

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 1
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
RIC	1	2					C Record Identification Code
VERSION	3	1					C Version Number
BASEID	4	8	\$BSIDFMT				C Unique SP Identification Number
				3,760			LOW-HIGH BASEID Count
M0010_ME	12	6					C Agency Medicare provider number
M0012_ME	18	15					C Agency Medicaid provider number
M0014_BR	33	2					C Agency branch state
M0016_BR	35	10					C Agency branch ID
M0030_ST	45	8					N Start of care date
M0032_R0	53	1					N Resumption of care date, NA flag
M0032_RO	54	8					N Resumption of care date
M0050_PA	62	2					C Patient-State
M0060_PA	64	11					C Patient-ZIP
M0066_PA	75	8					N Patient birth date
M0069_PA	83	1	GEND				N Patient gender
				1,285			1 Male
				2,475			2 Female
M0072_P7	84	1					N Primary referring physician, UK flag
M0072_PH	85	10					C Primary referring physician UPIN
M0080_AS	95	2	\$DISCIOA				C Discipline of person completing assess
				3,219			01 RN
				499			02 PT
				10			03 SLP/ST
				32			04 OT
M0090_AS	97	8					N Assessment completion date
M0100_AS	105	2	\$ACOMPOA				C Assessment reason
				1,120			01 S/R; Start; further visits planned
				0			02 S/R; Start; no further visits planned
				249			03 S/R; Resumption of care
				898			04 Follow-up; Recertification
				26			05 Follow-up; Other
				412			06 Transfer to inpat fac; Patient not disch
				49			07 Transfer to inpat fac; Patient disch
				24			08 Disch from agency; Death at home
				982			09 Disch from agency; Disch from agency
				0			10 Disch from agency; No visits completed

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 2
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0140_E0	107	1	INDICOA				N Ethnicity; Asian
				2,391			. Missing
				1,354			0 Not indicated
				15			1 Indicated
M0140_E1	108	1	INDICOA				N Ethnicity; Afr Amer
				2,391			. Missing
				1,192			0 Not indicated
				177			1 Indicated
M0140_E2	109	1	INDICOA				N Ethnicity; Hispanic
				2,391			. Missing
				1,284			0 Not indicated
				85			1 Indicated
M0140_E3	110	1	INDICOA				N Ethnicity; Hawaii
				2,391			. Missing
				1,366			0 Not indicated
				3			1 Indicated
M0140_E4	111	1	INDICOA				N Ethnicity; White
				2,391			. Missing
				303			0 Not indicated
				1,066			1 Indicated
M0140_E5	112	1	INDICOA				N Ethnicity; Unknown
				2,391			. Missing
				1,355			0 Not indicated
				14			1 Indicated
M0140_ET	113	1	INDICOA				N Ethnicity; Am Indian
				2,391			. Missing
				1,356			0 Not indicated
				13			1 Indicated
M0150_10	114	1	INDICOA				N Payment; Workers comp
				3,759			0 Not indicated
				1			1 Indicated
M0150_11	115	1	INDICOA				N Payment; Title programs
				3,747			0 Not indicated
				13			1 Indicated
M0150_12	116	1	INDICOA				N Payment; Other govt
				3,743			0 Not indicated
				17			1 Indicated
M0150_13	117	1	INDICOA				N Payment; Private ins
				3,609			0 Not indicated
				151			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 3
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0150_14	118	1	INDICOA				N Payment; Private HMO
				3,745			0 Not indicated
				15			1 Indicated
M0150_15	119	1	INDICOA				N Payment; Self-pay
				3,737			0 Not indicated
				23			1 Indicated
M0150_16	120	1	INDICOA				N Payment; Other
				3,696			0 Not indicated
				64			1 Indicated
M0150_17	121	1	INDICOA				N Payment; Unknown
				2,391			. Missing
				1,369			0 Not indicated
				0			1 Indicated
M0150_C6	122	1	INDICOA				N Payment; Medicare FFS
				536			0 Not indicated
				3,224			1 Indicated
M0150_C7	123	1	INDICOA				N Payment; Medicare HMO
				3,540			0 Not indicated
				220			1 Indicated
M0150_C8	124	1	INDICOA				N Payment; Medicaid FFS
				3,196			0 Not indicated
				564			1 Indicated
M0150_C9	125	1	INDICOA				N Payment; Medicaid HMO
				3,706			0 Not indicated
				54			1 Indicated
M0150_CP	126	1	INDICOA				N Payment; None
				3,760			0 Not indicated
				0			1 Indicated
M0160_18	127	1	INDICOA				N Finance limit; Medicine
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0160_19	128	1	INDICOA				N Finance limit; Ins copay
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 4
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0160_20	129	1	INDICOA				N Finance limit; Rent
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0160_21	130	1	INDICOA				N Finance limit; Food
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0160_22	131	1	INDICOA				N Finance limit; Other
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0160_LT	132	1	INDICOA				N Finance limit; None
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0175_HS	133	1	INDICOA				N Disch in past 14 days; Hospital
				1,467			. Missing
				1,446			0 Not indicated
				847			1 Indicated
M0175_NO	134	1	INDICOA				N Disch in past 14 days; Not disch
				1,467			. Missing
				1,057			0 Not indicated
				1,236			1 Indicated
M0175_ON	135	1	INDICOA				N Disch in past 14 days; Other nursing hom
				1,467			. Missing
				2,289			0 Not indicated
				4			1 Indicated
M0175_OT	136	1	INDICOA				N Disch in past 14 days; Other
				1,467			. Missing
				2,289			0 Not indicated
				4			1 Indicated
M0175_RH	137	1	INDICOA				N Disch in past 14 days; Rehab
				1,467			. Missing
				2,144			0 Not indicated
				149			1 Indicated
M0175_SN	138	1	INDICOA				N Disch in past 14 days; SNF
				1,467			. Missing
				2,185			0 Not indicated
				108			1 Indicated
M0180_DS	139	1					C Disch in past 14 days; UK flag

