

The Centers for Medicare & Medicaid Services' Office of Research, Development, and Information (ORDI) strives to make information available to all. Nevertheless, portions of our files including charts, tables, and graphics may be difficult to read using assistive technology.

Persons with disabilities experiencing problems accessing portions of any file should contact ORDI through email at ORDI_508_Compliance@cms.hhs.gov.

Medicare Current Beneficiary Survey

Section Specifications for OMQ R58 2010

OTHER MEDICAL EXPENSES UTILIZATION

Created on 10/1/2010 4:20:50 PM

OM1

Yes/No

QUESTION TEXT

Next I'm going to ask you about other medical expenses that [you/(SP)] may have had between (REFERENCE DATE/SURVEY REFERENCE DATE) and (today/(DATE OF DEATH/DATE OF INSTITUTIONALIZATION)).

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy, replace, or pay for repairs of eyeglasses or contact lenses?

FIELD 1: OMPREYEG**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM2 - EVENT_OMEYEG
2	NO	OM3 - OMPRHEAR
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	OM3 - OMPRHEAR
	Refused	OM3 - OMPRHEAR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPREYEG	1

OM2

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy or repair glasses or contact lenses?

Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT_OMEYEG

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1AA

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all eyeglasses or contacts that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and

EVNT.EVNTRNDC = current round, and

EVNT.EVNTTYPE = 'OM', and

EVNT.OMETYPE = 1/EyeGlasses.

Display all loaded events as protected rows.

Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair Date	Display EVENT DATE in "Mon DD YYYY" format.
2	OME Type	Display OM Type, EVNT.OMETYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 1/EyeGlasses.
STOMTYPE	EVNT.STOMTYPE = 1/EyeGlasses.
EVNTPROV	EVNT.EVNTPROV = 01.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

BOX OM1AA

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM2_IN - NAVIGATOR.

ELSE GO TO BOX OM1AA2.

OM2_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM2A - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1AA2

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM2A

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy or repair the glasses or contact lenses at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the glasses or lenses at a plan center; at an optician, optometrist or other place that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO

FIELD 1 ROUTING

Value	Label	Route
1	YES	BOX OM1AA1
2	NO	BOX OM1AA1
	Don't Know	BOX OM1AA1
	Refused	BOX OM1AA1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS

REPORT DISPLAY

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1AA1

BOX INSTRUCTIONS

GO TO OM2_IN - NAVIGATOR.

BOX OM1AA2

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO OM3 - OMPRHEAR.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

OM3

Yes/No

QUESTION TEXT

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy, replace, or pay for repairs of a hearing aid, amplifier for a telephone, or similar device to help [you/(SP)] hear or speak?

FIELD 1: OMPRHEAR**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM4 - EVENT_OMHEAR
2	NO	BOX OMA1
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OMA1
	Refused	BOX OMA1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRHEAR	1

OM4

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy or repair a hearing or speech device? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT OMHEAR

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1BB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all Hearing Devices that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and

EVNT.EVNTRNDC = current round, and

EVNT.EVNTTYPE = 'OM', and

EVNT.OMETYPE = 2/Hearing.

Display all loaded events as protected rows.

Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair Date	Display EVENT DATE in "Mon DD YYYY" format.
2	OME Type	Display OM Type, EVNT.OMETYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 2/Hearing.
STOMTYPE	EVNT.STOMTYPE = 2/Hearing.
EVNTPROV	EVNT.EVNTPROV = 01.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

BOX OM1BB

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM4_IN - NAVIGATOR.

ELSE GO TO BOX OM1BB2.

OM4_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM4A - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1BB2

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM4A

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy or repair the hearing or speech device at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the hearing or speech device at a plan center; from an audiologist, speech pathologist, or other provider that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1BB1
2	NO	BOX OM1BB1
	Don't Know	BOX OM1BB1
	Refused	BOX OM1BB1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1BB1

BOX INSTRUCTIONS

GO TO OM4_IN - NAVIGATOR.

BOX OM1BB2

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OMA1.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OMA1

BOX INSTRUCTIONS

IF SP WAS STILL RENTING AT LEAST ONE ORTHOPEDIC ITEM AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO OMS5INTR - ORTHINTRO.

ELSE GO TO OM5 - OMPRORTH.

OMS5INTR

No Entry

QUESTION TEXT

The next questions are about orthopedic items [you were/(SP) was] renting as of (REFERENCE DATE).

FIELD 1: ORTHINTRO**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	OMS5_IN - NAVIGATOR
	Empty	OMS5_IN - NAVIGATOR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OMS5_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OMS5 - RENTSTIL
2	CONTINUE INTERVIEW SELECTED	OM5 - OMPRORTH

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OMS5

Code 1

QUESTION TEXT

At the time of the last interview, [you were/(SP) was] renting (ORTHOPEDIC ITEM). As of (today/DATE OF DEATH/DATE OF INSTITUTIONALIZATION), (was/were/is/are) the (ORTHOPEDIC ITEM) being rented?

FIELD 1: RENTSTIL

FIELD 1 ROUTING

Value	Label	Route
1	YES	BOX OM1EE
2	NO	OM7C - EVENDMM
3	EVENT ENTERED IN ERROR	BOX OM4
	Don't Know	BOX OM4
	Refused	BOX OM4

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS

BACKGROUND VARIABLE ASSIGNMENTS

Variable Name	Assignment Instructions
RENTRECR	If OMS5 - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OMS5 - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OMS5 - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OMS5 - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OMS5 - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OMS5 - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OMS5 - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OMS5 - RENTSTIL = RF, set EVNT.EVENDYY = RF.
EVNTDFLG	If OMS5 - RENTSTIL = 3/EnteredInError, set EVNT.EVNTDFLG = 1/Yes.

OM5

Yes/No

QUESTION TEXT

SHOW CARD OM1

(Other than what we already talked about,) [(Since/since) (REFERENCE DATE/SURVEY REFERENCE DATE)/(Between/between) (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy, repair or rent (other) orthopedic items, such as any of those listed on this card?

[Orthopedic items include crutches, canes, wheelchairs, walkers, corrective shoes or inserts, support stockings, and braces or supports.]

FIELD 1: OMPRORTH**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM6 - ORTHTYPE
2	NO	OM9 - OMPRDIAB
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY,
	Don't Know	OM9 - OMPRDIAB
	Refused	OM9 - OMPRDIAB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRORTH	1

OM6

Code 1

QUESTION TEXT

What was the item?

FIELD 1: ORTHTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	BRACES/SUPPORTS	OM7 - EVENT_OMORTH
2	CANE	OM7 - EVENT_OMORTH
3	CORRECTIVE SHOES/INSERTS	OM7 - EVENT_OMORTH
4	CRUTCHES	OM6A - RENTPROB
5	WALKER	OM6A - RENTPROB
6	WHEELCHAIR/CART	OM6A - RENTPROB
7	STOCKINGS	OM7 - EVENT_OMORTH
91	OTHER	OM6 - EVOSTEXT

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.ORTHTYPE	1

FIELD 2: EVOSTEXT

OTHER (SPECIFY)

FIELD 2 ROUTING

Value	Label	Route
1	[Continuous answer.]	OM6A - RENTPROB

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVOS.EVOSTEXT EVOSTEXT and EVNTQUES are stored on tblEVNT in SQL and then transformed to EVOS in Cheshire: EVOS.EVOSNUM = unique sequential # EVOS.EVOSRND = current round EVOS.EVOSTEXT = EVNT.EVOSTEXT EVOS.EVNTQUES = EVNT.EVNTQUES	1

OTHER PROGRAMMING INSTRUCTIONS**DESIGN NOTES**

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

OM6 - ORTHTYPE and OM6 - EVOSTEXT are EVENT level detail.

The response to OM6 - ORTHTYPE needs to be copied to EVNT.ORTHTYPE for each Event selected at OM7 or OM7A.

The response to OM6 - EVOSTEXT needs to be copied to EVNT.EVOSTEXT for each Event selected at OM7 or OM7A.

OM6A

Code 1

QUESTION TEXT

Did [you/(SP)] buy or repair the (ORTHOPEdic ITEM), or did [you/(SP)] rent (it/them)?

FIELD 1: RENTPROB**FIELD 1 ROUTING**

Value	Label	Route
1	BUY/REPAIR	OM7 - EVENT_OMORTH
2	RENT	OM7A - EVENT_OMORTHRENT
3	BOUGHT/REPAIRED EQUIPMENT AND RENTED EQUIPMENT	DO NOT DISPLAY.
	Don't Know	OM7 - EVENT_OMORTH
	Refused	OM7 - EVENT_OMORTH

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTPROB	1

OTHER PROGRAMMING INSTRUCTIONS**DESIGN NOTES**

OM6A - RENTPROB is an EVENT level detail.

The response to OM6A - RENTPROB needs to be copied to EVNT.RENTPROB for each Event added at OM7 or OM7A.

OM7

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy (or repair) the (ORTHOPEDIC ITEM)? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT OMORTH

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1CC

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all orthopedic items that have been reported in the current round where:
EVNT.EVNTDFLG^=1/Yes, and
(EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
EVNT.EVNTTYPE = 'OM', and
EVNT.OMETYPE = 3/Orthopedic.

Display all loaded events as protected rows.

Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	If EVNT.ORTHTYPE= 91/Other, display other specify text, EVNT.EVOSTEXT. Else display EVNT.ORTHTYPE response.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 3/Orthopedic.
ORTHTYPE	EVNT.ORTHTYPE = OM6 - ORTHTYPE response.
STOMTYPE	If ORTHTYPE = 1/Braces, STOMTYPE=21/Braces. 2/Cane, STOMTYPE=22/Cane. 3/Shoes, STOMTYPE=23/Shoes. 4/Crutches, STOMTYPE=24/Crutches. 5/Walker, STOMTYPE=25/Walker. 6/Wheelchair, STOMTYPE=26/Wh... 7/Stockings, STOMTYPE=27/St.. 91/Other, STOMTYPE=91.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	If ORTHTYPE = 4/Crutches, 5/Walker, 6/Wheelchair or 91/Other, set EVNT.RENTPROB = OM6A - RENTPROB response.
EVOSTEXT	If OM6 - ORTHTYPE = 91/Other, set EVNT.EVOSTEXT = OM6 - EVOSTEXT.
EVNTQUES	If OM6 - ORTHTYPE = 91/Other, set EVNT.EVNTQUES = 'OM6'.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

BOX OM1CC

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM7_IN - NAVIGATOR.

ELSE GO TO BOX OM1EE1.

OM7_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM7AA - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1EE1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM7AA

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy (or repair) the (ORTHOPEdic ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the (ORTHOPEdic ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or store that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM2A
2	NO	BOX OM2A
	Don't Know	BOX OM2A
	Refused	BOX OM2A

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM2A

BOX INSTRUCTIONS

GO TO OM7_IN - NAVIGATOR.

OM7A

Roster

QUESTION TEXT

ENTER ONLY ONE DATE AT THIS ROSTER.

Please tell me the first date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) AND (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] that [you/(SP)] rented the (ORTHOPEDIC ITEM).

FIELD 1: EVENT_OMORTHRENT**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM7B - RENTSTIL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**ROSTER/GRID INSTRUCTIONS**

Display all orthopedic items that have been reported in the current round where:
 EVNT.EVNTDFLG^=1/Yes, and
 (EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
 EVNT.EVNTTYPE = 'OM', and
 EVNT.OMETYPE = 3/Orthopedic.

Display all loaded events as protected rows.

Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	If EVNT.ORTHTYPE= 91/Other, display other specify text, EVNT.EVOSTEXT. Else display EVNT.ORTHTYPE response.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 3/Orthopedic.
ORTHTYPE	EVNT.ORTHTYPE = OM6 - ORTHTYPE response.
STOMTYPE	If ORTHTYPE = 4/Crutches, STOMTYPE=24/Crutches. 5/Walker, STOMTYPE=25/Walker. 6/Wheelchair, STOMTYPE=26/Wheelchair 91/Other, STOMTYPE=91/Other.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	EVNT.RENTPROB = OM6A - RENTPROB response.
EVOSTEXT	If OM6 - ORTHTYPE = 91/Other, set EVNT.EVOSTEXT = OM6 - EVOSTEXT.
EVNTQUES	If OM6 - ORTHTYPE = 91/Other, set EVNT.EVNTQUES = 'OM6'.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

OM7B

Yes/No

QUESTION TEXT

[Are you/Is (SP)/Was (SP)] still renting the (ORTHOPEDIC ITEM)?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1EE
2	NO	OM7C - EVENDMM
3	EVENT ENTERED IN ERROR	DO NOT DISPLAY.
	Don't Know	BOX OM1EE1
	Refused	BOX OM1EE1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OM7B - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OM7B - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OM7B - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OM7B - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OM7B - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OM7B - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OM7B - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OM7B - RENTSTIL = RF, set EVNT.EVENDYY = RF.

OM7C

Date

QUESTION TEXT

What was the last date the (ORTHOPEDIC ITEM) (were/was) rented?

FIELD 1: EVENDMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM7C - EVENDDD
	Don't Know	OM7C - EVENDDD
	Refused	OM7C - EVENDDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDMM	1

FIELD 2: EVENDDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM7C - EVENDYY
	Don't Know	OM7C - EVENDYY
	Refused	OM7C - EVENDYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDDD	1

FIELD 3: EVENDYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM3A
	Don't Know	BOX OM3A
	Refused	BOX OM3A

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDYY	1

BOX OM3A

BOX INSTRUCTIONS

IF SP IS NOT DECEASED, GO TO OM7CC - RENT2BUY.

ELSE GO TO BOX OM1EE.

OM7CC

Code 1

QUESTION TEXT

You said [you/(SP)] stopped renting the (ORTHOPEdic ITEM). Is this because (you/he/she) no longer (have/has) that item or because (you/he/she) (have/has) purchased it through a rent-to-buy option?

FIELD 1: RENT2BUY**FIELD 1 ROUTING**

Value	Label	Route
1	NO LONGER HAVE THE ITEM	BOX OM1EE
2	PURCHASED THROUGH RENT-TO-BUY	BOX OM1EE
3	OTHER	OM7CCVB - REN2BVB
	Don't Know	BOX OM1EE
	Refused	BOX OM1EE

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENT2BUY	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RBUYCOST	If OM7CC - RENT2BUY = 2/PurchasedRentToBuy or 3/Other, set EVNT.RBUYCOST=1/StillCollectCost.

OM7CCVB

Verbatim Text

QUESTION TEXT

BRIEFLY EXPLAIN WHY SP STOPPED RENTING THE (ORTHOPEDIC ITEM).

RECORD VERBATIM.

FIELD 1: REN2BVB**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM1EE

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES THE FOLLOWING CHESHIRE VARIABLES: EVNT.REN2BVB1 EVNT.REN2BVB2 EVNT.REN2BVB3 EVNT.REN2BVB4	1

BOX OM1EE

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM7D - OMSATHMO.

ELSE GO TO BOX OM1EE1.

OM7D

Yes/No

QUESTION TEXT

Did [you/(SP)] rent the (ORTHOPEdic ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include renting the (ORTHOPEdic ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1EE1
2	NO	BOX OM1EE1
	Don't Know	BOX OM1EE1
	Refused	BOX OM1EE1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1EE1

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OM4.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OM4

BOX INSTRUCTIONS

IF ASKING ABOUT A RENTAL ITEM FROM THE PREVIOUS ROUND, GO TO OMS5_IN - NAVIGATOR.

ELSE GO TO OM8 - MOREORTH.

OM8

Yes/No

QUESTION TEXT

In addition to the orthopedic item(s) you just told me about, did [you/(SP)] buy, repair, or rent any other orthopedic items [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].?

FIELD 1: MOREORTH**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM6 - ORTHTYPE
2	NO	OM9 - OMPRDIAB
	Don't Know	OM9 - OMPRDIAB
	Refused	OM9 - OMPRDIAB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display report below question text.

Display all orthopedic items that have been reported in the current round where:
 EVNT.EVNTDFLG ^= 1/Yes, and
 (EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
 EVNT.EVNTTYPE = 'OM', and
 EVNT.OMETYPE = 3/Orthopedic.

If a specific orthopedic item was reported more than once, only display the item once in report:
 If EVNT.ORTHTYPE ^= 91/Other and EVNT.ORTHTYPE matches EVNT.ORTHTYPE on

another EVNT already being displayed in report, do not display.

Column 1, display = Display name of orthopedic item.

If EVNT.ORTHTYPE= 91/Other, display other specify text, EVNT.EVOSTEXT.

Else display EVNT.ORTHTYPE response.

OM9

Yes/No

QUESTION TEXT

SHOW CARD OM2

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy diabetic equipment or supplies, such as those listed on this card?

[Diabetic equipment or supplies include syringes, test paper, test strips, and blood monitoring kits.]

FIELD 1: OMPRDIAB**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM10 - EVENT_OMDIAB
2	NO	OM11 - OMPRAMBL
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	OM11 - OMPRAMBL
	Refused	OM11 - OMPRAMBL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRDIAB	1

OM10

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy diabetic equipment or supplies? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT_OMDIAB

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1FF

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all Diabetic equipment/supplies that have been reported in the current round where:
 EVNT.EVNTDFLG^=1/Yes, and
 EVNT.EVNTRNDC = current round, and
 EVNT.EVNTTYPE = 'OM', and
 EVNT.OMETYPE = 4/Diabetic.

Display all loaded events as protected rows.
 Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair Date	Display EVENT DATE in "Mon DD YYYY" format.
2	OME Type	Display OM Type, EVNT.OMETYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 4/Diabetic.
STOMTYPE	EVNT.STOMTYPE = 4/Diabetic.
EVNTPROV	EVNT.EVNTPROV = 01.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

BOX OM1FF

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM10_IN - NAVIGATOR.

ELSE GO TO BOX OM1FF2.

OM10_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM10A - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1FF2

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM10A

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy the diabetic equipment or supplies at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying the diabetic equipment or supplies at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or store that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1FF1
2	NO	BOX OM1FF1
	Don't Know	BOX OM1FF1
	Refused	BOX OM1FF1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1FF1

BOX INSTRUCTIONS

GO TO OM10_IN - NAVIGATOR.

BOX OM1FF2

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO OM11 - OMPRAMBL.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

OM11

Yes/No

QUESTION TEXT

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] use any ambulance or rescue squad service?

FIELD 1: OMPRAMBL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM12 - EVENT_OMAMBL
2	NO	OM13 - OMPRPROS
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	OM13 - OMPRPROS
	Refused	OM13 - OMPRPROS

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRAMBL	1

OM12

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] use an ambulance? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT_OMAMBL

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1GG

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all Ambulances that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and

EVNT.EVNTRNDC = current round, and

EVNT.EVNTTYPE = 'OM', and

EVNT.OMETYPE = 5/Ambulance.

Display all loaded events as protected rows.

Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair Date	Display EVENT DATE in "Mon DD YYYY" format.
2	OME Type	Display OM Type, EVNT.OMETYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 5/Ambulance.
STOMTYPE	EVNT.STOMTYPE = 5/Ambulance.
EVNTPROV	EVNT.EVNTPROV = 01.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

BOX OM1GG

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM12_IN - NAVIGATOR.

ELSE GO TO BOX OM1GG2.

OM12_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM12A - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1GG2

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM12A

Yes/No

QUESTION TEXT

Was the ambulance on (EVENT DATE) provided by or approved by [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could mean that the ambulance was sent by the plan, or that [you/(SP)] or someone for [you/(SP)] contacted the plan for them to authorize or approve the use of the ambulance. This approval could have come after the use of the ambulance.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1GG1
2	NO	BOX OM1GG1
	Don't Know	BOX OM1GG1
	Refused	BOX OM1GG1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1GG1

BOX INSTRUCTIONS

GO TO OM12_IN - NAVIGATOR.

BOX OM1GG2

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO OM13 - OMPRPROS.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

OM13

Yes/No

QUESTION TEXT

SHOW CARD OM3

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy or pay for repairs of any prostheses, such as those on the card?

[Prostheses include artificial leg or arm, mastectomy prosthesis, and artificial or glass eye.]

FIELD 1: OMPRPROS

FIELD 1 ROUTING

Value	Label	Route
1	YES	OM14 - EVENT_OMPROS
2	NO	BOX OMA4
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OMA4
	Refused	BOX OMA4

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRPROS	1

OM14

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy or repair the prosthesis? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT_OMPROS

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1HH

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all Prothesis that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
 EVNT.EVNTRNDC = current round, and
 EVNT.EVNTTYPE = 'OM', and
 EVNT.OMETYPE = 6/Prothesis.

Display all loaded events as protected rows.
 Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair Date	Display EVENT DATE in "Mon DD YYYY" format.
2	OME Type	Display OM Type, EVNT.OMETYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 6/Prothesis.
STOMTYPE	EVNT.STOMTYPE = 6/Prothesis.
EVNTPROV	EVNT.EVNTPROV = 01.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

Variable Name	Assignment Instructions
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

BOX OM1HH

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM14_IN - NAVIGATOR.

ELSE GO TO BOX OM1HH2.

OM14_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM14A - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1HH2

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM14A

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy or repair the prosthesis at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the prosthesis at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1HH1
2	NO	BOX OM1HH1
	Don't Know	BOX OM1HH1
	Refused	BOX OM1HH1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1HH1

BOX INSTRUCTIONS

GO TO OM14_IN - NAVIGATOR.

BOX OM1HH2

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OMA4.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OMA4

BOX INSTRUCTIONS

IF SP WAS STILL RENTING OXYGEN-RELATED EQUIPMENT AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO OMS19INTR - OXGNINTRO.

ELSE GO TO OM19 - OMPROXGN.

OMS19INTR

No Entry

QUESTION TEXT

The next questions are about oxygen-related equipment [you were/(SP) was] renting as of (REFERENCE DATE).

FIELD 1: OXGNINTRO**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	OMS19_IN - NAVIGATOR
	Empty	OMS19_IN - NAVIGATOR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OMS19_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OMS19 - RENTSTIL
2	CONTINUE INTERVIEW SELECTED	OM19 - OMPROXGN

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OMS19

Code 1

QUESTION TEXT

At the time of the last interview, [you were/(SP) was] renting oxygen-related equipment. As of [today/(DATE OF DEATH)/(DATE OF INSTITUTIONALIZATION)] (is/was) the oxygen-related equipment being rented?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1KK
2	NO	OM20C - EVENDMM
3	EVENT ENTERED IN ERROR	BOX OM9
	Don't Know	BOX OM9
	Refused	BOX OM9

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OMS19 - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OMS19 - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OMS19 - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OMS19 - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OMS19 - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OMS19 - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OMS19 - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OMS19 - RENTSTIL = RF, set EVNT.EVENDYY = RF.
EVNTDFLG	If OMS19 - RENTSTIL = 3/EnteredInError, set EVNT.EVNTDFLG = 1/Yes.

OM19

Yes/No

QUESTION TEXT

(Other than what we already talked about,) [(Since/since) (REFERENCE DATE/SURVEY REFERENCE DATE)/(Between/between) (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] have any (other) expenses for oxygen or supplies or oxygen-related equipment?

FIELD 1: OMPROXGN**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM19A - OXGNTYPE
2	NO	BOX OMA11
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OMA11
	Refused	BOX OMA11

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPROXGN	1

OTHER PROGRAMMING INSTRUCTIONS**DESIGN NOTES**

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

OM19A

Code 1

QUESTION TEXT

What was that?

FIELD 1: OXGNTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	OXYGEN/SUPPLIES	OM20 - EVENT_OMOXGN
2	OXYGEN-RELATED EQUIPMENT	OM19B - RENTPROB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OXGNTYPE	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Oxygen Type is collected at OM19A or set in the background at BOX OM11 prior to entering the event dates into the roster. The value of Oxygen Type will need to be copied to the events entered into the roster. Therefore, a temporary variable, LASTOXGNTYPE will hold the most recent value entered/set for OXGNTYPE.

Variable Name	Assignment Instructions
LASTOXGNTYPE	LASTOXGNTYPE = OM19A - OXGNTYPE.

OM19B

Code 1

QUESTION TEXT

Did [you/(SP)] buy or repair the oxygen-related equipment, or did [you/(SP)] rent it?

FIELD 1: RENTPROB**FIELD 1 ROUTING**

Value	Label	Route
1	BUY/REPAIR	OM20 - EVENT_OMOXGN
2	RENT	OM20A - EVENT_OMOXGNRENT
3	BOUGHT/REPAIRED EQUIPMENT AND RENTED EQUIPMENT	OM20 - EVENT_OMOXGN
	Don't Know	OM20 - EVENT_OMOXGN
	Refused	OM20 - EVENT_OMOXGN

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTPROB	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

OM19B - RENTPROB is an EVENT level detail.

The response to OM19B - RENTPROB needs to be copied to EVNT.RENTPROB for each Event selected at OM20 or OM20A.

If OM19B - RENTPROB = 3/BoughtAndRented, we will first probe for all the purchase dates at OM20, setting RENTPROB=1/Buy and then we will probe for the rental date at OM20A, setting RENTPROB=2/Rent.

OM20

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did (you/(SP)) purchase the [(oxygen or supplies)/(oxygen-related equipment)]? Please tell me the dates of each purchase [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT OMOXGN

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1II

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all oxygen items that have been added in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
 (EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
 EVNT.EVNTTYPE = OM, and
 EVNT.OMETYPE = 8/Oxygen.

Display all loaded events as protected rows.
 Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	Display EVNT.OXGNTYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month

EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 8/Oxygen.
OXGNTYPE	EVNT.OXGNTYPE = LASTOXGNTYPE.
STOMTYPE	If OXGNTYPE = 1/Supplies, STOMTYPE=51/OxygenSupplies. 2/Equipment, STOMTYPE=52/OxygenEquipment.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	If LASTOXGNTYPE = 2/Equipment then set RENTPROB: If OM19B - RENTPROB = 3/BoughtAndRented, set RENTPROB = 1/Buy. Else set EVNT.RENTPROB = OM19B - RENTPROB response.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

BOX OM1II

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM20_IN - NAVIGATOR.

ELSE GO TO BOX OM7.

OM20_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM20AA - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM7

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM20AA

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy or repair the (OXYGEN ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the (OXYGEN ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or store that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1II1
2	NO	BOX OM1II1
	Don't Know	BOX OM1II1
	Refused	BOX OM1II1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1II1

BOX INSTRUCTIONS

GO TO OM20_IN - NAVIGATOR.

BOX OM7

BOX INSTRUCTIONS

IF OM19B - RENTPROB = 3/BoughtAndRented, GO TO OM20A - EVENT_OMOXGNRENT.
ELSE GO TO BOX OM1KK1.

OM20A

Roster

QUESTION TEXT

SELECT OR ADD ONLY ONE DATE AT THIS ROSTER.

Please tell me the first date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] that [you/(SP)] rented the oxygen-related equipment.

FIELD 1: EVENT OMOXGNRENT

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	OM20B - RENTSTIL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all oxygen items that have been added in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
 (EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
 EVNT.EVNTTYPE = OM, and
 EVNT.OMETYPE = 8/Oxygen.

Display all loaded events as protected rows.
 Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	Display EVNT.OXGNTYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month

EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 8/Oxygen.
OXGNTYPE	EVNT.OXGNTYPE = 2/Equipment.
STOMTYPE	STOMTYPE = 52/OxygenEquipment.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	If OM19B - RENTPROB = 3/BoughtAndRented, set RENTPROB = 2/Rent. Else set EVNT.RENTPROB = OM19B - RENTPROB response.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

OM20B

Yes/No

QUESTION TEXT

[Are you/Is (SP)/Was (SP)] still renting the oxygen-related equipment?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1KK
2	NO	OM20C - EVENDMM
3	EVENT ENTERED IN ERROR	DO NOT DISPLAY.
	Don't Know	BOX OM1KK1
	Refused	BOX OM1KK1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OM20B - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OM20B - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OM20B - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OM20B - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OM20B - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OM20B - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OM20B - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OM20B - RENTSTIL = RF, set EVNT.EVENDYY = RF.

OM20C

Date

QUESTION TEXT

What was the last date the equipment was rented?

