Harmonization of Cross-National Studies of Aging to the Health and Retirement Study

User Guide: Health Care Utilization and Expenditure

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USER GUIDE

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Introduction

The Health and Retirement Study (HRS) has achieved remarkable scientific success, as demonstrated by an impressive number of users, research studies and publications. Its success has generated substantial interest in collecting similar data around the world in view of global population aging. The result has been a number of surveys designed to be comparable with the HRS: the English Longitudinal Study of Ageing (ELSA), the Survey of Health, Ageing, and Retirement in Europe (SHARE), the Korean Longitudinal Study of Aging (KLoSA), the Longitudinal Aging Study in India (LASI), the China Health and Retirement Longitudinal Study (CHARLS), the Japanese Study on Aging and Retirement (JSTAR), The Irish Longitudinal Study on Ageing (TILDA), the Indonesia Family Life Survey (IFLS), and the Mexican Health and Ageing Study (MHAS).

Since these surveys have harmonization as a goal, they provide remarkable opportunities for cross country studies. The value of comparative analyses, especially regarding lessons resulting from policies adopted in different contexts, is widely recognized. Yet, there is only a limited number of empirical studies exploiting such opportunities. This is partly due to the difficulties associated with using multiple surveys and learning the policies and institutions of different countries.

Identifying comparable questions across surveys is the first step toward cross-country analyses. The GATEWAY TO GLOBAL AGING DATA web site (https://g2aging.org/) provides users a digital library of questions for all the aforementioned surveys. Its search engines enable users to examine cross-country concordance for each survey question. Using them, researchers can identify all questions related to particular key words or within a domain or a sub-domain.

Nevertheless, comparing these questions and evaluating comparability across surveys is still a labor-intensive process. Understanding all the idiosyncratic details in each survey takes still more effort. To reduce time and effort needed for cross-country research, we have prepared a series of domain-specific user guides. These guides are designed to provide researchers with documentation about the concepts, measures, and questions of particular domains in all HRS-family surveys. For each domain, we reviewed all relevant questions across all surveys. These guides expand upon the information found in codebooks, questionnaires, and data descriptions. They also evaluate comparability across surveys and indicate harmonized measures that can be exploited for cross-country analyses. We hope these guides accelerate scientific advances, by helping researchers save time and better understand what can be studied in HRS-family surveys.
This healthcare utilization and expenditure user guide focuses on healthcare utilization and expenditure by the individual such as hospital stay, nursing home stay, doctor visit, oriental doctor visit, home healthcare, and other type of healthcare.
Executive Summary and Overview

This guide summarizes data on household health care utilization and expenditure from Health and Retirement Study (HRS) and its sister surveys. Specifically, we consider the Health and Retirement Study (HRS, 2001 wave 1 ~ 2013 wave 7), the Mexican Health and Aging Survey (MHAS, 2001 wave 1 ~ 2003 wave 2), the English Longitudinal Study of Ageing (ELSA, 2002 wave 1~ 2010 wave 5), the Survey of Health, Ageing, and Retirement in Europe (SHARE, 2005 wave 1 and 2006 wave 2), the Korean Longitudinal Study of Aging (KLoSA, 2008 wave 2~ 2012 wave 4), the Indonesia Family Life Survey (IFLS, 2007 wave 4), the Japanese Study of Aging and Retirement (JSTAR, 2007 wave 1 ~ 2011 wave 3), the Irish Longitudinal Study on Aging (TILDA), and the China Health and Retirement Longitudinal Survey (CHARLS, 2010 wave 1 and 2011 wave 2).

ELSA asks only about personal care, home help, meals on wheels, and preventive action. Since ELSA asks health care for the specific illness, so the general health care utilization is not shown. All other surveys collect some information on health care utilization and expenditure regardless of the ill type, but vary in the spectrum and details of questions asked. We group the health care utilization and expenditure into fifteen categories: hospital stay, nursing home stay, doctor visit, oriental doctor visit, home health care, person care/home help/ and meals on wheels, private provider care, preventive action, regular prescription medication, outpatient surgery, dental care, satisfaction and less utilization, travel time and cost, any other cost, and help from others.

We assess similarities and differences across the aforementioned surveys.

- All surveys except ELSA elicit hospital stay utilization and expenditure.
- Only HRS, SHARE, JSTAR, and TILDA ask about nursing home utilization and expenditure.
- All surveys except ELSA elicit doctor visit utilization and expenditure.
- Only KLoSA, JSTAR, IFLS, and MHAS ask about traditional health care utilization and expenditure.
- All survey except ELSA, TILDA, and MHAS elicit home health care utilization and expenditure.
- All survey except IFLS and MHAS elicit personal care, home help, and meals on wheels utilization and expenditure.
- All surveys except SHARE and MHAS elicit preventive action utilization and expenditure.
- Only HRS and KLoSA ask about regular prescription medication utilization and expenditure.
- Only HRS, SHARE, JSTAR, TILDA, and MHAS ask about outpatient surgery utilization and expenditure.
• All surveys except ELSA elicit dental care utilization and expenditure.
• Only HRS, CHARLS, JSTAR, IFLS, and MHAS ask about the satisfaction or less health care utilization.
• Only CHARLS, JSTAR, and IFLS ask about the travel time and cost to the health care facility.
• Only HRS, KLoSA, and TILDA ask about any other out of pocket cost.
• Only HRS, KLoSA, CHARLS, and MHAS about any help for the payment from others.

There exist noticeable variations in measurement and/or structure of the questions.

• The frequency of health utilization and expenditure is askes based on various time period (past year, past 2 years, last 4 weeks, the last visit). For example, HRS and KLoSA [W2-W4] ask the respondents for their hospitalization in the past 2 years while SHARE, KLoSA [W1], CHARLS, JSTAR, TILDA, IFLS, and MHAS refer the past year.
• The payment time unit can be different. For example, KLoSA, CHARLS, and IFLS ask the cost for the last hospitalization in their reference period whereas other surveys ask the cost for the total hospitalization in their reference period.
• The contents of the questions in each section may be different. For example, in the doctor visit module, JSTAR includes the acupuncture, moxibustion, or bonesetting treatment at a clinic while other surveys do not include these kinds of treatment in the doctor visit module.
• It should be noted that monetary amounts are expressed in nominal country-specific currencies.

As far as comparisons across surveys are concerned:

• In doctor visit module, CHARLS and IFLS asks not only the visit to doctor’s office but also the visit by the doctor in one question while other surveys asks only the visit to doctor’s office in the doctor visit module and ask separate question in the home visit module.
• In traditional health care utilization, KLoSA, JSTAR, IFLS, and MHAS have different explanation for the traditional health care.
• In the module of personal care, home help, and meals on wheels, HRS, ELSA, and CHARLS ask questions for each activity while SHARE, KLoSA, JSTAR, and TILDA ask aggregated question for the help.
• In the preventive action module, while KLoSA, CHARLS, JSTAR, and IFLS ask overall medical checkup, HRS, ELSA, and TILDA ask separate questions for each type of the medical test.
1. Inventory of Health Care Utilization and Expenditure Measures

This guide provides an overview of healthcare utilization and expenditure measures across several aging surveys. These measures include hospital stay, nursing home stay, doctor visit and outpatient care, outpatient surgery, home health care, personal care, domestic help, meals on wheels, private provider healthcare, preventive care, alternative/traditional medicine care, regular prescription medication, dental care, satisfaction and adherence to treatment, travel and other costs, and financial help from others. The surveys considered in this guide are the Health and Retirement Study (HRS 2001 wave 1 ~ 2013 wave 10), Mexican Health and Aging Survey (MHAS, 2001 wave 1 ~ 2003 wave 2), English Longitudinal Study of Ageing (ELSA, 2002 wave 1~ 2010 wave 5), Survey of Health, Ageing, and Retirement in Europe (SHARE, 2005 wave 1 and 2006 wave 2), Korean Longitudinal Study of Aging (KLoSA, w1, 2008 wave 2~ 2012 wave 4), Indonesia Family Life Survey (IFLS, 2007 wave 4), Japanese Study of Aging and Retirement (JSTAR, 2007 wave 1 ~ 2011 wave 3), The Irish Longitudinal Study on Aging (TILDA), and China Health and Retirement Longitudinal Survey (CHARLS, 2010 wave 1 and 2011 wave 2).

In the first chapter, we give an overview of the questions asked by each survey to elicit healthcare utilization and expenditure. In the second chapter, we examine how the questions are constructed and the specific concepts they intend to measure. Based on this analysis, we indicate the extent to which comparable healthcare utilization and expenditure measures can be obtained across surveys. In the last chapter, we provide the complete list of healthcare utilization and expenditure questions for each survey.
1.1 HRS

The HRS questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then about the corresponding frequency of utilization and expenditure.

1.1.1 Hospital Stay

HRS elicits hospital stay utilization and expenditure in the past two years. Respondents are first asked whether they have been a patient in a hospital in the past two years. Then, they are asked to report the frequency of overnight hospital stay and the total number of nights spent in the hospital in the past two years. Respondents are also asked about whether the cost of hospital stay was covered by their insurance and how much they paid out-of-pocket.

1.1.2 Nursing Home Stay

HRS elicits nursing home utilization and expenditure in the past two years. Respondents are first asked whether they have been a patient in a nursing home, convalescent home, or other long-term health care facility in the past two years. Then, they are asked to report the frequency of overnight stay and the total number of nights spent in these facilities in the past two years. Respondents are also asked about whether the cost of using these facilities was covered by their insurance and how much they paid out-of-pocket.

1.1.3 Doctor Visit and Outpatient care

HRS elicits doctor visit utilization and expenditure in the past two years. Respondents are first asked whether they saw a medical doctor in the past two years and then to report the frequency with which they did so in the past two years. Respondents are also asked about whether the cost of doctor visits was covered by their insurance and how much they paid out-of-pocket.

1.1.4 Alternative Medicine Care

N.A.
1.1.5 Home Health Care

HRS elicits home health care utilization and expenditure in the past two years. Respondents are asked whether they had a home visit by a medically-trained person in the past two years. They are also asked about whether home health care costs were covered by their insurance and how much they paid out-of-pocket.

1.1.6 Personal Care, Home Help, and Meals on Wheels

HRS elicits personal care utilization and expenditure. Respondents are first asked whether they received help by others for dressing, getting across a room, bathing, eating, getting out of bed, or using the toilet (excluding difficulties that lasted less than three months). Then, they are asked the frequency with which they received help in the last month. Respondents are also asked about how much they paid for these services.

1.1.8 Preventive Care

HRS elicits preventive care in the past two years. Respondents are asked whether they have received medical test or procedures such as flu shot, a blood test for cholesterol, monthly breasts check for lumps, mammogram or X-ray of breast, a Pap smear, or examination of prostate in the past two years. They are not asked to report how much they paid for these tests and procedures.

1.1.9 Regular Prescription Medication

HRS elicits current, regular prescription medication and expenditure. Respondents are first asked whether they regularly take prescription medication. Then, they are asked whether the cost of prescription medications is covered by their insurance and how much they have paid out-of-pocket each month in the past two years.

1.1.10 Outpatient Surgery

HRS elicits outpatient surgery utilization and expenditure in the past two years. Respondents are first asked whether they had outpatient surgery in the past two years. Then, they are asked about
whether the cost of outpatient surgery was covered by their insurance and how much they paid out-of-pocket.

1.1.11 Dental Care

HRS elicits dental care utilization and expenditure in the past two years. Respondents are first asked whether they saw a dentist in the past two years. Then, they are asked about whether the cost of dental care was covered by their insurance and how much they paid out-of-pocket.

1.1.12 Satisfaction and Treatment Adherence

HRS respondents are asked whether they are satisfied with their health care services. They are also asked about whether they have taken less medication than was prescribed because of costs.

1.1.13 Travel and other Costs

HRS elicits any other medical expenditure such as medications, special food, equipment like a special bed or chair, visits by health professionals and other costs in the past two years. Respondents are asked whether they incurred any other medical expenditures in the past two years and how much they paid out-of-pocket.

1.1.14 Help from Others

HRS respondents are asked whether they received help from others for health care costs in the past two years and who helped to pay such costs.
1.2 ELSA

The ELSA questionnaire asks only about personal care, home help, meals on wheels, and preventive care.

1.2.1 Hospital Stay

N.A.

1.2.2 Nursing Home Stay

N.A.

1.2.3 Doctor Visit and Outpatient Care

N.A.

1.2.4 Alternative Medicine Care

N.A.

1.2.5 Home Health Care

N.A.

1.2.6 Personal Care, Home Help, and Meals on Wheels

ELSA respondents are first asked whether they received help from others for dressing, walking across a room, bathing or showering, eating, getting in or out of bed, using the toilet, using a map, recognizing when you are in physical danger, preparing a hot meal, shopping, making calls, communicating, taking medication, doing work around the house or garden, or managing money. Then, they are asked the frequency with which they received help in the last month. Respondents are also asked about whether they ever used meals on wheels.
1.2.8 Preventive Care

ELSA elicits information about preventive care. Respondents are asked whether they measured their blood pressure in the past year. They are also asked whether they ever used a home testing kit for screening bowel cancer, and whether they ever underwent a mammogram or a prostate-specific antigen blood test. Respondents are not asked to report how much they paid for these preventive tests or procedures.

1.2.9 Regular Prescription Medication

N.A.

1.2.10 Outpatient Surgery

N.A.

1.2.11 Dental Care

N.A.

1.2.12 Satisfaction and Treatment Adherence

N.A.

1.2.13 Travel and Other Costs

N.A.

1.2.14 Help from Others

N.A.
1.3 SHARE

The SHARE questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then about the corresponding frequency of utilization and expenditure. SHARE also asks respondents whether they received any type of medical care from private providers as an alternative to the National Health System in the last twelve months.

1.3.1 Hospital Stay

SHARE elicits hospital stay utilization and expenditure in the last twelve months. Respondents are first asked whether they have been a patient in a hospital in the last twelve months. Then, they are asked to report the frequency of overnight hospital stay and the total number of nights spent in a hospital in the last twelve months. Respondents are also asked about whether the cost of hospital stay was covered by their insurance and how much they paid out-of-pocket.

1.3.2 Nursing Home Stay

SHARE elicits nursing home stay utilization and expenditure in the last twelve months. Respondents are first asked whether they have been a patient in a nursing home in the last twelve months. Then, they are asked to report the frequency of nursing home stay and the total number of weeks they spent in a nursing home the last twelve months. Respondents are also asked about whether the cost of nursing home stay is covered by their insurance. The SHARE questionnaire elicits the total out-of-pocket cost of nursing homes, day-care centers, and home care services in the last twelve months.

1.3.3 Doctor Visit and Outpatient Care

SHARE elicits doctor visit utilization and expenditure in the last twelve months. Respondents are first asked whether they saw a medical doctor in the last twelve months. Then, they are asked to report the frequency with which they did so in the last twelve months. Respondents are also asked about whether the cost of doctor visits was covered by their insurance and how much they paid for out-of-pocket.
1.3.4 Alternative Medicine Care

N.A.

1.3.5 Home Health Care

SHARE elicits home health care utilization and expenditure in the last twelve months. Respondents are asked whether they had professional or paid nursing care in their own home and how many weeks and hours they received these home care services in the last twelve months. The SHARE questionnaire elicits the total out-of-pocket cost of nursing homes, day-care centers, and home care services in the last twelve months.

1.3.6 Personal Care, Home Help, and Meals on Wheels

SHARE respondents are asked whether they received professional or paid help for domestic tasks at home and how many weeks and hours they received such services in the last twelve months. Respondents are asked whether they received meals on wheels in the last twelve months and for how many weeks. The SHARE questionnaire elicits the total out-of-pocket cost of nursing homes, day-care centers, and home care services in the last twelve months.

1.3.8 Preventive Care

N.A.

1.3.9 Regular Prescription Medication

N.A.

1.3.10 Outpatient Surgery

SHARE respondents are asked whether they had outpatient surgery in the last twelve months.

1.3.11 Dental Care

SHARE respondents are asked whether they saw a dentist or a dental hygienist in the last twelve months.
1.3.12 Satisfaction and Treatment Adherence

N.A.

1.3.13 Travel and other Costs

N.A.

1.3.14 Help from Others

N.A.
1.4 KLoSA

The KLoSA questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then about the corresponding frequency of utilization and expenditure. KLoSA elicits detailed expenditure information such as how much was of medical costs was paid by the insurance, the respondent paid, and relatives. The reference time varies across waves. In wave 1, the reference time is the last year, while in the waves 2-4 is the time since the previous interview.

1.4.1 Hospital Stay

KLoSA elicits hospital stay utilization and expenditure in the past year, for wave 1, and since the time of the previous interview, for waves 2-4. Respondents are asked to report the frequency of their overnight hospital stay and the total number of nights they spent in the hospital. They are also asked about the total cost of hospitalization, how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.2 Nursing Home Stay

N.A.

1.4.3 Doctor Visit and Outpatient Care

KLoSA elicits doctor visit and outpatient care utilization and expenditure in the past year, for wave 1, and since the time of the previous interview, for waves 2-4. Respondents are asked whether they visited a doctor’s office, including emergency room and hospital outpatient office, and to report the frequency with which they did so. They are also asked about the total cost of visiting a doctor’s or outpatient office and how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.4 Alternative Medicine Care

KLoSA elicits information about alternative medicine care in the past year, for wave 1, and since the time of the previous interview, for waves 2-4. Respondents are asked whether they visited an oriental clinic and the frequency with which they did so. They are also asked about the total cost
of visiting an oriental clinic and how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.5 Home Health Care

KLoSA elicits home health care utilization and expenditure in the past year, for wave 1, and since the time of the previous interview for waves 2-4. Respondents are asked how many times they had a home visit by any doctors, nurses, or other medically trained person. They are also asked about the total cost of home health care services and how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.6 Personal Care, Home Help, and Meals on Wheels

KLoSA elicits personal care utilization and expenditure. Respondents are asked who most often helps them with dressing, washing, bathing, eating, getting out of bed, using toilet, controlling urination and defecation, grooming, doing the chores, preparing hot meals, doing laundry, going out, using transportations, shopping, managing money, making phone calls, or taking medications. Then, they are asked to report the days and hours per day they received help in the last month. Respondents are also asked about how much they paid for these services.

1.4.8 Preventive Care

KLoSA elicits information about preventive care in the past two years. Respondents are asked whether they received a basic or any other medical checkup in the past two years. They are not asked to report how much they paid for these preventive tests or procedures.

1.4.9 Regular Prescription Medication

KLoSA elicits regular prescription medication utilization and expenditure in the past year, for wave 1, and since the time of the previous interview, for waves 2-4. Respondents are asked whether they have regularly taken prescription medications. They are also asked to report the total of their regular prescription medications and how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).
1.4.10 Outpatient Surgery

N.A.

1.4.11 Dental Care

KLoSA elicits dental care utilization and expenditure in the past year, for wave 1, and since the time of the previous interview for waves 2-4. Respondents are asked to report the frequency of receiving dental care. They are also asked about the total cost of dental care and how much of it was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.12 Satisfaction and Treatment Adherence

N.A.

