

Positional Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PERSID	CHAR	PERSON ID
CSDAYS	NUM	WHEN WAS THE LAST TIME YOU RECEIVED THE CASE MANAGEMENT SERVICES?
CSCONT	NUM	DO YOU KNOW HOW TO CONTACT YOUR CASE MANAGER WHEN YOU NEED TO?
CSFONEC	NUM	DOES YOUR CASE MANAGER RETURN YOUR PHONE CALLS IN A TIMELY MANNER?
CSEXPLN	NUM	DOES YOUR CASE MANAGER EXPLAIN YOUR SERVICES IN A WAY THAT YOU CAN UNDERSTAND?
CSNEEDS	NUM	DO YOU AND YOUR CASE MANAGER WORK TOGETHER TO DECIDE WHAT SERVICES YOU NEED?
CSRESPT	NUM	DOES YOUR CASE MANAGER TREAT YOU WITH RESPECT?
CSINVOLV	NUM	DOES YOUR CASE MANAGER INVOLVE YOU IN DISCUSSING AND PLANNING FOR YOUR SERVICES?
CSCARE	NUM	DOES YOUR CASE MANAGER DO A GOOD JOB SETTING UP CARE FOR YOU?
CSGTMOR	NUM	DOES YOUR CASE MANAGER HELP YOU GET SERVICES THAT YOU DID NOT HAVE BEFORE?
CSBETTR	NUM	HAS YOUR SITUATION IMPROVED BECAUSE OF THE SERVICES YOUR CASE MANAGER ARRANGES?
CSHOWLG	NUM	HOW LONG HAVE YOU BEEN RECEIVING THE CASE MANAGEMENT SERVICES?
CSSVCLPN	NUM	DID YOUR CASE MANAGER DEVELOP A CARE PLAN FOR THE SERVICE YOU NEED?
CCOPY	NUM	DID YOU GET A COPY OF THE PLAN?
CSELSVC	NUM	ARE YOU ABLE TO SELECT THE SERVICES YOU RECEIVE?
CSELPRV	NUM	ARE YOU ABLE TO SELECT YOUR SERVICE PROVIDER?
CSRATE	NUM	HOW WOULD YOU RATE THE CASE MANAGEMENT SERVICES THAT YOU HAVE RECEIVED?
CSRATE2	NUM	RATING OF CASE MANAGEMENT SERVICES GOOD TO EXCELLENT
CSSTAYHM	NUM	DO THE SERVICES YOU RECEIVE HELP YOU CONTINUE TO LIVE IN YOUR OWN HOME?
CSKNOW	NUM	AS A RESULT OF RECEIVING THE CASE MANAGEMENT SERVICES, DO YOU HAVE A BETTER IDEA OF WHERE TO GET INFORMATION ABOUT OTHER SERVICES?
SVCCM	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED CONGREGATE MEALS?
SVCHDM	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED HOME DELIVERED MEALS?
SVCHOUSE	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED HOMEMAKER OR HOUSEKEEPING SERVICES?
SVCTRAN	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED TRANSPORTATION SERVICES?
SVCDYCR	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED ADULT DAYCARE SERVICES?
SVCPCR	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED PERSONAL CARE SERVICES?
SVCHORE	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED CHORE SERVICES?
SVCLGL	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED LEGAL ASSISTANCE?
SVCIAA	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED INFORMATION AND ASSISTANCE SERVICES?
SVCCOUNT	NUM	SERVICE COMBINATIONS
HNREDUYN	NUM	DO YOU HAVE A NUTRITION COUNSELOR WHO GIVES YOU ADVICE ON WHAT YOU SHOULD EAT BASED ON YOUR HEALTH CONDITIONS AND YOUR FOOD CHOICES?
HLTHSCRN	NUM	HAVE YOU RECEIVED HEALTH SCREENINGS SUCH AS BLOOD PRESSURE CHECKS OTHER THAN THOSE FROM YOUR OWN DOCTOR?
SHOTS	NUM	HAVE YOU RECEIVED FLU SHOTS, PNEUMONIA SHOTS OR OTHER IMMUNIZATIONS OTHER THAN THOSE FROM YOUR OWN DOCTOR?

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EXERCISE	NUM	HAVE YOU TAKEN EXERCISE OR FITNESS CLASSES OR DO YOU USE THE EXERCISE EQUIPMENT AT A SENIOR CENTER OR OTHER PROGRAM FOR OLDER ADULTS?
MEDS	NUM	HAVE YOU RECEIVED ASSISTANCE IN ADMINISTERING OR MONITORING THE SIDE EFFECTS OF MEDICINE?
BENEFITS	NUM	HAVE YOU RECEIVED HELP GETTING BENEFITS LIKE FOOD STAMPS AND OTHER PUBLIC ASSISTANCE?
SVCRATE	NUM	OVERALL, HOW WOULD YOU RATE THE GROUP OF SERVICES YOU RECEIVE?
SVCIND	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU ABLE TO LIVE INDEPENDENTLY?
SVCSECUR	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, DO YOU FEEL MORE SECURE?
SVCSELF	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU BETTER ABLE TO CARE FOR YOURSELF?
SVCIDEA	NUM	SINCE YOU STARTED RECEIVING SERVICES, DO YOU HAVE A BETTER IDEA OF HOW TO GET ANY ADDITIONAL HELP THAT YOU NEED?
SVCCURT	NUM	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES ARE GENERALLY COURTEOUS?
SVCSUPOS	NUM	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES DO THE THINGS THEY ARE SUPPOSED TO DO?
SVC5A	NUM	ARE YOU RECEIVING FOOD STAMPS?
SVC5B	NUM	ARE YOU RECEIVING ENERGY ASSISTANCE?
SVC5C	NUM	ARE YOU RECEIVING MEDICAID?
SVC5D	NUM	ARE YOU RECEIVING HOUSING ASSISTANCE?
CSARRNG	NUM	DO YOUR FAMILY OR FRIENDS HELP ARRANGE FOR THE SERVICES YOU RECEIVE?
CSHOME	NUM	DO YOUR FAMILY OR FRIENDS ALSO PROVIDE ASSISTANCE THAT HELPS YOU STAY AT HOME?
PFHLTH	NUM	IN GENERAL, HOW IS YOUR HEALTH?
SFMODACT	NUM	DOES YOUR HEALTH LIMIT YOUR ABILITY TO DO MODERATE ACTIVITIES SUCH AS MOVING A TABLE, PUSHING A VACUUM CLEANER, BOWLING, OR PLAYING GOLF?
SFCLIMB	NUM	DOES YOUR HEALTH LIMIT YOUR ABILITY TO CLIMB SEVERAL FLIGHTS OF STAIRS?
SFACCOMP	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF YOUR PHYSICAL HEALTH?
SFLIMITD	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME WERE YOU LIMITED IN THE KIND OF WORK OR OTHER REGULAR DAILY ACTIVITIES YOU DO AS A RESULT OF YOUR PHYSICAL HEALTH?
SFEMOT	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?
SFCAREFL	NUM	DURING THE PAST 4 WEEKS, HOW MUCH OF THE TIME DID YOU DO WORK OR OTHER REGULAR DAILY ACTIVITIES LESS CAREFULLY THAN USUAL AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?
SFPAIN	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH DID PAIN INTERFERE WITH YOUR NORMAL WORK (INCLUDING BOTH WORK OUTSIDE THE HOME AND HOUSEWORK)?
SFCALM	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT CALM AND PEACEFUL?
SFENERGY	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU HAD A LOT OF ENERGY?
SFDOWN	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT DEPRESSED?

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SFINTERF	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAS YOUR PHYSICAL HEALTH OR EMOTIONAL PROBLEMS INTERFERED WITH YOUR SOCIAL ACTIVITIES (LIKE VISITING FRIENDS, RELATIVES, ETC.)?
PCS_12	NUM	SF-12V2 PHYSICAL SUMMARY SCORE
MCS_12	NUM	SF-12V2 MENTAL SUMMARY SCORE
PF_T	NUM	NEMC PHYSICAL FUNCTIONING T-SCORE BASED ON SFMODACT AND SFCLIMB
RP_T	NUM	NEMC ROLE LIMITATION PHYSICAL T-SCORE BASED ON SFACCOMP AND SFLIMITD
BP_T	NUM	NEMC PAIN T-SCORE BASED ON SFPAIN
GH_T	NUM	NEMC GENERAL HEALTH T-SCORE BASED ON PFHLTH
VT_T	NUM	NEMC VITALITY T-SCORE BASED ON SFENERGY
RE_T	NUM	NEMC ROLE LIMITATION EMOTIONAL T-SCORE BASED ON SFEMOT AND SFCAREFL
SF_T	NUM	NEMC SOCIAL FUNCTIONING T-SCORE BASED ON SFINTERF
MH_T	NUM	NEMC MENTAL HEALTH T-SCORE BASED ON SFCALM AND SFDOWN
SFHEALTH	NUM	COMPARED WITH YOUR HEALTH ONE YEAR AGO, HOW IS YOUR HEALTH NOW?
SFACTIVE	NUM	REGARDING YOUR PRESENT SOCIAL ACTIVITIES, DO YOU FEEL THAT YOU ARE DOING...
SFSOCIAL	NUM	HAVE YOUR SOCIAL OPPORTUNITIES INCREASED SINCE YOU BECAME INVOLVED WITH THESE SERVICES?
PFDISA	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ARTHRITIS OR RHEUMATISM?
PFDISB	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH BLOOD PRESSURE OR HYPERTENSION?
PFDISC	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEART DISEASE?
PFDISD	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH CHOLESTEROL?
PFDISE	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE DIABETES OR HIGH BLOOD SUGAR?
PFDISF	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE BREATHING OR LUNG PROBLEMS INCLUDING EMPHYSEMA, ALLERGIES, OR ASTHMA?
PFDISG	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE CANCER?
PFDISH	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HAD A STROKE?
PFDISI	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANEMIA?
PFDISJ	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE OSTEOPOROSIS?
PFDISK	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE KIDNEY DISEASE?
PFDISL	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE GLAUCOMA, CATARACTS, MACULAR DEGENERATION, OR OTHER EYE OR VISION CONDITIONS (EXCLUDING GLASSES)?
PFDISM	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEARING PROBLEMS?
PFDISN	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE EMOTIONAL, NERVOUS OR PSYCHIATRIC PROBLEMS?
PFDISO	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MEMORY RELATED DISEASE SUCH AS ALZHEIMER'S DISEASE OR DEMENTIA?
PFDISP	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SEIZURES OR EPILEPSY?
PFDISQ	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PARKINSON'S DISEASE?
PFDISR	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PERSISTENT PAIN, ACHING, STIFFNESS OR SWELLING AROUND A JOINT?
PFDISS	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MULTIPLE SCLEROSIS?

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<i>Name</i>	<i>Type</i>	<i>Description</i>
PFDIST	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE A SERIOUS PROBLEM WITH URINARY INCONTINENCE?
PFDISU	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SOMETHING ELSE?
PFLEARN	NUM	DO YOU HAVE ANY DIFFICULTY LEARNING, REMEMBERING, OR CONCENTRATING DUE TO A PHYSICAL, MENTAL OR EMOTIONAL CONDITION LASTING 6 MONTHS OR MORE?
HLMDRUGS	NUM	# DIFF MEDICINES YOU TAKE DAILY
HLMHOSP	NUM	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A HOSPITAL?
HLMNH	NUM	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A NURSING HOME OR REHABILITATION CENTER?
PFDFIN	NUM	DO YOU HAVE DIFFICULTY GETTING AROUND INSIDE THE HOME?
PFDFINB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET AROUND INSIDE THE HOME?
PFDFOU	NUM	DO YOU HAVE DIFFICULTY GOING OUTSIDE THE HOME, FOR EXAMPLE TO SHOP OR VISIT A DOCTOR'S OFFICE?
PFDFOUB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GO OUTSIDE THE HOME?
PFBED	NUM	DO YOU HAVE DIFFICULTY GETTING IN OR OUT OF BED OR A CHAIR?
PFBEDB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET IN OR OUT OF BED OR A CHAIR?
PFBATH	NUM	DO YOU HAVE DIFFICULTY WHEN TAKING A BATH OR A SHOWER?
PFBATHB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE A BATH OR A SHOWER?
PFDRES	NUM	DO YOU HAVE DIFFICULTY WHEN DRESSING?
PFDRESB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET DRESSED?
PFWALK	NUM	DO YOU HAVE DIFFICULTY WHEN WALKING?
PFWALKB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO WALK?
PFEAT	NUM	DO YOU HAVE DIFFICULTY EATING?
PFEATB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO EAT?
PFWC	NUM	DO YOU HAVE DIFFICULTY USING THE TOILET OR GETTING TO THE TOILET?
PFWCB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TOILET OR GET TO THE TOILET?
PFDLR	NUM	DO YOU HAVE DIFFICULTY KEEPING TRACK OF MONEY OR BILLS?
PFDLRB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO KEEP TRACK OF MONEY OR BILLS?
PFMEAL	NUM	DO YOU HAVE DIFFICULTY PREPARING MEALS?
PFMEALB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO PREPARE MEALS?
PFCLEN	NUM	DO YOU HAVE DIFFICULTY DOING LIGHT HOUSEWORK, SUCH AS WASHING DISHES OR SWEEPING A FLOOR?
PFCLENB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO LIGHT HOUSEWORK?
PFHCLEN	NUM	DO YOU HAVE DIFFICULTY DOING HEAVY HOUSEWORK, SUCH AS SCRUBBING FLOORS OR WASHING WINDOWS?
PFHCLENB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO HEAVY HOUSEWORK?
PFTKDG	NUM	DO YOU HAVE DIFFICULTY TAKING THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?
PFTKDGB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?
PFFONE	NUM	DO YOU HAVE DIFFICULTY USING THE TELEPHONE?

