

**MEPS HC-017:
Household Component - Health Insurance Plan
Abstraction
Linked Data, 1996**

**RESEARCH FILE
(non-nationally representative data)**

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User Note

This file contains data from the 1996 Medical Expenditure Panel Survey that is being released for research purposes only. Significant nonresponse prevents these data from being used to make nationally representative estimates. There is no sampling weight included in this file and users are warned to exercise caution in generalizing their results beyond the sample of persons included in the file. This file is being made available to the research community to provide insights into insurance coverage which are comparable to case studies.

The data on this file are being provided as a MEPS Research File, and as such are intended for sophisticated users who are familiar with the MEPS public use files and have experience analyzing complex survey data.

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A. Data Use Agreement

Individual identifiers have been removed from the microdata contained in the files on this CD-ROM. 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.
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.
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 18 U.S.C. 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

This documentation describes one in a series of public use files from the Medical Expenditure Panel Survey (MEPS). The survey provides a new and extensive data set on the use of health services and health care in the United States.

MEPS is conducted to provide nationally representative estimates of health care use, expenditures, sources of payment, and insurance coverage for the U.S. civilian noninstitutionalized population. MEPS also includes a nationally representative survey of nursing homes and their residents. MEPS is cosponsored by the Agency for Healthcare Research and Quality (AHRQ) (formerly the Agency for Health Care Policy and Research (AHCPR)) and the National Center for Health Statistics (NCHS).

MEPS comprises four component surveys: the Household Component (HC), the Medical Provider Component (MPC), the Insurance Component (IC), and the Nursing Home Component (NHC). The HC is the core survey, and it forms the basis for the MPC sample and part of the IC sample. The separate NHC sample supplements the other MEPS components. Together these surveys yield comprehensive data that provide national estimates of the level and distribution of health care use and expenditures, support health services research, and can be used to assess health care policy implications. This file contains data from the Health Insurance Plan Abstraction (HIPA) survey which is part of the MEPS Household Component.

MEPS is the third in a series of national probability surveys conducted by AHRQ on the financing and use of medical care in the United States. The National Medical Care Expenditure Survey (NMCES, also known as NMES-1) was conducted in 1977, the National Medical Expenditure Survey (NMES-2) in 1987. Beginning in 1996, MEPS continues this series with design enhancements and efficiencies that provide a more current data resource to capture the changing dynamics of the health care delivery and insurance system.

The design efficiencies incorporated into MEPS are in accordance with the Department of Health and Human Services (DHHS) Survey Integration Plan of June 1995, which focused on consolidating DHHS surveys, achieving cost efficiencies, reducing respondent burden, and enhancing analytical capacities. To accommodate these goals, new MEPS design features include linkage with the National Health Interview Survey (NHIS), from which the sampling frame for the MEPS HC is drawn, and continuous longitudinal data collection for core survey components. The MEPS HC augments NHIS by selecting a sample of NHIS respondents, collecting additional data on their health care expenditures, and linking these data with additional information collected from the respondents' medical providers, employers, and insurance providers.

1.0 Household Component

The MEPS HC, a nationally representative survey of the U.S. civilian noninstitutionalized population, collects medical expenditure data at both the person and household levels. The HC collects detailed data on demographic characteristics, health conditions, health status, use of medical care services, charges and payments, access to care, satisfaction with care, health insurance coverage, income, and employment.

The HC uses an overlapping panel design in which data are collected through a preliminary contact followed by a series of five rounds of interviews over a 2½-year period. Using computer-assisted personal interviewing (CAPI) technology, data on medical expenditures and use for two calendar years are collected from each household. This series of data collection rounds is launched each subsequent year on a new sample of households to provide overlapping panels of survey data and, when combined with other ongoing panels, will provide continuous and current estimates of health care expenditures.

The sampling frame for the MEPS HC is drawn from respondents to NHIS, conducted by NCHS. NHIS provides a nationally representative sample of the U.S. civilian noninstitutionalized population, with oversampling of Hispanics and blacks.

Health Insurance Plan Abstraction, 1996

The Health Insurance Plan Abstraction (HIPA) survey collects data on the private health insurance plans held by MEPS household respondents and was conducted in 1996 as a periodic part of the MEPS HC. The HIPA contains health insurance plan abstracts with descriptive information on benefits such as deductibles, coinsurance rates, out of pocket maximums, and plan maximums. The HIPA provides detailed information on coverage for hospital room and board, inpatient and outpatient surgery, physician office visits, well baby visits, home health care, inpatient and outpatient mental health services, alcohol and drug detoxification and rehabilitation, outpatient prescription drugs, dental benefits, vision benefits and Medigap policies. In addition, the HIPA contains information on other plan features including cost containment provisions and reimbursement for preventive care, inpatient physician services, non-physician provider services and non-hospital health care facilities. For most covered services the HIPA contains information on both in-network and out-of-network coverage.

Health insurance plan booklets in the HIPA survey are collected from households in the MEPS - HC, from employers in the MEPS - IC, and from Federal Employee Health Benefit plans sponsored by the Federal government. Health benefits information in the HIPA is abstracted for each policyholder. In cases where a plan booklet describes multiple health plans, only the plan(s) that were held by the policyholder are abstracted. HIPA data is linked with data from the HC to provide the final file. The potential population for the 1996 MEPS - Household Component - Health Insurance Plan Abstraction Data (MEPS - HC - HIPA) consists of policyholders and linked dependents who were covered by private health insurance at the time of their Round 1 interview for the 1996 MEPS and who are included in the full-year population in MEPS HC-008.

The 1996 MEPS - HC - HIPA contains information on health plan provisions for approximately 54 percent of the potential population. This yields a non-conditional response rate of 42 percent when it is multiplied by the Round 1 response rate of 78 percent. Significant sample nonresponse in the 1996 HIPA survey prevents these data from supporting national estimates. For this reason there is no sampling weight included in this file and users are warned to exercise caution in generalizing their results beyond the sample of persons included in the file. This file is being made available to the research community to provide insights into insurance coverage which are comparable to case studies.

2.0 Insurance Component

The MEPS - IC collects data on health insurance plans obtained through employers, unions, and other sources of private health insurance. Data obtained in the IC include the number and types of private insurance plans offered, benefits associated with these plans, premiums, contributions by employers and employees, eligibility requirements, and employer characteristics.

The sample for the 1996 MEPS - IC is made up of two parts, the household sample and the list sample. Similar information is collected for each sample although the sources of the samples and their purposes and uses are very different. Because of the similarity in data to be collected the parts are combined for collection purposes only. They are not combined for analytic purposes.

Household Sample

The household sample consists of employers of respondents to the HC, as well as unions and insurance companies which provide insurance to persons who are respondents of the HC. For the household sample, the employers, unions and insurance companies which belong to the IC sample, serve as proxy respondents for persons in the HC sample. Data from the household sample can be linked with other person level information from the HC. Note that significant sample nonresponse in the 1996 household sample prevents these data from supporting national estimates. Furthermore, confidentiality concerns require that the MEPS - IC Household Sample be used at the AHRQ Data Center.

List Sample

The list sample is a nationally representative random sample of private-sector establishments and governments. In 1996 only the MEPS - IC List included a sample of self-employed persons with no employees (SENE). Each of these three groups was selected independent of the others and the household sample. Each was selected from a list frame. Private-sector establishments were selected from the most recent Bureau of the Census' Standard Statistical Establishment List, a list of private sector establishments maintained by the Census. Governments were selected from the 1992 Census of Governments, maintained by the Census Governments Division. The SENE's were selected from a list of persons who filed taxes with the Internal Revenue Service as self employed persons.

The list sample is designed to contain a large enough sample of private-sector establishments and governments for 40 states that it can support estimates of totals for employees working in these 40 states and the nation as a whole. Further details concerning strata used, sample and sample allocations can be found in Sommers, (1999). Tables from the MEPS - IC list sample can be found on the MEPS web site <<http://www.meps.ahrq.gov>>.

The MEPS IC is an annual survey. Data are collected from the selected organizations through a prescreening telephone interview, a mailed questionnaire, and a telephone followup for nonrespondents.

3.0 Medical Provider Component

The MEPS MPC supplements and validates information on medical care events reported in the MEPS HC by contacting medical providers and pharmacies identified by household respondents. The MPC sample includes all hospitals, hospital physicians, home health agencies, and pharmacies reported in the HC. Also included in the MPC are all office-based physicians:

- Providing care for HC respondents receiving Medicaid.
- Associated with a 75-percent sample of HC households receiving care through an HMO (health maintenance organization) or managed care plan.
- Associated with a 25-percent sample of the remaining HC households.

Data are collected on medical and financial characteristics of medical and pharmacy events reported by HC respondents, including:

- Diagnoses coded according to ICD-9-CM (9th Revision, International Classification of Diseases) and DSM-IV (Fourth Edition, *Diagnostic and Statistical Manual of Mental Disorders*).
- Physician procedure codes classified by CPT-4 (Common Procedure Terminology, Version 4).
- Inpatient stay codes classified by DRGs (diagnosis-related groups).
- Prescriptions coded by national drug code (NDC), medication name, strength, and quantity dispensed.
- Charges, payments, and the reasons for any difference between charges and payments.

The MPC is conducted through telephone interviews and mailed survey materials.

4.0 Nursing Home Component

The 1996 MEPS NHC was a survey of nursing homes and persons residing in or admitted to nursing homes at any time during calendar year 1996. The NHC gathered information on the demographic characteristics, residence history, health and functional status, use of services, use of prescription medicines, and health care expenditures of nursing home residents. Nursing home administrators and designated staff also provided information on facility size, ownership, certification status, services provided, revenues and expenses, and other facility characteristics. Data on the income, assets, family relationships, and care-giving services for sampled nursing home residents were obtained from next-of-kin or other knowledgeable persons in the community.

The 1996 MEPS NHC sample was selected using a two-stage stratified probability design. In the first stage, facilities were selected; in the second stage, facility residents were sampled, selecting both persons in residence on January 1, 1996, and those admitted during the period January 1 through December 31.

The sample frame for facilities was derived from the National Health Provider Inventory, which is updated periodically by NCHS. The MEPS NHC data were collected in person in three rounds of data collection over a 1½-year period using the CAPI system. Community data were collected by telephone using computer-assisted telephone interviewing (CATI) technology. At the end of three rounds of data collection, the sample consisted of approximately 815 responding facilities, 3,209 residents in the facility on January 1, and 2,690 eligible residents admitted during 1996.

5.0 Survey Management

MEPS data are collected under the authority of the Public Health Service Act. They are edited and published in accordance with the confidentiality provisions of this act and the Privacy Act. 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 and microdata files. Summary reports are released as printed documents and electronic files. Microdata files are released on CD-ROM and/or as electronic files.

Printed documents and CD-ROMs are available through the AHRQ Publications Clearinghouse. Write or call:

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Be sure to specify the AHRQ number of the document or CD-ROM you are requesting. Selected electronic files are available from the Internet on the MEPS web site:
<<http://www.meps.ahrq.gov/>>.

Additional information on MEPS is available from the MEPS project manager or the MEPS public use data manager at the Center for Cost and Financing Studies, Agency for Healthcare Research and Quality, 2101 East Jefferson Street, Suite 500, Rockville, MD 20852 (301/594-1406).

C. Technical and Programming Information

1.0 General Information

This documentation describes the 1996 MEPS Household Component - Health Insurance Plan Abstraction (HIPA) Data from the Medical Expenditure Panel Survey. Released as an ASCII data file and SAS transport file, this research file contains information collected from the HIPA survey. The HIPA collects and abstracts health insurance plan booklets for all MEPS household respondents who were covered by a private insurance policy at the time of their Round 1 interview for the 1996 MEPS. Health insurance plan abstracts with detailed information on benefits such as deductibles, coinsurance rates, out of pocket maximums, plan maximums, covered services and other plan features are included in this file.

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

- Data File Description
- Data File Contents
- Codebook
- Crosswalk of Variables to Variable Source
- HIPA Abstraction Screens

For more information on MEPS HC survey design see S. Cohen, 1997; J.Cohen, 1997; and S. Cohen, 1996. For information on the MEPS - HC - HIPA and for copies of the HIPA instruments see the MEPS web site at the following address: <<http://www.meps.ahrq.gov>>.

2.0 Data File Description

The potential population for the 1996 MEPS - HC - HIPA Linked Data is all persons in the HC who were covered by a private insurance policy at the time of their interview in Round 1 of the 1996 MEPS and who are included in the full-year population in MEPS HC-008. This definition includes all policyholders and dependents. The MEPS - HC - HIPA contains detailed information on health plan provisions for 54 percent of the potential population. This yields a non-conditional response rate of 42 percent when it is multiplied by the Round 1 response rate of 78 percent.

The MEPS - HC - HIPA is a person establishment level file. There is one record on the file for each unique combination of establishment (source of insurance), policyholder, and covered person (policyholder or dependent). There are 8,181 records on the file that have HIPA data. These records are comprised of 3,754 policyholders and 3,645 dependents who obtained

insurance from 3,736 establishments. Each record on the file contains the following ID variables.

DUPERSID is the person identifier (either a dependent or a policyholder).

PHOLDER indicates whether the person is the policyholder for the insurance coverage identified on the record.

DEPNNT indicates whether the person is a dependent covered under the insurance coverage identified on the record.

ESTBID is an ID number for the establishment—employer, union, insurance company—that is the source of the insurance coverage on the record.

EPRSID is a combination of ESTBID and the policyholder’s DUPERSID and uniquely identifies each health plan—where health plan is defined as the insurance coverage that a policyholder obtains from an individual establishment.

COVCOUNT is the number of policies that cover each individual as a policyholder or as a dependent.

A person (DUPERSID) can be listed more than once on this file if they are covered—as a policyholder or a dependent— by insurance policies from more than one establishment. Establishment-policyholder pairs (EPRSIDs) can be listed more than once if the health plan a policyholder obtains from a given establishment also covers his/her dependents. As noted above there is a record on the MEPS - HC - HIPA for each unique combination of establishment—policyholder (EPRSID) and covered person (DUPERSID). The following table presents a hypothetical example that illustrates the relationship between the ID variables on this file.

<u>Establishment ID</u>	<u>Person ID</u>	<u>Establishment ID + Policyholder ID</u>	<u>PHOLDER</u>	<u>DEPNNT</u>	<u>COVCOUNT</u>
11	44	1144	1	0	2
22	44	2244	1	0	2
33	51	3351	1	0	1
33	52	3351	0	1	1
33	53	3351	0	1	1

The first two rows of the table represent a situation where a person (DUPERSID = 44) is listed two times (COVCOUNT = 2) in the MEPS - HC -HIPA file because she obtains insurance from more than one establishment. Since the person is a policyholder (PHOLDER = 1) her DUPERSID is repeated in her EPRSID. The last three rows of the table represent a situation where a health plan (i.e., a unique establishment-policyholder pair, EPRSID = 3351) covers a policyholder and two dependents. Note that the policyholder's DUPERSID appears in the EPRSID for all three covered persons and that a combination of EPRSID and DUPERSID is required to uniquely identify each record on the file.

In order to conduct person-level analyses it is necessary to identify all policies that cover each individual either as a policyholder or as a dependent. Since each person in the MEPS - HC - HIPA is uniquely identified by the variable DUPERSID, person-level analyses can be conducted by examining all health plans that are linked to each DUPERSID. The variable COVCOUNT was constructed to facilitate person-level analyses.

It is also important to note that some health plans in the MEPS - HC - HIPA do not have a record for a policyholder. Specifically, 397 unique EPRSIDs do not have a record where PHOLDER = 1. A total of 514 dependents are covered by these health plans. Health plans that only have records for dependents occur in the MEPS - HC - HIPA in cases where the policyholder is deceased, the policyholder is not in the dependents' reporting unit, or the policyholder is not included in the full-year population in MEPS HC-008.

2.1 Imputations in the MEPS - HC - HIPA Linked Data

As noted above the MEPS - HC - HIPA contains detailed data on health plan provisions for approximately 54 percent of persons who held private insurance at Round 1 of the 1996 MEPS and who are included in the full-year population in MEPS HC-008.¹ Most nonresponse occurred because health plan booklets were not collected. In addition some plan booklets were collected and subsequently rejected for abstraction. The most frequent reasons for rejecting a plan booklet for abstraction were that insufficient details were provided of plan provisions or that the plan booklet described several "offered" health plans and it was not possible to determine which plan the MEPS respondent actually held. Entire HIPA records were imputed in cases where the policyholder had IC benefits information from the MEPS followback but did not have a HIPA record. The IC benefits were used to aid the imputation of HIPA records for these cases. These MEPS - HC - HIPA records are identified by an imputation flag (ICIMP = 1).

The values of some constructed variables were also imputed. All constructed variables for which some values were imputed have an imputation flag. These flags have the same (or similar name) as the constructed variable preceded by an "I". For example IOVDEDI is the imputation flag for

¹This yields a non-conditional response rate of 42 percent when it is multiplied by the Round 1 response rate of 78 percent.

OVDEDI.

In constructing variables, imputations were done to replace values for variables that were missing in the original, unedited HIPA data. Missing values in the original HIPA data occurred when abstractors could not determine some aspect of a health plan's benefits from the plan booklet. One reason for missing values is that some health plan booklets describe policies that cover outpatient prescription drugs but the booklets do not provide details of the drug coverage.² Entire sets of constructed drug coverage variables were imputed for these policies. Logical edits were used in cases where the initial construction of overall out of pocket limits and hospital room and board maximums resulted in implausible values. Some health plans, for example, had implausibly low per confinement/year maximums for hospital room and board. In constructing hospital maximum variables for these health plans, we treated the maximum given in the original HIPA data as a "per day", rather than a "per confinement/year" maximum. In cases, such as this, where the value of a variable was changed by a logical edit the variable was flagged as imputed.

2.2 Codebook Structure

Frequencies are provided for each variable on the file. The codebook and data file sequence list variables in the following order:

- Unique person and establishment identifiers from the Household Component
- Demographic variables from the Household Component
- Constructed HIPA variables that summarize insurance provisions
- Imputation flags for constructed HIPA variables
- All variables from the HIPA instrument

2.3 Reserved Codes

The following reserved code values are used:

VALUE	DEFINITION
-1 NOT APPLICABLE	Question was not asked due to skip pattern.
-9 NOT SPECIFIED	Interviewer did not record the data or abstractor could not determine the benefit.
9,999,999	The variable has an unlimited value. (For example, for a policy which has no lifetime dollar maximum OVMAXIL = 9,999,999.)

2.4 Codebook Format

²In order to be accepted for abstraction, a health plan was required to have details on both hospital room and board and physician office visit coverage. Details on prescription drug coverage, however, were not required.

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

IDENTIFIER	DESCRIPTION
Name	Variable name (maximum of 8 characters)
Description	Variable descriptor (maximum of 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

3.0 Data File Contents

3.1 ID Variables

Identifiers from the Household Component

In the MEPS Household Component the definitions of Dwelling Units (DUs) and Group Quarters are generally consistent with the definitions employed for the National Health Interview Survey. The dwelling unit ID (DUID) is a five-digit random ID number assigned after the case was sampled for MEPS. The person number (PID) uniquely identifies all persons within the dwelling unit. The variable DUPERSID is the combination of the variables DUID and PID. The MEPS - HC - HIPA can be linked to other person-level public use files such as MEPS HC001: 1996 Panel Round 1 Population Characteristics by using the DUPERSID.

ESTBID is an ID number assigned to places of employment and to sources of insurance during the household interview.

EPRSID is a combination of ESTBID and the policyholder's DUPERSID.

PHOLDER indicates whether the person represented by DUPERSID is the policyholder for the insurance coverage identified on the record.

DEPNNT indicates whether the person represented by DUPERSID is a dependent covered under the insurance coverage identified on this record.

3.2 Demographic Variables from the Household Component

Age as of Round 1, race/ethnicity, and sex are added to this file for the convenience of researchers. This information was collected in the household interview. For more information on these variables refer to the documentation for MEPS HC001: 1996 Panel Round 1 Population Characteristics.

3.3 Overview of the Health Insurance Plan Abstraction Data

In the positional listing of variables, which begins on page 14 of the codebook, the original, unedited HIPA variables begin with five coverage variables—MEDICAL, MEDIGAP, DRUGS, DENTAL, and VISION—that indicate whether a health plan provides each type of benefits. All medical policies (MEDICAL = 1) provide insurance coverage for hospital room and board and most provide coverage for other medical services such as physician office visits and surgery. Medigap policies (MEDIGAP = 1) are supplemental health plans purchased by Medicare beneficiaries to cover the deductibles, coinsurance, and other uncovered benefits of the Medicare program. A health plan cannot be both a medical policy and a Medigap policy (i.e., if MEDICAL = 1 then MEDIGAP = 2 and vice versa). In most cases coverage for outpatient prescription drugs (DRUGS = 1) and dental and vision benefits (DENTAL = 1, VISION = 1) is provided as part of a medical policy or a Medigap policy. The HIPA data, however, also contains information on single service plans that do not cover medical services (MEDICAL = 2) and are not Medigap policies (MEDIGAP = 2). These single service plans cover different combinations of drug, dental, and vision benefits.

Health plan provisions in the HIPA data are recorded in terms of plan internal limits and overall limits. Internal limits refer to plan provisions that are specific to a particular covered service. Overall limits refer to plan provisions that apply over many services, but not necessarily to all services. The overall limit variables in the HIPA database provide information on the deductibles, coinsurance rates, out of pocket maximums, and plan maximums that apply across a number of services in medical policies. Most health plan provisions in the HIPA data are also recorded as they apply within the plan’s provider network (in-plan) and outside the plan’s provider network (out of plan). Many HIPA variables end with the suffix “I” or “O” to indicate whether the variable refers to in-plan or out of plan provisions.

The HIPA data contain detailed information on coverage for a number of medical services (see list below). For each medical service an initial summary of medical services variable characterizes a health plan’s coverage of the service. The variable HSCOVI, for example, classifies each health plan’s in-plan coverage of hospital room and board as:

- 1 = Covered in Full
- 4 = Internal Limits Only
- 5 = Overall Limits Only
- 6 = Internal and Overall Limits
- 1 = Not Applicable

If a health plan has internal limits only (HSCOVI = 4) then the in-plan deductible, coinsurance rate and other limits for hospital room and board are recorded in a set of hospital specific variables that begin with “HS” and end with “I.” If a health plan has overall limits only (HSCOVI = 5) then the in-plan overall limits are the only relevant limits for hospital room and board. Each medical service in the HIPA database has a coverage type variable and a set of service-specific limit variables for both the in-plan and out of plan coverage of the service.

Variables for each service are identified by a prefix as follows:

HS = hospital room and board	MI = inpatient mental health
IS = inpatient surgery	MO = outpatient mental health
OS = outpatient surgery	AD = inpatient alcohol/drug detox
OF = physician office visits	AR = inpatient alcohol/drug rehabilitation
WB = well baby	AO = outpatient alcohol/drug rehabilitation
HH = home health care	

The HIPA data also contains information on Medigap policies. All Medigap variables begin with the prefix “GAP.” The variable GAPTYPE indicates whether a policy is a one of the ten standard Medigap policies (GAPTYPE = A, ..J) or another type of plan (GAPTYPE = 11)³. Following GAPTYPE is a series of variables that indicate which deductibles, coinsurance rates and other uncovered benefits of the Medicare program are covered by the Medigap policy. For example, GAPA = 1 indicates that the policy covers Part A benefits.

Finally, the variables for drug, dental, and vision benefits are each identified by a prefix as follows:

DR = drug
DN = dental
VS = vision

As noted above drug, dental, and vision benefits may be included as part of a medical policy or a Medigap policy, or they may be provided in different combinations in single service policies. Drug, dental and vision benefits that are part of medical policies may be subject to overall and/or internal limits. Drug, dental and vision benefits that are provided in Medigap policies or single service policies, on the other hand, are only subject to internal limits. It is also important to note that separate drug coverage variables are provided for brand and generic drugs.

3.4 Constructed Flags and Count Variables

General Description of Constructed Variables

The rest of the documentation describes variables that were constructed to assist researchers in using the MEPS - HC - HIPA data. (Users who want more information on the original, unedited HIPA variables should refer to the HIPA Abstraction Screens in the technical appendix in section F of the documentation.) Variables were constructed which summarize the overall policy limits and the coverage for hospital room and board, physician office visits, and

³Some of these “other” plans are grandfathered plans sold prior to the establishment of the ten A-J plans, while others seem to fall into one of the ten categories.

outpatient prescription drugs for each health plan. Constructed variables incorporate both overall and internal limits and flags are provided which indicate whether a particular plan provision results from an overall limit, an internal limit, or both.

In constructing variables we assumed that covered individuals would use the most generous benefits available to them. For this reason only in-plan provisions were used to construct variables since they are more generous than out of plan provisions. In constructing drug variables brand or generic information was used according to the following criterion. If a health plan had information for both types of drugs, we used brand name information if the brand name coinsurance rate⁴ was greater than, or equal to, the generic coinsurance rate. If a health plan had information for only one type of drugs then the available information was used to construct the drug variables.⁵ Health plan provisions that increase benefits for using participating pharmacies or for using mail order drugs may also affect the generosity of drug benefits. Both unedited and constructed drug benefit variables in this file are coded as they apply to a covered person using a local participating pharmacy.

In the positional listing of variables, which begins on page 14 of the codebook, the constructed variables begin with OVLIMIT and end with DRGINOOP. The prefix of each constructed variable indicates whether the variable applies to overall limits, to hospital room and board, to physician office visits, or to outpatient prescription drugs. Following the constructed variables in the positional listing of variables are imputation flags. These flags begin with IOVDEDI and end with IDRGMAXL. Not all constructed variables have an imputation flag. If a constructed variable does not have an imputation flag this indicates that no values were imputed for this variable. The prefix of the imputation flags are the same, or are similar to, the prefixes of the constructed variables with an “I” preceding them. The prefixes for constructed variables and imputation flags are as follows:

OV	=	overall variables
HOSP	=	hospital room and board variables
DRV	=	physician office visit variables
DRG	=	outpatient prescription drug variables
IOV	=	imputation flag for overall variables
IHSP	=	imputation flag for hospital room and board variables
IDRV	=	imputation flag for physician office visit variables

⁴The coinsurance rate is defined as the percent of total costs that are covered by the insurance plan after any deductibles have been met and before any maximums take effect.

⁵If a plan booklet did not distinguish between generic and brand name drugs the HIPA abstractors assumed that both were covered. Drug benefits for these cases were coded as brand name drug coverage, and generic drug coverage was coded as “not specified.”

IDRG = imputation flag for outpatient prescription drug variables

Coverage Variables

The coverage variables—OVLIMIT, HOSPCOV, DRVCOV, and DRGCOV—indicate whether a health plan has overall limits and whether the plan provides benefits in each of the service categories. Users should note that all three types of health plans described above—medical, Medigap, and single-service—potentially include drug coverage. Only medical policies, however, may have overall limits or coverage for hospital room and board and physician office visits. OVLIMIT, HOSPCOV, and DRVCOV, therefore, are set equal to “-1 Not Applicable” for Medigap and single service policies. The unedited HIPA variables used to construct each coverage variable are given below.

<u>Constructed Variable</u>	<u>Unedited HIPA Variables</u>
OVLIMIT	medical, overlimi
HOSPCOV	medical, hscovi
DRVCOV	medical, ofcovi
DRUGCOV	drugs, drugcovb, drugcovg

Coinsurance Rates and Payment Type Variables

The coinsurance rate variables summarize the percent of total costs that are covered by the insurance plan after any deductibles have been met and before any maximums take effect. The rate variables have values expressed in terms of percentages that range from 0 to 100. There is one rate variable for overall limits and one for each of the three service categories. The letters “RATE” are used as the last four letters of the variable name for this group of variables. For each rate variable there is a corresponding payment type variable, with a variable name ending with the four letters “PAYT.” Payment type variables indicate how the health plan pays for the covered service. The payment type variables were constructed so that analysts can reconstruct the original benefit. They are coded as follows:

(_PAYT = 1)	plan pays a specified percentage of the charges
(_PAYT = 2)	plan pays the remainder after a copayment by the covered person
(_PAYT = 3)	plan pays a specified percentage after a copayment by the covered person
(_PAYT = 4)	plan has a maximum allowable payment for a covered service
(_PAYT = 5)	plan has “Negotiated Discounts Only”—only applies to drug coverage

As a first example consider a health plan where the payment type for physician office visits is a percentage (DRVPAYT = 1) and the corresponding rate variable has a value of 80 (DRVRATE = 80). In this case the interpretation is straightforward: the plan is written in terms of the percentage of covered charges paid by the insurer and pays 80 percent of all covered

charges for physician office visits. In other health plans payments for physician office visits involve a copayment ($_PAYT = 2$ or 3) or a maximum allowable payment for a service ($_PAYT = 4$). In constructing the “RATE” variables, copayments and maximum allowable payments were converted into percentages by using the assumption that each covered person faces the average cost of each covered service. Since health plan booklets were collected for the HIPA survey in 1996, average costs were calculated for each covered service using MEPS HC - 011: The 1996 Full Year Use and Expenditure Data. The average costs for each service are as follows:

Hospital room and board:	\$1147/day
Physician office visits:	\$91/visit
Prescriptions:	\$33.60/prescription
Overall:	(Uses the average cost for physician office visits.)

For an example of how coinsurance rates were calculated for health plans that had copayments ($_PAYT = 2$), consider a health plan that describes the coverage for physician office visits as fully covered after a \$10 copay. We assume that the covered person faces the average cost of a physician office visit for MEPS households in 1996, which was \$91. If the covered person pays \$10 for every visit then the plan pays \$81 for every visit. We calculate the percent paid by the plan by dividing 81 by 91 and code the answer (.89) as a percent in the rate variable ($DRVRATE = 89$). We also set $DRVPAYT = 2$ (copayment) so that the original benefit can be reconstructed by analysts using the file. Users should note that the unedited HIPA data records hospital room and board deductibles for some health plans in terms of an amount per day. In constructing the coinsurance rate for hospital room and board ($HOSPRATE$) “per day” deductibles are treated as though they were copays.

In a small percentage of cases the coinsurance rates for physician office visits, hospital room and board, and prescription drugs are determined by both a copayment and a coinsurance rate ($_PAYT = 3$). As an example suppose that a health plan describes the coverage for physician office visits as paying 90 percent of the cost of each visit after a copay of \$10. To calculate the coinsurance rate we assume that the covered person is charged \$91 for the physician office visit. The covered person pays a \$10 copay and then the plan pays 90 percent of the remaining \$81. We calculate the percent paid by the plan by multiplying 81 by (.9) and then dividing by 91. Then we code the answer (.80) as a percent in the rate variable ($DRVRATE = .80$) and set $DRVPAYT = 3$.⁶

Another example is given for the small number of cases in which the coinsurance rate for physician office visits and hospital room and board are determined by maximum allowable payments ($_PAYT = 4$). Some policies have limits expressed in terms of a dollar maximum per visit for physician office visits or maximum dollars per day for hospital room and board. These limits are incorporated into the coinsurance rates of the respective services. As an example

⁶For health plans with $_PAYT = 3$ or 4 the original benefits can only be reconstructed by using the unedited HIPA variables.

consider a health plan that specifies that it will pay a maximum of \$60 per physician office visit. In this case we calculate the percent of the visit paid by the plan by dividing 60 by 91. We code the answer (.66) as a percent in the rate variable (DRVRATE = 66) and set DRVPAYT = 4. If a health plan had specified a dollar maximum per visit that was greater than 91 then the limit was not used to calculate DRVRATE. Values for maximum allowable costs for each service that were greater than the average cost of the service were not used so that constructed _RATE variables always have values that are less than, or equal to 100.

Finally, in some drug policies, the covered person receives “Negotiated Discounts Only” (DRGPAYT = 5). These policies negotiate price discounts on behalf of covered persons but do not have provisions for cost sharing. Because they do not share costs, DRGRATE (and all other drug variables) for these policies is set equal to -1.

Deductibles

Individual deductible variables were constructed for hospital room and board, physician office visits and prescription drugs and individual and family deductibles were constructed for overall limits. Deductibles for specific services may result from internal limits, from overall limits, or from a combination of the two. In health plans where both an internal and an overall deductible applied to a service the deductibles were summed.⁷ The constructed deductible variables included in this file represent the deductible faced by a person for that service who has not used any other service or met any other deductible. Analysts who want to study the generosity of insurance coverage as it applies to a single service, therefore, can use the constructed deductible variables as they are recorded in the file. Some analysts may want to study the generosity of insurance coverage as it applies to more than one service. To facilitate studies of this kind, flag variables (FDEDIO_) were constructed that indicate whether each service-specific deductible results from an internal limit (FDEDIO_ = 1), an overall limit (FDEDIO_ = 2), or a sum of the two (FDEDIO_ = 3).

An example is now given of how the deductible flag variables (FDEDIO_) can be used to study insurance coverage as it applies to utilization of more than one health service. Consider a health plan that has FDEDIO_H = 2 and FDEDIO_P = 2 so that the deductible for hospital room and board (HOSPDEDI) and physician office visits (DRVDEDI) are both equal to the overall deductible (OVDEDI). The deductible that the covered person faces for the total costs of both types of services in this case is OVDEDI. It is not OVDEDI multiplied by two because covered persons are only required to meet their overall deductible once. For a second example consider a health plan that has FDEDIO_H = 1 and FDEDIO_P = 2 so that the deductible for hospital room and board (HOSPDEDI) results from a limit that is specific to hospital room and board and the deductible for physician office visits (DRVDEDI) is equal to the overall deductible. In this case the covered person faces separate deductibles for the costs of hospital room and board

⁷There are also a small number of cases where two different types of internal deductibles apply. Again, in these cases, the two types of deductibles are summed.

(HOSPDEDI) and for the costs of physician office visits (DRVDEDI = OVDEDI).

Users should note that internal hospital deductibles in the HIPA file are recorded in one of three ways: a dollar amount per confinement/year, a number of days per confinement/year, or a dollar amount per day. The constructed hospital deductible variable (HOSPDEDI) is recorded in terms of a dollar amount per confinement/year. For cases where the deductible is expressed as the number of days per confinement/year we converted the deductible into an amount per confinement/year using assumptions about the average cost per day for hospital room and board. These cost assumptions are discussed above in the description of the constructed coinsurance rate variables. For cases where the deductible is expressed as an amount per day we treat the deductible as a copay and incorporate it into the hospital coinsurance rate (HOSPRATE).

Maximums

Annual and lifetime plan maximum variables were constructed for overall limits, hospital room and board, physician office visits and prescription drug coverage. In order to use the maximum variables it is necessary to understand how the lifetime and annual variables relate to each other. As an example consider the lifetime and annual maximums for physician office visits (DRVMAXIL and DRVMAXIY). The following table presents all of the different combinations of values for these two variables.

<u>DRVCOV</u>	<u>DRVMAXIL</u>	<u>DRVMAXIY</u>
-1:NA	-1	-1
2:No	-1	-1
1:Yes	>0	-1
1:Yes	-1	>0
1:Yes	>0	>0

Lifetime and annual maximum variables are both coded as “-1 Not Applicable” for health plans that do not cover physician office visits. This includes Medigap and single-service plans (DRVCOV = -1) and medical plans that do not cover physician office visits (DRVCOV = 2). Health plans that have coverage for physician office visits (DRVCOV = 1) may have maximums expressed in terms of lifetime and/or annual limits. The third row of the table represents health plans where the physician office visit maximum is expressed in terms of a lifetime limit (DRVMAXIL >0) but is not expressed in terms of an annual limit (DRVMAXIY = -1). The fourth row represents the opposite situation. It is important to note—as the third and fourth row of the table demonstrate—that both the lifetime and annual maximum variables must be used to ensure that relevant maximums are obtained for all health plans. Finally, the health plans represented by the fifth row of the table have maximums expressed in terms of both lifetime and annual limits. Many of these health plans have no plan maximum (DRVMAXIL = 9,999,999

and DRVMAXIY = 9,999,999).

The constructed maximum variables included on this file represent the maximum amount that a health plan will pay for a service for a person who has not used any other service. Analysts who want to study the generosity of insurance coverage for a single service, therefore, can use the constructed maximums as they are recorded in the file. Analysts may also want to study the generosity of insurance coverage as it applies to more than one service. To facilitate studies of this kind, flag variables (FMAXIO_) were constructed that indicate whether each service-specific annual maximum results from an internal limit (FMAXIO_ = 1), or an overall limit (FMAXIO_ = 2). No flag variable was constructed for lifetime maximums because all lifetime maximums result from overall limits.⁸

Users should note that annual hospital room and board maximums in the HIPA file are recorded in one of three ways: a dollar amount per confinement/year, a number of days per confinement/year, or a dollar amount per day. The constructed annual hospital maximum variable (HOSPMAXY) is recorded in terms of a dollar amount per confinement/year. For cases where the maximum is expressed as the number of days per confinement/year we converted the maximum into an amount per confinement/year using assumptions about the average cost per day for hospital room and board. These cost assumptions are discussed above in the description of the constructed coinsurance rate variables. We also constructed a separate variable (HOSPMAXNT) for the maximum number of days in the hospital per confinement / year. For cases where the maximum is expressed as a dollar amount per day the maximum is incorporated into the hospital coinsurance rate (HOSPRATE).⁹ (See the discussion on coinsurance rates for health plans that have _PAYT = 4 for a description of how these maximums are incorporated into the coinsurance rate.)

Users should also note that annual physician office visit maximums in the HIPA file are also recorded in one of three ways: a dollar amount per year, a maximum number of visits per year, or a maximum dollar amount per visit. The constructed annual physician office visits maximum variable (DRVMAXY) is recorded in terms of a dollar amount per year. For cases where the maximum is expressed as the number of visits per year we converted the maximum into an amount per year using assumptions about the average cost of a physician office visit. We

⁸Some values for service-specific lifetime maximum variables were coded from internal limits, but in every case in which this was done the health plan provides unlimited coverage of the service (_MAXL = 9,999,999).

⁹Some health plans in the HIPA data had a maximum dollar amount per confinement/year for hospital room and board that was less than or equal to \$1000—many were well below \$1000. In editing the data we treated cases that had per confinement/year maximums that were less than or equal to \$1000 as per day, rather than per confinement/year maximums. We chose \$1000 as the cutoff point both because it is the largest dollar value in the HIPA data that would make sense as a daily maximum and because inspection of the health plans revealed that there was a qualitative difference between the policies that were coded with per confinement/year maximums less than \$1000 and those with per confinement/year maximums greater than \$1000. (Health plans with per confinement/year maximums greater than \$1000 tended to have either no overall limits (internal limits only) or very low overall maximums.)

also constructed a separate variable (DRVMAXVS) for the maximum number of physician office visits per year. For cases where the maximum is expressed as an amount per visit the maximum is incorporated into the physician office visit coinsurance rate. (See the discussion on coinsurance rates for health plans that have $_PAYT = 4$ for a description of how these maximums are incorporated into the coinsurance rate.)

Out of Pocket Limits

Out of pocket (OOP) limit variables are constructed for overall individual OOP limits (OVMOOPI) and for overall family OOP limits (OVMOOPF). A flag variable (OOPDEDFL) indicates whether or not the individual (family) overall deductible counts toward the individual (family) OOP limit. For health plans that do include the deductible in the OOP limit OVMOOPI and OVMOOPF are constructed by subtracting the individual or family overall deductible from the stated OOP amount. For example, if $OOPDEDFL = 1$ then $OVMOOPI = OOP\ Amount - OVDEDI$. The total overall out of pocket expenses faced by a covered who has not previously had any medical expenditures, therefore, is the overall individual deductible plus the constructed OOP limit ($OVDEDI + OVMOOPI$).¹⁰ This is true whether or not the deductible is included in the OOP limit. The total overall out of pocket expenses faced by a family that has not previously had any medical expenditures is the overall family deductible plus the constructed family OOP limit ($OVDEDF + OVMOOPF$).

In addition to the overall OOP limits a variable (HOSPMOOP) is constructed for internal individual hospital room and board OOP limits. If a health plan specifies an individual OOP limit that is specific to hospital room and board then $HOSPMOOP \geq 0$. For all other health plans HOSPMOOP is coded as “-1 NOT APPLICABLE.” For health plans that have an internal hospital room and board OOP limit a flag variable (FOOP_H) indicates whether or not the overall individual OOP limit also applies. If $FOOP_H = 1$ then HOSPMOOP is the only OOP limit that applies to hospital room and board. If $FHOOP = 2$ then both HOSPOOP and OVMOOPI apply.

There are no OOP limits that are specific to prescription drugs but a flag variable (DRGINOOP) indicates whether a covered person or covered family’s prescription drug expenditures apply to their overall OOP limit.

¹⁰The unedited OOP limit variables in the HIPA file are expressed in one of three ways: as an OOP amount, as a covered expense, or as benefits paid. When an OOP variable is expressed in terms of a covered expense it is converted to an OOP amount by multiplying the covered expense by $[1 - OVRATE]$, where OVRATE is the overall coinsurance rate for the policy. When an OOP variable is expressed in terms of benefits paid it is converted to an OOP amount by multiplying the benefits paid by $[1 - OVRATE] / OVRATE$.

