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# **Medicare Current Beneficiary Survey**

Section Specifications for CPS R58 2010

CHARGE/PAYMENT SUMMARY

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# BOX CPSBEG

## BOX INSTRUCTIONS

CPS REASON HAS ALREADY BEEN ASSIGNED TO ALL CHARGE BUNDLES ENTERED IN THE PAST 2 ROUNDS THAT HAVE MISSING CHARGE DATA.

CPS REASON 1 = NO STATEMENT CHARGE BUNDLE, SP EXPECTED TO RECEIVE A STATEMENT

CPS REASON 2 = NO STATEMENT CHARGE BUNDLE, NO PAYMENTS HAVE BEEN MADE.

CPS REASON 3 = STATEMENT CHARGE BUNDLE, NO PAYMENTS HAVE BEEN MADE.

CPS REASON 4 = NO STATEMENT CHARGE BUNDLE, TOTAL PAYMENTS LESS THAN TOTAL CHARGE.

CPS REASON 5 = STATEMENT CHARGE BUNDLE, TOTAL PAYMENTS LESS THAN AMOUNT REMAINING.

CPS REASON 6 = SP MADE PAYMENT AND EXPECTED REIMBURSEMENT.

CPS REASON 7 = SP MADE PAYMENT AND DID NOT KNOW IF REIMBURSEMENT EXPECTED.

CPS REASON 8 = NO STATEMENT CHARGE BUNDLE ENTERED AT HOME OFFICE, SP EXPECTED TO RECEIVE A STATEMENT.

IN CPS, WE WILL REVIEW THIS LIST OF CHARGE BUNDLES AND WILL EXCLUDE ANY CHARGE BUNDLE WITH AN EVENT THAT HAS BEEN DELETED, HAS BEEN LINKED TO A STATEMENT CHARGE BUNDLE IN THE CURRENT ROUND, OR WAS ASKED ABOUT IN THE CURRENT ROUND NO STATEMENT SECTION AND THE SP IS NOT EXPECTING TO RECEIVE A STATEMENT FOR THIS EVENT.

THE REMAINING LIST OF CHARGE BUNDLES WILL BE ELIGIBLE FOR CPS. WE WILL SORT THIS LIST BY CPS REASON. WE WILL THEN COLLECT CPS DETAILS FOR THE FIRST CHARGE BUNDLE IN THIS LIST.

AFTER COMPLETING THE CPS DETAILS FOR THIS CHARGE BUNDLE, WE WILL RETURN TO BOX CPSBEG. BECAUSE THE DATA THAT DETERMINES IF A CHARGE BUNDLE IS ELIGIBLE FOR CPS MAY BE UPDATED WHILE ADMINISTERING CPS, THE LIST OF ELIGIBLE CHARGE BUNDLES WILL BE RECREATED AT THE BEGINNING OF EACH LOOP IN CPS

IF AT LEAST ONE CHARGE BUNDLE HAS BEEN IDENTIFIED AS ELIGIBLE FOR CPS, GO TO CPS1\_IN - NAVIGATOR.

ELSE GO TO BOX CPSEND.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **BACKGROUND VARIABLE ASSIGNMENTS**

Each time BOX CPSBEG is executed, a new list of charge bundles eligible for CPS will be generated. To generate list of charge bundles that will be asked about in CPS, execute the following steps:

#### STEP 1:

Include only charge bundles flagged as expected to receive CPS in the current round:

If (COST.CPROUND = current round and COST.CPREASN ^= empty and COST.EXCPSFLG ^= 2/NotIndicated), go to STEP 2 for this charge bundle. (Note: COST.EXCPSFLG may be set to 2/NotIndicated in an earlier execution of BOX CPSBEG.)

Else repeat STEP 1 for next charge bundle.

#### STEP 2:

Eliminate any Charge Bundle if at least one event linked to the charge bundle is also ((linked to a current round Statement COST) or (linked to a current round No Statement COST and SP does not expect to receive a statement or event was entered in error) or (event was flagged as deleted in the current round)).

#### Description:

1) If the SP enters a new statement in the current round ST section, the SP can then link events to the statement. Each event will then be linked to a current round COST where COST.COSTTYPE = 'ST'. If there is a CPS charge bundle linked to at least one of these events, the CPS charge bundle linked to this event will not get asked about in the CPS section.

2) If the SP reports an ongoing EVNT, such as home health event, PM event, OM purchase, or OM rental, in the current round and does not link the event to a statement, we will probe for charge data in the NS section. Each event will then be linked to a current round COST where COST.COSTTYPE = 'NS'. If the SP is not expecting to receive a statement and event was not entered in error (i.e. COST.EXMCMail ^= 1 and COST.EXMCMail ^= 3), we will collect charge data in NS. If there is a CPS charge bundle linked to at least one of these events where we collect charge data in NS, the CPS charge bundle linked to this event will not get asked about in the CPS section.

The exception to this are events that do not get asked COST.EXMCMail in NS (see BOX NS1 specs). For these events where COST.COSTTYPE = 'NS' and COST.EXMCMail = NULL, if

there is a CPS charge bundle linked to at least one of these events where we collect charge data in NS, the CPS charge bundle linked to this event will still get asked about in the CPS section.

3) If in HHS, when probing about HH providers from the previous round, the SP can report that the HH event was entered in error. If there is a CPS charge bundle linked to at least one of these HH provider events, the CPS charge bundle linked to this event will not get asked about in the CPS section.

4) There are a few places in the instrument where the SP can report that an event was entered in error. Per specifications, we set EVNT.EVNTDFLG = 1/Yes. If there is a CPS charge bundle linked to at least one of these deleted events, the CPS charge bundle linked to this event will not get asked about in the CPS section.

CONDITION:

If (Event linked to charge bundle is also linked to a second charge bundle where (XCEV.XCEVEVNT = EVNT.EVNTNUM and XCEV.XCEVCOST = COST.COSTNUM and XCEV.DELLINK ^= 1/Yes) and ((COST.COSTRND = current round) and ((COST.COSTTYPE = 'ST') or (COST.COSTTYPE = 'NS' and COST.EXMCMAIL ^= 1/Yes and COST.EXMCMAIL ^= 3/EventEnteredInError)))) OR

If (Event linked to charge bundle has (EVNT.EVNTTYPE = 'HF' or 'HP') and there is a HERO where HERO.HEROEVNT = EVNT.EVNTNUM and (HERO.PROFPROB = 3/HomeHealthEnteredInError or HERO.FRNDPROB = 3/HomeHealthEnteredInError)), OR

If (Event linked to charge bundle has EVNT.EVNTDFLG = 1/Yes), then do;

Set COST.EXCPSFLG = 2/NotIndicated.

Set COST.EXMCRND = current round.

End;

NOTE: By setting COST.EXCPSFLG = 2/NotIndicated, this will eliminate this charge bundle as eligible for CPS in Step 1 the next time BOX CPSBEG is executed.

NOTE: If charge bundle is eligible for CPS, and CPS details have already been collected and are complete, do not collect CPS details a second time. However, if CPS details are not complete because the interviewer invoked a breakoff while collecting CPS details, complete CPS details for this charge bundle.

If this charge bundle COST.EXCPSFLG ^= 2/NotIndicated, add Charge Bundle to list of eligible Charge Bundles for CPS.

If another charge bundle, return to STEP 1 for next charge bundle.

Else go to STEP 3.

STEP 3:

If no charge bundles flagged as eligible at STEP2, go to BOX CPEND.

Else sort all charge bundles flagged at STEP 2 by COST.CPREASN in the following order:

COST.CPREASN = 1  
 COST.CPREASN = 8  
 COST.CPREASN = 2  
 COST.CPREASN = 3  
 COST.CPREASN = 4  
 COST.CPREASN = 5  
 COST.CPREASN = 6  
 COST.CPREASN = 7

Go to STEP 4.

STEP 4:

We will only collect details for the first Charge Bundle in the list sorted at STEP 3 in this loop. Once the detail loop is complete, the route will return to BOX CPSBEG to generate a new list of charge bundles eligible for CPS. The purpose of this is to exclude any charge bundles which were flagged for CPS, but are no longer eligible because an event has been linked to a new current round charge bundle.

For the first Charge Bundle in the list sorted at STEP 3, create a current round CORO. A current round CORO may have already been generated if CPS REASON 1 or 8.

CORO Key = CORO.COROBASE + CORO.COROCOST + CORO.CORORND

For the first Charge Bundle in the list sorted at STEP 3 only, set the following fields:

CORO.COROCOST  
 CORO.CORORND  
 CORO.COROTYPE  
 CORO.CPSREASN  
 CORO.RECDSTAT

See detailed instructions below.

GO TO CPS1\_IN for first Charge Bundle in the list sorted at STEP 3.

Variable Name	Assignment Instructions
COROCOST	For charge bundle eligible for CPS, if current round CORO does not exist, create CORO where CORO.COROCOST = COST.COSTNUM.
CORORND	For charge bundle eligible for CPS, if current round CORO does not exist, create CORO where CORO.CORORND = current round.
COROTYPE	For charge bundle eligible for CPS, set CORO.COROTYPE = 3/CPS.
CPSREASN	For charge bundle eligible for CPS, set CORO.CPSREASN = COST.CPREASON
RECDSTAT	For charge bundle eligible for CPS, if current round CORO exists and CORO.RECDSTAT = 1/StatementReceivedAndAvailable, update CORO.RECDSTAT = empty.
EXCPSFLG	For all Charge Bundles excluded at STEP 2, set COST.EXCPSFLG = 2/NotIndicated.
EXMCRND	For all Charge Bundles at STEP 2 excluded at STEP 2, set COST.EXMCRND = Current Round.