FIELD 1: EVENDMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM20C - EVENDDD
	Don't Know	OM20C - EVENDDD
	Refused	OM20C - EVENDDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDMM	1

FIELD 2: EVENDDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM20C - EVENDYY
	Don't Know	OM20C - EVENDYY
	Refused	OM20C - EVENDYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDDD	1

FIELD 3: EVENDYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM8A
	Don't Know	BOX OM8A
	Refused	BOX OM8A

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDYY	1

BOX OM8A

BOX INSTRUCTIONS

IF SP IS NOT DECEASED, GO TO OM20CC - RENT2BUY.

ELSE GO TO BOX OM1KK.

OM20CC

Code 1

QUESTION TEXT

You said [you/(SP)] stopped renting the oxygen-related equipment. Is this because (you/he/she) no longer (have/has) the equipment or because (you/he/she) (have/has) purchased it through a rent-to-buy option?

FIELD 1: RENT2BUY**FIELD 1 ROUTING**

Value	Label	Route
1	NO LONGER HAVE THE ITEM	BOX OM1KK
2	PURCHASED THROUGH RENT-TO-BUY	BOX OM1KK
3	OTHER	OM20CCVB - REN2BVB
	Don't Know	BOX OM1KK
	Refused	BOX OM1KK

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENT2BUY	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RBUYCOST	If OM20CC - RENT2BUY = 2/PurchasedRentToBuy or 3/Other, set EVNT.RBUYCOST=1/StillCollectCost.

OM20CCVB

Verbatim Text

QUESTION TEXT

BRIEFLY EXPLAIN WHY SP STOPPED RENTING THE OXYGEN-RELATED EQUIPMENT.

RECORD VERBATIM.

FIELD 1: REN2BVB**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM1KK

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES THE FOLLOWING CHESHIRE VARIABLES: EVNT.REN2BVB1 EVNT.REN2BVB2 EVNT.REN2BVB3 EVNT.REN2BVB4	1

BOX OM1KK

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM20D1 - OMSATHMO.

ELSE GO TO BOX OM1KK1.

OM20D1

Yes/No

QUESTION TEXT

Did [you/(SP)] rent the oxygen equipment at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include renting the oxygen equipment at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1KK1
2	NO	BOX OM1KK1
	Don't Know	BOX OM1KK1
	Refused	BOX OM1KK1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1KK1

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OM9.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OM9

BOX INSTRUCTIONS

IF ASKING ABOUT A RENTAL ITEM FROM THE PREVIOUS ROUND, GO TO OMS19_IN - NAVIGATOR.

ELSE GO TO BOX OM10.

BOX OM10

BOX INSTRUCTIONS

IF OM20D HAS NOT BEEN ASKED, GO TO OM20D - MOREOXGN.

ELSE GO TO BOX OMA11.

OM20D

Yes/No

QUESTION TEXT

In addition to the [(oxygen or supplies)/(oxygen-related equipment)] that you just told me about, did [you/(SP)] [(buy oxygen or supplies)/(have any expenses for oxygen-related equipment)]?

FIELD 1: MOREOXGN**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM11
2	NO	BOX OMA11
	Don't Know	BOX OMA11
	Refused	BOX OMA11

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

BOX OM11

BOX INSTRUCTIONS

IF OM19A - OXYGTYPE = 1/Supplies, SET NEXT OXYGEN TYPE TO EQUIPMENT AND GO TO OM19B - RENTPROB.

ELSE SET NEXT OXYGEN TYPE TO SUPPLIES AND GO TO OM20 - EVENT_OMOXGN.

Variable Name	Assignment Instructions
LASTOXGNTYPE	If OM19A - OXGNTYPE = 1/Supplies, set LASTOXGNTYPE = 2/Equipment. Else if OM19A - OXGNTYPE = 2/Equipment, set LASTOXGNTYPE = 1/Supplies.

BOX OMA11

BOX INSTRUCTIONS

IF SP WAS RENTING AT LEAST ONE KIDNEY DIALYSIS EQUIPMENT AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO OMS21INTR - KDNYINTRO.

ELSE GO TO OM21 - OMPRKDNY.

OMS21INTR

No Entry

QUESTION TEXT

The next questions are about kidney dialysis equipment [you were/(SP) was] renting as of (REFERENCE DATE).

FIELD 1: KDNYPINTRO

FIELD 1 ROUTING

Value	Label	Route
1	CONTINUE	OMS21_IN - NAVIGATOR
	Empty	OMS21_IN - NAVIGATOR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OMS21_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OMS21 - RENTSTIL
2	CONTINUE INTERVIEW SELECTED	OM21 - OMPRKDNY

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OMS21

Code 1

QUESTION TEXT

At the time of the last interview, [you were/(SP) was] renting equipment for kidney dialysis. As of (today/DATE OF DEATH/DATE OF INSTITUTIONALIZATION), (is/was) the equipment being rented?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1NN
2	NO	OM22C - EVENDMM
3	EVENT ENTERED IN ERROR	BOX OM16
	Don't Know	BOX OM16
	Refused	BOX OM16

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OMS21 - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OMS21 - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OMS21 - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OMS21 - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OMS21 - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OMS21 - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OMS21 - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OMS21 - RENTSTIL = RF, set EVNT.EVENDYY = RF.
EVNTDFLG	If OMS21 - RENTSTIL = 3/EnteredInError, set EVNT.EVNTDFLG = 1/Yes.

OM21

Yes/No

QUESTION TEXT

(Other than what we already talked about), [(Since/since) (REFERENCE DATE/SURVEY REFERENCE DATE)/(Between/between) (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy any (other) kidney dialysis supplies or buy, rent, or repair any related equipment?

FIELD 1: OMPRKDNY**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM21A - KDNYPYTYPE
2	NO	BOX OMA18
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OMA18
	Refused	BOX OMA18

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRKDNY	1

OM21A

Code 1

QUESTION TEXT

What was that?

FIELD 1: KDNYPYTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	KIDNEY DIALYSIS SUPPLIES	OM22 - EVENT_OMKDNYP
2	KIDNEY DIALYSIS EQUIPMENT	OM21B - RENTPROB

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.KDNYPYTYPE	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Kidney Dialysis Type is collected at OM21A or set in the background at BOX OM18 prior to entering the event dates into the roster. The value of Kidney Dialysis Type will need to be copied to the events entered into the roster. Therefore, a temporary variable, LASTKDNYPYTYPE will hold the most recent value entered/set for KDNYPYTYPE.

Variable Name	Assignment Instructions
LASTKDNYPYTYPE	LASTKDNYPYTYPE = OM21A - KDNYPYTYPE.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

OM21B

Code 1

QUESTION TEXT

Did [you/(SP)] buy or repair the dialysis equipment, or did [you/(SP)] rent it?

FIELD 1: RENTPROB**FIELD 1 ROUTING**

Value	Label	Route
1	BUY/REPAIR	OM22 - EVENT_OMKDNY
2	RENT	OM22A - EVENT_OMKDNYRENT
3	BOUGHT/REPAIRED EQUIPMENT AND RENTED EQUIPMENT	DO NOT DISPLAY.
	Don't Know	OM22 - EVENT_OMKDNY
	Refused	OM22 - EVENT_OMKDNY

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTPROB	1

OTHER PROGRAMMING INSTRUCTIONS**DESIGN NOTES**

OM21B - RENTPROB is an EVENT level detail.

The response to OM21B - RENTPROB needs to be copied to EVNT.RENTPROB for each Event selected at OM22 or OM22A.

OM22

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] (purchase the kidney dialysis supplies)/(buy or repair kidney dialysis equipment)? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)].

FIELD 1: EVENT OMKDNY

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM1LL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all kidney dialysis items that have been added in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
(EVNT.EVNTNRNDC = current round or EVNT.RENTRECR = current round), and
EVNT.EVNTTYPE = OM, and
EVNT.OMETYPE = 9/Kidney.

Display all loaded events as protected rows.
Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	Display EVNT.KDNYTYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month

EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 9/Kidney.
KDNYPYTYPE	EVNT.KDNYPYTYPE = LASTKDNYPYTYPE.
STOMTYPE	If KDNYPYTYPE = 1/Supplies, STOMTYPE = 61/KidneySupplies. 2/Equipment, STOMTYPE = 62/KidneyEquipment.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	If LASTKDNYPYTYPE = 2/Equipment, set RENTPROB = OM21B - RENTPROB response.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

BOX OM1LL

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM22_IN - NAVIGATOR.

ELSE GO TO BOX OM1NN1.

OM22_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM22AA - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1NN1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM22AA

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy (or repair) the (KIDNEY ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying (or repairing) the (KIDNEY ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or store that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM14
2	NO	BOX OM14
	Don't Know	BOX OM14
	Refused	BOX OM14

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM14

BOX INSTRUCTIONS

GO TO OM22_IN - NAVIGATOR.

OM22A

Roster

QUESTION TEXT

SELECT OR ADD ONLY ONE DATE AT THIS ROSTER.

Please tell me the first date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] that [you/(SP)] rented the kidney dialysis equipment.

FIELD 1: EVENT OMKDNYRENT

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	OM22B - RENTSTIL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all kidney dialysis items that have been added in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
(EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
EVNT.EVNTTYPE = OM, and
EVNT.OMETYPE = 9/Kidney.

