QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
Frame	STARTMODE	Data collection mode	C (CATI)	All	Total number of eligible Adult day
			M (Mail)		services centers= 2,763
			W (Web)		(Weighted= 4,800)
Frame	CASEID	Case ID	AAK00001- AWY00008	All	
		Background Inform	ation		
1a	LICENSED	Is this adult day services center licensed or certified by the State	1 = Yes	All	
		specifically to provide adult day services?	2 = No		
			-9 = Not ascertained		
1b	MEDICAID	Is this adult day services center authorized or otherwise set up to	1 = Yes	All	
		participate in Medicaid?	2 = No		
			-9 = Not ascertained		
2	AVGPART	Based on a typical week, what is the approximate average daily	(1 - 600)	All	
		attendance at this adult day services center at this location? If none, enter "0."	-9 = Not ascertained		
3	TOTPART	What is the total number of participants currently enrolled at this	(1 - 922)	All	
3	TOTFAKT	adult day services center at this location? If none, enter "0."	-9 = Not ascertained	All	
4	MAXPART	What is the maximum number of participants allowed at this adult	(0 - 530)	All	
		day services center at this location? This may be called the	-9 = Not ascertained		
		allowable daily capacity and is usually determined by law or by fire			
		code, but may also be a program decision. If none, enter "0."			
5	OWNERSHP	What is the type of ownership of this adult day services center?	1 = Private, nonprofit	All	
			2 = Private, for profit		
			3 = Publicly traded company or limited	1	
			4 = Government—federal, state, county or	1	
			local government		
			-9 = Not ascertained	1	
5	OWNERSHPRC	What is the type of ownership of this adult day services center?	1 = Private, nonprofit	All	Used frame information to recode
[IMPUTED]			2 = Private, for profit		22 cases with missing data. This
			3 = Publicly traded company or limited	1	variable used for DBs.
			4 = Government—federal, state, county or	-	
			local government		
			-9 = Not ascertained	1	
6	CHAIN	Is this center owned by a person, group, or organization that owns	1 = Yes	All	
	CHAIN	or manages two or more adult day services centers? This may	2 = No		
		include a corporate chain.	-9 = Not ascertained	1	
		include a corporate chain.	5 - Not ascertained		

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
7	MEDPAID	During the last 30 days, for how many of the participants currently enrolled at this adult day services center, did Medicaid pay for some	(0 - 720)	MEDICAID=1	
		or all of their services received at this center? If none, enter "0."	-1= Legitimate skip		
			-9 = Not ascertained		
8	ADSCYEAR	CYEAR What is the total number of years this center has been operating as 1:		All	
		an adult day services center at this location?	2 = 1 to 4 years		
			3 = 5 to 9 years		
			4 = 10 to 19 years		
			5 = 20 or more years		
			-9 = Not ascertained		
9a	REVMCAID	Of this center's revenue from paid participant fees, about what	(0 - 100)	All	
		percentage comes from each of the following sources? Your entries should add up to 100%.  a. Medicaid	-9 = Not ascertained		
0	DEL MACALIDAD		(0. 400)	All	A. Ikin In incombation for mission
9a [IMPUTED]	REVMCAIDRC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  a. Medicaid	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevmcaid_1 imprevmcaid_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9a [IMPUTED]	REVMCAIDRC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  a. Medicaid	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevmcaid2_1 - imprevmcaid2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9b	REVMCARE	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  b. Medicare	(0 - 100) -9 = Not ascertained	All	

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER		Q-1011011 12111		ASKED/ RECODEED	7.5511161.01.1161.126
9b [IMPUTED]	REVMCARERC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  b. Medicare	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevmcare_1 - imprevmcare_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9b [IMPUTED]	REVMCARERC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  b. Medicare	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevmcare2_1 - imprevmcare2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9c	REVGOV	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  c. Other government	(0 - 100) -9 = Not ascertained	All	
9c [IMPUTED]	REVGOVRC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%. c. Other government	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevgov_1 - imprevgov_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
9c [IMPUTED]	REVGOVRC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  c. Other government	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevgov2_1-imprevgov2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9d	REVSELF	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  d. Out-of-pocket payment by the participant or family	(0 - 100) -9 = Not ascertained	All	
9d [IMPUTED]	REVSELFRC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  d. Out-of-pocket payment by the participant or family	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevself_1 - imprevself_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9d [IMPUTED]	REVSELFRC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  d. Out-of-pocket payment by the participant or family	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevself2_1 - imprevself2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
9e	REVINSUR	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  e. Private insurance	(0 - 100) -9 = Not ascertained	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
9e [IMPUTED]	REVINSURRC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  e. Private insurance	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevinsur_1 - imprevinsur_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%.
9e [IMPUTED]	REVINSURRC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  e. Private insurance	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevinsur2_1 - imprevinsur2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%.
9f	REVOTHSO	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  f. Other source	(0 - 100) -9 = Not ascertained	All	
9f [IMPUTED]	REVOTHSORC	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  f. Other source	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevothso_1 - imprevothso_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.

VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
REVOTHSORC2	Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  f. Other source	(0 - 100)	All	Multiple imputation for missing data; imputed values for missing data are provided (imprevothso2_1 - imprevothso2_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to add to 100%. Refer to Data Description and Usage (ReadMe) for imputation class variables.
DEPSCRN1	As a part of the admission process, does this adult day services	1 = Yes	All	
	center	2 = No		
	a. screen participants for depression with a standardized tool or scale?	-9 = Not ascertained		
DEPSCRN2	As a part of the admission process, does this adult day services	1 = Yes	All	
	center	2 = No		
	b. accept results from depression screenings performed by other health care providers?	-9 = Not ascertained		
ALZPRG	Disease-specific programs may include one or more of the following	1 = Yes	All	
	services—education, physical activity, diet/nutrition, medication	2 = No		
	management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  a.Alzheimer's disease and other dementias	-9 = Not ascertained		
CADIOPRG	Disease-specific programs may include one or more of the following	1 = Yes	All	
	services—education, physical activity, diet/nutrition, medication	2 = No		
	management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?	-9 = Not ascertained		
	b.Cardiovascular disease (e.g., heart disease, stroke, high blood pressure)			
	REVOTHSORC2  DEPSCRN1  DEPSCRN2  ALZPRG	DEPSCRN1 As a part of the admission process, does this adult day services center a. screen participants for depression with a standardized tool or scale?  DEPSCRN2 As a part of the admission process, does this adult day services center b. accept results from depression screenings performed by other health care providers?  ALZPRG Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  CADIOPRG Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  b. Cardiovascular disease (e.g., heart disease, stroke, high blood	REVOTHSORC2  Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  f. Other source  As a part of the admission process, does this adult day services center a. screen participants for depression with a standardized tool or scale?  DEPSCRN2  As a part of the admission process, does this adult day services center b. accept results from depression screenings performed by other health care providers?  ALZPRG  Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  a.Alzheimer's disease and other dementias  CADIOPRG  Disease-specific programs may include one or more of the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following services—education, physical activity, diet/nutrition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  b. Cardiovascular disease (e.g., heart disease, stroke, high blood	ASKED/RECODEED  REVOTHSORC2  Of this center's revenue from paid participant fees, about what percentage comes from each of the following sources? Your entries should add up to 100%.  f. Other source  As a part of the admission process, does this adult day services center a. screen participants for depression with a standardized tool or scale?  DEPSCRN2  As a part of the admission process, does this adult day services center b. accept results from depression screenings performed by other health care providers?  ALZPRG  Disease-specific programs may include one or more of the following services-education, physical activity, diet/hurtition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  a.Alzheimer's disease and other dementias  All services-education, physical activity, diet/hurtition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  a.Alzheimer's disease and other dementias  All services-education, physical activity, diet/hurtition, medication management, or weight management. Does this adult day services center offer any disease-specific programs for participants with the following conditions?  b.Cardiovascular disease (e.g., heart disease, stroke, high blood