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<i>Name</i>	<i>Type</i>	<i>Description</i>
PFFONEB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TELEPHONE?
PFDRIVE	NUM	DO YOU HAVE DIFFICULTY DRIVING AN AUTOMOBILE?
PFBUS	NUM	IS LOCAL BUS, TRANSIT BUS, OR CITY BUS SERVICE AVAILABLE WITHIN 3/4 OF A MILE FROM YOUR HOME?
PFUSEBUS	NUM	DO YOU HAVE DIFFICULTY USING THIS TRANSPORTATION?
PFBUSEB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THIS TRANSPORTATION?
FAMFRND	NUM	WHO PROVIDED THE MOST HELP WITH THESE ACTIVITIES?
WHOHELPS	NUM	WHICH FAMILY MEMBER HELPS YOU THE MOST WITH THESE ACTIVITIES?
ADLAOA6	NUM	PERSON COUNT BY NUMBER OF ADL DIFFICULTIES: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.
ADLAOA6_SSS	NUM	AOA ADL LIMITATIONS, SSS VERSION
ADL3PLUS	NUM	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS
ADL3PLUS_SSS	NUM	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS, SSS VERSION
ADLAOA6P	NUM	AMONG THOSE WITH ANY ADL DIFFICULTY, PERSON COUNTS BY NUMBER OF ADL PERSONAL ASSISTANCE NEEDS: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.
ADLAOA6P_SSS	NUM	AOA ADLS: NEEDS HELP OF ANOTHER PERSON, SSS VERSION
IADLAOA7	NUM	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MANAGEMENT, PREPARING MEALS, LIGHT HOUSEWORK, MEDICATION MANAGEMENT, USING THE PHONE, OR DRIVING CAR/PUBLIC TRANSPORTATION.
IADLAOA7_SSS	NUM	AOA IADL LIMITATIONS, SSS VERSION
IADLAOA7P	NUM	AMONG THOSE W/ ANY IADL DIFFICULTY, PERSON COUNTS BY # OF IADL PERSONAL ASSIST. NEEDS (OF 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, MEAL PREP, LIGHT HOUSEWORK, MEDICATION MGMT, USING THE PHONE, OR DRIVING CAR/USING PUBLIC TRANS.
IADLAOA7P_SSS	NUM	AOA IADLS: PERSONAL ASSISTANCE NEEDS, SSS VERSION
IADLAOA8	NUM	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 8 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, PREPARING MEALS, LIGHT HOUSEWORK, HEAVY HOUSEWORK, MEDICATION MANAGEMENT, USING THE TELEPHONE, OR DRIVING A CAR/USING PUBLIC TRANSPORTATION.
IADLAOA8_SSS	NUM	AOA IADL LIMITATIONS W/ HEAVY HOUSEWORK ADDED, SSS VERSION
IADLAOA8P	NUM	AMONG THOSE W/ ANY IADL DIFFICULTY, PERSON COUNTS BY # OF IADL PERSONAL ASSIST. NEEDS (OF 8 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMT, MEAL PREP, LIGHT HOUSEWORK, HEAVY HOUSEWORK, MED MGMT, USING PHONE, DRIVING CAR/ PUBLIC TRANS.
IADLAOA8P_SSS	NUM	AOA IADLS: PERSONAL ASSISTANCE NEEDS W/ HEAVY HOUSEWORK ADDED, SSS VERSION
AGEC	NUM	AGE CATEGORY
GENDER	NUM	GENDER
DEEDUC	NUM	WHAT IS YOUR HIGHEST LEVEL OF EDUCATION?
DEHISP	NUM	ARE YOU SPANISH, HISPANIC, OR LATINO?
DERAC01	NUM	WHAT IS YOUR RACE? WHITE OR CAUCASIAN
DERAC02	NUM	WHAT IS YOUR RACE? BLACK OR AFRICAN-AMERICAN
DERAC03	NUM	WHAT IS YOUR RACE? ASIAN
DERAC04	NUM	WHAT IS YOUR RACE? AMERICAN INDIAN OR ALASKAN NATIVE
DERAC05	NUM	WHAT IS YOUR RACE? NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
DERAC06	NUM	WHAT IS YOUR RACE? OTHER

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<i>Name</i>	<i>Type</i>	<i>Description</i>
DELOC	NUM	WHERE IS YOUR HOME LOCATED?
LIVEALONE	NUM	DO YOU LIVE ALONE? SSS CONSTRUCTED
DELVSP1	NUM	DO YOU LIVE WITH YOUR SPOUSE?
DELVKID2	NUM	DO YOU LIVE WITH YOUR CHILDREN?
DELVREL3	NUM	DO YOU LIVE WITH OTHER RELATIVES?
DELVNRL4	NUM	DO YOU LIVE WITH NON-RELATIVES?
LIVARRC	NUM	WHO DO YOU LIVE WITH?
DEHHM	NUM	INCLUDING YOURSELF, HOW MANY PEOPLE LIVE IN YOUR HOUSEHOLD?
DEMARST	NUM	WHAT IS YOUR MARITAL STATUS?
DEINAB	NUM	THINKING ABOUT THE TOTAL COMBINED INCOME FROM ALL SOURCES FOR ALL PERSONS IN THIS HOUSEHOLD, WAS YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008 ABOVE OR BELOW \$20,000?
INCOMEC	NUM	WHAT CATEGORY BEST DESCRIBES YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008?
URBAN	NUM	URBAN CODE
VARSTRAT	NUM	VARIANCE STRATUM
VARUNIT	NUM	VARIANCE UNIT
PSWGT	NUM	FINAL POST-STRATIFIED FULL SAMPLE WEIGHT
PSWGT1	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 1
PSWGT2	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 2
PSWGT3	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 3
PSWGT4	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 4
PSWGT5	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 5
PSWGT6	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 6
PSWGT7	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 7
PSWGT8	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 8
PSWGT9	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 9
PSWGT10	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 10
PSWGT11	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 11
PSWGT12	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 12
PSWGT13	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 13
PSWGT14	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 14
PSWGT15	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 15
PSWGT16	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 16
PSWGT17	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 17
PSWGT18	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 18
PSWGT19	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 19
PSWGT20	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 20
PSWGT21	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 21

Positional Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PSWGT22	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 22
PSWGT23	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 23
PSWGT24	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 24
PSWGT25	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 25
PSWGT26	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 26
PSWGT27	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 27
PSWGT28	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 28
PSWGT29	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 29
PSWGT30	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 30
PSWGT31	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 31
PSWGT32	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 32
PSWGT33	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 33
PSWGT34	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 34
PSWGT35	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 35
PSWGT36	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 36
PSWGT37	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 37
PSWGT38	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 38
PSWGT39	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 39
PSWGT40	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 40
PSWGT41	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 41
PSWGT42	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 42
PSWGT43	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 43
PSWGT44	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 44
PSWGT45	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 45
PSWGT46	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 46
PSWGT47	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 47
PSWGT48	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 48
PSWGT49	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 49
PSWGT50	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 50
PSWGT51	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 51
PSWGT52	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 52
PSWGT53	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 53
PSWGT54	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 54
PSWGT55	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 55
PSWGT56	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 56
PSWGT57	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 57
PSWGT58	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 58
PSWGT59	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 59

Positional Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PSWGT60	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 60
PSWGT61	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 61
PSWGT62	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 62
PSWGT63	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 63
PSWGT64	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 64
NUM_COND	NUM	TOTAL NUMBER OF MEDICAL CONDITIONS REPORTED

Alphabetical Listing of Variables

Name	Type	Description
ADL3PLUS	NUM	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS
ADL3PLUS_SSS	NUM	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS, SSS VERSION
ADLAOA6	NUM	PERSON COUNT BY NUMBER OF ADL DIFFICULTIES: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.
ADLAOA6P	NUM	AMONG THOSE WITH ANY ADL DIFFICULTY, PERSON COUNTS BY NUMBER OF ADL PERSONAL ASSISTANCE NEEDS: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.
ADLAOA6P_SSS	NUM	AOA ADLS: NEEDS HELP OF ANOTHER PERSON, SSS VERSION
ADLAOA6_SSS	NUM	AOA ADL LIMITATIONS, SSS VERSION
AGEC	NUM	AGE CATEGORY
BENEFITS	NUM	HAVE YOU RECEIVED HELP GETTING BENEFITS LIKE FOOD STAMPS AND OTHER PUBLIC ASSISTANCE?
BP_T	NUM	NEMC PAIN T-SCORE BASED ON SFPAIN
CCOPY	NUM	DID YOU GET A COPY OF THE PLAN?
CSARRNG	NUM	DO YOUR FAMILY OR FRIENDS HELP ARRANGE FOR THE SERVICES YOU RECEIVE?
CSBETTR	NUM	HAS YOUR SITUATION IMPROVED BECAUSE OF THE SERVICES YOUR CASE MANAGER ARRANGES?
CSCARE	NUM	DOES YOUR CASE MANAGER DO A GOOD JOB SETTING UP CARE FOR YOU?
CSCONT	NUM	DO YOU KNOW HOW TO CONTACT YOUR CASE MANAGER WHEN YOU NEED TO?
CSDAYS	NUM	WHEN WAS THE LAST TIME YOU RECEIVED THE CASE MANAGEMENT SERVICES?
CSELSVC	NUM	ARE YOU ABLE TO SELECT THE SERVICES YOU RECEIVE?
CSEXPLN	NUM	DOES YOUR CASE MANAGER EXPLAIN YOUR SERVICES IN A WAY THAT YOU CAN UNDERSTAND?
CSFONEC	NUM	DOES YOUR CASE MANAGER RETURN YOUR PHONE CALLS IN A TIMELY MANNER?
CSGTMOR	NUM	DOES YOUR CASE MANAGER HELP YOU GET SERVICES THAT YOU DID NOT HAVE BEFORE?
CSHOME	NUM	DO YOUR FAMILY OR FRIENDS ALSO PROVIDE ASSISTANCE THAT HELPS YOU STAY AT HOME?
CSHOWLG	NUM	HOW LONG HAVE YOU BEEN RECEIVING THE CASE MANAGEMENT SERVICES?
CSINVOLV	NUM	DOES YOUR CASE MANAGER INVOLVE YOU IN DISCUSSING AND PLANNING FOR YOUR SERVICES?
CSKNOW	NUM	AS A RESULT OF RECEIVING THE CASE MANAGEMENT SERVICES, DO YOU HAVE A BETTER IDEA OF WHERE TO GET INFORMATION ABOUT OTHER SERVICES?
CSNEEDS	NUM	DO YOU AND YOUR CASE MANAGER WORK TOGETHER TO DECIDE WHAT SERVICES YOU NEED?
CSRATE	NUM	HOW WOULD YOU RATE THE CASE MANAGEMENT SERVICES THAT YOU HAVE RECEIVED?
CSRATE2	NUM	RATING OF CASE MANAGEMENT SERVICES GOOD TO EXCELLENT
CSRESPT	NUM	DOES YOUR CASE MANAGER TREAT YOU WITH RESPECT?
CSELPRV	NUM	ARE YOU ABLE TO SELECT YOUR SERVICE PROVIDER?
CSSTAYHM	NUM	DO THE SERVICES YOU RECEIVE HELP YOU CONTINUE TO LIVE IN YOUR OWN HOME?
CSSVCPLN	NUM	DID YOUR CASE MANAGER DEVELOP A CARE PLAN FOR THE SERVICE YOU NEED?
DEEDUC	NUM	WHAT IS YOUR HIGHEST LEVEL OF EDUCATION?
DEHHM	NUM	INCLUDING YOURSELF, HOW MANY PEOPLE LIVE IN YOUR HOUSEHOLD?
DEHISP	NUM	ARE YOU SPANISH, HISPANIC, OR LATINO?

