

## Master Beneficiary Summary File - Base Segment (Medicare Part A and B)

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
COVSTART	Medicare Coverage Start Date
CRNT_BIC_CD	Beneficiary Identification Code
STATE_CODE	State Code
BENE_COUNTY_CD	County Code
BENE_ZIP_CD	Zip Code of Residence
BENE_AGE_AT_END_REF_YR	Age at End of Reference Year
BENE_BIRTH_DT	Date of Birth
BENE_VALID_DEATH_DT_SW	Valid Date of Death Switch
BENE_DEATH_DT	Date of Death
NDI_DEATH_DT	NDI Date of Death
BENE_SEX_IDENT_CD	Sex
BENE_RACE_CD	Beneficiary Race Code
RTI_RACE_CD	Research Triangle Institute (RTI) Race Code
BENE_ENTLMT_RSN_ORIG	Original Reason for Entitlement Code
BENE_ENTLMT_RSN_CURR	Current Reason for Entitlement Code
BENE_ESRD_IND	ESRD Indicator
BENE_MDCR_STATUS_CD	Medicare Status Code
BENE_PTA_TRMNTN_CD	Part A Termination Code
BENE_PTB_TRMNTN_CD	Part B Termination Code
BENE_HI_CVRAGE_TOT_MONS	HI Coverage Count
BENE_SMI_CVRAGE_TOT_MONS	SMI Coverage Count
BENE_STATE_BUYIN_TOT_MONS	State Buy-In Coverage Count
BENE_HMO_CVRAGE_TOT_MONS	HMO Coverage Count
BENE_MDCR_ENTLMT_BUYIN_IND_01	Medicare Entitlement/Buy-In Indicator I
BENE_MDCR_ENTLMT_BUYIN_IND_02	Medicare Entitlement/Buy-In Indicator II
BENE_MDCR_ENTLMT_BUYIN_IND_03	Medicare Entitlement/Buy-In Indicator III
BENE_MDCR_ENTLMT_BUYIN_IND_04	Medicare Entitlement/Buy-In Indicator IV
BENE_MDCR_ENTLMT_BUYIN_IND_05	Medicare Entitlement/Buy-In Indicator V
BENE_MDCR_ENTLMT_BUYIN_IND_06	Medicare Entitlement/Buy-In Indicator VI
BENE_MDCR_ENTLMT_BUYIN_IND_07	Medicare Entitlement/Buy-In Indicator VII
BENE_MDCR_ENTLMT_BUYIN_IND_08	Medicare Entitlement/Buy-In Indicator VIII
BENE_MDCR_ENTLMT_BUYIN_IND_09	Medicare Entitlement/Buy-In Indicator IX
BENE_MDCR_ENTLMT_BUYIN_IND_10	Medicare Entitlement/Buy-In Indicator X
BENE_MDCR_ENTLMT_BUYIN_IND_11	Medicare Entitlement/Buy-In Indicator XI
BENE_MDCR_ENTLMT_BUYIN_IND_12	Medicare Entitlement/Buy-In Indicator XII
BENE_HMO_IND_01	HMO Indicator I
BENE_HMO_IND_02	HMO Indicator II
BENE_HMO_IND_03	HMO Indicator III
BENE_HMO_IND_04	HMO Indicator IV
BENE_HMO_IND_05	HMO Indicator V
BENE_HMO_IND_06	HMO Indicator VI
BENE_HMO_IND_07	HMO Indicator VII
BENE_HMO_IND_08	HMO Indicator VIII
BENE_HMO_IND_09	HMO Indicator IX
BENE_HMO_IND_10	HMO Indicator X

## Master Beneficiary Summary File - Base Segment (Medicare Part A and B)

<u>Variable Name</u>	<u>Variable Label</u>
BENE_HMO_IND_11	HMO Indicator XI
BENE_HMO_IND_12	HMO Indicator XII

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## Master Beneficiary Summary File - Medicare Part D Segment

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SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
CRDTBL_CVRG_SW	Creditable Coverage Switch
PLAN_CVRG_MOS_NUM	Plan Coverage Months Number
RDS_CVRG_MOS_NUM	Retiree Drug Subsidy Coverage Months Number
DUAL_ELGBL_MOS_NUM	Dual Eligible Months Number
PTD_CNTRCT_ID_01	Jan. Contract ID
PTD_CNTRCT_ID_02	Feb. Contract ID
PTD_CNTRCT_ID_03	Mar. Contract ID
PTD_CNTRCT_ID_04	Apr. Contract ID
PTD_CNTRCT_ID_05	May Contract ID
PTD_CNTRCT_ID_06	Jun. Contract ID
PTD_CNTRCT_ID_07	Jul. Contract ID
PTD_CNTRCT_ID_08	Aug. Contract ID
PTD_CNTRCT_ID_09	Sep. Contract ID
PTD_CNTRCT_ID_10	Oct. Contract ID
PTD_CNTRCT_ID_11	Nov. Contract ID
PTD_CNTRCT_ID_12	Dec. Contract ID
PTD_PBP_ID_01	Jan. Plan Benefit Package ID
PTD_PBP_ID_02	Feb. Plan Benefit Package ID
PTD_PBP_ID_03	Mar. Plan Benefit Package ID
PTD_PBP_ID_04	Apr. Plan Benefit Package ID
PTD_PBP_ID_05	May Plan Benefit Package ID
PTD_PBP_ID_06	Jun. Plan Benefit Package ID
PTD_PBP_ID_07	Jul. Plan Benefit Package ID
PTD_PBP_ID_08	Aug. Plan Benefit Package ID
PTD_PBP_ID_09	Sep. Plan Benefit Package ID
PTD_PBP_ID_10	Oct. Plan Benefit Package ID
PTD_PBP_ID_11	Nov. Plan Benefit Package ID
PTD_PBP_ID_12	Dec. Plan Benefit Package ID
PTD_SGMT_ID_01	Jan. Segment ID
PTD_SGMT_ID_02	Feb. Segment ID
PTD_SGMT_ID_03	Mar. Segment ID
PTD_SGMT_ID_04	Apr. Segment ID
PTD_SGMT_ID_05	May Segment ID
PTD_SGMT_ID_06	Jun. Segment ID
PTD_SGMT_ID_07	Jul. Segment ID
PTD_SGMT_ID_08	Aug. Segment ID
PTD_SGMT_ID_09	Sep. Segment ID
PTD_SGMT_ID_10	Oct. Segment ID
PTD_SGMT_ID_11	Nov. Segment ID
PTD_SGMT_ID_12	Dec. Segment ID
CST_SHR_GRP_CD_01	Jan. Cost Share Group Code