# CPS1\_IN

Instance Navigator

**FIELD 1: NAVIGATOR****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	ITEM SELECTED IN INSTANCE NAVIGATOR	CPS1 - CPSINT
2	CONTINUE INTERVIEW SELECTED	BOX CPSBEG

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
N/A	1

# CPS1

No Entry

**QUESTION TEXT**

(Next, I will ask about some medical care that we talked about in a previous interview.)

THERE ARE (TOTAL NUMBER OF CPS EVENTS) EVENTS OR BUNDLES (REMAINING) FOR SUMMARY.

(First/Next), I want to ask about [READ EVENT(S) ABOVE].

**FIELD 1: CPSINT****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	CONTINUE	BOX CPS1A
	Empty	BOX CPS1A

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****DESIGN NOTES**

DISABLE PREVIOUS PAGE.

# BOX CPS1A

## BOX INSTRUCTIONS

IF CPS REASON = 1 OR 8, GO TO CPS2 - RECDSTAT.

ELSE GO TO BOX CPS1B.

# BOX CPS1B

## BOX INSTRUCTIONS

CREATE SOURCE OF PAYMENT ROSTER

IF CPS REASON = 2, 6 OR 7, GO TO BOX CPS2.

ELSE IF CPS REASON = 3, GO TO CPS11 - CPTCHGPAID2.

ELSE IF CPS REASON = 4, GO TO CPS13 - CPTCHGPAID3.

ELSE IF CPS REASON = 5, GO TO CPS15 - CPTCHGPAID4.

## OTHER PROGRAMMING INSTRUCTIONS

### **BACKGROUND VARIABLE ASSIGNMENTS**

TSOP table is loaded once for each new Charge Bundle being asked about in CPS.

TSOP key = TSOP.TSOPBASE + TSOP.TSOPNUM.

Before proceeding, delete all TSOP records and load all eligible Sources of Payments:

1st Record:

Always store SP/FAMILY:

TSOP.TSOPTTEXT = "SP/FAMILY"

TSOP.TSOPTYPE = 1/SPFamily

Check to see if any Payments of this type have been made for this charge bundle:

If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.

TSOP.TSOPAMT = PAYM.PAYMAMT.

2nd Record:

Always store Provider discount:

TSOP.TSOPTTEXT = "PROVIDER DISCOUNT/COURTESY"

TSOP.TSOPTYPE = 2/ProvDiscount

Check to see if any Payments of this type have been made for this charge bundle:

If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.

TSOP.TSOPAMT = PAYM.PAYMAMT.

3rd Record:

Always store Medicare:

TSOP.TSOPTTEXT = "MEDICARE".  
 TSOP.TSOPTYPE = 6/Medicare  
 TSOP.TSOPPLAN = '01'  
 TSOP.TSOPPTYP = 1/Medicare  
 TSOP.TSOPDISP = "(MCAR)".

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
 and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE and  
 PAYM.PAYMPLAN = TSOP.TSOPPLAN, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Next, store all Medicare HMOs SP was covered by during the survey reference period (not  
 flagged as deleted).

If there is a PLAN with PLAN.PLANTYPE = 5/MHMO and a PLRO where PLRO.PLRORND >=  
 (current round -2), store MHMO plan:

TSOP.TSOPTTEXT = PLAN.PLNAME  
 TSOP.TSOPTYPE = 8/MHMO  
 TSOP.TSOPPLAN = PLAN.PLANUM of MHMO plan  
 TSOP.TSOPPTYP = PLAN.PLANTYPE of MHMO plan  
 TSOP.TSOPDISP = "(MHMO)".

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
 and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE and  
 PAYM.PAYMPLAN = TSOP.TSOPPLAN, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Repeat for all MHMO plans.

Next, store VA if eligible.

If (INTTYPE=8/ExitInterviewHadPrev and previous round HRND.VACOVER=1/Yes) or  
 (INTTYPE ^= 8/ExitInterviewHadPrev and current round HRND.VACOVER=1/Yes), store VA:

TSOP.TSOPTTEXT = "V.A. - DEPT. OF VETERANS AFFAIRS"  
 TSOP.TSOPTYPE = 5/VA.

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
 and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Next, store MEDICARE SUBSIDY:

TSOP.TSOPTTEXT = "MEDICARE SUBSIDY"  
 TSOP.TSOPTYPE = 11/MedicareSubsidy.

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
 and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE, set:  
 TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Next, store EXTRA HELP:

TSOP.TSOPTTEXT = "EXTRA HELP"  
 TSOP.TSOPTYPE = 12/ExtraHelp.

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM  
 and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE, set:  
 TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Next, store Medicaid, Public, Private, and Tricare plans SP was covered by during the survey  
 reference period (not flagged as deleted).

If there is a PLAN with (PLAN.PLANTYPE = 2/Medicaid, 3/PublicPlan, 4/PrivatePlan, 6/Tricare  
 or 7/MPDP) and a PLRO where PLRO.PLRORND >= (current round -2), store Plan:

TSOP.TSOPTTEXT =  
 If PLAN.PLANTYPE = 2/Medicaid, TSOP.TSOPTTEXT = 'MEDICAID/MEDICAID HMO';  
 Else if PLAN.PLANTYPE = 6/Tricare, TSOP.TSOPTTEXT = "TRICARE".  
 Else TSOP.TSOPTTEXT = PLAN.PLNAME;  
 If PLAN.PLANTYPE = 7/MPDP, set TSOP.TSOPTYPE = 10/MedicarePartD.  
 Else set TSOP.TSOPTYPE = 3/PlanNotMHMO  
 TSOP.TSOPPLAN = PLAN.PLANNUM of HI plan.  
 TSOP.TSOPPTYP = PLAN.PLANTYPE of HI plan.  
 TSOP.TSOPDISP =  
 If PLAN.PLANTYPE = 2/Medicaid, TSOP.TSOPDISP = "(MCAD)".  
 Else if PLAN.PLANTYPE = 3/PublicPlan, TSOP.TSOPDISP = "(PUBL)".  
 Else if PLAN.PLANTYPE = 4/PrivatePlan, TSOP.TSOPDISP = "(PRIV)".  
 Else if PLAN.PLANTYPE = 6/Tricare, TSOP.TSOPDISP = "(TRIC)".  
 Else if PLAN.PLANTYPE = 7/MPDP, TSOP.TSOPDISP = "(MPDP)".

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM

and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE and PAYM.PAYMPLAN = TSOP.TSOPPLAN, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Repeat for all Medicaid, Public, Private, Tricare and Medicare Prescription Drug plans.

Next, store Discount Membership Plans SP was covered by during the current round:  
 If there is a DMEM and a DMRO where DMRO.DMRORND = current round, store Discount Membership plan:

TSOP.TSOPTTEXT = DMEM.DMNAMEX  
 TSOP.TSOPTYPE = 9/DM  
 TSOP.TSOPDMEM = DMEM.DMEMNUM

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE and PAYM.PAYMDMEM = TSOP.TSOPDMEM, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Repeat for all DMEMs.

Next, store all Other Sources of Payments (not flagged as deleted).  
 Store OSOP:

TSOP.TSOPTTEXT = OSOP.OSOPTTEXT  
 TSOP.TSOPTYPE = 4/OSOP  
 TSOP.TSOPOSOP = OSOP.OSOPNUM  
 TSOP.TSOPDISP = "(OTHER)".

Check to see if any Payments of this type have been made for this charge bundle:  
 If there is a PAYM where PAYM.PAYMCOST = charge bundle COST.COSTNUM and PAYM.PAYMDFLG ^= 1/Yes and PAYM.PAYMTYPE = TSOP.TSOPTYPE and PAYM.PAYMOSOP = TSOP.TSOPOSOP, set:

TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.  
 TSOP.TSOPAMT = PAYM.PAYMAMT.

Repeat for all OSOPs.

Variable Name	Assignment Instructions
TSOPNUM	Beginning with 01, create TSOP where TSOP.TSOPNUM = highest TSOP.TSOPNUM + 01.

<b>Variable Name</b>	<b>Assignment Instructions</b>
TSOPTTEXT	Set TSOP.TSOPTTEXT as specified above.
TSOPTYPE	Set TSOP.TSOPTYPE as specified above.
LOADFLAG	Set TSOP.LOADFLAG = 1/Yes.
TSOPPTYP	If SOP is a Health Insurance plan, set TSOP.TSOPPTYP = PLAN.PLANTYPE.
TSOPPLAN	If SOP is a Health Insurance plan, set TSOP.TSOPPLAN = PLAN.PLANNUM.
TSOPOSOP	If SOP is an Other Source of Payment, set TSOP.TSOPOSOP = OSOP.OSOPNUM.
TSOPDISP	Set TSOP.TSOPDISP as specified above.
TSOPPAYM	If PAYM.PAYMAMT exists and is > 0 for this charge bundle, set TSOP.TSOPPAYM = PAYM.PAYMCOST + PAYM.PAYMNUM.
TSOPAMT	If PAYM.PAYMAMT exists and is > 0 for this charge bundle, set TSOP.TSOPAMT = PAYM.PAYMAMT.
TSOPDMEM	If SOP is a Discount Membership plan, set TSOP.TSOPDMEM = DMEM.DMEMNUM.

**CPS2**

Code 1

**QUESTION TEXT**

[At the last interview, [you were/(SP) was] expecting to receive a statement or paper from (Medicare, Insurance, and TRICARE/Medicare and TRICARE/Medicare and Insurance/Medicare).] [Have you/Has (SP)] received a statement for the [READ EVENT(S) ABOVE] (since then/since the last interview)?

