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**MEDICARE CURRENT BENEFICIARY SURVEY**  
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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 gender), 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
				15,590			LOW-HIGH BASEID Count
H_DOB	12	8	\$DTE8FMT				C Date of birth
				15,590			Date as YYYYMMDD
H_DOD	20	6	\$DTE8FMT				C Date of death
				15,466			Missing
				124			Date as YYYYMMDD
H_DODSRC	26	2	\$SRCFMT				C Source of date of death
				15,466			No date of death
				0			01 From Medicare bill
				0			03 Clerical entry
				0			05 Bill and clerical entry
				62			10 Proven Medicare Benefits record
				7			11 Proven Medicare Benefits record & bills
				46			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	28	1	\$SEXFMT				C Sex code
				6,752			1 Male
				8,838			2 Female
H_RACE	29	1	\$RACEFMT				C Race code
				136			0 Unknown
				13,191			1 White
				1,701			2 Black
				252			3 Other
				62			4 Asian
				238			5 Hispanic
				10			6 North American Native
H_AGE	30	3	AGEFMT				N SP age based on CMS date of birth
				15,590			Age in years

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D_STRAT	33	1	\$AGEFMT				C MCBS Sample age stratum
				1,219			1 0-44
				1,378			2 45-64
				2,570			3 65-69
				2,593			4 70-74
				2,566			5 75-79
				2,573			6 80-84
				2,691			7 85 +
H_ENT01	34	1	\$ENTFMT				C Medicare entitlement code for Jan
				488			A Part A Medicare only
				131			B Part B Medicare only
				14,969			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT02	35	1	\$ENTFMT				C Medicare entitlement code for Feb
				488			A Part A Medicare only
				129			B Part B Medicare only
				14,971			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT03	36	1	\$ENTFMT				C Medicare entitlement code for Mar
				483			A Part A Medicare only
				129			B Part B Medicare only
				14,976			C Parts A and B Medicare
				2			N No Medicare entitlement
H_ENT04	37	1	\$ENTFMT				C Medicare entitlement code for Apr
				481			A Part A Medicare only
				128			B Part B Medicare only
				14,978			C Parts A and B Medicare
				3			N No Medicare entitlement
H_ENT05	38	1	\$ENTFMT				C Medicare entitlement code for May
				479			A Part A Medicare only
				128			B Part B Medicare only
				14,980			C Parts A and B Medicare
				3			N No Medicare entitlement
H_ENT06	39	1	\$ENTFMT				C Medicare entitlement code for Jun
				474			A Part A Medicare only
				128			B Part B Medicare only
				14,985			C Parts A and B Medicare
				3			N No Medicare entitlement
H_ENT07	40	1	\$ENTFMT				C Medicare entitlement code for Jul
				444			A Part A Medicare only
				128			B Part B Medicare only
				15,014			C Parts A and B Medicare
				4			N No Medicare entitlement

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H_ENT08	41	1	\$ENTFMT				C Medicare entitlement code for Aug
				439			A Part A Medicare only
				129			B Part B Medicare only
				15,016			C Parts A and B Medicare
				6			N No Medicare entitlement
H_ENT09	42	1	\$ENTFMT				C Medicare entitlement code for Sep
				443			A Part A Medicare only
				129			B Part B Medicare only
				15,011			C Parts A and B Medicare
				7			N No Medicare entitlement
H_ENT10	43	1	\$ENTFMT				C Medicare entitlement code for Oct
				441			A Part A Medicare only
				128			B Part B Medicare only
				15,012			C Parts A and B Medicare
				9			N No Medicare entitlement
H_ENT11	44	1	\$ENTFMT				C Medicare entitlement code for Nov
				439			A Part A Medicare only
				128			B Part B Medicare only
				14,999			C Parts A and B Medicare
				24			N No Medicare entitlement
H_ENT12	45	1	\$ENTFMT				C Medicare entitlement code for Dec
				439			A Part A Medicare only
				128			B Part B Medicare only
				14,951			C Parts A and B Medicare
				72			N No Medicare entitlement
H_DOE	46	6	\$DTE8FMT				C Medicare entitlement start date
				15,590			Date as YYYYMMDD
H_DOT	52	6	\$DTE8FMT				C Medicare entitlement end date
				15,577			Missing
				13			Date as YYYYMMDD
H_MEDSTA	58	2	\$MSCFMT				C Medicare status code as of 12/31
				12,952			10 Aged, no ESRD
				36			11 Aged, ESRD
				2,520			20 Disabled, no ESRD
				47			21 Disabled, ESRD
				35			31 ESRD only