## Master Beneficiary Summary File - Medicare Part D Segment

<u>Variable Name</u>	<u>Variable Label</u>
CST_SHR_GRP_CD_02	Feb. Cost Share Group Code
CST_SHR_GRP_CD_03	Mar. Cost Share Group Code
CST_SHR_GRP_CD_04	Apr. Cost Share Group Code
CST_SHR_GRP_CD_05	May Cost Share Group Code
CST_SHR_GRP_CD_06	Jun. Cost Share Group Code
CST_SHR_GRP_CD_07	Jul. Cost Share Group Code
CST_SHR_GRP_CD_08	Aug. Cost Share Group Code
CST_SHR_GRP_CD_09	Sep. Cost Share Group Code
CST_SHR_GRP_CD_10	Oct. Cost Share Group Code
CST_SHR_GRP_CD_11	Nov. Cost Share Group Code
CST_SHR_GRP_CD_12	Dec. Cost Share Group Code
RDS_IND_01	Jan. RDS Code - Retiree Drug Subsidy Code
RDS_IND_02	Feb. RDS Code - Retiree Drug Subsidy Code
RDS_IND_03	Mar. RDS Code - Retiree Drug Subsidy Code
RDS_IND_04	Apr. RDS Code - Retiree Drug Subsidy Code
RDS_IND_05	May RDS Code - Retiree Drug Subsidy Code
RDS_IND_06	Jun. RDS Code - Retiree Drug Subsidy Code
RDS_IND_07	Jul. RDS Code - Retiree Drug Subsidy Code
RDS_IND_08	Aug. RDS Code - Retiree Drug Subsidy Code
RDS_IND_09	Sep. RDS Code - Retiree Drug Subsidy Code
RDS_IND_10	Oct. RDS Code - Retiree Drug Subsidy Code
RDS_IND_11	Nov. RDS Code - Retiree Drug Subsidy Code
RDS_IND_12	Dec. RDS Code - Retiree Drug Subsidy Code
DUAL_STUS_CD_01	Jan. Dual Status Code
DUAL_STUS_CD_02	Feb. Dual Status Code
DUAL_STUS_CD_03	Mar. Dual Status Code
DUAL_STUS_CD_04	Apr. Dual Status Code
DUAL_STUS_CD_05	May Dual Status Code
DUAL_STUS_CD_06	Jun. Dual Status Code
DUAL_STUS_CD_07	Jul. Dual Status Code
DUAL_STUS_CD_08	Aug. Dual Status Code
DUAL_STUS_CD_09	Sep. Dual Status Code
DUAL_STUS_CD_10	Oct. Dual Status Code
DUAL_STUS_CD_11	Nov. Dual Status Code
DUAL_STUS_CD_12	Dec. Dual Status Code

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## Master Beneficiary Summary File - Chronic Conditions Segment

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
AMI	Acute Myocardial Infarction End-of-Year Flag
AMI_MID	Acute Myocardial Infarction Mid-Year Flag
AMI_EVER	First Occurrence of Acute Myocardial Infarction
ALZH	Alzheimer's Disease End-of-Year Flag
ALZH_MID	Alzheimer's Disease Mid-Year Flag
ALZH_EVER	First Occurrence of Alzheimer's Disease
ALZH_DEMEN	Alzheimer's Disease and Related Disorders or Senile Dementia EOY Flag
ALZH_DEMEN_MID	Alzheimer's Disease and Related Disorders or Senile Dementia Mid-Year Flag
ALZH_DEMEN_EVER	First Occurrence of Alzheimer's Disease and Related Disorders or Senile Dementia
ATRIAL_FIB	Atrial Fibrillation End-of-Year Flag
ATRIAL_FIB_MID	Atrial Fibrillation Mid-Year Flag
ATRIAL_FIB_EVER	First Occurrence of Atrial Fibrillation
CATARACT	Cataract End-of-Year Flag
CATARACT_MID	Cataract Mid-Year Flag
CATARACT_EVER	First Occurrence of Cataract
CHRONICKIDNEY	Chronic Kidney Disease End-of-Year Flag
CHRONICKIDNEY_MID	Chronic Kidney Disease Mid-Year Flag
CHRONICKIDNEY_EVER	First Occurrence of Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease End-of-Year Flag
COPD_MID	Chronic Obstructive Pulmonary Disease Mid-Year Flag
COPD_EVER	First Occurrence of Chronic Obstructive Pulmonary Disease
CHF	Heart Failure End-of-Year Flag
CHF_MID	Heart Failure Mid-Year Flag
CHF_EVER	First Occurrence of Heart Failure
DIABETES	Diabetes End-of-Year Flag
DIABETES_MID	Diabetes Mid-Year Flag
DIABETES_EVER	First Occurrence of Diabetes
GLAUCOMA	Glaucoma End-of-Year Flag
GLAUCOMA_MID	Glaucoma Mid-Year Flag
GLAUCOMA_EVER	First Occurrence of Glaucoma
HIP_FRACTURE	Hip/Pelvic Fracture End-of-Year Flag
HIP_FRACTURE_MID	Hip/Pelvic Fracture Mid-Year Flag
HIP_FRACTURE_EVER	First Occurrence of Hip/Pelvic Fracture
ISCHEMICHEART	Ischemic Heart Disease End-of-Year Flag
ISCHEMICHEART_MID	Ischemic Heart Disease Mid-Year Flag
ISCHEMICHEART_EVER	First Occurrence of Ischemic Heart Disease
DEPRESSION	Depression End-of-Year Flag
DEPRESSION_MID	Depression Mid-Year Flag
DEPRESSION_EVER	First Occurrence of Depression
OSTEOPOROSIS	Osteoporosis End-of-Year Flag
OSTEOPOROSIS_MID	Osteoporosis Mid-Year Flag
OSTEOPOROSIS_EVER	First Occurrence of Osteoporosis
RA_OA	Rheumatoid Arthritis / Osteoarthritis End-of-Year Flag
RA_OA_MID	Rheumatoid Arthritis / Osteoarthritis Mid-Year Flag
RA_OA_EVER	First Occurrence of Rheumatoid Arthritis / Osteoarthritis
STROKE_TIA	Stroke / Transient Ischemic Attack End-of-Year Flag
STROKE_TIA_MID	Stroke / Transient Ischemic Attack Mid-Year Flag
STROKE_TIA_EVER	First Occurrence of Stroke / Transient Ischemic Attack
CANCER_BREAST	Breast Cancer End-of-Year Flag
CANCER_BREAST_MID	Breast Cancer Mid-Year Flag

## Master Beneficiary Summary File - Chronic Conditions Segment

<u>Variable Name</u>	<u>Variable Label</u>
CANCER_BREAST_EVER	First Occurrence of Breast Cancer
CANCER_COLORECTAL	Colorectal Cancer End-of-Year Flag
CANCER_COLORECTAL_MID	Colorectal Cancer Mid-Year Flag
CANCER_COLORECTAL_EVER	First Occurrence of Colorectal Cancer
CANCER_PROSTATE	Prostate Cancer End-of-Year Flag
CANCER_PROSTATE_MID	Prostate Cancer Mid-Year Flag
CANCER_PROSTATE_EVER	First Occurrence of Prostate Cancer
CANCER_LUNG	Lung Cancer End-of-Year Flag
CANCER_LUNG_MID	Lung Cancer Mid-Year Flag
CANCER_LUNG_EVER	First Occurrence of Lung Cancer
CANCER_ENDOMETRIAL	Endometrial Cancer End-of-Year Flag
CANCER_ENDOMETRIAL_MID	Endometrial Cancer Mid-Year Flag
CANCER_ENDOMETRIAL_EVER	First Occurrence of Endometrial Cancer
ANEMIA	Anemia End Year Flag
ANEMIA_MID	Anemia Mid Year Flag
ANEMIA_EVER	Anemia First Ever Occurrence Date
ASTHMA	Asthma End Year Flag
ASTHMA_MID	Asthma Mid Year Flag
ASTHMA_EVER	Asthma First Ever Occurrence Date
HYPERL	Hyperlipidemia End Year Flag
HYPERL_MID	Hyperlipidemia Mid Year Flag
HYPERL_EVER	Hyperlipidemia First Ever Occurrence Date
HYPERP	Benign Prostatic Hyperplasia End Year Flag
HYPERP_MID	Benign Prostatic Hyperplasia Mid Year Flag
HYPERP_EVER	Benign Prostatic Hyperplasia First Ever Occurrence Date
HYPERT	Hypertension End Year Flag
HYPERT_MID	Hypertension Mid Year Flag
HYPERT_EVER	Hypertension First Ever Occurrence Date
HYPOTH	Acquired Hypothyroidism End Year Flag
HYPOTH_MID	Acquired Hypothyroidism Mid Year Flag
HYPOTH_EVER	Acquired Hypothyroidism First Ever Occurrence Date

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## Master Beneficiary Summary File - Cost and Utilization Segment

