

Health Data Available at the Chicago Census RDC

Confidential (restricted-use) versions of NCHS and AHRQ data are available to qualified researchers at the Chicago Census Research Data Center (Chicago RDC) located at the Federal Reserve Bank of Chicago.¹

Confidential versions of health data include restricted variables with lower level geographic identifiers, dates or equivalent ages, more detailed occupational codes, mortality-linked data, smaller race/ethnic groups, more detailed measures of income and diagnoses, continuous/non-top coded variables, and other information that could lead to identification of study participants.

Advantages of using confidential data over public use data include:

- Restricted variables can be used to link two or more datasets, data from other government agencies, and researcher-collected data.
- Finer levels of geography are useful in statistical analyses where spatial and location effects are important.
- Restricted variables can be used to pare down sample groups (e.g., by gender or racial groups).
- Restricted variables can be used as controls in analyses or they may be directly related to main research questions.

Recent examples of papers using health data in the RDC system:

- “The Effects of Smoking in Young Adulthood on Smoking and Health Later in Life: Evidence Based on the Vietnam Era Draft Lottery.” by Daniel Eisenberg and Brian Rowe. Center for Economic Studies working paper no. 08-35. Available: <http://www.ces.census.gov/index.php/ces/cespapers>
- “Early Origins of Health Disparities: Burden of infection, health, and socioeconomic status in U.S. Children.” By Jennifer Dowd, Anna Zajacova, and Allison Aiello. *Social Science and Medicine*, February 2009, vol. 68, issue 4.

Examples of Health research currently taking place at the Chicago RDC include:

- Examining how the provisions of care through health care safety nets affect health outcomes for children.
- Analyzing how business cycles affect health outcomes.
- Estimating the impact of employer premium subsidies on the demand for health insurance, deductibles, and co-payments.
- Analyzing how the State Children’s Health Insurance Program affects household out-of-pocket medical expenditures.

¹ Note: The Chicago RDC also provides the opportunity for researchers to access economic and demographic micro data from the U.S. Census Bureau. These proposals must meet U.S. Census Bureau standards for benefits. Please contact the Chicago RDC for additional information:

<http://www.chicagordc.org/> .

All proposals for health projects must be approved by the sponsoring agency (NCHS or AHRQ). To access the data at the Chicago RDC, the proposal must also be submitted to Census, but will not have to meet Census standards for benefits (as the case with projects that use U.S. Census Bureau data).

- For information on the NCHS proposal process: <http://www.cdc.gov/rdc>
- For information on the AHRQ proposal process: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp
- For more information about the Chicago Census RDC, please visit: <http://www.chicagordc.org/>

For any questions about data access through the Chicago RDC, please contact Frank Limehouse, Economist and Administrator at the Chicago RDC at the Federal Reserve Bank of Chicago: flimehouse@frbchi.org or 312-322-6002.

Health Data Listing

*** Note that these data are frequently updated with more recent time periods and new datasets. Please consult the sponsoring agencies' websites for the most up-to-date information on data and time periods available.

NCHS DATA

Longitudinal Study on Aging (LSOA) I and II

Frequency: Every two years

Time Periods: 1984 – 1990, 1994 – 2000

Number of Observations: 7,527 in 1984 and 9,447 in 1994

Description: The Longitudinal Study on Aging was designed to describe the continuum from functionally independent living in the community, through dependence, including institutionalization, to death. It also studies of health care use for individuals over time and provides mortality rates for demographic, social, economic, and health characteristics that are not available from the vital statistics system. The survey includes data on demographic characteristics, limitation of activities, chronic conditions and impairments, doctor visits, hospital stays, surgical procedures, health insurance coverage, family structure, living arrangements, use of community services, activities of daily living, hospice care, fact of death, and cause of death.

Sponsor: National Center for Health Statistics and the National Institute on Aging

Additional Documents: <http://www.cdc.gov/nchs/lsoa.htm>

Survey Forms: http://www.cdc.gov/nchs/data/series/sr_01/sr01_028.pdf (appendices)

National Ambulatory Medical Care Survey (NAMCS)

Frequency: Annual

Time Periods: 1973 – 1981, 1985, 1989 – 2007

Number of Observations:

Description: The National Ambulatory Medical Care Survey (NAMCS) is a national survey designed to meet the need for objective, reliable information about the provision and use of ambulatory medical care services in the United States. Findings are based on a sample of visits to nonfederally employed office-based physicians who are primarily engaged in direct patient care. Data are obtained on patients' symptoms, physicians' diagnoses, and medications ordered or

provided. The survey also provides statistics on the demographic characteristics of patients and services provided, including information on diagnostic procedures, patient management, and planned future treatment.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/ahcd.htm>

<http://www.cdc.gov/nchs/data/ahcd/NAMCSandNHAMCSDataAvailable.pdf>

Survey Forms: <http://www.cdc.gov/nchs/ahcd/surinst.htm#Survey%20Instrument%20NAMCS>

National Employer Health Insurance Survey (NEHIS)

Frequency: Once

Time Periods: 1967-2005

Number of Observations: 39,000

Description: The National Employer Health Insurance Survey (NEHIS) was developed to produce estimates on employer-sponsored health insurance data in the United States. Data collected in the survey provide baseline data by State on various aspects of employer-sponsored health insurance, including employees eligible for coverage and their take-up rate, type and number of plans offered to employees, as well as detailed characteristics of plans offered (monthly premiums, employer and employee contributions to premiums, deductibles, coinsurance, and covered services).