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 5
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0180_IN	140	8					N Inpatient discharge date
M0190_14	148	7					C Inpatient diag 1 ICD9
M0190_26	155	7					C Inpatient diag 2 ICD9
M0200_RE	162	1	YESNOOA				N Treatment regimen change
				1,409			. Missing
				1,102			0 No
				1,249			1 Yes
M0210_27	163	7					C Changed regimen; ICD9 2
M0210_28	170	7					C Changed regimen; ICD9 3
M0210_29	177	7					C Changed regimen; ICD9 4
M0210_CH	184	7					C Changed regimen; ICD9 1
M0220_30	191	1	\$INDICOA				C Prior condition; Catheter
				2,296			Missing
				1,408			0 Not indicated
				56			1 Indicated
M0220_31	192	1	\$INDICOA				C Prior condition; Intr pain
				2,296			Missing
				1,356			0 Not indicated
				108			1 Indicated
M0220_32	193	1	\$INDICOA				C Prior condition; Impaired decision
				2,296			Missing
				1,237			0 Not indicated
				227			1 Indicated
M0220_33	194	1	\$INDICOA				C Prior condition; Disruptive beh
				2,296			Missing
				1,442			0 Not indicated
				22			1 Indicated
M0220_34	195	1	\$INDICOA				C Prior condition; Memory loss
				2,296			Missing
				1,303			0 Not indicated
				161			1 Indicated
M0220_35	196	1	\$INDICOA				C Prior condition; None of listed
				2,296			Missing
				702			0 Not indicated
				762			1 Indicated
M0220_36	197	1	\$INDICOA				C Prior condition; No change
				2,391			Missing
				1,285			0 Not indicated
				84			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 6
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0220_37	198	1	\$INDICOA				C Prior condition; Unknown
				2,391			Missing
				1,363			0 Not indicated
				6			1 Indicated
M0220_PR	199	1	\$INDICOA				C Prior condition; Urinary incont
				2,296			Missing
				1,095			0 Not indicated
				369			1 Indicated
M0230_38	200	2	\$SEVEROA				C Primary diag; Severity rating
				1,467			Missing
				7			00 Asymptomatic, not treatement needed
				136			01 Symptoms contr with current therapy
				1,359			02 Symptoms contr with difficulty
				648			03 Symptoms poorly contr, freq dose adjust
				143			04 Symptoms poorly contr, hist rehospitali
M0230_PR	202	7					C Primary diag; ICD9
M0240_39	209	2	\$SEVEROA				C Oth diag 1; Severity rating
				1,620			Missing
				13			00 Asymptomatic, not treatement needed
				305			01 Symptoms contr with current therapy
				1,300			02 Symptoms contr with difficulty
				434			03 Symptoms poorly contr, freq dose adjust
				88			04 Symptoms poorly contr, hist rehospitali
M0240_40	211	7					C Oth diag 2; ICD9
M0240_41	218	2	\$SEVEROA				C Oth diag 2; Severity rating
				1,989			Missing
				16			00 Asymptomatic, not treatement needed
				371			01 Symptoms contr with current therapy
				1,028			02 Symptoms contr with difficulty
				279			03 Symptoms poorly contr, freq dose adjust
				77			04 Symptoms poorly contr, hist rehospitali
M0240_42	220	7					C Oth diag 3; ICD9
M0240_43	227	2	\$SEVEROA				C Oth diag 3; Severity rating
				2,420			Missing
				8			00 Asymptomatic, not treatement needed
				358			01 Symptoms contr with current therapy
				745			02 Symptoms contr with difficulty
				189			03 Symptoms poorly contr, freq dose adjust
				40			04 Symptoms poorly contr, hist rehospitali
M0240_44	229	7					C Oth diag 4; ICD9

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 7
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0240_45	236	2	\$SEVEROA				C Oth diag 4; Severity rating
				2,882			Missing
				14			00 Asymptomatic, not treatment needed
				238			01 Symptoms contr with current therapy
				482			02 Symptoms contr with difficulty
				104			03 Symptoms poorly contr, freq dose adjust
				40			04 Symptoms poorly contr, hist rehospitali
M0240_46	238	7					C Oth diag 5; ICD9
M0240_47	245	2	\$SEVEROA				C Oth diag 5; Severity rating
				3,238			Missing
				18			00 Asymptomatic, not treatment needed
				158			01 Symptoms contr with current therapy
				245			02 Symptoms contr with difficulty
				63			03 Symptoms poorly contr, freq dose adjust
				38			04 Symptoms poorly contr, hist rehospitali
M0240_OT	247	7					C Oth diag 1; ICD9
M0250_48	254	1	INDICOA				N Home therapies; Par nutr
				485			. Missing
				3,273			0 Not indicated
				2			1 Indicated
M0250_49	255	1	INDICOA				N Home therapies; Ent nutr
				485			. Missing
				3,201			0 Not indicated
				74			1 Indicated
M0250_50	256	1	INDICOA				N Home therapies; None of above
				485			. Missing
				105			0 Not indicated
				3,170			1 Indicated
M0250_TH	257	1	INDICOA				N Home therapies; IV infusion
				485			. Missing
				3,242			0 Not indicated
				33			1 Indicated
M0260_OA	258	2	\$OVPRGOA				C Overall prognosis
				2,391			Missing
				30			UK Unknown
				154			00 Poor
				1,185			01 Good/Fair
M0270_RH	260	2	\$REPRGOA				C Rehab prognosis
				2,391			Missing
				22			UK Unknown
				386			00 Guarded
				961			01 Good

