#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

DATE: May 7, 2019

#### ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

START	END	NAME	DESCRIPTION
60	61	DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV
56	57	DRSPLTY	MVIS DOCTOR'S SPECIALTY
1	5	DUID	DWELLING UNIT ID
9	16	DUPERSID	PERSON ID (DUID + PID)
76	77	EKG	THIS VISIT DID P HAVE AN EKG, EEG OR ECG
29	29	EVENTRN	EVENT ROUND NUMBER
17	28	EVNTIDX	EVENT ID
88	89	FFBEF17	TOTAL # OF VISITS IN FF BEFORE 2017
30	41	FFEEIDX	FLAT FEE ID
86	87	FFOBTYPE	FLAT FEE BUNDLE
90	91	FFTOT18	TOTAL # OF VISITS IN FF AFTER 2017
202	202	IMPFLAG	IMPUTATION STATUS
66	67	LABTEST	THIS VISIT DID P HAVE LAB TESTS
72	73	MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM
84	85	MEDPRESC	ANY MEDICINE PRESCRIBED FOR P THIS VISIT
58	59	MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT
45	45	MPCDATA	MPC DATA FLAG
44	44	MPCELIG	MPC ELIGIBILITY FLAG
74	75	MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN
50	51	OBDATEMM	EVENT DATE - MONTH
46	49	OBDATEYR	EVENT DATE - YEAR
108	115	OBMD17X	AMOUNT PAID, MEDICAID (IMPUTED)
100	107	OBMR17X	AMOUNT PAID, MEDICARE (IMPUTED)
139	145	OBOF17X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)
161	168	OBOR17X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)
177	184	OBOT17X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)
169	176	OBOU17X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)
116	123	OBPV17X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)
92	99	OBSF17X	AMOUNT PAID, FAMILY (IMPUTED)
146	153	OBSL17X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)
193	201	OBTC17X	HHLD REPORTED TOTAL CHARGE (IMPUTED)
132	138	OBTR17X	AMOUNT PAID, TRICARE (IMPUTED)
124	131	OBVA17X	AMOUNT PAID, VETERANS/CHAMPVA(IMPUTED)
154	160	OBWC17X	AMOUNT PAID, WORKERS COMP (IMPUTED)
185	192	OBXP17X	SUM OF OBSF17X - OBOT17X (IMPUTED)
80	81	OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM
42	43	PANEL	PANEL NUMBER
203	214	PERWT17F	EXPENDITURE FILE PERSON WEIGHT, 2017
6	8	PID	PERSON NUMBER
78	79	RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION
54	55	SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL
52	53	SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE
68	69	SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD
82	83	SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT

#### DATE: May 7, 2019

#### ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

PAGE: 2

START	END	NAME	DESCRIPTION
219	219	VARPSU	VARIANCE ESTIMATION PSU, 2017
215	218	VARSTR	VARIANCE ESTIMATION STRATUM, 2017
62	63	VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT
64	65	VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND
70	71	XRAYS	THIS VISIT DID P HAVE X-RAYS

