**2018 NHIS Questionnaire - Family**

**Family Identification**

**Document Version Date:** 05-Jun-19

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<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FID.100_00.000</th>
<th>Instrument Variable Name:</th>
<th>HHCHANGE</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>I have recorded that [your name is {fill fullname}, you are /fill ALIAS is] [fill sex], [fill age] years old, born on [fill birthdate]. [His/Her] national origin is [fill Hispanic origin], and [his/her] race is [fill race]: Is this information correct?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes, this information is correct</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No, correction(s) needed/more corrections needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** All nondeleted family members

**SkipInstructions:**
- `<1>` if no additional PX remain
- if SCREENIN = 0 and I_SCRN_STATUS = S [goto EXIT(HHC)]
- else [goto FIDCC13]
- `<2>` [goto CWHAT2]

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FID.245_00.000</th>
<th>Instrument Variable Name:</th>
<th>HHCHANGE_1</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>I have recorded that {your name is/ALIAS is} {fill full name}, age is {fill age}, date of birth is {fill birthdate}, {his/her} national origin is {fill Hispanic origin}, and {his/her} {fill race} is: Is this information correct?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes, this information is correct</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No, correction(s) needed/more corrections needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** All nondeleted family members with a change made to their demographic information

**SkipInstructions:**
- `<1>` if no additional PX remain
  - if SCREENIN = 0 and I_SCRN_STATUS = S, GOTO EXIT(HHC)
  - else GOTO FIDCC13
- `<2>` GOTO ERR_HHCHANGE_1

**Hard Edit:**

ERR_HHCHANGE_1

* Press enter to go back to change some demographic information or arrow down and press enter to change your answer.

Default Goto should be CWHAT2
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**Question ID:** FID.250_00.000  
**Instrument Variable Name:** MARITAL  
**QuestionnaireFileName:** Family

**QuestionText:** * ASK OR VERIFY

[fill: Are you/Is ALIAS] now married, widowed, divorced, separated, never married, or living with a partner?

1. Married  
2. Widowed  
3. Divorced  
4. Separated  
5. Never Married  
6. Living with partner  
7. Refused  
9. Don’t know

**UniverseText:** All persons, 14 and older, who don’t have a marital status yet

**SkipInstructions:**  
<1> [goto SPFLAG]  
<2-5, R, D> [goto FIDCCI3]  
<6> if LINTAL[FAMINT] = 1 [goto FIDCCI4]  
else [goto COHAB1]

---

**Question ID:** FID.260_00.000  
**Instrument Variable Name:** SPOUS  
**QuestionnaireFileName:** Family

**QuestionText:** * ASK OR VERIFY

Is [fill: your/ALIAS's] spouse living in the household?

1. Yes  
2. No  
7. Refused  
9. Don’t know

**UniverseText:** A potential spouse lives in the unit.

**SkipInstructions:**  
<1> If SPOUS2[PX] = null [goto SPOUS2]  
else [goto FIDCCI3]  
<2,R,D> [goto FIDCCI3]
**Question ID:** FID.270_00.000  
**Instrument Variable Name:** SPOUS2  
**QuestionnaireFileName:** Family

**QuestionText:**  
* Probe as necessary and enter the line number of the spouse.  

[Display all possible spouse candidates]

**01-25 Person # of spouse**

**UniverseText:**  
Person has an unidentified spouse in the household.

**SkipInstructions:**  
Do not allow line number of the subject to be entered. If so [goto ERR_SPOUS2] <1-25,R,D> [goto FIDCCI3]

**Hard Edit:**

ERR1_SPOUS2  
*Person can’t be his or her own spouse.  
*Please correct.

**Soft Edit:**

ERR2_SPOUS2  
*If [ALIAS (SPOUS2(PX))] is [ALIAS (PX)]’s spouse, [ALIAS (SPOUS2(PX))]’s RPREL value should be ‘02’.  
*Correct relationship code at RPREL or change answer at SPOUS2.

*First GOTO is to change Relationship code of [ALIAS (SPOUS2(PX))]  
*Second GOTO is to choose different spouse at SPOUS2

Questions involved | Value  
RPREL: Relationship to Ref Person | RPREL(SPOUS2(PX))  
SPOUS2 | ALIAS (SPOUS2(PX))

ERR3_SPOUS2  
*Do not read this message to the respondent.  
*The married couple [ALIAS (SPOUS2(PX))] and [ALIAS (PX)] are both [SEX(PX)].  
*Suppress message if correct.  
*Otherwise, correct SEX of either person or choose different spouse.

*First GOTO is to choose different spouse at SPOUS2  
*Second GOTO is to change SEX of spouse [ALIAS (SPOUS2(PX))]  
*Third GOTO is to change SEX of [ALIAS(PX)]

Questions involved | Value  
SPOUS2 | ALIAS (SPOUS2(PX))  
SEX | SEX (SPOUS2(PX))  
SEX | SEX (PX)

ERR4_SPOUS2  
*Age difference between spouses is greater than or equal to 30 years.  
I have recorded [ALIAS (PX)] is [AGE(PX)] years old and [fill: his/her] spouse [ALIAS(SPOUS2(PX))] is [AGE(SPOUS2(PX))] years old. Are these ages and relationships correct?

*First GOTO is to choose different spouse at SPOUS2  
*Second GOTO is to change AGE of spouse [ALIAS (SPOUS2(PX))]  
*Third GOTO is to change AGE of [ALIAS(PX)]

Questions involved | Value  
SPOUS2 | ALIAS (SPOUS2(PX))  
AGE | AGE (SPOUS2(PX))  
AGE | AGE (PX)
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Question ID: FID.280_00.000  Instrument Variable Name: COHAB1  QuestionnaireFileName: Family

QuestionText: [fill: Have you/Has ALIAS] ever been married?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: Marital status is "living with a partner."

SkipInstructions: <1> [goto COHAB2]
<2,R,D> if COHAB3[PX] = null [goto COHAB3]
else [goto FIDCCI3]

Question ID: FID.290_00.000  Instrument Variable Name: COHAB2  QuestionnaireFileName: Family

QuestionText: What is [fill: your/ALIAS's] current legal marital status?

1  Married
2  Widowed
3  Divorced
4  Separated
7  Refused
9  Don't know

UniverseText: Person is currently cohabiting and has been married.

SkipInstructions: <1-4,R,D> If COHAB3[PX] = null [goto COHAB3]
else [goto FIDCCI3]
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<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FID.300_00.000</th>
<th>Instrument Variable Name:</th>
<th>COHAB3</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
</table>

**QuestionText:**

* Probe as necessary and enter the line number of the cohabiting partner.

[Display all possible cohabitation candidates]

#### 01-25

**Person number**

**UniverseText:**

Cohabiting partner has yet to be identified.

**SkipInstructions:**

If line number of the subject is entered [goto ERR_COHAB3]

<1-25,R,D> [goto FIDCCI3]

**Hard Edit:**

ERR1_COHAB3

* Person can't be his or her own partner.
* Please correct.

**Soft Edit:**

ERR2_COHAB3

*If [ALIAS (COHAB3(PX))] is [ALIAS (PX)]’s cohabiting partner, [ALIAS (COHAB3(PX))]’s RPREL value should be ‘03’.
*Correct relationship code at RPREL or change answer at COHAB3.

*First GOTO is to change Relationship code of [ALIAS (COHAB3(PX))]
*Second GOTO is to choose different cohabiting partner at COHAB3

<table>
<thead>
<tr>
<th>Questions involved</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>RPREL: Relationship to Ref Person</td>
<td>RPREL(COHAB3 (PX))</td>
</tr>
<tr>
<td>COHAB3</td>
<td>ALIAS (COHAB3 (PX))</td>
</tr>
</tbody>
</table>

ERR3_COHAB3

*If [ALIAS (COHAB3(PX))] and [ALIAS (PX)] are cohabiting partners, it is not possible for both to have RPREL codes equal to ‘04’ for ‘Child’. One of their RPREL codes should equal ‘12’ for ‘Other relative’.
*Correct relationship code at RPREL or change answer at COHAB3.

*First GOTO is to change Relationship code of [ALIAS (COHAB3(PX))]
*Second GOTO is to change Relationship code of [ALIAS (PX)]
*Third GOTO is to choose different cohabiting partner at COHAB3

<table>
<thead>
<tr>
<th>Questions involved</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>RPREL: Relationship to Ref Person</td>
<td>Child</td>
</tr>
<tr>
<td>RPREL: Relationship to Ref Person</td>
<td>Child</td>
</tr>
<tr>
<td>COHAB3</td>
<td>ALIAS (COHAB3 (PX))</td>
</tr>
</tbody>
</table>

ERR4_COHAB3

*Age difference between cohabiting partners is greater than or equal to 20 years.
I have recorded [ALIAS (PX)] is [AGE(PX)] years old and [fill: his/her] cohabiting partner [ALIAS(COHAB3(PX))] is [AGE(COHAB3(PX))] years old. Are these ages and relationships correct?

*First GOTO is to choose different cohabiting partner at COHAB3
*Second GOTO is to change AGE of cohabiting partner [ALIAS (COHAB3(PX))]
*Third GOTO is to change AGE of [ALIAS(PX)]

<table>
<thead>
<tr>
<th>Questions involved</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>COHAB3</td>
<td>ALIAS (COHAB3 (PX))</td>
</tr>
<tr>
<td>AGE</td>
<td>AGE (COHAB3 (PX))</td>
</tr>
<tr>
<td>AGE</td>
<td>AGE (PX)</td>
</tr>
<tr>
<td>Question ID:</td>
<td>FID.322_00.000</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------</td>
</tr>
<tr>
<td>QuestionText:</td>
<td>I noted that [father's fullname] is the father of [child's fullname]. Is [child's fullname] his biological, adoptive, step, foster, or [fill: son/daughter] in law?</td>
</tr>
<tr>
<td>1</td>
<td>Biological</td>
</tr>
<tr>
<td>2</td>
<td>Adoptive</td>
</tr>
<tr>
<td>3</td>
<td>Step</td>
</tr>
<tr>
<td>4</td>
<td>Foster</td>
</tr>
<tr>
<td>5</td>
<td>-in-law</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>
UniverseText: When the reference person is the person in question's parent.

SkipInstructions:
<1> if AGEDIFF <12 [goto ERR_DEGREE4]
if ERR_DEGREE4 ≠ 1 [goto FIDCCI4B]
else reset DEGREE4 [goto DEGREE4] endif
else [goto FIDCCI4B]
<2-5,R,D> [goto FIDCCI4B]

Hard Edit:
ERR2_DEGREE4
*Age difference between father and child is [AGEDIFF] years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and his child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct? * Please correct relationship code or age.

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of father [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved

Value
RPREL: Relationship to Ref Person Spouse (husband) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE (PX)

Soft Edit:
ERR1_DEGREE4
*Age difference between father and child is only [AGEDIFF] years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and his child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of father [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved

Value
RPREL: Relationship to Ref Person Spouse (husband) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE (PX)

If suppressed and additional persons remain, GOTO FIDCCI4 else GOTO FIDCCI4B, endif

ERR3_DEGREE4
*Age difference between father and child is greater than or equal to 50 years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and his child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of father [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved

Value
RPREL: Relationship to Ref Person Spouse (husband) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE (PX)
If suppressed and additional persons remain, GOTO FIDCCI4
else GOTO FIDCCI4B, endif
I noted that [mother's fullname] is the mother of [child's fullname]. Is [child's fullname] her biological, adoptive, step, foster, or [fill: son/daughter] in law?

1. Biological
2. Adoptive
3. Step
4. Foster
5. -in-law
6. Refused
7. Don't know
UniverseText: When the reference person is the person in question's parent.

SkipInstructions: <1> if AGEDIFF <12 [goto ERR_DEGREE5]
if yes, continue the interview [goto FIDCCI4B]
else, reset DEGREE5 [goto DEGREE5] endif
else [goto FIDCCI4B]
<2-5,R,D> [goto FIDCCI4B]

Hard Edit: ERR2_DEGREE5
*Age difference between mother and child is [AGEDIFF] years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?
* Please correct relationship code or age.

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of mother [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
RPREL: Relationship to Ref Person Spouse (wife) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE(PX)

Soft Edit: ERR1_DEGREE5
*Age difference between mother and child is only [AGEDIFF] years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of mother [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
RPREL: Relationship to Ref Person Spouse (wife) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE(PX)

If suppressed and additional persons remain, GOTO FIDCCI4
else GOTO FIDCCI4B, endif

ERR3_DEGREE5
*Age difference between mother and child is greater than or equal to 50 years.
I have recorded [ALIAS (X2)] is [AGE(X2)] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change Relationship code of [ALIAS(X2)]
*Second GOTO is to change Relationship code of [ALIAS(PX)]
*Third GOTO is to change AGE of mother [ALIAS(X2)]
*Fourth GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
RPREL: Relationship to Ref Person Spouse (wife) or Unmarried Partner
RPREL: Relationship to Ref Person Child or Child of Partner
AGE AGE (X2)
AGE AGE(PX)
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If suppressed and additional persons remain, GOTO FIDCCI4
else GOTO FIDCCI4B, endif

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FID.326_00.000</th>
<th>Instrument Variable Name:</th>
<th>MOTHER</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
</table>
| QuestionText:      | * Ask or verify
                    Is [fill: your/ALIAS’s] mother a household member? (Include biological (natural), adoptive, step, or foster mother or mother-in-law) |
|                    | * Enter the line number of the mother or mother-in-law.
                    If the mother or mother-in-law is not a household member, enter "0". |
|                    | * Choose mother over mother-in-law if both are present. |
| 00                 | Mother not a household member |
| 01-25              | Person number of mother |
| 97                 | Refused |
| 99                 | Don’t know |

**UniverseText:** Potential mother in the Family, mother not already identified

**SkipInstructions:** <01-25> [goto MOTHERCK_A]
<0,R,D> [goto FIDCCI5]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FID.330_01.000</th>
<th>Instrument Variable Name:</th>
<th>MOTHERCK_A</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>[fill1: Are you/Is ALIAS] [fill2: ALIAS's/your] biological (natural), adoptive, step, or foster mother or mother-in-law?</td>
<td>Biological mother</td>
<td>Adoptive mother</td>
<td>Step mother</td>
<td>Foster mother</td>
</tr>
</tbody>
</table>

1
2
3
4
5
7
9
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UniverseText:
Mother is in the immediate family.

SkipInstructions:
<1> If AGEDIFF <12 [goto ERR_MOTHERCK_A]
if <1> [goto FIDCCI5]
elseif <2> [goto MOTHER]
elseif <3>, reset MOTHERCK_A [goto MOTHERCK_A]
else [goto FIDCCI5]
<2-5,R,D> [goto FIDCCI5]

Hard Edit:
ERR2_MOTHERCK_A
*Age difference between mother and child is [AGEDIFF] years.
I have recorded [ALIAS (LNMOM[PX])] is [AGE(LNMOM[PX])] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?
* Please correct relationship code or age.

*First GOTO is to change code at MOTHER
*Second GOTO is to change AGE of mother [ALIAS (LNMOM[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
MOTHER ALIAS (MOTHER [PX])
AGE AGE(LNMOM[PX])
AGE AGE(PX)

Soft Edit:
ERR1_MOTHERCK_A
*Age difference between mother and child is only [AGEDIFF] years.
I have recorded [ALIAS (LNMOM[PX])] is [AGE(LNMOM[PX])] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change code at MOTHER
*Second GOTO is to change AGE of mother [ALIAS (LNMOM[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
MOTHER ALIAS (MOTHER [PX])
AGE AGE(LNMOM[PX])
AGE AGE(PX)

if suppressed goto FIDCCI5

ERR3_MOTHERCK_A
*Age difference between mother and child is greater than or equal to 50 years.
I have recorded [ALIAS (LNMOM[PX])] is [AGE(LNMOM[PX])] years old and her child [ALIAS(PX)] is [AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change code at MOTHER
*Second GOTO is to change AGE of mother [ALIAS (LNMOM[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved Value
MOTHER ALIAS (MOTHER [PX])
AGE AGE(LNMOM[PX])
AGE AGE(PX)

if suppressed goto FIDCCI5
**Question ID:** FID.340_00.000  **Instrument Variable Name:** FATHER  
**QuestionnaireFileName:** Family

**QuestionText:**  
* Ask or verify  

Is [fill: your/ALIAS's] father a household member? (Include biological (natural), adoptive, step, or foster father or father-in-law).  

* Enter the line number of the father or father-in-law.  

* If the father is not a household member, enter '0'.  

* Choose father over father-in-law if both are present.  

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>Father not in household</td>
</tr>
<tr>
<td>01-25</td>
<td>Person # of father</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Potential Father in Family, not already identified

**SkipInstructions:**  
<1-25> [goto FATHERCK_A]  
<0,R,D> [goto FIDCCI4]
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**Question ID:** FID.350_01.000  **Instrument Variable Name:** FATHERCK_A  **QuestionnaireFileName:** Family

**QuestionText:** [fill1: Are you/Is ALIAS] [fill2: ALIAS's/your] biological (natural), adoptive, step, or foster father or father-in-law?

1. Biological father
2. Adoptive father
3. Step father
4. Foster father
5. Father-in-law
7. Refused
9. Don’t know
Father is in the immediate family.

Skip Instructions:

<1> If AGEDIFF <12 [goto ERR_FATHERCK_A]
if ERRFATHERCK_A = <1> [goto FIDCCI4]
elseif <2> [goto FATHER]
elseif <3> reset FATHERCK_A
[goto FATHERCK_A] endif
else [goto FIDCCI4]
<2-5,R,D> [goto FIDCCI4]

Hard Edit:

ERR2_FATHERCK_A
*Age difference between father and child is [AGEDIFF] years.
I have recorded [ALIAS(LNDAD[PX])] is [AGE(LNDAD[PX])] years old and his child [ALIAS(PX)] is 
[AGE(PX)] years old.
Are these ages and relationships correct?
* Please correct relationship code or age.

*First GOTO is to change code at FATHER
*Second GOTO is to change AGE of father [ALIAS (LNDAD[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved | Value
FATHER | ALIAS(FATHER [PX])
AGE | AGE(LNDAD[PX])
AGE | AGE(PX)

Soft Edit:

ERR1_FATHERCK_A
*Age difference between father and child is only [AGEDIFF] years.
I have recorded [ALIAS(LNDAD[PX])] is [AGE (LNDAD[PX])] years old and his child [ALIAS(PX)] is 
[AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change code at FATHER
*Second GOTO is to change AGE of father [ALIAS (LNDAD[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved | Value
FATHER | ALIAS(FATHER [PX])
AGE | AGE(LNDAD[PX])
AGE | AGE(PX)

if suppressed goto FIDCCI4

ERR3_FATHERCK_A
*Age difference between father and child is greater than or equal to 50 years.
I have recorded [ALIAS(LNDAD[PX])] is [AGE (LNDAD[PX])] years old and his child [ALIAS(PX)] is 
[AGE(PX)] years old. Are these ages and relationships correct?

*First GOTO is to change code at FATHER
*Second GOTO is to change AGE of father [ALIAS (LNDAD[PX])]
*Third GOTO is to change AGE of child [ALIAS(PX)]

Questions involved | Value
FATHER | ALIAS(FATHER [PX])
AGE | AGE(LNDAD[PX])
AGE | AGE(PX)
**Question ID**: FID.361_00.000  
**Instrument Variable Name**: LGGUARD1  
**QuestionnaireFileName**: Family

**QuestionText**: [fill: Do you/Does ALIAS] have a legal guardian?

1  Yes  
2  No  
7  Refused  
9  Don’t know

**UniverseText**: (Person is ward of reference person OR both mother and father are not present in the household) AND person is less than 18 AND person is not deleted

**SkipInstructions**:
1. <1> [goto LGGUARD2]  
2. <R,D> if additional persons remain, GOTO FIDCCI4  
   else GOTO ROSTERCK

**Question ID**: FID.362_00.000  
**Instrument Variable Name**: LGGUARD2  
**QuestionnaireFileName**: Family

**QuestionText**: *Ask or verify.  
Is [fill ALIAS’S] legal guardian a household member?  
*Enter the line number of the legal guardian.  
*If the legal guardian is not a household member, enter '0'.

00  Guardian not a household member  
01-25  Person # of guardian  
97  Refused  
99  Don’t know

**UniverseText**: Person less than 18 has legal guardian

**SkipInstructions**:
1. <0-25, D, R> if additional persons remain, GOTO FIDCCI4  
   else GOTO ROSTERCK
**2018 NHIS Questionnaire - Family**

**Family Identification**

Document Version Date: 05-Jun-19

---

**Question ID:** FID.380_00.000  
**Instrument Variable Name:** KNOW2  
**QuestionnaireFileName:** Family

**QuestionText:**

* Verify or ask
Who in the family would you say knows about the health of all the family members?
[Display all family members who not deleted and > 17 or emancipated minors.]
* Mark all that apply, separate with commas.

1  Yes, knows family members' health  
2  No, does not know family member's health  
7  Refused  
9  Don't know

**UniverseText:** More than one adult

**SkipInstructions:**

<1-25,R,D>  
if SCSEL = 0 [goto FINTRO2]  
else [goto KNOWSC2]

---

**Question ID:** FID.390_03.000  
**Instrument Variable Name:** FINTRO2  
**QuestionnaireFileName:** Family

**QuestionText:**

* Enter line number(s) of family members listed that are currently present. Enter up to 10 numbers, separate with commas.
[Display all family members who are not deleted and >17 or emancipated minors]  
* If any persons listed are not present, say:
We would like to have all adult family members who are at home take part in the interview. Are (READ NAMES) at home now?  
* If yes, ask: Could they join us?  
* If nobody is presently available, enter "96" to proceed to a callback screen.

1  Present  
2  Not present

**UniverseText:** All nondeleted persons >17 or emancipated minors

**SkipInstructions:**

<96> [goto FCALLBK1]  
if only one PX selected [goto HLTH_BEG]  
else [goto FAMRESP]
* Ask if necessary: With whom am I speaking?
* Enter the line number of the person you consider to be the main respondent for this family's health questions.

01-25
Person # of Family Respondent

More than 1 adult present.

go to HLTH_BEG
**2018 NHIS Questionnaire - Family**

**Family Health Status & Limitations**

**Document Version Date: 12-Jun-19**

---

**Question ID:** FHS.005_00.000  **Instrument Variable Name:** FLAPLYLM  **QuestionnaireFileName:** Family

**QuestionText:**

> ? [F1]  

[fill1: Are/Is]

* Read names  
  (fill roster of persons age 0-4)

limited in the kind or amount of play activities [fill2: they/he/she] can do because of a physical, mental, or emotional problem?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with one or more persons less than 5 years of age

**SkipInstructions:**  
<1> [if only one child less than 5 years of age, store the person number in PLAPLYLM and goto PLAPLYUN;  
else, goto PLAPLYLM]  
<2,R,D> [goto FSPEDEIS]

---

**Question ID:** FHS.010_00.000  **Instrument Variable Name:** PLAPLYLM  **QuestionnaireFileName:** Family

**QuestionText:**  

* Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?  
(Anyone else?)