D.Codebook

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 CODEBOOK

DATE: February 12, 2001

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
873	874	ADALLO	ALC/DRUG INPAT DETOX ALL LIMIT:ALL
914	915	ADCOIN	ALC/DRUG INPAT DETOX TYPE COINS
885	886	ADCOINI	ALC/DRUG INPAT DETOX INTRN LIMIT:COINS
877	878	ADCOINO	ALC/DRG INPAT DETOX ALL LINT:COINS/COPAY
916	918	ADCOINP	ALC/DRUG INPAT DETOX % COINS
541	542	ADCOVI	BNFT CVRG FOR ALC/DRUG INPAT DETOX-IN
563	564	ADCOVO	BNFT CVRG FOR ALC/DRUG INPAT DETOX-OUT
905	908	ADDECYD	A/D INP DETOX TYP DED:AMNT DED/CONFIN/YR
895	896	ADDEDCY	ALC/DRUG INPAT DETOX TYPE DED:/CONFIN/YR
897	898	ADDEDDF	ALC/DRUG INPAT DETOX TYPE DED:/DAY FIX
899	900	ADDEDDV	ALC/DRUG INPAT DETOX TYPE DED:/DAY VARY
901	902	ADDEDDY	A/DRG INP DETOX TYP DED:# DAYS/CONFIN/YR
909	911	ADDEDFD	A/D INP DETOX DED:AMT DED/DAY FIX VARY
883	884	ADDEDI	ALC/DRUG INPAT DETOX INTRN LIMIT:DEDUCT
903	904	ADDEDNS	ALC/DRUG INATP DETOX TYP DED:NOT SPECFD
875	876	ADDEDQ	ALC/DRUG INPAT DETOX ALL LIMIT:DEDUCT
912	913	ADDEDYN	A/D INP DETOX TYP DED:# DAYS/CONFIN/YR
923	925	ADMAXCYN	A/D INP DETOX DAY MAX:MAX #DYS/CONFIN/YR
891	892	ADMAXDI	ALC/DRUG INPAT DETOX INTRN LIMIT:\$ MAX
889	890	ADMAXNI	ALC/DRUG INPAT DETOX INTRN LIMIT:DAY MAX
881	882	ADMAXO	ALC/DRUG INPAT DETOX ALL LIMIT:PLAN MAX
571	572	ADMDMX	\$ LIFE MAX FOR MNTL HLTH,ALCOHOL/DRUGS
585	586	ADMDMXAD	ALC/DRUG INPAT DETOX APPLIES \$ LIFE MAX
579	580	ADMDMXAL	ALL MH,ALCOHOL/DRUGS APPLY 2 \$ LIFE MAX
589	590	ADMDMXAO	ALC/DRUG OUTP REHAB APPLIES \$ LIFE MAX
587	588	ADMDMXAR	ALC/DRUG INPAT REHAB APPLIES \$ LIFE MAX
573	578	ADMDMXD	AMNT \$ LIFE MAX-MNTL HLTH,ALCOHOL/DRUGS
581	582	ADMDMXMI	MNTL HLTH INPAT APPLIES \$ LIFE MAX
583	584	ADMDMXMO	MNTL HLTH OUTPAT APPLIES \$ LIFE MAX
591	592	ADMVMX	DAY/VISIT LIFE MAXS 4 MH,ALCOHOL/DRUGS
599	600	ADMVMXAD	ALC/DRUG INPAT DETOX-DAY/VISIT LIFE MAX
593	594	ADMVMXAL	ALL MH,ALCOHOL,DRUG-DAY/VST LIFE MAX
603	604	ADMVMXAO	ALC/DRUG OUTPAT REHAB-DAY/VISIT LIFE MAX
601	602	ADMVMXAR	ALC/DRUG INPAT REHAB-DAY/VISIT LIFE MAX
595	596	ADMVMXMI	MH INPAT APPLIES 2 DAY/VISIT LIFE MAX
597	598	ADMVMXMO	MH OUTPAT APPLIES 2 DAY/VST LIFE MAX
926	927	ADMXCY	ALC/DRUG INPAT DETOX TYP \$ MAX:/CONFN/YR
932	937	ADMXCYD	A/D INPAT DETOX \$ MAX:AMT \$MAX/CONFIN/YR
928	929	ADMXDY	ALC/DRUG INPAT DETOX TYPE \$ MAX: /DAY
938	940	ADMXDYD	A/D INPAT DETOX TYPE \$ MAX:AMT \$ MAX/DAY
930	931	ADMXNS	ALC/DRUG INPAT DETOX TYPE \$ MAX:NOT SPEC
919	922	ADOOPD	ALC/DRUG INPAT DETOX AMNT OOP LIMIT
887	888	ADOOPI	ALC/DRUG INPAT DETOX INTRN LINT:OOP LINT
879	880	ADOOPO	ALC/DRUG INPAT DETOX ALL LIMIT:OOP LIMIT
893	894	ADOTHI	ALC/DRUG INPAT DETOX INTRN LIMIT:OTHR
569	570	ADSAME	ALC/DRUG BNFTS SAME AS EACH OTHR
52	52	AGE1X	AGE-RD1 (EDITED / IMPUTED)
1440	1441	AOALLO	ALC/DRUG OUTP REHAB ALL LINT:ALL
1452	1453	AOCOIFI	ALC/DRUG OUTP REHAB INTRN LINT:COINS FIX
1444	1445	AOCOINO	ALC/DRUG OUTP REHAB ALL LINT:COINS/COPAY
1471	1473	AOCOINP	ALC/DRUG OUTP REHAB:% COINS FIX VARY
1454	1455	AOCOIVI	ALC/DRUG OUTP REHAB INTRN LMT:COINS VARY
1474	1476	AOCOPD	A/D OUTP REHAB:AMT COPAY/VST FIX VARY
1456	1457	AOCOPFI	A/D OUTP REHAB INTRN LMT:COPAY/VST FIX
1458	1459	AOCOPVI	A/D OUTP REHAB INTRN LMT:COPAY/VST VARY
545	546	AOCОВI	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-IN
567	568	AOCOVO	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-OUT
1468	1470	AODEDD	ALC/DRUG OUTP REHAB:AMNT DEDUCT/YR
1450	1451	AODEDI	ALC/DRUG OUTP REHAB INTRN LINT:DEDUCT/YR

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ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
1442	1443	AODEDO	ALC/DRUG OUTP REHAB ALL LIMIT:DEDUCT
1448	1449	AOMAXO	ALC/DRUG OUTP REHAB ALL LIMIT:PLAN MAX
1480	1482	AOMXDVD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX /VST
1462	1463	AOMXDVI	ALC/DRUG OUTP REHAB INTRN LMT:\$ MAX/VST
1460	1461	AOMXNVI	ALC/DRUG OUTP REHAB INTRN LMT:MAX #VISTS
1477	1479	AOMXNVN	ALC/DRUG OUTP REHAB:# MAX # VISITS
1483	1487	AOMXYRD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX/YR
1464	1465	AOMXYRI	A/DRUG OUTP REHAB INTRN LIMIT:\$ MAX/YR
1446	1447	AOOPO	ALC/DRUG OUTP REHAB ALL LIMIT:OOP LIMIT
1466	1467	AOOTH	ALC/DRUG OUTP REHAB INTRN LIMIT:OTHR
347	348	APEXPED	EXPEDITED PROCESS AVAILABLE-APPEAL
343	344	APINFO	INFO PROVIDED-WHERE TO SEND APPEAL
339	340	APPEAL	APPEAL PROCESS PROVIDED FOR 1ST LVL
341	342	APPEAL2L	2ND+ LEVEL(S) OF APPEAL PROVIDED IF
345	346	APTME	TIME LIMITS SPECIFIED FOR THE APPEAL
941	942	ARALLO	ALC/DRUG INPAT REHAB ALL LIMIT:ALL
982	983	ARCOIN	ALC/DRUG INPAT REHAB TYPE COINS
953	954	ARCOINI	ALC/DRUG INPAT REHAB INTRN LIMIT:COINS
945	946	ARCOINO	ALC/DRUG INPAT REHB ALL LIMIT:COINS/COPAY
984	986	ARCOINP	ALC/DRUG INPAT REHAB % COINS
543	544	ARCOVI	BNFT CVRG FOR ALC/DRUG INPAT REHAB-IN
565	566	ARCOVO	BNFT CVRG FOR ALC/DRUG INPAT REHAB-OUT
973	976	ARDECYD	A/D INPAT REHAB DED:AMT DED/CONFIN/YR
963	964	ARDEDCY	ALC/DRUG INPAT REHAB TYPE DED:/CONFIN/YR
965	966	ARDEDDF	ALC/DRUG INPAT REHAB TYPE DED:/DAY FIX
967	968	ARDEDDV	ALC/DRUG INPAT REHAB TYPE DED:/DAY VARY
969	970	ARDEDDY	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR
977	979	ARDEDFD	A/D INP REHAB DED:AMNT DED/DAY FIX VARY
951	952	ARDEDI	ALC/DRUG INPAT REHAB INTRN LIMIT:DEDUCT
971	972	ARDEDNS	ALC/DRUG INPAT REHAB TYPE DED:NOT SPEC
943	944	ARDEDO	ALC/DRUG INPAT REHAB ALL LIMIT:DEDUCT
980	981	ARDEDYN	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR
991	993	ARMAXCYN	A/D INP REHB DAY MAX:MAX # DYS/CONFIN/YR
959	960	ARMAXDI	ALC/DRUG INPAT REHAB INTRN LIMIT:\$ MAX
957	958	ARMAXNI	ALC/DRUG INPAT REHAB INTRN LIMIT:DAY MAX
949	950	ARMAXO	ALC/DRUG INPAT REHAB ALL LIMIT:PLAN MAX
994	995	ARMXCY	A/D INPAT REHAB TYPE \$ MAX:/CONFIN/YR
1000	1005	ARMXCYD	A/D INPT REHAB \$ MAX:AMNT \$MAX/CONFIN/YR
996	997	ARMXDY	ALC/DRUG INPAT REHAB TYPE \$ MAX:/DAY
1006	1008	ARMXDYD	A/D INPAT REHAB TYPE \$ MAX:AMNT \$MAX/DAY
998	999	ARMXNS	ALC/DRUG INPAT REHAB TYPE \$ MAX:NOT SPEC
987	990	AROOPD	ALC/DRUG INPAT REHAB AMNT OOP LIMIT:
955	956	AROOPI	ALC/DRUG INPAT REHAB INTRN LIMIT:OOP LIMIT
947	948	AROOPO	ALC/DRUG INPAT REHAB ALL LIMIT:OOP LIMIT
961	962	AROTHI	ALC/DRUG INPAT REHAB INTRN LIMIT:OTHR
301	302	CCAUDIT	COST CONTAIN:PENLTY 4 ER OUT OF NET
291	292	CCNONE	COST CONTAIN: NONE
307	308	CCOTH	COST CONTAIN: OTHR
305	306	CCOUTSUR	COST CONTAIN: OUTPAT SURGRY INCENTV
293	294	CCPC	COST CONTAIN: PREADM CERTIFICATION
315	316	CCPCCOIN	PREADM CERT: COINS REDUCED
317	318	CCPCCOP	PREADM CERT: COPAY INCREASED
313	314	CCPCDED	PREADM CERT:DEDUCT IMPOSE/INCREASE
311	312	CCPCNOCV	PREADM CERT: NO CVRG PROVIDED
309	310	CCPCNOPN	PREADM CERT: NO PENALTY
321	322	CCPCNS	PREADM CERT: NOT SPECIFIED
319	320	CCPCOTH	PREADM CERT: OTHR
295	296	CCPRETST	COST CONTAIN: PREADMISSION TESTING
303	304	CCSS	COST CONTAIN: 2ND SURGICAL OPINION

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ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

-----ALPHABETICAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
329	330	CCSSCOIN	PNLTY NO 2ND SURG OPIN: COINS REDUCED
331	332	CCSSCOP	PNLTY NO 2ND SURG OPIN: COPAY INCREASED
327	328	CCSSDED	PNLTY NO 2ND SURG OPIN: DEDUCT
333	334	CCSSLOW	PNLTY NO 2ND SRG OPIN:LOWER SCHD PAYMNT
325	326	CCSSNOCV	PNLTY NO 2ND SURG OPIN:NO CVRG PROVD
323	324	CCSSNOPN	PNLTY NO 2ND SURG OPIN: NO PENALTY
337	338	CCSSNS	PNLTY NO 2ND SURG OPIN: NOT SPECFD
335	336	CCSSOTH	PNLTY NO 2ND SURG OPIN: OTHER
297	298	CCUTIL	COST CONTAIN: UTILIZATION CONCUR REVU
299	300	CCWKEND	COST CONTAIN:NON-EMRG WEEKEND ADM
397	398	COICOPDI	AMT COPAY 4 COINS/COPAY:COPA FIX VARY-IN
404	405	COICOPDO	AMT COPA 4 COINS/COPAY:COPA FIX VARY-OUT
392	393	COICOPI	TYPE COINS/COPAY-IN
399	400	COICOPO	TYPE COINS/COPAY-OUT
394	396	COICOPPI	% COINS 4 COINS/COPAY:COINS FIX VARY-IN
401	403	COICOPPO	% COINS 4 COINS/COPAY:COINS FIX VARY-OUT
217	217	COVCOUNT	NUMBER OF POLICIES COVERING PERSON
359	363	DEDFDI	FAM DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN
379	383	DEDFDO	FAMILY DEDUCT:/YR \$ AMT VARY-ERNGS-OUT
368	369	DEDFPCTI	FAM DEDUCT:PERCENT OF EARNINGS-IN
388	389	DEDFPCTO	FAMILY DEDUCT:PERCENT OF EARNINGS-OUT
353	354	DEDI	TYPE DEDUCT-IN
355	358	DEDIDI	INDIV DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN
374	378	DEDIDO	INDIV DEDUCT:/YR \$ AMT VARY BY ERNGS-OUT
390	391	DEDINUM0	# INDIV FOR DEDUCT:% OF EARNINGS-OUT
366	367	DEDIPCTI	INDIV DEDUCT: PERCENT OF EARNINGS-IN
386	387	DEDIPCTO	INDIV DEDUCT:PERCENT OF EARNINGS-OUT
364	365	DEDNUMDI	# INDV 4 DEDUC:/YR \$ AMT VARY-ERNGS-IN
384	385	DEDNUMDO	# INDV 4 DEDUCT:/YR \$ AMT VARY-ERNGS-OUT
370	371	DEDNUMPI	# INDIV FOR DEDUCT:% OF EARNINGS-IN
372	373	DEDO	TYPE DEDUCT-OUT
265	266	DENTAL	DENTAL CVRG PROVIDED
51	51	DEPDNT	DEPENDENT OF POLICYHOLDER
1769	1771	DNCR1CIP	CRWN/PROS:% COINS (PROV 1)
1772	1774	DNCR1CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 1)
1767	1768	DNCR1CV	BNFT CVRG FOR CRWN/PROS (PROV 1)
1778	1779	DNCR1DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 1)
1775	1777	DNCR1FED	CRWN/PROS:AMNT FEE SCHD SPEC PROC (P 1)
1782	1783	DNCR2CIP	CRWN/PROS:% COINS (PROV 2)
1784	1785	DNCR2CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 2)
1780	1781	DNCR2CV	BNFT CVRG FOR CRWN/PROS (PROV 2)
1789	1790	DNCR2DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 2)
1786	1788	DNCR2FED	CRWN/PROS:AMNT FEE SCHD SPEC PROC (P 2)
1619	1620	DNDED	DENTAL DEDUCT
1630	1631	DNDEDALL	DNTL SRVCS SUBJ 2 DEDUCT:ALL COVRD SRVCS
1642	1643	DNDEDCR	DENTL SRVCS SUBJ 2 DEDUCT:CRWN/PROS
1640	1641	DNDEDEN	DENTL SRVCS SUBJ 2 DEDUCT:ENDO
1632	1633	DNDEDEX	DENTL SRVCS SUBJ 2 DEDUCT:EXAM,XRAY
1624	1627	DNDEDFD	AMNT FAMILY DEDUCT
1636	1637	DNDEDFL	DENTL SRVCS SUBJ 2 DEDUCT:FILLINGS
1621	1623	DNDEDID	AMNT INDIV DEDUCT
1628	1629	DNDEDN	# INDIV FOR DENTAL DEDUCT
1644	1645	DNDEDOR	DENTL SRVCS SUBJ 2 DEDUCT:ORTHODONTIA
1638	1639	DNDEDPR	DENTL SRVCS SUBJ 2 DEDUCT:PERIO
1634	1635	DNDEDSR	DENTL SRVCS SUBJ 2 DEDUCT:SURGERY
1617	1618	DNDETAIL	DETAILS PROVIDED FOR DENTAL CVRG
1745	1747	DNEN1CIP	ENDO:% COINS (PROV 1)
1748	1750	DNEN1CPD	ENDO:AMNT COPAY /PROC OR /VST (P 1)
1743	1744	DNEN1CV	BNFT CVRG FOR ENDO (PROV 1)

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START	END	NAME	DESCRIPTION
1754	1755	DNEN1DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 1)
1751	1753	DNEN1FED	ENDO:AMNT FEE SCHD SPEC PROC (P 1)
1758	1759	DNEN2CIP	ENDO:% COINS (PROV 2)
1760	1761	DNEN2CPD	ENDO:AMNT COPAY /PROC OR /VST (PRV 2)
1756	1757	DNEN2CV	BNFT CVRG FOR ENDO (PROV 2)
1765	1766	DNEN2DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 2)
1762	1764	DNEN2FED	ENDO:AMNT FEE SCHD SPEC PROC (PRV 2)
1654	1656	DNEX1CIP	EXAM,XRAY,CLEAN:% COINS (PROV 1)
1657	1658	DNEX1CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 1)
1652	1653	DNEX1CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (P 1)
1661	1662	DNEX1DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 1)
1659	1660	DNEX1FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 1)
1665	1667	DNEX2CIP	EXAM,XRAY,CLEAN:% COINS (PROV 2)
1668	1669	DNEX2CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 2)
1663	1664	DNEX2CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (PROV 2)
1672	1673	DNEX2DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 2)
1670	1671	DNEX2FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 2)
1699	1701	DNFL1CIP	FILLINGS:% COINS (PROV 1)
1702	1703	DNFL1CPD	FILLINGS:AMNT COPAY /PROC /VST (P 1)
1697	1698	DNFL1CV	BNFT CVRG FOR FILLINGS (PROV 1)
1707	1708	DNFL1DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 1)
1704	1706	DNFL1FED	FILLINGS:AMNT FEE SCHD SPEC PROC (P 1)
1711	1713	DNFL2CIP	FILLINGS:% COINS (PROV 2)
1714	1715	DNFL2CPD	FILLINGS:AMNT COPAY /PROC /VST (P 2)
1709	1710	DNFL2CV	BNFT CVRG FOR FILLINGS (PROV 2)
1718	1719	DNFL2DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 2)
1716	1717	DNFL2FED	FILLINGS:AMNT FEE SCHD SPEC PROC (P 2)
1646	1647	DNMAX	YEARLY DENTAL MAX
1648	1651	DNMAXD	AMNT YEARLY DENTAL MAX
1615	1616	DNORTH	ORTHODONTIA CVRG
1722	1724	DNPR1CIP	PERIO:% COINS (PROV 1)
1725	1727	DNPR1CPD	PERIO:AMNT COPAY /PROC OR /VST (P 1)
1720	1721	DNPR1CV	BNFT CVRG FOR PERIO (PROV 1)
1731	1732	DNPR1DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 1)
1728	1730	DNPR1FED	PERIO:AMNT FEE SCHD SPEC PROC (P 1)
1735	1736	DNPR2CIP	PERIO:% COINS (PROV 2)
1737	1738	DNPR2CPD	PERIO:AMNT COPAY /PROC OR /VST (P 2)
1733	1734	DNPR2CV	BNFT CVRG FOR PERIO (PROV 2)
1741	1742	DNPR2DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 2)
1739	1740	DNPR2FED	PERIO:AMNT FEE SCHD SPEC PROC (P 2)
1613	1614	DNPREV	PREVENTIVE DENTAL CARE CVRG
1611	1612	DNPROV	TYPE DENTAL PROVIDER
1676	1678	DNSR1CIP	SURGERY:% COINS (PROV 1)
1679	1680	DNSR1CPD	SURGERY:AMNT COPAY /PROC /VST (P 1)
1674	1675	DNSR1CV	BNFT CVRG FOR SURGERY (PROV 1)
1684	1685	DNSR1DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 1)
1681	1683	DNSR1FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 1)
1688	1690	DNSR2CIP	SURGERY:% COINS (PROV 2)
1691	1692	DNSR2CPD	SURGERY:AMNT COPAY /PROC /VST (P 2)
1686	1687	DNSR2CV	BNFT CVRG FOR SURGERY (PROV 2)
1695	1696	DNSR2DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 2)
1693	1694	DNSR2FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 2)
1534	1535	DRALLOB	OUTPAT PMEDS ALL LIMIT:ALL (BRAND)
1573	1574	DRALLOG	OUTP PMEDS ALL LIMIT:ALL (GEN)
1546	1547	DRCOINIB	OUTP PMEDS INTRN LIMIT:COINS (BRAND)
1585	1586	DRCOINIG	OUTP PMEDS INTRN LIMIT:COINS (GEN)
1538	1539	DRCOINOB	OUTPAT PMEDS ALL LIMIT:COINS (BRAND)
1577	1578	DRCOINOG	OUTP PMEDS ALL LIMIT:COINS (GEN)
1563	1565	DRCOINPB	% COINS (BRAND)

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START	END	NAME	DESCRIPTION
1601	1603	DRCOINPG	% COINS (GENERIC)
1566	1567	DRCOPDB	AMNT COPAY PER PRESCRIPTION (BRAND)
1604	1605	DRCOPDG	AMNT COPAY PER PRESCRIPTION (GEN)
1548	1549	DRCOPIB	OUTP PMEDS INTRN LMT:COPAY/SCRIPT(BRAND)
1587	1588	DRCOPIG	OUTP PMEDS INTRN LMT:COPAY/SCRIPT(GEN)
1558	1560	DRDEDFDB	AMNT FAMILY DEDUCT/YR (BRAND)
1596	1598	DRDEDFDG	AMNT FAMILY DEDUCT/YR (GENERIC)
1544	1545	DRDEDIB	OUTP PMEDS INTRN LIMIT:DEDUCT/YR (BRAND)
1554	1557	DRDEDIDB	AMNT INDIV DEDUCT/YR (BRAND)
1593	1595	DRDEDIDG	AMNT INDIV DEDUCT/YR (GENERIC)
1583	1584	DRDEDIG	OUTP PMEDS INTRN LIMIT:DEDUCT/YR (GEN)
1561	1562	DRDEDNB	# INDIV FOR DEDUCT/YR (BRAND)
1599	1600	DRDEDNG	# INDIV FOR DEDUCT/YR (GENERIC)
1536	1537	DRDEDOB	OUTPAT PMEDS ALL LIMIT:DEDUCT (BRAND)
1575	1576	DRDEDOG	OUTP PMEDS ALL LIMIT:DEDUCT (GEN)
1532	1533	DRFORMUL	FORMULARY DRUGS
185	186	DRGCOV	DRUG COVERAGE INDICATOR
187	190	DRGDEDI	DRUG INDIVIDUAL DEDUCTIBLE
215	216	DRGINOOP	FLAG: DRUGS INCLUDED IN OOP LIMIT?
207	214	DRGMAXIL	DRUG LIFETIME MAXIMUM
198	204	DRGMAXIY	DRUG ANNUAL MAXIMUM
196	197	DRGPAYT	DRUG PAYMENT TYPE
193	195	DRGRATE	DRUG COINSURANCE RATE
1528	1529	DRMAIL	MAIL ORDER DRUGS
1568	1572	DRMAXDB	AMNT \$ LIMIT/YR (BRAND)
1606	1610	DRMAXDG	AMNT \$ LIMIT/YR. (GENERIC)
1550	1551	DRMAXIB	OUTP PMEDS INTRN LIMIT:\$ MAX/YR (BRAND)
1589	1590	DRMAXIG	OUTP PMEDS INTRN LIMIT:\$ MAX/YR (GEN)
1542	1543	DRMAXOB	OUTP PMEDS ALL LIMIT:PLAN MAX (BRAND)
1581	1582	DRMAXOG	OUTP PMEDS ALL LIMIT:PLAN MAX (GEN)
1540	1541	DROOPOB	OUTP PMEDS ALL LIMIT:OOP LIMIT (BRAND)
1579	1580	DROOPOG	OUTP PMEDS ALL LIMIT:OOP LIMIT (GEN)
1552	1553	DROTHIB	OUTP PMEDS INTRN LIMIT:OTHR (BRAND)
1591	1592	DROTHIG	OUTP PMEDS INTRN LIMIT:OTHR (GEN)
1530	1531	DRPP	PARTICIPATING PHARMACIES
1524	1525	DRUGCOVB	BNFT CVRG FOR OUTPAT PMEDS (BRAND)
1526	1527	DRUGCOVG	BNFT CVRG FOR OUTPAT PMEDS (GEN)
263	264	DRUGS	PRESCRIPTION DRUG CVRG PROVIDED
148	149	DRVCOV	PHYSICIAN OFF. VIS. COVERAGE INDICATOR
150	153	DRVDEDI	PHYSICIAN OFF. VIS. IND. DEDUCTIBLE
170	177	DRVMAXIL	PHYSICIAN OFF. VIS. LIFETIME MAXIMUM
161	167	DRVMAXIY	PHYSICIAN OFF. VIS. ANNUAL MAXIMUM
178	184	DRVMAXVS	PHYSICIAN OFF. VIS. MAX VISITS / YEAR
159	160	DRVPAYT	PHYSICIAN OFF. VIS. PAYMENT TYPE
156	158	DRVRATE	PHYSICIAN OFF. VIS. COINSURANCE RATE
1	5	DUID	DWELLING UNIT ID
9	16	DUPERSID	PERSON ID (DUID+PID)
28	49	EPRSIDX	ESTABLISHMENT ID + POLICYHOLDER ID
17	27	ESTBIDX	ESTABLISHMENT ID
191	192	FDEDIO_D	FLAG: DRUG. DED. INTERNAL / OVERALL
111	112	FDEDIO_H	FLAG: HOSP. DED. INTERNAL / OVERALL
154	155	FDEDIO_P	FLAG: PHYS. DED. INTERNAL / OVERALL
205	206	FMAXIO_D	FLAG: DRUG. ANN. MAX INTERNAL / OVERALL
125	126	FMAXIO_H	FLAG: HOSP. ANN. MAX INTERNAL / OVERALL
168	169	FMAXIO_P	FLAG: PHYS. ANN. MAX INTERNAL / OVERALL
139	140	FOOP_H	FLAG: HOSP OOP INTERNAL / OVERALL
1490	1491	GAPA	PART A BNFT
1492	1493	GAPA1COP	PART A BNFT:HOSP COPAY - DAYS 61-90
1494	1495	GAPA2COP	PART A BNFT:HOSP COPAY - DAYS 91-150

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START	END	NAME	DESCRIPTION
1496	1497	GAPA3COP	PART A BNFT:HOSP COPAY GT 150 DAYS
1500	1501	GAPADED	PART A BNFT:DEDUCT
1498	1499	GAPASNF	PART A BNFT:SNF COPAY - DAYS 21-100
1502	1503	GAPB	PART B BNFT
1508	1509	GAPB1COI	PART B BNFT:COINS, W/OUT ADDTL DEDUCT
1510	1511	GAPB2COI	PART B BNFT:COINS, W/ ADDTL DEDUCT
1512	1513	GAPB3COI	PART B BNFT:COINS-OUTPAT MNLT HLTH
1506	1507	GAPBDED	PART B BNFT:DEDUCT
1504	1505	GAPBEXC	PART B BNFT:EXCESS CHARGE
1514	1515	GAPOTH	OTHR BNFT
1516	1517	GAPOTHBL	OTHR BNFT:BLOOD DEDUCT
1520	1521	GAPOTHHM	OTHR BNFT:AT-HOME RECOVERY
1522	1523	GAPOTHPR	OTHR BNFT:PREVENTIVE MEDICAL CARE
1518	1519	GAPOTHTR	OTHR BNFT:FOREIGN TRAVL BNFT-MED EMRG
1488	1489	GAPTYPE	TYPE MEDIGAP PLAN
275	276	GATEKEEP	REQUIRE PRIM-CARE DR-REFER SPECIALIST
277	278	GATELEV	LEVEL(S):REQ PRIM-CARE DR-REFER SPCLST
1344	1345	HHALLO	HOME HEALTH CARE ALL LIMIT:ALL
1356	1357	HHCOIFI	HOME HEALTH CARE INTRN LIMIT:COINS FIX
1348	1349	HHCOINO	HOME HEALTH CARE ALL LIMIT:COINS/COPAY
1375	1377	HHCOINP	HOME HEALTH CARE:% COINS FIX VARY
1358	1359	HHCOIVI	HOME HEALTH CARE INTRN LIMIT:COINS VARY
1378	1379	HHCOPD	HOME HEALTH CARE:AMNT COPAY/VST FIX VARY
1360	1361	HHCOPFI	HOME HLTH CARE INTRN LMT:COPAY/VST FIX
1362	1363	HHCOPVI	HOME HLTH CARE INTRN LMT:COPAY/VST VARY
535	536	HHCOVI	BNFT CVRG FOR HOME HEALTH CARE-IN
557	558	HHCOVO	BNFT CVRG FOR HOME HEALTH CARE-OUT
1372	1374	HHDEDD	HOME HEALTH CARE:AMNT DEDUCT/YR
1354	1355	HHDEDI	HOME HEALTH CARE INTRN LIMIT:DEDUCT/YR
1346	1347	HHDEDO	HOME HEALTH CARE ALL LIMIT:DEDUCT
1352	1353	HHMAXO	HOME HEALTH CARE ALL LIMIT:PLAN MAX
1384	1386	HHMXDVD	HOME HEALTH CARE:\$ AMNT \$ MAX /VST
1366	1367	HHMXDVI	HOME HEALTH CARE INTRN LIMIT:\$ MAX /VST
1364	1365	HHMXNVI	HOME HEALTH CARE INTRN LIMIT:MAX #VISTS
1380	1383	HHMXNVN	HOME HEALTH CARE:# MAX # VISITS
1387	1391	HHMXYRD	HOME HEALTH CARE:\$ AMNT \$ MAX/YR
1368	1369	HHMXYRI	HOME HEALTH CARE INTRN LIMIT:\$ MAX/YR
1350	1351	HHOPO	HOME HEALTH CARE ALL LIMIT:OOP LIMIT
1370	1371	HHOTHI	HOME HEALTH CARE INTRN LIMIT:OTHR
283	284	HMOFEDQ	HMO FEDERALLY QUALIFIED
281	282	HMOMODEL	HMO MODEL TYPE
104	105	HOSPCOV	HOSPITAL R / B COVERAGE INDICATOR
106	110	HOSPDEDI	HOSPITAL R / B INDIVIDUAL DEDUCTIBLE
127	134	HOSPMAXL	HOSPITAL R / B LIFETIME MAXIMUM
118	124	HOSPMAXY	HOSPITAL R / B ANNUAL MAXIMUM
135	138	HOSPMOOP	HOSPITAL R / B INTERNAL OOP MAXIMUM
116	117	HOSPPAYT	HOSPITAL R / B PAYMENT TYPE
113	115	HOSPRATE	HOSPITAL R / B COINSURANCE RATE
669	670	HSALLOI	HOSP R/B ALL LIMIT:ALL-IN
736	737	HSALLOO	HOSP R/B ALL LIMIT:ALL-OUT
709	710	HSCOINI	HOSP R/B TYPE COINS-IN
681	682	HSCOINII	HOSP R/B INTRN LIMIT:COINS-IN
748	749	HSCOINIO	HOSP R/B INTRN LIMIT:COINS-OUT
777	778	HSCOINO	HOSP R/B TYPE COINS-OUT
673	674	HSCOINOI	HOSP R/B ALL LIMIT:COINS/COPAY-IN
740	741	HSCOINOO	HOSP R/B ALL LIMIT:COINS/COPAY-OUT
711	713	HSCOINPI	HOSP R/B % COINS-IN
779	781	HSCOINPO	HOSP R/B % COINS-OUT
525	526	HSCОВI	BNFT CVRG FOR HOSP R/B-IN

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START	END	NAME	DESCRIPTION
547	548	HSCOVO	BNFT CVRG FOR HOSP R/B-OUT
701	703	HSDECYDI	HSP R/B TYP DEDUC:AMT DEDUC/CONFIN/YR-IN
768	771	HSDECYDO	HSP RB TYP DED:AMNT DEDUC/CONFIN/YR-OUT
691	692	HSDEDCYI	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-IN
758	759	HSDEDCYO	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-OUT
693	694	HSDEDDFI	HOSP R/B TYPE DEDUCT:/DAY FIX-IN
760	761	HSDEDDFO	HOSP R/B TYPE DEDUCT:/DAY FIX-OUT
695	696	HSDEDDVI	HOSP R/B TYPE DEDUCT:/DAY VARY-IN
762	763	HSDEDDVO	HOSP R/B TYPE DEDUCT:/DAY VARY-OUT
697	698	HSDEDDYI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN
764	765	HSDEDDYO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT
704	706	HSDEDFDI	HSP RB TYP DEDUC:AMT DED/DAY FIX VARY-IN
772	774	HSDEDFDO	HSP RB TYP DED:AMT DED/DAY FIX VARY-OUT
679	680	HSDEDII	HOSP R/B INTRN LIMIT:DEDUCT-IN
746	747	HSDEDIO	HOSP R/B INTRN LIMIT:DEDUCT-OUT
699	700	HSDEDNSI	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-IN
766	767	HSDEDNSO	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-OUT
671	672	HSDEDOI	HOSP R/B ALL LIMIT:DEDUCT-IN
738	739	HSDEDOO	HOSP R/B ALL LIMIT:DEDUCT-OUT
707	708	HSDEYNI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN
775	776	HSDEYNO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT
687	688	HSMAXDII	HOSP R/B INTRN LIMIT:\$ MAX-IN
754	755	HSMAXDIO	HOSP R/B INTRN LIMIT:\$ MAX-OUT
685	686	HSMAXNII	HOSP R/B INTRN LIMIT:DAY MAX-IN
752	753	HSMAXNIO	HOSP R/B INTRN LIMIT:DAY MAX-OUT
677	678	HSMAXOI	HOSP R/B ALL LIMIT:PLAN MAX-IN
744	745	HSMAXOO	HOSP R/B ALL LIMIT:PLAN MAX-OUT
727	732	HSMXCYDI	HSP R/B TYP \$ MAX:AMT \$ MAX/CONFIN/YR-IN
795	800	HSMXCYDO	HSP RB TYP \$MAX:AMNT \$MAX/CONFIN/YR-OUT
721	722	HSMXCYI	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-IN
718	720	HSMXCYNI	HOSP R/B DAY MAX:MAX # DAYS/CONFIN/YR-IN
786	788	HSMXCYNO	HSP RB DAY MAX:MAX # DAYS/CONFIN/YR-OUT
789	790	HSMXCYO	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-OUT
733	735	HSMXDYDI	HOSP R/B TYPE \$ MAX:AMT \$ MAX/DAY-IN
801	804	HSMXDYDO	HSP RB TYPE \$ MAX:AMNT \$ MAX/DAY-OUT
723	724	HSMXDYI	HOSP R/B TYPE \$ MAX:/DAY-IN
791	792	HSMXDYO	HOSP R/B TYPE \$ MAX:/DAY-OUT
725	726	HSMXNSI	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-IN
793	794	HSMXNSO	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-OUT
714	717	HSOOPDI	HOSP R/B AMNT OOP LIMIT-IN
782	785	HSOOPDO	HOSP R/B AMNT OOP LIMIT-OUT
683	684	HSOOPII	HOSP R/B INTRN LIMIT:OOP LIMIT-IN
750	751	HSOOPIO	HOSP R/B INTRN LIMIT:OOP LIMIT-OUT
675	676	HSOOPOI	HOSP R/B ALL LIMIT:OOP LIMIT-IN
742	743	HSOOPOO	HOSP R/B ALL LIMIT:OOP LIMIT-OUT
689	690	HSOTHII	HOSP R/B INTRN LIMIT:OTHR-IN
756	757	HSOTHIO	HOSP R/B INTRN LIMIT:OTHR-OUT
141	147	HSPMAXNT	HOSPITAL R / B MAX NIGHTS / YEAR
258	258	ICIMP	FLAG: RECORD IMPUTED USING IC DATA
252	253	IDRGDEDI	IMPUTATION FLAG FOR DRGDEDI
256	257	IDRGMAXL	IMPUTATION FLAG FOR DRGMAXIL
254	255	IDRGMAXY	IMPUTATION FLAG FOR DRGMAXIY
250	251	IDRGRATE	IMPUTATION FLAG FOR DRGRATE
242	243	IDRVDEDI	IMPUTATION FLAG FOR DRVDEDI
248	249	IDRVMAXL	IMPUTATION FLAG FOR DRVMAXIL
246	247	IDRVMAXY	IMPUTATION FLAG FOR DRVMAXIY
244	245	IDRVRATE	IMPUTATION FLAG FOR DRVRATE
234	235	IHSPDEDI	IMPUTATION FLAG FOR HOSPDEDI
240	241	IHSPMAXL	IMPUTATION FLAG FOR HOSPMAXL

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START	END	NAME	DESCRIPTION
238	239	IHSPMAXY	IMPUTATION FLAG FOR HOSPMAXL
236	237	IHSPMOOP	IMPUTATION FLAG FOR HOSPMOOP
232	233	IHSPRATE	IMPUTATION FLAG FOR HOSPRATE
220	221	IOVDEDF	IMPUTATION FLAG FOR OVDEDF
218	219	IOVDEDI	IMPUTATION FLAG FOR ODEDI
226	227	IOVMAXIL	IMPUTATION FLAG FOR OVMAXIL
224	225	IOVMAXIY	IMPUTATION FLAG FOR OVMAXIY
230	231	IOVMOOPF	IMPUTATION FLAG FOR OVMOOPF
228	229	IOVMOOPI	IMPUTATION FLAG FOR OVMOOPI
222	223	IOVRATE	IMPUTATION FLAG FOR OVRATE
1009	1010	ISALLOI	INPAT SURGERY ALL LIMIT:ALL-IN
1062	1063	ISALLOO	INPAT SURGERY ALL LIMIT:ALL-OUT
1021	1022	ISCOINII	INPAT SURGERY INTRN LIMIT:COINS-IN
1074	1075	ISCOINIO	INPAT SURGERY INTRN LIMIT:COINS-OUT
1013	1014	ISCOINOI	INPAT SURGERY ALL LIMIT:COINS/COPAY-IN
1066	1067	ISCOINOO	INPAT SURGERY ALL LIMIT:COINS/COPAY-OUT
1032	1034	ISCOINPI	INPAT SURGERY:% COINS-IN
1085	1087	ISCOINPO	INPAT SURGERY:% COINS-OUT
1035	1037	ISCOPEI	INPAT SURGERY:AMNT COPAY-IN
1088	1090	ISCOPEO	INPAT SURGERY:AMNT COPAY-OUT
1023	1024	ISCOPII	INPAT SURGERY INTRN LIMIT:COPAY-IN
1076	1077	ISCOPIO	INPAT SURGERY INTRN LIMIT:COPAY-OUT
527	528	ISCOVI	BNFT CVRG FOR INPAT SURGERY-IN
549	550	ISCOVO	BNFT CVRG FOR INPAT SURGERY-OUT
1029	1031	ISDEDDI	INPAT SURGERY:AMNT DEDUCT-IN
1019	1020	ISDEDII	INPAT SURGERY INTRN LIMIT:DEDUCT-IN
1072	1073	ISDEDIO	INPAT SURGERY INTRN LIMIT:DEDUCT-OUT
1082	1084	ISDEDNO	INPAT SURGERY:AMNT DEDUCT-OUT
1011	1012	ISDEDOI	INPAT SURGERY ALL LIMIT:DEDUCT-IN
1064	1065	ISDEDOO	INPAT SURGERY ALL LIMIT:DEDUCT-OUT
1025	1026	ISMAXII	INPAT SURGERY INTRN LIMIT:\$ MAX-IN
1078	1079	ISMAXIO	INPAT SURGERY INTRN LIMIT:\$ MAX-OUT
1017	1018	ISMAXOI	INPAT SURGERY ALL LIMIT:PLAN MAX-IN
1070	1071	ISMAXOO	INPAT SURGERY ALL LIMIT:PLAN MAX-OUT
1046	1050	ISMXYDI	INPAT SRGRY \$ MAX:AMT \$MAX/CONFIN/YR-IN
1099	1103	ISMXYDO	INPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR-OUT
1038	1039	ISMXYI	INPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR-IN
1091	1092	ISMXYO	INPAT SURGERY TYPE \$ MAX:/CONFIN/YR-OUT
1056	1058	ISMXFE1I	INPAT SRGRY TYPE \$MAX:AMT \$MAX:APPEND-IN
1106	1107	ISMXFE1O	INPAT SRGY TYP \$ MAX:AMT \$MAX:APPEND-OUT
1059	1061	ISMXFE2I	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-IN
1108	1109	ISMXFE2O	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-OUT
1042	1043	ISMXFEI	INPAT SURGERY TYPE \$ MAX:FEE SCHD-IN
1095	1096	ISMXFEO	INPAT SURGERY TYPE \$ MAX:FEE SCHD-OUT
1044	1045	ISMXNSI	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-IN
1097	1098	ISMXNSO	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-OUT
1051	1055	ISMXSRDI	INPAT SRGRY TYPE \$ MAX:AMT \$MAX/SURG-IN
1104	1105	ISMXSRDO	INPAT SRGY TYPE \$ MAX:AMT \$MAX:SRGY-OUT
1040	1041	ISMXSRI	INPAT SURGERY TYPE \$ MAX:PER SURGERY-IN
1093	1094	ISMXSRO	INPAT SURGERY TYPE \$ MAX:PER SURGERY-OUT
1015	1016	ISOPOI	INPAT SURGERY ALL LIMIT:OOP LIMIT-IN
1068	1069	ISOPOO	INPAT SURGERY ALL LIMIT:OOP LIMIT-OUT
1027	1028	ISOTHII	INPAT SURGERY INTRN LIMIT:OTHR-IN
1080	1081	ISOTHIO	INPAT SURGERY INTRN LIMIT:OTHR-OUT
273	274	LEVELS	LEVELS OF BNFTS FOR PLAN
493	499	MAXCYDI	AMNT /CONFIN/YEAR MAX-IN
518	524	MAXCYDO	AMNT /CONFIN/YEAR MAX-OUT
479	480	MAXCYI	CONFIN/YEAR MAX-IN
504	505	MAXCYO	/CONFIN/YEAR MAX-OUT

