

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
			<b>IRQ SPECIFICATIONS</b>  <u>CRITERIA</u> INTTYPE=ALL SPASTATUS=ALL SEASON=ALL SPPROXY=SP or PROXY Other: N/A  <u>PLACEMENT</u> Administer after END.		
IRCASEOK	IR1	no entry	THE COMMUNITY INTERVIEW FOR (SP) WAS CONDUCTED [WITH (PROXY NAME)] ON (INTERVIEW COMPLETION DATE).		SUM1-IRQINTRO
IRQINTRO	SUM1	code one	ARE THERE ANY THAT NEED TO BE ADDED OR DELETED FOR THE CURRENT ROUND?  PROBE FOR DETAILS IF NECESSARY.	(1) YES (2) NO (-8) DON'T KNOW (-9) REFUSED	(1) SUM2-IRQEDITTYPE (2) IR3-RRECHHELP
IRQEDITTYPE	SUM2	code one	DOES AN ITEM NEED TO BE ADDED OR DELETED?	(1) ADD AN ITEM (2) DELETE AN ITEM	SUM3-IRQITEMTYPE
IRQITEMTYPE	SUM3	code one	WHAT TYPE OF ITEM NEEDS TO BE [ADDED/DELETED]?	(1) A MEDICAL EVENT (2) A PRESCRIPTION DRUG (3) A HEALTH INSURANCE	(1) SUM4-IRQMETYPE (2) SUM10-IRQRXNAME (3) SUM16-IRQHITYPE
IRQMETYPE	SUM4	code one	WHAT TYPE OF MEDICAL EVENT WAS IT?	(1) DENTAL EVENT (2) INPATIENT EVENT (3) OUTPATIENT EVENT (4) MEDICAL PROVIDER EVENT (5) OTHER MEDICAL EVENT (6) INSTITUTIONAL EVENT (7) HOME HEALTH EVENT (8) EMERGENCY ROOM EVENT	SUM7-IRQDOCNAME
IRQDOCNAME	SUM7	verbatim	TYPE THE NAME OF THE DOCTOR OR HOSPITAL.	(1) CONTINUOUS ANSWER	SUM21-IRQDATEMM
IRQRXNAME	SUM10	verbatim	TYPE THE NAME OF THE PRESCRIPTION MEDICINE.	(1) CONTINUOUS ANSWER	SUM11-IRQRXFORM

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IRQRXFORM	SUM11	code one	IN WHAT FORM IS THE MEDICINE?	(01) PILLS (TABLETS, CAPSULES) (02) LIQUID (TO BE TAKEN ORALLY) (03) DROPS (EYE/EAR/NOSE) (04) OINTMENT, CREAM, LOTION (TOPICAL OR INTERNAL) (05) SUPPOSITORIES (06) AEROSOL/SPRAY, INHALANT, SOLUTIONS, DISKUS (07) SHAMPOO, SOAP (08) INJECTION (09) IV INJECTION (10) PATCHES (11) GEL OR JELLY (TOPICAL OR INTERNAL) (12) POWDER, GRANULES (91) OTHER (-8) DON'T KNOW	(01) SUM13-IRQSTRUNIT (02)SUM13-IRQSTRUNIT (03) SUM13-IRQSTRUNIT (04) SUM13-IRQSTRUNIT (05) SUM13-IRQSTRUNIT (06) SUM13-IRQSTRUNIT (07) SUM13-IRQSTRUNIT (08) SUM13-IRQSTRUNIT (09) SUM13-IRQSTRUNIT (10) SUM13-IRQSTRUNIT (11) SUM13-IRQSTRUNIT (12) SUM13-IRQSTRUNIT (91) SUM12-IRQRXFORMOTH (-8) SUM13-IRQSTRUNIT
IRQRXFORMOTH	SUM12	verbatim	OTHER (SPECIFY)	(1) CONTINUOUS ANSWER	
