

HI-1
 1986 HEALTH INSURANCE SUPPLEMENT
 PUBLIC USE FILE
 NUMBER OF RECORDS = 62,052

Tape Locations	Item No.	Frequency	Items and Codes
1-2	-		RECORD TYPE
		62,052	60. Health Insurance
3-4	-		PROCESSING YEAR
		62,052	86. 1986
5	-		PROCESSING QUARTER
		15,496	1. Quarter 1
		15,418	2. Quarter 2
		15,700	3. Quarter 3
		15,438	4. Quarter 4
6-8	HH-5		RANDOM RECODE OF PSU NUMBER
9-10	HH-5		WEEK - CENSUS CODE*
			01, 21, 41, 61, 81 ... Week 01
			02, 22, 42, 62, 82 ... Week 02
			03, 23, 43, 63, 83 ... Week 03
			04, 24, 44, 64, 84 ... Week 04
			05, 25, 45, 65, 85 ... Week 05
			06, 26, 46, 66, 86 ... Week 06
			07, 27, 47, 67, 87 ... Week 07
			08, 28, 48, 68, 88 ... Week 08
			09, 29, 49, 69, 89 ... Week 09
			10, 30, 50, 70, 90 ... Week 10
			11, 31, 51, 71, 91 ... Week 11
			12, 32, 52, 72, 92 ... Week 12
			13, 33, 53, 73, 93 ... Week 13

*This code represents the initial week of assignment. The interview may be re-assigned for administrative purposes. See locations 19-20 for the code which reflects the actual week assigned for conducting the interview. No interviews were conducted during weeks 01 and 02 of Quarter 1. The sample households for the two weeks were reassigned to weeks 03-13 of Quarter 1.

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Tape Locations	Item No.	Frequency	Items and Codes
11-12	HH-5		SEGMENT NUMBER Week plus Segment Number identifies the segment
13-14	HH-5		HOUSEHOLD NUMBER Numbered within PSU-Week-Segment
15-16	-		PERSON NUMBER
17-18	-		BLANK (Record Serial Number on other record types)
19-20	HH-5		WEEK CODE (Numbered within Quarter)
		2,734	Week 01. 01, 21, 41, 61, 81
		3,318	Week 02. 02, 22, 42, 62, 82
		5,696	Week 03. 03, 23, 43, 63, 83
		5,673	Week 04. 04, 24, 44, 64, 84
		4,873	Week 05. 05, 25, 45, 65, 85
		4,892	Week 06. 06, 26, 46, 66, 86
		5,661	Week 07. 07, 27, 47, 67, 87
		4,900	Week 08. 08, 28, 48, 68, 88
		4,727	Week 09. 09, 29, 49, 69, 89
		4,969	Week 10. 10, 30, 50, 70, 90
		4,609	Week 11. 11, 31, 51, 71, 91
		5,110	Week 12. 12, 32, 52, 72, 92
		4,890	Week 13. 13, 33, 53, 73, 93
21			BLANK

Tape Locations	Item No.	Frequency	Items and Codes
22-23	HH-10d		TYPE OF LIVING QUARTERS:
			Housing Unit = (00-07)
		308	00. Housing unit; kind unknown
		58,185	01. House, apartment, flat
		40	02. HU in nontransient hotel, motel, etc.
		19	03. HU-permanent in transient hotel, motel, etc.
		51	04. HU in rooming house
		2,674	05. Mobile home or trailer with no permanent room added
		322	06. Mobile home or trailer with one or more permanent rooms added
		10	07. HU not specified above
			Other Unit = (08-13)
		15	08. Quarters not HU in rooming or boarding house
		0	09. Unit not permanent in transient hotel, motel, etc.
		12	10. Unoccupied site for mobile home, trailer, or tent
		358	11. Student quarters in college dormitory
		54	12. Other unit not specified above
		4	13. Other unit; kind unknown
24	HH-11		HAS TELEPHONE
		55,130	1. Yes, phone number given
		2,125	2. Yes, no phone number given
		4,619	3. No
		178	4. Unknown
25	A-1		SEX
		29,532	1. Male
		35,520	2. Female
26			BLANK

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Tape Locations	Item No.	Frequency	Items and Codes
27-28	Person Column		AGE
		1,020	00. Under 1 year
		61,028	01-98. Number of years
		4	99. 99+ years of age
29	Recode		AGE RECODE #1
		5,000	1. Under 5 years
		12,393	2. 5-17 years
		6,742	3. 18-24 years
		18,975	4. 25-44 years
		11,750	5. 45-64 years
		2,443	6. 65-69 years
		1,958	7. 70-74 years
		2,791	8. 75 years and over
30	Recode		AGE RECODE #2
		5,998	1. Under 6 years
		10,375	2. 6-16 years
		7,762	3. 17-24 years
		10,341	4. 25-34 years
		8,634	5. 35-44 years
		5,888	6. 45-54 years
		5,862	7. 55-64 years
		4,401	8. 65-74 years
		2,791	9. 75 years and over
31-32	Recode		AGE RECODE #3
		2,997	00-35. Months
		59,055	36. Over 3 years
33			BLANK

PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
34-39	A-3		MONTH AND YEAR OF BIRTH
34-35			MONTH
			01. January 08. August
			02. February 09. September
			03. March 10. October
			04. April 11. November
			05. May 12. December
			06. June 99. DK or refused
			07. July
36-39			YEAR OF BIRTH
			1800-1899. 1800-1899
			1900-1987. 1900-1987
			9999. DK or refused
40-41			BLANK
42	L-3		MAIN RACIAL BACKGROUND - Reported
		611	1. Aleut, Eskimo, or American Indian
		1,219	2. Asian/Pacific Islander
		10,016	3. Black
		49,068	4. White
		687	5. Other
		88	6. Multiple race
		363	7. Unknown
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Tape Locations	Item No.	Frequency	Items and Codes
43-45	Recode		RACE RECODES

43			RECODE 1
		50,142	1. White
		10,053	2. Black
		1,857	3. Other
44			RECODE 2
		50,142	1. White
		11,910	2. Non-white
45			RECODE 3
		10,053	1. Black
		51,999	2. Non-black

46-47	L-4		HISPANIC ORIGIN
		92	00. Multiple Hispanic
		508	01. Puerto Rican
		315	02. Cuban
		1,017	03. Mexican-Mexicano
		1,396	04. Mexican-American
		56	05. Chicano
		440	06. Other Latin American
		701	07. Other Spanish
		139	08. Spanish, DK type
		461	09. Unknown if Spanish origin
		56,927	10. Not Spanish origin

48	L-7		MARITAL STATUS
		13,315	0. Under 14 years
		28,013	1. Married - spouse in household
		361	2. Married - spouse not in household
		3,394	3. Widowed
		3,086	4. Divorced
		1,100	5. Separated
		12,472	6. Never married
		311	7. Unknown

