

MCC-1  
 NHIS CALENDAR YEAR 1970  
 Public Use File  
 MEDICAL CARE COST RECORD (Record Type -)  
 Number of Records - 23,690

File Location	Var. Name Quest. No.	Title and Code
1	<b>SAMPLER</b> HH-4	<b>SAMPLE - RECODE OF CENSUS CODE</b> 1. B56 (weeks 01 & 02) 4. B55 (weeks 01-13)
2	<b>YEARINT</b>	<b>YEAR OF COLLECTION OF DATA</b> (Original sample) 0. 1970 1. 1971
3-5	<b>PSURANDR</b> HH-1	<b>PSU - RANDOM RECODE</b>
6-7	<b>WEEKCEN</b> HH-2a	<b>WEEK - CENSUS CODE</b> 21, 41, 61, 81. Week 01, 1971 22, 42, 62, 82. Week 02, 1971 23, 43, 63, 83. Week 03, 1970 24, 44, 64, 84. Week 04, 1970 25, 45, 65, 85. Week 05, 1970 26, 46, 66, 86. Week 06, 1970 27, 47, 67, 87. Week 07, 1970 28, 48, 68, 88. Week 08, 1970 29, 49, 69, 89. Week 09, 1970 30, 50, 70, 90. Week 10, 1970 31, 51, 71, 91. Week 11, 1970 32, 52, 72, 92. Week 12, 1970 33, 53, 73, 93. Week 13, 1970
8-9	<b>SEGMENT</b> HH-2a	<b>SEGMENT NUMBER</b> Week plus Segment Number identifies the segment
10-11	<b>HHID</b> HH-3	<b>HOUSEHOLD NUMBER</b> Numbered within PSU-Week-Segment
12-13	<b>PERNUM</b>	<b>PERSON NUMBER *</b>
14	<b>RECTYPE</b>	<b>RECORD TYPE</b> -. Medical Care Cost Record
15	<b>FAMREC1</b> Recode	<b>FIRST FAMILY RECORD</b> 1. Yes 2. No

\* Not assigned consistently with person number in other 1970 NHIS files. Can not be used to match to other 1970 NHIS files.