([PROBE IF NECESSARY: Please include any statements received about (your/(SP's)) Medicare prescription drug benefit.]

**FIELD 1: RECDSTAT****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	STATEMENT RECEIVED AND AVAILABLE	ST4 - MATCHST
2	STATEMENT RECEIVED, NOT AVAILABLE	BOX NS4A
3	STATEMENT NOT RECEIVED	BOX NS4A
	Don't Know	BOX NS4A
	Refused	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.RECDSTAT	1

# BOX CPS2

## **BOX INSTRUCTIONS**

IF TOTAL CHARGE = DK OR RF AND ((ASKING ABOUT A NO STATEMENT CHARGE BUNDLE) OR (ASKING ABOUT A STATEMENT CHARGE BUNDLE AND TYPE OF STATEMENT IS NOT A MEDICARE PRESCRIPTION DRUG BENEFIT STATEMENT)), GO TO CPS3 - KNOWTOTL.

ELSE IF CPS REASON = 2, GO TO CPS9 - CPTCHGPAID1.

ELSE IF CPS REASON = 6 OR 7, GO TO CPS19 - CPSREIMINT.

**CPS3**

Yes/No

**QUESTION TEXT**

Do you happen to know the (total charge/copayment amount) for the [READ EVENT(S) ABOVE]?

**FIELD 1: KNOWTOTL****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	BOX CPS3
2	NO	BOX CPS3
	Refused	BOX CPS3

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.KNOWTOTL	1

# BOX CPS3

## BOX INSTRUCTIONS

IF CPS3 - KNOWTOTL = 1/Yes AND (TOTAL CHARGE WAS COLLECTED FOR CHARGE BUNDLE), GO TO CPS4 - TOTALCHG.

ELSE IF CPS3 - KNOWTOTL = 1/Yes AND (COPAYMENT WAS COLLECTED FOR CHARGE BUNDLE), GO TO CPS5 - TOTALCHG.

ELSE IF (CPS3 - KNOWTOTL = 2/No OR RF) AND (CPS REASON = 2), GO TO CPS9 - CPTCHGPAID1.

ELSE IF CPS REASON = 6 OR 7, GO TO CPS19 - CPSREIMINT.

**CPS4**

Numeric

**QUESTION TEXT**

Including any amounts that may be paid by Medicare or anyone else, what was the total charge [that is, the amount billed]?

ENTER 0 IF NO CHARGE FOR THE EVENT.

**FIELD 1: TOTALCHG****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS5A
	Don't Know	BOX CPS5A
	Refused	BOX CPS5A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.TOTALCHG	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TOTALAMT	COST.TOTALAMT = CPS4 - TOTALCHG.
TOTALTYP	CORO.TOTALTYP = 1/TotalCharge.

**CPS5**

Numeric

**QUESTION TEXT**

What was the copayment amount for the [READ EVENT(S) ABOVE]?

[EXPLAIN IF NECESSARY: Managed care plans commonly charge a fixed amount, or copayment, for health services provided. For example, the person may pay \$10 for each office visit and \$5 for each drug prescription.]

ENTER 0 IF NO COPAYMENT FOR THE EVENT.

**FIELD 1: TOTALCHG****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS5A
	Don't Know	BOX CPS5A
	Refused	BOX CPS5A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.TOTALCHG	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TOTALAMT	COST.TOTALAMT = CPS5 - TOTALCHG.
TOTALTYP	CORO.TOTALTYP = 2/CoPayment.

# BOX CPS5A

## **BOX INSTRUCTIONS**

IF (CPS REASON = 2) AND (TOTAL CHARGE = 0) AND (SP IS CURRENTLY COVERED BY MEDICAID), GO TO BOX CPS32.

ELSE IF (CPS REASON = 6 OR 7) AND (TOTAL CHARGE = RF), GO TO CPS19 - CPSREIMINT.

ELSE GO TO BOX CPS5B.

# BOX CPS5B

## BOX INSTRUCTIONS

FOR THE FIRST/NEXT EVENT INCLUDED IN THE CHARGE BUNDLE, IF EVENT TYPE = 'OM' AND EVENT IS A RENTAL ITEM, GO TO CPS6 - MONTHCOV.

ELSE FOR THE FIRST/NEXT EVENT INCLUDED IN THE CHARGE BUNDLE, IF (EVENT TYPE = 'PM') OR (EVENT TYPE = 'OM' AND (OTHER MEDICAL EXPENSE IS OSTOMY SUPPLIES, INCONTINENCE SUPPLIES OR BANDAGES)), GO TO CPS7 - NUMLINKS.

ELSE FOR THE FIRST/NEXT EVENT INCLUDED IN THE CHARGE BUNDLE, IF (EVENT WAS ENTERED AS A REPEAT VISIT), GO TO CPS8 - RVLINKS.

ELSE GO TO BOX CPS8A.

**CPS6**

Numeric

**QUESTION TEXT**

For the [READ OME ITEM ABOVE], how many months are covered by the charge for the period of time between (CHARGE BUNDLE REFERENCE PERIOD)?

**FIELD 1: MONTHCOV****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	CPS6 - MONCOV96
	Empty	CPS6 - MONCOV96
	Don't Know	CPS6 - MONCOV96
	Refused	CPS6 - MONCOV96

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
XCEV.MONTHCOV	1

**FIELD 2: MONCOV96****FIELD 2 ROUTING**

Value	Label	Route
1	LESS THAN 1 MONTH	BOX CPS8A
	Empty	BOX CPS8A

**FIELD 2 ATTRIBUTES**

Cheshire Name	Answers Allowed
NONE  WE NEED TO TRANSFORM MONCOV96=1 BACK TO XCEV.MONTHCOV=96.	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Collect # of months on XCEV:

XCEV key = XCEV.XCEVBASE + XCEV.XCEVCOST + XCEV.XCEVBAS2 +  
 XCEV.XCEVEVNT

XCEV.XCEVCOST = COST.COSTNUM of charge bundle being asked about.

XCEV.XCEVEVNT = EVNT.EVNTNUM of OM Rental event being asked about.

# CPS7

Numeric

**QUESTION TEXT**

How many of the times [you/(SP)] obtained (MEDICINE NAME/OME ITEM TYPE) for the period between (CHARGE BUNDLE REFERENCE PERIOD) [were covered by the total charge/were covered by the (CPS4 - TOTAL CHARGE)/was there no charge/were covered by the copayment/were covered by the (CPS5 - COPAYMENT)/was there no copayment]?

**FIELD 1: NUMLINKS****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS8A
	Don't Know	BOX CPS8A
	Refused	BOX CPS8A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
XCEV.NUMLINKS	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Collect # of purchases on XCEV:

XCEV key = XCEV.XCEVBASE + XCEV.XCEVCOST + XCEV.XCEVBAS2 + XCEV.XCEVEVNT

XCEV.XCEVCOST = COST.COSTNUM of charge bundle being asked about.

XCEV.XCEVEVNT = EVNT.EVNTNUM of (OM Ostomy Supplies, Incontinence supplies, or bandages) or (PM) being asked about.

**CPS8**

Numeric

**QUESTION TEXT**

How many of the [READ EVENT ABOVE] [were covered by the total charge/were covered by the (CPS4 - TOTAL CHARGE)/was there no charge/were covered by the copayment/were covered by the (CPS5 - COPAYMENT)/was there no copayment]?

**FIELD 1: RVLINKS****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS8B
	Don't Know	BOX CPS8B
	Refused	BOX CPS8B

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
XCEV.RVLINKS	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Collect # of visits on XCEV:

XCEV key = XCEV.XCEVBASE + XCEV.XCEVCOST + XCEV.XCEVBAS2 + XCEV.XCEVEVNT

XCEV.XCEVCOST = COST.COSTNUM of charge bundle being asked about.

XCEV.XCEVEVNT = EVNT.EVNTNUM of Repeat Visit event currently being asked about.

# BOX CPS8A

## **BOX INSTRUCTIONS**

IF ANOTHER EVENT IS INCLUDED IN THE CHARGE BUNDLE, GO TO BOX CPS5B.

ELSE GO TO BOX CPS8B.

# BOX CPS8B

## BOX INSTRUCTIONS

IF CPS REASON = 2 AND TOTAL CHARGE  $\neq$  0, GO TO CPS9 - CPTCHGPAID1.

ELSE IF CPS REASON = 2 AND TOTAL CHARGE = 0, GO TO BOX CPS10.

ELSE IF CPS REASON = 6 OR 7, GO TO CPS19 - CPSREIMINT.

**CPS9**

Code 1

**QUESTION TEXT**

[Last time, we recorded that the (total charge/copayment amount) for the [READ EVENT(S) ABOVE] was (TOTAL CHARGE)), and that no payment had been made.] [Have you/Has (SP)] or any other source [, such as (an insurance plan/TRICARE/TRICARE or an insurance plan),] now paid any of [the total charge/the copayment amount/this (TOTAL CHARGE)]?

**FIELD 1: CPTCHGPAID1****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	SP OR ANY SOURCE PAID	BOX CPS10
2	NOTHING HAS BEEN PAID	BOX CPS10
3	(TOTAL CHARGE/COPAYMENT AMOUNT) IS WRONG	CPS10 - TCHGWRONG
	Don't Know	BOX CPS10
	Refused	BOX CPS10

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

<b>Variable Name</b>	<b>Assignment Instructions</b>
TCHGPAID	If CPS9 - CPTCHGPAID1 = 1/SomeonePaid, set CORO.TCHGPAID = 1/Yes. = 2/NothingPaid, set CORO.TCHGPAID = 2/No. = DK, set CORO.TCHGPAID = DK. = RF, set CORO.TCHGPAID = RF.