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Tape	Locations	Item No.	Frequency	Items and Codes
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49	L-1		VETERAN STATUS
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36,596	1. Non-veteran
47	2. WW I
2,296	3. WW II
1,178	4. Korean War
2,124	5. Vietnam veteran
513	6. Post-Vietnam
1,087	7. Other service
325	8. Served in Armed Forces, unknown if war veteran
493	9. Unknown if served in Armed Forces
17,393	Blank. Under 18 years of age

50 L-1 ACTIVE GUARD/RESERVE STATUS FOR PERSONS ON ACTIVE DUTY IN ARMED FORCES

36,596	0. Non-veteran
534	1. All service in Guard/Reserve
1,063	2. Some service in Guard/Reserve
19	3. Unknown if all service in Guard/Reserve
5,510	4. No active service in Guard/Reserve
937	5. Unknown if ever active member in Guard/Reserve or served in Armed Forces
17,393	Blank. Under 18 years of age

51-52 L-2 EDUCATION OF INDIVIDUAL - COMPLETED YEARS

2,477	00. Never attended; kindergarten only
37,993	01-12. Grades 1-12
	College:
3,142	13. 1 year
3,693	14. 2 years
1,476	15. 3 years
4,458	16. 4 years
972	17. 5 years
2,081	18. 6 years or more
760	19. Unknown
5,000	Blank. Under 5 years of age

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Tape	Locations	Item No.	Frequency	Items and Codes
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53 Recode

EDUCATION OF INDIVIDUAL RECODE

2,477	0.	None; kindergarten only
12,235	1.	1-8 years (elementary)
8,479	2.	9-11 years (high school)
17,279	3.	12 years (high school graduate)
8,311	4.	1-3 years (college)
4,458	5.	4 years (college graduate)
3,053	6.	5+ years (post-college)
760	7.	Unknown
5,000	Blank.	Under 5 years of age

54-55 -
FAMILY

HIGHEST EDUCATION OF RESPONSIBLE ADULT

MEMBER (Detail)

127	00.	Never attended; kindergarten only
33,101	01-12.	Grades 1-12

College:

4,612	13.	1 year
6,181	14.	2 years
2,552	15.	3 years
8,311	16.	4 years
1,965	17.	5 years
4,778	18.	6 years or more
425	19.	Unknown

56 -
FAMILY

HIGHEST EDUCATION OF RESPONSIBLE ADULT

MEMBER Recode

127	0.	None; kindergarten only
3,887	1.	1-8 years (elementary)
6,348	2.	9-11 years (high school)
22,866	3.	12 years (high school graduate)
13,345	4.	1-3 years (college)
8,311	5.	4 years (college graduate)
6,743	6.	5+ years (post-college)
425	7.	Unknown

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Tape	Locations	Item No.	Frequency	Items and Codes
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57	L-8		FAMILY INCOME \$20,000 OR MORE
		24,784	1. Less than \$20,000
		34,994	2. \$20,000 or more
		2,274	3. Unknown

58-59	L-8		FAMILY INCOME
		508	00. Less than \$1,000
		558	01. \$ 1,000 - \$ 1,999
		759	02. 2,000 - 2,999
		882	03. 3,000 - 3,999
		1,075	04. 4,000 - 4,999
		1,170	05. 5,000 - 5,999
		1,252	06. 6,000 - 6,999
		1,209	07. 7,000 - 7,999
		1,006	08. 8,000 - 8,999
		1,100	09. 9,000 - 9,999
		1,521	10. 10,000 - 10,999
		896	11. 11,000 - 11,999
		1,557	12. 12,000 - 12,999
		966	13. 13,000 - 13,999
		863	14. 14,000 - 14,999
		1,375	15. 15,000 - 15,999
		957	16. 16,000 - 16,999
		1,108	17. 17,000 - 17,999
		1,208	18. 18,000 - 18,999
		1,573	19. 19,000 - 19,999
		5,541	20. 20,000 - 24,999
		5,555	21. 25,000 - 29,999
		5,125	22. 30,000 - 34,999
		3,578	23. 35,000 - 39,999
		3,154	24. 40,000 - 44,999
		2,732	25. 45,000 - 49,999
		6,500	26. \$50,000 and over
		8,324	27. Unknown

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Tape Locations	Item No.	Frequency	Items and Codes
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60	Recode		FAMILY INCOME RECODE
		3,782	0. Under \$5,000
		2,422	1. \$ 5,000 - \$ 6,999
		3,315	2. 7,000 - 9,999
		5,803	3. 10,000 - 14,999

6,221	4.	15,000 - 19,999
5,541	5.	20,000 - 24,999
10,680	6.	25,000 - 34,999
9,464	7.	35,000 - 49,999
6,500	8.	\$50,000 or more
8,324	9.	Unknown

61	Generated		NHIS POVERTY INDEX*
		48,126	1. Above poverty threshold
		8,346	2. Below poverty threshold
		5,580	3. Unknown

62-63			FAMILY RELATIONSHIP
62	A-2		TYPE OF FAMILY
		6,176	&. Primary individual
		976	-. Secondary individual
		54,788	0. Primary family
		112	1-9. Secondary family
63	A-2		RELATIONSHIP TO REFERENCE PERSON
		5,970	&. Reference person, living alone
		18,429	0. Reference person, 2+ persons in household
		13,675	1. Spouse, other spouse NOT in Armed Forces and living at home
		164	2. Spouse, other spouse IN Armed Forces and living at home
		20,973	3. Child of reference person or spouse
		1,095	4. Grandchild of reference person or spouse
		437	5. Parent of reference person or spouse
		1,295	6. Other relative
		14	7. Child of ineligible reference person
		0	9. DK or refused

*Based on family size, number of children under 18 years of age & family income using the 1985 poverty levels derived from the August, 1986 Current Population Survey.

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Tape Locations	Item No.	Frequency	Items and Codes
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64	Recode		FAMILY RELATIONSHIP RECODE
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5,970	1. Living alone
1,182	2. Living only with non-relative
27,995	3. Living with spouse
26,905	4. Living with relative - other

65-66 Generated

SIZE OF FAMILY*

Unrelated individuals are coded 01

67 Generated

SIZE OF FAMILY RECODE

1-8. Number of members
9. 9+ members

68 A-2

PARENT/OTHER ADULT RELATIVE (under 25 years old and never married)

	13,400	1. Both parents, no other relative
	3,501	2. Mother only
	282	3. Father only
	1,614	4. Both parents and other 21+ year old adult relative
	1,155	5. Mother and other 21+ years old adult relative
	95	6. Father and other 21+ year old adult relative
adult	217	7. No parent, but one 21+ year old relative
	348	8. No parent, but two or more 21+ year old adult relatives
	351	9. Unknown
	1,148	0. Other
ever	39,941	Blank. Not applicable (25+ years old or married)

*Count includes spouse in military but living at home.

