

**MEPS HC-105:
2006 Full Year
Consolidated Data File
November 2008**

**Agency for Healthcare Research and Quality
Center for Financing, Access, and Cost Trends
540 Gaither Road
Rockville, MD 20850
(301) 427-1406**

Table of Contents

A.	Data Use Agreement	A-1
B.	Background	B-1
	1.0 Household Component.....	B-1
	2.0 Medical Provider Component.....	B-1
	3.0 Survey Management and Data Collection	B-2
C.	Technical and Programming Information	C-1
	1.0 General Information.....	C-1
	2.0 Data File Information.....	C-1
	2.1 Codebook Structure.....	C-2
	2.2 Reserved Codes.....	C-3
	2.3 Codebook Format.....	C-3
	2.4 Variable Naming.....	C-4
	2.5 File Contents	C-4
	2.5.1 Survey Administration Variables (DUID- RURSLT53).....	C-5
	2.5.2 Navigating the MEPS Data with Information on Person Disposition Status	C-17
	2.5.3 Demographic Variables (AGE31X-DAPID53X)	C-22
	2.5.4 Income and Tax Filing Variables (SSIDIS06- OTHIMP06)	C-28
	2.5.4.1 Income Top-Coding	C-31
	2.5.4.2 Poverty Status	C-32
	2.5.5 Health Status Variables (RTHLTH31-DSPRX53)	C-32
	2.5.5.1 Perceived Health Status and IADL and ADL Limitations	C-34
	2.5.5.2 Functional and Activity Limitations	C-35
	2.5.5.3 Vision Problems.....	C-38
	2.5.5.4 Hearing Problems.....	C-40
	2.5.5.5 Any Limitation Rounds 3, 4, and 5 (Panel 10) / Rounds 1, 2, and 3 (Panel 11)	C-41
	2.5.5.6 Child Health and Preventive Care.....	C-41
	2.5.5.7 Preventive Care Variables.....	C-49
	2.5.5.8 Priority Conditions.....	C-52
	2.5.5.9 2006 Self-Administered Questionnaire (SAQ).....	C-56
	2.5.5.10 Diabetes Care Survey (DCS)	C-62
	2.5.6 Disability Days Indicator Variables (DDNWRK31 - OTHNDD53).....	C-63
	2.5.7 Access to Care Variables (ACCELI42-	

	PMDLPR42).....	C-65
	2.5.7.1 Family Members' Origins and Preferred Languages	C-65
	2.5.7.2 Family Members' Usual Source of Health Care	C-65
	2.5.7.3 Characteristics of Usual Source of Health Care Providers.....	C-66
	2.5.7.4 Access to and Satisfaction with the Provider	C-68
	2.5.7.5 Access to Medical Treatment, Dental Treatment, and Prescription Medicines	C-69
	2.5.7.6 Editing the Access to Care Variables.....	C-70
	2.5.7.7 Recoding of Additional Other Specify Text Items	C-71
2.5.8	Employment Variables (EMPST31-YNOINS53).....	C-72
2.5.9	Health Insurance Variables (TRIJA06X-PMEDOP53) ..	C-80
	2.5.9.1 Monthly Health Insurance Indicators (TRIJA06X-INSDE06X)	C-80
	2.5.9.2 Summary Insurance Coverage Indicators (PRVEV06-INSCOV06)	C-82
	2.5.9.3 FY 2006 PUF Managed Care Variables (TRIST31X-PRDRNP06)	C-83
	2.5.9.4 Unedited Health Insurance Variables (PREVCOVR-INSENDYY).....	C-92
	2.5.9.5 Health Insurance Coverage Variables – At Any Time/At Interview Date/ At 12-31 Variables (TRICR31X - EVRUNAT)	C-93
	2.5.9.6 Dental and Prescription Drug Private Insurance Variables (DENTIN31-PMDINS06)	C-95
	2.5.9.7 Prescription Drug Usual Third Party Payer Variables (PMEDUP31 - PMEDOP53)	C-95
	2.5.9.8 Experiences with Public Plans Variables (GDCPBM42 - RTPLNT42)	C-96
2.5.10	Utilization, Expenditures and Sources of Payment Variables (TOTCH06-RXOSR06).....	C-97
	2.5.10.1 Expenditure Definition.....	C-98
	2.5.10.2 Utilization and Expenditure Variables by Type of Medical Service	C-101
2.6	Linking to Other Files	C-107
	2.6.1 Event and Condition Files.....	C-107
	2.6.2 National Health Interview Survey.....	C-107

	2.6.3	Pooling Annual Files.....	C-107
	2.6.4	Longitudinal Analysis.....	C-108
3.0		Survey Sample Information	C-108
	3.1	Background on Sample Design and Response Rates.....	C-108
	3.1.1	References on MEPS Sample Design	C-109
	3.1.2	MEPS--Linked to the National Health Interview Survey.....	C-109
	3.1.3	Sample Weights and Variance Estimation.....	C-110
	3.2	The MEPS Sampling Process and Response Rates: An Overview.....	C-111
	3.2.1	Response Rates	C-112
	3.2.2	Panel 11 Response Rates.....	C-113
	3.2.3	Panel 10 Response Rates.....	C-113
	3.2.4	Combined Panel Response.....	C-113
	3.2.5	Oversampling in MEPS	C-114
	3.3	Background on Person-Level Estimation Using this MEPS Public Use Data File	C-115
	3.3.1	Overview	C-115
	3.3.2	Developing Person-Level Estimates	C-115
	3.4	Details on Person-Level Weights Construction.....	C-116
	3.4.1	Overview	C-116
	3.4.2	MEPS Panel 10	C-116
	3.4.3	MEPS Panel 11	C-117
	3.4.4	Note on Raking	C-117
	3.4.5	The Weight for the 2006 Full Year Population Characteristic File	C-118
	3.4.6	The Final Poverty-Adjusted Person Level Weight for 2006.....	C-118
	3.4.7	A Note on MEPS Population Estimates.....	C-119
	3.4.8	A Note on MEPS Population Coverage.....	C-119
	3.5	Background on Family-Level Estimation Using This MEPS Public Use File.....	C-120
	3.5.1	Overview	C-120
	3.5.2	Definition of "Family" for Estimation Purposes.....	C-120
	3.5.3	Instructions to Create Family Estimates	C-121
	3.5.4	Details on Family Weight Construction and Estimated Numbers.....	C-122
	3.6	Analysis Using Health Insurance Eligibility Units.....	C-123
	3.7	Weights and Response Rates for the Self-Administered Questionnaire (SAQ).....	C-123
	3.8	Weights and Response Rates for the Diabetes Care Survey.....	C-124
	3.9	Variance Estimation.....	C-125
	3.10	Guidelines for Determining which Weight to Use for Analysis Involving Data/Variables from Multiple Sources and Supplements: MEPS 2006 Full-Year Use File	C-125

3.11 Using MEPS Data for Trend Analysis.....	C-126
D. Variable-Source Crosswalk.....	D-1

A. Data Use Agreement

Individual identifiers have been removed from the micro-data contained in these files. Nevertheless, under sections 308 (d) and 903 (c) of the Public Health Service Act (42 U.S.C. 242m and 42 U.S.C. 299 a-1), data collected by the Agency for Healthcare Research and Quality (AHRQ) and/or the National Center for Health Statistics (NCHS) may not be used for any purpose other than for the purpose for which they were supplied; any effort to determine the identity of any reported cases is prohibited by law.

Therefore in accordance with the above referenced Federal Statute, it is understood that:

1. No one is to use the data in this data set in any way except for statistical reporting and analysis; and
2. If the identity of any person or establishment should be discovered inadvertently, then (a) no use will be made of this knowledge, (b) the Director Office of Management AHRQ will be advised of this incident, (c) the information that would identify any individual or establishment will be safeguarded or destroyed, as requested by AHRQ, and (d) no one else will be informed of the discovered identity; and
3. No one will attempt to link this data set with individually identifiable records from any data sets other than the Medical Expenditure Panel Survey or the National Health Interview Survey.

By using these data you signify your agreement to comply with the above stated statutorily based requirements with the knowledge that deliberately making a false statement in any matter within the jurisdiction of any department or agency of the Federal Government violates Title 18 part 1 Chapter 47 Section 1001 and is punishable by a fine of up to \$10,000 or up to 5 years in prison.

The Agency for Healthcare Research and Quality requests that users cite AHRQ and the Medical Expenditure Panel Survey as the data source in any publications or research based upon these data.

B. Background

1.0 Household Component

The Medical Expenditure Panel Survey (MEPS) provides nationally representative estimates of health care use, expenditures, sources of payment, and health insurance coverage for the U.S. civilian non-institutionalized population. The MEPS Household Component (HC) also provides estimates of respondents' health status, demographic and socio-economic characteristics, employment, access to care, and satisfaction with health care. Estimates can be produced for individuals, families, and selected population subgroups. The panel design of the survey, which includes 5 Rounds of interviews covering 2 full calendar years, provides data for examining person level changes in selected variables such as expenditures, health insurance coverage, and health status. Using computer assisted personal interviewing (CAPI) technology, information about each household member is collected, and the survey builds on this information from interview to interview. All data for a sampled household are reported by a single household respondent.

The MEPS-HC was initiated in 1996. Each year a new panel of sample households is selected. Because the data collected are comparable to those from earlier medical expenditure surveys conducted in 1977 and 1987, it is possible to analyze long-term trends. Each annual MEPS-HC sample size is about 15,000 households. Data can be analyzed at either the person or event level. Data must be weighted to produce national estimates.

The set of households selected for each panel of the MEPS HC is a subsample of households participating in the previous year's National Health Interview Survey (NHIS) conducted by the National Center for Health Statistics. The NHIS sampling frame provides a nationally representative sample of the U.S. civilian non-institutionalized population and reflects an oversample of blacks and Hispanics. MEPS oversamples additional policy relevant sub-groups such as Asians and low income households. The linkage of the MEPS to the previous year's NHIS provides additional data for longitudinal analytic purposes.

2.0 Medical Provider Component

Upon completion of the household CAPI interview and obtaining permission from the household survey respondents, a sample of medical providers are contacted by telephone to obtain information that household respondents can not accurately provide. This part of the MEPS is called the Medical Provider Component (MPC) and information is collected on dates of visit, diagnosis and procedure codes, charges and payments. The Pharmacy Component (PC), a subcomponent of the MPC, does not collect charges or diagnosis and procedure codes but does collect drug detail information, including National Drug Code (NDC) and medicine name, as well as date filled and sources and amounts of payment. The MPC is not designed to yield national estimates. It is primarily used as an imputation source to supplement/replace household reported expenditure information.

3.0 Survey Management and Data Collection

MEPS HC and MPC data are collected under the authority of the Public Health Service Act. Data are collected under contract with Westat, Inc. Data sets and summary statistics are edited and published in accordance with the confidentiality provisions of the Public Health Service Act and the Privacy Act. The National Center for Health statistics (NCHS) provides consultation and technical assistance.

As soon as data collection and editing are completed, the MEPS survey data are released to the public in staged releases of summary reports, micro data files, and tables via the MEPS web site: www.meps.ahrq.gov. Selected data can be analyzed through MEPSnet, an on-line interactive tool designed to give data users the capability to statistically analyze MEPS data in a menu-driven environment.

Additional information on MEPS is available from the MEPS project manager or the MEPS public use data manager at the Center for Financing Access and Cost Trends, Agency for Healthcare Research and Quality, 540 Gaither Road, Rockville, MD 20850 (301-427-1406).

C. Technical and Programming Information

1.0 General Information

This documentation describes the 2006 full-year consolidated data file from the Medical Expenditure Panel Survey Household Component (MEPS HC). Released as an ASCII file (with related SAS and SPSS programming statements and data user information) and a SAS transport dataset, this public use file provides information collected on a nationally representative sample of the civilian noninstitutionalized population of the United States for calendar year 2006. The file contains 1672 variables and has a logical record length of 4612 with an additional 2-byte carriage return/line feed at the end of each record.

This file consists of MEPS survey data obtained in Rounds 3, 4, and 5 of Panel 10 and Rounds 1, 2, and 3 of Panel 11, the rounds for the MEPS panels covering calendar year 2006, and contains variables pertaining to survey administration, demographics, employment, health status, disability days, quality of care, patient satisfaction, health insurance, income, and person-level medical care use and expenditures.

The following documentation offers a brief overview of the types and levels of data provided, content and structure of the files, and programming information. It contains the following sections:

- Data File Information
- Survey Sample Information
- Variable-Source Crosswalk (Section D)

Both weighted and unweighted frequencies of all the variables included in the 2006 full-year consolidated data file are provided in the accompanying codebook file.

A database of all MEPS products released to date and a variable locator indicating the major MEPS data items on public use files that have been released to date can be found at the following link on the MEPS Web site: www.meps.ahrq.gov.

2.0 Data File Information

This public use dataset contains variables and frequency distributions associated with 34,145 persons who participated in the MEPS Household Component of the Medical Expenditure Panel Survey in 2006. These persons received a positive person-level weight, a family-level weight, or both (some participating persons belonged to families characterized as family-level nonrespondents while some members of participating families were not eligible for a person-level weight).

These 34,145 persons were part of one of the two MEPS panels for whom data were collected in 2006: Rounds 3, 4, and 5 of Panel 10 or Rounds 1, 2, and 3 of Panel 11. Of these persons, 32,577 were assigned a positive person-level weight. There were 12,811 families receiving a positive family-level weight. The codebook provides both weighted and unweighted frequencies for each variable on the dataset. In conjunction with the person-level weight variable (PERWT06F) provided on this file, data for persons with a positive person-level weight can be used to make estimates for the civilian noninstitutionalized U.S. population for 2006.

2.1 Codebook Structure

The codebook and data file sequence lists variables in the following order:

- Unique person identifiers and survey administration variables
- Geographic variables
- Demographic variables
- Income and tax filing variables
- Employment variables
- Health insurance variables
- Disability days variables
- Access to care variables
- Health status variables
- Utilization, expenditure, and source of payment variables
- Weight and variance estimation variables

2.2 Reserved Codes

The following reserved code values are used:

VALUE	DEFINITION
-1 INAPPLICABLE	Question was not asked due to skip pattern
-2 DETERMINED IN PREVIOUS ROUND	Question was not asked in round because there was no change in current main job since previous round
-7 REFUSED	Question was asked and respondent refused to answer question
-8 DK	Question was asked and respondent did not know answer
-9 NOT ASCERTAINED	Interviewer did not record the data
-10 HOURLY WAGE >= \$72.12	Hourly wage was top-coded for confidentiality
-13 INITIAL WAGE IMPUTED	Hourly wage was previously imputed so an updated wage is not included in this file

2.3 Codebook Format

This codebook describes an ASCII data set and provides the following programming identifiers for each variable:

IDENTIFIER	DESCRIPTION
Name	Variable name (maximum of 8 characters)
Description	Variable descriptor (maximum 40 characters)
Format	Number of bytes
Type	Type of data: numeric (indicated by NUM) or character (indicated by CHAR)
Start	Beginning column position of variable in record
End	Ending column position of variable in record

2.4 Variable Naming

In general, variable names reflect the content of the variable, with an eight-character limitation. Edited variables end in an X and are so noted in the variable label. The last two characters in round-specific variables denote the rounds of data collection, Round 3, 4, or 5 of Panel 10 and Round 1, 2, or 3 of Panel 11. Unless otherwise noted, variables that end in “06” represent status as of December 31, 2006.

Variables contained in this delivery were derived either from the questionnaire itself or from the CAPI. The source of each variable is identified in the section of the documentation entitled “Section D. Variable-Source Crosswalk”. Sources for each variable are indicated in one of four ways: (1) variables derived from CAPI or assigned in sampling are so indicated; (2) variables derived from complex algorithms associated with re-enumeration are labeled “RE Section”; (3) variables that are collected by one or more specific questions in the instrument have those question numbers listed in the Source column; and (4) variables constructed from multiple questions using complex algorithms are labeled “Constructed.”

2.5 File Contents

Users of MEPS data should be aware that the survey collects data for all sample persons who were in the survey target population at any time during the survey period. In other words, a small proportion of individuals in MEPS analytic files are not members of the survey target population (i.e., civilian noninstitutionalized) for the entire survey period. These persons include those who had periods during which they lived in an institution (e.g., nursing home or prison), were in the military, or lived out of the country, as well as those who were born (or adopted) into MEPS sample households or died during the year. They are considered respondents to the survey and are included in MEPS data files with positive person weights, but no data were collected for the periods they were not in-scope and their annual data for variables like health care utilization, expenditures, and insurance coverage reflect only the part of the year they were in-scope for the survey. Persons who are in-scope for only part of the year should not be confused with non-respondents. Sample persons who are classified as non-respondents to one or more rounds of data collection (i.e., initial non-respondents and drop outs over time) are not included in MEPS annual files, and survey weights for full-year respondents are inflated through statistical adjustment procedures to compensate for both full and part-year nonresponse (see section 3.0 for more information). For more details about the identification and analytic considerations regarding sample persons who are in-scope only part of the year, see www.meps.ahrq.gov/about_meps/hc_sample.shtml.