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QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER 11c	DEPPRG	Disease-specific programs may include one or more of the following	1 - Vos	ASKED/ RECODEED	
110	DEPPRO	services—education, physical activity, diet/nutrition, medication	2 = No	- All	
		management, or weight management. Does this adult day services			
		center offer any disease-specific programs for participants with the	-9 = Not ascertained		
		following conditions?			
		Tollowing conditions.			
		c.Depression			
		'			
11d	DIABPRG	Disease-specific programs may include one or more of the following		All	
		services—education, physical activity, diet/nutrition, medication	2 = No		
		management, or weight management. Does this adult day services	-9 = Not ascertained		
		center offer any disease-specific programs for participants with the			
		following conditions?			
		d.Diabetes			
		u.Diabetes			
		Services Offere	d		
12a	SERVDENT	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]		service by	2= Referral only		given service by paid center
			3= Not provided/ None of these apply		employee, arranging for and paying outside vendors or
		a.Routine and emergency dental services by a licensed dentist	-9 = Not ascertained		arranging for outside vendors paid
					by others.
12a.1	SERVDENT1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Paid center employees	-9 = Not ascertained		
		a.Routine and emergency dental services by a licensed dentist	The about tames		
12a.2	SERVDENT2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors	-9 = Not ascertained		
		a. Routine and emergency dental services by a licensed dentist			

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12a.3	SERVDENT3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others	-9 = Not ascertained		
		a.Routine and emergency dental services by a licensed dentist			
12a.4	SERVDENT4	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Referral	-9 = Not ascertained		
		a.Routine and emergency dental services by a licensed dentist	3 – Not ascertained		
12a.5	SERVDENT5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED	-9 = Not ascertained		
		a.Routine and emergency dental services by a licensed dentist			
12b	SERVHOSP	For each row, mark if this adult day services center provides the	1= Provided	_	'Provided' refers to providing a given service by paid center employee, arranging for and paying outside vendors or
[DERIVED]		service by	2= Referral only		
			3= Not provided/ None of these apply		
		b. Hospice services	-9 = Not ascertained		arranging for outside vendors paid by others.
12b.1	SERVHOSP1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by * Paid center employees	2 = No		
		b. Hospice services	-9 = Not ascertained		
12b.2	SERVHOSP2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors b. Hospice services	-9 = Not ascertained		
12b.3	SERVHOSP3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others b. Hospice services	-9 = Not ascertained		

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER	VARIABLE IVAIVIE	QUESTION TEXT	CODE CATEGORIES	ASKED/ RECODEED	ADDITIONAL NOTES
12b.4	SERVHOSP4	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Referral	-9 = Not ascertained		
		b. Hospice services			
12b.5	SERVHOSP5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by  * NONE OF THESE APPLY / NOT PROVIDED	2 = No -9 = Not ascertained		
		b. Hospice services	-9 = Not ascertained		
12c	SERVSOCW	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]	SERVSOCVV	service by	2= Referral only		given service by paid center
		, '	3= Not provided/ None of these apply		employee, arranging for and
		c. Social work services—provided by licensed social workers or	-9 = Not ascertained		paying outside vendors or arranging for outside vendors paid
		persons with a bachelor's or master's degree in social work, and			by others.
		include an array of services such as psychosocial assessment, individual or group counseling, and referral services			
		individual of group counseling, and referral services			
12c.1	SERVSOCW1	For each row, mark if this adult day services center provides the	1 = Yes	All	
12012	525551	service by	2 = No		
		* Paid center employees	-9 = Not ascertained		
		c. Social work services—provided by licensed social workers or			
		persons with a bachelor's or master's degree in social work, and			
		include an array of services such as psychosocial assessment, individual or group counseling, and referral services			
		individual of group counseling, and referral services			
12c.2	SERVSOCW2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by  * Arranging for and paying outside vendors	2 = No		
		c. Social work services—provided by licensed social workers or	-9 = Not ascertained		
		persons with a bachelor's or master's degree in social work, and			
		include an array of services such as psychosocial assessment,			
		individual or group counseling, and referral services			

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12c.3	SERVSOCW3	For each row, mark if this adult day services center provides the service by  * Arranging for outside vendors paid by others c. Social work services—provided by licensed social workers or persons with a bachelor's or master's degree in social work, and include an array of services such as psychosocial assessment, individual or group counseling, and referral services	1 = Yes 2 = No -9 = Not ascertained	AII	
12c.4	SERVSOCW4	For each row, mark if this adult day services center provides the service by  * Referrals  c. Social work services—provided by licensed social workers or persons with a bachelor's or master's degree in social work, and include an array of services such as psychosocial assessment, individual or group counseling, and referral services	1 = Yes 2 = No -9 = Not ascertained	All	
12c.5	SERVSOCW5	For each row, mark if this adult day services center provides the service by  * NONE OF THESE APPLY / NOT PROVIDED  c. Social work services—provided by licensed social workers or persons with a bachelor's or master's degree in social work, and include an array of services such as psychosocial assessment, individual or group counseling, and referral services	1 = Yes 2 = No -9 = Not ascertained	All	
12d [DERIVED]	SERVMH	For each row, mark if this adult day services center provides the service by  d. Mental health services—target participants' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions	1= Provided 2= Referral only 3= Not provided/ None of these apply -9 = Not ascertained	All	'Provided' refers to providing a given service by paid center employee, arranging for and paying outside vendors or arranging for outside vendors paid by others.
12d.1	SERVMH1	For each row, mark if this adult day services center provides the service by  * Paid center employees d. Mental health services—target participants' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions	1 = Yes 2 = No -9 = Not ascertained	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12d.2	SERVMH2	For each row, mark if this adult day services center provides the	1 = Yes	All	
			2 = No	1	
		* Arranging for and paying outside vendors	-9 = Not ascertained	_	
		<ul> <li>d. Mental health services—target participants' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions</li> </ul>			
12d.3	SERVMH3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
			-9 = Not ascertained		
		* Arranging for outside vendors paid by others d. Mental health services—target participants' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions			
12d.4	SERVMH4	For each row, mark if this adult day services center provides the	1 = Yes	All	
		· · · · · · · · · · · · · · ·	2 = No		
		* Referral	-9 = Not ascertained		
		<ul> <li>d. Mental health services—target participants' mental, emotional, psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions</li> </ul>			
12d.5	SERVMH5	MH5 For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED	-9 = Not ascertained		
		d. Mental health services—target participants' mental, emotional,			
		psychological, or psychiatric well-being and include diagnosing, describing, evaluating, and treating mental conditions			
12e	SERVTX	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]	SERVIX	service by	2= Referral only		given service by paid center
[			3= Not provided/ None of these apply		employee, arranging for and
		e. Any therapeutic services— physical, occupational, or speech	-9 = Not ascertained		paying outside vendors or arranging for outside vendors paid by others.
12e.1	SERVTX1	For each row, mark if this adult day conices contar provides the	1 = Yes	All	
126.1	2FUA IVI	For each row, mark if this adult day services center provides the service by	1 = Yes 2 = No	All	
		* Paid center employees	-9 = Not ascertained		
		e. Any therapeutic services— physical, occupational, or speech	3 Not used tunicu		

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12e.2	SERVTX2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors	-9 = Not ascertained		
		e. Any therapeutic services— physical, occupational, or speech			
12e.3	SERVTX3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others e. Any therapeutic services— physical, occupational, or speech	-9 = Not ascertained		
12e.4	SERVTX4	For each row, mark if this adult day services center provides the	1 = Yes	All	
			2 = No		
		* Referral e. Any therapeutic services— physical, occupational, or speech	-9 = Not ascertained		
12e.5	SERVTX5	For each row, mark if this adult day services center provides the service by	1 = Yes	All	
			2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED e. Any therapeutic services— physical, occupational, or speech	-9 = Not ascertained		
12f	SERVRX	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]		service by	2= Referral only		given service by paid center employee, arranging for and
		f Dharmacu convices including filling of and delivery of	3= Not provided/ None of these apply		paying outside vendors or
		f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		arranging for outside vendors paid by others.
12f.1	SERVRX1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Paid center employees  f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		
12f.2	SERVRX2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12f.3	SERVRX3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others  f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		
12f.4	SERVRX4	For each row, mark if this adult day services center provides the	1 = Yes	All	
	JETT TOTAL	service by	2 = No		
		* Referral  f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		
12f.5	SERVRX5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED  f. Pharmacy services—including filling of and delivery of prescriptions	-9 = Not ascertained		
12g	SERVPOD	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a given service by paid center employee, arranging for and paying outside vendors or arranging for outside vendors paid by others.
[DERIVED]		service by	2= Referral only		
			3= Not provided/ None of these apply		
		g. Podiatry services	-9 = Not ascertained		
12g.1	SERVPOD1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Paid center employees g. Podiatry services	-9 = Not ascertained		
12g.2	SERVPOD2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors g. Podiatry services	-9 = Not ascertained		
12g.3	SERVPOD3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others g. Podiatry services	-9 = Not ascertained		

