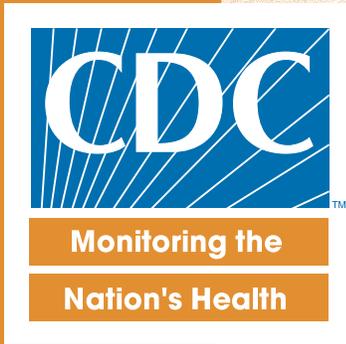


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Vital and Health Statistics

Series 13, Number 152

June 2002

The National Nursing Home Survey: 1999 Summary

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention • National Center for Health Statistics

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Suggested Citation

Jones A. The National Nursing Home Survey: 1999 summary. National Center for Health Statistics. Vital Health Stat 13(152). 2002.

Library of Congress Catalog Card Number 88-600333

For sale by the U.S. Government Printing Office
Superintendent of Documents
Mail Stop: SSOP
Washington, DC 20402-9328
Printed on acid-free paper.

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Series 13, Number 152

The National Nursing Home Survey: 1999 Summary

Data From the National
Health Care Survey

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics
Hyattsville, Maryland
June 2002
DHHS Publication No. (PHS) 2002-1723

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Cooperation of the U.S. Census Bureau

Under the legislation establishing the National Health Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies.

In accordance with specifications established by the National Center for Health Statistics, the U.S. Census Bureau, under a contractual arrangement, participated in planning the surveys and collecting the data for the National Hospital Discharge Survey.

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Objective

This report presents estimates of nursing homes and their current residents and discharges in the United States. The data are summarized by characteristics of facilities such as information about Medicare and Medicaid certification, bed size, type of ownership, services provided, and per diem rates. Data are also summarized by characteristics of current residents and discharges such as demographic and resident characteristics, health and functional status, services provided, primary diagnosis, and all-listed diagnoses.

Methods

Estimates in this report are from the 1999 National Nursing Home Survey (NNHS), the sixth in a series of surveys. This nationwide sample survey was conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention, from July through December 1999.

Results

About 1.6 million current residents and 2.5 million discharges received nursing home care during 1999. About two-thirds (67 percent) of nursing homes are proprietary (for profit) and are located in the Midwest and South. There were 1.5 million full-time equivalent (FTE) employees providing health-related services to residents.

Ninety percent of current residents were age 65 years or over, 72 percent were female, and 57 percent were widowed. Nearly half (46 percent) of current residents were admitted from a hospital. The average length of time since admission for current residents was 892 days.

Most nursing home discharges were female (62 percent) and 88 percent were age 65 years and over. The main reasons for most discharges were admission to a hospital (29 percent) and death (24 percent). The average length of stay for a discharge was 272 days.

Keywords: National Nursing Home Survey • nursing homes • current residents • discharges • long-term care • ICD-9-CM

The National Nursing Home Survey: 1999 Summary

by Adrienne Jones, Division of Health Care Statistics

Introduction

This report provides estimates of nursing homes, current residents, and discharges collected in the 1999 National Nursing Home Survey, which was conducted from July through December 1999 by the Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS), Division of Health Care Statistics. This is the sixth NCHS survey of nursing home facilities, current residents, and discharges. Other surveys were conducted in 1973-74, 1977, 1985, and 1997 ([table A](#)).

Nursing homes are defined as facilities with three or more beds that routinely provide nursing care services. Facilities may be certified by Medicare or Medicaid (or both) or not certified, but licensed by the State as a nursing home. These facilities may be freestanding or a distinct unit of a larger facility.

The data are shown in [tables 1-67](#). Characteristics of facilities, including information about Medicare and Medicaid certification, bed size, type of ownership, staffing, services provided, and per diem rates are presented in [tables 1-6](#). Information about current residents, including demographic characteristics, length of time since admission, primary expected source of payment, health and functional status, services received, primary diagnosis, and all-listed diagnoses, are presented in [tables 7-34](#). Information on discharges, including discharge status, is presented in [tables 35-67](#).

Methods

Data Collection

Data collection for the 1999 National Nursing Home Survey (NNHS) was conducted between July and December 1999. The sample for the 1999 NNHS was taken from a frame that consisted of all nursing home facilities identified in the 1997 NNHS and updated with a sample of new facilities identified from files obtained in 1999. These updated files were obtained from the Centers for Medicare and Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA), and other national organizations.

The survey used a stratified two-stage probability design (2). The first stage is a probability sample of the nursing home facilities in the sampling frame. The primary sampling strata of nursing facilities were defined by bed size and certification status. Nursing homes were then selected using systematic sampling with probability proportional to their bed size. A sample of 1,423 nursing homes was selected.

The second stage consists of a sample of up to six current residents and six discharges from each facility. Residents and discharges were selected from lists constructed for each facility at the time of the interview. Current residents were defined as those on the roll as of midnight the day before the survey was conducted. The discharged sample consisted of residents who had been removed from the roll of the facility (including those whose care ended because of death) during a designated month (October 1,

Table A. Number and percent of facility characteristics and measures of utilization for nursing homes by survey year: United States, 1973–74, 1977, 1985, 1995, 1997, 1999

Survey year	Homes	Beds	Beds per nursing home	Current residents	Occupancy rate ¹	Discharges	Discharges per 100 beds ²
1999	18,000	1,879,600	104.5	1,628,300	86.6	2,522,300	134.2
1997	17,000	1,820,800	106.9	1,608,700	88.4	2,369,000	130.1
1995	16,700	1,770,900	106.1	1,548,600	96.4
1985	19,100	1,624,200	85.0	1,491,400	80.5	1,223,500	75.3
1977	18,900	1,402,400	74.2	1,303,100	98.4	1,117,500	80.4
1973–74	15,700	1,177,300	75.0	1,075,800	95.3

... Data not available.

¹Occupancy rate is calculated by dividing residents by available beds.

²Discharge rate is calculated by dividing discharges by available beds.

1998–September 30, 1999) that was randomly selected for each facility. A person who was discharged more than once from a nursing home during the discharge reference period was counted more than once; thus discharges represent episodes of care, rather than individual patients.

Data were collected via face-to-face interviews with nursing home staff. Three questionnaires were used to collect the data. The Facility Questionnaire, focusing on characteristics of the facilities, was completed with the administrator-appointed designee. The Current Resident and Discharged Resident Questionnaires were completed for each sampled person by a staff member familiar with care received by the resident using medical records. No resident was interviewed directly.

Interpretation and Qualifications of Data

Data in this report describe nursing home utilization for current residents and discharges. The current resident sample describes individuals residing in the nursing home on the night before data collection began, and these data represent nursing home utilization on any given day between July and December 1999. The resident sample is more likely to contain long-term nursing home residents and, conversely, to underestimate short nursing home stays. Because short-term residents are less likely to be on the nursing home rolls on a given night, they are less likely to be sampled. The current resident sample is useful for looking at issues such as

the current resident mix, their functional status, dependency, service utilization (relative to the nursing home’s staff), and the length of time between admission and the date of the survey (3).

Although the current resident sample provides information on persons residing in the nursing home at the time of the survey, the discharge sample is designed to provide information on completed episodes of care across an entire year. A sample is taken from all discharges from the facility during a designated month between October 1998 and September 1999. The discharge sample may include those discharged from the facility more than once during the sample period and, therefore, represents discharges or completed episodes rather than individual persons. Discharge data are useful for looking at issues such as average length of stay, differences between admission and discharge diagnoses, and discharge disposition.

Estimates in this report are based on the 1,423 responding facilities, 8,215 current residents, and 6,913 discharges. Additional information on survey procedures as well as definitions of terms and survey instruments are in [appendixes I–IV](#) of this report.

Findings

Facilities

- [Table A](#) shows facility characteristics and measures of utilization for previous and current survey years of

nursing home data. In 1999, there were 18,000 nursing homes operating in the United States. The average number of beds per nursing home was 105. The occupancy rate for current residents was 87 percent and the discharge rate was 134 per 100 beds.

- The majority of nursing homes in the United States are proprietary (67 percent), and voluntary nonprofit organizations operate 27 percent of nursing homes ([figure 1](#)).
- More than 80 percent of nursing homes were certified by both Medicare and Medicaid ([figure 2](#)).
- Approximately 67 percent of nursing homes are located in the Midwest and South ([table 1](#)).
- The average basic charge per day for private pay residents was \$146 for skilled care, \$114 for intermediate care, and \$101 for residential care. The average per diem rate was \$213 for Medicare residents and \$105 for Medicaid residents ([figure 3](#)).
- Services to residents were provided by 1.5 million full-time equivalent (FTE) employees. Almost two-thirds (64 percent) of FTEs were nursing staff (registered nurse (RN), licensed practical nurse (LPN), nurse assistant (NA)), and orderlies ([table 5](#)).

Current Residents

- In 1999, there were 1.6 million current residents. The majority (1.5 million or 90 percent) of nursing home residents were elderly (65 years and over) ([table 7](#)).

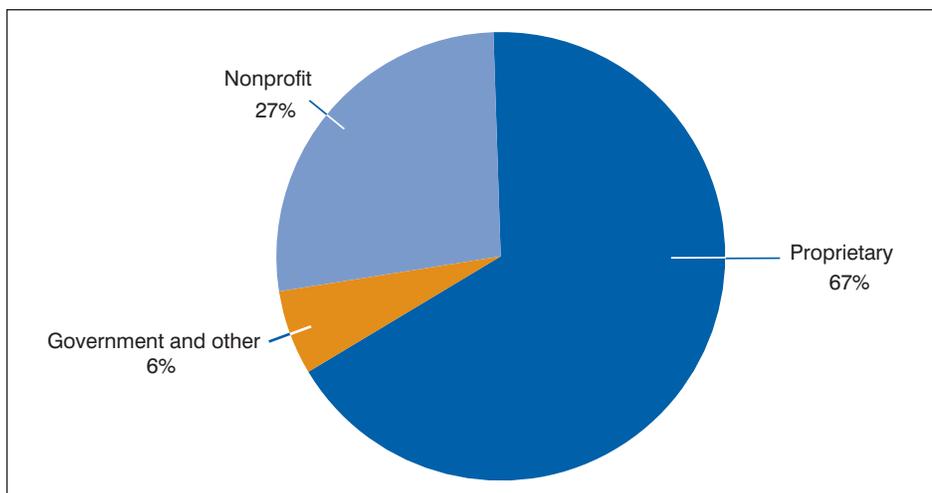


Figure 1. Percent distribution of nursing homes by type of ownership: United States, 1999

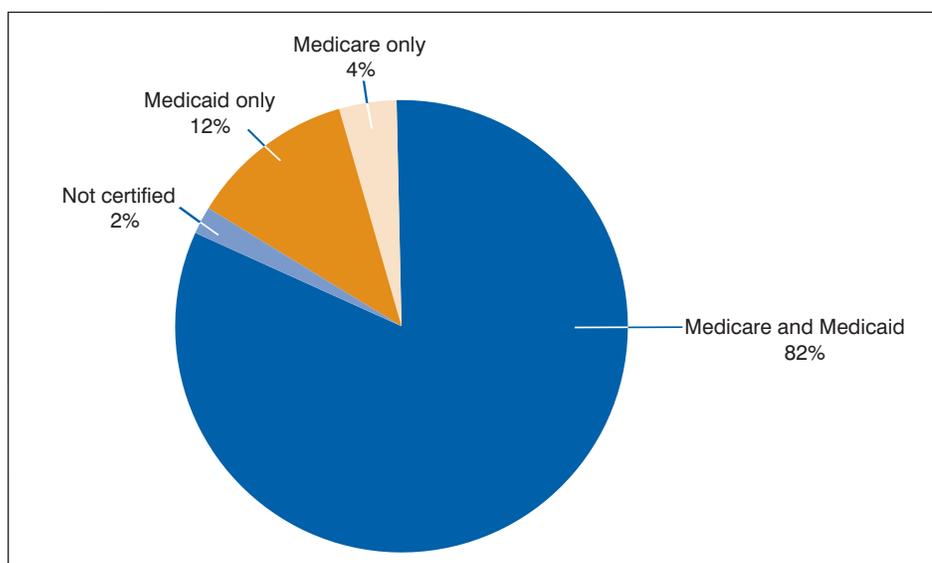


Figure 2. Percent distribution of nursing homes by certification: United States, 1999

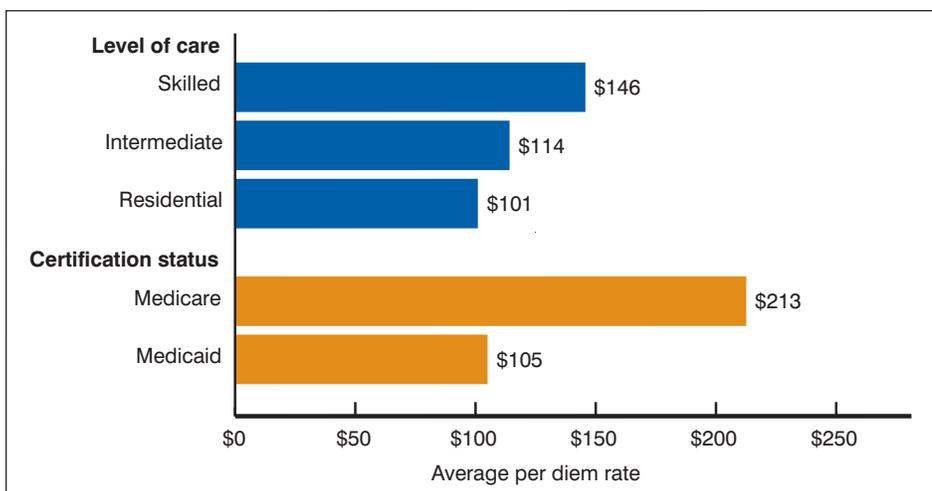


Figure 3. Average per diem rates for private pay residents by level of facility and per diem rates for Medicare and Medicaid residents by certificate status of facility: United States, 1999

- The primary expected source of payment for most residents at the time of the survey was Medicaid (955,700 or 59 percent). At the time of admission, Medicaid covered 654,200 (40 percent) of residents (table 9) (figure 4).
- The average length of time since admission for current residents was 892 days. The length of time was over 1,000 days for residents of government/other-owned nursing homes, those certified by Medicaid only, those not certified, and those with 200 or more beds (table 11).
- Most current residents were admitted to a nursing home from a hospital (46 percent), while 30 percent came from a private or semiprivate place of residence (table 15).
- The average daily charge for current residents was \$116. Current residents whose primary expected payment source was Medicare had an average daily charge of \$166 (table 16).
- Aids and assistive devices were commonly used by current residents. Sixty-two percent of current residents used eyeglasses. Wheelchairs and walkers were the most commonly used assistive devices, used by 62 and 25 percent, respectively (table 17).
- Three-quarters of current residents required assistance with three or more activities of daily living (ADLs). Most residents received help with bathing (94 percent) and dressing (87 percent), more than half (56 percent) received help using the toilet room, and almost half (47 percent) received help with eating (table 20) (figures 5,6).
- The services most frequently received by current residents in the month prior to the interview were nursing services (96 percent), prescribed and nonprescribed medicines (94 percent), medical services (91 percent), personal care (90 percent), nutritional services (73 percent), social services (72 percent), and equipment or devices (53 percent) (table 21).
- Twenty-three percent of residents had an admission diagnosis

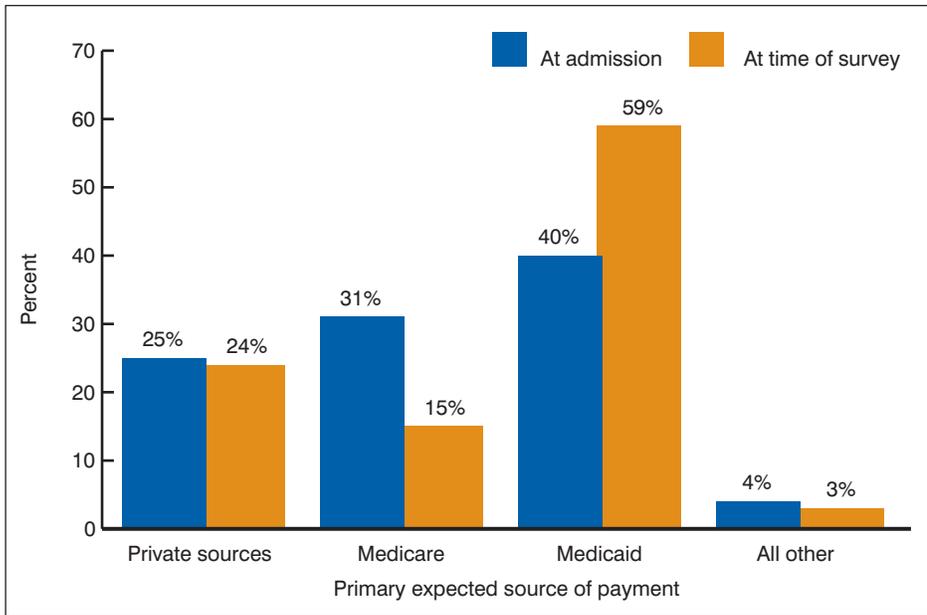


Figure 4. Percent distribution of primary expected source of payment at admission and at time of survey: United States, 1999

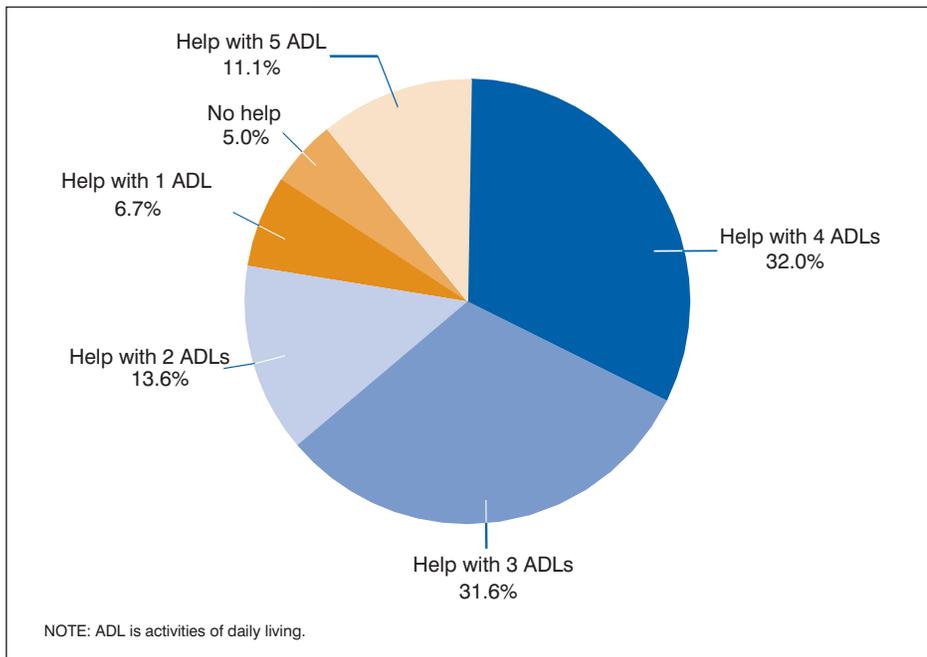


Figure 5. Percent distribution of residents with dependencies in activities of daily living and number of dependencies: United States, 1999

classified as “Diseases of the Circulatory System,” which includes heart disease and essential hypertension (table 26).

Discharges

- From October 1998 through September 1999, there were an estimated 2.5 million discharges

- from nursing homes (table A).
- Approximately 66 percent of discharges are from proprietary facilities (table 36).
- The majority of discharges were female (62 percent) and white persons (86 percent) and in the 85 years and over age group (37 percent) (figure 7).
- The primary expected source of

payment for 1,136,700 (45 percent) discharges was Medicare, and Medicaid covered 26 percent of discharges (table 38).

- The average length of stay for discharges was 272 days. Most discharges (68 percent) had lengths of stay that were less than 3 months. However, the average length of stay for discharges from government, noncertified facilities, or those certified by Medicaid only was considerably higher (511,781, and 608 days, respectively) (table 40).
- Forty-eight percent of discharges were widowed and 28 percent were married.
- Most discharges (65 percent) were admitted from a hospital, almost one-quarter (22 percent) came from a private or semiprivate residence, and a small number (5 percent) came from another nursing home (table 41).
- More than 80 percent of discharges received assistance with bathing or dressing at the time immediately prior to discharge, 37 percent received help walking, and almost 75 percent needed help in three or more ADLs (table 45).
- An estimated 834,000 discharges (33 percent) were recovered or stabilized, and 24 percent were deceased. Those who had recovered had an average length of stay of 62 days. Deceased residents had an average length of stay of 568 days (table 51).
- The most common diagnostic classification among discharges was “Diseases of the Circulatory System,” comprising 22 percent of admission and 24 percent of discharge diagnoses (table 57). These patients had an average length of stay of 300 days (table 58).
- Discharge with diagnoses from mental disorders and diseases of the nervous system and sense organs (ICD-9-CM) comprised 8 and 6 percent first-listed diagnoses (table 59), but had the longest lengths of stay during the discharge period 1998-99. Their average length of stay was 614 days for diagnoses of mental disorders and

629 days for diseases of the nervous system and sense organs (table 58).

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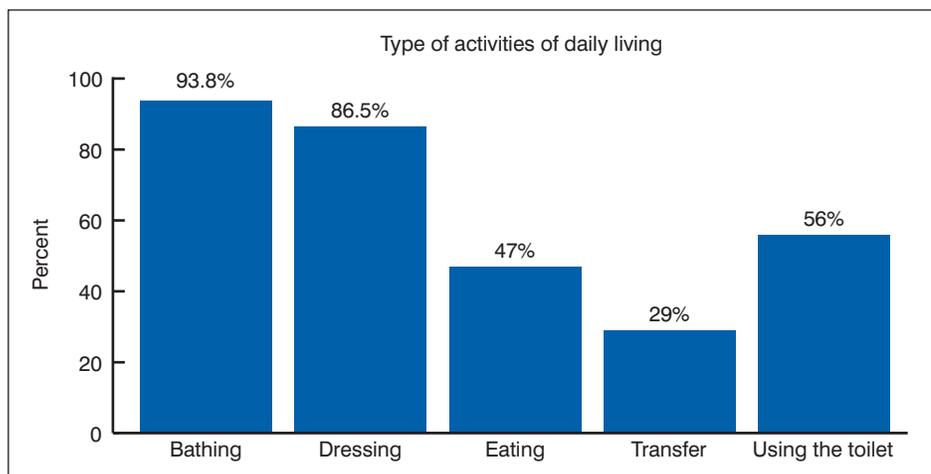


Figure 6. Percent of nursing home residents with dependencies in activities of daily living and percent distribution of residents by number of dependencies: United States, 1999

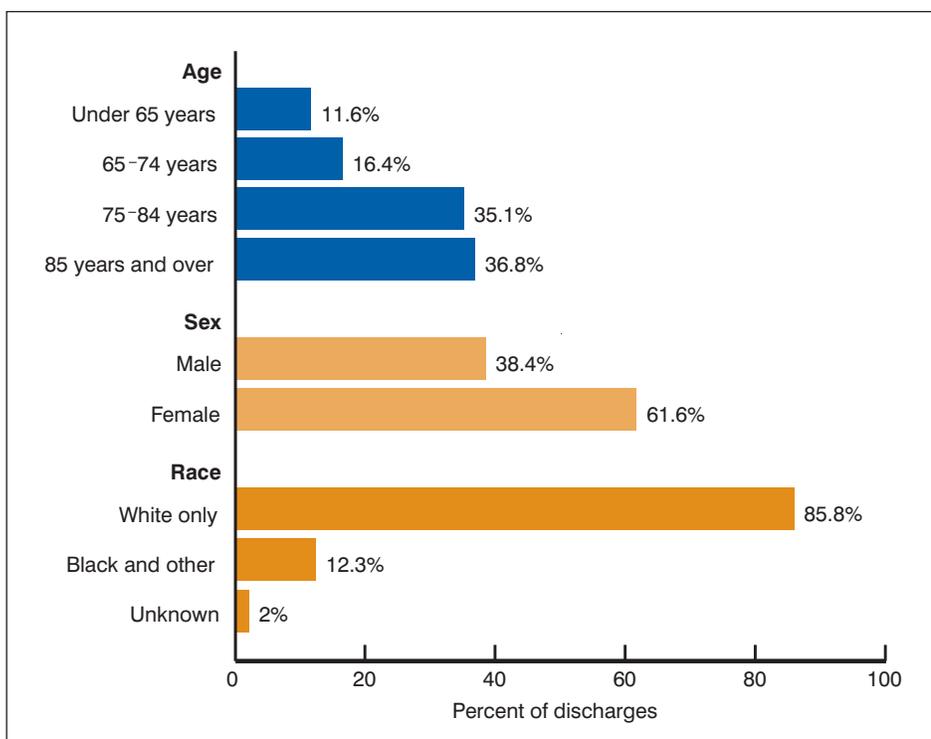


Figure 7. Percent distribution of discharges by age, sex, and race: United States, 1998-99

Table 1. Number and percent distribution of nursing homes, number of beds, beds per nursing home, current residents, occupancy rate, discharges, and discharge rate per 100 beds, by selected facility characteristics: United States, 1999

Facility characteristic	Nursing homes		Beds		Current residents		Discharges	
	Number	Percent distribution	Number	Beds per nursing home	Number	Occupancy rate ¹	Number	Discharge rate per 100 beds ²
All facilities	18,000	100.0	1,879,600	104.5	1,628,300	86.6	2,522,300	134.2
Ownership								
Proprietary	12,000	66.5	1,235,800	103.3	1,049,300	84.9	1,655,500	134.0
Voluntary nonprofit	4,800	26.7	499,500	103.9	445,600	89.2	751,800	150.5
Government and other	1,200	6.7	144,300	119.4	133,300	92.4	115,100	79.7
Certification								
Certified								
by Medicare and Medicaid	14,700	81.8	1,624,300	110.4	1,415,400	87.1	2,244,300	138.2
by Medicare only	*600	*3.5	46,800	73.6	37,100	79.2	158,700	339.2
by Medicaid only	2,100	11.9	169,900	79.5	143,100	84.2	98,600	58.1
Not certified	*500	*2.8	38,600	76.7	32,700	84.8	20,700	53.6
Beds								
Fewer than 50 beds	2,100	11.5	69,300	33.4	58,600	84.7	214,000	308.9
50–99 beds	7,000	38.7	484,500	69.7	414,200	85.5	585,200	120.8
100–199 beds	7,500	41.8	952,400	126.7	827,800	86.9	1,296,900	136.2
200 beds or more	1,400	8.0	373,500	259.6	327,700	87.7	426,100	114.1
Geographic region								
Northeast	3,200	17.8	412,800	129.1	383,400	92.9	524,200	127.0
Midwest	6,000	33.3	598,400	100.1	498,200	83.3	709,700	118.6
South	6,000	33.2	614,900	103.0	531,500	86.4	714,800	116.2
West	2,800	15.8	253,500	89.3	215,200	84.9	573,600	226.3
Location of facility								
Metropolitan statistical area	11,000	61.3	1,298,500	117.8	1,128,400	100.0	1,948,800	150.1
Nonmetropolitan statistical area	7,000	38.7	581,100	83.5	499,900	66.9	573,500	98.7
Affiliation ³								
Chain	10,800	59.9	1,128,300	104.7	978,800	75.4	1,581,300	140.2
Independent	7,200	39.8	747,600	104.5	646,100	111.2	938,100	125.5

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Occupancy rate is calculated by dividing residents by available beds.

²Discharge rate is calculated by dividing discharges by available beds.

³Excludes unknown.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 2. Number of nursing homes and beds by selected facility characteristics, and certification status: United States, 1999

Facility characteristic	All nursing homes		Certified by Medicare and Medicaid		Certified by Medicare only		Certified by Medicaid only		Not certified	
	Homes	Beds	Homes	Beds	Homes	Beds	Homes	Beds	Homes	Beds
All facilities	18,000	1,879,600	14,700	1,624,300	*600	*46,800	2,100	169,900	*500	*38,600
Ownership										
Proprietary	12,000	1,235,800	10,100	1,094,600	*	21,300	1,400	105,500	*	14,400
Voluntary nonprofit	4,800	499,500	3,800	419,000	*	21,500	*500	39,900	*	19,100
Government and other	1,200	144,300	900	110,700	*	3,900	*	24,500	*	5,200
Beds										
Fewer than 50 beds	2,100	69,300	*1,200	43,200	*	5,800	*	11,500	*	8,700
50–99 beds	7,000	484,500	5,400	385,500	*	15,500	1,200	76,500	*	7,000
100–199 beds	7,500	952,400	6,800	860,400	*	14,500	*500	64,500	*	13,000
200 beds or more	1,400	373,500	1,300	335,100	*	10,900	*	17,500	*	9,900
Geographic region										
Northeast	3,200	412,800	3,000	396,300	*	8,300	*	*	*	6,400
Midwest	6,000	598,400	4,700	494,500	*	19,000	*900	68,600	*	16,200
South	6,000	614,900	4,600	509,600	*	13,000	1,100	82,500	*	9,800
West	2,800	253,500	2,400	224,000	*	6,500	*	17,000	*	6,100
Location of agency										
Metropolitan statistical area	11,000	1,298,500	9,200	1,138,500	*500	42,700	900	84,600	*	32,700
Nonmetropolitan statistical area	7,000	581,100	5,500	485,900	*	4,100	1,200	85,300	*	5,900
Affiliation ¹										
Chain	10,800	1,128,300	9,400	1,016,100	*	26,900	*900	74,200	*	11,100
Independent	7,200	747,600	5,200	604,600	*	19,900	1,200	95,700	*	27,500

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 3. Number and percent distribution of nursing homes by selected facility characteristics, according to bed size: United States, 1999

Facility characteristic	All sizes		Fewer than 50 beds		50–99 beds		100–199 beds		200 beds or more	
	Number	Percent distribution	Number	Percent distribution	Number	Percent distribution	Number	Percent distribution	Number	Percent distribution
All facilities	18,000	100.0	2,100	100.0	7,000	100.0	7,500	100.0	1,400	100.0
Ownership										
Proprietary	12,000	66.5	*1,200	*55.9	4,500	64.5	5,600	74.4	700	50.6
Voluntary nonprofit	4,800	26.7	*	*	2,000	28.2	1,600	21.2	*	*
Government and other	1,200	6.7	*	*	*	*	*	*	*	*
Certification										
Certified										
By Medicare and Medicaid	14,700	81.8	*1,200	*58.1	5,400	78.0	6,800	90.2	1,300	90.4
By Medicare only	*600	*3.5	*	*	*	*	*	*	*	*
By Medicaid only	2,100	11.9	*	*	1,200	17.2	*500	7.0	*	*
Not certified	*500	*2.8	*	*	*	*	*	*	*	*
Geographic region										
Northeast	3,200	17.8	*	*	*700	*9.6	1,700	22.7	500	35.6
Midwest	6,000	33.3	*	*	2,800	40.9	2,100	27.3	500	36.2
South	6,000	33.2	*	*	2,200	31.4	2,900	39.0	300	23.0
West	2,800	15.8	*	*	1,300	18.0	800	11.0	*	*
Location of agency										
Metropolitan statistical area	11,000	61.3	*1,200	*56.3	3,300	47.7	5,200	69.8	1,300	89.7
Nonmetropolitan statistical area	7,000	38.7	*900	*43.7	3,600	52.3	2,300	30.2	*	*
Affiliation ¹										
Chain	10,800	59.9	*800	*40.2	4,100	58.4	5,200	69.4	700	46.3
Independent	7,200	39.8	*1,200	*59.8	2,900	41.1	2,300	30.4	800	53.7

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 4. Number and percent of nursing homes by type of services provided and ownership: United States, 1999

Type of service	All ownership		Proprietary		Voluntary nonprofit		Government	
	Number	Percent	Number	Number	Percent	Number	Percent	Number
All facilities ¹	18,000	...	12,000	...	4,800	...	1,200	...
Dental services	14,400	80.0	9,600	80.6	3,900	80.1	900	73.8
Help with oral hygiene	17,500	97.1	11,700	97.5	4,600	96.5	1,200	95.9
Home health services	4,100	22.9	2,600	21.6	1,300	26.1	*	*
Hospice services	13,400	74.6	8,900	74.4	3,700	76.6	800	68.3
Medical services	17,300	96.1	11,500	96.4	4,600	95.6	1,100	94.2
Mental health services	14,300	79.7	9,600	80.3	3,700	77.8	1,000	82.3
Nursing services	17,900	99.5	11,900	99.5	4,800	99.2	1,200	100.0
Nutrition services	17,800	99.2	11,900	99.7	4,700	98.2	1,200	98.0
Occupational therapy	16,900	94.0	11,300	94.7	4,500	93.3	1,100	89.6
Personal care	17,400	96.7	11,600	96.8	4,600	96.1	1,200	97.9
Physical therapy	17,400	96.9	11,600	97.0	4,700	96.8	1,200	96.0
Podiatry services	16,000	89.2	10,800	90.6	4,200	88.1	1,000	78.9
Prescribed or nonprescribed medicines	17,600	98.0	11,800	98.3	4,700	97.3	1,200	98.4
Sheltered employment	1,200	6.6	800	6.9	*	*	*	*
Social services	17,500	97.5	11,700	97.8	4,600	96.5	1,200	99.0
Special education	2,800	15.4	1,900	16.1	*600	*12.3	*	*
Speech and hearing therapy	16,800	93.5	11,200	93.9	4,500	92.8	1,100	91.7
Transportation	14,700	81.7	9,500	79.1	4,100	85.7	1,100	92.1
Vocational rehabilitation	2,300	13.0	1,700	13.9	*500	*9.9	*	*
Equipment or devices	17,100	95.3	11,300	94.4	4,600	96.5	1,200	99.5
Other	4,400	24.5	2,800	23.4	1,300	27.1	*	*

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers will add to more than totals because a facility may provide more than one type of service.

NOTE: Percents are based on the unrounded numbers.

Table 5. Number and rate per 100 beds of full-time equivalent employees by occupational categories and selected nursing home characteristics: United States, 1999

Facility characteristic	Occupational category ¹													
	All full-time equivalent employees		Administrative medical and therapeutic ²		Nursing								All other staff	
	Number	Rate per 100 beds	Number	Rate per 100 beds	Total		Registered nurse		Licensed practical nurse		Nurse's aide and orderly		Number	Rate per 100 beds
All facilities	1,512,200	80.5	96,600	5.1	961,100	51.1	143,000	7.6	199,800	10.6	618,300	32.9	454,600	24.2
Ownership														
Proprietary	920,000	74.4	60,200	4.9	597,500	48.3	84,100	6.8	128,900	10.4	384,500	31.1	262,300	21.2
Voluntary nonprofit	457,300	91.6	29,100	5.8	279,800	56.0	45,700	9.1	54,700	11.0	179,400	35.9	148,500	29.7
Government and other	134,900	93.5	7,400	5.1	83,800	58.1	13,200	9.1	16,200	11.2	54,400	37.7	43,800	30.3
Certification														
Certified														
By Medicare and Medicaid	1,321,400	81.3	83,200	5.1	841,700	51.8	127,200	7.8	174,100	10.7	540,500	33.3	396,400	24.4
By Medicare only	38,200	81.7	2,800	6.0	26,000	55.6	5,100	10.8	5,300	11.3	15,700	33.5	9,400	20.1
By Medicaid only	123,000	72.4	9,000	5.3	75,200	44.3	7,800	4.6	16,700	9.8	50,700	29.8	38,800	22.8
Not certified	29,600	76.7	1,600	4.1	18,100	47.0	2,900	7.6	3,800	9.8	11,400	29.6	9,900	25.7
Beds														
Fewer than 50 beds	64,500	93.2	7,100	10.3	42,600	61.5	8,300	12.0	8,900	12.8	25,400	36.7	14,800	21.4
50–99 beds	400,500	82.7	28,800	5.9	251,600	51.9	36,500	7.5	51,000	10.5	164,100	33.9	120,200	24.8
100–199 beds	742,400	78.0	45,000	4.7	476,400	50.0	68,400	7.2	103,200	10.8	304,800	32.0	220,900	23.2
200 beds or more	304,800	81.6	15,700	4.2	190,500	51.0	29,800	8.0	36,700	9.8	124,000	33.2	98,600	26.4
Geographic region														
Northeast	382,100	92.6	21,700	5.2	244,400	59.2	41,600	10.1	43,900	10.6	158,900	38.5	116,100	28.1
Midwest	445,100	74.4	28,300	4.7	272,100	45.5	44,200	7.4	55,800	9.3	172,200	28.8	144,700	24.2
South	481,100	78.2	30,500	5.0	311,400	50.6	35,200	5.7	74,200	12.1	202,000	32.9	139,300	22.6
West	203,800	80.4	16,100	6.4	133,200	52.5	22,000	8.7	25,900	10.2	85,200	33.6	54,500	21.5
Location of agency														
Metropolitan statistical area	1,051,200	93.2	68,300	6.1	671,200	59.5	104,600	9.3	139,700	12.4	426,800	37.8	311,800	27.6
Nonmetropolitan statistical area	461,000	61.7	28,300	3.8	289,900	38.8	38,400	5.1	60,100	8.0	191,500	25.6	142,800	19.1
Affiliation ³														
Chain	861,700	66.4	58,700	4.5	555,900	42.8	79,100	6.1	120,900	9.3	356,000	27.4	247,100	19.0
Independent	648,700	111.6	37,700	6.5	403,900	69.5	63,700	11.0	78,700	13.5	261,500	45.0	207,200	35.7

¹Includes only those employees providing direct health-related services to residents.²Includes dentists, dental hygienists, physical therapists, speech pathologists and/or audiologists, dieticians or nutritionists, podiatrists, and social workers.³Excludes unknown.

NOTES: Numbers may not add to totals because of rounding. Rates are based on the unrounded numbers.

Table 6. Average per diem rates for private pay patients by level of care of facility, by certification status of facility, and selected facility characteristics: United States, 1999

Facility characteristic	Level of care			Certification status	
	Skilled	Intermediate	Residential	Medicare	Medicaid
Total	\$ 145.66	\$ 114.14	\$ 100.95	\$ 212.60	\$ 104.97
Ownership					
Proprietary	140.17	111.01	101.50	215.84	99.88
Voluntary nonprofit	160.92	123.64	99.74	212.93	115.98
Government and other	138.70	113.42	*	171.52	115.36
Certification					
Certified:					
By Medicare and Medicaid	148.26	118.71	106.37	211.67	108.28
By Medicare only	*179.03	*	*	*	*
By Medicaid only	*95.80	88.80	*77.98	...	82.91
Not certified	*	*	*
Beds					
Fewer than 50 beds	*168.2	*115.27	*	*229.02	*117.70
50–99 beds	132.00	105.43	94.24	197.25	97.10
100–199 beds	146.06	118.17	106.61	219.14	105.57
200 beds or more	175.34	133.95	120.56	229.78	124.71
Geographic region					
Northeast	189.31	161.49	*150.32	221.85	133.89
Midwest	138.92	109.89	93.14	199.42	98.24
South	122.95	99.25	86.47	200.31	89.23
West	153.35	121.89	*106.74	247.61	117.44
Location of agency					
Metropolitan statistical area	155.55	124.08	110.11	230.90	112.55
Nonmetropolitan statistical area	127.07	100.41	86.53	181.43	93.80
Affiliation ¹					
Chain	141.86	113.63	103.24	212.12	103.01
Independent	152.34	115.06	97.79	212.68	108.13

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

... Category not applicable.

¹Excludes unknown.

