOW .... -8

QA13_K27   Please tell me yes or no. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?
Pakisagot ng oo o hindi, nitong nakaraang 12 buwan, binawasan ba ninyo o ng iba pang adult sa inyong bahay ang dami ng pagkain o hindi kumain ng almusal/tanghalian/hapunan dahil sa hindi sapat ang pera para sa pagkain?

AM3

YES 1
NO..2   **[GO TO QA13_K29]**
REFUSED .... -7   **[GO TO QA13_K29]**
DON'T KNOW .... -8   **[GO TO QA13_K29]**

QA13_K28   How often did this happen -- almost every month, some months but not every month, or only in 1 or 2 months?
Gaano kadalas ito nangyayari -- halos bawat buwan, ilang buwan ngunit hindi bawat buwan, o sa isa o dalawang buwan lamang.

AM3A

ALMOST EVERY MONTH..1
SOME MONTHS BUT NOT EVERY MONTH 2
ONLY IN 1 OR 2 MONTHS.....................................3
REFUSED .... -7
DON'T KNOW .... -8

Hunger

QA13_K29   In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?
Nitong nakaraang 12 buwan, kumain ba kayo kailanman ng mas kaunti kaysa sa inyong nadadamang dapat kainin dahil walang sapat na pera upang ipang-bili ng pagkain?

AM4

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

QA13_K30   In the last 12 months, were you ever hungry but didn't eat because you couldn't afford enough food?
Nitong nakaraang 12 buwan, nagutom ba kayo kailanman ngunit hindi kumain dahil hindi ninyo kayang bumili ng sapat na pagkain?

AM5

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

212

Section L - Public Program Participation

PROGRAMMING NOTE FOR BEGINNING OF SECTION L:
IF HOUSEHOLD INCOME IS ≤ 300% FPL (POVERTY = <6) OR IF HOUSEHOLD POVERTY LEVEL CANNOT BE DETERMINED (POVERTY = 8) CONTINUE WITH SECTION L;
ELSE GO TO QA13_M1

TANF/CalWORKs

QA13_L1   Are you now receiving TANF or CalWORKs?
Tumatanggap ba kayo ngayon ng TANF o CalWORKS?

AL2

[IF NEEDED, SAY: "TANF means Temporary Assistance to Needy Families; and CalWORKs means California Work Opportunities and Responsibilities to Kids. Both replaced AFDC, California's old welfare entitlement program."]
[IF NEEDED, SAY: "Temporary Assistance to Needy Families ang kahulugan ng TANF; California Work Opportunities and Responsibilities to Kids ang CalWORKS. Itong dalawa ang pumalit sa AFDC, ang dating program ng California na tagabigay ng tulong sa mga karap-dapat."]

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

PROGRAMMING NOTE QA13_L2:
IF SAMPLED TEEN IN HOUSEHOLD, CONTINUE WITH QA13_L2;
ELSE GO TO QA13_L3;

QA13_L2   Is (TEEN) now receiving TANF or CalWORKs?
Tumatanggap ba ngayon si {TEEN} ng TANF or 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: "Temporary Assistance to Needy Families, ang kahulugan ng TANF; California Work Opportunities and Responsibilities to Kids ang CalWORKS. Itong dalawa ang kapalit sa AFDC, ang dating program ng California na tagabigay ng tulong sa mga karapat-dapat."]

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

Food Stamps

QA13_L3   Are you receiving Food Stamp benefits, also known as CalFresh?
Tumatanggap ba kayo ng mga benepisyong Food Stamp na kilala rin bilang 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: "Tinatanggap ninyo ang mga benepisyo sa pamamagitan ng EBT card. Ang EBT ay nangangahulugang Electronic Benefits Transfer card at kilala rin ito bilang Golden State Advantage Card.]

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

PROGRAMMING NOTE QA13_L4:
IF ELIGIBLE TEEN IN HOUSEHOLD, CONTINUE WITH QA13_L4;
ELSE GO TO QA13_L5

QA13_L4   Is (TEEN) receiving Food Stamp benefits, also known as CalFresh?
Tumatanggap ba si {TEEN} ng mga benepisyo ng Food Stamps na kilala din bilang 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: "Tinatanggap ninyo ang mga benepisyo sa pamamagitan ng EBT card. Ang EBT ay nangangahulugan na Electronic Benefits Transfer card at kilala rin ito bilang Golden State Advantage Card.]

