

02/04/05
Cost & Use
2002

MEDICARE CURRENT BENEFICIARY SURVEY
 Medical Provider Events

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

The Medical Provider Events file contains data about a variety of medical services, equipment and supplies collected in the survey, including: medical provider (MP), separately billing (SD), separately billing lab (SL), and other medical expenses (OM).

| | | | | | | | |
|----------|----|---|------------|---------|--|--|--------------------------------------|
| RIC | 1 | 2 | | | | | C Record Identification Code |
| VERSION | 3 | 1 | | | | | C Version Number |
| BASEID | 4 | 8 | \$BSIDFMT | | | | C Unique SP Identification Number |
| | | | | 345,048 | | | LOW-HIGH BASEID Count |
| EVNTNUM | 14 | 4 | \$EVNTNUM | | | | C Unique event identifier |
| | | | | 173,033 | | | C000-C999 Event created from claim |
| | | | | 172,015 | | | 0000-9999 Survey-reported event |
| EVNTTYPE | 18 | 2 | \$EVNTTYP | | | | C Event type |
| | | | | 0 | | | DU Dental |
| | | | | 0 | | | ER Emergency Room |
| | | | | 0 | | | IP Inpatient |
| | | | | 0 | | | IU Institutional utilization |
| | | | | 178,685 | | | MP Medical provider |
| | | | | 39,500 | | | OM Other medical expense |
| | | | | 0 | | | OP Outpatient |
| | | | | 0 | | | PM Prescribed medicine |
| | | | | 71,783 | | | SD Separately billing physician |
| | | | | 55,080 | | | SL Separately billing lab |
| OREVTYPE | 20 | 2 | \$EVNTTYP | | | | C Original reported event type |
| | | | | 173,033 | | | Missing |
| | | | | 0 | | | DU Dental |
| | | | | 1,175 | | | ER Emergency Room |
| | | | | 422 | | | IP Inpatient |
| | | | | 0 | | | IU Institutional utilization |
| | | | | 118,857 | | | MP Medical provider |
| | | | | 20,166 | | | OM Other medical expense |
| | | | | 3,768 | | | OP Outpatient |
| | | | | 0 | | | PM Prescribed medicine |
| | | | | 22,626 | | | SD Separately billing physician |
| | | | | 5,001 | | | SL Separately billing lab |
| CLAIMID | 22 | 7 | | | | | N Claim this survey event matched to |
| CLAIMTYP | 29 | 1 | \$CLAIMTYP | | | | C Claim type that event matched to |
| | | | | 65,674 | | | |
| | | | | 20,176 | | | D DME claim |
| | | | | 259,198 | | | P Physician claim |
| EVBEYY | 30 | 2 | \$EVENTYY | | | | C Event begin year |
| | | | | 83 | | | -8 Don't know |
| | | | | 45 | | | -9 Not ascertained |
| | | | | 344,920 | | | Year |

