

**NOTE: WHERE THERE IS MORE THAN ONE JUMP WITHIN A BRANCHPOINT BOX, THE JUMPS ARE TO BE APPLIED IN ORDER FROM THE TOP.**

E1. The next questions are about health care you have received.

[Since R's LAST IW MONTH, YEAR/In the last two years], have you been a patient in a hospital overnight?

1. YES	5. NO	8. DK	9. RF
GO TO E5 BRANCHPOINT			

E2. How many different times were you a patient in a hospital overnight [since R's LAST IW MONTH, YEAR/in the last two years]?

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DK	RF
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NUMBER OF TIMES

E3. (Altogether) How many nights were you a patient in the hospital [since R's LAST IW MONTH, YEAR/in the last two years]?

\_\_\_\_\_

DK	RF
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NUMBER OF NIGHTS

E4. Were the costs for your hospital stay(s) completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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**E5 BRANCHPOINT: IF R IS LIVING IN A NURSING HOME (CS11=1), GO TO E6**

E5. [Since R's LAST IW MONTH, YEAR/In the last two years], have you been a patient overnight in a nursing home, convalescent home, or other long-term health care facility?

1. YES	5. NO	8. DK	9. RF
GO TO E10 BRANCHPOINT			

E6. How many times [including now, have you been/were you] a patient in a nursing home or other long-term care facility [since R's LAST IW MONTH, YEAR/in the last two years]?

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DK	RF
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NUMBER OF TIMES

E7. (Altogether), How many nights have you been a patient in a nursing home [since R's LAST IW MONTH, YEAR/in the last two years]?

[IWER: USE 996 FOR CONTINUOUS SINCE ENTERED OR SINCE R's LAST IW MONTH, YEAR/IN THE LAST TWO YEARS]

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996. CONTINUOUS SINCE ENTERED	DK	RF
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NIGHTS

OR

\_\_\_\_\_

DK	RF
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E7a. MONTHS

E8. [Were/Are] the costs for your nursing home stay(s) completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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E10 BRANCHPOINT: IF {COSTS OF NURSING HOME STAYS WERE FULLY COVERED or R WAS NOT ASKED} ({E4 and E8}={1 or NOT ASKED}), GO TO E10f.1 BRANCHPOINT

E10. About how much did you pay out-of-pocket for [nursing home/hospital/ nursing home and hospital] bills [since R's LAST IW MONTH, YEAR/in the last two years]?

[IWER: DO NOT PROBE DK/RF]

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DK	RF
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AMOUNT

GO TO E10f.1 BRANCHPOINT
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NOTE: ALL RESPONDENTS WERE RANDOMLY ASSIGNED A NUMBER FROM 1-6 FOR VARIABLE 125. THIS VARIABLE DETERMINES WHICH SERIES OF UNFOLDINGS EACH R WAS ASKED. EACH SERIES IS GIVEN HEREIN IN ITS ENTIRETY.

RANDOM ASSIGNMENT 1 OR 4

<p>E10a. Did it amount to less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10e</p>	<p>GO TO E10f BRANCHPOINT</p>		<p>GO TO E10f BRANCHPOINT</p>	
<p>E10b. (Did it amount to) less than \$10,000, more than \$10,000, or what?</p>	<p>1. LESS THAN \$10,000</p>	<p>3. ABOUT \$10,000</p>	<p>5. MORE THAN \$10,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>			<p>GO TO E10f BRANCHPOINT</p>	
<p>E10c. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>			<p>GO TO E10f BRANCHPOINT</p>	
<p>E10b(2). (Did it amount to) less than \$50,000, more than \$50,000, or what?</p>	<p>1. LESS THAN \$50,000</p>	<p>3. ABOUT \$50,000</p>	<p>5. MORE THAN \$50,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>				
<p>E10e. (Did it amount to) less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 2 OR 5

<p>E10b. (Did it amount to) less than \$10,000, more than \$10,000, or what?</p>	<p>1. LESS THAN \$10,000</p>	<p>3. ABOUT \$10,000</p>	<p>5. MORE THAN \$10,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10d</p>	<p>GO TO E10f BRANCHPOINT</p>		<p>GO TO E10f BRANCHPOINT</p>	
<p>E10c. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>			<p>GO TO E10f BRANCHPOINT</p>	
<p>E10b(2). (Did it amount to) less than \$50,000, more than \$50,000, or what?</p>	<p>1. LESS THAN \$50,000</p>	<p>3. ABOUT \$50,000</p>	<p>5. MORE THAN \$50,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>				
<p>E10d. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
		<p>GO TO E10f BRANCHPOINT</p>			
<p>E10e. (Did it amount to) less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 3 OR 6

<p>E10c. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10b</p>	<p>GO TO E10f BRANCHPOINT</p>	<p>GO TO E10f BRANCHPOINT</p>		
<p>E10b(2). (Did it amount to) less than \$50,000, more than \$50,000, or what?</p>	<p>1. LESS THAN \$50,000</p>	<p>3. ABOUT \$50,000</p>	<p>5. MORE THAN \$50,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>				
<p>E10b(3). Did it amount to less than \$10,000, more than \$10,000, or what?</p>	<p>1. LESS THAN \$10,000</p>	<p>3. ABOUT \$10,000</p>	<p>5. MORE THAN \$10,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>				
<p>E10d. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E10f BRANCHPOINT</p>				
<p>E10e. (Did it amount to) less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>

E10f.1 BRANCHPOINT: IF {R IS NOT IN A NURSING HOME (CS11=5) and REPORTS NO NURSING HOME STAYS (E5=5)} or {R IS IN A NURSING HOME (CS11=1) and REPORTS ONLY ONE NURSING HOME STAY (E6=1)}, GO TO E11

IF R WAS IN A NURSING HOME {AT R'S LAST INTERVIEW/FOR THE LAST 2 YEARS} and HAS BEEN THERE CONTINUOUSLY SINCE THEN (E7=996), GO TO E11

E10f.1. (Think back to the (first) time [since R's LAST IW MONTH, YEAR/in the last two years] that you were a patient in a nursing home or other long-term care facility.)

In about what month and year did you move to the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

DK	RF
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\_\_\_\_\_ YEAR

E10h.E1./E10h.1. In about what month and year did you move out of the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

DK	RF
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\_\_\_\_\_ YEAR

E10j.1. Where did you live after leaving the nursing home or health care facility?

(Did you live alone, (with your [husband/wife/partner] only), with one of your children and his or her own family, with other relatives, in a retirement center, or what?)

1. R LIVED BY HIM/HER SELF, ALONE	2. R LIVED WITH SPOUSE/PARTNER ONLY	3. R LIVED WITH CHILD AND CHILD'S FAMILY	4. R LIVED WITH OTHER RELATIVE(S)
5. R LIVED IN RETIREMENT CENTER	7. OTHER (SPECIFY) _____	8. DK	9. RF

E10k.1 BRANCHPOINT: IF R DID NOT REPORT THAT LIVED WITH CHILD (E10j.1 NOT 3), GO TO E10f.2 BRANCHPOINT

E10k.1. (Which child is that?)

IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E10f.2 BRANCHPOINT: IF R HAD ONLY ONE NURSING HOME STAY (E6 < 2) or {IF R HAD TWO NURSING HOME STAYS (E6=2) and IS CURRENTLY IN A NURSING HOME (CS11=1)}, GO TO E11

E10f.2. Think back to the second time [since R's LAST IW MONTH, YEAR/in the last two years] that you were a patient in a nursing home or other long-term care facility.

In about what month and year did you move to the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

\_\_\_\_\_  DK  RF

E10g.2. YEAR

E10h.2. In about what month and year did you move out of the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

\_\_\_\_\_  DK  RF

E10i.2. YEAR

E10j.2. Where did you live after leaving the nursing home or health care facility?

(Did you live alone, (with your [husband/wife/partner] only), with one of your children and his or her own family, with other relatives, in a retirement center, or what?)