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START	END	NAME	DESCRIPTION
485	492	MAXLIFDI	AMNT LIFETIME MAX-IN
510	517	MAXLIFDO	AMNT LIFETIME MAX-OUT
477	478	MAXLIFI	LIFETIME MAX-IN
502	503	MAXLIFO	LIFETIME MAX-OUT
475	476	MAXNONEI	NO PLAN MAX-IN
500	501	MAXNONEO	NO PLAN MAX-OUT
483	484	MAXNSI	PLAN MAX NOT SPECIFIED-IN
508	509	MAXNSO	PLAN MAX NOT SPECIFIED-OUT
481	482	MAXOTHI	OTHR PLAN MAX-IN
506	507	MAXOTHO	OTHR PLAN MAX-OUT
287	288	MEDCOORD	COORDINATION OF PLAN BNFTS W/MEDICARE
259	260	MEDICAL	MEDICAL CVRG PROVIDED
261	262	MEDIGAP	MEDIGAP CVRG PROVIDED
805	806	MIALLO	MNTL HLTH INPAT ALL LIMIT:ALL
845	846	MICOIN	MNTL HLTH INPAT TYPE COINS
817	818	MICOINI	MNTL HLTH INPAT INTRN LIMIT:COINS
809	810	MICOINO	MNTL HLTH INPAT ALL LIMIT:COINS/COPAY
847	849	MICOINP	MNTL HLTH INPAT % COINS
537	538	MICOVI	BNFT CVRG FOR MNTL HLTH INPAT-IN
559	560	MICOVO	BNFT CVRG FOR MNTL HLTH INPAT-OUT
837	839	MIDECYD	MH INPAT TYPE DED:AMNT DEDUCT/CONFIN/YR
827	828	MIDEDCY	MNTL HLTH INPAT TYPE DEDUCT:/CONFIN/YR
829	830	MIDEDDF	MNTL HLTH INPAT TYPE DEDUCT:/DAY FIX
831	832	MIDEDDV	MNTL HLTH INPAT TYPE DEDUCT:/DAY VARY
833	834	MIDEDDY	MH INPAT TYPE DEDUCT:# DAYS/CONFIN/YR
840	842	MIDEDFD	MH INPAT TYPE DED:AMNT DED/DAY FIX VARY
815	816	MIDEDI	MNTL HLTH INPAT INTRN LIMIT:DEDUCT
835	836	MIDEDNS	MNTL HLTH INPAT TYPE DEDUCT:NOT SPECIFD
807	808	MIDEDO	MNTL HLTH INPAT ALL LIMIT:DEDUCT
843	844	MIDEDYN	MH INPAT TYPE DEDUCT:# DAYS /CONFIN/YR
854	856	MIMAXCYN	MH INPAT DAY MAX:MAX # DAYS /CONFIN/YR
823	824	MIMAXDI	MNTL HLTH INPAT INTRN LIMIT:\$ MAX
821	822	MIMAXNI	MNTL HLTH INPAT INTRN LIMIT:DAY MAX
813	814	MIMAXO	MNTL HLTH INPAT ALL LIMIT:PLAN MAX
857	858	MIMXCY	MNTL HLTH INPAT TYPE \$ MAX:/CONFIN/YR
863	868	MIMXCYD	MH INPAT TYPE \$ MAX:AMNT \$ MAX/CONFIN/YR
859	860	MIMXDY	MNTL HLTH INPAT TYPE \$ MAX:/DAY
869	872	MIMXDYD	MH INPAT TYPE \$ MAX: AMNT \$ MAX /DAY
861	862	MIMXNS	MNTL HLTH INPAT TYPE \$ MAX:NOT SPECIFID
850	853	MIOOPD	MNTL HLTH INPAT AMNT OOP LIMIT
819	820	MIOOPI	MNTL HLTH INPAT INTRN LIMIT:OOP LIMIT
811	812	MIOOPO	MNTL HLTH INPAT ALL LIMIT:OOP LIMIT
825	826	MIOTHI	MNTL HLTH INPAT INTRN LIMIT:OTHR
285	286	MMBASIC	BASIC W/SUPPLEMENTARY MAJ MED PLAN
1392	1393	MOALLO	MNTL HLTH OUTPAT ALL LIMIT:ALL
1404	1405	MOCOIFI	MNTL HLTH OUTPAT INTRN LIMIT:COINS FIX
1396	1397	MOCOINO	MNTL HLTH OUTPAT ALL LIMIT:COINS/COPAY
1423	1425	MOCOINP	MNTL HLTH OUTPAT:% COINS FIX VARY
1406	1407	MOCOIVI	MNTL HLTH OUTPAT INTRN LIMIT:COINS VARY
1426	1428	MOCOPD	MNTL HLTH OUTPT:AMT COPAY/VST FIX VARY
1408	1409	MOCOPFI	MNTL HLTH OUTPAT INTRN LMT:COPAY/VST FIX
1410	1411	MOCOPVI	MNTL HLTH OUTPT INTRN LMT:COPAY/VST VARY
539	540	MOCOVI	BNFT CVRG FOR MNTL HLTH OUTPAT-IN
561	562	MOCOVO	BNFT CVRG FOR MNTL HLTH OUTPAT-OUT
1420	1422	MODEDD	MNTL HLTH OUTPAT:AMNT DEDUCT/YR
1402	1403	MODEDI	MNTL HLTH OUTPAT INTRN LIMIT:DEDUCT/YR
1394	1395	MODEDO	MNTL HLTH OUTPAT ALL LIMIT:DEDUCT
1400	1401	MOMAXO	MNTL HLTH OUTPAT ALL LIMIT:PLAN MAX
1432	1434	MOMXDVD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX /VST

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START	END	NAME	DESCRIPTION
1414	1415	MOMXDVI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/VIST
1412	1413	MOMXNVI	MNTL HLTH OUTPT INTRN LIMIT:MAX # VISITS
1429	1431	MOMXNVN	MNTL HLTH OUTPAT:# MAX # VISITS
1435	1439	MOMXYRD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX/YR
1416	1417	MOMXYRI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/YR
1398	1399	MOOPO	MNTL HLTH OUTPAT ALL LIMIT:OOP LIMIT
1418	1419	MOOTHI	MNTL HLTH OUTPAT INTRN LIMIT:OTHR
1164	1165	OFALLOI	DR OFC VSTS ALL LIMIT:ALL-IN
1213	1214	OFALLOO	DR OFC VSTS ALL LIMIT:ALL-OUT
1176	1177	OFCOIFII	DR OFC VSTS INTRN LIMIT:COINS FIX-IN
1225	1226	OFCOIFIO	DR OFC VSTS INTRN LIMIT:COINS FIX-OUT
1168	1169	OFCOINOI	DR OFC VSTS ALL LIMIT:COINS/COPAY-IN
1217	1218	OFCOINOO	DR OFC VSTS ALL LIMIT:COINS/COPAY-OUT
1197	1199	OFCOINPI	DR OFC VSTS:% COINS FIX VARY-IN
1246	1248	OFCOINPO	DR OFC VSTS:% COINS FIX VARY-OUT
1178	1179	OFCOIVII	DR OFC VSTS INTRN LIMIT:COINS VARY-IN
1227	1228	OFCOIVIO	DR OFC VSTS INTRN LIMIT:COINS VARY-OUT
1200	1201	OFCOPDI	DR OFC VSTS:AMNT COPAY /VST FIX VARY-IN
1249	1250	OFCOPDO	DR OFC VSTS:AMNT COPAY /VST FIX VARY-OUT
1180	1181	OFCOPFII	DR OFC VSTS INTRN LIMIT:COPAY/VST FIX-IN
1229	1230	OFCOPFIO	DR OFC VSTS INTRN LIMIT:COPAY/VST FIX-OUT
1182	1183	OFCOPVII	DR OFC VSTS INTRN LIMIT:COPAY/VST VARY-IN
1231	1232	OFCOPVIO	DR OFC VSTS INTRN LMT:COPAY/VST VARY-OUT
531	532	OFCOVI	BNFT CVRG FOR DR OFC VSTS-IN
553	554	OFCOVO	BNFT CVRG FOR DR OFC VSTS-OUT
1194	1196	OFDEDDI	DR OFC VSTS:AMNT DEDUCT/YR-IN
1243	1245	OFDEDDO	DR OFC VSTS:AMNT DEDUCT/YR-OUT
1174	1175	OFDEDII	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-IN
1223	1224	OFDEDIO	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-OUT
1166	1167	OFDEDOI	DR OFC VSTS ALL LIMIT:DEDUCT-IN
1215	1216	OFDEDOO	DR OFC VSTS ALL LIMIT:DEDUCT-OUT
1184	1185	OFDIFFII	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-IN
1233	1234	OFDIFFIO	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-OUT
1172	1173	OFMAXOI	DR OFC VSTS ALL LIMIT:PLAN MAX-IN
1221	1222	OFMAXOO	DR OFC VSTS ALL LIMIT:PLAN MAX-OUT
1205	1207	OFMXDVDI	DR OFC VSTS:\$ AMNT \$ MAX /VST-IN
1253	1254	OFMXDVDO	DR OFC VSTS:\$ AMNT \$ MAX /VST-OUT
1188	1189	OFMXDVII	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-IN
1237	1238	OFMXDVIO	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-OUT
1186	1187	OFMXNVII	DR OFC VSTS INTRN LIMIT:MAX # VISITS-IN
1235	1236	OFMXNVIO	DR OFC VSTS INTRN LIMIT:MAX # VISITS-OUT
1202	1204	OFMXNVNI	DR OFC VSTS:# MAX # VISITS-IN
1251	1252	OFMXNVNO	DR OFC VSTS:# MAX # VISITS-OUT
1208	1212	OFMXYRDI	DR OFC VSTS:\$ AMNT \$ MAX/YR-IN
1255	1257	OFMXYRDO	DR OFC VSTS:\$ AMNT \$ MAX/YR-OUT
1190	1191	OFMXYRII	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-IN
1239	1240	OFMXYRIO	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-OUT
1170	1171	OFOPOI	DR OFC VSTS ALL LIMIT:OOP LIMIT-IN
1219	1220	OFOPOO	DR OFC VSTS ALL LIMIT:OOP LIMIT-OUT
1192	1193	OFOTHII	DR OFC VSTS INTRN LIMIT:OTHR-IN
1241	1242	OFOTHIO	DR OFC VSTS INTRN LIMIT:OTHR-OUT
1126	1127	OISMAXI	OUTPAT SURGERY INTRN LIMIT:\$ MAX
430	431	OOPADI	ALC/DRUGS DOES NOT APPLY OOP LIMIT-IN
465	466	OOPADO	ALC/DRUGS DOES NOT APPLY OOP LIMIT-OUT
426	427	OOPAPPI	ALL BNFTS APPLY TO THE OOP LIMIT-IN
461	462	OOPAPPO	ALL BNFTS APPLY TO THE OOP LIMIT-OUT
102	103	OOPDEDFL	FLAG: DEDUCTIBLE INCLUDED IN OOP LIMIT?
424	425	OOPDEDI	DEDUCT INCLUDED IN THE OOP LIMIT-IN
459	460	OOPDEDO	DEDUCT INCLUDED IN THE OOP LIMIT-OUT

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START	END	NAME	DESCRIPTION
434	435	OOPDENTI	DENTAL DOES NOT APPLY OOP LIMIT-IN
469	470	OOPDENTO	DENTAL DOES NOT APPLY OOP LIMIT-OUT
432	433	OOPDRUGI	DRUGS DOES NOT APPLY OOP LIMIT-IN
467	468	OOPDRUGO	DRUGS DOES NOT APPLY OOP LIMIT-OUT
408	409	OOPEARNI	OOP LIMIT BASED ON EARNINGS-IN
442	443	OOPEARNO	OOP LIMIT BASED ON EARNINGS-OUT
419	423	OOPFDI	AMNT FAMILY OOP LIMIT-IN
453	458	OOPFDO	AMNT FAMILY OOP LIMIT-OUT
417	418	OOPFI	TYPE FAMILY OOP LIMIT-IN
451	452	OOPFO	TYPE FAMILY OOP LIMIT-OUT
406	407	OOPFI	OOP LIMIT-IN
412	416	OOPIDI	AMNT INDIV OOP LIMIT-IN
446	450	OOPIDO	AMNT INDIV OOP LIMIT-OUT
410	411	OOPII	TYPE INDIV OOP LIMIT-IN
444	445	OOPIO	TYPE INDIV OOP LIMIT-OUT
428	429	OOPMHI	MNTL HLTH DOES NOT APPLY OOP LIMIT-IN
463	464	OOPMHO	MNTL HLTH DOES NOT APPLY OOP LIMIT-OUT
440	441	OOPPO	OOP LIMIT-OUT
438	439	OOPOTHI	OTHR BNFTS DO NOT APPLY TO OOP LIMIT-IN
473	474	OOPOTHO	OTHR BNFTS DO NOT APPLY OOP LIMIT-OUT
436	437	OOPVISI	VISION DOES NOT APPLY OOP LIMIT-IN
471	472	OOPVISO	VISION DOES NOT APPLY OOP LIMIT-OUT
1110	1111	OSALLO	OUTPAT SURGERY ALL LIMIT:ALL
1122	1123	OSCOINI	OUTPAT SURGERY INTRN LIMIT:COINSURANCE
1114	1115	OSCOINO	OUTPAT SURGERY ALL LIMIT:COINS/COPAY
1134	1136	OSCOINP	OUTPAT SURGERY:% COINS
1137	1139	OSCOPI	OUTPAT SURGERY:AMNT COPAY
1124	1125	OSCOPI	OUTPAT SURGERY INTRN LIMIT:COPAY
529	530	OSCOVI	BNFT CVRG FOR OUTPAT SURGERY-IN
551	552	OSCOVO	BNFT CVRG FOR OUTPAT SURGERY-OUT
1130	1133	OSDEDD	OUTPAT SURGERY:AMNT DEDUCT
1120	1121	OSDEDI	OUTPAT SURGERY INTRN LIMIT:DEDUCT
1112	1113	OSDEDO	OUTPAT SURGERY ALL LIMIT:DEDUCT
1118	1119	OSMAXO	OUTPAT SURGERY ALL LIMIT:PLAN MAX
1158	1160	OSMX1FE	OUTPAT SRGY \$ MAX:AMT \$MAX:TONSIL/ADENOI
1161	1163	OSMX2FE	OUTP SRG TYP \$ MAX:AMT \$MAX:DIAG D AND C
1140	1141	OSMXCY	OUTPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR
1148	1152	OSMXCYD	OUTPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR
1144	1145	OSMXFE	OUTPAT SURGERY TYPE \$ MAX:FEE SCHD
1146	1147	OSMXNS	OUTPAT SURGERY TYPE \$ MAX:NOT SPECIFIED
1142	1143	OSMXSR	OUTPAT SURGERY TYPE \$ MAX:PER SURGERY
1153	1157	OSMXSRD	OUTPAT SRGY TYPE \$ MAX:AMT \$MAX/SURGERY
1116	1117	OSOPO	OUTPAT SURGERY ALL LIMIT:OOP LIMIT
1128	1129	OSOTHI	OUTPAT SURGERY INTRN LIMIT:OTHR
621	622	OTHAIMI	ADULT IMMUNIZATIONS-IN
653	654	OTHAIMO	ADULT IMMUNIZATIONS-OUT
627	628	OTHCHIRI	CHIROPRACTIC CARE-IN
659	660	OTHCHIRO	CHIROPRACTIC CARE-OUT
623	624	OTHCIMI	CHILD IMMUNIZATIONS-IN
655	656	OTHCIMO	CHILD IMMUNIZATIONS-OUT
631	632	OTHCONVI	REHABILITATION FACILITY-IN
663	664	OTHCONVO	CONVALESCENT-OUT
635	636	OTHHOSPI	HOSPICE CARE-IN
667	668	OTHHOSPO	HOSPICE CARE-OUT
609	610	OTHIPCVI	INPAT DR'S CHARGES CVRG-IN
641	642	OTHIPCVO	INPAT DR'S CHARGES CVRG-OUT
607	608	OTHIPI	INPAT DR-IN
639	640	OTHIPO	INPAT DR-OUT
613	614	OTHMAMI	ROUTINE MAMMOGRAMS-IN

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START	END	NAME	DESCRIPTION
645	646	OTHMAMO	ROUTINE MAMMOGRAMS-OUT
605	606	OTHNONEI	NO OTHR BNFT INCLUDED IN PLAN DESC-IN
637	638	OTHNONEO	NO OTHR BNFT INCLUDED IN PLAN DESC-OUT
629	630	OTHNONPI	OTHR NON-DR PROVIDERS-IN
661	662	OTHNONPO	OTHR NON-DR PROVIDERS-OUT
617	618	OTHPAPI	ROUTINE PAP SMEARS-IN
649	650	OTHPAPO	ROUTINE PAP SMEARS-OUT
615	616	OTHPEI	ADULT ROUTINE PHYSICAL EXAMS-IN
647	648	OTHPEO	ADULT ROUTINE PHYSICAL EXAMS-OUT
619	620	OTHPRENI	OFC VSTS FOR PRENATAL CARE-IN
651	652	OTHPRENO	OFC VSTS FOR PRENATAL CARE-OUT
633	634	OTHSNFI	EXTENDED CARE/SNF-IN
665	666	OTHSNFO	EXTENDED CARE/SNF-OUT
625	626	OTHWCCI	WELL-CHILD CARE, 2-4 YEARS-IN
657	658	OTHWCCO	WELL-CHILD CARE, 2-4 YEARS-OUT
611	612	OTHXRAYI	DIAGNOSTIC X-RAYS AND LAB-IN
643	644	OTHXRAYO	DIAGNOSTIC X-RAYS AND LAB-OUT
63	67	OVDEDF	OVERALL FAMILY DEDUCTIBLE
59	62	OVDEDI	OVERALL INDIVIDUAL DEDUCTIBLE
349	350	OVERLIMI	OVERALL LIMIT-IN
351	352	OVERLIMO	OVERALL LIMIT-OUT
57	58	OVLIMIT	OVERALL LIMIT INDICATOR
80	87	OVMAXIL	OVERALL LIFETIME MAXIMUM
73	79	OVMAXIY	OVERALL ANNUAL MAXIMUM
95	101	OVMOOPF	OVERALL FAMILY OOP MAXIMUM
88	94	OVMOOPI	OVERALL INDIVIDUAL OOP MAXIMUM
71	72	OVPAYT	OVERALL PAYMENT TYPE
68	70	OVRATE	OVERALL COINSURANCE RATE
50	50	PHOLDER	POLICYHOLDER
6	8	PID	PERSON ID
269	270	PLANTYPE	TYPE PLAN FROM BKLT
271	272	PROVTYPE	TYPE PLAN AS DETERMINED BY PLAN CHAR
55	55	RACETHNX	RACE/ETHNICITY (EDITED / IMPUTED)
53	54	RACEX	RACE (EDITED / IMPUTED)
279	280	REFOBGYN	REQUIRE PRIM-CARE DR-REFER OB-GYN
289	290	RESTRICT	RESTRICT CVRG OF PRE-EXISTING COND
56	56	SEX	SEX
267	268	VISION	VISION CVRG PROVIDED
1793	1794	VSCOV	VISION BNFT APPLIED
1797	1798	VSDED	VISION DEDUCT
1799	1801	VSDEDD	AMNT VISION DEDUCT
1795	1796	VSDetail	DETAILS PROVIDED FOR VISION CVRG
1810	1812	VSEX1CIP	EYE EXAMS:% COINS (PROV 1)
1813	1814	VSEX1CPD	EYE EXAMS:AMNT COPAY (PROV 1)
1808	1809	VSEX1CV	BNFT CVRG FOR EYE EXAMS (PROV 1)
1815	1817	VSEX1MXD	EYE EXAMS:AMNT \$ MAX (PROV 1)
1820	1822	VSEX2CIP	EYE EXAMS:% COINS (PROV 2)
1823	1824	VSEX2CPD	EYE EXAMS:AMNT COPAY (PROV 2)
1818	1819	VSEX2CV	BNFT CVRG FOR EYE EXAMS (PROV 2)
1825	1826	VSEX2MXD	EYE EXAMS:AMNT \$ MAX (PROV 2)
1829	1830	VSEX3CIP	EYE EXAMS:% COINS (PROV 3)
1831	1832	VSEX3CPD	EYE EXAMS:AMNT COPAY (PROV 3)
1827	1828	VSEX3CV	BNFT CVRG FOR EYE EXAMS (PROV 3)
1833	1834	VSEX3MXD	EYE EXAMS:AMNT \$ MAX (PROV 3)
1837	1839	VSGL1CIP	EYE GLASSES:% COINS (PROV 1)
1840	1842	VSGL1CPD	EYE GLASSES:AMNT COPAY (PROV 1)
1835	1836	VSGL1CV	BNFT CVRG FOR EYE GLASSES (PROV 1)
1843	1845	VSGL1MXD	EYE GLASSES:AMNT \$ MAX (PROV 1)
1848	1849	VSGL2CIP	EYE GLASSES:% COINS (PROV 2)

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START	END	NAME	DESCRIPTION
1850	1851	VSGL2CPD	EYE GLASSES:AMNT COPAY (PROV 2)
1846	1847	VSGL2CV	BNFT CVRG FOR EYE GLASSES (PROV 2)
1852	1854	VSGL2MXD	EYE GLASSES:AMNT \$ MAX (PROV 2)
1857	1858	VSGL3CIP	EYE GLASSES:% COINS (PROV 3)
1859	1860	VSGL3CPD	EYE GLASSES:AMNT COPAY (PROV 3)
1855	1856	VSGL3CV	BNFT CVRG FOR EYE GLASSES PROV 3)
1861	1862	VSGL3MXD	EYE GLASSES:AMNT \$ MAX (PROV 3)
1802	1803	VSMAX	VISION MAX
1804	1807	VSMAXD	AMNT VISION MAX
1791	1792	VSPROV	TYPE VISION PROVIDER
1258	1259	WBALLOI	WELL BABY ALL LIMIT:ALL-IN
1301	1302	WBALLOO	WELL BABY ALL LIMIT:ALL-OUT
1270	1271	WBCOIFII	WELL BABY INTRN LIMIT:COINS FIX-IN
1313	1314	WBCOIFIO	WELL BABY INTRN LIMIT:COINS FIX-OUT
1262	1263	WBCOINOI	WELL BABY ALL LIMIT:COINS/COPAY-IN
1305	1306	WBCOINOO	WELL BABY ALL LIMIT:COINS/COPAY-OUT
1288	1290	WBCOINPI	WELL BABY:% COINS FIX VARY-IN
1332	1334	WBCOINPO	WELL BABY:% COINS FIX VARY-OUT
1272	1273	WBCOIVII	WELL BABY INTRN LIMIT:COINS VARY-IN
1315	1316	WBCOIVIO	WELL BABY INTRN LIMIT:COINS VARY-OUT
1291	1292	WBCOPDI	WELL BABY:AMNT COPAY /VST FIX VARY-IN
1335	1336	WBCOPDO	WELL BABY:AMNT COPAY /VST FIX VARY-OUT
1274	1275	WBCOPFII	WELL BABY INTRN LIMIT:COPAY /VST FIX-IN
1317	1318	WBCOPFIO	WELL BABY INTRN LIMIT:COPAY /VST FIX-OUT
1276	1277	WBCOPVII	WELL BABY INTRN LIMIT:COPAY /VST VARY-IN
1319	1320	WBCOPVIO	WELL BABY INTRN LIMIT:COPAY/VST VARY-OUT
533	534	WBCOVI	BNFT CVRG FOR WELL BABY-IN
555	556	WBCOVO	BNFT CVRG FOR WELL BABY-OUT
1286	1287	WBDEDDI	WELL BABY:AMNT DEDUCT/YR-IN
1329	1331	WBDEDDO	WELL BABY:AMNT DEDUCT/YR-OUT
1268	1269	WBDEDII	WELL BABY INTRN LIMIT:DEDUCT/YR-IN
1311	1312	WBDEDIO	WELL BABY INTRN LIMIT:DEDUCT/YR-OUT
1260	1261	WBDEDOI	WELL BABY ALL LIMIT:DEDUCT-IN
1303	1304	WBDEDOO	WELL BABY ALL LIMIT:DEDUCT-OUT
1266	1267	WBMAXOI	WELL BABY ALL LIMIT:PLAN MAXIM UM-IN
1309	1310	WBMAXOO	WELL BABY ALL LIMIT:PLAN MAX-OUT
1295	1297	WBMXDVDI	WELL BABY:\$ AMNT \$ MAX /VST-IN
1339	1340	WBMXDVDO	WELL BABY:\$ AMNT \$ MAX /VST-OUT
1280	1281	WBMXDVII	WELL BABY INTRN LIMIT:\$ MAX /VST-IN
1323	1324	WBMXDVIO	WELL BABY INTRN LIMIT:\$ MAX /VST-OUT
1278	1279	WBMXNVII	WELL BABY INTRN LIMIT:MAX # VISITS-IN
1321	1322	WBMXNVIO	WELL BABY INTRN LIMIT:MAX # VISITS-OUT
1293	1294	WBMXNVNI	WELL BABY:# MAX # VISITS-IN
1337	1338	WBMXNVNO	WELL BABY:# MAX # VISITS-OUT
1298	1300	WBMXYRDI	WELL BABY:\$ AMNT \$ MAX/YR-IN
1341	1343	WBMXYRDO	WELL BABY:\$ AMNT \$ MAX/YR-OUT
1282	1283	WBMXYRII	WELL BABY INTRN LIMIT:\$ MAX/YR-IN
1325	1326	WBMXYRIO	WELL BABY INTRN LIMIT:\$ MAX/YR-OUT
1264	1265	WBOOPOI	WELL BABY ALL LIMIT:OOP LIMIT-IN
1307	1308	WBOOPOO	WELL BABY ALL LIMIT:OOP LIMIT-OUT
1284	1285	WBOHIII	WELL BABY INTRN LIMIT:OTHR-IN
1327	1328	WBOHIII	WELL BABY INTRN LIMIT:OTHR-OUT

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START	END	NAME	DESCRIPTION
1	5	DUID	DWELLING UNIT ID
6	8	PID	PERSON ID
9	16	DUPERSID	PERSON ID (DUID+PID)
17	27	ESTBIDX	ESTABLISHMENT ID
28	49	EPRSIDX	ESTABLISHMENT ID + POLICYHOLDER ID
50	50	PHOLDER	POLICYHOLDER
51	51	DEPDNT	DEPENDENT OF POLICYHOLDER
52	52	AGE1X	AGE-RDI (EDITED / IMPUTED)
53	54	RACEX	RACE (EDITED / IMPUTED)
55	55	RACETHNX	RACE/ETHNICITY (EDITED / IMPUTED)
56	56	SEX	SEX
57	58	OVLIMIT	OVERALL LIMIT INDICATOR
59	62	OVDEDI	OVERALL INDIVIDUAL DEDUCTIBLE
63	67	OVDEDF	OVERALL FAMILY DEDUCTIBLE
68	70	OVRATE	OVERALL COINSURANCE RATE
71	72	OVPAYT	OVERALL PAYMENT TYPE
73	79	OVMAXIY	OVERALL ANNUAL MAXIMUM
80	87	OVMAXIL	OVERALL LIFETIME MAXIMUM
88	94	OVMOOPI	OVERALL INDIVIDUAL OOP MAXIMUM
95	101	OVMOOPF	OVERALL FAMILY OOP MAXIMUM
102	103	OOPDEDFL	FLAG: DEDUCTIBLE INCLUDED IN OOP LIMIT?
104	105	HOSPCOV	HOSPITAL R / B COVERAGE INDICATOR
106	110	HOSPDEDI	HOSPITAL R / B INDIVIDUAL DEDUCTIBLE
111	112	FDEDIO_H	FLAG: HOSP. DED. INTERNAL / OVERALL
113	115	HOSPRATE	HOSPITAL R / B COINSURANCE RATE
116	117	HOSPPAYT	HOSPITAL R / B PAYMENT TYPE
118	124	HOSPMAXY	HOSPITAL R / B ANNUAL MAXIMUM
125	126	FMAXIO_H	FLAG: HOSP. ANN. MAX INTERNAL / OVERALL
127	134	HOSPMAXL	HOSPITAL R / B LIFETIME MAXIMUM
135	138	HOSPMOOP	HOSPITAL R / B INTERNAL OOP MAXIMUM
139	140	FOOP_H	FLAG: HOSP OOP INTERNAL / OVERALL
141	147	HSPMAXNT	HOSPITAL R / B MAX NIGHTS / YEAR
148	149	DRVCOV	PHYSICIAN OFF. VIS. COVERAGE INDICATOR
150	153	DRVDEDI	PHYSICIAN OFF. VIS. IND. DEDUCTIBLE
154	155	FDEDIO_P	FLAG: PHYS. DED. INTERNAL / OVERALL
156	158	DRVRATE	PHYSICIAN OFF. VIS. COINSURANCE RATE
159	160	DRVPAYT	PHYSICIAN OFF. VIS. PAYMENT TYPE
161	167	DRVMAXIY	PHYSICIAN OFF. VIS. ANNUAL MAXIMUM
168	169	FMAXIO_P	FLAG: PHYS. ANN. MAX INTERNAL / OVERALL
170	177	DRVMAXIL	PHYSICIAN OFF. VIS. LIFETIME MAXIMUM
178	184	DRVMAXVS	PHYSICIAN OFF. VIS. MAX VISITS / YEAR
185	186	DRGCOV	DRUG COVERAGE INDICATOR
187	190	DRGDEDI	DRUG INDIVIDUAL DEDUCTIBLE
191	192	FDEDIO_D	FLAG: DRUG. DED. INTERNAL / OVERALL
193	195	DRGRATE	DRUG COINSURANCE RATE
196	197	DRGPAYT	DRUG PAYMENT TYPE
198	204	DRGMAXIY	DRUG ANNUAL MAXIMUM
205	206	FMAXIO_D	FLAG: DRUG. ANN. MAX INTERNAL / OVERALL
207	214	DRGMAXIL	DRUG LIFETIME MAXIMUM
215	216	DRGINOOP	FLAG: DRUGS INCLUDED IN OOP LIMIT?
217	217	COVCOUNT	NUMBER OF POLICIES COVERING PERSON
218	219	IOVDEDI	IMPUTATION FLAG FOR ODEDI
220	221	IOVDEDF	IMPUTATION FLAG FOR OVDEDF
222	223	IOVRATE	IMPUTATION FLAG FOR OVRATE
224	225	IOVMAXIY	IMPUTATION FLAG FOR OVMAXIY
226	227	IOVMAXIL	IMPUTATION FLAG FOR OVMAXIL
228	229	IOVMOOPI	IMPUTATION FLAG FOR OVMOOPI
230	231	IOVMOOPF	IMPUTATION FLAG FOR OVMOOPF
232	233	IHSPRATE	IMPUTATION FLAG FOR HOSPRATE

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START	END	NAME	DESCRIPTION
234	235	IHSPDEDI	IMPUTATION FLAG FOR HOSPDEDI
236	237	IHSPMOOP	IMPUTATION FLAG FOR HOSPMOOP
238	239	IHSPMAXY	IMPUTATION FLAG FOR HOSPMAXL
240	241	IHSPMAXL	IMPUTATION FLAG FOR HOSPMAXY
242	243	IDRVDEDI	IMPUTATION FLAG FOR DRVDEDI
244	245	IDRVRATE	IMPUTATION FLAG FOR DRVRATE
246	247	IDRVMAXY	IMPUTATION FLAG FOR DRVMAXIY
248	249	IDRVMAXL	IMPUTATION FLAG FOR DRVMAXIL
250	251	IDRGRATE	IMPUTATION FLAG FOR DRGRATE
252	253	IDRGDEDI	IMPUTATION FLAG FOR DRGDEDI
254	255	IDRGMAXY	IMPUTATION FLAG FOR DRGMAXIY
256	257	IDRGMAXL	IMPUTATION FLAG FOR DRGMAXIL
258	258	ICIMP	FLAG: RECORD IMPUTED USING IC DATA
259	260	MEDICAL	MEDICAL CVRG PROVIDED
261	262	MEDIGAP	MEDIGAP CVRG PROVIDED
263	264	DRUGS	PRESCRIPTION DRUG CVRG PROVIDED
265	266	DENTAL	DENTAL CVRG PROVIDED
267	268	VISION	VISION CVRG PROVIDED
269	270	PLANTYPE	TYPE PLAN FROM BKLT
271	272	PROVTYPE	TYPE PLAN AS DETERMINED BY PLAN CHAR
273	274	LEVELS	LEVELS OF BNFTS FOR PLAN
275	276	GATEKEEP	REQUIRE PRIM-CARE DR-REFER SPECIALIST
277	278	GATELEV	LEVEL(S):REQ PRIM-CARE DR-REFER SPCLST
279	280	REFOBGYN	REQUIRE PRIM-CARE DR-REFER OB-GYN
281	282	HMO MODEL	HMO MODEL TYPE
283	284	HMOFEDQ	HMO FEDERALLY QUALIFIED
285	286	MMBASIC	BASIC W/SUPPLEMENTARY MAJ MED PLAN
287	288	MEDCOORD	COORDINATION OF PLAN BNFTS W/MEDICARE
289	290	RESTRICT	RESTRICT CVRG OF PRE-EXISTING COND
291	292	CCNONE	COST CONTAIN: NONE
293	294	CCPC	COST CONTAIN: PREADM CERTIFICATION
295	296	CCPRETST	COST CONTAIN: PREADMISSION TESTING
297	298	CCUTIL	COST CONTAIN: UTILIZATION CONCUR REVU
299	300	CCWKEND	COST CONTAIN:NON-EMRG WEEKEND ADM
301	302	CCAUDIT	COST CONTAIN:PENLTY 4 ER OUT OF NET
303	304	CCSS	COST CONTAIN: 2ND SURGICAL OPINION
305	306	CCOUTSUR	COST CONTAIN: OUTPAT SURGRY INCENTV
307	308	CCOTH	COST CONTAIN: OTHR
309	310	CCPCNOPN	PREADM CERT: NO PENALTY
311	312	CCPCNOCV	PREADM CERT: NO CVRG PROVIDED
313	314	CCPCDED	PREADM CERT:DEDUCT IMPOSE/INCREASE
315	316	CCPCCOIN	PREADM CERT: COINS REDUCED
317	318	CCPCCOP	PREADM CERT: COPAY INCREASED
319	320	CCPCOTH	PREADM CERT: OTHR
321	322	CCPCNS	PREADM CERT: NOT SPECIFIED
323	324	CCSSNOPN	PNLTY NO 2ND SURG OPIN: NO PENALTY
325	326	CCSSNOCV	PNLTY NO 2ND SURG OPIN:NO CVRG PROVD
327	328	CCSSDED	PNLTY NO 2ND SURG OPIN: DEDUCT
329	330	CCSSCOIN	PNLTY NO 2ND SURG OPIN: COINS REDUCED
331	332	CCSSCOP	PNLTY NO 2ND SURG OPIN: COPAY INCREASED
333	334	CCSSLOW	PNLTY NO 2ND SRG OPIN:LOWER SCHD PAYMNT
335	336	CCSSOTH	PNLTY NO 2ND SURG OPIN: OTHR
337	338	CCSSNS	PNLTY NO 2ND SURG OPIN: NOT SPECFD
339	340	APPEAL	APPEAL PROCESS PROVIDED FOR 1ST LVL
341	342	APPEAL2L	2ND+ LEVEL(S) OF APPEAL PROVIDED IF
343	344	APINFO	INFO PROVIDED-WHERE TO SEND APPEAL
345	346	APTME	TIME LIMITS SPECIFIED FOR THE APPEAL
347	348	APEXPED	EXPEDITED PROCESS AVAILABLE-APPEAL
349	350	OVERLIMI	OVERALL LIMIT-IN

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START	END	NAME	DESCRIPTION
351	352	OVERLIMO	OVERALL LIMIT-OUT
353	354	DEDI	TYPE DEDUCT-IN
355	358	DEDIDI	INDIV DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN
359	363	DEDFDI	FAM DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN
364	365	DEDNUMDI	# INDV 4 DEDUC:/YR \$ AMT VARY-ERNGS-IN
366	367	DEDIPCTI	INDIV DEDUCT: PERCENT OF EARNINGS-IN
368	369	DEDFPCTI	FAM DEDUCT:PERCENT OF EARNINGS-IN
370	371	DEDNUMPI	# INDIV FOR DEDUCT:% OF EARNINGS-IN
372	373	DEDO	TYPE DEDUCT-OUT
374	378	DEDIDO	INDIV DEDUCT:/YR \$ AMT VARY BY ERNGS-OUT
379	383	DEDFDO	FAMILY DEDUCT:/YR \$ AMT VARY-ERNGS-OUT
384	385	DEDNUMDO	# INDV 4 DEDUCT:/YR \$ AMT VARY-ERNGS-OUT
386	387	DEDIPCTO	INDIV DEDUCT:PERCENT OF EARNINGS-OUT
388	389	DEDFPCTO	FAMILY DEDUCT:PERCENT OF EARNINGS-OUT
390	391	DEDINUMO	# INDIV FOR DEDUCT:% OF EARNINGS-OUT
392	393	COICOPI	TYPE COINS/COPAY-IN
394	396	COICOPPI	% COINS 4 COINS/COPAY:COINS FIX VARY-IN
397	398	COICOPDI	AMT COPAY 4 COINS/COPAY:COPA FIX VARY-IN
399	400	COICOPO	TYPE COINS/COPAY-OUT
401	403	COICOPPO	% COINS 4 COINS/COPAY:COINS FIX VARY-OUT
404	405	COICOPDO	AMT COPA 4 COINS/COPAY:COPA FIX VARY-OUT
406	407	OOPI	OOP LIMIT-IN
408	409	OOPEARNI	OOP LIMIT BASED ON EARNINGS-IN
410	411	OOPII	TYPE INDIV OOP LIMIT-IN
412	416	OOPIDI	AMNT INDIV OOP LIMIT-IN
417	418	OOPFI	TYPE FAMILY OOP LIMIT-IN
419	423	OOPFDI	AMNT FAMILY OOP LIMIT-IN
424	425	OOPDEDI	DEDUCT INCLUDED IN THE OOP LIMIT-IN
426	427	OOPAPPI	ALL BNFTS APPLY TO THE OOP LIMIT-IN
428	429	OOPMHI	MNTL HLTH DOES NOT APPLY OOP LIMIT-IN
430	431	OOPADI	ALC/DRUGS DOES NOT APPLY OOP LIMIT-IN
432	433	OOPDRUGI	DRUGS DOES NOT APPLY OOP LIMIT-IN
434	435	OOPDENTI	DENTAL DOES NOT APPLY OOP LIMIT-IN
436	437	OOPVISI	VISION DOES NOT APPLY OOP LIMIT-IN
438	439	OOPOTHI	OTHR BNFTS DO NOT APPLY TO OOP LIMIT-IN
440	441	OOPO	OOP LIMIT-OUT
442	443	OOPEARNO	OOP LIMIT BASED ON EARNINGS-OUT
444	445	OOPIO	TYPE INDIV OOP LIMIT-OUT
446	450	OOPIDO	AMNT INDIV OOP LIMIT-OUT
451	452	OOPFO	TYPE FAMILY OOP LIMIT-OUT
453	458	OOPFDO	AMNT FAMILY OOP LIMIT-OUT
459	460	OOPDEDO	DEDUCT INCLUDED IN THE OOP LIMIT-OUT
461	462	OOPAPPO	ALL BNFTS APPLY TO THE OOP LIMIT-OUT
463	464	OOPMHO	MNTL HLTH DOES NOT APPLY OOP LIMIT-OUT
465	466	OOPADO	ALC/DRUGS DOES NOT APPLY OOP LIMIT-OUT
467	468	OOPDRUGO	DRUGS DOES NOT APPLY OOP LIMIT-OUT
469	470	OOPDENTO	DENTAL DOES NOT APPLY OOP LIMIT-OUT
471	472	OOPVISO	VISION DOES NOT APPLY OOP LIMIT-OUT
473	474	OOPOTHO	OTHR BNFTS DO NOT APPLY OOP LIMIT-OUT
475	476	MAXNONEI	NO PLAN MAX-IN
477	478	MAXLIFI	LIFETIME MAX-IN
479	480	MAXCYI	CONFIN/YEAR MAX-IN
481	482	MAXOTHI	OTHR PLAN MAX-IN
483	484	MAXNSI	PLAN MAX NOT SPECIFIED-IN
485	492	MAXLIFDI	AMNT LIFETIME MAX-IN
493	499	MAXCYDI	AMNT /CONFIN/YEAR MAX-IN
500	501	MAXNONEO	NO PLAN MAX-OUT
502	503	MAXLIFO	LIFETIME MAX-OUT
504	505	MAXCYO	/CONFIN/YEAR MAX-OUT

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START	END	NAME	DESCRIPTION
506	507	MAXOTHO	OTHR PLAN MAX-OUT
508	509	MAXNSO	PLAN MAX NOT SPECIFIED-OUT
510	517	MAXLIFDO	AMNT LIFETIME MAX-OUT
518	524	MAXCYDO	AMNT /CONFIN/YEAR MAX-OUT
525	526	HSCOV I	BNFT CVRG FOR HOSP R/B-IN
527	528	ISCOV I	BNFT CVRG FOR INPAT SURGERY-IN
529	530	OSCOV I	BNFT CVRG FOR OUTPAT SURGERY-IN
531	532	OFCOV I	BNFT CVRG FOR DR OFC VSTS-IN
533	534	WBCOV I	BNFT CVRG FOR WELL BABY-IN
535	536	HHCOV I	BNFT CVRG FOR HOME HEALTH CARE-IN
537	538	MICOV I	BNFT CVRG FOR MNTL HLTH INPAT-IN
539	540	MOCOV I	BNFT CVRG FOR MNTL HLTH OUTPAT-IN
541	542	ADCOV I	BNFT CVRG FOR ALC/DRUG INPAT DETOX-IN
543	544	ARCOV I	BNFT CVRG FOR ALC/DRUG INPAT REHAB-IN
545	546	AOCOV I	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-IN
547	548	HSCOV O	BNFT CVRG FOR HOSP R/B-OUT
549	550	ISCOV O	BNFT CVRG FOR INPAT SURGERY-OUT
551	552	OSCOV O	BNFT CVRG FOR OUTPAT SURGERY-OUT
553	554	OFCOV O	BNFT CVRG FOR DR OFC VSTS-OUT
555	556	WBCOV O	BNFT CVRG FOR WELL BABY-OUT
557	558	HHCOV O	BNFT CVRG FOR HOME HEALTH CARE-OUT
559	560	MICOV O	BNFT CVRG FOR MNTL HLTH INPAT-OUT
561	562	MOCOV O	BNFT CVRG FOR MNTL HLTH OUTPAT-OUT
563	564	ADCOV O	BNFT CVRG FOR ALC/DRUG INPAT DETOX-OUT
565	566	ARCOV O	BNFT CVRG FOR ALC/DRUG INPAT REHAB-OUT
567	568	AOCOV O	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-OUT
569	570	ADSAME	ALC/DRUG BNFTS SAME AS EACH OTHR
571	572	ADM DMX	\$ LIFE MAX FOR MNTL HLTH,ALCOHOL/DRUGS
573	578	ADM DMXD	AMNT \$ LIFE MAX-MNTL HLTH,ALCOHOL/DRUGS
579	580	ADM DMXAL	ALL MH,ALCOHOL/DRUGS APPLY 2 \$ LIFE MAX
581	582	ADM DMXMI	MNTL HLTH INPAT APPLIES \$ LIFE MAX
583	584	ADM DMXMO	MNTL HLTH OUTPAT APPLIES \$ LIFE MAX
585	586	ADM DMXAD	ALC/DRUG INPAT DETOX APPLIES \$ LIFE MAX
587	588	ADM DMXAR	ALC/DRUG INPAT REHAB APPLIES \$ LIFE MAX
589	590	ADM DMXAO	ALC/DRUG OUTP REHAB APPLIES \$ LIFE MAX
591	592	ADM VMX	DAY/VISIT LIFE MAXS 4 MH,ALCOHOL/DRUGS
593	594	ADM VMXAL	ALL MH,ALCOHOL,DRUG-DAY/VST LIFE MAX
595	596	ADM VMXMI	MH INPAT APPLIES 2 DAY/VISIT LIFE MAX
597	598	ADM VMXMO	MH OUTPAT APPLIES 2 DAY/VST LIFE MAX
599	600	ADM VMXAD	ALC/DRUG INPAT DETOX-DAY/VISIT LIFE MAX
601	602	ADM VMXAR	ALC/DRUG INPAT REHAB-DAY/VISIT LIFE MAX
603	604	ADM VMXAO	ALC/DRUG OUTPAT REHAB-DAY/VISIT LIFE MAX
605	606	OTH NONEI	NO OTHR BNFT INCLUDED IN PLAN DESC-IN
607	608	OTH IPI	INPAT DR-IN
609	610	OTH IPCVI	INPAT DR'S CHARGES CVRG-IN
611	612	OTH XRAYI	DIAGNOSTIC X-RAYS AND LAB-IN
613	614	OTH MAMI	ROUTINE MAMMOGRAMS-IN
615	616	OTH PEI	ADULT ROUTINE PHYSICAL EXAMS-IN
617	618	OTH PAPI	ROUTINE PAP SMEARS-IN
619	620	OTH PRENI	OFC VSTS FOR PRENATAL CARE-IN
621	622	OTH AIMI	ADULT IMMUNIZATIONS-IN
623	624	OTH CIMI	CHILD IMMUNIZATIONS-IN
625	626	OTH WCCI	WELL-CHILD CARE, 2-4 YEARS-IN
627	628	OTH CHIRI	CHIROPRACTIC CARE-IN
629	630	OTH NONPI	OTHR NON-DR PROVIDERS-IN
631	632	OTH CONVI	REHABILITATION FACILITY-IN
633	634	OTH SNFI	EXTENDED CARE/SNF-IN
635	636	OTH HOSPI	HOSPICE CARE-IN
637	638	OTH NONEO	NO OTHR BNFT INCLUDED IN PLAN DESC-OUT

