

MEPS – HC Medical Conditions Data

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MEPS-HC CAPI Medical Condition Data Collection



- **☐** Priority Condition Enumeration
 - 15 specific condition questions
- Sections with Open-Ended Reporting
 - Condition Enumeration
 - Medical Events
 - Disability Days
 - > 1996-2012 (discontinued in 2013)

Priority Condition Enumeration (PE) Section



- ☐ 15 priority conditions determined by
- Prevalence
- Expenditures
- Policy relevance
- **Questions:**
- "Ever been told by health professional" they had the condition (13 of the 15 conditions)
 - age at first diagnosis collected
- During past 12 months (2 of the 15 conditions)

Priority Conditions: Ever told by health professional (18+)



- Hypertension/High Blood Pressure (HIBPDX)
- Coronary Heart Disease (CHDDX)
- Angina (ANGIDX)
- Heart Attack/Myocardial Infarction (MIDX)
- Other Heart Disease (OHRTDX)
- Stroke/Transient Ischemic Attack (STRKDX)
- Emphysema (EMPHDX)
- High cholesterol (CHOLDX)
- Cancer/Malignancy (CANCERDX)
- Diabetes (DIABDX)
- Arthritis (ARTHDX)
- Asthma (ASTHDX)- All ages
- Attention Deficit Hyperactivity Disorder (ADHDADDX) ages 5-17

Priority Conditions: During past 12 months



- **Chronic Bronchitis**
- □ (CHBRON31, CHBRON53)

- Joint pain/aching/stiffness/swelling
- □ (JTPAIN31, JTPAIN53)

Open-Ended Reporting of Conditions



- Condition could be reported in all or some of these sections and in one or more rounds:
- Condition Enumeration
- Medical Events
- Questions for Condition Enumeration:
- Between (START DATE) and (END DATE), did (PERSON) have any physical or mental health problems, accidents, or injuries?
- What did (PERSON) have?

Medical Event Sections



- **☐** Event types
- Hospital Inpatient
- Hospital Outpatient
- Emergency Room
- Office Based
- Home Health
- Prescribed Medicine purchases
- **☐** Condition question asked:
- All event types except prescribed medicines: What conditions were discovered or led person to make this visit?
- Prescribed medicine purchases: What health problem is medicine prescribed for?

Condition Coding and Editing



■ Verbatim text recorded and coded to fully specified ICD-9 CM codes some text not clear or easily coded ☐ Collapsed to 3 digits in public files to maintain confidentiality LICD-9 codes are used in the 1996-2015 files MEPS switched to ICD-10 codes for the 2016 data year

Condition Variables on Healthcare Event Files



- ☐ ICD9 (1996-2012) and CCC (through 2015) variables for conditions included on many event files
- Up to 3 condition variables for most event types (4 for inpatient file)
- No condition data on dental, home health or other medical event files
- Most events associated with only 1 condition
- No official "primary" condition if >1
- ☐ Can link to condition files to identify:
- Additional conditions associated with events (beyond 3 or 4)
- Conditions associated with Home Health events

Medical Conditions File



- **□** Each record represents unique person/condition
- Condition Codes
- 3-digit ICD9 (ICD9CODX)
- Clinical Classification Codes (CCCODEX)
 - ICD-9 codes aggregated into broad clinically meaningful categories
 - Crosswalk included in documentation
- Priority condition question data <u>not</u> part of MEPS Medical Condition File

Medical Conditions File: Procedure Data



- Procedures (ICD9PROX) not systematically collected
- only obtained if mentioned by respondent in medical events section(s)
- verbatim text recorded and coded to fully specified 4 digit ICD 9 CM codes
- collapsed to 2 digit codes on file
- Limited analytic utility

Medical Conditions File: Linking to Event Files



CONDIDX (12 digit condition-level ID) Digits 1-8: DUPERSID Digits 9-12: Condition ID Merge with CLNK file (by CONDIDX) to get event ID (EVNTIDX) Link merged data to different event file types (by **EVNTIDX)** PMED linkage different (RXLINK) A condition can link to >1 event and an event can link to >1 condition

Medical Conditions File: Event Count Variables



- Indicates total number of medical events that can be linked to the condition record
- Home Health (HHNUM)
- Inpatient stays (IPNUM)
- Hospital outpatient (OPNUM)
- Office-based (OBNUM)
- Emergency room (ERNUM)
- Prescribed medicine purchases (RXNUM)
- ☐ Can link conditions to specific events

Medical Conditions Data: Limitations/Caveats



- Household-reported
- one respondent usually providing information for all family members
- more salient conditions tend to be better reported
- Many recorded text strings not easily
- classifiable into ICD-9 codes
- Procedures not systematically collected; limited in analytic utility

National Estimates of Condition Prevalence



- ☐ Factors affecting condition underreporting:
- respondent not aware
- not salient or bothersome
- no medical care received
- ☐ MEPS most appropriate for "treated prevalence" (i.e. linked to events)
- most conditions reported in medical events section

Condition Data References



- □ Public Use File documentation
 □ Report titled "Understanding and Analyzing

 MEPS Household Component Medical

 Condition Data"
- http://meps.ahrq.gov/mepsweb/survey_comp/MEPS
 _condition_data.pdf