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/data/misc/employ2.pdf>

ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NEHIS/hormfil3.pdf

Survey Forms:

National Health and Nutrition Examination Survey (NHANES) I, II, III, and ongoing

Frequency: Single surveys conducted over several years

Time Periods: 1971 – 1975, 1976 – 1980, 1988 – 1994, 1999-2000, 2001-2002, 2003-2004

Number of Observations: 23,000 – 32,000, depending on year

Description: The National Health and Nutrition Examination Survey (NHANES) is a program of studies designed to assess the health and nutritional status of adults and children in the United States. The survey is unique in that it combines interviews and physical examinations. Risk factors, those aspects of a person's lifestyle, constitution, heredity, or environment that may increase the chances of developing a certain disease or condition, will be examined. Smoking, alcohol consumption, sexual practices, drug use, physical fitness and activity, weight, and dietary intake will be studied. Data on certain aspects of reproductive health, such as use of oral contraceptives and breastfeeding practices, will also be collected. The sample for the survey is selected to represent the U.S. population of all ages. To produce reliable statistics, NHANES over-samples persons 60 and older, African Americans, and Hispanics.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nhanes.htm>

Survey Forms: http://www.cdc.gov/nchs/nhanes/nhanes_questionnaires.htm

National Health Interview Survey (NHIS)

Frequency: Annual

Time Periods: 1957 – 2008

Number of Observations: currently 35,000 households with 87,500 persons

Description: The main objective of the NHIS is to monitor the health of the United States population through the collection and analysis of data on a broad range of health topics. The Household component collects limited demographic information on all of the individuals living in a

particular house. The Family component verifies and collects additional demographic information on each member from each family in the house and collects data on topics including health status and limitations, injuries, healthcare access and utilization, health insurance, and income and assets. The Family Core component allows the NHIS to serve as a sampling frame for additional integrated surveys as needed. Data for a sample adult and sample child are also collected. Specific data for individuals includes medical conditions, limitation of activity, health status, health care access, AIDS, and immunizations.

While the NHIS has been conducted continuously since 1957, the content of the survey has been updated about every 10-15 years. In 1996, a substantially revised NHIS questionnaire began field testing. This revised questionnaire, described in detail below, was implemented in 1997 and has improved the ability of the NHIS to provide important health information.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nhis.htm>

Survey Forms: http://www.cdc.gov/nchs/nhis/quest_doc.htm

National Health Provider Inventory (NHPI)

Frequency: Once

Time Periods: 1991

Number of Observations: 7,804 agencies and 55,782 facilities

Description: The 1991 NHPI is an inventory (not a sample survey) of health providers. The inventory covers two distinct types of health providers and, therefore, required two separate questionnaires. Nursing homes and board and care homes were sent facility questionnaires, and home health agencies and hospices were sent agency questionnaires. The data for the agencies includes information on number of clients and services provided. The data for the facilities includes information on the type of facility, ownership, number of beds, number of residents, and select demographics of residents.

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/products/elec_prods/subject/nhpi.htm

Survey Forms:

National Home and Hospice Care Survey (NHHCS)

Frequency: Every two years

Time Periods: 1992-1994, 1996 – 2000, 2007

Number of Observations:

Description: The National Home and Hospice Care Survey (NHHCS) is a continuing series of surveys of home and hospice care agencies in the United States. Information was collected about agencies that provide home and hospice care and about their current patients and discharges. Specific data includes information on referral and length of service, diagnoses, number of visits, patient charges, health status, reason for discharge, and types of services provided.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nhhcs.htm>

Survey Forms: http://www.cdc.gov/nchs/nhhcs/nhhcs_questionnaires.htm

National Hospital Ambulatory Medical Care Survey (NHAMCS)

Frequency: Annual

Time Periods: 1992 – 2007

Number of Observations:

Description: The National Hospital Ambulatory Medical Care Survey (NHAMCS) is designed to collect data on the utilization and provision of ambulatory care services in hospital emergency and

outpatient departments. Data are obtained on demographic characteristics of patients, expected source(s) of payment, patients' complaints, physicians' diagnoses, diagnostic/screening services, procedures, medication therapy, disposition, types of health care professionals seen, causes of injury where applicable, and certain characteristics of the hospital, such as type of ownership.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/ahcd.htm>,

