

06/05/08
Cost & Use
2005

MEDICARE CURRENT BENEFICIARY SURVEY
 Facility Identification

RIC: 7
Page: 1
Version: 1

| Variable | Col | Len | Format | Frequency | ComQues# | FacQues# | Variable Type & Label |
|----------|-----|-----|--------|-----------|----------|----------|-----------------------|
|----------|-----|-----|--------|-----------|----------|----------|-----------------------|

This file provides general characteristics of the institutions, most of the information coming from the facility screener. Sometimes, more than one sample person resided in the same facility. In these cases the RIC 7 records are redundant (containing all of the same information), and differ only in the BASEID. There is one record for each sample person interviewed in a facility.

| | | | | | | | |
|---------|----|---|-----------|-------|--|--|-----------------------------------|
| RIC | 1 | 2 | | | | | C Record Identification Code |
| VERSION | 3 | 1 | | | | | C Version Number |
| BASEID | 4 | 8 | \$BSIDFMT | | | | C Unique SP Identification Number |
| | | | | 1,159 | | | LOW-HIGH BASEID Count |
| FACILID | 12 | 6 | \$FIDFMT | | | | C Provider Identificatoin Number |
| | | | | 1,159 | | | LOW-HIGH PROV Count |

Note: Randomly-assigned number

| | | | | | | | |
|----------|----|---|---------|-------|--|----------|---|
| FACOWNED | 18 | 2 | OWNDES | | | FA31 | N Description of ownership of facility |
| | | | | 9 | | | -8 Don't know |
| | | | | 761 | | | 1 For profit (indiv,partnership,corp) |
| | | | | 312 | | | 2 Private non-profit (religious,NP corp) |
| | | | | 37 | | | 3 City/county government |
| | | | | 32 | | | 4 State government |
| | | | | 7 | | | 5 Veterans Administration |
| | | | | 0 | | | 6 Other federal agency |
| | | | | 1 | | | 91 Other specify |
| PLACTYPE | 20 | 2 | PLACFMT | | | FA1, FA5 | N Facility description |
| | | | | 68 | | | 3 Continuing Care Retirement Community |
| | | | | 709 | | | 4 Nursing home |
| | | | | 17 | | | 5 Retirement community |
| | | | | 23 | | | 6 Hospital |
| | | | | 150 | | | 8 Assisted living |
| | | | | 30 | | | 9 Board & care home |
| | | | | 6 | | | 10 Domiciliary care facility |
| | | | | 14 | | | 11 Personal care facility |
| | | | | 12 | | | 12 Rest home/retirement home |
| | | | | 3 | | | 15 Mental health center psychiatric setting |
| | | | | 30 | | | 16 Mentally ret/developmentally disabled |
| | | | | 11 | | | 17 Rehabilitation facility |
| | | | | 45 | | | 18 Adult/group home |
| | | | | 41 | | | 91 Other |
| FACLONGT | 22 | 2 | YES2FMT | | | FA8 | N Does facility provide long term care? |
| | | | | 1,159 | | | 1 Yes |
| | | | | 0 | | | 2 No |
| FACLTBED | 24 | 4 | BEDSFMT | | | | N Number of long term beds only |
| | | | | 2 | | | -8 Don't know |
| | | | | 0 | | | 0 No beds of this type |
| | | | | 1,157 | | | Number of beds |

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|--|-----|-----|---------|-----------|----------|----------|---|
| FACTOBED | 28 | 4 | BEDSFMT | | | FA19 | N Total number of beds in facility |
| | | | | 2 | | | -8 Don't know |
| | | | | 0 | | | 0 No beds of this type |
| | | | | 1,157 | | | Number of beds |
| MANDMBED | 32 | 4 | BEDSFMT | | | FA43 | N # of beds certified for Mcare & Mcaid |
| | | | | 83 | | | . Inapplicable |
| | | | | 11 | | | -8 Don't know |
| | | | | 429 | | | 0 No beds of this type |
| | | | | 636 | | | Number of beds |
| MCAREBED | 36 | 4 | BEDSFMT | | | FA45 | N Number of Medicare-only certified beds |
| | | | | 83 | | | . Inapplicable |
| | | | | 12 | | | -8 Don't know |
| | | | | 994 | | | 0 No beds of this type |
| | | | | 70 | | | Number of beds |
| MCAIDBED | 40 | 4 | BEDSFMT | | | FA44 | N Number of Medicaid-only certified beds |
| | | | | 83 | | | . Inapplicable |
| | | | | 9 | | | -8 Don't know |
| | | | | 968 | | | 0 No beds of this type |
| | | | | 99 | | | Number of beds |
| ICFMRBED | 44 | 4 | BEDSFMT | | | FA45b | N Number of ICF/MR certified beds |
| | | | | 83 | | | . Inapplicable |
| | | | | 3 | | | -8 Don't know |
| | | | | 1,049 | | | 0 No beds of this type |
| | | | | 24 | | | Number of beds |
| CERTBEDS | 48 | 4 | BEDSFMT | | | FA46 | N Total Number of uncertified beds |
| | | | | 83 | | | . Inapplicable |
| | | | | 1 | | | -9 Not ascertained |
| | | | | 18 | | | -8 Don't know |
| | | | | 731 | | | 0 No beds of this type |
| | | | | 326 | | | Number of beds |
| Note: Derived -- sum of MNORBED, OLTCBED, and NLTCBEDS | | | | | | | |
| MNORMBED | 52 | 4 | BEDSFMT | | | FA45a | N Beds not certified, but licensed for NH |
| | | | | 83 | | | . Inapplicable |
| | | | | 1 | | | -9 Not ascertained |
| | | | | 3 | | | -8 Don't know |
| | | | | 1,007 | | | 0 No beds of this type |
| | | | | 65 | | | Number of beds |
| OLTCBED | 56 | 4 | BEDSFMT | | | FA45c | N Number of other long term care beds |
| | | | | 83 | | | . Inapplicable |
| | | | | 1 | | | -9 Not ascertained |
| | | | | 18 | | | -8 Don't know |
| | | | | 791 | | | 0 No beds of this type |
| | | | | 266 | | | Number of beds |

