

**Restricted-use Linked NCHS-CMS Medicare Data**  
**Outpatient Base Claims**  
**DATE CREATED: 02FEB2017**  
**Number of Variables: 204**

Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
SURVEY	NCHS SURVEY NAME	Char	20	-	
PUBLICID	NHIS PUBLIC USE ID	Char	14	ID	
SEQN	NHANES SAMPLE SEQUENCE NUMBER (PUBLIC ID)	Num	8	ID	
RESNUM	NNHS RESIDENT ID NUMBER (PUBLIC)	Num	8	ID	
PATNUM	Patient/Discharge Record (Case) Number in public-use file	Num	8	ID	
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)	Num	4	1999-2013	
NCHS_CLM_ID	NCHS CLAIM ID	Num	8		
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code	Char	1	W	Part B institutional claim record (outpatient (OP), HHA)
NCH_CLM_TYPE_CD	NCH Claim Type Code	Char	2	40	Outpatient claim
CLM_FROM_DT	Claim From Date	Num	4		
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Num	4		
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date	Num	4		
FI_CLM_PROC_DT	FI Claim Process Date	Num	4		

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CLAIM_QUERY_CODE	Claim Query Code	Char	1	3	Final bill
				5	Debit adjustment
PRVDR_NUM	Provider Number	Char	10	-	
CLM_FAC_TYPE_CD	Claim Facility Type Code	Char	1	1	Hospital
				2	Skilled nursing facility (SNF)
				3	Home health agency (HHA)
				7	Clinic or hospital-based renal dialysis facility
				8	Special facility or ASC surgery
CLM_SRVC_CLSFACTN_TYPE_CD	Claim Service classification Type Code	Char	1	1	TYPE1-6,9:Inpatient (including Part A)/TYPE7:Rural Health Clinic (RHC)/TYPE8:Hospice (non-hospital based)
				2	TYPE1-6,9:Hospital based or Inpatient (Part B only) or home health visits under Part B/TYPE7:Hospital based or independent renal dialysis facility/TYPE8:Hospice (hospital based)
				3	TYPE1-6,9:Outpatient (HHA-A also)/TYPE7:Free-standing provider based federally qualified health center (FQHC) (eff 10/91)/TYPE8:Ambulatory surgical center in hospital outpatient department
				4	TYPE1-6,9:Other (Part B) -- (Includes HHA medical and other health services not under a plan of treatment, hospital or SNF for diagnostic clinical laboratory services for "nonpatients," and referenced
				5	TYPE1-6,9:Intermediate care - level I/TYPE7:Comprehensive Rehabilitation Center (CORF)/TYPE8:Critical Access Hospital (eff. 10/99) formerly Rural primary care hospital (eff. 10/94)
				6	TYPE1-6,9:Intermediate care - level II/TYPE7:Community Mental Health Center (CMHC) (eff 4/97)/TYPE8:Reserved for national use
				7	TYPE1-6,9:Subacute Inpatient (revenue code 019X required) (formerly Intermediate care - level III) NOTE: 17X & 27X are discontinued effective 10/1/05/TYPE7:Reserved for national assignment/TYPE8:Reser
CLM_FREQ_CD	Claim Frequency Code	Char	1	0	Non-payment/zero claims

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				1	Admit thru discharge claim
				2	Interim - first claim
				3	Interim - continuing claim (not valid for PPS claims)
				4	Interim - last claim (not valid for PPS claims)
				5	Late charge(s) only claim
				7	Replacement of prior claim (eff 10/93) provider debit
				9	Final claim -- used in an HH PPS episode to indicate the claim should be processed like debit/credit adjustment to RAP (initial claim) (eff. 10/00)
				F	Beneficiary initiated adjustment claim (eff 10/93)
				G	CWF generated adjustment claim (eff 10/93)
				H	CMS generated adjustment claim (eff 10/93)
				I	Misc adjustment claim (other than PRO or provider) - used to identify a debit adjustment initiated by CMS or an intermediary (other than QIO or Provider) - eff 10/93, used to identify intermediary ini
				J	Other adjustment request (eff 10/93)
				M	MSP adjustment (eff 10/93)
				P	Adjustment required by Quality Improvement Organization (QIO) -- formerly Peer Review Organization (PRO)
CLM_MDCR_NON_PMT_RSN_CD	Claim Medicare Non Payment Reason Code	Char	2	!	MSP cost avoided - COB Contractor ('00' 2-byte code)
				@	MSP cost avoided - BC/BS Voluntary Agreements ('12' 2-byte code)
				**OTHER**	Miscoded
				%	MSP cost avoided - Recovery Audit Contractor - California ('25' 2-byte code) (eff. 10/2005)
				<	MSP cost avoided - MIR Group Health Plan ('21' 2-byte code) (eff. 1/2009)
				>	MSP cost avoided - MIR non-Group Health Plan ('22' 2-byte code) (eff. 1/2009)
				\$	MSP cost avoided - Workman's Compensation (WC) Datamatch ('14' 2-byte code)

