| 02/04/05 | MEDICARE CURRENT BENEFICIARY SURVEY | RIC: SS |
| :---: | :---: | :---: |
| Cost \& Use | Service Summary | Page: |
| 2002 |  | Version: 1 |
| Variable Col Len Format | Frequency ComQues\# FacQues\# Variable Type \& Label |  |

The Service Summary file summarizes utilization and expenditure data by each of nine different types of service, with detail of expenditures for each by payer. Note that there are two sets of payment/expenditure variables, such as AAMTTOT and SAMTTOT. The series of variables beginning with s are payments during periods covered by interviews. Those beginning with A are payments during periods covered by interviews plus estimated payments for periods not covered by interviews, if any. There are nine records for each person in the sample.

| RIC | 1 | 2 | C Record Identification Code |
| :--- | :--- | :--- | :--- |
| VERSION | 3 | 1 | $C$ Version Number |
| BASEID | 4 | 8 | \$BSIDFMT |


AAMTTOT 1510 MONYFMT

114,273

| AAMTCARE 2510 MONYFMT |  |  |
| :--- | :--- | :--- |
|  |  |  |
|  | 114,273 |  |


| AAMTCAID 3510 MONYFMT |  |  |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |


| AAMTHMOM | 45 | 10 | MONYFMT |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  | 114,273 |
| AAMTHMOP | 55 | 10 | MONYFMT |  |

$$
114,273
$$

AAMTVA 6510 MONYFMT

114, 273

AAMTPRVE 7510 MONYFMT
114, 273
AAMTPRVI 8510 MONYFMT
114, 273

LOW-HIGH BASEID Count
C Type of event
DU Dental
FA Facility
HH Home health
HP Hospice
IP Inpatient
IU Institutional utilization
MP Medical provider
OP Outpatient
PM Prescribed medicine

N Adj. sum: total payments, all sources

Amount as $\$ \$ \$ \$ \$ . C C$

N Adj. sum: Medicare payments
Amount as $\$ \$ \$ \$ \$ . C C$
N Adj. sum: Medicaid payments
Amount as $\$ \$ \$ \$ \$ . C C$
N Adj. sum: Medicare HMO payments
Amount as $\$ \$ \$ \$ \$ . C C$
N Adj. sum: private HMO payments
Amount as $\$ \$ \$ \$ \$ . C C$

N Adj. sum: VA payments
Amount as $\$ \$ \$ \$ \$ . C C$

N Adj. sum: empl.-sponsored ins. payments

Amount as \$\$\$\$\$.CC
N Adj. sum: indiv-purch ins. payments
Amount as $\$ \$ \$ \$ \$ . C C$

| 02/04/05 |  |  | MEDICARE CURRENT BENEFICIARY Service Summary | SURVEY |
| :---: | :---: | :---: | :---: | :---: |
| Cost \& Us |  |  |  |  |
| 2002 |  |  |  |  |
| Variable | Col Len | Format | Frequency ComQues\# FacQues\# | Variable Type \& Label |
| AAMTPRVU | 9510 | MONYFMT |  | N Adj. sum: unknown priv ins. payments |
|  |  |  | 114, 273 | Amount as \$\$\$\$\$.CC |
| AAMTOOP | 10510 | MONYFMT |  | N Adj. sum: out-of-pocket payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| AAMTDISC | 11510 | MONYFMT |  | N Adj. sum: uncollected liability |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| AAMTOTH | 12510 | MONYFMT |  | N Adj. sum: other payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| AEVENTS | 1354 |  |  | $N$ Adjusted count of events |
| SAMTTOT | 13910 | MONYFMT |  | N Unadj. sum: total payments, all sources |
|  |  |  | 114,273 | Amount as \$\$\$\$\$ . CC |
| SAMTCARE | 14910 | MONYFMT |  | N Unadj. sum: Medicare payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$ . CC |
| SAMTCAID | 15910 | MONYFMT |  | N Unadj. sum: Medicaid payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$. CC |
| SAMTHMOM | 16910 | MONYFMT |  | N Unadj. sum: Medicare HMO payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$. CC |
| SAMTHMOP | 17910 | MONYFMT |  | N Unadj. sum: private HMO payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$. CC |
| SAMTVA | 18910 | MONYFMT |  | N Unadj. sum: VA payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| SAMTPRVE | 19910 | MONYFMT |  | N Unadj. sum: empl.-sponsored ins payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$ . CC |
| SAMTPRVI | 20910 | MONYFMT |  | N Unadj. sum: indiv-purch ins. payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| SAMTPRVU | 21910 | MONYFMT |  | N Unadj. sum: unknown priv ins. payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| SAMTOOP | 22910 | MONYFMT |  | N Unadj. sum: out-of-pocket payments |
|  |  |  | 114,273 | Amount as \$\$\$\$\$.CC |
| SAMTDISC | 23910 | MONYFMT |  | N Unadj. sum: uncollected liability |
|  |  |  | 114,273 | Amount as \$\$\$\$\$\$.CC |



