

**MEMO**

From: Cathi Callahan, ARC

Date: August 30, 2024

RE: Layout of the March 2023 CPS Auxiliary Data (ASCII)

The March 2023 CPS Auxiliary data file contains identification information from the original March supplemental file, as well as recoded insurance variables and imputed information on the sources of employer sponsored insurance. The file is in the same order as the original Census issued file (person level only) and can be used with the full person level CPS file by matching PH-SEQ and A-LINENO.

More detailed information on the variables themselves can be found in “Technical Appendix: March 2023 CPS Auxiliary Data”, from Cathi Callahan and Rodelle Williams.

Layout for the fixed format file is as follows, and there is a blank space after each variable. Please note that the March 2023 Auxiliary Data contains new variables to simplify tabulations.

| COL | Variable | Start | Length | Description                                                                                                                                                                                                                                                                                                                                         |
|-----|----------|-------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1   | PH_SEQ   | 1     | 5      | Household Sequence Number                                                                                                                                                                                                                                                                                                                           |
| 2   | H_NUMPER | 7     | 2      | Number of Persons in Household                                                                                                                                                                                                                                                                                                                      |
| 3   | A_LINENO | 10    | 2      | Person Line Number                                                                                                                                                                                                                                                                                                                                  |
| 4   | POVLL    | 13    | 2      | CPS Family Poverty Indicator<br>-1 = Not in poverty universe<br>1 = Under .50<br>2 = .50 to .74<br>3 = .75 to .99<br>4 = 1.00 to 1.24<br>5 = 1.25 to 1.49<br>6 = 1.50 to 1.74<br>7 = 1.75 to 1.99<br>8 = 2.00 to 2.49<br>9 = 2.50 to 2.99<br>10 = 3.00 to 3.49<br>11 = 3.50 to 3.99<br>12 = 4.00 to 4.49<br>13 = 4.50 to 4.99<br>14 = 5.00 and over |
| 5   | AGE      | 16    | 2      | Age<br>0-79 = 0-79 years of age<br>80 = 80-84 years of age<br>85 = 85+ years of age                                                                                                                                                                                                                                                                 |
| 6   | ESIPH    | 19    | 1      | ESI policyholder?<br>1 = yes<br>0 = no                                                                                                                                                                                                                                                                                                              |

| COL | Variable | Start | Length | Description                                                                                                                                                                                     |
|-----|----------|-------|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7   | ESIDEP   | 21    | 1      | ESI dependent?<br>1 = yes<br>0 = no                                                                                                                                                             |
| 8   | OPHIPH   | 23    | 1      | Other private health insurance policyholder?<br>1 = yes<br>0 = no                                                                                                                               |
| 9   | OPHIDEP  | 25    | 1      | Other private health insurance dependent?<br>1 = yes<br>0 = no                                                                                                                                  |
| 10  | EXCHANGE | 27    | 1      | Enrolled in health exchange?<br>(for persons with OPHI coverage)<br>1 = yes<br>0 = no                                                                                                           |
| 11  | NMCAID   | 29    | 1      | Covered by Medicaid?<br>1 = yes<br>0 = no                                                                                                                                                       |
| 12  | NMCARE   | 31    | 1      | Covered by Medicare?<br>1 = yes<br>0 = no                                                                                                                                                       |
| 13  | CHAMP    | 33    | 1      | Covered by Military?<br>1 = yes<br>0 = no                                                                                                                                                       |
| 14  | OTHER    | 35    | 1      | Covered by Other?<br>1 = yes<br>0 = no                                                                                                                                                          |
| 15  | CHIPP    | 37    | 1      | Covered by Children's Health Insurance?<br>1 = yes<br>0 = no                                                                                                                                    |
| 16  | UNINS    | 39    | 1      | No Health Coverage?<br>0 = Infant born after calendar year<br>1 = Coverage for all of year<br>2 = No coverage for some of the year<br>3 = No coverage for full year                             |
| 17  | OUTTYP   | 41    | 1      | Coverage from Outside of Household?<br>0 = no<br>1 = yes, ESI<br>2 = yes, OPHI<br>3 = yes, other                                                                                                |
| 18  | CONCURR  | 43    | 1      | Concurrent coverage last year?<br>0 = Infant born after calendar year<br>1 = No months with concurrent coverage<br>2 = Some months with concurrent coverage<br>3 = Concurrent coverage all year |

