



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



MEPS-HC Prescribed Medicines (PMED) File

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PMED File Structure



- Each record represents a unique instance of prescribed medicine acquisition (fill or refill) and the characteristics of the drug.
- File includes medicines prescribed, obtained, and reported.
- The file incorporates data collected in the Household and Pharmacy Components (a subcomponent of the Medical Provider Component).

Household Component (HC)

- **Medicine name**
- **Number of times acquired in the round**
- **Associated condition(s)**
- **Date first used**
- **Pharmacy information**

Pharmacy Component (PC)

- Requires written permission from household members
- Involves telephone/mail/email contact with the pharmacy
- Asks for “patient profile” to include:
 - Drug name
 - National Drug Code (NDC) number
 - Drug characteristics
 - Payers and amounts of payment

Editing HC and PC Data

- **Household Component: Number of fills**
- **Pharmacy Component**
 - **Missing NDC number**
 - **Missing third-party payer (based on HC)**
 - **Missing or unrealistically low or high prices**
 - **Missing payments**

Combining HC and PC

- No common identifier is shared by HC and PC.
- A code (Generic Product Identifier, or GPI) is assigned to each HC and PC drug to facilitate matching.
 - Machine (70%) and human coders (30%) for HC
 - NDC (95%) and human coders (5%) for PC
- Post-match editing is performed.
- Utilization is based on household data.
- Payments are based almost entirely on pharmacy data.

Drug Characteristics (PC)

Characteristics included for each acquisition:

- Medication name
- NDC number
- Quantity dispensed (10, 30, 50, . . .)
- Form (capsule, tablet, liquid, cream, . . .)
- Strength (10, 200, . . .)
- Unit of measurement for form (ounces, . . .)
- Unit of measurement for strength (mg, mL, . . .)

Other Variables

Additional information included for each acquisition

- Round
- When the drug was first taken
- Pharmacy type(s)
- Condition(s) associated with the drug (by linking with the medical conditions file)
- Days supplied (since 2010)
- Sources and amounts of payment
- Total payment

Multum Lexicon Variables

- Each record has two types of Multum Lexicon variables:
 - TCn (therapeutic class: 1, 2, and 3)
 - TCnSn (therapeutic sub-class)
 - TCnSn_n (therapeutic sub-sub-class)
 - RXDRGNAM (beginning in 2013)
- Drugs can have multiple therapeutic classes if they are combinations of active ingredients.
- For 2013 and earlier, RXDRGNAM and TC variables can be found as an addendum file at the MEPS website (MEPS HC-068).

Record Identifier Variables

- **RXRECIDX** – Unique identifier for each record in the file
- **LINKIDX** – Drug-round-level ID that can be used to link a prescribed medicine event to the Medical Conditions Files
- **DRUGIDX/RXNDC** – Drug-level IDs

DUPERSID	DRUGIDX	PURCHRD	LINKIDX	RXRECIDX
2710001101	2710001101002	1	2710001101002103	2710001101002103001
2710001101	2710001101002	1	2710001101002103	2710001101002103002
2710001101	2710001101002	2	2710001101002203	2710001101002203001

How to Link PMED File With Medical Condition Files

- What's New
- Mailing List
- Discussion Forum
- Participants' Corner

- ☐ [Household Component Full-Year files](#) ⓘ
Expenditure and utilization data for the calendar year from several rounds of data collection.
 - ☐ [Full-Year Consolidated Data files](#)
 - ☐ [Full-Year Population Characteristics files](#)
 - ☐ [Medical Conditions files](#)
 - ☐ [Risk Adjustment Scores files](#)
 - ☐ [Employment Variables file](#)
 - ☐ [Jobs files](#)
 - ☐ [Person Round Plan files](#)
 - ☐ [Longitudinal Data files](#)
 - ☐ [Supplemental Variables files \(1996-2000\)](#)
 - ☐ [Health Insurance Plan Abstraction file \(1996\)](#)
 - ☐ [Long Term Care file \(1998\)](#)
- ☐ [Household Component Event files](#) ⓘ
Data for the calendar year on unique household-reported medical events.
 - ☐ [Prescribed Medicines files](#)
 - ☐ [Dental Visits files](#)
 - ☐ [Other Medical Expenses files](#)
 - ☐ [Hospital Inpatient Stays files](#)
 - ☐ [Emergency Room Visits files](#)
 - ☐ [Outpatient Visits files](#)
 - ☐ [Office-Based Medical Provider Visits files](#)
 - ☐ [Home Health files](#)
 - ☐ [Appendix to MEPS Event files](#)