<http://www.cdc.gov/nchs/data/ahcd/NAMCSandNHAMCSDataAvailable.pdf>

Survey Forms: <http://www.cdc.gov/nchs/ahcd/surinst.htm#Survey%20Instrument%20NHAMCS>

National Hospital Discharge Survey (NHDS)

Frequency: Annual

Time Periods: 1965 – 2006

Number of Observations: 270,000 inpatient records from 500 hospitals, reduced to 239 hospitals in 2007

Description: The National Hospital Discharge Survey (NHDS) is a national probability survey designed to meet the need for information on characteristics of inpatients discharged from non-Federal short-stay hospitals in the United States. Identifying information collected includes hospital information, length of stay, and geographic location. The patient characteristics section provides basic demographic information of the patient. Admissive information includes the type of admission, status of patient at discharge, and payment information. Finally, the medical information section details the principal diagnosis and any surgical or diagnostic procedures performed.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nhds.htm>

Survey Forms: <http://www.cdc.gov/nchs/data/hdasd/nhdsform.pdf>

National Immunization Survey (NIS)

Frequency: Annual

Time Periods: 1994 – 2007

Number of Observations: 29,880 most recently

Description: The National Immunization Survey (NIS) is used to assess progress towards the goals set out in the Childhood Immunization Initiative (CII) of 1996. The NIS study has two parts. First, a household telephone survey. This survey asks questions about childhood immunization for children 19-35 months of age and requests parental permission for contacting children's vaccination providers. Data are used primarily to monitor immunization coverage in the preschool population. The second part is a survey of vaccination providers. This survey of doctors and other vaccination providers is conducted for study participants who have provided consent for this phase of the study. Data includes vaccination history, demographic data for the child and parents, geographic data, and healthcare provider information.

Sponsor: The National Immunization Program and the National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nis/Default.htm>

Survey Forms: <http://www.cdc.gov/nis/datafiles.htm> (appendices of user guides) for households and http://www.cdc.gov/nis/pdfs/nis_ihq_04_06%20pdf.pdf for vaccination providers

National Nursing Home Survey (NNHS)

Frequency: Irregular

Time Periods: 1974, 1977, 1985, 1995, 1997, 1999, 2004

Number of Observations: 1,174 facilities and 3,017 personnel

Description: The National Nursing Home Survey (NNHS) is one in a continuing series of nationally representative sample surveys of United States nursing homes, their services, their staff, and their

residents. The National Nursing Home Survey provides information on nursing homes from two perspectives—that of the provider of services and that of the recipient of care. Data about the facilities include characteristics such as size, ownership, Medicare/Medicaid certification, services provided and specialty programs offered, and charges. For recipients, data were obtained on demographic characteristics, health status and medications taken, services received, and sources of payment.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nrhs.htm>

Survey Forms: http://www.cdc.gov/nchs/nrhs/nrhs_questionnaires.htm

National Survey of Ambulatory Surgery (NSAS)

Frequency: Irregular

Time Periods: 1994 to 1996, 2006

Number of Observations: 60,000 surgery cases

Description: The National Survey of Ambulatory Surgery (NSAS) is the only national study of ambulatory surgical care, and its goal is to provide critical information for to be used for a variety of planning, administrative and evaluation activities by government, professional, scientific, academic, and commercial institutions, as well as by private citizens. Facility information includes data on accreditation, licensing, Medicare certification, ownership, sources of revenue, composition of staff, staff training, and postoperative procedures. Case information includes data on patient characteristics, form of payment, primary diagnosis, surgical and diagnostic procedures, and post operation status.

Efforts are now underway to include ambulatory surgery centers in the National Hospital Ambulatory Medical Care Survey (NHAMCS). The [NHAMCS website](#) provides more information on the efforts.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nsas.htm>

Survey Forms: http://www.cdc.gov/nchs/data/hdasd/nsas_participant/nsas3-1.pdf

National Survey of Family Growth (NSFG)

Frequency: Irregular, but continuous starting in 2007

Time Periods: 1973, 1976, 1982, 1988, 1995, 2006, 2007

Number of Observations: 4,400 per year currently

Description: The National Survey of Family Growth (NSFG) gathers information on family life, marriage and divorce, pregnancy, infertility, use of contraception, and men's and women's health. The female respondent file includes: demographic information, pregnancy history and adoption-related information, and marital and cohabitation history. Data on fecundity, birth expectations, contraceptive use, pregnancy desire, use of family planning services, infertility, and other topics are also included. The male respondent file includes: demographic information and information on wives, cohabiting partners, recent sexual partners, and contraceptive use, as well as data on infertility, biological and adopted children, birth expectations, and activities with his children, among other topics.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/nsfg.htm>