1.4.13 Travel and other Costs

KLoSA elicits any other medical expenditure such as hearing aids or wheelchairs in the past year, for wave 1, and since the time of the previous interview, for waves 2-4. Respondents are asked whether they incurred other medical expenditures and how much of the total cost was covered by the insurance, paid out-of-pocket, or paid by relatives (the amount paid by relatives is not elicited in wave 1).

1.4.14 Help from Others

KLoSA respondents are asked to report who paid for health insurance premium. In waves 2-4, the KLoSA questionnaire asks about any contribution from relatives different types of medical expenditures.
1.5 CHARLS

The CHARLS questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them, and then about the corresponding frequency of utilization and expenditure.

1.5.1 Hospital Stay

CHARLS elicits hospital stay utilization and expenditure in the past year. Respondents are first asked whether they received inpatient care in the past year and then to report the frequency of overnight hospital stay and the total number of night spent in the hospital. Respondents are also asked to report the total cost of hospitalization, whether the insurance covered such cost and how much they paid out-of-pocket.

1.5.2 Nursing Home Stay

N.A.

1.5.3 Doctor Visit and Outpatient Care

CHARLS elicits doctor visit and inpatient/outpatient care utilization and expenditure in the last month. Respondents are first asked whether they visited a public hospital, private hospital, public health center, clinic, or health worker’s or doctor’s practice, or whether they were visited by a health worker or doctor for outpatient care in the last month. Then, they are asked to report the frequency with which they were seen by a doctor in the last month. Respondents are also asked to report the total cost of doctor visits, whether the insurance covered such cost and how much they paid out-of-pocket.

1.5.4 Alternative Medicine Care

N.A.

1.5.5 Home Health Care

CHARLS elicits inpatient and outpatient care utilization and expenditure in the last month. Respondents are first asked whether they visited a public hospital, private hospital, public health
center, clinic, or health worker’s or doctor’s practice, or whether they were visited by a health
worker or doctor for outpatient care in the last month. Then, they are asked to report the
frequency with which they were seen by a doctor in the last month. Respondents are also asked
to report the total cost of doctor visits, whether the insurance covered such cost and how much
they paid out-of-pocket.

1.5.6 Personal Care, Home Help, and Meals on Wheels

CHARLS elicits personal care utilization and expenditure. Respondents are first asked whether
they received help by others for dressing, bathing, eating, getting out of bed, using the toilet,
doing household chores, preparing hot meals, shopping groceries, or managing money. Then, they
are asked to report the how many days and hours per days they received help in the past month.
Respondents are also asked about how much they paid for these services.

1.5.8 Preventive Care

CHARLS respondents are asked when they took the last physical examination.

1.5.9 Regular Prescription Medication

N.A.

1.5.10 Outpatient Surgery

N.A.

1.5.11 Dental Care

CHARLS elicits information about dental care utilization and expenditure in the past year.
Respondents are asked whether they saw a dentist in the past year. They are also asked to report
the total cost of dental care, whether the insurance covered such cost and how much they paid
out-of-pocket.
1.5.12 Satisfaction and Treatment Adherence

CHARLS respondents are asked whether, in the past year, they did not get hospitalized even if a doctor suggested it and the reason for that. They are also asked whether they left the hospital before they were recovered and reason for leaving early.

1.5.13 Travel and Other Costs

CHARLS elicits travel time and travel cost for the most recent outpatient care and inpatient care services. Respondents are asked to report what the travel time (one-way) to the facility was and what the total transportation cost was (one-way).

1.5.14 Help from Others

CHARLS elicits whether respondents received help from others for health care expenditures. Respondents are also asked to report who paid the health insurance premium.
1.6 JSTAR

The JSTAR questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then to report the corresponding frequency of utilization and expenditure. Health care related questions can be found in the waves 2-3 (for cities) questionnaire as well as in general questionnaire. There are slight differences between these questionnaires.

1.6.1 Hospital Stay

JSTAR elicits hospital stay utilization and expenditure in the past year. Respondents are first asked whether they were a patient in a hospital in the past year. Then, they are asked to report the frequency of overnight hospital stay and the total number of nights spent in the hospital. Respondents are also asked about whether the insurance covered the cost of hospitalization and how much they paid out-of-pocket.

1.6.2 Nursing Home Stay

JSTAR elicits nursing home stay utilization and expenditure in the past year. Respondents are first asked whether they received nursing care at a facility in the past year. Then, they are asked to report the total number of days/weeks/months they were in a nursing home. Respondents are also asked about whether the insurance covered the cost of nursing home stay and how much they paid out-of-pocket.

1.6.3 Doctor Visit and Outpatient Care

The JSTAR questionnaire uses one question to elicit doctor visit and alternative/traditional medicine doctor visit utilization and expenditure in the past year. Respondents are first asked whether they visited a doctor, acupuncturist, or bonesetter. Then, they are asked to report the frequency of such visits. Respondents are also asked about whether the insurance covered the cost of doctor visits and how much they paid out-of-pocket.
1.6.4 Alternative Medicine Care

The JSTAR questionnaire uses one question to elicit doctor visit and alternative/traditional medicine doctor visit utilization and expenditure in the past year. Respondents are first asked whether they visited a doctor, acupuncturist, or bonesetter. Then, they are asked to report the frequency of such visits. Respondents are also asked about whether the insurance covered the cost of doctor visits and how much they paid out-of-pocket.

1.6.5 Home Health Care

JSTAR elicits home health care utilization and expenditure in the past year. Respondents are first asked whether they received assistance or nursing care service at home in the past year. Then, they are asked to report the number of times per month or the number of days they received these services.

1.6.6 Personal Care, Home Help, and Meals on Wheels

JSTAR elicits personal care, and non-personal care help in the past 12 months. Respondents are first asked whether they received, personal care, such as help with changing clothes, bathing, eating, and going to the bathroom, and non-personal care, such as household tasks, cooking, doing laundry, changing light bulbs, moving furniture, shopping, and attending the garden in the last 12 months. Then, they are asked how often they received these types of help.

1.6.8 Preventive Care

JSTAR elicits information about preventive care in the past 12 months. Respondents are asked whether they received any physical examination in the past 12 months. They are not asked to report how much they paid for such physical examination.

1.6.9 Regular Prescription Medication

N.A.
1.6.10 Outpatient Surgery

JSTAR uses one question to elicit whether respondents had outpatient surgery or examinations in the last year.

1.6.11 Dental Care

JSTAR elicits information about dental care utilization and expenditure in the last year. Respondents are first asked whether they saw a dentist in the last year. Then, they are asked to report whether the insurance covered the cost of dental care and how much they paid out-of-pocket.

1.6.12 Satisfaction and Treatment Adherence

JSTAR respondents are asked whether they or their family members postponed doctor visits during the past 12 months despite being in need of treatment and the reason of that.

1.6.13 Travel and other Costs

JSATR respondents are asked about what the travel time (one-way) to the most frequently visited outpatient care facility was and what the total transportation cost was (round-way).

1.6.14 Help from Others

N.A.
1.7 TILDA

The TILDA questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then to report the corresponding frequency of utilization and expenditure.

1.7.1 Hospital Stay

TILDA elicits hospital stay utilization in the last 12 months. Respondents are asked the frequency of being overnight hospital stay and the total number of nights spent in a hospital in the last 12 months. They are also asked how much they paid out-of-pocket for their hospitalization.

1.7.2 Nursing Home Stay

TILDA elicits nursing home stay utilization and expenditure in the last 12 months. Respondents are asked to report the number of weeks of being a nursing or convalescent home resident in the last 12 months. They are also asked how they paid for nursing/convalescent home care and how much they paid.

1.7.3 Doctor Visit and Outpatient Care

TILDA elicits doctor visit and outpatient care utilization in the last 12 months. Respondents are asked the frequency with which they saw a doctor in the last 12 months and how much they paid for doctor visits.

1.7.4 Alternative Medicine Care

N.A.

1.7.5 Home Health Care

N.A.
1.7.6 Personal Care, Home Help, and Meals on Wheels

TILDA elicits home help, personal care, and meals on wheels utilization. Respondents are first asked whether they received home help, such as cleaning and cooking, personal care, such as bathing, showering, and bodily care, or meals on wheels in the last 12 months. Then, they are asked to report the number of days and hours per day of receiving these types of help in the last month. Respondents are also asked about how much they paid for home help, personal care, and meals on wheels in the last month.

1.7.8 Preventive Care

TILDA elicits information about lifetime preventive care. Respondents are asked whether they ever received medical tests or procedures such as flu shot, a blood test for cholesterol, regular breasts check for lumps, a mammogram or x-ray of the breast, an examination of prostate, or a PSA blood test to screen for cancer. They are not asked to report how much they paid for these medical tests or procedures.

1.7.9 Regular Prescription Medication

N.A.

1.7.10 Outpatient Surgery

TILDA respondents are asked to report the frequency of outpatient surgery in the last 12 months.

1.7.11 Dental Care

N.A.

1.7.12 Satisfaction and Treatment Adherence

N.A.
1.7.13 Travel and Other Costs

TILDA respondents are asked to report how much they paid out-of-pocket for other medical expenditures in the last 12 months.

1.7.14 Help from Others

N.A.
1.8 IFLS

The IFLS questionnaire asks respondents to on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then to report the corresponding frequency of utilization and expenditure. Similar to SHARE, IFLS also asks for information on care by private providers. However, the information collected by these two studies is different in two ways and not completely comparable. First, the IFLS refers to private provider care as “Private Physician (General Practitioner, Specialist, Dentist, Family Doctor)”, while SHARE defines private provider care using the words “types of care from private providers that you paid yourself or through a private insurance.” Second, IFLS elicits private provider health care utilization and expenditure in the past 4 weeks, while SHARE asks for this type of medical care in the last twelve months. If IFLS respondents report that they visited or were visited by a Private Physician during the last 4 weeks, then they are asked to report the frequency with which they saw a private physician during the last 4 weeks and how much they paid out-of-pocket for it.

1.8.1 Hospital Stay

IFLS elicits hospital stay utilization and expenditure in the past 12 months. Respondents are first asked whether they received inpatient care a hospital, puskesmas, clinic, or other in the past 12 months. Then, they are asked to report the frequency of receiving inpatient care and the total number of nights they received inpatient care for the last visit in the past 12 months. Respondents are also asked about whether the insurance covered the cost of inpatient care and how much they paid out-of-pocket for each for each facility they visited in the past 12 months, separately.

1.8.2 Nursing Home Stay

N.A.
1.8.3 Doctor Visit and Outpatient Care

IFLS elicits information about doctor visit and alternative/traditional medicine care utilization and expenditure in the past 4 weeks. Respondents are first asked whether they received outpatient care at a public hospital, public health center, private hospital, polyclinic, private clinic, medical center, private physician, nurse, paramedic, midwife practitioner, traditional practitioner, or posyandu lansia during the last 4 weeks. Outpatient care includes both cases when the respondent visited a certain facility and when he/she was visited by medical personnel. Then, respondents are asked to report the frequency with which they received outpatient care and how much they paid out-of-pocket at each facility. Respondents are also asked about whether the insurance covered the cost of the most recent outpatient care visit in the last 4 weeks and how much they paid out-of-pocket for it.

1.8.4 Alternative Medicine Care

IFLS elicits information about doctor visit and alternative/traditional medicine care utilization and expenditure in the past 4 weeks. Respondents are first asked whether they received outpatient care at a public hospital, public health center, private hospital, polyclinic, private clinic, medical center, private physician, nurse, paramedic, midwife practitioner, traditional practitioner, or posyandu lansia during the last 4 weeks. Outpatient care includes both cases when the respondent visited a certain facility and when he/she was visited by medical personnel. Then, respondents are asked to report the frequency with which they received outpatient care and how much they paid out-of-pocket at each facility. Respondents are also asked about whether the insurance covered the cost of the most recent outpatient care visit in the last 4 weeks and how much they paid out-of-pocket for it.

1.8.5 Home Health Care

IFLS asks whether the most recent health care provider for outpatient care visited the respondent at home or not.
1.8.6 Personal Care, Home Help, and Meals on Wheels

N.A.

1.8.8 Preventive Care

IFLS elicits information about preventive care in the last 5 years. Respondents are asked whether they underwent a general checkup in the last 5 years. They are not asked to report how much they paid for such medical checkup.

1.8.9 Regular Prescription Medication

N.A.

1.8.10 Outpatient Surgery

N.A.

1.8.11 Dental Care

IFLS elicits private provider health care utilization and expenditure in the past 4 weeks. Respondents are first asked whether they visited or were visited by a Private Physician (General Practitioner, Specialist, Dentist, Family Doctor) during the last 4 weeks. Then, they are asked to report the frequency with which they saw a private physician during the last 4 weeks and how much they paid out-of-pocket for it.

1.8.12 Satisfaction and Treatment Adherence

IFLS elicits the overall satisfaction for the services received at the most recently visited facility and whether respondents are satisfied with the health care provided by that facility.

1.8.13 Travel and Other Costs

IFLS elicits travel time and cost to the most recent outpatient care during the 4 weeks. Respondents are asked about what the travel time (one-way) to the most recent facility was and what the total transportation cost was (one-way).
1.8.14 Help from Others

N.A.
1.9 MHAS

The MHAS questionnaire asks respondents to report on a wide range of health care utilization and expenditure categories. For most services, respondents are first asked whether they received them and then to report the corresponding frequency of utilization and expenditure.

1.9.1 Hospital Stay

MHAS elicits hospital stay utilization and expenditure in the past year. Respondents are asked about the total number of night they spent in the hospital in the past year and how much they paid out-of-pocket for their hospitalization.

1.9.2 Nursing Home Stay

N.A.

1.9.3 Doctor Visit and Outpatient Care

MHAS elicits doctor visit utilization and expenditure in the last year. Respondents are asked the frequency with which they saw a doctor in the last year and how much they paid out-of-pocket for these visits.

1.9.4 Alternative Medicine Care

MHAS elicits alternative/traditional medicine care utilization and expenditure in the last year. Respondents are asked the frequency with which they saw a curandero, homeopath, folk healer in the last year and how much they paid out-of-pocket for these visits.

1.9.5 Home Health Care

N.A.

1.9.6 Personal Care, Home Help, and Meals on Wheels

N.A.
1.9.8 Preventive Care

N.A.

1.9.9 Regular Prescription Medication

N.A.

1.9.10 Outpatient Surgery

MHAS elicits outpatient surgery utilization and expenditure in the last year. Respondents are asked how many times they had outpatient surgery in the last year and how much they paid for the procedures.

1.9.11 Dental Care

MHAS elicits information about dental care utilization and expenditure in the last year. Respondents are asked how many times they saw a dentist in the last year and how much they paid for these visits.

1.9.12 Satisfaction and Treatment Adherence

MHAS respondents are asked whether they stopped taking medications because of excessive cost. They are also asked whether they did not go to the doctor when they had a serious health problem.

1.9.13 Travel and Other Costs

N.A.

1.9.14 Help from Others

MHAS respondents are asked to indicate who mostly paid for incurred out-of-pocket medical costs in the last year.
2. METHODOLOGICAL ISSUES ACROSS SURVEYS

As documented above, the surveys considered in this guide ask a number of questions about health care utilization and expenditure. In this section, we summarize methodological similarities and differences in available health care utilization/expenditure questions across surveys. In particular, for each question we focus on salient features including the person designated to answer it, the unit of observation (i.e., whether the individual or the household), the reference period and the concept being measured.

It should be noted that monetary amounts are expressed in nominal country-specific currencies.

Also, the exact wording of all relevant survey questions is reported in Chapter 3 of this user guide.

2.1 Hospital Stay

2.1.1 Measurement

All surveys except ELSA, KLoSA, TILDA, and MHAS ask whether respondents stayed in the hospital as an inpatient. All surveys except ELSA and MHAS ask how many times the respondent stayed in the hospital as an inpatient. All surveys except ELSA, KLoSA, CHARLS, and IFLS ask how many nights in total the respondents stay in the hospital. All surveys except ELSA ask about the expenditure on hospital stay.

2.1.2 Respondent

Questions about hospital stay are answered by each individual interviewed by the survey across all studies.
2.1.3 Unit of Observation

Questions about hospital stay are reported at the individual level across all studies.

2.1.4 Reference Period

In the HRS and KLoSA [W2-W4], questions about hospitalization refer to the time since the previous interview or to the last 2 years. Questions about hospitalization refer to the past year in the CHARLS, JSTAR General and MHAS, and to the past/last 12 months in the SHARE, KLoSA W1, JSTAR (W2/W3 for 7 cities), TILDA, and IFLS.

2.1.5 Comparability

The HRS, SHARE, KLoSA, TILDA and MHAS refer to hospitalization using the words “patient in a hospital overnight.” The CHARLS and IFLS use the words “patient care,” while the JSTAR uses “spending one or more nights in the hospital.”

Measures of whether the respondent stayed in the hospital in the past year are immediately comparable across all surveys, with the exception of the HRS and KLoSA [W2-W4] where the reference time period is two years instead of one. It should be noted that the KLoSA, TILDA, and MHAS do not ask whether the respondent has stayed in the hospital, but elicit the number of hospitalizations directly. In these cases, a YES/NO variable for hospitalization can be obtained by recoding zero to NO and a positive number to YES.

The number of times in a year respondents were hospitalized is immediately comparable across all surveys, except for the HRS and KLoSA [W2-W4], where the reference period is two years instead of one. In the MHAS, this information is not elicited. The HRS and KLoSA [W2-W4] measures can be
converted to a 1-year measure by making assumptions about how overnight hospital stays are
spread over the two-year reference period (e.g., assuming they are equally spread, the adjustment
implies dividing the reported number by 2).

The total number of nights in hospital in a year is immediately comparable across surveys,
except for the HRS, KLoSA, CHARLS, and IFLS. The reference period in the HRS is two years instead
on one. Conversion from 2-year to 1-year measures can be obtained by making assumptions about
how overnight hospital stays are spread over the two-year reference period (e.g., assuming they are
equally spread, the adjustment implies dividing the reported number by 2). The KLoSA, CHARLS, and
IFLS only elicit how many nights the respondents stayed in the hospital during their last visit. An
approximate 1-year measure can be obtained by multiplying the reported number of nights during
the last visit by the total number of visits in a year (assuming that the number of nights during the
last visit is representative of the “typical” number of nights per visit). For KLoSA [W2-W4] a further
adjustment is needed since the reference period is two years instead of one.

