

Question Text/Description	Code List	Routing
INTERVIEWER REMARKS QUESTIONNAIRE SPECIFICATIONS <u>CRITERIA</u> (N/A) <u>PLACEMENT</u> (N/A)		
THE COMMUNITY INTERVIEW FOR (SP) WAS CONDUCTED [WITH (PROXY NAME)] ON (INTERVIEW COMPLETION DATE).		IR3-RRECHLP
DID [(SP)/(PROXY NAME)] RECEIVE ANY HELP IN ANSWERING THE QUESTIONS?	(01) YES (02) NO	(01) IR4 - IRHELPER (02) IR5 - RINFOSAT
WHO HELPED [(SP)/(PROXY NAME)] ANSWER THE QUESTIONS? SELECT OR ADD ONLY ONE PERSON.	DISPLAY PERSON ROSTER AS RESPONSE OPTIONS: 1. [PERSON 1] 2. [PERSON 2] ... (01-N) LIST ALL PERSONS AS RESPONSE OPTIONS (N+1) ADD ANOTHER DISPLAY: 1 First Name Display ROST.ROSTFNAM. 2 Last Name Display ROST.ROSTLNAM. 3 Relationship to SP Display relationship: If ROST.ROSTREL=91/OtherRelative or 92/OtherNon-Relative, display ROST.ROSTREOS. Else display ROST.ROSTREL relationship.	(01-N) IR5 - RINFOSAT (N+1) IR4-ROSTFNAM IF EXISTING PERSON SELECTED, GO TO IR5 - RINFOSAT ELSE IF "ADD ANOTHER" SELECTED, GO TO IR4-ROSTFNAM
[What is the name of the person and relationship to (SP)?]	(01) continuous answer	IR4-ROSTLNAM
[What is the name of the person and relationship to (SP)?]	(01) continuous answer	IR4-ROSTREL

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[What is the name of the person and relationship to (SP)?]	(02) SPOUSE (03) SON (04) DAUGHTER (05) BROTHER (06) SISTER (07) FATHER (08) MOTHER (09) SON-IN-LAW (10) DAUGHTER-IN-LAW (11) GRANDSON (12) GRANDDAUGHTER (13) NEPHEW (14) NIECE (51) FRIEND/NEIGHBOR (52) BOARDER (53) NURSE/NURSE'S AIDE (54) LEGAL/FINANCIAL OFFICER (55) GUARDIAN (56) PARTNER (57) ROOMMATE (91) OTHER (-8) Don't Know (-9) Refused	(01) DO NOT DISPLAY (02) IR5-RINFOSAT (03) IR5-RINFOSAT (04) IR5-RINFOSAT (05) IR5-RINFOSAT (06) IR5-RINFOSAT (07) IR5-RINFOSAT (08) IR5-RINFOSAT (09) IR5-RINFOSAT (10) IR5-RINFOSAT (11) IR5-RINFOSAT (12) IR5-RINFOSAT (13) IR5-RINFOSAT (14) IR5-RINFOSAT (50) DO NOT DISPLAY (51) IR5-RINFOSAT (52) IR5-RINFOSAT (53) IR5-RINFOSAT (54) IR5-RINFOSAT (55) IR5-RINFOSAT (56) IR5-RINFOSAT (57) IR5-RINFOSAT (91) IR4 - ROSTREOS (-8) IR5-RINFOSAT (-9) IR5-RINFOSAT
[What is the name of the person and relationship to (SP)?]	(01) continuous answer	IR5-RINFOSAT
DO YOU FEEL THAT THE INFORMATION PROVIDED BY [(SP)/(PROXY NAME)] WAS SATISFACTORY?	(01) YES (02) NO	(01) BOX IR3 (02) IR5OV - RINFOVB
WHICH OF THE FOLLOWING REASONS BELOW BEST DESCRIBES WHY YOU THINK THAT THE INFORMATION PROVIDED WAS UNSATISFACTORY? SELECT ALL THAT APPLY.	(01) DON'T THINK RESPONDENT GAVE ACCURATE INFORMATION (02) DON'T THINK RESPONDENT GAVE INFORMATION (OMITTED EVENT(S) OR STATEMENTS(S) ETC.) (03) INFORMATION GIVEN BY THE RESPONDENT APPEARED TO BE CONTRADICTORY (ANSWERS DIDN'T ALIGN WITH STATEMENTS)	BOX IR3
IF SP'S PREVIOUS ROUND INTERVIEW WAS IN A FACILITY, GO TO BOX IR3A. IF SP IS IN THE SUPPLEMENTAL SAMPLE, BOX IR3A2 IF THIS IS AN EXIT CASE AND THE PREVIOUS ROUND INTERVIEW WAS NOT SKIPPED, GO TO IR5C - INTVTIME. ELSE GO TO REXPERI- REXPERI.		

