HIS-501(C) (2004)
(10-29-2003)

NATIONAL HEALTH INTERVIEW SURVEY

U.S. DEPARTMENT

OF COMMERCE

Economics and Statistics Administration

U.S. CENSUS BUREAU

Field Representative's Flashcard and Information Booklet

U S C E N S U S B U R E A U

CARD HM

WHO IS TO BE INCLUDED AS A HOUSEHOLD MEMBER	Include as member of household	
A. PERSONS LIVING OR STAYING IN SAMPLE UNIT AT TIME OF INTERVIEW		
Any person in unit: members of family, lodgers, servants, visitors, etc.		
1. Ordinarily stay here all the time (sleep here)	**Yes**	
2. Here temporarily - no living quarters held for person elsewhere	**Yes**	
3. Here temporarily - living quarters held for person elsewhere		**No**
In Armed Forces		
1. Stationed in this locality, usually sleep here	**Yes**	
2. Temporarily here on leave -stationed elsewhere		**No**
Student - Here attending school	**Yes**	
B. ABSENT PERSONS WHO USUALLY LIVE HERE		
Inmates of specified institutions - Absent because inmate in a specified institution (see listing in Topic 3, Chapter 4, Listing and Coverage Manual- Form 11-8) regardless of whether or not living quarters held for person here		**No**
Persons temporarily absent, on vacation, in general hospital, etc. (including veterans' facilities that are general hospitals) – Living quarters held here for person	**Yes**	
Absent in connection with job		
1. Living quarters held here for person -temporarily absent while "on the road" in connection with job (e.g., traveling salesmen, railroad men, bus driver)	**Yes**	
2. Living quarters held here and elsewhere for person but comes here infrequently (e.g., construction engineers)		**No**
3. Living quarters held here at home for unmarried college student working away from home during summer school vacation	**Yes**	
In Armed Forces - Were members of this household at time of induction but currently stationed elsewhere.		**No**
In school - Away attending post-secondary school.		**No**
- Away attending boarding school	**Yes**	
Seamen - Living quarters held here for person	**Yes**	
C. EXCEPTIONS AND DOUBTFUL CASES		
Person with two concurrent residences		
1. Regularly sleep greater part of week in another locality		**No**
2. Regularly sleep greater part of week here	**Yes**	
Citizens of foreign countries temporarily in the United States		
1. Living on premises of an Embassy, Ministry, Legation, Chancellery, or Consulate		**No**
2. Not living on premises of an Embassy, Ministry, etc. –		
a. If living and studying here and no usual place of residence elsewhere in the United States	**Yes**	
b. If living and working here and no usual place of residence elsewhere in the United States	**Yes**	
c. If merely visiting or traveling in the United States		**No**
Student nurses living away at school		**No**

INDEPENDENT CITIES

Virginia:

Alexandria	Fredericksburg	Petersburg
Bedford	Galax	Poquoson
* Bristol	Hampton	Portsmouth
Buena Vista	Harrisonburg	Radford
Charlottesville	Hopewell	* Richmond
Chesapeake	Lexington	* Roanoke
Clifton Forge	Lynchburg	Salem
Colonial Heights	Manassas	South Boston
Covington	Manassas Park	Staunton
Danville	Martinsville	Suffolk
Emporia	Newport News	Virginia Beach
* Fairfax	Norfolk	Waynesboro
Falls Church	Norton	Williamsburg
* Franklin		Winchester

*** St. Louis, Missouri**

*** Baltimore, Maryland**

Carson City, Nevada

INSTRUCTIONS

Above is a list of all the independent cities in the United States. Use the list to verify the exact address on the -VERADD-and -MAILADD- screens and to make corrections to the -CHNGADD- screen and -CHNGMAIL- screen.

*The cities with an asterisk (*) are those that also have a county of the same name within the State. Whenever one of these cities is reported, you may need to probe to determine if the person lives within the city limits of the independent city or within the county. If it is within the city limits, enter “IC” after the name, otherwise, enter the county name.

WHEN TO FILL THE F7 CASE MANAGEMENT NOTES

- Type A Noninterviews
- Type B Noninterviews
- Type C Noninterviews
- Partial Interviews
- Classification of Living Quarters Problems

WHEN TO FILL AN INTERCOMM

- Problems trying to list and update an address
- Additional and EXTRA Units
- Merged Units
- Replaced Sample Unit Structure
- Permit address found to contain more or fewer units than expected
- Permit address found to be in a Group Quarters
- Abandoned Permit
- Segment boundary problems
- Problems encountered trying to classify the type of living quarters
- Unable to locate a sample address

CALENDAR
2003

JANUARY

S	M	T	W	T	F	S
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FEBRUARY

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APRIL

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DECEMBER

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◯ Holiday

CALENDAR
2004

JANUARY

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FEBRUARY

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MARCH

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APRIL

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JUNE

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JULY

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AUGUST

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SEPTEMBER

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OCTOBER

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NOVEMBER

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DECEMBER

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19	20	21	22	23	24	25
26	27	28	29	30	31	

◯ Holiday

HOLIDAYS

2003

New Year's Day	January 1
Martin Luther King's Birthday	January 20
President's Day	February 17
Easter	April 6
Memorial Day	May 26
Independence Day	July 4
Labor Day	September 1
Columbus Day	October 13
Veteran's Day	November 11
Thanksgiving	November 27
Christmas	December 25

2004

New Year's Day	January 1
Martin Luther King's Birthday	January 19
President's Day	February 16
Easter	April 11
Memorial Day	May 31
Independence Day	July 5
Labor Day	September 6
Columbus Day	October 11
Veteran's Day	November 11
Thanksgiving	November 25
Christmas	December 24

CARD H 1

You may choose more than one.

1. Puerto Rican

2. Cuban/Cuban American

3. Dominican (Republic)

4. Mexican

5. Mexican American

6. Central or South American

7. Other Latin American

8. Other Hispanic/Latino

CARD H2

You may choose more than one.

1. White

2. Black/African American

3. Indian (American)

4. Alaska Native

5. Native Hawaiian

6. Guamanian

7. Samoan

8. Other Pacific Islander

9. Asian Indian

10. Chinese

11. Filipino

12. Japanese

13. Korean

14. Vietnamese

15. Other Asian

CARD H3

2. Spouse (husband/wife)

3. Unmarried Partner

4. Child (biological/adoptive/in-law/step/foster)

5. Child of Partner

6. Grandchild

7. Parent (biological/adoptive/in-law/step/foster)

8. Brother/sister (biological/adoptive/in-law/step/foster)

9. Grandparent (Grandmother/Grandfather)

10. Aunt/Uncle

11. Niece/Nephew

12. Other relative

13. Housemate/roommate

14. Roomer/Boarder

15. Other nonrelative

16. Legal guardian

17. Ward

CARD F1

You may choose more than one.

1. Vision/problem seeing

2. Hearing problem

3. Speech problem

4. Asthma/breathing problem

5. Birth defect

6. Injury

7. Mental retardation

8. Other developmental problem (e.g., cerebral palsy)

9. Other mental, emotional, or behavioral problem

10. Bone, joint, or muscle problem

11. Epilepsy or seizures

12. Learning disability

13. Attention Deficit/Hyperactivity Disorder (ADD/ADHD)

Other impairment/problem

CARD F2

You may choose more than one.

