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
190A	num	8	2	190AChild age in years
190B	num	8	3	I90BRelationship to child
I91A	num	8	4	I91AAdult best knows about child's insurance
195	num	8	6	195Last week, child covered by health care plan
195A	num	8	7	195AVerify Child health insurance status
J96	num	8	8	J96Last week, child health insurance same as R
J96A J100A	num	8 8	9 10	J96AConfirm child health insurance same as R J100AChild covered by employer or union plan
J100A	num num	8	10	J100AChild covered by Medicare
J100B_R	num	8	15	J100B_RChild Medicare status recoded
J100BCON	num	8	14	J100BCONConfirm child covered by Medicare
J100C	num	8	11	J100CChild covered by Medicaid
J100C_CK	num	8	12	J100C_CKChild covered by Medicaid
J100CA_REC	num	8	140	J100CA_RECSpecify which Medicaid plan, recode
J100CHK	num	8	23	J100CHKConfirm child health plan coverage
J100E	num	8	16	J100EChild covered by private health plan
J100F J100G	num num	8 8	17 20	J100FChild covered by BCMH or other public program J100G–Does child have any other health coverage
J100G1M1_REC		8	142	J100G1M1_RECType of coverage - specify 1, recode
J100G1M2_REC		8	150	J100G1M2_RECType of coverage - specify 2, recode
J100G1M3	num	8	21	J100G1M3Type of coverage - specify 3
J100H	num	8	22	J100HPays for health insurance plan
J100I1	num	8	19	J100I1Child covered by Health Care Exchange
J100I2_REC	num	8	141	J100I2_RECName of OHCE/healthcare.gov plan, recode
J105A	num	8	24	J105ACurrent plans cover child's dental
J105B J108	num	8 8	25 114	J105BCurrent plan covers child's vision
J108B	num num	8	114	J108Needed help coordinating childs care J108BReceived needed help coordinating childs care
J113 UNIT	num	8	27	J113_UNITDuration of child coverage
J113_VALUE	num	8	26	J113_VALUEDuration of child coverage
J113DAYS	num	8	28	J113DAYSNumber of days covered
J116B	num	8	30	J116BChild covered by any insurance prior to current plan
J117	num	8	31	J117Child covered by Medicaid prior to current plan
J117B	num	8	34	J117BPrior to current coverage had employer/union plan
J117B1_REC	num	8	144	J117B1_RECWhy previous coverage ended, recode
J117C	num	8 8	35	J117CAny other insurance that was paid by R/family
J120 J122_UNIT	num num	8 8	36 38	J120Any time since birth child had no insurance J122 UNITTime without insurance
J122_VALUE	num	8	37	J122_VALUETime without insurance
J122DAYS	num	8	39	J122DAYSDays without insurance
J122RECODE	char	1	126	J122RECODE Recode child time without health insurance
J124AA	num	8	40	J124AAWhile uninsured major medical cost
J124AB	num	8	41	J124ABWhile uninsured delayed/avoided care
J124AC	num	8	42	J124ACWhile uninsured problem getting needed care
J124BA	num	8	43	J124BAChild had major medical cost
J124BB J124BC	num num	8 8	44 45	J124BBDelayed/avoided needed care for child due to cost J124BCProblem getting needed care for child
K4Q24	num	8	43 116	K4Q24Child saw specialist
K4Q25	num	8	110	K4Q25Think child needed specialist
K4Q26	num	8	118	K4Q26Problem for child to see specialist
К96	num	8	46	K96Covered by any health plan since
K97_UNIT	num	8	48	K97_UNITLast time child had health coverage
K97_VALUE	num	8	47	K97_VALUELast time child had health coverage
K97DAYS	char	5	127	K97DAYSDays since child last had health insurance
K98	num	8	49 50	K98Child had same health coverage as R
к98А к99	num	8 8	50 51	K98AConfirm child had same coverage as R K99Last time child had coverage was Medicaid
K99 K99B	num num	8 8	51	K998Last time child had coverage was Medicaid K998Tried to get Medicaid for child
K99B1	num	8	53	K99B1Level of difficulty to apply for Medicaid
K99B2	num	8	54	K99B2Rate Medicaid application process
K100	num	8	57	K100Child last insurance was empoyer/union plan
K101	num	8	58	K101Child last covered by any other family paid insurance
K103_UNIT	num	8	60	K103_UNITLast time child had health coverage
K103_VALUE	num	8	59	K103_VALUELast time child had health coverage
K103DAYS	char	4	128	K103DAYSDays since child last had health insurance
K104	num	8	61 62	K104Anyone try to get Medicaid for child
K104A K104B	num num	8 8	62 63	K104ALevel of difficulty completing Medicaid application K104BRate Medicaid application process
K104B K124A	num	о 8	66	K124AChild had major medical cost while uninsured
K124B	num	8	67	K124BDelayed needed care for child while uninsured
K124C	num	8	68	K124CProblem getting care for child while uninsured
L125	num	8	69	L125Rate childs health
L125A2K	char	3	135	L125A2KChild Weight Kilograms (018-227)

NAME	TYPE L	ENGTH	VARNUM	LABEL
L125A2P	char	3	134	L125A2PChild Weight Pounds (025-500)
L125AC	char	3	132	L125ACChild Height Centimeters
L125AP	char	3	132	L125APChild Height Feet/Inches (FII format)
L125AP_F	char	1	129	L125AP FHow tall is the child now? (0-8 FEET)