Survey Forms: http://www.cdc.gov/nchs/nsfg/nsfg_questionnaires.htm

National Longitudinal Mortality Study (NLMS)

Survey Unit: Individual

Frequency: 1973 - 2002

Time Periods: Irregular

Number of Observations: 3 million records total

Description: The National Longitudinal Mortality Study (NLMS) consists of a database developed for the purpose of studying the effects of demographic and socio-economic characteristics on differentials in U.S. mortality rates. The NLMS is a unique research database in that it is based on a random sample of the non-institutionalized population of the United States. It consists of U.S. Census Bureau data from Current Population Surveys, Annual Social and Economic Supplements and a subset of the 1980 Census combined with death certificate information to identify mortality status and cause of death. The survey includes demographic data, employment status, death records, and geographic information.

Sponsor: The National Center for Health Statistics (NCHS)

Additional Documents: <http://www.census.gov/nlms/>
<http://www.census.gov/nlms/docs/referenceManual.pdf>

Survey Forms:

Geographical Information: state, county, city, place, tract

State and Local Area Integrated Telephone Survey (SLAITS)

Child Well-Being and Welfare Module

Frequency: Once

States involved: Texas and Minnesota

Time Periods: 1998 - 1999

Number of Observations: 2,192 children

Description: With questions drawn from numerous national surveys, this module investigates the association between public assistance program participation and factors that may relate to child well-being (e.g., health care coverage, reliable child care, safe neighborhoods, and parental employment). In 1998 and 1999, this module was pilot-tested in a random sample of low-income families in Texas. Also, it included a special Medicaid sample obtained from administrative data in Texas and Minnesota. The sampling frame comes from random-digit-dialing in Texas (including an oversample of households with children under age 18 years and with a household income below 200 percent of poverty), as well as list samples of known Medicaid participants in Texas and Medicaid and Minnesota Care participants in Minnesota. Specific data includes child's demographic information, parents' information, composition of household, insurance use, childcare information, education history, participation in extracurricular activities, and use of government programs.

Sponsor: Office of the Assistant Secretary for Planning and Evaluation of the Department of Health and Human Services

Additional Documents: http://www.cdc.gov/nchs/slaits/child_tx_mn.htm

Survey Forms: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/slaits/survey%20instruments/survey_mn99.pdf and ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/slaits/survey%20instruments/survey_tx98.pdf

Health Module

Frequency: Once

Time Periods: 1997

States involved: Iowa, Washington

Number of Observations: 5,541 persons

Description: The Health Module uses questions from the National Health Interview Survey and the Survey of Income and Program Participation. It includes items on access and barriers to care, health insurance coverage, health status, health care utilization, demographic characteristics, and family income. This module was pilot-tested in Iowa and Washington. Data includes household composition, demographics, healthcare use, medical limitations, and insurance use.

Sponsor: Office of the Assistant Secretary for Planning and Evaluation of the U.S. Department for Health and Human Services

Additional Documents: http://www.cdc.gov/nchs/slait/mod_io_wa.htm

Survey Forms: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/slait/survey%20instruments/survey_iawa97.pdf

National Asthma Survey

Frequency: Once

Time Periods: 2003-2004

Number of Observations: 8,621

Description: The National Asthma Survey examines the health, socioeconomic, behavioral, and environmental predictors that relate to better control of asthma. This study will also help to characterize the content of care and health care experiences of persons with asthma. Data includes information on demographics, diagnosis background, symptoms, medical treatment, prescription drug use, family history of asthma, and other medical conditions.

Sponsor: National Center for Environmental Health

Additional Documents: <http://www.cdc.gov/nchs/slait/nas.htm>

Survey Forms: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/slait/variables/contents_national.pdf

National Survey of Children with Special Health Care Needs

Frequency: Irregular

Time Periods: 2001, 2005-2006, 2008

Number of Observations: 3,450 children

Description: The primary goal of this module is to assess the prevalence and impact of special health care needs among children in all 50 States and the District of Columbia. This survey explores the extent to which children with special health care needs (CSHCN) have medical homes, adequate health insurance, and access to needed services. Other topics include care coordination and satisfaction with care. More than 3,000 households with children were screened in order to identify 750 children with special needs in each State. Interviews were conducted with their parents. Also, brief health insurance interviews were conducted for children without special needs to estimate State-level health care coverage using equivalent-sized samples in each State. Finally, for uninsured children from low-income households, questions about parents' awareness of and experience with Medicaid and the State Children's Health Insurance Program (SCHIP) were asked. Questions address health and functional status, health insurance and adequacy, healthcare access and utilization, satisfaction with care, and impact on families.

