SECTION F -- ENUMERATION OF PLANS BY ESTABLISHMENT, MEF

8/8/94, 12:00 PM

SECTION F IS ASKED IF ALL PLANS ARE NOT OFFERED AT ALL ESTABLISHMENTS. (DETERMINED AT EF1)

THE INTERVIEW WILL NOT CONTINUE UNTIL ALL SECTION F'S FOR A MEF ARE COMPLETE.

SEGMENT = PLAN & PENM - EACH PLAN HAS A SEPARATE PLAN SEGMENT.

NO DISPLAY BOXES AT THE BOTTOM OF SECTION F SCREENS. FOOTER CONTAINS ESTABNAME, ADDRESS, SIZE OF COMPANY AND ID#

TADDR: GLOBAL DISPLAY INDICATES ESTABLISHMENT ADDRESS

PYEND: GLOBAL DISPLAY DEFINED IN SECTION D. INDICATES HEALTH INSURANCE PLAN YEAR.

[ASK TO SPEAK WITH R. WHEN R ON PHONE, READ INTRODUCTION]

[My name is {INTERVIEWER NAME} and I am calling for the United States Department of Health and Human Services regarding a study about health benefits. This study collects information on the cost of providing health benefits to employees. Results will be used to develop estimates of health care spending and to evaluate health care reform.]

FGATE Can you tell me the names of <u>all</u> the plans offered at the {TADDR} location?

(1)

- 1. CONTINUE SECTION F WITH {RESPNAME}
- 2. {SKIP THIS LOCATIONS'S SECTION F AND GO TO NEXT LOCATION'S SECTION F}
- 3. GO TO QUESTIONNAIRE MANAGEMENT SCREEN (QMS)
- 4. NO HEALTH INSURANCE OFFERED AT THIS LOCATION
- GT. GO TO RESULT

DISALLOW DK/REF

WILL ASK FGATE FOR EACH SAMPLED LOCATION

RESPONSE 2 IS SUPPRESSED IF THIS IS THE LAST LOCATION TO BE ASKED FGATE

IF FGATE = 1, GO TO F1 IF FGATE = 2, GO TO FGATE FOR NEXT LOCATION, ELSE R'S NEXT SECTION IF ALL F'S ARE DONE, ELSE THANK SCREEN IF FGATE = 4, GO TO FGARE FOR NEXT LOCATION, ELSE R'S NEXT SECTION IF ALL F'S ARE DONE, ELSE THANK SCREEN DISPLAY2: "plan year" IF D9=2, ELSE,, " ".

DISPLAY4: "a union" IF A15 = 1, ELSE " ".

DISPLAY5: "a professional or trade association" IF A17 = 1, ELSE " ".

DISPLAY6: "a multi-employer group, MET or MEWA" IF D8 = 1, ELSE " ".

DISPLAY7: "Please include any retiree only plans." IF D6 OR D7 = 1, ELSE " ".

F1 IS SHOWN WHEN THE CURSOR IS IN COLUMN ONE FOR THE FIRST PLAN OF THE FIRST LOCATION ONLY. SHOW F2 FOR SUBSEQUENT PLANS.

F1. What are the names of the health insurance plans your (COMP_ORG) offered at this location during {PYEND}?

Please count each high and low option separately.

{Please include any obtained through} {DISPLAY4}, {DISPLAY5}, {or} {DISPLAY6}.

{DISPLAY7}

(1)

F1 = PLAN.PLANNAME, C30

F2 is asked for subsequent plans after the first plan is added.

F2. Were there any other health insurance plans offered during {DISPLAY2} 1993 at this location? [IF YES: What were the names of the other plans offered?][E2A]

SPACING ON PLAN MATRIX:

plan name 30 + type 10 + ppo 3 + enrollment 10 + MEF FIELD 4

IF NO PLANS LISTED, CURSOR STARTS AT COL 1 AND F6 IS SHOWN IF 1 OR MORE PLANS PREVIOUSLY LISTED, SHOW FULL MATRIX & CURSOR AT FIELD 5 FOR PLAN1 (THEN EACH SUBSEQUENT PLAN) & SHOW F4B1 AT BLANK LINE SHOW F1 (F2) & SET F4B1=1 FOR ANY PLANS ADDED

F3 IS SHOWN IN COLUMN 2

F3. Is {PLAN NAME} an HMO, a PPO, a conventional health insurance plan, a combination of these types, or some other type of health insurance plan such as a dental, vision, or prescription drug plan?