1. Vision/problem seeing

2. Hearing problem

3. Arthritis/rheumatism

4. Back or neck problem

5. Fracture, bone/joint injury

6. Other injury

7. Heart problem

8. Stroke problem

9. Hypertension/high blood pressure

10. Diabetes

11. Lung/breathing problem (e.g., asthma and emphysema)

12. Cancer

13. Birth defect

14. Mental retardation

15. Other developmental problem (e.g., cerebral palsy)

16. Senility

17. Depression/anxiety/emotional problem

18. Weight problem

Other impairment/problem

CARD F3

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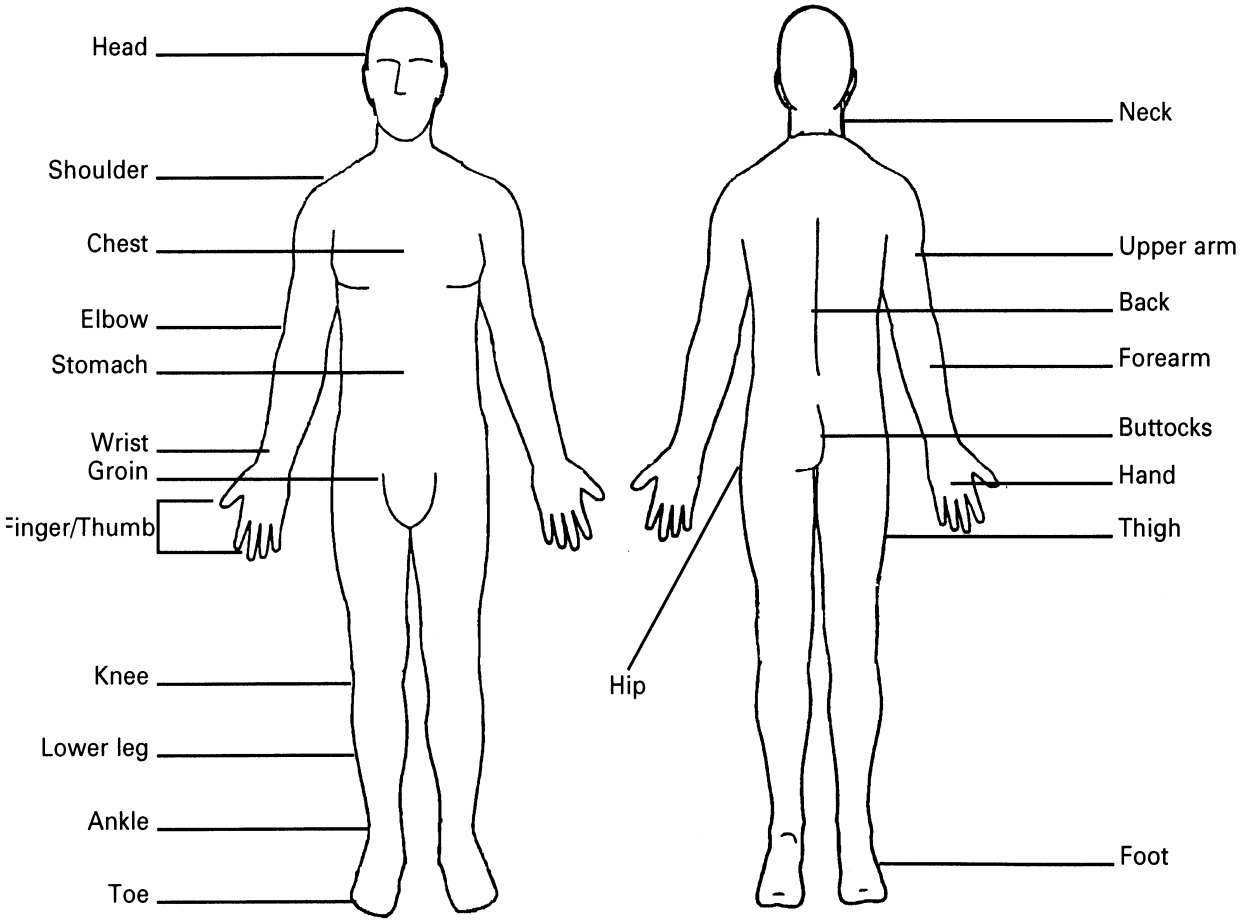
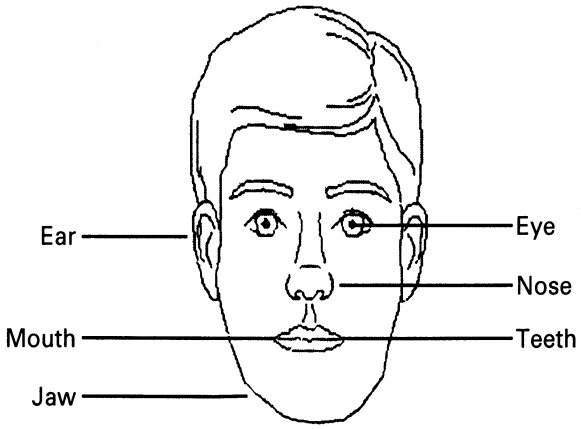
29	30	31				

CARD F4

You may choose up* to *four.





CARD F5

You may choose up to two.

1. Broken bone or fracture

2. Sprain, strain, or twist

3. Cut

4. Scrape

5. Bruise

6. Burn

7. Insect bite

8. Animal bite

9. Other (Specify)

CARD F6

1. **Passenger car**
2. **Passenger truck, such as a pickup truck, van, or SUV**
3. **Bus**
4. **Large commercial truck, such as a semi-truck, big rig, or 18-wheeler**
5. **Motorcycle (including mopeds, minibikes)**
6. **All terrain vehicle or ski/snow-mobile**
7. **Farm equipment (such as a tractor)**
8. **Industrial or construction vehicle**
9. **Other**

CARD F7

You may choose up to two.

On, down, from, or into:

1. Stairs, steps, or escalator

2. Floor or level ground

3. Curb (including sidewalk)

4. Ladder or scaffolding

5. Playground equipment

6. Sports field, court, or rink

7. Building or other structure

8. Chair, bed, sofa, or other furniture

9. Bathtub, shower, toilet, or commode

10. Hole or other opening

11. Other

CARD F8

1. **Slipping or tripping**
2. **Jumping or diving**
3. **Bumping into an object or another person**
4. **Being shoved or pushed by another person**
5. **Losing balance or having dizziness becoming faint or having a seizure)**
6. **Other**

CARD F9

1. **Swallowing a drug or medical substance mistakenly or in overdose**
2. **Swallowing or touching a harmful solid or liquid substance**
3. **Inhaling harmful gases or vapors**
4. **Eating a poisonous plant or other substance mistaken for food**
5. **Being bitten by a poisonous animal**
6. **Other (Specify)**

CARD F10

You may choose up to two.

1. Driving or riding in a motor vehicle

2. Working at a paid job

3. Working around the house or yard

4. Attending school

5. Unpaid work (such as volunteer work)

6. Sports and exercise

7. Leisure activity (excluding sports)

8. Sleeping, resting, eating, or drinking

9. Cooking

10. Being cared for (hands-on care from other person)

11. Other (Specify)

CARD F11

You may choose up to two.

1. Home (inside)

2. Home (outside)

3. School (not residential)

4. Child care center or preschool

5. Residential institution (excluding hospital)

6. Health care facility (including hospital)

7. Street or highway

8. Sidewalk

9. Parking lot

10. Sport facility, athletic field, or playground

11. Shopping center, restaurant, store, bank, gas station, or other place of business

12. Farm

13. Park or recreation area (including bike or jog path)

14. River, lake, stream, or ocean

15. Industrial or construction area

16. Other public building

17. Other

CARD F12

You may choose more than one.

1. Private health insurance*

2. Medicare

3. Medi-Gap

4. Medicaid

5. SCHIP (CHIP/Children's Health Insurance Program)

6. Military health care (TRICAREN A/CHAMP-V A)

7. Indian Health Service

8. State-sponsored health plan

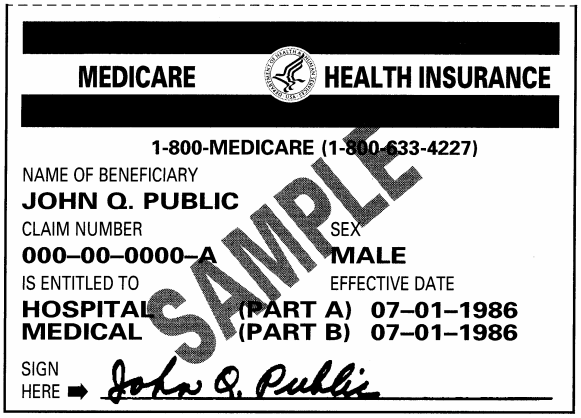
9. Other government program

10. Single service plan (e.g., dental, vision, prescriptions)

11. No coverage of any type

***EXCLUDE private plans that only provide extra cash while hospitalized.**

CARD F12-A


MEDICARE
HEALTH INSURANCE
1-800-MEDICARE (1-800-633-4227)
NAME OF BENEFICIARY
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HOSPITAL (PART A) 07–01–1986
MEDICAL (PART B) 07–01–1986
SIGN HERE
John Q. Public
SAMPLE

CARD F13-AL

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCE PROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program,” “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

ALABAMA

Medicaid: Patient 1st; SOBRA

CHIP: AL-Kids; ALL KIDS

State/Other: Children's Rehabilitation Service (CRS); Alabama Child Caring Plan, Alabama Health Insurance Plan (AHIP); Alabama Health Plan

CARD F13-AK

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCE PROGRAMS

Please find your State.