1. R LIVED BY HIM/HER SELF, ALONE	2. R LIVED WITH SPOUSE/PARTNER ONLY	3. R LIVED WITH CHILD AND CHILD'S FAMILY	4. R LIVED WITH OTHER RELATIVE(S)
5. R LIVED IN RETIREMENT CENTER	7. OTHER (SPECIFY) _____	8. DK	9. RF



E10k.2 BRANCHPOINT: IF R DID NOT REPORT THAT LIVED WITH CHILD (E10j.2 NOT 3), GO TO E10f.3 BRANCHPOINT

E10k.2. (Which child is that?)

IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E10f.3 BRANCHPOINT: IF R HAD ONLY TWO NURSING HOME STAYS (E6 < 3) or {R HAD THREE NURSING HOME STAYS (E6=3) and IS CURRENTLY IN A NURSING HOME (CS11=1)}, GO TO E11

E10f.3. Think back to the third time [since R's LAST IW MONTH, YEAR/in the last two years] that you were a patient in a nursing home or other long-term care facility.

In about what month and year did you move to the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

DK	RF
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\_\_\_\_\_ E10g.3. YEAR

E10h.3. In about what month and year did you move out of the nursing home or health care facility?

MONTH/SEASON:

01. JAN	02. FEB	03. MAR	04. APR	05. MAY	06. JUN
07. JUL	08. AUG	09. SEP	10. OCT	11. NOV	12. DEC
13. WINTER	14. SPRING	15. SUMMER	16. FALL	98. DK	99. RF

	DK	RF
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E10i.3. YEAR

E10j.3. Where did you live after leaving the nursing home or health care facility?

(Did you live alone, (with your [husband/wife/partner] only) with one of your children and his or her own family, with other relatives, in a retirement center, or what?)

1. R LIVED BY HIM/HER SELF, ALONE	2. R LIVED WITH SPOUSE/PARTNER ONLY	3. R LIVED WITH CHILD AND CHILD'S FAMILY	4. R LIVED WITH OTHER RELATIVE(S)
5. R LIVED IN RETIREMENT CENTER	7. OTHER (SPECIFY) _____	8. DK	9. RF

E10k.3 BRANCHPOINT: IF R DID NOT REPORT THAT LIVED WITH CHILD (E10j.3 NOT 3), GO TO E11 BRANCHPOINT

E10k.3. (Which child is that?)

IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E11. (Aside from any hospital stays,) how many times have you seen or talked to a medical doctor about your health, including emergency room or clinic visits [since R's LAST IW MONTH, YEAR/in the last two years]?

[IWER: USE ZERO FOR NONE]

NUMBER OF TIMES	0	DK	RF
	GO TO E14		

E13. Were the costs for your doctor visit(s) completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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E14. (Not counting overnight hospital stays,) [since R's LAST IW MONTH, YEAR/in the last two years], have you had outpatient surgery?

1. YES	5. NO	8. DK	9. RF
GO TO E17			

E16. Were your expenses for your outpatient surgery completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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E17. [Since R's LAST IW MONTH, YEAR/In the last two years] have you seen a dentist for dental care, including dentures?

1. YES	5. NO	8. DK	9. RF
GO TO E18a BRANCHPOINT			

E18. Were your dental expenses completely covered by health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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E18a BRANCHPOINT: IF R HAS NOT REPORTED THAT SOME OF HIS/HER COSTS WERE NOT COVERED (E13=1 or E16=1 or E18=1) or R HAS NOT HAD MEDICAL VISITS, GO TO E20 BRANCHPOINT

E18a. About how much did you pay out-of-pocket for [doctor/outpatient surgery/dental/doctor and outpatient surgery/doctor and dental/outpatient surgery and dental/doctor, outpatient surgery, and dental] bills [since R's LAST IW MONTH, YEAR/in the last two years]?

(...except any payments you told me about.)

[IWER: DO NOT PROBE DK/RF]

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DK	RF
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AMOUNT

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GO TO E20 BRANCHPOINT
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NOTE: ALL RESPONDENTS WERE RANDOMLY ASSIGNED A NUMBER FROM 1-6 FOR VARIABLE 126. THIS VARIABLE DETERMINES WHICH SERIES OF UNFOLDINGS EACH R WAS ASKED. EACH SERIES IS GIVEN HEREIN IN ITS ENTIRETY.

RANDOM ASSIGNMENT 1 OR 4

<p>E18b. Did it amount to less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E18g</p>	<p>GO TO E20 BRANCHPOINT</p>		<p>GO TO E20 BRANCHPOINT</p>	
<p>E18c. (Did it amount to) less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>			<p>GO TO E20 BRANCHPOINT</p>	
<p>E18d. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>			<p>GO TO E20 BRANCHPOINT</p>	
<p>E18e. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>				
<p>E18g. (Did it amount to) less than \$200, more than \$200, or what?</p>	<p>1. LESS THAN \$200</p>	<p>3. ABOUT \$200</p>	<p>5. MORE THAN \$200</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 2 OR 5

<p>E18c. (Did it amount to) less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E28f</p>	<p>GO TO E20 BRANCHPOINT</p>		<p>GO TO E20 BRANCHPOINT</p>	
<p>E18d. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>			<p>GO TO E20 BRANCHPOINT</p>	
<p>E18e. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>				
<p>E18f. (Did it amount to) less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E20 BRANCHPOINT</p>				
<p>E18g. (Did it amount to) less than \$200, more than \$200, or what?</p>	<p>1. LESS THAN \$200</p>	<p>3. ABOUT \$200</p>	<p>5. MORE THAN \$200</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 3 OR 6

<p>E18d. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E18c(2)</p>	<p>GO TO E20 BRANCHPOINT</p>	<p>GO TO E20 BRANCHPOINT</p>		
<p>E18e. (Did it amount to) less than \$20,000, more than \$20,000, or what?</p>	<p>1. LESS THAN \$20,000</p>	<p>3. ABOUT \$20,000</p>	<p>5. MORE THAN \$20,000</p>	<p>8. DK</p>	<p>9. RF</p>
<p>GO TO E20 BRANCHPOINT</p>					
<p>E18c(2). Did it amount to less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
<p>GO TO E20 BRANCHPOINT</p>					
<p>E18f. (Did it amount to) less than \$500, more than \$500, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
<p>GO TO E20 BRANCHPOINT</p>					
<p>E18g. (Did it amount to) less than \$200, more than \$200, or what?</p>	<p>1. LESS THAN \$200</p>	<p>3. ABOUT \$200</p>	<p>5. MORE THAN \$200</p>	<p>8. DK</p>	<p>9. RF</p>

E20 BRANCHPOINT: IF R HAS REPORTED TAKING OR CARRYING MEDICATION REGULARLY IN SECTION B, ASSIGN 7 FOR E20 AND GO TO E21

E20. Do you regularly take prescription medications?

<p>1. YES</p>	<p>5. NO</p>	<p>7. MEDICATIONS KNOWN</p>	<p>8. DK</p>	<p>9. RF</p>
<p>GO TO E21g</p>		<p>GO TO E21g</p>		

E21. Have the costs of your prescription medications been completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by health insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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GO TO E21g

E21a. On the average, about how much have you paid out-of-pocket per month for these prescriptions [since R's LAST IW MONTH, YEAR/in the last two years]?

[IWER: DO NOT PROBE DK/RF]

AMOUNT PER MONTH

DK	RF
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GO TO E21g



NOTE: ALL RESPONDENTS WERE RANDOMLY ASSIGNED A NUMBER FROM 1-6 FOR VARIABLE 127. THIS VARIABLE DETERMINES WHICH SERIES OF UNFOLDINGS EACH R WAS ASKED. EACH SERIES IS GIVEN HEREIN IN ITS ENTIRETY.

