MEDICAID INCENTIVES FOR PREVENTION OF CHRONIC DISEASES (MIPCD) MINIMUM DATA SET – California

This document contains the draft Minimum Data Set (MDS) for California.

California will provide data for the following six categories of Medi-Cal smoking cessation program participants ("program groups"):

- 1. Randomized Trial (Policy A, B1 and B2)
- 2. Non-randomized, selected for evaluation
- 3. Non-randomized, not selected for evaluation
- 4. Pilot outreach program participants
- 5. Reengagement arms 1 to 4
- 6. Enhanced services recipients

PROGRAM GROUP I Randomized Trial (Policy A, B1 and B2)

Individuals appearing in this program arm may appear in program groups IV, V and VI. Their records can be linked using their Medicaid ID.

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State	US Postal Service state abbreviation.	2	String	ХХ
	Abbreviation	For e.g., California is CA			
Rec_Var_1	County	County abbreviation. For e.g., ALA for	3	String	ХХХ
а		Alameda, CC for Contra Costa etc.			
Rec_var_1b	Targeted	Whether county selected for CDP	1	Numeric	1 (Yes)
	County	intensive outreach during the year			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Rec_Var_2	Reporting	Current reporting quarter	8	String/	MMDDYYYY
	Quarter			Numeric	
		Provide the date of the first day of			
		the quarter. For example, 01012012			
		for data from the first quarter of			
		2012.			

A. Core Modules Table A1. Record Identification

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_3	Record Trail	Sequence of quarterly record of the	2	Numeric	0 (Baseline)
		enrollee.			1 (Quarter 1)
					2 (Quarter 2)
		For e.g., The record for the third			3 (Quarter 3)
		quarter of enrollment for an enrollee			4 (Quarter 4)
		will be coded as 3.			5 (Quarter 5)
					6 (Quarter 6)
		At the end of the first quarter of			7 (Quarter 7)
		enrollment, two records are to be			8 (Quarter 8)
		furnished for an enrollee - a baseline			9 (Quarter 9)
		record (code = 0) and the end-of-first			10 (Quarter 10)
		quarter record (code = 1). Thereafter,			11 (Quarter 11)
		only one record is generated each			12 (Quarter 12)
		quarter.			13 (Quarter 13)
					14 (Quarter 14)
					15 (Quarter 15)
					16 (Quarter 16)
					17 (Quarter 17)
					18 (Quarter 18)
					19 (Quarter 19)
					20 (Quarter 20)
					21 (Post-program
					follow up at 6
					months)
					22 (Post-program
					follow up at 12
					months)
					23 (Post-program
					follow up – month
					not specified)
					99
					(Missing/unknown)
Rec_Var_4	Program	Quarter of completing the specific	8	String/	MMDDYYYY
	Completion	program arm of MIPCD		Numeric	
	Quarter				88888888 (N/A)
		Provide the date of the first day of			\· · · · · ·
		the quarter during which the enrollee			99999999
		completes the program arm. For			(Missing/unknown)
		example, 01012012 for data from the			, , , ,
		first quarter of 2012.			
		If the enrollee has not completed the			
		program yet, code 88888888 (N/A)			
		may be provided.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_5	Enrollment Sequence	Current enrollment sequence of the participant	1	Numeric	1
		Some states allow participants to reenroll after discontinuing participation for a significant period of time. Some states count this reenrollment as the continuation of the original enrollment, while other states consider this as a separate enrollment. For participants from states where reenrollment is counted as a separate enrollment, the actual sequence of enrollment is to be provided. For e.g., a participant's second enrollment is to be coded as 2. For all other states, code 1 is to be entered.			
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	****