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ALASKA

Medicaid: Alaska Medicaid

CHIP: Denali KidCare; AKChip

State/Other: Chronic and Acute Medical Assistance (CAMA); Health Care Program for Children with Special Health Care Needs (HCP-CSN); Alaska Comprehensive Health Insurance Association (ACHIA)

CARD F13-AZ

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

ARIZONA

Medicaid: AHCCCS; Arizona Health Care Cost Containment System; Healthy Arizona

CHIP: KidsCare

State/Other: Medically Indigent-Medically Needy Program (MI/MN); Office for Children with Special Health Care Needs (CSHCN); Young Adults Transitional Insurance (YATI)

CARD F13-AR

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

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ARKANSAS

Medicaid: ConnectCare; Katie Beckett

CHIP: ARKids First

State/Other: Arkansas Comprehensive Health Insurance Plan; Children's Medical Services (CMS)

CARD F13-CA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

CALIFORNIA

Medicaid: Medi-Cal; Health Insurance Premium Payment Program (HIPP)

CHIP: Healthy Families Program (HFP)

State/Other: Access for Infants & Mothers (AIM); County Medical Services Program (CMSP); California Children's Services (CCS); Major Risk Medical Insurance Program (MRMIP); CARE Health Insurance Premium Payment Program; California Major Medical Insurance Program

CARD F13-CO

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

COLORADO

Medicaid: Primary Care Physician Program (PCPP); BabyCare/KidsCare

CHIP: Child Health Plan Plus (CHP+); Childrens Basic Health Plan

State/Other: Health Care Program for Children with Special Needs (HCP); CUHIP – Colorado Uninsurable Health Insurance Plan; CoverColorado; Colorado Indigent Care Program (CICP)

CARD F13-CT

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

CONNECTICUT

Medicaid: Medical Assistance Program; HUSKY Part A

CHIP: The HUSKY Plan; HUSKY PLUS; HUSKY Part B

State/Other: Refugee Medical Assistance; Children with Special Health Care Needs; Connecticut Health Reinsurance Association (HRA); Connecticut Insurance Assistance Program for AIDS Patients (ClAP AP); State-Administered General Assistance Medical Aid (SAGA); Family Health Services Division (BCH)

CARD F13-DE

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

DELAWARE

Medicaid: Diamond State Health Plan

CHIP: Healthy Children; The Delaware Healthy Children Program (DHCP)

State/Other: Children with Special Health Care Needs (CSHCN)

CARD F13-DC

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

DISTRICT OF COLUMBIA

Medicaid: Medical Assistance

CHIP: DC Healthy Families

State/Other: Medical Charities Program; Health Services for Children with Special Needs; DC Healthcare Alliance

CARD F13-FL

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

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FLORIDA

Medicaid: MediPass

CHIP: KidCare; MediKids; Florida Healthy Kids

State/Other: AIDS Insurance Continuation Program (AICP); Florida Comprehensive Health Association; Children's Medical Services (CMS)

CARD F13-GA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

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GEORGIA

Medicaid: Georgia Better Health Care; Right from the Start (RSM); Health Insurance Premium Payment Program (HIPP)

CHIP: PeachCare for Kids

State/Other: Children's Medical Services (CMS); Indigent Care Trust Fund (ICTF)

CARD F13-HI

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

HAWAII

Medicaid: Hawaii-QUEST

CHIP: Hawaii CHIP

State/Other: QUEST- Net; HCOBRA; Children with Special Health Needs

CARD F13-ID

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

IDAHO

Medicaid: Healthy Connections; Medical Assistance

CHIP: Children's Health Insurance Program

State/Other: Catastrophic Fund; Children's Special Health Program (CSHP)

CARD F13-IL

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

ILLINOIS

Medicaid: Medical Assistance; Healthy Start; Parent Assist; KidCare Assist; KidCare Moms and Babies

CHIP: KidCare Share; KidCare Premium; KidCare Rebate

State/Other: Comprehensive Health Insurance Plan (ICHIP); Specialized Care for Children (DSCC)

CARD F13-IN

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

INDIANA

Medicaid: Hoosier Healthwise; Primestep; Risk Based Managed Care; Medicaid Select

CHIP: Hoosier Healthwise for Children; Children's Health Plan; Benefit Package C

State/Other: Children's Special Health Care Services (CSHCS); Indiana Comprehensive Health Insurance Association (ICHIA)

CARD F13-IA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

IOWA

Medicaid: Medical Assistance; Health Insurance Premium Payment (HIPP); MediPASS; Iowa Plan

CHIP: Health and Well Kids in Iowa (HAWK-I)

State/Other: Children's Health Specialty Clinics (CHSC); Iowa Comprehensive Health Association; AIDS/HIV Health Insurance Premium Payment

CARD F13-KS

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

KANSAS

Medicaid: HealthConnect; HealthWave 19

CHIP: HealthWave 21

State/Other: Medi-KAN; Services for Children with Special Health Care Needs (CSHSN); Kansas Uninsurable Health Insurance Plan; Kansas Health Insurance Association (KHIA)

CARD F13-KY

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

KENTUCKY

Medicaid: Kentucky Patient Access and Care System (KenPAC)

CHIP: Kentucky Children's Health Insurance Program (KCHIP)

State/Other: Kentucky HIV Health Insurance Assistance Program; Commission for Children with Special Health Care Needs; Kentucky Access

CARD F13-LA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

LOUISIANA

Medicaid: CommunityCARE; LaMoms

CHIP: LACHIP

State/Other: Louisiana Health Plan; Children's Special Health Services; Louisiana Health Insurance Association

CARD F13-ME

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MAINE

Medicaid: PrimeCare; Maine Care

CHIP: Cub Care

State/Other: Children with Special Health Care Needs Program (CSHNP)

CARD F13-MD

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MARYLAND

Medicaid: Medical Assistance Program; HealthChoice; REM Program

CHIP: Maryland Children's Health Program (MCHP)

State/Other: AIDS Insurance Assistance Program (MAIAP); Maryland Primary Care (MPC); Children's Medical Services (CMS)

CARD F13-MA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MASSACHUSETTS

Medicaid: MassHealth

CHIP: MassHealth

State/Other: Children's Medical Security Plan (CMSP); Commonhealth; Medical Security Plan (MSP); Special Kids/Special Care; Insurance Partnership; Division of Special Health Care Needs

CARD F13-M I

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MICHIGAN

Medicaid: Medical Assistance Program; Healthy Kids; MICHOICE

CHIP: MIChild Program

State/Other: Children's Special Health Care Services; Trust Fund for Children with Special Health Care Needs

CARD F13-MN

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MINNESOTA

Medicaid: Medical Assistance (MA)

CHIP: Children's Health Insurance Program

State/Other: Minnesota Care; Minnesota General Assistance Medical ,Care Program (GAMC); HIV/AIDS Insurance Continuation Program; Minnesota Children with Special Health Care Needs (MCSHN); Minnesota Comprehensive Health Association (MCHA)

CARD F13-MS

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MISSISSIPPI

Medicaid: Medicaid

CHIP: Mississippi Children's Health Insurance Program (CHIP)

State/Other: Mississippi Comprehensive Health Insurance Risk Pool; Children with Special Health Care Needs

CARD F13-MO

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MISSOURI

Medicaid: Managed Care Plus (MC+); MCPlus; Sarah Lopez Waiver

CHIP: MC+ for Kids

State/Other: General Relief Medical Assistance; Children with Special Health Care Needs; Missouri Health Insurance Pool (MHIP)

CARD F13-MT

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

MONTANA

Medicaid: Passport to Health

CHIP: Montana's CHIP

State/Other: Montana Comprehensive Health Insurance Association (MCHA); Health Insurance Continuum of Coverage Program (HICCP); Special Health Services (SHS)

CARD F13-NE

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEBRASKA

Medicaid: Medical Assistance Program; Nebraska Health Connection (NHC)

CHIP: Kids Connection

State/Other: Medically Handicapped Children’s Program (MHCP); Comprehensive Health Association

CARD F13-NV

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEVADA

Medicaid: Nevada Medicaid

CHIP: Nevada Check Up

State/Other: Family Health Services Bureau

CARD F13-NH

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEW HAMPSHIRE

Medicaid: New Hampshire Medicaid, Healthy Kids Gold

CHIP: Healthy Kids Silver

State/Other: Bureau of Special Medical Services (SMSB); Healthy Kids Buy-in

CARD F13-NJ

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEW JERSEY

Medicaid: New Jersey Care 2000+; AIDS Community Care Alternatives (ACCAP)

CHIP: New Jersey Family Care

State/Other: Healthy Insurance Continuation Program (HICP); Special Child Adult and Early Intervention Services (SCAEIS)

CARD F13-NM

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEW MEXICO

Medicaid: SALUD!