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
DEINAB	NUM	THINKING ABOUT THE TOTAL COMBINED INCOME FROM ALL SOURCES FOR ALL PERSONS IN THIS HOUSEHOLD, WAS YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008 ABOVE OR BELOW \$20,000?
DELOC	NUM	WHERE IS YOUR HOME LOCATED?
DELVKID2	NUM	DO YOU LIVE WITH YOUR CHILDREN?
DELVNRL4	NUM	DO YOU LIVE WITH NON-RELATIVES?
DELVREL3	NUM	DO YOU LIVE WITH OTHER RELATIVES?
DELVSP1	NUM	DO YOU LIVE WITH YOUR SPOUSE?
DEMARST	NUM	WHAT IS YOUR MARITAL STATUS?
DERAC01	NUM	WHAT IS YOUR RACE? WHITE OR CAUCASIAN
DERAC02	NUM	WHAT IS YOUR RACE? BLACK OR AFRICAN-AMERICAN
DERAC03	NUM	WHAT IS YOUR RACE? ASIAN
DERAC04	NUM	WHAT IS YOUR RACE? AMERICAN INDIAN OR ALASKAN NATIVE
DERAC05	NUM	WHAT IS YOUR RACE? NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
DERAC06	NUM	WHAT IS YOUR RACE? OTHER
EXERCISE	NUM	HAVE YOU TAKEN EXERCISE OR FITNESS CLASSES OR DO YOU USE THE EXERCISE EQUIPMENT AT A SENIOR CENTER OR OTHER PROGRAM FOR OLDER ADULTS?
FAMFRND	NUM	WHO PROVIDED THE MOST HELP WITH THESE ACTIVITIES?
GENDER	NUM	GENDER
GH_T	NUM	NEMC GENERAL HEALTH T-SCORE BASED ON PFHLTH
HLMDRUGS	NUM	# DIFF MEDICINES YOU TAKE DAILY
HLMHOSP	NUM	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A HOSPITAL?
HLMNH	NUM	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A NURSING HOME OR REHABILITATION CENTER?
HLTHSCRN	NUM	HAVE YOU RECEIVED HEALTH SCREENINGS SUCH AS BLOOD PRESSURE CHECKS OTHER THAN THOSE FROM YOUR OWN DOCTOR?
HNREDUYN	NUM	DO YOU HAVE A NUTRITION COUNSELOR WHO GIVES YOU ADVICE ON WHAT YOU SHOULD EAT BASED ON YOUR HEALTH CONDITIONS AND YOUR FOOD CHOICES?
IADLAOA7	NUM	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MANAGEMENT, PREPARING MEALS, LIGHT HOUSEWORK, MEDICATION MANAGEMENT, USING THE PHONE, OR DRIVING CAR/PUBLIC TRANSPORTATION.
IADLAOA7P	NUM	AMONG THOSE W/ ANY IADL DIFFICULTY, PERSON COUNTS BY # OF IADL PERSONAL ASSIST. NEEDS (OF 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, MEAL PREP, LIGHT HOUSEWORK, MEDICATION MGMT, USING THE PHONE, OR DRIVING CAR/USING PUBLIC TRANS.
IADLAOA7P_SSS	NUM	AOA IADLS: PERSONAL ASSISTANCE NEEDS, SSS VERSION
IADLAOA7_SSS	NUM	AOA IADL LIMITATIONS, SSS VERSION
IADLAOA8	NUM	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 8 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, PREPARING MEALS, LIGHT HOUSEWORK, HEAVY HOUSEWORK, MEDICATION MANAGEMENT, USING THE TELEPHONE, OR DRIVING A CAR/USING PUBLIC TRANSPORTATION.
IADLAOA8P	NUM	AMONG THOSE W/ ANY IADL DIFFICULTY, PERSON COUNTS BY # OF IADL PERSONAL ASSIST. NEEDS (OF 8 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMT, MEAL PREP, LIGHT HOUSEWORK, HEAVY HOUSEWORK, MED MGMT, USING PHONE, DRIVING CAR/ PUBLIC TRANS.
IADLAOA8P_SSS	NUM	AOA IADLS: PERSONAL ASSISTANCE NEEDS W/ HEAVY HOUSEWORK ADDED, SSS VERSION
IADLAOA8_SSS	NUM	AOA IADL LIMITATIONS W/ HEAVY HOUSEWORK ADDED, SSS VERSION

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
INCOME1	NUM	WHAT CATEGORY BEST DESCRIBES YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008?
LIVARRC	NUM	WHO DO YOU LIVE WITH?
LIVEALONE	NUM	DO YOU LIVE ALONE? SSS CONSTRUCTED
MCS_12	NUM	SF-12V2 MENTAL SUMMARY SCORE
MEDS	NUM	HAVE YOU RECEIVED ASSISTANCE IN ADMINISTERING OR MONITORING THE SIDE EFFECTS OF MEDICINE?
MH_T	NUM	NEMC MENTAL HEALTH T-SCORE BASED ON SFCALM AND SFDOWN
NUM_COND	NUM	TOTAL NUMBER OF MEDICAL CONDITIONS REPORTED
PCS_12	NUM	SF-12V2 PHYSICAL SUMMARY SCORE
PERSID	CHAR	PERSON ID
PFBATH	NUM	DO YOU HAVE DIFFICULTY WHEN TAKING A BATH OR A SHOWER?
PFBATHB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE A BATH OR A SHOWER?
PFBED	NUM	DO YOU HAVE DIFFICULTY GETTING IN OR OUT OF BED OR A CHAIR?
PFBEDB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET IN OR OUT OF BED OR A CHAIR?
PFBUS	NUM	IS LOCAL BUS, TRANSIT BUS, OR CITY BUS SERVICE AVAILABLE WITHIN 3/4 OF A MILE FROM YOUR HOME?
PFBUSEB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THIS TRANSPORTATION?
PFCLEN	NUM	DO YOU HAVE DIFFICULTY DOING LIGHT HOUSEWORK, SUCH AS WASHING DISHES OR SWEEPING A FLOOR?
PFCLENB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO LIGHT HOUSEWORK?
PFDFIN	NUM	DO YOU HAVE DIFFICULTY GETTING AROUND INSIDE THE HOME?
PFDFINB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET AROUND INSIDE THE HOME?
PFDFOU	NUM	DO YOU HAVE DIFFICULTY GOING OUTSIDE THE HOME, FOR EXAMPLE TO SHOP OR VISIT A DOCTOR'S OFFICE?
PFDFOUB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GO OUTSIDE THE HOME?
PFDISA	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ARTHRITIS OR RHEUMATISM?
PFDISB	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH BLOOD PRESSURE OR HYPERTENSION?
PFDISC	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEART DISEASE?
PFDISD	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH CHOLESTEROL?
PFDISE	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE DIABETES OR HIGH BLOOD SUGAR?
PFDISF	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE BREATHING OR LUNG PROBLEMS INCLUDING EMPHYSEMA, ALLERGIES, OR ASTHMA?
PFDISG	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE CANCER?
PFDISH	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HAD A STROKE?
PFDISI	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANEMIA?
PFDISJ	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE OSTEOPOROSIS?
PFDISK	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE KIDNEY DISEASE?
PFDISL	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE GLAUCOMA, CATARACTS, MACULAR DEGENERATION, OR OTHER EYE OR VISION CONDITIONS (EXCLUDING GLASSES)?

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PFDISM	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEARING PROBLEMS?
PFDISN	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE EMOTIONAL, NERVOUS OR PSYCHIATRIC PROBLEMS?
PFDISO	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MEMORY RELATED DISEASE SUCH AS ALZHEIMER'S DISEASE OR DEMENTIA?
PFDISP	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SEIZURES OR EPILEPSY?
PFDISQ	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PARKINSON'S DISEASE?
PFDISR	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PERSISTENT PAIN, ACHING, STIFFNESS OR SWELLING AROUND A JOINT?
PFDISS	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MULTIPLE SCLEROSIS?
PFDIST	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE A SERIOUS PROBLEM WITH URINARY INCONTINENCE?
PFDISU	NUM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SOMETHING ELSE?
PFDLR	NUM	DO YOU HAVE DIFFICULTY KEEPING TRACK OF MONEY OR BILLS?
PFDLRB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO KEEP TRACK OF MONEY OR BILLS?
PFDRES	NUM	DO YOU HAVE DIFFICULTY WHEN DRESSING?
PFDRESB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET DRESSED?
PFDRIVE	NUM	DO YOU HAVE DIFFICULTY DRIVING AN AUTOMOBILE?
PFEAT	NUM	DO YOU HAVE DIFFICULTY EATING?
PFEATB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO EAT?
PFFONE	NUM	DO YOU HAVE DIFFICULTY USING THE TELEPHONE?
PFFONEB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TELEPHONE?
PFHCLEN	NUM	DO YOU HAVE DIFFICULTY DOING HEAVY HOUSEWORK, SUCH AS SCRUBBING FLOORS OR WASHING WINDOWS?
PFHCLENB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO HEAVY HOUSEWORK?
PFHLTH	NUM	IN GENERAL, HOW IS YOUR HEALTH?
PFLEARN	NUM	DO YOU HAVE ANY DIFFICULTY LEARNING, REMEMBERING, OR CONCENTRATING DUE TO A PHYSICAL, MENTAL OR EMOTIONAL CONDITION LASTING 6 MONTHS OR MORE?
PFMEAL	NUM	DO YOU HAVE DIFFICULTY PREPARING MEALS?
PFMEALB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO PREPARE MEALS?
PFTKDG	NUM	DO YOU HAVE DIFFICULTY TAKING THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?
PFTKDGB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?
PFUSEBUS	NUM	DO YOU HAVE DIFFICULTY USING THIS TRANSPORTATION?
PFWALK	NUM	DO YOU HAVE DIFFICULTY WHEN WALKING?
PFWALKB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO WALK?
PFWC	NUM	DO YOU HAVE DIFFICULTY USING THE TOILET OR GETTING TO THE TOILET?
PFWCB	NUM	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TOILET OR GET TO THE TOILET?
PF_T	NUM	NEMC PHYSICAL FUNCTIONING T-SCORE BASED ON SFMODACT AND SFCLIMB
PSWGT	NUM	FINAL POST-STRATIFIED FULL SAMPLE WEIGHT

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PSWGT1	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 1
PSWGT10	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 10
PSWGT11	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 11
PSWGT12	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 12
PSWGT13	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 13
PSWGT14	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 14
PSWGT15	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 15
PSWGT16	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 16
PSWGT17	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 17
PSWGT18	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 18
PSWGT19	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 19
PSWGT2	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 2
PSWGT20	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 20
PSWGT21	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 21
PSWGT22	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 22
PSWGT23	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 23
PSWGT24	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 24
PSWGT25	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 25
PSWGT26	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 26
PSWGT27	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 27
PSWGT28	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 28
PSWGT29	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 29
PSWGT3	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 3
PSWGT30	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 30
PSWGT31	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 31
PSWGT32	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 32
PSWGT33	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 33
PSWGT34	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 34
PSWGT35	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 35
PSWGT36	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 36
PSWGT37	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 37
PSWGT38	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 38
PSWGT39	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 39
PSWGT4	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 4
PSWGT40	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 40
PSWGT41	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 41
PSWGT42	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 42
PSWGT43	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 43

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
PSWGT44	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 44
PSWGT45	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 45
PSWGT46	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 46
PSWGT47	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 47
PSWGT48	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 48
PSWGT49	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 49
PSWGT5	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 5
PSWGT50	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 50
PSWGT51	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 51
PSWGT52	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 52
PSWGT53	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 53
PSWGT54	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 54
PSWGT55	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 55
PSWGT56	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 56
PSWGT57	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 57
PSWGT58	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 58
PSWGT59	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 59
PSWGT6	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 6
PSWGT60	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 60
PSWGT61	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 61
PSWGT62	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 62
PSWGT63	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 63
PSWGT64	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 64
PSWGT7	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 7
PSWGT8	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 8
PSWGT9	NUM	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 9
RE_T	NUM	NEMC ROLE LIMITATION EMOTIONAL T-SCORE BASED ON SFEMOT AND SFCAREFL
RP_T	NUM	NEMC ROLE LIMITATION PHYSICAL T-SCORE BASED ON SFACCOMP AND SFLIMITD
SFACCOMP	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF YOUR PHYSICAL HEALTH?
SFACTIVE	NUM	REGARDING YOUR PRESENT SOCIAL ACTIVITIES, DO YOU FEEL THAT YOU ARE DOING...
SFCALM	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT CALM AND PEACEFUL?
SFCAREFL	NUM	DURING THE PAST 4 WEEKS, HOW MUCH OF THE TIME DID YOU DO WORK OR OTHER REGULAR DAILY ACTIVITIES LESS CAREFULLY THAN USUAL AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?
SFCLIMB	NUM	DOES YOUR HEALTH LIMIT YOUR ABILITY TO CLIMB SEVERAL FLIGHTS OF STAIRS?
SFDOWN	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT DEPRESSED?