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

Supplemental Security Income

QA13_L5   Are you receiving SSI?
Tumatanggap ba kayo ng SSI?

AL6

[IF NEEDED, SAY: "SSI means Supplemental Security Income. This is different from Social Security".]
[IF NEEDED, SAY: "Ang kahulugan ng SSI ay Supplemental Security Income. Iba ito sa Social Security.]

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

WIC

PROGRAMMING NOTE QA13_L6:
IF QA13_A5 = 2 (FEMALE) AND [QA13_E1 = 1 (PREGNANT) OR CHILD AGE < 7 (6 YEARS OR YOUNGER)]
CONTINUE WITH QA13_L6;
ELSE GO TO PROGRAMMING NOTE QA13_L7

QA13_L6   Are you on WIC?
Naka-enrol ba kayo sa WIC?

AL7

[IF NEEDED, SAY: "WIC is the Supplemental Food Program for Women, Infants and children."]
[IF NEEDED, SAY: Ang WIC ay ang 'Supplemental Food Program for Women, Infants and Children]

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

Assets

PROGRAMMING NOTE QA13_L7:
OBTAIN THE PROPERTY LIMIT VALUE FROM THE MEDI-CAL SECTION 1931(B) PROGRAM GENERAL PROPERTY AND INCOME LIMITATIONS USING THE TOTAL HOUSEHOLD SIZE FROM QA13_K15.

IF QA13_K15 IS MISSING, USE THE TOTAL NUMBER OF ADULTS ENUMERATED IN THE SCREENER (GIVEN BY CATI VARIABLE RADLTCNT).

IF QA13_K15 = 1 DISPLAY $3000;
IF QA13_K15 = 2 DISPLAY $3000;
IF QA13_K15 = 3 DISPLAY $3150;
IF QA13_K15 = 4 DISPLAY $3300;
IF QA13_K15 = 5 DISPLAY $3450;
IF QA13_K15 = 6 DISPLAY $3600;
IF QA13_K15 = 7 DISPLAY $3750;
IF QA13_K15 = 8 DISPLAY $3900;
IF QA13_K15 = 9 DISPLAY $4050;
IF QA13_K15 ≥ 10 DISPLAY $4200;

IF QA13_A16 = 1 (MARRIED) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE), DISPLAY "your family's";
ELSE DISPLAY "your"

QA13_L7　　　Not counting the value of any house or car you may own, would you say that {your/your family's} assets, that is, all {your/your family's} cash, savings, and investments together are worth more than {PROPERTY LIMIT}?
Huwag bilangin ang halaga ng anumang bahay o kotse na maaaring pag-aari ninyo, masasabi ba ninyo na higit sa {PROPERTY LIMIT} ang halaga ng inyong mga ari-arian, ibig sabihin, lahat ng inyong pera, mga naipon, mga investment, at mga muebles?
Huwag bilangin ang halaga ng anumang bahay o kotse na maaaring pag-aari ninyo, masasabi ba ninyo na higit sa {PROPERTY LIMIT} ang halaga ng mga ari-arian ng inyong pamilya, ibig sabihin, lahat ng inyong pera, mga naipon, mga investment, at mga muebles?

AL9

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

Alimony/Child Support

PROGRAMMING NOTE QA13_L8:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
ELSE DISPLAY "you"

QA13_L8   Did {you or your spouse/you or your partner/you} receive any money last month for alimony, or child support?
Nakatanggap ba kayo {o ang inyong asawa} ng anumang pera nitong nakaraang buwan para sa alimony o sustento sa asawa, o child support o sustento sa anak?