16	<b>COMFTYPE</b> Recode	<b>COMPLETED FAMILY TYPE</b> 1. Mail 2. Personal Interview																																																
17	<b>BLANK</b>	<b>BLANK</b>																																																
18	<b>HHREC</b> Recode	<b>HOUSEHOLD RECORD</b> 1. Yes 2. No																																																
19	<b>COMHTYPE</b> Recode	<b>COMPLETED HOUSEHOLD TYPE</b> 1. Mail 2. Personal Interview																																																
20	<b>BLANK</b>	<b>BLANK</b>																																																
21-22	<b>FAMTYPE</b> Recode	<b>FAMILY TYPE</b> 00. Primary family 01-09. Secondary families 10. Unrelated individual, living with nonrelatives 11. Unrelated individual, living alone																																																
23-27	<b>BLANK</b>	<b>BLANK</b>																																																
28	<b>PSUR</b>	<b>PSU RECODE</b> 0. The 22 Large Self-representing SMSA's 1. SMSA - Self-representing 3. SMSA - Nonselself-representing 4. Non-SMSA - Self-representing 6. Non-SMSA - Nonselself-representing																																																
29	<b>REGION</b> RC Record	<b>REGION</b> 1. Northeast (includes Sections 1 and 2) 2. North Central (includes Sections 3, 4 and 5) 3. South (includes Sections 6, 7, 8 and 9) 4. West (includes Sections 10 and 11)																																																
30-31	<b>LSRSMSA</b> RC Recode	<b>TABULATION AREA</b> blbl. Non-self-representing sections and self-representing SMSA's other than 34-55 <u>Large Self-representing SMSA's</u> <table border="0"> <thead> <tr> <th><u>Recode</u></th> <th><u>SMSA</u></th> <th><u>Recode</u></th> <th><u>SMSA</u></th> </tr> </thead> <tbody> <tr> <td>34.</td> <td>Boston</td> <td>45.</td> <td>Buffalo</td> </tr> <tr> <td>35.</td> <td>New York *</td> <td>46.</td> <td>Cleveland</td> </tr> <tr> <td>36.</td> <td>Philadelphia</td> <td>47.</td> <td>Minneapolis-St.Paul</td> </tr> <tr> <td>37.</td> <td>Pittsburgh</td> <td>48.</td> <td>Milwaukee</td> </tr> <tr> <td>38.</td> <td>Detroit</td> <td>49.</td> <td>Kansas City</td> </tr> <tr> <td>39.</td> <td>Chicago **</td> <td>50.</td> <td>St. Louis</td> </tr> <tr> <td>40.</td> <td>Cincinnati</td> <td>51.</td> <td>Houston</td> </tr> <tr> <td>41.</td> <td>Los Angeles-Long Beach</td> <td>52.</td> <td>Dallas</td> </tr> <tr> <td>42.</td> <td>San Francisco-Oakland</td> <td>53.</td> <td>Washington, D.C.</td> </tr> <tr> <td>43.</td> <td>Baltimore</td> <td>54.</td> <td>Seattle-Everett</td> </tr> <tr> <td>44.</td> <td>Atlanta</td> <td>55.</td> <td>San Diego</td> </tr> </tbody> </table>	<u>Recode</u>	<u>SMSA</u>	<u>Recode</u>	<u>SMSA</u>	34.	Boston	45.	Buffalo	35.	New York *	46.	Cleveland	36.	Philadelphia	47.	Minneapolis-St.Paul	37.	Pittsburgh	48.	Milwaukee	38.	Detroit	49.	Kansas City	39.	Chicago **	50.	St. Louis	40.	Cincinnati	51.	Houston	41.	Los Angeles-Long Beach	52.	Dallas	42.	San Francisco-Oakland	53.	Washington, D.C.	43.	Baltimore	54.	Seattle-Everett	44.	Atlanta	55.	San Diego
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\* Northeastern New Jersey Consolidated Area