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12g.4	SERVPOD4	For each row, mark if this adult day services center provides the	1 = Yes	All	
Ü		service by	2 = No		
		* Referral	-9 = Not ascertained		
		g. Podiatry services			
12g.5	SERVPOD5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED g. Podiatry services	-9 = Not ascertained		
12h	SERVNURS	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]		service by	2= Referral only		given service by paid center
			3= Not provided/ None of these apply		employee, arranging for and
		h. Skilled nursing services—must be performed by an RN or LPN and are medical in nature	-9 = Not ascertained		paying outside vendors or arranging for outside vendors paid by others.
12h.1	SERVNURS1	For each row, mark if this adult day services center provides the	1 = Yes	All	
121	SERVIVORSI	service by	2 = No	/ \\	
		* Paid center employees	-9 = Not ascertained		
		h. Skilled nursing services—must be performed by an RN or LPN and			
		are medical in nature			
12h.2	SERVNURS2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors	-9 = Not ascertained		
		h. Skilled nursing services—must be performed by an RN or LPN and			
		are medical in nature			
12h.3	SERVNURS3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others	-9 = Not ascertained		
		h. Skilled nursing services—must be performed by an RN or LPN and			
		are medical in nature			
12h.4	SERVNURS4	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Referral	-9 = Not ascertained		
		h. Skilled nursing services—must be performed by an RN or LPN and			
		are medical in nature			
12h.5	SERVNURS5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* NONE OF THESE APPLY / NOT PROVIDED	-9 = Not ascertained		
		h. Skilled nursing services—must be performed by an RN or LPN and			
		are medical in nature			

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12i [DERIVED]	SERVAPPT	For each row, mark if this adult day services center provides the service by	1= Provided	All	'Provided' refers to providing a given service by paid center
[DEKIVED]		Service by	2= Referral only 3= Not provided/ None of these apply		employee, arranging for and
		i. Transportation services for medical or dental appointments	-9 = Not ascertained		paying outside vendors or arranging for outside vendors paid by others.
12i.1	SERVAPPT1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Paid center employees i. Transportation services for medical or dental appointments	-9 = Not ascertained		
12i.2	SERVAPPT2	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for and paying outside vendors  i. Transportation services for medical or dental appointments	-9 = Not ascertained		
12i.3	SERVAPPT3	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Arranging for outside vendors paid by others	-9 = Not ascertained	_	
		i. Transportation services for medical or dental appointments	-5 - Not ascertained		
12i.4	SERVAPPT4	RVAPPT4 For each row, mark if this adult day services center provides the service by	1 = Yes	All	
			2 = No		
		* Referral i. Transportation services for medical or dental appointments	-9 = Not ascertained		
12i.5	SERVAPPT5	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No	_	
		* NONE OF THESE APPLY / NOT PROVIDED  i. Transportation services for medical or dental appointments	-9 = Not ascertained		
12j	SERVSTOR	For each row, mark if this adult day services center provides the	1= Provided	All	'Provided' refers to providing a
[DERIVED]		service by	2= Referral only		given service by paid center
			3= Not provided/ None of these apply		employee, arranging for and
		j. Transportation services for social and recreational activities, or shopping	·		paying outside vendors or arranging for outside vendors paid by others.
12j.1	SERVSTOR1	For each row, mark if this adult day services center provides the	1 = Yes	All	
		service by	2 = No		
		* Paid center employees j. Transportation services for social and recreational activities, or	-9 = Not ascertained		
		shopping			

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12j.2	SERVSTOR2	For each row, mark if this adult day services center provides the service by  * Arranging for and paying outside vendors j. Transportation services for social and recreational activities, or shopping	1 = Yes 2 = No -9 = Not ascertained	All	
12j.3	SERVSTOR3	For each row, mark if this adult day services center provides the service by  * Arranging for outside vendors paid by others j. Transportation services for social and recreational activities, or shopping	1 = Yes 2 = No -9 = Not ascertained	All	
12j.4	SERVSTOR4	For each row, mark if this adult day services center provides the service by  * Referral j. Transportation services for social and recreational activities, or shopping	1 = Yes 2 = No -9 = Not ascertained	All	
12j.5	SERVSTOR5	For each row, mark if this adult day services center provides the service by  * NONE OF THESE APPLY / NOT PROVIDED  j. Transportation services for social and recreational activities, or shopping	1 = Yes 2 = No -9 = Not ascertained	All	
12k [DERIVED]	SERVTRAN	For each row, mark if this adult day services center provides the service by  k. Daily round trip transportation services to/from this center	1= Provided 2= Referral only 3= Not provided/ None of these apply -9 = Not ascertained	All	'Provided' refers to providing a given service by paid center employee, arranging for and paying outside vendors or arranging for outside vendors paid by others.
12k.1	SERVTRAN1	For each row, mark if this adult day services center provides the service by  * Paid center employees k. Daily round trip transportation services to/from this center	1 = Yes 2 = No -9 = Not ascertained	All	
12k.2	SERVTRAN2	For each row, mark if this adult day services center provides the service by  * Arranging for and paying outside vendors k. Daily round trip transportation services to/from this center	1 = Yes 2 = No -9 = Not ascertained	All	
12k.3	SERVTRAN3	For each row, mark if this adult day services center provides the service by  * Arranging for outside vendors paid by others k. Daily round trip transportation services to/from this center	1 = Yes 2 = No -9 = Not ascertained	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
12k.4	SERVTRAN4	For each row, mark if this adult day services center provides the service by  * Referral	1 = Yes 2 = No	All	
1		k. Daily round trip transportation services to/from this center	-9 = Not ascertained		
12k.5	SERVTRAN5	For each row, mark if this adult day services center provides the service by	1 = Yes 2 = No	All	
l		* NONE OF THESE APPLY / NOT PROVIDED  k. Daily round trip transportation services to/from this center	-9 = Not ascertained		
		Staff Profile			
13a	STAFFPT	What is the maximum number of hours per week that part-time	(12 - 40)	All	Edited outliers (size-specific mean
ı		staff can work at this adult day services center?	-9 = Not ascertained		± 2 standard deviations).
13b	STAFFFT	What is the minimum number of hours per week that full-time staff	(18 - 50)	All	Edited outliers (size-specific mean
ı		can work at this adult day services center?	-9 = Not ascertained		± 2 standard deviations).
<del> </del>	_	Employee is defined as an adult day services center employee if the are defined as other individuals or organization staff under contract wi	th and working at this adult day services ce	nter full-time and part-tir	
14a.a [DERIVED]	RNFTE1	Number of full-time equivalent (FTE) employees: a. Registered nurses (RNs)	(0 - 10) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14a.a	RNFT1	Number of full-time employees:	(0 - 33)	All	
		a. Registered nurses (RNs)	-9 = Not ascertained		
14.a.a	RNPT1	Number of part-time employees: a. Registered nurses (RNs)	-9 = Not ascertained		
14b.a [DERIVED]	LPNFTE1	Number of full-time equivalent (FTE) employees: b. Licensed practical nurses (LPNs)/ licensed vocational nurses (LVNs)	(0 - 6.5) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14b.a	LPNFT1	Number of full-time employees:	(0 - 80)	All	
ı		b. Licensed practical nurses (LPNs)/ licensed vocational nurses (LVNs)	-9 = Not ascertained		
ı		(=:)			
14b.a	LPNPT1	Number of part-time employees: b. Licensed practical nurses (LPNs)/ licensed vocational nurses	(0 - 40) -9 = Not ascertained		

