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

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)

Name	Definition	Additional Description	Width	Type	Value/Format
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 then, 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.	1	Numeric	1 (Single enrollment) x (Sequence of enrollment) 9 (Missing/unknown)
Rec_Var_6	Unique participant ID	Participant's unique program 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)

Name	Definition	Additional Description	Width	Type	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 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	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
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 demonstration eligibility category	2	Numeric	15 (Serious Mental Illness) 16 (Behavioral health and physical health conditions) 17 (Serious mental illness, behavioral health and physical health 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/other state govt. department) 2 (Direct-to-participant outreach telephone call by Medicaid managed care organization) 3 (Direct-to-participant outreach telephone call by third party recruitment staff) 4 (Direct-to-participant outreach telephone call by program implementing/outreach organization such as the YMCA) 5 (Direct-to-participant outreach mailing by Medicaid/other state govt. department) 6 (Direct-to-participant outreach mailing by Medicaid managed care organization) 7 (Direct-to-participant outreach mailing by third party recruitment staff) 8 (Direct-to-participant outreach mailing by program implementing/outreach organization such as the YMCA) 9 (Provider outreach at medical home/ primary care practice/specialty care practice/clinic) 10 (Provider outreach at local mental health authority) 11 (Provider outreach at Federally Qualified

Name	Definition	Additional Description	Width	Type	Value/Format
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	String	1 (Intervention Group, Harris Service Area, Personal Navigator and Debit card) 2 (Control Group, Harris Service Area) 3 (Comparison Group – meets WIN eligibility criteria but resides outside of Harris Service area and thus not eligible for the intervention) 9 (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)
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) Decided that this is not relevant for TX.	2	Numeric	xx (N/A)

Name	Definition	Additional Description	Width	Type	Value/Format
Enroll_Var_1 1	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_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)
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	888888888 (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.	2	Numeric	88 (N/A)
Enroll_Var_1 5	Manage Alcohol/ Substance Use	Avoiding/managing alcohol/substance use is a goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 6	General Health Issues	Overall improvement of health status is a goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_1 7	Reduce Sedentary Behavior	Overall increase in exercise, activity is a goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Enroll_Var_18	Improve Nutrition	Improved nutrition is a goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Enroll_Var_19	Improve/Better Manage Pain	Improve/better manage pain is a goal	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)

Table B2. Service Utilization

Name	Definition	Additional Description	Width	Type	Value/Format
Serv_Var_1	Service No. 1 - Number of Units	Intake assessment with navigator	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_2	Service No. 2 - Number of Units	Monthly assessment by navigator	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_3	Service No. 3 - Number of Units	Quarterly assessment by navigator	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_4	Service No. 4 - Number of Units	Annual review by navigator	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_5	Service No. 5- Number of Units	Health promotion strategy: devices that promote wellness	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_6	Service No. 6 - Number of Units	Health promotion strategy: transportation to wellness services	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_7	Service No. 7 - Number of Units	Health promotion strategy: membership to a gym or program to promote wellness	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_8	Service No. 8 - Number of Units	Health promotion strategy: Subscription to wellness magazines, materials	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_9	Service No. 9 - Number of Units	Health promotion strategy: behavioral interventions not covered by Medicaid (relaxation training, meditation training and so on)	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_10	Service No. 10 - Number of Units	Health promotion strategy: individual health education programs	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_11	Service No. 11 - Number of Units	Health promotion strategy: family health and wellness programs	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Serv_Var_12	Service No. 12- Number of Units	Health promotion strategy: nutritional items or health food	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_13	Service No. 13 - Number of Units	Health promotion strategy: other approved by navigator (sessions)	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 - Dollar Value	Purchase: devices that promote wellness	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_2	Incentive No. 1 - Dollar Value	Purchase: transportation to wellness services	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_3	Incentive No. 2 - Dollar Value	Purchase: membership to a gym or program to promote wellness	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_4	Incentive No. 3 - Dollar Value	Purchase: subscription to wellness magazines, materials	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_5	Incentive No. 4 - Dollar Value	Purchase: behavioral Interventions not covered by Medicaid (relaxation training, meditation training and so on)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_6	Incentive No. 5 - Dollar Value	Purchase: individual health education programs	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_7	Incentive No. 6 - Dollar Value	Purchase: Family health and wellness programs	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_8	Incentive No. 7 - Dollar Value	Purchase: nutritional items or health food	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_9	Incentive No. 8 - Dollar Value	Purchase: other approved by navigator	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	Height	Inches	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_2	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_3	Weight	Pounds	4	Numeric	xxxx 9999 (Missing/unknown)
Outcome_Var_4	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_5	BMI	Body Mass Index	2	Numeric	xx 99 (Missing/unknown)
Outcome_Var_6	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_7	Systolic BP	mm Hg	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_8	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_9	Diastolic BP	mm Hg	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_10	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_11	HDL	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_12	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_13	LDL	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_14	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_15	Triglycerides	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_16	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_17	Total Cholesterol	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_18	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_19	Fasting Blood Glucose	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_20	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_21	Random Blood Glucose	mg/dL	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_22	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_23	HbA1c	Percentage	4	Numeric	xxxx 9999 (Missing/unknown)
Outcome_Var_24	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_25	Participant Reported Outcomes: Physical Health	SF12 physical health scale score	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_26	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_27	Participant Reported Outcomes: Mental Health	SF12 mental health scale score	3	Numeric	Xxx 999 (Missing/unknown)
Outcome_Var_28	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_29	Participant Reported Outcomes: Cognitive Functioning	Score on self-reported cognitive functioning	3	Numeric	Xxx 999 (Missing/unknown)
Outcome_Var_30	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_31	Cognitive Functioning	Score on tested cognitive functioning	3	Numeric	Xxx 999 (Missing/unknown)
Outcome_Var_32	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_33	Self-reported Outcomes: Tobacco Quit Status	Whether quit smoking	2	Numeric	1 (Yes) 2 (No) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Outcome_Var_34	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_35	Negative Saliva NicCheck Test	Whether the Saliva NicCheck Test was negative	1	Numeric	1 (Yes) 2 (No) 9 (Missing/unknown)
Outcome_Var_36	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_37	No. of Cigarettes per Day	Number of cigarettes smoked on average per day during the preceding week	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_38	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_39	No. of Quit Attempts	No. of Quit Attempts	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_40	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_41	Potentially Preventable Inpatient Use	Count of occurrence of potentially preventable inpatient use (using 3M software)	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_42	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_43	Potentially Preventable ED use	Count of occurrence of potentially preventable ED use (using 3M software)	3	Numeric	xxx 999 (Missing/unknown)
Outcome_Var_44	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)