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
SFEMOT	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?
SFENERGY	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU HAD A LOT OF ENERGY?
SFHEALTH	NUM	COMPARED WITH YOUR HEALTH ONE YEAR AGO, HOW IS YOUR HEALTH NOW?
SFINTERF	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAS YOUR PHYSICAL HEALTH OR EMOTIONAL PROBLEMS INTERFERED WITH YOUR SOCIAL ACTIVITIES (LIKE VISITING FRIENDS, RELATIVES, ETC.)?
SFLIMITD	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME WERE YOU LIMITED IN THE KIND OF WORK OR OTHER REGULAR DAILY ACTIVITIES YOU DO AS A RESULT OF YOUR PHYSICAL HEALTH?
SFMODACT	NUM	DOES YOUR HEALTH LIMIT YOUR ABILITY TO DO MODERATE ACTIVITIES SUCH AS MOVING A TABLE, PUSHING A VACUUM CLEANER, BOWLING, OR PLAYING GOLF?
SFPAIN	NUM	DURING THE PAST FOUR WEEKS, HOW MUCH DID PAIN INTERFERE WITH YOUR NORMAL WORK (INCLUDING BOTH WORK OUTSIDE THE HOME AND HOUSEWORK)?
SFSOCIAL	NUM	HAVE YOUR SOCIAL OPPORTUNITIES INCREASED SINCE YOU BECAME INVOLVED WITH THESE SERVICES?
SF_T	NUM	NEMC SOCIAL FUNCTIONING T-SCORE BASED ON SFINTERF
SHOTS	NUM	HAVE YOU RECEIVED FLU SHOTS, PNEUMONIA SHOTS OR OTHER IMMUNIZATIONS OTHER THAN THOSE FROM YOUR OWN DOCTOR?
SVC5A	NUM	ARE YOU RECEIVING FOOD STAMPS?
SVC5B	NUM	ARE YOU RECEIVING ENERGY ASSISTANCE?
SVC5C	NUM	ARE YOU RECEIVING MEDICAID?
SVC5D	NUM	ARE YOU RECEIVING HOUSING ASSISTANCE?
SVCCM	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED CONGREGATE MEALS?
SVCCOUNT	NUM	SERVICE COMBINATIONS
SVCCURT	NUM	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES ARE GENERALLY COURTEOUS?
SVC DYCR	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED ADULT DAYCARE SERVICES?
SVCHDM	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED HOME DELIVERED MEALS?
SVCHORE	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED CHORE SERVICES?
SVCHOUSE	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED HOMEMAKER OR HOUSEKEEPING SERVICES?
SVCIAA	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED INFORMATION AND ASSISTANCE SERVICES?
SVCIDEA	NUM	SINCE YOU STARTED RECEIVING SERVICES, DO YOU HAVE A BETTER IDEA OF HOW TO GET ANY ADDITIONAL HELP THAT YOU NEED?
SVCIND	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU ABLE TO LIVE INDEPENDENTLY?
SVCLGL	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED LEGAL ASSISTANCE?
SVCPCR	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED PERSONAL CARE SERVICES?
SVCRATE	NUM	OVERALL, HOW WOULD YOU RATE THE GROUP OF SERVICES YOU RECEIVE?
SVCSECUR	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, DO YOU FEEL MORE SECURE?
SVCSELF	NUM	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU BETTER ABLE TO CARE FOR YOURSELF?
SVC SUPOS	NUM	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES DO THE THINGS THEY ARE SUPPOSED TO DO?

Alphabetical Listing of Variables

<i>Name</i>	<i>Type</i>	<i>Description</i>
SVCTRAN	NUM	IN THE PAST YEAR, HAVE YOU RECEIVED TRANSPORTATION SERVICES?
URBAN	NUM	URBAN CODE
VARSTRAT	NUM	VARIANCE STRATUM
VARUNIT	NUM	VARIANCE UNIT
VT_T	NUM	NEMC VITALITY T-SCORE BASED ON SFENERGY
WHOHELPS	NUM	WHICH FAMILY MEMBER HELPS YOU THE MOST WITH THESE ACTIVITIES?

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
PERSID	PERSON ID		Person ID	486	475,833
				486	475,833
CSDAYS	WHEN WAS THE LAST TIME YOU RECEIVED THE CASE MANAGEMENT SERVICES?	1	Today Or Yesterday	107	107,529
		2	More Than 1 Day To 1 Week Ago	96	90,642
		3	More Than 1 Week To 1 Month Ago	112	95,649
		4	More Than 1 Month Ago	171	182,013
				486	475,833
CSCONT	DO YOU KNOW HOW TO CONTACT YOUR CASE MANAGER WHEN YOU NEED TO?	-8	Don't Know	2	3,429
		1	Yes	416	397,464
		2	No	68	74,940
				486	475,833
CSFONEC	DOES YOUR CASE MANAGER RETURN YOUR PHONE CALLS IN A TIMELY MANNER?	-8	Don't Know	40	28,212
		1	Yes	420	414,040
		2	No	26	33,582
				486	475,833
CSEXPLN	DOES YOUR CASE MANAGER EXPLAIN YOUR SERVICES IN A WAY THAT YOU CAN UNDERSTAND?	-8	Don't Know	5	6,019
		1	Yes	463	452,488
		2	No	18	17,326
				486	475,833
CSNEEDS	DO YOU AND YOUR CASE MANAGER WORK TOGETHER TO DECIDE WHAT SERVICES YOU NEED?	-8	Don't Know	11	11,347
		1	Yes	429	428,583
		2	No	46	35,903
				486	475,833
CSRESPT	DOES YOUR CASE MANAGER TREAT YOU WITH RESPECT?	-8	Don't Know	3	1,277
		1	Yes	483	474,556
				486	475,833
CSINVOLV	DOES YOUR CASE MANAGER INVOLVE YOU IN DISCUSSING AND PLANNING FOR YOUR SERVICES?	-8	Don't Know	11	15,706
		1	Yes	429	398,091
		2	No	46	62,036

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
CSCARE	DOES YOUR CASE MANAGER DO A GOOD JOB SETTING UP CARE FOR YOU?	-8	Don't Know	11	11,691
		1	Yes	450	433,654
		2	No	25	30,489
				486	475,833
CSGTMOR	DOES YOUR CASE MANAGER HELP YOU GET SERVICES THAT YOU DID NOT HAVE BEFORE?	-8	Don't Know	22	27,690
		1	Yes	399	379,485
		2	No	65	68,658
				486	475,833
CSBETTR	HAS YOUR SITUATION IMPROVED BECAUSE OF THE SERVICES YOUR CASE MANAGER ARRANGES?	-8	Don't Know	14	13,621
		1	Yes	402	369,011
		2	No	70	93,201
				486	475,833
CSHOWLG	HOW LONG HAVE YOU BEEN RECEIVING THE CASE MANAGEMENT SERVICES?	-8	Don't Know	3	2,877
		1	6 Months Or Less	77	101,296
		2	More Than 6 Months But Less Than 1 Year	75	75,437
		3	At Least 1 Year But Less Than 2 Years	117	116,068
		4	2 To 5 Years	158	141,610
		5	More Than 5 Years	56	38,545
				486	475,833
CSSVCPLN	DID YOUR CASE MANAGER DEVELOP A CARE PLAN FOR THE SERVICE YOU NEED?	-8	Don't Know	36	36,551
		1	Yes	392	373,465
		2	No	58	65,817
				486	475,833
CCOPY	DID YOU GET A COPY OF THE PLAN?	-8	Don't Know	48	37,746
		-7	Refused	1	71
		-1	Not Collected	94	102,368
		1	Yes	279	240,077
		2	No	64	95,570
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
CSELSVC	ARE YOU ABLE TO SELECT THE SERVICES YOU RECEIVE?	-8	Don't Know	23	27,619
		-7	Refused	1	12
		1	Yes	395	376,187
		2	No	67	72,016
				486	475,833
CSSELPRV	ARE YOU ABLE TO SELECT YOUR SERVICE PROVIDER?	-8	Don't Know	41	37,958
		1	Yes	292	294,661
		2	No	153	143,214
				486	475,833
CSRATE	HOW WOULD YOU RATE THE CASE MANAGEMENT SERVICES THAT YOU HAVE RECEIVED?	1	Excellent	192	161,299
		2	Very Good	185	159,899
		3	Good	78	108,866
		4	Fair	26	41,432
		5	Poor	5	4,337
				486	475,833
CSRATE2	RATING OF CASE MANAGEMENT SERVICES GOOD TO EXCELLENT	1	Rating of Good to Excellent	455	430,064
		2	Rating of Fair or Poor	31	45,769
				486	475,833
CSSTAYHM	DO THE SERVICES YOU RECEIVE HELP YOU CONTINUE TO LIVE IN YOUR OWN HOME?	-8	Don't Know	5	7,434
		1	Yes	448	415,574
		2	No	33	52,826
				486	475,833
CSKNOW	AS A RESULT OF RECEIVING THE CASE MANAGEMENT SERVICES, DO YOU HAVE A BETTER IDEA OF WHERE TO GET INFORMATION ABOUT OTHER SERVICES?	-8	Don't Know	13	23,988
		-7	Refused	1	196
		1	Yes	313	285,812
		2	No	159	165,838
				486	475,833
SVCCM	IN THE PAST YEAR, HAVE YOU RECEIVED CONGREGATE MEALS?	-8	Don't Know	3	2,732
		1	Yes	81	67,997
		2	No	402	405,104
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
SVCHDM	IN THE PAST YEAR, HAVE YOU RECEIVED HOME DELIVERED MEALS?	-8	Don't Know	1	553
		1	Yes	230	266,539
		2	No	255	208,741
				486	475,833
SVCHOUSE	IN THE PAST YEAR, HAVE YOU RECEIVED HOMEMAKER OR HOUSEKEEPING SERVICES?	1	Yes	320	266,901
		2	No	166	208,932
				486	475,833
SVCTRAN	IN THE PAST YEAR, HAVE YOU RECEIVED TRANSPORTATION SERVICES?	-8	Don't Know	2	638
		1	Yes	139	131,436
		2	No	345	343,758
				486	475,833
SVCDYCR	IN THE PAST YEAR, HAVE YOU RECEIVED ADULT DAYCARE SERVICES?	1	Yes	43	35,194
		2	No	443	440,639
				486	475,833
SVCPCR	IN THE PAST YEAR, HAVE YOU RECEIVED PERSONAL CARE SERVICES?	-8	Don't Know	3	5,127
		1	Yes	208	187,334
		2	No	275	283,372
				486	475,833
SVCHORE	IN THE PAST YEAR, HAVE YOU RECEIVED CHORE SERVICES?	-8	Don't Know	7	9,349
		1	Yes	147	107,841
		2	No	332	358,643
				486	475,833
SVCLGL	IN THE PAST YEAR, HAVE YOU RECEIVED LEGAL ASSISTANCE?	-8	Don't Know	5	2,349
		1	Yes	36	25,780
		2	No	445	447,704
				486	475,833
SVCIAA	IN THE PAST YEAR, HAVE YOU RECEIVED INFORMATION AND ASSISTANCE SERVICES?	-8	Don't Know	11	12,415
		1	Yes	185	115,943
		2	No	290	347,475
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
SVCCOUNT	SERVICE COMBINATIONS	1	Case Management only	25	21,212
		2	Case Management and 1 add'l svc	88	97,949
		3	Case Management and 2 add'l svcs	112	164,439
		4	Case Management and 3 add'l svcs	96	82,869
		5	Case Management and 4 add'l svcs	80	50,743
		6	Case Management and 5 add'l svcs	53	37,293
		7	Case Management and 6 add'l svcs	23	11,318
		8	Case Management and 7 add'l svcs	7	8,018
		9	Case Management and 8 add'l svcs	1	1,861
		10	Case Management and 9 add'l svcs	1	130
				486	475,833
HNREDUYN	DO YOU HAVE A NUTRITION COUNSELOR WHO GIVES YOU ADVICE ON WHAT YOU SHOULD EAT BASED ON YOUR HEALTH CONDITIONS AND YOUR FOOD CHOICES?	-8	Don't Know	6	3,242
		1	Yes	74	48,257
		2	No	406	424,334
				486	475,833
HLTHSCRN	HAVE YOU RECEIVED HEALTH SCREENINGS SUCH AS BLOOD PRESSURE CHECKS OTHER THAN THOSE FROM YOUR OWN DOCTOR?	-8	Don't Know	2	159
		1	Yes	185	180,441
		2	No	299	295,233
				486	475,833
SHOTS	HAVE YOU RECEIVED FLU SHOTS, PNEUMONIA SHOTS OR OTHER IMMUNIZATIONS OTHER THAN THOSE FROM YOUR OWN DOCTOR?	-8	Don't Know	4	1,616
		1	Yes	109	83,525
		2	No	373	390,691
				486	475,833
EXERCISE	HAVE YOU TAKEN EXERCISE OR FITNESS CLASSES OR DO YOU USE THE EXERCISE EQUIPMENT AT A SENIOR CENTER OR OTHER PROGRAM FOR OLDER ADULTS?	-8	Don't Know	6	6,725

