
Appendix D: Data Codebooks

There are three data codebooks, or dictionaries: one for the Adult section of the questionnaire, a second for the child section, and a third for all derived variables.

OMAS 2015 100% File - Adult - Online Public Use

Ohio Medicaid Assessment Survey

Contents Listing

Date Created: 12NOV15

Data Set Name	DATA.ADULT
Observations	42876
Variables	228
Engine	V9
Created	11/12/2015 14:00:58

NAME	TYPE	LENGTH	VARNUM	LABEL
A1	num	8	24	A1--Have health insurance/plan
A1A	num	8	25	A1A--Verify health insurance/plan
ADULT_DD	num	8	105	ADULT_DD--Developmental disability
B4A	num	8	26	B4A--Employer health insurance/plan
B4AA	num	8	27	B4AA--Your/spouse's work insurance
B4AA1	num	8	28	B4AA1--Verify employer insurance/plan
B4AB	num	8	29	B4AB--Current or past work insurance/plan
B4B	num	8	30	B4B--Medicare insurance/plan
B4B_CON1	num	8	35	B4B_CON1--Verify Medicaid/Medicare
B4B_CON2	num	8	36	B4B_CON2--Verify respondent age
B4B_R	num	8	43	B4B_R--Adult Medicare recoded
B4BCAGE	num	8	37	B4BCAGE--Verify respondent age range
B4C	num	8	33	B4C--Medicaid insurance/plan
B4C_CK	num	8	34	B4C_CK--Medicaid coverage confirmed
B4C_R	num	8	44	B4C_R--Adult Medicaid recoded
B4C2_UNIT	num	8	39	B4C2_UNIT--Medicaid coverage duration - days/wks/mons/yrs
B4C2_VALUE	num	8	38	B4C2_VALUE--Medicaid coverage duration - number days
B4C2AGE	num	8	42	B4C2AGE--Verify respondent age
B4C2CON	num	8	41	B4C2CON--Verify duration of coverage
B4C2DAYS	num	8	40	B4C2DAYS--Days covered by Medicaid - Computed
B4CAFILL	num	8	32	B4CAFILL--Fill for B4CA
B4CAM1_REC	num	8	204	B4CAM1_REC--Medicaid plan specify 1, recode
B4CAM2_REC	num	8	214	B4CAM2_REC--Medicaid plan specify 2, recode
B4CAM3_REC	num	8	219	B4CAM3_REC--Medicaid plan specify 3, recode
B4CFILLA	num	8	31	B4CFILLA--Fill used in b4c_ck
B4E	num	8	45	B4E--Private insurance/plan
B4G	num	8	51	B4G--Any other insurance
B4H	num	8	52	B4H--Who pays for insurance
B4I	num	8	46	B4I--Health Insurance Exchange plan
B4I_2	num	8	47	B4I_2--Health Insurance Exchange plan monthly premium
B4I_3	num	8	48	B4I_3--Health Insurance Exchange plan premium subsidy
B4I_4	num	8	49	B4I_4--Had coverage prior to Health Insurance Exchange plan
B4I_5M1_REC	num	8	205	B4I_5M1_REC--Type of coverage prior to health care exchange insurance/plan 1, recode
B4I_5M2_REC	num	8	221	B4I_5M2_REC--Type of coverage prior to federal insurance/plan 2, recode
B4I_6_REC	num	8	215	B4I_6_REC--Reason previous insurance ended, recode
B4I_7M1_REC	num	8	220	B4I_7M1_REC--Why Medicaid ended - specify 1, recode
B4I_7M2	num	8	50	B4I_7M2--Why Medicaid ended - specify 2
b7_rec	num	8	225	B7_REC--Adult - type of coverage, Recode
B10B	num	8	53	B10B--Dental care
B10D	num	8	54	B10D--Prescription medications
B18	num	8	55	B18--Primary insurance coverage - number days
B18DAYS	char	5	197	B18DAYS--Days of insurance coverage
B18UNIT	num	8	56	B18UNIT--Primary insurance coverage - days/wks/mons/yrs
B19	num	8	58	B19--Other insurance plan - last 12 mons
B20	num	8	59	B20--Had Medicaid prior to current plan
B20AM1_REC	num	8	207	B20AM1_REC--Reason no longer covered by Medicaid- specify 1, recode
B20AM2_REC	num	8	224	B20AM2_REC--Reason no longer covered by Medicaid- specify 2, recode
B20AM3	num	8	60	B20AM3--Reason no longer covered by Medicaid - specify 3
B21	num	8	61	B21--Prior to current coverage; covered by employer/union
B21A_REC	num	8	208	B21A_REC--Reason coverage ended, recode
B22	num	8	62	B22--Prior to current coverage; covered by family paid plan
B24	num	8	63	B24--Prior to current coverage; covered by any insurance
B25	num	8	64	B25--Last 12 mons, any time did not have insurance
B27	num	8	65	B27--Last 12 mons, how long without insurance
B27DAYS	char	5	198	B27DAYS--Number of days not covered by insurance
B27UNIT	num	8	66	B27UNIT--Last 12 mons, units of duration without insurance
B29AA	num	8	67	B29AA--Major medical costs while uninsured
B29AB	num	8	68	B29AB--Delay/Avoid care while uninsured
B29AC	num	8	69	B29AC--Problems getting care while uninsured
B29BA	num	8	70	B29BA--Major medical costs last 12 mons
B29BB	num	8	71	B29BB--Delay/Avoid care last 12 mons
B29BC	num	8	72	B29BC--Problems getting care last 12 mons
B1804CON	num	8	57	B1804CON--Verify duration of coverage/age
BF_28	num	8	119	BF_28--Planned method of feeding baby
BF_31	num	8	120	BF_31--Age when breast feeding expected to stop
BF_32	num	8	121	BF_32--Breast feeding confidence scale
C1	num	8	73	C1--Any insurance last 12 mons
C2_UNIT	num	8	75	C2_UNIT--Last covered by insurance-unit
C2_VAL	num	8	74	C2_VAL--Last covered by insurance-value
C2DAYS	num	8	76	C2DAYS--Computed days last covered by insurance
C3	num	8	77	C3--Last coverage, Medicaid
C4	num	8	78	C4--Last coverage, employer/union
C4_EXCH	num	8	79	C4_EXCH--Last coverage, Health Insurance Exchange

