

2023 Ohio Medicaid Assessment Survey: Methodology Report

FINAL DRAFT

Prepared for

**Ohio Colleges of Medicine
Government Resource Center**

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1. Introduction

1.1. Project Overview

The Ohio Department of Medicaid (ODM), the Ohio Department of Health (ODH), the Ohio Department of Mental Health and Addiction Services, the Ohio Colleges of Medicine Government Resource Center (GRC), The Ohio State University (OSU), and other health-associated agencies in Ohio teamed with RTI International to conduct the 2023 Ohio Medicaid Assessment Survey (OMAS), the 10th iteration of the OMAS series of surveys, dating back to 1998.¹ Similar to earlier iterations, the 2023 OMAS collected data on health statuses, health insurance status, health care access and utilization, health risks, and demographics of Ohioans enrolled in Medicaid, potentially Medicaid eligible, and not enrolled in Medicaid to help the Ohio Medicaid program and other state programs operate efficiently and effectively in addressing the health needs of the state. Specifically, the 2023 OMAS:

- Provides data comparable with data from earlier versions of the OMAS and the Ohio Family Health Survey (OFHS) conducted in 2021, 2019, 2017, 2015, and 2012,² to assess changes in Ohio over time,
- Informs policies and programs that serve Ohio's Medicaid and potentially Medicaid-eligible populations,
- Helps policymakers assess the impact of recent changes in Ohio's economic climate, the health care marketplace, and government programs related to health care reform on Ohioans' health status and access to care, and
- Helps policymakers evaluate the health risks of Ohioans.

The 2023 OMAS was fielded from August 29, 2023, through January 31, 2024, and used an address-based sampling (ABS) frame for the main sample. This was the first OMAS iteration to use an exclusively ABS frame for the main study, which was the result of a process that began in 2019 with an ABS pilot and was expanded in 2021 with the use of ABS and random-digit dialing (RDD) samples for the main study. Findings from the 2019 and 2021 iterations suggested that moving to an ABS design would offer numerous benefits over RDD and successfully address the response rate challenges that many studies using RDD samples are experiencing. In addition, GRC and RTI conducted two major fielding experiments for the 2023 OMAS to learn how the protocol for surveying Ohioans can be further improved in the future.

Representatives from the Ohio Department of Medicaid, Ohio Department of Health, Ohio Department of Mental Health and Addiction Services, Ohio Department of Developmental Disabilities, Ohio Department of Aging, Ohio Department of Rehabilitation and Correction, Ohio Commission on Minority Health, Ohio University, University of Cincinnati, Mount Union University, Ohio State

¹ For 1998, 2004, 2008, and 2010, iterations of this survey were referred to as the Ohio Family Health Survey (OFHS). The name was changed for the 2012 survey to reflect the primary role of Ohio Medicaid in funding and leading the survey effort.

² Because of methodological differences between the two studies, comparing results from the 2023 OMAS with results from the 1998 OFHS is not recommended.

University, GRC, and RTI formed a working group called the OMAS Executive Committee (EC). The goal of the OMAS EC was to enable a highly transparent and representative dynamic among state stakeholders, academic researchers, and RTI. The OMAS EC met in early 2022 to initiate the project and review methodological procedures for implementing the OMAS and continued to meet throughout the OMAS project duration. This collaboration continued through weekly meetings, ongoing reporting of results, and co-development of the survey instruments and methodological procedures for data capture, cleaning, and reporting.

The OMAS EC was concerned with maintaining a high standard for quality assurance in project procedures to preserve the validity and reliability of the data collected, especially with this iteration being the first to fully transition the main study to exclusively use an ABS frame. This section of the report describes the procedures involved in achieving these objectives.

1.2. Design Overview

1.2.1. Sample Design

The sample design for the 2023 OMAS differed from all prior iterations. The main study exclusively used an ABS (the OMAS main, or ABS, sample). In addition, the 2023 OMAS included a second smaller Medicaid list sample subgroup (the OMAS Medicaid sample). That sample design is explained in *Section 2*.

1.2.2. Questionnaire Content

The 2023 OMAS questionnaire covered several topics regarding the health and health insurance status of Ohioans. Topics included the following:

- Type of health insurance coverage, if any
- General physical, mental, and dental health statuses
- Diagnosis of select health conditions
- Use of tobacco, alcohol, prescription pain relievers, and other substances
- Sources of care, health care utilization, and unmet needs
- Access to health care
- Employment status
- Select determinants of health
- Health-associated demographics

The survey consisted of two main sections—one for the randomly selected adult in the household and a second for an adult proxy responding for a randomly selected child aged 18 or younger, if one was presently residing in the adult respondent's household and the respondent had sufficient knowledge of that child's health. Consistent with prior iterations of the OMAS, the age at which one was considered a child for purposes of household enumeration and administration of the child survey instrument was 18 years or younger. This kept the child age classification in line with the Ohio Medicaid program eligibility rules for children.

Sample members in the main sample and Medicaid frames were administered the same questionnaire—however, sample members in the Medicaid frame were asked slightly different

questions about their health insurance due to their known insured status, and only ABS members were invited to complete the child section. Additional details on the instrumentation can be found in **Section 3**.

1.2.3. Data Collection

Data collection was conducted using a two-release structure from August 29, 2023, through January 31, 2024. Although sample members in the ABS and the Medicaid sample completed mostly the same questionnaire, the ways in which they were invited to participate differed based on available contact information on each frame, and the modes in which they could complete the survey differed.

Sample members in the ABS were invited to participate by mail, and a combination of web interviewing (computer-assisted web interviewing [CAWI]) and paper surveys (paper-and-pencil interviewing [PAPI]) were used to collect responses. ABS sample members could call the study team and complete the survey by phone if they were unable to complete by web or paper. Up to five separate mailings were sent. During the first release of data collection, a sequential and a concurrent administration were used, and an incentive experiment was performed. During the second release of data collection, sequential administration was used.

Sample members in the smaller Medicaid sample were invited to participate by mail, phone, or text messaging, and a combination of web and telephone (computer-assisted telephone interviewing [CATI]) was used to collect responses.

Details on the data collection protocol, including mailing differences between the ABS and Medicaid frames, are specified in **Section 4**.

1.3. Changes from Prior OMAS Iterations

The 2023 OMAS featured multiple significant changes over prior iterations of the study to improve the protocol for 2023 and future surveys. Additional details on these enhancements and experiments can be found in their respective sections in this report.

1.3.1. Evolution from RDD to ABS

The OMAS was historically a random-digit dialing (RDD) survey. However, declining response rates to RDD surveys and complexities regarding cell phone RDD frames, which have resulted in increased data collection costs, have been of concern for many years and have resulted in many studies transitioning to other sampling protocols. The OMAS response rate was 30.0% in 2012, 24.0% in 2015, 22.5% in 2017, and 22.2% in 2019—a clear downward trend despite many efforts to improve response rates.

Address-based sampling (ABS) has emerged as a cost-effective means of conducting surveys through mailed invitations, aided by the availability of the U.S. Postal Service's (USPS's) Computerized Delivery Sequence (CDS) file (Czajka & Beyler, 2016). The ABS frame can also better target subpopulations of interest (e.g., race/ethnicity, lower income) based on known Census tract information for all addresses in Ohio—which is not practical with RDD samples. These benefits led the OMAS team to investigate the viability of using ABS beginning in 2019.

The transition of the OMAS from RDD to ABS began with a pilot study performed during the 2019 iteration, where a web and a paper survey were concurrently offered to sample members in a limited

number of Ohio counties using an ABS frame. The 2019 ABS pilot collected a total of 1,561 surveys—985 via web and 576 via paper—across five counties: Athens (rural), Gallia (rural), Lake (suburban), Montgomery (metropolitan), and Washington (rural). This number was sufficient to meet all analytical goals for the 2019 ABS pilot and to determine that use of ABS was strongly justifiable for future OMAS iterations.

The success of the 2019 OMAS ABS pilot led to the use of an ABS in combination with the RDD sample for the 2021 study. The original goal was for the ABS to yield 50% of completions and for the RDD sample to yield the other 50%. During this study, the RDD sample underperformed, and the ABS overperformed—in all, the ABS yielded 81% (25,712) of all 31,585 completions during the 2021 OMAS. The success of the ABS during 2021 led to the final decision that the 2023 survey and onward would exclusively use an ABS in place of RDD.

1.3.2. Inclusion of a Paper Survey

Paper surveys have higher production, mailing, and data processing costs than web surveys. However, paper surveys can secure responses from sample members who would not otherwise complete the survey and can reduce response bias. They are also more likely to secure responses from sample members who are older, female, non-White, nonmarried, with lower education levels, fully retired, or with lower income (Kelfve et al., 2020). Therefore, it was determined that to produce the best population estimates for the 2023 OMAS, the higher-cost paper mode was justified.

In addition, use of a mixed-mode approach that uses web and paper can achieve higher response rates than a web-only survey can. In 2021, OMAS sample members in the ABS portion of the study received only one paper survey, yet this paper mode still accounted for 26% of all responses in the 2021 ABS (21% of all responses across both the ABS and RDD samples [GRC, 2022]).

Between the potential to produce more accurate population estimates and achieving higher response rates, the GRC and RTI team decided to not only use a paper survey in 2023, but also to mail two paper surveys to sample members during the data collection protocol. Although the web portion of the survey secured the highest number of responses, use of a paper mode played a crucial role in achieving—and exceeding—the target number of responses.

1.3.3. 2023 Experiments

Although the experiments conducted in 2019 and 2021 proved the viability of using an ABS design, several key research questions still remained regarding the best ways of administering a general population survey to Ohioans in the mid-2020s and beyond. The two most significant questions regarded (1) the administration format of the survey's modes, and (2) how to best present the pre-incentive to respondents.

1. When administering a mixed-mode survey that uses web and paper components, two common formats are sequential and concurrent administration. In a sequential format, only one mode (usually web) is offered initially. Then, in later mailings to nonrespondents, a second mode is added. When web is the initial mode offered, this format is commonly referred to as “push to web.” Alternatively, with a concurrent design, sample members are offered their choice of either mode of participation in the first survey invitation. For the 2023 OMAS, both formats presented potential advantages. However, not knowing which format would yield the best data quality and cost efficiency, the 2023 OMAS ABS split the first sample release between concurrent and sequential groups to examine response rates, data quality, and respondent

composition by mode. Upon concluding this experiment, the GRC and RTI teams determined that the sequential “push-to-web” option was the better format to use in the future and structured the second sample release to exclusively use a sequential administration. The details of this experiment are discussed in **Section 4**.

2. Incentives present one of the most effective ways to secure responses, and the literature regarding the use of small prepaid cash incentives is well established. For this reason, the OMAS used \$2 cash pre-incentives with the ABS portion of the 2021 iteration. However, the \$2 incentive was inside the envelope and not visible unless the envelope was opened. Recent literature and experience with other Ohio Medicaid studies has suggested that making a portion of a cash pre-incentive visible through the outer mailing envelope could further increase response rates. Subsequently, the GRC and RTI teams conducted an incentive experiment in the first sample release in which some sample members were mailed an invitation where the incentive was not visible through the envelope, and other sample members were mailed an invitation where the cash incentive was visible. The GRC and RTI teams found that making the cash incentive visible increased response rates by nearly 2%—a statistically significant difference and a practical one, because this increase can be achieved for almost identical material and production costs. As a result of this experiment, the GRC and RTI teams mailed all sample members an invitation with a visible cash incentive during the second sample release. The details of this experiment are also discussed in **Section 4**.

1.3.4. Addition of the Medicaid List Frame

Although the ABS targeted the entire adult population of Ohio, the 2023 OMAS was also administered to a smaller Medicaid list frame. This was done (1) to more efficiently target Medicaid enrollees in the OMAS sample, and (2) to allow for estimates by Medicaid eligibility group, particularly the Affordable Care Act (ACA) Medicaid Expansion group (also known as Group VIII). This is because Medicaid enrollees themselves often do not know the Medicaid eligibility group in which they are enrolled and having a Medicaid list sample allows for confirming an individual’s eligibility group in Medicaid administrative data. Details of the Medicaid list frame are discussed in **Section 4**.

1.4. Institutional Review Board Determination

Because the 2023 OMAS collected data about adult respondents and child respondents via an adult proxy, study documents, including the design, research protocol, and questionnaires, were delivered to the institutional review boards (IRBs) at OSU and RTI. The IRBs reviewed materials and spoke with the principal investigators (PIs) at OSU and GRC and the project director at RTI to assess whether the 2023 OMAS fell under their respective responsibilities for protecting human subjects in sponsored research. Both IRBs determined that the 2023 OMAS was research in support of governmental agency programs (work for hire), which under federal code does not necessarily require IRB oversight. Members of the OSU IRB agreed that GRC, in collaboration with ODH, would field and respond to respondents’ calls about the survey, including complaints and requests for information, and that GRC and ODH staff taking such calls would report any concerns or adverse events to the OSU and RTI IRBs.

2. Sampling

2.1. Introduction

2.1.1. Design Overview

The *target population* for the 2023 OMAS was all noninstitutionalized residents of Ohio. In the target population, there were several analytic subgroups of interest, some of which included the following:

- African American/Black adults
- Non-White adults (included adults who identified as any race or ethnicity other than non-Hispanic White)
- Adults with low income
- Adults enrolled in Group VIII Medicaid
- People (adults and children) in each county in Ohio
- Children

To help maximize the ability of the design to reach a representative population of Ohioans and each subgroup of interest, the *sampling population* for the 2023 OMAS consisted of a stratified dual-frame design with oversampling of key populations of interest. The two frames were these:

- Address-based listing of postal addresses for non-group quarters housing units
- Medicaid administrative file listing currently enrolled people with Medicaid coverage

2.1.2. Sampling Allocation across Frames

Of the two frames, the Medicaid administrative frame was the only one that could identify participation in specific Medicaid programs, such as the Group VIII program; prior work has demonstrated that although Medicaid enrollees likely know that they have Medicaid, they struggle to identify which Medicaid program they have. Although some sampled households from the ABS frame had Medicaid enrollees, the ABS frame could not identify which households had a person with Medicaid (or a particular type of Medicaid). These facts about the sampling frames led to the following design decisions:

- The sample used to analyze people with Group VIII Medicaid and other specific Medicaid programs came from only the Medicaid administrative file.
- The ABS and Medicaid samples would be blended. “Blending” is defined as the combining of survey data from separate samples to create a common dataset. The characteristic that was used to blend (combine) the samples from the two frames was whether the person had any type of Medicaid. To allow this to happen, all Medicaid enrollment types needed to be sampled from the Medicaid administrative file (i.e., not only people in Group VIII). The ABS did not attempt to distinguish what type of Medicaid each respondent was enrolled in.

Similar to other OMAS studies, the target total sample size was around 35,000 respondents. This total sample size achieved the desired precision level at the state level for all subgroups of interest and allowed for estimates of key outcomes (e.g., insurance status) at the county level.

Table 2-1 presents the allocation of the sample across the two sampling frames. The allocation was derived by first determining the target sample size of Medicaid Group VIII enrollees. Based on previous Group VIII surveys in Ohio, 6,000 respondents were sufficient to achieve the level of precision needed for key outcomes. However, because the sample from the Medicaid administrative file needed to represent all Group VIII people enrolled in Medicaid for the 2023 OMAS, additional sample was allocated to the Medicaid administrative frame. Because Group VIII enrollees make up about 60% of Ohio’s Medicaid population, an additional 4,000 non-Group VIII enrollees (10,000 total) were allocated to the Medicaid frame. This addition of 4,000 respondents from other Medicaid programs also allowed for statewide, program-specific estimates for other programs of interest to ODM such as MyCare; non-dually eligible aged, blind, or disabled (ABD); and so on. The ABS frame—which covered the Medicaid and non-Medicaid populations in Ohio—was allocated the remaining 25,000 target responses.

Table 2-1. Allocation of the 2023 OMAS Sample, by Sampling Frame

Frame Type	Target Sample	Sample Allocation
Address-based sampling frame	25,000	71.4%
Medicaid administrative frame	10,000	28.6%

The next two sections detail the plan for selecting the sample from the ABS and Medicaid administrative frames, respectively.

2.2. Sample Design: ABS Frame

2.2.1. ABS Sampling Frame

The ABS sampling frame consisted of the CDS addresses from USPS, including city-style addresses, Rural Route Boxes, Highway Contract Boxes, and Only Way to Get Mail (OWGM) PO Boxes (vendor and RTI identified) in all 88 Ohio counties. The frame excluded the following:

- Drop points with more than four units at one address
- Non-OWGM PO Boxes
- Addresses flagged business only, seasonal, or educational

For the 2023 OMAS, the ABS frame based on 2023 second-quarter housing information was used to draw the sample.

2.2.2. Stratification

The sample design consisted of primary and secondary strata. The primary strata were the counties in Ohio. The secondary strata were based on person characteristics (e.g., demographics) of interest.

Primary Stratification

The primary stratification consisted of the 88 counties in Ohio.

Secondary Stratification

The secondary stratification identified Census block groups in each county that had high concentrations of the following:

- *Non-White adults*, defined as adults classified by the U.S. Census Bureau in any racial or ethnic group other than non-Hispanic White
- *Low-income adults*, defined as adults living in a household with household income less than \$25,000—the federal poverty level (FPL) for a family of three (100% FPL in 2023 was \$24,860)
- *Children*, defined as people aged 17 or younger—although Medicaid defines a child as a person aged 18 or younger, the stratification is based on the Census definition of a child, which excludes people aged 18

Whether a county had a “high concentration” of any of the three characteristics used for stratification was determined at the Census block group level. Three factors were used to determine whether a county had a “high concentration” of a characteristic:

1. *The percentage of people with the characteristic of interest within a Census block group.* A threshold of 40% (or above) was used to identify which Census block groups would be included in the high-concentration strata.
2. *The percentage of all Census block groups in the county that met the threshold.* If the percentage of block groups that met the threshold was below 10%, then no stratification for the characteristic was made in that county.
3. *The number of Census block groups in the county.* If the number of block groups in the county that met the threshold was below 5, then no stratification was made for the characteristic in that county.

Table 2-2 presents the values of each factor used to perform the secondary stratification within county. Variations of these values were evaluated as part of a sensitivity analysis. This analysis showed that the selected values were most optimal in terms of the number of strata created and the expected design effect.

Table 2-2. Values Used to Define High-Concentration Strata, by Characteristic Group

Characteristic Group	Minimum Percentage of People with the Characteristic	Minimum Percentage of All CBGs	Minimum Number of CBGs
Percentage of households with people younger than age 18	40%	10%	5
Percentage of non-White people	40%	10%	5

Characteristic Group	Minimum Percentage of People with the Characteristic	Minimum Percentage of All CBGs	Minimum Number of CBGs
Percentage of households with income ≤\$25,000	40%	10%	5

CBG = Census block group.

Given the three characteristics used for stratification, each county could be split into eight potential secondary strata. **Table 2-3** presents the definition for each of the eight possible secondary strata in a county.

Table 2-3. Secondary Strata Definition

Stratum	High Percentage of Children	High Percentage of Non-White Adults	High Percentage of Low-Income Adults
1	N	N	N
2	N	N	Y
3	N	Y	N
4	N	Y	Y
5	Y	N	N
6	Y	N	Y
7	Y	Y	N
8	Y	Y	Y

2.2.3. Allocation of Sample

The sample allocation of the target number of completed surveys was done in two steps:

1. Allocation to the primary strata (counties)
2. Allocation to the secondary strata (characteristic groupings)

Allocation to the Primary Strata (Counties)

Consistent with prior survey years, the 2023 OMAS was designed to ensure a minimum number of survey responses in each county. This was done (1) to ensure all counties were represented in the estimates, and (2) to allow for small area estimation at the county level. Consistent with the 2021 OMAS design, the minimum number of completes per county was set at 100 for the 2023 design.

Given these parameters, the algorithm for allocating the target number of completed surveys to the primary strata (counties) included the following:

1. Proportionally allocate a base number of completed interviews (25,000) to all counties based on the number of occupied housing units.

2. Identify counties with fewer than 100 cases allocated.
3. Identify counties with between 101 and 149 cases allocated. These counties had their allocation kept fixed to ensure they did not drop below 100 during the reallocation process.
4. Raise the allocation to 100 in counties with initial allocation fewer than 100.
5. Calculate the raking ratio as $rake = [\sum n_1 - \sum(n_2 * I_{n_1 < 150})] / [\sum n_2 - \sum(n_2 * I_{n_1 < 150})]$ if $n_1 > 149$; $rake=1$ otherwise. n_1 is the initial proportional allocation among counties; $I_{n_1 < 150}$ is an indicator of whether the initial allocation is less than 150 ($I_{n_1 < 150} = 1$) or 150 or more ($I_{n_1 < 150} = 0$); and n_2 is the sample allocation after setting the floor in counties with an initial allocation fewer than 100.
6. Adjust down the allocation of counties with allocation of 150 or more so that $n_3 = rake \times n_2$.

Table 2-4 presents the allocation of sample by county. “Allocation” represents the allocation of the targeted 25,000 ABS surveys. The number of frame units in a county could be higher than the population of occupied housing units from the U.S. Census Bureau. This was because the frame count included vacant households, because the Census vacancy flag was not always current or accurate.

Table 2-4. Sample Allocation, by Primary Stratification (County)

County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Allocation
Adams	10,673	27,396	12,008	100
Allen	40,650	99,288	45,409	204
Ashland	20,417	51,238	22,563	109
Ashtabula	37,832	94,376	43,494	190
Athens	22,557	56,215	26,116	121
Auglaize	18,888	45,172	19,683	101
Belmont	25,919	63,964	31,767	139
Brown	17,829	42,968	18,596	100
Butler	139,113	368,347	156,386	701
Carroll	11,298	26,881	11,755	100
Champaign	15,159	38,006	16,597	100
Clark	54,696	131,582	61,157	275
Clermont	78,009	202,356	87,041	393
Clinton	16,528	40,728	17,899	100
Columbiana	41,537	99,264	45,842	209
Coshocton	14,476	36,124	15,632	100

County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Allocation
Crawford	17,782	41,272	19,966	100
Cuyahoga	540,965	1,218,610	620,567	2,723
Darke	20,861	50,907	21,860	112
Defiance	15,297	37,581	16,480	100
Delaware	69,985	198,567	86,753	352
Erie	31,183	73,555	35,840	157
Fairfield	56,339	151,481	62,726	283
Fayette	11,773	28,285	12,410	100
Franklin	511,447	1,262,035	587,263	2,574
Fulton	16,506	41,778	17,166	100
Gallia	11,588	29,249	12,948	100
Geauga	35,298	92,831	36,469	178
Greene	65,604	157,499	72,416	331
Guernsey	16,220	38,597	18,185	100
Hamilton	341,873	794,983	385,789	1,721
Hancock	31,937	73,837	32,782	161
Hardin	11,678	29,106	12,698	100
Harrison	6,223	14,936	6,649	100
Henry	10,992	26,758	11,626	100
Highland	16,772	42,445	18,126	100
Hocking	11,286	27,808	12,379	100
Holmes	12,342	43,005	14,404	100
Huron	22,935	57,416	25,233	123
Jackson	12,780	32,094	15,020	100
Jefferson	27,428	64,038	31,068	147
Knox	23,248	57,868	24,506	124
Lake	96,361	226,846	106,130	485
Lawrence	23,221	59,500	26,354	124
Licking	64,035	169,865	74,251	322
Logan	18,677	44,846	20,164	100
Lorain	120,281	298,372	136,981	605
Lucas	179,930	421,481	205,716	906

County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Allocation
Madison	15,013	38,725	16,250	100
Mahoning	98,472	223,438	108,453	495
Marion	24,737	59,634	26,510	132
Medina	69,007	176,522	76,258	347
Meigs	9,045	22,855	10,401	100
Mercer	16,234	40,363	16,730	100
Miami	41,043	104,406	47,485	206
Monroe	5,745	13,796	6,348	100
Montgomery	224,328	513,369	258,465	1,129
Morgan	6,108	14,460	6,011	100
Morrow	12,922	34,755	14,339	100
Muskingum	33,878	84,125	37,772	170
Noble	5,067	12,055	5,460	100
Ottawa	18,051	39,777	22,241	100
Paulding	7,705	18,711	7,118	100
Perry	13,500	35,679	13,220	100
Pickaway	19,710	53,138	22,799	105
Pike	10,959	27,544	12,013	100
Portage	61,817	155,242	69,896	311
Preble	16,251	40,655	17,503	100
Putnam	13,327	33,598	13,432	100
Richland	48,449	113,969	54,592	244
Ross	28,802	71,050	31,211	145
Sandusky	23,574	57,698	26,123	126
Scioto	29,858	72,464	32,042	151
Seneca	21,648	52,195	23,393	116
Shelby	18,608	48,310	18,827	100
Stark	153,460	363,358	167,777	772
Summit	224,726	531,857	249,684	1,131
Trumbull	85,621	196,531	94,772	431
Tuscarawas	36,631	91,243	40,089	185
Union	20,212	53,540	26,298	108

County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Allocation
Van Wert	11,544	27,953	11,749	100
Vinton	5,140	12,979	5,327	100
Warren	82,957	221,447	96,381	417
Washington	25,197	58,766	26,727	135
Wayne	43,824	111,998	46,306	220
Williams	15,090	35,693	14,995	100
Wood	50,589	123,305	55,408	254
Wyandot	9,081	21,713	9,268	100

ABS = address-based sampling; HU = housing unit.

Allocation to the Secondary Strata

Once the county-level allocation was determined, the sample was further allocated within county to the secondary strata in each county. This was done using the following algorithm:

1. Proportionally allocate the county-level allocation across the secondary strata based on the number of occupied housing units in each secondary stratum (m_1).
2. For any secondary stratum based on at least one “high-concentration” characteristic (i.e., strata 2–8 in **Table 2-3**), apply an oversampling factor of 1.75 ($m_2=1.75*m_1$ if stratum>1) ($m_{2, strata_j} = 1.75 \times m_1$ for $j=2-8$).
3. Adjust the reference stratum so that the sum of secondary strata allocation equals the county allocation. (i.e., $n_3 = \sum_{j=1}^8 m_1$) [$m_{2, strata_1} = n_3 - \sum_{j=2}^8 m_{2, strata_j}$]
4. Set any sample size that is less than 25 to 25 in order to help with variance estimation (m_3).
5. In counties that had a stratum with sample size fewer than 25, adjust sample in strata with sample more than 25 to reconcile with total allocation through a similar raking procedure used for county-level allocation (m_4).
6. Determine the design effect due to the unequal weighting effect (UWE) in each county; if the UWE is greater than 3.0, collapse all secondary strata into a single county-level stratum.

After this process was implemented, there were 200 strata. **Table 2-5** presents the number of counties that had strata for each “high-concentration” group type. **Table 2-6** shows the specific counties that had each “high-concentration” stratum. There were 18 counties that did not have any additional stratification, 54 counties that had one high-concentration stratum, 13 counties that had two high-concentration strata, and 3 counties (Cuyahoga, Franklin, and Montgomery) that had high-concentration strata for all three group types. **Table 2-7** presents the sample allocation by secondary stratum.

Table 2-5. Number of Counties with a “High-Concentration” Stratum, by Group Type

Group Type	Number of Counties with a High-Concentration Stratum
Non-White adults	13
Low-income adults	17
Children	59

Table 2-6. Counties with High-Concentration Strata, by Group Type

County	Non-White Adults	Low-Income Adults	Children
Adams		X	
Allen	X		X
Ashland			
Ashtabula		X	
Athens		X	
Auglaize			X
Belmont		X	
Brown			X
Butler	X		X
Carroll			
Champaign			X
Clark	X		
Clermont			X
Clinton			X
Columbiana			X
Coshocton			X
Crawford			X
Cuyahoga	X	X	X
Darke			X
Defiance			X
Delaware			X
Erie	X		
Fairfield			X
Fayette			
Franklin	X	X	X
Fulton			

County	Non-White Adults	Low-Income Adults	Children
Gallia			
Geauga			X
Greene		X	X
Guernsey		X	
Hamilton	X		X
Hancock			X
Hardin			X
Harrison			
Henry			
Highland		X	
Hocking			X
Holmes			X
Huron			X
Jackson			X
Jefferson		X	
Knox			X
Lake			X
Lawrence			X
Licking			X
Logan			
Lorain	X		X
Lucas	X		X
Madison			X
Mahoning	X		X
Marion		X	X
Medina			X
Meigs		X	
Mercer			X
Miami			X
Monroe			
Montgomery	X	X	X
Morgan			
Morrow			X

County	Non-White Adults	Low-Income Adults	Children
Muskingum			X
Noble			
Ottawa			
Paulding			
Perry			X
Pickaway			X
Pike			
Portage			X
Preble			
Putnam			
Richland			X
Ross			X
Sandusky			X
Scioto		X	X
Seneca			X
Shelby			X
Stark	X		X
Summit	X		X
Trumbull		X	X
Tuscarawas			X
Union			X
Van Wert			X
Vinton			
Warren			X
Washington		X	
Wayne			X
Williams			X
Wood		X	X
Wyandot			

Table 2-7. Sample Allocation, by Final Stratification

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
1	Adams	8,134	21,516	8,882	Reference	58
2	Adams	2,539	5,880	3,126	HIGH %: Low income	42
3	Allen	30,005	72,220	33,260	Reference	105
4	Allen	3,633	8,262	4,242	HIGH %: Non-White	32
5	Allen	4,854	13,050	5,220	HIGH %: Children	42
6	Allen	2,158	5,756	2,687	HIGH %: Children, non-White	25
7	Ashland	20,417	51,238	22,563	Reference	109
8	Ashtabula	31,053	79,767	35,732	Reference	130
9	Ashtabula	6,779	14,609	7,762	HIGH %: Low income	60
10	Athens	17,982	44,830	20,144	Reference	77
11	Athens	4,575	11,385	5,972	HIGH %: Low income	44
12	Auglaize	15,045	34,575	15,632	Reference	64
13	Auglaize	3,843	10,597	4,051	HIGH %: Children	37
14	Belmont	23,171	58,306	28,541	Reference	113
15	Belmont	2,748	5,658	3,226	HIGH %: Low income	26
16	Brown	13,556	31,249	14,302	Reference	58
17	Brown	4,273	11,719	4,294	HIGH %: Children	42
18	Butler	91,699	230,072	103,004	Reference	282
19	Butler	11,808	27,388	13,660	HIGH %: Non-White	103
20	Butler	31,277	98,186	35,246	HIGH %: Children	277
21	Butler	4,329	12,701	4,476	HIGH %: Children, non-White	39
22	Carroll	11,298	26,881	11,755	Reference	100
23	Champaign	13,162	32,662	14,742	Reference	75
24	Champaign	1,997	5,344	1,855	HIGH %: Children	25
25	Clark	49,550	118,800	54,944	Reference	229
26	Clark	5,146	12,782	6,213	HIGH %: Non-White	46
27	Clermont	61,294	152,106	67,659	Reference	246
28	Clermont	16,715	50,250	19,382	HIGH %: Children	147
29	Clinton	13,797	32,587	15,152	Reference	70
30	Clinton	2,731	8,141	2,747	HIGH %: Children	30
31	Columbiana	37,451	87,696	41,363	Reference	172
32	Columbiana	4,086	11,568	4,479	HIGH %: Children	37
33	Coshocton	12,753	30,799	13,726	Reference	75
34	Coshocton	1,723	5,325	1,906	HIGH %: Children	25
35	Crawford	15,796	35,918	17,545	Reference	75
36	Crawford	1,986	5,354	2,421	HIGH %: Children	25
37	Cuyahoga	275,348	620,246	312,571	Reference	382

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
38	Cuyahoga	23,317	44,265	28,914	HIGH %: Low income	205
39	Cuyahoga	106,017	238,075	121,941	HIGH %: Non-White	935
40	Cuyahoga	80,437	158,410	94,394	HIGH %: Non-White, low income	709
41	Cuyahoga	20,646	62,109	23,295	HIGH %: Children	182
42	Cuyahoga	3,354	8,431	3,981	HIGH %: Children, low income	30
43	Cuyahoga	17,285	48,038	19,038	HIGH %: Children, non-White	152
44	Cuyahoga	14,561	39,036	16,433	HIGH %: Children, non-White, low income	128
45	Darke	18,239	43,532	19,662	Reference	87
46	Darke	2,622	7,375	2,198	HIGH %: Children	25
47	Defiance	13,277	32,059	14,102	Reference	75
48	Defiance	2,020	5,522	2,378	HIGH %: Children	25
49	Delaware	29,758	75,969	36,078	Reference	25
50	Delaware	40,227	122,598	50,675	HIGH %: Children	327
51	Erie	26,274	62,867	30,252	Reference	113
52	Erie	4,909	10,688	5,588	HIGH %: Non-White	44
53	Fairfield	39,760	101,863	44,983	Reference	138
54	Fairfield	16,579	49,618	17,743	HIGH %: Children	145
55	Fayette	11,773	28,285	12,410	Reference	100
56	Franklin	251,132	568,921	291,168	Reference	268
57	Franklin	11,734	30,233	16,491	HIGH %: Low income	103
58	Franklin	85,998	203,808	98,921	HIGH %: Non-White	758
59	Franklin	26,613	60,158	31,648	HIGH %: Non-White, low income	235
60	Franklin	74,971	218,932	80,828	HIGH %: Children	660
61	Franklin	1,383	3,909	1,594	HIGH %: Children, low income	25
62	Franklin	40,317	119,366	44,715	HIGH %: Children, non-White	355
63	Franklin	19,299	56,708	21,898	HIGH %: Children, non-White, low income	170
64	Fulton	16,506	41,778	17,166	Reference	100
65	Gallia	11,588	29,249	12,948	Reference	100
66	Geauga	32,781	82,608	33,639	Reference	153
67	Geauga	2,517	10,223	2,830	HIGH %: Children	25
68	Greene	52,569	123,432	57,732	Reference	206
69	Greene	4,661	10,463	5,034	HIGH %: Low income	40

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
70	Greene	6,643	19,455	7,423	HIGH %: Children	60
71	Greene	1,731	4,149	2,227	HIGH %: Children, low income	25
72	Guernsey	13,407	32,110	14,800	Reference	70
73	Guernsey	2,813	6,487	3,385	HIGH %: Low income	30
74	Hamilton	182,787	410,937	207,462	Reference	319
75	Hamilton	96,213	205,106	110,209	HIGH %: Non-White	847
76	Hamilton	35,325	102,055	38,002	HIGH %: Children	312
77	Hamilton	27,548	76,885	30,116	HIGH %: Children, non-White	243
78	Hancock	27,893	62,971	28,732	Reference	126
79	Hancock	4,044	10,866	4,050	HIGH %: Children	35
80	Hardin	10,134	25,006	11,076	Reference	75
81	Hardin	1,544	4,100	1,622	HIGH %: Children	25
82	Harrison	6,223	14,936	6,649	Reference	100
83	Henry	10,992	26,758	11,626	Reference	100
84	Highland	14,019	35,897	14,945	Reference	72
85	Highland	2,753	6,548	3,181	HIGH %: Low income	28
86	Hocking	9,113	22,235	9,893	Reference	67
87	Hocking	2,173	5,573	2,486	HIGH %: Children	33
88	Holmes	5,685	16,977	6,501	Reference	25
89	Holmes	6,657	26,028	7,903	HIGH %: Children	75
90	Huron	18,689	45,677	20,585	Reference	83
91	Huron	4,246	11,739	4,648	HIGH %: Children	40
92	Jackson	9,714	23,665	11,287	Reference	58
93	Jackson	3,066	8,429	3,733	HIGH %: Children	42
94	Jefferson	23,504	55,924	25,950	Reference	110
95	Jefferson	3,924	8,114	5,118	HIGH %: Low income	37
96	Knox	15,375	35,709	16,064	Reference	50
97	Knox	7,873	22,159	8,442	HIGH %: Children	74
98	Lake	87,359	201,077	96,520	Reference	406
99	Lake	9,002	25,769	9,610	HIGH %: Children	79
100	Lawrence	18,059	44,251	20,676	Reference	75
101	Lawrence	5,162	15,249	5,678	HIGH %: Children	49
102	Licking	47,523	120,362	55,826	Reference	177
103	Licking	16,512	49,503	18,425	HIGH %: Children	145
104	Logan	18,677	44,846	20,164	Reference	100
105	Lorain	92,628	226,356	104,951	Reference	361
106	Lorain	14,291	33,508	16,688	HIGH %: Non-White	126
107	Lorain	7,478	22,079	8,410	HIGH %: Children	67

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
108	Lorain	5,884	16,429	6,932	HIGH %: Children, non-White	51
109	Lucas	114,829	265,696	127,952	Reference	332
110	Lucas	39,825	86,319	48,487	HIGH %: Non-White	352
111	Lucas	11,911	33,985	14,029	HIGH %: Children	105
112	Lucas	13,365	35,481	15,248	HIGH %: Children, non-White	117
113	Madison	11,533	29,468	12,424	Reference	60
114	Madison	3,480	9,257	3,826	HIGH %: Children	40
115	Mahoning	69,893	156,328	76,486	Reference	243
116	Mahoning	16,922	35,207	18,785	HIGH %: Non-White	149
117	Mahoning	6,835	18,320	7,685	HIGH %: Children	61
118	Mahoning	4,822	13,583	5,497	HIGH %: Children, non-White	42
119	Marion	17,959	42,473	18,993	Reference	69
120	Marion	2,901	6,278	3,211	HIGH %: Low income	26
121	Marion	3,877	10,883	4,306	HIGH %: Children	37
122	Medina	55,881	138,558	61,024	Reference	231
123	Medina	13,126	37,964	15,234	HIGH %: Children	116
124	Meigs	7,018	18,351	8,110	Reference	61
125	Meigs	2,027	4,504	2,291	HIGH %: Low income	39
126	Mercer	12,861	30,669	13,230	Reference	63
127	Mercer	3,373	9,694	3,500	HIGH %: Children	37
128	Miami	35,149	87,489	40,669	Reference	153
129	Miami	5,894	16,917	6,816	HIGH %: Children	53
130	Monroe	5,745	13,796	6,348	Reference	100
131	Montgomery	139,920	315,607	156,295	Reference	379
132	Montgomery	11,853	24,335	14,856	HIGH %: Low income	105
133	Montgomery	24,518	53,768	27,019	HIGH %: Non-White	215
134	Montgomery	17,290	35,028	22,844	HIGH %: Non-White, low income	152
135	Montgomery	20,307	57,436	23,284	HIGH %: Children	179
136	Montgomery	2,211	5,637	3,318	HIGH %: Children, low income	25
137	Montgomery	3,553	9,705	4,181	HIGH %: Children, non-White	32
138	Montgomery	4,676	11,853	6,668	HIGH %: Children, non-White, low income	42
139	Morgan	6,108	14,460	6,011	Reference	100
140	Morrow	8,715	21,779	9,480	Reference	42

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
141	Morrow	4,207	12,976	4,859	HIGH %: Children	58
142	Muskingum	28,733	69,747	32,331	Reference	124
143	Muskingum	5,145	14,378	5,441	HIGH %: Children	46
144	Noble	5,067	12,055	5,460	Reference	100
145	Ottawa	18,051	39,777	22,241	Reference	100
146	Paulding	7,705	18,711	7,118	Reference	100
147	Perry	8,864	22,438	8,978	Reference	40
148	Perry	4,636	13,241	4,242	HIGH %: Children	60
149	Pickaway	12,471	31,185	13,985	Reference	37
150	Pickaway	7,239	21,953	8,814	HIGH %: Children	68
151	Pike	10,959	27,544	12,013	Reference	100
152	Portage	55,768	137,142	62,999	Reference	258
153	Portage	6,049	18,100	6,897	HIGH %: Children	53
154	Preble	16,251	40,655	17,503	Reference	100
155	Putnam	13,327	33,598	13,432	Reference	100
156	Richland	42,534	97,195	47,435	Reference	191
157	Richland	5,915	16,774	7,157	HIGH %: Children	53
158	Ross	21,981	52,676	24,117	Reference	85
159	Ross	6,821	18,374	7,094	HIGH %: Children	60
160	Sandusky	20,899	50,772	23,243	Reference	101
161	Sandusky	2,675	6,926	2,880	HIGH %: Children	25
162	Scioto	18,261	44,994	20,020	Reference	36
163	Scioto	7,197	14,787	6,960	HIGH %: Low income	65
164	Scioto	2,745	8,204	3,218	HIGH %: Children	25
165	Scioto	1,655	4,479	1,844	HIGH %: Children, low income	25
166	Seneca	18,986	44,742	20,205	Reference	91
167	Seneca	2,662	7,453	3,188	HIGH %: Children	25
168	Shelby	14,461	36,796	14,225	Reference	61
169	Shelby	4,147	11,514	4,602	HIGH %: Children	39
170	Stark	123,259	286,461	134,015	Reference	505
171	Stark	9,240	20,017	10,195	HIGH %: Non-White	81
172	Stark	16,236	44,648	18,111	HIGH %: Children	144
173	Stark	4,725	12,232	5,456	HIGH %: Children, non-White	42
174	Summit	164,738	381,653	182,617	Reference	602
175	Summit	32,142	70,331	36,694	HIGH %: Non-White	284
176	Summit	17,467	50,213	19,539	HIGH %: Children	154
177	Summit	10,379	29,660	10,834	HIGH %: Children, non-White	91

Stratum	County	Population: Occupied HUs	Population: People in Occupied HUs	ABS Frame Units	Strata Details	Allocation
178	Trumbull	65,428	148,566	70,959	Reference	252
179	Trumbull	12,192	24,924	14,406	HIGH %: Low income	109
180	Trumbull	3,403	10,827	4,053	HIGH %: Children	30
181	Trumbull	4,598	12,214	5,354	HIGH %: Children, low income	40
182	Tuscarawas	30,780	74,207	33,787	Reference	132
183	Tuscarawas	5,851	17,036	6,302	HIGH %: Children	53
184	Union	12,090	30,009	14,430	Reference	33
185	Union	8,122	23,531	11,868	HIGH %: Children	75
186	Van Wert	8,794	20,587	9,012	Reference	58
187	Van Wert	2,750	7,366	2,737	HIGH %: Children	42
188	Vinton	5,140	12,979	5,327	Reference	100
189	Warren	50,517	125,479	58,798	Reference	132
190	Warren	32,440	95,968	37,583	HIGH %: Children	285
191	Washington	22,956	54,026	24,101	Reference	110
192	Washington	2,241	4,740	2,626	HIGH %: Low income	25
193	Wayne	39,494	97,010	41,436	Reference	181
194	Wayne	4,330	14,988	4,870	HIGH %: Children	39
195	Williams	13,075	30,191	12,819	Reference	75
196	Williams	2,015	5,502	2,176	HIGH %: Children	25
197	Wood	38,312	92,389	41,517	Reference	145
198	Wood	5,139	10,420	5,829	HIGH %: Low income	46
199	Wood	7,138	20,496	8,062	HIGH %: Children	63
200	Wyandot	9,081	21,713	9,268	Reference	100

ABS = address-based sampling; HU = housing unit.

Note: “HIGH: Children” strata represent Census block groups in a county with a relatively high percentage of children, “HIGH: Low Incentive” strata represent Census block groups in a county with a relatively high proportion of people below the poverty level for a family of 3, and “HIGH: Non-White” strata represent Census block groups with a high percentage of non-White residents. “Reference” represents all Census block groups in the county that cannot be classified as high children, high low incentive, or high non-White.

2.2.4. Starting Sample Size and Sample Release

Starting Sample Size

The starting sample size inflated the allocated sample to account for expected nonresponse and ineligibility. Because there were several new stratum types in the 2023 design (non-White adults, children), historical yield and response rate information at the sub-county level may not be accurate. Therefore, rather than tailoring the starting sample size at the stratum level, the starting sample size was based on an assumed participation rate of 10% in all strata. This rate was selected because it was

lower than the smallest participation rate at the stratum level in 2021 (13%). **Table 2-8** presents the resulting starting sample sizes in each stratum.¹

Table 2-8. Starting Sample Size, by Stratum

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
1	Adams	Reference	8,882	800
2	Adams	HIGH %: Low income	3,126	600
3	Allen	Reference	33,260	1,200
4	Allen	HIGH %: Non-White	4,242	400
5	Allen	HIGH %: Children	5,220	500
6	Allen	HIGH %: Children, non-White	2,687	300
7	Ashland	Reference	22,563	1,800
8	Ashtabula	Reference	35,732	2,100
9	Ashtabula	HIGH %: Low income	7,762	1,000
10	Athens	Reference	20,144	1,300
11	Athens	HIGH %: Low income	5,972	700
12	Auglaize	Reference	15,632	700
13	Auglaize	HIGH %: Children	4,051	400
14	Belmont	Reference	28,541	1,800
15	Belmont	HIGH %: Low income	3,226	400
16	Brown	Reference	14,302	900
17	Brown	HIGH %: Children	4,294	700
18	Butler	Reference	103,004	3,100
19	Butler	HIGH %: Non-White	13,660	1,100
20	Butler	HIGH %: Children	35,246	3,000
21	Butler	HIGH %: Children, non-White	4,476	400
22	Carroll	Reference	11,755	1,400
23	Champaign	Reference	14,742	1,200
24	Champaign	HIGH %: Children	1,855	400

¹ The starting sample was slightly inflated to account for the possibility of releasing additional sample if funding allowed. The additional funding was not secured; therefore, additional sample was not released to the field.

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
25	Clark	Reference	54,944	2,500
26	Clark	HIGH %: Non-White	6,213	500
27	Clermont	Reference	67,659	4,000
28	Clermont	HIGH %: Children	19,382	2,400
29	Clinton	Reference	15,152	1,100
30	Clinton	HIGH %: Children	2,747	500
31	Columbiana	Reference	41,363	2,800
32	Columbiana	HIGH %: Children	4,479	600
33	Coshocton	Reference	13,726	1,200
34	Coshocton	HIGH %: Children	1,906	300
35	Crawford	Reference	17,545	1,300
36	Crawford	HIGH %: Children	2,421	300
37	Cuyahoga	Reference	312,571	4,100
38	Cuyahoga	HIGH %: Low income	28,914	2,200
39	Cuyahoga	HIGH %: Non-White	121,941	10,000
40	Cuyahoga	HIGH %: Non-White, low income	94,394	7,600
41	Cuyahoga	HIGH %: Children	23,295	2,000
42	Cuyahoga	HIGH %: Children, low income	3,981	400
43	Cuyahoga	HIGH %: Children, non-White	19,038	1,700
44	Cuyahoga	HIGH %: Children, non-White, low income	16,433	1,400
45	Darke	Reference	19,662	1,400
46	Darke	HIGH %: Children	2,198	400
47	Defiance	Reference	14,102	1,200
48	Defiance	HIGH %: Children	2,378	400
49	Delaware	Reference	36,078	300
50	Delaware	HIGH %: Children	50,675	3,500
51	Erie	Reference	30,252	1,900
52	Erie	HIGH %: Non-White	5,588	700
53	Fairfield	Reference	44,983	1,500

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
54	Fairfield	HIGH %: Children	17,743	1,600
55	Fayette	Reference	12,410	1,400
56	Franklin	Reference	291,168	2,900
57	Franklin	HIGH %: Low income	16,491	1,100
58	Franklin	HIGH %: Non-White	98,921	8,100
59	Franklin	HIGH %: Non-White, low income	31,648	2,500
60	Franklin	HIGH %: Children	80,828	7,100
61	Franklin	HIGH %: Children, low income	1,594	300
62	Franklin	HIGH %: Children, non-White	44,715	3,800
63	Franklin	HIGH %: Children, non-White, low income	21,898	1,800
64	Fulton	Reference	17,166	1,100
65	Gallia	Reference	12,948	1,400
66	Geauga	Reference	33,639	1,700
67	Geauga	HIGH %: Children	2,830	300
68	Greene	Reference	57,732	2,200
69	Greene	HIGH %: Low income	5,034	500
70	Greene	HIGH %: Children	7,423	700
71	Greene	HIGH %: Children, low income	2,227	300
72	Guernsey	Reference	14,800	1,100
73	Guernsey	HIGH %: Low income	3,385	500
74	Hamilton	Reference	207,462	3,400
75	Hamilton	HIGH %: Non-White	110,209	9,100
76	Hamilton	HIGH %: Children	38,002	3,400
77	Hamilton	HIGH %: Children, non-White	30,116	2,600
78	Hancock	Reference	28,732	2,000
79	Hancock	HIGH %: Children	4,050	600
80	Hardin	Reference	11,076	1,100

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
81	Hardin	HIGH %: Children	1,622	400
82	Harrison	Reference	6,649	1,200
83	Henry	Reference	11,626	1,400
84	Highland	Reference	14,945	1,100
85	Highland	HIGH %: Low income	3,181	500
86	Hocking	Reference	9,893	900
87	Hocking	HIGH %: Children	2,486	500
88	Holmes	Reference	6,501	300
89	Holmes	HIGH %: Children	7,903	1,200
90	Huron	Reference	20,585	1,300
91	Huron	HIGH %: Children	4,648	700
92	Jackson	Reference	11,287	800
93	Jackson	HIGH %: Children	3,733	600
94	Jefferson	Reference	25,950	1,800
95	Jefferson	HIGH %: Low income	5,118	600
96	Knox	Reference	16,064	800
97	Knox	HIGH %: Children	8,442	1,200
98	Lake	Reference	96,520	4,400
99	Lake	HIGH %: Children	9,610	900
100	Lawrence	Reference	20,676	1,200
101	Lawrence	HIGH %: Children	5,678	800
102	Licking	Reference	55,826	1,900
103	Licking	HIGH %: Children	18,425	1,600
104	Logan	Reference	20,164	1,600
105	Lorain	Reference	104,951	3,900
106	Lorain	HIGH %: Non-White	16,688	1,400
107	Lorain	HIGH %: Children	8,410	700
108	Lorain	HIGH %: Children, non-White	6,932	600
109	Lucas	Reference	127,952	3,600
110	Lucas	HIGH %: Non-White	48,487	3,800
111	Lucas	HIGH %: Children	14,029	1,200

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
112	Lucas	HIGH %: Children, non-White	15,248	1,300
113	Madison	Reference	12,424	700
114	Madison	HIGH %: Children	3,826	500
115	Mahoning	Reference	76,486	2,600
116	Mahoning	HIGH %: Non-White	18,785	1,600
117	Mahoning	HIGH %: Children	7,685	700
118	Mahoning	HIGH %: Children, non-White	5,497	500
119	Marion	Reference	18,993	1,100
120	Marion	HIGH %: Low income	3,211	500
121	Marion	HIGH %: Children	4,306	600
122	Medina	Reference	61,024	2,500
123	Medina	HIGH %: Children	15,234	1,300
124	Meigs	Reference	8,110	800
125	Meigs	HIGH %: Low income	2,291	500
126	Mercer	Reference	13,230	1,000
127	Mercer	HIGH %: Children	3,500	600
128	Miami	Reference	40,669	1,700
129	Miami	HIGH %: Children	6,816	600
130	Monroe	Reference	6,348	1,200
131	Montgomery	Reference	156,295	4,100
132	Montgomery	HIGH %: Low income	14,856	1,100
133	Montgomery	HIGH %: Non-White	27,019	2,300
134	Montgomery	HIGH %: Non-White, low income	22,844	1,700
135	Montgomery	HIGH %: Children	23,284	2,000
136	Montgomery	HIGH %: Children, low income	3,318	300
137	Montgomery	HIGH %: Children, non-White	4,181	400
138	Montgomery	HIGH %: Children, non-White, low income	6,668	500

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
139	Morgan	Reference	6,011	1,200
140	Morrow	Reference	9,480	600
141	Morrow	HIGH %: Children	4,859	800
142	Muskingum	Reference	32,331	2,000
143	Muskingum	HIGH %: Children	5,441	800
144	Noble	Reference	5,460	1,200
145	Ottawa	Reference	22,241	1,600
146	Paulding	Reference	7,118	1,300
147	Perry	Reference	8,978	600
148	Perry	HIGH %: Children	4,242	900
149	Pickaway	Reference	13,985	400
150	Pickaway	HIGH %: Children	8,814	800
151	Pike	Reference	12,013	1,400
152	Portage	Reference	62,999	2,800
153	Portage	HIGH %: Children	6,897	600
154	Preble	Reference	17,503	1,500
155	Putnam	Reference	13,432	1,400
156	Richland	Reference	47,435	2,100
157	Richland	HIGH %: Children	7,157	600
158	Ross	Reference	24,117	1,400
159	Ross	HIGH %: Children	7,094	1,000
160	Sandusky	Reference	23,243	1,600
161	Sandusky	HIGH %: Children	2,880	400
162	Scioto	Reference	20,020	800
163	Scioto	HIGH %: Low income	6,960	1,100
164	Scioto	HIGH %: Children	3,218	400
165	Scioto	HIGH %: Children, low income	1,844	300
166	Seneca	Reference	20,205	1,500
167	Seneca	HIGH %: Children	3,188	400
168	Shelby	Reference	14,225	1,000
169	Shelby	HIGH %: Children	4,602	700

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
170	Stark	Reference	134,015	5,400
171	Stark	HIGH %: Non-White	10,195	900
172	Stark	HIGH %: Children	18,111	1,600
173	Stark	HIGH %: Children, non-White	5,456	500
174	Summit	Reference	182,617	6,500
175	Summit	HIGH %: Non-White	36,694	3,100
176	Summit	HIGH %: Children	19,539	1,700
177	Summit	HIGH %: Children, non-White	10,834	1,000
178	Trumbull	Reference	70,959	4,100
179	Trumbull	HIGH %: Low income	14,406	1,800
180	Trumbull	HIGH %: Children	4,053	500
181	Trumbull	HIGH %: Children, low income	5,354	700
182	Tuscarawas	Reference	33,787	2,200
183	Tuscarawas	HIGH %: Children	6,302	900
184	Union	Reference	14,430	400
185	Union	HIGH %: Children	11,868	900
186	Van Wert	Reference	9,012	800
187	Van Wert	HIGH %: Children	2,737	600
188	Vinton	Reference	5,327	1,200
189	Warren	Reference	58,798	2,200
190	Warren	HIGH %: Children	37,583	4,600
191	Washington	Reference	24,101	1,800
192	Washington	HIGH %: Low income	2,626	400
193	Wayne	Reference	41,436	3,000
194	Wayne	HIGH %: Children	4,870	700
195	Williams	Reference	12,819	1,200
196	Williams	HIGH %: Children	2,176	400
197	Wood	Reference	41,517	1,600
198	Wood	HIGH %: Low income	5,829	500

Stratum	County	Strata Details	Address-Based Sampling Frame Units	Starting Sample
199	Wood	HIGH %: Children	8,062	700
200	Wyandot	Reference	9,268	1,300

Note: “HIGH: Children” strata represent Census block groups in a county with a relatively high percentage of children, “HIGH: Low Incentive” strata represent Census block groups in a county with a relatively high proportion of people below the poverty level for a family of 3, and “HIGH: Non-White” strata represent Census block groups with a high percentage of non-White residents. “Reference” represents all Census block groups in the county that cannot be classified as high children, high low incentive, or high non-White.

Sample Release

The 2023 OMAS protocol implemented two sample releases during fielding. Therefore, the starting sample was randomly organized into replicates—random subsamples from the larger sample. Replicates were created and organized as follows:

1. Replicates were created within each stratum separately.
2. Replicates consisted of 100 cases each.
 - a. The sample replicates contained enough cases to, in expectation, obtain the desired set of cases (see **Table 2-7**). For example, in Stratum 1, 58 cases were allocated. Therefore, 580 (=58/0.1) cases or 58 replicates were assigned to the base sample.
 - b. The remaining starting sample replicates were held in reserve, to be released only if additional funding was obtained. The additional funding was not obtained in time for data collection; therefore, the additional starting sample replicates were not released.

2.2.5. Selection of People

The ABS was a sample of addresses. No information about the specific inhabitants of the household was known. Therefore, the household was asked to randomly select one adult (aged 19 or older) in the household. The selection method used was the nearest birthday method.

During the survey, the adult respondent was asked whether any children (aged 18 or younger) were living in the household. If there were, the respondent entered the number of children. One was then randomly selected, and the adult respondent was asked to serve as a proxy respondent for that child. If the respondent agreed to serve as a proxy for the selected child, the adult and child portions of the survey were used in the analysis. However, if the adult respondent declined to provide information about the selected child, only the adult portion of the survey was used in the analysis.

2.2.6. Response Modes

The ABS respondents were allowed to complete the survey via any of the three modes: (1) CAWI, (2) PAPI, or (3) inbound CATI.

No outbound calls were used on the ABS because phone numbers were not available for any sampled housing units.

2.3. Sample Design: Medicaid Administrative Frame

2.3.1. Medicaid Administration Sampling Frame

The sampling frame for the Medicaid administrative sample was the May 2023 Medicaid administrative enrollment file, subset to all enrollees aged 19–64 with full Medicaid benefits. Medicaid enrollees in the sample frame were enrolled through one of the following programs:

1. *Covered families and children (CFC)* consists of people who qualify for Medicaid under the pre-expansion rules (i.e., adults or legal guardians of children in the household with income at or below 90% of the FPL).
2. *Full-benefit ABD, Medicaid only*, consists of people who qualify for Medicaid because of a disability and who are low income, defined as making the same as or less than the maximum payment for Supplemental Security Income, or under 250% FPL for Medicaid buy-in for workers with disabilities. Note that this group excluded dually eligible enrollees (i.e., enrolled in Medicaid and Medicare).
3. *Group VIII* consists of people who qualify for Medicaid under the 2010 Patient Protection and ACA expansion rules, which includes adults aged 19–64 with family income at or below 138% FPL (\$34,307 annual income for a family of three)—Ohio implemented Medicaid expansion in January 2014.
4. *Dual MyCare (adult, noninstitutionalized)* consists of individuals who are dually eligible (enrolled in Medicaid and Medicare) and who participate in Ohio Medicaid’s MyCare demonstration managed care program. At the time of the survey, MyCare was available in 29 of Ohio’s 88 counties.
5. *Dual non-MyCare (adult, noninstitutionalized)* consists of individuals who are dually eligible and who are not participating in the MyCare demonstration managed care program.

2.3.2. Stratification

The Medicaid administrative sample was stratified based on the enrollment type of each enrollee. This was done to help ensure there was enough sample in each group to meet the OMAS analytic objectives and other analytic objectives of ODM. ODM’s primary analytic objectives were as follows: (1) blending Medicaid list sample responses with ABS responses to make estimates for the entire adult full-benefit Medicaid enrollee population, and (2) making program-specific estimates of Medicaid enrollees, particularly for the Group VIII program. Making estimates specific to other Medicaid eligibility groups was a secondary priority. Furthermore, to assist with analytic goals of the OMAS, the Group VIII strata were further stratified by the four county types.

These design considerations led to eight strata:

1. Group VIII—metropolitan counties
2. Group VIII—rural non-Appalachian counties

3. Group VIII—rural Appalachian counties
4. Group VIII—suburban counties
5. CFC
6. ABD, Medicaid only
7. Dual MyCare
8. Dual non-MyCare

2.3.3. Allocation of Sample

Table 2-9 presents the allocation of the sample to each of the strata. The rationale for the allocation was as follows:

- Based on past Group VIII surveys, a sample size of 6,000 achieved the desired level of precision. Since incorporating elements of the Group VIII survey into the OMAS was a key objective, this allocation took precedence over any others.
- To help ensure the Group VIII sample was representative of each county type, the sample was proportionally allocated to each county type based on the Medicaid population distribution. A balanced allocation (i.e., equal sample allocated to each county type) was considered, but because it caused a large design effect due to unequal weighting, it was not used.
- Of the remaining enrollment types, the largest amount of sample (1,500) was allocated to CFC because it was the largest group (after Group VIII).
- To help answer programmatic questions, ABD and Dual MyCare enrollment types were each allocated 1,000 cases.
- The remaining sample (500 cases) was allocated to Dual non-MyCare enrollees to ensure all Medicaid enrollment types were covered by the sample and to allow for comparisons with the Dual MyCare enrollees.

Table 2-9. Allocation of the Medicaid Administrative Sample, by Stratum

Stratum	Stratum Description	Population	Target Sample	Starting Sample
--	Group VIII	824,684	6,000	--
1	Metropolitan	509,266	3,678	36,800
2	Rural non-Appalachian	83,187	610	6,100
3	Rural Appalachian	135,392	998	10,000
4	Suburban	96,839	714	7,200
5	Covered families and children	609,094	1,500	15,000

Stratum	Stratum Description	Population	Target Sample	Starting Sample
6	Aged, blind, or disabled/Medicaid buy-in for workers with disabilities only (adult, non-dually eligible)	152,708	1,000	10,000
7	Dual MyCare community (adult, non-institutional)	61,654	1,000	10,000
8	Dual non-MyCare	53,703	500	5,000
Total		1,701,843	10,000	100,100

Bold denotes aggregate totals for a Medicaid enrollment program.

2.3.4. Starting Sample and Sample Release

Starting Sample

The starting sample of the Medicaid administrative frame needed to account for two issues:

1. Nonresponse and ineligibility
2. Duplication with the ABS frame sample

To account for both of these issues, the starting sample assumed a 10% participation rate. That is, the starting sample for each stratum equaled the allocated sample divided by 0.1 (rounded to the nearest 100). **Table 2-9** shows the starting sample sizes by strata that were used.

Although the Medicaid administrative sample was a sample of people (rather than addresses, like the ABS), it was not desirable to sample a specific person through the Medicaid sample and the address through the ABS. Therefore, after the sample was drawn, the addresses from the Medicaid sample were cross-checked with the addresses sampled in the ABS. If duplicate addresses were identified, the Medicaid sampling unit was removed from the sample file. Because the ABS selected a person from the entire household, it was decided to prioritize the ABS over the specific person selected for the Medicaid sample.

Sample Release

The Medicaid administrative sample was released in two waves. This helped reduce the release of excess sample, because the final response rate in each stratum was not known. To facilitate the two-release design, after duplicate cases were identified, the sample was grouped, within each stratum, into replicates of 100 cases each. The initial sample consisted of what was expected to achieve 60%–70% of the total Medicaid sample. The second release sample size was tailored based on the empirical participation rate in the first wave to arrive at a total sample as close to the targeted amount as possible.

2.3.5. Selection of People

The Medicaid administrative sample is a list sample of individuals. Therefore, only the specific individual selected was eligible to take the survey. No one else in the household (unless independently selected) was eligible.

Because the Medicaid sample selected a specific person, the sampled person was not asked about the number of children in the household for the purposes of conducting a child survey. In other words, the child survey was not administered to Medicaid administrative sample respondents.

2.3.6. Response Modes

The Medicaid sample was allowed to respond to the survey via one of the three modes: (1) CAWI, (2) outbound CATI, or (3) inbound CATI.

No PAPI option was available to Medicaid sample respondents for two reasons. First, former Group VIII samples did not allow a PAPI option, and it was important to be consistent with those past surveys for trend analysis. Second, because phone numbers were available for the Medicaid sample, the outbound CATI option served as an equal replacement for PAPI because it allowed those with no or poor internet access to respond to the survey.

2.4. Survey Respondents

The 2023 OMAS obtained 39,626 survey responses. This included 39,183 fully completed surveys and 443 partially completed surveys that were deemed completed enough to include in the analytic dataset. **Table 2-10** details the overall breakdown of the survey respondents by frame type.

Table 2-10. Number of Interviews among Adults and Children

Frame	Fully Complete		Partially Complete	
	Adult	Child	Adult	Child
Address-based sampling	28,664	5,505	228	2
Medicaid	10,519	0	215	0

2.4.1. OMAS ABS

Table 2-11 presents the final number of ABS respondents in each county by response mode. In total, there were 28,892 adult respondents—17,820 via web, 10,015 via paper, and 1,057 by inbound phone—and 5,507 child respondents via web and phone. All counties except one (Logan County) met or exceeded its target sample size. Logan County obtained 98% of its target (98 interviews out of a target of 100).

Table 2-11. Number of ABS Frame Respondents, by County and Interview Mode

Ohio County	Web	Phone	Paper	Total
Adams	93	5	48	146
Allen	164	16	102	282
Ashland	67	2	56	125
Ashtabula	122	9	106	237
Athens	88	2	36	126
Auglaize	61	4	58	123

Ohio County	Web	Phone	Paper	Total
Belmont	101	5	66	172
Brown	68	7	50	125
Butler	586	32	258	876
Carroll	77	3	73	153
Champaign	70	3	34	107
Clark	211	13	128	352
Clermont	303	10	125	438
Clinton	63	5	60	128
Columbiana	132	9	107	248
Coshocton	59	3	55	117
Crawford	80	3	56	139
Cuyahoga	1,899	151	959	3,009
Darke	73	4	81	158
Defiance	59	1	51	111
Delaware	279	7	110	396
Erie	107	7	66	180
Fairfield	230	12	120	362
Fayette	64	7	34	105
Franklin	1,969	114	702	2,785
Fulton	64	5	56	125
Gallia	73	2	36	111
Geauga	126	7	83	216
Greene	237	11	124	372
Guernsey	49	2	55	106
Hamilton	1,313	88	519	1,920
Hancock	98	6	66	170
Hardin	60	3	51	114
Harrison	74	13	86	173
Henry	54	2	50	106
Highland	54	3	58	115
Hocking	61	2	44	107
Holmes	45	7	84	136
Huron	72	5	58	135

Ohio County	Web	Phone	Paper	Total
Jackson	68	2	45	115
Jefferson	94	8	67	169
Knox	79	4	59	142
Lake	343	19	198	560
Lawrence	89	8	63	160
Licking	216	12	139	367
Logan	57	2	40	99
Lorain	414	29	248	691
Lucas	666	38	339	1,043
Madison	71	1	46	118
Mahoning	339	28	183	550
Marion	104	5	54	163
Medina	263	6	133	402
Meigs	63	4	56	123
Mercer	62	2	57	121
Miami	138	10	87	235
Monroe	58	7	51	116
Montgomery	867	38	400	1,305
Morgan	83	9	76	168
Morrow	62	5	53	120
Muskingum	129	3	76	208
Noble	58	7	51	116
Ottawa	54	1	52	107
Paulding	72	4	46	122
Perry	74	4	41	119
Pickaway	71	2	53	126
Pike	72	5	59	136
Portage	210	4	118	332
Preble	70	5	42	117
Putnam	70	5	53	128
Richland	148	7	106	261
Ross	102	7	62	171
Sandusky	91	9	59	159

Ohio County	Web	Phone	Paper	Total
Scioto	129	7	74	210
Seneca	89	4	57	150
Shelby	73	3	45	121
Stark	521	25	323	869
Summit	751	51	400	1,202
Trumbull	257	16	206	479
Tuscarawas	136	14	106	256
Union	95	4	33	132
Van Wert	59	2	40	101
Vinton	73	4	47	124
Warren	296	11	158	465
Washington	82	4	71	157
Wayne	162	6	121	289
Williams	78	3	46	127
Wood	208	8	113	329
Wyandot	49	5	52	106
Total	17,820	1,057	10,015	28,892

2.4.2. OMAS Medicaid Sample

The Medicaid administrative frame sample obtained 10,734 surveys—9,482 via web and 1,252 via phone. Across strata, at least 95% of the targeted number of interviews was achieved in all strata except Group VIII metropolitan county type sample, where 91% of the target was obtained. **Table 2-12** provides the final number of surveys by response mode and stratum.

Table 2-12. Number of Medicaid Frame Interviews, by Response Mode and Stratum

Stratum	Stratum Description	Web	Phone	Total
--	Group VIII	6,095	704	6,799
1	Metropolitan	3,029	313	3,342
2	Rural non-Appalachian	895	101	996
3	Rural Appalachian	1,562	223	1,785
4	Suburban	609	67	676
5	Covered families and children	1,380	108	1,488
6	Aged, blind, or disabled/Medicaid buy-in for workers with disabilities only (adult, non-dually eligible)	783	184	967

Stratum	Stratum Description	Web	Phone	Total
7	Dual MyCare community (adult, non-institutional)	816	173	989
8	Dual non-MyCare	408	83	491
Total		9,482	1,252	10,734

Bold denotes aggregate totals for a Medicaid enrollment program.

2.4.3. Overall Respondents

The 2023 OMAS had two sample target goals: (1) obtain at least 25,000 adult interviews statewide from the ABS frame, with at least 100 per county; and (2) obtain 10,000 adult interviews from the Medicaid frame. These target goals were both met, with the single exception of Logan County, which obtained 98 completed interviews from the ABS frame.

3. Questionnaire

3.1. Instrument Content

The 2023 OMAS questionnaire consisted of two main sections: an adult section and a child section. Each section contained separate modules focusing on topics such as health insurance coverage, health status, health care utilization, and health care access. **Table 3-1** summarizes each questionnaire section. The final version of the instrument specification is presented in **Appendix A**.

Table 3-1. Questionnaire Content, by Section

Questionnaire Section	Contents of Section
Introduction and Screener Questions for ABS	<p>This section provided respondents with study information and asked about</p> <ul style="list-style-type: none"> the age of the respondent, whether they were completing the survey for themselves or on someone else's behalf (proxy respondent), the respondent's county of residence and duration of residency in Ohio, the number of adults and adult family members in the household, the number of children and child family members in the household, whether the respondent was a parent or legal guardian of any children in the household, and the respondent's age and gender.
Adult: Current Insurance Status	<p>Respondents are asked</p> <ul style="list-style-type: none"> whether they were currently covered by health insurance, and to verify their insurance status if they were unsure about their current insurance coverage status.
Adult: Currently Insured	<p>Topics covered include</p> <ul style="list-style-type: none"> type of insurance coverage, source of coverage, length of coverage, and previous coverage (or lack of previous coverage) if currently on Medicaid.
Adult: Currently Uninsured	<p>Respondents who were currently uninsured were asked</p> <ul style="list-style-type: none"> the last time they had insurance, reason for the loss of insurance, and type and source of their previous insurance.

Questionnaire Section	Contents of Section
Adult: Health Status	<p>Topics covered included</p> <ul style="list-style-type: none"> • general physical, dental, and mental health; • current and past health care conditions; • functional limitations, use of tobacco products, vaping products, alcohol, marijuana, and prescription pain relievers; and • current or recent pregnancy (female respondents aged 19 to 44 only).
Adult: Sources of Care, Utilization, and Unmet Needs	<p>Respondents were asked</p> <ul style="list-style-type: none"> • where they usually went for health care; • whether they had access to telehealth visits and the frequency of these; • when they last visited a doctor and mode of the visit; • the number of times spent in a hospital overnight; • how many times they had to go to the emergency room; • which vaccines they have received (flu, pneumonia, shingles, or COVID-19) and about vaccine hesitancy related to any of them; • when they last saw a dentist and their ability to access dental care; • when they last saw a provider for vision care and their ability to access vision care; • if they needed mental or emotional health care or counseling services and their ability to access that care; • if they needed treatment for use of alcohol or other drugs and their ability to access that care; • if there was a time they were not able to fill a prescription; • about reasons for delaying or avoiding care that they felt was needed in the past 12 months; • about economic stressors related to health care, including ability to pay medical bills and rent or mortgage; and • about community-related concerns.

