

HCSUS 2nd Follow-up
6. Utilization
Section J: Pharmacy

INTERVIEWER: RECORD TIME THIS SECTION BEGINS HERE: , , : , , A.M./P.M.

J1. Since we last interviewed you on FU1DATE, have you filled or refilled a prescription?

YES..... 1 (G06J01)
NO 2

IF J1 <> 1, GO TO MODULE 7

J2. What is the name of the doctor, pharmacy or buyers club you used most recently to fill or refill a prescription?

_____ (G06J02)

J3. What city and state is this (person/place) in?

CITY: _____ (G06J03C)

STATE: _____ (G06J03S)

ASK J4 THRU J6 FOR UP TO 10 PHARMACIES.

J4. Where else did you go to fill or refill a prescription since FU1DATE?

(G06J041-G06J04A)

ENTER PHARMACY/DOCTOR/BUYERS CLUB INFO 1
NO OTHER PROVIDERS VISITED 2

J5. PHARMACY/DOCTOR/BUYERS CLUB:

_____ (G06J051-G06J05A)

J6. What city and state is this (person/place) in?

CITY: _____ (G06J061C-G06J06AC)

STATE: _____ (G06J061S-G06J06AS)

IF J4 = 2 OR J4 = REF OR J4 = DK, GO TO J8

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J7. Calculation: ADD UP NUMBER OF PHARMACIES
(G06J07)

J8. Thinking about all the prescriptions you have filled since FU1DATE, how much have you paid or will you pay for medications?

Do not include payments you expect to be reimbursed by insurance. Do include payments made by family or friends that will not be reimbursed by insurance or anyone else.

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(G06J08)

Valid Values: 0-9999

IF J8 = DK,REF, GO TO J9, ELSE GO TO MODULE 7

J9. Do you think the total is more than \$250?

YES..... 1 (G06J09)
NO 2

IF J9 = 2, GO TO J11
IF J9 = REF, GO TO MODULE 7

J10. Is the total more than \$500?

YES..... 1 (G06J10)
NO 2

IF J10 = ASKED, GO TO MODULE 7

J11. Is the total less than \$100?

YES..... 1 (G06J11)
NO 2