



## Biennial overview variable definitions crosswalk

### 2022 National Post-acute and Long-term Care Study

This crosswalk defines the variables that appear in the 2022 National Post-acute and Long-term Care Study (NPALS) interactive data dashboards available from: <https://www.cdc.gov/nchs/npals/webtables/overview.htm>.

Each variable is listed and defined per setting, grouped by content type: geographical and organizational characteristics, staffing, services provision, and services users. The settings include adult day services centers (ADSCs) and residential care communities (RCC) from National Center for Health Statistics surveys and home health agencies, hospices, nursing homes, inpatient rehabilitation facilities, and long-term care hospitals from Centers for Medicare and Medicaid Services (CMS) data sources.

More information about NPALS is available from: <https://www.cdc.gov/nchs/npals/questionnaires/index.html>

Geographic and organizational characteristics, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Number of providers	Number of paid, regulated long-term and post-acute care services providers.	Number of ADSCs based on 2022 NPALS	Number of assisted living and similar RCCs based on 2022 NPALS	Number of HHAs certified to provide services under Medicare in the October 26, 2022 CMS HHA Provider PUF	Number of hospices certified to provide services under Medicare, Medicaid, or both as of fourth quarter 2022	Number of IRFs certified to provide services under Medicare, Medicaid, or both as of fourth quarter 2022	Number of LTCHs certified to provide services under Medicare, Medicaid, or both as of fourth quarter 2022	Number of NHs certified to provide services under Medicare, Medicaid, or both as of fourth quarter 2020
Region	Grouping of states into geographic areas corresponding to groups used by the U.S. Census Bureau.	Four census regions based on state: 1 =Northeast 2=Midwest 3=South 4=West	Four census regions based on state: 1 =Northeast 2=Midwest 3=South 4=West	Derived from CMS HHA Provider PUF: [STATE]: 1=Northeast 2=Midwest 3=South 4=West	Derived from: [STATE_CD]: 1 =Northeast 2=Midwest 3=South 4=West	Derived from: [STATE_CD]: 1 =Northeast 2=Midwest 3=South 4=West	Derived from: [STATE_CD]: 1 =Northeast 2=Midwest 3=South 4=West	Derived from: [STATE_CD]: 1 =Northeast 2=Midwest 3=South 4=West
Metropolitan statistical area (MSA) status	Geographic entities defined by 2013 Office of Management and Budget standards for delineating MSAs. A metropolitan area contains a core urban area of 50,000 or more population, and a micropolitan area contains an urban core of at least 10,000 (but less than 50,000) population.	Based on zip codes: Metropolitan statistical area status: 1=Metropolitan 2=Micropolitan 3=Neither	Based on zip codes: Metropolitan statistical area status: 1=Metropolitan 2=Micropolitan 3=Neither	Derived from CMS HHA Provider PUF: [ZIP]: 1=Metropolitan 2=Micropolitan 3=Neither	Derived from: [ZIP_CD]: 1=Metropolitan 2=Micropolitan 3=Neither	Derived from: [ZIP_CD]: 1=Metropolitan 2=Micropolitan 3=Neither	Derived from: [ZIP_CD]: 1=Metropolitan 2=Micropolitan 3=Neither	Derived from: [ZIP_CD]: 1=Metropolitan 2=Micropolitan 3=Neither
Capacity	The number of beds or maximum allowable spaces available to the community.	Q6. What is the maximum number of participants allowed at this adult day services center at this location? This may be called the allowable daily capacity and is usually determined by law or by fire code, but may also be a program decision.	Q3. At this residential care community, what is the number of licensed, registered, or certified residential care beds? Include both occupied and unoccupied beds.	Not applicable in setting	Not applicable in setting	Derived from: [CRTFD_BED_CNT] Number of beds in Medicare- or Medicaid-certified areas within a facility	Derived from: [CRTFD_BED_CNT] Number of beds in Medicare- or Medicaid-certified areas within a facility	Derived from: [CRTFD_BED_CNT] Number of beds in Medicare- or Medicaid-certified areas within a facility
Ownership	Classified into three categories: for profit, nonprofit, and government and other.	Derived from: [OWNERSHP]: 1=For profit; 2=Nonprofit; 3= Government and other	Derived from: [OWNERSHP]: 1=For profit; 2=Nonprofit; 3= Government and other	Derived from CMS HHA Provider PUF: [TYPEOFOWNERSHIP]: 1=For profit ; 2=Nonprofit; 3= Government and other	Derived from: [GNRL_CNTL_TYPE_CD]: 1=For profit; 2=Nonprofit; 3= Government and other	Derived from: [GNRL_CNTL_TYPE_CD]: 1=For profit; 2=Nonprofit; 3= Government and other	Derived from: [GNRL_CNTL_TYPE_CD]: 1=For profit; 2=Nonprofit; 3= Government and other	Derived from: [GNRL_CNTL_TYPE_CD]: 1 =For profit; 2=Nonprofit; 3=Government and other
		Q1. What is the type of ownership of this adult day services center? 1=Private, nonprofit 2=Private, for profit 3=Publicly traded company or limited liability company (LLC) 4=Government— federal, state, county, local If OWNERSHP=1 then OWN=2; if OWNERSHP=2 or 3 then OWN=1; if OWNERSHP=4 then OWN=3.	Q1. What is the type of ownership of this residential care community? 1=Private, nonprofit 2=Private, for profit 3=Publicly traded company or limited liability company (LLC) 4=Government— federal, state, county, local If OWNERSHP=1 then OWN=2; if OWNERSHP=2 or 3 then OWN=1; if OWNERSHP=4 then OWN=3.	Voluntary non profit- religious affiliation Voluntary non profit-private Voluntary non profit-other Proprietary Government-state/county Government- combination govt & voluntary Government- local If Proprietary then OWN=1; if Voluntary non profit- religious affiliation, Voluntary non profit-private, or Voluntary non profit-other then OWN=2; if Government-state/county, Government- combination govt & voluntary, or Government- local then OWN=3	01=Nonprofit, church 02=Nonprofit, private 03=Nonprofit, other 04=Proprietary, individual 05=Proprietary, partnership 06=Proprietary, corporation 07=Proprietary, other 08=Government, state 09=Government, county 10=Government, city 11=Government, city or county 12=Combination government and NP 13=Other If GNRL_CNTL_TYPE_CD=‘01’, ‘02’, or ‘03’ then OWN= 2; if GNRL_CNTL_TYPE_CD=‘04’, ‘05’, ‘06’, or ‘07’ then OWN=1; if GNRL_CNTL_TYPE_CD=‘08’, ‘09’, ‘10’, ‘11’, ‘12’, or ‘13’; then OWN=3	01=Church 02=Private (not for profit) 03=Other 04=Private (for profit) 05=Federal 06=State 07=Local 08=Hospital district or authority 09=Physician ownership If GNRL_CNTL_TYPE_CD=‘01’ or ‘02’ then OWN =2; if GNRL_CNTL_TYPE_CD =‘04’ then OWN=1; if GNRL_CNTL_TYPE_CD= ‘03’, ‘05’, ‘06’, ‘07’, ‘08’, ‘09’, or ‘10’ then OWN=3.	01=Church 02=Private (not for profit) 03=Other 04=Private (for profit) 05=Federal or local 06=State 07=Federal or local 08=Hospital district or authority 09=Physician ownership 10=Tribal If GNRL_CNTL_TYPE_CD=‘01’ or ‘02’ then OWN=2; if GNRL_CNTL_TYPE_CD=‘04’ then OWN= 1; if GNRL_CNTL_TYPE_CD=‘03’, ‘05’, ‘06’, ‘07’, ‘08’, ‘09’, or ‘10’ then OWN=3	01=For profit, individual 02=For profit, partnership 03=For profit, corporation 04=Nonprofit, church related 05=Nonprofit, corporation 06=Nonprofit, other 07=Government, state 08=Government, county 09=Government, city 10=Government, city or county 11=Government, hospital district 12=Government, federal 13=Limited liability company If GNRL_CNTL_TYPE_CD=‘01’, ‘02’, ‘03’, or ‘13’ then OWN=1; if GNRL_CNTL_TYPE_CD=‘04’, ‘05’, or ‘06’ then OWN=2; if GNRL_CNTL_TYPE_CD=‘07’, ‘08’, ‘09’, ‘10’, ‘11’, or ‘12’, then OWN=3
Number of people served categories	Categorizes providers into three groupings of numbers of users, depending on setting.	Derived from: [AVGPART] : 1=1–25; 2=26–100; 3=101 or more	Derived from: [TOTRES]: 1=1–25; 2=26–100; 3=101 or more	Derived from IPBS data: [BENE_CNT]: 1=1–100; 2=101–300; 3=301 or more	Derived from IPBS data: [BENE_CNT]: 1=1–100; 2=101–300; 3=301 or more	Derived from IPBS data: [BENE_CNT]: 1=1–100; 2=101–300; 3=301 or more	Derived from IPBS data: [BENE_CNT]: 1=1–100; 2=101–300; 3=301 or more	Derived from: [CNSUS_RSDNT_CNT]: 1=1–25 ; 2=26–100; 3=101 or more
			Q4. What is the total number of residents currently living at this residential care community? Please include residents for whom a bed is being held while in the hospital. If you have respite care residents, please include them.	Number of patients with a Medicare claim for provider at any time in CY 2022	Number of patients with a Medicare claim for provider at any time in CY 2022	Number of patients with a Medicare claim for provider at any time in CY 2022	Number of patients with a Medicare claim for provider at any time in CY 2022	Number of current residents reported in Certification and Survey Provider Enhanced Reports (CASPER), defined as those in certified beds regardless of payer source