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_LAF	60	2	\$LAFFMT				C Status of SSA check (LAF) as of 12/31
				0			AD Cur pay-adj for dual entitlement
				0			AF Transfer to another PC or dio
				0			A9 Cur pay-miscellaneous adjustment
				14,999			C Current payment status
				0			DW Deferred-Workers' Compensation
				22			D2 DEF-retirement test
				0			D3 DEF-D2 for primary
				4			D6 DEF-recover overpayment
				3			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
				1			S SUSP-deferred retirement
				5			SD SUSP-other
				0			SF SUSP-fails to meet residence requirment
				30			SH SUSP-government pension
				3			SP SUSP-public assistance
				0			SW SUSP-Workers' Compensation
				2			S0 SUSP-continuing disability investig
				31			S2 SUSP-fails retirement test
				1			S3 SUSP-primary account S2
				6			S6 SUSP-check returned for address
				28			S7 SUSP-vocational rehab refusal
				1			S8 SUSP-payee not determined
				5			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
				91			T1 TERM-death of beneficiary
				0			T2 TERM-death of primary
				1			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
				3			T8 TERM-recovery from disability
				0			T9 TERM-miscellaneous
				344			U Active uninsured status (no SSA check)
				0			XF Transfer to another PC or DIO
				0			XR Terminated -
				4			X1 TERM-death of insured
				0			X5 TERM-entitled to another benefit
				6			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	62	2	\$STFMT				C SSA State code of residence as of 12/31
				463			01 Alabama
				0			02 Alaska
				129			03 Arizona
				124			04 Arkansas
				1,375			05 California
				308			06 Colorado
				111			07 Connecticut
				2			08 Delaware
				66			09 Washington, DC
				883			10 Florida
				734			11 Georgia
				0			12 Hawaii
				108			13 Idaho
				608			14 Illinois
				387			15 Indiana
				354			16 Iowa
				209			17 Kansas
				192			18 Kentucky
				135			19 Louisiana
				168			20 Maine
				190			21 Maryland
				170			22 Massachusetts
				503			23 Michigan
				187			24 Minnesota
				126			25 Mississippi
				225			26 Missouri
				0			27 Montana
				4			28 Nebraska
				142			29 Nevada
				4			30 New Hampshire
				745			31 New Jersey
				122			32 New Mexico
				1,070			33 New York
				13			34 North Carolina
				75			35 North Dakota
				639			36 Ohio
				290			37 Oklahoma
				10			38 Oregon
				793			39 Pennsylvania
				359			40 Puerto Rico
				2			41 Rhode Island
				573			42 South Carolina
				1			43 South Dakota
				90			44 Tennessee
				1,006			45 Texas
				2			46 Utah
				2			47 Vermont
				0			48 Virgin Islands
				584			49 Virginia
				544			50 Washington
				141			51 West Virginia
				549			52 Wisconsin
				73			53 Wyoming
H_RESCTY	64	3	\$CTYFMT				C SSA county code of residence as of 12/31
				15,590			County code

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H_ZIP	67	5	\$ZIPFMT	15,590			C Postal zip code of residence as of 12/31 ZIP Code
H_CENSUS	72	2	\$CENFMT	0 457 2,608 2,686 1,055 3,186 871 1,555 884 1,929 359			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	74	1	\$METFMT	4,336 0 11,254			C Metro status N Non-metro area U Unknown Y Metro area
H_HSBEG1	75	6	\$DTE8FMT	15,519 71			C Beginning date of latest hospice period Missing Date as YYYYMMDD
H_HSEND1	81	6	\$DTE8FMT	15,519 71			C Ending date of latest hospice period Missing Date as YYYYMMDD
H_HSBEG2	87	6	\$DTE8FMT	15,566 24			C Beginning date of 2nd hospice period Missing Date as YYYYMMDD
H_HSEND2	93	6	\$DTE8FMT	15,566 24			C Ending date of 2nd hospice period Missing Date as YYYYMMDD
H_HSBEG3	99	6	\$DTE8FMT	15,579 11			C Beginning date of 3rd hospice period Missing Date as YYYYMMDD
H_HSEND3	105	6	\$DTE8FMT	15,579 11			C Ending date of 3rd hospice period Missing Date as YYYYMMDD
H_HSBEG4	111	6	\$DTE8FMT	15,579 11			C Beginning date of 4th hospice period Missing Date as YYYYMMDD