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
HOP_MDCR_PMT	Hospital Outpatient Medicare Payments
HOP_BENE_PMT	Hospital Outpatient Beneficiary Payments
HOP_PRMRY_PMT	Hospital Outpatient Primary Payer Payments
HOP_VISITS	Hospital Outpatient Visits
ACUTE_MDCR_PMT	Acute Inpatient Medicare Payments
ACUTE_BENE_PMT	Acute Inpatient Beneficiary Payments
ACUTE_PRMRY_PMT	Acute Inpatient Primary Payer Payments
ACUTE_PERDIEM_PMT	Acute Inpatient Per Diem Payments
ACUTE_COV_DAYS	Acute Inpatient Covered Days
OIP_MDCR_PMT	Other Inpatient Medicare Payments
OIP_BENE_PMT	Other Inpatient Beneficiary Payments
OIP_PRMRY_PMT	Other Inpatient Primary Payer Payments
OIP_PERDIEM_PMT	Other Inpatient Per Diem Payments
OIP_COV_DAYS	Other Inpatient Covered Days
SNF_MDCR_PMT	Skilled Nursing Facility Medicare Payments
SNF_BENE_PMT	Skilled Nursing Facility Beneficiary Payments
SNF_PRMRY_PMT	Skilled Nursing Facility Primary Payer Payments
SNF_COV_DAYS	Skilled Nursing Facility Covered Days
HOS_MDCR_PMT	Hospice Medicare Payments
HOS_PRMRY_PMT	Hospice Primary Payer Payments
HOS_COV_DAYS	Hospice Covered Days
HH_MDCR_PMT	Home Health Medicare Payments
HH_PRMRY_PMT	Home Health Primary Payer Payments
HH_VISITS	Home Health Visits
ASC_MDCR_PMT	Ambulatory Surgery Center Medicare Payments
ASC_BENE_PMT	Ambulatory Surgery Center Beneficiary Payments
ASC_PRMRY_PMT	Ambulatory Surgery Center Primary Payer Payments
ASC_EVENTS	Ambulatory Surgery Center Events
PTB_DRUG_MDCR_PMT	Part B Drug Medicare Payments
PTB_DRUG_BENE_PMT	Part B Drug Beneficiary Payments
PTB_DRUG_PRMRY_PMT	Part B Drug Primary Payer Payments
PTB_DRUG_EVENTS	Part B Drug Events
EM_MDCR_PMT	Evaluation and Management Medicare Payments
EM_BENE_PMT	Evaluation and Management Beneficiary Payments
EM_PRMRY_PMT	Evaluation and Management Primary Payer Payments
EM_EVENTS	Evaluation and Management Events
ANES_MDCR_PMT	Anesthesia Medicare Payments
ANES_BENE_PMT	Anesthesia Beneficiary Payments
ANES_PRMRY_PMT	Anesthesia Primary Payer Payments
ANES_EVENTS	Anesthesia Events
DIALYS_MDCR_PMT	Dialysis Medicare Payments
DIALYS_BENE_PMT	Dialysis Beneficiary Payments

## Master Beneficiary Summary File - Cost and Utilization Segment

<u>Variable Name</u>	<u>Variable Label</u>
DIALYS_PRMRY_PMT	Dialysis Primary Payer Payments
DIALYS_EVENTS	Dialysis Events
OPROC_MDCR_PMT	Other Procedures Medicare Payments
OPROC_BENE_PMT	Other Procedures Beneficiary Payments
OPROC_PRMRY_PMT	Other Procedures Primary Payer Payments
OPROC_EVENTS	Other Procedures Events
IMG_MDCR_PMT	Imaging Medicare Payments
IMG_BENE_PMT	Imaging Beneficiary Payments
IMG_PRMRY_PMT	Imaging Primary Payer Payments
IMG_EVENTS	Imaging Events
TEST_MDCR_PMT	Tests Medicare Payments
TEST_BENE_PMT	Tests Beneficiary Payments
TEST_PRMRY_PMT	Tests Primary Payer Payments
TEST_EVENTS	Tests Events
DME_MDCR_PMT	Durable Medical Equipment Medicare Payments
DME_BENE_PMT	Durable Medical Equipment Beneficiary Payments
DME_PRMRY_PMT	Durable Medical Equipment Primary Payer Payments
DME_EVENTS	Durable Medical Equipment Events
OTHC_MDCR_PMT	Other Part B Carrier Medicare Payments
OTHC_BENE_PMT	Other Part B Carrier Beneficiary Payments
OTHC_PRMRY_PMT	Other Part B Carrier Primary Payer Payments
OTHC_EVENTS	Other Part B Carrier Events
HOP_ER_VISITS	Hospital Outpatient Emergency Room Visits
IP_ER_VISITS	Inpatient Emergency Room Visits
ACUTE_STAYS	Acute Inpatient Stays
OIP_STAYS	Other Inpatient Stays
SNF_STAYS	Skilled Nursing Facility Stays
HOS_STAYS	Hospice Stays
READMISSIONS	Hospital Readmissions
PHYS_MDCR_PMT	Part B Physician Medicare Payments
PHYS_BENE_PMT	Part B Physician Beneficiary Payments
PHYS_PRMRY_PMT	Part B Physician Primary Payer Payments
PHYS_EVENTS	Part B Physician Events
PTD_EVENTS	Part D Events
PTD_FILL_CNT	Part D Fill Count
PTD_TOTAL_RX_CST	Part D Total Prescription Costs
PTD_MDCR_PMT	Part D Medicare Payments
PTD_BENE_PMT	Part D Beneficiary Payments

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## Medicare Provider and Analysis Review (MedPAR) File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
MEDPAR_YR_NUM	Year of MedPAR Record
NCH_CLM_TYPE_CD	NCH Claim Type Code
BENE_IDENT_CD	BIC reported on first claim included in stay
EQTBL_BIC_CD	Equated BIC
BENE_AGE_CNT	Age as of Date of Admission
BENE_SEX_CD	Sex of Beneficiary
BENE_RACE_CD	Race of Beneficiary
BENE_MDCR_STUS_CD	Reason for entitlement to Medicare benefits as of CLM_THRU_DT
BENE_RSDNC_SSA_STATE_CD	SSA standard state code of a beneficiary's residence
BENE_RSDNC_SSA_CNTY_CD	SSA standard county code of a beneficiary's residence
BENE_MLG_CNTCT_ZIP_CD	Zip code of the mailing address where the beneficiary may be contacted
BENE_DSCHRG_STUS_CD	Code identifying status of patient as of CLM_THRU_DT
FICARR_IDENT_NUM	Intermediary processor identification
WRNG_IND_CD	Warn ind spcfyng dtld billing info obtnd frm clms analyzd for stay prcss
GHO_PD_CD	Code indicating whether or not GHO has paid provider for claim(s)
PPS_IND_CD	Code indicating whether or not facility is being paid under PPS
ORG_NPI_NUM	Organization NPI Number
PRVDR_NUM	MedPAR Provider Number
PRVDR_NUM_SPCL_UNIT_CD	Special num system code for hosp units that are PPS/SNF SB dsngntn excl.
SS_LS_SNF_IND_CD	Code indicating whether stay is short stay, long stay, or SNF
ACTV_XREF_IND	Active Cross-Reference Indicator
SLCT_RSN_CD	Specifies whether this record is a case or control record
STAY_FINL_ACTN_CLM_CNT	Claims (final action) included in stay
LTST_CLM_ACRTN_DT	Date latest claim incl in stay accreted to bene mstr rec at the CWF host
BENE_MDCR_BNFT_EXHST_DT	Last date beneficiary had Medicare coverage
SNF_QUALN_FROM_DT	Beginning date of beneficiary's qualifying stay
SNF_QUALN_THRU_DT	Ending date of beneficiary's qualifying stay
SRC_IP_ADMSN_CD	Admsn to an Inp facility or, for newborn admsn, type of delivery code
IP_ADMSN_TYPE_CD	Type and priority of benes admission to facility for Inp hosp stay code
ADMSN_DAY_CD	Code indicating day of week beneficiary was admitted to facility
ADMSN_DT	Date beneficiary admitted for Inpatient care or date care started
DSCHRG_DT	Date beneficiary was discharged or died
DSCHRG_DSTNTN_CD	Destination upon discharge from facility code
CVRD_LVL_CARE_THRU_DT	Date covered level of care ended in a SNF
BENE_DEATH_DT	Date beneficiary died
BENE_DEATH_DT_VRFY_CD	Death Date Verification Code
ADMSN_DEATH_DAY_CNT	Days from date admitted to facility to date of death
LOS_DAY_CNT	Days of beneficiary's stay in a hospital/SNF
OUTLIER_DAY_CNT	Days paid as outliers (either day or cost) under PPS beyond DRG threshld
UTLZTN_DAY_CNT	Covered days of care chargeable to Medicare utilization for stay
TOT_COINSRNC_DAY_CNT	MedPAR Beneficiary Total Coinsurance Day Count
BENE_LRD_USE_CNT	Lifetime reserve days (LRD) used by beneficiary for stay
BENE_PTA_COINSRNC_AMT	Beneficiary's liability for part A coinsurance for stay (\$)
BENE_IP_DDCTBL_AMT	Beneficiary's liability for stay (\$)
BENE_BLOOD_DDCTBL_AMT	Beneficiary's liability for blood deductible for stay (\$)
BENE_PRRY_PYR_CD	Primary payer responsibility code
BENE_PRRY_PYR_AMT	Primry payer other than Medicare for covered Medicare chrgs for stay (\$)
DRG_CD	DRG Code
DRG_OUTLIER_STAY_CD	Cost or Day Outlier code
DRG_OUTLIER_PMT_AMT	Addnl approved due to outlier situation over DRG allowance for stay (\$)
DRG_PRICE_AMT	Wld hv bn pd if no dedctbls,coinsrnc,prmry payrs,otlrs were invlvd (\$)
IP_DSPRPTNT_SHR_AMT	Over the DRG amount for disproportionate share hospital for stay (\$)
IME_AMT	Additional payment made to teaching hospitals for IME for stay (\$)
PASS_THRU_AMT	Total of all claim pass thru for stay (\$)