Table 7. Number of nursing home residents by selected facility characteristics and age, sex, and race of resident: United States, 1999

Facility characteristic	Age at interview						Sex		Race			
	All residents	Under 65 years	65 years and over									
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White only	Black and other ¹	Black only	Unknown
All facilities	1,628,300	158,700	1,469,500	194,800	517,600	757,100	457,900	1,170,400	1,394,900	215,900	178,700	17,400
Ownership												
Proprietary	1,049,300	113,000	936,300	133,700	345,500	457,100	305,800	743,500	875,600	162,900	135,100	*10,800
Voluntary nonprofit	445,600	26,300	419,300	40,800	130,000	248,500	103,700	341,900	398,900	40,200	32,300	*6,600
Government and other	133,300	19,400	114,000	20,300	42,200	51,400	48,300	85,000	120,500	*12,900	*11,400	–
Certification												
Certified												
By Medicare and Medicaid	1,415,400	134,600	1,280,800	172,100	454,400	654,300	389,800	1,025,600	1,209,600	189,000	157,400	16,700
By Medicare only	37,100	*	35,700	*	12,900	19,800	13,800	23,300	35,100	*	*	*
By Medicaid only	143,100	20,600	122,500	17,100	40,900	64,500	42,900	100,100	119,200	23,500	19,200	*
Not certified	32,700	*	30,600	*	9,500	18,500	*11,300	21,500	31,100	*	*	–
Beds												
Fewer than 50 beds	58,600	*3,900	53,800	*6,600	17,000	30,100	16,600	42,100	53,000	*5,300	*	*
50–99 beds	414,200	40,200	374,000	44,700	129,300	200,000	122,500	291,600	369,100	41,300	30,800	*
100–199 beds	827,800	75,500	752,300	102,000	267,200	383,000	221,800	606,000	705,100	114,100	98,100	*8,600
200 beds or more	327,700	38,200	289,500	41,400	104,100	144,000	97,000	230,700	267,800	55,200	48,400	*
Geographic region												
Northeast	383,400	34,200	349,200	46,400	118,500	184,300	109,200	274,200	339,000	40,000	33,800	*
Midwest	498,200	45,000	453,200	58,900	153,200	241,100	135,800	362,400	453,400	42,600	37,800	*
South	531,500	51,300	480,100	63,400	179,100	237,700	143,700	387,700	423,600	100,600	95,500	*7,300
West	215,200	28,200	187,000	26,100	66,800	94,000	69,100	146,100	178,900	32,700	11,600	*
Location of agency												
Metropolitan statistical area	1,128,400	118,000	1,010,300	135,200	362,700	512,500	314,600	813,800	946,800	168,800	138,500	12,800
Nonmetropolitan statistical area	499,900	40,700	459,200	59,600	155,000	244,600	143,300	356,600	448,100	47,200	40,200	*
Affiliation ²												
Chain	978,800	98,100	880,700	120,900	319,100	440,800	277,800	701,000	833,500	136,300	115,700	*9,100
Independent	646,100	60,300	585,900	73,500	197,400	314,900	179,300	466,800	559,100	78,800	62,100	*8,300

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as “other”, and are reported in the “Black and other” race category.²Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 8. Percent distribution of nursing home residents by selected facility characteristics, according to age, sex, and race of residents: United States, 1999

Facility characteristic	Age at interview											
	All residents	Under 65 years	65 years and over			Sex		Race				
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White only	Black and other ¹	Black only	Unknown
All facilities	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ownership												
Proprietary	64.4	71.2	63.7	68.6	66.7	60.4	66.8	63.5	62.8	75.4	75.6	*62.2
Voluntary nonprofit	27.4	16.6	28.5	20.9	25.1	32.8	22.7	29.2	28.6	18.6	18.1	*37.8
Government and other	8.2	12.2	7.8	10.4	8.2	6.8	10.6	7.3	8.6	*6.0	*6.4	–
Certification												
Certified												
By Medicare and Medicaid	86.9	84.8	87.2	88.4	87.8	86.4	85.1	87.6	86.7	87.6	88.1	96.2
By Medicare only	2.3	*	2.4	*	2.5	2.6	3.0	2.0	2.5	*	*	*
By Medicaid only	8.8	13.0	8.3	8.8	7.9	8.5	9.4	8.6	8.5	10.9	10.8	*
Not certified	2.0	*	2.1	*	1.8	2.4	*2.5	1.8	2.2	*	*	–
Beds												
Fewer than 50 beds	3.6	*3.1	3.7	*3.4	3.3	4.0	3.6	3.6	3.8	*2.5	*	*
50–99 beds	25.4	25.3	25.5	23.0	25.0	26.4	26.8	24.9	26.5	19.1	17.2	*
100–199 beds	50.8	47.6	51.2	52.4	51.6	50.6	48.4	51.8	50.5	52.8	54.9	*49.5
200 beds or more	20.1	24.1	19.7	21.2	20.1	19.0	21.2	19.7	19.2	25.6	27.1	*
Geographic region												
Northeast	23.6	21.5	23.8	23.8	22.9	24.3	23.9	23.4	24.3	18.5	18.9	*
Midwest	30.6	28.3	30.8	30.2	29.6	31.9	29.7	31.0	32.5	19.7	21.2	*
South	32.6	32.4	32.7	32.5	34.6	31.4	31.4	33.1	30.4	46.6	53.4	*41.8
West	13.2	17.8	12.7	13.4	12.9	12.4	15.1	12.5	12.8	15.1	6.5	*
Location of agency												
Metropolitan statistical area	69.3	74.4	68.8	69.4	70.1	67.7	68.7	69.5	67.9	78.2	77.5	73.5
Nonmetropolitan statistical area	30.7	25.7	31.3	30.6	29.9	32.3	31.3	30.5	32.1	21.9	22.5	*
Affiliation ²												
Chain	60.1	61.8	59.9	62.1	61.6	58.2	60.7	59.9	59.8	63.1	64.7	*52.3
Independent	39.7	38.0	39.9	37.8	38.1	41.6	38.2	39.9	40.1	36.5	34.8	*47.7

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.²Excludes unknown.

NOTE: Percents are based on the unrounded numbers.

Table 9. Number of nursing home residents by selected facility characteristics and primary expected source of payment at admission and at time of survey: United States, 1999

Facility characteristic	Primary expected source of payment								
	All sources	At admission				At time of survey			
		Private sources ¹	Medicare	Medicaid	All other ²	Private sources ¹	Medicare	Medicaid	All other ²
All facilities	1,628,300	408,400	502,600	654,200	63,100	386,400	238,700	955,700	47,400
Ownership									
Proprietary	1,049,300	217,200	286,900	464,200	41,100	211,700	149,000	659,900	28,700
Voluntary nonprofit	445,600	157,800	144,800	128,800	14,300	150,200	73,500	212,300	*9,600
Government and other	133,300	33,400	30,900	61,300	*	24,600	16,100	83,500	*9,100
Certification									
Certified									
By Medicare and Medicaid	1,415,400	317,800	481,900	563,100	52,600	304,600	219,800	854,400	36,500
By Medicare only	37,100	24,600	10,200	*	*	26,500	*7,800	*	*
By Medicaid only	143,100	39,700	*	90,000	*	31,300	*8,000	99,500	*
Not certified	32,700	26,300	*	*	*	24,100	*	*	*
Beds									
Fewer than 50 beds	58,600	22,800	14,000	19,800	*	23,600	*9,300	24,900	*
50–99 beds	414,200	129,100	99,400	170,600	15,000	117,100	51,200	235,700	*10,200
100–199 beds	827,800	185,700	280,700	334,600	26,700	179,900	124,600	504,800	18,500
200 beds or more	327,700	70,800	108,400	129,100	19,300	65,800	53,600	190,300	18,000
Geographic region									
Northeast	383,400	69,900	157,000	136,500	20,000	68,900	63,000	239,000	*12,500
Midwest	498,200	177,800	130,400	170,700	19,400	163,900	66,400	254,800	13,100
South	531,500	106,400	161,300	250,400	13,400	102,100	79,400	337,400	*12,500
West	215,200	54,300	53,900	96,700	*10,300	51,500	29,900	124,400	*9,300
Location of agency									
Metropolitan statistical area	1,128,400	276,600	369,900	433,400	48,600	270,400	180,700	637,000	40,300
Nonmetropolitan statistical area	499,900	131,800	132,700	220,900	14,500	116,000	58,100	318,700	*7,200
Affiliation ³									
Chain	978,800	223,900	321,700	401,000	32,200	211,500	148,600	594,800	24,000
Independent	646,100	184,300	179,900	251,100	30,800	174,800	90,000	358,100	23,300

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pension, or other VA compensation, payment source not yet determined, and other and unknown sources.

³Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 10. Percent distribution of nursing home residents by selected facility characteristics, according to primary expected source of payment at admission and at time of survey: United States, 1999

Facility characteristic	Primary expected source of payment								
	All sources	At admission				At time of survey			
		Private sources ¹	Medicare	Medicaid	All other ²	Private sources ¹	Medicare	Medicaid	All other ²
All facilities	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ownership									
Proprietary	64.4	53.2	65.0	71.0	65.1	54.8	62.4	69.1	60.6
Voluntary nonprofit	27.4	38.6	28.8	19.7	22.6	38.9	30.8	22.2	20.3
Government and other	8.2	8.2	6.2	9.4	12.3	6.4	6.8	8.7	19.2
Certification									
Certified									
By Medicare and Medicaid	86.9	77.8	95.9	86.1	83.4	78.8	92.1	89.4	76.9
By Medicare only	2.3	6.0	2.0	*	*	6.9	*3.3	*	*
By Medicaid only	8.8	9.7	*	13.8	*	8.1	*3.4	10.4	*
Not certified	2.0	6.4	*	*	*	6.2	*	*	*
Beds									
Fewer than 50 beds	3.6	5.6	2.8	3.0	*	6.1	*3.9	2.6	*
50–99 beds	25.4	31.6	19.8	26.1	23.7	30.3	21.5	24.7	*21.4
100–199 beds	50.8	45.5	55.9	51.2	42.3	46.6	52.2	52.8	38.9
200 beds or more	20.1	17.3	21.6	19.7	30.6	17.0	22.4	19.9	38.0
Geographic region									
Northeast	23.6	17.1	31.2	20.9	31.7	17.8	26.4	25.0	*26.3
Midwest	30.6	43.5	26.0	26.1	30.7	42.4	27.8	26.7	27.7
South	32.6	26.1	32.1	38.3	21.2	26.4	33.3	35.3	*26.4
West	13.2	13.3	10.7	14.8	*16.4	13.3	12.5	13.0	*19.7
Location of agency									
Metropolitan statistical area	69.3	67.7	73.6	66.2	77.0	70.0	75.7	66.7	84.9
Nonmetropolitan statistical area	30.7	32.3	26.4	33.8	23.0	30.0	24.3	33.4	15.1
Affiliation ³									
Chain	60.1	54.8	64.0	61.3	51.1	54.7	62.2	62.2	50.5
Independent	39.7	45.1	35.8	38.4	48.9	45.2	37.7	37.5	49.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pension, or other VA compensation, payment source not yet determined, and other and unknown sources.

³Excludes unknown.

NOTE: Percents are based on the unrounded figures.

Table 11. Number and percent distribution of nursing home residents by length of time since admission and average length of time since admission, according to selected facility characteristics: United States, 1999

Facility characteristic	Number of residents	Length of time since admission in days ¹							Average length of time since admission in days
		Total	Less than 3 months	3 months to less than 6	6 months to less than 12	1 year to less than 3	3 years to less than 5	5 years or more	
All facilities	1,628,300	100.0	17.8	10.1	14.9	30.1	13.3	13.8	892.4
Ownership									
Proprietary	1,049,300	100.0	19.0	10.8	14.9	30.5	12.1	12.8	828.8
Voluntary nonprofit	445,600	100.0	17.2	8.7	15.1	28.9	15.4	14.7	972.5
Government and other	133,300	100.0	10.6	*8.8	15.1	31.3	16.4	17.8	1,125.7
Certification									
Certified									
By Medicare and Medicaid	1,415,400	100.0	18.3	10.3	15.0	30.5	12.8	13.1	858.2
By Medicare only	37,100	100.0	32.0	*	*14.9	*19.4	*	*	662.1
By Medicaid only	143,100	100.0	11.7	7.9	15.0	29.3	18.6	17.6	1,113.8
Not certified	32,700	100.0	*	*	*	30.6	*16.9	*27.8	1,664.6
Beds									
Fewer than 50 beds	58,600	100.0	22.1	*9.4	*13.2	29.7	*11.7	*13.8	828.3
50–99 beds	414,200	100.0	17.4	10.2	14.3	30.4	13.2	14.5	913.2
100–199 beds	827,800	100.0	18.2	10.3	15.4	31.0	12.7	12.4	828.9
200 beds or more	327,700	100.0	16.7	9.3	14.9	27.6	15.4	16.1	1,038.2
Geographic region									
Northeast	383,400	100.0	16.9	9.5	14.8	31.2	14.0	13.7	893.0
Midwest	498,200	100.0	17.4	9.5	14.9	30.0	13.4	14.8	943.5
South	531,500	100.0	17.1	10.3	15.2	30.0	13.4	14.0	904.4
West	215,200	100.0	22.2	11.7	14.8	28.7	11.9	10.8	743.4
Location of agency									
Metropolitan statistical area	1,128,400	100.0	18.9	10.4	15.2	29.6	13.2	12.7	848.0
Nonmetropolitan statistical area	499,900	100.0	15.5	9.2	14.3	31.3	13.6	16.1	992.7
Affiliation ¹									
Chain	978,800	100.0	18.7	10.6	14.5	30.8	12.9	12.5	844.9
Independent	646,100	100.0	16.6	9.2	15.6	29.0	14.1	15.6	964.6

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 12. Average daily charge and number of nursing home residents, by primary expected source of payment in month before interview and selected facility characteristics: United States, 1999

Facility characteristic	All sources		Private sources ¹		Medicare		Medicaid		All other sources ²	
	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents
All residents	\$115.91	1,628,300	\$115.00	386,400	\$ 166.37	238,700	\$106.39	955,700	\$ 110.98	47,400
Ownership										
Proprietary	107.17	1,049,300	115.68	211,700	128.22	149,000	100.37	659,900	114.12	28,700
Voluntary nonprofit	134.74	445,600	117.46	150,200	257.78	73,500	115.97	212,300	*124.35	*9,600
Government and other	121.14	133,300	95.45	24,600	143.01	16,100	127.82	83,500	*94.52	*9,100
Certification										
Certified										
By Medicare and Medicaid	120.79	1,415,400	121.40	304,600	172.06	219,800	109.77	854,400	126.55	36,500
By Medicare only	121.70	37,100	121.84	26,500	*128.25	*7,800	*	*	*	*
By Medicaid only	78.73	143,100	78.74	31,300	*82.74	*8,000	78.20	99,500	*	*
Not certified	70.42	32,700	77.64	24,100	*	*	*	*	*	*
Beds										
Fewer than 50 beds	104.76	58,600	100.71	23,600	113.05	9,300	107.39	24,900	*	*
50–99 beds	100.78	414,200	108.28	117,100	117.22	51,200	94.28	235,700	*98.14	*10,200
100–199 beds	119.78	827,800	119.19	179,900	200.06	124,600	104.78	504,800	112.85	18,500
200 beds or more	126.58	327,700	120.67	65,800	143.90	53,600	125.00	190,300	115.05	18,000
Geographic region										
Northeast	139.82	383,400	149.30	68,900	160.74	63,000	132.35	239,000	*149.76	*12,500
Midwest	117.90	498,200	103.53	163,900	247.14	66,400	99.64	254,800	116.85	13,100
South	95.35	531,500	101.73	102,100	113.30	79,400	90.81	337,400	78.45	*12,500
West	120.35	215,200	133.33	51,500	130.87	29,900	113.34	124,400	*112.74	*9,300
Location of agency										
Metropolitan statistical area	118.67	1,128,400	122.79	270,400	137.76	180,700	112.70	637,000	116.03	40,300
Nonmetropolitan statistical area	110.04	499,900	97.86	116,000	252.07	58,100	94.31	318,700	*74.11	*7,200
Affiliation ³										
Chain	115.35	978,800	115.68	211,500	187.23	148,600	101.43	594,800	99.96	24,000
Independent	116.78	646,100	114.23	174,800	133.08	90,000	114.46	358,100	123.26	23,300

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 13. Number, percent distribution, and rate per 10,000 nursing home residents by age at interview, according to sex, race, and region: United States, 1999

Age at interview	All residents	Sex		Race				Region			
		Male	Female	White	Black and other ¹	Black	Unknown	Northwest	Midwest	South	West
Number in thousands											
All ages	1,628,300	457,900	1,170,400	1,394,400	215,900	178,700	17,400	383,400	498,200	531,500	215,200
Under 65 years	158,700	80,000	78,700	115,400	39,300	32,800	*	34,200	45,000	51,300	28,200
65 years and over	1,469,500	377,800	1,091,700	1,279,600	176,700	145,900	13,300	349,200	453,200	480,100	187,000
65–74 years	194,800	84,100	110,700	157,300	35,800	30,300	*	46,400	58,900	63,400	26,100
75–84 years	517,600	149,500	368,100	440,600	71,100	58,700	*5,900	118,500	153,200	179,100	66,800
85 years and over	757,100	144,200	612,900	681,700	69,700	56,900	*	184,300	241,100	237,700	94,000
Percent distribution											
All ages	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Under 65 years	9.8	17.5	6.7	8.3	18.2	18.4	*	8.9	9.0	9.7	13.1
65 years and over	90.3	82.5	93.3	91.7	81.8	81.7	76.4	91.1	91.0	90.3	86.9
65–74 years	12.0	18.4	9.5	11.3	16.6	17.0	*	12.1	11.8	11.9	12.1
75–84 years	31.8	32.7	31.5	31.6	32.9	32.8	*33.9	30.9	30.8	33.7	31.1
85 years and over	46.5	31.5	52.4	48.9	32.3	31.8	*	48.1	48.4	44.7	43.7
Rate per 10,000 population ²											
All ages	59.1	34.0	83.1	61.7	43.6	49.6	...	73.4	78.4	54.4	34.6
Under 65 years	6.6	6.6	6.5	5.9	8.6	9.9	...	7.6	8.1	6.0	5.1
65 years and over	429.2	265.4	545.8	420.5	463.4	510.4	...	484.8	558.6	397.6	273.0
65–74 years	108.0	103.2	111.9	99.5	159.9	182.2	...	125.4	141.1	97.0	71.9
75–84 years	429.7	308.2	511.6	405.2	606.7	664.9	...	458.6	530.6	431.0	276.1
85 years and over	1,825.0	1,165.3	2,105.4	1,818.4	1,744.6	1,828.5	...	2,011.5	2,289.1	1,714.6	1,185.7

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as "other", and are reported in the "Black and other" race category.²Rates based on the civilian resident population, including institutionalized persons, as of July 1, 1999.

NOTES: Numbers may not add to totals because of rounding. Percents and rates are based on the unrounded numbers.

Table 14. Number of nursing home residents by marital status, residence, and living arrangements before admission, by age, sex, and race: United States, 1999

Resident characteristic	Age at interview						Sex		Race			
	All residents	Under 65 years	Total	65 years and over			Male	Female	White	Black and other ¹	Black	Unknown
				65-74 years	75-84 years	85 years and over						
All residents	1,628,300	158,700	1,469,500	194,800	517,600	757,100	457,900	1,170,400	1,394,900	215,900	178,700	17,400
Current marital status												
Married	287,000	27,400	259,600	51,900	125,600	82,000	156,400	130,500	252,600	30,800	22,000	*
Widowed	935,300	13,800	921,400	65,400	284,200	571,800	131,500	803,800	820,400	109,100	90,000	*
Divorced or separated	136,400	43,300	93,100	29,100	40,300	23,700	54,700	81,800	109,900	24,400	22,600	*
Single or never married	244,800	70,800	174,000	45,300	60,300	68,400	109,100	135,700	195,600	45,200	39,900	*
Unknown	24,800	*	21,400	*	*7,100	*11,300	*6,200	18,600	16,400	*6,400	*	*
Residence before admission												
Private or semiprivate residence	487,400	40,400	447,000	53,300	156,000	237,700	131,900	355,500	424,200	58,400	50,500	*
Retirement home	23,400	*	22,900	*	*	17,400	*	19,000	21,600	*	*	-
Board and care or residential care facility	86,500	*5,500	81,000	*7,900	21,200	51,900	18,100	68,500	80,700	*	*	*
Nursing home	184,700	20,900	163,800	24,600	60,700	78,400	56,200	128,500	159,100	24,800	19,800	*
Hospital	754,400	75,700	678,700	93,700	249,300	335,700	217,500	536,900	632,600	114,200	94,000	*7,600
Other and unknown ²	91,800	15,700	76,100	14,800	25,300	36,000	29,800	62,000	76,800	12,200	*10,400	*
Living arrangement before admission												
Alone	185,100	*7,700	177,400	15,100	49,700	112,600	34,500	150,600	170,700	13,400	*11,400	*
With family members	276,600	26,000	250,600	31,300	97,200	122,000	85,300	191,200	234,900	38,600	32,300	*
With nonfamily members	67,500	*7,000	60,500	*6,600	16,200	37,700	17,700	49,800	61,900	*	*	*
Other or unknown	1,099,100	118,000	981,100	141,800	354,600	484,700	320,400	778,700	927,400	159,200	131,200	12,600

- Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.²Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Numbers may not add to totals because of rounding.

Table 15. Percent distribution of nursing home residents by marital status, residence and living arrangements before admission, according to age, sex, and race: United States, 1999

Resident characteristic	Age at interview												
	All residents	Under 65 years	Total	65 years and over			Sex		Race				
				65-74 years	75-84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown	
All residents	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Current marital status													
Married	17.6	17.3	17.7	26.7	24.3	10.8	34.2	11.2	18.1	14.3	12.3	*	
Widowed	57.4	8.7	62.7	33.6	54.9	75.5	28.7	68.7	58.8	50.6	50.3	*	
Divorced or separated	8.4	27.3	6.3	14.9	7.8	3.1	11.9	7.0	7.9	11.3	12.6	*	
Single or never married	15.0	44.6	11.8	23.2	11.7	9.0	23.8	11.6	14.0	20.9	22.3	*	
Unknown	1.5	*	1.5	*	*1.4	*1.5	*1.4	1.6	1.2	*2.9	*	*	
Residence before admission													
Private or semiprivate residence	29.9	25.4	30.4	27.4	30.1	31.4	28.8	30.4	30.4	27.0	28.3	*	
Retirement home	1.4	*	1.6	*	*	2.3	*	1.6	1.5	*	*	-	
Board and care or residential care facility	5.3	*3.5	5.5	*4.1	4.1	6.9	3.9	5.9	5.8	*	*	*	
Nursing home	11.3	13.2	11.2	12.6	11.7	10.4	12.3	11.0	11.4	11.5	11.1	*	
Hospital	46.3	47.7	46.2	48.1	48.2	44.3	47.5	45.9	45.4	52.9	52.6	*43.4	
Other and unknown ²	5.6	9.9	5.2	7.6	4.9	4.8	6.5	5.3	5.5	5.7	*5.8	*	
Living arrangement before admission													
Alone	11.4	*4.8	12.1	7.8	9.6	14.9	7.5	12.9	12.2	6.2	*6.4	*	
With family members	17.0	16.4	17.1	16.1	18.8	16.1	18.6	16.3	16.8	17.9	18.1	*	
With nonfamily members	4.2	*4.4	4.1	*3.4	3.1	5.0	3.9	4.3	4.4	*	*	*	
Other or unknown	67.5	74.4	66.8	72.8	68.5	64.0	70.0	66.5	66.5	73.7	73.4	72.2	

- Quantity zero

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or because the sample size is greater than 59, but has a relative standard error over 30 percent.

¹ A small number of patients with more than one race indicated have been classified as "other", and are reported in the "Black and other" race category.² Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Percents are based on the unrounded numbers.

Table 16. Average daily charge and number of nursing home residents by primary expected source of payment in month before interview and selected resident characteristics: United States, 1999

Resident characteristic	All sources		Private sources ¹		Medicare		Medicaid		All other sources ²	
	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents	Average daily charge	Number of residents
All residents	\$115.91	1,628,300	\$ 115.00	386,400	\$ 166.37	238,700	\$ 106.39	955,700	\$ 110.98	47,400
Age at interview										
Under 65 years	123.17	158,700	142.47	16,400	*146.94	*11,300	119.04	120,300	*121.86	*10,800
65 years and over	115.14	1,469,500	113.84	370,100	167.23	227,400	104.64	835,400	107.09	36,700
65–74 years	112.35	194,800	113.42	25,300	143.43	33,500	106.06	129,100	*	*
75–84 years	111.79	517,600	112.54	118,900	135.09	82,100	106.61	301,600	*105.52	*15,000
85 years and over	118.05	757,100	114.55	225,800	196.73	111,800	102.76	404,600	*107.03	*14,800
Sex										
Male	113.26	457,900	112.78	101,400	142.92	68,300	107.58	264,900	107.74	23,300
Female	116.93	1,170,400	115.78	285,100	175.87	170,400	105.94	690,700	114.64	24,200
Race										
White only	115.49	1,394,900	114.57	369,100	170.79	204,800	104.72	783,900	104.22	37,100
Black and other ³	117.16	215,900	128.16	14,300	144.09	30,700	111.39	161,300	*143.82	*9,600
Black only	111.52	178,700	*115.00	*8,700	142.79	27,200	105.84	135,300	*	*
Unknown	134.35	17,400	*	*	*	*	*152.92	*10,500	*	*
Hispanic origin										
Hispanic	124.65	50,100	*	*	*136.42	*7,500	122.87	37,500	*	*
Non-Hispanic	116.32	1,496,400	114.82	366,700	171.22	214,300	106.34	872,600	111.21	42,800
Unknown	102.10	81,800	119.38	16,500	*114.81	*16,900	93.16	45,500	*	*
Current marital status										
Married	116.33	287,000	113.57	89,700	147.65	48,500	109.90	141,300	*107.92	*7,400
Widowed	116.51	935,300	113.61	241,700	186.00	140,700	103.59	533,100	106.72	19,700
Divorced or separated	107.36	136,400	104.62	14,500	113.12	17,300	107.86	96,200	*93.88	*8,500
Single or never married	117.21	244,800	130.91	38,300	137.47	26,600	110.58	169,400	*142.31	*10,500
Unknown	122.79	24,800	*	*	*	*	117.21	15,600	*	*
Residence before admission										
Private or semiprivate residence	104.74	487,400	104.88	127,000	125.30	59,500	101.67	290,300	*82.65	*10,700
Retirement home	111.64	23,400	110.72	12,900	*	*	*110.77	*7,700	*	*
Board and care or residential care facility	114.69	86,500	121.77	34,400	*128.32	*10,100	106.80	40,100	*	*
Nursing home	143.32	184,700	108.55	39,400	524.07	18,900	102.36	121,000	*	*
Hospital	117.24	754,400	123.82	157,900	135.03	138,900	110.31	434,700	123.70	22,900
Other and unknown ⁴	112.06	91,800	117.29	14,800	*131.60	*10,700	108.45	61,800	*	*
Living arrangement before admission										
Alone	102.15	185,100	105.46	64,100	112.36	21,200	97.93	97,000	*	*
With family members	106.71	276,600	109.97	69,400	129.92	34,600	101.75	166,600	*	*
With nonfamily members	109.99	67,500	111.66	20,300	*	*	103.97	39,800	*	*
Other or unknown	121.13	1,099,100	119.48	232,700	182.07	177,500	109.04	652,200	113.82	36,700

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), religious organizations, foundations, agencies, Veterans Administration contract, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

⁴Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Numbers may not add to totals because of rounding.

Table 17. Number and percent of nursing home residents by type of aids used and age at interview: United States, 1999

Aids used ¹	Age at interview											
	All residents		Under 65 years		65 years and over							
					Total		65–74 years		75–84 years		85 years and over	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	1,628,300	...	158,700	...	1,469,500	...	194,800	...	517,600	...	757,100	...
Eyeglasses	1,015,500	62.4	63,300	39.9	952,300	64.8	108,000	55.4	322,800	62.4	521,500	68.9
Hearing aid	162,300	10.0	*	*	159,400	9.8	*6,700	*3.5	35,700	2.2	116,900	7.2
Transfer equipment	238,400	14.6	31,500	19.8	206,900	14.1	28,400	14.6	73,000	14.1	105,400	13.9
Wheelchair	1,005,000	61.7	85,400	53.8	919,600	62.6	114,900	59.0	316,100	61.1	488,600	64.5
Cane	89,900	5.5	*7,800	*4.9	82,100	5.6	13,100	6.7	23,400	4.5	45,600	6.0
Walker	400,900	24.6	17,300	10.9	383,600	26.1	33,900	17.4	125,100	24.2	224,500	29.7
Brace (any type)	51,800	3.2	11,900	7.5	39,900	2.7	*11,100	*	14,200	2.7	14,600	1.9
Oxygen	104,100	6.4	*10,900	*6.9	93,300	6.3	15,900	8.2	33,300	6.4	44,000	5.8
Commode	107,200	6.6	*7,800	*4.9	99,400	6.8	11,200	*5.7	34,700	6.7	53,400	7.1
Other aids or devices	296,500	18.2	35,300	22.2	261,200	17.8	34,600	17.8	96,300	18.6	130,300	17.2
None	91,100	5.6	25,200	15.9	65,900	4.5	18,900	9.7	25,900	5.0	21,100	2.8

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers may add to more than totals because a resident may be included in more than one category.

Table 18. Number and percent of nursing home residents by type of aids used and sex and race of resident: United States, 1999

Aids used ¹	Sex																	
	All residents		Male				Female				White		Black and other ²		Black only		Unknown	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Total	1,628,300	...	457,900	...	1,170,400	...	1,394,900	...	215,900	...	178,700	...	17,400	100.0				
Eyeglasses	1,015,500	62.4	248,000	54.2	767,600	65.6	923,600	66.2	83,500	38.7	69,100	38.7	*8,500	*48.8				
Hearing aid	162,300	10.0	41,300	9.0	121,100	10.4	155,700	11.2	*	*	*	*	*	*				
Transfer equipment	238,400	14.6	68,200	14.9	170,200	14.5	205,300	14.7	31,000	14.4	26,700	15.0	*	*				
Wheelchair	1,005,000	61.7	272,200	59.5	732,800	62.6	865,400	62.0	129,300	59.9	106,200	59.5	*10,200	*58				
Cane	89,900	5.5	31,400	6.9	58,600	5.0	76,500	5.5	11,900	5.5	*9,200	*5.2	*	*				
Walker	400,900	24.6	94,200	20.6	306,700	26.2	367,500	26.4	29,400	13.6	23,500	13.2	*	*				
Brace (any type)	51,800	3.2	16,400	3.6	35,400	3.0	43,100	3.1	*7,700	*3.6	*7,100	*4.0	*	*				
Oxygen	104,100	6.4	32,300	7.1	71,800	6.1	91,100	6.5	12,100	5.6	*8,800	*4.9	*	*				
Commode	107,200	6.6	22,700	5.0	84,500	7.2	97,600	7.0	*9,100	*4.2	*7,000	*3.9	*	*				
Other aids or devices	296,500	18.2	88,200	19.3	208,300	17.8	248,400	17.8	43,500	20.1	37,400	21.0	*	*				
None	91,100	5.6	37,200	8.1	53,900	4.6	65,700	4.7	23,700	11.0	20,600	11.5	*	*				

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers may add to more than totals because a resident may be included in more than one category.

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

Table 19. Number of nursing home residents by functional status and age, sex, and race of resident: United States, 1999

Functional status	Age at interview						Sex		Race			
	All residents	Under 65 years	65 years and over									
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black only	Unknown
All residents	1,628,300	158,700	1,469,500	194,800	517,600	757,100	457,900	1,170,400	1,394,900	215,900	178,700	17,400
Vision ²												
Not impaired	1,059,300	118,400	940,900	143,300	351,500	446,200	315,500	743,900	913,700	135,400	110,400	*10,200
Impaired ³	441,300	22,400	418,900	38,200	123,500	257,200	108,400	332,900	377,500	59,400	49,400	*
Partially impaired	280,700	13,500	267,200	25,500	78,900	162,800	70,000	210,700	239,400	39,200	31,800	*
Severely impaired	101,400	*	97,400	*7,800	26,600	63,000	20,900	80,600	89,700	*10,900	*8,900	*
Completely lost	33,800	*	31,600	*8,600	19,200	19,200	*11,800	21,900	27,800	*5,700	*	*
Impairment level unknown	25,400	*	22,700	*9,400	12,100		*	19,700	20,500	*	*	*
Unknown or unable to determine	127,700	17,900	109,700	*13,400	42,600	53,700	34,000	93,700	103,800	*21,100	*18,900	*
Hearing ⁴												
Not impaired	1,145,700	135,000	1,010,700	161,600	388,400	460,600	329,800	815,900	970,100	162,900	134,200	12,600
Impaired ³	341,400	*6,000	335,400	18,000	79,100	238,300	89,500	251,800	308,600	30,400	24,000	*
Partially impaired	244,900	*	241,300	13,300	61,000	167,000	64,700	180,200	218,900	24,200	*	*
Severely impaired	74,900	*	73,000	*	12,600	57,300	19,300	55,600	69,900	*	*	*
Completely lost	*	—	*	*	*	*	*	*	*	*	*	—
Impairment level unknown	21,600	*	21,100	*	*	14,100	*	16,000	19,800	*	*	—
Unknown or unable to determine	141,200	17,800	123,400	*50,200	58,100	58,100	*38,500	102,700	116,200	22,600	20,500	*
Walking ⁵												
Received help	528,300	27,500	500,800	56,200	166,300	278,300	135,700	392,600	477,400	45,400	36,000	*
Received no help	366,600	52,700	313,900	54,400	126,400	133,100	127,100	239,400	312,300	50,200	42,500	*
Continence												
Difficulty controlling bowels ⁶	30,500	*	26,800	*6,300	*9,500	*10,900	*10,700	19,700	27,600	*	*	—
Difficulty controlling bladder ⁷	208,000	12,500	195,400	20,600	61,900	112,900	50,100	157,900	191,400	15,300	11,900	*
Difficulty controlling both bowels and bladder ^{6,7}	711,600	57,400	654,200	73,500	226,600	354,200	190,300	521,300	594,000	108,900	90,900	*8,600
Has ostomy, indwelling catheter, or similar device	147,600	28,500	119,100	18,700	44,100	56,300	51,500	96,200	120,600	25,000	22,300	*
Number of dependencies in activities of daily living ⁸												
Receives no help	81,400	21,200	60,200	13,100	24,200	22,900	37,400	44,100	66,600	13,400	*10,500	*
Receives help with 1 ADL	108,500	11,800	96,700	16,300	33,900	46,500	32,300	76,200	97,400	11,000	*9,400	*
Receives help with 2 ADLs	221,500	20,900	200,600	30,200	74,000	96,400	62,800	158,700	186,700	32,400	28,000	*
Receives help with 3 ADLs	515,000	58,600	456,500	60,500	157,000	239,000	137,800	377,200	422,500	86,700	72,500	*5,800
Receives help with 4 ADLs	521,200	36,700	484,500	55,700	170,100	258,700	141,300	379,800	457,200	58,900	47,400	*
Receives help with 5 ADLs	180,600	*9,500	171,100	19,100	58,400	93,600	46,200	134,400	164,500	13,500	*10,900	*
Receives help with ADLs ^{8,9}												
Bathing	1,527,300	135,300	1,392,000	178,800	485,900	727,300	415,700	1,111,700	1,311,600	200,000	166,300	15,800
Dressing	1,408,700	122,900	1,285,700	163,200	450,300	672,300	381,400	1,027,200	1,205,600	187,500	155,700	15,600
Eating	765,400	72,800	692,500	83,500	239,900	369,100	202,400	562,900	641,800	113,200	93,300	*10,300
Transfer	471,500	27,400	444,100	50,100	157,200	236,800	126,800	344,800	425,300	39,900	32,300	*6,300
Using toilet room	911,600	65,100	846,500	100,600	292,000	453,900	241,600	670,000	805,400	98,500	79,300	*7,600
Receives help with IADLs ^{8,9}												
Care of personal possessions	1,195,200	103,800	1,091,500	130,300	383,900	577,300	324,300	870,900	1,019,100	167,000	139,100	*9,000
Managing money	1,146,000	106,600	1,039,400	131,600	367,800	540,000	311,100	835,000	980,700	156,400	132,700	*8,900
Securing personal items such as newspaper, toilet articles, snack food	1,172,400	101,200	1,071,200	133,300	376,700	561,200	317,200	855,200	1,005,100	158,600	132,600	*8,800
Using the telephone	997,600	84,100	913,400	114,000	314,800	484,600	271,200	726,400	844,900	143,700	121,100	*8,900

— Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.²Includes status when using eyeglasses or contact lenses.³Includes residents for whom the severity of impairment is unknown.⁴Includes status when using a hearing aid if applicable.⁵Excludes unknown.⁶Excludes residents who had a colostomy.⁷Excludes residents who had an indwelling catheter or ostomy.⁸ADL is activities of daily living and IADL is instrumental activities of daily living.⁹Numbers do not add to totals because a resident may be included in more than one category.

Table 20. Percent distribution of nursing home residents and percent of activities of daily living and instrumental activities of daily living, by selected functional status, according to age, sex, and race of resident: United States, 1999

Functional status	Age at interview											
	All residents	Under 65 years	65 years and over				Sex		Race			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black only	Unknown
	Percent distribution											
All residents	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Vision ²												
Not impaired	65.1	74.6	64.0	73.6	67.9	58.9	68.9	63.6	65.5	62.7	61.8	*58.9
Impaired ³	27.1	14.1	28.5	19.6	23.9	34.0	23.7	28.4	27.1	27.5	27.7	*
Partially impaired	17.2	8.5	18.2	13.1	15.3	21.5	15.3	18.0	17.2	18.1	17.8	*
Severely impaired	6.2	*	6.6	*4.0	5.1	8.3	4.6	6.9	6.4	*5.1	*5.0	*
Completely lost	2.1	*	2.2	*	*1.7	2.5	*2.6	1.9	2.0	*2.7	*	*
Impairment level unknown	1.6	*	1.5	*	*1.8	1.6	*	1.7	*	1.6	1.9	7.8
Unknown or unable to determine	7.8	11.3	7.5	*6.9	8.2	7.1	7.4	8.0	7.4	*9.8	*10.6	*
Hearing ⁴												
Not impaired	70.4	85.0	68.8	83.0	75.0	60.8	72.0	69.7	69.6	75.5	75.1	72.7
Impaired ³	21.0	*3.8	22.8	9.3	15.3	31.5	19.6	21.5	22.1	14.1	13.4	*
Partially impaired	15.0	*	16.4	6.8	11.8	22.1	14.1	15.4	15.7	11.2	*	*
Severely impaired	4.6	*	5.0	*	2.4	7.6	4.2	4.8	5.0	*	*	*
Completely lost	*	*	*	*	*	*	*	*	*	*	*	—
Impairment level unknown	1.3	*	1.4	*	*	1.9	*	*	1.4	*	*	—
Unknown or unable to determine	8.7	11.2	8.4	*	9.7	7.7	8.4	*8.8	8.3	*	11.5	*
Walking ⁵												
Received help	32.5	17.4	34.1	28.8	32.1	36.8	29.6	33.6	34.2	21.0	20.2	*
Received no help	22.5	33.2	21.4	28.0	24.4	17.6	27.8	20.5	22.4	23.2	23.8	*
Continence ^{6,7}												
Difficulty controlling bowels ⁶	1.9	*	1.8	*3.3	*1.8	*1.4	*2.3	1.7	2.0	*	*	—
Difficulty controlling bladder ⁷	12.8	7.9	13.3	10.6	12.0	14.9	10.9	13.5	13.7	7.1	6.6	*
Difficulty controlling both bowels and bladder ^{6,7}	48.7	36.1	44.5	37.7	43.8	46.8	41.6	44.5	42.6	50.5	50.8	*49.6
Has ostomy, indwelling catheter or similar device	9.1	18.0	8.1	9.6	8.5	7.4	11.2	8.2	8.6	11.6	12.5	*
Number of dependencies in activities of daily living ⁸												
Receives no help	5.0	13.4	4.1	6.7	4.7	3.0	8.2	3.8	4.8	6.2	*5.9	*
Receives help with 1 ADL	6.7	7.5	6.6	8.4	6.6	6.1	7.1	6.5	7.0	5.1	*5.3	*
Receives help with 2 ADLs	13.6	13.2	13.7	15.5	14.3	12.7	13.7	13.6	13.4	15.0	15.7	*
Receives help with 3 ADLs	31.6	36.9	31.1	31.1	30.3	31.6	30.1	32.2	30.3	40.2	40.6	*33.1
Receives help with 4 ADLs	32.0	23.1	33.0	28.6	32.9	34.2	30.9	32.5	32.8	27.3	26.5	*
Receives help with 5 ADLs	11.1	*6.0	11.6	9.8	11.3	12.4	10.1	11.5	11.8	6.2	*6.1	*
Receives help with ADLs ^{8,9}	Percent											
Bathing	93.8	85.3	94.7	91.8	93.9	96.1	90.8	95.0	94.0	92.6	93.1	90.8
Dressing	86.5	77.4	87.5	83.8	87.0	88.8	83.3	87.8	86.4	86.8	87.1	89.5
Eating	47.0	45.9	47.1	42.9	46.3	48.8	44.2	48.1	46.0	52.4	52.2	*59.4
Transfer	29.0	17.3	30.2	25.7	30.4	31.3	27.7	29.5	30.5	18.5	18.1	*36.4
Using toilet room	56.0	41.0	57.6	51.7	56.4	60.0	52.8	57.3	57.7	45.6	44.4	*43.9
Receives help with IADLs ^{8,9}	Percent											
Care of personal possessions	73.4	65.4	74.3	66.9	74.2	76.3	70.8	74.4	73.1	77.4	77.8	*51.9
Managing money	70.4	67.2	70.7	67.6	71.1	71.3	67.9	71.3	70.3	72.5	74.2	*51.3
Securing personal items such as newspaper, toilet articles, snack food	72.0	63.8	72.9	68.4	72.8	74.1	69.3	73.1	72.1	73.4	74.2	*50.6
Using the telephone	61.3	53.0	62.2	58.5	60.8	64.0	59.2	62.1	60.6	66.6	67.7	*51.3

— Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.²Includes status when using eyeglasses or contact lenses.³Includes residents for whom the severity of impairment is unknown.⁴Includes status when using a hearing aid if applicable.⁵Excludes unknown.⁶Excludes residents who had a colostomy.⁷Excludes residents who had an indwelling catheter or ostomy.⁸ADL is activities of daily living and IADL is instrumental activities of daily living.⁹Numbers do not add to totals because a resident may be included in more than one category.

NOTE: Percents are based on the unrounded numbers.

