

MEMO

From: Cathi Callahan, ARC

Date: June 4, 2020

RE: Layout of the March 2019 CPS Auxiliary Data (ASCII)

The March 2019 CPS Auxiliary data file contains identification information from the original March supplemental file, as well as recoded insurance variables and imputed information on the sources of employer sponsored insurance. The file is in the same order as the original Census issued file (person level only), and can be used with the full person level CPS file by matching PH-SEQ and A-LINENO.

More detailed information on the variables themselves can be found in “Technical Appendix: March 2019 CPS Auxiliary Data”, from Cathi Callahan and Rodelle Williams.

Layout for the fixed format file is as follows, and there is a blank space after each variable.

COL	Variable	Start	Length	Description
1	PH_SEQ	1	5	Household Sequence Number
2	H_NUMPER	7	2	Number of Persons in Household
3	A_LINENO	10	2	Person Line Number
4	ESIPH	13	1	ESI policy holder? 0 = no 1 = yes
5	ESIDEP	15	1	ESI dependent (<i>includes coverage from outside household</i>)? 0 = no 1 = yes
6	OPHIPH	17	1	Other private health insurance policy holder? 0 = no 1 = yes
7	OPHIDEP	19	1	Other private health insurance dependent (<i>includes coverage from outside household</i>)? 0 = no 1 = yes
8	EXCHANGE	21	1	Enrolled in health exchange? (for persons with OPHI coverage) 0 = no 1 = yes
9	NMCAID	23	1	Covered by Medicaid? 0 = no 1 = yes
10	NMCARE	25	1	Covered by Medicare? 0 = no 1 = yes

COL	Variable	Start	Length	Description
11	CHAMP	27	1	Covered by Military? 0 = no 1 = yes
12	OTHER	29	1	Covered by Other? 0 = no 1 = yes
13	CHIPP	31	1	Covered by Children's Health Insurance (CHIP)? 0 = no 1 = yes
14	ANYCOV	33	1	Any Health Coverage? 0 = Infant born after calendar year 1 = Coverage for all of year 2 = No coverage for some of the year 3 = No coverage for full year
15	OUTTYP	35	1	Coverage from Outside of Household? 0 = no 1 = yes, ESI 2 = yes, OPHI 3 = yes, other
16	CONCURR	37	1	Concurrent coverage last year? 0 = Infant born after calendar year 1 = No months with concurrent coverage 2 = Some months with concurrent coverage 3 = Concurrent coverage all year
17	SUBSIDY	39	1	Any subsidized marketplace coverage last year (<i>edited</i>)? 0 = no 1 = yes
18	PITESIPH	41	1	Point in Time ESI policy holder? 0 = no 1 = yes
19	PITESIDEP	43	1	Point in Time ESI dependent? 0 = no 1 = yes
20	PITOPHIPH	45	1	Point in Time Other private health insurance policy holder? 0 = no 1 = yes
21	PITOPHIDEP	47	1	Point in Time Other private health insurance dependent? 0 = no 1 = yes

COL	Variable	Start	Length	Description
22	PITEXCHANGE	49	1	Point in Time enrolled in health exchange? 0 = no 1 = yes
23	PITNMCAID	51	1	Point in Time Covered by Medicaid? 0 = no 1 = yes
24	PITNMCARE	53	1	Point in Time Covered by Medicare? 0 = no 1 = yes
25	PITCHAMP	55	1	Point in Time Covered by Military? 0 = no 1 = yes
26	PITOTHER	57	1	Point in Time Covered by Other? 0 = no 1 = yes
27	PITCHIPP	59	1	Point in Time Covered by Children's Health Insurance? 0 = no 1 = yes
28	NOW_ANYCOV	61	1	Point in time insured / uninsured 0 = insured 1 = uninsured
29	PITOUTTYP	63	1	Point in time coverage from outside of household? 0 = no 1 = yes, ESI 2 = yes, OPHI 3 = yes, other
30	PITSUBSIDY	65	1	Point in time any subsidized marketplace coverage? 0 = no 1 = yes
31	MARSUPWT	67	8	March Supplement Weight (float, 2 decimal places)
32	NEWWT_LASTYR	76	8	March Supplement Weight, 0 if infant (float, 2 decimal places)
33	OFFER	85	1	Does your employer offer Health Insurance? 0 = n/a 1 = coverage through current employer 2 = offered, eligible, not enrolled 3 = offered, not enrolled, not eligible 4 = not offered
34	PRIOR	87	1	Do you have ESI through a Prior Employer? 0 = n/a 1 = yes 2 = no, current employer

