Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
			USQ-PPIC SPECIFICATIONS CRITERIA INTTYPE=C001, C002, C003, C004, C005, C006 SPAISTATUS=1/Alive and Not Institutionalized or 4/Deceased-Died in Institution SEASON=FALL SPPROXY=SP or PROXY Other: N/A PLACEMENT Administer after SCQ.		
PLACEPAR	US1	yes/no	Is there a particular medical person or a clinic [you/(SP)] usually [go/goes] to when [you are/he is/she is] sick or for advice about [your/his/her] health?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) US2 - PLACEKND (02) US39 - NUSNOTSK (-8) PP57-RATECARE (-9) PP57-RATECARE
PLACEKND	US2	code one	What kind of place [do you/does (SP)] usually go to when [you are/he is/she is] sick or for advice about [your/his/her] health -- is that a managed care plan or HMO center, a clinic, a medical provider's office, a hospital, or some other place? IF CLINIC, ASK: Is it a hospital outpatient clinic, or some other kind of clinic? IF SOME OTHER PLACE, ASK: Where is this?	(01) DOCTOR'S OFFICE OR GROUP PRACTICE (02) MEDICAL CLINIC (03) MANAGED CARE PLAN CENTER/HMO (04) NEIGHBORHOOD/FAMILY HEALTH CENTER (05) FREESTANDING SURGICAL CENTER (06) RURAL HEALTH CLINIC (07) COMPANY CLINIC (08) OTHER CLINIC (09) WALK-IN URGENT CENTER (10) DOCTOR COMES TO SP'S HOME (11) HOSPITAL EMERGENCY ROOM (12) HOSPITAL OUTPATIENT DEPARTMENT/CLINIC (13) VA FACILITY (14) MENTAL HEALTH CENTER (91) OTHER (-8) DON'T KNOW (-9) REFUSED	(01) BOX USB (02) BOX USB (03) US3A - CLNAME (04) US3A - CLNAME (05) US3A - CLNAME (06) US3A - CLNAME (07) US3A - CLNAME (08) US3A - CLNAME (09) US3A - CLNAME (10) US5A - MDNAME (11) US3A - CLNAME (12) US3A - CLNAME (13) US3A - CLNAME (14) US3A - CLNAME (91) US2 - PLACEOS (-8) US3A - CLNAME (-9) US3A - CLNAME
PLACEOS	US2	text	OTHER (SPECIFY)	(01) CONTINUOUS ANSWER	US3A - CLNAME
	BOX USB	routing	IF SP WAS COVERED BY A MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO US2A - PLACEMCP. ELSE IF US2 - PLACEKND = 1/DoctorsOffice, GO TO US5A - MDNAME. ELSE GO TO US3A - CLNAME.		

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
PLACEMCP	US2A	yes/no	Is this (medical provider/medical clinic) associated with (your/his/her) [READ MANAGED CARE PLAN NAME(S) BELOW] plan?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	BOX USC
	BOX USC	routing	IF US2 - PLACEKND = 1/DoctorsOffice, GO TO US5A - MDNAME. ELSE GO TO US3A - CLNAME.		
CLNAME	US3A	verbatim text	What is the complete name of the [place/managed care plan or HMO center/(US2 RESPONSE)] that [you go to/(SP) goes to)? [ENCOURAGE THE RESPONDENT TO REFER TO A BILL, TELEPHONE DIRECTORY, APPOINTMENT CARD, ETC., FOR COMPLETE INFORMATION.]	(01) continuous answer	US4 - USUALDOC
USUALDOC	US4	yes/no	Is there a particular medical provider [you usually see/(SP) usually sees] at this [place/managed care plan or HMO center/(US2 RESPONSE)] ?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) US5A - MDNAME (02) BOX US1 (-8) US8 - GETUSHOW (-9) US8 - GETUSHOW
MDNAME	US5A	verbatim text	What is the complete name of that medical provider? [ENCOURAGE THE RESPONDENT TO REFER TO A BILL, TELEPHONE DIRECTORY, APPOINTMENT CARD, ETC., FOR COMPLETE INFORMATION.]	(01) CONTINUOUS ANSWER	US5B-MDSEX
MDSEX	US5B	code one	Is (US5A PROVIDER NAME) a male or female?	(01) MALE (02) FEMALE (-8) DON'T KNOW (-9) REFUSED	US6A - MDSPEC