PMED Files

Condition-event link file (CLINK)

Linking PMED File to Medical Conditions File

PMED File

DUPERSID	DRUGIDX	PURCHR	LINKIDX	RXRECIDX
2710001101	2710001101002	1	2710001101002103	2710001101002103001
2710001101	2710001101002	1	2710001101002103	2710001101002103002
2710001101	2710001101002	2	2710001101002203	2710001101002203001

CLINK File

DUPERSID	CONDIDX	EVNTIDX	EVENTYPE
2710001101	2710001101001	2710001101002103	8
2710001101	2710001101001	2710001101002203	8
2710001101	2710001101002	2710001101200501	1

Medical Conditions File

DUPERSID	CONDIDX	ICD10CDX
2710001101	2710001101001	E11
2710001101	2710001101002	I10

- In Condition link file, EVNTIDX are the same as LINKIDX for PMED events (EVENTYPE=8)
 - Merge the link file with PMED file using the LINKIDX variable, after renaming EVNTIDX as LINKIDX in the link file.
 - Merge with the Medical Conditions file using the CONDIDX variable.

PMED File Peculiarities

- Different meanings of imputation flags
 - RXFLG
 - PCIMPFLG
 - IMPFLAG
 - INPCFLG

- No total charge variable
 - ▶ No rebate or discount information

- No date of service

Trend Analysis

- Beginning in 1996, the PMED file has been released annually.
- How to interpret year-to-year changes in utilization and expenditures?
 - Policy change
 - Other changes (e.g., demographics)
 - Improvements in MEPS PMED data editing methodology (2007–2008, 2017, 2020)
 - MEPS instrument design change (since spring of 2018)

Trend Analysis (Continued)



- **Be cautious with the types of comparisons you make before and after 2007/2008, 2017/2018, or 2020.**
- **Read the documentation for each year of data you are using.**
- **Read the latest Methodology Report #37**
(https://meps.ahrq.gov/data_files/publications/mr37/mr37.shtml).

Statistical Reports and Applied Research



AHRQ regularly produces and posts findings from the PMED data.

- Statistical Briefs

Wu X, Moriya AS, and Miller GE. *Average Annual Total Expenses, Total Utilization, and Sources of Payment for Outpatient Prescription Opioids in the U.S. Adult Civilian Noninstitutionalized Population, 2021-2022*. Statistical Brief #559. February 2025. Agency for Healthcare Research and Quality, Rockville, MD. https://meps.ahrq.gov/data_files/publications/st559/stat559.shtml

Ahrnsbrak R and Stagnitti MN. *Average Expenditures per Prescription Antidepressant Fill in the U.S. Civilian Noninstitutionalized Population by Select Sociodemographic Characteristics, 2013 and 2018*. Statistical Brief #538. November 2021. Agency for Healthcare Research and Quality, Rockville, MD. https://meps.ahrq.gov/data_files/publications/st538/stat538.shtml

- Methodology Reports

Abdus S, Hill SC, Ahrnsbrak R. "Outpatient Prescription Drugs: Data Collection and Editing in the 2021 Medical Expenditure Panel Survey". Methodology Report #37. January 2024. Agency for Healthcare Research and Quality, Rockville, MD. https://meps.ahrq.gov/data_files/publications/mr37/mr37.shtml

- Research Findings

Bernard D, Machlin SR, Fang Z, and Cohen J. *Average Annual Opioid Use among Adults Treated for Conditions Associated with Chronic Pain versus Other Conditions, 2013-2015*. Research Finding #43. August 2019. Agency for Healthcare Research and Quality, Rockville, MD. https://meps.ahrq.gov/data_files/publications/rf43/rf43.shtml

Thank you!



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