Sponsor: Maternal and Child Health Bureau of the Health Resources and Services

Administration and Office of the Assistant Secretary for Planning and Evaluation of the Department of Health and Human Services

Additional Documents: <http://www.cdc.gov/nchs/slait/eshcn.htm>

Survey Forms: [http://www.cdc.gov/nchs/data/slait/NS-CSHCN%20Questionnaire%20\(website\)1.pdf](http://www.cdc.gov/nchs/data/slait/NS-CSHCN%20Questionnaire%20(website)1.pdf)

National Survey of Children's Health

Frequency: Irregular

Time Periods: 2003-2004, 2007-2008

Number of Observations: 91,642 for 2007, 102,353 for 2003

Description: The National Survey of Children's Health examines the physical and emotional health of children ages 0-17 years of age. Special emphasis is placed on factors that may relate to well-being of children, including medical homes, family interactions, parental health, school and after-school experiences, and safe neighborhoods. Data covers demographics, health and functional status, insurance coverage, healthcare access and utilization, medical history, early childhood care, school history, family functioning, parental health, and community characteristics.

Sponsor: Department of Health and Human Services, Maternal and Child Health Bureau

Additional Documents: <http://www.cdc.gov/nchs/slait/nsch.htm>

Survey Forms: http://www.cdc.gov/nchs/data/slait/nsch_production_hardcopy_mid-Q207_update.pdf

National Survey of Early Childhood Health

Frequency: Once

Time Periods: 2000

Number of Observations: 2,068 children

Description: This survey provides national baseline data on pediatric care (and its impact) from the parent's perspective. Questions focus on the delivery of pediatric care to families with children under 3 years of age and the promotion of young children's health by families in their homes. Data covers demographics, healthcare utilization, parental perception of care, interactions with healthcare providers, family interaction and home safety, parental and child health, and financial welfare and health insurance.

Sponsor: Major funding for this project was provided by a grant to the American Academy of Pediatrics from the Gerber Foundation. Additional support was provided by the Maternal and Child Health Bureau and the AAP Friends of Children Fund.

Additional Documents: <http://www.cdc.gov/nchs/slait/nsech.htm>

Survey Forms: http://www.cdc.gov/nchs/data/slait/survey_sech00.pdf

Vital Statistics

Birth Data

Frequency: Annual

Time Periods: 1968 – 2007

Number of Observations: 4,317,119 in 2007

Description: In the United States, State laws require birth certificates to be completed for all births, and Federal law mandates national collection and publication of births and other vital statistics data. Information includes data on pregnancy and birth, characteristics of mother, risk factors, and prenatal care.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/births.htm>

Survey Forms: <http://www.cdc.gov/nchs/data/nativity/2003%20Final%20Birth.pdf>

Fetal Deaths

Frequency: Annual

Time Periods: 1982 to 2005

Number of Observations: 25,655 in 2004

Description: Infant mortality is an important indicator of the health of a nation, as it is associated with a variety of factors such as maternal health, quality and access to medical care, socioeconomic conditions, and public health practices. Information includes occurrence circumstances, mother's information, prenatal care, fetus's information, pregnancy history, father's information, and other medical and health data.

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/fetal_death.htm

Survey Forms: <http://www.cdc.gov/nchs/data/dvs/FinalFetalDeathSpecs2-22-05.pdf>

Marriage and Divorce Statistics

Frequency: Annual

Time Periods:

Number of Observations: 2,226,207 marriages and 882,445 divorces in 2007

Description: Information on the total numbers and rates of marriages and divorces at the national and State levels are published in the NCHS [National Vital Statistics Reports](#). The collection of detailed data was suspended beginning in January 1996. Limitations in the information collected by the States as well as budgetary considerations necessitated this action. The most recent comprehensive analyses of detailed marriage and divorce data are published in [Advance Report of Final Marriage Statistics, 1989-90](#) and [Advance Report of Final Divorce Statistics, 1989-90](#). Beginning with the June 2003 data, detailed State tables of marriage and divorce levels have been included in the monthly reports of provisional data published in the NCHS [National Vital Statistics Reports](#). Prior to this, these data were available in the [Detailed Statistical Tables](#) section of NCHS' Data Warehouse website. Marriage and divorce rates currently may be calculated from provisional counts received from State health departments. Trend [marriage \[PDF, 128 KB\]](#) and [divorce \[PDF, 24 KB\]](#) rates by State for 1990, 1995, and 1999-2007 are available. [National marriage and divorce rate trends](#) for 2000-2007 are also available.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/mardiv.htm>

Survey Forms:

Mortality Data

Frequency: Annual

Time Periods: 1979 - 2006

Number of Observations:

Description: Data includes deceased's basic information, circumstances of death, cause of death, and deceased's demographic information. [Standard forms](#) for the collection of the data and [model procedures](#) for the uniform registration of the events are developed and recommended for nationwide use through cooperative activities of the jurisdictions and NCHS. Material is available to assist persons in completing the death certificate.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/deaths.htm>

Survey Forms: <http://www.cdc.gov/nchs/data/dvs/DEATH11-03final-ACC.pdf>

National Death Index

Frequency: Annual

Time Periods: 1979 - 2007

Number of Observations:

Description: The National Death Index is a central computerized index of death record information on file in the State vital statistics offices. Working with these State offices, NCHS established the NDI as a resource to aid epidemiologists and other health and medical investigators with their mortality ascertainment activities. The index contains a standard set of identifying information on each death to be used in searches of the file to identify and locate death records in the State offices.