RANDOM ASSIGNMENT 1 OR 4

<p>E21b. Does it amount to less than \$10 per month, more than \$10 per month, or what?</p>	<p>1. LESS THAN \$10</p>	<p>3. ABOUT \$10</p>	<p>5. MORE THAN \$10</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21f</p>	<p>GO TO E21g</p>	<p>GO TO E21g</p>		
<p>E21c. Does it amount to less than \$20 per month, more than \$20 per month, or what?</p>	<p>1. LESS THAN \$20</p>	<p>3. ABOUT \$20</p>	<p>5. MORE THAN \$20</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>		<p>GO TO E21g</p>		
<p>E21d. (Does it amount to) less than \$100 per month, more than \$100 per month, or what?</p>	<p>1. LESS THAN \$100</p>	<p>3. ABOUT \$100</p>	<p>5. MORE THAN \$100</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>		<p>GO TO E21g</p>		
<p>E21e. Does it amount to less than \$500 per month, more than \$500 per month, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21f. (Does it amount to) less than \$5 per month, more than \$5 per month, or what?</p>	<p>1. LESS THAN \$5</p>	<p>3. ABOUT \$5</p>	<p>5. MORE THAN \$5</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 2 OR 5

<p>E21c. Does it amount to less than \$20 per month, more than \$20 per month, or what?</p>	<p>1. LESS THAN \$20</p>	<p>3. ABOUT \$20</p>	<p>5. MORE THAN \$20</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21e(2)</p>	<p>GO TO E21g</p>	<p>GO TO E21g</p>		
<p>E21d. (Does it amount to) less than \$100 per month, more than \$100 per month, or what?</p>	<p>1. LESS THAN \$100</p>	<p>3. ABOUT \$100</p>	<p>5. MORE THAN \$100</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>		<p>GO TO E21g</p>		
<p>E21e. Does it amount to less than \$500 per month, more than \$500 per month, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21e(2). (Does it amount to) less than \$10 per month, more than \$10 per month, or what?</p>	<p>1. LESS THAN \$10</p>	<p>3. ABOUT \$10</p>	<p>5. MORE THAN \$10</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21f. (Does it amount to) less than \$5 per month, more than \$5 per month, or what?</p>	<p>1. LESS THAN \$5</p>	<p>3. ABOUT \$5</p>	<p>5. MORE THAN \$5</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 3 OR 6

<p>E21d. (Does it amount to) less than \$100 per month, more than \$100 per month, or what?</p>	<p>1. LESS THAN \$100</p>	<p>3. ABOUT \$100</p>	<p>5. MORE THAN \$100</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21b(2)</p>	<p>GO TO E21g</p>	<p>GO TO E21g</p>		
<p>E21e. Does it amount to less than \$500 per month, more than \$500 per month, or what?</p>	<p>1. LESS THAN \$500</p>	<p>3. ABOUT \$500</p>	<p>5. MORE THAN \$500</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21b(2). Does it amount to less than \$20 per month, more than \$20 per month, or what?</p>	<p>1. LESS THAN \$20</p>	<p>3. ABOUT \$20</p>	<p>5. MORE THAN \$20</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21e(2). (Does it amount to) less than \$10 per month, more than \$10 per month, or what?</p>	<p>1. LESS THAN \$10</p>	<p>3. ABOUT \$10</p>	<p>5. MORE THAN \$10</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E21g</p>				
<p>E21f. (Does it amount to) less than \$5 per month, more than \$5 per month, or what?</p>	<p>1. LESS THAN \$5</p>	<p>3. ABOUT \$5</p>	<p>5. MORE THAN \$5</p>	<p>8. DK</p>	<p>9. RF</p>

E21g. Sometimes people delay taking medication or filling prescriptions because of the cost.

At any time [since R's LAST IW MONTH, YEAR/in the last two years] have you ended up taking less medication than was prescribed for you because of the cost?

1. YES	5. NO	8. DK	9. RF
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E22 BRANCHPOINT: IF R IS CURRENTLY IN NURSING HOME, GO TO E27 BRANCHPOINT

E22. [Since R's LAST IW MONTH, YEAR/In the last two years], has any medically-trained person come to your home to help you, yourself?

[IWER: WE ONLY WANT TO INCLUDE HELP GIVEN TO R, NOT HELP FOR R WHEN R IS A CAREGIVER FOR SOMEONE ELSE]

1. YES	5. NO	8. DK	9. RF
GO TO E24			

E23. Were the costs of your home medical care completely covered by (Medicare, Medicaid, or other) health insurance, partly covered by insurance, or not covered at all by insurance?

1. FULLY COVERED	3. PARTLY COVERED (OR COVERED WITH A COPAY)	5. NOT COVERED AT ALL	7. COSTS NOT SETTLED YET	8. DK	9. RF
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E24. READ SLOWLY:

[Since R's LAST IW MONTH, YEAR/In the last two years], did you use any special facility or service which we haven't talked about, such as: an adult care center, a social worker, an outpatient rehabilitation program, or transportation or meals for the elderly or disabled?

1. YES	5. NO	8. DK	9. RF
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E24a BRANCHPOINT: IF COSTS FOR HOME MEDICAL CARE {WERE FULLY COVERED or WAS NOT ASKED}(E23 {=1 or NOT ASKED}) and R DID NOT REPORT USING SPECIAL {FACILITIES OR SERVICES} (E24={5 or DK or RF}), GO TO E27

E24a. About how much did you pay out-of-pocket for [in-home medical care/special facilities or services/in-home medical care, special facilities or services] [since R's LAST IW MONTH, YEAR/in the last two years]?

[IWER: DO NOT PROBE DK/RF]

\_\_\_\_\_

DK	RF
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AMOUNT

<b>GO TO E27 BRANCHPOINT</b>
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E24b. Did it amount to less than \$5,000, more than \$5,000, or what?	1. LESS THAN \$5,000	3. ABOUT \$5,000	5. MORE THAN \$5,000	8. DK	9. RF
	GO TO E24e	GO TO E26		GO TO E24e	
E24c. (Did it amount to) less than \$10,000, more than \$10,000, or what	1. LESS THAN \$10,000	3. ABOUT \$10,000	5. MORE THAN \$10,000	8. DK	9. RF
	GO TO E26			GO TO E26	
E24d. (Did it amount to) less than \$20,000, more than \$20,000, or what?	1. LESS THAN \$20,000	3. ABOUT \$20,000	5. MORE THAN \$20,000	8. DK	9. RF
	GO TO E26				
E24e. (Did it amount to) less than \$1,000, more than \$1,000, or what?	1. LESS THAN \$1,000	3. ABOUT \$1,000	5. MORE THAN \$1,000	8. DK	9. RF
	GO TO E26				
E24f. (Did it amount to) less than \$500, more than \$500, or what?	1. LESS THAN \$500	3. ABOUT \$500	5. MORE THAN \$500	8. DK	9. RF

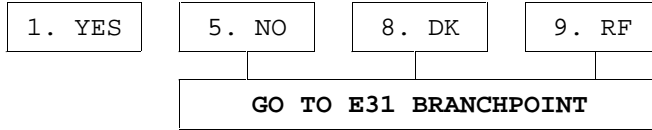
**ASSIGNMENT:**

**CALCULATED VARIABLE — SUM-MAJOR MEDICAL EXPENSES (VARIABLE 2375):**

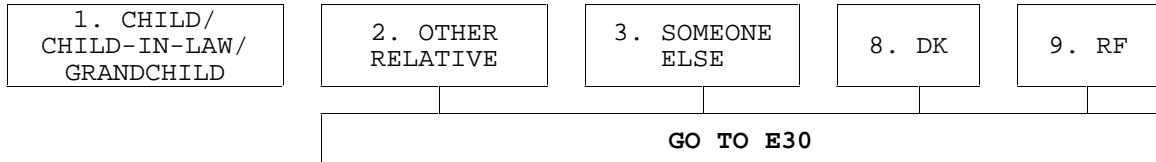
THE VALUE FROM PREVIOUS QUESTIONS REGARDING OUT-OF-POCKET MEDICAL EXPENSE (WHETHER AN AMOUNT IS GIVEN, OR FROM THE FOLLOWING UNFOLDING QUESTIONS) IS ASSIGNED BY THE PROGRAM TO FOUR VARIABLES (2371 (E10-E10e), 2372 (E18a-E18g), 2373 (E21a-E21e), AND 2374 (E24a-E24f)). A VALUE OF 0 IS USED FOR ANY THAT THE RESPONDENT REFUSED OR WAS UNABLE TO ANSWER. VARIABLE 2375 IS CALCULATED BY ADDING THE VALUE OF THE FOUR PRECEDING VALUES, AND IS USED TO EVALUATE THE NEXT FEW BRANCHPOINTS.