Questionnaire Section	Contents of Section
Adult: Employment	<p>Respondents were asked</p> <ul style="list-style-type: none"> • their job status and whether they were currently employed; • health insurance offered by their employer; • the number of hours they worked; • changes to their job situation; and • if unemployed, reasons for unemployment.
Adult: Demographics and Family Income	<p>Respondents were asked</p> <ul style="list-style-type: none"> • marital status, • education, • race and ethnicity, • income, • weight and height, • household composition, and • household income.
Child: Screening Questions for Eligible Child	<p>Adult respondents were asked</p> <ul style="list-style-type: none"> • the selected child's age and gender, • their relationship to the child, and • the selected child's current insurance status.
Child: Insurance Coverage	<p>If the selected child was insured, adult respondents were asked</p> <ul style="list-style-type: none"> • type of health insurance, • source of health insurance, • period of time the child had been covered, and • previous coverage (or lack of previous coverage) if currently on Medicaid.
Child: Currently Uninsured	<p>If the selected child was uninsured, adult respondents were asked</p> <ul style="list-style-type: none"> • last time the child had insurance.
Child: Health Status	<p>Adult respondents were asked</p> <ul style="list-style-type: none"> • general, physical, and mental health status for the selected child; and • need for special therapy, treatment, or counseling.

Questionnaire Section	Contents of Section
Child: Sources of Care and Utilization of Services	Adult respondents were asked <ul style="list-style-type: none"> • where the child usually goes to receive health care; • characteristics of the care the child received at their usual place of care; • the child’s doctor, vision, and dental visits; • whether the adult needed professional help coordinating the child’s health care and how often the adult received help; • whether the child had any visits to an emergency room; and • which vaccines the child has received.
Child: Unmet Health Needs	Adult respondents were asked about the child’s <ul style="list-style-type: none"> • unmet dental care needs, • unmet mental health care needs, and • reasons for delaying or avoiding care that they felt was needed in the past 12 months.
Child: Health Risks	Adult respondents were asked <ul style="list-style-type: none"> • adverse situations the child may have experienced, and • concerns regarding teen substance use in their community.

3.1.1. Instrumentation Differences between OMAS ABS and OMAS Medicaid

Although the 2023 OMAS used an ABS and a Medicaid frame, the survey administered to these samples was largely the same, except in

- respondent selection,
- insurance question routing,
- administration of the child survey, and
- post-incentive amounts.

For the ABS, the survey began with respondent selection through a series of screening questions to select the appropriate household member to answer survey questions, whereas the Medicaid sample was listed and began by asking for and confirming whether the interviewer was speaking with the listed person. For the Medicaid sample, insurance type was presumed, and follow-up insurance questions depended on the respondent’s confirmation of that coverage. Those in the ABS frame were first asked to specify whether they had insurance coverage, with subsequent questions depending on their response. The most significant difference in survey administration between the two sample frames was that the child survey was offered to only those in the ABS. Incentive amounts also differed by frame, with those in the ABS frame being offered \$10 for participation in the adult survey, plus \$5 for

completion of the child survey, and those in the Medicaid frame being offered \$20 for participating in the adult survey. All details regarding survey differences based on sample frame can be found in **Appendix A**.

3.2. Survey Instrument Design and Development

The OMAS Executive Committee (EC) oversees and governs the OMAS project content, methodological approach, and analyses. A major role of the OMAS EC is to collaborate on developing the survey questionnaire. The research team initiated the process by reviewing the survey instruments used in the 2004–2021 OMAS iterations with the sponsoring state agencies to assess which items would remain, which would be removed, and what new items would be necessary to meet the agencies' current needs. A crosswalk of all survey questions over this time period was developed and used to examine question, topic, and domain changes in the OMAS, including question wording and skip pattern revisions between iterations. One fundamental instrumentation difference between the 2023 iteration and all prior iterations was that the 2023 instrument was designed from the start with the intent to be developed into a paper survey, which the OMAS EC had considered when reorganizing the survey to reduce skip logic complexity. These needs were incorporated into sections that examined current insurance status, health status and caregiving, utilization of health care services, sources of care and determinants of health, employment status, and demographic information for adults and children.

After the OMAS EC had developed a working draft of the adult and child instruments into initial general specifications, RTI project staff helped finalize the specifications. RTI staff examined the instruments for ease of administration and response, wording and response categories for new items, transitions, overall survey flow, skip patterns and item-specific logic, and actual survey length versus the budgeted length restrictions. After an advance draft of the instrument was developed, GRC performed 20 cognitive review interviews and held two focus group sessions among varying populations in Ohio (details on the cognitive reviews can be found in **Section 3.3**).

RTI received a draft version of the questionnaire from the OMAS EC in early spring 2023, with the goal of creating instrument-specific programming specifications, programming, testing, and finalizing the survey for a pilot test in July followed by fielding in late August. To prepare for fielding, RTI's project team

- reviewed the initial questionnaire item by item to assess question construction, order, and structure;
- discussed each section of the survey instrument and prepared preliminary training materials;
- compiled a comprehensive assessment of recommended revisions to the 2023 OMAS, identifying problems that the project team believed the instrument posed for data collection and presenting strategies for resolving those problems;
- prepared each subsequent version of the questionnaire based on full project team meetings, suggestions, and strategies;
- developed the combined CAWI-PAPI-CATI programming specifications, modifying questions when mode-specific wording or transition was required;
- developed the PAPI instrument template;

- programmed and tested the CAWI, PAPI, and CATI instruments;
- conducted a CAWI and CATI pilot test;
- updated the specifications and instruments based on the pilot test results and the results of GRC's cognitive review sessions; and
- conducted Section 508 compliance testing of the CAWI instrument and delivered a Voluntary Product Accessibility Template (VPAT), which provides a comprehensive analysis of the web instrument's conformance to the noted standards and certifies compliance.

A detailed description of these activities follows.

3.3. Cognitive Reviews

3.3.1. Interviewee Logistics and Characteristics

After an advance draft of the instrument was developed, GRC performed 20 cognitive interviews with a diverse set of adult Ohioans. Interviewees ranged in age from 20 to 85 and included non-Hispanic White and non-Hispanic Black or African American males and females (with one individual who identified as nonbinary). Residence in Ohio spanned five counties, including two that encompassed rural Appalachian areas. Current health insurance statuses also varied, including employer-sponsored insurance (ESI), Medicaid, and Medicare and Medicaid coverage. Four interviews were with previously incarcerated returning citizens, three individuals were parents who also answered questions about their child, two interviewees had intellectual or developmental disabilities, and one interviewee was a veteran. Interviewees were recruited through personal contacts and snowball sampling. Interviews were completed in person and through Zoom and lasted up to 1 hour. Each interviewee was compensated for their participation with a \$50 electronic gift card.

3.3.2. Topic Development

Cognitive interviews employed a hybrid approach that included unstructured "think-aloud" sections and structured sections with designated follow-up probes. The "think-aloud" approach was used for items that were newly added to the instrument and featured topics like intellectual and developmental disabilities, substance use, telehealth, vaccine hesitancy, and unmet needs. The "think-aloud" approach was also used for items where colloquial understanding was of central importance (e.g., related to losing and leaving a job). The rest of the interview included items that were present in previous survey iterations but that either featured significant proposed wording or response option changes (e.g., insurance status) or were identified as possible candidates for such changes (e.g., usual source of care). For these items, interviews followed a structured approach with follow-up probes designed to elicit specific information on respondent comprehension, recall, and answer selection confidence.

3.3.3. Instrument Development

During and after each interview, interviewers took notes in a structured protocol memo document. Once completed, all memos were collated into a single document that featured all feedback from each respondent, organized by survey item. Analysis proceeded in several steps. First, general and specific problems were identified. Two designated team members reviewed the feedback for each question, focusing on instances where the respondent had trouble answering or misunderstood the question. In each instance, team members briefly summarized the issue or misunderstanding, noting whether the issue appeared to be idiosyncratic to a respondent or was more systematic across respondents. Second,

team members proposed initial edits that addressed each problem, considering any concrete recommendations provided by the respondent to improve comprehension. Third, GRC met internally and with RTI to thoroughly discuss each problem and proposed edit. Edits then progressed iteratively, leading to a final recommendation. Last, final edits were accepted or rejected, and all updated items were sent to RTI for inclusion in instrument programming and testing.

3.3.4. Respondent Burden Focus Groups

Two focus group sessions were administered as a final cognitive review using a refined version of the 2023 OMAS instrument, to specifically gauge respondent burden to select topics of interest to Ohio's state agencies. Overall, these sessions indicated minimal burden to participants, particularly relating to questions about adverse childhood experiences, mental health distress, substance use, and experiences of loneliness.

3.4. CAWI Instrument Programming and Testing

3.4.1. Instrument Overview and Programming

The OMAS web questionnaire was designed for self-administration using best practices, and specifications called for using a neutral background color, bolding and italicizing key words, minimizing vertical scrolling and avoiding all horizontal scrolling on mobile devices, providing additional supplemental question-specific instructions, displaying a soft-prompt error message if a response was left blank, and using question-specific error messages that explicitly identified the error and the actions needed to resolve the error. These question-specific error messages were necessary to meet digital compliance standards, but they also benefited all respondents by making it easier to understand why they were receiving an error message. For example, if a question asked about the number of days over the past month in which a respondent had one or more drinks (question D46A), and a respondent entered "32," a message in high-contrast red font would read, "Number of days is missing or invalid. Please enter a number between 0 and 30. To skip this question, please delete all characters in the text box and select NEXT," so the respondent better understood the range constraints and what actions they needed to take to successfully answer or skip the question.

RTI used Voxco CAWI to program and process the web instrument. This web-hosted software ensures an optimal survey experience on desktop and mobile devices. If a respondent completes the survey on a mobile device, Voxco automatically uses a mobile version of the survey, with fonts, spacing, and sizes designed for optimal legibility on a mobile device with a touch-oriented interface. The Voxco instrument automatically controls skip and fill logic and validation range checks on numeric data, so respondents do not have to navigate skip logic manually, as is the case with paper forms. If a respondent discontinues the survey mid-session, then returns to the survey later, the Voxco instrument automatically picks up at the last question that specific respondent completed. Web responses are securely fed into a main server, where the data can then be downloaded.

3.4.2. Instrument Testing

After programming the CAWI instrument, RTI performed internal instrument testing. CAWI testing followed an agile iterative process using a multidisciplinary team led by an RTI methodologist. Testers checked for components such as text accuracy, logic functionality, and correct range validations. Different testers performed different scenarios; for example, one tester manually checked the instrument behavior of each value, whereas another tester completed the survey from the perspective of a hypothetical respondent with demographic/behavioral characteristics similar to those of actual study respondents to ensure that the questions made sense with respect to the hypothetical

respondent's situation (e.g., if the hypothetical respondent was a 75-year-old male with diabetes, the tester would verify that they were not asked question D43B, which asked whether their diabetes was only during pregnancy, because question D43B should only be asked of respondents with diabetes who are female and in a defined age range).

Issues testers found with the survey were documented in a Jira test log. After all testers had updated the log, an RTI methodologist updated the instrument specifications, and the Voxco programmer updated the CAWI program, after which the original testers verified that any previously identified issues were rectified. After all updated items were verified, an additional testing iteration began. This process continued until all issues had been resolved.

After RTI completed testing, the updated specifications and the CAWI instrument were delivered to GRC for testing. GRC logged any discrepancies in a test log. RTI then made the updates based on GRC feedback, updating the instrument specifications and the CAWI program. This full testing process was completed before the pilot test, then repeated after post-pilot test updates were made.

When testing the web survey, there was considerable emphasis on mobile device compatibility because smartphones were the device most frequently used to complete the OMAS web survey. The instrument was tested on mobile Android and iOS devices of varying screen sizes to ensure the instrument's visual presentation was accurate and was usable on any mobile device from which a respondent could access the survey. The instrument was also tested on multiple web browsers.

3.4.3. Digital Compliance and Accessibility

To obtain accurate population estimates, it is critical that the OMAS be accessible to all sample members. This included individuals with disabilities who may use assistive technology or adaptive strategies to access web content. In striving to be digitally inclusive, the design, development, and implementation of electronic communication must keep accessibility in mind to allow individuals with disabilities to fully participate and contribute to society. An individual with a disability should be able to access, navigate, and successfully complete the OMAS web instrument.

To make the survey accessible to individuals with disabilities and to meet The Ohio State University's (OSU's) Minimum Digital Accessibility Standards (MDAS) policy, after initial programming and testing was performed, RTI performed specialized accessibility testing on the instrument and made corresponding updates so that the web instrument met the standards of the Web Content Accessibility Guidelines (WCAG) 2.0, Level A and AA conformance, which are the technical criteria that form Section 508 and MDAS requirements. Level AA is regarded as ideal and acceptable for most individuals with disabilities. In addition to the instrument itself, the survey landing page and electronic incentive disbursement webpage were tested and updated to meet the requirements of WCAG 2.0, Level AA, conformance.

The outcome of this testing was a web survey experience that was compliant and digitally inclusive from start to finish—and one that was easier for *all* respondents to successfully use. Once this accessibility testing was completed, RTI delivered a VPAT to OSU.

3.5. CATI Instrument Programming and Testing

3.5.1. Instrument Overview and Testing

RTI used Voxco CATI to program and process the CATI instrument. Voxco CATI is a fully integrated program that provides call management and replicate controls, multilingual interviewing capabilities, monitoring, and incidence tracking. The software automatically controls skip and fill logic and range checking for numeric data. The programming logic directs the questionnaire's flow and prevents an interviewer from entering data in the wrong field. On any given screen of the questionnaire, the program accepts only a predetermined range or type of response. Completed interview responses are securely fed into a main server, where data can then be downloaded.

3.5.2. CATI Instrument Testing

After programming the CATI instrument, RTI performed internal instrument testing. The steps used closely followed the methods used for CAWI testing; however, in addition to staff from the CAWI testing team, interviewers and field staff supervisors also tested the CATI instrument.

3.6. PAPI Instrument Development, Programming, and Testing

3.6.1. Special Design Considerations for Paper Administration

With paper surveys, logic cannot be automated as it is for CAWI and CATI, so there was special emphasis on simplifying the PAPI logic so respondents could successfully follow the survey flow. Effort was made to use many of the formatting cues from the web component, and arrows and "go-to" text were used to guide respondents through skip logic. RTI also endeavored to simplify the skip instructions to avoid the respondent needing to flip through pages of the survey to follow the correct path based on their answers. This required slightly reordering the questions from the CAWI/CATI order of questions. **Appendix A** contains the specifications for all three modes, including a CAWI/CATI-PAPI crosswalk.

The paper OMAS, unlike the CAWI and CATI versions, was a modified version of the adult-only form (no child version was administered). A copy of the formatted paper form can be found in **Appendix B**.

3.6.2. PAPI Instrument Overview and Programming

RTI used OpenText TeleForm software to program and process the paper instrument. TeleForm is a suite of software programs that automate data capture with optical mark recognition (OMR) and intelligent character recognition (ICR). OMR is capable of reading marks such as checks, Xs, circles, or bubbles, and ICR is capable of reading handwritten numbers or printed text. When a completed paper survey is returned to RTI, it is scanned using a high-capacity, high-resolution scanner, then read by TeleForm, which performs OMR and ICR processing. The data captured by the system are further augmented with human review, then exported into a secure internal database after passing all quality control checks.

3.6.3. PAPI Instrument Testing

After programming the PAPI instrument in TeleForm, RTI performed internal instrument testing. In addition to verifying that question numbering, text, and responses matched the original specifications, time was spent verifying that the skip arrows and navigational text were accurate and conformed to best design practices. In addition, mock forms were filled out and scanned into the TeleForm system to verify the accuracy of the machine processing; and the final data processing protocol was defined, tested, verified, and approved.

3.7. Pilot Test

The objectives of the 2023 OMAS pilot test were to test the accuracy of the CAWI and CATI instruments, test the functionality of the systems used to administer and manage the survey, assess questionnaire flow and burden, measure survey timing for respondents, identify potential fielding issues, and develop an improved understanding of interviewer training needs. In addition, the pilot test allowed production-scale testing of the survey management system that manages all operations of data collection. A paper survey was not piloted because of the time limitations and because piloting the CAWI and CATI instruments was sufficient for achieving the pretesting goals.

3.7.1. CAWI ABS and Medicaid Pilot

The CAWI pilot began on June 28, 2023, and continued through mid-August. For the CAWI pilot test, 500 Ohio residents were randomly selected from the ABS in addition to 248 individuals from the Medicaid sample. Sample members were sent a single survey invitation and a \$2 prepaid cash incentive inviting them to complete the survey by web and were sent an additional incentive upon completing the survey. In total, 71 respondents completed the adult portion of the survey, with 13 of those 71 respondents also completing the child section. For the adult section, the average completion time was approximately 19 minutes, with the child section adding another 5 minutes. This was slightly longer than anticipated.

3.7.2. CATI Medicaid Pilot

The CATI pilot began on June 28, 2023, and concluded on June 30, 2023. For the CATI pilot test, 1,000 sample members were selected from the Medicaid sample for outbound dialing. These sample members did not receive a prepaid incentive but were offered an incentive upon completing the interview. In total, 13 respondents completed by phone, with all of them completing only the adult section (because the child section was not offered to sample members in the Medicaid sample). The average completion time was 36.7 minutes, which was also slightly longer than anticipated.

3.8. Instrument Updates Based on the Pilot Test Results and Cognitive Testing

After the pilot test, multiple updates were made to the instrument and protocol to improve the flow of questions and reduce completion time. The most significant updates included these:

- Removing all section headers so that respondents would not see headers when completing the survey, which reduced the text a respondent needs to read and freed up screen space
- Deleting five questions
- Converting select-all questions to a forced-choice yes-no format and deleting the corresponding gate questions to these multi-item questions
- Adding stronger confidentiality details to the sensitive adverse childhood experiences questions
- Restructuring the order of multiple questions
- Working with interviewers so that they placed stronger vocal emphasis on certain key words in questions

Full pilot test findings, along with the full list of post-pilot instrument modifications, are presented in ***Appendix C***.

4. Data Collection

4.1. Introduction

The data collection procedures used for the 2023 OMAS varied from prior iterations because of the exclusive use of ABS for the main sample, the inclusion of the smaller Medicaid sample, the use of paper surveys, and two large design experiments conducted in Release 1. This section considers the implementation protocols used for the ABS and Medicaid sample separately and discusses response rates and mid-fielding changes to the instruments.

4.2. OMAS ABS Data Collection Procedures

4.2.1. OMAS ABS Implementation Protocol Overview

The data collection protocol for the 2023 ABS used mailed invitations to invite sample members to complete the survey by web or by paper, with the option of calling the study team to complete the survey by phone. Data collection was a complex effort because of the use of two design experiments being conducted during Release 1 to ascertain the optimal administrative format and incentive presentation. During Release 1, there were three groups: Control, Experimental Group 1 (EG1), and Experimental Group 2 (EG2). Control and EG1 used a sequential administration format, whereas EG2 used a concurrent administration format. These experiments increased the number of mailing materials that needed to be developed and increased the printing and quality control efforts. However, these experiments yielded the crucial information that the project team was seeking, which shaped the fielding effort for Release 2, which exclusively used a sequential format with a visible prepaid cash incentive.

4.2.2. OMAS ABS Data Collection Materials

GRC and RTI collaborated throughout the mailing material development process. For the 2023 OMAS, the mailing materials were designed to have a visual and design similarity to a new format that was first used with the Ohio Medicaid Telehealth Evaluation and achieved highly successful results. Because of the different sequences, the mailing materials needed to be different, so the materials for the sequential groups versus the concurrent group are considered individually.

Sequential Groups (Release 1, Control and EG1, and Release 2)

Release 1, Control and EG1, deployed a sequential “push-to-web” data collection protocol. In the first two mailings, sample members were encouraged to complete the survey by web, and the invitation letter and the postcard reminder contained CAWI login credentials (a link to the landing page, www.OSUsurvey.com, and a Survey Access Code [PIN]). The initial invitation letter also contained a \$2 prepaid cash incentive; however, the presentation of this cash incentive between these two groups differed. The \$2 prepaid cash incentive was not visible through the outer mailing envelope for the Control group. With EG1, a portion of the \$2 bill was visible through the outer mailing envelope. Respondents were further incentivized with a promised incentive of \$10 if they completed the survey. The third mailing included the PAPI packet, which allowed respondents who could not or did not want to complete by web an alternative mode. The fourth mailing was an additional postcard reminder, and the fifth and final mailing was a second PAPI packet. Based on the results of the Release 1 experiments, Release 2 exclusively used a sequential design with a visible \$2 prepaid incentive. **Appendix D** details the structure of the experiments and the findings that led to this decision. The final formatted mailing materials can be found in **Appendix E**.

The following describes the five mailings for the sequential groups:

- Mailing 1: Invitation Letter: This letter was mailed in a 6"×9" OSU-branded envelope; inside was the invitation letter and a \$2 bill (the bill was visible through the outer mailing envelope for Release 1 EG1 and Release 2, not for the Release 1 Control group). The letter explained the purpose of the study; invited the respondent to participate; and provided a URL (www.OSUsurvey.com) for the respondent to go to, a Survey Access Code (PIN), and a QR code that they could scan to be instantly taken to the website without having to type in the URL manually. The sample member was informed about the \$10 incentive upon completion. In addition, contact information was provided should the sample member have any questions about the study or wish to call the study team to complete the survey by phone.
- Mailing 2: Reminder Self-Mailer (Postcard): This fold-over postcard was sent several days after the invitation letter. It included the same URL, Survey Access Code, QR code, and contact information and reminded respondents to complete the survey if they had not done so already.
- Mailing 3: PAPI-CAWI Packet: This 9"×12" mailing packet contained an external OSU-branded envelope. Inside was an invitation letter, a paper survey with a cover, and a postage-paid and self-addressed business return envelope that the respondent could use to send the survey back free of charge. The invitation letter asked respondents to complete the survey by web or by mail. The URL, Survey Access Code, and QR code were all provided in this letter, and the post-incentive amount was prominently displayed, along with contact information.
- Mailing 4: Second Reminder Self-Mailer (Postcard): This mailing was an additional fold-over postcard like that of Mailing 2, reminding respondents again about the study, requesting their participation, and providing the information needed to complete the survey.
- Mailing 5: Second PAPI-CAWI Packet: This final mailing was an additional PAPI packet, like that of Mailing 3, with minor changes to the language from the initial PAPI letter.

Concurrent Group 2 (Release 1, EG2)

Release 1 EG2 deployed a concurrent data collection protocol. Sample members were offered the web and paper survey simultaneously with the first mailing, allowing them to choose which mode they would prefer to use to complete the survey. The initial PAPI-CAWI packet sent to sample members also contained a \$2 prepaid cash incentive that was visible through the mailing envelope window. Respondents were further incentivized through a promised incentive of \$10 if they completed the survey. The second mailing was a postcard reminder with web completion credentials, reminding respondents to complete by web or complete the paper survey that was previously sent. The third mailing included a second PAPI packet with web completion details. The fourth mailing was an additional postcard reminder, and the fifth and final mailing was a reminder letter. The final formatted mailing materials can be found in **Appendix E**.

The following describes the five mailings for the concurrent group:

- Mailing 1: PAPI-CAWI Packet: This 9"×12" mailing packet contained an external OSU-branded envelope. Inside was an invitation letter, a paper survey with a cover, and a postage-paid and self-addressed business return envelope that the respondent could use to send the survey back free of charge. The URL, Survey Access Code, and QR code were all provided in this letter, and the \$10 post-incentive was prominently displayed, along with contact information. A \$2

prepaid incentive was included that was visible through the outer mailing envelope. In addition, contact information was provided should the sample member have any questions about the study or wish to call the study team to complete by phone.

- **Mailing 2: Reminder Self-Mailer (Postcard):** This fold-over postcard was sent several days after the invitation letter. It included the same URL, Survey Access Code, QR code, and contact information and reminded respondents to complete the survey by web or by paper if they had not done so already.
- **Mailing 3: Second PAPI-CAWI Packet:** This mailing was an additional PAPI packet, like that of Mailing 1, with minor changes to the language from the initial PAPI letter.
- **Mailing 4: Second Reminder Self-Mailer (Postcard):** This mailing was an additional fold-over postcard like that of Mailing 2, reminding respondents again about the study, requesting their participation, and providing the information needed to complete the survey.
- **Mailing 5: Reminder Letter:** This final letter was mailed in a 6"×9" OSU-branded envelope; inside was the invitation letter emphasizing the importance of the study and reminding respondents to complete the survey.

4.2.3. OMAS ABS Data Collection Schedule of Events

The data collection schedule for the ABS is in **Table 4-1**, showing the differences in materials and dates among the three Release 1 groups for the design experiment and Release 2.

Table 4-1. OMAS Address-Based Sampling Data Collection Schedule

Sequence	Release 1, Control and EG1		Release 1, EG2		Release 2	
	Material	Date	Material	Date	Material	Date
A) Mailing 1	Invitation letter	8/29/23	PAPI-CAWI packet	8/31/23	Invitation letter	10/31/23
B) Mailing 2	Reminder self-mailer	9/4/23	Reminder self-mailer	9/5/23	Reminder self-mailer	11/3/23
C) Mailing 3	PAPI-CAWI packet	9/15/23	PAPI-CAWI packet 2	10/9/23	PAPI-CAWI packet	11/17/23
D) Mailing 4	Reminder self-mailer 2	10/20/23	Reminder self-mailer 2	10/30/23	Reminder self-mailer 2	12/12/23
E) Mailing 5	PAPI-CAWI packet 2	10/31/23	Reminder letter	11/17/23	PAPI-CAWI packet 2	12/29/23

CAWI = computer-assisted web interviewing; EG = experimental group; PAPI = paper-and-pencil interviewing.

4.2.4. Logging Undeliverable Mail

For the OMAS, the return address on all mailing materials was an Ohio PO Box. When undeliverable mail arrived at this PO Box, it was forwarded biweekly to RTI's Research Operations Center (ROC) in Raleigh, North Carolina. Upon arriving at RTI's ROC, this undeliverable mail was scanned into RTI's internal system, logging the respondent's address as invalid and removing them from future mailings. Then, the undeliverable item was stored under lock and key until it was securely destroyed.

4.2.5. OMAS ABS Household and Respondent Selection

The 2023 OMAS definition for determining eligible households was based on prior iterations of the OMAS. This necessitated implementing a self-selection method that respondents could complete independent of an interviewer. Eligible households were defined as any residential housing unit, such as an apartment, a house, or a mobile home. Ineligible households included dormitories, hospital rooms, nursing homes, group homes, sororities and fraternities, halfway houses, shelters, prisons or barracks, and businesses. If the selected respondent had not lived in Ohio for at least 1 month before the interview, the household was also considered ineligible.

To ensure that mailing materials were sent to only eligible households, the ABS systematically excluded dormitories, hospital rooms, nursing homes, group homes, sororities and fraternities, halfway houses, shelters, prisons or barracks, and businesses. In addition, these mailing materials were limited to valid Ohio residential addresses.

After a household was determined to be eligible, household members were asked to self-select the eligible respondent using text that was printed on the mailing materials. The CAWI instrument included a question that verified age and residency and would not allow the respondent to complete the survey if they did not meet age and residency requirements. The PAPI instrument contained the following message: "This survey should be completed by the adult, 19 years or older, who lives in this household, had the most recent birthday, and has lived in Ohio for one month or more."

4.2.6. OMAS ABS Proxy Interviews

The 2023 OMAS CAWI and PAPI allowed for the use of proxy interviews in instances where the targeted sample member wished to participate but could not complete the survey without help. The CAWI and PAPI instruments contained a question that asked respondents at the beginning of the survey if they were completing the survey for themselves or for someone else in their household. ("Are you completing this survey for yourself or for someone else in your household?")

If a CAWI respondent selected "for someone else in my household," they were asked to provide the first name or initials of the individual for whom they were completing the survey, asked a question about their relationship to this individual, and shown a conditional message that said, "As we continue the survey, please remember to answer all remaining questions on behalf of <Name of the Individual>." This message was then displayed as a banner at the top of the screen for every question throughout the full duration of the survey session.

If a PAPI respondent selected "for someone else in my household," arrows directed to a message that said, "If you are completing this survey for someone else, please provide responses for the adult (age 19 or older) in your household with the most recent birthday, who has lived in Ohio for at least one month."

Proxy interviews were conducted for all child interviews (note that the child interview was offered only to respondents completing by web who met the eligibility criteria). The instrument screener always selected the child with the most recent birthday.

On the CAWI instrument, if the respondent was eligible to complete the child component, upon finishing the adult section, they were shown the following message: “Thank you for answering these questions about your own health. These next questions focus on the health insurance coverage and health status of one child in your home. You will receive an additional \$5 for participating in this portion of the survey.” They were then asked which child aged 18 or younger had the most recent birthday and the first name of that child. If the respondent could not or would not disclose this information, they were then asked to complete the survey on behalf of the youngest child in the home.

Upon establishing which specific individual to whom the child component of the survey would apply, respondents were then shown the following message: “All remaining questions will be about <Name of the Child>. Your participation is voluntary, you do not have to answer any question you do not want to, and your responses to questions will be kept confidential.” Respondents then selected “Continue,” which began the child section of the survey.

4.2.7. OMAS ABS Incentives

All sample members were sent a \$2 prepaid cash incentive with the first mailing and were sent a \$10 incentive upon completing the survey—all mailing materials informed sample members of the \$10 incentive. The mode in which the \$10 incentive was offered differed by the mode of completion.

Respondents who completed the web survey were sent the \$10 incentive through their choice of Tango Rewards or a check sent by mail. If a respondent chose the Tango Rewards incentive, they provided their email address and were sent a Tango Rewards Link. From this Rewards Link, they could then access the Tango Rewards Card Mall, which allowed them to choose an electronic gift card from 20 common retailers or an electronic Visa debit card. After the respondent selected how to redeem their incentive, their chosen incentive was delivered by email. Respondents who completed the child portion of the survey were sent an additional \$5. Checks were mailed to respondents weekly. Respondents who called the study team and completed by phone were also offered these two incentive options.

Respondents who completed the paper survey were offered the choice of a \$10 physical gift card or a \$10 check by mail, sent to the mailing address from the sampling frame unless the respondent provided an updated mailing address. The selected incentive type was mailed to respondents weekly.

4.2.8. OMAS ABS Call-Ins

To maximize accessibility, the 2023 OMAS allowed respondents on the ABS frame to call RTI and complete the survey by phone. Although over 98% of respondents completed by web or by paper, 569 ABS members called the study team and completed by phone. When a respondent called the study team, they were connected to an interviewer in RTI’s ROC, who administered the survey to the respondent using the CATI instrument.

4.3. OMAS Medicaid Implementation Protocol

4.3.1. OMAS Medicaid Implementation Protocol Overview

The data collection protocol for the Medicaid subsample was derived from the 2022 Ohio Group VIII survey, where a combination of mail, text messages, and phone calls were used to invite respondents to

complete the survey by web or by phone. Although design experiments were not conducted within this subsample, because the protocol used three modes of outreach and two modes of data collection, there was still considerable operational complexity to its design that led to special planning considerations.

4.3.2. OMAS Medicaid Data Collection Materials

As was the case with the ABS, mailed data collection materials derived their visual design from materials used for the successful 2023 Ohio Medicaid Telehealth Evaluation survey. Sample members were originally invited to complete the survey through a mailed invitation letter. This invitation letter contained similar content to the letter mailed to the ABS Release 1 Control/EG2 and Release 2 groups—an explanation of the study, CAWI login credentials, and a note on the incentive upon completion. The initial invitation letter also contained a \$2 prepaid cash incentive that was visible through the outer mailing envelope. The second mailing was a postcard reminder with web completion credentials, reminding respondents to complete by web or complete the paper survey that was previously sent, and the third and final mailing was an additional postcard reminder. See **Appendix F** for a copy of these mailing materials.

The following describes the three mailings:

- **Mailing 1: Invitation Letter:** This letter was mailed in a 6"×9" OSU-branded envelope; inside was the invitation letter and a \$2 bill (the bill was visible through the outer mailing envelope for all sample members). The letter explained the purpose of the study; invited the respondent to participate; and provided a URL (www.OSUsurvey.com) for the respondent to go to, a Survey Access Code (PIN), and a QR code that they could scan to be instantly taken to the website without having to type in the URL manually. The sample member was also informed about the \$20 incentive upon completion. In addition, contact information was provided should the sample member have any questions about the study or wish to call the study team to complete the survey by phone.
- **Mailing 2: Reminder Self-Mailer (Postcard):** This fold-over postcard was sent several days after the invitation letter. It included the same URL, Survey Access Code, QR code, and contact information and reminded respondents to complete the survey if they had not done so already.
- **Mailing 3: Second Reminder Self-Mailer (Postcard):** This mailing was an additional fold-over postcard similar to that of Mailing 2, reminding respondents one last time of the study, requesting their participation, and providing the information needed to complete the survey.

4.3.3. OMAS Medicaid Data Collection Schedule of Events

The data collection schedule for the Medicaid sample is shown in **Table 4-2**.

Table 4-2. OMAS Medicaid Sample Data Collection Schedule

Activity	Release 1	Release 2
A) Mailing 1: Invitation letter	8/31/23	11/1/23
B) Text message 1	9/6/23	11/8/23
C) Text message 2	9/8/23	11/10/23
D) Outbound CATI dialing	9/14/23	11/14/23

Activity	Release 1	Release 2
E) Mailing 2: Reminder self-mailer 1	9/22/23	11/22/23
F) Mailing 3: Reminder self-mailer 2	10/13/23	12/13/23
G) Text message 3	12/19/23	12/19/23

CATI = computer-assisted telephone interviewing.

4.3.4. OMAS Medicaid CATI Implementation

The 2023 OMAS CATI closely followed the Centers for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System calling protocols, as did prior iterations of the OMAS. The instrument maintained and fielded counters to manage protocol.

Call Scheduling

In line with prior iterations of the survey, to encourage younger and more diverse population participation, RTI scheduled most interviewing session hours for weekday evenings, Saturdays during the day, and Sunday evenings. The target interviewing period was between 5 p.m. and 9 p.m. respondent time on weekdays, between 10 a.m. and 9 p.m. on Saturday, and between 1 p.m. and 9 p.m. on Sunday. RTI’s ROC also scheduled shifts between 9 a.m. and 5 p.m. on weekdays for up to a maximum of 20% of total session hours, primarily to dispose of business numbers and to reach respondents who were working or otherwise unavailable in the evenings.

Number of Attempts

Interviewers made a minimum of seven attempts to reach a listed respondent. Each call attempt was given a minimum of five rings. The attempts were rotated through weekday day, weekday evening, Saturday day, and Sunday evening shifts to maximize coverage of the residential population. Additional attempts were made when a respondent was reached and eligible for the study. Persistent “ring no-answers” were attempted a minimum of four times across varying days of the week. If a respondent was contacted on the last call and an interview could not be completed, another attempt was made.

Lines that were busy were called back a minimum of two times at 15-minute intervals. If the line was still busy after the third attempt, the number was attempted again on different calling occasions until the record was resolved.

Callbacks

The CATI system allowed two types of callbacks depending on whether the respondent could offer a specific time and date to be contacted again. A system-scheduled callback was assigned to a record that could not be given a specific date and time, and a scheduled callback was for respondents who provided a definite appointment for recontact.

Callbacks to specific respondents were entered into the computer by interviewers and handled automatically by the program. RTI’s system accommodated general and specific callbacks. For a specific appointment, the record waited until the designated time to be released. At this time, the system found the next available interviewer and delivered the record as the next call. The call history screen that accompanied each record informed the interviewer that the call was a definite appointment and described the circumstances of the original contact. General callbacks, where respondents requested that the interviewer try to reach them at a generally specified time of day (“I usually get home around 6 o’clock”), were sorted and allotted automatically by the system. They were held out of the sample until

the appointed hour, when they were sent to a station with an open slot for that call. They had a higher system priority than returning no-answer and busy records but a lower priority than specific callbacks.

RTI's system also accommodated restarting interrupted interviews by using a definite callback strategy. If a cooperative respondent had to terminate an interview but wanted to finish later, it was possible to set a definite callback for that exact time and restart the interview where it left off. If the interviewer who began the survey was available at the prescribed time, the system sent the call back to that station.

The Voxco system automatically handled callbacks for “no answer,” “busy,” and “answering machine” outcomes. Repeated no-answers were retried at different times of day and days of the week as follows:

- If a call between 5 p.m. and 6 p.m. resulted in no answer, the record was put in the queue to be retried between 8 p.m. and 9 p.m. of the same shift.
- If a call resulted in a busy signal, it was automatically recycled within the same shift according to a preset schedule.
- As with no-answers, if a shift closed before an automatically rescheduled “busy” was attempted, the number was cycled to the next available calling time.

Refusal Conversion

All interviewers conducting the 2023 OMAS were trained to avoid refusals. When respondents refused to participate, the interviewer left a note explaining what had happened or had been said, if anything, and RTI's refusal conversion specialists made at least one more contact. Exceptions were made for cases in which the person answering the phone said something indicating a callback would not be appropriate, such as making threats. Whenever a respondent refused to be interviewed or terminated an interview in progress, the interviewer recorded information as to why the respondent refused or terminated the interview and entered this information into the CATI system. Staff reviewed this information just before calling the phone number again.

Although a high response rate was important, the role of the interviewers was not to harass respondents into participating in the selection process or the interview. Interviewers were trained to inform their supervisor if

- the respondent was verbally abusive or threatened litigation,
- the respondent asked to be placed on a “do-not-call” list, or
- the household refused to transfer the call to the selected respondent and stated that they would never allow the call to be passed to the selected respondent.

These numbers were terminated and coded as final refusals not to be called back.

Methods Used to Increase Response Rates

As has been done for prior iterations of the OMAS, RTI implemented a variety of methods to maximize response rates for the 2023 OMAS, such as leaving messages on answering machines and privacy managers, as well as these:

- Providing verification numbers for RTI and the survey sponsors
- Employing special refusal conversion efforts
- Reattempting phone numbers on different days and at different times of day to maximize efforts to reach individuals
- Conducting interviews in Spanish and English
- Using an incentive for all respondents

Each of these methods is described in detail as follows.

Leaving Messages on Answering Machines

RTI interviewing staff left messages on persistent “answering machine” and “privacy manager” dispositions, informing respondents of the study and scheduling another call attempt for the following day. The message stated that RTI interviewers were calling on behalf of the state of Ohio and that a callback at their convenience would be appreciated. The call center’s toll-free phone number was left on the answering machine. Messages were left on the first and fourth attempts to a household if an answering machine or privacy manager was reached on these attempts. For privacy managers, if a message could not be left, interviewers were instructed to enter the call center’s toll-free phone number. RTI’s call center supervisors were set up to handle incoming respondent calls to complete the interview in response to an answering machine message. The answering machine message was as follows:

“Hello, I’m calling on behalf of The Ohio State University regarding an important study about health care issues affecting state residents. Please call us at 1-833-947-2577 at your convenience. Your participation will help the State of Ohio make better health care policy decisions for residents, such as yourself. My name is ___ (First name) and we look forward to speaking with you. Thank you.”

Survey Verification Lines

RTI’s ROC dedicated a toll-free phone number to receive respondent calls regarding the legitimacy and validity of the study. RTI staff also made contact information for ODH and GRC available to respondents who wished to contact the survey sponsors directly. For the sponsoring agencies, ODH took responsibility for responding to concerns about the survey effort and shared this information with GRC and RTI. All concerns were addressed by ODH, GRC, or RTI, pending the issue of concern, and logged for review by GRC and RTI.

Making Refusal Conversion Efforts

Refusal conversion for the 2023 OMAS occurred at two points: the initial contact with the household and during any subsequent contacts with the household. Study protocols allowed for the reattempt of households that had initially refused. **Section 4.3.4** has more detailed information about the refusal conversion protocols for the OMAS.

Reattempting Numbers

As discussed in **Section 4.3.4**, phone numbers that did not initially produce a completed interview were contacted on different days and at different times of the day to maximize efforts to reach each

household. The study protocol allowed calling to be done over many weeks to ensure that respondents on vacation and those not at home during common calling hours could be reached.

Interviewer Training

RTI conducted numerous interviewer training sessions for the 2023 OMAS. The first session preceded the pilot test in June 2023, and multiple sessions were held before fielding the ABS study in late August 2023 and throughout the field period. The training was conducted virtually by RTI's project management team.

The quality of data collection depends largely on the performance of the interviewing staff. Interviewers on this study were specifically recruited for health care research and call center experience. RTI developed an intensive 2-day training curriculum for the 2023 OMAS, integrating project-specific background discussion with hands-on practice interviewing, review of general and project-specific protocols, and quizzes to reinforce learning.

Interviewers had to complete training and certification before beginning "live" calling in production. Training consisted of 8 hours split between the two sessions. Topics covered during training focused heavily on the survey's background and structure, study-specific protocols and procedures, pronunciation, and answers to frequently asked questions.

During training, interviewers participated in two round-robin mock interviews and two paired-practice mocks, and they completed individual survey practice activities. Field certification for the OMAS involved two oral quizzes and successfully attending and participating during training sessions and exercises. Interviewers needed to achieve 100% correct on both oral quizzes to become certified and begin calling. The 2023 OMAS pilot training agenda included the items in **Table 4-3**.

Table 4-3. Pilot Training Agenda

Time, Minutes	Topic	Time, Minutes	Topic
Evening 1		Evening 2	
15	Welcome and introduction	10	Q&A/review
25	Survey background, purpose, and structure	30	Emotional distress and sensitivity
10	Roles and responsibilities	30	Refusal avoidance
10	General contact procedures	55	Paired practice
15	Respondent rights and importance of confidentiality	15	BREAK
45	Review of FAQ	15	Review FAQ and pronunciation
15	BREAK	40	Individual read-through of questionnaire
20	Pronunciation practice	35	Certification
75	Round robin	10	Q&A/final review
10	Q&A sessions		

In addition, any attendees who were new hires were required to complete RTI's standard new-hire training, which includes RTI's iLearning and on-site introductory CATI training systems. Additional information about the training can be found in **Appendix G**.

RTI conducted follow-up refresher trainings and distributed project bulletins with FAQs and issues encountered during fielding to all stations. These trainings reemphasized survey protocol, covered strategies for handling refusals, reviewed the procedures for suspended records, and reviewed particular survey items with which the interviewers had difficulty. The refresher trainings reinforced quality control during data collection to ensure reliable, valuable data. Much of the information discussed during refresher trainings was based on feedback from OMAS EC members, who participated in live monitoring and review of recorded interviewing sessions throughout the field period. In total, 26 interviewers were trained and certified to work on the 2023 OMAS.

Interviewer Issues, Retraining, Debriefing, and Feedback

During the OMAS data collection period, there were two types of primary interviewer retraining: (1) regular "check-in" and feedback sessions throughout the day for interviewers who had no completes over the past 2 hours (e.g., 0 completes as of 11 a.m., 1 p.m., and 3 p.m.); and (2) ongoing, individual training based on observations from monitoring sessions (live and recorded).

During individual training with monitors or supervisors, phone interviewers were provided specific instances and examples of where they could improve. These sessions included on-site monitoring and monitoring that the client team conducted. Overarching observations from both sets of monitoring were nearly the same, and improvement was observed over time. Comments included the following:

- Any instance in which the survey was not read verbatim, no matter how minor the addition or omission
- Lack of familiarity with the questionnaire—"stumbling and sounding choppy"
- Reading answer choices or interviewer notes when not necessary
- Not consistently emphasizing bold words
- Reading too slowly or too quickly
- Over-probing or insufficient probing
- Being chatty or overly casual
- Handling difficult respondents well and appropriately by addressing concerns, explaining the survey, and maintaining professionalism
- Enunciating and reading clearly
- Making good use of neutral probing and interviewer prompts
- Engaging respondents to participate
- Having an enthusiastic and pleasant tone of voice

Monitoring was conducted live and by recording and was made available to OMAS EC members, the project PI, and co-investigators. When observations from monitoring were identified as a trend rather than as an individual occurrence, feedback was provided to all interviewing staff during quality circle meetings to make sure there was no widespread misunderstanding.

4.3.5. OMAS Medicaid Respondent Selection

Only the named individual in the list sample was eligible to participate. When mailing or calling, materials specifically listed the target individual, and the instrument confirmed that this was the individual completing the survey (or that the survey was being completed on behalf of this individual by an authorized proxy).

4.3.6. OMAS Medicaid Text Messaging

RTI sent up to three text messages to sample members during the data collection period. These messages were sent in Multimedia Messaging Service (MMS) format, which allowed the OMAS study logo to be sent with a message of up to 640 characters. Messages provided a brief overview of the study, emphasized the importance of completing, included study team contact details, and mentioned the incentive upon completion. In addition, an individual hyperlink was included with the Survey Access Code (PIN) embedded in the link, so the sample member did not have to manually enter the PIN to access the survey upon tapping or clicking the hyperlink. If the sample member replied “stop,” future contact was discontinued. If the sample member had a question, they were able to reply to the text message, and RTI responded via text message. Text message content can be found in **Appendix H**.

4.3.7. OMAS Medicaid Proxy Interviews

Sample members from the OMAS Medicaid sample were also allowed to complete the survey by proxy using the same format as outlined for the OMAS ABS, in which all respondents were asked whether they were completing the survey for someone else. If so, interviewers recorded the relationship to the respondent and reminded them to answer all questions on the target respondent’s behalf.

If the interview was completed by phone, the interviewer first established that the proxy was someone aged 19 or older who was able to answer questions about the selected respondent’s health insurance. For interviews that were suspended and resumed, the CATI program prompted interviewers to continue the survey with only the person who started the interview.

4.3.8. OMAS Medicaid Incentives

All sample members for whom an address was available were sent a \$2 prepaid cash incentive with the first mailing and were sent a \$20 incentive upon completing the survey—all mailing materials, outbound phone calls or voicemails, and text messages informed sample members of the \$20 incentive. All respondents were offered the incentive electronically through Tango Rewards or through a check sent by mail.

4.4. Response Rates

To affirm the representation of the target population in a study, researchers look to response rates as indicators of performance. There is no one agreed-upon standard response rate formula because each project lends itself to different measures of performance. Several of these performance measures are discussed as follows.

All response rates were affected by the procedure of assigning final status dispositions. The results of each call attempt were assigned a disposition according to guidelines published by the American Association for Public Opinion Research (AAPOR). These final dispositions can be summarized as follows:

4.4.1. Eligible

- Completes and partial interviews (if applicable)
- Refusals and noncontacts (after confirming eligible household or nonresponse on ABS)

4.4.2. Ineligible

- Survey ineligible = no eligible respondents in household
- Undeliverable = ABS frame addresses returned with a USPS message stating that the addresses were undeliverable

4.4.3. Unknown

- Unknown eligible (Medicaid frame only) = listed enrollee cannot have their eligibility confirmed (e.g., verify they still live in Ohio)

Each address's history of mailings was analyzed to determine the record's final status. Priority was given to outcomes that gathered the most information. For more information, see **Table 4-4**.

Table 4-4. Distribution of Disposition Codes, by AAPOR Response Category and Frame

AAPOR Group	Label	Count		
		ABS	Medicaid	All Records
1.1	Completes (full interviews only)	28,664	10,519	39,183
1.2	Partial completes	228	215	443
2.0	Refusals and break-offs	92,185	17,808	109,993
3.0	Unknown	--	16,113	16,113
4.0	No eligible respondent/ undeliverable	7,963	1,365	9,328

AAPOR = American Association for Public Opinion Research; ABS = address-based sampling.

Full details on the response rates can be found in **Appendix I**.

4.4.4. Lower-Bound Response Rate

The lower-bound response rate provides the lowest possible response rate figure. Also known as AAPOR Response Rate #1, it is obtained by dividing the number of completed interviews by the maximum number of potentially qualified households:

$$RR1 = \frac{\text{Completes}}{\text{Eligible} + \text{Unknown}}$$

For the 2023 OMAS, the lower-bound response rates were 23.7% for the ABS, 23.6% for the Medicaid frame sample, and 23.6% overall.

4.4.5. Response Rates Adjusted for Eligibility

Some response rates consider the ability to definitively establish the eligibility of households. For ABS frame samples, eligibility can be determined in all cases. Because only residential households in Ohio were sampled, addresses were defaulted to be eligible, but, if information from USPS indicated the household was not eligible (e.g., an undeliverable mailing), then the household was designated as ineligible. For the Medicaid frame sample, because a specific person was being sampled, there could be uncertainty about the person's eligibility. In cases where there could be uncertainty in the eligibility of all sampled cases, response rates generally used an estimate of the rate at which a sampling unit was eligible to classify a fraction of these cases of unknown disposition as eligible. Compared with the lower-bound rate, these response rates increased the response rate calculation by not assuming all nonresponding people belong to qualifying households. In addition, some "adjusted" response rates assigned cases to the denominator where the respondent was eligible but unable to complete the interview because of impairment or language difficulties. One adjusted response rate, defined by the Council of American Survey Research Organizations and equivalent to AAPOR's Response Rate #3, calculates the eligible households by taking a proportion of the unresolved numbers and classifying them as eligible:

$$RR3 = \frac{\text{Completes}}{\text{Eligible} + e_u \times \text{Unknown}}, \text{ where } e_u = \left(\frac{\text{Eligible}}{\text{Eligible} + \text{Ineligible}} \right)$$

For this study, this calculation produced AAPOR Response Rate #3 response rates of 23.7% for the ABS frame sample, 24.0% for the Medicaid frame sample, and 23.8% overall.

At the end of data collection, this study treated some partial completes in the same manner as total completed interviews and included them in the final analysis file. For this reason, AAPOR's Response Rate #4 was produced, which includes partial completes in the numerator of the response rate equation:

$$RR4 = \frac{\text{Completes} + \text{Partials}}{\text{Eligible} + e_u \times \text{Unknown}}, \text{ where } e_u = \left(\frac{\text{Eligible}}{\text{Eligible} + \text{Ineligible}} \right)$$

For this study, this calculation produced AAPOR Response Rate #4 response rates of 23.9% for the ABS frame sample, 24.4% for the Medicaid frame sample, and 24.0% overall.

4.4.6. Upper-Bound Response Rate

The upper-bound response rate provides the most optimistic percentage of generally recognized response rates. The upper bound, also known as AAPOR's Response Rate #5, is a measure of interviewer performance and does not take into account sample quality (e.g., numbers that ring but are never answered) or household behavior that prevents contact (e.g., privacy manager technology, screening calls using an answering machine).

$$RR5 = \frac{\text{Completes}}{\text{Eligible}}$$

The upper-bound response rates for this study were 23.7% for the ABS frame sample, 36.9% for the Medicaid frame sample, and 26.2% overall.

4.5. Determining a Completed Interview

An interview was considered complete when a selected respondent or knowledgeable proxy answered the adult section of the questionnaire through the questions related to demographics and family income. Additionally, a child proxy survey was considered complete if a proxy answered all child-related questions through the section on child health risks.

The 2023 OMAS final dataset included variables indicating the status of the adult and child sections of each case. Included in the final dataset were 443 interviews (1.1% of cases) that completed all questions through the adult demographics and family income sections but terminated before completing the full instrument—these were classified as partial complete interviews.¹ Adult interviews with all of the adult modules completed were considered fully completed interviews. Because both partial and fully completed interviews provided critical analytic data, these records were included in the final dataset. Similarly, the final dataset included two (0.04% of cases) surveys with all child-related questions completed in the child proxy survey through the child health risks questions.

4.6. Spanish Language Option

RTI conducted the 2023 OMAS in English and Spanish, offering a Spanish call-in option. Of the 39,626 completed records in the final dataset, 16 were collected in Spanish.

The procedure for conducting interviews in Spanish was straightforward: When a bilingual interviewer reached a Spanish-speaking respondent, the interviewer explained the survey in Spanish and continued directly into the interview without interruption. When a non-Spanish-speaking interviewer contacted a Spanish-speaking household, the record was coded for Spanish interviewing, and the system automatically routed the record to a bilingual interviewer for subsequent attempts.

4.7. Changes to the CAWI and CATI Instruments during the Fielding Period

Early during the fielding period, two items were discovered that necessitated changes to the instrument. Questions TLHLTH and J100A had skip logic errors that resulted in some respondents not being asked these questions, which necessitated instrument updates. In total, 1,263 individuals were not asked TLHLTH, and 354 individuals were not asked J100A (and its corresponding questions, ESI_CH_LNG, MD CD_CH, MD CD_CH_LNG, EXCHNG_CH, J100E, J100G, N067, MD_CH_PRV, and MD_CH_PRVESI). The GRC and RTI teams met and decided to recontact respondents who should have been asked J100A but had not been asked because of skip errors and to impute missing responses to the TLHLTH variable.

4.7.1. Child Survey Recontact Effort

RTI developed a mini CAWI instrument that contained the questions that these 354 respondents were not asked (J100A, ESI_CH_LNG, MD CD_CH, MD CD_CH_LNG, EXCHNG_CH, J100E, J100G, N067, MD_CH_PRV, and MD_CH_PRVESI). Then, these respondents were contacted with two emails and two

¹ For the partial completed interviews included in the analysis dataset, imputation was used to ensure a usable response existed for all key variables (see **Section 5** for details).

text messages, informing them that a few questions were missed and offering them an additional \$5 incentive to complete these few outstanding questions. Copies of the recontact email and text message content, and additional details on this effort, can be found in **Appendix J**. In total, 126 of the 354 (35%) contacted sample members completed this mini-instrument.

5. Data Processing and Analysis

5.1. Dataset

The Voxco survey management system stored 2023 OMAS disposition data, sample data, survey response data, and data that the survey management system created into a centralized database. Paper survey responses were processed via TeleForm and stored separately from Voxco in the Federal Information Processing Standards (FIPS)-moderate environment. The final dataset was created in the SAS statistical program combining the metadata and survey data collected in Voxco and TeleForm. The final dataset contains sample information and survey responses but does not include personally identifiable information to preserve respondent confidentiality.

5.2. Data Processing

5.2.1. Cleaning the Data

Inconsistent Responses

The Voxco program prevents most data inconsistencies with built-in variable range and skip logic checks. However, with PAPI, the following inconsistencies in the data are corrected after data collection:

- **Inconsistencies resulting from incorrect open-end recoding:** In a few cases, the open-ended response did not match the question. These inconsistencies were resolved and fixed in the open-end recoding process in consultation with the OMAS Research Team.
- **Inconsistencies because of respondents providing contradictory responses:** In some cases, the Voxco program could not force consistent data responses, or the respondent did not follow the skip rules on the PAPI form. For example, if a respondent stated that there were more adults in the family than members in the household, the Voxco script was programmed to verify this information. If the respondent stated that their response was correct, the inconsistency remained. These inconsistencies remained in the final dataset. However, PAPI cases that did not follow skip logic were cleaned, in which the gate response (initial question from which the skip logic stems) is treated as the truth.
- **Inconsistencies because respondents changed responses:** In some cases, a respondent may choose to go back and change responses on the web survey. Depending on the questions that the respondent changed, skip patterns in the survey may differ, resulting in previously answered questions being no longer applicable but still having responses from the initial survey response. In these scenarios, case histories were reviewed and the not-applicable questions were changed to “missing.”
- **Inconsistencies introduced during postprocessing:** Occasionally, respondents provided contradictory responses, and the steps to correct the inconsistency yielded further complications. For example, respondents who indicated that they were insured through a current job were automatically coded as being employed. The next question asked these respondents to indicate their place of employment. Some respondents answered that they did not work or that they had lost their job. This inconsistency remained.

Outliers—Out-of-Range Responses

The Voxco program developed for the 2023 OMAS was designed to minimize inconsistent responses throughout the questionnaire, and range checks were set to appropriate limits on responses. For example, if a question asked, “How many days in the last 30 did you drink alcohol?”, the answer should fall between 0 and 30, where 30 represents a total month. All range checks were “hard” in the sense that the computer would not allow entry of an out-of-range response. Consistency checks verified that responses matched one another across questions. For instance, if a respondent said that there were more adults in their central family unit than lived in the household, a consistency check prompted the interviewer to reconcile the responses between the two questions. However, in the PAPI form, these rules could not be enforced, and in some cases, variables were cleaned to remove out-of-range responses.

Missing Values

After working with the OMAS EC to identify candidate variables for imputation at the household and individual levels, RTI conducted data imputation rather than accepting medium to high levels of nonresponse resulting from “don’t know” or “refused” responses or from questions not asked. **Section 5.3** contains additional information about the OMAS imputation procedures.

Both “don’t know” and “refused” were consistently coded throughout the questionnaire as 98 and 99 or 998 and 999.

5.2.2. Coding Open-Ended Responses

The 2023 OMAS included several open-ended response questions (questions that allow for a response not provided). Codes were added if there were a large number of common responses that were not listed as a response option in the original questionnaire. All open-ended responses from the data were then output into files that were subsequently imported into a customized Microsoft Excel spreadsheet for verbatim coding. These spreadsheets were shared with the OMAS EC regularly, with the delivery of interim datasets during fielding to allow them to review and provide the recoded responses for the dataset.

Final coded verbatim data were merged back into the SAS dataset for delivery to the OMAS EC. Data variables not containing recoded verbatim text have the appendage *_RAW* on the variable name in the final dataset.

5.2.3. Recoded, Derived, and Auto-Coded Variables

In the 2023 OMAS, several variables were created to make data analysis easier. These variables come in one of three forms:

- Recoded variable
- Derived variable
- Auto-coded variable

These variables are identifiable in the dataset based on their names. For example, variables that end with *_RAW* are the original non-recoded variables. Also, variables that do not have a survey item in their name are derived variables.

Recoded Variables

Recoded variables are exact replicates of a survey item, renamed to something that is more intuitive to the user. When applicable, recoded variables include open-ended responses that have been assigned to (1) an existing category, (2) a newly created category because of a large propensity of open-ended responses with a response not provided to respondents, or (3) an “other” category. These variables were created for the items of analytic importance that can be directly linked to only one survey question.

Derived Variables

Derived variables are created from two or more survey items. These items often involve the skip logic in the survey to ensure that the levels of the derived variable are properly categorized. Furthermore, certain characteristics can be ascertained from several questions in the survey (e.g., Does the person have insurance?). Derived variables look at these items when categorizing an individual to have a particular characteristic.

Auto-Coded Variables

Auto-coded variables created by the Voxco program during the interview based on respondent-answered questions. These variables are created during the interview process so that they can be used during the interview, with the research team and RTI determining the response categories.

5.2.4. Quality Review

RTI conducted extensive tests of the integrity of the final data. RTI programmers developed SAS scripts that tested the integrity of all survey responses against the CATI logic and against the recoded, derived, and auto-coded variables. These scripts attempted to flag cases that violated any logic rules. Inconsistencies were logged in an output file and checked by data processing staff to see whether any of the data processing programs needed to be corrected.

After the final set of variables was recoded and created and analytic weights were produced, the data were reviewed for quality assurance. A set of checks was implemented to verify the key components of the data:

- Frequencies of derived variables with their source survey variables to ensure appropriate assignments
- Verification of universe totals (i.e., those eligible for an item) for each survey and derived variable
- Comparison of key estimates with prior-year survey data to ensure that the change in estimates was reasonable or expected
- Verification that all imputed variables had no item nonresponse after imputation
- Verification that the imputed variables had expected distributions
- Verification that all survey weights were positive and greater than 1
- Verification that survey weight totals summed to expected control totals

5.2.5. Data Formatting

The final SAS dataset has an associated SAS format library that contains variable labels to help users understand the source and content of the variable. A SAS program with the format values is provided.

This SAS dataset was used to create additional formatted datasets in the Stata/MP and R-System format for EC data users.

5.3. Imputation

Key survey variables for which a respondent did not provide an answer were imputed to allow for a complete analysis data file. These variables were identified for one of two reasons: (1) their necessity in the weighting process, and (2) the need to be part of a complete data file to ensure that records with a missing value in one of these variables could still be included in analyses using these variables. Such variables are identified in the final dataset with the *_imp* suffix in the variable name. All variables were imputed with a weighted sequential hot-deck (WSHD) approach that uses variable correlates for the formation of imputation cells and the sorting of donor and recipient cases within those cells. This approach also used the unit nonresponse-adjusted sampling weight to ensure that the sampling design is accounted for when matching donors with item nonrespondents.

5.3.1. WSHD Imputation

WSHD imputed missing values by pairing item nonrespondents with donors who have similar values for auxiliary variables related to the variable being imputed (Iannacchione, 1982). The matching of item nonrespondents with donors occurred in two ways:

- Sets of item respondents and nonrespondents were grouped based on the values of one or more variables that were important predictors of the variable in question; this cross-classification of predictors defined the “imputation cell.”
- Within imputation cells, respondents and nonrespondents were sorted identically, which makes it more likely (but not guaranteed) that nonrespondents will be paired with respondents who have similar values of the sorting variables.

The actual pairing of records within cells occurs randomly, with pairing probabilities determined by the amount of overlap between cases’ scaled weight sums. Scaled weight sums are calculated by separately and cumulatively¹ summing respondents’ and nonrespondents’ nonresponse-adjusted weights and dividing each record’s cumulative weight sum by the overall sum (among respondents or nonrespondents) for the cell. These scaled weight sums are greater than 0 and less than or equal to 1. These scaled weight sums can also be used to define scaled weight ranges, which are defined as the range between the previous case’s scaled weight sum² and that of the case in question.

For example, consider the case where the first nonrespondent in an imputation cell has a scaled weight sum value of 0.3. This record therefore has a scaled weight range from 0.0 to 0.3. If the first two respondents in this cell have scaled weight sum values of 0.2 and 0.5, they are the only potential donors for the nonrespondent in question (they are the only ones with weight ranges overlapping that of the nonrespondent in question, having ranges from 0.0 to 0.2 and from 0.2 to 0.5, respectively). Although the second respondent has a wider weight range (0.5–0.2 = 0.3) relative to the first (0.2–0.0 = 0.2), it is less probable that it will be the donor record for the first nonrespondent because the entire range of the

¹Because the weight sums are calculated cumulatively, the way in which the cells are sorted largely determines which records can be paired.

²The previous case refers to the ordering of the sorting criteria imposed. The left endpoint on the scaled weight range for the first case in a cell is zero.

first respondent overlaps with that of the nonrespondent, covering two-thirds of the nonrespondent's range. The remaining one-third of the nonrespondent's range is covered by the second respondent. Therefore, in this example, the first respondent will be selected as the donor with twice the probability of the second, despite having a smaller weight.

Tables 5-1 and **5-2** present the imputation cells and sorting criteria used for imputation of variables from the adult interview and the child interview, respectively; the cell variables and sorting variables are denoted with a *C* for a variable included in formation of the imputation cells and an *S* for a variable used for sorting. Imputation proceeded in the order in which the variables are presented in the tables.

Table 5-1. Classification and Sorting Order for Imputation Variables: Adult Interview

Imputation Variables	Classification and Sorting Order												
	Mode	County Type	Adult					No. of			Frame	Poverty Status	
			Sex	Race	Education Attainment	Age	Insurance Status	Health Status	Children in Household	Children in Family			Adults in Family
County	C											C	
Gender	C	C										C	
Sex	C	C										C	
Race	C	C	C									C	
Education Attainment	C	S	S	S								C	
Age	C	C	C	C		C ^a						C	
Insurance Status	C	C	S	C	S	S						C	
Number of Children in Household	C	S		C	C	S						C	
Number of Children in Family	C	S		C	S	S			C			C	
Number of Adults in Family	C	S		C	S	S				C		C	
Family Members Supported by Income	C	S		S	S	S				C	S	C	
Number of Adults in Household	C	S		S	S	S			C ^b		C ^c	C	
Length of Time Covered by Medicaid (Medicaid frame only)	C	S		C	S	S							
Length of Time Covered by ESI	C	S		C	S	S						C	
Length of Time Covered by Medicaid (ABS frame)	C	S		C	S	S							
Health Status	C	S		C	S	S						C	C
Days Mental Health Affected Activities	C	S		C	S	S		C				C	C
Job Status	C	S	C	C	S	S	C					C	C
Usual Source of Care	C	S	C	C	S	S	C					C	C
Developmental Disability	C	S		C	S	S	C	C				C	C

Imputation Variables	Classification and Sorting Order																
	Mode	County Type	Adult					Child					Developmental Disability	Poverty Status			
			Sex	Race	Education Attainment	Age	Insurance Status	Race	Age	Insurance Status	Medicaid Status	Health Status			Deaf	Blind	
Age	S	C			S	S ^a											
Insurance Status	S	S			C	S	C	C									
Experiences (ACE 3-10)	S	S			S	S		C		C	C						
Health Status	S	S						C	S	C	C						C
Dental Health	S	S						C	S	C	C	S					C
Difficulty Speaking or Communicating	S	S						C		C	C	S	S	S			C
Developmental Disability	S	S						C		C	C	S	S	S			C
Frequency Child Missed School/Activities due to Mental Health	S	S						S		C	C	S				S	C
Usual Source of Care	S	S						S		C	C	S				S	C
Dental Coverage	S	S						C	S	C	C						C

C – Variable used in formation of imputation cells.

S – Variable used for sorting within imputation cells.

^a Adult age was collapsed into six levels (19–24, 25–34, 35–44, 45–54, 55–64, 65+).

5.3.2. Imputation of Insurance Type

Insurance type (I_TYPE_A and I_TYPE_C) was imputed based on the imputed values of the underlying ways a person could obtain insurance. The underlying means by which insurance can be obtained are as follows:

1. Medicaid
2. Medicare (adult only)
3. Employer-sponsored insurance
4. ACA Exchange
5. Private insurance
6. Other

To impute insurance type, each of the underlying insurance types needs to be imputed. Because a person's response to one insurance type is correlated with the remaining types, a block imputation

approach was used. Block imputation is a type of hot-deck imputation that imputes a set of variables simultaneously to ensure that they are internally consistent. For insurance type, the block imputation was performed separately for adults and children and proceeded as follows:

1. *Partition sample based on imputed insurance status.* Cases were split by those that were identified as having insurance (i.e., INSRD_A_IMP=1) and those that did not have insurance (i.e., INSRD_A_IMP=2). For those identified as not having insurance, any missing insurance types are imputed to “no.”
2. *Impute cases with only one missing insurance type.* Cases with a single missing value (e.g., only missing whether the person had Medicaid) were imputed first. Cases were imputed in order shown above based on the type of insurance missing (e.g., Medicaid imputed first, Medicare second).
3. *Identify imputation donor.* Donors were identified as those with the same response pattern for the remaining types of insurance that were not missing. A random donor was selected to impute the missing insurance type.
4. *Impute cases with two missing insurance types.* Cases missing two insurance types were imputed after all cases with one missing value were imputed. Cases imputed with only one missing value were included as potential donors because they were now completed cases.
5. *Identify imputation donors.* Imputation donors were identified based on those with the same response pattern for the remaining non-missing insurance types. A single donor was used to replace all missing values from the recipient. This was done to maintain the internal consistency of the case.
6. *Impute cases with three or more missing.* The imputation processes continued by imputing those with three missing values, followed by those missing four values, and so on. This iterative process continues until the last step which includes individuals missing all the insurance type variables (i.e., child interviews missing five values or adult interviews missing six values). In each instance, missing values in a recipient’s record were replaced with values from a single donor.
7. *Create imputed insurance type.* Based on the imputed insurance type values, the imputed insurance type variable (I_TYPE_A_IMP and I_TYPE_C_IMP) was created.

5.3.3. Imputation for Disability

The 2023 OMAS includes questions on the six disabilities asked in the ACS:

- Person is deaf
- Person is blind
- Person has difficulty walking or climbing stairs
- Person has difficulty dressing
- Person has serious difficulty concentrating, remembering, or making decisions due to a physical, mental, or emotional condition

- Person has difficulty doing errands alone, such as seeing a doctor, because of a physical, mental, or emotional condition

As with insurance type, the value of a particular disability is correlated with the value of the other five disabilities. Because of this similarity, the same method described for imputing insurance type was used to impute disability.

A similar process was also used for the variables related to whether a child is deaf or hard of hearing (CDC_1_CH) and whether a child is blind or has serious difficulty seeing (CDC_2_CH).

5.3.4. Imputation for Mode of Healthcare

The 2023 OMAS includes questions about whether an individual saw a doctor or other healthcare provider in the following ways:

- In person (UTLZ01)
- Audio-only call without video (UTLZ02)
- Video call with audio (UTLZ03)

Respondents who reported seeing a doctor or other healthcare provider by an audio-only or video call were also asked how many times they had a telehealth visit with a doctor, nurse, or other healthcare provider during the past 12 months (TLHLTH). However, some PAPI respondents answered the telehealth question despite not answering the questions related to audio-only and video calls. Imputation of these questions proceeded according to the following steps:

1. Impute missing values for UTLZ02 and UTLZ03 for PAPI respondents who answered TLHLTH. The non-missing values for TLHLTH were used to form imputation classes.
2. Impute missing values for UTLZ01, UTLZ02, and UTLZ03 using a process similar to the methods described earlier for insurance type.
3. Impute missing values for TLHLTH.

5.3.5. Need or Receipt of Treatment for Physical, Mental, or Emotional Condition

The 2023 OMAS includes questions about whether a child needs or gets the following types of treatment because of a physical, mental, or emotional condition lasting 12 months or more:

- Medicine prescribed by a doctor or other health care professional, other than vitamins
- Special therapy such as physical, occupational, or speech therapy
- Treatment or counseling for any kind of emotional, developmental, or behavioral problem

As with insurance type, the various types of treatment are likely correlated. Because of this similarity, the same method described for imputing insurance type was used to impute disability.

