

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 1  
Version: 2

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

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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
				962		LOW-HIGH BASEID Count
FACILID	12	6	\$FIDFMT			C Facility ID
				962		LOW-HIGH FACILID Count

Note: Randomly-assigned number

NHSTAT	18	2	NHSTFMT			N Nursing home status flag
				11		0 Not meet--NH
				784		1 Meets-not par probs
				108		2 Meets-MR
				25		3 Meets-mentally ill
				0		4 Meets-deaf or blind
				9		5 Meets-phys handi
				1		6 Meets unwed moms, etc
				3		7 Meets-some oth group
				12		8 Meets-no part group
				9		9 Unable to determine

Note: Derived

FACOWNED	20	2	OWNDES		FQ1	N Description of Ownership of facility
				3		-9 Not ascertained
				593		1 Proprietary
				237		2 Private non-profit
				42		3 City/county government
				77		4 State government
				10		5 Veterans Administration
				0		6 Other federal agency
				0		91 Other, specify

FACDISC	22	2	FACFMT		FQ2	N Facility description
				1		-9 Not ascertained
				11		1 Hospital
				696		2 Nursing home
				13		3 Retirement home
				37		4 Domiciliary/personal care facility
				36		5 Mental health facility
				83		6 Inst for mentally retarded/devel disab
				1		7 Mental health center
				17		8 Life care/continuing care
				41		9 Assisted living facility
				5		10 Rehabilitation facility
				21		91 Other place, specify

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 2  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
FACDIOS	24	2	FACDFMT			FQ2	N Facility description - other specified
				941			. Inapplicable
				3			1 Adult hostel
				6			2 Adult foster care
				0			3 Hospice
				6			4 Residential care
				1			5 Extended care facility
				2			6 Independent living
				1			7 Group home for the mentally ill
				1			8 Shelter care
				1			9 Family care/foster
				0			10 Nursing home/personal care facility
				0			11 Nursing home/rehab facility
				0			12 Assisted living
				0			13 Retirement home/assisted living facility
				0			14 Psychiatric hospital
				0			15 Adult Congregate Living Facility
				0			16 NH / domiciliary / assisted living
				0			17 Community-based living facility
				0			18 Group home for emotionally disturbed
				0			19 Residential care
				0			20 Group home
				0			21 Pediatric long-term care facility
				0			22 Nursing home / assisted living
				0			23 Mental health / ment ret / dev disabled
				0			24 Nursing home/assisted
				0			25 Nursing home / retirement home / dev dis
				0			26 Nursing home / retirement home
				0			27 Domiciliary/assisted
				0			28 Nursing home / personal care facility
				0			29 Residential health care
				0			30 Family care
				0			31 Nursing home / life care facility
				0			32 Nursing home / medical center
				0			33 ON LOK (PACE provider)
				0			34 Convalescent hospital
				0			35 Rest home and protective care
				0			36 Residential shelter care
				0			37 Inst for MR / dev disabled / rest home
				0			38 Rest home
				0			39 Nursing home / life care / rehab
				0			40 Nursing home / personal care / rehab
				0			41 Hospital / retirement home
				0			42 Nursing home / retirement home / rehab
				0			43 Nursing home / hospice
				0			44 Nursing home / assisted living facility
				0			45 Dev residential facility for deaf
				0			46 Retirement home / personal care
				0			47 Personal care / mental health
				0			48 Mental health / assisted living
				0			49 NH: institution for MR / dev disabled
				0			50 Nursing home / personal care
				0			51 Retirement home / assisted living
				0			52 Private home
				0			53 NH /retirement home / assisted living
				0			54 Inst for MR / dev disabled / mental heal
				0			55 Mental health / rehab
				0			56 Hospital / nursing home
				0			57 Assisted living and residential care
				0			58 Retirement and board and care facility
				0			59 Home and community based services
				0			60 Adult foster care/group home mentally il

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 3  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
				0			61 Senior center P.A.C.E.
				0			62 SLS-supported living services
Note: Applies only if FACDISC = 91.							
FACLONGT	26	2	YES2FMT			FQ3	N Does facility provide long term care?
				11			. Missing
				942			1 Yes
				9			2 No
FACLONGD	28	2	YES2FMT			FQ4	N Is long term care distinct unit?
				9			. Missing
				625			1 Yes
				328			2 No
FACLTBED	30	3	BEDFMT			FQ5	N Number of long term beds only
				9			. Question not asked; assumed to be zero
				0			0 No beds of this type
				953			Number of beds
FACTOBED	33	3	BED2FMT			FQ6	N Total number of beds in facility
				1			-9 Not ascertained
				3			-8 Don't know
				1			-7 Refused
				7			996 # beds > 995
				950			Number of beds
PROVLEVL	36	2	YES2FMT			FQ17	N Facil provides different levels of care?
				540			1 Yes
				422			2 No
LEVLSKIL	38	2	YES2FMT			FQ17	N Does facility provide skilled care?
				422			. Missing
				1			-8 Don't know
				403			1 Yes
				136			2 No
LEVLINTR	40	2	YES2FMT			FQ8	N Does facility provide intermediate care?
				422			. Missing
				1			-8 Don't know
				396			1 Yes
				143			2 No
LEVLOTH1	42	2	YES1FMT			FQ17	N Facility provide other level of care #1?
				422			. Inapplicable
				1			-8 Don't know
				234			1 Yes
				305			2 No