E27 BRANCHPOINT: IF SUM MAJOR MEDICAL EXPENSES IS ZERO, GO TO E31 BRANCHPOINT

E27. Besides any costs covered by insurance, has anyone helped you (and your [husband/wife/partner]) pay for your health care costs [since R's LAST IW MONTH, YEAR/in the last two years]?



E28. Is that a (child or other) relative of yours (and your [husband's/wife's/partner's]), or is that someone else?



E29. (Which child is that?)

[IWER: CHOOSE ALL THAT APPLY]

IWER: ACCEPT MORE THAN 1 CHILD ONLY AFTER PROBE:  
Which child helps the most?

IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
38. ALL MY CHILDREN
DK
RF

E30. Altogether, about how much money did that help amount to?

\_\_\_\_\_

AMOUNT

DK

RF

E31 BRANCHPOINT: IF SUM-MAJOR MEDICAL EXPENSES IS LESS THAN \$10,000, GO TO E26 BRANCHPOINT

E31. You have just told me that you have had some rather large out-of pocket medical expenditures.

(Apart from what you received from others,) how did you finance these — Did you pay directly from your savings or earnings, did you take out a loan, have you not yet paid these bills, or what?

[IWER: CHOOSE ALL THAT APPLY]

1. PAID USING SAVINGS/EARNINGS

2. TOOK OUT A LOAN

3. HAVE NOT YET PAID

7. OTHER (SPECIFY)  
\_\_\_\_\_

8. DK

9. RF

E26 BRANCHPOINT: IF R'S MEDICAL EXPENSES HAVE NOT BEEN {FULLY or PARTIALLY} COVERED BY INSURANCE OR MEDICAID} and R HAS NOT REPORTED THAT COSTS HAVE NOT BEEN SETTLED and R HAS NOT USED SPECIAL SERVICES ({E4,E8,E13,E16,E18,E21,E23} ALL {NOT 1 and NOT 3 and NOT 7} and E24 NOT 1), GO TO E32

NOTE: AT E26 THE IWER MENTIONS ALL TYPES OF HEALTH CARE THAT THE R REPORTED HAVING AT QUESTIONS E1, E5 or CS11, E11, E14, E17, E20 and E22.

E26. We would like to get a very rough idea of the total cost of your

(hospital stays  
nursing home stays  
doctor and clinic visits  
outpatient surgery  
dental visits  
prescriptions  
in-home-medical care)

SAID TO ALL R's:

(and) all other medical costs for you [since R's LAST IW MONTH, YEAR/in the last two years], including costs covered by

IF 65 OR OLDER:

(Medicare, [Medicaid/STATE NAME FOR MEDICAID], or other)

SAID TO ALL R's:

health insurance.

NOTE: ALL RESPONDENTS WERE RANDOMLY ASSIGNED A NUMBER FROM 1-3 FOR VARIABLE 122. THIS VARIABLE DETERMINES WHICH SERIES OF UNFOLDINGS EACH R WAS ASKED. EACH SERIES IS GIVEN HEREIN IN ITS ENTIRETY.

RANDOM ASSIGNMENT 1

<p>E26. Did it amount to less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>			<p>GO TO E32</p>	
<p>E26a. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>			<p>GO TO E32</p>	
<p>E26b. (Did it amount to) less than \$25,000, more than \$25,000, or what?</p>	<p>1. LESS THAN \$25,000</p>	<p>3. ABOUT \$25,000</p>	<p>5. MORE THAN \$25,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>			<p>GO TO E32</p>	
<p>E26c. (Did it amount to) less than \$100,000, more than \$100,000, or what?</p>	<p>1. LESS THAN \$100,000</p>	<p>3. ABOUT \$100,000</p>	<p>5. MORE THAN \$100,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>			<p>GO TO E32</p>	
<p>E26d. (Did it amount to) less than \$500,000, more than \$500,000, or what?</p>	<p>1. LESS THAN \$500,000</p>	<p>3. ABOUT \$500,000</p>	<p>5. MORE THAN \$500,000</p>	<p>8. DK</p>	<p>9. RF</p>



RANDOM ASSIGNMENT 2

<p>E26. Did it amount to less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
		<p>GO TO E32</p>	<p>GO TO E26b(2)</p>	<p>GO TO E32</p>	
<p>E26b(1). (Did it amount to) less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>				
<p>E26b(2). (Did it amount to) less than \$25,000, more than \$25,000, or what?</p>	<p>1. LESS THAN \$25,000</p>	<p>3. ABOUT \$25,000</p>	<p>5. MORE THAN \$25,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>		<p>GO TO E32</p>		
<p>E26c. (Did it amount to) less than \$100,000, more than \$100,000, or what?</p>	<p>1. LESS THAN \$100,000</p>	<p>3. ABOUT \$100,000</p>	<p>5. MORE THAN \$100,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>		<p>GO TO E32</p>		
<p>E26d. (Did it amount to) less than \$500,000, more than \$500,000, or what?</p>	<p>1. LESS THAN \$500,000</p>	<p>3. ABOUT \$500,000</p>	<p>5. MORE THAN \$500,000</p>	<p>8. DK</p>	<p>9. RF</p>

RANDOM ASSIGNMENT 3

<p>E26. Did it amount to less than \$25,000, more than \$25,000, or what?</p>	<p>1. LESS THAN \$25,000</p>	<p>3. ABOUT \$25,000</p>	<p>5. MORE THAN \$25,000</p>	<p>8. DK</p>	<p>9. RF</p>
		<p>GO TO E32</p>	<p>GO TO E26c</p>	<p>GO TO E32</p>	
<p>E26a. (Did it amount to) less than \$5,000, more than \$5,000, or what?</p>	<p>1. LESS THAN \$5,000</p>	<p>3. ABOUT \$5,000</p>	<p>5. MORE THAN \$5,000</p>	<p>8. DK</p>	<p>9. RF</p>
				<p>GO TO E32</p>	
<p>E26b. (Did it amount to) less than \$1,000, more than \$1,000, or what?</p>	<p>1. LESS THAN \$1,000</p>	<p>3. ABOUT \$1,000</p>	<p>5. MORE THAN \$1,000</p>	<p>8. DK</p>	<p>9. RF</p>
				<p>GO TO E32</p>	
<p>E26c. (Did it amount to) less than \$100,000, more than \$100,000, or what?</p>	<p>1. LESS THAN \$100,000</p>	<p>3. ABOUT \$100,000</p>	<p>5. MORE THAN \$100,000</p>	<p>8. DK</p>	<p>9. RF</p>
	<p>GO TO E32</p>			<p>GO TO E32</p>	
<p>E26d. (Did it amount to) less than \$500,000, more than \$500,000, or what?</p>	<p>1. LESS THAN \$500,000</p>	<p>3. ABOUT \$500,000</p>	<p>5. MORE THAN \$500,000</p>	<p>8. DK</p>	<p>9. RF</p>

E32. (Aside from any [hospital or nursing home/hospital/ nursing home stays],) about how many days did you stay in bed more than half the day because of illness or injury during the last month?

[IWER: USE ZERO FOR NONE]

\_\_\_\_\_    
AMOUNT

E59. We need to understand difficulties people may have with various activities because of a health or physical problem. Please tell me whether you have any difficulty doing each of the everyday activities that I read to you. Exclude any difficulties that you expect to last less than three months.

