

02/24/06
Cost & Use
2003

MEDICARE CURRENT BENEFICIARY SURVEY
 Medical Provider Events

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
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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
				347,626			LOW-HIGH BASEID Count
EVNTNUM	14	4	\$EVNTNUM				C Unique event identifier
				173,121			C000-C999 Event created from claim
				174,505			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
				178,701			MP Medical provider
				43,512			OM Other medical expense
				0			OP Outpatient
				0			PM Prescribed medicine
				71,385			SD Separately billing physician
				54,028			SL Separately billing lab
OREVTYPE	20	2	\$EVNTTYP				C Original reported event type
				173,121			Missing
				0			DU Dental
				1,263			ER Emergency Room
				360			IP Inpatient
				0			IU Institutional utilization
				119,605			MP Medical provider
				22,261			OM Other medical expense
				3,286			OP Outpatient
				0			PM Prescribed medicine
				22,744			SD Separately billing physician
				4,986			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
				64,906			
				22,588			D DME claim
				260,132			P Physician claim
EVBEYY	30	2	\$EVENTYY				C Event begin year
				84			-8 Don't know
				31			-9 Not ascertained
				347,511			Year

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EVBEGMM	32	2	\$EVENTMM				C Event begin month
				1			-7 Refused
				691			-8 Don't know
				34			-9 Not ascertained
				0			95 Still in progress
				346,900			Month
EVBEGDD	34	2	\$EVENTDD				C Event begin day
				10			-7 Refused
				14,032			-8 Don't know
				36			-9 Not ascertained
				333,548			Day of month
SOURCE	36	1	\$SOURCE				C Source of event: survey, claim, or both?
				64,906			1 Survey only
				173,121			2 Claims only
				109,599			3 Both survey & claims
SITCODE	37	1	\$SITCODE				C Community or facility setting?
				267			B Both community & facility
				301,259			C Community
				9,006			D Deemed community
				29,200			F Facility
				1,705			G Deemed facility
				6,189			S SNF
AMTTOT	38	9					N Total payment
IMPATOT	47	1	IMPFLAG				N AMTTOT imputed in part or in total?
				241,796			0 Not imputed
				105,830			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?
				347,228			0 Not imputed
				398			1 Imputed
IMPACARE	76	1	IMPFLAG				N AMTCARE payment amount imputed?
				334,591			0 Not imputed
				13,035			1 Imputed
AMTCAID	77	9					N Amount paid by Medicaid
IMPSCAID	86	1	IMPFLAG				N AMTCAID payment source imputed?
				314,415			0 Not imputed
				33,211			1 Imputed

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IMPACAID	87	1	IMPFLAG				N AMTCAID payment amount imputed?
				282,572			0 Not imputed
				65,054			1 Imputed
AMTHMOM	88	9					N Amount paid by Medicare HMO
IMPSHMOM	97	1	IMPFLAG				N AMTHMOM payment source imputed?
				341,664			0 Not imputed
				5,962			1 Imputed
IMPAHMOM	98	1	IMPFLAG				N AMTHMOM payment amount imputed?
				338,273			0 Not imputed
				9,353			1 Imputed
AMTHMOP	99	9					N Amount paid by private HMO
IMPSHMOP	108	1	IMPFLAG				N AMTHMOP payment source imputed?
				340,680			0 Not imputed
				6,946			1 Imputed
IMPAHMOP	109	1	IMPFLAG				N AMTHMOP payment amount imputed?
				338,675			0 Not imputed
				8,951			1 Imputed
AMTVA	110	9					N Amount paid by Veterans Administration
IMPSVA	119	1	IMPFLAG				N AMTVA payment source imputed?
				347,567			0 Not imputed
				59			1 Imputed
IMPAVA	120	1	IMPFLAG				N AMTVA payment amount imputed?
				346,351			0 Not imputed
				1,275			1 Imputed
AMTPRVE	121	9					N Amt paid by employer-sponsored priv ins
IMPSPRVE	130	1	IMPFLAG				N AMTPRVE payment source imputed?
				310,895			0 Not imputed
				36,731			1 Imputed
IMPAPRVE	131	1	IMPFLAG				N AMTPRVE payment amount imputed?
				302,223			0 Not imputed
				45,403			1 Imputed
AMTPRVI	132	9					N Amt paid by individually-purch priv ins
IMPSPRVI	141	1	IMPFLAG				N AMTPRVI payment source imputed?
				315,442			0 Not imputed
				32,184			1 Imputed

