

Variable Col Len Fmt Name Frequency Ques # Ty Label

RIC	1	3		C	RIC CODE FOR FACILITY EVENT RECORD
FILEYR	4	2		C	YY REFERENCE YEAR OF RECORD
BASEID	6	8		C	UNIQUE IDENTIFICATION NUMBER
STAYNUM	14	1		N	STAY NUMBER FOR THE YEAR
REFBEGYY	15	2		N	REF DATE BEGIN YEAR
REFBEGMM	17	2		N	REG DATE BEGIN MONTH
REFBEGDD	19	2		N	REF DATE BEGIN DAY
REFENDYY	21	2		N	REF DATE END YEAR
REFENDMM	23	2		N	REG DATE END MONTH
REFENDDD	25	2		N	REF DATE END DAY
ADMISYY	27	2		N	ADMISSION DATE YEAR
ADMISMM	29	2		N	ADMISSION DATE MONTH
ADMISDD	31	2		N	ADMISSION DATE DAY
DISCHYY	33	2		N	PERMANENT DISCH DATE YEAR
DISCHMM	35	2		N	PERMANENT DISCH DATE MONTH
DISCHDD	37	2		N	PERMANENT DISCH DATE DAY
STAYDAYS	39	3		N	NUMBER OF DAYS IN STAY
D_FACID	42	6		C	FACILITY ID + PSU NUMBER
FACDESC	48	2	FACFMT	N	FACILITY DESCRIPTION

0	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
11	1	HOSPITAL
965	2	NURSING HOME
32	3	RETIREMENT HOME
46	4	DOMI/PER CARE FAC
35	5	MENTAL HLTH FACILITY
72	6	INST FOR MR/DEV DISA
5	7	MENTAL HLTH CNTR
28	8	LIFE CARE/CONT CARE
85	9	ASSISTED LIVING FAC
14	10	REHAB FACILITY
47	91	OTHER PLACE (SPEC)

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BEGSTAT 50 1 \$BEGSTAT C STATUS AT BEGINNING OF STAY

3	- DON'T KNOW
1,009	0 CONTINUING SP
116	1 FIRST TIME SP FROM HOME
112	2 FIRST TIME SP FROM HOSP
71	3 FIRST TIME SP FROM NH
10	5 2ND STAY 30-DAY SPLIT (IN HOSP)
5	6 2ND STAY 30-DAY SPLIT (DISCH)
13	7 FIRST TIME SP FROM OTH FAC
1	9 UNKNOWN

ENDSTAT 51 1 \$ENDSTAT C STATUS AT END OF STAY

5	- DON'T KNOW
934	0 SP STILL A RESIDENT
35	1 SP WAS DISCHARGED HOME
36	2 SP WAS DISCHARGED TO HOSP
68	3 SP WAS DISCHARGED TO OTH FAC
252	4 SP DIED IN FAC
5	5 STAY SPLIT BY 30-DAY HOSP
4	6 STAY SPLIT BY 30-DAY DISCH
0	7 SP WAS DISCHARGED TO OTH FAC
1	8 UNKNOWN REASON FOR END OF STAY

AMTTOT	52 9	N TOTAL PAYMENT
AMTCARE	61 9	N AMOUNT PAID BY MEDICARE
AMTCAID	70 9	N AMOUNT PAID BY MEDICAID
AMTVA	79 9	N AMOUNT PAID BY VETERANS ADM
AMTPRVU	88 9	N AMOUNT PAID BY PRIV INS (UNKNOWN)
AMTOOP	97 9	N AMOUNT PAID BY PERSON/FAMILY
AMTOTH	106 9	N AMOUNT PAID BY OTHER SOURCES
ANCITOT	115 9	N ANCILLARY TOTAL PAYMENT
ANCICARE	124 9	N ANCILLARY AMT PAID BY MEDICARE
ANCICAID	133 9	N ANCILLARY AMT PAID BY MEDICAID
ANCIVA	142 9	N ANCILLARY AMT PAID BY VETERANS ADM
ANCIPRVU	151 9	N ANCILLARY AMT PAID BY PRIV INS
ANCIOOP	160 9	N ANCILLARY AMT PAID BY PERSON/FAMILY
ANCIOTH	169 9	N ANCILLARY AMT PAID BY OTHER SOURCES
TOTCARE	178 9	N AMT PAID BY MEDICARE FOR ALL SERVICES
TOTALL	187 9	N AMT ALL TOTAL (INC. MCARE SERVICES)
DENTNUM	196 3	N NUMBER OF DENTAL VISITS
EMNUM	199 3	N NUMBER OF EMERGENCY ROOM VISITS
OPNUM	202 3	N NUMBER OF CLINIC/OUTPATIENT VISITS

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PNURSNUM	205	3		N	NUMBER OF PRIVATE NURSING VISITS
MDNUM	208	3		N	NUMBER OF MEDICAL DOCTOR VISITS
HPRACVIS	211	3		N	NUMBER OF HEALTH PRACTITIONER VISITS
MHNUMVIS	214	3		N	NUMBER OF MENTAL HEALTH PROFESS. VISITS
THNUMVIS	217	3		N	NUMBER OF THERAPIST VISITS
OTNUMVIS	220	4		N	NUMBER OF OTHER MEDICAL PERSON VISITS
PRNUMVIS	224	4		N	NUMBER OF PROCEDURES
MPNUMVIS	228	3		N	NUMBER OF OTHER MEDICAL PLACE VISITS
FAMPFLG	231	2	MOSTFMT	N	TYPE OF MD: FAMILY PHYSICIAN FLAG