Geographic and organizational characteristics, by setting								
Survey data settings					Administrative data settings			
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Medicare certification	Certified to receive Medicare reimbursements.	Not applicable in setting	Not applicable in setting	All home health agencies included in CMS HHA Provider PUF are assumed to be Medicare-certified.	All hospices included in CASPER are assumed to be Medicare-certified.	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid If PGM_PRTCPTN_CD=1 or 3, then MEDICARE=1	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid If PGM_PRTCPTN_CD=1 or 3, then MEDICARE=1	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid If PGM_PRTCPTN_CD=1 or 3, then MEDICARE=1
Medicaid certification	Certified to receive Medicaid reimbursements.	Q2b. Is this adult services center authorized or otherwise set up to participate in Medicaid (Medicaid state plan, Medicaid waiver, or Medicaid managed care) or part of a Program of All-inclusive Care for the Elderly (PACE)? 1=Certified; 2=Not certified	Q15. Is this residential care community authorized or otherwise set up to participate in Medicaid? 1=Certified; 2=Not certified	Not applicable in setting	Not applicable in setting	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid. If PGM_PRTCPTN_CD=2 or 3, then MEDICAID=1	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid. If PGM_PRTCPTN_CD=2 or 3, then MEDICAID=1	Derived from: [PGM_PRTCPTN_CD]: 1=Certified; 2=Not certified Indicates if the provider participates in Medicare, Medicaid, or both programs. 1=Medicare only; 2=Medicaid only; 3=Medicare and Medicaid. If PGM_PRTCPTN_CD=2 or 3, then MEDICAID=1
Chain affiliation	Indicates whether a provider is part of a chain/ organization that owns or manages two or more providers.	Q7. Is this center owned by a person, group, or organization that owns or manages two or more adult day services centers? This may include a corporate chain. 1=Yes; 2=No	Q14. Is this residential care community owned by a person, group, or organization that owns or manages two or more residential care communities? This may include a corporate chain. 1=Yes; 2=No	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Derived from: [MLT_OWND_FAC_ORG_SW]: 1=Yes; 2=No Owned or leased by multifacility organization. Check “yes” if the facility is owned or leased by a multifacility organization, otherwise check “no.” A multifacility organization is an organization that owns two or more long-term care facilities. The owner may be an individual or a corporation. Leasing of facilities by corporate chains is included in this definition.

