

6. How much money, from all sources combined, did you receive last month?

\$ _____ \$
888888 Refuse to Answer

7. Do you have health insurance for yourself?

Yes 1
No 0
Refuse to Answer 8

8. Do you have health insurance for your family?

Yes 1
No 0
Refuse to Answer 8

9. Do you receive ADAP (AIDS Drugs Assistance Program) to cover your HIV medications?

Yes 1
No 0
Refuse to Answer 8

10. Do you have Medicaid or other government health coverage to pay for your medications and prescriptions?

Yes 1
No 0
Refuse to Answer 8

11. Do you have other insurance to pay for medications and prescriptions?

Yes 1
No 0
Refuse to Answer 8

