

ANALYTIC
PUBLIC USE FILE
DATA USER'S GUIDE

Cohort III Baseline and Follow Up 2000-2002

MEDICARE HEALTH OUTCOMES SURVEY



CENTERS
FOR MEDICARE
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HEALTH SERVICES ADVISORY GROUP

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OVERVIEW OF THE PUBLIC USE FILE

This section provides an overview of the Medicare Health Outcomes Survey (HOS) *Cohort III Analytic* Public Use File (C3APUF.TXT), including the general characteristics of the data file and a description of the fields contained within it. This file contains merged *Cohort III Baseline* and *Cohort III Follow Up* data. The *Medicare Health Outcomes Survey Description* section (B) in this Data User's Guide provides a general description of the HOS background and methodology, including the sampling methodology, data collection, and survey components. For a more detailed discussion of these items, please refer to the *HEDIS*® 2000, *Volume 6: Medicare Health Outcomes Survey Manual*¹ (referred to as the 2000 HOS Manual) and the *HEDIS*® 2002, *Volume 6: Specifications for the Medicare Health Outcomes Survey*² (referred to as the 2002 HOS Manual).

GENERAL CHARACTERISTICS OF THE DATA

The 2000 *Cohort III Baseline* Medicare HOS included a random sample of 298,883 beneficiaries, including both the aged and disabled, from 275 managed care plans. Of the 298,883 beneficiaries sampled, 66.4% (198,451) completed the baseline survey. During the two years between the 2000 *Cohort III Baseline* survey and the 2002 *Cohort III Follow Up* survey, a number of Medicare + Choice Organizations (M+COs) discontinued offering managed care to beneficiaries, or consolidated with other health plans. As a result of these changes, 146 reporting units (M+COs) and 140,335 beneficiaries remained in the HOS at the time of follow up. This group of 140,335 beneficiaries comprised the *Cohort III Public Use File (PUF) Analytic* sample.³

Of the 140,335 beneficiaries in the *Cohort III PUF Analytic* sample, 9,976 died between baseline and the two-year follow up. Additionally, another 43,403 beneficiaries voluntarily disenrolled from their M+COs during the same two-year period. Of the 140,335 in the *Cohort III PUF Analytic* sample, 69,434 remained eligible at the time of follow up. Beneficiaries were eligible for follow up if they were still alive, enrolled in their original M+CO, and had a calculatable SF-36® Physical Component Summary (PCS) score and Mental Component Summary (MCS) score at baseline.⁴

Of the 86,956 individuals sampled at the time of follow up, 79.8% (69,434) completed the follow up survey. For the purposes of this data file, a completed survey at follow up was defined as a

¹ National Committee for Quality Assurance. *HEDIS® 2000, Volume 6: Medicare Health Outcomes Survey Manual.* Washington DC: NCQA Publication, 2000.

² National Committee for Quality Assurance. *HEDIS® 2002, Volume 6: Specifications for the Medicare Heath Outcomes Survey.* Washington DC: NCQA Publication, 2002.

³ Please note, the *Cohort III PUF Analytic* sample differs from the *Cohort III Performance Measurement Analytic* sample, which is used to derive plan-level performance measurement results. For additional information, please contact the Medicare HOS Information and Technical Support Line (1-888-880-0077) or e-mail address (hos@azqio.sdps.org).

⁴ SF-36[®] is a registered trademark of the Medical Outcomes Trust.

survey with at least one question item completed and a survey disposition code equal to M10, M11, M31, T10, T11 or T31 (please refer to page D19). Of the 17,522 beneficiaries who did not complete a follow up survey, 1,545 were determined to have died after the follow up sample was selected but prior to completing the survey. Additionally, 727 beneficiaries were determined to be invalid members of the follow up survey sample.⁵ The remaining 15,250 beneficiaries who did not complete the follow up survey were classified as nonrespondents.

The C3APUF.TXT data file is a fixed-width ASCII text file (31.1 megabytes in size). There are a total of 198 fields and 140,335 beneficiary records in the C3APUF.TXT data file. Each row in the C3APUF.TXT data file represents an individual's HOS survey responses, also referred to as a beneficiary record.

This Public Use File has been modified from the original merged *Cohort III Baseline* and *Cohort III Follow Up* data file in order to preserve the confidentiality at the beneficiary and plan levels. Many demographic and plan-level fields have been omitted from this file or have been collapsed into fewer categories [see *Limitations of the Data* section (C)]. Sensitive beneficiary identifying fields [such as a social security number, health insurance claim (HIC) number, beneficiary's name, etc.] have been removed and replaced with a unique nine digit randomly assigned number.

The 198 fields in the C3APUF.TXT data file are organized into six different groups:

- identification and baseline demographics
- baseline survey question responses
- ♦ baseline survey administration
- follow up survey question responses
- follow up survey administration
- ♦ additional fields

DESCRIPTION OF FIELDS IN THE DATA FILE

The following content provides instructions for interpreting the specific fields contained within the data file.

Identification and Baseline Demographics

♦ *Unique Identification Number*, Field: 1

This is a unique nine digit number that is randomly assigned for each beneficiary record. Positions 1 through 3 identify the analytic cohort of the public use file. Positions 4 through 9 contain a random number. For the baseline survey administration, beneficiaries who were

⁵ Invalid members at *follow up* meet one of the following criteria: not enrolled in the M+CO; have an incorrect address and phone number; or have a language barrier.

measured in multiple baseline cohorts retained the initially assigned blinded identification number in all subsequent surveys. However, due to confidentiality issues, the identification number assigned to a beneficiary in the analytic cohort public use file does **not** correspond to the identification number assigned in either the baseline or follow up cohort public use files. The data file is sorted by this unique identification number.

Example: A03000021

Source: Field created by Health Services Advisory Group during production of the

C3APUF.TXT data file

♦ *Age Group*, Field: 2

Age group of the beneficiary at the time of the baseline survey

Source: CMS Medicare Enrollment Database

♦ *Race*, Field: 3

Self-reported race of the beneficiary *Source*: Q49 from the baseline survey

♦ *Gender*, Field: 4

Self-reported gender of the beneficiary *Source*: Q47 from the baseline survey

♦ *Marital Status*, Field: 5

Self-reported marital status of the beneficiary

Source: Q50 from the baseline survey

♦ *Education Level*, Field: 6

Self-reported educational attainment of the beneficiary

Source: Q51 from the baseline survey

Baseline Survey Question Responses

♦ **SF-36**[®] *Questions*, Fields: 7 through 42

These fields represent the SF-36[®] survey questions, which can be found on pages 37 through 39 of the 2000 HOS Manual. SF-36[®] survey questions include questions Q1 through Q11d in the HOS Questionnaire. Please refer to the Medicare Health Outcomes Survey Description section (B) in this Data User's Guide for a more detailed description of the SF-36[®].

♦ Additional Physical, Mental, and General Activity Questions, Fields: 43 through 96 These fields comprise the balance of the physical, mental, and general activity survey questions found on pages 40 through 47 of the 2000 HOS Manual. These fields include most of the remaining questions Q12 through Q57 in the HOS Questionnaire. Selected questions contained in the survey are not available in this PUF data file due to confidentiality issues. Please refer to the Medicare Health Outcomes Survey Description section (B) in this Data User's Guide for a more detailed outline of these questions.

Baseline Survey Administration

♦ Baseline Survey Disposition, Field: 97

Identifies completion status and mode by which the survey was completed

Source: NCQA-certified HOS Vendor

♦ Baseline Round Survey Returned, Field: 98

Stage in which survey was returned to a vendor

Source: NCOA-certified HOS Vendor

♦ Percent of Baseline Survey Completed, Field: 99

Percentage of the baseline survey completed by the respondent

Source: Field created by Health Services Advisory Group during the data cleaning and processing of the Cohort III Baseline data set

♦ Baseline Survey Language, Field: 100

Language in which the baseline survey was completed. This field was not in the Cohort I

Baseline survey administration protocol Source: NCQA-certified HOS Vendor

Follow Up Survey Question Responses

♦ **SF-36[®]** *Questions*, Fields: 101 through 136

These fields represent the SF-36[®] survey questions, which can be found on pages 39 through 41 of the 2002 HOS Manual. SF-36[®] survey questions include questions Q1 through Q11d in the HOS Questionnaire. Please refer to the Medicare Health Outcomes Survey Description section (B) in this Data User's Guide for a more detailed description of the SF-36[®].

• Additional Physical, Mental, and General Activity Ouestions, Fields: 137 through 190

These fields comprise the balance of the physical, mental, and general activity survey questions found on pages 42 through 50 of the 2002 HOS Manual. These fields include most of the remaining questions Q12 through Q57 in the HOS Questionnaire. Selected questions contained in the survey are not available in this PUF data file due to confidentiality issues. Please refer to the *Medicare Health Outcomes Survey Description* section (B) in this Data User's Guide for a more detailed outline of these questions.