Display all loaded events as protected rows.
Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	Display EVENT DATE in "Mon DD YYYY" format.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
4	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.
5	OME Type	Display EVNT.KDNYTYPE.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month

EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 9/Kidney.
KDNYPYTYPE	EVNT.KDNYPYTYPE = 2/Equipment.
STOMTYPE	STOMTYPE = 62/KidneyEquipment.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	RENTPROB = OM21B - RENTPROB response.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

OM22B

Yes/No

QUESTION TEXT

[Are you/Is (SP)/Was (SP)] still renting the kidney dialysis equipment?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1NN
2	NO	OM22C - EVENDYY
3	EVENT ENTERED IN ERROR	DO NOT DISPLAY.
	Don't Know	BOX OM1NN1
	Refused	BOX OM1NN1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OM22B - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OM22B - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OM22B - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OM22B - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OM22B - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OM22B - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OM22B - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OM22B - RENTSTIL = RF, set EVNT.EVENDYY = RF.

OM22C

Date

QUESTION TEXT

What was the last date the equipment was rented?

FIELD 1: EVENDMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM22C - EVENDDD
	Don't Know	OM22C - EVENDDD
	Refused	OM22C - EVENDDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDMM	1

FIELD 2: EVENDDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM22C - EVENDYY
	Don't Know	OM22C - EVENDYY
	Refused	OM22C - EVENDYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDDD	1

FIELD 3: EVENDYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM15A
	Don't Know	BOX OM15A
	Refused	BOX OM15A

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDYY	1

BOX OM15A

BOX INSTRUCTIONS

IF SP IS NOT DECEASED, GO TO OM22CC - RENT2BUY.

ELSE GO TO BOX OM1NN.

OM22CC

Code 1

QUESTION TEXT

You said [you/(SP)] stopped renting the dialysis equipment. Is this because (you/he/she) no longer (have/has) the equipment or because (you/he/she) (have/has) purchased it through a rent-to-buy option?

FIELD 1: RENT2BUY**FIELD 1 ROUTING**

Value	Label	Route
1	NO LONGER HAVE THE ITEM	BOX OM1NN
2	PURCHASED THROUGH RENT-TO-BUY	BOX OM1NN
3	OTHER	OM22CCVB - REN2BVB
	Don't Know	BOX OM1NN
	Refused	BOX OM1NN

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENT2BUY	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RBUYCOST	If OM22CC - RENT2BUY = 2/PurchasedRentToBuy or 3/Other, set EVNT.RBUYCOST=1/StillCollectCost.

OM22CCVB

Verbatim Text

QUESTION TEXT

BRIEFLY EXPLAIN WHY SP STOPPED RENTING THE DIALYSIS EQUIPMENT.

RECORD VERBATIM.

FIELD 1: REN2BVB**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM1NN

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES THE FOLLOWING CHESHIRE VARIABLES: EVNT.REN2BVB1 EVNT.REN2BVB2 EVNT.REN2BVB3 EVNT.REN2BVB4	1

BOX OM1NN

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM22D1 - OMSATHMO.

ELSE GO TO BOX OM1NN1.

OM22D1

Yes/No

QUESTION TEXT

Did [you/(SP)] rent the kidney dialysis equipment at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include renting the kidney dialysis equipment at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1NN1
2	NO	BOX OM1NN1
	Don't Know	BOX OM1NN1
	Refused	BOX OM1NN1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1NN1

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OM16.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OM16

BOX INSTRUCTIONS

IF ASKING ABOUT A RENTAL ITEM FROM THE PREVIOUS ROUND, GO TO OMS21_IN - NAVIGATOR.

ELSE GO TO BOX OM17.

BOX OM17

BOX INSTRUCTIONS

IF OM22D HAS NOT BEEN ASKED, GO TO OM22D - MOREKDNY.

ELSE GO TO BOX OMA18.

OM22D

Yes/No

QUESTION TEXT

In addition to the [(kidney dialysis supplies)/(kidney dialysis equipment)] that you just told me about, did [you/(SP)] [(obtain any kidney dialysis equipment)/(buy any kidney dialysis supplies)]?

FIELD 1: MOREKDNY**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM18
2	NO	BOX OMA18
	Don't Know	BOX OMA18
	Refused	BOX OMA18

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

BOX OM18

BOX INSTRUCTIONS

IF OM21A - KDNYTYPE = 1/Supplies, SET NEXT KIDNEY TYPE TO EQUIPMENT AND GO TO OM21B - RENTPROB.

ELSE SET NEXT KIDNEY TYPE TO SUPPLIES AND GO TO OM22 - EVENT_OMKDNY.

Variable Name	Assignment Instructions
LASTKDNYTYPE	If OM21A - KDNYTYPE = 1/Supplies, set LASTKDNYTYPE = 2/Equipment. Else if OM21A - KDNYTYPE = 2/Equipment, set LASTKDNYTYPE = 1/Supplies.

BOX OMA18

BOX INSTRUCTIONS

IF SP WAS STILL RENTING AT LEAST ONE OTHER MEDICAL EQUIPMENT AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO OMS23INTR - OTHRINTRO.

ELSE GO TO OM23 - OMPROTHR.

OMS23INTR

No Entry

QUESTION TEXT

The next questions are about other medical equipment [you were/(SP) was] renting as of (REFERENCE DATE).

FIELD 1: OTHRINTRO

FIELD 1 ROUTING

Value	Label	Route
1	CONTINUE	OMS23_IN - NAVIGATOR
	Empty	OMS23_IN - NAVIGATOR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OMS23_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OMS23 - RENTSTIL
2	CONTINUE INTERVIEW SELECTED	OM23 - OMPROTHR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OMS23

Code 1

QUESTION TEXT

At the time of the last interview, [you were/(SP) was] renting (OTHER MEDICAL EXPENSE ITEM). As of (today/DATE OF DEATH/DATE OF INSTITUTIONALIZATION), (is/was) the (OTHER MEDICAL EXPENSE ITEM) being rented?

FIELD 1: RENTSTIL

FIELD 1 ROUTING

Value	Label	Route
1	YES	BOX OM1QQ
2	NO	OM26B - EVENDMM
3	EVENT ENTERED IN ERROR	BOX OM23
	Don't Know	BOX OM23
	Refused	BOX OM23

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS

BACKGROUND VARIABLE ASSIGNMENTS

Variable Name	Assignment Instructions
RENTRECR	If OMS23 - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OMS23 - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OMS23 - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OMS23 - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OMS23 - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OMS23 - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OMS23 - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OMS23 - RENTSTIL = RF, set EVNT.EVENDYY = RF.
EVNTDFLG	If OMS23 - RENTSTIL = 3/EnteredInError, set EVNT.EVNTDFLG = 1/Yes.

OM23

Yes/No

QUESTION TEXT

SHOW CARD OM4

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] buy, rent, or repair any other medical equipment or buy any other medical supplies besides what we have talked about?

[Other medical equipment and supplies include portable commodes or raised toilet seats, portable tub seats, special chairs or cushions, hospital beds, ostomy supplies, incontinence supplies such as Depends, Serenity or other brands of disposable undergarments, pads or briefs, bandages, dressings, tape supplies, pulmonary equipment such as a Nebulizer or CPAP, and blood pressure equipment such as cuffs or monitors, etc.]

FIELD 1: OMPROTHR**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM24 - OTHRTYPE
2	NO	BOX OM24
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OM24
	Refused	BOX OM24

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPROTHR	1

OM24

Code 1

QUESTION TEXT

What kind of equipment was the item?

FIELD 1: OTHRTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	PORTABLE COMMODE OR RAISED TOILET SEAT	OM24A - RENTPROB
2	PORTABLE TUB SEAT	OM24A - RENTPROB
3	SPECIAL CHAIR/CUSHION/MATTRESS	OM24A - RENTPROB
4	HOSPITAL BED/BED SIDES	OM24A - RENTPROB
5	OSTOMY SUPPLIES	BOX OM18B
6	INCONTINENCE SUPPLIES (I.E. DEPENDS, SERENITY DISPOSABLE DIAPERS OR PADS)	BOX OM18B
7	BANDAGES, DRESSINGS, TAPE SUPPLIES	BOX OM18B
8	PULMONARY EQUIPMENT	OM24A - RENTPROB
9	BLOOD PRESSURE EQUIPMENT	OM26 - EVENT_OMOTHR
91	OTHER	OM24 - EVOSTEXT

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OTHRTYPE	1

FIELD 2: EVOSTEXT

OTHER (SPECIFY)

FIELD 2 ROUTING

Value	Label	Route
1	[Continuous answer.]	OM24A - RENTPROB

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVOS.EVOSTEXT EVOSTEXT and EVNTQUES are stored on tblEVNT in SQL and then transformed to EVOS in Cheshire: EVOS.EVOSNUM = unique sequential # EVOS.EVOSRND = current round EVOS.EVOSTEXT = EVNT.EVOSTEXT EVOS.EVNTQUES = EVNT.EVNTQUES	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

THE FOLLOWING INSTRUCTIONS APPLY ONLY TO OM24 - OTHRTYPE = 5/OstomySupplies, 6/IncontinenceSupplies, or 7/Bandages:

When Ostomy Supplies, Incontinence Supplies or Bandages is selected as the Other Medical Expense Type, only one EVNT record is generated per type across all rounds. A current round PMRO linked to this EVNT is created each round the SP reports this OM type in order to collect round specific event details.

If OM24 - OTHRTYPE = 5/OstomySupplies, 6/IncontinenceSupplies, or 7/Bandages, then create and fill the following fields as instructed below:

First search for an existing EVNT that matches OM24 - OTHRTYPE.

An existing EVNT is an EVNT where:

EVNT.OMETYPE =10/OtherMedicalExpense, and

EVNT.OTHRTYPE matches OM24 - OTHRTYPE, and EVNT.EVNTDFLG ^=1/Yes

If no matching EVNT exists, create a new EVNT.

EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM.