IRQSTRUNIT	SUM13	code one	WHAT WAS THE UNIT OF THE STRENGTH OF THE MEDICINE?	(01) MICROGRAMS (mcg, mc) (02) MILLIGRAMS (mg) (03) GRAINS (gr) (04) MILLIEQUIVALENTS (meq) (05) GRAMS (g, gm) (06) PERCENT (%) (07) INTERNATIONAL UNITS (IU) (08) UNITS (U) (91) OTHER (96) COMPOUND/MORE THAN ONE MEDICINE COMBINED DO NOT DISPLAY. (-8) Don't Know	
IRQSTRUNITOTH	SUM14	verbatim	OTHER (SPECIFY)	(1) CONTINUOUS ANSWER	
IRQTABTAKE	SUM15	numeric	HOW MANY [PILLS/SUPPOSITORIES] ARE TO BE TAKEN IN A DAY?	(1) CONTINUOUS ANSWER	SUM21-IRQDATEMM
IRQHITYPE	SUM16	code one	WHAT TYPE OF HEALTH INSURANCE PLAN NEEDS TO BE [ADDED/DELETED]?	(1) MEDICARE (2) MEDICARE MANAGED CARE PLAN (3) MEDICAID (4) TRICARE (5) PRIVATE PLAN (6) PUBLIC PLAN (OTHER THAN MEDICAID) (7) MEDICARE PRESCRIPTION DRUG PLAN	(1) SUM18-IRQHIPLANSTART (2) SUM17-IRQHINAME (3) SUM17-IRQHINAME (4) SUM18-IRQHIPLANSTART (5) SUM17-IRQHINAME (6) SUM17-IRQHINAME (7) SUM17-IRQHINAME

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IRQHINAME	SUM17	verbatim	WHAT IS THE NAME OF THE HEALTH INSURANCE PLAN?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	(1) SUM17-IRQHIPLANSTART (-8) SUM22-IRQENDLOOP (-9) SUM22-IRQENDLOOP
IRQHIPLANSTART	SUM18	date	ON WHAT DATE DID COVERAGE BEGIN FOR THIS HEALTH INSURANCE PLAN?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	SUM19-IRQHIPLANCOVER
IRQHIPLANCOVER	SUM19	code one	IS THE SP STILL COVERED BY THIS HEALTH INSURANCE PLAN AS OF THE DATE OF THIS INTERVIEW?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) SUM22-IRQENDLOOP (02) SUM20-IRQHIPLANEND (-8) SUM22-IRQENDLOOP (-9) SUM22-IRQENDLOOP
IRQHIPLANEND	SUM20	date	ON WHAT DATE DID COVERAGE STOP?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	SUM22-IRQENDLOOP
IRQDATEMM	SUM21	date	WHAT WAS THE DATE [OF THE MEDICAL EVENT/THE PRESCRIPTION WAS FILLED]?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	SUM21-IRQDATEDD
IRQDATEDD	SUM21	date	WHAT WAS THE DATE [OF THE MEDICAL EVENT/THE PRESCRIPTION WAS FILLED]?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	SUM21-IRQDATEYY
IRQDATEYY	SUM21	date	WHAT WAS THE DATE [OF THE MEDICAL EVENT/THE PRESCRIPTION WAS FILLED]?	(1) CONTINUOUS ANSWER (-8) DON'T KNOW (-9) REFUSED	SUM22-IRQENDLOOP