Follow Up Survey Administration

♦ Follow Up Survey Disposition, Field: 191

Identifies completion status and mode by which the survey was completed

Source: NCQA-certified HOS Vendor

♦ Follow Up Round Survey Returned, Field: 192

Stage in which survey was returned to a vendor

Source: NCQA-certified HOS Vendor

♦ Percent of Follow Up Survey Completed, Field: 193

Percentage of the follow up survey completed by the respondent

Source: Field created by Health Services Advisory Group during the data cleaning and processing of the Cohort III Follow Up data set

♦ Follow Up Survey Language, Field: 194

Language in which the follow up survey was completed

Source: NCQA-certified HOS Vendor

Additional Fields

♦ *Cohort Identifier*, Field: 195

Cohort in which the HOS surveys contained in this data file were submitted

SPECIAL NOTE: This value for each record will equal "A03"

Source: Field created by Health Services Advisory Group during production of the

C3APUF.TXT data file

◆ *CMS Plan Region*, Field: 196

CMS Regional office to which the plan belongs

Source: May 2002 CMS Monthly Report of Managed Care Health Plans

♦ *Follow Up Sample Indicator*, Field: 197

This field indicates if the beneficiary was included in the follow up sample.

Source: Field created by Health Services Advisory Group during the production of the

C3APUF.TXT data file

♦ *Analytic Sample Indicator*, Field: 198

This field indicates the status of the beneficiary in the analytic file. Categories include the following: dead, disenrolled, invalid as determined at the time of follow up, respondent to the follow up survey, and non-respondent to the follow up survey.

Source: Field created by Health Services Advisory Group during the production of the C3APUF.TXT data file

Further details of the contents of the data file are available in the *Field Index with Field Descriptions* section (D) of this Data User's Guide.

TECHNICAL ASSISTANCE

The Medicare HOS Information and Technical Support Telephone Line (1-888-880-0077), as well as the HOS e-mail address (hos@azqio.sdps.org), are available to provide technical assistance. Additionally, the Medicare HOS website provides general information on the project and responses to Frequently Asked Questions (http://www.cms.hhs.gov/surveys/hos).

MEDICARE HEALTH OUTCOMES SURVEY DESCRIPTION

This section provides a description of the HOS background and methodology, including the sampling methodology, data collection, and survey components.

BACKGROUND

The Centers for Medicare & Medicaid Services (CMS) is committed to monitoring the quality of care provided by M+COs. To better evaluate care, CMS, in collaboration with the National Committee for Quality Assurance (NCQA), launched the first Medicare managed care health outcomes measure in the Health Plan Employer Data and Information Set (HEDIS®) in 1998. This measure was initially titled the Health of Seniors, and was renamed the Medicare Health Outcomes Survey (HOS) during the first year of implementation. This name change was intended to reflect the inclusion of Medicare recipients who are disabled and not seniors (not age 65 or older) in the sampling methodology. The HOS design is based on a randomly selected sample of individuals from each participating M+CO and measures physical and mental health over a two-year period.

The HOS measure is an assessment of a health plan's ability to maintain or improve the physical and mental health functioning of beneficiaries enrolled in Medicare M+COs over a two-year period of time. The functional status of the elderly is known to decline over such a period. The HOS results were computed using a set of case mix/risk adjustment factors, adjusting for expected differences. The differences between the baseline and the two-year follow up physical and mental health scores are presented in terms of the percentages of beneficiaries who were better, the same, or worse than expected. The resulting aggregation of these scores across beneficiaries within a plan yields the HOS plan level Performance Measurement results. These results are specific to each individual plan. The HOS results are an important part of CMS' quality improvement activities, since current law authorizes Quality Improvement Organizations (QIOs) to review the quality of care provided to Medicare beneficiaries. The goal of the HOS program is to gather valid and reliable health status data in Medicare managed care for use in quality improvement activities, public reporting, plan accountability, and improving health outcomes.

The HOS measure was developed under the guidance of a Technical Expert Panel (TEP) comprised of individuals with specific expertise in the health care industry and outcomes measurement. The TEP continues to provide input for developing the science of the HOS measure. CMS has contracted with NCQA to support the standardized administration of the HOS survey including selecting, training, and certifying independent survey vendors with whom the plans contract to administer the survey.

⁶ HEDIS[®] is a registered trademark of the National Committee for Quality Assurance.

⁷ National Committee for Quality Assurance. *HEDIS® 2002, Volume 6: Specifications for the Medicare Health Outcomes Survey.* Washington DC: NCQA Publication, 2002.

SAMPLING METHODOLOGY

Beginning in 1998, and continuing annually, an HOS *Baseline Cohort* has been created from a random sample of 1,000 Medicare members from each applicable Medicare contract market area. CMS selected the random samples for each baseline cohort. The year 2000 marked the first year in which an HOS *Follow Up Cohort* of data was collected on beneficiaries sampled two years previously.

In 2002, the *Cohort III Follow Up* sample was limited to those beneficiaries, including both the aged and disabled, who had a calculatable PCS and MCS score at baseline, were still alive, and were enrolled in their original M+CO. For additional information on the follow up sample inclusion criteria, please refer to the *2002 HOS Manual*.

In 1998, CMS required Medicare Managed Care Organizations (MCOs) with contracts in effect on or before January 1, 1997 to participate in the HOS. Some Medicare MCOs were required to report by market areas, defined as geographic areas containing more than 5,000 members that are generally served by distinctly separate networks of service providers (referred to as "contract markets"). In 1999, CMS required all M+COs and section 1876 risk and cost health plans with contracts in place on or before January 1, 1998 to participate in the HOS. In addition, selected Program of All-inclusive Care for the Elderly (PACE) plans, Evercare plans, and demonstration risk plans participated in the second year administration. A Spanish language version of the survey was also incorporated into the survey protocol.

In 2000, CMS required all M+COs, continuing cost contractors, PACE plans, Social HMOs, Medicare Choices Demonstration plans, and Department of Defense (DOD) Subvention Demonstration plans with contracts in place on or before January 1, 1999 to participate in the *Cohort III Baseline* survey. All plans with contracts in place on or before January 1, 1997 that participated in the *Cohort I Baseline* survey in 1998 were required to participate in the *Cohort I Follow Up* survey in 2000. In 2001, CMS required all M+COs, continuing cost contractors, PACE plans, Social HMOs, and Medicare Choices Demonstration plans with contracts in place on or before January 1, 2000 to participate in the *Cohort IV Baseline* survey. All plans with contracts in place on or before January 1, 1998 that participated in the *Cohort II Baseline* survey in 1999 were required to participate in the *Cohort II Follow Up* survey in 2001.

In 2002, CMS required all M+COs, continuing cost contractors, PACE plans, Social HMOs, and Medicare Choices Demonstration plans with contracts in place on or before January 1, 2001 to participate in the *Cohort V Baseline* survey. In addition, all plans with contracts in place on or before January 1, 1999 that participated in the *Cohort III Baseline* survey in 2000 were required to participate in the *Cohort III Follow Up* survey in 2002.

DATA COLLECTION

M+COs must contract with an NCQA-certified HOS vendor to administer the survey. Vendors followed the protocol contained in the 2002 HOS Manual for Cohort III Follow Up. The standard HEDIS® protocol for administering the HOS employs a combination of mail and

telephone survey administration. The mail component of the survey uses a standardized questionnaire, survey letters, and prenotification and reminder/thank you postcards. Vendors review each returned mail questionnaire for legibility and completeness. If a beneficiary's responses are ambiguous, then a coding specialist employs standardized decision rules. Questionnaires can be entered into a computer manually or optically scanned into a computer readable file. For manually entered data, two separate data entry specialists must key enter responses from each questionnaire.

In those instances when beneficiaries fail to respond after the second mail survey, vendors attempt telephone follow up (with a maximum of six attempts). Vendors also perform telephone follow up for members who return an incomplete mail survey in order to obtain responses to missing questions. Vendors use a standardized version of a Computer Assisted Telephone Interviewing (CATI) script to collect telephone interview data for the survey. To ensure the standardization of the data collection process, vendors are prohibited from augmenting or adjusting the HOS protocol or instrument in any manner.

Periodically during the survey administration and again when data collection is completed, vendors run an edit program against each record in the data file to identify invalid data elements. At the conclusion of the data collection period, vendors perform preliminary data cleaning and editing and follow up with survey respondents, as necessary. For a more detailed discussion on data sampling, collection, and submission, please refer to the *2002 HOS Manual*.

SURVEY COMPONENTS

The HOS instrument consists of the SF-36® Health Survey and additional questions, including those used for case mix/risk adjustment purposes.

SF-36® Health Survey

The SF-36[®] Health Survey is a multi-purpose, short-form health survey with 36 questions. It yields an eight scale profile of scores as well as physical and mental health summary scores. It is a generic measure, as opposed to one that targets a specific age, disease, or treatment group. As documented in more than 2,500 publications, the SF-36[®] has proven useful in both general and specific populations, comparing the relative burden of diseases, differentiating the health benefits produced by a wide range of different treatments, and screening individual patients. The most complete information about the history and development of the SF-36[®], its psychometric evaluation, studies of reliability and validity, and normative data are available in two user's manuals. ^{8, 9}

⁸ Ware JE, Snow KK, Kosinski M, Gandek B. *SF-36*[®] *Health Survey Manual and Interpretation Guide*. Boston, MA: The Health Institute, 1993.