AL15

YES 1
NO...2   **[GO TO PN QA13_L10]**
REFUSED .... -7   **[GO TO PN QA13_L10]**
DON'T KNOW .... -8   **[GO TO PN QA13_L10]**

PROGRAMMING NOTE QA13_L9:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";
ELSE CONTINUE WITHOUT DISPLAYS

QA13_L9   What was the {combined} total amount that you {and your spouse/and your partner} received from alimony or child support last month?
Ano ang {pinagsama-samang} kabuuang halaga na natanggap ninyo {at ng inyong asawang babae/asawang lalaki} mula sa alimony o child support nitong nakaraang buwan?

AL16
[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

$_____ AMOUNT   [000001-999995]

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

217

PROGRAMMING NOTE QA13_L10:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you"
ELSE DISPLAY "you"

QA13_L10   Did {you or your partner or both of you/you or your spouse or both of you/you} pay any alimony or child support last month?
Nagbayad ba kayo {o ang inyong asawa o kayong dalawa} ng anumang alimony o child support nitong nakaraang buwan?

| AL17 |

YES, RESPONDENT PAID 1	
YES, SPOUSE/PARTNER PAID 2	
YES, BOTH PAID...3	
NO...4	**[GO TO PN QA13_L12]**
REFUSED .... -7	**[GO TO PN QA13_L12]**
DON'T KNOW .... -8	**[GO TO PN QA13_L12]**

PROGRAMMING NOTE QA13_L11:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse or both of you";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your partner or both of you";
ELSE DISPLAY "you"

QA13_L11   What was the total amount {you or your spouse or both of you/you or your partner or both of you/you} paid in alimony or support last month?
Ano ang kabuuang halaga ng alimony o support na binayaran {ninyo/ng inyong asawa/ng inyong partner/ninyong dalawa} nitong nakaraang buwan?

| AL18 |

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

_____ AMOUNT   [000001-999995]

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

Worker's Compensation

PROGRAMMING NOTE QA13_L12:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "you or your spouse";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH) DISPLAY "you or your partner";
ELSE DISPLAY "you"

QA13_L12   Did {you or your spouse/you or your partner/you} receive any money last month for workers compensation?
Tumanggap ba kayo {o ang inyong asawa} ng pera mula sa workers compensation nitong nakaraang buwan?

AL32

```
                    YES ............................................................1
                    NO.............................................................2      [GO TO PN QA13_L14]
                    REFUSED ................................................. -7      [GO TO PN QA13_L14]
                    DON'T KNOW ........................................... -8      [GO TO PN QA13_L14]
```

PROGRAMMING NOTE QA13_L13:
IF QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your spouse";
ELSE IF [QA13_A16 = 2 (LIVING WITH PARTNER) OR QA13_D16 = 1 OR QA13_D17 = 1 (LEGAL SAME-SEX COUPLE)] AND QA13_G11 = 1 (SPOUSE/PARTNER LIVES IN HH), THEN DISPLAY "combined" AND "and your partner";
ELSE CONTINUE WITHOUT DISPLAYS

QA13_L13   What was the {combined} total amount that you {and your spouse/and your partner} received from workers compensation last month?
Ano ang {pinagsama-samang} kabuuang halaga na natanggap ninyo {at ng inyong asawa} mula sa workers compensation nitong nakaraang buwan?