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<p>DO YOU FEEL THAT [(SP)/(PROXY NAME)] EXPERIENCED ANY OF THE FOLLOWING DURING THE INTERVIEW?</p> <p>SELECT ALL THAT APPLY.</p>	<p>(01) INTERVIEW FATIGUE (02) FRUSTRATION WITH UTILIZATION (03) FRUSTRATION WITH COST SERIES (04) FRUSTRATION WITH HEALTH STATUS & FUNCTIONING (HFQ) (05) FRUSTRATION WITH OTHER SECTIONS (06) TROUBLE RECALLING UTILIZATION EVENTS (07) TROUBLE PROVIDING PRESCRIPTION MEDICINE INFORMATION (08) TROUBLE PROVIDING COST INFORMATION (09) NONE OF THE ABOVE</p>	<p>IR5A- REFERCAL</p>
<p>DURING THE INTERVIEW, DID THE RESPONDENT/PROXY REFER TO ENTRIES MADE BY THE RESPONDENT OR THE PROXY IN A CALENDAR OR PLANNER?</p>	<p>(01) YES- PLANNER PROVIDED BY MCBS (02) YES- A PERSONAL CALENDAR OR PLANNER (INCLUDING PAPER OR DIGITAL CALENDAR OR PLANNER) (03) NO- DID NOT REFERENCE A CALENDAR OR PLANNER (04) DON'T KNOW/UNABLE TO TELL</p>	<p>OTHTELE</p>
<p>DURING THE INTERVIEW, DID THE RESPONDENT MENTION ANY TELEPHONE OR VIDEO VISITS IN UTILIZATION SECTIONS <u>OTHER THAN</u> MEDICAL PROVIDER UTILIZATION (MPQ)?</p> <p>THESE VISITS ARE ALSO REFERRED TO AS "TELEHEALTH VISITS", "VIRTUAL CHECK-INS", OR "E-VISITS."</p>	<p>(01) YES (02) NO (-8) DON'T KNOW</p>	<p>(01) TELEUTIL- TELEUTIL (02) BOX IR3A (-8) BOX IR3A</p>
<p>SELECT ALL OTHER UTILIZATION SECTIONS WHERE THE RESPONDENT MENTIONED HAVING A TELEPHONE OR VIDEO VISIT.</p>	<p>(01) DENTAL, VISION, & HEARING UTILIZATION (DVH) (02) EMERGENCY ROOM UTILIZATION (ERQ) (03) INPATIENT HOSPITAL UTILIZATION (IPQ) (04) OUTPATIENT HOSPITAL UTILIZATION (OPQ) (05) INSTITUTIONAL UTILIZATION (IUQ) (06) HOME HEALTH UTILIZATION (HHQ)</p>	<p>BOX IR3A</p>

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IF INTTYPE IN(3) THEN GOTO BOX IR3A2. ELSE GO TO IR5B-STATEMENTTYPE		
HOW DID YOU OBTAIN STATEMENT INFORMATION FOR THIS INTERVIEW? SELECT ALL THAT APPLY.	(01) FROM PAPER STATEMENT(S) (02) FROM ELECTRONIC STATEMENT(S) PRINTED BY RESPONDENT (03) FROM ELECTRONIC STATEMENT(S) VIEWED ON A COMPUTER OR OTHER ELECTRONIC DEVICE (04) FROM SOME OTHER WAY (05) NO STATEMENTS COLLECTED DURING THIS INTERVIEW (06) DON'T KNOW/UNABLE TO TELL	BOX IR3A1
IF IR5B-STATEMENTTYPE INCLUDES (04) SOME OTHER WAY GOTO IR5B1-STATEMENTTYPEOTH, ELSE GOTO IR5C-INTVTIME.		
PLEASE DESCRIBE THE WAY(S) YOU OBTAINED STATEMENT INFORMATION FOR THIS INTERVIEW.	(01) continuous answer	IR5C-INTVTIME
DID THE RESPONDENT UTILIZE THE FOLDER PROVIDED BY THE PROJECT TO STORE STATEMENTS?	(01) YES (02) NO	IR5C-INTVTIME
IF INTTYPE=3, GO TO IRB3-REMEMLTR ELSE GO TO IR5C-INTVTIME		
AN ADVANCE LETTER ABOUT THIS STUDY WAS SENT DIRECTLY TO THE BENEFICIARY PRIOR TO FIRST CONTACT. DID THE RESPONDENT REMEMBER SEEING THE ADVANCE LETTER?	(01) YES (02) NO (-8) DON'T KNOW	IRB4-FIASKLTR