IRQENDLOOP	SUM22	code one	ARE THERE ANY MORE THAT NEED TO BE ADDED OR DELETED FOR THIS ROUND?	(1) YES (2) NO	(1) SUM2-EDITTYPE (2) IR3-RRECHHELP
RRECHHELP	IR3	yes/no	DID [(SP)/(PROXY NAME)] RECEIVE ANY HELP IN ANSWERING THE QUESTIONS?	(01) YES (02) NO	(01) IR4 - PERSON_HELPER (02) IR5 - RINFOSAT
IRHELPER	IR4	roster	WHO HELPED [(SP)/(PROXY NAME)] ANSWER THE QUESTIONS? SELECT OR ADD ONLY ONE PERSON.	(01) continuous answer	

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RINFOSAT	IR5	yes/no	DO YOU FEEL THAT THE INFORMATION PROVIDED BY [(SP)/(PROXY NAME)] WAS SATISFACTORY?	(01) YES (02) NO	(01) BOX IR3 (02) IR5OV - RINFOVB
RINFOVB	IR5OV	verbatim text	WHICH OF THE FOLLOWING REASONS BELOW BEST DESCRIBES WHY YOU THINK THAT THE INFORMATION PROVIDED WAS UNSATISFACTORY? SELECT ALL THAT APPLY.	(01) DON'T THINK RESPONDENT GAVE ACCURATE INFORMATION (02) DON'T THINK RESPONDENT GAVE INFORMATION (OMITTED EVENT(S) OR STATEMENTS(S) ETC.) (03) INFORMATION GIVEN BY THE RESPONDENT APPEARED TO BE CONTRADICTORY (ANSWERS DIDN'T ALIGN WITH STATEMENTS)	BOX IR3
	BOX IR3	routing	IF SP'S PREVIOUS ROUND INTERVIEW WAS IN A FACILITY, GO TO BOX IR3A. IF SP IS IN THE SUPPLEMENTAL SAMPLE, GO TO IR5C-INTVTIME. IF THIS IS AN EXIT CASE AND THE PREVIOUS ROUND INTERVIEW WAS NOT SKIPPED, GO TO IR5C - INTVTIME. ELSE GO TO IR5A - REFERCAL.		
REFERCAL	IR5A	verbatim text	DURING THE INTERVIEW, DID THE RESPONDENT/PROXY REFER TO ENTRIES MADE BY THE RESPONDENT OR THE PROXY IN A CALENDAR OR PLANNER?	(01) YES- PLANNER PROVIDED BY MCBS (02) YES- A PERSONAL CALENDAR OR PLANNER (INCLUDING PAPER OR DIGITAL CALENDAR OR PLANNER) (03) NO- DID NOT REFERENCE A CALENDAR OR PLANNER	BOX IR3A
	BOX IR3A	routing	IF INTTYPE IN(3,12) THEN GOTO IR5C-INTVTIME ELSE GO TO IR5B-STATEMENTTYPE		
STATEMENTTYPE	IR5B	code all	HOW DID YOU OBTAIN STATEMENT INFORMATION FOR THIS INTERVIEW? SELECT ALL THAT APPLY.	(01) FROM PAPER STATEMENT(S) (02) FROM ELECTRONIC STATEMENT(S) PRINTED BY RESPONDENT (03) FROM ELECTRONIC STATEMENT(S) VIEWED ON A COMPUTER OR OTHER ELECTRONIC DEVICE (04) FROM SOME OTHER WAY (05) NO STATEMENTS COLLECTED DURING THIS INTERVIEW	BOX IR3A1
	BOX IR3A1	routing	IF IR5B-STATEMENTTYPE INCLUDES (04) SOME OTHER WAY GOTO IR5B1-STATEMENTTYPEOTH, ELSE GOTO IR5C-INTVTIME.		

