

Variable Col Len Fmt Name Frequency Ques # Ty Label

RIC 1 1 C RIC CODE FOR SURVEY FACILITY ID RECORD

APPLICABLE ONLY TO FACILITY INTERVIEWS

FILEYR 2 2 C YY REFERENCE YEAR OF RECORD

BASEID 4 8 C UNIQUE IDENTIFICATION NUMBER

D_FACID 12 6 C FACILITY ID

NHSTAT 18 2 NHSTFMT N NURSING HOME STAT FL

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 15 0 NOT MET--NH
 1,156 1 MEETS-NO PAR PROBS
 111 2 MEETS-MR
 35 3 MEETS-MENTALLY ILL
 0 4 MEETS-DEAF OR BLIND
 6 5 MEETS-PHYS HANDI
 1 6 MEETS-UNWED MOMS,ETC.
 7 7 MEETS-SOME OTH GROUP
 0 8 MEETS-NO PART GROUP
 7 9 UNABLE TO DETERMINE

FACOWNED 20 2 OWNFMT FQ1 N DESCRIPTION OF OWNERSHIP OF FACILITY

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 844 1 FOR PROFIT
 341 2 PRIV NON PROFIT
 72 3 CITY/COUNTY GOVT
 72 4 STATE GOVT
 9 5 VETERANS ADMIN
 0 91 OT FED AG (SPEC)

FACDISC 22 2 FACFMT FQ2 N FACILITY DESCRIPTION

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 11 1 HOSPITAL
 959 2 NURSING HOME
 32 3 RETIREMENT HOME
 45 4 DOMI/PER CARE FAC
 34 5 MENTAL HLTH FACILITY
 77 6 INST FOR MR/DEV DISA
 5 7 MENTAL HLTH CNTR
 29 8 LIFE CARE/CONT CARE
 85 9 ASSISTED LIVING FAC
 12 10 REHAB FACILITY
 49 91 OTHER PLACE (SPEC)

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FACDIOS 24 2 FACDFMT FQ2OT N FACILITY DESCRIPTION--OTHER SPECIFIED

1,289	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DONT KNOW
0	-7	REFUSED
3	1	ADULT HOSTEL
6	2	ADULT FOSTER CARE
1	3	HOSPICE
8	4	RESIDENTIAL CARE
0	5	EXTENDED CARE FACILITY
1	6	INDEPENDENT LIVING
1	7	GROUP HOME--MENTAL ILL
0	8	SHELTER CARE
0	9	FAMILY CARE/FOSTER
0	10	NH/PERSONAL CARE FAC
17	11	NH/REHAB FACILITY
0	12	ASSISTED LIVING
0	13	RETIRE HOME/ASSIST LIV
0	14	PSYCHIATRIC HOSPITAL
1	15	ACLF
1	16	DOMICILIARY/ASSIST LIV
0	17	CBRF
0	18	GRP HOME FOR EMOT DIST
0	19	RESIDENTIAL CARE
0	20	GROUP HOME
0	21	PEDIATRIC LTC FACILITY
1	22	NH/ASSISTED LIVING
0	23	MENTAL HLTH/MR/DEV DIS
5	24	NURSING HM/ASSISTED
0	25	NH/RETIREMENT HME/DD
1	26	NH/RETIREMENT HOME
0	27	DOMICILIARY/ASSISTED
0	28	NH/PERSONAL CARE FAC
0	29	RESIDENTIAL HEALTH CARE
0	30	FAMILY CARE
0	31	NH/LIFE CARE FACILITY
0	32	NH/MEDICAL CENTER
1	33	ON LOK
0	34	CONVALESCENT HOME
0	35	REST HOME/PROTECT CARE
0	36	RESIDENTAIL SHELTER
0	37	INST FOR MR/DEV DIS/REST
0	38	REST HOME
0	39	NH/LIFE CARE/REHAB
0	40	NURSING HOME/PERS CARE
0	41	HOSPITAL/RETIRE HOME
0	42	NURSING/RETIRE/REHAB
0	43	NH/HOSPICE
0	44	NH/ASSIST LIV/REHAB
0	45	RESID FAC FOR DEAF
0	46	RETIRE HOME/PERS CARE
0	47	PERSONAL CARE/MENT HLTH
0	48	MENTAL HEALTH
0	49	INST FOR MR/DEV DIS
1	50	NURSING HOME / PERSONAL CARE
0	51	RETIREMENT HOME
0	53	NH/RETIRE/ASSIST LIV
0	55	MENTAL HEALTH/REHAB
0	56	HOSPITAL/NURSING HOME
0	58	RETIRE/BOARD CARE
1	59	HOME/COMM BASED SERV