NAME	TYPE	LENGTH	VARNUM	LABEL
C5	num	8	80	C5--Last covarge, any other
C6_UNIT	num	8	82	C6_UNIT--Last 12 mons, how long without insurance-unit
C6_VAL	num	8	81	C6_VAL--Last 12 mons, how long without insurance
C6DAYS	num	8	83	C6DAYS--Computed days without insurance
C26CON	num	8	84	C26CON--Confirm age/last coverage
C28A	num	8	85	C28A--Last 12 mons, major medical cost while uninsured
C28B	num	8	86	C28B--Last 12 mons, delayed/avoided care while uninsured
C28C	num	8	87	C28C--Last 12 mons, problems getting care while uninsured
CALLTYPE	num	8	1	CALLTYPE--Phone line type as reported in sample
CASEID	char	9	195	CASEID--Case ID
CELL_RESP	num	8	3	CELL_RESP--Is this a phone?
D30	num	8	88	D30--Rate general health status
D30A_UNIT	num	8	115	D30A_UNIT--Weight without shoes
D30A_VALUE	num	8	114	D30A_VALUE--Weight without shoes
D30B	num	8	116	D30B--Height without shoes
D30B_C	char	3	202	D30B_C--Height Centimeters
D30B_F	char	1	199	D30B_F--Height without shoes
D30B_I	char	2	200	D30B_I--Height without shoes
D30BFI	char	3	201	D30BFI--Height Feet/Inches (FI format)
D30BINC	char	5	203	D30BINC--CALCULATE NUMBER OF INCHES
D30I	num	8	89	D30I--Past 30 days, mental health prevented work/activities
D31F	num	8	90	D31F--Difficulty/Need assistance with day-to-day
D31I	num	8	91	D31I--Need/Get special therapy
D31L	num	8	92	D31L--Need/Get treatment or counseling
D32A	num	8	93	D32A--Need assistance with personal care
D32B	num	8	94	D32B--Need assistance with domestic tasks
D32D	num	8	95	D32D--Need assistance with social/emotional support
D32E	num	8	96	D32E--Need assistance with coordinating health care
D33	num	8	106	D33--Last 12 mons, injured due to fall
D33B	num	8	107	D33B--Fall injury resulted in visit to health professional
D34	num	8	97	D34--Hours of assistance currently receiving
D41	num	8	98	D41--Diagnosed high BP or hypertension
D41A	num	8	99	D41A--Diagnosed heart attack
D41B	num	8	100	D41B--Diagnosed coronary heart disease
D41D	num	8	101	D41D--Diagnosed congestive heart failure
D43	num	8	102	D43--Diagnosed diabetes
D43B	num	8	103	D43B--Diagnosed diabetes only with pregnancy
D45	num	8	108	D45--During lifetime, smoked 100 cigarettes
D45A	num	8	109	D45A--Frequency of smoking now
D45C	num	8	110	D45C--Last 12 mons, told to stop smoking by doc
D46	num	8	111	D46--Past 30 days, number days had alcohol
D46A	num	8	113	D46A--Past 30 days, number of days with X drinks
D46C	num	8	152	D46C--Used prescription pain med without doc advice
D46C_2	num	8	153	D46C_2--Time since last used prescription without doc advice
D46FILL	num	8	112	d46Fill --Fill for D46A
D47	num	8	104	D47--Diagnosed cancer
E59_1	num	8	126	E59_1--Confirm never been to doctor
E59_CON	num	8	130	E59_CON--Confirm last check-up
E59_UNIT	num	8	123	E59_UNIT--Time since last doctor visit
E59_VAL	num	8	122	E59_VAL--Time since last doctor visit
E59A_UNIT	num	8	128	E59A_UNIT--Time since last check-up
E59A_VAL	num	8	127	E59A_VAL--Time since last check-up
E59ACONA	num	8	131	E59ACONA--confirm age/last check up
E59ADAYS	num	8	129	E59ADAYS--Days since last checkup
E59CONA	num	8	125	E59CONA--Confirm last doctor visit/age
E59DAYS	num	8	124	E59DAYS--Computed number of days since last doctor visit
E60	num	8	132	E60--Last 12 mons, number of hospital admissions
E62	num	8	133	E62--Last 12 mons, number of ER visits
E63_UNIT	num	8	135	E63_UNIT--Time since last dental visit
E63_VAL	num	8	134	E63_VAL--Time since last dental visit
E63DAYS	num	8	136	E63DAYS--Computed number of days last dental visit
E65	num	8	117	E65--Last 12 mons, any pregnancy
E65A	num	8	118	E65A--Currently pregnant
F_H84_A2CAT	num	8	178	F_H84_A2CAT--138% FPL last month income value
F_H84_A3CAT	num	8	183	F_H84_A2CAT--138% FPL last year income value
F67	num	8	140	F67--Regular source of medical care
F67_1	num	8	141	F67_1--Confirm no regular source of care
F67_2_REC	num	8	209	F67_2_REC--Usual source of care, recode
F67A1	num	8	142	F67A1--Personal doctor or nurse
F67D	num	8	137	F67D--Last 12 mons, need to see specialist
F67D_1	num	8	139	F67D_1--Last 12 mons, number of times saw specialist
F67E	num	8	138	F67E--Problem to see a specialist
F68	num	8	150	F68--Last 12 mons, could not get needed dental