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H_HSEND4	117	6	\$DTE8FMT	15,579 11			C Ending date of 4th hospice period  Missing Date as YYYYMMDD
H_ESRBEG	123	6	\$DTE8FMT	15,581 9			C Beginning date of ESRD period  Missing Date as YYYYMMDD
H_ESREND	129	6	\$DTE8FMT	15,585 5			C Ending date of ESRD period  Missing Date as YYYYMMDD
H_GHPSW	135	1	\$GHPSW	14,084 1,506			C Some group health participation in year  0 No enrollment 1 Some enrollment
H_PLTP01	136	2	\$PLNFMT	14,412 227 32 2 906 11 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_PLAN01	138	5	\$GHPFMT	14,412 1,178			C GHP contract number for Jan  N Unknown, or no plan Plan Identifier
H_PLPY01	143	4					N Medicare capitation payment for Jan
H_PLTP02	147	2	\$PLNFMT	14,399 228 31 2 919 11 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_PLAN02	149	5	\$GHPFMT	14,399 1,191			C GHP contract number for Feb  N Unknown, or no plan Plan Identifier
H_PLPY02	154	4					N Medicare capitation payment for Feb

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H_PLTP03	158	2	\$PLNFMT				C GHP plan type for Mar
				14,384			No enrollment
				225			01 Health care prepayment plan
				32			02 Cost HMO
				2			05 Old Risk HMO
				936			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN03	160	5	\$GHPFMT				C GHP contract number for Mar
				14,384			N Unknown, or no plan
				1,206			Plan Identifier
H_PLPY03	165	4					N Medicare capitation payment for Mar
H_PLTP04	169	2	\$PLNFMT				C GHP plan type for Apr
				14,335			No enrollment
				229			01 Health care prepayment plan
				31			02 Cost HMO
				2			05 Old Risk HMO
				982			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN04	171	5	\$GHPFMT				C GHP contract number for Apr
				14,335			N Unknown, or no plan
				1,255			Plan Identifier
H_PLPY04	176	4					N Medicare capitation payment for Apr
H_PLTP05	180	2	\$PLNFMT				C GHP plan type for May
				14,316			No enrollment
				226			01 Health care prepayment plan
				30			02 Cost HMO
				2			05 Old Risk HMO
				1,005			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN05	182	5	\$GHPFMT				C GHP contract number for May
				14,316			N Unknown, or no plan
				1,274			Plan Identifier
H_PLPY05	187	4					N Medicare capitation payment for May



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H_PLTP06	191	2	\$PLNFMT				C GHP plan type for Jun
				14,289			No enrollment
				226			01 Health care prepayment plan
				30			02 Cost HMO
				2			05 Old Risk HMO
				1,032			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN06	193	5	\$GHPFMT				C GHP contract number for Jun
				14,289			N Unknown, or no plan
				1,301			Plan Identifier
H_PLPY06	198	4					N Medicare capitation payment for Jun
H_PLTP07	202	2	\$PLNFMT				C GHP plan type for Jul
				14,268			No enrollment
				219			01 Health care prepayment plan
				32			02 Cost HMO
				2			05 Old Risk HMO
				1,058			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN07	204	5	\$GHPFMT				C GHP contract number for Jul
				14,268			N Unknown, or no plan
				1,322			Plan Identifier
H_PLPY07	209	4					N Medicare capitation payment for Jul
H_PLTP08	213	2	\$PLNFMT				C GHP plan type for Aug
				14,237			No enrollment
				221			01 Health care prepayment plan
				32			02 Cost HMO
				2			05 Old Risk HMO
				1,087			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN08	215	5	\$GHPFMT				C GHP contract number for Aug
				14,237			N Unknown, or no plan
				1,353			Plan Identifier
H_PLPY08	220	4					N Medicare capitation payment for Aug