⁹ Ware JE, Kosinski M. SF-36[®] Physical and Mental Health Summary Scales: A Manual for Users of Version 1, Second Edition. Lincoln, RI: QualityMetric, Incorporated, 2001.

SF-36® survey questions are comprised of the following:

- General health question (Q1)
- Health transition question (Q2)
- Vigorous activities question (Q3a)
- Moderate activities question (Q3b)
- Lifting or carrying groceries question (Q3c)
- Climbing several flights of stairs question (Q3d)
- Climbing one flight of stairs question (Q3e)
- Bending, kneeling, or stooping question (Q3f)
- Walking more than a mile question (Q3g)
- Walking several blocks question (Q3h)
- Walking one block question (Q3i)
- Bathing or dressing question (Q3j)
- Physical health limiting time spent on activities question (Q4a)
- Physical health limiting amount accomplished question (Q4b)
- Physical health limiting the kind of activities question (Q4c)
- Physical health causing difficulty performing activities question (Q4d)
- Emotional problems limiting time spent on activities question (Q5a)
- Emotional problems limiting amount accomplished question (O5b)
- Emotional problems limiting carefulness (Q5c)
- Extent health interfering with social activities question (Q6)
- Bodily pain question (Q7)
- Pain interfering with work question (Q8)
- Full of pep question (Q9a)
- Nervous question (Q9b)
- Down in the dumps question (O9c)
- Calm and peaceful question (Q9d)
- Lots of energy question (Q9e)
- Downhearted and blue question (Q9f)
- Feeling worn out question (Q9g)
- Happy question (Q9h)
- Feeling tired question (O9i)
- Amount of time health interfering with social activities question (Q10)
- Sick easier question (Q11a)
- As healthy question (Q11b)
- Future health question (Q11c)
- Excellent health question (Q11d)

Additional Physical, Mental, and General Activity Questions

Along with the SF-36[®], the HOS includes additional items that provide essential information for adjusting observed outcomes to account for risk that may be outside of a plan's control. Such fields include:

- ♦ *Impairment of Activities of Daily Living:*
 - bathing (Q12a)
 - dressing (Q12b)
 - eating (Q12c)
 - getting in or out of chairs (Q12d)
 - walking (Q12e)
 - using the toilet (Q12f)
- ♦ Chest pain/pressure during exercise (Q13a)
- ♦ Chest pain/pressure when resting (Q13b)
- ♦ Shortness of breath when lying flat (Q14a)
- ♦ Shortness of breath when sitting/resting (Q14b)
- Shortness of breath when walking less than one block (Q14c)
- ♦ Shortness of breath when climbing one flight of stairs (Q14d)
- ♦ Numbness or loss of feeling in feet (Q15a)
- ♦ Ankles or legs that swell during the day (Q15b)
- ♦ *Tingling or burning sensation in feet, especially at night (Q15c)*
- ♦ *Decreased ability to feel hot or cold with feet (Q15d)*
- ♦ *Sores or wounds on feet that do not heal (Q15e)*
- ♦ Paralysis or weakness (Q16a)
- ♦ Lost ability to talk (Q16b)
- ♦ *Ability to read newspaper print (Q17)*
- ♦ *Ability to hear (Q18)*
- ♦ Acid indigestion or heartburn (Q19)
- ♦ Difficulty controlling urination (Q20)
- ♦ Chronic Medical Conditions:
 - hypertension or high blood pressure (Q21)
 - angina pectoris or coronary artery disease (Q22)
 - congestive heart failure (Q23)
 - myocardial infarction or heart attack (Q24)
 - other heart conditions (Q25)
 - stroke (Q26)
 - emphysema, asthma, or Chronic Obstructive Pulmonary Disease (Q27)
 - Crohn's disease, ulcerative colitis, or inflammatory bowel disease (Q28)
 - arthritis of the hip or knee (Q29)
 - arthritis of the hand or wrist (Q30)
 - sciatica (Q31)
 - diabetes, high blood sugar, or sugar in the urine (Q32)
 - any cancer (other than skin cancer) (Q33)
- ♦ *Measure of arthritis pain (Q34)*
- ♦ Cancer Treatment (Q35):
 - colon or rectal cancer
 - lung cancer
 - breast cancer
 - prostate cancer
- ♦ *Interference of low back pain with usual daily activities (Q36)*

- ◆ Experiencing pain, numbness, or tingling in legs (Q37)
- ♦ Depression screening questions (Q38 through Q40)
- ♦ *Health compared to one year ago (Q41)*
- ♦ *Smoking questions (Q42 through Q45)*
- ♦ Demographics
 - Year of birth (Q46 not available in C3APUF.TXT)
 - Gender (Q47)
 - Hispanic or Spanish family background (Q48 not available in C3APUF.TXT)
 - Race (Q49)
 - Marital status (Q50)
 - Education (Q51)
 - Residential status questions (Q52 through Q54; Q52 is not available in C3APUF.TXT)
 - Person completing the survey (Q55)
 - Name of person completing the survey (Q56 not available in C3APUF.TXT)
 - Income (Q57 not available in C3APUF.TXT)

SPECIAL NOTES

- ◆ Selected questions that appear in the 2000 and 2002 HOS Manuals are not available in the C3APUF.TXT data file. These questions were excluded due to confidentiality issues [see Limitations of the Data section (C)].
- ◆ The HOS Questionnaire contains multiple skip patterns. Caution should be exercised when examining selected questions that involve skip pattern responses. Please refer to the *Field Index with Field Descriptions* section (D) for additional information.
- When the sampled beneficiary was unable to complete the survey, the HOS protocol allows for the utilization of a proxy respondent. Surveys completed either by the respondent themselves or by proxy respondents are included in this data file.
- ◆ Minor modifications to the HOS Questionnaire occurred between the administration of the 1998 Cohort I Baseline and the 1999 Cohort II Baseline surveys. One question was removed from the instrument [Visiting a doctor question (Q45 in the Cohort I Baseline survey)]. The reference period of the smoking cessation questions was reduced from 12 to 6 months [Quit smoking question (Q44) and Smoking advice question (Q45 in the Cohort II Baseline survey)]. Please refer to the Field Index with Field Descriptions section (D) for additional information. Caution should be exercised when examining the data across multiple cohorts.

LIMITATIONS OF THE DATA

This section illustrates the limitations of the data file, including issues relative to the collapsing of selected field categories and the identification of Medicare beneficiaries.

COLLAPSING THE CATEGORIES OF SELECTED FIELDS

To ensure confidentiality of beneficiaries and plans, many demographic and plan-related fields were omitted from this file or collapsed into fewer categories.

Collapsed categories include:

| Field | Scale in C3APUF.TXT ¹⁰ | Scale in HOS Questionnaire ¹¹ |
|--|---|--|
| Baseline Race of Beneficiary | 1 = White 2 = Black or African American 3 = Other | 1 = American Indian or Alaskan Native 2 = Asian or Pacific Islander 3 = Black or African American 4 = White 5 = Another race or multiracial |
| Baseline Marital Status of Beneficiary | 1 = Married 2 = Non-Married | 1 = Married 2 = Divorced 3 = Separated 4 = Widowed 5 = Never married |
| Baseline Education Level of Beneficiary | 1 = Less than a high school education or GED 2 = High school education or GED 3 = Greater than a high school education or GED | 1 = 8 th grade or less 2 = Some high school, but did not graduate 3 = High school graduate or GED 4 = Some college or 2 year degree 5 = 4 year college graduate 6 = More than a 4 year college degree |

NOTE: With the exception of gender, age group, and the collapsed fields above, all other demographic and plan-related fields appearing in the *2000* or *2002 HOS Manual* have been excluded for confidentiality reasons.

CHANGES IN IDENTIFICATION OF SURVEYED BENEFICIARIES

The HOS uniquely identifies beneficiaries by using the beneficiary's health insurance claim (HIC) number. However, a beneficiary's HIC number can change through special circumstances. Changes in a beneficiary's HIC number between baseline and follow up sampling are accounted for in the sampling protocol. However, changes in a beneficiary's HIC number between baseline cohorts are not accommodated in the sampling protocol.

¹⁰ Scale as it is represented in C3APUF.TXT.

¹¹ Scale as it is represented in the 2000 or 2002 HOS Manual.

FIELD INDEX WITH FIELD DESCRIPTIONS

This section provides detailed information regarding the structure of the C3APUF.TXT data file, as well as the fields included in it. The tables below include the order, position, valid values and any additional information for each field in the data file. Fields are presented in the same order as they exist in the data.