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_1	Date of Birth		8	String/	MMDDYYYY
				Numeric	
					99999999
					(Missing/unknown)
Core_Var_2	Gender		1	Numeric	1 (Male)
					2 (Female)
					9 (Missing/unknown)
Core_Var_3	Race		1	Numeric	1 (White)
					2 (Black or African
					American)
					3 (American Indian or
					Alaska Native)
					4 (Asian)
					5 (Native Hawaiian or
					Other Pacific Islander)
					6 (Multiple races)
					9 (Missing/unknown)
Core_Var_4	Ethnicity		1	Numeric	0 (Not Hispanic or
					Latino)
					1 (Hispanic or Latino)
					9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_5	Educational Attainment	Highest grade completed Only applicable to states that collect this information.	1	Numeric	1 (No formal schooling) 2 (Elementary school) 3 (Some high school) 4 (High school graduate/GED) 5 (Some college or 2 yr degree) 6 (Bachelor's degree) 7 (Post college degree) 9 (Missing/unknown)
Core_Var_6	Diabetes at Baseline	Whether had diabetes at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_7	Hypertension at Baseline	Whether had high blood pressure at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_8	Heart Disease at Baseline	Whether had heart disease at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_9	Smoking Status at Baseline	Whether a smoker at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_10	Date of Lapse of Medicaid Eligibility	Date of losing Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 88888888 (Not applicable) 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_11	Date of Regaining Medicaid Eligibility	Date of regaining Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 999999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1	Program Eligibility	Code that best describes program eligibility category	2	Numeric	1 (Smoker)
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program	2	Numeric	1(TV) 2 (Radio) 3 (Newspaper/Magazine) 4 (Billboard/Bus) 5 (Phone Book) 6 (Web) 7 (VA) 8 (Hospital) 9 (Clinic/Doctor's Office) 10 (Dentist/Dental Hygienist) 11 (Friend/Family) 12 (Pharmacy) 13 (School) 14 (Non-Profit Organization) 15 (Insurance/ HMO/Medi-Cal) 16 (Other) 99 (Missing/unknown)
Enroll_Var_3	Program Arm	Code of program arm Each arm of the program to be coded 1, 2, 3 etc. with sufficient specificity so that each person can only be in one mutually exclusive category at a time.	2	Numeric	1 (Group 1 - Policy A) 2 (Group 2- Policy B1) 3 (Group 3 - Policy B2) 99 (Missing/unknown)
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_5	Weight	Controlling or reducing	1	Numeric	1 (Yes)
	Control	weight is a prevention goal			2 (No)
					8 (N/A)
Enroll_Var_6	Lower	Lowering cholesterol levels is	1	Numeric	9 (Missing/unknown) 1 (Yes)
	Cholesterol	a prevention goal	1	Numeric	2 (No)
					8 (N/A)
					9 (Missing/unknown)
Enroll_Var_7	Lower Blood	Lowering blood pressure is a	1	Numeric	1 (Yes)
	Pressure	prevention goal			2 (No)
					8 (N/A)
	Dishatas	Augiding (managing diabates	1	Numerie	9 (Missing/unknown)
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal	1	Numeric	1 (Yes) 2 (No)
	Control	is a prevention goar			8 (N/A)
					9 (Missing/unknown)
Enroll_Var_9	Manage	Controlling and managing	1	Numeric	1 (Yes)
	Behavioral	behavioral health conditions			2 (No)
	Health	is a prevention goal			8 (N/A)
					9 (Missing/unknown)
Enroll_Var_1	Provider	Name of the agencies	2	Numeric	88 (N/A)
0	Agency	providing the program			
		services. For e.g., YMCA, xxx clinic			
		(Decided not relevant for CA.)			
Enroll_Var_1	Date of	Date of enrollment in the	8	String/	MMDDYYYY
1	Current	specific program arm of the		Numeric	99999999
	Enrollment	MIPCD			(Missing/unknown)
		Date of current (latest)			
		enrollment for those			
		participants for whom the			
		current enrollment is not			
		their first enrollment			
Enroll_Var_1	Program of	Code of program arm of most	2	String	88 (N/A)
2	Most Recent	recent prior enrollment in the			
	Prior	program for those			
	Enrollment	participants for whom the current enrollment is not			
		their first enrollment. For			
		those participants whose			
		current enrollment is their			
		first enrollment, code 88			
		(N/A) may be provided.			
		(Decided not relevant for CA.)			

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1 3	Date of Most Recent Prior Enrollment	Date of enrolling in the most recent prior enrollment in the program. For those	8	String/ Numeric	88888888 (N/A)
		participants whose current enrollment is their first enrollment, code 888888888 (N/A)			
		(Decided not relevant for CA.)			
Enroll_Var_1	Reason for	The reason for disenrolling	2	Numeric	88 (N/A)
4	Most Recent	from the most recent prior			
	Prior	enrollment in the program.			
	Disenrollment	For those participants whose			
		current enrollment is their			
		first enrollment, code 88			
		(N/A) may be provided.			
		(Decided not relevant for CA.)			

Name	Definition	Additional Description	Width	Туре	Value/Format	
Serv_Var_1	Service No. 1 -	Helpline call – Completion of	1	Numeric	1 (Yes)	
	Receipt	intake protocol and MIPCD			2 (No)	
		enrollment			8 (N/A)	
					9 (Missing/unknown)	
Serv_Var_2	Service No. 2 -	Telephone counseling (pre-quit)	1	Numeric	1 (Yes)	
	Receipt	session			2 (No)	
					8 (N/A)	
					9 (Missing/unknown)	
Serv_Var_3	Service No. 3 -	Relapse prevention (follow up)	2	Numeric	ХХ	
	Number of Units	session			88 (N/A)	
					99 (Missing/unknown)	
Serv_Var_4	Service No. 4 -	Nicotine replacement therapy	2	Numeric	ХХ	
	Number of Units	(NRT) shipment to home			88 (N/A)	
					99 (Missing/unknown)	

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_1	Incentive No. 1 – Receipt	Pilot outreach incentive (\$20)	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Incent_Var_2	Incentive No. 2 - Dollar Value	Relapse prevention session (\$10)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)

Table B4. Health and Behavioral Outcomes	
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Name	Definition	Additional Description	Width	Туре	Value/Format
Outcome_Var_1	Quit attempt	Whether quit attempt made	1	Numeric	1 (Yes)
					2 (No)
					8 (N/A)
					9 (Missing/unknown)
Outcome_Var_2	Abstinence	Whether abstinent for 30	1	Numeric	1 (Yes)
		days			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Outcome_Var_3	Number of	Number of cigarettes per	2	Numeric	ХХ
	cigarettes	day			88 (N/A)
					99 (Missing/unknown)
Outcome_Var_4	Nicotine	Whether used nicotine	1	Numeric	1 (Yes)
	Patches	patches			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Outcome_Var_5	Quitting aids	Whether used other quitting	1	Numeric	1 (Yes)
		aids			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Outcome_Var_6	Date of	Date of most recent	8	String/	MMDDYYYY
	measurement	measurement of outcomes		Numeric	99999999
					(Missing/unknown)
		CA is measuring all the			
		outcomes on the same day			
		so we only need one date of			
		measurement variable			

PROGRAM GROUP II Non-randomized, selected for Evaluation

Individuals appearing in this program arm may appear in program groups IV, V and VI. Their records can be linked using their Medicaid ID.