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		1	Yes	46	39,712
		2	No	434	429,397
				486	475,833
MEDS	HAVE YOU RECEIVED ASSISTANCE IN ADMINISTERING OR MONITORING THE SIDE EFFECTS OF MEDICINE?	-8	Don't Know	6	7,147
		1	Yes	56	40,571
		2	No	424	428,115
				486	475,833
BENEFITS	HAVE YOU RECEIVED HELP GETTING BENEFITS LIKE FOOD STAMPS AND OTHER PUBLIC ASSISTANCE?	-8	Don't Know	5	1,098
		1	Yes	123	107,502
		2	No	358	367,233
				486	475,833
SVCRATE	OVERALL, HOW WOULD YOU RATE THE GROUP OF SERVICES YOU RECEIVE?	-8	Don't Know	1	685
		-1	Not Collected	15	10,704
		1	Excellent	155	112,797
		2	Very Good	171	160,125
		3	Good	109	152,396
		4	Fair	29	34,284
		5	Poor	6	4,842
				486	475,833
SVCIND	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU ABLE TO LIVE INDEPENDENTLY?	-8	Don't Know	4	3,904
		1	Yes	393	371,539
		2	No	89	100,390
				486	475,833
SVCSECUR	AS A RESULT OF THE SERVICES YOU RECEIVE, DO YOU FEEL MORE SECURE?	-8	Don't Know	9	12,457
		1	Yes	432	420,377
		2	No	45	42,999
				486	475,833
SVCSELF	AS A RESULT OF THE SERVICES YOU RECEIVE, ARE YOU BETTER ABLE TO CARE FOR YOURSELF?	-8	Don't Know	8	3,606
		1	Yes	393	374,212
		2	No	85	98,015
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
SVCIDEA	SINCE YOU STARTED RECEIVING SERVICES, DO YOU HAVE A BETTER IDEA OF HOW TO GET ANY ADDITIONAL HELP THAT YOU NEED?	-8	Don't Know	7	5,945
		1	Yes	311	283,557
		2	No	168	186,331
				486	475,833
SVCCURT	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES ARE GENERALLY COURTEOUS?	-8	Don't Know	1	666
		1	Agree	476	458,272
		2	Disagree	9	16,895
				486	475,833
SVCSUPOS	THINKING ABOUT YOUR SERVICES IN GENERAL, WOULD YOU SAY THAT THE PEOPLE WHO GIVE THESE SERVICES DO THE THINGS THEY ARE SUPPOSED TO DO?	-8	Don't Know	9	17,267
		1	Agree	452	431,521
		2	Disagree	25	27,045
				486	475,833
SVC5A	ARE YOU RECEIVING FOOD STAMPS?	-8	Don't Know	1	48
		1	Yes	107	104,830
		2	No	378	370,955
		486	475,833		
SVC5B	ARE YOU RECEIVING ENERGY ASSISTANCE?	-8	Don't Know	5	5,089
		1	Yes	126	117,708
		2	No	355	353,035
		486	475,833		
SVC5C	ARE YOU RECEIVING MEDICAID?	-8	Don't Know	18	16,317
		1	Yes	187	195,796
		2	No	281	263,720
		486	475,833		
SVC5D	ARE YOU RECEIVING HOUSING ASSISTANCE?	-8	Don't Know	11	5,627
		1	Yes	102	90,297
		2	No	373	379,909
		486	475,833		
CSARRNG	DO YOUR FAMILY OR FRIENDS HELP ARRANGE FOR THE SERVICES YOU RECEIVE?	-8	Don't Know	4	7,948

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		1	Yes	237	208,909
		2	No	245	258,976
				486	475,833
CSHOME	DO YOUR FAMILY OR FRIENDS ALSO PROVIDE ASSISTANCE THAT HELPS YOU STAY AT HOME?	-8	Don't Know	6	10,040
		1	Yes	323	287,273
		2	No	157	178,519
				486	475,833
PFHLTH	IN GENERAL, HOW IS YOUR HEALTH?	-8	Don't Know	3	4,793
		1	Excellent	13	5,142
		2	Very Good	49	56,781
		3	Good	135	121,710
		4	Fair	165	151,491
		5	Poor	121	135,916
				486	475,833
SFMODACT	DOES YOUR HEALTH LIMIT YOUR ABILITY TO DO MODERATE ACTIVITIES SUCH AS MOVING A TABLE, PUSHING A VACUUM CLEANER, BOWLING, OR PLAYING GOLF?	-8	Don't Know	11	8,793
		1	Yes, Limited A Lot	296	292,129
		2	Yes, Limited A Little	112	101,826
		3	No, Not Limited At All	67	73,085
				486	475,833
SFCLIMB	DOES YOUR HEALTH LIMIT YOUR ABILITY TO CLIMB SEVERAL FLIGHTS OF STAIRS?	-8	Don't Know	14	4,772
		-7	Refused	1	655
		1	Yes, Limited A Lot	326	311,680
		2	Yes, Limited A Little	91	116,776
		3	No, Not Limited At All	54	41,950
				486	475,833
SFACCOMP	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF YOUR PHYSICAL HEALTH?	-8	Don't Know	14	14,036
		-7	Refused	1	94
		1	All Of The Time	102	88,930
		2	Most Of The Time	159	150,848
		3	Some Of The Time	129	134,382

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		4	A Little Of The Time	65	72,070
		5	None Of The Time	16	15,473
				486	475,833
SFLIMITD	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME WERE YOU LIMITED IN THE KIND OF WORK OR OTHER REGULAR DAILY ACTIVITIES YOU DO AS A RESULT OF YOUR PHYSICAL HEALTH?				
		-8	Don't Know	7	1,782
		1	All Of The Time	116	95,458
		2	Most Of The Time	148	121,342
		3	Some Of The Time	120	149,208
		4	A Little Of The Time	65	69,280
		5	None Of The Time	30	38,762
				486	475,833
SFEMOT	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU ACCOMPLISHED LESS THAN YOU WOULD LIKE AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?				
		-8	Don't Know	9	7,729
		1	All Of The Time	39	36,752
		2	Most Of The Time	64	60,610
		3	Some Of The Time	152	140,676
		4	A Little Of The Time	111	112,293
		5	None Of The Time	111	117,772
				486	475,833
SFCAREFL	DURING THE PAST 4 WEEKS, HOW MUCH OF THE TIME DID YOU DO WORK OR OTHER REGULAR DAILY ACTIVITIES LESS CAREFULLY THAN USUAL AS A RESULT OF ANY EMOTIONAL PROBLEMS, SUCH AS FEELING DEPRESSED OR ANXIOUS?				
		-8	Don't Know	11	17,690
		-7	Refused	2	2,581
		1	All Of The Time	27	24,226
		2	Most Of The Time	53	49,763
		3	Some Of The Time	121	116,896
		4	A Little Of The Time	114	129,238
		5	None Of The Time	158	135,439
				486	475,833
SFPAIN	DURING THE PAST FOUR WEEKS, HOW MUCH DID PAIN INTERFERE WITH YOUR NORMAL WORK (INCLUDING BOTH WORK OUTSIDE THE HOME AND HOUSEWORK)?				
		-8	Don't Know	8	2,640

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		-7	Refused	1	255
		1	All Of The Time	67	61,206
		2	Most Of The Time	62	81,006
		3	Some Of The Time	92	85,897
		4	A Little Of The Time	151	150,089
		5	None Of The Time	105	94,740
				486	475,833
SFCALM	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT CALM AND PEACEFUL?				
		-8	Don't Know	6	7,659
		1	All Of The Time	44	32,894
		2	Most Of The Time	183	164,276
		3	Some Of The Time	165	174,228
		4	A Little Of The Time	73	81,610
		5	None Of The Time	15	15,166
				486	475,833
SFENERGY	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU HAD A LOT OF ENERGY?				
		-8	Don't Know	4	10,542
		1	All Of The Time	9	8,992
		2	Most Of The Time	48	54,806
		3	Some Of The Time	151	159,672
		4	A Little Of The Time	176	148,282
		5	None Of The Time	98	93,539
				486	475,833
SFDOWN	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAVE YOU FELT DEPRESSED?				
		-8	Don't Know	7	14,018
		1	All Of The Time	18	16,265
		2	Most Of The Time	46	34,439
		3	Some Of The Time	149	146,705
		4	A Little Of The Time	155	165,084
		5	None Of The Time	111	99,323
				486	475,833
SFINTERF	DURING THE PAST FOUR WEEKS, HOW MUCH OF THE TIME HAS YOUR PHYSICAL HEALTH OR EMOTIONAL PROBLEMS INTERFERED WITH YOUR SOCIAL ACTIVITIES (LIKE VISITING FRIENDS, RELATIVES, ETC.)?				
		-8	Don't Know	14	13,364
		1	All Of The Time	74	78,819
		2	Most Of The Time	81	59,804

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		3	Some Of The Time	131	133,701
		4	A Little Of The Time	80	81,196
		5	None Of The Time	106	108,950
				486	475,833
PCS_12	SF-12V2 PHYSICAL SUMMARY SCORE	.	Missing	60	58,463
		1	4 - <20	77	62,566
		2	20 - <25	87	80,550
		3	25 - <30	78	89,541
		4	30 - <35	68	60,013
		5	35 - <40	49	57,350
		6	40 - <45	31	35,321
		7	45 - <50	22	17,690
		8	50 - <55	7	3,886
		9	55 - <65	7	10,452
				486	475,833
MCS_12	SF-12V2 MENTAL SUMMARY SCORE	.	Missing	60	58,463
		1	8 - <35	68	53,780
		2	35 - <40	51	49,490
		3	40 - <45	64	66,942
		4	45 - <50	77	72,034
		5	50 - <53	34	52,986
		6	53 - <56	35	33,578
		7	56 - <59	29	27,604
		8	59 - <62	26	32,872
		9	62 - <65	18	4,738
		10	65 - <80	24	23,346
				486	475,833
PF_T	NEMC PHYSICAL FUNCTIONING T-SCORE BASED ON SFMODACT AND SFCLIMB		Missing	60	58,463
			22.1083	234	218,517
			30.6976	76	79,366
			39.287	54	53,942
			47.8763	35	43,953
			56.4656	27	21,592
				486	475,833
RP_T	NEMC ROLE LIMITATION PHYSICAL T-SCORE BASED ON SFACCOMP AND SFLIMITD		Missing	60	58,463

