

**MEDICAID INCENTIVES FOR PREVENTION OF CHRONIC DISEASES (MIPCD)  
MINIMUM DATA SET - Nevada**

**A. Core Modules**

**Table A1. Record Identification**

<b>Name</b>	<b>Definition</b>	<b>Additional Description</b>	<b>Width</b>	<b>Type</b>	<b>Value/Format</b>
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)

Name	Definition	Additional Description	Width	Type	Value/Format
Rec_Var_4	Program Completion Quarter	<p>Quarter of completing the MIPCD program</p> <p>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.</p> <p>If the enrollee has not completed the program yet, code 88888888 (N/A) may be provided.</p>	8	String/ Numeric	MMDDYYYY 88888888 (N/A) 99999999 (Missing/unknown)
Rec_Var_5	Enrollment Sequence	<p>Current enrollment sequence of the participant</p> <p>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.</p> <p>This variable is intended to capture multiple enrollments within a program arm and not switching between program arms which is a possibility for NV.</p>	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**

<b>Name</b>	<b>Definition</b>	<b>Additional Description</b>	<b>Width</b>	<b>Type</b>	<b>Value/Format</b>
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)

Name	Definition	Additional Description	Width	Type	Value/Format
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 cardiovascular conditions) 99 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
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

Name	Definition	Additional Description	Width	Type	Value/Format
					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)

Name	Definition	Additional Description	Width	Type	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_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)

Name	Definition	Additional Description	Width	Type	Value/Format
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.  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_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	MMDDYYYY 888888888 (N/A) 99999999 (Missing/unknown)
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.  (NV is not able to provide this information)	2	Numeric	88 (N/A)



**Table B2. Service Utilization**

<b>Name</b>	<b>Definition</b>	<b>Additional Description</b>	<b>Width</b>	<b>Type</b>	<b>Value/Format</b>
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)

Name	Definition	Additional Description	Width	Type	Value/Format
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)

Name	Definition	Additional Description	Width	Type	Value/Format
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)

Name	Definition	Additional Description	Width	Type	Value/Format
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)

Name	Definition	Additional Description	Width	Type	Value/Format
Incent_Var_3 1	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_3 2	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_3 3	Incentive No. 33- Point Value	Healthy Hearts Program for Children – Enrollment (25000 Points)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_3 4	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_3 5	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_3 6	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_3 7	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_3 8	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_3 9	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_4 0	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_4 1	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_4 2	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)

Name	Definition	Additional Description	Width	Type	Value/Format
Incent_Var_4 3	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_4 4	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_4 5	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_1 0	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_1 1	Foot Exam	Foot exam conducted?	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_1 2	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_1 3	Body Fat Percentage	Percentage	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Outcome_Var_1 4	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Outcome_Var_1 5	Waist Circumference	Inches	3	Numeric	xxx 888 (N/A) 999 (Missing/unknown)
Outcome_Var_1 6	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_1 7	Resting Heart Rate	Beats per minute	3	Numeric	xxx 888 (N/A) 999 (Missing/unknown)
Outcome_Var_1 8	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_1 9	Weight Loss >5%	Whether lost >5% weight	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_2 0	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_2 1	Retention of weight loss	Whether weight loss retained	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_2 2	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_2 3	Height	Inches	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_2 4	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_2 5	Weight	Pounds	4	Numeric	xxxx 9999 (Missing/unknown)
Outcome_Var_2 6	Date of Measurement	Date of most recent measurement	8	String/ Numeric	MMDDYYYY 99999999 (Missing/unknown)