INAPPLICABLE: FACDISC ^=91

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FACLONGT 26 2 MOSTFMT FQ3 N DOES FACILITY PROVIDE LONG TERM CARE?

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,326 1 YES
 12 2 NO

FACLTBED 28 3 BEDFMT FQ5 N NUMBER OF LONG TERM BEDS ONLY

12 . INAPPLICABLE
 1 -9 NOT ASCERTAINED
 5 -8 DONT KNOW
 1 -7 REFUSED
 1,306 0-990 NUMBER OF BEDS
 0 993 3 OR MORE BEDS
 13 996 # BEDS > 990

FACTOBED 31 3 BEDFAFMT FQ6 N TOTAL NUMBER OF BEDS IN FACILITY

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 5 -8 DONT KNOW
 1 -7 REFUSED
 1,318 0-995 NUMBER OF BEDS
 14 996 # BEDS > 995

PROVLEVL 34 2 MOSTFMT FQ7 N DOES FACILITY PROVIDE DIFF CARE LEVELS?

5 . INAPPLICABLE
 1 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 810 1 YES
 522 2 NO

LEVLSKIL 36 2 MOSTFMT FQ8A N DOES FACILITY PROVIDE SKILLED CARE?

528 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 691 1 YES
 119 2 NO

INAPPLICABLE: PROVLEVL=2,-7,-8,-9

LEVLINTR 38 2 MOSTFMT FQ8B N DOES FACILITY PROVIDE INTERMEDIATE CARE?

528 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 639 1 YES
 171 2 NO

INAPPLICABLE: PROVLEVL=2,-7,-8,-9

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LEVLOTH1 40 2 MOSTFMT FQ8C N DOES FACILITY PROV OTHER LVL OF CARE 1?

528 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 368 1 YES
 442 2 NO

INAPPLICABLE: PROVLEV=2,-7,-8,-9

LEVLOTS1 42 2 LEVLOTFT FQ8CO N OTHER LEVEL OF CARE 1 - SPECIFY

970 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DK
 0 -7 REFUSED
 10 1 LIGHT
 15 2 HEAVY
 28 3 CUSTODIAL
 17 4 ALZHEIMERS
 17 5 MINIMUM
 0 6 MODERATE
 1 7 MAXIMUM
 2 8 SPECIALIZED CARE
 13 9 INTENSIVE
 2 10 HEAVY INTENSIVE CARE
 1 11 EXTENSIVE CARE
 1 12 RETARDED
 0 13 RETARDED/EXTRA CARE
 17 14 PERSONAL CARE/TOTAL
 0 15 BEHAVIORAL
 1 16 DEVELOPMENTALLY DISABLED
 1 17 MENTALLY ILL & HOMELESS
 0 18 COMPLEX CARE ISNF
 0 19 CLOSELY MONITORED
 1 20 ADL ASSISTANCE
 0 21 PROFOUND MENTAL RETARDATION
 0 22 MILD MENTAL RETARDATION
 0 23 SEVERE MENTAL RETARDATION
 2 24 SPECIALIZED DEMENTIA
 0 34 RESPITE
 0 38 PSYCHIATRIC REHAB
 0 46 LONG TERM PSYCHIATRIC
 0 47 DEPENDENT
 0 56 OUTPATIENT
 0 57 INDEPENDENT LIVING
 0 61 RETIREMENT
 199 95 NOT SPECIFIC
 40 96 STATE SPECIFIC

INAPPLICABLE: LEVLOTH1=-1,2,-7,-8,-9

LEVLOTH2 44 2 MOSTFMT FQ8D N DOES FACILITY PROV OTHER LVL OF CARE 2?