2.5.1 Survey Administration Variables (DUID-RURSLT53)

The survey administration variables contain information related to conducting the interview, household and family composition, and person-level and RU-level status codes. Data for the survey administration variables were derived from the sampling process, the CAPI programs, or were computed based on information provided by the respondent in the re-enumeration section of the questionnaire. Most survey administration variables on this file are asked during every round of the MEPS interview. They describe data for Rounds 3/1, 4/2, 5/3 status and status as of December 31, 2006. Variable names ending in “xy” represent variables relevant to Round “x” of Panel 10 or Round “y” of Panel 11. For example, RULETR53 is a variable relevant to Round 5 of Panel 10 or Round 3 of Panel 11, depending on the panel in which the person was included. The variable PANEL indicates the panel in which the person participated.

The December 31, 2006 variables were developed in two ways. Those used in the construction of eligibility, inscope, and the end reference date were based on an exact date. The remaining variables were constructed using data from specific rounds, if available. If data were missing from the target round but were available in another round, data from that other round were used in the variable construction. If no valid data were available during any round of data collection, an appropriate reserved code was assigned.

Dwelling Units, Reporting Units, and Families

The definitions of Dwelling Units (DUs) in the MEPS Household Survey are generally consistent with the definitions employed for the National Health Interview Survey (NHIS). The Dwelling Unit ID (DUID) is a five-digit random ID number assigned after the case was sampled for MEPS. A person number (PID) uniquely identifies each person within the DU. The variable DUPERSID is the combination of the variables DUID and PID.

PANEL is a constructed variable used to specify the panel number for the person. PANEL will indicate either Panel 10 or Panel 11 for each person on the file. Panel 10 is the panel that started in 2005, and Panel 11 is the panel that started in 2006.

A Reporting Unit (RU) is a person or group of persons in the sampled DU who are related by blood, marriage, adoption, foster care, or other family association. Each RU was interviewed as a single entity for MEPS. Thus, the RU serves chiefly as a family-based “survey” operations unit rather than an analytic unit. Members of each RU within the DU are identified in the pertinent three rounds by the round-specific variables RULETR31, RULETR42, and RULETR53. End-of-year status (as of December 31, 2006 or the last round they were in the survey) is indicated by the RULETR06 variable. Regardless of the legal status of their association, two persons living together as a “family” unit were treated as a single RU if they chose to be so identified. Examples of different types of RUs are:

1. A married daughter and her husband living with her parents in the same DU constitute a single RU;
2. A husband and wife and their unmarried daughter, age 18, who is living away from home while at college constitute two RUs; and
3. Three unrelated persons living in the same DU would each constitute a distinct RU (a total of three RUs).

Unmarried college students (less than 24 years of age) who usually live in the sampled household but were living away from home and going to school at the time of the Round 3/1 MEPS interview were treated as a RU separate from that of their parents for the purpose of data collection.

The round-specific variables RUSIZE31, RUSIZE42, RUSIZE53, and the end-of-year status variable RUSIZE06 indicate the number of persons in each RU, treating students as single RUs separate from their parents. Thus, students are not included in the RUSIZE count of their parents' RU. However, for many analytic objectives, the student RUs would be combined with their parents' RU, treating the combined entity as a single family. Family identifier and size variables are described below and include students with their parents' RU.

The round-specific variables FAMID31, FAMID42, FAMID53, and the end-of-year status variable FAMID06 identify a family (i.e., persons related to one another by blood, marriage, adoption, foster care, or self-identified as a single unit) for each round and as of December 31, 2006. The FAMID variables differ from the RULETR variables only in that student RUs are combined with their parents' RU.

Two other family identifiers, FAMIDYR and CPSFAMID, are provided on this file. The annualized family ID letter, FAMIDYR, identifies eligible members of the eligible annualized families within a DU. The CPSFAMID represents a redefinition of MEPS families into families defined by the Current Population Survey (CPS). Some of the distinctions between CPS- and MEPS-defined families are that MEPS families include and CPS families do not include: non-married partners, foster children, and in-laws. These persons are considered as members of separate families for CPS-like families. The reason CPS-like families are defined is so that a poverty status classification variable consistent with established definitions of poverty can be assigned to the CPS-like families and used for weight poststratification purposes. In order to identify a person's family affiliation, users must create a unique set of FAMID variables by concatenating the DU identifier and the FAMID variable. Instructions for creating family estimates are described in section 3.5.

Health Insurance Eligibility Units (HIEUs) are sub-family relationship units constructed to include adults plus those family members who would typically be eligible for coverage under the adults' private health insurance family plans. To construct the HIEUIDX variable, which links persons into a common HIEU, we begin with the family identification variable CPSFAMID.

Working with this family ID, we define HIEUIDX using family relationships as of the end of 2006. Persons missing end-of-year relationship information are assigned to an HIEUIDX using relationship information from the last round in which they provided such information. HIEUs comprise adults, their spouses, and their unmarried natural/adoptive children age 18 and under. We also include children under age 24 who are full-time students (living at home or away from home). Other children who do not live with their natural/adoptive adult parents are placed in an HIEUIDX as follows:

- Foster children always comprise a separate HIEUIDX.
- Other unmarried children are placed in stepparent HIEUIDX, grandparent HIEUIDX, great-grandparent HIEUIDX, or aunt/uncle HIEUIDX.
- Children of unmarried minors are placed (along with their minor parents) in the HIEUIDX of their adult grandparents (if possible). Married minors are placed into separate HIEUs along with any spouses and children they might have.
- Some HIEUs are headed by unmarried minors, when there is no adult family member present in the CPSFAMID.

HIEUs do not, in general, comprise adult (nonmarital) partnerships, because unmarried adult partners are rarely eligible for dependent coverage under each other's insurance. The exception to this rule is that we include adult partners in the same HIEU if there is at least one (out-of-wedlock) child in the family that links to both adult partners. In cases of missing or contradictory relationship codes, HIEUs are edited by hand, with the presumption being that the adults and children form a nuclear family.

The round-specific variables FAMSZE31, FAMSZE42, FAMSZE53, and the end-of-year status variable FAMSZE06 indicate the number of persons associated with a single family unit after students are linked to their associated parent RUs for analytical purposes. Family-level analyses should use the FAMSZE variables.

Note that the variables RUSIZE31, RUSIZE42, RUSIZE53, RUSIZE06, FAMSZE31, FAMSZE42, FAMSZE53, and FAMSZE06 exclude persons who are ineligible for data collection (i.e., those where ELGRND31 NE 1, ELGRND42 NE 1, ELGRND53 NE 1 or ELGRND06 NE 1); analysts should exclude ineligible persons in a given round from all family-level analyses for that round.

The round-specific variables RURSLT31, RURSLT42, and RURSLT53 indicate the RU response status for each round. Users should note that the values for RURSLT31 differ from those for RURSLT42 and RURSLT53. The values for RURSLT31 include the following:

Value	Definition
-1	Inapplicable
60	Complete with RU member
61	Complete with proxy--all RU members deceased
62	Complete with proxy--all RU members institutionalized or deceased
63	Complete with proxy, other
72	RU institutionalized in prior round; still institutionalized—R3 only
80	Entire RU merged with other RU
81	Entire RU deceased before 1/1/06
82	Entire RU is in military before 1/1/06
83	RU institutionalized before 1/1/06
84	Entire RU left U.S. before 1/1/06
85	RU ineligible before 1/1/06, multi-reason
86	RU ineligible, Non-Key NHIS study
87	Re-enumeration complete, no eligible RU member, Ineligible RU
88	Unavailable during field period
89	Too ill, No proxy
90	Physical/Mental incompetent, No proxy
91	Final Refusal
92	Final Breakoff
93	Unable to locate
94	Entire RU is military or left U.S. after 1/1/06
95	RU member institutionalized after 1/1/06, No proxy
96	RU member deceased after 1/1/06, No proxy
97	Re-enumeration complete, no RU member, Non-Response
98	RU moved too far away to interview
99	Final other Non-Response

The values for RURSLT42 and RURSLT53 include the following:

Value	Definition
-1	Inapplicable
60	Complete with RU member
61	Complete with proxy--all RU members deceased
62	Complete with proxy--all RU members institutionalized or deceased
63	Complete with proxy, other
70	Entire RU merged with other RU
71	Re-enumeration complete, no eligible RU member, Ineligible RU
72	RU institutionalized in prior round; still institutionalized
81	Entire RU deceased before 1/1/06
82	Entire RU is in military before 1/1/06
83	RU institutionalized before 1/1/06
84	Entire RU left U.S. before 1/1/06
85	RU ineligible before 1/1/06, multi-reason
86	RU ineligible, Non-Key NHIS study
87	Language Barrier
88	Unavailable during field period
89	Too ill, No proxy
90	Physical/Mental incompetent, No proxy
91	Final Refusal
92	Final Breakoff
93	Unable to locate
94	Entire RU is military or left U.S. after 1/1/06
95	RU member institutionalized after 1/1/06, No proxy
96	RU member deceased after 1/1/06, No proxy
97	Re-enumeration complete, no RU member, Non-Response
98	RU moved too far away to interview
99	Final other Non-Response

Standard or primary RUs are the original RUs from NHIS. A new RU is one created when members of the household leave the primary RU and are followed according to the rules of the survey. A student RU is an unmarried college student (under 24 years of age) who is considered a usual member of the household, but was living away from home while going to school, and was treated as a Reporting Unit (RU) separate from his or her parents' RU for the purpose of data collection. RUCLAS06 was set based on the RUCLAS values from Rounds 3/1, 4/2, and 5/3. If the person was present in the responding RU in Round 5/3, then RUCLAS06 was set to RUCLAS53. If the person was not present in a responding RU in Round 5/3 but was present in Round 4/2, then RUCLAS06 was set to RUCLAS42. If the person was not present in either Rounds 4/2 or 5/3 but was present in Round 3/1, then RUCLAS06 was set to RUCLAS31. If the person was not linked to a responding RU during any round, then RUCLAS06 was set to -9.

Geographic Variables

The round-specific variables REGION31, REGION42, REGION53, and the end-of-year status variable REGION06 indicate the Census region for the RU. REGION06 indicates the region for the 2006 portion of Round 5/3. For most analyses, REGION06 should be used.

The values and states for each region include the following:

Value	Label	States
1	Northeast	Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont
2	Midwest	Indiana, Illinois, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin
3	South	Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia
4	West	Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming

The round-specific variables MSA31, MSA42, and MSA53 and the end-of-year status variable MSA06 indicate whether or not the RU is found in a Metropolitan Statistical Area and reflect the most recent definitions of metropolitan statistical areas established by Office of Management and Budget (OMB), including the most recent updates. These updates are based on the application of the 2000 Standards for Defining Metropolitan Statistical Areas of OMB to Census Bureau population estimates for July 1, 2004 and July 1, 2005. For MEPS data releases prior to 2004 the

MSA variables were coded in compliance with the definition of metropolitan statistical areas based on application of OMB standards to Census 1990 data. MSA31, MSA42, and MSA53 indicate the MSA status at the time of Rounds 3/1, 4/2, and 5/3 interviews. MSA06 indicates the MSA status for the 2006 portion of Round 5/3. For most analyses, analysts should use MSA06 rather than MSA31, MSA42, or MSA53. For MEPS data releases prior to 2004 the MSA variables were coded in compliance with the definition of metropolitan statistical areas based on application of OMB standards to Census 1990 data.

Reference Period Dates

The reference period is the period of time for which data were collected in each round for each person. The reference period dates were determined during the interview for each person by the CAPI program. The round-specific beginning reference period dates are included for each person. These variables include BEGRFM31, BEGRFD31, BEGRFY31, BEGRFM42, BEGRFD42, BEGRFY42, BEGRFM53, BEGRFD53, and BEGRFY53. The reference period for Round 1 for most persons began on January 1, 2006 and ended on the date of the Round 1 interview. For RU members who joined later in Round 1, the beginning Round 1 reference date was the date the person entered the RU. For all subsequent rounds, the reference period for most persons began on the date of the previous round's interview and ended on the date of the current round's interview. Persons who joined after the previous round's interview had their beginning reference date for the round set to the day they joined the RU.

The round-specific ending reference period dates for Rounds 3/1, 4/2, and 5/3 as well as the end-of-year reference period end date variables are also included for each person. These variables include ENDRFM31, ENDRFD31, ENDRFY31, ENDRFM42, ENDRFD42, ENDRFY42, ENDRFM53, ENDRFD53, ENDRFY53, ENDRFM06, ENDRFD06, and ENDRFY06. For most persons in the sample, the date of the round's interview is the reference period end date. Note that the end date of the reference period for a person is prior to the date of the interview if the person was deceased during the round, left the RU, was institutionalized prior to that round's interview, or left the RU to join the military.

Reference Person Identifiers

The round-specific variables REFPRS31, REFPRS42, and REFPRS53 and the end-of-year status variable REFPRS06 identify the reference person for Rounds 3/1, 4/2 and 5/3, and as of December 31, 2006 (or the last round they were in the survey). In general, the reference person is defined as the household member 16 years of age or older who owns or rents the home. If more than one person meets this description, the household respondent identifies one from among them. If the respondent is unable to identify a person fitting this definition, the questionnaire asks for the head of household and this person is then considered the reference person for that RU. This information is collected in the Reenumeration section of the CAPI questionnaire.

Respondent Identifiers

The respondent is the person who answered the interview questions for the Reporting Unit (RU). The round-specific variables RESP31, RESP42, and RESP53 and the end-of-year status variable RESP06 identify the respondent for Rounds 3/1, 4/2, and 5/3 and as of December 31, 2006 (or the last round they were in the survey). Only one respondent is identified for each RU. In instances where the interview was completed in more than one session, only the first respondent is indicated.

There are two types of respondents. The respondent can be either an RU member or a non-RU member proxy. The round-specific variables PROXY31, PROXY42, and PROXY53 and the end-of-year status variable PROXY06 identify the type of respondent for Rounds 3/1, 4/2, 5/3 and as of December 31, 2006 (or the last round they were in the survey).

Language of Interview

The language of interview variable (INTVLANG) is a summary value of the round-specific RU-level Closing section question, (CL62A), which asks the interviewer to record the language in which the interview was completed: English, Spanish, English/Spanish combination, other. Given the first round that the person was part of the study and the person's associated RU for that round, INTVLANG is assigned the interview language value reported for the person's RU for the round.

Person Status

A number of variables describe the various components reflecting each person's status for each round of data collection. These variables provide information about a person's inscope status, Keyness status, eligibility status, and disposition status. These variables include: KEYNESS, INSCOP31, INSCOP42, INSCOP53, INSCOP06, INSC1231, INSCOPE, ELGRND31, ELGRND42, ELGRND53, ELGRND06, PSTATS31, PSTATS42, and PSTATS53. These variables are set based on sampling information and responses provided in the Re-enumeration section of the CAPI questionnaire.

Through the Re-enumeration section of the CAPI questionnaire, each member of a RU was classified as "Key" or "Non-Key", "inscope" or "out-of-scope", and "eligible" or "ineligible" for MEPS data collection. To be included in the set of persons used in the derivation of MEPS person-level estimates, a person had to be a member of the civilian noninstitutionalized population for at least one day during 2006. Because a person's eligibility for the survey might have changed since the NHIS interview, a sampling re-enumeration of household membership was conducted at the start of each round's interview. Only persons who were "inscope" sometime during the year, were "Key", and responded for the full period in which they were inscope were assigned positive person-level weights and thus are to be used in the derivation of person-level national estimates from the MEPS.

Note: If analysts want to subset to infants born during 2006, then newborns should be identified using AGE06X = 0 rather than PSTATSxy = 51.

Inscope

The round-specific variables INSCOP31, INSCOP42, and INSCOP53 indicate a person's inscope status for Rounds 3/1, 4/2, and 5/3. INSCOP06, INSC1231, and INSCOPE indicate a person's inscope status for the portion of Round 5/3 that covers 2006, the person's inscope status as of 12/31/06, and whether a person was ever inscope during the calendar year 2006. A person was considered as inscope during a round or a referenced time period if he or she was a member of the U.S. civilian, noninstitutionalized population at some time during that round or that time period. The values of these variables taken in conjunction allow one to determine inscope status over time (for example, becoming inscope in the middle of a round, as would be the case for newborns). These variables may contain the following values and corresponding labels:

Value	Definition
0	Incorrectly listed, or on NHIS roster but out-of-scope prior to January 1, 2006
1	Person is inscope for the whole reference period
2	Person is inscope at the start of the RU reference period, but not at the end of the RU reference period
3	Person is not inscope at the start of RU reference period, but is inscope at the end of the RU reference period. (For example, the person is inscope from the date the person joined the RU or the person was in the military in the previous round, but is no longer in the military in the current round)
4	Person is inscope during the reference period, but neither at the reference start date nor on the reference end date. (For example, person leaves an institution, goes into community, and then dies)
5	Person is out-of-scope for all of the reference period during which he or she is in an RU member. (For example, the person is in the military)
6	Person is out-of-scope for the entire reference period and is not a member of the RU during this time period and was inscope and an RU member in an earlier round
7	Person is not in an RU, joined in a later round (or joined the RU after December 31, 2006 for INSCOP06)
8	RU Non-response and Key persons who left an RU with no tracing info and so a new RU was not formed
9	Person is non-Key or full-time in the military, not a member of an RU during this time period, and was an RU member in an earlier round

Keyness

The term “Keyness” is related to an individual’s chance of being included in MEPS. A person is Key if that person is linked for sampling purposes to the set of NHIS sampled households designated for inclusion in MEPS. Specifically, a Key person was a member of an NHIS household at the time of the NHIS interview or became a member of such a household after being out-of-scope at the time of the NHIS (examples of the latter situation include newborns and persons returning from military service, an institution, or living outside the United States).

