DATE: August 2, 2006

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

START	END	NAME	DESCRIPTION
104	105	ANESTH	THIS VISIT DID P RECEIVE ANESTHESIA
74	75	CHEMOTH	THIS VISIT DID P HAVE CHEMOTHERAPY
62	63	DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV
58	59	DRSPLTY	MVIS DOCTOR'S SPECIALTY
82	83	DRUGTRT	THIS VIS DID P HAVE TRT FOR DRUG/ALCOHOL
1	5	DUID	DWELLING UNIT ID
9	16	DUPERSID	PERSON ID (DUID + PID)
100	101	EEG	THIS VISIT DID P HAVE AN EEG
98	99	EKG	THIS VISIT DID P HAVE AN EKG OR ECG
29	29	EVENTRN	EVENT ROUND NUMBER
17	28	EVNTIDX	EVENT ID
145	146	FFBEF04	TOTAL # OF VISITS IN FF BEFORE 2004
30	41	FFEEIDX	FLAT FEE ID
143	144	FFOBTYPE	FLAT FEE BUNDLE
147	148	FFTOT05	TOTAL # OF VISITS IN FF AFTER 2004
255	255	IMPFLAG	IMPUTATION STATUS
80	81	IVTHER	THIS VISIT DID P HAVE IV THERAPY
78	79	KIDNEYD	THIS VISIT DID P HAVE KIDNEY DIALYSIS
88	89	LABTEST	THIS VISIT DID P HAVE LAB TESTS
94	95	MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM
110	111	MEDPRESC	ANY MEDICINE PRESCRIBED FOR P THIS VISIT
60	61	MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT
43	43	MPCDATA	MPC DATA FLAG
42	42	MPCELIG	MPC ELIGIBILITY FLAG
96	97	MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN
54	55	MVPLACE	KIND OF PLACE PATIENT SAW MV PROVIDER
131	133	OBCCC1X	MODIFIED CLINICAL CLASSIFICATION CODE
134	136	OBCCC2X	MODIFIED CLINICAL CLASSIFICATION CODE
137	139	OBCCC3X	MODIFIED CLINICAL CLASSIFICATION CODE
140	142	OBCCC4X	MODIFIED CLINICAL CLASSIFICATION CODE
50	51	OBDATEDD	EVENT DATE - DAY
48	49	OBDATEMM	EVENT DATE - MONTH
44	47	OBDATEYR	EVENT DATE - YEAR
113	115	OBICD1X	3-DIGIT ICD-9-CM CONDITION CODE
116	118	OBICD2X	3-DIGIT ICD-9-CM CONDITION CODE
119	121	OBICD3X	3-DIGIT ICD-9-CM CONDITION CODE
122	124	OBICD4X	3-DIGIT ICD-9-CM CONDITION CODE
165	171	OBMD04X	AMOUNT PAID, MEDICAID (IMPUTED)
157	164	OBMR04X	AMOUNT PAID, MEDICARE (IMPUTED)
194	200	OBOF04X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)
216	223	OBOR04X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)
231	237	OBOT04X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)
224	230	OBOU04X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)
125	126	OBPRO1X	2-DIGIT ICD-9-CM PROCEDURE CODE

DATE: August 2, 2006

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

START	END	NAME	DESCRIPTION
127	128	OBPRO2X	2-DIGIT ICD-9-CM PROCEDURE CODE
129	130	OBPRO3X	2-DIGIT ICD-9-CM PROCEDURE CODE
172	179	OBPV04X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)
149	156	OBSF04X	AMOUNT PAID, FAMILY (IMPUTED)
201	208	OBSL04X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)
246	254	OBTC04X	HHLD REPORTED TOTAL CHARGE (IMPUTED)
187	193	OBTR04X	AMOUNT PAID, TRICARE (IMPUTED)
180	186	OBVA04X	AMOUNT PAID, VETERANS (IMPUTED)
209	215	OBWC04X	AMOUNT PAID, WORKERS COMP (IMPUTED)
238	245	OBXP04X	SUM OF OBSF04X - OBOT04X (IMPUTED)
70	71	OCCUPTH	THIS VIS DID P HAVE OCCUPATIONAL THERAPY
106	107	OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM
256	267	PERWT04F	EXPENDITURE FILE PERSON WEIGHT, 2004
68	69	PHYSTH	THIS VISIT DID P HAVE PHYSICAL THERAPY
6	8	PID	PERSON NUMBER
86	87	PSYCHOTH	DID P HAVE PSYCHOTHERAPY/COUNSELING
76	77	RADIATTH	THIS VISIT DID P HAVE RADIATION THERAPY
84	85	RCVSHOT	THIS VISIT DID P RECEIVE AN ALLERGY SHOT
102	103	RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION
56	57	SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL
52	53	SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE
90	91	SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD
72	73	SPEECHTH	THIS VISIT DID P HAVE SPEECH THERAPY
108	109	SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT
112	112	VAPLACE	VA FACILITY FLAG
271	271	VARPSU	VARIANCE ESTIMATION PSU, 2004
268	270	VARSTR	VARIANCE ESTIMATION STRATUM, 2004
64	65	VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT
66	67	VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND
92	93	XRAYS	THIS VISIT DID P HAVE X-RAYS