BASE.LASTEVT holds the highest EVNT.EVNTNUM prior to fielding cases. Not all EVNT records are fielded. The first time an EVNT record is generated in the field, BASE.LASTEVT should be >= to the highest EVNT.EVNTNUM fielded. The new EVNT.EVNTNUM should be calculated based on BASE.LASTEVT + 001. Each time an EVNT record is generated in the field, BASE.LASTEVT will be updated to match the highest EVNT.EVNTNUM in the field. Therefore, each time an EVNT record is generated in the field, the new EVNT.EVNTNUM should be calculated based on BASE.LASTEVT + 001. See detailed instructions below.

Set additional EVNT fields as instructed below.

Regardless if matching EVNT exists, create a current round PMRO where PMRO.PMROEVNT = EVNT.EVNTNUM and PMRO.PMRORND = current round. NOTE: PMRO may already exist. Set additional PMRO fields as instructed below.

Variable Name	Assignment Instructions
EVNTNUM	Set new EVNT.EVNTNUM = BASE.LASTEVT + 001. This assumes that BASE.LASTEVT is incremented each time an EVNT record is generated in the field.
LASTEVNT	If creating a new EVNT, once new EVNT record is generated, set BASE.LASTEVT = new EVNT.EVNTNUM.
EVNTRNDC	If creating a new EVNT, set EVNT.EVNTRNDC = current round.
EVNTTYPE	If creating a new EVNT, set EVNT.EVNTTYPE = 'OM'.
OMETYPE	If creating a new EVNT, set EVNT.OMETYPE = 10/OtherMedicalExpense.
OTHRTYPE	If creating a new EVNT, set EVNT.OTHRTYPE = OM24 - OTHRTYPE response.

Variable Name	Assignment Instructions
STOMTYPE	If creating a new EVNT, if OM24 - OTHRTYPE = 5/OstomySupplies, STOMTYPE = 45/OstomySupplies. 6/IncontinenceSupplies, STOMTYPE = 46/IncontinenceSupplies. 7/Bandages, STOMTYPE = 47/Bandages.
EVNTPROV	EVNT.EVNTPROV = 01.
PMROEVNT	PMRO.PMROEVNT = this EVNT.EVNTNUM.
PMRORND	PMRO.PMRORND = current round.
PMROTYPE	PMRO.PMROTYPE = 'OM'.
EVCHGFLG	If creating a new event and currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

OM24 - OTHRTYPE and OM24 - EVOSTEXT are EVENT level detail.

The response to OM24 - OTHRTYPE needs to be copied to EVNT.OTHRTYPE for each Event selected at OM26 or OM26A.

The response to OM24 - EVOSTEXT needs to be copied to EVNT.EVOSTEXT for each Event selected at OM26 or OM26A.

OM24A

Code 1

QUESTION TEXT

Did [you/(SP)] buy or repair the (OTHER MEDICAL EXPENSE ITEM), or did [you/(SP)] rent it?

FIELD 1: RENTPROB**FIELD 1 ROUTING**

Value	Label	Route
1	BUY/REPAIR	OM26 - EVENT_OMOTHR
2	RENT	OM26A - EVENT_OMOTHRRENT
3	BOUGHT/REPAIRED EQUIPMENT AND RENTED EQUIPMENT	DO NOT DISPLAY.
	Don't Know	OM26 - EVENT_OMOTHR
	Refused	OM26 - EVENT_OMOTHR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTPROB	1

OTHER PROGRAMMING INSTRUCTIONS**DESIGN NOTES**

OM24A - RENTPROB is an EVENT level detail.

The response to OM24A - RENTPROB needs to be copied to EVNT.RENTPROB for each Event selected at OM26 or OM26A.

BOX OM18B

BOX INSTRUCTIONS

IF NOT ADMINISTERING ST AND NOT ADMINISTERING NS, GO TO OM25 - GETNUM.

ELSE GO TO BOX OM1QQ1.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, we do not collect GETNUM in OM. When returning to ST/NS, we will collect # of purchases covered by charge bundle, XCEV.NUMLINKS, and then copy this value to PMRO.GETNUM.

OM25

Numeric

QUESTION TEXT

THIS ITEM AND NUMBER OF PURCHASES HAS BEEN ENTERED ALREADY FOR THIS ROUND. PLEASE CORRECT THE NUMBER OF TIMES TO BE THE TOTAL NUMBER OF TIMES PURCHASED SINCE (REFERENCE DATE).

How many times [since (REFERENCE DATE)/between (REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] [[have you/has (SP)] bought or obtained/did (SP) buy or obtain] (OTHER MEDICAL EXPENSE ITEM)?

FIELD 1: GETNUM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM1QQ1
	Don't Know	BOX OM1QQ1
	Refused	BOX OM1QQ1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
PMRO.GETNUM	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

OM25 - GETNUM is stored on the current round PMRO where PMRO.PMROEVNT = this EVNT.EVNTNUM and PMRO.PMRORND = current round.

OM26

Roster

QUESTION TEXT

SELECT OR ADD ALL DATES AT THIS ROSTER.

When did [you/(SP)] buy or repair the (OTHER MEDICAL EXPENSE ITEM)? Please tell me all the dates [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]

FIELD 1: EVENT OMOTHR

FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	BOX OM100

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS

ROSTER/GRID INSTRUCTIONS

Display all other medical expense items that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
(EVNT.EVNTNRNDC = current round or EVNT.RENTRECR = current round), and
EVNT.EVNTTYPE = OM, and
EVNT.OMETYPE = 10/OtherMedicalExpense.

Display all loaded events as protected rows.
Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	If (EVNT.OTHRTYPE ^= 5/OstomySupplies and EVNT.OTHRTYPE ^= 6/IncontinenceSupplies and EVNT.OTHRTYPE ^= 7/Bandages), display EVENT DATE in "Mon DD YYYY" format. Else do not display.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Purchases	IF PMRO.GETNUM > 0,DK, or RF, display number of purchases, PMRO.GETNUM, on PMRO where PMRO.PMROEVNT = this EVNT.EVNTNUM and PMRO.PMRORND = current round. Else do not display.
4	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
5	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.

Column #	Header	Instructions
6	OME Type	If EVNT.OTHRTYPE=91/Other, display other specify text, EVNT.EVOSTEXT. Else display EVNT.OTHRTYPE response.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVRT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 10/OtherMedicalExpense.
OTHRTYPE	EVNT.ORTHTYPE = OM24 - OTHRTYPE response.

Variable Name	Assignment Instructions
STOMTYPE	If OTHRTYPE = 1/Toilet, STOMTYPE=41/Toilet. 2/Tub, STOMTYPE=42/Tub. 3/Chair, STOMTYPE=43/Chair. 4/Bed, STOMTYPE=44/Bed. 8/PulmonaryEquipment, STOMTYPE=48/PulmonaryEquipment. 9/BloodPressureEquipment, STOMTYPE=49/Bl... 91/Other, STOMTYPE=91/Other.
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	If OTHRTYPE=1/Toilet, 2/Tub, 3/Chair, 4/Bed, 8/PulmonaryEquipment, or 91/Other, set EVNT.RENTPROB = OM24A response.
EVOSTEXT	If OM24 - OTHRTYPE= 91/Other, set EVNT.EVOSTEXT = OM24 - EVOSTEXT other specify text.
EVNTQUES	If OM24 - OTHRTYPE = 91/Other, set EVNT.EVNTQUES = 'OM24'.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

BOX OM100

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM26_IN - NAVIGATOR.

ELSE GO TO BOX OM1QQ1.

OM26_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OM26AA - OMSATHMO
2	CONTINUE INTERVIEW SELECTED	BOX OM1QQ1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OM26AA

Yes/No

QUESTION TEXT

On (EVENT DATE), did [you/(SP)] buy or repair the (OTHER MEDICAL EXPENSE ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include buying or repairing the (OTHER MEDICAL EXPENSE ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or store that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM21
2	NO	BOX OM21
	Don't Know	BOX OM21
	Refused	BOX OM21

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM21

BOX INSTRUCTIONS

GO TO OM26_IN - NAVIGATOR.

OM26A

Roster

QUESTION TEXT

ADD ONLY ONE DATE AT THIS ROSTER.

Please tell me the first date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] that [you/(SP)] rented the (OTHER MEDICAL EXPENSE ITEM)

FIELD 1: EVENT OMOTHRRENT**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM26A1 - RENTSTIL

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**ROSTER/GRID INSTRUCTIONS**

Display all other medical expense items that have been reported in the current round where:

EVNT.EVNTDFLG^=1/Yes, and
 (EVNT.EVNTRNDC = current round or EVNT.RENTRECR = current round), and
 EVNT.EVNTTYPE = OM, and
 EVNT.OMETYPE = 10/OtherMedicalExpense.

Display all loaded events as protected rows.
 Display in order of entry.

ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	Purchase or Repair/Rental Date	If (EVNT.OTHRTYPE ^= 5/OstomySupplies and EVNT.OTHRTYPE ^= 6/IncontinenceSupplies and EVNT.OTHRTYPE ^= 7/Bandages), display EVENT DATE in "Mon DD YYYY" format. Else do not display.
2	Rental Stop Date	If EVNT.RENTPROB = 2/Rent and (EVNT.RENTSTIL = 2/No, DK, or RF) and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display EVENT END DATE in "Mon DD YYYY" format. Else do not display.
3	Purchases	IF PMRO.GETNUM > 0, DK, or RF, display number of purchases, PMRO.GETNUM, on PMRO where PMRO.PMROEVNT = this EVNT.EVNTNUM and PMRO.PMRORND = current round. Else do not display.
4	Rentals	If EVNT.RENTPROB=2/Rent and ((EVNT.RENT2BUY ^= 2/PurchasedRentToBuy) or (EVNT.RENT2BUY = EMPTY)), display "R". Else do not display.
5	Status	If EVNT.RENTSTIL = 1/Yes, display "RR". Else if EVNT.RENT2BUY = 2/PurchasedRentToBuy, display "OW". Else do not display.