COL	Variable	Start	Length	Description
35	NEWSECTOR	89	1	What sector is providing coverage? 0 = n/a 1 = Private 2 = Public, Federal 3 = Public, State 4 = Public, Local 5 = Self- employed, inc 6 = Self- employed, uninc
36	NEWSIZE	91	1	What size employer provided the coverage? 0 = n/a 1 = <10 2 = 10 - 24 3 = 25 - 99 4 = 100 - 499 5 = 500 - 999 6 = 1000+
37	EEPRIOR	93	1	Coverage through a prior employer (dependents only, attribute of policyholder) 0 = n/a 1 = yes, prior 2 = no, current employer
38	PHLINE	95	2	Line number (A-LINENO) of policyholder 0 = no policy holder Valid: 1-13
39	SIFLAG	98	1	Was coverage fully-insured or self-insured? 0 = n/a 1 = self-insured 2 = fully-insured
40	HMOFLAG	100	1	What type of plan are you covered by? 0 = n/a 1 = HMO 2 = PPO 3 = POS 4 = HDED
41	RETFLAG	102	1	Is prior coverage retiree or COBRA? (universe is PRIOR=1 or EEPRIOR=1) 0 = n/a 1 = retiree 2 = COBRA
42	NEWSECTOR2	104	1	Sector of dependent coverage (for those with ESI as both policyholder and dependent Valid: 1-6 (same values as NEWSECTOR)

COL	Variable	Start	Length	Description
43	NEWSIZE2	106	1	Size of employer covering, dependent coverage (for those with ESI as both policyholder and dependent) Valid: 1-6 (same values as NEWSIZE)
44	UNION	108	1	Coverage through union? (for ESI Policy holders only, non-self-employed) 0 = n/a 1 = yes, union 2 = no, not union
45	EEUNION	110	1	Coverage through a union? (for ESI deps only, based on PH attribute) 0 = n/a 1 = yes, union 2 = no, not union
46	UNIONWORK	112	1	Union? (for non-self-employed workers only, current employment status) 0 = n/a 1 = yes, union 2 = no, not union
47	AV	114	7	Actuarial Value (active ESI policy holder records only) -9 = n/a Range of valid values: 0.0000 to 0.9956
48	AVCELLAVG	122	7	Cell based average actuarial value (active ESI policy holder records only) -9 = n/a Range of valid values: 0.0000 to 0.9169
49	AVPLANTYPE	130	2	Plan type used for AVs? -9 = n/a 1 = HMO 2 = PPO 3 = POS 5 = HRA 6 = HSA
50	MSPFLAG	133	1	Medicare Secondary Payer variable (all Medicare) 0 = Person does not have Medicare 1 = Medicare is secondary (ESI Primary) 2 = Medicare is primary (may or may not have ESI)
51	OOPEXP	135	7	Out of Pocket Expenditures on Over the Counter Purchases and Medical Equipment (sum of POTC-VAL and PMED-VAL) Range of valid values: 0 to \$200,500

COL	Variable	Start	Length	Description
52	OLDSTATE	143	2	Old State Variable Range of valid values: 11 to 95 <i>See table at end of this document for codes</i>
53	MCDEXPAN	146	1	Is person in a Medicaid expansion state? (for all persons) 0 = no 1 = yes

OLDSTATE (State Number)	State Name
11	Maine
12	New Hampshire
13	Vermont
14	Massachusetts
15	Rhode Island
16	Connecticut
21	New York
22	New Jersey
23	Pennsylvania
31	Ohio
32	Indiana
33	Illinois
34	Michigan
35	Wisconsin
41	Minnesota
42	Iowa
43	Missouri
44	North Dakota
45	South Dakota
46	Nebraska
47	Kansas
51	Delaware
52	Maryland
53	District of Columbia
54	Virginia
55	West Virginia
56	North Carolina
57	South Carolina
58	Georgia
59	Florida
61	Kentucky
62	Tennessee
63	Alabama
64	Mississippi
71	Arkansas
72	Louisiana
73	Oklahoma
74	Texas
81	Montana
82	Idaho
83	Wyoming
84	Colorado
85	New Mexico

OLDSTATE (State Number)	State Name
86	Arizona
87	Utah
88	Nevada
91	Washington
92	Oregon
93	California
94	Alaska
95	Hawaii