# CPS10

No Entry

**QUESTION TEXT**

YOU CANNOT CORRECT THE TOTAL CHARGE HERE. THE ERROR HAS BEEN NOTED. ANSWER "YES" OR "NO" AS APPROPRIATE AS TO WHETHER ANY SOURCE HAS PAID ANY PORTION OF THE CHARGE.

**FIELD 1: TCHGWRONG****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	CPS9 - CPTCHGPAID1
	Empty	CPS9 - CPTCHGPAID1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TCHGFLG	Set CORO.TCHGFLG = 2/TotalChargeNotedWrong.
TCHGPAID	Update CORO.TCHGPAID = empty.

# BOX CPS10

## **BOX INSTRUCTIONS**

IF (CPS9 - CPTCHGPAID1 = 1/SomeonePaid) OR (TOTAL CHARGE = 0), GO TO NS65 - NSADDSOP1.

ELSE IF (CPS9 - CPTCHGPAID1 = 2/NothingPaid), GO TO CPS17 - EXPAYOUT.

ELSE GO TO BOX CPS32.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **DESIGN NOTES**

Calls NS SOP roster.

NS returns to CPS at BOX CPSBEG.

# CPS11

Code 1

**QUESTION TEXT**

Last time, we recorded that [Medicare had paid [nothing/(MEDICARE PAYMENT AMOUNT)] and] after Medicare paid, there was an amount remaining of (AMOUNT REMAINING) for the [READ EVENT(S) ABOVE.]

[Have you/Has (SP)] or any other source [, such as (an insurance plan/TRICARE/TRICARE or an insurance plan),] now paid any of this (AMOUNT REMAINING)?

**FIELD 1: CPTCHGPAID2****FIELD 1 ROUTING**

Value	Label	Route
1	SP OR ANY SOURCE PAID	BOX CPS12
2	NOTHING HAS BEEN PAID	BOX CPS12
3	AMOUNT REMAINING SEEMS WRONG	CPS12 - TCHGWRONG
	Don't Know	BOX CPS12
	Refused	BOX CPS12

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

<b>Variable Name</b>	<b>Assignment Instructions</b>
TCHGPAID	If CPS11 - CPTCHGPAID2 = 1/SomeonePaid, set CORO.TCHGPAID = 1/Yes. = 2/NothingPaid, set CORO.TCHGPAID = 2/No. = DK, set CORO.TCHGPAID = DK. = RF, set CORO.TCHGPAID = RF.

# CPS12

No Entry

**QUESTION TEXT**

YOU CANNOT CORRECT THE AMOUNT REMAINING HERE. THE ERROR HAS BEEN NOTED. ANSWER "YES" OR "NO" AS APPROPRIATE AS TO WHETHER ANY SOURCE HAS PAID.

**FIELD 1: TCHGWRONG****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	CPS11 - CPTCHGPAID2
	Empty	CPS11 - CPTCHGPAID2

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TCHGFLG	Set CORO.TCHGFLG = 2/TotalChargeNotedWrong.
TCHGPAID	Update CORO.TCHGPAID = empty.

# BOX CPS12

## **BOX INSTRUCTIONS**

IF (CPS11 - CPTCHGPAID2 = 1/SomeonePaid), GO TO ST65 - STADDSOP1.

ELSE IF (CPS11 - CPTCHGPAID2 = 2/NothingPaid), GO TO CPS17 - EXPAYOUT.

ELSE IF (CPS11 - CPTCHGPAID2 = DK), GO TO CPS23 - RRDETAIL.

ELSE GO TO BOX CPS32.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **DESIGN NOTES**

Calls ST SOP roster.

ST returns to CPS at BOX CPSBEG.

# CPS13

Code 1

**QUESTION TEXT**

Let me review what we recorded last time.

[REVIEW WITH RESPONDENT.] The total of all payments is \$(TOTAL PAYMENTS). The amount unpaid is \$(DIFFERENCE BETWEEN PAYMENTS AND TOTAL CHARGE).

[Have you/Has (SP)] or any other source [, such as (an insurance plan/TRICARE/TRICARE or an insurance plan),] paid any additional amount?

**FIELD 1: CPTCHGPAID3****FIELD 1 ROUTING**

Value	Label	Route
1	SP OR ANY SOURCE PAID	BOX CPS14
2	NOTHING HAS BEEN PAID	BOX CPS14
3	TOTAL CHARGE SEEMS WRONG	CPS14 - TCHGWRONG
4	PAYMENT AMOUNTS WRONG	BOX CPS14
	Don't Know	BOX CPS14
	Refused	BOX CPS14

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****REPORT DISPLAY**

Display report above question text.

Display all Source of Payments where TSOP.TSOPAMT ^= empty in the following order based

on TSOP.TSOPTYPE:

- = 1/SPFamily
- = 2/ProvDiscount
- =11/MedicareSubsidy
- =12/ExtraHelp
- = 6/Medicare
- = 8/MHMO
- =10/MedicarePartD
- = 5/VA
- = 3/PlanNotMHMO
- = 4/OSOP
- = 9/DM

If there is more than Source of Payment per Source of Payment Type, display in order of entry in TSOP.

Not all TSOP.TSOPTYPEs will be applicable.

Report header:

"ALL PAYMENTS"

Report layout:

Column 1, header="SOP NAME".

Column 1, display = TSOP.TSOPTTEXT.

Column 2, header = "PAYMENT".

Column 2, display =

If TSOP.TSOPAMT = DK, display "DK".

Else if TSOP.TSOPAMT = RF, display "RF".

Else display TSOP.TSOPAMT.

## BACKGROUND VARIABLE ASSIGNMENTS

Variable Name	Assignment Instructions
TCHGPAID	If CPS13 - CPTCHGPAID3 = 1/SomeonePaid, set CORO.TCHGPAID = 1/Yes. = 2/NothingPaid, set CORO.TCHGPAID = 2/No. = 4/PaymentsWrong, set CORO.TCHGPAID = 4/PaymentsWrong. = DK, set CORO.TCHGPAID = DK. = RF, set CORO.TCHGPAID = RF.

# CPS14

No Entry

**QUESTION TEXT**

YOU CANNOT CORRECT THE TOTAL CHARGE HERE. THE ERROR HAS BEEN NOTED. ANSWER "YES" OR "NO" AS APPROPRIATE AS TO WHETHER ANY SOURCE HAS PAID ANY ADDITIONAL AMOUNT.

**FIELD 1: TCHGWRONG****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	CPS13 - CPTCHGPAID3
	Empty	CPS13 - CPTCHGPAID3

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TCHGFLG	Set CORO.TCHGFLG = 2/TotalChargeNotedWrong.
TCHGPAID	Update CORO.TCHGPAID = empty.

# BOX CPS14

## **BOX INSTRUCTIONS**

IF CPS13 - CPTCHGPAID3 = 1/Yes OR 4/PaymentsWrong, GO TO NS65 - NSADDSOP1.

ELSE IF CPS13 - CPTCHGPAID3 = 2/NothingPaid, GO TO CPS17 - EXPAYOUT.

ELSE IF (CPS13 - CPTCHGPAID3 = DK), GO TO CPS23 - RRDETAIL.

ELSE GO TO BOX CPS32.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **DESIGN NOTES**

Calls NS SOP roster.

NS returns to CPS at BOX CPSBEG.

**CPS15**

Code 1

**QUESTION TEXT**

Let me review what we recorded last time.

[REVIEW ABOVE WITH RESPONDENT.] There seems to be some amount still unpaid. The total of non-Medicare payments is \$(TOTAL PAYMENTS). The amount unpaid is \$(DIFFERENCE BETWEEN PAYMENTS AND AMOUNT REMAINING).

[Have you/Has (SP)] or any other source [, such as (an insurance plan/TRICARE/TRICARE or an insurance plan),] paid any additional amount?

**FIELD 1: CPTCHGPAID4****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	SP OR ANY SOURCE PAID	BOX CPS16
2	NOTHING HAS BEEN PAID	BOX CPS16
3	AMOUNT REMAINING SEEMS WRONG	CPS16 - TCHGWRONG
4	PAYMENT AMOUNTS WRONG	BOX CPS16
	Don't Know	BOX CPS16
	Refused	BOX CPS16

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****REPORT DISPLAY**

Display report above question text.

Display all Source of Payments where TSOP.TSOPAMT ^= empty in the following order based on TSOP.TSOPTYPE:

- = 1/SPFamily
- = 2/ProvDiscount
- = 11/MedicareSubsidy
- = 12/ExtraHelp
- = 6/Medicare
- = 8/MHMO
- = 10/MedicarePartD
- = 5/VA
- = 3/PlanNotMHMO
- = 4/OSOP
- = 9/DM

If there is more than Source of Payment per Source of Payment Type, display in order of entry in TSOP.

Not all TSOP.TSOPTYPEs will be applicable.

Report header:

"NON-MEDICARE PAYMENTS"

Report layout:

Column 1, header="SOP NAME".

Column 1, display = TSOP.TSOPTTEXT.

Column 2, header = "PAYMENT".

Column 2, display =

If TSOP.TSOPAMT = DK, display "DK".

Else if TSOP.TSOPAMT = RF, display "RF".

Else display TSOP.TSOPAMT.