DATE: May 7, 2019

#### ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

START	END	NAME	DESCRIPTION
1	5	DUID	DWELLING UNIT ID
6	8	PID	PERSON NUMBER
9	16	DUPERSID	PERSON ID (DUID + PID)
17	28	EVNTIDX	EVENT ID
29	29	EVENTRN	EVENT ROUND NUMBER
30	41	FFEEIDX	FLAT FEE ID
42	43	PANEL	PANEL NUMBER
44	44	MPCELIG	MPC ELIGIBILITY FLAG
45	45	MPCDATA	MPC DATA FLAG
46	49	OBDATEYR	EVENT DATE - YEAR
50	51	OBDATEMM	EVENT DATE - MONTH
52	53	SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE
54	55	SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL
56	57	DRSPLTY	MVIS DOCTOR'S SPECIALTY
58	59	MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT
60	61	DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV
62	63	VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT
64	65	VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND
66	67	LABTEST	THIS VISIT DID P HAVE LAB TESTS
68	69	SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD
70	71	XRAYS	THIS VISIT DID P HAVE X-RAYS
72	73	MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM
74	75	MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN
76	77	EKG	THIS VISIT DID P HAVE AN EKG, EEG OR ECG
78	79	RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION
80	81	OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM
82	83 85	SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT ANY MEDICINE PRESCRIBED FOR P THIS VISIT
84 86	85 87	MEDPRESC	FLAT FEE BUNDLE
88	87 89	FFOBTYPE FFBEF17	TOTAL # OF VISITS IN FF BEFORE 2017
90	91	FFTOT18	TOTAL # OF VISITS IN FF BEFORE 2017
92	99	OBSF17X	AMOUNT PAID, FAMILY (IMPUTED)
100	107	OBSF17X OBMR17X	AMOUNT PAID, MEDICARE (IMPUTED)
108	115	OBMD17X	AMOUNT PAID, MEDICAID (IMPUTED)
116	123	OBPV17X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)
124	131	OBVA17X	AMOUNT PAID, VETERANS/CHAMPVA(IMPUTED)
132	138	OBTR17X	AMOUNT PAID, TRICARE (IMPUTED)
139	145	OBOF17X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)
146	153	OBSL17X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)
154	160	OBWC17X	AMOUNT PAID, WORKERS COMP (IMPUTED)
161	168	OBOR17X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)
169	176	OBOU17X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)
177	184	OBOT17X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)
185	192	OBXP17X	SUM OF OBSF17X - OBOT17X (IMPUTED)

DATE: May 7, 2019

#### ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

PAGE: 4

START	END	NAME	DESCRIPTION
193	201	OBTC17X	HHLD REPORTED TOTAL CHARGE (IMPUTED)
202	202	IMPFLAG	IMPUTATION STATUS
203	214	PERWT17F	EXPENDITURE FILE PERSON WEIGHT, 2017
215	218	VARSTR	VARIANCE ESTIMATION STRATUM, 2017
219	219	VARPSU	VARIANCE ESTIMATION PSU, 2017

# MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	F	ORMAT	TYPE	START	END
DUID	DWELLING UNIT ID		5.0	NUM	<u>1</u>	<u>5</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT17F
	VALID ID TOTAL	170,491 170,491			1,878,56 1,878,56	
PID	PERSON NUMBER		3.0	NUM	<u>6</u>	<u>8</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	<u>WT17F</u>
	VALID ID TOTAL	170,491 170,491			1,878,56 1,878,56	
DUPERSID	PERSON ID (DUID + PID)		8.0	CHAR	9	<u>16</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	<u>WT17F</u>
	VALID ID TOTAL	170,491 170,491			1,878,56 1,878,56	
EVNTIDX	EVENT ID		12.0	CHAR	<u>17</u>	28
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	<u>WT17F</u>
	VALID ID TOTAL	170,491 170,491			1,878,56 1,878,56	
EVENTRN	EVENT ROUND NUMBER		1.0	NUM	29	<u>29</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT17F
	ROUND 1 ROUND 2 ROUND 3 ROUND 4 ROUND 5 TOTAL	20,573 37,357 44,734 34,666 33,161 170,491			221,53 402,58 470,02 400,43 383,97 1,878,56	7,009 2,376 3,673 9,875
		•				

# MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

May 7, 2019

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
FFEEIDX	FLAT FEE ID		12.0	CHAR	<u>30</u>	<u>41</u>
	VALUE	UNWEIGHTED	;	WEIGHTE	D BY PE	RWT17F
	-1 INAPPLICABLE VALID ID TOTAL	167,321 3,170 170,491			1,839,5 39,0 1,878,5	25,614
PANEL	PANEL NUMBER		2.0	NUM	42	<u>43</u>
	VALUE	UNWEIGHTED	,	WEIGHTE	D BY PE	RWT17F
	PANEL 21 PANEL 22 TOTAL	82,991 87,500 170,491				300,755 260,830 361,585
MPCELIG	MPC ELIGIBILITY FLAG		1.0	<u>NUM</u>	44	44
	VALUE	UNWEIGHTED	,	WEIGHTE	D BY PE	RWT17F
	1 MPC ELIGIBLE 2 NOT MPC ELIGIBLE TOTAL	125,040 45,451 170,491			1,342,0 536,5 1,878,5	34,790
MPCDATA	MPC DATA FLAG		1.0	NUM	<u>45</u>	<u>45</u>
	VALUE	UNWEIGHTED	,	WEIGHTE	D BY PE	RWT17F
	1 HAS MPC DATA 2 NO MPC DATA TOTAL	55,758 114,733 170,491			599,4 1,279,1 1,878,5	
OBDATEYR	EVENT DATE - YEAR		4.0	NUM	46	49
	VALUE	UNWEIGHTED	,	WEIGHTE	D BY PE	RWT17F
	-8 DK 2017 TOTAL	3 170,488 170,491			1,878,5 1,878,5	