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H_PLTP09	224	2	\$PLNFMT				C GHP plan type for Sep
				14,221			No enrollment
				221			01 Health care prepayment plan
				32			02 Cost HMO
				2			05 Old Risk HMO
				1,103			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN09	226	5	\$GHPFMT				C GHP contract number for Sep
				14,221			N Unknown, or no plan
				1,369			Plan Identifier
H_PLPY09	231	4					N Medicare capitation payment for Sep
H_PLTP10	235	2	\$PLNFMT				C GHP plan type for Oct
				14,191			No enrollment
				219			01 Health care prepayment plan
				31			02 Cost HMO
				2			05 Old Risk HMO
				1,136			06 Risk HMO
				11			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN10	237	5	\$GHPFMT				C GHP contract number for Oct
				14,191			N Unknown, or no plan
				1,399			Plan Identifier
H_PLPY10	242	4					N Medicare capitation payment for Oct
H_PLTP11	246	2	\$PLNFMT				C GHP plan type for Nov
				14,173			No enrollment
				217			01 Health care prepayment plan
				31			02 Cost HMO
				2			05 Old Risk HMO
				1,155			06 Risk HMO
				12			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN11	248	5	\$GHPFMT				C GHP contract number for Nov
				14,173			N Unknown, or no plan
				1,417			Plan Identifier
H_PLPY11	253	4					N Medicare capitation payment for Nov

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H_PLTP12	257	2	\$PLNFMT				C GHP plan type for Dec
				14,155			No enrollment
				214			01 Health care prepayment plan
				30			02 Cost HMO
				2			05 Old Risk HMO
				1,177			06 Risk HMO
				12			12 Demo Risk HMO
				0			17 Pace Demo plan
				0			18 HCPP
H_PLAN12	259	5	\$GHPFMT				C GHP contract number for Dec
				14,155			N Unknown, or no plan
				1,435			Plan Identifier
H_PLPY12	264	4					N Medicare capitation payment for Dec
H_MCSW	268	1	\$SWFMT				C Some Medicaid eligibility for the year
				12,690			N No participation
				2,900			Y Some participation
H_MCDE01	269	1	\$MCDCFMT				C Medicaid eligibility for Jan
				0			A State Part A buy-in
				1,140			B State Part B buy-in
				51			C State Part A and B buy-in
				68			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,865			N No buy-in this month
				1,396			Q State Part B QMB buy-in
				70			S State Part B SLMB buy-in
H_MCDE02	270	1	\$MCDCFMT				C Medicaid eligibility for Feb
				0			A State Part A buy-in
				1,146			B State Part B buy-in
				50			C State Part A and B buy-in
				70			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,852			N No buy-in this month
				1,401			Q State Part B QMB buy-in
				71			S State Part B SLMB buy-in
H_MCDE03	271	1	\$MCDCFMT				C Medicaid eligibility for Mar
				0			A State Part A buy-in
				1,153			B State Part B buy-in
				50			C State Part A and B buy-in
				70			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,840			N No buy-in this month
				1,401			Q State Part B QMB buy-in
				76			S State Part B SLMB buy-in

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H_MCDE04	272	1	\$MCDCFMT				C Medicaid eligibility for Apr
				0			A State Part A buy-in
				1,153			B State Part B buy-in
				49			C State Part A and B buy-in
				70			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,828			N No buy-in this month
				1,409			Q State Part B QMB buy-in
				81			S State Part B SLMB buy-in
H_MCDE05	273	1	\$MCDCFMT				C Medicaid eligibility for May
				0			A State Part A buy-in
				1,150			B State Part B buy-in
				49			C State Part A and B buy-in
				70			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,833			N No buy-in this month
				1,403			Q State Part B QMB buy-in
				85			S State Part B SLMB buy-in
H_MCDE06	274	1	\$MCDCFMT				C Medicaid eligibility for Jun
				0			A State Part A buy-in
				1,151			B State Part B buy-in
				49			C State Part A and B buy-in
				70			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,818			N No buy-in this month
				1,411			Q State Part B QMB buy-in
				91			S State Part B SLMB buy-in
H_MCDE07	275	1	\$MCDCFMT				C Medicaid eligibility for Jul
				0			A State Part A buy-in
				1,162			B State Part B buy-in
				49			C State Part A and B buy-in
				69			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,807			N No buy-in this month
				1,408			Q State Part B QMB buy-in
				95			S State Part B SLMB buy-in
H_MCDE08	276	1	\$MCDCFMT				C Medicaid eligibility for Aug
				0			A State Part A buy-in
				1,168			B State Part B buy-in
				49			C State Part A and B buy-in
				69			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,798			N No buy-in this month
				1,407			Q State Part B QMB buy-in
				99			S State Part B SLMB buy-in