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 8
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0280_LI	262	2	\$LIFEEOA				C Life expectancy
				1,409			Missing
				2,167			00 Life expectancy is greater than 6 months
				184			01 life expectancy is 6 month or fewer
M0290_51	264	1	INDICOA				N High risk factors; Obesity
				1,409			. Missing
				2,004			0 Not indicated
				347			1 Indicated
M0290_52	265	1	INDICOA				N High risk factors; Alcohol
				1,409			. Missing
				2,328			0 Not indicated
				23			1 Indicated
M0290_53	266	1	INDICOA				N High risk factors; Drugs
				1,409			. Missing
				2,334			0 Not indicated
				17			1 Indicated
M0290_54	267	1	INDICOA				N High risk factors; None
				1,409			. Missing
				511			0 Not indicated
				1,840			1 Indicated
M0290_55	268	1	INDICOA				N High risk factors; Unknown
				2,391			. Missing
				1,349			0 Not indicated
				20			1 Indicated
M0290_RS	269	1	INDICOA				N High risk factors; Smoking
				1,409			. Missing
				2,193			0 Not indicated
				158			1 Indicated
M0300_CU	270	2	\$CURREOA				C Current residence
				1,409			Missing
				1,808			01 Patient owned or rented residence
				327			02 Family member residence
				8			03 Boarding home or rented room
				192			04 Board and care or assisted living facili
				16			05 Other
M0310_S0	272	1	INDICOA				N Struct barriers; Stairs must
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 9
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0310_S1	273	1	INDICOA				N Struct barriers; Stairs opt
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0310_S2	274	1	INDICOA				N Struct barriers; Stairs outside
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0310_S3	275	1	INDICOA				N Struct barriers; Doorways
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0310_ST	276	1	INDICOA				N Struct barriers; None
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_10	277	1	INDICOA				N Safety haz; Floor covering
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_11	278	1	INDICOA				N Safety haz; Railings
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_12	279	1	INDICOA				N Safety haz; Haz Materials
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_13	280	1	INDICOA				N Safety haz; Lead paint
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_14	281	1	INDICOA				N Safety haz; Other
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_S4	282	1	INDICOA				N Safety haz; Floor,roof,windows
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 10
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0320_S5	283	1	INDICOA				N Safety haz; Lighting
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_S6	284	1	INDICOA				N Safety haz; Appliances
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_S7	285	1	INDICOA				N Safety haz; Heating
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_S8	286	1	INDICOA				N Safety haz; Cooling
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_S9	287	1	INDICOA				N Safety haz; Lack of fire devices
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0320_SA	288	1	INDICOA				N Safety haz; None
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_15	289	1	INDICOA				N Sanitation haz; No running water
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_16	290	1	INDICOA				N Sanitation haz; Contaminated water
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_17	291	1	INDICOA				N Sanitation haz; No toilet fac
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_18	292	1	INDICOA				N Sanitation haz; Outdoor toilet fac
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 11
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0330_19	293	1	INDICOA				N Sanitation haz; Inadequate sewer disp
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_20	294	1	INDICOA				N Sanitation haz; Inadequate food stor
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_21	295	1	INDICOA				N Sanitation haz; No food refridge
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_22	296	1	INDICOA				N Sanitation haz; No cooking fac
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_23	297	1	INDICOA				N Sanitation haz; Insects/rodents present
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_24	298	1	INDICOA				N Sanitation haz; No trash pickup
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_25	299	1	INDICOA				N Sanitation haz; Cluttered/Soiled living
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_26	300	1	INDICOA				N Sanitation haz; Other
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0330_SA	301	1	INDICOA				N Sanitation haz; None
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0340_27	302	1	INDICOA				N Patient lives w/ spouse
				1,409			. Missing
				1,533			0 Not indicated
				818			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 12
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0340_28	303	1	INDICOA				N Patient lives w/ oth fam
				1,409			. Missing
				1,672			0 Not indicated
				679			1 Indicated
M0340_29	304	1	INDICOA				N Patient lives w/ friend
				1,409			. Missing
				2,325			0 Not indicated
				26			1 Indicated
M0340_30	305	1	INDICOA				N Patient lives w/ paid help
				1,409			. Missing
				2,174			0 Not indicated
				177			1 Indicated
M0340_31	306	1	INDICOA				N Patient lives w/ other
				1,409			. Missing
				2,327			0 Not indicated
				24			1 Indicated
M0340_LI	307	1	INDICOA				N Patient lives w/ alone
				1,409			. Missing
				1,632			0 Not indicated
				719			1 Indicated
M0350_A0	308	1	INDICOA				N Assist person; Home resident
				1,409			. Missing
				1,104			0 Not indicated
				1,247			1 Indicated
M0350_A1	309	1	INDICOA				N Assist person; Paid help
				1,409			. Missing
				1,872			0 Not indicated
				479			1 Indicated
M0350_A2	310	1	INDICOA				N Assist person; None
				1,409			. Missing
				2,257			0 Not indicated
				94			1 Indicated
M0350_A3	311	1	INDICOA				N Assist person; Unknown
				2,391			. Missing
				1,369			0 Not indicated
				0			1 Indicated
M0350_AP	312	1	INDICOA				N Assist person; Relative/Friend
				1,409			. Missing
				1,112			0 Not indicated
				1,239			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 13
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0360_PR	313	2	\$PRICAOA				C Primary caregiver
				1,503			Missing
				1			UK Unknown
				367			00 No one person
				639			01 Spouse of significant other
				692			02 Daughter or son
				204			03 Other family member
				84			04 Friend, neighbor, community, church memb
				270			05 Paid help
M0370_FR	315	2	\$OFTASOA				C Primary caregiver; How often
				1,871			Missing
				4			UK Unknown
				775			01 Several times during day or night
				656			02 Several times during day
				190			03 Once daily
				151			04 Three or more times per week
				91			05 One to two times per week
				22			06 Less often than weekly
M0380_10	317	1	\$INDICOA				C Caregiver assist; Unknown
				2,633			Missing
				1,126			0 Not indicated
				1			1 Indicated
M0380_C4	318	1	\$INDICOA				C Caregiver assist; IADL
				1,874			Missing
				159			0 Not indicated
				1,727			1 Indicated
M0380_C5	319	1	\$INDICOA				C Caregiver assist; Environmental
				1,875			Missing
				198			0 Not indicated
				1,687			1 Indicated
M0380_C6	320	1	\$INDICOA				C Caregiver assist; Psychosocial
				1,876			Missing
				169			0 Not indicated
				1,715			1 Indicated
M0380_C7	321	1	\$INDICOA				C Caregiver assist; Medical care
				1,879			Missing
				491			0 Not indicated
				1,390			1 Indicated
M0380_C8	322	1	\$INDICOA				C Caregiver assist; Financial/Legal
				1,890			Missing
				1,454			0 Not indicated
				416			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 14
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0380_C9	323	1	\$INDICOA				C Caregiver assist; Health care agent
				1,889			Missing
				1,552			0 Not indicated
				319			1 Indicated
M0380_CA	324	1	\$INDICOA				C Caregiver assist; ADL
				1,879			Missing
				815			0 Not indicated
				1,066			1 Indicated
M0390_VI	325	2	\$VISIOOA				C Physical assesment; Vision
				1,467			Missing
				1,541			00 Normal vision
				653			01 Partially impaired
				99			02 Severely impaired
M0400_HE	327	2	\$HEARIOA				C Physical assesment; Hearing
				2,391			Missing
				777			00 No observable impairment
				434			01 Minimal difficulty
				116			02 Moderate difficulty
				34			03 Severe difficulty
				8			04 Unable to hear or nonresponsive
M0410_SP	329	2	\$SPEEEOA				C Physical assesment; Speech
				1,409			Missing
				1,547			00 No observable impairment
				532			01 Minimal difficulty
				169			02 Moderate difficulty
				71			03 Severe difficulty
				18			04 Unable to express basic needs
				14			05 Nonresponsive or unable to speak
M0420_FR	331	2	\$FREQPOA				C Frequency of pain
				485			Missing
				1,397			00 No pain or pain does not interfere
				479			01 Less often than daily
				1,178			02 Daily, but not constantly
				221			03 All of the time
M0430_IN	333	1	YESNOOA				N Intractable pain
				1,409			. Missing
				2,122			0 No
				229			1 Yes
M0440_LE	334	1	YESNOOA				N Skin lesion/Open wound
				485			. Missing
				1,961			0 No
				1,314			1 Yes