L125AP_F	char	2	129	L125APHow tall is the child now? (00-12 INCHES)
—				
L125LBS	char	5	136	L125LBSChild Weight, CALCULATE NUMBER OF POUNDS
L126A	num	8	76	L126AChild takes prescribed meds
L126B	num	8	77	L126BReason child takes prescribed meds
L126C	num	8	78	L126CCondition lasting at least 12 mons
_126D	num	8	79	L126DChild requires more than usual medical care
.126E	num	8	80	L126EMore care due to condition
.126F	num	8	81	L126FCondition lasting at least 12 mons
.126G	num	8	82	L126GLimited ability compared to other children
.126H	num	8	83	L126HLimited ability due to condition
126H_2	num	8	75	L126H_2Child developmental disability
1261	num	8	84	L126ICondition lasting at least 12 mons
126J	num	8	85	L126JChild needs special therapy
126K	num	8	86	L126KTherapy needed due to condition
126L	num	8	87	L126LCondition lasting at least 12 mons
126M	num	8	88	L126MChild needs treatment or couseling
126N	num	8	89	L126NCondition lasting at least 12 mons
4\$5	num	8	96	LAS5Does child have diabetes
4S10		8	93	LAS10Child has difficulty caring for self
	num			
AS11	num	8	94	LAS11Child has difficulty learning
AS12	num	8	95	LAS12Child has difficulty communicating
1130	num	8	100	M130Child received well checkup
1131_UNIT	num	8	98	M131_UNITHow long since last doc visit
/131_VALUE	num	8	97	M131_VALUEHow long since last doc visit
1131A	num	8	99	M131AConfirm child never had doc visit
1131DAYS	char	6	137	M131DAYSDays since last saw doc
1132	num	8	101	M132Times child was admitted to hospital
1134	num	8	102	M134Times child was in ER
1135_UNIT	num	8	104	M135_UNITTime since last dentist visit - days/wks/mons/yrs
1135_VALUE	num	8	103	M135_VALUETime since last dentist visit
1135DAYS	char	5	138	M135DAYSDays since last saw dentist
136	num	8	105	N136Place child goes when sick
136A_REC	num	8	149	N136A_RECKind of place child goes for care, recode
136CHECK	num	8	106	N136CHECKverify place child goes for health care
137A2	num	8	107	N137A2Place child goes most often for care
137B	num	8	108	N137BChild has personal doctor or nurse
137F_REC	num	8	148	N137F_RECReason child has no usual source of care, recode
—		8	139	NF67C RECReason for no regular source of care, recode
IF67C_REC	num			
U100F1	num	8	18	NJ100F1Specify which other public program
IJ117AM1	num	8	32	NJ117AM1Reason child lost Medicaid coverage - specify 1
J117AM1_REC	num	8	143	NJ117AM1_RECReason child lost this coverage - specify 1, recode
J117AM2	num	8	33	NJ117AM2Reason child lost Medicaid coverage - specify 2
K99AM1_REC	num	8	152	NK99AM1_RECReason child lost coverage - specify 1, recode
	num	8	154	NK99AM2 RECReason child lost coverage - specify 2, recode
_	num	8	146	NK99CM1_RECReason child had no Medicaid- specify 2, recode
_				—
K99CM2	num	8	55	NK99CM2Reason child had no Medicaid- specify 2
K99CM3	num	8	56	NK99CM3Reason child had no Medicaid- specify 3
K99DM1_REC	num	8	145	NK99DM1_RECWhy didn't anyone try for child Medicaid- specify 1, recode
K99DM2_REC	num	8	153	NK99DM2_RECWhy didn't anyone try for child Medicaid- specify 2, recode
K105M1	num	8	64	NK105M1Reason child was unable to get Medicaid - specify 1
K105M2	num	8	65	NK105M2Reason child was unable to get Medicaid - specify 2
K106M1_REC	num	8	147	NK106M1_RECWhy didn't anyone try for child Medicaid- specify 1, recode
	num	8	151	NK106M2_RECWhy didn't anyone try for child Medicaid- specify 2, recode
_			119	
139	num	8		O139Child unable to get needed dental care
139B	num	8	120	O139BChild unable to get needed vision care
140	num	8	121	O140Child unable to get needed prescription due to cost
141	num	8	122	O141Child unable to get any other needed health care
144	num	8	123	O144Since 3 years ago, easier/harder to get child health care
148	num	8	1	P148Child gender
149	num	8	124	P149Child Hispanic
151	num	8	125	P151Childs parents employed
AR3	num	8	5	PARWould you be able to answer just 1 to 3 of the most important questions before w
CMH_3	num	8	112	PCMH_3Able to get off hours care for child
CMH_6	num	8	109	PCMH_6Child has seen health provider
СМН_7	num	8	110	PCMH_7Health provider spent enough time with child
CMH_8	num	8	113	PCMH_8Health provider explained things
CMH_X	num	8	111	PCMH_XDays waited for appt for child needing urgent care
	num	8	73	PL125A1Child height
L125A1				

NAME	TYPE	LENGTH	VARNUM	LABEL
PL125INC	char	5	133	PL125INCCALCULATE NUMBER OF INCHES
POSTJ113	num	8	29	POSTJ113Child covered since birth
PRE_LAS10	num	8	90	PRE_LAS10Intro, Child has difficulty caring for self
PRE_LAS11	num	8	91	PRE_LAS11Intro, Child has difficulty learning
PRE_LAS12	num	8	92	PRE_LAS12Intro, Child has difficulty communicating
SUGAR_1	num	8	71	SUGAR_1Glasses of juice yesterday
SUGAR_2	num	8	72	SUGAR_2Glasses of non-diet soda yesterday
WIC 1	num	8	70	WIC_1Last 12 mons, receive WIC benefits