The total out-of-pocket cost of hospitalization in the past year is immediately comparable
among SHARE, CHARLS, JSTAR, TILDA and MHAS. Since the reference period in the HRS is 2 years
instead of 1, a conversion is needed to obtain a comparable measure with the aforementioned
surveys. The KLoSA and IFLS elicit the total cost of hospitalization for the last visit only.
### Table 1 Summary of Questions about Hospitalization

<table>
<thead>
<tr>
<th>Hospital stay (Y/N)</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Individual</td>
<td>NA</td>
<td>Individual</td>
<td>Individual</td>
<td>Individual</td>
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<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

- **Hospital stay (Y/N)**
  - Last 2 years: NA
  - Last 12 months: NA
  - Past year: NA
  - Past 12 months: NA
  - Last 12 months: NA
  - Past year: NA
  - Past 12 months: NA

- **# of hospital stays**
  - Last 2 years: NA
  - Last 12 months: NA
  - Past year: NA
  - Past 12 months: NA
  - After previous interview: NA

- **# of nights in hospital**
  - Last year: NA
  - After previous interview: NA
  - Last year: NA
  - Past year: NA
  - Past 12 months: NA
  - Past year: NA
  - Past 12 months: NA

### Categories/Measure Type

- **Unit for the # of nights in hospital**
  - In total: NA
  - Last visit: NA
  - Past year: NA
  - Last 12 months: NA
  - Past year: NA
  - Past 12 months: NA

- **Cost**
  - Amount refers to:
    - Last 2 years: NA
    - Last 12 months: NA
    - Last hospitalization: NA
    - Past year: NA
    - Past 12 months: NA
    - Only for last visit: NA
    - Past year: NA

- **Total cost**
  - N: NA
  - Y: NA

- **Insurance info and/or covered cost**
  - NA: NA
  - Y: NA

- **Out-of-pocket cost**
  - NA: NA
  - Y: NA

- **Payment from others**
  - NA: NA
  - Y: NA

### Cross-Survey Comparison

- **Hospital stay (Y/N)**
  - D: NA
  - C: C

- **# of hospital stays**
  - D: NA
  - C: C

- **# of nights in hospital**
  - D: NA
  - C: C

- **Cost of hospital stays**
  - D: NA
  - C: C

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.2 Nursing Home Stay

2.2.1 Measurement

HRS, SHARE, JSTAR, and TILDA ask whether respondents stayed in a nursing home during a certain reference period. HRS and SHARE also elicit the number of times the respondent stayed in a nursing home. HRS, SHARE, JSTAR, and TILDA ask how many nights in total the respondents stayed in a nursing home. HRS, SHARE, JSTAR, and TILDA also elicit the cost of nursing home stays.

2.2.2 Respondent

Questions about nursing home stay are answered by each individual interviewed by the survey across all studies.

2.2.3 Unit of Observation

Questions about nursing home stay are reported at the individual level across all studies.

2.2.4 Reference Period

In the HRS, questions about nursing home stay refer to the time since the previous interview or to the last 2 years. Questions about nursing home stay refer to the past year in the JSTAR, and to the past/last 12 months in the SHARE, and TILDA.
2.2.5 Comparability

The HRS refers to nursing home stay using the expression “patient overnight in a nursing home, convalescent home, or other long-term health care facility.” SHARE uses the words “being in a nursing home overnight” while JSTAR uses “receiving nursing care at a facility or being institutionalized in any care facility.” TILDA refers to the nursing home stay using the expression “resident in a nursing home or convalescent home.”

Measures of whether the respondent stayed in a nursing home in the past year are immediately comparable across SHARE, JSTAR, and TILDA. In the HRS, the reference time period is two years instead of one. It should be noted that the TILDA does not ask whether the respondent has stayed in a nursing home, but elicit directly the number of nursing home stays. In this case, a YES/NO variable for nursing home stay can be obtained by recoding zero to NO and a positive number to YES.

The number of times in a year respondents stayed in a nursing home is comparable for HRS and SHARE after appropriate conversion, since the reference period in the former survey is two years while it is one in the latter. For instance, the HRS measure can be converted to a 1-year measure by making assumptions about how nursing home stays are spread over the two-year reference period (e.g., assuming they are equally spread, the adjustment implies dividing the reported number by 2). JSTAR and TILDA do not elicit this measure.

The total number of nights in nursing home in a year is directly comparable for SHARE and JSTAR, but not for the HRS and TILDA. The reference period in the HRS is two years instead on one, hence some conversion is needed. TILDA asks the number of weeks instead of the number of nights the respondent stayed in a nursing home. In this case, the approximate number of nights can be obtained by multiplying the reported number of weeks by 7.
The total out-of-pocket cost of nursing home stay in a year is not directly comparable across surveys because of the different reference periods. Specifically, the HRS elicit nursing home cost in the last 2 years, JSTAR elicits nursing home cost per month over the past 12 months and TILDA the cost paid during the last 12 months. Hence, appropriate conversions are required to achieve comparability across these surveys.
Table 2. Summary of Questions about Nursing Home Stay

<table>
<thead>
<tr>
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<td>Individually</td>
<td>NA</td>
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<td>Individually</td>
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<td>NA</td>
<td>last 12 months</td>
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<td>NA</td>
<td>past year</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td># of nursing home stays</td>
<td>last 2 years</td>
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<td>last 12 months</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>past year</td>
<td>last 12 months</td>
<td>NA</td>
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<tr>
<td># of nights in nursing home</td>
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<td>last 12 months</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>past year</td>
<td>last 12 months</td>
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<td>Categories/Measure Type</td>
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<td>In total</td>
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<td>NA</td>
<td>In total</td>
<td>(Week)</td>
<td>In total</td>
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<td>Cost</td>
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<td>last 12 months</td>
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<td>NA</td>
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<td>Insurance info and/or covered cost</td>
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<td>NA</td>
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<td>Cross-Survey Comparison</td>
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<tr>
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<td>C</td>
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<td>NA</td>
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<td>C</td>
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<td>NA</td>
<td>NA</td>
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<td>C</td>
<td>NA</td>
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<td>D</td>
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<td>Cost of Nursing home stays</td>
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<td>C</td>
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<td>NA</td>
<td>D</td>
<td>C</td>
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</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.3 Doctor Visit and Outpatient Care

2.3.1 Measurement

All surveys except ELSA ask whether respondents visited a doctor during a certain reference period. All surveys except ELSA ask how many times the respondent visited a doctor’s office and the corresponding total cost of these visits. The HRS asks separately for emergency room and clinic visit as well as for house calls. The KLoSA uses a single question for doctor’s office, emergency room and hospital outpatient office visits. Similarly, the TILDA’s question refers broadly to outpatient hospital visits. The questions of CHARLS and IFLS include both outpatient doctor/hospital/clinic visit and home-visit by doctors and medical personnel. The questions of JSTAR and IFLS mention both medical doctors and alternative/traditional medicine doctors.

2.3.2 Respondent

Questions about doctor visit and outpatient care are answered by each individual interviewed by the survey across all studies.

2.3.3 Unit of Observation

Questions about doctor visit and outpatient care are reported at the individual level across all studies.

2.3.4 Reference Period

In the HRS and KLoSA [W2-W4], questions about doctor visit and outpatient care refer to the time since the previous interview or to the last 2 years. Questions about doctor visit and outpatient care refer to the past year in the JSTAR General and MHAS, and to the past/last 12 months in the
SHARE, KLoSA W1, JSTAR (W2/W3 for 7 cities), and TILDA. In the CHARLS, questions refer to the last month while those of IFLS refer the last 4 weeks.

2.3.5 Comparability

The HRS and SHARE refer to doctor visits using the words “seeing or talking to a medical doctor about your health.” The HRS has a separate question about emergency room and clinic visits and house calls. MHAS uses “visiting or consulting a doctor or medical personnel.” KLoSA uses “visiting a doctor’s office, including emergency room and hospital outpatient office” for the first wave and “been to a local clinic or hospital as an outpatient or to an emergency room” for other waves. TILDA uses the words “visiting hospital as an out-patient.” The CHARLS questionnaire uses the expression “visiting a public hospital, private hospital, public health center, clinic, or health worker’s or doctor’s practice or being visited by a health worker or doctor for outpatient care.” Similarly, IFLS uses “been to or visited by [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia;]”. Hence, CHARLS and IFLS include home visits by a doctor or medical personnel as doctor’s visits. The JSTAR’s questions mention visits to a doctor, acupuncturist or bonesetter as well as been an outpatient at a hospital or clinic or receiving acupuncture, moxibustion or bonesetting treatment at a clinic. Thus, IFLS and JSTAR questions include both doctor/hospital visits and alternative (traditional) medicine doctor visits.

Measures of doctor visit and outpatient care in the past year are comparable across SHARE, MHAS, KLoSA W1, and TILDA. In the HRS and KLoSA [W2-W4], the reference time period is two years instead of one while CHARLS and IFLS uses a month or the last 4 weeks. JSTAR uses the past year as the reference period. Most importantly, the CHARLS and IFLS surveys include outpatient as well as
inpatient visits, making the answers to these questions not fully comparable with those from other surveys. Similarly, IFLS and JSTAR adopt broader categories referring to both medical doctor visits and alternative/traditional doctor visits. It should be noted that the SHARE, TILDA, and MHAS do not ask whether the respondent has seen a doctor during the reference period, but elicit the number of doctor visit directly. In these cases, a YES/NO variable for doctor visit can be obtained by recoding zero to NO and a positive number to YES.

The number of times in a year respondents saw a doctor or received outpatient care is comparable across SHARE, MHAS, KLoSA W1, and TILDA. The HRS and KLoSA [W2-W4] measures can be converted to a 1-year measure by making assumptions about how doctor visits are spread over the two-year reference period (e.g., assuming they are equally spread, the adjustment implies dividing the reported number by 2). For CHARLS, IFLS, and JSTAR, the questions are broader, including outpatient and inpatient visits or conventional and alternative/traditional medical care. Because of that, answers are not fully comparable with those from other surveys.

The total out-of-pocket cost of doctor visits in a year is immediately comparable across SHARE, KLoSA[W1], TILFS, and MHAS. Appropriate conversions need to be used for HRS and KLoSA[W2-W4], which adopt a 2-year reference period. The measures elicited by CHARLS, JSTAR, and IFLS are not comparable since these surveys use broader definitions of doctor visits and outpatient care.
Table 3. Summary of Questions about Doctor Visit and Outpatient Care

<table>
<thead>
<tr>
<th>Doctor Visit and Outpatient Care</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA (W2-W4)</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Indiv</td>
<td>NA</td>
<td>Indiv</td>
<td>Indiv</td>
<td>Indiv</td>
<td>Indiv</td>
<td>Indiv</td>
<td>Indiv</td>
<td>Indiv</td>
</tr>
<tr>
<td>Reference Period</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor Visit and Outpatient Care (Y/N)</td>
<td>last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>last month</td>
<td>past year</td>
<td>NA</td>
<td>the last 4 weeks</td>
</tr>
<tr>
<td># of Doctor Visit and Outpatient Care</td>
<td>last 2 years</td>
<td>NA</td>
<td>last 12 months</td>
<td>past 12 months</td>
<td>after previous interview</td>
<td>last month</td>
<td>past year</td>
<td>last 12 months</td>
<td>the last 4 weeks</td>
</tr>
<tr>
<td>Categories/Measure Type</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unit for # of Doctor Visit and Outpatient Care</td>
<td>In total</td>
<td>NA</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
</tr>
<tr>
<td>Type of Visit</td>
<td>In-visit</td>
<td>NA</td>
<td>In-visit</td>
<td>In-visit</td>
<td>In-visit</td>
<td>In-visit</td>
<td>In-visit</td>
<td>In-visit</td>
<td>In-visit</td>
</tr>
<tr>
<td>Type of Doctor</td>
<td>medical doctor</td>
<td>NA</td>
<td>medical doctor</td>
<td>doctor’s office</td>
<td>a local clinic or hospital as an outpatient care</td>
<td>outpatient care</td>
<td>a hospital as an outpatient care</td>
<td>a doctor or medical person</td>
<td></td>
</tr>
<tr>
<td>Include</td>
<td>emergen cy room, clinic visits, house calls</td>
<td>NA</td>
<td>emergen cy room, outpatient clinic visits</td>
<td>emergen cy room and hospital outpatient office</td>
<td>an emergen cy room</td>
<td>public hospital, private hospital, public health center, clinic, or health worker’s or doctor’s practice, or been visited by a health worker or doctor</td>
<td>hospital or clinic or received acupuncture, moxibustion or bone-setting treatment at a clinic</td>
<td>all types of consultations, tests, operation, procedures or treatments</td>
<td>Public Hospital, Public Health Center, Private Hospital, Polyclinic, Private Clinic, Medical Center; Private Physician, Nurse, Paramedic, Midwife practitioner</td>
</tr>
<tr>
<td>Exclude</td>
<td>any hospital stays, outpatient surgery, hospital stays, outpatient surgery</td>
<td>NA</td>
<td>dentists, hospital stays</td>
<td>Hospitalization, the visits to a dentist, public health clinic, oriental health clinic</td>
<td>oriental medicine clinics, public health clinics and dental clinics, and hospitalization</td>
<td>NA</td>
<td>checkups, health consultations, or immunizations, visits to a doctor, or hospitalizations</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Cost</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amount refers to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total cost</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>Insurance info and/or covered cost</td>
<td>Y</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>Out-of-pocket cost</td>
<td>Y</td>
<td>NA</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Payment from others</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
</tr>
</tbody>
</table>

Cross-Survey Comparison
<table>
<thead>
<tr>
<th>Doctor Visit and Outpatient Care (Y/N)</th>
<th>D</th>
<th>NA</th>
<th>C</th>
<th>C</th>
<th>D</th>
<th>D</th>
<th>D</th>
<th>C</th>
<th>D</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Doctor Visit and Outpatient Care</td>
<td>D</td>
<td>NA</td>
<td>C</td>
<td>C</td>
<td>D</td>
<td>D</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
</tr>
<tr>
<td>Cost of Doctor Visit and Outpatient Care</td>
<td>C2</td>
<td>NA</td>
<td>C</td>
<td>C</td>
<td>C2</td>
<td>D</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>C</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.4 Alternative Medicine Care

2.4.1 Measurement

JSTAR and IFLS use one question to elicit visits to medical doctors and alternative medicine doctors. KLoSA and MHAS have separate questions for Alternative Medicine Cares. JSTAR and IFLS ask whether respondents saw a medical doctor or an alternative medicine doctor during a certain reference period, the number of times they did so and the cost of these visits. KLoSA and MHAS elicit how many times the respondent visited an alternative medicine doctor or any other traditional health care practitioner and the cost of these visits.

2.4.2 Respondent

Questions about alternative (traditional) medicine doctor visits are answered by each individual interviewed by the survey across all studies.

2.4.3 Unit of Observation

Questions about alternative (traditional) medicine doctor visits are reported at the individual level across all studies.

2.4.4 Reference Period

The reference period in KLoSA is the last 12 months in W1 and the time since the previous interview in W2-W4. JSTAR uses the past year/12 months, while IFLS refers to the last 4 weeks.
2.4.5 Comparability

The KLoSA uses the expressions “seeing a doctor at an oriental clinic” and “visiting an oriental medicine clinic,” in W1 and W2-W$, respectively. MHAS uses “seeing a homeopath or folk healer” in 2003 and “seeing a curandero or consulting a homeopath” in all the other surveys. JSTAR and IFLS elicit visits to alternative medicine doctors together with visits to conventional doctors. Specifically, JSTAR asks to include acupuncture, moxibustion or bonesetting treatments, while IFLS asks to include visits to “Traditional Practitioner” and “Posyandu Lansia.”

Information about Alternative Medicine Cares is not comparable across surveys. The concepts elicited by KLoSA and MHAS are more specific and narrowly defined, while those elicited by JSTAR and IFLS are broader and better suited to measure doctor visits as a whole (medical doctors as well as alternative medicine doctors). Because of this, comparability of number and cost of Alternative Medicine Cares is problematic. With the caveat of existing contextual differences, measures of utilization and expenditure of alternative medicine from KLoSA and MHAS are comparable.
Table 4. Summary of Questions about Alternative Medicine Care

<table>
<thead>
<tr>
<th>Alternative Medicine Care</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
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</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Individua l</td>
<td>Individua l</td>
<td>NA</td>
<td>Individua l</td>
<td>NA</td>
<td>Individua l</td>
<td>Individual</td>
</tr>
</tbody>
</table>

Reference Period

<table>
<thead>
<tr>
<th>Alternative Medicine Care (Y/N)</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Alternative Medicine Care</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>past 12 months</td>
<td>after previous interview</td>
<td>NA</td>
<td>past year</td>
<td>NA</td>
<td>the last 4 weeks</td>
<td>NA</td>
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</tbody>
</table>

Categories/Measure Type

<table>
<thead>
<tr>
<th>Alternative Medicine Care (Y/N)</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Alternative Medicine Care</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>past 12 months</td>
<td>after previous interview</td>
<td>NA</td>
<td>past year</td>
<td>NA</td>
<td>the last 4 weeks</td>
<td>last year</td>
</tr>
</tbody>
</table>

Cost

<table>
<thead>
<tr>
<th>Amount refers to</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>last 12 months</td>
<td>after previous interview</td>
<td>NA</td>
<td>Per visit</td>
<td>NA</td>
<td>past 4 weeks</td>
<td>Past year</td>
</tr>
<tr>
<td>Insurance info and/or covered cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>How much reimbursed by private insurance</td>
<td>NA</td>
<td>Y</td>
<td>NA</td>
<td>N</td>
</tr>
<tr>
<td>Out-of-pocket cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Y</td>
<td>(Exclude covered by private insurance and payment by relatives)</td>
<td>Y</td>
<td>(Exclude covered by private insurance and payment by relatives)</td>
<td>NA</td>
<td>Y</td>
<td>NA</td>
</tr>
<tr>
<td>Payment from others</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>Payment by relatives</td>
<td>NA</td>
<td>N</td>
<td>NA</td>
<td>N</td>
</tr>
</tbody>
</table>

Cross-Survey Comparison

<table>
<thead>
<tr>
<th>Alternative Medicine Care (Y/N)</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Alternative Medicine Care</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>C</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>D</td>
</tr>
<tr>
<td>Cost of Alternative Medicine Care</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>C</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>D</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.5 Home Health Care

2.5.1 Measurement

HRS, SHARE, and JSTAR ask whether respondents were visited by a doctor or medically trained person. SHARE, KLoSA, and JSTAR elicit the number of times the respondent was visited by a doctor or medically trained person. CHARLS and IFLS ask whether the most recent health care service was received at home. HRS, SHARE, KLoSA, CHARLS, JSTAR, and IFLS elicit the cost of home health care.

2.5.2 Respondent

Questions about home health care are answered by each individual interviewed by the survey across all studies.

2.5.3 Unit of Observation

Questions about home health care are reported at the individual level across all studies.

2.5.4 Reference Period

In the HRS and KLoSA [W2-W4], questions about home health care refer to the time since the previous interview or to the last 2 years. Questions about home health care refer to the past year in the JSTAR General and to the past/last 12 months in the SHARE, KLoSA W1, and JSTAR (W2/W3 for 7 cities). In the CHARLS, questions refer to the last month; in the IFLS to the last 4 weeks.
2.5.5 Comparability

The HRS refers to home health care using the words “medically-trained person come to your home to help you.” Similarly, KLoSA [W1] uses “any doctors, nurses, or other medically trained person come to your home and provided care” while KLoSA [W2-W4] uses “a health care provider visited your house to give you medical treatment.” SHARE refers to home health care using the expression “professional or paid nursing or personal care.” JSTAR asks separate questions for the subcategory of the home health care such as physical care, housework assistance, bathing, nurse visit, and home rehabilitation. CHARLS and IFLS ask the question “Did the provider visit you at home?” after the questions about the most recently received health care service.