The C3APUF.TXT data file:

- is a fixed-width ASCII text file of 31.1 megabytes
- ♦ consists of merged *Cohort III Baseline* HOS surveys completed in 2000 and *Cohort III Follow Up* HOS surveys completed in 2002
- contains a total of 198 fields and 140,335 beneficiary records
- contains a blank space for all missing value.
- contains numeric values with the exception of field numbers 1, 97, 98, 191, 192, and 195
- is sorted by the unique identification number

IDENTIFICATION AND BASELINE DEMOGRAPHICS

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|---|
| 1 | Unique Identification Number | 1 – 9 | A unique nine digit randomly assigned number for each beneficiary (SPECIAL NOTE: this field contains a character string): Example: A03000021 |
| 2 | Baseline Age Group of Beneficiary | 10 | Age obtained from the CMS Medicare Enrollment Database at the time of baseline sampling. Age is collapsed into three age groups: 1 = Less than 65 2 = 65 to 74 3 = Greater than 74 |
| 3 | Baseline Race of Beneficiary | 11 | Beneficiary's response to Q49 from the <i>Cohort III</i> Baseline survey (SPECIAL NOTE: category collapsed to ensure confidentiality of beneficiaries): How would you describe your race? 1 = White 2 = Black or African American 3 = Other |
| 4 | Baseline Gender of Beneficiary | 12 | Beneficiary's response to Q47 from the <i>Cohort III</i> Baseline survey: Are you male or female? 1 = Male 2 = Female |
| 5 | Baseline Marital Status of Beneficiary | 13 | Beneficiary's response to Q50 from the <i>Cohort III</i> Baseline survey (SPECIAL NOTE: category collapsed to ensure confidentiality of beneficiaries): What is your current marital status? 1 = Married 2 = Non-Married |
| 6 | Baseline Education Level of Beneficiary | 14 | Beneficiary's response to Q51 from the <i>Cohort III</i> Baseline survey (SPECIAL NOTE: category collapsed to ensure confidentiality of beneficiaries): What is the highest grade or level of school that you have completed? 1 = Less than a high school education or GED 2 = High school education or GED 3 = Greater than a high school education or GED |

