MEDICAID INCENTIVES FOR PREVENTION OF CHRONIC DISEASES (MIPCD)

MINIMUM DATA SET – Nevada

# A. Core Modules

Table A1. Record Identification

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Rec\_Var\_1 | State Abbreviation | US Postal Service state abbreviation. For e.g., California is CA | 2 | String | xx |
| 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\_3 | Record Trail | Sequence of quarterly record of the enrollee  For e.g., the record for the third quarter of enrollment for an enrollee will be coded as 3.  At the end of the first quarter of enrollment, two records are to be furnished for an enrollee - a baseline record (code = 0) and the end-of-first quarter record (code = 1). Thereafter, only one record is generated each quarter. | 2 | Numeric | 0 (Baseline)  1 (Quarter 1)  2 (Quarter 2)  3 (Quarter 3)  4 (Quarter 4)  5 (Quarter 5)  6 (Quarter 6)  7 (Quarter 7)  8 (Quarter 8)  9 (Quarter 9)  10 (Quarter 10)  11 (Quarter 11)  12 (Quarter 12)  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 Completion Quarter | Quarter of completing the MIPCD program  Provide the date of the first day of the quarter during which the enrollee completes the program. 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. | 8 | String/ Numeric | MMDDYYYY  88888888 (N/A)  99999999 (Missing/unknown) |
| Rec\_Var\_5 | Enrollment Sequence | Current enrollment sequence of the participant  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.  This variable is intended to capture multiple enrollments within a program arm and not switching between program arms which is a possibility for NV. | 1 | Numeric | 1 (Single enrollment)  x (Sequence of enrollment)  9 (Missing/unknown) |
| Rec\_Var\_6 | Unique participant ID | Participant’s unique program ID  (Medicaid ID) | 15 | String | xxxxxxxxxxxxxxx |

Table A2. Demographic Information and Medicaid Status

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Core\_Var\_1 | Date of Birth |  | 8 | String/ Numeric | MMDDYYYY  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) |
| 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)  8 (N/A)  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  Data not available for NV. Enter code 8 (N/A) | 1 | Numeric | 8 (N/A) |
| Core\_Var\_10 | Date of Lapse of Medicaid Eligibility | Date of losing Medicaid eligibility during the quarter | 8 | String/ Numeric | MMDDYYYY  88888888  (N/A)  99999999 (Missing/unknown) |
| Core\_Var\_11 | Date of Regaining Medicaid Eligibility | Date of regaining Medicaid eligibility during the quarter | 8 | String/ Numeric | MMDDYYYY  88888888  (N/A)  99999999 (Missing/unknown) |

