National Study of Caregiving

Section   HI   [HEALTH INSURANCE AND INCOME]   Sequence: 10

HI1PRE   **HI1PRE**   NOT ON FILE

We have a few last questions.

PRESS 1 AND ENTER TO CONTINUE

HI1   **chi5medicare**   C5 HI1 MEDICARE COVERAGE

QUESTION TEXT:

Are you currently covered by Medicare, a health insurance program for person 65 years and over and for persons with disabilities?

CODES

1	YES	
2	NO	HI3
	REFUSED	HI3
	DON'T KNOW	HI3

HI2   **chi5medigap**   C5 HI2 MEDIGAP COVERAGE

QUESTION TEXT:

Some people with Medicare also have a Medigap or Medicare Supplement plan. Do you have this type of health insurance coverage?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HI3   **chi5medicaid**   C5 HI3 MEDICAID COVERAGE

DISPLAY INSTRUCTIONS:

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

QUESTION TEXT:

Medicaid {, also known as {STATE NAME FOR MEDICAID PROGRAM},} and {STATE NAME FOR SCHIP PROGRAM} are state programs for low-income persons or for persons on public assistance.

Are you now covered by {STATE NAME FOR MEDICAID PROGRAM} or {STATE NAME FOR SCHIP PROGRAM}?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Use NHATS State Name for Medicaid lookup file.

HI4   chi5privinsr   C5 HI4 PRIVATE INSURNCE COVERAGE

DISPLAY INSTRUCTIONS:

> If HD1 = 1 (MARRIED) or HD1 = 2 (LIVING WITH A PARTNER), display "or your {spouse/partner}".
> If HD1 = 1 (MARRIED), display "spouse".
> If HD1 = 2 (LIVING WITH A PARTNER), display "partner".

QUESTION TEXT:

> Are you currently covered by a private health insurance plan?
>
> IF NEEDED: This may be a policy you {or your {spouse/partner} have through a job, a labor union, or an association or organization you belong to. It may also be bought directly from an insurance agent or company.

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HI5   chi5tricare   C5 HI5 TRICARE OR CHAMPVA

QUESTION TEXT:

> TRICARE and CHAMPVA are health care programs for active duty and retired members of the uniformed Armed Forces, their families, and survivors. Are you now covered by either one of these programs?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

BOX HI6   BOX HI6   NOT ON FILE

> If HI1, HI3, HI4, and HI5 = 2 (NO), RF, or DK, go to HI6.
> Otherwise, go to BOX HI8.

HI6   chi5uninsurd   C5 HI6 NO INSURANCE VERIFICATION

QUESTION TEXT:

> Based on your answers, you are uninsured and do not currently have any health insurance. Is that correct?

CODES

1	YES	BOX HI8
2	NO	
	REFUSED	BOX HI8
	DON'T KNOW	BOX HI8

HI7   chi5insrtype   C5 HI7 KIND OF HEALTH INSURANCE

QUESTION TEXT:

> What kind of health insurance do you have?

CODES

1	MEDICARE	BOX HI8
2	MEDICAID	BOX HI8

3	PRIVATE HEALTH INSURANCE	BOX HI8
4	TRICARE/CHAMPVA	BOX HI8
91	OTHER (SPECIFY)	
	REFUSED	BOX HI8
	DON'T KNOW	BOX HI8

HI7a — HI7A — NOT ON FILE

QUESTION TEXT:

SPECIFY THE TYPE OF HEALTH INSURANCE

ENTER TEXT

Length	75
REFUSED	
DON'T KNOW	

BOX HI8 — BOX HI8 — NOT ON FILE

If relationship of caregiver to SP = 2 (spouse/partner), go to Section CN, Closing.
Otherwise, go to HI8.

HI8 — chi5ownhome — C5 HI8 OWN YOUR HOME

DISPLAY INSTRUCTIONS:

If HD1 = 1 (MARRIED) or HD1 = 2 (LIVING WITH A PARTNER), display {IF OWNERSHIP WITH {SPOUSE/PARTNER}, CODE YES.}.
If HD1 = 1 (MARRIED), display "SPOUSE".
If HD1 = 2 (LIVING WITH A PARTNER), display "PARTNER".

QUESTION TEXT:

Do you own your home?