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
MDSPEC	US6A	code one	SHOW CARD AC1 What is (US5A PROVIDER NAME)'s specialty? [PROBE FOR RESPONDENT TO SELECT A CHOICE FROM THE CARD IF THEY MENTION A 'GENERIC' SPECIALITY LIKE 'HEART DOCTOR.' IF RESPONDENT ONLY GIVES A 'GENERIC' SPECIALTY AND THE GENERIC WORD IS SHOWN IN PARENTHESES FOLLOWING ONE OF THE RESPONSES, SELECT THE RESPONSE CATEGORY FOR THAT SPECIALTY (E.G., 'CARDIOLOGY'). OTHERWISE SELECT 'OTHER DR SPECIALTY'.]	(01) ALLERGY/IMMUNOLOGY (02) ANESTHESIOLOGY (03) CARDIOLOGY (HEART) (05) DERMATOLOGY (SKIN) (07) ENDOCRINOLOGY/ METABOLISM (DIABETES, THYROID) (08) FAMILY PRACTICE (09) GASTROENTEROLOGY (10) GENERAL PRACTICE (11) GENERAL SURGERY (12) GERIATRICS (ELDERLY) (13) GYNECOLOGY - OBSTETRICS (14) HEMATOLOGY (BLOOD) (15) HOSPITAL RESIDENCE (16) INTERNAL MEDICINE (INTERNIST) (17) NEPHROLOGY (KIDNEYS) (18) NEUROLOGY (19) NUCLEAR MEDICINE (20) ONCOLOGY (TUMORS, CANCER) (21) OPHTHALMOLOGY (EYES) (22) ORTHOPEDICS (24) OSTEOPATHY (DO) (25) OTORHINOLARYNGOLOGY (EAR, NOSE, THROAT) (26) PATHOLOGY (27) PHYS MED/REHAB (28) PLASTIC SURGERY (29) PROCTOLOGY (30) PSYCHIATRY/PSYCHIATRIST	(01)-(05) BOX US1 (07)-(35) BOX US1 (91) US6A - MDSPECOS (-8) BOX US1 (-9) BOX US1
				(31) PULMONARY (LUNGS) (32) RADIOLOGY (33) RHEUMATOLOGY (ARTHRITIS) (34) THORACIC SURGERY (CHEST) (35) UROLOGY (91) OTHER DR SPECIALTY (-8) DON'T KNOW (-9) REFUSED	
MDSPECOS	US6A	text	OTHER DR SPECIALTY (SPECIFY) [PROBE FOR RESPONDENT TO SELECT A CHOICE FROM THE CARD IF THEY MENTION A 'GENERIC' SPECIALITY LIKE 'HEART DOCTOR.' IF RESPONDENT ONLY GIVES A 'GENERIC' SPECIALTY AND THE GENERIC WORD IS SHOWN IN PARENTHESES FOLLOWING ONE OF THE RESPONSES, SELECT THE RESPONSE CATEGORY FOR THAT SPECIALTY (E.G., 'CARDIOLOGY'). OTHERWISE SELECT 'OTHER DR SPECIALTY'.]	(01) CONTINUOUS ANSWER	BOX US1
	BOX US1	routing	IF US2 - PLACEKND = 10/AtHome, GO TO US15 - USHOWLNG. ELSE GO TO US8 - GETUSHOW.		

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
GETUSHOW	US8	code one	How [do you/does (SP)] usually get to [(US5A PROVIDER NAME)'S office/(US3A PROVIDER NAME)]? [EXPLAIN IF NEEDED: [Do you/Does (SP)] get there by walking, driving, being driven by someone else, by ambulance or other special vehicle for disabled people, by taxi, other public transportation, or some other way?]	(01) WALKING (02) DRIVING (03) BEING DRIVEN (04) AMBULANCE OR OTHER SPECIAL VEHICLE (05) TAXI (06) OTHER PUBLIC TRANSPORTATION (07) DR. USUALLY COMES TO HOME (91) SOME OTHER WAY (-8) DON'T KNOW (-9) REFUSED	(01) US9 - GETUSUNT (02) US9 - GETUSUNT (03) US9 - GETUSUNT (04) US9 - GETUSUNT (05) US9 - GETUSUNT (06) US9 - GETUSUNT (07) US15 - USHOWLNG (91) US8 - GETUSOS (-8) US15 - USHOWLNG (-9) US15 - USHOWLNG
GETUSOS	US8	verbatim text	SOME OTHER WAY (SPECIFY)	(01) continuous answer	US9 - GETUSUNT
GETUSUNT	US9	code one	About how long does it usually take for [you/(SP)] to get there?	(01) HOURS ONLY (02) MINUTES ONLY (03) HOURS AND MINUTES (-8) DON'T KNOW (-9) REFUSED	(01) US9 - GETUSHRS (02) US9 - GETUSMIN (03) US9 - GETUSHRS (-8) US10 - ACCOMPUS (-9) US10 - ACCOMPUS
GETUSHRS	US9	numeric		(01) CONTINUOUS ANSWER	If US9 GETUSUNT=3/HoursAndMinutes go to US9 - GETUSMIN. Else go to US10 - ACCOMPUS.
GETUSMIN	US9	numeric		(01) CONTINUOUS ANSWER	US10 - ACCOMPUS
ACCOMPUS	US10	yes/no	[Do you/Does (SP)] usually have someone accompany [you/him/her] there?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) US11 - PERSON_USUALGO (02) US15 - USHOWLNG (-8) US15 - USHOWLNG (-9) US15 - USHOWLNG
PERSON_USUALGO	US11	roster	Who usually goes with [you/(SP)]? SELECT OR ADD ONLY ONE PERSON	(01) CONTINUOUS ANSWER	US11A1 - PERSWITH
PERSWITH	US11A1	code one	How often (are you/is that person) with [you/(SP)] while [you/(SP)] (see/sees) the medical provider or other medical person? Would you say always, sometimes, or never?	(01) ALWAYS (02) SOMETIMES (03) NEVER (-8) DON'T KNOW (-9) REFUSED	US11AA - ACCREAS