**BACKGROUND VARIABLE ASSIGNMENTS**

<b>Variable Name</b>	<b>Assignment Instructions</b>
TCHGPAID	If CPTCHGPAID4 = 1/SomeonePaid, set CORO.TCHGPAID = 1/Yes. = 2/NothingPaid, set CORO.TCHGPAID = 2/No. = 4/PaymentsWrong, set CORO.TCHGPAID = 4/PaymentsWrong. = DK, set CORO.TCHGPAID = DK. = RF, set CORO.TCHGPAID = RF.

# CPS16

No Entry

**QUESTION TEXT**

YOU CANNOT CORRECT THE AMOUNT REMAINING HERE. THE ERROR HAS BEEN NOTED. ANSWER "YES" OR "NO" AS APPROPRIATE AS TO WHETHER ANY SOURCE HAS PAID ANY ADDITIONAL AMOUNT.

**FIELD 1: TCHGWRONG****FIELD 1 ROUTING**

Value	Label	Route
1	CONTINUE	CPS15 - CPTCHGPAID4
	Empty	CPS15 - CPTCHGPAID4

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
TCHGFLG	Set CORO.TCHGFLG = 2/TotalChargeNotedWrong.
TCHGPAID	Update CORO.TCHGPAID = empty.

# BOX CPS16

## **BOX INSTRUCTIONS**

IF CPS15 - CPTCHGPAID4 = 1/Yes OR 4/PaymentsWrong, GO TO ST65 - STADDSOP1.

ELSE IF CPS15 - CPTCHGPAID4 = 2/NothingPaid, GO TO CPS17 - EXPAYOUT.

ELSE IF (CPS15 - CPTCHGPAID4 = DK), GO TO CPS23 - RRDETAIL.

ELSE GO TO BOX CPS32.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **DESIGN NOTES**

Calls ST SOP roster.

ST returns to CPS at BOX CPSBEG.

**CPS17**

Yes/No

**QUESTION TEXT**

Do you expect that [you/(SP)] or any other source will pay any (of this amount/additional amount for [READ EVENT(S) ABOVE])?

**FIELD 1: EXPAYOUT****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	BOX CPS17
2	NO	BOX CPS32
	Don't Know	BOX CPS32
	Refused	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.EXPAYOUT	1

# BOX CPS17

## **BOX INSTRUCTIONS**

IF (CHARGES WERE FIRST COLLECTED 2 ROUNDS PREVIOUS TO CURRENT ROUND)  
OR (SP IS IN THE EXIT SAMPLE), GO TO CPS18 - EXPAYUNT.

ELSE GO TO BOX CPS32.

# CPS18

Quantity Unit

**QUESTION TEXT**

How much do you expect will be paid?

**FIELD 1: EXPAYUNT****FIELD 1 ROUTING**

Value	Label	Route
1	PERCENTAGE	CPS18 - EXPAYAMT
2	DOLLARS	CPS18 - EXPAYPCT
	Don't Know	BOX CPS32
	Refused	BOX CPS32

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.EXPAYUNT	1

**FIELD 2: EXPAYPCT****FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS32

**FIELD 2 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.EXPAYPCT	1

**FIELD 3: EXPAYAMT****FIELD 3 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	[Continuous answer.]	BOX CPS32

**FIELD 3 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.EXPAYAMT	1

**CPS19**

No Entry

**QUESTION TEXT**

Last time, [you/(SP)] [expected some source to pay/ (weren't/wasn't) sure whether some source would pay [you/(SP)] back] some or all of the (SP/FAMILY PAYMENT) (you/he/she) had paid for [READ EVENT(S) ABOVE].

**FIELD 1: CPSREIMINT****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	CONTINUE	CPS20 - GOTPAYBK
	Empty	CPS20 - GOTPAYBK

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

# CPS20

Yes/No

**QUESTION TEXT**

Has any source [, such as (an insurance plan/TRICARE/TRICARE or an insurance plan),] paid [you/(SP)] back any of that amount?

([PROBE IF NECESSARY: Please include any payments received from (your/(SP's)] Medicare prescription drug benefit.)

**FIELD 1: GOTPAYBK**

**FIELD 1 ROUTING**

Value	Label	Route
1	YES	CPS25 - CPADDSOP
2	NO	BOX CPS20
	Don't Know	BOX CPS20
	Refused	BOX CPS20

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.GOTPAYBK	1

# BOX CPS20

## BOX INSTRUCTIONS

IF (CPS20 - GOTPAYBK = 2/No) AND (SP PREVIOUSLY EXPECTED A SOURCE TO PAY BACK ANY AMOUNT), GO TO CPS21 - EXPPAYBK.

ELSE IF CPS20 - GOTPAYBK = DK, GO TO CPS23 - RRDETAIL.

ELSE GO TO BOX CPS32.

# CPS21

Yes/No

**QUESTION TEXT**

Do you still expect any source to pay [you/(SP)] back any amount for [READ EVENT(S) ABOVE]?

**FIELD 1: EXPPAYBK****FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX CPS21
2	NO	BOX CPS32
	Don't Know	BOX CPS32
	Refused	BOX CPS32

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.EXPPAYBK	1

# BOX CPS21

## **BOX INSTRUCTIONS**

IF (CHARGES WERE FIRST COLLECTED 2 ROUNDS PREVIOUS TO CURRENT ROUND)  
OR (SP IS IN THE EXIT SAMPLE), GO TO CPS22 - EXPAYUNT.

ELSE GO TO BOX CPS32.

**CPS22**

Quantity Unit

**QUESTION TEXT**

How much do you expect will be paid?

**FIELD 1: EXPAYUNT****FIELD 1 ROUTING**

Value	Label	Route
1	PERCENTAGE	CPS22 - EXPAYPCT
2	DOLLARS	CPS22 - EXPAYAMT
	Don't Know	BOX CPS32
	Refused	BOX CPS32

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.EXPAYUNT	1

**FIELD 2: EXPAYPCT****FIELD 2 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS32

**FIELD 2 ATTRIBUTES**

Cheshire Name	Answers Allowed
CORO.EXPAYPCT	1

**FIELD 3: EXPAYAMT****FIELD 3 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	[Continuous answer.]	BOX CPS32

**FIELD 3 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.EXPAYAMT	1

**CPS23**

Yes/No

**QUESTION TEXT**

DID RESPONDENT MENTION (AN INSURANCE/A) REFUND OR REIMBURSEMENT ABOUT WHICH HE/SHE IS NOT SURE OF THE DETAILS?

**FIELD 1: RRDETAIL****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	CPS24 - RRADD
2	NO	BOX CPS32
	Don't Know	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.RRDETAIL	1

# CPS24

Yes/No

**QUESTION TEXT**

DO YOU WANT TO ADD A REFUND OR REIMBURSEMENT?

**FIELD 1: RRADD****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	CPS25 - CPADDSOP
2	NO	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.RRADD	1

# CPS25

Yes/No

**QUESTION TEXT**

ARE ALL OF THE SOURCES OF PAYMENT FOR THIS CHARGE BUNDLE LISTED BELOW?

SELECT "NO" TO ADD A SOURCE OF PAYMENT.

**FIELD 1: CPADDSOP****FIELD 1 ROUTING**

Value	Label	Route
1	YES	CPS27 - TSOPREIM
2	NO	CPS26 - SOP_CP

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****REPORT DISPLAY**

Display report above question text.

Display all eligible Source of Payments stored on TSOP based on the following logic:

Do not display the following SOP's:

- 1) TSOP.TSOPTYPE = 1/SPFamily.
- 2) TSOP.TSOPTYPE = 11/MedicareSubsidy
- 3) TSOP.TSOPTYPE = 12/ExtraHelp
- 4) If Statement Charge Bundle and type of statement is a Medicare Prescription Drug Benefit statement, do not display TSOP.TSOPTYPE = 2/ProvDiscount.
- 5) If CPS24 is asked and CPS24 - RRDETAIL = 1/Yes and CPS25 - RADD = 1/Yes, do not display TSOP.TSOPTYPE = 2/ProvDiscount.

Display all remaining Source of Payments in the following order based on TSOP.TSOPTYPE:  
= 2/ProvDiscount

= 6/Medicare  
= 8/MHMO  
=10/MedicarePartD  
= 5/VA  
= 3/PlanNotMHMO  
= 4/OSOP  
=9/DM

If there is more than Source of Payment per Source of Payment Type, display in order of entry in TSOP.

Report header: SOURCES OF REIMBURSEMENT

Report layout:

Column 1, header="NAME".

Column 1, display = TSOP.TSOPTTEXT.

Column 2, header = "TYPE".

Column 2, display =

If TSOP.TSOPDISP ^= empty, display TSOP.TSOPDISP.

Else do not display.

# CPS26

## Roster

### QUESTION TEXT

ADD ALL ADDITIONAL SOURCES OF PAYMENT FOR THIS CHARGE BUNDLE.

### FIELD 1: SOP\_CP

#### FIELD 1 ROUTING

Value	Label	Route
1	[Continuous answer.]	CPS27 - TSOPREIM

#### FIELD 1 ATTRIBUTES

Cheshire Name	Answers Allowed
TEMP	1

### OTHER PROGRAMMING INSTRUCTIONS

#### ROSTER/GRID INSTRUCTIONS

Display all eligible Source of Payments stored on TSOP based on the following logic:

Do not display the following SOP's:

- 1) TSOP.TSOPTYPE = 1/SPFamily.
- 2) TSOP.TSOPTYPE = 11/MedicareSubsidy
- 3) TSOP.TSOPTYPE = 12/ExtraHelp
- 4) If Statement Charge Bundle and type of statement is a Medicare Prescription Drug Benefit statement, do not display TSOP.TSOPTYPE = 2/ProvDiscount.