## Medicare Provider and Analysis Review (MedPAR) File

<u>Variable Name</u>	<u>Variable Label</u>
TOT_PPS_CPTL_AMT	Total payable for capital PPS (\$)
IP_LOW_VOL_PYMT_AMT	Inpatient Low Volume Payment Amount
TOT_CHRG_AMT	Total all charges for all srvc provided to beneficiary for stay (\$)
TOT_CVR_CHRG_AMT	Portion of total charges covered by Medicare for stay (\$)
MDCR_PMT_AMT	Amt of payment from Medicare trust fund for srvc covered by claim (\$)
ACMDTNS_TOT_CHRG_AMT	Total charge for all accommodations related to beneficiary stay (\$)
DPRTMNTL_TOT_CHRG_AMT	Total charge for all ancillary depts related to beneficiary stay (\$)
PRVT_ROOM_DAY_CNT	Private room days used by beneficiary for stay
SEMIPRVT_ROOM_DAY_CNT	Semi-private room days used by beneficiary for stay
WARD_DAY_CNT	Ward days used by beneficiary for stay
INTNSV_CARE_DAY_CNT	Intensive care days used by beneficiary for stay
CRNRY_CARE_DAY_CNT	Coronary care days used by beneficiary for stay
PRVT_ROOM_CHRG_AMT	Private room accommodations related to beneficiary stay (\$)
SEMIPRVT_ROOM_CHRG_AMT	Semi-private room accommodations related to beneficiary stay (\$)
WARD_CHRG_AMT	Ward accommodations related to beneficiary stay (\$)
INTNSV_CARE_CHRG_AMT	Intensive care accommodations related to beneficiary stay (\$)
CRNRY_CARE_CHRG_AMT	Coronary care accommodations related to beneficiary stay (\$)
OTHR_SRVC_CHRG_AMT	Other services related to beneficiary stay (\$)
PHRMCY_CHRG_AMT	Pharmaceutical costs related to beneficiary stay (\$)
MDCL_SUPLY_CHRG_AMT	Medical/surgical supplies related to beneficiary stay (\$)
DME_CHRG_AMT	DME related to beneficiary stay (\$)
USED_DME_CHRG_AMT	Used DME related to beneficiary stay (\$)
PHYS_THRPY_CHRG_AMT	Physical therapy services provided during beneficiary stay (\$)
OCPTNL_THRPY_CHRG_AMT	Occupational therapy services provided during beneficiary stay (\$)
SPCH_PTHLGY_CHRG_AMT	Speech pathology services provided during beneficiary stay (\$)
INHLTN_THRPY_CHRG_AMT	Inhalation therapy services provided during beneficiary stay (\$)
BLOOD_CHRG_AMT	Blood provided during beneficiary stay (\$)
BLOOD_ADMIN_CHRG_AMT	Blood storage and processing related to beneficiary stay (\$)
BLOOD_PT_FRNSH_QTY	Quantity of blood (whole pints) furnished to beneficiary during stay
OPRTG_ROOM_CHRG_AMT	OR, recovery rm, and labor rm delivery used by bene during stay (\$)
LTHTRPSY_CHRG_AMT	Lithotripsy services provided during beneficiary stay (\$)
CRDLGY_CHRG_AMT	Cardiology services and ECG(s) provided during beneficiary stay (\$)
ANSTHSA_CHRG_AMT	Anesthesia services provided during beneficiary stay (\$)
LAB_CHRG_AMT	Laboratory costs related to beneficiary stay (\$)
RDLGY_CHRG_AMT	Radiology costs (excluding MRI) related to a beneficiary stay (\$)
MRI_CHRG_AMT	MRI services provided during beneficiary stay (\$)
OP_SRVC_CHRG_AMT	Outpatient services provided during beneficiary stay (\$)
ER_CHRG_AMT	Emergency room services provided during beneficiary stay (\$)
AMBLNC_CHRG_AMT	Ambulance services related to beneficiary stay (\$)
PROFNL_FEES_CHRG_AMT	Professional fees related to beneficiary stay (\$)
ORGN_ACQSTN_CHRG_AMT	Organ acquisition or oth donor bank srvc related to benes stay (\$)
ESRD_REV_SETG_CHRG_AMT	ESRD services related to beneficiary stay (\$)
CLNC_VISIT_CHRG_AMT	Clinic visits related to beneficiary stay (\$)
ICU_IND_CD	ICU type code
CRNRY_CARE_IND_CD	Coronary care unit type code
PHRMCY_IND_CD	Drugs type code
TRNSPLNT_IND_CD	Organ transplant code
RDLGY_ONCLGY_IND_SW	Radiology oncology services indicator
RDLGY_DGNSTC_IND_SW	Radiology diagnostic services indicator
RDLGY_THRPTC_IND_SW	Radiology therapeutic services indicator
RDLGY_NUCLR_MDCN_IND_SW	Radiology nuclear medicine services indicator
RDLGY_CT_SCAN_IND_SW	Radiology computed tomographic (CT) scan services indicator
RDLGY_OTHR_IMGNG_IND_SW	Radiology other imaging services indicator
OP_SRVC_IND_CD	Outpatient services/ambulatory surgical care code
ORGN_ACQSTN_IND_CD	Organ acquisition type code
ESRD_COND_CD	ESRD condition code
ESRD_SETG_IND_1_CD	Dialysis type code I
ESRD_SETG_IND_2_CD	Dialysis type code II
ESRD_SETG_IND_3_CD	Dialysis type code III
ESRD_SETG_IND_4_CD	Dialysis type code IV

