

10/10/07
ACCESS
1991

MEDICARE CURRENT BENEFICIARY SURVEY
Facility Residence History

RIC: 6
Page: 1
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
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This summarizes the sample person's stay(s) in a facility, providing information about the admission and some limited information about the sample person's living arrangement prior to admission and subsequent to discharge. There is one record for each person who completed a facility interview.

RIC	1	1					C RECORD IDENTIFICATION CODE
FILEYR	2	2					C YY REFERENCE YEAR OF RECORD
BASEID	4	8	\$BSIDFMT				C UNIQUE SP IDENTIFICATION NUMBER

942 LOW-HIGH BASEID Count

FACILID	12	6	\$DFACFMT				C MCBS FACILITY IDENTIFIER
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942 000000-999999 FACILITY ID

Note: Randomly-assigned number

ADMIN	18	6	\$DATEFMT			RH2	C ADMISSION DATE
				18			MISSING
				924		000000-999999	ADMISSION DATE

DISCHTO	24	2	LOCFMT			RH21	N PLACE SP WAS DISCHARGED TO
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939	.	INAPPLICABLE
0	1	ALONE/WITH OTHERS
3	2	HOSPITAL
0	3	NURSING HOME
0	4	RETIREMENT HOME
0	5	DOMICIL/PERS CARE FAC
0	6	MENTAL HLTH FAC
0	7	INST FOR MR/DEVEL DIS
0	8	MENTAL HLTH CENTER
0	9	LIFE CARE/CONT CARE
0	10	ASSIS LIVING FAC
0	11	REHAB FACILITY
0	91	OTHER

Note: Applies only if SP discharged in reference period

DISCHTOS	26	2	DISCOFMT			RH21	N PLACE SP WAS DISCHARGED TO (OTHER)
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942	.	INAPPLICABLE
0	1	ADULT FOSTER CARE

Note: Applies only if DISCHTO = 91

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
ADMTFROM	28	2	LOCFMT			RH22	N PLACE SP WAS ADMITTED FROM
				1			-9 NOT ASCERTAINED
				15			-8 DONT KNOW
				371			1 ALONE/WITH OTHERS
				384			2 HOSPITAL
				18			3 NURSING HOME
				8			4 RETIREMENT HOME
				9			5 DOMICIL/PERS CARE FAC
				25			6 MENTAL HLTH FAC
				13			7 INST FOR MR/DEVEL DIS
				88			8 MENTAL HLTH CENTER
				5			9 LIFE CARE/CONT CARE
				3			10 ASSIS LIVING FAC
				1			11 REHAB FACILITY
				1			91 OTHER
ADMFROS	30	2	ADMFFMT			RH22	N PLACE SP WAS ADMITTED FROM (OTHER)
				941			. INAPPLICABLE
				0			2 JAIL
				0			3 ADULT FOSTER CARE
				1			4 GROUP HOME CARE
Note: Applies only if ADMTFROM = 91							
LIVWRELA	32	2	LIVWFMT			RH30	N W/WHOM WAS SP LIVING PRIOR--ADMIT
				571			. INAPPLICABLE
				3			-9 NOT ASCERTAINED
				13			-8 DONT KNOW
				207			1 WITH RELATIVES
				12			2 WITH NON-RELATIVES
				2			3 BOTH
				131			4 ALONE
				3			5 W/OTHERS REL UNKN
Note: Applies only if ADMTFROM = 1							
OLDFACTY	34	2	OLDFFMT				N PRIOR FACILITY TYPE
				558			. INAPPLICABLE
				5			-9 NOT ASCERTAINED
				2			-8 DONT KNOW
				259			1 HOSPITAL
				18			2 SNF
				9			3 ICF
				1			4 OTHER NON-CER NH
				6			5 DOMIC OR PERS CARE
				50			6 MR/DEVEL DISABLED
				29			7 MENTAL HLTH CEN/FAC
				5			8 REHAB INST/CENTER
				0			91 OTHER