Display all remaining Source of Payments in the following order based on TSOP.TSOPTYPE:

- = 2/ProvDiscount
- = 6/Medicare
- = 8/MHMO
- =10/MedicarePartD
- = 5/VA
- = 3/PlanNotMHMO
- = 4/OSOP
- =9/DM

If there is more than Source of Payment per Source of Payment Type, display in order of entry in TSOP.

Display all loaded Source of Payments as protected rows.

### ROSTER/GRID DISPLAY

Column #	Header	Instructions
1	SOP Name	Display TSOP.TSOPTEXT.
2	SOP Type	If TSOP.TSOPDISP ^= empty, display TSOP.TSOPDISP. Else do not display.

### BACKGROUND VARIABLE ASSIGNMENTS

Roster details will be collected on TSOP:

TSOP key = TSOP.TSOPBASE + TSOP.TSOPNUM.

TSOP.TSOPNUM = Number of Source of Payment selected at CPS26.

If adding SOP, see SOURCE OF PAYMENT ROSTER POP-UP specifications for pop-up window programming instructions.

Fields collected in Pop-Up window:

TSOP.TSOPNUM

TSOP.TSOPTEXT

TSOP.TSOPISHI

# CPS27

Grid

**QUESTION TEXT**

Who (else) paid (besides Medicare)? How much did (SOURCE) pay?

REIMBURSEMENT AMOUNT: (REIMBURSEMENT AMOUNT)

ENTER ALL REIMBURESMENT AMOUNTS.

**FIELD 1: TSOPREIM****FIELD 1 ROUTING**

Value	Label	Route
1	[Continuous answer.]	BOX CPS27A
	Empty	BOX CPS27A
	Don't Know	BOX CPS27A
	Refused	BOX CPS27A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TSOP.TSOPREIM  SQL tblTSOP is not transformed to TSOP Cheshire.	1

**OTHER PROGRAMMING INSTRUCTIONS****ROSTER/GRID INSTRUCTIONS**

Display all eligible Source of Payments stored on TSOP based on the following logic:

Do not display the following SOP's:

- 1) TSOP.TSOPATYPE = 1/SPFamily.
- 2) TSOP.TSOPATYPE = 11/MedicareSubsidy
- 3) TSOP.TSOPATYPE = 12/ExtraHelp

4) If Statement Charge Bundle and type of statement is a Medicare Prescription Drug Benefit statement, do not display TSOP.TSOPTYPE = 2/ProvDiscount.

Display all remaining Source of Payments in the following order based on TSOP.TSOPTYPE:

= 2/ProvDiscount  
 = 6/Medicare  
 = 8/MHMO  
 =10/MedicarePartD  
 = 5/VA  
 = 3/PlanNotMHMO  
 = 4/OSOP  
 =9/DM

If there is more than Source of Payment per Source of Payment Type, display in order of entry in TSOP.

#### **ROSTER/GRID DISPLAY**

<b>Column #</b>	<b>Header</b>	<b>Instructions</b>
1	Name	Display TSOP.TSOPTTEXT. Display Only.
2	Type	If TSOP.TSOPDISP ^= empty, display TSOP.TSOPDISP. Else do not display. Display only.
3	Reimbursement	TSOP.TSOPREIM. Input field 1.

# BOX CPS27A

## BOX INSTRUCTIONS

IF AT LEAST ONE SOURCE OF PAYMENT WAS ADDED AT CPS26, GO TO BOX CPS27B.

ELSE GO TO BOX CPS29F.

# BOX CPS27B

## BOX INSTRUCTIONS

IF AT LEAST ONE SOURCE OF PAYMENT ADDED AT CPS26 IS A HEALTH INSURANCE PLAN, GO TO CPS27BINT - PLANINTRO\_CPS.

ELSE GO TO BOX CPS29B.

# CPS27BINT

No Entry

**QUESTION TEXT**

Before we continue, I would like to ask you a few questions about the health insurance plan(s) you just added.

**FIELD 1: PLANINTRO\_CPS****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	CONTINUE	CPS27B_IN - NAVIGATOR
	Empty	CPS27B_IN - NAVIGATOR

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

# CPS27B\_IN

Instance Navigator

**FIELD 1: NAVIGATOR****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	ITEM SELECTED IN INSTANCE NAVIGATOR	BOX CPS27C
2	CONTINUE INTERVIEW SELECTED	BOX CPS29B

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
N/A	1

# BOX CPS27C

## **BOX INSTRUCTIONS**

CREATE A NEW HEALTH INSURANCE PLAN FOR FIRST/NEXT SOURCE OF PAYMENT ADDED AT CPS26

IF SOURCE OF PAYMENT IS A MEDICARE MANAGED CARE PLAN AND SP HAS A MEDICARE MANAGED CARE PLAN THAT IS CURRENT, GO TO CPS28 - CPMHMOCHNG.

ELSE IF SOURCE OF PAYMENT IS A MEDICARE MANAGED CARE PLAN AND SP DOES NOT HAVE A MEDICARE MANAGED CARE PLAN THAT IS CURRENT, GO TO CPS29 - CPSOPCURR.

ELSE IF SOURCE OF PAYMENT IS A MEDICARE PRESCRIPTION DRUG PLAN AND SP HAS A MEDICARE PRESCRIPTION DRUG PLAN THAT IS CURRENT, GO TO CPS29A - CPMPDPCHNG.

ELSE IF SOURCE OF PAYMENT IS MEDICARE PRESCRIPTION DRUG PLAN AND SP DOES NOT HAVE A MEDICARE PRESCRIPTION DRUG PLAN THAT IS CURRENT, GO TO CPS29B - CPSOPCURR2.

ELSE IF SOURCE OF PAYMENT IS MEDICAID, GO TO HI6 - COVTIME.

ELSE IF SOURCE OF PAYMENT IS A PUBLIC PLAN, GO TO HI13 - COVTIME.

ELSE IF SOURCE OF PAYMENT IS A PRIVATE PLAN, GO TO HI21 - COVTIME.

ELSE GO TO HIT2 - COVTIME.

## **OTHER PROGRAMMING INSTRUCTIONS**

### **BACKGROUND VARIABLE ASSIGNMENTS**

If SOP added is an MHMO, Public plan, Private plan, or Medicare Prescription Drug plan create a new PLAN and current round PLRO record. See detailed instructions below.

If SOP added is Medicaid then:

If there is a PLAN where PLAN.PLANTYPE=2/Medicaid, regardless if PLAN.PLANDFLG=1/Yes or LOSEPLFG ^= empty or tbiPLAN.wvsDeleteFlag = Yes, this stopped Medicaid plan will be restarted. Update existing PLAN flags = empty or No and create a current round PLRO record. See detailed instructions below.

Else if there is no PLAN where PLAN.PLANTYPE=2/Medicaid, create a new PLAN and current round PLRO record. Set PLAN.PLNAME = MEDICAID. See detailed instructions below.

If SOP added is Tricare then:

If there is a PLAN where PLAN.PLANTYPE=6/Tricare, regardless if PLAN.PLANDFLG=1/Yes or LOSEPLFG ^= empty or tbiPLAN.wvsDeleteFlag = Yes, this stopped Tricare plan will be restarted. Update existing PLAN flags = empty or No and create a current round PLRO record. See detailed instructions below.

Else if there is no PLAN where PLAN.PLANTYPE=6/Tricare, create a new PLAN and current round PLRO record. Set PLAN.PLNAME = TRICARE. See detailed instructions below.

PLAN KEY = PLAN.PLANBASE + PLAN.PLANNUM

PLRO KEY = PLRO.PLROBASE + PLRO.PLROPLAN + PLRO.PLRORND

Set PLAN/PLRO fields as instructed below:

Variable Name	Assignment Instructions
PLANNUM	If creating a new PLAN, create PLAN where PLAN.PLANNUM = highest PLAN.PLANNUM + 01.
PLANRNDC	If creating a new PLAN, set PLAN.PLANRNDC = current round.
PLANTYPE	Set PLANTYPE based on TSOPISHI: =1/Medicaid, PLANTYPE=2/Medicaid. =2/PublicPlan, PLANTYPE=3/PublicPlan. =3/PrivatePlan, PLANTYPE=4/PrivatePlan. =7/MHMO, PLANTYPE=5/MHMO. =9/Tricare, PLANTYPE=6/Tricare. =10/MedicarePartD, PLANTYPE=7/MPDP.
PLNAME	If creating a new PLAN, If SOP is Medicaid, set PLAN.PLNAME = "MEDICAID". Else if SOP is Tricare, set PLAN.PLNAME = "TRICARE". Else set PLAN.PLNAME = TSOP.TSOPTTEXT.
PLROPLAN	Create PLRO where PLRO.PLROPLAN = new PLAN.PLANNUM.
PLRORND	PLRO.PLRORND = current round.
COVANYTM	If TSOP.TSOPISHI = 7/MHMO or 10/MedicarePartD, set PLRO.COVANYTM = 1/Yes.