Table 21. Number and percent of nursing home residents by services received during the last 30 days and age at interview: United States, 1999

Service received ¹	Age at interview											
	All residents		Under 65 years		65 years and over							
	Number	Percent	Number	Percent	Total		65–74 years		75–84 years		85 years and over	
					Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	1,628,300	...	158,700	...	1,469,500	...	194,800	...	517,600	...	757,100	...
Dental care	425,200	26.1	49,000	30.8	376,300	31.8	54,900	28.2	129,600	25.0	191,800	25.3
Equipment or devices	866,400	53.2	81,200	51.2	785,200	53.4	98,600	50.6	270,200	52.2	416,400	55.0
Hospice services	29,300	1.8	*	*	27,300	1.9	*	*	*9,900	*1.9	*13,600	*1.8
Medical services	1,473,900	90.5	146,500	92.3	1,327,400	90.3	177,800	91.3	467,800	90.4	681,800	90.1
Mental health services	372,600	22.9	57,200	36.0	315,400	21.5	58,500	30.0	124,000	24.0	132,900	17.6
Nursing services	1,567,300	96.3	154,100	97.1	1,413,200	96.2	188,600	96.8	496,900	96.0	727,600	96.1
Nutritional services	1,194,700	73.4	123,400	77.7	1,071,300	72.9	147,800	75.9	373,000	72.1	550,600	72.7
Occupational therapy	301,200	18.5	35,900	22.6	265,300	18.1	45,300	23.2	100,500	19.4	119,500	15.8
Personal Care	1,464,600	90.0	132,000	83.2	1,332,500	90.7	176,600	90.7	465,800	90.0	690,100	91.2
Physical therapy	433,600	26.6	46,500	29.3	387,100	26.3	59,700	30.7	144,000	27.8	183,300	24.2
Prescribed and nonprescribed medicines	1,532,400	94.1	148,900	93.8	1,383,500	94.2	184,600	94.8	485,800	93.8	713,200	94.2
Social services	1,163,800	71.5	124,100	78.2	1,039,600	70.8	143,500	73.7	374,400	72.3	521,700	68.9
Special education	16,900	1.0	*	*	12,200	0.8	*	*	*	*	*	*
Speech or hearing therapy	124,800	7.7	11,600	7.3	113,200	7.7	16,400	8.4	41,700	8.1	55,100	7.3
Transportation	379,100	23.3	48,200	30.3	331,000	22.5	54,400	27.9	118,300	22.8	158,300	20.9
Vocational rehabilitation	*9,000	*0.6	*	*	5,900	*0.4	*	*	*	*	*	*
Other	120,900	7.4	11,200	7.1	109,700	7.5	15,200	7.8	36,800	7.1	57,700	7.6
None	*15,300	*0.9	*	*	14,500	*1.0	*	*	*	*	*	*

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers do not add to totals because a resident may be included in more than one category.

Table 22. Number and percent of nursing home residents by services received during the last 30 days and sex and race of resident: United States, 1999

Services received ¹	Sex						Race							
	All residents		Male		Female		White		Black and other ²		Black only		Unknown	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	1,628,300	...	457,900	...	1,170,400	...	1,394,900	...	215,900	...	178,700	...	17,400	...
Dental care	425,200	26.1	121,500	26.5	303,800	26.0	352,200	25.3	68,300	31.7	58,300	32.6	*	*
Equipment or devices	866,400	53.2	240,100	52.4	626,300	53.5	742,600	53.2	114,100	52.8	92,400	51.7	*9,800	*56.4
Hospice services	29,300	1.8	*8,300	*1.8	21,100	1.8	26,400	1.9	*	*	*	*	*	*
Medical services	1,473,900	90.5	413,000	90.2	1,060,900	90.6	1,256,800	90.1	202,000	93.5	167,700	93.8	15,100	87.1
Mental health services	372,600	22.9	106,600	23.3	266,000	22.7	318,400	22.8	49,400	22.9	42,600	23.8	*	*
Nursing services	1,567,300	96.3	436,900	95.4	1,130,400	96.6	1,341,400	96.2	209,300	96.9	173,800	97.2	16,500	95.1
Nutritional services	1,194,700	73.4	333,900	72.9	860,900	73.6	1,008,500	72.3	172,100	79.7	143,700	80.4	14,200	81.6
Occupational therapy	301,200	18.5	92,400	20.2	208,800	17.8	255,400	18.3	42,900	19.9	34,700	19.4	*	*
Personal care	1,464,600	90.0	402,600	87.9	1,061,900	90.7	1,256,000	90.0	193,200	89.5	159,600	89.3	15,400	88.5
Physical therapy	433,600	26.6	125,800	27.5	307,800	26.3	375,100	26.9	53,800	24.9	42,800	24.0	*	*
Prescribed and nonprescribed medicines	1,532,400	94.1	427,600	93.4	1,104,700	94.4	1,312,000	94.1	204,400	94.7	170,300	95.3	16,000	92.2
Social services	1,163,800	71.5	335,100	73.2	828,700	70.8	982,900	70.5	168,600	78.1	138,100	77.3	12,300	70.8
Special education	16,900	1.0	*	*1.4	*10,600	*0.9	12,100	0.9	*	*	*	*	*	*
Speech or hearing therapy	124,800	7.7	44,500	9.7	80,300	6.9	105,100	7.5	17,900	8.3	14,100	7.9	*	*
Transportation	379,100	23.3	120,400	26.3	258,700	22.1	321,800	23.1	54,200	25.1	44,200	24.7	*	*
Vocational rehabilitation	*9,000	*0.6	*	*	*	*	*6,800	*0.5	*	*	*	*	*	*
Other	120,900	7.4	41,600	9.1	79,200	6.8	105,000	7.5	14,400	6.7	*11,700	*6.5	*	*
None	*15,300	*0.9	*	*	*10,400	*0.9	*13,400	*1.0	*	*	*	*	*	*

... Category not applicable.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers do not add to totals because a resident may be included in more than one category.

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

Table 23. Number of nursing home residents by selected resident characteristics and to primary expected source of payment at admission and at time of survey: United States, 1999

Resident characteristic	Primary expected source of payment								
	At admission					At time of survey			
	All sources	Private insurance ¹	Medicare	Medicaid	All other ²	Private insurance ¹	Medicare	Medicaid	All other ²
All residents	1,628,300	408,400	502,600	654,200	63,100	386,400	238,700	955,700	47,400
Age at interview									
Under 65 years	158,700	22,300	20,600	103,200	12,600	16,400	11,300	120,300	*10,800
65 years and over	1,469,500	386,100	482,000	551,000	50,400	370,100	227,400	835,400	36,700
65–74 years	194,800	29,700	64,000	92,700	*8,400	25,300	33,500	129,100	*6,900
75–84 years	517,600	121,200	176,900	199,000	20,600	118,900	82,100	301,600	15,000
85 years and over	757,100	235,100	241,200	259,400	21,400	225,800	111,800	404,600	14,800
Sex									
Male	457,900	109,600	135,800	186,900	25,600	101,400	68,300	264,900	23,300
Female	1,170,400	298,800	366,800	467,300	37,500	285,100	170,400	690,700	24,200
Race									
White only	1,394,900	389,200	436,700	517,500	51,500	369,100	204,800	783,900	37,100
Black and other ³	215,900	16,200	60,900	128,200	*10,700	14,300	30,700	161,300	*9,600
Black only	178,700	*9,300	53,200	108,200	*8,000	*8,700	27,200	135,300	*7,600
Unknown	17,400	*	*	*8,600	*	*	*	*10,500	*
Hispanic origin									
Hispanic	50,100	*	13,200	32,300	*	*	*7,500	37,500	*
Non-Hispanic	1,496,400	389,700	457,700	590,000	58,900	366,700	214,300	872,600	42,800
Unknown	81,800	15,600	31,600	31,900	*	16,500	16,900	45,500	*
Current marital status									
Married	287,000	96,600	93,100	88,500	*8,800	89,700	48,500	141,300	*7,400
Widowed	935,300	248,000	307,800	351,600	27,900	241,700	140,700	533,100	19,700
Divorced or separated	136,400	19,800	36,500	70,000	*10,100	14,500	17,300	96,200	*8,500
Single or never married	244,800	41,100	57,400	131,200	15,200	38,300	26,600	169,400	*10,500
Unknown	24,800	*	*7,800	13,000	*	*	*	15,600	*
Residence before admission									
Private or semiprivate residence	487,400	153,300	114,200	203,700	16,200	127,000	59,500	290,300	*10,700
Retirement home	23,400	12,000	*	*6,100	*	12,900	*	*7,700	*
Board and care or residential care facility	86,500	37,700	17,800	28,700	*	34,400	*10,100	40,100	*
Nursing home	184,700	44,400	34,100	97,100	*9,100	39,400	18,900	121,000	*
Hospital	754,400	143,400	311,900	272,000	27,100	157,900	138,900	434,700	22,900
Other or unknown ⁴	91,800	17,600	20,600	46,600	*7,100	14,800	*10,700	61,800	*
Living arrangement before admission									
Alone	185,100	67,900	45,100	66,900	*	64,100	21,200	97,000	*
With family members	276,600	86,200	63,400	117,900	*9,100	69,400	34,600	166,600	*
Only with nonfamily members	67,500	25,400	*10,800	29,500	*	20,300	*	39,800	*
Other or unknown	1,099,100	228,900	383,200	439,900	47,100	232,700	177,500	652,200	36,700

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

⁴Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

Table 24. Percent distribution of nursing home residents by selected demographic characteristics, according to primary expected source of payment at admission and at time of survey: United States, 1999

Resident characteristic	Primary expected source of payment								
	At admission					At time of survey			
	All sources	Private insurance ¹	Medicare	Medicaid	All other ²	Private insurance ¹	Medicare	Medicaid	All other ²
All residents	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Age at interview									
Under 65 years	9.8	5.5	4.1	15.8	20.0	4.2	4.7	12.6	*22.7
65 years and over	90.3	94.5	95.9	84.2	80.0	95.8	95.3	87.4	77.3
65–74 years	12.0	7.3	12.7	14.2	*13.4	6.6	14.0	13.5	*14.5
75–84 years	31.8	29.7	35.2	30.4	32.6	30.8	34.4	31.6	31.5
85 years and over	46.5	57.6	48.0	39.6	34.0	58.4	46.9	42.3	31.3
Sex									
Male	28.1	26.8	27.0	28.6	40.6	26.2	28.6	27.7	49.0
Female	71.9	73.2	73.0	71.4	59.4	73.8	71.4	72.3	51.0
Race									
White only	85.7	95.3	86.9	79.1	81.7	95.5	85.8	82.0	78.2
Black and other ³	13.3	4.0	12.1	19.6	*16.9	3.7	12.9	16.9	*20.2
Black only	11.0	*2.3	10.6	16.5	*12.7	*2.3	11.4	14.2	*16.1
Unknown	1.1	*	*	*1.3	*	*	*	*	*
Hispanic origin									
Hispanic	3.1	*	2.6	4.9	*	*	*3.1	3.9	*
Non-Hispanic	91.9	95.4	91.1	90.2	93.4	94.9	89.8	91.3	90.2
Unknown	5.0	3.8	6.3	4.9	*	4.3	7.1	4.8	*
Current marital status									
Married	17.6	23.7	18.5	13.5	*13.9	23.2	20.3	14.8	*15.7
Widowed	57.4	60.7	61.2	53.7	44.2	62.5	59.0	55.8	41.6
Divorced or separated	8.4	4.8	7.3	10.7	*16.1	3.8	7.3	10.1	*17.9
Single or never married	15.0	10.1	11.4	20.1	24.1	9.9	11.1	17.7	*22.1
Unknown	1.5	*	*1.6	2.0	*	*	*	1.6	*
Residence before admission									
Private or semiprivate residence	29.9	37.5	22.7	31.1	25.7	32.9	24.9	30.4	*22.5
Retirement home	1.4	2.9	*	*0.9	*	3.3	*	*0.8	*
Board and care or residential care facility	5.3	9.2	3.5	4.4	*	8.9	*4.2	4.2	*
Nursing home	11.3	10.9	6.8	14.9	*14.4	10.2	7.9	12.7	*
Hospital	46.3	35.1	62.1	41.6	42.9	40.9	58.2	45.5	48.3
Other or unknown ⁴	5.6	4.3	4.1	7.1	*11.2	3.8	*4.5	6.5	*
Living arrangement before admission									
Alone	11.4	16.6	9.0	10.2	*	16.6	8.9	10.2	*
With family members	17.0	21.1	12.6	18.0	*14.4	18.0	14.5	17.4	*
Only with nonfamily members	4.2	6.2	*2.2	4.5	*	5.3	*	4.2	*
Other or unknown	67.5	56.1	76.3	67.2	74.6	60.2	74.4	68.3	77.3

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

⁴Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Percents are based on the unrounded numbers.

Table 25. Number and percent distribution of nursing home residents by length of time since admission and average length of time since admission, according to selected characteristics: United States, 1999

Resident characteristic	All residents	Total	Length of time since admission (in days) ¹						Average length of time since admission (in days)
			Less than 3 months	3 months to less than 6 months	6 months to less than 12 months	1 year to less than 3 years	3 years to less than 5 years	5 years or more	
All residents	1,628,300	100.0	17.8	10.1	14.9	30.1	13.3	13.8	892.4
Age at interview									
Under 65 years	158,700	100.0	21.4	11.5	12.0	26.6	13.0	15.5	963.6
65 years and over	1,469,500	100.0	17.4	9.9	15.3	30.5	13.4	13.6	884.8
65–74 years	194,800	100.0	21.7	10.1	15.1	27.4	13.1	12.6	921.1
75–84 years	517,600	100.0	19.9	11.8	16.2	29.9	11.0	11.2	765.9
85 years and over	757,100	100.0	14.7	8.6	14.7	31.7	15.0	15.4	956.7
Sex									
Male	457,900	100.0	20.6	10.9	15.4	29.4	11.6	12.2	835.0
Female	1,170,400	100.0	16.8	9.7	14.8	30.4	14.0	14.4	914.9
Race									
White only	1,394,900	100.0	17.6	10.1	14.7	30.4	13.5	13.7	894.6
Black and other ²	215,900	100.0	19.4	9.6	15.7	28.9	12.0	14.5	882.3
Black only	178,700	100.0	19.7	8.8	15.4	28.7	11.8	15.6	911.5
Unknown	17,400	100.0	*	*	*	*	*	*	847.3
Hispanic origin									
Hispanic	50,100	100.0	*22.4	*13.9	*17.6	24.7	*	*	679.6
Non-Hispanic	1,496,400	100.0	17.3	9.9	14.9	30.3	13.6	14.1	906.6
Unknown	81,800	100.0	24.6	*11.2	*13.7	30.5	*9.7	*10.3	763.3
Current marital status									
Married	287,000	100.0	22.3	11.3	16.9	30.2	10.8	8.5	657.3
Widowed	935,300	100.0	17.1	9.8	14.7	30.9	13.9	13.6	872.4
Divorced or separated	136,400	100.0	18.2	9.4	15.2	29.3	13.8	14.2	908.8
Single or never married	244,800	100.0	14.9	9.5	13.6	27.7	13.8	20.5	1,240.4
Unknown	24,800	100.0	*	*	*	*29.4	*	*	845.0
Residence before admission									
Private or semiprivate residence	487,400	100.0	14.0	9.7	12.5	31.4	14.9	17.5	1,062.9
Retirement home	23,400	100.0	*	*	*	*29.3	*	*	857.1
Board and care or residential care facility	86,500	100.0	15.4	*9.9	19.0	31.6	*12.5	*11.7	829.8
Nursing home	184,700	100.0	15.1	10.6	15.7	32.2	13.4	13.1	864.2
Hospital	754,400	100.0	22.3	10.4	16.0	28.7	11.9	10.6	743.1
Other or unknown ³	91,800	100.0	*10.2	*8.2	13.0	29.4	16.3	22.9	1,339.7
Living arrangement before admission									
Alone	185,100	100.0	13.9	10.2	12.7	31.3	14.3	17.7	1,052.4
With family members	276,600	100.0	14.2	9.8	13.4	31.5	14.8	16.3	1,027.0
Only with nonfamily members	67,500	100.0	*13.7	*9.1	*14.6	33.9	*14.6	*14.1	921.1
Unknown	1,099,100	100.0	19.7	10.1	15.7	29.3	12.7	12.4	829.9

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¹Excludes unknown.

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

³Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 26. Number and percent distribution of nursing home residents by primary diagnosis at admission and at time of survey: United States, 1999

Primary diagnosis and ICD-9-CM code ¹	At admission		At time of survey	
	Number of residents	Percent distribution	Number of residents	Percent distribution
Total	1,628,300	100.0	1,628,300	100.0
Infectious and parasitic diseases 001-139	15,300	0.9	14,000	0.9
Neoplasms 140-239	33,400	2.1	36,600	2.3
Malignant neoplasms 140-208,230-234	30,000	1.8	33,300	2.0
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	112,300	6.9	118,600	7.3
Diabetes mellitus 250	74,000	4.5	81,700	5.0
Diseases of the blood and blood-forming organs 280-289	20,500	1.3	20,400	1.3
Anemias 280-285	18,000	1.1	17,900	1.1
Mental disorders 290-319	270,100	16.6	296,000	18.2
Senile dementia or organic brain syndrome 290, 310	55,800	3.4	57,200	3.5
Mental retardation 317-319	12,300	0.8	12,800	0.8
Other mental disorders 291-309, 311-316	202,000	12.4	226,000	13.9
Diseases of the nervous system and sense organs 320-389	236,300	14.5	258,200	15.9
Alzheimer's disease 331.0	137,100	8.4	149,800	9.2
Parkinson's disease 332	33,900	2.1	36,100	2.2
Multiple sclerosis 340	18,900	1.2	18,800	1.2
Paralytic syndromes 342-344	17,200	1.1	20,000	1.2
Other diseases of the nervous system and sense organs 320-330, 331.3-331.9,333-337,341,345-389	29,200	1.8	33,400	2.1
Diseases of the circulatory system 390-459	374,100	23.0	404,800	24.9
Essential hypertension 401	57,900	3.6	66,400	4.1
Heart disease 391-392,0,393-398,402,404,410-416,420-429	144,200	8.9	165,100	10.1
Diseases of the respiratory system 460-519	105,400	6.5	85,900	5.3
Pneumonia, all forms 480-486	45,600	2.8	22,500	1.4
Other diseases of the respiratory system 490-496	59,800	3.7	63,400	3.9
Diseases of the digestive system 520-579	45,200	2.8	41,900	2.6
Diseases of the genitourinary system 580-629	40,100	2.5	33,300	2.0
Urinary tract infection 580-583,590,595,597,599.0	24,400	1.5	15,800	1.0
Diseases of the skin and subcutaneous tissue 680-709	20,400	1.3	16,200	1.0
Decubitus ulcer 707.0	*	*	*	*
Other chronic ulcer of the skin 707.1-707.9	*	*	*	*
Diseases of the musculoskeletal system and connective tissue 710-739	71,900	4.4	75,200	4.6
Rheumatoid arthritis, except spine 714	*	*	*	*
Osteoarthritis and allied disorders, except spine 715	22,500	1.4	24,900	1.5
Other arthropathies and related disorders 710-714, 716-719	13,900	0.9	14,200	0.9
Osteoporosis 733.0	*9,300	*0.6	*10,400	*0.6
Congenital anomalies 740-759	*	*	*	*
Symptoms, signs, and ill-defined conditions 780-799	78,400	4.8	78,200	4.8
Senility without mention of psychosis 797	*	*	*	*
Injury and poisoning 800-999	118,900	7.3	74,400	4.6
Fracture of neck of femur 820	64,100	3.9	39,000	2.4
Other fractures 800-819,821-829	43,500	2.7	29,100	1.8
Supplementary classification V01-V82	77,800	4.8	68,800	4.2
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	42,100	2.6	33,800	2.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 27. Number and percent distribution of all-listed diagnoses for nursing home residents at admission and at time of survey: United States, 1999

Primary diagnosis and ICD-9-CM code ¹	At admission		At time of survey	
	Number of diagnoses	Percent distribution	Number of diagnoses	Percent distribution
Total	6,713,600	100.0	6,995,500	100.0
Infectious and parasitic diseases 001-139	53,600	0.8	48,400	0.7
Neoplasms 140-239	108,200	1.6	113,400	1.6
Malignant neoplasms 140-208,230-234	95,300	1.4	101,900	1.5
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	580,000	8.6	587,700	8.4
Diabetes mellitus 250	269,000	4.0	279,300	4.0
Diseases of the blood and blood-forming organs 280-289	170,400	2.5	185,700	2.7
Anemias 280-285	158,900	2.4	174,600	2.5
Mental disorders 290-319	1,053,500	15.7	1,175,800	16.8
Senile dementia or organic brain syndrome 290, 310	143,900	2.1	146,900	2.1
Mental retardation 317-319	29,400	0.4	29,600	0.4
Other mental disorders 291-309,311-316	880,200	13.1	999,300	14.3
Diseases of the nervous system and sense organs 320-389	606,800	9.0	673,900	9.6
Alzheimer's disease 331.0	214,200	3.2	231,900	3.3
Parkinson's disease 332	83,600	1.2	90,900	1.3
Multiple sclerosis 340	22,700	0.3	22,700	0.3
Paralytic syndromes 342-344	42,500	0.6	45,100	0.6
Other diseases of the nervous system and sense organs 320-330,331.3-331.9,333-337,341,345-389	243,900	3.6	283,300	4.1
Diseases of the circulatory system 390-459	1,717,800	25.6	1,795,800	25.7
Essential hypertension 401	470,700	7.0	481,800	6.9
Heart disease 391-392,0,393-398,402,404,410-416,420-429	742,900	11.1	798,900	11.4
Diseases of the respiratory system 460-519	325,000	4.8	310,200	4.4
Pneumonia, all forms 480-486	79,200	1.2	46,000	0.7
Other diseases of the respiratory system 490-496	245,800	3.7	264,100	3.8
Diseases of the digestive system 520-579	316,200	4.7	342,000	4.9
Diseases of the genitourinary system 580-629	221,300	3.3	206,000	2.9
Urinary tract infection 580-583,590,595,597,599.0	100,900	1.5	78,900	1.1
Diseases of the skin and subcutaneous tissue 680-709	76,300	1.1	75,900	1.1
Decubitus ulcer 707.0	23,200	0.3	21,200	0.3
Other chronic ulcer of the skin 707.1-707.9	10,200	0.2	9,700	0.1
Diseases of the musculoskeletal system and connective tissue 710-739	487,900	7.3	540,700	7.7
Rheumatoid arthritis, except spine 714	16,300	0.2	16,800	0.2
Osteoarthritis and allied disorders, except spine 715	167,900	2.5	186,700	2.7
Other arthropathies and related disorders 710-714,716-719	107,600	1.6	120,500	1.7
Osteoporosis 733.0	99,700	1.5	120,300	1.7
Congenital anomalies 740-759	*	*	*	*
Symptoms, signs, and ill-defined conditions 780-799	413,900	6.2	433,700	6.2
Senility without mention of psychosis 797	*	*	*	*
Injury and poisoning 800-999	202,600	3.0	147,500	2.1
Fracture of neck of femur 820	89,000	1.3	59,800	0.9
Other fractures 800-819,821-829	82,800	1.2	62,400	0.9
Supplementary classification V01-V82	370,500	5.5	349,300	5.0
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	167,600	2.5	149,600	2.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 28. Number of nursing home residents by primary diagnosis at admission and age, sex, and race of resident: United States, 1999

Diagnosis and ICD-9-CM code ¹	Age at interview											
	All residents	Under 65 years	65 years and over			Sex		Race				
			Total	65-74 years	75-84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown
Total	1,628,300	158,700	1,469,500	194,800	517,600	757,100	457,900	1,170,400	1,394,900	215,900	178,700	17,400
Infectious and parasitic diseases 001-139	15,300	*	*11,500	*	*	*	*5,900	*9,300	*10,800	*	*	*
Neoplasms 140-239	33,400	*	29,600	*6,300	*9,100	14,200	14,400	19,000	27,600	*	*	*
Malignant neoplasms 140-208,230-234	30,000	*	26,800	*	*8,600	12,500	14,000	16,000	24,900	*	*	*
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	112,300	*8,600	103,700	15,700	39,600	48,400	30,500	81,800	90,500	19,900	16,600	*
Diabetes mellitus 250	74,000	*6,300	67,700	*11,600	27,500	28,600	23,500	50,600	57,900	15,000	12,800	*
Diseases of the blood and blood-forming organs 280-289	20,500	*	19,000	*	*	13,800	*	16,400	17,700	*	*	*
Anemias 280-285	18,000	*	16,700	*	*	*12,100	*	14,500	16,000	*	*	-
Mental disorders 290-319	270,100	33,800	236,300	33,100	88,100	115,100	79,700	190,400	228,900	39,500	35,000	*
Senile dementia or organic brain syndrome 290, 310	55,800	*	53,100	*	18,700	30,800	13,500	42,200	48,900	*6,800	*6,600	-
Mental retardation 317-319	12,300	*	*7,400	*	*	*	*5,900	*6,400	*10,400	*	*	*
Other mental disorders 291-309, 311-316	202,000	26,200	175,800	25,300	66,600	83,900	60,300	141,700	169,500	31,100	27,100	*
Diseases of the nervous system and sense organs 320-389	236,300	36,400	199,900	29,500	84,900	85,600	68,300	168,000	208,100	26,300	20,800	*
Alzheimer's disease 331.0	137,100	*	133,400	14,700	57,200	61,500	29,200	108,000	119,700	16,500	13,700	*
Parkinson's disease 332	33,900	*	32,300	*	15,300	*11,700	14,200	19,700	30,800	*	*	*
Multiple sclerosis 340	18,900	13,700	*	*	*	*	*	13,500	16,800	*	*	*
Paralytic syndromes 342-344	17,200	*9,100	*8,200	*	*	*	*9,000	*8,300	15,700	*	*	*
Other diseases of the nervous system and sense organs 320-330,331.3-331.9,333-337,341,345-389	29,200	*8,200	20,900	*	*7,100	*10,400	*10,600	18,500	25,100	*	*	-
Diseases of the circulatory system 390-459	374,100	22,900	351,200	44,300	113,700	193,200	107,300	266,800	318,700	51,400	43,100	*
Essential hypertension 401	57,900	*	54,900	*	16,500	34,800	11,700	46,200	47,600	*10,000	*8,500	*
Heart disease 391-392.0,393-398,402,404,410-416,420-429	144,200	*	139,600	11,600	36,300	91,800	37,800	106,400	129,300	13,000	*11,000	*
Diseases of the respiratory system 460-519	105,400	*8,400	96,900	14,700	34,200	48,100	34,100	71,200	91,800	13,100	*10,000	*
Pneumonia, all forms 480-486	45,600	*	42,300	*	12,900	25,100	12,800	32,700	40,400	*	*	*
Other diseases of the respiratory system 490-496	59,800	*	54,600	*10,300	21,300	23,000	21,300	38,500	51,400	*8,200	*6,200	*
Diseases of the digestive system 520-579	45,200	*	42,000	*	14,700	21,500	12,600	32,600	38,700	*5,800	*	*
Diseases of the genitourinary system 580-629	40,100	*	36,400	*	13,900	18,100	16,500	23,500	31,800	*7,500	*	*
Urinary tract infection 580-583,590, 595,597,599.0	24,400	*	22,200	*	*8,500	*11,800	*9,000	15,400	19,300	*	*	*
Diseases of the skin and subcutaneous tissue 680-709	20,400	*	17,900	*	*7,500	*7,900	*7,500	12,900	16,400	*	*	*
Decubitus ulcer 707.0	*	*	*	*	*	*	*	*	*	*	*	-
Other chronic ulcer of the skin 707.1-707.9	*	-	*	*	*	*	*	*	*	*	*	*
Diseases of the musculoskeletal system and connective tissue 710-739	71,900	*	68,900	*	18,700	45,900	*9,800	4,400	64,800	*6,600	*	*
Rheumatoid arthritis, except spine 714	*	*	*	*	*	*	*	*	*	*	*	-
Osteoarthritis and allied disorders, except spine 715	22,500	*	22,000	*	*	16,000	*	20,600	19,700	*	*	*
Other arthropathies and related disorders 710-714, 716-719	13,900	*	13,300	*	*	*8,600	*	11,600	12,100	*	*	*
Osteoporosis 733.0	*9,300	-	*9,300	-	*	*7,300	-	*9,300	*9,100	*	-	-
Congenital anomalies 740-759	*	*	*	-	*	*	*	*	*	*	*	-
Symptoms, signs, and ill-defined conditions 780-799	78,400	*8,400	70,000	*12,000	26,800	31,200	20,400	58,000	67,700	*10,100	*8,700	*
Senility without mention of psychosis 797	*	-	*	-	*	*	*	*	*	-	-	-
Injury and poisoning 800-999	118,900	*6,800	112,100	*9,600	32,700	69,800	23,000	95,900	108,100	*9,000	*6,700	*
Fracture of neck of femur 820	64,100	*	62,800	*	17,300	42,100	*11,400	52,800	58,500	*	*	*
Other fractures 800-819,821-829	43,500	*	40,500	*	12,800	23,800	*7,000	36,400	40,200	*	*	*
Supplementary classification V01-V82	77,800	*10,500	67,300	*9,800	24,300	33,200	21,900	55,900	65,800	*11,100	*9,700	*
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	42,100	*5,300	36,700	*5,900	13,200	17,600	12,600	29,400	38,300	*	*	*
Unknown or no diagnosis	*	*	*	*	*	*	*	*	*	*	*	*

-Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Numbers may not add to totals because of rounding.

Table 29. Percent distribution of nursing home residents by primary diagnosis at admission, according to age, sex, and race of resident: United States, 1999

Diagnosis and ICD-9-CM code ¹	Age at interview												
	All residents	Under 65 years	65 years and over			Sex		Race					
			Total	65-74 years	75-84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001-139	0.9	*	*0.8	*	*	*	*1.3	*0.8	*0.8	*	*	*	*
Neoplasms 140-239	2.1	*	2.0	*3.3	*1.8	1.9	3.2	1.6	2.0	*	*	*	*
Malignant neoplasms 140-208,230-234	1.8	*	1.8	*	*1.7	1.7	3.1	1.4	1.8	*	*	*	*
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	6.9	*5.4	7.1	8.1	7.6	6.4	6.7	7.0	6.5	9.2	9.3	*	*
Diabetes mellitus 250	4.5	*4.0	4.6	*6.0	5.3	3.8	5.1	4.3	4.2	7.0	7.2	*	*
Diseases of the blood and blood-forming organs 280-289	1.3	*	1.3	*	*	1.8	*	1.4	1.3	*	*	*	*
Anemias 280-285	1.1	*	1.1	*	*	*1.6	*	1.2	1.2	*	*	-	-
Mental disorders 290-319	16.6	21.3	16.1	17.0	17.0	15.2	17.4	16.3	16.4	18.3	19.6	*	*
Senile dementia or organic brain syndrome 290,310	3.4	*	3.6	*	3.6	4.1	3.0	3.6	3.5	*3.2	*3.7	-	-
Mental retardation 317-319	0.8	*	*0.5	*	*	*	*1.3	*0.6	0.8	*	*	*	*
Other mental disorders 291-309,311-316	12.4	16.5	12.0	13.0	12.9	11.1	13.2	12.1	12.2	14.4	15.2	*	*
Diseases of the nervous system and sense organs 320-389	14.5	22.9	13.6	15.1	16.4	11.3	14.9	14.4	14.9	12.2	11.6	*	*
Alzheimer's disease 331.0	8.4	*	9.1	7.5	11.1	8.1	6.4	9.2	8.6	7.6	7.7	*	*
Parkinson's disease 332	2.1	*	2.2	*	3.0	1.5	3.1	1.7	2.2	*	*	*	*
Multiple sclerosis 340	1.2	8.7	*	*	*	*	*	*1.2	1.2	*	*	*	*
Paralytic syndromes 342-344	1.1	*5.7	*0.6	*	*	*	*2.0	*0.7	1.1	*	*	*	*
Other diseases of the nervous system and sense organs 320-330,331.3-331.9,333-337,341,345-389	1.8	*5.2	1.4	*	*1.4	*1.4	*2.3	1.6	1.8	*	*	-	-
Diseases of the circulatory system 390-459	23.0	14.4	23.9	22.7	22.0	25.5	23.4	22.8	22.9	23.8	24.1	*	*
Essential hypertension 401	3.6	*	3.7	*	3.2	4.6	2.6	4.0	3.4	*4.6	*4.8	*	*
Heart disease 391-392,0,393-398,402,404,410-416,420-429	8.9	*	9.5	5.9	7.0	12.1	8.3	9.1	9.3	6.0	*6.1	*	*
Diseases of the respiratory system 460-519	6.5	*5.3	6.6	7.5	6.6	6.4	7.5	6.1	6.6	6.1	*5.6	*	*
Pneumonia, all forms 480-486	2.8	*	2.9	*	2.5	3.3	2.8	2.8	2.9	*	*	*	*
Other diseases of the respiratory system 490-496	3.7	*	3.7	*5.3	4.1	3.0	4.7	3.3	3.7	*3.8	*3.5	*	*
Diseases of the digestive system 520-579	2.8	*	2.9	*	2.9	2.9	2.8	2.8	2.8	*2.7	*	*	*
Diseases of the genitourinary system 580-629	2.5	*	2.5	*	2.7	2.4	3.6	2.0	2.3	*	*	*	*
Urinary tract infection 580-583,590,595,597,599.0	1.5	*	1.5	*	*1.6	*1.6	*2.0	1.3	1.4	*2.1	*	*	*
Diseases of the skin and subcutaneous tissue 680-709	1.3	*	1.2	*	*1.5	*1.1	*1.6	1.1	1.2	*	*	*	*
Decubitus ulcer 707.0	*0.4	*	0.4	*	*	*	*	*	*	*	*	-	-
Other chronic ulcer of the skin 707.1-707.9	*	-	0.2	*	*	*	*	*	*	*	*	*	*
Diseases of the musculoskeletal system and connective tissue 710-739	4.4	*	4.7	*	3.6	6.1	*2.1	5.3	4.7	*	*	*	*
Rheumatoid arthritis, except spine 714	*	*	*	*	*	*	*	*	*	*	*	-	-
Osteoarthritis and allied disorders, except spine 715	1.4	*	1.5	*	*	2.1	*	1.8	1.4	*	*	*	*
Other arthropathies and related disorders 710-714,716-719	0.9	*	0.9	*	*	*1.1	*	1.0	0.9	*0.7	*	*	*
Osteoporosis 733.0	*0.6	-	*0.6	-	*	*1.0	-	*0.8	*0.7	*	-	-	-
Congenital anomalies 740-759	*	*	*	-	-	*	*	*	*	*	*	-	-
Symptoms, signs, and ill-defined conditions 780-799	4.8	*5.3	4.8	*6.1	*5.2	4.1	4.5	5.0	4.9	*4.7	*4.9	*	*
Senility without mention of psychosis 797	*	-	*	-	*	*	*	*	*	-	-	-	-
Injury and poisoning 800-999	7.3	*4.3	7.6	*5.0	6.3	9.2	5.0	8.2	7.8	*4.2	*3.7	*	*
Fracture of neck of femur 820	3.9	*	4.3	*	3.4	5.6	*2.5	4.5	4.2	*	*	*	*
Other fractures 800-819,821-829	2.7	*	2.8	*	2.5	3.2	*1.5	3.1	2.9	*	*	*	*
Supplementary classification V01-V82	4.8	*6.6	4.6	*5.0	4.7	4.4	4.8	4.8	4.7	*5.1	*5.4	*	*
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	2.6	*3.4	2.5	*3.0	2.6	2.3	2.8	2.5	2.8	*	*	*	*
Unknown or no diagnosis	*	*	*	*	*	*	*	*	*	*	*	*	*

- Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification (4)*.

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Percents are based on the unrounded numbers.

Table 30. Number of all-listed diagnoses for nursing home residents at admission by age, sex, and race: United States, 1999

Diagnosis and ICD-9-CM code ¹	Age at interview											
	All residents	Under 65 years	65 years and over			Sex		Race				
			Total	65-74 years	75-84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown
Total	6,713,600	614,200	6,099,400	798,400	2,165,900	3,135,100	1,891,600	4,822,000	5,769,400	873,800	718,700	70,400
Infectious and parasitic diseases 001-139	53,600	14,000	39,600	*6,000	12,600	20,900	22,100	31,400	39,500	12,200	*9,800	*
Neoplasms 140-239	108,200	*10,500	97,700	15,100	36,400	46,200	44,500	63,700	91,700	15,400	13,500	*
Malignant neoplasms 140-208,230-234	95,300	*8,700	86,600	13,600	31,400	41,600	41,300	54,000	80,900	13,600	12,000	*
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	580,000	49,100	531,000	85,800	210,600	234,600	152,600	427,500	487,400	85,500	71,000	*7,100
Diabetes mellitus 250	269,000	23,400	245,500	50,700	104,300	90,500	82,800	186,200	214,600	50,600	42,300	*
Diseases of the blood and blood-forming organs 280-289	170,400	11,400	159,000	16,100	50,700	92,100	46,000	124,400	140,700	28,600	24,300	*
Anemias 280-285	158,900	*9,500	149,300	15,500	46,900	86,900	42,600	116,200	131,300	26,800	22,700	*
Mental disorders 290-319	1,053,500	116,800	936,700	128,400	351,000	457,200	303,400	750,000	913,200	131,000	109,700	*9,300
Senile dementia or organic brain syndrome 290,310	143,900	*7,000	136,900	12,200	45,600	79,100	34,900	109,000	125,400	17,800	14,800	*
Mental retardation 317-319	29,400	12,600	16,800	*	*	*	13,100	16,300	25,000	*	*	*
Other mental disorders 291-309,311-316	880,200	97,200	783,000	107,800	299,500	375,600	255,500	624,700	762,800	109,400	91,600	*8,000
Diseases of the nervous system and sense organs 320-389	606,800	77,800	529,000	71,500	202,400	255,100	173,600	433,200	527,800	71,600	57,100	*7,500
Alzheimer's disease 331.0	214,200	*	208,200	21,600	89,000	97,500	45,800	168,400	187,400	24,400	19,800	*
Parkinson's disease 332	83,600	*	80,600	12,500	38,200	30,000	34,400	49,200	73,600	*9,400	*	*
Multiple sclerosis 340	22,700	15,600	*7,100	*	*	*	*6,800	15,900	19,800	*	*	*
Paralytic syndromes 342-344	42,500	23,200	19,300	*8,800	*6,300	*	20,300	22,200	35,300	*6,500	*5,800	*
Other diseases of the nervous system and sense organs 320-330,331.3-331.9,333-337.341,345-389	243,900	30,100	213,800	25,400	65,200	123,200	66,300	177,600	211,700	28,700	23,600	*
Diseases of the circulatory system 390-459	1,717,800	96,000	1,621,800	202,500	553,900	865,400	472,800	1,245,000	1,467,400	235,300	200,400	15,100
Essential hypertension 401	470,700	32,300	438,500	57,300	160,400	220,800	114,700	356,100	383,500	81,300	70,000	*
Heart disease 391-392.0,393-398,402,404,410-416,420-429	742,900	26,700	716,200	71,000	224,100	421,100	199,400	543,600	668,400	69,800	59,200	*
Diseases of the respiratory system 460-519	325,000	27,300	297,700	50,100	109,200	138,400	115,600	209,400	285,200	38,200	29,800	*
Pneumonia, all forms 480-486	79,200	*6,100	73,100	*8,300	21,300	43,500	24,000	55,200	68,000	*10,700	*7,600	*
Other diseases of the respiratory system 490-496	245,800	21,100	224,600	41,900	88,000	94,800	91,600	154,200	217,200	27,500	22,100	*
Diseases of the digestive system 520-579	316,200	26,500	289,800	36,100	95,300	158,300	89,200	227,000	274,700	37,600	29,000	*
Diseases of the genitourinary system 580-629	221,300	24,700	196,600	22,600	72,900	101,000	83,800	137,500	184,800	34,200	28,500	*
Urinary tract infection 580-583,590,595,597,599.0	100,900	*9,900	91,000	*8,400	32,400	50,200	25,300	75,500	84,700	15,000	12,300	*
Diseases of the skin and subcutaneous tissue 680-709	76,300	12,400	63,900	*10,600	23,100	30,300	25,600	50,700	63,300	11,000	9,600	*
Decubitus ulcer 707.0	23,200	*	19,600	*	*7,500	*9,600	*8,000	15,200	16,500	*6,400	*6,200	*
Other chronic ulcer of the skin 707.1-707.9	*10,200	*	*8,400	*	*	*	*	*6,500	*8,000	*	*	*
Diseases of the musculoskeletal system and connective tissue 710-739	487,900	20,000	467,900	36,700	140,200	291,000	76,400	411,600	440,500	44,500	33,800	*
Rheumatoid arthritis, except spine 714	16,300	*	15,100	*	*8,400	*	*	14,300	14,200	*	*	-
Osteoarthritis and allied disorders, except spine 715	167,900	*	164,900	*10,500	46,000	108,400	24,200	143,700	151,100	15,800	13,700	*
Other arthropathies and related disorders 710-714,716-719	107,600	*6,300	101,300	*8,400	33,000	60,000	22,100	85,500	92,200	14,400	12,000	*
Osteoporosis 733.0	99,700	*	97,500	*7,200	26,700	63,500	*	93,800	93,500	*	*	*
Congenital anomalies 740-759	*9,500	*	*	*	*	*	*	*6,500	*8,100	*	*	*
Symptoms, signs, and ill-defined conditions 780-799	413,900	58,100	355,900	55,100	125,300	175,500	124,600	289,400	350,500	58,300	44,700	*
Senility without mention of psychosis 797	*	-	*	-	*	*	*	*	*	*	*	-
Injury and poisoning 800-999	202,600	16,200	186,400	18,900	55,300	112,100	40,000	162,600	184,400	14,800	*10,600	*
Fracture of neck of femur 820	89,000	*	86,500	*	24,800	56,700	14,100	75,000	81,800	*6,700	*	*
Other fractures 800-819,821-829	82,800	*6,200	76,600	*8,400	23,300	45,000	14,400	68,400	77,100	*	*	*
Supplementary classification V01-V82	370,500	49,200	321,300	42,000	124,400	154,800	118,400	252,100	310,300	54,500	46,200	*
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	167,600	19,800	147,800	19,100	55,900	72,900	51,700	115,900	143,500	22,200	17,700	*

- Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Disease, 9th Revision, Clinical Modification* (4).