NAME	TYPE	LENGTH	VARNUM	LABEL
F68B	num	8	151	F68B--Last 12 mons, could not get prescription due to cost
F68B_2	num	8	154	F68B_2--Last 12 mons, could not get needed vision care
F68B_3	num	8	155	F68B_3--Last 12 mons, could not get needed mental health
F68C	num	8	156	F68C--Last 12 mons, could not get other needed care/supplies
F69	num	8	157	F69--Ease of getting medical care compared to 3 years ago
F70	num	8	158	F70--Last 12 mons, problem paying medical bills
FH03	num	8	145	FH03--Last 12 mons, get care during off hours
FH04	num	8	146	FH04--Last 12 mons, get care during off hours
FH05	num	8	147	FH05--Last 12 mons, contacted provider for urgent care
FH06	num	8	148	FH06--Last 12 mons, number of days waiting for urgent care
FH11	num	8	143	FH11--Last 12 mons, seen health care provider
FH12	num	8	144	FH12--Last 12 mons, spent enough time
FH13	num	8	149	FH13--Last 12 mons, how often provider explained well
G71	num	8	159	G71--Last week job status
G71A_REC	num	8	210	G71A_REC--Type of employment, recode
G72	num	8	160	G72--Employer/union offer health plan
G72A_REC	num	8	211	G72A_REC--Employer/union type of coverage, recode
G72B	num	8	161	G72B--Eligible for employer/union health plan
G72CM1_REC	num	8	212	G72CM1_REC--Reason not participating in employer plan - specify 1, recode
G72CM2_REC	num	8	216	G72CM2_REC--Reason not participating in employer plan - specify 2, recode
G72CM3_REC	num	8	217	G72CM3_REC--Reason not participating in employer plan - specify 3, recode
G72CM4_REC	num	8	218	G72CM4_REC--Reason not participating in employer plan - specify 4, recode
G72CM5_REC	num	8	222	G72CM5_REC--Reason not participating in employer plan - specify 5, recode
G72CM6	num	8	162	G72CM6--Reason not participating in employer plan - specify 6
G72CM7	num	8	163	G72CM7--Reason not participating in employer plan - specify 7
G73A	num	8	164	G73A--Work more or less than 30 hours per week
G73D	num	8	165	G73D--More or less than 50 employees
H76	num	8	166	H76--Marital status
H76A	num	8	167	H76A--Spouse employed
H77	num	8	168	H77--Highest level of education completed
H78	num	8	169	H78--Military service ever
H78A	num	8	170	H78A--Current military service
H84_A1	num	8	176	H84_A1--Number of family members supported by income
H84_A2	num	8	177	H84_A2--Last month gross income
H84_A2CATS	num	8	179	H84_A2CATS--Last month gross income estimate
H84_A2H	num	8	181	H84_A2H--Last month gross income high income categories
H84_A2L	num	8	180	H84_A2L--Last month gross income low income categories
H84_A3	num	8	182	H84_A3--Last year gross income
H84_A3CATS	num	8	184	H84_A3CATS--Last year gross income estimate
H84_A3H	num	8	186	H84_A3H--Last year gross income high income categories
H84_A3L	num	8	185	H84_A3L--Last year gross income low income categories
HH_NUM	char	2	196	HH_NUM--Calculates total in family
I91C	num	8	190	I91C--Person availability
I91D	num	8	191	I91D--Request to speak to person responsible for child's insurance
I92	num	8	192	I92--Continue child interview
INCENTIVE	num	8	2	INCENTIVE--Is this getting an incentive, and how much
LANG	char	7	193	LANG--Language
LASTCALL_RESLT	char	2	194	LASTCALL_RESLT-- Final Dispositon Code
NOCHILD_CK	num	8	20	NOCHILD_CK--Verify children in HH/Family
NUM_ADULTS	num	8	4	NUM_ADULTS--Number of adults in HH
NUMADULT_REC	num	8	17	NUMADULT_REC--CHANGE NUMBER OF ADULTS IN HOUSEHOLD
PB7A_REC	num	8	206	PB7A_REC--Describe primary insurance plan, Recode
PREA1	num	8	23	PREA1--Health insurance last week
PROXY_FLAG	num	8	11	PROXY_FLAG--Proxy Interview
Q153	num	8	174	Q153 Number of other landline/cell phones
Q153A	num	8	173	Q153A--Other landline/cell phones
Q155	num	8	187	Q155--Without phone service 24 hours or more (not cell)
Q155C	num	8	188	Q155C--Without phone service 24 hours or more (not LL)
Region	num	8	226	REGION--County type region
S1	num	8	6	S1--Adult in HH with most recent birthday
S1A	num	8	7	S1A--Person most knowledgeable about HH birthdays
S2C	num	8	12	S2C--Relationship to sample member
S4A	num	8	9	S4A--Speak to Proxy
S5	num	8	10	S5--Intro to see if R is available for interview
S8	num	8	14	S8--Time lived in Ohio
S9_REGION	num	8	15	S9_REGION--Region value
S10C	num	8	5	S10C--Adults in HH 19 or older
S11_rec	num	8	223	S11_rec -- Adults in family, recoded (zero to missing)
S11B	num	8	16	S11B--Verify adults in HH/Family
S12	num	8	18	S12--Children in HH
S13A	num	8	21	S13A--Respondent is parent of child in HH
S13B	num	8	19	S13B--Children in family
s14_85	num	8	228	S14_85--Adult Age Top Coded at 85