[E3]

- 1. HMO/EPO/IPA
- **2. PPO**
- 3. CONVENTIONAL/INDEMNITY
- 4. COMBINATION

SINGLE SERVICE

5. DENTAL

- 6. VISION
- 7. PRES. DRUGS

SPECIAL

8. LONG-TERM CARE9. DREAD DISEASE10. EXTRA CASH

OTHER

11. ADMINISTRATIVE 12. DISABILITY 13. LIFE

91. OTHER

1 = PLAN.F3 & PLAN.PLANTYPE, SIZE = N2 (PLANTYPE MAY BE RESET IN Q E4 TO E4G)

IF PLANTYPE = (8, 9, 10), SET PLAN.SELF = 2

IF DK AND REF, SET PLANTYPE = 91

WHEN PLANNAME FROM F3 IS SHOWN AS A DISPLAY, WE'LL ABBREVIATE TO 10 CHARACTERS

F4 IS ASKED AT THE THIRD COLUMN

F4 IS ASKED WHEN F7 = 3 (CONV.)

F4. Did employees pay less if they used particular doctors, or preferred providers, under this plan?

(1)

1. YES 2. NO

PLAN.F4 COLLECTED IN PLAN MATRIX

1 = PLAN.F4, SIZE = N2

WHEN F4 = 1, SET PLANTYPE = 2 (PPO)

F4B IS ASKED AT THE FOURTH COLUMN ONLY WHEN A PLAN IS ADDED.

F4B IS ASKED OF PLANTYPES 1 THROUGH 10 AND 91 ONLY.

F4B. At the end of {PYEND}, approximately how many active employees were enrolled in {PLAN NAME} at your company altogether?

(1)

1 = PLAN.ENROLMNT, SIZE=N7, ATMSTYLE, HR: 0 TO 9,999,999, SR: 0 TO 5,000

FO IS ASKED AT THE FIFTH COLUMN. IT IS ASKED AT EACH ESTABLISHMENT FOR ALL PREVIOUSLY ADDED PLANS AS WELL AS THOSE JUST ADDED.

FO. Is {PLAN NAME} offered at this location? [EO]

[IF OBVIOUS, CODE WITHOUT ASKING.]

1. YES 2. NO

DK/REF - INTERVIEWERS TO USE CTRL-B OR CTRL-E

IF PLAN WAS ADDED (CTRL-A) FOR THIS LOCATION, F4B1 SET TO 1

BOX . IF ANY PLANTYPE=91, AND $F4C = -1 \text{ OR } -9$,	
FOR THIS PLAN, GO TO F4C;	WHEN MATI
F1 IF ANY PLANTYPE=4, AND $F4G = -1 OR -9$,	
FOR THIS PLAN, GO TO F4G;	
FLSE GO TO ES	
F4C-F4E, AS APROPRIATE, ARE ASKED AFTER EXITING PLAN MATRIX FOR EACH PLAN	
ADDED FOR THIS ESTABLISHMENT WITH PLANTYPE=91.	

[E4C] F4C. Is {PLAN NAME} a health insurance plan?

(1)

1. YES 2. NO

1= F4C, SIZE = N2

IF F4C=1, SET PLANTYPE = 3 (CONV.) AND GO TO F4D IF F4C=2, SET PLANTYPE = 14 (OTHER, NOT HEALTH) AND GO TO BOX F2 IF F4C=DK, REF, SET PLANTYPE = 15 (CANNOT DETERMINE) AND GO TO BOX F2.

SHOW F4D AS AN OVERLAY BELOW F4C.

F4D. What type of plan is {PLANNAME}?

(1)

1 = PLAN.TYPEOS, SIZE = C30, SHOW LINE TO COLLECT CHARACTER FIELD

[E4D1]

F4D1. Under this plan, were employees covered <u>only</u> if they saw providers participating in the plan?

(1)

1. YES 2. NO

1=F4D1, SIZE=N2. IF F14D1 = 1 SET PLANTYPE = 1, AND GO TO BOX F2; ELSE GO TO F4E.

SHOW F4E AS AN OVERLAY BELOW F4D1.

[E4E]

F4E. Did employees pay less if they used particular doctors, or preferred providers, under this plan?

(1)

1. YES 2. NO

1 = F4E, SIZE=N2 IF F4E = 1 SET PLANTYPE = 2 (PPO), ELSE SET PLANTYPE = 3 (CONV.)