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 15
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0445_PR	335	1	\$YESNOOA				C Pressure ulcer
				2,796			Missing
				838			0 No
				126			1 Yes
M0450_N0	336	2	\$ULNUMOA				C No. of press ulcers Stage 2
				3,415			Missing
				190			00 None
				112			01 One
				31			02 Two
				6			03 Three
				6			04 Four or more
M0450_N1	338	2	\$ULNUMOA				C No. of press ulcers Stage 3
				3,417			Missing
				287			00 None
				47			01 One
				8			02 Two
				1			03 Three
				0			04 Four or more
M0450_N2	340	2	\$ULNUMOA				C No. of press ulcers Stage 4
				3,417			Missing
				323			00 None
				18			01 One
				1			02 Two
				1			03 Three
				0			04 Four or more
M0450_NB	342	2	\$ULNUMOA				C No. of Press ulcers Stage 1
				3,416			Missing
				282			00 None
				49			01 One
				10			02 Two
				3			03 Three
				0			04 Four or more
M0450_UN	344	1	\$YESNOOA				C Press ulcer cannot be observed
				3,416			Missing
				332			0 No
				12			1 Yes
M0460_ST	345	2	\$ULSTGOA				C Stage of most prob press ulcer
				3,493			Missing
				11			NA No observable pressure ulcer
				44			01 Stage one
				140			02 Stage two
				53			03 Stage three
				19			04 Stage four

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 16
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0464_ST	347	2	\$ULSTAOA				C Status of most prob press ulcer
				3,634			Missing
				7			NA No observable pressure ulcer
				21			01 Fully granulating
				61			02 Early/Partial granulation
				37			03 Not healing
M0468_ST	349	1	\$YESNOOA				C Stasis ulcer
				2,796			Missing
				912			0 No
				52			1 Yes
M0470_NB	350	2	\$ULNUMOA				C No. of stasis ulcers
				3,708			Missing
				1			00 None
				32			01 One
				9			02 Two
				0			03 Three
				10			04 Four or more
M0474_UN	352	1	\$YESNOOA				C Stasis ulcer that cannot be observed
				3,708			Missing
				48			0 No
				4			1 Yes
M0476_ST	353	2	\$ULSTAOA				C Status of most problemat stasis ulcer
				3,633			Missing
				34			NA No observable pressure ulcer
				8			01 Fully granulating
				56			02 Early/Partial granulation
				29			03 Not healing
M0482_SU	355	1	\$YESNOOA				C Surgical wound
				2,796			Missing
				472			0 No
				492			1 Yes
M0484_NB	356	2	\$ULNUMOA				C No. of surgical wounds
				3,268			Missing
				14			00 None
				340			01 One
				67			02 Two
				33			03 Three
				38			04 Four or more
M0486_UN	358	1	\$YESNOOA				C Surgical wound that cannot be observed
				3,268			Missing
				453			0 No
				39			1 Yes

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 17
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0488_ST	359	2	\$ULSTAOA				C Status of most problemat surgical wound
				3,175			Missing
				53			NA No observable pressure ulcer
				235			01 Fully granulating
				259			02 Early/Partial granulation
				38			03 Not healing
M0490_WH	361	2	\$SBREA0A				C When is patient dyspneic
				485			Missing
				1,192			00 Never
				782			01 When walking more than 20 feet
				714			02 With moderate exertion
				471			03 With minimal exertion
				116			04 At rest (day or night)
M0500_R0	363	1	INDIC0A				N Respir treatment; Ventilator
				1,409			. Missing
				2,351			0 Not indicated
				0			1 Indicated
M0500_R1	364	1	INDIC0A				N Respir treatment; Airway pressure
				1,409			. Missing
				2,343			0 Not indicated
				8			1 Indicated
M0500_R2	365	1	INDIC0A				N Respir treatment; None
				1,409			. Missing
				321			0 Not indicated
				2,030			1 Indicated
M0500_RE	366	1	INDIC0A				N Respir treatment; Oxygen
				1,409			. Missing
				2,035			0 Not indicated
				316			1 Indicated
M0510_UT	367	2	\$UTINFOA				C Urinary tract infection
				1,409			Missing
				21			NA Patient on prophylactic treatment
				10			UK Unknown
				2,187			00 No
				133			01 Yes
M0520_UR	369	2	\$UIUCPOA				C Urinary incontinence
				1,409			Missing
				1,509			00 No incontinence or catheter
				719			01 Patient is incintinent
				123			02 Patient requires a urinary catheter

