

02/04/05
Cost & Use
2002

MEDICARE CURRENT BENEFICIARY SURVEY
Short Stay Facility Identification

RIC: 7S
Page: 1
Version: 1

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

This file provides general characteristics of the institutions from CMS' Provider of Service file. 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 who had a facility stay, but did not have a facility interview.

RIC	1	2					C Record Identification Code
VERSION	3	1					C Version Number
BASEID	4	8	\$BSIDFMT				C Unique SP Identification Number
				618			LOW-HIGH BASEID Count
PROV	12	6	\$FIDFMT				C Medicare provider number
				618			LOW-HIGH PROV Count
FACOWNED	18	2	OWNDES			FA31	N Description of Ownership of facility
				395			1 For profit (indiv,partnership,corp)
				203			2 Private non-profit (religious,NP corp)
				14			3 City/county government
				0			4 State government
				0			5 Veterans Administration
				0			6 Other federal agency
				6			91 Other specify
PLACTYPE	20	2	PLACFMT			FA1, FA5	N Facility description
				0			3 Continuing Care Retirement Community
				618			4 Nursing home
				0			5 Retirement community
				0			6 Hospital
				0			8 Assisted living
				0			9 Board & care home
				0			10 Domiciliary care facility
				0			11 Personal care facility
				0			12 Rest home/retirement home
				0			15 Mental health center psychiatric setting
				0			16 Mentally ret/developmentally disabled
				0			17 Rehabilitation facility
				0			18 Adult/group home
				0			91 Other

Note: First available in 2000

FACTOBED	22	4	BEDSFMT			FA19	N Total number of beds in facility
				0			0 No beds of this type
				618			Number of beds
MANDMBED	26	4	BEDSFMT			FA43	N # of beds certified for Mcare & Mcaid
				84			0 No beds of this type
				534			Number of beds

Note: First available in 1997

02/04/05

Cost & Use
2002

MEDICARE CURRENT BENEFICIARY SURVEY

Short Stay Facility Identification

RIC: 7S

Page: 2

Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
MCAREBED	30	4	BEDSFMT			FA45	N Number of Medicare-only certified beds
				496			0 No beds of this type
				122			Number of beds
Note: First available in 1997							
MCAIDBED	34	4	BEDSFMT			FA44	N Number of Medicaid-only certified beds
				463			0 No beds of this type
				155			Number of beds
Note: First available in 1997							
CERTBEDS	38	4	BEDSFMT			FA46	N Number of uncertified beds
				554			0 No beds of this type
				64			Number of beds
Note: Derived -- sum of MNORBED, OLTCBED, and NLTCBEDS							