# B. State-specific Modules

Table B1. Enrollment Status

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Enroll\_Var\_1 | Program Eligibility | Code that best describes program eligibility category | 2 | Numeric | 8 (Diabetes)  9 (Pre-diabetes or at risk for diabetes)  10 (Overweight/Obese)  11 (Overweight/Obese – Diabetic)  12 (Overweight/Obese - Pre-diabetes or at risk for diabetes)  14 (High blood pressure)  18 (Children at risk for diabetes and/or cardio-vascular conditions)  99 (Missing/unknown) |
| Enroll\_Var\_2 | Outreach | Source of outreach and recruitment into the program | 2 | Numeric | 1 (Direct-to-participant outreach telephone call by Medicaid managed care organization)  2 (Direct-to-participant outreach telephone call by program implementing/outreach organization such as the YMCA)  3 (Direct-to-participant outreach mailing by Medicaid managed care organization)  4 (Direct-to-participant outreach mailing by program implementing/outreach organization such as the YMCA)  5 (Provider outreach at medical home/ primary care practice/specialty care practice/clinic)  6 (Outreach during health education class or event)  7 (Outreach through disease/case management program)  8 (Managed care organization web-site)  9 (Website of program implementing/outreach organization such as the YMCA )  10 (Brochures/flyers/posters)  11 (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 (Amerigroup Nevada Diabetes Management Program TREATMENT GROUP 1)  2 (Amerigroup Nevada Diabetes Management Program TREATMENT GROUP 2)  3 (Amerigroup Nevada Diabetes Management Program CONTROL GROUP)  4 (Health Plan of Nevada Diabetes Management Program TREATMENT GROUP 1)  5 (Health Plan of Nevada Diabetes Management Program TREATMENT GROUP 2)  6 (Health Plan of Nevada Diabetes Management Program CONTROL GROUP)  7 ( Health Plan of Nevada Weight Management Program TREATMENT GROUP 1)  8 ( Health Plan of Nevada Weight Management Program TREATMENT GROUP 2)  9 (Health Plan of Nevada Weight Management Program CONTROL GROUP)  10 (Lied Clinic Outpatient Facility at University Medical Center (UMC) TREATMENT GROUP Good for Options A & B)  11 ( Lied Clinic Outpatient Facility at University Medical Center (UMC) CONTROL GROUP  12 (The YMCA of Southern Nevada TREATMENT GROUP Good for Options A & B)  13 (The YMCA of Southern Nevada CONTROL GROUP)  14 ( Healthy Hearts Program for Children TREATMENT GROUP 1)  15 ( Healthy Hearts Program for Children TREATMENT GROUP 2)  16 ( Healthy Hearts Program for Children CONTROL GROUP)  99 (Missing/unknown) |
| Enroll\_Var\_4 | Tobacco Cessation | Tobacco cessation is a prevention goal  Decided not relevant for NV. Enter code 8 (N/A) | 1 | Numeric | 8 (N/A) |
| 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\_10 | Provider Agency | Name of the agencies providing the program services. For e.g., YMCA, xxx clinic | 2 | Numeric | 1 (Amerigroup)  2 (Health Plan of Nevada)  3 (YMCA)  4 (UMC Lied Clinic)  5 (Children’s Heart Clinic – Healthy Hearts)  88 (N/A)  99 (Missing/unknown) |
| Enroll\_Var\_11 | Date of Current Enrollment | Date of enrollment in the program  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\_12 | 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.  If the most recent prior enrollment was a switching of program arms, the code of the program arm from which the switch occurred may be entered. If the most recent prior enrollment is a subsequent enrollment within the same program arm after a break, the program arm code to be entered will be the same as the code of the current program arm. This is the case even if the participant has switched program arms in the past. | 2 | String | xx  88 (N/A)  99 (Missing/unknown) |
| Enroll\_Var\_13 | 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 | MMDDYYYY  888888888 (N/A)  99999999 (Missing/unknown) |
| Enroll\_Var\_14 | 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.  (NV is not able to provide this information) | 2 | Numeric | 88 (N/A) |

Table B2. Service Utilization

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Serv\_Var\_1 | Service No. 1 - Receipt | Whether received test for HbA1c | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_2 | Service No. 2 - Receipt | Whether received test for LDL-C | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_3 | Service No. 3 – Receipt | Whether received test for HDL-C | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_4 | Service No. 4 - Receipt | Whether received test for total cholesterol | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_5 | Service No. 5 - Receipt | Whether received test for triglycerides | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_6 | Service No. 6 - Receipt | Whether received test for cholesterol ratio | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_7 | Service No. 7 - Receipt | Whether received test for fasting plasma glucose | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_8 | Service No. 8 – Receipt | Whether received test for blood pressure | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_9 | Service No. 9 - Receipt s | Whether received eye exam | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_10 | Service No. 10 - Receipt | Whether received foot exam | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_11 | Service No. 11 - Receipt | Whether body fat percentage measured | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_12 | Service No. 12 - Receipt | Whether waist circumference measured | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_13 | Service No. 13 – Receipt | Whether resting heart rate measured | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_14 | Service No. 14 – Receipt | Whether received the 138-page Workbook and Food & Exercise Diary | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_15 | Service No. 15 – Receipt | Whether received the 152-page Workbook and Food & Exercise Diary | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Serv\_Var\_16 | Service No. 16 - Number of Units | Health education session | 2 | Numeric | xx  88 (N/A)  99 (Missing/unknown) |
| Serv\_Var\_17 | Service No. 17 - Number of Units | Weight management class | 2 | Numeric | xx  88 (N/A)  99 (Missing/unknown) |
| Serv\_Var\_18 | Service No. 18 - Number of Units | Weight support class | 2 | Numeric | xx  88 (N/A)  99 (Missing/unknown) |