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| EVBEGMM | 32 | 2 | \$EVENTMM | | | | C Event begin month |
| | | | | 1 | | | -7 Refused |
| | | | | 797 | | | -8 Don't know |
| | | | | 53 | | | -9 Not ascertained |
| | | | | 0 | | | 95 Still in progress |
| | | | | 344,197 | | | Month |
| EVBEGDD | 34 | 2 | \$EVENTDD | | | | C Event begin day |
| | | | | 11 | | | -7 Refused |
| | | | | 14,433 | | | -8 Don't know |
| | | | | 53 | | | -9 Not ascertained |
| | | | | 330,551 | | | Day of month |
| SOURCE | 36 | 1 | \$SOURCE | | | | C Source of event: survey, claim, or both? |
| | | | | 65,674 | | | 1 Survey only |
| | | | | 173,033 | | | 2 Claims only |
| | | | | 106,341 | | | 3 Both survey & claims |
| SITCODE | 37 | 1 | \$SITCODE | | | | C Community or facility setting? |
| | | | | 362 | | | B Both community & facility |
| | | | | 295,643 | | | C Community |
| | | | | 10,674 | | | D Deemed community |
| | | | | 30,563 | | | F Facility |
| | | | | 1,810 | | | G Deemed facility |
| | | | | 5,996 | | | S SNF |
| AMTTOT | 38 | 9 | | | | | N Total payment |
| IMPATOT | 47 | 1 | IMPFLAG | | | | N AMTTOT imputed in part or in total? |
| | | | | 242,756 | | | 0 Not imputed |
| | | | | 102,292 | | | 1 Imputed |
| AMTCOV | 48 | 9 | | | | | N Medicare program liability, incl. copays |
| AMTNCOV | 57 | 9 | | | | | N Total payment not covered by Medicare |
| AMTCARE | 66 | 9 | | | | | N Amount paid by Medicare |
| IMPSCARE | 75 | 1 | IMPFLAG | | | | N AMTCARE payment source imputed? |
| | | | | 344,495 | | | 0 Not imputed |
| | | | | 553 | | | 1 Imputed |
| IMPACARE | 76 | 1 | IMPFLAG | | | | N AMTCARE payment amount imputed? |
| | | | | 332,260 | | | 0 Not imputed |
| | | | | 12,788 | | | 1 Imputed |
| AMTCAID | 77 | 9 | | | | | N Amount paid by Medicaid |
| IMPSCAID | 86 | 1 | IMPFLAG | | | | N AMTCAID payment source imputed? |
| | | | | 314,468 | | | 0 Not imputed |
| | | | | 30,580 | | | 1 Imputed |

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|----------|-----|-----|---------|-----------|----------|----------|---|
| IMPACAID | 87 | 1 | IMPFLAG | | | | N AMTCAID payment amount imputed? |
| | | | | 283,954 | | | 0 Not imputed |
| | | | | 61,094 | | | 1 Imputed |
| AMTHMOM | 88 | 9 | | | | | N Amount paid by Medicare HMO |
| IMPSHMOM | 97 | 1 | IMPFLAG | | | | N AMTHMOM payment source imputed? |
| | | | | 338,393 | | | 0 Not imputed |
| | | | | 6,655 | | | 1 Imputed |
| IMPAHMOM | 98 | 1 | IMPFLAG | | | | N AMTHMOM payment amount imputed? |
| | | | | 334,526 | | | 0 Not imputed |
| | | | | 10,522 | | | 1 Imputed |
| AMTHMOP | 99 | 9 | | | | | N Amount paid by private HMO |
| IMPSHMOP | 108 | 1 | IMPFLAG | | | | N AMTHMOP payment source imputed? |
| | | | | 337,359 | | | 0 Not imputed |
| | | | | 7,689 | | | 1 Imputed |
| IMPAHMOP | 109 | 1 | IMPFLAG | | | | N AMTHMOP payment amount imputed? |
| | | | | 334,792 | | | 0 Not imputed |
| | | | | 10,256 | | | 1 Imputed |
| AMTVA | 110 | 9 | | | | | N Amount paid by Veterans Administration |
| IMPSVA | 119 | 1 | IMPFLAG | | | | N AMTVA payment source imputed? |
| | | | | 344,945 | | | 0 Not imputed |
| | | | | 103 | | | 1 Imputed |
| IMPAVA | 120 | 1 | IMPFLAG | | | | N AMTVA payment amount imputed? |
| | | | | 343,708 | | | 0 Not imputed |
| | | | | 1,340 | | | 1 Imputed |
| AMTPRVE | 121 | 9 | | | | | N Amt paid by employer-sponsored priv ins |
| IMPSPRVE | 130 | 1 | IMPFLAG | | | | N AMTPRVE payment source imputed? |
| | | | | 309,386 | | | 0 Not imputed |
| | | | | 35,662 | | | 1 Imputed |
| IMPAPRVE | 131 | 1 | IMPFLAG | | | | N AMTPRVE payment amount imputed? |
| | | | | 300,884 | | | 0 Not imputed |
| | | | | 44,164 | | | 1 Imputed |
| AMTPRVI | 132 | 9 | | | | | N Amt paid by individually-purch priv ins |
| IMPSPRVI | 141 | 1 | IMPFLAG | | | | N AMTPRVI payment source imputed? |
| | | | | 310,775 | | | 0 Not imputed |
| | | | | 34,273 | | | 1 Imputed |

