

START\_22 Col. 8827 Character 4

Set Start Time

| Freq | Value | Label      |
|------|-------|------------|
| 1035 | -     | Time: HHMM |

AMN\_WHO1 Col. 8831 Character 1

Respondent's relationship to sample person.

| Freq | Value | Label                                       |
|------|-------|---|
| 618  | 1     | Staff member-Specify below in AMN_WHO2      |
| 45   | 2     | Spouse                                      |
| 180  | 3     | Son/Daughter                                |
| 89   | 4     | Other relative-Specify below in AMN_WHO2    |
| 59   | 5     | Other Nonrelative-Specify below in AMN_WHO2 |

AMN\_1\_I1 Col. 8832 Character 2

1 I'd like to ask some questions about admission and payment for room, board and nursing care. In what month and year was ... most recently admitted to this institution?

| Freq | Value | Label             |
|------|-------|-------------------|
| 79   | 01    | January           |
| 66   | 02    | February          |
| 87   | 03    | March             |
| 92   | 04    | April             |
| 81   | 05    | May               |
| 83   | 06    | June              |
| 107  | 07    | July              |
| 88   | 08    | August            |
| 87   | 09    | September         |
| 84   | 10    | October           |
| 64   | 11    | November          |
| 60   | 12    | December          |
| 38   | D     | Don't Know        |
| 13   | R     | Refused to Answer |

AMN\_1\_I2 Col. 8834 Character 2

| Freq | Value | Label |
|------|-------|-------|
| 1    | <75   | Year  |
| 183  | 75-94 | Year  |
| 65   | 95    | Year  |
| 97   | 96    | Year  |
| 163  | 97    | Year  |
| 203  | 98    | Year  |

|     |    |                   |
|-----|----|-------------------|
| 291 | 99 | Year              |
| 13  | D  | Don't Know        |
| 13  | R  | Refused to Answer |

AMN\_2\_1 Col. 8836 Character 2

2 Look at Flashcard S. Just before ... was admitted to this institution, what type of place was ... living in?

| Freq | Value | Label   |
|------|-------|---|
| 488  | 1     | Alone or living with others in a house/apartment (independent living)         |
| 31   | 2     | Retirement home   |
| 2    | 3     | Boarding house/rooming house/rented room                                      |
| 3    | 4     | Foster or family care home  |
| 12   | 5     | Group home or community residential facility                                  |
| 71   | 6     | In assisted living setting with board and/or personal care services available |
| 143  | 7     | Hospital, other than SNF or ICF unit  |
| 176  | 8     | Skilled Nursing Facility (SNF)  |
| 17   | 9     | Intermediate Care Facility (ICF)  |
| 6    | 10    | Other (non-certified) nursing home  |
| 7    | 11    | Domiciliary or personal care facility   |
| 4    | 12    | Institution/facility for the mentally retarded/developmentally disabled       |
| 7    | 13    | Mental health center/facility   |
| 7    | 14    | Chronic disease or rehabilitation hospital                                    |
| 29   | 15    | Other-Specify below in AMN_2_2  |
| 19   | D     | Don't Know  |
| 7    | R     | Refused to Answer   |

3. Not counting this time, in the last four years, how many times has ... been a patient in...

AMN\_3A Col. 8838 Character 2

a ...a nursing or convalescent home?

| Freq | Value | Label             |
|------|-------|-------------------|
| 628  | 00    | Time(s)           |
| 216  | 01    | Time(s)           |
| 65   | 02    | Time(s)           |
| 17   | 03    | Time(s)           |
| 5    | 04    | Time(s)           |
| 4    | 05    | Time(s)           |
| 1    | 06    | Time(s)           |
| 1    | 07    | Time(s)           |
| 1    | 10    | Time(s)           |
| 1    | 36    | Time(s)           |
| 1    | 99    | Time(s)           |
| 75   | D     | Don't Know        |
| 13   | R     | Refused to Answer |

## AMN\_3B11 Col. 8840 Character 2

b1 When was ... admitted that time/the last time?