DATE: August 2, 2006

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	42	MPCELIG	MPC ELIGIBILITY FLAG
43	43	MPCDATA	MPC DATA FLAG
44	47	OBDATEYR	EVENT DATE - YEAR
48	49	OBDATEMM	EVENT DATE - MONTH
50	51	OBDATEDD	EVENT DATE - DAY
52	53	SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE
54	55	MVPLACE	KIND OF PLACE PATIENT SAW MV PROVIDER
56	57	SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL
58	59	DRSPLTY	MVIS DOCTOR'S SPECIALTY
60	61	MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT
62	63	DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV
64	65	VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT
66	67	VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND
68	69	PHYSTH	THIS VISIT DID P HAVE PHYSICAL THERAPY
70	71	OCCUPTH	THIS VIS DID P HAVE OCCUPATIONAL THERAPY
72	73	SPEECHTH	THIS VISIT DID P HAVE SPEECH THERAPY
74	75	CHEMOTH	THIS VISIT DID P HAVE CHEMOTHERAPY
76	77	RADIATTH	THIS VISIT DID P HAVE RADIATION THERAPY
78	79	KIDNEYD	THIS VISIT DID P HAVE KIDNEY DIALYSIS
80	81	IVTHER	THIS VISIT DID P HAVE IV THERAPY
82	83	DRUGTRT	THIS VIS DID P HAVE TRT FOR DRUG/ALCOHOL
84	85	RCVSHOT	THIS VISIT DID P RECEIVE AN ALLERGY SHOT
86	87	PSYCHOTH	DID P HAVE PSYCHOTHERAPY/COUNSELING
88	89	LABTEST	THIS VISIT DID P HAVE LAB TESTS
90	91	SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD
92	93	XRAYS	THIS VISIT DID P HAVE X-RAYS
94	95	MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM
96	97	MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN
98	99	EKG	THIS VISIT DID P HAVE AN EKG OR ECG
100	101	EEG	THIS VISIT DID P HAVE AN EEG
102	103	RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION
104	105	ANESTH	THIS VISIT DID P RECEIVE ANESTHESIA
106	107	OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM
108	109	SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT
110	111	MEDPRESC	ANY MEDICINE PRESCRIBED FOR P THIS VISIT
112	112	VAPLACE	VA FACILITY FLAG
113	115	OBICD1X	3-DIGIT ICD-9-CM CONDITION CODE
116	118	OBICDIX OBICD2X	3-DIGIT ICD-9-CM CONDITION CODE
TT0	110	OBICDAY	2-DIGII ICD-2-CH CONDITION CODE

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

DATE: August 2, 2006

ALPHABETICAL AND POSITIONAL LISTING OF VARIABLES

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

START	END	NAME	DESCRIPTION
		· <u></u>	
119	121	OBICD3X	3-DIGIT ICD-9-CM CONDITION CODE
122	124	OBICD4X	3-DIGIT ICD-9-CM CONDITION CODE
125	126	OBPRO1X	2-DIGIT ICD-9-CM PROCEDURE CODE
127	128	OBPRO2X	2-DIGIT ICD-9-CM PROCEDURE CODE
129	130	OBPRO3X	2-DIGIT ICD-9-CM PROCEDURE CODE
131	133	OBCCC1X	MODIFIED CLINICAL CLASSIFICATION CODE
134	136	OBCCC2X	MODIFIED CLINICAL CLASSIFICATION CODE
137	139	OBCCC3X	MODIFIED CLINICAL CLASSIFICATION CODE
140	142	OBCCC4X	MODIFIED CLINICAL CLASSIFICATION CODE
143	144	FFOBTYPE	FLAT FEE BUNDLE
145	146	FFBEF04	TOTAL # OF VISITS IN FF BEFORE 2004
147	148	FFTOT05	TOTAL # OF VISITS IN FF AFTER 2004
149	156	OBSF04X	AMOUNT PAID, FAMILY (IMPUTED)
157	164	OBMR04X	AMOUNT PAID, MEDICARE (IMPUTED)
165	171	OBMD04X	AMOUNT PAID, MEDICAID (IMPUTED)
172	179	OBPV04X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)
180	186	OBVA04X	AMOUNT PAID, VETERANS (IMPUTED)
187	193	OBTR04X	AMOUNT PAID, TRICARE (IMPUTED)
194	200	OBOF04X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)
201	208	OBSL04X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)
209	215	OBWC04X	AMOUNT PAID, WORKERS COMP (IMPUTED)
216	223	OBOR04X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)
224	230	OBOU04X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)
231	237	OBOT04X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)
238	245	OBXP04X	SUM OF OBSF04X - OBOT04X (IMPUTED)
246	254	OBTC04X	HHLD REPORTED TOTAL CHARGE (IMPUTED)
255	255	IMPFLAG	IMPUTATION STATUS
256	267	PERWT04F	EXPENDITURE FILE PERSON WEIGHT, 2004
268	270	VARSTR	VARIANCE ESTIMATION STRATUM, 2004
271	271	VARPSU	VARIANCE ESTIMATION PSU, 2004

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	ORMAT	TYPE	START	END
DUID	DWELLING UNIT ID	<u>-</u>	5.0	NUM	<u>1</u>	<u>5</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	VALID ID TOTAL	157,536 157,536			1,546,9 1,546,9	
PID	PERSON NUMBER	<u>-</u>	3.0	NUM	<u>6</u>	<u>8</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	VALID ID TOTAL	157,536 157,536			1,546,9 1,546,9	
DUPERSID	PERSON ID (DUID + PID)	<u>-</u>	8.0	CHAR	<u>9</u>	<u>16</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	VALID ID TOTAL	157,536 157,536			1,546,9 1,546,9	
EVNTIDX	EVENT ID	_	12.0	CHAR	<u>17</u>	28
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	VALID ID TOTAL	157,536 157,536			1,546,9 1,546,9	
EVENTRN	EVENT ROUND NUMBER	-	1.0	NUM	29	<u>29</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	ROUND 1 ROUND 2 ROUND 3 ROUND 4 ROUND 5	21,795 36,732 37,019 37,026 24,964			367,9 370,5 357,0 237,5	307,748 974,023 526,530 988,239 569,079
	TOTAL	157,536			1,546,9	00,019

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
FFEEIDX	FLAT FEE ID	_	12.0	CHAR	30	<u>41</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	-1 INAPPLICABLE VALID ID TOTAL	153,896 3,640 157,536			1,509,5 37,3 1,546,9	395,781
MPCELIG	MPC ELIGIBILITY FLAG	_	1.0	NUM	42	42
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	1 MPC ELIGIBLE 2 NOT MPC ELIGIBLE TOTAL	126,648 30,888 157,536			1,208,8 338,1 1,546,9	L58,805
MPCDATA	MPC DATA FLAG	_	1.0	NUM	43	<u>43</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	1 HAS MPC DATA 2 NO MPC DATA TOTAL	61,840 95,696 157,536				590,391 275,228 965,619
OBDATEYR	EVENT DATE - YEAR	_	4.0	NUM	44	<u>47</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	ERWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 2004 TOTAL	45 13 1 157,477 157,536				