Sponsor: National Center for Health Statistics

Additional Documents: <http://www.cdc.gov/nchs/ndi.htm>

Survey Forms:

Linked Data

NHIS with Mortality data 1986-2006

Frequency: Annual

Number of records: varies by year, from 60,000 to 120,000

Description: The updated NHIS Linked Mortality Restricted-use Files provide mortality follow-up data for the NHIS years 1986-2004 from the date of interview through December 31, 2006. Mortality ascertainment is based primarily upon the results from a probabilistic match between NHIS and NDI death certificate records. Each NHIS survey year (1986-2004) is available on a separate data file. Additional death certificate data are available by special request. The NHIS Linked Mortality Restricted-use data files do not contain perturbed data.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nhis_linkage_restricted_use.htm

NHIS with Medicare Enrollment and Claims data 1991-2000

Frequency: Annual

Number of records: varies by year, 4,000 to 15,000

Description: NCHS is currently linking various NCHS surveys with Medicare enrollment and claims records collected from the [Centers for Medicare and Medicaid Services \(CMS\)](#). Medicare enrollment and claims data are available for those NCHS respondents who agreed to provide personal identification data to NCHS and for whom NCHS was able to match with Medicare administrative records. CMS provided NCHS with Medicare benefit claims data for 1991 through 2000 for all successfully matched NCHS survey participants. For certain NCHS surveys, the Medicare administrative files include data from before and after the survey year of interview.

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/cms.htm

http://www.cdc.gov/nchs/data/datalinkage/nchs_cms_linked_table.pdf

NHANES I Epidemiologic Follow-up Study with Mortality data 1971-2006

Number of records: 14,407

Description: The updated NHEFS Linked Mortality Restricted-use File provides mortality follow-up data from the date of NHANES I survey participation (1971-1975) through December 31, 2006. Mortality ascertainment is based primarily upon deaths previously identified during one of the NHEFS follow-up periods (1982-84, 1986, 1987, and 1992) and the results from a probabilistic match between NHEFS and NDI death certificate records. The NHEFS Linked Mortality Restricted-use data contains 14,407 records with

information on NHEFS participant eligibility status, vital status, date of death, age at death, and underlying and contributing causes of death. Additional death certificate data are available by special request. The NHEFS Linked Mortality Restricted-use data file does not contain perturbed data.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nhefs_linkage_restricted_use.htm

NHANES I Epidemiologic Follow-up Study with Medicare Enrollment and Claims data 1991-2000

Frequency: Annual

Number of records: around 3,500 for each year

Description: Medicare enrollment and claims data are available for those NCHS respondents who agreed to provide personal identification data to NCHS and for whom NCHS was able to match with Medicare administrative records. CMS provided NCHS with Medicare benefit claims data for 1991 through 2000 for all successfully matched NCHS survey participants. For certain NCHS surveys, the Medicare administrative files include data from before and after the survey year of interview.

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/cms.htm

http://www.cdc.gov/nchs/data/datalinkage/nchs_cms_linked_table.pdf

NHANES II with Mortality data 1976-2006

Number of records: 9,252

Description: The updated NHANES II Linked Mortality Restricted-use File provides mortality follow-up data from the date of NHANES II participation (1976-1980) through December 31, 2006. Mortality ascertainment is based primarily upon the results from a probabilistic match between NHANES II and NDI death certificate records. The NHANES II Linked Mortality Restricted-use data contains 9,252 records with information on NHANES II participant eligibility status, vital status, date of death, age at death, and underlying and contributing causes of death. Additional death certificate data are available by special request. The NHANES II Linked Mortality Restricted-use data file does not contain perturbed data.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nhanesii_linkage_restricted_use.htm

NHANES II with Medicare Enrollment and Claims data 1991-2000

Frequency: Annual

Number of records: 2,600-3,300 per year

Description: Medicare enrollment and claims data are available for those NCHS respondents who agreed to provide personal identification data to NCHS and for whom NCHS was able to match with Medicare administrative records. CMS provided NCHS with Medicare benefit claims data for 1991 through 2000 for all successfully matched NCHS survey participants. For certain NCHS surveys, the Medicare administrative files include data from before and after the survey year of interview.