5.3.6. Imputation for Last Month's and Last Year's Household Income

Income is an extremely important variable that is also subject to relatively high rates of missingness. The income questions were also fairly complex because there was a last month's and a last year's version (asked separately) and because each version could be reported as a specific dollar value or as a categorical value (when the specific value is not reported) This all resulted in a fairly intricate, multistep imputation process. The income imputation strategy employed is detailed in the following steps:

1. Classified missing income cases (based on the instrument, a case falls into only one category listed)
 - a. Reported continuous last year's income, missing last month's income entirely
 - b. Reported continuous last year's income, reported categorical last month's income
 - c. Reported continuous last year's income, reported continuous last month's income
 - d. Reported categorical last year's income, missing last month's income entirely
 - e. Reported categorical last year's income, reported categorical last month's income
 - f. Reported categorical last year's income, reported continuous last month's income
 - g. Missing last year's income entirely, missing last month's income entirely
 - h. Missing last year's income entirely, reported categorical last month's income
 - i. Missing last year's income entirely, reported continuous last month's income
2. Used percentile-constrained lognormal interpolation (Couzens et al., 2016) for cases reporting last year's income categories (*d-f*), where possible (i.e., when there were enough cases with same number of people in the household to estimate lognormal parameters)
3. Used WSHD for *d-f* cases where there were not enough cases with the same number of people in the household to estimate lognormal parameters, but where there was at least one additional case with the same cross-classification of number in household and income category number (1-9); formed imputation cells by number in household, income category number, and adult Medicaid status
4. Used linear interpolation (uniformly select a value between category boundaries) for *d-f* cases not accounted for by Steps 2 or 3
5. Used cases in group *c* to determine which factors were most important in predicting the ratio of last year's to last month's income (random forest variable importance, for example)
6. For cases in *i*, used the median ratio between last year's and last month's income to impute last year's income within the cross-classification of variables identified in Step 5 (again, using cases from group *c* to determine the median value)

7. Used WSHD for cases in group *h*, with imputation cells defined by the cross-classification of number of people in the household, last month's income category number (1–9), adult Medicaid status, and frame status (ABS or Medicaid)
8. Used WSHD for cases in group *g* (imputing last year's and last month's income simultaneously from the same donor), with imputation cells defined by the cross-classification of adult Medicaid status, adult race, adult sex, and frame status (ABS or Medicaid)
9. For cases in *b*, *e*, and *h* with a reported categorical last month's income value, used a three-step interpolation/imputation approach equivalent to what was applied to last year's income in Steps 2–4, which ensured that the imputed continuous income value was bound by the range of the reported income category.
10. For cases in *a* and *d* with no reported last month's income information, used WSHD with imputation cells defined by the cross-classification of number of people in the household, categorized last year's income, adult Medicaid status, and frame status (ABS or Medicaid)

5.3.7. Amount of Item Nonresponse

Across all the variables imputed, the level of missing data ranged from 0.1% (county of residence) to 14.6% (last year's income). In general, of the 91 items imputed, all but 3 items (last month's income, last year's income, frequency of telehealth visits) had fewer than 5% of responses missing. **Table 5-3** shows the number and percentage of missing data for each item imputed.

Table 5-3. Number and Percentage of Missing Data for Imputed Variables

Variable	Nonrespondents	Respondents	% Missing
ACE_3—Has child ever experienced parents or guardians going through divorce/separation?	59	5,446	1.1
ACE_4—Has child ever experienced death of a parent or guardian?	36	5,469	0.7
ACE_5—Has child ever experienced a parent or guardian serving time in jail after they were born?	41	5,464	0.7
ACE_6—Has child ever seen or heard parents or adults slap, hit, kick, or punch one another in the home?	42	5,463	0.8
ACE_7—Has child ever been the victim of violence or witnessed violence in their neighborhood?	39	5,466	0.7
ACE_8—Has child ever lived with anyone who was mentally ill, suicidal, or severely depressed?	46	5,459	0.8
ACE_9—Has child ever lived with anyone who had a problem with alcohol or drugs?	43	5,462	0.8

Variable	Nonrespondents	Respondents	% Missing
ACE_10—Has child ever been treated or judged unfairly because of their race or ethnic group?	41	5,464	0.7
ADULT_DD—Developmental disability	452	39,174	1.1
CDC_1—Have serious difficulty hearing	252	39,374	0.6
CDC_1_CH—Child deaf or hard of hearing	10	5,150	0.2
CDC_2—Difficulty seeing, even when wearing glasses	223	39,403	0.6
CDC_2_CH—Child blind or has serious difficulty seeing, even with glasses	9	5,151	0.2
CDC_3—Difficulty walking or climbing stairs	304	39,322	0.8
CDC_4—Difficulty dressing or bathing	278	39,348	0.7
CDC_5—Difficulty concentrating, remembering, or making decisions	342	39,284	0.9
CDC_6—Difficulty doing errands alone, such as visiting a doctor’s office or shopping	326	39,300	0.8
CHILD_DD—Child has developmental disability	14	5,146	0.3
D30—Rate general health status	252	39,374	0.6
D30I—Past 30 days, mental health prevented work/activities	1,288	38,338	3.3
DIS12_CNS—Child needs treatment/counseling for emotional, developmental, or behavioral problem	18	5,142	0.3
DIS12_MED—Child needs/uses prescription medication for condition lasting over 12 months	14	5,146	0.3
DIS12_THRP—Child needs special therapy for condition lasting over 12 months	13	5,147	0.3
EDUC—Highest level of education	401	39,225	1
ESI_LNG—Length of time covered by employer health insurance/plan	375	12,410	2.9
F67—Regular source of medical care	249	39,377	0.6
G71—Last week job status	938	38,688	2.4

Variable	Nonrespondents	Respondents	% Missing
H84_A1—Number of family members supported by income	1,342	38,284	3.4
HHINCM—2023 Monthly income	4,941	34,685	12.5
HHINCY—2022 Annual income	5,780	33,846	14.6
I90A—Child age	0	5,505	0
INSRD_A—Adult insurance status, derived	83	39,543	0.2
INSRD_C—Child insurance status, derived ^a	14	5,491	0.3
INS_ESI_A—Adult insurance coverage - employer sponsored, derived	582	39,044	1.5
INS_ESI_C—Child insurance coverage - employer sponsored, derived ^a	243	5,262	4.4
INS_EXCHANGE_A—Adult insurance coverage - exchange, derived	1,124	38,502	2.8
INS_EXCHANGE_C—Child insurance coverage - exchange, derived ^a	253	5,252	4.6
INS_Other_A—Adult insurance coverage - other, derived	952	38,674	2.4
INS_Other_C—Child insurance coverage - other, derived ^a	253	5,252	4.6
INS_PRIVATE_A—Adult insurance coverage - private, derived	977	38,649	2.5
INS_PRIVATE_C—Child insurance coverage - private, derived ^a	257	5,248	4.7
L125—Rate child's general health	14	5,491	0.3
L125A—Rate child's dental health	13	5,492	0.2
LAS12—Child experiences any difficulty speaking, communicating, or being understood	9	5,151	0.2
LAS12B—Past 30 days, number of days child ages 5+ missed school/usual activities due to mental health condition or emotional problems	26	3,739	0.7
MDCD_LNG—Length of time covered by Ohio Medicaid insurance/plan	231	6,868	3.3
MDLST_LNG—Length of time covered by Medicaid, Medicaid frame only	24	10,710	0.2

Variable	Nonrespondents	Respondents	% Missing
MEDICARE_A—Adult covered by Medicare, derived	629	38,997	1.6
MEDICD_A—Adult covered by Medicaid, derived	606	39,020	1.5
MEDICD_C—Child covered by Medicaid, derived ^a	245	5,260	4.5
MRD—Current marital status	360	39,266	0.9
N067—Child has dental coverage ^a	26	5,240	0.5
N136—Child regular source of care	15	5,490	0.3
ND_DNTL—Past 12 months, needed dental care	158	39,468	0.4
ND_DRG—Needed treatment for alcohol/drug use, past 12 months	42	2,812	1.5
ND_DRG_EVR—Needed treatment for alcohol/drug use ever	357	39,269	0.9
ND_MTL—Past 12 months, needed mental healthcare/counseling	228	39,398	0.6
ND_VS—Past 12 months, needed vision care	173	39,453	0.4
NUM_ADULTS—Number of adults in household	807	38,819	2
P148—Child gender	44	5,461	0.8
RACE_ETH_AIAN_A—Adult race, Native American, American Indian, or Alaska Native, derived	430	39,196	1.1
RACE_ETH_AIAN_C—Child race, Native American, American Indian, or Alaska Native, derived	24	5,481	0.4
RACE_ETH_ASIAN_A—Adult race, Asian, derived	430	39,196	1.1
RACE_ETH_ASIAN_C—Child race, Asian, derived	24	5,481	0.4
RACE_ETH_BLACK_A—Adult race, Black or African American, derived	430	39,196	1.1
RACE_ETH_BLACK_C—Child race, Black or African American, derived	24	5,481	0.4
RACE_ETH_HISP_A—Adult race, Hispanic, Latino, Spanish, derived	576	39,050	1.5

Variable	Nonrespondents	Respondents	% Missing
RACE_ETH_HISP_C—Child race, Hispanic, Latino, Spanish, derived	29	5,476	0.5
RACE_ETH_NHPI_A—Adult race, Native Hawaiian or Pacific Islander, derived	430	39,196	1.1
RACE_ETH_NHPI_C—Child race, Native Hawaiian or Pacific Islander, derived	24	5,481	0.4
RACE_ETH_OTHER_A—Adult race, other, derived	430	39,196	1.1
RACE_ETH_OTHER_C—Child race, other, derived	24	5,481	0.4
RACE_ETH_WHITE_A—Adult race, White, derived	430	39,196	1.1
RACE_ETH_WHITE_C—Child race, White, derived	24	5,481	0.4
S11—Adults in family	716	38,910	1.8
S12—Children in household	659	38,967	1.7
S13B—Children in family	758	38,868	1.9
S14—Respondent age	478	39,148	1.2
S15—Respondent gender	367	39,259	0.9
S9—Current county of residence	40	29,571	0.1
SEX_A—Adult sex	474	39,152	1.2
SEX_C—Child sex	68	5,437	1.2
TLHLTH—Past 12 months, frequency of telehealth visits ^a	1,418	9,930	12.5
UNMT_DNTL—Able to get needed dental care	177	23,154	0.8
UNMT_DRG—Able to get treatment for alcohol/drug use	18	1,271	1.4
UNMT_MTL—Able to get mental healthcare/counseling	95	10,526	0.9
UNMT_PRS—Past 12 months, were unable to fill prescription	228	39,398	0.6
UNMT_VS—Able to get needed vision care	200	24,471	0.8
UTLZ01—Past 12 months, source of care in person	209	39,417	0.5

Variable	Nonrespondents	Respondents	% Missing
UTLZ02—Past 12 months, source of care by audio-only call	1,437	38,189	3.6
UTLZ03—Past 12 months, source of care by video call	1,494	38,132	3.8

^a Imputation rates were affected by questionnaire skip logic errors. For more information, see **Section 4.7**.

5.4. Weighting Strategy

The purpose of the OMAS 2023 analytic weights is to allow for the production of

- representative estimates of residents of Ohio at the state, county type, and county levels; and
- representative estimates of the Medicaid population in aggregate and by enrollment type (G-VIII, ABD, CFC).

To achieve this purpose, the weighting strategy consisted of the following broad steps:

- Develop weights for the ABS frame respondents.
- Develop weights for the Medicaid frame respondents.
- Develop blended weights combining the ABS frame and Medicaid frame respondents.

These steps are detailed in the next three sections.

5.5. Weighting the ABS Sample

The ABS weighting plan consisted of five steps:

- Base weight
- Eligibility adjustment
- Nonresponse adjustment
- Person-level design weight
- Poststratification

In this section, each step in the weighting process is described.

5.5.1. Design-Based Weight

The OMAS ABS sample used a stratified simple random sample to select housing units within each stratum (h). As such, the base (design) weight (WT_{HH}) is computed as follows:

$$WT_{HH} = \frac{N_h}{n_h},$$

where N_h is the number of housing units within stratum h , and n_h is the number of housing units sampled within stratum h .

5.5.2. Eligibility Adjustment

The OMAS ABS sample included five mailings to each sampled household. After each mailing, a subset of the cases were identified as “undeliverable address.” **Table 5-4** presents the number and percentage of undeliverable addresses.

Table 5-4. Number and Percentage of Undeliverable Addresses

Number of Times Undeliverable	Number of Cases	Percentage of Cases
Never undeliverable	120,898	93.7
Undeliverable on one mailing ^a	5,163	4.0
Undeliverable on up to two mailings ^b	628	0.5
Undeliverable on up to three mailings ^c	818	0.6
Undeliverable on up to four mailings ^d	1,213	0.9
Undeliverable on all five mailings ^e	320	0.2

^a Of the five mailings made, one was returned as undeliverable and the other four, if mailed, had no response.

^b Of the five mailings made, two were returned as undeliverable and the other three, if mailed, had no response.

^c Of the five mailings made, three were returned as undeliverable and the other two, if mailed, had no response.

^d Of the five mailings made, four were returned as undeliverable and the other one, if mailed, had no response.

^e All five of the mailings were returned as undeliverable.

Cases with one or more undeliverable address mailings were coded as “out of scope” for the study. As such, these sampling units were ineligible for the study. However, any other housing unit where no residency was confirmed was considered eligible. Therefore, an eligibility-adjusted weight (WT_{HH_E}) was defined as follows:

$$WT_{HH_E} = \begin{cases} 0 & \text{if undeliverable} \\ WT_{HH} & \text{otherwise} \end{cases}.$$

5.5.3. Nonresponse Adjustment

To correct for nonresponse, the eligibility-adjusted weight for responding households was adjusted to account for the weight of eligible nonresponding households. The nonresponse adjustment was conducted within each stratum (h). As such, the nonresponse-adjusted weight (WT_{HH_NR}) will be calculated for record i as follows

$$WT_{HH_NR_i} = WT_{HH_E_i} \times \frac{\sum_{ih} WT_{HH_E_i}}{\sum_{ih} (WT_{HH_E_i} \times I_{ih})} \times I_{ih},$$

where I_{ih} is an indicator of response for stratum h for record i (i.e., $I_{ih} = 1$ indicates a responding household, and $I_{ih} = 0$ indicates a nonresponding household).

5.5.4. Person-Level Design Weight

Under the ABS sample protocol, one adult and one child (when present) were randomly selected to participate in the OMAS. Responding adults indicate the number of adults in the household (n_{ia}) and, when present, the number of children (n_{ic}). Because the nonresponse-adjusted weight is a household-level weight, the purpose of the person-level design weight is to adjust the weight so that it represents the number of persons within each stratum rather than households. As such, the person-level design weight consisted of two weights: (1) an adult weight (WT_A1) and (2) a child weight (WT_C1). These two weights are defined as follows:

$$WT_{A1} = WT_{HH_NR_h} \times n_{ia}$$

and

$$WT_{C1} = WT_{HH_NR_h} \times n_{ic}.$$

5.5.5. Poststratification

The final weight adjustment is to correct the person-level design weight for any coverage deficiencies through a poststratification adjustment. In this step, calibration models were created to rake the person-level design weights to the desired population totals. These models post-stratify respondents based on population totals from the 2020 5-year ACS. To make this adjustment, a generalized exponential model (Folsom & Singh, 2002), which is a raking procedure that simultaneously controls the marginal totals, was used. Separate models were fit for the adult respondents and the child interviews. The 2023 OMAS controlled for the following characteristics for the adult respondents (see **Appendix L** for detailed description of levels and population totals):

- Total Population
- Imputed Sex (2 levels)
- Age (6 levels)
- Race (3 levels)
- Education (4 levels)
- County Type (4 levels)
- Medicaid (3 levels)
- Imputed Sex (2 levels) × Age (3 levels)
- Imputed Sex (2 levels) × Age (3 levels) × Race (2 Levels)
- Imputed Sex (2 levels) × County Type (4 levels)
- Age (3 levels) × County Type (4 levels)
- Medicaid (3 levels) × Imputed Sex (2 levels) × Age (3 levels)
- Medicaid (2 levels) × County Type (4 levels) × Imputed Sex (2 levels)
- Medicaid (3 levels) × Race (3 levels) × Age (2 levels)

The child weights were poststratified to the following characteristics:

- Total Population
- Age (4 levels)
- Race (2 levels) × Age (4 levels)
- Medicaid (2 levels) × County Type (4 levels)

- Imputed Sex (2 levels)
- Race (2 levels)
- County Type (4 levels)
- Medicaid (2 levels)
- Imputed Sex (2 levels)× Age (4 levels)
- Medicaid (2 levels) × Imputed Sex (2 levels)
- Medicaid (2 levels) × Race(2 levels)
- Imputed Sex (2 levels)× Race (2 levels)× Age (4 levels)

The resulting weights from the poststratification model are WT_A_ABS and WT_C for adults and children, respectively.

5.6. Weighting the Medicaid Frame Sample

The weights used to represent the Medicaid frame population were constructed in three steps:

1. Design-based weight
2. Eligibility adjustment
3. Nonresponse adjustment
4. Poststratification adjustment

Note, for estimation, as detailed in **Section 5.8**, the nonresponse adjusted weight should be used when analyzing only the Medicaid administrative frame respondents. The poststratification adjusted weight is used to create the blended weight with the ABS frame (see **Section 5.7**)

5.6.1. Design Weight

The design weights equaled the inverse probability of selection. That is,

$$w_1 = \frac{N_h}{n_h},$$

where N_h is the population size of stratum (i.e., population group) h , and n_h is the released sample within stratum h .

5.6.2. Eligibility Adjustment

Although the sample came from a current list from of Medicaid enrollees, there are some cases in the administrative records that have not been properly updated. As such, there is a small chance of selecting a person who will be deemed ineligible for the survey. A person is ineligible for the survey if they

- live outside Ohio,
- are incarcerated in prison or jail,
- are not currently covered by Medicaid, or
- are younger than age 19 or older than age 64.

Furthermore, there is a portion of the sample for which the sampled person's eligibility status cannot be determined with certainty. This occurred when the person could not be contacted. A person was not contacted if they did not respond to the survey invitation in any way or if the contact information on the frame is bad.

In this step, the design weights for those whose final disposition was unknown were adjusted for the chance they may be ineligible. That is,

$$w_2 = \begin{cases} w_1 & \text{if known eligible} \\ w_1 \times \frac{n_{eh}}{n_{eh}+n_{ih}} & \text{if unknown eligible,} \\ 0 & \text{if known ineligible} \end{cases}$$

where n_{eh} is the number of known eligible persons in stratum h of the released sample, and n_{ih} is the number of known ineligible persons in stratum h of the released sample.

5.6.3. Nonresponse Adjustment

In this step, the eligibility-adjusted weights among respondents were adjusted to account for the weights of the eligible nonrespondents. The resulting weight from this step controlled for Medicaid program allowing for program specific analyses.

The nonresponse adjustment consisted of an iterative raking model—the generalized exponential model (Folsom & Singh, 2002)—using frame characteristics, which are known for respondents and nonrespondents. The source for the frame characteristics was the administrative information known at the time of sampling from the July 2023 administrative file. For the 2023 OMAS, the following frame characteristics were available from Medicaid administrative data for the nonresponse adjustment models:

- Race/ethnicity (non-Hispanic White, non-Hispanic Black, all other)
- County type (rural Appalachian, metro, suburban, rural non-Appalachian)
- Gender (male, female)
- Age group (19–34, 35–49, 50–64)
- Medicaid program (CFC, ABD, Expansion, MyCare, other)
- Any ER visit (yes, no)
- Any primary care visit (yes, no)
- Any inpatient visit (yes, no)
- Any claims (yes, no)
- Has asthma (yes, no)

- Has chronic pain (yes, no)
- Has type 2 diabetes (yes, no)
- Has hypertension (yes, no)
- Has obesity (yes, no)

The weight after the nonresponse adjustment is denoted as WT_MED. This weight will be used for analysis of the Medicaid list sample.

5.6.4. Poststratification

To ensure the Medicaid population totals from respondents in the ABS sample and the Medicaid sample match, a poststratification step using the average population of the Medicaid enrollment file from August to December 2023 (the data collection period) was conducted. The administrative information used for this step were totals known to both ABS respondents and Medicaid administrative frame respondents. As such, characteristics like Medicaid program were not controlled for. This allowed the two samples to have the same weighted population totals prior to the blending the two sample weights.

For adults, the following population totals were used:

- Total Population
- Age (2 levels)
- Imputed Sex (2 levels)
- Race (3 levels)
- Dual Enrollment Status (2 levels)
- County Type (2 levels)
- Age (2 levels) × Imputed Sex (2 levels)
- Age (2 levels) × Race (2 levels)

The resulting weights from the poststratification model are WT_A_POST. This weight will be used to blend with the ABS sample weight.

5.7. Combining the ABS Sample and Medicaid Sample Weights

The final 2023 OMAS dataset consists of a combined set of ABS frame and Medicaid frame respondents.

5.7.1. Blending of Final ABS and Medicaid Weights

The final ABS sample and Medicaid sample weights were blended to ensure that the combined sample did not overrepresent the Medicaid population in Ohio. The ABS sample and Medicaid sample weights are each representative of the Ohio Medicaid population. Therefore, an adjustment is needed to ensure that the combined file does not double-represent people in the state.

The blending methodology used a dual-frame adjustment method (Hartley, 1962). Under Hartley's method, a blending parameter (λ) is applied to cases that appear on the two frames. In this case, all persons in the Medicaid sample overlap with those who identify as having Medicaid in the ABS frame sample.

The inputs for the blended weights were the poststratified weighted Medicaid cases and weighted ABS cases. The dual-frame adjusted weight was defined for adults as follows:

$$WT_A_BLEND = WT_A_ABS \times I(MED) \times \lambda_A + WT_A_POST \times (1 - \lambda_A),$$

where $I(MED)$ is an indicator for whether the ABS respondent is identified as having Medicaid.

For children, because the Medicaid sample consists of only adults, the blended weight is the ABS weight:

$$WT_C_BLEND = WT_C_ABS.$$

To determine the most appropriate blending option, multiple blending parameters were considered. The ABS and Medicaid samples had the largest sample disparities by county type and age category. Therefore, a blending parameter that controlled for these two factors was used. **Table 5-5** presents the final blending parameters.

Table 5-5. Blending Parameters

Blending Level	ABS Sample	Medicaid Sample
County Type = Rural Appalachian, Age 19–44	0.27598	0.72402
County Type = Rural Appalachian, Age 45–64	0.30405	0.69595
County Type = Rural Appalachian, Age 65+	0.91425	0.08575
County Type = Metro, Age 19–44	0.3405	0.6595
County Type = Metro, Age 45–64	0.36301	0.63699
County Type = Metro, Age 65+	0.92022	0.07978
County Type = Rural Non-Appalachian, Age 19–44	0.26747	0.073253
County Type = Rural Non-Appalachian, Age 45–64	0.30279	0.69721

Blending Level	ABS Sample	Medicaid Sample
County Type = Rural Non-Appalachian, Age 65+	0.8875	0.1125
County Type = Suburban, Age 19–44	0.3032	0.6968
County Type = Suburban, Age 45–64	0.28564	0.71436
County Type = Suburban, Age 65+	0.85882	0.14118

5.7.2. Poststratification

Because the two Medicaid samples were poststratified to a slightly different set of population parameters (see **Section 5.5.5** and **5.6.4**), a final poststratification model was fit. Because only respondents with Medicaid had their weights blended together, this model included only respondents who indicated having Medicaid from the ABS sample or respondents from the Medicaid frame. As such, the model included only Medicaid-related population totals. These population totals included these:

- Total population
- Imputed Sex (2 levels)
- Age (3 levels)
- Race (3 levels)
- County Type (4 levels)
- Dual Enrollment Status (2 levels)
- Sample Frame (2 levels)
- Imputed Sex (2 levels) × Dual Enrollment Status (2 levels)
- Imputed Sex (2 levels) × County Type (4 levels)
- Age (3 levels) × Dual Enrollment Status (2 levels)

5.7.3. Weight Trimming

After blending the weights for those who self-reported having Medicaid from the ABS frame and respondents from the Medicaid frame, the resulting weights had larger variation than desired. **Table 5-6** shows the unequal weighting effect for the adult weights among all adults and adults with Medicaid (i.e., the set of respondents whose weights were blended). The blended sample of adults with Medicaid had a UWE of 3.01 before trimming. This led to higher than desired standard errors. After trimming the UWE was cut to 2.09. The UWE for all adults was only slightly reduced because the bulk of adult respondents do not have Medicaid and, therefore, their weights were not impacted by the blended process.

Table 5-6. Unequal Weighting Effects for Adult Weights among All Adults and Adults with Medicaid

Weight (adult)	Unequal Weighting Effect	
	All Adults	Medicaid Adults
ABS frame sample	3.0	4.20
Medicaid frame sample	--	1.87
Blended sample	3.42	3.01
Blended sample after trimming	3.37	2.09

Because the blended sample impacted only those who indicated having Medicaid on the ABS frame or were sampled from the Medicaid frame, only the weights from either source of Medicaid persons were trimmed. The trimming set the following minimum and maximum values:

- Weight minimum: 1
- Weight maximum: 232.102

The final population parameters for characteristics included in the final models (i.e., the poststratified ABS sample for adults who do not have Medicaid and all children and the weight-trimmed, poststratified blended sample for adults with Medicaid) are detailed in **Appendix L**.

5.8. Estimation

The 2023 OMAS used a complex survey design. As such, special procedures are required to calculate the standard error of estimates properly. This section details the approach for proper estimation. Examples of how to use existing software (e.g., Stata, SUDAAN, SAS, R) are presented in **Appendix K**.

5.8.1. Estimation Approach

Estimates in the 2023 OMAS can be produced through Taylor series linearization (TSL). TSL is a computational procedure that uses the sampling design, including strata and clusters, to estimate standard errors. For stratified designs, such as that used for the OMAS, standard errors are estimated within each stratum. Estimates of standard errors of means are available through formula; more complex estimates are then functions of means so that derivatives are used to linearize the variance. More information about Taylor series variance estimation for sample survey data is available in Woodruff (1971), Fuller (1975), Wolter (1985), Lee et al. (1989), Särndal et al. (1992), Levy and Lemeshow (2008), and Lohr (2010).

Because the 2023 OMAS had multiple analytic objectives (overall population of Ohio and Medicaid population in Ohio), multiple analytic weights have been included on the file. The additional weights will allow for representative analysis of the following populations:

- Overall adult population of Ohio residents based on the combined ABS frame and Medicaid frame samples
- Overall adult population of Ohio residents based on the ABS frame sample only

- Overall Medicaid population of Ohio based on the combined ABS frame and Medicaid frame samples
- Medicaid population by Medicaid enrollment type based on the Medicaid frame sample only
- Overall child population (aged 18 or younger) of Ohio residents based on the ABS frame sample

5.8.2. Estimation Variables

To calculate the TSL standard errors, the analyst needs the stratum identifiers and analysis weights. The required variables for the 2023 OMAS are the following:

- **WT_A:** Analysis weight for adults and Medicaid population based on combined ABS and Medicaid frame samples
- **WT_A_ABS:** Analysis weight for adults based on ABS frame sample³
- **WT_MED:** Analysis weight for Medicaid population by Medicaid enrollment type based on Medicaid frame sample
- **WT_C:** Analysis weight for children
- **STRATUM:** Stratification indicator⁴

5.9. Public-Use and Restricted-Use Files and Other Documentation

The 2023 OMAS is available to the public in two forms: (1) a public-use file (PUF) and (2) a restricted-use file (RUF). The PUF is available for download without any restriction. The RUF is available to the public after they apply to and get permission from GRC. The PUF has gone through disclosure review, and survey items that pose a disclosure risk have been suppressed (i.e., removed from the data file) or coarsened (i.e., levels collapsed to have more respondents per level). The RUF has less suppression and coarsening but, for this reason, requires additional information or an institutional review board determination from the researcher to obtain the RUF.

To further assist data users, **Appendix A** provides a comparison of the numbered questions on the paper survey with their source variable names used with CAWI and CATI.⁵

In addition to the PUF and RUF, additional documentation related to the OMAS is available. The additional documentation includes substantive briefs and other related reports. All data files and documentation can be obtained on the OMAS website at <http://grc.osu.edu/OMAS>.

³ WT_A_ABS should only be used for analyses where the Medicaid administrative respondents need to be excluded. Otherwise, WT_A should be used for all analyses.

⁴ To restrict to the ABS sample, strata should be restricted to strata 1–200. To restrict to the Medicaid frame sample, stratum should be restricted to 201–208. The strata are listed in **Table K-1** in **Appendix K**.

⁵P151 (are either parent employed?) was included in the 2023 survey, however, due to a skip logic error, the question was deemed to be not useable for analysis. Therefore, it has been removed from the PUF and RUF.

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Appendix A: Final CAWI-PAPI-CATI Programming Specifications

August 31, 2023
(Rev. 1, September 12, 2023)

2023 Ohio Medicaid Assessment Survey (OMAS)

CAWI-PAPI-CATI Programming Specifications (Final for Fielding, Revision 1)

Prepared for

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PROGRAMMER NOTES

- We need this text in small print on the bottom of each screen:
If you have concerns or have been harmed by this study, you may contact Ohio State/RTI International, at 1-833-947-2577
- For CATI, responses of “Don’t know” and “Prefer not to answer” should be treated as missing in the logic.
- There should be one question per screen unless otherwise noted.
- Log-in IDs should be 6-digits, should be a random unique combination of letters and numbers, should not contain any vowels, should be in all caps, should not contain any letters/numbers that could be misread (i.e., no A, E, I, O, U, S, L, 0, 5)
- No question should be mandatory unless otherwise noted.
- Mandatory/Required questions should use a red asterisk to indicate they are required.
- Each section and some subsections should have a start and end time stamp, here are the locations for the start and end times for each requested timestamp:

	Start Time Location	End Time Location
1	INTRO	S14a
2	A1	C4
3	D30	CNCR
4	MTL_HEALTH	PRESC_4
5	F67	VAC_HES
6	ND_DNTL	UNMT_PRS_RS
7	Q1_NEW	f_CM_PRB
8	G71	MCD_LK_WRK_OE
9	MRD	H84_A3CATS
10	PREPI90	I95
11	J96	K96_new
12	L125	LAS12B
13	N136	VAC_C_HES
14	O139_1	UNMT_MTL_RS_C
15	ACE_3	TN_MRJ
16	P149	PL125A1
17	INCENT	Thanks

- Each section should include a flag that indicates whether the respondent has started a section (meaning they have been shown the first question that they should receive in that section) and finished that section (meaning that they have clicked ‘next’ on the last question that they should be delivered in that section)
- In both CAWI and CATI: Use bold for emphasis.
- In CAWI: Use italics for help text or instructions.

Spec Legend:

Form Name (if multiple variable names)	
Variable Names	
<i>ASK</i>	Who receives this question
<i>CATI</i>	Question and Response Option Text
<i>CAWI</i>	Question and Response Option Text
<i>QUESTION TYPE</i>	Type of question
<i>FILLS</i>	Definition of any fills used in this screen
<i>NOTES</i>	Additional programming notes that do not apply to other rows
<i>HARD CHECK</i>	Logic and text to be used for any hard checks
<i>SOFT CHECK</i>	Logic and text to be used for any soft checks
<i>CATI NOTES</i>	CATI Version details/information
<i>CAWI NOTES</i>	CAWI Version details/information
<i>PAPER QNUM</i>	Question number associated with this question in the paper version
<i>NEXT</i>	Skip logic on what question should be next

List of preloads:

- HH IS A SAMPLING VARIABLE USED BY RTI
 - HH=01: ABS SAMPLE
 - HH=02: MEDICAID-LIST SAMPLE
- FULLNAME is the respondent's full name (only available for Medicaid sample; if HH=02)
- INCENTIVE
 - If HH=01: 10
 - If HH=02: 20
- INCENTIVE2: 5

ACCESSIBILITY PROGRAMMING/DESIGN NOTES

- Programmer to use Voxco template designed by RTI to help meet all accessibility requirements
- Hard-Prompt for Required/Mandatory questions:
 - "Missing Response: This question is required. You did not select a response. Please select at least one response to continue."
- Soft-Prompt Message: If using soft-prompt, all choice fields (select one or select all), when left blank and the respondent tries to advance, should now use the compliant error message of, *"Missing Response: You did not select a response. Please select at least one response. To skip the question, please press NEXT a second time."*
 - All fields that are not choice fields will need a custom error message specifying the name of the data field in question, the problem, and what action needs to be taken. For example, if the question asks for the respondent to enter a number, and a validation only accepts a response from 0-30 days, the compliant message should read, *"Number of days is missing or invalid. Please enter a number between 0 and 30."*
- All new images and logos will have descriptive and relevant alt-tags.
- Respondents will have the option to turn off, adjust, or extend the time limit before the survey automatically logs out and cannot be reassessed without reentering the unique Survey Access Code.
- Color contrast of error messages to change to red c20000 (a slightly darker red) for increased contrast. If the background color changes from its current light blue, text colors may also need to change to maintain a compliant color contrast.
- All mandatory questions will be noted with a red asterisk in color c20000 (dark red) and may note in the stem question "Response Required" or "Must select at least one response".
- Italics, bold, and/or a different color text should replace underlining for text emphasis.

After programming is completed, RTI will perform a full accessibility test. If necessary, we will update the instrument accordingly so that it meets WCAG 2.0 Level AA conformance.

8/31 Note: All accessibility/compliance testing & updates of the web instrument was completed prior to fielding, and the instrument met WCAG 2.0, Level A and AA conformance. A Voluntary Product Accessibility Template (VPAT) was delivered to GRC following the conclusion of this testing.

LOGIN PAGE

Respondent does not see the Voxco login page and is instead routed to the survey through the external OSU landing page.

INTRODUCTION AND SCREENER

Screening and Proxy Questions

INTRODUCTION	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	[NOT IN CATI – respondents in the OMAS Main ABS sample who called in to complete by phone were read a phone-specific introductory script. In this script, all respondents were asked if they were currently driving. If so, we would not continue the interview and offered respondents the options of calling back or being called back when they were not driving.]
<i>CAWI</i>	<p>This study is sponsored by The Ohio State University and will take approximately 20 minutes. Your participation is voluntary. You do not have to answer any question you do not want to, and your responses to questions will be kept confidential.</p> <p>{INTROFILL}</p> <p>Click 'Next' to continue.</p> <p>01 Next</p>
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	<p>If HH = 01, then INTROFILL: "To ensure the representativeness of the survey, please have the adult age 19 or older in the household with the most recent birthday complete the survey."</p> <p>Else, INTROFILL: ""</p>
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	<p>If HH = 01 (ABS sample): AGE_CONSENT</p> <p>If HH = 02 (Medicaid sample): MED_SCREEN1,</p>

AGE_CONSENT	
ASK	HH = 01 (ABS Sample Only)
CATI	Are you 19 years old or older? 01 YES 02 NO
CAWI	Are you 19 years old or older? 01 YES 02 NO
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	REQUIRED; IF MISSING: "Missing Response: This question is required. You did not select a response. Please select at least one response to continue."
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI (in instructions)
NEXT	If AGE_Consent = 02: INT09, Else: NUM_ADULTS

INT09	
ASK	If AGE_Consent = (02, missing)
CATI	Thank you for your willingness to participate. However, we need to have an adult, 19 years old or older, complete the survey.
CAWI	Thank you for your willingness to participate. However, we need to have an adult, 19 years old or older, complete the survey. Please have an adult in your household who is 19 years old or older complete the survey.
QUESTION TYPE	
FILLS	
NOTES	CAWI: Allow respondent to backup to previous question. If respondent selects 'next' on this screen, end survey and code as ineligible.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	CODE AS INELIGIBLE

MED_SCREEN1	
<i>ASK</i>	If HH = 02 (Medicaid Sample Only)
<i>CATI</i>	To confirm, are you {FULLNAME}? 01 YES 02 NO
<i>CAWI</i>	To confirm, are you {FULLNAME}? 01 YES 02 NO
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	{FULLNAME}=Full name
<i>NOTES</i>	
<i>HARD CHECK</i>	REQUIRED; IF MISSING: "Missing Response: This question is required. You did not select a response. Please select at least one response to continue."
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	CATI: If MED_SCREEN1 = 01: CELL_RESP, Else: MED_SCREEN1B CAWI: If MED_SCREEN1 = 01: MED_SCREEN2, Else: MED_SCREEN1B

MED_SCREEN1B	
ASK	If MED_SCREEN1 = 02
CATI	<p>May I speak with {FULLNAME}?</p> <p>01 YES</p> <p>02 NOT AVAILABLE, SCHEDULE CALLBACK</p> <p>03 PERSON ON THE PHONE WILL FILL OUT SURVEY FOR {FULLNAME}</p> <p>04 {FULLNAME} IS NOT LIVING AT RESIDENCE</p>
CAWI	<p>Are you completing this survey for {FULLNAME}?</p> <p>03 Yes, I am completing this survey for {FULLNAME}</p> <p>04 No</p>
QUESTION TYPE	Radio button
FILLS	{FULLNAME}=Full name
NOTES	
HARD CHECK	REQUIRED; IF MISSING: "Missing Response: This question is required. You did not select a response. Please select at least one response to continue."
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	<p>CATI:</p> <p>If MED_SCREEN1B = 01: MED_SCREEN1C, Else if MED_SCREEN1B = 02: SCHEDULE CALLBACK Else if MED_SCREEN1B = 03: CELL_RESP Else: MED_INELIG</p> <p>CAWI:</p> <p>If MED_SCREEN1B = 03: MED_SCREEN2 Else: MED_INELIG</p>

MED_SCREEN1C	
<i>ASK</i>	If MED_SCREEN1B = 01
<i>CATI</i>	<p>Hello, my name is (NAME) and I am calling on behalf of The Ohio State University and the State of Ohio regarding an important study about health care issues affecting state residents. This call may be monitored or recorded for quality assurance.</p> <p>(IF NECESSARY: We are conducting a survey on health insurance coverage, use of medical services, and problems getting health care. The survey's sponsor is the State of Ohio. We are not selling anything.)</p> <p>01 CONTINUE 02 NOT AVAILABLE AT THIS TIME 03 REFUSED</p>
<i>CAWI</i>	[Not in CAWI]
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	{FULLNAME}=Full name
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	If MED_SCREEN2

MED_SCREEN2	
ASK	If HH = 02
CATI	<p>{fillPRXYSCR1} currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>{fillPRXYSCR1} currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 YES 02 NO</p>
QUESTION TYPE	Radio button
FILLS	If MED_SCREEN1B = 03: fillPRXYSCR1 = "Is {FULLNAME}" Else: fillPRXYSCR1 = "Are you"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If MED_SCREEN2 = 01: MDLST_LNG, Else: MED_INELIG

MDLST_LNG	
ASK	If MED_SCREEN2 = 01
CATI	<p>How long {fillPRXYSCR2} been covered by Medicaid? Would you say...</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p> <p>98 DON'T NOW 99 REFUSED</p>
CAWI	<p>How long {fillPRXYSCR2} been covered by Medicaid?</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p>
QUESTION TYPE	Radio button
FILLS	If MED_SCREEN1B = 03: fillPRXYSCR2 = "has {FULLNAME}" Else: fillPRXYSCR2 = "have you"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	NUM_ADULTS

MED_INELIG	
<i>ASK</i>	If MED_SCREEN2 = 02 or MED_SCREEN1B = 04
<i>CATI</i>	Thank you for your willingness to participate. However, we are only interested in {fill_MEDINEL}. Thank you.
<i>CAWI</i>	Thank you for your willingness to participate. However, we are only interested in {fill_MEDINEL} at this time. If you believe you have received this message in error, please contact RTI International at 1-833-947-2577. Thank you.
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	IF MED_SCREEN1B = 04: fill_MEDINEL= "hearing from {FULLNAME}" ELSE: fill_MEDINEL = "those currently covered by Ohio Medicaid"
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	CODE AS INELIGIBLE

NUM_ADULTS	
ASK	ASK ALL
CATI	<p>How many members of your household, including yourself, are 19 years of age or older?</p> <p>(INTERVIEWER: IF THERE ARE MORE THAN 20 ADULTS IN THE HOUSEHOLD, PLEASE ENTER 20.)</p> <p>(INTERVIEWER, IF RESPONDENT REFUSES, SAY: "For the purposes of this survey, we will need to know the total number of adults, ages 19 years and older, who are members of your household. Please know that your responses will be kept strictly confidential. How many members of your household, including yourself, are 19 years of age or older?")</p> <p>(INTERVIEWER: IF RESPONDENT SAYS 0 ADULTS, ENTER 1 AND SAY: Just to confirm, you said that there are no adults, 19 years of age or older in your household, other than you?)</p> <p>_____ ENTER NUMBER OF ADULTS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many members of your household, including yourself, are 19 years of age or older?</p> <p>_____ Adults</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 1-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY: "Number of household adults is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short text: "Enter Number of Adults in Household"
PAPER QNUM	Q137
NEXT	<p>CATI: If HH = 01: RES_NAME, Else if HH = 02 and MED_SCREEN1B = 03: S2c, Else: S5</p> <p>CAWI: If NUM_ADULTS = missing: NUM_ADULTS1, Else if HH=01: RES_NAME Else if HH = 02 and MED_SCREEN1B = 03: S2c Else: S8</p>

NUM_ADULTS1	
<i>ASK</i>	CAWI: If NUM_ADULTS = missing
<i>CATI</i>	[NOT IN CATI]
<i>CAWI</i>	<p>For the purposes of this survey, we will need to know the total number of adults, ages 19 years and older, who are members of your household. Please know that your responses will be kept strictly confidential. How many members of your household, including yourself, are 19 years of age or older?</p> <p>_____ Adults</p>
<i>QUESTION TYPE</i>	Numeric
<i>FILLS</i>	
<i>NOTES</i>	RECODE NUM_ADULTS TO THIS NEW NUMBER Range: 1-20
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of household adults is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
<i>CATI NOTES</i>	Not in CATI; this variable recodes NUM_ADULTS and uses same range
<i>CAWI NOTES</i>	Short text: "Enter Number of Adults in Household"
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	If HH=01: RES_NAME Else if HH = 02 and MED_SCREEN1B = 03: S2c Else: S8

RES_NAME	
ASK	IF HH = 01
CATI	<p>What is your first name or initials?</p> <p>(IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also work.)</p> <p>(INTERVIEWER: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS.)</p> <p>_____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is your first name or initials?</p> <p>_____ Name or Initials</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	Text range=25 characters
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING, DISPLAY: "Missing response: You did not enter your name or initials. Please enter your first name or initials. To skip the question, please select NEXT a second time."
CATI NOTES	Not in CATI
CAWI NOTES	Short Text: Enter your name or initials
PAPER QNUM	Not on PAPI
NEXT	<p>CATI: If NUM_ADULTS != (0, 1, 98,99): PROXY1 Else: S5</p> <p>CAWI: If NUM_ADULTS != (0, 1, missing): PROXY1 Else: S8</p>

PROXY1	
ASK	If HH = 01 and NUM_ADULTS != (0, 1, 98, 99)
CATI	<p>To ensure the representativeness of the survey, the person in your household I need to interview is the adult aged 19 or older currently living in your household who had the most recent birthday.</p> <p>Are you completing this survey for yourself or for someone else in your household?</p> <p>01 RESPONDENT WILL ANSWER ABOUT THEMSELF 02 RESPONDENT WILL ANSWER ABOUT SOMEONE ELSE</p> <p>98 DK 99 REFUSED</p>
CAWI	<p>To ensure the representativeness of the survey, please have the adult age 19 or older in the household with the most recent birthday complete the survey.</p> <p>Are you completing this survey for yourself or for someone else in your household?</p> <p>01 For myself 02 For someone else on their behalf</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q1
NEXT	<p>CATI: If PROXY1 = 02: SCR_NAME, Else: S5</p> <p>CAWI: If PROXY1 = 02: SCR_N_NAME, Else: S8</p>

SCR_NAME	
ASK	If PROXY1 = 02
CATI	<p>What is the first name or initials of the person you are completing this survey for?</p> <p>(IF NECESSARY: Names will not be reported with any of the data or results. You do not need to provide a name if you feel uncomfortable, a nickname or initials would also work.)</p> <p>(INTERVIEWER: BE SURE TO RECORD THE PERSON'S NAME, NICKNAME, OR INITIALS NOT JUST RELATIONSHIP. IF THEY REFUSE TO PROVIDE SOMETHING ENTER "99".)</p> <p>RECORD NAME OR INITIALS: _____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is the first name or initials of the person you are completing this survey for?</p> <p>_____ Name or Initials</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	Text range=25 characters
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING, DISPLAY: "Missing response: You did not enter the first name or initials of the person you are completing this survey for. Please enter the first name or initials of the individual you are completing this survey for. To skip the question, please press NEXT a second time."
CATI NOTES	
CAWI NOTES	Short text: Enter first name or initials of person you are completing the survey for
PAPER QNUM	Not on PAPI
NEXT	S2c

S2c	
ASK	If PROXY1 = 02 or MED_SCREEN1B = 03
CATI	<p>What is your relationship to {NAME_FILL1}?</p> <p>(INTERVIEWER: SELECT THE RESPONSE THAT COMPLETES THIS SENTENCE: THE RESPONDENT IS {NAME_FILL2}'S _____.</p> <p>01 WIFE / FEMALE PARTNER 02 HUSBAND / MALE PARTNER 03 MOTHER 04 FATHER 05 DAUGHTER 06 SON 07 GRANDMOTHER 08 GRANDFATHER 09 AUNT 10 UNCLE 11 SISTER 12 BROTHER 13 OTHER FEMALE RELATIVE 14 OTHER MALE RELATIVE 15 FEMALE LEGAL GUARDIAN 16 MALE LEGAL GUARDIAN 17 FOSTER MOTHER 18 FOSTER FATHER 19 OTHER FEMALE NON-RELATIVE 20 OTHER MALE NON-RELATIVE</p>
CAWI	<p>What is your relationship to {NAME_FILL1}?</p> <p>01 I am {NAME_FILL1}'s wife / female partner 02 I am {NAME_FILL1}'s husband / male partner 03 I am {NAME_FILL1}'s mother 04 I am {NAME_FILL1}'s father 05 I am {NAME_FILL1}'s daughter 06 I am {NAME_FILL1}'s son 07 I am {NAME_FILL1}'s grandmother 08 I am {NAME_FILL1}'s grandfather 09 I am {NAME_FILL1}'s aunt 10 I am {NAME_FILL1}'s uncle 11 I am {NAME_FILL1}'s sister 12 I am {NAME_FILL1}'s brother 13 I am {NAME_FILL1}'s other female relative 14 I am {NAME_FILL1}'s other male relative 15 I am {NAME_FILL1}'s female legal guardian 16 I am {NAME_FILL1}'s male legal guardian 17 I am {NAME_FILL1}'s foster mother 18 I am {NAME_FILL1}'s foster father 19 I am {NAME_FILL1}'s other female non-relative 20 I am {NAME_FILL1}'s other male non-relative</p>
QUESTION TYPE	Radio button

<i>FILLS</i>	If HH = 02: NAME_FILL1 = FULLNAME Else if SCR_NAME = missing or "99", NAME_FILL1: "this person", Else: NAME_FILL1 = response to SCR_NAME NAME_FILL2 = toupper(NAME_FILL1)
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q142
<i>NEXT</i>	PROXYREMIND

PROXYREMIND	
<i>ASK</i>	If PROXY1 = 02 or MED_SCREEN1B = 03
<i>CATI</i>	As we continue the survey, please remember to answer all remaining questions on behalf of {NAME_FILL1}. 01 CONTINUE
<i>CAWI</i>	As we continue the survey, please remember to answer all remaining questions on behalf of {NAME_FILL1}. 01 I understand—Continue the survey
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	If HH = 02: NAME_FILL1 = FULLNAME Else if SCR_NAME = missing, NAME_FILL1: "this person", Else: NAME_FILL1 = response to SCR_NAME
<i>NOTES</i>	If PROXY1 = 02: Display proxy banner throughout the rest of the survey for all questions: <i>As we continue the survey, please remember to answer all remaining questions on behalf of {NAME_FILL1}.</i>
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	CATI: S5 CAWI: S8

S5	
ASK	ASK ALL
CATI	<p>Before we begin, The Ohio State University would like me to tell you that the interview will last about 20 minutes, your participation is voluntary, you do not have to answer any question you do not want to, and everything you say will be kept confidential. The responses provided to this survey are used to help local and state agencies improve health services across Ohio. You will receive \${INCENTIVE} for participating. This call may be recorded for quality control. If you have questions, concerns, or complaints about the study, please call Ohio State/RTI International at 1-833-947-2577.</p> <p>01 AVAILABLE 02 NOT ABLE TO PARTICIPATE AT THIS TIME</p>
CAWI	[Not in CAWI]
QUESTION TYPE	Radio button
FILLS	If HH = 01: INCENTIVE = 10 Else: INCENTIVE = 20
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	S8

S8	
ASK	ASK ALL
CATI	<p>How long have you lived in Ohio? Would you say...</p> <p>01 Less than one month or 02 One month or more 03 RESPONDENT DOES NOT CURRENTLY LIVE IN OHIO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How long have you lived in Ohio?</p> <p>01 Less than one month 02 One month or more 03 I do not currently live in Ohio</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI (in Instructions)
NEXT	If S8 = (01, 03, missing): INT18, Else: S9

INT18	
<i>ASK</i>	If S8 = (01, 03, missing)
<i>CATI</i>	Thank you for your willingness to participate. However, we can only interview individuals who have lived in Ohio for one month or more.
<i>CAWI</i>	Thank you for your willingness to participate. However, we can only interview individuals who have lived in Ohio for one month or more.
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	
<i>NOTES</i>	CAWI: Allow respondent to backup to previous question. If respondent selects 'next' on this screen, end survey and code as ineligible.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	CATI: INT18 CAWI: END SURVEY

Introduction Questions

S9						
ASK		ASK ALL				
	In what county in Ohio do you currently live?					
	001	ADAMS	061	HAMILTON	121	NOBLE
	003	ALLEN	063	HANCOCK	123	OTTAWA
	005	ASHLAND	065	HARDIN	125	PAULDING
	007	ASHTABULA	067	HARRISON	127	PERRY
	009	ATHENS	069	HENRY	129	PICKAWAY
	011	AUGLAIZE	071	HIGHLAND	131	PIKE
	013	BELMONT	073	HOCKING	133	PORTAGE
	015	BROWN	075	HOLMES	135	PREBLE
	017	BUTLER	077	HURON	137	PUTNAM
	019	CARROLL	079	JACKSON	139	RICHLAND
	021	CHAMPAIGN	081	JEFFERSON	141	ROSS
	023	CLARK	083	KNOX	143	SANDUSKY
	025	CLERMONT	085	LAKE	145	SCIOTO
	027	CLINTON	087	LAWRENCE	147	SENECA
	029	COLUMBIANA	089	LICKING	149	SHELBY
	031	COSHOCTON	091	LOGAN	151	STARK
CATI	033	CRAWFORD	093	LORAIN	153	SUMMIT
	035	CUYAHOGA	095	LUCAS	155	TRUMBULL
	037	DARKE	097	MADISON	157	TUSCARAWAS
	039	DEFIANCE	099	MAHONING	159	UNION
	041	DELAWARE	101	MARION	161	VAN WERT
	043	ERIE	103	MEDINA	163	VINTON
	045	FAIRFIELD	105	MEIGS	165	WARREN
	047	FAYETTE	107	MERCER	167	WASHINGTON
	049	FRANKLIN	109	MIAMI	169	WAYNE
	051	FULTON	111	MONROE	171	WILLIAMS
	053	GALLIA	113	MONTGOMERY	173	WOOD
	055	GEAUGA	115	MORGAN	175	WYANDOT
	057	GREENE	117	MORROW		
	059	GUERNSEY	119	MUSKINGUM		
	998	DON'T KNOW				
	999	PREFER NOT TO SAY				

CAWI	In what county in Ohio do you currently live?					
	001	ADAMS	061	HAMILTON	121	NOBLE
	003	ALLEN	063	HANCOCK	123	OTTAWA
	005	ASHLAND	065	HARDIN	125	PAULDING
	007	ASHTABULA	067	HARRISON	127	PERRY
	009	ATHENS	069	HENRY	129	PICKAWAY
	011	AUGLAIZE	071	HIGHLAND	131	PIKE
	013	BELMONT	073	HOCKING	133	PORTAGE
	015	BROWN	075	HOLMES	135	PREBLE
	017	BUTLER	077	HURON	137	PUTNAM
	019	CARROLL	079	JACKSON	139	RICHLAND
	021	CHAMPAIGN	081	JEFFERSON	141	ROSS
	023	CLARK	083	KNOX	143	SANDUSKY
	025	CLERMONT	085	LAKE	145	SCIOTO
	027	CLINTON	087	LAWRENCE	147	SENECA
	029	COLUMBIANA	089	LICKING	149	SHELBY
	031	COSHOCTON	091	LOGAN	151	STARK
	033	CRAWFORD	093	LORAIN	153	SUMMIT
	035	CUYAHOGA	095	LUCAS	155	TRUMBULL
	037	DARKE	097	MADISON	157	TUSCARAWAS
	039	DEFIANCE	099	MAHONING	159	UNION
	041	DELAWARE	101	MARION	161	VAN WERT
	043	ERIE	103	MEDINA	163	VINTON
	045	FAIRFIELD	105	MEIGS	165	WARREN
	047	FAYETTE	107	MERCER	167	WASHINGTON
	049	FRANKLIN	109	MIAMI	169	WAYNE
	051	FULTON	111	MONROE	171	WILLIAMS
	053	GALLIA	113	MONTGOMERY	173	WOOD
	055	GEAUGA	115	MORGAN	175	WYANDOT
	057	GREENE	117	MORROW		
059	GUERNSEY	119	MUSKINGUM			
QUESTION TYPE		Dropdown				
FILLS						
NOTES		Analysis Note: Reminder that DK/REF are 998/999 here as 98/99 are legit answers.				
HARD CHECK						
SOFT CHECK						
CATI NOTES						
CAWI NOTES		Short text: "Select the county in Ohio in which you currently live"				
PAPER QNUM		Not on PAPI				
NEXT		IF NUM_ADULTS = (2-20): S11, Else: S12				

S11	
ASK	If NUM_ADULTS = (2-20)
CATI	<p>Including yourself, how many adult members of your family, age 19 and over, live in this household? Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>INTERVIEWER: IF THERE ARE MORE THAN 20 ADULTS IN THE RESPONDENT'S FAMILY WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.</p> <p>_____ADULTS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Including yourself, how many adult members of your family, age 19 and over, live in this household? Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>_____Adults</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	If NUM_ADULTS = 1 then autocode S11 = 1 Range: 1-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY: "Number of adults in your family household is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your family who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short text: Enter the number of adults in your family that live in your household
PAPER QNUM	Q138
NEXT	If (S11 > NUM_ADULTS and NUM_ADULTS = (2-20) and S11>=1 and S11<=20): S11b_1, Else: S12

S11b_1	
ASK	If (S11 > NUM_ADULTS and NUM_ADULTS = (2-20) and S11>=1 and S11<=20)
CATI	<p>The number of adult family members living in your household is greater than the total number of adults living in your household. You said there were: at least {NUM_ADULTS_FILL} adults living in your household, but at least {S11_FILL} adult family members living in your household.</p> <p>Which of these would you like to update?</p> <p>01 The total number of adults in your household, 02 The number of adult family members living in your household, 03 Both, or 04 Do you not want to make any updates?</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>The number of adult family members living in your household is greater than the total number of adults living in your household. You said there were: at least {NUM_ADULTS_FILL} adults living in your household, but at least {S11_FILL} adult family members living in your household.</p> <p>Which of these would you like to update?</p> <p>01 Update the total number of adults in my household 02 Update the number of adult family members living in my household 03 I want to update both 04 I do not want to make any updates</p>
QUESTION TYPE	Radio button
FILLS	NUM_ADULTS_FILL = response to NUM_ADULTS S11_FILL = response to S11
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If S11b_1 = (01, 03): NUM_ADULTS_R, Else if S11b_1 = 02: S11_RE, Else: S12

NUM_ADULTS_R	
ASK	If S11b_1 = (01, 03)
CATI	<p>How many members of your household, including yourself, are 19 years of age or older?</p> <p>(INTERVIEWER: IF THERE ARE MORE THAN 20 ADULTS IN THE HOUSEHOLD, PLEASE ENTER 20.)</p> <p>(INTERVIEWER, IF RESPONDENT REFUSES, SAY: "For the purposes of this survey, we will need to know the total number of adults, ages 19 years and older, who are members of your household. Please know that your responses will be kept strictly confidential. How many members of your household, including yourself, are 19 years of age or older?")</p> <p>(INTERVIEWER: IF RESPONDENT SAYS 0 ADULTS, ENTER 1 AND SAY: Just to confirm, you said that there are no adults, 19 years of age or older in your household, other than you?)</p> <p>_____ ADULTS</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>How many members of your household, including yourself, are 19 years of age or older?</p> <p>_____ Adults</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 1-20 Recode NUM_ADULTS to this new number
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY: "Number of adults in your family household is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short text: Enter the number of adults in your household
PAPER QNUM	Not on PAPI
NEXT	If S11b_1 = 03: S11_RE, Else: S12

S11_RE	
ASK	CAWI: If S11b_1 = (02, 03)
CATI	<p>Including yourself, how many adult members of your family, age 19 and over, live in this household? <i>Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</i></p> <p>INTERVIEWER: IF THERE ARE MORE THAN 20 ADULTS IN THE RESPONDENT'S FAMILY WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.</p> <p>_____ADULTS</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>Including yourself, how many adult members of your family, age 19 and over, live in this household? <i>Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</i></p> <p>_____Adults</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	<p>Range: 1-20 Answer layout – Boxes for 2-digit number Recode S11 to this new number</p>
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY THE SOFT CHECK MESSAGE OF: "Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your family who live in this household, please enter 20."
CATI NOTES	
CAWI NOTES	Short text: Enter the number of adults in your family that live in your household
PAPER QNUM	Not on PAPI
NEXT	CAWI: S12

S12	
ASK	ASK ALL
CATI	<p>How many children 18 years of age or younger live in your household, whether they are family members or not?</p> <p>INTERVIEWER: IF THERE ARE MORE THAN 20 CHILDREN WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.</p> <p>_____ CHILDREN</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many children 18 years of age or younger live in your household, whether they are family members or not?</p> <p>_____ Children</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY: "Number of children age 18 years or younger in your household is missing or invalid. Please enter a number between 0 and 20. Include yourself when counting. If there are more than 20 children who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short text: Enter number of children living in your household
PAPER QNUM	Q139
NEXT	If S12 > 0: S13b, Else: S14

S13b	
ASK	ASK IF S12 > 0
CATI	<p>How many of the {S12FILL} children living in your household are members of your family?</p> <p>Please only count individuals 18 years of age or younger. As a reminder, family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>(INTERVIEWER: IF THERE ARE MORE THAN 20 CHILDREN IN YOUR FAMILY WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.)</p> <p>_____ CHILDREN</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many of the {S12FILL} children living in your household are members of your family?</p> <p>Please only count individuals 18 years of age or younger. Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>_____ Children</p>
QUESTION TYPE	Numeric
FILLS	If S12 = (1,98,99,Missing), S12FILL = "", Else: S12FILL = "{S12}"
NOTES	IF S12=0, AUTOCODE S13b=0 Range: 0-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY: "Number of children age 18 years or younger in your family household is missing or invalid. Please enter a number between 0 and 20. Include yourself when counting. If there are more than 20 children in your family who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: "Enter number of children in your family that live in your household"
PAPER QNUM	Q140
NEXT	If (S13B > S12 and S13B>=1 and S13B<=20 and S12>1 and S12<=20): NOCHILD_CK_1, Else, if S13b = (1-20): S13a, Else: S14

NOCHILD_CK_1	
ASK	If (S13B > S12 and S13B>=1 and S13B<=20 and S12>1 and S12<=20)
CATI	<p>The number of child family members living in your household is greater than the total number of children living in your household. You said there were: at least {S12_FILL} total children in the household, but at least {S13b_FILL} children in the household who are family members.</p> <p>Which of these would you like to update?</p> <p>01 The total number of children in your household, 02 The number of children in the household who are family members, 03 Both, or 04 Do you not want to make any updates?</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>The number of child family members living in your household is greater than the total number of children living in your household. You said there were: at least {S12_FILL} total children in the household, but at least {S13b_FILL} children in the household who are family members. Which of these would you like to update?</p> <p>01 Update the total number of children in my household 02 Update the number of children in the household who are family members 03 I want to update both 04 I do not want to make any updates</p>
QUESTION TYPE	Radio button
FILLS	S12_FILL = response to S12 S13b_FILL = response to S13b
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	New variable for 2021
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If NOCHILD_CK_1 = (01, 03): S12_RE, Else, if NOCHILD_CK_1 = 02: S13B_RE, Else, if S13b = (1-20): S13a, Else: S14

S12_RE	
ASK	If NOCHILD_CK_1 = (01, 03)
CATI	<p>How many children 18 years of age or younger live in your household, whether they are family members or not?</p> <p>(INTERVIEWER: IF THERE ARE MORE THAN 20 CHILDREN WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.)</p> <p>_____ CHILDREN</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many children 18 years of age or younger live in your household, whether they are family members or not?</p> <p>_____ Children</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-20 Recode S12 to this new number
HARD CHECK	
SOFT CHECK	IF OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of children age 18 years or younger in your household is missing or invalid. Please enter a number between 0 and 20. If there are more than 20 children who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short text: Enter number of children in your household
PAPER QNUM	Not on PAPI
NEXT	If NOCHILD_CK_1 = (02, 03): S13B_RE, Else, if S13b = (1-20): S13a, Else: S14

S13b_RE	
ASK	If NOCHLID_CK_1 = (02, 03)
CATI	<p>How many of the {S12FILL} children living in your household are members of your family?</p> <p>Please only count individuals 18 years of age or younger. As a reminder, family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>(INTERVIEWER: IF THERE ARE MORE THAN 20 CHILDREN IN YOUR FAMILY WHO LIVE IN THIS HOUSEHOLD, PLEASE ENTER 20.)</p> <p>_____ CHILDREN</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many of the {S12FILL} children living in your household are members of your family?</p> <p>Please only count individuals 18 years of age or younger. Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.</p> <p>_____ Children</p>
QUESTION TYPE	Numeric
FILLS	If S12 = 1, S12FILL = "", Else: S12FILL = Response to S12
NOTES	Range: 0-20 Recode S13b to this new number
HARD CHECK	
SOFT CHECK	IF OUTSIDE OF RANGE OR MISSING, DISPLAY THE SOFT CHECK MESSAGE OF: "Number of children age 18 years or younger in your family household is missing or invalid. Please enter a number between 0 and 20. If there are more than 20 children in your family who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: "Enter number of children in your family that live in your household"
PAPER QNUM	Not on PAPI
NEXT	If S13b = (1-20): S13a, Else: S14

S13a	
ASK	If S13B = (1-20)
CATI	<p>Are you a parent of {FILL_CHILD} living in your household? A parent includes stepparents, foster parents, and legal guardians.</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you a parent of {S13aFILL} living in your household? A parent includes stepparents, foster parents, and legal guardians.</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	If S12=1, FILL_CHILD = "the child" Else: FILL_CHILD = "any of the {S12} children"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q141
NEXT	S14

S14	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	<p>How old were you on your last birthday?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 19 AND 125.)</p> <p>_____ YEARS</p> <p>998 DON'T KNOW 999 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>How old were you on your last birthday?</p> <p>_____ Years (19-125)</p>
<i>QUESTION TYPE</i>	Numeric
<i>FILLS</i>	
<i>NOTES</i>	Range: 19-125
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	IF OUTSIDE OF RANGE AND CAWI, DISPLAY: "Age is missing or invalid response: Please enter a number between 19 and 125. To skip this question, please delete all characters in the text box and select NEXT."
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Short Text: Enter how old you were on your last birthday.
<i>PAPER QNUM</i>	Q123
<i>NEXT</i>	If S14 = missing: S14a, Else: f_S15

S14a	
ASK	If S14 = missing
CATI	<p>On your last birthday would you say that you were...</p> <p>01 19 to 24 years old, 02 25 to 34 years old, 03 35 to 44 years old, 04 45 to 54 years old, 05 55 to 64 years old, 06 65 to 74 years old, or 07 75 years old or older?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>On your last birthday would you say that you were...</p> <p>01 19-24 years old 02 25-34 years old 03 35-44 years old 04 45-54 years old 05 55-64 years old 06 65-74 years old 07 75 years old or older</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	f_S15

f_S15 S15 / S15_1	
ASK	ASK ALL
CATI	<p>What is your gender? Would you say... [S15]</p> <p>01 Male, 02 Female, or 97 Do you use a different term?</p> <p>(INTERVIEWER: IF NEEDED: What other term do you use?) _____ [S15_1]</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is your gender? [S15]</p> <p>01 Male 02 Female 97 I use a different term (Please specify)</p> <p>_____ [S15_1]</p>
QUESTION TYPE	S15: Radio button S15_1: Text entry
FILLS	
NOTES	<p>S15_1: 100 character max If S15=97 (Something else is selected), display S15_1 open-ended box.</p> <p>If S15 = 97 and S15_1 is MISSING, soft prompt must NOT be engaged when someone selects Something else but does not put any text in the field. (We determined this was NOT possible to do with OMTE)</p>
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	<p>Q38 Note that the response options on PAPI are different to help with skip patterns: Female Male I use a different term</p>
NEXT	<p>If HH = 01: A1, Else: A1_MEDICAID</p>

SECTION A: CURRENT INSURANCE STATUS

A1	
ASK	If HH = 01
CATI	<p>CURRENT INSURANCE</p> <p>The next questions ask about what kind of health insurance coverage you may have.</p> <p>Health insurance may be obtained in many ways. It can be obtained through your or your spouse or partner's current or past employment. It can be purchased directly, such as through healthcare.gov. It can also be obtained through government and military programs such as Medicare, Medicaid, Healthy Families, TRICARE, or Champ-VA.</p> <p>Are you personally covered by any health insurance?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions ask about what kind of health insurance coverage you may have.</p> <p>Health insurance may be obtained in many ways. It can be obtained through your (or your spouse or partner's) current or past employment. It can be purchased directly, such as through healthcare.gov. It can also be obtained through government and military programs such as Medicare, Medicaid, Healthy Families, TRICARE, or Champ-VA.</p> <p>Are you personally covered by any health insurance?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q2
NEXT	If A1 = missing: D30, Else, if A1 = 01: B4A, Else: C1_NEW

A1_MEDICAID	
<i>ASK</i>	If HH = 02
<i>CATI</i>	<p>CURRENT INSURANCE</p> <p>The next questions ask about what kind of health insurance coverage you may have.</p> <p>Health insurance may be obtained in many ways. It can be obtained through your or your spouse or partner's current or past employment. It can be purchased directly, such as through healthcare.gov. It can also be obtained through government and military programs such as Medicare, Medicaid, Healthy Families, TRICARE, or Champ-VA.</p> <p>01 NEXT</p>
<i>CAWI</i>	<p>The next questions ask about what kind of health insurance coverage you may have.</p> <p>Health insurance may be obtained in many ways. It can be obtained through your (or your spouse or partner's) current or past employment. It can be purchased directly, such as through healthcare.gov. It can also be obtained through government and military programs such as Medicare, Medicaid, Healthy Families, TRICARE, or Champ-VA.</p> <p>01 Next</p>
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	B4A

SECTION B: INSURED

Insurance Type

B4A	
<i>ASK</i>	If A1 = 01 or HH = 02
<i>CATI</i>	<p>Are you currently covered by health insurance through a current or former employer or labor union?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Are you currently covered by health insurance through a current or former employer or labor union?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q7
<i>NEXT</i>	If B4A = 01: ESI_LNG, Else: B4B

ESI_LNG	
ASK	If B4A = 01
CATI	<p>How long have you been covered by your current health insurance through a current or former employer or labor union? Would you say...</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years, or 04 More than 2 years</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How long have you been covered by your current health insurance through a current or former employer or labor union?</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change because of slight rewording.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q8
NEXT	B4AA

B4AA	
<i>ASK</i>	If B4A = 01
<i>CATI</i>	<p>Is your insurance through your work or are you receiving insurance as a dependent through someone else's work? This includes current or past work.</p> <p>(IF NEEDED READ RESPONSE OPTIONS)</p> <p>01 THROUGH YOUR OWN WORK 02 THROUGH SOMEONE ELSE'S WORK 03 BOTH THROUGH YOUR OWN WORK AND SOMEONE ELSE'S WORK</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Is your insurance through your work or are you receiving insurance as a dependent through someone else's work? This includes current or past work.</p> <p>01 Through your own work 02 Through someone else's work 03 Both through your own work and someone else's work</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q9
<i>NEXT</i>	B4B

B4B	
<i>ASK</i>	If A1 = 01 or HH = 02
<i>CATI</i>	<p>Are you currently covered by Medicare, the Federal government-funded health insurance for people 65 years and older or with certain disabilities?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Are you currently covered by Medicare, the Federal government-funded health insurance for people 65 years and older or with certain disabilities?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q10
<i>NEXT</i>	If A1 = 01: MDCD, Else, if HH = 02: EXCHNG Else: D30

MDCD	
<i>ASK</i>	If A1 = 01
<i>CATI</i>	<p>Are you currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Are you currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument. Variable name change because of update in description of Medicaid.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q11
<i>NEXT</i>	If MDCD = 01: MDCD_LNG, Else: EXCHNG

MDCD_LNG	
<i>ASK</i>	If MDCD = 01
<i>CATI</i>	<p>How long have you been covered by Medicaid? Would you say...</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years, or 04 More than 2 years</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>How long have you been covered by Medicaid?</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	This used to be skipped into from a question asking about which Medicaid program you are covered by; variable name change because of new skip pattern.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q17 Note that this question is included in a different order on the PAPI to help with the skip patterns.
<i>NEXT</i>	EXCHNG

EXCHNG	
ASK	If A1 = 01 or HH = 02
CATI	<p>Are you currently covered by health insurance from healthcare.gov, which is sometimes called the health insurance “exchange” or marketplace?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you currently covered by health insurance from healthcare.gov (sometimes called the health insurance “exchange” or marketplace)?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change because of update in description of the exchange.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q12
NEXT	B4E

B4E	
<i>ASK</i>	If A1=01 or HH = 02
<i>CATI</i>	<p>Are you currently covered by health insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Are you currently covered by health insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q13
<i>NEXT</i>	B4G

B4G	
<i>ASK</i>	If A1=01 or HH = 02
<i>CATI</i>	<p>Are you currently covered by any other type of health insurance not mentioned previously?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Are you currently covered by any other type of health insurance not mentioned previously?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q14
<i>NEXT</i>	B4_Dental

B4_Dental	
<i>ASK</i>	If A1=01 or HH = 02
<i>CATI</i>	<p>Do you currently have any type of insurance that covers dental bills?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Do you currently have any type of insurance that covers dental bills?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q15
<i>NEXT</i>	B5_Vision

B5_Vision	
<i>ASK</i>	If A1 = 01 or HH = 02
<i>CATI</i>	<p>Do you currently have any type of insurance that covers eyeglasses, lenses, or vision care bills?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Do you currently have any type of insurance that covers eyeglasses, lenses, or vision care bills?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q16
<i>NEXT</i>	If MDCD_LNG = (01, 02) or MDLST_LNG = (01, 02): MD_PRV, Else: D30

Previous Coverage (Medicaid)

MD_PRV	
ASK	If MDCD_LNG = (01, 02) or MDLST_LNG = (01, 02)
CATI	<p>COVERAGE BEFORE MEDICAID</p> <p>During the past 12 months, but before you were covered by Medicaid, were you covered by other insurance?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, but before you were covered by Medicaid, were you covered by other insurance?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. New variable name because skip pattern has changed, denominator is smaller (2023 only ask to current Medicaid).
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q18
NEXT	If MD_PRV = 01: MD_PRV_ESI, Else, if A1 = 02: C1_NEW, Else: D30