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STATEMENTTYPEOTH	IR5B1	verbatim text	PLEASE DESCRIBE THE WAY(S) YOU OBTAINED STATEMENT INFORMATION FOR THIS INTERVIEW.	(01) continuous answer	IR5C-INTVTIME
INTVTIME	IR5C	code one	HOW LONG WAS THIS INTERVIEW? INCLUDE ALL THE TIME YOU SPENT INTERVIEWING IN THE RESPONDENT/PROXY'S HOME (AND/OR ON THE PHONE WITH THE RESPONDENT/PROXY).	(01) LESS THAN 1 HOUR (02) FROM 1-2 HOURS (03) FROM 2-4 HOURS (04) MORE THAN 4 HOURS	(01) BOX IR3B (02) BOX IR3B (03) IR5D - LT_REASON (04) IR5D - LT_REASON
LT_REASON	IR5D	code all	WHY DO YOU THINK THIS INTERVIEW TOOK AS LONG AS IT DID? CHECK ALL THAT APPLY.	(01) HEAVY UTILIZATION (02) MANY STATEMENTS (03) STATEMENTS WERE DISORGANIZED (04) STATEMENTS WERE ELECTRONIC AND HARD TO ACCESS (05) R HAD QUESTIONS COMPREHENSION PROBLEMS (06) R WAS TALKATIVE/RAMBLING (07) MANY EXTERNAL INTERRUPTIONS (08) ALWAYS TAKES THIS LONG (91) OTHER	(01) BOX IR3B (02) BOX IR3B (03) BOX IR3B (04) BOX IR3B (05) BOX IR3B (06) BOX IR3B (07) BOX IR3B (08) BOX IR3B (91) IR5I - LT_OTHERWHY
LT_OTHERWHY	IR5I	no entry	PLEASE PROVIDE MORE INFORMATION BELOW ABOUT THE LENGTH OF THE INTERVIEW.		BOX IR3B
	BOX IR3B	routing	IF SP IS DECEASED, GO TO IR10. ELSE IF SP IS IN THE EXIT SAMPLE, GO TO IR7 - INTCOMM. ELSE IF (SP IS IN THE SUPPLEMENTAL SAMPLE) OR (SP'S PREVIOUS ROUND INTERVIEW WAS IN A FACILITY) OR (SP MOVED IN THE CURRENT ROUND) OR (IN THE MOST RECENT ROUND WHERE THE IRQ WAS COMPLETED, DRIVING DIRECTIONS WERE NOT REPORTED), GO TO IR6B - IRDRIVE. ELSE GO TO IR6C - IRDRIVEVB.		
IRDRIVE	IR6B	verbatim text	IF THERE ARE ANY INSTRUCTIONS THAT WOULD ASSIST AN INTERVIEWER NEXT ROUND IN REACHING THE RESPONDENT'S RESIDENCE (I.E. BUZZER DOES NOT WORK SO CALL, KNOCK ON BACK DOOR, ETC.) PLEASE WRITE THEM IN THE BOX BELOW. IF THERE ARE NONE, PLEASE SIMPLY HIT 'ENTER.'	(01) continuous answer	IR7-INTCOMM

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IRDRIVEVB	IR6C	verbatim text	(ENTER/REVIEW) THE INSTRUCTIONS FOR FINDING THE RESPONDENT'S RESIDENCE FOR THE NEXT INTERVIEW (DISPLAYED) IN THE TEXT BOX BELOW. (UPDATE OR REVISE AS NECESSARY.)	(01) continuous answer	IR7-INTCOMM
INTCOMM	IR7	yes/no	ARE THERE ANY (OTHER) COMMENTS YOU WOULD LIKE TO MAKE ABOUT THE RESPONDENT OR INTERVIEWING SITUATION (THAT COULD HELP THE NEXT INTERVIEWER COMPLETE THIS CASE)?	(01) YES (02) NO	(01) IR7OV - INTCVB (02) SAVEIRQ-IR10
INTCVB	IR7OV	verbatim text	ENTER THE COMMENTS YOU WOULD LIKE TO MAKE ABOUT THE RESPONDENT OR INTERVIEWING SITUATION. DO NOT INCLUDE COMMENTS HERE THAT YOU WANT THE DATA EDITING STAFF TO FIX.	(01) continuous answer	IR10 -SAVEIRQ
SAVEIRQ	IR10	no entry	IRQ SESSION IS COMPLETE.		BOX IREND
	BOX IREND	routing	RETURN TO IMS		