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

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, 01312012 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.	1	Numeric	1 (Single enrollment) x (Sequence of enrollment) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
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) 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. Data not available for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)

Name	Definition	Additional Description	Width	Type	Value/Format
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. Data not available for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
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. Data not available for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
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 (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	1 (Smoker) 4 (Smoker – Pregnant) 5 (Smoker - Mother of newborn) 99 (Missing/unknown)
Enroll_Var_2	Outreach	Source of outreach and recruitment into the program (How the member heard about the program)	2	Numeric	1 (Telephone) 2 (Clinic/doctor/nurse) 3 (Letter/post card from HMO) 4 (TV ad) 5 (Friend/ acquaintance) 6 (Read story/announcement) 7 (Other source, e.g., health fair, community event) 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 (WTQL Treatment Group) 2 (WTQL Control Group) 3 (First Breath Treatment Group) 4 (First Breath Control Group)
Enroll_Var_4	Tobacco Cessation	Tobacco cessation is a prevention goal	1	Numeric	1 (Yes)
Enroll_Var_5	Weight Control	Controlling or reducing weight is a prevention goal Decided that the variable is not relevant for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
Enroll_Var_6	Lower Cholesterol	Lowering cholesterol levels is a prevention goal Decided that the variable is not relevant for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)

Name	Definition	Additional Description	Width	Type	Value/Format
Enroll_Var_7	Lower Blood Pressure	Lowering blood pressure is a prevention goal Decided that the variable is not relevant for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
Enroll_Var_8	Diabetes Control	Avoiding/managing diabetes is a prevention goal Decided that the variable is not relevant for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
Enroll_Var_9	Manage Behavioral Health	Controlling and managing behavioral health conditions is a prevention goal Decided that the variable is not relevant for WI. Enter code 8 (N/A)	1	Numeric	8 (N/A)
Enroll_Var_10	Provider Agency	Name of the agencies providing the program services. For e.g., YMCA, xxx clinic Decided that the variable is not relevant for WI. Enter code 8 (N/A)	2	Numeric	88 (N/A)
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_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.	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) may be provided.	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.	2	Numeric	1 (Lost Medicaid eligibility) 2 (Moved to non-target county) 3(Enrolled in an MCO/HMO not participating in the MIPCD program) 4 (Withdrew) 5(Other) 88 (N/A) 99 (Missing/unknown)

Table B2. Service Utilization

Name	Definition	Additional Description	Width	Type	Value/Format
Serv_Var_1	Service No. 1 - Number of Units	No. of WTQL tobacco cessation counseling calls	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_2	Service No. 2 - Number of Units	No. of prenatal tobacco cessation counseling visits	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)
Serv_Var_3	Service No. 3 - Number of Units	No. of post-partum tobacco cessation counseling visits	2	Numeric	xx 88 (N/A) 99 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Serv_Var_4	Service No. 4 - Number of Units	No. of post-partum tobacco cessation counseling calls	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	Take Urine Cotinine test ($40)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_2	Incentive No. 2 - Dollar Value	Pass Urine Cotinine test ($40)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_3	Incentive No. 3 - Dollar Value	WTQL tobacco cessation counseling call ($30)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_4	Incentive No. 4 - Dollar Value	Enroll in First Breath ($40)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_5	Incentive No. 5 - Dollar Value	Prenatal tobacco cessation counseling visit ($25)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_6	Incentive No. 6 - Dollar Value	Postpartum tobacco cessation counseling visit ($25)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_7	Incentive No. 7 - Dollar Value	Postpartum tobacco cessation counseling call ($20)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_8	Incentive No. 8 - Dollar Value	Take CO test($40)	4	Numeric	xxxx 8888 (N/A) 9999 (Missing/unknown)
Incent_Var_9	Incentive No. 9 - Dollar Value	Pass CO test ($40)	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	Negative Urine Cotinine Test	Whether the Urine Cotinine test was negative	1	Numeric	1 (Yes) 2 (No) 3 (N/A) 9 (Missing/unknown)

Name	Definition	Additional Description	Width	Type	Value/Format
Outcome_Var_2	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_3	Negative CO Test	Whether the CO test was negative	1	Numeric	1 (Yes) 2 (No) 3 (N/A) 9 (Missing/unknown)
Outcome_Var_4	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_5	Self-reported Smoking Status	Whether smoke (self-reported)	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (missing/unknown)
Outcome_Var_6	Date of Measurement	Date of most recent measurement	8	String/Numeric	MMDDYYYY 99999999 (Missing/unknown)
Outcome_Var_7	Number of Cigarettes Used per Day at Baseline	Number of cigarettes used per day in last week at baseline	1	Numeric	1 (1-5) 2 (6-10) 3 (11-20) 4 (21-30) 5 (31 or more) 9 (Missing/unknown)
Outcome_Var_8	Immediacy of Smoking When First Wake Up at Baseline	Immediacy of smoking when first wake up at baseline	1	Numeric	1 (Immediately) 2 (Within 5 minutes) 3 (6-30 minutes) 4 (31 minutes - 1 hour) 5 (Over 1 hour) 9 (Missing/unknown)
Outcome_Var_9	Smoking in the Home at Baseline	Smoking in the home at baseline	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)
Outcome_Var_10	Prior Quit Attempts at Baseline	Prior quit attempts (number of quit attempts in the past year) at baseline	1	Numeric	1 (0) 2 (1) 3 (2-5) 4 (6+) 9 (Missing/unknown)
Outcome_Var_11	Use of Cessation Aids at Baseline	Whether used cessation aids such as NRT, web-sites, counseling etc. at baseline	1	Numeric	1 (Yes) 2 (No) 8 (N/A) 9 (Missing/unknown)