{IF OWNERSHIP IS WITH {SPOUSE/PARTNER}, CODE YES.}

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HI9

	chi5chckacct	C5 HI9A CG HAS CHECKING ACCT
	chi5svgsacct	C5 HI9B CG HAS SAVINGS ACCOUNT
	chi5certdpst	C5 HI9C CG HAS CERT OF DEPOSIT
	chi5retrplan	C5 HI9D CG HAS RETIREMENT PLAN
	chi5mutlfnds	C5 HI9E CG HAS STOCKS MUT FUNDS

DISPLAY INSTRUCTIONS:

If HD1 = 1 (MARRIED) or HD1 = 2 (LIVING WITH A PARTNER), display "and your {spouse/partner}".
If HD1 = 1 (MARRIED), display "spouse".
If HD1 = 2 (LIVING WITH A PARTNER), display "partner".

Use "Same Question Stem" display.

If at HI9a, do not display question text in brackets.
Otherwise, display question text in brackets.

QUESTION TEXT:

{[} Do you {and your {spouse/partner}} have... {]}

{variable text [a-e]}

RESPONSE [1] a. any checking accounts?
RESPONSE [2] b. savings or money market accounts?
RESPONSE [3] c. certificates of deposit?
RESPONSE [4] d. retirement plans such as IRAs, SEPs, 401K, or 403b plans?
RESPONSE [5] e. stocks or mutual funds that are not in retirement accounts?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
Display 'variable text' in the a-e sequence until all rows have been displayed.

HI10 chi5income C5 HI10 INCOME LAST YEAR

DISPLAY INSTRUCTIONS:

If HD1 = 1 (MARRIED) or HD1 = 2 (LIVING WITH A PARTNER), display "or your {spouse/partner}".
If HD1 = 1 (MARRIED), display "spouse".
If HD1 = 2 (LIVING WITH A PARTNER), display "partner".

If EC1 or EC4 = 1 (YES), display "from work and".

Display "last year" in bold underlined text.

QUESTION TEXT:

Now thinking about the income that you {and your {spouse/partner}} have {from work and} all other sources, about how much was your {and your {spouse/partner}'s} total income for the last year (in the last 12 months ending in December {CURRENT YEAR - 1} before taxes?

IF NEEDED: We don't need an exact dollar amount. The nearest thousand dollars is fine.

IF NEEDED: We know questions like these may be difficult to answer, but we need to know this detail to understand how people who are helping older relatives or friends are getting along financially these days.

ENTER TOTAL INCOME FOR LAST YEAR

ENTER NUMBER

Range	1 to 99999999	
REFUSED	HI14	
DON'T KNOW		

PROGRAMMER INSTRUCTIONS:

Display dollar amount entries using 1000 coma separator.
If amount entered, go to HI14

BOX HI11 BOX HI11 NOT ON FILE

Compute CAREGIVER HHSIZE:
If CAREGIVER has INHOUSEHOLD flag = 1, use NHATS HH SIZE.
Otherwise, CAREGIVER HHSIZE = number entered at HD6 +1.

The following table presents the poverty guidelines used to compute the percentage of poverty amounts for HH11-HH13. The amounts displayed in HH11-HH13 are based on the amounts presented for the caregiver's computed HHSIZE.

HHSIZE	2010 Poverty Guidelines	100% of poverty	200% of poverty	400% of poverty
1	$10,800	$10,800	$21,600	$43,200
2	$14,600	$14,600	$29,200	$58,400
3	$18,300	$18,300	$36,600	$73,200
4	$22,200	$22,200	$44,400	$88,800
5	$25,800	$25,800	$51,600	$103,200
6	$29,500	$29,500	$59,000	$118,000
7	$33,300	$33,300	$66,600	$133,200
8+	$37,000	$37,000	$74,000	$148,000

HI11   chi5inc200pv   C5 HI11 INCOME CATEGORIES 200

DISPLAY INSTRUCTIONS:

Display for {200% OF POVERTY GUIDELINE} uses the following conditions:
If CAREGIVER HHSIZE = 1, set 200% OF POVERTY GUIDELINE = $21,600 and display "21,600".
If CAREGIVER HHSIZE = 2, set 200% OF POVERTY GUIDELINE = $29,200 and display "29,200".
f CAREGIVER HHSIZE = 3, set 200% OF POVERTY GUIDELINE = $36,600 and display "36,600".
If CAREGIVER HHSIZE = 4, set 200% OF POVERTY GUIDELINE = $44,400 and display "44,400".
If CAREGIVER HHSIZE = 5, set 200% OF POVERTY GUIDELINE = $51,600 and display "51,600".
If CAREGIVER HHSIZE = 6, set 200% OF POVERTY GUIDELINE = $59,000 and display "59,000".
If CAREGIVER HHSIZE = 7, set 200% OF POVERTY GUIDELINE = $66,600 and display "66,600".
If CAREGIVER HHSIZE = or >8, set 200% OF POVERTY GUIDELINE = $74,000 and display "74,000".