Employee staffing characteristics, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Registered nurse	Number of full-time equivalent (FTE) registered nurse (RN) employees (or 8 hours per day converted to 1 FTE for nursing homes). Outliers in survey data settings are defined as cases with FTEs that are two standard deviations above or below the mean for a given size category and recoded as the size-specific mean FTE for the given staff type. Also used to estimate having any, or at least 1 employee, of given staff type.	Derived RNFTE1 from: [RNFT1, RNPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q27a. RNs: number of full- time employees; number of part-time employees	Derived RNFTE1 from: [RNFT1, RNPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q32a. RNs: number of full- time employees; number of part-time employees	Data not available for setting	Derived from: [RN_CNT]  Number of FTE registered professional nurses employed by a provider=RNFTE1	Derived from: [RN_CNT]  Number of FTE registered professional nurses employed by a provider=RNFTE1	Derived from: [RN_CNT]  Number of FTE registered professional nurses employed by a provider=RNFTE1	Derived from PBJ Nurse Data: [HRS_RN_EMP]  Number of registered nurse employee hours divided by 8 hours to derive number of FTE RNs employed by a provider=RNFTE1
Licensed practical nurse (LPN) or licensed vocational nurse (LVN)	Number of FTE licensed practical nurse or licensed vocational nurse (LPN/LVN) employees (or 8 hours per day converted to 1 FTE for nursing homes). Outliers in survey data settings are defined as cases with FTEs that are two standard deviations above or below the mean for a given size category and recoded as the size-specific mean FTE for the given staff type. Also used to estimate having any, or at least 1 employee, of given staff type.	Derived LPNFTE1 from: [LPNFT1, LPNPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q27b. LPNs/LVNs: number of full- time employees; number of part-time employees	Derived LPNFTE1 from: [LPNFT1, LPNPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q32b. LPNs/LVNs: number of full- time employees; number of part-time employees	Data not available for setting	Derived from: [LPN_LVN_CNT]  Number of FTE licensed practical or vocational nurses employed by a provider=LPNFTE1	Derived from: [LPN_LVN_CNT]  Number of FTE licensed practical or vocational nurses employed by a provider=LPNFTE1	Derived from: [LPN_LVN_CNT]  Number of FTE licensed practical or vocational nurses employed by a provider=LPNFTE1	Derived from PBJ Nurse Data: [HRS_LPN_EMP]  Number of licensed practical nurse employee hours divided by 8 hours to derive number of FTE LPNs employed by a provider=LPNFTE1
Aide	Number of FTE aide employees (or 8 hour per day converted to 1 FTE for nursing homes). Aides refer to paid staff providing direct care and assistance to residents, participants, or patients with a broad range of activities. Outliers in survey data settings are defined as cases with FTEs that are two standard deviations above or below the mean for a given size category and recoded as the size-specific mean FTE for the given staff type. Also used to estimate having any, or at least 1 employee, of given staff type.	Derived AIDEFTE1 from: [AIDEFT1, AIDEPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q27c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides: number of full- time employees; number of part-time employees	Derived AIDEFTE1 from: [AIDEFT1, AIDEPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q32c. Certified nursing assistants, nursing assistants, home health aides, home care aides, personal care aides, personal care assistants, and medication technicians or medication aides: number of full- time employees; number of part-time employees	Data not available for setting	Derived from: [HH_AIDE_EMPLEE_CNT]  Number of FTE home health aides employed by a provider=AIDEFTE1	Data not available for setting	Data not available for setting	Derived from PBJ Nurse Data: [HRS_CNA_EMP, HRS_NATRN_EMP, HRS_MEDAIDE_EMP]  Number of certified nurse assistant, nurses assistant in training, and medication aide employee hours divided by 8 hours to derive number of FTE aides employed by a provider=AIDEFTE1
Social worker	Number of FTE social worker employees (or 8 hour per day converted to 1 FTE for nursing homes). Outliers in survey data settings are defined as cases with FTEs that are two standard deviations above or below the mean for a given size category and recoded as the size-specific mean FTE for the given staff type. Also used to estimate having any, or at least 1 employee, of given staff type.	Derived SOCWFTE1 from: [SOCWFT1, SOCWPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q27d. Social workers—licensed social workers or persons with a bachelor’s or master’s degree in social work: number of full- time employees; number of part-time employees	Derived SOCWFTE1 from: [SOCWFT1, SOCWPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q32d. Social workers—licensed social workers or persons with a bachelor’s or master’s degree in social work: number of full- time employees; number of part-time employees	Data not available for setting	Derived from: [MDCL_SCL_WORKKR_CNT]  Number of FTE social workers employed by a provider=SOCWFTE1	Data not available for setting	Data not available for setting	Derived from PBJ Nurse Data: [HRS_QUALSOCWRK_EMP, HRS_OTHSOCWORK_EMP]  Number of qualified social worker and other social worker employee hours divided by 8 hours to derive number of FTE social workers employed by a provider=SOCWFTE1
Activities directors or activities staff	Number of FTE activities directors or activities staff employees (or 8 hour per day converted to 1 FTE for nursing homes). Outliers in survey data settings are defined as cases with FTEs that are two standard deviations above or below the mean for a given size category and recoded as the size-specific mean FTE for the given staff type. Also used to estimate having any, or at least 1 employee, of given staff type.	Derived ACTFTE1 from: [ACTFT1, ACTPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q27e. Activities directors or activities staff: number of full-time employees; number of part-time employees	Derived ACTFTE1 from: [ACTFT1, ACTPT1]: Converted to 1.0 FTE for full-time and part time is 0.5 FTE.  Q32e. Activities directors or activities staff: number of full-time employees; number of part-time employees	Not applicable in setting	Not applicable in setting	Not applicable in setting	Not applicable in setting	Derived from PBJ Nurse Data: [HRS_QUALACTVPROF_EMP, HRS_OTHACTV_EMP]  Number of qualified activities profession and other activities staff employee hours divided by 8 hours to derive number of FTE activities staff employed by a provider=ACTFTE1
Total FTE employee staff	Total number of nursing and social worker FTE staff.	Derived: TOTFTE= RNFTE1 + LPNFTE + AIDEFTE1 + SOCWFTE1	Derived: TOTFTE= RNFTE1 + LPNFTE + AIDEFTE1 + SOCWFTE1	Data not available for setting	Derived: TOTFTE= RNFTE1 + LPNFTE1 + AIDEFTE1 + SOCWFTE1	Derived: TOTFTE= RNFTE1 + LPNFTE1 + AIDEFTE1 + SOCWFTE1	Derived: TOTFTE= RNFTE1 + LPNFTE1 + AIDEFTE1 + SOCWFTE1	Derved from PBJ Nurse and Non-Nurse Data: TOTFTE=RNFTE1 + LPNFTE1 + AIDEFTE1 + SOCWFTE1

Employee staffing characteristics, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Ratio nursing or social worker FTE employee type	Ratio derived from the number of each nursing and social worker FTE type over the total number of FTE staff.	Derived: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100; AIDEFTE1 / TOTFTE*100; SOCWFTE1 / TOTFTE*100	Derived: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100; AIDEFTE1 / TOTFTE*100; SOCWFTE1 / TOTFTE*100	Data not available for setting	Derived: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100; AIDEFTE1 / TOTFTE*100; SOCWFTE1 / TOTFTE*100	Derived: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100	Derived: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100	Dervied from PBJ Nurse and Non-Nurse Data: RNFTE1 / TOTFTE*100; LPNFTE1 / TOTFTE*100; AIDEFTE1 / TOTFTE*100; SOCWFTE1 / TOTFTE*100
Hours per resident or participant per day (HPRD or HPPD) for each employee type	Number of FTE employee hours providing care for one resident or participant per day for a given staff type. For ADSCs, HPPD was computed by multiplying the number of FTEs by 35 hours, and dividing the total number of hours by the number of current enrolled participants and by 5 days. For RCCs, was computed by multiplying the number of FTEs by 35 hours and dividing by the number of current residents, and by 7 days. For NHs, HPRD was computed by dividing the total number of hours in a given day by the daily resident census.	Derived: RNHPPD1=(RNFTE1* 35) / TOTPART / 5; LPNHPPD1=(LPNFTE1 * 35)/ TOTPART / 5; AIDEHPPD1=(AIDEFTE1 * 35) / TOTPART / 5; SOCWHPPD1=(SOCWFTE1*35) /TOTPART/5; ACTHPPD1=(ACTFTE1 * 35) /TOTPART / 5	Derived: RNHPPD1=(RNFTE1* 35) / TOTRES/7; LPNHPPD1=(LPNFTE1 * 35)/ TOTRES /7; AIDEHPPD1=(AIDEFTE1 * 35)/TOTRES/7; SOCWHPPD1=(SOCWFTE1 * 35)/TOTRES/7; ACTHPPD1=(ACTFTE1 * 35)/TOTRES/7	Not applicable in setting	Not applicable in setting	Data not available for setting	Data not available for setting	Dervied from PBJ Nurse and Non-Nurse Data: HRS_RN_EMP/ MDSCENSUS; HRS_LPN_EMP / MDSCENSUS; HRS_CNA_EMP + HRS_NATRN_EMP + HRS_MEDAIDE_EMP/ MDSCENSUS; HRS_QUALSOCWRK_EMP + HRS_OTHSOCWORK_EMP/ MDSCENSUS