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START	END	NAME	DESCRIPTION
639	640	OTHIPO	INPAT DR-OUT
641	642	OTHIPCVO	INPAT DR'S CHARGES CVRG-OUT
643	644	OTHXRAYO	DIAGNOSTIC X-RAYS AND LAB-OUT
645	646	OTHMAMO	ROUTINE MAMMOGRAMS-OUT
647	648	OTHPEO	ADULT ROUTINE PHYSICAL EXAMS-OUT
649	650	OTHPAPO	ROUTINE PAP SMEARS-OUT
651	652	OTHPRENO	OFC VSTS FOR PRENATAL CARE-OUT
653	654	OTHAIMO	ADULT IMMUNIZATIONS-OUT
655	656	OTHCIMO	CHILD IMMUNIZATIONS-OUT
657	658	OTHWCCO	WELL-CHILD CARE, 2-4 YEARS-OUT
659	660	OTHCHIRO	CHIROPRACTIC CARE-OUT
661	662	OTHNONPO	OTHR NON-DR PROVIDERS-OUT
663	664	OTHCONVO	CONVALESCENT-OUT
665	666	OTHSNFO	EXTENDED CARE/SNF-OUT
667	668	OTHHOSPO	HOSPICE CARE-OUT
669	670	HSALLOI	HOSP R/B ALL LIMIT:ALL-IN
671	672	HSDEDOI	HOSP R/B ALL LIMIT:DEDUCT-IN
673	674	HSCOINOI	HOSP R/B ALL LIMIT:COINS/COPAY-IN
675	676	HSOOPOI	HOSP R/B ALL LIMIT:OOP LIMIT-IN
677	678	HSMAXOI	HOSP R/B ALL LIMIT:PLAN MAX-IN
679	680	HSDEDI	HOSP R/B INTRN LIMIT:DEDUCT-IN
681	682	HSCOINII	HOSP R/B INTRN LIMIT:COINS-IN
683	684	HSCOPII	HOSP R/B INTRN LIMIT:OOP LIMIT-IN
685	686	HSMAXNII	HOSP R/B INTRN LIMIT:DAY MAX-IN
687	688	HSMAXDII	HOSP R/B INTRN LIMIT:\$ MAX-IN
689	690	HSOTHII	HOSP R/B INTRN LIMIT:OTHR-IN
691	692	HSDEDCYI	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-IN
693	694	HSDEDDFI	HOSP R/B TYPE DEDUCT:/DAY FIX-IN
695	696	HSDEDDVI	HOSP R/B TYPE DEDUCT:/DAY VARY-IN
697	698	HSDEDDYI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN
699	700	HSDEDNSI	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-IN
701	703	HSDECYDI	HSP R/B TYP DEDUC:AMT DEDUC/CONFIN/YR-IN
704	706	HSDEDFDI	HSP RB TYP DEDUC:AMT DED/DAY FIX VARY-IN
707	708	HSDEDYNI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN
709	710	HSCOINI	HOSP R/B TYPE COINS-IN
711	713	HSCOINPI	HOSP R/B % COINS-IN
714	717	HSCOOPDI	HOSP R/B AMNT OOP LIMIT-IN
718	720	HSMXCYNI	HOSP R/B DAY MAX:MAX # DAYS/CONFIN/YR-IN
721	722	HSMXCYI	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-IN
723	724	HSMXDYI	HOSP R/B TYPE \$ MAX:/DAY-IN
725	726	HSMXNSI	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-IN
727	732	HSMXCYDI	HSP R/B TYP \$ MAX:AMT \$ MAX/CONFIN/YR-IN
733	735	HSMXDYDI	HOSP R/B TYPE \$ MAX:AMT \$ MAX/DAY-IN
736	737	HSALLOO	HOSP R/B ALL LIMIT:ALL-OUT
738	739	HSDEDOO	HOSP R/B ALL LIMIT:DEDUCT-OUT
740	741	HSCOINOO	HOSP R/B ALL LIMIT:COINS/COPAY-OUT
742	743	HSCOPOO	HOSP R/B ALL LIMIT:OOP LIMIT-OUT
744	745	HSMAXOO	HOSP R/B ALL LIMIT:PLAN MAX-OUT
746	747	HSDEDIO	HOSP R/B INTRN LIMIT:DEDUCT-OUT
748	749	HSCOINIO	HOSP R/B INTRN LIMIT:COINS-OUT
750	751	HSCOPIO	HOSP R/B INTRN LIMIT:OOP LIMIT-OUT
752	753	HSMAXNIO	HOSP R/B INTRN LIMIT:DAY MAX-OUT
754	755	HSMAXDIO	HOSP R/B INTRN LIMIT:\$ MAX-OUT
756	757	HSOTHIO	HOSP R/B INTRN LIMIT:OTHR-OUT
758	759	HSDEDCYO	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-OUT
760	761	HSDEDDFO	HOSP R/B TYPE DEDUCT:/DAY FIX-OUT
762	763	HSDEDDVO	HOSP R/B TYPE DEDUCT:/DAY VARY-OUT
764	765	HSDEDDYO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT
766	767	HSDEDNSO	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-OUT

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-----POSITIONAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
768	771	HSDECYDO	HSP RB TYP DED:AMNT DEDUC/CONFIN/YR-OUT
772	774	HSDEDFDO	HSP RB TYP DED:AMT DED/DAY FIX VARY-OUT
775	776	HSDEDYNO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT
777	778	HSCOINO	HOSP R/B TYPE COINS-OUT
779	781	HSCOINPO	HOSP R/B % COINS-OUT
782	785	HSOOPDO	HOSP R/B AMNT OOP LIMIT-OUT
786	788	HSMXCYNO	HSP RB DAY MAX:MAX # DAYS/CONFIN/YR-OUT
789	790	HSMXCYO	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-OUT
791	792	HSMXDYO	HOSP R/B TYPE \$ MAX:/DAY-OUT
793	794	HSMXNSO	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-OUT
795	800	HSMXCYDO	HSP RB TYP \$MAX:AMNT \$MAX/CONFIN/YR-OUT
801	804	HSMXDYDO	HSP RB TYPE \$ MAX: AMNT \$ MAX /DAY-OUT
805	806	MIALLO	MNTL HLTH INPAT ALL LIMIT:ALL
807	808	MIDEDO	MNTL HLTH INPAT ALL LIMIT:DEDUCT
809	810	MICOINO	MNTL HLTH INPAT ALL LIMIT:COINS/COPAY
811	812	MIOOPO	MNTL HLTH INPAT ALL LIMIT:OOP LIMIT
813	814	MIMAXO	MNTL HLTH INPAT ALL LIMIT:PLAN MAX
815	816	MIDEDI	MNTL HLTH INPAT INTRN LIMIT:DEDUCT
817	818	MICOINI	MNTL HLTH INPAT INTRN LIMIT:COINS
819	820	MIOOPI	MNTL HLTH INPAT INTRN LIMIT:OOP LIMIT
821	822	MIMAXNI	MNTL HLTH INPAT INTRN LIMIT:DAY MAX
823	824	MIMAXDI	MNTL HLTH INPAT INTRN LIMIT:\$ MAX
825	826	MIOTHI	MNTL HLTH INPAT INTRN LIMIT:OTHR
827	828	MIDEDCY	MNTL HLTH INPAT TYPE DEDUCT:/CONFIN/YR
829	830	MIDEDDF	MNTL HLTH INPAT TYPE DEDUCT:DAY FIX
831	832	MIDEDDV	MNTL HLTH INPAT TYPE DEDUCT:/DAY VARY
833	834	MIDEDDY	MH INPAT TYPE DEDUCT:# DAYS/CONFIN/YR
835	836	MIDEDNS	MNTL HLTH INPAT TYPE DEDUCT:NOT SPECIFD
837	839	MIDECYD	MH INPAT TYPE DED:AMNT DEDUCT/CONFIN/YR
840	842	MIDEDFD	MH INPAT TYPE DED:AMNT DED/DAY FIX VARY
843	844	MIDEDYN	MH INPAT TYPE DEDUCT:# DAYS /CONFIN/YR
845	846	MICOIN	MNTL HLTH INPAT TYPE COINS
847	849	MICOINP	MNTL HLTH INPAT % COINS
850	853	MIOOPD	MNTL HLTH INPAT AMNT OOP LIMIT
854	856	MIMAXCYN	MH INPAT DAY MAX:MAX # DAYS /CONFIN/YR
857	858	MIMXCY	MNTL HLTH INPAT TYPE \$ MAX:/CONFIN/YR
859	860	MIMXDY	MNTL HLTH INPAT TYPE \$ MAX:/DAY
861	862	MIMXNS	MNTL HLTH INPAT TYPE \$ MAX:NOT SPECIFID
863	868	MIMXCYD	MH INPAT TYPE \$ MAX:AMNT \$ MAX/CONFIN/YR
869	872	MIMXDYD	MH INPAT TYPE \$ MAX: AMNT \$ MAX /DAY
873	874	ADALLO	ALC/DRUG INPAT DETOX ALL LIMIT:ALL
875	876	ADDEDO	ALC/DRUG INPAT DETOX ALL LIMIT:DEDUCT
877	878	ADCOINO	ALC/DRG INPAT DETOX ALL LIMT:COINS/COPAY
879	880	ADOOPO	ALC/DRUG INPAT DETOX ALL LIMIT:OOP LIMIT
881	882	ADMAXO	ALC/DRUG INPAT DETOX ALL LIMIT:PLAN MAX
883	884	ADDEDI	ALC/DRUG INPAT DETOX INTRN LIMIT:DEDUCT
885	886	ADCOINI	ALC/DRUG INPAT DETOX INTRN LIMIT:COINS
887	888	ADOOPI	ALC/DRUG INPAT DETOX INTRN LIMIT:OOP LIMT
889	890	ADMAXNI	ALC/DRUG INPAT DETOX INTRN LIMIT:DAY MAX
891	892	ADMAXDI	ALC/DRUG INPAT DETOX INTRN LIMIT:\$ MAX
893	894	ADOTHI	ALC/DRUG INPAT DETOX INTRN LIMIT:OTHR
895	896	ADDEDCY	ALC/DRUG INPAT DETOX TYPE DED:/CONFIN/YR
897	898	ADDEDDF	ALC/DRUG INPAT DETOX TYPE DED:/DAY FIX
899	900	ADDEDDV	ALC/DRUG INPAT DETOX TYPE DED:/DAY VARY
901	902	ADDEDDY	A/DRG INP DETOX TYP DED:# DAYS/CONFIN/YR
903	904	ADDEDNS	ALC/DRUG INATP DETOX TYP DED:NOT SPECFD
905	908	ADDECYD	A/D INP DETOX TYP DED:AMNT DED/CONFIN/YR
909	911	ADDEDFD	A/D INP DETOX DED:AMT DED/DAY FIX VARY
912	913	ADDEDYN	A/D INP DETOX TYP DED:# DAYS/CONFIN/YR

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START	END	NAME	DESCRIPTION
914	915	ADCOIN	ALC/DRUG INPAT DETOX TYPE COINS
916	918	ADCOINP	ALC/DRUG INPAT DETOX % COINS
919	922	ADOOPD	ALC/DRUG INPAT DETOX AMNT OOP LIMIT
923	925	ADMAXCYN	A/D INP DETOX DAY MAX:MAX #DYS/CONFIN/YR
926	927	ADMXCY	ALC/DRUG INPAT DETOX TYP \$ MAX:/CONFIN/YR
928	929	ADMXDY	ALC/DRUG INPAT DETOX TYPE \$ MAX:/DAY
930	931	ADMXNS	ALC/DRUG INPAT DETOX TYPE \$ MAX:NOT SPEC
932	937	ADMXCYD	A/D INPAT DETOX \$ MAX:AMT \$MAX/CONFIN/YR
938	940	ADMXDYD	A/D INPAT DETOX TYPE \$ MAX:AMT \$ MAX/DAY
941	942	ARALLO	ALC/DRUG INPAT REHAB ALL LIMIT:ALL
943	944	ARDEDO	ALC/DRUG INPAT REHAB ALL LIMIT:DEDUCT
945	946	ARCOINO	ALC/DRUG INPAT REHB ALL LIMT:COINS/COPAY
947	948	AROPO	ALC/DRUG INPAT REHAB ALL LIMIT:OOP LIMIT
949	950	ARMAXO	ALC/DRUG INPAT REHAB ALL LIMIT:PLAN MAX
951	952	ARDEDI	ALC/DRUG INPAT REHAB INTRN LIMIT:DEDUCT
953	954	ARCOINI	ALC/DRUG INPAT REHAB INTRN LIMIT:COINS
955	956	AROPI	ALC/DRUG INPAT REHAB INTRN LIMIT:OOP LIMT
957	958	ARMAXNI	ALC/DRUG INPAT REHAB INTRN LIMIT:DAY MAX
959	960	ARMAXDI	ALC/DRUG INPAT REHAB INTRN LIMIT:\$ MAX
961	962	AROTHI	ALC/DRUG INPAT REHAB INTRN LIMIT:OTHR
963	964	ARDEDCY	ALC/DRUG INPAT REHAB TYPE DED:/CONFIN/YR
965	966	ARDEDDF	ALC/DRUG INPAT REHAB TYPE DED:/DAY FIX
967	968	ARDEDDV	ALC/DRUG INPAT REHAB TYPE DED:/DAY VARY
969	970	ARDEDDY	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR
971	972	ARDEDNS	ALC/DRUG INPAT REHAB TYPE DED:NOT SPEC
973	976	ARDECYD	A/D INPAT REHAB DED:AMT DED/CONFIN/YR
977	979	ARDEDFD	A/D INP REHAB DED:AMNT DED/DAY FIX VARY
980	981	ARDEDYN	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR
982	983	ARCOIN	ALC/DRUG INPAT REHAB TYPE COINS
984	986	ARCOINP	ALC/DRUG INPAT REHAB % COINS
987	990	AROOPD	ALC/DRUG INPAT REHAB AMNT OOP LIMIT:
991	993	ARMAXCYN	A/D INP REHB DAY MAX:MAX # DYS/CONFIN/YR
994	995	ARMXCY	A/D INPAT REHAB TYPE \$ MAX:/CONFIN/YR
996	997	ARMXDY	ALC/DRUG INPAT REHAB TYPE \$ MAX:/DAY
998	999	ARMXNS	ALC/DRUG INPAT REHAB TYPE \$ MAX:NOT SPEC
1000	1005	ARMXCYD	A/D INPT REHAB \$ MAX:AMNT \$MAX/CONFIN/YR
1006	1008	ARMXDYD	A/D INPAT REHAB TYPE \$ MAX:AMNT \$MAX/DAY
1009	1010	ISALLOI	INPAT SURGERY ALL LIMIT:ALL-IN
1011	1012	ISDEDOI	INPAT SURGERY ALL LIMIT:DEDUCT-IN
1013	1014	ISCOINOI	INPAT SURGERY ALL LIMIT:COINS/COPAY-IN
1015	1016	ISOOPOI	INPAT SURGERY ALL LIMIT:OOP LIMIT-IN
1017	1018	ISMAXOI	INPAT SURGERY ALL LIMIT:PLAN MAX-IN
1019	1020	ISDEDII	INPAT SURGERY INTRN LIMIT:DEDUCT-IN
1021	1022	ISCOINII	INPAT SURGERY INTRN LIMIT:COINS-IN
1023	1024	ISCOPII	INPAT SURGERY INTRN LIMIT:COPAY-IN
1025	1026	ISMXXII	INPAT SURGERY INTRN LIMIT:\$ MAX-IN
1027	1028	ISOTHII	INPAT SURGERY INTRN LIMIT:OTHR-IN
1029	1031	ISDEDDI	INPAT SURGERY:AMNT DEDUCT-IN
1032	1034	ISCOINPI	INPAT SURGERY:% COINS-IN
1035	1037	ISCOPII	INPAT SURGERY:AMNT COPAY-IN
1038	1039	ISMXXCYI	INPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR-IN
1040	1041	ISMXXSRI	INPAT SURGERY TYPE \$ MAX:PER SURGERY-IN
1042	1043	ISMXXFEI	INPAT SURGERY TYPE \$ MAX:FEE SCHD-IN
1044	1045	ISMXXNSI	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-IN
1046	1050	ISMXXCYDI	INPAT SRGRY \$ MAX:AMT \$MAX/CONFIN/YR-IN
1051	1055	ISMXXSRDI	INPAT SRGRY TYPE \$ MAX:AMT \$MAX/SURG-IN
1056	1058	ISMXXFEII	INPAT SRGRY TYPE \$MAX:AMT \$MAX:APPEND-IN
1059	1061	ISMXXFE2I	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-IN
1062	1063	ISALLOO	INPAT SURGERY ALL LIMIT:ALL-OUT

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START	END	NAME	DESCRIPTION
1064	1065	ISDEDOO	INPAT SURGERY ALL LIMIT:DEDUCT-OUT
1066	1067	ISCOINOO	INPAT SURGERY ALL LIMIT:COINS/COPAY-OUT
1068	1069	ISOOPOO	INPAT SURGERY ALL LIMIT:OOP LIMIT-OUT
1070	1071	ISMAXOO	INPAT SURGERY ALL LIMIT:PLAN MAX-OUT
1072	1073	ISDEDIO	INPAT SURGERY INTRN LIMIT:DEDUCT-OUT
1074	1075	ISCOINIO	INPAT SURGERY INTRN LIMIT:COINS-OUT
1076	1077	ISCOPIO	INPAT SURGERY INTRN LIMIT:COPAY-OUT
1078	1079	ISMAXIO	INPAT SURGERY INTRN LIMIT:\$ MAX-OUT
1080	1081	ISOTHIO	INPAT SURGERY INTRN LIMIT:OTHR-OUT
1082	1084	ISDEDNO	INPAT SURGERY:AMNT DEDUCT-OUT
1085	1087	ISCOINPO	INPAT SURGERY:% COINS-OUT
1088	1090	ISCOPDO	INPAT SURGERY:AMNT COPAY-OUT
1091	1092	ISMXCYO	INPAT SURGERY TYPE \$ MAX:/CONFIN/YR-OUT
1093	1094	ISMXSRO	INPAT SURGERY TYPE \$ MAX:PER SRGERY-OUT
1095	1096	ISMXFEO	INPAT SURGERY TYPE \$ MAX:FEE SCHD-OUT
1097	1098	ISMXNSO	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-OUT
1099	1103	ISMXCYDO	INPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR-OUT
1104	1105	ISMXSRDO	INPAT SRGY TYPE \$ MAX:AMT \$MAX:SRGY-OUT
1106	1107	ISMXFE1O	INPAT SRGY TYP \$ MAX:AMT \$MAX:APPEND-OUT
1108	1109	ISMXFE2O	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-OUT
1110	1111	OSALLO	OUTPAT SURGERY ALL LIMIT:ALL
1112	1113	OSDEDO	OUTPAT SURGERY ALL LIMIT:DEDUCT
1114	1115	OSCOINO	OUTPAT SURGERY ALL LIMIT:COINS/COPAY
1116	1117	OSOPOO	OUTPAT SURGERY ALL LIMIT:OOP LIMIT
1118	1119	OSMAXO	OUTPAT SURGERY ALL LIMIT:PLAN MAX
1120	1121	OSDEDI	OUTPAT SURGERY INTRN LIMIT:DEDUCT
1122	1123	OSCOINI	OUTPAT SURGERY INTRN LIMIT:COINSURANCE
1124	1125	OSCOPI	OUTPAT SURGERY INTRN LIMIT:COPAY
1126	1127	OISMAXI	OUTPAT SURGERY INTRN LIMIT:\$ MAX
1128	1129	OSOTHI	OUTPAT SURGERY INTRN LIMIT:OTHR
1130	1133	OSDEDD	OUTPAT SURGERY:AMNT DEDUCT
1134	1136	OSCOINP	OUTPAT SURGERY:% COINS
1137	1139	OSCOPD	OUTPAT SURGERY:AMNT COPAY
1140	1141	OSMXCY	OUTPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR
1142	1143	OSMXSR	OUTPAT SURGERY TYPE \$ MAX:PER SURGERY
1144	1145	OSMXFE	OUTPAT SURGERY TYPE \$ MAX:FEE SCHD
1146	1147	OSMXNS	OUTPAT SURGERY TYPE \$ MAX:NOT SPECIFIED
1148	1152	OSMXCYD	OUTPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR
1153	1157	OSMXSRD	OUTPAT SRGY TYPE \$ MAX:AMT \$MAX/SURGERY
1158	1160	OSMX1FE	OUTPAT SRGY \$ MAX:AMT \$MAX:TONSIL/ADENOI
1161	1163	OSMX2FE	OUTP SRG TYP \$ MAX:AMT \$MAX:DIAG D AND C
1164	1165	OFALLOI	DR OFC VSTS ALL LIMIT:ALL-IN
1166	1167	OFDEDOI	DR OFC VSTS ALL LIMIT:DEDUCT-IN
1168	1169	OFCOINOI	DR OFC VSTS ALL LIMIT:COINS/COPAY-IN
1170	1171	OFOPOI	DR OFC VSTS ALL LIMIT:OOP LIMIT-IN
1172	1173	OFMAXOI	DR OFC VSTS ALL LIMIT:PLAN MAX-IN
1174	1175	OFDEDII	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-IN
1176	1177	OFCOIFII	DR OFC VSTS INTRN LIMIT:COINS FIX-IN
1178	1179	OFCOIVII	DR OFC VSTS INTRN LIMIT:COINS VARY-IN
1180	1181	OFCOPFII	DR OFC VSTS INTRN LIMIT:COPAY/VST FIX-IN
1182	1183	OFCOPVII	DR OFC VSTS INTRN LIMT:COPAY/VST VARY-IN
1184	1185	OFDIFFII	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-IN
1186	1187	OFMXNVII	DR OFC VSTS INTRN LIMIT:MAX # VISITS-IN
1188	1189	OFMXDVII	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-IN
1190	1191	OFMXRVII	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-IN
1192	1193	OFOTHII	DR OFC VSTS INTRN LIMIT:OTHR-IN
1194	1196	OFDEDDI	DR OFC VSTS:AMNT DEDUCT/YR-IN
1197	1199	OFCOINPI	DR OFC VSTS:% COINS FIX VARY-IN
1200	1201	OFCOPDI	DR OFC VSTS:AMNT COPAY /VST FIX VARY-IN

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-----POSITIONAL LISTING OF VARIABLES-----

START	END	NAME	DESCRIPTION
1202	1204	OFMXNVNI	DR OFC VSTS:# MAX # VISITS-IN
1205	1207	OFMXDVDI	DR OFC VSTS:\$ AMNT \$ MAX /VST-IN
1208	1212	OFMXYRDI	DR OFC VSTS:\$ AMNT \$ MAX/YR-IN
1213	1214	OFALLOO	DR OFC VSTS ALL LIMIT:ALL-OUT
1215	1216	OFDEDOO	DR OFC VSTS ALL LIMIT:DEDUCT-OUT
1217	1218	OFCOINOO	DR OFC VSTS ALL LIMIT:COINS/COPAY-OUT
1219	1220	OFOOPOO	DR OFC VSTS ALL LIMIT:OOP LIMIT-OUT
1221	1222	OFMAXOO	DR OFC VSTS ALL LIMIT:PLAN MAX-OUT
1223	1224	OFDEDIO	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-OUT
1225	1226	OFCOIFIO	DR OFC VSTS INTRN LIMIT:COINS FIX-OUT
1227	1228	OFCOIVIO	DR OFC VSTS INTRN LIMIT:COINS VARY-OUT
1229	1230	OFCOPFIO	DR OFC VSTS INTRN LMIT:COPAY/VST FIX-OUT
1231	1232	OFCOPVIO	DR OFC VSTS INTRN LMT:COPAY/VST VARY-OUT
1233	1234	OFDIFFIO	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-OUT
1235	1236	OFMXNVIO	DR OFC VSTS INTRN LIMIT:MAX # VISITS-OUT
1237	1238	OFMXDVIO	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-OUT
1239	1240	OFMXYRIO	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-OUT
1241	1242	OFOTHIO	DR OFC VSTS INTRN LIMIT:OTHR-OUT
1243	1245	OFDEDDO	DR OFC VSTS:AMNT DEDUCT/YR-OUT
1246	1248	OFCOINPO	DR OFC VSTS:% COINS FIX VARY-OUT
1249	1250	OFCOPDO	DR OFC VSTS:AMNT COPAY /VST FIX VARY-OUT
1251	1252	OFMXNVNO	DR OFC VSTS:# MAX # VISITS-OUT
1253	1254	OFMXDVDO	DR OFC VSTS:\$ AMNT \$ MAX /VST-OUT
1255	1257	OFMXYRDO	DR OFC VSTS:\$ AMNT \$ MAX/YR-OUT
1258	1259	WBALLOI	WELL BABY ALL LIMIT:ALL-IN
1260	1261	WBDEDOI	WELL BABY ALL LIMIT:DEDUCT-IN
1262	1263	WBCOINOI	WELL BABY ALL LIMIT:COINS/COPAY-IN
1264	1265	WBOOPOI	WELL BABY ALL LIMIT:OOP LIMIT-IN
1266	1267	WBMAXOI	WELL BABY ALL LIMIT:PLAN MAXIM UM-IN
1268	1269	WBDEDII	WELL BABY INTRN LIMIT:DEDUCT/YR-IN
1270	1271	WBCOIFII	WELL BABY INTRN LIMIT:COINS FIX-IN
1272	1273	WBCOIVII	WELL BABY INTRN LIMIT:COINS VARY-IN
1274	1275	WBCOPFII	WELL BABY INTRN LIMIT:COPAY /VST FIX-IN
1276	1277	WBCOPVII	WELL BABY INTRN LIMIT:COPAY /VST VARY-IN
1278	1279	WBMXNVII	WELL BABY INTRN LIMIT:MAX # VISITS-IN
1280	1281	WBMXDVII	WELL BABY INTRN LIMIT:\$ MAX /VST-IN
1282	1283	WBMXYRII	WELL BABY INTRN LIMIT:\$ MAX/YR-IN
1284	1285	WBOTHII	WELL BABY INTRN LIMIT:OTHR-IN
1286	1287	WBDEDDI	WELL BABY:AMNT DEDUCT/YR-IN
1288	1290	WBCOINPI	WELL BABY:% COINS FIX VARY-IN
1291	1292	WBCOPDI	WELL BABY:AMNT COPAY /VST FIX VARY-IN
1293	1294	WBMXNVNI	WELL BABY:# MAX # VISITS-IN
1295	1297	WBMXDVDI	WELL BABY:\$ AMNT \$ MAX /VST-IN
1298	1300	WBMXYRDI	WELL BABY:\$ AMNT \$ MAX/YR-IN
1301	1302	WBALLOO	WELL BABY ALL LIMIT:ALL-OUT
1303	1304	WBDEDOO	WELL BABY ALL LIMIT:DEDUCT-OUT
1305	1306	WBCOINOO	WELL BABY ALL LIMIT:COINS/COPAY-OUT
1307	1308	WBOOPOO	WELL BABY ALL LIMIT:OOP LIMIT-OUT
1309	1310	WBMAXOO	WELL BABY ALL LIMIT:PLAN MAX-OUT
1311	1312	WBDEDIO	WELL BABY INTRN LIMIT:DEDUCT/YR-OUT
1313	1314	WBCOIFIO	WELL BABY INTRN LIMIT:COINS FIX-OUT
1315	1316	WBCOIVIO	WELL BABY INTRN LIMIT:COINS VARY-OUT
1317	1318	WBCOPFIO	WELL BABY INTRN LIMIT:COPAY /VST FIX-OUT
1319	1320	WBCOPVIO	WELL BABY INTRN LIMIT:COPAY/VST VARY-OUT
1321	1322	WBMXNVIO	WELL BABY INTRN LIMIT:MAX # VISITS-OUT
1323	1324	WBMXDVIO	WELL BABY INTRN LIMIT:\$ MAX /VST-OUT
1325	1326	WBMXYRIO	WELL BABY INTRN LIMIT:\$ MAX/YR-OUT
1327	1328	WBOTHIO	WELL BABY INTRN LIMIT:OTHR-OUT
1329	1331	WBDEDDO	WELL BABY:AMNT DEDUCT/YR-OUT

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START	END	NAME	DESCRIPTION
1332	1334	WBCOINPO	WELL BABY:% COINS FIX VARY-OUT
1335	1336	WBCOPDO	WELL BABY:AMNT COPAY /VST FIX VARY-OUT
1337	1338	WBMXNVNO	WELL BABY:# MAX # VISITS-OUT
1339	1340	WBMXDVDO	WELL BABY:\$ AMNT \$ MAX /VST-OUT
1341	1343	WBMXYRDO	WELL BABY:\$ AMNT \$ MAX/YR-OUT
1344	1345	HHALLO	HOME HEALTH CARE ALL LIMIT:ALL
1346	1347	HHDEDO	HOME HEALTH CARE ALL LIMIT:DEDUCT
1348	1349	HHCOINO	HOME HEALTH CARE ALL LIMIT:COINS/COPAY
1350	1351	HHOOPO	HOME HEALTH CARE ALL LIMIT:OOP LIMIT
1352	1353	HHMAXO	HOME HEALTH CARE ALL LIMIT:PLAN MAX
1354	1355	HHDEDI	HOME HEALTH CARE INTRN LIMIT:DEDUCT/YR
1356	1357	HHCOIFI	HOME HEALTH CARE INTRN LIMIT:COINS FIX
1358	1359	HHCOIVI	HOME HEALTH CARE INTRN LIMIT:COINS VARY
1360	1361	HHCOFFI	HOME HLTH CARE INTRN LMT:COPAY/VST FIX
1362	1363	HHCOPLI	HOME HLTH CARE INTRN LMT:COPAY/VST VARY
1364	1365	HHMXNVI	HOME HEALTH CARE INTRN LIMIT:MAX #VISTS
1366	1367	HHMXDVI	HOME HEALTH CARE INTRN LIMIT:\$ MAX /VST
1368	1369	HHMXRYI	HOME HEALTH CARE INTRN LIMIT:\$ MAX/YR
1370	1371	HHOTHI	HOME HEALTH CARE INTRN LIMIT:OTHR
1372	1374	HHDEDD	HOME HEALTH CARE:AMNT DEDUCT/YR
1375	1377	HHCOINP	HOME HEALTH CARE:% COINS FIX VARY
1378	1379	HHCOPLD	HOME HEALTH CARE:AMNT COPAY/VST FIX VARY
1380	1383	HHMXNVN	HOME HEALTH CARE:# MAX # VISITS
1384	1386	HHMXDVD	HOME HEALTH CARE:\$ AMNT \$ MAX /VST
1387	1391	HHMXYRD	HOME HEALTH CARE:\$ AMNT \$ MAX/YR
1392	1393	MOALLO	MNTL HLTH OUTPAT ALL LIMIT:ALL
1394	1395	MODEDO	MNTL HLTH OUTPAT ALL LIMIT:DEDUCT
1396	1397	MOCOINO	MNTL HLTH OUTPAT ALL LIMIT:COINS/COPAY
1398	1399	MOOPO	MNTL HLTH OUTPAT ALL LIMIT:OOP LIMIT
1400	1401	MOMAXO	MNTL HLTH OUTPAT ALL LIMIT:PLAN MAX
1402	1403	MODEDI	MNTL HLTH OUTPAT INTRN LIMIT:DEDUCT/YR
1404	1405	MOCOIFI	MNTL HLTH OUTPAT INTRN LIMIT:COINS FIX
1406	1407	MOCOIVI	MNTL HLTH OUTPAT INTRN LIMIT:COINS VARY
1408	1409	MOCOPLI	MNTL HLTH OUTPAT INTRN LMT:COPAY/VST FIX
1410	1411	MOCOPLV	MNTL HLTH OUTPAT INTRN LMT:COPAY/VST VARY
1412	1413	MOMXNVI	MNTL HLTH OUTPAT INTRN LIMIT:MAX # VISITS
1414	1415	MOMXDVI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/VIST
1416	1417	MOMXYRI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/YR
1418	1419	MOOTHI	MNTL HLTH OUTPAT INTRN LIMIT:OTHR
1420	1422	MODEDD	MNTL HLTH OUTPAT:AMNT DEDUCT/YR
1423	1425	MOCOINP	MNTL HLTH OUTPAT:% COINS FIX VARY
1426	1428	MOCOPD	MNTL HLTH OUTPAT:AMT COPAY/VST FIX VARY
1429	1431	MOMXNVN	MNTL HLTH OUTPAT:# MAX # VISITS
1432	1434	MOMXDVD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX /VST
1435	1439	MOMXYRD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX/YR
1440	1441	AOALLO	ALC/DRUG OUTP REHAB ALL LIMT:ALL
1442	1443	AODEDO	ALC/DRUG OUTP REHAB ALL LIMT:DEDUCT
1444	1445	AOCOINO	ALC/DRUG OUTP REHAB ALL LIMT:COINS/COPAY
1446	1447	AOOPO	ALC/DRUG OUTP REHAB ALL LIMT:OOP LIMIT
1448	1449	AOMAXO	ALC/DRUG OUTP REHAB ALL LIMT:PLAN MAX
1450	1451	AODEDI	ALC/DRUG OUTP REHAB INTRN LIMT:DEDUCT/YR
1452	1453	AOCOIFI	ALC/DRUG OUTP REHAB INTRN LIMT:COINS FIX
1454	1455	AOCOIVI	ALC/DRUG OUTP REHAB INTRN LMT:COINS VARY
1456	1457	AOCOPFI	A/D OUTP REHAB INTRN LMT:COPAY/VST FIX
1458	1459	AOCOPVI	A/D OUTP REHAB INTRN LMT:COPAY/VST VARY
1460	1461	AOMXNVI	ALC/DRUG OUTP REHAB INTRN LMT:MAX #VISTS
1462	1463	AOMXDVI	ALC/DRUG OUTP REHAB INTRN LMT:\$ MAX/VST
1464	1465	AOMXYRI	A/DRUG OUTP REHAB INTRN LIMT:\$ MAX/YR
1466	1467	AOOTHY	ALC/DRUG OUTP REHAB INTRN LIMT:OTHR

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START	END	NAME	DESCRIPTION
1468	1470	AODEDD	ALC/DRUG OUTP REHAB:AMNT DEDUCT/YR
1471	1473	AOCOINP	ALC/DRUG OUTP REHAB:% COINS FIX VARY
1474	1476	AOCOPD	A/D OUTP REHAB:AMT COPAY/VST FIX VARY
1477	1479	AOMXNVN	ALC/DRUG OUTP REHAB:# MAX # VISITS
1480	1482	AOMXDVD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX /VST
1483	1487	AOMXYRD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX/YR
1488	1489	GAPTYPE	TYPE MEDIGAP PLAN
1490	1491	GAPA	PART A BNFT
1492	1493	GAPA1COP	PART A BNFT:HOSP COPAY - DAYS 61-90
1494	1495	GAPA2COP	PART A BNFT:HOSP COPAY - DAYS 91-150
1496	1497	GAPA3COP	PART A BNFT:HOSP COPAY GT 150 DAYS
1498	1499	GAPASNF	PART A BNFT:SNF COPAY - DAYS 21-100
1500	1501	GAPADED	PART A BNFT:DEDUCT
1502	1503	GAPB	PART B BNFT
1504	1505	GAPBEXC	PART B BNFT:EXCESS CHARGE
1506	1507	GAPBDED	PART B BNFT:DEDUCT
1508	1509	GAPB1COI	PART B BNFT:COINS, W/OUT ADDTL DEDUCT
1510	1511	GAPB2COI	PART B BNFT:COINS, W/ ADDTL DEDUCT
1512	1513	GAPB3COI	PART B BNFT:COINS-OUTPAT MNTH HLTH
1514	1515	GAPOTH	OTHR BNFT
1516	1517	GAPOTHBL	OTHR BNFT:BLOOD DEDUCT
1518	1519	GAPOTHTR	OTHR BNFT:FOREIGN TRAVL BNFT-MED EMRG
1520	1521	GAPOTHHM	OTHR BNFT:AT-HOME RECOVERY
1522	1523	GAPOTHPR	OTHR BNFT:PREVENTIVE MEDICAL CARE
1524	1525	DRUGCOVB	BNFT CVRG FOR OUTPAT PMEDS (BRAND)
1526	1527	DRUGCOVG	BNFT CVRG FOR OUTPAT PMEDS (GEN)
1528	1529	DRMAIL	MAIL ORDER DRUGS
1530	1531	DRPP	PARTICIPATING PHARMACIES
1532	1533	DRFORMUL	FORMULARY DRUGS
1534	1535	DRALLOB	OUTPAT PMEDS ALL LIMIT:ALL (BRAND)
1536	1537	DRDEDOB	OUTPAT PMEDS ALL LIMIT:DEDUCT (BRAND)
1538	1539	DRCOINOB	OUTPAT PMEDS ALL LIMIT:COINS (BRAND)
1540	1541	DROPOB	OUTP PMEDS ALL LIMIT:OOP LIMIT (BRAND)
1542	1543	DRMAXOB	OUTP PMEDS ALL LIMIT:PLAN MAX (BRAND)
1544	1545	DRDEDIB	OUTP PMEDS INTRN LIMIT:DEDUCT/YR (BRAND)
1546	1547	DRCOINIB	OUTP PMEDS INTRN LIMIT:COINS (BRAND)
1548	1549	DRCOPIB	OUTP PMEDS INTRN LMT:COPAY/SCRIPT(BRAND)
1550	1551	DRMAXIB	OUTP PMEDS INTRN LIMIT:\$ MAX/YR (BRAND)
1552	1553	DROTHIB	OUTP PMEDS INTRN LIMIT:OTHR (BRAND)
1554	1557	DRDEDIDB	AMNT INDIV DEDUCT/YR (BRAND)
1558	1560	DRDEDFDB	AMNT FAMILY DEDUCT/YR (BRAND)
1561	1562	DRDEDNB	# INDIV FOR DEDUCT/YR (BRAND)
1563	1565	DRCOINPB	% COINS (BRAND)
1566	1567	DRCOPDB	AMNT COPAY PER PRESCRIPTION (BRAND)
1568	1572	DRMAXDB	AMNT \$ LIMIT/YR (BRAND)
1573	1574	DRALLOG	OUTP PMEDS ALL LIMIT:ALL (GEN)
1575	1576	DRDEDOG	OUTP PMEDS ALL LIMIT:DEDUCT (GEN)
1577	1578	DRCOINOG	OUTP PMEDS ALL LIMIT:COINS (GEN)
1579	1580	DROPOG	OUTP PMEDS ALL LIMIT:OOP LIMIT (GEN)
1581	1582	DRMAXOG	OUTP PMEDS ALL LIMIT:PLAN MAX (GEN)
1583	1584	DRDEDIG	OUTP PMEDS INTRN LIMIT:DEDUCT/YR (GEN)
1585	1586	DRCOINIG	OUTP PMEDS INTRN LIMIT:COINS (GEN)
1587	1588	DRCOPIG	OUTP PMEDS INTRN LMT:COPAY/SCRIPT(GEN)
1589	1590	DRMAXIG	OUTP PMEDS INTRN LIMIT:\$ MAX/YR (GEN)
1591	1592	DROTHIG	OUTP PMEDS INTRN LIMIT:OTHR (GEN)
1593	1595	DRDEDIDG	AMNT INDIV DEDUCT/YR (GENERIC)
1596	1598	DRDEDFDG	AMNT FAMILY DEDUCT/YR (GENERIC)
1599	1600	DRDEDNG	# INDIV FOR DEDUCT/YR (GENERIC)
1601	1603	DRCOINPG	% COINS (GENERIC)

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START	END	NAME	DESCRIPTION
1604	1605	DRCOPDG	AMNT COPAY PER PRESCRIPTION (GEN)
1606	1610	DRMAXDG	AMNT \$ LIMIT/YR. (GENERIC)
1611	1612	DNPROV	TYPE DENTAL PROVIDER
1613	1614	DNPREV	PREVENTIVE DENTAL CARE CVRG
1615	1616	DNORTH	ORTHODONTIA CVRG
1617	1618	DNDetail	DETAILS PROVIDED FOR DENTAL CVRG
1619	1620	DNDED	DENTAL DEDUCT
1621	1623	DNDEDID	AMNT INDIV DEDUCT
1624	1627	DNDEFD	AMNT FAMILY DEDUCT
1628	1629	DNDEDN	# INDIV FOR DENTAL DEDUCT
1630	1631	DNDEDALL	DNTL SRVCS SUBJ 2 DEDUCT:ALL COVRD SRVCS
1632	1633	DNDEDEX	DENTL SRVCS SUBJ 2 DEDUCT:EXAM,XRAY
1634	1635	DNDEDSR	DENTL SRVCS SUBJ 2 DEDUCT:SURGERY
1636	1637	DNDEDFL	DENTL SRVCS SUBJ 2 DEDUCT:FILLINGS
1638	1639	DNDEDP	DENTL SRVCS SUBJ 2 DEDUCT:PERIO
1640	1641	DNDEDEN	DENTL SRVCS SUBJ 2 DEDUCT:ENDO
1642	1643	DNDEDCR	DENTL SRVCS SUBJ 2 DEDUCT:CRWN/PROS
1644	1645	DNDEDOR	DENTL SRVCS SUBJ 2 DEDUCT:ORTHODONTIA
1646	1647	DNMAX	YEARLY DENTAL MAX
1648	1651	DNMAXD	AMNT YEARLY DENTAL MAX
1652	1653	DNEX1CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (P 1)
1654	1656	DNEX1CIP	EXAM,XRAY,CLEAN:% COINS (PROV 1)
1657	1658	DNEX1CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 1)
1659	1660	DNEX1FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 1)
1661	1662	DNEX1DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 1)
1663	1664	DNEX2CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (PROV 2)
1665	1667	DNEX2CIP	EXAM,XRAY,CLEAN:% COINS (PROV 2)
1668	1669	DNEX2CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 2)
1670	1671	DNEX2FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 2)
1672	1673	DNEX2DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 2)
1674	1675	DNSR1CV	BNFT CVRG FOR SURGERY (PROV 1)
1676	1678	DNSR1CIP	SURGERY:% COINS (PROV 1)
1679	1680	DNSR1CPD	SURGERY:AMNT COPAY /PROC /VST (P 1)
1681	1683	DNSR1FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 1)
1684	1685	DNSR1DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 1)
1686	1687	DNSR2CV	BNFT CVRG FOR SURGERY (PROV 2)
1688	1690	DNSR2CIP	SURGERY:% COINS (PROV 2)
1691	1692	DNSR2CPD	SURGERY:AMNT COPAY /PROC /VST (P 2)
1693	1694	DNSR2FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 2)
1695	1696	DNSR2DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 2)
1697	1698	DNFL1CV	BNFT CVRG FOR FILLINGS (PROV 1)
1699	1701	DNFL1CIP	FILLINGS:% COINS (PROV 1)
1702	1703	DNFL1CPD	FILLINGS:AMNT COPAY /PROC /VST (P 1)
1704	1706	DNFL1FED	FILLINGS:AMNT FEE SCHD SPEC PROC (P 1)
1707	1708	DNFL1DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 1)
1709	1710	DNFL2CV	BNFT CVRG FOR FILLINGS (PROV 2)
1711	1713	DNFL2CIP	FILLINGS:% COINS (PROV 2)
1714	1715	DNFL2CPD	FILLINGS:AMNT COPAY /PROC /VST (P 2)
1716	1717	DNFL2FED	FILLINGS:AMNT FEE SCHD SPEC PROC (P 2)
1718	1719	DNFL2DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 2)
1720	1721	DNPR1CV	BNFT CVRG FOR PERIO (PROV 1)
1722	1724	DNPR1CIP	PERIO:% COINS (PROV 1)
1725	1727	DNPR1CPD	PERIO:AMNT COPAY /PROC OR /VST (P 1)
1728	1730	DNPR1FED	PERIO:AMNT FEE SCHD SPEC PROC (P 1)
1731	1732	DNPR1DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 1)
1733	1734	DNPR2CV	BNFT CVRG FOR PERIO (PROV 2)
1735	1736	DNPR2CIP	PERIO:% COINS (PROV 2)
1737	1738	DNPR2CPD	PERIO:AMNT COPAY /PROC OR /VST (P 2)
1739	1740	DNPR2FED	PERIO:AMNT FEE SCHD SPEC PROC (P 2)