528 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 73 1 YES
 737 2 NO

INAPPLICABLE: PROVLEV=-1,2,-7,-8,-9

Variable Col Len Fmt Name Frequency Ques # Ty Label

LEVLOTS2 46 2 LEVLOTFT FQ8DO N OTHER LEVEL OF CARE 2 - SPECIFY

1,265	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DK
0	-7	REFUSED
1	1	LIGHT
1	2	HEAVY
3	3	CUSTODIAL
12	4	ALZHEIMERS
1	5	MINIMUM
22	6	MODERATE
0	7	MAXIMUM
1	8	SPECIALIZED CARE
1	9	INTENSIVE
1	10	HEAVY INTENSIVE CARE
0	11	EXTENSIVE CARE
0	12	RETARDED
0	13	RETARDED/EXTRA CARE
6	14	PERSONAL CARE/TOTAL
0	15	BEHAVIORAL
3	16	DEVELOPMENTALLY DISABLED
1	17	MENTALLY ILL & HOMELESS
0	18	COMPLEX CARE ISNF
0	19	CLOSELY MONITORED
2	20	ADL ASSISTANCE
0	21	PROFOUND MENTAL RETARDATION
0	22	MILD MENTAL RETARDATION
0	23	SEVERE MENTAL RETARDATION
2	24	SPECIALIZED DEMENTIA
0	34	RESPIRE
0	38	PSYCHIATRIC REHAB
0	46	LONG TERM PSYCHIATRIC
0	47	DEPENDENT
0	56	OUTPATIENT
0	57	INDEPENDENT LIVING
0	61	RETIREMENT
14	95	NOT SPECIFIC
2	96	STATE SPECIFIC

INAPPLICABLE: LEVLOTH2=-1, 2,-7,-8,-9

LEVLOTH3 48 2 MOSTFMT FQ8E N DOES FACILITY PROV OTHER LVL OF CARE 3?

528	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DONT KNOW
0	-7	REFUSED
28	1	YES
782	2	NO

INAPPLICABLE: PROVLEVEL=2,-7,-8,-9

Variable Col Len Fmt Name Frequency Ques # Ty Label

LEVLOTS3 50 2 LEVLOTFT FQ8EO N OTHER LEVEL OF CARE 3 - SPECIFY

1,310 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DK
 0 -7 REFUSED
 1 1 LIGHT
 5 2 HEAVY
 0 3 CUSTODIAL
 2 4 ALZHEIMERS
 0 5 MINIMUM
 1 6 MODERATE
 17 7 MAXIMUM
 0 8 SPECIALIZED CARE
 0 9 INTENSIVE
 0 10 HEAVY INTENSIVE CARE
 0 11 EXTENSIVE CARE
 0 12 RETARDED
 0 13 RETARDED/EXTRA CARE
 0 14 PERSONAL CARE/TOTAL
 0 15 BEHAVIORAL
 0 16 DEVELOPMENTALLY DISABLED
 0 17 MENTALLY ILL & HOMELESS
 0 18 COMPLEX CARE ISNF
 0 19 CLOSELY MONITORED
 1 20 ADL ASSISTANCE
 0 21 PROFOUND MENTAL RETARDATION
 0 22 MILD MENTAL RETARDATION
 0 23 SEVERE MENTAL RETARDATION
 0 24 SPECIALIZED DEMENTIA
 0 34 RESPITE
 0 38 PSYCHIATRIC REHAB
 0 46 LONG TERM PSYCHIATRIC
 0 47 DEPENDENT
 0 56 OUTPATIENT
 0 57 INDEPENDENT LIVING
 0 61 RETIREMENT
 1 95 NOT SPECIFIC
 0 96 STATE SPECIFIC

INAPPLICABLE: LEVLOTH3=-1, 2,-7,-8,-9

SNFBEDN 52 3 SNFBEFMT FQ10 N NUMBER OF SNF BEDS--MEDICARE

503 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 2 -8 DONT KNOW
 0 -7 REFUSED
 0 0 NO BEDS OF TYPE
 833 1-997 NUMBER OF BEDS

