

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Home Health Agency (HHA) Fee-For-Service Occurrence Codes
Date Created: 29JAN2021
Number of Variables: 11

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
PATIENT_ID	NHCS Patient ID	Char	ID	Patient Identifier assigned by NCHS. Researchers requesting linked NHCS-CMS data should use PATIENT_ID.
PUBLICID	NHIS Public Use ID	Char	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHIS/LSOA II-Medicare data should use PUBLICID.
SEQN	NHANES Respondent Sequence Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHEFS/NHANES III/NHANES-Medicare data should use SEQN.
RESNUM	NNHS Resident Record (Case) Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked 2004 NNHS-Medicare data should use RESNUM.
SURVEY	Survey Name and survey year/cycle	Char		
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Num	2016-2018	2016 NHCS has been linked to only 2016-2017 Medicare Data.
NCHS_CLM_ID	NCHS CLAIM ID	Num		
NCH_CLM_TYPE_CD	NCH Claim Type Code	Char	10	HHA claim
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence	Char		
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code	Char	01	Auto accident - The date of an auto accident.
			02	No-fault insurance involved, including auto accident/other - The date of an accident where the state has applicable no-fault liability laws, (i.e., legal basis for settlement without admission or proof of guilt).
			03	Accident/tort liability - The date of an accident resulting from a third party's action that may involve a civil court process in an attempt to require payment by the third party, other than no-fault liability.
			04	Accident/employment related - The date of an accident relating to the patient's employment.
			05	Other accident - The date of an accident not described by the codes 01 thru 04.

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			06	Crime victim - Code indicating the date on which a medical condition resulted from alleged criminal action committed by one or more parties.
			07-08	Reserved for national assignment.
			11	Onset of symptoms/illness - The date the patient first became aware of symptoms/illness.
			13-16	Reserved for national assignment.
			17	Date outpatient occupational therapy plan established or last reviewed - Code indicating the date an occupational therapy plan was established or last reviewed (eff 3/93)
			18	Date of retirement (patient/bene) - Code indicates the date of retirement for the patient/bene.
			19	Date of retirement spouse - Code indicates the date of retirement for the patient's spouse.
			24	Date insurance denied - The date the insurer's denial of coverage was received by a higher priority payer.
			25	Date benefits terminated by primary payer - The date on which coverage (including worker's compensation benefits or no-fault coverage) is no longer available to the patient.
			27	Date of Hospice Certification or Re-Certification -- code indicates the date of certification or recertification of the hospice benefit period, beginning with the first two initial benefit periods of 90 days each and the subsequent 60-day benefit periods. (eff. 9/01)
			29	Date OPT plan established or last reviewed - the date a plan of treatment was established for outpatient physical therapy. Not used by hospital unless owner of facility
			30	Date speech pathology plan treatment established or last reviewed - The date a speech pathology plan of treatment was established or last reviewed. Not used by hospital unless owner of facility
			33	First day of the Medicare coordination period for ESRD bene - During which Medicare benefits are secondary to benefits payable under an EGHP. Required only for ESRD beneficiaries.
			35	Date treatment started for physical therapy - Code indicates the date services were initiated by the billing provider for physical therapy.

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			36	Date of discharge for the IP hospital stay when patient received a transplant procedure - Hospital is billing for immunosuppressive drugs.
			41	Date of First Test for Pre-admission Testing - The date on which the first outpatient diagnostic test was performed as part of a pre-admission testing (PAT) program. This code may only be used if a date of admission was scheduled prior to the administration of the test(s). (eff. 10/01)
			44	Date treatment started for occupational therapy - Code indicates the date services were initiated by the billing provider for occupational therapy.
			45	Date treatment started for speech therapy - Code indicates the date services were initiated by the billing provider for speech therapy.
			47	Date Cost Outlier Status Begins - code indicates that this is the first day the cost outlier threshold is reached. For Medicare purposes, a bene must have regular coinsurance and/or lifetime reserve days available beginning on this date to allow coverage of additional daily charges for the purpose of making cost outlier payments. (eff. 9/01)
			50-55	Reserved for state assignment
			57-69	Reserved for state assignment
			A2	Effective date, Insured A policy - A code indicating the first date insurance is in force. (eff 10/93)
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date	Num		Date provided in SAS date (numeric) format.