A. Core Modules

Table A1. Record Identification

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State	US Postal Service state abbreviation.	2	String	хх
	Abbreviation	For e.g., California is CA			
Rec_Var_1	County	County abbreviation. For e.g., ALA for	3	String	ххх
а		Alameda, CC for Contra Costa etc.			
Rec_var_1b	Targeted	Whether county selected for CDP	1	Numeric	1 (Yes)
	County	intensive outreach during the year			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Rec_Var_2	Reporting	Current reporting quarter	8	String/	MMDDYYYY
	Quarter			Numeric	
		Provide the date of the first day of			
		the quarter. For example, 01012012			
		for data from the first quarter of			
		2012.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_3	Record Trail	Sequence of quarterly record of the	2	Numeric	0 (Baseline)
		enrollee.			1 (Quarter 1)
					2 (Quarter 2)
		For e.g., The record for the third			3 (Quarter 3)
		quarter of enrollment for an enrollee			4 (Quarter 4)
		will be coded as 3.			5 (Quarter 5)
					6 (Quarter 6)
		At the end of the first quarter of			7 (Quarter 7)
		enrollment, two records are to be			8 (Quarter 8)
		furnished for an enrollee - a baseline			9 (Quarter 9)
		record (code = 0) and the end-of-first			10 (Quarter 10)
		quarter record (code = 1). Thereafter,			11 (Quarter 11)
		only one record is generated each			12 (Quarter 12)
		quarter.			13 (Quarter 13)
					14 (Quarter 14)
					15 (Quarter 15)
					16 (Quarter 16)
					17 (Quarter 17)
					18 (Quarter 18)
					19 (Quarter 19)
					20 (Quarter 20)
					21 (Post-program
					follow up at 6
					months)
					22 (Post-program
					follow up at 12
					months)
					23 (Post-program
					follow up – month
					not specified)
					99
					(Missing/unknown)
Rec_Var_4	Program	Quarter of completing the specific	8	String/	MMDDYYYY
	Completion	program arm of MIPCD		Numeric	
	Quarter	Provide the date of the first day of			88888888 (N/A)
		the quarter during which the enrollee			
		completes the program arm. For			99999999
		example, 01012012 for data from the			(Missing/unknown)
		first quarter of 2012.			
		If the enrollee has not completed the			
		program yet, code 88888888 (N/A)			
		may be provided.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_5	Enrollment Sequence	Current enrollment sequence of the participant	1	Numeric	1
		Some states allow participants to reenroll after discontinuing participation for a significant period of time. Some states count this reenrollment as the continuation of the original enrollment, while other states consider this as a separate enrollment. For participants from states where reenrollment is counted as a separate enrollment, the actual sequence of enrollment is to be provided. For e.g., a participant's second enrollment is to be coded as 2. For all other states, code 1 is to be entered.			
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	****

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_1	Date of Birth		8	String/	MMDDYYYY
				Numeric	
					99999999
					(Missing/unknown)
Core_Var_2	Gender		1	Numeric	1 (Male)
					2 (Female)
					9 (Missing/unknown)
Core_Var_3	Race		1	Numeric	1 (White)
					2 (Black or African
					American)
					3 (American Indian or
					Alaska Native)
					4 (Asian)
					5 (Native Hawaiian or
					Other Pacific Islander)
					6 (Multiple races)
					9 (Missing/unknown)
Core_Var_4	Ethnicity		1	Numeric	0 (Not Hispanic or
					Latino)
					1 (Hispanic or Latino)
					9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_5	Educational Attainment	Highest grade completed Only applicable to states that collect this information.	1	Numeric	1 (No formal schooling) 2 (Elementary school) 3 (Some high school) 4 (High school graduate/GED) 5 (Some college or 2 yr degree) 6 (Bachelor's degree) 7 (Post college degree) 9 (Missing/unknown)
Core_Var_6	Diabetes at Baseline	Whether had diabetes at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_7	Hypertension at Baseline	Whether had high blood pressure at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_8	Heart Disease at Baseline	Whether had heart disease at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_9	Smoking Status at Baseline	Whether a smoker at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_10	Date of Lapse of Medicaid Eligibility	Date of losing Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_11	Date of Regaining Medicaid Eligibility	Date of regaining Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1	Program Eligibility	Code that best describes program eligibility category	2	Numeric	1 (Smoker)
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program	2	Numeric	1(TV) 2 (Radio) 3 (Newspaper/Magazine) 4 (Billboard/Bus) 5 (Phone Book) 6 (Web) 7 (VA) 8 (Hospital) 9 (Clinic/Doctor's Office) 10 (Dentist/Dental Hygienist) 11 (Friend/Family) 12 (Pharmacy) 13 (School) 14 (Non-Profit Organization) 15 (Insurance/ HMO/Medi- Cal) 16 (Other) 99 (Missing/unknown)
Enroll_Var_3	Program Arm	Code of program arm Each arm of the program to be coded 1, 2, 3 etc. with sufficient specificity so that each person can only be in one mutually exclusive category at a time.	2	Numeric	8 (Non-randomized, selected for evaluation) 99 (Missing/unknown)
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_5	Weight Control	Controlling or reducing weight is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_6	Lower Cholesterol	Lowering cholesterol levels is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_7	Lower Blood Pressure	Lowering blood pressure is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_9	Manage Behavioral Health	Controlling and managing behavioral health conditions is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 0	Provider Agency	Name of the agencies providing the program services. For e.g., YMCA, xxx clinic (Decided not relevant for CA.)	2	Numeric	88 (N/A)
Enroll_Var_1 1	Date of Current Enrollment	Date of enrollment in the specific program arm of the MIPCD Date of current (latest) enrollment for those participants for whom the current enrollment is not their first enrollment	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Enroll_Var_1 2	Program of Most Recent Prior Enrollment	Code of program arm of most recent prior enrollment in the program for those participants for whom the current enrollment is not their first enrollment. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided.	2	String	88 (N/A)
		(Decided not relevant for CA.)			