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|----------|-----|-----|---------|-----------|----------|----------|--|
| NLTCBEDS | 60 | 4 | BEDSFMT | | | FA46 | N # of beds where certification is unknown |
| | | | | 1,012 | | | 0 No beds of this type |
| | | | | 147 | | | Number of beds |
| ROOMCARE | 64 | 2 | YES2FMT | | | FA22c | N Facility provide nursing/medical care? |
| | | | | 83 | | | . Missing |
| | | | | 976 | | | 1 Yes |
| | | | | 100 | | | 2 No |
| SUPRVMED | 66 | 2 | YES2FMT | | | FA22c | N Facil supervises self-administered meds? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,072 | | | 1 Yes |
| | | | | 3 | | | 2 No |
| FHLPBATH | 68 | 2 | YES2FMT | | | FA22c | N Does facility provide help w/bathing? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,058 | | | 1 Yes |
| | | | | 17 | | | 2 No |
| FHLPDRES | 70 | 2 | YES2FMT | | | FA22c | N Does facility provide help w/dressing? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,057 | | | 1 Yes |
| | | | | 18 | | | 2 No |
| FHLPSHOP | 72 | 2 | YES2FMT | | | FA22c | N Does facility provide help w/shopping? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,056 | | | 1 Yes |
| | | | | 19 | | | 2 No |
| FHLPWALK | 74 | 2 | YES2FMT | | | FA22c | N Does facility provide help w/walking? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,036 | | | 1 Yes |
| | | | | 39 | | | 2 No |
| FHLPEAT | 76 | 2 | YES2FMT | | | FA22c | N Does facility provide help w/eating? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,019 | | | 1 Yes |
| | | | | 56 | | | 2 No |
| FHLPCOMM | 78 | 2 | YES2FMT | | | FA22c | N Does facil provide help w/communication? |
| | | | | 83 | | | . Missing |
| | | | | 1 | | | -7 Refused |
| | | | | 1,057 | | | 1 Yes |
| | | | | 18 | | | 2 No |

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|----------|-----|-----|---------|-----------|----------|----------|--|
| FHLPNURS | 80 | 2 | YES2FMT | | | FA22a | N Does facil provide 24-hour nursing care? |
| | | | | 1,069 | | | 1 Yes |
| | | | | 90 | | | 2 No |
| MCARERES | 82 | 4 | RESFMT | | | FA48 | N # of residents w/ Mcare as primary payor |
| | | | | 79 | | | . Inapplicable |
| | | | | 5 | | | -9 Not ascertained |
| | | | | 37 | | | -8 Don't know |
| | | | | 410 | | | 0 None |
| | | | | 628 | | | Number of residents |
| MCAIDRES | 86 | 4 | RESFMT | | | FA47 | N # of residents w/ Medicaid payment |
| | | | | 69 | | | . Inapplicable |
| | | | | 7 | | | -9 Not ascertained |
| | | | | 45 | | | -8 Don't know |
| | | | | 1 | | | -7 Refused |
| | | | | 368 | | | 0 None |
| | | | | 669 | | | Number of residents |
| PRPAYRES | 90 | 4 | RESFMT | | | FA49 | N # of residents who have private pay only |
| | | | | 1 | | | -9 Not ascertained |
| | | | | 72 | | | -8 Don't know |
| | | | | 1 | | | -7 Refused |
| | | | | 101 | | | 0 None |
| | | | | 984 | | | Number of residents |
| MIDNTRES | 94 | 4 | RESFMT | | | FA52 | N Midnight census count last night |
| | | | | 3 | | | -9 Not ascertained |
| | | | | 21 | | | -8 Don't know |
| | | | | 1 | | | -7 Refused |
| | | | | 2 | | | 0 None |
| | | | | 1,132 | | | Number of residents |
| SPIDCNT | 98 | 2 | SPFMT | | | | N Number of SPs in facility |
| | | | | 839 | | | 1 One sample person |
| | | | | 206 | | | 2 Two sample people |
| | | | | 63 | | | 3 Three sample people |
| | | | | 20 | | | 4 Four sample people |
| | | | | 25 | | | 5 Five sample people |
| | | | | 6 | | | 6 Six sample people |
| | | | | 0 | | | 7 Seven sample people |
| | | | | 0 | | | 8 Eight sample people |
| | | | | 0 | | | 9 Nine sample people |
| | | | | 0 | | | 10 Ten sample people |

Note: Determined from administrative records.