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ACCREAS	US11AA	code all	What are the reasons [you accompany (SP)/this person accompanies you/this person accompanies (SP)] there? What (do you/does this person) do? [PROBE: Any other reason?] CHECK ALL THAT APPLY.	(01) WRITES DOWN WHAT DOCTOR SAYS/RECORDS INSTRUCTIONS/TAKES NOTES/REMEMBERS (02) GIVES INFORMATION/EXPLAINS SP'S MEDICAL CONDITION OR NEEDS TO THE DOCTOR (03) EXPLAINS DOCTOR'S INSTRUCTIONS TO SP (04) ASKS QUESTIONS (05) TRANSLATES LANGUAGE (06) SCHEDULES APPOINTMENTS (07) NOTHING/KEEPS SP COMPANY/SITS WITH SP/MORAL SUPPORT (08) TRANSPORTATION (09) SP NEEDS PHYSICAL ASSISTANCE (91) OTHER (-8) DON'T KNOW (-9) REFUSED	(01) US15 - USHOWLNG (02) US15 - USHOWLNG (03) US15 - USHOWLNG (04) US15 - USHOWLNG (05) US15 - USHOWLNG (06) US15 - USHOWLNG (07) US15 - USHOWLNG (08) US15 - USHOWLNG (09) US15 - USHOWLNG (91) US11AA - ACCOTHOS (-8) US15 - USHOWLNG (-9) US15 - USHOWLNG
ACCOTHOS	US11AA	verbatim text	OTHER (SPECIFY)	(01) continuous answer	US15 - USHOWLNG
USHOWLNG	US15	code one	SHOW CARD US1 How long [have you/has (SP)] been [seeing (US5A PROVIDER NAME)/going to (US3A PROVIDER NAME)]?	(01) LESS THAN 1 YEAR (02) 1 YEAR TO LESS THAN 3 YEARS (03) 3 YEARS TO LESS THAN 5 YEARS (04) 5 YEARS TO LESS THAN 10 YEARS (05) 10 YEARS OR MORE (-8) DON'T KNOW (-9) REFUSED	(01) US17 - PREVMEDC (02) PP1- REMINDAPPT (03) PP1- REMINDAPPT (04) PP1- REMINDAPPT (05) PP1- REMINDAPPT (-8) PP1- REMINDAPPT (-9) PP1- REMINDAPPT
PREVMEDC	US17	yes/no	Before [you/(SP)] started [seeing (US5A PROVIDER NAME)/going to (US3A PROVIDER NAME)], had [you/(SP)] usually been going to some other place or seeing some other medical provider for medical care?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP1- REMINDAPPT
REMINDAPPT	PP1	yes/no	The next questions ask about the care [you/(SP)] received from [(US5A PROVIDER NAME)'S office/(US3A PROVIDER NAME)]. Some offices remind patients about appointments. Before [your/(SP)'s] most recent visit with [(US5A PROVIDER NAME)/(US3A PROVIDER NAME)], did [you/he/she] get a reminder from [(US5A PROVIDER NAME)'S office /(US3A PROVIDER NAME)] about the appointment?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP2- PREPARE

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
PREPARE	PP2	yes/no	Before [your/(SP)'s] most recent visit with [(US5A PROVIDER NAME)/(US3A PROVIDER NAME)], did [you/he/she] get instructions telling [you/him/her] what to expect or how to prepare?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP3- APPTCANCEL
APPTCANCEL	PP3	code one	Now I'm going to read you questions about the medical providers [you have/SP has] seen in the last six months, that is since {CurrentMonth – 6}. In the last six months, how often has [(US5A PROVIDER NAME)/(US3A PROVIDER NAME)] canceled or changed the date of an appointment?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (05) HAS NOT SEEN MEDICAL PROVIDER IN LAST 6 MONTHS (-8) Don't Know (-9) Refused	(01) PP4- APPTMISS (02) PP4- APPTMISS (03) PP4- APPTMISS (04) PP4- APPTMISS (05) BOX PP14-PPVALUE (-8) PP4- APPTMISS (-9) PP4- APPTMISS
APPTMISS	PP4	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] People have busy lives and miss appointments for many reasons. In the last six months, how often did [you/(SP)] miss an appointment with [(US5A PROVIDER NAME)/(US3A PROVIDER NAME)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	(01) PP6- PPREPEAT (02) PP5- APPTNEW (03) PP5- APPTNEW (04) PP5- APPTNEW (-8) PP6- PPREPEAT (-9) PP6- PPREPEAT
APPTNEW	PP5	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, when [you/(SP)] missed an appointment with US5A PROVIDER NAME/US3A PROVIDER NAME), how often did someone from [(US5A PROVIDER NAME)'S office/(US3A PROVIDER NAME)] contact [you/him/her] to make a new appointment?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP6- PPREPEAT
PPREPEAT	PP6	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [you/(SP)] have to repeat information that [you/(SP)] had already provided during the same visit?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP7- PPINFO