CHIP: New MexiKids

State/Other: Insurance Assistance Program; Children’s Medical Services (CMS); New Mexico Medical Insurance Pool (NMMIP)

CARD F13-NY

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NEW YORK

Medicaid: The Partnership Plan; Medicaid

CHIP: Child Health Plus (CHPlus)

State/Other: Family Health Plus; FHPLUS; Healthy New York; Physically Handicapped Children’s Program; Children with Special Health Care Needs Program (CSHCN)

CARD F13-NC

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NORTH CAROLINA

Medicaid: Carolina Access; Health Care Connection; Access II; Access III

CHIP: NC CHIP Program; NC Health Choice for Children (NCHC)

State/Other: Children Special Health Services (CHS); Title V Services for Children with Special Health Care Needs

CARD F13-ND

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

NORTH DAKOTA

Medicaid: Medical Services; North Dakota Access and Care Program (NoDAC); Primary Care Provider Program; Altrucare

CHIP: Healthy Steps Program

State/Other: Comprehensive Health Association of North Dakota (CHAND); Children’s Special Health Services (CSHS)

CARD F13-OH

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

OHIO

Medicaid: PremierCare; Healthy Families, Healthy Start

CHIP: Healthy Start

State/Other: HIV Health Insurance Premium Payment Program; Hemophilia Insurance Pilot Program; Bureau for Children with Medical Handicaps (BCMH)

CARD F13-OK

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

OKLAHOMA

Medicaid: Medical Assistance Program; Nebraska Health Connection (NHC)

CHIP: Kids Connection

State/Other: Medically Handicapped Children’s Program (MHCP); Comprehensive Health Association

CARD F13-OR

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

OREGON

Medicaid: Oregon Health Plan (OHP)

CHIP: Oregon SCHIP

State/Other: CareAssist; Oregon Services for Children with Special Health Needs; Oregon Medical Insurance Pool (OMIP); Family Health Insurance Assistance Program (FHIAP); Insurance Purchasing Cooperative; Child Development and Rehabilitation Center

CARD F13-PA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

PENNSYLVANIA

Medicaid: Medical Assistance; Access Card; HealthChoices

CHIP: Pa CHIP

State/Other: Title V Program; Bureau of Family Health

CARD F13-RI

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

RHODE ISLAND

Medicaid: Rite Care; RI Medical Assistance; Katie Beckett

CHIP: Rite Care

State/Other: Subsidy for Health Insurance for Center-Based Child-Care Providers; Office of Children with Special Health Care Needs (OCSHN); Rite Share Premium Assistance Program

CARD F13-SC

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

SOUTH CAROLINA

Medicaid: Healthy Options Program (HOP); Physicians Enhanced Program (PEP); South Carolina Partners for Health

CHIP: Partners for Healthy Children (PHC)

State/Other: South Carolina Health Insurance Pool; Children's Rehabilitative Services (CRS); Medically Indigent Assistance Program (MIAP)

CARD F13-SD

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

SOUTH DAKOTA

Medicaid: PRIME; Medical Assistance; M-CHIP

CHIP: CHIP-NM

State/Other: Catastrophic County-Poor Relief Program (CCPR); Continuation of Health Insurance; Children's Special Health Services (CSHS); Refugee Medical Assistance; South Dakota Risk Pool; Disabled Children's Program

CARD F13-TN

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

TENNESSEE

Medicaid: TennCare; Medicaid

CHIP: TennCare for Children

State/Other: Children's Special Services (CSS); Tenncare Standard; Tenncare Assist

CARD F13-TX

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

TEXAS

Medicaid: State of Texas Access Reform (STAR); Star+Plus

CHIP: Texas CHIP

State/Other: Texas Health Insurance Risk Pool; State Kid Insurance Program (SKIP); Children with Special Health Care Needs (CSHCN)

CARD F13-UT

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

UTAH

Medicaid: Medicaid

CHIP: Children's Health Insurance Program

State/Other: Utah's Primary Care Network (PCN); Custody Medical Care Program; Premium Payment Program; Children with Special Health Care Needs (CSHCN); Comprehensive Health Insurance Pool (HIPUtah); Health Insurance Continuation Program

CARD F13-VT

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

VERMONT

Medicaid: Medicaid

CHIP: Dr. Dynasaur

State/Other: Vermont Health Access Plan (VHAP); HIV Insurance Continuation Program (ICAP); Children with Special Health Needs (CSHN)

CARD F13-VA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

VIRGINIA

Medicaid: Virginia Medallion; Medallion II

CHIP: Family Access to Medical Insurance Security Plan (FAMIS)

State/Other: State and Local Hospitalization (SLH) Program; Children's Specialty Services; Children with Special Health Care Needs (CSHCN)

CARD F13-WA

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

WASHINGTON

Medicaid: Basic Health Plus

CHIP: Children's Health Insurance Program

State/Other: Basic Health; Children with Special Health Care Needs (CSHCN); Washington State Health Insurance Pool

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

WEST VIRGINIA

Medicaid: Medical Assistance; Mountain Health Trust (MHT); Physician Assured Access System (PAAS)

CHIP: Children's Health Insurance Program (CHIP); WVCHIP

State/Other: Children with Special Health Care Needs

CARD F13-WI

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

WISCONSIN

Medicaid: Medical Assistance MA; Wisconsin Medicaid; Healthy Start

CHIP: BadgerCare

State/Other: Health Insurance Risk Sharing Program (HIRSP); Wisconsin AIDS/HIV Health Insurance Premium Subsidy Program; Children with Special Health Needs (CSHN)

CARD F13-WY

STATE NAMES FOR MEDICAID, CHIP, STATE-/LOCAL-SPONSORED, AND OTHER HEALTH INSURANCEPROGRAMS

Please find your State.

Note: Some Medicaid programs are called “Medical Assistance Program”, “Title 19” or “{State} Medicaid,” such as “Alabama Medicaid.” CHIP or S-CHIP programs can also be under “Title XXI Program” or “{State} CHIP,” such as “Pennsylvania CHIP.” The names provided below offer additional names for the public health insurance programs for each State.

WYOMING

Medicaid: Wyoming Medicaid; Wyoming Kid Care Plan A

CHIP: Wyoming Kid Care Plan B

State/Other: Wyoming Health Insurance Pool (WHIP); Children's Special Health Services (CSH); Caring Program for Children

CARD F14

You may choose more than one.

1. **Accidents**
2. **Aids Care**
3. **Cancer Treatment**
4. **Castastrophic care**
5. **Dental Care**
6. **Disability insurance (cash payments when unable t work for health reasons)**
7. **Hospice Care**
8. **Hospitalization only**
9. **Long-term care (nursing home care)**
10. **Prescriptions**
11. **Vision care**
12. **Other (specify)**

CARD F15

1. **Through employer**
2. **Through union**
3. **Through workplace, but don't know if employer or union**
4. **Through workplace, self-employed or professional association**
5. **Purchased directly**
6. **Through a state/local government or community program**
7. **Other (Specify)**

CARD F16

1. **6 months or less**
2. **More than 6 months, but not more than 1 year ago**
3. **More than 1 year, but not more than 3 years ago**
4. **More than 3 years**
5. **Never**

CARD F17

You may choose up to five.