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		20.3233		67	50,512
		24.9298		44	38,245
		29.5364		94	65,281
		34.1429		48	66,695
		38.7495		86	94,727
		43.356		41	50,308
		47.9626		32	36,061
		52.5691		7	7,627
		57.1757		7	7,913
				486	475,833
BP_T	NEMC PAIN T-SCORE BASED ON SFPAIN	Missing		60	58,463
		16.6777		95	91,565
		26.8693		134	126,724
		37.0608		82	69,454
		47.2523		57	78,551
		57.4438		58	51,077
				486	475,833
GH_T	NEMC GENERAL HEALTH T-SCORE BASED ON PFHLTH	Missing		60	58,463
		18.8673		115	123,784
		29.6476		139	129,711
		44.7401		118	107,836
		55.5204		44	53,373
		61.9886		10	2,665
				486	475,833
VT_T	NEMC VITALITY T-SCORE BASED ON SFENERGY	Missing		60	58,463
		27.6238		86	80,502
		37.6867		159	132,651
		47.7496		133	146,999
		57.8125		41	49,550
		67.8753		7	7,669
				486	475,833
RE_T	NEMC ROLE LIMITATION EMOTIONAL T-SCORE BASED ON SFEMOT AND SFCAREFL	Missing		60	58,463
		11.347		16	13,949
		16.9385		14	8,100
		22.5299		38	28,791

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		28.1214		21	16,168
		33.7129		81	85,143
		39.3044		62	72,572
		44.8959		74	87,882
		50.4873		40	34,004
		56.0788		80	70,762
				486	475,833
SF_T	NEMC SOCIAL FUNCTIONING T-SCORE BASED ON SFINTERF	Missing		60	58,463
		16.1764		64	61,455
		26.2742		75	54,732
		36.3721		124	124,332
		46.4699		71	77,367
		56.5677		92	99,484
				486	475,833
MH_T	NEMC MENTAL HEALTH T-SCORE BASED ON SFCALM AND SFDOWN	Missing		60	58,463
		15.7748		3	5,782
		21.8705		15	10,699
		27.9663		17	16,108
		34.0621		39	37,113
		40.1579		92	96,908
		46.2537		95	96,689
		52.3495		76	77,704
		58.4453		59	51,627
		64.541		30	24,739
				486	475,833
SFHEALTH	COMPARED WITH YOUR HEALTH ONE YEAR AGO, HOW IS YOUR HEALTH NOW?	-7	Refused	1	666
		1	Much Better Than One Year Ago	28	29,890
		2	A Little Better Than One Year Ago	59	69,493
		3	About The Same As One Year Ago	143	118,303
		4	A Little Worse Than One Year Ago	146	134,245
		5	Worse Than One Year Ago	109	123,235
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
SFACTIVE	REGARDING YOUR PRESENT SOCIAL ACTIVITIES, DO YOU FEEL THAT YOU ARE DOING...	-8	Don't Know	18	16,303
		-7	Refused	3	1,118
		1	About Enough	132	134,483
		2	Too Much	4	5,779
		3	Would Like To Be Doing More	329	318,150
				486	475,833
SFSOCIAL	HAVE YOUR SOCIAL OPPORTUNITIES INCREASED SINCE YOU BECAME INVOLVED WITH THESE SERVICES?	-8	Don't Know	22	20,173
		-7	Refused	1	666
		1	Yes	150	152,542
		2	No	313	302,452
				486	475,833
PFDISA	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ARTHRITIS OR RHEUMATISM?	-8	Don't Know	3	1,662
		1	Yes	380	394,304
		2	No	103	79,867
				486	475,833
PFDISB	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH BLOOD PRESSURE OR HYPERTENSION?	-8	Don't Know	4	2,123
		-7	Refused	1	181
		1	Yes	357	366,906
		2	No	124	106,624
				486	475,833
PFDISC	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEART DISEASE?	-8	Don't Know	10	10,206
		1	Yes	232	190,675
		2	No	244	274,952
				486	475,833
PFDISD	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HIGH CHOLESTEROL?	-8	Don't Know	22	11,092
		1	Yes	239	250,692
		2	No	225	214,050
				486	475,833
PFDISE	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE DIABETES OR HIGH BLOOD SUGAR?	-8	Don't Know	6	6,709
		1	Yes	166	149,473

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		2	No	314	319,651
				486	475,833
PFDISF	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE BREATHING OR LUNG PROBLEMS INCLUDING EMPHYSEMA, ALLERGIES, OR ASTHMA?	-8	Don't Know	2	748
		1	Yes	245	238,959
		2	No	239	236,125
				486	475,833
PFDISG	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE CANCER?	-8	Don't Know	3	4,847
		1	Yes	90	72,029
		2	No	393	398,957
				486	475,833
PFDISH	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HAD A STROKE?	-8	Don't Know	5	1,313
		1	Yes	107	87,633
		2	No	374	386,887
				486	475,833
PFDISI	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANEMIA?	-8	Don't Know	7	5,920
		1	Yes	98	96,922
		2	No	380	369,685
		3	Does Not Apply	1	3,306
				486	475,833
PFDISJ	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE OSTEOPOROSIS?	-8	Don't Know	12	8,463
		1	Yes	170	214,717
		2	No	304	252,653
				486	475,833
PFDISK	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE KIDNEY DISEASE?	-8	Don't Know	11	8,953
		1	Yes	63	50,770
		2	No	412	416,110
				486	475,833
PFDISL	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE GLAUCOMA, CATARACTS, MACULAR DEGENERATION, OR OTHER EYE OR VISION CONDITIONS (EXCLUDING GLASSES)?	-8	Don't Know	3	5,058
		1	Yes	336	332,081
		2	No	147	138,694

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PFDISM	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE HEARING PROBLEMS?	-8	Don't Know	1	56
		1	Yes	214	174,277
		2	No	271	301,501
				486	475,833
PFDISN	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE EMOTIONAL, NERVOUS OR PSYCHIATRIC PROBLEMS?	-8	Don't Know	1	48
		1	Yes	116	93,262
		2	No	369	382,523
				486	475,833
PFDISO	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MEMORY RELATED DISEASE SUCH AS ALZHEIMER'S DISEASE OR DEMENTIA?	-8	Don't Know	5	8,230
		1	Yes	87	95,707
		2	No	394	371,895
				486	475,833
PFDISP	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SEIZURES OR EPILEPSY?	-8	Don't Know	1	893
		1	Yes	23	21,378
		2	No	462	453,562
				486	475,833
PFDISQ	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PARKINSON'S DISEASE?	-8	Don't Know	4	1,041
		1	Yes	15	14,527
		2	No	467	460,265
				486	475,833
PFDISR	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE PERSISTENT PAIN, ACHING, STIFFNESS OR SWELLING AROUND A JOINT?	-8	Don't Know	1	645
		1	Yes	323	325,875
		2	No	161	149,252
		3	Does Not Apply	1	62
				486	475,833
PFDISS	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE MULTIPLE SCLEROSIS?	-8	Don't Know	5	1,112
		1	Yes	15	18,331

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		2	No	466	456,391
				486	475,833
PFDIST	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE A SERIOUS PROBLEM WITH URINARY INCONTINENCE?	-8	Don't Know	5	6,021
		1	Yes	141	131,141
		2	No	340	338,671
				486	475,833
PFDISU	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE SOMETHING ELSE?	-8	Don't Know	5	735
		1	Yes	40	45,451
		2	No	441	429,647
				486	475,833
PFLEARN	DO YOU HAVE ANY DIFFICULTY LEARNING, REMEMBERING, OR CONCENTRATING DUE TO A PHYSICAL, MENTAL OR EMOTIONAL CONDITION LASTING 6 MONTHS OR MORE?	-8	Don't Know	5	5,417
		1	Yes	209	216,122
		2	No	272	254,294
				486	475,833
HLMDRUGS	# DIFF MEDICINES YOU TAKE DAILY	-8	Don't Know	9	5,209
		-7	Refused	1	666
		1	0-2	53	48,938
		2	3-4	84	98,935
		3	5-6	107	110,293
		4	7-8	87	76,855
		5	8+	145	134,937
				486	475,833
HLMHOSP	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A HOSPITAL?	-8	Don't Know	1	48
		1	Yes	215	232,130
		2	No	270	243,655
				486	475,833
HLMNH	IN THE PAST 12 MONTHS, DID YOU HAVE TO STAY OVERNIGHT IN A NURSING HOME OR REHABILITATION CENTER?	-8	Don't Know	2	209
		1	Yes	76	76,741
		2	No	408	398,883
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
PFDFIN	DO YOU HAVE DIFFICULTY GETTING AROUND INSIDE THE HOME?	1	Yes	231	223,897
		2	No	255	251,936
				486	475,833
PFDFINB	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET AROUND INSIDE THE HOME?	-8	Don't Know	2	4,835
		-1	Not Collected	255	251,936
		1	Yes	87	86,804
		2	No	142	132,258
		486	475,833		
PFDFOU	DO YOU HAVE DIFFICULTY GOING OUTSIDE THE HOME, FOR EXAMPLE TO SHOP OR VISIT A DOCTOR'S OFFICE?	-8	Don't Know	2	506
		1	Yes	331	310,701
		2	No	153	164,625
		486	475,833		
PFDFOUB	DO YOU NEED THE HELP OF ANOTHER PERSON TO GO OUTSIDE THE HOME?	-1	Not Collected	155	165,132
		1	Yes	260	247,227
		2	No	71	63,474
		486	475,833		
PFBED	DO YOU HAVE DIFFICULTY GETTING IN OR OUT OF BED OR A CHAIR?	-8	Don't Know	1	2,734
		-7	Refused	1	666
		1	Yes	211	195,501
		2	No	273	276,932
		486	475,833		
PFBEDB	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET IN OR OUT OF BED OR A CHAIR?	-8	Don't Know	1	893
		-1	Not Collected	275	280,332
		1	Yes	100	102,661
		2	No	110	91,947
		486	475,833		
PFBATH	DO YOU HAVE DIFFICULTY WHEN TAKING A BATH OR A SHOWER?	-8	Don't Know	2	1,285
		1	Yes	251	240,019
		2	No	233	234,529
		486	475,833		

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
PFBATHB	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE A BATH OR A SHOWER?	-1	Not Collected	235	235,814
		1	Yes	201	186,502
		2	No	50	53,517
				486	475,833
PFDRES	DO YOU HAVE DIFFICULTY WHEN DRESSING?	-8	Don't Know	3	2,978
		1	Yes	161	142,228
		2	No	322	330,627
				486	475,833
PFDRESB	DO YOU NEED THE HELP OF ANOTHER PERSON TO GET DRESSED?	-8	Don't Know	1	666
		-1	Not Collected	325	333,605
		1	Yes	118	115,554
		2	No	42	26,008
				486	475,833
PFWALK	DO YOU HAVE DIFFICULTY WHEN WALKING?	-8	Don't Know	6	5,699
		1	Yes	354	322,288
		2	No	126	147,847
				486	475,833
PFWALKB	DO YOU NEED THE HELP OF ANOTHER PERSON TO WALK?	-8	Don't Know	7	2,578
		-7	Refused	1	666
		-1	Not Collected	132	153,545
		1	Yes	125	128,209
		2	No	221	190,834
				486	475,833
PFEAT	DO YOU HAVE DIFFICULTY EATING?	-8	Don't Know	1	893
		1	Yes	55	50,121
		2	No	430	424,818
		486	475,833		
PFEATB	DO YOU NEED THE HELP OF ANOTHER PERSON TO EAT?	-1	Not Collected	431	425,712
		1	Yes	22	19,006
		2	No	33	31,116
				486	475,833
PFWC	DO YOU HAVE DIFFICULTY USING THE TOILET OR GETTING TO THE TOILET?	1	Yes	110	102,386
		2	No	376	373,447

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PFWCB	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TOILET OR GET TO THE TOILET?	-8	Don't Know	1	685
		-1	Not Collected	376	373,447
		1	Yes	64	67,355
		2	No	45	34,346
				486	475,833
PFDLR	DO YOU HAVE DIFFICULTY KEEPING TRACK OF MONEY OR BILLS?	-8	Don't Know	5	5,239
		1	Yes	147	133,453
		2	No	334	337,141
				486	475,833
PFDLRB	DO YOU NEED THE HELP OF ANOTHER PERSON TO KEEP TRACK OF MONEY OR BILLS?	-1	Not Collected	339	342,380
		1	Yes	135	115,072
		2	No	12	18,382
				486	475,833
PFMEAL	DO YOU HAVE DIFFICULTY PREPARING MEALS?	-8	Don't Know	3	346
		1	Yes	243	221,373
		2	No	240	254,114
				486	475,833
PFMEALB	DO YOU NEED THE HELP OF ANOTHER PERSON TO PREPARE MEALS?	-8	Don't Know	2	5,017
		-1	Not Collected	243	254,460
		1	Yes	186	161,616
		2	No	55	54,740
				486	475,833
PFCLEN	DO YOU HAVE DIFFICULTY DOING LIGHT HOUSEWORK, SUCH AS WASHING DISHES OR SWEEPING A FLOOR?	-8	Don't Know	3	1,067
		1	Yes	282	237,381
		2	No	201	237,386
				486	475,833
PFCLENB	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO LIGHT HOUSEWORK?	-1	Not Collected	204	238,452
		1	Yes	256	205,318
		2	No	26	32,063