May 7, 2019

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBDATEMM	EVENT DATE - MONTH		2.0	NUM	<u>50</u>	<u>51</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	234				0,174
	-8 DK 1 - 12 MONTH	20 170,237			1,876,12	4,122
	TOTAL	170,237			1,878,56	
	IOIAL	170,431			1,070,50	,1,303
SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE		2.0	NUM	<u>52</u>	<u>53</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PER	WT17F
	-8 DK	13			10	9,225
	-7 REFUSED	3				9,634
	-1 INAPPLICABLE	62,731			681,11	5,045
	1 SAW PROVIDER	106,955			1,188,12	6,077
	2 TELEPHONE CALL	789				1,603
	TOTAL	170,491			1,878,56	1,585
SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL		2.0	NUM	<u>54</u>	<u>55</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	979			13,23	5,125
	-8 DK	827				13,373
	-7 REFUSED	9				6,848
	1 YES	94,927			1,021,82	
	2 NO	73,749			837,03	•
	TOTAL	170,491			1,878,56	1,585
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	NUM	<u>56</u>	<u>57</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	114			1,18	3,167
	(CONT'D ON NEXT PAGE)					

May 7, 2019 DATE:

NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	<u>NUM</u>	<u>56</u>	<u>57</u>
	VALUE	UNWEIGHTED	WE :	IGHTEI	BY PER	WT17F
	(CONT'D FROM PREVIOUS PAGE)					
	-8 DK	1,253			11,38	6,274
	-7 REFUSED	5			3	3,484
	-1 INAPPLICABLE	75,564			856,73	3,836
	1 ALLERGY/IMMUNOLOGY	950			13,15	5,954
	2 ANESTHESIOLOGY	209			2,67	5,869
	3 CARDIOLOGY (HEART)	3,358			36,25	2,939
	4 DERMATOLOGY (SKIN)	2,718			35,63	7,921
	5 ENDOCRINOLOGY/METABOLISM	1,146			12,98	6,317
	6 FAMILY PRACTICE	11,597			119,12	6,146
	7 GASTROENTEROLOGY	1,575			16,30	3,716
	8 GENERAL PRACTICE	16,300			169,95	7,766
	9 GENERAL SURGERY	1,007			10,01	7,405
	10 GERIATRICS (ELDERLY)	149			1,42	7,496
	11 GYNECOLOGY/OBSTETRICS	5,050			55,19	7,745
	12 HEMATOLOGY (BLOOD)	269			2,95	9,375
	13 HOSPITAL RESIDENCE	8			10	7,898
	14 INTERNAL MEDICINE	4,768			53,88	1,761
	15 NEPHROLOGY (KIDNEYS)	1,950			15,85	8,988
	16 NEUROLOGY	1,894			20,14	4,572
	18 ONCOLOGY	2,098			20,65	8,551
	19 OPHTHALMOLOGY	6,793			76,46	6,142
	20 ORTHOPEDICS	4,770			57,46	2,668
	21 OSTEOPATHY	500			5,58	7,718
	22 OTORHINOLARYNGOLOGY	1,398			16,24	2,265
	23 PATHOLOGY	62			41	5,734
	24 PEDIATRICIAN	8,660			90,30	3,208
	25 PHYSICAL MEDICINE/REHAB	512			6,44	4,037
	26 PLASTIC SURGERY	230				6,527
	27 PROCTOLOGY	44				6,384
	28 PSYCHIATRY	5,626			56,07	•
	29 PULMONARY	892			•	6,734
	30 RADIOLOGY	318				4,390
	(CONT'D ON NEXT PAGE)				,	•