\*\* Northwestern Indiana Consolidated Area

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32	<b>BLANK</b>	<b>BLANK</b>
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33	<b>SMSA2</b>	<b>GEOGRAPHIC IDENTIFICATION</b> 1. In SMSA, in Central City of SMSA 2. In SMSA, not in Central City of SMSA 4. Not in SMSA
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34	<b>VERSION</b> Recode	<b>QUESTIONNAIRE VERSION</b> 0. A 1. A Subsample 2. B Subsample 3. C Subsample 4. D Subsample 5. Personal interview - Version B on A 6. Personal interview - Version C on A 7. Personal interview - Version D on A
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35	<b>QUARTER</b> Recode	<b>PROCESSING QUARTER</b> 4. B55 (Weeks 03-13); B56 (Weeks 01, 02)
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36	<b>YEAR</b> Recode	<b>PROCESSING YEAR</b> 0. 1970
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37-38	<b>WEEKPROC</b> Recode	<b>PROCESSING WEEK CODE</b> 01. 23, 43, 63, 83 - 1970 02. 24, 44, 64, 84 - 1970 03. 25, 45, 65, 85 - 1970 04. 26, 46, 66, 86 - 1970 05. 27, 47, 67, 87 - 1970 06. 28, 48, 68, 88 - 1970 07. 29, 49, 69, 89 - 1970 08. 30, 50, 70, 90 - 1970 09. 31, 51, 71, 91 - 1970 10. 32, 52, 72, 92 - 1970 11. 33, 53, 73, 93 - 1970 12. 21, 41, 61, 81 - 1971 13. 22, 41, 62, 82 - 1971
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39-42	<b>BLANK</b>	<b>BLANK</b>
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43	<b>RESPCODE</b> Item 4	<b>RESPONDENT</b> 1. Self 2. Proxy 3. Unknown
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44	<b>RESPOND</b> Recode	<b>RESPONDENT - PROXY DETAILED FOR KNOWN REPENDENT</b> 1. Self 2. Spouse 3. Parent 4. Other family member (child, grandparent) 5. Other relatives 6. Other person 7. Unknown respondent
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45	<b>ISOURCE</b> Item 7	<b>INFORMATION SOURCE</b> 1. Referred to records for all amounts 2. Referred to records for some amounts 3. Did not refer to records 4. Unknown
46-47	<b>EDUCFH</b> Recode	<b>EDUCATION OF FAMILY HEAD OR UNRELATED INDIVIDUAL</b> 01. Under 17 years of age 02. None 03. 1-4 years completed 04. 5-7 years completed 05. 8 years completed 06. 9-11 years completed 07. 12 years completed (high school graduate) 08. 13-14 years completed 09. 15 years completed 10. 16 years completed (college graduate) 11. 17+ years completed (graduate school) 12. Unknown
48	<b>EDUCFHR</b> Recode	<b>EDUCATION OF HEAD - RECODE</b> 1. Under 17 years of age 2. None 3. 01-08 (elementary) 4. 09-11 (high school) 5. 12 (high school graduate) 6. 13-15 (college) 7. 16+ (college graduate +) 8. Unknown
49	<b>INCOMER</b> Item 3	<b>FAMILY INCOME RECODE</b> 1. Under \$3,000 2. \$3,000-4,999 3. 5,000-6,999 4. 7,000-9,999 5. 10,000-14,999 6. 15,000-24,999 7. 25,000+ 8. Unknown
50	<b>RACE</b>	<b>RACE</b> 1. White 2. Negro 3. Other
51	<b>RACER</b> Recode	<b>RACE RECODE</b> 1. White 2. Other race
52	<b>SEX</b> Item A	<b>SEX</b> 1. Male 2. Female
53-54	<b>AGE</b> Item A	<b>AGE</b> 00. Under 1 year 01-98. Single years 99. 99+ years

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55-56	<b>AGER1</b> Recode	<b>AGE RECODE #1</b> 01. 00-04 years 02. 05-14 03. 15-24 04. 25-34 05. 35-44 06. 45-54 07. 55-64 08. 65-74 09. 75+
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57-58	<b>AGER2</b> Recode	<b>AGE RECODE #2</b> 01. Under 6 years 02. 06-16 years 03. 17-24 years 04. 25-34 years 05. 35-44 years 06. 45-54 years 07. 55-64 years 08. 65-74 years 09. 75+ years
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59	<b>AGER3</b> Recode	<b>AGE RECODE #3</b> 1. Under 15 years 2. 15-44 years 3. 45-64 years 4. 65+ years
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60	<b>FAMREL</b> Item A	<b>FAMILY RELATIONSHIP</b> 0. Unrelated individual living alone 1. Head of family 2. Spouse of head 3. Child of head (or spouse) 4. Grand child of head (or spouse) 5. Parent of head (or spouse) 6. Other relative of head (or spouse) 7. Unrelated individuals living with nonrelatives
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61-62	<b>FAMNUM</b> Generated	<b>NUMBER OF FAMILY MEMBERS</b>
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63-65	<b>FAMTYP1R</b> Recode	<b>FAMILY TYPE RECODE 1</b>
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63	<b>FAMSIZE1</b>	<b>SIZE OF THE FAMILY RECODE 1</b> 1-5. 1-5 persons 6. 6+ persons
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64	<b>FAMCHAR1</b>	<b>FAMILY CHARACTERISTICS RECODE 1</b> 1. Living alone (if chr.63=1), or husband and wife with child 00-16 (if chr.63 NE 1) 2. Living with nonrelatives (if chr.63=1), or husband and wife (if chr.63=2), or husband and wife with no child 00-16 (if chr.63 NE 1,2) 3. Other family group
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65	<b>AGEHEAD1</b>	<b>AGE OF HEAD OF FAMILY RECODE 1</b> 1. Under 45 2. 45-64 3. 65+
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66-68	<b>FAMTYP2R</b>	<b>FAMILY TYPE RECODE 2</b>
	Recode	
66	<b>FAMSIZE2</b>	<b>SIZE OF THE FAMILY RECODE 2</b>
		1-5. 1-5 persons
		6. 6+ persons
67	<b>FAMCHAR2</b>	<b>FAMILY CHARACTERISTICS RECODE 2</b>
		1. Living alone (if chr.66=1),or husband and wife with child 00-21 (if chr.66 NE 1)
		2. Living with nonrelatives (if chr.66=1),or husband and wife (if chr.66=2),or husband and wife with no child 00-21 (if chr.66 NE 1,2)
		3. Other family group
68	<b>AGEHEAD2</b>	<b>AGE OF HEAD OF FAMILY RECODE 2</b>
		1. Under 45
		2. 45-64
		3. 65+