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1 3	Date of Most Recent Prior Enrollment	Date of enrolling in the most recent prior enrollment in the program. For those participants whose current enrollment is their first enrollment, code 888888888 (N/A) (Decided not relevant for CA.)	8	String/ Numeric	88888888 (N/A)
Enroll_Var_1 4	Reason for Most Recent Prior Disenrollment	The reason for disenrolling from the most recent prior enrollment in the program. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided. (Decided not relevant for CA.)	2	Numeric	88 (N/A)

Name	Definition	Additional Description	Width	Туре	Value/Format
Serv_Var_1	Service No. 1 -	Helpline call – Completion of	1	Numeri	1 (Yes)
	Receipt	intake protocol and MIPCD		с	2 (No)
		enrollment			8 (N/A)
					9 (Missing/unknown)
Serv_Var_2	Service No. 2 -	Telephone counseling (pre-quit)	1	Numeri	1 (Yes)
	Receipt	session		с	2 (No)
					8 (N/A)
					9 (Missing/unknown)
Serv_Var_3	Service No. 3 -	Relapse prevention (follow up)	2	Numeri	XX
	Number of Units	session		с	88 (N/A)
					99 (Missing/unknown)
Serv_Var_4	Service No. 4 -	Nicotine Replacement Therapy	2	Numeri	88 (N/A)
	Number of Units	(NRT) shipment to home		с	

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_1	Incentive No. 1 -	Pilot outreach incentive	1	Numeri	1 (Yes)
	Receipt	(\$20)		с	2 (No)
					8 (N/A)
					9 (Missing/unknown)
Incent_Var_2	Incentive No. 2 -	Relapse prevention session	4	Numeri	8888 (N/A)
	Dollar Value	(\$10)		с	

Name	Definition	Additional Description	Width	Туре	Value/Format
Outcome_Var_1	Quit Attempt	Whether quit attempt made	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_2	Abstinence	Whether abstinent for 30 days	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_3	Number of Cigarettes	Number of cigarettes per day	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Outcome_Var_4	Nicotine Patches	Whether used nicotine patches	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_5	Quitting Aids	Whether used other quitting aids	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_6	Date of Measurement	Date of most recent measurement of outcomes CA is measuring all the outcomes on the same day so we only need one date of measurement variable	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)

Table B4. Health and Behavioral Outcomes

PROGRAM GROUP III Non-randomized, not selected for Evaluation

Individuals appearing in this program arm may appear in program groups IV, V and VI. Their records can be linked using their Medicaid ID.

A. Core Modules

Table A1.	Record Ide	entification

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State	US Postal Service state abbreviation.	2	String	ХХ
	Abbreviation	For e.g., California is CA			
Rec_Var_1	County	County abbreviation. For e.g., ALA for	3	String	ххх
а		Alameda, CC for Contra Costa etc.			
Rec_var_1b	Targeted	Whether county selected for CDP	1	Numeric	1 (Yes)
	County	intensive outreach during the year			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Rec_Var_2	Reporting	Current reporting quarter	8	String/	MMDDYYYY
	Quarter			Numeric	
		Provide the date of the first day of			
		the quarter. For example, 01012012			
		for data from the first quarter of			
		2012.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_3	Record Trail	Sequence of quarterly record of the	2	Numeric	0 (Baseline)
		enrollee.			1 (Quarter 1)
					2 (Quarter 2)
		For e.g., The record for the third			3 (Quarter 3)
		quarter of enrollment for an enrollee			4 (Quarter 4)
		will be coded as 3.			5 (Quarter 5)
					6 (Quarter 6)
		At the end of the first quarter of			7 (Quarter 7)
		enrollment, two records are to be			8 (Quarter 8)
		furnished for an enrollee - a baseline			9 (Quarter 9)
		record (code = 0) and the end-of-first			10 (Quarter 10)
		quarter record (code = 1). Thereafter,			11 (Quarter 11)
		only one record is generated each			12 (Quarter 12)
		quarter.			13 (Quarter 13)
					14 (Quarter 14)
					15 (Quarter 15)
					16 (Quarter 16)
					17 (Quarter 17)
					18 (Quarter 18)
					19 (Quarter 19)
					20 (Quarter 20)
					21 (Post-program
					follow up at 6
					months)
					22 (Post-program
					follow up at 12
					months)
					23 (Post-program
					follow up - month
					not specified)
					99
					(Missing/unknown)
Rec_Var_4	Program	Quarter of completing the specific	8	String/	MMDDYYYY
	Completion	program arm of MIPCD		Numeric	88888888 (N/A)
	Quarter				99999999
		Provide the date of the first day of			(Missing/unknown)
		the quarter during which the enrollee			, , ,
		completes the program arm. For			
		example, 01012012 for data from the			
		first quarter of 2012.			
		If the enrollee has not completed the			
		program yet, code 88888888 (N/A)			
		may be provided.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_5	Enrollment Sequence	Current enrollment sequence of the participant	1	Numeric	1
		Some states allow participants to reenroll after discontinuing participation for a significant period of time. Some states count this reenrollment as the continuation of the original enrollment, while other states consider this as a separate enrollment. For participants from states where reenrollment is counted as a separate enrollment, the actual sequence of enrollment is to be provided. For e.g., a participant's second enrollment is to be coded as 2. For all other states, code 1 is to be entered.			
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	xxxxxxxxxxxxx