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H_MCDE09	277	1	\$MCDCFMT				C Medicaid eligibility for Sep
				0			A State Part A buy-in
				1,169			B State Part B buy-in
				49			C State Part A and B buy-in
				69			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,792			N No buy-in this month
				1,407			Q State Part B QMB buy-in
				104			S State Part B SLMB buy-in
H_MCDE10	278	1	\$MCDCFMT				C Medicaid eligibility for Oct
				0			A State Part A buy-in
				1,174			B State Part B buy-in
				50			C State Part A and B buy-in
				69			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,780			N No buy-in this month
				1,412			Q State Part B QMB buy-in
				105			S State Part B SLMB buy-in
H_MCDE11	279	1	\$MCDCFMT				C Medicaid eligibility for Nov
				0			A State Part A buy-in
				1,174			B State Part B buy-in
				50			C State Part A and B buy-in
				69			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,784			N No buy-in this month
				1,406			Q State Part B QMB buy-in
				107			S State Part B SLMB buy-in
H_MCDE12	280	1	\$MCDCFMT				C Medicaid eligibility for Dec
				0			A State Part A buy-in
				1,128			B State Part B buy-in
				49			C State Part A and B buy-in
				65			D State Part A and B QMB buy-in
				0			E State Part A and B SLMB buy-in
				12,863			N No buy-in this month
				1,382			Q State Part B QMB buy-in
				103			S State Part B SLMB buy-in
H_MACY01	281	3	\$MACYFMT				C Buy-in agency for Jan
				12,865			N Unknown, or no buy-in
				2,725			State Agency code
H_MACY02	284	3	\$MACYFMT				C Buy-in agency for Feb
				12,852			N Unknown, or no buy-in
				2,738			State Agency code
H_MACY03	287	3	\$MACYFMT				C Buy-in agency for Mar
				12,840			N Unknown, or no buy-in
				2,750			State Agency code

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H_MACY04	290	3	\$MACYFMT				C Buy-in agency for Apr
				12,828			N Unknown, or no buy-in
				2,762			State Agency code
H_MACY05	293	3	\$MACYFMT				C Buy-in agency for May
				12,833			N Unknown, or no buy-in
				2,757			State Agency code
H_MACY06	296	3	\$MACYFMT				C Buy-in agency for Jun
				12,818			N Unknown, or no buy-in
				2,772			State Agency code
H_MACY07	299	3	\$MACYFMT				C Buy-in agency for Jul
				12,807			N Unknown, or no buy-in
				2,783			State Agency code
H_MACY08	302	3	\$MACYFMT				C Buy-in agency for Aug
				12,798			N Unknown, or no buy-in
				2,792			State Agency code
H_MACY09	305	3	\$MACYFMT				C Buy-in agency for Sep
				12,792			N Unknown, or no buy-in
				2,798			State Agency code
H_MACY10	308	3	\$MACYFMT				C Buy-in agency for Oct
				12,780			N Unknown, or no buy-in
				2,810			State Agency code
H_MACY11	311	3	\$MACYFMT				C Buy-in agency for Nov
				12,784			N Unknown, or no buy-in
				2,806			State Agency code
H_MACY12	314	3	\$MACYFMT				C Buy-in agency for Dec
				12,863			N Unknown, or no buy-in
				2,727			State Agency code
H_HOSSW	317	1	\$UTLFMT				C One or more hospice bills in CY
				15,546			0 No utilization this type
				44			1 Some utilization this type
H_INPSW	318	1	\$UTLFMT				C One or more inpatient discharges in CY
				12,587			0 No utilization this type
				3,003			1 Some utilization this type
H_SNFSW	319	1	\$UTLFMT				C One or more SNF admissions in CY
				15,094			0 No utilization this type
				496			1 Some utilization this type