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBDATEMM	EVENT DATE - MONTH		2.0	NUM	48	<u>49</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 - 12 MONTH TOTAL	302 10 1 157,223 157,536				
OBDATEDD	EVENT DATE - DAY		2.0	NUM	<u>50</u>	<u>51</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 - 31 DAY TOTAL	1,773 23,481 55 132,227 157,536			207,8	-
SEETLKPV	DID P VISIT PROV IN PERSON OR TELEPHONE		2.0	NUM	52	<u>53</u>
	VALUE	UNWEIGHTED	,	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 SAW PROVIDER 2 TELEPHONE CALL TOTAL	2 17 6 156,081 1,430 157,536			1 1,531,6	93,143

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
MVPLACE	KIND OF PLACE PATIENT SAW MV PROVIDER		2.0	NUM	<u>54</u>	<u>55</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PI	ERWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 DOCTOR'S OFFICE/GROUP PRACTICE 2 MEDICAL CLINIC 3 MANAGED CARE PLAN CTR/HMO 4 NEIGHBORHOOD/FAMILY HEALTH CENTER 5 LASER EYE SURGERY CENTER 6 OTHER FREESTANDING SURGICAL CENTER 7 RURAL HEALTH CLINIC 8 COMPANY CLINIC 9 SCHOOL CLINIC 10 OTHER CLINIC 11 WALK-IN URGENT CENTER 12 VA FACILITY 13 COMMUNITY HEALTH CENTER	678 57 2 1,455 92,925 29,762 3,779 1,400 276 104 195 131 791 5,381 754 1,616 1,736			15,3 950,4 257,2 36,7 9,8 2,7 1,2 1,4 1,2 52,8 8,0	223,393 662,284 8,338 335,754 443,499 297,817 722,376 868,999 786,819 209,750 117,449 117,449 204,039 177,024 804,745 120,083 847,988
	14 LABORATORY/X-RAY FACILITY 91 SOME OTHER PLACE TOTAL	4,116 12,378 157,536			122,1	700,867 173,468 965,619
						•
SEEDOC	DID P TALK TO MD THIS VISIT/PHONE CALL		2.0	NUM	<u>56</u>	<u>57</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PI	ERWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 YES 2 NO TOTAL	988 358 8 104,951 51,231 157,536			2,4 990,4 543,6	299,638 195,751 143,161 104,584 522,485 965,619
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	NUM	<u>58</u>	<u>59</u>
	VALUE	UNWEIGHTED	<u>y</u>	WEIGHTE	D BY PI	ERWT04F
	-9 NOT ASCERTAINED (CONT'D ON NEXT PAGE)	313			2,8	350,903

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	NUM	<u>58</u>	<u>59</u>
	VALUE	UNWEIGHTED	<u>w</u>	EIGHTED	BY PER	WT04F
	(CONT'D FROM PREVIOUS PAGE)					
	-8 DK	1,372			12,43	3,224
	-7 REFUSED	12			17	5,645
	-1 INAPPLICABLE	52,585			556,56	1,035
	1 ALLERGY/IMMUNOLOGY	1,222			13,06	6,736
	2 ANESTHESIOLOGY	205			1,95	2,626
	3 CARDIOLOGY (HEART)	3,247			32,36	0,429
	4 DERMATOLOGY (SKIN)	2,437			28,25	0,971
	5 ENDOCRINOLOGY/METABOLISM	951			9,36	1,542
	6 FAMILY PRACTICE	14,320			132,66	7,715
	7 GASTROENTEROLOGY	1,412			14,26	7,402
	8 GENERAL PRACTICE	17,618			152,35	1,088
	9 GENERAL SURGERY	1,300			13,20	8,284
	10 GERIATRICS (ELDERLY)	258			2,41	0,667
	11 GYNECOLOGY/OBSTETRICS	8,262			73,85	4,980
	12 HEMATOLOGY (BLOOD)	302			2,84	0,310
	13 HOSPITAL RESIDENCE	22			19	6,708
	14 INTERNAL MEDICINE	7,555			78,20	3,994
	15 NEPHROLOGY (KIDNEYS)	1,640			12,88	0,368
	16 NEUROLOGY	1,864			18,00	1,100
	17 NUCLEAR MEDICINE	14			15	5,827
	18 ONCOLOGY	2,157			21,30	4,795
	19 OPTHALMOLOGY	5,742			59,56	6,716
	20 ORTHOPEDICS	4,654			50,02	3,390
	21 OSTEOPATHY	718			7,49	9,578
	22 OTORHINOLARYNGOLOGY	1,643			15,84	3,105
	23 PATHOLOGY	29			24	6,116
	24 PEDIATRICIAN	10,950				7,880
	25 PHYSICAL MEDICINE/REHAB	515			4,31	3,897
	26 PLASTIC SURGERY	361				0,518
	27 PROCTOLOGY	61				0,646
	28 PSYCHIATRY	4,591			-	8,252
	29 PULMONARY	828			8,86	2,234
	(CONT'D ON NEXT PAGE)					

