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**MEDICARE CURRENT BENEFICIARY SURVEY**  
Administrative Identification

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This file contains information about the sample person from administrative records maintained by the Centers for Medicare and Medicaid Services. It contains basic demographic information (date of birth and sex), insurance information (Medicare entitlement, Medicaid eligibility, HMO enrollment), and summarizes the sample person's Medicare utilization for the calendar year. There is one record for each person who completed an interview.

RIC	1	2					C Record Identification Code
VERSION	3	1					C Version Number
BASEID	4	8	\$BSIDFMT				C Unique SP Identification Number
				15,770			LOW-HIGH BASEID Count
H_DOB	12	8	\$DTE8FMT				C Date of birth
				15,770			Date as YYYYMMDD
H_DOD	20	8	\$DTE8FMT				C Date of death
				15,638			Missing
				132			Date as YYYYMMDD
H_DODSRC	28	2	\$SRCFMT				C Source of date of death
				15,638			No date of death
				0			01 From Medicare bill
				0			03 Clerical entry
				0			05 Bill and clerical entry
				73			10 Proven Medicare Benefits record
				13			11 Proven Medicare Benefits record & bills
				37			20 Unproven Medicare Benefits record
				9			21 Unproven Mcare Benefits record & bills
				0			23 Unproven Mcare Benefits rec & clerical
				0			25 Unproven Mcare Benefits rec, bill & cler
H_SEX	30	1	\$SEXFMT				C Sex code
				6,984			1 Male
				8,786			2 Female
H_RACE	31	1	\$RACEFMT				C Race code
				27			0 Unknown
				13,315			1 White
				1,624			2 Black
				165			3 Other
				190			4 Asian
				367			5 Hispanic
				82			6 North American Native
H_AGE	32	3	AGEFMT				N SP age based on CMS date of birth
				15,770			Age in years

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D_STRAT	35	1	\$AGEFMT				C MCBS Sample age stratum
				1,410			1 0-44
				1,374			2 45-64
				2,619			3 65-69
				2,679			4 70-74
				2,571			5 75-79
				2,620			6 80-84
				2,497			7 85 +
H_ENT01	36	1	\$ENTFMT				C Medicare entitlement code for Jan
				690			A Part A Medicare only
				87			B Part B Medicare only
				14,993			C Parts A and B Medicare
				0			N No Medicare entitlement
H_ENT02	37	1	\$ENTFMT				C Medicare entitlement code for Feb
				684			A Part A Medicare only
				86			B Part B Medicare only
				15,000			C Parts A and B Medicare
				0			N No Medicare entitlement
H_ENT03	38	1	\$ENTFMT				C Medicare entitlement code for Mar
				674			A Part A Medicare only
				85			B Part B Medicare only
				15,009			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT04	39	1	\$ENTFMT				C Medicare entitlement code for Apr
				667			A Part A Medicare only
				84			B Part B Medicare only
				15,017			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT05	40	1	\$ENTFMT				C Medicare entitlement code for May
				660			A Part A Medicare only
				83			B Part B Medicare only
				15,025			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT06	41	1	\$ENTFMT				C Medicare entitlement code for Jun
				657			A Part A Medicare only
				83			B Part B Medicare only
				15,028			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT07	42	1	\$ENTFMT				C Medicare entitlement code for Jul
				616			A Part A Medicare only
				82			B Part B Medicare only
				15,069			C Parts A and B Medicare
				3			N No Medicare entitlement

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H_ENT08	43	1	\$ENTFMT				C Medicare entitlement code for Aug
				614			A Part A Medicare only
				82			B Part B Medicare only
				15,071			C Parts A and B Medicare
				3			N No Medicare entitlement
H_ENT09	44	1	\$ENTFMT				C Medicare entitlement code for Sep
				612			A Part A Medicare only
				82			B Part B Medicare only
				15,072			C Parts A and B Medicare
				4			N No Medicare entitlement
H_ENT10	45	1	\$ENTFMT				C Medicare entitlement code for Oct
				611			A Part A Medicare only
				81			B Part B Medicare only
				15,059			C Parts A and B Medicare
				19			N No Medicare entitlement
H_ENT11	46	1	\$ENTFMT				C Medicare entitlement code for Nov
				605			A Part A Medicare only
				81			B Part B Medicare only
				15,042			C Parts A and B Medicare
				42			N No Medicare entitlement
H_ENT12	47	1	\$ENTFMT				C Medicare entitlement code for Dec
				603			A Part A Medicare only
				79			B Part B Medicare only
				15,004			C Parts A and B Medicare
				84			N No Medicare entitlement
H_DOE	48	8	\$DTE8FMT				C Medicare entitlement start date
				15,770			Date as YYYYMMDD
H_DOT	56	8	\$DTE8FMT				C Medicare entitlement end date
				15,748			Missing
				22			Date as YYYYMMDD
H_MEDSTA	64	2	\$MSCFMT				C Medicare status code as of 12/31
				14			Unknown
				12,902			10 Aged, no ESRD
				61			11 Aged, ESRD
				2,731			20 Disabled, no ESRD
				47			21 Disabled, ESRD
				15			31 ESRD only