Column #	Header	Instructions
6	OME Type	If EVNT.OTHRTYPE=91/Other, display other specify text, EVNT.EVOSTEXT. Else display EVNT.OTHRTYPE response.

BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM Event number
 EVNT.EVNTRNDC Round
 EVNT.EVBEGMM Event Month
 EVNT.EVBEGDD Event Day
 EVNT.EVBEGYY Event Year
 BASE.LASTEVT Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTTYPE	EVNT.EVNTTYPE = OM.
OMETYPE	EVNT.OMETYPE = 10/OtherMedicalExpense.
OTHRTYPE	EVNT.ORTHTYPE = OM24 - OTHRTYPE response.
STOMTYPE	If OTHRTYPE = 1/Toilet, STOMTYPE=41/Toilet. 2/Tub, STOMTYPE=42/Tub. 3/Chair, STOMTYPE=43/Chair. 4/Bed, STOMTYPE=44/Bed. 8/PulmonaryEquipment, STOMTYPE=48/PulmonaryEquipment. 91/Other, STOMTYPE=91/Other.

Variable Name	Assignment Instructions
EVNTPROV	EVNT.EVNTPROV = 01.
RENTPROB	EVNT.RENTPROB = OM24A response.
EVOSTEXT	If OM24 - OTHRTYPE= 91/Other, set EVNT.EVOSTEXT = OM24 - EVOSTEXT other specify text.
EVNTQUES	If OM24 - OTHRTYPE = 91/Other, set EVNT.EVNTQUES = 'OM24'.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

OM26A1

Yes/No

QUESTION TEXT

[Are you/Is (SP)] still renting the (OTHER MEDICAL EXPENSE ITEM)?

FIELD 1: RENTSTIL**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1QQ
2	NO	OM26B - EVENDMM
3	EVENT ENTERED IN ERROR	DO NOT DISPLAY.
	Don't Know	BOX OM1QQ1
	Refused	BOX OM1QQ1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENTSTIL	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RENTRECR	If OM26A1 - RENTSTIL = 1/Yes, set EVNT.RENTRECR = current round.
RENTENDR	If OM26A1 - RENTSTIL ^= 1/Yes, set EVNT.RENTENDR = current round.

Variable Name	Assignment Instructions
EVENDMM	If OM26A1 - RENTSTIL = DK, set EVNT.EVENDMM = DK. Else if OM26A1 - RENTSTIL = RF, set EVNT.EVENDMM = RF.
EVENDDD	If OM26A1 - RENTSTIL = DK, set EVNT.EVENDDD = DK. Else if OM26A1 - RENTSTIL = RF, set EVNT.EVENDDD = RF.
EVENDYY	If OM26A1 - RENTSTIL = DK, set EVNT.EVENDYY = DK. Else if OM26A1 - RENTSTIL = RF, set EVNT.EVENDYY = RF.

OM26B

Date

QUESTION TEXT

What was the last date [you/(SP)] rented the (OTHER MEDICAL EXPENSE ITEM)?

FIELD 1: EVENDMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM26B - EVENDDD
	Don't Know	OM26B - EVENDDD
	Refused	OM26B - EVENDDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDMM	1

FIELD 2: EVENDDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM26B - EVENDYY
	Don't Know	OM26B - EVENDYY
	Refused	OM26B - EVENDYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDDD	1

FIELD 3: EVENDYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM22A
	Don't Know	BOX OM22A
	Refused	BOX OM22A

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVENDYY	1

BOX OM22A

BOX INSTRUCTIONS

IF SP IS NOT DECEASED, GO TO OM26BB - RENT2BUY.

ELSE GO TO BOX OM1QQ.

OM26BB

Code 1

QUESTION TEXT

You said [you/(SP)] stopped renting the (OTHER MEDICAL EXPENSE ITEM). Is this because (you/he/she) no longer (have/has) the item or because (you/he/she) (have/has) purchased it through a rent-to-buy option?

FIELD 1: RENT2BUY**FIELD 1 ROUTING**

Value	Label	Route
1	NO LONGER HAVE THE ITEM	BOX OM1QQ
2	PURCHASED THROUGH RENT-TO-BUY	BOX OM1QQ
3	OTHER	OM26BBVB - REN2BVB
	Don't Know	BOX OM1QQ
	Refused	BOX OM1QQ

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.RENT2BUY	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
RBUYCOST	If OM26BB - RENT2BUY = 2/PurchasedRentToBuy or 3/Other, set EVNT.RBUYCOST=1/StillCollectCost.

OM26BBVB

Verbatim Text

QUESTION TEXT

BRIEFLY EXPLAIN WHY SP STOPPED RENTING THE (OTHER MEDICAL EXPENSE ITEM).

RECORD VERBATIM.

FIELD 1: REN2BVB**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX OM1QQ

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
NONE REPLACES THE FOLLOWING CHESHIRE VARIABLES: EVNT.REN2BVB1 EVNT.REN2BVB2 EVNT.REN2BVB3 EVNT.REN2BVB4	1

BOX OM1QQ

BOX INSTRUCTIONS

IF SP COVERED BY AN MEDICARE MANAGED CARE PLAN OR PRIVATE MANAGED CARE PLAN ANYTIME DURING THE CURRENT ROUND, GO TO OM26C - OMSATHMO.

ELSE GO TO BOX OM1QQ1.

OM26C

Yes/No

QUESTION TEXT

Did [you/(SP)] rent the (OTHER MEDICAL EXPENSE ITEM) at [READ MANAGED CARE PLAN NAME(S) BELOW] or through a service or discount offered through [READ MANAGED CARE PLAN NAME(S) BELOW]?

[PROBE: This could include renting the (OTHER MEDICAL EXPENSE ITEM) at a plan center; at a place or store that honors [your/(SP's)] plan card; or through a place or service that the plan referred [you/(SP)] to.]

FIELD 1: OMSATHMO**FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX OM1QQ1
2	NO	BOX OM1QQ1
	Don't Know	BOX OM1QQ1
	Refused	BOX OM1QQ1

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.OMSATHMO	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display all Medicare managed care plans and Private managed care plans SP was covered by anytime during the current round.

Display managed care plan name(s) below question text.

Display plans in the following order: Medicare Managed Care plans, Private Managed Care plans.

If there is more than one plan for any specific plan type, display in order of entry.

Column 1, header = "MANAGED CARE PLANS".

Column 1, display = Health insurance plan name "(PLAN NAME) Managed Care Plan".

BOX OM1QQ1

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO BOX OM23.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

BOX OM23

BOX INSTRUCTIONS

IF ASKING ABOUT A RENTAL ITEM FROM THE PREVIOUS ROUND, GO TO OMS23_IN - NAVIGATOR.

ELSE GO TO OM27 - MOREOTHR.

OM27

Yes/No

QUESTION TEXT

In addition to the medical equipment you just told me about, did [you/(SP)] buy, rent, or repair any other medical equipment [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

FIELD 1: MOREOTHR**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM24 - OTHRTYPE
2	NO	BOX OM24
	Don't Know	BOX OM24
	Refused	BOX OM24

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display report below question text.

Display all other medical expense items that have been reported in the current round where:

EVNT.EVNTDFLG ^= 1/Yes, and

EVNT.EVNTTYPE = OM, and

EVNT.OMETYPE = 10/OtherMedicalExpense, and

(EVNT.EVNRNDC = current round or EVNT.RENTRCCR = current round) or

(EVNT.EVNRNDC ^= current round and EVNT.OTHRTYPE = 5/OstomySupplies,

6/IncontinenceSupplies, or 7/Bandages and there is a current round PMRO where

(PMRO.PMROEVNT=this EVNT.EVNTNUM and PMRO.PMRORND=current round)).

If a specific other medical expense item was reported more than once, only display the item once in report:

If EVNT.OTHRTYPE ^= 91/Other and EVNT.OTHRYPE matches EVNT.OTHRTYPE on another EVNT already being displayed in report, do not display.

Column 1, display = Display name of other medical expense item.

If EVNT.OTHRTYPE= 91/Other, display other specify text, EVNT.EVOSTEXT.

Else display EVNT.OTHRTYPE response.

BOX OM24

BOX INSTRUCTIONS

IF SP HAD AT LEAST ONE ALTERATION THAT WAS NOT COMPLETE AT THE TIME OF THE PREVIOUS ROUND INTERVIEW, GO TO OMS28INTR - ALTRINTRO.

ELSE GO TO OM28 - OMPRALTR.

OMS28INTR

No Entry

QUESTION TEXT

The next questions are about an alteration [you were/(SP) was] making as of (REFERENCE DATE).

FIELD 1: ALTRINTRO**FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	OMS28_IN - NAVIGATOR
	Empty	OMS28_IN - NAVIGATOR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OMS28_IN

Instance Navigator

FIELD 1: NAVIGATOR**FIELD 1 ROUTING**

Value	Label	Route
1	ITEM SELECTED IN INSTANCE NAVIGATOR	OMS28 - EVBEGMM
2	CONTINUE INTERVIEW SELECTED	OM28 - OMPRALTR

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
N/A	1

OMS28

Date

QUESTION TEXT

Last time [you/(SP)] had started to make an alteration (ALTERATION) that was not completed as of (REFERENCE DATE/SURVEY REFERENCE DATE).