NAME	TYPE	LENGTH	VARNUM	LABEL
S14_REC_85	num	8	227	S14_REC_85--Adult Age Top Coded at 85, recoded
S14A	num	8	22	S14A--Respondent age range
S15	num	8	13	S15--Subject gender
S16	num	8	171	S16--Adult Hispanic ethnicity
S18	num	8	172	S18--Adult Hispanic Race
SS2B	num	8	8	SS2B--Person most knowledgeable about health insurance
TRACFONE1	num	8	189	TRACFONE1--Prepaid/Pay as you go cell
TRACFONE2_REC	num	8	213	TRACFONE2_REC--Higher bill due to survey participation, Recode
U3	num	8	175	U3--use landline/cell

OMAS 2015 100% File - Child - Online Public Use

Ohio Medicaid Assessment Survey

Contents Listing

Date Created: 12NOV15

Data Set Name	DATA.CHILD
Observations	42876
Variables	154
Engine	V9
Created	11/12/2015 14:01:22

NAME	TYPE	LENGTH	VARNUM	LABEL
I90A	num	8	2	I90A--Child age in years
I90B	num	8	3	I90B--Relationship to child
I91A	num	8	4	I91A--Adult best knows about child's insurance
I95	num	8	6	I95--Last week, child covered by health care plan
I95A	num	8	7	I95A--Verify Child health insurance status
J96	num	8	8	J96--Last week, child health insurance same as R
J96A	num	8	9	J96A--Confirm child health insurance same as R
J100A	num	8	10	J100A--Child covered by employer or union plan
J100B	num	8	13	J100B--Child covered by Medicare
J100B_R	num	8	15	J100B_R--Child Medicare status recoded
J100BCON	num	8	14	J100BCON--Confirm child covered by Medicare
J100C	num	8	11	J100C--Child covered by Medicaid
J100C_CK	num	8	12	J100C_CK--Child covered by Medicaid
J100CA_REC	num	8	140	J100CA_REC--Specify which Medicaid plan, recode
J100CHK	num	8	23	J100CHK--Confirm child health plan coverage
J100E	num	8	16	J100E--Child covered by private health plan
J100F	num	8	17	J100F--Child covered by BCMH or other public program
J100G	num	8	20	J100G--Does child have any other health coverage
J100G1M1_REC	num	8	142	J100G1M1_REC--Type of coverage - specify 1, recode
J100G1M2_REC	num	8	150	J100G1M2_REC--Type of coverage - specify 2, recode
J100G1M3	num	8	21	J100G1M3--Type of coverage - specify 3
J100H	num	8	22	J100H--Pays for health insurance plan
J100I1	num	8	19	J100I1--Child covered by Health Care Exchange
J100I2_REC	num	8	141	J100I2_REC--Name of OHCE/healthcare.gov plan, recode
J105A	num	8	24	J105A--Current plans cover child's dental
J105B	num	8	25	J105B--Current plan covers child's vision
J108	num	8	114	J108--Needed help coordinating child's care
J108B	num	8	115	J108B--Received needed help coordinating child's care
J113_UNIT	num	8	27	J113_UNIT--Duration of child coverage
J113_VALUE	num	8	26	J113_VALUE--Duration of child coverage
J113DAYS	num	8	28	J113DAYS--Number of days covered
J116B	num	8	30	J116B--Child covered by any insurance prior to current plan
J117	num	8	31	J117--Child covered by Medicaid prior to current plan
J117B	num	8	34	J117B--Prior to current coverage had employer/union plan
J117B1_REC	num	8	144	J117B1_REC--Why previous coverage ended, recode
J117C	num	8	35	J117C--Any other insurance that was paid by R/family
J120	num	8	36	J120--Any time since birth child had no insurance
J122_UNIT	num	8	38	J122_UNIT--Time without insurance
J122_VALUE	num	8	37	J122_VALUE--Time without insurance
J122DAYS	num	8	39	J122DAYS--Days without insurance
J122RECODE	char	1	126	J122RECODE-- Recode child time without health insurance
J124AA	num	8	40	J124AA--While uninsured major medical cost
J124AB	num	8	41	J124AB--While uninsured delayed/avoided care
J124AC	num	8	42	J124AC--While uninsured problem getting needed care
J124BA	num	8	43	J124BA--Child had major medical cost
J124BB	num	8	44	J124BB--Delayed/avoided needed care for child due to cost
J124BC	num	8	45	J124BC--Problem getting needed care for child
K4Q24	num	8	116	K4Q24--Child saw specialist
K4Q25	num	8	117	K4Q25--Think child needed specialist
K4Q26	num	8	118	K4Q26--Problem for child to see specialist
K96	num	8	46	K96--Covered by any health plan since
K97_UNIT	num	8	48	K97_UNIT--Last time child had health coverage
K97_VALUE	num	8	47	K97_VALUE--Last time child had health coverage
K97DAYS	char	5	127	K97DAYS--Days since child last had health insurance
K98	num	8	49	K98--Child had same health coverage as R
K98A	num	8	50	K98A--Confirm child had same coverage as R
K99	num	8	51	K99--Last time child had coverage was Medicaid
K99B	num	8	52	K99B--Tried to get Medicaid for child
K99B1	num	8	53	K99B1--Level of difficulty to apply for Medicaid
K99B2	num	8	54	K99B2--Rate Medicaid application process
K100	num	8	57	K100--Child last insurance was employer/union plan
K101	num	8	58	K101--Child last covered by any other family paid insurance
K103_UNIT	num	8	60	K103_UNIT--Last time child had health coverage
K103_VALUE	num	8	59	K103_VALUE--Last time child had health coverage
K103DAYS	char	4	128	K103DAYS--Days since child last had health insurance
K104	num	8	61	K104--Anyone try to get Medicaid for child
K104A	num	8	62	K104A--Level of difficulty completing Medicaid application
K104B	num	8	63	K104B--Rate Medicaid application process
K124A	num	8	66	K124A--Child had major medical cost while uninsured
K124B	num	8	67	K124B--Delayed needed care for child while uninsured
K124C	num	8	68	K124C--Problem getting care for child while uninsured
L125	num	8	69	L125--Rate child's health
L125A2K	char	3	135	L125A2K--Child Weight Kilograms (018-227)