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	NUM	<u>56</u>	<u>57</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTE	D BY PE	RWT17F
	(CONT'D FROM PREVIOUS PAGE)					
	31 RHEUMATOLOGY (ARTHRITIS)	853			9,5	9,803
	32 THORACIC SURGERY	43				6,610
	33 UROLOGY	1,459				4,462
	91 OTHER DR SPECIALTY	6,349				928
	TOTAL	170,491		:	1,878,56	1,585
MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT		2.0	NUM	58	<u>59</u>
MEDETTEE	TIPE OF MED PERSON P TABLED TO ON VST DI		2.0	NOM	30	33
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PEI	RWT17F
	-9 NOT ASCERTAINED	1,015			13,5	77,185
	-8 DK	470			4,70	4,444
	-7 REFUSED	10			12	29,754
	-1 INAPPLICABLE	94,927			1,021,82	7,749
	1 CHIROPRACTOR	10,840			131,98	36,927
	2 DENTIST/DENTAL CARE PERSON	281			3,21	4,883
	3 MIDWIFE	241			2,73	88,598
	4 NURSE/NURSE PRACTITIONER	11,721			125,40	
	5 OPTOMETRIST	2,752			33,05	4,487
	6 PODIATRIST	1,119				39,173
	7 PHYSICIAN'S ASSISTANT	3,095				11,545
	8 PHYSICAL THERAPIST	12,969			150,52	•
	9 OCCUPATIONAL THERAPIST	860				32,086
	10 PSYCHOLOGIST	6,765				1,165
	11 SOCIAL WORKER	2,495				1,100
	12 TECHNICIAN	10,653			109,51	•
	13 RECEPTIONIST/CLERK/SECRETARY	71				79,520
	14 ACUPUNCTURIST	1,120				57,578
	15 MASSAGE THERAPIST	2,156				31,608
	16 HOMEOPATHIC/NATUROPATHIC/HERBALIST	229				30,793
	17 OTHER ALTERNATIVE/COMPLEMENTARY CARE PRO					2,576
	91 OTHER	6,344			,	0,483
	TOTAL	170,491		:	1,878,50	1,585

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV		2.0	NUM	<u>60</u>	<u>61</u>
	VALUE	UNWEIGHTED	<u>w</u> :	EIGHTEI	BY PER	WT17F
	-9 NOT ASCERTAINED	410			4.21	2,454
	-8 DK	3,962			41,76	5,910
	-7 REFUSED	13				3,227
	-1 INAPPLICABLE	94,927			1,021,82	
	1 YES	30,545			325,65	6,909
	2 NO	40,634			484,94	5,336
	TOTAL	170,491		1	1,878,56	1,585
VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT		2.0	NUM	<u>62</u>	<u>63</u>
	VALUE	UNWEIGHTED	W	EIGHTEI	BY PER	WT17F
	-9 NOT ASCERTAINED	288			3,47	0,602
	-8 DK	241			2,26	9,692
	-7 REFUSED	18			18	7,134
	-1 INAPPLICABLE	805			9,32	0,462
	1 GENERAL CHECKUP	36,671			396,14	0,842
	2 DIAGNOSIS OR TREATMENT	76,368			857,44	9,242
	3 EMERGENCY (E.G., ACCIDENT OR INJURY)	1,018			10,56	9,805
	4 PSYCHOTHERAPY/MENTAL HEALTH COUNSELING	14,112			147,47	•
	5 FOLLOW-UP OR POST-OPERATIVE VISIT	16,703			179,22	
	6 IMMUNIZATIONS OR SHOTS	4,911				6,915
	7 VISION EXAM	5,406				5,063
	8 PREGNANCY-RELATED (INC PRENATAL/ DELV)	2,626				4,976
	9 WELL CHILD EXAM	1,623			19,26	8,438
	10 LASER EYE SURGERY	173				8,532
	91 OTHER	9,528			103,19	0,152
	TOTAL	170,491			1,878,56	1,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND		2.0	NUM	64	<u>65</u>
	VALUE	UNWEIGHTED	<u>w</u>	VEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	433				8,823
	-8 DK	403			3,90	3,256
	-7 REFUSED	38				9,922
	1 YES	135,350		:	1,485,29	0,551
	2 NO	34,267			384,03	
	TOTAL	170,491		:	1,878,56	1,585
LABTEST	THIS VISIT DID P HAVE LAB TESTS		2.0	NUM	<u>66</u>	<u>67</u>
	VALUE	UNWEIGHTED	<u> </u>	VEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	2,056			24,48	2,145
	-8 DK	1,155			10,22	4,435
	-7 REFUSED	30			28	7,451
	-1 INAPPLICABLE	805			9,32	0,462
	1 YES	30,852			324,34	4,908
	2 NO	31,027			346,27	9,097
	95 NO SERVICES RECEIVED	104,566			1,163,62	3,087
	TOTAL	170,491		:	1,878,56	1,585
SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD		2.0	NUM	68	69
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED	2,056			24,48	2,145
	-8 DK	1,155				4,435
	-7 REFUSED	30				7,451
	-1 INAPPLICABLE	805			9,32	0,462
	1 YES	3,756			40,25	7,378
	2 NO	58,123			630,36	
	95 NO SERVICES RECEIVED	104,566			1,163,62	3,087
	TOTAL	170,491		:	1,878,56	1,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
XRAYS	THIS VISIT DID P HAVE X-RAYS		2.0	NUM	<u>70</u>	<u>71</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	<u>WT17F</u>
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 1,155 30 805 7,462 54,417 104,566 170,491			10,22 28 9,32	3,087
MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM	,	2.0	<u>NUM</u>	72	73
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 1,155 30 805 1,438 60,441 104,566			10,22 28 9,32	3,087
MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN		2.0	NUM	<u>74</u>	<u>75</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	<u>WT17F</u>
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 1,155 30 805 2,075 59,804 104,566 170,491			10,22 28 9,32	3,087