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				00	MSP cost avoided - COB Contractor
				12	MSP cost avoided - BCBS Voluntary Agreements
				14	MSP cost avoided - Workman's Compensation (WC) Datamatch
				19	SEE NOTE4: Coordination of Benefits Contractor 11119 (see CMS Change Request 7906 for identification of the contractor.)
				21	MSP cost avoided - MIR Group Health Plan (eff. 1/2009)
				22	MSP cost avoided - MIR non-Group Health Plan (eff. 1/2009)
				B	Benefit exhausted
				E	MSP cost avoided - IRS/SSA/HCFA Data Match (eff. 7/00)
				F	MSP cost avoid HMO Rate Cell (eff. 7/00)
				G	MSP cost avoided Litigation Settlement (eff. 7/00)
				H	MSP cost avoided Employer Voluntary Reporting (eff. 7/00)
				J	MSP cost avoid Insurer Voluntary Reporting (eff. 7/00)
				K	MSP cost avoid Initial Enrollment Questionnaire (eff. 7/00)
				N	All other reasons for nonpayment
				Q	MSP cost avoided Voluntary Agreement (eff. 7/00)
				R	Benefits refused, or evidence not submitted
				T	MSP cost avoided - IEQ contractor (eff. 9/76) (obsolete 6/30/00)
				U	MSP cost avoided - HMO rate cell adjustment (eff. 9/76) (Obsolete 6/30/00)
				V	MSP cost avoided - litigation settlement (eff. 9/76) (Obsolete 6/30/00)
				X	MSP cost avoided – generic
				Y	MSP cost avoided - IRS/SSA data match project (obsolete 6/30/00)
CLM_PMT_AMT	Claim Payment Amount	Num	8		

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amount	Num	8		
NCH_PRMRY_PYR_CD	NCH Primary Payer Code	Char	1		Medicare is primary payer (not sure of effective date: in use 1/91, if not earlier)
				**OTHER**	Miscoded
				A	Working aged bene/spouse with employer group health plan (EGHP)
				B	End stage renal disease (ESRD) beneficiary in the 18 month coordination period with an employer group health plan
				C	Conditional payment by Medicare: future reimbursement expected
				D	Automobile no-fault (eff. 4/97: Prior to 3/94, also included any liability insurance)
				E	Workers' compensation
				F	Public Health Service or other federal agency (other than Dept. of Veterans Affairs)
				G	Working disabled bene (under age 65 with LGHP)
				H	Black Lung
				I	Dept. of Veterans Affairs
				J	Any liability insurance (eff. 3/94 - 3/97)
				L	Any liability insurance (eff. 4/97) (eff. 12/90 for carrier claims and 10/93 for FI claims; obsoleted for all claim types 7/1/96)
				M	Override code: EGHP services involved (eff. 12/90 for carrier claims and 10/93 for FI claims; obsoleted for all claim types 7/1/96)
				N	Override code: non-EGHP services involved (eff. 12/90 for carrier claims and 10/93 for FI claims; obsoleted for all claim types 7/1/96)
PRVDR_STATE_CD	NCH Provider State Code	Char	2	01	Alabama
				02	Alaska
				03	Arizona
				04	Arkansas

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				05	California
				06	Colorado
				07	Connecticut
				08	Delaware
				09	District of Columbia
				10	Florida
				11	Georgia
				12	Hawaii
				13	Idaho
				14	Illinois
				15	Indiana
				16	Iowa
				17	Kansas
				18	Kentucky
				19	Louisiana
				20	Maine
				21	Maryland
				22	Massachusetts
				23	Michigan
				24	Minnesota
				25	Mississippi
				26	Missouri
				27	Montana
				28	Nebraska