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69-146	P. Item 1-6	<b>PERSONAL EXPENSES</b>
69-72	<b>PDTLBILL</b>	<b>DENTAL BILLS DETAILED</b>
	P.Item 1	0000. None
		0001-9997. Dollars
		9998. 9998+ dollars
		9999. Unknown
73	<b>PDBINTVL</b>	<b>DENTAL BILL INTERVAL</b>
	Recode	1. None
		2. \$ 1 - 24
		3. \$ 25 - 49
		4. \$ 50 - 99
		5. \$100 - 149
		6. \$150 - 199
		7. \$200 - 249
		8. \$250 - 499
		9. \$500+
		B1. Unknown
74-77	<b>PDRBILL</b>	<b>DOCTOR BILLS DETAILED</b>
	P.Item 2	0000. None
		0001-9997. Dollars
		9998. 9998+ dollars
		9999. Unknown
78	<b>PDRINTVL</b>	<b>DOCTOR BILL INTERVAL</b>
	Recode	1. None
		2. \$ 1 - 24
		3. \$ 25 - 49
		4. \$ 50 - 99
		5. \$100 - 149
		6. \$150 - 199
		7. \$200 - 249
		8. \$250 - 499
		9. \$500+
		B1. Unknown
79-82	<b>PHPBILL</b>	<b>HOSPITAL BILLS DETAILED</b>
	P.Item 3	0000. None
		0001-9997. Dollars
		9998. 9998+ dollars
		9999. Unknown

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69-146		<b>PERSONAL EXPENSES (continued)</b>
83	<b>PHPINTVL</b> Recode	<b>HOSPITAL BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
84-86	<b>PRXBILL</b> P.Item 4	<b>PRESCRIBED MEDICINE DETAILED</b> 000. None 001-997. Dollars 998. 9998+ dollars 999. Unknown
87	<b>PRXINTVL</b> Recode	<b>PRESCRIBED MEDICINE INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
88-90	<b>POPBILL</b> P.Item 5	<b>OPTICAL BILLS DETAILED</b> 000. None 001-997. Dollars 998. 998+ dollars 999. Unknown
91	<b>POPINTVL</b> Recode	<b>OPTICAL BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
92-95	<b>OTBILL</b> P.Item 6	<b>OTHER MEDICAL EXPENSES DETAILED</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown

69-146		<b>PERSONAL EXPENSES</b> (continued)
96	<b>OTINTRVL</b> Recode	<b>OTHER MEDICAL EXPENSES INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
97	<b>PEXCODE</b> Recode	<b>TOTAL PERSONAL EXPENSES RESPONSE TYPE - WITHOUT HEALTH INSURANCE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
98-102	<b>PEXTOTAL</b> Generated	<b>TOTAL PERSONAL EXPENSES DETAILED - WITHOUT HEALTH INSURANCE</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown (chr.97=bl)
103	<b>PEXINTVL</b> Recode	<b>TOTAL PERSONAL EXPENSES INTERVAL - WITHOUT HEALTH INSURANCE</b> 0. None 1. \$ 1 - 24 2. \$ 25 - 49 3. \$ 50 - 99 4. \$100 - 149 5. \$150 - 199 6. \$200 - 249 7. \$250 - 499 8. \$500 - 999 9. \$1000+ Bl. Unknown
104-107	<b>PHIPREMM</b> Generated	<b>HEALTH INSURANCE PREMIUM PER FAMILY MEMBER</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
108	<b>PHIECODE</b> Recode	<b>TOTAL PERSONAL EXPENSES RESPONSE TYPE - WITH HEALTH INSURANCE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
109-113	<b>PHIETOTL</b> Generated	<b>TOTAL PERSONAL EXPENSES DETAILED - WITH HEALTH INSURANCE</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown (chr.108=bl)
114	<b>PHIEINTL</b> Recode	<b>TOTAL PERSONAL EXPENSES INTERVAL - WITH HEALTH INSURANCE</b> 0. None 1. \$ 1 - 24 2. \$ 25 - 49 3. \$ 50 - 99 4. \$100 - 149 5. \$150 - 199 6. \$200 - 249 7. \$250 - 499 8. \$500 - 999 9. \$1000+ Bl. Unknown



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69-146		<b>PERSONAL EXPENSES (continued)</b>
115-118	<b>PCHITOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - CHIROPRACTOR OR PODIATRIST</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
119-122	<b>PHADTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - HEARING AID</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
123-126	<b>PBRATOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - SPECIAL BRACES, TRUSSES, WHEELCHAIR OR ARTIFICIAL LIMBS</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
127-130	<b>PPHYTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - PHYSICAL OR SPEECH THERAPY</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
131-134	<b>PNURTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - SPECIAL NURSING/HOME CARE</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
135-138	<b>PHOMTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES-NURSING/CONVALESCENT HOME CARE</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
139-142	<b>PMULTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - OTHER AND MULTIPLE TYPE</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
143-146	<b>PUNKTOTL</b> P.Item 6	<b>OTHER PERSONAL MEDICAL EXPENSES - UNKNOWN TYPE</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown

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147-193                    **FAMILY EXPENSES (Inside)\***

147-150	<b>HIDETAILE</b> Item 1	<b>HEALTH INSURANCE DETAILED</b> 0000. None 0001-9997. Dollars 9998. 9998+ dollars 9999. Unknown
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\* "Inside" - Expenses for persons who are part of current family residing at sample address

<b>147-193</b>		<b>FAMILY EXPENSES (Inside)*</b> (continued)
<b>151</b>	<b>HIINTVL</b> Recode	<b>HEALTH INSURANCE INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
<b>152</b>	<b>FDTLCODE</b> Recode	<b>FAMILY DENTAL BILLS RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
<b>153-157</b>	<b>FDTLBILL</b> Generated	<b>FAMILY DENTAL BILLS DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
<b>158</b>	<b>FDBINTVL</b> Recode	<b>DENTAL BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
<b>159</b>	<b>FDRCODE</b> Recode	<b>DOCTOR BILLS RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
<b>160-164</b>	<b>FDRBILL</b> Generated	<b>DOCTOR BILLS DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
<b>165</b>	<b>FDRINTVL</b> Recode	<b>DOCTOR BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
<b>166</b>	<b>FHPCODE</b> Recode	<b>HOSPITAL BILLS RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses

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\* See note page 9.

147-193		<b>FAMILY EXPENSES (Inside)*</b> (continued)
167-171	<b>FHPBILL</b> Generated	<b>HOSPITAL BILLS DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
172	<b>FHPINTVL</b> Recode	<b>HOSPITAL BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
173	<b>FRXCODE</b> Recode	<b>PRESCRIBED MEDICINE RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
174-178	<b>FRXBILL</b> Generated	<b>PRESCRIBED MEDICINE DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
179	<b>FRXINTVL</b> Recode	<b>PRESCRIBED MEDICINE INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown
180	<b>FOPCODE</b> Recode	<b>OPTICAL BILLS RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
181-185	<b>FOPBILL</b> Generated	<b>OPTICAL BILLS DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
186	<b>FOPINTVL</b> Recode	<b>OPTICAL BILL INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown

\* See note page 9.