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PFHCLEN	DO YOU HAVE DIFFICULTY DOING HEAVY HOUSEWORK, SUCH AS SCRUBBING FLOORS OR WASHING WINDOWS?	-8	Don't Know	1	685
		1	Yes	433	421,080
		2	No	52	54,068
				486	475,833
PFHCLENB	DO YOU NEED THE HELP OF ANOTHER PERSON TO DO HEAVY HOUSEWORK?	-8	Don't Know	2	3,115
		-1	Not Collected	53	54,753
		1	Yes	410	382,903
		2	No	21	35,063
				486	475,833
PFTKDG	DO YOU HAVE DIFFICULTY TAKING THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?	-8	Don't Know	1	48
		1	Yes	136	124,631
		2	No	349	351,154
				486	475,833
PFTKDGB	DO YOU NEED THE HELP OF ANOTHER PERSON TO TAKE THE RIGHT AMOUNT OF PRESCRIBED MEDICINE AT THE RIGHT TIME?	-7	Refused	1	700
		-1	Not Collected	350	351,202
		1	Yes	120	108,031
		2	No	15	15,899
				486	475,833
PFFONE	DO YOU HAVE DIFFICULTY USING THE TELEPHONE?	1	Yes	83	72,487
		2	No	403	403,346
				486	475,833
PFFONEB	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THE TELEPHONE?	-1	Not Collected	403	403,346
		1	Yes	74	65,051
		2	No	9	7,436
				486	475,833
PFDRIVE	DO YOU HAVE DIFFICULTY DRIVING AN AUTOMOBILE?	-8	Don't Know	27	23,712
		1	Yes	272	258,638
		2	No	187	193,483
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
PFBUS	IS LOCAL BUS, TRANSIT BUS, OR CITY BUS SERVICE AVAILABLE WITHIN 3/4 OF A MILE FROM YOUR HOME?	-8	Don't Know	35	41,048
		1	Yes	239	231,336
		2	No	212	203,450
				486	475,833
PFUSEBUS	DO YOU HAVE DIFFICULTY USING THIS TRANSPORTATION?	-1	Not Collected	247	244,497
		1	Yes	71	78,639
		2	No	70	69,980
		3	Never Uses Bus	98	82,717
				486	475,833
PFBUSEB	DO YOU NEED THE HELP OF ANOTHER PERSON TO USE THIS TRANSPORTATION?	-8	Don't Know	1	2,734
		-1	Not Collected	415	397,194
		1	Yes	67	73,571
		2	No	3	2,334
				486	475,833
FAMFRND	WHO PROVIDED THE MOST HELP WITH THESE ACTIVITIES?	-8	Don't Know	17	11,266
		-7	Refused	2	1,288
		-1	Not Collected	47	64,343
		1	Family	211	203,639
		2	Someone Else Like Friend/Neighbor/Other	209	195,297
				486	475,833
WHOHELPS	WHICH FAMILY MEMBER HELPS YOU THE MOST WITH THESE ACTIVITIES?	-8	Don't Know	2	3,192
		-1	Not Collected	275	272,194
		1	Husband	26	42,245
		2	Wife	26	30,583
		3	Son	43	33,934
		5	Daughter	83	66,787
		6	Daughter-In-Law	5	6,489
		9	Brother	4	2,295
		10	Sister	9	6,402
		12	Granddaughter	3	3,150
		13	Nephew	3	853
		14	Niece	5	5,206
		91	Other Relative	2	2,506

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
ADLAOA6	PERSON COUNT BY NUMBER OF ADL DIFFICULTIES: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.	.	Missing	14	14,255
		0	0 limitations	81	105,204
		1	1 limitation	104	97,386
		2	2 limitations	81	72,743
		3	3 limitations	68	63,754
		4	4 limitations	68	45,127
		5	5 limitations	47	61,260
		6	6 limitations	23	16,104
				486	475,833
ADLAOA6_SSS	AOA ADL LIMITATIONS, SSS VERSION	0	0 limitations	85	109,466
		1	1 limitation	107	97,947
		2	2 limitations	83	76,271
		3	3 limitations	70	64,492
		4	4 limitations	69	45,811
		5	5 limitations	49	65,742
		6	6 limitations	23	16,104
				486	475,833
ADL3PLUS	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS	.	Missing	14	14,255
		1	Yes	206	186,244
		2	No	266	275,333
				486	475,833
ADL3PLUS_SSS	RESPONDENT HAS 3 OR MORE AOA ADL LIMITATIONS, SSS VERSION	1	Yes	211	192,149
		2	No	275	283,684
				486	475,833
ADLAOA6P	AMONG THOSE WITH ANY ADL DIFFICULTY, PERSON COUNTS BY NUMBER OF ADL PERSONAL ASSISTANCE NEEDS: BED/CHAIR TRANSFER, BATHING, DRESSING, WALKING, EATING (FEEDING SELF), OR TOILETING.	.	Missing	10	4,595
		0	0 limitations	234	235,419
		1	1 limitation	98	95,923
		2	2 limitations	46	38,685
		3	3 limitations	27	25,541

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		4	4 limitations	26	28,547
		5	5 limitations	28	34,500
		6	6 limitations	17	12,623
				486	475,833
ADLAOA6P_ SSS	AOA ADLS: NEEDS HELP OF ANOTHER PERSON, SSS VERSION	0	0 limitations	235	235,492
		1	1 limitation	104	98,706
		2	2 limitations	48	39,739
		3	3 limitations	28	26,225
		4	4 limitations	26	28,547
		5	5 limitations	28	34,500
		6	6 limitations	17	12,623
				486	475,833
IADLAOA7	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MANAGEMENT, PREPARING MEALS, LIGHT HOUSEWORK, MEDICATION MANAGEMENT, USING THE PHONE, OR DRIVING CAR/PUBLIC TRANSPORTATION.	.	Missing	36	29,820
		0	0 limitations	53	88,866
		1	1 limitation	65	44,380
		2	2 limitations	65	65,043
		3	3 limitations	79	79,457
		4	4 limitations	67	59,472
		5	5 limitations	38	39,048
		6	6 limitations	43	38,904
		7	7 limitations	40	30,844
				486	475,833
IADLAOA7_ SSS	AOA IADL LIMITATIONS, SSS VERSION	0	0 limitations	59	93,211
		1	1 limitation	72	49,001
		2	2 limitations	71	67,256
		3	3 limitations	86	81,219
		4	4 limitations	72	70,060
		5	5 limitations	40	40,679
		6	6 limitations	46	43,563
		7	7 limitations	40	30,844
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
IADLAOA7P	AMONG THOSE W/ ANY IADL DIFFICULTY, PERSON COUNTS BY # OF IADL PERSONAL ASSIST. NEEDS (OF 7 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, MEAL PREP, LIGHT HOUSEWORK, MEDICATION MGMT, USING THE PHONE, OR DRIVING CAR/USING PUBLIC TRANS.	.	Missing	30	27,208
		0	0 limitations	88	113,769
		1	1 limitation	76	61,167
		2	2 limitations	70	84,091
		3	3 limitations	59	40,282
		4	4 limitations	54	56,883
		5	5 limitations	32	28,848
		6	6 limitations	39	33,716
		7	7 limitations	38	29,869
					486
IADLAOA7P_SSS	AOA IADLS: PERSONAL ASSISTANCE NEEDS, SSS VERSION	0	0 limitations	96	120,533
		1	1 limitation	84	67,078
		2	2 limitations	74	85,818
		3	3 limitations	64	49,040
		4	4 limitations	57	59,025
		5	5 limitations	33	30,201
		6	6 limitations	40	34,269
		7	7 limitations	38	29,869
			486	475,833	
IADLAOA8	PERSON COUNT BY # OF IADL DIFFICULTIES (AMONG 8 ACTIVITIES): GOING OUTSIDE HOME, MONEY MGMNT, PREPARING MEALS, LIGHT HOUSEWORK, HEAVY HOUSEWORK, MEDICATION MANAGEMENT, USING THE TELEPHONE, OR DRIVING A CAR/USING PUBLIC TRANSPORTATION.	.	Missing	36	29,820
		0	0 limitations	23	29,951
		1	1 limitation	43	68,525
		2	2 limitations	57	40,906
		3	3 limitations	64	62,786
		4	4 limitations	78	78,731
		5	5 limitations	64	56,318
		6	6 limitations	39	39,244

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		7	7 limitations	42	38,708
		8	8 limitations	40	30,844
				486	475,833
IADLAOA8_	AOA IADL LIMITATIONS W/ HEAVY	0	0 limitations	24	30,748
SSS	HOUSEWORK ADDED, SSS VERSION	1	1 limitation	49	72,758
		2	2 limitations	64	44,871
		3	3 limitations	70	65,287
		4	4 limitations	84	80,177
		5	5 limitations	69	66,906
		6	6 limitations	41	40,875
		7	7 limitations	45	43,367
		8	8 limitations	40	30,844
				486	475,833
IADLAOA8P	AMONG THOSE W/ ANY IADL	.	Missing	32	30,323
	DIFFICULTY, PERSON COUNTS	0	0 limitations	32	46,832
	BY # OF IADL PERSONAL ASSIST.	1	1 limitation	76	87,794
	NEEDS (OF 8 ACTIVITIES): GOING	2	2 limitations	61	45,808
	OUTSIDE HOME, MONEY MGMT, MEAL	3	3 limitations	67	78,718
	PREP, LIGHT HOUSEWORK, HEAVY	4	4 limitations	60	46,202
	HOUSEWORK, MED MGMT, USING	5	5 limitations	50	49,257
	PHONE, DRIVING CAR/ PUBLIC TRANS.	6	6 limitations	32	27,511
		7	7 limitations	38	33,520
		8	8 limitations	38	29,869
				486	475,833
IADLAOA8P_	AOA IADLS: PERSONAL ASSISTANCE	0	0 limitations	37	51,323
SSS	NEEDS W/ HEAVY HOUSEWORK	1	1 limitation	83	92,678
	ADDED, SSS VERSION	2	2 limitations	66	50,690
		3	3 limitations	71	80,444
		4	4 limitations	65	54,960
		5	5 limitations	54	52,933
		6	6 limitations	33	28,864

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
		7	7 limitations	39	34,073
		8	8 limitations	38	29,869
				486	475,833
AGEC	AGE CATEGORY	2	60-64 years	43	39,560
		3	65-74 years	112	140,094
		4	75-84 years	188	191,936
		5	85+ years	143	104,244
				486	475,833
GENDER	GENDER	1	Male	99	90,063
		2	Female	387	385,770
				486	475,833
DEEDUC	WHAT IS YOUR HIGHEST LEVEL OF EDUCATION?	-8	Don't Know	2	132
		-7	Refused	1	666
		1	Less Than High School Diploma	168	160,268
		2	High School Diploma Or GED	173	166,993
		3	Some College(Business/Vocational/Techni)	106	99,659
		4	Bachelor's Degree	15	19,273
		5	Some Post-Graduate Work/Advanced Degree	21	28,842
				486	475,833
DEHISP	ARE YOU SPANISH, HISPANIC, OR LATINO?	-8	Don't Know	3	6,170
		-7	Refused	1	29
		1	Yes	22	39,222
		2	No	460	430,412
				486	475,833
DERAC01	WHAT IS YOUR RACE? WHITE OR CAUCASIAN	-8	Don't Know	2	239
		-7	Refused	3	566
		1	Yes	395	383,655
		2	No	86	91,374
				486	475,833
DERAC02	WHAT IS YOUR RACE? BLACK OR AFRICAN-AMERICAN	-8	Don't Know	2	239
		-7	Refused	3	566
		1	Yes	72	75,241
		2	No	409	399,787