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_1	Date of Birth		8	String/	MMDDYYYY
				Numeric	
					99999999
					(Missing/unknown)
Core_Var_2	Gender		1	Numeric	1 (Male)
					2 (Female)
					9 (Missing/unknown)
Core_Var_3	Race		1	Numeric	1 (White)
					2 (Black or African
					American)
					3 (American Indian or
					Alaska Native)
					4 (Asian)
					5 (Native Hawaiian or
					Other Pacific Islander)
					6 (Multiple races)
					9 (Missing/unknown)
Core_Var_4	Ethnicity		1	Numeric	0 (Not Hispanic or
					Latino)
					1 (Hispanic or Latino)
					9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_5	Educational Attainment	Highest grade completed Only applicable to states that collect this information.	1	Numeric	1 (No formal schooling) 2 (Elementary school) 3 (Some high school) 4 (High school graduate/GED) 5 (Some college or 2 yr degree) 6 (Bachelor's degree) 7 (Post college degree) 9 (Missing/unknown)
Core_Var_6	Diabetes at Baseline	Whether had diabetes at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_7	Hypertension at Baseline	Whether had high blood pressure at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_8	Heart Disease at Baseline	Whether had heart disease at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_9	Smoking Status at Baseline	Whether a smoker at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_10	Date of Lapse of Medicaid Eligibility	Date of losing Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_11	Date of Regaining Medicaid Eligibility	Date of regaining Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 999999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1	Program	Code that best describes	2	Numeric	1 (Smoker)
	Eligibility	program eligibility category			
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program	2	Numeric	1(TV) 2 (Radio) 3 (Newspaper/Magazine) 4 (Billboard/Bus) 5 (Phone Book) 6 (Web) 7 (VA) 8 (Hospital) 9 (Clinic/Doctor's Office) 10 (Dentist/Dental Hygienist)
					 11 (Friend/Family) 12 (Pharmacy) 13 (School) 14 (Non-Profit Organization) 15 (Insurance/ HMO/Medi-Cal) 16 (Other) 99 (Missing/unknown)
Enroll_Var_3	Program Arm	Code of program arm Each arm of the program to be coded 1, 2, 3, etc. with sufficient specificity so that each person can only be in one mutually exclusive category at a time.	2	Numeric	9 (Non-randomized not selected for evaluation) 99 (Missing/unknown)
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_5	Weight Control	Controlling or reducing weight is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_6	Lower Cholesterol	Lowering cholesterol levels is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_7	Lower Blood Pressure	Lowering blood pressure is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_9	Manage Behavioral Health	Controlling and managing behavioral health conditions is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 0	Provider Agency	Name of the agencies providing the program services. For e.g., YMCA, xxx clinic	2	Numeric	88 (N/A)
Enroll_Var_1 1	Date of Current Enrollment	(Decided not relevant for CA.) Date of enrollment in the specific program arm of the MIPCD Date of current (latest) enrollment for those participants for whom the current enrollment is not their first enrollment	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Enroll_Var_1 2	Program of Most Recent Prior Enrollment	Code of program arm of most recent prior enrollment in the program for those participants for whom the current enrollment is not their first enrollment. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided. (Decided not relevant for CA.)	2	String	88 (N/A)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1 3	Date of Most Recent Prior Enrollment	Date of enrolling in the most recent prior enrollment in the program. For those	8	String/ Numeric	88888888 (N/A)
		participants whose current enrollment is their first enrollment, code 88888888 (N/A)			
		(Decided not relevant for CA.)			
Enroll_Var_1 4	Reason for Most Recent Prior Disenrollment	The reason for disenrolling from the most recent prior enrollment in the program. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided.	2	Numeric	88 (N/A)
		(Decided not relevant for CA.)			

Name	Definition	Additional Description	Width	Туре	Value/Format		
Serv_Var_1	Service No. 1 -	Helpline call – Completion of	1	Numeri	1 (Yes)		
	Receipt	intake protocol and MIPCD		с	2 (No)		
		enrollment			8 (N/A)		
					9 (Missing/unknown)		
Serv_Var_2	Service No. 2 -	Telephone counseling (pre-quit)	1	Numeri	1 (Yes)		
	Receipt	session		с	2 (No)		
					8 (N/A)		
					9 (Missing/unknown)		
Serv_Var_3	Service No. 3 -	Relapse prevention (follow up)	2	Numeri	ХХ		
	Number of Units	session		с	88 (N/A)		
					99 (Missing/unknown)		
Serv_Var_4	Service No. 4 -	Nicotine replacement therapy	2	Numeri	88 (N/A)		
	Number of Units	(NRT) shipment to home		с			

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_1	Incentive No. 1 – Receipt	Pilot outreach incentive (\$20)	1	Numeric	1 (Yes) 2 (No)
	Receipt	(\$20)			8 (N/A)
					9
					(Missing/unknown)
Incent_Var_2	Incentive No. 2 -	Relapse prevention session	4	Numeric	8888 (N/A)
	Dollar Value	(\$10)			

PROGRAM GROUP IV Pilot outreach program participants

This program group contains two sets of individuals who received outreach through the CDP Pilot Outreach Program: 1) those that called and enrolled into one of the MIPCD program arms and 2) those that called and were considered ineligible for enrollment in MIPCD. The first group of individuals will appear in one or more of the other data sets. Their records in the other data sets can be linked using their Medicaid ID.