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_LAF	66	2	\$LAFFMT				C Status of SSA check (LAF) as of 12/31
				1			Unknown
				0			AD Cur pay-adj for dual entitlement
				0			AF Transfer to another PC or dio
				0			A9 Cur pay-miscellaneous adjustment
				15,115			C Current payment status
				0			DW Deferred-Workers' Compensation
				0			D2 DEF-retirement test
				0			D3 DEF-D2 for primary
				9			D6 DEF-recover overpayment
				4			D9 DEF-miscellaneous reason
				0			J Advanced filing-current pay
				0			L2 Advanced filing-worked inside U S
				0			L3 Advanced filing-insured worked in U S
				0			N Not in pay status
				0			PB Delayed-benefit due but not paid
				0			R Cur pay-Part B reinstated
				0			RN Cur pay-Part B reinstated
				0			S SUSP-deferred retirement
				1			SD SUSP-other
				0			SF SUSP-fails to meet residence requirment
				67			SH SUSP-government pension
				1			SP SUSP-public assistance
				0			SW SUSP-Workers' Compensation
				2			S0 SUSP-continuing disability investig
				0			S2 SUSP-fails retirement test
				0			S3 SUSP-primary account S2
				6			S6 SUSP-check returned for address
				36			S7 SUSP-vocational rehab refusal
				3			S8 SUSP-payee not determined
				11			S9 SUSP-miscellaneous reason
				0			TA TERM-prior to entitlement
				0			TJ TERM-prior to entlmt, not stop debit
				0			TR TERM-claim withdrawn
				0			T0 TERM-benefits paid by another agency
				103			T1 TERM-death of beneficiary
				0			T2 TERM-death of primary
				2			T3 TERM-divorce, marriage, remarriage
				0			T4 TERM-dependent child attained age 18
				0			T5 TERM-entitled on another account
				0			T6 TERM-child no longer student, disabled
				1			T8 TERM-recovery from disability
				0			T9 TERM-miscellaneous
				396			U Active uninsured status (no SSA check)
				0			XF Transfer to another PC or DIO
				0			XR Terminated -
				1			X1 TERM-death of insured
				0			X5 TERM-entitled to another benefit
				11			X7 TERM of uninsured
				0			X9 TERM miscellaneous
				0			ZZ Erroneous entitlement

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_RESST	68	2	\$STFMT				C SSA State code of residence as of 12/31
				583			01 Alabama
				0			02 Alaska
				311			03 Arizona
				152			04 Arkansas
				1,086			05 California
				137			06 Colorado
				204			07 Connecticut
				3			08 Delaware
				14			09 Washington, DC
				1,232			10 Florida
				509			11 Georgia
				0			12 Hawaii
				0			13 Idaho
				517			14 Illinois
				48			15 Indiana
				143			16 Iowa
				148			17 Kansas
				295			18 Kentucky
				160			19 Louisiana
				1			20 Maine
				206			21 Maryland
				284			22 Massachusetts
				849			23 Michigan
				230			24 Minnesota
				1			25 Mississippi
				421			26 Missouri
				0			27 Montana
				147			28 Nebraska
				327			29 Nevada
				1			30 New Hampshire
				453			31 New Jersey
				282			32 New Mexico
				1,082			33 New York
				788			34 North Carolina
				0			35 North Dakota
				785			36 Ohio
				139			37 Oklahoma
				3			38 Oregon
				853			39 Pennsylvania
				275			40 Puerto Rico
				0			41 Rhode Island
				137			42 South Carolina
				0			43 South Dakota
				431			44 Tennessee
				965			45 Texas
				3			46 Utah
				0			47 Vermont
				0			48 Virgin Islands
				182			49 Virginia
				609			50 Washington
				209			51 West Virginia
				424			52 Wisconsin
				141			53 Wyoming
H_RESCTY	70	3	\$CTYFMT				C SSA county code of residence as of 12/31
				15,770			County code