AL33

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

```
              $_____ AMOUNT          [000001-999995]

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

Social Security/Pension Payments

> **PROGRAMMING NOTE QA13_L14:**
> **IF [AGE > 50 OR (AGE RANGE IS BETWEEN 50 AND 64)] AND QA13_A16 = 1 (MARRIED) AND QA13_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH) CONTINUE WITH QA13_L12 AND DISPLAY "you or your spouse";**
> **ELSE IF AGE ≥ 65 AND QA13_G11 = 1 (SPOUSE/PARTNER LIVING IN SAME HH), THEN CONTINUE WITH QA13_L14 AND DISPLAY "you or your partner";**
> **ELSE IF AGE ≥ 65, THEN CONTINUE WITH QA13_L14 AND DISPLAY "you";**
> **ELSE GO TO PROGRAMMING NOTE QA13_L16**

QA13_L14   Did { you or your spouse/you or your partner/you} receive any Social Security or Pension payments last month?
Nakatanggap ba {kayo o ang inyong asawa} ng anumang bayad sa Social Security o Pension nitong nakaraang buwan?

AL18A

YES 1		
NO...2	**[GO TO PN QA13_L16]**
REFUSED .... -7	**[GO TO PN QA13_L16]**
DON'T KNOW .... -8	**[GO TO PN QA13_L16]**

QA13_L15   What was the total amount received last month from Social Security and Pensions?
Ano ang kabuuang halagang tinanggap nitong nakaraang buwan mula sa Social Security at mga Pension?

AL18B

[IF AMOUNT GREATER THAN $999,995, ENTER "999,995"]

_____ AMOUNT   [000001-999995]

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

Reasons for Non-Participation in Medi-Cal

PROGRAMMING NOTE QA13_L16: **IF ARINSURE ≠ 1 (UNINSURED) CONTINUE WITH QA13_L16;** **ELSE GO TO QA13_M1**

QA13_L16   What is the <u>one</u> main reason why you are not enrolled in the <u>Medi-Cal</u> program?
Ano ang <u>isang</u> pangunahing dahilan na hindi kayo naka-enroll sa program ng Medi-Cal?

AL19

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

Section M – Housing and Social Cohesion

Housing

QA13_M1   These next questions are about your housing and neighborhood.
Tungkol sa inyong pabahay at lugar ang susunod na mga tanong.

Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?
Nakatira ba kayo sa bahay, sa duplex, sa gusaling may 3 o higit pang unit, o sa mobile home?

AK23

[IF NEEDED, SAY: "A duplex is a building with 2 units."]
[IF NEEDED, SAY: "Gusali na may dalawang unit ang duplex."]

HOUSE 1
DUPLEX...2
BUILDING WITH 3 OR MORE UNITS....................3
MOBILE HOME...4
REFUSED .... -7
DON'T KNOW .... -8

QA13_M2   Do you own or rent your home?
May-ari ba kayo o nangungupahan ng inyong bahay?

AK25

OWN 1
RENT 2
OTHER ARRANGEMENT 3
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_M3:
IF AGE ≥ 65 AND QA13_M2 = 1 (OWNS HOME), THEN CONTINUE WITH QA13_M3
ELSE GO TO QA13_M4

QA13_M3   Are you currently paying off a mortgage or loan on this home?
Nagbabayad ba kayo ng mortgage o utang sa bahay na ito?

AM37

[IF SPOUSE/PARTNER IS PAYING, CODE AS "YES"]

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

QA13_M4   About how long have you lived at your current address?
                   Humigit-kumulang, gaano katagal na kayong nakatira sa inyong kasalukuyang address?

AM14

_____ MONTHS   [HR: 1 - AAGEx12MONTHS]
_____ YEARS   [HR: 1 - AAGE]

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

PROGRAMMING NOTE QA13_M5:
IF QA13_M4 ≥ 5 YEARS OR 60 MONTHS, THEN GO TO PROGRAMMING NOTE QA13_M7;
ELSE CONTINUE WITH QA13_M5

QA13_M5   About how long have you lived in your current neighborhood?
                   Humigit-kumulang, gaano katagal na kayong nakatira sa inyong kasalukuyang lugar?

AM15

_____ MONTHS   [HR: 1 - AAGEx12MONTHS]
_____ YEARS   [HR: 1 - AAGE]

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

QA13_M6   The last time you moved, what was your main reason for moving?
                   Noong huli kayong lumipat, ano ang inyong pangunahing dahilan sa paglipat?

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

Social Cohesion

> **PROGRAMMING NOTE QA13_M7:**
> **IF QA13_M7 THROUGH QA13_M11 NOT ANSWERED IN CHILD INTERVIEW, THEN CONTINUE WITH QA13_M7;**
> **ELSE GO TO QA13_M12**

QA13_M7   Tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements: People in my neighborhood are willing to help each other.
Sabihin sa akin kung talagang sang-ayon kayo, sang-ayon, di-sang-ayon, o talagang di-sang-ayon sa mga sumusunod na pahayag. Handang tumulong sa isa't-isa ang mga tao sa aking lugar.

AM19

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]
[IF NEEDED, SAY: "Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang di-sang-ayon?"]

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

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

QA13_M8   People in this neighborhood generally do NOT get along with each other.
HINDI nagkakasundo nang mabuti sa isa't-isa ang mga tao sa lugar na ito.

AM20

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]
[IF NEEDED, SAY: "Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang di-sang-ayon?"]

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

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

QA13_M9   People in this neighborhood can be trusted.
Mapagkakatiwalaan ang mga tao sa aking lugar.

AM21

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]
[IF NEEDED, SAY: "Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang di-sang-ayon?"]

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

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

QA13_M10   You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble.
Maaasahan ninyo na ang mga adult sa lugar na ito ay bantayan ang mga bata para matiyak na ligtas at hindi napapasok sa gulo ang mga ito.

AM35

[IF NEEDED, SAY: "Do you strongly agree, agree, disagree, or strongly disagree?"]
[IF NEEDED, SAY: "Talagang sang-ayon ba kayo, sang-ayon, di-sang-ayon, o talagang di-sang-ayon?"]

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

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

Safety

QA13_M11   Do you feel safe in your neighborhood…
Panatag ba ang pakiramdam ninyo sa inyong lugar...

AK28