Services provision, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Social work services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVSOCW1, SERVSOCW3, SERVSOCW4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVSOCW1, SERVSOCW3, SERVSOCW4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from CMS HHA Provider PUF: [offermedicalsocialservices]: 1=Provided; 2=Not provided	Derived from: [MDCL_SCL_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [SCL_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [SCL_SRVC_CD]: 1=Provided; 2=Not provided	Dervied from PBJ Non-Nurse Data: [HRS_QUALSOCWRK, HRS_OTHSOCWORK]: 1=Provided; 2=Not provided
		Q20c. Social work services—provided by licensed social workers or persons with a bachelor’s or master’s degree in social work, and may include an array of services such as psychosocial assessment, individual or group counseling, and referral services: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24c. Social work services—provided by licensed social workers or persons with a bachelor’s or master’s degree in social work, and may include an array of services such as psychosocial assessment, individual or group counseling, support groups, and referral services: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Medical social services: 0=Not provided; 1=Yes; 2=No	Medical social services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If MCDL_SCL_SRVC_CD=0, then SERVSOCW=2; if MDCL_SCL_SRVC= 1, 2, 0r 3, then SERVSOCW=1	Social services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If SCL_SRVC_CD=0, then SERVSOCW= 2; if SCL_SRVC_CD=1, 2, or 3, then SERVSOCW=1	Social services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If SCL_SRVC_CD=0, then SERVSOCW= 2; if SCL_SRVC_CD=1, 2, or 3, then SERVSOCW=1	Social work services provided by staff: Coded as providing services if provider has more than 0 employee or contractor hours of relevant staff during CY 2022 Q4
Mental health or counseling services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVMH1, SERVMH3, SERVMH4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVMH1, SERVMH3, SERVMH4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Data not available for setting	Derived from: [CNSLNG_SRVC_CD]: 1=Provided; 2=Not provided	Data not available for setting	Data not available for setting	Data not available for setting
		Q20d. Mental or behavioral health services— target participants’ mental, emotional, psychological, or psychiatric well- being and may include diagnosing, describing, evaluating, and treating mental conditions: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24d. Mental or behavioral health services— target residents’ mental, emotional, psychological, or psychiatric well- being and may include diagnosing, describing, evaluating, and treating mental conditions: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service		Mental health services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If CNSLNG_SRVC_CD=0, then SERVMH=2; if CNSLNG_SRVC_CD= 1, 2, or 3, then SERVMH=1			
Therapeutic services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVTX1, SERVTX3, SERVTX4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVTX1, SERVTX3, SERVTX4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from CMS HHA Provider PUF: [offerphysicaltherapyservices; offersoccupationaltherapyservices; offersspeechpathologyservices]: 1=Provided; 2=Not provided	Derived from: [PT_SRVC_CD, OT_SRVC_CD, SPCH_PTHLGY_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [PT_SRVC_CD, OT_SRVC_CD, SPCH_PTHLGY_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [PT_SRVC_CD, OT_SRVC_CD, SPCH_PTHLGY_SRVC_CD]: 1=Provided; 2=Not provided	Dervied from PBJ Non-Nurse Data: [HRS_OT, HRS_OTASST, HRS_OTAIDE, HRS_PT, HRS_PTASST, HRS_PTAIDE, or HRS_SPCLANGPATH]: 1=Provided; 2=Not provided
		Q20e. Therapy services—physical, occupational, or speech: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24e. Therapy services—physical, occupational, or speech: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Physical therapy, occupational therapy, or speech therapy services: 1=Yes; 2=No	Physical therapy, occupational therapy, or speech therapy services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If PT_SRVC_CD=0 and OT_SRVC_CD=0 and SPCH_THRPPY_SRVC_CD=0, SERVTX=2; if any 1, 2 or 3, then SERVTX=1	Physical therapy, occupational therapy, or speech therapy services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If PT_SRVC_CD=0 and OT_SRVC_CD=0 and SPCH_PTHLGY_SRVC_CD=0, then SERVTX=2; if any 1, 2 or 3, then SERVTX=1	Physical therapy, occupational therapy, or speech therapy services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If PT_SRVC_CD=0 and OT_SRVC_CD=0 and SPCH_PTHLGY_SRVC_CD=0, then SERVTX=2; if any 1, 2 or 3, then SERVTX=1	Physical, occupational, and speech therapeutic services provided by staff: Coded as providing services if provider has more than 0 employee or contractor hours of relevant staff during CY 2022 Q4

Services provision, by setting								
Survey data settings					Administrative data settings			
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Pharmacy services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVRX1, SERVXR3, SERVXR4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVRX1, SERVXR3, SERVXR4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Data not available for setting	Data not available for setting	Derived from: [PHRMCY_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [PHRMCY_SRVC_CD]: 1=Provided; 2=Not provided	Dervied from PBJ Non-Nurse Data: [HRS_PHARMACIST]: 1=Provided; 2=Not provided
		Q20f. Pharmacy services—including filling of or delivery of prescriptions: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24f. Pharmacy services—including filling of or delivery of prescriptions: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service			Pharmacy services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If PHRMCY_SRVC_CD=0, then SERVXR=2; if PHRMCY_SRVC_CD=1, 2, 3 then SERVXR=1	Pharmacy services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If PHRMCY_SRVC_CD=0, then SERVXR=2; if PHRMCY_SRVC_CD=1, 2, 3 then SERVXR=1	Pharmacist services provided by staff: Coded as providing services if provider has more than 0 employee or contractor hours of relevant staff during CY 2022 Q4
Skilled nursing services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVNURS1, SERVNURS3, SERVNURS4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVNURS1, SERVNURS3, SERVNURS4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from CMS HHA Provider PUF [offersnursingcareservices]: 1=Provided; 2=Not provided	Derived from: [NRSNG_SRVC_CD]: 1=Provided; 2=Not provided	Data not available for setting	Data not available for setting	Dervied from PBJ Nurse Data: [HRS_RN, HRS_LPN]: 1=Provided; 2=Not provided
		Q20h. Skilled nursing services— must be performed by an RN , LPN, or LVN and are medical in nature: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24h. Skilled nursing services— must be performed by an RN , LPN, or LVN and are medical in nature: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Nursing care services: 1=Yes; 2=No	Nursing care services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If NRSNG_SRVC_CD=0, then SERVNURS=2; if NRSNG_SRVC_CD= 1, 2 or 3, then SERVNURS=1			Nursing services provided by staff: Coded as providing services if provider has more than 0 employee or contractor hours of relevant staff during CY 2022 Q4
Hospice services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVHOS1, SERVHOS3, SERVHOS4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Derived from: [SERVHOS1, SERVHOS3, SERVHOS4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangement; 2=Not provided (includes referral only)	Data not available for setting	Not applicable in setting	Data not available for setting	Data not available for setting	Derived from CASPER data: [HOSPC_BED_CNT, CNSUS_HOSPC_CARE_CNT]: 1=Provided; 2=Not provided
		Q20a. Hospice services: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24a. Hospice services: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service					Hospice services: Coded as providing services if nursing home has beds in a unit identified and dedicated by a facility for residents needing hospice services or has residents receiving hospice care benefit If HOSPC_BED_CNT or CNSUS_HOSPC_CARE_CNT > 0 then SERVHOSP=1; else SERVHOSP=2