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
DERAC03	WHAT IS YOUR RACE? ASIAN	-8	Don't Know	2	239
		-7	Refused	3	566
		1	Yes	5	3,380
		2	No	476	471,648
				486	475,833
DERAC04	WHAT IS YOUR RACE? AMERICAN INDIAN OR ALASKAN NATIVE	-8	Don't Know	2	239
		-7	Refused	3	566
		1	Yes	15	15,604
		2	No	466	459,425
				486	475,833
DERAC05	WHAT IS YOUR RACE? NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	-8	Don't Know	2	239
		-7	Refused	3	566
		2	No	481	475,029
				486	475,833
DERAC06	WHAT IS YOUR RACE? OTHER	-8	Don't Know	2	239
		-7	Refused	3	566
		1	Yes	5	5,368
		2	No	476	469,660
				486	475,833
DELOC	WHERE IS YOUR HOME LOCATED?	-8	Don't Know	10	10,120
		-7	Refused	2	875
		1	The City	253	244,251
		2	The Suburbs	82	77,951
		3	A Rural Area	139	142,635
				486	475,833
LIVEALONE	DO YOU LIVE ALONE? SSS CONSTRUCTED	-8	Don't Know	1	217
		-7	Refused	1	209
		1	Yes	289	260,064
		2	No	195	215,343
				486	475,833
DELVSP1	DO YOU LIVE WITH YOUR SPOUSE?	-8	Don't Know	1	163
		-7	Refused	1	209
		-1	Not Collected	289	260,064
		1	Yes	104	127,050
		2	No	91	88,347

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
DELVKID2	DO YOU LIVE WITH YOUR CHILDREN?	-8	Don't Know	1	163
		-7	Refused	1	209
		-1	Not Collected	289	260,064
		1	Yes	70	73,026
		2	No	125	142,371
				486	475,833
DELVREL3	DO YOU LIVE WITH OTHER RELATIVES?	-8	Don't Know	1	163
		-7	Refused	1	209
		-1	Not Collected	289	260,064
		1	Yes	39	40,410
		2	No	156	174,986
				486	475,833
DELVNRL4	DO YOU LIVE WITH NON-RELATIVES?	-8	Don't Know	1	163
		-7	Refused	1	209
		-1	Not Collected	289	260,064
		1	Yes	10	10,968
		2	No	185	204,429
				486	475,833
LIVARRC	WHO DO YOU LIVE WITH?	-8	Don't Know	1	163
		-7	Refused	1	209
		1	Alone	289	260,064
		2	With spouse only	89	103,893
		3	With children only	44	39,378
		4	With spouse and children	9	16,848
		5	With others	53	55,278
				486	475,833
DEHHM	INCLUDING YOURSELF, HOW MANY PEOPLE LIVE IN YOUR HOUSEHOLD?	-8	Don't Know	1	163
		-7	Refused	1	209
		1	1 Person	290	260,288
		2	2 People	148	163,822
		3	3 People	33	43,167
		4	4 People	11	6,646
		7	7 People	1	893
		9	9 People	1	645
				486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
DEMARST	WHAT IS YOUR MARITAL STATUS?	-8	Don't Know	1	685
		-7	Refused	1	666
		1	Married	108	135,062
		2	Widowed	260	221,205
		3	Divorced	78	76,547
		4	Separated	6	2,889
		5	Never Married	32	38,779
			486	475,833	
DEINAB	THINKING ABOUT THE TOTAL COMBINED INCOME FROM ALL SOURCES FOR ALL PERSONS IN THIS HOUSEHOLD, WAS YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008 ABOVE OR BELOW \$20,000?	-8	Don't Know	29	42,508
		-7	Refused	14	21,257
		1	Below \$20,000 [1666 Per Month Or Less]	348	326,174
		2	Above \$20,000 [1667 Per Month Or More]	95	85,894
				486	475,833
INCOME C	WHAT CATEGORY BEST DESCRIBES YOUR TOTAL HOUSEHOLD ANNUAL INCOME DURING THE YEAR 2008?	.	Missing	43	63,765
		-8	Don't Know	33	35,528
		-7	Refused	7	7,294
		1	\$5,000 or less	31	16,774
		2	\$5,001-\$10,000	104	112,514
		3	\$10,001-\$15,000	132	115,913
		4	\$15,001-\$20,000	49	44,290
		5	\$20,001-\$25,000	48	42,974
		6	\$25,001-\$30,000	15	9,180
		7	\$30,001-\$35,000	8	4,560
		8	\$35,001-\$40,000	3	8,248
9	\$40,001-\$50,000	5	6,103		
10	ABOVE \$50,000	8	8,689		
		486	475,833		
URBAN	URBAN CODE	-9	Invalid Zip Code, or Foreign Zip Code	27	34,221
		0	Rural (Not in Urbanized Area or Urban Cl	264	202,462
		1	In Urbanized Area	176	221,790
		2	In Urban Cluster	19	17,360

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
VARSTRAT	VARIANCE STRATUM	1.00 - 64.00	Varstrat range	486	475,833
				486	475,833
VARUNIT	VARIANCE UNIT	1	Variance unit 1	251	286,388
		2	Variance unit 2	235	189,445
				486	475,833
PSWGT	FINAL POST-STRATIFIED FULL SAMPLE WEIGHT	11.55 - 9937.45	Weight range	486	475,833
				486	475,833
PSWGT1	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 1	4.21 - 14285.17	Replicate weight range	486	475,833
				486	475,833
PSWGT2	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 2	1.60 - 19275.99	Replicate weight range	486	475,833
				486	475,833
PSWGT3	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 3	3.74 - 16209.90	Replicate weight range	486	475,833
				486	475,833
PSWGT4	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 4	2.05 - 20234.74	Replicate weight range	486	475,833
				486	475,833
PSWGT5	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 5	5.33 - 19964.45	Replicate weight range	486	475,833
				486	475,833
PSWGT6	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 6	2.89 - 8715.63	Replicate weight range	486	475,833
				486	475,833
PSWGT7	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 7	5.67 - 11265.21	Replicate weight range	486	475,833
				486	475,833
PSWGT8	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 8	3.67 - 15491.94	Replicate weight range	486	475,833
				486	475,833
PSWGT9	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 9	3.10 - 16852.17	Replicate weight range	486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PSWGT10	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 10	3.48 - 20528.16	Replicate weight range	486	475,833
				486	475,833
PSWGT11	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 11	2.99 - 14593.08	Replicate weight range	486	475,833
				486	475,833
PSWGT12	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 12	2.80 - 19057.70	Replicate weight range	486	475,833
				486	475,833
PSWGT13	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 13	2.32 - 10952.23	Replicate weight range	486	475,833
				486	475,833
PSWGT14	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 14	4.68 - 14386.36	Replicate weight range	486	475,833
				486	475,833
PSWGT15	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 15	3.27 - 16274.09	Replicate weight range	486	475,833
				486	475,833
PSWGT16	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 16	8.09 - 11062.25	Replicate weight range	486	475,833
				486	475,833
PSWGT17	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 17	5.21 - 16808.80	Replicate weight range	486	475,833
				486	475,833
PSWGT18	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 18	2.85 - 13824.11	Replicate weight range	486	475,833
				486	475,833
PSWGT19	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 19	4.48 - 18030.07	Replicate weight range	486	475,833
				486	475,833
PSWGT20	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 20	2.48 - 19222.21	Replicate weight range	486	475,833
				486	475,833
PSWGT21	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 21	2.70 - 8744.76	Replicate weight range	486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PSWGT22	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 22	3.28 - 15535.25	Replicate weight range	486	475,833
				486	475,833
PSWGT23	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 23	3.12 - 14839.82	Replicate weight range	486	475,833
				486	475,833
PSWGT24	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 24	3.00 - 9524.87	Replicate weight range	486	475,833
				486	475,833
PSWGT25	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 25	3.36 - 20659.35	Replicate weight range	486	475,833
				486	475,833
PSWGT26	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 26	5.24 - 18165.75	Replicate weight range	486	475,833
				486	475,833
PSWGT27	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 27	2.84 - 18222.96	Replicate weight range	486	475,833
				486	475,833
PSWGT28	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 28	5.82 - 15750.20	Replicate weight range	486	475,833
				486	475,833
PSWGT29	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 29	2.26 - 19318.68	Replicate weight range	486	475,833
				486	475,833
PSWGT30	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 30	3.14 - 12194.78	Replicate weight range	486	475,833
				486	475,833
PSWGT31	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 31	1.63 - 9901.04	Replicate weight range	486	475,833
				486	475,833
PSWGT32	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 32	3.77 - 20419.96	Replicate weight range	486	475,833
				486	475,833
PSWGT33	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 33	4.97 - 14883.50	Replicate weight range	486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PSWGT34	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 34	1.62 - 19240.31	Replicate weight range	486	475,833
				486	475,833
PSWGT35	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 35	3.84 - 16256.94	Replicate weight range	486	475,833
				486	475,833
PSWGT36	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 36	2.04 - 20874.91	Replicate weight range	486	475,833
				486	475,833
PSWGT37	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 37	5.10 - 19113.31	Replicate weight range	486	475,833
				486	475,833
PSWGT38	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 38	3.07 - 8728.43	Replicate weight range	486	475,833
				486	475,833
PSWGT39	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 39	5.53 - 11130.34	Replicate weight range	486	475,833
				486	475,833
PSWGT40	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 40	3.24 - 15144.28	Replicate weight range	486	475,833
				486	475,833
PSWGT41	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 41	2.60 - 17486.52	Replicate weight range	486	475,833
				486	475,833
PSWGT42	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 42	3.45 - 20568.20	Replicate weight range	486	475,833
				486	475,833
PSWGT43	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 43	3.01 - 14618.04	Replicate weight range	486	475,833
				486	475,833
PSWGT44	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 44	2.56 - 20040.21	Replicate weight range	486	475,833
				486	475,833
PSWGT45	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 45	2.34 - 8349.64	Replicate weight range	486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PSWGT46	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 46	4.47 - 14284.57	Replicate weight range	486	475,833
				486	475,833
PSWGT47	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 47	3.41 - 16321.48	Replicate weight range	486	475,833
				486	475,833
PSWGT48	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 48	6.90 - 11108.81	Replicate weight range	486	475,833
				486	475,833
PSWGT49	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 49	5.18 - 17792.50	Replicate weight range	486	475,833
				486	475,833
PSWGT50	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 50	3.02 - 13774.32	Replicate weight range	486	475,833
				486	475,833
PSWGT51	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 51	4.14 - 18174.26	Replicate weight range	486	475,833
				486	475,833
PSWGT52	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 52	2.51 - 19809.43	Replicate weight range	486	475,833
				486	475,833
PSWGT53	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 53	2.54 - 11404.96	Replicate weight range	486	475,833
				486	475,833
PSWGT54	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 54	3.28 - 15527.57	Replicate weight range	486	475,833
				486	475,833
PSWGT55	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 55	3.14 - 14817.37	Replicate weight range	486	475,833
				486	475,833
PSWGT56	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 56	2.45 - 12409.53	Replicate weight range	486	475,833
				486	475,833
PSWGT57	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 57	2.89 - 21258.97	Replicate weight range	486	475,833

Frequencies

NAME	LABEL	VALUE	DESCRIPTION	UNWEIGHTED	WEIGHTED
				486	475,833
PSWGT58	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 58	5.19 - 18320.27	Replicate weight range	486	475,833
				486	475,833
PSWGT59	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 59	2.99 - 18174.56	Replicate weight range	486	475,833
				486	475,833
PSWGT60	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 60	6.03 - 16581.90	Replicate weight range	486	475,833
				486	475,833
PSWGT61	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 61	2.27 - 18827.76	Replicate weight range	486	475,833
				486	475,833
PSWGT62	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 62	3.14 - 12166.98	Replicate weight range	486	475,833
				486	475,833
PSWGT63	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 63	1.66 - 9296.67	Replicate weight range	486	475,833
				486	475,833
PSWGT64	FINAL POST-STRATIFIED REPLICATE WEIGHT: REPLICATE 64	4.47 - 19505.59	Replicate weight range	486	475,833
				486	475,833
NUM_COND	TOTAL NUMBER OF MEDICAL CONDITIONS REPORTED	0	0 Medical Conditions	5	3,064
		1	1 Medical Condition	7	6,845
		2	2 Medical Conditions	4	1,010
		3	3 Medical Conditions	25	17,999
		4	4 Medical Conditions	41	50,195
		5	5 Medical Conditions	55	72,265
		6	6 Medical Conditions	56	51,955
		7	7 Medical Conditions	78	84,498
		8	8 Medical Conditions	74	57,113
		9	9 Medical Conditions	54	39,987
		10	10 Medical Conditions	41	44,081
		11	11 Medical Conditions	23	25,811
		12	12 Medical Conditions	11	4,190
		13	13 Medical Conditions	3	5,067

Frequencies

<i>NAME</i>	<i>LABEL</i>	<i>VALUE</i>	<i>DESCRIPTION</i>	<i>UNWEIGHTED</i>	<i>WEIGHTED</i>
		14	14 Medical Conditions	4	4,791
		15	15 Medical Conditions	3	2,822
		16	16 Medical Conditions	1	553
		17	17 Medical Conditions	1	3,589
				486	475,833