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
14c.a [DERIVED]	AIDEFTE1	Number of full-time equivalent (FTE) employees: c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides	(0 - 39) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14c.a	AIDEFT1	Number of full-time employees: c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides	(0 - 250) -9 = Not ascertained	All	
14c.a	AIDEPT1	Number of part-time employees: c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides	(0 - 65) -9 = Not ascertained		
14d.a [DERIVED]	SOCWFTE1	Number of full-time equivalent (FTE) employees: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 -7) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14d.a	SOCWFT1	Number of full-time employees: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 - 80) 247	All	
14d.a	SOCWPT1	Number of part-time employees: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 - 24) -9 = Not ascertained		
14e.a [DERIVED]	ACTFTE1	Number of full-time equivalent (FTE) employees: e. Activities directors or activities staff	None 0.5 - 32.5 -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
14e.a	ACTFT1	Number of full-time employees:	(0 - 80)	All	
		e. Activities directors or activities staff	-9 = Not ascertained		
14e.a	ACTPT1	Number of part-time employees: e. Activities directors or activities staff	(0 - 60) -9 = Not ascertained		
		e. Activities un ectors of activities stail	-9 = Not ascertained		
14a.b	RNFTE2	Number of full-time equivalent (FTE) contract staff:	(0 - 2)	All	Edited outliers (size-specific mean
[DERIVED]		a. Registered nurses (RNs)	-9 = Not ascertained		± 2 standard deviations).
14a.b	RNFT2	Number of full-time contract staff:	(0 - 22)	All	
		a. Registered nurses (RNs)	-9 = Not ascertained		
14.a.b	RNPT2	Number of part-time contract staff:	(0 - 8)		
		a. Registered nurses (RNs)	-9 = Not ascertained		
14b.b	LPNFTE2	Number of full-time equivalent (FTE) contract staff:	(0 - 0.5)	All	Edited outliers (size-specific mean ± 2 standard deviations).
[DERIVED]		b. Licensed practical nurses (LPNs)/ licensed vocational nurses (LVNs)	-9 = Not ascertained		
14.b.b	LPNFT2	Number of full-time contract staff:	(0 - 5)	All	
		b. Licensed practical nurses (LPNs)/ licensed vocational nurses (LVNs)	-9 = Not ascertained		
14.b.b	LPNPT2	Number of part-time contract staff:	(0 - 6)		
		b. Licensed practical nurses (LPNs)/ licensed vocational nurses (LVNs)	-9 = Not ascertained		
14c.b	AIDEFTE2	Number of full-time equivalent (FTE) contract staff:	(0 - 4)	All	Edited outliers (size-specific mean
[DERIVED]		<ul> <li>Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides</li> </ul>	-9 = Not ascertained		± 2 standard deviations).

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
14c.b	AIDEFT2	Number of full-time contract staff: c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides	(0 - 40) -9 = Not ascertained	All	
14c.b	AIDEPT2	Number of part-time contract staff: c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides	(0 - 20) -9 = Not ascertained		
14d.b [DERIVED]	SOCWFTE2	Number of full-time equivalent (FTE) contract staff: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 - 0.5) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14d.b	SOCWFT2	Number of full-time contract staff: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 - 4) -9 = Not ascertained	All	
14d.b	SOCWPT2	Number of part-time contract staff: d. Social workers—licensed social workers or persons with a bachelor's or master's degree in social work	(0 - 6) -9 = Not ascertained		
14e.b [DERIVED]	ACTFTE2	Number of full-time equivalent (FTE) contract staff: e. Activities directors or activities staff	(0 - 3.5) -9 = Not ascertained	All	Edited outliers (size-specific mean ± 2 standard deviations).
14e.b	ACTFT2	Number of full-time contract staff: e. Activities directors or activities staff	(0 - 23) -9 = Not ascertained	All	
14e.b	ACTPT2	Number of part-time contract staff: e. Activities directors or activities staff	(0 - 18) -9 = Not ascertained	All	
[DERIVED from RNFTE1]	ANYRN_EMP	One or more RN employees	1= > 0 2= None -9 = Not ascertained	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
[DERIVED	ANYLPN_EMP	One or more LPN/LVN employees	1=>0	All	
from			2= None		
LPNFTE1]			-9 = Not ascertained		
[DERIVED	ANYAIDE_EMP	One or more aide employees	1=>0	All	
from			2= None		
AIDEFTE1]			-9 = Not ascertained		
[DERIVED	ANYSOCW_EMP	One or more social work employees	1=>0	All	
from			2= None		
SOCWFTE1]			-9 = Not ascertained		
			3 Not useer tunicu		
[DERIVED	ANYACT_EMP	One or more activities director or staff who are employees	1=>0	All	
from			2= None		
ACTFTE1]			-9 = Not ascertained		
[DERIVED	ANYRN_CON	One or more RN contract staff	1=>0	All	
from			2= None		
RNFTE2]			-9 = Not ascertained		
[DEBINED	ANYLPN_CON	One or mare I DN/I VNI contract staff	1=>0	All	
[DERIVED from	ANTLPN_CON	One or more LPN/LVN contract staff	2= None	All	
LPNFTE2]			-9 = Not ascertained		
2			-9 – Not ascertained		
[DERIVED	ANYAIDE_CON	One or more aide contract staff	1=>0	All	
from			2= None		
AIDEFTE2]			-9 = Not ascertained		
[DERIVED	ANYSOCW_CON	One or more social work contract staff	1=>0	All	
from			2= None		
SOCWFTE2]			-9 = Not ascertained		
[DERIVED	ANYACT_CON	One or more activities director or staff who are contract staff	1=>0	All	
from			2= None		
ACTFTE2]			-9 = Not ascertained		
[DERIVED	ANYRN_EMPCON	One or more RN employees or contract staff	1=>0	All	
from RNFTE1,		one of more this employees of contract staff	2= None		
			-9 = Not ascertained		
RNFTE2]					

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
[DERIVED	ANYLPN_EMPCON	One or more LPN/LVN employees or contract staff	1=>0	All	
from			2= None		
LPNFTE1,			-9 = Not ascertained		
LPNFTE2]					
[DERIVED	ANYAIDE_EMPCON	One or more aide employees or contract staff	1=>0	All	
from			2= None		
AIDEFTE1, AIDEFTE2]			-9 = Not ascertained		
[DERIVED	ANYSOCW_EMPCON	One or more social work employees or contract staff	1=>0	All	
from			2= None		
SOCWFTE1, SOCWFTE2]			-9 = Not ascertained		
[DERIVED	ANYACT_EMPCON	One or more activities director or staff who are employees or	1=>0	All	
from	ANTACI_LIMITCON	contract staff	2= None	^\\"	
ACTFTE1,			-9 = Not ascertained		
ACTFTE2]			- Not assertamen		
[DERIVED	RNHPPD1	Number of hours providing care for one participant per day for: RN	(0 - 14)	All	RNHPPD1= (RNFTE1*35)/AVGPART/5 days
from RNFTE1,		employees	-9 = Not ascertained		
AVGPART]					
[DERIVED	LPNHPPD1	Number of hours providing care for one participant per day for:	(0 - 24)	All	LPNHPPD1=
from		LPN/LVN employees	-9 = Not ascertained		(LPNFTE1*35)/AVGPART/5 days
LPNFTE1,					
AVGPART]					
[DERIVED	AIDEHPPD1	Number of hours providing care for one participant per day for: aide		All	AIDEHPPD1=
from		employees	-9 = Not ascertained		(AIDEFTE1*35)/AVGPART/5 days
AIDEFTE1, AVGPART]					
[DERIVED	SOCWHPPD1	Number of hours providing care for one participant per day for:	(0 - 7)	All	SOCWHPPD1=
from		social work employees	-9 = Not ascertained		(SOCWFTE1*35)/AVGPART/5 days
SOCWFTE1,					
AVGPART]					
[DERIVED	ACTHPPD1	Number of hours providing care for one participant per day for:	(0 - 21)	All	ACTHPPD1=
from		activities director or staff who are employees	-9 = Not ascertained		(ACTFTE1*35)/AVGPART/5 days
ACTFTE1,					
AVGPART]					
[DERIVED	RNHPPD2	Number of hours providing care for one participant per day for: RN	(0 - 7)	All	RNHPPD2=
from RNFTE2,		contract staff	-9 = Not ascertained		(RNFTE2*35)/AVGPART/5 days
AVGPART]					