```
All of the time, ...........................................................1
palagi, ......................................................................1
Most of the time, ......................................................2
kadalasan, ................................................................2
Some of the time, or .................................................3
paminsan-minsan, o ..................................................3
None of the time ......................................................4
hindi kailanman? ......................................................4
REFUSED ............................................................... -7
DON'T KNOW ..................................................... -8
```

225

Civic Engagement

QA13_M12   In the past 12 months, have you done any volunteer work or community service that you have not been paid for?
Nitong nakaraang 12 buwan, nag-volunteer work ba kayo o nag-community-service na hindi kayo nababayaran?

AM36

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

QA13_M13   In the past 12 months, have you served as a volunteer on any local board, council, or organization that deals with community problems?
Nitong nakaraang 12 buwan, nag-volunteer ba kayo sa lupon, sangguniang bayan, o samahan sa inyong komunidad na nag-aasikaso sa mga problema ng komunidad?

AM39

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

QA13_M14   In the past 12 months, have you gotten together informally with others to deal with community problems?
Nitong nakaraang 12 buwan, nakipulong ba kayo nang walang pormalidad sa mga iba pang tao upang asikasuhin ang mga problema ng komunidad?

AM40

                [IF NEEDED SAY: "For example, with a neighborhood watch group."]
                [IF NEEDED SAY: "Halimbawa, sa grupong nagtatanod sa komunidad."]

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

Section S – Suicide Ideation and Attempts

Suicide Ideation and Attempts

QA13_S1   The next section is about thoughts of hurting yourself. Again, if any question upsets you, you don't have to answer it.
Ang susunod na bahagi ay tungkol sa mga iniisip na pananakit sa sarili. Sa uulitin, kung may anumang tanong na nakakagulo sa inyo, hindi ninyo kailangang sagutin iyon.

Have you <u>ever</u> seriously thought about committing suicide?
May pagkakataon ba <u>kailanman</u> na seryoso ninyong pinag-isipan na magpakamatay?

AF86

    YES 1
    NO 2   **[GO TO PN QA13_N1]**
    REFUSED .... -7   **[GO TO PN QA13_N1]**
    DON'T KNOW .... -8   **[GO TO PN QA13_N1]**

QA13_S2   Have you seriously thought about committing suicide at any time in the past 12 months?
May pagkakataon ba kailanman na seryoso ninyong pinag-isipan ang pagpapakamatay nitong nakaraang 12 buwan?

AF87

    YES 1
    NO 2   **[GO TO QA13_S4]**
    REFUSED .... -7   **[GO TO QA13_S4]**
    DON'T KNOW .... -8   **[GO TO QA13_S4]**

QA13_S3   Have you seriously thought about committing suicide at any time in the past 2 months?
May pagkakataon bang seryoso ninyong pinag-isipan ang pagpapakamatay kailanman nitong nakaraang 2 buwan?

AF91

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

QA13_S4   Have you ever attempted suicide?
Nagtangka na ba kayong magpakamatay kailanman?

AF88

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

> **PROGRAMMING NOTE QA13_S5:**