## Medicare Provider and Analysis Review (MedPAR) File

<u>Variable Name</u>	<u>Variable Label</u>
ESRD_SETG_IND_5_CD	Dialysis type code V
ADMTG_DGNS_CD	Initial diagnosis at time of admission
ADMTG_DGNS_VRSN_CD	MedPAR Admitting Diagnosis Version Code
DGNS_CD_CNT	Diagnosis codes included in stay
DGNS_VRSN_CD	Version Code - Indicate if diagnosis code is ICD-9 or ICD-10 (Earlier Version)
DGNS_VRSN_CD_1	Version Code 01 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_2	Version Code 02 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_3	Version Code 03 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_4	Version Code 04 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_5	Version Code 05 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_6	Version Code 06 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_7	Version Code 07 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_8	Version Code 08 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_9	Version Code 09 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_10	Version Code 10 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_11	Version Code 11 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_12	Version Code 12 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_13	Version Code 13 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_14	Version Code 14 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_15	Version Code 15 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_16	Version Code 16 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_17	Version Code 17 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_18	Version Code 18 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_19	Version Code 19 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_20	Version Code 20 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_21	Version Code 21 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_22	Version Code 22 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_23	Version Code 23 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_24	Version Code 24 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_VRSN_CD_25	Version Code 25 - Indicate if diagnosis code is ICD-9 or ICD-10
DGNS_1_CD	Primary ICD-9-CM code
DGNS_2_CD	ICD-9-CM Diagnosis code II
DGNS_3_CD	ICD-9-CM Diagnosis code III
DGNS_4_CD	ICD-9-CM Diagnosis code IV
DGNS_5_CD	ICD-9-CM Diagnosis code V
DGNS_6_CD	ICD-9-CM Diagnosis code VI
DGNS_7_CD	ICD-9-CM Diagnosis code VII
DGNS_8_CD	ICD-9-CM Diagnosis code VIII
DGNS_9_CD	ICD-9-CM Diagnosis code IX
DGNS_10_CD	ICD-9-CM Diagnosis code X
DGNS_11_CD	ICD-9-CM Diagnosis code XI
DGNS_12_CD	ICD-9-CM Diagnosis code XII
DGNS_13_CD	ICD-9-CM Diagnosis code XIII
DGNS_14_CD	ICD-9-CM Diagnosis code XIV
DGNS_15_CD	ICD-9-CM Diagnosis code XV
DGNS_16_CD	ICD-9-CM Diagnosis code XVI
DGNS_17_CD	ICD-9-CM Diagnosis code XVII
DGNS_18_CD	ICD-9-CM Diagnosis code XVIII
DGNS_19_CD	ICD-9-CM Diagnosis code XIX
DGNS_20_CD	ICD-9-CM Diagnosis code XX
DGNS_21_CD	ICD-9-CM Diagnosis code XXI
DGNS_22_CD	ICD-9-CM Diagnosis code XXII
DGNS_23_CD	ICD-9-CM Diagnosis code XXIII
DGNS_24_CD	ICD-9-CM Diagnosis code XXIV
DGNS_25_CD	ICD-9-CM Diagnosis code XXV
DGNS_POA_CD	Diagnosis Code POA Array
POA_DGNS_CD_CNT	MedPAR Claim Present on Admission Diagnosis Code Count
POA_DGNS_1_IND_CD	Diagnosis Present on Admission Indicator 1
POA_DGNS_2_IND_CD	Diagnosis Present on Admission Indicator 2
POA_DGNS_3_IND_CD	Diagnosis Present on Admission Indicator 3

## Medicare Provider and Analysis Review (MedPAR) File

<u>Variable Name</u>	<u>Variable Label</u>
POA_DGNS_4_IND_CD	Diagnosis Present on Admission Indicator 4
POA_DGNS_5_IND_CD	Diagnosis Present on Admission Indicator 5
POA_DGNS_6_IND_CD	Diagnosis Present on Admission Indicator 6
POA_DGNS_7_IND_CD	Diagnosis Present on Admission Indicator 7
POA_DGNS_8_IND_CD	Diagnosis Present on Admission Indicator 8
POA_DGNS_9_IND_CD	Diagnosis Present on Admission Indicator 9
POA_DGNS_10_IND_CD	Diagnosis Present on Admission Indicator 10
POA_DGNS_11_IND_CD	Diagnosis Present on Admission Indicator 11
POA_DGNS_12_IND_CD	Diagnosis Present on Admission Indicator 12
POA_DGNS_13_IND_CD	Diagnosis Present on Admission Indicator 13
POA_DGNS_14_IND_CD	Diagnosis Present on Admission Indicator 14
POA_DGNS_15_IND_CD	Diagnosis Present on Admission Indicator 15
POA_DGNS_16_IND_CD	Diagnosis Present on Admission Indicator 16
POA_DGNS_17_IND_CD	Diagnosis Present on Admission Indicator 17
POA_DGNS_18_IND_CD	Diagnosis Present on Admission Indicator 18
POA_DGNS_19_IND_CD	Diagnosis Present on Admission Indicator 19
POA_DGNS_20_IND_CD	Diagnosis Present on Admission Indicator 20
POA_DGNS_21_IND_CD	Diagnosis Present on Admission Indicator 21
POA_DGNS_22_IND_CD	Diagnosis Present on Admission Indicator 22
POA_DGNS_23_IND_CD	Diagnosis Present on Admission Indicator 23
POA_DGNS_24_IND_CD	Diagnosis Present on Admission Indicator 24
POA_DGNS_25_IND_CD	Diagnosis Present on Admission Indicator 25
DGNS_E_CD_CNT	MedPAR Diagnosis E Code Count
DGNS_E_VRSN_CD	MedPAR Diagnosis E Version Code (Earlier Version)
DGNS_E_VRSN_CD_1	MedPAR Diagnosis E Version Code 01
DGNS_E_VRSN_CD_2	MedPAR Diagnosis E Version Code 02
DGNS_E_VRSN_CD_3	MedPAR Diagnosis E Version Code 03
DGNS_E_VRSN_CD_4	MedPAR Diagnosis E Version Code 04
DGNS_E_VRSN_CD_5	MedPAR Diagnosis E Version Code 05
DGNS_E_VRSN_CD_6	MedPAR Diagnosis E Version Code 06
DGNS_E_VRSN_CD_7	MedPAR Diagnosis E Version Code 07
DGNS_E_VRSN_CD_8	MedPAR Diagnosis E Version Code 08
DGNS_E_VRSN_CD_9	MedPAR Diagnosis E Version Code 09
DGNS_E_VRSN_CD_10	MedPAR Diagnosis E Version Code 10
DGNS_E_VRSN_CD_11	MedPAR Diagnosis E Version Code 11
DGNS_E_VRSN_CD_12	MedPAR Diagnosis E Version Code 12
DGNS_E_1_CD	E Diagnosis Code 1 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_2_CD	E Diagnosis Code 2 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_3_CD	E Diagnosis Code 3 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_4_CD	E Diagnosis Code 4 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_5_CD	E Diagnosis Code 5 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_6_CD	E Diagnosis Code 6 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_7_CD	E Diagnosis Code 7 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_8_CD	E Diagnosis Code 8 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_9_CD	E Diagnosis Code 9 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_10_CD	E Diagnosis Code 10 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_11_CD	E Diagnosis Code 11 - Extrnl cause of injury, poisoning, or oth adverse effect
DGNS_E_12_CD	E Diagnosis Code 12 - Extrnl cause of injury, poisoning, or oth adverse effect
POA_DGNS_E_CD_CNT	MedPAR Claim Present on Admission Diagnosis E Code Count
POA_DGNS_E_1_IND_CD	Diagnosis E Code Present on Admission Indicator 1
POA_DGNS_E_2_IND_CD	Diagnosis E Code Present on Admission Indicator 2
POA_DGNS_E_3_IND_CD	Diagnosis E Code Present on Admission Indicator 3
POA_DGNS_E_4_IND_CD	Diagnosis E Code Present on Admission Indicator 4
POA_DGNS_E_5_IND_CD	Diagnosis E Code Present on Admission Indicator 5
POA_DGNS_E_6_IND_CD	Diagnosis E Code Present on Admission Indicator 6
POA_DGNS_E_7_IND_CD	Diagnosis E Code Present on Admission Indicator 7
POA_DGNS_E_8_IND_CD	Diagnosis E Code Present on Admission Indicator 8
POA_DGNS_E_9_IND_CD	Diagnosis E Code Present on Admission Indicator 9
POA_DGNS_E_10_IND_CD	Diagnosis E Code Present on Admission Indicator 10
POA_DGNS_E_11_IND_CD	Diagnosis E Code Present on Admission Indicator 11