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Tape Locations	Item No.	Frequency	Items and Codes
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69 B-1

MAJOR ACTIVITY (18+ years old)

B-8

26,755	1. Working
9,119	2. Keeping house
2,703	3. Going to school
5,695	4. Something else
387	5. Unknown
17,393	Blank. Not applicable (Under 18 years)

70

G-4

HEALTH STATUS

23,872	1. Excellent
16,698	2. Very Good
14,721	3. Good
4,661	4. Fair
1,836	5. Poor
264	6. Unknown

71

Recode

ACTIVITY LIMITATION STATUS - (all ages)

activity

2,541	1. Unable to perform major activity
3,479	2. Limited in kind/amount major
2,760	3. Limited in other activities
53,272	4. Not limited (includes unknowns)

72

Recode

ACTIVITY LIMITATION STATUS MEASURED BY "ABILITY TO WORK" (65-69 years)

2,648	1. Unable to work
1,997	2. Limited in kind/amount of work
1,392	3. Limited in other activities
33,873	4. Not limited (includes unknowns)
22,142	Blank. Not applicable (under 18 years, 70+ years)

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Tape

Locations

Item No.

Frequency

Items and Codes

73

B-11

LIMITATION OF SCHOOL ACTIVITIES (5-17 years)

44	1. Unable to attend school
328	2. Attends special school/classes
44	3. Needs special school/classes
129	4. Limited in school attendance
208	5. Limited in other activities

11,640 6. Not limited (includes unknowns)
 49,659 Blank. Not applicable (under 5 years or 18+ years)

74 old needs or	B-14	NEEDS HELP WITH PERSONAL CARE (5-59 years and limited, or age 60-69 years)*
	312	1. Unable to perform personal care
	761	2. Limited in performing other routine needs
	8,928	3. Not limited in performing personal routine needs
	215	4. Unknown
	51,836	Blank. Not applicable (under 5 years; 5-59 years not limited; 70+ years old)

75 years) off and	D-1	EMPLOYMENT STATUS IN PAST 2 WEEKS (18+ years) In the Labor Force: (1-7) Currently employed: (1-3) 1. Worked in past 2 weeks 2. Did not work, has job; not on lay-off and not looking for work 3. Did not work, has job; looking for work Unemployed: (4-7) 4. Did not work, has job; on lay-off 5. Did not work, has job; on lay-off looking for work 6. Did not work, has job; unknown if looking or on lay-off 7. Did not work, no job; looking for work or on lay-off Not in Labor Force (18+ years): (8) 8. Not in Labor Force (18+ years) Blank. Not applicable (Under 18 years old)
	27,422	
	655	
	27	
	84	
	8	
	341	
	1,365	
	14,757	
	17,393	

*For persons 70+ years, codes 1 and 2 in loc. 71 correspond to codes 1 and 2 in loc. 74.

Locations	Item No.	Frequency	Items and Codes
76	L-6		CLASS OF WORKER
		14,757	0. Not in labor force
		21,441	1. Private company
		919	2. Federal Government employee
		1,146	3. State Government employee
		2,273	4. Local Government employee
		736	5. Incorporated business
		2,635	6. Self-employed
		99	7. Without pay
		83	8. Never worked
		570	9. Unknown
		17,393	Blank. Under 18
77-79	L-6		INDUSTRY DETAIL CODE
		29,902	010-996. Code number
		32,150	Blank. Not applicable
80-81	Recode		INDUSTRY RECODE 1
			SEE APPENDIX B
82-83	Recode		INDUSTRY RECODE 2
			SEE APPENDIX B
84-86	L-6		OCCUPATION DETAIL CODE
		29,902	003-999. Code number
		32,150	Blank. Not applicable
87-88	Recode		OCCUPATION RECODE 1
			SEE APPENDIX C
1			HI-15
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Tape

Locations	Item No.	Frequency	Items and Codes
89-90	Recode		OCCUPATION RECODE 2 SEE APPENDIX C
91	L-R		RESPONDENT
		16,373	0. Under 17
		28,220	1. Self-entirely
		3,236	2. Self-partly
		13,762	3. Proxy
		461	4. Unknown
92	Recode		CONDITION LIST ASSIGNED AND ASKED
		10,400	1. Condition List 1, Skin and musculoskeletal
		10,227	2. Condition List 2, Impairments
		10,531	3. Condition List 3, Digestive
		10,169	4. Condition List 4, Miscellaneous
		10,182	5. Condition List 5, Circulatory
		10,285	6. Condition List 6, Respiratory
		258	7. Unknown
93-94	G-5		HEIGHT WITHOUT SHOES (18+ years)
			36-98. Number of inches
			99. Unknown
			Blank. Under 18 years of age
95-97	G-5		WEIGHT WITHOUT SHOES (18+ years)
			050-500. Number of pounds
			501. Unknown
			Blank. Under 18 years of age
98-99	Recode		TOTAL RESTRICTED ACTIVITY DAYS IN PAST TWO WEEKS
		55,182	00. None
		6,870	01-14. Days

PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
100-101	D-4		BED DAYS IN PAST TWO WEEKS
		57,893	00. None
		4,159	01-14. Days
102-103	D-2		WORK-LOSS DAYS IN PAST TWO WEEKS (control on Currently Employed, 75:1-3)
		60,273	00. None
		1,779	01-14. Days
104-105	D-3		SCHOOL-LOSS DAYS IN PAST TWO WEEKS
		60,973	00. none
		1,079	01-14. Days
106-107	D-6		OTHER DAYS OF RESTRICTED ACTIVITY IN PAST TWO WEEKS
		58,836	00. None
		3,216	01-14. Days
108-110	G-2		BED DAYS IN PAST 12 MONTHS
		33,586	000. None
		27,970	001-365. 1-365 days
		496	366. Unknown
111	Recode		BED DAYS IN PAST 12 MONTHS - Recode
		33,586	0. None
		20,904	1. 1-7 days
		5,372	2. 8-30 days
		1,376	3. 31-180 days
		318	4. 181-365 days
		496	5. Unknown

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Tape Locations	Item No.	Frequency	Items and Codes
112-114	G-3		DOCTOR VISITS IN PAST 12 MONTHS
		15,867	000. None
		45,981	001-996. Visits
		0	997. 997+ visits
		204	998. Unknown
115	G-3		INTERVAL SINCE LAST DOCTOR VISIT
		114	0. Never
		46,521	1. Less than 1 year
		6,224	2. 1 to less than 2 years
		6,036	3. 2 to less than 5 years
		2,268	4. 5 years or more
		889	5. Unknown
116-117	Generated		NUMBER OF CONDITIONS
118-119	Generated		NUMBER OF ACUTE INCIDENCE CONDITIONS
120-121	Generated		NUMBER OF TWO-WEEK DOCTOR VISITS
122-123	Generated		NUMBER OF SHORT-STAY HOSPITAL EPISODES IN IN PAST 12 MONTHS
124-126	Generated		SHORT-STAY HOSPITAL EPISODE DAYS IN PAST 12 MONTHS
127-128	Generated		NUMBER OF SHORT-STAY HOSPITAL EPISODES IN PAST 12 MONTHS EXCLUDING DELIVERY*
129-131	Generated		SHORT-STAY HOSPITAL EPISODE DAYS IN PAST 12 MONTHS EXCLUDING DELIVERY*

*Based on operation codes and reason entered hospital.