MD_PRV_ESI	
ASK	If MD_PRV = 01
CATI	<p>Was that prior insurance obtained through an employer or labor union?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was that prior insurance obtained through an employer or labor union?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New variable name because upstream skip pattern changed for MD_PRV (2023 limit to Medicaid).
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q19
NEXT	If MD_PRV_ESI = 02: MD_PRV_EXC, Else, if A1 = 02: C1_NEW, Else: D30

MD_PRV_EXC	
ASK	If MD_PRV_ESI = 02
CATI	<p>Was that prior insurance from healthcare.gov, which is sometimes called the health insurance “exchange” or marketplace?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was that prior insurance from healthcare.gov (sometimes called the health insurance “exchange” or marketplace)?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q20
NEXT	If MD_PRV_EXC = 02: MD_PRV_PD, Else, if A1 = 02: C1_NEW, Else: D30

MD_PRV_PD	
ASK	If MD_PRV_EXC = 02
CATI	<p>Was that prior insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was that prior insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. New variable name because upstream skip pattern changed for MD_PRV (2023 limit to Medicaid), slight rewording to stay consistent with "directly purchased" insurance defined in B4E.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q21
NEXT	If MD_PRV_PD = 02: MD_PRV_OTH, Else, if A1 = 02: C1_NEW, Else: D30

MD_PRV_OTH	
ASK	If MD_PRV_PD = 02
CATI	<p>Was that prior insurance any other type of health insurance not mentioned previously?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was that prior insurance any other type of health insurance not mentioned previously?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New variable name because upstream skip pattern changed for MD_PRV (2023 limit to Medicaid).
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q22
NEXT	If A1 = 02: C1_NEW, Else: D30

SECTION C: UNINSURED

NOTE: MEDICAID LIST SAMPLE (HH=02) IS EXCLUDED FROM THIS SECTION

C1_NEW	
ASK	If A1 = 02
CATI	<p>CURRENTLY UNINSURED</p> <p>When were you last covered by any type of health insurance? Would you say...</p> <p>01 Less than 3 months ago 02 3 months to 1 year ago 03 1 to 2 years ago 04 2 to 3 years ago, 05 More than 3 years ago, or 06 Have you never had health insurance?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>When were you last covered by any type of health insurance?</p> <p>01 Less than 3 months ago 02 3 months to 1 year ago 03 1 to 2 years ago 04 2 to 3 years ago 05 More than 3 years ago 06 <i>I have never had health insurance</i></p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q3
NEXT	If C1_NEW = (01, 02, 03): C2B, Else: D30

C2B	
<i>ASK</i>	If C1_NEW = (01, 02, 03)
<i>CATI</i>	<p>Did you lose your insurance because of a job loss or layoff that you or a family member experienced?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Did you lose your insurance because of a job loss or layoff that you or a family member experienced?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q4
<i>NEXT</i>	C3

C3	
<i>ASK</i>	If C1_NEW = (01, 02, 03)
<i>CATI</i>	<p>The last time you had health insurance, were you covered by Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>The last time you had health insurance, were you covered by Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q5
<i>NEXT</i>	If C3 = 02: C4, Else: D30

C4	
ASK	If C3 = 02
CATI	<p>The last time you had health insurance, were you covered by insurance obtained through a current or former employer or labor union?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The last time you had health insurance, were you covered by insurance obtained through a current or former employer or labor union?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q6
NEXT	D30

SECTION D: HEALTH STATUS

General Health

D30	
ASK	ASK ALL
CATI	<p>GENERAL HEALTH</p> <p>These next questions ask about your health.</p> <p>In general, would you say your health is excellent, very good, good, fair, or poor?</p> <p>01 EXCELLENT 02 VERY GOOD 03 GOOD 04 FAIR 05 POOR</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next questions ask about your health.</p> <p>In general, would you say your health is excellent, very good, good, fair, or poor?</p> <p>01 Excellent 02 Very good 03 Good 04 Fair 05 Poor</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q23
NEXT	HLTH_DY

HLTH_DY	
ASK	ASK ALL
CATI	<p>For the next question, please think about your physical health, which includes physical illness and injury. During the past 30 days, on how many days did a physical health condition keep you from doing your work or other usual activities?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 0 AND 30.)</p> <p>_____ DAYS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>For the next question, please think about your physical health, which includes physical illness and injury. During the past 30 days, on how many days did a physical health condition keep you from doing your work or other usual activities?</p> <p>_____ Days (0-30)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	New for 2023 instrument Range: 0-30
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of days is missing or invalid. Please enter a number between 0 and 30. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of days a physical health condition kept you from doing your work or other usual activities.
PAPER QNUM	Q24
NEXT	D30_d

D30_d	
ASK	ASK ALL
CATI	<p>Thinking about your teeth and gums, would you say your dental health is excellent, very good, good, fair, or poor?</p> <p>01 EXCELLENT 02 VERY GOOD 03 GOOD 04 FAIR 05 POOR</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Thinking about your teeth and gums, would you say your dental health is excellent, very good, good, fair, or poor?</p> <p>01 Excellent 02 Very good 03 Good 04 Fair 05 Poor</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q25
NEXT	CDC_1

CDC_1	
ASK	ASK ALL
CATI	<p>The next questions are about any physical, mental, or emotional conditions that cause serious difficulties with daily activities.</p> <p>Are you deaf, or do you have serious difficulty hearing?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions are about any physical, mental, or emotional conditions that cause serious difficulties with daily activities.</p> <p>Are you deaf, or do you have serious difficulty hearing?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q26
NEXT	CDC_2

CDC_2	
ASK	ASK ALL
CATI	<p>Are you blind, or do you have serious difficulty seeing, even when wearing glasses?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you blind, or do you have serious difficulty seeing, even when wearing glasses?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q27
NEXT	CDC_3

CDC_3	
ASK	ASK ALL
CATI	<p>Do you have serious difficulty walking or climbing stairs?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Do you have serious difficulty walking or climbing stairs?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q28
NEXT	If CDC_3 = 01: AG_ONST_3, Else: CDC_4

AG_ONST_3	
ASK	If CDC_3 = 01
CATI	<p>Did this serious difficulty with walking or climbing stairs begin before age 22?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Did this serious difficulty with walking or climbing stairs begin before age 22?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q29
NEXT	CDC_4

CDC_4	
ASK	ASK ALL
CATI	<p>Do you have difficulty dressing or bathing?</p> <p>01 YES</p> <p>02 NO</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>Do you have difficulty dressing or bathing?</p> <p>01 Yes</p> <p>02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q30
NEXT	If CDC_4 = 01: AG_ONST_4, Else: CDC_5

AG_ONST_4	
ASK	If CDC_4 = 01
CATI	<p>Did this difficulty with dressing or bathing begin before age 22?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Did this difficulty with dressing or bathing begin before age 22?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q31
NEXT	CDC_5

CDC_5	
ASK	ASK ALL
CATI	<p>Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q32
NEXT	CDC_6

CDC_6	
ASK	ASK ALL
CATI	<p>Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone, such as visiting a doctor's office or shopping?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone, such as visiting a doctor's office or shopping?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q33
NEXT	If CDC_6 = 01: AG_ONST_6, Else: COM_SS

AG_ONST_6	
ASK	If CDC_6 = 01
CATI	<p>Did this difficulty doing errands alone begin before age 22?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Did this difficulty doing errands alone begin before age 22?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q34
NEXT	COM_SS

COM_SS	
ASK	ASK ALL
CATI	<p>Using your usual language, do you have difficulty communicating, for example understanding or being understood? Would you say...</p> <p>01 No difficulty 02 Some difficulty 03 A lot of difficulty, or 04 Cannot do at all</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Using your usual language, do you have difficulty communicating, for example understanding or being understood?</p> <p>01 No difficulty 02 Some difficulty 03 A lot of difficulty 04 Cannot do at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q35
NEXT	If COMM_SS = (02, 03, 04): AG_ONST_CM Else: ADULT_DD

AG_ONST_CM	
ASK	If COM_SS = (02, 03, 04)
CATI	<p>Did this difficulty communicating begin before age 22?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Did this difficulty communicating begin before age 22?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q36
NEXT	ADULT_DD

ADULT_DD	
ASK	ASK ALL
CATI	<p>Do you have a developmental disability?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Do you have a developmental disability?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q37
NEXT	If S15 = 02 and (S14 < 45 or S14A = (01, 02, 03)): E65, Else: D41

Pregnancy Status

E65	
ASK	If S15 = 02 and (S14 < 45 or S14A = (01, 02, 03))
CATI	<p>During the past 12 months, were you pregnant at any time?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, were you pregnant at any time?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q39
NEXT	If E65 = 01: E65A, Else: D41

E65A	
ASK	If E65 = 01
CATI	<p>Are you currently pregnant?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you currently pregnant?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q40
NEXT	D41

Chronic Conditions

D41	
ASK	ASK ALL
CATI	<p>These next questions are about medical conditions you may have.</p> <p>Has a doctor or other health professional ever told you that you had high blood pressure, also called hypertension?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next questions are about medical conditions you may have.</p> <p>Has a doctor or other health professional ever told you that you had high blood pressure, also called hypertension?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q41
NEXT	D41A

D41A	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had a heart attack, also called myocardial infarction?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had a heart attack, also called myocardial infarction?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q42
NEXT	D41b_rev

D41b_rev	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had angina or coronary heart disease?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had angina or coronary heart disease?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q43
NEXT	D41c

D41c	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had a stroke?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had a stroke?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q44
NEXT	D41d_rev

D41d_rev	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had congestive heart failure, which is when your heart can't pump enough blood to meet the body's needs?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had congestive heart failure, which is when your heart can't pump enough blood to meet the body's needs?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q45
NEXT	D42

D42	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had high cholesterol?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had high cholesterol?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q46
NEXT	D43

D43	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had diabetes?</p> <p>01 YES 02 NO 03 (VOLUNTEERED) BORDERLINE</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had diabetes?</p> <p>01 Yes 02 No 03 Borderline</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q47
NEXT	If D43 = (01, 03) and S15 = 02 and (S14 < 45 or S14A = (01, 02, 03)): D43B, Else: COPD

D43B	
ASK	If D43 = (01, 03) and S15 = 02 and (S14 < 45 or S14A = (01, 02, 03))
CATI	<p>Was your {FILL_DIABETES} only during a time associated with a pregnancy?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was your {FILL_DIABETES} only during a time associated with a pregnancy?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	IF D43 = 03: FILL_DIABETES = "borderline diabetes" ELSE: FILL_DIABETES = "diabetes"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q48 Instead of formatting the skip pattern about gender on this question on PAPI, there is an extra response option: "Does not apply (Never been pregnant)"
NEXT	COPD

COPD	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had chronic obstructive pulmonary disease, also called COPD?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had chronic obstructive pulmonary disease, also called COPD?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q49
NEXT	D44

D44	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had asthma?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had asthma?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q50
NEXT	CNCR

CNCR	
ASK	ASK ALL
CATI	<p>Has a doctor or other health professional ever told you that you had cancer?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has a doctor or other health professional ever told you that you had cancer?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q51
NEXT	MTL_HLTH

Mental Health

MTL_HLTH	
ASK	ASK ALL
CATI	<p>MENTAL HEALTH</p> <p>The next questions are about your mental or emotional health. You do not have to answer any questions that make you uncomfortable.</p> <p>In general, would you say that your mental health is excellent, very good, good, fair, or poor?</p> <p>01 EXCELLENT 02 VERY GOOD 03 GOOD 04 FAIR 05 POOR</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions are about your mental or emotional health. You do not have to answer any questions that make you uncomfortable.</p> <p>In general, would you say that your mental health is excellent, very good, good, fair, or poor?</p> <p>01 Excellent 02 Very good 03 Good 04 Fair 05 Poor</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q52
NEXT	D30I

D30I	
ASK	ASK ALL
CATI	<p>Thinking about your mental health, which may include stress, depression, problems with emotions, or substance abuse, for how many days, during the past 30 days did a mental health condition or emotional problem keep you from doing your work or other usual activities?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 0 AND 30.)</p> <p>_____ DAYS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Thinking about your mental health, which may include stress, depression, problems with emotions, or substance abuse, for how many days, during the past 30 days did a mental health condition or emotional problem keep you from doing your work or other usual activities?</p> <p>_____ Days (0-30)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-30
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of days is missing or invalid. Please enter a number between 0 and 30. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of days a mental health condition kept you from doing your work or other usual activities.
PAPER QNUM	Q53
NEXT	IS_UCLA1

Loneliness/Isolation

IS_UCLA1	
ASK	ASK ALL
CATI	<p>How often do you feel that you lack companionship? Would you say...</p> <p>01 Hardly ever</p> <p>02 Some of the time, or</p> <p>03 Often</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>How often do you feel that you lack companionship?</p> <p>01 Hardly ever</p> <p>02 Some of the time</p> <p>03 Often</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q54
NEXT	IS_UCLA2

IS_UCLA2	
ASK	ASK ALL
CATI	<p>How often do you feel left out? Would you say...</p> <p>01 Hardly ever 02 Some of the time, or 03 Often</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How often do you feel left out?</p> <p>01 Hardly ever 02 Some of the time 03 Often</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q55
NEXT	IS_UCLA3

IS_UCLA3	
ASK	ASK ALL
CATI	<p>How often do you feel isolated from others? Would you say...</p> <p>01 Hardly ever 02 Some of the time, or 03 Often</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How often do you feel isolated from others?</p> <p>01 Hardly ever 02 Some of the time 03 Often</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q56
NEXT	PHQ1

Depression/Anxiety

PHQ1	
ASK	ASK ALL
CATI	<p>During the past two weeks, how often have you been bothered by feeling nervous, anxious, or on edge? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days, or 04 Not at all</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past two weeks, how often have you been bothered by feeling nervous, anxious, or on edge? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PHQ1-4 funded by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q57
NEXT	PHQ2

PHQ2	
ASK	ASK ALL
CATI	<p>During the past two weeks, how often have you been bothered by not being able to stop or control worrying? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days, or 04 Not at all</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past two weeks, how often have you been bothered by not being able to stop or control worrying? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PHQ1-4 funded by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q58
NEXT	PHQ3

PHQ3	
ASK	ASK ALL
CATI	<p>During the past two weeks, how often have you been bothered by feeling down, depressed, or hopeless? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days, or 04 Not at all</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past two weeks, how often have you been bothered by feeling down, depressed, or hopeless? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PHQ1-4 funded by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q59
NEXT	PHQ4

PHQ4	
ASK	ASK ALL
CATI	<p>During the past two weeks, how often have you been bothered by having little interest or pleasure in doing things? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days, or 04 Not at all</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past two weeks, how often have you been bothered by having little interest or pleasure in doing things? Would you say...</p> <p>01 Nearly every day 02 More than half the days 03 Several days 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PHQ1-4 funded by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q60
NEXT	D45

Substance Use

D45	
ASK	ASK ALL
CATI	<p>SUBSTANCE USE</p> <p>The next few questions are about your experiences with tobacco, alcohol, and other substances. The answers that you provide are important to this study's success, and only the combined responses from all survey participants will be reported, not just one person's answers.</p> <p>Have you smoked at least 100 cigarettes in your entire life?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next few questions are about your experiences with tobacco, alcohol, and other substances. The answers that you give us are important to this study's success, and only the combined responses from all survey participants will be reported, not just one person's answers.</p> <p>Have you smoked at least 100 cigarettes in your entire life?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q61
NEXT	If D45 = 01: D45a, Else: D45e

D45a	
<i>ASK</i>	If D45 = 01
<i>CATI</i>	<p>Do you now smoke cigarettes every day, some days, or not at all?</p> <p>01 EVERY DAY 02 SOME DAYS 03 NOT AT ALL</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Do you now smoke cigarettes every day, some days, or not at all?</p> <p>01 Every day 02 Some days 03 Not at all</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q62
<i>NEXT</i>	D45e

D45e	
ASK	ASK ALL
CATI	<p>Have you ever used an electronic cigarette or vaping product, even one time?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Have you ever used an electronic cigarette or vaping product, even one time?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q63
NEXT	If D45e = 01: D45F, Else: D46

D45f	
ASK	If D45e = 01
CATI	<p>Do you now use electronic cigarettes or vaping products every day, some days, rarely, or not at all?</p> <p>01 EVERY DAY 02 SOME DAYS 03 RARELY 04 NOT AT ALL</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Do you now use electronic cigarettes or vaping products every day, some days, rarely, or not at all?</p> <p>01 Every day 02 Some days 03 Rarely 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q64
NEXT	D46

D46	
ASK	ASK ALL
CATI	<p>During the past 30 days, on how many days did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage or liquor?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 0 AND 30. IF RESPONDENT DID NOT HAVE ANY DRINKS OVER THE PAST 30 DAYS, ENTER 0.)</p> <p>_____ DAYS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 30 days, on how many days did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage or liquor?</p> <p>_____ Days (0-30)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-30
HARD CHECK	
SOFT CHECK	IF CAWI OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of days is missing or invalid. Please enter a number between 0 and 30. If you did not have any drinks over the past 30 days, enter 0. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of days on which you had at least one alcoholic beverage in the past 30 days.
PAPER QNUM	Q65
NEXT	If D46 = (1-30): D46A, Else: MRJ_EV

D46A	
ASK	If D46 = (1-30)
CATI	<p>During the past 30 days, considering all types of alcoholic beverages, on how many days, if any, did you have {D46AFILL} or more drinks on an occasion?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 0 AND 30.)</p> <p>_____ DAYS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 30 days, considering all types of alcoholic beverages, on how many days, if any, did you have {D46AFILL} or more drinks on an occasion?</p> <p>_____ Days (0-30)</p>
QUESTION TYPE	Numeric
FILLS	If S15 = 01: D46AFILL = "5", Else: D46AFILL = "4"
NOTES	Range: 0-30
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of days is missing or invalid. Please enter a number between 0 and 30. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of days on which you had {D46AFILL} or more drinks on an occasion.
PAPER QNUM	Q66, Q67
NEXT	MRJ_EV

MRJ_EV	
ASK	ASK ALL
CATI	<p>The next questions ask about marijuana and cannabis products. When answering these questions, please do not include CBD or other hemp products that have no or small amounts of THC and are not intended to cause a “high”.</p> <p>Have you ever, even once, used marijuana, cannabis, or any form of THC product such as edibles, oils, and food products?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions ask about marijuana and cannabis products. When answering these questions, please do not include CBD or other hemp products that have no or small amounts of THC and are not intended to cause a “high”.</p> <p>Have you ever, even once, used marijuana, cannabis, or any form of THC product such as edibles, oils, and food products?</p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q68
NEXT	If MRJ_EV = 01: MRJ_FRQ, Else: PRESC_1

MRJ_FRQ	
ASK	If MRJ_EV = 01
CATI	<p>During the past 30 days, have you used marijuana, cannabis, or any form of THC product every day, some days, rarely, or not at all?</p> <p>01 EVERY DAY 02 SOME DAYS 03 RARELY 04 NOT AT ALL</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 30 days, have you used marijuana, cannabis, or any form of THC product every day, some days, rarely, or not at all?</p> <p>01 Every day 02 Some days 03 Rarely 04 Not at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q69
NEXT	PRESC_1

PRESC_1	
ASK	ASK ALL
CATI	<p>The next questions ask about using prescription pain relievers, such as Oxycontin also known as oxycodone, Vicodin also known as hydrocodone, and Opana also known as oxymorphone. When answering these questions, please do not include pain relievers such as aspirin, Tylenol, Aleve, and Advil, or other ibuprofens.</p> <p>During the past 12 months, have you been prescribed a pain reliever by a doctor?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions ask about using prescription pain relievers, such as Oxycontin (oxycodone), Vicodin (hydrocodone), and Opana (oxymorphone). When answering these questions, please do not include pain relievers such as aspirin, Tylenol, Aleve, and Advil, or other ibuprofens.</p> <p>During the past 12 months, have you been prescribed a pain reliever by a doctor?</p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PRESC_1-4 requested by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q70
NEXT	If PRESC_1 = 01: PRESC_2, Else: PRESC_4

PRESC_2	
<i>ASK</i>	If PRESC_1 = 01
<i>CATI</i>	<p>During the past 12 months, have you used a prescription pain reliever in any way a doctor did not direct you to use it?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, have you used a prescription pain reliever in any way a doctor did not direct you to use it?</p> <p>01 Yes 02 No 98 Don't know</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument PRESC_1-4 requested by OhioMHAS
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q71
<i>NEXT</i>	If PRESC_2 = 01: PRESC_3, Else: PRESC_4

PRESC_3	
ASK	If PRESC_2 = 01
CATI	<p>During the past 12 months, have you used a prescription pain reliever in greater amounts, more often, or longer than a doctor told you to take it?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, have you used a prescription pain reliever in greater amounts, more often, or longer than a doctor told you to take it?</p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument PRESC_1-4 requested by OhioMHAS
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q72
NEXT	PRESC_4

PRESC_4	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	<p>During the past 12 months, have you used a prescription pain reliever that was not prescribed for you by a doctor?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, have you used a prescription pain reliever that was not prescribed for you by a doctor?</p> <p>01 Yes 02 No 98 Don't know</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument PRESC_1-4 requested by OhioMHAS
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q73
<i>NEXT</i>	F67

SECTION E: SOURCES OF CARE, UTILIZATION, AND UNMET NEEDS

Usual Source of Care

F67	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	<p>HEALTH CARE</p> <p>The next set of questions asks about your use of health care services.</p> <p>When you are sick or need advice about your health, do you usually receive care at one place, more than one place, or no place at all?</p> <p>01 ONE PLACE 02 MORE THAN ONE PLACE 03 NO PLACE AT ALL</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>The next set of questions asks about your use of health care services.</p> <p>When you are sick or need advice about your health, do you usually receive care at one place, more than one place, or no place at all?</p> <p>01 One place 02 More than one place 03 No place at all</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q74
<i>NEXT</i>	If F67 = (01, 02): F67_2, Else: UTLZ

F67_2	
ASK	If F67 = (01, 02)
CATI	<p>Where do you usually receive care or advice about your health? Would you say...</p> <p>(INTERVIEWER: IF THE RESPONDENT INDICATES MORE THAN ONE, PROMPT THEM TO SELECT JUST ONE PLACE WHERE THEY USUALLY RECEIVE CARE.)</p> <p>01 A doctor's office or health center, including by phone or video call, 02 A hospital emergency room, 03 An urgent care center, including by phone or video call, 04 A clinic in a pharmacy or grocery store, or 05 Some other place</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Where do you usually receive care or advice about your health?</p> <p>01 A doctor's office or health center, including by phone or video call 02 A hospital emergency room 03 An urgent care center, including by phone or video call 04 A clinic in a pharmacy or grocery store 05 Some other place</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q75
NEXT	UTLZ

Health Care Utilization

f_UTLZ	
UTLZ01 / UTLZ02 / UTLZ03	
ASK	ASK ALL
CATI	<p>During the past 12 months, did you see a doctor or other healthcare provider...</p> <p>(INTERVIEWER: PAUSE AFTER EACH ROW AND WAIT FOR A YES/NO RESPONSE.)</p> <p>COLUMN HEADERS:</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS:</p> <p>a. In-person? [UTLZ01] b. (IF NEEDED: Did you see a doctor or other healthcare provider...) By audio-only call without video? [UTLZ02] c. (IF NEEDED: Did you see a doctor or other healthcare provider...) By video call with audio? [UTLZ03]</p>
CAWI	<p>During the past 12 months, did you see a doctor or other healthcare provider...?</p> <p>COLUMN HEADERS:</p> <p>01 Yes 02 No</p> <p>ROW ITEMS:</p> <p>a. In-person [UTLZ01] b. By audio-only call without video [UTLZ02] c. By video call with audio [UTLZ03]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q76
NEXT	If UTLZ02 = 1 or UTLZ03 = 1: TLHLTH, Else: E59A

TLHLTH	
ASK	If UTLZ02 = 1 or UTLZ03 = 1
CATI	<p>This next question asks you about telehealth. Telehealth lets a doctor, nurse, or other healthcare provider care for you without an in-person office visit. Telehealth appointments are usually done online, using a computer, tablet, or smartphone, or by phone.</p> <p>During the past 12 months, how many times have you had a telehealth visit with a doctor, nurse, or other healthcare provider? Would you say...</p> <p>01 0 times 02 1-2 times 03 3-6 times, or 04 7 or more times</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>This next question asks you about telehealth. Telehealth lets a doctor, nurse, or other healthcare provider care for you without an in-person office visit. Telehealth appointments are usually done online (using a computer, tablet, or smartphone) or by phone.</p> <p>During the past 12 months, how many times have you had a telehealth visit with a doctor, nurse, or other healthcare provider?</p> <p>01 0 times 02 1-2 times 03 3-6 times 04 7 or more times</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q77 Note that this skip pattern is not formatted on PAPI.
NEXT	E59A

E59A	
ASK	ASK ALL
CATI	<p>About how long has it been since you last visited a doctor or other health professional for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. Would you say...</p> <p>(IF NEEDED: If you are unsure, please make your best estimate.)</p> <p>01 Within the last 12 months, 02 More than 12 months ago, or 03 Have you never seen a doctor for a routine checkup?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>About how long has it been since you last visited a doctor or other health professional for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. If you are unsure, please make your best estimate.</p> <p>01 Within the last 12 months 02 More than 12 months ago 03 I have never seen a doctor for a routine checkup</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q78
NEXT	E62

E62	
ASK	ASK ALL
CATI	<p>During the past 12 months, how many times were you a patient in a hospital emergency room? Would you say...</p> <p>01 0 times 02 1-2 times 03 3-6 times, or 04 7 or more times</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, how many times were you a patient in a hospital emergency room?</p> <p>01 0 times 02 1-2 times 03 3-6 times 04 7 or more times</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Changed from write-in question to categorical in 2023.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q79
NEXT	VACRC_FLU

Vaccines

VACRC_FLU	
ASK	ASK ALL
CATI	<p>We would now like to ask you a couple of questions about vaccines.</p> <p>During the past 12 months, have you had a shot or vaccine for the flu?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>We would now like to ask you a couple of questions about vaccines.</p> <p>During the past 12 months, have you had a shot or vaccine for the flu?</p> <p>01 Yes 02 No 03 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q80
NEXT	f_VACRC_EVR

f_VACRC_EVR VACRC_EVR1 / VACRC_EVR2 / VACRC_EVR3	
ASK	ASK ALL
CATI	<p>Have you ever had a shot or vaccine for ...?</p> <p>(INTERVIEWER: PAUSE AFTER EACH ROW AND WAIT FOR A YES/NO RESPONSE.)</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Have you ever had a shot or vaccine for...) Pneumonia? [VACRC_EVR1] b. (IF NEEDED: Have you ever had a shot or vaccine for...) Shingles? [VACRC_EVR2] c. (IF NEEDED: Have you ever had a shot or vaccine for...) COVID-19? [VACRC_EVR3]</p>
CAWI	<p>Have you ever had a shot or vaccine for any of the following?</p> <p>COLUMN HEADERS: 01 Yes 02 No 03 Don't know</p> <p>ROW ITEMS: a. Pneumonia [VACRC_EVR1] b. Shingles [VACRC_EVR2] c. COVID-19 [VACRC_EVR3]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument Randomize order of the rows in the grids on CATI and CAWI. Do not keep the lettering in the rows.
HARD CHECK	
SOFT CHECK	CAWI: No error message when missing.
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q81 Note that the order of the rows is listed in reverse alphabetical order on PAPI: a. Shingles b. Pneumonia c. COVID-19
NEXT	f_VAC_HES

f_VAC_HES	
VAC_HES1 / VAC_HES2 / VAC_HES3 / VAC_HES4	
ASK	ASK ALL
CATI	<p>Currently, how hesitant are you to receive the following vaccines? Would you say very hesitant, somewhat hesitant, not that hesitant, or not at all hesitant?</p> <p>(IF NEEDED: READ RESPONSE OPTIONS VERY HESITANT, SOMEWHAT HESITANT, NOT THAT HESITANT, OR NOT AT ALL HESITANT)</p> <p>COLUMN HEADERS:</p> <p>01 VERY HESITANT 02 SOMEWHAT HESITANT 03 NOT THAT HESITANT 04 NOT AT ALL HESITANT 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS:</p> <p>a. (IF NEEDED: Currently, how hesitant are you to receive vaccines for...) the Flu? [VAC_HES1] b. (IF NEEDED: Currently, how hesitant are you to receive vaccines for...) Pneumonia? [VAC_HES2] c. (IF NEEDED: Currently, how hesitant are you to receive vaccines for...) Shingles? [VAC_HES3] d. (IF NEEDED: Currently, how hesitant are you to receive vaccines for...) COVID-19? [VAC_HES4]</p>
CAWI	<p>Currently, how hesitant are you to receive the following vaccines?</p> <p>COLUMN HEADERS:</p> <p>01 Very hesitant 02 Somewhat hesitant 03 Not that hesitant 04 Not at all hesitant</p> <p>ROW ITEMS:</p> <p>a. Flu [VAC_HES1] b. Pneumonia [VAC_HES2] c. Shingles [VAC_HES3] d. COVID-19 [VAC_HES4]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument Randomize the order of the rows in the grid on CATI and CAWI. Do not keep the lettering on the rows.
HARD CHECK	
SOFT CHECK	CAWI: No error message when missing.
CATI NOTES	
CAWI NOTES	

<i>PAPER QNUM</i>	<p>Q82</p> <p>Note that the order of the rows is listed in reverse alphabetical order on PAPI:</p> <ul style="list-style-type: none"> a. Shingles b. Pneumonia c. Flu d. COVID-19
<i>NEXT</i>	ND_DNTL

Unmet Care Needs

ND_DNTL	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>These next questions ask about different types of care you may have needed and whether or not you were able to get this needed care.</p> <p>During the past 12 months, was there a time when you needed dental care?</p> <ul style="list-style-type: none"> 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY
<i>CAWI</i>	<p>These next questions ask about different types of care you may have needed and whether or not you were able to get this needed care.</p> <p>During the past 12 months, was there a time when you needed dental care?</p> <ul style="list-style-type: none"> 01 Yes, I needed dental care 02 No, I did not need dental care
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	Variable name changed to ease interpretation for analyses.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q83
<i>NEXT</i>	If ND_DNTL = 01: UNMT_DNTL, Else: ND_VS

UNMT_DNTL	
ASK	If ND_DNTL = 01
CATI	<p>Were you able to get the dental care that you needed?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Were you able to get the dental care that you needed?</p> <p>01 Yes, I got the dental care I needed 02 No, I did not get the dental care I needed</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name changed to ease interpretation for analyses.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q84
NEXT	If UNMT_DNTL = 02: f_UM_DNTL_RS, Else: ND_VS

f_UM_DNTL_RS	
UM_DNTL_RS01 / UM_DNTL_RS02 / UM_DNTL_RS03 / UM_DNTL_RS04 / UM_DNTL_RS05 / UM_DNTL_RS06	
ASK	If UNMT_DNTL = 02
CATI	<p>Why did you not get the dental care you needed during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you not get the dental care you needed during the past 12 months because...) You thought it would cost too much? [UM_DNTL_RS01] b. (IF NEEDED: Did you not get the dental care you needed during the past 12 months because...) You did not have transportation to or from appointments? [UM_DNTL_RS02] c. (IF NEEDED: Did you not get the dental care you needed during the past 12 months because...) The provider was not available when you needed to go? [UM_DNTL_RS03] d. (IF NEEDED: Did you not get the dental care you needed during the past 12 months because...) You could not find a provider who would accept your insurance? [UM_DNTL_RS04] e. (IF NEEDED: Did you not get the dental care you needed during the past 12 months because of...) Some other reason? [UM_DNTL_RS05]</p> <p style="text-align: right;">(IF NEEDED: Please tell me the other reason.) _____ [UM_DNTL_RS06]</p>
CAWI	<p>Why did you not get the dental care you needed during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I thought it would cost too much [UM_DNTL_RS01] b. I did not have transportation to or from appointments [UM_DNTL_RS02] c. The provider was not available when I needed to go [UM_DNTL_RS03] d. I could not find a provider who would accept my insurance [UM_DNTL_RS04] e. Another reason not listed [UM_DNTL_RS05]</p> <p style="text-align: right;">Please specify the other reason: _____ [UM_DNTL_RS06]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument If UM_DNTL_RS05=01, display UM_DNTL_RS06 on the next screen.
HARD CHECK	
SOFT CHECK	
CATI NOTES	

<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason you did not receive dental care" Short Text: Select yes or no for each reason you did not get dental care.
<i>PAPER QNUM</i>	Q85
<i>NEXT</i>	ND_VS

ND_VS	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>During the past 12 months, was there a time when you needed vision care, eyeglasses, or lenses?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, was there a time when you needed vision care, eyeglasses, or lenses?</p> <p>01 Yes, I needed vision care, eyeglasses, or lenses 02 No, I did not need vision care, eyeglasses, or lenses</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	Variable name changed to ease interpretation for analyses.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q86
<i>NEXT</i>	If ND_VS = 01: UNMT_VS, Else: ND_MTL

UNMT_VS	
ASK	If ND_VS = 01
CATI	<p>Were you able to get the vision care, eyeglasses, or lenses that you needed?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Were you able to get the vision care, eyeglasses, or lenses that you needed?</p> <p>01 Yes, I got the vision care, eyeglasses, or lenses I needed 02 No, I did not get the vision care, eyeglasses, or lenses I needed</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name changed to ease interpretation for analyses.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q87
NEXT	If UNMT_VS = 02: f_UNMT_VS_RS, Else: ND_MTL

f_UNMT_VS_RS	
UNMT_VS_RS01 / UNMT_VS_RS02 / UNMT_VS_RS03 / UNMT_VS_RS04 / UNMT_VS_RS05 / UNMT_VS_RS06	
ASK	If UNMT_VS = 02
CATI	<p>Why did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months because...) You thought it would cost too much? [UNMT_VS_RS01] b. (IF NEEDED: Did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months because...) You did not have transportation to or from appointments? [UNMT_VS_RS02] c. (IF NEEDED: Did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months because...) The provider was not available when you needed to go? [UNMT_VS_RS03] d. (IF NEEDED: Did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months because...) You could not find a provider who would accept your insurance? [UNMT_VS_RS04] e. (IF NEEDED: Did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months because of...) Some other reason? [UNMT_VS_RS05]</p> <p>(IF NEEDED: Please tell me the other reason.) _____ [UNMT_VS_RS06]</p>
CAWI	<p>Why did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I thought it would cost too much [UNMT_VS_RS01] b. I did not have transportation to or from appointments [UNMT_VS_RS02] c. The provider was not available when I needed to go [UNMT_VS_RS03] d. I could not find a provider who would accept my insurance [UNMT_VS_RS04] e. Another reason not listed [UNMT_VS_RS05]</p> <p>Please specify the other reason: _____ [UNMT_VS_RS06]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument If UNMT_VS_RS05=01, display UNMT_VS_RS06 on the next screen.
HARD CHECK	
SOFT CHECK	
CATI NOTES	

<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason you did not receive vision care" Short Text: Select yes or no for each reason you did not get vision care.
<i>PAPER QNUM</i>	Q88
<i>NEXT</i>	ND_MTL

ND_MTL	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>During the past 12 months, was there a time when you needed mental or emotional health care or counseling services?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, was there a time when you needed mental or emotional health care or counseling services?</p> <p>01 Yes, I needed mental health or emotional health care or counseling services 02 No, I did not need mental health or emotional health care or counseling services</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	Variable name changed to ease interpretation for analyses
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q89
<i>NEXT</i>	If ND_MTL = 01: UNMT_MTL, Else: ND_DRG_EVR

UNMT_MTL	
ASK	If ND_MTL = 01
CATI	<p>Were you able to get the mental or emotional health care or counseling services that you needed?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Were you able to get the mental or emotional health care or counseling services that you needed?</p> <p>01 Yes, I got the mental health or emotional health care or counseling services I needed 02 No, I did not get the mental health or emotional health care or counseling services I needed</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name changed to ease interpretation for analyses.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q90
NEXT	If UNMT_MTL = 02: f_UM_MTL_RS, Else: ND_DRG_EVR

f_UNMT_MTL_RS	
UM_MTL_RS01 / UM_MTL_RS02 / UM_MTL_RS03 / UM_MTL_RS04 / UM_MTL_RS05 / UM_MTL_RS06	
ASK	If UNMT_MTL = 02
CATI	<p>Why did you not get the mental or emotional health care or counseling services you needed during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you not get the mental or emotional health care or counseling services you needed during the past 12 months because...) You thought it would cost too much? [UM_MTL_RS01] b. (IF NEEDED: Did you not get the mental or emotional health care or counseling services you needed during the past 12 months because...) You did not have transportation to or from appointments? [UM_MTL_RS02] c. (IF NEEDED: Did you not get the mental or emotional health care or counseling services you needed during the past 12 months because...) The provider was not available when you needed to go? [UM_MTL_RS03] d. (IF NEEDED: Did you not get the mental or emotional health care or counseling services you needed during the past 12 months because...) You could not find a provider who would accept your insurance? [UM_MTL_RS04] e. (IF NEEDED: Did you not get the mental or emotional health care or counseling services you needed during the past 12 months because of...) Some other reason? [UM_MTL_RS05]</p> <p style="text-align: right;">(IF NEEDED: Please tell me the other reason.) _____ [UM_MTL_RS06]</p>
CAWI	<p>Why did you not get the mental or emotional health care or counseling services you needed during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Tes 02 No</p> <p>ROW ITEMS: a. I thought it would cost too much [UM_MTL_RS01] b. I did not have transportation to or from appointments [UM_MTL_RS02] c. The provider was not available when I needed to go [UM_MTL_RS03] d. I could not find a provider who would accept my insurance [UM_MTL_RS04] e. Another reason not listed [UM_MTL_RS05]</p> <p style="text-align: right;">Please specify the other reason: _____ [UM_MTL_RS06]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument If UM_MTL_RS05=01, display UM_MTL_RS06 on the next screen.
HARD CHECK	

<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason you did not receive mental health care" Short Text: Select yes or no for each reason you did not get mental health care.
<i>PAPER QNUM</i>	Q91
<i>NEXT</i>	ND_DRG_EVR

ND_DRG_EVR	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>Have you ever needed treatment for your use of alcohol or other drugs, not including nicotine products? Would you say...</p> <p>01 Yes 02 No, or 03 Have you never used alcohol or other drugs?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Have you ever needed treatment for your use of alcohol or other drugs, not including nicotine products?</p> <p>01 Yes 02 No 03 I have never used alcohol or other drugs</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q92
<i>NEXT</i>	If ND_DRG_EVR = 01: ND_DRG, Else: UNMT_PRS

ND_DRG	
ASK	If ND_DRG_EVR = 01
CATI	<p>During the past 12 months, was there a time when you needed treatment for your use of alcohol or other drugs, not including nicotine products?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, was there a time when you needed treatment for your use of alcohol or other drugs, not including nicotine products?</p> <p>01 Yes, I needed treatment for alcohol or other drugs, not including nicotine products 02 No, I did not need treatment for alcohol or other drugs, not including nicotine products</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name changed to ease interpretation for analyses. Skip pattern new for 2023 instrument.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q93
NEXT	If ND_DRG = 01: UNMT_DRG, Else: UNMT_PRS

UNMT_DRG	
ASK	If ND_DRG = 01
CATI	<p>Were you able to get the treatment you needed for your use of alcohol or other drugs, not including nicotine products?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Were you able to get the treatment you needed for your use of alcohol or other drugs, not including nicotine products?</p> <p>01 Yes, I got the treatment I needed for alcohol or other drugs, not including nicotine products 02 No, I did not get the treatment I needed for alcohol or other drugs, not including nicotine products</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name changed to ease interpretation for analyses.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q94
NEXT	If UNMT_DRG = 02: f_UM_DRG_RS, Else: UNMT_PRS

f_UM_DRG_RS	
UM_DRG_RS01 / UM_DRG_RS02 / UM_DRG_RS03 / UM_DRG_RS04 / UM_DRG_RS05 / UM_DRG_RS06	
ASK	If UNMT_DRG = 02
CATI	<p>Why did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months because...) You thought it would cost too much? [UM_DRG_RS01] b. (IF NEEDED: Did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months because...) You did not have transportation to or from appointments? [UM_DRG_RS02] c. (IF NEEDED: Did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months because...) The provider was not available when you needed to go? [UM_DRG_RS03] d. (IF NEEDED: Did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months because...) You could not find a provider who would accept your insurance? [UM_DRG_RS04] e. (IF NEEDED: Did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months because of...) Some other reason? [UM_DRG_RS05]</p> <p>(IF NEEDED: Please tell me the other reason.) _____ [UM_DRG_RS06]</p>
CAWI	<p>Why did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I thought it would cost too much [UM_DRG_RS01] b. I did not have transportation to or from appointments [UM_DRG_RS02] c. The provider was not available when I needed to go [UM_DRG_RS03] d. I could not find a provider who would accept my insurance [UM_DRG_RS04] e. Another reason not listed above [UM_DRG_RS05]</p> <p>Please specify the other reason: _____ [UM_DRG_RS06]</p>
QUESTION TYPE	Radio button grid
FILLS	

<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument If UM_DRG_RS05=01, display UM_DRG_RS06 on the next screen.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason you did not receive the treatment you needed" Short Text: Select yes or no for each reason you did not get the treatment you needed.
<i>PAPER QNUM</i>	Q95
<i>NEXT</i>	UNMT_PRS

UNMT_PRS	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>During the past 12 months, was there a time when you were not able to fill a prescription? Would you say...</p> <p>01 Yes 02 No, or 03 Did you not have any prescriptions in the past 12 months?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, was there a time when you were not able to fill a prescription?</p> <p>01 Yes, there was a time I was not able to fill a prescription 02 No, I was able to fill all my prescriptions 03 I did not have any prescriptions in the past 12 months</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q96
<i>NEXT</i>	If UNMT_PRS = 01: f_UM_PRS_RS, Else: Q1_NEW

f_UM_PRS_RS UM_PRS_RS01 / UM_PRS_RS02 / UM_PRS_RS03 / UM_PRS_RS04 / UM_PRS_RS05 / UM_PRS_RS06 / UM_PRS_RS07 / UM_PRS_RS08	
ASK	If UNMT_PRS = 01
CATI	<p>Thinking about the most recent time you were not able to fill a prescription, why were you not able to fill it? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Were you not able to fill the prescription because...) You could not afford to pay for the prescription? [UNMT_PRS_RS01] b. (IF NEEDED: Were you not able to fill the prescription because...) You did not have transportation to or from the pharmacy? [UNMT_PRS_RS02] c. (IF NEEDED: Were you not able to fill the prescription because...) The pharmacy was not open when you needed to go? [UNMT_PRS_RS03] d. (IF NEEDED: Were you not able to fill the prescription because...) You could not find a pharmacy that would accept your insurance? [UNMT_PRS_RS04] e. (IF NEEDED: Were you not able to fill the prescription because...) You ran out of refills? [UNMT_PRS_RS05] f. (IF NEEDED: Were you not able to fill the prescription because...) Your insurance would not cover the prescription? [UNMT_PRS_RS06] g. (IF NEEDED: Were you not able to fill the prescription because of ...) Some other reason? [UNMT_PRS_RS07]</p> <p>(IF NEEDED: Please tell me the other reason.) _____ [UNMT_PRS_RS08]</p>
CAWI	<p>Thinking about the most recent time you were not able to fill a prescription, why were you not able to fill it? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I could not afford to pay for the prescription [UNMT_PRS_RS01] b. I did not have transportation to or from the pharmacy [UNMT_PRS_RS02] c. The pharmacy was not open when I needed to go [UNMT_PRS_RS03] d. I could not find a pharmacy that would accept my insurance [UNMT_PRS_RS04] e. I ran out of refills [UNMT_PRS_RS05] f. My insurance would not cover the prescription [UNMT_PRS_RS06] g. Another reason not listed above [UNMT_PRS_RS07]</p> <p>Please specify the other reason: _____ [UNMT_PRS_RS08]</p>
QUESTION TYPE	Radio button grid

<i>FILLS</i>	
<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument If UNMT_PRS_RS07=01, display UNMT_PRS_RS08 on the next screen.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason you were not able to fill a prescription" Short Text: Select yes or no for each reason you did were not able to fill a prescription.
<i>PAPER QNUM</i>	Q97
<i>NEXT</i>	Q1_NEW

Financial Stress

Q1_NEW	
ASK	ASK ALL
CATI	<p>FINANCIAL SITUATION</p> <p>These next questions are about your financial situation.</p> <p>During the past 12 months, how difficult has it been for your household to pay for usual household expenses, such as food, rent or mortgage, medical expenses, and so on? Would you say...</p> <p>01 Not at all difficult 02 A little difficult 03 Somewhat difficult, or 04 Very difficult</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next questions are about your financial situation.</p> <p>During the past 12 months, how difficult has it been for your household to pay for usual household expenses, such as food, rent or mortgage, medical expenses, and so on?</p> <p>01 Not at all difficult 02 A little difficult 03 Somewhat difficult 04 Very difficult</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q98
NEXT	PY_RNT

PY_RNT	
ASK	ASK ALL
CATI	<p>During the past 12 months, at any point did you have difficulty paying your rent or mortgage? Would you say...</p> <p>01 Yes 02 No, or 03 Did you not have rent or a mortgage during the past 12 months?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, at any point did you have difficulty paying your rent or mortgage?</p> <p>01 Yes 02 No 03 I did not have rent or a mortgage during the past 12 months</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q99
NEXT	If PY_RNT = 01: FRC_MV_RNT, Else: F70

FRC_MV_RNT	
ASK	If PY_RNT = 01
CATI	<p>During the past 12 months, were you forced to move because you couldn't pay your rent or mortgage?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, were you forced to move because you couldn't pay your rent or mortgage?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q100
NEXT	F70

F70	
ASK	ASK ALL
CATI	<p>During the past 12 months, at any point did you have difficulty paying medical bills for yourself or anyone else in the family or household? Would you say...</p> <p>01 Yes 02 No, or 03 Did you not have any medical bills during the past 12 months?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, at any point did you have difficulty paying medical bills for yourself or anyone else in the family or household?</p> <p>01 Yes 02 No 03 I did not have any medical bills during the past 12 months</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q101
NEXT	PY_DBT

PY_DBT	
ASK	ASK ALL
CATI	<p>During the past 12 months, at any point did you have difficulty paying any debt that you have? Would you say...</p> <p>01 Yes 02 No, or 03 Did you not have any debt during the past 12 months?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, at any point did you have difficulty paying any debt that you have?</p> <p>01 Yes 02 No 03 I did not have any debt during the past 12 months</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q102
NEXT	FOOD_WORRY

FOOD_WORRY	
ASK	ASK ALL
CATI	<p>At any time in the past 12 months, have you worried whether your food would run out before you got money to buy more?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>At any time in the past 12 months, have you worried whether your food would run out before you got money to buy more?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument. This was in 2019 but not 2021.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q103
NEXT	FOOD_OUT

FOOD_OUT	
ASK	ASK ALL
CATI	<p>At any time in the past 12 months, have you run out of food before you got money to buy more?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>At any time in the past 12 months, have you run out of food before you got money to buy more?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument. This was in 2019 but not 2021.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q104
NEXT	PY_FD

PY_FD	
ASK	ASK ALL
CATI	<p>During the past 12 months, at any point did you have difficulty paying for food for your family or household? Would you say...</p> <p>01 Yes 02 No, or 03 Did you not buy food for your family or this household during the past 12 months?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, at any point did you have difficulty paying for food for your family or household?</p> <p>01 Yes 02 No 03 I did not buy food for my family or this household during the past 12 months</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q105
NEXT	FD_EBT

FD_EBT	
ASK	ASK ALL
CATI	<p>During the past 30 days, have you used an EBT or Food Stamp benefit card?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 30 days, have you used an EBT or Food Stamp benefit card?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q106
NEXT	PY_TRNSP

PY_TRNSP	
ASK	ASK ALL
CATI	<p>During the past 12 months, at any point did you have difficulty accessing reliable transportation?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, at any point did you have difficulty accessing reliable transportation?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q107
NEXT	f_CM_PRB

f_CM_PRB	
CM_PRB01 / CM_PRB02 / CM_PRB03 / CM_PRB04 / CM_PRB05 / CM_PRB06 / CM_PRB07 / CM_PRB08	
ASK	ASK ALL
CATI	<p>Now I have a question about your community.</p> <p>How big of a problem do you think the following issues are in your community? Would you say a very big problem, a moderately big problem, a small problem, not a problem at all, or are you not sure?</p> <p>(IF NEEDED: READ RESPONSE OPTIONS A VERY BIG PROBLEM, A MODERATELY BIG PROBLEM, A SMALL PROBLEM, NOT A PROBLEM AT ALL, OR ARE YOU NOT SURE)</p> <p>COLUMN HEADERS:</p> <p>01 A VERY BIG PROBLEM 02 A MODERATELY BIG PROBLEM 03 A SMALL PROBLEM 04 NOT A PROBLEM AT ALL 98 DON'T KNOW 99 REFUSED</p> <p>ROW ITEMS:</p> <p>a. (IF NEEDED: In your community, how big of a problem is...) Access to transportation? [CM_PRB01]</p> <p>b. (IF NEEDED: In your community, how big of a problem is...) Crime? [CM_PRB02]</p> <p>c. (IF NEEDED: In your community, how big of a problem is...) Drug addiction? [CM_PRB03]</p> <p>d. (IF NEEDED: In your community, how big of a problem is a...) Lack of jobs? [CM_PRB04]</p> <p>e. (IF NEEDED: In your community, how big of a problem is...) Paying for food? [CM_PRB05]</p> <p>f. (IF NEEDED: In your community, how big of a problem is...) Paying for housing? [CM_PRB06]</p>

CAWI	<p>Now we have a question about your community.</p> <p>How big of a problem do you think the following issues are in your community?</p> <p>COLUMN HEADERS:</p> <p>01 A very big problem 02 A moderately big problem 03 A small problem 04 Not a problem at all 98 Don't know</p> <p>ROW ITEMS:</p> <p>a. Access to transportation [CM_PRB01] b. Crime [CM_PRB02] c. Drug addiction [CM_PROB03] d. Lack of jobs [CM_PRB04] e. Paying for food [CM_PROB05] f. Paying for housing [CM_PRB06] g. Problem not mentioned, please specify. [CM_PRB07]</p> <p>Please specify the other reason: _____ [CM_PROB08]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	<p>New for 2023 instrument</p> <p>CAWI: If CM_PROB07=(01, 02, 03), display CM_PROB08 on the next screen.</p> <p>Randomize the order of the rows in the grid on CATI and CAWI (except for CM_PRB07).</p> <p>Do not keep the lettering in the rows.</p>
HARD CHECK	
SOFT CHECK	CAWI: No error message when missing
CATI NOTES	
CAWI NOTES	<p>Accessibility label for "other, specify" field should read "Please specify the other problem you think is an issue"</p> <p>Short Text: Select how much of a problem you think each issue is for your community.</p>
PAPER QNUM	Q108
NEXT	<p>CATI: CM_PRB08</p> <p>CAWI: G71</p>

CM_PR08	
<i>ASK</i>	CATI: ASK ALL
<i>CATI</i>	<p>Is there anything else that you think is a problem in your community?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 REFUSED</p> <p>(IF NEEDED: Please tell me the other problem.) _____</p>
<i>CAWI</i>	[Not on CAWI]
<i>QUESTION TYPE</i>	Radio button grid
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument If CM_PROB08=01, display the open-ended text box on the same screen.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	CATI: If CM_PR08=01: CM_PR07, Else: G71

CM_PRB07	
ASK	CATI: If CM_PRB08=01
CATI	(IF NEEDED: Would you say this is a very big problem, a moderately big problem, or a small problem?) 01 A VERY BIG PROBLEM 02 A MODERATELY BIG PROBLEM 03 A SMALL PROBLEM 98 DON'T KNOW 99 REFUSED
CAWI	[Not on CAWI]
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	G71

SECTION F: EMPLOYMENT STATUS

G71	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	<p>EMPLOYMENT STATUS</p> <p>Now we'd like to ask you some questions about your current work situation.</p> <p>Last week did you have a job, either full or part-time?</p> <p>01 YES</p> <p>02 NO</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Now we'd like to ask you some questions about your current work situation.</p> <p>Last week did you have a job, either full or part-time?</p> <p>01 Yes</p> <p>02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	From 2021 instrument, modified for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q109
<i>NEXT</i>	If G71 = 01: G71A, Else: G71A_NEW

G71A	
ASK	If G71 = 01
CATI	<p>Thinking about just last week, how many hours did you work? If you are unsure, please make your best guess.</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 0 AND 168. IF RESPONDENT DID NOT WORK ANY HOURS LAST WEEK, ENTER 0.)</p> <p>_____ HOURS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Thinking about just last week, how many hours did you work? <i>If you are unsure, please make your best guess.</i></p> <p>_____ Hours (0-168)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-168
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of hours is missing or invalid. Please enter a number between 0 and 168. If you did not work any hours last week, enter 0. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of hours you worked last week.
PAPER QNUM	Q110
NEXT	G71F

G71F	
ASK	If G71 = 01
CATI	<p>How long have you had your current job? If you are unsure, please make your best guess. Would you say...</p> <p>01 Less than 3 months 02 3 months to 6 months 03 More than 6 months to 1 year, or 04 More than 1 year</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How long have you had your current job? <i>If you are unsure, please make your best guess.</i></p> <p>01 Less than 3 months 02 3 months to 6 months 03 More than 6 months to 1 year 04 More than 1 year</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q111
NEXT	G71A_NEW

G71A_NEW	
ASK	ASK ALL
CATI	<p>At any time during the last 12 months, were you self-employed? This may be in addition to your main job.</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>At any time during the last 12 months, were you self-employed? <i>This may be in addition to your main job.</i></p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Dropped skip pattern for this question in 2023 (used to only ask if indicated they had a job last week)
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q118 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	LS_JB

LS_JB	
ASK	ASK ALL
CATI	<p>Now we'd like to ask you about changes to your job situation during the past 12 months.</p> <p>During the past 12 months, did you lose a job? By 'lose a job,' we mean getting fired, let go, or laid off, meaning that you no longer work in that job.</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Now we'd like to ask you about changes to your job situation during the past 12 months.</p> <p>During the past 12 months, did you lose a job? <i>By 'lose a job,' we mean getting fired, let go, or laid off, meaning that you no longer work in that job.</i></p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q120 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	LV_JB

LV_JB	
ASK	ASK ALL
CATI	<p>During the past 12 months, did you choose to leave a job? By 'leave a job,' we mean quitting or voluntarily deciding to no longer work in that job.</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, did you choose to leave a job? By 'leave a job,' we mean quitting or voluntarily deciding to no longer work in that job.</p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q121 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	If LV_JB = 01: f_WHY_LV_JB, Else if (HH = 02 or MDCD = 01) and (G71 = 01 or G71A_NEW = 01): MCD_WRK, Else if G71 = 01: G72, Else if G71 = 02: G76, Else: MRD

f_WHY_LV_JB WHY_LV_JB01 / WHY_LV_JB02 / WHY_LV_JB03 / WHY_LV_JB04 / WHY_LV_JB05 / WHY_LV_JB06 / WHY_LV_JB07	
ASK	If LV_JB = 01
CATI	<p>Why did you choose to leave that job? If you chose to leave more than one job during the past 12 months, please refer to the most recent job you left. For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you choose to leave that job because...) The pay was too low? [WHY_LV_JB01] b. (IF NEEDED: Did you choose to leave that job because...) There were not enough opportunities for advancement? [WHY_LV_JB02] c. (IF NEEDED: Did you choose to leave that job because...) You felt disrespected at work? [WHY_LV_JB03] d. (IF NEEDED: Did you choose to leave that job ...) Because of childcare issues? [WHY_LV_JB04] e. (IF NEEDED: Did you choose to leave that job because...) There was not enough flexibility in work schedule or hours? [WHY_LV_JB05] f. (IF NEEDED: Did you choose to leave that job because...) The benefits, such as health insurance, weren't good? [WHY_LV_JB06] g. (IF NEEDED: Did you choose to leave that job ...) Because of transportation issues? [WHY_LV_JB07]</p>
CAWI	<p>Why did you choose to leave that job? <i>Please select "yes" or no" for each reason. If you chose to leave more than one job during the past 12 months, please refer to the most recent job you left.</i></p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. The pay was too low [WHY_LV_JB01] b. There were not enough opportunities for advancement [WHY_LV_JB02] c. I felt disrespected at work [WHY_LV_JB03] d. Because of childcare issues [WHY_LV_JB04] e. There was not enough flexibility in work schedule or hours [WHY_LV_JB05] f. The benefits, such as health insurance, weren't good [WHY_LV_JB06] g. Because of transportation issues [WHY_LV_JB07]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	

<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q122 Note that the order of this question was moved on the PAPI to help with skip patterns.
<i>NEXT</i>	If (HH = 02 or MDCD = 01) and (G71 = 01 or G71A_NEW = 01): MCD_WRK, Else if G71 = 01: G72, Else if G71 = 02: G76, Else: MRD

MCD_WRK	
<i>ASK</i>	If (HH = 02 or MDCD = 01) and (G71 = 01 or G71A_NEW = 01)
<i>CATI</i>	Does having Medicaid coverage affect your ability to work? Would you say it... 01 Makes it easier 02 Has no effect, or 03 Makes it harder 98 DON'T KNOW 99 PREFER NOT TO SAY
<i>CAWI</i>	Does having Medicaid coverage affect your ability to work? 01 Makes it easier 02 Has no effect 03 Makes it harder 98 Don't know
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q119 Note that the order of this question was moved on the PAPI to help with skip patterns.
<i>NEXT</i>	If MCD_WORK = (01, 03): MCD_WRK_OE, Else if G71 = 01: G72, Else if G71 = 02: G76, Else: MRD

MCD_WRK_OE	
ASK	If MCD_WORK = (01, 03)
CATI	<p>In one sentence, please explain how having Medicaid coverage affects your ability to work.</p> <p>(INTERVIEWER: RECORD RESPONDENT RESPONSE VERBATIM)</p> <p>_____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>In one sentence, please explain how having Medicaid coverage affects your ability to work.</p> <p>_____</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	New for 2023 instrument Character limit: 2,000
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING, DISPLAY: "Missing response. You did not enter a response. To skip the question, please select NEXT a second time."
CATI NOTES	
CAWI NOTES	Short Text: Enter a sentence explaining how Medicaid coverage affects your ability to work.
PAPER QNUM	Not on PAPI
NEXT	If G71 = 01: G72, Else if G71 = 02: G76, Else: MRD

Employer Sponsored Insurance

G72	
ASK	If G71 = 01
CATI	<p>These next few questions ask about employment and health insurance.</p> <p>Does your employer or labor union offer health insurance to any of its employees?</p> <p>(INTERVIEWER: IF R INDICATES THEY ARE SELF-EMPLOYED SELECT "DOES NOT APPLY".)</p> <p>01 YES 02 NO 03 DOES NOT APPLY</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next few questions ask about employment and health insurance.</p> <p>Does your employer or labor union offer health insurance to any of its employees? <i>If you are self-employed, please answer "Does not apply."</i></p> <p>01 Yes 02 No 03 Does not apply</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Skip pattern criteria changed in 2023, no longer conditional on insurance type (used to only ask if respondent has ESI through someone else's current work – too convoluted for PAPI)
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q112 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	If G72 = 01 and B4AA != (01, 03): G72B, Else: MRD

G72B	
ASK	If G72 = 01 and B4AA != (01, 03)
CATI	<p>Are you currently eligible to participate in your employer or union health insurance?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you currently eligible to participate in your employer or union health insurance?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	If B4AA = (01, 03) then autocode G72B = 01
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	<p>Q113 Note that the order of this question was moved on the PAPI to help with skip patterns. Note that this ask logic is not possible to include on the PAPI.</p>
NEXT	If G72B = 01 and (B4A = 02 or (B4A = 01 and B4AA = 02)): f_G72c, Else: MRD

f_G72c G72c_1 / G72c_2 / G72c_3	
ASK	If G72B = 01 and (B4A = 02 or (B4A = 01 and B4AA = 02))
CATI	<p>Please tell me whether each of the following was a reason you are not participating in your employer or labor union health insurance.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Was the reason for you not participating in your employer or labor union health insurance because...) It costs too much? [G72c_1] b. (IF NEEDED: Was the reason for you not participating in your employer or labor union health insurance because...) You have other insurance? [G72c_2] c. (IF NEEDED: Was the reason for you not participating in your employer or labor union health insurance because...) You do not need it? [G72c_3]</p>
CAWI	<p>Please tell us whether each of the following was a reason you are not participating in your employer or labor union health insurance.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. It costs too much. [G72c_1] b. I have other insurance. [G72c_2] c. I do not need it. [G72c_3]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	2023 skip pattern slightly changed, no longer exclude if ESI is through current work (don't have that info anymore)
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	Custom error message to be developed in accessibility testing.
PAPER QNUM	Q114 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	MRD

Not Working

G76	
ASK	If G71 = 02
CATI	<p>During the past 30 days, did you look for work?</p> <p>01 YES</p> <p>02 NO</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 30 days, did you look for work?</p> <p>01 Yes</p> <p>02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q115 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	f_NTWK_RS

f_NTWK_RS NTWK_RS_1 / NTWK_RS_2 / NTWK_RS_3 / NTWK_RS_4 / NTWK_RS_5 / NTWK_RS_6 / NTWK_RS_7 / NTWK_RS_OTH	
ASK	If G71 = 02
CATI	<p>People are not working for various reasons. For each statement I read, please tell me yes or no if it is a reason why you are not working.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Are you not working because...) You are retired? [NTWK_RS_1] b. (IF NEEDED: Are you not working because...) You are caring for a child/adult family member? [NTWK_RS_2] c. (IF NEEDED: Are you not working because...) You have at least one physical or mental health limitation? [NTWK_RS_3] d. (IF NEEDED: Are you not working because...) You are in a job training program or in school? [NTWK_RS_4] e. (IF NEEDED: Are you not working because...) You could not find work? [NTWK_RS_5] f. (IF NEEDED: Are you not working because...) You do not have reliable transportation? [NTWK_RS_6] g. (IF NEEDED: Are you not working because of...) Some other reason? [NRWK_RS_7] _____ (IF NEEDED: Please tell me the other reason.) [NTWK_RS_OTH]</p>

CAWI	<p>People are not working for various reasons. Why were you not working last week? <i>Please select “yes” or “no” for each reason.</i></p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I am retired [NTWK_RS_1] b. I am caring for a child/adult family member [NTWK_RS_2] c. I have at least one physical or mental health limitation [NTWK_RS_3] d. I am in a job training program or in school [NTWK_RS_4] e. I could not find work [NTWK_RS_5] f. I do not have reliable transportation [NTWK_RS_6] g. Some other reason (Please specify) [NTWK_RS_7] _____ [NTWK_RS_OTH]</p>
QUESTION TYPE	NTWK_RS_1-NTWK_RS_7: Radio button grid NTWK_RS_OTH: Text entry
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change (G77 series); used to randomize answer option order for and added 06 and 07; also changed question wording structure to collapse into a single list, will likely impact trending. If NTWK_RS_7 =01, display NTWK_RS_OTH
HARD CHECK	
SOFT CHECK	If CAWI and Missing, Display: “Missing Response: You did not select a response. Please select at least one response. To skip the question, please press NEXT a second time.”
CATI NOTES	
CAWI NOTES	Accessibility label for “other, specify” field should read “Please specify the other reason you were not working last week” Short Text: Select yes or no for each reason you did not work last week.
PAPER QNUM	Q116 Note that the order of this question was moved on the PAPI to help with skip patterns.
NEXT	If (HH = 02 or MDCD = 01) and G71 = 02: MCD_LK_WRK, Else: MRD

MCD_LKWRK	
<i>ASK</i>	If (HH = 02 or MDCD = 01) and G71 = 02
<i>CATI</i>	<p>Does having Medicaid coverage affect your ability to look for work? Would you say it...</p> <p>01 Makes it easier 02 Has no effect, or 03 Makes it harder</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Does having Medicaid coverage affect your ability to look for work?</p> <p>01 Makes it easier 02 Has no effect 03 Makes it harder 98 Don't know</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	New for 2023 instrument
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Short Text: Enter a sentence explaining how Medicaid coverage affects your ability to work.
<i>PAPER QNUM</i>	Q117 Note that the order of this question was moved on the PAPI to help with skip patterns.
<i>NEXT</i>	If MCD_LK_WORK = (01, 03): MCD_LK_WRK_OE, Else: MRD

MCD_LKWRK_OE	
ASK	If MCD_LK_WORK = (01, 03)
CATI	<p>In one sentence, please explain how having Medicaid coverage affects your ability to look for work.</p> <p>INTERVIEWER: RECORD RESPONDENTS RESPONSE VERBATIM</p> <p>_____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>In one sentence, please explain how having Medicaid coverage affects your ability to look for work.</p> <p>_____</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	New for 2023 instrument Character limit: 2,000
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING, DISPLAY: "Missing response. You did not enter a response. To skip the question, please select NEXT a second time."
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on the PAPI
NEXT	MRD

SECTION G: ADULT DEMOGRAPHICS AND FAMILY INCOME

MRD	
ASK	ASK ALL
CATI	<p>DEMOGRAPHICS</p> <p>The next few questions are for general classification purposes.</p> <p>What is your current marital status? Would you say...</p> <p>01 Married 02 Widowed 03 Divorced 04 Separated, or 05 Have you never been married?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next few questions are for general classification purposes.</p> <p>What is your current marital status?</p> <p>01 I am married 02 I am widowed 03 I am divorced 04 I am separated 05 I have never been married</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change and slight answer options changed in 2023 (dropped "not married but living with partner").
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q125 Note that the marital status and education questions are flipped on PAPI to help with spacing.
NEXT	EDUC

EDUC	
ASK	ASK ALL
CATI	<p>What is the highest level of school you have completed or the highest degree received?</p> <p>(INTERVIEWER: READ ANSWER OPTIONS ONLY IF ABSOLUTELY NECESSARY)</p> <p>01 LESS THAN 8TH GRADE, 02 SOME HIGH SCHOOL, BUT NO DIPLOMA, 03 GED, 04 HIGH SCHOOL OR VOCATIONAL/TRADE SCHOOL GRADUATE, 05 SOME COLLEGE, BUT NO DEGREE, 06 ASSOCIATE DEGREE, THAT IS, A 1 TO 2 YEAR OCCUPATIONAL, TECHNICAL OR ACADEMIC PROGRAM, 07 FOUR-YEAR COLLEGE GRADUATE OR BACHELOR'S DEGREE, OR 08 ADVANCED DEGREE INCLUDING MASTER'S, PROFESSIONAL DEGREE, OR DOCTORATE</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is the highest level of school you have completed or the highest degree received?</p> <p>01 Less than 8th grade 02 Some high school, but no diploma 03 GED 04 High school or vocational/trade school graduate 05 Some college, but no degree 06 Associate degree (1-2 year occupational, technical or academic program) 07 Four-year college graduate/bachelor's degree 08 Advanced degree (including master's, professional degree, or doctorate)</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change and answer options changed in 2023 (GED as separate category).
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q124 Note that the marital status and education questions are flipped on PAPI to help with spacing.
NEXT	H78

H78	
ASK	ASK ALL
CATI	<p>Have you ever served in the United States Armed Forces?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Have you ever served in the United States Armed Forces?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q126
NEXT	If H78 = 01: ML_NOW, Else: S16

ML_NOW	
ASK	If H78 = 01
CATI	<p>Are you currently serving in the United States Armed Forces?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are you currently serving in the United States Armed Forces?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q127
NEXT	S16

S16	
ASK	ASK ALL
CATI	<p>Are you of Hispanic, Latino, or Spanish origin?</p> <p>01 YES</p> <p>02 NO</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>Are you of Hispanic, Latino, or Spanish origin?</p> <p>01 Yes</p> <p>02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q128
NEXT	f_S17

f_S17	
S17_1 / S17_2 / S17_3 / S17_4 / S17_5 / S17_6 / S17_97	
ASK	ASK ALL
CATI	<p>Which one or more of the following would you say is your race? Are you White, Black or African American, Asian, Native American, American Indian, or Alaskan Native, Native Hawaiian or Pacific Islander, Hispanic, Latino, or Spanish, or some other race I have not mentioned? Please choose all that apply.</p> <p>INTERVIEWER: CODE ALL THAT APPLY</p> <p>01 WHITE [S17_1] 02 BLACK OR AFRICAN AMERICAN [S17_2] 03 ASIAN [S17_3] 04 NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE [S17_4] 05 NATIVE HAWAIIAN OR PACIFIC ISLANDER [S17_5] 06 HISPANIC, LATINO, SPANISH [S17_6] 07 OTHER [S17_97]</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Which one or more of the following would you say is your race? <i>Select all that apply.</i></p> <p>01 White [S17_1] 02 Black or African American [S17_2] 03 Asian [S17_3] 04 Native American, American Indian, or Alaskan Native [S17_4] 05 Native Hawaiian or Pacific Islander [S17_5] 06 Hispanic, Latino, Spanish [S17_6] 07 Other [S17_97]</p>
QUESTION TYPE	Checkbox
FILLS	
NOTES	Code each variable as 01 if checked, 02 if not checked.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q129
NEXT	D30A_VALUE

Weight and Height

D30A_VALUE	
ASK	ASK ALL
CATI	<p>WEIGHT AND HEIGHT</p> <p>{D30AFILL}</p> <p>(INTERVIEWER: ENTER WEIGHT IN POUNDS)</p> <p>_____ POUNDS</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>{D30AFILL}</p> <p>_____ Pounds (1-700)</p>
QUESTION TYPE	Numeric
FILLS	<p>If E65A = 01, D30AFILL = "Just before your current pregnancy, about how much did you weigh without shoes?"</p> <p>Else, D30AFILL = "About how much do you weigh without shoes?"</p>
NOTES	<p>Range: 1-700</p> <p>Answer layout – boxes for 3-digit number</p>
HARD CHECK	
SOFT CHECK	<p>IF CAWI OUTSIDE OF RANGE OR MISSING, DISPLAY: "Weight, in pounds, is missing or invalid. Please enter a number between 1 and 700. To skip this question, please delete all characters in the text box and select NEXT."</p>
CATI NOTES	
CAWI NOTES	Short Text: Enter your weight in pounds.
PAPER QNUM	<p>Note that PAPI wording will be different:</p> <p>About how much do you weigh without shoes? <i>If you are currently pregnant, please provide your weight prior to your pregnancy.</i></p> <p>Q130</p>
NEXT	f_D30B

f_D30B	
D30B_F / D30B_I	
ASK	ASK ALL
CATI	<p>About how tall are you without shoes?</p> <p>____ Feet [D30B_F] ____ Inches [D30B_I]</p> <p>98 DON'T KNOW 98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY 99 PREFER NOT TO SAY</p>
CAWI	<p>About how tall are you without shoes?</p> <p>____ Feet [D30B_F] (1-8) ____ Inches [D30B_I] (0-11)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	<p>D30B_F Answer layout – 1-digit box D30B_I Answer layout – 2-digit box</p> <p>D30B_F Range: 1-8 D30B_I Range: 0-11</p>
HARD CHECK	
SOFT CHECK	<p>IF CAWI AND D30B_F OUTSIDE OF RANGE OR MISSING, DISPLAY THE MESSAGE OF: "Please enter a number between 1 and 8." IF CAWI AND D30B_I OUTSIDE OF RANGE OR MISSING, DISPLAY THE MESSAGE OF: "Please enter a number between 0 and 11."</p>
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q131
NEXT	<p>If S11 = MISSING or S13B = MISSING: H84_NEW, Else, if (S11 = 1 and S13B = 0): H84_A1_extra Else: H84_A1</p>