Variable Name	Assignment Instructions
TSOPTYPE	If TSOP.TSOPISHI = 1/Medicaid, 2/PublicPlan, 3/PrivatePlan, 9/Tricare, set TSOP.TSOPTYPE = 3/PlanNotMHMO. Else if TSOP.TSOPISHI = 7/MHMO, set TSOP.TSOPTYPE = 8/MHMO. Else if TSOP.TSOPISHI=10/MedicarePartD, set TSOP.TSOPTYPE =10/MedicarePartD.
TSOPPTYP	Set TSOP.TSOPPTYP = PLAN.PLANTYPE.
TSOPPLAN	Set TSOP.TSOPPLAN = PLAN.PLANNUM.
TSOPDISP	Set TSOP.TSOPDISP based on PLAN.PLANTYPE: = 2/Medicaid, TSOPDISP = "(MCAD)". = 3/PublicPlan, TSOPDISP = "(PUBL)". = 4/PrivatePlan, TSOPDISP = "(PRIV)". = 5/MHMO, TSOPDISP = "(MHMO)". = 6/Tricare, TSOPDISP = "(TRIC)". =7/MPDP, TSOPDISP = "(MPDP)".
PLANDFLG	If restarting Medicaid or Tricare plan, set PLAN.PLANDFLG = empty. In addition, if tblPLAN.wvsDeleteFlag = Yes, update to tblPLAN.wvsDeleteFlag = No.
LOSEPLFG	If restarting Medicaid or Tricare plan, set PLAN.LOSEPLFG = empty.
PLSOPFLG	If creating new PLAN, set PLAN.PLSOPFLG = 1/Yes.

## DESIGN NOTES

BOX CPS27C calls HI section for Medicaid, Tricare, Public Plans, and Private Plans added to SOP roster.

CPS28 and CPS29 collects status of MHMO plan added to SOP roster. CPS29 calls HI section for MHMO plan if "current".

HI returns to CPS at BOX CPS29A.

CPS29A and CPS29B collect the status of MPDP plan added to SOP roster. CPS does not call HI section for MPDP plan details.

**CPS28**

Yes/No

**QUESTION TEXT**

I recorded previously that (CURRENT MEDICARE MANAGED CARE PLAN NAME) was [your/(SP's)] current Medicare Managed Care Plan. Has this information changed?

**FIELD 1: CPMHMOCHNG****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	CPS29 - CPSOPCURR
2	NO	BOX CPS29A
	Don't Know	BOX CPS29A
	Refused	BOX CPS29A

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

<b>Variable Name</b>	<b>Assignment Instructions</b>
COVCURNT	If CPS28 - CPMHMOCHNG = 2/No, DK, RF, set current round PLRO.COVCURNT = 2/No on MHMO PLAN added to SOP roster.

**CPS29**

Yes/No

**QUESTION TEXT**

[Are you/Is (SP)/Was (SP)] (currently) covered or enrolled in (CPS26 SOP MEDICARE MANAGED CARE PLAN NAME) [on (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

**FIELD 1: CPSOPCURR****FIELD 1 ROUTING**

Value	Label	Route
1	YES	HIMC6 - MHMORX
2	NO	BOX CPS29A
	Don't Know	BOX CPS29A
	Refused	BOX CPS29A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
COVCURNT	Set PLRO.COVCURNT on PLRO where PLRO.PLROPLAN = PLAN.PLANNUM of MHMO added at SOP roster and PLRO.PLRORND = current round: If CPS29 - CPSOPCURR = 1/Yes, set PLRO.COVCURNT = 1/Yes. Else set PLRO.COVCURNT = 2/No.

Variable Name	Assignment Instructions
COVCURNT	If CPS28 - CPMHMOCHNG = 1/Yes and CPS29 - CPSOPCURR = 1/Yes, update PLRO.PLROCOVURNT = 2/No on PLRO where PLRO.PLROPLAN = PLAN.PLANNUM of pre-existing current MHMO and PLRO.PLRORND = current round.

**DESIGN NOTES**

Calls HI section for MHMOs if MHMO added is current.

HI returns to CPS at BOX CPS29A.

**CPS29A**

Yes/No

**QUESTION TEXT**

I recorded previously that (CURRENT MEDICARE PRESCRIPTION DRUG PLAN) was [your/(SP's)] current Medicare Prescription Drug Care Plan.

Has this information changed?

**FIELD 1: CPMPDPCHNG****FIELD 1 ROUTING**

Value	Label	Route
1	YES	CPS29B - CPSOPCURR2
2	NO	BOX CPS29A
	Don't Know	BOX CPS29A
	Refused	BOX CPS29A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
COVCURNT	If CPS29A - CPMPDPCHNG = 2/No, DK, RF, set current round PLRO.COVCURNT = 2/No for MPDP PLAN added to SOP roster.

**CPS29B**

Yes/No

**QUESTION TEXT**

[Are you/Is (SP)/Was (SP)] (currently) covered or enrolled in (CPS26 SOP MEDICARE PRESCRIPTION DRUG PLAN) [on (DATE OF DEATH/DATE OF INSTITUTIONALIZATION)]?

**FIELD 1: CPSOPCURR2****FIELD 1 ROUTING**

Value	Label	Route
1	YES	BOX CPS29A
2	NO	BOX CPS29A
	Don't Know	BOX CPS29A
	Refused	BOX CPS29A

**FIELD 1 ATTRIBUTES**

Cheshire Name	Answers Allowed
TEMP	1

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

Variable Name	Assignment Instructions
COVCURNT	Set PLRO.COVCURNT on PLRO where PLRO.PLROPLAN = PLAN.PLANNUM of MPDP added at SOP roster and PLRO.PLRORND = current round: If CPS29B - CPSOPCURR2 = 1/Yes, set PLRO.COVCURNT = 1/Yes. Else set PLRO.COVCURNT = 2/No.

Variable Name	Assignment Instructions
COVCURNT	If CPS29A - CPMPDPCHNG = 1/Yes and CPS29B - CPSOPCURR2 = 1/Yes, update PLRO.PLROCOVURNT = 2/No on PLRO where PLRO.PLROPLAN = PLAN.PLANNUM of pre-existing current MPDP and PLRO.PLRORND = current round.

# BOX CPS29A

## **BOX INSTRUCTIONS**

GO TO CPS27B\_IN - NAVIGATOR.

## **OTHER PROGRAMMING INSTRUCTIONS**

## **DESIGN NOTES**

HI returns to CPS at BOX CPS29A.

# BOX CPS29B

## BOX INSTRUCTIONS

IF AT LEAST ONE SOURCE OF PAYMENT ADDED AT CPS26 IS A DISCOUNT MEMBERSHIP PLAN, GO TO CPS29C - DMEMINTRO\_CPS.

ELSE GO TO BOX CPS29E.

# CPS29C

No Entry

**QUESTION TEXT**

Before we continue, I would like to ask you a few questions about the discount membership plan(s) you just added.

**FIELD 1: DMEMINTRO CPS****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	CONTINUE	CPS29C_IN - NAVIGATOR
	Empty	CPS29C_IN - NAVIGATOR

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

# CPS29C\_IN

Instance Navigator

**FIELD 1: NAVIGATOR****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	ITEM SELECTED IN INSTANCE NAVIGATOR	BOX CPS29C
2	CONTINUE INTERVIEW SELECTED	BOX CPS29D

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
N/A	1

# BOX CPS29C

## BOX INSTRUCTIONS

CREATE A NEW DISCOUNT MEMBERSHIP PLAN FOR THE SOURCE OF PAYMENT  
ADDED AT CPS26

GO TO DM4 - DMSERVIC.

## OTHER PROGRAMMING INSTRUCTIONS

### BACKGROUND VARIABLE ASSIGNMENTS

DM details are collected on DMEM and DMRO:

DMEM key = DMEM.DMEMBASE + DMEM.DMEMNUM

DMEM.DMEMNUM = Number of DM created at BOX ST69C.

DMRO key = DMRO.DMROBASE + DMRO.DMRODMEM + DMRO.DMRORND

DMRO.DMRODMEM = DMEM.DMEMNUM of DM created at BOX CPS29C.

DMRO.DMRORND = current round.

See detailed instructions below.

Variable Name	Assignment Instructions
DMEMNUM	DMEM.DMEMNUM = highest DMEM.DMEMNUM + 01.
DMEMRNDC	DMEM.DMEMRNDC = current round.
DMRODMEM	DMRO.DMRODMEM = DMEM.DMEMNUM.
DMRORND	DMRO.DMRORND = curent round.
DMHAVE	DMRO.DMHAVE = 1/Yes.
DMNAMEX	DMEM.DMNAMEX = TSOP.TSOPTTEXT.
DMSOPFLG	DMEM.DMSOPFLG = 1/Yes.
TSOPTYPE	TSOP.TSOPTYPE = 9/DM.
TSOPDMEM	TSOP.TSOPDMEM = DMEM.DMEMNUM.

**DESIGN NOTES**

Calls DM section for Discount Membership plans added to SOP roster.

DM returns to CPS at BOX CPS29D.

# BOX CPS29D

## **BOX INSTRUCTIONS**

GO TO CPS29C\_IN - NAVIGATOR.

## **OTHER PROGRAMMING INSTRUCTIONS**

## **DESIGN NOTES**

DM returns to CPS at BOX CPS29D.

# BOX CPS29E

## BOX INSTRUCTIONS

IF AN "OTHER SOURCE OF PAYMENT" ADDED AT CPS26, CREATE AN OSOP FOR EACH SOURCE OF PAYMENT ADDED AT CPS26 THAT IS AN "OTHER SOURCE OF PAYMENT"

GO TO BOX CPS29F.

## OTHER PROGRAMMING INSTRUCTIONS

### BACKGROUND VARIABLE ASSIGNMENTS

Other Source of Payment details will be collected on OSOP:

OSOP key = OSOP.OSOPBASE + OSOP.OSOPNUM

OSOP.OSOPNUM = Number of Other Source of Payment generated at BOX CPS29E.

Create OSOP record for each OTHER SOURCE OF PAYMENT added at CPS26.