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
EKG	THIS VISIT DID P HAVE AN EKG, EEG OR ECG		2.0	<u>NUM</u>	<u>76</u>	<u>77</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 1,155 30 805 3,028 58,851 104,566 170,491			10,2 2 9,3 33,3	•
RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION		2.0	NUM	<u>78</u>	<u>79</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 1,155 30 805 6,963 54,916 104,566 170,491			10,2 2 9,3 77,6	•
OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM		2.0	NUM	80	<u>81</u>
	VALUE	UNWEIGHTED	<u>w</u>	EIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	2,056 658 14 63,536 14,039 29,091 61,097			5,8 1 690,4 152,2 315,0	82,145 02,019 47,030 35,507 65,647 79,476 49,760 61,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT		2.0	NUM	82	83
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO TOTAL	428 200 20 805 4,237 164,801 170,491			2,3 2 9,3	
MEDPRESC	ANY MEDICINE PRESCRIBED FOR P THIS VISIT		2.0	NUM	84	85
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 YES 2 NO TOTAL	13,486 1,667 85 22,732 132,521 170,491			15,6 1,0	
FFOBTYPE	FLAT FEE BUNDLE		2.0	NUM	<u>86</u>	<u>87</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT17F
	-1 INAPPLICABLE 1 FLAT FEE STEM 2 FLAT FEE LEAF TOTAL	167,321 724 2,446 170,491			•	87,559 38,055
FFBEF17	TOTAL # OF VISITS IN FF BEFORE 2017		2.0	NUM	88	89
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT17F
	-9 NOT ASCERTAINED -1 INAPPLICABLE 0 1 - 25 TOTAL	2,419 167,321 691 60 170,491			1,839,5 7,6	16,991 45,344