1. **Person in family with health insurance lost job or changed employers**
2. **Got divorced or separated/death of spouse or parent**
3. **Became ineligible because of age/left school**
4. **employer does not offer coverage/or not eligible for coverage**
5. **Cost is too high**
6. **Insurance company refused coverage**
7. **Medicaid/Medical plan stopped after pregnancy**
8. **Lost Medicaid/Medical plan because of new job or increase in income**
9. **Lost Medicaid (other)**
10. **Other (Specify)**

CARD F18

0. **Zero**
1. **Less than $500**
2. **$500 - $1,999**
3. **$2,000 - $2,999**
4. **$3,000 - $4,999**
5. **$5,000 or more**

CARD F19

1. Yes, born in one of the 50 United States, or the District of Columbia

2. Yes, born in Puerto Rico, Guam, American Virgin Islands, or other U.S. territory

3. Yes, born abroad to American parent(s)

4. Yes, U.S. citizen by naturalization

5. No, not a citizen of the United States

CARD F20

0. Never attended/kindergarten only
1 .1st grade
2. 2nd grade
3. 3rd grade
4. 4th grade
5. 5th grade
6. 6th grade
7. 7th grade
8. 8th grade
9. 9th grade
10.10thgrade
11.11thgrade
12. 12th grade, no diploma
13. GED or equivalent
14. HIGH SCHOOL GRADUATE
15. Some college, no degree
16. Associate degree: occupational, technical, or vocational program
17. Associate degree: academic program
18. Bachelor's degree (Example: BA, AB, BS, BBA)
19. Master's degree (Example: MA, MS, MEng, MEd, MBA)
20. Professional School degree (Example: MD, DDS, DVM, JD)
21. Doctoral degree (Example: PhD, EdD)

CARD F21-AL

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

ALABAMA

Family Assistance (FA) Program*

JOBS

CARD F21-AK

ALASKA

Alaska Temporary Assistance Program (ATAP)

CARD F21-AZ

ARIZONA

Employing and Moving People Off Welfare and Encouraging Responsibility (EMPOWER)

CARD F21-AR

ARKANSAS

Transitional Employment Assistance (TEA)

CARD F21-CA

CALIFORNIA

California Work Opportunity and Responsibility to Kids (CalWorks)

CARD F21-CO

COLORADO

Colorado Works

CARD F21-CT

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

CONNECTICUT

Temporary Family Assistance (TFA)*

Jobs FIRST

CARD F21-DE

DELAWARE

A Better Chance (ABC)

CARD F21-DC

DISTRICT OF COLUMBIA

Temporary Assistance for Needy Families (TANF)

CARD F21-FL

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

FLORIDA

Welare Transition Program*

Work and Gain Economic Self-Sufficiency (WAGES)*

CARD F21-GA

GEORGIA

Temporary Assistance for Needy Families (TANF)

CARD F21-HI

HAWAII

Temporary Assistance for Needy Families (TANF)

CARD F21-ID

IDAHO

Temporary Assistance for Families in Idaho (TAFI)

CARD F21-IL

ILLINOIS

Temporary Assistance for Needy Families (TANF)

CARD F21-IN

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

INDIANA

Temporary Assistance for Needy Families (TANF)*

Indiana Manpower Placement and Comprehensive Training (IMPACT)

CARD F21-IA

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

IOWA

Family Investment Program (FIP)*

PROMISE JOBS

CARD F21-KS

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

KANSAS

Temporary Assistance for Families (T AF)*

KansasWorks

CARD F21-KY

KENTUCKY

Transitional Assistance Program (K- TAP)

CARD F21-LA

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

LOUISIANA

Family Independence Temporary Assistance Program (FITAP)*

Family Independence Work Program (FIND Work)

CARD F21-ME

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

MAINE

Temporary Assistance for Needy Families (TANF)*

Additional Support for People in Retraining and Employment (ASPIRE)

CARD F21-M D

MARYLAND

Family Investment Program (FIP)

CARD F21-MA

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

MASSACHUSETTS

Temporary Aid to Families with Dependent Children (TAFDC)*

Employment Services Program (ESP)

CARD F21-M I

MICHIGAN

Family \Independence Program (FIP)

CARD F21-MN

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

MINNESOTA

Minnesota Family Investment Program (MFIP)*

Minnesota Works 95- WorkFIRST

CARD F21-MS

MISSISSIPPI

Temporary Assistance for Needy Families (TANF)

CARD F21-MO

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

MISSOURI

Temporary Assistance*

Beyond Welfare

CARD F21-MT

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

MONTANA

Families Achieving Independence in Montana (FAIM)*

Pathways

Community Services Program (CSP)

Demonstration JOBS

CARD F21-NE

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

NEBRASKA

Temporary Assistance for Needy Families (TANF)*

Aid to Dependent Children (ADC)*

Employment First

CARD F21-NV

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

NEVADA

Temporary Assistance for Needy Families (TANF)*

New Employees of Nevada (NEON)

CARD F21-NH

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

NEW HAMPSHIRE

Family Assistance Program (FAP)*

New Hampshire Employment Program (NHEP)

CARD F21-NJ

NEW JERSEY

Work First New Jersey (WFNJ)

CARD F21-NM

NEW MEXICO

NM Works

CARD F21-NY

NEW YORK

Family Assistance (FA) Program

CARD F21-NC

NORTH CAROLINA

Work First

CARD F21-ND

NORTH DAKOTA

Training, Employment, Education Management(TEEM)

CARD F21-OH

OHIO

Ohio Works First (OWF)

CARD F21-OK

OKLAHOMA

Temporary Assistance for Needy Families (TANF)

CARD F21-OR

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

OREGON

Temporary Assistance for Needy Families (TANF)*

Job Opportunities and Basic Skills Program (JOBS)

CARD F21-P A

PENNSYLVANIA

Pennsylvania TANF

CARD F21-RI

RHODEISLAND

Family Independence Program (FIP)

CARD F21-SC

SOUTH CAROLINA

Family Independence Program

CARD F21-SD

SOUTH DAKOTA

Temporary Assistance for Needy Families (TANF)

CARD F21- TN

TENNESSEE

Families First

CARD F21- TX

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

TEXAS

Temporary Assistance for Needy Family (TANF)*

Texas Works (Department of Human Services) *

Choices

CARD F21-UT

UTAH

Family Employment Program (FEP)

CARD F21-VT

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

VERMONT

Aid to Needy Families with Children (ANFC)*

Reach UP

CARD F21-VA

Note: Where there is more than one program, an asterisk* denotes which most resembles TANF.

VIRGINIA

Virginia Independence Program (VIP)*

Virginia Initiative for Employment Not Welfare (VIEW)*

CARD F21-WA

WASHINGTON

WorkFirst

CARD F21-WV

WEST VIRGINIA

West Virginia Works

CARD F21-WI

WISCONSIN

Wisconsin Works (W-2)

CARD F21-WY

WYOMING

Personal Opportunities with Employment Responsibility (POWER)

CARD F22

AA.	$20,000- $20,999
BB.	$21,000- $21,999
CC.	$22,000- $22,999
DD.	$23,000- $23,999
EE.	$24,000- $24,999
FF.	$25,000- $25,999
GG.	$26,000- $26,999
HH.	$27,000- $27,999
II.	$28,000- $28,999
JJ.	$29,000- $29,999
KK.	$30,000- $30,999
LL.	$31,000- $31,999
MM.	$32,000- $32,999
NN.	$33,000- $33,999
00.	$34,000- $34,999
PP.	$35,000- $39,999
QQ.	$40,000- $44,999
RR.	$45,000- $49,999
SS.	$50,000- $54,999
TT.	$55,000- $59,999
U U	$60,000- $64,999
VV.	$65,000- $69,999
WW.	$70,000- $74,999
XX.	$75,000 and over

CARD F23

A. Less than $1,000

B. $1,000- $1,999

C . $2,000- $2,999

D . $3,000- $3,999

E . $4,000- $4,999

F . $5,000- $5,999

G . $6,000- $6,999

H . $7,000- $7,999

I. $8,000- $8,999

J . $9,000- $9,999

K. $10,000- $10,999

L. $11,000- $11,999

M. $12,000- $12,999

N. $13,000- $13,999

0. $14,000- $14,999

P. $15,000- $15,999

Q. $16,000- $16,999

R. $17,000- $17,999

S. $18,000- $18,999

T. $19,000- $19,999

CARD C1

1. Parent (biological, adoptive or step)

2. Grandparent

3. Aunt/Uncle

4. Brother/Sister

5. Other relative

6. Legal guardian

7. Foster parent

8. Other non-relative

CARD C2

You may choose more than one.