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
PPINFO	PP7	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] seem to know the important information about [your/(SP)'s] medical history?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP8- DOCLIFE
DOCLIFE	PP8	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] ask about things in [your/(SP)'s] work or life at home that affect [your/(SP)'s] life?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP9- EXPLAINEASY
EXPLAINEASY	PP9	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] explain things in a way that was easy [for (SP)] to understand?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP10- PPLISTEN
PPLISTEN	PP10	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] listen carefully to [you/(SP)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP11- PPRESPECT
PPRESPECT	PP11	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] show respect for what [you/(SP)] had to say?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP12- ENOUGHTIME

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ENOUGHTIME	PP12	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] spend enough time with [you/(SP)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP13- PPIDEAS
PPIDEAS	PP13	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] ask whether [you/(SP)] had ideas about how to improve [your/his/her] health?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP14- PPVALUE
PPVALUE	PP14	code one	How would you rate [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] knowledge of [your/(SP)'s] values and beliefs that are important to [your/his/her] health care?	(01) POOR (02) FAIR (03) GOOD (04) EXCELLENT (-8) Don't Know (-9) Refused	BOX PP1
	BOX PP1	routing	IF PP3-APPTCANCEL=5 GO TO US27-USKEVRY ELSE GO TO PP15-SETGOAL		
SETGOAL	PP15	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] talk with [you/(SP)] about setting goals for [your/his/her] health? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP16- MEETGOAL (02) PP16- MEETGOAL (03) US27-USCKEVRY (-8) US27-USCKEVRY (-9)-US27-USCKEVRY

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
MEETGOAL	PP16	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did the care [you/(SP)] received from [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] help [you/(SP)] meet [your/his/her] goals? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	US27-USCKEVRY
USCKEVRY	US27	list	SHOW CARD UX Now I am going to read some statements people have made about their health care. Think about the care [you receive/(SP) receives] from (US5A PROVIDER NAME/US3A PROVIDER NAME). For each statement, please tell me whether you strongly agree, agree, disagree, or strongly disagree. [(US5A PROVIDER NAME) is/The medical providers at (US3A PROVIDER NAME) are] very careful to check everything when examining (you/him/her).	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US27 - USCOMPET
USCOMPET	US27	list	SHOW CARD US3 [(US5A PROVIDER NAME) is/The medical providers at (US3A PROVIDER NAME) are] competent and well-trained.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US27-USUNWRNG
USUNWRNG	US27	list	SHOW CARD US3 [(US5A PROVIDER NAME) has/The medical providers at (US3A PROVIDER NAME) have] a complete understanding of the things that are wrong with [you/him/her].	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US27 - USHURRY

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
USHURRY	US27	list	SHOW CARD US3 [(US5A PROVIDER NAME) often seems/The medical providers at (US3A PROVIDER NAME)]) often (seem/seems)] to be in a hurry.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US32 - USEXPPRB
USEXPPRB	US32	list	SHOW CARD US3 [Think about the care [you/(SP)] [receive/receives] from [(US5A PROVIDER NAME)/(US3A PROVIDER NAME)].] /[(US5A PROVIDER NAME) often does/The medical providers at (US3A PROVIDER NAME)]) often (does/do)] not explain (your/his/her) medical problems to (you/him/her).	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US32 - USDISCUS
USDISCUS	US32	list	SHOW CARD US3 [You/(SP)] often (have/has) health problems that should be discussed but are not.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US32 - USFAVOR
USFAVOR	US32	list	SHOW CARD US3 [(US5A PROVIDER NAME) often acts/The medical providers at (US3A PROVIDER NAME) often act] as though [(he/she) was/they were] doing [you/(SP)] a favor by talking to (you/him/her).	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US32 - USTELALL
USTELALL	US32	list	SHOW CARD US3 [(US5A PROVIDER NAME) tells/The medical providers at (US3A PROVIDER NAME) tell] (you/him/her) all (you want/he wants/she wants) to know about (your/his/her) condition and treatment.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US32 - USANSQUX

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
USANSQUX	US32	list	SHOW CARD US3 [(US5A PROVIDER NAME) answers/The medical providers at (US3A PROVIDER NAME) answer] all (your/his/her) questions.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US37 - USCONFID
USCONFID	US37	list	SHOW CARD US3 [Think about the care [you/(SP)] (receive/receives) from (US5A PROVIDER NAME/US3A PROVIDER NAME).] [You have/(SP) has] great confidence in (US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)].	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	US37 - USDEPEND
USDEPEND	US37	list	SHOW CARD US3 [You depend/(SP) depends)] on [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] in order to feel better both physically and emotionally.	(01) STRONGLY AGREE (02) AGREE (03) DISAGREE (04) STRONGLY DISAGREE (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	BOX PP1A
	BOX PP1A	routing	IF PP3-APPTCANCEL=5 GO TO US371-RECORDNA ELSE GO TO PP17-OSTAFF		
OSTAFF	PP17	yes/no	People often get instructions about their health from more than one person in the same office, such as other medical providers, nurses, nutritionists, and social workers. [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [you/(SP)] get any instructions about your health from any other staff [in (US5A PROVIDER NAME)'s office/ at (US3A PROVIDER NAME)]?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP18- OSAWARE (02) PP21- OSTEST (-8) PP21- OSTEST (-9) PP21- OSTEST