A. Core Modules

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State Abbreviation	US Postal Service state abbreviation. For e.g., California is CA	2	String	Xx
Rec_Var_1 a	County	County abbreviation. For e.g., ALA for Alameda, CC for Contra Costa etc.	3	String	XXX
Rec_var_1b	Targeted County	Whether county selected for CDP intensive outreach during the year	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Rec_Var_2	Reporting Quarter	Current reporting quarter Provide the date of the first day of the quarter. For example, 01012012 for data from the first quarter of 2012.	8	String/ Numeric	MMDDYYYY
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	XXXXXXXXXXXXXXX

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_1	Date of Birth		8	String/	MMDDYYYY
				Numeric	
					99999999
					(Missing/unknown)
Core_Var_2	Gender		1	Numeric	1 (Male)
					2 (Female)
					9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_3	Race		1	Numeric	1 (White)
					2 (Black or African
					American)
					3 (American Indian or
					Alaska Native)
					4 (Asian)
					5 (Native Hawaiian or
					Other Pacific Islander)
					6 (Multiple races)
					9 (Missing/unknown)
Core_Var_4	Ethnicity		1	Numeric	0 (Not Hispanic or
					Latino)
					1 (Hispanic or Latino)
					9 (Missing/unknown)
Core_Var_5	Educational	Highest grade completed	1	Numeric	1 (No formal schooling)
	Attainment				2 (Elementary school)
		Only applicable to states			3 (Some high school)
		that collect this			4 (High school
		information.			graduate/GED)
					5 (Some college or 2 yr
					degree)
					6 (Bachelor's degree)
					7 (Post college degree)
					9 (Missing/unknown)
Core_Var_6	Diabetes at	Whether had diabetes at	1	Numeric	1 (Yes)
	Baseline	baseline			2 (No)
					8 (N/A)
		State can use its own			9 (Missing/unknown)
		definition of the condition			, <u>,</u> ,
		depending on data			
		availability.			
Core_Var_7	Hypertension at	Whether had high blood	1	Numeric	1 (Yes)
	Baseline	pressure at baseline	-		2 (No)
		p			8 (N/A)
		State can use its own			9 (Missing/unknown)
		definition of the condition			, (i iiiiii), <u>.</u> ,
		depending on data			
		availability.			
Core_Var_8	Heart Disease at	Whether had heart disease	1	Numeric	1 (Yes)
	Baseline	at baseline	-		2 (No)
					8 (N/A)
		State can use its own			9 (Missing/unknown)
		definition of the condition			
		depending on data			
		availability.			
		avallavility.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_9	Smoking Status at	Whether a smoker at	1	Numeric	1 (Yes)
	Baseline	baseline			2 (No)
					8 (N/A)
		State can use its own			9 (Missing/unknown)
		definition of the condition			
		depending on data			
		availability.			
Core_Var_10	Date of Lapse of	Date of losing Medicaid	8	String/	MMDDYYYY
	Medicaid	eligibility during the		Numeric	
	Eligibility	quarter			88888888
					(Not applicable)
					99999999
					(Missing/unknown)
Core_Var_11	Date of Regaining	Date of regaining Medicaid	8	String/	MMDDYYYY
	Medicaid	eligibility during the		Numeric	
	Eligibility	quarter			88888888
					(Not applicable)
					99999999
					(Missing/unknown)

Name	Definition	Additional Description	Widt h	Туре	Value/Format
Enroll_Var_1	Program	Code that best describes	2	Numeric	1 (Smoker)
	Eligibility	program eligibility category			

	Widt					
Name	Definition	Additional Description	h	Туре	Value/Format	
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program	2	Numeric	1(TV) 2 (Radio) 3 (Newspaper/Magazine) 4 (Billboard/Bus) 5 (Phone Book) 6 (Web) 7 (VA) 8 (Hospital) 9 (Clinic/Doctor's Office) 10 (Dentist/Dental Hygienist) 11 (Friend/Family) 12 (Pharmacy) 13 (School) 14 (Non-Profit Organization) 15 (Insurance/HMO/Medi- Cal) 16 (Other) 99 (Missing/unknown)	
Enroll_Var_3	Program Arm	Code of program arm Each arm of the program to be coded 1, 2, 3 etc. with sufficient specificity so that each person can only be in one mutually exclusive category at a time.	2	Numeric	10 (Pilot outreach program callers) 99 (Missing/unknown)	
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)	
Enroll_Var_5	Weight Control	Controlling or reducing weight is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)	
Enroll_Var_6	Lower Cholesterol	Lowering cholesterol levels is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)	
Enroll_Var_7	Lower Blood Pressure	Lowering blood pressure is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)	
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)	

Name	Definition	Additional Description	Widt h	Туре	Value/Format
Enroll_Var_9	Manage Behavioral Health	Controlling and managing behavioral health conditions is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 0	Provider Agency	Name of the agencies providing the program services. For e.g., YMCA, xxx clinic (Decided not relevant for CA.)	2	Numeric	88 (N/A)
Enroll_Var_1 1	Date of Current Enrollment	Date on which call to the Helpline was made	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Serv_Var_1	Service No. 1 – Receipt	Helpline call – Completion of intake protocol and MIPCD enrollment	1	Numeri c	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_1	Incentive No. 1 -	Pilot outreach incentive (\$20)	1	Numeri	1 (Yes)
	Receipt			с	2 (No)
					8 (N/A)
					9 (Missing/unknown)

PROGRAM GROUP V Reengagement Arms 1 - 4

The information from the reengagement program group will be merged with the MIPCD program records of these individuals in the other data sets using their Medicaid ID.