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER		Q-15/10/11/11		ASKED/ RECODEED	7.55
[DERIVED	LPNHPPD2	Number of hours providing care for one participant per day for:	(0 - 0.875)	All	LPNHPPD2=
from		LPN/LVN contract staff	-9 = Not ascertained		(LPNFTE2*35)/AVGPART/5 days
LPNFTE2,					
AVGPART]					
[DERIVED	AIDEHPPD2	Number of hours providing care for one participant per day for: aide	(0 - 3.5)	All	AIDEHPPD2=
from		contract staff	-9 = Not ascertained		(AIDEFTE2*35)/AVGPART/5 days
AIDEFTE2,					
AVGPART]					
[DERIVED	SOCWHPPD2	Number of hours providing care for one participant per day for:	(0 - 1)	All	SOCWHPPD2=
from		social work contract staff	-9 = Not ascertained		(SOCWFTE2*35)/AVGPART/5 days
SOCWFTE2,					
AVGPART]					
[DERIVED	ACTHPPD2	Number of hours providing care for one participant per day for:	(0 - 7)	All	ACTHPPD2=
from	ACTION DE	activities director or staff who are contract staff	-9 = Not ascertained		(ACTFTE2*35)/AVGPART/5 days
ACTFTE2,			3 = Not ascertained		
AVGPART]					
		Participant Prof	ile		
		<u> </u>			
15a	HISPANIC	Of the participants currently enrolled at this center, how many are	(0 - 236)	All	
		in each of the following categories? Count each participant only	-9 = Not ascertained		
		once. Enter "0" for any categories with no participants.			
		a.Hispanic or Latino, of any race			
15a	HISPANICRC	Number of participants who are: Hispanic or Latino, of any race		All	Multiple imputation for missing
[IMPUTED]					data; imputed values for missing
					data are provided (imphispanic_1
					imphispanic_5). Average of 5
					imputed, case-specific values used to correct missing data; ratio
					adjustment made to have the sum
					of race-ethnicity categories add to
					TOTPART.
15b	AIAN	Of the participants currently enrolled at this center, how many are	(0 - 66)	All	
		in each of the following categories? Count each participant only	-9 = Not ascertained		
		once. Enter "0" for any categories with no participants.			
		b.American Indian or Alaska Native, not Hispanic or Latino			
					1

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
15b [IMPUTED]	AIANRC	Number of participants who are: American Indian or Alaska Native, not Hispanic or Latino		All	Multiple imputation for missing data; imputed values for missing data are provided (impaian_1 - impaian_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of race-ethnicity categories add to TOTPART.
15c	ASIAN	Of the participants currently enrolled at this center, how many are in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  c. Asian, not Hispanic or Latino	(0 - 300) -9 = Not ascertained	All	
15c [IMPUTED]	ASIANRC	Number of participants who are: Asian, not Hispanic or Latino	(0 - 300)	All	Multiple imputation for missing data; imputed values for missing data are provided (impasian_1 - impasian_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of race-ethnicity categories add to TOTPART.
15d	BLACK	Of the participants currently enrolled at this center, how many are in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  d. Black, not Hispanic or Latino	(0 - 415) -9 = Not ascertained	All	
15d [IMPUTED]	BLACKRC	Number of participants who are: Black, not Hispanic or Latino	(0 - 415)	All	Multiple imputation for missing data; imputed values for missing data are provided (impblack_1 - impblack_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of race-ethnicity categories add to TOTPART.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
15e	NHOPI	Of the participants currently enrolled at this center, how many are in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  e. Native Hawaiian or Other Pacific Islander, not Hispanic or Latino	(0 - 63) -9 = Not ascertained	All	
15e [IMPUTED]	NHOPIRC	Number of participants who are: Native Hawaiian or Other Pacific Islander, not Hispanic or Latino	(0 - 63)	All	Multiple imputation for missing data; imputed values for missing data are provided (impnhopi_1 - impnhopi_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of race-ethnicity categories add to TOTPART.
15f	WHITE	Of the participants currently enrolled at this center, how many are (0 - 471)	(0 - 471)	All	
		in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  f. White, not Hispanic or Latino	-9 = Not ascertained		
15f [IMPUTED]	WHITERC	Number of participants who are: White, not Hispanic or Latino	(0 - 471)	All	Multiple imputation for missing data; imputed values for missing data are provided (impwhite_1 - impwhite_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of race-ethnicity categories add to TOTPART.
15g	MULTIRACE	Of the participants currently enrolled at this center, how many are in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants. g. Two or more races, not Hispanic or Latino	(0 - 180) -9 = Not ascertained	All	
15h	OTHERRACE	Of the participants currently enrolled at this center, how many are in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  h. Some other category reported in this center's system	(0 - 467) -9 = Not ascertained	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
15g 15h [IMPUTED]	MULTIOTHERRC	Number of participants who are: Two or more races, not Hispanic or Latino or some other category reported in this adult day services center's system	(0 - 467)	All	Multiple imputation for missing data after combining MULTIRACE and OTHERRACE; imputed values for missing data are provided (impother_1 - impother_5). Average of 5 imputed, case-specific values used to correct missing data and included in IMPOTHER_6; ratio adjustment made to have the sum of race-ethnicity categories if values do not add to TOTPART.
15i	UNKNOWN	Of the participants currently enrolled at this center, how many are	(0 - 306)	All	
		in each of the following categories? Count each participant only once. Enter "0" for any categories with no participants.  i. Not reported (race and ethnicity unknown)	-9 = Not ascertained		
15i [RECODED]	UNKNOWNRC	Number of participants who are: Not reported (race and ethnicity unknown)	(0 - 306)	All	No imputation for missing data; however, values for some cases may have changed due to ratio adjustment and replacing missing with average of 5 imputed, casespecific values in other raceethnicity categories.
16a	MALE	Of the participants currently enrolled at this center, how many are	(0 - 406)	All	
		in each of the following categories? Enter "0" for any categories with no participants.  a. Male	-9 = Not ascertained		
16a [IMPUTED]	MALERC	Number of participants who are: Male	(0 - 406)	All	Multiple imputation for missing data; imputed values for missing data are provided (impmale_1 - impmale_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of sex categories add to TOTPART.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
16b	FEMALE	Of the participants currently enrolled at this center, how many are	(0 - 516)	All	
[IMPUTED]		in each of the following categories? Enter "0" for any categories with no participants.  b. Female	-9 = Not ascertained		
16b [IMPUTED]	FEMALERC	Number of participants who are: Female	(0 - 516)	All	Multiple imputation for missing data; imputed values for missing data are provided (impfemale_1-impfemale_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of sex categories add to TOTPART.
17a	AG17LESS	Of the participants currently enrolled at this center, how many are	(0 - 45)	All	
		in each of the following age categories? Enter "0" for any categories with no participants. a. 17 years or younger			
17a [IMPUTED]	AG17LESSRC	Number of participants who are: 17 years or younger	(0 - 45)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag17less_1 impag17less_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.
17b	AG18TO44	Of the participants currently enrolled at this center, how many are	(0 - 175)	All	
		in each of the following age categories? Enter "0" for any categories with no participants. b. 18–44 years	, ,		

