Section	IP	[INSURANCE PLANS]	Sequence: 35

IP1PRE

IP1PRE	NOT ON FILE

QUESTION TEXT:

Now we have a few questions about {your/SP's} health insurance.

PRESS 1 AND ENTER TO CONTINUE

IP1

ip5covmedcad	R5 IP1 COVERD BY MEDICARE PART D

QUESTION TEXT:

{Are you/Is SP} (currently) covered by or enrolled in a Medicare Prescription Drug plan, also called Part D?

CODES

1	YES	IP3
2	NO	
	REFUSED	
	DON'T KNOW	

IP2

ip5otdrugcov	R5 IP2 DRUG COVERG SOME OTHER WAY

QUESTION TEXT:

{Do you/Does SP} have prescription drug coverage through a current or former employer or some other way?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

IP3

ip5mgapmedsp	R5 IP3 MEDIGAP OR MEDICARE SUPP

QUESTION TEXT:

Some people have additional coverage besides Medicare to pay for doctors and other medical care. This is sometimes referred to as Medigap or a Medicare Supplement. {Do you/Does SP} have this type of health insurance coverage?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

IP4

ip5cmedicaid	R5 IP4 COV BY STATE MEDICAID PRG

DISPLAY INSTRUCTIONS:

Display ", also known as {STATE NAME FOR MEDICAID PROGRAM}," and "{STATE NAME FOR MEDICAID PROGRAM}" if state name for Medicaid is not "Medicaid".

Otherwise display "Medicaid"

QUESTION TEXT:

Medicaid {, also known as {STATE NAME FOR MEDICAID PROGRAM},} is a state program for low-income people or for people on public assistance. Sometimes people with very large medical bills are also covered by Medicaid.

{Are you/Is SP} now covered by {Medicaid/{STATE NAME FOR MEDICAID PROGRAM}}?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Use NHATS State Name for Medicaid file for {STATE NAME FOR MEDICAID PROGRAM} display.

IP5   ip5covtricar   R5 IP5 COVERED BY TRICARE

QUESTION TEXT:

TRICARE is a health care program for active duty and retired members of the uniformed Armed Forces, their families, and survivors.

{Are you/Is SP} now covered by TRICARE?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX IP5A   BOX IP5A   NOT ON FILE

If NEWSAMPLE flag=1 (YES), go to IP6.

Else if LAST INT IP6 = 1 (YES), go to IP5A.

Otherwise, go to IP6

IP5A   ip5nginslast   R5 IP5A HAVE LTC INS FROM LAST INT

QUESTION TEXT:

At the time of the last interview ({LAST INT MONTH, DAY, AND YEAR}), {you/SP} had insurance that paid for a year or more of care in a nursing home, assisted living, or in {your/his/her} home. {Do you/Does {he/she}} still have this insurance?

CODES

1	YES	IP7
2	NO	SECTION LF
90	LAST INTERVIEW INFORMATION INCORRECT	
	REFUSED	SECTION LF
	DON'T KNOW	SECTION LF

IP6 **ip5nginsnurs** R5 IP6 NONGOV INSR FOR NURS HOME

QUESTION TEXT:

Not including government programs, {do you/does SP} have any insurance that would pay for a year or more of care in a nursing home, assisted living, or in {your/his/her} home?

CODES

1	YES	
2	NO	SECTION LF
	REFUSED	SECTION LF
	DON'T KNOW	SECTION LF

IP7a **ip5typcarco1** R5 IP7 LTC INS NURSNG HOME COVD

  ip5typcarco2 R5 IP7 LTC INS ASSISTD LVNG COVD

  ip5typcarco3 R5 IP7 LTC INS HOME HEALTH COVD

QUESTION TEXT:

Which types of care are covered by {your/SP's} policy? Care in: a nursing home, assisted living, or care in {your/his/her} home?

SELECT ALL THAT APPLY

CODES **Code All That Apply**

1	NURSING HOME CARE
2	ASSISTED LIVING
3	CARE BY HOME HEALTH PROVIDERS IN HOME
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Allow code all that apply.

IP8 **ip5paypremms** R5 IP8 HOW MUCH PAY IN PREMIUMS

QUESTION TEXT:

SHOW CARD IP1

For the year ending December {CURRENT YEAR-1}, how much altogether did {you/SP} pay in premiums? Would you say

CODES

1	less than $1,000,
2	$1,000 to less than $2,000,
3	$2,000 to less than $3,000,
4	$3,000 to less than $5,000, or
5	$5,000 or more?
	REFUSED
	DON'T KNOW

BOX IP9 **BOXIP9** NOT ON FILE

If NEWSAMPLE flag=1 (YES), go to IP9.

Otherwise, go to Section LF – Labor Force.

IP9	**ip5longhadpl**	R5 IP9 HOW LONG HAD THIS POLICY

QUESTION TEXT:

How long {have you/has SP} had this policy?

INDICATE RESPONSE UNIT

CODES

1	NUMBERS OF YEARS	IP9A
2	AGE	IP9B
	REFUSED	SECTION LF
	DON'T KNOW	SECTION LF

IP9A	**ip5numyears**	R5 IP9A NUMBER OF YEARS

QUESTION TEXT:

ENTER NUMBER OF YEARS SP HAS HAD POLICY

ENTER ZERO IF LESS THAN 1 YEAR

ENTER NUMBER

Range   0 to 40

PROGRAMMER INSTRUCTIONS:
Range 0-40

Go to Section LF – Labor Force

IP9B	**ip5agepurpol**	R5 IP9B AGE WHEN PURCHSD POLICY

QUESTION TEXT:

ENTER AGE OF SP WHEN PURCHASED POLICY

ENTER NUMBER

Range   30 to 110
Soft Range   40 to 90

PROGRAMMER INSTRUCTIONS:
Hard range 30-110
Soft range 40-90

Go to Section LF – Labor Force