Set OSOP and TSOP fields as specified below.

Variable Name	Assignment Instructions
OSOPNUM	OSOP.OSOPNUM = highest OSOP.OSOPNUM + 01.
OSOPRNDC	OSOP.OSOPRNDC = current round.
OSOPTTEXT	OSOP.OSOPTTEXT = TSOP.TSOPTTEXT.
OSOPISHI	OSOP.OSOPISHI = TSOP.TSOPISHI
TSOPTYPE	TSOP.TSOPTYPE = 4/OSOP.
TSOPOSOP	TSOP.TSOPOSOP = OSOP.OSOPNUM.
TSOPDISP	TSOP.TSOPDISP = "(OTHER)".

# BOX CPS29F

## BOX INSTRUCTIONS

CREATE REIMBURSEMENTS FOR AMOUNTS ENTERED AT CPS27

GO TO CPS30 - REIMBCOV.

## OTHER PROGRAMMING INSTRUCTIONS

### **BACKGROUND VARIABLE ASSIGNMENTS**

Reimbursement details are stored on REIM:

REIM key = REIM.REIMBASE + REIM.REIMNUM.

REIM.REIMNUM = Unique Number assigned to unique payer linked to this charge bundle.

REIM.REIMCOST = COST.COSTNUM for this charge bundle, not part of REIM key.

REIM records are only created for payers where TSOP.TSOPREIM ^= NULL.

TSOP.TSOPREIM may be >= 0, DK, or RF.

Only one REIM record will be created per unique payer per charge bundle.

We do not field REIM records collected in a previous round.

When backing up, if TSOP.TSOPREIM is updated, update existing REIM.REIMAMT = TSOP.TSOPREIM.

Else create new REIM record.

### DETAILS:

For each payer where TSOP.TSOPREIM >=0, DK, or RF:

If there is a REIM where REIM.REIMCOST = this charge bundle COST.COSTNUM and

((TSOP.TSOPTYPE = 1/SPFamily and REIM.REIMTYPE = 1/SPFamily) or

(TSOP.TSOPTYPE = 2/ProvDiscount and REIM.REIMTYPE = 2/ProvDiscount) or

(TSOP.TSOPTYPE = 5/VA and REIM.REIMTYPE = 5/VA) or

(TSOP.TSOPTYPE = 6/Medicare and REIM.REIMTYPE = 6/Medicare) or

(TSOP.TSOPTYPE = 7/OtherMilitaryPlanNotVA and REIM.REIMTYPE =

7/OtherMilitaryPlanNotVA) or

(TSOP.TSOPTYPE = 11/MedicareSubsidy and REIM.REIMTYPE = 11/MedicareSubsidy) or

(TSOP.TSOPTYPE = 12/ExtraHelp and REIM.REIMTYPE = 12/ExtraHelp) or

((TSOP.TSOPTYPE = 4/OSOP and REIM.REIMTYPE = 4/OSOP) and (TSOP.TSOPOSOP = REIM.REIMOSOP)) or

((TSOP.TSOPTYPE = 9/DM and REIM.REIMTYPE = 9/DM) and (TSOP.TSOPDMEM = REIM.REIMDMEM)) or  
 ((TSOP.TSOPTYPE = 3/PlanNotMHMO and REIM.REIMTYPE = 3/PlanNotMHMO) and (TSOP.TSOPPLAN = REIM.REIMPLAN)) or  
 ((TSOP.TSOPTYPE = 8/MHMO and REIM.REIMTYPE = 8/MHMO) and (TSOP.TSOPPLAN = REIM.REIMPLAN)) or  
 ((TSOP.TSOPTYPE = 10/MedicarePartD and REIM.REIMTYPE = 10/MedicarePartD) and (TSOP.TSOPPLAN = REIM.REIMPLAN))), then do:  
 This REIM record is linked to the current round charge bundle for this payer.  
 Update REIM.REIMAMT = TSOP.TSOPREIM.

Else do;

Create a new current round REIM record for this payer.  
 Set REIM.REIMAMT = TSOP.TSOPREIM.  
 Set additional fields on REIM as specified below.

#### CREATING A NEW REIM RECORD:

BASE.LASTREIM holds the highest REIM.REIMNUM prior to fielding cases. Not all records are fielded. The first time a REIM record is generated in the field, BASE.LASTREIM should be  $\geq$  to the highest REIM.REIMNUM fielded. The new REIM.REIMNUM should be calculated based on  $\text{BASE.LASTREIM} + 001$ . Each time a REIM record is generated in the field, BASE.LASTREIM will be updated to match the highest REIM.REIMNUM in the field. Therefore, each time a REIM record is generated in the field, the new REIM.REIMNUM should be calculated based on  $\text{BASE.LASTREIM} + 001$ . See detailed instructions below.

Variable Name	Assignment Instructions
LASTREIM	If creating a new REIM record, set BASE.LASTREIM to the new REIM.REIMNUM.
REIMNUM	If creating a new REIM record, set new REIM.REIMNUM = $\text{BASE.LASTREIM} + 001$ . This assumes that BASE.LASTREIM is incremented each time a REIM record is generated in the field.
REIMRND	If creating a new REIM record, REIM.REIMRND = current round.
REIMTYPE	If creating a new REIM record, REIM.REIMTYPE = TSOP.TSOPTYPE.
REIMPLAN	If creating a new REIM record, if TSOP.TSOPTYPE = 3/PlanNotMHMO, 6/Medicare, 8/MHMO, or 10/MedicarePartD, set REIM.REIMPLAN = TSOP.TSOPPLAN.

Variable Name	Assignment Instructions
REIMOSOP	If creating a new REIM record, if TSOP.TSOPTYPE = 4/OSOP, set REIM.REIMOSOP = TSOP.TSOPOSOP.
REIMAMT	REIM.REIMAMT = TSOP.TSOPREIM.
REIMDMEM	If creating a new REIM record, if TSOP.TSOPTYPE = 9/DM, set REIM.REIMDMEM = TSOP.TSOPDMEM.
REIMCOST	If creating a new REIM record, REIM.REIMCOST = COST.COSTNUM.

**CPS30**

Yes/No

**QUESTION TEXT**

DOES THIS REIMBURSEMENT AMOUNT COVER ANY OTHER EVENTS BESIDES THOSE SHOWN ABOVE?

**FIELD 1: REIMBCOV****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	YES	CPS31 - REIMCODE
2	NO	BOX CPS32
	Don't Know	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
CORO.REIMBCOV	1

**CPS31**

Code 1

**QUESTION TEXT**

WHAT OTHER TYPE(S) OF EVENT(S) ARE COVERD BY THIS REIMBURSEMENT?

CHECK ALL THAT APPLY.

**FIELD 1: REIMCODE****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	SEPARATELY BILLING LAB (SL)	CPS32 - REIMCOMMENT
2	SEPARATELY BILLING DOCTOR (SD)	CPS32 - REIMCOMMENT
3	DENTAL (DU)	CPS32 - REIMCOMMENT
4	HOSPITAL EMERGENCY ROOM (ER)	CPS32 - REIMCOMMENT
5	HOSPITAL INPATIENT STAY (IP)	CPS32 - REIMCOMMENT
6	HOSPITAL OUTPATIENT VISIT (OP)	CPS32 - REIMCOMMENT
7	INSTITUTIONAL STAY (IU)	CPS32 - REIMCOMMENT
8	HOME HEALTH PROFESSIONAL (HP)	CPS32 - REIMCOMMENT
9	OTHER HOME HEALTH (HF)	CPS32 - REIMCOMMENT
10	OTHER VISITS TO MEDICAL PROVIDERS (MP)	CPS32 - REIMCOMMENT
11	OTHER MEDICAL EXPENSES (OM)	CPS32 - REIMCOMMENT
12	PRESCRIBED MEDICINES (PM)	CPS32 - REIMCOMMENT
	Don't Know	CPS32 - REIMCOMMENT

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
NONE  REPLACES THE FOLLOWING CHESHIRE VARIABLES: 1=REIM.REIMSBL 2=REIM.REIMSBD 3=REIM.REIMDU 4=REIM.REIMER 5=REIM.REIMIP 6=REIM.REIMOP 7=REIM.REIMIU 8=REIM.REIMHHP 9=REIM.REIMOH 10=REIM.REIMMP 11=REIM.REIMOM 12=REIM.REIMPM	12

**OTHER PROGRAMMING INSTRUCTIONS****BACKGROUND VARIABLE ASSIGNMENTS**

If more than one REIMBURSEMENT was entered at CPS27, the response to CPS31 - REIMCODE should be copied to REIMCODE for each REIM generated. See instructions below.

<b>Variable Name</b>	<b>Assignment Instructions</b>
REIMCODE	Set REIM.REIMCODE = CPS31 - REIMCODE for all REIMs generated at CPS27.

**CPS32**

No Entry

**QUESTION TEXT**

PLEASE ENTER A COMMENT TO RECORD ANYTHING ELSE YOU KNOW ABOUT THIS REFUND (PROVIDER(S), DATE(S), ETC.)

**FIELD 1: REIMCOMMENT****FIELD 1 ROUTING**

<b>Value</b>	<b>Label</b>	<b>Route</b>
1	CONTINUE	BOX CPS32
	Empty	BOX CPS32

**FIELD 1 ATTRIBUTES**

<b>Cheshire Name</b>	<b>Answers Allowed</b>
TEMP	1

# BOX CPS32

## BOX INSTRUCTIONS

GO TO BOX CPSBEG.

# BOX CPSEND

## BOX INSTRUCTIONS

GO TO NEXT SECTION.