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
OSAWARE	PP18	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did these other staff seem up-to-date about the care [you were/(SP) was] receiving from [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP19- OSCARE
OSCARE	PP19	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did these other staff talk with [you/(SP)] about care [you/he/she] [were/was] receiving from [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP20- OSINFO
OSINFO	PP20	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did these other staff seem to know the important information about [your/(SP)'s] medical history?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP21- OSTEST
OSTEST	PP21	yes/no	The next set of questions ask about the care you received from [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office. [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office order a blood test, x-ray, or other test for [you/(SP)]?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP22- OSFOLLOWUP (02) PP25- PPHARD (-8) PP25- PPHARD (-9) PP25 - PPHARD

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
OSFOLLOWUP	PP22	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, when [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone from [his/her/their] office ordered a blood test, x-ray, or other test for [you/(SP)], how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone from [his/her/their] office	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP23- REQUEST
REQUEST	PP23	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [you/(SP)] have to request [your/his/her] test results before [you/he/she] got them?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP24- TESTCLEAR
TESTCLEAR	PP24	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often were [your/(SP)'s] test results presented in a way that was easy to understand?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP25- PPHARD
PPHARD	PP25	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, were there things that made it hard for [you/(SP)] to take care of your health? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP26- ASKHARD (02) PP26 - ASKHARD (03) PP28- PPIDENTIFY (-8) PP28- PPIDENTIFY (-9) PP28- PPIDENTIFY
ASKHARD	PP26	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office ask you about these things that made it hard for [you/(SP)] to take care of [your/his/her] health?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP27- PLANHARD

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
PLANHARD	PP27	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did you and [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office come up with a plan to help [you/(SP)] deal with the things that make it hard for [you/(SP)] to take care of [your/his/her] health? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP28- PPIDENTIFY
PPIDENTIFY	PP28	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office help you identify the most important things for [you/(SP)] to do for [your/his/her] health?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP29- PPSERVICES
PPSERVICES	PP29	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [you/(SP)] need services at home to help [you/him/her] take care of [your/his/her] health?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP30- HELPGET (02) PP31- PPINSTRUCTIONS (-8) PP31- PPINSTRUCTIONS (-9) PP31- PPINSTRUCTIONS
HELPGET	PP30	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office help [you/(SP)] get these services at home to take care of [your/his/her] health?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP31- PPINSTRUCTIONS
PPINSTRUCTIONS	PP31	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office give [you/(SP)] instructions about how to take care of [your/his/her] health?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP32- PPFOLLOWUP (02) PP34- KNOWASK (-8) PP34- KNOWASK (-9) PP34- KNOWASK

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
PPFOLLOWUP	PP32	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often [were you/was (SP)] able to follow these instructions about taking care of [your/his/her] health?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP33- INSTUHELP
INSTUHELP	PP33	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did the instructions [you/(SP)] received help [you/him/her] take care of [your/his/her] health?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP34- KNOWASK
KNOWASK	PP34	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, if [you /(SP)] had any trouble taking care of [your/his/her] health at home, would [you/he/she] know who to ask for help? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP35- PPMED
PPMED	PP35	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [you/(SP)] take any prescription medicine? [THIS IS DIFFERENT FROM THE PRESCRIPTION DRUG WHERE WE ASK IF THE R HAD ANY PRESCRIPTIONS FILLED]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP36- HOWMED (02) PP39-CONTACTBW (-8) PP39-CONTACTBW (-9) PP39-CONTACTBW
HOWMED	PP36	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office talk with [you/(SP)] about how [you were/he was/she was] supposed to take [your/his/her] medicine?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP37- ASPRESCRIBED

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ASPRESCRIBED	PP37	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] There are many reasons why people may not always be able to take their medicines as prescribed. In the last six months, how often [were you/was (SP)] able to take [your/his/her] medicine as prescribed?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP38- REACTION
REACTION	PP38	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office talk with [you/(SP)] about what to do if [you have/he has/she has] a bad reaction to [your/his/her] medicine?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP39- CONTACTBW
CONTACTBW	PP39	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, how often did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office contact [you/(SP)] between visits to see how [you were/he was/she was] doing?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP40- MEDQAFTER
MEDQAFTER	PP40	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [you/(SP)] try to contact [(US5A PROVIDER NAME)'s office/(US3A PROVIDER NAME)] with a medical question after regular office hours?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP41- QTIMELY (02) PP42- SPCLCARE (-8) PP42- SPCLCARE (-9) PP42- SPCLCARE
QTIMELY	PP41	code one	SHOW CARD US2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, when [you/(SP)] tried to contact [(US5A PROVIDER NAME)'s office/(US3A PROVIDER NAME)] after regular office hours, how often did [you/he/she] get an answer to [your/his/her] medical question in a timely manner?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP42-SPCLCARE