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|----------|-----|-----|---------|-----------|----------|----------|--|
| IMPAPRVI | 142 | 1 | IMPFLAG | | | | N AMTPRVI payment amount imputed? |
| | | | | 303,927 | | | 0 Not imputed |
| | | | | 41,121 | | | 1 Imputed |
| AMTPRVU | 143 | 9 | | | | | N Amt paid by priv ins (unknown purchased) |
| IMPSPRVU | 152 | 1 | IMPFLAG | | | | N AMTPRVU payment source imputed? |
| | | | | 340,265 | | | 0 Not imputed |
| | | | | 4,783 | | | 1 Imputed |
| IMPAPRVU | 153 | 1 | IMPFLAG | | | | N AMTPRVU payment amount imputed? |
| | | | | 340,265 | | | 0 Not imputed |
| | | | | 4,783 | | | 1 Imputed |
| AMTOOP | 154 | 9 | | | | | N Amount paid out-of-pocket (OOP) |
| IMPSOOP | 163 | 1 | IMPFLAG | | | | N AMTOOP payment source imputed? |
| | | | | 294,216 | | | 0 Not imputed |
| | | | | 50,832 | | | 1 Imputed |
| IMPAOOP | 164 | 1 | IMPFLAG | | | | N AMTOOP payment amount imputed? |
| | | | | 274,489 | | | 0 Not imputed |
| | | | | 70,559 | | | 1 Imputed |
| AMTDISC | 165 | 9 | | | | | N Amount of uncollected SP liability |
| IMPSDISC | 174 | 1 | IMPFLAG | | | | N AMTDISC payment source imputed? |
| | | | | 336,875 | | | 0 Not imputed |
| | | | | 8,173 | | | 1 Imputed |
| IMPADISC | 175 | 1 | IMPFLAG | | | | N AMTDISC payment amount imputed? |
| | | | | 334,774 | | | 0 Not imputed |
| | | | | 10,274 | | | 1 Imputed |
| AMTOTH | 176 | 9 | | | | | N Amount paid by other payor(s) |
| IMPSOTH | 185 | 1 | IMPFLAG | | | | N AMTOTH payment source imputed? |
| | | | | 343,197 | | | 0 Not imputed |
| | | | | 1,851 | | | 1 Imputed |
| IMPAOTH | 186 | 1 | IMPFLAG | | | | N AMTOTH payment amount imputed? |
| | | | | 340,203 | | | 0 Not imputed |
| | | | | 4,845 | | | 1 Imputed |
| PAMTMED | 187 | 9 | | | | | N Total amount paid for medical services |
| PAMTSURG | 196 | 9 | | | | | N Total amount paid for surgical services |
| PAMTLABX | 205 | 9 | | | | | N Total amount paid for lab/X-Ray |
| PANTOM | 214 | 9 | | | | | N Total payment for other medical services |
| PAMTPM | 223 | 9 | | | | | N Total payment for prescribed medicines |