<p>| | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with two or more persons less than five years of age and at least one is limited in play activities

**SkipInstructions:** goto PLAPLYUN

**NOTE:** In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
### Family Health Status & Limitations

**2018 NHIS Questionnaire - Family**

**Family Health Status & Limitations**

**Document Version Date:** 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID: FHS.020_00.000</th>
<th>Instrument Variable Name: PLAPLYUN</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Is [fill: ALIAS] able to take part AT ALL in the usual kinds of play activities done by most children [fill: ALIAS]’s age?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** All persons less than 5 years of age who are limited in play activities

**SkipInstructions:** repeat this question for all persons listed at PLAPLYLM, then goto FSPEDEIS

<table>
<thead>
<tr>
<th>Question ID: FHS.050_00.000</th>
<th>Instrument Variable Name: FSPEDEIS</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>Do you/Does/Do any of these family members, <em>(fill roster of persons less than age 18)</em> receive Special Educational or Early Intervention Services?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** All families with one or more persons less than 18 years of age

**SkipInstructions:** <1> [if only one person less than 18 years of age, store the person number in PSPEDEIS and goto PSPEDEM; else, goto PSPEDEIS] <2,R,D> [goto FLAADL]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

**Question ID:** FHS.060_00.000  **Instrument Variable Name:** PSPEDEIS  **QuestionnaireFileName:** Family

**QuestionText:** * Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** All families with two or more persons less than 18 years of age and at least one receives Special Educational or Early Intervention Services

**SkipInstructions:** goto PSPEDEM

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

**Question ID:** FHS.065_00.000  **Instrument Variable Name:** PSPEDEM  **QuestionnaireFileName:** Family

**QuestionText:** [fill: Do you/Does ALIAS] receive these services because of an emotional or behavioral problem?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** All persons less than 18 years of age who receive Special Educational or Early Intervention Services

**SkipInstructions:** repeat this question for all persons listed at PSPEDEIS, then goto FLAADL
Because of a physical, mental, or emotional problem, [fill1: do you/does anyone in the family] need the help of other persons with PERSONAL CARE NEEDS, such as eating, bathing, dressing, or getting around inside this home?

[fill2: Do not include family members age 2 and under.]

Yes
No
Refused
Don't know

All families with one or more persons 3 years of age or older

<1> [if a single-person family, store the person number in PLAADL and goto LABATH; else, goto PLAADL]
<2,R,D> [goto FLAIADL]

* Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

Yes
No
Refused
Don't know

All families with two or more persons 3 years of age or older and at least one needs the help of other persons with personal care needs

goto LABATH

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
### Question ID: FHS.090_01.000  Instrument Variable Name: LABATH  QuestionnaireFileName: Family

**QuestionText:** [fill: Do you/Does ALIAS] need the help of other persons with...

Bathing or showering?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 3 years of age or older who need help with personal care needs

**SkipInstructions:** goto LADRESS

---

### Question ID: FHS.090_02.000  Instrument Variable Name: LADRESS  QuestionnaireFileName: Family

**QuestionText:** * Read lead-in if necessary.

[fill: Do you/Does ALIAS] need the help of other persons with...

Dressing?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 3 years of age or older who need help with personal care needs

**SkipInstructions:** goto LAEAT
<table>
<thead>
<tr>
<th>Question ID: FHS.090_03.000</th>
<th>Instrument Variable Name: LAEAT</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Read lead-in if necessary.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[fill: Do you/Does ALIAS] need the help of other persons with...</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eating?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All persons 3 years of age or older who need help with personal care needs</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>goto LABED</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID: FHS.090_04.000</th>
<th>Instrument Variable Name: LABED</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Read lead-in if necessary.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[fill: Do you/Does ALIAS] need the help of other persons with...</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Getting in or out of bed or chairs?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All persons 3 years of age or older who need help with personal care needs</td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>goto LATOILT</td>
<td></td>
</tr>
</tbody>
</table>
Family Health Status & Limitations

NHIS Questionnaire - Family

Question ID: FHS.090_05.000  Instrument Variable Name: LATOILT  QuestionnaireFileName: Family

* Read lead-in if necessary.

[fill: Do you/Does ALIAS] need the help of other persons with...

Using the toilet, including getting to the toilet?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All persons 3 years of age or older who need help with personal care needs

SkipInstructions: goto LAHOME

Question ID: FHS.090_06.000  Instrument Variable Name: LAHOME  QuestionnaireFileName: Family

* Read lead-in if necessary.

[fill: Do you/Does ALIAS] need the help of other persons with...

Getting around inside the home?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All persons 3 years of age or older who need help with personal care needs

SkipInstructions: goto LABATH for the next persons listed at PLAADL; else, goto FLAIADL
**Question ID:** FHS.150_00.000  
**Instrument Variable Name:** FLAIADL  
**QuestionnaireFileName:** Family

**QuestionText:**  
Because of a physical, mental, or emotional problem, do you or any of these family members need the help of other persons in handling ROUTINE NEEDS, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

<p>| | |</p>
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<thead>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with one or more persons 18 years of age or older

**SkipInstructions:**  
<1> [if only one person 18 years of age or older, store the person number in PLAIADL and goto FLAWKNOW; else, goto PLAIADL]  
<2,R,D> [goto FLAWKNOW]

---

**Question ID:** FHS.160_00.000  
**Instrument Variable Name:** PLAIADL  
**QuestionnaireFileName:** Family

**QuestionText:**  
* Ask or verify. Enter applicable line number(s), separate with commas.

  Who is this?  
  (Anyone else?)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with two or more persons 18 years of age or older and at least one needs the help of other persons in handling routine needs

**SkipInstructions:** goto FLAWKNOW

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
### Question ID: FHS.170_00.000  
Instrument Variable Name: FLAWKNOW  
QuestionnaireFileName: Family

**QuestionText:**

Does a physical, mental, or emotional problem NOW keep [fill: you/any of these family members]

* Read names
  (fill roster of persons age 18 or older)]

from working at a job or business?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All families with one or more persons 18 years of age or older

**SkipInstructions:**
<1> [if only one person 18 years of age or older, store the person number in PLAWKNOW and goto FLAWALK; else, goto PLAWKNOW]
<2,R,D> [goto FLAWKLIM]

---

### Question ID: FHS.180_00.000  
Instrument Variable Name: PLAWKNOW  
QuestionnaireFileName: Family

**QuestionText:**

* Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All families with two or more persons 18 years of age or older and at least one is unable to work due to a physical, mental, or emotional problem

**SkipInstructions:**
all persons selected goto FLAWALK; else, goto FLAWKLIM

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Family Health Status & Limitations

2018 NHIS Questionnaire - Family

Document Version Date: 12-Jun-19

---

**Question ID:** FHS.190_00.000  **Instrument Variable Name:** FLAWKLIM  **QuestionnaireFileName:** Family

**QuestionText:**

> ? [F1]

[fill: Are you limited in the kind OR amount of work you/ Is ALIAS limited in the kind OR amount of work he/she/ Are any of these family members,]

* Read names
  (fill roster of persons age 18 or older]

limited in the kind OR amount of work they can do because of a physical, mental or emotional problem?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** All families with one or more persons 18 years of age or older not listed as being unable to work due to a physical, mental, or emotional problem

**SkipInstructions:** <1> [if only one person 18 years of age or older not selected at PLAWKNOW, store person number in PLAWKLIM and goto FLAWALK; else, goto PLAWKLIM]  
<2,R,D> [goto FLAWALK]

---

**Question ID:** FHS.200_00.000  **Instrument Variable Name:** PLAWKLIM  **QuestionnaireFileName:** Family

**QuestionText:**

* Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

- 0 Unable to work
- 1 Limited in work
- 2 Not limited in work
- 7 Refused
- 9 Don't know

**UniverseText:** All families with two or more persons 18 years of age or older able to work and at least one is limited in the kind or amount of work he/she can do

**SkipInstructions:** goto FLAWALK

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Because of a health problem, [fill: do you/does anyone in the family] have difficulty walking without using any special equipment?

1  Yes
2  No
7  Refused
9  Don't know

All families with two or more persons and at least one that has difficulty walking without using special equipment

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: FHS.230_00.000  Instrument Variable Name: FLAREMEM  QuestionnaireFileName: Family

QuestionText: [fill1: Are you/Is anyone in the family] LIMITED IN ANY WAY because of difficulty remembering or because [fill2: you/they] experience periods of confusion?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families

SkipInstructions: <1> [if a single-person family, store person number in PLAREMEM and goto LAHCC; else, goto PLAREMEM]
<2,R,D> [goto FLIMANY]

Question ID: FHS.240_00.000  Instrument Variable Name: PLAREMEM  QuestionnaireFileName: Family

QuestionText: * Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families with two or more persons and at least one is limited due to difficulty remembering or periods of confusion

SkipInstructions: goto FLIMANY

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Question ID: FHS.250_00.000  Instrument Variable Name: FLIMANY  QuestionnaireFileName: Family

**QuestionText:**

? [F1]

[fill: Are you/ Is ALIAS/ Are any family members

* Read names
(fill roster of applicable persons)]

LIMITED IN ANY WAY in any activities because of physical, mental or emotional problems?

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:** All families – please see note on PLIMANY

**SkipInstructions:** <1> [if a one-person family or the respondent is the only person NOT previously mentioned as having a limitation, store person number in PLIMANY and goto LAHCC; else goto PLIMANY]

<2,R,D> [goto LAHCC]

---

Question ID: FHS.260_00.000  Instrument Variable Name: PLIMANY  QuestionnaireFileName: Family

**QuestionText:**

*  Ask or verify. Enter applicable line number(s), separate with commas.

Who is this?
(Anyone else?)

0  Limitation previously mentioned
1  Yes, limited in some other way
2  Not limited in any way
7  Refused
9  Don't know

**UniverseText:** All families – please see note on PLIMANY

**SkipInstructions:** goto LAHCC
What conditions or health problems cause [fill: ALIAS]’s limitations?

* Enter all that apply, separate with commas.
* Do not probe except to clarify answer.

- Vision/problem seeing
- Hearing problem
- Speech problem
- Asthma/breathing problem
- Birth defect
- Injury
- Intellectual disability, also known as mental retardation
- Other developmental problem (for example, cerebral palsy)
- Other mental, emotional or behavioral problem
- Bone, joint, or muscle problem
- Epilepsy or seizures
- Learning disability
- Attention Deficit/Hyperactivity Disorder (ADD/ADHD)
- Other impairment/problem (Specify one)
- Other impairment/problem (Specify one)
- Refused
- Don't know/not sure

### UniverseText:
All persons less than 18 years of age who have at least one reported limitation

### SkipInstructions:
- <1-4,6-13> [goto appropriate follow-up questions: LHCL01N - LHCL04N, LHCL06N - LHCL13N]
- <5> [fill “96” in LHCL05N and fill “6” in LHCL05T]
- <90> [goto LAHCC_S1]
- <91> [goto LAHCC_S2]
- <R,D> [repeat this question for the next person less than 18 years of age with a reported limitation; if no more persons less than 18 years of age with a reported limitation, goto LAHCA]

NOTE: This question and all appropriate follow-up questions are asked, in sequence, for each person less than 18 years of age with a reported limitation. The instrument then proceeds to LAHCA.
What is the other impairment or problem?

**Verbatim**
- Verbatim response
- Refused
- Don't know

**UniverseText:** All persons less than 18 years of age who have a limitation due to at least one condition not listed at LAHCC

**SkipInstructions:** goto LHCL90N

---

What is the other impairment or problem?

**Verbatim**
- Verbatim response
- Refused
- Don't know

**UniverseText:** All persons less than 18 years of age who have a limitation due to at least one condition not listed at LAHCC

**SkipInstructions:** goto LHCL91N
How long [fill: have you/has ALIAS] had a vision problem or problem seeing?

- Enter number for time with a vision problem or problem seeing.
- Enter '95' for 95 or more.
- Enter '96' if since birth.

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<thead>
<tr>
<th>Response</th>
<th>Description</th>
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<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
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<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons less than 18 years of age who have a limitation due to a vision problem or problem seeing

Skip Instructions:
- <1-95,D> [goto LHCL01T]
- <96> [fill "6" in LHCL01T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
- <R> [store "R" in LHCL01T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
* Enter time period for time with vision problem or problem seeing.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a vision problem or problem seeing and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL01T]
if (LHCL01T = 4 and LHCL01N > AGE) or (LHCL01T = 3 and LHCL01N > AGE in months) or (LHCL01T = 2 and LHCL01N > AGE in weeks), goto ERR1_LHCL01T

Hard Edit: ERR1_LHCL01T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL01T
* "6" not selectable.
Question ID: FHS.282_01.000  Instrument Variable Name: LHCL02N  QuestionnaireFileName: Family

QuestionText: 1 of 2

How long [fill: have you/has ALIAS] had a hearing problem?

* Enter number for time with a hearing problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

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<tbody>
<tr>
<td>01-94</td>
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<tr>
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<td>95+</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
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</table>

UniverseText: All persons less than 18 years of age who have a limitation due to a hearing problem

SkipInstructions: <1-95,D> [goto LHCL02T]  
<96> [fill "6" in LHCL02T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]  
<R> [store "R" in LHCL02T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
2018 NHIS Questionnaire - Family

Family Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: FHS.282_02.000  Instrument Variable Name: LHCL02T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with hearing problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a hearing problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]

<6> [goto ERR2_LHCL02T]

if (LHCL02T = 4 and LHCL02N > AGE) or (LHCL02T = 3 and LHCL02N > AGE in months) or (LHCL02T = 2 and LHCL02N > AGE in weeks), goto ERR1_LHCL02T

Hard Edit: ERR1_LHCL02T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHCL02T

* "6" not selectable.
How long [fill: have you/has ALIAS] had a speech problem?

* Enter number for time with a speech problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

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<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons less than 18 years of age who have a limitation due to a speech problem

**SkipInstructions:**

- `<1-95,D>` [goto LHCL03T]
- `<96>` [fill "6" in LHCL03T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
- `<R>` [store "R" in LHCL03T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
* Enter time period for time with speech problem.

  1  Day(s)
  2  Week(s)
  3  Month(s)
  4  Year(s)
  6  Since birth
  7  Refused
  9  Don't know

All persons less than 18 years of age who have a limitation due to a speech problem and 1-95, D was entered for the "number" part of this two-part question.

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]

<6> [goto ERR2_LHCL03T]

if (LHCL03T = 4 and LHCL03N > AGE) or (LHCL03T = 3 and LHCL03N > AGE in months) or (LHCL03T = 2 and LHCL03N > AGE in weeks), goto ERR1_LHCL03T

* Time with condition cannot be greater than age. Please correct.

* "6" not selectable.
How long [fill: have you/has ALIAS] had asthma or a breathing problem?

* Enter number for time with an asthma or breathing problem.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<table>
<thead>
<tr>
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<tbody>
<tr>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons less than 18 years of age who have a limitation due to asthma/breathing problem

<1-95,D> [goto LHCL04T]
<96> [fill "6" in LHCL04T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC; if no more persons, goto LAHCA]
<R> [store “R” in LHCL04T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
Enter time period for time with asthma or a breathing problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

* Time with condition cannot be greater than age. Please correct.
* "6" not selectable.
How long [fill1: have you/has ALIAS] had the injury that caused [fill2: your/his/her] limitation?

* Enter number for time with the injury.
* Enter '95 for 95 or more.
* Enter '96 if since birth.

<table>
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<td>Refused</td>
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<tr>
<td>99</td>
<td>Don't know</td>
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</tbody>
</table>

All persons less than 18 years of age who have a limitation due to an injury

<1-95,D> [goto LHCL06T]
<96> [fill "6" in LHCL06T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store “R” in LHCL06T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: FHS.288_02.000  Instrument Variable Name: LHCL06T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with the injury that caused [fill: your/his/her] limitation.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to an injury and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL06T]

if (LHCL06T = 4 and LHCL06N > AGE) or (LHCL06T = 3 and LHCL06N > AGE in months) or (LHCL06T = 2 and LHCL06N > AGE in weeks), goto ERR1_LHCL06T

Hard Edit:

ERR1_LHCL06T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL06T
* "6" not selectable.
### Question ID: FHS.290_01.000  Instrument Variable Name: LHCL07N  QuestionnaireFileName: Family

#### QuestionText: 1 of 2

How long [fill: have you/has ALIAS] had intellectual disability, also known as mental retardation?

* Enter number for time with intellectual disability/mental retardation.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

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<td>97</td>
<td>Refused</td>
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<tr>
<td>99</td>
<td>Don't know</td>
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</tbody>
</table>

#### UniverseText: All persons less than 18 years of age who have a limitation due to intellectual disability/mental retardation

#### SkipInstructions:

<1-95,D> [goto LHCL07T]  
<96> [fill "6" in LHCL07T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]  
<R> [store “R” in LHCL07T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
Question ID:  FHS.290_02.000  Instrument Variable Name:  LHCL07T  QuestionnaireFileName:  Family

QuestionText:  2 of 2

* Enter time period for time with intellectual disability/mental retardation.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText:  All persons less than 18 years of age who have a limitation due to intellectual disability/mental retardation and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:  <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL07T]

if (LHCL07T = 4 and LHCL07N > AGE) or (LHCL07T = 3 and LHCL07N > AGE in months) or (LHCL07T = 2 and LHCL07N > AGE in weeks), goto ERR1_LHCL07T

Hard Edit:  ERR1_LHCL07T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL07T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a developmental problem (e.g. cerebral palsy)?

* Enter number for time with a developmental problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

All persons less than 18 years of age who have a limitation due to some other developmental problem

<1-95,D> [goto LHCL08T]
<96> [fill "6" in LHCL08T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store "R" in LHCL08T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
* Enter time period for time with developmental problem (e.g. cerebral palsy).

1   Day(s)
2   Week(s)
3   Month(s)
4   Year(s)
6   Since birth
7   Refused
9   Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to some other developmental problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL08T]

if (LHCL08T = 4 and LHCL08N > AGE) or (LHCL08T = 3 and LHCL08N > AGE in months) or (LHCL08T = 2 and LHCL08N > AGE in weeks), goto ERR1_LHCL08T

Hard Edit: ERR1_LHCL08T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL08T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a mental, emotional, or behavioral problem?

* Enter number for time with a mental, emotional, or behavioral problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

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<td>01-94</td>
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<td>96</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons less than 18 years of age who have a limitation due to a mental, emotional, or behavioral problem

<1-95>D [goto LHCL09T]

<96> [fill "6" in LHCL09T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]

<R> [store “R” in LHCL09T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
Question ID: FHS.294_02.000  Instrument Variable Name: LHCL09T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with mental, emotional, or behavioral problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
5  Since birth
6  Refused
9  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a mental, emotional, or behavioral problem and 1-95, D was entered for the “number” part of this two-part question

SkipInstructions: <1-4,R,D> [go to follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA] <6> [goto ERR2_LHCL09T]

if (LHCL09T = 4 and LHCL09N > AGE) or (LHCL09T = 3 and LHCL09N > AGE in months) or (LHCL09T = 2 and LHCL09N > AGE in weeks), goto ERR1_LHCL09T

Hard Edit: ERR1_LHCL09T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL09T
* "6" not selectable.
2018 NHIS Questionnaire - Family
Family Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: FHS.296_01.000  Instrument Variable Name: LHCL10N  QuestionnaireFileName: Family

QuestionText: 1 of 2

How long [fill: have you/has ALIAS] had a bone, joint, or muscle problem?

* Enter number for time with a bone, joint, or muscle problem.
* Enter '95 for 95 or more.
* Enter '96 if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a bone, joint, or muscle problem

SkipInstructions: <1-95,D> [goto LHCL10T]
<96> [fill "6" in LHCL10T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store "R" in LHCL10T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
* Enter time period for time with bone, joint, or muscle problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a bone, joint, or muscle problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL10T]
if (LHCL10T = 4 and LHCL10N > AGE) or (LHCL10T = 3 and LHCL10N > AGE in months) or (LHCL10T = 2 and LHCL10N > AGE in weeks), goto ERR1_LHCL10T

Hard Edit: ERR1_LHCL10T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL10T
* "6" not selectable.
How long [fill: have you/has ALIAS] had epilepsy or seizures?

* Enter number for time with epilepsy or seizures.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  1-94
95    95+
96    Since birth
97    Refused
99    Don't know

All persons less than 18 years of age who have a limitation due to epilepsy or seizures

<1-95,D> [goto LHCL11T]
<96> [fill "6" in LHCL11T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store "R" in LHCL11T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
**Question ID:** FHS.298_02.000  **Instrument Variable Name:** LHCL11T  **QuestionnaireFileName:** Family

**QuestionText:**

2 of 2

* Enter time period for time with epilepsy or seizures.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

**UniverseText:** All persons less than 18 years of age who have a limitation due to epilepsy or seizures and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]

<6> [goto ERR2_LHCL11T]

if (LHCL11T = 4 and LHCL11N > AGE) or (LHCL11T = 3 and LHCL11N > AGE in months) or (LHCL11T = 2 and LHCL11N > AGE in weeks), goto ERR1_LHCL11T

**Hard Edit:**

ERR1_LHCL11T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHCL11T

* "6" not selectable.
How long [fill: have you/has ALIAS] had a learning disability?

* Enter number for time with a learning disability.
* Enter '95 for 95 or more.
* Enter '96 if since birth.

<table>
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<tr>
<th>Code</th>
<th>Description</th>
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<td>97</td>
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</tr>
<tr>
<td>99</td>
<td>Don't know</td>
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</tbody>
</table>

All persons less than 18 years of age who have a limitation due to a learning disability

<1-95,D> [goto LHCL12T]
<96> [fill "6" in LHCL12T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store "R" in LHCL12T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
* Enter time period for time with learning disability.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
5  Since birth
6  Refused
7  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to a learning disability and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL12T]

if (LHCL12T = 4 and LHCL12N > AGE) or (LHCL12T = 3 and LHCL12N > AGE in months) or (LHCL12T = 2 and LHCL12N > AGE in weeks), goto ERR1_LHCL12T

Hard Edit: ERR1_LHCL12T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL12T
* "6" not selectable.
**Question ID:** FHS.302_01.000  
**Instrument Variable Name:** LHCL13N  
**QuestionnaireFileName:** Family

**QuestionText:** 1 of 2

How long [fill: have you/has ALIAS] had attention deficit/hyperactivity disorder?

* Enter number for time with attention deficit/hyperactivity disorder.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94  
95 95+  
96 Since birth  
97 Refused  
99 Don't know

**UniverseText:** All persons less than 18 years of age who have a limitation due to Attention Deficit/Hyperactivity Disorder

**SkipInstructions:**  
<1-95,D> [goto LHCL13T]  
<96> [fill "6" in LHCL13T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]  
<R> [store "R" in LHCL13T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
**2018 NHIS Questionnaire - Family**

**Family Health Status & Limitations**

**Document Version Date:** 12-Jun-19

<table>
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<tr>
<th>Question ID:</th>
<th>FHS.302_02.000</th>
<th>Instrument Variable Name:</th>
<th>LHCL13T</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
</table>

**QuestionText:**

2 of 2

* Enter time period for time with attention deficit/hyperactivity disorder.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

**UniverseText:** All persons less than 18 years of age who have a limitation due to Attention Deficit/Hyperactivity Disorder and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]  
<6> [goto ERR2_LHCL13T]  
if (LHCL13T = 4 and LHCL13N > AGE) or (LHCL13T = 3 and LHCL13N > AGE in months) or (LHCL13T = 2 and LHCL13N > AGE in weeks), goto ERR1_LHCL13T

**Hard Edit:**

ERR1_LHCL13T  
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL13T  
* "6" not selectable.
How long [fill1: have you/has ALIAS] had [fill2: problem in LAHCC_S1]?

* Enter number for time with [fill1: problem in LAHCC_S1]?
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95  95+
96  Since birth
97  Refused
99  Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to the problem entered at LAHCC_S1
2 of 2

* Enter time period for time with [fill: problem in LAHCC_S1].

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

All persons less than 18 years of age who have a limitation due to the problem entered at LAHCC_S1 and 1-95, D was entered for the "number" part of this two-part question

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL90T]

if (LHCL90T = 4 and LHCL90N > AGE) or (LHCL90T = 3 and LHCL90N > AGE in months) or (LHCL90T = 2 and LHCL90N > AGE in weeks), goto ERR1_LHCL90T

ERR1_LHCL90T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL90T
* "6" not selectable.
How long [fill1: have you/has ALIAS] had [fill2: problem in LAHCC_S2]?