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START	END	NAME	DESCRIPTION
1741	1742	DNPR2DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 2)
1743	1744	DNEN1CV	BNFT CVRG FOR ENDO (PROV 1)
1745	1747	DNEN1CIP	ENDO:% COINS (PROV 1)
1748	1750	DNEN1CPD	ENDO:AMNT COPAY /PROC OR /VST (P 1)
1751	1753	DNEN1FED	ENDO:AMNT FEE SCHD SPEC PROC (P 1)
1754	1755	DNEN1DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 1)
1756	1757	DNEN2CV	BNFT CVRG FOR ENDO (PROV 2)
1758	1759	DNEN2CIP	ENDO:% COINS (PROV 2)
1760	1761	DNEN2CPD	ENDO:AMNT COPAY /PROC OR /VST (PRV 2)
1762	1764	DNEN2FED	ENDO:AMNT FEE SCHD SPEC PROC (PRV 2)
1765	1766	DNEN2DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 2)
1767	1768	DNCR1CV	BNFT CVRG FOR CRWN/PROS (PROV 1)
1769	1771	DNCR1CIP	CRWN/PROS:% COINS (PROV 1)
1772	1774	DNCR1CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 1)
1775	1777	DNCR1FED	CRWN/PROS:AMNT FEE SCHD SPEC PROC (P 1)
1778	1779	DNCR1DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 1)
1780	1781	DNCR2CV	BNFT CVRG FOR CRWN/PROS (PROV 2)
1782	1783	DNCR2CIP	CRWN/PROS:% COINS (PROV 2)
1784	1785	DNCR2CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 2)
1786	1788	DNCR2FED	CRWN/PROS:AMNT FEE SCHD SPEC PROC (P 2)
1789	1790	DNCR2DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 2)
1791	1792	VSPROV	TYPE VISION PROVIDER
1793	1794	VSCOV	VISION BNFT APPLIED
1795	1796	VSDetail	DETAILS PROVIDED FOR VISION CVRG
1797	1798	VSDED	VISION DEDUCT
1799	1801	VSDEDD	AMNT VISION DEDUCT
1802	1803	VSMAX	VISION MAX
1804	1807	VSMAXD	AMNT VISION MAX
1808	1809	VSEX1CV	BNFT CVRG FOR EYE EXAMS (PROV 1)
1810	1812	VSEX1CIP	EYE EXAMS:% COINS (PROV 1)
1813	1814	VSEX1CPD	EYE EXAMS:AMNT COPAY (PROV 1)
1815	1817	VSEX1MXD	EYE EXAMS:AMNT \$ MAX (PROV 1)
1818	1819	VSEX2CV	BNFT CVRG FOR EYE EXAMS (PROV 2)
1820	1822	VSEX2CIP	EYE EXAMS:% COINS (PROV 2)
1823	1824	VSEX2CPD	EYE EXAMS:AMNT COPAY (PROV 2)
1825	1826	VSEX2MXD	EYE EXAMS:AMNT \$ MAX (PROV 2)
1827	1828	VSEX3CV	BNFT CVRG FOR EYE EXAMS (PROV 3)
1829	1830	VSEX3CIP	EYE EXAMS:% COINS (PROV 3)
1831	1832	VSEX3CPD	EYE EXAMS:AMNT COPAY (PROV 3)
1833	1834	VSEX3MXD	EYE EXAMS:AMNT \$ MAX (PROV 3)
1835	1836	VSGL1CV	BNFT CVRG FOR EYE GLASSES (PROV 1)
1837	1839	VSGL1CIP	EYE GLASSES:% COINS (PROV 1)
1840	1842	VSGL1CPD	EYE GLASSES:AMNT COPAY (PROV 1)
1843	1845	VSGL1MXD	EYE GLASSES:AMNT \$ MAX (PROV 1)
1846	1847	VSGL2CV	BNFT CVRG FOR EYE GLASSES (PROV 2)
1848	1849	VSGL2CIP	EYE GLASSES:% COINS (PROV 2)
1850	1851	VSGL2CPD	EYE GLASSES:AMNT COPAY (PROV 2)
1852	1854	VSGL2MXD	EYE GLASSES:AMNT \$ MAX (PROV 2)
1855	1856	VSGL3CV	BNFT CVRG FOR EYE GLASSES (PROV 3)
1857	1858	VSGL3CIP	EYE GLASSES:% COINS (PROV 3)
1859	1860	VSGL3CPD	EYE GLASSES:AMNT COPAY (PROV 3)
1861	1862	VSGL3MXD	EYE GLASSES:AMNT \$ MAX (PROV 3)