Family Income

H84_NEW	
ASK	If S11 = MISSING or S13B = MISSING
CATI	<p>How many family members, including yourself, live in your household? As a reminder, for this project family means two or more persons living together who are related by birth, marriage, partnership, adoption, or legal guardianship.</p> <p>INTERVIEWER: ENTER A NUMBER BETWEEN 1 AND 20. ENTER 20 IF THE NUMBER IS GREATER THAN 20.</p> <p>_____ FAMILY MEMBERS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many family members, including yourself, live in your household? <i>Family means two or more persons living together who are related by birth, marriage, partnership, adoption, or legal guardianship.</i></p> <p>_____ Family Members</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 1-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY THE SOFT CHECK MESSAGE OF: "Number of family members in your household is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your family who live in this household, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of family members who live in your household.
PAPER QNUM	Not on PAPI
NEXT	If (S11 = 1 and S13B = 0) or (H84_NEW = 1): H84_A1_extra Else: H84_A1

H84_A1	
ASK	If !((S11 = 1 and S13B = 0) or (H84_NEW = 1))
CATI	<p>The next few questions ask about your income so that the survey sponsors can find out how income relates to health insurance coverage and access to health care.</p> <p>Total income includes money from jobs, business, farm, pensions, investments, social security payments and other income received before taxes or other deductions. {FILLH84} are supported by the family's total income?</p> <p>(INTERVIEWER: ENTER A NUMBER BETWEEN 1 AND 20. ENTER 20 IF THE NUMBER IS GREATER THAN 20.)</p> <p>_____ FAMILY MEMBERS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next few questions ask about your income so that the survey sponsors can find out how income relates to health insurance coverage and access to health care.</p> <p>Total income includes money from jobs, business, farm, pensions, investments, social security payments and other income received before taxes or other deductions. Earlier you said there were {SUMHH} family members, including yourself, living in your household. How many of these family members are supported by the family's total income?</p> <p>_____ Family Members</p>
QUESTION TYPE	Numeric
FILLS	<p>If S11 != MISSING: TOT_ADFAM = S11 Else if H84_NEW != MISSING: TOT_ADFAM = H84_NEW Else: TOT_ADFAM = 1</p> <p>If S13B = MISSING: SUMHH = TOT_ADFAM Else: SUMHH = TOT_ADFAM + S13B</p> <p>If S11 = MISSING and H84_NEW = MISSING and S13B = MISSING: FILLH84= "How many family members, including yourself," Else: FILLH84 = "Earlier you said there were {SUMHH} family members, including yourself, living in your household. How many of these family members"</p>
NOTES	<p>Range: 1-20 IF (S11 = 1 and S13B = 0) or (H84_NEW = 1) THEN AUTOCODE H84_A1 = 1</p>
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY THE SOFT CHECK MESSAGE OF: "Number of family members in your household who are supported by the family's total income is missing or invalid. Please enter a number between 1 and 20. Include yourself when counting. If there are more than 20 adults in your household who are supported by the family's total income, please enter 20. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	

<i>CAWI NOTES</i>	Short Text: Enter the number of family members who live in your household.
<i>PAPER QNUM</i>	Note that the question wording on PAPI will be different: How many family members, including yourself, are supported by the family's total income? <i>Please include yourself. Total income includes money from jobs, business, farm, pensions, investments, social security payments and other income received before taxes or other deductions.</i> Q132
<i>NEXT</i>	H84_A1_extra

H84_A1_extra	
<i>ASK</i>	ASK ALL
<i>CATI</i>	Are there any other family members who do not live in your home who are also supported by the family's total income? 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY
<i>CAWI</i>	Are there any other family members who do not live in your home who are also supported by the family's total income? 01 Yes 02 No
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q133
<i>NEXT</i>	If H84_A1_extra = 01: H84_A1_NUM, Else: H84_A2

H84_A1_NUM	
ASK	If H84_A1_extra = 01
CATI	<p>How many other family members who do not live in your home are also supported by the family's total income?</p> <p>_____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How many other family members who do not live in your home are also supported by the family's total income?</p> <p>_____ Other Family Members</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 1-20
HARD CHECK	
SOFT CHECK	IF CAWI AND OUTSIDE OF RANGE, DISPLAY THE SOFT CHECK MESSAGE OF: "Number of other family members who do not live in your household but are supported by your income is missing or invalid. Please enter a number between 1 and 20. If there are more than 20 other family members who do not live in your household but are supported by your income, please enter 20. To skip this question, please delete all characters in the text box and select NEXT"
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of other family members who are supported by your income but do not live with you.
PAPER QNUM	Q134
NEXT	H84_A2

H84_A2	
ASK	ASK ALL
CATI	<p>What is your best estimate of {H84FILL} income last month before taxes and other deductions? Please include family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.</p> <p>(INTERVIEWER: IF THE RESPONDENT DID NOT HAVE ANY INCOME LAST MONTH, ENTER 0.)</p> <p>_____ DOLLARS</p> <p>99998 DON'T KNOW 99999 PREFER NOT TO SAY</p>
CAWI	<p>What is your best estimate of {H84FILL} income last month before taxes and other deductions? <i>This includes family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.</i></p> <p>_____ Dollars</p>
QUESTION TYPE	Numeric
FILLS	If H84_A1 = 1 & H84_A1_NUM = (1, MISSING), H84FILL = "your" Else: H84FILL = "you and your family members"
NOTES	Range: 0-84,000 Do not allow decimals.
HARD CHECK	
SOFT CHECK	IF CAWI OUTSIDE OF RANGE OR MISSING, DISPLAY THE SOFT-CHECK MESSAGE OF: "Monthly income is missing or invalid. Please enter a number between 0 and 84,000. If you did not have any income last month, enter 0. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter your best estimate of your income last month before taxes and other deductions.
PAPER QNUM	Q135
NEXT	If H84_A2 = MISSING: H84_A2CATS, Else: H84_A3

H84_A2CATS	
ASK	If H84_A2 = MISSING
CATI	<p>I want to reassure you that your best guess is fine and that responses will be kept strictly confidential. The survey asks about income to help researchers understand how income groups differ in health insurance coverage and access to health care.</p> <p>Approximately, what was {H84FILL} total gross income last month before taxes and other deductions? Would you say...</p> <p>INTERVIEWER: READ EACH RESPONSE OPTION BELOW PAUSING BRIEFLY BETWEEN EACH. YOU DO NOT NEED TO READ ALL OPTIONS IF RESPONDENT ANSWERS AFIRMATIVELY.</p> <p>01 1,500 or less 02 1,501-2,100 03 2,101-2,600 04 2,601-3,200 05 3,201-3,700 06 3,701-4,300 07 4,301-4,800 08 4,801-5,400, or 09 5,401 or more</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>We want to reassure you that your best guess is fine and that responses will be kept strictly confidential. The survey asks about income to help researchers understand how income groups differ in health insurance coverage and access to health care.</p> <p>Approximately, what was {H84FILL} total gross income last month before taxes and other deductions?</p> <p>01 1,500 or less 02 1,501-2,100 03 2,101-2,600 04 2,601-3,200 05 3,201-3,700 06 3,701-4,300 07 4,301-4,800 08 4,801-5,400 09 5,401 or more</p>
QUESTION TYPE	Radio button
FILLS	If H84_A1 = 1 & H84_A1_NUM = (1, MISSING), H84FILL = "your" Else: H84FILL = "you and your family members"
NOTES	
HARD CHECK	
SOFT CHECK	

<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	H84_A3

H84_A3	
<i>ASK</i>	ASK ALL
<i>CATI</i>	<p>What is your best estimate of {H84FILL} total 2022 annual income before taxes and deductions? Please include family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.</p> <p>(INTERVIEWER: IF THE RESPONDENT DID NOT HAVE ANY INCOME LAST YEAR, ENTER 0.)</p> <p>_____ DOLLARS</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>What is your best estimate of {H84FILL} total 2022 annual income before taxes and deductions? <i>This includes family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.</i></p> <p>_____ Dollars</p>
<i>QUESTION TYPE</i>	Numeric
<i>FILLS</i>	If H84_A1 = 1 & H84_A1_NUM = (0, MISSING), H84FILL = " your " Else: H84FILL = " you and your family members "
<i>NOTES</i>	Range: 0-999,996
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	IF CAWI AND OUTSIDE OF RANGE OR MISSING, DISPLAY: "Total 2022 income is missing or invalid. Please enter a number between 0 and 999,996. If you did not have any income last year, enter 0. To skip this question, please delete all characters in the text box and select NEXT."
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Short Text: Enter your best estimate of your total 2022 annual income before taxes and deductions.
<i>PAPER QNUM</i>	Q136
<i>NEXT</i>	If H84_A3 = MISSING: H84_A3CATS, Else if HH = 01 AND (S12 > 0 AND S12 <= 20): PREPI90, Else: INCENT

H84_A3CATS	
ASK	If H84_A3 = MISSING
CATI	<p>I want to reassure you that your best guess is fine and that responses will be kept strictly confidential. The survey asks about income to help researchers understand how income groups differ in health insurance coverage and access to health care.</p> <p>Approximately, what was {H84FILL} total 2022 annual income before taxes and other deductions?</p> <p>INTERVIEWER: READ EACH RESPONSE OPTION BELOW PAUSING BRIEFLY BETWEEN EACH. YOU DO NOT NEED TO READ ALL OPTIONS IF RESPONDENT ANSWERS AFIRMATIVELY.</p> <p>01 14,000 or less 02 14,001-18,000 03 18,001-23,000 04 23,001-28,000 05 28,001-32,000 06 32,001-37,000 07 37,001-42,000 08 42,001-47,000 09 47,001 or more</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>We want to reassure you that your best guess is fine and that responses will be kept strictly confidential. The survey asks about income to help researchers understand how income groups differ in health insurance coverage and access to health care.</p> <p>Approximately, what was {H84FILL} total 2022 annual income before taxes and other deductions?</p> <p>01 14,000 or less 02 14,001-18,000 03 18,001-23,000 04 23,001-28,000 05 28,001-32,000 06 32,001-37,000 07 37,001-42,000 08 42,001-47,000 09 47,001 or more</p>
QUESTION TYPE	Radio button
FILLS	If H84_A1 = 1 & H84_A1_NUM = (0, MISSING), H84FILL = "your" Else: H84FILL = "you and your family members"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	

<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Not on PAPI
<i>NEXT</i>	Else if HH = 01 AND (S12 > 0 AND S12 <= 20): PREPI90, Else: INCENT

SECTION I: CHILD SCREENING QUESTIONS

PREPI90	
ASK	If HH = 01 AND (S12 > 0 AND S12 <= 20)
CATI	<p>YOUR CHILD</p> <p>Thank you for answering these questions about your own health.</p> <p>These next questions focus on the health insurance coverage and health status of one child in your home. You will receive an additional \${INCENTIVE2} for participating in this portion of the survey.</p> <p>01 CONTINUE THE SURVEY</p>
CAWI	<p>Thank you for answering these questions about your own health.</p> <p>These next questions focus on the health insurance coverage and health status of one child in your home. You will receive an additional \${INCENTIVE2} for participating in this portion of the survey.</p> <p>01 Continue the Survey</p>
QUESTION TYPE	Informational
FILLS	INCENTIVE2 = 5
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Child sections not on PAPI
NEXT	f_PI90

f_PI90 PI90 / PI90_DK	
ASK	If HH = 01 AND S12 > 0
CATI	{PI90FILL} What is that child's first name, nickname, or initials? (FIRST NAME OR INITIALS OF CHILD:) _____ 98 DON'T KNOW 99 PREFER NOT TO SAY
CAWI	{PI90FILL} What is that child's first name, nickname, or initials? FIRST NAME OR INITIALS OF CHILD: _____ 98 I'm not sure which child had the most recent birthday [PI90_DK]
QUESTION TYPE	PI90: Text entry PI90_DK: Radio button
FILLS	If S12_RE = 01 or S12 = 01, PI90FILL = "Earlier you said there is one child in your home." Else, PI90FILL = "We would now like to identify the child in your home, age 18 or younger , who had the most recent birthday."
NOTES	Character limit: 30 characters CAWI: Display PI90_DK if S12 = (2-20)
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING: "Missing response: You did not enter your child's name or initials. Please enter your child's first name or initials. To skip the question, please select NEXT a second time."
CATI NOTES	
CAWI NOTES	Short Text: Enter your child's first name, nickname, or initials.
PAPER QNUM	
NEXT	If PI90_DK = 98 and S12 = (02-20): PI90S, Else: CH_INFORM_1

PI90S	
ASK	If PI90_DK = 98 and S12 = (02-20)
CATI	<p>That's okay. The next questions will focus on the health insurance coverage and health status of the youngest child in your home.</p> <p>What is the first name, nickname, or initials of the youngest child in your home?</p> <p>FIRST NAME OR INITIALS OF CHILD: _____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>That's okay. The next questions will focus on the health insurance coverage and health status of the youngest child in your home.</p> <p>What is the first name, nickname, or initials of the youngest child in your home?</p> <p>FIRST NAME OR INITIALS OF CHILD: _____</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	<p>Character limit: 30 characters</p> <p>Create {CH_NAME}: If PI90 = missing and PI90S = missing: CH_NAME = "the child", Else if PI90 != missing, CH_NAME = PI90, Else: CH_NAME = PI90S</p>
HARD CHECK	
SOFT CHECK	IF CAWI AND MISSING: "Missing response: You did not enter your child's name or initials. Please enter your child's first name or initials. To skip the question, please select NEXT a second time."
CATI NOTES	
CAWI NOTES	Short Text: Enter your youngest child's first name, nickname, or initials.
PAPER QNUM	
NEXT	CH_INFORM_1

CH_INFORM_1	
<i>ASK</i>	If HH = 01 AND S12 > 0
<i>CATI</i>	<p>All remaining questions will be about {CH_NAME}.</p> <p>Your participation is voluntary, you do not have to answer any question you do not want to, and your responses to questions will be kept confidential.</p> <p>01 CONTINUE THE SURVEY</p>
<i>CAWI</i>	<p>All remaining questions will be about {CH_NAME}.</p> <p>Your participation is voluntary, you do not have to answer any question you do not want to, and your responses to questions will be kept confidential.</p> <p>01 Continue the survey</p>
<i>QUESTION TYPE</i>	Informational
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	I90A

I90A	
ASK	If HH = 01 AND S12 > 0
CATI	<p>How old was {CH_NAME} on their last birthday?</p> <p>(INTERVIEWER: IF THEY GIVE AN AGE UNDER 1, ENTER 0.)</p> <p>_____ YEARS OLD</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How old was {CH_NAME} on their last birthday? If your child is less than 1 year old, enter '0'.</p> <p>_____ years old (0-25)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 0-25
HARD CHECK	REQUIRED QUESTION, IF MISSING: "Age of child is missing or invalid. Please enter a number between 0 and 25."
SOFT CHECK	
CATI NOTES	
CAWI NOTES	Short Text: Enter the age of {CH_NAME} on their last birthday.
PAPER QNUM	
NEXT	If I90A > 18 or I90A = missing: NOCHILD Else: I90B

NOCHILD	
ASK	If I90A > 18
CATI	<p>I'm sorry but the child interview is targeted at children 18 years old or younger. We are not able to do the child interview with you.</p> <p>(INTERVIEWER NOTE: DO NOT PAY ADDITIONAL \${INCENTIVE2} INCENTIVE)</p> <p>1 CONTINUE</p>
CAWI	<p>I'm sorry but the child interview is targeted at children 18 years old or younger. We are not able to do the child interview with you and you are not eligible for the additional \${INCENTIVE2} incentive.</p> <p>1 Continue</p>
QUESTION TYPE	Informational
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	INCENT

I90B	
ASK	If HH = 01 AND S12 > 0
CATI	<p>What is your relationship to {CH_NAME}?</p> <p>(INTERVIEWER: SELECT THE RESPONSE THAT COMPLETES THIS SENTENCE: THE RESPONDENT IS {CH_NAME}'S _____.)</p> <p>01 PARENT 02 STEPPARENT 03 GRANDPARENT 04 AUNT OR UNCLE 05 BROTHER OR SISTER 06 OTHER RELATIVE 07 LEGAL GUARDIAN 08 FOSTER PARENT 09 OTHER NON-RELATIVE</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is your relationship to {CH_NAME}?</p> <p>01 I am {CH_NAME}'s parent 02 I am {CH_NAME}'s stepparent 03 I am {CH_NAME}'s grandparent 04 I am {CH_NAME}'s aunt or uncle 05 I am {CH_NAME}'s brother or sister 06 I am {CH_NAME}'s other relative 07 I am {CH_NAME}'s legal guardian 08 I am {CH_NAME}'s foster parent 09 I am {CH_NAME}'s other non-relative</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	If reach this page, create: CHILD_INCENT = 1
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	f_P148

f_P148 P148 / P148_1	
ASK	If HH = 01 AND S12 > 0
CATI	<p>What is {CH_NAME}'s gender? Would you say...</p> <p>01 Male, 02 Female, or 97 Do they use a different term?</p> <p>(INTERVIEWER: IF NEEDED: What other term do they use?) _____ [P148_1]</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is {CH_NAME}'s gender?</p> <p>01 Male 02 Female 97 They use a different term (Please specify)</p> <p>_____ [P149_1]</p>
QUESTION TYPE	P148: Radio button P148_1: Text entry
FILLS	
NOTES	<p>P148_1: 100 character max If P148=97 (They use a different term is selected), display P148_1 open-ended box.</p> <p>If P148 = 97 and P148_1 is MISSING, soft prompt must NOT be engaged when someone selects Something else but does not put any text in the field. (We determined this was NOT possible to do with OMTE)</p>
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	I95

SECTION J: CHILD INSURED

I95	
ASK	If HH = 01 AND S12 > 0
CATI	<p>CURRENT INSURANCE</p> <p>These next few questions ask about some general information related to {CH_NAME}'s health insurance coverage.</p> <p>Is {CH_NAME} covered by any health insurance?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next few questions ask about some general information related to {CH_NAME}'s health insurance coverage.</p> <p>Is {CH_NAME} covered by any health insurance?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If A1 = 01 and I95 = 01: J96, Else if I95 = 01: J100A, Else if I95 = 02: K96_new, Else: L125

Insurance Type

J96	
<i>ASK</i>	If A1 = 01 and I95 = 01
<i>CATI</i>	<p>Is {CH_NAME}'s health insurance the same as your health insurance?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Is {CH_NAME}'s health insurance the same as your health insurance?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	If J96 = (02, MISSING): J100A, Else: N067

J100A	
ASK	If J96 = (02, MISSING) or (A1!=01 & I95=01)
CATI	<p>Is {CH_NAME} currently covered by health insurance through someone's current or former employer or labor union?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} currently covered by health insurance through someone's current or former employer or labor union?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If J100A = 01: ESI_CH_LNG, Else: MD CD_CH

ESI_CH_LNG	
ASK	If J100A = 01
CATI	<p>How long has {CH_NAME} been covered by their current health insurance through someone's current or former employer or labor union? Would you say...</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years, or 04 More than 2 years</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How long has {CH_NAME} been covered by their current health insurance through someone's current or former employer or labor union?</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	MDCD_CH

MDCD_CH	
ASK	If J96 = (02, MISSING) or (A1!=01 & I95=01)
CATI	<p>Is {CH_NAME} currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change (J100C) because of update in description of Medicaid.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If MDCD_CH = 01: MDCD_CH_LNG Else: EXCHNG_CH

MDCD_CH_LNG	
ASK	If MDCD_CH = 01
CATI	<p>How long has {CH_NAME} been covered by Medicaid? Would you say...</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How long has {CH_NAME} been covered by Medicaid?</p> <p>01 Less than 3 months 02 3 months to 1 year 03 1-2 years 04 More than 2 years</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	<p>From 2021 instrument, modified for 2023 instrument</p> <p>Display response option 03 if I90A>1</p> <p>Display response option 04 if I90A>2</p>
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	EXCHNG_CH

EXCHNG_CH	
ASK	If J96 = (02, MISSING) or (A1!=01 & I95=01)
CATI	<p>Is {CH_NAME} currently covered by health insurance from healthcare.gov, sometimes called the health insurance “exchange” or marketplace?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} currently covered by health insurance from healthcare.gov (sometimes called the health insurance “exchange” or marketplace)?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change because of update in description of the exchange.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	J100E

J100E	
ASK	If J96 = (02, MISSING) or (A1!=01 & I95=01)
CATI	<p>Is {CH_NAME} currently covered by health insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} currently covered by health insurance purchased directly, and that is not related to a job or healthcare.gov?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	J100G

J100G	
ASK	If J96 = (02, MISSING) or (A1!=01 & I95=01)
CATI	<p>Is {CH_NAME} currently covered by any other type of health insurance you have not already mentioned?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} currently covered by any other type of health insurance you have not mentioned previously?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	CATI says "already mentioned"
CAWI NOTES	CAWI says "mentioned previously"
PAPER QNUM	
NEXT	N067

N067	
ASK	If I95 = 01
CATI	<p>Does {CH_NAME} currently have any type of insurance that covers dental bills?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Does {CH_NAME} currently have any type of insurance that covers dental bills?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If MDCD_CH_LNG = (01, 02) and I95 = 01: MD_CH_PRV, Else: L125

Previous Coverage (Medicaid)

MD_CH_PRV	
ASK	If MDCD_CH_LNG = (01, 02) and I95 = 01
CATI	<p>COVERAGE BEFORE MEDICAID</p> <p>During the past 12 months, but before {CH_NAME} was covered by Medicaid, were they covered by other insurance?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, but before {CH_NAME} was covered by Medicaid, were they covered by other insurance?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Variable name change (J116b) because skip pattern has changed, denominator is smaller (2023 only ask to current Medicaid, used to ask to everyone).
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If MD_CH_PRV = 01: MD_CH_PRV_ESI, Else: L125

MD_CH_PRVESI	
ASK	If MD_CH_PRV = 01
CATI	<p>Was that prior insurance obtained through someone's employment or labor union?</p> <p>01 YES</p> <p>02 NO</p> <p>98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY</p>
CAWI	<p>Was that prior insurance obtained through someone's employment or labor union?</p> <p>01 Yes</p> <p>02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Variable name change (J117B) because skip pattern changed for MD_CH_PRV (2023 limit to Medicaid)
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	L125

SECTION K: CHILD UNINSURED

K96_new	
ASK	If I95 = 02
CATI	<p>CURRENTLY UNINSURED</p> <p>When was {CH_NAME} last covered by any type of health insurance? Would you say...</p> <p>01 Less than 3 months ago 02 3 months to 1 year ago 03 1 to 2 years ago 04 2 to 3 years ago 05 More than 3 years ago, or 06 {CH_NAME} never had health insurance</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>When was {CH_NAME} last covered by any type of health insurance?</p> <p>01 Less than 3 months ago 02 3 months to 1 year ago 03 1 to 2 years ago 04 2 to 3 years ago 05 More than 3 years ago 06 {CH_NAME} never had health insurance</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	<p>From 2021 instrument, modified for 2023 instrument. Response options were reordered and slightly changed in 2023.</p> <p>Display response option 03 IF I90A > 1 Display response option 04 IF I90A > 2 Display response option 05 IF I90A > 3</p>
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	L125

SECTION L: CHILD HEALTH STATUS

General Health

L125	
ASK	If HH = 01 AND S12 > 0
CATI	<p>GENERAL HEALTH</p> <p>These next questions ask about {CH_NAME}'s health.</p> <p>In general, would you say {CH_NAME}'s health is excellent, very good, good, fair, or poor?</p> <p>01 EXCELLENT 02 VERY GOOD 03 GOOD 04 FAIR 05 POOR</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next questions ask about {CH_NAME}'s health.</p> <p>In general, would you say {CH_NAME}'s health is excellent, very good, good, fair, or poor?</p> <p>01 Excellent 02 Very Good 03 Good 04 Fair 05 Poor</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	L125a

L125a	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Thinking about {CH_NAME}'s teeth and gums, would you say {CH_NAME}'s dental health is excellent, very good, good, fair, or poor?</p> <p>01 EXCELLENT 02 VERY GOOD 03 GOOD 04 FAIR 05 POOR</p> <p>98 DON'T NOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Thinking about {CH_NAME}'s teeth and gums, would you say {CH_NAME}'s dental health is excellent, very good, good, fair, or poor?</p> <p>01 Excellent 02 Very Good 03 Good 04 Fair 05 Poor</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If I90A >= 1: CDC_1_CH, Else: N136

CDC_1_CH	
ASK	If I90A >= 1
CATI	<p>The next questions are about any kind of health problems, concerns, or conditions that may affect {CH_NAME}'s behavior, learning, growth, or physical development.</p> <p>Is {CH_NAME} deaf or do they have serious difficulty hearing?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions are about any kind of health problems, concerns, or conditions that may affect {CH_NAME}'s behavior, learning, growth, or physical development.</p> <p>Is {CH_NAME} deaf or do they have serious difficulty hearing?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	CDC_2_CH

CDC_2_CH	
ASK	If I90A >= 1
CATI	<p>Is {CH_NAME} blind or do they have serious difficulty seeing, even when wearing glasses?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Is {CH_NAME} blind or do they have serious difficulty seeing, even when wearing glasses?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	LAS12

LAS12	
ASK	If I90A >= 1
CATI	<p>Compared to other {I90AFILL}-year-old children, would you say {CH_NAME} experiences any difficulty speaking, communicating, or being understood?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Compared to other {I90AFILL}-year-old children, would you say {CH_NAME} experiences any difficulty speaking, communicating, or being understood?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	I90AFILL = response to I90A
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	CHILD_DD

CHILD_DD	
ASK	If I90A >= 1
CATI	<p>Does {CH_NAME} have a developmental disability?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Does {CH_NAME} have a developmental disability?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Renamed variable (L126H_2) for ease of analysis
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	DIS12_MED

DIS12_MED	
ASK	If I90A >= 1
CATI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} currently need or use medicine prescribed by a doctor or other health care professional, other than vitamins?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} currently need or use medicine prescribed by a doctor or other health care professional, other than vitamins?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Renamed variable (L12A_NEW) for ease of analysis
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	DIS12_THRP

DIS12_THRP	
ASK	If I90A >= 1
CATI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} need or get special therapy, such as physical, occupational or speech therapy?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} need or get special therapy, such as physical, occupational or speech therapy?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Renamed variable (L12J_NEW) for ease of analysis
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	DIS12_CNS

DIS12_CNS	
ASK	If I90A >= 1
CATI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} have any kind of emotional, developmental, or behavioral problem for which they need or get treatment or counseling?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Because of a physical, mental, or emotional condition lasting 12 months or more, does {CH_NAME} have any kind of emotional, developmental, or behavioral problem for which they need or get treatment or counseling?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument. Renamed variable (L12M_NEW) for ease of analysis
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If I90A > 5: LAS12B, Else: N136

LAS12B	
ASK	If I90A > 5
CATI	<p>Now, thinking about {CH_NAME}'s mental health, which may include stress, depression, problems with emotions, or substance use, for how many days, during the past 30 days did a mental health condition or emotional problem keep {CH_NAME} from participating in school, social relationships with friends, or other usual activities?</p> <p>_____ DAYS</p> <p>98 DON'T NOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Now, thinking about {CH_NAME}'s mental health, which may include stress, depression, problems with emotions, or substance use, for how many days, during the past 30 days did a mental health condition or emotional problem keep {CH_NAME} from participating in school, social relationships with friends, or other usual activities?</p> <p>_____ Days (0-30)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument Range: 0-30
HARD CHECK	
SOFT CHECK	IF OUTSIDE OF RANGE OR MISSING, DISPLAY: "Number of days is missing or invalid. Please enter a number between 0 and 30. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter the number of days a mental health condition or emotional problem kept {CH_NAME} from participating in school, social relationships, or other usual activities.
PAPER QNUM	
NEXT	N136

SECTION M: CHILD SOURCES OF CARE & UTILIZATION OF SERVICES

Usual Source of Care

N136	
ASK	If HH = 01 AND S12 > 0
CATI	<p>HEALTH CARE</p> <p>The next set of questions ask about access to health care for {CH_NAME}.</p> <p>When {CH_NAME} is sick or needs advice about their health, do they usually receive care at one place, more than one place, or no place at all?</p> <p>01 ONE PLACE 02 MORE THAN ONE PLACE 03 NO PLACE AT ALL</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next set of questions ask about access to health care for {CH_NAME}.</p> <p>When {CH_NAME} is sick or needs advice about their health, do they usually receive care at one place, more than one place, or no place at all?</p> <p>01 One place 02 More than one place 03 No place at all</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If N136 = (01, 02): N136A, Else: J108

N136A	
ASK	If N136 = (01, 02)
CATI	<p>Where does {CH_NAME} usually receive care or advice about their health? Would you say...</p> <p>(INTERVIEWER: IF THE RESPONDENT INDICATES MORE THAN ONE, PROMPT THEM TO SELECT JUST ONE PLACE WHERE THEY USUALLY RECEIVE CARE.)</p> <p>01 A doctor's office or health center, including by phone or video call, 02 A hospital emergency room, 03 An urgent care center, including by phone or video call, 04 A clinic in a pharmacy or grocery store, or, 05 Some other place</p> <p>98 DON'T NOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Where does {CH_NAME} usually receive care or advice about their health?</p> <p>01 A doctor's office or health center, including by phone or video call 02 A hospital emergency room 03 An urgent care center, including by phone or video call 04 A clinic in a pharmacy or grocery store 05 Some other place</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	J108

Care Coordination

J108	
ASK	If HH = 01 AND S12 > 0
CATI	<p>During the past 12 months, was there a time you needed professional help arranging or coordinating care among different health care providers and services that {CH_NAME} uses?</p> <p>01 YES 02 NO 98 DON'T NOW 99 PREFER NOT TO SAY</p>
CAWI	<p>During the past 12 months, was there a time you needed professional help arranging or coordinating care among different health care providers and services that {CH_NAME} uses?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	Removed skip pattern used in previous years, expanded who will see this question (used to only ask if had a personal doctor (removed) and had difficulty communicating or needed prescription medicines, special therapy, or treatment/counseling for a behavioral/physical/mental condition)
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If J108 = 01: J108B, Else: f_UTLZ_CHLD

J108B	
<i>ASK</i>	If J108 = 01
<i>CATI</i>	<p>During the past 12 months, how often did you get as much help as you needed with arranging or coordinating care for {CH_NAME}? Would you say...</p> <p>01 Always 02 Usually 03 Sometimes 04 Rarely, or 05 Never</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, how often did you get as much help as you needed with arranging or coordinating care for {CH_NAME}?</p> <p>01 Always 02 Usually 03 Sometimes 04 Rarely 05 Never</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	If J108B = (03, 04, 05): f_J108B_RS, Else: f_UTLZ_CHLD

f_J108B_RS	
J108B_RS_1 / J108B_RS_2 / J108B_RS_3 / J108B_RS_4 / J108B_RS_5	
ASK	If J108B = (03, 04, 05)
CATI	<p>Why did you not get all the help you needed arranging or coordinating care for {CH_NAME}? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did you not get the help you needed arranging or coordinating care for {CH_NAME} because...) You did not have a care coordinator? [J108B_RS_1] b. (IF NEEDED: Did you not get the help you needed arranging or coordinating care for {CH_NAME} because...) You were not sure how to contact the care coordinator? [J108B_RS_2] c. (IF NEEDED: Did you not get the help you needed arranging or coordinating care for {CH_NAME} because...) You tried but could not get in contact with the care coordinator? [J108B_RS_3] d. (IF NEEDED: Did you not get the help you needed arranging or coordinating care for {CH_NAME} because...) The care coordinator was not able to help with what you needed? [J108B_RS_4] e. (IF NEEDED: Did you not get the help you needed arranging or coordinating care for {CH_NAME} because of...) Another reason? [J108B_RS_5]</p>
CAWI	<p>Why did you not get all the help you needed arranging or coordinating care for {CH_NAME}? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I did not have a care coordinator [J108B_RS_1] b. I was not sure how to contact the care coordinator [J108B_RS_2] c. I tried but could not get in contact with the care coordinator [J108B_RS_3] d. The care coordinator was not able to help with what I needed [J108B_RS_4] e. Another reason not specified above [J108B_RS_5]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	f_UTLZ_CHLD

Health Care Utilization

f_UTLZ_CHLD UTLZ_CHLD_1 / UTLZ_CHLD_2 / UTLZ_CHLD_3	
ASK	If HH = 01 AND S12 > 0
CATI	<p>During the past 12 months, did {CH_NAME} see a doctor or other healthcare provider...</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: During the past 12 months, did {CH_NAME} see a doctor or other healthcare provider...) In-person? [UTLZ_CHLD_1] b. (IF NEEDED: During the past 12 months, did {CH_NAME} see a doctor or other healthcare provider...) By audio-only call without video? [UTLZ_CHLD_2] c. (IF NEEDED: During the past 12 months, did {CH_NAME} see a doctor or other healthcare provider...) By audio and video call? [UTLZ_CHLD_3]</p>
CAWI	<p>During the past 12 months, did {CH_NAME} see a doctor or other healthcare provider...?</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. In-person [UTLZ_CHLD_1] b. By audio-only call without video [UTLZ_CHLD_2] c. By audio and video call [UTLZ_CHLD_3]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If UTLZ_CHLD_2 = 01 or UTLZ_CHLD_3 = 01: M131C_Tele, Else, if UTLZ_CHLD_1 = 01 or UTLZ_CHLD_2 = 01 or UTLZ_CHLD_3 = 01 : M130, Else, If I90A > 1: M135, Else: VACRC_C_FLU

M131C_Tele	
ASK	If UTLZ_CHLD_2 = 01 or UTLZ_CHLD_3 =01
CATI	<p>This next question asks you about telehealth. Telehealth lets a doctor, nurse, or other healthcare provider care for you without an in-person office visit. Telehealth appointments are usually done online using a computer, tablet, or smartphone, or by phone.</p> <p>During the past 12 months, how many times has {CH_NAME} had a telehealth visit with a doctor, nurse, or other healthcare provider? Would you say...</p> <p>01 0 times 02 1-2 times 03 3-6 times, or 04 7 or more times</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>This next question asks you about telehealth. Telehealth lets a doctor, nurse, or other healthcare provider care for you without an in-person office visit. Telehealth appointments are usually done online (using a computer, tablet, or smartphone) or by phone.</p> <p>During the past 12 months, how many times has {CH_NAME} had a telehealth visit with a doctor, nurse, or other healthcare provider?</p> <p>01 0 times 02 1-2 times 03 3-6 times 04 7 or more times</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	From 2021 instrument, modified for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	M130

Well-baby Checkup

M130	
ASK	If UTLZ_CHLD_1 = 01 or UTLZ_CHLD_2 = 01 or UTLZ_CHLD_3 = 01
CATI	{M130FILL} 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY
CAWI	{M130FILL} 01 Yes 02 No
QUESTION TYPE	Radio button
FILLS	IF I90A = 0, M130FILL = "Since their birth, did {CH_NAME} receive a well-baby checkup, that is a general checkup when they were not sick or injured?" IF I90A = (1-6), M130FILL = "During the past 12 months, did {CH_NAME} receive a well-child checkup, that is a general checkup when they were not sick or injured?" Else, M130FILL = "During the past 12 months, did {CH_NAME} receive a general checkup, that is a checkup when they were not sick or injured?"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If I90A > 1: M135, Else: VACRC_C_FLU

Dental Care

M135	
<i>ASK</i>	If I90A > 1
<i>CATI</i>	<p>About how long has it been since {CH_NAME} last visited a dentist? Would you say...</p> <p>01 Within the last 12 months, 02 More than 12 months ago, or 03 Has {CH_NAME} never been to a dentist?</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>About how long has it been since {CH_NAME} last visited a dentist?</p> <p>01 Within the last 12 months 02 More than 12 months ago 03 {CH_NAME} has never been to a dentist</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	VACRC_C_FLU

Vaccines

VACRC_C_FLU	
ASK	If HH = 01 AND S12 > 0
CATI	<p>We would now like to ask you a couple of questions about vaccines for your child.</p> <p>During the past 12 months, has {CH_NAME} had a shot or vaccine for the flu?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>We would now like to ask you a couple of questions about vaccines for your child.</p> <p>During the past 12 months, has {CH_NAME} had a shot or vaccine for the flu?</p> <p>01 Yes 02 No 98 Don't know</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	f_VACRC_C_EVR

f_VACRC_C_EVR	
VACRC_C_EVR1 / VACRC_C_EVR2 / VACRC_C_EVR3 / VACRC_C_EVR4 / VACRC_C_EVR5 / VACRC_C_EVR6	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever had a shot or vaccine for...?</p> <p>(INTERVIEWER: PAUSE AFTER EACH ROW AND WAIT FOR A YES/NO RESPONSE.)</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) Chickenpox, that is, Varicella? [VACRC_C_EVR1] b. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) MMR, that is, Measles, Mumps, Rubella? [VACRC_C_EVR2] c. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) Polio? [VACRC_C_EVR3] d. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) DTaP or Tdap, that is, Tetanus, Diphtheria, Pertussis? [VACRC_C_EVR4] e. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) HPV, that is, Human Papillomavirus? [VACRC_C_EVR5] f. (IF NEEDED: Has {CH_NAME} ever had a shot or vaccine for...) COVID-19? [VACRC_C_EVR6]</p>
CAWI	<p>Has {CH_NAME} ever had a shot or vaccine for any of the following?</p> <p>COLUMN HEADERS: 01 Yes 02 No 03 Don't know</p> <p>ROW ITEMS: a. Chickenpox (Varicella) [VACRC_C_EVR1] b. MMR (Measles, Mumps, Rubella) [VACRC_C_EVR2] c. Polio [VACRC_C_EVR3] d. DTaP/Tdap (Tetanus, Diphtheria, Pertussis) [VACRC_C_EVR4] e. HPV (Human Papillomavirus) [VACRC_C_EVR5] f. COVID-19 [VACRC_C_EVR6]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument Randomize the order of the rows in the grid on CATI and CAWI. Do not keep the lettering in the rows.
HARD CHECK	
SOFT CHECK	CAWI: No error message when missing.
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	f_VAC_C_HES

f_VAC_C_HES	
VAC_C_HES1 / VAC_C_HES2 / VAC_C_HES3 / VAC_C_HES4 / VAC_C_HES5 / VAC_C_HES6 / VAC_C_HES7	
<i>ASK</i>	If HH = 01 AND S12 > 0
<i>CATI</i>	<p>Currently, how hesitant are you about the children in your household receiving the following vaccines? Would you say very hesitant, somewhat hesitant, not that hesitant, or not at all hesitant?</p> <p>(IF NEEDED: READ RESPONSE OPTIONS VERY HESITANT, SOMEWHAT HESITANT, NOT THAT HESITANT, OR NOT AT ALL HESITANT)</p> <p>COLUMN HEADERS:</p> <p>01 VERY HESITANT 02 SOMEWHAT HESITANT 03 NOT THAT HESITANT 04 NOT AT ALL HESITANT 98 DON'T NOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS:</p> <p>a. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) Flu? [VAC_C_HES1]</p> <p>b. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) Chickenpox, that is, Varicella? [VAC_C_HES2]</p> <p>c. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) MMR, that is, Measles, Mumps, Rubella? [VAC_C_HES3]</p> <p>d. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) Polio? [VAC_C_HES4]</p> <p>e. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) DTaP/Tdap, that is, Tetanus, Diphtheria, Pertussis? [VAC_C_HES5]</p> <p>f. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) HPV, that is, Human Papillomavirus? [VAC_C_HES6]</p> <p>g. (IF NEEDED: Currently, how hesitant are you about the children in your household receiving the vaccine for...) COVID-19? [VAC_C_HES7]</p>
<i>CAWI</i>	<p>Currently, how hesitant are you about the children in your household receiving the following vaccines?</p> <p>COLUMN HEADERS:</p> <p>01 Very hesitant 02 Somewhat hesitant 03 Not that hesitant 04 Not at all hesitant</p> <p>ROW ITEMS:</p> <p>a. Flu [VAC_C_HES1]</p> <p>b. Chickenpox (Varicella) [VAC_C_HES2]</p> <p>c. MMR (Measles, Mumps, Rubella) [VAC_C_HES3]</p> <p>d. Polio [VAC_C_HES4]</p> <p>e. DTaP/Tdap (Tetanus, Diphtheria, Pertussis) [VAC_C_HES5]</p> <p>f. HPV (Human Papillomavirus) [VAC_C_HES6]</p> <p>g. COVID-19 [VAC_C_HES7]</p>
<i>QUESTION TYPE</i>	Radio button grid
<i>FILLS</i>	

<i>NOTES</i>	New for 2023 instrument Randomize the order of the rows in the grid for CATI and CAWI. Do not keep the lettering in the rows.
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	CAWI: No error message when missing.
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	O139_1

SECTION N: CHILD UNMET HEALTH NEEDS

O139_1	
ASK	If HH = 01 AND S12 > 0
CATI	<p>These next questions ask about different types of care {CH_NAME} may have needed and whether or not {CH_NAME} was able to get this needed care.</p> <p>{O139FILL} a time when {CH_NAME} needed dental care?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>These next questions ask about different types of care {CH_NAME} may have needed and whether or not {CH_NAME} was able to get this needed care.</p> <p>{O139FILL} a time when {CH_NAME} needed dental care?</p> <p>01 Yes, {CH_NAME} needed dental care 02 No, {CH_NAME} did not need dental care</p>
QUESTION TYPE	Radio button
FILLS	If I90A = 0, O139FILL = "Has there been", Else: O139FILL = " During the past 12 months , was there"
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If O139_1 = 01: O139_2, Else if I90A > 11: O139_MH_1, Else: ACE_3

O139_2	
ASK	If O139_1 = 01
CATI	<p>Was {CH_NAME} able to get the dental care that they needed?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was {CH_NAME} able to get the dental care that they needed?</p> <p>01 Yes, {CH_NAME} got the dental care needed 02 No, {CH_NAME} did not get the dental care needed</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If 0139_2 = 02: f_UM_DT_RS_C, Else if I90A > 11: O139_MH_1, Else: ACE_3

f_UM_DT_RS_C	
UM_DT_RS_C1 / UM_DT_RS_C2 / UM_DT_RS_C3 / UM_DT_RS_C4 / UM_DT_RS_C5 / UM_DT_RS_C6	
ASK	If 0139_2 = 02
CATI	<p>Why did {CH_NAME} not get the dental care they needed during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS: a. (IF NEEDED: Did {CH_NAME} not get the dental care they needed during the past 12 months because...) You thought it would cost too much? [UNMT_DNTL_RS_C1] b. (IF NEEDED: Did {CH_NAME} not get the dental care they needed during the past 12 months because...) {CH_NAME} did not have transportation to or from appointments? [UNMT_DNTL_RS_C2] c. (IF NEEDED: Did {CH_NAME} not get the dental care they needed during the past 12 months because...) The provider was not available when {CH_NAME} needed to go? [UNMT_DNTL_RS_C3] d. (IF NEEDED: Did {CH_NAME} not get the dental care they needed during the past 12 months because...) You could not find a provider who would accept {CH_NAME}'s insurance? [UNMT_DNTL_RS_C4] e. (IF NEEDED: Did {CH_NAME} not get the dental care they needed during the past 12 months because of...) Another reason? [UNMT_DNTL_RS_C5]</p> <p>(IF NEEDED: Please tell me the other reason.) _____ [UNMT_DNTL_RS_C6]</p>
CAWI	<p>Why did {CH_NAME} not get the dental care they needed during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS: a. I thought it would cost too much [UNMT_DNTL_RS_C1] b. {CH_NAME} did not have transportation to or from appointments [UNMT_DNTL_RS_C2] c. The provider was not available when {CH_NAME} needed to go [UNMT_DNTL_RS_C3] d. I could not find a provider who would accept {CH_NAME}'s insurance [UNMT_DNTL_RS_C4] e. Another reason not listed [UNMT_DNTL_RS_C5]</p> <p>Please specify the other reason: _____ [UNMT_DNTL_RS_C6]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument If UNMT_DNTL_RS_C5=01, display UNMT_DNTL_RS_C6 on the next screen.
HARD CHECK	
SOFT CHECK	

<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason {CHI_NAME} did not receive dental care" Short Text: Select yes or no for each reason {CH_NAME} did not get dental care.
<i>PAPER QNUM</i>	
<i>NEXT</i>	If I90A > 11: O139_MH_1, Else: ACE_3

O139_MH_1	
<i>ASK</i>	If I90A > 11
<i>CATI</i>	<p>During the past 12 months, was there a time when {CH_NAME} needed mental or emotional health care or counseling services?</p> <p>01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>During the past 12 months, was there a time when {CH_NAME} needed mental or emotional health care or counseling services?</p> <p>01 Yes, {CH_NAME} needed mental or emotional health care or counseling 02 No, {CH_NAME} did not need mental or emotional health care or counseling</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	If O139_MH_1 = 01: O139_MH_2, Else: ACE_3

O139_MH_2	
ASK	If O139_MH_1 = 01
CATI	<p>Was {CH_NAME} able to get the mental or emotional health care or counseling services that they needed?</p> <p>01 YES, 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Was {CH_NAME} able to get the mental or emotional health care or counseling services that they needed?</p> <p>01 Yes, {CH_NAME} got the mental or emotional health care or counseling needed 02 No, {CH_NAME} did not get the mental or emotional health care or counseling needed</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If 0139_MH_2 = 02: f_UM_MT_RS_C, Else: ACE_3

f_UM_MT_RS_C	
UM_MT_RS_C1 / UM_MT_RS_C2 / UM_MT_RS_C3 / UM_MT_RS_C4 / UM_MT_RS_C5 / UM_MT_RS_C6	
ASK	If 0139_MH_2 = 02
CATI	<p>Why did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months? For each statement I read, please tell me yes or no.</p> <p>COLUMN HEADERS: 01 YES 02 NO 98 DON'T KNOW 99 PREFER NOT TO SAY</p> <p>ROW ITEMS:</p> <p>a. (IF NEEDED: Did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months because...) You thought it would cost too much? [UM_MT_RS_C1]</p> <p>b. (IF NEEDED: Did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months because...) {CH_NAME} did not have transportation to or from appointments? [UM_MT_RS_C2]</p> <p>c. (IF NEEDED: Did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months because...) The provider was not available when {CH_NAME} needed to go? [UM_MT_RS_C3]</p> <p>d. (IF NEEDED: Did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months because...) You could not find a provider who would accept {CH_NAME}'s insurance? [UM_MT_RS_C4]</p> <p>e. (IF NEEDED: Did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months because of...) Another reason? [UM_MT_RS_C5]</p> <p>(IF NEEDED: Please tell me the other reason.) _____ [UM_MT_RS_C6]</p>
CAWI	<p>Why did {CH_NAME} not get the mental or emotional health care or counseling services they needed during the past 12 months? Please select "yes" or "no" for each reason.</p> <p>COLUMN HEADERS: 01 Yes 02 No</p> <p>ROW ITEMS:</p> <p>a. I thought it would cost too much [UNMT_MTL_RS_C1]</p> <p>b. {CH_NAME} did not have transportation to or from appointments [UNMT_MTL_RS_C2]</p> <p>c. The provider was not available when {CH_NAME} needed to go [UNMT_MTL_RS_C3]</p> <p>d. I could not find a provider who would accept {CH_NAME}'s insurance [UNMT_MTL_RS_C4]</p> <p>e. Another reason not listed [UNMT_MTL_RS_C5]</p> <p>Please specify the other reason: _____ [UNMT_MTL_RS_C6]</p>
QUESTION TYPE	Radio button grid
FILLS	
NOTES	New for 2023 instrument If UM_MT_RS_C5=01, display UM_MT_RS_C6 on the next screen.
HARD CHECK	

<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Accessibility label for "other, specify" field should read "Please specify the other reason {CHI_NAME} did not receive mental or emotional health care" Short Text: Select yes or no for each reason {CH_NAME} did not receive mental or emotional health care.
<i>PAPER QNUM</i>	
<i>NEXT</i>	ACE_3

SECTION O: CHILD HEALTH RISKS

ACE_3	
ASK	If HH = 01 AND S12 > 0
CATI	<p>The next questions are about events that may have happened during {CH_NAME}'s life. These things can happen in any family, but some people may feel uncomfortable with these questions. You may skip any questions you do not want to answer. Please remember your personal information will not be shared with anyone and you will not be identified.</p> <p>To the best of your knowledge, has {CH_NAME} ever experienced parents or guardians going through a divorce or separation?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>The next questions are about events that may have happened during {CH_NAME}'s life. These things can happen in any family, but some people may feel uncomfortable with these questions. You may skip any questions you do not want to answer. Please remember your personal information will not be shared with anyone and you will not be identified.</p> <p>To the best of your knowledge, has {CH_NAME} ever experienced parents or guardians going through a divorce or separation?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_4

ACE_4	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever experienced the death of a parent or guardian?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever experienced the death of a parent or guardian?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_5

ACE_5	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever experienced a parent or guardian serving time in jail after {CH_NAME} was born?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever experienced a parent or guardian serving time in jail after {CH_NAME} was born?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_6

ACE_6	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever seen or heard parents or adults slap, hit, kick, punch one another in the home?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever seen or heard parents or adults slap, hit, kick, punch one another in the home?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_7

ACE_7	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever been the victim of violence or witnessed violence in their neighborhood?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever been the victim of violence or witnessed violence in their neighborhood?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_8

ACE_8	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever lived with anyone who was mentally ill, suicidal, or severely depressed?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Has {CH_NAME} ever lived with anyone who was mentally ill, suicidal, or severely depressed?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_9

ACE_9	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever lived with anyone who had a problem with alcohol or drugs?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever lived with anyone who had a problem with alcohol or drugs?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	ACE_10

ACE_10	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Has {CH_NAME} ever been treated or judged unfairly because of their race or ethnic group?</p> <p>(INTERVIEWER: IF THE RESPONDENT IS NOT SURE, LET THEM KNOW THAT WE ARE LOOKING FOR THE BEST OF THEIR KNOWLEDGE.)</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>To the best of your knowledge, has {CH_NAME} ever been treated or judged unfairly because of their race or ethnic group?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If 2 or more of (ACE_3, ACE_4, ACE_5, ACE_6, ACE_7, ACE_8, ACE_9, ACE_10) = 01: CNTCT_ACES, Else: TN_ALC

CNTCT_ACES	
ASK	If 2 or more of (ACE_3, ACE_4, ACE_5, ACE_6, ACE_7, ACE_8, ACE_9, ACE_10) = 01
CATI	<p>Thank you for your responses. Is it okay if we contact you with follow-up questions for an additional study related to these types of events?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Thank you for your responses. Is it okay if we contact you with follow-up questions for an additional study related to these types of events?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	TN_ALC

Substance Use

TN_ALC	
ASK	If HH = 01 AND S12 > 0
CATI	<p>SUBSTANCE USE</p> <p>Now I have a few questions about teenage substance use in your community.</p> <p>How concerned are you about teenage alcohol use in your community? Would you say...</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned, or 04 Not at all concerned</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Now we have a few questions about teenage substance use in your community.</p> <p>How concerned are you about teenage alcohol use in your community?</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned 04 Not at all concerned</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	TN_TBC

TN_TBC	
ASK	If HH = 01 AND S12 > 0
CATI	<p>How concerned are you about teenage cigarette smoking in your community? Would you say...</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned, or 04 Not at all concerned</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How concerned are you about teenage cigarette smoking in your community?</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned 04 Not at all concerned</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	TN_ECG

TN_ECG	
ASK	If HH = 01 AND S12 > 0
CATI	<p>How concerned are you about teenage electronic cigarette use or vaping in your community?</p> <p>(IF NEEDED: REPEAT THE RESPONSE OPTIONS WITH "Would you say...")</p> <p>01 VERY CONCERNED 02 SOMEWHAT CONCERNED 03 NOT VERY CONCERNED 04 NOT AT ALL CONCERNED</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How concerned are you about teenage electronic cigarette use or vaping in your community?</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned 04 Not at all concerned</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	TN_MRJ

TN_MRJ	
ASK	If HH = 01 AND S12 > 0
CATI	<p>How concerned are you about teenage marijuana use in your community?</p> <p>(IF NEEDED: REPEAT THE RESPONSE OPTIONS WITH "Would you say...")</p> <p>01 VERY CONCERNED 02 SOMEWHAT CONCERNED 03 NOT VERY CONCERNED, OR 04 NOT AT ALL CONCERNED</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>How concerned are you about teenage marijuana use in your community?</p> <p>01 Very concerned 02 Somewhat concerned 03 Not very concerned 04 Not at all concerned</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	New for 2023 instrument
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	P149

SECTION P: CHILD DEMOGRAPHICS

P149	
<i>ASK</i>	If HH = 01 AND S12 > 0
<i>CATI</i>	<p>DEMOGRAPHICS</p> <p>The next few questions are just for general classification purposes.</p> <p>Is {CH_NAME} of Hispanic, Latino, or Spanish origin?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>The next few questions are just for general classification purposes.</p> <p>Is {CH_NAME} of Hispanic, Latino, or Spanish origin?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	
<i>NEXT</i>	f_P150

f_P150	
P150_1 / P150_2 / P150_3 / P150_4 / P150_5 / P150_6 / P150_97	
ASK	If HH = 01 AND S12 > 0
CATI	<p>Which one or more of the following would you say is {CH_NAME}'s race? Are they White, Black or African American, Asian, Native American, American Indian, or Alaskan Native, Native Hawaiian or Pacific Islander, Hispanic, Latino, or Spanish, or some other race I have not mentioned? Please choose all that apply.</p> <p>(INTERVIEWER: CODE ALL THAT APPLY)</p> <p>01 WHITE [S17_1] 02 BLACK OR AFRICAN AMERICAN [S17_2] 03 ASIAN [S17_3] 04 NATIVE AMERICAN, AMERICAN INDIAN, OR ALASKAN NATIVE [S17_4] 05 NATIVE HAWAIIAN OR PACIFIC ISLANDER [S17_5] 06 HISPANIC, LATINO, SPANISH [S17_6] 07 OTHER [S17_97]</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Which one or more of the following would you say is {CH_NAME}'s race? <i>Select all that apply.</i></p> <p>01 White [P150_1] 02 Black or African American [P150_2] 03 Asian [P150_3] 04 Native American, American Indian, or Alaskan Native [P150_4] 05 Native Hawaiian or Pacific Islander [P150_5] 06 Hispanic, Latino, Spanish [P150_6] 07 Some other race [P150_97]</p>
QUESTION TYPE	Checkbox
FILLS	
NOTES	CATI: 98 and 99 cannot be selected with any of the other options. CAWI: Code each variable as 1 if checked, 0 if not checked.
HARD CHECK	
SOFT CHECK	If CAWI and Missing, Display: "Missing Response: You did not select a response. Please select at least one response. To skip the question, please press NEXT a second time."
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If !(G71 = 01 & I90B in (01,02)): P151, Else if I90A >= 6: PL125A2P, Else: INCENT

P151	
ASK	If !(G71 =01 & I90B in (01,02))
CATI	<p>Are either of {CH_NAME}'s parents employed?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>Are either of {CH_NAME}'s parents employed?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	If I90A >= 6: PL125A2P, Else: INCENT

Weight and Height

PL125A2P	
ASK	If I90A >= 6
CATI	<p>WEIGHT AND HEIGHT</p> <p>How much does {CH_NAME} weigh now?</p> <p>_____</p> <p>988 DON'T KNOW 999 PREFER NOT TO SAY</p>
CAWI	<p>How much does {CH_NAME} weigh now?</p> <p>_____ Pounds (1-700)</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	Range: 1-700
HARD CHECK	
SOFT CHECK	IF CAWI OUTSIDE OF RANGE OR MISSING, DISPLAY THE SOFT-CHECK MESSAGE OF: "Weight, in pounds, is missing or invalid. Please enter a number between 1 and 700. To skip this question, please delete all characters in the text box and select NEXT."
CATI NOTES	
CAWI NOTES	Short Text: Enter {CH_NAME}'s weight in pounds.
PAPER QNUM	
NEXT	f_PL125A1

f_PL125A1 PL125AP_F / PL125AP_I	
ASK	If I90A >= 6
CATI	<p>How tall is {CH_NAME} now?</p> <p>____ Feet [PL125AP_F] ____ Inches [PL125AP_I]</p> <p>98 DON'T KNOW 98 DON'T KNOW</p> <p>99 PREFER NOT TO SAY 99 PREFER NOT TO SAY</p>
CAWI	<p>How tall is {CH_NAME} now?</p> <p>____ Feet [PL125AP_F] ____ Inches [PL125AP_I]</p>
QUESTION TYPE	Numeric
FILLS	
NOTES	PL125AP_F: Range 1-8 PL125AP_I: Range 0-11
HARD CHECK	
SOFT CHECK	IF CAWI AND PL125AP_F OUTSIDE OF RANGE OR MISSING, DISPLAY THE MESSAGE OF: "Please enter a number between 1 and 8." IF CAWI AND PL125AP_I OUTSIDE OF RANGE OR MISSING, DISPLAY THE MESSAGE OF: "Please enter a number between 0 and 11."
CATI NOTES	
CAWI NOTES	
PAPER QNUM	
NEXT	INCENT

CLOSING

INCENT	
<i>ASK</i>	<i>ASK ALL</i>
<i>CATI</i>	<p>CLOSING</p> <p>Thank you for completing the survey. To thank you for your participation, we would like to send you an electronic gift card for \${INCENTIVE3}</p> <p>Would you prefer to receive an electronic gift card via email, a mailed check, or do you not want a gift card or check?</p> <p>01 YES, RESPONDENT WILL PROVIDE THEIR EMAIL ADDRESS 02 NO, RESPONDENT WOULD PREFER TO RECEIVE A CHECK INSTEAD OF AN ELECTRONIC GIFT CARD 03 NO, RESPONDENT DOES NOT WANT TO RECEIVE A GIFT CARD OR A CHECK</p>
<i>CAWI</i>	<p>Thank you for completing the survey. To thank you for your participation, we would like to send you an electronic gift card for \${INCENTIVE3}.</p> <p>Would you provide your email address to receive your electronic gift card?</p> <p>01 Yes, I will provide my email address 02 No, I would prefer to receive a check instead of an electronic gift card 03 No, I do NOT want to receive a gift card or a check</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	CREATE INCENTIVE3: IF HH=01 & CHILD_INCENT = 1: INCENTIVE3 = INCENTIVE+INCENTIVE2 ELSE: INCENTIVE3 = INCENTIVE
<i>NOTES</i>	
<i>HARD CHECK</i>	REQUIRED; NEED HARD CHECK MESSAGE
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	Question stem is different from CAWI
<i>CAWI NOTES</i>	Question stem is different from CATI
<i>PAPER QNUM</i>	Q150 Note that the PAPI question wording is different: Please select how you would like to receive your \$10 token of appreciation in the mail: Physical Visa Gift Card Check
<i>NEXT</i>	If INCENT = 01: f_EMAIL, Else, if INCENT = 02: CHECK, Else: THANKS

f_IEMAIL IEMAIL1 / IEMAIL2	
ASK	If INCENT = 01
CATI	What is your email address? _____ [IEMAIL1] To be sure the electronic gift card is sent to the right email address, please tell me your email address one more time: _____ [IEMAIL2]
CAWI	Please enter your email address: _____ (abc@xyz.com)
QUESTION TYPE	Text entry (email)
FILLS	
NOTES	
HARD CHECK	REQUIRED; IF MISSING OR INVALID: "Email address is missing or invalid. In order to send you the electronic incentive we need your email address (abc@xyz.com). If you do not wish to provide your email address, please click Back and select a different incentive option."
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q144
NEXT	CATI: IF IEMAIL1 != IEMAIL2: EMAILCHECK, ELSE: EMAILTHANKS CAWI: EMAIL2

EMAIL2	
ASK	If INCENT = 01
CATI	[NOT IN CATI]
CAWI	To be sure we are sending the electronic gift card to the right email address, please confirm your email address by entering it a second time: _____ (abc@xyz.com)
QUESTION TYPE	Text entry (email)
FILLS	
NOTES	
HARD CHECK	REQUIRED; IF MISSING OR INVALID: "Email address is missing or invalid. In order to send you the electronic incentive we need your email address (abc@xyz.com). If you do not wish to provide your email address, please click Back and select a different incentive option."
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If EMAIL2 != EMAIL1: EMAILCHECK, Else: EMAILTHANKS

EMAILCHECK	
ASK	If EMAIL2 != EMAIL1
CATI	INTERVIEWER: THE EMAILS YOU ENTERED DO NOT MATCH. PLEASE CLICK "NEXT" TO RE-ENTER THE EMAIL ADDRESS. 01 Next (GO BACK TO EMAIL1)
CAWI	The emails you entered do not match. Please click "Next" to re-enter your email address. 01 Next (GO BACK TO EMAIL1)
QUESTION TYPE	
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	

CHECK	
ASK	If INCENT = 02
CATI	<p>We can send you a check to thank you for taking part in this survey. In order to mail your check, we need to collect your full name and mailing address. This information will not be connected with your answers in the survey.</p> <p>Would you like us to send you a check?</p> <p>01 YES, RESPONDENT WOULD LIKE THE CHECK 02 NO, RESPONDENT DOES NOT WANT THE CHECK</p> <p>99 REFUSED</p>
CAWI	<p>We can send you a check to thank you for taking part in this survey. In order to mail your check, we need to collect your full name and mailing address. This information will not be connected with your answers in the survey.</p> <p>Would you like us to send you a check?</p> <p>01 Yes, I would like the check 02 No, I do not want the check</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	<p>If CHECK = 01 and HH = 02 and CAWI: NAME_CNFRM, Else if CHECK = 01 and HH = 02 and CATI: MNAME_CNFRM, Else if CHECK = 01 and HH = 01: MNAME, Else: THANKS</p>

NAME_CNFRM	
ASK	If CHECK = 01 and HH = 02 and CAWI
CATI	[Not on CATI]
CAWI	Is your name {FULLNAME}? We need this information to send you your check. 01 Yes 02 No
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If NAME_CNFRM = 02: MNAME, Else: MNAME_CNFRM

MNAME	
ASK	If NAME_CNFRM = 02 or (CHECK = 01 and HH = 01)
CATI	[Not on CATI]
CAWI	What is your full name? We must have your full name in order to send you a check. _____
QUESTION TYPE	Text entry
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If HH = 02: MNAME_CNFRM, Else: f_ADDRESS

MNAME_CNFRM	
ASK	If CHECK = 01 and HH = 02
CATI	<p>Now I would like to verify the name and address we have on file to ensure you will receive your check. The name and address we have on file are:</p> <p>{FULLNAME} {ADDRESS}</p> <p>Is this information correct? IF NEEDED: We must have your full name in order to send you a check.</p> <p>01 YES, INFO IS CORRECT 02 NO, INFO IS INCORRECT 98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>Now I would like to verify the address we have on file to ensure you will receive your check. The address we have on file is:</p> <p>{ADDRESS}</p> <p>Is this information correct?</p> <p>01 Yes, this information is correct 02 No, this information is incorrect</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	If MNAME_CNFRM = 02: f_ADDRESS Else: ADDRTHANKS

f_ADDRESS	
MNAME / ADDR1 / ADDR2 / ICITY / ISTATE / ZIP	
ASK	If (CHECK = 01 and HH = 01) or if MNAME_CNFRM = 02
CATI	<p>I will next ask for your contact information to send you your \${INCENTIVE3} check in the mail. This information will not be connected with your answers in the survey.</p> <p>FULL NAME _____ [MNAME] ADDRESS _____ [ADDR1] ADDRESS2 _____ [ADDR2] CITY _____ [ICITY] STATE Ohio [ISTATE] ZIP _____ [ZIP]</p>
CAWI	<p>I will next ask for your contact information to send you your \${INCENTIVE3} check in the mail. This information will not be connected with your answers in the survey.</p> <p>Address _____ [ADDR1] Apartment _____ [ADDR2] City _____ [ICITY] State Ohio [ISTATE] ZIP _____ [ZIP]</p>
QUESTION TYPE	ISTATE: Autofill with Ohio ZIP: Numeric All others: Text entry
FILLS	
NOTES	CATI: MNAME: 50 character limit ADDR1: 50 character limit ADDR2: 50 character limit ICITY: 50 character limit ISTATE: Autofill with Ohio ZIP: 5 digit text box CAWI: ADDR1, ADDR2, ICITY, ISTATE, and ZIP use API.
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	Short Text Address: Enter your street address Short Text Apartment: Enter your apartment or lot number, if you have one City: Enter your City State: Enter your State ZIP: Enter your zip code
PAPER QNUM	Q149
NEXT	ADDRTHANKS

EMAILTHANKS	
ASK	If INCENT = 01
CATI	<p>Thank you for providing your e-mail address. You will receive an e-mail shortly that will inform you of the approximate delivery time of your electronic gift card. We appreciate your willingness to participate in our survey. You may need to check your junk mail folder for an email titled "Thank you for participating in the Ohio Medicaid Assessment Survey."</p> <p>01 CONTINUE</p>
CAWI	<p>Thank you for providing us with your e-mail address. You will receive an e-mail shortly that will inform you of the approximate delivery time of your electronic gift card. We appreciate your willingness to participate in our survey. You may need to check your junk mail folder for an email titled "Thank you for participating in the Ohio Medicaid Assessment Survey."</p>
QUESTION TYPE	Informational
FILLS	
NOTES	TITLE OF EMAIL HAS CHANGED. ALERT JERRY C. FOR PROGRAMMING
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	THANKS

ADDRTHANKS	
ASK	If CHECK = 01
CATI	<p>Thank you for providing your information. It can take up to 4 weeks to receive the check. We appreciate your willingness to participate in our survey.</p> <p>01 NEXT</p>
CAWI	<p>Thank you for providing us with your information. It can take up to 4 weeks to receive the check. We appreciate your willingness to participate in our survey.</p> <p>01 Next</p>
QUESTION TYPE	Informational
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI (in Closing)
NEXT	THANKS

THANKS	
ASK	ASK ALL
CATI	<p>I would like to thank you again for your participation. Is it ok if we contact you with follow-up questions?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>We would like to thank you again for your participation. Is it ok if we contact you with follow-up questions?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q143
NEXT	<p>If If THANKS = 01 and HH = 01 and CHECK != 01: f_CONT_NAME, Else if THANKS = 01 and INCENT != 01: CONT_EMAIL1, Else if THANKS = 01: CONT_PHONE, Else: END_THANKS</p>

f_CONT_NAME CONT_NAME_F / CONT_NAME_L	
ASK	If THANKS = 01 and HH = 01 and CHECK != 01
CATI	<p>What is your first and last name?</p> <p>FIRST NAME: _____ [CONT_NAME_F] LAST NAME: _____ [CONT_NAME_L]</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
CAWI	<p>What is your first and last name?</p> <p>First name: _____ [CONT_NAME_F] Last name: _____ [CONT_NAME_L]</p>
QUESTION TYPE	Text entry
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	<p>IF CONT_NAME_F IS MISSING: First Name is missing or invalid. Please enter the first name. To skip the question, please press NEXT a second time.</p> <p>IF CONT_NAME_L IS MISSING: Last Name is missing or invalid. Please enter the last name. To skip the question, please press NEXT a second time.</p>
CATI NOTES	
CAWI NOTES	<p>Short Text FIRST NAME: Enter your first name.</p> <p>Short Text LAST NAME: Enter your last name.</p>
PAPER QNUM	Q149
NEXT	<p>If THANKS = 01 and INCENT != 01: CONTEMAIL1, Else if THANKS = 01: CONT_PHONE, Else: END_THANKS</p>

CONTEMAIL1	
<i>ASK</i>	If THANKS = 01 and INCENT != 01
<i>CATI</i>	<p>What is your email address?</p> <p>_____</p> <p>98 DON'T KNOW 99 PREFER NOT TO SAY</p>
<i>CAWI</i>	<p>Please enter your email address:</p> <p>_____ (abc@xyz.com)</p>
<i>QUESTION TYPE</i>	Text entry (email)
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	Short Text: Enter your email address.
<i>PAPER QNUM</i>	Q144
<i>NEXT</i>	If CONTEMAIL1 != missing: CONTEMAIL2, Else: CONT_PHONE

CONTEMAIL2	
ASK	If CONT_EMAIL1 != missing
CATI	To be sure we have the correct email address to contact you, please tell me your email address one more time: _____ 98 DON'T KNOW 99 PREFER NOT TO SAY
CAWI	To be sure we have the correct email address to contact you, please confirm your email address by entering it a second time: _____ (abc@xyz.com)
QUESTION TYPE	Text entry (email)
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	Short Text: Enter your email address.
PAPER QNUM	Not on PAPI
NEXT	If CONTEMAIL2 != CONT_EMAIL1: EMAILCHECK, Else: CONT_PHONE

CONT_EMCHECK	
ASK	If CONT_EMAIL2 != CONT_EMAIL1
CATI	INTERVIEWER: THE EMAILS YOU ENTERED DO NOT MATCH. PLEASE CLICK "NEXT" TO RE-ENTER THE EMAIL ADDRESS. 01 Next (GO BACK TO CONT_EMAIL1)
CAWI	The emails you entered do not match. Please click "Next" to re-enter your email address. 01 Next (GO BACK TO CONT_EMAIL1)
QUESTION TYPE	
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI
NEXT	CONT_PHONE

CONT_PHONE	
ASK	If THANKS = 01
CATI	<p>What is your phone number?</p> <p>____ - ____ - ____</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>What is your phone number?</p> <p>____ - ____ - ____ (#####)</p>
QUESTION TYPE	Numeric (phone)
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	Phone number is missing or invalid. Please enter a 10 digit phone number with no special characters (#####).
CATI NOTES	
CAWI NOTES	Short Text: Enter your 10-digit phone number with no special characters.
PAPER QNUM	Q145
NEXT	If CONT_PHONE != missing: CONTACT_CELL, Else: CONT_METHOD

CONTACT_CELL	
<i>ASK</i>	If CONT_PHONE != missing
<i>CATI</i>	<p>Is this a cell phone number?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 REFUSED</p>
<i>CAWI</i>	<p>Is this a cell phone number?</p> <p>01 Yes 02 No</p>
<i>QUESTION TYPE</i>	Radio button
<i>FILLS</i>	
<i>NOTES</i>	
<i>HARD CHECK</i>	
<i>SOFT CHECK</i>	
<i>CATI NOTES</i>	
<i>CAWI NOTES</i>	
<i>PAPER QNUM</i>	Q146
<i>NEXT</i>	If CONTACT_CELL = 01: CONTACT_TEXT, Else: CONT_METHOD

CONTACT_TEXT	
ASK	If CONTACT_CELL = 01
CATI	<p>May we text you?</p> <p>01 YES 02 NO</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>May we text you?</p> <p>01 Yes 02 No</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q147
NEXT	CONT_METHOD

CONT_METHOD	
ASK	If THANKS = 01
CATI	<p>What is your preferred method of contact? Would you say...</p> <p>01 Email 02 Call, or 03 Text</p> <p>98 DON'T KNOW 99 REFUSED</p>
CAWI	<p>What is your preferred method of contact?</p> <p>01 Email 02 Call 03 Text</p>
QUESTION TYPE	Radio button
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Q148
NEXT	END_THANKS

END_THANKS	
ASK	ASK ALL
CATI	Those are all the questions I have for you. I would like to thank you again for your participation.
CAWI	Those are all the questions we have for you. We would like to thank you again for your participation.
QUESTION TYPE	Informational
FILLS	
NOTES	
HARD CHECK	
SOFT CHECK	
CATI NOTES	
CAWI NOTES	
PAPER QNUM	Not on PAPI (in Closing)
NEXT	

Appendix B: Final Paper (PAPI) Questionnaire

2023 OMAS: A Survey for All Ohioans



INTRODUCTION

This study is sponsored by The State of Ohio and will take approximately 20 minutes. Your participation is voluntary. You do not have to answer any question you do not want to, and your responses to questions will be kept confidential. The responses provided to this survey are used to help local and state agencies improve health services across Ohio.