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DID YOU MENTION THE ADVANCE LETTER TO THE RESPONDENT AS A GAINING COOPERATION TOOL?	(01) YES (02) NO (-8) DON'T KNOW	IR5C-INTVTIME
HOW LONG WAS THIS INTERVIEW? INCLUDE ALL THE TIME YOU SPENT INTERVIEWING IN THE RESPONDENT/PROXY'S HOME (AND/OR ON THE PHONE WITH THE RESPONDENT/PROXY).	(01) LESS THAN 1 HOUR (02) FROM 1-2 HOURS (03) FROM 2-4 HOURS (04) MORE THAN 4 HOURS	(01) BOX IR3B (02) BOX IR3B (03) IR5D - LT_REASON (04) IR5D - LT_REASON
WHY DO YOU THINK THIS INTERVIEW TOOK AS LONG AS IT DID? CHECK ALL THAT APPLY.	(01) HEAVY UTILIZATION (02) MANY STATEMENTS (03) STATEMENTS WERE DISORGANIZED (04) STATEMENTS WERE ELECTRONIC AND HARD TO ACCESS (05) R HAD QUESTIONS COMPREHENSION PROBLEMS (06) R WAS TALKATIVE/RAMBLING (07) MANY EXTERNAL INTERRUPTIONS (08) ALWAYS TAKES THIS LONG (91) OTHER	(01) BOX IR3B (02) BOX IR3B (03) BOX IR3B (04) BOX IR3B (05) BOX IR3B (06) BOX IR3B (07) BOX IR3B (08) BOX IR3B (91) IR5I - LT_OTHERWHY
PLEASE PROVIDE MORE INFORMATION BELOW ABOUT THE LENGTH OF THE INTERVIEW.	(01) continuous answer	BOX IR3B
IF SP IS DECEASED, GO TO IR10. ELSE IF (SP IS IN THE SUPPLEMENTAL SAMPLE) OR (SP'S PREVIOUS ROUND INTERVIEW WAS IN A FACILITY) OR (SP MOVED IN THE CURRENT ROUND) OR (IN THE MOST RECENT ROUND WHERE THE IRQ WAS COMPLETED, DRIVING DIRECTIONS WERE NOT REPORTED), GO TO IR6B - IRDRIVE. ELSE GO TO IR6C - IRDRIVEVB.		
IF THERE ARE ANY INSTRUCTIONS THAT WOULD ASSIST AN INTERVIEWER NEXT ROUND IN REACHING THE RESPONDENT, PLEASE WRITE THEM IN THE BOX BELOW. IF THERE ARE NONE, PLEASE SIMPLY HIT 'NEXT PAGE' BUTTON.	(01) continuous answer	IR7OV - INTCVB

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<p>ARE THERE ANY (OTHER) COMMENTS YOU WOULD LIKE TO MAKE ABOUT THE RESPONDENT OR INTERVIEWING SITUATION (THAT COULD HELP THE NEXT INTERVIEWER COMPLETE THIS CASE)?</p> <p>PLEASE ADD ANY INFORMATION ABOUT EVENTS OR PLANS TO BE ADDED IN THE QUESTIONNAIRE NEXT ROUND.</p> <p>ADD INFORMATION ABOUT RESPONDENT'S HEALTH STATUS SUCH AS IF THEY MAY NEED A PROXY NEXT ROUND OR IF YOU HAVE INDICATION THAT THE RESPONDENT MAY MOVE.</p> <p>ADD ANY INFORMATION ABOUT HOW THE RESPONDENT STORES THEIR STATEMENTS. THIS INCLUDES IF THE RESPONDENT KEEPS PRINTED STATEMENTS OR HAS ELECTRONIC VERSIONS.</p> <p>CHARACTER LIMIT: 1042 [THIS SHOULD CHANGE BASED ON CHARACTERS ALREADY TYPED, OVERALL LIMIT=1042]</p>	(01) continuous answer	IR10-SAVEIRQ
IRQ SESSION IS COMPLETE.		BOX IREND
RETURN TO CM-FIELD		