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Numbers may not add to totals because of rounding.

Table 31. Percent distribution of all-listed diagnoses for nursing home residents at admission, by age, sex, and race: United States, 1999

Diagnosis and ICD-9-CM code ¹	Age at interview												
	All diagnoses	Under 65 years	65 years and over				Sex		Race				
			Total	65-74 years	75-84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001-139	0.8	2.3	0.6	0.8	0.6	0.7	1.2	0.7	0.7	1.4	*1.4	*	*
Neoplasms 140-239	1.6	*1.7	1.6	1.9	1.7	1.5	2.4	1.3	1.6	1.8	1.9	*	*
Malignant neoplasms 140-208,230-234	1.4	*1.4	1.4	1.7	1.5	1.3	2.2	1.1	1.4	1.6	1.7	*	*
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	8.6	8.0	8.7	10.7	9.7	7.5	8.1	8.9	8.4	9.8	9.9	*10.1	*
Diabetes mellitus 250	4.0	3.8	4.0	6.4	4.8	2.9	4.4	3.9	3.7	5.8	5.9	*	*
Diseases of the blood and blood-forming organs 280-289	2.5	1.9	2.6	2.0	2.3	2.9	2.4	2.6	2.4	3.3	3.4	*	*
Anemias 280-285	2.4	*1.6	2.4	1.9	2.2	2.8	2.3	2.4	2.3	3.1	3.2	*	*
Mental disorders 290-319	15.7	19.0	15.4	16.1	16.2	14.6	16.0	15.6	15.8	15.0	15.3	*13.2	*
Senile dementia or organic brain syndrome 290,310	2.1	*1.1	2.2	1.5	2.1	2.5	1.8	2.3	2.2	2.0	2.1	*	*
Mental retardation 317-319	0.4	2.1	0.3	*1.1	*0.3	*	0.7	0.3	0.4	0.4	0.5	*	*
Other mental disorders 291-309,311-316	13.1	15.8	12.8	13.5	13.8	12.0	13.5	13.0	13.2	12.5	12.7	*11.3	*
Diseases of the nervous system and sense organs 320-389	9.0	12.7	8.7	8.9	9.3	8.1	9.2	9.0	9.1	8.2	7.9	*10.7	*
Alzheimer's disease 331.0	3.2	*	3.4	2.7	4.1	3.1	2.4	3.5	3.2	2.8	2.8	*	*
Parkinson's disease 332	1.2	*	1.3	1.6	1.8	1.0	1.8	1.0	1.3	*1.1	*	*	*
Multiple sclerosis 340	0.3	2.5	*0.1	*	*	*	*0.4	0.3	0.3	*	*	*	*
Paralytic syndromes 342-344	0.6	3.8	0.3	*1.1	*0.3	*	1.1	0.5	0.6	*0.7	*0.8	*	*
Other diseases of the nervous system and sense organs	3.6	4.9	3.5	3.2	3.0	3.9	3.5	3.7	3.7	3.3	3.3	*	*
Diseases of the circulatory system 390-459	25.6	15.6	26.6	25.4	25.6	27.6	25.0	25.8	25.4	26.9	27.9	21.4	*
Essential hypertension 401	7.0	5.3	7.2	7.2	7.4	7.0	6.1	7.4	6.6	9.3	9.7	*	*
Heart disease 391-392.0,393-398,402,404,410-416,420-429	11.1	4.4	11.7	8.9	10.3	13.4	10.5	11.3	11.6	8.0	8.2	*	*
Diseases of the respiratory system 460-519	4.8	4.4	4.9	6.3	5.0	4.4	6.1	4.3	4.9	4.4	4.1	*	*
Pneumonia, all forms 480-486	1.2	*1.0	1.2	*1.0	1.0	1.4	1.3	1.1	1.2	*1.2	*1.1	*	*
Other diseases of the respiratory system 490-496	3.7	3.4	3.7	5.2	4.1	3.0	4.8	3.2	3.8	3.1	3.1	*	*
Diseases of the digestive system 520-579	4.7	4.3	4.8	4.5	4.4	5.1	4.7	4.7	4.8	4.3	4.0	*	*
Diseases of the genitourinary system 580-629	3.3	4.0	3.2	2.8	3.4	3.2	4.4	2.9	3.2	3.9	4.0	*	*
Urinary tract infection 580-583,590,595,597,599.0	1.5	*1.6	1.5	*1.1	1.5	1.6	1.3	1.6	1.5	1.7	1.7	*	*
Diseases of the skin and subcutaneous tissue 680-709	1.1	2.0	1.0	*1.3	*1.1	*1.0	1.4	1.1	1.1	1.3	1.3	*	*
Decubitus ulcer 707.0	0.3	*	0.3	*	*0.8	*0.8	*0.4	0.3	0.3	*0.7	*0.9	*	*
Other chronic ulcer of the skin 707.1-707.9	*0.2	*	*0.1	*	*	*	*	*0.1	*0.1	*	*	*	*
Diseases of the musculoskeletal system and connective tissue 710-739	7.3	*3.3	7.7	4.6	6.5	9.3	4.0	8.5	7.6	5.1	4.7	*	*
Rheumatoid arthritis, except spine 714	0.2	*	0.2	*	*0.4	*	*	0.3	0.2	*	*	-	-
Osteoarthritis and allied disorders, except spine 715	2.5	*	2.7	*1.3	2.1	3.5	1.3	3.0	2.6	1.8	1.9	*	*
Other arthropathies and related disorders 710-714,716-719	1.6	1.0	1.7	*1.0	1.5	1.9	1.2	1.8	1.6	1.7	1.7	*	*
Osteoporosis 733.0	1.5	*	1.6	*0.9	1.2	*	*	1.9	1.6	*	*	*	*
Congenital anomalies 740-759	*0.1	*	*	*	*	*	*	*0.1	*0.1	*	*	*	*
Symptoms, signs, and ill-defined conditions 780-799	6.2	9.5	5.8	6.9	5.8	5.6	6.6	6.0	6.1	6.7	6.2	*	*
Senility without mention of psychosis 797	*	-	*	-	*	*	*	*	*	*	*	-	-
Injury and poisoning 800-999	3.0	2.6	3.1	2.4	2.6	3.6	2.1	3.4	3.2	1.7	*1.5	*	*
Fracture of neck of femur 820	1.3	*	1.4	*	1.1	1.8	0.7	1.6	1.4	*0.8	*	*	*
Other fractures 800-819,821-829	1.2	*1.0	1.3	*1.0	1.1	1.4	0.8	1.4	1.3	*	*	*	*
Supplementary classification V01-V82	5.5	8.0	5.3	5.3	5.7	4.9	6.3	5.2	5.4	6.2	6.4	*	*
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	2.5	3.2	2.4	2.4	2.6	2.3	2.7	2.4	2.5	2.5	2.5	*	*

- Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Percents are based on the unrounded numbers.

Table 32. Number of nursing home residents by primary diagnosis at admission and dependency in activities of daily living and walking: United States, 1999

Diagnosis and ICD-9-CM code ¹	All residents	Receiving assistance from facility ² —					
		Bathing	Dressing	Eating	Transferring in or out of beds or chairs	Using the toilet room	Walking
Total	1,628,300	1,527,300	1,408,700	765,400	471,500	911,600	528,300
Infectious and parasitic diseases 001-139	15,300	13,600	12,300	*7,600	*	*6,100	*
Neoplasms 140-239	33,400	31,900	28,400	15,100	*9,800	18,000	12,900
Malignant neoplasms 140-208,230-234	30,000	28,500	25,400	12,700	*8,400	15,600	*11,600
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	112,300	100,400	88,800	41,600	29,400	58,400	35,800
Diabetes mellitus 250	74,000	67,300	59,700	28,300	20,800	38,200	25,400
Diseases of the blood and blood-forming organs 280-289	20,500	17,000	15,300	*7,400	*	*10,800	*6,800
Anemias 280-285	18,000	14,700	13,400	*7,000	*	*9,800	*5,900
Mental disorders 290-319	270,100	243,400	218,500	119,700	67,800	139,200	77,900
Senile dementia or organic brain syndrome 290,310	55,800	53,500	49,400	30,100	14,300	29,900	16,400
Mental retardation 317-319	12,300	11,000	*9,900	*5,300	*	*	*
Other mental disorders 291-309,311-316	202,000	178,900	159,100	84,300	51,000	104,500	57,600
Diseases of the nervous system and sense organs 320-389	236,300	228,400	217,400	147,100	67,600	141,800	63,500
Alzheimer's disease 331.0	137,100	132,700	127,100	89,400	38,800	86,000	36,100
Parkinson's disease 332	33,900	33,500	31,200	20,200	13,300	22,300	13,000
Multiple sclerosis 340	18,900	18,400	17,700	*11,400	*	*9,400	*
Paralytic syndromes 342-344	17,200	16,800	16,300	*11,300	*	*9,000	*
Other diseases of the nervous system and sense organs	29,200	27,000	25,200	14,800	*7,100	15,100	*9,300
Diseases of the circulatory system 390-459	374,100	355,200	326,800	164,600	113,500	218,400	131,000
Essential hypertension 401	57,900	54,500	47,600	20,700	18,100	33,000	24,700
Heart disease 391-392.0,393-398,402,404,410-416,420-429	144,200	134,500	121,300	56,500	44,700	81,800	53,800
Diseases of the respiratory system 460-519	105,400	99,200	90,800	52,100	28,400	54,400	33,300
Pneumonia, all forms 480-486	45,600	43,000	40,300	27,200	12,300	21,500	13,400
Other diseases of the respiratory system 490-496	59,800	56,200	50,500	25,000	16,200	33,000	19,900
Diseases of the digestive system 520-579	45,200	41,500	38,800	20,100	13,700	25,000	16,400
Diseases of the genitourinary system 580-629	40,100	39,300	38,000	23,500	13,700	21,800	12,100
Urinary tract infection 580-583,590,595,597,599.0	24,400	24,000	23,400	*15,300	*8,600	12,700	*6,900
Diseases of the skin and subcutaneous tissue 680-709	20,400	19,200	18,700	*	*5,700	*10,700	*
Diseases of the musculoskeletal system and connective tissue 710-739	71,900	68,400	62,100	28,600	23,900	43,900	30,400
Rheumatoid arthritis, except spine 714	*	*	*	*	*	*	*
Osteoarthritis and allied disorders, except spine 715	22,500	21,900	19,300	*9,500	*7,000	14,500	*9,300
Other arthropathies and related disorders 710-714,716-719	13,900	12,900	11,900	*	*	*7,800	*
Osteoporosis 733.0	*9,300	*9,100	*8,000	*	*	*	*
Symptoms, signs, and ill-defined conditions 780-799	78,400	74,500	68,300	37,400	21,800	38,800	26,600
Injury and poisoning 800-999	118,900	115,600	109,700	52,300	41,000	77,100	45,300
Fracture of neck of femur 820	64,100	62,600	60,400	28,400	22,500	43,400	25,500
Other fractures 800-819,821-829	43,500	42,000	39,400	18,000	16,100	28,000	17,400
Supplementary classification V01-V82	77,800	72,800	67,900	34,200	24,900	42,900	24,900
Posthospital after care V42-V46,V52,V53.3-V53.7,V54-V58	42,100	38,500	35,500	18,300	14,700	22,100	16,300

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59, or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²Figures do not add to totals because a resident may receive help in more than one category.

Table 33. Percent distribution of nursing home residents by primary diagnosis at admission, according to dependency in activities of daily living and walking: United States, 1999

Diagnosis and ICD-9-CM code ¹	All residents	Receiving assistance from facility ² —					
		Bathing	Dressing	Eating	Transferring in or out of beds or chairs	Using the toilet room	Walking
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001-139	0.9	0.9	0.9	*1.0	*	*0.7	*
Neoplasms 140-239	2.1	2.1	2.0	2.0	*2.1	2.0	2.4
Malignant neoplasms 140-208,230-234	1.8	1.9	1.8	1.7	*1.8	1.7	*2.2
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	6.9	6.6	6.3	5.4	6.2	6.4	6.8
Diabetes mellitus 250	4.5	4.4	4.2	3.7	4.4	4.2	*4.8
Diseases of the blood and blood-forming organs 280-289	1.3	1.1	1.1	*1.0	*	*1.2	1.3
Anemias 280-285	1.1	1.0	1.0	*0.9	*	*1.1	*1.1
Mental disorders 290-319	16.6	15.9	15.5	15.6	14.4	15.3	14.7
Senile dementia or organic brain syndrome 290, 310	3.4	3.5	3.5	3.9	3.0	3.3	*
Mental retardation 317-319	0.8	*0.7	*0.7	*0.7	*	*	*
Other mental disorders 291-309, 311-316	12.4	11.7	11.3	11.0	10.8	11.5	10.9
Diseases of the nervous system and sense organs 320-389	14.5	15.0	15.4	19.2	14.3	15.6	12.0
Alzheimer's disease 331.0	8.4	8.7	9.0	11.7	8.2	9.4	6.8
Parkinson's disease 332	2.1	2.2	2.2	2.6	2.8	2.4	2.5
Multiple sclerosis 340	1.2	1.2	1.3	*1.5	*	*1.0	*
Paralytic syndromes 342-344	1.1	1.1	1.2	*1.5	*	*1.0	*
Other diseases of the nervous system and sense organs	1.8	1.8	1.8	1.9	*1.5	1.7	*1.8
Diseases of the circulatory system 390-459	23.0	23.3	23.2	21.5	24.1	24.0	24.8
Essential hypertension 401	3.6	3.6	3.4	2.7	3.8	3.6	4.7
Heart disease 391-392.0,393-398,402,404,410-416,420-429	8.9	8.8	8.6	7.4	9.5	9.0	10.2
Diseases of the respiratory system 460-519	6.5	6.5	6.4	6.8	6.0	6.0	6.3
Pneumonia, all forms 480-486	2.8	2.8	2.9	3.6	2.6	2.4	2.5
Other diseases of the respiratory system 490-496	3.7	3.7	3.6	3.3	3.4	3.6	3.8
Diseases of the digestive system 520-579	2.8	2.7	2.8	2.6	2.9	2.8	3.1
Diseases of the genitourinary system 580-629	2.5	2.6	2.7	3.1	2.9	2.4	2.3
Urinary tract infection 580-583,590, 595,597,599.0	1.5	1.6	1.7	*2.0	*1.8	1.4	*1.3
Diseases of the skin and subcutaneous tissue 680-709	1.3	1.3	1.3	*	*1.2	*1.2	*
Diseases of the musculoskeletal system and connective tissue 710-739	4.4	4.5	4.4	3.7	5.1	4.8	5.8
Rheumatoid arthritis, except spine 714	*	*	*	*	*	*	*
Osteoarthritis and allied disorders, except spine 715	1.4	1.4	1.4	1.2	1.5	1.6	1.8
Other arthropathies and related disorders 710-714, 716-719	0.9	0.8	0.8	0.8	0.7	0.9	*
Osteoporosis 733.0	*0.6	*0.6	*0.6	*	0.6	0.6	*
Symptoms, signs, and ill-defined conditions 780-799	4.8	4.9	4.9	4.9	4.6	4.3	5.0
Injury and poisoning 800-999	7.3	7.6	7.8	6.8	8.7	8.5	8.6
Fracture of neck of femur 820	3.9	4.1	4.3	3.7	4.8	4.8	4.8
Other fractures 800-819,821-829	2.7	2.8	2.8	2.4	3.4	3.1	3.3
Supplementary classification V01-V82	4.8	4.8	4.8	4.5	5.3	4.7	4.7
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	2.6	2.5	2.5	2.4	3.1	2.4	3.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²Figures do not add to totals, because a resident may receive help in more than one category.

NOTE: Percents are based on the unrounded numbers.

Table 34. Number and percent distribution of nursing home residents by length of time since admission and average length of time since admission, according to primary diagnosis at admission: United States, 1999

Diagnosis and ICD-9-CM code ¹	All residents	Total	Length of time since admission						Average length of time since admission (in days)	
			Less than 3 months	3 months to less than 6	6 months to less than 12	1 year to less than 3	3 years to less than 5	5 years or more		
Total	1,628,600	100.0	17.8	10.1	14.9	30.1	13.3	13.8	901.4	
Neoplasms	140-239	33,400	100.0	41.0	*	*	*19.4	*	*	492.5
Malignant neoplasms	140-208,230-234	30,000	100.0	40.2	*	*	*	*	*	496.9
Endocrine, nutritional, and metabolic diseases and immunity disorders	240-279	112,300	100.0	17.8	*9.9	15.2	30.7	13.9	12.4	814.9
Diabetes mellitus	250	74,000	100.0	16.4	*	17.8	31.1	*14.9	*11.6	812.5
Diseases of the blood and blood-forming organs	280-289	20,500	100.0	*	*	*	*44.1	*	*	852.1
Anemias	280-285	18,000	100.0	*	*	*	*31.2	*	*	1,263.8
Mental disorders	290-319	270,100	100.0	10.6	7.2	14.7	31.2	16.3	20.0	1,263.8
Senile dementia or organic brain syndrome	290, 310	55,800	100.0	*	*	*13.0	34.6	*16.0	21.1	1,249.5
Mental retardation	317-319	12,300	100.0	*	*	*	*	*	*50.7	3,143.6
Other mental disorders	291-309, 311-316	202,000	100.0	11.6	7.6	15.7	30.9	16.3	17.9	1,134.6
Diseases of the nervous system and sense organs	320-389	236,300	100.0	10.9	9.2	13.2	33.8	15.2	17.7	1,068.3
Alzheimer's disease	331.0	137,100	100.0	10.8	9.2	13.5	36.3	15.2	15.0	940.7
Parkinson's disease	332	33,900	100.0	*	*	*	*32.7	*19.4	*	958.9
Multiple sclerosis	340	18,900	100.0	*	*	*	*34.2	*	*	1305.9
Paralytic syndromes	342-344	17,200	100.0	*	*	*	*	*	*	1669.8
Other diseases of the nervous system and sense organs		29,200	100.0	*	*	*	*32.4	*	*23.8	1,289.5
Diseases of the circulatory system	390-459	374,100	100.0	17.8	10.2	14.9	30.1	13.9	13.1	864.0
Essential hypertension	401	57,900	100.0	*12.8	*10.4	*14.2	32.8	*16.1	*13.7	908.9
Heart disease	391-392.0,393-398,402,404,410-416,420-429	144,200	100.0	19.7	11.0	15.3	28.4	12.2	13.5	835.9
Diseases of the respiratory system	460-519	105,400	100.0	24.5	13.4	19.3	29.6	*8.3	*	558.8
Pneumonia, all forms	480-486	45,600	100.0	*22.7	*14.6	*20.9	29.1	*	*	511.1
Other diseases of the respiratory system	490-496	59,800	100.0	26.0	*12.5	*18.0	29.9	*	*	594.2
Diseases of the digestive system	520-579	45,200	100.0	*	*	*18.2	26.6	*	*12.8	750.7
Diseases of the genitourinary system	580-629	40,100	100.0	*	*	*17.5	*27.7	*	*	615.2
Urinary tract infection	580-583,590, 595,597,599.0	24,400	100.0	*	*	*	*31.0	*	*	474.4
Diseases of the skin and subcutaneous tissue	680-709	20,400	100.0	*	*	*	*30.8	*	*	418.5
Diseases of the musculoskeletal system and connective tissue	710-739	71,900	100.0	16.0	*	*11.6	28.9	17.5	18.7	1092.5
Symptoms, signs, and ill-defined conditions	780-799	78,400	100.0	23.2	*11.1	16.4	30.2	*9.9	*9.2	721.7
Injury and poisoning	800-999	118,900	100.0	22.6	13.9	14.2	28.2	11.6	*9.5	667.5
Fracture of neck of femur	820	64,100	100.0	21.5	*12.2	*12.8	32.8	*11.4	*	684.5
Other fractures	800-819,821-829	43,500	100.0	*24.3	*15.7	*14.8	*24.4	*	*	658.0
Supplementary classification	V01-V82	77,800	100.0	24.1	*10.5	*14.2	25.7	*13.2	*12.3	806.4
Posthospital aftercare	V42-46,V52,V53.3-V53.7,V54-V58	42,100	100.0	27.7	6.2	16.4	26.2	12.3	11.2	777.9

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification (4)*.

NOTE: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 35. Number of nursing home discharges by selected facility characteristics and age, sex, and race: United States, October 1998–September 1999

Facility characteristic	All discharges	Age at discharge					Sex		Race			
		Under 65 years	65 years and over			Male	Female	White	Black and other ¹			
			Total	65–74 years	75–84 years				85 years and over	Black	Unknown	
All facilities	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Ownership												
Proprietary	1,655,500	218,000	1,437,500	266,900	591,300	579,300	628,600	1,026,900	1,422,700	206,600	165,800	26,200
Voluntary nonprofit	751,800	61,700	690,100	134,600	249,600	305,900	289,300	462,400	640,000	89,600	70,800	*22,100
Government and other	115,100	13,700	101,300	*13,200	44,900	43,300	50,500	64,500	100,800	13,100	*11,000	*
Certification												
Certified												
By Medicare and Medicaid	2,244,300	273,600	1,970,800	381,500	787,600	801,700	861,500	1,382,900	1,909,300	286,700	231,100	48,300
By Medicare only	158,700	*	154,500	*	63,700	70,600	62,100	96,500	152,700	*	*	*
By Medicaid only	98,600	15,200	83,400	*12,200	29,000	42,300	38,600	60,000	81,300	16,900	*10,800	*
Not certified	20,700	*	20,200	*	*	13,900	*6,300	14,400	20,300	*	*	–
Beds												
Fewer than 50 beds	214,000	*	195,700	*	83,300	71,600	94,000	120,100	192,100	*	*	*
50–99 beds	585,200	53,400	531,900	91,600	203,200	237,100	224,100	361,100	497,300	78,200	57,400	*
100–199 beds	1,296,900	163,300	1,133,600	224,300	448,000	461,300	481,800	815,100	1,129,700	142,900	119,600	*24,300
200 beds or more	426,100	58,400	367,800	58,000	151,300	158,500	168,600	257,500	344,300	68,200	57,900	*13,700
Geographic region												
Northeast	524,200	65,700	458,500	87,100	180,500	190,900	196,100	328,100	457,000	53,600	47,000	*13,700
Midwest	709,700	71,000	638,700	105,700	252,800	280,300	278,300	431,500	630,100	71,500	61,000	*
South	714,800	72,300	642,500	107,300	259,600	275,600	256,900	457,900	609,300	100,200	95,100	*
West	573,600	84,400	489,200	114,600	192,900	181,700	237,200	336,400	467,100	84,200	44,400	*22,300
Location of agency												
Metropolitan statistical area	1,948,800	249,300	1,699,500	333,000	674,300	692,200	747,300	1,201,600	1,635,700	267,800	216,900	45,300
Nonmetropolitan statistical area	573,500	44,100	529,400	81,600	211,500	236,300	221,200	352,300	527,800	41,600	30,700	*
Affiliation ²												
Chain	1,581,300	179,200	1,402,100	273,100	552,800	576,200	598,500	982,800	1,333,400	209,500	176,100	38,400
Independent	938,100	114,200	823,900	141,200	332,400	350,300	369,500	568,600	827,500	99,500	71,100	11,100

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.²Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 36. Percent distribution of nursing home discharges by selected facility characteristics, according to age, sex, and race: United States, October 1998–September 1999

Facility characteristic	Age at discharge											
	All discharges	Under 65 years	65 years and over				Sex		Race			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown
All facilities	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Ownership												
Proprietary	65.6	74.3	64.5	64.4	66.8	62.4	64.9	66.1	65.8	66.8	67.0	53.1
Voluntary nonprofit	29.8	21.0	31.0	32.5	28.2	33.0	29.9	29.8	29.6	29.0	28.6	*44.7
Government and other	4.6	4.7	4.6	*3.2	5.1	4.7	5.2	4.2	4.7	4.3	*4.4	*
Certification												
Certified												
By Medicare and Medicaid	89.0	93.2	88.4	92.0	88.9	86.4	89.0	89.0	88.3	92.7	93.4	97.7
By Medicare only	6.3	*	6.9	*	7.2	7.6	6.4	6.2	7.1	*	*	*
By Medicaid only	3.9	5.2	3.7	*2.9	3.3	4.6	4.0	3.9	3.8	5.5	*4.4	*
Not certified	0.8	*	0.9	*	*	1.5	*0.7	0.9	0.9	*	*	–
Beds												
Fewer than 50 beds	8.5	*	8.8	*	9.4	7.7	9.7	7.7	8.9	*	*	*
50–99 beds	23.2	18.2	23.9	22.1	22.9	25.5	23.1	23.2	23.0	25.3	23.2	*
100–199 beds	51.4	55.7	50.9	54.1	50.6	49.7	49.8	52.5	52.2	46.2	48.3	*49.2
200 beds or more	16.9	19.9	16.5	14.0	17.1	17.1	17.4	16.6	15.9	22.0	23.4	*27.6
Geographic region												
Northeast	20.8	22.4	20.6	21.0	20.4	20.6	20.3	21.1	21.1	17.3	19.0	*27.6
Midwest	28.1	24.2	28.7	25.5	28.5	30.2	28.7	27.8	29.1	23.1	24.7	*
South	28.3	24.7	28.8	25.9	29.3	29.7	26.5	29.5	28.2	32.4	38.4	*
West	22.7	28.8	22.0	27.6	21.8	19.6	24.5	21.7	21.6	27.2	17.9	*45.2
Location of agency												
Metropolitan statistical area	77.3	85.0	76.3	80.3	76.1	74.6	77.2	77.3	75.6	86.6	87.6	91.6
Nonmetropolitan statistical area	22.7	15.0	23.8	19.7	23.9	25.5	22.8	22.7	24.4	13.4	12.4	*
Affiliation ²												
Chain	62.7	61.1	62.9	65.9	62.4	62.1	61.8	63.3	61.6	67.7	71.1	77.6
Independent	37.2	38.9	37.0	34.1	37.5	37.7	38.2	36.6	38.3	32.2	28.7	22.4

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

²Excludes unknown.

NOTE: Percents are based on the unrounded figures.

Table 37. Number, percent distribution, and rate of nursing home discharges, by age at discharge, according to sex, race, and region: United States, October 1998–September 1999

Age at discharge	All discharges	Sex		Race				Region			
		Male	Female	White	Black and other ¹	Black	Unknown	Northeast	Midwest	South	West
Number in thousands											
All ages	2,522,300	968,500	1,553,800	2,163,500	309,400	247,500	49,400	524,200	709,700	714,800	573,600
Under 65 years	293,400	148,500	144,900	227,600	55,400	47,000	*	65,700	71,000	72,300	84,400
65 years and over	2,228,900	820,000	1,408,900	1,935,900	254,000	200,500	39,100	458,500	638,700	642,500	489,200
65–74 years	414,600	198,900	215,800	331,500	74,100	57,000	*	87,100	105,700	107,300	114,600
75–84 years	885,800	360,600	525,200	770,300	100,400	83,500	*15,000	180,500	252,800	259,600	192,900
85 years and over	928,500	260,500	668,000	834,100	79,500	60,000	*15,000	190,900	280,300	275,600	181,700
Percent distribution											
All ages	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Under 65 years	11.6	15.3	9.3	10.5	17.9	19.0	*	12.5	10.0	10.1	14.7
65 years and over	88.4	84.7	90.7	89.5	82.1	81.0	79.0	87.5	90.0	89.9	85.3
65–74 years	16.4	20.5	13.9	15.3	24.0	23.0	*	16.6	14.9	15.0	20.0
75–84 years	35.1	37.2	33.8	35.6	32.5	33.7	*30.4	34.4	35.6	36.3	33.6
85 years and over	36.8	26.9	43.0	38.6	25.7	24.2	*30.3	36.4	39.5	38.6	31.7
Rate per 10,000 population ²											
All ages	91.5	71.9	110.3	95.8	62.5	68.6	...	100.4	111.7	73.2	92.3
Under 65 years	12.2	12.3	12.0	11.6	12.1	14.2	...	14.6	12.8	8.5	15.3
65 years and over	651.0	575.9	704.4	636.8	666.2	701.3	...	636.6	787.3	532.0	714.4
65–74 years	229.8	244.1	218.1	210.1	330.7	342.0	...	235.2	253.4	164.1	315.3
75–84 years	735.3	743.1	730.0	708.9	856.5	946.5	...	698.6	875.3	624.8	797.0
85 years and over	2,238.2	2,105.2	2,294.7	2,226.5	1,989.0	1,928.5	...	2,083.6	2,660.5	1,988.6	2,291.8

... Category not applicable.

* Figure does not meet standard of reliability or precision, because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but has a relative standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

²Rates are based on the civilian resident population, including institutionalized persons, as of July 1, 1999.

NOTES: Numbers may not add to totals because of rounding. Percents and rates are based on the unrounded numbers.

Table 38. Number and percent of nursing home discharges by selected facility characteristics and primary expected source of payment: United States, October 1998–September 1999

Facility characteristic	Primary expected source of payment at discharge									
	All discharges		Private sources ¹		Medicare		Medicaid		All other ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
All facilities	2,522,300	100.0	616,300	100.0	1,136,700	100.0	667,200	100.0	102,200	100.0
Ownership										
Proprietary	1,655,500	65.6	399,300	64.8	700,600	61.6	478,700	71.8	76,800	75.2
Voluntary nonprofit	751,800	29.8	195,100	31.7	398,800	35.1	138,400	20.7	*19,400	*19.0
Government and other	115,100	4.6	21,800	3.5	37,300	3.3	50,100	7.5	*	*
Certification										
Certified										
By Medicare and Medicaid	2,244,300	89.0	525,900	85.4	1,022,900	90.0	606,000	90.8	89,500	87.6
By Medicare only	158,700	6.3	45,700	7.4	106,500	9.4	*	*	*	*
By Medicaid only	98,600	3.9	30,000	4.9	*	*	56,600	8.5	*	*
Not certified	20,700	0.8	14,600	2.4	*	*	*	*	*	*
Beds										
Fewer than 50 beds	214,000	8.5	35,300	5.7	144,500	12.7	*30,600	*4.6	*	*3.6
50–99 beds	585,200	23.2	162,300	26.3	234,100	20.6	170,200	25.5	18,600	18.2
100–199 beds	1,296,900	51.4	333,300	54.1	572,000	50.3	345,600	51.8	46,100	45.1
200 beds or more	426,100	16.9	85,300	13.9	186,200	16.4	120,800	18.1	33,800	33.1
Geographic region										
Northeast	524,200	20.8	94,700	15.4	252,000	22.2	149,100	22.3	28,400	27.8
Midwest	709,700	28.1	197,600	32.1	305,300	26.9	187,300	28.1	19,600	19.2
South	714,800	28.3	152,000	24.7	325,200	28.6	210,200	31.5	27,400	26.8
West	573,600	22.7	171,900	27.9	254,300	22.4	120,700	18.1	26,700	26.1
Location of agency										
Metropolitan statistical area	1,948,800	77.3	506,200	82.1	872,600	76.8	479,000	71.8	91,100	89.2
Nonmetropolitan statistical area	573,500	22.7	110,100	17.9	264,100	23.2	188,300	28.2	*11,100	*10.8
Affiliation ³										
Chain	1,581,300	62.7	391,000	63.5	718,500	63.2	405,100	60.7	66,700	65.3
Independent	938,100	37.2	224,200	36.4	417,000	36.7	261,400	39.2	35,500	34.7

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³Excludes unknown.

NOTE: Numbers may not add to totals because of rounding.

Table 39. Number and percent distribution of nursing home discharges by length of stay and average length of stay, according to selected facility characteristics: United States, October 1998–September 1999

Facility characteristic	Length of stay ¹								
	All discharges	Total	Less than 3 months	3 months to less than 6 months	6 months to less than 12 months	1 year to less than 3 years	3 years to less than 5 years	5 years or more	Average length of stay in days
	Number		Percent distribution						
All facilities	2,522,300	100.0	68.3	8.0	6.9	9.3	3.7	3.7	271.5
Ownership									
Proprietary	1,655,500	100.0	67.6	9.0	7.4	9.4	3.3	3.4	255.3
Voluntary nonprofit	751,800	100.0	72.8	5.6	5.3	8.4	4.3	3.7	270.5
Government and other	115,100	100.0	50.3	*9.8	*9.4	15.3	*6.4	*8.8	511.3
Certification									
Certified									
By Medicare and Medicaid	2,244,300	100.0	68.9	8.1	6.9	9.1	3.6	3.5	260.4
By Medicare only	158,700	100.0	80.8	*	*	*	*	*	153.6
By Medicaid only	98,600	100.0	39.7	*10.0	*10.0	21.6	*8.6	*10.1	607.9
Not certified	20,700	100.0	*48.0	*	*	*	*	*	780.5
Beds									
Less than 50 beds	214,000	100.0	86.4	*	*	*4.3	*	*	137.3
50–99 beds	585,200	100.0	65.1	7.7	8.2	11.4	3.6	4.1	289.7
100–199 beds	1,296,900	100.0	68.5	8.7	6.6	8.8	3.9	3.4	262.4
200 beds or more	426,100	100.0	63.3	9.1	7.6	10.6	4.2	5.2	341.8
Geographic region									
Northeast	524,200	100.0	66.2	9.0	7.5	9.2	4.1	4.1	298.7
Midwest	709,700	100.0	65.4	8.0	7.1	9.9	5.0	4.6	316.0
South	714,800	100.0	65.0	8.0	7.7	11.2	4.1	3.9	298.6
West	573,600	100.0	78.0	7.2	5.0	6.4	*	*2.0	157.8
Location of agency									
Metropolitan statistical area	1,948,800	100.0	70.2	7.9	6.6	8.8	3.4	3.1	242.6
Nonmetropolitan statistical area	573,500	100.0	61.8	8.3	7.8	11.3	4.8	6.0	369.9
Affiliation ¹									
Chain	1,581,300	100.0	68.4	8.3	6.8	9.5	3.5	3.4	261.7
Independent	938,100	100.0	68.2	7.5	6.9	9.1	4.1	4.2	288.4

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 40. Number of nursing home discharges by marital status, residence, living arrangements before admission and age, sex, and race of resident: United States, October 1998–September 1999

Resident characteristic	Age at discharge											
	All discharges	Under 65 years	65 years and over			Sex		Race				
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown
All residents	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Current marital status												
Married	704,100	73,500	630,700	161,400	299,900	169,400	423,400	280,700	621,200	67,500	45,000	*15,400
Widowed	1,213,700	28,300	1,185,400	105,300	434,600	645,400	259,100	954,500	1,078,400	119,700	97,000	*15,500
Divorced or separated	223,900	64,400	159,500	71,400	56,700	31,500	102,400	121,500	178,600	40,100	34,100	*
Single or never married	323,600	119,300	204,200	66,900	77,700	59,600	164,300	159,200	244,600	72,200	62,800	*
Unknown	57,100	*	49,100	*9,600	*16,900	*22,600	19,200	37,900	40,700	*9,900	*8,800	*
Residence before admission												
Private or semi-private residence	556,500	72,300	484,200	82,900	197,400	204,000	220,300	336,200	480,000	66,000	53,300	*
Retirement home	24,200	*	23,800	*	*	*11,900	*	*20,200	18,700	*	*	*
Board and care or residential care facility	77,200	*	73,500	*	26,300	42,000	19,500	57,700	73,600	*	*	*
Nursing home	136,000	*14,000	122,000	*15,400	46,200	60,500	47,800	88,200	115,000	18,600	14,300	*
Hospital	1,650,100	189,700	1,460,400	293,100	589,800	577,500	645,600	1,004,500	1,414,100	205,500	164,700	*
Other or unknown	78,400	*13,500	64,900	*11,900	20,400	32,700	31,400	47,000	62,100	*	*	*
Living arrangement before admission												
Alone	191,300	*16,200	175,100	27,700	62,500	84,900	57,000	134,300	179,200	*10,600	*9,000	*
With family members	343,500	48,700	294,800	48,300	127,100	119,400	152,100	191,400	286,100	50,500	39,800	*
With nonfamily members	64,500	*	59,100	*	*22,400	25,300	18,100	46,400	55,400	*	*	*
Other or unknown	1,923,100	223,100	1,699,900	327,400	673,700	698,900	741,300	1,181,700	1,642,800	240,300	191,400	40,000

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Numbers may not add to totals because of rounding.

Table 41. Percent distribution of nursing home discharges by marital status, residence, and living arrangements before admission, according to age, sex, and race: United States, October 1998–September 1999

Resident characteristic	Age at discharge												
	All discharges	Under 65 years	65 years and over				Sex		Race				
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown	
All residents	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Current marital status													
Married	27.9	25.0	28.3	38.9	33.9	18.2	43.7	18.1	28.7	21.8	18.2	*31.2	
Widowed	48.1	9.6	53.2	25.4	49.1	69.5	26.8	61.4	49.9	38.7	39.1	*31.3	
Divorced or separated	8.9	21.9	7.2	17.2	6.4	3.4	10.6	7.8	8.3	13.0	13.8	*	
Single or never married	12.8	40.7	9.2	16.1	8.8	6.4	17.0	10.3	11.3	23.3	25.3	*	
Unknown	2.3	*	2.2	*2.3	*1.9	*2.4	2.0	2.4	1.9	*3.2	*3.6	*	
Residence before admission													
Private or semi-private residence	21.9	24.6	21.7	19.9	22.3	22.0	22.8	21.6	22.1	21.2	21.4	*	
Retirement home	1.0	*	1.1	*	*	*1.3	*	*1.3	0.9	*	*	*	
Board and care or residential care facility	3.1	*	3.3	*	3.0	4.5	2.0	3.7	3.4	*	*	*	
Nursing home	5.4	*4.8	5.5	*3.7	*5.2	6.5	4.9	5.7	5.3	6.0	*5.8	*	
Hospital	65.4	64.6	65.5	70.7	66.6	62.2	66.7	64.6	65.4	66.4	66.5	61.7	
Other or unknown	2.7	*4.6	2.9	*2.9	2.3	3.5	3.2	3.0	2.6	*	*	*	
Living arrangement before admission													
Alone	7.6	*5.5	7.9	6.7	7.1	9.2	5.9	8.6	8.3	*3.4	*3.6	*	
With family members	13.6	16.6	13.2	11.6	14.4	12.9	15.7	12.3	13.2	16.3	16.1	*	
With nonfamily members	2.6	*	2.7	*	*2.5	2.7	1.9	3.0	2.6	*	*	*	
Other or unknown	76.2	76.1	76.3	79.0	76.1	75.3	76.6	76.1	75.9	77.7	77.3	81.0	

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Percents are based on the unrounded numbers.

Table 42. Number of nursing home discharges by type of aids used and age, sex, and race: United States, October 1998–September 1999

Aids used ¹	All discharges	Age at discharge					Sex		Race			
		Under 65 years	65 years and over			Male	Female	White	Black and other ²	Black	Unknown	
			Total	65–74 years	75–84 years							85 years and over
Total	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Eyeglasses	1,638,800	133,500	1,505,300	270,800	593,900	640,600	595,800	1,043,100	1,479,500	135,400	105,000	*23,900
Hearing aid	273,200	*	270,100	*12,700	97,300	160,200	112,200	161,000	262,100	*11,100	*	–
Dentures	1,039,800	58,800	981,100	164,900	377,200	439,000	367,700	672,100	938,300	82,700	67,600	*18,900
Transfer equipment	329,900	50,800	279,100	43,600	115,500	120,000	121,500	208,500	279,900	44,500	38,800	*
Wheelchair	1,307,200	139,700	1,167,500	194,400	450,600	522,500	466,100	841,100	1,114,800	169,400	137,400	23,000
Cane	202,300	*15,900	186,500	54,300	56,400	75,800	90,000	112,300	180,400	19,500	*13,900	*
Walker	787,700	73,700	714,100	133,500	297,600	282,900	279,600	508,200	697,700	73,800	57,100	*16,200
Brace (any type)	45,500	*11,300	34,300	*10,300	*11,700	*12,300	*16,300	29,200	41,100	*	*	*
Oxygen	475,800	41,400	434,500	77,400	158,800	198,200	203,700	272,100	410,000	57,500	46,700	*
Commode	186,500	*17,700	168,800	*41,200	53,700	73,900	59,000	127,500	150,800	*31,800	*23,300	*
Other aids or devices	428,200	50,900	377,300	86,500	147,900	142,900	170,800	257,400	353,300	64,200	55,000	*10,700
None	119,600	40,300	79,300	*24,300	29,900	25,100	58,600	61,000	97,900	19,700	16,700	*

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers may add to more than totals because a discharge may be included in more than one category.