If you have questions, concerns, or complaints about the study, please call Ohio State/RTI International at 1-833-947-2577.

INSTRUCTIONS

- This survey should be completed by the **adult, 19 years or older, who lives in this household, had the most recent birthday, and has lived in Ohio for one month or more.**
- Mark your answer by completely filling in the circle or marking an "X" in the circle.
- **You are sometimes told to skip over some questions in this survey. When this happens, you will see an arrow or a note that tells you what question to answer next.**

START HERE

1. **Are you completing this survey for yourself or for someone else in your household?**

- For myself → *Go to #2*
- For someone else in my household



If you are completing this survey for someone else, please provide responses for the adult (age 19 or older) in your household with the most recent birthday, who has lived in Ohio for at least one month.

The next questions ask about what kind of health insurance coverage you may have.

Health insurance may be obtained in many ways. It can be obtained through your (or your spouse or partner's) current or past employment. It can be purchased directly, such as through [healthcare.gov](https://www.healthcare.gov). It can also be obtained through government and military programs such as Medicare, Medicaid, Healthy Families, TRICARE, or Champ-VA.

2. **Are you personally covered by any health insurance?**

- Yes → *Go to #7 on page 4*
- No → *Go to #3 on page 4*

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NOT COVERED BY INSURANCE

3. (If not covered by insurance) When were you last covered by any type of health insurance?

- Less than 3 months ago
- 3 months to 1 year ago
- 1 to 2 years ago
- 2 to 3 years ago
- More than 3 years ago
- I have never had health insurance

Go to #23 on page 5

4. Did you lose your insurance because of a job loss or layoff that you or a family member experienced?

- Yes
- No

5. The last time you had health insurance, were you covered by Medicaid, the State of Ohio health insurance for those with lower income?

- Yes → Go to #23 on page 5
- No

6. The last time you had health insurance, were you covered by insurance obtained through a current or former employer or labor union?

- Yes
- No

If you are not currently covered by insurance, go to Question #23 on page 5

COVERED BY INSURANCE

7. (If covered by insurance) Are you currently covered by health insurance through a current or former employer or labor union?

- Yes
- No → Go to #10

8. How long have you been covered by your current health insurance through a current or former employer or labor union?

- Less than 3 months
- 3 months to 1 year
- 1 to 2 years
- More than 2 years

9. Is your insurance through your work or are you receiving insurance as a dependent through someone else's work? This includes current or past work.

- Through your own work
- Through someone else's work
- Both through your own work and someone else's work

10. Are you currently covered by Medicare, the Federal government-funded health insurance for people 65 years and older or with certain disabilities?

- Yes
- No

11. Are you currently covered by Ohio Medicaid, the State of Ohio health insurance for those with lower income?

- Yes
- No

12. Are you currently covered by health insurance from healthcare.gov (sometimes called the health insurance "exchange" or marketplace)?

- Yes
- No

13. Are you currently covered by health insurance purchased directly, and that is not related to a job or healthcare.gov?

- Yes
- No

- 14. Are you currently covered by any other type of health insurance not mentioned previously?
 - Yes
 - No
- 15. Do you currently have any type of insurance that covers dental bills?
 - Yes
 - No
- 16. Do you currently have any type of insurance that covers eyeglasses, lenses, or vision care bills?
 - Yes
 - No

- 21. Was that prior insurance purchased directly, and that is not related to a job or healthcare.gov?
 - Yes → Go to #23
 - No

- 22. Was that prior insurance any other type of health insurance not mentioned previously?
 - Yes
 - No

GENERAL HEALTH


These next questions ask about your health.

- 23. In general, would you say your health is excellent, very good, good, fair, or poor?
 - Excellent
 - Very good
 - Good
 - Fair
 - Poor

- 24. For the next question, please think about your physical health, which includes physical illness and injury. During the past 30 days, on how many days did a physical health condition keep you from doing your work or other usual activities?

Days

- 25. Thinking about your teeth and gums, would you say your dental health is excellent, very good, good, fair, or poor?
 - Excellent
 - Very good
 - Good
 - Fair
 - Poor



If you are currently covered by Medicaid, continue to #17.

If you are not currently covered by Medicaid, skip to #23.

- 17. How long have you been covered by Medicaid?

- Less than 3 months
 - 3 months to 1 year
 - 1 to 2 years
 - More than 2 years
- } Go to #23

- ▶18. During the past 12 months, but before you were covered by Medicaid, were you covered by other insurance?

- Yes
- No → Go to #23

- 19. Was that prior insurance obtained through an employer or labor union?

- Yes → Go to #23
- No

- ▶20. Was that prior insurance from healthcare.gov (sometimes called the health insurance “exchange” or marketplace)?

- Yes → Go to #23
- No → Continue to #21

The next questions are about any physical, mental, or emotional conditions that cause serious difficulties with daily activities.

26. Are you deaf, or do you have serious difficulty hearing?

- Yes
- No

27. Are you blind, or do you have serious difficulty seeing, even when wearing glasses?

- Yes
- No

28. Do you have serious difficulty walking or climbing stairs?

- Yes
- No → Go to #30

29. Did this serious difficulty with walking or climbing stairs begin before age 22?

- Yes
- No

30. Do you have difficulty dressing or bathing?

- Yes
- No → Go to #32

31. Did this difficulty with dressing or bathing begin before age 22?

- Yes
- No

32. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

- Yes
- No

33. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone, such as visiting a doctor's office or shopping?

- Yes
- No → Go to #35

34. Did this difficulty doing errands alone begin before age 22?

- Yes
- No

35. Using your usual language, do you have difficulty communicating, for example understanding or being understood?

- No difficulty → Go to #37
- Some difficulty
- A lot of difficulty
- Cannot do at all

36. Did this difficulty communicating begin before age 22?

- Yes
- No

37. Do you have a developmental disability?

- Yes
- No

38. What is your gender?

- Female
- Male
- I use a different term (Please specify):

Go to #41 on page 7

39. During the past 12 months, were you pregnant at any time?

- Yes
- No → Go to #41 on page 7

40. Are you currently pregnant?

- Yes
- No

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These next questions are about medical conditions you may have.

41. Has a doctor or other health professional **ever** told you that you had **high blood pressure**, also called hypertension?
- Yes
 No
42. Has a doctor or other health professional **ever** told you that you had a **heart attack**, also called myocardial infarction?
- Yes
 No
43. Has a doctor or other health professional **ever** told you that you had **angina or coronary heart disease**?
- Yes
 No
44. Has a doctor or other health professional **ever** told you that you had a **stroke**?
- Yes
 No
45. Has a doctor or other health professional **ever** told you that you had **congestive heart failure**, which is when your heart can't pump enough blood to meet the body's needs?
- Yes
 No
46. Has a doctor or other health professional **ever** told you that you had **high cholesterol**?
- Yes
 No
47. Has a doctor or other health professional **ever** told you that you had **diabetes**?
- Yes
 Borderline
 No → Go to #49

- 48. (If yes or borderline) Was your diabetes only during a time associated with a pregnancy?
- Yes, only when pregnant
 No
 Does not apply (Never been pregnant)

49. Has a doctor or other health professional **ever** told you that you had **chronic obstructive pulmonary disease**, also called COPD?
- Yes
 No
50. Has a doctor or other health professional **ever** told you that you had **asthma**?
- Yes
 No
51. Has a doctor or other health professional **ever** told you that you had **cancer**?
- Yes
 No

MENTAL HEALTH

The next questions are about your mental or emotional health. You do not have to answer any questions that make you uncomfortable.

52. In general, would you say that your **mental health** is excellent, very good, good, fair, or poor?
- Excellent
 Very good
 Good
 Fair
 Poor
53. Thinking about your **mental health**, which may include stress, depression, problems with emotions, or substance abuse, for how many days, **during the past 30 days** did a mental health condition or emotional problem keep you from doing your work or other usual activities?
- Days
54. How often do you feel that you lack companionship?
- Hardly ever
 Some of the time
 Often

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55. How often do you feel left out?
- Hardly ever
 Some of the time
 Often
56. How often do you feel isolated from others?
- Hardly ever
 Some of the time
 Often
57. During the past two weeks, how often have you been bothered by feeling nervous, anxious, or on edge? Would you say...
- Nearly every day
 More than half the days
 Several days
 Not at all
58. During the past two weeks, how often have you been bothered by not being able to stop or control worrying? Would you say...
- Nearly every day
 More than half the days
 Several days
 Not at all
59. During the past two weeks, how often have you been bothered by feeling down, depressed, or hopeless? Would you say...
- Nearly every day
 More than half the days
 Several days
 Not at all
60. During the past two weeks, how often have you been bothered by having little interest or pleasure in doing things? Would you say...
- Nearly every day
 More than half the days
 Several days
 Not at all

SUBSTANCE USE

The next few questions are about your experiences with tobacco, alcohol, and other substances. The answers that you give us are important to this study's success, and only the combined responses from all survey participants will be reported, not just one person's answers.

61. Have you smoked at least 100 cigarettes in your entire life?

- Yes
 No → Go to #63

→62. Do you now smoke cigarettes every day, some days, or not at all?

- Every day
 Some days
 Not at all

63. Have you ever used an electronic cigarette or vaping product, even one time?

- Yes
 No → Go to #65

→64. Do you now use electronic cigarettes or vaping products every day, some days, rarely, or not at all?

- Every day
 Some days
 Rarely
 Not at all

65. During the past 30 days, on how many days did you have at least one drink of an alcoholic beverage such as beer, wine, a malt beverage or liquor?

Enter "0" if you have not had an alcoholic beverage during the past 30 days.

Days

If you answered 0 days → Go to #68 on page 9

For women who answered more than 0 days → Go to #66 on page 9

For men who answered more than 0 days → Go to #67 on page 9



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66. (If woman) During the past 30 days, considering all types of alcoholic beverages, on how many days, if any, did you have 4 or more drinks on an occasion?

Days → Go to #68

67. (If man) During the past 30 days, considering all types of alcoholic beverages, on how many days, if any, did you have 5 or more drinks on an occasion?

Days

The next questions ask about marijuana and cannabis products. When answering these questions, please **do not include** CBD or other hemp products that have no or small amounts of THC and are not intended to cause a “high”.

68. Have you **ever**, even once, used marijuana, cannabis, or any form of THC product such as edibles, oils, and food products?

- Yes
 - No
 - Don't know
- } Go to #70

→ 69. **During the past 30 days**, have you used marijuana, cannabis, or any form of THC product every day, some days, rarely, or not at all?

- Every day
- Some days
- Rarely
- Not at all

The next questions ask about using prescription pain relievers, such as Oxycontin (oxycodone), Vicodin (hydrocodone), and Opana (oxymorphone). When answering these questions, please **do not include** pain relievers such as aspirin, Tylenol, Aleve, and Advil, or other ibuprofens.

70. **During the past 12 months**, have you been prescribed a pain reliever by a doctor?

- Yes → Continue to #71
 - No
 - Don't know
- } Go to #73

71. **During the past 12 months**, have you used a prescription pain reliever in any way a doctor did not direct you to use it?

- Yes
 - No
 - Don't know
- } Go to #73

72. **During the past 12 months**, have you used a prescription pain reliever in greater amounts, more often, or longer than a doctor told you to take it?

- Yes
- No
- Don't know

73. **During the past 12 months**, have you used a prescription pain reliever that was **not prescribed for you** by a doctor?

- Yes
- No
- Don't know

HEALTH CARE

The next set of questions asks about your use of health care services.

74. When you are sick or need advice about your health, do you usually receive care at one place, more than one place, or no place at all?

- One place
- More than one place
- No place at all → Go to #76 on page 10

→ 75. **Where do you usually receive care or advice about your health?**

- A doctor's office or health center, including by phone or video call
- A hospital emergency room
- An urgent care center, including by phone or video call
- A clinic in a pharmacy or grocery store
- Some other place

76. **During the past 12 months**, did you see a doctor or other healthcare provider...?

	Yes	No
a. In-person	<input type="radio"/>	<input type="radio"/>
b. By audio-only call without video	<input type="radio"/>	<input type="radio"/>
c. By video call with audio	<input type="radio"/>	<input type="radio"/>

This next question asks you about telehealth. Telehealth lets a doctor, nurse, or other healthcare provider care for you without an in-person office visit. Telehealth appointments are usually done online (using a computer, tablet, or smartphone) or by phone.

77. **During the past 12 months**, how many times have you had a **telehealth** visit with a doctor, nurse, or other healthcare provider?

- 0 times
- 1-2 times
- 3-6 times
- 7 or more times

78. **About how long has it been since you last visited a doctor or other health professional for a routine checkup?** A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition. If you are unsure, please make your best estimate.

- Within the last 12 months
- More than 12 months ago
- I have never seen a doctor for a routine checkup

79. **During the past 12 months**, how many times were you a patient in a hospital emergency room?

- 0 times
- 1-2 times
- 3-6 times
- 7 or more times

We would now like to ask you a couple of questions about vaccines.

80. **During the past 12 months**, have you had a shot or vaccine for the flu?

- Yes
- No
- Don't know

81. Have you **ever** had a shot or vaccine for any of the following?

	Yes	No	Don't know
a. Shingles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Pneumonia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. COVID-19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

82. **Currently**, how hesitant are you to receive the following vaccines?

	Very hesitant	Somewhat hesitant	Not that hesitant	Not at all hesitant
a. Shingles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Pneumonia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Flu	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. COVID-19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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These next questions ask about different types of care you may have needed and whether or not you were able to get this needed care.

83. **During the past 12 months, was there a time when you needed dental care?**

- Yes, I needed dental care
- No, I did not need dental care → Go to #86

84. **Were you able to get the dental care that you needed?**

- Yes, I got the dental care I needed → Go to #86
- No, I **did not get** the dental care I needed

85. **Why did you not get the dental care you needed during the past 12 months? Please select "yes" or "no" for each reason.**

	Yes	No
a. I thought it would cost too much	<input type="radio"/>	<input type="radio"/>
b. I did not have transportation to or from appointments	<input type="radio"/>	<input type="radio"/>
c. The provider was not available when I needed to go	<input type="radio"/>	<input type="radio"/>
d. I could not find a provider who would accept my insurance	<input type="radio"/>	<input type="radio"/>
e. Another reason not listed (Please specify) ↓	<input type="radio"/>	<input type="radio"/>

86. **During the past 12 months, was there a time when you needed vision care, eyeglasses, or lenses?**

- Yes, I needed vision care, eyeglasses, or lenses
- No, I did not need vision care, eyeglasses, or lenses → Go to #89 on page 12

87. **Were you able to get the vision care, eyeglasses, or lenses that you needed?**

- Yes, I got the vision care, eyeglasses, or lenses I needed → Go to #89 on page 12
- No, I **did not get** the vision care, eyeglasses, or lenses I needed

88. **Why did you not get the vision care, eyeglasses, or lenses you needed during the past 12 months? Please select "yes" or "no" for each reason.**

	Yes	No
a. I thought it would cost too much	<input type="radio"/>	<input type="radio"/>
b. I did not have transportation to or from appointments	<input type="radio"/>	<input type="radio"/>
c. The provider was not available when I needed to go	<input type="radio"/>	<input type="radio"/>
d. I could not find a provider who would accept my insurance	<input type="radio"/>	<input type="radio"/>
e. Another reason not listed (Please specify) ↓	<input type="radio"/>	<input type="radio"/>

89. During the past 12 months, was there a time when you needed mental or emotional health care or counseling services?

- Yes, I needed mental or emotional health care or counseling services
- No, I did not need mental or emotional health care or counseling services → **Go to #92**

90. Were you able to get the mental or emotional health care or counseling services that you needed?

- Yes, I got the mental or emotional health care or counseling services I needed → **Go to #92**
- No, I **did not get** the mental or emotional health care or counseling services I needed

91. Why did you not get the mental or emotional health care or counseling services you needed during the past 12 months? Please select "yes" or "no" for each reason.

	Yes	No
a. I thought it would cost too much	<input type="radio"/>	<input type="radio"/>
b. I did not have transportation to or from appointments	<input type="radio"/>	<input type="radio"/>
c. The provider was not available when I needed to go	<input type="radio"/>	<input type="radio"/>
d. I could not find a provider who would accept my insurance	<input type="radio"/>	<input type="radio"/>
e. Another reason not listed (Please specify) ↓	<input type="radio"/>	<input type="radio"/>

92. Have you ever needed treatment for your use of alcohol or other drugs, not including nicotine products?

- Yes
 - No
 - I have never used alcohol or other drugs
- } **Go to #96 on page 13**

93. During the past 12 months, was there a time when you needed treatment for your use of alcohol or other drugs, not including nicotine products?

- Yes, I needed treatment for alcohol or other drugs, not including nicotine products
- No, I did not need treatment for alcohol or other drugs, not including nicotine products → **Go to #96 on page 13**

94. Were you able to get the treatment you needed for your use of alcohol or other drugs, not including nicotine products?

- Yes, I got the treatment I needed for alcohol or other drugs, not including nicotine products → **Go to #96 on page 13**
- No, I **did not get** the treatment I needed for alcohol or other drugs, not including nicotine products

95. Why did you not get the treatment you needed for your use of alcohol or other drugs, not including nicotine products, during the past 12 months? Please select "yes" or "no" for each reason.

	Yes	No
a. I thought it would cost too much	<input type="radio"/>	<input type="radio"/>
b. I did not have transportation to or from appointments	<input type="radio"/>	<input type="radio"/>
c. The provider was not available when I needed to go	<input type="radio"/>	<input type="radio"/>
d. I could not find a provider who would accept my insurance	<input type="radio"/>	<input type="radio"/>
e. Another reason not listed (Please specify) ↓	<input type="radio"/>	<input type="radio"/>

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96. **During the past 12 months**, was there a time when you were **not** able to fill a prescription?

- Yes, there was a time I was **not** able to fill a prescription
- No, I was able to fill all my prescriptions
- I did not have any prescriptions in the past 12 months

Go to #98

97. **Thinking about the most recent time you were not able to fill a prescription, why were you not able to fill it? Please select "yes" or "no" for each reason.**

	Yes	No
a. I could not afford to pay for the prescription	<input type="radio"/>	<input type="radio"/>
b. I did not have transportation to or from the pharmacy	<input type="radio"/>	<input type="radio"/>
c. The pharmacy was not open when I needed to go	<input type="radio"/>	<input type="radio"/>
d. I could not find a pharmacy that would accept my insurance	<input type="radio"/>	<input type="radio"/>
e. I ran out of refills	<input type="radio"/>	<input type="radio"/>
f. My insurance would not cover the prescription	<input type="radio"/>	<input type="radio"/>
e. Another reason not listed (Please specify)	<input type="radio"/>	<input type="radio"/>

FINANCIAL SITUATION

These next questions are about your financial situation.

98. **During the past 12 months**, how difficult has it been for your household to pay for usual household expenses, such as food, rent or mortgage, medical expenses, and so on?

- Not at all difficult
- A little difficult
- Somewhat difficult
- Very difficult

99. **During the past 12 months**, at any point did you have difficulty paying your rent or mortgage?

- Yes
- No
- I did not have rent or a mortgage during the past 12 months

Go to #101

100. **During the past 12 months**, were you forced to move because you couldn't pay your rent or mortgage?

- Yes
- No

101. **During the past 12 months**, at any point did you have difficulty paying medical bills for yourself or anyone else in the family or household?

- Yes
- No
- I did not have any medical bills during the past 12 months

102. **During the past 12 months**, at any point did you have difficulty paying any debt that you have?

- Yes
- No
- I did not have any debt during the past 12 months

103. At any time in the past 12 months, have you worried whether your food would run out before you got money to buy more?

- Yes
- No

104. At any time in the past 12 months, have you run out of food before you got money to buy more?

- Yes
- No

105. During the past 12 months, at any point did you have difficulty paying for food for your family or household?

- Yes
- No
- I did not buy food for my family or this household during the past 12 months

106. During the past 30 days, have you used an EBT or Food Stamp benefit card?

- Yes
- No

107. During the past 12 months, at any point did you have difficulty accessing reliable transportation?

- Yes
- No

Now we have a question about your community.

108. How big of a problem do you think the following issues are in your community?

	A very big problem	A moderately big problem	A small problem	Not a problem at all
a. Access to transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Drug addiction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Lack of jobs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Paying for food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Paying for housing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Problem not mentioned, (Please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

WORK STATUS

Now we'd like to ask you some questions about your current work situation.

109. Last week did you have a job, either full or part-time?

- Yes → Continue to #110 on page 15
- No → Go to #115 on page 15

WORKING

110. (If working) Thinking about just last week, how many hours did you work? If you are unsure, please make your best guess.

										Hours
--	--	--	--	--	--	--	--	--	--	-------

111. How long have you had your current job? If you are unsure, please make your best guess.

- Less than 3 months
- 3 months to 6 months
- More than 6 months to 1 year
- More than 1 year

These next few questions ask about employment and health insurance.

112. Does your employer or labor union offer health insurance to any of its employees? If you are self-employed, please answer "Does not apply."

- Yes
 - No
 - Does not apply
- } Go to #118 on page 16

113. Are you currently eligible to participate in your employer or union health insurance?

- Yes
- No → Go to #118 on page 16



If you are eligible for your employer/ union health insurance but do not participate in it → Continue to #114

Everyone else → Skip to #118 on page 16

114. Please tell us whether each of the following was a reason you are not participating in your employer or labor union health insurance.

	Yes	No
a. It costs too much.	<input type="radio"/>	<input type="radio"/>
b. I have other insurance.	<input type="radio"/>	<input type="radio"/>
c. I do not need it.	<input type="radio"/>	<input type="radio"/>

→ Go to #118 on page 16

--	--	--	--	--	--	--	--	--	--

NOT WORKING

115. (If not working) During the past 30 days, did you look for work?

- Yes
- No

116. People are not working for various reasons. Why were you not working last week? Please select "yes" or "no" for each reason.

	Yes	No
a. I am retired	<input type="radio"/>	<input type="radio"/>
b. I am caring for a child/adult family member	<input type="radio"/>	<input type="radio"/>
c. I have at least one physical or mental health limitation	<input type="radio"/>	<input type="radio"/>
d. I am in a job training program or in school	<input type="radio"/>	<input type="radio"/>
e. I could not find work	<input type="radio"/>	<input type="radio"/>
f. I do not have reliable transportation	<input type="radio"/>	<input type="radio"/>
g. Some other reason (Please specify)	<input type="radio"/>	<input type="radio"/>



If you are currently covered by Medicaid → Continue to #117

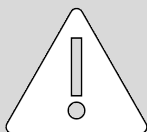
If you are not currently covered by Medicaid → Skip to #118 on page 16

117. Does having Medicaid coverage affect your ability to look for work?

- Makes it easier
- Has no effect
- Makes it harder
- Don't know

118. At any time during the last 12 months, were you self-employed? *This may be in addition to your main job.*

- Yes
- No



If you are currently covered by Medicaid and currently working (including self-employed) → Continue to #119

Everyone else → Skip to #120

119. Does having Medicaid coverage affect your ability to work?

- Makes it easier
- Has no effect
- Makes it harder
- Don't know

Now we'd like to ask you about changes to your job situation during the past 12 months.

120. During the past 12 months, did you lose a job? *By 'lose a job,' we mean getting fired, let go, or laid off, meaning that you no longer work in that job.*

- Yes
- No
- Don't know

121. During the past 12 months, did you choose to leave a job? *By 'leave a job,' we mean quitting or voluntarily deciding to no longer work in that job.*

- Yes → Continue to #122
- No
- Don't know } Go to #123

122. Why did you choose to leave that job? *Please select "yes" or "no" for each reason. If you chose to leave more than one job during the past 12 months, please refer to the most recent job you left.*

	Yes	No
a. The pay was too low	<input type="radio"/>	<input type="radio"/>
b. There were not enough opportunities for advancement	<input type="radio"/>	<input type="radio"/>
c. I felt disrespected at work	<input type="radio"/>	<input type="radio"/>
d. Because of childcare issues	<input type="radio"/>	<input type="radio"/>
e. There was not enough flexibility in work schedule or hours	<input type="radio"/>	<input type="radio"/>
f. The benefits, such as health insurance, weren't good	<input type="radio"/>	<input type="radio"/>
g. Because of transportation issues	<input type="radio"/>	<input type="radio"/>

DEMOGRAPHICS

The next few questions are for general classification purposes.

123. How old were you on your last birthday?

		Years
--	--	-------

124. What is the highest level of school you have completed or the highest degree received?

- Less than 8th grade
- Some high school, but no diploma
- GED
- High school or vocational/trade school graduate
- Some college, but no degree
- Associate degree (1-2 year occupational, technical or academic program)
- Four-year college graduate/bachelor's degree
- Advanced degree (including master's, professional degree, or doctorate)

--	--	--	--	--	--	--	--

125. What is your current marital status?

- I am married
- I am widowed
- I am divorced
- I am separated
- I have never been married

126. Have you ever served in the United States Armed Forces?

- Yes
- No → Go to #128

▶ **127. Are you currently serving in the United States Armed Forces?**

- Yes
- No

128. Are you of Hispanic, Latino, or Spanish origin?

- Yes
- No

129. Which one or more of the following would you say is your race? Select all that apply.

- White
- Black or African American
- Asian
- Native American, American Indian, or Alaskan Native
- Native Hawaiian or Pacific Islander
- Hispanic, Latino, Spanish
- Other

130. About how much do you weigh without shoes? If currently pregnant, consider your weight just before your current pregnancy.

Pounds

131. About how tall are you without shoes?

Feet Inches

The next few questions ask about your income so that the survey sponsors can find out how income relates to health insurance coverage and access to health care.

132. How many family members, including yourself, are supported by the family's total income? Please include yourself. Total income includes money from jobs, business, farm, pensions, investments, social security payments and other income received before taxes or other deductions.

Family Members

133. Are there any other family members who do not live in your home who are also supported by the family's total income?

- Yes
- No → Go to #135

▶ **134. How many other family members who do not live in your home are also supported by the family's total income?**

Other Family Members

135. What is your best estimate of you and your family members' income last month before taxes and other deductions? This includes family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.

\$,

136. What is your best estimate of you and your family members' total 2022 annual income before taxes and deductions? This includes family members living inside and outside the household supported by you. All of the information you provide will be kept strictly confidential.

\$,

137. How many members of your household, including yourself, are 19 years of age or older?

		Adults
--	--	--------

138. Including yourself, how many adult members of your family, age 19 and over, live in this household? Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.

		Adults
--	--	--------

139. How many children 18 years of age or younger live in your household, whether they are family members or not?

		Children
--	--	----------

If you are completing this survey for someone else → Continue to #142

Everyone else → Go to #143

- 142. What is your relationship to this person?**
- I am this person's wife/female partner
 - I am this person's husband/male partner
 - I am this person's mother
 - I am this person's father
 - I am this person's daughter
 - I am this person's son
 - I am this person's grandmother
 - I am this person's grandfather
 - I am this person's aunt
 - I am this person's uncle
 - I am this person's sister
 - I am this person's brother
 - I am this person's other female relative
 - I am this person's other male relative
 - I am this person's female legal guardian
 - I am this person's male legal guardian
 - I am this person's foster mother
 - I am this person's foster father
 - I am this person's other female non-relative
 - I am this person's other male non-relative

CONTACT INFORMATION

- 143. We would like to thank you again for your participation. Is it okay if we contact you with follow-up questions?**
- Yes
 - No → Go to #149 on page 19

▶144. Please enter your email address:

If there are no children → Skip to #142

If there is at least one child → Continue to #140

140. How many of the children living in your household are members of your family? Please only count individuals 18 years of age or younger. Family means two or more persons residing together who are related by birth, marriage, partnership, adoption or legal guardianship.

		Children
--	--	----------

141. Are you a parent of any of the children living in your household? A parent includes stepparents, foster parents, and legal guardians.

- Yes
- No

--	--	--	--	--	--	--	--

145. What is your phone number?

				-					-					
--	--	--	--	---	--	--	--	--	---	--	--	--	--	--

146. Is this a cell phone number?

- Yes
 No → Go to #148

147. May we text you?

- Yes
 No

148. What is your preferred method of contact?

- Email
 Call
 Text

149. In order to mail you your \$10 as a token of appreciation for completing this survey, we need to collect your name and mailing address:

First Name:

Last Name:

Address:

Apartment:

City:

State:

Zip Code:

150. Please select how you would like to receive your \$10 in the mail:

- Physical Visa Gift Card
 Check

Thank you for your participation!

Please return this questionnaire in the envelope provided.

If you have lost the envelope or did not receive one, please return this questionnaire to:

RTI International
Attn: Data Capture (0219168.000.005)
5265 Capital Boulevard
Raleigh, NC 27690-1653

You will receive your \$10 VISA gift card or \$10 check in three to four weeks by mail.

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Appendix C: Pilot Test Report

October 25, 2023

2023 Ohio Medicaid Assessment Survey (OMAS)

Pilot Test Report

Prepared for

**Ohio Colleges of Medicine
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1. Goals and Objectives of the OMAS Pilot Test

RTI International conducted a Pilot Test of the 2023 Ohio Medicaid Assessment Survey (OMAS) survey instrument. This report describes the methods and results of the Pilot Test. The OMAS Pilot Test was conducted under the supervision of the OMAS Executive Committee, which consists of leadership from the Ohio Department of Medicaid, the Ohio Colleges of Medicine Government Resource Center (GRC), and RTI.

The goal of the Pilot Test was to test the instrument that would be administered to the two sample groups (Address-Based Sampling [ABS] and Medicaid list frames) and to evaluate the internal systems that would manage a complex survey.

The objectives of the Pilot Test were to test the accuracy of the computer-assisted web interview (CAWI) and computer-assisted telephone interview (CATI) programs, test the functionality of the systems used to administer and manage the survey, assess questionnaire flow and burden, measure survey timing for respondents, identify potential fielding issues, and develop an improved understanding of interviewer training needs.

2. Sampling and Instrument Structure

The 2023 OMAS utilizes a single survey instrument but consists of two sampling populations. The first, OMAS Main ABS, is the general population component of the study and targets approximately 25,000 survey completions from non-institutionalized Ohio residents aged 19 and older who have lived in the state of Ohio for at least 1 month. The second, OMAS Medicaid, is a smaller component of the study that targets approximately 10,000 survey completions from Ohio Medicaid beneficiaries.

The OMAS Main ABS pilot sample was drawn from the U.S. Postal Service's Computerized Delivery Sequence file using the same protocol that will be used for the main fielding. For the Pilot Test, 500 individuals residing in Ohio were randomly selected for mailing. Those who respond to the ABS invitation will be excluded from the OMAS main fielding. These cases were only directed to the CAWI survey.

The OMAS Medicaid sample was drawn from the May 2023 Medicaid eligibility and enrollment data file. For the Pilot Test, 1,000 individuals were randomly selected for outbound dialing only and 248 were selected for mailing, where they would be directed to the CAWI survey. Those who respond to the Medicaid invitation will be excluded from the OMAS mainfielding.

There are two main components within the OMAS instrument: the adult portion of the survey and the child portion of the survey. Although all OMAS sample members are administered the adult portion of the survey, only sample members within the ABS sample who take the survey by web are offered the child portion if they meet the eligibility criteria.

3. Methods and Differences From Main Fielding

The Pilot Test had several methodological differences from the main study. The calling component of the Pilot Test was conducted over 3 days, from June 28 through June 30, 2023, while calling during the main study will occur throughout a period of approximately 14 weeks, from mid-September through the end of December, and will be augmented through the use of text messaging. Additionally, the mailing component of the Pilot Test only sent sample members a single invitation on June 28 that invited them to complete the survey by web. For the main study, three mailing materials will be sent to sample members in the Medicaid sample group, and five mailing materials will be sent to respondents in the ABS group. Further, unlike the Pilot Test, sample members in the ABS group will also receive a paper survey and will also be presented with an option to call RTI and complete the survey by phone. Despite these differences, the Pilot Test was still able to test the production systems of highest importance and successfully evaluate the instrument.

4. Instrument Development, Programming, and Testing

The design of the 2023 OMAS represents a significant change compared to previous iterations of the OMAS in terms of instrumentation. Although many historical questions were retained, a number of new questions were introduced for 2023, some questions were retired, and others were refined to improved measurement validity. In addition, the survey was designed from the beginning with the intent of being developed into a CATI, CAWI, and paper-and-pencil interview instrument. This impacted the decision to reorder certain questions, restructure other questions so that they functioned optimally across the various modes, and increase the specificity of some questions that had the potential to be interpreted in multiple ways. Further, with the 2023 OMAS, respondents from two sample groups—a larger main ABS group and a smaller Medicaid group—would both complete this survey, but they would be asked slightly different questions, which introduced additional display logic that was not present with prior OMAS instruments.

The GRC, in collaboration with state sponsors, developed an initial draft copy of the instrument in the spring of 2023. Then the GRC research team and RTI survey methodologists collaborated to refine the instrument over a series of team meetings. RTI survey methodologists then developed the questions into combined CAWI-CATI programming specifications, modifying questions as needed to make them appropriate for self- and interviewer-administered format, and reviewed the changes with the GRC research team as the development progressed.

Upon finalizing the programming specifications for the Pilot Test, the instrument was then programmed using Voxco CATI and Voxco CAWI survey software, which was utilized for pilot testing. The first testing phase was conducted by RTI in June 2023. This testing checked the instruments for skip logic, flow, validation, and transition errors; visual design/mobile accessibility of the CAWI; and interviewer prompts of the CATI. Special emphasis was placed on ensuring that the display logic of questions functioned properly for each of the two sample groups. When appropriate, RTI survey methodologists suggested content changes to GRC. Upon completing RTI internal testing and making any applicable instrument updates, GRC tested the instruments during a second testing phase. GRC test

findings were recorded in a testing log. After RTI updated the Voxco instruments with GRC's test findings/recommendations, RTI performed a final test of the instrument and prepared it for piloting.

A more comprehensive discussion of instrument development, programming, and testing will be provided with the final 2023 OMAS Methods Report at the end of the project.

5. Results of the OMAS Pilot Test

In total, 84 responses to the Pilot were received: 71 by web and 13 by phone.

Respondents who completed the survey by phone were exclusively a part of the smaller Medicaid sample group, as only sample members in this group will be contacted through outbound calling during main fielding. Section 5.1 below summarizes the instrument timing for phone completions. Respondents who completed the survey by web were in either the larger main ABS sample group or the smaller Medicaid sample group, as sample members in both groups will be invited to complete the survey by web during main fielding. Section 5.2 below summarizes the instrument timing for web completions.

5.1. CATI Instrument Timing

Section	Start Location	End Location	Number of Interviews	Time to Complete (in minutes)							
				Mean	Min	10 th	25 th	Median	75 th	90 th	Max
1	INTRO	S14a	13	4.82	3.55	3.68	4.03	4.70	5.60	6.18	7.07
2	A1	C4	13	3.00	2.00	2.30	2.77	2.92	3.33	3.72	4.12
3	D30	CNCR	13	5.30	3.85	4.40	5.02	5.18	5.75	6.60	6.82
4	MTL_HEALTH	PRESC_4	13	5.32	4.00	4.35	4.65	5.27	6.17	6.38	6.52
5	F67	VAC_HES	13	4.33	3.43	3.47	3.68	4.07	4.95	5.15	6.93
6	ND_DNTL	UNMT_PRS_RS	13	2.12	1.35	1.38	1.43	1.75	2.73	3.12	3.47
7	Q1_NEW	CM_PRB_OE	13	3.08	2.40	2.47	2.73	3.12	3.37	3.60	3.65
8	G71	MCD_LK_WRK_OE	13	2.75	1.65	1.88	2.08	2.38	3.40	4.23	4.48
9	MRD	H84_A3CATS	13	3.77	2.58	2.98	3.28	3.47	4.18	4.47	5.92
17	INCENT	Thanks	13	2.19	1.15	1.27	1.47	1.83	2.65	3.32	4.43
Average Total			13	36.68	30.73	31.70	33.03	35.38	40.17	40.90	44.02

Respondents who completed the survey by phone had a median completion time of 35.4 minutes, based on 13 interviews. All of these interviews only consisted of the adult section of the OMAS, because the child section is only offered to ABS respondents.

5.2. CAWI Instrument Timing

Section	Start Location	End Location	Number of Interviews	Time to Complete (in minutes)							
				Median and Other Percentiles							
				Mean	Min	10 th	25 th	Median	75 th	90 th	Max
1	INTRO	S14a	71	2.01	0.85	1.08	1.27	1.65	2.33	3.48	6.12
2	A1	C4	71	1.62	0.40	0.72	0.98	1.32	1.90	2.92	5.52
3	D30	CNCR	69	2.72	1.10	1.30	1.72	2.23	3.27	5.00	7.53
4	MTL_HEALTH	PRESC_4	71	2.81	0.97	1.25	1.65	2.18	2.97	4.98	14.23
5	F67	VAC_HES	71	1.78	0.57	0.92	1.05	1.48	2.12	3.08	4.98
6	ND_DNTL	UNMT_PRS_RS	70	1.00	0.23	0.39	0.58	0.88	1.17	1.83	3.80
7	Q1_NEW	CM_PRB_OE	71	2.45	0.77	0.92	1.18	1.75	2.82	4.45	12.12
8	G71	MCD_LK_WRK_OE	69	1.19	0.40	0.52	0.73	1.03	1.50	2.07	4.07
9	MRD	H84_A3CATS	69	2.50	0.65	1.13	1.38	2.05	3.13	5.12	7.50
10	PREPI90	I95	13	0.96	0.53	0.58	0.63	0.93	1.13	1.42	1.93
11	J96	K96_new	12	0.60	0.10	0.10	0.11	0.13	0.51	2.42	2.75
12	L125	LAS12B	12	0.96	0.12	0.48	0.61	0.76	1.42	1.83	1.92
13	N136	VAC_C_HES	11	1.46	0.65	0.85	0.85	1.23	1.55	2.50	3.75
14	O139_1	UNMT_MTL_RS_C	11	0.18	0.05	0.05	0.07	0.12	0.20	0.30	0.65
15	ACE_3	TN_MRJ	11	1.55	0.58	0.65	0.73	1.08	1.63	2.28	5.95
16	P149	PL125A1	11	0.33	0.13	0.15	0.18	0.27	0.43	0.57	0.80
17	INCENT	Thanks	67	1.70	0.28	0.55	0.82	1.38	2.02	3.27	7.25
Average Total			71	20.01	1.75	10.95	13.42	16.52	23.00	34.15	55.93
Average Total Adult			71	19.03	1.75	10.77	11.92	16.23	22.92	32.30	55.93
Average Total Child			13	5.36	1.37	2.90	3.57	4.10	5.62	10.97	13.88

Respondents who completed the survey by web had a median completion time of 16.5 minutes for the adult component, based on 71 responses. In addition, the median completion time of the child component of the survey added an additional 4.1 minutes to complete the survey, based on 13 completions of the child component.

6. Interviewer Comments, Recommendations, and Updates

Interview and supervisor feedback on pilot tests and training is routinely collected. During the 2023 OMAS Pilot Test, a major challenge interviewers encountered was getting sample members engaged

enough to complete the survey, and many sample members would hang up, during the introductory text, before reaching the sample member's name.

A major suggestion pertained to the use of select all that apply questions. With the capability to now implement these in a way that meets Ohio State University's digital accessibility standards, RTI recommended converting select all that apply questions to forced choice yes-no format, so that respondents would select a response for each individual response category within these multi-response questions. Methodologically, it has the potential to provide better data, and this format will work well across the three modes that the OMAS will be administered in.

Following a review of the Pilot Test data, in addition to making minor wording revisions to multiple questions, GRC decided to make the following updates:

- Removed all section headers, so that respondents do not see headers when completing the survey, reducing the text a respondent needs to read and freeing up screen space on mobile devices.
- Removed five questions (OTRCH, OTRCH_FM, EMPH, FRC_MV, OTRCH_C, OTRCH_FM_C) that were determined not to be critical to core analytical needs.
- ACE3: Added wording to further emphasize respondent confidentiality: *"These things can happen in any family, but some people may feel uncomfortable with these questions. You may skip any questions you do not want to answer. Please remember your personal information will not be shared with anyone and you will not be identified."*
- Child_DD: Removed the word "currently" so the text now reads, *"Does {CH_NAME} have a developmental disability?"*
- CM_PRB: Restructured the Community problem question, which was originally opened-ended, replacing it with a closed-ended list of multiple randomized sub-items.
- G71: Changed the word "job" to "work" to account for additional means of earning pay.
- J108B_RS: Restructured question to use a yes-no forced choice grid, and changed question stem to read, *"Why did you not get all the help you needed arranging or coordinating care for {CH_NAME}? Please select "yes" or "no" for each reason."*
- NTWK_RS: Restructured question to use a yes-no forced choice grid, and changed question stem to read, *"People are not working for various reasons. Why were you not working last week? Please select "yes" or "no" for each reason."*
- O139_1: Changed the question to include the name of the child in the intro, now reading, *"These next questions ask about different types of care {CH_NAME} may have needed and whether or not {CH_NAME} was able to get this needed care."*
- P148 and P148_1: Moved child gender questions to near the end of the intro section, so they now come after the respondent's relationship to the child question (I90B).
- PRESC_1: Expanded the introduction of the question to differentiate non-opioid and opioid pain relievers to read, *"The next questions ask about using prescription pain relievers, such as Oxycontin (oxycodone), Vicodin (hydrocodone), and Opana (oxymorphone). When answering these questions, please do not include pain relievers such as aspirin, Tylenol, Aleve, and Advil, or other ibuprofens."*
- PRESC_4: In CATI, interviewers added extra emphasis to if the prescription was **not** prescribed to them by a doctor.

- S15 and S15_1: Moved questions, which ask about gender, to the intro section, so they now come after the age question (S14).
- Unmet Needs Question Series (UM_DNTL_RS; UM_DRG_RS; UM_DT_RS_C; UM_MT_RS_C; UM_PRS_RS; UNMT_MTL_RS; UNMT_VS_RS): Restructured question to use a yes-no forced choice grid and changed question stem to read, *“Why did you not get the <<care type>> you needed during the past 12 months? Please select “yes” or “no” for each reason.”* In addition, a text box was added that asked respondents to provide additional details if they selected the option of *“Another reason not listed.”*
- UTLZ Series: Restructured healthcare utilization series to remove a gate question and implement with yes-no forced choice grid.
- UTLZ_CHLD Series: Restructured child healthcare utilization series to remove a gate question and implement with yes-no forced choice grid.
- VAC_C_HES (1-7): Randomized child vaccine hesitancy series grid.
- VAC_HES (1-4): Randomized vaccine hesitancy series grid.
- VACRC_C_EVR (1-6): Randomized child vaccine series grid.
- VACRC_C_EVR: In CATI, interviewers added extra emphasis to asking if the child **ever** had each vaccine listed.
- VACRC_EVR (1-3): Randomized vaccine series grid.
- VACRC_EVR: In CATI, interviewers added extra emphasis to asking if respondents **ever** had each vaccine listed.
- WHY_LV_JB: Restructured question to use a yes-no forced choice grid, and changed question stem to read, *“Why did you choose to leave that job? Please select “yes” or no” for each reason. If you chose to leave more than one job during the past 12 months, please refer to the most recent job you left.”*

Appendix D: Experiment Results Report

2023 Ohio Medicaid Assessment Survey: Experiment Results Report

Prepared for

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1. Introduction and Summary

The 2023 Ohio Medicaid Assessment Survey (OMAS) was the third iteration of the OMAS that has used an address-based sampling (ABS) frame but the first to solely use an ABS frame to sample the general population.¹ In 2019, the OMAS piloted the use of an ABS frame. In that pilot study, a respondent contact protocol known as concurrent Choice+ was used. Under this design, sampled households were concurrently sent an invitation to take the survey via the web or a paper instrument. In 2021, the OMAS used a sequential design. Under the sequential design, sampled households were first sent an invitation to take the survey via the web. Then, with the second or third mailing, households were sent a paper instrument.

Because two different contact protocols had been used across two different iterations—one that offered the paper instrument with the first mailing and one that offered the paper instrument only with later mailings—it was not clear which format was most effective in Ohio for surveying the general population. Subsequently, the 2023 OMAS conducted an experiment during the first release to determine whether a sequential or concurrent administration format would be most beneficial in helping to achieve the overall project objectives.

Additionally, the 2019 and 2021 iterations sent prepaid cash incentives with the invitations. However, these cash incentives could be seen only if the outer mailing envelope was opened. Consequently, some households may have discarded the invitation (with the cash incentive inside, unseen) if they did not think the invitation seemed important. More recent Medicaid-based studies (e.g., Ohio Medicaid Next Generation [MNGE], Ohio Medicaid Telehealth Evaluation [OMTE]) used a large envelope that visibly displayed the cash pre-incentive through a transparent window. For the Medicaid populations surveyed, this led to higher response rates.

However, this approach of visibly displaying the prepaid incentive has not been used on a general population survey in Ohio. Subsequently, the 2023 OMAS conducted an additional experiment during the first release to determine whether visibly displaying the cash incentive was also beneficial in helping to meet the overall project objectives.

Upon finishing the two experiments during Release 1 of the 2023 OMAS, it was concluded that a sequential administration format and a visible prepaid cash incentive presented significant benefits over the alternatives to which they were compared, and these findings were used to structure the protocol of Release 2 of the 2023 OMAS and will be used to form the protocol used for the 2025 OMAS and beyond.

2. Experiment Research Questions

The two contact approaches offered different strengths and weaknesses. The concurrent approach immediately offered a paper option to areas—such as rural counties—that may not have had the internet penetration to maximize response. However, the concurrent approach was more costly because all households—even those that would have responded by web—were mailed a paper

¹ The 2023 OMAS used a dual-frame design, but the second frame—the Medicaid Administrative Enrollment File—was used to sample only people enrolled in Medicaid.

instrument. The sequential approach maximized response via the web as respondents were only initially provided a web invitation. However, those who could respond by paper only might have already lost interest in the study by the time the paper survey arrived, leading to lower overall response rates.

Given these strengths and weaknesses and the uncertainty of the impact of using an open-windowed envelope to visibly display the pre-incentive, two research questions were examined during the experiment:

1. Does a concurrent mailing obtain a more representative sample (especially in rural areas) compared with a sequential design, and does that improvement outweigh potential data quality issues because of increased paper survey responses?
2. Does visibly displaying the prepaid cash incentive through the outer mailing envelope increase response rates compared with an identical prepaid cash incentive that is not visible until the outer mailing envelope is opened?

3. Experiment Design

3.1. Design

To answer the research questions, the experiment used a three-arm design during Release 1 of the 2023 OMAS. The arms were as follows:

- Control (C): \$2 prepaid/\$10 post-complete² incentive, cash not visibly displayed, sequential mailing design (same as the design used with the 2021 OMAS)
- Experimental Group 1 (EG1): \$2 prepaid /\$10 post-complete² incentive, cash visibly displayed through the envelope window, sequential “push-to-web” mailing design
- Experimental Group 2 (EG2): \$2 prepaid/\$10 post-complete² (paper) or \$2/\$10² (web) incentive, cash visibly displayed through the envelope window, concurrent mailing design

Because we hypothesized that the visible cash would lead to a higher response rate and to provide better statistical power to the first research question, a higher percentage of the initial release sample was allocated to EG1 and EG2. **Table 1** displays the starting sample size that was allocated to each treatment arm and the percentage allocation for that amount of sample.

Table 1. Percentage Allocation and Starting Sample Size, by Experiment Arm

Experiment Arm	Percentage Allocation	Starting Sample Size
Control	20%	16,500
Experiment Group 1 (Sequential)	40%	32,020
Experiment Group 2 (Concurrent)	40%	32,020

² Note that respondents who also completed the child section of the OMAS received an additional \$5 incentive.

In terms of assigning sampled cases to an experiment group, the following rules were used:

1. An experiment arm was assigned to ABS cases only. No Medicaid frame sample members were part of the experiment.
2. The sample design was set up such that households were randomized within stratum. This ensured that the desired experiment allocation was controlled for by stratum.

3.2. Power Calculations to Detect Differences

The allocation used in the experiment allowed for the following detectable differences with 80% power:³

- Response rate between EG1 (sequential) and EG2 (concurrent): 1.0%
- Percentage of respondents who were Black/African American between EG1 and EG2: 3.4%
- Percentage of respondents who were low income between EG1 and EG2: 3.8%
- Response rate between C and EG2: 1.25%
- Percentage of respondents who were Black/African American between C and EG2: 3.9%
- Percentage of respondents who were low income between C and EG2: 4.4%

4. Analysis Plan of Research Questions

4.1. RQ1: Sequential versus Concurrent

To evaluate whether the sequential design (EG1) or the concurrent design (EG2) was best for OMAS, the following analyses were conducted:

1. *Comparison of response rates.* Response rates were compared overall and by county type.
2. *Comparison of mode of response and respondent characteristics.* The percentage of responses by web or paper were compared overall and by county type. A cost assessment of the impact of the difference was made.
3. *Comparison of response by respondent characteristics.* The percentages of respondents who were in areas with (1) a high percentage of non-White people, (2) a high percentage of low-income households, and (3) a high percentage of households with children were compared. Because the survey responses were not coded at the time of the analysis, the sampling strata, based on Census information, was used to identify these areas.

³ Comparisons between demographic groups (e.g., people who were Black/African American or were low income) assumed, based on the 2021 OMAS, a design effect of 2.1.

For the evaluation of RQ1, only cases assigned to EG1 and EG2 were used.

For the comparison of response rates and response by mode, chi-square tests, based on unweighted respondent counts, were used to determine whether the differences in response rates or mode counts were significantly different.

For the comparison of respondent characteristics, the design-based weights were used to account for the oversampling done in some strata. Based on the 2021 OMAS, the expected design effect was 2.1.

4.2. RQ2: Visible versus Non-Visible Prepaid Cash Incentives

To evaluate whether the visible prepaid cash incentive significantly increased response rate, the following analyses were conducted:

1. *Comparison of overall response rate.* Response rates were compared overall and by county type.
2. *Comparison of respondent characteristics.* Respondent characteristics were compared to determine whether the visible cash incentive yielded a different type of respondent.

For this research question, only sample members from C and EG1 (sequential) were used because both groups used an identical sequential administration format, with the only difference being the visible (EG1) or non-visible (C) prepaid cash incentive. EG2 sample members were not used to ensure that the contact method was controlled for in the comparison.

For each comparison or response rates, chi-square tests, based on unweighted respondent counts, were used to determine whether the differences in response rates or respondent characteristics were significantly different.

For the comparison of respondent characteristics, the design-based weights were used to account for oversampling households likely to have non-White people, low-income people, or children. The expected design effect, based on the weights from the 2021 OMAS, was 2.1.

5. Results

5.1. RQ1: Sequential versus Concurrent

To determine the best contact method moving forward, four analyses were conducted:

1. Comparing response rates (overall and by county type) by contact method
2. Comparing distribution of response by mode (overall and by county type) by contact method
3. Comparing respondent characteristics by mode of response by contact method
4. Comparing the distribution of respondent characteristics by contact method

Full analysis results can be found in **Section 7**. Following is a summary of the results and recommendations.

5.1.1 RQ1: Response Rates

Table 2 presents the number of completed surveys and response rates—overall and by county type—for each experiment group. Key findings include these:

- The number of completes (~5,750) and response rate (~18.0%) were nearly identical for the two experiment groups.
- As expected, the concurrent contact method had a higher response rate in rural Appalachia (18.5% vs. 17.3%) than the sequential method, but the 1.2% difference was not statistically significant (p-value 0.0912).
- The differences across all other county types were negligible.

Table 2. Response Rates by County Type, by Sequential and Concurrent Experiment Groups

	Experiment Group 1 (Sequential)		Experiment Group 2 (Concurrent)		Difference (RR_EG1- RR_EG2)	Significant Difference? (p-value)
	# of Completed Surveys	Response Rate	# of Completed Surveys	Response Rate		
Overall	5,734	17.9	5,751	18.0	0.0	0.8814
Rural Appalachia	1,001	17.3	1,071	18.5	-1.2	0.0912
Metro	2,825	17.2	2,750	16.7	0.5	0.2606
Rural Non-Appalachia	936	19.4	955	19.8	-0.4	0.6332
Suburban	972	19.5	975	19.5	-0.1	0.9435

5.1.2 RQ1: Mode

Table 3 presents the distribution of responses between web and paper⁴—overall and by county type—for each experiment group. Key findings include these:

- Overall, a higher number of respondents in the sequential method responded by web (80% vs. 42%). This difference was statistically significant (p-value <0.0001).
- For each county type, the sequential method had a much higher percentage of completes by web. In all cases, the differences were statistically significant.

⁴ A small (fewer than 100) number of responses were completed by in-bound telephone. These interviews were grouped with the paper group because those respondents had characteristics more similar to those of paper respondents.

Table 3. Distribution of Respondents by Mode of Interview, by Experiment Group and County Type

	Experiment Group 1 (Sequential)		Experiment Group 2 (Concurrent)		Difference (Web) (PCT_EG1-PCT_EG2)	Significant Difference? (p-value)
	Web (%)	Paper (%)	Web (%)	Paper (%)		
Overall	80.8	19.2	42.1	57.9	38.7	0.0000
Rural Appalachia	77.9	22.1	35.0	65.0	42.9	0.0000
Metro	82.4	17.6	47.6	52.4	34.8	0.0000
Rural Non-Appalachia	76.0	24.0	35.1	64.9	40.9	0.0000
Suburban	84.0	16.0	41.3	58.7	42.6	0.0000

5.1.3 RQ1: Respondent Characteristics, by Mode

By respondent characteristic, the mode of interview followed the overall distribution (table not shown in this document). Key findings include these:

- Under the sequential method, the web instrument was used by at least 74% of respondents regardless of respondent characteristic. This includes older (65 or older) respondents who typically would not respond by web.
- Under the concurrent method, only people aged 19 to 24 (90.2%), 25 to 34 (85.6%), and 35 to 44 (76.1%) responded through the web instrument at rates similar to the rates of web responses among respondents under the sequential method. Furthermore, people aged 55 or older were more likely to respond using the paper survey rather than through the web.
- Under the concurrent method, non-White groups responded by web at a rate over 50% (with Asian people using web to respond over 80% of the time), but non-Hispanic White people responded by web less than 50% of the time. This was likely correlated to the higher percentage of paper respondents in rural Appalachian and rural non-Appalachian counties compared with the metro and suburban counties among concurrent respondents.

5.1.4 RQ1: Respondent Characteristics

The distribution of respondents by experiment group differed for some characteristics but was similar for others (table not shown in this document). Key findings include these:

- The percentage of respondents within each of the targeted strata (high low-income, high non-White, and high children) did not differ by experiment group.
- The distributions of respondents by age group and race or ethnicity were statistically different across the two experiment conditions. Across age groups, the sequential group had a distribution that skewed younger than that of the concurrent group. Across self-reported race or ethnicity, the sequential group skewed more non-White than the concurrent group.

- The sequential group obtained a significantly higher percentage of respondents who completed the child survey (23% vs. 15%).
- The distributions of gender and insurance status were not statistically different by experiment group.

5.2. RQ2: Visible versus Non-Visible Prepaid Cash Incentives

To assess the benefits of using a visible prepaid cash incentive, two analyses were conducted:

1. Comparison of response rates—overall and by county type
2. Comparison of respondent distributions

5.2.1 RQ2: Comparison of Response Rates

Table 4 presents the response rates—overall and by county type—for the control (cash incentive was *not* visible through the mailing envelope) and experiment (cash incentive was visible through the mailing envelope) groups. Key findings include these:

- Overall, the response rates were significantly different (16.3% for control vs. 17.9% for the experiment group), with a p-value less than 0.0001.
- The metro and rural non-Appalachian county types had significantly different response rates at the 0.05 level, with differences of 2.0% and 2.3%, respectively.
- The response rates were nearly identical in rural Appalachia (17.0% for control vs. 17.3% for the experiment group).
- The response rates in suburban counties were borderline nonsignificantly different (17.8% for control vs. 19.5% for experiment), with a p-value of 0.0765.

Table 4. Response Rates, by Experiment Group and County Type

	Control (Non-Visible Cash)		Experiment Group 1 (Visible Cash)		Difference (RR_NON-RR_VIS)	Significant Difference? (p-value)
	# of Completed Surveys	Response Rate	# of Completed Surveys	Response Rate		
Overall	2,679	16.3	5,734	17.9	1.7	0.0000
Rural Appalachia	518	17.0	1,001	17.3	0.3	0.7382
Metro	1,271	15.2	2,825	17.2	2.0	0.0001
Rural Non-Appalachia	432	17.1	936	19.4	2.3	0.0128
Suburban	458	17.8	972	19.5	1.7	0.0765

5.2.2 RQ2: Respondent Characteristics

Key findings for the differences in respondent characteristics (table not shown in this document) include these:

- Displaying the incentive (experiment group) obtained a significantly higher number of respondents from the high low-income strata (7.7% for control vs. 9.2% for the experiment group). The 1.5% difference was significant, with a p-value of 0.0234.
- Displaying the incentive (experiment group) obtained a significantly higher number of respondents in the high non-White strata (19.3% for control vs. 21.3% for the experiment group). The 2% difference was significant, with a p-value of 0.0416.
- The experiment group did not impact the number of interviews in the high children strata or in terms of the actual number of surveys that provided responses for a child.
- The self-reported characteristics were not statistically different for any characteristic reviewed—age, race or ethnicity, gender, or insurance status.

6. Recommendations and Protocol Changes for Release 2

Based on the findings for the two research questions, we recommended the following:

1. A sequential administration method should be used for the second release in the 2023 OMAS and for the full sample in the 2025 OMAS. The higher number of web respondents without loss in response rate or desired respondent characteristics made the sequential method the better approach, yielding better data quality and improved efficiency.
2. All future mailings should visibly display the prepaid cash incentive through the outer mailing envelope. The higher overall response rate and higher number of respondents in targeted areas of interest yielded improved efficiency and significantly outweighed any added mailing costs.

After reviewing the findings, GRC agreed with RTI's recommendations and moved forward with these changes for Release 2.

7. Report Tables

Table 5. Final Respondent Disposition and Response Rates by Experiment Group (Sequential and Concurrent) by County Type

	Experiment Group 1 (Sequential)				Experiment Group 2 (Concurrent)				Difference (RR_EG1-RR_EG2)	Significant Difference ? (p-value)
	# of Completed Surveys	# of Ineligible HH	# of Nonresponding HH	Response Rate	# of Completed Surveys	# of Ineligible HH	# of Nonresponding HH	Response Rate		
Overall	5,734	22	26,264	17.9	5,751	8	26,261	18.0	0.0	0.8814
Rural Appalachia	1,001	3	4,776	17.3	1,071	1	4,708	18.5	-1.2	0.0912
Metro	2,825	14	13,591	17.2	2,750	5	13,675	16.7	0.5	0.2606
Rural Non-Appalachia	936	3	3,881	19.4	955	1	3,864	19.8	-0.4	0.6332
Suburban	972	2	4,016	19.5	975	1	4,014	19.5	-0.1	0.9435

HH = households.

NOTE: In-bound phone responses were included with paper responses.

	Experiment Group 1 (Sequential)				Experiment Group 2 (Concurrent)				Difference (Web) (PCT_EG1- PCT_EG2)	Significant Difference? (p-value)
	Web (n)	Web (%)	Paper (n)	Paper (%)	Web (n)	Web (%)	Paper (n)	Paper (%)		
White Non-Hispanic	3,579	90.4	379	9.6	1,821	43.2	2,396	56.8	47.2	0.0000
Black Non-Hispanic	643	88.7	82	11.3	360	53.7	311	46.3	35.0	0.0000
Hispanic	156	95.1	8	4.9	87	64.4	48	35.6	30.7	0.0000
Asian Non-Hispanic	97	97.0	3	3.0	65	81.3	15	18.8	15.8	0.0012
Other Non-Hispanic	136	85.0	24	15.0	79	56.0	62	44.0	29.0	0.0000
Gender										
Male	1,860	91.4	174	8.6	924	45.2	1,120	54.8	46.2	0.0000
Female	2,753	89.5	323	10.5	1,480	47.0	1,672	53.0	42.5	0.0000
Insured										
Yes	4,395	90.2	480	9.8	2,289	46.1	2,679	53.9	44.1	0.0000
No	239	95.6	11	4.4	131	56.0	103	44.0	39.6	0.0000
Interview Type										
Adult only	3,299	75.1	1,096	24.9	1,534	31.5	3,329	68.5	43.5	0.0000
Adult and child	1,336	99.8	3	0.2	887	99.9	1	0.1	-0.1	0.9227

NOTE: In-bound phone responses were included with paper responses.

NOTE: Demographic counts do not add to the total for paper responses because not all paper surveys were fully processed.

Table 8. Number and Percentage of Respondents by Experiment Group and Respondent Characteristic

	Experiment Group 1 (Sequential)		Experiment Group 2 (Concurrent)		Difference (PCT_EG1- PCT_EG2)	Significant Difference? (p-value)
	Respondents (n)	Respondents (%)	Respondents (n)	Respondents (%)		
Overall	5,734	100.0	5,751	100.0		
Strata						
High Low-Income Strata	526	9.2	485	8.4	0.7	0.1717
High Non-White Strata	1,221	21.3	1,188	20.7	0.6	0.4150
High Children	1,638	28.6	1,628	28.3	0.3	0.7748

	Experiment Group 1 (Sequential)		Experiment Group 2 (Concurrent)		Difference (PCT_EG1- PCT_EG2)	Significant Difference? (p-value)
	Respondents (n)	Respondents (%)	Respondents (n)	Respondents (%)		
Age						
19–24	233	4.5	204	3.9	0.6	0.0000
25–34	626	12.2	540	10.3	1.9	
35–44	737	14.4	661	12.6	1.8	
45–54	744	14.5	657	12.5	2.0	
55–64	1,024	20.0	986	18.8	1.1	
65–74	1,112	21.7	1,311	25.0	-3.3	
75 or older	651	12.7	877	16.7	-4.1	
Race						
White Non-Hispanic	3,958	77.5	4,217	80.4	-2.9	0.0053
Black Non-Hispanic	725	14.2	671	12.8	1.4	
Hispanic	164	3.2	135	2.6	0.6	
Asian Non-Hispanic	100	2.0	80	1.5	0.4	
Other Non-Hispanic	160	3.1	141	2.7	0.4	
Gender						
Male	2,034	39.8	2,044	39.3	0.5	0.6427
Female	3,076	60.2	3,152	60.7	-0.5	
Insured						
Yes	4,875	95.1	4,968	95.5	-0.4	0.3863
No	250	4.9	234	4.5	0.4	

	Experiment Group 1 (Sequential)		Experiment Group 2 (Concurrent)		Difference (PCT_EG1- PCT_EG2)	Significant Difference? (p-value)
	Respondents (n)	Respondents (%)	Respondents (n)	Respondents (%)		
Interview Type						
Adult only	4,395	76.6	4,863	84.6	-7.9	0.0000
Adult and child	1,339	23.4	888	15.4	7.9	

NOTE: In-bound phone responses were included with paper responses.

NOTE: Demographic counts do not add to the total for paper responses because not all paper surveys were fully processed.

Table 9. Final Respondent Disposition and Response Rate by Experiment Group (Non-Visible Cash v. Visible Cash) and County Type

	Control (Non-Visible Cash)				Experiment Group 1 (Visible Cash)				Difference (PCT_NON- PCT_VIS)	Significant Difference? (p-value)
	# of Completed Surveys	# of Ineligible HH	# of Non- responding HH	Response Rate	# of Completed Surveys	# of Ineligible HH	# of Non- responding HH	Response Rate		
Overall	2,679	19	13,802	16.3	5,734	22	26,264	17.9	1.7	0.0000
Rural Appalachia	518	1	2,521	17.0	1,001	3	4,776	17.3	0.3	0.7382
Metro	1,271	16	7,073	15.2	2,825	14	13,591	17.2	2.0	0.0001
Rural Non- Appalachia	432	2	2,096	17.1	936	3	3,881	19.4	2.3	0.0128
Suburban	458	0	2,112	17.8	972	2	4,016	19.5	1.7	0.0765

HH = households.

Table 10. Number and Percentage of Respondents by Experiment Group (Non-Visible Cash v. Visible Cash) and Respondent Characteristic

	Control (Non-Visible Cash)		Experiment Group 1 (Visible Cash)		Difference (PCT_NON- PCT_VIS)	Significant Difference? (p-value)
	Respondents (n)	Respondents (%)	Respondents (n)	Respondents (%)		
Overall	2,679	100.0	5,734	100.0		
Strata						
High Low-Income Strata	205	7.7	526	9.2	-1.5	0.0234
High Non-White Strata	518	19.3	1,221	21.3	-2.0	0.0416
High Children	779	29.1	1,638	28.6	0.5	0.6475
Age						
19–24	120	5.1	233	4.5	0.5	0.1630
25–34	274	11.6	626	12.2	-0.6	
35–44	303	12.8	737	14.4	-1.6	

	Control (Non-Visible Cash)		Experiment Group 1 (Visible Cash)		Difference (PCT_NON- PCT_VIS)	Significant Difference? (p-value)
	Respondents (n)	Respondents (%)	Respondents (n)	Respondents (%)		
45–54	322	13.6	744	14.5	-0.9	
55–64	472	20.0	1,024	20.0	0.0	
65–74	568	24.0	1,112	21.7	2.3	
75 or older	304	12.9	651	12.7	0.2	
Race						
White Non-Hispanic	1,870	79.4	3,954	77.5	1.9	0.0890
Black Non-Hispanic	287	12.2	725	14.2	-2.0	
Hispanic	65	2.8	164	3.2	-0.5	
Asian Hispanic	55	2.3	100	2.0	0.4	
Other Non-Hispanic	79	3.4	159	3.1	0.2	
Gender						
Male	950	40.3	2,034	39.8	0.5	0.7206
Female	1,409	59.7	3,076	60.2	-0.5	
Insured						
Yes	2,255	95.6	4,875	95.1	0.4	0.4517
No	105	4.4	250	4.9	-0.4	
Interview Type						
Adult only	2,065	77.1	4,395	76.6	0.4	0.6815
Adult and child	614	22.9	1,339	23.4	-0.4	

Appendix E: ABS Mailing Materials



Case ID: <<Voxco_ID>> <<Barcode>>
<<FullName>>
<<Address1>> <<Address2>>
<<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>,


You have been selected to participate in the Ohio Medicaid Assessment Survey—an important study by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services across Ohio. All your answers will be confidential.** The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

✓ Keep the **\$2** as a thank you for your help.

➔ Complete a 20-minute survey to receive **\$10**. You can complete the survey in any of the following ways:

- Visit our **survey website** and enter your personal access code below:
 - Survey website: **OSUSurvey.com**
 - Survey Access Code: **<<PIN>>**
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.

 Scan for Website

➔ You will receive **\$10** after you complete the survey. You can choose a **\$10** electronic gift card, a **\$10** electronic VISA debit card, or a **\$10** check by mail.

Para completar la encuesta en español, llame al equip del Proyecto de forma gratuita al 1-833-947-2577.

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
Director of Research and Analysis
Ohio Colleges of Medicine, Government Resource Center



E.2. ABS R1 Control and EG1, R2 - Mailing 2: First Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD



Please help us help local and state agencies improve health services across Ohio. Open this postcard to learn how you can participate in our important survey and get **\$10**.



A few days ago, we mailed you a letter containing **\$2** in cash and an invitation to complete an important survey.

If you or someone else living with you already completed the survey – **thank you**.

If not, please complete your survey today. It should be completed by the adult with the most recent birthday.

Para completar la encuesta en español, llame al equipo de proyecto de forma al 1-833-947-2577.

The survey is easy and may be completed online:



Scan for Website



To access the survey:

Survey Website **OSUSurvey.com**

Survey Access Code: <<**PIN**>>

You will receive **\$10** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
 Director of Research and Analytics
 Ohio Colleges of Medicine
 Government Resource Center
 The Ohio State University





Case ID: <<Voxco_ID>> <<Barcode>>

<<FullName>>

<<Address1>> <<Address2>>

<<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>

We recently sent your household an invitation to participate in a survey called the Ohio Medicaid Assessment Survey. You can participate by completing the survey enclosed with this letter, by web, or by phone. The study is sponsored by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services for residents, such as yourself. All your answers will be confidential.**

The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

Complete a 20-minute survey to receive **\$10**. You can now complete the survey in any of the following ways:

- Complete the enclosed paper survey and return using the enclosed prepaid envelope.
- Visit our **survey website** and enter your personal access code below:
 - Survey website: OSUSurvey.com
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.



Scan for
Website



You will receive **\$10** after you complete the survey. You can choose a **\$10** electronic gift card, a **\$10** electronic VISA debit card, or a **\$10** check by mail.

Para completar la encuesta en español, llame al equipo del proyecto de forma gratuita al 1-833-947-2577.

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
Director of Research and Analysis
Ohio Colleges of Medicine, Government Resource Center



E.4. ABS R1 Control and EG1, R2 - Mailing 4: Second Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD



There is still time to help local and state agencies improve health services across Ohio! Open this postcard to learn how you can participate in our important survey and get \$10.





We recently mailed you an important survey to complete - the **Ohio Medicaid Assessment Survey**.

If you or someone else living with you already completed the survey – **thank you**.

If not, there is still time to complete your survey!
It should be completed by the adult with the most recent birthday.

Para completar la encuesta en español, llame al equipo de proyecto de forma al 1-833-947-2577.