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H_HHASW	320	1	\$UTLFMT				C 1 = one or more HHA visits in CY
				14,025			0 No utilization this type
				1,565			1 Some utilization this type
H_OUTSW	321	1	\$UTLFMT				C One or more outpatient visits in CY
				6,856			0 No utilization this type
				8,734			1 Some utilization this type
H_PBSW	322	1	\$UTLFMT				C One or more Part B claims in CY
				2,346			0 No utilization this type
				13,244			1 Some utilization this type
H_PTARMB	323	6					N Total Part A reimbursement in CY (\$)
H_PTBRMB	329	6					N Total Part B reimbursement in CY (\$)
H_LATDCH	335	6	\$DTE8FMT				C Discharge date of latest inpatient stay
				12,693			Missing
				2,897			Date as YYYYMMDD
H_LATDRG	341	3	\$DRGFMT				C DRG code for latest inpatient stay
				12,693			Unknown, or no discharge
				2,897			DRG
H_DISDES	344	2	\$STATUS				C Discharge dest for latest inpatient stay
				12,693			Missing
				1,912			01 Discharged to home/self care
				25			02 Discharged to other short-term hospital
				417			03 Discharged to skilled nursing facility
				91			04 Discharged to intermediate care facility
				116			05 Disch to another type of institution
				291			06 Discharged to home care of organized HMO
				12			07 Left against medical advice/stopped care
				0			08 Disch home under care of IV therapy prov
				33			20 Expired (did not recover Christian Sci)
				0			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)
				0			50 Hospice - home (eff. 10/96)
				0			51 Hospice - medical facility (eff. 10/96)
				0			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)
H_LATLOS	346	3					C Not used
H_INPSTY	349	2					N No. of inpatient stays for CY
H_INPDAY	351	3					N No. of inpatient covered days for CY
H_INPCHG	354	6					N Inpatient charges for CY (\$)
H_INPCCH	360	6					N Inpatient covered charges for CY (\$)
H_INPRMB	366	6					N Inpatient reimbursement for CY (\$)

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H_INPDED	372	4					C Inpatient deductible to be met in CY (\$)
H_INPCDY	376	2					N Inpatient coinsurance days used in CY
H_INPCAM	378	5					N Total inpatient coinsurance amt CY (\$)
H_PSYDAY	383	3					C Lifetime psychiatric days remaining
H_LRDAY	386	3					C Lifetime reserve days remaining
H_BLDED	389	2					C Blood deductible to be met in CY (\$)
H_SNFSTY	391	2					N Total SNF stays in CY
H_SNFDAY	393	3					N Total SNF covered days in CY
H_SNFCCH	396	6					N Total SNF charges in CY (\$)
H_SNFCCH	402	6					N Total SNF covered charges in CY (\$)
H_SNFRMB	408	6					N Total SNF reimbursement in CY (\$)
H_SNFCDY	414	3					N Total SNF coinsurance days in CY
H_SNFCAM	417	6					N Total SNF coinsurance amount in CY (\$)
H_HHAVST	423	3					N Total HHA visits in CY
H_HHACCH	426	6					N Total HHA covered charges in CY (\$)
H_HHACHO	432	6					N Total HHA other covered charges CY (\$)
H_HHARMB	438	6					N Total HHA reimbursement in CY (\$)
H_HSDAYS	444	3					N Total covered hospice days in CY
H_HSTCHG	447	6					N Total hospice charges CY (\$)
H_HSREIM	453	6					N Total hospice reimbursement in CY (\$)
H_OUTBIL	459	3					N Total outpatient bills in CY
H_OUTCHG	462	6					N Total outpatient covered charges CY (\$)
H_OUTRMB	468	6					N Total outpatient reimbursement CY (\$)
H_PMTCLM	474	4					N Total physician/supplier claims in CY
H_PMTLIN	478	4					N Total physician/supplier lin items in CY
H_PMTSCH	482	6					N Total submitted charges in CY (\$)
H_PMTACH	488	6					N Total allowed charges in CY (\$)
H_PMTRMB	494	6					N Total physician reimbursement CY (\$)
H_PMTVST	500	3					N Total office visits in CY
H_PMTCHO	503	6					N Total office visit charges in CY (\$)
H_PTBEDD	509	4					C Not used