



## Appendix 7



### **Example Data Dictionary of Supplemental Variables Collected for the Starting Sample of the PHDS for Which the Primary Units of Analysis were 10 Pediatric Offices and 56 Individual Health Care Providers**

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- **Data Set #1:** Information about the starting sample for the survey administration based on administrative, enrollment and health care utilization information.

This is a **child-level data set**. It includes the following information:

- ✓ Child-specific general and enrollment information: **Table 1** provides an overview of the data file elements to be collected about the child and child's enrollment.
  - ✓ Child-specific health care utilization information- **Table 2** provides an overview of the data file elements that will be collected about the child's health care utilization. Examples of variables include the following: Count variable of the number of well-child visits the child has had in the last 12 months, count variable of the number of non-well-child visits the child has had in the last 12 months, count variable of the number of emergency room visits the child has had in the last 12 months, categorical, blinded variable of the visits the child has had in each office the child has received care.
- **Data Set #2:** Information about the pediatric offices . This database will include the office level ID codes that will allow the CAHMI team to link Data Set #1 with Data Set #2.

This is an **office-level database**. It includes the following information:

- ✓ Office-specific characteristics- **Table 3** provides an overview of the data to be collected for each office. An example of a variable in this data set is a categorical variable of the number of FTE physicians in the office.
- **Data Set #3:** Information about the 56 pediatric providers. This data set will include the provider and office level ID codes that will allow the CAHMI team to link Data Set #3 with Data Sets #1 and #2.

This is a **provider-level database**. It includes the following information:

- ✓ Provider-specific characteristics- **Table 4** provides an overview of the data to be collected for each office. An example of a variable in this data set is a variable showing the clinical FTE for the specific provider.

## Part 1: Data Set #1 (Child-Level Data Base)

Table 1 and Table 2 describe the key data file elements to be included in this database.

**Table 1: Data file elements related child-specific general and enrollment information**

Variable	Description of Variable	Response Code
<b>Study ID</b>	Study unique identifier	
<b>GENDER</b>	Gender of the child	1=Male 2=Female
<b>CHDAGE</b>	Child's age in months, at the time the survey will be mailed out.	Variable between 3 and 40.99 months.
<b>CHDAGEC</b>	Child's age in months, at the time the survey will be mailed out. Categorical variable.	1=3 – 9 months; 2=10 – 18 months; 3= 19-35 months 4=36– 40.99 months 5= 41-45.99 months
<b>langcat</b>	Language spoken at home or on record for the child. Not a reliable code for language. Often entered in when a patient actively request transcription services.	Two digit code. Weiming will provide a dictionary for the response codes.
<b>payor</b>	Type of insurance the child has	1= Private 2= Public (Medicaid or SCHIP)
<b>mocont</b>	Number of months the child has been continuously enrolled with KPNW.	Count variable.
<b>moconto</b>	Number of months the child has been continuously enrolled with the office the child is currently enrolled in.	Count variable.
<b>mocontp</b>	Number of months the child has been continuously enrolled with the provider the child is currently enrolled in.	Count variable.
<b>offenroll</b>	The number of offices the child has been enrolled with in the last 12 month or since the child was born. (Office enrollment will be based on the provider the child is enrolled with)	1= 1 office 2= 2 offices 3= 3 offices 4= 4 or more offices
<b>provenroll</b>	The number of providers the child has been enrolled with in the last 12 month or since the child was born.	1= 1 provider 2= 2 providers 3= 3 providers 4= 4 or more providers
<b>office</b>	Office the child is current enrolled with. (Office enrollment will be based on the provider the child is enrolled with)	Numeric value. Office specific codes values. Weiming will provide definitions for each response code.
<b>Provider_ce</b>	Provider the child is current enrolled with.	Blinded provider codes. Numeric value. (e.g. Provider A, Provider B). The provider code that indicates an office-level provider allocation will end with i.
<b>provfte_tot</b>	The FTE of the provider the child is currently enrolled. Total FTE	Number.
<b>provfte_clin</b>	The FTE of the provider the child is currently enrolled. Clinical FTE ONLY	Number.
<b>Office_l</b>	Office the child has been enrolled with for the longest time over the last 12 months. (Office enrollment will be based on the provider the child is enrolled with)	Numeric value. Office specific codes values. Weiming will provide definitions for each response code.
<b>provider_cel</b>	Provider to which the child has been enrolled with for the longest time over the last 12 months.	Blinded provider codes. Numeric value. (e.g. Provider A, Provider B). The provider code that indicates an office-level provider allocation will end with i.
<b>Provcelfte_tot</b>	The FTE of the provider the child has been enrolled with for the longest time. Total FTE	Number.
<b>Provcelfte_clin</b>	The FTE of the p the child has been enrolled with for the longest time. Clinical FTE ONLY	Number.
<b>Age_samp</b>	Age group the child was assigned to at the time of sampling	1. 3-7.99 months 2. 10-16.99 months 3. 19-40.99 months 4. 41-46 months old (2 <sup>nd</sup> sample only)
<b>office_bn</b>	Whether the child is enrolled in an office in the ten pediatric offices of focus.	1= Child is enrolled in the ten pediatric offices