The survey is easy and may be completed online:



Scan for Website



To access the survey:

Survey Website **OSUSurvey.com**

Survey Access Code: <<**PIN**>>

You will receive **\$10** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
Director of Research and Analytics
Ohio Colleges of Medicine
Government Resource Center
The Ohio State University



E.5. ABS R1 Control and EG1, R2 - Mailing 5: Second PAPI-CAWI Letter



Case ID: <<Voxco_ID>> <<Barcode>>
 <<FullName>>
 <<Address1>> <<Address2>>
 <<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>,

We recently sent your household the Ohio Medicaid Assessment Survey. You can participate by completing the additional copy of the survey enclosed with this letter, by web, or by phone. The study is sponsored by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services for residents, such as yourself. All your answers will be confidential.**

If you have already completed the survey and returned it – **thank you!**

If not, you can still complete the survey, but time is running out!

The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

Complete a 20-minute survey to receive **\$10**. You can now complete the survey in any of the following ways:

- Complete the enclosed paper survey and return using the enclosed prepaid envelope.
- Visit our **survey website** and enter your personal access code below:
 - Survey website: **OSUSurvey.com**
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.



You will receive **\$10** after you complete the survey. You can choose a **\$10** electronic gift card, a **\$10** electronic VISA debit card, or a **\$10** check by mail.

Para completar la encuesta en español, llame al equipo del proyecto de forma gratuita al 1-833-947-2577

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
 Director of Research and Analysis
 Ohio Colleges of Medicine, Government Resource Center



Case ID: <<Voxco_ID>> <<Barcode>>
<<FullName>>
<<Address1>> <<Address2>>
<<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>,


You have been selected to participate in the Ohio Medicaid Assessment Survey—an important study by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services across Ohio. All your answers will be confidential.** The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

✓ Keep the \$2 as a thank you for your help.

➔ Complete a 20-minute survey to receive \$10. You can complete the survey in any of the following ways:

- Complete the paper survey and return using the enclosed prepaid envelope.
- Visit our **survey website** and enter your personal access code below:
 - Survey website: **OSUSurvey.com**
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.



Scan for Website

You will receive \$10 after you complete the survey. You can choose a \$10 electronic gift card, a \$10 electronic VISA debit card, or a \$10 check by mail.

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
Director of Research and Analysis
Ohio Colleges of Medicine, Government Resource Center



E.7. ABS R1 EG2 - Mailing 2: First Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD

FOLD

FOLD



Please help us help local and state agencies improve health services across Ohio. Open this postcard to learn how you can participate in our important survey and get **\$10**.



A few days ago, we sent you an invitation letter containing **\$2** in cash and an important survey to complete.

If you or someone else living with you already completed the survey and returned it – **thank you**.

If not, please complete and return your survey today. It should be completed by the adult with the most recent birthday.

The survey is easy and may be completed online:



Scan for Website



To access the survey:

Survey Website **OSUSurvey.com**

Survey Access Code: <<**PIN**>>

You will receive **\$10** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
Director of Research and Analytics
Ohio Colleges of Medicine
Government Resource Center
The Ohio State University





Case ID: <<Voxco_ID>> <<Barcode>>

<<FullName>>

<<Address1>> <<Address2>>

<<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>,

We recently sent your household the Ohio Medicaid Assessment Survey. You can participate by completing the additional copy of the survey enclosed with this letter, by web, or by phone. The study is sponsored by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services for residents, such as yourself. All your answers will be confidential.**

If you have already completed the survey and returned it – **thank you!**

If not, you can still complete the survey, but time is running out!

The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

Complete a 20-minute survey to receive **\$10**. You can now complete the survey in any of the following ways:

- Complete the enclosed paper survey and return using the enclosed prepaid envelope.
- Visit our **survey website** and enter your personal access code below:
 - Survey website: **OSUSurvey.com**
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.



You will receive **\$10** after you complete the survey. You can choose a **\$10** electronic gift card, a **\$10** electronic VISA debit card, or a **\$10** check by mail.

Para completar la encuesta en español, llame al equipo del proyecto de forma gratuita al 1-833-947-2577

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr

Director of Research and Analysis

Ohio Colleges of Medicine, Government Resource Center



E.9. ABS R1 EG2 - Mailing 4: Second Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD

FOLD

FOLD



There is still time to help local and state agencies improve health services across Ohio! Open this postcard to learn how you can participate in our important survey and get **\$10.**



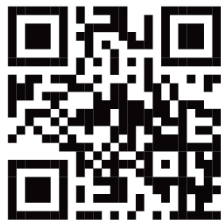
We recently mailed you an important survey to complete -
the **Ohio Medicaid Assessment Survey**.

If you or someone else living with you already
completed the survey – **thank you**.

If not, there is still time to complete your
survey! It should be completed by the adult
with the most recent birthday.

Para completar la encuesta en español, llame al equipo de proyecto de forma al 1-833-947-2577.

The survey is easy and may be completed online:



To access the survey:

Survey Website **OSUSurvey.com**

Survey Access Code: <<**PIN**>>

You will receive **\$10** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
Director of Research and Analytics
Ohio Colleges of Medicine
Government Resource Center
The Ohio State University





Case ID: <<Voxco_ID>> <<Barcode>>
 <<FullName>>
 <<Address1>> <<Address2>>
 <<City>>, <<State>> <<Zip>>

<<DATE>>

Dear <<FullName>>,

We recently sent your household the Ohio Medicaid Assessment Survey. You can participate by completing the paper survey we previously sent, by web, or by phone. The study is sponsored by the Ohio Department of Medicaid and The Ohio State University. **By completing this survey, you will help local and state agencies improve health services for residents, such as yourself. All your answers will be confidential.**

If you have already completed the survey and returned it – **thank you!**

If not, you can still complete the survey, but time is running out!

The survey should be completed by the adult, 19 years or older, who lives in this household and had the most recent birthday. You do not have to be on Medicaid to participate in this survey.

Please follow these steps to participate in the survey:

Complete a 20-minute survey to receive **\$10**. You can now complete the survey in any of the following ways:

- Complete the paper survey we previously sent and return using the prepaid envelope.
- Visit our **survey website** and enter your personal access code below:
 - Survey website: [OSUSurvey.com](https://www.OSUSurvey.com)
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.



You will receive **\$10** after you complete the survey. You can choose a **\$10** electronic gift card, a **\$10** electronic VISA debit card, or a **\$10** check by mail.

Para completar la encuesta en español, llame al equipo del proyecto de forma gratuita al 1-833-947-2577

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
 Director of Research and Analysis
 Ohio Colleges of Medicine, Government Resource Center

Appendix F: Medicaid Mailing Materials

F.1. Medicaid - Mailing 1: Invitation Letter



Case ID: <<Voxco_ID>> <<Barcode>>

<<FullName>>

<<DATE>>

<<Address1>> <<Address2>>

<<City>>, <<State>> <<Zip>>

Dear <<FullName>>,

You have been selected to participate in the Ohio Medicaid Assessment Survey—an important study by the Ohio Department of Medicaid and The Ohio State University. By completing this survey, you will help local and state agencies improve health services across Ohio. **All your answers will be confidential.**

Please follow these steps to participate in the survey:

Keep the **\$2** as a thank you for your help.

Complete a 20-minute survey to receive **\$20**. You can complete the survey in any of the following ways:

- Visit our **survey website** and enter your personal access code below:
 - Survey website: OSUSurvey.com
 - Survey Access Code: <<PIN>>
- **Call** the project team toll-free at **1-833-947-2577** to complete the survey by phone.
- Or answer the phone when you receive a call from The Ohio State University in the coming weeks.

Scan for Website

You will receive **\$20** after you complete the survey. You can choose a **\$20** electronic gift card, a **\$20** electronic VISA debit card, or a **\$20** check by mail.

Para completar la encuesta en español, llame al equipo del proyecto de forma gratuita al 1-833-947-2577.

We hope you will share your experiences with us! If you have questions or concerns about the study, please call The Ohio State University at 1-833-947-2577 or contact principal investigator, Timothy Sahr, at omas@osumc.edu.

Sincerely,

Timothy Sahr
 Director of Research and Analysis
 Ohio Colleges of Medicine, Government Resource Center



F.2. Medicaid - Mailing 2: First Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD



Please help us help local and state agencies improve health services across Ohio. Open this postcard to learn how you can participate in our important survey and get **\$20**.





A few days ago, we mailed you a letter containing
\$2 in cash and an invitation to complete
 an important survey.

If you have already completed the survey
 – **thank you.**

If not, please complete your survey today.

Para completar la encuesta en español, llame al equip de proyecto de forma al 1-833-947-2577.

The survey is easy and may be completed online:



To access the survey:
 Survey Website **OSUSurvey.com**
 Survey Access Code: <<**PIN**>>

You will receive **\$20** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
 Director of Research and Analytics
 Ohio Colleges of Medicine
 Government Resource Center
 The Ohio State University





F.3. Medicaid - Mailing 3: Second Reminder Self-Mailer Postcard



Ohio Medicaid Assessment Survey
PO Box 12728
Columbus, Ohio 43212

DO NOT FORWARD



Time is running out to help local and state agencies improve health services across Ohio. Open this postcard to learn how you can participate in our important survey and get **\$20.**



We recently mailed you a letter containing **\$2** in cash and an invitation to complete an important survey.

If you have already completed the survey
– *thank you.*

If not, you can still complete the survey,
but time is running out!

Para completar la encuesta en español, llame al equip de proyecto de forma al 1-833-947-2577.

The survey is easy and may be completed online:



To access the survey:

Survey Website **OSUSurvey.com**

Survey Access Code: <<**PIN**>>

You will receive **\$20** for completing the survey.

If you have questions or concerns about the study, please call The Ohio State University at **833-947-2577** or contact principal investigator, Timothy Sahr, at **OMAS@osumc.edu**.

Many thanks,

Timothy Sahr, Principal
Director of Research and Analytics
Ohio Colleges of Medicine
Government Resource Center
The Ohio State University



Appendix G: Interviewer Training Manual

Ohio Medicaid Assessment Study (2023 OMAS)

Telephone Interviewer Manual

RTI Project No.0219168

Prepared by:

RTI International
www.rti.org

2023

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1. Introduction

1.1 Background and Purpose

The State of Ohio is sponsoring the 2023 *Ohio Medicaid Assessment Survey* (2023 OMAS). The 2023 OMAS has been designed to provide accurate, reliable, and representative data on health insurance coverage, use of medical services, satisfaction with and access to health care. These data will inform healthcare policy decisions and ultimately, have the potential to make a significant impact on the lives of people living in Ohio.

The 2023 OMAS is a continuation of one of the largest ongoing state-level public health surveys. The survey includes sections that focus on insurance status for both adults and children, health status and care giving, usage and access to care, unmet healthcare needs, financial stress and medical bills, food situations, and demographic information.

RTI International, a not-for-profit survey research organization in Research Triangle Park, North Carolina, has been hired to manage the data collection effort.

1.2 Study Design

The design of the 2023 OMAS is similar to surveys conducted in every two years since 2004. The survey was referred to as the Ohio Family Health Survey (OFHS) from 2004 through 2010 and was renamed as OMAS beginning in 2012. The 2023 OMAS study is designed as a multi-frame survey sampling both from an Address Based listing of households and a Medicaid administrative file of persons currently enrolled in Medicaid. The Medicaid sample will use a computer-assisted telephone interview system, or CATI that will also be available for in-bound calls from the ABS sample. Data will be collected from approximately 35,000 adults (19 years of age and older) living in Ohio, 25,000 from the address-based sampling frame and 10,000 from the Medicaid frame. Approximately 6,500 of these interviews will include a child's proxy interview, which is only applicable to the address-based respondents. The target population for the 2023 OMAS is non-institutionalized adult and child populations residing in the state of Ohio.

The adult interview, including all screening questions, will take approximately 20 minutes to administer. The child interview will take approximately 9 minutes to complete.

1.3 Sample Design

To help maximize the ability of the design to reach a representative population of Ohioans and each subgroup of interest, the sampling population for the 2023 OMAS will consist of a stratified dual-frame design with oversampling of key populations of interest. The two frames will be:

1. Address-based listing of postal addresses for non-group quarters housing units
2. Medicaid administrative file listing currently enrolled persons with Medicaid coverage

The Medicaid sample will first be stratified by enrollment of the 5 Medicaid programs. Additionally for the Group-VIII program, the sample will be further stratified by county type. This resulted in 8 strata. Based on past Group VIII surveys, a sample size of 6,000 achieved the desired level of precision. Since incorporating elements of the Group VIII survey into the OMAS is a key objective, this allocation took precedence over any others. To help ensure the Group VIII sample was representative of each county type, the sample was proportionally allocated to each county type based on the Medicaid population distribution. A balanced allocation (i.e., equal sample allocated to each county type) was considered but, because it causes a large design effect due to unequal weighting, it was not used. Of the remaining enrollment types, the largest amount of sample (1,500) was allocated to CFC because it is the largest group (after G-VIII). To help answer programmatic questions, ABD and Dual MyCare enrollment types were each allocated 1,000 cases. The remaining sample (500 cases) was allocated to Dual non-MyCare enrollees to ensure all Medicaid enrollment types were covered by the sample and to allow for comparisons to the Dual MyCare enrollees.

The address-based sample will be stratified by the 88 counties in Ohio. Within each county additional strata may be created in order to better target households containing non-white or low-income persons or children. In total, there will be 200 strata. Sample will be allocated

proportionally to each county. If the expected number of respondents for a county based on the proportional allocation is less than 100 the allocation will be set to 100. The target for the remaining counties will be reduced in order to maintain the total desired interviews.

The Medicaid sample will be randomly divided into 2 waves. Invitations will be sent by mail to each sampled person, followed by two text messages and CATI follow-up interviews. A person will be identified as ineligible if they indicate:

- They live outside of Ohio
- Are a minor (18 years or younger)
- No longer enrolled in Medicaid
- Are deceased

The address-based sample will be randomly divided into 2 waves. Invitations will be sent by mail to each sampled address. The mailed invitation will invite a random adult in the household to either take the survey through the web or to call-in to take the survey by phone. If a person chooses to call-in to take the survey, the CATI instrument will be used to conduct the survey.

1.4 Respondent Selection

1.4.1 Medicaid

Medicaid respondents are selected from enrollees in Medicaid as part of the sampling process. You will confirm eligibility based on screening questions at the beginning of the survey (i.e., we are speaking with the listed respondent, they are currently covered by Medicaid). The selected respondent will then be informed of their rights and read the informed consent.

1.4.2 ABS

For the ABS phone sample, we will conduct an interview with the person (Ohio resident, aged 19 or older) who calls in to the project hotline. If the respondent cannot complete the interview at that time, attempt to set an appointment for a more convenient time.

1.4.3 Adult Proxy for Children

The 2023 OMAS ABS includes a separate section that asks questions about a selected child in the household. We do not administer these questions with the selected child. Instead, a proxy adult will be identified to complete the survey. The proxy adult for the ABS will be the adult who was selected for the Adult survey.

1.4.4 Adult Proxy for Impaired Adults

The 2023 OMAS does allow proxy interviews for adults **only** when the selected adult has a long-term or permanent mental or physical impairment. Interviewers do not ask if a selected adult has a mental or physical impairment rather, we have this option if a household member offers this information. If this option is selected, the CATI, and not the interviewer, will adjust the questions to be asked of the proxy for the selected respondent.

1.5 Data Collection Schedule

A small pilot study was fielded in June and July of 2023. Full study data collection will take place for 5 months from July 2023 to January 2024.

1.6 Project Staff

The administrative Principal Investigator for the 2023 OMAS is Timothy Sahr from the Ohio Colleges of Medicine Government Resource Center. The RTI Project Director is Tom Duffy. He is responsible for the overall administration of all aspects of the project. Zac Nickey is the Project Assistant Director and Project Manager and is responsible for the overall administration of the project. Rachael Buffkin is the Assistant Project Manager. Marcus Berzofsky and Caroline Scruggs are the Statisticians who are responsible for sampling, weighting, and data analysis and reporting. Dave Schultz is the project's Programmer who

maintain the CATI instrument. Kurt Johnson is the Production Manager who is responsible for managing the overall data collection process. Marion Schultz is the Quality Assurance Manager who is responsible for overall training and quality assurance efforts. Timothy Nesius and Megan Brackin are the Production Leads. Armando Molina Orellana, Jay Yelverton, Jerry Robinson and Carolina Valenzuela are the project's Production Shift Supervisors and will oversee most production floor activities. Amie Lynch is the Production Shift Supervisor who will oversee most monitoring activities.

2. Telephone Interviewer Responsibilities and Expectations

2.1 Telephone Interviewer Responsibilities

As a member of the 2023 OMAS staff, you, the interviewer, play an extremely important role in the overall success of this study. You are the link to the thousands of respondents who will provide valuable information on their health insurance coverage, use of medical services, and access to health care. You are the person who develops rapport with the respondents, assures them that their participation is vital, makes them feel important, obtains their full cooperation, and provides information so they can make an informed decision about participating in the study (by administering informed consent).

It is extremely important that you help make each respondent feel at ease and comfortable with the interview. One key to accomplishing this goal is to be fully informed about the study and the data collection instruments and procedures. Helping you to become well informed about the Ohio Medicaid Assessment Survey (2023 OMAS) will be a major objective of our interviewer training for the project.

In fulfilling your role during each contact with a respondent you should:

- Communicate a positive attitude;
- Demonstrate familiarity with the questionnaire contents so that the interview proceeds in a professional manner;
- Maintain control of the interview; and
- Assume a nonjudgmental, neutral yet empathetic approach to the respondent, and the subject matter so that the sample member will feel comfortable answering the questions truthfully and completely.

As far as the respondents are concerned, they are sharing their information with a representative of the State of Ohio who cares and who will put that information to good use. Therefore, your understanding of the task and your commitment to it are crucial to the success of the survey. You are entrusted with treating all aspects of the project with the seriousness and attention deserved.

The chapters in this manual are designed to guide you through the interviewing process. Each section of the manual is devoted to a specific task. It is important for you to read it and keep it handy for reference. In addition to maintaining a pleasant, compassionate, and professional attitude toward all respondents, other interviewer responsibilities include:

- Successful completion of interviewer training for this study;
- Proper administration of the screening procedures to confirm identify of the selected individual within households;
- Obtaining verbal informed consent to participate in the study;
- Securing cooperation from the eligible respondent to participate in the survey;
- Proper administration of the CATI interview to selected individuals in compliance with the directions in this manual;
- Observing all quality control procedures and meeting established performance standards;
- Maintaining the confidentiality of respondents and survey materials at all times;
- Filing daily time reports and other administrative records as required; and
- Committing your time and effort for the duration of the project and reporting for work as scheduled.

2.2 Telephone Interviewer Expectations

As an interviewer for the 2023 OMAS, you play a critical role in the success of the project. The following are our expectations for you regarding your performance and productivity while working on the 2023 OMAS.

Performance Expectations

All interviewers will be monitored for quality and quantity of their work. Project staff, Research Operations Center (ROC) Quality Experts (QE's), and OMAS Executive Committee members will be conducting monitoring sessions throughout the data collection period. Interviewers will be reviewed in terms of how consistently they read all survey questions *verbatim*, as well as to ensure that standardized interviewing techniques (probing, neutrality, etc.) are being followed at all times. You should expect to receive feedback after a monitoring session regarding your performance.

Productivity Expectations

It is extremely important that we monitor interviewer productivity very closely to ensure that we meet all data collection goals. Your productivity will be measured through various means throughout the data collection period. You will receive feedback from a supervisor on a weekly basis about your productivity.

When dialing, we expect that you will make an average of 30 outbound calls per hour. If you are not completing interviews, you should be dialing more numbers, so higher than 30 calls per hour is better.

In addition, we will require that you become “certified” before beginning to work on this project. Certification involves 4 steps:

1. Practice interviews
2. Paired mock interviews
3. Written and oral quizzes
4. Successfully completing training

No interviewer will be permitted to begin work on this study until he/she has been certified by a supervisor or project staff.

3. Respondent's Rights and Confidentiality

3.1 Respondent Rights

The rights of survey respondents must be recognized and protected by all RTI representatives. Verbal or written assurances to respondents have no meaning if they are violated or contradicted by the actions of any member of the research team. The 2023 OMAS is collecting sensitive information from respondents, therefore we must communicate to respondents that we are doing everything to keep their information safe and secure.

RTI survey procedures are designed to protect individual rights and to comply with all applicable laws. Among the rights that must be protected are:

- The right to accurate representation;
- The right of informed consent;
- The right to refuse; and
- The right of privacy.

The **right to accurate representation** is simply an extension of honesty in interpersonal relationships. Respondents have the right to receive completely accurate information about the study, its sponsor, their requested involvement and the reasons for the study.

- *You cannot tell* respondents that the interview will take “just a minute” when you know that it will take more.
- *You cannot tell* respondents that they **must** participate in the interview for any reason.
- *You can tell* respondents that the interview will take approximately 20 minutes to complete and that you can schedule an appointment at another time if they are unable to be interviewed just then.
- *You can also tell* respondents that their participation is voluntary, but their opinions and experiences are important because they represent the health experiences of a large number of people who will not be interviewed.

The **right of informed consent** requires that respondents be provided with adequate information to make an informed decision about participation. They must be expressly informed of the purposes of the study, the procedures that will be followed, any discomforts, risks, or benefits that might be associated with participation, and sources from which additional information about the study can be obtained. The individual must also be informed that consent may be withdrawn, and participation discontinued at any time.

The **right to refuse** refers to a respondent's right to refuse to participate without fear of intimidation. While it is helpful to know why individuals do not want to participate in a study, those who refuse have no obligation to state a reason for their decision. You must distinguish between pressuring respondents to participate and providing them with sufficient information upon which to base a rational decision about participation.

The **right of privacy** is an issue that is currently receiving a great deal of attention from legislators, civil rights advocates, concerned citizens, and organizations that sponsor and conduct surveys. In addition to constitutional guarantees against invasion of privacy, specific federal legislation (The Privacy Act of 1974) assures that certain elements of an individual's personal privacy are protected against undue inquiry and subsequent use and dissemination of information collected.

At first it may seem as though recognizing respondents' rights will hinder your efforts to gain the cooperation of potential respondents. However, by adhering to the guidelines explained above, you will actually be more likely to obtain their participation. Being informative and truthful will demonstrate your integrity as an interviewer and assure the sample member of the legitimacy of the study.

3.2 Confidentiality

In addition to respondents' rights issues, we are concerned with *confidentiality*. We guarantee to all persons providing survey information that their responses will not be disclosed in a manner that will show identifying information. Interviewers and all other project staff members must uphold these promises of confidentiality of data collected from respondents.

The names or initials of respondents and the information obtained are not to be discussed with anyone other than authorized project personnel. All survey documents and records also must be safeguarded at all times. To be certain that the confidentiality requirements for this study are understood and that all who work on the study agree to uphold the requirements, a Confidentiality Agreement (*Exhibit 3-1*) must be read, understood and signed by each staff member before he/she begins work on the project. All project staff members are required to sign a confidentiality pledge stating that a breach of confidentiality will result in termination.

While working on the 2023 OMAS, if any notes are taken about an interview, these must remain secure in the call center and cannot be taken out of the building. Any project notes must also be destroyed properly by shredding. It is NEVER acceptable to take notes that contain any personally identifying information. Notes can, and should, reference a specific case ID. For the most part, you will not need to take notes and any questions about a case should be entered in a problem sheet. Again, no identifying information should be recorded in problem sheets.

Several measures will be implemented to ensure the security of the information gathered during each interview. These include the following:

- All project team members that might have contact with participants will sign a Pledge of Confidentiality.
- Personally, identifying information is maintained separately from the actual questionnaire responses in RTI's CATI system.
- All data are maintained in project-specific, ID/password-protected shared network folders. Only those people that have been given authorization to access those folders by the project director can access that data. The ID/password that the user logs into the secured network determines what directories and data they can access.
- All identifying information, such as first name as gathered for callback purposes only and telephone number, will be removed from the CATI system to make certain that the information cannot be traced back to the respondent.

Exhibit 3-1 Ohio Medicaid Assessment Survey**STAFF CONFIDENTIALITY AGREEMENT**

(HR Directions employees working on the Ohio Medicaid Assessment Study)

I, _____ (*print employee's name*), an employee of HR Directions, an independent contractor utilized by RTI, agree to work on all RTI projects in accordance with the guidelines and restrictions specified below. I understand that compliance with the terms of this agreement is a condition of my assignment with RTI and that these terms are supplementary to those listed in my contract of employment with HR Directions.

- a. I affirm I have watched the Health Insurance Portability and Accountability Act (HIPPA_
- b. I agree to treat as confidential all case-specific information obtained any RTI project and related matters. I further agree that this covenant of confidentiality shall survive the termination of this agreement.
- b. I further understand that failure to follow the guidelines below may result in a potential violation of the provisions of the Privacy Act of 1974 (violation of the Privacy Act is a misdemeanor and may subject the violator to a fine of up to \$5,000), and potential Institute disciplinary action, including termination. To fulfill confidentiality obligations, I will:
 1. Discuss confidential project information only with authorized employees of RTI.
 2. Store confidential project information as specified by project protocols.
 3. Safeguard combinations, keys, and rooms that secure confidential project information.
 4. Safeguard confidential project information when in actual use.
 5. Immediately report any alleged potential violations of the security procedures to my immediate supervisor.
 6. Not photocopy or record by any other means any confidential project information unless authorized by project leaders or my supervisor.
 7. Not in any way compromise the confidentiality of project participants.
 8. Not allow access to any confidential project information to any unauthorized person.
 9. Report any lost or misplaced confidential project information to my supervisor immediately.

Employee's Signature _____

Date _____

Employee's Organization: HR Directions (Greene Resources)

4. General Contacting Procedures

4.1 Obtaining Cooperation from Sample Members

It is important to the success of the survey that you become skilled at obtaining cooperation from sample members. Interviewers are expected to use their ingenuity as required during the introductory steps when requesting participation in the interview. You must be prepared, however, to deal with problem situations that may arise at any time during a contact with a respondent. Of particular importance is the fact that we are asking questions about health insurance coverage and experiences with health care, which some people may feel uncomfortable discussing. It is your job to address any concerns of the respondent and help put them at ease during the interview.

Guidelines for working with sample members to enlist their cooperation are presented below. Appropriate approaches that prove successful with various sample members should be shared during quality circle meetings and/or in discussions with your supervisor so that other interviewers can be informed and benefit from your experience.

4.2 Initial Contact

First, always read the call notes before you call a case. Interviewers who contacted the case before you will have made important entries in the call notes to help you handle the next call. This could provide you with some very important information such as if a call was broken off because the respondent had concerns regarding confidentiality or to let you know that a respondent refused to participate on the previous call. It is important to note that some cases where distress occurs are coded out and not ever called back, but for other cases, where the respondent wants to continue, callbacks are made. As such, it is important that you familiarize yourself with the case notes before you call the case. If you ever have a question about whether or not you should call a case where distress is noted in the interviewer notes, ask a supervisor.

Also, be sure to check the history of the case before you dial. You can determine what the last outcomes were for the case, and know if you are keeping an appointment, following up on a broken appointment, if the appointment was broken by the respondent, or if you are following up a “no contact” outcome like “ring no answer,” “answering machine,” or “regular busy.”

Your initial contact with the respondent (or other adult) is critical in securing cooperation in the study. The first 10-20 seconds of the call are when most people make up their mind whether to hear you out, or to refuse to participate. Within the first moments of your call it is important that you convey four points:

1. You are a **professional, competent** interviewer;
2. Calling from a **legitimate and reputable** organization;
3. Engaged in **important and worthwhile** research; and
4. The respondent’s **participation is vital** to the success of the research.

Your voice and words must convey credibility; it is not just *what you say* but *how you say it!* You should be serious, pleasant, and self-confident. What you say and how you sound to the person on the other end of the line impacts how well you are able to control your relationship with respondents. For example, if you sound uncertain or uncomfortable asking the questions, this feeling will be communicated to the respondent who may be reluctant to share such information experiences.

Approach all respondents as if they are friendly and interested. Assume that if they are not cordial, it is because they are not yet informed about why you are calling. An important component of this approach is to *talk with* the respondents, *not at* them. This requires that you respond interactively and listen to what the respondents say. If they believe you are really interested in their responses, they are more likely to participate.

Keep in mind that not all respondents are the same; some will agree to a screening or interview with only a brief explanation of the purpose while others will need more detail. Begin with a brief explanation and give more detail as necessary.

4.3 Elements of an Interviewing Call

The key to successful interviewing is being prepared for every contact that you make. Have a complete set of the appropriate materials at your workstation, organized in such a manner that you do not have to stop and search for the required documents. These materials include the Telephone Interviewer Manual and “cheat sheets” provided to you during training that gives quick answers to the top 5 most frequently asked questions and guidance on respondent distress.

The exact context of an interviewing call will vary depending on:

- What took place on previous calls to the household;
- What questions or objections the respondent has about participating; and
- The respondent’s mood and current situation.

Because of these variables, every call is different, and it is impossible to provide you with one picture of what happens during a call. Below are some general rules you should follow every time you place a call:

- Be prepared before you place a call. Be prepared to talk to the respondents. Do not rely on your memory to answer questions. Make sure you review and understand the Frequently Asked Questions (FAQs).
- Act professionally. Convey to respondents that you are a professional who specializes in asking questions and conducting interviews. As a professional interviewer, you have specific tasks to accomplish for this survey.
- Make the most of your contact. Even though you may not be able to obtain an interview on this call, it is important to make the most of the contact to aid in future attempts. For example, if you are trying to contact the respondent and he/she is not available, gain as much information as you can to help us reach the respondent the next time we call. Important questions to ask include:
 - ✓ When is the respondent usually home?
 - ✓ What is the best time to reach the respondent?

4.4 Strategies for Gaining Cooperation to Conduct the Interview

With each call that you make, your goal is to verify you are speaking to the listed respondent and complete the interview. You will need to obtain cooperation from potentially two different individuals as follows:

- From a household member in order to reach the listed respondent, and
- From the listed respondent him/herself to participate in the survey.

In each of these situations you are asking an adult to spend time with you on the telephone right now to complete the screener, obtain consent, and complete the interview. You must be prepared to explain why the study is important, why it is important for the individual to participate, and address any other concerns of any of these individuals. Although this section outlines important strategies for gaining cooperation and interviewing, your success in using these strategies starts with your ability to listen carefully at all times and bring your own creative style and thinking to these strategies.

4.4.1 The First Twenty Seconds

The first twenty seconds of your telephone call with a person will determine your success in gaining cooperation. Our experience shows that if you are able to get your foot in the door in the first twenty seconds of the call, you will be able to complete your task - whether it's administering the screener, obtaining consent, and/or securing cooperation to conduct the interview - on that call. If you are unsuccessful in the first twenty seconds of the call, you will be unlikely to complete your task on that call, and chances are the individual will not give you much more than twenty seconds to convey your message anyway.

If you are going to be successful in gaining cooperation, you need to develop skills and strategies to gain cooperation within the first twenty seconds of the call. Although the telephone call may sometimes last longer than twenty seconds, you will need to use the following five strategies to get your foot in the door in this portion of the call. While written in terms of the respondent, these strategies apply to other adult household members as well.

- **Listen carefully.** By listening carefully, you will know what you need to say to them next. This is a three-pronged task: hear, acknowledge, approach. First, you must hear what the respondent is saying. When you hear a respondent offering resistance, your next step is to acknowledge their concerns or feelings. You must acknowledge the objection immediately realizing that the respondent simply needs further information before they commit to the survey. Try to probe and understand the specifics of the objection so that it can be answered accurately and quickly. You must have a good working knowledge of the survey in order to realize the difference between a true objection and what may only be a concern. Then you must approach the objection with your professional and expert information. ***Using the same standard spiel for each respondent is a set up for failure.*** Always read the call notes, listen to the respondent and tailor your strategy for gaining cooperation accordingly.
- **Offer information.** When a respondent gives excuses as to why he/she is unable to participate in the study, many times the respondent simply does not fully understand why we are conducting the study and why it is important for them to be interviewed. Hence, a first step in gaining cooperation can be to offer the respondent more information. Of course, not just any information will do. ***You need to listen carefully to identify what in particular the respondent does not seem to understand and tailor the information you provide accordingly.***
- **Establish an emotional, yet professional, connection with the respondent.** We know from experience that respondents agree to participate in interviews when interviewers establish an emotional connection about why the study is important for this particular respondent, rather than just explaining why the study is important. ***When you offer the respondent more information about the study, you need to make it personal to them.***
- **Offer options.** You will often identify that what keeps the respondent from participating is not a lack of information, but that the respondent just does not have time to do the interview currently. Respondents who might otherwise participate might be busy or leaving for school or work. ***You can offer options for when and how the interview is completed.*** We can complete the interview in parts, any time of the day or night, on weekends, while the respondent is at work, and on any day of the week. Sometimes when you offer options, the respondents will balk at every option you provide. You might ascertain that the real issue regarding their resistance is that you have not made the purpose of the study personal to them, and you will need to provide additional information.
- **Know when you have established rapport.** You need to be able to identify the moment when you have convinced the respondent to participate and it is safe to jump into the interview. If you attempt to begin the interview before you have established rapport, you might lose the respondent completely on your current call. If you wait too long to start the interview after you have the respondent on your side, you might also lose the respondent as you provide extraneous information to the individual.

4.4.2 During and After the Call

The first twenty seconds of your contact with the respondent are crucial to gaining cooperation with the respondent. However, there are a number of additional approaches and strategies which you will need to employ during and after the call with the respondent.

- **Empathize.** Let the respondent know that you understand where they are coming from. For example, if the respondent’s major concern about participating is the amount of time required, emphasize that you do understand and then explain that you will go through the interview as quickly as possible or call back at a time that is more convenient.
- **Do not argue.** Maintain a pleasant, friendly attitude and emphasize the positive: how important the study is, how important it is for this particular individual to participate, and how far we are willing to go to accommodate the respondents’ needs no matter how abrasive or rude he/she is. It is helpful to get the respondent to respond positively to some statement, because this will usually lead to an interview.
- **Let the respondent know how important he/she is.** If the respondent appears to be “weakening,” express a strong willingness to answer any questions and address any concerns. Do not hesitate to say outright how important it is to our study that he/she participates. Emphasize that this person is not replaceable. No one else but the respondent can supply the study with this crucial information.
- **Let the respondent know how important the study is to the sponsor and society.** Let the respondent know that their answers will directly affect policies the State of Ohio will create regarding health insurance and health care.
- **Leaving an opening for future conversion attempts.** If a respondent appears hesitant, attempt to keep a reluctant person talking by making brief, neutral statements in response to their comments. Make an effort to get a reluctant person started with the interview by asking the first question at the earliest possible moment. Once started, most respondents complete the interview.

If a respondent refuses to participate when you call, you should ask how he/she reached this decision and attempt to address the respondent’s concerns. If, despite your best efforts, the respondent still refuses to participate, tell the respondent that we regret not having his/her input, and that we understand his/her reasons. Thank the respondent for his/her time and suggest that if the respondent changes his/her mind that they may contact you again and that we will be happy to conduct an interview at that time.

- **Record what happened in the call notes.** You need to write concise information about the individuals to whom you spoke and what they said to you, as well as the outcome of the call in the call notes. Remember that interviewers form a team. You might not be the next interviewer to telephone the respondent, so include in

the call notes all of the information which you think the next interviewer will need to be successful.

It is helpful to view gaining cooperation as an exercise in listening to and addressing the respondent's concerns. If you are able to do so quickly, confidently, and correctly, you will have good success in gaining cooperation

4.4.3 Answers to Common Questions

You must be prepared to deal with problem situations that may arise at any time during a contact with a respondent. While we do anticipate that some people may be uncomfortable answering the questions in this survey, remember that you can always reassure respondents that they do not have to answer any questions they don't want to.

In addition, there are several questions that are frequently asked by both respondents and household members. We have identified a number of these questions, and responses to them are presented in *Exhibit 4-1*. It is important that you learn the responses to these questions and that you work to adapt them to the specific concerns of a respondent. Please keep your Telephone Interviewer Manual with the full list of FAQs' at your workstation. You should become familiar with the answers so that, when a question is asked, you can quickly find the appropriate answer from the list. Not every situation that you will encounter is covered; we will supplement the questions and answers as necessary throughout the data collection period.

4.5 2023 OMAS Toll Free Number

If you are in a situation where the person who answers the phone seems to be cooperative, but the sample member is simply impossible to catch at home, you can leave a phone number that the sample member can call. The number you should leave is 1-833-947-2577. This will ensure that their call gets routed to an interviewer working on the 2023 OMAS who can deal with them promptly and effectively. If a respondent calls after hours they will be forwarded to a project voicemail. There will be two separate voicemail boxes where respondents can leave a message. One box will be for Spanish-speaking respondents and one for English-speaking respondents.

Exhibit 4.1 2023 OMAS Frequently Asked Questions (FAQs)

What is this survey about? / What is the purpose of this survey?

The purpose of the study is to help the State of Ohio gather information on health insurance coverage, the use of medical services, and problems getting health care. These data will inform healthcare policy decisions and ultimately, have the potential to make a significant impact on the lives of people living in Ohio.

Why do you want to interview me?

We would like to gather information from residents about health insurance and health care in order to help inform the State of Ohio regarding healthcare policy decisions.

Who is sponsoring this study? / Who is conducting this study?

This study is sponsored by the State of Ohio.

[IF NEEDED: health agencies in Ohio including the Ohio Department of Health, Ohio Medicaid, Ohio Department of Mental Health and Addiction Services, Ohio Department of Aging, and Ohio Department of Developmental Disabilities.].

How long will this take?

This survey will take approximately 20 minutes to complete.

How do I know this remains confidential?

I can assure you that all information that we obtain from you will be kept confidential. Your answers will never be connected with your telephone number. The answers provided will be combined with those from other participants and only reported as a group, not individually. All project staff members have signed confidentiality agreements and are prohibited by law from using the information for anything other than this research study. Any other use is a violation of Federal Law and is subject to heavy fines and imprisonment.

I already have insurance. You don't want to interview me.

The study seeks information from residents of Ohio regardless of insurance coverage. These data will inform healthcare policy decisions and have the potential to make a significant impact on the lives of people living in Ohio.

I don't have insurance. You don't want to interview me.

The study seeks information from residents of Ohio regardless of insurance coverage. These data will inform healthcare policy decisions and have the potential to make a significant impact on the lives of people living in Ohio

What kinds of questions are you going to ask?

I will ask you some questions about yourself and your household, as well as about your health insurance coverage, the use of medical services, and problems getting health care. The results of this study will help shape policies and programs regarding these issues.

Exhibit 4.1 2023 OMAS Frequently Asked Questions (FAQs) (Continued)**What is the difference between household and family?**

For purposes of this survey, "household" is defined differently from "family". Household refers to all of the people who are living in the home where we reach the respondent. By family, I mean two or more persons residing together who are related by birth, marriage, adoption or legal guardian.

How can I complete the interview?

You can complete this interview with me over the phone right now or we could schedule a more convenient time for you to complete it. It only takes approximately 20 minutes to finish.

Who else is participating in this survey?

Medicaid recipients age 19 or older residing in the state of Ohio.

I am not typical/representative, pick someone else/your questions don't apply to me?

In order for the State of Ohio to get an accurate view on issues related to health insurance and health care, they need information from all kinds of people. Everyone can share their experiences with these topics. You are not replaceable.

What will the data be used for?

The purpose of the study is to help the State of Ohio gather information on health insurance coverage, the use of medical services, and problems getting health care. The results of this study will help shape policies and programs regarding these issues.

What benefit do I get out of my participation?

Some people find that being in this survey is helpful. The results of this study will help shape future programs regarding these issues.

What is RTI International?

RTI International is a not-for-profit survey research organization in Research Triangle Park, North Carolina, who has been hired to manage the data collection effort.

How do I know this study is legitimate?

If you would like to verify the legitimacy of the study or to obtain additional information, please call Kurt Johnson at RTI International. His number is 1-800-334-8571, extension 66515. If you have any questions about your rights as a research participant, please contact RTI International's Office of Research Protection toll-free at 1-855-322-2826. You may also call a representative from the State of Ohio at 1-614-466-3543.

How do I know you are really an interviewer for this study?

You may call my supervisor, T.J. Nesiuis, at RTI's Research Operations Center at 1-800-334-8571, extension 66559 to verify my employment.

Exhibit 4.1 2023 OMAS Frequently Asked Questions (FAQs) (Continued)

How did you get my phone number?

We randomly selected phone numbers of people residing in the state of Ohio. We do not know who you are, and we have no other identifying information.

I'm too busy now! / I just don't have time for your survey!

This survey takes approximately 20 minutes to complete. We could get started now and I'll move through the questions as quickly as possible to save you time.

Call me back next week.

[SUCH STATEMENTS ARE USUALLY PUT-OFF TACTICS AND USUALLY WILL BE CONTINUED WHEN YOU CALL BACK. TRY TO RETAIN CONTROL OF THE SITUATION BY ESTABLISHING AN APPOINTMENT.]

O.K., I've made an appointment for you at _____ [TIME] next _____ [DAY]. If that's all right, someone will call you then. If you decide you want to complete the interview before then, you can call 1-833-947-2577 to speak with an interviewer. You'll need to give them this number for reference: Case ID _____.

Do I have to do this/answer your questions?

Your participation in this study is voluntary. We could begin the interview and if you do not want to answer a particular question, we can skip them at any time.
[IMMEDIATELY BEGIN INTERVIEW]

Can I refuse to answer that question?

Yes, you can refuse to answer any questions, but please remember that your answers will be kept private and no identifying information will be given to the State of Ohio or anyone else.

I'm not going to give you all this personal information!

The information we collect will be kept completely private. No information that could personally identify you will be given to the State of Ohio or anyone else. No one will know who participated in the study.

I'm not going to answer a lot of questions over the phone! / I don't do anything by phone...send it to me in the mail.

I'm sorry. We are not able to send the survey by mail. Let me start and you can see what the questions are like. [IMMEDIATELY ASK THE FIRST QUESTION.]

I don't want to buy anything!

Let me assure you that we are not selling anything. We are conducting a very important research study for the State of Ohio regarding your experiences with health insurance coverage, the use of medical services, and problems getting health care.

Exhibit 4.1 2023 OMAS Frequently Asked Questions (FAQs) (Continued)

I think this whole business is stupid. The government has better things to do with dollars, etc., etc.

This is a very important research study. The purpose is to help the State of Ohio gather information regarding health insurance coverage, the use of medical services, and problems getting health care. The results of this study will help shape future policies and programs regarding this issue.

Why do you need to know the number of telephones/cell phones in my household?

We are collecting this information for statistical purposes only. We will not ask for any additional telephone numbers.

I don't want to confirm my telephone number.

We are only asking to make sure that we dialed the number we intended to dial. [IF STILL WON'T CONFIRM NUMBER, MARK CASE AS A REFUSAL]

I am on the National Do Not Call list.

The Do Not Call list covers telemarketing and soliciting. We are gathering data for a research study and are not trying to sell you anything. The do not call list does not apply.

5. Sensitivity Training

5.1 Sensitive Issues in 2023 OMAS

Due to the nature of the information we are seeking, there may be some items in the survey that some men or women feel uncomfortable answering. For example, some people may be hesitant to answer questions about their health experiences. During your training, you will learn skills to help reassure respondents that their answers are important and kept confidential, and their participation is appreciated. Some tactics that you will learn include:

- Reminding respondents that their answers are confidential and being familiar with the procedures we're using to protect respondent's information;
- Providing positive, neutral feedback, such as "Thank you; I understand; We appreciate your participation in this important study; It's important your opinion is included in the results, if you need to take a minute or if you would like us to call you back we can. ," etc.;
- Acknowledging a respondent's hesitancy in answering a question, such as, "It's important to find out what people think about this, so please take your time." And;
- (Only if necessary) Reminding respondents that it is okay to skip any question he/she does not feel comfortable answering.

5.2 Dealing with Distressed Respondents

If the respondent displays distress during the interview, you will administer the following distress protocol and then immediately contact a supervisor to report the situation. Keep in mind that respondent distress during the interview is different from respondent anger or frustration during the introduction and consent process. By "distress" we are referring to respondents who are most likely upset by the content of the survey as it relates to their own personal experiences, not an angry household member who is refusing to complete the screening process. The respondent distress protocol includes steps to follow for different levels of distress: mild, moderate, or severe distress. If you encounter a distressed respondent, it is critical to immediately alert a supervisor so that she or he can assist you as well as escalate as appropriate.

For the 2023 OMAS, we have what we describe as a "Respondent Driven" protocol for dealing with possible distress and crisis situations. This means that we react to respondents' signs and needs by offering them choices.

Step 1: Recognize that a respondent is possibly distressed.

The following are signs that may indicate a respondent is possibly distressed:

- Hesitancy to answer a question or questions;
- Refusal to answer questions or to continue the interviewing process;
- Lowering of the volume or tone of voice;
- Responding in an agitated manner by raising his/her voice or using inappropriate language;
- Crying;
- Indications of tremors, a quivering in the respondent's voice;
- Hearing the respondent tap his/her fingers, or an instrument on the telephone or surface; or
- Disorganization, dissociation, or non-responsiveness to questions asked.

Step 2: Observe the level of distress that a respondent is apparently experiencing.

Below is a table that provides some guidance to an interviewer as to what indicators you might come across on the telephone indicating that a person may be in distress.

NOTE: The indicators listed below are examples - not an exhaustive list.

LEVEL OF DISTRESS	SIGNS OR INDICATORS OF POSSIBLE DISTRESS
MILD	<ul style="list-style-type: none"> • Change in voice tone or volume. • Hesitancy to answer questions. • Use of inappropriate language/cursing. • Provides non-relevant answers to questions asked. • Displays an unwillingness or hesitancy to continue
MODERATE	<p>MILD signs plus any of the following:</p> <ul style="list-style-type: none"> • Displays signs of distress that may include long pauses, or sighing • Sobbing, weeping, and/or crying on the telephone. • Displays flat voice tones. • Being non-responsive • Provides nonsensical/bizarre answers.
SEVERE	<ul style="list-style-type: none"> • Talks about passive or active suicidal thoughts with or without a plan • Talks about wishing another person was dead with or without a plan to kill the person • Respondent asks for immediate help from emergency services or 911

- | | |
|--|---|
| | <ul style="list-style-type: none"> • Respondent poses an immediate threat to themselves or someone else |
|--|---|

Step 3: Respond appropriately to the situation.

Based on your observation of the level of distress it is imperative that you react appropriately and with sensitivity. When a respondent displays emotional distress, either verbally or non-verbally (i.e., crying) you should acknowledge their distress and if appropriate offer to finish the interview at another time. Some acknowledgement phrases you may use include:

Acknowledgement Phrases

- “It sounds like these questions may be upsetting to you. Would you like to take a short break and get a drink of water?”
- “Would you like me to skip this question and go to the next section?”
- “Are you ok? Do you want to keep going with the interview? If not, I can call you back another time to finish.”
- “Thank you for sharing that.”
- “We appreciate you taking time to talk to us today, would it help to take a short break?”
- “These questions seem to be frustrating you, would you like me to call back at a better time to complete the interview?”
- “Sir/Ma’am, would you like to take a break and continue this at a later time?”
- “We really appreciate you telling us this.”

If the respondent continues to exhibit distressed behavior you should provide the hotline number to the Ohio Department of Mental Health and Addiction Services (1-877-275-6364). In the event the respondent chooses to terminate the interview because of distress, you should record detailed comments about the case as well as complete a problem sheet describing the distress, and then put the case in the supervisor review queue so that it can be reviewed by project staff who will determine if the case should be returned to production. All such cases will be reviewed.

Similarly, in the unlikely event that a respondent exhibits severe distress by expressing thoughts/intentions of suicide, the interviewer will stop the interview and will encourage the respondent to call the National Suicide Hotline (1-800-273-8255 (TALK)). You may also offer to transfer the respondent to that hotline. Detailed comments about any case involving suicide should be recorded in a problem sheet and immediately reported to a supervisor. Break-off interviews with potentially suicidal respondents will not be placed back into production.

Step 4: Document the case by preparing a problem sheet

Once a distress situation is encountered it is necessary to document the case immediately. Notify a supervisor to assist you when completing a problem sheet. Please remember, more detail and more information are better than less. The problem sheet needs to include details of the event so someone else can understand the type of distress and what actions the interviewer used when responding to the distress. The respondent's name should not be mentioned in this documentation.

5.3 Telephone Interviewer Distress

You may encounter a situation in which a respondent shares an experience or says something that is beyond the scope of this project which makes you feel uncomfortable. The following are procedures for you to follow in that situation.

- Encourage the respondent to stay on track by saying, “I don’t want to take any more of your time than necessary, so why don’t I ask the next question” and quickly move on with the interview.
- If a respondent continues to share information that is making you uncomfortable, thank the respondent for their time and disconnect the call. You should make careful case notes about the nature of the conversation so that project staff can review to determine whether or not the case should be called back. Please put these cases in the supervisor review queue, and if necessary, speak to your supervisor immediately.

6. Refusal Avoidance and Refusal Conversion

6.1 Dealing with Reluctant Respondents

Initial refusals from sample members often come before you have had a chance to explain what the study is about. Successful interviewers learn to vary their approach according to the attitude and comments of the respondents. While most respondents will be satisfied with the basic introduction, you must be prepared to answer more detailed questions if necessary. At times such questions may not be verbalized or may be hidden in another question or statement made by a potential respondent. You must become sensitive to such feelings and be prepared to deal with them. Even though not expressed, the person you wish to interview may hesitate because of various suspicions or a lack of understanding. Among the barriers you may encounter and have to overcome are:

- **Lack of understanding of this research.** The sample members may not understand what you, RTI, or the State of Ohio are doing and why. Quickly, prior to going into the more formal initial interview procedures, you need to be ready to briefly explain why this study is important and how it's being conducted. This explanation should be clear and concise.
- **Concern that personal or sensitive questions will be asked.** Explain to sample members who express or appear to have this concern that the personal or sensitive questions you will ask are necessary to make this study useful. Explain that names will never be associated with any reported information. The answers they give will be held in the strictest confidence. You may also tell them that while we hope they will answer all questions, they do not have to answer any question they do not want to answer. However, you should also emphasize that it is very critical that we get as many people as possible to answer all questions.
- **Fear that wrong answers will be given, or the interview will make the respondent seem unintelligent.** If you sense that this fear is causing reluctance, explain that we are not testing anyone, there are no right or wrong answers, and that everyone's ideas and attitudes are important to the study. Most questions simply involve recalling facts and personal experiences.
- **Belief that you are really selling something.** Unfortunately, unethical use of survey research approaches by salespeople has made people, in some areas, suspicious of interviewers. Your introduction, in which you immediately explain who you are and why you are calling, will help deal with such suspicions.

In general, when answering questions or overcoming objections, respond positively to concerns voiced and do not argue with or alienate the sample member. Listen to any questions carefully and attempt to answer them briefly. Do not respond with more details than are required to meet a concern because additional details may suggest more questions or raise new concerns. Also, when you cannot answer a question, don't hesitate to tell a respondent that you will get an answer to his/her important question and then arrange a callback appointment to provide the information.

6.2 Refusal Avoidance Techniques

Maintaining a positive, professional attitude:

- remain in control of the interview;
- be accommodating;
- treat respondents the way you would like to be treated;
- always use good manners; and
- remember that you are a professional representative of the State of Ohio, as well as RTI International.

Knowing what to say and when to say it:

- explain the importance of the study;
- explain our procedures;
- offer the project toll free number, 1-833-947-2577, so the respondent can check the validity of the study; and
- apologize for bothering them but explain that what we are doing is important and that their participation is necessary for the success of the study.

6.3 Refusals

Since the refusal rate is a large component of interview non-response, one of the most effective methods of maximizing the interview response rate is to minimize the refusal rate. The first (and most critical) step is the effort by the initial interviewer to deal effectively with reluctant sample members, therefore minimizing the incidence of initial refusals.

Interviewers need to be aware that participation by sample members is extremely important to the success of a study and that refusals cannot be accepted without reasonable efforts to convince the sample member to cooperate. Some general suggestions for dealing with potential non-respondent sample members are:

- Never take a comment or action of a sample member personally because he/she does not know you and, if your approach has been professional, he is reacting negatively for reasons beyond your control.
- Recognize that many factors may result in refusal at the time of your initial call that may not be a problem at another time (e.g., you called while the person was in the shower, napping, just leaving the house, not feeling well); a call at another time may find the person in different circumstances and more receptive.
- Attempt to keep a reluctant respondent talking by making **brief** and **neutral** statements in response to their comments.
- Never refer to a previous refusal directly. Review the event level comments and be ready to address specific concerns.

In spite of the best efforts of interviewers, refusals do occasionally occur. If you do encounter a refusal, analyze what happened to see if you could have handled the situation better. If necessary, discuss the situation with your supervisor or a team leader to see if he/she can suggest a way you could have handled the situation better. Generally, such cases will be followed up by someone else in an effort to obtain cooperation, so it's important that you provide adequate documentation of the refusal.

When you code a case as a refusal, be sure to provide thorough information about the nature of and reasons for the refusal. This is the only information that our refusal conversion interviewers will have at their disposal as they subsequently try to convert these cases. Their success in converting these cases into completed interviews depends, in large part, on how fully and accurately you document the reasons given for the refusal and other relevant details via your comments so they can prepare an appropriate approach. Always try to be the interviewer that other interviewers want to follow, not the interviewer that makes people wonder if all the information was recorded accurately.

And remember, a professional interviewer never harasses or unduly pressures a respondent. On the other hand, interviewers need to be aware that participation by respondents is extremely important to the success of a study and that refusals cannot be accepted without reasonable efforts to convince the respondent to cooperate

7. Administering the Survey

7.1 The Questionnaire

When administering the questionnaire, CATI will route you to the correct questions based on the responses of the sample member. The questionnaire is divided into five sections containing different modules described below. Depending on the respondent's answers, the interview is expected to take approximately 20 minutes to complete.

Opening Section

Intro	Introduction and Informed Consent
	Screener and Cell Phone Usage

Health Insurance

SECTION A	Current Insurance Status
SECTION B	Currently Insured Adult
SECTION C	Currently Uninsured Adult

Access and Utilization of Healthcare

SECTION D	Adult Health Status & Care Giving
SECTION E	Utilization of Adult Health Care Services
SECTION F	Sources of Care and Determinants

Demographics

SECTION G	Employment
SECTION H	Adult Demographics & Family Income

Closing Section

SECTION Q	Household Questions
• CHILD	IF APPLICABLE, Child Questionnaire
CLOSING	Closing Statements and Incentive

7.1.1 Key Sections in the Questionnaire

The 2023 OMAS has some very specific definitions and detailed protocols. While the entire survey requires your keen attention to detail, some items may present more of a challenge than others. Below is a brief list of items unique to the 2023 OMAS.

- **Screening**–Please note, that for the purpose of the 2023 OMAS, an adult is considered someone 19 years of age and older. At CF1, when you ask, “May I speak with an adult?” it is important to remember that the person needs to be age 19 or older.
- **Adult**–Defined as a person **19** and older.
- **Child**–Defined as a person **18** and younger
- **Landline vs. Cell Phone**–If we anticipate calling a cell phone and instead reach someone on a landline, we will continue the interview after checking the respondent is not driving.
- **Proxy Adult Interviews**–If the selected respondent has a long term or permanent physical or mental impairment and is not capable of answering the questions over the phone, you may conduct the interview with a “proxy adult.” The proxy adult is someone who is knowledgeable about the selected person’s insurance status.
- **Proxy Child Interviews**–You will conduct the interview with the adult who is most knowledgeable regarding the child’s insurance coverage and health status. It is possible that this adult is not the same one who completed the adult questionnaire.
- **Household definition**–Household refers to all of the people who are living in the house, apartment, or mobile home where we reached the respondent.
- **Family definition**–Defined as two or more persons residing together who are related by birth, marriage, adoption or legal guardian.
- **Insurance questions**–There may be times when a respondent is not clear on a definition or a type of insurance. There are interviewer notes throughout the survey that you may read if necessary. However, you may only provide the statements and definitions listed in the survey. You may not offer your own definition or explanation to a respondent.

- **Breastfeeding** – There are a few questions that ask pregnant women about how they plan to feed the new baby. Some women may find the questions sensitive. Do not apologize for the questions. Do remind a respondent that she can skip any question she would like. In the rare event that a respondent offers that she is not keeping or delivering the baby you will not ask this set of questions. If a respondent wants to refuse any of the questions you should not attempt refusal conversions.
- **Income questions**–We will provide ranges as answer options for the respondent to select. The ranges are set based on the number of people reported in the respondent’s family (S11 and S13). Do remind the respondent that their answers are confidential, and the information will be reported at a group level.

7.2 General Interviewing Techniques

7.2.1 Asking Questions

The following are guidelines for asking questions:

- Ask the questions exactly as they are presented. Do not abbreviate or condense any question.
- Emphasize all words or phrases that are in **bold**.
- Ask every question specified, even when a respondent has seemingly provided the answer as part of the response to another question. The answer received in the context of one question may not be the same answer that will be received when the other question is asked. If it becomes cumbersome to the respondent, remind him/her gently that you must ask all questions of all respondents.
- If the answer to a question indicates that the respondent did not understand the intent of the question, repeat the question.
- Read the questions slowly, at a pace that allows them to be readily understood. It is important to remember that the respondent has not heard these questions before (at least not recently) and will not have had the exposure you have had to the questionnaire.
- Read transition statements just as they are presented. Transition statements are designed to inform the respondent of the nature of a question or a series of questions, to define a word, or to describe what is being asked for in the question. Don't create "transition statements" of your own; if you do, you risk introducing bias into the interview.

- Give the respondent plenty of time to recall past events.
- Do not suggest answers to the respondent. Your job as an interviewer is to read the questions, make sure the respondent understands what you have read, and then enter the responses. Do not assist the respondent in selecting responses.
- Ask the questions in the exact order in which they are presented.
- Words that are in ALL CAPITAL LETTERS are never to be read out loud. This includes both questions and response categories.
- Read all questions including those which may appear to be sensitive to the respondent in the same manner with no hesitation or change in inflection.

7.2.2 Probing

At times, it will be necessary for you to probe to obtain a more complete or more specific answer from a respondent. To elicit an acceptable response, you will often need to use an appropriate neutral or non-directive probe. The important thing to remember is **not** to suggest answers or lead the respondent. Some general rules for probing follow.

- Repeat the question if the respondent misunderstood or misinterpreted the question. After hearing the question for a second time, the respondent will probably understand what information is expected.
- Use the silent probe, which is pausing or hesitating to indicate to the respondent that you need additional or better information. This is a good probe to use after you have determined the respondent's response pattern.
- Use neutral questions or statements to encourage a respondent to elaborate on an inadequate response. Examples of neutral probes are "What do you mean?", "How do you mean?", "Tell me what you have in mind.", "Tell me more about..."
- Use clarification probes when the response is unclear, ambiguous, or contradictory. Be careful not to appear to challenge the respondent when clarifying a statement and always use a neutral probe. Examples of clarification probes are "Can you give me an example?" or "Could you be more specific?"
- Encourage the respondent to give his or her best guess if a respondent gives a "don't know" response. Let the respondent know that this is not a test, where there are right and wrong answers; the respondent's answers are the right answers.

- If the respondent asks you to fill in the answer or guess for him or her, let the respondent know that you can't do that, and ask the respondent if she or he requires clarification on question content or meaning.

7.2.3 Entering Responses

The majority of the questions you will ask include a pre-coded response. To enter a response for these types of questions, you will simply select the appropriate response option and enter the number corresponding to that response. There are some questions, however, that are open-ended—that is, you must enter a verbatim response to the question.

The conventions presented below must be followed at all times to ensure that the responses you enter accurately reflect the respondents' answers and to guarantee that questionnaire data are all collected in the same systematic manner.

- You must listen to what the respondent says and enter the appropriate answer if the response satisfies the objective of the question. If it does not appear to satisfy the objective, repeat the question.
- In entering answers to open-ended questions or "Other (SPECIFY)" categories, enter the response verbatim, exactly as it was given by the respondent.
- Enter the response immediately after it is given.
- If a respondent gives a range in response to a question, probe as appropriate for a more specific answer.

7.3 Screening the Household

Because we are getting our numbers from an RDD sample, we will not know who to interview until we dial the telephone number and screen for eligibility. The CATI system will provide the screening questions for you. In order to start a screening, you must verify if the individual you are speaking with is an adult, age 19 or older. The phone number must be a private residence or a non-business cell phone. Businesses will be coded out as ineligible.

Once an eligible household is confirmed, the screening process for picking the sample member may begin. If there is only one person in the household, we would select that person. For households with more than one adult we will select the individual with the most recent

birthday. For the cell phone sample, we will attempt to conduct an interview with the person (aged 19 or older) who answers the phone.

In order to ensure that the selection process is completely random, each household must be screened in the same way. Once an individual is selected as the respondent, they become the person that must be interviewed. Even if this person is hard to reach or another household member is willing to complete the interview, only the selected respondent may continue. Likewise, if a proxy adult is selected to answer questions for another adult or regarding a child, you must continue with the person selected as the proxy.

You will ask the respondent for the first name of the selected individual. If the respondent does not want to give their first name, you may ask for their initials. The purpose of asking for the first name or initials is to ensure that if a break-off occurs during the interview, the correct person can be identified when the call back is made. For the cell phone sample, we will attempt to conduct an interview with the person (aged 19 or older) who answers the phone, asking for the first name of the selected individual.

7.4 Monitoring and Feedback

To ensure that performance standards set for this project are met, supervisors, project staff, and the client will monitor interviewer performance. They will be listening for application of proper interviewing techniques, and will pay attention to production rates, and the number of refusals and breakoffs experienced. The CATI system will provide summary performance data for each interviewer for review by his or her supervisor and for discussion between the supervisor and interviewer.

Quality circle meetings will be held throughout the project. The project team will meet with interviewing staff to discuss operating issues, such as progress with production, the wording and structure of interview questions, special screens, quality control monitoring, gaining cooperation during the interview, refusal conversion, and the overall interviewing environment. These meetings have been well-received by all interviewers in past studies as an opportunity for interviewer teams to provide feedback on daily operations.

8. Pronunciation Guide

Alcoholic	Al-kuh- haw -lik		Huron	Hyoo -ron
Ask	Ahsk		Hypoglycemic	Hi-po-gli-se-mik
Ashtabula	Ash-tuh-byoo-luh		Infarction	In- fahrk -shuh n
Auglaize	Ah-glaze		Islander	Ahy -luh n-der
Bronchitis	Brong- kahy -tis		Latino	Luh- tee -noh
Cardiologists	Car-dee- all -a-jists		Latina	Luh- tee -nuh
Champaign	Sham- peyn		Mahoning	Ma-hon-ing
Codeine	Koh -deen		Meigs	Meg-z
Congestive	Kun- jes -tiv		Mexican	Mek -si-kuhn
Coronary	Kawr -e-neree		Morphine	Mawr -feen
Coshocton	Kuh -shok-tun		Muskingum	Muh-sking-uh m
Cuyahoga	Ki-Ya- Hoga		Myocardial	Mahy-uh- kahr -dee-uh-l
Debt	Det		Ohioan	Oh- hahy -oh-en
Diabetes	Dahy-uh- bee -teez		OxyContin	Oxy-con-tin
Emphysema	Em-fuh- see -muh		Pacific	Puh- sif -ik
Erie	Eer-ee		Percocet	Pur -kuh-set
Excellent	Ek-suh-luh nt		Scioto	Sigh -oh-toe
Feeling	Fee -ling		Specific	Spi- sif -ik
Fentanyl	Fen -tuh-nil		Tuscarawas	Tus -ka-ro-wa-s
Fidgety	Fij -i-tee		Wyandot	Wahy -uhn-dot
Gallia	Gahl -lee-ah		Vicodin	Vahy -kuh-din
Geauga	Jee- aw -ga			
Guernsey	Gurn -zee			

9. Reluctance vs. Refusal

Reluctance	VS.	Refusal
1. I don't think I qualify for this study.		1. Respondent uses profanity directed to the interviewer. This is not the same as casual profanity during the interview.
2. Can you pick someone else?		2. Respondent uses hate speech or racial, cultural slurs.
3. I am not really into surveys.		3. Respondent makes threatening statements to TI.
4. I am too old for this study.		4. Call me again, and I am calling the police.
5. I am hard to catch so maybe I should just skip this.		5. I am filing a complaint with the Better Business Bureau.
6. No one here has any insurance.		6. If you call again, I am contacting my lawyer.
7. I do not have any health problems.		7. (After 3 points stated) Respondent hangs up.
8. I do not think this is legit.		8. (After 3 points stated) Respondent says, "This is a waste of time, do not call me again."
9. Twenty seems like a long time.		9. Yeah, I know this is a survey for the State of Ohio about health insurance and I do not want to participate.
10. I'm on the other line now and this is not a good time.		10. I have told you 20 times to stop calling!! Do not call this evening, do not call this weekend, there is no time you can call!
11. Yeah, Yeah (hung up after 1 point)		
12. I doubt {sample member's name} will help you.		
13. I am in and out. You probably won't catch me.		
14. I'm on my way out, sorry I can't help you right now.		
15. Could you stop calling during the day?		

Appendix H: OMAS Medicaid Text Message Content

Release 1 Text Message 1

Hi, this is The Ohio State University, and we need your help. We're conducting a study of Ohioans to learn about health care experiences, and we'd like to hear from you. To thank you for your help, we'll send you a 20-dollar electronic VISA. Go to <https://osusurvey.com/?p=123456> or reply STOP to opt out.

Release 1 Text Message 2 (alternative message)

Hi, this is The Ohio State University. We are conducting a health questionnaire of Ohioans to learn about health care experiences, and we request your help with the study. We'll send you a 20-dollar electronic VISA to thank you for participating. Go to <https://osusurvey.com/?p=123456> or reply STOP to opt out.

Release 2 Text Message 1

Hello, this is The Ohio State University, and we need your help with our health care study, called the OMAS survey. The OMAS survey has been conducted by The Ohio State University and the Ohio Department of Medicaid since 1997 to learn about health care experiences in Ohio. Your feedback will help benefit fellow Ohioans, and we'll send you a 20-dollar electronic VISA to thank you for your time.

If you would like to know more about the study, please call the study team at 1-833-947-2577, or reply to this text message. When you are ready to complete the survey, go to <https://osusurvey.com/?p=123456>. Reply STOP to opt out.

Release 2 Text Message 2 (alternative message)

Hi again, this is The Ohio State University, and we still need your help with our health care questionnaire called the OMAS study. We want to know about your experiences with health care in Ohio, and we'll send you a 20-dollar electronic VISA to thank you for your time.

When you are ready to complete the survey, go to <https://osusurvey.com/?p=123456>. If you would like to know more about the survey, please visit <https://grc.osu.edu/OMAS>, call the study team at 1-833-947-2577, or reply to this text message. Reply STOP to opt out.

Release 1 and 2 Text Message 3

Hello, this is The Ohio State University, and we still need your help with our health care research project called the OMAS study—the study is about to end, and this is your last chance to participate! The OMAS study is conducted to learn about health care experiences in Ohio. Your feedback will help benefit fellow Ohioans, and we'll send you a 20-dollar electronic VISA to thank you for your time.

To complete the survey, go to <https://osusurvey.com/?p=123456>. If you would like to know more about the study, please call the study team at 1-833-947-2577 or reply to this text message. Reply STOP to opt out.

Appendix I: Response Rate and Disposition Tables

Note: No cases were identified as American Association for Public Opinion Research (AAPOR) code 2.3 (Other Non-Refusal), so the upper and lower bounds of the cooperation rates are the same throughout the following tables.