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IMPAPRVI	142	1	IMPFLAG				N AMTPRVI payment amount imputed?
				308,198			0 Not imputed
				39,428			1 Imputed
AMTPRVU	143	9					N Amt paid by priv ins (unknown purchased)
IMPSPRVU	152	1	IMPFLAG				N AMTPRVU payment source imputed?
				343,419			0 Not imputed
				4,207			1 Imputed
IMPAPRVU	153	1	IMPFLAG				N AMTPRVU payment amount imputed?
				343,419			0 Not imputed
				4,207			1 Imputed
AMTOOP	154	9					N Amount paid out-of-pocket (OOP)
IMPSOOP	163	1	IMPFLAG				N AMTOOP payment source imputed?
				295,909			0 Not imputed
				51,717			1 Imputed
IMPAOOP	164	1	IMPFLAG				N AMTOOP payment amount imputed?
				275,628			0 Not imputed
				71,998			1 Imputed
AMTDISC	165	9					N Amount of uncollected SP liability
IMPSDISC	174	1	IMPFLAG				N AMTDISC payment source imputed?
				338,675			0 Not imputed
				8,951			1 Imputed
IMPADISC	175	1	IMPFLAG				N AMTDISC payment amount imputed?
				336,534			0 Not imputed
				11,092			1 Imputed
AMTOTH	176	9					N Amount paid by other payor(s)
IMPSOTH	185	1	IMPFLAG				N AMTOTH payment source imputed?
				345,766			0 Not imputed
				1,860			1 Imputed
IMPAOTH	186	1	IMPFLAG				N AMTOTH payment amount imputed?
				343,868			0 Not imputed
				3,758			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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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
PROVSPEC	232	2	PROVSPEC				N Medical provider specialty
				173,321			. Missing
				27			-9 Not ascertained
				404			-8 Don't know
				45,087			-1 Inapplicable
				461			1 Dentist or dental provider
				96,462			2 Medical doctor
				364			3 Audiologist
				5,391			4 Chiropractor
				338			5 Clinical Social Worker
				53			6 Dietician or nutritionist
				23			7 Hearing therapist
				66			8 Home health/health aide
				24			9 Homemaker
				159			10 Hospice worker
				167			11 I.V. Therapist
				1,428			12 Nurse (RN)
				297			13 Nurse Practitioner
				20			14 Nurse's aide
				275			15 Occupational Therapist (OT)
				2,562			16 Optometrist
				202			17 Osteopath (DO)
				91			18 Paramedic
				7,130			19 Physical Therapist (PT)
				250			20 Physician's Assistant
				2,972			21 Podiatrist (foot doctor)
				1,566			22 Psychologist
				136			23 Respiratory Therapist
				732			24 Social/case worker
				286			25 Speech Therapist
				742			26 Therapist (mental health)
				1,365			27 X-Ray Technician
				24			28 Licensed Practical Nurse (LPN)
				306			29 Acupuncturist
				28			30 Homeopath
				477			31 Massage therapist
				27			32 Naturopath
				76			33 Licensed Professional Counselor (LPC)
				4,287			91 Other medical provider
OMETYPE	234	2	OMETYPE				N Type of other medical event
				157,108			. Missing
				152,244			-1 Inapplicable
				2,980			1 Eyeglasses
				922			2 Hearing or speech device
				2,625			3 Orthopedic
				6,459			4 Diabetic
				4,852			5 Ambulance
				230			6 Prosthesis
				411			7 Alteration
				6,862			8 Oxygen
				33			9 Kidney dialysis
				12,900			10 Other

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
ORTHTYPE	236	2	ORTHTYPE				N Type of orthopedic item
				172,608			. Missing
				172,393			-1 Inapplicable
				693			1 Braces or supports
				266			2 Cane
				368			3 Corrective shoes or inserts
				39			4 Crutches
				536			5 Walker
				449			6 Wheelchair
				211			7 Stockings
				63			91 Other
ALTRTYPE	238	2	ALTRTYPE				N Type of alteration
				173,200			. Missing
				174,015			-1 Inapplicable
				19			1 Elevator or incline chair
				82			2 Handrails (other than tub)
				59			3 Ramps
				63			4 Tub handrails
				26			5 Tub seat
				8			6 Any car alteration
				154			91 Other
OTHRTYPE	240	2	OTHRTYPE				N Type of other medical event
				168,205			. Missing
				166,521			-1 Inapplicable
				395			1 Portable or raised toilet
				93			2 Portable tub seat
				143			3 Special chair or cushion
				1,147			4 Hospital bed
				1,103			5 Ostomy supplies
				4,972			6 Depends (diapers)
				643			7 Bandages, dressings, tape supplies
				320			8 Pulmonary equipment
				141			9 Blood pressure equipment
				3,943			91 Other
HMO	242	1	\$HMO				C Event provided by an HMO?
				311,768			0 Event not provided by HMO
				35,858			1 Event provided by HMO