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HI-18

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Tape Locations	Item No.	Frequency	Items and Codes
132-133	Generated		NUMBER OF SHORT-STAY HOSPITAL DISCHARGES IN PAST 6 MONTHS
134-136	Generated		NUMBER OF DAYS IN SHORT-STAY HOSPITAL IN PAST 12 MONTHS FOR DISCHARGES IN PAST 6 MONTHS
137-138	Generated		NUMBER OF SHORT-STAY HOSPITAL DISCHARGES IN PAST 6 MONTHS EXCLUDING DELIVERY*
139-141 PAST	Generated		NUMBER OF DAYS IN SHORT-STAY HOSPITAL IN PAST 12 MONTHS FOR DISCHARGES IN PAST 6 MONTHS EXCLUDING DELIVERY*
142-181	-		BLANK
182	Master Record	13,206 15,478 21,295 12,073	REGION 1. Northeast 2. Midwest 3. South 4. West
183	Master Record	25,780 16,500 3,491	GEOGRAPHIC DISTRIBUTION MSA Size 1. 1,000,000 or more 2. 250,000 - 999,999 3. 100,000 - 249,999

1,096 4. Under 100,000
15,185 Blank. Non-MSA

184

BLANK

*Based on operation codes and reason entered hospital.

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1986 NHIS HEALTH INSURANCE SUPPLEMENT
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Tape Locations	Item No.	Frequency	Items and Codes
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185

Master
Record

TYPE OF PSU

33,249	1. MSA - Self-representing
13,618	3. MSA - Nonself-representing
21	4. Non-MSA - Self-representing
15,164	6. Non-MSA - Nonself-representing

186

Recode

MSA - NON-MSA RESIDENCE

19,938	1. MSA - Central City
26,929	2. MSA - Not Central City
14,275	3. Non-MSA - Nonfarm
910	4. Non-MSA - Farm

187-189

PSEUDO PSU CODES

190-200

CHRONIC CONDITION PREVALENCE AND INCIDENCE
FACTOR (XX.XXXXXXXXX) - character format

with

implied decimal

FINAL BASIC WEIGHT

201-209

QUARTER

210-218

SEMI-ANNUAL (WT/2)

219-227

ANNUAL (WT/4)

			6.5 WEIGHT
228-236			QUARTER, SEMI-ANNUAL, AND ANNUAL
			ESTIMATED RESTRICTED ACTIVITY DAYS IN PAST 2 WEEKS
237-245			QUARTER, SEMI-ANNUAL AND ANNUAL
1			HI-20
			1986 NHIS HEALTH INSURANCE SUPPLEMENT PUBLIC USE FILE
Tape Locations	Item No.	Frequency	Items and Codes
			ESTIMATED BED DAYS IN PAST 2 WEEKS
246-254			QUARTER, SEMI-ANNUAL AND ANNUAL
			ESTIMATED WORK-LOSS DAYS IN PAST 2 WEEKS (control on Currently Employed, 75:1-3)
255-263			QUARTER, SEMI-ANNUAL AND ANNUAL
			ESTIMATED SCHOOL-LOSS DAYS IN PAST 2 WEEKS
264-272			QUARTER, SEMI-ANNUAL AND ANNUAL
			ESTIMATED DOCTOR VISITS IN PAST 12 MONTHS
273-281			QUARTER
282-290			SEMI-ANNUAL
291-299			ANNUAL
			ESTIMATED SHORT-STAY HOSPITAL EPISODE DAYS IN PAST 12 MONTHS

300-308 QUARTER
 309-317 SEMI-ANNUAL
 318-326 ANNUAL

327-335 ANNUAL ESTIMATED NUMBER OF SHORT-STAY
 HOSPITAL EPISODES IN PAST 12 MONTHS

1 HI-21
 1986 NHIS HEALTH INSURANCE SUPPLEMENT
 PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
336	1b		MEDICARE COVERAGE
		7,471	1. Covered
		54,228	2. Not covered
		353	3. Unknown if covered
337	2a		MEDICARE: HOSPITAL COVERAGE
		7,227	1. Covered (only if 336 = 1)
		54,260	2. Not covered
		565	3. Unknown if covered
338	2b		MEDICARE: DOCTOR/SURGEON COVERAGE
		7,003	1. Covered (only if 336 = 1)
		54,454	2. Not covered
		595	3. Unknown if covered
339 AGE)	3		MEDICARE CARD (PERSONS UNDER 65 YEARS OF
		5	1. Current hospital coverage
		1	2. Current doctor/surgeon coverage
		37	3. Claims has a card, but it is not available
		25	4. Current hospital and doctor/surgeon coverage
		0	5. Unknown if person has card
		7,192	6. Persons 65 years of age and over

54,792

7. Persons under 65 years of age, card
not requested

1

HI-22

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
340-341	Recode		MEDICARE COVERAGE: HOSPITAL AND/OR DOCTOR/SURGEON COVERAGE
		220	01. Has hospital but not doctor
		48	02. Has hospital, doctor unknown
		6,959	03. Has both hospital and doctor
		30	04. Has doctor, but not hospital
		14	05. Has doctor, hospital unknown
		6	06. Hospital unknown, does not have doctor
		2	07. Doctor unknown, does not have hospital
		192	08. Both hospital and doctor unknown
		54,228	09. No Medicare coverage
		353	10. Unknown if person has Medicare coverage

342	Recode		MEDICARE: HOSPITAL AND/OR DOCTOR/SURGEON COVERAGE SUMMARY
		6,959	1. Has hospital and doctor coverage
		250	2. Has hospital or doctor coverage, but not both
		262	3. Has coverage, extent unknown
		54,228	4. No Medicare coverage
		353	5. Unknown if Medicare coverage

1

HI-23

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
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343-351	Table HI		PLAN 1 - FAMILY OR UNRELATED INDIVIDUAL (blank if this person is not covered by this family plan or no plan was listed in this field)
343			TYPE OF PLAN
		13,238	1. Blue Cross and/or Blue Shield
		3,368	2. HMO or other prepaid plan
		22,400	3. Other named and identified private plan
		3,727	4. Has private plan, name not given
		19,319	Blank. Not applicable
344	5a		HEALTH MAINTENANCE ORGANIZATION OR HMO
		6,789	1. Yes
		31,498	2. No
		4,446	3. Unknown
		19,319	Blank. (Not applicable)
345	5a Recode		HMO COVERAGE
		2,837	1. Coded HMO, respondent said HMO
		315	2. Coded HMO, respondent said not HMO
		216	3. Coded HMO, respondent said doesn't know if HMO
		223	4. Coded "name of plan unknown," respondent said HMO
		2,714	5. Coded "name of plan unknown," respondent said not HMO
		790	6. Coded "name of plan unknown," respondent said doesn't know if HMO
		3,729	7. Coded Blue plan or other, respondent said HMO
		28,469	8. Coded Blue plan or other, respondent said not HMO
		3,440	9. Coded Blue plan or other, respondent said doesn't know if HMO
		19,319	Blank. Person not covered by this plan