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	ORMAT	TYPE	START	END
DRSPLTY	MVIS DOCTOR'S SPECIALTY		2.0	NUM	<u>58</u>	<u>59</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PEI	RWT04F
	(CONT'D FROM PREVIOUS PAGE)					
	30 RADIOLOGY	460			5,5	16,276
	31 RHEUMATOLOGY (ARTHRITIS)	970			8,59	98,437
	32 THORACIC SURGERY	48			5'	71,749
	33 UROLOGY	1,452			16,1	72,766
	91 OTHER DR SPECIALTY	5,446			55,63	L7,708
	TOTAL	157,536			1,546,9	55,619
MEDPTYPE	TYPE OF MED PERSON P TALKED TO ON VST DT		2.0	NUM	60	61
	VALUE	UNWEIGHTED		WEIGHTE	D BY PEI	RWT04F
	-9 NOT ASCERTAINED	1,041			10,4	76,756
	-8 DK	161			1,4	13,632
	-7 REFUSED	8			14	13,161
	-1 INAPPLICABLE	104,951			990,40	04,584
	1 CHIROPRACTOR	9,431			111,88	36,674
	2 DENTIST/DENTAL CARE PERSON	159			1,8	55,184
	3 MIDWIFE	331			2,9	57,793
	4 NURSE/NURSE PRACTITIONER	8,682			83,7	24,999
	5 OPTOMETRIST	2,339			25,30	05,089
	6 PODIATRIST	1,053			11,2	73,899
	7 PHYSICIAN'S ASSISTANT	1,231			13,00	50,985
	8 PHYSICAL THERAPIST	7,881			83,13	L3,296
	9 OCCUPATIONAL THERAPIST	283			2,1	57,921
	10 PSYCHOLOGIST	3,908			38,7	10,312
	11 SOCIAL WORKER	1,650			15,9	L9,941
	12 TECHNICIAN	8,952			97,2	30,148
	13 RECEPTIONIST/CLERK/SECRETARY	121				06,429
	14 ACUPUNCTURIST	613				52,692
	15 MASSAGE THERAPIST	1,507				27,152
	16 HOMEOPATHIC/NATUROPATHIC/HERBALIST	260				L5,932
	17 OTHER ALTERNATIVE/COMPLEMENTARY CARE PRO	215				93,273
	91 OTHER	2,759			-	55,768
	TOTAL	157,536			1,546,9	55,619

PAGE: 11

NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
DOCATLOC	ANY MD WORK AT LOCATION WHERE P SAW PROV		2.0	NUM	62	<u>63</u>
	VALUE	UNWEIGHTED	<u> </u>	VEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	501			4,30	0,959
	-8 DK	1,756			14,87	6,253
	-7 REFUSED	14			29	6,322
	-1 INAPPLICABLE	104,951			990,40	4,584
	1 YES	22,683			229,51	1,200
	2 NO	27,631			307,57	6,301
	TOTAL	157,536			1,546,96	5,619
VSTCTGRY	BEST CATEGORY FOR CARE P RECV ON VST DT		2.0	NUM	64	<u>65</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	420			3,09	3,785
	-8 DK	88			80	1,219
	-7 REFUSED	5			4	2,188
	-1 INAPPLICABLE	1,455			15,33	5,754
	1 GENERAL CHECKUP	29,672			281,94	8,125
	2 DIAGNOSIS OR TREATMENT	78,919			794,12	4,075
	3 EMERGENCY (E.G., ACCIDENT OR INJURY)	817			7,88	1,884
	4 PSYCHOTHERAPY/MENTAL HEALTH COUNSELING	8,600			78,90	-
	5 FOLLOW-UP OR POST-OPERATIVE VISIT	15,502			153,11	-
	6 IMMUNIZATIONS OR SHOTS	3,753			-	5,112
	7 VISION EXAM	4,009			42,40	-
	8 MATERNITY CARE (PRE/POSTNATAL)	4,194			-	9,980
	9 WELL CHILD EXAM	1,845			15,82	-
	10 LASER EYE SURGERY	168				7,389
	91 OTHER	8,089			-	8,571
	TOTAL	157,536			1,546,96	5,619

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
VSTRELCN	THIS VST/PHONE CALL RELATED TO SPEC COND		2.0	NUM	<u>66</u>	<u>67</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	577				8,654
	-8 DK	245				2,967
	-7 REFUSED	19				4,783
	1 YES	130,494			1,275,53	-
	2 NO	26,201			263,43	
	TOTAL	157,536			1,546,96	5,619
PHYSTH	THIS VISIT DID P HAVE PHYSICAL THERAPY		2.0	NUM	<u>68</u>	<u>69</u>
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	1,235			11,05	8,502
	-8 DK	269			-	0,958
	-7 REFUSED	6				6,961
	-1 INAPPLICABLE	4,333			45,95	5,427
	1 YES	14,029			143,47	0,594
	2 NO	17,506			159,65	1,765
	95 NO TREATMENT RECEIVED	120,158			1,184,12	1,412
	TOTAL	157,536			1,546,96	5,619
OCCUPTH	THIS VIS DID P HAVE OCCUPATIONAL THERAPY		2.0	NUM	<u>70</u>	<u>71</u>
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	1,235			11,05	8,502
	-8 DK	269				0,958
	-7 REFUSED	6				6,961
	-1 INAPPLICABLE	4,333			45,95	5,427
	1 YES	739			6,04	3,848
	2 NO	30,796			297,07	8,511
	95 NO TREATMENT RECEIVED	120,158			1,184,12	1,412
	TOTAL	157,536			1,546,96	5,619

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
SPEECHTH	THIS VISIT DID P HAVE SPEECH THERAPY		2.0	NUM	<u>72</u>	<u>73</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK	1,235 269			-	58,502 70,958
	-7 REFUSED	6				36,961
	-1 INAPPLICABLE	4,333				55,427
	1 YES	836				37,449
	2 NO	30,699			296,7	84,910
	95 NO TREATMENT RECEIVED	120,158			1,184,1	21,412
	TOTAL	157,536			1,546,9	-
					_,,.	,
CHEMOTH	THIS VISIT DID P HAVE CHEMOTHERAPY		2.0	NUM	<u>74</u>	<u>75</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED	1,235			11,0	58,502
	-8 DK	269			2,6	70,958
	-7 REFUSED	6				36,961
	-1 INAPPLICABLE	4,333			45,9	55,427
	1 YES	763			7,1	24,237
	2 NO	30,772			295,9	98,122
	95 NO TREATMENT RECEIVED	120,158			1,184,1	21,412
	TOTAL	157,536			1,546,9	65,619
RADIATTH	THIS VISIT DID P HAVE RADIATION THERAPY		2.0	NUM	<u>76</u>	77
<u></u> -						
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED	1,235			11,0	58,502
	-8 DK	269			2,6	70,958
	-7 REFUSED	6				36,961
	-1 INAPPLICABLE	4,333			45,9	55,427
	1 YES	1,029			10,4	51,763
	2 NO	30,506			292,6	70,596
	95 NO TREATMENT RECEIVED	120,158			1,184,1	21,412
	TOTAL	157,536			1,546,9	65,619