A. Core Modules

Table A1. R	ecord	Identific	ation

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State Abbreviation	US Postal Service state abbreviation. For e.g., California is CA	2	String	XX
Rec_Var_1 a	County	County abbreviation. For e.g., ALA for Alameda, CC for Contra Costa etc.	3	String	XXX
Rec_var_1b	Targeted County	Whether county selected for CDP intensive outreach during the year	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Rec_Var_2	Reporting Quarter	Current reporting quarter Provide the date of the first day of the quarter. For example, 01012012 for data from the first quarter of 2012.	8	String/ Numeric	MMDDYYYY
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	XXXXXXXXXXXXXXX

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_10	Date of Lapse of Medicaid Eligibility	Date of losing Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)
Core_Var_11	Date of Regaining Medicaid Eligibility	Date of regaining Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)

			Widt		
Name	Definition	Additional Description	h	Туре	Value/Format
Enroll_Var_3	Program Arm	Code of program arm	2	Numeric	4 (Re-engagement
					Arm 1 - \$0)
		Each arm of the program to be			5 (Re-engagement
		coded 1, 2, 3 etc. with sufficient			Arm 2 - \$10)
		specificity so that each person			6 (Re-engagement
		can only be in one mutually			Arm 3 - \$20)
		exclusive category at a time.			7 (Re-engagement
					Arm 4 - \$40)
					99
					(Missing/unknown)
Enroll_Var_11	Date of Current	Date on which the invitation	8	String/	MMDDYYYY
	Enrollment	mail to reengage was issued		Numeric	99999999
					(Missing/unknown)
Enroll_Var_11a	Date of	Date on which called Helpline	8	String/	MMDDYYYY
	Reengagement	to reenroll		Numeric	99999999
					(Missing/unknown)

Table B2. Service Utilization

Name	Definition	Additional Description	Width	Туре	Value/Format
Serv_Var_5	Service No. 5 -	Completed one counseling	1	Numeri	1 (Yes)
	Receipt	session after reenrolling		с	2 (No) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_3	Incentive No. 3 - Dollar Value	Reengagement incentive	1	Numeri c	1 (\$0) 2 (\$10) 3 (\$20) 4 (\$40) 9 (Missing/unknown)

PROGRAM GROUP VI Enhanced Services Recipients

Individuals appearing in this program arm may appear in other program groups. Their records can be linked using their Medicaid ID.

A. Core Modules

Table A1. Record Identification

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_1	State	US Postal Service state abbreviation.	2	String	хх
	Abbreviation	For e.g., California is CA			
Rec_Var_1	County	County abbreviation. For e.g., ALA for	3	String	ххх
а		Alameda, CC for Contra Costa etc.			
Rec_var_1b	Targeted	Whether county selected for CDP	1	Numeric	1 (Yes)
	County	intensive outreach during the year			2 (No)
					8 (N/A)
					9 (Missing/unknown)
Rec_Var_2	Reporting	Current reporting quarter	8	String/	MMDDYYYY
	Quarter			Numeric	
		Provide the date of the first day of			
		the quarter. For example, 01012012			
		for data from the first quarter of			
		2012.			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_3	Record Trail	Sequence of quarterly record of the	2	Numeric	0 (Baseline)
		enrollee.			1 (Quarter 1)
					2 (Quarter 2)
		For e.g., The record for the third			3 (Quarter 3)
		quarter of enrollment for an enrollee			4 (Quarter 4)
		will be coded as 3.			5 (Quarter 5)
					6 (Quarter 6)
		At the end of the first quarter of			7 (Quarter 7)
		enrollment, two records are to be			8 (Quarter 8)
		furnished for an enrollee - a baseline			9 (Quarter 9)
		record (code = 0) and the end-of-first			10 (Quarter 10)
		quarter record (code = 1). Thereafter,			11 (Quarter 11)
		only one record is generated each			12 (Quarter 12)
		quarter.			13 (Quarter 13)
					14 (Quarter 14)
					15 (Quarter 15)
					16 (Quarter 16)
					17 (Quarter 17)
					18 (Quarter 18)
					19 (Quarter 19)
					20 (Quarter 20)
					21 (Post-program
					follow up at 6
					months)
					22 (Post-program
					follow up at 12
					months)
					23 (Post-program
					follow up – month
					not specified)
					99
			0		(Missing/unknown)
Rec_Var_4	Program	Quarter of completing the specific	8	String/	88888888 (N/A)
	Completion	program arm of MIPCD		Numeric	
	Quarter				
		Since an enrollee could potentially be			
		receiving enhanced services			
		throughout the MIPCD program			
		period, there is no specific program			
		completion quarter for this program			
		arm. Enter code 88888888 (N/A).			

Name	Definition	Additional Description	Width	Туре	Value/Format
Rec_Var_5	Enrollment Sequence	Current enrollment sequence of the participant	1	Numeric	1
		Some states allow participants to reenroll after discontinuing participation for a significant period of time. Some states count this reenrollment as the continuation of the original enrollment, while other states consider this as a separate enrollment. For participants from states where reenrollment is counted as a separate enrollment, the actual sequence of enrollment is to be provided. For e.g., a participant's second enrollment is to be coded as 2. For all other states, code 1 is to be entered.			
Rec_Var_6	Unique Participant ID	Participant's unique program ID (Medicaid ID)	15	String	xxxxxxxxxxxxx