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
SPCLCARE	PP42	yes/no	SHOW CARD AC1 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] Specialists are medical providers who specialize in one area of health care. This card lists some examples of specialists. In the last six months, did [you/(SP)] receive care from any specialists outside the office of [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP43- DRINFORMED (02) PP50- ADMITHOS (-8) PP50 - ADMITHOS (-9) PP50 - ADMITHOS
DRINFRMD	PP43	code one	SHOW CARD US2 In general, how often (does/do) [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] seem informed and up-to-date about the care [you/(SP)] (get/gets) from specialists?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP44- REMINDDR
REMINDDR	PP44	code one	SHOW CARD US2 In general, how often (do/does) [you/(SP)] have to remind [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] about care [you/(SP)] (receive/receives) from specialists?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP45- SPCLSTPM
SPCLSTPM	PP45	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did any specialists outside the [office of (US5A PROVIDER NAME)/(US3A PROVIDER NAME)] prescribe medicine for [you/(SP)]?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP46- TALKPMS (02) PP47- SPLKNOW (-8) PP47 -SPLKNOW (-9) PP47- SPLKNOW
TALKPMS	PP46	code one	SHOW CARD US2 In general, how often (does/do) [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] talk with [you/(SP)] about the medicines prescribed by these specialists?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	US37E1-SPCLNAME

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
SPCLNAME	US37E1	verbatim text	The next questions ask about care [you/(SP)] received from the specialist [you/he/she] saw most often in the last six months outside the [office of (US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]. [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] First, what is the name of the specialist [you/(SP)] saw most often in the last six months?	(01) continuous answer (-8) DON'T KNOW (-9) REFUSED	US37E2-SPCLSEX
SPCLSEX	US37E2	code one	Is [(US37E1 PROVIDER NAME)/the specialist you saw most often in the last six months] a male or female?	(01) MALE (02) FEMALE (-8) DON'T KNOW (-9) REFUSED	PP47- SPLKNOW
SPLKNOW	PP47	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] The next questions ask about care [you/(SP)] received from the specialist [you/he/she] saw most often in the last six months outside the [office of (US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]. When [you see/(SP) sees] [(US37E1-SPCLNAME)/this specialist], does [he/she/he or she] seem to know enough information about [your/his/her] medical history? [IF YES, THEN PROBE: Would you say definitely yes or	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP48- SPLREPEAT
SPLREPEAT	PP48	code one	SHOW CARD US2 When [you see/(SP) sees] [(US37E1-SPCLNAME)/this specialist], how often [do you/does he/does she] have to repeat information that [you have/he has/she has] already given to [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)]?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP49- SPLKNTEST
SPLKNTEST	PP49	code one	SHOW CARD US2 When [you see/(SP) sees] [(US37E1-SPCLNAME)/this specialist], how often does [he/she/he or she] seem to know [your/(SP)'s] important test results from other providers?	(01) NEVER (02) SOMETIMES (03) USUALLY (04) ALWAYS (-8) Don't Know (-9) Refused	PP50-ADMITHOS

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ADMITHOS	PP50	yes/no	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, [were you/was (SP)] admitted to a hospital overnight or longer?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP51- HOSFLWUP (02) PP57- RATECARE (-8) PP57- RATECARE (-9) PP57- RATECARE
HOSFLWUP	PP51	yes/no	After [your/(SP)'s] most recent hospital stay, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office contact [you/him/her] to see how [you were/he was/she was] doing?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP52- HOSMED
HOSMED	PP52	yes/no	After [your/(SP)'S] most recent hospital stay, [were you/was (SP)] prescribed any medicines?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP53- HOSFOLLOWUP (02) PP54- HOSINSTU (-8) PP54- HOSINSTU (-9) PP54- HOSINSTU
HOSFOLLOWUP	PP53	yes/no	After (your/(SP)'s)] most recent hospital stay, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] or someone in [his/her/their] office contact [you/SP] to check if [you were/he was/she was] able to follow instructions about any medicines [you were/he was/she was] prescribed?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP54- HOSINSTU
HOSINSTU	PP54	yes/no	After (your/(SP)'s] most recent hospital stay, (were you/was he/was she] given instructions about caring for [yourself/himself/herself] at home?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP55- INSTUEASY (02) PP56- HOSINFO (-8) PP56- HOSINFO (-9) PP56- HOSINFO
INSTUEASY	PP55	code one	After [your/(SP)'s] most recent hospital stay, were the instructions [you were/(SP) was] given easy to understand? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP56- HOSINFO
HOSINFO	PP56	code one	After (your/(SP)'s) most recent hospital stay, did [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] seem to know the important information about this hospital stay? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP57- RATECARE