| Freq | Value | Label             |
|------|-------|-------------------|
| 22   | 01    | January           |
| 19   | 02    | February          |
| 22   | 03    | March             |
| 26   | 04    | April             |
| 21   | 05    | May               |
| 21   | 06    | June              |
| 20   | 07    | July              |
| 22   | 08    | August            |
| 17   | 09    | September         |
| 26   | 10    | October           |
| 13   | 11    | November          |
| 19   | 12    | December          |
| 62   | D     | Don't Know        |
| 2    | R     | Refused to Answer |

## AMN\_3B12 Col. 8842 Character 2

| Freq | Value | Label             |
|------|-------|-------------------|
| 56   | 19-94 | Year              |
| 18   | 95    | Year              |
| 32   | 96    | Year              |
| 49   | 97    | Year              |
| 47   | 98    | Year              |
| 67   | 99    | Year              |
| 41   | D     | Don't Know        |
| 2    | R     | Refused to Answer |

## AMN\_3B21 Col. 8844 Character 2

b2 time before that?

| Freq | Value | Label    |
|------|-------|----------|
| 6    | 01    | January  |
| 5    | 02    | February |
| 5    | 03    | March    |
| 7    | 04    | April    |
| 5    | 05    | May      |
| 8    | 06    | June     |
| 7    | 07    | July     |
| 5    | 08    | August   |
| 6    | 10    | October  |

|    |    |                   |
|----|----|-------------------|
| 4  | 11 | November          |
| 6  | 12 | December          |
| 31 | D  | Don't Know        |
| 1  | R  | Refused to Answer |

AMN\_3B22 Col. 8846 Character 2

| Freq | Value | Label             |
|------|-------|-------------------|
| 14   | 19-94 | Year              |
| 4    | 95    | Year              |
| 9    | 96    | Year              |
| 12   | 97    | Year              |
| 15   | 98    | Year              |
| 14   | 99    | Year              |
| 27   | D     | Don't Know        |
| 1    | R     | Refused to Answer |

AMN\_3B31 Col. 8848 Character 2

b3 and the time before that?

| Freq | Value | Label             |
|------|-------|-------------------|
| 5    | 02    | February          |
| 2    | 03    | March             |
| 1    | 05    | May               |
| 2    | 07    | July              |
| 4    | 08    | August            |
| 1    | 10    | October           |
| 1    | 12    | December          |
| 14   | D     | Don't Know        |
| 1    | R     | Refused to Answer |

AMN\_3B32 Col. 8850 Character 2

| Freq | Value | Label             |
|------|-------|-------------------|
| 1    | 90    | Year              |
| 1    | 91    | Year              |
| 3    | 95    | Year              |
| 2    | 96    | Year              |
| 6    | 97    | Year              |
| 3    | 99    | Year              |
| 14   | D     | Don't Know        |
| 1    | R     | Refused to Answer |

AMN\_3B41 Col. 8852 Character 2

b4 and the time before that?

| Freq | Value | Label             |
|------|-------|-------------------|
| 1    | 01    | January           |
| 2    | 02    | February          |
| 1    | 06    | June              |
| 2    | 10    | October           |
| 7    | D     | Don't Know        |
| 1    | R     | Refused to Answer |

AMN\_3B42 Col. 8854 Character 2

| Freq | Value | Label             |
|------|-------|-------------------|
| 1    | 91    | Year              |
| 2    | 96    | Year              |
| 3    | 97    | Year              |
| 1    | 98    | Year              |
| 6    | D     | Don't Know        |
| 1    | R     | Refused to Answer |

4. In the last 12 months has ... been a patient in...

AMN\_4A Col. 8856 Character 1

4a ...a hospital overnight or longer?

| Freq | Value | Label             |
|------|-------|-------------------|
| 393  | 1     | Yes               |
| 594  | 2     | No                |
| 30   | D     | Don't Know        |
| 11   | R     | Refused to Answer |

AMN\_4B Col. 8857 Character 2

b How many times?

| Freq | Value | Label      |
|------|-------|------------|
| 2    | 00    | Time(s)    |
| 259  | 01    | Time(s)    |
| 73   | 02    | Time(s)    |
| 27   | 03    | Time(s)    |
| 9    | 04    | Time(s)    |
| 3    | 05    | Time(s)    |
| 2    | 06    | Time(s)    |
| 1    | 07    | Time(s)    |
| 1    | 08    | Time(s)    |
| 1    | 10    | Time(s)    |
| 15   | D     | Don't Know |