NAME	TYPE	LENGTH	VARNUM	LABEL
L125A2P	char	3	134	L125A2P--Child Weight Pounds (025-500)
L125AC	char	3	132	L125AC--Child Height Centimeters
L125AP	char	3	131	L125AP--Child Height Feet/Inches (FII format)
L125AP_F	char	1	129	L125AP_F--How tall is the child now? (0-8 FEET)
L125AP_I	char	2	130	L125AP_I--How tall is the child now? (00-12 INCHES)
L125LBS	char	5	136	L125LBS--Child Weight, CALCULATE NUMBER OF POUNDS
L126A	num	8	76	L126A--Child takes prescribed meds
L126B	num	8	77	L126B--Reason child takes prescribed meds
L126C	num	8	78	L126C--Condition lasting at least 12 mons
L126D	num	8	79	L126D--Child requires more than usual medical care
L126E	num	8	80	L126E--More care due to condition
L126F	num	8	81	L126F--Condition lasting at least 12 mons
L126G	num	8	82	L126G--Limited ability compared to other children
L126H	num	8	83	L126H--Limited ability due to condition
L126H_2	num	8	75	L126H_2--Child developmental disability
L126I	num	8	84	L126I--Condition lasting at least 12 mons
L126J	num	8	85	L126J--Child needs special therapy
L126K	num	8	86	L126K--Therapy needed due to condition
L126L	num	8	87	L126L--Condition lasting at least 12 mons
L126M	num	8	88	L126M--Child needs treatment or counseling
L126N	num	8	89	L126N--Condition lasting at least 12 mons
LAS5	num	8	96	LAS5--Does child have diabetes
LAS10	num	8	93	LAS10--Child has difficulty caring for self
LAS11	num	8	94	LAS11--Child has difficulty learning
LAS12	num	8	95	LAS12--Child has difficulty communicating
M130	num	8	100	M130--Child received well checkup
M131_UNIT	num	8	98	M131_UNIT--How long since last doc visit
M131_VALUE	num	8	97	M131_VALUE--How long since last doc visit
M131A	num	8	99	M131A--Confirm child never had doc visit
M131DAYS	char	6	137	M131DAYS--Days since last saw doc
M132	num	8	101	M132--Times child was admitted to hospital
M134	num	8	102	M134--Times child was in ER
M135_UNIT	num	8	104	M135_UNIT--Time since last dentist visit - days/wks/mons/ysr
M135_VALUE	num	8	103	M135_VALUE--Time since last dentist visit
M135DAYS	char	5	138	M135DAYS--Days since last saw dentist
N136	num	8	105	N136--Place child goes when sick
N136A_REC	num	8	149	N136A_REC--Kind of place child goes for care, recode
N136CHECK	num	8	106	N136CHECK--verify place child goes for health care
N137A2	num	8	107	N137A2--Place child goes most often for care
N137B	num	8	108	N137B--Child has personal doctor or nurse
N137F_REC	num	8	148	N137F_REC--Reason child has no usual source of care, recode
NF67C_REC	num	8	139	NF67C_REC--Reason for no regular source of care, recode
NJ100F1	num	8	18	NJ100F1--Specify which other public program
NJ117AM1	num	8	32	NJ117AM1--Reason child lost Medicaid coverage - specify 1
NJ117AM1_REC	num	8	143	NJ117AM1_REC--Reason child lost this coverage - specify 1, recode
NJ117AM2	num	8	33	NJ117AM2--Reason child lost Medicaid coverage - specify 2
NK99AM1_REC	num	8	152	NK99AM1_REC--Reason child lost coverage - specify 1, recode
NK99AM2_REC	num	8	154	NK99AM2_REC--Reason child lost coverage - specify 2, recode
NK99CM1_REC	num	8	146	NK99CM1_REC--Reason child had no Medicaid- specify 1, recode
NK99CM2	num	8	55	NK99CM2--Reason child had no Medicaid- specify 2
NK99CM3	num	8	56	NK99CM3--Reason child had no Medicaid- specify 3
NK99DM1_REC	num	8	145	NK99DM1_REC--Why didn't anyone try for child Medicaid- specify 1, recode
NK99DM2_REC	num	8	153	NK99DM2_REC--Why didn't anyone try for child Medicaid- specify 2, recode
NK105M1	num	8	64	NK105M1--Reason child was unable to get Medicaid - specify 1
NK105M2	num	8	65	NK105M2--Reason child was unable to get Medicaid - specify 2
NK106M1_REC	num	8	147	NK106M1_REC--Why didn't anyone try for child Medicaid- specify 1, recode
NK106M2_REC	num	8	151	NK106M2_REC--Why didn't anyone try for child Medicaid- specify 2, recode
O139	num	8	119	O139--Child unable to get needed dental care
O139B	num	8	120	O139B--Child unable to get needed vision care
O140	num	8	121	O140--Child unable to get needed prescription due to cost
O141	num	8	122	O141--Child unable to get any other needed health care
O144	num	8	123	O144--Since 3 years ago, easier/harder to get child health care
P148	num	8	1	P148--Child gender
P149	num	8	124	P149--Child Hispanic
P151	num	8	125	P151--Childs parents employed
PAR3	num	8	5	PAR--Would you be able to answer just 1 to 3 of the most important questions before w
PCMH_3	num	8	112	PCMH_3--Able to get off hours care for child
PCMH_6	num	8	109	PCMH_6--Child has seen health provider
PCMH_7	num	8	110	PCMH_7--Health provider spent enough time with child
PCMH_8	num	8	113	PCMH_8--Health provider explained things
PCMH_X	num	8	111	PCMH_X--Days waited for appt for child needing urgent care
PL125A1	num	8	73	PL125A1--Child height
PL125A2	num	8	74	PL125A2--Child weight