QUESTION TEXT:

Was it less than or more than ${200% OF POVERTY GUIDELINE}?

CODES

1	LESS THAN	
2	MORE THAN	HI13
	REFUSED	HI14
	DON'T KNOW	HI14

HI12   chi5inc100pv   C5 HI12 INCOME CATGORIES 100

DISPLAY INSTRUCTIONS:

Display for {100% OF POVERTY GUIDELINE} uses the following conditions:
If CAREGIVER HHSIZE = 1, set 100% OF POVERTY GUIDELINE to $10,800 and display "10,800".
If CAREGIVER HHSIZE = 2, set 100% OF POVERTY GUIDELINE to $14,600 and display "14,600".
If CAREGIVER HHSIZE = 3, set 100% OF POVERTY GUIDELINE to $18,300 and display "18,300".
If CAREGIVER HHSIZE = 4, set 100% OF POVERTY GUIDELINE to $22,200 and display "22,200".
If CAREGIVER HHSIZE = 5, set 100% OF POVERTY GUIDELINE to $25,800 and display "25,800".
If CAREGIVER HHSIZE = 6, set 100% OF POVERTY GUIDELINE to $29,500 and display "29,500".
If CAREGIVER HHSIZE = 7, set 100% OF POVERTY GUIDELINE to $33,300 and display "33,300".
If CAREGIVER HHSIZE = or >8, set 100% OF POVERTY GUIDELINE to $37,000 and display "37,000".

QUESTION TEXT:

Was it less than or more than ${100% OF POVERTY GUIDELINE}?

CODES

1	LESS THAN	HI14
2	MORE THAN	HI14

HI13   **chi5inc400pv**   C5 HI13 INCOME CATEGORIES 400

DISPLAY INSTRUCTIONS:

Display for {400% OF POVERTY GUIDELINE} uses the following conditions:
If CAREGIVER HHSIZE = 1, set 400% OF POVERTY GUIDELINE = $43,200 and display "43,200".
If CAREGIVER HHSIZE = 2, set 400% OF POVERTY GUIDELINE to $58,400 and display "58,400".
If CAREGIVER HHSIZE = 3, set 400% OF POVERTY GUIDELINE = $73,200 and display "73,200".
If CAREGIVER HHSIZE = 4, set 400% OF POVERTY GUIDELINE = $88,800 and display "88,800".
If CAREGIVER HHSIZE = 5, set 400% OF POVERTY GUIDELINE = $103,200 and display "103,200".
If CAREGIVER HHSIZE = 6, set 400% OF POVERTY GUIDELINE = $118,000 and display "118,000".
If CAREGIVER HHSIZE = 7, set 400% OF POVERTY GUIDELINE = $133,200 and display "133,200".
If CAREGIVER HHSIZE = or > 8, set 400% OF POVERTY GUIDELINE = $148,000 and display "148,000".

QUESTION TEXT:

Was it less than or more than ${400% OF POVERTY GUIDELINE}?

CODES

1	LESS THAN
2	MORE THAN
	REFUSED
	DON'T KNOW

HI14   **chi5paymeds**   C5 HI14A CG PAY FOR MEDS

         chi5payinsur   C5 HI14B CG PAY FOR HEALTH INS

         chi5paymbdvc   C5 HI14C CG PAY FOR MOBILITY DEV

         chi5paysfty   C5 HI14D CG PAY FOR SAFETY EQUIP

         chi5payasdvc   C5 HI14E CG PAY FOR ASSIST DEVIC

         chi5payhmhlp   C5 HI14F CG PAY FOR IN HOME HELP

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.
If at HI14a, do not display question text in brackets.
Otherwise, display question text in brackets.