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<b>147-193</b>		<b>FAMILY EXPENSES (Inside)*</b> (continued)
<b>187</b>	<b>FOTCODE</b> Recode	<b>OTHER MEDICAL EXPENSES RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses
<b>188-192</b>	<b>FOTBILL</b> Generated	<b>OTHER MEDICAL EXPENSES DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown
<b>193</b>	<b>FOTINTVL</b> Recode	<b>OTHER MEDICAL EXPENSES INTERVAL</b> 1. None 2. \$ 1 - 24 3. \$ 25 - 49 4. \$ 50 - 99 5. \$100 - 149 6. \$150 - 199 7. \$200 - 249 8. \$250 - 499 9. \$500+ Bl. Unknown (chr.187=2)

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<b>194-243</b>		<b>FAMILY EXPENSES (Outside)*</b>
<b>194-197</b>	<b>FDTLTOT</b> Item 2	<b>DENTAL EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
<b>198-201</b>	<b>FDRTOT</b> Item 2	<b>DOCTOR EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
<b>202-205</b>	<b>FHPTOT</b> Item 2	<b>HOSPITAL EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
<b>206-209</b>	<b>FRXTOT</b> Item 2	<b>PRESCRIBED MEDICINE EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
<b>210-213</b>	<b>FOPTOT</b> Item 2	<b>OPTICAL EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)

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\* "Outside" - Expenses for persons who are not part of current family residing at sample Address

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194-243		<b>FAMILY EXPENSES (Outside)*</b> (continued)
214-217	<b>FHITOT</b> Item 2	<b>HEALTH INSURANCE EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
218-221	<b>FNURTOT</b> Item 2	<b>NURSING/CONVALESCENT HOME CARE EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
222-225	<b>FPHYTOT</b> Item 2	<b>PHYSICAL AND SPEECH THERAPY EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
226-229	<b>FOTTOT</b> Item 2	<b>OTHER EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
230-233	<b>FDKTOT</b> Item 2	<b>UNKNOWN TYPE EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
234-237	<b>FMULTOT</b> Item 2	<b>MULTIPLE EXPENSES OUTSIDE</b> 0000. None 0001-9997. Dollars 9998. 9998 dollars 9999. Unknown blblblbl. Unknown (chr.15=2)
238	<b>OFMCODE</b> Recode	<b>OUTSIDE FAMILY MEDICAL EXPENSES RESPONSE TYPE</b> 1. Known amounts for expenses 2. Unknown, blank for 1+ expenses bl. Unknown (chr.15=2)
239-243	<b>FOTBILL2</b> Generated	<b>OTHER MEDICAL EXPENSES DETAILED</b> 00000. None 00001-99999. Dollars blblblblbl. Unknown (chr.238=2 or chr.15=2)
244-247	<b>BLANK</b>	<b>BLANK</b>

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\* See note page 12.

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248	<b>SECR</b> Recode	<b>SEX OF HEAD RECODE</b> 1. Male 2. Female
249	<b>RACEHR</b> Recode	<b>RACE OF HEAD RECODE</b> 1. White 2. Other races
250-254	<b>WTBFAD</b>	<b>BASIC WEIGHT BEFORE ASC ADJUSTMENT (Family Weight)</b>
255-259	<b>WTAFAD</b>	<b>BASIC WEIGHT AFTER ASC ADJUSTMENT (Person Weight)</b>
260	<b>BLANK</b>	<b>BLANK</b>
261-269	<b>WTFI</b>	<b>BASIC WEIGHT BEFORE ASC ADJUSTMENT *</b>
270-278	<b>WTFQ</b>	<b>FINAL BASIC WEIGHT</b>

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\* Basic weight before ASC (Family Weight) \* 1.03931 and rounded to whole numbers.