Services provision, by setting								
Survey data settings					Administrative data settings			
Characteristic	Definition	Adult day services center (ADSC) <sup>1</sup>	Residential care community (RCC) <sup>2</sup>	Home health agency (HHA) <sup>3</sup>	Hospice (HOS) <sup>3</sup>	Inpatient rehabilitation facility (IRF) <sup>3</sup>	Long-term care hospital (LTCH) <sup>3</sup>	Nursing home (NH) <sup>3</sup>
Dietary and nutritional services	Refers to these services offered by the provider by a paid employee, by arrangement through outside providers, by referral to outside provider, or not provided at all. Definitions may vary by setting	Derived from: [SERVDIET1, SERVDIET3, SERVDIET4]:Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangment; 2=Not provided (includes referral only)	Derived from: [SERVDIET1, SERVDIET3, SERVDIET4]: Based on 3 "mark all that apply" categories: 1=Provided by employee or arrangment; 2=Not provided (includes referral only)	Data not available for setting	Data not available for setting	Derived from: [DTRY_SRVC_CD]: 1=Provided; 2=Not provided	Derived from: [DTRY_SRVC_CD]: 1=Provided; 2=Not provided	Dervied from PBJ Non-Nurse Data: [HRS_DIETICIAN, HRS_FEEDASST]: 1=Provided; 2=Not provided
		Q20g. Dietary and nutritional services—including meal pickup or delivery: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service	Q24g. Dietary and nutritional services—including meal pickup or delivery: 1=Provides the service by paid employee or arranges for the service to be provided by outside service providers; 2=Refers to outside service providers; 3=Does not provide, arrange, or refer for this service			Dietary services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If DTRY_SRVC_CD=0, then SERVDIET =2; if DTRY_SRVC_CD= 1, 2, or 3, then SERVDIET=1	Dietary services: 0=Not provided; 1=Provided by staff; 2=Provided under arrangement; 3=Combination If DTRY_SRVC_CD=0, then SERVDIET =2; if DTRY_SRVC_CD= 1, 2, or 3, then SERVDIET=1	Dietary services provided by staff: Coded as providing services if provider has more than 0 employee or contractor hours of relevant staff during CY 2022 Q4
Dementia care	Refers to providing dementia care either by 1) specializing in dementia care or having a dementia care floor/unit/ or wing or 2) Specializing in dementia care and only serving users with dementia.	Derived from: [CONDALZRC, DXALZRC, TOTPART]: 1=Specializes and only serves participants with Alzheimer or other dementia diagnosis; 2=Specializes in Alzheimer's disease or dementias	Derived from: [ONLYDEM, DEMWING]: 1=Serves only residents with dementia; 2=Provides dementia care units within larger community	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Derived from: [CRTFD_BED_CNT, ALZHMR_BED_CNT]: 1=Serves only residents with dementia; 2=Provides dementia care beds/units within larger facility
		Q15a. In which of the following diagnoses, conditions, or disabilities does this center specialize? a. Alzheimer disease or other dementias Q22. Of the participants currently enrolled at this center, about how many have been diagnosed with Alzheimer disease or other dementias	Q10. Does this residential care community only serve adults with dementia or Alzheimer’s disease? Q11. [If no to Q10] Does this residential care community have a distinct unit, wing, or floor that is designated as a dementia, Alzheimer’s, or memory care unit?					Number of certified beds; number of beds in a unit identified and dedicated by the facility for residents with Alzheimer’s disease