BASELINE SURVEY QUESTION RESPONSES

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 7 | General Health Question (Q1) | 15 | Beneficiary's response to Q1 from the Cohort III Baseline survey: In general, would you say your health is: 1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor |
| 8 | Health Transition Question (Q2) | 16 | Beneficiary's response to Q2 from the Cohort III Baseline survey: Compared to one year ago, how would you rate your health in general now? 1 = Much better now than one year ago 2 = Somewhat better now than one year ago 3 = About the same as one year ago 4 = Somewhat worse now than one year ago 5 = Much worse now than one year ago |
| 9 | Vigorous Activities Question (Q3a) | 17 | Beneficiary's response to Q3a from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Vigorous activities 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 10 | Moderate Activities Question (Q3b) | 18 | Beneficiary's response to Q3b from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Moderate activities 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 11 | Lifting or Carrying Groceries Question (Q3c) | 19 | Beneficiary's response to Q3c from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Lifting or Carrying Groceries 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 12 | Climbing Several Flights of Stairs Question (Q3d) | 20 | Beneficiary's response to Q3d from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Climbing several flights of stairs 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
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| 13 | Climbing One Flight of Stairs Question (Q3e) | 21 | Beneficiary's response to Q3e from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Climbing one flight of stairs 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 14 | Bending, Kneeling, or Stooping Question (Q3f) | 22 | Beneficiary's response to Q3f from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Bending, kneeling, or stooping 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 15 | Walking More than a Mile Question (Q3g) | 23 | Beneficiary's response to Q3g from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Walking more than a mile 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 16 | Walking Several Blocks Question (Q3h) | 24 | Beneficiary's response to Q3h from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Walking several blocks 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 17 | Walking One Block Question (Q3i) | 25 | Beneficiary's response to Q3i from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Walking one block 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 18 | Bathing or Dressing Question (Q3j) | 26 | Beneficiary's response to Q3j from the Cohort III Baseline survey: Does your health limit you in these activities? If so, how much? Bathing or dressing yourself 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|---|
| 19 | Physical Health Limiting Time Spent on Activities Question (Q4a) | 27 | Beneficiary's response to Q4a from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Cut down on the amount of time you spent on work or other activities 1 = Yes 2 = No |
| 20 | Physical Health Limiting Amount Accomplished Question (Q4b) | 28 | Beneficiary's response to Q4b from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Accomplished less than you would like 1 = Yes 2 = No |
| 21 | Physical Health Limiting the Kind of Activities Question (Q4c) | 29 | Beneficiary's response to Q4c from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Were limited in the kind of work or other activities 1 = Yes 2 = No |
| 22 | Physical Health Causing Difficulty Performing Activities Question (Q4d) | 30 | Beneficiary's response to Q4d from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Had difficulty performing the work or other activities 1 = Yes 2 = No |
| 23 | Emotional Problems Limiting Time Spent on Activities Question (Q5a) | 31 | Beneficiary's response to Q5a from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Cut down on the amount of time you spent on work or other activities 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 24 | Emotional Problems Limiting Amount Accomplished Question (Q5b) | 32 | Beneficiary's response to Q5b from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Accomplished less than you would like 1 = Yes 2 = No |
| 25 | Emotional Problems Limiting Carefulness Question (Q5c) | 33 | Beneficiary's response to Q5c from the Cohort III Baseline survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Didn't do work or other activities as carefully as usual 1 = Yes 2 = No |
| 26 | Extent Health Interfering with Social Activities Question (Q6) | 34 | Beneficiary's response to Q6 from the Cohort III Baseline survey: During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities? 1 = Not at all 2 = Slightly 3 = Moderately 4 = Quite a bit 5 = Extremely |
| 27 | Bodily Pain Question (Q7) | 35 | Beneficiary's response to Q7 from the Cohort III Baseline survey: How much bodily pain have you had during the past 4 weeks? 1 = None 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe 6 = Very severe |
| 28 | Pain Interfering with Work Question (Q8) | 36 | Beneficiary's response to Q8 from the Cohort III Baseline survey: During the past 4 weeks, how much did pain interfere with your normal work? 1 = Not at all 2 = A little bit 3 = Moderately 4 = Quite a bit 5 = Extremely |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|----------------------------------|-------------------|--|
| 29 | Full of Pep Question (Q9a) | 37 | Beneficiary's response to Q9a from the Cohort III Baseline survey: How much of the time during the past 4 weeks Did you feel full of pep? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 30 | Nervous Question (Q9b) | 38 | Beneficiary's response to Q9b from the Cohort III Baseline survey: How much of the time during the past 4 weeks Have you been a very nervous person? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 31 | Down in the Dumps Question (Q9c) | 39 | Beneficiary's response to Q9c from the Cohort III Baseline survey: How much of the time during the past 4 weeks Have you felt so down in the dumps that nothing could cheer you up? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 32 | Calm and Peaceful Question (Q9d) | 40 | Beneficiary's response to Q9d from the Cohort III Baseline survey: How much of the time during the past 4 weeks Have you felt calm and peaceful? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 33 | Lots of Energy Question (Q9e) | 41 | Beneficiary's response to Q9e from the Cohort III Baseline survey: How much of the time during the past 4 weeks Did you have a lot of energy? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|--|
| 34 | Downhearted and Blue Question (Q9f) | 42 | Beneficiary's response to Q9f from the Cohort III Baseline survey: How much of the time during the past 4 weeks Have you felt downhearted and blue? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 35 | Feeling Worn Out Question (Q9g) | 43 | Beneficiary's response to Q9g from the Cohort III Baseline survey: How much of the time during the past 4 weeks Did you feel worn out? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 36 | Happy Question (Q9h) | 44 | Beneficiary's response to Q9h from the Cohort III Baseline survey: How much of the time during the past 4 weeks Have you been a happy person? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 37 | Feeling Tired Question (Q9i) | 45 | Beneficiary's response to Q9i from the Cohort III Baseline survey: How much of the time during the past 4 weeks Did you feel tired? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 38 | Amount of Time Health Interfering with Social Activities Question (Q10) | 46 | Beneficiary's response to Q10 from the Cohort III Baseline survey: During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|----------------------------------|-------------------|---|
| 39 | Sick Easier Question (Q11a) | 47 | Beneficiary's response to Q11a from the Cohort III Baseline survey: How true or false is each of the following statements for you? I seem to get sick a little easier than other people 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 40 | As Healthy Question (Q11b) | 48 | Beneficiary's response to Q11b from the Cohort III Baseline survey: How true or false is each of the following statements for you? I am as healthy as anybody I know 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 41 | Future Health Question (Q11c) | 49 | Beneficiary's response to Q11c from the Cohort III Baseline survey: How true or false is each of the following statements for you? I expect my health to get worse 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 42 | Excellent Health Question (Q11d) | 50 | Beneficiary's response to Q11d from the Cohort III Baseline survey: How true or false is each of the following statements for you? My health is excellent 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 43 | Bathing Question (Q12a) | 51 | Beneficiary's response to Q12a from the Cohort III Baseline survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Bathing 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 44 | Dressing Question (Q12b) | 52 | Beneficiary's response to Q12b from the Cohort III Baseline survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Dressing 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 45 | Eating Question (Q12c) | 53 | Beneficiary's response to Q12c from the Cohort III Baseline survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Eating 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 46 | Getting In or Out of Chairs Question (Q12d) | 54 | Beneficiary's response to Q12d from the <i>Cohort III Baseline</i> survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Getting in or out of chairs 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 47 | Walking Question (Q12e) | 55 | Beneficiary's response to Q12e from the Cohort III Baseline survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Walking 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 48 | Using the Toilet Question (Q12f) | 56 | Beneficiary's response to Q12f from the Cohort III Baseline survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Using the toilet 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 49 | Chest Pain or Pressure During Exertion Question (Q13a) | 57 | Beneficiary's response to Q13a from the Cohort III Baseline survey: During the past 4 weeks, how often have you had any of the following problems? Chest pain or pressure when you exercise 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 50 | Chest Pain or Pressure When Resting Question (Q13b) | 58 | Beneficiary's response to Q13b from the Cohort III Baseline survey: During the past 4 weeks, how often have you had any of the following problems? Chest pain or pressure when resting 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 51 | Shortness of Breath When Lying Flat Question (Q14a) | 59 | Beneficiary's response to Q14a from the Cohort III Baseline survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When lying down flat 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 52 | Shortness of Breath When Sitting or Resting Question (Q14b) | 60 | Beneficiary's response to Q14b from the Cohort III Baseline survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When sitting or resting 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 53 | Shortness of Breath When Walking Less than One Block Question (Q14c) | 61 | Beneficiary's response to Q14c from the Cohort III Baseline survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When walking less than one block 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 54 | Shortness of Breath When Climbing One Flight of Stairs Question (Q14d) | 62 | Beneficiary's response to Q14d from the Cohort III Baseline survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When climbing one flight of stairs 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 55 | Numbness in Feet Question (Q15a) | 63 | Beneficiary's response to Q15a from the Cohort III Baseline survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Numbness or loss of feeling in your feet 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 56 | Ankle or Leg Edema Question (Q15b) | 64 | Beneficiary's response to Q15b from the Cohort III Baseline survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Ankles or legs that swell as the day goes on 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|---|
| 57 | Foot Tingling or Burning Question (Q15c) | 65 | Beneficiary's response to Q15c from the Cohort III Baseline survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Tingling or burning sensation in your feet especially at night 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 58 | Decreased Temperature Sensation in Feet Question (Q15d) | 66 | Beneficiary's response to Q15d from the Cohort III Baseline survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Decreased ability to feel hot or cold with your feet 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 59 | Sores or Wounds on Feet Question (Q15e) | 67 | Beneficiary's response to Q15e from the Cohort III Baseline survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Sores or wounds on your feet that did not heal 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 60 | Hemiparalysis or Weakness Question (Q16a) | 68 | Beneficiary's response to Q16a from the Cohort III Baseline survey: Have you ever had paralysis or weakness on one side of the body? 1 = Yes, I have it 2 = Yes, but it went away 3 = No |
| 61 | Lost Ability to Talk Question (Q16b) | 69 | Beneficiary's response to Q16b from the Cohort III Baseline survey: Have you ever lost the ability to talk? 1 = Yes, I have lost it 2 = Yes, but it returned 3 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 62 | Vision Question (Q17) | 70 | Beneficiary's response to Q17 from the Cohort III Baseline survey: Can you see well enough to read newspaper print (with your glasses or contacts if that's how you see best)? 1 = Yes 2 = No |
| 63 | Hearing Question (Q18) | 71 | Beneficiary's response to Q18 from the Cohort III Baseline survey: Can you hear most of the things people say (with a hearing aid if that's how you hear best)? 1 = Yes 2 = No |
| 64 | Acid Indigestion Question (Q19) | 72 | Beneficiary's response to Q19 from the <i>Cohort III</i> Baseline survey: Do you now have acid indigestion or heartburn? 1 = Yes 2 = No |
| 65 | Difficulty Controlling Urination Question (Q20) | 73 | Beneficiary's response to Q20 from the <i>Cohort III</i> Baseline survey: Do you have difficulty controlling urination? 1 = Yes 2 = No |
| 66 | Hypertension Question (Q21) | 74 | Beneficiary's response to Q21 from the <i>Cohort III</i> Baseline survey: Has a doctor ever told you that you had: Hypertension or high blood pressure 1 = Yes 2 = No |
| 67 | Angina Pectoris or Coronary Artery Disease Question (Q22) | 75 | Beneficiary's response to Q22 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Angina pectoris or coronary artery disease 1 = Yes 2 = No |
| 68 | Congestive Heart Failure Question (Q23) | 76 | Beneficiary's response to Q23 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Congestive heart failure 1 = Yes 2 = No |
| 69 | Myocardial Infarction Question (Q24) | 77 | Beneficiary's response to Q24 from the Cohort III Baseline survey: Has a doctor ever told you that you had: A myocardial infarction or heart attack 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 70 | Other Heart Conditions Question (Q25) | 78 | Beneficiary's response to Q25 from the <i>Cohort III</i> Baseline survey: Has a doctor ever told you that you had: Other heart conditions 1 = Yes 2 = No |
| 71 | Stroke Question (Q26) | 79 | Beneficiary's response to Q26 from the Cohort III Baseline survey: Has a doctor ever told you that you had: A stroke 1 = Yes 2 = No |
| 72 | COPD Question (Q27) | 80 | Beneficiary's response to Q27 from the <i>Cohort III</i> Baseline survey: Has a doctor ever told you that you had: Emphysema, or asthma, or COPD 1 = Yes 2 = No |
| 73 | Inflammatory Bowel Disease Question (Q28) | 81 | Beneficiary's response to Q28 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Crohn's disease, ulcerative colitis, or inflammatory bowel disease 1 = Yes 2 = No |
| 74 | Arthritis of Hip or Knee Question (Q29) | 82 | Beneficiary's response to Q29 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Arthritis of the hip or knee 1 = Yes 2 = No |
| 75 | Arthritis of Hand or Wrist Question (Q30) | 83 | Beneficiary's response to Q30 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Arthritis of the hand or wrist 1 = Yes 2 = No |
| 76 | Sciatica Question (Q31) | 84 | Beneficiary's response to Q31 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Sciatica 1 = Yes 2 = No |
| 77 | Diabetes Question (Q32) | 85 | Beneficiary's response to Q32 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Diabetes, high blood sugar, or sugar in the urine 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 78 | Any Cancer Question (Q33) | 86 | Beneficiary's response to Q33 from the Cohort III Baseline survey: Has a doctor ever told you that you had: Any cancer (other than skin cancer) 1 = Yes 2 = No |
| 79 | Arthritis Pain Question (Q34) | 87 | Beneficiary's response to Q34 from the <i>Cohort III</i> Baseline survey (if answered "yes" to Q29 or Q30): During the past 4 weeks, how would you describe the arthritis pain you usually had? 1 = None 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe |
| 80 | Colorectal Cancer Treatment Question (Q35a) | 88 | Beneficiary's response to Q35a from the <i>Cohort</i> III Baseline survey (if answered "yes" to Q33): Are you currently under treatment for: Colon or rectal cancer 1 = Yes 2 = No |
| 81 | Lung Cancer Treatment Question (Q35b) | 89 | Beneficiary's response to Q35b from the <i>Cohort</i> III Baseline survey (if answered "yes" to Q33): Are you currently under treatment for: Lung cancer 1 = Yes 2 = No |
| 82 | Breast Cancer Treatment Question (Q35c) | 90 | Beneficiary's response to Q35c from the <i>Cohort</i> III Baseline survey (if answered "yes" to Q33): Are you currently under treatment for: Breast cancer 1 = Yes 2 = No |
| 83 | Prostate Cancer Treatment Question (Q35d) | 91 | Beneficiary's response to Q35d from the <i>Cohort</i> III Baseline survey (if answered "yes" to Q33): Are you currently under treatment for: Prostate cancer 1 = Yes 2 = No |
| 84 | Low Back Pain Question (Q36) | 92 | Beneficiary's response to Q36 from the Cohort III Baseline survey: In the past 4 weeks, how often has low back pain interfered with your usual daily activities? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 85 | Pain, Numbness, or Tingling Down Leg Question (Q37) | 93 | Beneficiary's response to Q37 from the Cohort III Baseline survey: In the past 4 weeks, how often did you have pain, numbness or tingling that travels down your leg and below your knee? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 86 | Two Weeks of Depression Question (Q38) | 94 | Beneficiary's response to Q38 from the Cohort III Baseline survey: In the past year, have you had 2 weeks or more during which you felt sad, blue or depressed; or when you lost interest or pleasure in things that you usually cared about or enjoyed? 1 = Yes 2 = No |
| 87 | Depression Much of the Time Question (Q39) | 95 | Beneficiary's response to Q39 from the Cohort III Baseline survey: In the past year, have you felt depressed or sad much of the time? 1 = Yes 2 = No |
| 88 | Depression Most of the Time Question (Q40) | 96 | Beneficiary's response to Q40 from the Cohort III Baseline survey: Have you ever had 2 years or more in your life when you felt depressed or sad most days, even if you felt okay sometimes? 1 = Yes 2 = No |
| 89 | Comparative Health Question (Q41) | 97 | Beneficiary's response to Q41 from the Cohort III Baseline survey: In general, compared to other people your age, would you say that your health is: 1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor |
| 90 | Smoked 100 Cigarettes Question (Q42) | 98 | Beneficiary's response to Q42 from the Cohort III Baseline survey: Have you ever smoked at least 100 cigarettes in your entire life? 1 = Yes (Go to Q43) 2 = No (Go to Q46) 3 = Don't know (Go to Q46) |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 91 | Current Smoker Question (Q43) | 99 | Beneficiary's response to Q43 from the Cohort III Baseline survey: Do you now smoke every day, some days, or not at all? 1 = Every day (Go to Q45) 2 = Some days (Go to Q45) 3 = Not at all (Go to Q44) 4 = Don't know (Go to Q46) |
| 92 | Quit Smoking Question (Q44) | 100 | Beneficiary's response to Q44 from the Cohort III Baseline survey: How long has it been since you quit smoking cigarettes? 1 = 6 months or less (Go to Q45) 2 = more than 6 months (Go to Q46) 3 = Don't know (Go to Q46) |
| | Visiting a Doctor Question (previously Q45 in the Cohort I Baseline survey) * This question was not included in the Cohort III Baseline survey. | 101 | Beneficiary's response to Q45 from the Cohort I Baseline survey: During the past 12 months, how many times have you visited a doctor or health professional in your plan (not counting overnight hospital visits)? 1 = None (Go to Q47) 2 = 1 visit 3 = 2 to 4 visits 4 = 5 to 9 visits 5 = 10 or more visits |
| 93 | Smoking Advice Question (Q45) | 102 | Beneficiary's response to Q45 from the Cohort III Baseline survey: In the last 6 months, on how many visits were you advised to quit smoking by a doctor or other health professional in your plan? 1 = None 2 = 1 visit 3 = 2 to 4 visits 4 = 5 to 9 visits 5 = 10 or more visits 6 = I had no visits in the last 6 months |
| 94 | Retirement Community Question (Q53) | 103 | Beneficiary's response to Q53 from the Cohort III Baseline survey: Is this house or apartment in a retirement community, building or complex? 1 = Yes 2 = No |
| 95 | Retirement Community Medical Services Question (Q54) | 104 | Beneficiary's response to Q54 from the <i>Cohort III</i> Baseline survey (if answered "yes" to Q53): Does this retirement community/building/facility provide medical services? 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|------------------------------------|-------------------|--|
| 96 | Person Completing the Survey (Q55) | 105 | Beneficiary's response to Q55 from the Cohort III Baseline survey: Who completed this survey form? 1 = Person to whom the survey was addressed 2 = Family member or relative of person to whom the survey was addressed 3 = Friend of person to whom the survey was addressed 4 = Professional caregiver of person to whom the survey was addressed |

