

**Appendix 1 (as supplied by the authors):** Survey questions from the Canadian Community Health Survey used to study the association between survey year and availability of retiree health insurance.

**Sex:**

DDH\_SEX: Is respondent male or female?

---

**Age:**

DHH\_Age: What is your age?

---

**Insurance availability:**

INS: For each type of insurance, respondents are first asked, “Do you have insurance that covers all or part of...?”

- topics are “your dental expenses”, “the costs of your prescription medications”, “the costs of eye glasses or contact lenses?”, “hospital charges for a private or semi-private room?”
  - If respondents answer yes for each type of insurance, they are then asked “Is it a government-sponsored plan?”, “Is it an employer-sponsored plan?”, and “Is it a private plan?”
- 

**Urban/rural dwelling:**

GEODUR2: Derived based upon postal code

---

**Total household income:**

INCDRPR: Distribution of household income - provincial level - based on INCDADR (based upon INC\_3), GEO\_PRV. See document on derived variables.

---

**Highest level of education in household:**

EDUDH04: Highest level of education – household, 4 levels

---

**Number of chronic illnesses:**

- A count of various conditions, which are:
  - o Asthma - CCC\_036 In the past 12 months, you taken any medicine for asthma such as inhalers, nebulizers, pills, liquids or injections?
  - o Arthritis - CCC\_051 Do you have arthritis, excluding fibromyalgia?
  - o Hypertension - Remember, we’re interested in conditions diagnosed by a health professional and that are expected to last or have already lasted 6 months or more. Do you have high blood pressure? (Check ccc\_71 or 72?)
  - o chronic obstructive pulmonary disease - CCC\_091 Do you have chronic bronchitis, emphysema or chronic obstructive pulmonary disease or COPD?
  - o Diabetes - CCC\_101 - (Remember, we’re interested in conditions diagnosed by a health professional and that are expected to last or have already lasted 6 months or more.) Do you have diabetes?
  - o heart disease - CCC\_121 Do you have heart disease?
  - o previous stroke - CCC\_151 Do you suffer from the effects of a stroke?
  - o bowel disease - CCC\_171 Do you have a bowel disorder such as Crohn’s Disease, ulcerative colitis, Irritable Bowel Syndrome or bowel incontinence?

- mood disorder - CCC\_280 Remember, we're interested in conditions diagnosed by a health professional and that are expected to last or have already lasted 6 months or more. Do you have a mood disorder such as depression, bipolar disorder, mania or dysthymia? (including CCC\_290? Do you have an anxiety disorder such as a phobia, obsessive-compulsive disorder or a panic disorder?)

---

**Marital Status:**

DDH\_MS: What is your marital status? Are you married, living common-law, widowed, separated, divorced, or single, never married?

---

**Self-reported health status:**

GEN\_01: In general, would you say your health is... ? (Excellent, very good, good, fair, poor)