| COL | Variable    | Start | Length | Description                                                                                                    |
|-----|-------------|-------|--------|----------------------------------------------------------------------------------------------------------------|
| 19  | SUBSIDY     | 45    | 1      | Any subsidized marketplace coverage last year?<br>1 = yes<br>0 = no                                            |
| 20  | PITESIPH    | 47    | 1      | Point in Time ESI policyholder?<br>1 = yes<br>0 = no                                                           |
| 21  | PITESIDEP   | 49    | 1      | Point in Time ESI dependent?<br>1 = yes<br>0 = no                                                              |
| 22  | PITOPHIPH   | 51    | 1      | Point in Time Other private health insurance policyholder?<br>1 = yes<br>0 = no                                |
| 23  | PITOPHIDEP  | 53    | 1      | Point in Time Other private health insurance dependent?<br>1 = yes<br>0 = no                                   |
| 24  | PITEXCHANGE | 55    | 1      | Point in Time enrolled in health exchange?<br>1 = yes<br>0 = no                                                |
| 25  | PITNMCAID   | 57    | 1      | Point in Time Covered by Medicaid?<br>1 = yes<br>0 = no                                                        |
| 26  | PITNMCARE   | 59    | 1      | Point in Time Covered by Medicare?<br>1 = yes<br>0 = no                                                        |
| 27  | PITCHAMP    | 61    | 1      | Point in Time Covered by Military?<br>1 = yes<br>0 = no                                                        |
| 28  | PITOTHER    | 63    | 1      | Point in Time Covered by Other?<br>1 = yes<br>0 = no                                                           |
| 29  | PITCHIPP    | 65    | 1      | Point in Time Covered by Children's Health Insurance?<br>1 = yes<br>0 = no                                     |
| 30  | PITUNINS    | 67    | 1      | Point in Time Uninsured?<br>1 = uninsured<br>0 = insured                                                       |
| 31  | PITOUTTYP   | 69    | 1      | Point in Time coverage from outside of household?<br>0 = no<br>1 = yes, ESI<br>2 = yes, OPHI<br>3 = yes, other |

| COL | Variable     | Start | Length | Description                                                                                                                                                                                                                      |
|-----|--------------|-------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 32  | PITSUBSIDY   | 71    | 1      | Point in time any subsidized marketplace coverage?<br>1 = yes<br>0 = no                                                                                                                                                          |
| 33  | MARSUPWT     | 73    | 8      | March Supplement Weight<br>(float, 2 decimal places)                                                                                                                                                                             |
| 34  | NEWWT_LASTYR | 82    | 8      | March Supplement Weight, 0 if infant<br>(float, 2 decimal places)                                                                                                                                                                |
| 35  | OFFER        | 91    | 1      | Does your employer offer Health Insurance?<br>(universe is all workers)<br>0 = n/a<br>1 = coverage through current employer<br>2 = offered, eligible, not enrolled<br>3 = offered, not enrolled, not eligible<br>4 = not offered |
| 36  | PRIOR        | 93    | 1      | Do you have ESI through a Prior Employer?<br>(policyholders only)<br>0 = n/a<br>1 = yes<br>2 = no, current employer                                                                                                              |
| 37  | NEWSECTOR    | 95    | 1      | What sector is providing coverage?<br>0 = n/a<br>1 = Private<br>2 = Public, Federal<br>3 = Public, State<br>4 = Public, Local<br>5 = Self-employed, inc.<br>6 = Self-employed, uninc.                                            |
| 38  | NEWSIZE      | 97    | 1      | What size employer provided the coverage?<br>0 = n/a<br>1 = <10<br>2 = 10 - 24<br>3 = 25 - 99<br>4 = 100 - 499<br>5 = 500 - 999<br>6 = 1000+                                                                                     |
| 39  | EEPRIOR      | 99    | 1      | Coverage through a prior employer<br>(dependents only, attribute of policyholder)<br>0 = n/a<br>1 = yes, prior<br>2 = no, current employer                                                                                       |
| 40  | PHLINE       | 101   | 2      | Line number (A-LINENO) of policyholder<br>0 = no policyholder<br>Valid: 1-13                                                                                                                                                     |