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DUID	DWELLING UNIT ID	5.0	NUM	1	5
	VALUE				UNWEIGHTED
	VALID ID				15,097
	TOTAL				15,097
PID	PERSON ID	3.0	NUM	6	8
	VALUE				UNWEIGHTED
	VALID ID				15,097
	TOTAL				15,097
DUPERSID	PERSON ID (DUID+PID)	8.0	CHAR	9	16
	VALUE				UNWEIGHTED
	VALID ID				15,097
	TOTAL				15,097
ESTRIDX	ESTABLISHMENT ID	11.0	CHAR	17	27
	VALUE				UNWEIGHTED
	VALID ID				15,097
	TOTAL				15,097
EPRSIDX	ESTABLISHMENT ID + POLICYHOLDER ID	22.0	CHAR	28	49
	VALUE				UNWEIGHTED
	VALID ID				15,097
	TOTAL				15,097
PHOLDER	POLICYHOLDER	1.0	NUM	50	50
	VALUE				UNWEIGHTED
	0 NO				7,524
	1 YES				7,573
	TOTAL				15,097
DEPDNT	DEPENDENT OF POLICYHOLDER	1.0	NUM	51	51
	VALUE				UNWEIGHTED
	0 NO				7,573
	1 YES				7,524
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AGE1X	AGE-RD1 (EDITED / IMPUTED)	1.0	NUM	52	52
	VALUE				UNWEIGHTED
	1 0-17				3,868
	2 18-64				9,658
	3 65+				1,571
	TOTAL				15,097
RACEX	RACE (EDITED / IMPUTED)	2.0	NUM	53	54
	VALUE				UNWEIGHTED
	1 AMERICAN INDIAN				163
	2 ALEUT, ESKIMO				16
	3 ASIAN/PACIFIC				429
	4 BLACK				1,714
	5 WHITE				12,769
	91 OTHER				6
	TOTAL				15,097
RACETHX	RACE/ETHNICITY (EDITED / IMPUTED)	1.0	NUM	55	55
	VALUE				UNWEIGHTED
	1 HISPANIC				2,008
	2 BLACK/NOT HISPANIC				1,625
	3 OTHER				11,464
	TOTAL				15,097
SEX	SEX	1.0	NUM	56	56
	VALUE				UNWEIGHTED
	1 MALE				7,219
	2 FEMALE				7,878
	TOTAL				15,097
OVLIMIT	OVERALL LIMIT INDICATOR	2.0	NUM	57	58
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				5,778
	2 NO				1,962
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OVDEDI	OVERALL INDIVIDUAL DEDUCTIBLE	4.0	NUM	59	62
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	0				1,909
	25-8000				3,869
	TOTAL				15,097
OVDEDF	OVERALL FAMILY DEDUCTIBLE	5.0	NUM	63	67
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	0				1,909
	75-24000				3,869
	TOTAL				15,097
OVRATE	OVERALL COINSURANCE RATE	3.0	NUM	68	70
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	0				1
	7-100				5,777
	TOTAL				15,097
OVPAYT	OVERALL PAYMENT TYPE	2.0	NUM	71	72
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	1 COINSURANCE				4,509
	2 COPAY				1,269
	TOTAL				15,097
OVMAXIY	OVERALL ANNUAL MAXIMUM	7.0	NUM	73	79
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				5,546
	1000-9999999				2,635
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OVMAXIL	OVERALL LIFETIME MAXIMUM	8.0	NUM	80	87
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,465
	25000-10000000				5,716
	TOTAL				15,097
OVMOOPI	OVERALL INDIVIDUAL OOP MAXIMUM	7.0	NUM	88	94
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	0				26
	20-9999999				5,752
	TOTAL				15,097
OVMOOPE	OVERALL FAMILY OOP MAXIMUM	7.0	NUM	95	101
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,403
	0				26
	20-9999999				5,752
	TOTAL				15,097
OOPDEDFL	FLAG: DEDUCTIBLE INCLUDED IN OOP LIMIT?	2.0	NUM	102	103
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,137
	1 YES				852
	2 NO				4,192
	TOTAL				15,097
HOSPCOV	HOSPITAL R / B COVERAGE INDICATOR	2.0	NUM	104	105
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				7,740
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HOSPDEDI	HOSPITAL R / B INDIVIDUAL DEDUCTIBLE	5.0	NUM	106	110
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	0				4,010
	25-35807				3,730
	TOTAL				15,097
FDEDIO_H	FLAG: HOSP. DED. INTERNAL / OVERALL	2.0	NUM	111	112
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	1 INTERNAL				4,312
	2 OVERALL				3,205
	3 BOTH				223
	TOTAL				15,097
HOSPRATE	HOSPITAL R / B COINSURANCE RATE	3.0	NUM	113	115
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	3-100				7,740
	TOTAL				15,097
HOSPPAYT	HOSPITAL R / B PAYMENT TYPE	2.0	NUM	116	117
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	1 COINSURANCE				7,403
	2 COPAY				185
	3 COPAY AND COINSURANCE				35
	4 DOLLAR MAX				117
	TOTAL				15,097
HOSPMAXY	HOSPITAL R / B ANNUAL MAXIMUM	7.0	NUM	118	124
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				3,124
	627-9999999				5,057
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
FMAXIO_H	FLAG: HOSP. ANN. MAX INTERNAL / OVERALL	2.0	NUM	125	126
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				3,124
	1 INTERNAL				4,247
	2 OVERALL				810
	TOTAL				15,097
HOSPMAXL	HOSPITAL R / B LIFETIME MAXIMUM	8.0	NUM	127	134
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				557
	25000-10000000				7,624
	TOTAL				15,097
HOSPMOOP	HOSPITAL R / B INTERNAL OOP MAXIMUM	4.0	NUM	135	138
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				8,090
	20-9999999				91
	TOTAL				15,097
FOOP_H	FLAG: HOSP OOP INTERNAL / OVERALL	2.0	NUM	139	140
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				8,090
	1 INTERNAL				60
	2 OVERALL				31
	TOTAL				15,097
HSPMAXNT	HOSPITAL R / B MAX NIGHTS / YEAR	7.0	NUM	141	147
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	5-9999999				7,740
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRVCOV	PHYSICIAN OFF. VIS. COVERAGE INDICATOR	2.0	NUM	148	149
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				7,662
	2 NO				78
	TOTAL				15,097
DRVDEDI	PHYSICIAN OFF. VIS. IND. DEDUCTIBLE	4.0	NUM	150	153
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				519
	0				4,881
	25-7500				2,781
	TOTAL				15,097
FDEDIO_P	FLAG: PHYS. DED. INTERNAL / OVERALL	2.0	NUM	154	155
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				519
	1 INTERNAL				4,546
	2 OVERALL				3,116
	TOTAL				15,097
DRVRATE	PHYSICIAN OFF. VIS. COINSURANCE RATE	3.0	NUM	156	158
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	0				79
	13-100				7,661
	TOTAL				15,097
DRVPAYT	PHYSICIAN OFF. VIS. PAYMENT TYPE	2.0	NUM	159	160
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				441
	1 COINSURANCE				3,378
	2 COPAY				4,266
	3 COPAY AND COINSURANCE				90
	4 DOLLAR MAX				6
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRVMAXIY	PHYSICIAN OFF. VIS. ANNUAL MAXIMUM	7.0	NUM	161	167
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				3,196
	125-9999999				4,985
	TOTAL				15,097
FMAXIO_P	FLAG: PHYS. ANN. MAX INTERNAL / OVERALL	2.0	NUM	168	169
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				3,196
	1 INTERNAL				2,930
	2 OVERALL				2,055
	TOTAL				15,097
DRVMAXIL	PHYSICIAN OFF. VIS. LIFETIME MAXIMUM	8.0	NUM	170	177
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				644
	25000-10000000				7,537
	TOTAL				15,097
DRVMAXVS	PHYSICIAN OFF. VIS. MAX VISITS / YEAR	7.0	NUM	178	184
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				519
	4-9999999				7,662
	TOTAL				15,097
DRGCOV	DRUG COVERAGE INDICATOR	2.0	NUM	185	186
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				6,107
	2 NO				2,074
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRGDEDI	DRUG INDIVIDUAL DEDUCTIBLE	4.0	NUM	187	190
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,074
	0				4,659
	15-6250				1,448
	TOTAL				15,097
FDEDIO_D	FLAG: DRUG. DED. INTERNAL / OVERALL	2.0	NUM	191	192
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,074
	1 INTERNAL				3,938
	2 OVERALL				2,152
	3 BOTH				17
	TOTAL				15,097
DRGRATE	DRUG COINSURANCE RATE	3.0	NUM	193	195
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				10
	0				2,064
	26-100				6,107
	TOTAL				15,097
DRGPAYT	DRUG PAYMENT TYPE	2.0	NUM	196	197
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,064
	1 COINSURANCE				1,882
	2 COPAY				4,153
	3 COPAY AND COINSURANCE				72
	5				10
	TOTAL				15,097
DRGMAXIY	DRUG ANNUAL MAXIMUM	7.0	NUM	198	204
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,897
	50-9999999				5,284
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
FMAXIO_D	FLAG: DRUG, ANN. MAX INTERNAL / OVERALL	2.0	NUM	205	206
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,910
	1 INTERNAL				4,907
	2 OVERALL				364
	TOTAL				15,097
DRGMAXIL	DRUG LIFETIME MAXIMUM	8.0	NUM	207	214
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				2,339
	25000-10000000				5,842
	TOTAL				15,097
DRGINOOP	FLAG: DRUGS INCLUDED IN OOP LIMIT?	2.0	NUM	215	216
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,192
	1 YES				2,215
	2 NO				1,774
	TOTAL				15,097
COVCOUNT	NUMBER OF POLICIES COVERING PERSON	1.0	NUM	217	217
	VALUE				UNWEIGHTED
	1				12,572
	2				2,340
	3				177
	4				8
	TOTAL				15,097
IOVDEDI	IMPUTATION FLAG FOR ODEDI	2.0	NUM	218	219
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,879
	1 IMPUTED				302
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
IOVDEDF	IMPUTATION FLAG FOR OVDEDF	2.0	NUM	220	221
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,423
	1 IMPUTED				758
	TOTAL				15,097
IOVRATE	IMPUTATION FLAG FOR OVRATE	2.0	NUM	222	223
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,175
	1 IMPUTED				6
	TOTAL				15,097
IOVMAXIY	IMPUTATION FLAG FOR OVMAXIY	2.0	NUM	224	225
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,181
	TOTAL				15,097
IOVMAXIL	IMPUTATION FLAG FOR OVMAXIL	2.0	NUM	226	227
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,169
	1 IMPUTED				12
	TOTAL				15,097
IOVMOOPI	IMPUTATION FLAG FOR OVMOOPI	2.0	NUM	228	229
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,646
	1 IMPUTED				535
	TOTAL				15,097
IOVMOOPF	IMPUTATION FLAG FOR OVMOOPF	2.0	NUM	230	231
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				6,608
	1 IMPUTED				1,573
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
IHSPRATE	IMPUTATION FLAG FOR HOSPRATE	2.0	NUM	232	233
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,093
	1 IMPUTED				88
	TOTAL				15,097
IHSPDEDI	IMPUTATION FLAG FOR HOSPDEDI	2.0	NUM	234	235
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,908
	1 IMPUTED				273
	TOTAL				15,097
IHSPMOOP	IMPUTATION FLAG FOR HOSPMOOP	2.0	NUM	236	237
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,951
	1 IMPUTED				230
	TOTAL				15,097
IHSPMAXY	IMPUTATION FLAG FOR HOSPMAXY	2.0	NUM	238	239
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,102
	1 IMPUTED				79
	TOTAL				15,097
IHSPMAXL	IMPUTATION FLAG FOR HOSPMAXL	2.0	NUM	240	241
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,169
	1 IMPUTED				12
	TOTAL				15,097
IDRVDEDI	IMPUTATION FLAG FOR DRVDEDI	2.0	NUM	242	243
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,920
	1 IMPUTED				261
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
IDRVRATE	IMPUTATION FLAG FOR DRVRATE	2.0	NUM	244	245
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,172
	1 IMPUTED				9
	TOTAL				15,097
IDRVMAXY	IMPUTATION FLAG FOR DRVMAXIY	2.0	NUM	246	247
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,181
	TOTAL				15,097
IDRVMAXL	IMPUTATION FLAG FOR DRVMAXIL	2.0	NUM	248	249
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				8,169
	1 IMPUTED				12
	TOTAL				15,097
IDRGRATE	IMPUTATION FLAG FOR DRGRATE	2.0	NUM	250	251
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,751
	1 IMPUTED				430
	TOTAL				15,097
IDRGDEDI	IMPUTATION FLAG FOR DRGDEDI	2.0	NUM	252	253
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,715
	1 IMPUTED				466
	TOTAL				15,097
IDRGMXY	IMPUTATION FLAG FOR DRGMXY	2.0	NUM	254	255
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,788
	1 IMPUTED				393
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
IDRGMAXL	IMPUTATION FLAG FOR DRGMAXIL	2.0	NUM	256	257
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	0 NOT IMPUTED				7,779
	1 IMPUTED				402
	TOTAL				15,097
ICIMP	FLAG: RECORD IMPUTED USING IC DATA	1.0	NUM	258	258
	VALUE				UNWEIGHTED
	0 NO				14,573
	1 YES				524
	TOTAL				15,097
MEDICAL	MEDICAL CVRG PROVIDED	2.0	NUM	259	260
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				7,740
	2 NO				441
	TOTAL				15,097
MEDIGAP	MEDIGAP CVRG PROVIDED	2.0	NUM	261	262
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				308
	2 NO				7,873
	TOTAL				15,097
DRUGS	PRESCRIPTION DRUG CVRG PROVIDED	2.0	NUM	263	264
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				6,132
	2 NO				2,049
	TOTAL				15,097
DENTAL	DENTAL CVRG PROVIDED	2.0	NUM	265	266
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				3,368
	2 NO				4,813
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VISION	VISION CVRG PROVIDED	2.0	NUM	267	268
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	1 YES				3,079
	2 NO				5,102
	TOTAL				15,097
PLANTYPE	TYPE PLAN FROM BKLT	2.0	NUM	269	270
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,507
	-1 NOT APPLICABLE				441
	1 TRAD FEE FOR SERVICE				349
	2 PREFD PROV ORGAN (PPO)				1,499
	3 HMO				1,753
	4 HMO W/ POINT OF SERVC (POS)				290
	5 EXCLUSIV PROV ORGANIZ (EPO)				43
	6 MEDICARE HMO				70
	7 MEDICAID HMO				5
	8 STAND BLUE CR/BLUE SHIELD				140
	TOTAL				15,097
PROVTYPE	TYPE PLAN AS DETERMINED BY PLAN CHAR	2.0	NUM	271	272
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				134
	1 EXCLUSIVE PROVIDER				2,577
	2 ANY PROVIDER				2,320
	3 MIX PREFERRED & ANY PROV				3,150
	TOTAL				15,097
LEVELS	LEVELS OF BNFTS FOR PLAN	2.0	NUM	273	274
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1				4,590
	2				3,001
	3				140
	4				5
	5				4
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
GATEKEEP	REQUIRE PRIM-CARE DR-REFER SPECIALIST	2.0	NUM	275	276
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				3,225
	2 NO				4,515
	TOTAL				15,097
GATELEV	LEVEL(S):REQ PRIM-CARE DR-REFER SPCLST	2.0	NUM	277	278
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,351
	1 ALL LEVELS				295
	2 ONE LEVEL				535
	TOTAL				15,097
REFOBGYN	REQUIRE PRIM-CARE DR-REFER OB-GYN	2.0	NUM	279	280
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				2,526
	2 NO				5,214
	TOTAL				15,097
HMOMODEL	HMO MODEL TYPE	2.0	NUM	281	282
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,331
	-1 NOT APPLICABLE				6,063
	1 GROUP/STAFF				260
	2 INDIVID PRACTICE ASSOC				733
	3 NETWORK				103
	4 MIXED MODEL				607
	TOTAL				15,097
HMOFEDQ	HMO FEDERALLY QUALIFIED	2.0	NUM	283	284
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,327
	-1 NOT APPLICABLE				6,063
	1 YES				1,144
	2 NO				563
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MMBASIC	BASIC W/SUPPLEMENTARY MAJ MED PLAN	2.0	NUM	285	286
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				318
	2 NO				7,422
	TOTAL				15,097
MEDCOORD	COORDINATION OF PLAN BNFTS W/MEDICARE	2.0	NUM	287	288
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,046
	-1 NOT APPLICABLE				7,885
	1 NO COB				7
	2 STANDARD COB				134
	3 BENEF REDUCD BY MCAR PAYM				22
	4 COV EXP REDUCD BY MCAR PAYM				3
	TOTAL				15,097
RESTRICT	RESTRICT CVRG OF PRE-EXISTING COND	2.0	NUM	289	290
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,910
	-1 NOT APPLICABLE				516
	1 YES, WITH TIME LIMIT				3,411
	2 YES, CONDS NEV COVRD				90
	3 NO				170
	TOTAL				15,097
CCNONE	COST CONTAIN: NONE	2.0	NUM	291	292
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				1,789
	2 NOT SELECTED				3,882
	TOTAL				15,097
CCPC	COST CONTAIN: PREADM CERTIFICATION	2.0	NUM	293	294
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				3,034
	2 NOT SELECTED				2,637
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
CCPRETST	COST CONTAIN: PREADMISSION TESTING	2.0	NUM	295	296
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				1,607
	2 NOT SELECTED				4,064
	TOTAL				15,097
CCUTIL	COST CONTAIN: UTILIZATION CONCUR REVU	2.0	NUM	297	298
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				1,261
	2 NOT SELECTED				4,410
	TOTAL				15,097
CCWKEND	COST CONTAIN:NON-EMRG WEEKEND ADM	2.0	NUM	299	300
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				143
	2 NOT SELECTED				5,528
	TOTAL				15,097
CCAUDIT	COST CONTAIN:PENLTY 4 ER OUT OF NET	2.0	NUM	301	302
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	2 NOT SELECTED				5,671
	TOTAL				15,097
CCSS	COST CONTAIN: 2ND SURGICAL OPINION	2.0	NUM	303	304
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				1,813
	2 NOT SELECTED				3,858
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
CCOUTSUR	COST CONTAIN: OUTPAT SURGRY INCENTV	2.0	NUM	305	306
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				90
	2 NOT SELECTED				5,581
	TOTAL				15,097
CCOTH	COST CONTAIN: OTHR	2.0	NUM	307	308
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,510
	1 SELECTED				3
	2 NOT SELECTED				5,668
	TOTAL				15,097
CCPCNOPN	PREADM CERT: NO PENALTY	2.0	NUM	309	310
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,147
	1 SELECTED				36
	2 NOT SELECTED				2,998
	TOTAL				15,097
CCPCNOCV	PREADM CERT: NO CVRG PROVIDED	2.0	NUM	311	312
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,147
	1 SELECTED				89
	2 NOT SELECTED				2,945
	TOTAL				15,097
CCPCDED	PREADM CERT: DEDUCT IMPOSE/INCREASE	2.0	NUM	313	314
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,414
	-1 NOT APPLICABLE				5,147
	1 SELECTED				1,511
	2 NOT SELECTED				1,025
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
CCPCCOIN	PREADM CERT: COINS REDUCED	2.0	NUM	315	316
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,414
	-1 NOT APPLICABLE				5,147
	1 SELECTED				920
	2 NOT SELECTED				1,616
	TOTAL				15,097
CCPCCOP	PREADM CERT: COPAY INCREASED	2.0	NUM	317	318
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,414
	-1 NOT APPLICABLE				5,147
	1 SELECTED				13
	2 NOT SELECTED				2,523
	TOTAL				15,097
CCPCOTH	PREADM CERT: OTHR	2.0	NUM	319	320
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,414
	-1 NOT APPLICABLE				5,147
	2 NOT SELECTED				2,536
	TOTAL				15,097
CCPCNS	PREADM CERT: NOT SPECIFIED	2.0	NUM	321	322
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,147
	1 SELECTED				498
	2 NOT SELECTED				2,536
	TOTAL				15,097
CCSSNOPN	PNLTY NO 2ND SURG OPIN: NO PENALTY	2.0	NUM	323	324
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,368
	1 SELECTED				325
	2 NOT SELECTED				1,488
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
CCSSNOCV	PNLTY NO 2ND SURG OPIN:NO CVRG PROVD	2.0	NUM	325	326
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,368
	1 SELECTED				24
	2 NOT SELECTED				1,789
	TOTAL				15,097
CCSSDED	PNLTY NO 2ND SURG OPIN: DEDUCT	2.0	NUM	327	328
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,368
	1 SELECTED				357
	2 NOT SELECTED				775
	TOTAL				15,097
CCSSCOIN	PNLTY NO 2ND SURG OPIN: COINS REDUCED	2.0	NUM	329	330
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,368
	1 SELECTED				431
	2 NOT SELECTED				701
	TOTAL				15,097
CCSSCOP	PNLTY NO 2ND SURG OPIN: COPAY INCREASED	2.0	NUM	331	332
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,368
	1 SELECTED				4
	2 NOT SELECTED				1,128
	TOTAL				15,097
CCSSLOW	PNLTY NO 2ND SRG OPIN:LOWER SCHD PAYMNT	2.0	NUM	333	334
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,368
	2 NOT SELECTED				1,132
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
CCSSOTH	PNLTY NO 2ND SURG OPIN: OTHR	2.0	NUM	335	336
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,368
	2 NOT SELECTED				1,132
	TOTAL				15,097
CCSSNS	PNLTY NO 2ND SURG OPIN: NOT SPECFD	2.0	NUM	337	338
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,368
	1 SELECTED				682
	2 NOT SELECTED				1,131
	TOTAL				15,097
APPEAL	APPEAL PROCESS PROVIDED FOR 1ST LVL	2.0	NUM	339	340
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				230
	1 YES, PLAN				3,206
	2 YES, EMPLOYER/GROUP				62
	3 NO				4,683
	TOTAL				15,097
APPEAL2L	2ND+ LEVEL(S) OF APPEAL PROVIDED IF	2.0	NUM	341	342
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,913
	1 YES, PLAN ONLY				1,335
	2 YES, EMPLOYER/GROUP ONLY				37
	3 YES, EXTERNAL ONLY				54
	4 YES, PLAN/EMPL/GRP & EXTRNL				1,282
	5 NO				560
	TOTAL				15,097
APINFO	INFO PROVIDED-WHERE TO SEND APPEAL	2.0	NUM	343	344
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,913
	1 YES, WITH NO DETAILS				255
	2 YES, W/ SPECIFIC DETAILS				2,896
	3 NO				117
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
APTME	TIME LIMITS SPECIFIED FOR THE APPEAL	2.0	NUM	345	346
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,913
	1 YES				3,031
	2 NO				237
	TOTAL				15,097
APEXPED	EXPEDITED PROCESS AVAILABLE-APPEAL	2.0	NUM	347	348
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,913
	1 YES, 1ST LEVEL				42
	2 YES, ALL LEVELS				28
	3 NO				3,198
	TOTAL				15,097
OVERLIMI	OVERALL LIMIT-IN	2.0	NUM	349	350
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 YES				5,778
	2 NO				1,962
	TOTAL				15,097
OVERLIMO	OVERALL LIMIT-OUT	2.0	NUM	351	352
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 YES				3,145
	2 NO				5
	TOTAL				15,097
DEDI	TYPE DEDUCT-IN	2.0	NUM	353	354
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,403
	1 NO DEDUCTIBLE				1,907
	2 PER YEAR				3,825
	3 DOLLAR AMT VARY BY EARNINGS				43
	4 PERCENT OF EARNINGS				2
	5 OTHER				1
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DEDIDI	INDIV DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN	4.0	NUM	355	358
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,217
	-1 NOT APPLICABLE				4,313
	25-15000				3,567
	TOTAL				15,097
DEDFDI	FAM DEDUCT:/YR \$ AMNT VARY BY ERNGS-IN	5.0	NUM	359	363
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,671
	-1 NOT APPLICABLE				4,313
	75-22500				3,113
	TOTAL				15,097
DEDNUMDI	# INDV 4 DEDUC:/YR \$ AMT VARY-ERNGS-IN	2.0	NUM	364	365
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,217
	-1 NOT APPLICABLE				4,313
	2				175
	3				386
	4				6
	TOTAL				15,097
DEDIPCTI	INDIV DEDUCT: PERCENT OF EARNINGS-IN	2.0	NUM	366	367
	VALUE				UNWEIGHTED
	-9 NOT ASCERTAINED				6,916
	-1 INAPPLICABLE				8,179
	1				2
	TOTAL				15,097
DEDFPCTI	FAM DEDUCT:PERCENT OF EARNINGS-IN	2.0	NUM	368	369
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,918
	-1 NOT APPLICABLE				8,179
	TOTAL				15,097
DEDNUMPI	# INDIV FOR DEDUCT:% OF EARNINGS-IN	2.0	NUM	370	371
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3				2
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DEDO	TYPE DEDUCT-OUT	2.0	NUM	372	373
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,036
	1 NO DEDUCTIBLE				207
	2 PER YEAR				2,890
	3 DOLLAR AMT VARY BY EARNINGS				47
	5 OTHER				1
	TOTAL				15,097
DEDIDO	INDIV DEDUCT:/YR \$ AMT VARY BY ERNGS-OUT	5.0	NUM	374	378
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,056
	-1 NOT APPLICABLE				5,244
	25-10000				2,797
	TOTAL				15,097
DEDFDO	FAMILY DEDUCT:/YR \$ AMT VARY-ERNGS-OUT	5.0	NUM	379	383
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,335
	-1 NOT APPLICABLE				5,244
	50-20000				2,518
	TOTAL				15,097
DEDNUMDO	# INDV 4 DEDUCT:/YR \$ AMT VARY-ERNGS-OUT	2.0	NUM	384	385
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,508
	-1 NOT APPLICABLE				5,244
	2				129
	3				216
	TOTAL				15,097
DEDIPCTO	INDIV DEDUCT:PERCENT OF EARNINGS-OUT	2.0	NUM	386	387
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DEDFPCTO	FAMILY DEDUCT:PERCENT OF EARNINGS-OUT	2.0	NUM	388	389
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DEDINUMO	# INDIV FOR DEDUCT:% OF EARNINGS-OUT	2.0	NUM	390	391
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
COICOPI	TYPE COINS/COPAY-IN	2.0	NUM	392	393
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,403
	1 COV AT 100%/\$0 COPAY				316
	2 COINSURANCE FIXED				4,106
	3 COINSURANCE VARIES				87
	4 COPAY FIXED				1,235
	5 COPAY VARIES				34
	TOTAL				15,097
COICOPPI	% COINS 4 COINS/COPAY:COINS FIX VARY-IN	3.0	NUM	394	396
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,921
	-1 NOT APPLICABLE				3,988
	50-100				4,188
	TOTAL				15,097
COICOPDI	AMT COPAY 4 COINS/COPAY:COPA FIX VARY-IN	2.0	NUM	397	398
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,917
	-1 NOT APPLICABLE				6,912
	1-99				1,268
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
COICOPO	TYPE COINS/COPAY-OUT	2.0	NUM	399	400
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,036
	1 COV AT 100%/\$0 COPAY				2
	2 COINSURANCE FIXED				3,090
	3 COINSURANCE VARIES				48
	4 COPAY FIXED				5
	TOTAL				15,097
COICOPPO	% COINS 4 COINS/COPAY:COINS FIX VARY-OUT	3.0	NUM	401	403
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,923
	-1 NOT APPLICABLE				5,043
	40-100				3,131
	TOTAL				15,097
COICOPDO	AMT COPA 4 COINS/COPAY:COPA FIX VARY-OUT	2.0	NUM	404	405
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,918
	-1 NOT APPLICABLE				8,176
	10-20				3
	TOTAL				15,097
OOPI	OOP LIMIT-IN	2.0	NUM	406	407
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,403
	1 YES				5,044
	2 NO				734
	TOTAL				15,097
OOPEARNI	OOP LIMIT BASED ON EARNINGS-IN	2.0	NUM	408	409
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,137
	1 YES				104
	2 NO				4,940
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPII	TYPE INDIV OOP LIMIT-IN	2.0	NUM	410	411
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,137
	1 EXPR AS OOP (INC LIM COPAY)				4,157
	2 EXPRESSED AS COV EXPENSE				864
	3 EXPRESSED AS BENEFITS PAID				16
	4 OTHER				7
	TOTAL				15,097
OOPIDI	AMNT INDIV OOP LIMIT-IN	5.0	NUM	412	416
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,210
	-1 NOT APPLICABLE				3,144
	100-25000				4,743
	TOTAL				15,097
OOPEI	TYPE FAMILY OOP LIMIT-IN	2.0	NUM	417	418
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,602
	-1 NOT APPLICABLE				3,137
	1 EXPR AS OOP (INC LIM COPAY)				3,661
	2 EXPRESSED AS COV EXPENSE				687
	3 EXPRESSED AS BENEFITS PAID				8
	4 OTHER				2
	TOTAL				15,097
OOPEDI	AMNT FAMILY OOP LIMIT-IN	5.0	NUM	419	423
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,296
	-1 NOT APPLICABLE				3,139
	200-75000				3,662
	TOTAL				15,097
OOPEDEI	DEDUCT INCLUDED IN THE OOP LIMIT-IN	2.0	NUM	424	425
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,688
	-1 NOT APPLICABLE				3,137
	1 YES				852
	2 NO				2,420
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPAPPI	ALL BENETS APPLY TO THE OOP LIMIT-IN	2.0	NUM	426	427
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,137
	1 YES				1,593
	2 NO				3,451
	TOTAL				15,097
OOPMHI	MNTL HLTH DOES NOT APPLY OOP LIMIT-IN	2.0	NUM	428	429
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	1 SELECTED				1,623
	2 NOT SELECTED				1,828
	TOTAL				15,097
OOPADI	ALC/DRUGS DOES NOT APPLY OOP LIMIT-IN	2.0	NUM	430	431
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	1 SELECTED				1,328
	2 NOT SELECTED				2,123
	TOTAL				15,097
OOPDRUGI	DRUGS DOES NOT APPLY OOP LIMIT-IN	2.0	NUM	432	433
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	1 SELECTED				2,231
	2 NOT SELECTED				1,220
	TOTAL				15,097
OOPDENTI	DENTAL DOES NOT APPLY OOP LIMIT-IN	2.0	NUM	434	435
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	1 SELECTED				1,743
	2 NOT SELECTED				1,708
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPVISI	VISION DOES NOT APPLY OOP LIMIT-IN	2.0	NUM	436	437
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	1 SELECTED				671
	2 NOT SELECTED				2,780
	TOTAL				15,097
OOPOTHI	OTHR BNETS DO NOT APPLY TO OOP LIMIT-IN	2.0	NUM	438	439
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,730
	2 NOT SELECTED				3,451
	TOTAL				15,097
OOPPO	OOP LIMIT-OUT	2.0	NUM	440	441
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,036
	1 YES				2,905
	2 NO				240
	TOTAL				15,097
OOPPEARNO	OOP LIMIT BASED ON EARNINGS-OUT	2.0	NUM	442	443
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,276
	1 YES				63
	2 NO				2,842
	TOTAL				15,097
OOPPIO	TYPE INDIV OOP LIMIT-OUT	2.0	NUM	444	445
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,276
	1 EXPR AS OOP (INC LIM COPAY)				2,471
	2 EXPRESSED AS COV EXPENSE				417
	3 EXPRESSED AS BENEFITS PAID				10
	4 OTHER				7
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPIDO	AMNT INDIV OOP LIMIT-OUT	5.0	NUM	446	450
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,044
	-1 NOT APPLICABLE				5,283
	85-50000				2,770
	TOTAL				15,097
OOPEFO	TYPE FAMILY OOP LIMIT-OUT	2.0	NUM	451	452
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,331
	-1 NOT APPLICABLE				5,276
	1 EXPR AS OOP (INC LIM COPAY)				2,132
	2 EXPRESSED AS COV EXPENSE				358
	TOTAL				15,097
OOPEFO	AMNT FAMILY OOP LIMIT-OUT	6.0	NUM	453	458
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,646
	-1 NOT APPLICABLE				5,276
	400-100000				2,175
	TOTAL				15,097
OOPDED0	DEDUCT INCLUDED IN THE OOP LIMIT-OUT	2.0	NUM	459	460
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,066
	-1 NOT APPLICABLE				5,276
	1 YES				722
	2 NO				1,033
	TOTAL				15,097
OOPAPPO	ALL BNFTS APPLY TO THE OOP LIMIT-OUT	2.0	NUM	461	462
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,276
	1 YES				808
	2 NO				2,097
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPMHO	MNTL HLTH DOES NOT APPLY OOP LIMIT-OUT	2.0	NUM	463	464
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	1 SELECTED				1,018
	2 NOT SELECTED				1,079
	TOTAL				15,097
OOPADO	ALC/DRUGS DOES NOT APPLY OOP LIMIT-OUT	2.0	NUM	465	466
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	1 SELECTED				882
	2 NOT SELECTED				1,215
	TOTAL				15,097
OOPDRUGO	DRUGS DOES NOT APPLY OOP LIMIT-OUT	2.0	NUM	467	468
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	1 SELECTED				1,482
	2 NOT SELECTED				615
	TOTAL				15,097
OOPDENTO	DENTAL DOES NOT APPLY OOP LIMIT-OUT	2.0	NUM	469	470
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	1 SELECTED				1,125
	2 NOT SELECTED				972
	TOTAL				15,097
OOPVISO	VISION DOES NOT APPLY OOP LIMIT-OUT	2.0	NUM	471	472
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	1 SELECTED				386
	2 NOT SELECTED				1,711
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OOPOTH0	OTHR BNETS DO NOT APPLY OOP LIMIT-OUT	2.0	NUM	473	474
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,084
	2 NOT SELECTED				2,097
	TOTAL				15,097
MAXNONEI	NO PLAN MAX-IN	2.0	NUM	475	476
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,403
	1 SELECTED				656
	2 NOT SELECTED				5,122
	TOTAL				15,097
MAXLIFT	LIFETIME MAX-IN	2.0	NUM	477	478
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,780
	-1 NOT APPLICABLE				2,403
	1 SELECTED				3,196
	2 NOT SELECTED				718
	TOTAL				15,097
MAXCYI	CONFIN/YEAR MAX-IN	2.0	NUM	479	480
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,780
	-1 NOT APPLICABLE				2,403
	1 SELECTED				115
	2 NOT SELECTED				3,799
	TOTAL				15,097
MAXOTHI	OTHR PLAN MAX-IN	2.0	NUM	481	482
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,780
	-1 NOT APPLICABLE				2,403
	2 NOT SELECTED				3,914
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MAXNSI	PLAN MAX NOT SPECIFIED-IN	2.0	NUM	483	484
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,403
	1 SELECTED				1,864
	2 NOT SELECTED				3,914
	TOTAL				15,097
MAXLIEDI	AMNT LIFETIME MAX-IN	8.0	NUM	485	492
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,792
	-1 NOT APPLICABLE				3,121
	25000-10000000				3,184
	TOTAL				15,097
MAXCYDI	AMNT /CONFIN/YEAR MAX-IN	7.0	NUM	493	499
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,780
	-1 NOT APPLICABLE				6,202
	1000-1500000				115
	TOTAL				15,097
MAXNONEQ	NO PLAN MAX-OUT	2.0	NUM	500	501
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,036
	1 SELECTED				315
	2 NOT SELECTED				2,830
	TOTAL				15,097
MAXLIFO	LIFETIME MAX-OUT	2.0	NUM	502	503
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,786
	-1 NOT APPLICABLE				5,036
	1 SELECTED				1,950
	2 NOT SELECTED				325
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MAXCYO	/CONFIN/YEAR MAX-OUT	2.0	NUM	504	505
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,786
	-1 NOT APPLICABLE				5,036
	1 SELECTED				45
	2 NOT SELECTED				2,230
	TOTAL				15,097
MAXOTHO	OTHR PLAN MAX-OUT	2.0	NUM	506	507
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,786
	-1 NOT APPLICABLE				5,036
	2 NOT SELECTED				2,275
	TOTAL				15,097
MAXNSO	PLAN MAX NOT SPECIFIED-OUT	2.0	NUM	508	509
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,036
	1 SELECTED				870
	2 NOT SELECTED				2,275
	TOTAL				15,097
MAXLIFDO	AMNT LIFETIME MAX-OUT	8.0	NUM	510	517
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,790
	-1 NOT APPLICABLE				5,361
	25000-10000000				1,946
	TOTAL				15,097
MAXCYDO	AMNT /CONFIN/YEAR MAX-OUT	7.0	NUM	518	524
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,786
	-1 NOT APPLICABLE				7,266
	5000-1000000				45
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSCOV1	BNFT CVRG FOR HOSP R/B-IN	2.0	NUM	525	526
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				3,123
	4 INTERNAL LIMITS ONLY				521
	5 OVERALL LIMITS ONLY				3,043
	6 INTERNAL AND OVERALL LIMITS				1,053
	TOTAL				15,097
ISCOV1	BNFT CVRG FOR INPAT SURGERY-IN	2.0	NUM	527	528
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				2,885
	2 COVERED, NO DETAILS				35
	4 INTERNAL LIMITS ONLY				127
	5 OVERALL LIMITS ONLY				3,385
	6 INTERNAL AND OVERALL LIMITS				415
	7 NOT COVERED				6
	TOTAL				15,097
OSCOV1	BNFT CVRG FOR OUTPAT SURGERY-IN	2.0	NUM	529	530
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,551
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				863
	2 COVERED, NO DETAILS				13
	4 INTERNAL LIMITS ONLY				391
	5 OVERALL LIMITS ONLY				981
	6 INTERNAL AND OVERALL LIMITS				273
	7 NOT COVERED				52
	8 COV SAME AS INPATIENT SURG				4,532
	TOTAL				15,097
OFCOV1	BNFT CVRG FOR DR OFC VSTS-IN	2.0	NUM	531	532
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				514
	4 INTERNAL LIMITS ONLY				2,299
	5 OVERALL LIMITS ONLY				3,753
	6 INTERNAL AND OVERALL LIMITS				1,096
	7 NOT COVERED				78
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBCOVI	BNFT CVRG FOR WELL BABY-IN	2.0	NUM	533	534
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				825
	2 COVERED, NO DETAILS				38
	4 INTERNAL LIMITS ONLY				425
	5 OVERALL LIMITS ONLY				603
	6 INTERNAL AND OVERALL LIMITS				545
	7 NOT COVERED				326
	9 COV SAME AS PHYSICIAN OFFICE				2,620
	TOTAL				15,097
HICOVI	BNFT CVRG FOR HOME HEALTH CARE-IN	2.0	NUM	535	536
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				1,961
	2 COVERED, NO DETAILS				89
	4 INTERNAL LIMITS ONLY				1,013
	5 OVERALL LIMITS ONLY				1,236
	6 INTERNAL AND OVERALL LIMITS				1,759
	7 NOT COVERED				426
	TOTAL				15,097
MICOVI	BNFT CVRG FOR MNTH HLTH INPAT-IN	2.0	NUM	537	538
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				239
	2 COVERED, NO DETAILS				284
	4 INTERNAL LIMITS ONLY				2,763
	5 OVERALL LIMITS ONLY				600
	6 INTERNAL AND OVERALL LIMITS				2,710
	7 NOT COVERED				139
	10 COV SAME AS HOSP ROOM				324
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MOCOVI	BNFT CVRG FOR MNTH HLTH OUTPAT-IN	2.0	NUM	539	540
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				89
	2 COVERED, NO DETAILS				254
	4 INTERNAL LIMITS ONLY				2,623
	5 OVERALL LIMITS ONLY				290
	6 INTERNAL AND OVERALL LIMITS				3,712
	7 NOT COVERED				100
	9 COV SAME AS PHYSICIAN OFFICE				80
	TOTAL				15,097
ADCOVI	BNFT CVRG FOR ALC/DRUG INPAT DETOX-IN	2.0	NUM	541	542
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,868
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				366
	2 COVERED, NO DETAILS				186
	4 INTERNAL LIMITS ONLY				768
	5 OVERALL LIMITS ONLY				147
	6 INTERNAL AND OVERALL LIMITS				551
	7 NOT COVERED				94
	10 COV SAME AS HOSP ROOM				444
	11 COV SAME AS MNTH HLTH INPAT				2,232
	TOTAL				15,097
ARCOVI	BNFT CVRG FOR ALC/DRUG INPAT REHAB-IN	2.0	NUM	543	544
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,137
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				181
	2 COVERED, NO DETAILS				197
	4 INTERNAL LIMITS ONLY				1,313
	5 OVERALL LIMITS ONLY				181
	6 INTERNAL AND OVERALL LIMITS				812
	7 NOT COVERED				223
	10 COV SAME AS HOSP ROOM				316
	11 COV SAME AS MNTH HLTH INPAT				3,296
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AOCOVI	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-IN	2.0	NUM	545	546
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,154
	-1 NOT APPLICABLE				441
	1 COVERED IN FULL				116
	2 COVERED, NO DETAILS				213
	4 INTERNAL LIMITS ONLY				1,043
	5 OVERALL LIMITS ONLY				221
	6 INTERNAL AND OVERALL LIMITS				895
	7 NOT COVERED				187
	9 COV SAME AS PHYSICIAN OFFICE				215
	12 COV SAME AS MENTAL HEALTH				3,612
	TOTAL				15,097
HSCOVO	BNFT CVRG FOR HOSP R/B-OUT	2.0	NUM	547	548
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 COVERED IN FULL				79
	4 INTERNAL LIMITS ONLY				380
	5 OVERALL LIMITS ONLY				2,130
	6 INTERNAL AND OVERALL LIMITS				553
	7 NOT COVERED				8
	TOTAL				15,097
ISCOVO	BNFT CVRG FOR INPAT SURGERY-OUT	2.0	NUM	549	550
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				5,031
	1 COVERED IN FULL				27
	2 COVERED, NO DETAILS				9
	4 INTERNAL LIMITS ONLY				22
	5 OVERALL LIMITS ONLY				2,588
	6 INTERNAL AND OVERALL LIMITS				96
	7 NOT COVERED				5
	TOTAL				15,097
OSCOVO	BNFT CVRG FOR OUTPAT SURGERY-OUT	2.0	NUM	551	552
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,189
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,849
	7 NOT COVERED				28
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OFCOVO	BNFT CVRG FOR DR OFC VSTS-OUT	2.0	NUM	553	554
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				5,031
	1 COVERED IN FULL				6
	4 INTERNAL LIMITS ONLY				48
	5 OVERALL LIMITS ONLY				2,793
	6 INTERNAL AND OVERALL LIMITS				221
	7 NOT COVERED				73
	TOTAL				15,097
WBCOVO	BNFT CVRG FOR WELL BABY-OUT	2.0	NUM	555	556
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,812
	-1 NOT APPLICABLE				5,031
	1 COVERED IN FULL				92
	2 COVERED, NO DETAILS				14
	4 INTERNAL LIMITS ONLY				43
	5 OVERALL LIMITS ONLY				442
	6 INTERNAL AND OVERALL LIMITS				362
	7 NOT COVERED				826
	9 COV SAME AS PHYSICIAN OFFICE				475
	TOTAL				15,097
HHCOVO	BNFT CVRG FOR HOME HEALTH CARE-OUT	2.0	NUM	557	558
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,402
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,226
	7 NOT COVERED				438
	TOTAL				15,097
MICOVO	BNFT CVRG FOR MNTL HLTH INPAT-OUT	2.0	NUM	559	560
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,196
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,682
	7 NOT COVERED				188
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MOCOVO	BNFT CVRG FOR MNTH HLTH OUTPAT-OUT	2.0	NUM	561	562
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,177
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,722
	7 NOT COVERED				167
	TOTAL				15,097
ADCOVO	BNFT CVRG FOR ALC/DRUG INPAT DETOX-OUT	2.0	NUM	563	564
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,387
	-1 NOT APPLICABLE				5,031
	3 COVERED				1,491
	7 NOT COVERED				188
	TOTAL				15,097
ARCOVO	BNFT CVRG FOR ALC/DRUG INPAT REHAB-OUT	2.0	NUM	565	566
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,384
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,470
	7 NOT COVERED				212
	TOTAL				15,097
AOCOVO	BNFT CVRG FOR ALC/DRUG OUTPAT REHAB-OUT	2.0	NUM	567	568
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,358
	-1 NOT APPLICABLE				5,031
	3 COVERED				2,493
	7 NOT COVERED				215
	TOTAL				15,097
ADSAME	ALC/DRUG BNFTS SAME AS EACH OTHR	2.0	NUM	569	570
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				1,307
	1 YES				6,611
	2 NO				263
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADMDMX	\$ LIFE MAX FOR MN TL HLTH,ALCOHOL/DRUGS	2.0	NUM	571	572
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				725
	1 YES				2,534
	2 NO				4,922
	TOTAL				15,097
ADMDMXD	AMNT \$ LIFE MAX-MN TL HLTH,ALCOHOL/DRUGS	6.0	NUM	573	578
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,931
	-1 NOT APPLICABLE				5,647
	2000-500000				2,519
	TOTAL				15,097
ADMDMXAL	ALL MH,ALCOHOL/DRUGS APPLY 2 \$ LIFE MAX	2.0	NUM	579	580
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,647
	1 SELECTED				1,151
	2 NOT SELECTED				1,383
	TOTAL				15,097
ADMDMXMI	MN TL HLTH INPAT APPLIES \$ LIFE MAX	2.0	NUM	581	582
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,704
	1 SELECTED				2,183
	2 NOT SELECTED				294
	TOTAL				15,097
ADMDMXMO	MN TL HLTH OUTPAT APPLIES \$ LIFE MAX	2.0	NUM	583	584
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,704
	1 SELECTED				2,178
	2 NOT SELECTED				299
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADMDMXAD	ALC/DRUG INPAT DETOX APPLIES \$ LIFE MAX	2.0	NUM	585	586
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,573
	1 SELECTED				1,397
	2 NOT SELECTED				211
	TOTAL				15,097
ADMDMXAR	ALC/DRUG INPAT REHAB APPLIES \$ LIFE MAX	2.0	NUM	587	588
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,906
	1 SELECTED				1,941
	2 NOT SELECTED				334
	TOTAL				15,097
ADMDMXAO	ALC/DRUG OUTP REHAB APPLIES \$ LIFE MAX	2.0	NUM	589	590
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,952
	1 SELECTED				1,894
	2 NOT SELECTED				335
	TOTAL				15,097
ADMVMX	DAY/VISIT LIFE MAXS 4 MH,ALCOHOL,DRUGS	2.0	NUM	591	592
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				725
	1 YES				1,726
	2 NO				5,730
	TOTAL				15,097
ADMVMXAL	ALL MH,ALCOHOL,DRUG-DAY/VST LIFE MAX	2.0	NUM	593	594
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,455
	1 SELECTED				568
	2 NOT SELECTED				1,158
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADMVMXMI	MH INPAT APPLIES 2 DAY/VISIT LIFE MAX	2.0	NUM	595	596
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,494
	1 SELECTED				790
	2 NOT SELECTED				897
	TOTAL				15,097
ADMVMXMO	MH OUTPAT APPLIES 2 DAY/VST LIFE MAX	2.0	NUM	597	598
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,492
	1 SELECTED				674
	2 NOT SELECTED				1,015
	TOTAL				15,097
ADMVMXAD	ALC/DRUG INPAT DETOX-DAY/VISIT LIFE MAX	2.0	NUM	599	600
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,068
	1 SELECTED				997
	2 NOT SELECTED				116
	TOTAL				15,097
ADMVMXAR	ALC/DRUG INPAT REHAB-DAY/VISIT LIFE MAX	2.0	NUM	601	602
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,546
	1 SELECTED				1,562
	2 NOT SELECTED				73
	TOTAL				15,097
ADMVMXAO	ALC/DRUG OUTPAT REHAB-DAY/VISIT LIFE MAX	2.0	NUM	603	604
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,547
	1 SELECTED				972
	2 NOT SELECTED				662
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHNONEI	NO OTHR BNFT INCLUDED IN PLAN DESC-IN	2.0	NUM	605	606
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				155
	2 NOT SELECTED				7,585
	TOTAL				15,097
OTHIPI	INPAT DR-IN	2.0	NUM	607	608
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				6,668
	2 NOT SELECTED				1,072
	TOTAL				15,097
OTHPCVI	INPAT DR'S CHARGES CVRG-IN	2.0	NUM	609	610
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,673
	-1 NOT APPLICABLE				1,513
	1 COV SAME AS INPATIENT SURG				5,695
	2 COV DIFF FR INPATIENT SURG				216
	TOTAL				15,097
OTHXRAYI	DIAGNOSTIC X-RAYS AND LAB-IN	2.0	NUM	611	612
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				7,013
	2 NOT SELECTED				727
	TOTAL				15,097
OTHMAMI	ROUTINE MAMMOGRAMS-IN	2.0	NUM	613	614
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,202
	2 NOT SELECTED				3,538
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHPEI	ADULT ROUTINE PHYSICAL EXAMS-IN	2.0	NUM	615	616
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,948
	2 NOT SELECTED				2,792
	TOTAL				15,097
OTHPAPI	ROUTINE PAP SMEARS-IN	2.0	NUM	617	618
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,587
	2 NOT SELECTED				3,153
	TOTAL				15,097
OTHPRENI	OFC VSTS FOR PRENATAL CARE-IN	2.0	NUM	619	620
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,602
	2 NOT SELECTED				3,138
	TOTAL				15,097
OTHAIMI	ADULT IMMUNIZATIONS-IN	2.0	NUM	621	622
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,244
	2 NOT SELECTED				3,496
	TOTAL				15,097
OTHCIMI	CHILD IMMUNIZATIONS-IN	2.0	NUM	623	624
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				4,993
	2 NOT SELECTED				2,747
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHWCCI	WELL-CHILD CARE, 2-4 YEARS-IN	2.0	NUM	625	626
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				3,890
	2 NOT SELECTED				3,850
	TOTAL				15,097
OTHCHIRI	CHIROPRACTIC CARE-IN	2.0	NUM	627	628
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				3,004
	2 NOT SELECTED				4,736
	TOTAL				15,097
OTHNONPI	OTHR_NON-DR PROVIDERS-IN	2.0	NUM	629	630
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				6,089
	2 NOT SELECTED				1,651
	TOTAL				15,097
OTHCONVI	REHABILITATION FACILITY-IN	2.0	NUM	631	632
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				2,089
	2 NOT SELECTED				5,651
	TOTAL				15,097
OTHSNFI	EXTENDED CARE/SNF-IN	2.0	NUM	633	634
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				6,069
	2 NOT SELECTED				1,671
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHHOSPI	HOSPICE CARE-IN	2.0	NUM	635	636
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				441
	1 SELECTED				5,163
	2 NOT SELECTED				2,577
	TOTAL				15,097
OTHNONEO	NO OTHR BNFT INCLUDED IN PLAN DESC-OUT	2.0	NUM	637	638
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				103
	2 NOT SELECTED				3,047
	TOTAL				15,097
OTHIPO	INPAT DR-OUT	2.0	NUM	639	640
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				2,698
	2 NOT SELECTED				452
	TOTAL				15,097
OTHIPCVO	INPAT DR'S CHARGES CVRG-OUT	2.0	NUM	641	642
	VALUE				UNWEIGHTED
	-1 NOT SPECIFIED				7,204
	-1 NOT APPLICABLE				5,483
	1 COV SAME AS INPATIENT SURG				2,336
	2 COV DIFF FR INPATIENT SURG				74
	TOTAL				15,097
OTHXRAYO	DIAGNOSTIC X-RAYS AND LAB-OUT	2.0	NUM	643	644
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				2,762
	2 NOT SELECTED				388
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHMAMO	ROUTINE MAMMOGRAMS-OUT	2.0	NUM	645	646
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,748
	2 NOT SELECTED				1,402
	TOTAL				15,097
OTHPEO	ADULT ROUTINE PHYSICAL EXAMS-OUT	2.0	NUM	647	648
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,220
	2 NOT SELECTED				1,930
	TOTAL				15,097
OTHPAPO	ROUTINE PAP SMEARS-OUT	2.0	NUM	649	650
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,691
	2 NOT SELECTED				1,459
	TOTAL				15,097
OTHPRENO	OFC VSTS FOR PRENATAL CARE-OUT	2.0	NUM	651	652
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,708
	2 NOT SELECTED				1,442
	TOTAL				15,097
OTHAIMO	ADULT IMMUNIZATIONS-OUT	2.0	NUM	653	654
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,181
	2 NOT SELECTED				1,969
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHCI MO	CHILD IMMUNIZATIONS-OUT	2.0	NUM	655	656
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,628
	2 NOT SELECTED				1,522
	TOTAL				15,097
OTHWCCO	WELL-CHILD CARE, 2-4 YEARS-OUT	2.0	NUM	657	658
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,146
	2 NOT SELECTED				2,004
	TOTAL				15,097
OTHCHIRO	CHIROPRACTIC CARE-OUT	2.0	NUM	659	660
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				1,276
	2 NOT SELECTED				1,874
	TOTAL				15,097
OTHNONPO	OTHR NON-DR PROVIDERS-OUT	2.0	NUM	661	662
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				2,381
	2 NOT SELECTED				769
	TOTAL				15,097
OTHCONVO	CONVALESCENT-OUT	2.0	NUM	663	664
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				758
	2 NOT SELECTED				2,392
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OTHSNFO	EXTENDED CARE/SNF-OUT	2.0	NUM	665	666
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				2,411
	2 NOT SELECTED				739
	TOTAL				15,097
OTHHOSPO	HOSPICE CARE-OUT	2.0	NUM	667	668
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,031
	1 SELECTED				2,171
	2 NOT SELECTED				979
	TOTAL				15,097
HSALLOI	HOSP R/B ALL LIMIT:ALL-IN	2.0	NUM	669	670
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,085
	1 SELECTED				2,064
	2 NOT SELECTED				2,032
	TOTAL				15,097
HSDEDOI	HOSP R/B ALL LIMIT:DEDUCT-IN	2.0	NUM	671	672
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,085
	1 SELECTED				3,157
	2 NOT SELECTED				939
	TOTAL				15,097
HSCOINOI	HOSP R/B ALL LIMIT:COINS/COPAY-IN	2.0	NUM	673	674
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,085
	1 SELECTED				3,505
	2 NOT SELECTED				591
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HOOPOI	HOSP R/B ALL LIMIT:OOP LIMIT-IN	2.0	NUM	675	676
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,085
	1 SELECTED				3,464
	2 NOT SELECTED				632
	TOTAL				15,097
HSMAXOI	HOSP R/B ALL LIMIT:PLAN MAX-IN	2.0	NUM	677	678
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,625
	-1 NOT APPLICABLE				4,085
	1 SELECTED				2,939
	2 NOT SELECTED				448
	TOTAL				15,097
HSDEDII	HOSP R/B INTRN LIMIT:DEDUCT-IN	2.0	NUM	679	680
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	1 SELECTED				913
	2 NOT SELECTED				661
	TOTAL				15,097
HSCOINII	HOSP R/B INTRN LIMIT:COINS-IN	2.0	NUM	681	682
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	1 SELECTED				549
	2 NOT SELECTED				1,025
	TOTAL				15,097
HOOPII	HOSP R/B INTRN LIMIT:OOP LIMIT-IN	2.0	NUM	683	684
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	1 SELECTED				91
	2 NOT SELECTED				1,483
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSMAXNII	HOSP R/B INTRN LIMIT:DAY MAX-IN	2.0	NUM	685	686
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	1 SELECTED				282
	2 NOT SELECTED				1,292
	TOTAL				15,097
HSMAXDII	HOSP R/B INTRN LIMIT:\$ MAX-IN	2.0	NUM	687	688
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	1 SELECTED				160
	2 NOT SELECTED				1,414
	TOTAL				15,097
HSOTHII	HOSP R/B INTRN LIMIT:OTHR-IN	2.0	NUM	689	690
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,607
	2 NOT SELECTED				1,574
	TOTAL				15,097
HSDEDCYI	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-IN	2.0	NUM	691	692
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				7,268
	1 SELECTED				772
	2 NOT SELECTED				138
	TOTAL				15,097
HSDEDFEI	HOSP R/B TYPE DEDUCT:/DAY FIX-IN	2.0	NUM	693	694
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				7,268
	1 SELECTED				153
	2 NOT SELECTED				757
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSDEDDVI	HOSP R/B TYPE DEDUCT:/DAY VARY-IN	2.0	NUM	695	696
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				7,268
	1 SELECTED				11
	2 NOT SELECTED				899
	TOTAL				15,097
HSDEDDYI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN	2.0	NUM	697	698
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				7,268
	1 SELECTED				42
	2 NOT SELECTED				868
	TOTAL				15,097
HSDEDNSI	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-IN	2.0	NUM	699	700
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,268
	1 SELECTED				3
	2 NOT SELECTED				910
	TOTAL				15,097
HSDECYDI	HSP R/B TYP DEDUC:AMT DEDUC/CONFIN/YR-IN	3.0	NUM	701	703
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,927
	-1 NOT APPLICABLE				7,406
	25-550				764
	TOTAL				15,097
HSDEDFDI	HSP RB TYP DEDUC:AMT DED/DAY FIX VARY-IN	3.0	NUM	704	706
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				8,014
	25-350				164
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSDEYNI	HOSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-IN	2.0	NUM	707	708
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				8,136
	3-31				42
	TOTAL				15,097
HSCOINI	HOSP R/B TYPE COINS-IN	2.0	NUM	709	710
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,632
	1 FIXED				517
	2 VARIES				32
	TOTAL				15,097
HSCOINPI	HOSP R/B % COINS-IN	3.0	NUM	711	713
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,921
	-1 NOT APPLICABLE				7,632
	50-100				544
	TOTAL				15,097
HSOOPDI	HOSP R/B AMNT OOP LIMIT-IN	4.0	NUM	714	717
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,920
	-1 NOT APPLICABLE				8,090
	200-1500				87
	TOTAL				15,097
HSMXCYN1	HOSP R/B DAY MAX:MAX # DAYS/CONFIN/YR-IN	3.0	NUM	718	720
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,899
	5-730				282
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSMXCXYI	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-IN	2.0	NUM	721	722
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,021
	1 SELECTED				128
	2 NOT SELECTED				32
	TOTAL				15,097
HSMXDYI	HOSP R/B TYPE \$ MAX:/DAY-IN	2.0	NUM	723	724
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,021
	1 SELECTED				38
	2 NOT SELECTED				122
	TOTAL				15,097
HSMXNSI	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-IN	2.0	NUM	725	726
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,021
	2 NOT SELECTED				160
	TOTAL				15,097
HSMXCYDI	HSP R/B TYP \$ MAX:AMT \$ MAX/CONFIN/YR-IN	6.0	NUM	727	732
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,053
	100-250000				128
	TOTAL				15,097
HSMXDYDI	HOSP R/B TYPE \$ MAX:AMT \$ MAX/DAY-IN	3.0	NUM	733	735
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				8,143
	35-500				35
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSALLOO	HOSP R/B ALL LIMIT:ALL-OUT	2.0	NUM	736	737
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,498
	1 SELECTED				1,597
	2 NOT SELECTED				1,086
	TOTAL				15,097
HSDEDOO	HOSP R/B ALL LIMIT:DEDUCT-OUT	2.0	NUM	738	739
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,498
	1 SELECTED				2,471
	2 NOT SELECTED				212
	TOTAL				15,097
HSCOINOO	HOSP R/B ALL LIMIT:COINS/COPAY-OUT	2.0	NUM	740	741
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,498
	1 SELECTED				2,608
	2 NOT SELECTED				75
	TOTAL				15,097
HOOPOO	HOSP R/B ALL LIMIT:OOP LIMIT-OUT	2.0	NUM	742	743
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,498
	1 SELECTED				2,409
	2 NOT SELECTED				274
	TOTAL				15,097
HSMAXOO	HOSP R/B ALL LIMIT:PLAN MAX-OUT	2.0	NUM	744	745
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,374
	-1 NOT APPLICABLE				5,498
	1 SELECTED				1,904
	2 NOT SELECTED				321
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSDEDIO	HOSP R/B INTRN LIMIT:DEDUCT-OUT	2.0	NUM	746	747
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	1 SELECTED				801
	2 NOT SELECTED				133
	TOTAL				15,097
HSCOINIO	HOSP R/B INTRN LIMIT:COINS-OUT	2.0	NUM	748	749
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	1 SELECTED				444
	2 NOT SELECTED				490
	TOTAL				15,097
HSSOOPIO	HOSP R/B INTRN LIMIT:OOP LIMIT-OUT	2.0	NUM	750	751
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	1 SELECTED				9
	2 NOT SELECTED				925
	TOTAL				15,097
HSMAXNIO	HOSP R/B INTRN LIMIT:DAY MAX-OUT	2.0	NUM	752	753
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	1 SELECTED				67
	2 NOT SELECTED				867
	TOTAL				15,097
HSMAXDIO	HOSP R/B INTRN LIMIT:\$ MAX-OUT	2.0	NUM	754	755
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	1 SELECTED				34
	2 NOT SELECTED				900
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSOTHIO	HOSP R/B INTRN LIMIT:OTHR-OUT	2.0	NUM	756	757
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,247
	2 NOT SELECTED				934
	TOTAL				15,097
HSDEDCYO	HOSP R/B TYPE DEDUCT:/CONFIN/YEAR-OUT	2.0	NUM	758	759
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,380
	1 SELECTED				790
	2 NOT SELECTED				11
	TOTAL				15,097
HSDEDDFO	HOSP R/B TYPE DEDUCT:/DAY FIX-OUT	2.0	NUM	760	761
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,380
	1 SELECTED				21
	2 NOT SELECTED				780
	TOTAL				15,097
HSDEDDVO	HOSP R/B TYPE DEDUCT:/DAY VARY-OUT	2.0	NUM	762	763
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,380
	2 NOT SELECTED				801
	TOTAL				15,097
HSDEDDYO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT	2.0	NUM	764	765
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,380
	1 SELECTED				8
	2 NOT SELECTED				793
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSDEDNSO	HOSP R/B TYPE DEDUCT:NOT SPECIFIED-OUT	2.0	NUM	766	767
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,380
	2 NOT SELECTED				801
	TOTAL				15,097
HSDECYDO	HSP RB TYP DED:AMNT DEDUC/CONFIN/YR-OUT	4.0	NUM	768	771
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,391
	30-1200				790
	TOTAL				15,097
HSDEDFDO	HSP RB TYP DED:AMT DED/DAY FIX VARY-OUT	3.0	NUM	772	774
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,160
	40-500				21
	TOTAL				15,097
HSDEDYNO	HSP R/B TYPE DEDUCT:# DAYS/CONFIN/YR-OUT	2.0	NUM	775	776
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,173
	5				8
	TOTAL				15,097
HSCOINO	HOSP R/B TYPE COINS-OUT	2.0	NUM	777	778
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,737
	1 FIXED				429
	2 VARIES				15
	TOTAL				15,097
HSCOINPO	HOSP R/B % COINS-OUT	3.0	NUM	779	781
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,737
	50-100				444
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSOOPDO	HOSP R/B AMNT OOP LIMIT-OUT	4.0	NUM	782	785
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,172
	1000-1500				9
	TOTAL				15,097
HSMXCYN0	HSP RB DAY MAX:MAX # DAYS/CONFIN/YR-OUT	3.0	NUM	786	788
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,114
	15-365				67
	TOTAL				15,097
HSMXCYO	HOSP R/B TYPE \$ MAX:/CONFIN/YEAR-OUT	2.0	NUM	789	790
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,147
	1 SELECTED				20
	2 NOT SELECTED				14
	TOTAL				15,097
HSMXDYO	HOSP R/B TYPE \$ MAX:/DAY-OUT	2.0	NUM	791	792
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,147
	1 SELECTED				14
	2 NOT SELECTED				20
	TOTAL				15,097
HSMXNSO	HOSP R/B TYPE \$ MAX:NOT SPECIFIED-OUT	2.0	NUM	793	794
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,147
	2 NOT SELECTED				34
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HSMXCYDO	HSP RB TYP \$MAX:AMNT \$MAX/CONFIN/YR-OUT	6.0	NUM	795	800
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,161
	250-250000				20
	TOTAL				15,097
HSMXDYDO	HSP RB TYPE \$ MAX: AMNT \$ MAX /DAY-OUT	4.0	NUM	801	804
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				8,167
	40-1000				11
	TOTAL				15,097
MIALLO	MNTL HLTH INPAT ALL LIMIT:ALL	2.0	NUM	805	806
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				4,054
	1 SELECTED				1,077
	2 NOT SELECTED				2,369
	TOTAL				15,097
MIDEDO	MNTL HLTH INPAT ALL LIMIT:DEDUCT	2.0	NUM	807	808
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				4,054
	1 SELECTED				2,492
	2 NOT SELECTED				954
	TOTAL				15,097
MICOINO	MNTL HLTH INPAT ALL LIMIT:COINS/COPAY	2.0	NUM	809	810
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				4,054
	1 SELECTED				2,347
	2 NOT SELECTED				1,099
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MIOOPO	MNTL HLTH INPAT ALL LIMIT:OOP LIMIT	2.0	NUM	811	812
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				4,054
	1 SELECTED				2,299
	2 NOT SELECTED				1,147
	TOTAL				15,097
MIMAXO	MNTL HLTH INPAT ALL LIMIT:PLAN MAX	2.0	NUM	813	814
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,137
	-1 NOT APPLICABLE				4,054
	1 SELECTED				2,478
	2 NOT SELECTED				428
	TOTAL				15,097
MIDEDI	MNTL HLTH INPAT INTRN LIMIT:DEDUCT	2.0	NUM	815	816
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				1,031
	2 NOT SELECTED				4,565
	TOTAL				15,097
MICOINI	MNTL HLTH INPAT INTRN LIMIT:COINS	2.0	NUM	817	818
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				2,172
	2 NOT SELECTED				3,424
	TOTAL				15,097
MIOOPI	MNTL HLTH INPAT INTRN LIMIT:OOP LIMIT	2.0	NUM	819	820
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				106
	2 NOT SELECTED				5,490
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MIMAXNI	MNTL HLTH INPAT INTRN LIMIT:DAY MAX	2.0	NUM	821	822
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				3,987
	2 NOT SELECTED				1,609
	TOTAL				15,097
MIMAXDI	MNTL HLTH INPAT INTRN LIMIT:\$ MAX	2.0	NUM	823	824
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				1,426
	2 NOT SELECTED				4,170
	TOTAL				15,097
MIOTHI	MNTL HLTH INPAT INTRN LIMIT:OTHR	2.0	NUM	825	826
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				1,904
	1 SELECTED				3
	2 NOT SELECTED				5,593
	TOTAL				15,097
MIDEDCY	MNTL HLTH INPAT TYPE DEDUCT:/CONFIN/YR	2.0	NUM	827	828
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,469
	1 SELECTED				530
	2 NOT SELECTED				501
	TOTAL				15,097
MIDEDDE	MNTL HLTH INPAT TYPE DEDUCT:/DAY FIX	2.0	NUM	829	830
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,469
	1 SELECTED				490
	2 NOT SELECTED				541
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MIDEDDV	MNTL HLTH INPAT TYPE DEDUCT:/DAY VARY	2.0	NUM	831	832
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,469
	1 SELECTED				25
	2 NOT SELECTED				1,006
	TOTAL				15,097
MIDEDDY	MH INPAT TYPE DEDUCT:# DAYS/CONFIN/YR	2.0	NUM	833	834
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,469
	1 SELECTED				41
	2 NOT SELECTED				990
	TOTAL				15,097
MIDEDNS	MNTL HLTH INPAT TYPE DEDUCT:NOT SPECIED	2.0	NUM	835	836
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,469
	2 NOT SELECTED				1,031
	TOTAL				15,097
MIDECYD	MH INPAT TYPE DED:AMNT DEDUCT/CONFIN/YR	3.0	NUM	837	839
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,601
	-1 NOT APPLICABLE				6,970
	25-800				526
	TOTAL				15,097
MIDEDFD	MH INPAT TYPE DED:AMNT DED/DAY FIX VARY	3.0	NUM	840	842
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,601
	-1 NOT APPLICABLE				6,985
	1-250				511
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MIDEDYN	MH INPAT TYPE DEDUCT:# DAYS /CONFIN/YR	2.0	NUM	843	844
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				7,459
	4				5
	5				32
	6				2
	10				2
	TOTAL				15,097
MICOIN	MNTL HLTH INPAT TYPE COINS	2.0	NUM	845	846
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				5,328
	1 FIXED				1,907
	2 VARIES				265
	TOTAL				15,097
MICOINP	MNTL HLTH INPAT % COINS	3.0	NUM	847	849
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,602
	-1 NOT APPLICABLE				5,328
	50-100				2,167
	TOTAL				15,097
MIOOPD	MNTL HLTH INPAT AMNT OOP LIMIT	4.0	NUM	850	853
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				7,394
	200-8000				106
	TOTAL				15,097
MIMAXCYN	MH INPAT DAY MAX:MAX # DAYS /CONFIN/YR	3.0	NUM	854	856
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,604
	-1 NOT APPLICABLE				3,513
	3-730				3,980
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MIMXCY	MNTL HLTH INPAT TYPE \$ MAX:/CONFIN/YR	2.0	NUM	857	858
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,074
	1				1,370
	2				56
	TOTAL				15,097
MIMXDY	MNTL HLTH INPAT TYPE \$ MAX:/DAY	2.0	NUM	859	860
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,074
	1 SELECTED				105
	2 NOT SELECTED				1,321
	TOTAL				15,097
MIMXNS	MNTL HLTH INPAT TYPE \$ MAX:NOT SPECIFD	2.0	NUM	861	862
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				6,074
	2 NOT SELECTED				1,426
	TOTAL				15,097
MIMXCYD	MH INPAT TYPE \$ MAX:AMNT \$ MAX/CONFIN/YR	6.0	NUM	863	868
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,598
	-1 NOT APPLICABLE				6,130
	30-150000				1,369
	TOTAL				15,097
MIMXDYD	MH INPAT TYPE \$ MAX: AMNT \$ MAX /DAY	4.0	NUM	869	872
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,597
	-1 NOT APPLICABLE				7,395
	25-1750				105
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADALLO	ALC/DRUG INPAT DETOX ALL LIMIT:ALL	2.0	NUM	873	874
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,024
	1 SELECTED				601
	2 NOT SELECTED				1,445
	TOTAL				15,097
ADDEDO	ALC/DRUG INPAT DETOX ALL LIMIT:DEDUCT	2.0	NUM	875	876
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,024
	1 SELECTED				1,465
	2 NOT SELECTED				581
	TOTAL				15,097
ADCOINO	ALC/DRG INPAT DETOX ALL LIMT:COINS/COPAY	2.0	NUM	877	878
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,024
	1 SELECTED				1,419
	2 NOT SELECTED				627
	TOTAL				15,097
ADOOPO	ALC/DRUG INPAT DETOX ALL LIMIT:OOP LIMIT	2.0	NUM	879	880
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,024
	1 SELECTED				1,358
	2 NOT SELECTED				688
	TOTAL				15,097
ADMAXO	ALC/DRUG INPAT DETOX ALL LIMIT:PLAN MAX	2.0	NUM	881	882
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,395
	-1 NOT APPLICABLE				3,024
	1 SELECTED				1,431
	2 NOT SELECTED				247
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADDEDI	ALC/DRUG INPAT DETOX INTRN LIMIT:DEDUCT	2.0	NUM	883	884
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	1 SELECTED				456
	2 NOT SELECTED				2,609
	TOTAL				15,097
ADCOINI	ALC/DRUG INPAT DETOX INTRN LIMIT:COINS	2.0	NUM	885	886
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	1 SELECTED				1,121
	2 NOT SELECTED				1,944
	TOTAL				15,097
ADOOPI	ALC/DRUG INPAT DETOX INTRN LIMT:OOP LIMT	2.0	NUM	887	888
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	1 SELECTED				46
	2 NOT SELECTED				3,019
	TOTAL				15,097
ADMAXNI	ALC/DRUG INPAT DETOX INTRN LIMIT:DAY MAX	2.0	NUM	889	890
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	1 SELECTED				1,800
	2 NOT SELECTED				1,265
	TOTAL				15,097
ADMAXDI	ALC/DRUG INPAT DETOX INTRN LIMIT:\$ MAX	2.0	NUM	891	892
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	1 SELECTED				930
	2 NOT SELECTED				2,135
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADOTHI	ALC/DRUG INPAT DETOX INTRN LIMIT:OTHR	2.0	NUM	893	894
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				2,005
	2 NOT SELECTED				3,065
	TOTAL				15,097
ADDEDCY	ALC/DRUG INPAT DETOX TYPE DED:/CONFIN/YR	2.0	NUM	895	896
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,614
	1 SELECTED				324
	2 NOT SELECTED				132
	TOTAL				15,097
ADDEDDF	ALC/DRUG INPAT DETOX TYPE DED:/DAY FIX	2.0	NUM	897	898
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,614
	1 SELECTED				137
	2 NOT SELECTED				319
	TOTAL				15,097
ADDEDDV	ALC/DRUG INPAT DETOX TYPE DED:/DAY VARY	2.0	NUM	899	900
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,614
	1 SELECTED				14
	2 NOT SELECTED				442
	TOTAL				15,097
ADDEDDY	A/DRG INP DETOX TYP DED:# DAYS/CONFIN/YR	2.0	NUM	901	902
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,614
	1 SELECTED				15
	2 NOT SELECTED				441
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADDEDNS	ALC/DRUG INATP DETOX TYP DED:NOT SPECFD	2.0	NUM	903	904
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,614
	2 NOT SELECTED				456
	TOTAL				15,097
ADDECYD	A/D INP DETOX TYP DED:AMNT DED/CONFIN/YR	4.0	NUM	905	908
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,746
	10-1000				324
	TOTAL				15,097
ADDEDFD	A/D INP DETOX DED:AMT DED/DAY FIX VARY	3.0	NUM	909	911
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,031
	-1 NOT APPLICABLE				4,919
	1-250				147
	TOTAL				15,097
ADDEDYN	A/D INP DETOX TYP DED:# DAYS/CONFIN/YR	2.0	NUM	912	913
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				5,055
	5				12
	6				2
	7				1
	TOTAL				15,097
ADCOIN	ALC/DRUG INPAT DETOX TYPE COINS	2.0	NUM	914	915
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,949
	1 FIXED				954
	2 VARIES				167
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADCOINP	ALC/DRUG INPAT DETOX % COINS	3.0	NUM	916	918
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				3,949
	40-100				1,121
	TOTAL				15,097
ADOOPD	ALC/DRUG INPAT DETOX AMNT OOP LIMIT	4.0	NUM	919	922
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				5,024
	50-3000				46
	TOTAL				15,097
ADMAXCYN	A/D INP DETOX DAY MAX:MAX #DYS/CONFIN/YR	3.0	NUM	923	925
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,031
	-1 NOT APPLICABLE				3,270
	3-365				1,796
	TOTAL				15,097
ADMXCY	ALC/DRUG INPAT DETOX TYP \$ MAX:/CONFN/YR	2.0	NUM	926	927
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,140
	1 SELECTED				893
	2 NOT SELECTED				37
	TOTAL				15,097
ADMXDY	ALC/DRUG INPAT DETOX TYPE \$ MAX: /DAY	2.0	NUM	928	929
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,140
	1 SELECTED				52
	2 NOT SELECTED				878
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ADMXNS	ALC/DRUG INPAT DETOX TYPE \$ MAX:NOT SPEC	2.0	NUM	930	931
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,140
	2 NOT SELECTED				930
	TOTAL				15,097
ADMXCYD	A/D INPAT DETOX \$ MAX:AMT \$MAX/CONFIN/YR	6.0	NUM	932	937
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				4,177
	100-150000				893
	TOTAL				15,097
ADMXDYD	A/D INPAT DETOX TYPE \$ MAX:AMT \$ MAX/DAY	3.0	NUM	938	940
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,027
	-1 NOT APPLICABLE				5,018
	10-625				52
	TOTAL				15,097
ARALLO	ALC/DRUG INPAT REHAB ALL LIMIT:ALL	2.0	NUM	941	942
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				3,764
	1 SELECTED				938
	2 NOT SELECTED				2,125
	TOTAL				15,097
ARDEDO	ALC/DRUG INPAT REHAB ALL LIMIT:DEDUCT	2.0	NUM	943	944
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				3,764
	1 SELECTED				2,169
	2 NOT SELECTED				894
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ARCOINO	ALC/DRUG INPAT REHB ALL LIMIT:COINS/COPAY	2.0	NUM	945	946
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				3,764
	1 SELECTED				2,050
	2 NOT SELECTED				1,013
	TOTAL				15,097
AROOPO	ALC/DRUG INPAT REHB ALL LIMIT:OOP LIMIT	2.0	NUM	947	948
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				3,764
	1 SELECTED				2,054
	2 NOT SELECTED				1,009
	TOTAL				15,097
ARMAXO	ALC/DRUG INPAT REHB ALL LIMIT:PLAN MAX	2.0	NUM	949	950
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,745
	-1 NOT APPLICABLE				3,764
	1 SELECTED				2,216
	2 NOT SELECTED				372
	TOTAL				15,097
ARDEDI	ALC/DRUG INPAT REHB INTRN LIMIT:DEDUCT	2.0	NUM	951	952
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	1 SELECTED				946
	2 NOT SELECTED				3,843
	TOTAL				15,097
ARCOINI	ALC/DRUG INPAT REHB INTRN LIMIT:COINS	2.0	NUM	953	954
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	1 SELECTED				1,904
	2 NOT SELECTED				2,885
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AROOPI	ALC/DRUG INPAT REHAB INTRN LIMIT:OOP LIMIT	2.0	NUM	955	956
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	1 SELECTED				63
	2 NOT SELECTED				4,726
	TOTAL				15,097
ARMAXNI	ALC/DRUG INPAT REHAB INTRN LIMIT:DAY MAX	2.0	NUM	957	958
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	1 SELECTED				2,847
	2 NOT SELECTED				1,942
	TOTAL				15,097
ARMAXDI	ALC/DRUG INPAT REHAB INTRN LIMIT:\$ MAX	2.0	NUM	959	960
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	1 SELECTED				1,444
	2 NOT SELECTED				3,345
	TOTAL				15,097
AROTHI	ALC/DRUG INPAT REHAB INTRN LIMIT:OTHR	2.0	NUM	961	962
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				2,038
	2 NOT SELECTED				4,789
	TOTAL				15,097
ARDEDCY	ALC/DRUG INPAT REHAB TYPE DED:/CONFIN/YR	2.0	NUM	963	964
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,272
	-1 NOT APPLICABLE				5,881
	1 SELECTED				643
	2 NOT SELECTED				301
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ARDEDF	ALC/DRUG INPAT REHAB TYPE DED:/DAY FIX	2.0	NUM	965	966
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,272
	-1 NOT APPLICABLE				5,881
	1 SELECTED				310
	2 NOT SELECTED				634
	TOTAL				15,097
ARDEDDV	ALC/DRUG INPAT REHAB TYPE DED:/DAY VARY	2.0	NUM	967	968
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,272