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	<u>FC</u>	RMAT	TYPE	START	END
KIDNEYD	THIS VISIT DID P HAVE KIDNEY DIALYSIS		2.0	NUM	<u>78</u>	<u>79</u>
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO TREATMENT RECEIVED TOTAL	1,235 269 6 4,333 3,125 28,410 120,158 157,536			2,6 3 45,9	21,412
IVTHER	THIS VISIT DID P HAVE IV THERAPY		2.0	NUM	80	81
	VALUE	UNWEIGHTED	<u>v</u>	EIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO TREATMENT RECEIVED TOTAL	1,235 269 6 4,333 354 31,181 120,158 157,536			2,6 3 45,9	21,412
DRUGTRT	THIS VIS DID P HAVE TRT FOR DRUG/ALCOHOL		2.0	NUM	82	83
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PEI	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO TREATMENT RECEIVED TOTAL	1,235 269 6 4,333 379 31,156 120,158 157,536			2,6 3 45,9	21,412

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
RCVSHOT	THIS VISIT DID P RECEIVE AN ALLERGY SHOT		2.0	NUM	84	<u>85</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO TREATMENT RECEIVED TOTAL	1,235 269 6 4,333 1,618 29,917 120,158 157,536			2,6 45,9 17,3	
PSYCHOTH	DID P HAVE PSYCHOTHERAPY/COUNSELING		2.0	NUM	86	87
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO TREATMENT RECEIVED TOTAL	1,235 269 6 4,333 9,591 21,944 120,158 157,536			2,6 45,9 89,3	
LABTEST	THIS VISIT DID P HAVE LAB TESTS		2.0	NUM	88	89
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 33,075 27,763 92,895 157,536			15,3 307,8 283,9	32,881 11,947 66,352 35,754 87,112 96,602 34,971 65,619

MEPS HC-085G CODEBOOK 2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
SONOGRAM	THIS VISIT DID P HAVE SONOGRAM OR ULTRSD		2.0	NUM	90	<u>91</u>
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 3,224 57,614 92,895 157,536			8,2 15,3 29,6 562,2	32,881 11,947 66,352 35,754 64,291 19,423 34,971 65,619
XRAYS	THIS VISIT DID P HAVE X-RAYS		2.0	NUM	92	93
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 6,954 53,884 92,895 157,536			8,2 15,3 68,7 523,1	32,881 11,947 66,352 35,754 27,270 56,444 34,971 65,619
MAMMOG	THIS VISIT DID P HAVE A MAMMOGRAM		2.0	NUM	94	<u>95</u>
	VALUE	UNWEIGHTED	Ī	WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 1,352 59,486 92,895 157,536			8,2 15,3 14,1 577,7	32,881 11,947 66,352 35,754 58,715 24,999 34,971 65,619

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2004 OFFICE-BASED MEDICAL PROVIDER VISITS

NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
MRI	THIS VISIT DID P HAVE AN MRI/CATSCAN		2.0	NUM	<u>96</u>	<u>97</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	1,510				32,881
	-8 DK	830				1,947
	-7 REFUSED	8				6,352
	-1 INAPPLICABLE	1,455			-	35,754
	1 YES	1,651				08,229
	2 NO	59,187 92,895			575,18	
	95 NO SERVICES RECEIVED TOTAL	157,536			918,23 1,546,96	
	IOIAL	157,536			1,340,30	03,019
EKG	THIS VISIT DID P HAVE AN EKG OR ECG		2.0	NUM	98	99
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PEF	WT04F
	-9 NOT ASCERTAINED	1,510			13,23	2,881
	-8 DK	830				1,947
	-7 REFUSED	8			. 6	6,352
	-1 INAPPLICABLE	1,455			15,33	35,754
	1 YES	2,704			26,15	8,947
	2 NO	58,134			565,72	4,767
	95 NO SERVICES RECEIVED	92,895			918,23	
	TOTAL	157,536			1,546,96	55,619
EEG	MULA MIALE DID D MANE AN ERA		2 0	NTT 10	100	101
EEG	THIS VISIT DID P HAVE AN EEG		2.0	NUM	<u>100</u>	<u>101</u>
	VALUE	UNWEIGHTED	<u>v</u>	WEIGHTE	D BY PER	WT04F
	-9 NOT ASCERTAINED	1,510			13,23	2,881
	-8 DK	830			8,21	1,947
	-7 REFUSED	8			6	6,352
	-1 INAPPLICABLE	1,455				35,754
	1 YES	192			-	9,063
	2 NO	60,646			590,20	
	95 NO SERVICES RECEIVED	92,895			918,23	
	TOTAL	157,536			1,546,96	5,619

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
RCVVAC	THIS VISIT DID P RECEIVE A VACCINATION		2.0	NUM	102	103
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 3,078 57,760 92,895 157,536			8,23 15,33 27,23 564,63	32,881 11,947 66,352 35,754 31,751 51,963 34,971 55,619
ANESTH	THIS VISIT DID P RECEIVE ANESTHESIA		2.0	NUM	104	105
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 536 60,302 92,895 157,536			8,23 15,33 5,5 586,33	32,881 11,947 56,352 35,754 73,376 10,338 34,971 55,619
OTHSVCE	THIS VISIT DID P HAVE OTH DIAG TEST/EXAM		2.0	NUM	<u>106</u>	107
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO 95 NO SERVICES RECEIVED TOTAL	1,510 830 8 1,455 20,313 40,525 92,895 157,536			8,23 15,33 206,23 385,6	32,881 11,947 66,352 35,754 79,208 04,505 34,971 55,619

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NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
SURGPROC	WAS SURG PROC PERFORMED ON P THIS VISIT		2.0	NUM	108	109
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTEI	BY PER	WT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED -1 INAPPLICABLE 1 YES 2 NO TOTAL	1,162 48 3 1,455 3,598 151,270 157,536				0,046 8,886 5,754 0,768 3,272
MEDPRESC	ANY MEDICINE PRESCRIBED FOR P THIS VISIT	UNWEIGHTED	2.0 <u>V</u>	<u>NUM</u> VEIGHTEI	110 D BY PER	<u>111</u> WT04F
	-9 NOT ASCERTAINED -8 DK -7 REFUSED 1 YES 2 NO TOTAL	1,884 1,112 61 39,854 114,625 157,536			18,45 10,39 1,01 354,91 L,162,18 L,546,96	1,942 3,930 9,172 1,110
VAPLACE	VA FACILITY FLAG VALUE	UNWEIGHTED	1.0 <u>v</u>	<u>NUM</u> VEIGHTEI	<u>112</u> D BY PER	<u>112</u> WT04F
	0 NO 1 YES TOTAL	155,201 2,335 157,536			L,524,53 22,43 L,546,96	3,634