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Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/cms.htm

http://www.cdc.gov/nchs/data/datalinkage/nchs_cms_linked_table.pdf

NHANES III with Mortality data 1988-2006

Number of records: 33,994

Description: The updated NHANES III Linked Mortality Restricted-use File provides mortality follow-up data from the date of NHANES III survey participation (1988-1994) through December 31, 2006. Mortality ascertainment is based primarily upon the results from a probabilistic match between NHANES III and NDI death certificate records. The NHANES III Linked Mortality Restricted-use data contains 33,994 records with information on NHANES III participant eligibility status, vital status, date of death, age at death, and underlying and contributing causes of death. Additional death certificate data are available by special request. The NHANES III Linked Mortality Restricted-use data file does not contain perturbed data.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nhanes3_linkage_restricted_use.htm

NHANES III with Medicare Enrollment and Claims data (CMS-1991-2000)

Frequency: Annual

Number of records: 5,000-5,500 per year

Description: Medicare enrollment and claims data are available for those NCHS respondents who agreed to provide personal identification data to NCHS and for whom NCHS was able to match with Medicare administrative records. CMS provided NCHS with Medicare benefit claims data for 1991 through 2000 for all successfully matched NCHS survey participants. For certain NCHS surveys, the Medicare administrative files include data from before and after the survey year of interview.

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/cms.htm

http://www.cdc.gov/nchs/data/datalinkage/nchs_cms_linked_table.pdf

NHANES (1999-2004) with Mortality data

Number of records: 31,126

Description: The NHANES Linked Mortality Restricted-use Files provide mortality follow-up data from the date of NHANES survey participation (1999-2004) through December 31, 2006. Mortality ascertainment is based primarily upon the results from a probabilistic match between NHANES and NDI death certificate records. The NHANES Linked Mortality Restricted-use data contains information on NHANES participant eligibility status, vital status, date of death, age at death, and underlying and contributing causes of death. Additional death certificate data are available by special request. The NHANES Linked Mortality Restricted-use data files do not contain perturbed data.

Sponsor: National center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nhanes_99_04_linkage_restricted_use.htm

LSOA II with Mortality data 1994-2006

Number of records: 9,447

Description: NCHS has updated the mortality linkage of the [Second Longitudinal Study of Aging \(LSOA II\)](#) to death certificate data found in the [National Death Index \(NDI\)](#). The updated LSOA II Linked Mortality File provides mortality follow-up data from the date of SOA II interview (1994-1996) through December 31, 2006. Mortality ascertainment is based primarily upon deaths previously identified during one of two follow-up interviews, in 1997-1998 and 1999-2000, and results from a probabilistic match between LSOA II and NDI death certificate records. Linkage of the LSOA II survey participants with the NDI provides the opportunity to conduct a vast array of outcome studies designed to investigate the association of a wide variety of health factors with mortality. NCHS recommends that researchers use the new linked mortality file as it supersedes the prior data release of the LSOA II Linked Mortality File.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/lsoaii_linkage_restricted_us_e.htm

LSOA II with Medicare Enrollment and Claims data 1991-2000

Frequency: Annual

Number of Records: 5,200-7,000 per year

Description: Medicare enrollment and claims data are available for those NCHS respondents who agreed to provide personal identification data to NCHS and for whom NCHS was able to match with Medicare administrative records. CMS provided NCHS with Medicare benefit claims data for 1991 through 2000 for all successfully matched NCHS survey participants. For certain NCHS surveys, the Medicare administrative files include data from before and after the survey year of interview.

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Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/cms.htm
<http://www.cdc.gov/nchs/data/datalinkage/nchs cms linked table.pdf>

NNHS with Mortality data

Number of records: 11,170

Description: The 1985 NNHS linked mortality file contains information based upon the results from a probabilistic match between the NCHS [National Death Index \(NDI\)](#) records and survey indication of death. The 1985 NNHS linked mortality file provides mortality follow-up data from the date of 1985 NNHS survey participation through December 31, 2000. All 1985 NNHS participants aged 18-117 years of age are included on the linked mortality file. Additional variables provided on the file include: assigned vital status, date of death, age of death, underlying and multiple causes of death.

Sponsor: National Center for Health Statistics

Additional Documents:

http://www.cdc.gov/nchs/data_access/data_linkage/mortality/nnhs_linkage.htm

NHIS with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

NHANES I with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

NHANES I Epidemiologic Follow-up Study with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

NHANES III with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

LSOA II with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

NNHS with Social Security Administration Retirement, Survivors, Disability Insurance data, and Supplemental Security Income data

Description: The NCHS health surveys were linked to five SSA Administrative Data Files: the Master Beneficiary Record (MBR) file, the Supplemental Security Record file (SSR), the Payment History Update System (PHUS) file, the 831 Disability Master File (831) and a special extract of summarized quarters of coverage (QOC) from the Master Earnings File. A quick overview of the files can be found in the [Description of the Linkage](#) and a more detailed description of these files and the variables contained in each file can be found in the [NCHS-SSA data codebook](#).