## AMN\_4C11 Col. 8859 Character 2

c1 When was ... admitted that time/the last time?

| Freq | Value | Label      |
|------|-------|------------|
| 19   | 01    | January    |
| 27   | 02    | February   |
| 32   | 03    | March      |
| 32   | 04    | April      |
| 19   | 05    | May        |
| 30   | 06    | June       |
| 29   | 07    | July       |
| 64   | 08    | August     |
| 44   | 09    | September  |
| 20   | 10    | October    |
| 26   | 11    | November   |
| 15   | 12    | December   |
| 19   | D     | Don't Know |

## AMN\_4C12 Col. 8861 Character 2

| Freq | Value | Label      |
|------|-------|------------|
| 1    | 94    | Year       |
| 1    | 95    | Year       |
| 2    | 97    | Year       |
| 53   | 98    | Year       |
| 307  | 99    | Year       |
| 12   | D     | Don't Know |

## AMN\_4C21 Col. 8863 Character 2

c2 time before that?

| Freq | Value | Label      |
|------|-------|------------|
| 10   | 01    | January    |
| 11   | 02    | February   |
| 7    | 03    | March      |
| 8    | 04    | April      |
| 13   | 05    | May        |
| 8    | 06    | June       |
| 9    | 07    | July       |
| 13   | 08    | August     |
| 6    | 09    | September  |
| 4    | 10    | October    |
| 6    | 11    | November   |
| 3    | 12    | December   |
| 19   | D     | Don't Know |

AMN\_4C22 Col. 8865 Character 2

| Freq | Value | Label      |
|------|-------|------------|
| 4    | 97    | Year       |
| 22   | 98    | Year       |
| 81   | 99    | Year       |
| 10   | D     | Don't Know |

AMN\_4C31 Col. 8867 Character 2

c3 and the time before that?

| Freq | Value | Label      |
|------|-------|------------|
| 2    | 01    | January    |
| 3    | 02    | February   |
| 3    | 03    | March      |
| 2    | 04    | April      |
| 3    | 05    | May        |
| 5    | 06    | June       |
| 4    | 07    | July       |
| 2    | 08    | August     |
| 1    | 10    | October    |
| 4    | 11    | November   |
| 1    | 12    | December   |
| 14   | D     | Don't Know |

AMN\_4C32 Col. 8869 Character 2

| Freq | Value | Label      |
|------|-------|------------|
| 1    | 97    | Year       |
| 9    | 98    | Year       |
| 25   | 99    | Year       |
| 9    | D     | Don't Know |

5. At the time of admission to the current institution, that is, [date of current admission], who was...

AMN\_5A01 Col. 8871 Character 1

5a1 ...paying for ...'s room, board and nursing care? Sample person (including Social Security)?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 431  | X     | Marked, blank otherwise |

AMN\_5A02 Col. 8872 Character 1

5a2 ...paying for ...'s room, board and nursing care? Spouse?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 30   | X     | Marked, blank otherwise |

AMN\_5A03 Col. 8873 Character 1

5a3 ...paying for ...'s room, board and nursing care? Children?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 71   | X     | Marked, blank otherwise |

AMN\_5A04 Col. 8874 Character 1

5a4 ...paying for ...'s room, board and nursing care? Other Relatives?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 26   | X     | Marked, blank otherwise |

AMN\_5A05 Col. 8875 Character 1

5a5 ...paying for ...'s room, board and nursing care? Nonrelatives?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 2    | X     | Marked, blank otherwise |

AMN\_5A06 Col. 8876 Character 1

5a6 ...paying for ...'s room, board and nursing care? Private Insurance?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 117  | X     | Marked, blank otherwise |

AMN\_5A07 Col. 8877 Character 1

5a7 ...paying for ...'s room, board and nursing care? Medicare?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 392  | X     | Marked, blank otherwise |

AMN\_5A08 Col. 8878 Character 1

5a8 ...paying for ...'s room, board and nursing care? Medicaid?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 381  | X     | Marked, blank otherwise |

AMN\_5A09 Col. 8879 Character 1

5a9 ...paying for ...'s room, board and nursing care? Other Public Assistance?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 8    | X     | Marked, blank otherwise |