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H_ZIP	73	5	\$ZIPFMT	15,770			C Postal zip code of residence as of 12/31 ZIP Code
H_CENSUS	78	2	\$CENFMT	0 490 2,388 2,623 1,089 3,280 1,310 1,416 1,201 1,698 275			C Census Region of residence as of 12/31 ** Unknown 01 New England 02 Middle Atlantic 03 East North Central 04 West North Central 05 South Atlantic 06 East South Central 07 West South Central 08 Mountain 09 Pacific 10 Puerto Rico
H_METRO	80	1	\$METFMT	4,140 0 11,630			C Metro status N Non-metro area U Unknown Y Metro area
H_HSBEG1	81	8	\$DTE8FMT	15,414 356			C Beginning date of latest hospice period Missing Date as YYYYMMDD
H_HSEND1	89	8	\$DTE8FMT	15,414 356			C Ending date of latest hospice period Missing Date as YYYYMMDD
H_HSBEG2	97	8	\$DTE8FMT	15,617 153			C Beginning date of 2nd hospice period Missing Date as YYYYMMDD
H_HSEND2	105	8	\$DTE8FMT	15,617 153			C Ending date of 2nd hospice period Missing Date as YYYYMMDD
H_HSBEG3	113	8	\$DTE8FMT	15,677 93			C Beginning date of 3rd hospice period Missing Date as YYYYMMDD
H_HSEND3	121	8	\$DTE8FMT	15,677 93			C Ending date of 3rd hospice period Missing Date as YYYYMMDD
H_HSBEG4	129	8	\$DTE8FMT	15,698 72			C Beginning date of 4th hospice period Missing Date as YYYYMMDD

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H_HSEND4	137	8	\$DTE8FMT	15,698 72			C Ending date of 4th hospice period  Missing Date as YYYYMMDD
H_ESRBEG	145	8	\$DTE8FMT	15,592 178			C Beginning date of ESRD period  Missing Date as YYYYMMDD
H_ESREND	153	8	\$DTE8FMT	15,705 65			C Ending date of ESRD period  Missing Date as YYYYMMDD
H_GHPSW	161	1	\$GHPSW	12,911 2,859			C Some group health participation in year  0 No enrollment 1 Some enrollment
H_PNUM	162	3					N Number of GHPs in bene area in 2006
H_MANUM	165	3					N Number of MA plans in bene area in 2006
H_PFSNUM	168	3					N Number of PFFS plans in bene area in 200
H_PLTP01	171	2	\$PLNFMT	13,393 35 79 0 2,263 0 0 0			C GHP plan type for Jan  No enrollment 01 Health care prepayment plan 02 Cost HMO 05 Old Risk HMO 06 Risk HMO 12 Demo Risk HMO 17 Pace Demo plan 18 HCPP
H_PLPY01	173	5					N Medicare capitation payment for Jan
H_PLTP02	178	2	\$PLNFMT	13,393 35 79 0 2,263 0 0 0			C GHP plan type for Feb  No enrollment 01 Health care prepayment plan 02 Cost HMO 05 Old Risk HMO 06 Risk HMO 12 Demo Risk HMO 17 Pace Demo plan 18 HCPP
H_PLPY02	180	5					N Medicare capitation payment for Feb
H_PLTP03	185	2	\$PLNFMT	13,393 35 79 0 2,263 0 0 0			C GHP plan type for Mar  No enrollment 01 Health care prepayment plan 02 Cost HMO 05 Old Risk HMO 06 Risk HMO 12 Demo Risk HMO 17 Pace Demo plan 18 HCPP

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_PLPY03	187	5					N Medicare capitation payment for Mar
H_PLTP04	192	2	\$PLNFMT				C GHP plan type for Apr
				13,308			No enrollment
				35			01 Health care prepayment plan
				80			02 Cost HMO
				0			05 Old Risk HMO
				2,347			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY04	194	5					N Medicare capitation payment for Apr
H_PLTP05	199	2	\$PLNFMT				C GHP plan type for May
				13,257			No enrollment
				35			01 Health care prepayment plan
				82			02 Cost HMO
				0			05 Old Risk HMO
				2,396			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY05	201	5					N Medicare capitation payment for May
H_PLTP06	206	2	\$PLNFMT				C GHP plan type for Jun
				13,185			No enrollment
				34			01 Health care prepayment plan
				81			02 Cost HMO
				0			05 Old Risk HMO
				2,470			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY06	208	5					N Medicare capitation payment for Jun
H_PLTP07	213	2	\$PLNFMT				C GHP plan type for Jul
				13,140			No enrollment
				33			01 Health care prepayment plan
				82			02 Cost HMO
				0			05 Old Risk HMO
				2,515			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY07	215	5					N Medicare capitation payment for Jul