²A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

Table 43. Number and percent of nursing home discharges by type of aids used and age, sex, and race: United States, October 1998–September 1999

Aids used	All discharges	Age at discharge					Sex		Race			
		Under 65 years	65 years and over			Male	Female	White	Black and other ¹	Black	Unknown	
			Total	65–74 years	75–84 years							85 years and over
Number in thousands												
Total	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Percent												
Eyeglasses	65.0	45.5	67.5	65.3	67.1	69.0	61.5	67.1	68.4	43.8	42.4	*48.3
Hearing aid	10.8	*	12.1	*3.1	11.0	17.3	11.6	10.4	12.1	*3.6	*	–
Dentures	41.2	20.0	44.0	39.8	42.6	47.3	38.0	43.3	43.4	26.7	27.3	*38.1
Transfer equipment	13.1	17.3	12.5	10.5	13.0	12.9	12.5	13.4	12.9	14.4	15.7	*
Wheelchair	51.8	47.6	52.4	46.9	50.9	56.3	48.1	54.1	51.5	54.8	55.5	46.6
Cane	8.0	*5.4	8.4	13.1	6.4	8.2	9.3	7.2	8.3	6.3	5.6	*
Walker	31.2	25.1	32.0	32.2	33.6	30.5	28.9	32.7	32.3	23.9	23.1	*32.9
Brace (any type)	1.8	*3.9	1.5	*2.5	*1.3	*1.3	*1.7	1.9	1.9	*	*	*
Oxygen	18.9	14.1	19.5	18.7	17.9	21.4	21.0	17.5	18.9	18.6	18.9	*
Commode	7.4	*6.0	7.6	*9.9	6.1	8.0	6.1	8.2	7.0	*10.3	*9.4	*
Other aids or devices	17.0	17.3	16.9	20.9	16.7	15.4	17.6	16.6	16.3	20.7	22.2	*21.6
None	4.7	13.7	3.6	*5.9	3.4	2.7	6.1	3.9	4.5	6.4	6.7	*

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

NOTE: Percents are based on the unrounded numbers.

Table 44. Number of nursing home discharges by selected functional status and age, sex, and race: United States, October 1998–September 1999

Functional status	Age at discharge											
	All discharges	Under 65 years	65 years and over				Sex		Race			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown
All residents	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Vision ²												
Not impaired	1,710,400	231,100	1,479,300	309,400	610,200	559,700	667,300	1,043,200	1,489,400	195,300	150,700	25,800
Impaired ³	553,700	36,600	517,000	61,900	184,700	270,500	199,900	353,700	468,500	69,100	59,000	*16,000
Partially impaired	345,300	*21,400	323,800	36,300	121,900	165,700	135,000	210,300	290,700	47,200	40,100	*
Severely impaired	127,000	*	120,800	*15,500	35,100	70,200	36,100	90,900	108,000	*15,200	*12,800	*
Completely lost	32,000	*	28,400	*	*	*16,300	*11,500	20,600	27,500	*	*	–
Impairment level unknown	49,300	*	44,000	*	*19,300	*18,400	*17,400	31,900	42,500	*	*	*
Unknown or unable to determine	258,200	25,700	232,600	43,400	90,800	98,400	101,300	157,000	205,500	45,000	37,800	*
Hearing ⁴												
Not impaired	1,739,700	245,300	1,494,300	321,800	624,700	547,800	657,900	1,081,800	1,496,100	210,700	166,400	32,900
Impaired ³	475,800	*14,000	461,800	40,300	148,800	272,800	198,000	277,900	420,400	47,300	36,500	*
Partially impaired	332,600	*8,700	323,800	26,200	111,000	186,600	143,200	189,300	294,700	34,700	26,100	*
Severely impaired	102,100	*	99,200	*	21,700	68,800	37,400	64,700	88,200	*	*	*
Completely lost	*	*	*	–	*	*	*	*	*	*	*	*
Impairment level unknown	35,600	*	33,700	*	*14,600	*13,700	*14,800	*20,800	32,400	*	*	*
Unknown or unable to determine	306,800	34,100	272,800	52,500	112,300	108,000	112,700	194,200	247,000	51,400	44,700	*
Walking ⁵												
Received help	940,300	86,500	853,900	158,200	354,200	341,500	348,400	591,900	838,200	78,800	55,700	*23,300
Received no help	441,500	90,800	350,700	93,000	141,600	116,100	186,100	255,400	384,800	50,600	39,800	*
Continence												
Difficulty controlling bowels ⁶	42,000	*	38,800	*	*13,200	*15,700	20,500	*21,400	35,100	*	*	*
Difficulty controlling bladder ⁷	208,600	*14,500	194,100	*27,800	70,700	95,600	63,000	145,600	183,300	*22,700	*18,600	*
Difficulty controlling both bowels and bladder ^{6,7}	819,500	59,000	760,500	91,100	290,000	379,400	294,800	524,700	674,400	131,600	115,600	*13,500
Has ostomy, indwelling catheter or similar device	453,200	55,800	397,400	79,100	163,400	155,000	203,100	250,100	366,400	76,700	64,300	*
Functional status in ADLs ⁸												
Receives no help	220,000	56,200	163,800	*40,000	82,500	41,300	100,000	120,000	197,500	15,300	13,200	*
Receives help with 1 ADL	129,300	17,400	112,000	25,800	47,900	38,300	49,800	79,500	115,200	11,900	*13,200	*
Receives help with 2 ADLs	311,600	53,100	258,500	55,500	110,700	92,300	129,800	181,800	262,100	*11,900	*	*
Receives help with 3 ADLs	841,400	86,500	755,000	143,400	294,800	316,700	324,300	517,100	708,000	123,800	103,100	*9,600
Receives help with 4 ADLs	768,600	60,700	708,000	119,200	273,000	315,800	268,600	500,100	658,900	92,900	75,000	*16,800
Receives help with 5 ADLs	251,400	*19,600	231,800	30,800	76,900	124,100	96,000	155,400	221,800	22,900	*19,000	*
Receive help with ADLs ^{8,9}												
Bathing	2,225,300	231,000	1,994,200	362,800	766,100	865,400	830,800	1,394,400	1,900,800	284,400	226,400	40,000
Dressing	2,081,500	208,300	1,873,200	330,100	718,500	824,600	781,200	1,300,400	1,770,700	270,800	216,900	40,000
Eating	1,216,300	99,400	1,116,800	163,800	421,000	532,000	467,700	748,500	1,003,700	187,600	162,200	24,900
Transfer	805,200	66,400	738,800	127,600	289,100	322,100	289,800	515,400	715,600	72,700	54,200	*16,800
Using toilet room	1,280,000	118,500	1,161,500	213,500	435,500	512,500	467,300	812,800	1,117,300	139,000	112,300	23,700

See footnotes at end of table.

Table 44. Number of nursing home discharges by selected functional status and age, sex, and race: United States, October 1998–September 1999—Con.

Functional status	All discharges	Age at discharge					Sex		Race			
		Under 65 years	65 years and over			Male	Female	White	Black and other ¹		Black	Unknown
			Total	65–74 years	75–84 years				85 years and over	Black		
Received help with IADLs ^{8,9}												
Care of personal possessions	1,433,200	132,900	1,300,300	200,900	506,000	593,400	538,400	894,800	1,215,900	196,100	161,100	*21,200
Managing money	1,290,200	120,800	1,169,400	183,200	449,000	537,200	473,200	816,900	1,088,000	184,100	151,400	*18,100
Securing personal items such as newspaper, toilet articles, snack food	1,475,200	135,700	1,339,500	211,300	529,100	599,200	559,400	915,900	1,265,900	188,100	155,000	*21,200
Using the telephone	1,188,100	100,700	1,087,400	164,800	431,000	491,600	450,200	737,900	1,006,200	162,500	136,100	*19,300

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

– Quantity zero.

¹A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

²Includes status when using eyeglasses or contact lenses.

³Includes residents for whom the severity of impairment is unknown.

⁴Includes status when using a hearing aid if applicable.

⁵Excludes unknown.

⁶Excludes residents who had a colostomy.

⁷Excludes residents who had an indwelling catheter or ostomy.

⁸ADL is activities of daily living and IADL is instrumental activities of daily living.

⁹Numbers do not add to totals because a resident may be included in more than one category.

Table 45. Percent distribution of nursing home discharges by selected functional status and percent of activities of daily living and instrumental activities of daily living, according to age, sex, and race: United States, October 1998–September 1999

Functional status	Age at discharge											
	All discharges	Under 65 years	65 years and over				Sex		Race			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ¹	Black	Unknown
Percent distribution												
All discharges	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Vision ²												
Not impaired	67.8	78.8	66.4	74.6	68.9	60.3	68.9	67.1	68.8	63.1	60.9	52.1
Impaired ³	22.0	12.5	23.2	14.9	20.9	29.1	20.6	22.8	21.7	22.4	23.8	*32.1
Partially impaired	13.7	*7.3	14.5	8.8	13.8	17.8	13.9	13.5	13.4	15.2	16.2	*
Severely impaired	5.0	*	5.4	*3.7	4.0	7.6	3.7	5.9	5.0	*4.9	*5.2	*
Completely lost	1.3	*	1.3	*	*	*1.8	*1.2	1.3	1.3	*	*	–
Impairment level unknown	2.0	*	2.0	*	*2.2	*2.0	*1.8	2.1	2.0	*	*	*
Unknown or unable to determine	10.2	8.8	10.4	10.5	10.3	10.6	10.5	10.1	9.5	14.5	15.3	*
Hearing ⁴												
Not impaired	69.0	83.6	67.0	77.6	70.5	59.0	67.9	69.6	69.2	68.1	67.2	66.6
Impaired ³	18.9	*4.8	20.7	9.7	16.8	29.4	20.4	17.9	19.4	15.3	14.7	*
Partially impaired	13.2	*3.0	14.5	6.3	12.5	20.1	14.8	12.2	13.6	11.2	10.5	*
Severely impaired	4.1	*	4.5	*	2.5	7.4	3.9	4.2	4.1	*	*	*
Completely lost	*	*	*	–	*	*	*	*	*	–	–	*
Impairment level unknown	1.4	*	1.5	*	*0.5	*1.5	*1.5	*1.3	1.5	*	*	*
Unknown or unable to determine	12.2	11.6	12.2	12.7	12.7	11.6	11.6	12.5	11.4	16.6	18.0	*
Walking ⁵												
Received help	37.3	29.5	38.3	38.2	40.0	36.8	36.0	38.1	38.7	25.5	22.5	*47.2
Received no help	17.5	31.0	15.7	22.4	16.0	12.5	19.2	16.4	17.8	16.4	16.1	*
Continence												
Difficulty controlling bowels ⁶	1.7	*	1.7	*	*1.5	*1.7	2.1	*1.4	1.6	*	*	*
Difficulty controlling bladder ⁷	8.3	*4.9	8.7	*6.7	8.0	10.3	6.5	9.4	8.5	*7.3	*7.5	*
Difficulty controlling both bowels and bladder ^{6,7}	32.5	20.1	34.1	22.0	32.7	40.9	30.4	33.8	31.2	42.5	46.7	*27.4
Has ostomy, indwelling catheter or similar device	18.0	19.0	17.8	19.1	18.5	16.7	21.0	16.1	16.9	24.8	26.0	*
Number of dependencies in activities of daily living ⁸												
Receives no help	8.7	19.2	7.4	*9.6	9.3	4.5	10.3	7.7	9.1	5.0	*5.3	*
Receives help with 1 ADL	5.1	5.9	5.0	6.2	5.4	4.1	5.1	5.1	5.3	3.9	*	*
Receives help with 2 ADLs	12.4	18.1	11.6	13.4	12.5	9.9	13.4	11.7	12.1	13.7	12.2	*
Receives help with 3 ADLs	33.4	29.5	33.9	34.6	33.3	34.1	33.5	33.3	32.7	40.0	41.7	*19.4
Receives help with 4 ADLs	30.5	20.7	31.8	28.8	30.8	34.0	27.7	32.2	30.5	30.0	30.3	*34.0
Receives help with 5 ADLs	10.0	*6.7	10.4	7.4	8.7	13.4	9.9	10.0	10.3	7.4	*7.7	*
Receives help with ADLs ^{8,9}												
Percent												
Bathing	88.2	78.7	89.5	87.5	86.5	93.2	85.8	89.7	87.9	91.9	91.4	81.0
Dressing	82.5	71.0	84.0	79.6	81.1	88.8	80.7	83.7	81.8	87.5	87.6	81.0
Eating	48.2	33.9	50.1	39.5	47.5	57.3	48.3	48.2	46.4	60.6	65.5	50.4
Transfer	31.9	22.6	33.2	30.8	32.6	34.7	29.9	33.2	33.1	23.5	21.9	*34.0
Using toilet room	50.8	40.4	52.1	51.5	49.2	55.2	48.3	52.3	51.6	44.9	45.4	48.0

See footnotes at end of table.

Table 45. Percent distribution of nursing home discharges by selected functional status and percent of activities of daily living and instrumental activities of daily living, according to age, sex, and race: United States, October 1998–September 1999—Con.

Functional status	All discharges	Age at discharge					Sex		Race			
		Under 65 years	65 years and over			Male	Female	White	Black and other ¹	Black	Unknown	
			Total	65–74 years	75–84 years							85 years and over
							Percent					
Receives help with IADLs ^{8,9}												
Care of personal possessions	56.8	45.3	58.3	48.5	57.1	63.9	55.6	57.6	56.2	63.4	65.1	*42.9
Managing money	51.2	41.2	52.5	44.2	50.7	57.9	48.9	52.6	50.3	59.5	61.2	*36.6
Securing personal items such as (newspaper, toilet articles, snack food)	58.5	46.3	60.1	51.0	59.7	64.5	57.8	58.9	58.5	60.8	62.6	*42.9
Using the telephone	47.1	34.3	48.8	39.7	48.7	52.9	46.5	47.5	46.5	52.5	55.0	*39.1

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

²Includes status when using eyeglasses or contact lenses.

³Includes residents for whom the severity of impairment is unknown.

⁴Includes status when using a hearing aid if applicable.

⁵Excludes unknown.

⁶Excludes residents who had a colostomy.

⁷Excludes residents who had an indwelling catheter or ostomy.

⁸ADL is activities of daily living and IADL is instrumental activities of daily living.

⁹Numbers do not add to totals because a resident may be included in more than one category.

NOTE: Percents are based on the unrounded numbers.

Table 46. Number of nursing home discharges by services received during the billing period that included the date of discharge and age, sex, and race: United States, October 1998–September 1999

Services received ¹	Age at discharge											
	All discharges	Under 65 years	65 years and over				Sex		Race			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown
Total	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	49,400
Dental care	338,800	45,300	293,500	49,900	118,100	125,500	121,800	217,000	278,700	51,800	40,600	*
Equipment or devices	1,470,600	155,700	1,315,000	232,300	530,800	551,900	535,700	934,900	1,272,000	171,700	135,300	27,000
Hospice services	138,800	*12,700	126,100	*18,600	40,700	66,900	51,900	87,000	118,400	*17,000	*14,500	*
Medical services	2,309,100	264,600	2,044,500	387,000	807,900	849,700	884,800	1,424,400	1,984,600	282,800	223,600	41,800
Mental health services	335,500	70,400	265,000	58,800	106,700	99,500	141,800	193,600	286,900	44,900	37,500	*
Nursing services	2,448,300	285,200	2,163,100	405,100	855,100	902,900	941,200	1,507,100	2,103,500	298,000	238,300	46,800
Nutritional services	1,916,700	232,100	1,684,600	330,800	665,900	687,800	748,300	1,168,400	1,622,500	254,700	202,200	39,600
Occupational therapy	922,000	94,300	827,700	182,900	355,800	289,000	365,500	556,500	819,500	90,200	65,900	*12,400
Personal care	2,222,400	241,100	1,981,300	375,100	773,200	833,000	843,700	1,378,700	1,907,800	272,700	215,200	41,900
Physical therapy	1,217,100	126,300	1,090,700	240,400	455,700	394,700	479,200	737,800	1,059,900	133,900	104,500	*23,300
Prescribed or nonprescribed medicines	2,335,100	269,700	2,065,400	392,900	812,600	860,000	900,200	1,434,900	2,004,500	287,700	229,200	43,000
Social services	1,865,500	227,100	1,638,400	325,400	661,100	651,900	723,600	1,141,900	1,589,600	245,800	192,400	30,200
Speech or hearing therapy	218,400	19,000	199,400	40,300	83,300	75,800	208,500	295,900	186,900	27,800	16,200	*
Transportation	504,400	80,900	423,400	86,500	179,500	157,400	8,500	5,200	423,800	75,500	59,200	*
Other	129,500	*18,100	111,400	*20,400	45,000	46,100	56,900	72,600	106,600	*20,100	*15,100	*

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Numbers do not add to totals because a resident may be included in more than one category.

²A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

Table 48. Number of nursing home discharges by selected resident characteristics and primary expected source of payment at discharge: United States, October 1998–September 1999

Resident characteristic	Primary expected source of payment at discharge				
	All sources	Private sources ¹	Medicare	Medicaid	All other ²
All discharges	2,522,300	616,300	1,136,700	667,200	102,200
Age at discharge					
Under 65 years	293,400	90,500	47,200	125,100	30,600
65 years and over	2,228,900	525,700	1,089,500	542,100	71,600
65–74 years	414,600	92,500	221,800	87,200	*13,100
75–84 years	885,800	197,700	456,800	200,900	30,500
85 years and over	928,500	235,500	411,000	254,100	28,000
Sex					
Male	968,500	225,200	446,700	243,600	52,900
Female	1,553,800	391,000	690,000	423,600	49,200
Race					
White only	2,163,500	566,700	992,100	519,400	85,300
Black and other ³	309,400	35,000	124,000	136,100	*14,300
Black only	247,500	*27,900	102,100	107,200	*10,400
Unknown	49,400	*	*20,700	11,700	*
Hispanic or Latino origin					
Hispanic	94,700	*	37,100	36,100	*
Non-Hispanic	2,254,900	562,100	1,010,800	596,400	85,600
Unknown	172,700	39,100	88,800	34,700	*
Current marital status					
Married	704,100	201,900	349,300	124,600	28,300
Widowed	1,213,700	288,900	565,800	324,700	34,200
Divorced or separated	223,900	38,800	95,900	76,700	*12,500
Single or never married	323,600	68,800	108,600	124,600	21,600
Unknown	57,100	*17,700	*17,200	16,600	*
Residence before admission					
Private or semiprivate residence	556,500	153,800	203,000	164,500	35,200
Retirement home	24,200	*10,600	10,100	*	*
Board and care or residential and care facility	77,200	26,300	22,700	25,300	*
Nursing home	136,000	38,000	29,700	64,700	*
Hospital	1,650,100	373,100	842,300	380,500	54,200
Other and unknown ⁴	78,400	*14,400	28,900	29,800	*
Living arrangement before admission					
Alone	191,300	67,200	66,400	50,400	*
With family members	343,500	93,500	132,300	97,800	*20,000
With nonfamily members	64,500	*15,400	*20,300	24,500	*
Other or unknown	1,923,100	440,200	917,800	494,500	70,600

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

⁴Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Numbers may not add to totals because of rounding.

Table 49. Percent distribution of nursing home discharges by selected resident demographic characteristics, according to primary expected source of payment at discharge: United States, October 1998–September 1999

Demographic characteristic	Primary expected source of payment at discharge				
	All sources	Private sources ¹	Medicare	Medicaid	All other ²
All discharges	100.0	100.0	100.0	100.0	100.0
Age at discharge					
Under 65 years	11.6	14.7	4.2	18.8	29.9
65 years and over	88.4	85.3	95.9	81.3	70.1
65–74 years	16.5	15.0	19.5	13.1	*12.8
75–84 years	35.1	32.1	40.2	30.1	29.8
85 years and over	36.8	38.2	36.2	38.1	27.4
Sex					
Male	38.4	36.6	39.3	36.5	51.8
Female	61.6	63.5	60.7	63.5	48.2
Race					
White only	85.8	92.0	87.3	77.9	83.5
Black and other ³	12.3	5.7	10.9	20.4	*14.0
Black only	9.8	*4.5	9.0	16.1	*10.2
Unknown	2.0	*	*1.8	1.8	*
Hispanic or Latino origin					
Hispanic	3.8	*	3.3	5.4	*
Non-Hispanic	89.4	91.2	88.9	89.4	83.8
Unknown	6.9	6.3	7.8	5.2	*
Current marital status					
Married	27.9	32.8	30.7	18.7	27.7
Widowed	48.1	46.9	49.8	48.7	33.5
Divorced or separated	8.9	6.3	8.4	11.5	*12.3
Single or never married	12.8	11.2	9.6	18.7	21.1
Unknown	2.3	*2.9	*1.5	2.5	*
Residence before admission					
Private or semiprivate residence	22.1	25.0	24.6	17.9	34.5
Retirement home	1.0	*1.7	0.9	*	*
Board and care or residential and care facility	3.1	4.3	2.0	3.8	*
Nursing home	5.4	6.2	2.6	9.7	*
Hospital	65.4	60.5	74.1	57.0	53.1
Other and unknown ⁴	3.1	*2.3	2.5	4.5	*
Living arrangement before admission					
Alone	7.6	10.9	5.8	7.6	*
With family members	13.6	15.2	11.6	14.7	*19.6
With nonfamily members	2.6	*2.5	*1.8	3.7	*
Other or unknown	76.2	71.4	80.7	74.1	69.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

³A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

⁴Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Percents are based on the unrounded numbers.

Table 50. Number and percent distribution of nursing home discharges by length of stay and average length of stay, according to selected demographic characteristics: United States, October 1998–September 1999

Demographic characteristic	All discharges	Total	Length of stay ¹						Average length of stay in days
			Less than 3 months	3 months to less than 6 months	6 months to less than 12 months	1 year to less than 3 years	3 years to less than 5 years	5 years or more	
			Number	Percent distribution					
All discharges	2,522,300	100.0	68.3	8.0	6.9	9.3	3.7	3.7	271.5
Age at discharge									
Under 65 years	293,400	100.0	71.8	9.2	7.3	7.6	*	*	193.1
65 years and over	2,228,900	100.0	67.9	7.9	*6.8	9.6	*	*3.9	281.9
65–74 years	414,600	100.0	79.2	7.3	3.8	6.4	1.3	2.0	146.7
75–84 years	885,800	100.0	71.6	8.6	6.7	7.7	2.9	2.4	216.4
85 years and over	928,500	100.0	59.2	7.4	8.2	12.8	6.2	6.2	404.7
Sex									
Male	968,500	100.0	71.4	8.6	6.4	9.0	2.5	2.2	196.9
Female	1,553,800	100.0	66.4	7.7	7.2	9.6	4.5	4.7	318.0
Race									
White only	2,163,500	100.0	68.8	7.5	6.4	9.4	4.1	3.8	276.0
Black and other ²	309,400	100.0	64.9	10.9	10.1	8.8	*	*3.4	249.4
Black only	247,500	100.0	65.9	9.5	10.1	9.0	*	*3.2	254.2
Unknown	49,400	100.0	68.9	*	*	*	*	*	214.7
Hispanic or Latino origin									
Hispanic	94,700	100.0	68.1	*11.2	*	*	*	*	186.2
Non-Hispanic	2,254,900	100.0	67.7	8.1	7.1	9.5	3.9	3.8	278.9
Unknown	172,700	100.0	76.6	*5.8	*4.4	*7.4	*	*	221.9
Current marital status									
Married	704,100	100.0	77.7	7.7	5.0	5.6	2.2	*1.8	156.7
Widowed	1,213,700	100.0	64.4	7.7	7.5	10.7	5.1	4.6	325.3
Divorced or separated	223,900	100.0	68.2	8.9	8.2	8.6	*	*3.7	242.2
Single or never married	323,600	100.0	64.0	8.5	7.0	12.8	*3.3	4.4	333.4
Unknown	57,100	100.0	62.5	*	*	*	*	*4.6	308.3
Residence before admission									
Private or semiprivate residence	556,500	100.0	64.3	8.1	6.5	11.0	5.0	5.2	357.2
Retirement home	24,200	100.0	*65.9	*	*	*	*	*	262.7
Board and care or residential care facility	77,200	100.0	55.0	*	*	*17.9	*	*	439.2
Nursing home	136,000	100.0	43.6	*11.1	10.4	20.2	*6.5	*8.2	526.2
Hospital	1,650,100	100.0	73.3	7.8	6.3	7.4	2.9	2.4	197.4
Other and unknown ³	78,400	100.0	49.0	*	*11.2	*13.3	*	*9.6	620.0
Living arrangement before admission									
Alone	191,300	100.0	62.6	*7.1	*7.0	13.4	*4.5	*5.4	367.5
With family members	343,500	100.0	66.3	8.1	6.2	9.1	5.1	5.2	346.8
Only with nonfamily members	64,500	100.0	59.5	*	*	*14.7	*	*	349.3
Unknown	1,923,100	100.0	69.6	8.1	6.9	8.8	3.4	3.3	245.9

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.

²A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

³Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 51. Number and percent distribution of nursing home discharges by length of stay and average length of stay, according to primary source of payment and reason for discharge: United States, October 1998–September 1999

Demographic characteristic	Length of stay ¹								
	All discharges	Total	Less than 3 months	3 months to less than 6 months	6 months to less than 12 months	1 year to less than 3 years	3 years to less than 5 years	5 years or more	Average length of stay in days
	Number								
All discharges	2,522,300	100.0	68.3	8.0	6.9	9.3	3.7	3.7	271.5
Source of payment									
Private insurance ²	616,300	100.0	70.6	8.4	6.7	8.6	3.7	*2.0	202.3
Medicare	1,136,700	100.0	85.9	5.3	3.3	3.4	*1.0	*1.2	107.9
Medicaid	667,200	100.0	35.8	12.5	13.3	20.5	8.6	9.5	609.4
All other sources ³	102,200	100.0	71.8	*	*	*7.9	*	*	303.3
Reason for discharge									
Recovered	326,900	100.0	93.3	*4.0	*	*	–	*	36.4
Stabilized	506,600	100.0	91.7	4.3	*1.7	*	*	*	61.5
Deceased	614,200	100.0	46.6	9.8	9.8	15.9	8.9	9.1	568.1
Admitted to hospital	720,500	100.0	57.6	10.5	10.3	13.7	4.3	3.7	308.1
Admitted to nursing home	150,800	100.0	62.2	*9.7	*8.5	12.9	*	*	301.7
All other	203,300	100.0	78.2	*8.7	*6.1	*5.7	*	*	125.0

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Excludes unknown.²Includes private insurance, own income, family support, Social Security benefits, and retirement funds.³Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other Veterans Administration compensation, payment source not yet determined, and other and unknown sources.

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 52. Number of elderly nursing home discharges by selected demographic characteristics and reason for discharge: United States, October 1998–September 1999

Demographic characteristic	All discharges	Reason for discharge					
		Recovered	Stabilized	Deceased	Admitted to hospital	Admitted to nursing home	All other
All residents	2,522,300	326,900	506,600	614,200	720,500	150,800	203,300
Age							
Under 65 years	293,400	38,800	77,600	27,700	98,900	*16,000	34,400
65 years and over	2,228,900	288,100	429,000	586,500	621,600	34,700	168,900
65–74 years	414,600	70,500	92,900	67,900	114,600	29,900	38,900
75–84 years	885,800	132,300	197,400	193,100	249,100	54,600	59,300
85 years and over	928,500	85,400	138,700	325,500	258,000	50,200	70,800
Sex							
Male	968,500	125,200	196,500	232,000	266,800	59,200	88,900
Female	1,553,800	201,700	310,100	382,300	453,700	91,600	114,400
Race							
White only	2,163,500	298,900	447,500	544,900	579,900	131,700	160,700
Black and other ¹	309,400	*22,900	44,900	61,500	126,300	*16,300	37,400
Black only	247,500	*17,400	37,300	47,400	109,500	*13,400	*22,700
Unknown	49,400	*	*	*	*14,300	*	*
Hispanic or Latino origin							
Hispanic	94,700	*	*18,600	*12,200	37,300	*	*
Non-Hispanic	2,254,900	302,200	443,900	553,200	640,200	133,600	181,900
Unknown	172,700	*	44,100	48,900	43,100	*	*15,400
Current marital status							
Married	704,100	105,000	174,300	151,300	174,300	43,800	55,500
Widowed	1,213,700	135,900	224,600	346,000	355,600	66,200	85,200
Divorced or separated	223,900	*30,200	48,600	42,200	62,300	*17,400	23,200
Single or never married	323,600	52,800	47,000	61,300	109,900	*20,600	32,000
Unknown	57,100	*	*	*13,400	*18,500	*	*
Residence before admission							
Private or semiprivate residence	556,500	88,500	95,700	141,300	137,300	37,700	56,000
Retirement home	24,200	*	*	*	*	*	*
Board and care or residential care facility	77,200	*	*	33,200	*16,500	*	*
Nursing home	136,000	*	*	55,100	45,900	*15,200	*
Hospital	1,650,100	212,800	382,200	356,600	496,400	82,300	119,700
Other and unknown ²	78,400	*	*	20,700	20,900	*	*10,900
Living arrangement before admission							
Alone	191,300	39,000	31,000	52,700	43,300	*12,200	*13,100
With family members	343,500	49,200	60,100	85,300	81,200	26,600	41,100
Only with nonfamily members	64,500	*	*	24,600	*13,700	*	*
Other or unknown	1,923,100	231,000	408,900	451,700	582,200	106,700	142,500

* Figure does not meet standard of reliability or precision, because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or the sample size is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

²Includes rehabilitation facilities, mental health facilities, and other inpatient facilities.

NOTE: Numbers may not add to total because of rounding.

Table 53. Percent distribution of elderly nursing home discharges by selected demographic characteristics, according to reason for discharge: United States, October 1998–September 1999

Demographic characteristic	All discharges	Reason for discharge					
		Recovered	Stabilized	Deceased	Admitted to hospital	Admitted to nursing home	All other
All residents	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Age							
Under 65 years	11.6	11.9	15.3	4.5	13.7	*10.6	16.9
65 years and over	88.4	88.1	84.7	95.5	86.3	89.4	83.1
65–74 years	16.4	21.6	18.3	11.1	15.9	19.8	19.1
75–84 years	35.1	40.5	39.0	31.4	34.6	36.2	29.2
85 years and over	36.8	26.1	27.4	53.0	35.8	33.3	34.8
Sex							
Male	38.4	38.3	38.8	37.8	37.0	39.2	43.7
Female	61.6	61.7	61.2	62.2	63.0	60.8	56.3
Race							
White only	85.8	91.4	88.3	88.7	80.5	87.3	79.0
Black and other ¹	12.3	*7.0	8.9	10.0	17.5	*10.8	18.4
Black only	9.8	*5.3	7.4	7.7	15.2	*8.9	*11.1
Unknown	2.0	*	*	*	*2.0	*	*
Hispanic or Latino origin							
Hispanic	3.8	*	*3.7	*2.0	5.2	*	*
Non-Hispanic	89.4	92.4	87.6	90.1	88.9	88.6	89.5
Unknown	6.9	*	8.7	8.0	6.0	*	*7.6
Current marital status							
Married	27.9	32.1	34.4	24.6	24.2	29.0	27.3
Widowed	48.1	41.6	44.3	56.3	49.4	43.9	41.9
Divorced or separated	8.8	*9.3	9.6	6.9	8.6	*11.6	11.4
Single or never married	12.8	16.2	9.3	10.0	15.3	*13.7	15.8
Unknown	2.3	*	*	*2.2	*2.6	*	*
Residence before admission							
Private or semiprivate residence	22.1	27.1	18.9	23.0	19.1	25.0	27.6
Retirement home	1.0	*	*	*	*	*	*
Board and care or residential care facility	3.1	*	*	5.4	*2.3	*	*
Nursing home	5.4	*	*	9.0	6.4	10.1	*
Hospital	65.4	65.1	75.4	58.1	68.9	54.6	58.9
Other and unknown ²	2.7	*	*	3.4	2.9	*	*5.3
Living arrangement before admission							
Alone	7.6	11.9	6.1	8.6	6.0	*8.1	*6.4
With family members	13.6	15.0	11.9	13.9	11.3	17.6	20.2
Only with non-family members	2.6	*	*	4.0	*1.9	*	*
Other or unknown	76.2	70.7	80.7	73.5	80.8	70.8	70.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of patients with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

²Includes rehabilitation facilities, and other inpatient facilities.

NOTE: Percents are based on the unrounded numbers.

Table 54. Number of nursing home discharges by region, primary expected source of payment, and length of stay by reason for discharge: United States, October 1998–September 1999

Demographic characteristic	All discharges	Reason for discharge					
		Recovered	Stabilized	Deceased	Admitted to hospital	Admitted to nursing home	All other
All discharges	2,522,300	326,900	506,600	614,200	720,500	150,800	203,300
Region							
Northeast	524,200	82,900	69,700	134,100	159,300	22,800	55,500
Midwest	709,700	70,700	155,400	186,700	210,000	43,300	43,800
South	714,800	77,200	135,500	178,900	235,900	47,300	40,100
West	573,600	96,200	146,100	114,600	115,300	37,400	64,000
Source of expected payment							
Private sources ¹	616,300	97,800	131,700	149,300	138,200	39,300	59,900
Medicare	1,136,700	194,100	306,500	209,300	267,800	65,300	93,800
Medicaid	667,200	29,800	41,400	228,500	286,100	41,800	39,600
All other ²	102,200	*	*27,000	27,200	28,300	*	*10,000
Length of stay							
Less than 3 months	1,723,200	305,100	464,400	285,900	414,900	93,800	159,000
3 months to less than 6 months	202,200	*13,000	21,600	60,000	75,300	*14,600	*17,800
6 months to less than 12 months	173,100	*	*8,700	60,000	73,900	*12,900	*12,500
1 year to less than 3 years	235,500	*	*	97,500	98,400	19,500	*11,500
3 years to less than 5 years	94,300	–	*	54,800	30,900	*	*
5 years or more	93,900	*	*	56,100	27,000	*	*

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

NOTE: Numbers may not add to totals because of rounding.

Table 55. Percent distribution of nursing home discharges by region, primary expected source of payment, and length of stay, according to reason for discharge: United States, October 1998–September 1999

Demographic characteristic	All discharges	Reason for discharge					
		Recovered	Stabilized	Deceased	Admitted to hospital	Admitted to nursing home	All other
All discharges	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Region							
Northeast	20.8	25.4	13.8	21.8	22.1	15.1	27.3
Midwest	28.1	21.6	30.7	30.4	29.2	28.7	21.5
South	28.3	23.6	26.7	29.1	32.7	31.4	19.7
West	22.7	29.4	28.8	18.7	16.0	24.8	31.5
Expected source of payment							
Private sources ¹	24.4	29.9	26.0	24.3	19.2	26.1	29.5
Medicare	45.1	59.4	60.5	34.1	37.2	43.3	46.1
Medicaid	26.5	9.1	8.2	37.2	39.7	27.7	19.5
All other ²	4.1	*	*5.3	4.4	3.9	*	*4.9
Length of stay							
Less than 3 months	68.3	93.3	91.7	46.6	57.6	62.2	78.2
3 months to less than 6 months	8.0	*4.0	4.3	9.8	10.5	*9.7	*8.7
6 months to less than 12 months	6.9	*	*1.7	9.8	10.3	*8.5	*6.1
1 year to less than 3 years	9.3	*	*	15.9	13.7	12.9	*5.7
3 years to less than 5 years	3.7	–	*	8.9	4.3	*	*
5 years or more	3.7	*	*	9.1	3.7	*	*

– Quantity zero.

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

NOTE: Percents are based on the unrounded number.

Table 56. Number and percent distribution of nursing home discharges by primary diagnosis at admission and at discharge: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	At admission		At discharge	
	Number of discharges	Percent distribution	Number of discharges	Percent distribution
Total	2,522,300	100.0	2,522,300	100.0
Infectious and parasitic diseases 001–139	33,800	1.3	34,400	1.4
Neoplasms 140–239	152,700	6.1	154,900	6.1
Malignant neoplasms 140–208,230–234	146,700	5.8	148,900	5.9
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	156,900	6.2	164,400	6.5
Diabetes mellitus 250	103,800	4.1	100,300	4.0
Diseases of the blood and blood-forming organs 280–289	*16,100	*0.6	*17,300	*0.7
Anemias 280–285	*10,500	*0.4	*12,600	*0.5
Mental disorders 290–319	201,200	8.0	196,300	7.8
Senile dementia or organic brain syndrome 290, 310	39,300	1.6	37,100	1.5
Mental retardation 317–319	*	*	*	*
Other mental disorders 291–309, 311–316	157,200	6.2	155,300	6.2
Diseases of the nervous system and sense organs 320–389	159,600	6.3	137,100	5.4
Alzheimer's disease 331.0	78,200	3.1	67,800	2.7
Parkinson's disease 332	26,800	1.1	21,800	0.9
Multiple sclerosis 340	*14,900	*0.6	*14,900	*0.6
Paralytic syndromes 342–344	*10,300	*0.4	*7,800	*0.3
Other diseases of the nervous system and sense organs 320–330,331.3–331.9,333–337.341,345–389	29,400	1.2	24,800	1.0
Diseases of the circulatory system 390–459	552,000	21.9	604,200	24.0
Essential hypertension 401	45,800	1.8	50,600	2.0
Heart disease 391–392.0,393–398,402,404,410–416,420–429	274,500	10.9	327,100	13.0
Diseases of the respiratory system 460–519	274,900	10.9	286,300	11.4
Pneumonia, all forms 480–486	114,500	4.5	121,000	4.8
Other diseases of the respiratory system 490–496	160,400	6.4	165,400	6.6
Diseases of the digestive system 520–579	90,200	3.6	94,900	3.8
Diseases of the genitourinary system 580–629	76,200	3.0	83,000	3.3
Urinary tract infection 580–583,590, 595,597,599.0	37,000	1.5	36,100	1.4
Diseases of the skin and subcutaneous tissue 680–709	43,900	1.7	48,200	1.9
Decubitus ulcer 707.0	*	*	*	*
Other chronic ulcer of the skin 707.1–707.9	*	*	*	*
Diseases of the musculoskeletal system and connective tissue 710–739	133,800	5.3	130,200	5.2
Rheumatoid arthritis, except spine 714	*	*	*	*
Osteoarthritis and allied disorders, except spine 715	46,900	1.9	47,700	1.9
Other arthropathies and related disorders 710–714, 716–719	*18,200	*0.7	*17,700	*0.7
Osteoporosis 733.0	*	*	*	*
Congenital anomalies 740–759	*	*	*	*
Symptoms, signs, and ill-defined conditions 780–799	137,900	5.5	147,600	5.9
Senility without mention of psychosis 797	*	*	*	*
Injury and poisoning 800–999	291,800	11.6	237,800	9.4
Fracture of neck of femur 820	139,800	5.5	111,600	4.4
Other fractures 800–819,821–829	122,000	4.8	99,900	4.0
Supplementary classification V01–V82	184,500	7.3	167,600	6.6
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	110,800	4.4	104,300	4.1

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 57. Number and percent distribution of all-listed diagnoses for discharges at admission and at discharge: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	At admission		At discharge	
	Number of discharges	Percent distribution	Number of discharges	Percent distribution
Total	10,176,100	100.0	9,654,700	100.0
Infectious and parasitic diseases 001–139	111,400	1.1	108,700	1.1
Neoplasms 140–239	340,900	3.3	335,500	3.5
Malignant neoplasms 140–208,230–234	318,200	3.1	314,700	3.3
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	941,200	9.2	875,300	9.1
Diabetes mellitus 250	494,100	4.9	459,000	4.8
Diseases of the blood and blood-forming organs 280–289	244,300	2.4	233,100	2.4
Anemias 280–285	217,000	2.1	208,100	2.2
Mental disorders 290–319	944,600	9.3	922,300	9.6
Senile dementia or organic brain syndrome 290, 310	118,200	1.2	108,900	1.1
Mental retardation 317–319	15,700	0.2	16,100	0.2
Other mental disorders 291–309, 311–316	810,700	8.0	797,300	8.3
Diseases of the nervous system and sense organs 320–389	597,900	5.9	552,900	5.7
Alzheimer’s disease 331.0	171,700	1.7	163,500	1.7
Parkinson’s disease 332	100,200	0.2	88,100	0.9
Multiple sclerosis 340	*22,500	*0.3	*22,400	*0.2
Paralytic syndromes 342–344	35,000	0.3	33,600	0.3
Other diseases of the nervous system and sense organs 320–330,331.3–331.9,333–337,341,345–389	268,500	2.6	245,400	2.5
Diseases of the circulatory system 390–459	2,653,800	26.1	2,570,000	26.6
Essential hypertension 401	690,500	6.8	636,100	6.6
Heart disease 391–392,0,393–398,402,404,410–416,420–429	1,258,200	12.4	1,256,100	13.0
Diseases of the respiratory system 460–519	789,200	7.8	775,500	8.0
Pneumonia, all forms 480–486	218,700	2.1	218,000	2.3
Other diseases of the respiratory system 490–496	570,500	5.6	557,500	5.8
Diseases of the digestive system 520–579	450,200	4.4	445,900	4.6
Diseases of the genitourinary system 580–629	437,200	4.3	409,500	4.2
Urinary tract infection 580–583,590, 595,597,599.0	182,200	1.8	157,700	1.6
Diseases of the skin and subcutaneous tissue 680–709	158,200	1.6	143,500	1.5
Decubitus ulcer 707.0	46,900	0.5	34,500	0.4
Other chronic ulcer of the skin 707.1–707.9	31,200	0.3	29,500	0.3
Diseases of the musculoskeletal system and connective tissue 710–739	672,100	6.6	629,900	6.5
Rheumatoid arthritis, except spine 714	26,400	0.3	20,200	0.2
Osteoarthritis and allied disorders, except spine 715	232,400	2.3	218,800	2.3
Other arthropathies and related disorders 710–714, 716–719	129,900	1.3	115,700	1.2
Osteoporosis 733.0	104,200	1.0	104,500	1.1
Congenital anomalies 740–759	*12,600	*0.1	*12,400	*0.1
Symptoms, signs, and ill-defined conditions 780–799	652,600	6.4	624,300	6.5
Senility without mention of psychosis 797	*	*	*	*
Injury and poisoning 800–999	421,700	4.1	355,400	3.7
Fracture of neck of femur 820	170,100	1.7	145,800	1.5
Other fractures 800–819,821–829	185,600	1.8	149,400	1.5
Supplementary classification V01–V82	748,600	7.4	660,600	6.8
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	429,300	4.2	379,400	3.9

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

NOTES: Numbers may not add to totals because of rounding. Percents are based on the unrounded numbers.