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 18
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0530_UR	371	2	\$URINCOA				C Urinary incontinence occurs
				2,606			Missing
				290			00 Timed-voiding deters incontinence
				86			01 During the night only
				778			02 During the day and night
M0540_BW	373	2	\$BWINCOA				C Bowel incontinence frequency
				485			Missing
				41			NA Patient has ostomy for bowel elimination
				0			UK Unknown
				2,731			00 Very rarely or never has bowel incont
				121			01 Less than once weekly
				154			02 One to three times weekly
				76			03 Four to six times weekly
				121			04 On a daily basis
				31			05 More often than once daily
M0550_OS	375	2	\$BWOSTOA				C Ostomy
				485			Missing
				3,234			00 Does not have an ostomy
				37			01 Ostomy was not related to inpatient stay
				4			02 Ostomy was related to inpatient stay
M0560_CO	377	2	\$COGFUOA				C Cognitive functioning
				1,409			Missing
				1,486			00 Alert/Oriented
				550			01 Req prompting
				220			02 Req assist and some direction
				72			03 Req considerable assist in routine situa
				23			04 Totally dependent due to disturbances
M0570_WH	379	2	\$WCONFOA				C When confused (reported or observed)
				1,409			Missing
				13			NA Patient nonresponsive
				1,330			00 Never
				692			01 In new or complex situations
				48			02 On awakening or at night only
				224			03 During the day or evening
				44			04 Constantly
M0580_WH	381	2	\$WANXIOA				C When anxious (reported or observed)
				1,409			Missing
				15			NA Patient nonresponsive
				1,450			00 None of the time
				516			01 Less often than daily
				339			02 Daily, but not constantly
				31			03 All of the time
M0590_D0	383	1	INDICOA				N Sense of failure or self reproach
				1,409			. Missing
				2,306			0 Not indicated
				45			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 19
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0590_D1	384	1	INDICOA				N Hopelessness
				1,409			. Missing
				2,281			0 Not indicated
				70			1 Indicated
M0590_D2	385	1	INDICOA				N Recurrent thoughts of death
				1,409			. Missing
				2,330			0 Not indicated
				21			1 Indicated
M0590_D3	386	1	INDICOA				N Thoughts of suicide
				1,409			. Missing
				2,345			0 Not indicated
				6			1 Indicated
M0590_D4	387	1	INDICOA				N None of the above feelings
				1,409			. Missing
				496			0 Not indicated
				1,855			1 Indicated
M0590_DP	388	1	INDICOA				N Depressed mood
				1,409			. Missing
				1,872			0 Not indicated
				479			1 Indicated
M0600_10	389	1	INDICOA				N None of the above behaviors
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0600_B5	390	1	INDICOA				N Diminished interest in most activities
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0600_B6	391	1	INDICOA				N Sleep disturbances
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0600_B7	392	1	INDICOA				N Recent change in appetite or weight
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0600_B8	393	1	INDICOA				N Agitation
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 20
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0600_B9	394	1	INDICOA				N A suicide attempt
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0600_BE	395	1	INDICOA				N Indecisiveness, lack of concentration
				3,760			. Missing
				0			0 Not indicated
				0			1 Indicated
M0610_11	396	1	INDICOA				N Impaired decision-making
				485			. Missing
				2,772			0 Not indicated
				503			1 Indicated
M0610_12	397	1	INDICOA				N Verbal disruption
				485			. Missing
				3,223			0 Not indicated
				52			1 Indicated
M0610_13	398	1	INDICOA				N Physical aggression
				485			. Missing
				3,254			0 Not indicated
				21			1 Indicated
M0610_14	399	1	INDICOA				N Disruptive, infantile, or socially inapp
				485			. Missing
				3,252			0 Not indicated
				23			1 Indicated
M0610_15	400	1	INDICOA				N Delusional, hallucinatory, or paranoid
				485			. Missing
				3,214			0 Not indicated
				61			1 Indicated
M0610_16	401	1	INDICOA				N None of the above behaviors demonstrated
				485			. Missing
				784			0 Not indicated
				2,491			1 Indicated
M0610_BD	402	1	INDICOA				N Memory deficit
				485			. Missing
				2,770			0 Not indicated
				505			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 21
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0620_BE	403	2	\$FREQBOA				C Frequency of behavior problems
				1,409			Missing
				0			0 As reported
				2,151			00 Never
				23			01 Less than once a month
				6			02 One a month
				25			03 Several times each month
				43			04 Several times a week
				103			05 At least daily
M0630_RE	405	1	YESNOOA				N Receiving psychiatric nursing services
				1,409			. Missing
				2,321			0 No
				30			1 Yes
M0640_CU	406	2	\$GROOMOA				C Grooming, current
				1,409			Missing
				0			UK Unknown
				1,346			00 Able to groom self unaided
				441			01 Utensils must be placed within reach
				359			02 Someone must assist patient to groom self
				205			03 Depends entirely upon another person
M0640_PR	408	2	\$GROOMOA				C Grooming, prior
				2,391			Missing
				20			UK Unknown
				818			00 Able to groom self unaided
				224			01 Utensils must be placed within reach
				188			02 Someone must assist patient to groom self
				119			03 Depends entirely upon another person
M0650_CU	410	2	\$DRESSOA				C Ability to dress upper body, current
				485			Missing
				0			UK Unknown
				1,591			00 No assist needed
				685			01 No assist needed if clothing laid out
				638			02 Assist from another person
				361			03 Depends entirely upon another person
M0650_PR	412	2	\$DRESSOA				C Ability to dress upper body, prior
				2,391			Missing
				18			UK Unknown
				755			00 No assist needed
				236			01 No assist needed if clothing laid out
				226			02 Assist from another person
				134			03 Depends entirely upon another person
M0660_CU	414	2	\$DRESSOA				C Ability to dress lower body, current
				485			Missing
				0			UK Unknown
				1,388			00 No assist needed
				444			01 No assist needed if clothing laid out
				970			02 Assist from another person
				473			03 Depends entirely upon another person