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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_PLTP08	220	2	\$PLNFMT				C GHP plan type for Aug
				13,081			No enrollment
				33			01 Health care prepayment plan
				76			02 Cost HMO
				0			05 Old Risk HMO
				2,580			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY08	222	5					N Medicare capitation payment for Aug
H_PLTP09	227	2	\$PLNFMT				C GHP plan type for Sep
				13,044			No enrollment
				34			01 Health care prepayment plan
				83			02 Cost HMO
				0			05 Old Risk HMO
				2,609			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY09	229	5					N Medicare capitation payment for Sep
H_PLTP10	234	2	\$PLNFMT				C GHP plan type for Oct
				13,042			No enrollment
				34			01 Health care prepayment plan
				82			02 Cost HMO
				0			05 Old Risk HMO
				2,612			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY10	236	5					N Medicare capitation payment for Oct
H_PLTP11	241	2	\$PLNFMT				C GHP plan type for Nov
				13,039			No enrollment
				34			01 Health care prepayment plan
				82			02 Cost HMO
				0			05 Old Risk HMO
				2,615			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLPY11	243	5					N Medicare capitation payment for Nov
H_PLTP12	248	2	\$PLNFMT				C GHP plan type for Dec
				13,031			No enrollment
				34			01 Health care prepayment plan
				81			02 Cost HMO
				0			05 Old Risk HMO
				2,624			06 Risk HMO
				0			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP

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H_PLPY12	250	5					N Medicare capitation payment for Dec
H_PDTP01	255	1	\$DPLNFMT				C Part D plan type for Jan
				1			Unknown
				9,411			0 No Part D enrollment
				2,036			1 MA-PD plan
				4,322			2 PDP
H_PDPY01	256	5					N Part D capitation payment for Jan
H_PDLS01	261	1	\$DLISFMT				C LIS Indicator for Jan
				1			Unknown
				11,778			1 No premium subsidy
				29			2 25% premium subsidy
				37			3 50% premium subsidy
				36			4 75% premium subsidy
				3,889			5 100% premium subsidy
H_PDRS01	262	1	\$DRDSFMT				C RDS Indicator for Jan
				1			Unknown
				13,180			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP02	263	1	\$DPLNFMT				C Part D plan type for Feb
				1			Unknown
				8,893			0 No Part D enrollment
				2,099			1 MA-PD plan
				4,777			2 PDP
H_PDPY02	264	5					N Part D capitation payment for Feb
H_PDLS02	269	1	\$DLISFMT				C LIS Indicator for Feb
				1			Unknown
				11,745			1 No premium subsidy
				28			2 25% premium subsidy
				39			3 50% premium subsidy
				36			4 75% premium subsidy
				3,921			5 100% premium subsidy
H_PDRS02	270	1	\$DRDSFMT				C RDS Indicator for Feb
				1			Unknown
				13,180			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP03	271	1	\$DPLNFMT				C Part D plan type for Mar
				1			Unknown
				8,597			0 No Part D enrollment
				2,149			1 MA-PD plan
				5,023			2 PDP
H_PDPY03	272	5					N Part D capitation payment for Mar

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H_PDLS03	277	1	\$DLISFMT				C LIS Indicator for Mar
				3			Unknown
				11,708			1 No premium subsidy
				30			2 25% premium subsidy
				39			3 50% premium subsidy
				40			4 75% premium subsidy
				3,950			5 100% premium subsidy
H_PDRS03	278	1	\$DRDSFMT				C RDS Indicator for Mar
				3			Unknown
				13,178			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP04	279	1	\$DPLNFMT				C Part D plan type for Apr
				1			Unknown
				8,254			0 No Part D enrollment
				2,206			1 MA-PD plan
				5,309			2 PDP
H_PDPY04	280	5					N Part D capitation payment for Apr
H_PDLS04	285	1	\$DLISFMT				C LIS Indicator for Apr
				3			Unknown
				11,676			1 No premium subsidy
				31			2 25% premium subsidy
				43			3 50% premium subsidy
				43			4 75% premium subsidy
				3,974			5 100% premium subsidy
H_PDRS04	286	1	\$DRDSFMT				C RDS Indicator for Apr
				3			Unknown
				13,178			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP05	287	1	\$DPLNFMT				C Part D plan type for May
				1			Unknown
				7,494			0 No Part D enrollment
				2,264			1 MA-PD plan
				6,011			2 PDP
H_PDPY05	288	5					N Part D capitation payment for May
H_PDLS05	293	1	\$DLISFMT				C LIS Indicator for May
				3			Unknown
				11,633			1 No premium subsidy
				33			2 25% premium subsidy
				45			3 50% premium subsidy
				42			4 75% premium subsidy
				4,014			5 100% premium subsidy
H_PDRS05	294	1	\$DRDSFMT				C RDS Indicator for May
				3			Unknown
				13,178			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary

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H_PDTP06	295	1	\$DPLNFMT				C Part D plan type for Jun
				1			Unknown
				6,907			0 No Part D enrollment
				2,326			1 MA-PD plan
				6,536			2 PDP
H_PDPY06	296	5					N Part D capitation payment for Jun
H_PDLS06	301	1	\$DLISFMT				C LIS Indicator for Jun
				3			Unknown
				11,610			1 No premium subsidy
				33			2 25% premium subsidy
				47			3 50% premium subsidy
				42			4 75% premium subsidy
				4,035			5 100% premium subsidy
H_PDRS06	302	1	\$DRDSFMT				C RDS Indicator for Jun
				3			Unknown
				13,178			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP07	303	1	\$DPLNFMT				C Part D plan type for Jul
				1			Unknown
				6,880			0 No Part D enrollment
				2,355			1 MA-PD plan
				6,534			2 PDP
H_PDPY07	304	5					N Part D capitation payment for Jul
H_PDLS07	309	1	\$DLISFMT				C LIS Indicator for Jul
				4			Unknown
				11,584			1 No premium subsidy
				32			2 25% premium subsidy
				47			3 50% premium subsidy
				42			4 75% premium subsidy
				4,061			5 100% premium subsidy
H_PDRS07	310	1	\$DRDSFMT				C RDS Indicator for Jul
				4			Unknown
				13,177			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP08	311	1	\$DPLNFMT				C Part D plan type for Aug
				1			Unknown
				6,847			0 No Part D enrollment
				2,359			1 MA-PD plan
				6,563			2 PDP
H_PDPY08	312	5					N Part D capitation payment for Aug

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_PDLS08	317	1	\$DLISFMT				C LIS Indicator for Aug
				4			Unknown
				11,570			1 No premium subsidy
				32			2 25% premium subsidy
				48			3 50% premium subsidy
				42			4 75% premium subsidy
				4,074			5 100% premium subsidy
H_PDRS08	318	1	\$DRDSFMT				C RDS Indicator for Aug
				4			Unknown
				13,177			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP09	319	1	\$DPLNFMT				C Part D plan type for Sep
				1			Unknown
				6,749			0 No Part D enrollment
				2,365			1 MA-PD plan
				6,655			2 PDP
H_PDPY09	320	5					N Part D capitation payment for Sep
H_PDLS09	325	1	\$DLISFMT				C LIS Indicator for Sep
				5			Unknown
				11,547			1 No premium subsidy
				33			2 25% premium subsidy
				49			3 50% premium subsidy
				44			4 75% premium subsidy
				4,092			5 100% premium subsidy
H_PDRS09	326	1	\$DRDSFMT				C RDS Indicator for Sep
				5			Unknown
				13,176			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP10	327	1	\$DPLNFMT				C Part D plan type for Oct
				1			Unknown
				6,745			0 No Part D enrollment
				2,366			1 MA-PD plan
				6,658			2 PDP
H_PDPY10	328	5					N Part D capitation payment for Oct
H_PDLS10	333	1	\$DLISFMT				C LIS Indicator for Oct
				20			Unknown
				11,520			1 No premium subsidy
				33			2 25% premium subsidy
				51			3 50% premium subsidy
				45			4 75% premium subsidy
				4,101			5 100% premium subsidy
H_PDRS10	334	1	\$DRDSFMT				C RDS Indicator for Oct
				20			Unknown
				13,161			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary

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H_PDTP11	335	1	\$DPLNFMT				C Part D plan type for Nov
				1			Unknown
				6,741			0 No Part D enrollment
				2,372			1 MA-PD plan
				6,656			2 PDP
H_PDPY11	336	5					N Part D capitation payment for Nov
H_PDLS11	341	1	\$DLISFMT				C LIS Indicator for Nov
				42			Unknown
				11,493			1 No premium subsidy
				33			2 25% premium subsidy
				51			3 50% premium subsidy
				45			4 75% premium subsidy
				4,106			5 100% premium subsidy
H_PDRS11	342	1	\$DRDSFMT				C RDS Indicator for Nov
				42			Unknown
				13,139			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_PDTP12	343	1	\$DPLNFMT				C Part D plan type for Dec
				1			Unknown
				6,773			0 No Part D enrollment
				2,366			1 MA-PD plan
				6,630			2 PDP
H_PDPY12	344	5					N Part D capitation payment for Dec
H_PDLS12	349	1	\$DLISFMT				C LIS Indicator for Dec
				83			Unknown
				11,457			1 No premium subsidy
				34			2 25% premium subsidy
				53			3 50% premium subsidy
				46			4 75% premium subsidy
				4,097			5 100% premium subsidy
H_PDRS12	350	1	\$DRDSFMT				C RDS Indicator for Dec
				83			Unknown
				13,098			N Employer not subsidized for the benefici
				2,589			Y Employer subsidized for the beneficiary
H_MCSW	351	1	\$SWFMT				C Some Medicaid eligibility for the year
				12,508			N No participation
				3,262			Y Some participation

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MCDE01	352	1	\$MCDCFMT				C Medicaid eligibility for Jan
				0			A State Part A buy-in
				1,236			B State Part B buy-in
				45			C State Part A and B buy-in
				116			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,712			N No buy-in this month
				1,342			Q State Part B QMB buy-in
				319			S State Part B SLMB buy-in
H_MCDE02	353	1	\$MCDCFMT				C Medicaid eligibility for Feb
				0			A State Part A buy-in
				1,236			B State Part B buy-in
				45			C State Part A and B buy-in
				118			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,705			N No buy-in this month
				1,345			Q State Part B QMB buy-in
				321			S State Part B SLMB buy-in
H_MCDE03	354	1	\$MCDCFMT				C Medicaid eligibility for Mar
				0			A State Part A buy-in
				1,242			B State Part B buy-in
				45			C State Part A and B buy-in
				118			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,688			N No buy-in this month
				1,348			Q State Part B QMB buy-in
				329			S State Part B SLMB buy-in
H_MCDE04	355	1	\$MCDCFMT				C Medicaid eligibility for Apr
				0			A State Part A buy-in
				1,244			B State Part B buy-in
				46			C State Part A and B buy-in
				118			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,682			N No buy-in this month
				1,355			Q State Part B QMB buy-in
				325			S State Part B SLMB buy-in
H_MCDE05	356	1	\$MCDCFMT				C Medicaid eligibility for May
				0			A State Part A buy-in
				1,248			B State Part B buy-in
				47			C State Part A and B buy-in
				118			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,673			N No buy-in this month
				1,355			Q State Part B QMB buy-in
				329			S State Part B SLMB buy-in

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H_MCDE06	357	1	\$MCDCFMT				C Medicaid eligibility for Jun
				0			A State Part A buy-in
				1,250			B State Part B buy-in
				47			C State Part A and B buy-in
				118			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,671			N No buy-in this month
				1,350			Q State Part B QMB buy-in
				334			S State Part B SLMB buy-in
H_MCDE07	358	1	\$MCDCFMT				C Medicaid eligibility for Jul
				0			A State Part A buy-in
				1,243			B State Part B buy-in
				47			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,665			N No buy-in this month
				1,355			Q State Part B QMB buy-in
				341			S State Part B SLMB buy-in
H_MCDE08	359	1	\$MCDCFMT				C Medicaid eligibility for Aug
				1			A State Part A buy-in
				1,254			B State Part B buy-in
				46			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,653			N No buy-in this month
				1,352			Q State Part B QMB buy-in
				345			S State Part B SLMB buy-in
H_MCDE09	360	1	\$MCDCFMT				C Medicaid eligibility for Sep
				0			A State Part A buy-in
				1,258			B State Part B buy-in
				46			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,654			N No buy-in this month
				1,349			Q State Part B QMB buy-in
				344			S State Part B SLMB buy-in
H_MCDE10	361	1	\$MCDCFMT				C Medicaid eligibility for Oct
				0			A State Part A buy-in
				1,252			B State Part B buy-in
				47			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,652			N No buy-in this month
				1,350			Q State Part B QMB buy-in
				350			S State Part B SLMB buy-in