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				29	Nevada
				30	New Hampshire
				31	New Jersey
				32	New Mexico
				33	New York
				34	North Carolina
				35	North Dakota
				36	Ohio
				37	Oklahoma
				38	Oregon
				39	Pennsylvania
				40	Puerto Rico
				41	Rhode Island
				42	South Carolina
				43	South Dakota
				44	Tennessee
				45	Texas
				46	Utah
				47	Vermont
				48	Virgin Islands
				49	Virginia
				50	Washington
				51	West Virginia
				52	Wisconsin

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				53	Wyoming
				55	California
				57	Central America and West Indies
				64	American Samoa
				65	Guam
				66	Commonwealth of the Northern Marianas Islands
				67	Texas
				98	Guam
ORG_NPI_NUM	Organization NPI Number	Char	10	-	
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number	Char	12	-	
AT_PHYSN_NPI	Claim Attending Physician NPI Number	Char	12	-	
OP_PHYSN_UPIN	Claim Operating Physician UPIN Number	Char	12	-	
OP_PHYSN_NPI	Claim Operating Physician NPI Number	Char	12	-	
OT_PHYSN_UPIN	Claim Other Physician UPIN Number	Char	12	-	
OT_PHYSN_NPI	Claim Other Physician NPI Number	Char	12	-	
CLM_MCO_PD_SW	Claim MCO Paid Switch	Char	1	**OTHER**	Miscoded
				1	MCO has paid the provider for a claim



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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code	Char	2	**OTHER**	Miscoded
				01	Discharged to home/self care (routine charge).
				02	Discharged/transferred to other short term general hospital for inpatient care.
				03	Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care -- (For hospitals with an approved swing bed arrangement, use Code 61 - swi
				04	Discharged/transferred to intermediate care facility (ICF).
				05	Discharged/transferred to another type of institution for inpatient care (including distinct parts). NOTE: Effective 1/2005, psychiatric hospital or psychiatric distinct part unit of a hospital will n
				06	Discharged/transferred to home care of organized home health service organization.
				07	Left against medical advice or discontinued care.
				08	Discharged/transferred to home under care of a home IV drug therapy provider. (discontinued effective 10/1/05)
				09	Admitted as an inpatient to this hospital (effective 3/1/91). In situations where a patient is admitted before midnight of the third day following the day of an outpatient service, the outpatient serv
				20	Expired (did not recover - Christian Science patient).
				30	Still patient
				40	Expired at home (hospice claims only)
				43	Discharged/transferred to a federal hospital (eff. 10/1/03)
				50	Hospice - home (eff. 10/96)
				51	Hospice - medical facility (eff. 10/96)
				61	Discharged/transferred within this institution to a hospital-based Medicare approved swing bed (eff. 9/01)
				62	Discharged/transferred to an inpatient rehabilitation facility including distinct parts units of a hospital. (eff. 1/2002)
				63	Discharged/transferred to a long term care hospitals. (eff. 1/2002)

