

03/13/07
Cost & Use
2004

MEDICARE CURRENT BENEFICIARY SURVEY
 Medical Provider Events

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
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The Medical Provider Events file contains data about a variety of medical services, equipment and supplies collected in the survey, including: medical provider (MP), separately billing (SD), separately billing lab (SL), and other medical expenses (OM).

RIC	1	2					C Record Identification Code
VERSION	3	1					C Version Number
BASEID	4	8	\$BSIDFMT				C Unique SP Identification Number
				342,209			LOW-HIGH BASEID Count
EVNTNUM	14	4	\$EVNTNUM				C Unique event identifier
				176,126			C000-C999 Event created from claim
				166,083			0000-9999 Survey-reported event
EVNTTYPE	18	2	\$EVNTTYP				C Event type
				0			DU Dental
				0			ER Emergency Room
				0			IP Inpatient
				0			IU Institutional utilization
				172,862			MP Medical provider
				42,390			OM Other medical expense
				0			OP Outpatient
				0			PM Prescribed medicine
				72,226			SD Separately billing physician
				54,731			SL Separately billing lab
OREVTYPE	20	2	\$EVNTTYP				C Original reported event type
				176,126			Missing
				0			DU Dental
				1,097			ER Emergency Room
				408			IP Inpatient
				0			IU Institutional utilization
				114,730			MP Medical provider
				20,875			OM Other medical expense
				3,224			OP Outpatient
				0			PM Prescribed medicine
				21,164			SD Separately billing physician
				4,585			SL Separately billing lab
CLAIMID	22	7					N Claim this survey event matched to
CLAIMTYP	29	1	\$CLAIMTYP				C Claim type that event matched to
				62,166			
				22,148			D DME claim
				257,895			P Physician claim
EVBEYY	30	2	\$EVENTYY				C Event begin year
				124			-8 Don't know
				5			-9 Not ascertained
				342,080			Year

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EVBEGMM	32	2	\$EVENTMM				C Event begin month
				1			-7 Refused
				716			-8 Don't know
				29			-9 Not ascertained
				0			95 Still in progress
				341,463			Month
EVBEGDD	34	2	\$EVENTDD				C Event begin day
				17			-7 Refused
				16,727			-8 Don't know
				29			-9 Not ascertained
				325,436			Day of month
SOURCE	36	1	\$SOURCE				C Source of event: survey, claim, or both?
				62,166			1 Survey only
				176,126			2 Claims only
				103,917			3 Both survey & claims
SITCODE	37	1	\$SITCODE				C Community or facility setting?
				364			B Both community & facility
				294,006			C Community
				9,374			D Deemed community
				30,642			F Facility
				1,690			G Deemed facility
				6,133			S SNF
AMTTOT	38	9					N Total payment
IMPATOT	47	1	IMPFLAG				N AMTTOT imputed in part or in total?
				240,796			0 Not imputed
				101,413			1 Imputed
AMTCOV	48	9					N Medicare program liability, incl. copays
AMTNCOV	57	9					N Total payment not covered by Medicare
AMTCARE	66	9					N Amount paid by Medicare
IMPSCARE	75	1	IMPFLAG				N AMTCARE payment source imputed?
				341,846			0 Not imputed
				363			1 Imputed
IMPACARE	76	1	IMPFLAG				N AMTCARE payment amount imputed?
				329,916			0 Not imputed
				12,293			1 Imputed
AMTCAID	77	9					N Amount paid by Medicaid
IMPSCAID	86	1	IMPFLAG				N AMTCAID payment source imputed?
				309,631			0 Not imputed
				32,578			1 Imputed

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IMPACAID	87	1	IMPFLAG				N AMTCAID payment amount imputed?
				279,515			0 Not imputed
				62,694			1 Imputed
AMTHMOM	88	9					N Amount paid by Medicare HMO
IMPSHMOM	97	1	IMPFLAG				N AMTHMOM payment source imputed?
				335,968			0 Not imputed
				6,241			1 Imputed
IMPAHMOM	98	1	IMPFLAG				N AMTHMOM payment amount imputed?
				332,546			0 Not imputed
				9,663			1 Imputed
AMTHMOP	99	9					N Amount paid by private HMO
IMPSHMOP	108	1	IMPFLAG				N AMTHMOP payment source imputed?
				335,224			0 Not imputed
				6,985			1 Imputed
IMPAHMOP	109	1	IMPFLAG				N AMTHMOP payment amount imputed?
				333,711			0 Not imputed
				8,498			1 Imputed
AMTVA	110	9					N Amount paid by Veterans Administration
IMPSVA	119	1	IMPFLAG				N AMTVA payment source imputed?
				342,095			0 Not imputed
				114			1 Imputed
IMPAVA	120	1	IMPFLAG				N AMTVA payment amount imputed?
				340,796			0 Not imputed
				1,413			1 Imputed
AMTPRVE	121	9					N Amt paid by employer-sponsored priv ins
IMPSPRVE	130	1	IMPFLAG				N AMTPRVE payment source imputed?
				304,168			0 Not imputed
				38,041			1 Imputed
IMPAPRVE	131	1	IMPFLAG				N AMTPRVE payment amount imputed?
				295,826			0 Not imputed
				46,383			1 Imputed
AMTPRVI	132	9					N Amt paid by individually-purch priv ins
IMPSPRVI	141	1	IMPFLAG				N AMTPRVI payment source imputed?
				309,493			0 Not imputed
				32,716			1 Imputed