BOX . IF ANY OTHER PLANTYPE=91, RETURN TO F4C; F2 . . . IF ANY PLANTYPE=4, GO TO F4G; ELSE GO TO F5. F4G is asked for each plan with PLANTYPE=4 (a combination plan).

[E4G] F4G. Did {PLAN NAME} have an HMO component?

(1)

1. YES 2. NO

1 = F4G, SIZE=N2.

IF F4G = 1, SET PLANTYPE = 1 (HMO). ELSE, SET PLANTYPE = PPO(2)

DISPLAY1: "other" IF ANY PLANTYPE = 5(dental), 6(vision), 7(pres.drug) AND F4B1 = 1 FOR THIS LOCATION

[E5]

F5. Did you have any {DISPLAY1} special health plans such as dental, vision, or prescription drug plans that were offered at this location?

[THESE ARE DIFFERENT PLANS THAT ENROLLEES MUST SIGN UP FOR SEPARATELY. DON'T CODE "YES" FOR COVERAGE PROVIDED AS PART OF PLANS ALREADY LISTED.]

(1)

- 1. YES (PLAN MATRIX-E6)
- 2. NO (BOX F3)

DK/REF GO TO BOX F3

1 = PENM.F5, SIZE=N2

BOX . IF A14 = 1, GO TO F8; F3 . . . ELSE GO TO BOX F4.

F6 IS ASKED ONLY WHEN F5 = 1. IT IS ASKED IN THE FIRST COLUMN ON THE PLAN MATRIX.

F6. What are the names of these special health plans?

[E6]

ASK UNION QUESTIONS OF FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR <u>SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED.</u> DISPLAY1: "Did you include this coverage in the plans you just told me about?" if more than

DISPLAY1: "Did you include this coverage in the plans you just told me about?" if more than one plan, else, "Is {PLANNAME} the union plan?"

[E8]

F8.

I recorded earlier that some of your employees obtained health insurance coverage through a union as of December 31. {DISPLAY1}.

(1)

1. YES 2. NO 3. DENIES UNION COVERAGE

DK/REF FOLLOW RESPONSE 3

1 = PENM.E8, SIZE = N2

IF F8 = 1 AND ONE PLAN AT THIS LOCATION, SET PLAN.UNION = 1 AND GO TO F9C, ELSE IF F8 = 1, GO TO F9A.

IF F8 = 2, GO TO PLAN MATRIX AND SHOW FU

FU: Could you please tell me the name(s) of the union plan(s)?

SET UNION = 1 FOR EACH PLAN ADDED

GO TO F9C

IF F8 = 3, GO TO F9C

ASK UNION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED. ESTABLISHMENTS AS WELL AS THOSE THAT HAVE JUST BEEN ADDED. ONLY NEED TO CONFIRM UNION FOR ADDED PLANS.

SHOW ALL PL

[E9A]

Which of the plans you just told me about is a union plan?

SHOW UNION MATRIX AND DISPLAY "YES" 1's

show instruction:

F9A.

[USE ARROW KEY TO HIGHLIGHT UNION PLANS AND CODE 1 (YES).]

SET PLAN.UNION = 1 FOR EACH PLAN MARKED

GO TO E9B.

ASK UNION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED.

F9B.

[E9B] Were there any <u>other</u> <u>union plans at this location in addition to the one(s) you just told me about?</u>

(1)

DK/REF GO TO F9C

1 = PENM.F9B, SIZE = N2

IF F9B = 1, GO TO PLAN MATRIX AND SHOW FU:

FU: Could you tell me the name(s) of the other union plans?

<u>SET UNION = 1 FOR EACH PLAN ADDED.</u>

<u>IF F9B = 2, GO TO E9C.</u>

ASK UNION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR <u>SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED</u>. Show all union plans previously claimed to be contributed to by other establishments - only confirm contribution for those plans that have been added if after initial section F.

[E9C]

F9C. To which of the union plans did your company contribute?

<u>SHOW UNION MATRIX AND DISPLAY</u> <u>"YES" FOR 1'S. ONLY PLANS THAT SHOW HERE ARE THOSE THAT WERE ANSWERED</u> <u>YES ON THE UNION MATRIX.</u>

show instruction:

[USE ARROW KEYS TO HIGHLIGHT UNION PLAN AND ENTER 1 (YES).]