1

HI-24

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
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343-351			PLAN 1 - Continued
346	5b		PLAN OBTAINED THROUGH EMPLOYER OR UNION
		36,468	1. Yes
		5,913	2. No
		352	3. Unknown

		19,319	Blank. Not applicable
347	5c		NOW CARRIED THROUGH EMPLOYER OR UNION
		35,614	1. Yes
		725	2. No
		129	3. Unknown
		25,584	Blank. Not applicable
348	6a		PLAN PAYS SOME OR ALL OF HOSPITAL BILLS
		42,039	1. Yes
		271	2. No
		423	3. Unknown
		19,319	Blank. Not applicable
349	6b		PLAN PAYS SOME OR ALL DOCTOR/SURGEON BILLS FOR OPERATIONS
		41,447	1. Yes
		665	2. No
		621	3. Unknown
		19,319	Blank. Not applicable
350	6c		PLAN PAYS DENTAL SERVICES
		17,263	1. Yes
		22,969	2. No
		2,501	3. Unknown
		19,319	Blank. (Not applicable)
351 PLAN	7		THIS PERSON'S COVERAGE STATUS UNDER THIS PLAN
		42,382	1. Covered
		351	2. Unknown if covered
		19,319	Blank. Not applicable (not covered)

1

HI-25

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
352-360	Table HI		PLAN 2 - Family or Unrelated Individual (blank if this person is not covered by this family plan or no plan was listed in this field)
352			TYPE OF PLAN
		2,032	1. Blue Cross and/or Blue Shield

		573	2. HMO or other prepaid plan
		7,146	3. Other named and identified plan
		1,698	4. Has private plan, name not given
		50,603	Blank. Not applicable
353	5a		HEALTH MAINTENANCE ORGANIZATION OR HMO
		1,351	1. Yes
		8,750	2. No
		1,348	3. Unknown
		50,603	Blank. (Not applicable)
354	5a Recode		HMO COVERAGE
		426	1. Coded HMO, respondent said HMO
		108	2. Coded HMO, respondent said not HMO
		39	3. Coded HMO, respondent said doesn't know if HMO
		106	4. Coded "name of plan unknown," respondent said HMO
		1,182	5. Coded "name of plan unknown," respondent said not HMO
		410	6. Coded "name of plan unknown," respondent said doesn't know if HMO
		819	7. Coded Blue plan or other, respondent said HMO
		7,460	8. Coded Blue plan or other, respondent said not HMO
		899	9. Coded Blue plan or other, respondent said doesn't know if HMO
		50,603	Blank. Person not covered by this plan

1

HI-26

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
352-360			PLAN 2 - Continued
355	5b		PLAN OBTAINED THROUGH EMPLOYER OR UNION
		9,707	1. Yes
		1,566	2. No
		176	3. Unknown
		50,603	Blank. Not applicable
356	5c		NOW CARRIED THROUGH EMPLOYER OR UNION
		9,548	1. Yes
		122	2. No
		37	3. Unknown

		52,345	Blank. Not applicable
357	6a		PLAN PAYS SOME OR ALL OF HOSPITAL BILLS
		8,121	1. Yes
		2,693	2. No
		635	3. Unknown
		50,603	Blank. Not applicable
358	6b		PLAN PAYS SOME OR ALL DOCTOR/SURGEON BILLS FOR OPERATIONS
		8,366	1. Yes
		2,548	2. No
		535	3. Unknown
		50,603	Blank. Not applicable
359	6c		PLAN PAYS DENTAL SERVICES
		5,979	1. Yes
		4,483	2. No
		987	3. Unknown
		50,603	Blank. (Not applicable)
360	7		THIS PERSON'S COVERAGE STATUS UNDER THIS PLAN
		11,155	1. Covered
		294	2. Unknown if covered
		50,603	Blank. Not applicable (not covered)

1

HI-27

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
361-369	Table HI		PLAN 3 - FAMILY OR UNRELATED INDIVIDUAL (blank if this person is not covered by the family plan or no plan was listed in this field)
361			TYPE OF PLAN
		340	1. Blue Cross and/or Blue Shield
		102	2. HMO or other prepaid plan
		1,305	3. Other named and identified plan
		318	4. Has private plan, name not given
		59,987	Blank. Not applicable
362	5a		HEALTH MAINTENANCE ORGANIZATION OR HMO

245	1. Yes
1,590	2. No
230	3. Unknown
59,987	Blank. (Not applicable)

363	5a Recode		HMO COVERAGE
		72	1. Coded HMO, respondent said HMO
		14	2. Coded HMO, respondent said not HMO
		16	3. Coded HMO, respondent said doesn't know if HMO
		15	4. Coded "name of plan unknown," respondent said HMO
		228	5. Coded "name of plan unknown," respondent said not HMO
		75	6. Coded "name of plan unknown," respondent said doesn't know if HMO
		158	7. Coded Blue plan or other, respondent said HMO
		1,348	8. Coded Blue plan or other, respondent said not HMO
		139	9. Coded Blue plan or other, respondent said doesn't know if HMO
		59,987	Blank. Person not covered by this plan

364	5b		PLAN OBTAINED THROUGH EMPLOYER OR UNION
		1,691	1. Yes
		313	2. No
		61	3. Unknown
		59,987	Blank. Not applicable

1 HI-28

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
361-369			PLAN 3 - Continued
365	5c		NOW CARRIED THROUGH EMPLOYER OR UNION
		1,658	1. Yes
		25	2. No
		8	3. Unknown
		60,361	Blank. Not applicable
366	6a		PLAN PAYS SOME OR ALL OF HOSPITAL BILLS
		1,197	1. Yes
		706	2. No
		162	3. Unknown
		59,987	Blank. Not applicable

367	6b		PLAN PAYS SOME OR ALL DOCTOR/SURGEON BILLS FOR OPERATIONS
		1,267	1. Yes
		645	2. No
		153	3. Unknown
		59,987	Blank. Not applicable
368	6c		PAYS DENTAL SERVICES
		1,059	1. Yes
		773	2. No
		233	3. Unknown
		59,987	Blank. (Not applicable)
369	7		THIS PERSON'S COVERAGE STATUS UNDER THIS PLAN
		1,963	1. Covered
		102	2. Unknown if covered
		59,987	Blank. Not applicable (not covered)

1

HI-29

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
370-378	Table HI		PLAN 4 - FAMILY OR UNRELATED INDIVIDUAL (blank if this person is not covered by the family plan or no plan was listed in this field)
370			TYPE OF PLAN
		84	1. Blue Cross and/or Blue Shield
		31	2. HMO or other prepaid plan
		224	3. Other named and identified private plan
		49	4. Has private plan, name not given
		61,664	Blank. Not applicable
371	5a		HEALTH MAINTENANCE ORGANIZATION OR HMO
		30	1. Yes
		297	2. No
		61	3. Unknown
		61,664	Blank. (Not applicable)
372	5a Recode		HMO COVERAGE
		1	1. Coded HMO, respondent said HMO