BASELINE SURVEY ADMINISTRATION

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|--|
| 97 | Baseline Survey Disposition | 106 – 108 | (SPECIAL NOTE: this field contains a character string): M10 = completed survey by mail (≥ 80% complete) T10 = completed survey by telephone (≥ 80% complete) M11 = nonresponse: partial complete by mail (≥ 50% but < 80% complete) T11 = nonresponse: partial complete by telephone (≥ 50% but < 80% complete) M31 = nonresponse: break-off (<50% complete) |
| 98 | Baseline Round Survey Returned | 109 - 110 | T31 = nonresponse: break-off (<50% complete) (SPECIAL NOTE: this field contains a character string): 1 = 1 st mailing 2 = 2 nd mailing 3 = 1 st telephone 4 = 2 nd telephone 5 = 3 rd telephone 6 = 4 th telephone 7 = 5 th telephone 8 = 6 th telephone 9 = 7 th telephone 10 = 8 th telephone 11 = Partially completed by mail and converted to complete by telephone 12 = Not completed |
| 99 | Percent of Baseline Survey Completed | 111 – 115 | Range: 0 to 100% (value is rounded to the tenth decimal place) |
| 100 | Baseline Survey Language | 116 | 1 = English 2 = Spanish 3 = Not applicable 4 = Chinese |

FOLLOW UP SURVEY QUESTION RESPONSES

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 101 | General Health Question (Q1) | 117 | Beneficiary's response to Q1 from the Cohort III Follow Up survey: In general, would you say your health is: 1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor |
| 102 | Health Transition Question (Q2) | 118 | Beneficiary's response to Q2 from the Cohort III Follow Up survey: Compared to one year ago, how would you rate your health in general now? 1 = Much better now than one year ago 2 = Somewhat better now than one year ago 3 = About the same as one year ago 4 = Somewhat worse now than one year ago 5 = Much worse now than one year ago |
| 103 | Vigorous Activities Question (Q3a) | 119 | Beneficiary's response to Q3a from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Vigorous activities 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 104 | Moderate Activities Question (Q3b) | 120 | Beneficiary's response to Q3b from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Moderate activities 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 105 | Lifting or Carrying Groceries Question (Q3c) | 121 | Beneficiary's response to Q3c from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Lifting or Carrying Groceries 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 106 | Climbing Several Flights of Stairs Question (Q3d) | 122 | Beneficiary's response to Q3d from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Climbing several flights of stairs 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |

FOLLOW UP SURVEY QUESTION RESPONSES (CONT.)

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 107 | Climbing One Flight of Stairs Question (Q3e) | 123 | Beneficiary's response to Q3e from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Climbing one flight of stairs 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 108 | Bending, Kneeling, or Stooping Question (Q3f) | 124 | Beneficiary's response to Q3f from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Bending, kneeling, or stooping 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 109 | Walking More than a Mile Question (Q3g) | 125 | Beneficiary's response to Q3g from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Walking more than a mile 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 110 | Walking Several Blocks Question (Q3h) | 126 | Beneficiary's response to Q3h from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Walking several blocks 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 111 | Walking One Block Question (Q3i) | 127 | Beneficiary's response to Q3i from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Walking one block 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |
| 112 | Bathing or Dressing Question (Q3j) | 128 | Beneficiary's response to Q3j from the Cohort III Follow Up survey: Does your health limit you in these activities? If so, how much? Bathing or dressing yourself 1 = Yes, limited a lot 2 = Yes, limited a little 3 = No, not limited at all |

FOLLOW UP SURVEY QUESTION RESPONSES (CONT.)