Services users characteristics, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Number of services users	Number of services users	[TOTPART] Derived from the number of participants in the ADSC services users data file.	[TOTRES] Dervied from the number of residents in the RCC services users data file.	Derived from Institutional Provider and Beneficiary Summary (IPBS) data: [BENE_CNT]: Number of patients for whom a Medicare claim was submitted at any time in CY 2022	Derived from Institutional Provider and Beneficiary Summary (IPBS) data: [BENE_CNT]: Number of patients for whom a Medicare claim was submitted at any time in CY 2022	Derived from Institutional Provider and Beneficiary Summary (IPBS) data: [BENE_CNT]: Number of patients for whom a Medicare claim was submitted at any time in CY 2022	Derived from Institutional Provider and Beneficiary Summary (IPBS) data: [BENE_CNT]: Number of patients for whom a Medicare claim was submitted at any time in CY 2022	Derived CASPER from: [CNSUS_RSDNT_CNT]: Number of current residents in 2022
Age	Number of services users under age 65, between 65 and 74, between 75 and 84, and 85 and over. For ADSC and RCCs, missing data were imputed.	Derived from: What is [sampled person's initial's] age in years? AGE<65 AGE>=65 and <75 AGE>=75 and < 85 AGE >85	Derived from: What is [sampled person's initial's] age in years? AGE<65 AGE>=65 and <75 AGE>=75 and < 85 AGE >85	Derived from IPBS data: [AGE_LESS_65, AGE_65_69, AGE_70_74, AGE_OVER_84/ BENE_CNT]: Number of beneficiaries in each age category	Derived from IPBS data: [AGE_LESS_65, AGE_65_69, AGE_70_74, AGE_OVER_84/ BENE_CNT]: Number of beneficiaries in each age category	Derived from IPBS data: [AGE_LESS_65, AGE_65_69, AGE_70_74, AGE_OVER_84/ BENE_CNT]: Number of beneficiaries in each age category	Derived from IPBS data: [AGE_LESS_65, AGE_65_69, AGE_70_74, AGE_OVER_84/ BENE_CNT]: Number of beneficiaries in each age category	Derived from MARET data: [C_RSDNT_AGE_NUM]: Calculated age at the time of assessment; Recoded into age categories
Race and Hispanic origin	Percentage of services users of Hispanic or Latino origin; non-Hispanic Black, non-Hispanic AIAN, non-Hispanic Asian, non-Hispanic White, and non-Hispanic NHOPI, or non-Hispanic of another race. For ADSCs and RCCs, missing data were imputed.	Is [SAMPLED PERSON'S INITIALS] of Hispanic, Latino, or Spanish origin or descent? 1 YES 2 NO 3 DON'T KNOW Missing data and don't know for ETHNICITY were imputed.	Is [SAMPLED PERSON'S INITIALS] of Hispanic, Latino, or Spanish origin or descent? 1 YES 2 NO 3 DON'T KNOW Missing data and don't know for ETHNICITY were imputed.	Derived from IPBS data: [RACE_HISPN/ BENE_CNT]: Number of Hispanic beneficiaries	Derived from IPBS data: [RACE_HISPN/ BENE_CNT]: Number of Hispanic beneficiaries	Derived from IPBS data: [RACE_HISPN/ BENE_CNT]: Number of Hispanic beneficiaries	Derived from IPBS data: [RACE_HISPN/ BENE_CNT]: Number of Hispanic beneficiaries	Derived from MARET data: [A1000D_HSPNC_CD]: Indicates if resident is Hispanic
		Please look at the show card titled “Race” to answer this question. Which one or more of the following would you say is [SAMPLED PERSON'S INITIALS]'s race? 1. AMERICAN INDIAN OR ALASKA NATIVE 2. ASIAN 3. BLACK 4. NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER 5. WHITE Coded so that race categories includes only non-Hispanic users.	Please look at the show card titled “Race” to answer this question. Which one or more of the following would you say is [SAMPLED PERSON'S INITIALS]'s race? 1. AMERICAN INDIAN OR ALASKA NATIVE 2. ASIAN 3. BLACK 4. NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER 5. WHITE Coded so that race categories includes only non-Hispanic users.	Derived from IPBS data: [RACE_WHITE, RACE_BLACK, RACE_NATIND, RACE_API, RACE_OTHER / BENE_CNT]: Number of beneficiaries in each race category. Coded so that race categories includes only non-Hispanic users. Non-Hispanic Other race includes: RACE_NATIND, RACE_API, RACE_OTHER	Derived from IPBS data: [RACE_WHITE, RACE_BLACK, RACE_NATIND, RACE_API, RACE_OTHER / BENE_CNT]: Number of beneficiaries in each race category. Coded so that race categories includes only non-Hispanic users. Non-Hispanic Other race includes: RACE_NATIND, RACE_API, RACE_OTHER	Derived from IPBS data: [RACE_WHITE, RACE_BLACK, RACE_NATIND, RACE_API, RACE_OTHER / BENE_CNT]: Number of beneficiaries in each race category. Coded so that race categories includes only non-Hispanic users. Non-Hispanic Other race includes: RACE_NATIND, RACE_API, RACE_OTHER	Derived from IPBS data: [RACE_WHITE, RACE_BLACK, RACE_NATIND, RACE_API, RACE_OTHER / BENE_CNT]: Number of beneficiaries in each race category. Coded so that race categories includes only non-Hispanic users. Non-Hispanic Other race includes: RACE_NATIND, RACE_API, RACE_OTHER	Derived from MARET data: [A1000F_WHT_CD, A1000C_AFRCN_AMRCN_CD, A1000A_AMRCN_INDN_AK_NTV_CD, A1000B_ASN_CD, A1000E_NTV_HI_PCFC_ISLNDR_CD ]: Indicates race of resident Coded so that race categories includes only non-Hispanic users. Non-Hispanic Other race includes: A1000A_AMRCN_INDN_AK_NTV_CD, A1000B_ASN_CD, A1000E_NTV_HI_PCFC_ISLNDR_CD
Sex	Percentage of services users who are male or female. For ADSCs and RCCs, missing data were imputed.	What is [SAMPLED PERSON'S INITIALS]'s gender? 1. MALE 2. FEMALE	What is [SAMPLED PERSON'S INITIALS]'s gender? 1. MALE 2. FEMALE	Derived from IPBS data: [MALE; FEMALE/ BENE_CNT]: Number of beneficiaries in each sex category	Derived from IPBS data: [MALE; FEMALE/ BENE_CNT]: Number of beneficiaries in each sex category	Derived from IPBS data: [MALE; FEMALE/ BENE_CNT]: Number of beneficiaries in each sex category	Derived from IPBS data: [MALE; FEMALE/ BENE_CNT]: Number of beneficiaries in each sex category	Derived from MARET data: [A0800_GNDR_CD]: Identifies the resident’s sex: 1=Male; 2= Female
Medicaid as payer source	Percentage of users with Medicaid paying for any services received.	During the last complete month, did Medicaid pay for any of the services that [SAMPLED PERSON'S INITIALS] received at this center? Please include any funding from a Medicaid state plan, Medicaid waiver, Medicaid managed care, or California regional center. 1 YES 2 NO 3 DON'T KNOW Don't know coded as missing.	During the last complete month, did Medicaid pay for any of the services that [SAMPLED PERSON'S INITIALS] received at this center? Please include any funding from a Medicaid state plan, Medicaid waiver, Medicaid managed care, or California regional center. 1 YES 2 NO 3 DON'T KNOW Don't know coded as missing.	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Derived from CASPER data: [CNSUS_MDCD_CNT/ CNSUS_RSDNT_CNT]: Number of residents using Medicaid to pay for services