377 6c PLAN PAYS DENTAL SERVICES

194	1. Yes
119	2. No
75	3. Unknown
61,664	Blank. (Not applicable)

378 7 THIS PERSON'S COVERAGE STATUS UNDER THIS
PLAN

307	1. Covered
81	2. Unknown if covered
61,664	Blank. Not applicable (not covered)

1 HI-31

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
379-387	Table HI		PLAN 5 - FAMILY OR UNRELATED INDIVIDUAL (blank if this person is not covered by the family plan or no plan was listed in this field)
379			TYPE OF PLAN
		11	1. Blue Cross and/or Blue Shield
		0	2. HMO or other prepaid plan
		60	3. Other named and identified plan
		26	4. Has private plan, name not given
		61,955	Blank. Not applicable
380	5a		HEALTH MAINTENANCE ORGANIZATION OR HMO
		18	1. Yes
		71	2. No
		8	3. Unknown
		61,955	Blank. (Not applicable)
381	5a Recode		HMO COVERAGE
		0	1. Coded HMO, respondent said HMO
		0	2. Coded HMO, respondent said not HMO
		0	3. Coded HMO, respondent said doesn't know if HMO
		5	4. Coded "name of plan unknown," respondent said HMO
		16	5. Coded "name of plan unknown," respondent said not HMO
		5	6. Coded "name of plan unknown," respondent said doesn't know if HMO

13	7.	Coded Blue plan or other, respondent said HMO
55	8.	Coded Blue plan or other, respondent said not HMO
3	9.	Coded Blue plan or other, respondent said doesn't know if HMO
61,955	Blank.	Person not covered by this plan

382 5b PLAN OBTAINED THROUGH EMPLOYER OR UNION

76	1.	Yes
21	2.	No
0	3.	Unknown
61,955	Blank.	Not applicable

1 HI-32

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
379-387			PLAN 5 - Continued
383	5c		NOW CARRIED THROUGH EMPLOYER OR UNION
		75	1. Yes
		1	2. No
		0	3. Unknown
		61,976	Blank. Not applicable
384	6a		PLAN PAYS SOME OR ALL OF HOSPITAL BILLS
		63	1. Yes
		29	2. No
		5	3. Unknown
		61,955	Blank. Not applicable
385	6b		PLAN PAYS SOME OR ALL DOCTOR/SURGEON BILLS FOR OPERATIONS
		62	1. Yes
		31	2. No
		4	3. Unknown
		61,955	Blank. Not applicable
386	6c		PLAN PAYS DENTAL SERVICES
		50	1. Yes
		25	2. No
		22	3. Unknown
		61,955	Blank. (Not applicable)
387 PLAN	7		THIS PERSON'S COVERAGE STATUS UNDER THIS PLAN

398	6c Recode		PRIVATE HEALTH INSURANCE: DENTAL COVERAGE
		22,930	1. Covered
		35,713	2. Not covered
		3,409	3. Unknown if covered

1 HI-34
1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
399-400	Recode		PRIVATE HEALTH INSURANCE: HOSPITAL AND/OR DOCTOR/SURGEON COVERAGE
			01-09. Has PHI Coverage
		335	01. Has hospital but not doctor
		268	02. Has hospital, doctor unknown
		44,986	03. Has both hospital and doctor
		50	04. Has doctor but not hospital
		49	05. Has doctor, hospital unknown
		72	06. Neither hospital nor doctor
		3	07. Hospital unknown, does not have doctor
		0	08. Doctor unknown, does not have hospital
		406	09. Both hospital and doctor unknown
			10. No PHI Coverage
		15,310	10. Neither hospital nor doctor
			11-15. Unknown if PHI Coverage
		1	11. Neither hospital nor doctor
		0	12. No hospital, doctor unknown
		0	13. No doctor, hospital unknown
		355	14. Both hospital and doctor unknown
		217	15. Either or both hospital/doctor coverage

401	Recode		PRIVATE HEALTH INSURANCE: HOSPITAL AND/OR DOCTOR/SURGEON COVERAGE
			1-4. Has PHI Coverage
		44,986	1. Has hospital and doctor coverage
		385	2. Has hospital or doctor, but not both
		726	3. Has coverage, extent unknown
		72	4. Neither hospital nor doctor but has

coverage

15,310 5. No PHI Coverage
 573 6. Unknown if PHI Coverage

402	Recode		MEDICARE AND/OR PRIVATE HEALTH INSURANCE
		48,293	1. Covered by one or both
		13,193	2. Not covered by either
		566	3. Unknown if covered

1

HI-35

1986 NHIS HEALTH INSURANCE SUPPLEMENT
 PUBLIC USE FILE

Tape			
Locations	Item No.	Frequency	Items and Codes

403	Recode		MEDICARE AND/OR PRIVATE HEALTH INSURANCE: HOSPITAL COVERAGE
		47,885	1. Covered by one or both
		13,303	2. Not covered by either
		864	3. Unknown if covered

404	Recode		MEDICARE AND/OR PRIVATE HEALTH INSURANCE: DOCTOR/SURGEON COVERAGE
		47,415	1. Covered by one or both
		13,587	2. Not covered by either
		1,050	3. Unknown if covered

405-406	Recode		PRIVATE HEALTH INSURANCE AND/OR MEDICARE COVERAGE: HOSPITAL AND SURGICAL
			01-09. Has PHI and/or Medicare Coverage
		310	01. Has hospital but not doctor
		231	02. Has hospital, doctor unknown
		47,145	03. Has both hospital and doctor
		49	04. Has doctor but not hospital
		44	05. Has doctor, hospital unknown
		60	06. Neither hospital nor doctor
		5	07. Hospital unknown, does not have doctor
		0	08. Doctor unknown, does not have hospital
		449	09. Both hospital and doctor unknown

	10.	No PHI/Medicare Coverage
13,193	10.	Neither hospital nor doctor
	11-14.	Unknown if PHI/Medicare Coverage
1	11.	Neither hospital nor doctor
0	12.	No hospital, doctor unknown
0	13.	No doctor, hospital unknown
565	14.	Both hospital and doctor unknown

1

HI-36

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
407	Recode		PRIVATE HEALTH INSURANCE AND/OR MEDICARE: HOSPITAL AND/OR SURGICAL COVERAGE
			1-4. Has PHI and/or Medicare Coverage
		47,145	1. Has hospital and doctor coverage
		359	2. Has hospital or doctor, but not both
		729	3. Unknown if both, just one or neither
		60	4. Neither hospital nor doctor but has coverage
		13,193	5. No PHI/Medicare Coverage
		566	6. Unknown if PHI/Medicare Coverage
408	Recode		TYPE OF PRIVATE HEALTH INSURANCE COVERAGE (Based on coder's determination from list)
		11,302	1. Blue Cross and/or Blue Shield only
		2,912	2. Blue Plan and other identified plan not including prepaid
and		109	3. Blue Plan, other identified plan, prepaid plan
		259	4. Prepaid and Blue Plan (no other identified plan)
		921	5. Prepaid and other identified plan (no Blue Plan)
		2,399	6. Prepaid plan only
		22,333	7. Other identified plan only
		5,465	8. Plans include at least one for which type is unknown