A non-Key person is one whose chance of selection for the NHIS (and MEPS) was associated with a household eligible but not sampled for the NHIS and who later became a member of a MEPS Reporting Unit. MEPS data (e.g., utilization and income) were collected for the period of time a non-Key person was part of the sampled unit to provide information for family-level analyses. However, non-Key persons who leave a sample household unaccompanied by a Key, inscope member were not followed for subsequent interviews. Non-Key individuals do not receive sample person-level weights and thus do not contribute to person-level national estimates.

The variable KEYNESS indicates a person’s Keyness status. This variable is not round specific. Instead, it is set at the time the person enters MEPS, and the person’s Keyness status never changes. Once a person is determined to be Key, that person will always be Key.

It should be pointed out that a person might be Key even though not part of the civilian, noninstitutionalized portion of the U.S. population. For example, a person in the military may have been living with his or her civilian spouse and children in a household sampled for NHIS. The person in the military would be considered a Key person for MEPS; however, such a person would not be eligible to receive a person-level sample weight if he or she was never inscope during 2006.

Eligibility

The eligibility of a person for MEPS pertains to whether or not data were to be collected for that person. All of the Key inscope persons of a sampled RU were eligible for data collection. The only non-Key persons eligible for data collection were those who happened to be living in an RU with at least one Key, inscope person. Their eligibility continued only for the time that they were living with at least one such person. The only out-of-scope persons eligible for data collection were those who were living with Key inscope persons, again only for the time they were living with such a person. Only military persons can meet this description (for example, a person on full-time active duty military, living with a spouse who is Key).

A person may be classified as eligible for an entire round or for some part of a round. For persons who are eligible for only part of a round (for example, persons may have been institutionalized during a round), data were collected for the period of time for which that person was classified as eligible. The round-specific variables ELGRND31, ELGRND42, ELGRND53

and the end-of-year status variable ELGRND06 indicate a person's eligibility status for Rounds 3/1, 4/2 and 5/3 and as of December 31, 2006.

Person Disposition Status

The round-specific variables PSTATS31, PSTATS42, and PSTATS53 indicate a person's response and eligibility status for each round of interviewing. The PSTATSxy variables indicate the reasons for either continuing or terminating data collection for each person in the MEPS. Using this variable, one could identify persons who moved during the reference period, died, were born, institutionalized or who were in the military. Analysts should note that PSTATS53 provides a summary for all of Round 5/3, including transitions that occurred after 2006.

The following codes specify the value labels for the PSTATSxy variables.

Value	Definition
-1	The person was not fielded during the round or the RU was non-response
0	Incorrectly listed in RU at NHIS - applies to MEPS Round 1 only
11	Person in original RU , not full-time active military duty
12	Person in original RU, full-time active military duty, out-of-scope for whole reference period
13	Full-time student living away from home, but associated with sampled RU
14	The person is full-time active military duty during round, is inscope for part of the reference period and is in the RU at the end of the reference period
21	The person remains in a health care institution for the whole round - Rounds 4/2 and 5/3 only
22	The person leaves an institution (health care or non-health care) and rejoins the community - Rounds 4/2 and 5/3 only
24	The person dies in a health care institution during the round (former RU member) - Rounds 4/2 and 5/3 only
31	Person from original RU, dies during reference period
32	Went to health care institution during reference period
33	Went to non-healthcare institution during reference period
34	Moved from original RU, outside U.S. (not as student)
35	Moved from original RU, to a military facility while on full-time active military duty
36	Went to institution (type unknown) during reference period

Value	Definition
41	Moved from the original RU, to new RU within U.S. (new RUs include RUs originally classified as “Student RU” but which converted to “New RU”)
42	The person joins RU and is not full-time military during round
43	The person's disposition as to why the person is not in the RU is unknown or the person moves and it is unknown whether the person moved inside or outside the U.S.
44	The person leaves an RU and joins an existing RU and is not both in the military and coded as inscope during the round
51	Newborn in reference period
61	Died prior to reference period (not eligible)-Round 3/1 only
62	Institutionalized prior to reference period (not eligible)-Round 3/1 only
63	Moved outside U.S., prior to reference period (not eligible)-Round 3/1 only
64	Full-time military, living on a military facility, moved prior to reference period (not eligible)-Round 3/1 only
71	Student under 24 living away at school in grades 1-12 (Non-Key)
72	Person is dropped from the RU roster as ineligible: the person is a non-Key student living away or the person is not related to reference person or the RU is the person's residence only during the school year
73	Not Key and not full-time military, moved without someone Key and inscope (not eligible)
74	Moved as full-time military but not to a military facility and without someone Key and inscope (not eligible this round)
81	Person moved from original RU, full-time student living away from home, did not respond

2.5.2 Navigating the MEPS Data with Information on Person Disposition Status

Since the variables PSTATS31, PSTATS42, and PSTATS53 indicate the reasons for either continuing or terminating data collection for each person in MEPS, these variables can be used to explain the beginning and ending dates for each individual's reference period of data collection, as well as which sections in the instrument each individual did not receive. By using the information included in the following table, analysts will be able to determine for each individual which sections of the MEPS questionnaire collected data elements for that person.

Some individuals have a reference period that spans an entire round, while other individuals may have data collected only for a portion of the round. When an individual's reference period does not coincide with the RU reference period, the individual's start date may be a later date, or the end date may be an earlier date, or both. In addition, some individuals have reference period information coded as "Inapplicable" (e.g., for individuals who were not actually in the household). The information in this table indicates the beginning and ending dates of reference periods for persons with various values of PSTATS31, PSTATS42, and PSTATS53. The actual dates for each individual can be found in the following variables included on this file: BEGRFM31, BEGRFM42, BEGRFM53, BEGRFD31, BEGRFD42, BEGRFD53, BEGRFY31, BEGRFY42, BEGRFY53, ENDRFM31, ENDRFM42, ENDRFM53, ENDRFD31, ENDRFD42, ENDRFD53, ENDRFY31, ENDRFY42, ENDRFY53, ENDRFM06, ENDRFD06, and ENDRFY06.

The table below also describes the section or sections of the questionnaire that were **NOT** asked for each value of PSTATS31, PSTATS42, and PSTATS53. For example, the condition enumeration (CE) and preventive care (AP) sections have questions that are not asked for deceased persons. The closing section (CL) also contains some questions or question rosters (see CL06A, CL35 through CL37, CL48 through CL50, CL54, CL58, and CL64) that exclude certain persons depending on whether the person died, became institutionalized, or otherwise left the RU; however, no one is considered to have skipped the entire section. Some questions or sections (e.g., health status (HE), employment (RJ, EM, EW)) are skipped if individuals are not within a certain age range. Since the PSTATS variables do not address skip patterns based on age, analysts will need to use the appropriate age variables.

The paper-and-pencil Self-Administered Questionnaire (SAQ) was designed to collect information based on two age categories during Panel 11 Round 2 and Panel 10 Round 4. A person was considered eligible to receive an SAQ if that person did not have a status of deceased or institutionalized, did not move out of the U. S. or to a military facility, was not a non-response at the time of the Round 2 or Round 4 interview date, and was 18 years of age or older. No RU members added in Round 3 or Round 5 were asked to complete an SAQ questionnaire. Because PSTATS variables do not address skip patterns based on age, this questionnaire was not included in the table below. Once again, analysts will need to use the appropriate age variable which in this case would be AGE42X. The documentation for this questionnaire appears in the SAQ section of this document under "Health Status Variables."

Please note that the end reference date shown below for PSTATS53 reflects the Round 5/3 reference period rather than the portion of Round 5/3 that occurred during 2006.

PSTATS Value	PSTATS Description	Sections in the instrument which persons with this PSTATS value do NOT receive	Begin Reference Date	End Reference Date
-1	The person was not fielded during the round or the RU was non-response	ALL sections	Inapplicable	Inapplicable
0	Incorrectly listed in RU at NHIS - Round 1 only	ALL sections after RE	Inapplicable	Inapplicable
11	Person in original household, not FT active military duty (Person is in the same RU as the previous round)	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Interview date
12	Person in original household, FT active military duty, out-of-scope for whole reference period.	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Interview date
13	FT student living away from home, but associated with sampled household	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Interview date
14	The person is FT active military duty during round and is inscope for part of the reference period and is in the RU at the end of the reference period	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	PSTATS31: Interview date PSTATS42 and PSTATS53: If the person is living w/ someone Key and inscope, then the interview date. If not living w/ someone who is Key and inscope, then the date the person joined the military
21	The person remains in a health care institution for the whole round - Rounds 4/2 and 5/3 only	All sections after RE	Inapplicable	Inapplicable

PSTATS Value	PSTATS Description	Sections in the instrument which persons with this PSTATS value do NOT receive	Begin Reference Date	End Reference Date
22	The person leaves a health care institution and rejoins the community - Rounds 4/2 and 5/3 only	--	Date rejoined the community	Interview date
23	The person leaves a health care institution, goes into community and then dies - Rounds 4/2 and 5/3 only	Part of CE - Condition enumeration: Skip CE1 to-CE5 HE - Health status AC - Access to care Part of AP - Preventive care: Skip AP12 to AP22	Date rejoined the community	Date of Death
24	The person dies in a health care institution during the round (former household member) - Rounds 4/2 and 5/3 only	All sections after RE	Inapplicable	Inapplicable
31	Person from original household, dies during reference period	Part of CE - Condition enumeration: Skip CE1 to CE5 HE - Health status AC - Access to care Part of AP - Preventive care: Skip AP12 to AP22	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date of Death
32	Went to healthcare institution during reference period	Access to care (AC)	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date institutionalized
33	Went to non-healthcare institution during reference period	Access to care (AC)	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date institutionalized

PSTATS Value	PSTATS Description	Sections in the instrument which persons with this PSTATS value do NOT receive	Begin Reference Date	End Reference Date
34	Moved from original household, outside US	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date left the RU
35	Moved from original household, to a military facility while on FT active military duty	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date left the RU
36	Went to institution (type unknown) during reference period	Access to care (AC)	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Date institutionalized
41	Moved from the original household, to new household within US (new households include RUs originally classified as a student RU but which converted to a new RU; these are individuals in an RU that has split from an RU since the previous round)	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Interview date
42	The person joins household and is not full-time military during round	--	The later date of January 1, 2006 and the date the person joined the RU	Interview date
43	The person's disposition as to why the person is not in the RU is unknown or the person moves and it is unknown whether the person moved inside or outside the U.S.	All sections after RE	Inapplicable	Inapplicable

PSTATS Value	PSTATS Description	Sections in the instrument which persons with this PSTATS value do NOT receive	Begin Reference Date	End Reference Date
44	The person leaves an RU and joins an existing RU and is not both in the military and coded as inscope during the round	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date of the RU the person has joined. This may not be the interview date of the RU that the person came from	Interview date
51	Newborn in reference period	Questions where age must be > 1 Health status (HE), Disability days (DD) Employment (RJ/EM/EW) will be skipped)	PSTATS31: January 1, 2006 if born prior to 2006. The date of birth if born in 2006. PSTATS42 and PSTATS53: The later of the Prior round interview date and date of birth	Interview date
61	Died prior to reference period (not eligible)--Round 3/1 only	All sections after RE	Inapplicable	Inapplicable
62	Institutionalized prior to reference period (not eligible)--Round 3/1 only	All sections after RE	Inapplicable	Inapplicable
63	Moved outside U.S., prior to reference period (not eligible)--Round 3/1 only	All sections after RE	Inapplicable	Inapplicable
64	FT military, moved prior to reference period (not eligible)--Round 3/1 only	All sections after RE	Inapplicable	Inapplicable

PSTATS Value	PSTATS Description	Sections in the instrument which persons with this PSTATS value do NOT receive	Begin Reference Date	End Reference Date
71	Student under 24 living away at school in grades 1 through 12 (Non-Key)	--	PSTATS31: January 1, 2006 PSTATS42 and PSTATS53: Prior round interview date	Interview date
72	Person is dropped from the RU roster as ineligible: the person is a Non-Key student living away or the person is not related to reference person or the RU is the person's residence only during the school year	All sections after RE	Inapplicable	Inapplicable
73	Not Key and not full-time military, moved w/o someone Key and inscope (not eligible)	All sections after RE	Inapplicable	Inapplicable
74	Moved as full-time military but not to a military facility and w/o someone Key and inscope (not eligible)	All sections after RE	Inapplicable	Inapplicable
81	Person moved from original household, FT student living away from home, did not respond	No data were collected	Inapplicable	Inapplicable

2.5.3 Demographic Variables (AGE31X-DADIP53X)

General Information

Demographic variables provide information about the demographic characteristics of each person from the MEPS-HC. The characteristics include age, sex, race, ethnicity, educational attainment, marital status, and military service. As noted below, some variables have edited and imputed values. Most demographic variables on this file were asked during every round of the MEPS interview. These variables describe data for Rounds 3, 4, and 5 of Panel 10 (the panel that started in 2005); Rounds 1, 2 and 3 of Panel 11 (the panel that started in 2006); and status as of December 31, 2006. Demographic variables that are round specific are identified by names including numbers "xy", where x and y refer to Round numbers of Panels 10 and 11 respectively. Thus, for example, AGE31X represents the age data relevant to Round 3 of Panel 10 or Round 1 of Panel 11. As mentioned in Section 2.5.1 "Survey Administration" Variables, the variable PANEL indicates the panel from which the data were derived. A value of 10

indicates Panel 10 data and a value of 11 indicates Panel 11 data. The remaining demographic variables on this file are not round specific.

The variables describing demographic status of the person as of December 31, 2006 were developed in two ways. First, the age variable (AGE06X) represents the exact age as of 12/31/06, calculated from date of birth and indicates age status as of 12/31/06. For the remaining December 31st variables [i.e., related to marital status (MARRY06X, SPOUID06, SPOUIN06), student status (FTSTU06X), and the relationship to reference persons (RFREL06X)], the following algorithm was used: data were taken from Round 5/3 counterpart if non-missing; else, if missing, data were taken from the Round 4/2 counterpart; else from the Round 3/1 counterpart. If no valid data were available during any of these rounds of data collection, the algorithm assigned the missing value (other than -1 “Inapplicable”) from the first round that the person was part of the study. When all three rounds were set to -1, a value of -9 “Not Ascertained” was assigned.

Age

Date of birth and age for each RU member were asked or verified during each MEPS interview (DOBMM, DOBY, AGE31X, AGE42X, AGE53X). If date of birth was available, age was calculated based on the difference between date of birth and date of interview. Inconsistencies between the calculated age and the age reported during the CAPI interview were reviewed and resolved. For purposes of confidentiality, the variables AGE31X, AGE42X, AGE53X and AGE06X were top coded at 85 years.

When date of birth was not provided but age was provided (either from the MEPS interviews or the 2004-2005 NHIS data), the month and year of birth were assigned randomly from among the possible valid options. For any cases still not accounted for, age was imputed using:

- (1) the mean age difference between MEPS participants with certain family relationships (where available) or
- (2) the mean age value for MEPS participants.

For example, a mother’s age is imputed as her child’s age plus 26, where 26 is the mean age difference between MEPS mothers and their children. A wife’s age is imputed as the husband’s age minus 3, where 3 is the mean age difference between MEPS wives and husbands.

Age was imputed in this way for 59 persons on this file. Age was determined for 23 additional persons from data in a later round.

Sex

Data on the gender of each RU member (SEX) were initially determined from the 2004 NHIS for Panel 10 and from the 2005 NHIS for Panel 11. The SEX variable was verified and, if necessary, corrected during each MEPS interview. The data for new RU members (persons who were not members of the RU at the time of the NHIS interviews) were also obtained during each MEPS Round. When gender of the RU member was not available from the NHIS interviews and was

not ascertained during one of the subsequent MEPS interviews, it was assigned in the following way. The person's first name was used to assign gender if obvious (no cases were resolved in this way). If the person's first name provided no indication of gender, then family relationships were reviewed (no cases were resolved this way). If neither of these approaches made it possible to determine the individual's gender, gender was randomly assigned (1 case was resolved this way).