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<u>Variable Name</u>	<u>Variable Label</u>
POA_DGNS_E_12_IND_CD	Diagnosis E Code Present on Admission Indicator 12
SRGCL_PRCDR_IND_SW	Surgical procedures indicator
SRGCL_PRCDR_CD_CNT	Surgical procedure codes included in stay
SRGCL_PRCDR_VRSN_CD	MedPAR Surgical Procedure Version Code (Earlier Version)
SRGCL_PRCDR_VRSN_CD_1	MedPAR Surgical Procedure Version Code 01
SRGCL_PRCDR_VRSN_CD_2	MedPAR Surgical Procedure Version Code 02
SRGCL_PRCDR_VRSN_CD_3	MedPAR Surgical Procedure Version Code 03
SRGCL_PRCDR_VRSN_CD_4	MedPAR Surgical Procedure Version Code 04
SRGCL_PRCDR_VRSN_CD_5	MedPAR Surgical Procedure Version Code 05
SRGCL_PRCDR_VRSN_CD_6	MedPAR Surgical Procedure Version Code 06
SRGCL_PRCDR_VRSN_CD_7	MedPAR Surgical Procedure Version Code 07
SRGCL_PRCDR_VRSN_CD_8	MedPAR Surgical Procedure Version Code 08
SRGCL_PRCDR_VRSN_CD_9	MedPAR Surgical Procedure Version Code 09
SRGCL_PRCDR_VRSN_CD_10	MedPAR Surgical Procedure Version Code 10
SRGCL_PRCDR_VRSN_CD_11	MedPAR Surgical Procedure Version Code 11
SRGCL_PRCDR_VRSN_CD_12	MedPAR Surgical Procedure Version Code 12
SRGCL_PRCDR_VRSN_CD_13	MedPAR Surgical Procedure Version Code 13
SRGCL_PRCDR_VRSN_CD_14	MedPAR Surgical Procedure Version Code 14
SRGCL_PRCDR_VRSN_CD_15	MedPAR Surgical Procedure Version Code 15
SRGCL_PRCDR_VRSN_CD_16	MedPAR Surgical Procedure Version Code 16
SRGCL_PRCDR_VRSN_CD_17	MedPAR Surgical Procedure Version Code 17
SRGCL_PRCDR_VRSN_CD_18	MedPAR Surgical Procedure Version Code 18
SRGCL_PRCDR_VRSN_CD_19	MedPAR Surgical Procedure Version Code 19
SRGCL_PRCDR_VRSN_CD_20	MedPAR Surgical Procedure Version Code 20
SRGCL_PRCDR_VRSN_CD_21	MedPAR Surgical Procedure Version Code 21
SRGCL_PRCDR_VRSN_CD_22	MedPAR Surgical Procedure Version Code 22
SRGCL_PRCDR_VRSN_CD_23	MedPAR Surgical Procedure Version Code 23
SRGCL_PRCDR_VRSN_CD_24	MedPAR Surgical Procedure Version Code 24
SRGCL_PRCDR_VRSN_CD_25	MedPAR Surgical Procedure Version Code 25
SRGCL_PRCDR_1_CD	Principal Procedure code
SRGCL_PRCDR_2_CD	Procedure Code II
SRGCL_PRCDR_3_CD	Procedure Code III
SRGCL_PRCDR_4_CD	Procedure Code IV
SRGCL_PRCDR_5_CD	Procedure Code V
SRGCL_PRCDR_6_CD	Procedure Code VI
SRGCL_PRCDR_7_CD	Procedure Code VII
SRGCL_PRCDR_8_CD	Procedure Code VIII
SRGCL_PRCDR_9_CD	Procedure Code IX
SRGCL_PRCDR_10_CD	Procedure Code X
SRGCL_PRCDR_11_CD	Procedure Code XI
SRGCL_PRCDR_12_CD	Procedure Code XII
SRGCL_PRCDR_13_CD	Procedure Code XIII
SRGCL_PRCDR_14_CD	Procedure Code XIV
SRGCL_PRCDR_15_CD	Procedure Code XV
SRGCL_PRCDR_16_CD	Procedure Code XVI
SRGCL_PRCDR_17_CD	Procedure Code XVII
SRGCL_PRCDR_18_CD	Procedure Code XVIII
SRGCL_PRCDR_19_CD	Procedure Code XIX
SRGCL_PRCDR_20_CD	Procedure Code XX
SRGCL_PRCDR_21_CD	Procedure Code XXI
SRGCL_PRCDR_22_CD	Procedure Code XXII
SRGCL_PRCDR_23_CD	Procedure Code XXIII
SRGCL_PRCDR_24_CD	Procedure Code XXIV
SRGCL_PRCDR_25_CD	Procedure Code XXV
SRGCL_PRCDR_DT_CNT	Dates associated with surgical procedures included in stay
SRGCL_PRCDR_PRFRM_1_DT	Principal Procedure Date
SRGCL_PRCDR_PRFRM_2_DT	Procedure Date II
SRGCL_PRCDR_PRFRM_3_DT	Procedure Date III
SRGCL_PRCDR_PRFRM_4_DT	Procedure Date IV
SRGCL_PRCDR_PRFRM_5_DT	Procedure Date V

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<u>Variable Name</u>	<u>Variable Label</u>
SRGCL_PRCDR_PRFRM_6_DT	Procedure Date VI
SRGCL_PRCDR_PRFRM_7_DT	Procedure Date VII
SRGCL_PRCDR_PRFRM_8_DT	Procedure Date VIII
SRGCL_PRCDR_PRFRM_9_DT	Procedure Date IX
SRGCL_PRCDR_PRFRM_10_DT	Procedure Date X
SRGCL_PRCDR_PRFRM_11_DT	Procedure Date XI
SRGCL_PRCDR_PRFRM_12_DT	Procedure Date XII
SRGCL_PRCDR_PRFRM_13_DT	Procedure Date XIII
SRGCL_PRCDR_PRFRM_14_DT	Procedure Date XIV
SRGCL_PRCDR_PRFRM_15_DT	Procedure Date XV
SRGCL_PRCDR_PRFRM_16_DT	Procedure Date XVI
SRGCL_PRCDR_PRFRM_17_DT	Procedure Date XVII
SRGCL_PRCDR_PRFRM_18_DT	Procedure Date XVIII
SRGCL_PRCDR_PRFRM_19_DT	Procedure Date XIX
SRGCL_PRCDR_PRFRM_20_DT	Procedure Date XX
SRGCL_PRCDR_PRFRM_21_DT	Procedure Date XXI
SRGCL_PRCDR_PRFRM_22_DT	Procedure Date XXII
SRGCL_PRCDR_PRFRM_23_DT	Procedure Date XXIII
SRGCL_PRCDR_PRFRM_24_DT	Procedure Date XXIV
SRGCL_PRCDR_PRFRM_25_DT	Procedure Date XXV
CLM_PTNT_RLTNSHP_CD	Claim Patient Relationship Code
CARE_IMPRVMT_MODEL_1_CD	Care Improvement Model 1 Code
CARE_IMPRVMT_MODEL_2_CD	Care Improvement Model 2 Code
CARE_IMPRVMT_MODEL_3_CD	Care Improvement Model 3 Code
CARE_IMPRVMT_MODEL_4_CD	Care Improvement Model 4 Code
VBP_PRTCPNT_IND_CD	VBP Participant Indicator Code
HRR_PRTCPNT_IND_CD	HRR Participant Indicator Code
BNDLD_MODEL_DSCNT_PCT	Bundled Model Discount Percent
VBP_ADJSTMT_PCT	VBP Adjustment Percent
HRR_ADJSTMT_PCT	HRR Adjustment Percent
INFRMTL_ENCTR_IND_SW	Informational Encounter Indicator Switch
MA_TCHNG_IND_SW	MA Teaching Indicator Switch
PROD_RPLCMT_LIFECYC_SW	Prod Replacement Lifecycle Switch
PROD_RPLCMT_RCLL_SW	Prod Replacement Recall Switch
CRED_RCVD_RPLCD_DVC_SW	Credit Received Replaced Device Switch
OBSRVTN_SW	Observation Switch
NEW_TCHNLGY_ADD_ON_AMT	New Technology Add-On Amount
BASE_OPRTG_DRG_AMT	Base Operating DRG Amount
OPRTG_HSP_AMT	Operating Hospital Amount
MDCL_SRGCL_GNRL_AMT	Medical/Surgical General Amount
MDCL_SRGCL_NSTRL_AMT	Medical/Surgical Non-Sterile Amount
MDCL_SRGCL_STRL_AMT	Medical/Surgical Sterile Amount
TAKE_HOME_AMT	Take Home Amount
PRSTHTC_ORTHOTC_AMT	Prosthetic Orthotic Amount
MDCL_SRGCL_PCMKR_AMT	Medical/Surgical Pacemaker Amount
INTRAOCULAR_LENS_AMT	Intraocular Lens Amount
OXYGN_TAKE_HOME_AMT	Oxygen Take Home Amount
OTHR_IMPLANTS_AMT	Other Implants Amount
OTHR_SUPLIES_DVC_AMT	Other Supplies Device Amount
INCDNT_RDLGY_AMT	Incident Radiology Amount
INCDNT_DGNSTC_SRVCS_AMT	Incident Diagnostic Services Amount
MDCL_SRGCL_DRNG_AMT	Medical/Surgical Dressing Amount
INVSTGTNL_DVC_AMT	Investigational Device Amount
MDCL_SRGCL_MISC_AMT	Medical/Surgical Miscellaneous Amount
RDLGY_ONCOLOGY_AMT	Radiology/Oncology Amount
RDLGY_DGNSTC_AMT	Radiology Diagnostic Amount
RDLGY_THRPTC_AMT	Radiology Therapeutic Amount
RDLGY_NUCLR_MDCN_AMT	Radiology Nuclear Medicine Amount
RDLGY_CT_SCAN_AMT	Radiology CT Scan Amount
RDLGY_OTHR_IMGNG_AMT	Radiology Other Imaging Amount