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
RATECARE	PP57	code one	SHOW CARD PP1 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all [your/(SP)'s) health care in the last six months?	(00) 0 WORST HEALTH CARE POSSIBLE (01) 1 (02) 2 (03) 3 (04) 4 (05) 5 (06) 6 (07) 7 (08) 8 (09) 9 (10) 10 BEST HEALTH CARE POSSIBLE	PP58- RATEMANAGE
RATEMANAGE	PP58	code one	SHOW CARD PP2 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] People sometimes need to manage their medical care by making appointments with multiple providers, following their instructions, and taking medicines as prescribed. Using any number from 0 to 10, where 0 is hard and 10 is easy, what number would you use to rate how easy it was for [you/(SP)] to manage [your/his/her] medical care in the last six months?	(00) 0 HARD TO MANAGE (01) 1 (02) 2 (03) 3 (04) 4 (05) 5 (06) 6 (07) 7 (08) 8 (09) 9 (10) 10 EASY TO MANAGE	PP59- DOCKNOWALL
DOCKNOWALL	PP59	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, was there one provider who knew about all [your/(SP)'s] medical care needs? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP60- KNOWMEDS
KNOWMEDS	PP60	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, was there one provider who knew about all the medicines [you were/(SP) was] taking? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP61- KNOWPERSON

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
KNOWPERSON	PP61	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, was there one provider who knew [you/(SP)] well as a person? [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	PP62- PROB_INFO
PROB_INFO	PP62	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] The next questios are about problems you might have had with your health care. SHOWCARD PP3 In the last six months, how much of a problem was each of these to [you/(SP)]? Lack of information about [your/(SP)'s] medical conditions?	(01) NOT A PROBLEM AT ALL (02) A SMALL PROBLEM (03) A MODERATE PROBLEM (04) A BIG PROBLEM (05) A VERY BIG PROBLEM (-8) DON'T KNOW (-9) REFUSED	PP63- PROB_TRMT
PROB_TRMT	PP63	code one	SHOWCARD PP3 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] [IF NEEDED: In the last six months, how much of a problem was each of these to [you/(SP)]?] Lack of information about treatment options?	(01) NOT A PROBLEM AT ALL (02) A SMALL PROBLEM (03) A MODERATE PROBLEM (04) A BIG PROBLEM (05) A VERY BIG PROBLEM (-8) DON'T KNOW (-9) REFUSED	PP64- PROB_CNCRNS
PROB_CNCRNS	PP64	code one	SHOWCARD PP3 [IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] [IF NEEDED: In the last six months, how much of a problem was each of these to [you/(SP)]?] Bringing up concerns about [your/(SP)'S] health or health care with [your/his/her] providers?	(01) NOT A PROBLEM AT ALL (02) A SMALL PROBLEM (03) A MODERATE PROBLEM (04) A BIG PROBLEM (05) A VERY BIG PROBLEM (-8) DON'T KNOW (-9) REFUSED	PP65- ASST_MED

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ASST_MED	PP65	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did [you/(SP)] ever need assistance with the following? Taking medicines [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP65A (02) PP65A (03) PP66-ASST_MNGE (-8) PP66-ASST_MNGE (-9) PP66-ASST_MNGE
ASST_MED1	PP65A	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did one or more friends or relatives help [you/(SP)] with taking medicines?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP66-ASST_MNGE
ASST_MNGE	PP66	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] [IF NEEDED: In the last six months, did [you/(SP)] ever need assistance with the following?] Making medical-related appointments [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP66A (02) PP66A (03) PP67- ASST_TRANSPORT (-8) PP67- ASST_TRANSPORT (-9) PP67- ASST_TRANSPORT
ASST_MNGE1	PP66A	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did one or more friends or relatives help [you/(SP)] with making medical-related appointments?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP67- ASST_TRANSPORT
ASST_TRANSPORT	PP67	code one	[IF NEEDED: In the last six months, did [you/(SP)] ever need assistance with the following?] Getting to or from a medical appointment [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP67A (02) PP67A (03) PP68- ASST_UNDSTND (-8) PP68- ASST_UNDSTND (-9) PP68- ASST_UNDSTND

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
ASST_TRANSPORT1	PP67A	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did one or more friends or relatives help [you/(SP)] with getting to or from a medical appointment?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	PP68- ASST_UNDSTND
ASST_UNDSTND	PP68	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] [IF NEEDED: In the last six months, did [you/(SP)] ever need assistance with the following?] Understanding information from a health care provider [IF YES, THEN PROBE: Would you say definitely yes or somewhat yes?]	(01) YES, DEFINITELY (02) YES, SOMEWHAT (03) NO (-8) DON'T KNOW (-9) REFUSED	(01) PP68A (02) PP68A (03) PP70- AGREE_INTRO (-8) PP70- AGREE_INTRO (-9) PP70- AGREE_INTRO
ASST_UNDSTND1	PP68A	code one	[IF NEEDED: This question is about the last six months, that is since {CurrentMonth – 6}.] In the last six months, did one or more friends or relatives help [you/(SP)] with understanding information from a health care provider?	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	US37I-RECORDNA
RECORDNA	US37I	code one	Now I'm going to ask you two questions about all the doctors [you have/(SP) has] seen in the last two years. In the last two years, when getting care for a medical problem, was there ever a time when test results, medical records, or reasons for referrals were not available at the time of [your/(SP)'s] scheduled doctor's appointment?	(01) YES (02) NO (03) NOT APPLICABLE (04) NOT SURE (-9) Refused	US37J-UNMEDTST
UNMEDTST	US37J	code one	In the last 2 years, when getting care for a medical problem, was there ever a time when medical providers ordered a medical test that [you/(SP)] felt was unnecessary because the test had already been done?	(01) YES (02) NO (03) NOT APPLICABLE (04) NOT SURE (-9) Refused	US37K - EMEDREC

