

Medicare Health Outcomes Survey Information for Health Disparities Researchers

What is the Medicare Health Outcomes Survey?

The Medicare Health Outcomes Survey (HOS) provides longitudinal self-assessed health status data on over 300,000 Medicare managed care respondents annually. Fielded nationally since 1998, the HOS has been used to assess the physical and mental health outcomes and health-related quality of life of beneficiaries and how those change over a 2 year period. The self-administered survey also includes additional case-mix and risk-adjustment variables. The HOS is fielded annually using a mixed mode data collection protocol that includes two survey mailings with telephone follow-up of non-respondents to the mailed questionnaire.

Why should Disparities Researchers use the Medicare HOS?

The Medicare HOS is the first large scale CMS survey to collect expanded measures of race, ethnicity, sex, primary language, and disability status. These measures were added to the survey beginning in April 2013 and follow the standards established by the Affordable Care Act §4302. The inclusion of these measures permits researchers to explore differences within and between specific racial and ethnic subgroups.

Sample Size Information:

Each spring, a random sample of up to 1,200 Medicare beneficiaries is surveyed from each participating Medicare Advantage Organization (MAO) that has a minimum of 500 enrollees (i.e., a survey is administered to a different baseline cohort, or group, each year). Two years later, the baseline respondents are surveyed again (i.e., follow up measurement). For HOS Round 16 fielded in April 2013 (Cohort 16 Baseline and Cohort 14 Follow up), a total of 367,935 completed surveys were returned yielding a response rate of 49.8%. For HOS Round 17 fielded in April 2014 (Cohort 17 Baseline and Cohort 15 Follow up), a total of 358,347 completed surveys were returned yielding a response rate of 47.1%.

HOS Data Files:

Medicare HOS data files are available as public use files (PUFs), limited data sets (LDSs), and research identifiable files (RIFs). For assistance obtaining data please visit: www.resdac.org

HOS Instruments, Reports, Publications & More Information:

www.hosonline.org

HOS Variables:

The variables in the HOS data sets are organized into two major categories: identification and demographics, and survey domains.

Identification and Demographics

Unique Identification Number, Date of Enrollment in Plan, Reason for Entitlement, Age, Race, Ethnicity, Gender, Marital Status, Education, Income

Survey Domains

<u>VR-12</u>: The VR-12 is a well-tested generic patient reported outcome measure (PROM) used to measure health related quality of life. It consists of 14 items, 12 of which are used in the calculation of 8 health domains: 1) Physical Functioning, 2) Role-Physical, 3) Role-Emotional, 4) Bodily Pain, 5) Social Functioning, 6) Mental Health, 7) Vitality, and 8) General Health, and the two summary measures: the physical component summary (PCS) and mental component summary (MCS) scores.

<u>Activities of Daily Living</u>: bathing, dressing, eating, getting in or out of chairs, walking, and using the toilet.

<u>Instrumental Activities of Daily Living</u>: preparing meals, managing money, and taking medications.

Healthcare Effectiveness Data and Information Set (HEDIS) Effectiveness of Care Measures: Osteoporosis Testing in Older Women, Physical Activity in Older Adults, Management of Urinary Incontinence in Older Adults, and Fall Risk Management.

Chronic Medical Conditions: hypertension, angina pectoris (or coronary artery disease), congestive heart failure, myocardial infarction (or heart attack), other heart conditions (such as heart valve defects or arrhythmias), stroke, emphysema, (or asthma or chronic obstructive pulmonary disease), inflammatory bowel disease (including Crohn's disease and ulcerative colitis), arthritis of the hip or knee, arthritis of the hand or wrist, osteoporosis, sciatica, diabetes (or hyperglycemia or glycosuria), depression, and any cancer (other than skin cancer).

<u>Additional Measures</u>: depression screen, Centers for Disease Control and Prevention (CDC) Healthy Days, sleep quality.

NUMBER OF BENEFICIARIES WITH COMPLETED SURVEYS		
RACE	HOS ROUND 16	HOS ROUND 17
White	286,179	275,107
Black	38,496	39,748
American Indian or Alaskan Native	1,850	1,898
Asian Indian	1,480	1,503
Chinese	3,055	3,001
Filipino	3,185	3,085
Japanese	1,757	1,694
Korean	804	751
Vietnamese	969	1,049
Other Asian	728	747
Native Hawaiian	384	350
Guamanian or Chamorro	27	34
Samoan	98	83
Other Pacific Islander	794	917
Multiracial	10,542	10,785
ETHNICITY	HOS ROUND 16	HOS ROUND 17
Not Hispanic	278,769	271,713
Mexican	14,308	15,003
Puerto Rican	12,611	13,058
Cuban	2,643	2,962
Another Hispanic	12,026	12,642
Multiethnic	2,412	2,909

Spring 2015 2