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IMPAPRVI	142	1	IMPFLAG				N AMTPRVI payment amount imputed?
				303,182			0 Not imputed
				39,027			1 Imputed
AMTPRVU	143	9					N Amt paid by priv ins (unknown purchased)
IMPSPRVU	152	1	IMPFLAG				N AMTPRVU payment source imputed?
				337,284			0 Not imputed
				4,925			1 Imputed
IMPAPRVU	153	1	IMPFLAG				N AMTPRVU payment amount imputed?
				337,284			0 Not imputed
				4,925			1 Imputed
AMTOOP	154	9					N Amount paid out-of-pocket (OOP)
IMPSOOP	163	1	IMPFLAG				N AMTOOP payment source imputed?
				291,686			0 Not imputed
				50,523			1 Imputed
IMPAOOP	164	1	IMPFLAG				N AMTOOP payment amount imputed?
				269,968			0 Not imputed
				72,241			1 Imputed
AMTDISC	165	9					N Amount of uncollected SP liability
IMPSDISC	174	1	IMPFLAG				N AMTDISC payment source imputed?
				333,796			0 Not imputed
				8,413			1 Imputed
IMPADISC	175	1	IMPFLAG				N AMTDISC payment amount imputed?
				331,743			0 Not imputed
				10,466			1 Imputed
AMTOTH	176	9					N Amount paid by other payor(s)
IMPSOTH	185	1	IMPFLAG				N AMTOTH payment source imputed?
				341,095			0 Not imputed
				1,114			1 Imputed
IMPAOTH	186	1	IMPFLAG				N AMTOTH payment amount imputed?
				339,566			0 Not imputed
				2,643			1 Imputed
PAMTMED	187	9					N Total amount paid for medical services
PAMTSURG	196	9					N Total amount paid for surgical services
PAMTLABX	205	9					N Total amount paid for lab/X-Ray
PANTOM	214	9					N Total payment for other medical services

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
PAMTPM	223	9					N Total payment for prescribed medicines
PROVSPEC	232	2	PROVSPEC				N Medical provider specialty
				176,221			. Missing
				17			-9 Not ascertained
				543			-8 Don't know
				1			-7 Refused
				41,999			-1 Inapplicable
				247			1 Dentist or dental provider
				93,092			2 Medical doctor
				378			3 Audiologist
				5,555			4 Chiropractor
				180			5 Clinical Social Worker
				28			6 Dietician or nutritionist
				13			7 Hearing therapist
				122			8 Home health/health aide
				0			9 Homemaker
				144			10 Hospice worker
				86			11 I.V. Therapist
				1,515			12 Nurse (RN)
				301			13 Nurse Practitioner
				38			14 Nurse's aide
				238			15 Occupational Therapist (OT)
				2,655			16 Optometrist
				226			17 Osteopath (DO)
				92			18 Paramedic
				6,993			19 Physical Therapist (PT)
				219			20 Physician's Assistant
				2,754			21 Podiatrist (foot doctor)
				1,239			22 Psychologist
				227			23 Respiratory Therapist
				792			24 Social/case worker
				117			25 Speech Therapist
				509			26 Therapist (mental health)
				1,215			27 X-Ray Technician
				31			28 Licensed Practical Nurse (LPN)
				445			29 Acupuncturist
				28			30 Homeopath
				565			31 Massage therapist
				77			32 Naturopath
				152			33 Licensed Professional Counselor (LPC)
				3,155			91 Other medical provider
OMETYPE	234	2	OMETYPE				N Type of other medical event
				159,363			. Missing
				145,208			-1 Inapplicable
				2,752			1 Eyeglasses
				749			2 Hearing or speech device
				2,405			3 Orthopedic
				6,611			4 Diabetic
				4,835			5 Ambulance
				206			6 Prosthesis
				391			7 Alteration
				7,192			8 Oxygen
				91			9 Kidney dialysis
				12,406			10 Other

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
ORTHTYPE	236	2	ORTHTYPE				N Type of orthopedic item
				175,529			. Missing
				164,275			-1 Inapplicable
				589			1 Braces or supports
				233			2 Cane
				356			3 Corrective shoes or inserts
				25			4 Crutches
				561			5 Walker
				416			6 Wheelchair
				173			7 Stockings
				52			91 Other
ALTRTYPE	238	2	ALTRTYPE				N Type of alteration
				176,092			. Missing
				165,726			-1 Inapplicable
				13			1 Elevator or incline chair
				74			2 Handrails (other than tub)
				64			3 Ramps
				65			4 Tub handrails
				14			5 Tub seat
				6			6 Any car alteration
				155			91 Other
OTHRTYPE	240	2	OTHRTYPE				N Type of other medical event
				171,264			. Missing
				158,539			-1 Inapplicable
				374			1 Portable or raised toilet
				99			2 Portable tub seat
				114			3 Special chair or cushion
				1,245			4 Hospital bed
				953			5 Ostomy supplies
				4,885			6 Depends (diapers)
				753			7 Bandages, dressings, tape supplies
				304			8 Pulmonary equipment
				164			9 Blood pressure equipment
				3,515			91 Other
HMO	242	1	\$HMO				C Event provided by an HMO?
				306,394			0 Event not provided by HMO
				35,815			1 Event provided by HMO