Table 58. Number of nursing home discharges by primary diagnosis at admission and age, sex, race, and average length of stay: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	All discharges	Age at discharge						Sex		Race ²			Average length of stay
		Under 65 years	65 years and over			Male	Female	White	Black and other ³				
			Total	65–74 years	75–84 years				85 years and over	Black	Black		
Total	2,522,300	293,400	2,228,900	414,600	885,800	928,500	968,500	1,553,800	2,163,500	309,400	247,500	271.5	
Infectious and parasitic diseases 001–139	33,800	*	24,800	*	*	*	*16,500	*17,300	24,700	*	*	158.4	
Neoplasms 140–239	152,700	*19,000	133,600	44,100	42,200	47,300	67,500	85,100	126,300	*21,700	*17,500	133.0	
Malignant neoplasms 140–208,230–234	146,700	*18,000	128,700	41,700	41,300	45,600	66,300	80,400	121,300	*20,800	*16,600	135.7	
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	156,900	26,600	130,300	26,100	57,500	46,700	60,100	96,800	122,100	31,500	26,500	327.9	
Diabetes mellitus 250	103,800	*16,800	87,100	23,700	35,900	27,500	44,900	58,900	76,800	24,300	19,700	357.2	
Diseases of the blood and blood-forming organs 280–289	*16,100	*	*15,700	*	*	*	*	*9,400	*15,500	*	*	*358.5	
Mental disorders 290–319	201,200	33,000	168,100	23,000	64,100	81,000	82,500	118,600	176,200	23,300	18,400	614.0	
Senile dementia or organic brain syndrome 290, 310	39,300	*	38,400	*	*11,700	24,300	*13,100	26,100	33,700	*	*	759.6	
Other mental disorders 291–309, 311–316	157,200	30,100	127,100	20,200	50,200	56,600	66,300	90,900	138,200	17,200	14,300	570.3	
Diseases of the nervous system and sense organs 320–389	159,600	28,900	130,700	21,000	51,300	58,400	62,800	96,800	136,900	20,200	16,700	629.3	
Alzheimer’s disease 331.0	78,200	*	75,900	*10,800	*26,400	38,700	27,100	51,100	67,900	*9,600	*	619.6	
Diseases of the circulatory system 390–459	552,000	33,100	518,900	76,200	210,800	231,800	214,600	337,400	463,900	78,300	62,300	300.3	
Essential hypertension 401	45,800	*	42,700	*	*13,100	25,600	*11,200	34,700	36,900	*	*	494.1	
Heart disease 391–392.0,393–398,402,404,410–416,420–429	274,500	*10,900	263,500	24,900	115,500	123,100	105,900	168,600	236,800	32,700	28,900	248.6	
Diseases of the respiratory system 460–519	274,900	*24,000	250,900	49,000	105,800	96,100	133,200	141,700	244,800	23,500	*16,800	161.9	
Pneumonia, all forms 480–486	114,500	*	108,200	*15,900	39,700	52,500	53,000	61,500	103,500	*	*	124.2	
Other diseases of the respiratory system 490–496	160,400	*17,700	142,700	33,100	66,100	43,500	80,200	80,200	141,300	*16,500	*12,400	188.8	
Diseases of the digestive system 520–579	90,200	*11,600	78,600	*12,100	33,900	32,700	42,100	48,100	78,700	*11,300	*	193.5	
Diseases of the genitourinary system 580–629	76,200	*	69,000	*	35,100	26,000	34,400	41,900	61,800	*12,800	*11,800	176.1	
Urinary tract infection 580–583,590, 595,597,599.0	37,000	*	34,600	*	*13,900	*17,200	*14,400	*22,600	31,400	*	*	206.2	
Diseases of the skin and subcutaneous tissue 680–709	43,900	*	29,400	*	*	*11,200	*11,100	32,800	38,000	*	*	78.3	
Diseases of the musculoskeletal system and connective tissue 710–739	133,800	16,800	117,100	23,500	33,500	60,000	34,800	99,100	116,200	*	*	286.4	
Osteoarthritis and allied disorders, except spine 715	46,900	*	37,500	*	*	13,000	*	34,500	40,000	*	*	*188.5	
Symptoms, signs, and ill-defined conditions 780–799	137,900	*12,700	125,200	*21,600	49,700	54,000	43,400	94,500	120,500	*15,500	*12,200	220.7	
Injury and poisoning 800–999	291,800	*23,300	268,400	45,700	104,400	118,300	88,500	203,300	271,600	*	*	116.6	
Fracture of neck of femur 820	139,800	*	136,400	*	56,700	60,100	39,300	100,400	132,600	*	*	157.6	
Other fractures 800–819,821–829	122,000	*14,000	108,000	*	40,200	51,800	*29,800	92,200	111,000	*	*	72.0	
Supplementary classification V01–V82	184,500	30,800	153,700	42,500	70,000	41,200	65,400	119,100	152,500	*27,100	*19,800	129.3	
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	110,800	*17,500	93,300	*22,700	46,500	24,000	35,700	75,100	102,500	*	*	90.1	

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification (4)*.

²Excludes unknown.

³A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

NOTE: Numbers may not add to totals because of rounding.

Table 59. Percent distribution of nursing home discharges by primary diagnosis at admission, according to age, sex, and race: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	Age at discharge										
	All discharges	Under 65 years	65 years and over			Sex		Race ²			
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ³	Black
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001–139	1.3	*	1.1	*	*	*	*1.7	*1.1	1.1	*	*
Neoplasms 140–239	6.1	*6.5	6.0	10.7	4.8	5.1	7.0	5.5	5.9	*7.0	*7.1
Malignant neoplasms 140–208,230–234	5.8	*6.1	5.8	10.1	4.7	4.9	6.8	5.2	5.6	*6.7	*6.7
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	6.2	9.1	5.9	6.3	6.5	5.0	6.2	6.2	5.7	10.2	10.7
Diabetes mellitus 250	4.1	*5.7	3.9	5.7	4.1	3.0	4.6	3.8	3.6	7.9	8.0
Diseases of the blood and blood-forming organs 280–289	*0.6	*	*0.7	*	*	*	*	*0.6	*0.7	*	*
Mental disorders 290–319	8.0	11.3	7.5	5.5	7.2	8.7	8.5	7.6	8.1	7.5	7.4
Senile dementia or organic brain syndrome 290, 310	1.6	*	1.7	*	*1.3	2.6	*1.4	1.7	1.6	*	*
Other mental disorders 291–309, 311–316	6.2	10.3	5.7	4.9	5.7	6.1	6.8	5.9	6.4	5.6	5.8
Diseases of the nervous system and sense organs 320–389	6.3	9.9	5.9	5.1	5.8	6.3	6.5	6.2	6.3	6.5	6.7
Alzheimer’s disease 331.0	3.1	*	3.4	*2.6	3.0	4.2	2.8	3.3	3.1	*3.1	*
Diseases of the circulatory system 390–459	21.9	11.3	23.3	18.4	23.8	25.0	22.2	21.7	21.4	25.3	25.2
Essential hypertension 401	1.8	*	1.9	*	*1.5	2.8	*1.2	2.2	1.7	*	*
Heart disease 391–392.0,393–398,402,404,410–416,420–429	10.9	*3.7	11.8	6.0	13.0	13.3	10.9	10.9	11.0	10.6	11.7
Diseases of the respiratory system 460–519	10.9	*8.2	11.3	11.8	11.9	10.4	13.8	9.1	11.3	7.6	*6.8
Pneumonia, all forms 480–486	4.5	*	4.9	*3.8	4.5	5.7	5.5	4.0	4.8	*	*
Other diseases of the respiratory system 490–496	6.4	*6.0	6.4	8.0	7.5	4.7	8.3	5.2	6.5	*5.3	*5.0
Diseases of the digestive system 520–579	3.6	*3.9	3.5	*2.9	3.8	3.5	4.4	3.1	3.6	*3.6	*
Diseases of the genitourinary system 580–629	3.0	*	3.1	*	4.0	2.8	3.6	2.7	2.9	*4.2	*4.8
Urinary tract infection 580–583,590, 595,597,599.0	1.5	*	1.6	*	*1.6	*1.9	*1.5	*1.5	1.5	*	*
Diseases of the skin and subcutaneous tissue 680–709	1.7	*	1.3	*	*	*1.2	*1.2	2.1	1.8	*	*
Diseases of the musculoskeletal system and connective tissue 710–739	5.3	5.7	5.3	5.7	3.8	6.5	3.6	6.4	5.4	*	*
Osteoarthritis and allied disorders, except spine 715	1.9	*	1.7	*	*	1.4	*	2.2	1.9	*	*
Symptoms, signs, and ill-defined conditions 780–799	5.5	*4.3	5.6	*5.2	5.6	5.8	4.5	6.1	5.6	*5.0	*4.9
Injury and poisoning 800–999	11.6	*8.0	12.0	11.0	11.8	12.7	9.1	13.1	12.6	*	*
Fracture of neck of femur 820	5.5	*	6.1	*	6.4	6.5	4.1	6.5	6.1	*	*
Other fractures 800–819,821–829	4.8	*4.8	4.8	*	4.5	5.6	3.1	5.9	5.1	*	*
Supplementary classification V01–V82	7.3	10.5	6.9	10.3	7.9	4.4	6.8	7.7	7.1	*8.8	*8.0
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	4.4	*6.0	4.2	*5.5	5.3	2.6	3.7	4.8	4.7	*	*

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification (4)*.

²Excludes unknown.

³A small number of discharges with more than one race indicated have been classified as “other” and are reported in the “Black and other” race category.

NOTE: Percents are based on the unrounded numbers.

Table 60. Number of discharges by all-listed diagnoses for discharges at admission and age, sex, and race: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	Age at discharge											
	All discharges	Under 65 years	65 years and over			Sex		Race				
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown
Total	10,176,100	1,130,600	9,045,500	1,724,600	3,552,000	3,768,900	3,904,500	6,271,600	8,696,500	1,289,900	1,027,000	196,000
Infectious and parasitic diseases 001–139	111,400	28,400	82,900	*16,000	33,900	33,000	44,400	67,000	83,400	21,700	*16,400	*
Neoplasms 140–239	340,900	34,400	306,500	88,000	112,400	106,100	166,700	174,100	287,100	45,500	34,600	*
Malignant neoplasms 140–208,230–234	318,200	31,100	287,000	82,900	107,100	97,000	157,000	161,100	268,500	41,300	30,500	*
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	941,200	123,000	818,200	181,000	338,800	298,400	329,000	612,300	781,700	138,700	113,900	*21,300
Diabetes mellitus 250	494,100	62,800	431,300	124,100	181,800	125,400	195,400	298,700	391,800	92,300	75,600	*
Diseases of the blood and blood-forming organs 280–289	244,300	27,900	216,300	26,300	81,800	108,300	89,800	154,500	202,600	38,000	32,000	*
Anemias 280–285	217,000	*22,800	194,200	21,300	76,200	96,700	79,300	137,700	178,400	35,900	30,300	*
Mental disorders 290–319	944,600	128,900	815,700	119,800	327,200	368,700	357,100	587,500	822,700	108,700	88,600	*13,100
Senile dementia or organic brain syndrome 290, 310	118,200	*	114,900	*	39,700	65,900	41,300	76,900	101,100	*16,100	*11,600	*
Other mental disorders 291–309, 311–316	810,700	117,100	693,600	107,700	283,600	302,300	307,000	503,700	708,300	90,300	74,600	*12,100
Diseases of the nervous system and sense organs 320–389	597,900	67,800	530,000	88,600	203,200	238,200	233,600	364,300	512,000	71,300	60,900	*14,800
Alzheimer's disease 331.0	171,700	2,900	168,800	16,900	71,300	80,500	56,600	115,100	145,300	25,000	21,400	*
Parkinson's disease 332	100,200	6,200	93,900	17,000	47,000	29,900	47,600	52,600	88,300	*	*	*
Other diseases of the nervous system and sense organs 320–330,331.3–331.9,333–337,341,345–389	268,500	25,800	242,700	45,200	75,400	122,100	107,900	160,600	227,100	30,900	26,100	*
Diseases of the circulatory system 390–459	2,653,800	189,200	2,464,600	447,700	973,000	1,043,900	1,019,100	1,634,600	2,250,900	362,800	289,800	42,000
Essential hypertension 401	690,500	65,900	624,600	142,400	243,100	239,100	242,600	447,900	562,000	120,300	97,500	*
Heart disease 391–392,0,393–398,402,404,410–416,420–429	1,258,200	60,800	1,197,400	171,100	472,000	554,300	489,900	768,300	1,106,100	132,500	107,600	*20,100
Diseases of the respiratory system 460–519	789,200	77,000	712,200	140,200	296,200	275,800	382,000	407,200	693,600	79,700	56,500	*16,200
Pneumonia, all forms 480–486	218,700	*12,600	206,100	31,000	77,900	97,200	104,000	114,600	190,700	21,800	*14,000	*
Other diseases of the respiratory system 490–496	570,500	64,400	506,100	109,200	218,300	178,600	278,000	292,500	502,900	57,900	42,500	*
Diseases of the digestive system 520–579	450,200	54,500	395,700	70,200	151,300	174,200	182,000	268,200	391,400	54,000	41,800	*
Diseases of the genitourinary system 580–629	437,200	52,000	385,200	79,000	161,600	144,600	195,400	241,800	365,700	64,600	57,200	*
Urinary tract infection 580–583,590, 595,597,599,0	182,200	*18,300	163,900	*26,400	60,800	76,600	55,100	127,100	157,400	*21,700	*18,600	*
Diseases of the skin and subcutaneous tissue 680–709	158,200	38,200	120,000	28,800	45,100	46,100	55,800	102,400	129,600	21,300	*15,500	*
Decubitus ulcer 707.0	46,900	*	40,800	*	*17,300	*15,900	*14,300	32,600	34,000	*10,500	*9,500	*
Diseases of the musculoskeletal system and connective tissue 710–739	672,100	64,000	608,100	87,700	212,000	308,300	161,700	510,400	593,600	68,900	59,000	*
Osteoarthritis and allied disorders, except spine 715	232,400	*28,300	204,000	29,000	75,000	100,000	71,400	161,000	202,200	25,400	*23,700	*
Other arthropathies and related disorders 710–714, 716–719	129,900	*	120,900	*15,700	42,200	63,000	25,700	104,100	113,700	*15,300	*12,500	*
Osteoporosis 733.0	104,200	*	101,500	*13,900	29,800	57,800	12,100	92,100	96,900	*	*	*
Symptoms, signs, and ill-defined conditions 780–799	652,600	76,300	576,300	108,600	238,700	229,000	248,300	404,200	566,600	74,600	53,400	*11,300
Injury and poisoning 800–999	421,700	41,900	379,700	61,100	144,100	174,600	134,600	287,100	391,900	*21,900	*14,000	*
Fracture of neck of femur 820	170,100	*	165,900	*	69,600	76,400	49,300	120,800	161,800	*	*	*
Other fractures 800–819,821–829	185,600	24,900	160,700	*26,200	57,200	77,400	47,900	137,700	169,900	*	*	*
Supplementary classification V01–V82	748,600	124,600	624,000	178,000	229,800	216,100	301,700	446,800	612,500	117,100	93,300	*19,300
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	429,300	67,800	361,500	98,200	140,700	122,600	160,900	268,400	365,400	54,000	42,900	*

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "Black and other" race category.

NOTE: Numbers may not add to totals because of rounding.

Table 61. Percent distribution of all-listed diagnoses for discharges at admission, according to age, sex, and race: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	Age at discharge												
	All discharges	Under 65 years	65 years and over				Sex		Race				
			Total	65–74 years	75–84 years	85 years and over	Male	Female	White	Black and other ²	Black	Unknown	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001–139	1.1	2.5	0.9	*0.9	1.0	0.9	1.1	1.1	1.0	1.7	*1.6	*	
Neoplasms 140–239	3.3	3.0	3.4	5.1	3.2	2.8	4.3	2.8	3.3	3.5	3.4	*	
Malignant neoplasms 140–208,230–234	3.1	2.8	3.2	4.8	3.0	2.6	4.0	2.6	3.1	3.2	3.0	*	
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	9.2	10.9	9.0	10.5	9.5	7.9	8.4	9.8	9.0	10.7	11.1	*10.9	
Diabetes mellitus 250	4.9	5.6	4.8	7.2	5.1	3.3	5.0	4.8	4.5	7.2	7.4	*	
Diseases of the blood and blood-forming organs 280–289	2.4	2.5	2.4	1.5	2.3	2.9	2.3	2.5	2.3	2.9	3.1	*	
Anemias 280–285	2.1	2.0	2.1	1.2	2.1	2.6	2.0	2.2	2.0	2.8	2.9	*	
Mental disorders 290–319	9.3	11.4	9.0	6.9	9.2	9.8	9.1	9.4	9.5	8.4	8.6	*6.7	
Senile dementia or organic brain syndrome 290, 310	1.2	*	1.3	*	1.1	1.7	1.1	1.2	1.2	*1.2	*1.1	*	
Other mental disorders 291–309, 311–316	8.0	10.4	7.7	6.2	8.0	8.0	7.9	8.0	8.2	7.0	7.3	*6.2	
Diseases of the nervous system and sense organs 320–389	5.9	6.0	5.9	5.1	5.7	6.3	6.0	5.8	5.9	5.5	5.9	*7.6	
Alzheimer’s disease 331.0	1.7	0.3	1.9	1.0	2.0	2.1	1.4	1.8	1.7	1.9	2.1	*	
Parkinson’s disease 332	1.0	0.6	1.0	1.0	1.3	0.8	1.2	0.8	1.0	0.8	0.9	*	
Other diseases of the nervous system and sense organs 320–330,331.3–331.9,333–337,341,345–389	2.6	2.3	2.7	2.6	2.1	3.2	2.8	2.6	2.6	2.4	2.5	*	
Diseases of the circulatory system 390–459	26.1	16.7	27.2	26.0	27.4	27.7	26.1	26.1	25.9	28.1	28.2	21.4	
Essential hypertension 401	6.8	5.8	6.9	8.3	6.8	6.3	6.2	7.1	6.5	9.3	9.5	*	
Heart disease 391–392,393–398,402,404,410–416,420–429	12.4	5.4	13.2	9.9	13.3	14.7	12.5	12.2	12.7	10.3	10.5	*10.3	
Diseases of the respiratory system 460–519	7.8	6.8	7.9	8.1	8.3	7.3	9.8	6.5	8.0	6.2	5.5	*8.3	
Pneumonia, all forms 480–486	2.1	1.1	2.3	1.8	2.2	2.6	2.7	1.8	2.2	1.7	*1.4	*	
Other diseases of the respiratory system 490–496	5.6	5.7	5.6	6.3	6.1	4.7	7.1	4.7	5.8	4.5	4.1	*	
Diseases of the digestive system 520–579	4.4	4.8	4.4	4.1	4.3	4.6	4.7	4.3	4.5	4.2	4.1	*	
Diseases of the genitourinary system 580–629	4.3	4.6	4.3	4.6	4.5	3.8	5.0	3.9	4.2	5.0	5.6	*	
Urinary tract infection 580–583,590, 595,597,599.0	1.8	1.6	1.8	1.5	1.7	2.0	1.4	2.0	1.8	*1.7	*1.8	*	
Diseases of the skin and subcutaneous tissue 680–709	1.6	3.4	1.3	1.7	1.3	1.2	1.4	1.6	1.5	1.7	*1.5	*	
Decubitus ulcer 707.0	0.5	*	0.5	*	*0.5	*0.4	*0.4	0.5	0.4	*0.8	*0.9	*	
Diseases of the musculoskeletal system and connective tissue 710–739	6.6	5.7	6.7	5.1	6.0	8.2	4.1	8.1	6.8	5.3	5.7	*	
Osteoarthritis and allied disorders, except spine 715	2.3	*2.5	2.3	1.7	2.1	2.7	1.8	2.6	2.3	2.0	*2.3	*	
Other arthropathies and related disorders 710–714, 716–719	1.3	*	1.3	*0.9	1.2	1.7	0.7	1.7	1.3	*1.2	*1.2	*	
Osteoporosis 733.0	1.0	*	1.1	*0.8	0.8	1.5	0.3	1.5	1.1	*	*	*	
Symptoms, signs, and ill-defined conditions 780–799	6.4	6.7	6.4	6.3	6.7	6.1	6.4	6.4	6.5	5.8	5.2	*5.8	
Injury and poisoning 800–999	4.1	3.7	4.2	3.5	4.1	4.6	3.4	4.6	4.5	*1.7	*1.4	*	
Fracture of neck of femur 820	1.7	*	1.8	*	2.0	2.0	1.3	1.9	1.9	*	*	*	
Other fractures 800–819,821–829	1.8	2.2	1.8	*1.5	1.6	2.1	1.2	2.2	2.0	*	*	*	
Supplementary classification V01–V82	7.4	11.0	6.9	10.3	6.5	5.7	7.7	7.1	7.0	9.1	9.1	9.8	
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	4.2	6.0	4.0	5.7	4.0	3.3	4.1	4.3	4.2	4.2	4.2	*	

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²A small number of discharges with more than one race indicated have been classified “other” and are reported in the “Black and other” race category.

NOTE: Percents are based on the unrounded numbers.

Table 62. Number of nursing home discharges by primary diagnosis at admission and dependency in activities of daily living and walking: United States, October 1998–September 1999

Diagnosis and ICD–9–CM code ¹	All discharges	Received assistance from facility ² —					
		Bathing	Dressing	Eating	Transferring in or out of bed or chair	Using the toilet room	Walking
Total	2,522,300	2,225,300	2,081,500	1,216,300	805,200	1,280,000	940,300
Infectious and parasitic diseases 001–139	33,800	30,600	28,900	*18,400	*	*12,800	*
Neoplasms 140–239	152,700	140,600	124,200	89,200	40,000	72,700	40,500
Malignant neoplasms 140–208,230–234	146,700	136,100	119,400	87,400	38,100	68,600	37,900
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	156,900	144,500	133,500	79,200	44,700	77,300	53,700
Diabetes mellitus 250	103,800	96,400	88,200	52,300	25,500	49,500	31,800
Diseases of the blood and blood-forming organs 280–289	*16,100	*14,500	*12,600	*	*	*	*
Anemias 280–285	*10,500	*10,200	*9,500	*	*	*	*
Mental disorders 290–319	201,200	173,000	159,600	105,300	50,300	96,300	48,700
Senile dementia or organic brain syndrome 290, 310	39,300	37,200	35,200	25,600	11,400	22,400	*
Other mental disorders 291–309, 311–316	157,200	131,000	119,900	77,500	38,500	71,000	37,500
Diseases of the nervous system and sense organs 320–389	159,600	151,400	148,200	106,500	38,600	76,100	35,200
Alzheimer's disease 331.0	78,200	75,600	74,800	59,900	16,600	40,000	*16,200
Diseases of the circulatory system 390–459	552,000	505,500	474,500	283,000	173,800	288,700	213,300
Essential hypertension 401	45,800	42,200	39,000	22,100	13,600	26,900	15,300
Heart disease 391–392.0,393–398,402,404,410–416,420–429	274,500	251,800	229,800	120,300	93,000	140,800	120,000
Diseases of the respiratory system 460–519	274,900	239,500	221,500	147,300	77,000	124,600	85,500
Pneumonia, all forms 480–486	114,500	102,200	93,900	69,200	31,500	47,400	34,800
Other diseases of the respiratory system 490–496	160,400	137,300	127,600	78,000	45,500	77,200	50,700
Diseases of the digestive system 520–579	90,200	76,300	72,300	45,600	28,900	40,200	30,700
Diseases of the genitourinary system 580–629	76,200	65,700	61,700	40,000	21,500	33,000	25,900
Urinary tract infection 580–583,590, 595,597,599.0	37,000	31,200	29,900	21,900	*	*14,300	*
Diseases of the skin and subcutaneous tissue 680–709	43,900	36,800	36,000	*16,700	*	*24,200	15,400
Diseases of the musculoskeletal system and connective tissue 710–739	133,800	114,200	103,700	44,400	61,200	73,200	73,400
Osteoarthritis and allied disorders, except spine 715	46,900	34,900	30,800	*11,800	*21,600	*23,100	*26,200
Symptoms, signs, and ill-defined conditions 780–799	137,900	113,800	107,700	62,500	50,800	74,100	61,800
Injury and poisoning 800–999	291,800	243,500	234,800	93,400	110,500	167,500	147,000
Fracture of neck of femur 820	139,800	118,800	114,200	46,900	58,800	77,300	79,300
Other fractures 800–819,821–829	122,000	105,400	105,100	33,200	49,300	78,900	63,700
Supplementary classification V01–V82	184,500	162,700	149,400	68,500	72,400	103,200	89,600
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	110,800	93,600	85,300	33,600	54,300	58,900	65,800

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Disease, 9th Revision, Clinical Modification (4)*.

²Figures may not add to totals because a resident may receive help in more than one category.

NOTE: Numbers may not add to totals because of rounding.

Table 63. Percent distribution of nursing home discharges by primary diagnosis at admission, according to dependency in activities of daily living and walking: United States, October 1998–September 1999

Diagnosis and ICD-9-CM code ¹	All discharges	Received assistance from facility ² —					
		Bathing	Dressing	Eating	Transferring in or out of bed or chair	Using the toilet room	Walking
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Infectious and parasitic diseases 001–139	1.3	1.4	1.4	*1.5	*	*1.0	*
Neoplasms 140–239	6.1	6.3	6.0	7.3	5.0	5.7	4.3
Malignant neoplasms 140–208,230–234	5.8	6.1	5.7	7.2	4.7	5.4	4.0
Endocrine, nutritional, and metabolic diseases and immunity disorders 240–279	6.2	6.5	6.4	6.5	5.6	6.0	5.7
Diabetes mellitus 250	4.1	4.3	4.2	4.3	3.2	3.9	3.4
Diseases of the blood and blood-forming organs 280–289	*0.6	*0.7	*0.6	*	*	*	*
Anemias 280–285	*0.4	*0.5	*0.5	*	*	*	*
Mental disorders 290–319	8.0	7.8	7.7	8.7	6.2	7.5	5.2
Senile dementia or organic brain syndrome 290, 310	1.6	1.7	1.7	2.1	1.4	1.8	*
Other mental disorders 291–309, 311–316	6.2	5.9	5.8	6.4	4.8	5.6	4.0
Diseases of the nervous system and sense organs 320–389	6.3	6.8	7.1	8.8	4.8	6.0	3.8
Alzheimer's disease 331.0	3.1	3.4	3.6	4.9	2.1	3.1	*1.7
Diseases of the circulatory system 390–459	21.9	22.7	22.8	23.3	21.6	22.6	22.7
Essential hypertension 401	1.8	1.9	1.9	1.8	1.7	2.1	1.6
Heart disease 391–392.0,393–398,402,404,410–416,420–429	10.9	11.3	11.0	9.9	11.6	11.0	12.8
Diseases of the respiratory system 460–519	10.9	10.8	10.6	12.1	9.6	9.7	9.1
Pneumonia, all forms 480–486	4.5	4.6	4.5	5.7	3.9	3.7	3.7
Other diseases of the respiratory system 490–496	6.4	6.2	6.1	6.4	5.7	6.0	5.4
Diseases of the digestive system 520–579	3.6	3.4	3.5	3.8	3.6	3.1	3.3
Diseases of the genitourinary system 580–629	3.0	3.0	3.0	3.3	2.7	2.6	2.8
Urinary tract infection 580–583,590, 595,597,599.0	1.5	1.4	1.4	1.8	*	*1.1	*
Diseases of the skin and subcutaneous tissue 680–709	1.7	1.7	1.7	*1.4	*	*1.9	0.1
Diseases of the musculoskeletal system and connective tissue 710–739	5.3	5.1	5.0	3.7	7.6	5.7	7.8
Osteoarthritis and allied disorders, except spine 715	1.9	1.6	1.5	*1.0	*2.7	*1.8	*2.8
Symptoms, signs, and ill-defined conditions 780–799	5.5	5.1	5.2	5.1	6.3	5.8	6.6
Injury and poisoning 800–999	11.6	10.9	11.3	7.7	13.7	13.1	15.6
Fracture of neck of femur 820	5.5	5.3	5.5	3.9	7.3	6.0	8.4
Other fractures 800–819,821–829	4.8	4.7	5.1	2.7	6.1	6.2	6.8
Supplementary classification V01–V82	7.3	7.3	7.2	5.6	9.0	8.1	9.5
Posthospital aftercare V42–46,V52,V53.3–V53.7,V54–V58	4.4	4.2	4.1	2.8	6.7	4.6	7.0

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

²Figures may not add to totals because a resident may receive help in more than one category.

NOTE: Percents are based on the unrounded numbers.

Appendix I

Technical Notes on Methods

Statistical Design

From July through December 1999, the National Center for Health Statistics (NCHS) Division of Health Care Statistics (DHCS) conducted the 1999 National Nursing Home Survey (NNHS). This survey is the sixth in a series of surveys of nursing home facilities, their current residents, and discharges. The first NNHS was conducted between August 1973 and April 1974, the second survey was conducted from May through December 1977, the third survey was conducted from August 1985 through January 1986, the fourth survey was conducted from July through December 1995, and the fifth survey was conducted from July through December 1997.

Scope of the Survey

The sample for the 1999 NNHS was taken from a frame that consisted of all nursing home facilities identified in the 1997 NNHS and updated with a sample of new facilities identified from files obtained in 1999. These updated files were obtained from the Centers for Medicare and Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA) and other national organizations.

The universe for the 1999 NNHS consisted of about 18,400 nursing homes in the United States. All nursing homes included in this survey had at least three beds and were either certified (by Medicare or Medicaid) or had a State license to operate as a nursing home. Facilities in the universe were either freestanding or nursing care units of hospitals, retirement centers, or similar institutions where the unit maintained financial and resident records separate from those of the larger institution.

The sample consisted of 1,496 nursing homes. Of these facilities, 50

refused to participate and 23 were out-of-scope for one or more of the following reasons: the nursing home had gone out of business, it failed to meet the definition of a nursing home as used in this survey, or it was a duplicate of another facility in the sample. A total of 1,423 nursing homes participated at the first stage by providing facility information.

Sample Design

The sample design for the 1999 NNHS was a stratified two-stage probability design (1). The first-stage of selection is a probability sample of the nursing facilities in the sampling frame. The primary sampling strata of nursing facilities were defined by eight classes of bed size and two classes of certification status. The bed size categories used were 3–14, 15–24, 25–49, 50–99, 100–199, 200–399, 400–599, and 600 beds or more. A facility was classified as “certified” if it was certified by either Medicare or Medicaid. Within these 16 primary strata, facilities were sorted by hospital based and nonhospital based, ownership, geographic region, metropolitan status, State, county, and zip code. Nursing homes were then selected using systematic sampling with probability proportional to their bed size.

The second stage of sample selection, sampling six current residents and six discharges with each facility, was done using a sample selection table to obtain systematic probability samples of current residents and discharges. The residents and discharges were selected from lists constructed for each facility at the time of the interview. Current residents were defined as those who were on the rolls of the facility as of midnight on the day before the date of the survey. Residents who were physically absent from the facility due to overnight leave or a hospital visit but had a bed maintained for them at the facility were included in the sample frame. Discharges referred to those residents who were discharged from the facility during a designated month between October 1998 and September 1999. Discharges that occurred because of death were included.

Estimation Procedure

Estimates presented in this report were derived by a multistage estimation procedure (2) that produces essentially unbiased national estimates and has three principal components. The first component, inflation by the reciprocals of the probabilities of sample selection, is the basic inflation weight. This component consists of the inverse of the probability of selecting the facility and the resident or discharge within each facility. The second component, which consists of an adjustment for nonresponse, brings estimates based only on the responding cases up to the level that would have been achieved if all eligible cases had responded. The third component, ratio adjustment to fixed totals, adjusts for over- or undersampling of facilities reported in the sampling frame.

Data Collection and Processing

Data Collection

A letter was sent to the sampled nursing homes informing the administrator of the authorizing legislation, the purpose, and the content of the survey. Within 7 to 10 days after the letter was mailed, the interviewer assigned to conduct the survey in a particular nursing home made telephone contacts to discuss the survey and to arrange an appointment with the administrator or person designated by the administrator.

Three questionnaires and two sampling lists were used to collect the data (see [appendix III](#)):

- Facility questionnaire
- Current resident questionnaire
- Discharged resident questionnaire
- Current resident sampling list
- Discharged resident sampling list

The Facility Questionnaire was completed with the administrator-appointed designee. The interviewer then completed the Current Resident Sampling List and the Discharged Resident Sampling List. These lists were used to select the sample of current residents and discharges. Sampling was accomplished by using tables showing sets of sample line numbers for each

possible count of current residents and discharges in the facility. Up to six current residents and six discharges were selected. After the samples were selected, the Current Resident Questionnaire and the Discharged Resident Questionnaires were completed for each sampled person by a staff member familiar with care received by the resident and with medical records of the resident. No resident was interviewed directly.

Data Processing

The data were then converted into machine-readable form by NCHS. Extensive editing was conducted by computer to ensure that all responses were accurate, consistent, logical, and complete. The medical information recorded on the resident questionnaires was coded by NCHS staff according to the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

Reliability of Estimates

Because the data are based on a sample, they will differ somewhat from data that would have been obtained if a complete census had been taken using the same schedules, instructions, and procedures. The standard error (SE) is primarily a measure of the variability that occurs by chance because only a sample, rather than the entire universe, is surveyed. The standard error also reflects part of the measurement error, but it does not measure any systematic biases in the data or other nonsampling error. The chances are about 95 in 100 that an estimate from the sample differs from the value that would be obtained from a complete census by less than twice the standard error.

The standard errors used in this report were approximated using SUDAAN software. SUDAAN computes standard errors by using a first-order Taylor approximation of the deviation of estimates from their expected values. A description of the software and the approach it uses has been published (5). Although exact standard estimates were used in tests of significance in this report, standard errors for aggregate estimates presented

Table I. Parameters used to compute relative standard errors by type of estimate

Type of estimate	Parameters	
	A	B
Facilities	0.001496	9.399143
Admissions	0.011898	867.786657
Bed size	-0.000134	1017.668625
Full-time employee	0.001737	879.038640
Current residents	0.002861	209.141766
Discharged residents	0.015992	393.605419

may be estimated by using the general formula:

$$SE(X) = X \cdot RSE(X)$$

where X is the estimate and $RSE(X)$ is the relative standard error (RSE) of the estimate. The relative standard error ($RSE(X)$) may be estimated using the following general formula (6):

$$RSE(X) = \sqrt{\frac{B}{A + \bar{X}}}$$

where X is the estimate and A and B are the appropriate coefficients from [table I](#).

To approximate the relative standard error ($RSE(p)$) and the standard error ($SE(p)$) of a percent $p(0 < 1)$, the appropriate values of parameter B from [table I](#) are used in the following equations:

$$RSE(p) = \sqrt{\frac{B \cdot (1-p)}{p \cdot y}}$$

and

$$SE(p) = p \cdot RSE(p)$$

where $p = I \cdot X/Y$, X = the numerator of the estimated percent, and Y = the denominator of the estimated percent.

The approximation of the relative standard error or the standard error of a percent is valid only when one of the following conditions is satisfied: the relative standard error of the denominator is 5 percent or less (7) or the relative standard errors of the numerator and the denominators are both 10 percent or less (8).

The SEs for the average daily charge and length of stay since admission are presented in [tables II–VIII](#). The SEs are presented by selected characteristics of the facility, current residents, and discharges.

Presentation of Estimates

Publication of estimates for the NNHS is based on the relative standard error of the estimate and the number of sample records on which the estimate is based (referred to as the sample size). Estimates are not presented in NCHS reports unless a reasonable assumption regarding the probability distribution of the sampling error is possible. Public use files do not include variables required for accurate calculation of sampling error.

Based on consideration of the complex sample design of the NNHS, the following guidelines are used for presenting the NNHS estimates:

- If the sample size is less than 30, the value of the estimate is not reported. This is indicated by an asterisk (*) in the tables.
- If the sample size is 30–59, or if the sample is greater than 59 and the RSE is 30 percent or more, the estimate is reported but should not be assumed reliable. This is indicated by an asterisk in conjunction with the number in the tables.
- If the sample size is 60 or more and the relative standard error is less than 30 percent, the estimate is reported and is considered reliable.

Table II. Standard errors for average per diem rates for private-pay patients, by level of care of facility and for Medicare and Medicaid patients by certification status of facility, according to selected facility characteristics: United States, 1999

Facility characteristic	Level of care			Certification status	
	Skilled	Intermediate	Residential	Medicare	Medicaid
All facilities	2.2	1.6	2.6	3.3	1.4
Ownership					
Proprietary	2.3	1.5	3.1	3.6	1.5
Voluntary nonprofit	5.6	4.4	5.0	8.0	3.9
Government and other	6.9	6.9	*	8.3	5.3
Certification					
Certified					
By Medicare and Medicaid	2.4	1.7	3.0	3.4	1.5
By Medicare only	*13.2	*	*	*	...
By Medicaid only	*3.3	2.7	*4.9	...	3.0
Not certified	*	*	*
Beds					
Fewer than 50 beds	*16.2	11.4	*	*22.9	*11.4
50–99 beds	3.0	2.3	3.3	5.2	1.7
100–199 beds	2.3	1.9	4.2	3.6	1.6
200 beds or more	4.0	3.1	8.6	4.6	2.6
Geographic region					
Northeast	3.2	3.7	*8.4	4.6	2.6
Midwest	3.9	2.1	3.3	5.2	1.8
South	2.6	1.6	3.4	5.2	1.5
West	8.5	9.3	6.9	12.8	6.1
Location of agency					
Metropolitan statistical area	2.8	1.9	3.4	4.4	1.9
Nonmetropolitan statistical area	3.8	2.5	3.8	4.3	2.2
Affiliation ¹					
Chain	2.8	2.0	3.0	3.5	1.9
Independent	4.0	2.6	4.7	6.8	2.3

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

... Category not applicable.

¹Excludes unknown.

Table III. Standard errors for average length of stay since admission in days of nursing home residents and discharges, by selected facility characteristics: United States, 1999

Facility characteristic	Current residents	Discharges
All facilities	16.9	12.1
Ownership		
Proprietary	17.1	12.1
Voluntary nonprofit	41.5	28.6
Government and other	68.1	69.0
Certification		
Certified		
By Medicare and Medicaid	15.4	12.1
By Medicare only	94.9	50.2
By Medicaid only	56.2	54.0
Not certified	318.0	185.4
Beds		
Fewer than 50 beds	65.7	42.2
50–99 beds	29.3	26.6
100–199 beds	19.7	15.1
200 beds or more	54.2	27.3
Geographic region		
Northeast	30.5	26.0
Midwest	38.2	24.7
South	27.4	20.1
West	32.4	21.4
Location of agency		
Metropolitan statistical area	20.8	13.0
Nonmetropolitan statistical area	29.3	29.6
Affiliation ¹		
Chain	18.5	14.2
Independent	32.0	22.8

¹Excludes unknown.