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2004 OFFICE-BASED MEDICAL PROVIDER VISITS

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NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
OBICD1X	3-DIGIT ICD-9-CM CONDITION CODE		3.0	CHAR	113	<u>115</u>
	VALUE	UNWEIGHTED	W	EIGHTEI	BY PER	WT04F
	-1 INAPPLICABLE -9 NOT ASCERTAINED 001 - 139 140 - 239 240 - 279 280 - 289 290 - 319 320 - 389 390 - 459 460 - 519 520 - 579 580 - 629 630 - 677 680 - 709 710 - 739 740 - 759 760 - 779 780 - 799	29,894 318 3,447 5,883 8,745 695 12,398 10,346 10,527 11,279 3,482 7,349 139 3,142 21,097 476 43 6,059			302,84 2,79 32,72 62,25 80,62 6,12 114,69 103,66 101,96 105,99 32,57 63,59 1,06 33,26 216,47 5,61	0,530 9,801 7,754 8,901 6,271 6,150 3,355 7,176 1,063 4,627 6,792 3,867 3,928 0,622 4,058 0,989 1,659
	800 - 999 V01 - V83 TOTAL	11,369 10,848 157,536		1	122,84 98,41 L,546,96	6,199

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NAME	DESCRIPTION	<u>F0</u>	RMAT TYPE START END
OBICD2X	3-DIGIT ICD-9-CM CONDITION CODE		3.0 CHAR 116 118
	VALUE	UNWEIGHTED	WEIGHTED BY PERWT04F
	-1 INAPPLICABLE	132,034	1,316,357,809
	-9 NOT ASCERTAINED	47	335,769
	001 - 139	335	2,842,813
	140 - 239	438	5,635,437
	240 - 279	2,928	26,694,004
	280 - 289	160	1,161,597
	290 - 319	3,276	27,150,978
	320 - 389	1,455	13,657,089
	390 - 459	3,321	27,163,410
	460 - 519	1,851	15,778,489
	520 - 579	700	5,863,015
	580 - 629	763	8,016,875
	630 - 677	26	332,504
	680 - 709	339	3,643,898
	710 - 739	4,943	46,625,036
	740 - 759	68	730,802
	760 - 779	27	77,592
	780 - 799	1,962	17,602,600
	800 - 999	1,545	16,416,681
	V01 - V83	1,318	10,879,223
	TOTAL	157,536	1,546,965,619

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DATE: August 2, 2006

NAME	DESCRIPTION	FO	RMAT	TYPE S	START	END
OBICD3X	3-DIGIT ICD-9-CM CONDITION CODE		3.0	CHAR	<u>119</u>	121
	VALUE	UNWEIGHTED	WE	EIGHTED	BY PER	WT04F
	-1 INAPPLICABLE -9 NOT ASCERTAINED 001 - 139 140 - 239 240 - 279 280 - 289 290 - 319 320 - 389	147,819 28 103 89 1,327 45 1,379 406		1	59 1,00 11,40 41 10,97	1,627 2,920 0,518 3,285 3,719
	390 - 459 460 - 519 520 - 579 580 - 629 630 - 677 680 - 709 710 - 739 740 - 759 780 - 799	1,396 507 377 142 4 108 2,056 18 859			10,92 3,73 3,11 94 1,00 16,79 12 6,69	9,733 9,335 2,898 2,361 7,490 5,288 5,155 0,737 3,586
	800 - 999 V01 - V83 TOTAL	329 544 157,536		1		6,840 7,811 5,619

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NAME	DESCRIPTION	FO	ORMAT TYPE START END
OBICD4X	3-DIGIT ICD-9-CM CONDITION CODE		3.0 CHAR 122 124
	VALUE	UNWEIGHTED	WEIGHTED BY PERWT04F
	-1 INAPPLICABLE	152,517	1,509,212,466
	-9 NOT ASCERTAINED	6	20,475
	001 - 139	12	88,802
	140 - 239	59	692,527
	240 - 279	723	5,580,771
	280 - 289	61	443,008
	290 - 319	606	4,384,145
	320 - 389	328	2,578,205
	390 - 459	576	4,424,831
	460 - 519	259	1,657,133
	520 - 579	256	1,778,080
	580 - 629	110	790,474
	680 - 709	28	279,091
	710 - 739	995	7,604,828
	740 - 759	6	38,854
	780 - 799	534	
	800 - 999	129	979,700
	V01 - V83	331	2,444,084
	TOTAL	157,536	1,546,965,619

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBPRO1X	2-DIGIT ICD-9-CM PROCEDURE CODE		2.0	CHAR	125	126
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE -9 NOT ASCERTAINED 01 - 05 06 - 07 08 - 16 18 - 20 21 - 29 30 - 34 35 - 39	152,053 7 168 28 384 113 165 78			1,9 2 3,9 9 1,7	58,805 70,016 27,640 27,935 76,470 89,615 69,873 82,922 74,560
	40 - 41 42 - 54 55 - 59 60 - 64 65 - 71 72 - 75 76 - 84 85 - 86 87 - 99 TOTAL	3 340 173 77 167 2 1,241 714 818 157,536			3,2 1,8 8 1,5	46,991 39,734 22,553 58,904 13,734 17,062 63,842 30,642 94,320
OBPRO2X	2-DIGIT ICD-9-CM PROCEDURE CODE	UNWEIGHTED	2.0 <u>V</u>	<u>CHAR</u> VEIGHTE	<u>127</u> D BY PE	128 RWT04F
	-1 INAPPLICABLE 08 - 16 18 - 20 21 - 29 35 - 39 42 - 54 55 - 59 60 - 64 65 - 71 76 - 84 85 - 86 87 - 99 TOTAL	157,312 13 7 10 27 15 12 1 3 93 18 25			1 2 1 1 9 2	42,630 11,942 76,775 97,240 05,020 84,458 0 37,697 52,010 64,545 45,920