	-1 NOT APPLICABLE				5,881
	1 SELECTED				11
	2 NOT SELECTED				933
	TOTAL				15,097
ARDEDDY	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR	2.0	NUM	969	970
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,272
	-1 NOT APPLICABLE				5,881
	1 SELECTED				20
	2 NOT SELECTED				924
	TOTAL				15,097
ARDEDNS	ALC/DRUG INPAT REHAB TYPE DED:NOT SPEC	2.0	NUM	971	972
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				5,881
	1 SELECTED				2
	2 NOT SELECTED				944
	TOTAL				15,097
ARDECYD	A/D INPAT REHAB DED:AMT DED/CONFIN/YR	4.0	NUM	973	976
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,276
	-1 NOT APPLICABLE				6,182
	20-1000				639
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ARDEDED	A/D INP REHAB DED:AMNT DED/DAY FIX VARY	3.0	NUM	977	979
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,276
	-1 NOT APPLICABLE				6,504
	1-250				317
	TOTAL				15,097
ARDEDYN	A/D INPAT REHAB TYPE DED:#DAYS/CONFIN/YR	2.0	NUM	980	981
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,272
	-1 NOT APPLICABLE				6,805
	4				5
	5				13
	6				2
	TOTAL				15,097
ARCOIN	ALC/DRUG INPAT REHAB TYPE COINS	2.0	NUM	982	983
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				4,923
	1 FIXED				1,683
	2 VARIES				221
	TOTAL				15,097
ARCOINP	ALC/DRUG INPAT REHAB % COINS	3.0	NUM	984	986
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				4,923
	40-100				1,904
	TOTAL				15,097
AROOPD	ALC/DRUG INPAT REHAB AMNT OOP LIMIT:	4.0	NUM	987	990
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				6,764
	200-3000				63
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ARMAXCYN	A/D INP REHB DAY MAX:MAX # DYS/CONFIN/YR	3.0	NUM	991	993
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,279
	-1 NOT APPLICABLE				3,980
	3-365				2,838
	TOTAL				15,097
ARMXCY	A/D INPAT REHAB TYPE \$ MAX:/CONFIN/YR	2.0	NUM	994	995
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				5,383
	1 SELECTED				1,368
	2 NOT SELECTED				76
	TOTAL				15,097
ARMXDY	ALC/DRUG INPAT REHAB TYPE \$ MAX:/DAY	2.0	NUM	996	997
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				5,383
	1 SELECTED				119
	2 NOT SELECTED				1,325
	TOTAL				15,097
ARMXNS	ALC/DRUG INPAT REHAB TYPE \$ MAX:NOT SPEC	2.0	NUM	998	999
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				5,383
	2 NOT SELECTED				1,444
	TOTAL				15,097
ARMXCYD	A/D INPT REHAB \$ MAX:AMNT \$MAX/CONFIN/YR	6.0	NUM	1000	1005
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				5,459
	80-250000				1,368
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ARMXDYD	A/D INPAT REHAB TYPE \$ MAX:AMNT \$MAX/DAY	3.0	NUM	1006	1008
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,270
	-1 NOT APPLICABLE				6,708
	10-625				119
	TOTAL				15,097
ISALLOI	INPAT SURGERY ALL LIMIT:ALL-IN	2.0	NUM	1009	1010
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				3,494
	1 SELECTED				1,824
	2 NOT SELECTED				1,976
	TOTAL				15,097
ISDEDOI	INPAT SURGERY ALL LIMIT:DEDUCT-IN	2.0	NUM	1011	1012
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				3,494
	1 SELECTED				3,040
	2 NOT SELECTED				760
	TOTAL				15,097
ISCOINOI	INPAT SURGERY ALL LIMIT:COINS/COPAY-IN	2.0	NUM	1013	1014
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				3,498
	1 SELECTED				3,421
	2 NOT SELECTED				375
	TOTAL				15,097
ISOOPOI	INPAT SURGERY ALL LIMIT:OOP LIMIT-IN	2.0	NUM	1015	1016
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				3,498
	1 SELECTED				3,273
	2 NOT SELECTED				523
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMAXOI	INPAT SURGERY ALL LIMIT:PLAN MAX-IN	2.0	NUM	1017	1018
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,697
	-1 NOT APPLICABLE				3,494
	1 SELECTED				2,574
	2 NOT SELECTED				332
	TOTAL				15,097
ISDEDII	INPAT SURGERY INTRN LIMIT:DEDUCT-IN	2.0	NUM	1019	1020
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				6,752
	1 SELECTED				47
	2 NOT SELECTED				495
	TOTAL				15,097
ISCOINII	INPAT SURGERY INTRN LIMIT:COINS-IN	2.0	NUM	1021	1022
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				6,752
	1 SELECTED				373
	2 NOT SELECTED				169
	TOTAL				15,097
ISCOPII	INPAT SURGERY INTRN LIMIT:COPAY-IN	2.0	NUM	1023	1024
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				6,752
	1 SELECTED				73
	2 NOT SELECTED				469
	TOTAL				15,097
ISMAXII	INPAT SURGERY INTRN LIMIT:\$ MAX-IN	2.0	NUM	1025	1026
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				6,752
	1 SELECTED				91
	2 NOT SELECTED				451
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISOTHII	INPAT SURGERY INTRN LIMIT:OTHR-IN	2.0	NUM	1027	1028
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				6,752
	2 NOT SELECTED				542
	TOTAL				15,097
ISDEDDI	INPAT SURGERY:AMNT DEDUCT-IN	3.0	NUM	1029	1031
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				7,247
	25-300				47
	TOTAL				15,097
ISCOINPI	INPAT SURGERY:% COINS-IN	3.0	NUM	1032	1034
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,810
	-1 NOT APPLICABLE				6,921
	50-100				366
	TOTAL				15,097
ISCOPTI	INPAT SURGERY:AMNT COPAY-IN	3.0	NUM	1035	1037
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				7,221
	5-300				73
	TOTAL				15,097
ISMXYI	INPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR-IN	2.0	NUM	1038	1039
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,804
	-1 NOT APPLICABLE				7,203
	1 SELECTED				72
	2 NOT SELECTED				18
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMXSRI	INPAT SURGERY TYPE \$ MAX:PER SURGERY-IN	2.0	NUM	1040	1041
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,804
	-1 NOT APPLICABLE				7,203
	1 SELECTED				15
	2 NOT SELECTED				75
	TOTAL				15,097
ISMXFET	INPAT SURGERY TYPE \$ MAX:FEE SCHD-IN	2.0	NUM	1042	1043
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,804
	-1 NOT APPLICABLE				7,203
	1 SELECTED				7
	2 NOT SELECTED				83
	TOTAL				15,097
ISMXNSI	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-IN	2.0	NUM	1044	1045
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,803
	-1 NOT APPLICABLE				7,203
	1 SELECTED				1
	2 NOT SELECTED				90
	TOTAL				15,097
ISMXCYDI	INPAT SRGRY \$ MAX:AMT \$MAX/CONFIN/YR-IN	5.0	NUM	1046	1050
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,804
	-1 NOT APPLICABLE				7,221
	50-25000				72
	TOTAL				15,097
ISMXSRDI	INPAT SRGRY TYPE \$ MAX:AMT \$MAX/SURG-IN	5.0	NUM	1051	1055
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,804
	-1 NOT APPLICABLE				7,278
	25-12000				15
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMXFELI	INPAT SRGRY TYPE \$MAX:AMT \$MAX:APPEND-IN	3.0	NUM	1056	1058
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,809
	-1 NOT APPLICABLE				7,286
	827-1543				2
	TOTAL				15,097
ISMXFE2I	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-IN	3.0	NUM	1059	1061
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,809
	-1 NOT APPLICABLE				7,286
	827-1752				2
	TOTAL				15,097
ISALLOO	INPAT SURGERY ALL LIMIT:ALL-OUT	2.0	NUM	1062	1063
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				5,094
	1 SELECTED				1,431
	2 NOT SELECTED				1,253
	TOTAL				15,097
ISDEDOO	INPAT SURGERY ALL LIMIT:DEDUCT-OUT	2.0	NUM	1064	1065
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				5,094
	1 SELECTED				2,447
	2 NOT SELECTED				237
	TOTAL				15,097
ISCOINOO	INPAT SURGERY ALL LIMIT:COINS/COPAY-OUT	2.0	NUM	1066	1067
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				5,094
	1 SELECTED				2,621
	2 NOT SELECTED				63
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISOOPOO	INPAT SURGERY ALL LIMIT:OOP LIMIT-OUT	2.0	NUM	1068	1069
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				5,094
	1 SELECTED				2,445
	2 NOT SELECTED				239
	TOTAL				15,097
ISMAXOO	INPAT SURGERY ALL LIMIT:PLAN MAX-OUT	2.0	NUM	1070	1071
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,069
	-1 NOT APPLICABLE				5,094
	1 SELECTED				1,679
	2 NOT SELECTED				255
	TOTAL				15,097
ISDEDIO	INPAT SURGERY INTRN LIMIT:DEDUCT-OUT	2.0	NUM	1072	1073
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,660
	1 SELECTED				13
	2 NOT SELECTED				105
	TOTAL				15,097
ISCOINIO	INPAT SURGERY INTRN LIMIT:COINS-OUT	2.0	NUM	1074	1075
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,660
	1 SELECTED				80
	2 NOT SELECTED				38
	TOTAL				15,097
ISCOPIO	INPAT SURGERY INTRN LIMIT:COPAY-OUT	2.0	NUM	1076	1077
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,660
	1 SELECTED				7
	2 NOT SELECTED				111
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMAXIO	INPAT SURGERY INTRN LIMIT:\$ MAX-OUT	2.0	NUM	1078	1079
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,660
	1 SELECTED				16
	2 NOT SELECTED				102
	TOTAL				15,097
ISOTHIO	INPAT SURGERY INTRN LIMIT:OTHR-OUT	2.0	NUM	1080	1081
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,660
	2 NOT SELECTED				118
	TOTAL				15,097
ISDEDNO	INPAT SURGERY:AMNT DEDUCT-OUT	3.0	NUM	1082	1084
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,765
	125-500				13
	TOTAL				15,097
ISCOINPO	INPAT SURGERY:% COINS-OUT	3.0	NUM	1085	1087
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,698
	10-100				80
	TOTAL				15,097
ISCOPEDO	INPAT SURGERY:AMNT COPAY-OUT	3.0	NUM	1088	1090
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,771
	20-750				7
	TOTAL				15,097
ISMXCYO	INPAT SURGERY TYPE \$ MAX:/CONFIN/YR-OUT	2.0	NUM	1091	1092
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,762
	1 SELECTED				16
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMXSRO	INPAT SURGERY TYPE \$ MAX:PER SRGERY-OUT	2.0	NUM	1093	1094
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,762
	2 NOT SELECTED				16
	TOTAL				15,097
ISMXFEO	INPAT SURGERY TYPE \$ MAX:FEE SCHD-OUT	2.0	NUM	1095	1096
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,762
	2 NOT SELECTED				16
	TOTAL				15,097
ISMXNSO	INPAT SURGERY TYPE \$ MAX:NOT SPECFD-OUT	2.0	NUM	1097	1098
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,762
	2 NOT SELECTED				16
	TOTAL				15,097
ISMXCYDO	INPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR-OUT	5.0	NUM	1099	1103
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,762
	50-10000				16
	TOTAL				15,097
ISMXSRDO	INPAT SRGY TYPE \$ MAX:AMT \$MAX:SRGY-OUT	2.0	NUM	1104	1105
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,778
	TOTAL				15,097
ISMXFEO	INPAT SRGY TYP \$ MAX:AMT \$MAX:APPEND-OUT	2.0	NUM	1106	1107
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,778
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
ISMXFE20	INPAT SRGY \$ MAX:AMT \$MAX:ING HERNIA-OUT	2.0	NUM	1108	1109
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,319
	-1 NOT APPLICABLE				7,778
	TOTAL				15,097
OSALLO	OUTPAT SURGERY ALL LIMIT:ALL	2.0	NUM	1110	1111
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				3,560
	1 SELECTED				1,717
	2 NOT SELECTED				2,120
	TOTAL				15,097
OSDEDO	OUTPAT SURGERY ALL LIMIT:DEDUCT	2.0	NUM	1112	1113
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				3,560
	1 SELECTED				2,911
	2 NOT SELECTED				926
	TOTAL				15,097
OSCOINO	OUTPAT SURGERY ALL LIMIT:COINS/COPAY	2.0	NUM	1114	1115
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				3,568
	1 SELECTED				3,363
	2 NOT SELECTED				466
	TOTAL				15,097
OSOPO	OUTPAT SURGERY ALL LIMIT:OOP LIMIT	2.0	NUM	1116	1117
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				3,565
	1 SELECTED				3,282
	2 NOT SELECTED				550
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OSMAXO	OUTPAT SURGERY ALL LIMIT:PLAN MAX	2.0	NUM	1118	1119
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,659
	-1 NOT APPLICABLE				3,560
	1 SELECTED				2,528
	2 NOT SELECTED				350
	TOTAL				15,097
OSDEDI	OUTPAT SURGERY INTRN LIMIT:DEDUCT	2.0	NUM	1120	1121
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,395
	1 SELECTED				92
	2 NOT SELECTED				910
	TOTAL				15,097
OSCOINI	OUTPAT SURGERY INTRN LIMIT:COINSURANCE	2.0	NUM	1122	1123
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,395
	1 SELECTED				443
	2 NOT SELECTED				559
	TOTAL				15,097
OSCOPI	OUTPAT SURGERY INTRN LIMIT:COPAY	2.0	NUM	1124	1125
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,395
	1 SELECTED				458
	2 NOT SELECTED				544
	TOTAL				15,097
OISMAXI	OUTPAT SURGERY INTRN LIMIT:\$ MAX	2.0	NUM	1126	1127
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,395
	1 SELECTED				83
	2 NOT SELECTED				919
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OSOTHI	OUTPAT SURGERY INTRN LIMIT:OTHR	2.0	NUM	1128	1129
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,395
	2 NOT SELECTED				1,002
	TOTAL				15,097
OSDEDD	OUTPAT SURGERY:AMNT DEDUCT	4.0	NUM	1130	1133
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				7,305
	25-1000				92
	TOTAL				15,097
OSCOINP	OUTPAT SURGERY:% COINS	3.0	NUM	1134	1136
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,707
	-1 NOT APPLICABLE				6,954
	50-100				436
	TOTAL				15,097
OSCOPD	OUTPAT SURGERY:AMNT COPAY	3.0	NUM	1137	1139
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				6,939
	2-300				458
	TOTAL				15,097
OSMXCY	OUTPAT SURGERY TYPE \$ MAX:/CONFIN/YEAR	2.0	NUM	1140	1141
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,701
	-1 NOT APPLICABLE				7,314
	1 SELECTED				64
	2 NOT SELECTED				18
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OSMXSR	OUTPAT SURGERY TYPE \$ MAX:PER SURGERY	2.0	NUM	1142	1143
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,701
	-1 NOT APPLICABLE				7,314
	1 SELECTED				15
	2 NOT SELECTED				67
	TOTAL				15,097
OSMXFE	OUTPAT SURGERY TYPE \$ MAX:FEE SCHD	2.0	NUM	1144	1145
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,701
	-1 NOT APPLICABLE				7,314
	1 SELECTED				3
	2 NOT SELECTED				79
	TOTAL				15,097
OSMXNS	OUTPAT SURGERY TYPE \$ MAX:NOT SPECIFIED	2.0	NUM	1146	1147
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,700
	-1 NOT APPLICABLE				7,314
	1 SELECTED				1
	2 NOT SELECTED				82
	TOTAL				15,097
OSMXCYD	OUTPAT SRGY \$ MAX:AMT \$MAX/CONFIN/YR	5.0	NUM	1148	1152
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,701
	-1 NOT APPLICABLE				7,332
	100-25000				64
	TOTAL				15,097
OSMXSRD	OUTPAT SRGY TYPE \$ MAX:AMT \$MAX/SURGERY	5.0	NUM	1153	1157
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,701
	-1 NOT APPLICABLE				7,381
	25-12000				15
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OSMX1FE	OUTPAT SRGY \$ MAX:AMT \$MAX:TONSIL/ADENOI	3.0	NUM	1158	1160
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,702
	-1 NOT APPLICABLE				7,393
	827				2
	TOTAL				15,097
OSMX2FE	OUTP SRG TYP \$ MAX:AMT \$MAX:DIAG D AND C	3.0	NUM	1161	1163
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,702
	-1 NOT APPLICABLE				7,393
	827				2
	TOTAL				15,097
OFALLOI	DR OFC VSTS ALL LIMIT:ALL-IN	2.0	NUM	1164	1165
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,332
	1 SELECTED				1,706
	2 NOT SELECTED				3,143
	TOTAL				15,097
OFEDDOI	DR OFC VSTS ALL LIMIT:DEDUCT-IN	2.0	NUM	1166	1167
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,332
	1 SELECTED				2,782
	2 NOT SELECTED				2,067
	TOTAL				15,097
OFCOINOI	DR OFC VSTS ALL LIMIT:COINS/COPAY-IN	2.0	NUM	1168	1169
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,332
	1 SELECTED				3,836
	2 NOT SELECTED				1,013
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OFOOPOI	DR OFC VSTS ALL LIMIT:OOP LIMIT-IN	2.0	NUM	1170	1171
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,332
	1 SELECTED				3,960
	2 NOT SELECTED				889
	TOTAL				15,097
OEMAXOI	DR OFC VSTS ALL LIMIT:PLAN MAX-IN	2.0	NUM	1172	1173
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,429
	-1 NOT APPLICABLE				3,332
	1 SELECTED				2,813
	2 NOT SELECTED				523
	TOTAL				15,097
OFDEDII	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-IN	2.0	NUM	1174	1175
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				1
	2 NOT SELECTED				3,394
	TOTAL				15,097
OFCOIFII	DR OFC VSTS INTRN LIMIT:COINS FIX-IN	2.0	NUM	1176	1177
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				196
	2 NOT SELECTED				3,199
	TOTAL				15,097
OFCOIVII	DR OFC VSTS INTRN LIMIT:COINS VARY-IN	2.0	NUM	1178	1179
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				1
	2 NOT SELECTED				3,394
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OFCOPFII	DR OFC VSTS INTRN LIMIT:COPAY/VST FIX-IN	2.0	NUM	1180	1181
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				3,166
	2 NOT SELECTED				229
	TOTAL				15,097
OFCOPVII	DR OFC VSTS INTRN LINT:COPAY/VST VARY-IN	2.0	NUM	1182	1183
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				14
	2 NOT SELECTED				3,381
	TOTAL				15,097
OEDIFFII	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-IN	2.0	NUM	1184	1185
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				96
	2 NOT SELECTED				3,299
	TOTAL				15,097
OEMXNVII	DR OFC VSTS INTRN LIMIT:MAX # VISITS-IN	2.0	NUM	1186	1187
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				18
	2 NOT SELECTED				3,377
	TOTAL				15,097
OEMXDVII	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-IN	2.0	NUM	1188	1189
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				19
	2 NOT SELECTED				3,376
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OEMXYRII	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-IN	2.0	NUM	1190	1191
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	1 SELECTED				86
	2 NOT SELECTED				3,309
	TOTAL				15,097
OFOTHII	DR OFC VSTS INTRN LIMIT:OTHR-IN	2.0	NUM	1192	1193
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,786
	2 NOT SELECTED				3,395
	TOTAL				15,097
OFEDEDDI	DR OFC VSTS:AMNT DEDUCT/YR-IN	3.0	NUM	1194	1196
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
OFCOINPI	DR OFC VSTS:% COINS FIX VARY-IN	3.0	NUM	1197	1199
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,984
	50-100				197
	TOTAL				15,097
OFCOPDI	DR OFC VSTS:AMNT COPAY /VST FIX VARY-IN	2.0	NUM	1200	1201
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,921
	-1 NOT APPLICABLE				5,001
	1-50				3,175
	TOTAL				15,097
OEMXNVNI	DR OFC VSTS:# MAX # VISITS-IN	3.0	NUM	1202	1204
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,163
	4-100				18
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OEMXDVDI	DR OFC VSTS:\$ AMNT \$ MAX /VST-IN	3.0	NUM	1205	1207
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,162
	12-500				19
	TOTAL				15,097
OEMXYRDI	DR OFC VSTS:\$ AMNT \$ MAX/YR-IN	5.0	NUM	1208	1212
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,095
	100-50000				86
	TOTAL				15,097
OEFALLOO	DR OFC VSTS ALL LIMIT:ALL-OUT	2.0	NUM	1213	1214
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				5,158
	1 SELECTED				1,504
	2 NOT SELECTED				1,510
	TOTAL				15,097
OFEDEDOO	DR OFC VSTS ALL LIMIT:DEDUCT-OUT	2.0	NUM	1215	1216
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				5,158
	1 SELECTED				2,745
	2 NOT SELECTED				269
	TOTAL				15,097
OFCOINOO	DR OFC VSTS ALL LIMIT:COINS/COPAY-OUT	2.0	NUM	1217	1218
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				5,158
	1 SELECTED				2,881
	2 NOT SELECTED				133
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OFOOPOO	DR OFC VSTS ALL LIMIT:OOP LIMIT-OUT	2.0	NUM	1219	1220
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				5,158
	1 SELECTED				2,720
	2 NOT SELECTED				294
	TOTAL				15,097
OEMAXOO	DR OFC VSTS ALL LIMIT:PLAN MAX-OUT	2.0	NUM	1221	1222
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,759
	-1 NOT APPLICABLE				5,158
	1 SELECTED				1,845
	2 NOT SELECTED				335
	TOTAL				15,097
OFDEDIO	DR OFC VSTS INTRN LIMIT:DEDUCT/YR-OUT	2.0	NUM	1223	1224
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				4
	2 NOT SELECTED				268
	TOTAL				15,097
OFCOIFIO	DR OFC VSTS INTRN LIMIT:COINS FIX-OUT	2.0	NUM	1225	1226
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				78
	2 NOT SELECTED				194
	TOTAL				15,097
OFCOIVIO	DR OFC VSTS INTRN LIMIT:COINS VARY-OUT	2.0	NUM	1227	1228
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	2 NOT SELECTED				272
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OFCOPFIO	DR OFC VSTS INTRN LMT:COPAY/VST FIX-OUT	2.0	NUM	1229	1230
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				173
	2 NOT SELECTED				99
	TOTAL				15,097
OFCOPVIO	DR OFC VSTS INTRN LMT:COPAY/VST VARY-OUT	2.0	NUM	1231	1232
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	2 NOT SELECTED				272
	TOTAL				15,097
OEDIFFIO	DR OF INTRN LMT:COINS/PAY DIF:SPCLST-OUT	2.0	NUM	1233	1234
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	2 NOT SELECTED				272
	TOTAL				15,097
OEMXNVIO	DR OFC VSTS INTRN LIMIT:MAX # VISITS-OUT	2.0	NUM	1235	1236
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				4
	2 NOT SELECTED				268
	TOTAL				15,097
OEMXDVIO	DR OFC VSTS INTRN LIMIT:\$ MAX /VST-OUT	2.0	NUM	1237	1238
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				6
	2 NOT SELECTED				266
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OEMXYRIO	DR OFC VSTS INTRN LIMIT:\$ MAX/YR-OUT	2.0	NUM	1239	1240
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	1 SELECTED				15
	2 NOT SELECTED				257
	TOTAL				15,097
OFOETHIO	DR OFC VSTS INTRN LIMIT:OTHR-OUT	2.0	NUM	1241	1242
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				7,900
	2 NOT SELECTED				272
	TOTAL				15,097
OFEDEDO	DR OFC VSTS:AMNT DEDUCT/YR-OUT	3.0	NUM	1243	1245
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				8,168
	200-250				4
	TOTAL				15,097
OFCOINPO	DR OFC VSTS:% COINS FIX VARY-OUT	3.0	NUM	1246	1248
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				8,094
	50-100				78
	TOTAL				15,097
OFCOPDO	DR OFC VSTS:AMNT COPAY /VST FIX VARY-OUT	2.0	NUM	1249	1250
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,926
	-1 NOT APPLICABLE				7,999
	5-40				172
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
OEMXNVNO	DR OFC VSTS:# MAX # VISITS-OUT	2.0	NUM	1251	1252
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				8,168
	2				2
	10				2
	TOTAL				15,097
OEMXDVDO	DR OFC VSTS:\$ AMNT \$ MAX /VST-OUT	2.0	NUM	1253	1254
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,927
	-1 NOT APPLICABLE				8,166
	20-30				4
	TOTAL				15,097
OEMXYRDO	DR OFC VSTS:\$ AMNT \$ MAX/YR-OUT	3.0	NUM	1255	1257
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,925
	-1 NOT APPLICABLE				8,157
	70-500				15
	TOTAL				15,097
WBALLOI	WELL BABY ALL LIMIT:ALL-IN	2.0	NUM	1258	1259
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,290
	1 SELECTED				574
	2 NOT SELECTED				1,959
	TOTAL				15,097
WBDEDOI	WELL BABY ALL LIMIT:DEDUCT-IN	2.0	NUM	1260	1261
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,290
	1 SELECTED				963
	2 NOT SELECTED				1,570
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBCOINOI	WELL BABY ALL LIMIT:COINS/COPAY-IN	2.0	NUM	1262	1263
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,290
	1 SELECTED				1,773
	2 NOT SELECTED				760
	TOTAL				15,097
WBOOPOI	WELL BABY ALL LIMIT:OOP LIMIT-IN	2.0	NUM	1264	1265
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,290
	1 SELECTED				2,006
	2 NOT SELECTED				527
	TOTAL				15,097
WBMAXOI	WELL BABY ALL LIMIT:PLAN MAXIM UM-IN	2.0	NUM	1266	1267
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				10,227
	-1 NOT APPLICABLE				3,290
	1 SELECTED				1,275
	2 NOT SELECTED				305
	TOTAL				15,097
WBDEDII	WELL BABY INTRN LIMIT:DEDUCT/YR-IN	2.0	NUM	1268	1269
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	2 NOT SELECTED				2,483
	TOTAL				15,097
WBCOIFII	WELL BABY INTRN LIMIT:COINS FIX-IN	2.0	NUM	1270	1271
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				212
	2 NOT SELECTED				2,271
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBCOIVII	WELL BABY INTRN LIMIT:COINS VARY-IN	2.0	NUM	1272	1273
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				6
	2 NOT SELECTED				2,477
	TOTAL				15,097
WBCOPEII	WELL BABY INTRN LIMIT:COPIY /VST FIX-IN	2.0	NUM	1274	1275
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				1,877
	2 NOT SELECTED				606
	TOTAL				15,097
WBCOPVII	WELL BABY INTRN LIMIT:COPIY /VST VARY-IN	2.0	NUM	1276	1277
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				6
	2 NOT SELECTED				2,477
	TOTAL				15,097
WBMXNVII	WELL BABY INTRN LIMIT:MAX # VISITS-IN	2.0	NUM	1278	1279
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				374
	2 NOT SELECTED				2,109
	TOTAL				15,097
WBMXDVII	WELL BABY INTRN LIMIT:\$ MAX /VST-IN	2.0	NUM	1280	1281
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				25
	2 NOT SELECTED				2,458
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBMXYRII	WELL BABY INTRN LIMIT:\$ MAX/YR-IN	2.0	NUM	1282	1283
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	1 SELECTED				358
	2 NOT SELECTED				2,125
	TOTAL				15,097
WBOTHII	WELL BABY INTRN LIMIT:OTHR-IN	2.0	NUM	1284	1285
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				3,340
	2 NOT SELECTED				2,483
	TOTAL				15,097
WBDEDDI	WELL BABY:AMNT DEDUCT/YR-IN	2.0	NUM	1286	1287
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				5,823
	TOTAL				15,097
WBCOINPI	WELL BABY:% COINS FIX VARY-IN	3.0	NUM	1288	1290
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				5,605
	50-100				218
	TOTAL				15,097
WBCOPDI	WELL BABY:AMNT COPAY /VST FIX VARY-IN	2.0	NUM	1291	1292
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,277
	-1 NOT APPLICABLE				3,940
	1-38				1,880
	TOTAL				15,097
WBMXNVNI	WELL BABY:# MAX # VISITS-IN	2.0	NUM	1293	1294
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,278
	-1 NOT APPLICABLE				5,449
	2-13				370
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBMXDVDI	WELL BABY:\$ AMNT \$ MAX /VST-IN	3.0	NUM	1295	1297
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				5,798
	15-100				25
	TOTAL				15,097
WBMXYRDI	WELL BABY:\$ AMNT \$ MAX/YR-IN	3.0	NUM	1298	1300
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,274
	-1 NOT APPLICABLE				5,465
	55-840				358
	TOTAL				15,097
WBALLOO	WELL BABY ALL LIMIT:ALL-OUT	2.0	NUM	1301	1302
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,026
	1 SELECTED				581
	2 NOT SELECTED				677
	TOTAL				15,097
WBDEDOO	WELL BABY ALL LIMIT:DEDUCT-OUT	2.0	NUM	1303	1304
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,026
	1 SELECTED				971
	2 NOT SELECTED				287
	TOTAL				15,097
WBCOINOO	WELL BABY ALL LIMIT:COINS/COPAY-OUT	2.0	NUM	1305	1306
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,026
	1 SELECTED				1,140
	2 NOT SELECTED				118
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBOOPOO	WELL BABY ALL LIMIT:OOP LIMIT-OUT	2.0	NUM	1307	1308
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,026
	1 SELECTED				1,061
	2 NOT SELECTED				197
	TOTAL				15,097
WBMAXOO	WELL BABY ALL LIMIT:PLAN MAX-OUT	2.0	NUM	1309	1310
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,068
	-1 NOT APPLICABLE				6,026
	1 SELECTED				834
	2 NOT SELECTED				169
	TOTAL				15,097
WBDEDIO	WELL BABY INTRN LIMIT:DEDUCT/YR-OUT	2.0	NUM	1311	1312
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				3
	2 NOT SELECTED				470
	TOTAL				15,097
WBCOIFIO	WELL BABY INTRN LIMIT:COINS FIX-OUT	2.0	NUM	1313	1314
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				111
	2 NOT SELECTED				362
	TOTAL				15,097
WBCOIVIO	WELL BABY INTRN LIMIT:COINS VARY-OUT	2.0	NUM	1315	1316
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				8
	2 NOT SELECTED				465
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBCOPFIO	WELL BABY INTRN LIMIT:COPIY /VST FIX-OUT	2.0	NUM	1317	1318
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				84
	2 NOT SELECTED				389
	TOTAL				15,097
WBCOPVIO	WELL BABY INTRN LIMIT:COPIY/VST VARY-OUT	2.0	NUM	1319	1320
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	2 NOT SELECTED				473
	TOTAL				15,097
WBMXNVIO	WELL BABY INTRN LIMIT:MAX # VISITS-OUT	2.0	NUM	1321	1322
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				142
	2 NOT SELECTED				331
	TOTAL				15,097
WBMXDVIO	WELL BABY INTRN LIMIT:\$ MAX /VST-OUT	2.0	NUM	1323	1324
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				21
	2 NOT SELECTED				452
	TOTAL				15,097
WBMXYRIO	WELL BABY INTRN LIMIT:\$ MAX/YR-OUT	2.0	NUM	1325	1326
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	1 SELECTED				218
	2 NOT SELECTED				255
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBOETHIO	WELL BABY INTRN LIMIT:OTHR-OUT	2.0	NUM	1327	1328
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				6,811
	2 NOT SELECTED				473
	TOTAL				15,097
WBDEDDO	WELL BABY:AMNT DEDUCT/YR-OUT	3.0	NUM	1329	1331
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				7,281
	250				3
	TOTAL				15,097
WBCOINPO	WELL BABY:% COINS FIX VARY-OUT	3.0	NUM	1332	1334
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				7,165
	40-100				119
	TOTAL				15,097
WBCOPDO	WELL BABY:AMNT COPAY /VST FIX VARY-OUT	2.0	NUM	1335	1336
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				7,200
	10-30				84
	TOTAL				15,097
WBMXNVNO	WELL BABY:# MAX # VISITS-OUT	2.0	NUM	1337	1338
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,814
	-1 NOT APPLICABLE				7,142
	2-18				141
	TOTAL				15,097
WBMXDVDO	WELL BABY:\$ AMNT \$ MAX /VST-OUT	2.0	NUM	1339	1340
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,815
	-1 NOT APPLICABLE				7,263
	20-50				19
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
WBMXYRDO	WELL BABY:\$ AMNT \$ MAX/YR-OUT	3.0	NUM	1341	1343
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,813
	-1 NOT APPLICABLE				7,066
	35-650				218
	TOTAL				15,097
HHALLO	HOME HEALTH CARE ALL LIMIT:ALL	2.0	NUM	1344	1345
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				3,930
	1 SELECTED				1,274
	2 NOT SELECTED				1,721
	TOTAL				15,097
HHDEDO	HOME HEALTH CARE ALL LIMIT:DEDUCT	2.0	NUM	1346	1347
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				3,930
	1 SELECTED				2,123
	2 NOT SELECTED				872
	TOTAL				15,097
HHCOINO	HOME HEALTH CARE ALL LIMIT:COINS/COPAY	2.0	NUM	1348	1349
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				3,930
	1 SELECTED				2,334
	2 NOT SELECTED				661
	TOTAL				15,097
HHOPO	HOME HEALTH CARE ALL LIMIT:OOP LIMIT	2.0	NUM	1350	1351
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				3,930
	1 SELECTED				2,333
	2 NOT SELECTED				662
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HHMAXO	HOME HEALTH CARE ALL LIMIT:PLAN MAX	2.0	NUM	1352	1353
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,659
	-1 NOT APPLICABLE				3,930
	1 SELECTED				2,165
	2 NOT SELECTED				343
	TOTAL				15,097
HHDEDI	HOME HEALTH CARE INTRN LIMIT:DEDUCT/YR	2.0	NUM	1354	1355
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				7
	2 NOT SELECTED				2,765
	TOTAL				15,097
HHCOIFI	HOME HEALTH CARE INTRN LIMIT:COINS FIX	2.0	NUM	1356	1357
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				605
	2 NOT SELECTED				2,167
	TOTAL				15,097
HHCOIVI	HOME HEALTH CARE INTRN LIMIT:COINS VARY	2.0	NUM	1358	1359
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				60
	2 NOT SELECTED				2,712
	TOTAL				15,097
HHCOPEI	HOME HLTH CARE INTRN LMT:COPAY/VST FIX	2.0	NUM	1360	1361
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				355
	2 NOT SELECTED				2,417
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HHCOPI	HOME HLTH CARE INTRN LMT: COPAY/VST VARY	2.0	NUM	1362	1363
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				52
	2 NOT SELECTED				2,720
	TOTAL				15,097
HHMXNI	HOME HEALTH CARE INTRN LIMIT: MAX #VISTS	2.0	NUM	1364	1365
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				2,024
	2 NOT SELECTED				748
	TOTAL				15,097
HHMXDI	HOME HEALTH CARE INTRN LIMIT: \$ MAX /VST	2.0	NUM	1366	1367
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				127
	2 NOT SELECTED				2,645
	TOTAL				15,097
HHXYRI	HOME HEALTH CARE INTRN LIMIT: \$ MAX/YR	2.0	NUM	1368	1369
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	1 SELECTED				270
	2 NOT SELECTED				2,502
	TOTAL				15,097
HHOTHI	HOME HEALTH CARE INTRN LIMIT: OTHR	2.0	NUM	1370	1371
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				4,153
	2 NOT SELECTED				2,772
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
HHDEDD	HOME HEALTH CARE:AMNT DEDUCT/YR	3.0	NUM	1372	1374
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				6,918
	50-300				7
	TOTAL				15,097
HHCOINP	HOME HEALTH CARE:% COINS FIX VARY	3.0	NUM	1375	1377
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				6,260
	50-100				665
	TOTAL				15,097
HHCODP	HOME HEALTH CARE:AMNT COPAY/VST FIX VARY	2.0	NUM	1378	1379
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				6,518
	0				46
	2-60				361
	TOTAL				15,097
HHMXNVN	HOME HEALTH CARE:# MAX # VISITS	4.0	NUM	1380	1383
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,207
	-1 NOT APPLICABLE				4,901
	2-1095				1,989
	TOTAL				15,097
HHMXDVD	HOME HEALTH CARE:\$ AMNT \$ MAX /VST	3.0	NUM	1384	1386
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				6,798
	30-200				127
	TOTAL				15,097
HHMXYRD	HOME HEALTH CARE:\$ AMNT \$ MAX/YR	5.0	NUM	1387	1391
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,172
	-1 NOT APPLICABLE				6,655
	50-15000				270
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MOALLO	MNTL HLTH OUTPAT ALL LIMIT:ALL	2.0	NUM	1392	1393
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				3,550
	1 SELECTED				589
	2 NOT SELECTED				3,450
	TOTAL				15,097
MODEDO	MNTL HLTH OUTPAT ALL LIMIT:DEDUCT	2.0	NUM	1394	1395
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				3,550
	1 SELECTED				2,664
	2 NOT SELECTED				1,375
	TOTAL				15,097
MOCOINO	MNTL HLTH OUTPAT ALL LIMIT:COINS/COPAY	2.0	NUM	1396	1397
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				3,550
	1 SELECTED				1,644
	2 NOT SELECTED				2,395
	TOTAL				15,097
MOOPOO	MNTL HLTH OUTPAT ALL LIMIT:OOP LIMIT	2.0	NUM	1398	1399
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				3,550
	1 SELECTED				2,245
	2 NOT SELECTED				1,794
	TOTAL				15,097
MOMAXO	MNTL HLTH OUTPAT ALL LIMIT:PLAN MAX	2.0	NUM	1400	1401
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,648
	-1 NOT APPLICABLE				3,550
	1 SELECTED				2,486
	2 NOT SELECTED				413
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MODEDI	MNTL HLTH OUTPAT INTRN LIMIT:DEDUCT/YR	2.0	NUM	1402	1403
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				89
	2 NOT SELECTED				6,277
	TOTAL				15,097
MOCOIFI	MNTL HLTH OUTPAT INTRN LIMIT:COINS FIX	2.0	NUM	1404	1405
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				2,193
	2 NOT SELECTED				4,173
	TOTAL				15,097
MOCOIVI	MNTL HLTH OUTPAT INTRN LIMIT:COINS VARY	2.0	NUM	1406	1407
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				300
	2 NOT SELECTED				6,066
	TOTAL				15,097
MOCOPII	MNTL HLTH OUTPAT INTRN LMT:COPAY/VST FIX	2.0	NUM	1408	1409
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				2,312
	2 NOT SELECTED				4,054
	TOTAL				15,097
MOCOPVI	MNTL HLTH OUTPT INTRN LMT:COPAY/VST VARY	2.0	NUM	1410	1411
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				410
	2 NOT SELECTED				5,956
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MOMXNVI	MNTL HLTH OUTPT INTRN LIMIT:MAX # VISITS	2.0	NUM	1412	1413
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				3,179
	2 NOT SELECTED				3,187
	TOTAL				15,097
MOMXDVI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/VIST	2.0	NUM	1414	1415
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				483
	2 NOT SELECTED				5,883
	TOTAL				15,097
MOMXYRI	MNTL HLTH OUTPAT INTRN LIMIT:\$ MAX/YR	2.0	NUM	1416	1417
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	1 SELECTED				2,193
	2 NOT SELECTED				4,173
	TOTAL				15,097
MOOHI	MNTL HLTH OUTPAT INTRN LIMIT:OTHR	2.0	NUM	1418	1419
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				1,223
	2 NOT SELECTED				6,366
	TOTAL				15,097
MODEDD	MNTL HLTH OUTPAT:AMNT DEDUCT/YR	3.0	NUM	1420	1422
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				7,500
	25-800				89
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
MOCOINP	MNTL HLTH OUTPAT:% COINS FIX VARY	3.0	NUM	1423	1425
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,517
	-1 NOT APPLICABLE				5,096
	30-100				2,484
	TOTAL				15,097
MOCOPD	MNTL HLTH OUTPT:AMT COPAY/VST FIX VARY	3.0	NUM	1426	1428
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,516
	-1 NOT APPLICABLE				4,867
	0				82
	1-100				2,632
	TOTAL				15,097
MOMXNVN	MNTL HLTH OUTPAT:# MAX # VISITS	3.0	NUM	1429	1431
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,521
	-1 NOT APPLICABLE				4,410
	3-200				3,166
	TOTAL				15,097
MOMXDVD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX /VST	3.0	NUM	1432	1434
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,508
	-1 NOT APPLICABLE				7,106
	5-500				483
	TOTAL				15,097
MOMXYRD	MNTL HLTH OUTPAT:\$ AMNT \$ MAX/YR	5.0	NUM	1435	1439
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,511
	-1 NOT APPLICABLE				5,396
	250-75000				2,190
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AOALLO	ALC/DRUG OUTP REHAB ALL LIMT:ALL	2.0	NUM	1440	1441
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				5,807
	1 SELECTED				296
	2 NOT SELECTED				851
	TOTAL				15,097
AODEDO	ALC/DRUG OUTP REHAB ALL LIMT:DEDUCT	2.0	NUM	1442	1443
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				5,802
	1 SELECTED				676
	2 NOT SELECTED				476
	TOTAL				15,097
AOCOINO	ALC/DRUG OUTP REHAB ALL LIMT:COINS/COPAY	2.0	NUM	1444	1445
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				5,802
	1 SELECTED				737
	2 NOT SELECTED				415
	TOTAL				15,097
AOOPOO	ALC/DRUG OUTP REHAB ALL LIMT:OOP LIMIT	2.0	NUM	1446	1447
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				5,807
	1 SELECTED				778
	2 NOT SELECTED				369
	TOTAL				15,097
AOMAXO	ALC/DRUG OUTP REHAB ALL LIMIT:PLAN MAX	2.0	NUM	1448	1449
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,443
	-1 NOT APPLICABLE				5,802
	1 SELECTED				724
	2 NOT SELECTED				128
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AODEDI	ALC/DRUG OUTP REHAB INTRN LMT:DEDUCT/YR	2.0	NUM	1450	1451
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				20
	2 NOT SELECTED				1,941
	TOTAL				15,097
AOCOIFI	ALC/DRUG OUTP REHAB INTRN LMT:COINS FIX	2.0	NUM	1452	1453
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				443
	2 NOT SELECTED				1,518
	TOTAL				15,097
AOCOIVI	ALC/DRUG OUTP REHAB INTRN LMT:COINS VARY	2.0	NUM	1454	1455
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				57
	2 NOT SELECTED				1,904
	TOTAL				15,097
AOCOPII	A/D OUTP REHAB INTRN LMT:COPAY/VST FIX	2.0	NUM	1456	1457
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				678
	2 NOT SELECTED				1,283
	TOTAL				15,097
AOCOPVI	A/D OUTP REHAB INTRN LMT:COPAY/VST VARY	2.0	NUM	1458	1459
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				60
	2 NOT SELECTED				1,901
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AOMXNVI	ALC/DRUG OUTP REHAB INTRN LMT:MAX #VISTS	2.0	NUM	1460	1461
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				1,028
	2 NOT SELECTED				933
	TOTAL				15,097
AOMXDVI	ALC/DRUG OUTP REHAB INTRN LMT:\$ MAX/VST	2.0	NUM	1462	1463
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				71
	2 NOT SELECTED				1,890
	TOTAL				15,097
AOMXYRI	A/DRUG OUTP REHAB INTRN LMT:\$ MAX/YR	2.0	NUM	1464	1465
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	1 SELECTED				594
	2 NOT SELECTED				1,367
	TOTAL				15,097
AOOTH1	ALC/DRUG OUTP REHAB INTRN LMT:OTHR	2.0	NUM	1466	1467
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				4,993
	2 NOT SELECTED				1,961
	TOTAL				15,097
AODEDD	ALC/DRUG OUTP REHAB:AMNT DEDUCT/YR	3.0	NUM	1468	1470
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				6,934
	100-800				20
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
AOCOINP	ALC/DRUG OUTP REHAB:% COINS FIX VARY	3.0	NUM	1471	1473
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				6,454
	40-100				500
	TOTAL				15,097
AOCOPD	A/D OUTP REHAB:AMT COPAY/VST FIX VARY	3.0	NUM	1474	1476
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				6,216
	0				7
	2-200				731
	TOTAL				15,097
AOMXNVN	ALC/DRUG OUTP REHAB:# MAX # VISITS	3.0	NUM	1477	1479
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,165
	-1 NOT APPLICABLE				5,926
	1-130				1,006
	TOTAL				15,097
AOMXDVD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX /VST	3.0	NUM	1480	1482
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,143
	-1 NOT APPLICABLE				6,883
	20-200				71
	TOTAL				15,097
AOMXYRD	ALC/DRUG OUTP REHAB:\$ AMNT \$ MAX/YR	5.0	NUM	1483	1487
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,151
	-1 NOT APPLICABLE				6,360
	35-15000				586
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
GAPTYPE	TYPE MEDIGAP PLAN	2.0	NUM	1488	1489
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,873
	1 A				4
	2 B				13
	3 C				35
	4 D				4
	5 E				1
	6 F				50
	7 G				1
	8 H				6
	9 I				1
	10 J				5
	11 OTHER				188
	TOTAL				15,097
GAPA	PART A BNFT	2.0	NUM	1490	1491
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,873
	1 YES				306
	2 NO				2
	TOTAL				15,097
GAPA1COP	PART A BNFT:HOSP COPAY - DAYS 61-90	2.0	NUM	1492	1493
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,875
	1 SELECTED				289
	2 NOT SELECTED				17
	TOTAL				15,097
GAPA2COP	PART A BNFT:HOSP COPAY - DAYS 91-150	2.0	NUM	1494	1495
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,875
	1 SELECTED				267
	2 NOT SELECTED				39
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
GAPA3COP	PART A BNFT:HOSP COPAY GT 150 DAYS	2.0	NUM	1496	1497
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,875
	1 SELECTED				245
	2 NOT SELECTED				61
	TOTAL				15,097
GAPASNF	PART A BNFT:SNF COPAY - DAYS 21-100	2.0	NUM	1498	1499
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,875
	1 SELECTED				259
	2 NOT SELECTED				47
	TOTAL				15,097
GAPADED	PART A BNFT:DEDUCT	2.0	NUM	1500	1501
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,875
	1 SELECTED				221
	2 NOT SELECTED				85
	TOTAL				15,097
GAPB	PART B BNFT	2.0	NUM	1502	1503
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,873
	1 YES				289
	2 NO				19
	TOTAL				15,097
GAPBEXC	PART B BNFT:EXCESS CHARGE	2.0	NUM	1504	1505
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,892
	1 SELECTED				84
	2 NOT SELECTED				205
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
GAPBDED	PART B BNFT:DEDUCT	2.0	NUM	1506	1507
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,892
	1 SELECTED				192
	2 NOT SELECTED				97
	TOTAL				15,097
GAPB1COI	PART B BNFT:COINS, W/OUT ADDTL DEDUCT	2.0	NUM	1508	1509
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,892
	1 SELECTED				204
	2 NOT SELECTED				85
	TOTAL				15,097
GAPB2COI	PART B BNFT:COINS, W/ ADDTL DEDUCT	2.0	NUM	1510	1511
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,892
	1 SELECTED				51
	2 NOT SELECTED				238
	TOTAL				15,097
GAPB3COI	PART B BNFT:COINS-OUTPAT MNTL HLTH	2.0	NUM	1512	1513
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,892
	1 SELECTED				171
	2 NOT SELECTED				118
	TOTAL				15,097
GAPOTH	OTHR BNFT	2.0	NUM	1514	1515
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,873
	1 YES				274
	2 NO				34
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
GAPOTHBL	OTHR BNFT:BLOOD DEDUCT	2.0	NUM	1516	1517
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,907
	1 SELECTED				250
	2 NOT SELECTED				24
	TOTAL				15,097
GAPOTHTR	OTHR BNFT:FOREIGN TRAVL BNFT-MED EMRG	2.0	NUM	1518	1519
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,907
	1 SELECTED				182
	2 NOT SELECTED				92
	TOTAL				15,097
GAPOTHHM	OTHR BNFT:AT-HOME RECOVERY	2.0	NUM	1520	1521
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,907
	1 SELECTED				45
	2 NOT SELECTED				229
	TOTAL				15,097
GAPOTHPR	OTHR BNFT:PREVENTIVE MEDICAL CARE	2.0	NUM	1522	1523
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,907
	1 SELECTED				42
	2 NOT SELECTED				232
	TOTAL				15,097
DRUGCOVB	BNFT CVRG FOR OUTPAT PMEDS (BRAND)	2.0	NUM	1524	1525
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,049
	1 COVERED IN FULL				58
	2 COVERED, NO DETAILS				768
	4 INTERNAL LIMITS ONLY				4,076
	5 OVERALL LIMITS ONLY				452
	6 INTERNAL AND OVERALL LIMITS				745
	7 NOT COVERED				28
	13 NEGOTIATED DISCOUNT ONLY				5
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRUGCOVG	BNFT CVRG FOR OUTPAT PMEDS (GEN)	2.0	NUM	1526	1527
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,918
	-1 NOT APPLICABLE				2,049
	1 COVERED IN FULL				162
	2 COVERED, NO DETAILS				300
	4 INTERNAL LIMITS ONLY				2,943
	5 OVERALL LIMITS ONLY				129
	6 INTERNAL AND OVERALL LIMITS				548
	7 NOT COVERED				3
	13 NEGOTIATED DISCOUNT ONLY				45
	TOTAL				15,097
DRMAIL	MAIL ORDER DRUGS	2.0	NUM	1528	1529
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,049
	1 NONE				3,738
	2 INCREASED BENEFITS				2,330
	3 MAIL ORDER DRUGS ONLY				64
	TOTAL				15,097
DRPP	PARTICIPATING PHARMACIES	2.0	NUM	1530	1531
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,049
	1 NONE				1,575
	2 INCREASED BENEFITS				2,347
	4 PARTICIP PHAR ONLY				2,210
	TOTAL				15,097
DRFORMUL	FORMULARY DRUGS	2.0	NUM	1532	1533
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				2,049
	1 NONE				5,084
	2 INCREASED BENEFITS				925
	5 FORMULARY DRUGS ONLY				123
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRALLOB	OUTPAT PMEDS ALL LIMIT:ALL (BRAND)	2.0	NUM	1534	1535
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,994
	1 SELECTED				260
	2 NOT SELECTED				927
	TOTAL				15,097
DRDEDOB	OUTPAT PMEDS ALL LIMIT:DEDUCT (BRAND)	2.0	NUM	1536	1537
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,984
	1 SELECTED				652
	2 NOT SELECTED				545
	TOTAL				15,097
DRCOINOB	OUTPAT PMEDS ALL LIMIT:COINS (BRAND)	2.0	NUM	1538	1539
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,991
	1 SELECTED				538
	2 NOT SELECTED				652
	TOTAL				15,097
DROOPOB	OUTP PMEDS ALL LIMIT:OOP LIMIT (BRAND)	2.0	NUM	1540	1541
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				6,987
	1 SELECTED				791
	2 NOT SELECTED				403
	TOTAL				15,097
DRMAXOB	OUTP PMEDS ALL LIMIT:PLAN MAX (BRAND)	2.0	NUM	1542	1543
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,122
	-1 NOT APPLICABLE				6,984
	1 SELECTED				820
	2 NOT SELECTED				171
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRDEDIB	OUTP_PMEDS_INTRN_LIMIT:DEDUCT/YR (BRAND)	2.0	NUM	1544	1545
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,371
	1 SELECTED				741
	2 NOT SELECTED				4,069
	TOTAL				15,097
DRCOINIB	OUTP_PMEDS_INTRN_LIMIT:COINS (BRAND)	2.0	NUM	1546	1547
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,366
	1 SELECTED				1,169
	2 NOT SELECTED				3,646
	TOTAL				15,097
DRCOPIB	OUTP_PMEDS_INTRN_LMT:COPAY/SCRIPT(BRAND)	2.0	NUM	1548	1549
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,368
	1 SELECTED				3,673
	2 NOT SELECTED				1,140
	TOTAL				15,097
DRMAXIB	OUTP_PMEDS_INTRN_LIMIT:\$ MAX/YR (BRAND)	2.0	NUM	1550	1551
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,374
	1 SELECTED				194
	2 NOT SELECTED				4,613
	TOTAL				15,097
DROTHIB	OUTP_PMEDS_INTRN_LIMIT:OTHR (BRAND)	2.0	NUM	1552	1553
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				3,374
	1 SELECTED				7
	2 NOT SELECTED				4,800
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRDEDIDB	AMNT INDIV DEDUCT/YR (BRAND)	4.0	NUM	1554	1557
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,936
	-1 NOT APPLICABLE				7,440
	15-6250				721
	TOTAL				15,097
DRDEDFDB	AMNT FAMILY DEDUCT/YR (BRAND)	3.0	NUM	1558	1560
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,458
	-1 NOT APPLICABLE				7,440
	30-1000				199
	TOTAL				15,097
DRDEDNDB	# INDIV FOR DEDUCT/YR (BRAND)	2.0	NUM	1561	1562
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,630
	-1 NOT APPLICABLE				7,440
	2				4
	3				23
	TOTAL				15,097
DRCOINPB	% COINS (BRAND)	3.0	NUM	1563	1565
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,923
	-1 NOT APPLICABLE				7,012
	20-100				1,162
	TOTAL				15,097
DRCOPDB	AMNT COPAY PER PRESCRIPTION (BRAND)	2.0	NUM	1566	1567
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,274
	-1 NOT APPLICABLE				4,508
	1-54				3,315
	TOTAL				15,097
DRMAXDB	AMNT \$ LIMIT/YR (BRAND)	5.0	NUM	1568	1572
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,987
	40-50000				194
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRALLOG	OUTP PMEDS ALL LIMIT:ALL (GEN)	2.0	NUM	1573	1574
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,504
	1 SELECTED				49
	2 NOT SELECTED				628
	TOTAL				15,097
DRDEDOG	OUTP PMEDS ALL LIMIT:DEDUCT (GEN)	2.0	NUM	1575	1576
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,504
	1 SELECTED				300
	2 NOT SELECTED				377
	TOTAL				15,097
DRCOINOG	OUTP PMEDS ALL LIMIT:COINS (GEN)	2.0	NUM	1577	1578
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,504
	1 SELECTED				162
	2 NOT SELECTED				515
	TOTAL				15,097
DROOPOG	OUTP PMEDS ALL LIMT:OOP LIMT (GEN)	2.0	NUM	1579	1580
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				7,504
	1 SELECTED				408
	2 NOT SELECTED				269
	TOTAL				15,097
DRMAXOG	OUTP PMEDS ALL LIMT:PLAN MAX (GEN)	2.0	NUM	1581	1582
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,060
	-1 NOT APPLICABLE				7,504
	1 SELECTED				427
	2 NOT SELECTED				106
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRDEDIG	OUTP_PMEDS_INTRN_LIMT:DEDUCT/YR (GEN)	2.0	NUM	1583	1584
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,690
	1 SELECTED				231
	2 NOT SELECTED				3,260
	TOTAL				15,097
DRCOINIG	OUTP_PMEDS_INTRN_LIMT:COINS (GEN)	2.0	NUM	1585	1586
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,690
	1 SELECTED				505
	2 NOT SELECTED				2,986
	TOTAL				15,097
DRCOPIG	OUTP_PMEDS_INTRN_LMT:COPAY/SCRIPT(GEN)	2.0	NUM	1587	1588
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,690
	1 SELECTED				2,989
	2 NOT SELECTED				502
	TOTAL				15,097
DRMAXIG	OUTP_PMEDS_INTRN_LIMT:\$ MAX/YR (GEN)	2.0	NUM	1589	1590
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,690
	1 SELECTED				118
	2 NOT SELECTED				3,373
	TOTAL				15,097
DROTHIG	OUTP_PMEDS_INTRN_LIMIT:OTHR (GEN)	2.0	NUM	1591	1592
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,690
	1 SELECTED				7
	2 NOT SELECTED				3,484
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DRDEDIDG	AMNT INDIV DEDUCT/YR (GENERIC)	3.0	NUM	1593	1595
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,929
	-1 NOT APPLICABLE				7,950
	15-500				218
	TOTAL				15,097
DRDEDFDG	AMNT FAMILY DEDUCT/YR (GENERIC)	3.0	NUM	1596	1598
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,043
	-1 NOT APPLICABLE				7,950
	25-1000				104
	TOTAL				15,097
DRDEDNG	# INDIV FOR DEDUCT/YR (GENERIC)	2.0	NUM	1599	1600
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,129
	-1 NOT APPLICABLE				7,950
	2				4
	3				14
	TOTAL				15,097
DRCOINPG	% COINS (GENERIC)	3.0	NUM	1601	1603
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,919
	-1 NOT APPLICABLE				7,676
	50-100				502
	TOTAL				15,097
DRCOPDG	AMNT COPAY PER PRESCRIPTION (GEN)	2.0	NUM	1604	1605
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,963
	-1 NOT APPLICABLE				5,192
	1-15				2,942
	TOTAL				15,097
DRMAXDG	AMNT \$ LIMIT/YR. (GENERIC)	5.0	NUM	1606	1610
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,063
	40-50000				118
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNPROV	TYPE DENTAL PROVIDER	2.0	NUM	1611	1612
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,251
	-1 NOT APPLICABLE				4,813
	1 EXCLUSIVE PROVIDER				757
	2 ANY PROVIDER				1,740
	3 MIX PREFRD/ANY PROVIDER				536
	TOTAL				15,097
DNPREV	PREVENTIVE DENTAL CARE CVRG	2.0	NUM	1613	1614
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,075
	-1 NOT APPLICABLE				4,813
	2 CHILDREN ONLY				149
	3 ADULTS AND CHILDREN				3,060
	TOTAL				15,097
DNORTH	ORTHODONTIA CVRG	2.0	NUM	1615	1616
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,777
	-1 NOT APPLICABLE				4,813
	1 NO BENEFIT				771
	2 CHILDREN ONLY				557
	3 ADULTS AND CHILDREN				1,179
	TOTAL				15,097
DNDETAIL	DETAILS PROVIDED FOR DENTAL CVRG	2.0	NUM	1617	1618
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				4,813
	1 YES				2,898
	2 NO				470
	TOTAL				15,097
DNDED	DENTAL DEDUCT	2.0	NUM	1619	1620
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				4,813
	1 YES				1,483
	2 NO				499
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNDEDID	AMNT INDIV DEDUCT	3.0	NUM	1621	1623
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,358
	-1 NOT APPLICABLE				5,312
	10-500				1,427
	TOTAL				15,097
DNDEDED	AMNT FAMILY DEDUCT	4.0	NUM	1624	1627
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,851
	-1 NOT APPLICABLE				5,312
	25-1000				934
	TOTAL				15,097
DNDEDN	# INDIV FOR DENTAL DEDUCT	2.0	NUM	1628	1629
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,615
	-1 NOT APPLICABLE				5,312
	2				35
	3				134
	4				1
	TOTAL				15,097
DNDEDALL	DNTL SRVCS SUBJ 2 DEDUCT:ALL COVRD SRVCS	2.0	NUM	1630	1631
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				103
	2 NOT SELECTED				1,380
	TOTAL				15,097
DNDEDEX	DENTL SRVCS SUBJ 2 DEDUCT:EXAM,XRAY	2.0	NUM	1632	1633
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				360
	2 NOT SELECTED				1,123
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNDEDSR	DENTL SRVCS SUBJ 2 DEDUCT:SURGERY	2.0	NUM	1634	1635
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				1,445
	2 NOT SELECTED				38
	TOTAL				15,097
DNDEDEL	DENTL SRVCS SUBJ 2 DEDUCT:FILLINGS	2.0	NUM	1636	1637
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				1,461
	2 NOT SELECTED				22
	TOTAL				15,097
DNDEDPR	DENTL SRVCS SUBJ 2 DEDUCT:PERIO	2.0	NUM	1638	1639
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				1,418
	2 NOT SELECTED				65
	TOTAL				15,097
DNDEDEN	DENTL SRVCS SUBJ 2 DEDUCT:ENDO	2.0	NUM	1640	1641
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				1,420
	2 NOT SELECTED				63
	TOTAL				15,097
DNDEDCR	DENTL SRVCS SUBJ 2 DEDUCT:CRWN/PROS	2.0	NUM	1642	1643
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				1,449
	2 NOT SELECTED				34
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNDEDOR	DENTL SRVCS SUBJ 2 DEDUCT:ORTHODONTIA	2.0	NUM	1644	1645
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,302
	-1 NOT APPLICABLE				5,312
	1 SELECTED				630
	2 NOT SELECTED				853
	TOTAL				15,097
DNMAX	YEARLY DENTAL MAX	2.0	NUM	1646	1647
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,123
	-1 NOT APPLICABLE				4,813
	1 YES				1,951
	2 NO				210
	TOTAL				15,097
DNMAXD	AMNT YEARLY DENTAL MAX	4.0	NUM	1648	1651
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,179
	-1 NOT APPLICABLE				5,023
	300-5000				1,895
	TOTAL				15,097
DNEX1CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (P 1)	2.0	NUM	1652	1653
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,937
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				5
	2 COVERED IN FULL				884
	3 COINSURANCE				1,276
	4 COPAY PER PROCEDURE				52
	5 COPAY PER VISIT				185
	6 FEE SCHED ALLOW PER PROC				471
	7 NEGOTIATED DISCOUNT ONLY				4
	TOTAL				15,097
DNEX1CIP	EXAM,XRAY,CLEAN:% COINS (PROV 1)	3.0	NUM	1654	1656
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,951
	-1 NOT APPLICABLE				6,884
	50-100				1,262
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNEX1CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 1)	2.0	NUM	1657	1658
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,941
	-1 NOT APPLICABLE				7,923
	1-40				233
	TOTAL				15,097
DNEX1FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 1)	2.0	NUM	1659	1660
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,946
	-1 NOT APPLICABLE				7,689
	3-60				462
	TOTAL				15,097
DNEX1DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 1)	2.0	NUM	1661	1662
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,937
	-1 NOT APPLICABLE				8,156
	20-25				4
	TOTAL				15,097
DNEX2CV	BNFT CVRG FOR EXAM,XRAY,CLEAN (PROV 2)	2.0	NUM	1663	1664
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	3 COINSURANCE				1
	TOTAL				15,097
DNEX2CIP	EXAM,XRAY,CLEAN:% COINS (PROV 2)	3.0	NUM	1665	1667
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
DNEX2CPD	EXAM,XRAY:AMNT COPAY /PROC /VST (P 2)	2.0	NUM	1668	1669
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNEX2FED	EXAM,XRAY:AMNT FEE SCHD SPEC PROC (P 2)	2.0	NUM	1670	1671
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNEX2DSD	EXAM,XRAY:AMNT NEGOTIATED DISCNT (P 2)	2.0	NUM	1672	1673
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNSR1CV	BNFT CVRG FOR SURGERY (PROV 1)	2.0	NUM	1674	1675
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,080
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				85
	2 COVERED IN FULL				144
	3 COINSURANCE				1,823
	4 COPAY PER PROCEDURE				74
	5 COPAY PER VISIT				67
	6 FEE SCHED ALLOW PER PROC				510
	7 NEGOTIATED DISCOUNT ONLY				31
	TOTAL				15,097
DNSR1CIP	SURGERY:% COINS (PROV 1)	3.0	NUM	1676	1678
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,106
	-1 NOT APPLICABLE				6,194
	30-100				1,797
	TOTAL				15,097
DNSR1CPD	SURGERY:AMNT COPAY /PROC /VST (P 1)	2.0	NUM	1679	1680
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,084
	-1 NOT APPLICABLE				7,876
	2-90				137
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNSR1FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 1)	3.0	NUM	1681	1683
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,096
	-1 NOT APPLICABLE				7,507
	5-150				494
	TOTAL				15,097
DNSR1DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 1)	2.0	NUM	1684	1685
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,100
	-1 NOT APPLICABLE				7,986
	10-25				11
	TOTAL				15,097
DNSR2CV	BNFT CVRG FOR SURGERY (PROV 2)	2.0	NUM	1686	1687
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3 COINSURANCE				1
	6 FEE SCHED ALLOW PER PROC				1
	TOTAL				15,097
DNSR2CIP	SURGERY:% COINS (PROV 2)	3.0	NUM	1688	1690
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
DNSR2CPD	SURGERY:AMNT COPAY /PROC /VST (P 2)	2.0	NUM	1691	1692
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNSR2FED	SURGERY:AMNT FEE SCHD SPEC PROC (P 2)	2.0	NUM	1693	1694
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	22				1
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNSR2DSD	SURGERY:AMNT NEGOTIATED DISCNT (P 2)	2.0	NUM	1695	1696
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNFL1CV	BNFT CVRG FOR FILLINGS (PROV 1)	2.0	NUM	1697	1698
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,030
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				60
	2 COVERED IN FULL				176
	3 COINSURANCE				1,820
	4 COPAY PER PROCEDURE				71
	5 COPAY PER VISIT				97
	6 FEE SCHED ALLOW PER PROC				534
	7 NEGOTIATED DISCOUNT ONLY				26
	TOTAL				15,097
DNFL1CIP	FILLINGS:% COINS (PROV 1)	3.0	NUM	1699	1701
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,062
	-1 NOT APPLICABLE				6,247
	50-100				1,788
	TOTAL				15,097
DNFL1CPD	FILLINGS:AMNT COPAY /PROC /VST (P 1)	2.0	NUM	1702	1703
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,033
	-1 NOT APPLICABLE				7,899
	2-47				165
	TOTAL				15,097
DNFL1FED	FILLINGS:AMNT FEE SCHED SPEC PROC (P 1)	3.0	NUM	1704	1706
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,044
	-1 NOT APPLICABLE				7,533
	7-100				520
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNFL1DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 1)	2.0	NUM	1707	1708
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,046
	-1 NOT APPLICABLE				8,041
	10-50				10
	TOTAL				15,097
DNFL2CV	BNFT CVRG FOR FILLINGS (PROV 2)	2.0	NUM	1709	1710
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3 COINSURANCE				1
	6 FEE SCHED ALLOW PER PROC				1
	TOTAL				15,097
DNFL2CIP	FILLINGS:% COINS (PROV 2)	3.0	NUM	1711	1713
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
DNFL2CPD	FILLINGS:AMNT COPAY /PROC /VST (P 2)	2.0	NUM	1714	1715
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNFL2FED	FILLINGS:AMNT FEE SCHD SPEC PROC (P 2)	2.0	NUM	1716	1717
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	24				1
	TOTAL				15,097
DNFL2DSD	FILLINGS:AMNT NEGOTIATED DISCNT (P 2)	2.0	NUM	1718	1719
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNPR1CV	BNFT CVRG FOR PERIO (PROV 1)	2.0	NUM	1720	1721
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,144
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				414
	2 COVERED IN FULL				91
	3 COINSURANCE				1,787
	4 COPAY PER PROCEDURE				77
	5 COPAY PER VISIT				70
	6 FEE SCHED ALLOW PER PROC				201
	7 NEGOTIATED DISCOUNT ONLY				30
	TOTAL				15,097
DNPR1CIP	PERIO:% COINS (PROV 1)	3.0	NUM	1722	1724
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,181
	-1 NOT APPLICABLE				6,166
	25-100				1,750
	TOTAL				15,097
DNPR1CPD	PERIO:AMNT COPAY /PROC OR /VST (P 1)	3.0	NUM	1725	1727
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,150
	-1 NOT APPLICABLE				7,806
	2-224				141
	TOTAL				15,097
DNPR1FED	PERIO:AMNT FEE SCHED SPEC PROC (P 1)	3.0	NUM	1728	1730
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,162
	-1 NOT APPLICABLE				7,752
	10-259				183
	TOTAL				15,097
DNPR1DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 1)	2.0	NUM	1731	1732
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,164
	-1 NOT APPLICABLE				7,923
	10-25				10
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNPR2CV	BNFT CVRG FOR PERIO (PROV 2)	2.0	NUM	1733	1734
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3 COINSURANCE				1
	6 FEE SCHED ALLOW PER PROC				1
	TOTAL				15,097
DNPR2CIP	PERIO:% COINS (PROV 2)	2.0	NUM	1735	1736
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	50				1
	TOTAL				15,097
DNPR2CPD	PERIO:AMNT COPAY /PROC OR /VST (P 2)	2.0	NUM	1737	1738
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNPR2FED	PERIO:AMNT FEE SCHED SPEC PROC (P 2)	2.0	NUM	1739	1740
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	42				1
	TOTAL				15,097
DNPR2DSD	PERIO:AMNT NEGOTIATED DISCNT (PROV 2)	2.0	NUM	1741	1742
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNEN1CV	BNFT CVRG FOR ENDO (PROV 1)	2.0	NUM	1743	1744
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,144
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				405
	2 COVERED IN FULL				97
	3 COINSURANCE				1,792
	4 COPAY PER PROCEDURE				86
	5 COPAY PER VISIT				66
	6 FEE SCHED ALLOW PER PROC				193
	7 NEGOTIATED DISCOUNT ONLY				31
	TOTAL				15,097
DNEN1CIP	ENDO:% COINS (PROV 1)	3.0	NUM	1745	1747
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,182
	-1 NOT APPLICABLE				6,161
	30-100				1,754
	TOTAL				15,097
DNEN1CPD	ENDO:AMNT COPAY /PROC OR /VST (P 1)	3.0	NUM	1748	1750
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,146
	-1 NOT APPLICABLE				7,801
	2-310				150
	TOTAL				15,097
DNEN1FED	ENDO:AMNT FEE SCHED SPEC PROC (P 1)	3.0	NUM	1751	1753
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,162
	-1 NOT APPLICABLE				7,760
	19-325				175
	TOTAL				15,097
DNEN1DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 1)	2.0	NUM	1754	1755
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,164
	-1 NOT APPLICABLE				7,922
	10-25				11
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNEN2CV	BNFT CVRG FOR ENDO (PROV 2)	2.0	NUM	1756	1757
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3 COINSURANCE				1
	6 FEE SCHED ALLOW PER PROC				1
	TOTAL				15,097
DNEN2CIP	ENDO:% COINS (PROV 2)	2.0	NUM	1758	1759
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	50				1
	TOTAL				15,097
DNEN2CPD	ENDO:AMNT COPAY /PROC OR /VST (PRV 2)	2.0	NUM	1760	1761
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNEN2FED	ENDO:AMNT FEE SCHED SPEC PROC (PRV 2)	3.0	NUM	1762	1764
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	128				1
	TOTAL				15,097
DNEN2DSD	ENDO:AMNT NEGOTIATED DISCNT (PROV 2)	2.0	NUM	1765	1766
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNCRI1CV	BNFT CVRG FOR CRWN/PROS (PROV 1)	2.0	NUM	1767	1768
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,110
	-1 NOT APPLICABLE				5,283
	1 NOT COVERED				418
	2 COVERED IN FULL				53
	3 COINSURANCE				1,820
	4 COPAY PER PROCEDURE				109
	5 COPAY PER VISIT				65
	6 FEE SCHED ALLOW PER PROC				209
	7 NEGOTIATED DISCOUNT ONLY				30
	TOTAL				15,097
DNCRI1CIP	CRWN/PROS:% COINS (PROV 1)	3.0	NUM	1769	1771
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,138
	-1 NOT APPLICABLE				6,167
	25-100				1,792
	TOTAL				15,097
DNCRI1CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 1)	3.0	NUM	1772	1774
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,115
	-1 NOT APPLICABLE				7,813
	2-450				169
	TOTAL				15,097
DNCRI1FED	CRWN/PROS:AMNT FEE SCHED SPEC PROC (P 1)	3.0	NUM	1775	1777
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,129
	-1 NOT APPLICABLE				7,778
	90-695				190
	TOTAL				15,097
DNCRI1DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 1)	2.0	NUM	1778	1779
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,130
	-1 NOT APPLICABLE				7,957
	10-25				10
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
DNCR2CV	BNFT CVRG FOR CRWN/PROS (PROV 2)	2.0	NUM	1780	1781
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,179
	3 COINSURANCE				1
	6 FEE SCHED ALLOW PER PROC				1
	TOTAL				15,097
DNCR2CIP	CRWN/PROS:% COINS (PROV 2)	2.0	NUM	1782	1783
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	50				1
	TOTAL				15,097
DNCR2CPD	CRWN/PROS:AMNT COPAY /PROC /VST (P 2)	2.0	NUM	1784	1785
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
DNCR2FED	CRWN/PROS:AMNT FEE SCHED SPEC PROC (P 2)	3.0	NUM	1786	1788
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	206				1
	TOTAL				15,097
DNCR2DSD	CRWN/PROS:AMNT NEGOTIATED DISCNT (P 2)	2.0	NUM	1789	1790
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSPROV	TYPE VISION PROVIDER	2.0	NUM	1791	1792
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				7,069
	-1 NOT APPLICABLE				5,102
	1 EXCLUSIVE PROVIDER				1,791
	2 ANY PROVIDER				695
	3 MIX PREFD/ANY PROV				440
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSCOV	VISION BNFT APPLIED	2.0	NUM	1793	1794
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,966
	-1 NOT APPLICABLE				5,102
	2 CHILDREN ONLY				139
	3 ADULTS AND CHILDREN				2,890
	TOTAL				15,097
VSDETAIL	DETAILS PROVIDED FOR VISION CVRG	2.0	NUM	1795	1796
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				5,102
	1 YES				2,861
	2 NO				218
	TOTAL				15,097
VSDED	VISION DEDUCT	2.0	NUM	1797	1798
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,973
	-1 NOT APPLICABLE				5,102
	1 YES				70
	2 NO				952
	TOTAL				15,097
VSDEDD	AMNT VISION DEDUCT	3.0	NUM	1799	1801
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,977
	-1 NOT APPLICABLE				6,054
	5-500				66
	TOTAL				15,097
VSMAX	VISION MAX	2.0	NUM	1802	1803
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,076
	-1 NOT APPLICABLE				5,102
	1 YES				79
	2 NO				840
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSMAXD	AMNT VISION MAX	4.0	NUM	1804	1807
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				9,079
	-1 NOT APPLICABLE				5,942
	55-2500				76
	TOTAL				15,097
VSEX1CV	BNFT CVRG FOR EYE EXAMS (PROV 1)	2.0	NUM	1808	1809
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,953
	-1 NOT APPLICABLE				5,320
	1 NOT COVERED				7
	2 COVERED IN FULL				532
	3 COINSURANCE				215
	4 COPAY				1,722
	5 DOLLAR MAXIMUM				305
	6 RETAIL DISCOUNT				36
	7 SUBJECT OVERALL DEDUCT				7
	TOTAL				15,097
VSEX1CIP	EYE EXAMS:% COINS (PROV 1)	3.0	NUM	1810	1812
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,965
	-1 NOT APPLICABLE				7,929
	15-100				203
	TOTAL				15,097
VSEX1CPD	EYE EXAMS:AMNT COPAY (PROV 1)	2.0	NUM	1813	1814
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,961
	-1 NOT APPLICABLE				6,422
	1-99				1,714
	TOTAL				15,097
VSEX1MXD	EYE EXAMS:AMNT \$ MAX (PROV 1)	3.0	NUM	1815	1817
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,960
	-1 NOT APPLICABLE				7,839
	5-150				298
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSEX2CV	BNFT CVRG FOR EYE EXAMS (PROV 2)	2.0	NUM	1818	1819
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	3 COINSURANCE				1
	TOTAL				15,097
VSEX2CIP	EYE EXAMS:% COINS (PROV 2)	3.0	NUM	1820	1822
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
VSEX2CPD	EYE EXAMS:AMNT COPAY (PROV 2)	2.0	NUM	1823	1824
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSEX2MXD	EYE EXAMS:AMNT \$ MAX (PROV 2)	2.0	NUM	1825	1826
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSEX3CV	BNFT CVRG FOR EYE EXAMS (PROV 3)	2.0	NUM	1827	1828
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSEX3CIP	EYE EXAMS:% COINS (PROV 3)	2.0	NUM	1829	1830
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSEX3CPD	EYE EXAMS:AMNT COPAY (PROV 3)	2.0	NUM	1831	1832
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSEX3MXD	EYE EXAMS:AMNT \$ MAX (PROV 3)	2.0	NUM	1833	1834
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSGL1CV	BNFT CVRG FOR EYE GLASSES (PROV 1)	2.0	NUM	1835	1836
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,036
	-1 NOT APPLICABLE				5,320
	1 NOT COVERED				396
	2 COVERED IN FULL				134
	3 COINSURANCE				83
	4 COPAY				292
	5 DOLLAR MAXIMUM				624
	6 RETAIL DISCOUNT				205
	7 SUBJECT OVERALL DEDUCT				7
	TOTAL				15,097
VSGL1CIP	EYE GLASSES:% COINS (PROV 1)	3.0	NUM	1837	1839
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,040
	-1 NOT APPLICABLE				6,978
	50-100				79
	TOTAL				15,097
VSGL1CPD	EYE GLASSES:AMNT COPAY (PROV 1)	3.0	NUM	1840	1842
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,045
	-1 NOT APPLICABLE				6,769
	2-130				283
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSGL1MXD	EYE GLASSES:AMNT \$ MAX (PROV 1)	3.0	NUM	1843	1845
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				8,050
	-1 NOT APPLICABLE				6,437
	2-190				610
	TOTAL				15,097
VSGL2CV	BNFT CVRG FOR EYE GLASSES (PROV 2)	2.0	NUM	1846	1847
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,177
	5 DOLLAR MAXIMUM				1
	6 RETAIL DISCOUNT				3
	TOTAL				15,097
VSGL2CIP	EYE GLASSES:% COINS (PROV 2)	2.0	NUM	1848	1849
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSGL2CPD	EYE GLASSES:AMNT COPAY (PROV 2)	2.0	NUM	1850	1851
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSGL2MXD	EYE GLASSES:AMNT \$ MAX (PROV 2)	3.0	NUM	1852	1854
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,180
	100				1
	TOTAL				15,097
VSGL3CV	BNFT CVRG FOR EYE GLASSES PROV 3)	2.0	NUM	1855	1856
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