NAME	TYPE	LENGTH	VARNUM	LABEL
PL125INC	char	5	133	PL125INC--CALCULATE NUMBER OF INCHES
POSTJ113	num	8	29	POSTJ113--Child covered since birth
PRE_LAS10	num	8	90	PRE_LAS10--Intro, Child has difficulty caring for self
PRE_LAS11	num	8	91	PRE_LAS11--Intro, Child has difficulty learning
PRE_LAS12	num	8	92	PRE_LAS12--Intro, Child has difficulty communicating
SUGAR_1	num	8	71	SUGAR_1--Glasses of juice yesterday
SUGAR_2	num	8	72	SUGAR_2--Glasses of non-diet soda yesterday
WIC_1	num	8	70	WIC_1--Last 12 mons, receive WIC benefits

OMAS 2015 100% File - Derived Variables - Online Public Use

Ohio Medicaid Assessment Survey

Contents Listing

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Data Set Name	DATA.DERIVED
Observations	42876
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NAME	TYPE	LENGTH	VARNUM	LABEL
wt_a	num	8	1	WT_A--Final Weight, Adult
wt_c	num	8	2	WT_C--Final Weight, Child
strata	num	8	3	STRATA--Sample Stratum
inttype	num	8	4	INTTYPE - Type of Interview
complete_c	num	8	5	COMPLETE_C--Completed child interview
partial_flag_a	num	8	6	PARTIAL_FLAG_A--Adult Partial 0/1
partial_flag_c	num	8	7	PARTIAL_FLAG_C--Child Partial 0/1
call_flag	num	8	8	CALL_FLAG--Who called this case and what phone type
who_called	num	8	9	WHO_CALLED--RTI (1) or Precision (2) Call
aapor	char	5	10	AAPOR--AAPOR Disposition Code
mc_region	num	8	11	MC_REGION--Medicaid Region
s9_type_rec	num	8	12	S9_type_rec--County type, recoded
s9_type_imp	num	8	13	S9_TYPE_IMP-- County type, Imputed
region	num	8	14	REGION--County type region
num_adults_imp	num	8	15	NUM_ADULTS_IMP--Number of Adults in household, Imputed
s11_imp	num	8	16	S11_IMP--Number of Adult family members in household, Imputed
s12_imp	num	8	17	S12_IMP--Number of children in household, Imputed
s13b_imp	num	8	18	S13B_IMP--Number of children family members in household, Imputed
fam_type_imp	num	8	19	FAM_TYPE_IMP--Household composition, imputed
q153_imp	num	8	20	Q153_IMP--Number of landline phonelines in household, Imputed
h84_a1_imp	num	8	21	H84_A1_IMP--Number of persons in family supported by income, Imputed
hhincy	num	8	22	HHINCY--Last Year's Income
hhincy_cat_l	num	8	23	HHINCY_CAT_L--Lower bound for Last Year's Income
hhincy_cat_h	num	8	24	HHINCY_CAT_H--Upper bound for Last Year's Income
hhincy_imp	num	8	25	HHINCY_IMP--Last Year's Income Imputed
incomey	num	8	26	INCOMEY--Last Year's Income, Imputed
fpl100	num	8	27	FPL100--Annual Poverty Threshold by Persons in Household
fpl_pct	num	8	28	FPL_PCT--Annual FPL percent
fpl_cat	num	8	29	FPL_CAT--Categorical Annual FPL Level
poverty	num	8	30	POVERTY--Annual Categorical Poverty Level