1. Down syndrome

2. Cerebral palsy

3. Muscular dystrophy

4. Cystic fibrosis

5. Sickle cell anemia

6. Autism

7. Diabetes

8. Arthritis

9. Congenital heart disease

10. Other heart condition

CARD C3

0. Not true

1. Sometimes true

2. Often true

CARD C4

0. Never

1. 6 months or less

2. More than 6 months, but not more than 1 year ago

3. More than 1 year, but not more than 2 years ago

4. More than 2 years, but not more than 5 years ago

5. More than 5 years ago

CARD C5

0. None

1. 1

2. 2-3

3. 4-5

4. 6-7

5. 8-9

6. 10-12

7. 13-15

8. 16 or more

CARD C6

1. 1
2. 2-3
3. 4-5
4. 6-7
5. 8-9
6. 10- 2
7. 13-15
8. 16 or more

CARD C7

1. Not true

2. Somewhat true

3. Certainly true

CARD C8

Overall, do you think that this child has difficulties in any of the following areas: emotions, concentration, behavior, or being able to get along with other people?

1. No

2. Yes, minor difficulties

3. Yes, definite difficulties

4. Yes, severe difficulties

CARD C9

1. Not at all

2. A little

3. A medium amount

4. A great deal

CARD A1

1. An employee of a PRIVATE company, business, or individual for wages, salary, or commission

2. A FEDERAL government employee

3. A STATE government employee

4. A LOCAL government employee

5. Self-employed in OWN business, professional practice or farm

6. Working WITHOUT PAY in family-owned business or farm

CARD A2

1. 1-9 employees

2. 10-24 employees

3. 25-49 employees

4. 50-99 employees

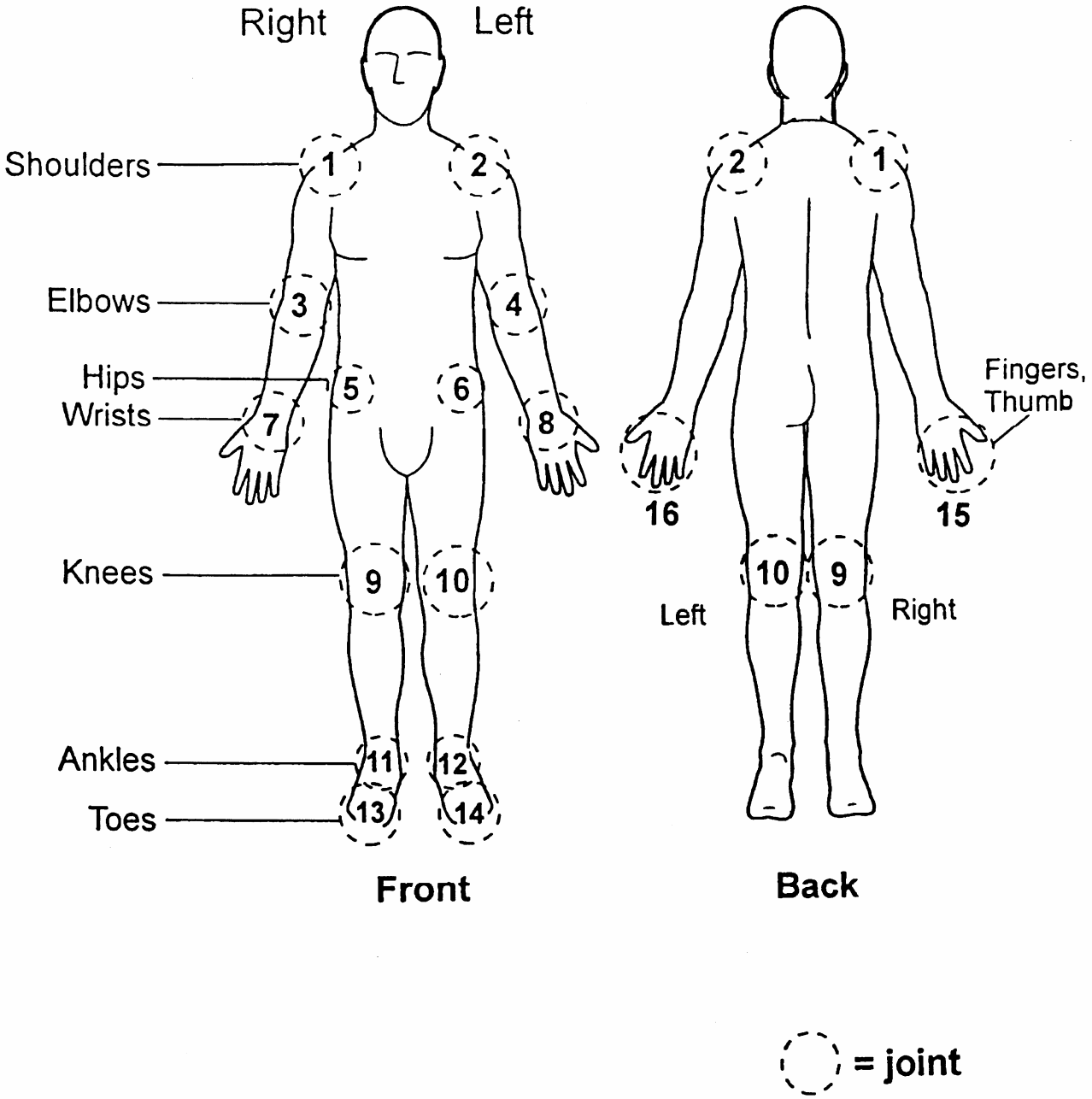
5. 100-249 employees

6. 250-499 employees

7. 500-999 employees

8. 1000 employees or more

CARD A3



You may choose more than one.

CARD A4

1. All of the time

2. Most of the time

3. Some of the time

4. A little of the time

5. None of the time

CARD A5

0. Not at all difficult

1. Only a little difficult

2. Somewhat difficult

3. Very difficult

4. Can't do at all

6. Do not do this activity

CARD A6

You may choose more than one.

1. Vision/problem seeing

2. Hearing problem

3. Arthritis/rheumatism

4. Back or neck problem

5. Fracture, bone/joint injury

6. Other injury

7. Heart problem

8. Stroke problem

9. Hypertension/high blood pressure

10. Diabetes

11. Lung/breathing problem (e.g., asthma and emphysema)

12. Cancer

13. Birth defect

14. Mental retardation

15. Other developmental problem (e.g., cerebral palsy)

16. Senility

17. Depression/anxiety/emotional problem

18. Weight problem

Other impairment/problem

CARD A7

0. Never

1. 6 months or less

2. More than 6 months, but not more than 1 year ago

3. More than 1 year, but not more than 2 years ago

4. More than 2 years, but not more than 5 years ago

5. More than 5 years ago

CARD A8

0. None

1. 1

2. 2-3

3. 4-5

4. 6-7

5. 8-9

6. 10-12

7. 13-15

8. 16 or more

CARD A9

1. 1
2. 2-3
3. 4-5
4. 6-7
5. 8-9
6. 10 -12
7. 13-15
8. 16 or more

CARD A10

1. It's unlikely you've been exposed to HIV

2. You were afraid to find out if you were HIV positive (that you had HIV)

3. You didn't want to think about HIV or about being HIV positive

4. You were worried your name would be reported to the government if you tested positive

5. You didn't know where to get tested

6. You don't like needles

7. You were afraid of losing job, insurance, housing, friends, family, if people knew you were positive for AIDS infection

8. Some other reason (Specify)

9. No particular reason

CARD A11

1. Someone suggested you should be tested

2. You might have been exposed through sex or drug use

3. You might have been exposed through your work or at work

4. You just wanted to find out if you were infected or not

5. For part of a routine medical check-up, or for hospitalization or surgical procedure

6. You were sick or had a medical problem

7. You were pregnant or delivered a baby

8. For health or life insurance coverage

9. For military induction, separation, or military service

10. For immigration

11. For marriage license or to get married

12. You were concerned you could give HIV to someone

13. You wanted medical care or new treatments if you tested positive

14. Some other reason (Specify)

15. No particular reason

CARD A12

1. Private doctor/HMO

2. AIDS clinic/counseling/testing site

3. Hospital, emergency room, outpatient clinic

4. Other type of clinic

5. Public health department

6. At home

7. Drug treatment facility

8. Military induction or military service site

9. Immigration site

10. In a correctional facility (jailor prison)

11. Other location (Specify)

CARD A13

a. You have hemophilia and have received clotting factor concentrations

b. You are a man who has had sex with other men, even just one time

c. You have taken street drugs by needle, even just one time

d. You have traded sex for money or drugs, even just one time

e. You have tested positive for HIV (the virus that causes AIDS)

f. You have had sex (even just one time) with someone who would answer "yes" to any of these statements

CARD A14

You may choose more than one.