The cooperation rates are defined as follows:

$$COOP_{LB} = \frac{\text{completes}}{\text{completes} + \text{partials} + \text{refusals} + \text{other}}$$

$$COOP_{UP} = \frac{\text{completes}}{\text{completes} + \text{partials} + \text{refusals}}$$

Table I-1. Overall (%)

Sampling Phone	RR1	RR3	RR4	RR5	Coop LB	Coop UP
Overall	24.9	25.3	25.3	28.9	70.5	70.5
ABS	23.5	23.5	23.5	23.5	94.7	94.7
Medicaid	29.7	40.6	40.6	76.6	41.8	41.8

Table I-2. Medicaid Region (%)

Medicaid Region No.	Sampling Medicaid Region	RR1	RR3	RR4	RR5	Coop LB	Coop UP
1	Central/Southeast	25.1	25.5	25.5	28.9	72.5	72.5
2	Northeast	24.5	25.0	25.0	28.9	68.1	68.1
3	West	25.1	25.5	25.5	28.8	71.6	71.6

Table I-3. County Type (%)

Region No.	Sampling Region	RR1	RR3	RR4	RR5	Coop LB	Coop UP
1	Rural Appalachian	23.5	24.0	24.0	27.5	68.1	68.1
2	Metro	26.4	26.6	26.6	29.7	76.1	76.1
3	Rural Non-Appalachian	26.6	27.0	27.0	30.3	74.1	74.1
4	Suburban	26.5	27.0	27.0	31.1	70.9	70.9

Table I-4. Sub-Stratum (%)

Sub-Stratum	RR1	RR3	RR4	RR5	Coop LB	Coop UB
HIGH: Low Income	22.0	22.0	22.0	22.0	93.8	93.8
HIGH: Non-White	22.5	22.5	22.5	22.5	94.8	94.8
HIGH: Children	20.6	20.6	20.6	20.6	93.4	93.4
HIGH: Children, Non-White	24.7	24.7	24.7	24.7	95.3	95.3
HIGH: Non-White, Low Income	19.8	19.8	19.8	19.8	90.2	90.2
HIGH: Children, Low Income	19.7	19.7	19.7	19.7	92.6	92.6
HIGH: Children, Non-White, Low Income	22.6	22.6	22.6	22.6	94.4	94.4

Table I-5. Stratum (%)

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
1	Adams	Reference	ABS	19.6	19.6	19.6	19.6	70.5	70.5
2	Adams	HIGH: Low Income	ABS	21.9	21.9	21.9	21.9	93.7	93.7
3	Allen	Reference	ABS	25.5	25.5	25.5	25.5	96.4	96.4
4	Allen	HIGH: Non-White	ABS	26.1	26.1	26.1	26.1	94.1	94.1
5	Allen	HIGH: Children	ABS	24.4	24.4	24.4	24.4	97.2	97.2
6	Allen	HIGH: Children, Non-White	ABS	19.9	19.9	19.9	19.9	89.6	89.6
7	Ashland	Reference	ABS	25.6	25.6	25.6	25.6	93.9	93.9
8	Ashtabula	Reference	ABS	23.5	23.5	23.5	23.5	96.9	96.9
9	Ashtabula	HIGH: Low Income	ABS	26.3	26.3	26.3	26.3	94.8	94.8
10	Athens	Reference	ABS	29.0	29.0	29.0	29.0	93.7	93.7
11	Athens	HIGH: Low Income	ABS	22.4	22.4	22.4	22.4	96.6	96.6
12	Auglaize	Reference	ABS	31.2	31.2	31.2	31.2	95.7	95.7
13	Auglaize	HIGH: Children	ABS	31.5	31.5	31.5	31.5	97.3	97.3
14	Belmont	Reference	ABS	22.3	22.3	22.3	22.3	95.9	95.9
15	Belmont	HIGH: Low Income	ABS	28.2	28.2	28.2	28.2	93.6	93.6

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
16	Brown	Reference	ABS	24.7	24.7	24.7	24.7	94.6	94.6
17	Brown	HIGH: Children	ABS	28.2	28.2	28.2	28.2	97.1	97.1
18	Butler	Reference	ABS	22.0	22.0	22.0	22.0	94.3	94.3
19	Butler	HIGH: Non-White	ABS	17.3	17.3	17.3	17.3	93.5	93.5
20	Butler	HIGH: Children	ABS	22.6	22.6	22.6	22.6	91.5	91.5
21	Butler	HIGH: Children, Non-White	ABS	20.1	20.1	20.1	20.1	94.0	94.0
22	Carroll	Reference	ABS	23.8	23.8	23.8	23.8	83.5	83.5
23	Champaign	Reference	ABS	25.7	25.7	25.7	25.7	95.0	95.0
24	Champaign	HIGH: Children	ABS	24.1	24.1	24.1	24.1	100.0	100.0
25	Clark	Reference	ABS	24.7	24.7	24.7	24.7	96.6	96.6
26	Clark	HIGH: Non-White	ABS	23.5	23.5	23.5	23.5	94.5	94.5
27	Clermont	Reference	ABS	22.4	22.4	22.4	22.4	93.0	93.0
28	Clermont	HIGH: Children	ABS	26.4	26.4	26.4	26.4	95.1	95.1
29	Clinton	Reference	ABS	26.0	26.0	26.0	26.0	91.7	91.7
30	Clinton	HIGH: Children	ABS	18.2	18.2	18.2	18.2	97.8	97.8
31	Columbiana	Reference	ABS	25.1	25.1	25.1	25.1	91.9	91.9
32	Columbiana	HIGH: Children	ABS	28.0	28.0	28.0	28.0	94.9	94.9
33	Coshocton	Reference	ABS	19.3	19.3	19.3	19.3	95.9	95.9
34	Coshocton	HIGH: Children	ABS	29.8	29.8	29.8	29.8	97.8	97.8
35	Crawford	Reference	ABS	29.3	29.3	29.3	29.3	100.0	100.0
36	Crawford	HIGH: Children	ABS	28.8	28.8	28.8	28.8	97.2	97.2
37	Cuyahoga	Reference	ABS	26.4	26.4	26.4	26.4	97.1	97.1
38	Cuyahoga	HIGH: Low Income	ABS	20.0	20.0	20.0	20.0	96.7	96.7
39	Cuyahoga	HIGH: Non-White	ABS	19.5	19.5	19.5	19.5	92.1	92.1
40	Cuyahoga	HIGH: Non-White, Low Income	ABS	19.0	19.0	19.0	19.0	93.7	93.7

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
41	Cuyahoga	HIGH: Children	ABS	23.7	23.7	23.7	23.7	93.1	93.1
42	Cuyahoga	HIGH: Children, Low Income	ABS	20.6	20.6	20.6	20.6	95.9	95.9
43	Cuyahoga	HIGH: Children, Non-White	ABS	22.2	22.2	22.2	22.2	84.4	84.4
44	Cuyahoga	HIGH: Children, Non-White, Low Income	ABS	18.9	18.9	18.9	18.9	93.5	93.5
45	Darke	Reference	ABS	27.6	27.6	27.6	27.6	92.2	92.2
46	Darke	HIGH: Children	ABS	19.6	19.6	19.6	19.6	95.6	95.6
47	Defiance	Reference	ABS	27.8	27.8	27.8	27.8	95.7	95.7
48	Defiance	HIGH: Children	ABS	21.2	21.2	21.2	21.2	96.5	96.5
49	Delaware	Reference	ABS	27.0	27.0	27.0	27.0	93.3	93.3
50	Delaware	HIGH: Children	ABS	25.6	25.6	25.6	25.6	97.1	97.1
51	Erie	Reference	ABS	29.2	29.2	29.2	29.2	95.9	95.9
52	Erie	HIGH: Non-White	ABS	19.5	19.5	19.5	19.5	98.4	98.4
53	Fairfield	Reference	ABS	26.9	26.9	26.9	26.9	91.2	91.2
54	Fairfield	HIGH: Children	ABS	22.9	22.9	22.9	22.9	95.1	95.1
55	Fayette	Reference	ABS	19.8	19.8	19.8	19.8	93.2	93.2
56	Franklin	Reference	ABS	21.2	21.2	21.2	21.2	90.7	90.7
57	Franklin	HIGH: Low Income	ABS	16.5	16.5	16.5	16.5	96.2	96.2
58	Franklin	HIGH: Non-White	ABS	19.6	19.6	19.6	19.6	91.3	91.3
59	Franklin	HIGH: Non-White, Low Income	ABS	21.1	21.1	21.1	21.1	92.4	92.4
60	Franklin	HIGH: Children	ABS	25.9	25.9	25.9	25.9	91.4	91.4
61	Franklin	HIGH: Children, Low Income	ABS	23.3	23.3	23.3	23.3	94.8	94.8
62	Franklin	HIGH: Children, Non-White	ABS	19.2	19.2	19.2	19.2	90.3	90.3
63	Franklin	HIGH: Children, Non-White, Low Income	ABS	15.6	15.6	15.6	15.6	89.8	89.8
64	Fulton	Reference	ABS	27.1	27.1	27.1	27.1	87.6	87.6
65	Gallia	Reference	ABS	24.2	24.2	24.2	24.2	96.8	96.8

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
66	Geauga	Reference	ABS	28.5	28.5	28.5	28.5	96.5	96.5
67	Geauga	HIGH: Children	ABS	15.9	.	.	15.9	96.8	96.8
68	Greene	Reference	ABS	27.0	27.0	27.0	27.0	100.0	100.0
69	Greene	HIGH: Low Income	ABS	25.4	25.4	25.4	25.4	98.3	98.3
70	Greene	HIGH: Children	ABS	28.2	28.2	28.2	28.2	98.0	98.0
71	Greene	HIGH: Children, Low Income	ABS	21.4	21.4	21.4	21.4	95.4	95.4
72	Guernsey	Reference	ABS	27.2	27.2	27.2	27.2	96.4	96.4
73	Guernsey	HIGH: Low Income	ABS	19.7	19.7	19.7	19.7	97.5	97.5
74	Hamilton	Reference	ABS	20.5	20.5	20.5	20.5	100.0	100.0
75	Hamilton	HIGH: Non-White	ABS	20.8	20.8	20.8	20.8	93.5	93.5
76	Hamilton	HIGH: Children	ABS	26.2	26.2	26.2	26.2	93.5	93.5
77	Hamilton	HIGH: Children, Non-White	ABS	18.1	18.1	18.1	18.1	94.9	94.9
78	Hancock	Reference	ABS	25.5	25.5	25.5	25.5	89.3	89.3
79	Hancock	HIGH : Children	ABS	28.9	28.9	28.9	28.9	92.1	92.1
80	Hardin	Reference	ABS	27.0	27.0	27.0	27.0	95.1	95.1
81	Hardin	HIGH: Children	ABS	21.7	21.7	21.7	21.7	98.8	98.8
82	Harrison	Reference	ABS	25.7	25.7	25.7	25.7	94.3	94.3
83	Henry	Reference	ABS	26.6	26.6	26.6	26.6	93.4	93.4
84	Highland	Reference	ABS	26.1	26.1	26.1	26.1	96.4	96.4
85	Highland	HIGH: Low Income	ABS	19.5	19.5	19.5	19.5	98.8	98.8
86	Hocking	Reference	ABS	23.5	23.5	23.5	23.5	100.0	100.0
87	Hocking	HIGH: Children	ABS	23.5	23.5	23.5	23.5	97.1	97.1
88	Holmes	Reference	ABS	23.5	23.5	23.5	23.5	100.0	100.0
89	Holmes	HIGH: Children	ABS	18.2	18.2	18.2	18.2	88.9	88.9
90	Huron	Reference	ABS	25.3	25.3	25.3	25.3	96.2	96.2
91	Huron	HIGH: Children	ABS	20.1	20.1	20.1	20.1	92.8	92.8
92	Jackson	Reference	ABS	24.5	24.5	24.5	24.5	100.0	100.0
93	Jackson	HIGH: Children	ABS	20.5	20.5	20.5	20.5	94.5	94.5
94	Jefferson	Reference	ABS	26.2	26.2	26.2	26.2	91.5	91.5
95	Jefferson	HIGH: Low Income	ABS	23.0	23.0	23.0	23.0	96.2	96.2
96	Knox	Reference	ABS	25.0	25.0	25.0	25.0	93.2	93.2
97	Knox	HIGH: Children	ABS	23.4	23.4	23.4	23.4	91.8	91.8

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
98	Lake	Reference	ABS	25.4	25.4	25.4	25.4	95.3	95.3
99	Lake	HIGH: Children	ABS	26.6	26.6	26.6	26.6	96.4	96.4
100	Lawrence	Reference	ABS	21.2	21.2	21.2	21.2	96.2	96.2
101	Lawrence	HIGH: Children	ABS	20.3	20.3	20.3	20.3	95.6	95.6
102	Licking	Reference	ABS	26.5	26.5	26.5	26.5	97.3	97.3
103	Licking	HIGH: Children	ABS	21.9	21.9	21.9	21.9	95.3	95.3
104	Logan	Reference	ABS	23.1	23.1	23.1	23.1	92.5	92.5
105	Lorain	Reference	ABS	24.8	24.8	24.8	24.8	95.2	95.2
106	Lorain	HIGH: Non-White	ABS	25.0	25.0	25.0	25.0	94.8	94.8
107	Lorain	HIGH: Children	ABS	24.1	24.1	24.1	24.1	91.2	91.2
108	Lorain	HIGH: Children, Non-White	ABS	17.6	17.6	17.6	17.6	96.8	96.8
109	Lucas	Reference	ABS	28.3	28.3	28.3	28.3	85.9	85.9
110	Lucas	HIGH: Non-White	ABS	22.6	22.6	22.6	22.6	96.5	96.5
111	Lucas	HIGH: Children	ABS	29.6	29.6	29.6	29.6	95.1	95.1
112	Lucas	HIGH: Children, Non-White	ABS	22.8	22.8	22.8	22.8	95.2	95.2
113	Madison	Reference	ABS	30.0	30.0	30.0	30.0	88.4	88.4
114	Madison	HIGH: Children	ABS	25.8	25.8	25.8	25.8	100.0	100.0
115	Mahoning	Reference	ABS	26.4	26.4	26.4	26.4	90.9	90.9
116	Mahoning	HIGH: Non-White	ABS	21.0	21.0	21.0	21.0	95.9	95.9
117	Mahoning	HIGH: Children	ABS	26.8	26.8	26.8	26.8	91.3	91.3
118	Mahoning	HIGH: Children, Non-White	ABS	23.8	23.8	23.8	23.8	94.2	94.2
119	Marion	Reference	ABS	26.7	26.7	26.7	26.7	95.3	95.3
120	Marion	HIGH: Low Income	ABS	29.1	29.1	29.1	29.1	97.5	97.5
121	Marion	HIGH: Children	ABS	21.3	21.3	21.3	21.3	97.0	97.0
122	Medina	Reference	ABS	26.2	26.2	26.2	26.2	98.2	98.2
123	Medina	HIGH: Children	ABS	30.6	30.6	30.6	30.6	96.0	96.0
124	Meigs	Reference	ABS	28.5	28.5	28.5	28.5	96.4	96.4
125	Meigs	HIGH: Low Income	ABS	30.0	30.0	30.0	30.0	98.6	98.6
126	Mercer	Reference	ABS	26.0	26.0	26.0	26.0	98.1	98.1
127	Mercer	HIGH: Children	ABS	34.2	34.2	34.2	34.2	95.8	95.8
128	Miami	Reference	ABS	24.9	24.9	24.9	24.9	96.2	96.2
129	Miami	HIGH: Children	ABS	25.6	25.6	25.6	25.6	96.0	96.0

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
130	Monroe	Reference	ABS	26.2	26.2	26.2	26.2	95.5	95.5
131	Montgomery	Reference	ABS	26.5	26.5	26.5	26.5	95.7	95.7
132	Montgomery	HIGH: Low Income	ABS	22.1	22.1	22.1	22.1	97.0	97.0
133	Montgomery	HIGH: Non-White	ABS	20.4	20.4	20.4	20.4	95.7	95.7
134	Montgomery	HIGH: Non-White, Low Income	ABS	20.6	20.6	20.6	20.6	93.6	93.6
135	Montgomery	HIGH: Children	ABS	23.5	23.5	23.5	23.5	92.6	92.6
136	Montgomery	HIGH: Children, Low Income	ABS	22.1	22.1	22.1	22.1	95.9	95.9
137	Montgomery	HIGH: Children, Non-White	ABS	19.2	19.2	19.2	19.2	100.0	100.0
138	Montgomery	HIGH: Children, Non-White, Low Income	ABS	23.6	23.6	23.6	23.6	98.3	98.3
139	Morgan	Reference	ABS	25.7	25.7	25.7	25.7	90.7	90.7
140	Morrow	Reference	ABS	28.4	28.4	28.4	28.4	97.1	97.1
141	Morrow	HIGH: Children	ABS	24.5	24.5	24.5	24.5	96.5	96.5
142	Muskingum	Reference	ABS	26.1	26.1	26.1	26.1	92.5	92.5
143	Muskingum	HIGH: Children	ABS	29.1	29.1	29.1	29.1	96.7	96.7
144	Noble	Reference	ABS	26.9	26.9	26.9	26.9	95.1	95.1
145	Ottawa	Reference	ABS	28.0	28.0	28.0	28.0	95.0	95.0
146	Paulding	Reference	ABS	24.6	24.6	24.6	24.6	99.1	99.1
147	Perry	Reference	ABS	23.1	23.1	23.1	23.1	94.6	94.6
148	Perry	HIGH: Children	ABS	26.2	26.2	26.2	26.2	87.0	87.0
149	Pickaway	Reference	ABS	23.6	23.6	23.6	23.6	93.8	93.8
150	Pickaway	HIGH: Children	ABS	24.0	24.0	24.0	24.0	96.0	96.0
151	Pike	Reference	ABS	19.9	19.9	19.9	19.9	96.2	96.2
152	Portage	Reference	ABS	23.6	23.6	23.6	23.6	93.6	93.6
153	Portage	HIGH: Children	ABS	23.0	23.0	23.0	23.0	95.2	95.2
154	Preble	Reference	ABS	22.7	22.7	22.7	22.7	95.8	95.8
155	Putnam	Reference	ABS	29.3	29.3	29.3	29.3	96.7	96.7
156	Richland	Reference	ABS	26.1	26.1	26.1	26.1	97.7	97.7
157	Richland	HIGH: Children	ABS	25.3	25.3	25.3	25.3	94.7	94.7
158	Ross	Reference	ABS	24.0	24.0	24.0	24.0	96.8	96.8
159	Ross	HIGH: Children	ABS	21.6	21.6	21.6	21.6	90.1	90.1
160	Sandusky	Reference	ABS	26.9	26.9	26.9	26.9	95.6	95.6

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
161	Sandusky	HIGH: Children	ABS	26.7	26.7	26.7	26.7	94.4	94.4
162	Scioto	Reference	ABS	22.8	22.8	22.8	22.8	96.9	96.9
163	Scioto	HIGH: Low Income	ABS	24.8	24.8	24.8	24.8	97.4	97.4
164	Scioto	HIGH: Children	ABS	24.4	24.4	24.4	24.4	97.5	97.5
165	Scioto	HIGH: Children, Low Income	ABS	23.1	23.1	23.1	23.1	98.0	98.0
166	Seneca	Reference	ABS	29.8	29.8	29.8	29.8	96.2	96.2
167	Seneca	HIGH: Children	ABS	27.8	27.8	27.8	27.8	94.0	94.0
168	Shelby	Reference	ABS	29.2	29.2	29.2	29.2	100.0	100.0
169	Shelby	HIGH: Children	ABS	24.9	24.9	24.9	24.9	97.8	97.8
170	Stark	Reference	ABS	25.7	25.7	25.7	25.7	94.7	94.7
171	Stark	HIGH: Non-White	ABS	22.3	22.3	22.3	22.3	94.7	94.7
172	Stark	HIGH: Children	ABS	25.7	25.7	25.7	25.7	98.1	98.1
173	Stark	HIGH: Children, Non-White	ABS	26.7	26.7	26.7	26.7	92.6	92.6
174	Summit	Reference	ABS	25.0	25.0	25.0	25.0	94.4	94.4
175	Summit	HIGH: Non-White	ABS	23.5	23.5	23.5	23.5	94.6	94.6
176	Summit	HIGH: Children	ABS	28.7	28.7	28.7	28.7	97.8	97.8
177	Summit	HIGH: Children, Non-White	ABS	17.6	17.6	17.6	17.6	90.7	90.7
178	Trumbull	Reference	ABS	27.8	27.8	27.8	27.8	97.5	97.5
179	Trumbull	HIGH: Low Income	ABS	24.8	24.8	24.8	24.8	94.0	94.0
180	Trumbull	HIGH: Children	ABS	25.8	25.8	25.8	25.8	97.1	97.1
181	Trumbull	HIGH: Children, Low Income	ABS	25.3	25.3	25.3	25.3	95.6	95.6
182	Tuscarawas	Reference	ABS	25.5	25.5	25.5	25.5	95.8	95.8
183	Tuscarawas	HIGH: Children	ABS	20.2	20.2	20.2	20.2	91.8	91.8
184	Union	Reference	ABS	18.0	18.0	18.0	18.0	88.4	88.4
185	Union	HIGH: Children	ABS	27.4	27.4	27.4	27.4	96.7	96.7
186	Van Wert	Reference	ABS	24.7	24.7	24.7	24.7	98.4	98.4
187	Van Wert	HIGH: Children	ABS	26.1	26.1	26.1	26.1	95.3	95.3
188	Vinton	Reference	ABS	26.5	26.5	26.5	26.5	93.1	93.1
189	Warren	Reference	ABS	25.0	25.0	25.0	25.0	96.3	96.3
190	Warren	HIGH: Children	ABS	23.5	23.5	23.5	23.5	95.0	95.0
191	Washington	Reference	ABS	29.6	29.6	29.6	29.6	93.5	93.5
192	Washington	HIGH: Low Income	ABS	39.4	39.4	39.4	39.4	97.4	97.4

Strata	County	Strata Details ¹	Frame Type	RR1	RR3	RR4	RR5	Coop LB	Coop UB
193	Wayne	Reference	ABS	25.7	25.7	25.7	25.7	95.2	95.2
194	Wayne	HIGH: Children	ABS	21.4	21.4	21.4	21.4	95.9	95.9
195	Williams	Reference	ABS	25.1	25.1	25.1	25.1	95.5	95.5
196	Williams	HIGH: Children	ABS	23.8	23.8	23.8	23.8	97.7	97.7
197	Wood	Reference	ABS	28.8	28.8	28.8	28.8	96.5	96.5
198	Wood	HIGH: Low Income	ABS	24.2	24.2	24.2	24.2	95.0	95.0
199	Wood	HIGH: Children	ABS	32.2	32.2	32.2	32.2	100.0	100.0
200	Wyandot	Reference	ABS	27.5	27.5	27.5	27.5	97.2	97.2
201	--	G-VIII: Metro	Medicaid	31.4	41.8	41.8	74.1	44.8	44.8
202	--	G-VIII: Rural non-App	Medicaid	25.6	38.1	38.1	76.6	36.3	36.3
203	--	G-VIII: Rural App	Medicaid	30.6	39.7	39.7	75.5	42.0	42.0
204	--	G-VIII: Suburban	Medicaid	27.1	37.3	37.3	76.5	38.5	38.5
205	--	CFC	Medicaid	29.6	38.3	38.3	77.0	43.3	43.3
206	--	ABD/MBIWD only	Medicaid	34.3	46.0	46.0	78.5	47.6	47.6
207	--	Dual MyCare community	Medicaid	39.6	48.8	48.8	78.0	51.0	51.0
208	--	Dual non-MyCare	Medicaid	38.4	48.4	48.4	79.8	51.2	51.2

¹ As detailed in **Section 2**, "HIGH: Children" strata represent Census block groups in a county with a relatively high percentage of children; "HIGH: Low Incentive" strata represent Census block groups in a county with a relatively high proportion of people below the poverty level for a family of 3; and "HIGH: Non-White" strata represent Census block groups with a high percentage of non-White residents. "Reference" represents all Census block groups in the county that cannot be classified as high children, high low incentive, or high non-White.

Table I-6. Ohio County (%)

County Number	County Name	RR1	RR3	RR4	RR5	Coop LB	Coop UB
1	Adams	21.5	21.8	21.8	23.6	75.1	75.1
2	Allen	26.8	27.2	27.2	31.0	72.7	72.7
3	Ashland	27.0	27.4	27.4	31.2	72.8	72.8
4	Ashtabula	25.6	26.4	26.4	31.9	64.7	64.7
5	Athens	28.8	29.8	29.8	36.3	67.5	67.5
6	Auglaize	31.8	32.0	32.0	34.6	82.6	82.6
7	Belmont	25.8	26.4	26.4	29.7	69.5	69.5
8	Brown	30.3	30.9	30.9	35.9	75.1	75.1
9	Butler	22.0	22.3	22.3	25.5	68.0	68.0
10	Carroll	23.6	23.7	23.7	25.8	77.3	77.3

County Number	County Name	RR1	RR3	RR4	RR5	Coop LB	Coop UB
11	Champaign	27.8	28.1	28.1	31.7	78.1	78.1
12	Clark	24.7	25.2	25.2	29.4	68.4	68.4
13	Clermont	25.6	26.0	26.0	29.7	71.6	71.6
14	Clinton	24.2	24.6	24.6	28.5	69.0	69.0
15	Columbiana	27.9	28.7	28.7	34.8	65.5	65.5
16	Coshocton	24.9	25.2	25.2	28.4	74.7	74.7
17	Crawford	30.0	30.7	30.7	36.1	72.8	72.8
18	Cuyahoga	21.8	22.3	22.3	25.7	65.9	65.9
19	Darke	27.0	27.2	27.2	29.6	77.4	77.4
20	Defiance	26.7	27.0	27.0	30.5	71.6	71.6
21	Delaware	27.1	27.2	27.2	28.6	85.4	85.4
22	Erie	27.6	28.1	28.1	32.3	68.4	68.4
23	Fairfield	26.1	26.4	26.4	29.9	75.7	75.7
24	Fayette	23.4	23.6	23.6	26.0	77.6	77.6
25	Franklin	22.4	22.8	22.8	25.8	70.3	70.3
26	Fulton	28.2	28.3	28.3	30.9	81.7	81.7
27	Gallia	26.5	27.0	27.0	30.2	75.6	75.6
28	Geauga	25.6	25.6	25.6	27.8	80.8	80.8
29	Greene	27.3	27.6	27.6	30.9	75.3	75.3
30	Guernsey	28.5	29.3	29.3	34.8	70.9	70.9
31	Hamilton	22.7	23.1	23.1	26.1	70.0	70.0
32	Hancock	27.0	27.3	27.3	31.8	67.1	67.1
33	Hardin	26.8	27.0	27.0	28.9	85.1	85.1
34	Harrison	26.4	26.5	26.5	27.6	85.5	85.5
35	Henry	26.4	26.4	26.4	28.3	82.4	82.4
36	Highland	27.6	28.2	28.2	33.5	76.1	76.1
37	Hocking	24.1	24.6	24.6	28.1	71.7	71.7
38	Holmes	19.3	19.4	19.4	20.3	84.5	84.5
39	Huron	25.0	25.5	25.5	29.2	70.1	70.1
40	Jackson	25.0	25.5	25.5	29.5	70.7	70.7
41	Jefferson	27.5	28.5	28.5	33.8	65.6	65.6
42	Knox	25.7	26.0	26.0	29.4	72.5	72.5

County Number	County Name	RR1	RR3	RR4	RR5	Coop LB	Coop UB
43	Lake	26.2	26.5	26.5	29.1	76.1	76.1
44	Lawrence	23.5	24.1	24.1	28.4	68.5	68.5
45	Licking	26.0	26.3	26.3	29.5	74.5	74.5
46	Logan	25.9	26.2	26.2	29.4	72.1	72.1
47	Lorain	24.1	24.5	24.5	28.5	66.2	66.2
48	Lucas	26.8	27.5	27.5	32.0	66.6	66.6
49	Madison	29.5	29.7	29.7	32.7	82.2	82.2
50	Mahoning	26.1	26.8	26.8	32.1	64.2	64.2
51	Marion	28.2	29.0	29.0	34.6	69.8	69.8
52	Medina	27.6	27.8	27.8	31.1	76.7	76.7
53	Meigs	30.9	31.5	31.5	35.0	80.1	80.1
54	Mercer	29.4	29.6	29.6	32.3	79.5	79.5
55	Miami	25.7	26.0	26.0	29.6	73.6	73.6
56	Monroe	26.8	27.0	27.0	29.0	80.9	80.9
57	Montgomery	24.1	24.7	24.7	28.2	68.8	68.8
58	Morgan	27.6	27.6	27.6	28.3	91.1	91.1
59	Morrow	27.8	28.1	28.1	31.3	71.2	71.2
60	Muskingum	31.2	32.1	32.1	38.4	69.1	69.1
61	Noble	26.3	26.4	26.4	28.0	83.0	83.0
62	Ottawa	29.3	29.6	29.6	33.7	71.6	71.6
63	Paulding	25.5	25.5	25.5	26.7	83.1	83.1
64	Perry	26.7	27.1	27.1	31.6	68.4	68.4
65	Pickaway	23.9	24.1	24.1	27.4	71.4	71.4
66	Pike	22.8	23.0	23.0	25.3	75.5	75.5
67	Portage	24.0	24.3	24.3	28.1	70.6	70.6
68	Preble	24.7	25.0	25.0	28.2	71.1	71.1
69	Putnam	29.6	29.7	29.7	31.7	88.7	88.7
70	Richland	28.1	28.7	28.7	33.3	69.7	69.7
71	Ross	27.1	27.9	27.9	33.3	66.4	66.4
72	Sandusky	27.7	28.0	28.0	32.8	70.6	70.6
73	Scioto	26.5	27.2	27.2	31.9	66.5	66.5
74	Seneca	30.2	30.7	30.7	35.3	73.8	73.8

County Number	County Name	RR1	RR3	RR4	RR5	Coop LB	Coop UB
75	Shelby	27.5	28.0	28.0	31.6	79.3	79.3
76	Stark	26.2	26.7	26.7	30.7	69.4	69.4
77	Summit	25.4	26.0	26.0	30.4	68.3	68.3
78	Trumbull	27.7	28.7	28.7	35.3	63.2	63.2
79	Tuscarawas	25.1	25.4	25.4	28.8	71.4	71.4
80	Union	24.2	24.3	24.3	26.0	82.1	82.1
81	Van Wert	26.6	26.8	26.8	29.6	77.5	77.5
82	Vinton	26.5	26.6	26.6	27.7	82.0	82.0
83	Warren	24.2	24.4	24.4	27.2	75.5	75.5
84	Washington	34.0	34.7	34.7	40.3	74.6	74.6
85	Wayne	25.6	25.9	25.9	29.5	71.5	71.5
86	Williams	26.4	26.6	26.6	29.2	77.8	77.8
87	Wood	29.2	29.4	29.4	32.0	79.1	79.1
88	Wyandot	28.1	28.2	28.2	30.0	82.1	82.1

Appendix J: Child Survey Recontact Effort

Child Survey Recontact Effort Overview

When the project team discovered that XXXX respondents were not asked J100A and its associated follow-up questions (ESI_CH_LNG, MDCD_CH, MDCD_CH_LNG, EXCHNG_CH, J100E, J100G, N067, MD_CH_PRV, and MD_CH_PRVESI), the decision was made to recontact these respondents and request that they complete the questions that were missed. Of those, only respondents who provided us with consent to recontact them when initially completing the survey were contacted. A maximum of two emails and two text messages were sent to those respondents which contained a hyperlink to complete the questions which were missed during the initial survey. If a respondent clicked on the hyperlink in these invitations, they were taken to a mini web instrument that contained the questions listed below. The content of these emails and text messages can be found in this appendix.

1. J100A,
2. ESI_CH_LNG,
3. MDCD_CH,
4. MDCD_CH_LNG,
5. EXCHNG_CH,
6. J100E,
7. J100G,
8. N067,
9. MD_CH_PRV, and
10. MD_CH_PRVESI.

The instrument began with the following introduction:

Dear {FULL_NAME},

Thank you for previously completing the Ohio Medicaid Assessment Survey (OMAS). In that survey, we asked you some questions about your child {CH_NAME2}. We missed a couple of important questions that we would like to ask you now. These questions should take only about 2 minutes to complete. After answering these questions, we'll send you an additional \$5 electronic gift card or check.

Please press 'Next' to begin the questions.

Once the respondent selected next, they were asked only the questions that were missed. Upon completing the instrument, they were sent an additional \$5 electronic incentive.

The recontact instrument was programmed and tested from September 13, 2023, to September 20, 2023. Emails and text messages were sent on the following dates:

- Email 1: September 20, 2023
- Text 1: September 22, 2023
- Email 2: September 29, 2023
- Text 2: October 5, 2023

Child Survey Recontact Effort: First Recontact Email

Subject Line: Follow-Up Questions for the Ohio Department of Medicaid and The Ohio State University



Dear **NAME**,

You recently completed the Ohio Medicaid Assessment Survey (OMAS). On behalf of the Ohio Department of Medicaid and The Ohio State University, we appreciate your participation! Unfortunately, when you completed your survey, **we missed a couple of questions that we would like to ask you now**. These questions are extremely important to the success of the study, and it should take less than 2 minutes to complete. To thank you for your time, **we will send you an additional \$5** electronic gift card or check by mail.

To complete these questions, please click or tap the following link to access a short survey of the questions we missed:

<https://osusurvey.com/?p=FILLPIN>

We appreciate you helping the Ohio Department of Medicaid understand the health issues faced by Ohioans and hope that you will help us once again. If you have questions or concerns, please contact The Ohio State University at 1-833-947-2577 or omas@osumc.edu.

Sincerely,

A handwritten signature in black ink, appearing to read "T. Sahr", with a stylized flourish at the end.

Timothy Sahr
Ohio Colleges of Medicine, Government Resource Center
The Ohio State University

Thomas Duffy
RTI International, The Ohio State University's Research Partner

Child Survey Recontact Effort: Second Recontact Email

Subject Line: RE: Follow-Up Questions for the Ohio Department of Medicaid and The Ohio State University



Dear **NAME**,

We recently contacted you about a couple of important questions that we missed on the Ohio Medicaid Assessment Survey (OMAS). We hope that you can take two minutes to answer them now. To thank you for your time, **we will send you an additional \$5** electronic gift card or check by mail.

To complete these questions, please click or tap the following link:

<https://osusurvey.com/?p=FILLPIN>

We appreciate you helping the Ohio Department of Medicaid understand the health issues faced by Ohioans and hope that you will help us once again. If you have questions or concerns, please contact The Ohio State University at 1-833-947-2577 or omas@osumc.edu.

Sincerely,

A handwritten signature in black ink, appearing to read "T. Sahr".

Timothy Sahr
Ohio Colleges of Medicine, Government Resource Center
The Ohio State University

Thomas Duffy
RTI International, The Ohio State University's Research Partner

Child Survey Recontact Effort: First Text Message



Hi **(FILL NAME)**,

You recently completed the Ohio Medicaid Assessment Survey (OMAS). We appreciate your participation! Unfortunately, we missed a couple of important questions that we would like to ask you now—it should take less than 2 minutes and, to thank you for your time, we will send you an additional 5 dollar electronic gift card.

To complete these questions, please click or tap the following link:

<https://osusurvey.com/?p=FILLPIN>

If you have any questions or concerns, please reply to this text, or call 1-833-947-2577. On behalf of the Ohio Department of Medicaid and The Ohio State University, thank you very much!

Child Survey Recontact Effort: Second Text Message



Hi **(FILL NAME)**,

We recently asked you to answer a couple of important questions we missed for the Ohio Medicaid Assessment Survey (OMAS). Please tap this link to answer now, and will send you an additional 5-dollar electronic gift card to thank you for your time:

<https://osusurvey.com/?p=FILLPIN>

If you have any questions or concerns, please reply to this text, or call 1-833-947-2577. On behalf of the Ohio Department of Medicaid and The Ohio State University, thank you very much! Reply STOP to opt out.

Appendix K: Data Usage

K.1 Instructions for Using Weights

For the purposes of design-based (variance) estimation, the data file includes the following design variables:

- STRATUM: a stratum indicator for generating design-based variance estimators
- WT_MED: adjusted survey weight for analysis of respondents from the Medicaid sample frame. This weight maintains the population counts by enrollment type (G-VIII, ABD, etc.) and should be used for Medicaid by plan analyses (STRATUM > 200). If analysis of a particular enrollment type is desired, the specific stratum number can be used to subset the population using the variable STRATUM as detailed in **Table K-1**.

Table K-1. Stratum Numbers and Description for Medicaid Frame

Stratum	Stratum Details
201	G-VIII: Metro
202	G-VIII: Rural non-App
203	G-VIII: Rural App
204	G-VIII: Suburban
205	CFC
206	ABD/MBIWD only
207	Dual Mycare community
208	Dual non-Mycare

- WT_A_ABS: adjusted analysis weight for adult respondents from the ABS frame. This weight should be used if wanting to analyze only respondents from the ABS sampling frame (STRATUM <=200)
- WT_A, WT_C: adjusted survey weights for adult-level and child-level estimates and analyses

Sampling variances for the weighted estimates that account for the complex sample design can be computed with statistical software such as SUDAAN, STATA, SAS, R, or SPSS.

K.1.1 SUDAAN

An example SUDAAN statement would necessitate a Nest statement where STRATUM is specified, and a Design statement with a “WR” specification for a with-replacement sampling design (approximation).

An example follows for a health insurance variable (INSRD_A) that is tabulated by region.

```
data temp;
  set dat.OMAS2023_100PCT_FINAL;
  *create 0/1 variable for insured;
  if INSRD_A_IMP=1 then INSURED=1;
```

```

    else if INSRD_A_IMP =2 then INSURED=0;
run;

Proc Descript Data=temp Filetype=sas Design=WR NOTSORTED;
    Weight WT_A;
    Nest STRATUM / missunit;
    Var INSURED;
    Tables S9_REGION_IMP;
    Class S9_REGION_IMP;
    Title "OMAS, Percent of adults insured by region";
run;

```

For analysis of respondents from the Medicaid frame only, the analysis weight WT_MED should be used along with a subpopulation statement limiting to STRATUM > 200 as shown below.

```

data temp;
    set dat.OMAS2023_100PCT_FINAL;
    *create 0/1 variable for employed;
    if G71_IMP=1 then EMPLOYED=1;
    else if G71_IMP =2 then EMPLOYED=0;
run;

Proc Descript Data=temp Filetype=sas Design=WR NOTSORTED;
    Weight WT_MED;
    Nest STRATUM / missunit;
    Var EMPLOYED;
    Tables STRATUM;
    Class STRATUM;
    subpopn STRATUM > 200;
    Title "OMAS, Percent of Medicaid Frame adults Employed by Plan Type";
run;

```

K.1.2 STATA

The following example STATA code shows how to compute the weighted percentage of adults uninsured statewide.

```

* Import data
import sas "dat.OMAS2023_100PCT_FINAL"

* Create 0/1 variable for insured
gen INSURED = .
replace INSURED = 1 if INSRD_A_IMP == 1
replace INSURED = 0 if INSRD_A_IMP == 2

* Descriptive statistics
summarize INSURED [aw=WT_A], detail

```

```
* Tabulate by region
tabulate S9_REGION_IMP [aw=WT_A] INSURED
```

```
Svysset _n [pweight=WT_A], strata(STREATUM) vce(linearized) singleunit(certainty)
```

To limit STATA analyses to the Medicaid frame respondents, use the analysis weight WT_MED and subpopulation estimation as shown below.

```
* Import data
import sas "dat.OMAS2023_100PCT_FINAL"
```

```
* Create 0/1 variable for employed
gen EMPLOYED = .
replace EMPLOYED = 1 if G71_IMP == 1
replace EMPLOYED = 0 if G71_IMP == 2
```

```
* Descriptive statistics
summarize EMPLOYED [aw=WT_MED], detail
```

```
* Tabulate by stratum
tabulate STRATUM [aw=WT_MED] EMPLOYED if STRATUM > 200
```

```
Svysset _n [pweight=WT_A], strata(STREATUM) vce(linearized) singleunit(certainty)
```

K.1.3 SAS

This example SAS code shows how to compute the weighted percentage of adults insured statewide:

```
Proc Surveymeans Data= dat.OMAS2023_100PCT_FINAL mean;
    Stratum STRATUM;
    Weight WT_A;
    Var INSRD_A_IMP;
    Class INSRD_A_IMP;
run;
```

To limit SAS analyses to the Medicaid frame respondents, use the analysis weight WT_MED and subpopulation estimation as shown below.

```
data temp;
    set dat.OMAS2023_100PCT_FINAL;
    *create 0/1 variable for Medicaid frame respondents to use as domain;
    if STRATUM > 200 then MEDFRAME=1;
```

```

else MEDFRAME =0;
run;

```

```

Proc Surveymeans Data= temp mean;
  Stratum STRATUM;
  Weight WT_MED;
  Var G71_IMP; *Last week job status, Imputed;
  Class G71_IMP;
  Domain MEDFRAME;
run;

```

K.1.4 R

The following example R code shows how to compute the weighted percentage of adults uninsured statewide.

```

library(survey)
options(survey.lonely.psu="adjust")

omas2023_design = svydesign(ids = ~1, strata=~ STRATUM, data=omas_2023, weights =
omas_2023$WT_A)

svytotal(~as.factor(INSRD_A_IMP), design = omas2023_design)
svymean(~as.factor(INSRD_A_IMP), design = omas2023_design)

```

To limit R analyses to the Medicaid Frame respondents, use the analysis weight WT_MED and subpopulation estimation as shown below.

```

library(survey)
omas_med <- omas_2023 %>% mutate(WT_MED=case_when(is.na(WT_MED) ~ 1,
TRUE ~ WT_MED))
options(survey.lonely.psu="adjust")
omasmed_design = svydesign (ids = ~1, strata=~ STRATUM, data=omas2, weights =
omas2$WT_MED)

medframe<- subset(omasmed_design, STRATUM >200)

svytotal(~as.factor(G71_IMP), design = medframe)
svymean(~as.factor(G71_IMP), design = medframe)

```

K.1.5 SPSS

The following example SPSS code shows how to compute the weighted percentage of adults uninsured statewide.

```

GET FILE='dat.OMAS2023_100PCT_FINAL'.

```

* Create 0/1 variable for insured.

```
DO IF (INSRD_A_IMP = 1).  
  COMPUTE INSURED = 1.  
ELSE IF (INSRD_A_IMP = 2).  
  COMPUTE INSURED = 0.  
END IF.  
EXECUTE.
```

```
* Descriptive statistics.  
DESCRIPTIVES VARIABLES=INSURED  
  /WEIGHT=WT_A  
  /MISSING=ANALYSIS.
```

```
* Tabulate by region.  
CROSSTABS  
  /TABLES S9_REGION_IMP BY INSURED  
  /WEIGHTS=WT_A  
  /CELLS=COUNT  
  /MISSING=INCLUDE  
  /STATISTICS=CHISQ.
```

To limit STATA analyses to the Medicaid Frame respondents, use the analysis weight WT_MED and subpopulation estimation as shown below.

```
GET FILE='dat.OMAS2023_100PCT_FINAL'.
```

```
* Create 0/1 variable for employed.  
DO IF (G71_IMP = 1).  
  COMPUTE EMPLOYED = 1.  
ELSE IF (G71_IMP = 2).  
  COMPUTE EMPLOYED = 0.  
END IF.  
EXECUTE.
```

```
* Descriptive statistics.  
DESCRIPTIVES VARIABLES=EMPLOYED  
  /WEIGHT=WT_MED  
  /MISSING=ANALYSIS.
```

```
* Tabulate by stratum.  
CROSSTABS  
  /TABLES STRATUM BY EMPLOYED  
  /WEIGHTS=WT_MED  
  /SUBCOUNT=YES  
  /STATISTICS=CHISQ  
  /CELLS=COUNT  
  /MISSING=INCLUDE.
```

K.2 Limitations and Cautions When Using the Data

The 2023 OMAS carries with it the following limitations and cautions regarding use of the data:

- This was the first study to be conducted entirely through mail invitation. As such, responses were predominantly provided through web administration or paper administration. A small number of respondents called-in to take the survey, but no outbound calling by interviewers was conducted. The predominance of web administration merits limits relating to do the following:
 - Web administration may lead to different response distributions than telephone. Because prior OMAS iterations predominantly relied on telephone interviewing a mode effect may exist with prior years for some outcome.
 - Paper administration was utilized more heavily in rural counties. This could lead to mode effects as well in rural counties compared to non-rural counties.
- Persons with Medicaid were identified through self-reporting (if sampled through the ABS frame) or assumed to have Medicaid (if sampled from the Medicaid administrative file). Because there is some error in self-reporting, there could be differences in how Medicaid enrollees respond depending on which frame they were sampled from. Separate weights were created to ensure each sample group accurately represents the Medicaid population, but some differences may still remain.
- Interviews were only conducted with households that could speak English or Spanish well enough to be interviewed. Thus, non-English- and non-Spanish-speaking households were excluded from the survey. As identified by the final dispositions, less than one-tenth of 1% of households contacted were unable to complete the survey because of a language barrier.
- The literature indicates that using proxies can introduce bias to the survey results. Several studies have shown consistent differences between self- and proxy reporting (Bassett et al., 1990; Ellis et al., 2003; Epstein et al., 1989; Kovar & Wright, 1974; Mathiowetz & Groves, 1985; Todorov, 2003). The research has shown that proxies have difficulty measuring another person's behaviors or disabilities because they have a different perception of the behavior or disability when it is not their own. Availability of information also can be an issue when using proxies because they may not have the direct knowledge to respond accurately about another person's behavior or opinions. Proxies were limited to cases where the selected household member had a long-term or permanent physical or mental impairment. Of the 37,700 cases in the final data file, fewer than 1% were completed by proxy. Unrelated to the adult section, the child section was always by proxy.
- The inability to verify the information collected, and the reliance on self-reported insurance status and health behaviors, are further limitations of the study. Although both live monitoring of interviewers and review of their recordings verified the information as recorded, this survey's protocols did not allow for the verification of respondent insurance status by obtaining a copy of their insurance card. Research has shown that differences occur when comparing claims data and medical records to self-reported information provided in a telephone survey (Fowles et al., 1999).

These limitations, as they relate to the ability to use the 2023 OMAS data, are common to all ABS frame surveys in the following ways:

- The data can only be generalized to the population surveyed (i.e., the information cannot be generalized to persons not living in a household).
- Comparisons made to other data sources for Ohio must be done with the understanding that differences in the data could result from differences in how the survey was designed and conducted—not necessarily because of actual differences in the population of interest.
- When considering subpopulation sizes with OMAS data analysis, the OMAS EC recommends using the NCHS guidelines for health-surveillance suppression of cell sizes of 10 or fewer to protect against possible identification breaches (NCHS, 2004).

K.3 Survey Dispositions

This section presents the final dispositions for the entire study and by region stratum and county. For details, see **Tables K-2** through **K-5**.

1.1 Interview

1.2 Partial Interview

2.0 Refusals and Break-offs

3.0 Unknown

4.0 No Eligible Respondent/Undeliverable

Table K-2. Final Dispositions Overall

Frame Type	1.1	1.2	2.0	3.0	4.0
ABS	28,664	228	92,185	--	7,963
Medicaid	10,519	215	17,808	16,113	1,365
Overall	38,183	443	109,993	16,113	9,328

Note:

- 1.1 Interview
- 1.2 Partial Interview
- 2.0 Refusals and Break-offs
- 3.0 Unknown
- 4.0 No Eligible Respondent/Undeliverable

Table K-3. Final Dispositions, by Medicaid Region

Medicaid Region No.	Sampling Medicaid Region	1.1	1.2	2.0	3.0	4.0
1	Central/Southeast	11,146	139	30,923	4,414	2,283
2	Northeast	14,088	148	40,304	6,325	3,782
3	West	13,949	156	38,766	5,374	3,263

Notes:

1.1 Interview

1.2 Partial Interview

2.0 Refusals and Break-offs

3.0 Unknown

4.0 No Eligible Respondent/Undeliverable

Table K-4. Final Dispositions by County Type

Region No.	Sampling County Type	1.1	1.2	2.0	3.0	4.0
1	Metro	20,255	256	60,816	9,835	5,846
2	Suburban	5,619	54	14,754	1,493	833
3	Rural Non-Appalachian	5,546	43	14,284	1,677	965
4	Rural Appalachian	7,763	90	20,139	3,108	1,684

Notes:

1.1 Interview

1.2 Partial Interview

2.0 Refusals and Break-offs

3.0 Unknown

4.0 No Eligible Respondent/Undeliverable

Table K-5. Final Disposition, by Sampling Stratum

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
1	Adams	Reference	ABS	60	0	241	--	19
2	Adams	HIGH %: Low Income	ABS	82	0	288	--	40
3	Allen	Reference	ABS	163	3	458	--	26
4	Allen	HIGH %: Non-White	ABS	36	0	98	--	16
5	Allen	HIGH %: Children	ABS	43	1	132	--	4
6	Allen	HIGH %: Children, Non-White	ABS	31	0	125	--	24
7	Ashland	Reference	ABS	124	0	360	--	16
8	Ashtabula	Reference	ABS	163	0	530	--	27
9	Ashtabula	HIGH %: Low Income	ABS	74	0	207	--	39
10	Athens	Reference	ABS	85	0	205	--	20
11	Athens	HIGH %: Low Income	ABS	44	0	153	--	13
12	Auglaize	Reference	ABS	73	1	160	--	6
13	Auglaize	HIGH %: Children	ABS	47	1	101	--	1
14	Belmont	Reference	ABS	134	1	457	--	78
15	Belmont	HIGH %: Low Income	ABS	35	0	89	--	16
16	Brown	Reference	ABS	69	0	202	--	9

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
17	Brown	HIGH %: Children	ABS	51	2	124	--	3
18	Butler	Reference	ABS	319	3	1,115	--	63
19	Butler	HIGH %: Non-White	ABS	141	1	668	--	60
20	Butler	HIGH %: Children	ABS	349	3	1,169	--	49
21	Butler	HIGH %: Children, Non-White	ABS	72	2	279	--	37
22	Carroll	Reference	ABS	153	0	490	--	27
23	Champaign	Reference	ABS	78	0	225	--	7
24	Champaign	HIGH %: Children	ABS	29	0	87	--	4
25	Clark	Reference	ABS	280	3	840	--	57
26	Clark	HIGH %: Non-White	ABS	66	1	214	--	39
27	Clermont	Reference	ABS	275	2	947	--	36
28	Clermont	HIGH %: Children	ABS	158	4	425	--	23
29	Clinton	Reference	ABS	88	1	245	--	26
30	Clinton	HIGH %: Children	ABS	36	0	151	--	3
31	Columbiana	Reference	ABS	190	0	560	--	50
32	Columbiana	HIGH %: Children	ABS	48	0	120	--	12

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
33	Coshocton	Reference	ABS	87	2	362	--	19
34	Coshocton	HIGH %: Children	ABS	28	0	66	--	6
35	Crawford	Reference	ABS	104	0	248	--	28
36	Crawford	HIGH %: Children	ABS	35	0	83	--	12
37	Cuyahoga	Reference	ABS	417	1	1,148	--	64
38	Cuyahoga	HIGH %: Low Income	ABS	199	2	788	--	121
39	Cuyahoga	HIGH %: Non-White	ABS	1,091	12	4,469	--	468
40	Cuyahoga	HIGH %: Non-White, Low Income	ABS	731	6	3,065	--	658
41	Cuyahoga	HIGH %: Children	ABS	186	1	598	--	25
42	Cuyahoga	HIGH %: Children, Low Income	ABS	28	1	102	--	29
43	Cuyahoga	HIGH %: Children, Non-White	ABS	189	1	658	--	62
44	Cuyahoga	HIGH %: Children, Non-White, Low Income	ABS	145	2	607	--	126
45	Darke	Reference	ABS	110	1	284	--	15

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
46	Darke	HIGH %: Children	ABS	46	0	184	--	10
47	Defiance	Reference	ABS	83	0	216	--	11
48	Defiance	HIGH %: Children	ABS	28	0	104	--	8
49	Delaware	Reference	ABS	35	0	91	--	4
50	Delaware	HIGH %: Children	ABS	358	1	1,022	--	19
51	Erie	Reference	ABS	126	0	306	--	38
52	Erie	HIGH %: Non-White	ABS	53	0	213	--	34
53	Fairfield	Reference	ABS	174	1	469	--	26
54	Fairfield	HIGH %: Children	ABS	182	3	587	--	28
55	Fayette	Reference	ABS	101	2	393	--	14
56	Franklin	Reference	ABS	282	1	1,043	--	54
57	Franklin	HIGH %: Low Income	ABS	118	1	585	--	36
58	Franklin	HIGH %: Non-White	ABS	831	13	3,353	--	253
59	Franklin	HIGH %: Non-White, Low Income	ABS	260	3	944	--	123
60	Franklin	HIGH %: Children	ABS	704	4	1,984	--	48

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
61	Franklin	HIGH %: Children, Low Income	ABS	28	0	92	--	10
62	Franklin	HIGH %: Children, Non-White	ABS	349	6	1,428	--	87
63	Franklin	HIGH %: Children, Non-White, Low Income	ABS	183	0	950	--	127
64	Fulton	Reference	ABS	122	1	319	--	8
65	Gallia	Reference	ABS	111	0	347	--	32
66	Geauga	Reference	ABS	179	3	445	--	13
67	Geauga	HIGH %: Children	ABS	27	0	143	--	
68	Greene	Reference	ABS	227	1	604	--	38
69	Greene	HIGH %: Low Income	ABS	49	1	143	--	27
70	Greene	HIGH %: Children	ABS	62	1	157	--	10
71	Greene	HIGH %: Children, Low Income	ABS	27	1	98	--	14
72	Guernsey	Reference	ABS	77	0	206	--	17
73	Guernsey	HIGH %: Low Income	ABS	30	0	122	--	8
74	Hamilton	Reference	ABS	350	3	1,348	--	99

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
75	Hamilton	HIGH %: Non-White	ABS	929	10	3,494	--	347
76	Hamilton	HIGH %: Children	ABS	339	5	933	--	23
77	Hamilton	HIGH %: Children, Non-White	ABS	291	3	1,283	--	103
78	Hancock	Reference	ABS	129	2	370	--	19
79	Hancock	HIGH %: Children	ABS	39	0	96	--	5
80	Hardin	Reference	ABS	83	0	224	--	23
81	Hardin	HIGH %: Children	ABS	33	0	119	--	8
82	Harrison	Reference	ABS	170	4	484	--	62
83	Henry	Reference	ABS	107	0	292	--	11
84	Highland	Reference	ABS	83	1	234	--	12
85	Highland	HIGH %: Low Income	ABS	32	0	132	--	16
86	Hocking	Reference	ABS	66	0	215	--	29
87	Hocking	HIGH %: Children	ABS	40	0	130	--	10
88	Holmes	Reference	ABS	33	1	102	--	4
89	Holmes	HIGH %: Children	ABS	101	1	448	--	20
90	Huron	Reference	ABS	90	2	264	--	24

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
91	Huron	HIGH %: Children	ABS	45	0	179	--	16
92	Jackson	Reference	ABS	69	1	212	--	18
93	Jackson	HIGH %: Children	ABS	43	0	167	--	10
94	Jefferson	Reference	ABS	127	2	356	--	35
95	Jefferson	HIGH %: Low Income	ABS	42	1	135	--	42
96	Knox	Reference	ABS	57	0	167	--	6
97	Knox	HIGH %: Children	ABS	84	0	266	--	20
98	Lake	Reference	ABS	457	2	1,323	--	68
99	Lake	HIGH %: Children	ABS	100	0	276	--	24
100	Lawrence	Reference	ABS	88	0	323	--	19
101	Lawrence	HIGH %: Children	ABS	72	1	281	--	6
102	Licking	Reference	ABS	208	1	566	--	35
103	Licking	HIGH %: Children	ABS	162	1	567	--	30
104	Logan	Reference	ABS	100	0	329	--	21
105	Lorain	Reference	ABS	401	5	1,196	--	58
106	Lorain	HIGH %: Non-White	ABS	137	2	402	--	59
107	Lorain	HIGH %: Children	ABS	90	0	284	--	16

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
108	Lorain	HIGH %: Children, Non-White	ABS	59	1	252	--	38
109	Lucas	Reference	ABS	386	3	964	--	77
110	Lucas	HIGH %: Non-White	ABS	398	4	1,331	--	227
111	Lucas	HIGH %: Children	ABS	118	2	278	--	22
112	Lucas	HIGH %: Children, Non-White	ABS	133	3	434	--	60
113	Madison	Reference	ABS	67	0	156	--	7
114	Madison	HIGH %: Children	ABS	50	0	144	--	6
115	Mahoning	Reference	ABS	285	2	787	--	36
116	Mahoning	HIGH %: Non-White	ABS	138	2	512	--	108
117	Mahoning	HIGH %: Children	ABS	83	0	220	--	17
118	Mahoning	HIGH %: Children, Non-White	ABS	41	0	131	--	28
119	Marion	Reference	ABS	77	0	211	--	22
120	Marion	HIGH %: Low Income	ABS	32	0	78	--	20
121	Marion	HIGH %: Children	ABS	54	0	199	--	17

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
122	Medina	Reference	ABS	262	1	736	--	21
123	Medina	HIGH %: Children	ABS	134	1	303	--	12
124	Meigs	Reference	ABS	71	0	178	--	21
125	Meigs	HIGH %: Low Income	ABS	51	0	119	--	30
126	Mercer	Reference	ABS	68	1	193	--	18
127	Mercer	HIGH %: Children	ABS	50	0	96	--	4
128	Miami	Reference	ABS	172	1	510	--	17
129	Miami	HIGH %: Children	ABS	64	0	182	--	14
130	Monroe	Reference	ABS	114	0	310	--	26
131	Montgomery	Reference	ABS	423	2	1,165	--	80
132	Montgomery	HIGH %: Low Income	ABS	111	0	386	--	73
133	Montgomery	HIGH %: Non-White	ABS	250	4	955	--	141
134	Montgomery	HIGH %: Non-White, Low Income	ABS	190	1	727	--	222
135	Montgomery	HIGH %: Children	ABS	189	2	609	--	50
136	Montgomery	HIGH %: Children, Low Income	ABS	25	0	88	--	27

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
137	Montgomery	HIGH %: Children, Non-White	ABS	57	0	240	--	23
138	Montgomery	HIGH %: Children, Non-White, Low Income	ABS	50	0	158	--	52
139	Morgan	Reference	ABS	170	2	485	--	13
140	Morrow	Reference	ABS	55	0	139	--	6
141	Morrow	HIGH %: Children	ABS	65	0	188	--	17
142	Muskingum	Reference	ABS	149	1	416	--	34
143	Muskingum	HIGH %: Children	ABS	58	0	141	--	11
144	Noble	Reference	ABS	115	2	303	--	20
145	Ottawa	Reference	ABS	113	0	290	--	27
146	Paulding	Reference	ABS	122	1	373	--	24
147	Perry	Reference	ABS	40	1	132	--	7
148	Perry	HIGH %: Children	ABS	75	2	209	--	14
149	Pickaway	Reference	ABS	48	0	155	--	7
150	Pickaway	HIGH %: Children	ABS	76	1	235	--	8
151	Pike	Reference	ABS	134	2	524	--	20
152	Portage	Reference	ABS	262	2	836	--	40

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
153	Portage	HIGH %: Children	ABS	69	0	231	--	20
154	Preble	Reference	ABS	116	2	394	--	28
155	Putnam	Reference	ABS	127	0	299	--	14
156	Richland	Reference	ABS	199	1	555	--	35
157	Richland	HIGH %: Children	ABS	61	0	180	--	19
158	Ross	Reference	ABS	83	2	257	--	18
159	Ross	HIGH %: Children	ABS	87	1	314	--	28
160	Sandusky	Reference	ABS	118	2	318	--	12
161	Sandusky	HIGH %: Children	ABS	31	0	85	--	4
162	Scioto	Reference	ABS	37	0	125	--	8
163	Scioto	HIGH %: Low Income	ABS	79	1	239	--	31
164	Scioto	HIGH %: Children	ABS	43	1	132	--	4
165	Scioto	HIGH %: Children, Low Income	ABS	50	0	166	--	14
166	Seneca	Reference	ABS	102	0	237	--	21
167	Seneca	HIGH %: Children	ABS	48	0	121	--	11
168	Shelby	Reference	ABS	73	0	177	--	10

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
169	Shelby	HIGH %: Children	ABS	46	0	135	--	19
170	Stark	Reference	ABS	571	4	1,636	--	99
171	Stark	HIGH %: Non-White	ABS	90	1	313	--	56
172	Stark	HIGH %: Children	ABS	157	0	455	--	38
173	Stark	HIGH %: Children, Non-White	ABS	53	0	134	--	13
174	Summit	Reference	ABS	631	6	1,865	--	118
175	Summit	HIGH %: Non-White	ABS	298	1	958	--	133
176	Summit	HIGH %: Children	ABS	179	1	440	--	20
177	Summit	HIGH %: Children, Non-White	ABS	81	0	363	--	46
178	Trumbull	Reference	ABS	275	1	712	--	52
179	Trumbull	HIGH %: Low Income	ABS	111	1	328	--	70
180	Trumbull	HIGH %: Children	ABS	34	0	98	--	8
181	Trumbull	HIGH %: Children, Low Income	ABS	65	1	191	--	43
182	Tuscarawas	Reference	ABS	161	1	466	--	42

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
183	Tuscarawas	HIGH %: Children	ABS	89	2	350	--	29
184	Union	Reference	ABS	39	1	171	--	9
185	Union	HIGH %: Children	ABS	90	0	235	--	5
186	Van Wert	Reference	ABS	62	0	189	--	9
187	Van Wert	HIGH %: Children	ABS	42	0	115	--	3
188	Vinton	Reference	ABS	125	0	335	--	30
189	Warren	Reference	ABS	155	1	460	--	14
190	Warren	HIGH %: Children	ABS	304	0	976	--	30
191	Washington	Reference	ABS	117	1	274	--	18
192	Washington	HIGH %: Low Income	ABS	37	0	57	--	6
193	Wayne	Reference	ABS	241	2	686	--	31
194	Wayne	HIGH %: Children	ABS	47	0	173	--	10
195	Williams	Reference	ABS	84	0	250	--	16
196	Williams	HIGH %: Children	ABS	43	0	138	--	9
197	Wood	Reference	ABS	194	0	472	--	34
198	Wood	HIGH %: Low Income	ABS	57	1	178	--	14
199	Wood	HIGH %: Children	ABS	78	0	164	--	8

Strata	County	Strata Details ¹	Frame Type	1.1	1.2	2.0	3.0	4.0
200	Wyandot	Reference	ABS	106	0	272	--	12
201	--	G-VIII: Metro	Medicaid	1,758	27	2971	2,374	270
202	--	G-VIII: Rural non-App	Medicaid	3,277	65	6,444	6,606	568
203	--	G-VIII: Rural App	Medicaid	980	16	1,576	1,290	148
204	--	G-VIII: Suburban	Medicaid	659	17	1,248	997	139
205	--	CFC	Medicaid	1,450	38	2,311	2,069	122
206	--	ABD/MBIWD only	Medicaid	942	25	1,361	1,335	57
207	--	Dual Mycare community	Medicaid	972	17	1,264	936	41
208	--	Dual non-Mycare	Medicaid	481	10	633	506	20

Notes:

- 1.1 Interview
- 1.2 Partial Interview
- 2.0 Refusals and Break-offs
- 3.0 Unknown
- 4.0 No Eligible Respondent/Undeliverable

Appendix L: Control Totals

Table L-1. Population Totals, All Adults

	Population	Percent
Total	9,052,066	100.0
Gender		
Male	4,425,643	48.9
Female	4,626,423	51.1
Age, years		
19–24	915,134	10.1
25–34	1,537,783	17.0
35–44	1,482,736	16.4
45–54	1,400,249	15.5
55–64	1,548,432	17.1
65+	2,167,732	23.9
Race		
White	7,116,646	78.6
Black/African American	1,021,685	11.3
Other	913,735	10.1
Medicaid Status		
Medicaid only	1,586,112	17.5
Medicaid and Medicare	205,743	2.3
No Medicaid	7,260,211	80.2
County Type		
Rural Appalachian	1,359,317	15.0
Metro	4,950,481	54.7
Rural Non-Appalachian	1,185,989	13.1
Suburban	1,556,279	17.2
Education		
Less than high school	1,057,843	11.7
High school	2,628,771	29.0
Some college	2,615,474	28.9
College or more	2,749,978	30.4
Age, Gender		
19-44, Male	1,998,873	22.1
45-64, Male	1,459,647	16.1

	Population	Percent
65+, Male	967,123	10.7
19-44, Female	1,936,780	21.4
45-64, Female	1,489,034	16.4
65+, Female	1,200,609	13.3
Gender, Race, Age		
Male, White, 19-44	1,468,561	16.2
Male, White, 45-64	530,312	5.9
Male, White, 65+	1,186,053	13.1
Male, Non-White, 19-44	273,594	3.0
Male, Non-White, 45-64	835,990	9.2
Male, Non-White, 65+	131,133	1.4
Female, White, 19-44	1,413,292	15.6
Female, White, 45-64	523,488	5.8
Female, White, 65+	1,186,858	13.1
Female, Non-White, 19-44	302,176	3.3
Female, Non-White, 45-64	1,025,892	11.3
Female, Non-White, 65+	174,717	1.9
Gender, County Type		
Male, Rural Appalachian	676,447	7.5
Male, Metro	2,387,900	26.4
Male, Rural Non-Appalachian	591,518	6.5
Male, Suburban	769,778	8.5
Female, Rural Appalachian	682,870	7.5
Female, Metro	2,562,581	28.3
Female, Rural Non-Appalachian	594,471	6.6
Female, Suburban	786,501	8.7
Age, County Type		
19-44, Rural Appalachian	591,003	6.5
19-44, Metro	2,152,368	23.8
19-44, Rural Non-Appalachian	515,644	5.7
19-44, Suburban	676,638	7.5
45-64, Rural Appalachian	442,793	4.9
45-64, Metro	1,612,603	17.8

	Population	Percent
45-64, Rural Non-Appalachian	386,332	4.3
45-64, Suburban	506,953	5.6
65+, Rural Appalachian	325,521	3.6
65+, Metro	1,185,510	13.1
65+, Rural Non-Appalachian	284,013	3.1
65+, Suburban	372,688	4.1
Gender, Age, Medicaid Status		
Male, 19-44, Medicaid Only	431,772	4.8
Male, 19-44, Medicaid and Medicare	23,109	0.3
Male, 19-44, No Medicaid	1,543,992	17.1
Male, 45-64, Medicaid Only	212,558	2.3
Male, 45-64, Medicaid and Medicare	29,767	0.3
Male, 45-64, No Medicaid	1,217,322	13.4
Male, 65+, Medicaid Only	20,319	0.2
Male, 65+, Medicaid and Medicare	33,679	0.4
Male, 65+, No Medicaid	913,125	10.1
Female, 19-44, Medicaid Only	649,410	7.2
Female, 19-44, Medicaid and Medicare	20,703	0.2
Female, 19-44, No Medicaid	1,266,667	14.0
Female, 45-64, Medicaid Only	245,912	2.7
Female, 45-64, Medicaid and Medicare	39,808	0.4
Female, 45-64, No Medicaid	1,203,314	13.3
Female, 65+, Medicaid Only	26,141	0.3
Female, 65+, Medicaid and Medicare	58,677	0.6
Female, 65+, No Medicaid	1,115,791	12.3
Gender, County Type, Medicaid Status		
Male, Rural Appalachian, Medicaid	126,298	1.4
Male, Rural Appalachian, No Medicaid	550,149	6.1
Male, Metro, Medicaid	464,864	5.1
Male, Metro, No Medicaid	1,923,036	21.2
Male, Rural Non-Appalachian, Medicaid	73,025	0.8
Male, Rural Non-Appalachian, No Medicaid	518,493	5.7
Male, Suburban, Medicaid	87,017	1.0

	Population	Percent
Male, Suburban, No Medicaid	682,761	7.5
Female, Rural Appalachian, Medicaid	173,395	1.9
Female, Rural Appalachian, No Medicaid	509,475	5.6
Female, Metro, Medicaid	635,095	7.0
Female, Metro, No Medicaid	1,927,486	21.3
Female, Rural Non-Appalachian, Medicaid	107,035	1.2
Female, Rural Non-Appalachian, No Medicaid	487,436	5.4
Female, Suburban, Medicaid	125,126	1.4
Female, Suburban, No Medicaid	661,375	7.3
Race, Age, Medicaid Status		
White, 19-44, Medicaid Only	665,794	7.4
White, 19-44, Medicaid and Medicare	30,080	0.3
White, 19-44, No Medicaid	2,185,979	24.1
White, 45+, Medicaid Only	333,513	3.7
White, 45+, Medicaid and Medicare	104,730	1.2
White, 45+, No Medicaid	3,796,550	41.9
Black, 19-44, Medicaid Only	332,795	3.7
Black, 19-44, Medicaid and Medicare	12,010	0.1
Black, 19-44, No Medicaid	166,158	1.8
Black, 45+, Medicaid Only	136,737	1.5
Black, 45+, Medicaid and Medicare	47,887	0.5
Black, 45+, No Medicaid	326,098	3.6
Other, 19-44, Medicaid Only	82,593	0.9
Other, 19-44, Medicaid and Medicare	1,722	0.0
Other, 19-44, No Medicaid	458,522	5.1
Other, 45+, Medicaid Only	34,680	0.4
Other, 45+, Medicaid and Medicare	9,314	0.1
Other, 45+, No Medicaid	326,904	3.6

L-2. Population Totals, Children

	Population	Percent
Total	2,703,992	100.0
Gender		
Male	1,382,448	51.1
Female	1,321,544	48.9
Age, years		
<1	122,163	4.5
1–5	669,155	24.7
6–12	988,665	36.6
13–18	924,009	34.2
Race		
White	1,838,304	68.0
Other	865,688	32.0
Medicaid Status		
Medicaid	1,195,868	44.2
No Medicaid	1,508,124	55.8
County Type		
Rural Appalachian	392,841	14.5
Metro	1,477,911	54.7
Rural Non-Appalachian	368,287	13.6
Suburban	464,953	17.2
Gender, Age		
Male, <1	59,247	2.2
Male, 1-5	348,157	12.9
Male, 6-12	500,111	18.5
Male, 13-18	474,933	17.6
Female, <1	62,916	2.3
Female, 1-5	320,998	11.9
Female, 6-12	488,554	18.1
Female, 13-18	449,076	16.6
Race, Age		
White, <1	74,885	2.8
White, 1-5	450,886	16.7

	Population	Percent
White, 6-12	668,854	24.7
White, 13-18	643,679	23.8
Other, <1	47,278	1.7
Other, 1-5	218,269	8.1
Other, 6-12	319,811	11.8
Other, 13-18	280,330	10.4
Gender, Race, Age		
Male, White, <1	38,185	1.4
Male, White,1-5	231,539	8.6
Male, White, 6-12	342,467	12.7
Male, White, 13-18	334,638	12.4
Male, Other, <1	21,062	0.8
Male, Other,1-5	116,618	4.3
Male, Other, 6-12	157,644	5.8
Male, Other, 13-18	140,295	5.2
Female, White, <1	36,700	1.4
Female, White,1-5	219,347	8.1
Female, White, 6-12	326,387	12.1
Female, White, 13-18	309,041	11.4
Female, Other, <1	26,216	1.0
Female, Other,1-5	101,651	3.8
Female, Other, 6-12	162,167	6.0
Female, Other, 13-18	140,035	5.2
County Type, Medicaid Status		
Rural Appalachian, Medicaid	190,252	7.0
Rural Appalachian, No Medicaid	202,589	7.5
Metro, Medicaid	724,095	26.8
Metro, No Medicaid	753,816	27.9
Rural Non-Appalachian, Medicaid	133,852	5.0
Rural Non-Appalachian, No Medicaid	234,435	8.7
Suburban, Medicaid	147,669	5.5
Suburban, No Medicaid	317,284	11.7

	Population	Percent
Gender, Medicaid Status		
Male, Medicaid	611,484	22.6
Male, No Medicaid	770,964	28.5
Female, Medicaid	584,384	21.6
Female, No Medicaid	737,160	27.3
Race, Medicaid Status		
White, Medicaid	686,118	25.4
White, No Medicaid	1,152,186	42.6
Other, Medicaid	509,750	18.9
Other, No Medicaid	355,938	13.2

L-3. Population Totals, Adults with Medicaid

	Population	Percent
Total	1,791,855	100.0
Gender		
Male	751,204	41.9
Female	1,040,651	58.1
Age, years		
19–44	1,124,994	62.8
45–64	528,045	29.5
65+	138,816	7.7
Race		
White	1,134,117	63.3
Black/African American	529,429	29.5
Other	128,309	7.2
Medicaid Status		
Medicaid only	1,586,112	88.5
Medicaid and Medicare	205,743	11.5
County Type		
Rural Appalachian	299,693	16.7
Metro	1,099,959	61.4
Rural Non-Appalachian	180,060	10.0

	Population	Percent
Suburban	212,143	11.8
Gender, Age		
Male, 19-44	454,881	25.4
Male, 45+	296,323	16.5
Female, 19-44	670,113	37.4
Female, 45+	370,538	20.7
Race, Age		
White, 19-44	695,874	38.8
White, 45+	438,243	24.5
Other, 19-44	429,120	23.9
Other, 45+	228,618	12.8
Gender, Medicaid Status		
Male, Medicaid Only	664,649	37.1
Male, Medicaid and Medicare	86,555	4.8
Female, Medicaid Only	921,463	51.4
Female, Medicaid and Medicare	119,188	6.7
Gender, County Type		
Male, Rural Appalachian	126,298	7.0
Male, Metro	464,864	25.9
Male, Rural Non-Appalachian	73,025	4.1
Male, Suburban	87,017	4.9
Female, Rural Appalachian	173,395	9.7
Female, Metro	635,095	35.4
Female, Rural Non-Appalachian	107,035	6.0
Female, Suburban	125,126	7.0
Race, Medicaid Status		
White, Medicaid Only	999,307	55.8
White, Medicaid and Medicare	134,810	7.5
Black, Medicaid Only	469,532	26.2
Black, Medicaid and Medicare	59,897	3.3
Other, Medicaid	117,273	6.5
Other, No Medicaid	11,036	0.6