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER	7,110,12=2,10,111=	Q-13.101.12.11		ASKED/ RECODEED	1.5511161.01.121.121
17b [IMPUTED]	AG18TO44RC	Number of participants who are: 18–44 years	(0 - 175)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag18to44_1 - impag18to44_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.
17c	AG45T054	Of the participants currently enrolled at this center, how many are in each of the following age categories? Enter "0" for any categories with no participants.  c. 45–54 years	(0 - 200) -9 = Not ascertained	All	
17c [IMPUTED]	AG45TO54RC	Number of participants who are: 45–54 years	(0 - 200)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag45to54_1 - impag45to54_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.
17d	AG55TO64	Of the participants currently enrolled at this center, how many are	(0 - 136)	All	
		in each of the following age categories? Enter "0" for any categories with no participants. d. 55–64 years	-9 = Not ascertained		
17d [IMPUTED]	AG55TO64RC	Number of participants who are: 55–64 years	(0 - 136)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag55to64_1 - impag55to64_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
17e	AG65T074	Of the participants currently enrolled at this center, how many are in each of the following age categories? Enter "0" for any categories with no participants. e. 65–74 years	(0 - 250) -9 = Not ascertained	All	
17e [IMPUTED]	AG65TO74RC	Number of participants who are: 65–74 years	(0 - 250)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag65to74_1 - impag65to74_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.
17f	AG75TO84	Of the participants currently enrolled at this center, how many are	(0 - 383)	All	
		in each of the following age categories? Enter "0" for any categories with no participants.  f. 75–84 years			
17f [IMPUTED]	AG75TO84RC	Number of participants who are: 75–84 years	(0 - 383)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag75to84_1 - impag75to84_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.
17g	AG85UP	Of the participants currently enrolled at this center, how many are	(0 - 163)	All	
		in each of the following age categories? Enter "0" for any categories with no participants. g. 85 years or older	,		
17g [IMPUTED]	AG85UPRC	Number of participants who are: 85 years or older	(0 - 163)	All	Multiple imputation for missing data; imputed values for missing data are provided (impag85up_1 - impag85up_5). Average of 5 imputed, case-specific values used to correct missing data; ratio adjustment made to have the sum of age categories add to TOTPART.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
18a	DXALZ	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants.  a. Alzheimer's disease or other dementias	(0 - 300) -9 = Not ascertained	All	
18a	DXALZ2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants.  a. Alzheimer's disease or other dementias	(0 - 300) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
18a [IMPUTED]	DXALZRC	Number of participants who have a diagnosis of: Alzheimer's disease or other dementias	(0 - 300)	All	Multiple imputation for missing data; imputed values for missing data are provided (impdxalz_1 - impdxalz_5).
18b	DXDD	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants. b. Intellectual/ developmental disability	(0 - 434) -9 = Not ascertained	All	
18b	DXDD2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions?  Enter "0" for any categories with no participants.  b. Intellectual/ developmental disability	(0 - 434) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
18c	DXSMI	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants.  c. Severe mental illness	(0 - 341) -9 = Not ascertained	All	
18c [Edited]	DXSMI2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants. c. Severe mental illness	(0 - 341) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
18d	DXDEP	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions?  Enter "0" for any categories with no participants.  d. Depression	(0 - 320) -9 = Not ascertained	All	
18d	DXDEP2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants. d. Depression	(0 - 320) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
18d [IMPUTED]	DXDEPRC	Number of participants who have a diagnosis of: Depression	(0 - 320)	All	Multiple imputation for missing data; imputed values for missing data are provided (impdxdep_1 - impdxdep_5).
18e	DXCADIO	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants. e. Cardiovascular disease (e.g., heart disease, stroke, high blood pressure)	(0 - 397) -9 = Not ascertained	All	
18e	DXCADIO2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants. e. Cardiovascular disease (e.g., heart disease, stroke, high blood pressure)	(0 - 397) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
18f	DXDIAB	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants.  f. Diabetes	(0 - 300) -9 = Not ascertained	All	
18f	DXDIAB2	Of the participants currently enrolled at this center, about how many have been diagnosed with each of the following conditions? Enter "0" for any categories with no participants.  f. Diabetes	(0 - 300) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
<b>1</b> 9a	TRANSHELP	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants.  a. With transferring in and out of a bed or chair	(0 - 430) -9 = Not ascertained	All	
19a	TRANSHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants.  a. With transferring in and out of a bed or chair	(0 - 430) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
19b	EATHELP	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. b. With eating, like cutting up food	(0 - 312) -9 = Not ascertained	All	
19b	EATHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. b. With eating, like cutting up food	(0 - 312) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
19b [IMPUTED]	EATHELPRC	Number of participants who need assistance: With eating, like cutting up food	(0 - 312)	All	Multiple imputation for missing data; imputed values for missing data are provided (impeathelp_1 - impeathelp_5).

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
19c	DRESHELP	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. c. With dressing	(0 - 399) -9 = Not ascertained	All	
19c	DRESHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. c. With dressing	(0 - 399) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
19d	ВАТННЕІР	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. d. With bathing or showering	(0 - 469) -9 = Not ascertained	All	
19d	BATHHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. d. With bathing or showering	(0 - 469) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
19d [IMPUTED]	BATHHELPRC	Number of participants who need assistance: With bathing or showering	(0 - 469)	All	Multiple imputation for missing data; imputed values for missing data are provided (impbathhelp_1 - impbathhelp_5).

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
19e	TOILHELP	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. e. In using the bathroom (toileting)	(0 - 400) -9 = Not ascertained	All	
19e	TOILHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. e. In using the bathroom (toileting)	(0 - 400) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
19f	WALKHELP	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. f. With locomotion or walking	(0 - 469) -9 = Not ascertained	All	
19f	WALKHELP2	Assistance refers to needing any help or supervision from another person, or use of special equipment. Of the participants currently enrolled at this center, about how many now need any assistance at their usual residence or this center in each of the following activities? Enter "0" for any categories with no participants. f. With locomotion or walking	(0 - 469) -9 = Not ascertained	All	Edited cases with missing data; More information available in Data Description and Usage (ReadMe) document.
20	OVRNITE	Of the participants currently enrolled at this center, about how many were discharged from an overnight hospital stay in the last 90 days? Exclude trips to the hospital emergency department that did not result in an overnight hospital stay. If none, enter "0."	(0 - 128) -9 = Not ascertained	All	

OUECT: O:		QUIETTE:	0005 04		ADDITION
QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER	EN AEDALLINA		(0. 452)	ASKED/ RECODEED	
21	EMERNUM	Of the participants currently enrolled at this center, about how	-9 = Not ascertained	All	
		many were treated in a hospital emergency department in the last	-9 – Not ascertained		
		90 days? If none, enter "0."			
22	FALLNUM	Of the participants currently enrolled at this center, about how	(0 - 200)	All	
		many had any falls in the last 90 days? Include on-site and off-site	-9 = Not ascertained		
		falls. If none, enter "0."			
			(0.104)		
23	MEDHELP	For about how many of the currently enrolled participants does this	-9 = Not ascertained	All	
		adult day services center provide medication-related services, such	-9 = Not ascertained		
		as storing medications; administering medications; or providing			
		assistance to participants with self-administration of medications? If none, enter "0."			
		none, enter o.			
24	MOVECOST	Of participants who stopped using this adult day services center in	1 = Yes	All	
24	WOVECOST	the last 12 months, did any leave because the cost of attending the	2 = No	-0"	
		center, including meals and services required to meet their needs,	-9 = Not ascertained	-	
		exceeded their ability to pay?	S Not assertamen		
		choccaca them as may to pay.			
		Record Keepin	g		
25	EHRS	An Electronic Health Record is a computerized version of the	1 = Yes	All	
		participant's health and personal information used in the	2 = No		
		management of the participant's health care. Other than for	-9 = Not ascertained		
		accounting or billing purposes, does this adult day services center			
		use Electronic Health Records?			
26a, 26b, 26c	ΔΝΥΕΥ	Does this adult day services center's computerized system support	1 = Yes	All	
[DERIVED]	DIVIEA	electronic health information exchange with any of the following	2 = No	-  -	
[DZINIVED]		providers? Do not include faxing.	-9 = Not ascertained		
		a. Physician	3 Tot assertance		
		b. Pharmacy			
		c. Hospital			
	<u> </u>				

QUESTION	VARIABLE NAME	OUESTION TEVT	CODE CATECORIES	COMMUNITIES	ADDITIONAL NOTES
1 7	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES		ADDITIONAL NOTES
NUMBER	1			ASKED/ RECODEED	
26a	ITMD	Does this adult day services center's computerized system support	1 = Yes	All	
		electronic health information exchange with each of the following	2 = No		
		providers? Do not include faxing.	-9 = Not ascertained		
		a. Physician			
26b	ITPHARM	Does this adult day services center's computerized system support	1 = Yes	All	
260	ITPHARIVI	, , , , , , , , , , , , , , , , , , , ,	2 = No	AII	
		electronic health information exchange with each of the following	-9 = Not ascertained		
		providers? Do not include faxing.	-9 = Not ascertained		
		b. Pharmacy			
26c	ITHOSP	Does this adult day services center's computerized system support	1 = Yes	All	
		electronic health information exchange with each of the following	2 = No		
		providers? Do not include faxing.	-9 = Not ascertained		
		c. Hospital			
		Geographic Charact	eristics		
Frame	Facility_State	State	AK- WY	All	
Frame	REGION	Census region	1= Northeast	All	
			2= Midwest		
			3= South		
			4= West		
Frame	analysis_facility_FIPS	State FIPS code	(1 - 56)	All	
Frame	MSA	Metropolitan statistical area status	1= Metropolitan	All	
			2= Micropolitan		
			3= Neither		
		Design Variabl			
Design	FACSTRAT	State ID: Use in SUDAAN nest statement	(1 - 56)	All	
variable					
Design	POPFAC	Eligible population totals by state	(3 - 1173)	All	
variable					
Design	FACFNWT	Final analysis weight	(1.24 - 2.61)	All	
variable					