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				70	Discharged/transferred to another type of health care institution not defined elsewhere in code list.
				71	Discharged/transferred/referred to another institution for outpatient services as specified by the discharge plan of care (eff. 9/01) (discontinued effective 10/1/05)
				72	Discharged/transferred/referred to this institution for outpatient services as specified by the discharge plan of care (eff. 9/01) (discontinued effective 10/1/05)
				81	Discharged to home or self-care with a planned acute care hospital readmission (eff. 10/2013)
				84	Discharged/transferred to a facility that provides custodial or supportive care with a planned acute care hospital inpatient readmission (eff. 10/2013)
				86	Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission (eff. 10/2013)
CLM_TOT_CHRG_AMT	Claim Total Charge Amount	Num	8		
NCH_BENE_BLOOD_DDCTBL_LBLTY_AM	NCH Beneficiary Blood Deductible Liability Amount	Num	8		
NCH_PROFNL_CMPNT_CHRG_AMT	NCH Professional Component Charge	Num	8		
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code	Char	7	-	
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD1	Claim Diagnosis Code I	Char	7	-	
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				9	ICD-9
ICD_DGNS_CD2	Claim Diagnosis Code II	Char	7	-	
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD3	Claim Diagnosis Code III	Char	7	-	
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD4	Claim Diagnosis Code IV	Char	7	-	
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD5	Claim Diagnosis Code V	Char	7	-	
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD6	Claim Diagnosis Code VI	Char	7	-	
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_DGNS_CD7	Claim Diagnosis Code VII	Char	7	-	
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD8	Claim Diagnosis Code VIII	Char	7	-	
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD9	Claim Diagnosis Code IX	Char	7	-	
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD10	Claim Diagnosis Code X	Char	7	-	
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD11	Claim Diagnosis Code XI	Char	7	-	
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_DGNS_CD12	Claim Diagnosis Code XII	Char	7	-	
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD13	Claim Diagnosis Code XIII	Char	7	-	
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code XIII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD14	Claim Diagnosis Code XIV	Char	7	-	
ICD_DGNS_VRSN_CD14	Claim Diagnosis Code XIV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD15	Claim Diagnosis Code XV	Char	7	-	
ICD_DGNS_VRSN_CD15	Claim Diagnosis Code XV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD16	Claim Diagnosis Code XVI	Char	7	-	
ICD_DGNS_VRSN_CD16	Claim Diagnosis Code XVI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD17	Claim Diagnosis Code XVII	Char	7	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_DGNS_VRSN_CD17	Claim Diagnosis Code XVII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD18	Claim Diagnosis Code XVIII	Char	7	-	
ICD_DGNS_VRSN_CD18	Claim Diagnosis Code XVIII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD19	Claim Diagnosis Code XIX	Char	7	-	
ICD_DGNS_VRSN_CD19	Claim Diagnosis Code XIX Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD20	Claim Diagnosis Code XX	Char	7	-	
ICD_DGNS_VRSN_CD20	Claim Diagnosis Code XX Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD21	Claim Diagnosis Code XXI	Char	7	-	
ICD_DGNS_VRSN_CD21	Claim Diagnosis Code XXI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD22	Claim Diagnosis Code XXII	Char	7	-	

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ICD_DGNS_VRSN_CD22	Claim Diagnosis Code XXII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD23	Claim Diagnosis Code XXIII	Char	7	-	
ICD_DGNS_VRSN_CD23	Claim Diagnosis Code XXIII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD24	Claim Diagnosis Code XXIV	Char	7	-	
ICD_DGNS_VRSN_CD24	Claim Diagnosis Code XXIV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_CD25	Claim Diagnosis Code XXV	Char	7	-	
ICD_DGNS_VRSN_CD25	Claim Diagnosis Code XXV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
FST_DGNS_E_CD	First Claim Diagnosis E Code	Char	7	-	
FST_DGNS_E_VRSN_CD	First Claim Diagnosis E Code Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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ICD_DGNS_E_CD1	Claim Diagnosis E Code I	Char	7	-	
ICD_DGNS_E_VRSN_CD1	Claim Diagnosis E Code I Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
ICD_DGNS_E_CD2	Claim Diagnosis E Code II	Char	7	-	
ICD_DGNS_E_VRSN_CD2	Claim Diagnosis E Code II Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD3	Claim Diagnosis E Code III	Char	7	-	
ICD_DGNS_E_VRSN_CD3	Claim Diagnosis E Code III Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV	Char	7	-	
ICD_DGNS_E_VRSN_CD4	Claim Diagnosis E Code IV Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD5	Claim Diagnosis E Code V	Char	7	-	
ICD_DGNS_E_VRSN_CD5	Claim Diagnosis E Code V Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI	Char	7	-	
ICD_DGNS_E_VRSN_CD6	Claim Diagnosis E Code VI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded



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ICD_DGNS_E_CD7	Claim Diagnosis E Code VII	Char	7	-	
ICD_DGNS_E_VRSN_CD7	Claim Diagnosis E Code VII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII	Char	7	-	
ICD_DGNS_E_VRSN_CD8	Claim Diagnosis E Code VIII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX	Char	7	-	
ICD_DGNS_E_VRSN_CD9	Claim Diagnosis E Code IX Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD10	Claim Diagnosis E Code X	Char	7	-	
ICD_DGNS_E_VRSN_CD10	Claim Diagnosis E Code X Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI	Char	7	-	
ICD_DGNS_E_VRSN_CD11	Claim Diagnosis E Code XI Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII	Char	7	-	