fpl90_flag	num	8	31	FPL90_FLAG--Last year's 0/1 Flag of records that are 90% of FPL or less
fpl100_flag	num	8	32	FPL100_FLAG--Last year's 0/1 Flag of records that are 100% of FPL or less
fpl138_flag	num	8	33	FPL138_FLAG--Last year's 0/1 Flag of records that are 138% of FPL or less
hhincm	num	8	34	HHINCM--Last Month's Income
hhincm_cat_l	num	8	35	HHINCM_CAT_L--Lower bound for Last Month's Income
hhincm_cat_h	num	8	36	HHINCM_CAT_H--Upper bound for Last Month's Income
hhincm_imp	num	8	37	HHINCM_IMP--Last Month's Income Imputed
incomem	num	8	38	INCOMEM--Last Month's Income, Imputed
fpl100_mon	num	8	39	FPL100_MON--Monthly Poverty Threshold by Persons in Household
fpl_mon_pct	num	8	40	FPL_MON_PCT--Monthly FPL percent
fpl_mon_cat	num	8	41	FPL_MON_CAT--Categorical Monthly FPL Level
poverty_m	num	8	42	POVERTY_M--Monthly Categorical Poverty Level
fpl100_m_flag	num	8	43	FPL100_M_FLAG--Last month's 0/1 Flag of records that are 100% of FPL or less
fpl138_m_flag	num	8	44	FPL138_M_FLAG--Last month's 0/1 Flag of records that are 138% of FPL or less
s14_imp_85	num	8	45	S14_IMP_85--Adult Age Top Coded at 85, imputed
age_a	num	8	46	AGE_A--Adult's Age, categorical
age_a_imp	num	8	47	AGE_A_IMP--Adult's Age, categorical, Imputed
race_a	num	8	48	RACE_A--Adult's Race
race4_a	num	8	49	RACE4_A--Four Level adult race
race4_a_imp	num	8	50	RACE4_A_IMP--Four Level adult race, imputed
race5_a	num	8	51	RACE5_A-- Race Ethnicity Adult, 5 categories
race5_a_imp	num	8	52	RACE5_A_IMP--Race Ethnicity Adult, 5 categories, Imputed
hisp_a	num	8	53	HISP_A--Adult Hispanic ethnicity
s15_imp	num	8	54	S15_IMP--Adult Gender, Imputed
gender	num	8	55	GENDER--Adult gender imputed
h77_imp	num	8	56	H77_IMP--Highest level of education, Imputed
educ	num	8	57	EDUC--Level of education
educ_imp	num	8	58	EDUC_IMP--Level of education, Imputed
marital	num	8	59	MARITAL--Marital status
relate_a	num	8	60	RELATE_A -- Relationship of proxy to respondent
i90a_imp	num	8	61	I90A_IMP--Child age, Imputed
age_c	num	8	62	AGE_C--Child's Age, categorical
age_c_imp	num	8	63	AGE_C_imp--Child's Age, categorical, Imputed
race_c	num	8	64	RACE_C--Child's Race
race4_c	num	8	65	RACE4_C--Four Level child race
race4_c_imp	num	8	66	RACE4_C_IMP--Four Level child race, imputed
race5_c	num	8	67	RACE5_C-- Race Ethnicity Child, 5 categories
race5_c_imp	num	8	68	RACE5_C_IMP--Race Ethnicity Child, 5 categories, Imputed
hisp_c	num	8	69	HISP_C--Child Hispanic ethnicity
p148_imp	num	8	70	P148_IMP--Child gender, Imputed
relate_c	num	8	71	RELATE_C -- Relationship of child to proxy
insrd_a	num	8	72	INSRD_A--Adult Insurance Status
insrd_a_imp	num	8	73	INSRD_A_IMP--Adult Insurance Status, Imputed