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 22
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0660_PR	416	2	\$DRESSOA				C Ability to dress lower body, prior
				2,391			Missing
				21			UK Unknown
				704			00 No assist needed
				173			01 No assist needed if clothing laid out
				305			02 Assist from another person
				166			03 Depends entirely upon another person
M0670_CU	418	2	\$BATHIOA				C Bathing, current
				485			Missing
				0			UK Unknown
				550			00 Bathes self independently
				485			01 Bathes self with use of devices
				799			02 Bathes with intermittent assist
				725			03 Bathes with complete assist/supervision
				463			04 Unable, bed/bedside chair
				253			05 Unable, totally bathed by another person
M0670_PR	420	2	\$BATHIOA				C Bathing, prior
				2,391			Missing
				23			UK Unknown
				433			00 Bathes self independently
				179			01 Bathes self with use of devices
				225			02 Bathes with intermittent assist
				254			03 Bathes with complete assist/supervision
				169			04 Unable, bed/bedside chair
				86			05 Unable, totally bathed by another person
M0680_CU	422	2	\$TOILEOA				C Toileting, current
				485			Missing
				0			UK Unknown
				2,170			00 Toilet, to and from independently
				597			01 Toilet, when reminded/assist/supervised
				195			02 Unable toil, able to bedside commode
				26			03 Unable toil/bedside commode, able bedpan
				287			04 Depends entirely upon another person
M0680_PR	424	2	\$TOILEOA				C Toileting, prior
				2,391			Missing
				24			UK Unknown
				934			00 Toilet, to and from independently
				233			01 Toilet, when reminded/assist/supervised
				68			02 Unable toil, able to bedside commode
				12			03 Unable toil/bedside commode, able bedpan
				98			04 Depends entirely upon another person
M0690_CU	426	2	\$TRANSOA				C Transferring, current
				485			Missing
				0			UK Unknown
				1,184			00 Able to independently transfer
				1,627			01 Transfers with minimal assist or device
				212			02 Unable transfer self, able to pivot
				99			03 Unable transfer self, unable to pivot
				29			04 Bedfast, unable trans, able to positio
				124			05 Bedfast, unable trans, unable to positio

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 23
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0690_PR	428	2	\$TRANSOA				C Transferring, prior
				2,391			Missing
				24			UK Unknown
				627			00 Able to independently transfer
				557			01 Transfers with minimal assist or device
				82			02 Unable transfer self, able to pivot
				26			03 Unable transfer self, unable to pivot
				20			04 Bedfast, unable trans, able to positio
				33			05 Bedfast, unable trans, unable to positio
M0700_CU	430	2	\$AMBULOA				C Ambulation/Locomotion, current
				485			Missing
				0			UK Unknown
				579			00 Able to independently walk/stairs
				1,872			01 Able to walk w/ device, assist w/ stairs
				373			02 Able to walk w/ constant assist/supervis
				196			03 Chairfast, able to wheel self independ
				155			04 Chairfast, unable to wheel self independ
				100			05 Bedfast, unable to ambulate/or chair
M0700_PR	432	2	\$AMBULOA				C Ambulation/Locomotion, prior
				2,391			Missing
				23			UK Unknown
				408			00 Able to independently walk/stairs
				660			01 Able to walk w/ device, assist w/ stairs
				130			02 Able to walk w/ constant assist/supervis
				59			03 Chairfast, able to wheel self independ
				53			04 Chairfast, unable to wheel self independ
				36			05 Bedfast, unable to ambulate/or chair
M0710_CU	434	2	\$FEEDIOA				C Feeding or eating, current
				1,409			Missing
				0			UK Unknown
				1,625			00 Able independently feed self
				594			01 Able feed self with intermittent assist
				102			02 Unable feed self, complete assist/superv
				12			03 Able take nutri oral, rec tube feedi
				16			04 Unable take nutri oral, rec tube feedi
				2			05 Unable take nutri oral or tube feedi
M0710_PR	436	2	\$FEEDIOA				C Feeding or eating, prior
				2,391			Missing
				18			UK Unknown
				973			00 Able independently feed self
				310			01 Able feed self with intermittent assist
				52			02 Unable feed self, complete assist/superv
				7			03 Able take nutri oral, rec tube feedi
				6			04 Unable take nutri oral, rec tube feedi
				3			05 Unable take nutri oral or tube feedi

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 24
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0720_CU	438	2	\$MEALSOA				C Planning/Preparing light meals, current
				1,409			Missing
				0			UK Unknown
				909			00 Able to independently prepare all meals
				646			01 Unable to prepare meals on regular basis
				796			02 Unable to prepare any meals
M0720_PR	440	2	\$MEALSOA				C Planning/Preparing light meals, prior
				2,391			Missing
				25			UK Unknown
				594			00 Able to independently prepare all meals
				298			01 Unable to prepare meals on regular basis
				452			02 Unable to prepare any meals
M0730_CU	442	2	\$TRANPOA				C Transportation, current
				1,409			Missing
				0			UK Unknown
				171			00 Able to independently drive car
				2,063			01 Able to ride when car driven by another
				117			02 Unable to ride in car, trans by ambulanc
M0730_PR	444	2	\$TRANPOA				C Transportation, prior
				2,391			Missing
				15			UK Unknown
				262			00 Able to independently drive car
				1,009			01 Able to ride when car driven by another
				83			02 Unable to ride in car, trans by ambulanc
M0740_CU	446	2	\$LAUNDOA				C Laundry, current
				1,409			Missing
				0			UK Unknown
				237			00 Able to independently do laundry
				652			01 Able to do only lt laundry, assist heavy
				1,462			02 Unable to do any laundry
M0740_PR	448	2	\$LAUNDOA				C Laundry, prior
				2,391			Missing
				21			UK Unknown
				315			00 Able to independently do laundry
				279			01 Able to do only lt laundry, assist heavy
				754			02 Unable to do any laundry
M0750_CU	450	2	\$HOUSEOA				C Housekeeping, current
				1,409			Missing
				0			UK Unknown
				159			00 Able independently perform houskeep
				654			01 Able perform only light houskeep
				123			02 Able perform houskeep w/ intermit assist
				314			03 Unable perform houskeep w/o compl assist
				1,101			04 Unable particip in any houskeep tasks

