

OMAS 2015 - Adult Variables - PUF Online

Main Study - 100% File (Revised December 2022)

Contents Listing

Date Created: 30MAR23

Data Set Name	DATA.ADULT
Observations	42876
Variables	228
Engine	V9
Created	12/05/2022 20:23:38

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_CHK	num	8	34	B4C_CHK--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

NAME	TYPE	LENGTH	VARNUM	LABEL
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
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 (FII 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

NAME	TYPE	LENGTH	VARNUM	LABEL
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
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_A2CATS--Last year gross income estimate
H84_A3H	num	8	186	H84_A2H--Last year gross income high income categories
H84_A3L	num	8	185	H84_A2L--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

NAME	TYPE	LENGTH	VARNUM	LABEL
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
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