		2= child is enrolled in a office that is outside the ten pediatric office
prov_bn	Whether the child is enrolled in with a provider who located in an office in the ten pediatric offices of focus.	1= Child is enrolled with a provider located in the ten pediatric offices 2= Child is enrolled with a provider located in an office that is outside the ten pediatric offices
prov_p_o	Whether the child is enrolled with a pediatric department provider	1= Child is enrolled with a pediatric provider located in the ten pediatric offices 2= Child is enrolled in a pediatric provider that is outside the ten pediatric offices 3= Child is enrolled with a non-pediatrics provider

**Table 2: Data file elements related child-specific health care utilization**

Variable	Description of Variable	Response Code
<b>Study ID</b>	Study unique identifier	
WVISITCNT	Number of well-child visits in the last 12 months. A well-visit will be defined using the National Committee for Quality Assurance's (NCQA) definition of a well-child visit.	Numeric value – total of numbers in well-child visits for each child
SVISITCNT	Number of problem visits in the last year. These are all outpatient visits that are not well-child care. Emergency room, urgent care, and hospital care is NOT included in this variable. Note to Weiming – Send Colleen a frequency output of the non-well child visits that are represented and the proportion of the visits that each type of visit represents.	Numeric value – total of numbers in SICKVISITS for each child
TWC_LAST	Months (at the time of sampling) since the child's last well-child visit.	Numeric value between 0-12.
REFERCNT	Total number of referrals to a non-primary care provider.	Numeric value – Total number of referrals to a non-primary care provider.
ERVISIT	Number of emergency room visits including urgent care visit.	1. 0 er visits 2. 1 er /urgent care visits 3. 2 er /urgent care visits 4. 3 or more er /urgent care Visits
HOSPVIS	Number of overnight hospital stays the child had.	1. 0 overnight hospital stays 2. 1 overnight hospital stay 3. 2 overnight hospital stays 4. 3 or more overnight hospital stays
offwcv	The number of offices the child received well-child care from the last 12 months..	1= 1 office 2= 2 offices 3= 3 offices 4= 4 or more offices
offanyvis	The number of offices the child received any kind of visit the last 12 months.	1= 1 office 2= 2 offices 3= 3 offices 4= 4 or more offices
provwcv	The number of providers the child received well-child care from the last 12 months.	1= 1 provider 2= 2 providers 3= 3 providers 4= 4 or more providers
Office_WC	Offices the child has received well-child care from the last 12 months. IF there multiple offices then create office_wc_1, office_wc_2, etc.	Numeric value. Office specific codes values. Weiming will provide definitions for each response code.
Prov_WC	Providers the child has received well-child care from the last 12 months. IF there multiple offices then create prov_wc_1, prov_wc_2, etc.	Blinded provider codes. Numeric value. (e.g. Provider A, Provider B). The provider code that indicates an office-level provider allocation will end with i.
Office_MWC	Office the child received a majority of their well-child care in the last 12 months.	Numeric value. Office specific codes values. Weiming will provide definitions for each response code.
Prov_MWC	Provider the child received a majority of their well-child care in the last 12 months	Blinded provider codes. Numeric value. (e.g. Provider A, Provider

		B). The provider code that indicates an office-level provider allocation will end with i.
<b>Prvfte_wc</b>	The FTE of the provider the child received the most well-child care from. Total FTE.	Number
<b>Prvfte_wc_clin</b>	The FTE of the provider the child received the most well-child care from. Clinical FTE	Number
<b>Office_any</b>	Office the child received any kind of care from. IF there multiple offices then create office_any_1, office_any_2, etc.	1= Office A 2= Office B 3= Office C 4= Office D 5= Office E 6= Office F 7= Office G 8= Office H 9= Office I 10= Office J
<b>Provider_any</b>	Provider s to which the child has received any type of care..	Blinded provider codes. Numeric value. (e.g. Provider A, Provider B)
<b>Office_samp</b>	Office the child was assigned to at the time of sampling	Blinded office codes. Numeric value. (e.g. Provider A, Provider B)

## Part 2: Data Set #2 (Office-Level Data Base)

For each ten pediatric offices the following data elements should be provided.

**Table 3: Data file elements related office-specific information**

<b>Office ID</b>	Office ID	
<b>Office_prov</b>	Number of providers in the office	Number
<b>OfficeAfte_T</b>	Number of FTE in Office A. Total FTEI	number
<b>OfficeApte_C</b>	Number of FTE in Office A. – CLINICAL FTE	Number

## Part 3: Data Set #3 (Provider-Level Data Base)

For each of the 56 participating pediatric providers the following data elements should be provided.

**Table 4: Data file elements related provider-specific information**

<b>Provider ID</b>	Office ID	
<b>FTE_TOTAL</b>	Total FTE	Number
<b>FTE_CLINICAL</b>	Clinical FTE	number
<b>OfficeID</b>	Offices the provider works in. If multiple do Office_1, Office_2, Office 3 where 1 is the office they work in the majority of the child.	Number
<b>Prov_Degree</b>	Type of health care provider	MD MD-resident NP PA etc.
<b>Prov_spec</b>	Specialty of the provider.	2 character code
<b>Prov_sex</b>	Gender of the provider.	F Female M Male
<b>prov_agec</b>	Age of the provider in years at the time the survey was mailed (October 27 <sup>th</sup> )`	Number in years