## Medicare Provider and Analysis Review (MedPAR) File

<u>Variable Name</u>	<u>Variable Label</u>
OPRTG_ROOM_AMT	Operating Room Amount
OR_LABOR_DLVRY_AMT	O/R Labor Delivery Amount
CRDC_CATHRZTN_AMT	Cardiac Catheterization Amount
SQSTRTN_RDCTN_AMT	Sequestration Reduction Amount
UNCOMPD_CARE_PYMT_AMT	Uncompensated Care Payment Amount
BNDLD_ADJSTMT_AMT	Bundled Adjustment Amount
VBP_ADJSTMT_AMT	Hospital Value Based Purchasing (VBP) Amount
HRR_ADJSTMT_AMT	Hospital Readmission Reduction (HRR) Adjustment Amount

\* *PUBLICID should be used as the ID variable for NHIS and LSOA II.*

*SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.*

*PATNUM should be used as the ID variable for NHHCS.*

*RESNUM should be used as the ID variable for NNHS.*

***Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.***

## Carrier Claims File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date
CARR_CLM_ENTRY_CD	Carrier Claim Entry Code
CLM_DISP_CD	Claim Disposition Code
CARR_NUM	Carrier Number
CARR_CLM_PMT_DNL_CD	Carrier Claim Payment Denial Code
CLM_PMT_AMT	Claim Payment Amount
CARR_CLM_PRMRY_PYR_PD_AMT	Carrier Claim Primary Payer Paid Amount
RFR_PHYSN_UPIN	Carrier Claim Referring Physician UPIN Number
RFR_PHYSN_NPI	Carrier Claim Referring Physician NPI Number
CARR_CLM_PRVDR_ASGNMT_IND_SW	Carrier Claim Provider Assignment Indicator Switch
NCH_CLM_PRVDR_PMT_AMT	NCH Claim Provider Payment Amount
NCH_CLM_BENE_PMT_AMT	NCH Claim Beneficiary Payment Amount
NCH_CARR_CLM_SBMTD_CHRG_AMT	NCH Carrier Claim Submitted Charge Amount
NCH_CARR_CLM_ALOWD_AMT	NCH Carrier Claim Allowed Charge Amount
CARR_CLM_CASH_DDCTBL_APLD_AMT	Carrier Claim Cash Deductible Applied Amount
CARR_CLM_HCPCS_YR_CD	Carrier Claim HCPCS Year Code
CARR_CLM_RFRNG_PIN_NUM	Carrier Claim Referring PIN Number
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)
CLM_CLNCL_TRIL_NUM	Clinical Trial Number
DOB_DT	Date of Birth from Claim (Date)
GNDR_CD	Gender Code from Claim
BENE_RACE_CD	Race Code from Claim
BENE_CNTY_CD	County Code from Claim (SSA)
BENE_STATE_CD	State Code from Claim (SSA)
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim



## Carrier Claims File

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Carrier Line File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
LINE_NUM	Claim Line Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
CARR_PRFRNG_PIN_NUM	Carrier Line Claim Performing PIN Number
PRF_PHYSN_UPIN	Carrier Line Performing UPIN Number
PRF_PHYSN_NPI	Carrier Line Performing NPI Number
ORG_NPI_NUM	Carrier Line Performing Group NPI Number
CARR_LINE_PRVDR_TYPE_CD	Carrier Line Provider Type Code
TAX_NUM	Line Provider Tax Number
PRVDR_STATE_CD	Line NCH Provider State Code
PRVDR_ZIP	Carrier Line Performing Provider ZIP Code
PRVDR_SPCLTY	Line HCFA Provider Specialty Code
PRTCPTNG_IND_CD	Line Provider Participating Indicator Code
CARR_LINE_RDCD_PMT_PHYS_ASTN_C	Carrier Line Reduced Payment Physician Assistant Code
LINE_SRVC_CNT	Line Service Count
LINE_CMS_TYPE_SRVC_CD	Line HCFA Type Service Code
LINE_PLACE_OF_SRVC_CD	Line Place Of Service Code
CARR_LINE_PRCNG_LCLTY_CD	Carrier Line Pricing Locality Code
LINE_1ST_EXPNS_DT	Line First Expense Date
LINE_LAST_EXPNS_DT	Line Last Expense Date
HCPCS_CD	Line Healthcare Common Procedure Coding System
HCPCS_1ST_MDFR_CD	Line HCPCS Initial Modifier Code
HCPCS_2ND_MDFR_CD	Line HCPCS Second Modifier Code
BETOS_CD	Line NCH BETOS Code
LINE_NCH_PMT_AMT	Line NCH Payment Amount
LINE_BENE_PMT_AMT	Line Beneficiary Payment Amount
LINE_PRVDR_PMT_AMT	Line Provider Payment Amount
LINE_BENE_PTB_DDCTBL_AMT	Line Beneficiary Part B Deductible Amount
LINE_BENE_PRMRY_PYR_CD	Line Beneficiary Primary Payer Code
LINE_BENE_PRMRY_PYR_PD_AMT	Line Beneficiary Primary Payer Paid Amount
LINE_COINSRNC_AMT	Line Coinsurance Amount
LINE_SBMTD_CHRG_AMT	Line Submitted Charge Amount
LINE_ALOWD_CHRG_AMT	Line Allowed Charge Amount
LINE_PRCSG_IND_CD	Line Processing Indicator Code
LINE_PMT_80_100_CD	Line Payment 80%/100% Code
LINE_SERVICE_DEDUCTIBLE	Line Service Deductible Indicator Switch
CARR_LINE_MTUS_CNT	Carrier Line Miles/Time/Units/Services Count
CARR_LINE_MTUS_CD	Carrier Line Miles/Time/Units/Services Indicator Code
LINE_ICD_DGNS_CD	Line Diagnosis Code Code
LINE_ICD_DGNS_VRSN_CD	Line Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
HPSA_SCRCTY_IND_CD	Carrier Line HPSA/Scarcity Indicator Code
CARR_LINE_RX_NUM	Carrier Line RX Number
LINE_HCT_HGB_RSLT_NUM	Hematocrit/Hemoglobin Test Results
LINE_HCT_HGB_TYPE_CD	Hematocrit/Hemoglobin Test Type code
LINE_NDC_CD	Line National Drug Code
CARR_LINE_CLIA_LAB_NUM	Clinical Laboratory Improvement Amendments monitored laboratory number
CARR_LINE_ANSTHSA_UNIT_CNT	Carrier Line Anesthesia Unit Count