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 25
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0750_PR	452	2	\$HOUSEOA				C Housekeeping, prior
				2,391			Missing
				22			UK Unknown
				268			00 Able independently perform houskeep
				278			01 Able perform only light houskeep
				59			02 Able perform houskeep w/ intermit assist
				143			03 Unable perform houskeep w/o compl assist
				599			04 Unable particip in any houskeep tasks
M0760_CU	454	2	\$SHOPPOA				C Shopping, current
				1,409			Missing
				0			UK Unknown
				106			00 Able to independently shop
				567			01 Able to shop, but needs some assistance
				871			02 Unable to shop, but can arrange delivery
				807			03 Needs someone to do all shop and errands
M0760_PR	456	2	\$SHOPPOA				C Shopping, prior
				2,391			Missing
				20			UK Unknown
				253			00 Able to independently shop
				280			01 Able to shop, but needs some assistance
				355			02 Unable to shop, but can arrange delivery
				461			03 Needs someone to do all shop and errands
M0770_CU	458	2	\$TELEPOA				C Ability to use telephone, current
				1,409			Missing
				37			NA Patient does not have a telephone
				0			UK Unknown
				1,666			00 Able independently dial/answer calls
				137			01 Able use a specif adapted phone and call
				167			02 Able answer calls, diff placing calls
				126			03 Able answer calls only some of the time
				81			04 Unable answer phone at all, can listen
				137			05 Totaly unable to use the telephone
M0770_PR	460	2	\$TELEPOA				C Ability to use telephone, prior
				2,391			Missing
				21			NA Patient does not have a telephone
				20			UK Unknown
				945			00 Able independently dial/answer calls
				90			01 Able use a specif adapted phone and call
				88			02 Able answer calls, diff placing calls
				76			03 Able answer calls only some of the time
				38			04 Unable answer phone at all, can listen
				91			05 Totaly unable to use the telephone
M0780_CU	462	2	\$MANRXOA				C Manage oral medica, current
				1,409			Missing
				14			NA No med of this type prescribed
				0			UK Unknown
				1,022			00 Able to independently take correct med
				762			01 Able to take med corect times w/ assist
				553			02 Unable to take med unless administered

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 26
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0780_PR	464	2	\$MANRXOA				C Manage oral medica, prior
				2,391			Missing
				21			NA No med of this type prescribed
				20			UK Unknown
				591			00 Able to independently take correct med
				407			01 Able to take med corect times w/ assist
				330			02 Unable to take med unless administered
M0790_CU	466	2	\$MANRXOA				C Manage inhalation/mist medica, current
				1,409			Missing
				1,831			NA No med of this type prescribed
				0			UK Unknown
				263			00 Able to independently take correct med
				138			01 Able to take med corect times w/ assist
				119			02 Unable to take med unless administered
M0790_PR	468	2	\$MANRXOA				C Manage inhalation/mist medica, prior
				2,391			Missing
				1,030			NA No med of this type prescribed
				35			UK Unknown
				160			00 Able to independently take correct med
				81			01 Able to take med corect times w/ assist
				63			02 Unable to take med unless administered
M0800_CU	470	2	\$MANRXOA				C Manage injectable medica, current
				1,409			Missing
				1,968			NA No med of this type prescribed
				0			UK Unknown
				145			00 Able to independently take correct med
				62			01 Able to take med corect times w/ assist
				176			02 Unable to take med unless administered
M0800_PR	472	2	\$MANRXOA				C Manage injectable medica, prior
				2,391			Missing
				1,104			NA No med of this type prescribed
				41			UK Unknown
				87			00 Able to independently take correct med
				32			01 Able to take med corect times w/ assist
				105			02 Unable to take med unless administered
M0810_PA	474	2	\$PQUIPOA				C Patient management of equipment
				1,409			Missing
				1,978			NA No equipment used in this type of care
				91			00 Able to independently manage all equip
				72			01 Able to manage equip if someone sets up
				41			02 Req considerable assist managing equip
				39			03 Only able to monitor equipment
				130			04 Depends entirely upon another person

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 27
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0820_CG	476	2	\$CQUIPOA				C Caregiver management of equipment
				3,387			Missing
				60			NA No caregiver
				4			UK Unknown
				176			00 Able to independently manage all equip
				73			01 Able to manage equip if someone sets up
				12			02 Req considerable assist managing equip
				22			03 Only able to monitor equipment
				26			04 Depends entirely upon another person
M0825_TH	478	2	\$YESNAOA				C Indication of therapy need
				1,467			Missing
				293			NA Inapplicable
				1,372			00 No
				628			01 Yes
M0830_E0	480	1	INDICOA				N Emerg; Hospital emergency room
				2,317			. Missing
				1,153			0 Not indicated
				290			1 Indicated
M0830_E1	481	1	INDICOA				N Emerg; Doctors office emerg visit
				2,317			. Missing
				1,416			0 Not indicated
				27			1 Indicated
M0830_E2	482	1	INDICOA				N Emerg; Outpatient depart/clinic emerg
				2,317			. Missing
				1,439			0 Not indicated
				4			1 Indicated
M0830_E3	483	1	INDICOA				N Emerg; Unknown emergent care
				2,317			. Missing
				1,408			0 Not indicated
				35			1 Indicated
M0830_EC	484	1	INDICOA				N Emerg; No emergent care services
				2,317			. Missing
				353			0 Not indicated
				1,090			1 Indicated
M0840_10	485	1	\$INDICOA				C Reas; GI bleeding, obstruction
				3,442			Missing
				310			0 Not indicated
				8			1 Indicated
M0840_11	486	1	\$INDICOA				C Reas; Other emergent care reason
				3,442			Missing
				210			0 Not indicated
				108			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 28
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0840_12	487	1	\$INDICOA	3,442 293 25			C Reas; Unknown emergent care reason Missing 0 Not indicated 1 Indicated
M0840_E4	488	1	\$INDICOA	3,442 295 23			C Reas; Nausia, dehydration, malnutrition Missing 0 Not indicated 1 Indicated
M0840_E5	489	1	\$INDICOA	3,442 296 22			C Reas; Injury from fall or home accident Missing 0 Not indicated 1 Indicated
M0840_E6	490	1	\$INDICOA	3,442 255 63			C Reas; Respiratory problems Missing 0 Not indicated 1 Indicated
M0840_E7	491	1	\$INDICOA	3,442 302 16			C Reas; Wound infection, new lesion/ulcer Missing 0 Not indicated 1 Indicated
M0840_E8	492	1	\$INDICOA	3,442 242 76			C Reas; Cardiac problems Missing 0 Not indicated 1 Indicated
M0840_E9	493	1	\$INDICOA	3,442 311 7			C Reas; Hypo/Hyperglycemia, diabetes Missing 0 Not indicated 1 Indicated
M0840_EC	494	1	\$INDICOA	3,442 314 4			C Reas; Improper medication administration Missing 0 Not indicated 1 Indicated
M0855_IN	495	2	\$INFACOA	2,317 982 434 6 17 4			C Inpatient facility admitted to Missing NA No inpatient facility admission 01 Hospital 02 Rehabilitation facility 03 Nursing home 04 Hospice