Table B3. Incentives

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Incent\_Var\_1 | Incentive No. 1 – Point Value | Amerigroup Nevada Diabetes Management Program – Enrollment (500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_2 | Incentive No. 2 – Point Value | HbA1C test at enrollment (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_3 | Incentive No. 3 - Point Value | HbA1C test at 6 months or 12 months (1000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_4 | Incentive No. 4 - Point Value | HbA1C test at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_5 | Incentive No. 5 - Point Value | HbA1c in good control (<7%) at 6 months or 12 months (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_6 | Incentive No. 6 - Point Value | HbA1c in good control (<7%) at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_7 | Incentive No. 7 - Point Value | LDL-C test at enrollment (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_8 | Incentive No. 8 - Point Value | LDL-C test at 6 months or 12 months (1000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_9 | Incentive No. 9 - Point Value | LDL-C test at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_10 | Incentive No. 10 - Point Value | LDL-C in good control (<100 mg/dL) at 6 months or 12 months (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_11 | Incentive No. 11 - Point Value | LDL-C in good control (<100 mg/dL) at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_12 | Incentive No. 12 - Point Value | Blood pressure test at enrollment (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_13 | Incentive No. 13 - Point Value | Blood pressure test at 6 months or 12 months (1000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_14 | Incentive No. 14 - Point Value | Blood pressure test at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_15 | Incentive No. 15 - Point Value | Blood pressure <140/90 at 6 months or 12 months (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_16 | Incentive No. 16 - Point Value | Blood pressure <140/90 at 6 months or 12 months (3500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_17 | Incentive No. 17- Point Value | Eye exam at enrollment or 12 months (1500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_18 | Incentive No. 18 - Point Value | Foot exam at enrollment or 12 months (1500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_19 | Incentive No. 19 - Point Value | Completion of weight management class – 1 hour class/week (1250 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_20 | Incentive No. 20 - Point Value | Attendance at weight management support group – session or one-on-one (500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_21 | Incentive No. 21 – Point Value | Lied Clinic Outpatient Facility at University Medical Center (UMC) – Enrollment (27500 or 500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_22 | Incentive No. 22 - Point Value | YMCA of Southern Nevada - Attend Program (25000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_23 | Incentive No. 23 - Point Value | YMCA of Southern Nevada - Goal Achievement (Weight loss, physical activity -30 min/week by week 6 & 150 min/week by week 16) – Weeks 6, 7, 8, 9, 10, 11, & 12 (1500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_24 | Incentive No. 24 - Point Value | YMCA of Southern Nevada - Program Completion at week 16 (2000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_25 | Incentive No. 25- Point Value | YMCA of Southern Nevada – Weight Loss >5% at week 16 (7500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_26 | Incentive No. 26 - Point Value | YMCA of Southern Nevada – Weight Loss >5% at week 16 (10000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_27 | Incentive No. 27 - Point Value | YMCA of Southern Nevada – Retention of Weight Loss at 4, 5 and 6 month follow-up (5000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_28 | Incentive No. 28 - Point Value | YMCA of Southern Nevada – Retention of Weight Loss at 4 month follow-up (8000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_29 | Incentive No. 29 - Point Value | YMCA of Southern Nevada – Retention of Weight Loss at 5 month follow-up (9000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_30 | Incentive No. 30 - Point Value | YMCA of Southern Nevada – Retention of Weight Loss at 6 month follow-up (10000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_31 | Incentive No. 31- Point Value | Healthy Hearts Program for Children – Enrollment (Youth only, 25000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_32 | Incentive No. 32 - Point Value | Healthy Hearts Program for Children – Enrollment (Parent, 25000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_33 | Incentive No. 33- Point Value | Healthy Hearts Program for Children – Enrollment (25000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_34 | Incentive No. 34 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 6 (Youth only, 1250 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_35 | Incentive No. 35 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 6 (Parent, 1250 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_36 | Incentive No. 36 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 6 (2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_37 | Incentive No. 37 - Point Value | Healthy Hearts Program for Children – Program Completion at week 12 (Youth only, 3750 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_38 | Incentive No. 38 - Point Value | Healthy Hearts Program for Children – Program Completion at week 12 (Parent, 3750 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_39 | Incentive No. 39 - Point Value | Healthy Hearts Program for Children – Program Completion at week 12 (7500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_40 | Incentive No. 40 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 12 (Youth only, 2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_41 | Incentive No. 41 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 12 (Parent, 2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_42 | Incentive No. 42 - Point Value | Healthy Hearts Program for Children – Goal Achievement at week 12 (5000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_43 | Incentive No. 43 - Point Value | Healthy Hearts Program for Children – Re-evaluation at week 12 and 3, 6, 9, and 12 month follow-up (Youth only, 2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_44 | Incentive No. 44 - Point Value | Healthy Hearts Program for Children – Re-evaluation at week 12 and 3, 6, 9, and 12 month follow-up (Parent, 2500 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Incent\_Var\_45 | Incentive No. 45 - Point Value | Healthy Hearts Program for Children – Re-evaluation at week 12 and 3, 6, 9, and 12 month follow-up (5000 Points) | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |

Table B4. Health and Behavioral Outcomes

| **Name** | **Definition** | **Additional Description** | **Width** | **Type** | **Value/Format** |
| --- | --- | --- | --- | --- | --- |
| Outcome\_Var\_1 | Systolic BP | mm Hg | 3 | Numeric | xxx  999 (Missing/unknown) |
| Outcome\_Var\_2 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_3 | Diastolic BP | mm Hg | 3 | Numeric | xxx  999 (Missing/unknown) |
| Outcome\_Var\_4 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_5 | LDL-C | mg/dL | 3 | Numeric | xxx  999 (Missing/unknown) |
| Outcome\_Var\_6 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_7 | HbA1c | Percentage | 4 | Numeric | xxxx  9999 (Missing/unknown) |
| Outcome\_Var\_8 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_9 | Eye Exam | Eye Exam Conducted? | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Outcome\_Var\_10 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_11 | Foot Exam | Foot exam conducted? | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Outcome\_Var\_12 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_13 | Body Fat Percentage | Percentage | 4 | Numeric | xxxx  8888 (N/A)  9999 (Missing/unknown) |
| Outcome\_Var\_14 | Date of Measurement | Date of most recent measurement | 8 | String/ Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_15 | Waist Circumference | Inches | 3 | Numeric | xxx  888 (N/A)  999 (Missing/unknown) |
| Outcome\_Var\_16 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_17 | Resting Heart Rate | Beats per minute | 3 | Numeric | xxx  888 (N/A)  999 (Missing/unknown) |
| Outcome\_Var\_18 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_19 | Weight Loss >5% | Whether lost >5% weight | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Outcome\_Var\_20 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_21 | Retention of weight loss | Whether weight loss retained | 1 | Numeric | 1 (Yes)  2 (No)  8 (N/A)  9 (Missing/unknown) |
| Outcome\_Var\_22 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_23 | Height | Inches | 3 | Numeric | xxx  999 (Missing/unknown) |
| Outcome\_Var\_24 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |
| Outcome\_Var\_25 | Weight | Pounds | 4 | Numeric | xxxx  9999 (Missing/unknown) |
| Outcome\_Var\_26 | Date of Measurement | Date of most recent measurement | 8 | String/  Numeric | MMDDYYYY  99999999 (Missing/unknown) |