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ICD_DGNS_E_VRSN_CD12	Claim Diagnosis E Code XII Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
ICD_PRCDR_CD1	Claim Procedure Code I	Char	7	-	
ICD_PRCDR_VRSN_CD1	Claim Procedure Code I Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT1	Claim Procedure Code I Date	Num	4		
ICD_PRCDR_CD2	Claim Procedure Code II	Char	7	-	
ICD_PRCDR_VRSN_CD2	Claim Procedure Code II Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT2	Claim Procedure Code II Date	Num	4		
ICD_PRCDR_CD3	Claim Procedure Code III	Char	7	-	
ICD_PRCDR_VRSN_CD3	Claim Procedure Code III Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT3	Claim Procedure Code III Date	Num	4		
ICD_PRCDR_CD4	Claim Procedure Code IV	Char	7	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_PRCDR_VRSN_CD4	Claim Procedure Code IV Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT4	Claim Procedure Code IV Date	Num	4		
ICD_PRCDR_CD5	Claim Procedure Code V	Char	7	-	
ICD_PRCDR_VRSN_CD5	Claim Procedure Code V Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT5	Claim Procedure Code V Date	Num	4		
ICD_PRCDR_CD6	Claim Procedure Code VI	Char	7	-	
ICD_PRCDR_VRSN_CD6	Claim Procedure Code VI Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT6	Claim Procedure Code VI Date	Num	4		
ICD_PRCDR_CD7	Claim Procedure Code VII	Char	7	-	
ICD_PRCDR_VRSN_CD7	Claim Procedure Code VII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PRCDR_DT7	Claim Procedure Code VII Date	Num	4		
ICD_PRCDR_CD8	Claim Procedure Code VIII	Char	7	-	
ICD_PRCDR_VRSN_CD8	Claim Procedure Code VIII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT8	Claim Procedure Code VIII Date	Num	4		
ICD_PRCDR_CD9	Claim Procedure Code IX	Char	7	-	
ICD_PRCDR_VRSN_CD9	Claim Procedure Code IX Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT9	Claim Procedure Code IX Date	Num	4		
ICD_PRCDR_CD10	Claim Procedure Code X	Char	7	-	
ICD_PRCDR_VRSN_CD10	Claim Procedure Code X Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT10	Claim Procedure Code X Date	Num	4		
ICD_PRCDR_CD11	Claim Procedure Code XI	Char	7	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_PRCDR_VRSN_CD11	Claim Procedure Code XI Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT11	Claim Procedure Code XI Date	Num	4		
ICD_PRCDR_CD12	Claim Procedure Code XII	Char	7	-	
ICD_PRCDR_VRSN_CD12	Claim Procedure Code XII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT12	Claim Procedure Code XII Date	Num	4		
ICD_PRCDR_CD13	Claim Procedure Code XIII	Char	7	-	
ICD_PRCDR_VRSN_CD13	Claim Procedure Code XIII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT13	Claim Procedure Code XIII Date	Num	4		
ICD_PRCDR_CD14	Claim Procedure Code XIV	Char	7	-	
ICD_PRCDR_VRSN_CD14	Claim Procedure Code XIV Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PRCDR_DT14	Claim Procedure Code XIV Date	Num	4		
ICD_PRCDR_CD15	Claim Procedure Code XV	Char	7	-	
ICD_PRCDR_VRSN_CD15	Claim Procedure Code XV Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT15	Claim Procedure Code XV Date	Num	4		
ICD_PRCDR_CD16	Claim Procedure Code XVI	Char	7	-	
ICD_PRCDR_VRSN_CD16	Claim Procedure Code XVI Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT16	Claim Procedure Code XVI Date	Num	4		
ICD_PRCDR_CD17	Claim Procedure Code XVII	Char	7	-	
ICD_PRCDR_VRSN_CD17	Claim Procedure Code XVII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT17	Claim Procedure Code XVII Date	Num	4		
ICD_PRCDR_CD18	Claim Procedure Code XVIII	Char	7	-	