731	9. Person's coverage status unknown for at least one plan
15,621	Blank. Not applicable

1

HI-37

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
409-416	8a		REASON FOR NO MEDICARE AND/OR PRIVATE HEALTH INSURANCE COVERAGE
409			JOB LAYOFF, JOB LOSS OR ANY REASONS RELATED TO UNEMPLOYMENT
		1,849	1. Yes
		10,762	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
410			CAN'T OBTAIN BECAUSE OF POOR HEALTH, ILLNESS OR AGE
		177	1. Yes
		12,434	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
411			TOO EXPENSIVE, CAN'T AFFORD HEALTH INSURANCE
		7,381	1. Yes
		5,230	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
412			DISSATISFIED WITH PREVIOUS INSURANCE
		160	1. Yes
		12,451	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
413			DON'T BELIEVE IN INSURANCE
		145	1. Yes
		12,466	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
414			HAVE BEEN HEALTHY, HAVEN'T NEEDED HEALTH INSURANCE
		822	1. Yes
		11,789	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
409-416	8a		REASON FOR NO MEDICARE AND/OR PRIVATE HEALTH INSURANCE COVERAGE
	415		SOME OTHER HEALTH PLAN, INCLUDING MILITARY CARE AND VETERAN'S BENEFITS
		2,528	1. Yes
		10,083	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
	416		Some Other Reason
		943	1. Yes
		11,668	2. Reason given, but not this reason
		49,441	Blank. Unknown or not applicable
417	Recode		WHETHER REASON GIVEN
		12,611	1. At least one reason given
		94	2. No reason given because item refused or stated to be unknown
		488	3. No indication of reason given, unknown or refused
		48,859	Blank. Not applicable
418-419	8a,b		MAIN REASON NO MEDICARE OR PRIVATE HEALTH INSURANCE
		1,490	01. Job layoff, job loss or any reasons related to unemployment
health,		128	02. Can't obtain because of poor illness or age
		6,892	03. Too expensive, can't afford health insurance
insurance		115	04. Dissatisfied with previous
		109	05. Don't believe in insurance
		572	06. Have been healthy, haven't needed insurance
benefits		2,420	07. Some other health plan, including military care and veteran's
		847	08. Some other reason

38	10. Reasons given, but main reason unknown
582	11. Unknown reason
48,859	Blank. Not applicable (has insurance or unknown)

1

HI-39

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
420	9b		AFDC or ADC (Assistance received by this person)
		2,510	1. Yes
		59,519	2. No
		23	3. Unknown
421	10b		SUPPLEMENTAL SECURITY INCOME
		1,015	1. Yes
		60,991	2. No
		46	3. Unknown
422	11b		RECEIVED MEDICAID - Past 12 Months
		3,908	1. Yes
		58,112	2. No
		32	3. Unknown
423	12b,c		MEDICAID - Type of Card
		2,201	1. Medicaid Card - current
		112	2. Medicaid Card - expired
		9	3. Card seen - currency unknown
		1,179	4. Says has card - card unseen
		33	5. Card seen - unknown type
		697	6. Unknown
		57,821	7. No Medicaid Card
424	13b		COVERED BY OTHER PUBLIC ASSISTANCE PROGRAM THAT PAYS FOR HEALTH CARE
		299	1. Yes

61,709 2. No
44 3. Unknown

425 14b NOW RECEIVES MILITARY RETIREMENT PAYMENTS

563 1. Yes
61,468 2. No
21 3. Unknown

1 HI-40

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape
Locations Item No. Frequency Items and Codes

426 14c TYPE OF MILITARY BENEFITS

322 1. Armed Forces
189 2. Veteran's Administration
32 3. Both
41 9. Unknown
61,468 Blank. Not applicable

427 15b COVERED BY CHAMPUS

985 1. Yes
61,039 2. No
28 3. Unknown

428 15d NOW COVERED BY CHAMP-VA

57 1. Yes
61,963 2. No
32 3. Unknown

429 16b NOW COVERED BY ANY OTHER PROGRAM PROVIDING
HEALTH CARE FOR MILITARY DEPENDENTS

291 1. Yes
61,730 2. No
31 3. Unknown

430 17a SERVICE RELATED DISABILITY

855	1. Yes
6,270	2. No
445	3. Unknown
54,482	Blank. Not applicable

431 17b VA COMPENSATION FOR SERVICE RELATED DISABILITY

507	1. Yes
335	2. No
458	3. Unknown
60,752	Blank. Not applicable

1 HI-41

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
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432 17c APPLIED TO VA FOR SERVICE-CONNECTED DISABILITY COMPENSATION

143	1. Yes
153	2. No
22	3. Unknown
61,734	Blank. (Not applicable)

433 17d STATUS OF VA APPLICATION

50	1. Approved
68	2. Denied
14	3. Pending
11	9. DK or refused
61,909	Blank. (Not applicable)

434 17a-d Recode COMPENSATION FROM VA FOR SERVICE-CONNECTED DISABILITY

507	1. Service-connected disability; receives compensation
50	2. Service-connected disability; VA rating approved but no current compensation
68	3. Service-connected disability; VA rating denied

14	4. Service-connected disability; VA rating pending
11	5. Service-connected disability; application made for VA rating, results unknown
0	6. Service-connected disability; no VA application made or unknown if made
0	7. Service-connected disability; unknown if receives compensation
0	8. No service-connected disability
0	9. Unknown if service-connected disability
61,402	Blank. (Not applicable)

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1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
435	Recode		PUBLIC ASSISTANCE HEALTH INSURANCE COVERAGE
		4,348	1. Has some type of PA Health Insurance coverage
		57,005	2. None
		699	3. Unknown if any PA Health Insurance coverage
436	Recode		MEDICAID USE AND CURRENCY
		2,103	1. Use in past 12 months only
		396	2. Current card only
		1,805	3. Both use in past 12 months and current card
		57,748	4. Neither or unknown
437	Recode		MILITARY HEALTH INSURANCE COVERAGE
		1,878	1. Has some type of Military Health Insurance coverage
		59,703	2. None
		471	3. Unknown if any Military Health Insurance coverage

NOTE: Questions 18-21 apply only to health insurance and job loss of a family member living in the household. Information on health coverage and job

loss for family members outside the household that affects household members is excluded due to the design of the questionnaire.