## AMN\_5A10 Col. 8880 Character 1

5a10 ...paying for ...'s room, board and nursing care? VA, CHAMPUS, CHAMPVA?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 16   | X     | Marked, blank otherwise |

## AMN\_5A11 Col. 8881 Character 1

5a11 ...paying for ...'s room, board and nursing care? Other-Specify?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 56   | X     | Marked, blank otherwise |

## AMN\_5B Col. 8882 Character 5

5b How much was the cost per month?

| Freq | Value   | Label             |
|------|---------|-------------------|
| 686  | 0-10000 | Dollars           |
| 298  | D       | Don't Know        |
| 43   | R       | Refused to Answer |

## AMN\_CK4 Col. 8887 Character 2

Refer to AMN\_5A01-AMN\_5A11 above. How many payers are marked in 5a?

| Freq | Value | Label      |
|------|-------|------------|
| 36   | 00    | 0 response |
| 581  | 01    | Payer      |
| 309  | 02    | Payers     |
| 91   | 03    | Payers     |
| 12   | 04    | Payers     |
| 2    | 05    | Payers     |

## AMN\_5C Col. 8889 Character 2

c Who paid the most?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 84   | 1     | Sample Person           |
| 3    | 2     | Spouse                  |
| 8    | 3     | Children                |
| 3    | 4     | Other Relatives         |
| 11   | 6     | Private Insurance       |
| 115  | 7     | Medicare                |
| 126  | 8     | Medicaid                |
| 2    | 9     | Other Public Assistance |
| 3    | 10    | VA, CHAMPUS, CHAMPVA    |

|    |    |                   |
|----|----|-------------------|
| 9  | 11 | Other             |
| 56 | D  | Don't Know        |
| 18 | R  | Refused to Answer |

AMN\_CK5 Col. 8891 Character 1

Refer to date of current admission in question 1 above. Was ... admitted in the current date and month?

| Freq | Value | Label       |
|------|-------|-------------|
| 1031 | 2     | Not Current |

6. Who is paying for ...'s room, board, and nursing care now?

AMN\_6A01 Col. 8892 Character 1

a.1 Is Sample person (including Social Security) paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 446  | X     | Marked, blank otherwise |

AMN\_6A02 Col. 8893 Character 1

a.2 Is Spouse paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 25   | X     | Marked, blank otherwise |

AMN\_6A03 Col. 8894 Character 1

a.3 Are Children paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 62   | X     | Marked, blank otherwise |

AMN\_6A04 Col. 8895 Character 1

a.4 Are Other Relatives paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 13   | X     | Marked, blank otherwise |

AMN\_6A05 Col. 8896 Character 1

a.5 Are Nonrelatives paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 3    | X     | Marked, blank otherwise |

AMN\_6A06 Col. 8897 Character 1

a.6 Is Private Insurance paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 68   | X     | Marked, blank otherwise |

AMN\_6A07 Col. 8898 Character 1

a.7 Is Medicare paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 262  | X     | Marked, blank otherwise |

AMN\_6A08 Col. 8899 Character 1

a.8 Is Medicaid paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 544  | X     | Marked, blank otherwise |

AMN\_6A09 Col. 8900 Character 1

a.9 Is Other Public Assistance paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 14   | X     | Marked, blank otherwise |

AMN\_6A10 Col. 8901 Character 1

a.10 Is VA, CHAMPUS, CHAMPVA paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 12   | X     | Marked, blank otherwise |

AMN\_6A11 Col. 8902 Character 1

a.11 Is Other-Specify paying?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 51   | X     | Marked, blank otherwise |

AMN\_6B Col. 8903 Character 5

6b What is the cost per month?

| Freq | Value     | Label             |
|------|-----------|-------------------|
| 750  | 0-2000    | Dollars           |
| 1    | 2001-3000 | Dollars           |
| 231  | D         | Don't Know        |
| 44   | R         | Refused to Answer |

## AMN\_6A15 Col. 8908 Character 2

Refer to AMN\_6A01-AMN\_6A11 above. How many payers are marked in 6a?

| Freq | Value | Label  |
|------|-------|--------|
| 435  | 2-12  | Payers |
| 594  | 1     | Payer  |

## AMN\_6C Col. 8910 Character 2

c Who pays the most?