* Enter number for time [fill1: problem in LAHCC_S2].
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Option</th>
<th>Response</th>
</tr>
</thead>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons less than 18 years of age who have a limitation due to the problem entered at LAHCC_S2

<1-95,D> [goto LHCL91T]
<96> [fill "6" in LHCL91T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<R> [store "R" in LHCL91T and goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
2 of 2

* Enter time period for time with [fill: problem in LAHCC_S2].

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText:
All persons less than 18 years of age who have a limitation due to the problem entered at LAHCC_S2 and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCC; if no more conditions, goto LAHCC for next person less than 18 years of age with a reported limitation; if no more persons, goto LAHCA]
<6> [goto ERR2_LHCL91T]

if (LHCL91T = 4 and LHCL91N > AGE) or (LHCL91T = 3 and LHCL91N > AGE in months) or (LHCL91T = 2 and LHCL91N > AGE in weeks), goto ERR1_LHCL91T

Hard Edit:
ERR1_LHCL91T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHCL91T
* "6" not selectable.
What conditions or health problems cause [fill: your/ALIAS’s] limitations?

* Enter all that apply, separate with commas.
* Do not probe except to clarify answer.

- 01 Vision/problem seeing
- 02 Hearing problem
- 03 Arthritis/rheumatism
- 04 Back or neck problem
- 05 Fracture, bone/joint injury
- 06 Other injury
- 07 Heart problem
- 08 Stroke problem
- 09 Hypertension/high blood pressure
- 10 Diabetes
- 11 Lung/breathing problem (for example, asthma and emphysema)
- 12 Cancer
- 13 Birth defect
- 14 Intellectual disability, also known as mental retardation
- 15 Other developmental problem (for example cerebral palsy)
- 16 Senility
- 17 Depression/anxiety/emotional problem
- 18 Weight problem
- 19 Missing limbs (fingers, toes or digits), amputee
- 20 Kidney, bladder or renal problems
- 21 Circulation problems (including blood clots)
- 22 Benign tumors, cysts
- 23 Fibromyalgia, lupus
- 24 Osteoporosis, tendinitis
- 25 Epilepsy, seizures
- 26 Multiple Sclerosis (MS), Muscular Dystrophy (MD)
- 27 Polio(myelitis), paralysis, para/quadriplegia
- 28 Parkinson's disease, other tremors
- 29 Other nerve damage, including carpal tunnel syndrome
- 30 Hernia
- 31 Ulcer
- 32 Varicose veins, hemorrhoids
- 33 Thyroid problems, Grave's disease, gout
- 34 Knee problems (not arthritis (03), not joint injury(05))
- 35 Migraine headaches (not just headaches)
- 90 Other impairment/problem (Specify one)
- 91 Other impairment/problem (Specify one)
- 97 Refused
- 99 Don't know/not sure
UniverseText: All persons 18 years of age or older who have at least one reported limitation

SkipInstructions: <1-12,14-35> [goto appropriate follow-up questions: LHAL01N - LHAL12N, LHAL14N - LHAL35N]
              <13> [fill "96" in LHAL13N and fill "6" in LHAL13T]
              <90> [goto LAHCA_S1]
              <91> [goto LAHCA_S2]
              <R,D> [repeat this question for the next person 18 years of age or older with a reported limitation; if no more persons 18 years of age or older with a reported limitation, goto PHSTAT]

NOTE: This question and all appropriate follow-up questions are asked, in sequence, for each person 18 years of age or older with a reported limitation. The instrument then proceeds to PHSTAT.

Question ID: FHS.351_90.000  Instrument Variable Name: LAHCA_S1  QuestionnaireFileName: Family
QuestionText: * Read if necessary.

Verbatim response

7 Refused
9 Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to at least one condition not listed at LAHCC

SkipInstructions: goto LHAL90N

Question ID: FHS.351_91.000  Instrument Variable Name: LAHCA_S2  QuestionnaireFileName: Family
QuestionText: * Read if necessary.

Verbatim response

7 Refused
9 Don't know

UniverseText: All persons less than 18 years of age who have a limitation due to at least one condition not listed at LAHCC

SkipInstructions: goto LHAL91N
How long [fill: have you/has ALIAS] had a vision problem or problem seeing?

* Enter number for time with a vision problem or problem seeing.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>01-94</th>
<th>1-94</th>
</tr>
</thead>
<tbody>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to a vision problem or problem seeing

SkipInstructions:

<1-95,D> [goto LHAL01T]

<96> [fill "6" in LHAL01T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<R> [store "R" in LHAL01T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**Question Text:**

* Enter time period for time with vision problem or problem seeing.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don’t know

**UniverseText:**

All persons 18 years of age or older who have a limitation due to a vision problem or problem seeing and 1-95, D was entered for the "number" part of this two-part question

**Skip Instructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL01T]

if LHAL01T = 4 and LHAL01N > AGE, goto ERR1_LHAL01T

**Hard Edit:**

ERR1_LHAL01T
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL01T
* "6" not selectable.
<table>
<thead>
<tr>
<th>Question ID: FHS.362_01.000</th>
<th>Instrument Variable Name: LHAL02N</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
</table>

**QuestionText:**

1 of 2

How long [fill: have you/has ALIAS] had a hearing problem?

* Enter number for time with a hearing problem.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<p>| | |</p>
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<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
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<td>95+</td>
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<tr>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**

All persons 18 years of age or older who have a limitation due to a hearing problem

**SkipInstructions:**

<1-95,D> [goto LHAL02T]
<96> [fill "6" in LHAL02T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL02T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with hearing problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

**UniverseText:** All persons 18 years of age or older who have a limitation due to a hearing problem and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:** <1-4.R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL02T]

if LHAL02T = 4 and LHAL02N > AGE, goto ERR1_LHAL02T

**Hard Edit:**

ERR1_LHAL02T
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL02T
* "6" not selectable.
How long have you had arthritis or rheumatism?

* Enter number for time with arthritis or rheumatism.
* Enter '95 for 95 or more.
* Enter '96 if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to arthritis/rheumatism

<1-95,D> [goto LHAL03T]
<96> [fill "6" in LHAL03T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL03T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with arthritis or rheumatism.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

All persons 18 years of age or older who have a limitation due to arthritis/rheumatism and 1-95, D was entered for the "number" part of this two-part question

if LHAL03T = 4 and LHAL03N > AGE, goto ERR1_LHAL03T

* Time with condition cannot be greater than age. Please correct.

* "6" not selectable.
How long [fill: have you/has ALIAS] had a back or neck problem?

* Enter number for time with a back or neck problem.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
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</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to a back or neck problem

<1-95,D> [goto LHAL04T]
<96> [fill "6" in LHAL04T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**Question ID:** FHS.366_02.000  **Instrument Variable Name:** LHAL04T  **QuestionnaireFileName:** Family

**QuestionText:** 2 of 2

* Enter time period for time with back or neck problem.

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<tr>
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<td>2</td>
<td>Week(s)</td>
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<td>3</td>
<td>Month(s)</td>
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<td>4</td>
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<td>6</td>
<td>Refused</td>
</tr>
<tr>
<td>7</td>
<td>Don't know</td>
</tr>
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</table>

**UniverseText:** All persons 18 years of age or older who have a limitation due to a back or neck problem and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:** <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] <6> [goto ERR2_LHAL04T]

if LHAL04T = 4 and LHAL04N > AGE, goto ERR1_LHAL04T

**Hard Edit:**

- **ERR1_LHAL04T**
  * Time with condition cannot be greater than age. Please correct.
- **ERR2_LHAL04T**
  * "6" not selectable.
How long [fill: have you/has ALIAS] had a fracture, bone, or joint injury?

* Enter number for time with a fracture, bone or joint injury.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to a fracture or bone/joint injury
2 of 2

* Enter time period for time with fracture, bone, or joint injury.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to a fracture or bone/joint injury and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL05T]

if LHAL05T = 4 and LHAL05N > AGE, goto ERR1_LHAL05T

Hard Edit: ERR1_LHAL05T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL05T
* "6" not selectable.
How long [fill1: have you/has ALIAS] had the other injury that caused [fill2: your/his/her] limitation?

* Enter number for time with the injury.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

01-94  01-94
95   95+
96  Since birth
97   Refused
99  Don't know

All persons 18 years of age or older who have a limitation due to some "other" injury
2018 NHIS Questionnaire - Family
Family Health Status & Limitations

Question ID: FHS.370_02.000  Instrument Variable Name: LHAL06T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with other injury that caused [fill: your/his/her] limitation.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to some "other" injury and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] <6> [goto ERR2_LHAL06T]

if LHAL06T = 4 and LHAL06N > AGE, goto ERR1_LHAL06T

Hard Edit:

ERR1_LHAL06T
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL06T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a heart problem?

* Enter number for time with a heart problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
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<tbody>
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<td>Since birth</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons 18 years of age or older who have a limitation due to a heart problem

SkipInstructions:

<1-95.D> [goto LHAL07T]
<96> [fill "6" in LHAL07T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL07T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
QuestionID:  FHS.372_02.000  Instrument Variable Name:  LHAL07T  QuestionnaireFileName:  Family

QuestionText:  2 of 2

* Enter time period for time with heart problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText:  All persons 18 years of age or older who have a limitation due to a heart problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:  <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL07T]

if LHAL07T = 4 and LHAL07N > AGE, goto ERR1_LHAL07T

Hard Edit:

ERR1_LHAL07T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL07T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a stroke problem?

* Enter number for time with a stroke problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95  95+
96  Since birth
97  Refused
99  Don't know

All persons 18 years of age or older who have a limitation due to a stroke problem

<1-95,D> [goto LHAL08T]
<96> [fill "6" in LHAL08T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL08T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
Question ID: FHS.374_02.000  Instrument Variable Name: LHAL08T  QuestionnaireFileName: Family

QuestionText:
2 of 2

* Enter time period for time with stroke problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to a stroke problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL08T]
if LHAL08T = 4 and LHAL08N > AGE, goto ERR1_LHAL08T

Hard Edit:
ERR1_LHAL08T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL08T
* "6" not selectable.
How long [fill: have you/has ALIAS] had hypertension or high blood pressure?

* Enter number for time with hypertension or high blood pressure.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons 18 years of age or older who have a limitation due to hypertension/high blood pressure
### Question Text

* Enter time period for time with hypertension or high blood pressure.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don't know

### Universe Text

All persons 18 years of age or older who have a limitation due to hypertension/high blood pressure and 1-95, D was entered for the "number" part of this two-part question

### SkipInstructions

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL09T]

if LHAL09T = 4 and LHAL09N > AGE, goto ERR1_LHAL09T

### Hard Edit

- ERR1_LHAL09T
  * Time with condition cannot be greater than age. Please correct.
- ERR2_LHAL09T
  * "6" not selectable.
How long [fill: have you/has ALIAS] had diabetes?

* Enter number for time with diabetes.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

01-94  01-94
95     95+
96     Since birth
97     Refused
99     Don’t know

All persons 18 years of age or older who have a limitation due to diabetes

<1-95,D> [goto LHAL10T]
<96> [fill "6" in LHAL10T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store “R” in LHAL10T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**Question Text:**

2 of 2

* Enter time period for time with diabetes.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

**UniverseText:**

All persons 18 years of age or older who have a limitation due to diabetes and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL10T]

if LHAL10T = 4 and LHAL10N > AGE, goto ERR1_LHAL10T

**Hard Edit:**

ERR1_LHAL10T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL10T

* "6" not selectable.
How long [fill: have you/has ALIAS] had a lung problem or breathing problem (e.g., asthma and emphysema)?

* Enter number for time with a lung problem or breathing problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  1-94
95   95+
96  Since birth
97     Refused
99     Don't know

All persons 18 years of age or older who have a limitation due to a lung/breathing problem
2 of 2

* Enter time period for time with lung problem or breathing problem (e.g., asthma and emphysema).

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to a lung/breathing problem and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] <6> [goto ERR2_LHAL11T]

if LHAL11T = 4 and LHAL11N > AGE, goto ERR1_LHAL11T

Hard Edit:

ERR1_LHAL11T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL11T
* "6" not selectable.
How long [fill: have you/has ALIAS] had cancer?
* Enter number for time with cancer.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 18 years of age or older who have a limitation due to cancer

**SkipInstructions:**
- `<1-95,D>` [goto LHAL12T]
- `<96>` [fill "6" in LHAL12T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
- `<R>` [store "R" in LHAL12T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**Question ID:** FHS.382_02.000  **Instrument Variable Name:** LHAL12T  **QuestionnaireFileName:** Family

**QuestionText:**

2 of 2

* Enter time period for time with cancer.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don't know

**UniverseText:** All persons 18 years of age or older who have a limitation due to cancer and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL12T]

if LHAL12T = 4 and LHAL12N > AGE, goto ERR1_LHAL12T

**Hard Edit:**

ERR1_LHAL12T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL12T

* "6" not selectable.
How long [fill: have you/has ALIAS] had intellectual disability, also known as mental retardation?

* Enter number for time with intellectual disability/mental retardation.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to intellectual disability/mental retardation

SkipInstructions: <1-95,D> [goto LHAL14T]
<96> [fill "6" in LHAL14T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL14T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2 of 2

* Enter time period for time with intellectual disability/mental retardation.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText:  All persons 18 years of age or older who have a limitation due to intellectual disability/mental retardation and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:  <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]  
<6> [goto ERR2_LHAL14T]

if LHAL14T = 4 and LHAL14N > AGE, goto ERR1_LHAL14T

Hard Edit:  
ERR1_LHAL14T  
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL14T  
* "6" not selectable.
1 of 2

How long [fill: have you/has ALIAS] had a developmental problem (e.g. cerebral palsy)?

* Enter number for time with a developmental problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to some other developmental problem

SkipInstructions: <1-95,D> [goto LHAL15T]
<96> [fill "6" in LHAL15T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL15T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with developmental problem (e.g. cerebral palsy).

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don’t know

**UniverseText:**
All persons 18 years of age or older who have a limitation due to some other developmental problem and 1-95, D was entered for the "number" part of this two-part question.

**SkipInstructions:**
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL15T]

if LHAL15T = 4 and LHAL15N > AGE, goto ERR1_LHAL15T

**Hard Edit:**
ERR1_LHAL15T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL15T
* "6" not selectable.
How long [fill: have you/has ALIAS] had senility?

* Enter number for time with senility.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

All persons 18 years of age or older who have a limitation due to senility

<1-95,D> [goto LHAL16T]
<96> [fill "6" in LHAL16T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL16T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
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Question ID: FHS.388_02.000  Instrument Variable Name: LHAL16T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with senility.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to senility and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL16T]

if LHAL16T = 4 and LHAL16N > AGE, goto ERR1_LHAL16T

Hard Edit: ERR1_LHAL16T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL16T
* "6" not selectable.
How long [fill: have you/has ALIAS] had depression, anxiety, or an emotional problem?

* Enter number for time with depression, anxiety or an emotional problem.
* Enter '95 for 95 or more.
* Enter '96 if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to depression/anxiety/emotional problem

<1-95,D> [goto LHAL17T]
<96> [fill "6" in LHAL17T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL17T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with depression, anxiety, or an emotional problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to depression/anxiety/emotional problem and 1-95, D was entered for the "number" part of this two-part question.

Hard Edit:
- ERR1_LHAL17T
  * Time with condition cannot be greater than age. Please correct.
- ERR2_LHAL17T
  * "6" not selectable.
How long [fill: have you/has ALIAS] had a weight problem?

* Enter number for time with a weight problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons 18 years of age or older who have a limitation due to a weight problem.
### Question Text:

* Enter time period for time with weight problem.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

### Universe Text:

All persons 18 years of age or older who have a limitation due to a weight problem and 1-95, D was entered for the "number" part of this two-part question

### Skip Instructions:

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL18T]

if LHAL18T = 4 and LHAL18N > AGE, goto ERR1_LHAL18T

---

### Hard Edit:

ERR1_LHAL18T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL18T

* "6" not selectable.
How long [fill: have you/has ALIAS] had a missing limb (finger, toe, or digit)?

* Enter number for time with a missing limb.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94   1-94
95      95+
96      Since birth
97      Refused
99      Don't know

All persons 18 years of age or older who have a limitation due to missing limbs

<1-95,D> [goto LHAL19T]
<96> [fill "6" in LHAL19T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL19T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHS.394_02.000</th>
<th>Instrument Variable Name:</th>
<th>LHAL19T</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>2 of 2</td>
<td>* Enter time period for time with missing limb (finger, toe, or digit).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>Day(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>Week(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Month(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Year(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Since birth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>All persons 18 years of age or older who have a limitation due to missing limbs and 1-95, D was entered for the &quot;number&quot; part of this two-part question</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-4,R,D&gt; [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] &lt;6&gt; [goto ERR2_LHAL19T] if LHAL19T = 4 and LHAL19N &gt; AGE, goto ERR1_LHAL19T</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hard Edit:</td>
<td>ERR1_LHAL19T</td>
<td>* Time with condition cannot be greater than age. Please correct.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ERR2_LHAL19T</td>
<td>* &quot;6&quot; not selectable.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How long [fill: have you/has ALIAS] had a kidney, bladder or renal problem?

* Enter number for time with a kidney, bladder or renal problem.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to a kidney, bladder, or renal problem

<1-95,D> [goto LHAL20T]
<96> [fill "6" in LHAL20T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL20T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**Question ID:** FHS.396_02.000  
**Instrument Variable Name:** LHAL20T  
**QuestionnaireFileName:** Family

**QuestionText:**
2 of 2

* Enter time period for time with kidney, bladder or renal problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

**UniverseText:** All persons 18 years of age or older who have a limitation due to a kidney, bladder, or renal problem and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL20T]

if LHAL20T = 4 and LHAL20N > AGE, goto ERR1_LHAL20T

**Hard Edit:**
ERR1_LHAL20T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL20T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a circulation problem (including blood clots)?

* Enter number for time with a circulation problem.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
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<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 18 years of age or older who have a limitation due to circulation problems

**SkipInstructions:**
- `<1-95,D>` [goto LHAL21T]
- `<96>` [fill "6" in LHAL21T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
- `<R>` [store "R" in LHAL21T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with circulation problem (including blood clots).

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to circulation problems and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL21T]

if LHAL21T = 4 and LHAL21N > AGE, goto ERR1_LHAL21T

Hard Edit: ERR1_LHAL21T
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL21T
* "6" not selectable.
How long [fill: have you/has ALIAS] had benign tumors or cysts?

* Enter number for time with benign tumors or cysts.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>1-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
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<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to benign tumors or cysts

<1-95.D> [goto LHAL22T]

<96> [fill "6" in LHAL22T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<R> [store "R" in LHAL22T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations

Document Version Date: 12-Jun-19

**Question Text:**

2 of 2

* Enter time period for time with benign tumors or cysts.

- 1 Day(s)
- 2 Week(s)
- 3 Month(s)
- 4 Year(s)
- 6 Since birth
- 7 Refused
- 9 Don't know

**Universe Text:**

All persons 18 years of age or older who have a limitation due to benign tumors or cysts and 1-95, D was entered for the "number" part of this two-part question

**Skip Instructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL22T]

if LHAL22T = 4 and LHAL22N > AGE, goto ERR1_LHAL22T

**Hard Edit:**

ERR1_LHAL22T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL22T

* "6" not selectable.
How long [fill: have you/has ALIAS] had fibromyalgia or lupus?

* Enter number for time with fibromyalgia or lupus.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
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<td>95+</td>
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<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to fibromyalgia or lupus

<1-95,D> [goto LHAL23T]
<96> [fill "6" in LHAL23T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL23T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**2018 NHIS Questionnaire - Family**

**Family Health Status & Limitations**

**Document Version Date:** 12-Jun-19

<table>
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<tr>
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<th>FHS.402_02.000</th>
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<th>LHAL23T</th>
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<td>2 of 2</td>
<td>* Enter time period for time with fibromyalgia or lupus.</td>
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<tr>
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</tr>
<tr>
<td>7</td>
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<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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</tbody>
</table>

**UniverseText:**
All persons 18 years of age or older who have a limitation due to fibromyalgia or lupus and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL23T]
if LHAL23T = 4 and LHAL23N > AGE, goto ERR1_LHAL23T

**Hard Edit:**
- ERR1_LHAL23T
  * Time with condition cannot be greater than age. Please correct.
- ERR2_LHAL23T
  * "6" not selectable.
How long [fill: have you/has ALIAS] had osteoporosis or tendinitis?

* Enter number for time with osteoporosis or tendinitis.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

All persons 18 years of age or older who have a limitation due to osteoporosis or tendinitis

<1-95,D> [goto LHAL24T]
<96> [fill "6" in LHAL24T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL24T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: FHS.404_02.000  Instrument Variable Name: LHAL24T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with osteoporosis or tendinitis.

1 Day(s)
2 Week(s)
3 Month(s)
4 Year(s)
6 Since birth
7 Refused
9 Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to osteoporosis or tendinitis and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL24T]
if LHAL24T = 4 and LHAL24N > AGE, goto ERR1_LHAL24T

Hard Edit:

ERR1_LHAL24T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL24T
* "6" not selectable.
How long [fill: have you/has ALIAS] had epilepsy or seizures?

* Enter number for time with epilepsy or seizures.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  1-94
95     95+
96     Since birth
97     Refused
99     Don't know

All persons 18 years of age or older who have a limitation due to epilepsy or seizures

<1-95.D> [goto LHAL25T]
<96> [fill "6" in LHAL25T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL25T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family

Family Health Status & Limitations

Document Version Date: 12-Jun-19

Question ID: FHS.406_02.000
Instrument Variable Name: LHAL25T
QuestionnaireFileName: Family

QuestionText:

2 of 2

* Enter time period for time with epilepsy or seizures.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to epilepsy or seizures and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] <6> [goto ERR2_LHAL25T]

if LHAL25T = 4 and LHAL25N > AGE, goto ERR1_LHAL25T

Hard Edit:

ERR1_LHAL25T
* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL25T
* "6" not selectable.
How long [fill: have you/has ALIAS] had multiple sclerosis (MS) or muscular dystrophy (MD)?

* Enter number for time with multiple sclerosis (MS) or muscular dystrophy (MD)?
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
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<td>95</td>
<td>95+</td>
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<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
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</table>

All persons 18 years of age or older who have a limitation due to multiple sclerosis or muscular dystrophy

<1-95.D> [goto LHAL26T]
<96> [fill "6" in LHAL26T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL26T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with multiple sclerosis (MS) or muscular dystrophy (MD).

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

**UniverseText:** All persons 18 years of age or older who have a limitation due to multiple sclerosis or muscular dystrophy and 1-95, D was entered for the "number" part of this two-part question.

**SkipInstructions:** <1-4.R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
6> [goto ERR2_LHAL26T]

**Hard Edit:**
- ERR1_LHAL26T
  * Time with condition cannot be greater than age. Please correct.
- ERR2_LHAL26T
  * "6" not selectable.
How long [fill: have you/has ALIAS] had polio(myelitis), paralysis or para/quadriplegia?

* Enter number for time with polio (myelitis) paralysis or para/quadriplegia.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tr>
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<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to polio, paralysis, or para/quadriplegia

<1-95,D> [goto LHAL27T]
<96> [fill "6" in LHAL27T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL27T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with polio(myelitis), paralysis or para/quadriplegia.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don't know

All persons 18 years of age or older who have a limitation due to polio, paralysis, or para/quadriplegia and 1-95, D was entered for the "number" part of this two-part question

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL27T]

if LHAL27T = 4 and LHAL27N > AGE, goto ERR1_LHAL27T

* Time with condition cannot be greater than age. Please correct.
* "6" not selectable.
How long [fill: have you/has ALIAS] had Parkinson’s disease or tremors?