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NAME	DESCRIPTION	FORMAT	TYPE	START	END
VSGL3CIP	EYE GLASSES:% COINS (PROV 3)	2.0	NUM	1857	1858
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSGL3CPD	EYE GLASSES:AMNT COPAY (PROV 3)	2.0	NUM	1859	1860
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097
VSGL3MXD	EYE GLASSES:AMNT \$ MAX (PROV 3)	2.0	NUM	1861	1862
	VALUE				UNWEIGHTED
	-9 NOT SPECIFIED				6,916
	-1 NOT APPLICABLE				8,181
	TOTAL				15,097

E. Variable-Source Crosswalk

HC-HIPA Linked Data Research File Crosswalk of Variables to Variable Source

OVERALL LIMIT VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE (HIPA VARIABLES)
OVLIMIT	OVERALL LIMIT INDICATOR	MEDICAL, OVERLIMI
OVDEDI	OVERALL INDIVIDUAL DEDUCTIBLE	MEDICAL, OVERLIMI, DEDI, DEDIDI, DEDIPCTI
OVDEDF	OVERALL FAMILY DEDUCTIBLE	MEDICAL, OVERLIMI, DEDI, DEDFDI,
OVRATE	OVERALL COINSURANCE RATE	MEDICAL, OVERLIMI, COICOPI, COICOPPI, COICOPDI, DRVEXP
OVPAYT	OVERALL PAYMENT TYPE	MEDICAL, OVERLIMI, COICOPI
OVMAXIY	OVERALL ANNUAL MAXIMUM	MEDICAL, OVERLIMI, MAXNONEI, MAXNSI, MAXCYI, MAXCYDI,
OVMAXIL	OVERALL LIFETIME MAXIMUM	MEDICAL, OVERLIMI, MAXNONEI, MAXNSI, MAXLIFI, MAXLIFDI
OVMOOPI	OVERALL INDIVIDUAL OUT OF POCKET MAXIMUM	MEDICAL, OVERLIMI, OOPI, OOPII, OOPIDI, OVRATE, OOPDEDFL, OVDEDI
OVMOOPF	OVERALL FAMILY OUT OF POCKET MAXIMUM	MEDICAL, OVERLIMI, OOPI, OOPFI, OOPFDI, OVRATE, ODEDFL, OVDEDF
OOPDEDFL	FLAG: DEDUCTIBLE INCLUDED IN OOP LIMIT?	OOPDEDI

HOSPITAL ROOM AND BOARD VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE (HIPA VARIABLES)
HOSPCOV	HOSPITAL R / B COVERAGE INDICATOR	MEDICAL, HSCОВI
HOSPDEDI	HOSPITAL R / B INDIVIDUAL DEDUCTIBLE	MEDICAL, HSCОВI, HSDEDI, HSDEDIYI, HSDEDIYNI, HOSPEXP, HSDEDI, OVDEDI
FDEDIO_H	FLAG: HOSP. DED. INTERNAL / OVERALL	MEDICAL, HSCОВI, HSDEDI, HSDEDIYI, HSDEDI
HOSPRATE	HOSPITAL R / B COINSURANCE RATE	MEDICAL, HSCОВI, HSCOINI, HSCOINPI, HSDEDI, HSDEDIYI, HSDEDIYNI, HOSPEXP, HSCOINOI, COICOPI, COICOPPI, COICOPDI, HSMXDYDI, HSMXDYDI, HSMXCYI, HSMXCYDI
HOSPPAYT	HOSPITAL R / B PAYMENT TYPE	MEDICAL, HSCОВI, HSCOINI, HSCOINPI, HSDEDI, HSDEDIYI, HSDEDIYNI, HSCOINOI, COICOPI
HOSPMAXY	HOSPITAL R / B ANNUAL MAXIMUM	MEDICAL, HSCОВI, HSMAXDI, HSMXCYDI, HSMAXNI, HSMXCYNI, HSMAXOI, MAXCYI, MAXCYDI, OVMAXIY, OVMAXIL
FMAXIO_H	FLAG: HOSP. ANN. MAX INTERNAL / OVERALL	MEDICAL, HSCОВI, HSMAXDI, HSMAXNI, HSMAXOI, MAXCYI
HOSPMAXL	HOSPITAL R / B LIFETIME MAXIMUM	MEDICAL, HSCОВI, HSMAXOI, MAXLFI, MAXLFDI, OVMAXIL
HOSPMOOP	HOSPITAL R / B INTERNAL OOP MAXIMUM	MEDICAL, HSCОВI, HSOOPI, HSOOPDI, HSOOPOI
FOOP_H	FLAG: HOSP OOP INTERNAL / OVERALL	MEDICAL, HSCОВI, HSOOPI, HSOOPOI
HSPMAXNT	HOSPITAL R / B MAX NIGHTS / YEAR	MEDICAL, HSCОВI, HSMAXNI, HSMXCYNI

PHYSICIAN OFFICE VISIT VARIABLES - PUBLIC USE

VARIABLE	LABEL	SOURCE
DRVCOV	PHYSICIAN OFF. VIS. COVERAGE INDICATOR	MEDICAL, OFCOVI
DRVDEDI	PHYSICIAN OFF. VIS. IND. DEDUCTIBLE	MEDICAL, OFCOVI, OFDEDII, OFDEDDI, OFDEDOI, OVDEDI
FDEDIO_P	FLAG: PHYS. DED. INTERNAL / OVERALL	MEDICAL, OFCOVI, OFDEDII, , OFDEDOI
DRVRATE	PHYSICIAN OFF. VIS. COINSURANCE RATE	MEDICAL, OFCOVI, OFCOIFII, OFCOPFII, OFCOPVII, OFCOINPI, OFCOPDI, DRVEXP, OFCOINOI, COICOPI, COICOPPI, COICOPDI
DRVPAYT	PHYSICIAN OFF. VIS. PAYMENT TYPE	MEDICAL, OFCOVI, OFCOIFII, OFCOPFII, OFCOPVII, OFCOINOI, COICOPI
DRVMAXIY	PHYSICIAN OFF. VIS. ANNUAL MAXIMUM	MEDICAL, OFCOVI, OFMXYRII, OFMXYRDI, OFMXNVII, OFMXNVNI, DRVEXP, OFMAXOI, MAXCYI, MAXCYDI, OVMAXIY, OVMAXIL
FMAXIO_P	FLAG: PHYS. ANN. MAX INTERNAL / OVERALL	MEDICAL, OFCOVI, OFMXYRII, OFMXNVII, OFMAXOI
DRVMAXIL	PHYSICIAN OFF. VIS. LIFETIME MAXIMUM	MEDICAL, OFCOVI, OFMAXOI, MAXLIFI, MAXLIFDI, OVMAXIL
DRVMAXVS	PHYSICIAN OFF. VIS. MAX VISITS / YEAR	MEDICAL, OFCOVI, OFMSNVII, OFMXNVNI

OUTPATIENT PRESCRIPTION DRUG COVERAGE VARIABLES - PUBLIC USE

DRGCOV	DRUG COVERAGE INDICATOR	DRUGS, DRUGCOVB, DRUGCOVG
DRGDEDI	DRUG INDIVIDUAL DEDUCTIBLE	DRUGS, DRUGCOVB, DRDEDIB, DRDEDIDB, DRDEDOB, DRUGCOVG, DRDEDIG, DRDEDIDG, DRDEDOG, DEDI, OVDEDI
FDEDIO_D	FLAG: DRUG. DED. INTERNAL / OVERALL	DRUGS, DRUGCOVB, DRDEDIB, DRDEDOB, DRUGCOVG, DRDEDIG, DRDEDOG
DRGRATE	DRUG COINSURANCE RATE	DRUGS, DRUGCOVB, DRUGCOVG, DRCOINOB, DRCOINIB, DRCOPIB, DRDOPDB, DRCOINPB, DRCOINOG, DRCOINIG, DRCOPIG, DRDOPDG, DRCOINPG, COICOPI, COICOPPI, COICOPDI,
DRGPAYT	DRUG PAYMENT TYPE	DRUGS, DRUGCOVB, DRUGCOVG, DRCOINOB, DRCOINIB, DRCOPIB, DRCOINOG, DRCOINIG, DRCOPIG, COICOPI
DRGMAXIY	DRUG ANNUAL MAXIMUM	DRUGS, DRUGCOVB, DRMAXIB, DRMAXDB, DRMAXOB, DRUGCOVG, DRMAXIG, DRMAXDG, DRMAXOG, MAXCYI, MAXCYDI, OVMAXIY, OVMAXIL
FMAXIO_D	FLAG: DRUG. ANN. MAX INTERNAL / OVERALL	DRUGS, DRUGCOVB, DRMAXIB, DRMAXOB, DRUGCOVG, DRMAXIG, DRMAXOG, MAXCYI, MAXCYDI,
DRGMAXIL	DRUG LIFETIME MAXIMUM	DRUGS, DRUGCOVB, DRMAXOB, DRUGCOVG, DRMAXOG, MAXLIFI, MAXLIFDI, OVMAXIL
DRGINOOP	FLAG: DRUGS INCLUDED IN OOP LIMIT?	MEDICAL, OVERLIMI, OOP, OOPAPPI, OOPDRUGI