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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MCDE11	362	1	\$MCDCFMT				C Medicaid eligibility for Nov
				0			A State Part A buy-in
				1,253			B State Part B buy-in
				47			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,642			N No buy-in this month
				1,355			Q State Part B QMB buy-in
				354			S State Part B SLMB buy-in
H_MCDE12	363	1	\$MCDCFMT				C Medicaid eligibility for Dec
				0			A State Part A buy-in
				1,235			B State Part B buy-in
				47			C State Part A and B buy-in
				119			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,673			N No buy-in this month
				1,346			Q State Part B QMB buy-in
				350			S State Part B SLMB buy-in
H_MACY01	364	3	\$MACYFMT				C Buy-in agency for Jan
				12,712			N Unknown, or no buy-in
				3,058			State Agency code
H_MACY02	367	3	\$MACYFMT				C Buy-in agency for Feb
				12,705			N Unknown, or no buy-in
				3,065			State Agency code
H_MACY03	370	3	\$MACYFMT				C Buy-in agency for Mar
				12,688			N Unknown, or no buy-in
				3,082			State Agency code
H_MACY04	373	3	\$MACYFMT				C Buy-in agency for Apr
				12,682			N Unknown, or no buy-in
				3,088			State Agency code
H_MACY05	376	3	\$MACYFMT				C Buy-in agency for May
				12,673			N Unknown, or no buy-in
				3,097			State Agency code
H_MACY06	379	3	\$MACYFMT				C Buy-in agency for Jun
				12,671			N Unknown, or no buy-in
				3,099			State Agency code
H_MACY07	382	3	\$MACYFMT				C Buy-in agency for Jul
				12,665			N Unknown, or no buy-in
				3,105			State Agency code
H_MACY08	385	3	\$MACYFMT				C Buy-in agency for Aug
				12,653			N Unknown, or no buy-in
				3,117			State Agency code

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MACY09	388	3	\$MACYFMT				C Buy-in agency for Sep
				12,654			N Unknown, or no buy-in
				3,116			State Agency code
H_MACY10	391	3	\$MACYFMT				C Buy-in agency for Oct
				12,652			N Unknown, or no buy-in
				3,118			State Agency code
H_MACY11	394	3	\$MACYFMT				C Buy-in agency for Nov
				12,642			N Unknown, or no buy-in
				3,128			State Agency code
H_MACY12	397	3	\$MACYFMT				C Buy-in agency for Dec
				12,673			N Unknown, or no buy-in
				3,097			State Agency code
H_HOSSW	400	1	\$UTLFMT				C One or more hospice bills in CY
				15,598			0 No utilization this type
				172			1 Some utilization this type
H_INPSW	401	1	\$UTLFMT				C One or more inpatient discharges in CY
				13,018			0 No utilization this type
				2,752			1 Some utilization this type
H_SNFSW	402	1	\$UTLFMT				C One or more SNF admissions in CY
				15,123			0 No utilization this type
				647			1 Some utilization this type
H_HHASW	403	1	\$UTLFMT				C 1 = one or more HHA visits in CY
				14,568			0 No utilization this type
				1,202			1 Some utilization this type
H_OUTSW	404	1	\$UTLFMT				C One or more outpatient visits in CY
				6,403			0 No utilization this type
				9,367			1 Some utilization this type
H_PBSW	405	1	\$UTLFMT				C One or more Part B claims in CY
				3,072			0 No utilization this type
				12,698			1 Some utilization this type
H_PTARMB	406	7					N Total Part A reimbursement in CY (\$)
H_PTBRMB	413	7					N Total Part B reimbursement in CY (\$)
H_PTAPRM	420	8					N Total Pt. A premium SP paid in CY (\$.CC)
H_PTBPRM	428	8					N Total Pt. B premium SP paid in CY (\$.CC)
H_LATDCH	436	8	\$DTE8FMT				C Discharge date of latest inpatient stay
				13,018			Missing
				2,752			Date as YYYYMMDD