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NAME	DESCRIPTION	<u>FC</u>	RMAT	TYPE	START	END
OBPRO3X	2-DIGIT ICD-9-CM PROCEDURE CODE		2.0	CHAR	129	130
	VALUE	UNWEIGHTED		WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	157,512			1,546,70	08,422
	35 - 39	1				4,238
	42 - 54	5			:	37,545
	72 - 75	2				5,212
	85 - 86	8			9	98,110
	87 - 99	8			13	12,092
	TOTAL	157,536			1,546,9	65,619
OBCCC1X	MODIFIED CLINICAL CLASSIFICATION CODE		3.0	CHAR	131	133
	VALUE	UNWEIGHTED		WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	29,894			302,84	40,530
	-9 NOT ASCERTAINED	318			2,79	99,801
	001-064	18,163			176,70	03,248
	076-260	95,824			940,6	74,587
	650-663	13,337			123,9	47,453
	TOTAL	157,536			1,546,9	65,619
OBCCC2X	MODIFIED CLINICAL CLASSIFICATION CODE		3.0	CHAR	134	<u>136</u>
	VALUE	UNWEIGHTED	!	WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	132,034			1,316,3	57,809
	-9 NOT ASCERTAINED	47			3:	35,769
	001-064	3,859			36,5	57,174
	076-260	18,140			164,93	38,354
	650-663	3,456			28,7	76,513
	TOTAL	157,536			1,546,9	65,619

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBCCC3X	MODIFIED CLINICAL CLASSIFICATION CODE	_	3.0	CHAR	137	<u>139</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE	147,819			1,468,9	46,406
	-9 NOT ASCERTAINED	28			2	31,627
	001-064	1,584			13,7	79,869
	076-260	6,669			52,8	25,127
	650-663	1,436			11,1	82,589
	TOTAL	157,536			1,546,9	65,619
OBCCC4X	MODIFIED CLINICAL CLASSIFICATION CODE	_	3.0	CHAR	140	142
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE	152,517			1,509,2	12 466
	-9 NOT ASCERTAINED	132,317				20,475
	001-064	866				35,228
	076-260	3,513				05,853
	650-663	634				91,597
	TOTAL	157,536			1,546,9	
	TOTAL	157,530			1,540,5	05,019
FFOBTYPE	FLAT FEE BUNDLE	_	2.0	NUM	143	144
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE	153,896			1,509,5	69.838
	1 FLAT FEE STEM	736				12,615
	2 FLAT FEE LEAF	2,904				83,166
	TOTAL	157,536			1,546,9	
FFBEF04	TOTAL # OF VISITS IN FF BEFORE 2004	-	2.0	NUM	145	<u>146</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PE	RWT04F
	-9 NOT ASCERTAINED	2,649			25.9	82,117
	-8 DK	8				96,660
	-1 INAPPLICABLE	153,896			1,509,5	
	0	882				55,766
	1 - 30	101				61,238
	TOTAL	157,536			1,546,9	-
		•			•	•

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
FFTOT05	TOTAL # OF VISITS IN FF AFTER 2004		2.0	NUM	147	148
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	RWT04F
	-9 NOT ASCERTAINED -8 DK -1 INAPPLICABLE 0 1 - 15 TOTAL	2,649 14 153,896 852 125 157,536			24 1,509,56 9,55	55,516 09,306
OBSF04X	AMOUNT PAID, FAMILY (IMPUTED)		8.2	NUM	149	<u>156</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PEF	RWT04F
	-1 INAPPLICABLE 0 \$0.01 - \$23,000.00 TOTAL	1,430 83,145 72,961 157,536			15,09 729,04 802,82 1,546,96	29,886
OBMR04X	AMOUNT PAID, MEDICARE (IMPUTED)		8.2	NUM	<u>157</u>	164
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	RWT04F
	-1 INAPPLICABLE 0 \$0.01 - \$35.79 \$35.80 - \$56.00 \$56.01 - \$102.87 \$102.88 - \$11,621.00 TOTAL	1,430 120,360 8,943 8,962 8,905 8,936 157,536			1,182,56 88,99 86,23 86,49	94,282 39,627 90,970 78,760

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBMD04X	AMOUNT PAID, MEDICAID (IMPUTED)		7.2	NUM	<u>165</u>	<u>171</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT04F
	-1 INAPPLICABLE 0 \$0.01 - \$28.56 \$28.57 - \$50.04 \$50.05 - \$90.41 \$90.42 - \$8,392.83 TOTAL	1,430 128,006 7,026 7,037 7,012 7,025 157,536			1,377,79 37,96 38,39 37,89	59,691 99,356 99,837 06,220
OBPV04X	AMOUNT PAID, PRIVATE INSURANCE (IMPUTED)		8.2	NUM	<u>172</u>	<u>179</u>
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT04F
	-1 INAPPLICABLE 0 \$0.01 - \$29.51 \$29.52 - \$53.85 \$53.86 - \$103.00 \$103.01 - \$42,644.00 TOTAL	1,430 85,149 17,741 17,740 17,747 17,729 157,536			15,09 713,98 204,92 207,81 204,85 200,29 1,546,96	21,426 10,798 58,392 97,985
OBVA04X	AMOUNT PAID, VETERANS (IMPUTED)		7.2	NUM	180	186
	VALUE	UNWEIGHTED		WEIGHTE	D BY PER	WT04F
	-1 INAPPLICABLE 0 \$0.11 - \$39.35 \$39.36 - \$80.00 \$80.01 - \$152.34 \$152.35 - \$8,500.00 TOTAL	1,430 153,135 743 747 739 742 157,536			1,501,85 8,22 7,44 7,31	22,985 18,755 10,115 18,281