Services users characteristics, by setting								
Survey data settings				Administrative data settings				
Characteristic	Definition	Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Diagnosed with Alzheimer disease or dementia	Percentage of services users diagnosed with Alzheimer disease or dementia.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [ALZRDSD_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ALZRDSD_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ALZRDSD_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ALZRDSD_BENE_CNT/ BENE_CNT]	Derived from MARET data: [I4200_ALZHMR_CD, I4800_DMNT_CD]
		2. Alzheimer’s disease or other dementia	2. Alzheimer’s disease or other dementia	Number of beneficiaries meeting the chronic condition algorithm for Alzheimer’s broad classification, including dementia and utilizing the provider (Alzheimer’s disease and related disorders or senile dementia)	Number of beneficiaries meeting the chronic condition algorithm for Alzheimer’s broad classification, including dementia and utilizing the provider (Alzheimer’s disease and related disorders or senile dementia)	Number of beneficiaries meeting the chronic condition algorithm for Alzheimer’s broad classification, including dementia and utilizing the provider (Alzheimer’s disease and related disorders or senile dementia)	Number of beneficiaries meeting the chronic condition algorithm for Alzheimer’s broad classification, including dementia and utilizing the provider (Alzheimer’s disease and related disorders or senile dementia)	Indicates whether the resident had an active diagnosis of Alzheimer’s disease in the last 7 days or indicates whether the resident had an active diagnosis of non-Alzheimer’s dementia, such as vascular or multi- infarct dementia; mixed dementia; or frontotemporal dementia, such as Pick’s disease and dementia related to stroke, Parkinson’s disease, or Creutzfeldt-Jakob disease in the last 7 days
Diagnosed with depression	Percentage of services users diagnosed with depression.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [DEPR_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [DEPR_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [DEPR_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [DEPR_BENE_CNT/ BENE_CNT]	Derived from MARET data: [I5800_DPRSNT_CD]
		11. Depression	11. Depression	Number of beneficiaries meeting the chronic condition algorithm for depression utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for depression utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for depression utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for depression utilizing the provider	Indicates if the resident had an active diagnosis of depression (other than bipolar) in the last 7 days
Diagnosed with diabetes	Percentage of services users diagnosed with diabetes.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [DIAB_BENE_CNT / BENE_CNT]	Derived from IPBS data: [DIAB_BENE_CNT / BENE_CNT]	Derived from IPBS data: [DIAB_BENE_CNT / BENE_CNT]	Derived from IPBS data: [DIAB_BENE_CNT / BENE_CNT]	Derived from MARET data: [I2900_DM_CD]
		12. Diabetes	12. Diabetes	Number of beneficiaries meeting the chronic condition algorithm for diabetes utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for diabetes utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for diabetes utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for diabetes utilizing the provider	Indicates whether the resident had an active diagnosis of diabetes mellitus (diabetic retinopathy or neuropathy) in the last 7 days
Diagnosed with arthritis	Percentage of services users diagnosed with arthritis.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from: [RAOA_BENE_CNT/ BENE_CNT from IPBS data]	Derived from: [RAOA_BENE_CNT/ BENE_CNT from IPBS data]	Derived from: [RAOA_BENE_CNT/ BENE_CNT from IPBS data]	Derived from: [RAOA_BENE_CNT/ BENE_CNT from IPBS data]	Derived from MARET data: [I3700_ARTHTS_CD]
		5. Arthritis or rheumatoid arthritis	5. Arthritis or rheumatoid arthritis	Number of beneficiaries meeting the chronic condition algorithm for rheumatoid or osteoarthritis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for rheumatoid or osteoarthritis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for rheumatoid or osteoarthritis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for rheumatoid or osteoarthritis and utilizing the provider	Indicates whether the resident had an active diagnosis of arthritis in the last 7 days
Diagnosed with asthma	Percentage of services users diagnosed with asthma.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [ASTHMA_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ASTHMA_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ASTHMA_BENE_CNT/ BENE_CNT]	Derived from IPBS data: [ASTHMA_BENE_CNT/ BENE_CNT]	Derived from MARET data: I6200_ASTHMA_CD]
		6. Asthma	6. Asthma	Number of beneficiaries meeting the chronic condition algorithm for asthma and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for asthma and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for asthma and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for asthma and utilizing the provider	Indicates whether the resident had an active diagnosis of asthma in the last 7 days
Diagnosed with chronic kidney disease	Percentage of services users diagnosed with kidney disease.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [CKD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [CKD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [CKD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [CKD_BENE_CNT / BENE_CNT]	Data not available for setting
		19. Kidney disease	19. Kidney disease	Number of beneficiaries meeting the chronic condition algorithm for chronic kidney disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for chronic kidney disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for chronic kidney disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for chronic kidney disease and utilizing the provider	

Services users characteristics, by setting								
Characteristic	Definition	Survey data settings				Administrative data settings		
		Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Diagnosed with chronic obstructive pulmonary disease (COPD)	Percentage of services users diagnosed with COPD..	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [COPD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [COPD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [COPD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [COPD_BENE_CNT / BENE_CNT]	Data not available for setting
		9. COPD (chronic bronchitis or emphysema)	9. COPD (chronic bronchitis or emphysema)	Number of beneficiaries meeting the chronic condition algorithm for COPD and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for COPD and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for COPD and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for COPD and utilizing the provider	
Diagnosed with heart disease	Percentage of services users diagnosed with heart disease.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [IHD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [IHD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [IHD_BENE_CNT / BENE_CNT]	Derived from IPBS data: [IHD_BENE_CNT / BENE_CNT]	Derived from MARET data: [I0400_CAD_CD, I0600_HRT_FAILR_CD, I4500_STRK_CD]
		16. Heart disease (congestive heart failure, coronary or ischemic heart disease, heart attack)	16. Heart disease (congestive heart failure, coronary or ischemic heart disease, heart attack)	Number of beneficiaries meeting the chronic condition algorithm for ischemic heart disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for ischemic heart disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for ischemic heart disease and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for ischemic heart disease and utilizing the provider	Indicates whether the resident had an active diagnosis of coronary artery disease, congestive heart failure, or stroke (CVA or TIA or Stroke) in the last 7 days
Diagnosed with high blood pressure or hypertension	Percentage of services users diagnosed with high blood pressure or hypertension.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [HYPERT_BENE_CNT / BENE_CNT]	Derived from IPBS data: [HYPERT_BENE_CNT / BENE_CNT]	Derived from IPBS data: [HYPERT_BENE_CNT / BENE_CNT]	Derived from IPBS data: [HYPERT_BENE_CNT / BENE_CNT]	Derived from MARET data: [I0700_HYPRTNSN_CD ]
		17. High blood pressure or hypertension	17. High blood pressure or hypertension	Number of beneficiaries meeting the chronic condition algorithm for hypertension and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for hypertension and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for hypertension and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for hypertension and utilizing the provider	Indicates whether the resident had an active diagnosis of hypertension in the last 7 days
Diagnosed with osteoporosis	Percentage of services users diagnosed with osteoporosis.	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	As far as you know, has a doctor or other health professional ever diagnosed [SAMPLED PERSON'S INITIALS] with any of the following conditions?	Derived from IPBS data: [OST_BENE_CNT / BENE_CNT]	Derived from IPBS data: [OST_BENE_CNT / BENE_CNT]	Derived from IPBS data: [OST_BENE_CNT / BENE_CNT]	Derived from IPBS data: [OST_BENE_CNT / BENE_CNT]	Derived from MARET data: [I3800_OSTPRS_CD]
		22. Osteoporosis	22. Osteoporosis	Number of beneficiaries meeting the chronic condition algorithm for osteoporosis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for osteoporosis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for osteoporosis and utilizing the provider	Number of beneficiaries meeting the chronic condition algorithm for osteoporosis and utilizing the provider	Indicates whether the resident had an active diagnosis of osteoporosis in the last 7 days