> **IF QA13_S2 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**
> **IF QA13_S3 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**
> **IF QA13_S3 = 1 AND QA13_S4 = (2, -7, -8) THEN GO TO SUICIDE RESOURCE;**
> **ELSE CONTINUE WITH QA13_S5**

QA13_S5   Have you attempted suicide at any time in the past 12 months?
                Nagtangka na ba kayong magpakamatay kailanman nitong nakaraang 12 buwan?

AF89

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

> **SUICIDE RESOURCE:**
>
> We have a number you can call if you'd like to talk to someone about suicidal thoughts or attempts. Someone is available 24 hours a day to provide information to help you. The number is 1-800-273-TALK (8255).
>
> Or, you can visit a website to find out information about getting help. The website address is www.suicidepreventionlifeline.org.
>
> Mayroon kaming toll-free number na matatawagan ninyo kung gusto ninyong makipag-usap sa isang tao tungkol sa mga pag-iisip o pagtatangka na magpakamatay. May taong nakahandang makipag-usap, 24 na oras sa bawat araw, na makapagbibigay ng impormasyong makakatulong sa inyo. 1-800-273-TALK (8255) ang number.
>
> O, maaari ninyong tingnan ang isang website upang makahanap ng impormasyon tungkol sa kung paano humingi ng tulong. www.suicidepreventionlifeline.org ang website address.

> **POST-NOTE FOR SUICIDE RESOURCE:**
> **IF QA13_S2 = (2, -7, -8) AND QA13_S4 = (2, -7, -8) THEN SKIP TO PN QA13_N1 (NEXT SECTION); ELSE CONTINUE**

QA13_S6   Would you like to discuss your thoughts with this person?
                Gusto ba ninyong pag-usapan ang mga iniisip ninyo sa taong ito?

AF90

                YES 1   **[GO TO SUICIDE PROTOCOL]**
                NO...2   **[GO TO PN QA13_N1]**
                REFUSED .... -7   **[GO TO PN QA13_N1]**
                DON'T KNOW .... -8   **[GO TO PN QA13_N1]**

Section N –Demographic Information Part III and Closing

County of Residence

PROGRAMMING NOTE QA13_N1: **IF NOT ALREADY ASKED IN CHILD INTERVIEW, CONTINUE WITH QA13_N1;** **ELSE SKIP TO QA13_N7**

QA13_N1   Just a few final questions and then we are done.
Ilang pangwakas na tanong na lang at tapos na tayo.

To be sure we are covering the entire state, what county do you live in?
Upang matiyak na nasasakop namin ang buong state, saang county kayo nakatira?

AH42

County	Code
ALAMEDA	1
ALPINE	2
AMADOR	3
BUTTE	4
CALAVERAS	5
COLUSA	6
CONTRA COSTA	7
DEL NORTE	8
EL DORADO	9
FRESNO	10
GLENN	11
HUMBOLDT	12
IMPERIAL	13
INYO	14
KERN	15
KINGS	16
LAKE	17
LASSEN	18
LOS ANGELES	19
MADERA	20
MARIN	21
MARIPOSA	22
MENDOCINO	23
MERCED	24
MODOC	25
MONO	26
MONTEREY	27
NAPA	28
NEVADA	29
ORANGE	30
PLACER	31
PLUMAS	32
RIVERSIDE	33
SACRAMENTO	34
SAN BENITO	35
SAN BERNARDINO	36
SAN DIEGO	37
SAN FRANCISCO	38
SAN JOAQUIN	39

SAN LUIS OBISPO 40
SAN MATEO 41
SANTA BARBARA 42
SANTA CLARA 43
SANTA CRUZ 44
SHASTA 45
SIERRA 46
SISKIYOU 47
SOLANO 48
SONOMA 49
STANISLAUS.. 50
SUTTER... 51
TEHAMA 52
TRINITY 53
TULARE 54
TUOLUMNE 55
VENTURA 56
YOLO 57
YUBA 58
REFUSED .... -7
DON'T KNOW .... -8

Address Confirmation, Cross Streets, Zip Code

PROGRAMMING NOTE QA13_N2:
IF ADVANCE LETTER SENT, ASK QA13_N2;
IF R'S ADDRESS IS A P.O. BOX, GO TO QA13_N3;
ELSE GO TO QA13_N3

