

Variable Col Len Format Frequency ComQues# FacQues# Variable Type & Label  
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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.

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	20,889			C Unique SP Identification Number LOW-HIGH BASEID Count
H_DOB	12	8	\$DTE8FMT	20,889			C Date of birth Missing Date as YYYYMMDD
H_DOD	20	8	\$DTE8FMT	20,722			C Date of death Missing Date as YYYYMMDD
H_DODSRC	28	2	\$SRCFMT	20,722			C Source of date of death No date of death 01 From Medicare bill 03 Clerical entry 05 Bill and clerical entry 10 Proven Medicare Benefits record 11 Proven Medicare Benefits record & bills 20 Unproven Medicare Benefits record 21 Unproven Mcare Benefits record & bills 23 Unproven Mcare Benefits rec & clerical 25 Unproven Mcare Benefits rec, bill & cler
H_SEX	30	1	\$SEXFMT	11,940			C Sex code 1 Male 2 Female
H_RACE	31	1	\$RACEFMT	17,732			C Race code Missing 0 Unknown 1 White 2 Black 3 Other 4 Asian 5 Hispanic 6 North American Native
H_AGE	32	3	AGEFMT	20,889			N SP age based on CMS date of birth 0-999 Age in years

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
D_STRAT	35	1	\$AGEFMT				C MCBS Sample age stratum
				0			Unknown
				1,458			1 0-44
				1,616			2 45-64
				3,735			3 65-69
				3,911			4 70-74
				3,578			5 75-79
				3,501			6 80-84
				3,090			7 85 +
H_ENT01	36	1	\$ENTFMT				C Medicare entitlement code for Jan
				684			A Part A Medicare only
				178			B Part B Medicare only
				20,023			C Parts A and B Medicare
				4			N No Medicare entitlement
H_ENT02	37	1	\$ENTFMT				C Medicare entitlement code for Feb
				680			A Part A Medicare only
				177			B Part B Medicare only
				20,027			C Parts A and B Medicare
				5			N No Medicare entitlement
H_ENT03	38	1	\$ENTFMT				C Medicare entitlement code for Mar
				673			A Part A Medicare only
				177			B Part B Medicare only
				20,034			C Parts A and B Medicare
				5			N No Medicare entitlement
H_ENT04	39	1	\$ENTFMT				C Medicare entitlement code for Apr
				671			A Part A Medicare only
				177			B Part B Medicare only
				20,036			C Parts A and B Medicare
				5			N No Medicare entitlement
H_ENT05	40	1	\$ENTFMT				C Medicare entitlement code for May
				668			A Part A Medicare only
				176			B Part B Medicare only
				20,040			C Parts A and B Medicare
				5			N No Medicare entitlement
H_ENT06	41	1	\$ENTFMT				C Medicare entitlement code for Jun
				669			A Part A Medicare only
				175			B Part B Medicare only
				20,040			C Parts A and B Medicare
				5			N No Medicare entitlement
H_ENT07	42	1	\$ENTFMT				C Medicare entitlement code for Jul
				639			A Part A Medicare only
				175			B Part B Medicare only
				20,070			C Parts A and B Medicare
				5			N No Medicare entitlement

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H_ENT08	43	1	\$ENTFMT	637 174 20,072 6			C Medicare entitlement code for Aug  A Part A Medicare only B Part B Medicare only C Parts A and B Medicare N No Medicare entitlement
H_ENT09	44	1	\$ENTFMT	637 174 20,069 9			C Medicare entitlement code for Sepr  A Part A Medicare only B Part B Medicare only C Parts A and B Medicare N No Medicare entitlement
H_ENT10	45	1	\$ENTFMT	632 172 20,064 21			C Medicare entitlement code for Oct  A Part A Medicare only B Part B Medicare only C Parts A and B Medicare N No Medicare entitlement
H_ENT11	46	1	\$ENTFMT	633 172 20,034 50			C Medicare entitlement code for Nov  A Part A Medicare only B Part B Medicare only C Parts A and B Medicare N No Medicare entitlement
H_ENT12	47	1	\$ENTFMT	631 170 19,983 105			C Medicare entitlement code for Dec  A Part A Medicare only B Part B Medicare only C Parts A and B Medicare N No Medicare entitlement
H_DOE	48	8	\$DTE8FMT	3 20,886			C Medicare entitlement start date  Missing Date as YYYYMMDD
H_DOT	56	8	\$DTE8FMT	20,867 22			C Medicare entitlement end date  Missing Date as YYYYMMDD
H_MEDSTA	64	2	\$MSCFMT	0 17,750 55 2,984 57 43			C Medicare status code as of 12/31  Unknown 10 Aged, no ESRD 11 Aged, ESRD 20 Disabled, no ESRD 21 Disabled, ESRD 31 ESRD only

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_LAF	66	2	\$LAFMT				C Status of SSA check (LAF) as of 12/31
				0			Unknown
				0			AD Cur pay-adj for dual entitlement
				0			AF Transfer to another PC or dio
				0			A9 Cur pay-miscellaneous adjustment
				20,024			C Current payment status
				0			DW Deferred-Workers' Compensation
				51			D2 DEF-retirement test
				3			D3 DEF-D2 for primary
				6			D6 DEF-recover overpayment
				2			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
				2			SD SUSP-other
				0			SF SUSP-fails to meet residence requirment
				56			SH SUSP-government pension
				2			SP SUSP-public assistance
				1			SW SUSP-Workers' Compensation
				1			S0 SUSP-continuing disability investig
				44			S2 SUSP-fails retirement test
				2			S3 SUSP-primary account S2
				6			S6 SUSP-check returned for address
				52			S7 SUSP-vocational rehab refusal
				2			S8 SUSP-payee not determined
				3			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
				138			T1 TERM-death of beneficiary
				0			T2 TERM-death of primary
				2			T3 TERM-divorce, marriage, remarriage
				0			T5 TERM-entitled on another account
				0			T6 TERM-child no longer student, disabled
				2			T8 TERM-recovery from disability
				0			T9 TERM-miscellaneous
				482			U Active uninsured status (no SSA check)
				0			XF Transfer to another PC or DIO
				0			XR Terminated -
				0			X1 TERM-death of insured
				0			X5 TERM-entitled to another benefit
				8			X7 TERM of uninsured
				0			X9 TERM miscellaneous
				0			ZZ Erroneous entitlement
H_METRO	68	1	\$METFMT				C Metro status
				4,733			N Non-metro area
				0			U Unknown
				16,156			Y Metro area

08/18/03  
**ACCESS**  
**1998**

**MEDICARE CURRENT BENEFICIARY SURVEY**  
 Administrative Identification

RIC: **A**  
 Page: 5  
 Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_GHPSW	69	1	\$GHPSW				C Some group health participation in year
				15,109			0 No enrollment
				5,780			1 Some enrollment
H_PLTP01	70	2	\$PLNFMT				C GHP plan type for Jan
				15,523			No enrollment for month
				169			01 Health care prepayment plan
				114			02 Cost HMO
				5,083			06 Risk HMO
H_PLPY01	72	4					N Medicare capitation payment for Jan
H_PLTP02	76	2	\$PLNFMT				C GHP plan type for Feb
				15,485			No enrollment for month
				169			01 Health care prepayment plan
				112			02 Cost HMO
				5,123			06 Risk HMO
H_PLPY02	78	4					N Medicare capitation payment for Feb
H_PLTP03	82	2	\$PLNFMT				C GHP plan type for Mar
				15,455			No enrollment for month
				168			01 Health care prepayment plan
				113			02 Cost HMO
				5,153			06 Risk HMO
H_PLPY03	84	4					N Medicare capitation payment for Mar
H_PLTP04	88	2	\$PLNFMT				C GHP plan type for Apr
				15,418			No enrollment for month
				167			01 Health care prepayment plan
				112			02 Cost HMO
				5,192			06 Risk HMO
H_PLPY04	90	4					N Medicare capitation payment for Apr
H_PLTP05	94	2	\$PLNFMT				C GHP plan type for May
				15,387			No enrollment for month
				162			01 Health care prepayment plan
				113			02 Cost HMO
				5,227			06 Risk HMO
H_PLPY05	96	4					N Medicare capitation payment for May
H_PLTP06	100	2	\$PLNFMT				C GHP plan type for Jun
				15,364			No enrollment for month
				149			01 Health care prepayment plan
				126			02 Cost HMO
				5,250			06 Risk HMO
H_PLPY06	102	4					N Medicare capitation payment for Jun

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_PLTP07	106	2	\$PLNFMT				C GHP plan type for Jul
				15,338			No enrollment for month
				148			01 Health care prepayment plan
				124			02 Cost HMO
				5,279			06 Risk HMO
H_PLPY07	108	4					N Medicare capitation payment for Jul
H_PLTP08	112	2	\$PLNFMT				C GHP plan type for Aug
				15,318			No enrollment for month
				146			01 Health care prepayment plan
				124			02 Cost HMO
				5,301			06 Risk HMO
H_PLPY08	114	4					N Medicare capitation payment for Aug
H_PLTP09	118	2	\$PLNFMT				C GHP plan type for Sep
				15,314			No enrollment for month
				145			01 Health care prepayment plan
				122			02 Cost HMO
				5,308			06 Risk HMO
H_PLPY09	120	4					N Medicare capitation payment for Sep
H_PLTP10	124	2	\$PLNFMT				C GHP plan type for Oct
				15,307			No enrollment for month
				145			01 Health care prepayment plan
				121			02 Cost HMO
				5,316			06 Risk HMO
H_PLPY10	126	4					N Medicare capitation payment for Oct
H_PLTP11	130	2	\$PLNFMT				C GHP plan type for Nov
				15,304			No enrollment for month
				140			01 Health care prepayment plan
				121			02 Cost HMO
				5,324			06 Risk HMO
H_PLPY11	132	4					N Medicare capitation payment for Nov
H_PLTP12	136	2	\$PLNFMT				C GHP plan type for Dec
				15,302			No enrollment for month
				138			01 Health care prepayment plan
				122			02 Cost HMO
				5,327			06 Risk HMO
H_PLPY12	138	4					N Medicare capitation payment for Dec
H_MCSW	142	1	\$SWFMT				C Some Medicaid eligibility for the year
				17,596			N No participation
				3,293			Y Some participation

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MCDE01	143	1	\$MCDCFMT				C Medicaid eligibility for Jan
				0			A State Part A buy-in
				1,317			B State Part B buy-in
				63			C State Part A and B buy-in
				101			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,828			N No buy-in this month
				1,408			Q State Part B QMB buy-in
				169			S State Part B SLMB buy-in
H_MCDE02	144	1	\$MCDCFMT				C Medicaid eligibility for Feb
				0			A State Part A buy-in
				1,326			B State Part B buy-in
				63			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,813			N No buy-in this month
				1,408			Q State Part B QMB buy-in
				174			S State Part B SLMB buy-in
H_MCDE03	145	1	\$MCDCFMT				C Medicaid eligibility for Mar
				0			A State Part A buy-in
				1,335			B State Part B buy-in
				63			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,792			N No buy-in this month
				1,413			Q State Part B QMB buy-in
				181			S State Part B SLMB buy-in
H_MCDE04	146	1	\$MCDCFMT				C Medicaid eligibility for Apr
				0			A State Part A buy-in
				1,335			B State Part B buy-in
				63			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,784			N No buy-in this month
				1,411			Q State Part B QMB buy-in
				191			S State Part B SLMB buy-in
H_MCDE05	147	1	\$MCDCFMT				C Medicaid eligibility for May
				0			A State Part A buy-in
				1,344			B State Part B buy-in
				64			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,769			N No buy-in this month
				1,413			Q State Part B QMB buy-in
				194			S State Part B SLMB buy-in

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MCDE06	148	1	\$MCDCFMT				C Medicaid eligibility for Jun
				0			A State Part A buy-in
				1,352			B State Part B buy-in
				65			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,754			N No buy-in this month
				1,419			Q State Part B QMB buy-in
				194			S State Part B SLMB buy-in
H_MCDE07	149	1	\$MCDCFMT				C Medicaid eligibility for Jul
				0			A State Part A buy-in
				1,355			B State Part B buy-in
				65			C State Part A and B buy-in
				103			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,745			N No buy-in this month
				1,419			Q State Part B QMB buy-in
				199			S State Part B SLMB buy-in
H_MCDE08	150	1	\$MCDCFMT				C Medicaid eligibility for Aug
				0			A State Part A buy-in
				1,361			B State Part B buy-in
				67			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,730			N No buy-in this month
				1,425			Q State Part B QMB buy-in
				201			S State Part B SLMB buy-in
H_MCDE09	151	1	\$MCDCFMT				C Medicaid eligibility for Sep
				0			A State Part A buy-in
				1,368			B State Part B buy-in
				67			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,717			N No buy-in this month
				1,427			Q State Part B QMB buy-in
				205			S State Part B SLMB buy-in
H_MCDE10	152	1	\$MCDCFMT				C Medicaid eligibility for Oct
				0			A State Part A buy-in
				1,370			B State Part B buy-in
				68			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,702			N No buy-in this month
				1,435			Q State Part B QMB buy-in
				209			S State Part B SLMB buy-in

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MCDE11	153	1	\$MDCDFMT				C Medicaid eligibility for Nov
				0			A State Part A buy-in
				1,370			B State Part B buy-in
				68			C State Part A and B buy-in
				102			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,697			N No buy-in this month
				1,436			Q State Part B QMB buy-in
				213			S State Part B SLMB buy-in
H_MCDE12	154	1	\$MDCDFMT				C Medicaid eligibility for Dec
				0			A State Part A buy-in
				1,340			B State Part B buy-in
				66			C State Part A and B buy-in
				99			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				17,757			N No buy-in this month
				1,416			Q State Part B QMB buy-in
				208			S State Part B SLMB buy-in
H_HOSSW	155	1	\$UTLFMT				C One or more hospice bills in CY
				20,812			0 No utilization this type
				77			1 Some utilization this type
H_INPSW	156	1	\$UTLFMT				C One or more inpatient discharges in CY
				17,606			0 No utilization this type
				3,283			1 Some utilization this type
H_SNFSW	157	1	\$UTLFMT				C One or more SNF admissions in CY
				20,217			0 No utilization this type
				672			1 Some utilization this type
H_HHASW	158	1	\$UTLFMT				C 1 = one or more HHA visits in CY
				19,384			0 No utilization this type
				1,505			1 Some utilization this type
H_OUTSW	159	1	\$UTLFMT				C One or more outpatient visits in CY
				10,803			0 No utilization this type
				10,086			1 Some utilization this type
H_PBSW	160	1	\$UTLFMT				C One or more Part B claims in CY
				6,184			0 No utilization this type
				14,705			1 Some utilization this type
H_PTARMB	161	6					N Discharge date of latest inpatient stay
H_PTBRMB	167	6					N Total Part A reimbursement CY (\$)
H_LATDCH	173	8	\$DTE8FMT				C Discharge date of latest inpatient stay
				17,837			Missing
				3,052			Date as YYYYMMDD

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_LATDRG	181	3	\$DRGFMT				C DRG code for latest inpatient stay
				17,837			Unknown, or no discharge
				3,052		000-999	DRG
H_DISDES	184	2	\$DSTFMT				C Discharge dest for latest inpatient stay
				17,837			No discharge
				1,958			01 Discharged to home
				17			02 Transferred to hospital
				505			03 Transferred to SNF
				81			04 Transferred to ICF
				154			05 Transferred to Other
				282			06 Transferred to HHA
				11			07 LAMA
				6			08 Home IV drug
				0			09 Admit/readmit
				0		10-19	Transfer-ST codes
				37		20	Expired
				0		21-29	Expired-ST codes
				0		30	Still patient
				0		31-39	Still patient, ST
				0		40	Expired at home
				0		41	Died in facility
				0		42	Died, place unknown
				1		43-99	Not used
H_INPSTY	186	2					N No. of inpatient stays for CY
H_INPDAY	188	3					N No. of inpatient covered days for CY
H_INPCHG	191	6					N Inpatient charges for CY (\$)
H_INPCCH	197	6					N Inpatient covered charges for CY (\$)
H_INPRMB	203	6					N Inpatient reimbursement for CY (\$)
H_INPCDY	209	2					N Inpatient coinsurance days used in CY
H_INPCAM	211	5					N Total inpatient coinsurance amt CY (\$)
H_SNFSTY	216	2					N Total SNF stays in CY
H_SNFDAY	218	3					N Total SNF covered days in CY
H_SNFCHG	221	6					N Total SNF charges in CY (\$)
H_SNFCCH	227	6					N Total SNF covered charges in CY (\$)
H_SNFRMB	233	6					N Total SNF reimbursement in CY (\$)
H_SNFCDY	239	3					N Total SNF coinsurance days in CY
H_SNFCAM	242	6					N Total SNF coinsurance amount in CY (\$)
H_HHAVST	248	4					N Total HHA visits in CY
H_HHACCH	252	6					N Total HHA covered charges in CY (\$)
H_HHACHO	258	6					N Total HHA other covered charges CY (\$)

08/18/03  
ACCESS  
1998

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Administrative Identification

RIC: **A**  
Page: 11  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_HHARMB	264	6					N Total HHA reimbursement in CY (\$)
H_HSDAYS	270	3					N Total covered hospice days in CY
H_HSTCHG	273	6					N Total hospice charges CY (\$)
H_HSREIM	279	6					N Total hospice reimbursement in CY (\$)
H_OUTBIL	285	3					N Total outpatient bills in CY
H_OUTCHG	288	6					N Total outpatient covered charges CY (\$)
H_OUTRMB	294	6					N Total outpatient reimbursement CY (\$)
H_PMTCLM	300	4					N Total physician/supplier claims in CY
H_PMTLIN	304	4					N Total physician/supplier lin items in CY
H_PMTSCH	308	6					N Total submitted charges in CY (\$)
H_PMTACH	314	6					N Total allowed charges in CY (\$)
H_PMTRMB	320	6					N Total physician reimbursement CY (\$)
H_PMTVST	326	3					N Total office visits in CY
H_PMTCHO	329	6					N Total office visit charges in CY (\$)