Table IV. Standard errors for average daily charge of nursing home residents by primary source of payment in month before interview, by selected facility characteristics: United States, 1999

Facility characteristic	All sources	Private sources ¹	Medicare	Medicaid	All other ²
Average daily charge					
All facilities	4.8	2.3	35.1	1.7	9.5
Ownership					
Proprietary	1.6	2.7	5.4	1.7	8.8
Voluntary nonprofit	17.0	4.3	122.5	4.8	12.1
Government and other	5.8	8.9	11.7	6.0	*
Certification					
Certified					
By Medicare and Medicaid	5.5	2.3	37.6	1.8	9.7
By Medicare only	11.2	11.8	*	*	*
By Medicaid only	2.9	3.5	15.7	3.4	*
Not certified	7.5	8.7	*	*	*
Beds					
Fewer than 50 beds	9.5	5.6	*23.5	18.7	*
50–99 beds	2.4	3.3	9.4	2.6	*
100–199 beds	9.1	3.3	68.1	2.5	10.3
200 beds or more	3.6	8.3	8.6	3.5	*21.0
Geographic region					
Northeast	3.7	7.2	10.6	4.0	*
Midwest	15.1	3.0	123.8	2.8	*8.7
South	1.8	3.0	7.0	1.9	*10.1
West	5.0	7.1	11.0	6.4	*17.8
Location of agency					
Metropolitan statistical area	1.9	3.2	5.5	2.2	10.7
Nonmetropolitan statistical area	14.4	2.5	139.7	2.6	*
Affiliation ³					
Chain	7.8	2.9	56.7	1.7	10.1
Independent	2.5	3.7	8.0	2.0	15.0

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pension, or other VA compensation, payment source not yet determined, and other and unknown sources.

³Excludes unknown.

Table V. Standard errors for average daily charge of nursing home residents by primary expected source of payment in month before interview, by selected resident characteristics: United States, 1999

Resident characteristic	Average daily charge				
	All sources	Private sources ¹	Medicare	Medicaid	All other ²
			Standard error		
All residents	1.4	2.3	4.9	1.5	9.9
Age					
Under 65 years	6.4	15.5	*16.8	7.1	*19.1
65 years and over	1.2	2.2	5.1	1.3	8.7
65–74 years	2.9	8.1	14.1	2.4	*
75–84 years	1.6	3.1	6.7	1.7	*15.0
85 years and over	1.4	2.4	6.3	1.5	*8.6
Sex					
Male	2.5	4.5	8.3	2.8	14.1
Female	1.3	2.2	5.4	1.4	10.5
Race					
White only	1.3	2.3	5.3	1.3	11.2
Black and other ³	4.2	*12.2	12.3	4.4	*
Black only	3.6	*15.3	13.7	3.4	*
Unknown	20.5	*	*	*28.6	*
Hispanic or Latino origin					
Hispanic	11.9	*	*	13.9	*
Non-Hispanic	1.3	2.4	5.1	1.4	10.7
Unknown	4.3	6.6	*16.9	3.7	*
Current marital status					
Married	2.7	4.6	10.7	3.0	16.1
Widowed	1.3	2.2	5.6	1.4	*8.1
Divorced or separated	3.4	9.8	*11.3	3.6	*
Single or never married	3.5	6.2	10.1	4.2	*
Unknown	9.6	*	*	8.0	*
Residence prior to admission					
Private or semiprivate residence	2.0	3.8	10.7	1.8	*12.2
Retirement home	6.1	9.0	*	*7.4	*
Board and care or residential care facility	4.0	5.0	*	3.8	*
Nursing home	2.1	4.9	10.0	2.2	*
Hospital	1.9	3.1	5.6	2.2	9.8
Other and unknown	4.3	6.6	*13.2	5.1	*
Living arrangement prior to admission					
Alone	2.4	3.8	11.4	2.9	*
With family members	2.4	4.9	13.7	2.1	*
Only with nonfamily members	4.3	6.1	*	3.5	*
Unknown	1.6	2.7	4.9	1.8	10.4

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits and retirement funds.

²Includes rehabilitation facilities, mental health facilities, and other inpatient health facilities.

³A small number of discharges with more than one race indicated have been classified as "other" and are reported in the "black and other" race category.

Table VI. Standard errors for average length of stay in days for nursing home residents, by demographic characteristics: United States, 1999

Demographic characteristic	Current residents	Discharges
Total	16.9	12.1
Age		
Under 65 years	52.5	24.8
65 years and over	17.4	12.8
65–74 years	46.1	16.1
75–84 years	21.9	15.3
85 years and over	26.3	19.3
Sex		
Male	32.2	13.3
Female	17.2	15.5
Race		
White only	18.4	12.9
Black and other ¹	42.0	26.4
Black only	47.6	29.2
Unknown	137.9	58.8
Hispanic or Latino origin		
Hispanic	63.7	31.4
Non-Hispanic	17.9	12.9
Unknown	65.4	37.5
Current marital status		
Married	25.5	13.4
Widowed	22.0	15.4
Divorced or separated	48.7	35.9
Single or never married	52.5	32.7
Unknown	118.6	55.4
Residence prior to admission		
Private or semiprivate residence	39.2	30.7
Retirement home	80.9	86.5
Board and care or residential care facility	54.7	53.1
Nursing home	37.2	45.0
Hospital	18.4	11.3
Other and unknown ²	87.0	106.7
Living arrangement prior to admission		
Alone	55.4	42.2
With family members	44.4	39.0
Only with nonfamily members	58.6	63.6
Unknown	16.7	12.5

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹A small number of discharges with more than one race indicated are classified as "other" and are reported in the "Black and other" race category.

²Includes rehabilitation facilities, mental health facilities, and other inpatient health facilities.

Table VII. Standard errors for average length of stay in days for nursing home residents and discharges, by primary diagnosis at admission: United States, 1999

Diagnosis and ICD-9-CM code ¹	Current residents	Discharge
Total	16.9	12.1
Infectious and parasitic diseases 001-139	89.6	38.1
Neoplasms 140-239	70.7	21.4
Malignant neoplasms 140-208,230-234	77.2	22.2
Endocrine, nutritional, and metabolic diseases and immunity disorders 240-279	42.0	37.1
Diabetes mellitus 250	48.3	41.4
Diseases of the blood and blood-forming organs 280-289	322.5	*115.1
Anemias 280-285	363.1	*113.7
Mental disorders 290-319	40.7	52.2
Senile dementia or organic brain syndrome 290,310	75.5	97.7
Mental retardation 317-319	322.9	*
Other mental disorders 290-309, 311-315	43.6	59.6
Diseases of the nervous system and sense organs 320-389	41.1	52.3
Alzheimer's disease 331.0	43.0	54.5
Parkinson's disease 332	96.1	86.3
Multiple sclerosis 340	188.0	*252.7
Paralytic syndromes 342-344	241.6	*189.9
Other diseases of the nervous system and sense organs 320-330,331.3-331.9,333-337,341,345-389	126.7	179.8
Diseases of the circulatory system 390-459	34.0	20.2
Essential hypertension 401	68.6	61.0
Heart disease 391-392.0,393-398,402,404,410-416,420-429	61.1	22.8
Diseases of the respiratory system 460-519	30.5	18.6
Pneumonia, all forms 480-486	41.7	20.4
Other diseases of the respiratory system 490-496	43.4	26.9
Diseases of the digestive system 520-579	71.0	32.8
Diseases of the genitourinary system 580-629	56.3	24.4
Urinary tract infection 580-583,590,595,597,599.0	51.0	41.3
Diseases of the skin and subcutaneous tissue 680-709	47.9	17.1
Decubitus ulcer 707.0	*77.9	*
Other chronic ulcer of the skin 707.1-707.9	105.5	*
Diseases of the musculoskeletal system and connective tissue 710-739	69.9	58.9
Rheumatoid arthritis, except spine 714	*	*
Osteoarthritis and allied disorders, except spine 715	129.1	134.7
Other arthropathies and related disorders 710-713, 716-719	172.9	*49.8
Osteoporosis 733.0	*235.4	*
Congenital anomalies 740-759	*	*
Symptoms, signs, and ill-defined conditions 780-799	59.0	38.1
Senility without mention of psychosis 797	*	*
Injury and poisoning 800-999	41.6	13.3
Fracture of neck of femur 820	48.7	24.3
Other fractures 800-819,822-829	84.4	13.7
Supplementary classification V01-V82	60.8	16.9
Posthospital aftercare V42-46,V52,V53.3-V53.7,V54-V58	89.6	16.0
Unknown or no diagnosis	*	*

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (4).

Table VIII. Standard errors for average length of stay of nursing home discharges by primary expected source of payment and reason for discharge: United States, October 1998–September 1999

Residential characteristic	Standard error for average length of stay
Total	12.1
Primary expected source of payment	
Private insurance ¹	16.7
Medicare	9.4
Medicaid	26.3
All other sources ²	57.2
Reason for discharge	
Recovered	4.3
Stabilized	12.2
Deceased	26.6
Admitted to hospital	16.4
Admitted to nursing home	48.2
All other	24.7

* Figure does not meet standard of reliability or precision because the sample size is less than 30. If shown with a number, it should not be assumed reliable because the sample size is between 30 and 59 or is greater than 59, but the estimate has a standard error over 30 percent.

¹Includes private insurance, own income, family support, Social Security benefits, and retirement funds.

²Includes Supplemental Security Income (SSI), other government assistance or welfare, religious organizations, foundations, agencies, Veterans Administration (VA) contracts, pensions, or other VA compensation, payment source not yet determined, and other and unknown sources.

Appendix II

Definitions of Certain Terms Used in This Report

Terms Relating to Facilities

Nursing homes—Facilities with three or more beds that provide either nursing care or personal care (such as help with bathing, correspondence, walking, eating, using the toilet, or dressing) and/or supervision over such activities as money management, ambulation, and shopping. Facilities providing care solely to the mentally retarded and mentally ill are excluded. A nursing home may be either freestanding or a distinct unit of a larger facility.

Bed—One that is set up and staffed for use, whether or not it was in use by a resident at the time of the survey. Not included are beds used by staff or owners or beds used exclusively for emergency purposes, for day care only, or for night care only.

Certified bed—One that is certified under the Medicare program, the Medicaid program, or both. (See definition under “Certification” for details.)

Certification—Facility certification is provided by Medicare and/or Medicaid.

Medicare—This is a nationwide health insurance program providing health insurance protection to people 65 years of age and over, people entitled to Social Security disability payments for 2 years or more, and people with end-stage renal disease, regardless of income. The program was enacted on July 30, 1965, as Title XVIII, Health Insurance for the Aged of the Social Security Act, and became effective on July 1, 1966. It consists of two separate but coordinated programs—hospital insurance (part A) and supplementary medical insurance (part B).

Medicaid—The medical assistance provided by Title XIX of the Social Security Act in 1965. It is a jointly funded cooperative venture between the Federal and State governments to assist States in the provision of adequate medical care to eligible needy persons.

Within broad Federal guidelines, each State establishes its own eligibility standards; determines the type, amount, duration, and scope of services; sets the rate of payment for services; and administers its own program. Thus, the Medicaid program varies considerably from State to State as well as within each State over time.

Not certified—A facility not certified as a provider of care by either Medicare or Medicaid.

Admissions—The count of admissions to a nursing home for calendar year 1998.

Occupancy rate—A measure of bed utilization is calculated by dividing residents by available beds.

Geographic region—The regions, classified by grouping the conterminous States into geographic areas, correspond to those used by the U.S. Census Bureau.

<i>Region</i>	<i>States included</i>
Northeast	Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, Pennsylvania
Midwest	Michigan, Ohio, Indiana, Illinois, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Kansas, Nebraska
South	Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Texas, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma
West	Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada, Washington, Oregon, California. (Alaska and Hawaii are excluded.)

Location—Locale of the facility providing services is classified as inside a metropolitan statistical area (MSA) or outside an MSA as defined by the Office of Management and Budget (OMB).

Ownership—The type of organization that controls and operates the nursing home.

Proprietary facility—A facility operated under private commercial ownership.

Voluntary nonprofit facility—A facility operated under voluntary or nonprofit auspices, including church-related facilities.

Government facility—A facility operated under Federal, State, or local government auspices.

Service—Type of service refers to classes of services offered by a nursing home to its residents. Residents fall into five major categories: health care; therapy services provided by professionals at the nursing home; social services; ancillary services such as hospice services, vocational rehabilitation, and transportation; and other types of services.

Employee—An individual providing services to the residents of the nursing home. Employee data presented in this report pertain to full-time equivalent (FTE) employees. FTEs are used to neutralize the variations between facilities that hire part-time workers to cover the number of hours of a full-time worker. The 1999 survey asked the administrator for the number of FTEs for selected categories of employees.

Terms Relating to Occupational Categories

Administrative and medical staff—Administrators, assistant administrators, physicians (M.D. or D.O.), dentist, dietitians or nutritionist, and members of other professional occupations.

Therapeutic staff—Registered physical therapists, social workers, and speech pathologists or audiologists.

Nursing staff—Registered nurses, licensed practical nurses, licensed vocational nurses, and nurse’s aides or orderlies.

Terms Relating to Residents and Discharges

Current resident—A person on the roster of the nursing home as of the night before the survey. Included are all

residents for whom beds are maintained even though they may be away on overnight leave or in a hospital.

Discharge—A person formally discharged from care by the facility during a designated month randomly selected for each facility before data collection. Both live and deceased discharges are included. Residents were counted more than once if the patient was discharged more than once during the reference period.

Terms Relating to Demography

Age—The resident's age at the time of interview, calculated as the difference in years between the date of birth and date of interview.

Race—Consistent with the 1997 Office of Management and Budget Race and Ethnic Standards for Federal Statistics and Administrative Reporting, the 1999 NNHS offered the opportunity for respondents to select more than one race category (American Indian/Alaska Native, Asian, black or African American, Native Hawaiian or other Pacific Islander, or white). Within this report, there were 22 patients (15 current residents and 7 discharges) with more than one race reported, and they are classified in the "other" race category.

Hispanic/Latino origin—A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race, as reported by facility staff.

Marital status—Marital status of the resident at the time of the survey (for current residents) or at the time of discharge (for discharges).

Terms Relating to Other Items

Activities of daily living (ADLS)—Activities are classified into five categories (bathing, dressing, eating, transferring, and using toilet room) that reflect the resident's capacity for self-care. The resident's need for assistance with these activities refers to personal help received from facility staff at the time of the survey (for current residents) or the last time care was

provided (for discharges). Help that a resident may receive from persons who are not staff of the facility (for example, family members, friends, or individuals employed directly by the patient and not by the facility) is not included.

Instrumental activities of daily living (IADLS)—Activities are classified into four daily tasks (care of personal possessions; handling money; securing personal items such as newspaper, toilet articles, or snack food; and using the telephone) involving interaction with or adaptation to the resident's immediate environment. The resident's need for assistance or supervision in performing these activities refers to personal help received from facility staff at the time of the survey (for current residents) or the last time care was provided (for discharges). Help that a resident may receive from persons who are not staff of the facility (for example, family members, friends, or individuals employed directly by the patient and not by the facility) is not included.

Hearing—Includes status when using a hearing aid, if applicable.

Partially impaired—The resident can hear most of the things a person says. This includes a small number of residents whose hearing is impaired, but whose level of impairment is unknown.

Severely impaired—The resident can hear only a few words a person says or hears only loud noises.

Completely lost—The resident is deaf.

Vision—Includes status when using eyeglasses or contact lenses.

Partially impaired—The resident cannot read newspaper print, but can watch television 8–12 feet away. This includes a small number of residents whose vision is impaired but whose level of impairment is unknown.

Severely impaired—The resident cannot watch television 8–12 feet away but can recognize the features of familiar persons if they are within 2–3 feet.

Completely lost—The resident is totally blind.

Primary expected source of payment—The one payment source expected to pay (for current residents)

or that did pay (for discharges) the greatest amount of the resident's charge.

Own income or family support—Includes health insurance, retirement funds, and social security.

Medicare—Money received under the Medicare program.

Medicaid—Money received under the Medicaid program.

Other government assistance or welfare—Sources of government aid (Federal, State, or local) other than Medicare or Medicaid.

All other sources—Sources that include religious organizations, foundations, volunteer agencies, Veterans Administration contracts, initial payment arrangements, life care arrangements, miscellaneous sources, and no-charge arrangements.

Charge—The total amount charged to the resident by the facility during a specific time period.

Length of stay—The period of stay from the date of the resident's most recent admission to the facility to the date of the survey interview (for current residents) or to the day of discharge (for discharges).

Diagnoses—are the diseases or injuries listed by the attending physician on the patient's medical record. These can be one or more diseases or injuries. It can also be a factor that influences health status and contact with health services but is not itself a current illness or injury. Diagnoses were recorded for two time periods: at admission and at time of survey. All diagnoses for sample residents were transcribed in the order listed. Each sample resident was assigned a maximum of six 5-digit codes according to the *International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM)* A diagnostic chapter within ICD-9-CM is primarily an arrangement of diseases according to their principal anatomic site, with special chapters for infectious and parasitic diseases; neoplasms; endocrine, nutritional, and metabolic diseases; mental disorders; complications of pregnancy and childbirth; certain diseases peculiar to the perinatal period; and ill-defined conditions. In addition, two

supplemental classifications are provided: (a) factors influencing health status and contact with health services and (b) external causes of injury and poisoning.

Primary diagnosis—The diagnosis listed first on the medical record.

All-listed diagnoses—All diagnoses (up to a maximum of six) listed on the medical record of each sample resident.

Appendix III

Survey Instruments Used in the 1999 National Nursing Home Survey

OMB No. 0920-0353: Approval Expires 04/30/2002

<p>FORM NNHS-3 (4-27-99)</p> <p style="text-align: center;">U S DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS ACTING AS COLLECTING AGENT FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION NATIONAL CENTER FOR HEALTH STATISTICS</p> <p style="text-align: center;">CURRENT RESIDENT QUESTIONNAIRE</p> <p style="text-align: center;">1999 NATIONAL NURSING HOME SURVEY</p>	<p>NOTICE – Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; Paperwork Reduction Project (0920-0353) 1600 Clifton Road, MSD-24, Atlanta, GA 30333. Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).</p>						
Section A – ADMINISTRATIVE INFORMATION							
1. Field representative name	2. FR code						
3. Date of interview							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Month</td> <td style="width: 33%; text-align: center;">Day</td> <td style="width: 33%; text-align: center;">Year</td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> </tr> </table>		Month	Day	Year			
Month	Day	Year					
Section B – SAMPLE INFORMATION							
Current resident line number							
Section C – STATUS OF INTERVIEW							
<p>01 <input type="checkbox"/> Complete</p> <p>02 <input type="checkbox"/> Partial</p> <p>03 <input type="checkbox"/> Resident included in sampling list in error</p> <p>04 <input type="checkbox"/> Incorrect sample line number selected</p> <p>05 <input type="checkbox"/> Refused</p> <p>06 <input type="checkbox"/> Unable to locate record</p> <p>07 <input type="checkbox"/> Less than 6 residents selected</p> <p>08 <input type="checkbox"/> Other noninterview – Specify _____</p> <p>09 <input type="checkbox"/> No current residents</p>							
<p>Notes/Comments section</p> <p>01 <input type="checkbox"/> Check this box if comments are written in this section or any other place on this questionnaire.</p>							

Read to each new respondent.

In order to obtain national level data about the residents of nursing homes such as this one, we are collecting information about a sample of current residents. I will be asking questions about the background, health status, and charges for each sampled resident.

The identifying information you provide will be held in strict confidence and will be used ONLY by persons involved in the survey and only for the purposes of the survey.

Do you have the medical file(s) and record(s) for (Read name(s) of selected current resident(s))? If you have a Health Care Finance Administration Minimum Data Set for Nursing Home Resident Assessment form in the records, you may use it while we complete this questionnaire.

If not, ask the respondent to get it/them prior to beginning the interview. Fill sections A and B on the front of all the current resident forms while the respondent gets the records. If no record is available for a resident, try to obtain as much information as possible from whatever administrative records are available and/or from the respondent's memory.

<p>1. What is the resident's sex?</p>	<p>01 <input type="checkbox"/> Male 02 <input type="checkbox"/> Female</p>										
<p>2. What is (his/her) date of birth?</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; border: 1px solid black;">Month</td> <td style="text-align: center; border: 1px solid black;">Day</td> <td style="text-align: center; border: 1px solid black;">Year</td> <td style="padding-left: 20px;">OR</td> <td style="text-align: center;">Current age</td> </tr> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td style="padding: 0 10px;">_____</td> <td style="text-align: center;">Years</td> </tr> </table>	Month	Day	Year	OR	Current age				_____	Years
Month	Day	Year	OR	Current age							
			_____	Years							
<p>3a. Is (he/she) of Hispanic or Latino origin?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>										
<p><i>HAND FLASHCARD 1.</i></p> <p>b. Which of these best describes (his/her) race?</p> <p><i>Mark (X) one or more boxes.</i></p>	<p>01 <input type="checkbox"/> American Indian or Alaska Native 02 <input type="checkbox"/> Asian 03 <input type="checkbox"/> Black or African American 04 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander 05 <input type="checkbox"/> White 06 <input type="checkbox"/> Other – Specify _____ 07 <input type="checkbox"/> Don't know</p>										
<p>4. What is (his/her) current marital status?</p> <p><i>Mark (X) only one box</i></p>	<p>01 <input type="checkbox"/> Married 02 <input type="checkbox"/> Widowed 03 <input type="checkbox"/> Divorced 04 <input type="checkbox"/> Separated 05 <input type="checkbox"/> Never married 06 <input type="checkbox"/> Single 07 <input type="checkbox"/> Don't know</p>										
<p><i>HAND FLASHCARD 2.</i></p> <p>5a. Where was (he/she) staying immediately before entering this facility?</p> <p><i>Mark (X) only one box.</i></p>	<p>01 <input type="checkbox"/> Private residence (house or apartment) 02 <input type="checkbox"/> Rented room, boarding house 03 <input type="checkbox"/> Retirement home 04 <input type="checkbox"/> Board and care, assisted living or residential care facility 05 <input type="checkbox"/> Nursing home 06 <input type="checkbox"/> Hospital 07 <input type="checkbox"/> Rehabilitation facility 08 <input type="checkbox"/> Other inpatient health facility (including mental health facility) 09 <input type="checkbox"/> Other – Specify _____ 10 <input type="checkbox"/> Don't know</p> <p style="text-align: right; margin-right: 50px;">} SKIP to item 6</p>										
<p>b. At that time, was (he/she) living with family members, nonfamily members, both family and nonfamily members, or alone?</p>	<p>01 <input type="checkbox"/> With family members 02 <input type="checkbox"/> With nonfamily members 03 <input type="checkbox"/> With both family members and nonfamily members 04 <input type="checkbox"/> Alone 05 <input type="checkbox"/> Don't know</p>										

<p><i>HAND FLASHCARD 3.</i></p> <p>10. Which of these aids does (he/she) currently use?</p> <p><i>Mark (X) all that apply.</i></p> <p>PROBE: Any other aids?</p>	<p>00 <input type="checkbox"/> No aids used</p> <p>01 <input type="checkbox"/> Eye glasses (including contact lenses)</p> <p>02 <input type="checkbox"/> Hearing aid</p> <p>03 <input type="checkbox"/> Dentures</p> <p>04 <input type="checkbox"/> Transfer equipment</p> <p>05 <input type="checkbox"/> Wheelchair</p> <p>06 <input type="checkbox"/> Cane</p> <p>07 <input type="checkbox"/> Walker</p> <p>08 <input type="checkbox"/> Crutches</p> <p>09 <input type="checkbox"/> Brace (any type)</p> <p>10 <input type="checkbox"/> Oxygen</p> <p>11 <input type="checkbox"/> Bedside commode</p> <p>12 <input type="checkbox"/> Other aids or devices – <i>Specify</i> <input checked="" type="checkbox"/></p> <hr/> <p>13 <input type="checkbox"/> Don't know</p>									
<p><i>For items 11a-12b, refer to item 10.</i></p> <p>11a. Does (he/she) have any difficulty in seeing (when wearing glasses)?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No</p> <p>03 <input type="checkbox"/> Not applicable (e.g., comatose)</p> <p>04 <input type="checkbox"/> Don't know</p> <p>} <i>SKIP to item 12a</i></p>									
<p><i>HAND FLASHCARD 4.</i></p> <p>b. Is (his/her) sight (when wearing glasses) partially, severely, or completely impaired as defined on this card?</p>	<p>01 <input type="checkbox"/> Partially impaired</p> <p>02 <input type="checkbox"/> Severely impaired</p> <p>03 <input type="checkbox"/> Completely lost, blind</p> <p>04 <input type="checkbox"/> Don't know</p>									
<p>12a. Does (he/she) have any difficulty in hearing (when wearing a hearing aid)?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No</p> <p>03 <input type="checkbox"/> Not applicable (e.g., comatose)</p> <p>04 <input type="checkbox"/> Don't know</p> <p>} <i>SKIP to item 13a</i></p>									
<p><i>HAND FLASHCARD 5.</i></p> <p>b. Is (his/her) hearing (when wearing a hearing aid) partially, severely, or completely impaired, as defined on this card?</p>	<p>01 <input type="checkbox"/> Partially impaired</p> <p>02 <input type="checkbox"/> Severely impaired</p> <p>03 <input type="checkbox"/> Completely lost, deaf</p> <p>04 <input type="checkbox"/> Don't know</p>									
<p>13a. Does (he/she) currently receive any assistance in bathing or showering?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No – <i>SKIP to item 14a</i></p>									
<p>b. Does (he/she) bathe or shower with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<table border="0"> <tr> <td></td> <td>Yes</td> <td>No</td> </tr> <tr> <td>(1) Special equipment?</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>(2) Another person?</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> </table>		Yes	No	(1) Special equipment?	01 <input type="checkbox"/>	02 <input type="checkbox"/>	(2) Another person?	01 <input type="checkbox"/>	02 <input type="checkbox"/>
	Yes	No								
(1) Special equipment?	01 <input type="checkbox"/>	02 <input type="checkbox"/>								
(2) Another person?	01 <input type="checkbox"/>	02 <input type="checkbox"/>								
<p>14a. Does (he/she) currently receive any assistance in dressing?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No – <i>SKIP to item 15a</i></p>									
<p>b. Does (he/she) dress with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<table border="0"> <tr> <td></td> <td>Yes</td> <td>No</td> </tr> <tr> <td>(1) Special equipment?</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>(2) Another person?</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> </table>		Yes	No	(1) Special equipment?	01 <input type="checkbox"/>	02 <input type="checkbox"/>	(2) Another person?	01 <input type="checkbox"/>	02 <input type="checkbox"/>
	Yes	No								
(1) Special equipment?	01 <input type="checkbox"/>	02 <input type="checkbox"/>								
(2) Another person?	01 <input type="checkbox"/>	02 <input type="checkbox"/>								

<p>15a. Does (he/she) currently receive any assistance in eating?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – <i>SKIP to item 16a</i></p>
<p>b. Does (he/she) eat with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>16a. Is (he/she) bedfast?</p>	<p>01 <input type="checkbox"/> Yes – <i>SKIP to item 20a</i> 02 <input type="checkbox"/> No</p>
<p>b. Is (he/she) chairfast?</p>	<p>01 <input type="checkbox"/> Yes – <i>SKIP to item 20a</i> 02 <input type="checkbox"/> No</p>
<p>17a. Does (he/she) currently receive any assistance in transferring in and out of bed or a chair?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No } <i>SKIP to item 18a</i> 03 <input type="checkbox"/> Don't know</p>
<p>b. Does (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>18a. Does (he/she) currently receive any assistance in walking?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – <i>SKIP to item 19a</i></p>
<p>b. Does (he/she) walk with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>19a. Does (he/she) go outside the grounds of this facility?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – <i>SKIP to item 20a</i></p>
<p>b. When (he/she) goes outside the grounds, does (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>20a. Does (he/she) have an ostomy, an indwelling catheter or similar device?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – <i>SKIP to item 20c</i></p>
<p>b. Does (he/she) receive any help from another person in caring for this device?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p>
<p>c. Does (he/she) currently receive any assistance using the toilet room?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – <i>SKIP to item 21</i> 03 <input type="checkbox"/> Does not use toilet room (ostomy patient, chairfast, etc.) – <i>SKIP to item 21</i></p>
<p>d. Does (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>

<p>21. Does (he/she) currently have any difficulty in controlling (his/her) bowels?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Not applicable (e.g., infant, had a colostomy)</p>															
<p>22. Does (he/she) currently have any difficulty in controlling (his/her) bladder?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Not applicable (e.g., infant, has an indwelling catheter, had an ostomy)</p>															
<p><i>HAND FLASHCARD 6.</i></p> <p>23. Does (he/she) currently receive personal help or supervision in any of the following activities:</p> <p>a. Care of personal possessions?</p> <p>b. Managing money?</p> <p>c. Securing personal items such as newspapers, toilet articles, snack food? ..</p> <p>d. Using the telephone (dialing or receiving calls)?</p>	<table border="0"> <tr> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td>a.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>b.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>c.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>d.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> </table>		Yes	No	a.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	b.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	c.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	d.	01 <input type="checkbox"/>	02 <input type="checkbox"/>
	Yes	No														
a.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
b.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
c.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
d.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
<p>24. During the past 12 months, has (he/she) had a flu shot at this facility or any other location?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>															
<p>25. Has (he/she) EVER had a pneumococcal vaccine, that is, pneumonia vaccination?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>															
<p>26. During the past 10 years has (he/she) had a Tetanus-Diphtheria (Td) Toxoid booster at this facility or any other location?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>															
<p>Notes/Comments</p>																

INSTRUCTION BOX

For questions 27, 29, 30, and 31, use the phrase "LAST MONTH" if the resident was admitted last month or earlier. Use the phrase "SINCE ADMISSION" if the resident was admitted this month.

HAND FLASHCARD 7.

27. (Last month/since admission) which of these services were received by (him/her), either inside or outside this facility?

Mark (X) all that apply.

PROBE: Any other services?

- 00 None
- 01 Dental care
- 02 Equipment or devices
- 03 Hospice services
- 04 Medical services
- 05 Mental health services
- 06 Nursing services
- 07 Nutritional services
- 08 Occupational therapy
- 09 Personal care
- 10 Physical therapy
- 11 Prescribed medicines or nonprescribed medicines
- 12 Sheltered employment
- 13 Social services
- 14 Special education
- 15 Speech or hearing therapy
- 16 Transportation
- 17 Vocational rehabilitation
- 18 Other – *Specify*

HAND FLASHCARD 8.

28. What was the PRIMARY source of payment for (his/her) care for the month of (Month and year of admission)?

Refer to item 6 on page 3.

Mark (X) only one source.

- 01 Private insurance
- 02 Own income, family support, Social Security benefits, retirement funds
- 03 Supplemental Security Income (SSI)
- 04 Medicare
- 05 Medicaid
- 06 Other government assistance or welfare
- 07 Religious organizations, foundations, agencies
- 08 VA contract, pensions, or other VA compensation
- 09 Payment source not yet determined
- 10 Other – *Specify*

11 Don't know

HAND FLASHCARD 8.

29. (Last month/since admission) what was the PRIMARY source of payment for (his/her) care?

Mark (X) only one source.

- 01 Private insurance
- 02 Own income, family support, Social Security benefits, retirement funds
- 03 Supplemental Security Income (SSI)
- 04 Medicare
- 05 Medicaid
- 06 Other government assistance or welfare
- 07 Religious organizations, foundations, agencies
- 08 VA contract, pensions, or other VA compensation
- 09 Payment source not yet determined
- 10 Other – *Specify*

HAND FLASHCARD 8.

30. (Last month/since admission) what were all the secondary sources of payment for (his/her) care?

Mark (X) all that apply.

PROBE: Any other sources?

- 00 None
- 01 Private insurance
- 02 Own income, family support, Social Security benefits, retirement funds
- 03 Supplemental Security Income (SSI)
- 04 Medicare
- 05 Medicaid
- 06 Other government assistance or welfare
- 07 Religious organizations, foundations, agencies
- 08 VA contract, pensions, or other VA compensation
- 09 Payment source not yet determined
- 10 Other – Specify

31. What were the total charges billed for (his/her) care, including all charges for services, drugs and special medical supplies?

Mark (X) only one box.

Put dates in the boxes shown ONLY if the charge is NOT for a month, day, or week.

\$ _____ per

00 Mark (X) if drugs and medical supplies are included in this total.

- 01 Month
- 02 Day
- 03 Week
- 04 Other period – Specify

Month	Day	Year		TO	Month	Day	Year

- 05 Not billed yet
- 00 No charge was made

FILL SECTION C ON THE COVER OF THIS FORM

FR Date Check – Prior to leaving the facility, you must verify the dates you entered in other sections of this questionnaire. Copy the dates below to the space provided. Check that the dates go from the oldest to the newest and are logical. Correct errors by referring to the resident records and/or facility staff.

Date of Birth – Question 2 on page 2

Month	Day	Year	

Date of Admission – Question 6 on page 3

Month	Day	Year	

Date of Interview – Item A3 on cover

Month	Day	Year	

Notes/Comments

FORM **NNHS-5**
(4-27-99)

U S DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR HEALTH STATISTICS

**DISCHARGED RESIDENT
QUESTIONNAIRE**

1999 NATIONAL NURSING HOME SURVEY

NOTICE - Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; Paperwork Reduction Project (0920-0353) 1600 Clifton Road, MSD-24, Atlanta, GA 30333. Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m)

Section A - ADMINISTRATIVE INFORMATION

1. Field representative name	2. FR code	3. Date of interview		
		Month	Day	Year

Section B - SAMPLE INFORMATION

1. Discharged resident line number	2. Date of discharge		
	Month	Day	Year

Section C - STATUS OF INTERVIEW

- 01 Complete
- 02 Partial
- 03 Resident included in sampling list in error
- 04 Incorrect sample line number selected
- 05 Refused
- 06 Unable to locate record
- 07 Less than 6 discharges selected
- 08 Other noninterview - *Specify* _____
- 09 No discharges

Notes/Comments section

- 01 Check this box if comments are written in this section or any other place on this questionnaire.

Read to each new respondent.

In order to obtain national level data about the residents of nursing homes such as this one, we are collecting information about a sample of discharges. I will be asking questions about the background, health status, and charges for each sampled resident.

The identifying information you provide will be held in strict confidence and will be used ONLY by persons involved in the survey and only for the purposes of the survey.

Do you have the medical file(s) and record(s) for (Read name(s) of selected current resident(s))? If you have a Health Care Finance Administration Minimum Data Set for Nursing Home Resident Assessment form in the records, you may use it while we complete this questionnaire.

If not, ask the respondent to get it/them prior to beginning the interview. Fill sections A and B on the front of all the discharged resident forms while the respondent gets the records. If no record is available for a resident, try to obtain as much information as possible from whatever administrative records are available and/or from the respondent's memory.

<p>1. What was the resident's sex?</p>	<p>01 <input type="checkbox"/> Male 02 <input type="checkbox"/> Female</p>														
<p>2. What was (his/her) date of birth?</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 10px;">Age at admission</td> <td style="border: 1px solid black; padding: 2px;">Month</td> <td style="border: 1px solid black; padding: 2px;">Day</td> <td style="border: 1px solid black; padding: 2px;">Year</td> <td style="padding-left: 20px;">OR</td> <td style="border-bottom: 1px solid black; width: 50px;"></td> <td style="padding-left: 5px;">Years</td> </tr> <tr> <td></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td></td> <td></td> <td></td> </tr> </table>	Age at admission	Month	Day	Year	OR		Years							
Age at admission	Month	Day	Year	OR		Years									
<p>3a. Was (he/she) of Hispanic or Latino origin?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>														
<p><i>HAND FLASHCARD 1.</i></p> <p>b. Which of these best described (his/her) race?</p> <p><i>Mark (X) one or more boxes.</i></p>	<p>01 <input type="checkbox"/> American Indian or Alaska Native 02 <input type="checkbox"/> Asian 03 <input type="checkbox"/> Black or African American 04 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander 05 <input type="checkbox"/> White 06 <input type="checkbox"/> Other – <i>Specify</i> _____ 07 <input type="checkbox"/> Don't know</p>														
<p>4. What was (his/her) marital status at the time of discharge?</p> <p><i>Mark (X) only one box.</i></p>	<p>01 <input type="checkbox"/> Married 02 <input type="checkbox"/> Widowed 03 <input type="checkbox"/> Divorced 04 <input type="checkbox"/> Separated 05 <input type="checkbox"/> Never married 06 <input type="checkbox"/> Single 07 <input type="checkbox"/> Don't know</p>														
<p><i>HAND FLASHCARD 2.</i></p> <p>5a. Where was (he/she) staying immediately before entering this facility?</p> <p><i>Mark (X) only one box.</i></p>	<p>01 <input type="checkbox"/> Private residence (house or apartment) 02 <input type="checkbox"/> Rented room, boarding house 03 <input type="checkbox"/> Retirement home 04 <input type="checkbox"/> Board and care, assisted living or residential care facility 05 <input type="checkbox"/> Nursing home 06 <input type="checkbox"/> Hospital 07 <input type="checkbox"/> Rehabilitation facility 08 <input type="checkbox"/> Other inpatient health facility (including mental health facility) 09 <input type="checkbox"/> Other – <i>Specify</i> <input checked="" type="checkbox"/> _____ 10 <input type="checkbox"/> Don't know</p> <div style="position: absolute; right: 0; top: 50%; transform: translateY(-50%); font-size: 2em;">} SKIP to item 6</div>														
<p>b. At that time, was (he/she) living with family members, nonfamily members, both family and nonfamily members, or alone?</p>	<p>01 <input type="checkbox"/> With family members 02 <input type="checkbox"/> With nonfamily members 03 <input type="checkbox"/> With both family members and nonfamily members 04 <input type="checkbox"/> Alone 05 <input type="checkbox"/> Don't know</p>														

INSTRUCTION BOX

For items 10 through 21, use the phrase "AT THE TIME OF DISCHARGE" if the resident was discharged alive. Use the phrase "IMMEDIATELY PRIOR TO DISCHARGE" if the resident was discharged dead.

HAND FLASHCARD 3.

10. The following questions refer to the resident's status at the (time of discharge/immediately prior to discharge) on (Date of discharge).

(At the time of discharge/immediately prior to discharge), which of these aids did (he/she) regularly use?

Mark (X) all that apply.

PROBE: Any other aids?

- 00 No aids used
- 01 Eye glasses (including contact lenses)
- 02 Hearing aid
- 03 Dentures
- 04 Transfer equipment
- 05 Wheelchair
- 06 Cane
- 07 Walker
- 08 Crutches
- 09 Brace (any type)
- 10 Oxygen
- 11 Bedside commode
- 12 Other aids or devices – Specify

13 Don't know

For items 11a-12b, refer to item 10.

11a. (At the time of discharge/immediately prior to discharge), did (he/she) have any difficulty in seeing (when wearing glasses)?

- 01 Yes
 - 02 No
 - 03 Not applicable (e.g., comatose)
 - 04 Don't know
- } SKIP to item 12a

HAND FLASHCARD 4.

b. Was (his/her) sight (when wearing glasses) partially, severely, or completely impaired as defined on this card?

- 01 Partially impaired
- 02 Severely impaired
- 03 Completely lost, blind
- 04 Don't know

12a. (At the time of discharge/immediately prior to discharge), did (he/she) have any difficulty in hearing (when wearing a hearing aid)?

- 01 Yes
 - 02 No
 - 03 Not applicable (e.g., comatose)
 - 04 Don't know
- } SKIP to item 13a

HAND FLASHCARD 5.

b. Was (his/her) hearing (when wearing a hearing ing aid) partially, severely, or completely impaired, as defined on this card?

- 01 Partially impaired
- 02 Severely impaired
- 03 Completely lost, deaf
- 04 Don't know

13a. (At the time of discharge/immediately prior to discharge), did (he/she) receive any assistance in bathing or showering?

- 01 Yes
- 02 No – SKIP to item 14a
- 03 Don't know

b. Did (he/she) bathe or shower with the help of:

- | | | |
|----------------------------------|-----------------------------|-----------------------------|
| | Yes | No |
| (1) Special equipment? | 01 <input type="checkbox"/> | 02 <input type="checkbox"/> |
| (2) Another person? | 01 <input type="checkbox"/> | 02 <input type="checkbox"/> |

14a. (At the time of discharge/immediately prior to discharge), did (he/she) receive any assistance in dressing?