QA13_N2   Your phone number was randomly selected for this study by a computer. We were able to match an address to your phone number to send a letter to your home explaining the purpose of this study. To help us better understand the environment you live in and how it may affect your health, we would like to confirm your address. This information will be kept confidential and will be destroyed after the entire survey has been completed.

Napili by random ang inyong phone number ng computer para sa pagsusuring ito. Napagtugma namin ang address sa inyong phone number upang magpadala ng sulat sa inyong bahay na nagpapaliwanag ng layunin nitong pagsusuri.Upang matulungan kaming maintindihan nang mas mabuti ang kapaligiran na inyong tinitirahan at kung paano maaaring maka-apekto ito sa inyong kalusugan, gusto naming kumpirmahin ang inyong address. Pananatilihing kumpidensyal ang impormasyong ito at sisirain pagkatapos makumpleto ang buong pagsusuri.

Do you now live at {R's ADDRESS AND STREET}?
Nakatira ba kayo ngayon sa {R's ADDRESS AND STREET}?

AO1

YES 1   **[GO TO QA13_N6]**
NO 2
REFUSED .... -7
DON'T KNOW .... -8

QA13_N3   What is your zip code?
                Ano ang inyong zip code?

AM7

                            _____ ZIP CODE

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

QA13_N4   To help us better understand the environment you live in and how it may affect your health,
                please tell me the address where you live. This information will be kept confidential and will be
                destroyed after the entire survey has been completed.
                Upang matulungan kaming maintindihan nang mas mabuti ang kapaligiran na inyong tinitirahan
                at kung paano maaaring maka-apekto ito sa inyong kalusugan, gusto naming kumpirmahin ang
                inyong address. Pananatilihing kumpidensyal ang impormasyong ito at sisirain pagkatapos
                makumpleto ang buong pagsusuri.

AO2

                            _____ HOUSE ADDRESS NUMBER
                            _____ NAME OF STREET (VERIFY SPELLING)   **[GO TO QA13_N6]**
                            _____ STREET TYPE
                            _____ APT. NO

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

QA13_N5   Can you tell me just the name of the street you live on?
                Masasabi ba niyo sa akin ang pangalan lamang ng kalye na tinitirahan ninyo?

AM8

                            _____ NAME OF STREET

                            REFUSED .... -7   **[GO TO QA13_N7]**
                            DON'T KNOW .... -8   **[GO TO QA13_N7]**

QA13_N6   And what is the name of the street down the corner from you that crosses your street?
                At ano ang pangalan ng kalye sa kanto na tumatawid sa kalye ninyo?

AM9

                            _____ NAME OF CROSS-STREET

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

Cell Phone Use

PROGRAMMING NOTE QA13_N7:
IF CELL PHONE INTERVIEW, GO TO PROGRAMMING NOTE QA13_N11;
ELSE CONTINUE WITH QA13_N7

QA13_N7   I'm won't ask you for the number, but do you have a working cell phone?
                Hindi ko tatanungin ang number, pero mayroon ba kayong gumaganang cell phone?

AM33

[CODE "SHARES CELL PHONE" ONLY IF VOLUNTEERED]

YES 1
NO..2
SHARES CELL PHONE 3
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_N8:
IF LANDLINE SAMPLE, GO TO PROGRAMMING NOTE QA13_N10;
ELSE CONTINUE WITH QA13_N8

QA13_N8   Is there a regular or landline telephone in your household?
                Mayroon bang regular na telepono o landline sa inyong sambahayan?

AN6