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|--|
| 113 | Physical Health Limiting Time Spent on Activities Question (Q4a) | 129 | Beneficiary's response to Q4a from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Cut down on the amount of time you spent on work or other activities 1 = Yes 2 = No |
| 114 | Physical Health Limiting Amount Accomplished Question (Q4b) | 130 | Beneficiary's response to Q4b from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Accomplished less than you would like 1 = Yes 2 = No |
| 115 | Physical Health Limiting the Kind of Activities Question (Q4c) | 131 | Beneficiary's response to Q4c from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Were limited in the kind of work or other activities 1 = Yes 2 = No |
| 116 | Physical Health Causing Difficulty Performing Activities Question (Q4d) | 132 | Beneficiary's response to Q4d from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? Had difficulty performing the work or other activities 1 = Yes 2 = No |
| 117 | Emotional Problems Limiting Time Spent on Activities Question (Q5a) | 133 | Beneficiary's response to Q5a from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Cut down on the amount of time you spent on work or other activities 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 118 | Emotional Problems Limiting Amount Accomplished Question (Q5b) | 134 | Beneficiary's response to Q5b from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Accomplished less than you would like 1 = Yes 2 = No |
| 119 | Emotional Problems Limiting Carefulness Question (Q5c) | 135 | Beneficiary's response to Q5c from the Cohort III Follow Up survey: During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? Didn't do work or other activities as carefully as usual 1 = Yes 2 = No |
| 120 | Extent Health Interfering with Social Activities Question (Q6) | 136 | Beneficiary's response to Q6 from the Cohort III Follow Up survey: During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities? 1 = Not at all 2 = Slightly 3 = Moderately 4 = Quite a bit 5 = Extremely |
| 121 | Bodily Pain Question (Q7) | 137 | Beneficiary's response to Q7 from the Cohort III Follow Up survey: How much bodily pain have you had during the past 4 weeks? 1 = None 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe 6 = Very severe |
| 122 | Pain Interfering with Work Question (Q8) | 138 | Beneficiary's response to Q8 from the Cohort III Follow Up survey: During the past 4 weeks, how much did pain interfere with your normal work? 1 = Not at all 2 = A little bit 3 = Moderately 4 = Quite a bit 5 = Extremely |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|----------------------------------|-------------------|---|
| 123 | Full of Pep Question (Q9a) | 139 | Beneficiary's response to Q9a from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Did you feel full of pep? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 124 | Nervous Question (Q9b) | 140 | Beneficiary's response to Q9b from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Have you been a very nervous person? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 125 | Down in the Dumps Question (Q9c) | 141 | Beneficiary's response to Q9c from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Have you felt so down in the dumps that nothing could cheer you up? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 126 | Calm and Peaceful Question (Q9d) | 142 | Beneficiary's response to Q9d from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Have you felt calm and peaceful? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 127 | Lots of Energy Question (Q9e) | 143 | Beneficiary's response to Q9e from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Did you have a lot of energy? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|---|
| 128 | Downhearted and Blue Question (Q9f) | 144 | Beneficiary's response to Q9f from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Have you felt downhearted and blue? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 129 | Feeling Worn Out Question (Q9g) | 145 | Beneficiary's response to Q9g from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Did you feel worn out? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 130 | Happy Question (Q9h) | 146 | Beneficiary's response to Q9h from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Have you been a happy person? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 131 | Feeling Tired Question (Q9i) | 147 | Beneficiary's response to Q9i from the Cohort III Follow Up survey: How much of the time during the past 4 weeks Did you feel tired? 1 = All of the time 2 = Most of the time 3 = A good bit of the time 4 = Some of the time 5 = A little of the time 6 = None of the time |
| 132 | Amount of Time Health Interfering with Social Activities Question (Q10) | 148 | Beneficiary's response to Q10 from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|----------------------------------|-------------------|--|
| 133 | Sick Easier Question (Q11a) | 149 | Beneficiary's response to Q11a from the Cohort III Follow Up survey: How true or false is each of the following statements for you? I seem to get sick a little easier than other people 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 134 | As Healthy Question (Q11b) | 150 | Beneficiary's response to Q11b from the Cohort III Follow Up survey: How true or false is each of the following statements for you? I am as healthy as anybody I know 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 135 | Future Health Question (Q11c) | 151 | Beneficiary's response to Q11c from the Cohort III Follow Up survey: How true or false is each of the following statements for you? I expect my health to get worse 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 136 | Excellent Health Question (Q11d) | 152 | Beneficiary's response to Q11d from the Cohort III Follow Up survey: How true or false is each of the following statements for you? My health is excellent 1 = Definitely true 2 = Mostly true 3 = Don't know 4 = Mostly false 5 = Definitely false |
| 137 | Bathing Question (Q12a) | 153 | Beneficiary's response to Q12a from the Cohort III Follow Up survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Bathing 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 138 | Dressing Question (Q12b) | 154 | Beneficiary's response to Q12b from the <i>Cohort III Follow Up</i> survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Dressing 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 139 | Eating Question (Q12c) | 155 | Beneficiary's response to Q12c from the Cohort III Follow Up survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Eating 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 140 | Getting In or Out of Chairs Question (Q12d) | 156 | Beneficiary's response to Q12d from the Cohort III Follow Up survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Getting in or out of chairs 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 141 | Walking Question (Q12e) | 157 | Beneficiary's response to Q12e from the Cohort III Follow Up survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Walking 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |
| 142 | Using the Toilet Question (Q12f) | 158 | Beneficiary's response to Q12f from the Cohort III Follow Up survey: Because of a health or physical problem, do you have any difficulty doing the following activities? Using the toilet 1 = I am unable to do this activity 2 = Yes, I have difficulty 3 = No, I do not have difficulty |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 143 | Chest Pain or Pressure During Exertion Question (Q13a) | 159 | Beneficiary's response to Q13a from the Cohort III Follow Up survey: During the past 4 weeks, how often have you had any of the following problems? Chest pain or pressure when you exercise 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 144 | Chest Pain or Pressure When Resting Question (Q13b) | 160 | Beneficiary's response to Q13b from the Cohort III Follow Up survey: During the past 4 weeks, how often have you had any of the following problems? Chest pain or pressure when resting 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 145 | Shortness of Breath When Lying Flat Question (Q14a) | 161 | Beneficiary's response to Q14a from the Cohort III Follow Up survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When lying down flat 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 146 | Shortness of Breath When Sitting or Resting Question (Q14b) | 162 | Beneficiary's response to Q14b from the Cohort III Follow Up survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When sitting or resting 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 147 | Shortness of Breath When Walking Less than One Block Question (Q14c) | 163 | Beneficiary's response to Q14c from the Cohort III Follow Up survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When walking less than one block 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 148 | Shortness of Breath When Climbing One Flight of Stairs Question (Q14d) | 164 | Beneficiary's response to Q14d from the Cohort III Follow Up survey: During the past 4 weeks, how often have you felt short of breath under the following conditions? When climbing one flight of stairs 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 149 | Numbness in Feet Question (Q15a) | 165 | Beneficiary's response to Q15a from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Numbness or loss of feeling in your feet 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 150 | Ankle or Leg Edema Question (Q15b) | 166 | Beneficiary's response to Q15b from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Ankles or legs that swell as the day goes on 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|--|
| 151 | Foot Tingling or Burning Question (Q15c) | 167 | Beneficiary's response to Q15c from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Tingling or burning sensation in your feet especially at night 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 152 | Decreased Temperature Sensation in Feet Question (Q15d) | 168 | Beneficiary's response to Q15d from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Decreased ability to feel hot or cold with your feet 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 153 | Sores or Wounds on Feet Question (Q15e) | 169 | Beneficiary's response to Q15e from the Cohort III Follow Up survey: During the past 4 weeks, how much of the time have you had any of the following problems with your legs and feet? Sores or wounds on your feet that did not heal 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 154 | Hemiparalysis or Weakness Question (Q16a) | 170 | Beneficiary's response to Q16a from the Cohort III Follow Up survey: Have you ever had paralysis or weakness on one side of the body? 1 = Yes, I have it 2 = Yes, but it went away 3 = No |
| 155 | Lost Ability to Talk Question (Q16b) | 171 | Beneficiary's response to Q16b from the Cohort III Follow Up survey: Have you ever lost the ability to talk? 1 = Yes, I have lost it 2 = Yes, but it returned 3 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 156 | Vision Question (Q17) | 172 | Beneficiary's response to Q17 from the Cohort III Follow Up survey: Can you see well enough to read newspaper print (with your glasses or contacts if that's how you see best)? 1 = Yes 2 = No |
| 157 | Hearing Question (Q18) | 173 | Beneficiary's response to Q18 from the Cohort III Follow Up survey: Can you hear most of the things people say (with a hearing aid if that's how you hear best)? 1 = Yes 2 = No |
| 158 | Acid Indigestion Question (Q19) | 174 | Beneficiary's response to Q19 from the <i>Cohort III</i> Follow Up survey: Do you now have acid indigestion or heartburn? 1 = Yes 2 = No |
| 159 | Difficulty Controlling Urination Question (Q20) | 175 | Beneficiary's response to Q20 from the <i>Cohort III</i> Follow Up survey: Do you have difficulty controlling urination? 1 = Yes 2 = No |
| 160 | Hypertension Question (Q21) | 176 | Beneficiary's response to Q21 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Hypertension or high blood pressure 1 = Yes 2 = No |
| 161 | Angina Pectoris or Coronary Artery Disease Question (Q22) | 177 | Beneficiary's response to Q22 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Angina pectoris or coronary artery disease 1 = Yes 2 = No |
| 162 | Congestive Heart Failure Question (Q23) | 178 | Beneficiary's response to Q23 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Congestive heart failure 1 = Yes 2 = No |
| 163 | Myocardial Infarction Question (Q24) | 179 | Beneficiary's response to Q24 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: A myocardial infarction or heart attack 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 164 | Other Heart Conditions Question (Q25) | 180 | Beneficiary's response to Q25 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Other heart conditions 1 = Yes 2 = No |
| 165 | Stroke Question (Q26) | 181 | Beneficiary's response to Q26 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: A stroke 1 = Yes 2 = No |
| 166 | COPD Question (Q27) | 182 | Beneficiary's response to Q27 from the <i>Cohort III</i> Follow Up survey: Has a doctor ever told you that you had: Emphysema, or asthma, or COPD 1 = Yes 2 = No |
| 167 | Inflammatory Bowel Disease Question (Q28) | 183 | Beneficiary's response to Q28 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Crohn's disease, ulcerative colitis, or inflammatory bowel disease 1 = Yes 2 = No |
| 168 | Arthritis of Hip or Knee Question (Q29) | 184 | Beneficiary's response to Q29 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Arthritis of the hip or knee 1 = Yes 2 = No |
| 169 | Arthritis of Hand or Wrist Question (Q30) | 185 | Beneficiary's response to Q30 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Arthritis of the hand or wrist 1 = Yes 2 = No |
| 170 | Sciatica Question (Q31) | 186 | Beneficiary's response to Q31 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Sciatica 1 = Yes 2 = No |
| 171 | Diabetes Question (Q32) | 187 | Beneficiary's response to Q32 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Diabetes, high blood sugar, or sugar in the urine 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|--|
| 172 | Any Cancer Question (Q33) | 188 | Beneficiary's response to Q33 from the Cohort III Follow Up survey: Has a doctor ever told you that you had: Any cancer (other than skin cancer) 1 = Yes 2 = No |
| 173 | Arthritis Pain Question (Q34) | 189 | Beneficiary's response to Q34 from the <i>Cohort III</i> Follow Up survey (if answered "yes" to Q29 or Q30): During the past 4 weeks, how would you describe the arthritis pain you usually had? 1 = None 2 = Very mild 3 = Mild 4 = Moderate 5 = Severe |
| 174 | Colorectal Cancer Treatment Question (Q35a) | 190 | Beneficiary's response to Q35a from the <i>Cohort</i> III Follow Up survey (if answered "yes" to Q33): Are you currently under treatment for: Colon or rectal cancer 1 = Yes 2 = No |
| 175 | Lung Cancer Treatment Question (Q35b) | 191 | Beneficiary's response to Q35b from the <i>Cohort</i> III Follow Up survey (if answered "yes" to Q33): Are you currently under treatment for: Lung cancer 1 = Yes 2 = No |
| 176 | Breast Cancer Treatment Question (Q35c) | 192 | Beneficiary's response to Q35c from the <i>Cohort</i> III Follow Up survey (if answered "yes" to Q33): Are you currently under treatment for: Breast cancer 1 = Yes 2 = No |
| 177 | Prostate Cancer Treatment Question (Q35d) | 193 | Beneficiary's response to Q35d from the <i>Cohort</i> III Follow Up survey (if answered "yes" to Q33): Are you currently under treatment for: Prostate cancer 1 = Yes 2 = No |
| 178 | Low Back Pain Question (Q36) | 194 | Beneficiary's response to Q36 from the Cohort III Follow Up survey: In the past 4 weeks, how often has low back pain interfered with your usual daily activities? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 179 | Pain, Numbness, or Tingling Down Leg Question (Q37) | 195 | Beneficiary's response to Q37 from the Cohort III Follow Up survey: In the past 4 weeks, how often did you have pain, numbness or tingling that travels down your leg and below your knee? 1 = All of the time 2 = Most of the time 3 = Some of the time 4 = A little of the time 5 = None of the time |
| 180 | Two Weeks of Depression Question (Q38) | 196 | Beneficiary's response to Q38 from the Cohort III Follow Up survey: In the past year, have you had 2 weeks or more during which you felt sad, blue or depressed; or when you lost interest or pleasure in things that you usually cared about or enjoyed? 1 = Yes 2 = No |
| 181 | Depression Much of the Time Question (Q39) | 197 | Beneficiary's response to Q39 from the Cohort III Follow Up survey: In the past year, have you felt depressed or sad much of the time? 1 = Yes 2 = No |
| 182 | Depression Most of the Time Question (Q40) | 198 | Beneficiary's response to Q40 from the Cohort III Follow Up survey: Have you ever had 2 years or more in your life when you felt depressed or sad most days, even if you felt okay sometimes? 1 = Yes 2 = No |
| 183 | Comparative Health Question (Q41) | 199 | Beneficiary's response to Q41 from the Cohort III Follow Up survey: In general, compared to other people your age, would you say that your health is: 1 = Excellent 2 = Very good 3 = Good 4 = Fair 5 = Poor |
| 184 | Smoked 100 Cigarettes Question (Q42) | 200 | Beneficiary's response to Q42 from the Cohort III Follow Up survey: Have you ever smoked at least 100 cigarettes in your entire life? 1 = Yes (Go to Q43) 2 = No (Go to Q46) 3 = Don't know (Go to Q46) |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|---|-------------------|---|
| 185 | Current Smoker Question (Q43) | 201 | Beneficiary's response to Q43 from the Cohort III Follow Up survey: Do you now smoke every day, some days, or not at all? 1 = Every day (Go to Q45) 2 = Some days (Go to Q45) 3 = Not at all (Go to Q44) 4 = Don't know (Go to Q46) |
| 186 | Quit Smoking Question (Q44) | 202 | Beneficiary's response to Q44 from the Cohort III Follow Up survey: How long has it been since you quit smoking cigarettes? 1 = Less than 6 months (Go to Q45) 2 = 6 months or more (Go to Q46) 3 = Don't know (Go to Q46) |
| | Visiting a Doctor Question (previously Q45 in the Cohort I Baseline survey) * This question was not included in the Cohort III Follow Up survey. | 203 | Beneficiary's response to Q45 from the Cohort I Baseline survey: During the past 12 months, how many times have you visited a doctor or health professional in your plan (not counting overnight hospital visits)? 1 = None (Go to Q47) 2 = 1 visit 3 = 2 to 4 visits 4 = 5 to 9 visits 5 = 10 or more visits |
| 187 | Smoking Advice Question (Q45) | 204 | Beneficiary's response to Q45 from the Cohort III Follow Up survey: In the last 6 months, on how many visits were you advised to quit smoking by a doctor or other health provider in your plan? 1 = None 2 = 1 visit 3 = 2 to 4 visits 4 = 5 to 9 visits 5 = 10 or more visits 6 = I had no visits in the last 6 months |
| 188 | Retirement Community Question (Q53) | 205 | Beneficiary's response to Q53 from the Cohort III Follow Up survey: Is this house or apartment in a retirement community, building or complex? 1 = Yes 2 = No |
| 189 | Retirement Community Medical Services Question (Q54) | 206 | Beneficiary's response to Q54 from the <i>Cohort III</i> Follow Up survey (if answered "yes" to Q53): Does this retirement community/building/ facility provide medical services? 1 = Yes 2 = No |