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
		Imputed Va	riables	,,	
[Imputed]	EATHELP_FL	Imputation Flag for EATHELP	0 = No imputation	All	
	_		1 = Imputation		
[Imputed]	impeathelp_1	Number needing assistance with eatingImputed Var 1	(0 - 312)	All	
[Imputed]	impeathelp_2	Number needing assistance with eatingImputed Var 2	(0 - 312)	All	
[Imputed]	impeathelp_3	Number needing assistance with eatingImputed Var 3	(0 - 312)	All	
[Imputed]	impeathelp_4	Number needing assistance with eatingImputed Var 4	(0 - 312)	All	
[Imputed]	impeathelp_5	Number needing assistance with eatingImputed Var 5	(0 - 312)	All	
[Imputed]	BATHHELP_FL	Imputation Flag for BATHHELP	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impbathhelp_1	Number needing assistance with bathing imputed Var 1	(0 - 469)	All	
[Imputed]	impbathhelp_2	Number needing assistance with bathingImputed Var 2	(0 - 469)	All	
[Imputed]	impbathhelp_3	Number needing assistance with bathingImputed Var 3	(0 - 469)	All	
[Imputed]	impbathhelp_4	Number needing assistance with bathing Inputed Var 4	(0 - 469)	All	
[Imputed]	impbathhelp_5	Number needing assistance with bathingImputed Var 5	(0 - 469)	All	
[Imputed]	DXALZ_FL	Imputation Flag for DXALZ	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impdxalz_1	Number diagnosed with Alzheimer'sImputed Var 1	(0 - 300)	All	
[Imputed]	impdxalz_2	Number diagnosed with Alzheimer'sImputed Var 2	(0 - 300)	All	
[Imputed]	impdxalz_3	Number diagnosed with Alzheimer'sImputed Var 3	(0 - 300)	All	
[Imputed]	impdxalz_4	Number diagnosed with Alzheimer'sImputed Var 4	(0 - 300)	All	
[Imputed]	impdxalz_5	Number diagnosed with Alzheimer'sImputed Var 5	(0 - 300)	All	
[Imputed]	DXDEP_FL	Imputation Flag for DXDEP0 = no imputation,	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impdxdep_1	Number diagnosed with depressionImputed Var 1	(0 - 320)	All	
[Imputed]	impdxdep_2	Number diagnosed with depressionImputed Var 2	(0 - 320)	All	
[Imputed]	impdxdep_3	Number diagnosed with depressionImputed Var 3	(0 - 320)	All	
[Imputed]	impdxdep_4	Number diagnosed with depressionImputed Var 4	(0 - 320)	All	
[Imputed]	impdxdep_5	Number diagnosed with depressionImputed Var 5	(0 - 320)	All	
[Imputed]	AG17LESS_FL	Imputation Flag for ag17less	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag17less_1	Number 17 or lessImputed Var 1	(0 - 45)	All	
[Imputed]	impag17less_2	Number 17 or lessImputed Var 2	(0 - 45)	All	
[Imputed]	impag17less_3	Number 17 or lessImputed Var 3	(0 - 45)	All	
[Imputed]	impag17less_4	Number 17 or lessImputed Var 4	(0 - 45)	All	
[Imputed]	impag17less_5	Number 17 or lessImputed Var 5	(0 - 45)	All	
[Imputed]	AG18TO44_FL	Imputation Flag for ag18to44	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag18to44_1	Number 18 to 44Imputed Var 1	(0 - 175)	All	
[Imputed]	impag18to44_2	Number 18 to 44Imputed Var 2	(0 - 175)	All	
[Imputed]	impag18to44_3	Number 18 to 44Imputed Var 3	(0 - 175)	All	
[Imputed]	impag18to44_4	Number 18 to 44Imputed Var 4	(0 - 175)	All	
[Imputed]	impag18to44_5	Number 18 to 44Imputed Var 5	(0 - 175)	All	

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
[Imputed]	AG45TO54_FL	Imputation Flag for ag45to54	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag45to54_1	Number 45 to 54Imputed Var 1	(0 - 200)	All	
[Imputed]	impag45to54_2	Number 45 to 54Imputed Var 2	(0 - 200)	All	
[Imputed]	impag45to54_3	Number 45 to 54Imputed Var 3	(0 - 200)	All	
[Imputed]	impag45to54_4	Number 45 to 54Imputed Var 4	(0 - 200)	All	
[Imputed]	impag45to54_5	Number 45 to 54Imputed Var 5	(0 - 200)	All	
[Imputed]	AG55TO64_FL	Imputation Flag for ag55to64	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag55to64_1	Number 55 to 64Imputed Var 1	(0 - 136)	All	
[Imputed]	impag55to64_2	Number 55 to 64Imputed Var 2	(0 - 136)	All	
[Imputed]	impag55to64_3	Number 55 to 64Imputed Var 3	(0 - 136)	All	
[Imputed]	impag55to64_4	Number 55 to 64Imputed Var 4	(0 - 136)	All	
[Imputed]	impag55to64_5	Number 55 to 64Imputed Var 5	(0 - 136)	All	
[Imputed]	AG65TO74_FL	Imputation Flag for ag65to74	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag65to74_1	Number 65 to 74Imputed Var 1	(0 - 250)	All	
[Imputed]	impag65to74_2	Number 65 to 74Imputed Var 2	(0 - 250)	All	
[Imputed]	impag65to74_3	Number 65 to 74Imputed Var 3	(0 - 250)	All	
[Imputed]	impag65to74_4	Number 65 to 74Imputed Var 4	(0 - 250)	All	
[Imputed]	impag65to74_5	Number 65 to 74Imputed Var 5	(0 - 250)	All	
[Imputed]	AG75TO84_FL	Imputation Flag for ag75to84	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag75to84_1	Number 75 to 84Imputed Var 1	(0 - 383)	All	
[Imputed]	impag75to84_2	Number 75 to 84Imputed Var 2	(0 - 383)	All	
[Imputed]	impag75to84_3	Number 75 to 84Imputed Var 3	(0 - 383)	All	
[Imputed]	impag75to84_4	Number 75 to 84Imputed Var 4	(0 - 383)	All	
[Imputed]	impag75to84_5	Number 75 to 84Imputed Var 5	(0 - 383)	All	
[Imputed]	AG85UP_FL	Imputation Flag for ag85up	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impag85up_1	Number 85+Imputed Var 1	(0 - 163)	All	
[Imputed]	impag85up_2	Number 85+Imputed Var 2	(0 - 163)	All	
[Imputed]	impag85up_3	Number 85+Imputed Var 3	(0 - 163)	All	
[Imputed]	impag85up_4	Number 85+Imputed Var 4	(0 - 163)	All	
[Imputed]	impag85up_5	Number 85+Imputed Var 5	(0 - 163)	All	