Note: Applies only if PROVLEVL = 1

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 4  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
LEVLOTS1	44	2	LEVLOTFT			FQ17	N Other level of care #1 - other specified
				728			. Inapplicable
				1			-9 Not ascertained
				5			1 Light
				11			2 Heavy
				13			3 Custodial
				9			4 Alzheimers
				2			5 Minimum
				1			6 Moderate
				0			7 Maximum
				3			8 Specialized Care
				1			9 Intensive
				0			10 Heavy intensive care
				0			11 Extensive care
				0			12 Retarded
				0			13 Retarded, extra care
				0			14 Personal care, total
				0			15 Behavioral
				0			16 Developmentally disabled
				0			17 Mentally ill & homeless
				0			18 Complex care ISNF
				0			19 Closely monitored
				0			20 ADL assistance
				0			21 Profound mental retardation
				0			22 Mild mental retardation
				0			23 Severe mental retardation
				0			24 Specialized dementia
				135			95 Not specific
				53			96 State specific

Note: First available in 1993

LEVLOTH2	46	2	YES1FMT			FQ17	N Facility provide other level of care #2?
				422			. Inapplicable
				1			-8 Don't know
				26			1 Yes
				513			2 No

Note: Applies only if PROVLEV = 1

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 5  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
LEVLOTS2	48	2	LEVLOTFT			FQ17	N Other level of care #2 - other specified
				936			. Inapplicable
				1			1 Light
				3			2 Heavy
				0			3 Custodial
				3			4 Alzheimers
				1			5 Minimum
				3			6 Moderate
				2			7 Maximum
				0			8 Specialized Care
				0			9 Intensive
				0			10 Heavy intensive care
				0			11 Extensive care
				0			12 Retarded
				0			13 Retarded, extra care
				0			14 Personal care, total
				0			15 Behavioral
				0			16 Developmentally disabled
				0			17 Mentally ill & homeless
				0			18 Complex care ISNF
				0			19 Closely monitored
				0			20 ADL assistance
				0			21 Profound mental retardation
				0			22 Mild mental retardation
				0			23 Severe mental retardation
				0			24 Specialized dementia
				13			95 Not specific
				0			96 State specific

Note: First available in 1993

LEVLOTH3	50	2	YES1FMT			FQ17	N Facility provide other level of care #3?
				422			. Inapplicable
				1			-8 Don't know
				7			1 Yes
				532			2 No

Note: Applies only if PROVLEV = 1

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 6  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
LEVLOTS3	52	2	LEVLOTFT			FQ17	N Other level of care #3 - other specified
				955			. Inapplicable
				0			1 Light
				2			2 Heavy
				0			3 Custodial
				0			4 Alzheimers
				1			5 Minimum
				1			6 Moderate
				1			7 Maximum
				0			8 Specialized Care
				0			9 Intensive
				0			10 Heavy intensive care
				0			11 Extensive care
				0			12 Retarded
				0			13 Retarded, extra care
				0			14 Personal care, total
				0			15 Behavioral
				0			16 Developmentally disabled
				0			17 Mentally ill & homeless
				0			18 Complex care ISNF
				0			19 Closely monitored
				0			20 ADL assistance
				0			21 Profound mental retardation
				0			22 Mild mental retardation
				0			23 Severe mental retardation
				0			24 Specialized dementia
				2			95 Not specific
				0			96 State specific

Note: First available in 1993

SNFBEDN	54	3	BEDFMT			FQ8	N Number of SNF beds - Medicare certified
				485			. Question not asked; assumed to be zero
				2			-8 Don't know
				0			0 No beds of this type
				475			Number of beds
MCDSNFN	57	3	BEDFMT			FQ10	N Number of SNF beds - Medicaid certified
				411			. Question not asked; assumed to be zero
				6			-8 Don't know
				0			0 No beds of this type
				545			Number of beds
MCDICFN	60	3	BEDFMT			FQ12	N # of Mcaid-cert ICF beds, excl ICF-MR
				612			. Question not asked; assumed to be zero
				8			-9 Not ascertained
				7			-8 Don't know
				51			0 No beds of this type
				284			Number of beds