E60. Because of a health problem do you have any difficulty with walking several blocks?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E62	GO TO E62				

E61. Do you have any difficulty with running or jogging about a mile?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E63					

	1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
E62. (Because of a health problem do you have any difficulty) with walking one block?						
E63. (Because of a health problem do you have any difficulty) with sitting for about two hours?						
E64. (Because of a health problem do you have any difficulty) with getting up from a chair after sitting for long periods?						
E65. (Because of a health problem do you have any difficulty) with climbing several flights of stairs without resting?						
<div style="border: 1px solid black; padding: 2px; display: inline-block;">GO TO E67</div>						
E66. (Because of a health problem do you have any difficulty) with climbing one flight of stairs without resting?						
E67. (Because of a health problem do you have any difficulty) with stooping, kneeling, or crouching?						

	1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
E68. (Because of a health problem do you have any difficulty) with reaching or extending your arms above shoulder level?						
E69. (Because of a health problem do you have any difficulty) with pulling or pushing large objects like a living room chair?						
E70. (Because of a health problem do you have any difficulty) with lifting or carrying weights over 10 pounds, like a heavy bag of groceries?						
E71. (Because of a health problem do you have any difficulty) with picking up a dime from a table?						

E73f BRANCHPOINT: IF R {DID NOT HAVE DIFFICULTY WITH ANY OF THE ADLs or REFUSED TO SAY} ({E60 and E62 and E63 and E64 and E66 and E67 and E68 and E69 and E70 and E71} {NOT 1 and NOT 6 and NOT 7 and NOT DK}), GO TO E90 BRANCHPOINT

E73f. Here are a few more everyday activities. Please tell me if you have any difficulty with these because of a physical, mental, emotional or memory problem. Again exclude any difficulties you expect to last less than three months.

Because of a health or memory problem do you have any difficulty with dressing, including putting on shoes and socks?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E72 BRANCHPOINT (AFTER E73f(2)/E73F)					

E73f(2)/E73F. Does anyone ever help you dress?

1. YES	5. NO	8. DK	9. RF
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E72 BRANCHPOINT: IF R REPORTED ONLY ONE DIFFICULTY FOR PREVIOUS ADLs (ONLY ONE OF {E60, E62-E64, E66-E71}=1) and R HAS NO DIFFICULTY DRESSING (E73f=5), GO TO E90 BRANCHPOINT

E72. Because of a health or memory problem do you have any difficulty with walking across a room?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
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E72c. Do you ever use equipment or devices such as a cane, walker or wheelchair when crossing a room?

1. YES	5. NO	8. DK	9. RF
GO TO E72(2)			

E72d. What equipment is that?

[IWER: CHOOSE ALL THAT APPLY]

01. RAILING	02. WALKER	03. CANE	04. CRUTCHES	05. ORTHOPEDIC SHOES
06. BRACE (LEG OR BACK)	07. PROSTHESIS	08. OXYGEN/RESPIRATOR	09. FURNITURE/WALLS	
10. WHEELCHAIR/CART	97. OTHER, SPECIFY _____	98. DK	99. RF	

E72(2) BRANCHPOINT: IF R HAS NO DIFFICULTY WALKING ACROSS A ROOM (E72=5), GO TO E74

E72(2). Does anyone ever help you get across a room?

1. YES	5. NO	8. DK	9. RF
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E74. (Because of a health or memory problem do you have any difficulty with) bathing or showering?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E75					

E74f. Does anyone ever help you bathe?

1. YES	5. NO	8. DK	9. RF
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E75. (Because of a health or memory problem do you have any difficulty with) eating, such as cutting up your food?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
 <b>GO TO E76</b>					

E75f. Does anyone ever help you eat?

1. YES	5. NO	8. DK	9. RF
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E76. (Because of a health or memory problem do you have any difficulty with) getting in or out of bed?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
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E76c. Do you ever use equipment or devices such as a cane, walker or railing when getting in or out of bed?

1. YES	5. NO	8. DK	9. RF
 <b>GO TO E76f BRANCHPOINT</b>			

E76d. What equipment is that?

[IWER: CHOOSE ALL THAT APPLY]

01. RAILING	02. WALKER	03. CANE	04. CRUTCHES	05. ORTHOPEDIC SHOES
06. BRACE (LEG OR BACK)	07. PROSTHESIS	08. OXYGEN/ RESPIRATOR	09. FURNITURE/WALLS	
10. WHEELCHAIR/CART	97. OTHER, SPECIFY _____	98. DK	99. RF	

E76f BRANCHPOINT: IF R HAS NO DIFFICULTY GETTING OUT OF BED (E76=5), GO TO E77

E76f. Does anyone ever help you get in or out of bed?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E77. (Because of a health or memory problem do you have) any difficulty with using the toilet, including getting up and down?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
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GO TO E83  
BRANCHPOINT

E77f. Does anyone ever help you use the toilet?

1. YES	5. NO	8. DK	9. RF
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E83 BRANCHPOINT: IF R DID NOT REPORT THAT RECEIVES HELP WITH LAST SERIES OF ADLs ({E73F(2) and E72 and E74f and E75f and E76f and E77f} NOT 1), GO TO E90 BRANCHPOINT

E83. Who most often helps you with [getting across a room,/dressing,/bathing,/eating,/getting in and out of bed,/using the toilet]?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E83a BRANCHPOINT: GO TO E83c, UNLESS R GAVE NAME OF HELPER AT E83 THAT IS NOT ON LIST (E83=97)

E83a. What is that person's relationship to you (IF R IN NURSING HOME: or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
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GO TO E83c

6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF
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E83b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

E83c. Does anyone else help you with [this activity/these activities]?

E84. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E84a BRANCHPOINT: GO TO E84c, UNLESS R GAVE NAME OF HELPER AT E84 THAT IS NOT ON LIST (E84=97)

E84a. What is that person's relationship to you, (or are they an employee of the place you live)?

E84b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

E84c. Does anyone else help you with [this activity/these activities]?

1. YES	5. NO	8. DK	9. RF
GO TO E90 BRANCHPOINT			

E85. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E85a BRANCHPOINT: GO TO E85c, UNLESS R GAVE NAME OF HELPER AT E85 THAT IS NOT ON LIST (E85=97)

E85a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E85c			

6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF
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E85b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

DK	RF
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NAME

E85c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E90 BRANCHPOINT			

E86. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E86a BRANCHPOINT: GO TO E86c, UNLESS R GAVE NAME OF HELPER AT E86 THAT IS NOT ON LIST (E86=97)

E86a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E86c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E86b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E86c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E90 BRANCHPOINT			

E87. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E86a BRANCHPOINT: GO TO E86c, UNLESS R GAVE NAME OF HELPER AT E86 THAT IS NOT ON LIST (E86=97)

E87a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E87c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E87b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E87c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E90 BRANCHPOINT			

E88. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E88a BRANCHPOINT: GO TO E88c, UNLESS R GAVE NAME OF HELPER AT E88 THAT IS NOT ON LIST (E88=97)

E88a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E88c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E88b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E88c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E90 BRANCHPOINT			

E89. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E89a BRANCHPOINT: GO TO E90 BRANCHPOINT, UNLESS R GAVE NAME OF HELPER AT E89 THAT IS NOT ON LIST (E89=97)

E89a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E90 BRANCHPOINT			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E89b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E90 BRANCHPOINT: IF REINTERVIEW R and {R's CURRENT AGE IS LESS THAN 65 or WE DON'T KNOW R's AGE BUT R IS IN {HRS or WAR BABIES} COHORT}, GO TO E92

E90. When you ride in a car, how often do you wear your seatbelt? Is it all or most of the time, sometimes, rarely, or never?

1. ALL OR MOST	2. SOMETIMES	3. RARELY	4. NEVER	8. DK	9. RF
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E91 BRANCHPOINT: IF R's CURRENT AGE IS LESS THAN 65 or WE DON'T KNOW R's AGE BUT R IS IN {HRS or WAR BABIES} COHORT, GO TO E92

E91. Are you able to drive?

1. YES	5. NO	6. [VOL] NEVER DROVE	8. DK	9. RF
GO TO E92				

E91a. Do you have a car available to use when you need one?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E91b. Do you limit your driving to nearby places, or do you also drive on longer trips?