Services users characteristics, by setting								
Survey data settings					Administrative data settings			
Characteristic	Definition	Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Need assistance with eating	Percentage of services users needing any assistance with eating.	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to eat, like cutting up food at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to eat, like cutting up food? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Derived from OASIS data: [gg0130a1_eatg_self_admsn_cd]: 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from IRF-PAI data: data:[GG0130A1_EATG_ABILITY_STRT_CD] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from CASPER data: [CNSUS_EATG_ASTD_CNT, CNSUS_EATG_DPNDNT_CNT / CNSUS_RSDNT_CNT] Number of residents coded as needing any assistance with eating if they require supervision, limited or extensive assistance from staff, or full staff performance every time during entire 7-day period. If the facility routinely provides “setup” activities (e.g., opening containers, buttering bread, and organizing the tray) and if this is the extent of assistance provided for the resident, the resident was coded as not needing any assistance with eating.
Need assistance with dressing	Percentage of services users needing any assistance with dressing.	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to dress at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to dress? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Derived from OASIS data: [gg0130f1_upr_drsg_admsn_cd and gg0130g1_lwr_drsg_admsn_cd]: 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from IRF-PAI data: [GG0130F1_UPR_DRSG_STRT_CD, GG0130G1_LWR_DRSG_STRT_CD] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from CASPER data: [CNSUS_DRS_ASTD_CNT; CNSUS_DRS_DPNDNT_CNT / CNSUS_RSDNT_CNT] Number of residents coded as needing any assistance with dressing if they require supervision, limited or extensive assistance from staff, or full staff performance every time during entire 7-day period. If the facility routinely set out clothes for all residents, and this is the only assistance the resident receives, the resident was coded as not needing any assistance with dressing.
Need assistance with toileting	Percentage of services users needing any assistance with using bathroom or toileting.	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to use the bathroom or toileting at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to use the bathroom or toileting? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Derived from OASIS data: [gg0130c1_toilt_hygne_admsn_cd] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. Patients were not counted if coded as 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from IRF-PAI data: [GG0130C1_TOILT_ABILITY_STRT_CD] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from CASPER data: [CNSUS_TOILT_ASTD_CNT, CNSUS_TOILT_DPNDNT_CNT / CNSUS_RSDNT_CNT] Number of residents coded as needing assistance with toileting if they require supervision, limited or extensive assistance from staff, or full staff performance every time during entire 7-day period. If all that is done for the resident is to open a package (e.g., a clean sanitary pad), the resident was coded as not needing any assistance with toileting.

Services users characteristics, by setting								
Survey data settings					Administrative data settings			
Characteristic	Definition	Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Need assistance with bathing	Percentage ces users needing any assistance with bathing or showering.	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to bathe or shower at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to bathe or shower? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Derived from OASIS data: [gg0130e1_shwr_admsn_cd] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from IRF-PAI data: [GG0130E1_BTHE_SELF_STRT_CD] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from CASPER data: [CNSUS_BATHG_ASTD_CNT, CNSUS_BATHG_DPNDNT_CNT / CNSUS_RSDNT_CNT] Number of residents coded as needing any assistance with bathing if they require supervision, physical help limited to transfer only or in part of bathing activity, or full staff performance every time during entire 7-day period. If the facility provides setup assistance to all residents, such as drawing water for a tub bath or laying out bathing materials, and the resident requires no other assistance, the resident was coded as not needing any assistance with bathing.
Need assistance with walking or locomotion	Percentage of services users needing any assistance with walking or locomotion.	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need for locomotion or to walk at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need for locomotion or to walk? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2en=2	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Derived from CASPER data: [CNSUS_INDPNDNT_MBLTY_CNT; CNSUS_RSDNT_CNT] Number of residents who require no help or oversight; or help or oversight was provided only one or two times during the past 7 days, subtracted from CNSUS_RSDNT_CNT. Does not include residents who use a cane, walker, or crutch.
Need assistance with transferring	Percentage of services users needing any assistance with transferring in and out of a chair	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to transfer in and out of a chair at their usual residence or this adult day services center? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Needs Assistance=1 No Assistance=2 Derived From: Which types of assistance, if any, does [SAMPLED PERSON'S INITIALS] currently need to transfer in and out of a chair? 1. NEED HELP OR SUPERVISION 2. USE OF AN ASSISTANCE DEVICE 3. BOTH 4. NEED NO ASSISTANCE If 1, 2, or 3 then =1; if 4 then=2	Derived from OASIS data: [gg0170e1_chr_trnsf_admsn_cd] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from IRF-PAI data: [GG0170E1_TRNSFR_STRT_CD] 1=Needs assistance; 2=No Assistance Needs assistance at start of care assessment if 1=Dependent; 2=Substantial/maximal assistance; 3=Partial/moderate assistance; 4=Supervision or touching assistance; 5=Setup or clean-up assistance. No assistance if 6=Independent; 7=Patient refused; 9=Not applicable; 10=Not attempted due to environmental limitations; 88=Not attempted due to medical condition or safety concerns	Data not available for setting	Derived from CASPER data: [CNSUS_TRNSFR_ASTD_CNT, CNSUS_TRNSFR_DPNDNT_CNT / CNSUS_RSDNT_CNT]: Number of residents who require help moving between surfaces, including, to or from bed, chair, wheelchair, or standing positions. Excludes transfers to or from the bath or toilet. If the facility routinely provides “setup” assistance to all residents, such as handing the equipment (e.g., sliding board) to the resident, and this is the only assistance required, the resident was coded as not needing assistance with transferring.

Services users characteristics, by setting								
Characteristic	Definition	Survey data settings			Administrative data settings			
		Adult day services center (ADSC) <sup>4</sup>	Residential care community (RCC) <sup>5</sup>	Home health agency (HHA) <sup>6</sup>	Hospice (HOS) <sup>6</sup>	Inpatient rehabilitation facility (IRF) <sup>6</sup>	Long-term care hospital (LTCH) <sup>6</sup>	Nursing home (NH) <sup>6</sup>
Overnight hospital stay	Percentage of services users who were discharged from an overnight hospital stay.	Was [SAMPLED PERSON'S INITIALS] discharged from an overnight hospital stay [during the past 90 days/since admission]? Exclude trips to the hospital emergency department that did not result in an overnight hospital stay. 1. YES 2. NO 3. DON'T KNOW Don't know was coded as missing data.	Was [SAMPLED PERSON'S INITIALS] discharged from an overnight hospital stay [during the past 90 days/since admission]? Exclude trips to the hospital emergency department that did not result in an overnight hospital stay. 1. YES 2. NO 3. DON'T KNOW Don't know was coded as missing data.	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting
Emergency department visits	Percentage of services users who had emergency department visits.	During the past 90 days.since admission, was [SAMPLED PERSON'S INITIALS] treated in a hospital emergency department? 1. YES 2. NO 3. DON'T KNOW Don't know was coded as missing data.	During the past 90 days.since admission, was [SAMPLED PERSON'S INITIALS] treated in a hospital emergency department? 1. YES 2. NO 3. DON'T KNOW Don't know was coded as missing data.	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting
Falls	Percentage of services users who had at least one fall.	Derived from: As best you know, during the past 90 days/since admission, how many falls has [SAMPLED PERSON'S INITIALS] had?	Derived from: As best you know, during the past 90 days/since admission, how many falls has [SAMPLED PERSON'S INITIALS] had?	Data not available for setting	Data not available for setting	Data not available for setting	Data not available for setting	Derived from from MARET data: [J1800_FALL_LAST_ASMT_CD]: Has the resident had any falls since admission or the prior assessment, whichever is more recent?