On what date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] was this alteration completed?

FIELD 1: EVBEGMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OMS28 - EVBEGDD
	Empty	OMS28 - EVBEGDD
	Don't Know	OMS28 - EVBEGDD
	Refused	OMS28 - EVBEGDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGMM	1

FIELD 2: EVBEGDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OMS28 - EVBEGYY
	Empty	OMS28 - EVBEGYY
	Don't Know	OMS28 - EVBEGYY

Value	Label	Route
	Refused	OMS28 - EVBEGYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGDD	1

FIELD 3: EVBEGYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OMS28 - OMNOTDONE
	Empty	OMS28 - OMNOTDONE
	Don't Know	OMS28 - OMNOTDONE
	Refused	OMS28 - OMNOTDONE

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGYY	1

FIELD 4: OMNOTDONE**FIELD 4 ROUTING**

Value	Label	Route
1	ALTERATION NOT YET COMPLETED	BOX OM25
	Empty	BOX OM25

FIELD 4 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Set status of Alteration as instructed below.

Variable Name	Assignment Instructions
OMSTATUS	If date entered, set EVNT.OMSTATUS = 2/AlterationComplete.
EV95FLG	If date entered, set EVNT.EV95FLG = previous round.

BOX OM25

BOX INSTRUCTIONS

GO TO OMS28_IN - NAVIGATOR.

OM28

Yes/No

QUESTION TEXT

SHOW CARD OM5

[Since (REFERENCE DATE/SURVEY REFERENCE DATE)/Between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)], did [you/(SP)] make any alterations or modify the inside or outside of (your/his/her) home or car because of some illness or injury? This card lists some examples.

[Alterations include ramps, handrails, elevator or incline chair, tub seats, tub handrails, and any car alterations.]

FIELD 1: OMPRALTR**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM29 - ALTRTYPE
2	NO	BOX OM26
3	INDICATED YES BY DATAPREP	DO NOT DISPLAY.
	Don't Know	BOX OM26
	Refused	BOX OM26

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
HRND.OMPRALTR	1

OM29

Code 1

QUESTION TEXT

What was the alteration?

FIELD 1: ALTRTYPE**FIELD 1 ROUTING**

Value	Label	Route
1	ELEVATOR OR INCLINE CHAIR	OM30 - EVBEGMM
2	HANDRAILS (OTHER THAN TUB)	OM30 - EVBEGMM
3	RAMPS	OM30 - EVBEGMM
4	TUB HANDRAILS	OM30 - EVBEGMM
5	TUB SEAT	OM30 - EVBEGMM
6	ANY CAR ALTERATION	OM30 - EVBEGMM
91	OTHER	OM29 - EVOSTEXT

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.ALTRTYPE	1

FIELD 2: EVOSTEXT

OTHER (SPECIFY)

FIELD 2 ROUTING

Value	Label	Route
1	[Continuous answer.]	OM30 - EVBEGMM

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVOS.EVOSTEXT EVOSTEXT and EVNTQUES are stored on tblEVNT in SQL and then transformed to EVOS in Cheshire: EVOS.EVOSNUM = unique sequential # EVOS.EVOSRND = current round EVOS.EVOSTEXT = EVNT.EVOSTEXT EVOS.EVNTQUES = EVNT.EVNTQUES	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Roster details will be collected on EVNT:
 EVNT key = EVNT.EVNTBASE + EVNT.EVNTNUM
 EVNT.EVNTNUM = Number of OM event selected.

For Event(s) added, see EVENT ROSTER BEGIN DATE POP-UP specifications for pop-up window programming instructions.

Variables populated in Event Roster Begin Date:

EVNT.EVNTNUM	Event number
EVNT.EVNTRND	Round
EVNT.EVBEGMM	Event Month
EVNT.EVBEGDD	Event Day
EVNT.EVBEGYY	Event Year
BASE.LASTEVRT	Highest EVNT.EVNTNUM.

For each event added, set additional EVNT fields as instructed below.

Variable Name	Assignment Instructions
EVNTNUM	Set new EVNT.EVNTNUM = BASE.LASTEVRT + 001. This assumes that BASE.LASTEVRT is incremented each time an EVNT record is generated in the field.

Variable Name	Assignment Instructions
LASTEVNT	Once new EVNT record is generated, set BASE.LASTEVT = new EVNT.EVNTNUM.
EVNTRNDC	EVNT.EVNTRNDC = current round.
EVNTTYPE	EVNT.EVNTTYPE = 'OM'.
OMETYPE	EVNT.OMETYPE = 7/Alteration.
ALTRTYPE	EVNT.ALTRTYPE = OM29 - ALTRTYPE response.
STOMTYPE	If ALTRTYPE = 1/Elevator, STOMTYPE = 31/Elevator. 2/HandrailsNotTub, STOMTYPE=32/HandrailsNotTub. 3/Ramps, STOMTYPE=33/Ramps. 4/TubHandrails, STOMTYPE=34/TubH... 5/TubSeat, STOMTYPE=35/TubS.. 6/CarAlteration, STOMTYPE=36/Ca.. 91/Other, STOMTYPE=91.
EVNTPROV	EVNT.EVNTPROV = 01.
EVNTQUES	If OM29 - ALTRTYPE = 91/Other, set EVNT.EVNTQUES = 'OM29'.
EVOSTEXT	If OM29 - ALTRTYPE = 91/Other, set EVNT.EVOSTEXT = OM29 - EVOSTEXT other specify text.
EVCHGFLG	If currently administering ST or NS, set EVNT.EVCHGFLG = 1/Yes.
EVORPFLG	If currently administering ST or NS, and if OM Event date added is outside the Survey Reference Period, set EVNT.EVORPFLG = 1/ORP. See General Specifications for setting this ORP flag.

DESIGN NOTES

Called from ST36 and NS36 if OM needs to be added to charge bundle in ST and/or NS.

OM30

Date

QUESTION TEXT

On what date [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)] was this alteration completed?

FIELD 1: EVBEGMM**FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM30 - EVBEGDD
	Empty	OM30 - EVBEGDD
	Don't Know	OM30 - EVBEGDD
	Refused	OM30 - EVBEGDD

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGMM	1

FIELD 2: EVBEGDD**FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM30 - EVBEGYY
	Empty	OM30 - EVBEGYY
	Don't Know	OM30 - EVBEGYY
	Refused	OM30 - EVBEGYY

FIELD 2 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGDD	1

FIELD 3: EVBEGYY**FIELD 3 ROUTING**

Value	Label	Route
1	[Continuous answer.]	OM30 - OMNOTDONE
	Empty	OM30 - OMNOTDONE
	Don't Know	OM30 - OMNOTDONE
	Refused	OM30 - OMNOTDONE

FIELD 3 ATTRIBUTES

Cheshire Name	Answers Allowed
EVNT.EVBEGYY	1

FIELD 4: OMNOTDONE**FIELD 4 ROUTING**

Value	Label	Route
1	ALTERATION NOT YET COMPLETED	BOX OM25A
	Empty	BOX OM25A

FIELD 4 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**BACKGROUND VARIABLE ASSIGNMENTS**

Set status of Alteration as instructed below.

Variable Name	Assignment Instructions
OMSTATUS	If OM30 - OMNOTDONE = 1/AlterationNotComplete, set EVNT.OMSTATUS = 1/AlterationNotComplete. Else if date entered, set EVNT.OMSTATUS = 2/AlterationComplete.

DESIGN NOTES

When OM Alterations are added in ST or NS and ST routes to OM30, once a date is entered at OM30, the program first displays a NO ENTRY screen before returning to ST/NS. The screen reads "PRESS ENTER TO CONTINUE".

BOX OM25A

BOX INSTRUCTIONS

IF ADMINISTERING ST, GO TO BOX ST36.

ELSE IF ADMINISTERING NS, GO TO BOX NS36.

ELSE GO TO OM31 - MOREALTR.

OTHER PROGRAMMING INSTRUCTIONS

DESIGN NOTES

If administering ST or NS, return to BOX ST36 or BOX NS36.

OM31

Yes/No

QUESTION TEXT

In addition to the alteration(s) you just told me about, did [you/(SP)] make any other alterations because of some illness or injury [since (REFERENCE DATE/SURVEY REFERENCE DATE)/between (REFERENCE DATE/SURVEY REFERENCE DATE) and (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

FIELD 1: MOREALTR**FIELD 1 ROUTING**

Value	Label	Route
1	YES	OM29 - ALTRTYPE
2	NO	BOX OM26
	Don't Know	BOX OM26
	Refused	BOX OM26

FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

OTHER PROGRAMMING INSTRUCTIONS**REPORT DISPLAY**

Display report below question text.

Display all alterations that have been reported in the current round where:
 EVNT.EVNTDFLG ^= 1/Yes, and
 (EVNT.EVNRNDC = current round or EVNT.OMSTATUS = 1/AlterationNotComplete), and
 EVNT.EVNTTYPE = OM, and
 EVNT.OMETYPE = 7/Alteration.

If a specific Alteration item was reported more than once, only display the item once in report:
 If EVNT.ALTRTYPE ^= 91/Other and EVNT.ALTRTYPE matches EVNT.ALTRTYPE on another

EVNT already being displayed in report, do not display.

Column 1, display = Display name of alteration.

If EVNT.ALTRTYPE= 91/Other, display other specify text, EVNT.EVOSTEXT.

Else display EVNT.ALTRTYPE response.

BOX OM26

BOX INSTRUCTIONS

GO TO NEXT SECTION