* Enter number for time with Parkinson's disease or tremors.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to Parkinson's disease or other tremors

<1-95,D> [goto LHAL28T]
<96> [fill "6" in LHAL28T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL28T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**QuestionText:** 2 of 2

* Enter time period for time with Parkinson’s disease or tremors.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don’t know

**UniverseText:** All persons 18 years of age or older who have a limitation due to Parkinson's disease or other tremors and 1-95, D was entered for the ”number” part of this two-part question

**SkipInstructions:** `<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]` 

`<6> [goto ERR2_LHAL28T]`

if LHAL28T = 4 and LHAL28N > AGE, goto ERR1_LHAL28T

**Hard Edit:**

ERR1_LHAL28T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL28T

* "6" not selectable.
How long [fill: have you/has ALIAS] had nerve damage (including carpal tunnel syndrome)?

* Enter number for time with nerve damage.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

<table>
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<tr>
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<th>Text</th>
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<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to other nerve damage, including carpal tunnel syndrome

<1-95,D> [goto LHAL29T]
<96> [fill "6" in LHAL29T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL29T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
**2018 NHIS Questionnaire - Family**

**Family Health Status & Limitations**

Document Version Date: 12-Jun-19

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<th>LHAL29T</th>
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</tr>
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</table>

**QuestionText:**

2 of 2

* Enter time period for time with nerve damage (including carpal tunnel syndrome).

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
9. Don't know

**UniverseText:**

All persons 18 years of age or older who have a limitation due to other nerve damage, including carpal tunnel syndrome, and 1-95, D was entered for the "number" part of this two-part question.

**SkipInstructions:**

<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]

<6> [goto ERR2_LHAL29T]

if LHAL29T = 4 and LHAL29N > AGE, goto ERR1_LHAL29T

**Hard Edit:**

ERR1_LHAL29T

* Time with condition cannot be greater than age. Please correct.

ERR2_LHAL29T

* "6" not selectable.
How long [fill: have you/has ALIAS] had a hernia?

* Enter number for time with a hernia.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

All persons 18 years of age or older who have a limitation due to a hernia

<1-95,D> [goto LHAL30T]
<96> [fill "6" in LHAL30T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL30T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
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<td>* Enter time period for time with hernia.</td>
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<td>Year(s)</td>
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<td></td>
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<td>Since birth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
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<td>All persons 18 years of age or older who have a limitation due to a hernia and 1-95, D was entered for the &quot;number&quot; part of this two-part question</td>
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<td>SkipInstructions:</td>
<td>&lt;1-4,R,D&gt; [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT] &lt;6&gt; [goto ERR2_LHAL30T] if LHAL30T = 4 and LHAL30N &gt; AGE, goto ERR1_LHAL30T</td>
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<td></td>
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<td>Hard Edit:</td>
<td>ERR1_LHAL30T</td>
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<tr>
<td>* Time with condition cannot be greater than age. Please correct.</td>
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<tr>
<td>QuestionText:</td>
<td>1 of 2</td>
<td></td>
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</tr>
</tbody>
</table>

How long [fill: have you/has ALIAS] had an ulcer?

* Enter number for time with an ulcer.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
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<th>Code</th>
<th>Value</th>
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</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons 18 years of age or older who have a limitation due to an ulcer

SkipInstructions:  
<1-95,D> [goto LHAL31T]  
<96> [fill "6" in LHAL31T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]  
<R> [store "R" in LHAL31T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with ulcer.

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Day(s)</td>
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<tr>
<td>2</td>
<td>Week(s)</td>
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<td>Month(s)</td>
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<td>4</td>
<td>Year(s)</td>
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<td>6</td>
<td>Since birth</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All persons 18 years of age or older who have a limitation due to an ulcer and 1-95, D was entered for the "number" part of this two-part question

**SkipInstructions:**
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL31T]

if LHAL31T = 4 and LHAL31N > AGE, goto ERR1_LHAL31T

**Hard Edit:**
ERR1_LHAL31T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL31T
* "6" not selectable.
How long [fill: have you/has ALIAS] had varicose veins or hemorrhoids?

* Enter number for time with varicose veins or hemorrhoids.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to varicose veins or hemorrhoids

<1-95,D> [goto LHAL32T]
<96> [fill "6" in LHAL32T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL32T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2 of 2

* Enter time period for time with varicose veins or hemorrhoids.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText:
All persons 18 years of age or older who have a limitation due to varicose veins or hemorrhoids and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions:
<1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL32T]

if LHAL32T = 4 and LHAL32N > AGE, goto ERR1_LHAL32T

Hard Edit:
ERR1_LHAL32T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL32T
* "6" not selectable.
How long [fill: have you/has ALIAS] had a thyroid problem, Grave’s disease or gout?

* Enter number for time with a thyroid problem, Grave's disease or gout.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94  01-94
95    95+
96    Since birth
97    Refused
99    Don't know

All persons 18 years of age or older who have a limitation due to thyroid problems, Grave's disease, or gout

<1-95,D> [goto LHAL33T]
<96> [fill "6" in LHAL33T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL33T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
* Enter time period for time with thyroid problem, Grave’s disease or gout.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
6. Since birth
7. Refused
9. Don’t know

All persons 18 years of age or older who have a limitation due to thyroid problems, Grave's disease, or gout and 1-95, D was entered for the "number" part of this two-part question.

If LHAL33T = 4 and LHAL33N > AGE, goto ERR1_LHAL33T

* Time with condition cannot be greater than age. Please correct.

* "6" not selectable.
How long [fill: have you/has ALIAS] had a knee problem?

* Enter number for time with a knee problem.
* Enter ‘95’ for 95 or more.
* Enter ‘96’ if since birth.

01-94 1-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to knee problems

<1-95,D> [goto LHAL34T]
<96> [fill "6" in LHAL34T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL34T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: FHS.424_02.000  Instrument Variable Name: LHAL34T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with knee problem.

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to knee problems and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL34T]

if LHAL34T = 4 and LHAL34N > AGE, goto ERR1_LHAL34T

Hard Edit: ERR1_LHAL34T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL34T
* "6" not selectable.
How long [fill: have you/has ALIAS] had migraine headaches?

* Enter number for time with migraine headaches.
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

All persons 18 years of age or older who have a limitation due to migraine headaches
* Enter time period for time with migraine headaches.

1. Day(s)
2. Week(s)
3. Month(s)
4. Year(s)
5. Since birth
6. Refused
7. Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to migraine headaches and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL35T]

if LHAL35T = 4 and LHAL35N > AGE, goto ERR1_LHAL35T

Hard Edit: ERR1_LHAL35T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL35T
* "6" not selectable.
How long [fill1: have you/has ALIAS] had [fill2: LAHCA_S1]?

* Enter number for time with [fill1: LAHCA_S1].
* Enter '95' for 95 or more.
* Enter '96' if since birth.

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-94</td>
<td>01-94</td>
</tr>
<tr>
<td>95</td>
<td>95+</td>
</tr>
<tr>
<td>96</td>
<td>Since birth</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons 18 years of age or older who have a limitation due to the problem entered at LAHCA_S1

SkipInstructions:
- `<1-95,D>` [goto LHAL90T]
- `<96>` [fill "6" in LHAL90T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
- `<R>` [store "R" in LHAL90T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHS.450_02.000</th>
<th>Instrument Variable Name:</th>
<th>LHAL90T</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>2 of 2</td>
<td>* Enter time period for time with [fill: LAHCA_S1].</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Day(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Week(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Month(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Year(s)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Since birth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>All persons 18 years of age or older who have a limitation due to the problem entered at LAHCA_S1 and 1-95, D was entered for the &quot;number&quot; part of this two-part question</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1-4,R,D&gt; [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]</td>
<td>&lt;6&gt; [goto ERR2_LHAL90T]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hard Edit:</td>
<td>ERR1_LHAL90T</td>
<td>* Time with condition cannot be greater than age. Please correct.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>ERR2_LHAL90T</td>
<td>* &quot;6&quot; not selectable.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How long [fill1: have you/has ALIAS] had [fill2: LAHCA_S2]?

* Enter number for time with [fill1: LAHCA_S2].
* Enter '95' for 95 or more.
* Enter '96' if since birth.

01-94 01-94
95 95+
96 Since birth
97 Refused
99 Don't know

All persons 18 years of age or older who have a limitation due to the problem entered at LAHCA_S2

<1-95,D> [goto LHAL91T]
<96> [fill "6" in LHAL91T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<R> [store "R" in LHAL91T and goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
2018 NHIS Questionnaire - Family
Family Health Status & Limitations
Document Version Date: 12-Jun-19

Question ID: FHS.452_02.000  Instrument Variable Name: LHAL91T  QuestionnaireFileName: Family

QuestionText: 2 of 2

* Enter time period for time with [fill: LAHCA_S2].

1  Day(s)
2  Week(s)
3  Month(s)
4  Year(s)
6  Since birth
7  Refused
9  Don't know

UniverseText: All persons 18 years of age or older who have a limitation due to the problem entered at LAHCA_S2 and 1-95, D was entered for the "number" part of this two-part question

SkipInstructions: <1-4,R,D> [goto follow-up questions for next condition selected at LAHCA; if no more conditions, goto LAHCA for next person 18 years of age or older with a reported limitation; if no more persons, goto PHSTAT]
<6> [goto ERR2_LHAL91T]
if LHAL91T = 4 and LHAL91N > AGE, goto ERR1_LHAL91T

Hard Edit:
ERR1_LHAL91T
* Time with condition cannot be greater than age. Please correct.
ERR2_LHAL91T
* "6" not selectable.

Question ID: FHS.500_00.000  Instrument Variable Name: PHSTAT  QuestionnaireFileName: Family

QuestionText: Would you say [fill: your/ALIAS's] health in general is excellent, very good, good, fair, or poor?

1  Excellent
2  Very good
3  Good
4  Fair
5  Poor
7  Refused
9  Don't know

UniverseText: All persons

SkipInstructions: repeat for all persons in the family, goto FINJ3M
These next questions are about whether you were always able to afford the food you needed in the last 30 days. I'm going to read you several statements that people have made about their food situation. For these statements, please tell me whether the statement was often true, sometimes true, or never true for [fill 1: you/your family] in the last 30 days.

The first statement is "[fill 2: I/We] worried whether [fill 3: my/our] food would run out before [fill 4: I/we] got money to buy more." Was that often true, sometimes true, or never true for [fill 1: you/your family] in the last 30 days?

1. Often true
2. Sometimes true
3. Never true
7. Refused
9. Don't know

All families

<1-3,R,D> goto FSLAST
### NHIS Questionnaire - Family

#### Family Food Security

**Document Version Date:** 05-Jun-19

---

**Question ID:** FFS.030_00.000  
**Instrument Variable Name:** FSBALANC  
**QuestionnaireFileName:** Family

**QuestionText:**  
"[fill 1: I/We] couldn’t afford to eat balanced meals.” Was that often true, sometimes true, or never true for [fill 2: you/your family] in the last 30 days?

- 1: Often true
- 2: Sometimes true
- 3: Never true
- 7: Refused
- 9: Don’t know

**UniverseText:** All families

**SkipInstructions:**  
<1,2> [goto FSSKIP]  
<3,D,R> [if FSRUNOUT in(1,2) or FSLAST in(1,2), goto FSSKIP; else goto FINJ3M]

---

**Question ID:** FFS.040_00.000  
**Instrument Variable Name:** FSSKIP  
**QuestionnaireFileName:** Family

**QuestionText:**  
In the last 30 days, did [fill 1: you/you or other adults in your family] ever cut the size of your meals or skip meals because there wasn't enough money for food?

- 1: Yes
- 2: No
- 7: Refused
- 9: Don’t know

**UniverseText:** Families for whom it was often or sometimes true in the last 30 days that they worried that food would run out before they got money to buy more, or that food that was bought didn’t last and they didn’t have money to get more, or they couldn’t afford to eat balanced meals

**SkipInstructions:**  
<1> [goto FSSKDAYS]  
<2,R,D> [goto FSLESS]

---

**Question ID:** FFS.050_00.000  
**Instrument Variable Name:** FSSKDAYS  
**QuestionnaireFileName:** Family

**QuestionText:**  
In the last 30 days, how many days did this happen?

- 01-30: Days
- 97: Refused
- 99: Don’t know

**UniverseText:** Adults in the family cut the size of their meals or skipped meals in the last 30 days because there wasn’t enough money for food

**SkipInstructions:**  
<1-30,R,D> [goto FSLESS]
In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money for food?

1  Yes
2  No
7  Refused
9  Don't know

Families for whom it was often or sometimes true in the last 30 days that they worried that food would run out before they got money to buy more, or that food that was bought didn't last and they didn't have money to get more, or they couldn't afford to eat balanced meals

In the last 30 days, were you ever hungry but didn't eat because there wasn't enough money for food?

1  Yes
2  No
7  Refused
9  Don't know

Families for whom it was often or sometimes true in the last 30 days that they worried that food would run out before they got money to buy more, or that food that was bought didn't last and they didn't have money to get more, or they couldn't afford to eat balanced meals

<1,2,R,D> [goto FSHUNGRY]
**Question ID:** FFS.080_00.000  **Instrument Variable Name:** FSWEIGHT  **QuestionnaireFileName:** Family

**QuestionText:** In the last 30 days, did you lose weight because there wasn't enough money for food?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** Families for whom it was often or sometimes true in the last 30 days that they worried that food would run out before they got money to buy more, or that food that was bought didn't last and they didn't have money to get more, or they couldn't afford to eat balanced meals

**SkipInstructions:** <1> [goto FSNOTEAT]  
<2,R,D> [if FSSKIP=1 or FSLESS=1 or FSHUNGRY=1, goto FSNOTEAT; else goto FINJ3M]

---

**Question ID:** FFS.090_00.000  **Instrument Variable Name:** FSNOTEAT  **QuestionnaireFileName:** Family

**QuestionText:** In the last 30 days, did [fill 1: you/you or other adults in your family] ever not eat for a whole day because there wasn't enough money for food?

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** All families where adult(s) cut the size of meals or meals were skipped, ate less than they felt they should, were hungry but didn't eat, or lost weight in the last 30 days because there wasn't enough money for food

**SkipInstructions:** <1> [goto FSNEDAYS]  
<2,R,D> [goto FINJ3M]

---

**Question ID:** FFS.100_00.000  **Instrument Variable Name:** FSNEDAYS  **QuestionnaireFileName:** Family

**QuestionText:** In the last 30 days, how many days did this happen?

01-30 Days
97 Refused
99 Don't know

**UniverseText:** All families where the adult(s) did not eat for a whole day, in the last 30 days because there wasn't enough money for food

**SkipInstructions:** <1-30,R,D> [goto FINJ3M]
The following questions are about the use of health care. Do not include dental care.

DURING THE PAST 12 MONTHS, [fill: have you delayed seeking medical care/has medical care been delayed for anyone in the family] because of worry about the cost?

1  Yes
2  No
7  Refused
9  Don't know

All families

* Ask or verify. Enter applicable line number(s), separate with commas.

For which family member was medical care delayed?
(Anyone else?)

1  Yes
2  No
7  Refused
9  Don't know

All families with two or more persons and at least one had medical care delayed due to worry about the cost during the past 12 months

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
## Question ID: FAU.030_00.000  
### Instrument Variable Name: FNMED12M  
### QuestionnaireFileName: Family
### QuestionText:  
> During the past 12 months, was there any time when [fill1: you/someone in the family] needed medical care, but did not get it because [fill2: you/the family] couldn't afford it?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

### UniverseText:  
All families

### SkipInstructions:  
<1> [if a single-person family, store the person number in PNMED12M and goto FHOSPYR; else, goto PNMED12M]

<2,R,D> [goto FHOSPYR]

## Question ID: FAU.040_00.000  
### Instrument Variable Name: PNMED12M  
### QuestionnaireFileName: Family
### QuestionText:  
* Ask or verify. Enter applicable line number(s), separate with commas.

Who didn't get needed care?  
(Anyone else?)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

### UniverseText:  
All families with two or more persons and at least one didn't get medical care due to cost during the past 12 months

### SkipInstructions:  
goto FHOSPYR

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
**2018 NHIS Questionnaire - Family**

**Family Access to Health Care & Utilization**

Document Version Date: 05-Jun-19

---

**Question ID:** FAU.050_00.000  **Instrument Variable Name:** FHOSPYR  **QuestionnaireFileName:** Family

**QuestionText:**

> ?[F1]

(fill1: Have you/Including all infants born in a hospital, has anyone in the family] been hospitalized OVERNIGHT in the past 12 months? Do not include an overnight stay in the emergency room.

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
</tbody>
</table>

**UniverseText:** All families

**SkipInstructions:** <1> [if a single-person family, store the person number in PHOSPYR and goto HOSPNO; else, goto PHOSPYR]  
<2,R,D> [goto FHCHM2W]

---

**Question ID:** FAU.060_00.000  **Instrument Variable Name:** PHOSPYR  **QuestionnaireFileName:** Family

**QuestionText:** *Ask or verify. Enter applicable line number(s), separate with commas.*

Who was in a hospital overnight?  
(Anyone else?)

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with two or more persons and at least one was hospitalized overnight during the past 12 months (excluding ER)

**SkipInstructions:** goto HOSPNO

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
### Question ID: FAU.070_00.000

**Question Text:**

How many different times did [fill: you/ALIAS] stay in any hospital overnight or longer DURING THE PAST 12 MONTHS?

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-365</td>
<td>1-365 times</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**Universe Text:**

All persons who had an overnight hospital stay during the past 12 months (excluding ER)

**Skip Instructions:**

<1-10> [goto HPNITE]
<11-365> [goto ERR_HOSPNO]
<R,D> [goto HPNITE]

**Soft Edit:**

- ERR_HOSPNO
  * [fill: HOSPNO] is unusually high.
  * Verify entry.
  * Make corrections if necessary.

### Question ID: FAU.110_00.000

**Question Text:**

Altogether how many nights [fill: were you/was ALIAS] in the hospital DURING THE PAST 12 MONTHS?

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>001-365</td>
<td>1-365 nights</td>
</tr>
<tr>
<td>997</td>
<td>Refused</td>
</tr>
<tr>
<td>999</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**Universe Text:**

All persons who had an overnight hospital stay during the past 12 months (excluding ER)

**Skip Instructions:**

<1-50,R,D> [goto next person selected at PHOSPYR; if no more persons, goto FHCHM2W]
<51-365> [goto ERR1_HPNITE]

if HOSPNO gt HPNITE, goto ERR2_HPNITE

**Soft Edit:**

- ERR1_HPNITE
  * [fill: HPNITE] is unusually high.
  * Verify entry.
  * Make corrections if necessary.

- ERR2_HPNITE
  * Do not read.
  * [fill: HPNITE] night(s) is less than the total number of times in the hospital overnight.
  * Please verify.

Note: If edit suppressed, store S in HPNITE_FLG
# Family Access to Health Care & Utilization

**Question ID:** FAU.120_00.000  **Instrument Variable Name:** FHCHM2W  **QuestionnaireFileName:** Family

**QuestionText:**

These next questions are about health care received DURING THE LAST 2 WEEKS. Include care from ALL types of medical doctors, such as dermatologists, psychiatrists, ophthalmologists (AHF-thal-MOL-oh-jists), and general practitioners. Also include care from OTHER health professionals such as nurses, physical therapists, and chiropractors.

Do not include dental care. Do not include care while an overnight patient in a hospital.

DURING THE LAST 2 WEEKS, did [fill: you/anyone in the family] receive care AT HOME from a nurse or other health care professional?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families

**SkipInstructions:** <1> [if a single-person family, store the person number in PHCHM2W and goto PHCHMN2W; else, goto PHCHM2W]  
<2,R,D> [goto FHCPH2W]

---

**Question ID:** FAU.130_00.000  **Instrument Variable Name:** PHCHM2W  **QuestionnaireFileName:** Family

**QuestionText:**

* Ask or verify. Enter applicable line number(s), separate with commas.

Who received care at home?  
(Anyone else?)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with two or more persons and at least one received care at home from a health care professional during the past 2 weeks (excluding dental care)

**SkipInstructions:** goto PHCHMN2W

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
**NHIS Questionnaire - Family**

**Family Access to Health Care & Utilization**

**Document Version Date:** 05-Jun-19

---

**Question ID:** FAU.140_00.000  **Instrument Variable Name:** PHCHMN2W  **QuestionnaireFileName:** Family

**QuestionText:**
How many home visits did [fill: you/ Alias] receive DURING THE LAST 2 WEEKS?

* Enter '50' for 50 or more visits.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-50</td>
<td>1-50 home visits</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All persons who received care at home from a health care professional during the past 2 weeks (excluding dental care)

**SkipInstructions:**
<1-14,R,D> [repeat for all eligible persons, then goto FHCPH2W]
<15-50> [goto ERR_PHCHMN2W]

**Soft Edit:**
ERR_PHCHMN2W
* [fill: PHCHMN2W] is unusually high.
* Verify entry.
* DO NOT PROBE. Make corrections if necessary.

---

**Question ID:** FAU.150_00.000  **Instrument Variable Name:** FHCPH2W  **QuestionnaireFileName:** Family

**QuestionText:**
DURING THE LAST 2 WEEKS, did [fill: you/ anyone in the family] get any medical advice or test results over the PHONE from a doctor, nurse, or other health care professional?

Do not include phone calls to make appointments, for billing questions or for prescription refills.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All families

**SkipInstructions:**
<1> [if a single-person family, store the person number in PHCPH2W and goto PHCPHN2W; else, goto PHCPH2W]
<2,R,D> [goto FHCDV2W]
### Question 1: Who was the phone call about?

- **Question ID:** FAU.160_00.000
- **Instrument Variable Name:** PHCPH2W
- **QuestionnaireFileName:** Family

*Ask or verify. Enter applicable line number(s), separate with commas.*

- **Question Text:**
  - Who was the phone call about?
  - *(Anyone else?)*
  - Yes
  - No
  - Refused
  - Don't know

*UniverseText:* All families with two or more persons and at least one received medical advice or test results over the phone during the past 2 weeks (excluding calls for appointments, billing questions, or prescription medicines)

*SkipInstructions:* goto PHCPHN2W

*NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.*

### Question 2: During the last 2 weeks, how many telephone calls [did you make?/were made about [Alias]?]

- **Question ID:** FAU.170_00.000
- **Instrument Variable Name:** PHCPHN2W
- **QuestionnaireFileName:** Family

*DURING THE LAST 2 WEEKS, how many telephone calls*

- **Question Text:** [fill1: did you make?]
- [fill2: were made about [fill: Alias]?]
  - *Enter '50' for 50 or more phone calls.*
  - 01-50 calls
  - 97 Refused
  - 99 Don't know

*UniverseText:* All persons for whom medical advice or test results were received over the phone from a health care professional during the past 2 weeks (excluding calls for appointments, billing questions, or prescription refills)

*SkipInstructions:*<1-14,R,D> [repeat for all eligible persons, then goto FHCDV2W]<15-50> [goto ERR_PHCPHN2W]

*Soft Edit:* ERR_PHCPHN2W
  - *[fill: PHCPHN2W] is unusually high.*
  - *Verify that all calls were within the two week period.*
  - *Make corrections if necessary.*
2018 NHIS Questionnaire - Family

Family Access to Health Care & Utilization

Document Version Date: 05-Jun-19

Question ID: FAU.180_00.000  Instrument Variable Name: FHCDV2W  QuestionnaireFileName: Family

QuestionText: DURING THE LAST 2 WEEKS, did [fill1: you/anyone in the family] see a doctor or other health care professional at a doctor's OFFICE, a clinic, an emergency room, or some other place?

[fill2: Do not include times during an overnight hospital stay.]

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: All families

SkipInstructions: <1> [if a single-person family, store the person number in PHCDV2W and goto PHCDVN2W; else, goto PHCDV2W]
<2,R,D> [goto F10DVYR]

Question ID: FAU.190_00.000  Instrument Variable Name: PHCDV2W  QuestionnaireFileName: Family

QuestionText: * Ask or verify. Enter applicable line number(s), separate with commas.

Who received care?
(Anyone else?)