Note: Applies only if facility has no beds certified by Medicare or Medicaid

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 7  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
MCDICFMR	63	3	BEDFMT			FQ13	N Number of ICF/MR beds
				612			. Question not asked; assumed to be zero
				13			-9 Not ascertained
				6			-8 Don't know
				245			0 No beds of this type
				86			Number of beds
CERTBEDS	66	3	BEDFMT			FQ14	N Number of uncertified beds
				845			. Question not asked; assumed to be zero
				1			-8 Don't know
				0			0 No beds of this type
				116			Number of beds
Note: Derived -- sum of MNORBED, OLTCBED, and NLTCBEDS							
PRIMDEAF	69	2	YES2FMT			FQ20	N Does facility primarily serve deaf?
				19			-9 Not ascertained
				2			-7 Refused
				17			1 Yes
				924			2 No
PRIMBLND	71	2	YES2FMT			FQ20	N Does facility primarily serve blind?
				19			-9 Not ascertained
				2			-7 Refused
				19			1 Yes
				922			2 No
PRIMUWED	73	2	YES2FMT			FQ20	N Facility primarily serves unwed mothers?
				19			-9 Not ascertained
				2			-7 Refused
				0			1 Yes
				941			2 No
PRIMABUS	75	2	YES2FMT			FQ20	N Facil prim serves alcohol/drug abusers
				19			-9 Not ascertained
				2			-7 Refused
				11			1 Yes
				930			2 No
PRIMORPH	77	2	YES2FMT			FQ20	N Facility primarily serve orphans/depend?
				19			-9 Not ascertained
				2			-7 Refused
				2			1 Yes
				939			2 No
PRIMMDEF	79	2	YES2FMT			FQ20	N Facil primarily serve mentally ill/deaf?
				19			-9 Not ascertained
				2			-7 Refused
				9			1 Yes
				932			2 No

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 8  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
PRIMMENT	81	2	YES2FMT			FQ20	N Facil primarily serve mentally ill only?
				19			-9 Not ascertained
				2			-7 Refused
				39			1 Yes
				902			2 No
PRIMMEDD	83	2	YES2FMT			FQ20	N Facil prim serve ment ret/dev disabled?
				19			-9 Not ascertained
				2			-7 Refused
				108			1 Yes
				833			2 No
PRIMMIMR	85	2	YES2FMT			FQ20	N Facil prim serve ment ret/mental ill?
				19			-9 Not ascertained
				2			-7 Refused
				43			1 Yes
				898			2 No
PRIMGERI	87	2	YES2FMT			FQ20	N Does facility primarily serve geriatric?
				19			-9 Not ascertained
				2			-7 Refused
				727			1 Yes
				214			2 No
PRIMNEUR	89	2	YES2FMT			FQ20	N Facil prim serve neuro/phys handicapped?
				19			-9 Not ascertained
				2			-7 Refused
				54			1 Yes
				887			2 No
PRIMOTHR	91	2	YES2FMT			FQ20	N Facil primarily serves some other group?
				19			-9 Not ascertained
				2			-7 Refused
				16			1 Yes
				925			2 No
PRIMOS	93	2				FQ20	N Facil prim serve other group, specify
PRIMGRP	95	2	YES2FMT			FQ20	N Facility primarily serve no primary grp?
				19			-9 Not ascertained
				2			-7 Refused
				62			1 Yes
				879			2 No
ROOMCARE	97	2	YES2FMT			FQ21a	N Facility provide nursing/medical care?
				20			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				858			1 Yes
				77			2 No



04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 9  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
SUPRVMED	99	2	YES2FMT			FQ21b	N Facil supervises self-administered meds?
				19			-9 Not ascertained
				8			-8 Don't know
				2			-7 Refused
				667			1 Yes
				266			2 No
FHLPBATH	101	2	YES2FMT			FQ21c	N Does facility provide help w/bathing?
				21			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				906			1 Yes
				28			2 No
FHLPDRES	103	2	YES2FMT			FQ21d	N Does facility provide help w/dressing?
				20			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				910			1 Yes
				25			2 No
FHLPSHOP	105	2	YES2FMT			FQ21e	N Does facility provide help w/shopping?
				19			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				919			1 Yes
				17			2 No
FHLPWALK	107	2	YES2FMT			FQ21f	N Does facility provide help w/walking?
				19			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				893			1 Yes
				43			2 No
FHLPEAT	109	2	YES2FMT			FQ21g	N Does facility provide help w/eating?
				20			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				887			1 Yes
				48			2 No
FHLPCOMM	111	2	YES2FMT			FQ21h	N Does facil provide help w/communication?
				19			-9 Not ascertained
				5			-8 Don't know
				2			-7 Refused
				905			1 Yes
				31			2 No
FHLPNURS	113	2	YES2FMT			FQ22	N Does facil provide 24-hour nursing care?
				1			-9 Not ascertained
				943			1 Yes
				18			2 No

04/11/07  
ACCESS  
1992

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Facility Identification

RIC: 7  
Page: 10  
Version: 2

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
SPIDCNT	115	2	SPFMT				N Number of SPs in facility
				669			1 One sample person
				184			2 Two sample people
				75			3 Three sample people
				17			4 Four sample people
				13			5 Five sample people
				0			6 Six sample people
				4			7 Seven sample people
				0			8 Eight sample people
				0			9 Nine sample people
				0			10 Ten sample people

Notes: Determined from administrative records.  
First available in 1992

NORATE	117	2	NORTFMT			FQ18	N Reason for no rates
				951			. Inapplicable
				7			1 VA
				3			2 State funded
				1			3 Capitated
				0			4 Convent

Note: First available in 1992