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| PROVSPEC | 232 | 2 | PROVSPEC | | | | N Medical provider specialty |
| | | | | 173,144 | | | . Missing |
| | | | | 98 | | | -9 Not ascertained |
| | | | | 298 | | | -8 Don't know |
| | | | | 42,882 | | | -1 Inapplicable |
| | | | | 387 | | | 1 Dentist or dental provider |
| | | | | 97,368 | | | 2 Medical doctor |
| | | | | 355 | | | 3 Audiologist |
| | | | | 5,375 | | | 4 Chiropractor |
| | | | | 267 | | | 5 Clinical Social Worker |
| | | | | 93 | | | 6 Dietician or nutritionist |
| | | | | 12 | | | 7 Hearing therapist |
| | | | | 66 | | | 8 Home health/health aide |
| | | | | 25 | | | 9 Homemaker |
| | | | | 155 | | | 10 Hospice worker |
| | | | | 30 | | | 11 I.V. Therapist |
| | | | | 1,332 | | | 12 Nurse (RN) |
| | | | | 282 | | | 13 Nurse Practitioner |
| | | | | 4 | | | 14 Nurse's aide |
| | | | | 392 | | | 15 Occupational Therapist (OT) |
| | | | | 2,500 | | | 16 Optometrist |
| | | | | 159 | | | 17 Osteopath (DO) |
| | | | | 83 | | | 18 Paramedic |
| | | | | 6,819 | | | 19 Physical Therapist (PT) |
| | | | | 189 | | | 20 Physician's Assistant |
| | | | | 3,145 | | | 21 Podiatrist (foot doctor) |
| | | | | 1,525 | | | 22 Psychologist |
| | | | | 105 | | | 23 Respiratory Therapist |
| | | | | 483 | | | 24 Social/case worker |
| | | | | 321 | | | 25 Speech Therapist |
| | | | | 506 | | | 26 Therapist (mental health) |
| | | | | 1,297 | | | 27 X-Ray Technician |
| | | | | 22 | | | 28 Licensed Practical Nurse (LPN) |
| | | | | 251 | | | 29 Acupuncturist |
| | | | | 22 | | | 30 Homeopath |
| | | | | 576 | | | 31 Massage therapist |
| | | | | 24 | | | 32 Naturopath |
| | | | | 4,456 | | | 91 Other medical provider |
| OMETYPE | 234 | 2 | OMETYPE | | | | N Type of other medical event |
| | | | | 158,504 | | | . Missing |
| | | | | 151,849 | | | -1 Inapplicable |
| | | | | 3,033 | | | 1 Eyeglasses |
| | | | | 1,028 | | | 2 Hearing or speech device |
| | | | | 2,317 | | | 3 Orthopedic |
| | | | | 6,077 | | | 4 Diabetic |
| | | | | 4,238 | | | 5 Ambulance |
| | | | | 250 | | | 6 Prosthesis |
| | | | | 308 | | | 7 Alteration |
| | | | | 5,709 | | | 8 Oxygen |
| | | | | 198 | | | 9 Kidney dialysis |
| | | | | 11,537 | | | 10 Other |

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|----------|-----|-----|----------|-----------|----------|----------|--------------------------------------|
| ORTHTYPE | 236 | 2 | ORTHTYPE | | | | N Type of orthopedic item |
| | | | | 172,456 | | | . Missing |
| | | | | 170,275 | | | -1 Inapplicable |
| | | | | 613 | | | 1 Braces or supports |
| | | | | 269 | | | 2 Cane |
| | | | | 298 | | | 3 Corrective shoes or inserts |
| | | | | 35 | | | 4 Crutches |
| | | | | 526 | | | 5 Walker |
| | | | | 380 | | | 6 Wheelchair |
| | | | | 84 | | | 7 Stockings |
| | | | | 112 | | | 91 Other |
| ALTRTYPE | 238 | 2 | ALTRTYPE | | | | N Type of alteration |
| | | | | 173,094 | | | . Missing |
| | | | | 171,646 | | | -1 Inapplicable |
| | | | | 32 | | | 1 Elevator or incline chair |
| | | | | 69 | | | 2 Handrails (other than tub) |
| | | | | 52 | | | 3 Ramps |
| | | | | 52 | | | 4 Tub handrails |
| | | | | 9 | | | 5 Tub seat |
| | | | | 12 | | | 6 Any car alteration |
| | | | | 82 | | | 91 Other |
| OTHRTYPE | 240 | 2 | OTHRTYPE | | | | N Type of other medical event |
| | | | | 168,413 | | | . Missing |
| | | | | 165,098 | | | -1 Inapplicable |
| | | | | 343 | | | 1 Portable or raised toilet |
| | | | | 113 | | | 2 Portable tub seat |
| | | | | 125 | | | 3 Special chair or cushion |
| | | | | 1,165 | | | 4 Hospital bed |
| | | | | 974 | | | 5 Ostomy supplies |
| | | | | 4,397 | | | 6 Depends (diapers) |
| | | | | 455 | | | 7 Bandages, dressings, tape supplies |
| | | | | 285 | | | 8 Pulmonary equipment |
| | | | | 58 | | | 9 Blood pressure equipment |
| | | | | 3,622 | | | 91 Other |
| HMO | 242 | 1 | \$HMO | | | | C Event provided by an HMO? |
| | | | | 307,378 | | | 0 Event not provided by HMO |
| | | | | 37,670 | | | 1 Event provided by HMO |