Race and Ethnicity Group

The race and the ethnic background questions were asked for each RU member during the MEPS interview. If the information was not obtained in Round 1, the questions were asked in subsequent rounds. It should be noted that race/ethnicity questions in the MEPS were revised starting in 2002. Race/ethnicity data from earlier years are not directly comparable. The following table shows the differences:

MEPS Race and Ethnicity Variables, by Years.

FY PUF 1996 – 2001	FY PUF 2002 – current
RACEX	RACEX
1 American Indian	1 White – No other race reported
2 Aleut, Eskimo	2 Black – No other race reported
3 Asian or Pacific Islander	3 American Indian / Alaska Native – No other race reported
4 Black	4 Asian – No other race reported
5 White	5 Native Hawaiian / Pacific Islander – No other race reported
91 Other	6 Multiple race reported
HISPANX	HISPANX
1 Hispanic	1 Hispanic
2 Not Hispanic	2 Not Hispanic
RACETHNX	RACETHNX
1 Person is Hispanic	1 Person is Hispanic
2 Person is Black / Not Hispanic	2 Person is Black – No other race reported / Not Hispanic
3 Other / Not Hispanic	3 Person is Asian – No other race reported / Not Hispanic
	4 Other race / Not Hispanic
HISPCAT	HISPCAT
-9 Not Ascertained	-9 Not Ascertained
-7 Refused	-8 DK
1 Puerto Rican	-7 Refused
2 Cuban	1 Puerto Rican
3 Mexican / Mexican American / Mexicano /Chicano	2 Cuban / Cuban American
4 Other Latin American / Other Spanish	3 Dominican
5 Non-Hispanic	4 Mexican / Mexican American
	5 Central or South American
	6 Non-Hispanic
	91 Other Latin American

FY PUF 1996 – 2001	FY PUF 2002 – current
	92 Other Hispanic / Latino
	RACEAX
	1 Asian – No other race reported
	2 Asian - Other race(s) reported
	3 All other race assignments
	RACEBX
	1 Black – No other race reported
	2 Black - Other race(s) reported
	3 All other race assignments
	RACEWX
	1 White – No other race reported
	2 White - Other race(s) reported
	3 All other race assignments

Values for these variables were obtained based on the following priority order. If available, data collected were used to determine race and ethnicity. If race and/or ethnicity were not reported in the interview, then data obtained from the originally collected NHIS data were used. If still not ascertained, the race, and/or ethnicity were assigned based on relationship to other members of the DU using a priority ordering that gave precedence to blood relatives in the immediate family (this approach was used on 85 persons to set race and 15 persons to set ethnicity).

Starting in 2002, individuals were allowed to choose more than one race and, as a result, three new variables were constructed: RACEBX, RACEAX, and RACEWX. RACEBX identifies individuals as being: 1) Black--- no other race reported, 2) Black--- other race(s) reported, or 3) not black. RACEAX and RACEWX are constructed similarly but apply to Asians and Whites. All race and ethnicity variables reflect the imputations done for RACEX and HISPANX. RACETHNX summarizes both race and ethnicity information in a single variable.

Marital Status and Spouse ID

Current marital status was collected and/or updated during every round of the MEPS interview. This information was obtained in RE13 and RE97 and is reported as MARRY31X, MARRY42X, MARRY53X and MARRY06X. Persons under the age of 16 were coded as 6 “Under 16 – Inapplicable”. If marital status of a specified round differed from that of the previous round, then the marital status of the specified round was edited to reflect a change during the Round (e.g., married in round, divorced in round, separated in round, or widowed in round).

In instances where there were discrepancies between the marital status of two individuals within a family, other person-level variables were reviewed to determine the edited marital status for each individual. Thus, when one spouse was reported as married and the other spouse reported as widowed, the data were reviewed to determine if one partner should be coded as 8 “Widowed in Round”.

Edits were performed to ensure some consistency across rounds. First, a person could not be coded as “Never Married” after previously being coded as any other marital status (e.g., “Widowed”). Second, a person could not be coded as “Under 16 – Inapplicable” after being previously coded as any other marital status. Third, a person could not be coded as “Married in Round” after being coded as “Married” in the round immediately preceding. Fourth, a person could not be coded as an “in Round” code (e.g., “Widowed in Round”) in two subsequent rounds. Since marital status can change across rounds and it was not feasible to edit every combination of values across rounds, unlikely sequences for marital status across the round-specific variables do exist.

The person identifier for each individual’s spouse is reported in SPOUID31, SPOUID42, SPOUID53, and SPOUID06. These are the PIDs (within each family) of the person identified as the spouse during Round 3/1, Round 4/2, and Round 5/3 and as of December 31, 2006, respectively. If no spouse was identified in the household, the variable was coded as 995 “No spouse in household”. Those with unknown marital status are coded as 996 “Marital Status Unknown”. Persons under the age of 16 are coded as 997 “Less than 16 Years Old”.

The SPOUIN31, SPOUIN42, SPOUIN53, and SPOUIN06 variables indicate whether a person’s spouse was present in the RU during Round 3/1, Round 4/2, Round 5/3 and as of December 31, 2006 respectively. If the person had no spouse in the household, the value was coded as 2 “Not Married/No Spouse”. For persons under the age of 16 the value was coded as 3 “Under 16 – Inapplicable”.

The SPOUID and SPOUIN variables were obtained from RE76 and RE77, where the respondent was asked to identify how each pair of persons in the household were related. Analysts should note that this information was collected in a set of questions separate from the questions that asked about marital status. While editing was performed to ensure that SPOUID and SPOUIN are consistent within each round, there was no consistency check between these variables and marital status in a given round. Apparent discrepancies between marital status and spouse information may be due to any of the following causes:

1. Ambiguity as to when during a round a change in marital status occurred. This is a result of relationship information being asked for all persons living in the household at any time during the round, while marital status is asked as of the interview date (e.g., If one spouse died during the reference period, the surviving spouse’s marital status would be “Widowed in Round”, but SPOUIN and SPOUID for the same round would indicate that a spouse was present).
2. Valid discrepancies in the case of persons who are married but not living with their spouse, or separating but still living together.
3. Discrepancies that cannot be explained for either of the previous reasons.

Student Status and Educational Attainment

The variables FTSTU31X, FTSTU42X, FTSTU53X and FTSTU06X indicate whether the person was a full-time student at the interview date (or 12/31/06 for FTSTU06X). These variables have

valid values for all persons between the ages of 17 - 23 inclusive. When this question was asked during Round 1 of Panel 11, it was based on age as of the 2005 NHIS interview date. Number of years of education completed is indicated in the variable EDUCYR. Information was obtained from question RE 103. Children who are 5 years of age or older and who never attended school were coded as 0; children under the age of 5 years were coded as -1 “Inapplicable” regardless of whether they attended school. However, among the cases coded as -1 “Inapplicable”, there is no distinction between those who were under the age of five and others who were inapplicable, such as persons who may be institutionalized for an entire round. EDUCYR is based on the first round in which the number of years of education is collected for a person. The user should note that EDUCYR is an unedited variable and minimal data cleaning was performed on this variable.

The variable HIDEG, indicating highest degree of education, was obtained from three questions: highest grade completed (RE103), high school diploma (RE104), and highest degree (RE105). Persons under 16 years of age were coded as 8 “Under 16 – Inapplicable”. In cases where the response to the highest degree question was “No degree” and the response to the highest grade question was 13 through 17 “1 or More Years of College”, the variable HIDEG was coded as 3 “High School Diploma”. If highest grade completed was “Refused” or “Don’t Know” for those with a “No Degree” response for the highest degree question, the variable HIDEG was coded as 1 “No Degree”. HIDEG is based on the first round in which the highest degree was collected for a person. The user should note that HIDEG is an unedited variable and minimal data cleaning was performed on this variable.

Military Service and Honorable Discharge

Information on active duty military status was collected during each round of the MEPS interview. Persons currently on full-time active duty status are identified in the variables ACTDTY31, ACTDTY42, and ACTDTY53. Those under 16 years of age were coded as 3 “Under 16 – Inapplicable”, and those over the age of 59 were coded as 4 “Over 59 – Inapplicable”.

Persons who have been honorably discharged from active duty in the Armed Forces are identified by HONRDC31, HONRDC42, and HONRDC53. Those 16 years of age and under are coded as 3 “16 or Younger – Inapplicable”, and those over 16 and currently serving on full-time active duty in the military are coded as 4 “Now Active Duty”.

Relationship to the Reference Person within Reporting Units

For each Reporting Unit (RU), the person who owns or rents the DU is usually defined as the reference person. For student RUs, the student is defined as the reference person. (For additional information on reference persons, see the documentation on survey administration variables.) The variables RFREL31X, RFREL42X, RFREL53X, and RFREL06X indicate the relationship of each individual to the reference person of the Reporting Unit (RU) in a given round. For the reference person, this variable has the value “Self”; for all other persons in the RU, relationship to the reference person is indicated by codes representing “Husband/Spouse”, “Wife/Spouse”, “Son”, “Daughter”, “Female Partner”, “Male Partner”, etc. A code of 91, meaning “Other

Related, Specify”, was used to indicate rarely observed relationship descriptions such as “Mother of Partner”. If the relationship of an individual to the reference person was not ascertained during the round-specific interview, relationships between other RU members were used, where possible, to assign a relationship to the reference person. If MEPS data from calendar year 2006 were not sufficient to identify the relationship of an individual to the reference person, relationship variables from the 2005 MEPS or NHIS data were used to assign a relationship. In the event that a meaningful value could not be determined or data were missing, the relationship variable was assigned a missing value code.

For 16 cases, where two individuals’ relationship indicated they were spouses, but both had marital status indicating they were not married, their relationship was changed to non-marital partners. In addition, the relationship variables were edited to insure that they did not change across rounds for RUs in which the reference person did not change, with the exception of relationships identified as partner, spouse, or foster relationships.

Parent Identifiers

The variables MOPID31X, MOPID42X, MOPID53X and DAPID31X, DAPID42X DAPID53X are round specific and are used to identify the parents (biological, adopted, or step) of the person represented on that record. MOPID##X contains the person identifier (PID) for each individual’s mother if she lived in the RU in that panel/round of the survey, or a value of –1 (Inapplicable) if she did not. Similarly, DAPID##X contains the person identifier (PID) for each individual’s father if he lived in the RU in that panel/round of the survey, or a value of –1 (Inapplicable) if he did not. MOPID##X and DAPID##X were constructed based on information collected in the relationship grid of the instrument each round at questions RE76 and RE77 and include biological, adopted, and step parents. Foster parents were not included. For persons who were not present in the household during a round, MOPID##X and DAPID##X have values of –1 (Inapplicable).

Edits were performed to ensure that MOPID##X and DAPID##X were consistent with each individual’s age, sex, and other relationships within the family. For instance, the gender of the parent must be consistent with the indicated relationship; mothers are at least 12 years older than the person and no more than 55 years older than the person; fathers are at least 12 years older than the person; each person has no more than one mother and no more than one father; any values set for MOPID##X and DAPID##X were removed from any person identified as a foster child; and the PID for the person’s mother and father are valid PIDs for that person’s RU for the 2006 Full Year File.

2.5.4 Income and Tax Filing Variables (SSIDIS06 – OTHIMP06)

The file provides income and tax-related variables that were constructed primarily from data collected in the Panel 10 Round 5 and Panel 11 Round 3 Income Sections. Person-level income amounts have been edited and imputed for every record on the full-year file, with detailed imputation flags provided as a guide to the method of editing. The tax-filing variables and some program participation variables are unedited, as discussed below.

During imputation, logical editing and weighted, sequential hot-decks were used to estimate income amounts for missing values (both for item nonresponse and for persons in the full-year file who were not in the income rounds). Reported income components were generally left unedited (with the few exceptions noted below). Thus, analysts using these data may wish to apply additional checks for outlier values that would appear to stem from misreporting.

The editing process began with wage and salary income, WAGEP06X. Complete responses were left unedited, and this group of people was assigned WAGIMP06=1, where WAGIMP06 is the imputation flag for wage and salary data. The only exception was for a small number of persons who reported zero wage and salary income despite having been employed for pay during the year according to round level data (see below). Since data on tax filing and on taxable income sources were collected using an approach that encouraged respondents to provide information from their federal tax returns, logical edits were used to assign separate income amounts to married persons whose responses were based on combined income amounts on their joint tax returns.

Persons assigned WAGIMP06=2 were those providing broad income ranges rather than giving specific dollar amounts. Weighted sequential hot-decking was used to provide these individuals with specific dollar amounts. For this imputation, donors were persons who reported specific dollar amounts within the corresponding broad income ranges. All WAGEP06X hot-deck imputations used cells defined on the basis of a conventional list of person-level characteristics including age, education, employment status, race, sex, and region.

Persons assigned WAGIMP06=3 were those who did not report wage and salary income and who were assigned WAGEP06X=0 based on not having been employed during the year.

Persons assigned WAGIMP06=4 were those who did not provide valid dollar amounts or dollar ranges, but for whom we had related information from the employment sections of the survey. In most cases this information included wages, hours, and weeks worked; for some persons, only hours and weeks worked data were reported in the employment section. The available employment section data were used to construct annualized wage amounts to be used in place of missing income section annual wage and salary data. Comparisons of reported and constructed wages and salaries using persons who provided both sorts of information yielded a high degree of confidence that employment data could be reliably used to derive values to serve in place of missing wage and salary information. To implement this approach, part-year responders were assumed to be fully-employed during the remainder of the year if they were employed during the period in which they provided data. An exception was made for those who either died or were institutionalized. These persons were assigned zero wages and salaries for the time they were not in MEPS.

Hot-deck imputation was used for the remaining persons with missing WAGEP06X. Donor pools included persons whose WAGEP06X amounts were edited in the steps described above. Whenever possible, the hot-deck imputations used data on whether or not the person had been employed at any point during the year (and, if available, the number of weeks worked). Imputations for persons deemed to have been employed were conditional in nature, using only donors with positive WAGEP06X amounts (WAGIMP06=5). Imputations for WAGEP06X for the remaining persons were unconditional, using both workers and non-workers as donors

(WAGIMP06=6).

After editing WAGEP06X for all persons in the full-year file, the remaining income sources were edited in the following sequence: INTRP06X, BUSNP06X, DIVDP06X, REFDP06X, ALIMP06X, SALEP06X, TRSTP06X, PENSP06X, IRASP06X, SSECP06X, UNEMP06X, WCMPP06X, VETSP06X, CASHP06X, OTHRP06X, CHLDP06X, SSIP06X, and PUBP06X. Income components were edited sequentially, in each case using information regarding income amounts that had already been edited (so as to maintain patterns of correlation across income sources whenever possible). In all cases, bracketed responses were edited first (using hot-deck imputations from donors in corresponding brackets who gave specific dollar amounts), followed by imputations for remaining missing values. The hot-deck imputations used cells defined on the basis of income amounts already edited and a conventional list of person-level characteristics such as age, education, employment status, race, sex, and region. In addition, hot-deck imputations for CHLDP06X used family-level information concerning marital status and the number of children. Hot-deck imputations for SSIP06X and PUBP06X were also assigned using, in part, simulated program eligibility indicators that integrated state-level program eligibility criteria with data on family composition and income.

In the hotdecks for some income types, information from the National Health Interview Survey (NHIS) was used. The NHIS sample is the frame for the new sample selected for MEPS collection each year, with a year's time lag. Data from the 2004 NHIS correspond to MEPS Panel 10, while those from the 2005 NHIS correspond to MEPS Panel 11. Because MEPS units come from the NHIS, it is possible to match individual MEPS responding units to an NHIS unit.

Taking advantage of this matching ability, income reciprocity indicators collected by NHIS were used in imputing for missing data in certain MEPS income components – interest, dividends, business income, pensions, and Social Security. (Not all MEPS income categories have an equivalent in NHIS. Also, wage data were available from NHIS, but were not used in the MEPS imputation process.)

In cases where data on a particular income category were missing for a person in MEPS, the indicator in that income category on the NHIS file was employed, if a valid response was supplied. Indicators were examined for the entire tax-filing unit (two people in the case of married couples filing jointly; one person in all other cases).

Reported income amounts of less than one dollar were treated as missing amounts (to be hot-decked from donors with positive amounts of the corresponding income source). Also, a very few cases of outlier responses were edited (primarily public sources of income that exceeded possible amounts). Otherwise, reported amounts were left unchanged.

For each income component, the corresponding xxxxIMP06 variable contains an indicator concerning the method for editing/imputation. All the flag variables have the following formatted values:

- 1 = Original response used;
- 2 = Bracket converted;

- 3 = Missing value set to 0;
- 4 = Weeks worked/earnings used (WAGIMP06 only);
- 5 = Conditional hot-deck;
- 6 = Unconditional hot-deck;

Missing values were set to zero when there were too few recipients to warrant hot-deck imputations of positive values (as in the case of ALIMP06X received by males). “Conditional hot-decks” indicate instances where the respondent indicated receipt but not a specific dollar amount. In these cases, the donor pool was restricted to persons with nonzero amounts of the income source in question. “Unconditional hot-decks” indicate instances where the donor pool included persons receiving both zero and nonzero amounts (implemented in cases where there was little or no information about a person’s income source).