Measures of whether the respondent used home health care are comparable across SHARE, KLoSA W1, and JSTAR, where the reference period is the past year, and across HRS and KLoSA [W2-W4], where the reference time is two years. Appropriate conversion can be used to make these measures comparable across all surveys. It should be noted that the KLoSA does not ask whether the respondent has used home health care, but elicits the number of home health care directly. In this case, a YES/NO variable can be obtained by recoding zero to NO and a positive number to YES. The CHARLS and IFLS ask whether, for each type of health care service received, the provider visited the respondent at home. A YES/NO indicator for home health care in the last month, and thus, for the last year can be constructed.

The number of times in a year respondents used home health care is comparable across KLoSA and JSTAR. The JSTAR elicits the average number of times per months the respondent received home health care in the past year. This measure can be converted to a 1-year measure by multiplying it by 12. SHARE elicits the number of weeks and the number of hours per week of home
health care, therefore obtaining a yearly measure is more problematic. For CHARLS and IFLS, this measure cannot be obtained.

The total out-of-pocket cost for the home health care in the past year is directly comparable between KLoSA[W1] and JSTAR. The total out-of-pocket cost for the home health care in the past two years is comparable between KLoSA[W2-W4] and HRS. However, conversion from 2-year to 1-year measures can be obtained by making assumptions about how doctor visits are spread over the two-year reference period (e.g., assuming they are equally spread, the adjustment implies dividing the reported number by 2), making HRS and KLoSA[W2-W4] comparable with KLoSA[W1] and JSTAR. SHARE elicits the total cost of nursing homes, day-centers and home care services together, which makes it difficult to isolate the cost of home health care. The CHARLS and IFLS only ask about the cost of the most recent health care utilization (as well as whether the service was provided at home or not).
Table 5. Summary of Questions about Home Health Care

<table>
<thead>
<tr>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unit of Observation</strong></td>
<td>Individua l</td>
<td>NA</td>
<td>Individua l</td>
<td>Individua l</td>
<td>Individua l</td>
<td>Individua l</td>
<td>NA</td>
<td>Individua l</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td><strong>Reference Period</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home health care (Y/N)</td>
<td>last 2 years</td>
<td>NA</td>
<td>last 12 months</td>
<td>NA</td>
<td>NA</td>
<td>past year</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td># of home health care</td>
<td>NA</td>
<td>NA</td>
<td>last 12 months</td>
<td>past 12 months</td>
<td>after previous interview</td>
<td>the last 4 weeks</td>
<td>past year</td>
<td>NA</td>
<td>the last 4 weeks</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Categories/Measure Type</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td># of home health care - unit</td>
<td>NA</td>
<td>NA</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>In total</td>
<td>NA</td>
<td>In total</td>
<td>NA</td>
</tr>
<tr>
<td># of home health care - frequency unit</td>
<td>NA</td>
<td>NA</td>
<td>Week/hour</td>
<td># of times</td>
<td># of times</td>
<td>Time/month</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Type of care</td>
<td>any medically-trained person</td>
<td>NA</td>
<td>Professional or paid nursing or personal care</td>
<td>doctors, nurses, or other medically trained person</td>
<td>health care provider</td>
<td>the provider</td>
<td>nursing care services / any assistance or care service at home or as a visitor at facilities</td>
<td>NA</td>
<td>the provider</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Cost</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Amount refers to</td>
<td>last two years</td>
<td>NA</td>
<td>last 12 months</td>
<td>last 12 months</td>
<td>after previous interview</td>
<td>Last Month</td>
<td>per month over the past 12-month period</td>
<td>NA</td>
<td>Per visit (in last 4 weeks)</td>
<td>NA</td>
</tr>
<tr>
<td>Total cost</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>NA</td>
</tr>
<tr>
<td>Insurance info and/or covered cost</td>
<td>Y</td>
<td>How much covered (categorical)</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>How much reimbursed by private insurance</td>
<td>Y</td>
<td>Y</td>
<td>NA</td>
</tr>
<tr>
<td>Out-of-pocket cost</td>
<td>Y</td>
<td>NA</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>NA</td>
<td>Y</td>
<td>NA</td>
</tr>
<tr>
<td>Payment from others</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>N</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>NA</td>
<td>Y</td>
<td>NA</td>
</tr>
<tr>
<td>Cross-Survey Comparison</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home health care (Y/N)</td>
<td>C2</td>
<td>NA</td>
<td>D</td>
<td>C</td>
<td>C2</td>
<td>D</td>
<td>C</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
</tr>
<tr>
<td># of home health care</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
</tr>
<tr>
<td>Cost of home health care</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>C</td>
<td>D</td>
<td>D</td>
<td>C</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.6 Personal care, Home help and Meals on Wheels

2.6.1 Measurement

HRS, ELSA, SHARE, and JSTAR ask whether respondents received personal care and home help
during a certain reference period. All surveys, except IFLS and MHAS, ask how many times the
respondent received personal care and home help during a certain reference period. HRS, KLoSA,
CHARLS, and TILDA also elicit the cost of personal care or home help services.

ELSA, SHARE, and TILDA ask whether respondents received meals on wheels during a certain
reference period. Only SHARE and TILDA ask how many times the respondent received such service
and only TILDA elicits the cost of it.

2.6.2 Respondent

Questions about personal care, home help and meals on wheels are answered by each
individual interviewed by the survey across all studies.

2.6.3 Unit of Observation

Questions about personal care, home help and meals on wheels are reported at the individual
level across all studies.

2.6.4 Reference Period

In the HRS and ELSA, questions about whether personal care and home help was received do
not specify a precise reference period, while in the SHARE questions refer to the last 12 months and
in the JSTAR to the past year. Questions about the number of times personal care and home help was received refer to the past year in the JSTAR and to the last 12 months in the SHARE. In the HRS, ELSA, KLoSA, CHARLS, and TILDA, these questions refer to the last month.

In ELSA, the reference period during which the respondent received meals on wheels is not specified, while it is the last 12 months in the SHARE and TILDA. SHARE elicits the number of weeks the respondent received meals on wheels in the last 12 months. TILDA elicits the number of days the respondent received meals on wheels in the last month.

2.6.5 Comparability

The HRS and CHARLS ask separate questions about whether the respondent receive help with activities such as dressing, getting across the room, bathing, eating, getting out of bed and using the toilet. The JSTAR asks separately for help with housekeeping/filling out documents and with personal care involving physical contact. The ELSA, SHARE, KLoSA, and TILDA use one question to elicit this information and specify the types of services to be included in this category to different extents. As far as meals on wheels are concerned, the ELSA, SHARE and TILDA all use the same wording to elicit this information.

Measures of whether the respondent received personal care and/or home help in the past year are directly comparable between SHARE and JSTAR. Measures of whether the respondent received personal care and/or home help in the last month are comparable across HRS, ELSA, CHARLS, and TILDA. Measures of whether the respondent received personal care and/or home help in the last month are comparable across CHARLS and TILDA. The KLoSA, CHARLS and TILDA elicit the number of times the respondent received personal care and/or home help directly. In these cases, a YES/NO variable for personal care or home help can be obtained by recoding zero to NO and a positive
number to YES. Measures of whether the respondent used meals on wheels in the past year are comparable between SHARE and TILDA.

The number of times in the last month respondents received personal care or home help is directly comparable across HRS, CHARLS, and TILDA, while some conversion is needed for ELSA, SHARE, and JSTAR. The number of times in the last month respondents used domestic help is comparable across CHARLS and TILDA. A comparable measure of the number of times the respondent used meals on wheels can be obtained for SHARE and JSTAR, but it is not available for ELSA.

The cost for personal care and/or home help for one month is comparable across HRS, KLoSA, CHARLS and TILDA provided that a measure of total cost is constructed, which should include the cost of all items/types of services when separately elicited.

Researchers should be warned that because of contextual differences, surveys tend to use different wording and lists of items to be considered as personal care/home help. Because of this, measures of are not perfectly homogenous and comparable across studies.
## Table 6. Summary of Questions about Personal care and Home help

<table>
<thead>
<tr>
<th>Personal Care/Home help</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA (W2-W4)</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Individa l</td>
<td>Individa l</td>
<td>Individa l</td>
<td>Individa l</td>
<td>Individa l</td>
<td>Individa l</td>
<td>Individa l</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
</tbody>
</table>

### Reference Period

<table>
<thead>
<tr>
<th>Personal care/home help (Y/N)</th>
<th>Not Specified</th>
<th>Not Specified</th>
<th>last 12 months</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>past year</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of times personal care/home help was received</th>
<th>Last month</th>
<th>Last month</th>
<th>Last 12 months</th>
<th>Last month</th>
<th>Last month</th>
<th>past year</th>
<th>Last month</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Meals on Wheels (Y/N)</th>
<th>NA</th>
<th>Ever</th>
<th>last 12 months</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>last 12 months</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of times meals on wheels was received</th>
<th>NA</th>
<th>NA</th>
<th>last 12 months</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>Last Month</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

### Categories/Measure Type

<table>
<thead>
<tr>
<th>Separate categories for personal care/home help</th>
<th>Y</th>
<th>N</th>
<th>N</th>
<th>N</th>
<th>N</th>
<th>Y</th>
<th>N</th>
<th>N</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of times personal care/home help was received – frequency unit</th>
<th>Days in last month; Days per week; Every day and hour per day</th>
<th>1. Every day or nearly every day; 2. Two or three times a week; 3. Once a week; 4. Less often</th>
<th>number of week &amp; number of hour per week</th>
<th>Days/ hours per day</th>
<th>Days per day</th>
<th>Days/ hours per day</th>
<th>Days per day</th>
<th>Ave. no of times/month</th>
<th>Days / Hours per day</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

### Cost Personal Care/Home Help

<table>
<thead>
<tr>
<th>Amount refers to</th>
<th>the last month</th>
<th>NA</th>
<th>NA</th>
<th>the past month</th>
<th>the past one month</th>
<th>the past month</th>
<th>NA</th>
<th>the last month</th>
<th>NA</th>
<th>NA</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Total cost</th>
<th>Y</th>
<th>NA</th>
<th>NA</th>
<th>Y</th>
<th>Y</th>
<th>Y</th>
<th>NA</th>
<th>Y</th>
<th>NA</th>
<th>NA</th>
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</table>

### Cost Meals on Wheels

<table>
<thead>
<tr>
<th>Amount refers to</th>
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<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>the last month</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Total cost</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

### Cross-Survey Comparison

<table>
<thead>
<tr>
<th>Personal care/home help (Y/N)</th>
<th>D</th>
<th>D</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
<th>D</th>
<th>D</th>
<th>D</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of times personal care/home help was received</th>
<th>C</th>
<th>D</th>
<th>D</th>
<th>NA</th>
<th>NA</th>
<th>C</th>
<th>D</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Cost of personal care/home help</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>C</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Meals on wheels (Y/N)</th>
<th>NA</th>
<th>D</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of times meals on wheels was received</th>
<th>NA</th>
<th>NA</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>D</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Cost of meals on wheels</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>NA</th>
<th>C</th>
<th>NA</th>
<th>NA</th>
</tr>
</thead>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.7 Preventive Care

2.7.1 Measurement

The HRS and TILDA ask whether respondents received a flu shot. The HRS, ELSA, and TILDA ask about various screening tests including blood pressure, mammogram, prostate, etc. The KLoSA, CHARLS, JSTAR, and IFLS ask whether respondents received general health checkup.

2.7.2 Respondent

Questions about preventive care are answered by each individual interviewed by the survey across all studies.

2.7.3 Unit of Observation

Questions about preventive care are reported at the individual level across all studies.

2.7.4 Reference Period

In the HRS, questions about preventive care refer to the last 2 years. In the ELSA and TILDA, questions about preventive care do not specify a precise reference period (they refer to “ever”).

Questions about general checkup refer to the past 2 years in the KLoSA, the last 5 years in the IFLS and the last 12 months in the JSTAR. The CHARLS questionnaire asks the date of the last checkup.
2.7.5 Comparability

Even if preventive care tests/procedures are the same across questionnaires, different reference periods make accurate comparisons of preventive care measures across studies difficult to achieve.

**Table 7. Summary of Questions about Preventive Care**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Individua l</td>
<td>NA</td>
<td>NA</td>
<td>Individua l</td>
<td>Individua l</td>
<td>Individua l</td>
<td>Individua l</td>
<td>Individua l</td>
<td>NA</td>
</tr>
<tr>
<td>Reference Period</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flu Shot (Y/N)</td>
<td>Last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Ever</td>
<td>NA</td>
</tr>
<tr>
<td>General Check Up (Y/N)</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Last 2 years</td>
<td>Last 2 years</td>
<td>Most recent checkup date</td>
<td>Past 12 month</td>
<td>NA</td>
<td>Last 5 years</td>
</tr>
<tr>
<td>Other tests/procedures</td>
<td>blood test, check breast for lumps, mammog ram or x-ray of the breast, pap smear test, examination of prostate</td>
<td>blood pressure, home testing kit for screening bowel cancer, mammog ram, prostate-specific antigen (PSA), blood test</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>blood test, check breast for lumps, mammog ram or x-ray of the breast, pap smear test, examination of prostate, and PSA blood test</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

| Cross-Survey Comparison           |     |      |      |               |         |       |       |      |      |
| Flu shot                          | C | NA | NA | NA | NA | NA | NA | D | NA | NA |
| General checkup                   | NA | NA | NA | C | C | D | D | NA | D | NA |
| Other tests/procedures            | D | C | NA | NA | NA | NA | NA | C | NA | NA |

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.8 Regular Prescription Medication

2.8.1 Measurement

Only HRS and KLoSA ask whether respondents regularly took prescription medication during a certain reference period and the corresponding cost.

2.8.2 Respondent

Questions about regular prescription medication are answered by each individual interviewed by the survey across all studies.

2.8.3 Unit of Observation

Questions about regular prescription medication are reported at the individual level across all studies.

2.8.4 Reference Period

In the HRS, questions about regular prescription medications do not specify the reference period, while questions in the KLoSA refer to the last 12 months (W1) and two years (W2-W4).

In the HRS and KLoSA [W2-W4], questions about regular prescription medications cost refer to the last 2 years while those of KLoSA [W1] refer to the last year.

2.8.5 Comparability

Measures of whether the respondent regularly took prescription medication are not fully comparable due to different reference periods between HRS and KLoSA.
As far as the cost of regular prescription medication is concerned, HRS elicits the monthly cost for the last two years, while KLoSA the total cost for the last year [W1] and the last two years [W2-W4]. Under suitable assumptions about how cost are spread over the course of a year, appropriate adjustments can be made to achieve comparability of these measures between the two surveys. It should also be noted that the HRS and KLoSA [W1] only ask for out-of-pocket cost of regular prescription medication, while KLoSA[W2-W4] asks for total cost (sum of self out of pocket payment, payment from relative, insurance reimbursement), self out-of-pocket cost, and payment from relative. Clearly comparable measures need to refer to out-of-pocket cost only.

Table 8. Summary of Questions about Regular Prescription Medication

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Individua l</td>
<td>NA</td>
<td>NA</td>
<td>Individua l</td>
<td>Individua l</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Reference Period</td>
<td>Not Specified</td>
<td>NA</td>
<td>NA</td>
<td>Last 12 months</td>
<td>Two years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Regular Prescription Medication</td>
<td>The last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>Last year</td>
<td>Two years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td>Cost</td>
<td>Amount refers to</td>
<td>Per month</td>
<td>NA</td>
<td>NA</td>
<td>Last year</td>
<td>Two year</td>
<td>NA</td>
<td>NA</td>
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<td></td>
<td>Total cost</td>
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<td>NA</td>
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<td>N</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Insurance info and/or covered cost</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket cost</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>Y</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
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<td></td>
<td>Payment from others</td>
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<td>N</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Cross-Survey Comparison</td>
<td>Regular Prescription Medication Experience</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Out-of-pocket Cost of Regular Prescription Medication</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
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</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.9 Outpatient Surgery

2.9.1 Measurement

The HRS, SHARE, JSTAR, and MHAS ask whether respondents ever had outpatient surgery. Among these, only HRS and MHAS elicit the cost of outpatient surgery. The TILDA asks about outpatient visits to a hospital and, separately, about whether these visits involved a substantial procedure.

2.9.2 Respondent

Questions about outpatient surgery are answered by each individual interviewed by the survey across all studies.

2.9.3 Unit of Observation

Questions about outpatient surgery are reported at the individual level across all studies.

2.9.4 Reference Period

Questions about outpatient surgery refer to the last 2 years in the HRS, to the last 12 months in SHARE and TILDA, and to the past year in JSTAR and MHAS.

2.9.5 Comparability

The HRS and SHARE both use the words “have outpatient surgery.” The JSTAR gives example of outpatient surgeries, such as removal of polyps using endoscope, cataract surgery, surgery on
varicose veins in the leg. The TILDA adds the question about outpatient surgery after doctor/hospital visits asking whether such visits involved “a substantial procedure, operation or test.” MHAS refers to outpatient surgery using the expression “outpatient procedures, not counting stays in the hospital.”

Measures of whether the respondent had outpatient surgery in last year are directly comparable between SHARE and MHAS. For JSTAR and TILDA, comparable measures can be constructed. For the HRS the different reference period used by the questionnaire makes it difficult to obtain a comparable measure.

As far as the cost is concerned, HRS asks the out-of-pocket cost of outpatient surgery in the last two years, while MHAS asks the cost for the past year without specifying the type. Because of this comparability seems problematic.
Table 9. Summary of Questions about Outpatient Surgery

<table>
<thead>
<tr>
<th>Unit of Observation</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference Period</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>The last 2 years</td>
<td>NA</td>
<td>Last 12 months</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>the past year</td>
<td>Last 12 months</td>
<td>NA</td>
<td>the last year</td>
</tr>
<tr>
<td>Cost of Outpatient Surgery</td>
<td>The last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>the last year</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Categories/Measure Type</th>
<th>Type of Outpatient Surgery</th>
<th>Example of Outpatient Surgery provided</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Have outpatient surgery</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td></td>
<td>Have outpatient surgery</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>surgeries or examinations as an outpatient</td>
<td>NA</td>
<td>Y</td>
</tr>
<tr>
<td></td>
<td>have a substantial procedure, operation or test</td>
<td>NA</td>
<td>N</td>
</tr>
<tr>
<td></td>
<td>outpatient procedures, not counting stays in the hospital</td>
<td>NA</td>
<td>N</td>
</tr>
</tbody>
</table>

| Amount refers to       | Total for last two years   | NA | NA | NA | NA | NA | NA | NA | NA | Altogether for the last year |
| Total cost             | N                           | NA | NA | NA | NA | NA | NA | NA | NA | Not Specified                |
| Insurance info and/or covered cost | Y                           | NA | NA | NA | NA | NA | NA | NA | NA | N                           |
| Out-of-pocket cost     | Y                           | NA | NA | NA | NA | NA | NA | NA | NA | Not Specified                |
| Payment from others    | N                           | NA | NA | NA | NA | NA | NA | NA | NA | N                           |

| Cross-Survey Comparison | Outpatient Surgery Experience | D | NA | C | NA | NA | NA | C | D | NA | C |
| Cross-Survey Comparison | Cost of Outpatient Surgery   | C | NA | NA | NA | NA | NA | NA | NA | NA | D |

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.10 Dental Care

2.10.1 Measurement

All surveys except ELSA and TILDA ask whether respondents received dental care during a
certain reference period. Only KLoSA and MHAS ask how many times the respondents received
dental care. The HRS, KLoSA, CHARLS, JSTAR and MHAS also elicit the cost of dental care. The IFLS
elicits information about dental care together with information about private provider care.