- 01 Yes
- 02 No – SKIP to item 15a

b. Did (he/she) dress with the help of:

- | | | |
|----------------------------------|-----------------------------|-----------------------------|
| | Yes | No |
| (1) Special equipment? | 01 <input type="checkbox"/> | 02 <input type="checkbox"/> |
| (2) Another person? | 01 <input type="checkbox"/> | 02 <input type="checkbox"/> |

<p>15a. (At the time of discharge/immediately prior to discharge), did (he/she) receive any assistance in eating?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – SKIP to item 16a</p>
<p>b. Did (he/she) eat with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>16a. During the last 7 days before discharge, from (Date 7 days prior to discharge) to (Date of discharge), was (he/she) bedfast?</p>	<p>01 <input type="checkbox"/> Yes – SKIP to item 20a 02 <input type="checkbox"/> No</p>
<p>b. Was (he/she) chairfast?</p>	<p>01 <input type="checkbox"/> Yes – SKIP to item 20a 02 <input type="checkbox"/> No</p>
<p>17a. (At the time of discharge/immediately prior to discharge), did (he/she) receive any assistance in transferring in and out of bed or a chair?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No } SKIP to item 18a 03 <input type="checkbox"/> Don't know</p>
<p>b. Did (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>18a. (At the time of discharge/immediately prior to discharge), did (he/she) receive any assistance in walking?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – SKIP to item 19a</p>
<p>b. Did (he/she) walk with the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>19a. (At the time of discharge/immediately prior to discharge), did (he/she) go outside the grounds of this facility?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – SKIP to item 20a</p>
<p>b. When (he/she) went outside the grounds, did (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>
<p>20a. (At the time of discharge/immediately prior to discharge), did (he/she) have an ostomy, an indwelling catheter or similar device?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – SKIP to item 20c</p>
<p>b. Did (he/she) receive personal help from another person in caring for this device?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p>
<p>c. Did (he/she) receive any assistance using the toilet room?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No – SKIP to item 21 03 <input type="checkbox"/> Does not use toilet room (ostomy patient, chairfast, etc.) – SKIP to item 21</p>
<p>d. Did (he/she) require the help of:</p> <p>(1) Special equipment?</p> <p>(2) Another person?</p>	<p>Yes No</p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p> <p>01 <input type="checkbox"/> 02 <input type="checkbox"/></p>

<p>21. (At the time of discharge/immediately prior to discharge), did (he/she) have any difficulty in controlling (his/her) bowels?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Not applicable (e.g., infant, had a colostomy)</p>															
<p>22. Did (he/she) have any difficulty in controlling (his/her) bladder?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Not applicable (e.g., infant, has an indwelling catheter, had an ostomy)</p>															
<p><i>HAND FLASHCARD 6.</i></p>																
<p>23. (At the time of discharge/immediately prior to discharge), did (he/she) receive personal help or supervision in any of the following activities:</p> <p>a. Care of personal possessions?</p> <p>b. Managing money?</p> <p>c. Securing personal items such as newspapers, toilet articles, snack food?</p> <p>d. Using the telephone (dialing or receiving calls)?</p>	<table border="0"> <tr> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td>a.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>b.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>c.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> <tr> <td>d.</td> <td>01 <input type="checkbox"/></td> <td>02 <input type="checkbox"/></td> </tr> </table>		Yes	No	a.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	b.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	c.	01 <input type="checkbox"/>	02 <input type="checkbox"/>	d.	01 <input type="checkbox"/>	02 <input type="checkbox"/>
	Yes	No														
a.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
b.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
c.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
d.	01 <input type="checkbox"/>	02 <input type="checkbox"/>														
<p><i>HAND FLASHCARD 7.</i></p>																
<p>24. During the billing period that included (Date of discharge) which of these services were received by (him/her) either inside or outside this facility?</p> <p><i>Mark (X) all that apply.</i></p> <p>PROBE: Any other services?</p>	<p>00 <input type="checkbox"/> None 01 <input type="checkbox"/> Dental care 02 <input type="checkbox"/> Equipment or devices 03 <input type="checkbox"/> Hospice services 04 <input type="checkbox"/> Medical services 05 <input type="checkbox"/> Mental health services 06 <input type="checkbox"/> Nursing services 07 <input type="checkbox"/> Nutritional services 08 <input type="checkbox"/> Occupational therapy 09 <input type="checkbox"/> Personal care 10 <input type="checkbox"/> Physical therapy 11 <input type="checkbox"/> Prescribed medicines or nonprescribed medicines 12 <input type="checkbox"/> Sheltered employment 13 <input type="checkbox"/> Social services 14 <input type="checkbox"/> Special education 15 <input type="checkbox"/> Speech or hearing therapy 16 <input type="checkbox"/> Transportation 17 <input type="checkbox"/> Vocational rehabilitation 18 <input type="checkbox"/> Other – <i>Specify</i> <u> </u></p>															
<p><i>HAND FLASHCARD 8.</i></p>																
<p>25. What was the PRIMARY source of payment for (his/her) care for the month of (Month and year of discharge)?</p> <p><i>Refer to item B2 on the cover.</i></p> <p><i>Mark (X) only one source.</i></p>	<p>01 <input type="checkbox"/> Private insurance 02 <input type="checkbox"/> Own income, family support, Social Security benefits, retirement funds 03 <input type="checkbox"/> Supplemental Security Income (SSI) 04 <input type="checkbox"/> Medicare 05 <input type="checkbox"/> Medicaid 06 <input type="checkbox"/> Other government assistance or welfare 07 <input type="checkbox"/> Religious organizations, foundations, agencies 08 <input type="checkbox"/> VA contract, pensions, or other VA compensation 09 <input type="checkbox"/> Payment source not yet determined 10 <input type="checkbox"/> Other – <i>Specify</i> <u> </u></p> <p>11 <input type="checkbox"/> Don't know</p>															

HAND FLASHCARD 8.

26. What were all the secondary sources of payment for (his/her) care for the month of (Month and year of discharge)?

Mark (X) all that apply.

PROBE: Any other sources?

- 00 None
- 01 Private insurance
- 02 Own income, family support, Social Security benefits, retirement funds
- 03 Supplemental Security Income (SSI)
- 04 Medicare
- 05 Medicaid
- 06 Other government assistance or welfare
- 07 Religious organizations, foundations, agencies
- 08 VA contract, pensions, or other VA compensation
- 09 Payment source not yet determined
- 10 Other – Specify

11 Don't know

27. What were the total charges billed for (his/her) care, including all charges for services, drugs and special medical supplies?

Mark (X) only one box.

Put dates in the boxes shown ONLY if the charge is NOT for a month, day, or week.

\$ _____ per

00 Mark (X) if drugs and medical supplies are included in this total.

- 01 Month
- 02 Day
- 03 Week
- 04 Other period – Specify

Month	Day	Year	TO	Month	Day	Year

- 05 Not billed yet
- 00 No charge was made

FILL SECTION C ON THE COVER OF THIS FORM

FR Date Check – Prior to leaving the facility, you must verify the dates you entered in other sections of this questionnaire. Copy the dates below to the space provided. Check that the dates go from the oldest to the newest and are logical. Correct errors by referring to the resident records and/or facility staff.

Date of Birth – Question 2 on page 2

Month	Day	Year

Date of Admission – Question 6 on page 3

Month	Day	Year

Date of Discharge – Item B2 on cover

Month	Day	Year

Date of Interview – Item A3 on cover

Month	Day	Year

Notes/Comments

<p>FORM NNHS-4 (4-27-99)</p> <p style="text-align: center;">U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS ACTING AS COLLECTING AGENT FOR THE DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION NATIONAL CENTER FOR HEALTH STATISTICS</p> <p style="text-align: center;">DISCHARGED RESIDENT SAMPLING LIST</p> <p style="text-align: center;">1999 NATIONAL NURSING HOME SURVEY</p>	<p>NOTICE – Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; Paperwork Reduction Project (0920-0353) 1600 Clifton Road, MSD-24, Atlanta, GA 30333. Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).</p>
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Section A – ADMINISTRATIVE INFORMATION

1. Field representative name	Code													
2. Designated month for discharged sample														
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Month	Day	Year				Month	Day	Year					
Month	Day	Year												
Month	Day	Year												
3. Respondent name	4. Respondent title	5. Today's date												
		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Month	Day	Year									
Month	Day	Year												

Section B – SAMPLING LIST FINAL STATUS

<p>01 <input type="checkbox"/> Listing for complete month</p> <p>02 <input type="checkbox"/> Partial listing (from designated month only)</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;"> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table> </td> <td style="font-size: 3em; vertical-align: middle; padding: 0 10px;">}</td> <td style="border: 1px solid black; padding: 5px; width: 50%;"> <p style="font-size: 0.8em;">If you marked box 01 or 02, CIRCLE the number that indicates the number of residents you selected.</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td> </tr> </table> </td> </tr> </table> <p>03 <input type="checkbox"/> Refused listing information</p> <p>04 <input type="checkbox"/> Listing records not available</p> <p>05 <input type="checkbox"/> No discharges</p> <p>06 <input type="checkbox"/> Other – Specify _____</p>	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Month	Day	Year				Month	Day	Year				}	<p style="font-size: 0.8em;">If you marked box 01 or 02, CIRCLE the number that indicates the number of residents you selected.</p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td> </tr> </table>	1	2	3	4	5	6
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Month	Day	Year																			
Month	Day	Year																			
1	2	3	4	5	6																

Section C – INTRODUCTION

READ – In order to obtain national level data about discharged residents of nursing homes such as this one, we are collecting information about a sample of discharges. This information and the list of discharges you provide will be held in strict confidence and will be used ONLY by persons involved in the survey and only for the purposes of the survey. Please give me the list of all residents discharged alive or deceased from (See item 2 for designated month for discharge sample) and their specific dates of discharge. If any resident was discharged more than once during this time period, list them and the discharge date for EACH time they were discharged. Be sure to include any residents currently being served by your facility who were also discharged from (First and last day of designated month), so that I may select the sample.

Notes

Section D - LISTING PROCEDURES

FOLLOW THE STEPS BELOW TO LIST DISCHARGES -

STEP 1. Start listing the discharges on line number 1 on page 3 of this form. List the discharges consecutively in the order in which they are given to you. Be sure to complete the "Page of Page" item.

NOTE - If the facility supplies an appropriate list that you can use, do not transcribe the information onto the sampling list. Just number the discharges on the provided list; and go to step 2.

STEP 2. Review the list. Verify that all eligible discharges have been listed. Delete any duplicate discharges and any discharges that do not fall into the designated month. If you have 2 or more identical entries, probe to determine if it is a duplicate entry. Renumber the lines if you add or delete any discharges.

CHECK ITEM A

Answer the questions below before continuing with STEP 3.

- a. Does this list include all discharges from this facility that occurred between (First and last day of designated month) including those who died? Yes - GO to item b. No - Add the discharge(s) to the list.

- b. Is there anyone else who was a resident of this facility who was discharged or died between (First and last day of designated month) who should be included on this list? Yes - Add the discharge(s) to the list. No - GO to STEP 3.

STEP 3. Enter the total number of discharges. _____ Number
IMPORTANT - This number is vital for estimation purposes and may be obtained from a source other than a list.

STEP 4. Look at the Sample Selection Table. Find the number in the column labeled "Total # listed" that matches the total number of discharges.

STEP 5. Circle the line numbers on the listing sheets that correspond to those in the columns labeled "Sample line numbers."

STEP 6. Enter the amount of circled line numbers on the listing sheets. _____ Number

STEP 7. The discharges to be sampled are those listed on lines with a circled line number. Enter the line number and discharge date of each sampled discharge below. Use this information to complete Section B of a NNHS-5, Discharged Resident Questionnaire, for each sampled discharge.

Line number	Discharge date (Month/Day/Year)
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Notes

DISCHARGED RESIDENT SAMPLING LIST

(After selecting your sample and completing all the questionnaires, return these pages to the facility.)

Line number (a)	Discharged resident(s) (b)	Discharge date (Month/Day/Year) (c)
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		
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DISCHARGED RESIDENT SAMPLING LIST - Continued

Line number (a)	Discharged resident(s) (b)	Discharge date (Month/Day/Year) (c)
51		
52		
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55		
56		
57		
58		
59		
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FORM **NNHS-2**
(4-27-99)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR HEALTH STATISTICS

**CURRENT RESIDENT SAMPLING LIST
1999 NATIONAL NURSING HOME SURVEY**

NOTICE – Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; ATTN: Paperwork Reduction Project (0920-0353), 1600 Clifton Road, MSD-24, Atlanta, GA 30333. Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

Section A – ADMINISTRATIVE INFORMATION

1. Field representative name		Code						
2. Respondent name	3. Respondent title	4. Today's date						
		<table border="1"> <tr> <th>Month</th> <th>Day</th> <th>Year</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Month	Day	Year			
Month	Day	Year						

Section B – SAMPLING LIST FINAL STATUS

01 Listing as of night before survey →

02 Refused listing information

03 Listing records not available

04 No current residents

05 Other – Specify _____

If you marked box 01, CIRCLE the number that indicates the number of residents you selected.

1	2	3	4	5	6
---	---	---	---	---	---

Section C – INTRODUCTION

READ – In order to obtain national level data about the residents of nursing homes such as this one, we are collecting information about a sample of current residents. This information and the list you provide will be held in strict confidence and will be used ONLY by persons involved in the survey and only for the purposes of the survey. Please give me the list of all current residents; that is, all residents on the rolls of this facility as of midnight last night, so that I may select the sample.

Notes

Section D – LISTING PROCEDURES

FOLLOW THE STEPS BELOW TO LIST CURRENT RESIDENTS –

STEP 1. Start listing the residents on line number 1 on page 3 of this form. List the residents consecutively in the order in which they are given to you. Be sure to complete the "Page of Page" item.

NOTE – If the facility supplies an appropriate list that you can use, do not transcribe the information onto the sampling list. Just number the residents on the provided list; and go to step 2.

STEP 2. Review the list. Verify that all eligible residents have been listed. Delete any duplicate entries and any residents who do not meet the definition of a current resident. Renumber the lines if you add or delete any residents.

**CHECK
ITEM A**

Answer the questions below before continuing with STEP 3.

- a. Does this list include all residents of this facility as of midnight last night? Yes – GO to item b. No – Add the resident(s) to the list.
- b. Has everyone who died or was discharged from this facility as of midnight last night been removed from the list? Yes – GO to item c. No – Delete the resident(s) from the list.
- c. Is there anyone else who is a resident of this facility who should be included on this list? Yes – Add the resident(s) to the list. No – GO to STEP 3.

STEP 3. Enter the total number of residents. _____
IMPORTANT – This number is vital for estimation purposes and may be obtained from a source other than a list. Number

STEP 4. Look at the Sample Selection Table. Find the number in the column labeled "Total # listed" that matches the total number of residents.

STEP 5. Circle the line numbers on the listing sheets that correspond to those in the columns labeled "Sample line numbers."

STEP 6. Enter the amount of circled line numbers on the listing sheets. _____
 Number

STEP 7. The current residents to be sampled are those listed on lines with a circled line number. Enter the line number of each sampled resident below. Use this information to complete Section B of a Form HHCS-3, Current Resident Questionnaire, for each sampled resident.

Line number

Notes

CURRENT RESIDENT SAMPLING LIST

(After selecting your sample and completing all the questionnaires, return these pages to the facility.)

Line number (a)	Current resident(s) (b)
01	
02	
03	
04	
05	
06	
07	
08	
09	
10	
11	
12	
13	
14	
15	
16	
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42	
43	
44	
45	
46	
47	
48	
49	
50	

CURRENT RESIDENT SAMPLING LIST - Continued

Line number (a)	Current resident(s) (b)
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
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FORM **NNHS-1**
(4-27-98)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR HEALTH STATISTICS

FACILITY QUESTIONNAIRE
1999 NATIONAL NURSING HOME SURVEY

NOTICE – Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, Paperwork Reduction Project (0920-0353) 1600 Clifton Road, MSD-24, Atlanta, GA 30333. Information contained on this form which would permit identification of any individual or establishment has been collected with a guarantee that it will be held in strict confidence, will be used for purposes stated for this study, and will not be disclosed or released to others without the consent of the individual or establishment in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

Section A – FACILITY INFORMATION

1a. Facility telephone number	b. Alternate telephone number	c. Alternate telephone number
2a. Administrator name		b. Respondent name

Section B – RECORD OF CONTACTS

Day (a)	Date (b)	Time (c)	Notes (d)
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	
		a.m.	
		p.m.	

Section C – RECORD OF INTERVIEW

1. STATUS OF INTERVIEW – Mark (X) appropriate box.

01 <input type="checkbox"/> Complete interview	05 <input type="checkbox"/> Not a nursing home	09 <input type="checkbox"/> Merged with (Control No.) _____
02 <input type="checkbox"/> Partial interview	06 <input type="checkbox"/> Temporarily closed	10 <input type="checkbox"/> Duplicate (Control No. of duplicate) _____
03 <input type="checkbox"/> Refusal	07 <input type="checkbox"/> Not yet in operation	11 <input type="checkbox"/> Other noninterview – <i>Specify</i> _____
04 <input type="checkbox"/> Unable to locate	08 <input type="checkbox"/> No longer operating	

2. Date of interview

Month	Day	Year

3. Field Representative name _____ **FR Code** _____

Notes/Comments section

01 Check this box if comments are written in this section or any other place on this questionnaire.

Facility FAX number _____

Section D – ARRANGING THE ADMINISTRATOR APPOINTMENT										
<p>1. INTRODUCTION</p> <p>Good morning (afternoon). My name is (Name). I'm from the Bureau of the Census. We are currently conducting the National Nursing Home Survey for the National Center for Health Statistics of the Centers for Disease Control and Prevention. We are studying nursing homes and their residents. You should have received a letter from Edward J. Sondik, the Director of the National Center for Health Statistics, which describes this project. Have you received this letter?</p> <p><input type="checkbox"/> Yes – Skip to Item 3, NAME VERIFICATION. <input type="checkbox"/> No – Continue with Item 2, SURVEY EXPLANATION.</p>	<p>3. NAME VERIFICATION</p> <p>I would like to verify some information from my records. Is (Name of facility on label) the correct name of your facility?</p> <p><input type="checkbox"/> Yes – Go to Item 4, ADDRESS VERIFICATION <input type="checkbox"/> No – Enter correct facility name below. <i>z</i></p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>									
<p>2. SURVEY EXPLANATION</p> <p><i>If administrator wants a copy of the letter, explain that you will bring a copy when you visit the facility.</i></p> <p>I'm sorry that you did not receive the letter. Let me briefly outline its contents.</p> <p>The National Nursing Home Survey is authorized under Section 306 of the Public Health Service Act to collect baseline information about nursing care facilities, their services, and residents. The statistics compiled from the data are used to support research for effective treatment of long-term health problems and to study utilization of nursing facilities and the efficient use of the Nation's health care resources.</p> <p>All information which would permit identification of the individual or individual facility will be held in strict confidence, will be used ONLY by persons involved in the survey, and will not be disclosed or released to others for any purpose.</p> <p>The survey includes a small sample of nursing homes. Although your participation is voluntary and there are no penalties for refusing to answer any questions, it is essential that we obtain data from all sample facilities.</p> <p><i>READ IF NECESSARY:</i></p> <p>We are asking participants for a list of current residents and a list of discharges during a designated one-month period. We will draw a sample of 6 current residents and a sample of 6 discharges from the lists and complete a questionnaire for each of the 12 sampled residents.</p> <p><i>Continue with Item 3, NAME VERIFICATION</i></p>	<p>4. ADDRESS VERIFICATION</p> <p>Is (Address of facility on label) the correct address?</p> <p><input type="checkbox"/> Yes – Go to Item 5 – SET APPOINTMENT <input type="checkbox"/> No – Enter correct facility address below. <i>z</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Number</td> <td style="width: 45%;">Street</td> <td style="width: 30%;">P.O. Box, Route, etc.</td> </tr> <tr> <td colspan="3">City or town</td> </tr> <tr> <td>State</td> <td colspan="2">ZIP code</td> </tr> </table>	Number	Street	P.O. Box, Route, etc.	City or town			State	ZIP code	
Number	Street	P.O. Box, Route, etc.								
City or town										
State	ZIP code									
<p>5. SET APPOINTMENT</p> <p>I would like to arrange a morning appointment at your convenience to conduct the survey. What would be a convenient date and time to visit your facility?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Day</td> <td style="width: 25%;">Date</td> <td style="width: 25%;">Time</td> <td style="width: 25%;">a.m. p.m.</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	Day	Date	Time	a.m. p.m.					<p>6. Could you give me directions to your facility from some easy to identify starting point? (Record directions in number 7 below.)</p> <p>Thank you very much for your time. I will see you at (Time) on (Date). Good-bye.</p>	
Day	Date	Time	a.m. p.m.							
<p>7. DIRECTIONS TO FACILITY</p>	<p>6. Could you give me directions to your facility from some easy to identify starting point? (Record directions in number 7 below.)</p> <p>Thank you very much for your time. I will see you at (Time) on (Date). Good-bye.</p>									
Section E – QUESTIONS ABOUT THE FACILITY										
<p>Before I begin the interview, I'd like to take a moment to explain the purpose of the survey. I believe you (received/did not receive) the letter from the National Center for Health Statistics.</p> <p><i>If administrator did not receive the letter, hand him/her a copy. Allow him/her to briefly read it through.</i></p> <p>As it says in the letter, the purpose of this survey is to collect baseline information about nursing homes such as yours. The information you provide is strictly confidential and will be used only by persons involved in the survey and only for the purposes of the survey.</p>										
<p>1a. Are any nursing care services routinely provided to residents in addition to room and board?</p>	<p>01 <input type="checkbox"/> Yes – GO to item 1b 02 <input type="checkbox"/> No – THIS FACILITY IS OUT-OF-SCOPE FOR THE SURVEY. PLEASE TERMINATE THE INTERVIEW BY SAYING TO THE RESPONDENT:</p> <p>It would appear that your facility was incorrectly selected for inclusion in this survey, so I will end this interview. I will report the situation to my immediate supervisor who will call you in a few days to verify this information. Thank you for your cooperation.</p>									
<p>b. Does this facility provide 24 hour nursing care?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p>									

Section E – QUESTIONS ABOUT THE FACILITY – Continued	
<p><i>HAND FLASHCARD 1</i></p> <p>2a. What is the type of ownership of this facility as shown on this card?</p> <p>Mark (X) only ONE box.</p>	<p>01 <input type="checkbox"/> PROPRIETARY – Includes individually or privately owned, partnership, corporation</p> <p>02 <input type="checkbox"/> NONPROFIT – Includes church-related ownership, nonprofit corporation, other nonprofit ownership</p> <p>03 <input type="checkbox"/> STATE OR LOCAL GOVERNMENT – Includes State, county, city, city-county, hospital district or authority</p> <p>04 <input type="checkbox"/> FEDERAL GOVERNMENT – Includes USPHS, Armed Forces, Veterans Administration OR other Federal Government – Specify if other than listed here <input type="checkbox"/></p> <p>_____</p> <p>05 <input type="checkbox"/> OTHER – Specify <input type="checkbox"/></p> <p>_____</p>
<p>b. Is this facility a member of a chain or group?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No</p>
<p>3. How many beds are currently available for residents? Include all beds set up and staffed for use whether or not they are in use by residents at the present time. Do not include beds used by staff or owners, or beds used exclusively for emergency purposes, solely day care, or solely night care.</p>	<p>_____ Total available beds</p>
<p>4. What is the total number of residents on the rolls of this facility as of midnight last night?</p>	<p>_____ Number of residents</p> <p>9999 <input type="checkbox"/> Don't know</p>
<p>5. HAND FLASHCARD 2</p> <p>Ask items 5(a) through 5(l) in PART I FIRST. As you ask each item, PAUSE to allow the respondent time to refer to the flashcard. Mark (X) the "Yes/No" box as appropriate for each item. Then, GO TO PART II, and ask the question for each item marked "Yes" in Part I.</p>	
<p>PART I</p> <p>Does your facility have special, physically distinct or designated clusters of beds, or segregated wings or units, used exclusively for —</p> <p>(a) AIDS/HIV care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(b) Alzheimer care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(c) Brain injury care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(d) Children with disabilities? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(e) Cognitively impaired residents? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(f) Dialysis care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(g) Hospice care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(h) Huntington disease care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(i) Rehabilitation care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(j) Sub-acute care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(k) Ventilatory/pulmonary care? 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p> <p>(l) Other special care units? Specify <input type="checkbox"/></p> <p>_____ 01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No</p>	<p>PART II</p> <p>How many beds are in these units?</p> <p>(a) _____ beds</p> <p>(b) _____ beds</p> <p>(c) _____ beds</p> <p>(d) _____ beds</p> <p>(e) _____ beds</p> <p>(f) _____ beds</p> <p>(g) _____ beds</p> <p>(h) _____ beds</p> <p>(i) _____ beds</p> <p>(j) _____ beds</p> <p>(k) _____ beds</p> <p>(l) _____ beds</p>
<p>6. Is this facility certified by both Medicare and Medicaid, Medicare only, Medicaid only, or neither?</p>	<p>01 <input type="checkbox"/> Both Medicare and Medicaid</p> <p>02 <input type="checkbox"/> Medicare only – SKIP to item 8a</p> <p>03 <input type="checkbox"/> Medicaid only – SKIP to item 9a</p> <p>04 <input type="checkbox"/> Neither – SKIP to item 10a</p>
<p>7. How many beds are dually certified under BOTH Medicare and Medicaid?</p>	<p>_____ Number of beds certified by BOTH Medicare and Medicaid</p> <p>00 <input type="checkbox"/> None</p>

Section E - QUESTIONS ABOUT THE FACILITY - Continued	
8a. How many beds are certified under Medicare?	<p style="text-align: center;">_____ Medicare beds</p>
b. What is the per diem rate that you receive from Medicare for routine services?	<p style="text-align: center;">\$ _____ per diem</p>
<p style="text-align: center;"><i>SKIP TO ITEM 10a IF "MEDICARE ONLY" IN ITEM 6.</i></p>	
9a. How many beds are certified under Medicaid?	<p style="text-align: center;">_____ Medicaid beds</p>
b. What is the per diem rate that you receive from Medicaid for routine services?	<p style="text-align: center;">\$ _____ per diem</p>
10a. Do you have any beds that are not certified by either Medicare or Medicaid?	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No - <i>SKIP to item 11</i></p>
b. How many of these beds does your facility have?	<p style="text-align: center;">_____ Number of beds not certified by Medicare/Medicaid</p>
11. How many admissions were there to this facility during calendar year 1998?	<p style="text-align: center;">_____ Admissions in 1998</p> <p>00 <input type="checkbox"/> None</p>
<p><i>HAND FLASHCARD 3</i></p>	
12. Does this facility offer any of the following services to residents of this facility? <i>Mark (X) all that apply.</i> PROBE: Any other services?	<p>01 <input type="checkbox"/> Dental services 02 <input type="checkbox"/> Help with oral hygiene 03 <input type="checkbox"/> Home health services 04 <input type="checkbox"/> Hospice services 05 <input type="checkbox"/> Medical services 06 <input type="checkbox"/> Mental health services 07 <input type="checkbox"/> Nursing services 08 <input type="checkbox"/> Nutrition services 09 <input type="checkbox"/> Occupational therapy 10 <input type="checkbox"/> Personal care 11 <input type="checkbox"/> Physical therapy 12 <input type="checkbox"/> Podiatry services 13 <input type="checkbox"/> Prescribed medicines or nonprescribed medicines 14 <input type="checkbox"/> Sheltered employment 15 <input type="checkbox"/> Social services 16 <input type="checkbox"/> Special education 17 <input type="checkbox"/> Speech or hearing therapy 18 <input type="checkbox"/> Transportation 19 <input type="checkbox"/> Vocational rehabilitation 20 <input type="checkbox"/> Equipment or devices 21 <input type="checkbox"/> Other - <i>Specify</i> _____</p>
<p><i>HAND FLASHCARD 4</i></p>	
13. Does this facility provide any of the following services "on-site" or "off-site" to persons who are NOT residents of the facility? <i>Mark (X) all that apply.</i> PROBE: Any other services?	<p>00 <input type="checkbox"/> None 01 <input type="checkbox"/> Adult day care 02 <input type="checkbox"/> Dialysis 03 <input type="checkbox"/> Home health services 04 <input type="checkbox"/> Home delivered meals 05 <input type="checkbox"/> Homemaker or chore services 06 <input type="checkbox"/> Infusion therapy 07 <input type="checkbox"/> Rehabilitation therapy 08 <input type="checkbox"/> Nursing care 09 <input type="checkbox"/> Other services to non-residents - <i>Specify</i> _____</p>
Notes/Comments	

Section E - QUESTIONS ABOUT THE FACILITY - Continued

<p><i>HAND FLASHCARD 5</i></p> <p>14. Upon ADMISSION, does this facility assess each resident's need for the following clinical preventative services?</p> <p><i>Mark (X) all that apply.</i></p> <p>PROBE: Any other services?</p>	<p>00 <input type="checkbox"/> None</p> <p>01 <input type="checkbox"/> Influenza vaccination</p> <p>02 <input type="checkbox"/> Pneumococcal vaccination</p> <p>03 <input type="checkbox"/> Tetanus-diphtheria (Td) Toxoid booster</p> <p>04 <input type="checkbox"/> Pap Smear</p> <p>05 <input type="checkbox"/> Clinical breast exam</p> <p>06 <input type="checkbox"/> Mammogram</p> <p>07 <input type="checkbox"/> Prostate exam</p> <p>08 <input type="checkbox"/> Prostate-Specific Antigen</p> <p>09 <input type="checkbox"/> Cholesterol check</p> <p>10 <input type="checkbox"/> Fecal Occult Blood</p> <p>11 <input type="checkbox"/> Sigmoidoscopy</p> <p>12 <input type="checkbox"/> Other - <i>Specify</i> _____</p>
<p>15. Does your facility have an organized program to offer the following vaccines to all residents:</p> <p><i>Mark (X) one box for each program.</i></p> <p>(a) Annual influenza vaccination?</p> <p>(b) Pneumococcal vaccine (Pneumonia vaccination)?</p> <p>(c) Tetanus-Diphtheria (Td) Toxoid booster?</p>	<p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p> <p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p> <p>01 <input type="checkbox"/> Yes 02 <input type="checkbox"/> No 03 <input type="checkbox"/> Don't know</p>
<p>16. Are staff members required to be vaccinated against influenza?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No</p> <p>03 <input type="checkbox"/> Don't know</p>
<p><i>HAND FLASHCARD 6</i></p> <p>17. Are the following vaccines recorded in the resident's individual medical record?</p> <p><i>Mark (X) all that apply.</i></p>	<p>00 <input type="checkbox"/> None</p> <p>01 <input type="checkbox"/> Annual influenza vaccination</p> <p>02 <input type="checkbox"/> Pneumococcal vaccination (pneumonia vaccination)</p> <p>03 <input type="checkbox"/> Tetanus-Diphtheria (Td) Toxoid booster</p>
<p>18a. Does this facility currently have any residents who are in a PROLONGED AND PROFOUND COMA, and are not arousable?</p>	<p>01 <input type="checkbox"/> Yes</p> <p>02 <input type="checkbox"/> No - <i>SKIP to item 19</i></p>
<p>b. How many residents are in a prolonged and profound coma?</p>	<p>_____ Number of residents</p>
<p>Notes/Comments</p>	

Section E - QUESTIONS ABOUT THE FACILITY - Continued

HAND FLASHCARD 7

19. How many full-time equivalent (FTE) employees work in this facility for each of the following type of employee —

If the respondent cannot provide FTE information, then collect the number of full-time employees and the number of part-time employees for each category.

Make an entry for each type of employee. If the answer is "None," enter "0" in the answer space for the type of employee.

FTE employees	OR	Number of full-time employees	AND	Number of part-time employees
------------------	-----------	-------------------------------------	------------	-------------------------------------

- | | | | | |
|---|-------|-------|-------|--|
| (1) Administrator/Assistant Administrator? .. | _____ | _____ | _____ | |
| (2) Registered Nurses (R.N.)? | _____ | _____ | _____ | |
| (3) Licensed Practical Nurses (L.P.N.) or
Licensed Vocational Nurses (L.V.N.)? | _____ | _____ | _____ | |
| (4) Nurses Aides/Orderlies? | _____ | _____ | _____ | |
| (5) Physicians (M.D. or D.O.), Residents and
Interns? | _____ | _____ | _____ | |
| (6) Dentists? | _____ | _____ | _____ | |
| (7) Dental Hygienists? | _____ | _____ | _____ | |
| (8) Physical Therapists? | _____ | _____ | _____ | |
| (9) Speech Pathologists and/or Audiologists? | _____ | _____ | _____ | |
| (10) Dieticians or Nutritionists? | _____ | _____ | _____ | |
| (11) Podiatrists? | _____ | _____ | _____ | |
| (12) Social Workers? | _____ | _____ | _____ | |
| (13) All others? | _____ | _____ | _____ | |

HAND FLASHCARD 8

20. Do volunteers, that is persons serving without pay, provide any of the following services?

Mark (X) all that apply.

- 00 None
- 01 General office help
- 02 Reception
- 03 Visiting, general aides
- 04 Emotional or mental health counseling
- 05 Other - *Specify* _____

21. What is the basic charge for private pay residents at each level of care —

- | | | |
|-------------------------------------|--------------|--|
| a. Skilled? | \$ _____ per | 01 <input type="checkbox"/> Day
02 <input type="checkbox"/> Month
03 <input type="checkbox"/> Not applicable |
| b. Intermediate? | \$ _____ per | 01 <input type="checkbox"/> Day
02 <input type="checkbox"/> Month
03 <input type="checkbox"/> Not applicable |
| c. Residential? | \$ _____ per | 01 <input type="checkbox"/> Day
02 <input type="checkbox"/> Month
03 <input type="checkbox"/> Not applicable |
| d. Other? - Specify _____ .. | \$ _____ per | 01 <input type="checkbox"/> Day
02 <input type="checkbox"/> Month
03 <input type="checkbox"/> Not applicable |

Notes/Comments

Section E - QUESTIONS ABOUT THE FACILITY - Continued



To complete this survey, I will need a list of all current residents, and a list of discharges for the month of *(Insert discharge sample month and year)*. From these lists, I will select a sample of no more than 6 current residents and 6 discharges.

22a. From whom shall I obtain the list of current residents?

Name

Title

b. I will need these residents' medical records and the cooperation of a staff member best acquainted with these residents in order to obtain the information on this questionnaire.

Hand the administrator a copy of the NNHS-3, Current Resident Questionnaire. Allow him/her to examine it briefly. Retrieve the questionnaire and continue reading.

I will not be contacting or interviewing the residents in any way. I will depend on your staff to consult the medical records.

Would (Person named in item 22a) know which staff member I should interview for those residents selected for the sample?

- 01 Yes - Go to item 23a
- 02 No - Determine which staff member would have this knowledge and enter the name and title below. *z*

Name

Title

23a. From whom shall I obtain the list of discharges?

Same as 22a

Name

Title

b. I will need the help of a staff person familiar with the discharge records to aid me in completing the information requested in this questionnaire.

Hand the administrator a copy of the NNHS-5, Discharged Resident Questionnaire. Allow him/her to examine it briefly. Retrieve the questionnaire and continue reading.

Would (person named in item 22a) know which staff member I should interview for those discharges that fall into the sample?

- 01 Yes - GO to item 24 below
- 02 No - Determine which staff member would have this knowledge and enter the name and title below. *z*

Name

Title

24. Thank you for your time. I will be checking with you before I leave to say goodbye.

At this time, could you introduce me to *(Names of person(s) listed in items 22a, 22b, 23a and 23b).*

Notes/Comments

Appendix IV

Letters to Facility Administrators and Endorsement Letters



DEPARTMENT OF HEALTH & HUMAN SERVICES

NNHS-11(L)
(5-99)

Public Health Service
Centers for Disease Control and Prevention

National Center for Health Statistics
6525 Belcrest Road
Hyattsville, MD 20782

Thank You

I want to personally thank you for participating in the National Nursing Home Survey and for assisting the field representative from the Bureau of the Census, who conducted the survey in your facility. It is only through the cooperation of administrators like you that we are able to conduct a survey such as this one. The information we collect from this survey will be invaluable in helping us to support effective treatment of long-term health problems.

Again, I appreciate the time and effort you have given in support of this survey.

Sincerely,

A handwritten signature in black ink, appearing to read "Edward J. Sondik".

Edward J. Sondik, Ph.D.
Director, National Center for Health Statistics



AMERICAN ASSOCIATION OF HOMES AND SERVICES FOR THE AGING
901 E STREET NW, SUITE 500, WASHINGTON, DC 20004-2011
202 • 783 • 2242 FAX 202 • 783 • 2255 www.aahsa.org

Dear Administrator:

I am writing to urge your participation in the 1999 National Nursing Home survey to be conducted this summer by the National Center for Health Statistics. The survey, the sixth in a series, is designed to collect baseline and trend information about nursing facilities, their services, residents, discharges, and staff.

The support of our association members and of the 1500 facilities selected to be included in this sample is indispensable to the successful development of invaluable data for planning and organizing health care of the aged, drafting health legislation and setting national policies and priorities to obtain quality care for all nursing home residents.

I believe you will find the survey design maximizes the utility of the data collected while it attempts to minimize the amount of staff involvement. In addition, strict confidentiality provisions are to be maintained. Only summary data will be published and made available to health planners, researchers, health professionals, and the public.

I am confident that the information derived will be worth the investment of your time and efforts as it will ultimately be used to improve long term care. Furthermore, it is only through your cooperation that we can be sure the information on which public policy will be based has the benefit of our input.

I, therefore, urge your cooperation with this survey.

Sincerely,

Len Fishman
President

NNHS-16 (L)



Defining Excellence in Administration

Dear Administrator,

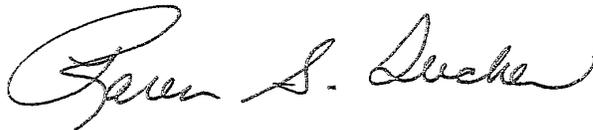
I am writing to encourage you to participate in the 1999 National Nursing Home Survey conducted by the National Center for Health Statistics of the Department of Health and Human Services. The survey is designed to collect baseline and trend information about long-term care facilities, their services, residents, staff and some basic financial information.

The support of the professional administrator is indispensable to the success of this research, which will provide invaluable data for planning and organizing health care of the aged, drafting health legislation and setting national policies and priorities.

The survey design maximizes the utility of the data collected while it attempts to minimize the amount of staff involvement. Strict confidentiality will be maintained, and only summary data will be published and made available to health planners, researchers, health professionals and the public.

Your participation in this survey process assures your voice in shaping public policy for our profession. I urge your cooperation in this effort.

Sincerely,



Karen S. Tucker, CAE
President/CEO



American Health Care Association

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- Michael Massey
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- Shelly Peterson
PRESIDENT OF ASHCAE
- David Seckman
INTERIM PRESIDENT

Dear Administrator:

I am writing to urge your participation in the 1999 National Nursing Home Survey to be conducted this summer by the National Center for Health Statistics. The survey, the sixth in a series, is designed to collect baseline and trend information about nursing facilities, their services, residents, staff and some basic financial characteristics.

The support of our association and of all nursing home administrators is indispensable to the successful inauguration of this research which will provide invaluable data for planning and organizing health care of the aged, drafting health legislation, and setting national policies and priorities to obtain quality care for all nursing home residents.

I believe you will find the survey design maximizes the utility of the data collected while it attempts to minimize the amount of staff involvement. In addition, strict confidentiality provisions are to be maintained. Only summary data will be published and made available to health planners, researchers, health professionals, and the public.

I am confident that the information derived will be worth the investment of your time and effort as it will ultimately be used in an effort to improve long term care. Furthermore, it is only through your cooperation that we can be sure the information on which public policy will be based has the benefit of our input.

I, therefore, again urge your cooperation with this survey.

Sincerely,

David Seckman
Acting President

NNHS-17 (L)

Vital and Health Statistics series descriptions

- SERIES 1. **Programs and Collection Procedures**—These reports describe the data collection programs of the National Center for Health Statistics. They include descriptions of the methods used to collect and process the data, definitions, and other material necessary for understanding the data.
- SERIES 2. **Data Evaluation and Methods Research**—These reports are studies of new statistical methods and include analytical techniques, objective evaluations of reliability of collected data, and contributions to statistical theory. These studies also include experimental tests of new survey methods and comparisons of U.S. methodology with those of other countries.
- SERIES 3. **Analytical and Epidemiological Studies**—These reports present analytical or interpretive studies based on vital and health statistics. These reports carry the analyses further than the expository types of reports in the other series.
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- SERIES 5. **International Vital and Health Statistics Reports**—These reports are analytical or descriptive reports that compare U.S. vital and health statistics with those of other countries or present other international data of relevance to the health statistics system of the United States.
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- SERIES 12. **Data From the Institutionalized Population Surveys**—Discontinued in 1975. Reports from these surveys are included in Series 13.
- SERIES 13. **Data From the National Health Care Survey**—These reports contain statistics on health resources and the public's use of health care resources including ambulatory, hospital, and long-term care services based on data collected directly from health care providers and provider records.
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- SERIES 20. **Data on Mortality**—These reports contain statistics on mortality that are not included in regular, annual, or monthly reports. Special analyses by cause of death, age, other demographic variables, and geographic and trend analyses are included.
- SERIES 21. **Data on Natality, Marriage, and Divorce**—These reports contain statistics on natality, marriage, and divorce that are not included in regular, annual, or monthly reports. Special analyses by health and demographic variables and geographic and trend analyses are included.
- SERIES 22. **Data From the National Mortality and Natality Surveys**—Discontinued in 1975. Reports from these sample surveys, based on vital records, are now published in Series 20 or 21.
- SERIES 23. **Data From the National Survey of Family Growth**—These reports contain statistics on factors that affect birth rates, including contraception, infertility, cohabitation, marriage, divorce, and remarriage; adoption; use of medical care for family planning and infertility; and related maternal and infant health topics. These statistics are based on national surveys of women of childbearing age.
- SERIES 24. **Compilations of Data on Natality, Mortality, Marriage, Divorce, and Induced Terminations of Pregnancy**—These include advance reports of births, deaths, marriages, and divorces based on final data from the National Vital Statistics System that were published as supplements to the *Monthly Vital Statistics Report (MVSR)*. These reports provide highlights and summaries of detailed data subsequently published in *Vital Statistics of the United States*. Other supplements to the MVSR published here provide selected findings based on final data from the National Vital Statistics System and may be followed by detailed reports in Series 20 or 21.

For answers to questions about this report or for a list of reports published in these series, contact:

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