YES 1
NO..2   **[GO TO PN QA13_N10]**
REFUSED .... -7   **[GO TO PN QA13_N10]**
DON'T KNOW .... -8   **[GO TO PN QA13_N10]**

QA13_N9   Is that telephone for personal use or business use only?
                Ang teleponong iyon ba ay para sa personal na gamit o para sa negosyo lamang?

AN7

PERSONAL USE ONLY 1
BUSINESS USE ONLY...2
BOTH PERSONAL USE AND BUSINESS USE.......3
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE QA13_N10:
IF QA13_N7 = 1 (YES) OR 3 (SHARES CELL PHONE), OR QA13_N9 = 1 OR 3 (LANDLINE IS FOR
PERSONAL USE OR FOR BOTH PERSONAL OR BUSINESS USE), THEN CONTINUE WITH QA13_N10;
ELSE SKIP TO PROGRAMMING QA13_N11

QA13_N10   Of all the telephone calls that you receive, are...
Sa lahat ng tawag sa telepono na inyong natatanggap, ...

AM34

All or almost all calls received on a cell phone, ... 1
Lahat ba o halos lahat ng tawag ay natatanggap
sa mga cell phone, ... 1
Some on cell phones & some on regular phones, or 2
Ang ilan ba ay natatanggap sa cell phone at ang
ilan ay sa regular na mga telepono, o 2
Very few or none on cell phones 3
Kaunting-kaunti o wala sa mga cell phone? 3
REFUSED .... -7
DON'T KNOW .... -8

Follow-Up Survey Permission

PROGRAMMING NOTE QA13_N11:
IF PROXY INTERVIEW, GO TO PROGRAMMING NOTE CLOSE1;
ELSE CONTINUE WITH QA13_N11

QA13_N11   Finally, do you think you would be willing to do a follow-up to this survey some time in the future?
Sa wakas, sa palagay ba ninyo papayag kayo sa isang follow-up sa survey na ito sa hinaharap?

AM10

YES 1
MAYBE/PROBABLY YES 2
DEFINITELY NOT 3
REFUSED .... -7
DON'T KNOW .... -8

PROGRAMMING NOTE SUICIDE RESOURCE 2:
IF QA13_S6 = (2, -7, -8),
AND [QA13_S3 = 1 OR (QA13_S3 = 2, -7, -8 AND QA13_S5=1)], THEN CONTINUE WITH SUICIDE
RESOURCE 2;
ELSE GO TO PROGRAMMING NOTE CLOSE1

SUICIDE RESOURCE 2:

As I mentioned earlier, if you'd like to talk to someone about suicidal thoughts or attempts, someone is available 24 hours a day to provide information to help you. The toll-free number is 1-800-273-TALK (8255).

Or you can visit their website at www.suicidepreventionlifeline.org

Gaya nang binanggit ko kanina, kung gusto ninyong makipag-usap sa isang tao tungkol sa mga pag-iisip o mga pagtatangka na magpakamatay, may taong handang makipag-usap, 24 oras sa bawat araw, na makapagbibigay ng impormasyong makakatulong sa inyo. Ikalulugod kong maghintay habang kumukuha kayo ng panulat, at maaari kong ibigay sa inyo ang number. 1-800-273-TALK (8255) ang toll-free number.

O, maaari ninyong tingnan ang kanilang website sa www.suicidepreventionlifeline.org

---

QA13_N12   Would you like to speak with someone now?
Gusto ba ninyong makipag-usap sa isang tao ngayon?

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]
Titingnan ko kung mayroon sinumang iba pang kailangan naming kausapin.

CLOSE2   Thank you, I really appreciate your time and cooperation. You have helped with a very important health survey. If you have any questions about the study, please contact Dr. Ninez Ponce, the Principal Investigator. Dr. Ponce can be reached toll-free at 1-866-275-2447. Thank you, and good-bye.
Salamat. Nakatulong kayo sa mahalagang survey sa buong state. Kung mayroon kayong anumang tanong, maaari kayong makipag-ugnay kay Dr. Ninez Ponce, ang namumuno sa pagsusuri. Gusto ba ninyo ang number na iyon?

[IF YES, SAY: Maaaring matawagan si Dr. Ponce nang toll-free sa 1-866-275-2447.]