NAME	TYPE	LENGTH	VARNUM	LABEL
uninsd_a	num	8	74	UNINSD_A--Length of time uninsured, Adult
prior_a	num	8	75	PRIOR_A--Adult - previous insurance type
i_type_a	num	8	76	I_TYPE_A--Adult insurance type (for trend comparisons with previous surveys)
i_type_a_imp	num	8	77	I_TYPE_A_IMP--Adult insurance type, imputed
medicd_a	num	8	78	MEDICD_A--Adult covered by Medicaid
medicd_a_imp	num	8	79	MEDICD_A_IMP--Adult covered by Medicaid, Imputed
b4c2days_imp	num	8	80	B4C2DAYS_IMP--Days Covered by Insurance, Imputed
exch_a	num	8	81	EXCH_A--Adult Calculated exchange coverage
exch_a_imp	num	8	82	EXCH_A_IMP--Adult Calculated exchange coverage, imputed
ins_emp	num	8	83	INS_EMP--Enrolled in employer plan-whose employer
ins_emp2	num	8	84	INS_EMP2--Insured by Own Current Employer
b7_grp	num	8	85	B7_GRP--Adult - type of coverage
employ50	num	8	86	EMPLOY50--Employer size over 50 ppl
insrd_c	num	8	87	INSRD_C--Child Insurance Status
insrd_c_imp	num	8	88	INSRD_C_IMP--Child Insurance Status, Imputed
uninsd_c	num	8	89	UNINSD_C-- Length of time uninsured, Child
i_type_c	num	8	90	I_TYPE_C--Child insurance type (for trend comparisons with previous surveys)
i_type_c_imp	num	8	91	I_TYPE_C_IMP--Child insurance type, imputed
medicd_c	num	8	92	MEDICD_C--Child covered by Medicaid
medicd_c_imp	num	8	93	MEDICD_C_IMP--Child covered by Medicaid, Imputed
exch_c	num	8	94	EXCH_C--Child Calculated exchange coverage
exch_c_imp	num	8	95	EXCH_C_IMP--Child Calculated exchange coverage, imputed
j105newa	num	8	96	J105NEWA--child has dental care coverage
d30_imp	num	8	97	D30_IMP--Adult health status, Imputed
assist	num	8	98	ASSIST--Adult Need for Day to Day Assistance Long Term
therap	num	8	99	THERP-- Need for Special Therapies Long Term
assist2	num	8	100	ASSIST2--Current Need for Personal Care, Domestic, or Social/Emotional Assistance for adults with SHCN in fair or poor health
mhcond	num	8	101	MHCOND-- Potential Disabling Mental Health Condition
care_abd	num	8	102	CARE_ABD--Medicare or Medicaid ABD or Waiver
disab_proxy_a	num	8	103	DISAB_PROXY_A--Proxy for disability - adult
shcn_a	num	8	104	SHCN_A--Adults w/ or w/o special health care needs
smoke_stat	num	8	105	SMOKE_STAT--Smoking Status
bmi_a	num	8	106	BMI_A--Body mass index - adult
bmi_a_cat	num	8	107	BMI_A_CAT--BMI category - adult
l125_imp	num	8	108	L125_IMP--Child health status, Imputed
care	num	8	109	CARE--Need for Atypical Care or Services
limit	num	8	110	LIMIT-- Activity Limitations, child
therap_c	num	8	111	THERAP_C-- Need for Special Therapies Long Term, child
mhcond_c	num	8	112	MHCOND_C-- Potential Disabling Mental Health or developmental Condition, child
care_abd_c	num	8	113	CARE_ABD_C--Medicaid ABD/Waiver or Medicare, child
disab_proxy_c	num	8	114	DISAB_PROXY_C--Proxy for disability - child
shcn_c	num	8	115	SHCN_C--Children w/ or w/o special health care needs
bmi_c_z	num	8	116	BMI_C_Z--child BMI z score, 6 years and older
bmi_c_pct	num	8	117	BMI_C_PCT--child BMI percentage, 6 years and older
bmi_c	num	8	118	BMI_C--child body mass index, 6 years and older
bmi_c_cat2	num	8	119	BMI_C_CAT2--BMI category, children 6 - 18 years old
bmi_c_cat	num	8	120	BMI_C_CAT--BMI category, children 11 years and older
usual_a	num	8	121	USUAL_A--Usual source of care - adult
hosptv_a	num	8	122	HOSPVT_A--Calculated adult overnight hospital visits
ervt_a	num	8	123	ERV_T_A--Adult - number of ER visits
spec_a	num	8	124	SPEC_A--Adult -needing specialist care
specp_a	num	8	125	SPECP_A--Adult - problem seeing a specialist
major_a	num	8	126	MAJOR_A--Major medical costs - adult
avoid_a	num	8	127	AVOID_A--Delayed treatment - adult
otprob_a	num	8	128	OTPROB_A--Other problems getting treatment - adult
hlthnd_a_10	num	8	129	HLTHND_A_10--Problem getting needed health care - adult
hlth3yr_a	num	8	130	HLTH3YR_A--Adult - ability to get health care compared to 3 years ago
usual_c	num	8	131	USUAL_C--Usual source of care - child
hosptv_c	num	8	132	HOSPVT_C--Calculated child overnight hospital visits
ervt_c	num	8	133	ERV_T_C--Child - number of ER visits
specp_c	num	8	134	SPECP_C-- child - problem seeing a specialist
major_c	num	8	135	MAJOR_C--Major medical costs - child
avoid_c	num	8	136	AVOID_C--Delayed treatment - child
otprob_c	num	8	137	OTPROB_C--Other problems getting treatment - child
hlthnd_c_10	num	8	138	HLTHND_C_10--Problem getting needed health care - child
hlth3yr_c	num	8	139	HLTH3YR_C--Child - Ability to get health care