438	18b		LAID OFF/LOST JOB IN PAST 12 MONTHS
		2,707	1. Yes
		41,949	2. No
		3	3. Unknown
		17,393	4. Under 18 years of age

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1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
439	18d		TIMES LAID OFF/LOST JOB IN PAST 12 MONTHS
		2,139	1. 1 time
		290	2. 2 times
		93	3. 3 times
		36	4. 4 times
		15	5. 5 times
		15	6. 6 times
		4	7. 7 times
		9	8. 8+ times
		106	9. Unknown
		59,345	Blank. Not applicable (Chr. 438 = 2-4)

440-441	18e		MONTH LAID OFF/LOST JOB LAST OR ONLY TIME
		244	01. January
		202	02. February
		212	03. March
		189	04. April
		190	05. May
		223	06. June
		210	07. July
		210	08. August
		208	09. September
		240	10. October
		254	11. November
		250	12. December
		75	13. Unknown
		59,345	Blank. Not applicable (Chr. 438 = 2-4)

442-443 18e MONTH LAID OFF/LOST JOB SECOND TIME AGO

46	01.	January
28	02.	February
33	03.	March
36	04.	April
32	05.	May
43	06.	June
47	07.	July
38	08.	August
31	09.	September
28	10.	October
30	11.	November
44	12.	December
132	13.	Unknown
61,484	Blank.	Not applicable

1 HI-44

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
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444-445 18e MONTH LAID OFF/LOST JOB THIRD TIME AGO

13	01.	January
13	02.	February
5	03.	March
6	04.	April
17	05.	May
11	06.	June
8	07.	July
10	08.	August
8	09.	September
10	10.	October
19	11.	November
7	12.	December
151	13.	Unknown
61,774	Blank.	Not applicable

446 19b LOSS OF HEALTH INSURANCE COVERAGE THROUGH
LAYOFF/JOB LOSS IN FAMILY

1,586	1.	Lost coverage
60,463	2.	Did not lose coverage
3	3.	Unknown if lost coverage

447 20a WITHOUT HEALTH INSURANCE DUE TO LAYOFF/JOB
LOSS

1,230	1. Yes
355	2. No
1	3. Unknown
60,466	Blank. Not applicable (Chr. 446 = 2-3)

448-449	20b	LENGTH OF TIME WITHOUT HEALTH INSURANCE DUE TO LAYOFF/JOB LOSS
	98	00. Less than 1 month
	1,103	01-12. 1-12 months
	29	13. Unknown
	60,822	Blank. Not applicable (Chr. 446 = 2-3 or Chr. 447 = 2-3)

1

HI-45

1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
450 THOSE	21a		COVERED BY SOME HEALTH CARE PROGRAM FOR WITH TIME WITHOUT HEALTH INSURANCE COVERAGE DUE TO LAYOFF/JOB LOSS
		122	1. Yes, lost coverage, but covered by health care program
		1,059	2. No, lost coverage and not covered by health care program
		49	3. Lost coverage, unknown if covered by health care program
		60,822	Blank. Not applicable (Chr. 446 = 2-3 or Chr. 447 = 2-3)

451-452 PROGRAM	21b	LENGTH OF TIME COVERED BY SOME HEALTH FOR THOSE WITH LOST HEALTH INSURANCE
	18	00. Less than 1 month
	89	01-12. 1-12 months
	15	13. Unknown
	61,930	Blank. Not applicable (Chr. 446 = 2-3 or Chr. 447 = 2-3 or Chr. 450 = 2-3)

453	Recode	LAYOFF/JOB LOSS STATUS OF FAMILY LIVING IN HOUSEHOLD
		1. No family member known to be laid
	54,405	

		2,707	off/lost job
		4,933	2. This person laid off/lost job
			3. One or more family members laid off/lost job, but not this person
one		7	4. Unknown layoff/job loss status of
			or more adult family members, no one known to be laid off/lost job

454	Recode		HEALTH COVERAGE RECODE
		60,463	1. No lost coverage
		355	2. Lost coverage, but not without insurance
but		122	3. Lost coverage, without insurance, covered by health care program
not		1,059	4. Lost coverage, without insurance, covered by health care program
		1	5. Lost coverage, unknown if without health insurance
		49	6. Lost coverage, without insurance, unknown if covered by health care program
		3	7. Unknown if lost health insurance coverage

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1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape	Locations	Item No.	Frequency	Items and Codes
455-457		Recode		MONTHS WITH NO INSURANCE AND NO HEALTH CARE PROGRAM
			148	000. None or less than 1 month
			1,004	001-012. 1-12 months
			79	013. Some period without coverage, insurance and/or health care program, unknown how long
			3	014. Unknown if without coverage
			60,463	100. Never lost coverage
			355	200. Lost coverage, but never without insurance

NOTE: Chrs. 456-457 identify the number of months with no health care coverage for all persons.

458	18f		RECEIPT OF UNEMPLOYMENT INSURANCE
		875	1. Yes
		1,827	2. No

5
59,345

3. Unknown
Blank. Not applicable (Chr. 438 = 2-4)

NOTE: Question 18e applies only to health insurance and job loss of a family member living in the household. Information on health coverage and job loss for family members outside the household that affects household members is excluded due to the design of the questionnaire.

459-470	18e		MONTH AND YEAR LAID OFF OR LOST JOB
459-462	(1)		TIME 1 - LAID OFF OR JOB LOST
			Format = MMYT
			Where
		201	MM = 01. January
		163	02. February
		180	03. March
		165	04. April
		178	05. May
		215	06. June
		211	07. July
		216	08. August
		218	09. September
		260	10. October
		282	11. November
		298	12. December
		1,259	YY = 85. 1985
		1,328	86. 1986
		106	9999. Unknown or refused or time interval greater than 13 months
		59,359	Blank. Not applicable

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1986 NHIS HEALTH INSURANCE SUPPLEMENT
PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
459-470	18e		MONTH AND YEAR LAID OFF OR LOST JOB (continued)
463-466	(2)		TIME 2 - LAID OFF OR JOB LOST
			Format = MMYT
			Where
		53	MM = 01. January
		44	02. February
		44	03. March
		52	04. April

42 05. May
 47 06. June
 49 07. July
 33 08. August
 27 09. September
 15 10. October
 19 11. November
 2 12. December

151 YY = 85. 1985
 276 86. 1986

55 9999. Unknown or refused or time
 interval greater than 13 months
 61,570 Blank. Not applicable

1 HI-48

1986 NHIS HEALTH INSURANCE SUPPLEMENT
 PUBLIC USE FILE

Tape Locations	Item No.	Frequency	Items and Codes
459-470	18e		MONTH AND YEAR LAID OFF OR LOST JOB (continued)
467-470	(3)		TIME 3 - LAID OFF OR JOB LOST
			Format = MMY Where
		36	MM = 01. January
		28	02. February
		17	03. March
		9	04. April
		14	05. May
		14	06. June
		2	07. July
		4	08. August
		1	09. September
		1	10. October
		2	11. November
		0	12. December
		29	YY = 85. 1985
		98	86. 1986
		1	87. 1987
		17	9999. Unknown or refused or time interval greater than 13 months
		61,907	Blank. Not applicable