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
ICD_PRCDR_VRSN_CD18	Claim Procedure Code XVIII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT18	Claim Procedure Code XVIII Date	Num	4		
ICD_PRCDR_CD19	Claim Procedure Code XIX	Char	7	-	
ICD_PRCDR_VRSN_CD19	Claim Procedure Code XIX Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT19	Claim Procedure Code XIX Date	Num	4		
ICD_PRCDR_CD20	Claim Procedure Code XX	Char	7	-	
ICD_PRCDR_VRSN_CD20	Claim Procedure Code XX Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT20	Claim Procedure Code XX Date	Num	4		
ICD_PRCDR_CD21	Claim Procedure Code XXI	Char	7	-	
ICD_PRCDR_VRSN_CD21	Claim Procedure Code XXI Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PRCDR_DT21	Claim Procedure Code XXI Date	Num	4		
ICD_PRCDR_CD22	Claim Procedure Code XXII	Char	7	-	
ICD_PRCDR_VRSN_CD22	Claim Procedure Code XXII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
PRCDR_DT22	Claim Procedure Code XXII Date	Num	4		
ICD_PRCDR_CD23	Claim Procedure Code XXIII	Char	7	-	
ICD_PRCDR_VRSN_CD23	Claim Procedure Code XXIII Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
PRCDR_DT23	Claim Procedure Code XXIII Date	Num	4		
ICD_PRCDR_CD24	Claim Procedure Code XXIV	Char	7	-	
ICD_PRCDR_VRSN_CD24	Claim Procedure Code XXIV Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
PRCDR_DT24	Claim Procedure Code XXIV Date	Num	4		
ICD_PRCDR_CD25	Claim Procedure Code XXV	Char	7	-	
ICD_PRCDR_VRSN_CD25	Claim Procedure Code XXV Claim Procedure Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded



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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
PRCDR_DT25	Claim Procedure Code XXV Date	Num	4		
RSN_VISIT_CD1	Reason for Visit Diagnosis Code I	Char	7	-	
RSN_VISIT_VRSN_CD1	Reason for Visit Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
				9	ICD-9
RSN_VISIT_CD2	Reason for Visit Diagnosis Code II	Char	7	-	
RSN_VISIT_VRSN_CD2	Reason for Visit Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
RSN_VISIT_CD3	Reason for Visit Diagnosis Code III	Char	7	-	
RSN_VISIT_VRSN_CD3	Reason for Visit Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)	Char	1	**OTHER**	Miscoded
NCH_BENE_PTB_DDCTBL_AMT	NCH Beneficiary Part B Deductible Amount	Num	8		
NCH_BENE_PTB_COINSRNC_AMT	NCH Beneficiary Part B Coinsurance Amount	Num	8		
CLM_OP_PRVDR_PMT_AMT	Claim Outpatient Provider Payment Amount	Num	8		
CLM_OP_BENE_PMT_AMT	Claim Outpatient Beneficiary Payment Amount	Num	8		
DOB_DT	Date of Birth from Claim (Date)	Num	4		

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
GNDR_CD	Gender Code from Claim	Char	1	**OTHER**	Miscoded
				0	Unknown
				1	Male
				2	Female
BENE_RACE_CD	Race Code from Claim	Char	1	**OTHER**	Miscoded
				0	Unknown
				1	White
				2	Black
				3	Other
				4	Asian
				5	Hispanic
6	North American Native				
BENE_CNTY_CD	County Code from Claim (SSA)	Char	3		
BENE_STATE_CD	State Code from Claim (SSA)	Char	2	**OTHER**	Miscoded
				01	Alabama
				02	Alaska
				03	Arizona
				04	Arkansas
				05	California
				06	Colorado
				07	Connecticut
				08	Delaware

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				09	District of Columbia
				10	Florida
				11	Georgia
				12	Hawaii
				13	Idaho
				14	Illinois
				15	Indiana
				16	Iowa
				17	Kansas
				18	Kentucky
				19	Louisiana
				20	Maine
				21	Maryland
				22	Massachusetts
				23	Michigan
				24	Minnesota
				25	Mississippi
				26	Missouri
				27	Montana
				28	Nebraska
				29	Nevada
				30	New Hampshire
				31	New Jersey
				32	New Mexico

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				33	New York
				34	North Carolina
				35	North Dakota
				36	Ohio
				37	Oklahoma
				38	Oregon
				39	Pennsylvania
				40	Puerto Rico
				41	Rhode Island
				42	South Carolina
				43	South Dakota
				44	Tennessee
				45	Texas
				46	Utah
				47	Vermont
				48	Virgin Islands
				49	Virginia
				50	Washington
				51	West Virginia
				52	Wisconsin
				53	Wyoming
				54	Africa
				55	Asia
				56	Canada

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Variable Name	Variable Label (VAR)	VAR Type	VAR Length	Range of Values	Value Description
				57	Central America and West Indies
				58	Europe
				59	Mexico
				60	Oceania
				61	Philippines
				62	South America
				99	American Samoa
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim	Char	9		