Total person-level income (TTLP06X) is the sum of all income components with the exception of REFDP06X and SALEP06X (to match as closely as possible the CPS definition of income; see Section 2.5.4.2). Some researchers may wish to define their own income measure by adding in one or both of these excluded components.

The tax variables, food stamp variables, SSI disability flag, and welfare participation flag are all completely unedited. The variable on previous years’ files that indicated the monthly amount paid by a family for food stamps (FOODCT04 in the 2004 file) is no longer available due to the source question for the variable being deleted from the collection instrument. Note that while the welfare participation flag is named AFDC06, in fact this variable reflects participation in Temporary Assistance for Needy Families (TANF), with respondents having been prompted with “TANF”, “AFDC”, and “welfare.” Unedited tax variables are provided to assist researchers building tax simulation programs. No efforts have been made to eliminate inconsistencies among these program participation and tax variables and other MEPS data. All of these unedited variables should be used with great care.

2.5.4.1 Income Top-Coding

All income amounts on the file, including both total income and the separate sources of income, were top coded to preserve confidentiality. For each income source, top codes were applied to the top percentile of all cases (including negative amounts that exceeded income thresholds in absolute value). In cases where less than one percent of all persons received a particular income source, all recipients were top-coded.

Top-coded income amounts were masked using a regression-based approach. The regressions relied on many of the same variables used in the hot-deck imputations, with the dependent variable in each case being the natural logarithm of the amount that the income component was in excess of its top-code threshold. Predicted values from this regression were reconverted from logarithms to levels using a smearing correction, and these predicted amounts were then added back to the top-code thresholds. This approach preserves the component-by-component weighted means (both overall and among top-coded cases), while also preserving much of the income distribution conditional on the variables contained in the regressions. At the same time, this approach ensures that every reported amount in excess of its respective threshold is altered on

the public use file. The process of top-coding income amounts in this way inevitably introduces measurement error in cases where income amounts were reported correctly by respondents. Note, however, that top-coding can also help to reduce the impact of outliers that occur due to reporting errors.

Total income is constructed as the sum of the adjusted income components. Having constructed total income in this manner, this total was then top-coded using the same regression-based procedure described above (again masking the top percentile of cases). Finally, the components of income were scaled up or down in order to make the sources of income consistent with the newly-adjusted totals.

2.5.4.2 Poverty Status

The file includes a categorical variable for 2006 family income as a percentage of poverty (POVCAT06). The definitions of income, family, and poverty categories used were taken from the 2006 poverty statistics developed by the Current Population Survey (CPS).

Family income was derived by constructing person-level total income comprising annual earnings from wages, salaries, bonuses, tips, commissions; business and farm gains and losses; unemployment and workers' compensation; interest and dividends; alimony, child support, and other private cash transfers; private pensions, IRA withdrawals, social security, and veterans payments; supplemental security income and cash welfare payments from public assistance, Temporary Assistance for Needy Families, and related programs; gains or losses from estates, trusts, partnerships, S corporations, rent, and royalties; and a small amount of "other" income. Family income excluded tax refunds and capital gains. Person-level income totals were then summed over family members as defined by CPSFAMID to yield the family-level total.

POVCAT06 was constructed by dividing family income by the applicable poverty line (based on family size and composition), with the resulting percentages grouped into 5 categories; negative or poor (less than 100%), near poor (100% to less than 125%), low income (125% to less than 200%), middle income (200% to less than 400%), and high income (greater than or equal to 400%). Persons missing CPSFAMID were treated as one-person families in constructing POVCAT06. Family income, as well as the components of person level income, has been subjected to internal editing patterns and derivation methods that are in accordance to specific definitions, and are not being released at this time. Researchers working with a family definition other than CPSFAMID may wish to create their own versions of total family income (and perhaps POVCAT06).

2.5.5 Health Status Variables (RTHLTH31-DSPRX53)

Due to the overlapping panel design of the MEPS (Round 3 for Panel 10 overlapped with Round 1 for Panel 11, Round 4 for Panel 10 coincided with Round 2 for Panel 11, and Round 5 for Panel 10 occurred at the same time as Round 3 for Panel 11), data from overlapping rounds have been combined across panels. Thus, any variable ending in "31" reflects data obtained in Round 3 of Panel 10 and Round 1 of Panel 11. Analogous comments apply to variables ending in "42"

and “53”. Health Status variables whose names end in “06” indicate a full-year measurement.

This data release incorporates information from calendar year 2006. However, health status data obtained in Round 3 of both Panel 10 and Panel 11 are included in variables that have names ending in “31” and “53” respectively. For persons in Panel 10, Round 3 extended from 2005 into 2006. Therefore, for these people, some information from late 2005 is included for variables that have names ending in “31”. For persons in Panel 11, Round 3 extended from 2006 into 2007. Therefore, for these people, some information from early 2007 is included for variables that have names ending in “53”. Note that for most Panel 10 persons, the Round 5 reference period ends on December 31, 2006; however, the Round 5 interview actually occurs in 2007. Round 5 respondents receive an instruction at the start of the Health Status (HE) section of CAPI to limit information about health status and limitations to the period ending on December 31, 2006. Nevertheless, if respondents forget or ignore this reference period instruction, some information collected in this section in Round 5 (variables ending in “53”) might reflect circumstances in early 2007. Further, health status questions asked in the Condition Enumeration (CE), Preventive Care (AP), and Priority Conditions (PC) sections of CAPI in Round 5 do not contain a similar explicit instruction that the reference period ends on December 31, 2006, although this is stated at the start of the overall interview. Hence, in these sections, respondents may also be providing health status information that pertains to 2007.

Health Status variables in this data release can be classified into several conceptually distinct sets:

- Perceived health status and ADL (Activities of Daily Living) and IADL (Instrumental Activities of Daily Living) limitations
- Functional limitations and activity limitations
- Vision problems
- Hearing problems
- Any limitations
- Child health and preventive care
- Preventive care
- Priority conditions
- Self-administered questionnaire
- Diabetes care survey

Perceived health status and ADL and IADL limitations were measured in all rounds. Functional and activity limitations were measured in Rounds 3 and 5 for Panel 10 and Rounds 1 and 3 for Panel 11. Vision, hearing, and children’s health status were measured in Round 4 for Panel 10 and Round 2 for Panel 11. Preventive care and priority conditions were measured in Round 5 of Panel 10 and Round 3 of Panel 11. The self-administered questionnaire was distributed in Round 4 of Panel 10 and Round 2 of Panel 11. The diabetes care supplement was distributed in Round 5 of Panel 10 and Round 3 of Panel 11.

In general, Health Status variables involved the construction of person-level variables based on

information collected in the Condition Enumeration and Health Status sections of the questionnaire. Many Health Status questions were initially asked at the family-level to ascertain if anyone in the household had a particular problem or limitation. These were followed up with questions to determine which household member had each problem or limitation. All information ascertained at the family-level has been brought to the person-level for this file. Logical edits were performed in constructing the person-level variables to assure that family-level and person-level values were consistent. Particular attention was given to cases where missing values were reported at the family-level to ensure that appropriate information was carried to the person-level.

Inapplicable cases occurred when a question was never asked because of a skip pattern in the survey (e.g., individuals who were 13 years of age or older were not asked some follow-up verification questions; individuals older than 17 were not asked questions pertaining to children's health status). Inapplicable cases are coded as -1. In addition, deceased persons were coded as "Inapplicable" (-1).

Each of the sets of variables listed above will be described in turn.

2.5.5.1 Perceived Health Status and IADL and ADL Limitations

Perceived Health Status

Perceived health status (RTHLTH31, RTHLTH42, and RTHLTH53) and perceived mental health status (MNHLTH31, MNHLTH42, and MNHLTH53) were collected in the Condition Enumeration section. These questions (CE01 and CE02) asked the respondent to rate each person in the family according to the following categories: excellent, very good, good, fair, and poor.

IADL Help

The Instrumental Activities of Daily Living (IADL) Help or Supervision variables (IADLHP31, IADLHP42, and IADLHP53) were each constructed from a series of three questions administered in the Health Status section of the interview. The initial question (HE01) determined if anyone in the family received help or supervision with IADLs such as using the telephone, paying bills, taking medications, preparing light meals, doing laundry, or going shopping. If the response was "Yes", a follow-up question (HE02) was asked to determine which household member(s) received this help or supervision. For persons under age 13, a final verification question (HE03) was asked to confirm that the IADL help or supervision was the result of an impairment or physical or mental health problem. If the response to the final verification question was "No", IADLHP31, IADLHP42, and IADLHP53 were coded "No" for persons under the age of 13.

If no one in the family was identified as receiving help or supervision with IADLs, all members of the family were coded as receiving no IADL help or supervision. In cases where the response to the family-level question was "Refused" (-7), "Don't Know" (-8), or "Not Ascertained" (-9), all persons were coded according to the family-level response. In cases where the response to the

family-level question (HE01) was “Yes” but no specific individuals were identified in the follow-up question as having IADL difficulties, all persons were coded as “Don’t Know” (-8).

The Duration of IADL Condition variables (IADL3M31, IADL3M42 and IADL3M53) were constructed from a follow-up question (HE03A) in the Health Status section of the interview. For each person who received IADL help or supervision due to an impairment or physical or mental health problem (IADLHP## is coded “Yes”), HE03A was asked to determine whether the person was expected to need help or supervision with these activities for at least three more months. For persons coded “No” (2), “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9) for IADLHP##, IADL3M## was coded “Inapplicable” (-1).

ADL Help

The Activities of Daily Living (ADL) Help or Supervision variables (ADLHLP31, ADLHLP42, and ADLHLP53) were each constructed in the same manner as the IADL help variables, but using questions HE04-HE06. Coding conventions for missing data were the same as for the IADL variables.

The Duration of ADL Condition variables (ADL3MO31, ADL3MO42 and ADL3MO53) were constructed from a follow-up question (HE06A) in the Health Status section of the interview. For each person who received ADL help or supervision due to an impairment or physical or mental health problem (ADLHLP## is coded “Yes”), HE06A was asked to determine whether the person was expected to need help or supervision with these activities for at least three more months. For persons coded “No” (2), “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9) for ADLHLP##, ADL3MO## was coded “Inapplicable” (-1).

2.5.5.2 Functional and Activity Limitations

Functional Limitations

A series of questions pertained to functional limitations, which are defined as difficulty in performing certain specific physical actions. WLKLIM31 and WLKLIM53 were the filter questions, depending on the round. These variables were derived from a question (HE09) that was asked at the family-level: “Does anyone in the family have difficulties walking, climbing stairs, grasping objects, reaching overhead, lifting, bending or stooping, or standing for long periods of time?” If the answer was “No”, then all family members were coded as “No” (2) on WLKLIM31 or WLKLIM53. If the answer was “Yes”, then the specific persons who had any of these difficulties were identified and coded as “Yes” (1), and remaining family members were coded as “No” (2). If the response to the family-level question was “Don’t Know” (-8), “Refused” (-7), “Not Ascertained” (-9), or “Inapplicable” (-1), then the corresponding missing value code was applied to each family member’s value for WLKLIM31 or WLKLIM53. If the answer to HE09 was “Yes” (1) but no specific individual was named as experiencing such difficulties, then each family member was assigned “Don’t Know” (-8). Deceased persons were assigned a -1 code (“Inapplicable”) for WLKLIM31 or WLKLIM53.

For Rounds 3 (Panel 10) and 1 (Panel 11), if WLKLIM31 was coded “Yes” (1) for any family

member, a subsequent series of questions was administered. The series of questions for which WLKLIM31 served as a filter is as follows:

LFTDIF31 -	difficulty lifting 10 pounds
STPDIF31 -	difficulty walking up 10 steps
WLKDIF31 -	difficulty walking 3 blocks
MILDIF31 -	difficulty walking a mile
STNDIF31 -	difficulty standing 20 minutes
BENDIF31 -	difficulty bending or stooping
RCHDIF31 -	difficulty reaching over head
FNGRDF31 -	difficulty using fingers to grasp
WLK3MO31 -	expected to have difficulty with any of these activities for at least 3 more months

This series of questions was asked separately for each person whose response to WLKLIM31 was coded “Yes” (1). The series of questions was not asked for other individual family members whose response to WLKLIM31 was “No” (2). In addition, this series was not asked about family members who were less than 13 years of age, regardless of their status on WLKLIM31. These questions were not asked about deceased family members. In such cases (i.e., WLKLIM31 = 2, or age < 13, or PSTATS31 = 31), each question in the series was coded as “Inapplicable” (-1). Finally, if responses to WLKLIM31 were “Refused” (-7), “Don’t Know” (-8), “Not Ascertained” (-9), or otherwise “Inapplicable” (-1), then each question in this series was coded as “Inapplicable” (-1).

Analysts should note that WLKLIM31 was asked of all household members, regardless of age. For the subsequent series of questions, however, persons less than 13 years old were skipped and coded as “Inapplicable”. Therefore, it is possible for someone aged 12 or less to have a code of “Yes” (1) on WLKLIM31, and also to have codes of “Inapplicable” on the subsequent series of questions.

For Rounds 5 (Panel 10) and 3 (Panel 11), the corresponding filter question was WLKLIM53.

The series of questions for which WLKLIM53 served as a filter is as follows:

LFTDIF53 -	difficulty lifting 10 pounds
STPDIF53 -	difficulty walking up 10 steps
WLKDIF53 -	difficulty walking 3 blocks
MILDIF53 -	difficulty walking a mile
STNDIF53 -	difficulty standing 20 minutes
BENDIF53 -	difficulty bending or stooping
RCHDIF53 -	difficulty reaching over head
FNGRDF53 -	difficulty using fingers to grasp
WLK3MO53 -	expected to have difficulty with any of these activities for at least 3 more months

Editing conventions were the same for this “53” series of variables as they were for the corresponding “31” series described above.

Use of Assistive Technology and Social/Recreational Limitations

The variables indicating use of assistive technology (AIDHLP31 and AIDHLP53, from question HE07) and social/recreational limitations (SOCLIM31 and SOCLIM53, from question HE22) were collected initially at the family-level. If there was a “Yes” (1) response to the family-level question, a second question identified the specific individual(s) to whom the “Yes” response pertained. Each individual identified as having the difficulty was coded “Yes” (1) for the appropriate variable; all remaining family members were coded “No”. If the family-level response was “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” but no specific individual was identified as having difficulty, all family members were coded as “Don’t Know” (-8).

Work, Housework, and School Limitations

The variables indicating any limitation in work, housework, or school (ACTLIM31 and ACTLIM53) were constructed using questions HE19-HE20. Specifically, information was collected initially at the family-level. If there was a “Yes” (1) response to the family-level question (HE19), a second question (HE20) identified the specific individual(s) to whom the “Yes” (1) response pertained. Each individual identified as having a limitation was coded “Yes” (1) for the appropriate variable; all remaining family members were coded “No” (2). If the family-level response was “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” (1) but no specific individual was identified as having difficulty, all family members were coded as “Don’t Know” (-8). Persons less than five years old were coded as “Inapplicable” (-1) on ACTLIM31 and ACTLIM53.

For Round 3 (Panel 10) or Round 1 (Panel 11), if ACTLIM31 was “Yes” (1) and the person was 5 years of age or older, a follow-up question (HE20A) was asked to identify the specific limitation or limitations for each person. These included working at a job (WRKLIM31), doing housework (HSELIM31), or going to school (SCHLIM31). Respondents could answer “Yes” (1) or “No” (2) to each activity; thus a person could report limitations in multiple activities. WRKLIM31, HSELIM31, and SCHLIM31 have values of “Yes” (1) or “No” (2) only if ACTLIM31 was “Yes” (1); each variable was coded as “Inapplicable” (-1) if ACTLIM31 was “No” (2). When ACTLIM31 was “Refused” (-7), these variables were all coded as “Refused” (-7); when ACTLIM31 was “Don’t Know” (-8), these variables were all coded as “Don’t Know” (-8); and when ACTLIM31 was “Not Ascertained” (-9), these variables were all coded as “Not Ascertained” (-9). If a person was under 5 years old or was deceased, WRKLIM31, HSELIM31, and SCHLIM31 were each coded as “Inapplicable” (-1).

An additional question (UNABLE31) was asked if the person was completely unable to work at a job, do housework, or go to school. Those respondents who were coded “No” (2), “Refused” (-

7), “Don’t Know” (-8), or “Not Ascertained” (-9) on ACTLIM31, were under 5 years of age, or were deceased were coded as “Inapplicable” (-1) on UNABLE31. UNABLE31 was asked once for whichever set of WRKLIM31, HSELIM31, and SCHLIM31 the respondent had limitations; if a respondent was limited in more than one of these three activities, UNABLE31 did not specify if the respondent was completely unable to perform all of them, or only some of them.