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 29
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0870_DS	497	2	\$DISPOOA				C Discharge disposition
				2,778			Missing
				6			UK Unknown, other
				950			01 Patient remained in the community
				17			02 Patient transferred to a noninsti hospic
				9			03 Unknown, location not served by agency
M0880_A0	499	1	\$INDICOA				C Svcs after disch; Family/Friends
				2,810			Missing
				236			0 Not indicated
				714			1 Indicated
M0880_A1	500	1	\$INDICOA				C Svcs after disch; Other comm resources
				2,810			Missing
				702			0 Not indicated
				248			1 Indicated
M0880_AF	501	1	\$INDICOA				C Svcs after disch; No services
				2,810			Missing
				835			0 Not indicated
				115			1 Indicated
M0890_HO	502	2	\$RHOSPOA				C Reason admitted to acute care hospital
				3,326			Missing
				13			UK Unknown
				368			01 Hospitalization; Emergent care
				19			02 Hospitalization; Urgent care
				34			03 Hospitalization; Elective care
M0895_10	504	1	\$INDICOA				C ReasHosp; Scheduled surgical procedure
				3,326			Missing
				410			0 Not indicated
				24			1 Indicated
M0895_11	505	1	\$INDICOA				C ReasHosp; Urinary tract infection
				3,326			Missing
				421			0 Not indicated
				13			1 Indicated
M0895_12	506	1	\$INDICOA				C ReasHosp; IV catheter-related infection
				3,326			Missing
				434			0 Not indicated
				0			1 Indicated
M0895_13	507	1	\$INDICOA				C ReasHosp; Pulmonary embolus
				3,326			Missing
				431			0 Not indicated
				3			1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 30
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0895_14	508	1	\$INDICOA	3,326 419 15			C ReasHosp; Uncontrolled pain Missing 0 Not indicated 1 Indicated
M0895_15	509	1	\$INDICOA	3,326 430 4			C ReasHosp; Psychotic episode Missing 0 Not indicated 1 Indicated
M0895_16	510	1	\$INDICOA	3,326 248 186			C ReasHosp; Other reason Missing 0 Not indicated 1 Indicated
M0895_H2	511	1	\$INDICOA	3,326 411 23			C ReasHosp; Injury from fall or home accid Missing 0 Not indicated 1 Indicated
M0895_H3	512	1	\$INDICOA	3,326 348 86			C ReasHosp; Respiratory problems Missing 0 Not indicated 1 Indicated
M0895_H4	513	1	\$INDICOA	3,326 406 28			C ReasHosp; Wound infection, new lesion/ul Missing 0 Not indicated 1 Indicated
M0895_H5	514	1	\$INDICOA	3,326 425 9			C ReasHosp; Hypo/Hyperglycemia, diabetes Missing 0 Not indicated 1 Indicated
M0895_H6	515	1	\$INDICOA	3,326 421 13			C ReasHosp; GI bleeding, obstruction Missing 0 Not indicated 1 Indicated
M0895_H7	516	1	\$INDICOA	3,326 374 60			C ReasHosp; Exac of CHF, heart failure Missing 0 Not indicated 1 Indicated
M0895_H8	517	1	\$INDICOA	3,326 429 5			C ReasHosp; Myocardial infarction, stroke Missing 0 Not indicated 1 Indicated

02/24/06
OAS
2003

MEDICARE CURRENT BENEFICIARY SURVEY
OASIS

RIC: OA
Page: 31
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
M0895_H9	518	1	\$INDICOA	3,326 432 2			C ReasHosp; Chemotherapy Missing 0 Not indicated 1 Indicated
M0895_HO	519	1	\$INDICOA	3,326 428 6			C ReasHosp; Improper medical administratio Missing 0 Not indicated 1 Indicated
M0900_17	520	1	\$INDICOA	3,743 15 2			C Reason admitted to nursing home Missing 0 Not indicated 1 Indicated
M0900_18	521	1	\$INDICOA	3,743 17 0			C ReasHome; Hospice care Missing 0 Not indicated 1 Indicated
M0900_19	522	1	\$INDICOA	3,743 9 8			C ReasHome; Permanent Placement Missing 0 Not indicated 1 Indicated
M0900_20	523	1	\$INDICOA	3,743 15 2			C ReasHome; Unsafe for care at home Missing 0 Not indicated 1 Indicated
M0900_21	524	1	\$INDICOA	3,743 13 4			C ReasHome; Other reason Missing 0 Not indicated 1 Indicated
M0900_22	525	1	\$INDICOA	3,743 16 1			C ReasHome; Unknown reason Missing 0 Not indicated 1 Indicated
M0900_NH	526	1	\$INDICOA	3,743 15 2			C ReasHome; Therapy Services Missing 0 Not indicated 1 Indicated
M0903_LA	527	8					N Date of last home visit
M0906_DC	535	8					N Discharge/Transfer/Death date