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: All families with two or more persons and at least one saw a health care professional in an office, clinic, emergency room, or some other place during the past 2 weeks (excluding visits during overnight hospital stays)

SkipInstructions: goto PHCDVN2W

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
How many times did [fill: you/ Alias] visit a doctor or other health care professional DURING THE LAST 2 WEEKS?

* Enter '50' for 50 or more visits.

01-50
1-50 times
97 Refused
99 Don't know

DURING THE PAST 12 MONTHS, did [fill: you/any member of the family] receive care from doctors or other health care professionals 10 or more times? Do not include telephone calls.

1 Yes
2 No
7 Refused
9 Don't know

<1-14,R,D> [repeat for all eligible persons, then goto F10DVYR]
<15-50> [goto ERR_PHCDVN2W]
Question ID: FAU.220_00.000  Instrument Variable Name: P10DVYR  QuestionnaireFileName: Family

QuestionText: * Ask or verify. Enter applicable line number(s), separate with commas.

Who received care 10 or more times?
(Anyone else?)

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families with two or more persons and at least one received care 10 or more times from a health care professional during the past 12 months (excluding telephone calls)

SkipInstructions: goto FHICOV

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare and Medicaid that provide medical care or help pay medical bills.

[fill: Are you/Is anyone in the family] covered by any kind of health insurance or some other kind of health care plan?

1 Yes
2 No
7 Refused
9 Don't know

Universe Text: All families

Skip Instructions: <1,R,D> [goto HIKIND]
<2> [if AGE ge 65, goto MCAREPRB; else, goto MCAIDPRB]
What kind of health insurance or health care coverage [fill: do you/does ALIAS] have? INCLUDE those that pay for only one type of service (nursing home care, accidents, or dental care). EXCLUDE private plans that only provide extra cash while hospitalized.

* Enter all that apply, separate with commas.

01 Private health insurance
02 Medicare
03 Medi-Gap
04 Medicaid
05 SCHIP (CHIP/Children's Health Insurance Program)
06 Military health care (TRICARE/VA/CHAMP-VA)
07 Indian Health Service
08 State-sponsored health plan
09 Other government program
10 Single service plan (e.g., dental, vision, prescriptions)
11 No coverage of any type
13 Refused
97 Don't know

All persons in families where FHICOV= yes, don't know, or refused

<1,10> [if AGE ge 65 and HIKIND ne 2, goto MCAREPRB; else, if HIKIND ne 10 goto SINCOV; else, goto HICHANGE]
<11> [if HIKIND = 1-10, goto ERR_HIKIND; else, if AGE ge 65 goto MCAREPRB; else, goto MCAIDPRB]

* Cannot mark "No coverage of any kind" and another type.
* Please correct.

People covered by Medicare have a card that looks like this. [fill: Are you/Is ALIAS] covered by Medicare?

1 Yes
2 No
7 Refused
9 Don't know

All persons 65 years of age or older in families not covered by health insurance or Medicare was not selected for those persons at HIKIND
* Refer to flashcard F14 for state Medicaid names.

There is a program called Medicaid that pays for health care for persons in need. In this State it is also called (* fill State name). [fill: Are you/Is ALIAS] covered by Medicaid?

- 1: Yes
- 2: No
- 7: Refused
- 9: Don't know

**UniverseText:** All persons less than 65 years of age with no insurance coverage of any type

**SkipInstructions:** goto SINCOV

---

[fill 1: Do you/Does ALIAS] have a separate insurance plan that pays for only one type of service such as dental, vision, or prescriptions?

- 1: Yes
- 2: No
- 7: Refused
- 9: Don't know

**UniverseText:** All persons in families not covered by health insurance or single service plan was not selected for those persons at HIKIND

**SkipInstructions:** goto HICHANGE
### Question ID: FHI.075_00.000  
**Instrument Variable Name:** HICHANGE  
**QuestionnaireFileName:** Family

#### QuestionText:
I have recorded [fill1: you are/ALIAS is] [fill 2: covered by:

fill3: ^HIKIND] / not covered by health insurance.]

Is this correct?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons

**SkipInstructions:** <1,R,D> [repeat for all eligible persons, then goto MCPART]  
<2> [goto ERR_HICHANGE]

**Hard Edit:** ERR_HICHANGE  
*Press enter to go back to HIKIND and update coverage.*

---

### Question ID: FHI.090_00.000  
**Instrument Variable Name:** MCPART  
**QuestionnaireFileName:** Family

#### QuestionText:
{if subject ne respondent}:
Earlier I recorded that ALIAS is covered by Medicare. May I please see ALIAS’s Medicare card to determine the type of coverage?

{if subject eq respondent}:
* Read if necessary.

What type of Medicare coverage do you have? Is it Part A - hospital insurance, Part B - medical insurance, or both?

* Fill in appropriate coverage type below.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Part A - Hospital only</td>
</tr>
<tr>
<td>2</td>
<td>Part B - Medical only</td>
</tr>
<tr>
<td>3</td>
<td>Both Part A and Part B</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons with Medicare

**SkipInstructions:** <1-3> [goto MCCARD]  
<R,D> [prefill MCCARD with a ”2” and goto MCCHOICE]
**Question ID:** FHI.092_00.000  **Instrument Variable Name:** MCCARD  **QuestionnaireFileName:** Family

**QuestionText:** * Do not read. Was the type of coverage obtained from a Medicare card or some other form of documentation?

1. Yes
2. No

**UniverseText:** All persons with Part A Medicare coverage, Part B Medicare coverage, or both

**SkipInstructions:** if MCPART = 1, goto MCPARTD; else, goto MCCHOICE

---

**Question ID:** FHI.095_00.000  **Instrument Variable Name:** MCCHOICE  **QuestionnaireFileName:** Family

**QuestionText:** ? [F1]

Medicare Advantage is the new name for Medicare Plus Choice plans. [fill: Are you/Is ALIAS] enrolled in a Medicare Advantage plan?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** All persons with Medicare who signed up for part B coverage or for whom it is unknown if they signed up for Part B coverage

**SkipInstructions:** goto MCHMO
**Question ID:** FHI.100_00.000  **Instrument Variable Name:** MCHMO  **QuestionnaireFileName:** Family

**QuestionText:**

[fill: Are you/Is ALIAS] under a Medicare managed care arrangement, such as an HMO, that is, a Health Maintenance Organization? (With an HMO, you must generally receive care from HMO doctors, otherwise the expense is not covered unless you were referred by the HMO or there was a medical emergency).

| 1 | Yes |
| 2 | No  |
| 7 | Refused |
| 9 | Don't know |

**UniverseText:** All persons with Medicare who signed up for part B coverage or for whom it is unknown if they signed up for Part B coverage

**SkipInstructions:** <1> [goto MCANAME]  
<2,R,D> [if MCCHOICE=1, goto MCANAME; else if MCCHOICE=2,R,D, goto MCREF]

---

**Question ID:** FHI.112_00.000  **Instrument Variable Name:** MCANAME  **QuestionnaireFileName:** Family

**QuestionText:**

What is the name of [fill 1: your/ALIAS’s] Medicare Advantage or Medicare HMO plan?

* Read if necessary: Do you have a health plan card or something with the plan name on it?

| Verbatim | 7 | Refused |
| 9 | Don't know |

**UniverseText:** All persons that had either a Medicare Advantage plan or a Medicare HMO plan

**SkipInstructions:** <allow 80,R,D> goto MCPREM
**2018 NHIS Questionnaire - Family**

**Family Health Insurance**

**Document Version Date:** 12-Jun-19

---

**Question ID:** FHI.113_00.000  **Instrument Variable Name:** MCPREM  **QuestionnaireFileName:** Family

**Question Text:** Besides [fill 1: your/ALIAS’s] Medicare Part B payment, [fill 2: are you/is ALIAS] paying a premium for [fill 3: your/his/her] Medicare Advantage or Medicare HMO plan?

1. Yes
2. No
7. Refused
9. Don’t know

**Universe Text:** All persons that had either a Medicare Advantage plan or a Medicare HMO plan

**Skip Instructions:** <1,2,R,D> goto MCREF

---

**Question ID:** FHI.114_00.000  **Instrument Variable Name:** MCREF  **QuestionnaireFileName:** Family

**Question Text:** Under [fill 1: your/ALIAS’s] Medicare plan, if [fill 2: you need/he needs/she needs] to go to a different doctor or place for special care, [fill 3: do you/does he/does she] need approval or a referral? Do not include emergency care.

1. Yes
2. No
7. Refused
9. Don’t know

**Universe Text:** All persons with Medicare who signed up for part B coverage or for whom it is unknown if they signed up for Part B coverage

**Skip Instructions:** <1,2,R,D> goto MCPARTD

---

**Question ID:** FHI.118_00.000  **Instrument Variable Name:** MCPARTD  **QuestionnaireFileName:** Family

**Question Text:** [Fill 1: Are you/Is ALIAS] enrolled in Medicare Part D, also known as the Medicare Prescription Drug Plan?

1. Yes
2. No
7. Refused
9. Don’t know

**Universe Text:** All persons with Medicare

**Skip Instructions:** <1,2,7,9> goto MCPART for next person with Medicare; else goto MACHMD
* Refer to flashcard F14 for state Medicaid names.

The next questions are about Medicaid coverage. In this State it is also called (fill State Name). [fill 2: you/ALIAS is] listed as having Medicaid coverage. Can [fill 3: you/ALIAS] go to ANY doctor who will accept Medicaid or MUST [fill 4: you/he/she] choose from a list of doctors or is a doctor assigned?

1  Any doctor
2  Select from list
3  Doctor is assigned
7  Refused
9  Don't know

All persons with Medicaid

* Ask or verify.

What is the name of the health plan that provided the list?

*Read if necessary: Do you have a health plan card or something with the plan name on it?

All persons with Medicaid who must select a doctor from a list of doctors

 goto MANAM
Family Health Insurance

2018 NHIS Questionnaire - Family
Family Health Insurance

Document Version Date: 12-Jun-19

Question ID: FHI.131_00.000  Instrument Variable Name: MACHMD2  QuestionnaireFileName: Family

QuestionText: * Ask or verify.

What is the name of the health plan that assigned the doctor?

*Read if necessary: Do you have a health plan card or something with the plan name on it?

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Verbatim response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons with Medicaid for whom a doctor is assigned

SkipInstructions: goto MANAM

Question ID: FHI.132_00.000  Instrument Variable Name: MANAM  QuestionnaireFileName: Family

QuestionText: ? [F1]

* Do not read. Was the Health Plan name obtained from a Health Plan Card or something with the Health Plan name on it?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>

UniverseText: All persons with Medicaid who must select a doctor from a list or for whom a doctor is assigned

SkipInstructions: goto MXCHNG

Question ID: FHI.135_00.010  Instrument Variable Name: MXCHNG  QuestionnaireFileName: Family

QuestionText: Was [fill: your/ALIAS's] Medicaid obtained through Healthcare.gov or the [fill: Health Insurance Marketplace/Health Insurance Marketplace, such as (fill: state name)]?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons with Medicaid coverage

SkipInstructions: <1, 2, R, D> goto MEDPREM
**Question Text:** A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for [Fill 1: your/ALIAS's] Medicaid plan?

1. Yes
2. No
7. Refused
9. Don't know

**Universe Text:** All persons with Medicaid coverage

**Skip Instructions:**
- `<1>` goto MDPRINC
- `<2,R,D>` goto loop through all persons in the family with Medicaid, when roster is finished, goto next appropriate group of questions

---

**Question ID:** FHI.137_00.030  **Instrument Variable Name:** MDPRINC

**Question Text:** Is the premium paid for this Medicaid plan based on income?

1. Yes
2. No
7. Refused
9. Don't know

**Universe Text:** All persons with Medicaid coverage who pay a premium for their plan

**Skip Instructions:** loop through all persons in the family with Medicaid, when roster is finished, goto next appropriate group of questions
You mentioned that [fill1: you have/ALIAS has] a single-service plan - that is, an insurance plan that provides one specific type of coverage. What type of service or care does [fill2: your/ALIAS's] single service plan or plans pay for?

<table>
<thead>
<tr>
<th>Option</th>
<th>Verbatim</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Accidents</td>
</tr>
<tr>
<td>02</td>
<td>AIDS care</td>
</tr>
<tr>
<td>03</td>
<td>Cancer treatment</td>
</tr>
<tr>
<td>04</td>
<td>Catastrophic care</td>
</tr>
<tr>
<td>05</td>
<td>Dental care</td>
</tr>
<tr>
<td>06</td>
<td>Disability insurance</td>
</tr>
<tr>
<td>07</td>
<td>Hospice care</td>
</tr>
<tr>
<td>08</td>
<td>Hospitalization only</td>
</tr>
<tr>
<td>09</td>
<td>Long-term care</td>
</tr>
<tr>
<td>10</td>
<td>Prescriptions</td>
</tr>
<tr>
<td>11</td>
<td>Vision care</td>
</tr>
<tr>
<td>12</td>
<td>Other (specify)</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons with single service plans

SkipInstructions: <1-11,R,D> [repeat for all eligible persons, then goto FHICCI6]  
<12> [goto SSOTHER]

* Other type of single-service plan

<table>
<thead>
<tr>
<th>Option</th>
<th>Verbatim</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All persons with an "other" single service plan

SkipInstructions: goto SSTYPE2 for the next person with a single service plan; else, goto FHICCI6
### Question ID: FHI.158_00.000  Instrument Variable Name: FHICCI6  QuestionnaireFileName: Family

**QuestionText:**
The next questions are about private health insurance plans [fill1: /including Medi-Gap]. These plans can be obtained through work, purchased directly, or through a state or local government program or community program.

[fill2: We have the following persons listed as being covered by such plans:

* Read names.
(display roster of eligible persons)]

* Enter 1 to continue

1  Continue

**UniverseText:** All families with at least one person covered by private health insurance

**SkipInstructions:** goto HIPNAM1

---

### Question ID: FHI.160_00.000  Instrument Variable Name: HIPNAM1  QuestionnaireFileName: Family

**QuestionText:**
It is important that we record the complete and accurate name of each health insurance plan. What is the COMPLETE name of the first plan?

Do NOT include plans that only provide extra cash while in the hospital or plans that pay for only one type of service, such as nursing home care, accidents, or dental care.

* Read if necessary:  Do you have your health plan card or something with the plan name on it?

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Refused</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbatim response</td>
<td>Refused</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with at least one person covered by private health insurance

**SkipInstructions:** <verbatim> [goto PCARD1]  [R,D] [prefill PCARD1 with a "2" and goto HIPNAM1B]
**2018 NHIS Questionnaire - Family**

**Family Health Insurance**

**Document Version Date:** 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHI.160_01.000</th>
<th>Instrument Variable Name:</th>
<th>PCARD1</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>* Do not read. Was the health plan name obtained from a health plan card or something with the health plan name on it?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 Yes</td>
<td>2 No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>All private health insurance plans where the plan name was entered at HIPNAM1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>goto HIPNAM1B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHI.170_00.000</th>
<th>Instrument Variable Name:</th>
<th>HIPNAM1B</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
</table>
| QuestionText:| * Ask or verify. Enter all that apply, separate with commas.  
Which family members are covered by this plan?  
* Indicate each family member covered by this plan. |
|             | 1 Yes         | 2 No                     | 7 Refused | 9 Don't know |
| UniverseText:| All families with a private health insurance plan and the plan name, refused, or don't know was entered at HIPNAM1 |
| SkipInstructions:| <R,D> [if HIPNAM1= R or D, goto STNAME]  
goto MORPLAN |

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Question ID: FHI.171_00.000  Instrument Variable Name: MORPLAN  QuestionnaireFileName: Family

QuestionText: * Ask if necessary

Are there any more private health insurance plans?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families where a private health insurance plan name was entered at HIPNAM1 or a person number was entered at HIPNAM1B

SkipInstructions: <1> [goto HIPNAM2]
<2,R,D> [if no persons selected at HIPNAM1B, goto FHICCI8; else, if persons selected at HIPNAM1B, but not all persons with HIKIND = 1 or 3 selected at HIPNAM1B, goto HIVER1]

---

Question ID: FHI.172_00.000  Instrument Variable Name: HIPNAM2  QuestionnaireFileName: Family

QuestionText: What is the name of the next plan?

*Read if necessary: Do you have a health plan card or something with the plan name on it?

Verbatim: Verbatim response

7  Refused
9  Don't know

UniverseText: All families with a second private health insurance plan

SkipInstructions: <verbatim> [goto PCARD2]
<R,D> [prefill PCARD2 with a "2" and goto HIPNAM2B]

---

Question ID: FHI.172_01.000  Instrument Variable Name: PCARD2  QuestionnaireFileName: Family

QuestionText: * Do not read. Was the health plan name obtained from a health plan card or something with the health plan name on it?

1  Yes
2  No

UniverseText: All private health insurance plans where the plan name was entered at HIPNAM2

SkipInstructions: goto HIPNAM2B
### Questionnaire: Family Health Insurance

**Question ID:** FHI.173_00.000
**Instrument Variable Name:** HIPNAM2B
**Questionnaire FileName:** Family

**Question Text:**
* Ask or verify. Enter all that apply, separate with commas.

Which family members are covered by that plan?

* Indicate each family member covered by this plan.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**Universe Text:**
All families with a second private health insurance plan and the plan name, refused, or don’t know was entered at HIPNAM2

**Skip Instructions:**
<R,D> [if HIPNAM2 eq R or D and persons selected at HIPNAM1B, but not all persons with HIKIND eq 1 or 3 selected at HIPNAM1B, goto HIVER1; else, if HIPNAM2 eq R or D and persons selected at HIPNAM1B, and all persons with HIKIND eq 1 or 3 selected at HIPNAM1B, goto FHICCI8; else, if HIPNAM2 eq R or D and persons not selected at HIPNAM1B, goto FHICCI8; else, if a health plan name recorded in HIPNAM2, goto MORPLAN2] goto MORPLAN2

---

**Question ID:** FHI.174_00.000
**Instrument Variable Name:** MORPLAN2
**Questionnaire FileName:** Family

**Question Text:**
* Ask if necessary

Are there any more private health insurance plans?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

**Universe Text:**
All families where a private health insurance plan name was entered at HIPNAM2 or a person number was entered at HIPNAM2B

**Skip Instructions:**
<1> [goto HIPNAM3]
<2,R,D> [if persons selected at HIPNAM2B or HIPNAM1B, but not all persons with HIKIND eq 1 or 3 selected at HIPNAM2B or HIPNAM1B, goto HIVER1; else, goto FHICCI8]
Family Health Insurance

2018 NHIS Questionnaire - Family
Family Health Insurance
Document Version Date: 12-Jun-19

Question ID: FHI.175_00.000  Instrument Variable Name: HIPNAM3  QuestionnaireFileName: Family

QuestionText: What is the name of the next plan?

*Read if necessary: Do you have a health plan card or something with the plan name on it?

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

UniverseText: All families with a third private health insurance plan

SkipInstructions: <verbatim> goto PCARD3
                 <R,D> [prefill PCARD3 with a "2" and goto HIPNAM3B]

Question ID: FHI.175_01.000  Instrument Variable Name: PCARD3  QuestionnaireFileName: Family

QuestionText: * Do not read. Was the health plan name obtained from a health plan card or something with the health plan name on it?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>

UniverseText: All private health insurance plans where the plan name was entered at HIPNAM3

SkipInstructions: goto HIPNAM3B
### Question ID: FHI.176_00.000
**Instrument Variable Name:** HIPNAM3B  
**QuestionnaireFileName:** Family

**QuestionText:**

* Ask or verify. Enter all that apply, separate with commas.

Which family members are covered by that plan?

* Indicate each family member covered by this plan.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with a third private health insurance plan and the plan name, refused, or don't know was entered at HIPNAM3

**SkipInstructions:**  
<1> [goto HIPNAM4]  
<2,R,D> [if HIPNAM3 eq R or D and persons selected at HIPNAM1B or HIPNAM2B, but not all persons with HIKIND eq 1 or 3 selected at HIPNAM1B or HIPNAM2B, goto HIVER1; else, if HIPNAM3 eq R or D and persons selected at HIPNAM1B or HIPNAM2B, and all persons with HIKIND eq 1 or 3 selected at HIPNAM1B or HIPNAM2B, goto FHICCI8; else, if HIPNAM3 eq R or D and persons not selected at HIPNAM1B and HIPNAM2B, goto FHICCI8; else, if the health plan name was entered at HIPNAM3, goto MORPLAN3] goto MORPLAN3

---

### Question ID: FHI.177_00.000
**Instrument Variable Name:** MORPLAN3  
**QuestionnaireFileName:** Family

**QuestionText:**

* Ask if necessary

Are there any more private health insurance plans?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families where a private health insurance plan name was entered at HIPNAM3 or a person number was entered at HIPNAM3B

**SkipInstructions:**  
<1> [goto HIPNAM4]  
<2,R,D> [if persons selected at HIPNAM1B or HIPNAM2B or HIPNAM3B, but not all persons with HIKIND eq 1 or 3 selected at HIPNAM1B or HIPNAM2B or HIPNAM3B, goto HIVER1; else, goto FHICCI8]
**Question ID:** FHI.178_00.000
**Instrument Variable Name:** HIPNAM4
**QuestionnaireFileName:** Family

**QuestionText:** What is the name of the next plan?

*Read if necessary: Do you have a health plan card or something with the plan name on it?*

**Verbatim**
- Verbatim response
- Refused
- Don't know

**UniverseText:** All families with a fourth private health insurance plan

**SkipInstructions:**
- <verbatim> [goto PCARD4]
- <R,D> [prefill PCARD4 with a "2" and goto HIPNAM4B]

---

**Question ID:** FHI.178_01.000
**Instrument Variable Name:** PCARD4
**QuestionnaireFileName:** Family

**QuestionText:** * Do not read. Was the health plan name obtained from a health plan card or something with the health plan name on it?*

1. Yes
2. No

**UniverseText:** All private health insurance plans where the plan name was entered at HIPNAM4

**SkipInstructions:** goto HIPNAM4B
Family Health Insurance

2018 NHIS Questionnaire - Family

Family Health Insurance

Document Version Date: 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID: FHI.179_00.000</th>
<th>Instrument Variable Name: HIPNAM4B</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
</table>

**QuestionText:**

* Ask or verify. Enter all that apply, separate with commas.

Which family members are covered by that plan?

* Indicate each family member covered by this plan.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with a fourth private health insurance plan and the plan name, refused, or don't know was entered at HIPNAM4

**SkipInstructions:** <R,D> [if HIPNAM4 eq R or D and persons selected at HIPNAM1B or HIPNAM2B or HIPNAM3B, but not all persons with HIKIND eq 1 or 3 selected at HIPNAM1B or HIPNAM2B or HIPNAM3B, goto HIVER1; else, goto FHICCI8] goto FHICCI8

<table>
<thead>
<tr>
<th>Question ID: FHI.180_00.000</th>
<th>Instrument Variable Name: HIVER1</th>
<th>QuestionnaireFileName: Family</th>
</tr>
</thead>
</table>

**QuestionText:**

[fill1: You are/ALIAS is] listed as having private insurance but [fill2: were/was] not mentioned as being covered by any of the plans we just discussed. [fill3: Are you/Is ALIAS] covered by private insurance?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons who have private health insurance coverage, but were not mentioned as being covered by any of the reported plans

**SkipInstructions:** <1> [ goto HIVER2] <2,R,D> [goto ERR_HIVER1]

**Hard Edit:** ERR_HIVER1

*Press ENTER to go back to HIKIND to update health insurance coverage.
**Question ID:** FHI.190_00.000  **Instrument Variable Name:** HIVER2  **QuestionnaireFileName:** Family

**QuestionText:**

* Enter all that apply, separate with commas.

Is [fill: your/ALIAS's] health insurance plan the same as one of those already mentioned?