2.10.2 Respondent

Questions about dental care are answered by each individual interviewed by the survey across
all studies.

2.10.3 Unit of Observation

Questions about dental care are reported at the individual level across all studies.

2.10.4 Reference Period

In the HRS and KLoSA [W2-W4], questions about dental care refer to the last 2 years. In the
SHARE and KLoSA [W1], they refer to the last 12 months, while in the CHARLS, JSTAR and MHAS to
the past year. In the IFLS they refer to the last 4 weeks.
2.10.5 Comparability

After suitable time adjustments to reflect differences in reference periods, measures of whether the respondent received dental care are comparable across surveys. The only exception if the IFLS, where information about dental care is elicited together with information about private provider care and, therefore, cannot be singled out.

After adjusting for differences stemming from different reference periods, measures of the out-of-pocket cost of dental care are comparable across HRS, KLoSA and CHARLS. Comparability for the JSTAR and MHAS may be problematic since these two surveys do not specify whether the cost reported by the respondent should be net of insurance payments.

Table 10. Summary of Questions about Dental Care

<table>
<thead>
<tr>
<th>Dental Care</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unit of Observation</strong></td>
<td>Individual</td>
<td>NA</td>
<td>Individual</td>
<td>Individual</td>
<td>Individual</td>
<td>Individual</td>
<td>NA</td>
<td>Individual</td>
<td>Individual</td>
<td>Individual</td>
</tr>
<tr>
<td><strong>Reference Period</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Dental Care</strong></td>
<td>last 2 years</td>
<td>NA</td>
<td>last 12 months</td>
<td>last 12 months</td>
<td>Two years</td>
<td>Past year</td>
<td>Past year</td>
<td>NA</td>
<td>last 4 weeks</td>
<td>Past year</td>
</tr>
<tr>
<td><strong>Cost of Dental Care</strong></td>
<td>The last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>Last year</td>
<td>Two years</td>
<td>For past year</td>
<td>For last year</td>
<td>NA</td>
<td>4 weeks</td>
<td>for the last year</td>
</tr>
<tr>
<td><strong>Categories/Measure Type</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Cost</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amount refers to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total cost</td>
<td>N</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>Not Specified</td>
<td>NA</td>
<td>N</td>
<td>Not Specified</td>
</tr>
<tr>
<td>Insurance info and/or covered cost</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Out-of-pocket cost</td>
<td>Y</td>
<td>NA</td>
<td>NA</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
<td>Not Specified</td>
<td>NA</td>
<td>Y</td>
<td>Not Specified</td>
</tr>
<tr>
<td>Payment from others</td>
<td>N</td>
<td>NA</td>
<td>NA</td>
<td>Y</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>NA</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>Cross-Survey Comparison</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental Care</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Cost of Dental Care</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.11 Satisfaction and Treatment Adherence

2.11.1 Measurement

The HRS and IFLS ask how much respondents are satisfied with the health utilization they received during a certain reference period.

The HRS, CHARLS, JSTAR, and MHAS ask whether respondents have not sought or adhered with prescribed treatments during a certain reference period.

2.11.2 Respondent

Questions about satisfaction and treatment adherence are answered by each individual interviewed by the survey across all studies.

2.11.3 Unit of Observation

Questions about satisfaction and treatment adherence are reported at the individual level across all studies.

2.11.4 Reference Period

In the HRS, questions about satisfaction with health care services do not specify the reference period. In the IFLS, they refer to the last 4 weeks.

In the HRS, questions about treatment adherence refer to the last 2 years, while those of CHARLS and JSTAR refer to the past year and 12 months, respectively. MHAS refers to the last year
for adherence with medication treatment and to the last two years when asking about avoiding seeing a doctor.

2.11.5 Comparability

The HRS asks whether respondents are “satisfied with the quality, cost, and convenience of your health care.” The IFLS asks whether respondents are satisfied with the services that were provided by the most recently visited facility in the last 4 weeks.

The HRS measures treatment adherence by asking whether respondents “ended up taking less medication than was prescribed because of the cost.” Similarly, the CHARLS questionnaire asks whether respondents did not seek hospitalization or left an hospital before complete recovery as well as the reasons for doing so. The JSTAR asks whether respondents postponed doctor visits and the reasons for doing so. The MHAS asks whether respondents stopped taking medication because of the cost or had a serious health problem but did not see a doctor.

Measures of satisfaction with health care services are not comparable between HRS and IFLS since the elicited concepts are different and so are the reference periods.

While single measures of treatment adherence are not directly comparable across surveys, an indicator for whether the respondent has experienced difficulty in adhering with prescribed treatment and required doctor visits.
Table 11. Summary of Questions about Satisfaction and Treatment Adherence

<table>
<thead>
<tr>
<th>Unit of Observation</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLooSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference Period</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction</td>
<td>Not Specified</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>4 weeks</td>
<td>NA</td>
</tr>
<tr>
<td>Treatment Adherence</td>
<td>The last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>GL in the past year</td>
<td>Past 12 month</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Categories/Measure Type</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction with</td>
<td>the quality, cost, and convenience of your health care</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>the services that were provided by this facility</td>
<td>NA</td>
</tr>
<tr>
<td>Type of treatment adherence</td>
<td>Ending up taking less medication than was prescribed for you because of the cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>not seeking hospitalization/leave the hospital before you were recovered</td>
<td>postpone doctor visit</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Cross-Survey Comparison</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
</tr>
<tr>
<td>Less Utilization</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.12 Travel and Other Costs

2.12.1 Measurement

The CHARLS, JSTAR and IFLS ask about travel time and cost of visiting a health care facility.

The HRS, KLoSA and TILDA ask about other medical related out-of-pocket costs.

2.12.2 Respondent

Questions about travel and other costs are answered by each individual interviewed by the survey across all studies.

2.12.3 Unit of Observation

Questions about travel and other costs are reported at the individual level across all studies.

2.12.4 Reference Period

In the CHARLS and JSTAR, questions about travel time and cost refer to the past year; in the IFLS, they refer to the past 4 weeks.

In the HRS and KLoSA [W2-W4], questions about any other out-of-pocket costs refer to the last 2 years; in the KLoSA [W1] and TILDA they refer to the last 12 months.

2.12.5 Comparability

Even if reference periods are different, the CHARLS, JSTAR and IFLS elicit travel time and cost per trip, so these measures are reasonable comparable across surveys. Contextual differences as
well as difference in question wording and reference periods make it very difficult to compare “other” medical-related costs across surveys.

Table 12. Summary of Questions about Travel and Other Costs

<table>
<thead>
<tr>
<th>Travel</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Reference Period</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel Time and Cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>past year</td>
<td>past year</td>
<td>NA</td>
<td>the last 4 weeks</td>
<td>NA</td>
</tr>
<tr>
<td>Other out-of-pocket costs</td>
<td>the last two years</td>
<td>NA</td>
<td>NA</td>
<td>the past 12 months</td>
<td>Two years</td>
<td>NA</td>
<td>NA</td>
<td>the last 12 months</td>
<td>NA</td>
</tr>
<tr>
<td>Categories/Measure Type</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel Destination</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>The most recent outpatient visit/ the most recent hospitalization visit</td>
<td>NA</td>
<td>the facility the respondents most visited in the last 4 weeks</td>
<td>NA</td>
</tr>
<tr>
<td>Ask Vehicle type</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>NA</td>
<td>N</td>
</tr>
<tr>
<td>Travel time/cost per trip</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>One way</td>
<td>Round trip</td>
<td>NA</td>
<td>One way</td>
</tr>
<tr>
<td>Type of other out-of-pocket costs</td>
<td>medicati ons, special food, equipment such as a special bed or chair, visits by health professionals, or other costs</td>
<td>NA</td>
<td>NA</td>
<td>a medical assistance device or equipment, such as hearing aids or wheelchairs</td>
<td>medical assistanc e equipment for treatment purposes, such as hearing aids or wheelchairs</td>
<td>NA</td>
<td>NA</td>
<td>any other health expenses</td>
<td>NA</td>
</tr>
</tbody>
</table>

Cross-Survey Comparison

<table>
<thead>
<tr>
<th>Travel time and cost</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>C</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
</tr>
<tr>
<td>Travel Cost</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>C</td>
<td>D</td>
<td>NA</td>
<td>D</td>
</tr>
<tr>
<td>Any other out of pocket cost</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>D</td>
<td>D</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
2.13 Help from others

2.13.1 Measurement

The HRS and MHAS questionnaires contain specific questions for whether respondents received any help for their healthcare costs from others. KLoSA [W2-W4] elicits whether respondents received financial help from relatives for each type of health care expenditure, separately. The CHARLS asks whether respondents received help to pay their health insurance premium.

2.13.2 Respondent

Questions about help from others are answered by each individual interviewed by the survey across all studies.

2.13.3 Unit of Observation

Questions about help from others are reported at the individual- and partner-level in the HRS and MHAS, and at the individual-level in the KLoSA and CHARLS.

2.13.4 Reference Period

In the HRS, questions about help from others refer to the last 2 years, while in the MHAS they refer to the last year. In the KLoSA they refer to the time since the previous interview. In the CHARLS the reference period is not explicitly specified.
2.13.5 Comparability

The HRS elicits whether the respondent or his/her partner received help to pay the cost of health care and/or of health insurance from child/child-in-law/grandchild, other relatives, and someone else. The MHAS asks “who paid most of the out-of-pocket medical cost” in the last year. The list of options features son/daughter, son/daughter-in-law, grandchild, father/mother, other relative and other person. The KLoSA[W2-W4] elicits whether the respondent received help from relatives for each type of health care expenditure, separately. The CHARLS only asks whether the respondent received help to pay health insurance premium.

Although differences in question wording and reference periods make cross-survey comparisons difficult, a reasonable comparable measure of whether respondents recently received any financial help from others towards paying their health care costs can be constructed for the HRS, KLoSA and MHAS. Comparison of monetary values is not recommended, instead.

Table 13. Summary of Questions about Help from Others

<table>
<thead>
<tr>
<th>Help from others</th>
<th>HRS</th>
<th>ELSA</th>
<th>SHARE</th>
<th>KLoSA</th>
<th>KLoSA [W2-W4]</th>
<th>CHARLS</th>
<th>JSTAR</th>
<th>TILDA</th>
<th>IFLS</th>
<th>MHAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit of Observation</td>
<td>Respondent and partner</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Individually</td>
<td>Individually</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Respondent and partner</td>
</tr>
<tr>
<td>Reference Period</td>
<td>Last 2 years</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>Time since previous interview</td>
<td>Not Specified</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>The last year</td>
</tr>
<tr>
<td>Categories/Measure Type</td>
<td>Type of Help</td>
<td>health care costs/health insurance or for long-term care insurance</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>health insurance premium</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Cross-Survey Comparison</td>
<td>Help from others</td>
<td>C</td>
<td>NA</td>
<td>NA</td>
<td>C</td>
<td>NA</td>
<td>D</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

C: Comparable, C2: Comparable among C2, D: Different (Not comparable with others), NA: Not Asked, NS: Not Specified
3. Questionnaire

To facilitate the cross-country comparisons, this section lists out all health care utilization questions and texts in each survey. At the end of this section, Table 9 lists the variable names in each survey.

3.1 HRS

3.1.1 Hospital Stay

MN099: The next questions are about health care you have received. Since previous interview or in the last two years, have you been a patient in a hospital overnight?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN100: How many different times were you a patient in a hospital overnight, since previous interview or in the last two years?

Answer: number of times; 98. DK (Don't Know); NA (Not Ascertained); 99. RF (Refused)

MN101: Altogether how many nights were you a patient in the hospital, since previous interview or in the last two years?

Answer: number of nights; 998. DK (Don't Know); NA (Not Ascertained); 999. RF (Refused)

MN102: Were the costs for your hospital stay(s) completely covered by health insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)
MN106: About how much did you pay out-of-pocket for hospital bills since previous interview or in the last two years?

Answer: Actual Value (0 – 479000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)

3.1.2 Nursing Home Stay

MN114: Since previous interview or in the last two years, have you been a patient overnight in a nursing home, convalescent home, or other long-term health care facility?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN115: How many times, including now, have you been a patient in a nursing home or other long-term care facility since previous interview or in the last two years?

Answer: number of times (From 1 to 95); 98. DK (Don't Know); NA (Not Ascertained); 99. RF (Refused)

MN116: Altogether, how many nights or months have you been a patient in a nursing home since previous interview or in the last two years?

Answer: number of nights (From 0 to 830); 996; Continuous since entered; 998. DK (Don't Know); NA (Not Ascertained); 999. RF (Refused)
MN118: Have the costs for your nursing home stay(s) been completely covered by insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN119: About how much did you pay out-of-pocket for nursing home bills since previous interview or in the last two years?

Answer: Actual Value (0 – 288000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)

MN124: In what year did you go into the nursing home or health care facility?

Answer: Actual Value (From 1992 to 2011); 9998. DK (Don't Know); NA (Not Ascertained); 9999. RF (Refused)

MN123: What month was that?

Answer: Actual Value (Janaury-December); 13. Winter; 14. Spring; 15. Summer; 16. Fall; 98. DK (Don't Know); NA (Not Ascertained); 99. RF (Refused)
3.1.3 Doctor Visit and Outpatient Care

MN150: Do you think you have seen a medical doctor about your health at least once since previous interview or in the last two years?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN147: Aside from any hospital stays, outpatient surgery, hospital stays and outpatient surgery, how many times have you seen or talked to a medical doctor about your health, including emergency room, clinic visits, or house calls since previous interview or in the last two years?

Answer: number of times (From 0 to 990); 998. DK (Don't Know); NA (Not Ascertained); 999. RF (Refused)

MN152: Were the costs for your doctor or clinic visit(s) completely covered by health insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN156: About how much did you pay out-of-pocket for doctor or clinic visits since previous interview or in the last two years?
3.1.4 Alternative Medicine Care

None

3.1.5 Home Health Care

MN189: Since previous interview or in the last two years, has any medically-trained person come to your home to help you, yourself?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN190: Were the costs of your home medical care completely covered by health insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN194: About how much did you pay out-of-pocket for in-home medical care since previous interview or in the last two years?

Answer: Actual Value (0 – 70000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)
3.1.6 Personal Care, Home Help, and Meals on Wheels

MG015: Does anyone ever help you dress? Exclude any difficulties that you expect to last less than three months.

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MG020: Does anyone ever help you get across a room?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MG022: Does anyone ever help you bathe?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MG024: Does anyone ever help you eat?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MG029: Does anyone ever help you get in or out of bed?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)
MG031: Does anyone ever help you use the toilet?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MG070: [Let's think for a moment about the help you receive that we just talked about. First, / Next, ] the help from [HELPER WHO LOOP]. During the last month, on about how many days did [HELPER WHO LOOP] help you?

Answer: Days in last month; Days per week; Every day; 96. Out of Range; 98. DK (Don't Know); NA (Not Ascertained); 99. RF (Refused);

MG073: On the days [HELPER WHO LOOP] helps you, about how many hours per day is that?

Answer: the number of hour; 98. DK (Don't Know); NA (Not Ascertained); 99. RF (Refused);

MG078: How much did you [and your husband/wife/partner/ ] end up paying [HELPER WHO LOOP] for the last month?

Answer: Actual Value (0 – 10000); 99998. DK (Don't Know); NA (Not Ascertained); 99999. RF (Refused)
3.1.8 Preventive Care

MC109: In the last two years, have you had any of the following medical tests or procedures?

A flu shot?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

MC110: In the last two years, have you had any of the following medical tests or procedures?

A blood test for cholesterol?

MC111: In the last two years, have you had any of the following medical tests or procedures?

(If R is female) Do you check your breasts for lumps monthly?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

MC112: In the last two years, have you had any of the following medical tests or procedures?

(If R is female) Did you have a mammogram or x-ray of the breast, [to search for cancer since [the last two years]/to search for cancer in the last two years]?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

MC113: In the last two years, have you had any of the following medical tests or procedures?
(If R is female) A pap smear?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

MC114: In the last two years, have you had any of the following medical tests or procedures?)

(If R is male) An examination of your prostate to screen for cancer?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

3.1.9 Regular Prescription Medication

MN175: Do you regularly take prescription medications?

Answer: 1. YES; 5. NO; 7. MEDICATIONS KNOWN (assigned); 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN176: Have the costs of your prescription medications been completely covered by health insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN180: On average, about how much have you paid out-of-pocket per month for these prescriptions since previous interview or in the last two years?
3.1.10 Outpatient Surgery

MN134: Since previous interview or in the last two years, have you had outpatient surgery?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN135: Were the expenses for your outpatient surgery completely covered by health insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN139: About how much did you pay out-of-pocket for outpatient surgery since previous interview or in the last two years?

Answer: Actual Value (0 – 40000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)
3.1.11 Dental Care

MN164: Since previous interview or in the last two years, have you seen a dentist for dental care, including dentures?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN165: Were your dental expenses completely covered by insurance, mostly covered, only partially covered, or not covered at all by insurance?

Answer: 1. COMPLETELY COVERED; 2. MOSTLY COVERED; 3. PARTIALLY COVERED; 5. NOT COVERED AT ALL; 7. [VOL] COSTS NOT SETTLED YET; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN168: About how much did you pay out-of-pocket for dental bills since previous interview or in the last two years?

Answer: Actual Value (0 – 60000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)

3.1.12 Satisfaction and Treatment Adherence

MN235: Now, thinking about the quality, cost, and convenience of your health care, altogether would you say that you are very satisfied, somewhat satisfied, or not satisfied at all with your health care?
Answer: 1. VERY SATISFIED; 3. SOMEWHAT SATISFIED; 5. NOT SATISFIED AT ALL; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused);

MN188: Sometimes people delay taking medication or filling prescriptions because of the cost. At any time [since R's LAST IW MONTH, YEAR/in the last two years] have you ended up taking less medication than was prescribed for you because of the cost?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

3.1.13 Travel and Other Costs

MN202: Since previous interview or in the last two years, did you use any special facility or service which we haven't talked about, such as: an adult care center, a social worker, an outpatient rehabilitation program, physical therapy, or transportation for the elderly or disabled?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN332: Since previous interview or in the last two years, aside from the medical expenses we already mentioned, have you had any other out-of-pocket expenses, that is, expenses not covered by insurance, such as medications, special food, equipment such as a special bed or chair, visits by health professionals, or other costs?
MN333: About how much did you pay out-of-pocket for these expenses since previous interview or in the last two years?

Answer: Actual Value (0 – 75000); 9999998. DK (Don't Know); NA (Not Ascertained); 9999999. RF (Refused)

3.1.14 Help from Others

MN212: Besides any costs covered by insurance, has anyone helped you or your partner pay for your health care costs since previous interview or in the last two years, or helped you pay the cost of health insurance or for long-term care insurance?

Answer: 1. YES; 5. NO; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)

MN213: Is that a child or other relative of yours and partner's, or is that someone else?