QUESTION TEXT:

{[} Family members often help each other out financially. In the last year have you used your own money to pay for... {]}

{variable text [a-f]}

RESPONSE [1] a. {SP}'s medications or medical care?
RESPONSE [2] b. {SP}'s Medicare premiums or copayments or other insurance premiums and copayments?
RESPONSE [3] c. mobility devices for {SP} such as walkers, canes, or wheelchairs?
RESPONSE [4] d. features that made {SP}'s home safer such as a railing or a ramp, grab bars in the bathroom, a seat for the shower or tub, or an emergency call system?
RESPONSE [5] e. any other assistive devices for {SP} that make it easier or safer for {him/her} to do activities or do them on {his/her} own? This includes devices to help {him/her} see, hear, reach, hold things, or pick things up.
RESPONSE [6] f. a paid in-home helper for {SP}?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
Display 'variable text' in the a-f sequence until all rows have been displayed.

BOX HI15   **BOX HI15**   NOT ON FILE

If HI14a-f = 2 (NO), RF, or DK, go to HI18.
Otherwise, go to HI15

HI15   **chi5pay1000**   C5 HI15 MORE THAN 1000 TO HELP

DISPLAY INSTRUCTIONS:

If HI4a = 1 (YES), display "{SP}'s medications or medical care".
If HI4b = 1 (YES), display "{SP}'s Medicare or other insurance premiums or copayments".
If HI4c = 1 (YES), display "the mobility devices".
If HI4d = 1 (YES), display "the features that made {SP}'s home safer".
If HI4e = 1 (YES), display "other assistive devices for {SP}".
If HI4f = 1 (YES), display "a paid in-home helper for {SP}".
If more than one item displayed, display "and" between each one".

QUESTION TEXT:

Altogether last year, would you say you paid more or less than $1,000 for {{SP}'s medications or medical care}{{SP}'s Medicare or other insurance premiums or copayments} {the mobility devices} {the features that made {SP}'s home safer} {other assistive devices for {SP}} {a paid in-home helper for {SP}}?

CODES

1	MORE THAN $1,000	
2	LESS THAN $1,000	HI17
	REFUSED	HI18
	DON'T KNOW	HI18

HI16   **chi5pay2000**   C5 HI16 MORE THAN 2000 TO HELP

QUESTION TEXT:

Was it more than $2,000?

CODES

1	YES	HI18
2	NO	HI18
	REFUSED	HI18
	DON'T KNOW	HI18

HI17   **chi5pay500**   C5 HI17 LESS THAN 500 TO HELP

QUESTION TEXT:

Was it less than $500?

CODES

1	YES	
2	NO	
	REFUSED	
	DON'T KNOW	

HI18   **chi5gifttosp**   C5 HI18 FINANCIAL GIFT TO SP

QUESTION TEXT:

Last year, ending December 31, 2010, did you give any financial help or gifts to {SP}?

CODES

1	YES	
2	NO	HI22
	REFUSED	HI22
	DON'T KNOW	HI22

HI19   chi5gift500   C5 HI19 GFT MOR OR LESS THAN 500

QUESTION TEXT:

For the year {CURRENT YEAR-1}, was that more or less than $500?

CODES

1	MORE THAN $500	
2	LESS THAN $500	HI21
	REFUSED	HI22
	DON'T KNOW	HI22

HI20   chi5gift1000   C5 HI20 GFT TO SP MOR THAN 1000

QUESTION TEXT:

Was that more than $1000?

CODES

1	YES	HI22
2	NO	HI22
	REFUSED	HI22
	DON'T KNOW	HI22

HI21   chi5gift100   C5 HI21 GFT TO SP LESS THAN 100

QUESTION TEXT:

Was that less than $100?

CODES

1	YES
2	NO
	REFUSED
	DON'T KNOW

HI22   chi5fromsp   C5 HI22 FINANCIAL GIFT FROM SP

DISPLAY INSTRUCTIONS:

Display "Last year" in bold underlined text.

QUESTION TEXT:

Last year, ending December 31, 2010, did you receive any financial help or gifts from {SP}?

CODES

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

HI23   **chi5frsp500**   C5 HI23 GFT FRM SP MOR LESS 500

QUESTION TEXT:

For the year {CURRENT YEAR -1}, was that more or less than $500?

CODES

1	MORE THAN $500	
2	LESS THAN $500	HI25
	REFUSED	SECTION CN
	DON'T KNOW	SECTION CN

HI24   **chi5frsp1000**   C5 HI24 GFT FRM SP MORE THN 1000

QUESTION TEXT:

Was that more than $1,000?

CODES

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

HI25   **chi5frsp100**   C5 HI25 GFT FRM SP LESS THN 100

QUESTION TEXT:

Was that less than $100?

CODES

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