<table>
<thead>
<tr>
<th></th>
<th>1st plan mentioned (^HIPNAM1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1st plan mentioned (^HIPNAM1)</td>
</tr>
<tr>
<td>2</td>
<td>2nd plan mentioned (^HIPNAM2)</td>
</tr>
<tr>
<td>3</td>
<td>3rd plan mentioned (^HIPNAM3)</td>
</tr>
<tr>
<td>4</td>
<td>4th plan mentioned (^HIPNAM4)</td>
</tr>
<tr>
<td>5</td>
<td>Some other plan not already mentioned</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons for whom it was verified they have private health insurance coverage, but were not mentioned as being covered by any of the reported plans

**SkipInstructions:**

- <1-4> [update responses for HIPNAM1B/HIPNAM2B/HIPNAM3B/HIPNAM4B and goto FHICCI8]
- <5> [if 4 plans were reported, ignore this 5th plan and goto FHICCI8; else, goto HIPNAM2, or HIPNAM3, or HIPNAM4 accordingly to enter information on this plan]
- <R,D> [goto FHICCI8]

---

**Question ID:** FHI.195_01.000  **Instrument Variable Name:** FHICCI8  **QuestionnaireFileName:** Family

**QuestionText:**

[fill1: Now I am going to ask some questions about the [fill2: plan/plans] you just told me about [fill3: , starting with [fill4: ^HIPNAM1/Plan1]]. Next I would like to ask you about [fill5: ^HIPNAM2/^HIPNAM3/^HIPNAM4/Plan 2/Plan 3/Plan 4]].

* Enter 1 to continue.

<table>
<thead>
<tr>
<th></th>
<th>Continue</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Continue</td>
</tr>
</tbody>
</table>

**UniverseText:** All families where a private health insurance plan was reported

**SkipInstructions:**

- goto FHI200

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
**Question ID:** FHI.200_01.000  
**Instrument Variable Name:** FHI200  
**QuestionnaireFileName:** Family

**QuestionText:**

Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. In whose name is this plan?

* Enter line number of family member (from list below) in whose name this plan is held.

* Enter 0 if the policyholder is not on the family roster.

00  Policyholder not on family roster  
01-25  Two-digit person number  
97  Refused  
99  Don't know

**UniverseText:** All private health insurance plans

**SkipInstructions:**

- if <00> [ goto PRPOLH]  
- <01 to 25> [go to PRCOOH]  
- <R, D> [go to PLNWRK]

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

---

**Question ID:** FHI.202_01.010  
**Instrument Variable Name:** PRPOLH  
**QuestionnaireFileName:** Family

**QuestionText:**

How [fill1:are you/is ALIAS] related to the policyholder for [fill2: plan1/plan2/plan3/plan4]?

*Read if Necessary…

[fill3:You are/ALIAS is] the policyholder’s…

1  Child (including stepchildren)  
2  Spouse  
3  Former spouse  
4  Some other relationship  
7  Refused  
9  Don't know

**UniverseText:** All persons on each plan where the policyholder is outside of the family roster

**SkipInstructions:**

<1-4,R,D> [goto PLNWRK]

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
### Question ID: FHI.204_01.010  **Instrument Variable Name:** PRCOOH  **QuestionnaireFileName:** Family

**QuestionText:** Does this plan cover anyone who does not live here?

<table>
<thead>
<tr>
<th>Code</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All private health insurance plans with policyholder on family roster

**SkipInstructions:** `<1,2,R,D> [goto PLNRWK]`

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

---

### Question ID: FHI.210_01.000  **Instrument Variable Name:** PLNWRK  **QuestionnaireFileName:** Family

**QuestionText:** (book) F16  ? [F1]

Which one of these categories best describes how this plan was obtained?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Through employer</td>
</tr>
<tr>
<td>02</td>
<td>Through union</td>
</tr>
<tr>
<td>03</td>
<td>Through workplace, but don't know if employer or union</td>
</tr>
<tr>
<td>04</td>
<td>Through workplace, self-employed or professional association</td>
</tr>
<tr>
<td>05</td>
<td>Purchased directly</td>
</tr>
<tr>
<td>06</td>
<td>Through Healthcare.gov or the Affordable Care Act, also known as Obamacare</td>
</tr>
<tr>
<td>07</td>
<td>Through a state/local government or community program</td>
</tr>
<tr>
<td>08</td>
<td>Other, specify</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All private health insurance plans

**SkipInstructions:** `<1-4,6> goto PLNPAY  <5,7,R,D> goto PLNEXCHG  <8> goto PLNWKSP`

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
How was this plan obtained?

- Verbatim response
- Refused
- Don't know

UniverseText: All private health insurance plans where the plan was obtained through an "other" source

SkipInstructions: Goto PLNEXCHG

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

Was the plan obtained through Healthcare.gov or the [fill: Health Insurance Marketplace/Health Insurance Marketplace, such as (fill: state name)]?

- Yes
- No
- Refused
- Don't know

UniverseText: All private health insurance plans that are not employer based, have not indicated through the exchange (or of unknown origins)

SkipInstructions: <1,2,R,D> goto PLNPAY

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
Who pays for this health insurance plan?

* Enter all that apply, separate with commas.

* If government program is reported, probe for Medicare or Medicaid or SCHIP before entering code 7. If government is the employer, enter code 2.

01 Self or family (living in the household)
02 Employer or union
03 Someone outside the household
04 Medicare
05 Medicaid
06 Children's Health Insurance Program (CHIP/SCHIP)
07 State or local government or community program
97 Refused
99 Don't know

UniverseText: All private health insurance plans

SkipInstructions: <1-7,R,D> if includes '1' goto PLNPRE else goto PLNMGD

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

Is the premium paid for this plan based on income?

1 Yes
2 No
7 Refused
9 Don’t know

UniverseText: Private plan paid for by self or family

SkipInstructions: <1,2,R,D> [goto HICOSTN]

NOTE: This is a new question beginning in Q4 2013. Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
### Question ID: FHI.230_11.000  
**Instrument Variable Name:** HICOSTN  
**QuestionnaireFileName:** Family

**Question Text:**

1 of 2  [F1]

How much [fill1: do you/does your family] currently spend for health insurance premiums for [fill2: ^HIPNAM1/^HIPNAM2/^HIPNAM3/^HIPNAM4/Plan 1/Plan 2/Plan 3/Plan 4]? Please include payroll deductions for premiums.

*Enter dollar amount for premium payments.*

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00001-99995</td>
<td>$1-$99,995</td>
</tr>
<tr>
<td>99997</td>
<td>Refused</td>
</tr>
<tr>
<td>99999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:**

All private health insurance plans paid for by self or family

**Skip Instructions:**

<1-99995> [goto HICOSTT]  
<R> [store "R" in HICOSTT and goto PLNMGD]  
<D> [store "D" in HICOSTT and goto PLNMGD]

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

**Soft Edit:**

ERR_HICOSTN  
* [fill # from HICOSTN] is unusually high. Please verify.  
Make corrections if necessary.

---

### Question ID: FHI.230_12.000  
**Instrument Variable Name:** HICOSTT  
**QuestionnaireFileName:** Family

**Question Text:**

2 of 2  [F1]

* Enter time period for premium payments.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Once a week</td>
</tr>
<tr>
<td>02</td>
<td>Once every 2 weeks</td>
</tr>
<tr>
<td>03</td>
<td>Once a month</td>
</tr>
<tr>
<td>04</td>
<td>Twice a month</td>
</tr>
<tr>
<td>05</td>
<td>Every 2 months</td>
</tr>
<tr>
<td>06</td>
<td>Quarterly (every 3 months)</td>
</tr>
<tr>
<td>07</td>
<td>Once a year</td>
</tr>
<tr>
<td>08</td>
<td>Twice a year</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**Universe Text:**

All private health insurance plans with a valid response to HICOSTN

**Skip Instructions:**

<1-8,R,D> [goto PLNMGD]

**NOTE:** Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
Is [fill: ^HIPNAM1/^HIPNAM2/^HIPNAM3/^HIPNAM4/Plan 1/Plan 2/Plan 3/Plan 4] an HMO (Health Maintenance Organization), an IPA (Individual Practice Association), a PPO (Preferred Provider Organization), a POS (Point-Of-Service), fee-for-service, or indemnity or is it some other kind of plan?

1. HMO/IPA
2. PPO
3. POS
4. Fee-for-service/indemnity
5. Other
6. Refused
7. Don't know

UniverseText: All private health insurance plans

SkipInstructions: goto HDHP

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

Is the annual deductible for medical care for this plan less than $1,350 or $1,350 or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

If two or more persons in the family are covered by this plan:

Is the family annual deductible for medical care for this plan less than $2,700 or $2,700 or more? If there is a separate deductible for prescription drugs, hospitalization, or out-of-network care, do not include those deductible amounts here.

1. Less than [$1,350/$2,700]
2. [$1,350/$2,700] or more
7. Refused
9. Don't know

UniverseText: All private health insurance plans

SkipInstructions: 1,R,D [goto MGCHMD] 2 [goto HSAHRA]

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
With this plan, is there a special account or fund that can be used to pay for medical expenses? The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal Care accounts, Personal Medical funds, or Choice funds, and are different from Flexible Spending Accounts.

1. Yes
2. No
7. Refused
9. Don't know

UniverseText: All high deductible private health plans

SkipInstructions: 1,2,R,D [goto MGCHMD]

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

Under this plan, can [fill1:you/ALIAS/the family members with this plan] choose ANY doctor or MUST [fill2:you/he/she/they] choose one from a specific group or list of doctors?

1. Any doctor
2. Select from group/list
7. Refused
9. Don't know

UniverseText: All private health insurance plans

SkipInstructions: <1> [goto MGPRMD]
<2> [goto MGPYMD]
<R,D> [goto PCPREQ]

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
Question ID: FHI.244_01.000 Instrument Variable Name: MGPRMD QuestionnaireFileName: Family

QuestionText: [fill: Do you/Does ALIAS/Do the family members with this plan] have the option of choosing a doctor from a preferred or select list at a lower cost?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All private health insurance plans where covered persons can choose any doctor

SkipInstructions: goto PCPREQ

Question ID: FHI.246_01.000 Instrument Variable Name: MGPYMD QuestionnaireFileName: Family

QuestionText: If [fill1: you select/ALIAS selects/the family members with this plan select] a doctor who is not in the plan, will [fill2: ^HIPNAM1/^HIPNAM2/^HIPNAM3/^ HIPNAM4/Plan 1/Plan 2/Plan 3/Plan 4] pay any or part of the cost?

1  Yes
2  No
7  Refused
9  Don’t know

UniverseText: All private health insurance plans where covered persons must select from a group or list of doctors

SkipInstructions: goto PCPREQ

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHI.248_05.000</th>
<th>Instrument Variable Name:</th>
<th>PCPREQ</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Does this plan REQUIRE [fill1: you/ALIAS/the family members with this plan] to have a primary care doctor who approves all your care?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>Asked of all private health insurance plans</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>&lt;1,2,R,D&gt; [goto PRRXCOV]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FHI.249_01.010</th>
<th>Instrument Variable Name:</th>
<th>PRRXCOV</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Read if necessary: Does this plan have a drug benefit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UniverseText:</td>
<td>All private health insurance plans</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SkipInstructions:</td>
<td>goto PRDNCOV</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Detailed questions about private health insurance plans are looped through for each plan mentioned in a family. Information on up to 4 plans per family is collected.
**Does [fill 1: ^HIPNAM1 or ^HIPNAM2, or ^HIPNAM3, or ^HIPNAM4 or Plan 1 or Plan 2 or Plan 3 or Plan 4] pay for any of the costs for dental care?**

1. Yes
2. No
7. Refused
9. Don't know

**UniverseText:** All private health insurance plans

**SkipInstructions:** goto FHICCI8 for the next private health insurance plan; else, goto FCOVCONF

---

**If [fill 1: you/your family] had to buy a health plan on [fill 2: your/its] own with no help from [fill 3: your/an] employer, how confident are you that [fill 1: you/your family] would be able to obtain affordable coverage? Would you say…**

*Read categories below.

1. Very confident
2. Somewhat confident
3. Not too confident
4. Not confident at all
7. Refused
9. Don’t know

**UniverseText:** All families with an employer-based health plan

**SkipInstructions:** <1-4,R,D> goto STNAME1 or STNAME2 or STNAME3 or MILSPC or HILAST or HINOTYR
Earlier I recorded that [fill: you are/ALIAS is] covered by the Children’s Health Insurance Program (CHIP/SCHIP). What is the name of the plan?

* Read if necessary: Do you have a health plan card or something with the plan name on it?

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

All persons with SCHIP

goto CHXCHNG

Was [fill 1: your/ALIAS’s] CHIP plan obtained through Healthcare.gov or the [Health Insurance Marketplace/Health Insurance Marketplace, such as (fill: state name)]?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

All persons with SCHIP

<1,2,R,D> goto STRFPRM1

A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for this CHIP plan?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don’t know</td>
</tr>
</tbody>
</table>

All persons with SCHIP

<1> goto CHPRINC
<2,R,D> goto STDOC1
### Question ID: FHI.250_00.030
#### Instrument Variable Name: CHPRINC
#### QuestionnaireFileName: Family

**QuestionText:** Is the premium paid for [fill 1: ^STNAME1/this CHIP plan] based on income?

<table>
<thead>
<tr>
<th>Option</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Those with SCHIP coverage who pay a premium for their plan

**SkipInstructions:** <1,2,R,D> goto STDOC1

### Question ID: FHI.251_00.000
#### Instrument Variable Name: STDOC1
#### QuestionnaireFileName: Family

**QuestionText:** Under the [fill 1:^STNAME1/SCHIP plan] can [fill2: you/ALIAS] go to ANY doctor who will accept this plan or MUST [fill3: you/he/she] choose from a list of doctors or is a doctor assigned?

<table>
<thead>
<tr>
<th>Option</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Any doctor</td>
</tr>
<tr>
<td>2</td>
<td>Select from list</td>
</tr>
<tr>
<td>3</td>
<td>Doctor is assigned</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons with SCHIP

**SkipInstructions:** <1,2,R,D> goto next person in roster, else goto STNAME2

### Question ID: FHI.257_00.000
#### Instrument Variable Name: STNAME2
#### QuestionnaireFileName: Family

**QuestionText:** Earlier I recorded that [fill: you are/ALIAS is] covered by a state sponsored health plan. What is the name of the plan?

* Read if necessary: Do you have a health plan card or something with the plan name on it?

<table>
<thead>
<tr>
<th>Verbatim</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbatim response</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons covered by a state sponsored health plan

**SkipInstructions:** goto OPXCHNG
Question ID: FHI.257_00.010  Instrument Variable Name: OPXCHNG  QuestionnaireFileName: Family

**QuestionText:** Was [fill 1: your/ALIAS's] state sponsored health plan obtained through Healthcare.gov or the [fill: Health Insurance Marketplace/Health Insurance Marketplace, such as (fill: state name)]?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons with a state sponsored health plan

**SkipInstructions:** <1,2,R,D> goto STRFPRM2

---

Question ID: FHI.257_00.020  Instrument Variable Name: STRFPRM2  QuestionnaireFileName: Family

**QuestionText:** A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for [fill : your/ALIAS's] state-sponsored health plan?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons with a state sponsored health plan

**SkipInstructions:** <1> goto SSPRINC
                 <2,R,D> goto STDOC2

---

Question ID: FHI.257_00.030  Instrument Variable Name: SSPRINC  QuestionnaireFileName: Family

**QuestionText:** Is the premium paid for [fill 1: ^STNAME2/this state sponsored plan] based on income?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** Those with state sponsored health plan who pay a premium for their plan

**SkipInstructions:** <1,2,R,D> goto STDOC2
Under the [fill1: state sponsored plan] can [fill2: you] go to ANY doctor who will accept this plan or MUST [fill3: you] choose from a list of doctors or is a doctor assigned?

1. Any doctor
2. Select from list
3. Doctor is assigned
7. Refused
9. Don't know

All persons covered by a state sponsored health plan

Earlier I recorded that [fill: you are] covered by an other government program. What is the name of the plan?

* Read if necessary: Do you have a health plan card or something with the plan name on it?

Verbatim response
7. Refused
9. Don't know

All persons covered by an "other" government plan

Was [fill1: your] other government program obtained through Healthcare.gov or the [fill: Health Insurance Marketplace]?

1. Yes
2. No
7. Refused
9. Don't know

All persons with an other government program
## 2018 NHIS Questionnaire - Family
### Family Health Insurance
#### Document Version Date: 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>FHI.264_00.020</td>
<td>STRFPRM3</td>
<td>Family</td>
<td>A health insurance premium is the amount you or a family member pays each month for health care coverage. Do you or a family member pay a premium for [fill : your/ALIAS's] other government program?</td>
<td>All persons with an other government program</td>
<td>&lt;1&gt; goto OGPRINC &lt;2,R,D&gt; goto STDOC3</td>
</tr>
<tr>
<td>FHI.264_00.030</td>
<td>OGPRINC</td>
<td>Family</td>
<td>Is the premium paid for [fill 1: ^STNAME3/this other government plan] based on income?</td>
<td>Those with other government health plan who pay a premium for their plan</td>
<td>&lt;1,2,R,D&gt; goto STDOC3</td>
</tr>
<tr>
<td>FHI.265_00.000</td>
<td>STDOC3</td>
<td>Family</td>
<td>Under the [fill1:^STNAME3/other government plan] can [fill2: you/ALIAS] go to ANY doctor who will accept this plan or MUST [fill3:you/he/she] choose from a list of doctors or is a doctor assigned?</td>
<td>All persons covered by an &quot;other&quot; government plan</td>
<td>&lt;1,2,R,D&gt; goto MILSPC</td>
</tr>
</tbody>
</table>
Earlier I recorded that [fill1: you are/ALIAS is] covered by military health care. What types of military health care [fill2: are you/is ALIAS] covered by?

1. TRICARE
2. VA
3. CHAMP-VA
4. Other military coverage (specify)
7. Refused
9. Don't know

All persons with military health care

if MILSPC eq 1, goto MILMAN; else, goto MILSPC for the next person with military health care; else, goto HILAST
Is [fill: your/ALIAS's] TRICARE plan, TRICARE Prime, TRICARE Select, TRICARE Reserve or TRICARE for Life?

1. TRICARE Prime
2. TRICARE Select
3. TRICARE Reserve
4. TRICARE for Life
5. TRICARE other (specify)
7. Refused
9. Don't know

All persons with TRICARE coverage

<1-4,R,D> [goto MILSPC for the next person with military health care; else, goto HILAST]
<5> [goto MILMANOT]
### Question ID: FHI.280_00.000

**Instrument Variable Name:** HILAST  
**QuestionnaireFileName:** Family

**QuestionText:**

(book) F17  ? [F1]

Not including Single Service Plans, about how long has it been since [fill: you/ALIAS] last had health care coverage?

<table>
<thead>
<tr>
<th></th>
<th>Time Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>6 months or less</td>
</tr>
<tr>
<td>2</td>
<td>More than 6 months, but less than 1 year</td>
</tr>
<tr>
<td>3</td>
<td>1 year</td>
</tr>
<tr>
<td>4</td>
<td>More than 1 year, but less than 3 years</td>
</tr>
<tr>
<td>5</td>
<td>3 years or more</td>
</tr>
<tr>
<td>6</td>
<td>Never</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons without known health insurance or with only single service plans

**SkipInstructions:** goto HISTOP

---

### Question ID: FHI.290_00.000

**Instrument Variable Name:** HISTOP  
**QuestionnaireFileName:** Family

**QuestionText:**

(book) F18

[fill1: Which of these are reasons [fill2: you/ALIAS] stopped being covered?/Which of these are reasons [fill3:you do/ALIAS does] not have health insurance?]

* Enter up to 5 reasons, separate with commas.

<table>
<thead>
<tr>
<th></th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Person in family with health insurance lost job or changed employers</td>
</tr>
<tr>
<td>02</td>
<td>Got divorced or separated/death of spouse or parent</td>
</tr>
<tr>
<td>03</td>
<td>Became ineligible because of age/left school</td>
</tr>
<tr>
<td>04</td>
<td>Employer does not offer coverage/or not eligible for coverage</td>
</tr>
<tr>
<td>05</td>
<td>Cost is too high</td>
</tr>
<tr>
<td>06</td>
<td>Insurance company refused coverage</td>
</tr>
<tr>
<td>07</td>
<td>Medicaid/Medical plan stopped after pregnancy</td>
</tr>
<tr>
<td>08</td>
<td>Lost Medicaid/Medical plan because of new job or increase in income</td>
</tr>
<tr>
<td>09</td>
<td>Lost Medicaid (other)</td>
</tr>
<tr>
<td>10</td>
<td>Other (specify)</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons without known health insurance or with only single service plans

**SkipInstructions:** <1-9,R,D> [goto FHIKDB]  
<10> [goto HISTOPOT]
Question ID: FHI.291_00.000  Instrument Variable Name: HISTOPOT  QuestionnaireFileName: Family

QuestionText: ? [F1]

* Other reason for not having coverage

Verbatim
7  Refused
9  Don't know

UniverseText: All persons without known health insurance and an "other" reason for stopping or not having coverage

SkipInstructions: goto HISTOP for the next person without known health insurance coverage or only single service plans; else, goto FHIKDB

Question ID: FHI.300_00.000  Instrument Variable Name: HINOTYR  QuestionnaireFileName: Family

QuestionText: In the PAST 12 MONTHS, was there any time when [fill: you/ALIAS] did NOT have ANY health insurance or coverage?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All persons with known health insurance coverage except single service plans

SkipInstructions: <1> [goto HINOTMYR] <2,R,D> [goto FHICHNG]

Question ID: FHI.310_00.000  Instrument Variable Name: HINOTMYR  QuestionnaireFileName: Family

QuestionText: In the PAST 12 MONTHS, about how many months [fill: were you/was ALIAS] without coverage?

* If less than 1 month, enter '1'.

01-12  1-12 months
97  Refused
99  Don't know

UniverseText: All persons with known health insurance coverage, but did not have health insurance for some period of time in the past 12 months

SkipInstructions: goto HINOTYR for the next person with known health insurance coverage, except single service plans; else, goto FHIKDB
**Question ID:** FHI.312_00.010  **Instrument Variable Name:** FHICHNG  **QuestionnaireFileName:** Family

**QuestionText:** Did [fill1: you/ALIAS] have [fill2: type of health insurance coverage] for the past 12 months?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons who are currently insured who were continuously covered in the past year

**SkipInstructions:**

<1,R,D> [goto HCSPFYR]

<2> [goto FHIKDB]
If person is currently uninsured:

{Think about the last time [fill1: you/ALIAS] had health insurance or health care coverage. What type did [fill1: you/ALIAS] have?}

If person had a period without coverage in the past year:

{I recorded that [fill1: you/ALIAS] had a period without health insurance in the past year. What type of health insurance or coverage did [fill1: you/ALIAS] have before this period?}

If person had a change in coverage type in the past year:

{What other types of health insurance or health care coverage did [fill1: you/ALIAS] have?}

*Enter all that apply, separate with commas.

01  Private health insurance
02  Medicare
03  Medi-Gap
04  Medicaid
05  SCHIP (CHIP/Children's Health Insurance Program)
06  Military health care (TRICARE/VA/CHAMP-VA)
07  Indian Health Service
08  State-sponsored health plan
09  Other government program
10  Single service plan (e.g., dental, vision, prescriptions)
11  No coverage of any type
97  Refused
99  Don't know

Universe Text:  All persons except those with continuous coverage who are currently uninsured for more than 1 year with no changes

Skip Instructions:  <1> [goto PWRKB]
<2-11,R,D> [goto HCSPFYR]
Family Health Insurance

Document Version Date: 12-Jun-19

Question ID: FHI.316_00.010  Instrument Variable Name: PWRKB  QuestionnaireFileName: Family

QuestionText: Which one of these categories best describes how [fill1: your/ALIAS's] private health insurance was obtained?