| Freq | Value | Label                   |
|------|-------|-------------------------|
| 67   | 1     | Sample Person           |
| 5    | 2     | Spouse                  |
| 5    | 3     | Children                |
| 1    | 4     | Other Relatives         |
| 9    | 6     | Private Insurance       |
| 73   | 7     | Medicare                |
| 184  | 8     | Medicaid                |
| 4    | 9     | Other Public Assistance |
| 1    | 10    | VA, CHAMPUS, CHAMPVA    |
| 5    | 11    | Other                   |
| 50   | D     | Don't Know              |
| 18   | R     | Refused to Answer       |

## AMN\_CK6 Col. 8912 Character 1

Refer to AMN\_5A08 in question 5a above. Did Medicaid pay?

| Freq | Value | Label |
|------|-------|-------|
| 381  | 1     | Yes   |
| 648  | 2     | No    |

## AMN\_CK7 Col. 8913 Character 1

Refer to AMN\_6A08 in question 6a above. Did Medicaid pay?

| Freq | Value | Label |
|------|-------|-------|
| 177  | 1     | Yes   |
| 474  | 2     | No    |

## AMN\_7\_M1 Col. 8914 Character 2

7 In what month and year did Medicaid begin paying these charges?

| Freq | Value | Label    |
|------|-------|----------|
| 14   | 01    | January  |
| 10   | 02    | February |
| 13   | 03    | March    |

|    |    |            |
|----|----|------------|
| 11 | 04 | April      |
| 14 | 05 | May        |
| 11 | 06 | June       |
| 11 | 07 | July       |
| 15 | 08 | August     |
| 10 | 09 | September  |
| 11 | 10 | October    |
| 7  | 11 | November   |
| 11 | 12 | December   |
| 37 | D  | Don't Know |

AMN\_7\_M2 Col. 8916 Character 2

| Freq | Value | Label      |
|------|-------|------------|
| 23   | 75-94 | Year       |
| 5    | 95    | Year       |
| 16   | 96    | Year       |
| 28   | 97    | Year       |
| 28   | 98    | Year       |
| 47   | 99    | Year       |
| 28   | D     | Don't Know |

AMN\_9 Col. 8918 Character 1

9 Now I'd like to ask you about any health insurance which ... has. Is ... covered by any public assistance programs, other than Medicaid, that pays for health or long-term care?

| Freq | Value | Label             |
|------|-------|-------------------|
| 105  | 1     | Yes               |
| 868  | 2     | No                |
| 41   | D     | Don't Know        |
| 12   | R     | Refused to Answer |

AMN\_10 Col. 8919 Character 1

10 Is ... NOW covered by CHAMPUS or CHAMPVA, or some other military health care? (These are programs that provide medical insurance for dependents or survivors of military personnel and disabled veterans.)

| Freq | Value | Label             |
|------|-------|-------------------|
| 10   | 1     | Yes               |
| 976  | 2     | No                |
| 27   | D     | Don't Know        |
| 13   | R     | Refused to Answer |

AMN\_11 Col. 8920 Character 1

11 Is ... NOW covered by a private health insurance plan which pays any part of a hospital, doctor's, surgeon's or long-term care bill?

| Freq | Value | Label             |
|------|-------|-------------------|
| 351  | 1     | Yes               |
| 606  | 2     | No                |
| 54   | D     | Don't Know        |
| 15   | R     | Refused to Answer |

12. What is the name of the person...

AMN\_12B Col. 8921 Character 1

b What is the relationship of this person to ...?

| Freq | Value | Label                |
|------|-------|----------------------|
| 65   | 1     | Spouse               |
| 534  | 2     | Son/Daughter         |
| 216  | 3     | Other relative       |
| 45   | 4     | Nonrelative guardian |
| 148  | 5     | Other nonrelative    |
| 11   | D     | Don't Know           |
| 7    | R     | Refused to Answer    |

END\_TI22 Col. 8922 Character 4

Set end time

| Freq | Value | Label      |
|------|-------|------------|
| 1029 | -     | Time: HHMM |

CUML\_T22 Col. 8926 Character 4

Subtract AMN start time from AMN end time

| Freq | Value | Label      |
|------|-------|------------|
| 1028 | -     | Time: HHMM |