For Rounds 5 (Panel 10) or 3 (Panel 11) corresponding variables were ACTLIM53, WRKLIM53, HSELIM53, SCHLIM53, and UNABLE53. Editing conventions were the same as those described above.

Cognitive Limitations

The variables indicating any cognitive limitation (COGLIM31 or COGLIM53, depending on the round) were collected at the family-level as a three-part question (HE24-01 to HE24-03), asking if any of the adults in the family (1) experience confusion or memory loss, (2) have problems making decisions, or (3) require supervision for their own safety. If a “Yes” response was obtained to any item, the persons affected were identified in HE25, and COGLIM31 or COGLIM53 was coded as “Yes” (1). Remaining family members not identified were coded as “No” (2) for COGLIM31 or COGLIM53.

If responses to HE24-01 through HE24-03 were all “No”, or if two of three were “No” (2) and the remaining was “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), all family members were coded as “No” (2). If responses to the three questions were combinations of “Don’t Know” (-8), “Refused” (-7), and missing, all persons were coded as “Don’t Know” (-8). If the response to any of the three questions was “Yes” (1) but no individual was identified in HE25, all persons were coded as “Don’t Know” (-8).

The cognitive limitations variables (COGLIM31 and COGLIM53) reflect whether any of the three component questions is “Yes” (1). Respondents with one, two, or three specific cognitive limitations cannot be distinguished. In addition, because the question asked specifically about adult family members, all persons less than 18 years of age are coded as “Inapplicable” (-1) on this question.

2.5.5.3 Vision Problems

A series of questions (HE26 to HE32) provides information on visual impairment. These questions were asked of all household members, regardless of age. Deceased respondents were coded as “Inapplicable” (-1).

WRGLAS42 indicates whether a person wears eyeglasses or contact lenses. This variable was based on two questions, HE26 and HE27. The initial question (HE26) determined if anyone in the family wore eyeglasses or contact lenses. If the response was “Yes” (1), a follow-up question (HE27) was asked to determine which household member(s) wore eyeglasses or contact lenses. If the family-level response was “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” (1) but no specific individual was identified as wearing glasses or contact lenses, all

family members were coded as “Don’t Know” (-8).

SEEDIF42 indicates whether anyone in the family had difficulty seeing (with glasses or contacts, if used). This variable was based on two questions, HE28 and HE29. The initial question (HE28) determined if anyone in the family had difficulty seeing. If the response was “Yes” (1), a follow-up question (HE29) was asked to determine which household member(s) had a visual impairment. If the family-level response was “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” (1) but no specific individual was identified as having difficulty seeing, all family members were coded as “Don’t Know” (-8).

Three subsequent questions were asked only of individuals who had difficulty seeing (i.e., SEEDIF42 was “Yes” (1)). Persons with no visual impairment were coded as “Inapplicable” (-1) for these questions, as were persons with “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9) responses to SEEDIF42. The three subsequent questions are summarized in the three subsequent variables. BLIND42 determined if a person with difficulty seeing was blind. For persons who were not blind (BLIND42 was “No” (2)), READNW42 asked whether the person could see well enough to read ordinary newspaper print (with glasses or contacts, if used); persons who were blind were not asked this question and were coded “Inapplicable” (-1). For persons who could not read ordinary newspaper print (READNW42 was “No” (2)), RECPEP42 asked if the person could see well enough to recognize familiar people standing two or three feet away. Persons who were blind or who could read newsprint were not asked this question and were coded “Inapplicable” (-1).

VISION42 summarizes the pattern of responses to the set of visual impairment questions. Codes for VISION42 are as follows:

Value	Definition
-1	All component variables are “Inapplicable” (SEEDIF42 was -1 and BLIND42 was -1 and READNW42 was -1 and RECPEP42 was -1)
-9	One or more component variables was “Refused” (-7), “Don't know” (-8), or “Not ascertained” (-9)
1	No difficulty seeing (SEEDIF42 was “No” (2))
2	Some difficulty seeing, can read newsprint (SEEDIF42 was “Yes” (1) and BLIND42 was “No” (2) and READNW42 was “Yes” (1))
3	Some difficulty seeing, cannot read newsprint, can recognize familiar people (SEEDIF42 was “Yes” (1) and BLIND42 was “No” (2) and READNW42 was “No” (2) and RECPEP42 was “Yes” (1))
4	Some difficulty seeing, cannot read newsprint, cannot recognize familiar people but is not blind (SEEDIF42 was “Yes” (1) and BLIND42 was “No” (2) and READNW42 was “No” (2) and RECPEP42 was “No” (2))
5	Blind (SEEDIF42 was “Yes” (1) and BLIND42 was “Yes” (1))

2.5.5.4 Hearing Problems

A series of questions (HE33 to HE39) provides information on hearing impairment. These questions were asked of all household members, regardless of age. Deceased respondents were coded “Inapplicable” (-1).

HEARAD42 indicates whether a person wears a hearing aid. This variable was based on two questions, HE33 and HE34. The initial question (HE33) determined if anyone in the family wore a hearing aid. If the response was “Yes”, a follow-up question (HE34) was asked to determine which household member(s) wore a hearing aid. If the family-level response was “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” but no specific individual was identified as wearing a hearing aid, all family members were coded as “Don’t Know” (-8).

HEARDI42 indicates whether a person had difficulty hearing (with a hearing aid, if used). This variable is based on two questions, HE35 and HE36. The initial question (HE35) determined if anyone in the family had difficulty hearing. If the response was “Yes”, a follow-up question (HE36) was asked to determine which household member had an aural impairment. If the family-level response was “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9), all persons were coded with the family-level response. In cases where the family-level response was “Yes” but no specific individual was identified as having difficulty hearing, all family members were coded as “Don’t Know” (-8).

Three subsequent questions were asked only of individuals who had difficulty hearing (i.e., HEARDI42 was “Yes” (1)). Persons with no hearing impairment were coded as “Inapplicable” (-1) for these questions, as were persons with “Don’t Know” (-8), “Refused” (-7), or “Not Ascertained” (-9) responses to HEARDI42. The three subsequent questions are summarized in the three subsequent variables. DEAF42 determined if a person with difficulty hearing was deaf. For persons who were not deaf (DEAF42 was “No” (2)), HEARMO42 asked whether the person could hear well enough to hear most of the things people say (with a hearing aid, if used); persons who were deaf were not asked this question and were coded as “Inapplicable” (-1). For persons who could not hear most things people say (HEARMO42 was “No” (2)), HEARSM42 asked if the person could hear well enough to hear some of the things that people say. Persons who were deaf or who could hear most conversation were not asked this question and were coded as “Inapplicable” (-1).

HEARNG42 summarizes the pattern of responses to the set of hearing impairment questions. Codes for HEARNG42 are as follows:

Value	Definition
-1	All component variables are “Inapplicable” (HEARDI42 was -1 and DEAF42 was -1 and HEARMO42 was -1 and HEARSM42 was -1)
-9	One or more component variables was “Refused” (-7), “Don't know” (-8), or “Not ascertained” (-9)
1	No difficulty hearing (HEARDI42 was “No” (2))

Value	Definition
2	Some difficulty hearing, can hear most things people say (HEARDI42 was “Yes” (1) and DEAF42 was “No” (2) and HEARMO42 was “Yes” (1))
3	Some difficulty hearing, cannot hear most things people say, can hear some things people say (HEARDI42 was “Yes” (1) and DEAF42 was “No” (2) and HEARMO42 was “No” (2) and HEARSM42 was “Yes” (1))
4	Some difficulty hearing, cannot hear most things people say, cannot hear some things people say but is not deaf (HEARDI42 was “Yes” (1) and DEAF42 was “No” (2) and HEARMO42 was “No” (2) and HEARSM42 was “No” (2))
5	Deaf (HEARDI42 was “Yes” (1) and DEAF42 was “Yes” (1))

2.5.5.5 Any Limitation Rounds 3, 4, and 5 (Panel 10) / Rounds 1, 2, and 3 (Panel 11)

ANYLIM06 summarizes whether a person has any ADL, IADL, activity, functional, or sensory limitations in any of the pertinent rounds. This variable was derived based on data from Rounds 3, 4, and 5 (Panel 10) or Rounds 1, 2, and 3 (Panel 11). ANYLIM06 was built using the component variables IADLHP31, IADLHP42, IADLHP53, ADLHLP31, ADLHLP42, ADLHLP53, WLKLIM31, WLKLIM42, WLKLIM53, ACTLIM31, ACTLIM53, SEEDIF42, and HEARDI42. (The latter two variables, discussed above, indicate any visual or hearing impairment, respectively.) If any of these components was coded “Yes”, then ANYLIM06 was coded “Yes” (1). If all components were coded “No”, then ANYLIM06 were coded “No” (2). If all the components were “Inapplicable” (-1), then ANYLIM06 was coded as “Inapplicable” (-1). If all the components had missing value codes (i.e., -7, -8, -9, or -1), ANYLIM06 was coded as “Not Ascertained” (-9). If some components were “No” and others had missing value codes, ANYLIM06 was coded as “Not Ascertained” (-9). The exception to this latter rule was for children younger than five years old, who were not asked questions that are the basis for ACTLIM31 or ACTLIM53; for these respondents, if all other components were “No”, then ANYLIM06 was coded as “No” (2). The variable label for ANYLIM06 departs slightly from conventions. Typically, variables that end in “06” refer only to 2006. However, some of the variables used to construct ANYLIM06 were assessed in 2007, so some information from early 2007 is incorporated into this variable.

2.5.5.6 Child Health and Preventive Care

Starting in 2001, a Child Health and Preventive Care section was added to Rounds 2 and 4 of MEPS, and it contains questions that had been in the 2000 Parent Administered Questionnaire (PAQ), selected children’s questions that had been asked in previous years, and additional child preventive care questions. Questions were asked about each child (under the age of 18 excluding deceased children) in the applicable age subgroups to which they pertained. For the Child Supplement variables, a code of “Inapplicable” (-1) was assigned if a person was deceased, was not in the appropriate Round 2 or 4, or was not in the applicable age subgroup as of the interview date. This public use dataset contains variables and frequency distributions from the Child

Health and Preventive Care Section associated with 10,017 children who were eligible for the Child Health and Preventive Care Section. Children were eligible for this section when PSTATS42 was not equal to 31 (Deceased) and $0 \leq \text{AGE42X} \leq 17$. Of these children, 9,630 were assigned a positive person-level weight for 2006 ($\text{PERWT06F} > 0$). Cases not eligible for the Child Health and Preventive Care Section should be excluded from estimates made with the Child Health and Preventive Care Section. Questions in this section that previously had been in the Parent Administered Questionnaire in 2000 may produce slightly different estimates starting in 2001 due to the change in mode from a self-administered parent questionnaire in 2000 to an interviewer administered questionnaire starting in 2001.

Children's General Health Status Questions (ages 0 - 17)

Several questions from the General Health Subscale of the Child Health Questionnaire were asked about all children ages 0 through 17. The questions asked starting in 2001 are slightly different from the questions asked in previous years. A key reference for the Child Health Questionnaire is:

Landgraf JM, Abaetz L., Ware JE. The CHQ User's Manual. First Edition. Boston, MA: The Health Institute, New England Medical Center, 1996.

Four questions asked for ratings of the child's health on a 5-point scale, ranging from "Definitely True" (1) to "Definitely False" (5). These questions were:

LSHLTH42 - child seems less healthy than other children

NEVILL42 - child has never been seriously ill

SICEAS42 - child usually catches whatever is going around

HLTHLF42 - expect child will have a healthy life

WRHLTH42 - worry more than is usual about child's health

Children with Special Health Care Needs Screener (ages 0 - 17)

The Children with Special Health Care Needs (CSHCN) Screener instrument was developed through a national collaborative process as part of the Child and Adolescent Health Measurement Initiative (CAHMI) under the coordination by the Foundation for Accountability. A key reference for this screener instrument is:

Bethel CD, Read D, Stein REK, Blumberg SJ, Wells N, Newacheck PW. Identifying Children with Special Health Care Needs: Development and Evaluation of a Short Screening Instrument. *Ambulatory Pediatrics* Volume 2, No. 1, January-February 2002, pp 38-48.

These questions are asked about children ages 0–17 and had been asked in the 2000 PAQ. In general, the CSHCN screener identifies children with activity limitation or need or use of more health care or other services than is usual for most children of the same age. When a response to

a gate question was set to “No” (2), “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), follow-up variables based on the gate question were coded as “Inapplicable” (-1).

The variable CSHCN42 identifies children with special health care needs, and was created using the CSHCN screener questions according to the specifications in the reference above. The CSHCN screener questions consist of a series of question-sequences about the following five health consequences: the need or use of medicines prescribed by a doctor; the need or use of more medical care, mental health, or education services than is usual for most children; being limited or prevented in doing things most children can do; the need or use of special therapy such as physical, occupational, or speech therapy; and the need or use of treatment or counseling for emotional, developmental, or behavioral problems. Parents who responded “yes” to any of the “initial” questions in the five question-sequences were then asked to respond to up to two follow-up questions about whether the health consequence was attributable to a medical, behavioral, or other health condition lasting or expected to last at least 12 months. Children with positive responses to at least one of the five health consequences along with all of the follow-up questions were identified as having a Special Health Care Need. Children with a “no” response for at least one question for each of the five question-sequences were considered NOT to have a Special Health Care Need. Those children whose “special health care need” status could not be determined (due to missing data for any of the questions) were coded as “Unknown”. More information about the CSHCN screener questions can be obtained from markle.org/resources/facct/.

The CSHCN screener questions were:

CHPMED42 -	child needs or uses prescribed medicines
CHPMHB42 -	prescribed medicines were because of a medical, behavioral, or other health condition
CHPMC42 -	health condition that causes a person to need prescribed medicines has lasted or is expected to last for at least 12 months
CHSERV42 -	child needs or uses more medical care, mental health, or education services than is usual for most children of the same age
CHSRHB42 -	child needs or uses more medical and other service because of a medical, behavioral, or other health condition
CHSRC42 -	health condition that causes a person to need or use more medical and other services has lasted or is expected to last for at least 12 months
CHLIMI42 -	child is limited or prevented in any way in ability to do the things most children of the same age can do
CHLIHB42 -	child is limited in the ability to do the things most children can do because of a medical, behavioral, or other health condition
CHLICO42 -	health condition that causes a person to be limited in the ability to do the things most children can do has lasted or is expected to last for at least 12 months

CHTHER42 -	child needs or gets special therapy such as physical, occupational, or speech therapy
CHTHHB42 -	child needs or gets special therapy because of a medical, behavioral, or other health condition
CHTHCO42 -	health condition that causes a person to need or get special therapy has lasted or is expected to last for at least 12 months
CHCOUN42 -	child has an emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling
CHEMPB42 -	problem for which a person needs or gets treatment or counseling is a condition that has lasted or is expected to last for at least 12 months
CSHCN42 -	identifies children with special health care needs

Columbia Impairment Scale (ages 5 - 17)

These questions inquired about possible child behavioral problems and were asked in previous years. Respondents were asked to rate on a scale from 0 to 4, where “0” indicates “No Problem” and “4” indicates “A Very Big Problem”, how much of a problem the child has with thirteen specified activities. A key reference for the Columbia Impairment Scale is:

Bird HR, Andrews H, et. al. “Global Measures of Impairment for Epidemiologic and Clinical Use with Children and Adolescents.” *International Journal of Methods in Psychiatric Research*, vol. 6, 1996, pp. 295-307.