01 Through employer
02 Through union
03 Through workplace, but don't know if employer or union
04 Through workplace, self-employed or professional association
05 Purchased directly
06 Through a state/local government or community program
07 Other, specify
97 Refused
99 Don't know

UniverseText: All persons who had private health insurance previously

SkipInstructions: <1-6,R,D> [goto HCSPFYR] <7> [goto PWRKBSP]

Question ID: FHI.317_00.010  Instrument Variable Name: PWRKBSP  QuestionnaireFileName: Family

QuestionText: *Enter how private health insurance was obtained.

Verbatim  Verbatim response
7 Refused
9 Don't know

UniverseText: All persons who had private health insurance obtained from other source previously

SkipInstructions: <Allow 75 characters> [goto HCSPFYR]
The next question is about money that [fill1: you/your family has] spent out of pocket on medical care. We do NOT want you to count health insurance premiums, over the counter drugs, or costs that you will be reimbursed for. In the PAST 12 MONTHS, about how much did [fill2: you/your family] spend for medical care and dental care?

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
7 Refused
9 Don't know

In the past 12 months did [fill1: you/anyone in the family] have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home or home care.

1 Yes
2 No
7 Refused
9 Don't know

All families

<1,2,7,9> [goto MEDBPAY]
[fill 1: Do you/Does anyone in your family] currently have any medical bills that are being paid off over time? This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills can be from earlier years as well as this year.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: All families

SkipInstructions: <1,2,7,9> if MEDBILL=2 [goto FSA]; else [goto MEDBNOP]

[fill 1: Do you/Does anyone in your family] currently have any medical bills that you are unable to pay at all?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: All families but those who said they don’t have problems paying their medical bills

SkipInstructions: <1,2,7,9> [goto FSA]

[fill 1: Do you/Does anyone in your family] have a Flexible Spending Account for health expenses? These accounts are offered by some employers to allow employees to set aside pre-tax dollars of their own money for their use throughout the year to reimburse themselves for their out-of-pocket expenses for health care. With this type of account, any money remaining in the account at the end of the year, following a short grace period, is lost to the employee.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: All Families

SkipInstructions: goto PLBORN
[fill: Were you/Was ALIAS] born in the United States?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All persons

SkipInstructions: <1> [store "1" in CITIZEN and goto PLBORN1]
<2> [goto PLBORN2]
<R,D> [goto CITIZEN]
In what state [fill: were you/was ALIAS] born?

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UniverseText: All persons born in the United States

SkipInstructions: <1-51,57> [goto HEADST]
In what country [fill: were you/was ALIAS] born?

* Please record country of birth. If country not found, type "ZZ".

060 AMERICAN SAMOA
061 AM SAMOA
062 BAKER ISLAND
063 GUAM
064 HOWLAND ISLAND
065 JARVIS ISLAND
066 JOHNSTON ATOLL
067 KINGMAN REEF
068 MANUA ISLANDS
069 MIDWAY ISLANDS
070 NAVASSA ISLAND
071 NORTHERN MARIANAS
072 PALMYRA ATOLL
073 PUERTO RICO
074 ROTA
075 SAIPAN
076 SAND ISLAND
077 ST CROIX
078 ST JOHN
079 ST THOMAS
080 TINIAN
081 US OUTLYING AREA
082 US VIRGIN ISLANDS
083 USVI
084 VIRGIN ISLANDS
085 WAKE ISLAND
100 ABROAD
101 ABU DHABI
102 ADEN
103 AFGHANISTAN
104 AFRICA
105 ALBANIA
106 ALBERTA
107 ALGERIA
108 ALGIERS
109 ALSACE-LORRAINE
110 AMSTERDAM
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114 ANGUILLA BWI
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2018 NHIS Questionnaire - Family

Family Socio-Demographic

Document Version Date: 12-Jun-19

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224 CORSICA
225 COSTA RICA
226 COTE D’IVOIRE
227 CRETE
228 CRIMEA
229 CRISTOBAL
230 CROATIA
231 CUBA
232 CURACAO
233 CYPRUS
234 CZ
235 CZECH REPUBLIC
236 CZECHOSLOVAKIA
237 DA LAT
238 DA NANG
239 DAKAR
240 DANZIG
241 DELHI
242 DEMO PEOPLE’S REP OF KOREA
243 DEMO REP OF CONGO
244 DENMARK
245 DISTRITO FEDERAL
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583  ST MARTIN
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586  ST VINCENT & THE GRENADINES
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588  SUMATRA
589  SURINAM
590  SURINAME
591  SVALBARD
592  SWAZILAND
593  SWEDEN
594  SWITZERLAND
595  SYRIA
596  SYRIAN ARAB REP
597  TABASCO
598  TADZHIK
599  TAHITI
600  TAIWAN
601  TAIWAN ROC
602  TAJIKISTAN
603  TAMAULIPAS
604  TANGANYIKA
605  TANGIER
606  TANZANIA
607  TASMANIA
608  THAILAND
609  THANH HOA
610  THE GRENADINES
611  TIBET
612  TIJUANA
613  TLAXCALA
614  TOBAGO
615  TOGO
616  TOGOLAND
617  TOKELAU
618  TONGA
619  TORTOISE ISLANDS
620  TORTOLA
621  TRANSVAAL
622  TRANSYLVANIA
623  TRIESTE
624  TRINIDAD
625  TRINIDAD & TOBAGO
626  TRIPOLI
627  TROMELIN ISLAND
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<td>YUKON TERRITORY</td>
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</table>
UniverseText: All persons not born in the United States

SkipInstructions: <60-85> [store "2" in CITIZEN and goto USYR]
<100-696,996,R,D> [goto USYR]
### Question ID: FSD.004_00.000
#### Instrument Variable Name: USYR
#### QuestionnaireFileName: Family

**QuestionText:**

* Read if necessary.

Earlier I recorded [fill1: your/ALIAS's] date of birth as [fill2: AGEDOB@3(text version) AGEDOB@4, AGEDOB@5].

In what year did [fill3: you/ALIAS] come to the United States to stay?

<table>
<thead>
<tr>
<th>1880-Current Year</th>
<th>1880-Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>9997</td>
<td>Refused</td>
</tr>
<tr>
<td>9999</td>
<td>Don't know</td>
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</table>

**UniverseText:**
All persons not born in the United States

**SkipInstructions:**

<1880-Current Year> [if USYR lt AGEDOB@5, goto ERR2_USYR; else, goto CITIZEN]

< R,D> [goto USLONG]

**NOTE:** The "*Read if necessary…Earlier I recorded…” portion of this question is included for persons with complete date of birth information.

**Hard Edit:**

ERR1_USYR

*Future year invalid: [fill: USYR]. Please correct.

ERR2_USYR: * [fill year from USYR] is prior to the person's birth year.

*Please correct.

### Question ID: FSD.005_00.000
#### Instrument Variable Name: USLONG
#### QuestionnaireFileName: Family

**QuestionText:**

About how long [fill1: have you/has ALIAS] been in the United States?

* Read if necessary: Earlier I recorded that [fill2: you are/ALIAS is] [fill3: AGE] years old.

*Enter ‘95’ for 95 or more years.

*If less than 1 year given as a response, code the answer as ‘0’.

<table>
<thead>
<tr>
<th>00-94</th>
<th>00-94 years</th>
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<tbody>
<tr>
<td>95</td>
<td>95+ years</td>
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<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All persons not born in the United States and refused or don't know was reported for USYR

**SkipInstructions:**

<0-95> [if USLONG gt AGE, goto ERR_USLONG; else, goto CITIZEN]

< R,D> [goto CITIZEN]

**Hard Edit:**

ERR_LONG: * In US longer than alive!

* Please correct.
**Question ID:** FSD.006_00.000  **Instrument Variable Name:** CITIZEN  **QuestionnaireFileName:** Family

**QuestionText:**
(book) F20  ![F1]

[fill: Are you/Is ALIAS] a CITIZEN of the United States?

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
6. Refused
7. Don’t know

**UniverseText:** All persons not born in the United States or a United States territory

**SkipInstructions:**
<1> [if PLBORN eq 2, goto ERR1_CITIZEN; else, if PLBORN eq R, goto ERR3_CITIZEN; else, goto HEADST]
<2> [if (PLBORN eq 2 or PLBORN eq R), goto ERR2_CITIZEN; else, goto HEADST]
<R,D> [goto HEADST]

**Hard Edit:**

ERR1_CITIZEN
*Already indicated birth outside the United States.
*Please correct.

ERR2_CITIZEN
*Already indicated birth outside United States territory.
*Please correct.

**Soft Edit:**

ERR3_CITIZEN: Refused
Previously, you refused to say if [you/ALIAS] were/was born in the United States.
Would you like to change your answer to the question?

ERR4_CITIZEN: Don’t Know
Previously, you didn’t know if [you/ALIAS] were/was born in the United States.
Would you like to change your answer to the question?

---

**Question ID:** FSD.007_00.000  **Instrument Variable Name:** HEADST  **QuestionnaireFileName:** Family

**QuestionText:** ![F1]

Is [fill: ALIAS] now attending Head Start?

1. Yes
2. No
7. Refused
9. Don’t know

**UniverseText:** All persons less than 7 years of age

**SkipInstructions:**
<1> [if no more persons less than 7 years of age, goto EDUC; else, repeat this question for the next eligible person]
<2,R,D> [ goto HEADSTEV]
Question ID: FSD.008_00.000  Instrument Variable Name: HEADSTEV  QuestionnaireFileName: Family

QuestionText: Has [fill: ALIAS] ever attended Head Start?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All persons less than 18 years of age and not currently enrolled in Head Start

SkipInstructions: if no more persons less than 7 years of age, goto EDUC; else, goto HEADST for the next eligible person
What is the HIGHEST level of school [fill: you have/ALIAS has] completed or the highest degree [fill: you have/ALIAS has] received? Please tell me the number from the card.

* Enter highest level of school completed.

- 00 Never attended/kindergarten only
- 01 1st grade
- 02 2nd grade
- 03 3rd grade
- 04 4th grade
- 05 5th grade
- 06 6th grade
- 07 7th grade
- 08 8th grade
- 09 9th grade
- 10 10th grade
- 11 11th grade
- 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)
- 96 Child under 5 years old
- 97 Refused
- 99 Don't know

UniverseText: All persons 5 years of age or older

SkipInstructions: repeat for all eligible persons, then goto ARMFVER
Earlier [fill1: you said/it was said] [fill2: you/alias] [fill3: were/was] on full-time active duty with the Armed Forces. Is this correct?

1 Yes
2 No
7 Refused
9 Don't know

Universe Text: All families with a person age 18 or older who were said to be on active duty in the armed forces in the HHC section

Skip Instructions: <1> [goto ARMFFC] <2,R,D> [goto ARMFEV]

(fill1: Have you/Has alias) ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

*Read if necessary. Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for service in the US or in a foreign country, in support of military or humanitarian operations.

1 Yes
2 No
7 Refused
9 Don't know

Universe Text: All families with a person age 18 or older who is not currently on active duty or said R,D to active duty question

Skip Instructions: <1> [goto ARMFFC] <2,R,D> [goto DOINGLW]
### Question ID: FSD.022_00.000  Instrument Variable Name: ARMFFC  QuestionnaireFileName: Family

**QuestionText:** Did [fill1: you/alias] ever serve in a foreign country during a time of armed conflict or on a humanitarian or peacekeeping mission?

*Read if necessary. This would include National Guard or reserve or active duty monitoring or conducting peace keeping operations in Bosnia Kosovo, in the Sinai between Egypt and Israel, or in response to the 2004 tsunami, or Haiti in 2010.*

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<td>7</td>
<td>Refused</td>
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<tr>
<td>9</td>
<td>Don't know</td>
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**UniverseText:** All families with a person age 18 or older who has ever served in the armed forces

**SkipInstructions:** <1,2,R,D> [goto ARMFTMP]

---

### Question ID: FSD.023_00.000  Instrument Variable Name: ARMFTMP  QuestionnaireFileName: Family

**QuestionText:** When did [fill1: you/alias] serve on ACTIVE DUTY in the U.S. Armed Forces?

*Enter all that apply, separate with commas.*

*Enter all periods in which this person served. Enter the item even if the person served for just part of that period.*

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<tr>
<td>01</td>
<td>Sept 2001 or later</td>
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<tr>
<td>02</td>
<td>August 1990 to August 2001 (including Persian Gulf War)</td>
</tr>
<tr>
<td>03</td>
<td>May 1975 to July 1990</td>
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<td>04</td>
<td>Vietnam era (August 1964 to April 1975)</td>
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<td>05</td>
<td>February 1955 to July 1964</td>
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<td>06</td>
<td>Korean War (July 1950 to January 1955)</td>
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<td>07</td>
<td>January 1947 to June 1950</td>
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**UniverseText:** All families with a person age 18 or older who has ever served in the armed forces

**SkipInstructions:** <1,3-8,R,D> [goto DOINGLW] <2> [goto ARMFDS]

**Hard Edit:** If gray answer code is selected please display:
That selection is not valid at this time.
Please correct.
Question ID: FSD.024_00.000  Instrument Variable Name: ARMFDS  QuestionnaireFileName: Family


Yes 1
No 2
Refused 7
Don't know 9

UniverseText: All families with a person age 18 or older who served from August 1990 to August 2001

SkipInstructions: <1,2,R,D> [goto DOINGLW]

---

Question ID: FSD.025_00.000  Instrument Variable Name: VACOV  QuestionnaireFileName: Person

QuestionText: [fill1: Have you/ Has alias] ever enrolled in or used VA health care?

*Read if necessary: VA refers to Veterans Health Administration.

Yes 1
No 2
Refused 7
Don't know 9

UniverseText: All families with a person age 18 or older who has ever served in the armed forces and are not covered by VA military health care

SkipInstructions: <1,2,R,D> [goto DOINGLW]
The next few questions are about employment status.

Which of the following [fill: were you/was ALIAS] doing last week?

* Read answer categories.

1. Working for pay at a job or business
2. With a job or business but not at work
3. Looking for work
4. Working, but not for pay, at a family-owned job or business
5. Not working at a job or business and not looking for work
6. Refused
7. Don't know

All persons 18 years of age or older

NOTE: A flashcard was added to this question in quarter 3 of 2005.
Question ID:  FSD.060_00.000  
Instrument Variable Name:  WHYNOWRK  
QuestionnaireFileName:  Family

QuestionText:  

What is the main reason [fill1: you/ALIAS] did not [fill2: work last week/have a job or business last week]?

01  Taking care of house or family  
02  Going to school  
03  Retired  
04  On a planned vacation from work  
05  On family or maternity leave  
06  Temporarily unable to work for health reasons  
07  Have job/contract and off-season  
08  On layoff  
09  Disabled  
10  Other  
97  Refused  
99  Don't know

UniverseText:  
All persons 18 years of age or older who were either with a job or business but not at work, or not working at a job or business and not looking for work

SkipInstructions:  
<1-3,8-10,R,D> [goto WRKLYR]  
<4-7> [goto WRKHRS]

---

Question ID:  FSD.070_00.000  
Instrument Variable Name:  WRKHRS1  
QuestionnaireFileName:  Family

QuestionText:  

How many hours [fill: did you work LAST WEEK at ALL jobs or businesses/did ALIAS work LAST WEEK at ALL jobs or businesses/do you USUALLY work at ALL jobs or businesses/does ALIAS USUALLY work at ALL jobs or businesses]?

001-168  1-168 hours  
997  Refused  
999  Don't know

UniverseText:  
All persons 18 years of age or older who were working for pay at a job or business, or working, but not for pay, at a job or business last week, or on a planned vacation from work, or on family or maternity leave, or temporarily unable to work for health reasons, or have a job/contract and off-season

SkipInstructions:  
<1-34,R,D> [goto WRKFTALL]  
<35-94> [goto WRKLYR]  
<95-168> [goto ERR1_WRKHRS]

Soft Edit:  
* [Fill: WRKHRS] is an unusually high number.  
* Please verify.
**NHIS Questionnaire - Family**

**Family Socio-Demographic**

Document Version Date: 12-Jun-19

---

**Question ID:** FSD.080_00.000  
**Instrument Variable Name:** WRKFTALL  
**QuestionnaireFileName:** Family

**QuestionText:**  
![F1]  
[fill: Do you/Does ALIAS] USUALLY work 35 hours or more per week in total at ALL jobs or businesses?  
1. Yes  
2. No  
7. Refused  
9. Don't know

**UniverseText:** All persons 18 years of age or older who worked less than 35 hours last week or did not know/refused to answer how many hours they worked last week

**SkipInstructions:**  
[goto WRKLYR]

**NOTE ON QUESTIONNAIRE FLOW:** The instrument cycles through the appropriate questions from DOINGLW to WRKFTALL for each eligible person, then proceeds to WRKLYR.

---

**Question ID:** FSD.100_00.000  
**Instrument Variable Name:** WRKLYR  
**QuestionnaireFileName:** Family

**QuestionText:**  
![F1]  
Did [fill1: you/ALIAS] work for pay at any time in [fill2: last calendar year in 4-digit format]?  
1. Yes  
2. No  
7. Refused  
9. Don't know

**UniverseText:** All persons 18 years of age or older

**SkipInstructions:**  
<1> [goto WRKMYR]  
<2,R,D> [goto HIEMPOF]
**2018 NHIS Questionnaire - Family**  
**Family Socio-Demographic**  
Document Version Date: 12-Jun-19

---

**Question ID:** FSD.110_00.000  
**Instrument Variable Name:** WRKMYR  
**QuestionnaireFileName:** Family

**QuestionText:** How many months in [fill1: last calendar year in 4-digit format] did [fill2: you/ALIAS] have at least one job or business?

* If less than one month, enter '1'.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>1 month or less</td>
</tr>
<tr>
<td>02-12</td>
<td>2-12 months</td>
</tr>
<tr>
<td>97</td>
<td>Refused</td>
</tr>
<tr>
<td>99</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 18 years of age or older who worked last year

**SkipInstructions:** goto ERNYR

---

**Question ID:** FSD.120_00.000  
**Instrument Variable Name:** ERNYR  
**QuestionnaireFileName:** Family

**QuestionText:** What is your best estimate of [fill1: your/ALIAS's] earnings before taxes and deductions from ALL jobs and businesses in [fill2: last calendar year in 4-digit format]?

Include hourly wages, salaries, tips and commissions.

* Enter '999,995' if the reported income is greater than $999,995.

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000001-999994</td>
<td>$1-$999,994</td>
</tr>
<tr>
<td>999995</td>
<td>$999,995+</td>
</tr>
<tr>
<td>999997</td>
<td>Refused</td>
</tr>
<tr>
<td>999999</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 18 years of age or older who worked last year

**SkipInstructions:** goto HIEMPOF
<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FSD.130_00.000</th>
<th>Instrument Variable Name:</th>
<th>HIEMPOF</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>QuestionText:</td>
<td>Regarding [fill1: your/ALIAS's] job or work last week, was health insurance offered to [fill2: you/ALIAS] through [fill1: your/ALIAS's] workplace?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** All persons 18 years of age or older who were working for pay at a job or business, or with a job or business, but not at work, or working, but not for pay, at a family-owned job or business

**SkipInstructions:** goto INTROINC

*NOTE ON QUESTIONNAIRE FLOW:* The instrument cycles through the appropriate questions from WRKLYR to HIEMPOF for each eligible person, then proceeds to INTROINC.
**Family Income**

* Read the following.

The next questions are about [fill1: your total/your total family] income in [fill2: last calendar year in 4-digit format] BEFORE TAXES.

Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will be kept strictly confidential.

1  Enter 1 to continue

**UniverseText:**  All families

**SkipInstructions:**  goto FSAL

---

**Question ID:** FIN.010_00.000  **Instrument Variable Name:** FINCINT  **QuestionnaireFileName:** Family

**QuestionText:** * Read the following.

The next questions are about [fill1: your total/your total family] income in [fill2: last calendar year in 4-digit format] BEFORE TAXES.

Income is important in analyzing the health information we collect. For example, with this information, we can learn whether persons in one income group use certain types of medical services more or less often than those in another group. Please be assured that, like all other information you have provided, these answers will be kept strictly confidential.

1  Enter 1 to continue

**UniverseText:**  All families

**SkipInstructions:**  goto FSAL

---

**Question ID:** FIN.030_00.000  **Instrument Variable Name:** FSAL  **QuestionnaireFileName:** Family

**QuestionText:** ? [F1]

[fill1: Did you receive income in [fill2: last calendar year in 4-digit format] from wages and salaries?]

[fill3: When answering these questions, please remember that by "combined family income," I mean your income PLUS the income of all family members living in this household (including cohabiting partners, and armed forces members living at home).

Did any family members 18 and older, that is * Read names

(fill roster of people ge 18 years of age)

receive income in [fill2: last calendar year in 4-digit format] from...wages and salaries?]

1  Yes
2  No
7  Refused
9  Don't know

**UniverseText:**  All families with one or more persons 18 years of age or older

**SkipInstructions:**  <1> [if a single-person family, store the person number in PSAL and goto FSEINC; else, goto PSAL] <2,R,D> [goto FSEINC]
**Family Income**

**Question Text:**
* Ask or verify. Enter applicable line number(s), separate with commas.

Who received this?
(Anyone else?)

* Indicate each family member with this income.

1 Yes
2 No
7 Refused
9 Don't know

**Universe Text:**
All families with two or more persons 18 years of age or older and at least one received income from wages and salaries in the last calendar year

**Skip Instructions:**
goto FSEINC

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

---

**Question Text:**
[fill1: Did you receive income in [fill2: last calendar year in 4-digit format] from self-employment including business and farm income?/ Did ALIAS receive income in [fill2: last calendar year in 4-digit format] from self-employment including business and farm income?/Did any family members 18 and older, that is

*Read names

(fill roster of people ge 18 years of age)

receive income in [fill2: last calendar year in 4-digit format] from...self-employment including business and farm income?]

1 Yes
2 No
7 Refused
9 Don't know

**Universe Text:**
All families with one or more persons 18 years of age or older

**Skip Instructions:**
<1> [if a single-person family, store the person number in PSEINC and goto FSSRR; else, goto PSEINC]
<2,R,D> [goto FSSRR]
### 2018 NHIS Questionnaire - Family

#### Family Income

**Document Version Date:** 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.060_00.000</th>
<th>Instrument Variable Name:</th>
<th>PSEINC</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Ask or verify. Enter applicable line number(s), separate with commas.</td>
<td>Who received this?</td>
<td>(Anyone else?)</td>
<td>* Indicate each family member with this income.</td>
<td>1 Yes</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All families with two or more persons 18 years of age or older and at least one received income from self-employment in the last calendar year</td>
<td>goto FSSRR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.070_00.000</th>
<th>Instrument Variable Name:</th>
<th>FSSRR</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>? [F1]</td>
<td>Did [fill1: you/any family members living here] receive income in [fill2: last calendar year in 4-digit format] from Social Security or Railroad Retirement?</td>
<td>* Read if necessary: Social Security checks are either automatically deposited in the bank or mailed to arrive on the third of every month.</td>
<td>1 Yes</td>
<td>2 No</td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All families</td>
<td>&lt;1&gt; [if a single-person family, store the person number in PSSRR and goto FSSRDRD; else, goto PSSRR]</td>
<td>&lt;2,R,D&gt; [goto FPENS]</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td></td>
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</tr>
</tbody>
</table>
**2018 NHIS Questionnaire - Family**

**Family Income**

**Document Version Date:** 12-Jun-19

---

**Question ID:** FIN.080_00.000  
**Instrument Variable Name:** PSSRR  
**QuestionnaireFileName:** Family

**QuestionText:** * Ask or verify. Enter applicable line number(s), separate with commas.

Who received this?  
(Anyone else?)

* Indicate each family member with this income.