MCDSNFN 55 3 SNFBEFMT FQ12 N NUMBER OF SNF BEDS--MEDICAID

415 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 4 -8 DONT KNOW
 0 -7 REFUSED
 0 0 NO BEDS OF TYPE
 919 1-997 NUMBER OF BEDS

INAPPLICABLE: MCADCERT=2,-7,-8,-9

Variable Col Len Fmt Name Frequency Ques # Ty Label

MCDICFN 58 3 SNBFEFMT FQ14 N NUMBER OF ICF BEDS ONLY

1,209 . INAPPLICABLE
 2 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 4 0 NO BEDS OF TYPE
 123 1-997 NUMBER OF BEDS

INAPPLICABLE: MCADICF=2,-7,-8,-9

MCDICFMR 61 3 SNBFEFMT FQ15 N NUMBER OF ICF-MR BEDS ONLY

1,129 . INAPPLICABLE
 2 -9 NOT ASCERTAINED
 1 -8 DONT KNOW
 0 -7 REFUSED
 113 0 NO BEDS OF TYPE
 93 1-997 NUMBER OF BEDS

INAPPLICABLE: MCADICF=2,-7,-8,-9

CERTBEDS 64 3 SNBFEFMT FQ17 N NUMBER OF UNCERTIFIED BEDS

1,175 . INAPPLICABLE
 1 -9 NOT ASCERTAINED
 1 -8 DONT KNOW
 0 -7 REFUSED
 1 0 NO BEDS OF TYPE
 160 1-997 NUMBER OF BEDS

INAPPLICABLE: CERTMCMC=1,2,-7,-8,-9

PRIMDEAF 67 2 MOSTFMT FQ18A N FACIL PRIM SERVE--DEAF

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 24 1 YES
 1,309 2 NO

PRIMBLND 69 2 MOSTFMT FQ18B N FACIL PRIM SERVE--BLIND

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 30 1 YES
 1,303 2 NO

PRIMUWED 71 2 MOSTFMT FQ18C N FACIL PRIM SERVE--UNWED MOMS

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1 1 YES
 1,332 2 NO

Variable Col Len Fmt Name Frequency Ques # Ty Label

PRIMABUS 73 2 MOSTFMT FQ18D N FACIL PRIM SERVE-ALCOHOL/DRUG ABUSERS

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 21 1 YES
 1,312 2 NO

PRIMORPH 75 2 MOSTFMT FQ18E N FACIL PRIM SERVE-ORPHANS/DEPEND

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1 1 YES
 1,332 2 NO

PRIMMDEF 77 2 MOSTFMT FQ18G N FACIL PRIM SERVE-MENTALLY ILL & DEAF

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 4 1 YES
 1,329 2 NO

PRIMMENT 79 2 MOSTFMT FQ18F N FACIL PRIM SERVE-MENTALLY ILL ONLY

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 48 1 YES
 1,285 2 NO

PRIMMEDD 81 2 MOSTFMT FQ18H N FACIL PRIM SERVE-MENT RET/DEV DIS

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 109 1 YES
 1,224 2 NO

PRIMMIMR 83 2 MOSTFMT FQ18I N FACIL PRIM SERVE-MENT RET & MENT ILL

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 52 1 YES
 1,281 2 NO

PRIMGERI 85 2 MOSTFMT FQ18K N FACIL PRIM SERVE-GERIATRIC

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,059 1 YES
 274 2 NO

Variable Col Len Fmt Name Frequency Ques # Ty Label

PRIMNEUR 87 2 MOSTFMT FQ18J N FACIL PRIM SERVE-NEURO OR PHYS HANDI

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 58 1 YES
 1,275 2 NO

PRIMOTHR 89 2 MOSTFMT FQ18L N FACIL PRIM SERVE-SOME OTHER GRP

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 33 1 YES
 1,300 2 NO

PRIMOS 91 2 LVL1FMT FQ18L N FACIL PRIM SERVE-SOME OTHER GRP-OS

1,305 . INAPPLICABLE
 1 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 13 1 ALZHEIMERS
 2 2 TER ILL PAT
 5 3 VETERANS
 3 4 REHABILITATION
 0 5 CHRISTIAN SCIENCE
 2 6 HOSPICE
 0 7 CONVICTS
 0 8 ADOLESCENT MEN ILL
 0 9 MALES >18 AMBULATORY
 0 10 POST SURGICAL REHAB
 1 11 AIDS
 0 12 EMOTIONALLY DISTURB
 0 13 MENTAL ILL/PHYSICAL