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
FFTOT18	TOTAL # OF VISITS IN FF AFTER 2017		2.0	NUM	90	<u>91</u>
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	BY PER	WT17F
	-9 NOT ASCERTAINED -1 INAPPLICABLE 0 1 - 6 TOTAL	2,419 167,321 642 109 170,491			1,839,53 7,40	6,150 6,184
OBSF17X	AMOUNT PAID, FAMILY (IMPUTED)		8.2	NUM	92	99
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	BY PER	WT17F
	-1 INAPPLICABLE 0 \$0.01 - \$43,000.00 TOTAL	789 100,957 68,745 170,491			9,15 1,010,93 858,47 1,878,56	7,478
OBMR17X	AMOUNT PAID, MEDICARE (IMPUTED)		8.2	NUM	100	107
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	BY PER	WT17F
	-1 INAPPLICABLE 0 \$0.02 - \$60.48 \$60.49 - \$93.51 \$93.52 - \$165.66 \$165.67 - \$31,528.56	789 120,638 12,270 12,263 12,269 12,262 170,491			9,15 1,359,34 132,07 131,47 124,85 121,66	7,787 2,347 2,821 4,474

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBMD17X	AMOUNT PAID, MEDICAID (IMPUTED)		8.2	NUM	108	<u>115</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PEI	RWT17F
	-1 INAPPLICABLE	789			9,15	51,603
	0	129,698			1,558,35	8,735
	\$0.01 - \$47.61	10,042			74,35	8,733
	\$47.62 - \$82.41	9,962			76,33	39,465
	\$82.42 - \$145.28	10,005			84,82	22,716
	\$145.29 - \$31,799.14	9,995			75,53	30,333
	TOTAL	170,491			1,878,5	51,585
OBPV17X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)		8.2	NUM	<u>116</u>	<u>123</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PEI	RWT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	100,579			978,49	
	\$0.01 - \$45.00	17,510			223,60	9,602
	\$45.01 - \$89.16	17,056			220,10	3,608
	\$89.17 - \$163.00	17,329			225,97	72,644
	\$163.01 - \$66,533.79	17,228			221,22	25,968
	TOTAL	170,491			1,878,5	1,585
OBVA17X	AMOUNT PAID, VETERANS/CHAMPVA(IMPUTED)		8.2	NUM	124	<u>131</u>
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PE	<u>RWT17F</u>
	-1 INAPPLICABLE	789			9,15	1,603
	0	166,644			1,836,7	79,255
	\$0.01 - \$80.77	767			8,15	0,472
	\$80.78 - \$160.00	763			7,93	33,022
	\$160.01 - \$298.77	764			7,92	20,275
	\$298.78 - \$15,894.74	764			8,62	26,958
	TOTAL	170,491			1,878,50	51,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBTR17X	AMOUNT PAID, TRICARE (IMPUTED)		7.2	NUM	<u>132</u>	<u>138</u>
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	165,363			1,820,36	8,804
	\$0.88 - \$25.00	1,087			12,54	8,285
	\$25.01 - \$61.85	1,083			12,22	2,206
	\$61.86 - \$120.00	1,144			14,35	0,506
	\$120.01 - \$3,576.73	1,025			9,92	0,180
	TOTAL	170,491			1,878,56	1,585
OBOF17X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)		7.2	NUM	<u>139</u>	145
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTE	BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	169,523			1,867,02	2,347
	\$0.83 - \$26.50	50			92	1,758
	\$26.51 - \$59.25	40			43	6,216
	\$59.26 - \$118.00	45				1,546
	\$118.01 - \$3,373.69	44			44	8,115
	TOTAL	170,491		:	1,878,56	1,585
OBSL17X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)		8.2	NUM	<u>146</u>	<u>153</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTE	BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	168,808			1,862,50	4,691
	\$0.74 - \$50.29	224			1,80	6,466
	\$50.30 - \$123.70	226			1,65	7,005
	\$123.71 - \$197.81	221			1,74	2,517
	\$197.82 - \$73,011.27	223			1,69	9,302
	TOTAL	170,491			1,878,56	1,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBWC17X	AMOUNT PAID, WORKERS COMP (IMPUTED)		7.2	NUM	<u>154</u>	<u>160</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTEI	BY PEF	RWT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	168,188		:	L,855,80	5,851
	\$1.80 - \$76.44	385			3,10	1,248
	\$76.45 - \$113.95	372			3,29	2,443
	\$113.96 - \$202.95	379			3,35	55,165
	\$202.96 - \$8,696.46	378			3,85	55,275
	TOTAL	170,491			L,878,56	1,585
OBOR17X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)		8.2	NUM	<u>161</u>	168
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTEI	BY PEF	<u>WT17F</u>
	-1 INAPPLICABLE	789			9.15	1,603
	0	163,974			L,806,37	,
	\$0.01 - \$17.68	1,433		-		14,227
	\$17.69 - \$33.14	1,432				0,933
	\$33.15 - \$82.90	1,431				6,920
	\$82.91 - \$11,587.96	1,432				6,958
	TOTAL	170,491		:	1,878,56	1,585
OBOU17X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)		8.2	NUM	<u>169</u>	<u>176</u>
	VALUE	UNWEIGHTED	<u>W</u>	EIGHTEI	BY PER	RWT17F
	-1 INAPPLICABLE	789			9.15	1,603
	0	169,234		:	L,865,25	
	\$0.07 - \$26.07	117				2,500
	\$26.08 - \$59.34	121				4,835
	\$59.35 - \$119.90	113			99	6,307
	\$119.91 - \$10,899.59	117			96	4,354
	TOTAL	170,491			L,878,56	1,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBOT17X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)		8.2	NUM	<u>177</u>	184
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	166,641			1,833,38	5,223
	\$0.07 - \$45.21	766			8,72	9,009
	\$45.22 - \$99.00	837			10,46	8,677
	\$99.01 - \$190.60	693			8,23	6,780
	\$190.61 - \$13,507.04	765			8,59	0,292
	TOTAL	170,491			1,878,56	1,585
OBXP17X	SUM OF OBSF17X - OBOT17X (IMPUTED)		8.2	NUM	<u>185</u>	<u>192</u>
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	4,474			49,50	1,536
	\$0.01 - \$72.74	41,314			440,54	0,854
	\$72.75 - \$113.57	41,301			462,00	7,200
	\$113.58 - \$193.81	41,316			466,99	6,529
	\$193.82 - \$73,031.27	41,297			450,36	3,863
	TOTAL	170,491			1,878,56	1,585
OBTC17X	HHLD REPORTED TOTAL CHARGE (IMPUTED)		9.2	NUM	<u>193</u>	201
	VALUE	UNWEIGHTED	<u>v</u>	EIGHTE	D BY PER	WT17F
	-1 INAPPLICABLE	789			9,15	1,603
	0	2,468			30,41	8,405
	\$0.20 - \$122.00	41,889			476,96	1,547
	\$122.01 - \$202.00	41,875			467,10	6,476
	\$202.01 - \$390.00	41,788			458,82	7,287
	\$390.01 - \$151,115.00	41,682			436,09	6,268
	TOTAL	170,491			1,878,56	1,585