IF <u>CONTRIBUTE</u> <u>^ = YES(1)</u>, <u>EXCLUDE</u> <u>THOSE</u> <u>PLANS</u> <u>FROM</u> <u>SUBSAMPLING</u>.

<u>GO TO BOX F3</u>

BOX F3:IF A17 = 1, GO TO F10ELSE, GO TO BOX F4

ASK UNION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED.

DISPLAY1: "Did you include this coverage in the plans you just told me about?" IF MORE THAN ONE PLAN, ELSE, "Is {PLANNAME} the association plan?"

[E10]

F10. I recorded earlier that some of your employees obtained health insurance coverage through a professional or trade association as of December 31, 1993. {DISPLAY1}?

_____(1)

 1.
 YES

 2.
 NO

 3.
 DENIES ASSOCIATION COVERAGE

1 = PENM.F10, SIZE = N2

DK/REF FOLLOW RESPONSE 2

<u>IF F10 = 1, AND ONLY ONE PLAN IN LOCATION'S PLAN MATRIX, SET PLAN.ASSOC=1,</u> <u>GO TO F11C</u>

ELSE IF F10 = 1 AND MORE THAN ONE PLAN, GO TO ASSOC MATRIX (SCREEN NAMED "ASSOC")

IF F10 = 2, GO TO PLAN MATRIX AND SHOW FA

FA: Could you tell me the name(s) of the association plan(s)?

SET PLAN.ASSOC=1 FOR EACH PLAN ADDED, GO TO F11C

ASK ASSOCIATION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED.

[E11A] F11A. Which of the plans you just told me about is an association plan?

SHOW ASSOC MATRIX AND DISPLAY "YES" FOR 1'S.

show instruction: [USE ARROW KEY TO HIGHLIGHT ASSOCIATION PLAN AND CODE 1 (YES)]

SET PLAN.ASSOC=1 FOR EACH PLAN MARKED WITH 1

<u>GO TO F11B</u>

ASK ASSOCIATION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED.

[E11B]

F11B. Were there any other association plans at this location in addition to the one(s) you just told me about?

(1)

1. YES 2. NO

 $\overline{1 = F11B, SIZE} = N2$

DK/REF GO TO F11C

IF F11B = 1, GO TO PLAN MATRIX AND SHOW FA:

FA: Can you tell me the name(s) of the other professional or trade association plan(s)?

<u>SET PLAN.ASSOC = 1 FOR EACH PLAN ADDED, GO TO F11C</u>

 $\overline{\text{IF F11B} = 2}$, DK/REF, GO TO F11C.

Added 6/8/94

ASK ASSOCIATION QUESTIONS FOR FIRST SECTION F TO BE COMPLETED AND THEN ONLY FOR SUBSEQUENT ESTABLISHMENTS WHEN A NEW PLAN IS ADDED. Show all association plans previously claimed to be contributed to by other establishments - only confirm contribution for those plans that have been added if after initial section F.

[<u>E11C]</u>

F11C. To which of the association plans did your company contribute to?

SHOW ASSOCIATION MATRIX AND DISPLAY

<u>''YES'' FOR 1'S. ONLY PLANS CODED YES(1) AT ASSOC MATRIX WILL BE DISPLAYED</u> <u>HERE.</u>

SHOW INSTRUCTION:

[USE ARROW KEYS TO HIGHLIGHT ASSOCIATION PLAN AND CODE 1 (YES).]

IF CONTRIBUTE ^=1 (YES), EXCLUDE FROM SUBSAMPLING.

ALL RESPONSES GO TO BOX F5

BOX . IF D8=1, GO TO F23, ELSE F5 . . . GO TO PLAN INTRO

F4B2 IS ONLY ASKED WHEN A PLAN IS INITIALLY ADDED. *NOT PART OF THE MATRIX*.

DISPLAY1: "including locations which were not selected" IF B2 > SAMPLED LOCATIONS, ELSE, " ".

F4B2. During 1993, was [PLANNAME] offered only at {ESTABNAME} at {TADDR}, or was it also offered at other locations {DISPLAY1}?

<u>(1)</u>

<u>1 = F4B2, SIZE = N2</u>

THIS QUESTION MAY NEED SOME WORK - ARE THERE ISSUES THAT ARE NOT BEING ADDRESSED HERE?

HOW DO WE WANT TO HANDLE DK/REF'S AT THIS SCREEN - SHOULD WE TREAT THEM AS 1'S???