 1 14 VENTILATOR DEPEND
 0 15 MENTAL ILL/HOMELESS
 0 16 ADULT FOSTER CARE
 0 17 SISTERS OF THE CONV
 1 18 PROTECTIVE CARE
 0 19 PHYS & MENTAL HCAP
 0 20 ALZHEIMER & REHAB
 4 21 SKILLED & REHAB

INAPPLICABLE: PRIMOTHR=2,-7,-8,-9

PRIMGRP 93 2 MOSTFMT FQ18M N FACIL PRIM SERVE-NO PRIMARY GRP

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 106 1 YES
 1,227 2 NO

Variable Col Len Fmt Name Frequency Ques # Ty Label

ROOMCARE 95 2 MOSTFMT FQ19A N DOES FACIL PROVIDE NURSE/MEDICAL CARE?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,228 1 YES
 100 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

SUPRVMED 97 2 MOSTFMT FQ19B N DOES FACIL SUPERVISE SELF-ADMIN MEDS?

5 . INAPPLICABLE
 2 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 972 1 YES
 359 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPBATH 99 2 MOSTFMT FQ19C N DOES FACIL PROVIDE HELP W/BATHING?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 1 -8 DONT KNOW
 0 -7 REFUSED
 1,303 1 YES
 24 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPDRES 101 2 MOSTFMT FQ19D N DOES FACIL PROVIDE HELP W/DRESSING?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,301 1 YES
 27 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPSHOP 103 2 MOSTFMT FQ19E N DOES FACIL PROVIDE HELP W/SHOPPING?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,302 1 YES
 26 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

Variable Col Len Fmt Name Frequency Ques # Ty Label

FHLPWALK 105 2 MOSTFMT FQ19F N DOES FACIL PROVIDE HELP W/WALKING?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,290 1 YES
 38 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPEAT 107 2 MOSTFMT FQ19G N DOES FACIL PROVIDE HELP W/EATING?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,267 1 YES
 61 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPCOMM 109 2 MOSTFMT FQ19H N DOES FACIL PROVIDE HELP W/COMMUNCATION?

5 . INAPPLICABLE
 5 -9 NOT ASCERTAINED
 1 -8 DONT KNOW
 0 -7 REFUSED
 1,291 1 YES
 36 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

FHLPNURS 111 2 MOSTFMT FQ20 N DOES FACIL PROVIDE 24HR NURSING CARE?

5 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 0 -8 DONT KNOW
 0 -7 REFUSED
 1,324 1 YES
 9 2 NO

INAPPLICABLE: FACILITY IS MEDICARE, MEDICAID OR MEDICAID ICF

SPIDCNT 113 2 SPFMT N NUMBER OF SPS IN FACILITY

0 . INAPPLICABLE
 0 -9 NOT ASCERTAINED
 936 1 ONE SAMPLE PERSON
 198 2 TWO SAMPLE PEOPLE
 90 3 THREE SAMPLE PEOPLE
 45 4 FOUR SAMPLE PEOPLE
 25 5 FIVE SAMPLE PEOPLE
 15 6 SIX SAMPLE PEOPLE
 21 7 SEVEN SAMPLE PEOPLE
 0 8 EIGHT SAMPLE PEOPLE
 0 9 NINE SAMPLE PEOPLE
 8 10 TEN SAMPLE PEOPLE

04/06/99 MEDICARE CURRENT BENEFICIARY SURVEY
COST&USE RECORD IDENTIFICATION CODE 7
1996 SURVEY FACILITY IDENTIFICATION RECORD

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Variable	Col	Len	Fmt	Name	Frequency	Ques #	Ty	Label
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NORATE	115	2		NORTFMT		FQ18R	N	REASON FOR NO RATES
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1,328	.	INAPPLICABLE
6	1	VA
1	2	STATE FUNDED
1	3	CAPITATED
2	4	CONVENT