Answer: 1. CHILD/CHILD-IN-LAW/GRANDCHILD; 2. OTHER RELATIVE; 3. SOMEONE ELSE; 8. DK (Don't Know); NA (Not Ascertained); 9. RF (Refused)
3.2 ELSA

3.2.1 Hospital Stay
None

3.2.2 Nursing Home Stay
None

3.2.3 Doctor Visit and Outpatient Care
None

3.2.4 Alternative Medicine Care
None

3.2.5 Home Health Care
None

3.2.6 Personal Care, Home Help, and Meals on Wheels

HeHpa[W1-W5]: Thinking about the activities that you have problems with, does anyone ever help you with these activities (including your partner or other people in your household)?

Answer: 1. YES; 2. NO;
HEHPPD[W4-W5]: About how often did you have privately paid help in the last month?

Answer: 1. Every day or nearly every day; 2. Two or three times a week; 3. Once a week; 4. Less often; 96 Not at all;

HECLUB[W3-W5]: Have you ever used the following services [CODE ALL THAT APPLY.]

Answer: 1. Lunch club?; 2. Day care centre?; 3. Meals on wheels?; 96 None of these

3.2.8 Preventive Care

HEBPCHK[W2-W6]: In the past year, has any doctor or nurse checked your blood pressure?

Answer: 1. Yes; 2. No;

HEBOWC[W5-W6]: Have you ever completed a home testing kit for screening bowel cancer?

Answer: 1. Yes; 2. No;

HEMAM[W5-W6]: Have you ever had a mammogram (x-ray of your breasts)?

Answer: 1. Yes; 2. No;
HEPRO[W5-W6]: Have you ever had a prostate-specific antigen (PSA) blood test or other examination to screen for prostate cancer?

Answer: 1 Yes; 2 No;

3.2.9 Regular Prescription Medication
None

3.2.10 Outpatient Surgery
None

3.2.11 Dental Care
None

3.2.12 Satisfaction and Treatment Adherence
None

3.2.13 Travel and Other Costs
None
3.2.14 Help from Others
None

3.3 SHARE

3.3.1 Hospital Stay

HC012: During the last twelve months, have you been in a hospital overnight? Please consider stays in medical, surgical, psychiatric or in any other specialized wards.

Answer: 1. YES; 5. NO;

HC013: How often have you been a patient in a hospital overnight during the last twelve months?
Answer: number of times (1…10)

HC014: How many nights altogether have you spent in hospitals during the last twelve months?
Answer: number of nights (1…365)

HC068[W2 only]: Who finally pays for [medical visits to a general practitioner/medical visits to specialists, when prescribed by a general practitioner/medical visits to specialists, when not prescribed by a general practitioner/medical visits to any doctor of your choice/dental care/prescribed drugs/hospitalisations in public hospitals/hospitalisations in private hospitals/stays in a nursing home/nursing care at home in case of chronic disease or disability]? (Yourself only, mostly yourself, mostly your health insurance, or your health insurance only)?
Answer: 1. Entirely paid by respondent; 2. Mostly paid by respondent; 3. Mostly paid, or reimbursed, by social insurances and/or respondent's health insurances; 4. Entirely paid, or reimbursed, by social insurances and/or respondent's health insurances;

HC045 [W1 & W2 only]: Not counting health insurance premiums or reimbursements from employers, about how much did you pay out-of-pocket for all your hospital inpatient care in the last twelve months?
Answer: Actual Amount

3.3.2 Nursing Home Stay

HC029: During the last twelve months, have you been in a nursing home overnight? (In wave 4, there is an explanation about nursing home)
Answer: 1. Yes, temporarily; 3. Yes, permanently; 5. No;

HC030: How often have you been in a nursing home overnight during the last twelve months?
Answer: number of times (1…365)

HC031: During the last 12 months, how many weeks altogether did you stay in a nursing home?
Answer: number of times (1…52)
HC068[W2 only]: Who finally pays for [medical visits to a general practitioner/medical visits to specialists, when prescribed by a general practitioner/medical visits to specialists, when not prescribed by a general practitioner/medical visits to any doctor of your choice/dental care/prescribed drugs/hospitalisations in public hospitals/hospitalisations in private hospitals/stays in a nursing home/nursing care at home in case of chronic disease or disability]? (Yourself only, mostly yourself, mostly your health insurance, or your health insurance only)?

Answer: 1. Entirely paid by respondent ; 2. Mostly paid by respondent ; 3. Mostly paid, or reimbursed, by social insurances and/or respondent's health insurances ; 4. Entirely paid, or reimbursed, by social insurances and/or respondent's health insurances;

HC051[W1 & W2 only]: Not counting health insurance premiums, about how much did you pay out-of-pocket for all your care in nursing homes, in day-care centers, and for all home care services in the last twelve months?

Answer: Actual Amount

3.3.3 Doctor Visit and Outpatient Care

HC002: During the last twelve months, about how many times in total have you seen or talked to a medical doctor about your health? Please exclude dentist visits and hospital stays, but include emergency room or outpatient clinic visits

Answer: number of visit (0...98)
HC003: How many of these contacts were with a general practitioner or with a doctor at your health care center?

Answer: number of visit (0...98)

HC068[W2 only]: Who finally pays for [medical visits to a general practitioner/medical visits to specialists, when prescribed by a general practitioner/medical visits to specialists, when not prescribed by a general practitioner/medical visits to any doctor of your choice/dental care/prescribed drugs/hospitalisations in public hospitals/hospitalisations in private hospitals/stays in a nursing home/nursing care at home in case of chronic disease or disability]? (Yourself only, mostly yourself, mostly your health insurance, or your health insurance only)?

Answer: 1. Entirely paid by respondent; 2. Mostly paid by respondent; 3. Mostly paid, or reimbursed, by social insurances and/or respondent's health insurances; 4. Entirely paid, or reimbursed, by social insurances and/or respondent's health insurances;

HC047[W1 & W2 only]: Not counting health insurance premiums or reimbursements from employers, about how much did you pay out-of-pocket for all your outpatient care, in the last twelve months?

Answer: Actual Amount

3.3.4 Alternative Medicine Care

None
3.3.5 Home Health Care

HC032: Please look at card 16 (17 in wave 2). During the last twelve months, did you receive in your own home any of the kinds of care mentioned on this card? (Not in wave 4)

Answer: 1. Professional or paid nursing or personal care; 2. Professional or paid home help, for domestic tasks that you could not perform yourself due to health problems; 3. Meals-on-wheels; 96. None of these

HC033: During the last twelve months, how many weeks did you receive professional or paid nursing care in your own home? (Not in wave 4)

Answer: number of week (1…52)

HC034: On average, how many hours per week did you receive professional or paid nursing care at home? (Not in wave 4)

Answer: number of hour (1…158)

HC051[W1 & W2 only]: Not counting health insurance premiums, about how much did you pay out-of-pocket for all your care in nursing homes, in day-care centers, and for all home care services in the last twelve months?

Answer: Actual Amount
3.3.6 Personal Care, Home Help, and Meals on Wheels

HC035: During the last twelve months, how many weeks did you receive professional or paid help for domestic tasks at home because you could not perform them yourself due to health problems?

(IWER: COUNT 4 WEEKS FOR EACH FULL MONTH; COUNT 1 FOR PART OF ONE WEEK)

Answer: number of week (1…52)

HC036: On average, how many hours per week did you receive such professional or paid help?

(IWER: ROUND UP TO FULL HOURS)

Answer: number of hour (1…158)

HC037: During the last twelve months, how many weeks did you receive meals-on-wheels, because you could not prepare meals due to health problems?

(IWER: COUNT 4 WEEKS FOR EACH FULL MONTH)

Answer: number of week (1…52)

HC051[W1 & W2 only]: Not counting health insurance premiums, about how much did you pay out-of-pocket for all your care in nursing homes, in day-care centers, and for all home care services in the last twelve months?

Answer: Actual Amount
3.3.8 Preventive Care

None

3.3.9 Regular Prescription Medication

None

3.3.10 Outpatient Surgery

HC023: During the last twelve months, have you had outpatient surgery? (Not in Wave 4)

Answer: 1. Yes; 5. No

3.3.11 Dental Care

HC010: During the last twelve months, have you seen a dentist or a dental hygienist? (Not in wave4)

Answer: 1. Yes; 5. No

3.3.12 Satisfaction and Treatment Adherence

None
3.3.13 Travel and Other Costs
None

3.3.14 Help from Others
None

3.4 KLoSA

3.4.1 Hospital Stay

Cc17[W1]: The next questions are about health services you received in the past year. Have you been a patient overnight in a hospital, nursing home, convalescent home, or other long-term health care facility during the past 12 months? If yes, how many times have you been an overnight patient last year?
IWER: Hospitalization for the purpose of long-term stay rather than medical treatment is excluded.
Answer: Number of Times (range: 0~52)

Cc18[W1]: Please recall the last time you were hospitalized last year. Which kind of facilities have you been in?
Answer: 1. Hospital; 5. Long-term care hospital;

Cc19[W1]: How many nights did you stay in this hospital?
Answer: Number of Nights (range: 1~365)
Cc20[W1]: About how much did you, yourself, pay out-of-pocket for this hospitalization? Please exclude the amount covered by private health insurance or other family members paid for. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)

C318[W2-W4]: Were you ever hospitalized at a hospital, nursing hospital, convalescence clinic, or any other long-term health care facilities after the previous interview? If so, how many times were you hospitalized? (unit: a time)

Answer: time [range:0~52]

C320[W2-W4]: How many days did you stay? (unit: day)

Answer: days [range:1~2190]

C321[W2-W4]: At that time, how much did you pay for your hospitalization (medical treatment)? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~9997); Don’t know; Refuse to answer

C322[W2-W4]: How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won)
Categories are ① out-of-pocket payments (C322a), ② payments by relatives including children and parents (C322b), ③ payments reimbursed by private health insurances (C322c).

Answer: Actual value (range: 0~9997);

3.4.2 Nursing Home Stay

None

3.4.3 Doctor Visit and Outpatient Care

Cc32[W1]: (Excluding hospitalization and the visits to a dentist, public health clinic, and oriental health clinic) In the past 12 months, have you ever visited a doctor’s office, including emergency room and hospital outpatient office? If you did, how many times have you visited last year?

Answer: Number of Times (range: 0~365)

Cc33[W1]: About how much did you yourself pay out-of-pocket for the visit last year? Please do not include the amount covered by private insurance plan or other family members such as children or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)
C337: Except for your visits to oriental medicine clinics, public health clinics and dental clinics, and hospitalization, have you been to a local clinic or hospital as an outpatient or to an emergency room since the previous interview? If so, how many times did you go there? (unit: a time)

Answer: time [range:0~2190]

C338: How much did you pay for your outpatient care? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~9997); Don't know; Refuse to answer

C339: You have said that you paid [C338] MW (10,000 Korean won) for your outpatient care. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C339a), ② payments by relatives including children and parents (C339b), ③ payments reimbursed by private health insurances (C339c).

Answer: Actual value (range: 0~9997);
3.4.4 Alternative Medicine Care

Cc30[W1]: In the past 12 months, have you seen a doctor at an oriental clinic? If you did, how many
times?

Answer: Number of Times

Cc31[W1]: How much did you, yourself, pay out-of-pocket for oriental clinic bills last year? Please do
not include the amount covered by private insurance plan or other family members such as children
or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)

C334[W2-W4]: Have you ever visited an oriental medicine clinic since the previous interview? If so,
how many times did you go to an oriental medicine clinic? (unit: a time)

Answer: time [range:0~2190]

C335[W2-W4]: You have said that you went to an oriental medicine clinic [C334] times since the
previous interview. If so, how much did you pay for your medical care including the purchase of
oriental medicine? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~9997); Don’t know; Refuse to answer
C336[W2-W4]: You have said that you paid [C335] MW (10,000 Korean won) for care at the oriental medicine clinic including the purchase of oriental medicine. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C336a), ② payments by relatives including children and parents (C336b), ③ payments reimbursed by private health insurances (C336c).

Answer: Actual value (range: 0~9997);

3.4.5 Home Health Care

Cc34[W1]: In the past 12 months, has any doctors, nurses, or other medically trained person come to your home and provided care? If so, how many times did the medically trained person come to your home and provide care last year?

Answer: Number of Times (range: 0 ~ 365)

Cc35[W1]: How much did you pay out-of-pocket for in-home medical care last year? Please do not include the amount covered by private insurance plan or other family members such as children or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)
C340[W2-W4]: Has a health care provider visited your house to give you medical treatment since the previous interview? If so, how many times did you receive such a house call? (unit: a time)

Answer: time [range:0~2190]

C341[W2-W4]: You have said that you received [C340] house calls since the previous interview. How much did you pay for your house calls? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~9997); Don’t know; Refuse to answer

C342[W2-W4]: You have said that you paid [C341] MW (10,000 Korean won) for your house calls. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C342a), ② payments by relatives including children and parents (C342b), ③ payments reimbursed by private health insurances (C342c).

Answer: Actual value (range: 0~9997);
3.4.6 Personal Care, Home Help, and Meals on Wheels

Cb18[W1]: Who most often helps you with (dressing, washing, bathing, eating, getting out of bed, using toilet, controlling urination and defecation, grooming, doing the chores, preparing hot meals, going laundry, going out, using transportations, shopping, managing money, making phone calls, taking medications)? (Select from the list displayed by CAPI)


Cb19[W1]: During the last month, on about how many days did helper’s name chosen from Cb18 help you?

Answer: the number of days (range: 1~31)

Cb20[W1]: On the days helper’s name chosen from Cb18 helps you, about how many hours per day is that? IWER: less than an hour=1

Answer: the number of hours (range: 1~24)

Cb30[W1]: About how much in total did you pay for the help during the past month?
C218[W2-W4]: If you need help with activities of daily living, name the five people who help you the most in order. Who is the person that comes [1st/2nd/..] in helping you? Please state the person's name or relationship with you.


C219[W2-W4]: How many days did [name selected in C218] help you during the past one month? (unit: a day)

Answer: the number of days (range: 1~31)

C220[W2-W4]: How many hours per day does [name selected in C218] usually help you? (unit: an hour) [IWER: less than an hour=1]

Answer: the number of hours (range: 1~24)
C222[W2-W4]: How much did you pay [name selected in C218] in the past one month? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~997); Don’t know; Refuse to answer

3.4.8 Preventive Care

Cc13[W1]: Have you received the basic medical checkup covered by the National Health Insurance or Medical Aid Program in the past 2 years?

Answer: 1. Yes; 5. No;

Cc16[W1]: Have you had any other medical checkup using your out-of-pocket money in the past two years?

Answer: 1. Yes; 5. No;

C313[W2-W4]: Have you received the basic medical checkup covered by the National Health Insurance System or the Medical Aid System in the past two years?

Answer: 1. Yes; 5. No;
C317[W2-W4]: Have you had any other medical checkup using your out-of-pocket money in the past two years?

Answer: 1. Yes; 5. No;

3.4.9 Regular Prescription Medication

Cc36[W1]: In the past 12 months, have you regularly take prescription medication?

Answer: 1. Yes; 5. No

Cc37[W1]: About how much have you paid out-of-pocket for these prescriptions last year? Please do not include the amount covered by private insurance plan or other family members such as children or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)

C343[W2-W4]: Have you ever taken prescription medications on a regular basis since the previous interview? (For example, long term medications such as antidiabetics or hypertension medicine)

Answer: 1. Yes; 5. No

C344[W2-W4]: How much did you pay for your regular prescription medications since the previous interview? (unit: 10,000 Korean won)
C345[W2-W4]: You have said that you paid [C344] MW (10,000 Korean won) for your prescription medications. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C345a), ② payments by relatives including children and parents (C345b), ③ payments reimbursed by private health insurances (C345c).

Answer: Actual value (range: 0~9997);

3.4.10 Outpatient Surgery

None

3.4.11 Dental Care

Cc27[W1]: In the last 12 months, have you seen a dentist for dental care, including dentures? If you did, how many times have you seen a dentist during the last year?

Answer: Number of Times (range: 0~365)
Cc28[W1]: About how much did you pay out-of-pocket for dental bills last year? Please do not include the amount covered by private insurance plan or other family members such as children or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)

C330[W2-W4]: Have you ever received dental care (including denture care) since the previous interview? If so, how many times did you go to a dental hospital/clinic? (unit: a time)

Answer: time [range:0~2190]

C331[W2-W4]: You have said that you received dental care [C330] times since the previous interview. If so, how much did you pay for your dental care? (unit: 10,000 Korean won)

Answer: Actual value (range: 0~9997); Don’t know; Refuse to answer

C332[W2-W4]: You have said that you paid [C331] MW (10,000 Korean won) for your dental care. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C332a), ② payments by relatives including children and parents (C332b), ③ payments reimbursed by private health insurances (C332c).
3.4.12 Satisfaction and Treatment Adherence

None

3.4.13 Travel and Other Costs

Cc38[W1]: In the past 12 months, have you purchased a medical assistance device or equipment, such as hearing aids or wheelchairs?

Answer: 1. YES; 5. NO;

Cc39[W1]: How much in total did you pay out-of-pocket for these equipments last year? Please do not include the amount covered by private insurance plan or other family members such as children or parents. (Unit: 10,000 Korean Won)

Answer: Actual value (range: 0~9997)

C346[W2-W4]: Have you ever purchased (leased) any medical assistance equipment since the previous interview? For example, it refers to medical assistance equipment for treatment purposes, such as hearing aids or wheelchairs.

Answer: 1. YES; 5. NO;
C348[W2-W4]: You have said that you paid [C347] MW (10,000 Korean won) for purchasing (leasing) the medical assistance equipment. How much did you pay out-of-pocket? Also, how much did your relatives or private health insurances pay on behalf of you? Please include in the private health insurance category any payments that you made and were reimbursed by private health insurances. (unit: 10,000 Korean won) Categories are ① out-of-pocket payments (C348a), ② payments by relatives including children and parents (C348b), ③ payments reimbursed by private health insurances (C348c).

Answer: Actual value (range: 0~9997);

3.4.14 Help from Others

Cc05. Who is currently paying for your health insurance premium?


C305[W2-W4]: Who is currently paying your health insurance premiums?

3.5 CHARLS

3.5.1 Hospital Stay

EE003: Have you received inpatient care in the past year?
Answer: 1. Yes; 2. No;

EE004: How many times have you received inpatient care during the past year?
Answer: Actual Times;

EE016: How many nights were you hospitalized there?
Answer: Number of Nights

EE031: What insurance did you use or will you use? (Circle all that apply)

EE005: What was the medical cost for all the hospitalizations you received during the past year?
(Only include fees paid to the hospital, including ward fees but excluding wages paid to a hired nurse, transportation costs, and accommodation costs for yourself or family members.)
Answer: 1. Total cost ____ (EE005_1) Yuan [Brackets 1500/3000/7000/15000/30000]; 2. Didn’t pay anything;

EE006:

Answer: 1. Self-paid part ____ (EE006_1) Yuan; 2. Didn’t pay anything.

3.5.2 Nursing Home Stay

None

3.5.3 Doctor Visit and Outpatient Care

ED001: In the last month have you visited a public hospital, private hospital, public health center, clinic, or health worker’s or doctor’s practice, or been visited by a health worker or doctor for outpatient care?

Answer: 1. Yes; 2. No;

ED005: How many times did you visit/been visited by a health worker or doctor for outpatient care during the last month?