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_1	Date of Birth		8	String/	MMDDYYYY
				Numeric	
					99999999
					(Missing/unknown)
Core_Var_2	Gender		1	Numeric	1 (Male)
					2 (Female)
					9 (Missing/unknown)
Core_Var_3	Race		1	Numeric	1 (White)
					2 (Black or African
					American)
					3 (American Indian or
					Alaska Native)
					4 (Asian)
					5 (Native Hawaiian or
					Other Pacific Islander)
					6 (Multiple races)
					9 (Missing/unknown)
Core_Var_4	Ethnicity		1	Numeric	0 (Not Hispanic or
					Latino)
					1 (Hispanic or Latino)
					9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_5	Educational Attainment	Highest grade completed Only applicable to states that collect this information.	1	Numeric	1 (No formal schooling) 2 (Elementary school) 3 (Some high school) 4 (High school graduate/GED) 5 (Some college or 2 yr degree) 6 (Bachelor's degree) 7 (Post college degree) 9 (Missing/unknown)
Core_Var_6	Diabetes at Baseline	Whether had diabetes at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_7	Hypertension at Baseline	Whether had high blood pressure at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_8	Heart Disease at Baseline	Whether had heart disease at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_9	Smoking Status at Baseline	Whether a smoker at baseline State can use its own definition of the condition depending on data availability.	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Core_Var_10	Date of Lapse of Medicaid Eligibility	Date of losing Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Core_Var_11	Date of Regaining Medicaid Eligibility	Date of regaining Medicaid eligibility during the quarter	8	String/ Numeric	MMDDYYYY 888888888 (Not applicable) 999999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1	Program Eligibility	Code that best describes program eligibility category	2	Numeric	1 (Smoker)
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program	2	Numeric	1(TV) 2 (Radio) 3 (Newspaper/Magazine) 4 (Billboard/Bus) 5 (Phone Book) 6 (Web) 7 (VA) 8 (Hospital) 9 (Clinic/Doctor's Office) 10 (Dentist/Dental Hygienist) 11 (Friend/Family) 12 (Pharmacy) 13 (School) 14 (Non-Profit Organization) 15 (Insurance/HMO/Medi- Cal) 16 (Other) 99 (Missing/unknown)
Enroll_Var_3	Program Arm	Code of program arm Each arm of the program to be coded 1, 2, 3 etc. with sufficient specificity so that each person can only be in one mutually exclusive category at a time.	2	Numeric	11 (Enhanced services recipients)99 (Missing/unknown)
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_5	Weight Control	Controlling or reducing weight is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_6	Lower Cholesterol	Lowering cholesterol levels is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_7	Lower Blood Pressure	Lowering blood pressure is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_9	Manage Behavioral Health	Controlling and managing behavioral health conditions is a prevention goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 0	Provider Agency	Name of the agencies providing the program services. For e.g., YMCA, xxx clinic (Decided not relevant for CA.)	2	Numeric	88 (N/A)
Enroll_Var_1 1	Date of Current Enrollment	Date of enrollment in the specific program arm of the MIPCD Date of current (latest) enrollment for those participants for whom the current enrollment is not their first enrollment	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Enroll_Var_1 2	Program of Most Recent Prior Enrollment	Code of program arm of most recent prior enrollment in the program for those participants for whom the current enrollment is not their first enrollment. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided.	2	String	88 (N/A)

Name	Definition	Additional Description	Width	Туре	Value/Format
Enroll_Var_1 3	Date of Most Recent Prior Enrollment	Date of enrolling in the most recent prior enrollment in the program. For those participants whose current enrollment is their first enrollment, code 88888888 (N/A)	8	String/ Numeric	88888888 (N/A)
		(Decided not relevant for CA.)			
Enroll_Var_1 4	Reason for Most Recent Prior Disenrollment	The reason for disenrolling from the most recent prior enrollment in the program. For those participants whose current enrollment is their first enrollment, code 88 (N/A) may be provided.	2	Numeric	88 (N/A)
		(Decided not relevant for CA.)			

Table D2. Set vice of inization						
Name	Definition	Additional Description	Width	Туре	Value/Format	
Serv_Var_1	Service No. 1 -	Helpline call – Completion of	1	Numeric	1 (Yes)	
	Receipt	intake protocol and MIPCD			2 (No)	
		enrollment			8 (N/A)	
					9 (Missing/unknown)	
Serv_Var_2	Service No. 2 -	Telephone counseling (pre-quit)	1	Numeric	1 (Yes)	
	Receipt	session			2 (No)	
					8 (N/A)	
					9 (Missing/unknown)	
Serv_Var_3	Service No. 3 -	Relapse prevention (follow up)	2	Numeric	ХХ	
	Number of Units	session			88 (N/A)	
					99 (Missing/unknown)	
Serv_Var_4	Service No. 4 -	Nicotine Replacement Therapy	2	Numeric	ХХ	
	Number of Units	(NRT) shipment to home			88 (N/A)	
					99 (Missing/unknown)	

Name	Definition	Additional Description	Width	Туре	Value/Format
Incent_Var_1	Incentive No. 1 – Receipt	Pilot outreach incentive (\$20)	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Incent_Var_2	Incentive No. 2 - Dollar Value	Relapse prevention session (\$10)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)

Name	Definition	Additional Description	Width	Туре	Value/Format
Outcome_Var_1	Quit attempt	Whether quit attempt made	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_2	Abstinence	Whether abstinent for 30 days	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_3	Number of Cigarettes	Number of cigarettes per day	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Outcome_Var_4	Nicotine Patches	Whether used nicotine patches	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_5	Quitting aids	Whether used other quitting aids	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_6	Date of Measurement	Date of most recent measurement of outcomes CA is measuring all the outcomes on the same day so we only need one date of measurement variable	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)