1. LIMIT TO NEARBY	2. DRIVE LONG TRIPS	8. DK	9. RF
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E92. IF R HAS NO DIFFICULTY DRESSING (E73f=5) and R WAS NOT ASKED IF HAD DIFFICULTY WALKING (E72):  
For the next set of questions, if you don't do any of the following activities at all, just tell me so. Exclude any difficulties that you expect to last less than three months.

OTHERWISE:

Here are a few other activities which some people have difficulty with because of a physical, mental, emotional, or memory problem. Please tell me whether you have any difficulty with each activity I name. If you don't do the activity at all, just tell me so. Exclude any difficulties that you expect to last less than three months.

E93. Because of a health or memory problem, do you have any difficulty using a map to figure out how to get around in a strange place?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
--------	-------	-------------	-------------	-------	-------

E95. (Because of a health or memory problem, do you have) any difficulty preparing a hot meal?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E95c	GO TO E96	GO TO E95c			

E95b. Is that because of a health or memory problem?

1. YES	5. NO	8. DK	9. RF
GO TO E96			

E95c BRANCHPOINT: IF R IS IN NURSING HOME, GO TO E96

E95c. Does anyone help you prepare hot meals?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E96. (Because of a health or memory problem, do you have) any difficulty with shopping for groceries?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E96c BRANCHPOINT	GO TO E97			GO TO E96c	

E96b. Is that because of a health or memory problem?

1. YES	5. NO	8. DK	9. RF
	GO TO E97		

E96c BRANCHPOINT: IF R IS IN NURSING HOME, GO TO E97

E96c. Does anyone help you shop for groceries?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E97. (Because of a health or memory problem, do you have) any difficulty with making phone calls?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO 97c	GO TO E98			GO TO E97c	

E97b. Is that because of a health or memory problem?

1. YES	5. NO	8. DK	9. RF
	GO TO E98		

E97c. Does anyone help you make telephone calls?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------



E98. (Because of a health or memory problem, do you have) any difficulty taking medications?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E98c BRANCHPOINT	GO TO E99 BRANCHPOINT	GO TO E98b		GO TO E98c BRANCHPOINT	

E98a. Do you think you would have any difficulty taking medications if you needed to do so?

1. YES	5. NO	8. DK	9. RF
	GO TO E99 BRANCHPOINT		

E98b. Is that because of a health or memory problem?

1. YES	5. NO	8. DK	9. RF
	GO TO E99 BRANCHPOINT		

E98c BRANCHPOINT: IF R IS IN NURSING HOME, GO TO E99 BRANCHPOINT

E98c. Does anyone help you with taking medication?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E99 BRANCHPOINT: IF R DID NOT REPORT THAT SOMEONE HELPED WITH LAST 4 ADLs ({E95c and E96c and E97c and 98c} NOT 1), GO TO E105 BRANCHPOINT

E99. Who most often helps you [prepare meals/shop for groceries/make telephone calls/take medications]?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E99a BRANCHPOINT: GO TO E99c, UNLESS R GAVE NAME OF HELPER AT E99 THAT IS NOT ON LIST (E99=97)

E99a. What is that person's relationship to you, (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E99c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E99b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E99c. Does anyone else help you [prepare meals/shop for groceries/make telephone calls/take medications]?

1. YES	5. NO	8. DK	9. RF
GO TO E105 BRANCHPOINT			

E100. Who else helps you?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E100a BRANCHPOINT: GO TO E100c, UNLESS R GAVE NAME OF HELPER AT E100 THAT IS NOT ON LIST (E100=97)

E100a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E100c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E100b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

DK	RF
----	----

NAME

E100c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E105 BRANCHPOINT			

E101. Who else helps you?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E101a BRANCHPOINT: GO TO E101c, UNLESS R GAVE NAME OF HELPER AT E101 THAT IS NOT ON LIST (E101=97)

E101a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E100c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E101b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

DK	RF
----	----

NAME

E101c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO 105 BRANCHPOINT			

E102. Who else helps you?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E102a BRANCHPOINT: GO TO E102c, UNLESS R GAVE NAME OF HELPER AT E102 THAT IS NOT ON LIST (E102=97)

E102a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E102c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E102b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

DK	RF
----	----

NAME

E102c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E105 BRANCHPOINT			

E103. Who else helps you?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E103a BRANCHPOINT: GO TO E103c, UNLESS R GAVE NAME OF HELPER AT E103 THAT IS NOT ON LIST (E103=97)

E103a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E103c			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E103b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

DK	RF
----	----

NAME

E103c. Does anyone else help you with these activities?

1. YES	5. NO	8. DK	9. RF
GO TO E105 BRANCHPOINT			

E104. Who else helps you?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E104a BRANCHPOINT: GO TO E105 BRANCHPOINT, UNLESS R GAVE NAME OF HELPER AT E104 THAT IS NOT ON LIST (E104=97)

E104a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO E105 BRANCHPOINT			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E104b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

E105 BRANCHPOINT: IF R IS IN NURSING HOME, GO TO E106

E105. (Besides any help you have told me about,) Do you get any help with work around the house or yard because of your health problems?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E106. Because of a health or memory problem, do you have any difficulty with managing your money — such as paying your bills and keeping track of expenses?

1. YES	5. NO	6. CAN'T DO	7. DON'T DO	8. DK	9. RF
GO TO E106c	GO TO HELPER LIST (AFTER E108b)			GO TO E106c	

E106a. Is that because of a health or memory problem?

1. YES	5. NO	8. DK	9. RF
	GO TO HELPER LIST (AFTER E108b)		

E106c. Does anyone ever help you manage your money?

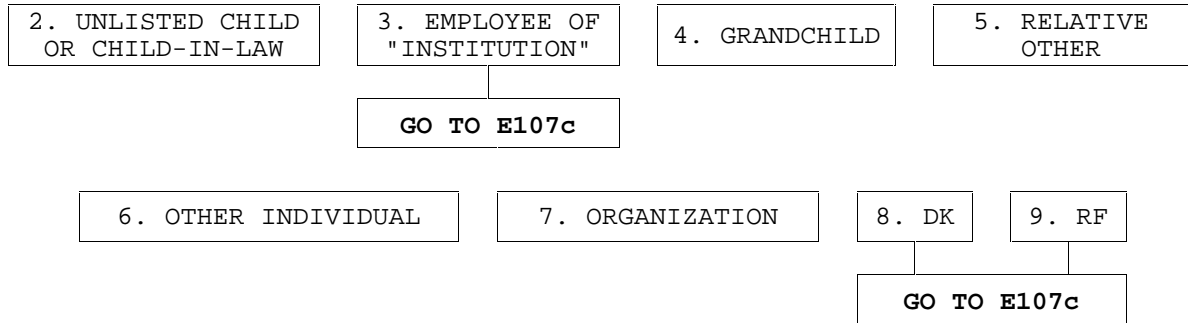
1. YES	5. NO	8. DK	9. RF
GO TO HELPER LIST (AFTER E108b)			

E107. Who most often helps you manage your money?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E107a BRANCHPOINT: GO TO E107c, UNLESS R GAVE NAME OF HELPER AT E107 THAT IS NOT ON LIST (E107=97)

E107a. What is that person's relationship to you (or are they an employee of the place you live)?



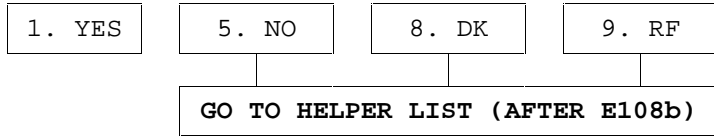
E107b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK       RF

E107c. Does anyone else help you manage your money?





E108. Who is that?

HELPER NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 35. HELPER (& SPOUSE/PARTNER) NAME(S) [ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
36. SPOUSE/P NAME
97. NOT ON LIST
100. EMPLOYEE OF FACILITY
DK
RF

E108a BRANCHPOINT: GO TO HELPER LIST (AFTER E108b), UNLESS R GAVE NAME OF HELPER AT E108 THAT IS NOT ON LIST (E108=97)

E108a. What is that person's relationship to you (or are they an employee of the place you live)?