1. Breathing the air around a person who is sick with TB

2. Sharing eating/drinking utensils

3. Through semen or vaginal secretions shared during sexual intercourse

4. From smoking

5. From mosquito or other insect bites

6. Other

PRIVACY ACT LISTING STATEMENT
(SPANISH)
DECLARACION SOBRE LA LEY DE CONFIDENCIALIDAD

"Como parte de sus actividades estadlsticas, la Oficina del Censo prepare listas de direcciones y unidades habitacionales. Una de esas listas se usa para ayudar al Centro Nacional de Estadlstica de la Salud Ilevar a cabo estudios sobre el estado de la salud en el pars. Toda informacion que usted nos da es confidencial, conforme a las leyes, y puede **usarse SOLAMENTE PARA PROPOSITOS ESTADISTICO**S por la Oficina y por el Centro Nacional de Estadlstica de la Salud.

Su participacion es voluntaria, y no se le impone sancion alguna si decide no compartir informaci6n. Sin embargo, agradecerlamos profundamente su cooperacion."

If respondent requests legal authority for conducting listing, cite title 42, United States Code, section 242k.

EXAMPLES FOR VERIFYING LISTING

At time of listing and updating, verify the listing after you have introduced yourself and before you interview.

1. SINGLE UNIT ADDRESS -Verify the listing with the respondent by asking:

“.Tengo en mi lista a una residencia con direccion *(read basic address}***. Hay otras residencias -ocupadas o desocupadas – en esta misma direccion?”**

2. MULTI-UNIT ADDRESS -Verify the listing with the owner, building superintendent, manager, rental agent, or some other knowledgeable person, such as a long-time resident by asking:

“Tengo en mi lista a los apartamentos numeros _____ hasta el _____con direccion *(read basic address)***. De estos numeros de apartamentos thay algunos que no se usan como residencia?** *(Pause)* **He faltado a alguna residencia, ya sea ocupada o desocupada, en esta direccion?** *(read basic address***)”**

EXPLANATION OF THE NATIONAL HEALTH INTERVIEW SURVEY (SPANISH)

ACLARACION DE LO QUE SIGNIFICA LA ENCUESTA NACIONAL DE ENTREVIST AS SOBRE LA SALUD

El proposito de la Encuesta Nacional de Entrevistas sobre la Salud es obtener informacion en materia de la salud. Esto incluye informacion sobre enfermedades (su frecuencia y gravedad), incapacidades, accidentes, los tratamientos y las atenciones medicas que consiguen las personas cuando tienen problemas de salud, y otra informaci6n sobre la salud de la poblacion en este pals.

La informacion en cuesti6n es utilizada por los departamentos gubernamentales de salud al nivel federal, estatal y local, las escuelas de medicina, los institutos de investigacion cientlfica, y otros grupos e individuos.

La Oficina del Censo Ileva a cabo esta encuesta a nombre del Centro Nacional de Estadlstica de la Salud, el cual forma parte del Servicio de Salud Publica de los Estados Unidos. Dichas organizaciones estan realizando esta encuesta para satisfacer la necesidad urgente de mantener al dla las estadlsticas sobre la salud general. Esta encuesta es autorizada por el Codigo de los Estados Unidos conforme a la seccion 242k de su titulo 42. Toda informacion obtenida se considera privada yes usada solo para estudios estadlsticos. Su participaci6n en esta encuesta es voluntaria y no se impone sancion alguna si decide no contestar a ciertas preguntas. No obstante, agradecemos su cooperacion, dado que esta es extremadamente importante para asegurar que los datos obtenidos son exactos y completos.

SUGGESTED INTRODUCTION (SPANISH)

Soy_____ de la Oficina del Censo de los Estados Unidos. Aqulle presento mi carnet de identidad. Estamos Ilevando a cabo una encuesta sobre la salud general a nombre del Centro Nacional de Estadlstica de la Salud, el cual forma parte del Servicio de Salud Publica de los Estados Unidos. Recibio usted una carta explicando la razon por esta encuesta?

TELEPHONE CALLBACK INTRODUCTION (SPANISH)

Soy_____ de la Oficina del Censo de los Estados Unidos. Durante una visita a su hogar, hable con (previous respondent) para realizar una encuesta sobre la salud general que se esta Ilevando a cabo a traves del pals. Anteriormente hice arreglos con (previous respondent) para Ilamarle hoy y hacerle algunas preguntas. En nuestra ultima visita le dejamos una carta explicando la razon por que estamos haciendo esta encuesta que trata el tema de la salud. Su participaci6n es voluntaria y usted puede poner fin a ella en cualquier momento que desee. Conforme a las leyes, la Oficina del Censo, el Centro Nacional de Estadlstica de la Salud, y toda otra agencia de la salud involucrada en esta encuesta estan obligadas a respetar la confidencialidad de todas sus respuestas. Los datos obtenidos son usados solo para realizar estudios estadlsticos de temas relacionados a la salud.

PRIVACY ACT LISTING STATEMENT

"As part of its statistical activities, the Bureau of the Census develops lists of addresses and housing units. One such list is used to aid the National Center for Health Statistics (NCHS) to conduct surveys and studies on the state of the nation's health. Any information you provide is confidential by law, and can be used ONLY by the Bureau and NCHS FOR ST A TISTICAL PURPOSES ONLY.

Participation is voluntary, and there are no penalties for refusing to provide information. However, your cooperation is greatly appreciated."

If respondent requests legal authority for conducting listing, cite title 42, United States Code, section 242k.

EXAMPLES FOR VERIFYING LISTING

At time of listing and updating, verify the listing after you have introduced yourself and before you interview.

1. SINGLE UNIT ADDRESS - Verify the listing with the respondent by asking:

"I have listed one unit at (read basic address). Are there any other living quarters -either occupied or vacant -at this address?"

2. MULTI-UNIT ADDRESS - Verify the listing with the owner, building superintendent, manager, rental agent, or some other knowledgeable person, such as a long-time resident by asking:

"I have listed apartments_____through _____at (read basic address). Have I listed any units that are not used as living quarters (Pause) Have I missed any living quarters -either occupied or vacant - which use the basic address (read basic address)?"

EXPLANATION OF THE NATIONAL HEALTH INTERVIEW SURVEY

The basic purpose of the National Health Interview Survey (NHIS) is to obtain information about the frequency and severity of various illnesses, disability, and accidents, the kind of care and treatment people receive for their health problems, and other information related to the health of our Nation.

Data are compiled for use by Federal, State, and local health departments, medical schools, research organizations, and other groups or individuals.

The U.S. Census Bureau is conducting this survey for the National Center for Health Statistics which is part of the U.S. Public Health Service because of the urgent need for up-to-date statistics on the health of the people. The survey is authorized by title 42, United States Code, section 242k. The information collected is confidential and will be used only for statistical purposes. Participation in this survey is voluntary and there are no penalties for refusing to answer any question. However, your cooperation is extremely important in obtaining much needed information to ensure the completeness and accuracy of the data.

SUGGESTED INTRODUCTION

"I am_____from the United States Census Bureau. Here is my identification card. We are conducting a health survey for the National Center for Health Statistics, which is part of the U.S. Public Health Service. Did you receive a letter explaining this survey?"

TELEPHONE CALLBACK INTRODUCTION

"I am_____from the United States Census Bureau. I spoke with (previous respondent) during a visit to your household concerning a health survey we are conducting across the Nation. I arranged with (previous respondent) to call today to ask you some questions. Your household was previously provided with a letter explaining this health survey. Your participation is voluntary and you may discontinue participation at any time. By law, the U.S. Census Bureau, the National Center for Health Statistics and other health agencies must keep all your answers confidential. The data are used only for statistical research on issues related to health."

Adding NHIS Extra Units to Case Management

Usually EXTRA units are picked up by the instrument when you ask the housing unit coverage questions at the beginning of the interview. EXTRA units picked up by the instrument are automatically added to Case Management.