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_LATDRG	444	3	\$DRGFMT				C DRG code for latest inpatient stay
				13,018			Unknown, or no discharge
				2,752			DRG
H_DISDES	447	2	\$STATUS				C Discharge dest for latest inpatient stay
				13,018			Missing
				1,635			01 Discharged to home/self care
				13			02 Discharged to other short-term hospital
				492			03 Discharged to skilled nursing facility
				41			04 Discharged to intermediate care facility
				9			05 Disch to another type of institution
				433			06 Discharged to home care of organized HMO
				20			07 Left against medical advice/stopped care
				0			08 Disch home under care of IV therapy prov
				32			20 Expired (did not recover Christian Sci)
				3			30 Still patient
				0			40 Expired at home (hospice claims only)
				0			41 Expired in hospital, SNF, ICF or hospice
				0			42 Expired in unknown place (hospice only)
				21			50 Hospice - home (eff. 96)
				2			51 Hospice - medical facility (eff. 96)
				19			61 Disch w/i facility to swing-bed SNF (99)
				0			71 Disch to other facility for O/P svcs(99)
				0			72 Disch to this facility for O/P svcs (99)
				32			Other destination
H_INPSTY	449	2					N No. of inpatient stays for CY
H_INPDAY	451	3					N No. of inpatient covered days for CY
H_INPCHG	454	7					N Inpatient charges for CY (\$)
H_INPCCH	461	7					N Inpatient covered charges for CY (\$)
H_INPRMB	468	7					N Inpatient reimbursement for CY (\$)
H_INPCDY	475	2					N Inpatient coinsurance days used in CY
H_INPCAM	477	5					N Total inpatient coinsurance amt CY (\$)
H_SNFSTY	482	2					N Total SNF stays in CY
H_SNFDAY	484	3					N Total SNF covered days in CY
H_SNFCHG	487	7					N Total SNF charges in CY (\$)
H_SNFCCH	494	7					N Total SNF covered charges in CY (\$)
H_SNFRMB	501	7					N Total SNF reimbursement in CY (\$)
H_SNFCDY	508	3					N Total SNF coinsurance days in CY
H_SNFCAM	511	7					N Total SNF coinsurance amount in CY (\$)
H_HHAVST	518	5					N Total HHA visits in CY
H_HHACCH	523	7					N Total HHA covered charges in CY (\$)
H_HHACHO	530	7					N Total HHA other covered charges CY (\$)

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H_HHRMBA	537	7					N Total HHA reimbursement in CY (\$), Pt. A
							Notes: Prior to 2000 this was included in H_HHARMB. First available in 2000
H_HHRMBB	544	7					N Total HHA reimbursement in CY (\$), Pt. B
							Notes: Prior to 2000 this was included in H_HHARMB. First available in 2000
H_HSDAYS	551	3					N Total covered hospice days in CY
H_HSTCHG	554	7					N Total hospice charges CY (\$)
H_HSREIM	561	7					N Total hospice reimbursement in CY (\$)
H_OUTBIL	568	3					N Total outpatient bills in CY
H_OUTCHG	571	7					N Total outpatient covered charges CY (\$)
H_OUTRMB	578	7					N Total outpatient reimbursement CY (\$)
H_PHYCLM	585	4					N Total physician claims in CY
							Notes: Prior to 2000 this was included in H_PMTCLM. First available in 2000
H_PHYLIN	589	4					N Total physician line items in CY
							Notes: Prior to 2000 this was included in H_PMTLIN. First available in 2000
H_PHYSCH	593	7					N Total physician submitted charges (\$)
							Notes: Prior to 2000 this was included in H_PMTSCH. First available in 2000
H_PHYACH	600	7					N Total physician allowed charges (\$)
							Notes: Prior to 2000 this was included in H_PMTACH. First available in 2000
H_PHYRMB	607	7					N Total physician reimbursement (\$)
							Notes: Prior to 2000 this was included in H_PMTRMB. First available in 2000
H_PMTVST	614	3					N Total office visits in CY
H_PMTCHO	617	7					N Total office visit charges in CY (\$)
H_DMECLM	624	4					N Total DME supplier claims in CY
							Notes: Prior to 2000 this was included in H_PMTCLM. First available in 2000
H_DMELIN	628	4					N Total DME supplier line items in CY
							Notes: Prior to 2000 this was included in H_PMTLIN. First available in 2000

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H_DMESCH	632	7					N Total DME supplier submitted charges (\$)
							Notes: Prior to 2000 this was included in H_PMTSCH. First available in 2000
H_DMEACH	639	7					N Total DME supplier allowed charges (\$)
							Notes: Prior to 2000 this was included in H_PMTACH. First available in 2000
H_DMERMB	646	7					N Total DME supplier reimbursement (\$)
							Notes: Prior to 2000 this was included in H_PMTRMB. First available in 2000