Sponsor: National Center for Health Statistics

Additional Documents: http://www.cdc.gov/nchs/data_access/data_linkage/ssa.htm

AHRQ DATA

Medical Expenditure Panel Survey

Household Component–Insurance Component Linked File

Frequency: Irregular

Time Periods: 1996 – 1999, 2001

Number of Observations:

Description: For many households, health insurance available through a household member's employer is a key source of coverage. However, many details about the health insurance plans offered by and/or obtained through employers are not readily available from household respondents. To fill this data gap, the employers of Household Component jobholders are contacted through the Insurance Component survey. Employers are asked about health insurance offerings, premiums, employee contributions to premiums and other plan details for their establishment as a whole. This information is then linked, via a data file, to data collected during the household survey for the jobholder to provide a more complete picture of the jobholder's insurance options. Significant survey non-response prevents these linked data from being used to make nationally representative estimates and results cannot be generalized beyond the sample of persons included in the file. There are no plans for collecting these data in future years.

Sponsor: Agency for Healthcare Research and Quality

Additional Documents: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp

Survey Forms:

Nursing Home Component

Frequency: Once

Time Periods: 1996

Number of Observations:

Description: The Nursing Home Component was a survey of nursing homes and persons resident in or admitted to nursing homes at any time during calendar year 1996. The survey gathered information on the demographic characteristics, residence history, health and functional status, use of services, use of prescription medications, and health care expenditures of nursing home residents. Nursing home administrators and designated staff also provided information on facility size, ownership, certification status, services provided, revenues and expenses, and other facility characteristics. A community questionnaire obtained data from next of kin or other knowledgeable persons in the community on income, assets, family relationships, and caregiving information for the sampled nursing home resident. There are no plans for collecting these data in future years.

Sponsor: Agency for Healthcare Research and Quality

Additional Documents: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp

Survey Forms:

Medical Provider Component

Frequency: Annual

Time Periods: 1996 – 2004

Number of Observations:

Description: The primary purpose of the Medical Provider Component is to collect detailed charge and payment data from hospitals, physicians, home health care providers, and pharmacies to supplement information received from Household Component respondents on their health care expenses. The billing data collected includes whether a visit was capitated, charges for each procedure (CPT4) for office-based and outpatient department visits, and amounts for each source of payment. Diagnosis codes for medical visits and stays and NDC codes for prescription drugs are also collected. While the Medical Provider Component was not designed to make stand-alone national estimates, the detailed information on payments, procedure codes, and diagnostic codes support a variety of analyses not possible with the Household Component data alone.

Sponsor: Agency for Healthcare Research and Quality

Additional Documents: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp

Survey Forms:

Two-Year, Two-Panel File

Frequency:

Time Periods: 1996 – 2004

Number of Observations:

Description: The two-year, two-panel files are person-level research files that pool data from the full-year consolidated files, supplemental variable files, and longitudinal weight files. There is a file for each panel, and each file has one record for each person and variables from the first and second years of the panels. The full-year variables were renamed so the variable names are consistent across panels to facilitate research based on pooled panels. Pooling panels may be useful for increasing the power of analyses of smaller populations, such as racial and ethnic minorities, people with disabilities, rural residents, people treated for particular health conditions, and less frequently used services.

Sponsor: Agency for Healthcare Research and Quality

Additional Documents: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp
Survey Forms:

Area Resource File

Frequency:

Time Periods:

Number of Observations:

Description: The Area Resource File is a county-specific health resources data file designed to be used by planners, policy makers, researchers, and other professionals interested in the nation's health care delivery system and factors that may impact health status and health care in the U.S. It is a database containing more than 7,000 variables for each of the nation's counties. The Area Resource File contains information on health facilities, health professions, measures of resource scarcity, health status, economic activity, health training programs, and socioeconomic and environmental characteristics. Data from the Area Resource File can be merged onto the MEPS data at the county level for use in the AHRQ Data Center only.

Sponsor: Agency for Healthcare Research and Quality

Additional Documents: http://www.meps.ahrq.gov/mepsweb/data_stats/onsite_datacenter.jsp

Survey Forms:

SOURCES:

National Center for Health Statistics: <http://www.cdc.gov/nchs/Default.htm>, <http://www.cdc.gov/rdc/>

Medical Expenditure Panel Survey: <http://www.meps.ahrq.gov/>

“NCHS Data Linked to Mortality Files,” 20 August 2009.

http://www.cdc.gov/nchs/data_access/data_linkage/mortality.htm