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|------------------------------------|-------------------|---|
| 190 | Person Completing the Survey (Q55) | 207 | Beneficiary's response to Q55 from the Cohort III Follow Up survey: Who completed this survey form? 1 = Person to whom the survey was addressed 2 = Family member or relative of person to whom the survey was addressed 3 = Friend of person to whom the survey was addressed 4 = Professional caregiver of person to whom the survey was addressed |

FOLLOW UP SURVEY ADMINISTRATION

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|------------------------------|-------------------|---|
| 191 | Follow Up Survey Disposition | 208 – 210 | strings): M10 = completed survey by mail (≥ 80% complete) T10 = completed survey by telephone (≥ 80% complete) M11 = nonresponse: partial complete by mail (≥ 50% but < 80% complete) T11 = nonresponse: partial complete by telephone (≥ 50% but < 80% complete) M20 = ineligible: deceased T20 = ineligible: deceased M21 = ineligible: not enrolled in HMO T21 = ineligible: not enrolled in HMO M22 = ineligible: end-stage renal disease T22 = ineligible: language problem T23 = ineligible: language problem M24 = ineligible: phone no. unavailable T24 = ineligible: phone no. unavailable M31 = nonresponse: break-off (<50% complete) T31 = nonresponse: break-off (<50% complete) M32 = nonresponse: refusal M33 = nonresponse: Respondent unavailable T33 = nonresponse: Respondent unavailable T34 = nonresponse: Respondent unavailable T35 = nonresponse: Respondent unavailable T34 = nonresponse: Respondent unavailable T35 = nonresponse: Respondent unavailable T35 = nonresponse: Respondent unavailable T35 = nonresponse: Respondent institutionalized T36 = nonresponse: after maximum attempts |

FOLLOW UP SURVEY ADMINISTRATION (CONT.)

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|--|-------------------|---|
| 192 | Follow Up Round Survey Returned | 211-212 | (SPECIAL NOTE: this field contains a character string): M1 = 1 st mailing M2 = 2 nd mailing T1 = 1 st telephone T2 = 2 nd telephone T3 = 3 rd telephone T4 = 4 th telephone T5 = 5 th telephone T6 = 6 th telephone MT = Partially completed by mail and converted to complete by telephone NC = Not completed |
| 193 | Percent of Follow Up Survey Completed | 213–217 | Range: 0 to 100% (value is rounded to the tenth decimal place) |
| 194 | Follow Up Survey Language | 218 | 1= English 2 = Spanish 3 = Not Applicable |

ADDITIONAL FIELDS

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|-------------------|-------------------|--|
| 195 | Cohort Identifier | 219 - 221 | Cohort in which the HOS surveys contained in this data file were submitted: |
| 196 | CMS Plan Region | 222 - 223 | Value for each record = "A03" 1 = Region I - Boston (serving Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont) 2 = Region II - New York (serving New York, New Jersey, Puerto Rico, and the Virgin Islands) 3 = Region III - Philadelphia (serving Delaware, Washington DC, Maryland, Pennsylvania, Virginia, and West Virginia) 4 = Region IV - Atlanta (serving Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee) 5 = Region V - Chicago (serving Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin) 6 = Region VI - Dallas (serving Arkansas, Louisiana, New Mexico, Oklahoma, and Texas) 7 = Region VII - Kansas City (serving Iowa, Kansas, Missouri, and Nebraska) 8 = Region VIII - Denver (serving Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming) 9 = Region IX - San Francisco (serving Arizona, California, Guam, Hawaii, and Nevada) 10 = Region X - Seattle (serving Alaska, Idaho, Oregon, and Washington) |

ADDITIONAL FIELDS (CONT.)

| Field # | Field Description | Field Position | Additional Information and Valid Values |
|---------|----------------------------|-------------------|---|
| 197 | Follow Up Sample Indicator | 224 | Indicates if the record was included in the <i>Cohort</i> III Follow Up sample: 1 = Eligible for Follow Up 2 = Not Eligible for Follow Up |
| 198 | Analytic Sample Indicator | 225 | Indicates status of the record in the analytic file: 1 = Respondent 2 = Nonrespondent 3 = Invalid 4 = Disenrolled 5 = Dead |