Answer: Number of Times;
ED028: What insurance did you use or will you use? (Circle all that apply)


ED006: How much did all the visits to [ED004 answer] cost during the last month?

Answer: 1. Total cost ____ (ED006_1)Yuan; [Brackets 50/100/200/500/1000]; 2. Didn’t pay anything;

ED007:

Answer: 1. Self-paid part ____ (ED007_1)Yuan; [Brackets 50/100/200/500/1000]; 2. Didn’t pay anything;

3.5.4 Alternative Medicine Care

None
3.5.5 Home Health Care

ED012: Did the provider visit you at home?

Answer: 1. Yes; 2. No;

ED028: What insurance did you use or will you use?(Circle all that apply)


ED006: How much did all the visits to [ED004 answer] cost during the last month?

Answer: 1. Total cost _____(ED006_1)Yuan ; [Brackets50/100/200/500/1000]; 2. Didn’t pay anything ;

ED007:

Answer: 1. Self-paid part _____ (ED007_1)Yuan [Brackets50/100/200/500/1000]; 2. Didn’t pay anything;
3.5.6 Personal Care, Home Help, and Meals on Wheels

DB010_W2: Does anyone ever help you dress?

Answer: 1. Yes; 2. No;

DB011_W2: Does anyone ever help you bathe?

Answer: 1. Yes; 2. No;

DB012_W2: Does anyone ever help you eat?

Answer: 1. Yes; 2. No;

DB013_W2: Does anyone ever help you get in or out of bed?

Answer: 1. Yes; 2. No;

DB014_W2: Does anyone ever help you use the toilet?

Answer: 1. Yes; 2. No;

DB016_W2: Does anyone help you do household chores?
DB017_W2: Does anyone help you prepare hot meals?
Answer: 1. Yes; 2. No;

DB018_W2: Does anyone help you shop for groceries?
Answer: 1. Yes; 2. No;

DB019_W2: Does anyone help you manage your money?
Answer: 1. Yes; 2. No;

DB023: During the last month, on about how many days did [helper’s name chosen from DB022] help you?
Answer: the number of days (1..31)

DB024: On the days [helper’s name chosen from DB022 helps you, about how many hours per day is that?
Answer: the number of hours (1..24)
DB027: About how much in total did you pay (including value of the goods you gave them as repayment for their help) for the help during the past month?

Answer: ____ Yuan;

3.5.8 Preventive Care

EC001: When did you take the last physical examination?

[IWER: Mark the year using four digits. Take down the month as its actual number. For example, write January as 1 not 01, December as 12. If do not remember month, fill '0'.]

Answer: 1. 1900...2013 Year (EC001_1 )____0...12 Month (EC001_2 )____; 2. Didn’t ever take physical examination yet; 3. Didn’t take physical examination last two years;

3.5.9 Regular Prescription Medication

None

3.5.10 Outpatient Surgery

None
3.5.11 Dental Care

EH001[Only W2]: In the past year, have you seen a dentist for dental care, including dentures?

Answer: 1. Yes; 2. No;

EH006[Only in W2]: What insurance did you use?(Circle all that apply)


EH003[Only in W2]: What was the medical cost for all the dental care in the past year?

Answer: 1. Total cost _____Yuan; 2. Didn’t pay anything.

EH004[Only in W2]:

Answer: 1. Self-paid part ________Yuan; 2. Didn’t pay anything
3.5.12 Satisfaction and Treatment Adherence

EE001: In the past year, did a doctor suggest that you needed inpatient care but you did not get hospitalized?

Answer: 1. Yes; 2. No;

EE002: What’s the main reason for not seeking hospitalization?

Answer: 1. Not enough money; 2. Not willing to go to the hospital; 3. Felt that hospital was unlikely to cure problem/hospital quality poor; 4. Felt that care was unlikely to cure the problem/problem too serious; 5. No ward available; 6. Other;

EE022: Under what conditions did you leave the hospital?

Answer: 1. Fully recovered from illness, received doctor’s approval; 2. Didn’t recover from illness, but received doctor’s suggestion to leave; 3. Didn’t recover from illness, requested to leave without doctor’s suggestion; 4. Other reasons

EE023: Why did you want to leave the hospital before you were recovered?

Answer: 1. Can’t recover from illness; 2. Poor; 3. No space in the hospital; 4. Limited hospital conditions; 5. Poor quality and service from health care providers; 6. Other reasons;
3.5.13 Travel and Other Costs

ED014: What is the travel time (one-way) to that facility? How to go to the facility?


ED015: What was the total transportation cost to the facility (including fuel cost, one way trip)?

Answer: ____ RMB;

EE014: What is the travel time (one-way) to that facility? How to go to the facility?

Answer: 1. ____Minute[check range: 1-59]; 2. ____Hour;


EE015: What was the total transportation cost to the facility (including fuel cost, one way trip)?

Answer: ____ RMB;
3.5.14 Help from Others

EA007: Who pay the premium for you? (Choose all that apply)


3.6 JSTAR

3.6.1 Hospital Stay

H-016: In the past year, have you spent one or more nights in the hospital?

Answer: 1. Yes; 2. No; 3. Not sure; 4. Refused to answer

H-017: In the past year, about how many times were you hospitalized overnight? If you were released temporarily during a hospitalization and then returned, please count that as one incidence of hospitalization. [Interviewer: If hospitalized ten or more times, record as 10.]

Answer: 1. About ___ times; 2. Don’t know; 3. Refused to answer

H-018. In the past year, about how many nights did you spend in the hospital in all? A rough answer is fine– please answer to the best of your recollection. If you were released temporarily during a hospitalization and then returned, please do not include the nights you spent out of the hospital. [Interviewer: Record a number of days from 1~365.]

Answer: 1. About ___ days; 2. Don’t know; 3. Refused to answer

H-021: Did insurance cover your hospitalization costs during the past year, or did you have to pay it yourself? Please select the most appropriate answer from the following choices.
Answer: 1. All covered by insurance; 2. Mostly covered by insurance; 3. About half and half; 4. Mostly not covered by insurance; 5. None covered by insurance; 6. Don’t know

H-020: About how much did you pay in all during the past year for hospitalization? A rough estimate is fine. If you paid nothing, please answer 0.

Answer: 1. About ____ yen; 2. Don’t know; 3. Refused to answer

H-020[W2/W3 for 7 cities]: Have you been hospitalized overnight or longer during the past 12-month period?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-021[W2/W3 for 7 cities]: How many times have you been hospitalized overnight or longer during the past 12-month period? The number of times hospitalized should be counted as the number of times you were admitted to the hospital. If you were temporarily out of the hospital to return home between admission and discharge, please count this as a single episode of hospitalization.

Answer: 1. Approximately ___ time(s); 2. Don’t know; 3. Refused to answer

H-022[W2/W3 for 7 cities]: How many night(s) did you spend in the hospital in total during the past 12-month period? Could you please provide an approximate number to the best of your recollection? If you had been released temporarily between admission and discharge, please do not include the number of days spent out of the hospital.

Answer: 1. Approximately ___ night(s); 2. Don’t know; 3. Refused to answer
H-024[W2/W3 for 7 Cities]: Was the cost of the hospitalization covered by your insurance or was it outside of the coverage? Please select the most appropriate answer from the following choices.

Answer: 1. Entirely covered by insurance; 2. Mostly covered by insurance; 3. Roughly half covered by insurance; 4. Mostly outside of the insurance coverage; 5. Entirely outside of the insurance coverage; 6. Don't know; 7. Refused to answer

H-023[W2/W3 for 7 Cities]: How much did you pay in total for hospitalization during the past 12-month period? If there was no payment, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer

3.6.2 Nursing Home Stay

H-043: In the past year, have you received nursing care at a facility?

Answer: 1. Yes; 2. No, not at all; 3. Currently I have temporary care at home, but intend to move to a facility permanently; 4. Don’t know

H-045: About how long did you stay there in all? Please answer to the best of your recollection. If you left temporarily, please do not include the number of days you were at home. Please answer in number of days, weeks or months.
Answer: 1. About ___ days; 2. About ___ weeks; 3. About ___ months; 4. Don’t know; 5. Refused to answer

H-031: I would now like to ask about your insurance for nursing care. Have you been certified as eligible to receive nursing care?

Answer: 1. Yes; 2. No; 3. Currently applying; 4. Don’t know; 5. Refused to answer

H-040: For assistance and care services under the Long-term Care Insurance Program, how much did you pay out of pocket per month over the past 12-month period? If there was none, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer;

H-030[W2/W3 for 7 Cities]: In the past 12-month period, did you receive any assistance or care service at home or as a visitor at facilities? I will read a series of different types of services. Please tell me whether or not you received each of those services and, if you did, how often or for how many days

<table>
<thead>
<tr>
<th>Type of services</th>
<th>No</th>
<th>Yes</th>
<th>Number of time(s) per month or number of day(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>11H-030-1: Physical care</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>11H-030-2: Housekeeping assistance</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>11H-030-3: Home visit for bathing assistance</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>H-031 [W2/W3 for 7 Cities]: Were you or have you been institutionalized in any care facility for any length of time during the past 12-month period?</td>
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<tr>
<td>Answer: 1. Yes; 2. No; 3. Currently I have temporary care at home, but intend to move to a facility permanently; 4. Don’t know; 5. Refused to answer</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>H-033 [W2/W3 for 7 Cities]: How long did you stay in total? Please answer in terms of days, weeks, or months as appropriate to the best of your recollection. If you had been out of the facility temporarily, please exclude that period.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer: 1. Approximately ___ day(s); 2. Approximately ___ week(s); 3. Approximately ___ month(s); 4. Don’t know; 5. Refused to answer</td>
</tr>
</tbody>
</table>

| H-025 [W2/W3 for 7 Cities]: What percentage of medical costs are you required to pay out of pocket for services covered by public health insurance? |
H-034[W2/W3 for 7 Cities]: In the past 12-month period, how much did you spend per month on the purchase of care services and goods, other than those covered by your long-term care insurance? If there was none, please say so.

Answer: 1. Approximately _________ yen; 2. Don’t know; 3. Refused to answer;

3.6.3 Doctor Visit and Outpatient Care

H-006. In the past year, have you been an outpatient at a hospital or clinic or received acupuncture, moxibustion or bonesetting treatment at a clinic? Please do not include checkups, health consultations, or immunizations, visits to a dentist, or hospitalizations.

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-007-1-1. About how often do you go there? Please answer in number of times per week or month, etc. If you go almost every day, please answer 7 times per week.

Answer: 1. About ___ times per week; 2. About ___ times per month; 3. Other (Describe: ); 4. Don’t know; 5. Refused to answer
H-008: In the past year, did insurance cover all treatment you received at outpatient clinics or acupuncture, moxibustion, or bonesetting facilities, or did you have to pay for treatment yourself? Please select the most appropriate answer from the following choices.

Answer: 1. All covered by insurance; 2. Mostly covered by insurance; 3. About half and half; 4. Mostly not covered by insurance; 5. None covered by insurance; 6. Don’t know; 7. Refused to answer

H-007-2-6: Previously I was asking only about the facility you visited most frequently. Now I would like to ask about all facilities you visit regularly. In one month, about how much do you pay for outpatient clinic visits, acupuncture, moxibustion, and bonesetting treatments? A rough estimate is fine. Please include the mount you spend on prescription drugs. If you pay nothing, please answer 0.

Answer: 1. About ____ yen; 2. Don’t know; 3. Refused to answer

H-013[W2/W3 for 7 Cities]: In the past 12-month period, did you visit a doctor, acupuncturist, or bonesetter? Please exclude any hospital or clinic visits for non-treatment purposes (i.e., regular physical checkups, health consultations, immunizations, etc.), visits to a dentist, and cases of hospitalizations.

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer
H-014-1-1[W2/W3 for 7 Cities]: How often do you go there? Please answer in terms of the number of times per week, month, or year.

Answer: 1. Approximately ___ time(s) per week; 2. Approximately ___ time(s) per month; 3. Approximately ___ time(s) per year; 4. Other (Specify: __________); 5. Don't know; 6. Refused to answer

H-015[W2/W3 for 7 Cities]: Was the outpatient treatment covered by your insurance or was it outside of the coverage? Please select the most appropriate answer from the following choices.

Answer: 1. Entirely covered by insurance; 2. Mostly covered by insurance; 3. Roughly half is covered by insurance; 4. Mostly outside of the insurance coverage; 5. Entirely outside of the insurance coverage; 6. Don't know; 7. Refused to answer

H-014-2-3[W2/W3 for 7 Cities]: I have asked only about the facility which you visit most frequently. Now I would like to ask about all of the facilities which you visit regularly. How much did you pay on average per month for medical expenses and/or treatment at all of these facilities? If there was no payment, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer
3.6.4 Alternative Medicine Care

H-006. In the past year, have you been an outpatient at a hospital or clinic or received acupuncture, moxibustion or bonesetting treatment at a clinic? Please do not include checkups, health consultations, or immunizations, visits to a dentist, or hospitalizations.

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-007-1-1. About how often do you go there? Please answer in number of times per week or month, etc. If you go almost every day, please answer 7 times per week.

Answer: 1. About ___ times per week; 2. About ___ times per month; 3. Other (Describe: ); 4. Don’t know; 5. Refused to answer

H-008: In the past year, did insurance cover all treatment you received at outpatient clinics or acupuncture, moxibustion, or bonesetting facilities, or did you have to pay for treatment yourself?

Please select the most appropriate answer from the following choices.

Answer: 1. All covered by insurance; 2. Mostly covered by insurance; 3. About half and half; 4. Mostly not covered by insurance; 5. None covered by insurance; 6. Don’t know; 7. Refused to answer

H-007-2-6: Previously I was asking only about the facility you visited most frequently. Now I would like to ask about all facilities you visit regularly. In one month, about how much do you pay for
outpatient clinic visits, acupuncture, moxibustion, and bonesetting treatments? A rough estimate is fine. Please include the amount you spend on prescription drugs. If you pay nothing, please answer 0.

Answer: 1. About ____ yen; 2. Don’t know; 3. Refused to answer

H-013[W2/W3 for 7 Cities]: In the past 12-month period, did you visit a doctor, acupuncturist, or bonesetter? Please exclude any hospital or clinic visits for non-treatment purposes (i.e., regular physical checkups, health consultations, immunizations, etc.), visits to a dentist, and cases of hospitalizations.

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-014-1-1[W2/W3 for 7 Cities]: How often do you go there? Please answer in terms of the number of times per week, month, or year.

Answer: 1. Approximately ___ time(s) per week; 2. Approximately ___ time(s) per month; 3. Approximately ___ time(s) per year; 4. Other (Specify: __________); 5. Don’t know; 6. Refused to answer

H-015[W2/W3 for 7 Cities]: Was the outpatient treatment covered by your insurance or was it outside of the coverage? Please select the most appropriate answer from the following choices.
Answer: 1. Entirely covered by insurance; 2. Mostly covered by insurance; 3. Roughly half is covered by insurance; 4. Mostly outside of the insurance coverage; 5. Entirely outside of the insurance coverage; 6. Don't know; 7. Refused to answer

H-014-2-3[W2/W3 for 7 Cities]: I have asked only about the facility which you visit most frequently. Now I would like to ask about all of the facilities which you visit regularly. How much did you pay on average per month for medical expenses and/or treatment at all of these facilities? If there was no payment, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer

3.6.5 Home Health Care

H-042: In the past year, have you received any nursing care services in your home? I will now read a list of different types of nursing care services. Please tell me if you have received any of them.

<table>
<thead>
<tr>
<th>Service Used</th>
<th>Yes</th>
<th>No</th>
<th>Avg No. of Times/Mo.</th>
</tr>
</thead>
<tbody>
<tr>
<td>H-042-1. Physical care</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>H-042-2. Housework assistance</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>H-042-3. Bathing</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>H-042-4. Nurse visit</td>
<td>0</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>
H-030[W2/W3 for 7 Cities]: In the past 12-month period, did you receive any assistance or care service at home or as a visitor at facilities? I will read a series of different types of services. Please tell me whether or not you received each of those services and, if you did, how often or for how many days.

<table>
<thead>
<tr>
<th>Service Used</th>
<th>No</th>
<th>Yes</th>
<th>Number of time(s) per month or number of day(s)</th>
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<tbody>
<tr>
<td>H-030-1. Physical care</td>
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<td>1</td>
<td>____ time(s)</td>
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<tr>
<td>H-030-2. Housekeeping assistance</td>
<td>0</td>
<td>1</td>
<td>____ time(s)</td>
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<tr>
<td>H-030-3. Home visit for bathing assistance</td>
<td>0</td>
<td>1</td>
<td>____ time(s)</td>
</tr>
<tr>
<td>H-030-4. Nurse visit</td>
<td>0</td>
<td>1</td>
<td>____ time(s)</td>
</tr>
<tr>
<td>H-030-5. Home rehabilitation</td>
<td>0</td>
<td>1</td>
<td>____ time(s)</td>
</tr>
</tbody>
</table>
H-030-6. Rehabilitation at facilities (Day stay service) | 0 | 1 | ___ time(s)

H-030-7. Rehabilitation at care facilities (Day care service) | 0 | 1 | ___ time(s)

H-030-8. Short-term stay at care facilities | 0 | 1 | ___ days/yr

H-030-9. Did not use any of the above services | 0 | 1

H-030-10. Don’t know | 0 | 1

H-030-11. Refused to answerer | 0 | 1

H-034[W2/W3 for 7 Cities]: In the past 12-month period, how much did you spend per month on the purchase of care services and goods, other than those covered by your long-term care insurance? If there was none, please say so.

Answer: 1. Approximately _________ yen; 2. Don’t know; 3. Refused to answer;

3.6.6 Personal Care, Home Help, and Meals on Wheels

H-052: Next, I would like to ask about the care or help you might have received from others. During the past 12-month period, did you receive personal care from your family members, relatives, friends, or neighbors or was you helped by any of such persons with housekeeping, filling out documents, or worries and concerns?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer;
H-053-2: Over the past 12-month period, how often did you receive such personal care? Please select the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;

H-053: Let me ask more specifically. Did you receive personal care involving physical contact, such as help with changing clothes, bathing, eating, and going to the bathroom?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-053-2: Over the past 12-month period, how often did you receive such personal care? Please select the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;

H-054: Now I would like to ask about non-personal care. During the past 12-month period, did you receive help with household tasks, such as cooking, doing laundry, changing light bulbs, moving furniture, shopping, and tending the garden?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer
H-054-2: Over the past 12-month period, how often did you receive such help? Please select the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;

H-055: During the past 12-month period, did you receive help from anyone with filling out tax returns, pension-related forms, or other documents for financial or legal matters?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-055-2: Over the past 12-month period, how often did you receive such help? Please select the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;

H-037[W2/W3 for 7 Cities]: Next, I would like to ask about the care or help you might have received from others. During the past 12-month period, did you receive personal care from your family members, relatives, friends, or neighbors, or were you helped by any of such persons with non-personal tasks such as housekeeping and filling out documents?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer;
H-038[W2/W3 for 7 Cities]: Let me ask more specifically. Did you receive personal care involving physical contact, such as help with changing clothes, bathing, eating, and going to the bathroom?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer;

H-038-3[W2/W3 for 7 Cities]: Over the past 12-month period, how often did you receive such personal care? Please elect the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;

H-039[W2/W3 for 7 Cities]: During the past 12-month period, did you receive help with household tasks, such as cooking, doing laundry, changing light bulbs, moving furniture, shopping, and tending the garden?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer;

H-039-3[W2/W3 for 7 Cities]: Over the past 12-month period, how often did you receive help with household tasks? Please select the one that best describes your answer.