| COL | Variable    | Start | Length | Description                                                                                                                                                                       |
|-----|-------------|-------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 41  | SIFLAG      | 104   | 1      | Was coverage fully-insured or self-insured?<br>0 = n/a<br>1 = self-insured<br>2 = fully-insured                                                                                   |
| 42  | HMOFLAG     | 106   | 1      | What type of plan are you covered by?<br>0 = n/a<br>1 = HMO<br>2 = PPO<br>3 = POS<br>4 = HDED                                                                                     |
| 43  | NEWSIZE_200 | 108   | 1      | What size employer provided the coverage (with split at 200)?<br>0 = n/a<br>1 = <10<br>2 = 10 - 24<br>3 = 25 - 99<br>4 = 100 - 199<br>5 = 200 - 499<br>6 = 500 - 999<br>7 = 1000+ |
| 44  | LEVEL       | 110   | 1      | Was coverage level funded?<br>(universe is smaller employers (<200))<br>0 = n/a<br>1 = level-funded<br>2 = not level-funded                                                       |
| 45  | FUNDING2    | 112   | 1      | Was coverage self-insured/level-funded or fully-insured?<br>0 = n/a<br>1 = self-insured/level-funded<br>2 = fully insured                                                         |
| 46  | RETFLAG     | 114   | 1      | Is prior coverage retiree or COBRA?<br>(universe is PRIOR=1 or EEPRIOR=1)<br>0 = n/a<br>1 = retiree<br>2 = COBRA                                                                  |
| 47  | NEWSECTOR2  | 116   | 1      | Sector of dependent coverage<br>(for those with ESI as both policyholder and dependent)<br>Valid: 1-6 (same values as NEWSECTOR)                                                  |
| 48  | NEWSIZE2    | 118   | 1      | Size of employer covering, dependent coverage<br>(for those with ESI as both policyholder and dependent)<br>Valid: 1-6 (same values as NEWSIZE)                                   |

| COL | Variable     | Start | Length | Description                                                                                                                                                                           |
|-----|--------------|-------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 49  | NEWSIZE2_200 | 120   | 1      | Size of employer covering, dependent coverage (for those with ESI as both policyholder and dependent), including break at size 200<br>Valid: 1-7 (same values as NEWSIZE_200)         |
| 50  | UNION        | 122   | 1      | Coverage through union?<br>(for ESI policyholders only, non-self-employed)<br>0 = n/a<br>1 = yes, union<br>2 = no, not union                                                          |
| 51  | EEUNION      | 124   | 1      | Coverage through a union?<br>(for ESI dependents only, based on policyholder attributes)<br>0 = n/a<br>1 = yes, union<br>2 = no, not union                                            |
| 52  | UNIONWORK    | 126   | 1      | Union?<br>(for non-self-employed workers only, current employment status)<br>0 = n/a<br>1 = yes, union<br>2 = no, not union                                                           |
| 53  | AV           | 128   | 7      | Actuarial value<br>(active ESI policyholder records only)<br>-9 = n/a<br>Range of valid values: 0.0000 to 1.0000                                                                      |
| 54  | AVCELLAVG    | 136   | 7      | Cell based average actuarial value (AV)<br>(active ESI policyholder records only)<br>-9 = n/a<br>Range of valid values: 0.0000 to 0.9540                                              |
| 55  | AVPLANTYPE   | 144   | 2      | Plan type used for AVs?<br>(active ESI policyholder records only)<br>-9 = n/a<br>1 = HMO<br>2 = PPO<br>3 = POS<br>5 = HRA<br>6 = HSA                                                  |
| 56  | MSPFLAG      | 147   | 1      | Medicare Secondary Payer variable (all Medicare)<br>0 = Person does not have Medicare<br>1 = Medicare is secondary (ESI Primary)<br>2 = Medicare is primary (may or may not have ESI) |

| COL | Variable  | Start | Length | Description                                                                                                                                                                                                            |
|-----|-----------|-------|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 57  | OOPEXP    | 149   | 7      | Out of Pocket Expenditures on Over-the-Counter Purchases and Medical Equipment (sum of POTC-VAL and PMED-VAL)<br>Range of valid values: \$0 to \$240,200                                                               |
| 58  | OLDSTATE  | 157   | 2      | Old State Variable<br>Range of valid values: 11 to 95                                                                                                                                                                  |
| 59  | MCDEXPAN  | 160   | 1      | Is person in a Medicaid expansion state? (all persons)<br>1 = yes<br>0 = no                                                                                                                                            |
| 60  | EMPSIZE   | 162   | 1      | Edited employer size variable - state & federal mapped to 1000+ (all workers)<br>0 = n/a<br>1 = <10<br>2 = 10 - 24<br>3 = 25 - 99<br>4 = 100 - 499<br>5 = 500 - 999<br>6 = 1000+                                       |
| 61  | EMPSECTOR | 164   | 1      | Longest job class of worker (LJCW) (all workers)<br>0 = n/a<br>1 = private<br>2 = federal<br>3 = state<br>4 = local<br>5 = self-employed, incorporated<br>6 = self-employed, unincorporated or farm<br>7 = without pay |