#### MEPS HC-197G CODEBOOK 2017 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FORMAT	TYPE	START	END
IMPFLAG	IMPUTATION STATUS	1.0	NUM	202	202
	VALUE	UNWEIGHTED WE	EIGHTE	D BY PER	WT17F
	0 NOT ELIGIBLE FOR IMPUTATION 1 COMPLETE HC DATA	3,281		•	9,603
	2 COMPLETE MPC DATA	19,703 47,469		253,75 515,79	
	3 FULLY IMPUTED	66,193		661,65	
	4 PARTIALLY IMPUTED	30,011		369,04	
	5 CAPITATION IMPUTATION	3,834			9,666
	TOTAL	170,491		1,878,56	
	IOIAL	170,491		1,070,50	1,303
PERWT17F	EXPENDITURE FILE PERSON WEIGHT, 2017	12.6	NUM	203	214
	VALUE	UNWEIGHTE	<u>D</u>		
	0.00000 WEIGHT	2,81	5		
	497.385921 - 89577.167417 WEIGHT	167,67			
	TOTAL	170,49			
VARSTR	VARIANCE ESTIMATION STRATUM, 2017	4.0	NUM	215	218
	VALUE	UNWEIGHTE	<u>D</u>		
	1,001 - 2,117	170,49	1		
	1,001 - 2,117 TOTAL	170,49			
	IOIAL	170,49	Τ.		
VARPSU	VARIANCE ESTIMATION PSU, 2017	1.0	NUM	219	219
	VALUE	UNWEIGHTE	<u>D</u>		
	1 - 3	170,49	1		
	TOTAL	170,49			
	The state of the s	,			