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
EMEDREC	US37K	yes/no	Many health care providers are beginning to use electronic or computer-based medical records instead of using paper-based records. When [you visit/(SP visits)] [(US5A PROVIDER NAME)/the medical providers at (US3A PROVIDER NAME)] [does he or she/do they] generally enter [your/(SP)'s] health information into a computer while [you are/he is/she is] present? [EXPLAIN IF NEEDED: An "electronic health record" is an electronic version of a patient's medical history maintained by a provider over time. It automates the way in which doctors can access patient health information. "Health Information" includes information such as symptoms, vital signs, test results, or prescribed medicines.]	(01) YES (02) NO (-8) Don't Know (-9) Refused	BOX PP2
	BOX PP2	routing	IF US1-PLACEPAR = 2 (NO) GO TO US39-NUSNOTSK OTHERWISE GO TO BOX PP70		
NUSNOTSK	US39A	list	I am going to read some reasons that people have given for not having a usual source of health care. For each one, please tell me whether or not it is a reason [you do/(SP) does] not have a usual place for health care. There is no reason to have a usual source of health care because [you/(SP)] seldom or never (get/gets) sick. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	US39 - NUSMOVIN
NUSMOVIN	US39B	list	[You/(SP)] recently moved into the area. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	US39 - NUSAVAIL
NUSAVAIL	US39C	list	[Your/(SP's)] usual source of health care in this area is no longer available. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	(01) US42 - USWHYNAV (02) US43 - NUSDIFFP (-8) US43 - NUSDIFFP (-9) US43 - NUSDIFFP

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
USWHYNAV	US42	code one	Why is [your/(SP's)] usual source of health care no longer available?	(01) PREVIOUS DOCTOR RETIRED (02) PREVIOUS DOCTOR DIED (03) PREVIOUS DOCTOR MOVED (04) SP MOVED (05) PREVIOUS DR/PLACE TOO FAR AWAY (91) OTHER (-8) DON'T KNOW (-9) REFUSED	(01) US43 - NUSDIFFP (02) US43 - NUSDIFFP (03) US43 - NUSDIFFP (04) US43 - NUSDIFFP (05) US43 - NUSDIFFP (91) US42 - USWHYNO1 (-8) US43 - NUSDIFFP (-9) US43 - NUSDIFFP
USWHYNO1	US42	verbatim text	OTHER (SPECIFY)	(01) CONTINUOUS ANSWER	US43 - NUSDIFFP
NUSDIFFP	US43	list	Thinking about other possible reasons that people have for not having a usual source of health, please tell me if this statement applies to [you/(SP)]: [You like/(SP) likes] to go to different places for different health care needs. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	US43 - NUSTOOFR
NUSTOOFR	US43	list	The places where [you/(SP)] can receive health care are too far away. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	US43 - NUSTOOEX
NUSTOOEX	US43	list	The cost of health care is too expensive. [Is that a reason [you do/(SP) does] not have a usual source of health care?]	(01) YES (02) NO (-8) DON'T KNOW (-9) REFUSED	BOX PP70
	BOX PP70	routing	If respondent = proxy, go to BOX USEND else go to PP70-AGREE_INTRO		

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
AGREE_INTRO	PP70		Please indicate how much you agree or disagree with each of the following statements. Please be as honest and as accurate as you can. Try not to let your response to one statement influence your response to other statements. There are no "correct" or "Incorrect" answers. Answer according to your own feelings, rather than how you think "most people" would answer.	(01) CONTINUE	PP71- AGREE_BEST
AGREE_BEST	PP71		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] In uncertain times, I usually expect the best.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP72- AGREE_RELAX
AGREE_RELAX	PP72		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] It is easy for me to relax.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP73- AGREE_WRONG
AGREE_WRONG	PP73		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] If something can go wrong for me, it will.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP74- AGREE_OPTMSTC
AGREE_OPTMSTC	PP74		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] I am always optimistic about my future.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP75- AGREE_WAY

Variable Name	MR Screen Name	Question Type	Question Text	Code List	Routing
AGREE_WAY	PP75		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] I hardly ever expect things to go my way.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP76- AGREE_GOOD
AGREE_GOOD	PP76		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with each of the following statements.] I rarely count on good things happening to me.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	PP77- AGREE_BAD
AGREE_BAD	PP77		SHOW CARD PP4 [IF NEEDED: Please indicate how much you agree or disagree with the following statement.] Overall, I expect more good things to happen to me than bad.	(01) AGREE A LOT (02) AGREE A LITTLE (03) NEITHER AGREE NOR DISAGREE (04) DISAGREE A LITTLE (05) DISAGREE A LOT (-8) DON'T KNOW (-9) REFUSED	BOX USEND
	BOX USEND	routing	If INTTYPE in(C001, C004, C005, C006), go to CLQ. If INTTYPE in(C002), go to AVQ. If INTTYPE in(C003), go to DIQ.		