Certain questions in this series were coded to “Asked, but Inapplicable” (99) when the question was not applicable for a specific child. For example, if a child’s mother was deceased, a question about how much of a problem a child has getting along with his/her mother would be set to “Asked, but Inapplicable” (99). Similarly, the question about problems getting along with siblings would be set to “Asked, but Inapplicable” (99) for children with no siblings. Variables in this set include:

MOMPRO42 -	getting along with mother
DADPRO42 -	getting along with father
UNHAP42 -	feeling unhappy or sad
SCHLBH42 -	(his/her) behavior at school
HAVFUN42 -	having fun
ADUPRO42 -	getting along with adults
NERVAF42 -	feeling nervous or afraid
SIBPRO42 -	getting along with brothers and sisters
KIDPRO42 -	getting along with other kids
SPRPRO42 -	getting involved in activities like sports or hobbies
SCHPRO42 -	(his/her) schoolwork

HOME42 - (his/her) behavior at home
TRBLE42 - staying out of trouble

CAHPS® (Consumer Assessment of Healthcare Providers and Systems) ages 0 - 17

The health care quality measures were taken from the health plan version of CAHPS®, an AHRQ sponsored family of survey instruments designed to measure quality of care from the consumer’s perspective and had been asked in the 2000 PAQ. While there have been several changes in these questions since 2000 that are discussed in the specific year’s file documentation, there were no changes to these questions from 2005 to 2006. All of the CAHPS® variables refer to events experienced in the last 12 months. The variables included from the CAHPS® are:

CHILCR42 - whether a person had an illness, injury, or condition that needed care right away from a clinic, emergency room, or doctor’s office

CHILWW42 - how often a person got care as soon as was wanted for an illness, injury, or condition (coded as “-1 Inapplicable” when CHILCR42=2, -7, -8, or -9)

CHRTCR42 - whether any appointments were made to see a doctor or other health provider for routine health care

CHRTWW42 - how often a person got an appointment for routine health care as soon as was wanted (coded as “-1 Inapplicable” when CHRTCR42=2, -7, -8, or -9)

CHAPPT42 - how many times a person went to a doctor’s office or clinic for care

CHNDCR42 - whether the parent or a doctor believed the person needed any care, tests or treatment (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, -9)

CHNECP42 - how much of a problem it was to get a person the care, tests or treatment that the parent or a doctor believed necessary (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9 or when CHNDCR42=2, -7, -8, -9)

CHLIST42 - how often a person’s doctors or other health providers listened carefully to the parent (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9)

CHEXPL42 - how often a person’s doctors or other health providers explained things in a way the parent could understand (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9)

CHRESP42 - how often a person’s doctors or other health providers showed respect for what the parent had to say (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9)

CHPRTM42 -	how often doctors or other health providers spent enough time with a person and parent (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9)
CHHECR42 -	rating of health care from 0 to 10 where 0 =Worst health care possible and 10=Best health care possible (coded as “-1 Inapplicable” when CHAPPT42=0, -7, -8, or -9)
CHSPEC42 -	whether a person needed to see a specialist
CHPRRE42 -	how much of a problem it was to see a specialist that child needed to see (coded as “-1 Inapplicable” when CHSPEC42=2, -7, -8, or -9)

Child Preventive Care (age range depends on question)

A series of questions was asked about amounts and types of preventive care a child may receive when going to see a doctor or other health provider. Questions are asked of children of different age groups depending on the nature of the questions. When a response to a gate question was set to “No” (2), “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), follow-up variables based on the gate question were coded as “Inapplicable” (-1). Variables in this set include:

MESHGT42 -	doctor or other health provider ever measured child’s height (0 – 17)
WHNHGT42 -	when doctor or other health provider measured child’s height (0 – 17)
MESWGT42 -	doctor or other health provider ever measured child’s weight (0 – 17)
WHNWGT42 -	when doctor or other health provider measured child’s weight (0 – 17)
CHBMIX42 -	child’s Body Mass Index (BMI) as based on child’s reported height and weight (6 – 17)
MESVIS42 -	doctor or other health provider ever checked child’s vision (3 – 6)
MESBPR42 -	doctor or other health provider ever checked child’s blood pressure (2 – 17)
WHNBPR42 -	when doctor or other health provider checked child’s blood pressure (2 – 17)
DENTAL42 -	doctor or other health provider ever advised a dental checkup (2 – 17)
WHNDEN42 -	when doctor or other health provider advised a dental checkup (2 – 17)

EATHLT42 -	doctor or other health provider ever given advice about child's eating healthy (2 – 17)
WHNEAT42 -	when doctor or other health provider gave advice about eating healthy (2 – 17)
PHYSCL42 -	doctor or other health provider ever given advice about the amount and kind of exercise, sports or physically active hobbies the child should have (2 – 17)
WHNPHY42 -	when doctor or other health provider gave advice about exercise (2 – 17)
SAFEST42 -	doctor or other health provider ever given advice about using a safety seat when child rides in the car (weight <= 40 pounds or age 0 - 4 if weight is missing)
WHNSAF42 -	when doctor or other health provider gave advice about using a safety seat (weight <= 40 pounds or age 0 - 4 if weight is missing)
BOOST42 -	doctor or other health provider ever given advice about using a booster seat when child rides in the car (weight between 41 and 80 pounds or age > 4 and age <= 9 if weight is missing)
WHNBST42 -	when doctor or other health provider gave advice about using a booster seat (weight between 41 and 80 pounds or age > 4 and age <= 9 if weight is missing)
LAPBLT42 -	doctor or other health provider ever given advice about using lap and shoulder belts when child rides in the car (weight > 80 pounds or age > 9 if weight is missing)
WHNLAP42 -	when doctor or other health provider gave advice about using lap and shoulder belts (weight > 80 pounds or age > 9 if weight is missing)
HELMET42 -	doctor or other health provider ever given advice about the child's using a helmet when riding a bicycle or motorcycle (2 – 17)
WHNHEL42 -	when doctor or other health provider gave advice about the child's using a helmet when riding a bicycle or motorcycle (2 – 17)
NOSMOK42 -	doctor or other health provider ever given advice about how smoking in the house can be bad for child's health (0 – 17)
WHNSMK42 -	when doctor or other health provider gave advice about how smoking in the house can be bad for the child's health (0 – 17)
TIMALN42 -	during last health care visit, doctor or other health provider spent any time alone with the child (12 – 17)

Due to confidentiality concerns and restrictions, the variables HGTFT42, HGTIN42, WGTLB42 and WGTOZ42, will not be included on the Full-Year 2006 file. Instead, a Body Mass Index (BMI) variable, CHBMIX42, was calculated and included for children 6-17 years old. Due to a high percentage of missing height data for children ages 5 and under (27%), these children were given a “-1 Inapplicable” code for the variable CHBMIX42. CHBMIX42 is included in the 2006 file and on the above list. Please note: analysts can have access to the height and weight variables and/or construct a BMI variable of their own through the MEPS Data Center. To access information on the MEPS Data Center including an application, please go to the following Web address: www.meps.ahrq.gov/data_stats/onsite_datacenter.jsp.

The steps used to calculate the BMI for children 6-17 are as follows:

1. Construct child height and weight variables HGTFT42, HGTIN42, WGTLB42 and WGTOZ42 based on collected data
2. Create a preliminary data set containing height, weight, sex and age data.
3. Generate a preliminary child BMI using the preliminary data set and the procedure for calculating the BMI for children as described on the Centers for Disease Control and Prevention (www.cdc.gov) Web site
4. Create the child BMI variable CHBMIX42 using the preliminary child BMI, setting all deceased persons and all persons over 17 years old and all persons 5 years old or younger to Inapplicable (-1)

Note that for FY 2006, child height and weight were not top-coded prior to the construction of the preliminary data set. Where height in feet was > 0 and height in inches was missing, the mid-point value for height in inches (6 inches) was assigned to HGTIN42 for use in the calculation of the child BMI. Where height in feet was 0 and height in inches was missing, the preliminary child BMI was set to “Not Ascertained” (-9).

For cases where weight in pounds was between 1 and 20 and weight in ounces was missing (WGTOZ42 in (-7,-8,-9)), the mid-point value for weight in ounces (8 ounces) was assigned to WGTOZ42 for use in the calculation of the child BMI. Where weight in pounds was 0 and weight in ounces was missing, the preliminary child BMI was set to “Not Ascertained” (-9).

This use of the mid-points for inches and ounces ensures that children who have feet but not inches in height and/or pounds but not ounces in weight are included in the BMI calculation.

As indicated in step 2 above a preliminary SAS data set containing height, weight, sex and age data for children 6-17 years old in FY 2006 was created. Two SAS programs were downloaded from the Centers for Disease Control and Prevention Web site for the purpose of calculating the BMI for children (step 3). These programs used the preliminary data set of children to generate a preliminary child BMI based on the 2000 CDC growth charts (www.cdc.gov/growthcharts/). These programs used the following formula to calculate the preliminary BMI for children:

$$\text{Weight in Kilograms} / [(\text{Height in Centimeters}/100)]^2$$

Note that weight in pounds and ounces was converted to weight in kilograms in the preliminary data set. Similarly, height in feet and inches was converted to height in centimeters in the preliminary data set.

As indicated in step 4 above, the child BMI variable CHBMIX42 was calculated using this preliminary BMI from step 3. Deceased persons, persons > 17 years old, and children younger than 6 years old were set to Inapplicable (-1) for CHBMIX42. Children 6-17 years old with a missing value for height in feet (HGTFT42 is “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9)) and/or weight in pounds (WGTLB42 is “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9)) were set to Not Ascertained (-9) for CHBMIX42. Children whose height in feet was 0 and height in inches was missing (HGTIN42 is “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9)) were set to “Not Ascertained” (-9) for CHBMIX42. Children whose weight in pounds was 0 and weight in ounces was missing (WGTOZ42 is “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9)) were set to “Not Ascertained” (-9) for CHBMIX42. All other children 6-17 years old have a calculated BMI for FY 2006.

As in 2005, CHBMIX42 was not top- or bottom-coded or edited.

2.5.5.7 Preventive Care Variables

For each person, excluding deceased persons, a series of questions was asked primarily about the receipt of preventive care or screening examinations. Questions varied in the applicable age or gender subgroups to which they pertained. The list of variables in this series, along with their applicable subgroup is as follows:

DENTCK53 -	on average, frequency of dental check-up All ages; both genders
CHOLCK53 -	about how long since last blood cholesterol check by doctor or health professional Age >17; both genders
CHECK53 -	how long since last routine check-up by doctor or other health professional for assessing overall health Age >17; both genders
FLUSHT53 -	how long since last flu shot Age >17; both genders
LSTETH53 -	has person lost all natural (permanent) teeth Age >17; both genders
PSA53 -	how long since last prostate specific antigen (PSA) test Age >39; males only

HYSTER53 -	had a hysterectomy Age >17; females only
PAPSMR53 -	how long since last pap smear test Age >17; females only
BRSTEX53 -	how long since last breast exam Age >17; females only
MAMOGR53 -	how long since last mammogram Age >29; females only
STOOL53 -	ever had a blood stool test performed at home that was provided by doctor or other health professional to determine whether stool contains blood Age >17; both genders
WHENST53 -	when was last time had blood stool test using home kit Age >17; STOOL53=1 (yes, person had a blood stool test performed at home that was provided by doctor or other health professional to determine whether stool contains blood)
BOWEL53 -	ever had sigmoidoscopy or colonoscopy Age >17; both genders
WHNBWL53 -	when was last sigmoidoscopy or colonoscopy Age >17; BOWEL53=1 (yes, person had sigmoidoscopy or colonoscopy)
PHYACT53 -	currently spends half hour or more in moderate to vigorous physical activity at least three times a week Age>17; both genders
BMINDEX53 -	Adult Body Mass Index (BMI) as based on reported height and weight Age > 17; both genders
SEATBE53 -	wears seat belt when drives or rides in a car Age >15; both genders

For each of the variables above, a code of “Inapplicable” (-1) was assigned if the person was deceased or if the person did not belong to the applicable subgroups.

Due to confidentiality concerns and restrictions, the variables HGHTFT53, HGHTIN53, WEIGHT53 and WGTEST53, will not be included on the Full-Year 2006 file. Instead, a Body Mass Index (BMI) variable, BMINDEX53, was calculated for adults 18 years of age or older.

BMINDEX53 is included in the 2006 file and on the above list. Please note: analysts can have access to the height and weight variables and/or construct a BMI variable of their own through the MEPS Data Center. To access information on the MEPS Data Center including an application, please go to the following Web address:
meps.ahrq.gov/data_stats/onsite_datacenter.jsp.

BMI categories for adults are the following:

- Underweight = BMI is less than 18.5,
- Normal Weight = BMI is between 18.5 – 24.9 inclusive,
- Overweight = BMI is between 25.0 – 29.9 inclusive, and
- Obesity = BMI greater than or equal to 30.0

The following formula used to calculate the BMI for adults was taken from the Centers for Disease Control and Prevention (www.cdc.gov/) Web site:

$$\text{BMI} = [\text{Weight in Pounds} / (\text{Height in Inches})^2] * 703$$

The steps used to calculate the BMI for adults are as follows:

1. Construct adult height, weight and weight estimate variables HGHTFT53, HGHTIN53, WEIGHT53 and WGTEST53
2. Create the building block variable ADHGTTIN, indicating total height in inches for adults => 18 years old
3. Create the temporary variable MIDWGT, indicating the mid-point value of a person's estimate of weight (WGTEST53)
4. Create the adult BMI variable BMINDEX53 using the building block and the temporary variable, setting all deceased persons and all persons < 18 years old to Inapplicable (-1)

For FY 2006, adult height and weight were not top- or bottom-coded prior to the construction of the adult BMI.

The building block variable ADHGTTIN was calculated as $[(\text{HGHTFT53} * 12) + (\text{HGHTIN53})]$ to indicate total adult height in inches, step 2. Note that ADHGTTIN was created for programming efficiency only and is not included in this data release. For cases where height in feet was > 0 ($\text{HGHTFT53} > 0$) and height in inches was missing (HGHTIN53 in (-7, -8, -9)), the mid-point value for height in inches (6 inches) was used in the calculation of total height in inches $[\text{ADHGTTIN} = (\text{HGHTFT53} * 12) + 6]$. This use of the mid-point for inches ensures that adults who have feet but not inches in height are included in the BMI calculation. ADHGTTIN was set to Not Ascertained (-9) for all cases where adult height in feet was "Refused", "Don't Know", or "Not Ascertained" (HGHTFT53 in (-7, -8, -9)). Deceased persons and persons whose age was less than 18 years old were set to Inapplicable (-1) for ADHGTTIN.

The temporary variable MIDWGT was calculated to indicate the mid-point value of person's estimate of weight (WGTEST53), step 3. The value 400, rather than a mid-point, was assigned to MIDWGT where estimate of weight was "400 pounds or more" (WGTEST53 = 18). Note that MIDWGT was created for programming efficiency only and is not included in this data release.

The adult BMI variable BMINDEX53 was calculated (step 4) using the building block variable ADHGTIN and adult weight in pounds (WEIGHT53) as follows:

$$\text{BMINDEX53} = [\text{WEIGHT53} / (\text{ADHGTIN})^2] * 703$$

For adults whose weight in pounds was "Don't Know" (WEIGHT53 = -8) and whose estimate of weight was > 0 (WGTEST53 between 1 and 18), MIDWGT was used in the calculation of BMINDEX53:

$$\text{BMINDEX53} = [\text{MIDWGT} / (\text{ADHGTIN})^2] * 703$$

BMINDEX53 was set to "Not Ascertained" (-9) for adults whose weight in pounds was "Refused" or "Not Ascertained" (WEIGHT53 in (-7, -9)). BMINDEX53 was set to "Not Ascertained" (-9) for adults whose weight in pounds was "Don't Know" (-8) and whose estimate of weight was "Refused", "Don't Know", or "Not Ascertained" (WGTEST53 in (-7, -8, -9)). BMINDEX53 was set to "Not Ascertained" (-9) for adults whose total height in inches was "Not Ascertained" (ADHGTIN = -9). Deceased persons and persons whose age was less than 18 years old were set to "Inapplicable" (-1) for BMINDEX53.

As in 2005, BMINDEX53 was not top- or bottom-coded or edited.

2.5.5.8 Priority Conditions

For each person, excluding deceased persons, questions from the supplemental Priority Condition (PC) section were asked about the existence of select priority conditions. Questions varied in the applicable age subgroups to which they pertained.

Note that if edited age is within range for the variable to be set, but the source data are missing because person's age in CAPI is not within range, the constructed variable is set to "Not Ascertained" (-9).

Questions were asked regarding the following conditions:

- Sore Throat
- Diabetes
- Asthma
- High blood pressure
- High cholesterol
- Heart disease (including coronary heart disease, angina, myocardial infarction)
- Stroke
- Emphysema

- Joint pain
- Arthritis

These conditions were selected because (1) they are relatively prevalent and (2) generally accepted standards for appropriate clinical care have been developed. As part of AHRQ's focus on the quality of health care, this series of questions obtained information on the receipt of tests or procedures appropriate for each condition. This information thus supplements other information on medical conditions that is gathered in other parts of the interview.

It should be noted that unlike condition information collected elsewhere in the MEPS, conditions identified in the priority care section of the instrument were not added to the condition roster. In addition, chronic conditions asked about in this section were asked in the context of "has person ever been told by a doctor or other health care professional that they have (condition)?", rather than the standard reference period. Thus, there may be legitimate inconsistencies between items in this section and conditions recorded for a person on the condition file.

Editing of these variables focused on checking that skip patterns were consistent.