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES ASKED/ RECODEED	ADDITIONAL NOTES
[Imputed]	HISPANIC_FL	Imputation Flag for HISPANIC	0 = No imputation	All	
	_		1 = Imputation		
[Imputed]	imphispanic 1	Number of HispanicsImputed Var 1	(0 - 236)	All	
[Imputed]	imphispanic 2	Number of HispanicsImputed Var 2	(0 - 236)	All	
[Imputed]	imphispanic 3	Number of HispanicsImputed Var 3	(0 - 236)	All	
[Imputed]	imphispanic_4	Number of HispanicsImputed Var 4	(0 - 236)	All	
[Imputed]	imphispanic 5	Number of HispanicsImputed Var 5	(0 - 236)	All	
[Imputed]	AIAN_FL	Imputation Flag for AIAN	0 = No imputation	All	
	_		1 = Imputation		
[Imputed]	impaian_1	Number of AIANImputed Var 1	(0 - 66)	All	
[Imputed]	impaian_2	Number of AIANImputed Var 2	(0 - 66)	All	
[Imputed]	impaian_3	Number of AIANImputed Var 3	(0 - 66)	All	
[Imputed]	impaian_4	Number of AIANImputed Var 4	(0 - 66)	All	
[Imputed]	impaian_5	Number of AIANImputed Var 5	(0 - 66)	All	
[Imputed]	ASIAN_FL	Imputation Flag for ASIAN	0 = No imputation	All	
	_		1 = Imputation		
[Imputed]	impasian_1	Number of AsianImputed Var 1	(0 - 300)	All	
[Imputed]	impasian 2	Number of AsianImputed Var 2	(0 - 300)	All	
[Imputed]	impasian_3	Number of AsianImputed Var 3	(0 - 300)	All	
[Imputed]	impasian 4	Number of AsianImputed Var 4	(0 - 300)	All	
[Imputed]	impasian_5	Number of AsianImputed Var 5	(0 - 300)	All	
[Imputed]	BLACK_FL	Imputation Flag for BLACK	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impblack_1	Number of BlackImputed Var 1	(0 - 415)	All	
[Imputed]	impblack_2	Number of BlackImputed Var 2	(0 - 415)	All	
[Imputed]	impblack_3	Number of BlackImputed Var 3	(0 - 415)	All	
[Imputed]	impblack_4	Number of BlackImputed Var 4	(0 - 415)	All	
[Imputed]	impblack_5	Number of BlackImputed Var 5	(0 - 415)	All	
[Imputed]	NHOPI_FL	Imputation Flag for NHOPI	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impnhopi_1	Number of NHOPIImputed Var 1	(0 - 63)	All	
[Imputed]	impnhopi_2	Number of NHOPIImputed Var 2	(0 - 63)	All	
[Imputed]	impnhopi_3	Number of NHOPIImputed Var 3	(0 - 63)	All	
[Imputed]	impnhopi_4	Number of NHOPIImputed Var 4	(0 - 63)	All	
[Imputed]	impnhopi_5	Number of NHOPIImputed Var 5	(0 - 63)	All	
[Imputed]	WHITE_FL	Imputation Flag for WHITE	0 = No imputation	All	
-			1 = Imputation		
[Imputed]	impwhite_1	Number of WhiteImputed Var 1	(0 - 471)	All	
[Imputed]	impwhite_2	Number of WhiteImputed Var 2	(0 - 471)	All	
[Imputed]	impwhite_3	Number of WhiteImputed Var 3	(0 - 471)	All	
[Imputed]	impwhite_4	Number of WhiteImputed Var 4	(0 - 471)	All	
[Imputed]	impwhite_5	Number of WhiteImputed Var 5	(0 - 471)	All	

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
[Imputed]	OTHER_FL	Imputation Flag for OTHER	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impother_1	Number of OtherImputed Var 1	(0 - 467)	All	
[Imputed]	impother_2	Number of OtherImputed Var 2	(0 - 467)	All	
[Imputed]	impother_3	Number of OtherImputed Var 3	(0 - 467)	All	
[Imputed]	impother_4	Number of OtherImputed Var 4	(0 - 467)	All	
[Imputed]	impother_5	Number of OtherImputed Var 5	(0 - 467)	All	
[Imputed]	UNKNOWN_RC_1	Ratio Adjusted unknown race	(0 - 306)	All	
[Imputed]	UNKNOWN_RC_2	Ratio Adjusted unknown race	(0 - 306)	All	
[Imputed]	UNKNOWN_RC_3	Ratio Adjusted unknown race	(0 - 306)	All	
[Imputed]	UNKNOWN_RC_4	Ratio Adjusted unknown race	(0 - 306)	All	
[Imputed]	UNKNOWN_RC_5	Ratio Adjusted unknown race	(0 - 306)	All	
[Imputed]	MALE_FL	Imputation Flag for MALE	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impmale_1	Number of MalesImputed Var 1	(0 - 516)	All	
[Imputed]	impmale_2	Number of MalesImputed Var 2	(0 - 516)	All	
[Imputed]	impmale_3	Number of MalesImputed Var 3	(0 - 516)	All	
[Imputed]	impmale_4	Number of MalesImputed Var 4	(0 - 516)	All	
[Imputed]	impmale_5	Number of MalesImputed Var 5	(0 - 516)	All	
[Imputed]	FEMALE_FL	Imputation Flag for FEMALE	0 = No imputation	All	
			1 = Imputation		
[Imputed]	impfemale_1	Number of FemalesImputed Var 1	(0 - 516)	All	
[Imputed]	impfemale_2	Number of FemalesImputed Var 2	(0 - 516)	All	
[Imputed]	impfemale_3	Number of FemalesImputed Var 3	(0 - 516)	All	
[Imputed]	impfemale_4	Number of FemalesImputed Var 4	(0 - 516)	All	
[Imputed]	impfemale_5	Number of FemalesImputed Var 5	(0 - 516)	All	

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
[Imputed]	REVMCAID_FL	imputation Flag for REVMCAID	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevmcaid_1	Number of REVMCAID Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevmcaid_2	Number of REVMCAID Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevmcaid_3	Number of REVMCAID Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevmcaid_4	Number of REVMCAID Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevmcaid_5	Number of REVMCAID Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevmcaid2_1	Number of REVMCAID Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevmcaid2_2	Number of REVMCAID Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevmcaid2_3	Number of REVMCAID Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevmcaid2_4	Number of REVMCAID Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevmcaid2_5	Number of REVMCAID Second Set of Imputed Var 5	(0 - 100)	All	
[Imputed]	REVMCARE_FL	imputation Flag for REVMCARE	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevmcare_1	Number of REVMCARE Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevmcare_2	Number of REVMCARE Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevmcare_3	Number of REVMCARE Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevmcare_4	Number of REVMCARE Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevmcare_5	Number of REVMCARE Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevmcare2_1	Number of REVMCARE Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevmcare2_2	Number of REVMCARE Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevmcare2_3	Number of REVMCARE Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevmcare2_4	Number of REVMCARE Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevmcare2_5	Number of REVMCARE Second Set of Imputed Var 5	(0 - 100)	All	
[Imputed]	REVGOV_FL	imputation Flag for REVGOV	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevgov_1	Number of REVGOV Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevgov_2	Number of REVGOV Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevgov_3	Number of REVGOV Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevgov_4	Number of REVGOV Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevgov_5	Number of REVGOV Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevgov2_1	Number of REVGOV Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevgov2_2	Number of REVGOV Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevgov2_3	Number of REVGOV Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevgov2_4	Number of REVGOV Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevgov2_5	Number of REVGOV Second Set of Imputed Var 5	(0 - 100)	All	

QUESTION	VARIABLE NAME	QUESTION TEXT	CODE CATEGORIES	COMMUNITIES	ADDITIONAL NOTES
NUMBER				ASKED/ RECODEED	
[Imputed]	REVSELF_FL	imputation Flag for REVSELF	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevself_1	Number of REVSELF Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevself_2	Number of REVSELF Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevself_3	Number of REVSELF Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevself_4	Number of REVSELF Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevself_5	Number of REVSELF Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevself2_1	Number of REVSELF Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevself2_2	Number of REVSELF Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevself2_3	Number of REVSELF Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevself2_4	Number of REVSELF Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevself2_5	Number of REVSELF Second Set of Imputed Var 5	(0 - 100)	All	
[Imputed]	REVINSUR_FL	imputation Flag for REVINSUR	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevinsur_1	Number of REVINSUR Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevinsur_2	Number of REVUNSUR Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevinsur_3	Number of REVINSUR Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevinsur_4	Number of REVINSUR Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevinsur_5	Number of REVINSUR Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevinsur2_1	Number of REVINSUR Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevinsur2_2	Number of REVINSUR Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevinsur2_3	Number of REVINSUR Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevinsur2_4	Number of REVINSUR Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevinsur2_5	Number of REVINSUR Second Set of Imputed Var 5	(0 - 100)	All	
[Imputed]	REVOTHSO_FL	imputation Flag for REVOTHSO	0= No imputation	All	
			1= Imputation		
[Imputed]	imprevothso_1	Number of REVOTHSO Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevothso_2	Number of REVOTHSO Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevothso_3	Number of REVOTHSO Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevothso_4	Number of REVOTHSO Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevothso_5	Number of REVOTHSO Imputed Var 5	(0 - 100)	All	
[Imputed]	imprevothso2_1	Number of REVOTHSO Second Set of Imputed Var 1	(0 - 100)	All	
[Imputed]	imprevothso2_2	Number of REVOTHSO Second Set of Imputed Var 2	(0 - 100)	All	
[Imputed]	imprevothso2_3	Number of REVOTHSO Second Set of Imputed Var 3	(0 - 100)	All	
[Imputed]	imprevothso2_4	Number of REVOTHSO Second Set of Imputed Var 4	(0 - 100)	All	
[Imputed]	imprevothso2_5	Number of REVOTHSO Second Set of Imputed Var 5	(0 - 100)	All	