2. UNLISTED CHILD OR CHILD-IN-LAW	3. EMPLOYEE OF "INSTITUTION"	4. GRANDCHILD	5. RELATIVE OTHER
GO TO HELPER LIST (AFTER E108b)			
6. OTHER INDIVIDUAL	7. ORGANIZATION	8. DK	9. RF

E108b. What is the (first) name of that [grandchild/relative/individual/child/organization]?

\_\_\_\_\_

NAME

DK	RF
----	----

**HELPER LIST:**

*NOTE: AT THIS POINT A LIST IS COMPILED BY THE PROGRAM OF ALL HELPERS MENTIONED IN THIS SECTION, EXCLUDING EMPLOYEES OF INSTITUTIONS, AND FROM PRELOAD. THE LIST WILL COMPILE UP TO 36 NAMES, INCLUDING R'S SPOUSE/PARTNER.*

RELATIONSHIP TO RESPONDENT	SEX	NAME	HOUSEHOLD RESIDENT	MARITAL STATUS	SPOUSE NAME	SPOUSE HOUSEHOLD RESIDENT
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]						

HELPER INTRO BRANCHPOINT: IF THERE ARE NO HELPERS ON THE LIST BESIDES THE SPOUSE/PARTNER, GO TO E171 BRANCHPOINT

E3. HELPER INTRO:  
Let's think for a moment about the help you receive that we just talked about.

*\*\*\*BEGINNING OF E158 LOOP: QUESTIONS E158 THROUGH E169-2 ARE REPEATED ALL HELPERS ON THE LIST, BEGINNING WITH A HELPER WHO IS A CHILD (IF ANY) AT E158, FOLLOWED BY THE CHILD'S SPOUSE AT E158-2, THEN TO THE NEXT CHILD/PAIR, AND SO ON THROUGH ALL CHILD HELPERS, THEN NON-CHILD HHMs AND SPOUSES, AND LASTLY PERSONS WHO WERE ADDED AT E83 THROUGH E108, ABOVE. R'S SPOUSE/PARTNER IS NOT ASKED ABOUT.\*\*\**

E158 BRANCHPOINT: IF HELPERn IS R'S SPOUSE/PARTNER, SKIP AND GO TO THE NEXT HELPER ON THE LIST

E158. IF HELPER CHILD IS IN PRELOAD AND CHILD IS MARRIED:  
 [First/Next] the help from *CHILDn* & *CHILDn's SPOUSE NAME*, starting with *CHILDn NAME*. If no help was given just say so.  
 During the last month, on about how many days did *CHILDn NAME* help you?

IF NEW HELPER FROM THIS SECTION:  
 [First/Next] the help from *HELPERn NAME*.  
 During the last month, on about how many days did *HELPERn NAME* help you?

IF HELPER CHILD IS NOT IN PRELOAD:  
 [First/Next] the help from *CHILDn* & *CHILDn's SPOUSE NAME*.  
 During the last month, on about how many days did *CHILDn* & *CHILDn's SPOUSE NAME* help you?

[IWER: ENTER "96" IN "DAYS IN LAST MONTH" IF THE PERSON IS NOT A HELPER OR THE PERSON DID NOT HELP IN LAST MONTH]

	96. NOT A HELPER IN LAST MONTH	DK	RF
E158. DAYS IN LAST MONTH	GO TO E158-2 BRANCHPOINT		

OR

	DK	RF
--	----	----

E158a. DAYS PER WEEK

OR

E158b.

1. EVERY DAY	DK	RF
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*NOTE: THE IWER ENTERS INFORMATION AT ANY 1 OF THE ABOVE 3 VARIABLE LOCATIONS ON THE SCREEN. ENTRY AT ONE LOCATION TAKES IWER IMMEDIATELY TO E159, EXCEPT FOR E158=96.*

E159 BRANCHPOINT: IF PERSON DID NOT HELP IN LAST MONTH, OR IS NOT A HELPER (E158=96), GO TO E158-2 BRANCHPOINT

E159. On the days [*CHILDn NAME/CHILDn NAME* & *CHILDn's SPOUSE NAME/HELPERn NAME*] helps you, about how many hours per day is that?

[IWER: LESS THAN AN HOUR = 1]

	DK	RF
HOURS		

E160. AFFIRM SEX OF HELPER:  
 (IS [CHILDn NAME/CHILDn NAME & CHILDn's SPOUSE NAME/HELPERn NAME] ...?)  
 [IWER: ASKED ONLY IF NECESSARY]

1. MALE	2. FEMALE	3. AGENCY/PROFESSIONAL/ EMPLOYEES OF "INSTITUTION"	8. DK	9. RF
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E161 BRANCHPOINT: IF HELPER IS NOT A GRANDCHILD, GO TO E162

E161. IF GRANDCHILD:  
 (Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E162. Is [CHILDn NAME/CHILDn NAME & CHILDn's SPOUSE NAME/HELPERn NAME] paid to help you?

1. YES	5. NO	8. DK	9. RF
GO TO E158-2 BRANCHPOINT			

E163. Does Medicaid or insurance help pay [CHILDn NAME/CHILDn NAME & CHILDn's SPOUSE NAME/HELPERn NAME]?

1. YES	5. NO	8. DK	9. RF
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E164. (Not counting expenses paid by Medicaid or insurance,) about how much did you (and your [husband/wife/partner]) end up paying [CHILDn NAME/CHILDn NAME & CHILDn's SPOUSE NAME/HELPERn NAME] for the last month?

AMOUNT	0	DK	RF
GO TO E166 BRANCHPOINT			

E165. PER:

1. MONTH	2. WEEK	3. DAY	5. YEAR	8. DK	9. RF
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E166 BRANCHPOINT: IF R GAVE AMOUNT, GO TO E167 BRANCHPOINT

E166. Did it amount to less than \$100 per month, more than \$100 per month or what?

- |                                 |                             |                                 |       |       |
|---------------------------------|-----------------------------|---------------------------------|-------|-------|
| 1. LESS THAN<br>\$100 PER MONTH | 3. ABOUT \$100<br>PER MONTH | 5. MORE THAN<br>\$100 PER MONTH | 8. DK | 9. RF |
|---------------------------------|-----------------------------|---------------------------------|-------|-------|

E167 BRANCHPOINT: IF R PAID NOTHING FOR HELPER (E164={0 and NOT DK and NOT RF}), GO TO E158-2 BRANCHPOINT

E167. Does any other person help you (and your [husband/wife/partner]) pay this cost?

- |        |       |       |       |
|--------|-------|-------|-------|
| 1. YES | 5. NO | 8. DK | 9. RF |
|--------|-------|-------|-------|
- GO TO E158-2 BRANCHPOINT

E168. Is that a (child or other) relative of yours (and your [husband/wife/partner]), or is that someone else?

- |                                      |                      |                    |       |       |
|--------------------------------------|----------------------|--------------------|-------|-------|
| 1. CHILD/CHILD-<br>IN-LAW/GRANDCHILD | 2. OTHER<br>RELATIVE | 3. SOMEONE<br>ELSE | 8. DK | 9. RF |
|--------------------------------------|----------------------|--------------------|-------|-------|
- GO TO E158-2 BRANCHPOINT

E169. (Which child is that?)

IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E158-2 BRANCHPOINT: IF HELPER IS NOT MARRIED, GO TO END OF E158 LOOP (AFTER E169-2)

E158-2. During the last month, on about how many days did *HELPERn's SPOUSE NAME* help you?

[IWER: ENTER "96" IN "DAYS IN LAST MONTH" IF THE PERSON IS NOT A HELPER OR THE PERSON DID NOT HELP IN LAST MONTH]

	96. NOT A HELPER IN LAST MONTH	DK	RF
E158-2. DAYS IN LAST MONTH	GO TO END OF E158 LOOP (AFTER E169-2)		

OR

	DK	RF
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E158a-2. DAYS PER WEEK

OR

E158b-2.