Answer: 1. Every day; 2. Every week; 3. Every month; 4. Several times in total; 5. Don’t know; 6. Refused to answer;
3.6.8 Preventive Care

H-004: In the past 12-month period, did you have any physical examinations, excluding those performed as part of treatment at a hospital?

Answer: 1. Yes; 2. No

H-004[W2/W3 for 7 Cities]: In the past 12-month period, did you have any physical examination, excluding those performed as part of treatment at a hospital?

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

3.6.9 Regular Prescription Medication

None

3.6.10 Outpatient Surgery

H-015: In the past year, have you had any of the following surgeries or examinations as an outpatient. Please select any applicable answers.

Answer: 1. Examination using cardiac catheter; 2. Examination of stomach or intestines or removal of polyps using endoscope; 3. Brain CT scan or MRI scan using contrast media; 4. Arthroscopic examination; 5. Cataract surgery; 6. Surgery on varicose veins in the leg; 7. Other outpatient surgery
(Describe: ); 8. Don’t know; 9. Refused to answer; 10. Have not had any outpatient surgery or examination;

3.6.11 Dental Care

H-010: In the past year, have you been seen by a dentist or a dental hygienist? Include visits for regular adjustment of dentures or treatment for oral focal infections (pyorrhea, etc.).

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-013: Did insurance cover your dental treatment, or did you have to pay for it yourself? Please select the most appropriate answer from the following choices.

Answer: 1. All covered by insurance; 2. Mostly covered by insurance; 3. About half and half; 4. Mostly not covered by insurance; 5. None covered by insurance; 6. Don’t know; 7. Refused to answer

H-012. About how much did you pay for treatment by a dentist or dental hygienist in the last year? A rough answer is fine. Please include amount paid for prescription medicines. If you paid nothing, please answer 0.

Answer: 1. About ____ yen; 2. Don’t know; 3. Refused to answer
H-016[W2/W3 for 7 Cities]: In the past 12-month period, did you go to a dentist or a dental hygienist? Include visits for periodic assessment and maintenance of dentures or the treatment of oral focal infection (pyorrhea, etc.).

Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

H-019[W2/W3 for 7 Cities]: Was the dental treatment you received during the past 12-month period covered by your insurance or was it outside of the coverage? Please select the most appropriate answer from the following choices.

Answer: 1. Entirely covered by insurance; 2. Mostly covered by insurance; 3. Roughly half covered by insurance; 4. Mostly outside of the insurance coverage; 5. Entirely outside of the insurance coverage; 6. Don't know; 7. Refused to answer

H-018[W2/W3 for 7 Cities]: How much did you pay in total for the treatment during the past 12-month period? If there was no payment, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer

3.6.12 Satisfaction and Treatment Adherence

H-007: Did you or any of your family members postpone doctor visits during the past 12-month period despite being in need of treatment?
Answer: 1. Yes; 2. No; 3. Don’t know; 4. Refused to answer

11H-007-2: Why did you or your family member(s) postpone doctor visits? Please select all that apply.

Answer: 1. No time to see a doctor; 2. No proper medical facilities nearby; 3. Worried about the cost; 4. Busy with work or family responsibilities; 5. Embarrassed to be examined; 6. Did not know where to go; 7. Afraid to be examined;

3.6.13 Travel and Other Costs

H-007-1-3: How long does it take from your home to the facility? Please provide your total door-to-door time.

Answer: 1. Approximately ___ hour(s) ___ minute(s); 2. Don’t know; 3. Refused to answer;

H-007-1-4: How much does it cost you to travel to and from the facility? If there is no travel cost, please say so.

Answer: 1. Approximately __________ yen; 2. Don’t know; 3. Refused to answer;

3.6.14 Help from Others

None
3.7 TILDA

3.7.1 Hospital Stay

HU010: In the last 12 months, on how many occasions was you admitted to hospital overnight?

Answer: Actual Numbers (0…50); 98.DK; 99.RF;

HU012: In total, about how many nights did you spend in hospital in the last 12 months?

Answer: Actual Numbers (1…364); 98.DK; 99.RF;

HU040: In total, how much did [you/he/she] pay for [your/his/her] overnight hospital stays(s) in the last 12 months, after any health insurance reimbursement?‘

IWER: IF R CANNOT GIVE EXACT VALUE, ACCEPT APPROXIMATE VALUE

€0 ... €50,000 -98. DK -99. RF

3.7.2 Nursing Home Stay

HU032: In the last 12 months, how many weeks [have/has/did] [you/he/she] [spent/spend] as a resident in a nursing home or convalescent home?

Answer: Actual Numbers (0…52); 98.DK; 99.RF;

HU043[W2 only]: How was your nursing/convalescent home care paid for? (Tick all boxes that apply)

Answer: 1. Out of my own resources; 2. By Health Insurance; 3. By the government Fair Deal type scheme (or its replacement); 4. By Children or Relatives; 5. Paid for in another way; 98. DK; 99. RF
HU033: Not counting health insurance refunds, how much was paid by you and your relatives for the time [you/he/she] spent in a nursing home in the last 12 months?

Answer: Actual Value (€0 ... and €50,000); 98. DK; 99. RF

3.7.3 Doctor Visit and Outpatient Care

HU008: In the last 12 months, about how many visits did you make to a hospital as an out-patient?

(Include all types of consultations, tests, operations, procedures or treatments)

Answer: Actual Numbers (0...200); 98.DK; 99.RF;

HU039 In total, how much did [you/he/she] pay for [your/his/her] visit(s) to consultant(s) in the last 12 months, after any health insurance reimbursement?'

IWER: IF R CANNOT GIVE EXACT VALUE, ACCEPT APPROXIMATE VALUE

€0 ... €20,000 -98. DK -99. RF

3.7.4 Alternative Medicine Care

None

3.7.5 Home Health Care

None
3.7.6 Personal Care, Home Help, and Meals on Wheels

HU015_A: In the last 12 months, did [you/Rname] receive any of the following State services? (CODE ALL THAT APPLY)

Answer: 1. Home help (a person employed by State to help [you/Rname] with household chores such as cleaning and cooking); 2. Personal care attendant (a person employed by the State to assist [you/him/her] with bathing, showering, bodily care etc.); 3. Meals-on-Wheels; 96. None of these; 98. DK; 99. RF;

HU015_A1: Let's think for a moment about the home help [you/Rname] received. During the last month, on about how many days did [you/he/she] receive home help?

Answer: the number of days (0… 31); 98. RF; 99. DK;

HU015_A2: On the days when [you/Rname] received home help, for about how many hours per day did [you/he/she] receive help?

Answer: the number of hours (1…24); 98. DK; 99. RF;

HU015_B1: Let's think for a moment about the help [you/Rname] received from a personal care attendant. During the last month, on about how many days did [you/he/she] receive this service?

Answer: the number of days (0… 31); 98. RF; 99. DK;
HU015_B2: On the days when [you/he/she] received help from a personal care attendant, for about how many hours per day did [you/he/she] receive help?

Answer: the number of hours (1…24); 98. DK; 99. RF;

HU015_C1: Let’s think for a moment about Meals-on-Wheels [you/Rname] received. During the last month, on about how many days did [you/he/she] receive Meals-on-Wheels?

Answer: the number of days (0…31); 98. RF; 99. DK;

HU015_A4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay for this home help in the last month? (May be zero)

Answer: Actual Amount (€0 … €10,000); 98. DK; 99. RF;

HU015_B4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay this personal care attendant in the last month? (May be zero)

Answer: Actual Amount (€0 … €10,000); 98. DK; 99. RF;
HU015_C4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay for Meals-on-Wheels in the last month?

Answer: Actual Amount (€0 … €10,000); 98. DK; 99. RF;

3.7.8 Preventive Care

INTRO: [Have/Has] [you/Rname] ever had any of the following medical tests or procedures?

PH701: A flu vaccination?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;

PH702: A blood test for cholesterol?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;

PH708: Do you check your breasts for lumps regularly?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;

PH709: Have you had a mammogram or x-ray of the breast, to search for cancer?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;
PH710: Have you had an examination of your prostate to screen for cancer?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;

PH711: A PSA blood test to screen for cancer?

Answer: 1. Yes; 5. No; 98. DK; 99. RF;

3.7.9 Regular Prescription Medication

None

3.7.10 Outpatient Surgery

HU009: On how many of these visits did you have a substantial procedure, operation or test i.e. one which took a considerable amount of time to perform?

Answer: Actual Value (0... 200); 98. DK; 99. RF;

3.7.11 Dental Care

None
3.7.12 Satisfaction and Treatment Adherence

None

3.7.13 Travel and Other Costs

HU036: Not counting any refunds from your health insurance, about how much did you pay (out-of-pocket) for any other health expenses you had in the last 12 months?

Answer: Actual Value (€0 ... and €20,000); 98. DK; 99. RF

3.7.14 Help from Others

None

3.8 IFLS

3.8.1 Hospital Stay

RN00.: During the past 12 months have you ever received patient care at a hospital, puskesmas, clinic, or other?

Answer: 3. No; 1. Yes;

RN02.: How many times have you received inpatient care at [A: Public Hospital; B: Public Health Center; C: Private Hospital; D: Private Clinic; V: Other] during the past 12 months?

Answer: Actual Times
RN08.: Now, we would like to ask you a few questions about the last visit for inpatient care (hospital admissions) that you have made in the past 12 months, namely in the 12 months prior to month [...]. How many nights were you hospitalized there?
Answer: Actual Nights

RN19a. Did you use insurance to pay for all or some of this visit?
Answer: 1. Yes; 3. No;

RN02b.: How much did you pay out of pocket for inpatient care at [A: Public Hospital; B: Public Health Center; C: Private Hospital; D: Private Clinic; V: Other] during the past 12 months?
Answer: Actual Amount (Rp)

3.8.2 Nursing Home Stay
None

3.8.3 Doctor Visit and Outpatient Care
RJ01.: Within the last 4 weeks, has [RESPONDENT’S NAME] been to [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] / visited by [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia]?
Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia]

Answer: 8. Don’t Know; 3. No; 1. Yes;

RJA02.: How many times did [RESPONDENT’S NAME] visit / been visited by [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the last 4 weeks?

Answer: Actual Times

RJ02b.: How much did you pay out of pocket for outpatient care at [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the past 4 weeks?

Answer: Actual Amount (Rp.)

RJ21. What was the total cost of treatment, including medications that may have been administered, not including prescription cost?

Answer: Actual Amount (Rp.); 3. Didn’t pay; 8. Don’t know
RJ21a. Did you use insurance to pay for all or some of this visit?

Answer: 1. Yes; 3. No;

3.8.4 Alternative Medicine Care

RJ01.: Within the last 4 weeks, has [RESPONDENT’S NAME] been to [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] / visited by [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia]?

Answer: 8. Don’t Know; 3. No; 1. Yes;

RJA02.: How many times did [RESPONDENT’S NAME] visit / been visited by [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the last 4 weeks?

Answer: Actual Times
RJ02b.: How much did you pay out of pocket for outpatient care at [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the past 4 weeks?

Answer: Actual Amount (Rp.)

RJ21. What was the total cost of treatment, including medications that may have been administered, not including prescription cost?

Answer: Actual Amount (Rp.); 3. Didn’t pay; 8. Don’t know

RJ21a. Did you use insurance to pay for all or some of this visit?

Answer: 1. Yes; 3. No;

3.8.5 Home Health Care

RJ10. Did the provider visit you at home?

Answer: 1. YES; 3. NO;

RJ02b.: How much did you pay out of pocket for outpatient care at [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the past 4 weeks?
RJ21. What was the total cost of treatment, including medications that may have been administered, not including prescription cost?

Answer: Actual Amount (Rp.); 3. Didn’t pay; 8. Don’t know

RJ21a. Did you use insurance to pay for all or some of this visit?

Answer: 1. Yes; 3. No;

3.8.6 Personal Care, Home Help, and Meals on Wheels

None

RJ02b. How much did you pay out of pocket for outpatient care at [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician; H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the past 4 weeks?

Answer: Actual Amount (Rp.)
3.8.8 Preventive Care

RJ00a. Have you had a general check up performed in the last 5 years?

Answer: 3. No; 1. Yes;

3.8.9 Regular Prescription Medication

None

3.8.10 Outpatient Surgery

None

3.8.11 Dental Care

RJ01.G: Within the last 4 weeks, has [RESPONDENT’S NAME] been to Private Physician (General Practitioner, Specialist, Dentist, Family Doctor) / visited by Private Physician (General Practitioner, Specialist, Dentist, Family Doctor)?

Answer: 8. DON’T KNOW; 3. No; 1. Yes;

RJ02b.:How much did you pay out of pocket for outpatient care at [A: Public Hospital; B: Public Health Center; E: Private Hospital; F: Polyclinic, Private Clinic, Medical Center; G: Private Physician;
H: Nurse, Paramedic, Midwife practitioner; I: Traditional Practitioner; K: Posyandu Lansia] during the past 4 weeks?

Answer: Actual Amount (Rp.)

RJ21. What was the total cost of treatment, including medications that may have been administered, not including prescription cost?

Answer: Actual Amount (Rp.); 3. Didn’t pay; 8. Don’t know

RJ21a. Did you use insurance to pay for all or some of this visit?

Answer: 1. Yes; 3. No;

3.8.12 Satisfaction and Treatment Adherence

RJ17a. What do you think about the services that were provided by this facility?


3.8.13 Travel and Other Costs

RJ12. What is the travel time (one-way) to that facility?

Answer: 1. 02. Minute; 03. Hour; 8. DON’T KNOW;
RJ14. What was the total transportation cost to the facility (INCLUDING FUEL COST, ONE WAY TRIP)?

Answer: Rp; 8. DONT KNOW;

3.8.14 Help from Others

None

3.9 MHAS

3.9.1 Hospital Stay

D.4: Including all of your hospital stays of the past year, about how many nights did you stay in a hospital overnight?

Answer: Number of Nights; 000.None; 888.RF; 999.DK

D.11 [Only in 2003]: In the past year, about how many nights did you stay in a hospital overnight?

Answer: Number of Nights; 000.None; 888.RF; 999.DK

D.1: Do you have the right to medical attention in [Social Security (IMSS); ISSSTE; Pemex, Defensa o Marina; Private Medical Insurance; Other]?

Answer: 1. Yes; 2. No; 8.RF; 9. DK;
D.8[Only in 2003]: Do you have the right to medical attention in [Social Security (IMSS); ISSSTE; Pemex, Defensa o Marina; Private Medical Insurance; Other]?

Answer: 1. Yes; 2. No; 8.RF; 9. DK;

D.6: Altogether, about how much did you pay for these hospitalizations?

Answer: Amount; 000000.Nothing; 888888.RF; 999999.DK;

D.13 [Only in 2003]: Altogether, about how much did you pay for these hospitalizations?

Answer: Amount; 000000.Nothing; 888888.RF; 999999.DK;

3.9.2 Nursing Home Stay

None

3.9.3 Doctor Visit and Outpatient Care

D.8: In the last year, about how many times have you visited or consulted a doctor or medical personnel?

Answer: Number of Times; 000.None; 888.RF; 999.DK;
D. 15[Only in 2003]: In the last year, how often have you visited or consulted a doctor or medical personnel?

Answer: Number of Times; 000.None; 888.RF; 999.DK;

D.9 Altogether, about how much did you pay for these consultations, or did you pay in-kind?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

D.16 [Only in 2003]: Including all visits, how much did you pay for these services?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

3.9.4 Alternative Medicine Care

D.8: In the last year, about how many times have you seen a curandero? Or in the last year, about how many times have you consulted a homeopath?

Answer: Number of Times; 000.None; 888.RF; 999.DK;

D. 15[Only in 2003]: In the last year, how often have you seen a homeopath or folk healer?

Answer: Number of Times; 000.None; 888.RF; 999.DK;
D.9 Altogether, about how much did you pay for these consultations, or did you pay in-kind?

Answer: Amount; 000000. Nothing; 777777. Paid in-Kind; 888888. RF; 999999. DK;

D.16 [Only in 2003]: Including all visits, how much did you pay for these services?

Answer: Amount; 000000. Nothing; 777777. Paid in-Kind; 888888. RF; 999999. DK;

3.9.5 Home Health Care

None

3.9.6 Personal Care, Home Help, and Meals on Wheels

None

3.9.8 Preventive Care

None

3.9.9 Regular Prescription Medication

None
3.9.10 Outpatient Surgery

D.8: In the last year, about how many times have you had outpatient procedures, not counting stays in the hospital?

Answer: Number of Times; 000.None; 888.RF; 999.DK;

D.15[Only in 2003]: In the last year, how often have you had outpatient procedures, not counting stays in the hospital?

Answer: Number of Times; 000.None; 888.RF; 999.DK;

D.9 Altogether, about how much did you pay for these consultations, or did you pay in-kind?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

D.16 [Only in 2003]: Including all visits, how much did you pay for these services?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

3.9.11 Dental Care

D.8: In the last year, about how many times have you seen a dentist?
D. 15[Only in 2003]: In the last year, how often have you seen a dentist?

Answer: Number of Times; 000.None; 888.RF; 999.DK;

D.9 Altogether, about how much did you pay for these consultations, or did you pay in-kind?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

D.16 [Only in 2003]: Including all visits, how much did you pay for these services?

Answer: Amount; 000000.Nothing; 777777.Paid in-Kind; 888888.RF; 999999.DK;

3.9.12 Satisfaction and Treatment Adherence

D.12c: In the last year, have you stopped taking medications because of excessive cost?

Answer: 1. Yes; 2. No; 8.RF; 9. DK;

D.15: In the last two years, was there at least one instance when you had a serious health problem but you did not go to the doctor?
Answer: 1. Yes; 2. No; 8. RF; 9. DK;

D.19[Only in 2003]: In the last year, have stopped taking medications because of excessive cost?
Answer: 1. Yes; 2. No; 8. RF; 9. DK;

D.22[Only in 2003]: In the last two years, was there at least one instance when you had a serious health problem but you did not go to the doctor?
Answer: 1. Yes; 2. No; 8. RF; 9. DK;

3.9.13 Travel and Other Costs
None

3.9.14 Help from Others
D.13: In the last year, who paid most of the out-of-pocket medical costs?
Answer: 01. Son/Daughter; 02. Son/Daughter-in-law; 03. Grandchild; 04. Father/Mother; 05. Other Relative; 06. Other Person; 07. Respondent and/or Spouse; 08. Did not Have Expenses; 88. RF; 99. DK;
D.20 [Only in 2003]: In the last year, who paid most of the out-of-pocket medical costs?

Answer: 01. Son/Daughter; 02. Son/Doughter-in-law; 03. Grandchild; 04. Father/Mother; 05. Other Relative; 06. Other Person; 07. Respondent and/or Spouse; 08. Did not Have Expenses; 88. RF; 99. DK;
### Table 14. Questions for health care utilization and expenditure

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<td>RN02.</td>
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