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:** All families with two or more persons and at least one received income from Social Security or Railroad Retirement in the last calendar year

**SkipInstructions:** goto FSSRRD

**NOTE:** In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data.

---

**Question ID:** FIN.082_00.000  
**Instrument Variable Name:** FSSRRD  
**QuestionnaireFileName:** Family

**QuestionText:** Was [fill: your/any family member's *Read names

(fill roster of all persons selected at PSSRR and AGE LE 64)]

Social Security or Railroad Retirement income received as a disability benefit?

1  Yes  
2  No  
7  Refused  
9  Don't know

**UniverseText:** All families with persons less than 65 years of age who received Social Security or Railroad Retirement income in the last calendar year

**SkipInstructions:** <1> [if only one person less than 65 years of age received Social Security or Railroad Retirement income, fill the person number in PSSRRDB and goto PSSRRD; else, goto PSSRRDB]  
<2,R,D> [goto FPENS]
Family Income

**2018 NHIS Questionnaire - Family**

*Ask or verify. Enter applicable line number(s), separate with commas.*

Was [person's] Social Security or Railroad Retirement income received as a disability benefit?

1. Yes
2. No
7. Refused
9. Don't know

All families with two or more persons less than 65 years of age who received income from Social Security or Railroad Retirement in the last calendar year and at least one received the income as a disability benefit

**NOTE:** In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

**Question ID:** FIN.086_00.000  
**Instrument Variable Name:** PSSRD  
**QuestionnaireFileName:** Family

Did [fill1: you/ALIAS] receive this benefit because [fill2: you are/he is/she is] disabled?

1. Yes
2. No
7. Refused
9. Don't know

All persons less than 65 years of age who received Social Security or Railroad Retirement income as a disability benefit in the last calendar year

repeat for all eligible persons, then goto FPENS
2018 NHIS Questionnaire - Family
Family Income

Document Version Date: 12-Jun-19

Question ID: FIN.090_00.000  Instrument Variable Name: FPENS  QuestionnaireFileName: Family

QuestionText: Did [fill1: you/any family members living here] receive income in [fill2: last calendar year in 4-digit format] from any disability pension [fill3: other than Social Security or Railroad Retirement]?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
</tbody>
</table>

UniverseText: All families

SkipInstructions: <1> [if a single-person family, store the person number in PPENS and goto FOPENS; else, goto PPENS]
<2,R,D> [goto FOPENS]

Question ID: FIN.100_00.000  Instrument Variable Name: PPENS  QuestionnaireFileName: Family

QuestionText: *Ask or verify. Enter applicable line number(s), separate with commas.

Who received this?
(Anyone else?)

*Indicate each family member with this income.

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Refused</td>
<td>7</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
</tbody>
</table>

UniverseText: All families with two or more persons and at least one received income from a disability pension (other than Social Security or Railroad Retirement) in the last calendar year

SkipInstructions: goto FOPENS

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Family Income

**Question ID:** FIN.102_00.000  **Instrument Variable Name:** FOPENS  **QuestionnaireFileName:** Family

**QuestionText:**
Did [fill1: you/any family members living here] receive income from any retirement or survivor pension other [fill2: than Social Security or Railroad Retirement/than a disability pension/than Social Security, Railroad Retirement, or a disability pension]?

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** All families

**SkipInstructions:**
<1> [if a single-person family, store the person number in POPENS and goto FSSI; else, goto POPENS]
<2,R,D> [goto FSSI]

---

**Question ID:** FIN.104_00.000  **Instrument Variable Name:** POPENS  **QuestionnaireFileName:** Family

**QuestionText:**
* Ask or verify. Enter applicable line number(s), separate with commas.

Who received this?
(Anyone else?)

* Indicate each family member with this income.

- 1 Yes
- 2 No
- 7 Refused
- 9 Don't know

**UniverseText:** All families with two or more persons and at least one received income from a retirement or survivor pension in the last calendar year

**SkipInstructions:** goto FSSI

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
### Family Income

**Question ID:** FIN.110_00.000  
**Instrument Variable Name:** FSSI  
**QuestionnaireFileName:** Family

**QuestionText:**  
Did [fill: you/any family members] receive Supplemental Security Income (SSI)?

* Read if necessary: Federal SSI checks are either automatically deposited in the bank or mailed to arrive on the first of every month.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families

**SkipInstructions:**  
<1> [if a single-person family, fill the person number in PSSI and goto PSSID; else, goto PSSI]  
<2,R,D> [goto FTANF]

---

**Question ID:** FIN.120_00.000  
**Instrument Variable Name:** PSSI  
**QuestionnaireFileName:** Family

**QuestionText:**  
*Ask or verify. Enter applicable line number(s), separate with commas.

Who in the family received this?  
(Anyone else?)

*Indicate each family member with this income.

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families with two or more persons and at least one received Supplemental Security Income (SSI) in the last calendar year

**SkipInstructions:**  
go to PSSID

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
Question ID: FIN.122_00.000  Instrument Variable Name: PSSID  QuestionnaireFileName: Family

QuestionText: Did [fill1: you/ALIAS] receive SSI because [fill2: you have/he has/she has] a disability?

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: All persons who received SSI in the last calendar year

SkipInstructions: repeat for all eligible persons, then goto FTANF

Question ID: FIN.150_00.000  Instrument Variable Name: FTANF  QuestionnaireFileName: Family

QuestionText: ? [F1]

At any time during [fill1: last calendar year in 4-digit format], even for one month, did [fill2: you/any family members living here] receive any CASH assistance from a state or county welfare program, such as (* fill specific program name)?

* Please do not include food stamps, SSI, energy assistance, or medical assistance payments.

1 Yes
2 No
7 Refused
9 Don't know

UniverseText: All families

SkipInstructions: <1> [if a single-person family, store the person number in PTANF and goto FOWBEN; else, goto PTANF] <2,R,D> [goto FOWBEN]
### Question ID: FIN.160_00.000  
**Instrument Variable Name:** PTANF  
**QuestionnaireFileName:** Family

**QuestionText:**  
*Ask or verify. Enter applicable line number(s), separate with commas.

Who in the family received this?  
(Anyone else?)

*Indicate each family member with this income.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:**  
All families with two or more persons and at least one received cash assistance from a state or county welfare program in the last calendar year

**SkipInstructions:**  
goto FOWBEN

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

### Question ID: FIN.164_00.000  
**Instrument Variable Name:** FOWBEN  
**QuestionnaireFileName:** Family

**QuestionText:**  
At any time during [fill1: last calendar year in 4-digit format], did [fill2: you/any family members living here] receive any OTHER kind of welfare assistance such as help with getting a job, placement in education or job training programs, or help with transportation or child care?

<p>| | | | |</p>
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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:**  
All families

**SkipInstructions:**  
<1> [if a single-person family, store the person number in POWBEN and goto FINTRST; else, goto POWBEN]  
<2,R,D> [goto FINTRST]
**2018 NHIS Questionnaire - Family**

**Family Income**

*Ask or verify. Enter applicable line number(s), separate with commas.*

Who received this?
(Anyone else?)

* Indicate each family member with this income.

- **1** Yes
- **2** No
- **7** Refused
- **9** Don't know

**Universe Text:** All families with two or more persons and at least one received income from some "other" kind of welfare assistance in the last calendar year

**SkipInstructions:**

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

---

**Question ID:** FIN.170_00.000  **Instrument Variable Name:** FINTRST  **QuestionnaireFileName:** Family

*Did [fill: you/any family members living here] receive income from interest bearing checking accounts, savings accounts, IRAs or certificates of deposit, money market funds, treasury notes, bonds, or any other investments that earn interest?*

* Do not include dividends

- **1** Yes
- **2** No
- **7** Refused
- **9** Don’t know

**Universe Text:** All families

**SkipInstructions:**

<1> [if a single-person family, store the person number in PINTRST and goto FDIVD; else, goto PINTRST]

<2,R,D> [goto FDIVD]
### Question ID: FIN.180_00.000  Instrument Variable Name: PINTRST  QuestionnaireFileName: Family

**QuestionText:**
*Ask or verify. Enter applicable line number(s), separate with commas.

Who received this?
(Anyone else?)

* Indicate each family member with this income.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
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<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All families with two or more persons and at least one received interest income in the last calendar year

**SkipInstructions:**
goto FDIVD

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

### Question ID: FIN.190_00.000  Instrument Variable Name: FDIVD  QuestionnaireFileName: Family

**QuestionText:**
Did [fill: you/any family members living here] receive income from dividends from stocks or mutual funds, or net rental income from property, royalties, estates or trusts?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:**
All families

**SkipInstructions:**
<1> [if a single-person family, store the person number in PDIVD and goto FCHLDSP; else, goto PDIVD]
<2,R,D> [goto FCHLDSP]
**2018 NHIS Questionnaire - Family**

**Family Income**

Document Version Date: 12-Jun-19

---

**Question ID:** FIN.200_00.000  **Instrument Variable Name:** PDIVD  **QuestionnaireFileName:** Family

**QuestionText:** * Ask or verify. Enter applicable line number(s). Separate with commas.

Who received this?
(Anyone else?)

* Indicate each family member with this income.

1 Yes
2 No
7 Refused
9 Don't know

**UniverseText:** All families with two or more persons and at least one received dividend or net rental income in the last calendar year

**SkipInstructions:** goto FCHLDSP

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

---

**Question ID:** FIN.210_00.000  **Instrument Variable Name:** FCHLDSP  **QuestionnaireFileName:** Family

**QuestionText:** ? [F1] Did [fill: you/any family members living here] receive income from child support?

1 Yes
2 No
7 Refused
9 Don't know

**UniverseText:** All families

**SkipInstructions:** <1> [if a single-person family, store the person number in PCHLDSP and goto FINCOT; else, goto PCHLDSP] <2,R,D> [goto FINCOT]
Question ID: FIN.220_00.000  
Instrument Variable Name: PCHLDSP  
QuestionnaireFileName: Family

**Question Text:**  
*Ask or verify. Enter applicable line number(s), separate with commas.*  

Who received this?  
(Anyone else?)  

* Indicate which child in the family this is for. If that child is no longer residing with this family, enter line number of custodial parent.

1 Yes  
2 No  
7 Refused  
9 Don't know  

**Universe Text:** All families with two or more persons and at least one received income from child support in the last calendar year

**Skip Instructions:** goto FINCOT  

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

---

Question ID: FIN.230_00.000  
Instrument Variable Name: FINCOT  
QuestionnaireFileName: Family

**Question Text:**  
Did [fill: you/any family members living here] receive income from any other source such as alimony, contributions from family/others, VA payments, Worker’s Compensation, or unemployment compensation?

1 Yes  
2 No  
7 Refused  
9 Don't know  

**Universe Text:** All families

**Skip Instructions:** <1> [if a single-person family, store the person number in PINCOT and goto FINCTOT; else, goto PINCOT]  
<2,R,D> [goto FINCTOT]
### 2018 NHIS Questionnaire - Family

#### Family Income

**Document Version Date:** 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.240_00.000</th>
<th>Instrument Variable Name:</th>
<th>PINCOT</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>* Ask or verify. Enter applicable line number(s), separate with commas.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Who received this?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Anyone else?)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Indicate each family member with this income</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All families with two or more persons and at least one received some &quot;other&quot; source of income in the last calendar year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>goto FINCTOT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.250_00.000</th>
<th>Instrument Variable Name:</th>
<th>FINCTOT</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td>[fill1: When answering this next question, please remember to include your income PLUS the income of all family members living in this household.]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>What is your best estimate of [fill2: your total income/the total income of all family members] from all sources, before taxes, in [fill3: last calendar year in 4 digit format]?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Enter ‘999,995’ if the reported income is greater than $999,995.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UniverseText:</strong></td>
<td>All families</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SkipInstructions:</strong></td>
<td>&lt;0-999&gt; goto ERR1_FINCTOT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;250001-999995&gt; goto ERR2_FINCTOT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;1000-250000&gt; goto HOUSEOWN</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&lt;D,R&gt; goto FPOV250</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Soft Edit:**

**ERR1_FINCTOT:**

* Do not read to the respondent.
* $[fill: FINCTOT] is unusually low. Make corrections if necessary.

**ERR2_FINCTOT:**

* Do not read to the respondent.
* $[fill: FINCTOT] is unusually high. Make corrections if necessary.
### 2018 NHIS Questionnaire - Family

#### Family Income

**Document Version Date:** 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.255_00.000</th>
<th>Instrument Variable Name:</th>
<th>FPOV250</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td>Was your total [fill1: family/ ] income from all sources less than [fill2: 250% of poverty threshold] or [fill2: 250% of poverty threshold] or more?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Less than [fill2: 250% of poverty threshold]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>[fill2: 250% of poverty threshold] or more</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** Respondents who don't know or refuse their total family income

**SkipInstructions:**

```
<1> goto FPOV138
<2> if PCNT in('01','02') then goto FINC75;
    else if PCNT in('04','07','08','09') then goto FPOV400;
    else if PCNT in('03','05','06') then goto FINC100
    <R,D> goto HOUSEOWN
```

---

<table>
<thead>
<tr>
<th>Question ID:</th>
<th>FIN.258_00.000</th>
<th>Instrument Variable Name:</th>
<th>FPOV138</th>
<th>QuestionnaireFileName:</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QuestionText:</strong></td>
<td></td>
<td>Was your total [fill1: family/ ] income from all sources less than [fill2: 138% of poverty threshold] or [fill2: 138% of poverty threshold] or more?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Less than [fill2: 138% of poverty threshold]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>[fill2: 138% of poverty threshold] or more</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:** The respondent answered less than 250% of poverty at FPOV250

**SkipInstructions:**

```
<1> goto FPOV100
<2> goto FPOV200
<R,D> goto HOUSEOWN
```
2018 NHIS Questionnaire - Family

Family Income

Question ID: FIN.261_00.000  Instrument Variable Name: FPOV100  QuestionnaireFileName: Family

QuestionText: Was your total [fill1: family/ ] income from all sources less than [fill2: 100% poverty threshold] or [fill2: 100% poverty threshold] or more?

1  Less than [fill2: 100% of poverty threshold]
2  [fill2: 100% poverty threshold] or more
7  Refused
9  Don't know

UniverseText: The respondent answered less than 138% of poverty at FPOV138

SkipInstructions: <1,2,R,D> goto HOUSEOWN

Question ID: FIN.264_00.000  Instrument Variable Name: FPOV200  QuestionnaireFileName: Family

QuestionText: Was your total [fill1: family/ ] income from all sources less than [fill2: 200% of poverty threshold] or [fill2: 200% of poverty threshold] or more?

1  Less than [fill2: 200% of poverty threshold]
2  [fill2: 200% poverty threshold] or more
7  Refused
9  Don't know

UniverseText: The respondent answered 138% of poverty or more at FPOV138

SkipInstructions: <1,2,R,D> goto HOUSEOWN

Question ID: FIN.267_00.000  Instrument Variable Name: FINC75  QuestionnaireFileName: Family

QuestionText: Was your total [fill: family] income from all sources less than $75,000 or $75,000 or more?

1  Less than $75,000
2  $75,000 or more
7  Refused
9  Don't know

UniverseText: The respondent answered 250% of poverty threshold or more at FPOV250 and he/she is from a 1 or 2 person family

SkipInstructions: <1> goto FPOV400
                <2> goto FINC100
                <R,D> goto HOUSEOWN
2018 NHIS Questionnaire - Family

Family Income

Document Version Date: 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIN.270_00.000</td>
<td>FINC100</td>
<td>Family</td>
<td>Was your total [family] income from all sources less than $100,000 or $100,000 or more?</td>
<td>The respondent answered $75,000 or more at FINC75 and he/she is from a 1 or 2 person family; or the respondent answered 250% of poverty or more at FPOV250 and he/she is from a 3, 5, or 6 person family</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 Less than $100,000</td>
<td>SkipInstructions: &lt;1&gt; if PCNT in('01','02','05','06') then goto HOUSEOWN; else if PCNT='03' then goto FPOV400 &lt;2&gt; if PCNT in('01','02','03') then goto FINC150; else if PCNT in ('05','06') then goto FPOV400 &lt;R,D&gt; goto HOUSEOWN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 $100,000 or more</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7 Refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9 Don't know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIN.273_00.000</td>
<td>FPOV400</td>
<td>Family</td>
<td>Was your total [family] income from all sources less than [fill2: 400% of poverty threshold] or [fill2: 400% of poverty threshold] or more?</td>
<td>The respondent answered less than $75,000 at FINC75 and he/she is from a 1 or 2 person family; or the respondent answered less than $100,000 at FINC100 and he/she is from a 3 person family; or the respondent answered $100,000 or more at FINC100 and he/she is from a 5 or 6 person family; or the respondent answered 250% of poverty or more at FPOV250 and he/she is from a 4, 7, 8, or 9+ person family</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 Less than [fill2: 400% of poverty threshold]</td>
<td>SkipInstructions: &lt;1&gt; if PCNT &gt;= '08' then goto FINC150; else goto HOUSEOWN &lt;2&gt; if PCNT in('01','02','03','07','08' ) goto HOUSEOWN; else if PCNT in('04','05','06') goto FINC150 &lt;R,D&gt; goto HOUSEOWN</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 [fill2: 400% of poverty threshold] or more</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7 Refused</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9 Don't know</td>
<td></td>
</tr>
</tbody>
</table>
### Question ID: FIN.276_00.000  Instrument Variable Name: FINC150  QuestionnaireFileName: Family

**Question Text:**
Was your total [fill: family] income from all sources less than $150,000 or $150,000 or more?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less than $150,000</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>$150,000 or more</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:**
The respondent answered $100,00 or more at FINC100 and he/she is from a 1, 2, or 3 person family; or the respondent answered 400% of poverty or more at FPOV400 and he/she is from a 4, 5, or 6 person family; or the respondent answered less than 400% of poverty at FPOV400 and he/she is from a family of 8 or more persons

**SkipInstructions:**  
<1,2,R,D> goto HOUSEOWN

---

### Question ID: FIN.280_00.000  Instrument Variable Name: HOUSEOWN  QuestionnaireFileName: Family

**Question Text:**
Is this house/apartment owned or being bought, rented, or occupied by some other arrangement by you [fill: /or someone in your family]?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Owned or being bought</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Rented</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Other arrangement</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
<td></td>
</tr>
</tbody>
</table>

**UniverseText:**
All families

**SkipInstructions:**  
<1,3,R,D> [goto FSSAPL]  
<2> [goto FGAH]
### Question ID: FIN.282_00.000
#### Instrument Variable Name: FGAH
#### QuestionnaireFileName: Family

**QuestionText:**

> [fill: Are you/Is anyone in your family] paying lower rent because the Federal, State, or local government is paying part of the cost?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families that rent their house/apartment

**SkipInstructions:** goto FSSAPL

---

### Question ID: FIN.300_00.000
#### Instrument Variable Name: FSSAPL
#### QuestionnaireFileName: Family

**QuestionText:**

> [fill: Have you EVER applied for Supplemental Security Income or SSI, even if the claim was denied?/Have any family members living here EVER applied for Supplemental Security Income (SSI)? This includes people who applied for benefits, even if the claim was denied.]

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
<tr>
<td>7</td>
<td>Refused</td>
</tr>
<tr>
<td>9</td>
<td>Don't know</td>
</tr>
</tbody>
</table>

**UniverseText:** All families

**SkipInstructions:** <1> [if a single-person family, store the person number in PSSAPL and goto FSDAPL; else, goto PSSAPL] <2,R,D> [goto FSDAPL]
**Question ID:** FIN.310_00.000  
**Instrument Variable Name:** PSSAPL  
**QuestionnaireFileName:** Family

**QuestionText:**  
*Ask or verify. Enter applicable line number(s), separate with a comma.*  

Who in the family applied for it?  
(Anyone else?)  

* Indicate each family member who applied for SSI benefits.  

1. Yes  
2. No  
7. Refused  
9. Don't know

**UniverseText:** All families with two or more persons and at least one applied for SSI

**SkipInstructions:**  
*NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.*

**Question ID:** FIN.330_00.000  
**Instrument Variable Name:** FSDAPL  
**QuestionnaireFileName:** Family

**QuestionText:**  
[fill: Have you EVER APPLIED for disability benefits from Social Security even if the claim was denied?/Have any family members living here EVER applied for disability benefits from Social Security? This includes people who applied for benefits, even if the claim was denied.]  

1. Yes  
2. No  
7. Refused  
9. Don't know

**UniverseText:** All Families

**SkipInstructions:**  
<1> [if a single-person family, store the person number in PSDAPL and goto TANFMYR; else, goto PSDAPL]  
<2,R,D> [goto TANFMYR]
### 2018 NHIS Questionnaire - Family

#### Family Income

Document Version Date: 12-Jun-19

<table>
<thead>
<tr>
<th>Question ID</th>
<th>Instrument Variable Name</th>
<th>QuestionnaireFileName</th>
<th>QuestionText</th>
<th>UniverseText</th>
<th>SkipInstructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIN.340_00.000</td>
<td>PSDAPL</td>
<td>Family</td>
<td>* Ask or verify. Enter applicable line number(s), separate with commas. Who in the family applied for it? (Anyone else?) * Indicate each family member who applied for Social Security Disability benefits.</td>
<td>All families with two or more persons and at least one applied for Social Security Disability benefits</td>
<td>goto TANFMYR</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2 No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>7 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9 Don't know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question ID</td>
<td></td>
<td></td>
<td><strong>Question ID:</strong> FIN.350_00.000 <strong>Instrument Variable Name:</strong> TANFMYR <strong>QuestionnaireFileName:</strong> Family <strong>QuestionText:</strong> Earlier I recorded that [fill1: you/ALIAS] received cash assistance from programs such as welfare or public assistance in [fill2: last calendar year in 4-digit format]. During [fill2: last calendar year in 4-digit format], about how many months did [fill1: you/ALIAS] receive this assistance? *Enter '1' if less than one month.</td>
<td>All persons who received cash assistance from public assistance programs in the last calendar year</td>
<td>repeat for all eligible persons, then goto FSNAP</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>01-12 1-12 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>97 Refused</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>99 Don't know</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
At any time during [fill 1: last calendar year in 4-digit format], did [fill 2: you/any family members living here] receive [fill 3: food stamp benefits/SNAPNAME or food stamp benefits]?

1 Yes
2 No
7 Refused
9 Don't know

Family received food stamp/SNAP benefits in previous calendar year

* Enter "1" if less than 1 month
2018 NHIS Questionnaire - Family

Family Income

Document Version Date: 12-Jun-19

Question ID: FIN.384_00.000  Instrument Variable Name: FINWIC  QuestionnaireFileName: Family

QuestionText: ? [F1]

At any time during [fill1: last calendar year in 4-digit format] did [fill2: you/anyone in your family] receive benefits from the WIC program, that is, the Women, Infants and Children program?

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families with females 12-55 years of age or children 0-5 years of age

SkipInstructions: <1> [if a single-person family, store the person number in PWIC and goto FMSSN; else, goto PWIC] <2,R,D> [goto FMSSN]

———

Question ID: FIN.385_00.000  Instrument Variable Name: PWIC  QuestionnaireFileName: Family

QuestionText: * Ask or verify. Enter applicable line number(s), separate with commas.

Who in the family received this?
(Anyone else?)

* Indicate family members who were authorized to receive WIC benefits.

1  Yes
2  No
7  Refused
9  Don't know

UniverseText: All families with two or more persons who are female and between the ages of 12-55 or children between the ages of 0-5, and at least one received WIC benefits in the last calendar year

SkipInstructions: goto FMSSN

NOTE: In the instrument, interviewers enter the line numbers associated with the persons reported by the respondent. As shown above, each eligible person receives an edited response code in subsequent data processing.
How well [fill: do you/ does ALIAS] speak English? Would you say…

*Read categories below.

1. Very well
2. Well
3. Not well
4. Not at all
7. Refused
9. Don’t know

All persons age 5 and older

<1-4> goto next section