1. EVERY DAY	DK	RF
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NOTE: THE IWER ENTERS INFORMATION AT ANY 1 OF THE ABOVE 3 VARIABLE LOCATIONS ON THE SCREEN. ENTRY AT ONE LOCATION TAKES IWER IMMEDIATELY TO E159, EXCEPT FOR E158-2=96.

E159-2 BRANCHPOINT: IF PERSON DID NOT HELP IN LAST MONTH, OR IS NOT A HELPER (E158-2=96), GO TO END OF E158 LOOP (AFTER E169-2)

E159-2. On the days *HELPERn's SPOUSE NAME* helps you, about how many hours per day is that?

[IWER: LESS THAN AN HOUR = 1]

	DK	RF
HOURS		

E160-2. AFFIRM SEX OF HELPER:

(IS *HELPERn's SPOUSE NAME* ...?)

[IWER: ASKED ONLY IF NECESSARY]

1. MALE	2. FEMALE	3. AGENCY/PROFESSIONAL/ EMPLOYEES OF "INSTITUTION"	8. DK	9. RF
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E161-2 BRANCHPOINT: IF HELPER IS NOT A GRANDCHILD, GO TO E162-2

E161-2. IF GRANDCHILD:  
 (Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

E162-2. Is HELPERn's SPOUSE NAME paid to help you?

1. YES	5. NO	8. DK	9. RF
GO TO END OF E158 LOOP (AFTER E169-2)			

E163-2. Does Medicaid or insurance help pay HELPERn's SPOUSE NAME?

1. YES	5. NO	8. DK	9. RF
--------	-------	-------	-------

E164-2. (Not counting expenses paid by Medicaid or insurance,) about how much did you (and your [husband/wife/partner]) end up paying HELPERn's SPOUSE NAME for the last month?

_____	0	DK	RF
AMOUNT	GO TO E166-2 BRANCHPOINT		

E165-2. PER:

1. MONTH	2. WEEK	3. DAY	5. YEAR	8. DK	9. RF
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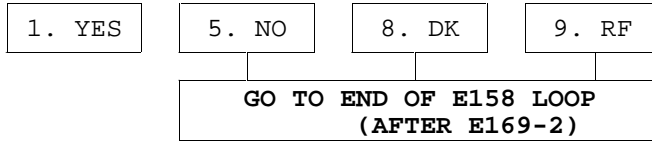
E166-2 BRANCHPOINT: IF R GAVE AMOUNT, GO TO E167-2 BRANCHPOINT

E166-2. Did it amount to less than \$100 per month, more than \$100 per month or what?

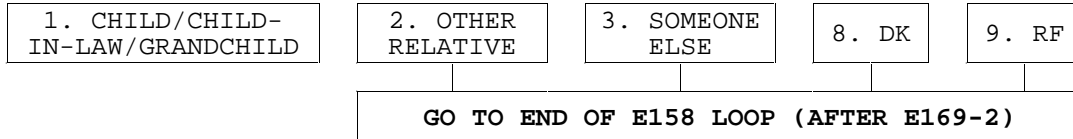
1. LESS THAN \$100 PER MONTH	3. ABOUT \$100 PER MONTH	5. MORE THAN \$100 PER MONTH	8. DK	9. RF
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E167-2 BRANCHPOINT: IF R PAID NOTHING FOR HELPER, GO TO END OF E158 LOOP (AFTER E169-2)

E167-2. Does any other person help you (and your [husband/wife/partner]) pay this cost?



E168-2. Is that a (child or other) relative of yours (and your [husband/wife/partner]), or is that someone else?



E169-2. (Which child is that?)

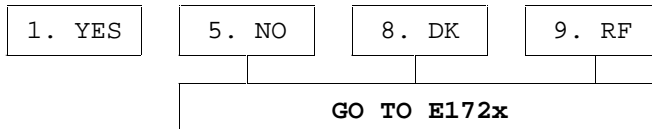
IF GRANDCHILD:  
(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
DK
RF

\*\*\*END OF E158 LOOP: IF THERE IS ANOTHER HELPER ON LIST, GO BACK TO BEGINNING OF E158 LOOP. IF NOT, CONTINUE ON TO E171 BRANCHPOINT.\*\*\*

E171 BRANCHPOINT: IF R HAS NO CHILDREN/STEPCHILDREN, GO TO E172x

E171. [Since R's LAST IW MONTH, YEAR/In the last two years], have your (and your [husband's/wife's/partner's]) [child/children] (or grandchildren) spent any time helping you, yourself, with household chores, errands, transportation, etc.?





E171a. (Which child(ren) helped?)

[IWER: CHOOSE ALL THAT APPLY]

IF GRANDCHILD:

(Which of your children is the parent of that grandchild?)

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
38. ALL MY CHILDREN
DK
RF

E172x. Have you spent any time in the past 12 months doing volunteer work for religious, educational, health-related or other charitable organizations?

1. YES	5. NO	8. DK	9. RF
GO TO E173			

E172. Altogether, how many hours did you spend in the past 12 months doing volunteer work for such organizations?

[IWER: DO NOT PROBE DK/RF]

_____	DK	RF
HOURS		
GO TO E173		

E172a. Would it be less than 100 hours, more than 100 hours, or what?

1. LESS THAN 100 HOURS	3. ABOUT 100 HOURS	5. MORE THAN 100 HOURS	8. DK	9. RF
GO TO E173			GO TO E173	

E172b. Would it be less than 200 hours, more than 200 hours, or what?

1. LESS THAN 200 HOURS	3. ABOUT 200 HOURS	5. MORE THAN 200 HOURS	8. DK	9. RF
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E173. Altogether, about how many hours did you spend in the past 12 months helping friends, neighbors, or relatives who did not live with you and did not pay you for the help?

[IWER: DO NOT PROBE DK/RF]

\_\_\_\_\_

HOURS

DK

RF

**GO TO E174  
BRANCHPOINT**

E173a. Would it be less than 100 hours, more than 100 hours, or what?

1. LESS THAN  
100 HOURS

3. ABOUT 100  
HOURS

5. MORE THAN  
100 HOURS

8. DK

9. RF

**GO TO E174 BRANCHPOINT**

**GO TO E174  
BRANCHPOINT**

E173b. Would it be less than 200 hours, more than 200 hours, or what?

1. LESS THAN  
200 HOURS

3. ABOUT 200  
HOURS

5. MORE THAN  
200 HOURS

8. DK

9. RF

E174 BRANCHPOINT: IF R HAD HELPERS IN THE E158 LOOP, GO TO EASSIST

E174. Suppose in the future, you needed help with basic personal care activities like eating or dressing.

Do you have relatives or friends (besides your [husband/wife/partner]) who would be willing and able to help you over a long period of time?

1. YES

5. NO

8. DK

9. RF

**GO TO EASSIST**

E174a. What is the relationship to you of that person or persons?

[IWER: CHOOSE ALL THAT APPLY]

1. CHILD/  
CHILD-IN-  
LAW

2. GRANDCHILD

2. OTHER  
RELATIVE

3. SOMEONE  
ELSE

8. DK

9. RF

**GO TO E174c BRANCHPOINT**

E174b. (Which [child/children] is that?)

[IWER: CHOOSE ALL THAT APPLY]

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
38. ALL MY CHILDREN
DK
RF

E174c BRANCHPOINT: IF NOT GRANDCHILD (E174a NOT 2), GO TO EASSIST

E174c. IF ONE GRANDCHILD:

(Which of your children is the parent of that grandchild?)

IF MORE THAN ONE GRANDCHILD:

(Which of your children are the parents of those grandchildren?)

[IWER: CHOOSE ALL THAT APPLY]

CHILD NAME(S) [DISPLAYED BY SURVEYCRAFT FROM PREVIOUS RESPONSES]
01. TO 20. CHILD NAME(S)
[ROWS PROVIDED BY SURVEYCRAFT AS NECESSARY]
37. DECEASED CHILD
38. ALL MY CHILDREN
DK
RF

EASSIST

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION E — HEALTH COST AND ADL?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

GO TO SECTION F