F12 IS ASKED IF F4B1=1 FOR THIS LOCATION AND MET.PLAN = 1 FOR ANY PLANS

<u>[E12]</u>

F12. I recorded earlier that you obtained health insurance through a multi-employer trust or a <u>MET/MEWA at this location</u>. Did you include this coverage in the plan(s) you just told me <u>about?''</u>

<u>(1)</u>

1 = PENM.F12, SIZE = N2

<u>IF F12 = 1 AND ONE PLAN, SET PLAN.MET/MEWA = 1, GO TO F14, ELSE,</u> <u>IF F12 = 1, GO TO F13A</u>

IF F12 = 2, GO TO PLAN MATRIX AND SHOW FW (ASKED IN FIRST COLUMN):

FW: Can you tell me the name(s) of the multi-employer trust or MET/MEWA plan(s)?

<u>SET PLAN.MET/MEWA = 1 FOR EACH PLAN ADDED, GO TO F14</u>

DK/REF FOLLOW RESPONSE 3

[E13A] F13A. Which of the plans you just told me about is a MET/MEWA plan?

SHOW MET MATRIX AND DISPLAY ''YES'' FOR 1'S.

show instruction: [USE ARROW KEY TO HIGHLIGHT MET/MEWA PLAN AND CODE 1 (YES)]

<u>SET PLAN.MET=1 FOR EACH PLAN MARKED WITH 1</u>

<u>[E13B]</u>

F13B. Were there any other multi-employer trust, or MET/MEWA plans at this location in addition to the one(s) you just told me about?

(1)

1. YES 2. NO

<u>1 = PENM.F13B, N2</u>

IF F13B = 1, GO TO PLAN MATRIX AND SHOW FW (ASKED IN THE FIRST COLUMN):

FW: Can you tell me the name(s) of the other multi-employer trust, or MET/MEWA plan(s)?

<u>SET MET=1 FOR EACH PLAN ADDED, GO TO NEXT GATE.</u>

<u>IF F13B = 2, DK/REF, GO TO NEXT GATE.</u>

 F14.

 [E14]

 Let me verify that altogether {X} health plans were offered at this location during {PYEND}?

 [PROBE: Please count each high and low option plan separately.]

 Is that correct?

(1)

<u>1. YES (E15N)</u> 2. NO

<u>1 = PENM.F14, SIZE = N2</u>

IF F14 = 2, DK/REF, GO TO PLAN NATRIX AND SHOW INSTRUCTION:

[READ PLAN NAMES TO CONFIRM. PROBE FOR ADDITIONAL PLANS OR DELETE PLANS.]

<u>CRITICAL ITEM - INTERVIEW WILL NOT CONTINUE UNTIL F14 = 1.</u>

SUBSAMPLING WILL OCCUR AT THE MEF (COMPANY) LEVEL VS. THE ESTABLISHMENT LEVEL.

<u>F15N.</u> [E15N] We will be asking detailed questions about each of your plans.

<u>The information I need for 1993 includes enrollment, claims expenditures,</u> <u>administrative costs, premiums, and plan benefits.</u>

Are you the best person to give me this information for all of these plans?

<u>(1)</u>

<u>1. YES, {RESPNAME} FOR ALL</u> 2. NO, {RESPNAME} FOR ONLY SOME OR NONE (F28)

<u>IF F15N = 1, GO TO RESPONDENT'S NEXT SECTION</u> <u>IF F15N = 2, DK/REF, GO TO F28.</u> ASK F28 FOR EACH PLAN WITH F4B1=1 AND NO RESPONDENT YET LINKED TO THE PLAN

<u>F28.</u> Who is the best person to tell me about {PLAN NAME}? [E16]

ENTER

<u>"2" TO CHOOSE RESPONDENT FROM LIST IF BEST PERSON IS LISTED, ELSE, IF NOT ON LIST ENTER 1 TO ADD PERSON TO LIST</u>

(1)

SHOW RESPONDENT LIST WITH FULL NAME, TITLE AND NUMBER

<u>AFTER ALL PLANS FOR THIS ESTABLISHMENT, GO TO NEXT FGATE, ELSE R'S NEXT</u> <u>SECTION IF ALL F'S ARE DONE, ELSE, THANK SCREEN.</u>

DK/REF FOR MORE THAN ONE PLAN SHOULD GO TO QMS SCREEN