Sore Throat

Questions about sore throats were asked only of persons under age 18. Consequently, persons 18 years of age or older were coded as "Inapplicable" (-1) on these questions. SRTHRT53 indicates whether each person had a sore throat serious enough to cause the person to call a doctor or other health professional during the last 12 months. Those who said "Yes" (1) to SRTHRT53 were asked whether the person who contacted a doctor or other health professional in the last 12 months did so primarily due to a sore throat or some other symptoms (THSYMP53). For those who said "Sore Throat" (1) to THSYMP53, a follow-up question was asked which indicates whether the person actually saw the doctor or other health professional for the sore throat (DRTHRT53). THANTB53 indicates whether the doctor or other health provider prescribed antibiotics for the sore throat. Those who said "Yes" (1) to THANTB53 were asked whether the person received a throat swab before receiving the antibiotics (THSWAB53). For those who answered "No" (2), "Refused" (-7), or "Don't Know" (-8), a follow-up question, THSYMF53, was asked which indicates whether other persons in the household had similar symptoms around the same time. If THSYMF53 was answered "Yes" (1), the person was asked whether a doctor or other health professional gave these family members a throat swab (THSWBF53) and whether a doctor or health professional prescribed antibiotics for these family members (THANTF53).

Diabetes

DIABDX53 indicates whether each person had ever been diagnosed with diabetes (excluding gestational diabetes). Each person who said they had received a diagnosis of diabetes was asked to complete a special self-administered questionnaire. The documentation for this questionnaire appears in the Diabetes Care Survey (DCS) section of the documentation.

Asthma

(Please note: the follow-up asthma questions were revised for 2003). ASTHDX53 indicates whether a respondent had ever been diagnosed with asthma. Those who said “Yes” were asked additional questions. ASSTIL53 asked if the person still had asthma. ASATAK53 asked whether the person had experienced an episode of asthma or an asthma attack in the past 12 months. Persons who said “Yes” for either ASSTIL53 or ASATAK53 were asked further follow-up questions regarding asthma medication used for quick relief (ASACUT53), preventive medicine (ASPREV53), and peak flow meters (ASPKFL53). ASACUT53 asked whether the person had used the kind of prescription inhaler that you breathe in through your mouth that gives quick relief from asthma symptoms. Those who said “Yes” to ASACUT53 were asked whether they had used more than three canisters of this type of inhaler in the past 3 months (ASMRCN53). ASPREV53 asked whether the person had ever taken the preventive kind of asthma medicine used every day to protect the lungs and prevent attacks, including both oral medicine and inhalers. Those who said “Yes” to ASPREV53 were asked whether they now took this kind of medication daily or almost daily (ASDALY53). ASPKFL53 indicates whether the person with asthma had a peak flow meter at home. Those persons who said “Yes” to ASPKFL53 were asked if they ever used the peak flow meter (ASEVFL53). Those persons who said “Yes” to ASEVFL53 (those persons who had used the peak flow meter) were asked when they last used the peak flow meter (ASWNFL53). Those who said “No” (2) (or “Refused” (-7) or “Don’t Know” (-8)) to ASTHDX53 were not asked ASSTIL53, ASATAK53, ASACUT53, ASMRCN53, ASPREV53, ASDAYLY53, ASPKFL53, ASEVFL53 and ASWNFL53; these respondents have been assigned a code of “Inapplicable” (-1) for these variables. Those who said “No” (2) (or “Refused” (-7) or “Don’t Know” (-8)) to ASSTIL53 and ASATAK53 were not asked ASACUT53, ASMRCN53, ASPREV53, ASDAYLY53, ASPKFL53, ASEVFL53 and ASWNFL53; these respondents have been assigned a code of “Inapplicable” (-1) for these variables.

High Blood Pressure

Questions about high blood pressure (hypertension) were asked only of respondents aged 18 or older. Consequently, persons aged 17 or younger were coded as “Inapplicable” (-1) on these variables. HIBPDX53 ascertained whether the person had ever been diagnosed as having high blood pressure (other than during pregnancy). Those who had received this diagnosis were also asked if they had been told on two or more different visits that they had high blood pressure (BPMLDX53).

All respondents older than 17 (regardless of hypertension diagnosis) were also asked how long it had been since they had their blood pressure checked by a doctor, nurse, or other health professional (BPCHEK53). If the response was within the past year or two years, the number of months since the last blood pressure check was ascertained (BPMONT53). If the response to BPCHEK53 was longer than 2 years, BPMONT53 was not asked and was coded as “Inapplicable” (-1).

High Cholesterol

New questions about high cholesterol were asked of respondents aged 18 or older. Consequently, persons aged 17 or younger were coded as “Inapplicable” (-1) on these variables.

CHOLDX53 ascertained whether the person had ever been diagnosed as having high cholesterol. Those who had received this diagnosis were also asked at what age this diagnosis occurred (CHLAGE53). Note that, like the AGE##X variables, CHLAGE53 was top coded to 85 years of age for confidentiality purposes. Persons who were diagnosed over the age of 85 have CHLAGE53 set to 85.

Heart Disease

The next series of questions concerned ischemic heart disease. The questions were asked only of respondents aged 18 or older. Consequently, persons aged 17 or younger were coded as “Inapplicable” (-1) on all the variables in this set.

- CHDDX53 - asked if the person had ever been diagnosed as having coronary heart disease
- ANGIDX53 - asked if the person had ever been diagnosed as having angina, or angina pectoris
- MIDX53 - asked if the person had ever been diagnosed as having a heart attack, or myocardial infarction
- OHRTDX53 - asked if the person had ever been diagnosed with any other kind of heart disease or condition
- STRKDX53 - asked if the person had ever been diagnosed as having had a stroke or transient ischemic attack (TIA or ministroke)

In addition, all persons aged 18 or older were asked the following three questions about diet, exercise and use of aspirin:

- NOFAT53 - asked if a doctor or other health professional had ever advised the person to eat fewer high fat or high cholesterol foods
- EXRCIS53 - asked if a doctor had advised the person to exercise more
- ASPRIN53 - asked if the person took aspirin frequently

If the answer to ASPRIN53 was “No”, or if the response was “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), a follow-up question asked if the person had a health problem that made taking aspirin unsafe (NOASPR53). If the answer to NOASPR53 was “Yes” (1), the person was asked if this problem was stomach-related or something else (STOMCH53).

Those who answered “No” to NOASPR53 were coded as “Inapplicable” (-1) for STOMCH53. Those who answered “Yes” to ASPRIN53 were coded as “Inapplicable” (-1) on NOASPR53 and on STOMCH53.

Emphysema

EMPHDX53 asked if the person (aged 18 or older) had ever been diagnosed with emphysema. Persons aged 17 or younger were coded as “Inapplicable” (-1).

Joint Pain

JTPAIN53 asked if the person (aged 18 or older) had experienced pain, swelling, or stiffness around a joint in the last 12 months. Persons aged 17 or younger were coded as “Inapplicable” (-1). This question is not intended to be used as an indicator of a diagnosis of arthritis.

Arthritis

ARTHDX53 asked if the person (age 18 or older) had ever been diagnosed with arthritis. Persons aged 17 or younger were coded as “Inapplicable” (-1). If the person said "Yes" (1) to ARTHDX53, a follow-up question, ARHTX53, was asked which indicates whether the person is currently being treated for arthritis.

2.5.5.9 2006 Self-Administered Questionnaire (SAQ)

The 2006 Self-Administered Questionnaire (SAQ), a paper-and-pencil questionnaire, was fielded during Panel 10 Round 4 and Panel 11 Round 2 of the 2006 Medical Expenditure Panel Survey (MEPS). The survey was designed to collect a variety of health status and health care quality measures of adults. All adults age 18 and older as of the Round 2 or 4 interview date (AGE42X >= 18) in MEPS households were asked to complete a SAQ. The questionnaires were administered in late 2006 and early 2007.

The variable SAQELIG indicates the person’s eligibility status for the SAQ. SAQELIG was used to construct the variables based on the SAQ data. SAQELIG was coded “0” (Not Eligible For SAQ) if there was no record for person in the round, if the person was deceased, institutionalized, moved out of the US, moved to a military facility, or the person’s disposition status was inapplicable, or if the person was less than 18 years old. SAQELIG was coded “1” (Eligible For SAQ and Has SAQ Data) if a SAQ record existed for the person in Round 2 (for Panel 11) or Round 4 (for Panel 10). SAQELIG was coded “2” (Eligible For SAQ, But No SAQ Data) if no SAQ record existed for the person in the round.

If a respondent was unable to respond to the SAQ, the questionnaire was completed by a proxy, as indicated by the variable ADPRX42 (ADPRX42 > 0). For the SAQ variables, a code of “Inapplicable” (-1) was assigned if a person was not eligible or was eligible but no data existed based on SAQELIG (SAQELIG was coded “0” or “2”). If a person was not assigned a positive SAQ weight, all SAQ variables, with the exception of SAQELIG, were coded “Inapplicable” (-1). When a response to a gate question answer was set to “No” (2), follow-up variables based on the gate question were coded as “Inapplicable” (-1). When a gate question answer was set to “Refused” (-7), “Don’t Know” (-8), or “Not Ascertained” (-9), follow-up variable answers were left as reported. A special weight variable (SAQWT06F) has been designed to be used with the SAQ for persons who were age 18 and older at the interview date. This weight adjusts for SAQ

non-response and weights to the US civilian noninstitutionalized population (see Section 3.0 of the documentation for details). The variables created from the SAQ begin with “AD”.

The language in which the SAQ was completed is indicated by the variable ADLANG42. If the English version of the SAQ was completed, ADLANG42 was coded “1” (English Version SAQ Was Administered). If the Spanish version of the SAQ was completed, or if the English version was translated into Spanish, ADLANG42 was coded “2” (Spanish Version SAQ Was Administered). If the language in which the SAQ was administered was not ascertained, ADLANG42 was coded “-9” (Not Ascertained).

The month, day and year the SAQ was completed are indicated by the variables ADCMPM42, ADCMPD42 and ADCMPY42, respectively.

Health Care Quality

CAHPS® (Consumer Assessment of Healthcare Providers and Systems)

The health care quality measures in the SAQ were taken from the health plan version of CAHPS®, an AHRQ-sponsored family of survey instruments designed to measure quality of care from the consumer’s perspective. All of the variables refer to events experienced in the last 12 months and were asked of adults age 18 and older. The variables included from the CAHPS® are:

- ADILCR42 - Had an illness, injury or condition needing care right away from a clinic, emergency room or doctor’s office
- ADILWW42 - If ADILCR42 = 1, how often got care for an illness, injury or condition as soon as wanted
- ADRTCR42 - Any appointment was made to see a doctor or other health provider for health care
- ADRTWW42 - If ADRTCR42 = 1, how often got an appointment for health care as soon as wanted
- ADAPPT42 - Number of times went to doctor’s office or clinic to get care
- ADNDCR42 - If ADAPPT42 > 0, whether you or a doctor believed you needed any care, tests, or treatment
- ADNECP42 - If ADAPPT42 > 0 and ADNDCR42= 1, how much of a problem it was to get care, tests or treatment you or a doctor believed necessary
- ADLIST42 - If ADAPPT42 > 0, how often health providers listened carefully to you
- ADEXPL42 - If ADAPPT42 > 0, how often health providers explained things so you

understood

- ADRESP42 - If ADAPPT42 > 0, how often providers showed respect for what you had to say
- ADPRTM42 - If ADAPPT42 > 0, how often health providers spent enough time with you
- ADHECR42 - If ADAPPT42 > 0, rating of healthcare from all doctors and other health providers, from 0 (worst health care possible) to 10 (best health care possible)

General Health

- ADSMOK42 - Currently smoke
- ADNSMK42 - If ADSMOK42 = 1, doctor advised you to quit smoking
- ADDRBP42 - Blood pressure has been checked by a doctor, nurse, or other health professional
- ADSPEC42 - Needed to see a specialist
- ADPRRE42 - If ADSPEC42 = 1, how much of a problem it was to see a specialist

Health Status

The SAQ contained three measures of health status, the Short-Form 12 Version 2 (SF-12v2 (r), a registered trademark), the Kessler Index (K6) of non-specific psychological distress, and the Patient Health Questionnaire (PHQ-2). Key references for these three measures are:

1. Ware, J.E., Kosinski, M., and Keller, S.D. (1996). A 12-item short-form health survey: Construction of scales and preliminary tests of reliability and validity. Medical Care 34:220.
2. Kessler, R.C., Andrews, G., Colpe, L.J., Hiripi, E., Mroczek, D.K., Normand, S.-L., Walters, E.E., and Zaslavsky, A.M. (2002). Short screening scales to monitor population prevalence and trends in non-specific psychological distress. Psychological Medicine 32: 959-976.
3. Kroenke, K., Spitzer, R.L., and Williams, J.B. (2003). The Patient Health Questionnaire-2: Validity of a two-item depressive screener. Medical Care 41: 1284-1292.

The SF-12v2 questions are as follows:

- ADGENH42 - General health today

ADDAYA42 -	During a typical day, limitations in moderate activities
ADCLIM42 -	During a typical day, limitations in climbing several flights of stairs
ADPALS42 -	During past 4 weeks, as result of physical health, accomplished less than would like
ADPWLM42 -	During past 4 weeks, as result of physical health, limited in kind of work or other activities
ADMALS42 -	During past 4 weeks, as result of mental problems, accomplished less than you would like
ADMWLM42 -	During past 4 weeks, as result of mental problems, limited in kind of work or other activities
ADPAIN42 -	During past 4 weeks, pain interfered with normal work outside the home and housework
ADCAPE42 -	During the past 4 weeks, felt calm and peaceful
ADNRGY42 -	During the past 4 weeks, had a lot of energy
ADDOWN42 -	During the past 4 weeks, felt downhearted and depressed
ADSOCA42 -	During the past 4 weeks, physical health or emotional problems interfered with social activities

Short-Form 12 Version 2 (SF-12v2)

In analyzing data from the SF-12v2, the standard approach is to form two summary scores, based on responses to these questions. The underlying conception is that overall health is composed of a physical component and a mental component. The scoring algorithms for both the PCS and the MCS incorporate information from all 12 questions. However, the Physical Component Summary (PCS) weights more heavily responses to the following questions: ADDAYA42, ADCLIM42, ADPALS42, ADPWLM42, and ADPAIN42. The Mental Component Summary (MCS) weights more heavily responses to the following questions: ADDOWN42, ADCAPE42, ADMALS42, ADMWLM42, and ADSOCA42. The algorithm for computing the PCS and the MCS summary scores is described in the manual for the SF-12:

Ware, Jr., J.E., Kosinski, M., Turner-Bowker, DM, and Gandek, B. How to Score Version 2 of the SF-12 (r) Health Survey. (October, 2002). QualityMetric, Inc., Lincoln, RI.

This manual can be purchased from QualityMetric, Inc. (qualitymetric.com). The PCS and MCS cannot be computed directly if a person has missing data for any of the twelve items. QualityMetric has developed a proprietary method for imputing the PCS and MCS scores if some data are missing. PCS and MCS scores calculated according to the standard algorithm, and

incorporating imputations for some cases with missing data are available for analysts in this file. The PCS-12 score is PCS42, and the MCS-12 score is MCS42. Note that negative values are possible in PCS42 and MCS42 in rare cases. There are no records in 2006 where MCS42 or PCS42 is set to a negative value. Persons who were not eligible for the SAQ, or who were eligible but for whom no data existed based on SAQELIG, or who did not have a positive SAQ weight, were set to “Inapplicable” (-1) for PCS42 and MCS42. (These persons were set to missing in 2002.)

The variables PCS42 and MCS42 include cases in which the scores were imputed. SFFLAG42 indicates whether the physical component summary, PCS42, or the mental component, MCS42, were imputed for a respondent. In some cases the software could not impute a score due to amount of missing data; these cases have SFFLAG42 = 0 (No). (This represents a change from 2002, when these cases had SFFLAG42 = 1 (Yes)). Persons who were not eligible for the SAQ, or who were eligible but for whom no data existed based on SAQELIG, or who did not have a positive SAQ weight, were set to “Inapplicable” (-1) for SFFLAG42. (These persons were set to missing in 2002.)

In 2000, 2001, and 2002, MEPS used Version 1 of the SF-12. The PCS and MCS scores based on Version 1 of the SF-12 in these years were based on norms from 1990. Version 2 scores are based on norms from a 1998 national study. To appropriately compare Version 1 scores with Version 2 scores, Version 1 scores need to be rescaled to 1998 norms. This can be done by adding 1.07897 to PCS scores from Version 1, and by subtracting 0.16934 from Version 1 MCS scores. For full details, please consult the SF-12 reference manual cited above.

Non-Specific Psychological Distress

The 2006 SAQ includes six mental health-related questions, using the “K-6” scale developed by R.C. Kessler and colleagues. These questions assess the person’s non-specific psychological distress during the past 30 days.

The non-specific psychological distress variables are as follows:

- ADNERV42 - During the past 30 days, felt nervous
- ADHOPE42 - During the past 30 days, felt hopeless
- ADREST42 - During the past 30 days, felt restless or fidgety
- ADSAD42 - During the past 30 days, felt so sad that nothing could cheer the person up
- ADEFRT42 - During the past 30 days, felt that everything was an effort
- ADWRTH42 - During the past 30 days, felt worthless

Kessler Index (K6)

A summary of the six variables above provides an index to measure non-specific, rather than disorder-specific, psychological distress. Using the following values:

