

09/01/05  
COST & USE  
1999

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Service Summary

RIC: SS  
Page: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
RIC	1	2					C RIC CODE FOR TYPE OF SERV SUMMARY RECORD
FILEYR	3	2					C YY REFERENCE YEAR OF RECORD
BASEID	5	8					C UNIQUE IDENTIFICATION NUMBER
EVNTTYPE	13	2	\$EVNTTYP				C TYPE OF EVENT
				13,106			DU DENTAL
				13,106			FA FACILITY
				13,106			HH HOME HEALTH
				13,106			HP HOSPICE
				13,106			IP INPATIENT
				13,106			IU INSTITUTIONAL UTILIZATION
				13,106			MP MEDICAL PROVIDER
				13,106			OP OUTPATIENT
				13,106			PM PRESCRIBED MEDICINE
AAMTTOT	15	10	MONYFMT				N TOS LEVEL: ADJ SUM OF TOTAL EXPENDITURES
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTCARE	25	10	MONYFMT				N TOS LEVEL: ADJ SUM OF MEDICARE
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTCAID	35	10	MONYFMT				N TOS LEVEL: ADJ SUM OF MEDICAID
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTHMOM	45	10	MONYFMT				N TOS LEVEL: ADJ SUM OF MCARE HMO
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTHMOP	55	10	MONYFMT				N TOS LEVEL: ADJ SUM OF PRIV HMO
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTVA	65	10	MONYFMT				N TOS LEVEL: ADJ SUM OF VA
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTPRVE	75	10	MONYFMT				N TOS LEVEL: ADJ SUM OF PRIV INS EMPLOYER
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTPRVI	85	10	MONYFMT				N TOS LEVEL: ADJ SUM OF PRIV INS INDV
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTPRVU	95	10	MONYFMT				N TOS LEVEL: ADJ SUM OF PRIV INS UNKNOWN
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTOOP	105	10	MONYFMT				N TOS LEVEL: ADJ SUM OF OOP
				117,954			AMOUNT AS \$\$\$\$\$\$.CC
AAMTDISC	115	10	MONYFMT				N TOS LEVEL: ADJ SUM OF UNCOLLCTD LIABLTY
				117,954			AMOUNT AS \$\$\$\$\$\$.CC

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Page: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
AAMTOTH	125	10	MONYFMT				N TOS LEVEL: ADJ SUM OF OTHER AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
AEVENTS	135	4					N TOS LEVEL: ADJ COUNT OF EVENTS
SAMTTOT	139	10	MONYFMT				N TOS LEVEL: SUM OF TOTAL EXPENDITURES AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTCARE	149	10	MONYFMT				N TOS LEVEL: SUM OF MEDICARE AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTCAID	159	10	MONYFMT				N TOS LEVEL: SUM OF MEDICAID AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTHMOM	169	10	MONYFMT				N TOS LEVEL: SUM OF MCARE HMO AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTHMOP	179	10	MONYFMT				N TOS LEVEL: SUM OF PRIV HMO AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTVA	189	10	MONYFMT				N TOS LEVEL: SUM OF VA AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTPRVE	199	10	MONYFMT				N TOS LEVEL: SUM OF PRV INS EMPLOYER AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTPRVI	209	10	MONYFMT				N TOS LEVEL: SUM OF PRIV INS INDV AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTPRVU	219	10	MONYFMT				N TOS LEVEL: SUM OF PRV INS UNKNOWN AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTOOP	229	10	MONYFMT				N TOS LEVEL: SUM OF OOP AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTDISC	239	10	MONYFMT				N TOS LEVEL: SUM OF UNCOLLECTED LIABILITY AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SAMTOTH	249	10	MONYFMT				N TOS LEVEL: SUM OF OTHER AMOUNT AS \$\$\$\$\$\$.CC
				117,954			
SEVENTS	259	4					N TOS LEVEL: COUNT OF EVENTS