93	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
1,140	1	YES
107	2	NO

INTRNFLG	233	2	MOSTFMT	N	TYPE OF MD: INTERNIST
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266	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
266	1	YES
808	2	NO

CARDOFLG	235	2	MOSTFMT	N	TYPE OF MD: CARDIOLOGIST
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292	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
36	1	YES
1,012	2	NO

NEUROFLG	237	2	MOSTFMT	N	TYPE OF MD: NEUROLOGIST
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287	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
48	1	YES
1,005	2	NO

GYNFLG	239	2	MOSTFMT	N	TYPE OF MD: GYNECOLOGIST
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296	.	INAPPLICABLE
0	-9	NOT ASCERTAINED
0	-8	DON'T KNOW
0	-7	REFUSED
23	1	YES
1,021	2	NO

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OPTHLFLG 241 2 MOSTFMT N TYPE OF MD: OPHTHALMOLOGIST

272 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 205 1 YES  
 863 2 NO

RADIOFLG 243 2 MOSTFMT N TYPE OF MD: RADIOLOGIST

296 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 12 1 YES  
 1,032 2 NO

PROCTFLG 245 2 MOSTFMT N TYPE OF MD: PROCTOLOGIST

298 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 1 1 YES  
 1,041 2 NO

ORTHOFLG 247 2 MOSTFMT N TYPE OF MD: ORTHOPEDIST

286 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 91 1 YES  
 963 2 NO

THORAFLG 249 2 MOSTFMT N TYPE OF MD: THORACIC SURGEON

297 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 3 1 YES  
 1,040 2 NO

AUDIOFLG 251 2 MOSTFMT N TYPE OF HP: AUDIOLOGIST

894 . INAPPLICABLE  
 5 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 83 1 YES  
 358 2 NO

OPTOMFLG 253 2 MOSTFMT N TYPE OF HP: OPTOMETRIST

837 . INAPPLICABLE  
 5 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 170 1 YES  
 328 2 NO

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CHIROFLG 255 2 MOSTFMT N TYPE OF HP: CHIROPRACTOR

938 . INAPPLICABLE  
 5 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 4 1 YES  
 393 2 NO

PODIAFLG 257 2 MOSTFMT N TYPE OF HP: PODIATRIST

587 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 712 1 YES  
 41 2 NO

ENTFLG 259 2 MOSTFMT N TYPE OF MD: EARS/NOSE/THROAT DOCTOR

292 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 45 1 YES  
 1,003 2 NO

PHARMFLG 261 2 MOSTFMT N TYPE OF HP: PHARMACIST

924 . INAPPLICABLE  
 5 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 73 1 YES  
 338 2 NO

DIABSUPP 263 2 MOSTFMT N USED DIABETIC SUPPLIES

1,173 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 167 1 YES  
 0 2 NO

EYEGLOSS 265 2 MOSTFMT N USED EYEGLASSES

1,260 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 80 1 YES  
 0 2 NO

HEARAID 267 2 MOSTFMT N USED HEARING AID

1,301 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 39 1 YES  
 0 2 NO

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ORTHITEM 269 2 MOSTFMT N USED ORTHOPEDIC ITEMS

1,065 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 275 1 YES  
 0 2 NO

EQUIPSUP 271 2 MOSTFMT N USED EQUIPMENT OR SUPPLIES

1,334 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 6 1 YES  
 0 2 NO

OSTOMSUP 273 2 MOSTFMT N USED OSTOMY SUPPLIES

1,294 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 46 1 YES  
 0 2 NO

DIAPRSUP 275 2 MOSTFMT N USED DISPOSABLE DIAPERS

645 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 695 1 YES  
 0 2 NO

AMBUSERV 277 2 MOSTFMT N USED AMBULANCE SERVICE

861 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 479 1 YES  
 0 2 NO

PROSTHES 279 2 MOSTFMT N USED PROSTHESIS

1,325 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 15 1 YES  
 0 2 NO

OXYGEN 281 2 MOSTFMT N USED OXYGEN

1,340 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 0 1 YES  
 0 2 NO

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TURNPOS 283 2 MOSTFMT N RECEIVED TURNING AND POSITIONING

617 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 723 1 YES  
 0 2 NO

TUBEFEED 285 2 MOSTFMT N RECEIVED TUBE FEEDING

1,218 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 122 1 YES  
 0 2 NO

RESTRAIN 287 2 MOSTFMT N RECEIVED RESTRAINTS

982 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 358 1 YES  
 0 2 NO

INJECTION 289 2 MOSTFMT N RECEIVED INJECTIONS

855 . INAPPLICABLE  
 0 -9 NOT ASCERTAINED  
 0 -8 DON'T KNOW  
 0 -7 REFUSED  
 485 1 YES  
 0 2 NO