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBTR04X	AMOUNT PAID, TRICARE (IMPUTED)		7.2	NUM	187	193
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE 0 \$0.76 - \$14.35 \$14.36 - \$30.96 \$30.97 - \$62.48 \$62.49 - \$7,891.00 TOTAL	1,430 153,971 543 525 534 533 157,536			1,511,8 5,2 4,8 5,0	02,480 84,675 21,930 62,873
OBOF04X	AMOUNT PAID, OTHER FEDERAL (IMPUTED)		7.2	NUM	<u>194</u>	200
	VALUE	UNWEIGHTED	1	WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE 0 \$2.40 - \$27.65 \$27.66 - \$63.00 \$63.01 - \$137.17 \$137.18 - \$4,845.00 TOTAL	1,430 155,557 138 137 137 137 157,536			1,526,3 1,5 1,2 1,4	12,466 80,835 06,195 54,113
OBSL04X	AMOUNT PAID, STATE & LOCAL GOV (IMPUTED)		8.2	NUM	201	208
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PE	RWT04F
	-1 INAPPLICABLE 0 \$0.12 - \$49.22 \$49.23 - \$89.84 \$89.85 - \$136.26 \$136.27 - \$22,990.00 TOTAL	1,430 155,030 269 269 269 269 157,536			1,525,0 1,9 1,7 1,4	14,222 21,663 23,660 03,622

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NAME	DESCRIPTION	<u>FO</u>	RMAT	TYPE	START	END
OBWC04X	AMOUNT PAID, WORKERS COMP (IMPUTED)		7.2	NUM	209	215
	VALUE	UNWEIGHTED	W	EIGHTED	BY PER	WT04F
	-1 INAPPLICABLE	1,430			15,09	3,143
	0	152,627		1	,501,19	-
	\$1.67 - \$46.40	874			7,58	8,463
	\$46.41 - \$71.31	866				2,844
	\$71.32 - \$123.45	871				6,101
	\$123.46 - \$5,049.00	868			7,41	0,838
	TOTAL	157,536		1	,546,96	5,619
OBOR04X	AMOUNT PAID, OTHER PRIVATE (IMPUTED)		8.2	NUM	216	223
	VALUE	UNWEIGHTED	W	EIGHTED	BY PEF	WT04F
	-1 INAPPLICABLE	1,430			15.09	3,143
	0	150,159		1	,472,00	-
	\$0.17 - \$13.00	1,493				3,320
	\$13.01 - \$34.00	1,498				5,763
	\$34.01 - \$80.00	1,496				0,839
	\$80.01 - \$10,537.48	1,460			14,17	7,784
	TOTAL	157,536		1	,546,96	5,619
OBOU04X	AMOUNT PAID, OTHER PUBLIC (IMPUTED)		7.2	NUM	224	230
	VALUE	UNWEIGHTED	W	EIGHTED	BY PEF	WT04F
	-1 INAPPLICABLE	1,430			15,09	3,143
	0	155,415		1	,528,35	6,239
	\$0.06 - \$36.76	173			87	3,235
	\$36.77 - \$62.71	173			97	6,814
	\$62.72 - \$106.85	174			85	1,807
	\$106.86 - \$1,662.94	171			81	4,382
	TOTAL	157,536		1	,546,96	5,619

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NAME	DESCRIPTION	FC	RMAT	TYPE	START	END
OBOT04X	AMOUNT PAID, OTHER INSURANCE (IMPUTED)		7.2	NUM	<u>231</u>	237
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	1,430			15,09	93,143
	0	152,295			1,495,90	
	\$0.14 - \$28.39	953			9,5	59,388
	\$28.40 - \$45.00	1,005			9,5	77,543
	\$45.01 - \$83.14	905			8,4	L8,971
	\$83.15 - \$9,689.76	948			8,39	98,266
	TOTAL	157,536			1,546,9	55,619
OBXP04X	SUM OF OBSF04X - OBOT04X (IMPUTED)		8.2	NUM	238	245
	VALUE	UNWEIGHTED	7	WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	1,430			15,09	93,143
	0	8,001			74,00	1,245
	\$0.01 - \$45.00	38,115			356,29	3,462
	\$45.01 - \$69.49	35,959			359,24	15,459
	\$69.50 - \$121.04	37,008			371,20	53,301
	\$121.05 - \$42,869.00	37,023			371,00	09,009
	TOTAL	157,536			1,546,9	55,619
OBTC04X	HHLD REPORTED TOTAL CHARGE (IMPUTED)		9.2	NUM	246	254
	VALUE	UNWEIGHTED	<u> </u>	WEIGHTE	D BY PEI	RWT04F
	-1 INAPPLICABLE	1,430			15.09	93,143
	0	2,929				37,463
	\$0.16 - \$63.00	38,416			-	96,240
	\$63.01 - \$100.00	40,507				35,151
	\$100.01 - \$190.00	36,138				55,330
	\$190.01 - \$165,284.00	38,116			367,08	38,292
	TOTAL	157,536			1,546,9	

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NAME	DESCRIPTION	FO	RMAT	TYPE	START	END
IMPFLAG	IMPUTATION STATUS		1.0	NUM	255	255
	VALUE	UNWEIGHTED	<u> </u>	EIGHTE	D BY PER	WT04F
	0 NOT ELIGIBLE FOR IMPUTATION 1 COMPLETE HC DATA 2 COMPLETE MPC DATA 3 FULLY IMPUTED 4 PARTIALLY IMPUTED 5 CAPITATION IMPUTATION TOTAL	4,359 22,578 48,386 49,008 28,285 4,920 157,536		:	44,73 253,87 467,77 430,35 306,62 43,58 1,546,96	1,801 3,068 7,641 3,941 8,563
PERWT04F	EXPENDITURE FILE PERSON WEIGHT, 2004	:	12.6	NUM	<u>256</u>	<u> 267</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	WT04F
	0.000000 WEIGHT 451.721568 - 63727.504985 WEIGHT TOTAL	3,534 154,002 157,536			1,546,96 1,546,96	
VARSTR	VARIANCE ESTIMATION STRATUM, 2004		3.0	NUM	<u> 268</u>	<u>270</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	WT04F
	1 - 203 TOTAL	157,536 157,536			1,546,96 1,546,96	
VARPSU	VARIANCE ESTIMATION PSU, 2004		1.0	NUM	<u>271</u>	<u>271</u>
	VALUE	UNWEIGHTED	<u>v</u>	VEIGHTE	D BY PER	WT04F
	1 - 3 TOTAL	157,536 157,536			1,546,96 1,546,96	