However, *when you discover EXTRA units after you have completed the coverage questions, you need to add these EXTRA units to Case Management yourself.*

First determine if a unit is an EXTRA unit by using this criteria:
In general, an EXTRA unit is any separate housing unit that is not listed.

	Area Segments The EXTRA unit must be:		**Permit Segments** The EXTRA unit must be:
	A separate living quarters (live and eat separately) with direct access to the unit		A separate living quarters (live and eat sepa rate with direct access to the unit)
	Within the segment boundaries		Within the same structure
	Within the same structure or on the same property as the sample unit		Within the same space occupied by the original sample unit

Group Quarters in Area Segments

- Group Quarters (GO) do not have separate living quarters, therefore, there are no EXTRA units for a GO by definition. If you find more GO units than expected as you interview, note this in the Footnotes section of the listing sheet.

Then add the EXTRA unit(s) to Case Management following these steps:

- If you find more than 3 EXTRA units, call your office before conducting the interview.

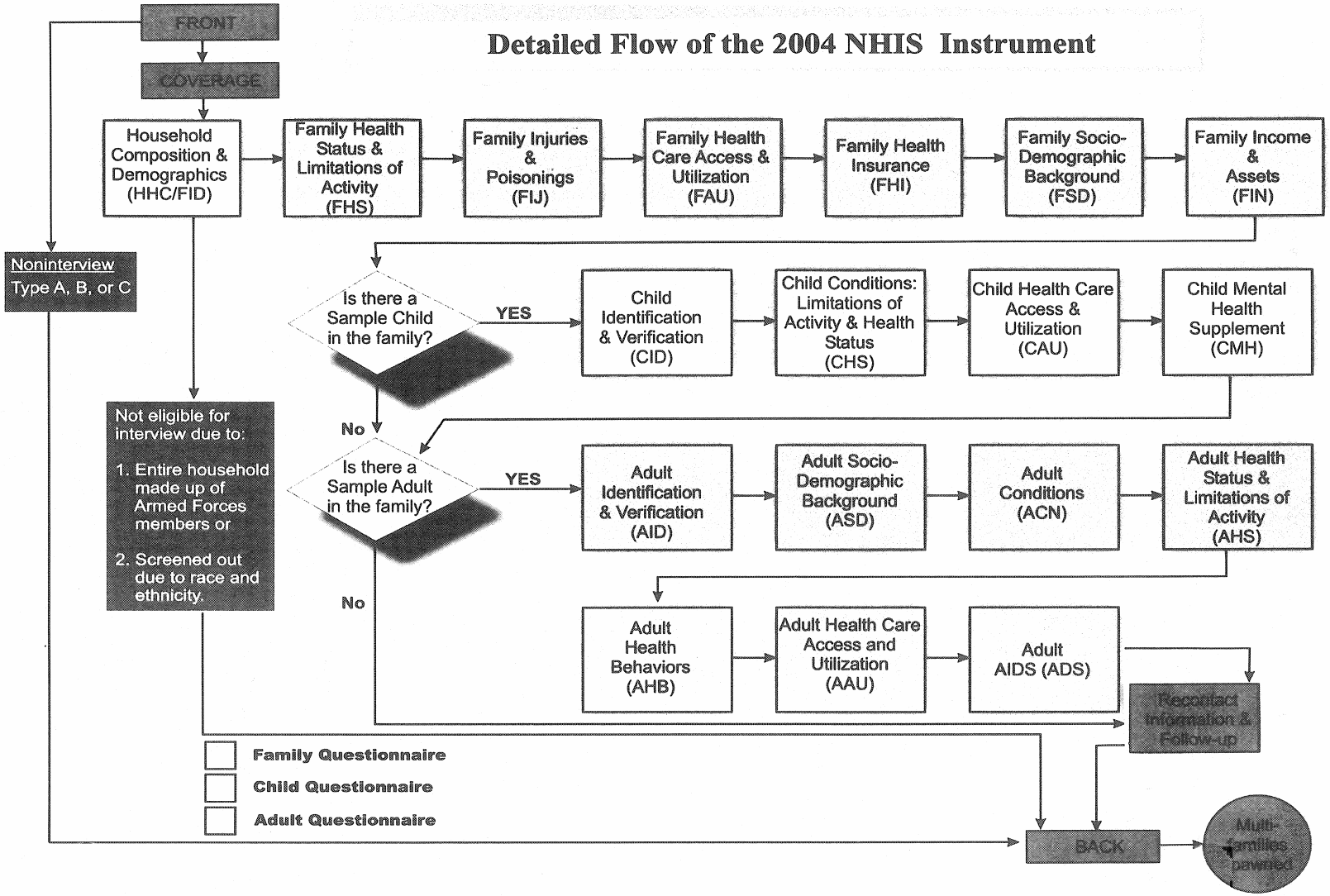
1. Go to the Case List Screen.
2. Place the cursor on the parent unit address on the Case List Screen.
3. Press F4 to create new record for the EXTRA unit(s).
4. Enter the unique unit designation or correct the address for the EXTRA unit.

NATIONAL HEALTH INTERVIEW SURVEY
OUTCOME CODES

OUT-COME	DEFINITION	USUAL ACTION*	LAPTOP	CAPI CONTROL
200	New case, not started	00	Remain	NA
201	Complete interview	10	Transmit	To DSD
202	Accessed instrument, no progress	01	Remain	NA
203	Sufficient partial interview, no follow-up	04	Transmit	To DSD
204	Insufficient Partial interview, follow-up needed	05	Remain	NA
205	Sufficient partial interview, follow-up needed	05	Remain	NA
	Type A			
213	Language problem	21	Transmit	To Supervisor
215	Insufficient partial	21	Transmit	To Supervisor
216	No one home, repeated calls	21	Transmit	To Supervisor
217	Temporarily absent, no follow-up	21	Transmit	To Supervisor
218	Refused	21	Transmit	To Supervisor
219	Other Type A	21	Transmit	To Supervisor
220	Temporarily absent, follow-up possible	01	Remain	NA
	Type B			
223	Occupied entirely by Armed Forces members	31	Transmit	To Supervisor
225	Occupied entirely by persons with URE	31	Transmit	To Supervisor
226	Vacant, nonseasonal	31	Transmit	To Supervisor
2'28	Unfit or to be demolished	31	Transmit	To Supervisor
229	Under construction, not ready	31	Transmit	To Supervisor
230	Converted to temporary business or storage	31	Transmit	To Supervisor
231	Unoccupied site for mobile home, trailer, or tent	31	Transmit	To Supervisor
232	Permit granted, construction not started	31	Transmit	To Supervisor
233	Other Type B	31	Transmit	To Supervisor
235	Vacant, seasonal	31	Transmit	To Supervisor
236	Occupied - screened out by household	31	Transmit	To Supervisor
	Type C			
240	Demolished	41	Transmit	To Supervisor
241	House or trailer moved	41	Transmit	To Supervisor
242	Outside segment boundaries	41	Transmit	To Supervisor
243	Converted to permanent business or storage	41	Transmit	To Supervisor
244	Merged	41	Transmit	To Supervisor
245	Condemned	41	Transmit	To Supervisor
246	Built after April 1st 1990 (4/1/90)	41	Transmit	To Supervisor
247	Unused line of listing sheet	41	Transmit	T o Supervisor
248	Other Type C	41	Transmit	To Supervisor
290	Spawned in error	41	Transmit	To Supervisor

* ACTION CODES	DESCRIPTION
00	Case not started
01	Case open, insufficient data
04	Partial interview, no follow-up
05	Partial but not sufficient
10	Complete interview
21	Type A noninterview
31	Type B noninterview
41	Type C noninterview

Flow of 2004 NHIS CAPI Instrument



2004 NHIS CHECKLIST FOR INTERVIEWING
NATIONAL HEALTH INTERVIEW SURVEY

Laptop Accessories
Batteries, charged
Power cord
Extension cord
3-prong plug

Advance Letters*
English -HIS-600(L)
Spanish -HIS-600(L)(SP)

Thank you Letters*
English -HIS-601 (L)
Spanish -HIS-601 (L)(SP)

Flashcard Booklet* -HIS-501 (C)

Promotional Packet

Calendar Card -HI 5-505

Pen

FR Manual - HIS-100C