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Durable Medical Equipment (DME) Claims File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date
CARR_CLM_ENTRY_CD	Carrier Claim Entry Code
CLM_DISP_CD	Claim Disposition Code
CARR_NUM	Carrier Number
CARR_CLM_PMT_DNL_CD	Carrier Claim Payment Denial Code
CLM_PMT_AMT	Claim Payment Amount
CARR_CLM_PRMRY_PYR_PD_AMT	Carrier Claim Primary Payer Paid Amount
CARR_CLM_PRVDR_ASGNMT_IND_SW	Claim Provider Assignment Indicator Switch
NCH_CLM_PRVDR_PMT_AMT	NCH Claim Provider Payment Amount
NCH_CLM_BENE_PMT_AMT	NCH Claim Beneficiary Payment Amount
NCH_CARR_CLM_SBMTD_CHRG_AMT	NCH Carrier Claim Submitted Charge Amount
NCH_CARR_CLM_ALOWD_AMT	NCH Carrier Claim Allowed Charge Amount
CARR_CLM_CASH_DDCTBL_APLD_AMT	Carrier Claim Cash Deductible Applied Amount
CARR_CLM_HCPCS_YR_CD	Carrier Claim HCPCS Year Code
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)
RFR_PHYSN_UPIN	DMERC Claim Ordering Physician UPIN Number
RFR_PHYSN_NPI	DMERC Claim Referring Physician NPI Number
CLM_CLNCL_TRIL_NUM	Clinical Trial Number
DOB_DT	Date of Birth from Claim (Date)
GNDR_CD	Gender Code from Claim
BENE_RACE_CD	Race Code from Claim
BENE_CNTY_CD	County Code from Claim (SSA)
BENE_STATE_CD	State Code from Claim (SSA)
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim

## Durable Medical Equipment (DME) Claims File

*\* PUBLICID should be used as the ID variable for NHIS and LSOA II.  
SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
PATNUM should be used as the ID variable for NHHCS.  
RESNUM should be used as the ID variable for NNHS.*

***Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.***

## Durable Medical Equipment (DME) Line File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
LINE_NUM	Claim Line Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
TAX_NUM	Line Provider Tax Number
PRVDR_SPCLTY	Line HCFA Provider Specialty Code
PRTCPTNG_IND_CD	Line Provider Participating Indicator Code
LINE_SRVC_CNT	Line Service Count
LINE_CMS_TYPE_SRVC_CD	Line HCFA Type Service Code
LINE_PLACE_OF_SRVC_CD	Line Place Of Service Code
LINE_1ST_EXPNS_DT	Line First Expense Date
LINE_LAST_EXPNS_DT	Line Last Expense Date
HCPCS_CD	Line Healthcare Common Procedure Coding System
HCPCS_1ST_MDFR_CD	Line HCPCS Initial Modifier Code
HCPCS_2ND_MDFR_CD	Line HCPCS Second Modifier Code
BETOS_CD	Line NCH BETOS Code
LINE_NCH_PMT_AMT	Line NCH Payment Amount
LINE_BENE_PMT_AMT	Line Beneficiary Payment Amount
LINE_PRVDR_PMT_AMT	Line Provider Payment Amount
LINE_BENE_PTBL_DDCTBL_AMT	Line Beneficiary Part B Deductible Amount
LINE_BENE_PRMRY_PYR_CD	Line Beneficiary Primary Payer Code
LINE_BENE_PRMRY_PYR_PD_AMT	Line Beneficiary Primary Payer Paid Amount
LINE_COINSRNC_AMT	Line Coinsurance Amount
LINE_PRMRY_ALLOWED_CHRG_AMT	Line Primary Payer Allowed Charge Amount
LINE_SBMTD_CHRG_AMT	Line Submitted Charge Amount
LINE_ALLOWED_CHRG_AMT	Line Allowed Charge Amount
LINE_PRCSG_IND_CD	Line Processing Indicator Code
LINE_PMT_80_100_CD	Line Payment 80%/100% Code
LINE_SERVICE_DEDUCTIBLE	Line Service Deductible Indicator Switch
LINE_ICD_DGNS_CD	Line Diagnosis Code Code
LINE_ICD_DGNS_VRSN_CD	Line Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
LINE_DME_PRCHS_PRICE_AMT	Line DME Purchase Price Amount
PRVDR_NUM	DMERC Line Supplier Provider Number
PRVDR_NPI	DMERC Line Item Supplier NPI Number
DMERC_LINE_PRCNG_STATE_CD	DMERC Line Pricing State Code
PRVDR_STATE_CD	DMERC Line Provider State Code
DMERC_LINE_SUPPLR_TYPE_CD	DMERC Line Supplier Type Code
HCPCS_3RD_MDFR_CD	DMERC Line HCPCS Third Modifier Code
HCPCS_4TH_MDFR_CD	DMERC Line HCPCS Fourth Modifier Code
DMERC_LINE_SCRN_SVGS_AMT	DMERC Line Screen Savings Amount
DMERC_LINE_MTUS_CNT	DMERC Line Miles/Time/Units/Services Count
DMERC_LINE_MTUS_CD	DMERC Line Miles/Time/ Units/Services Indicator Code
LINE_HCT_HGB_RSLT_NUM	Hematocrit/Hemoglobin Test Results
LINE_HCT_HGB_TYPE_CD	Hematocrit/Hemoglobin Test Type code
LINE_NDC_CD	Line National Drug Code

## Durable Medical Equipment (DME) Line File

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.

*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.

*PATNUM* should be used as the ID variable for NHHCS.

*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Home Health Agency (HHA) Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date
FI_CLM_PROC_DT	FI Claim Process Date
PRVDR_NUM	Provider Number
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
FI_NUM	FI Number
CLM_MDCR_NON_PMT_RSN_CD	Claim Medicare Non Payment Reason Code
CLM_PMT_AMT	Claim Payment Amount
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amount
NCH_PRMRY_PYR_CD	NCH Primary Payer Code
PRVDR_STATE_CD	NCH Provider State Code
ORG_NPI_NUM	Organization NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_PPS_IND_CD	Claim PPS Indicator Code
CLM_TOT_CHRG_AMT	Claim Total Charge Amount
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code XIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD14	Claim Diagnosis Code XIV

## Home Health Agency (HHA) Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
ICD_DGNS_VRSN_CD14	Claim Diagnosis Code XIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_VRSN_CD15	Claim Diagnosis Code XV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_VRSN_CD16	Claim Diagnosis Code XVI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_VRSN_CD17	Claim Diagnosis Code XVII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_VRSN_CD18	Claim Diagnosis Code XVIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_VRSN_CD19	Claim Diagnosis Code XIX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_VRSN_CD20	Claim Diagnosis Code XX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_VRSN_CD21	Claim Diagnosis Code XXI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_VRSN_CD22	Claim Diagnosis Code XXII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_VRSN_CD23	Claim Diagnosis Code XXIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_VRSN_CD24	Claim Diagnosis Code XXIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD25	Claim Diagnosis Code XXV
ICD_DGNS_VRSN_CD25	Claim Diagnosis Code XXV Diagnosis Version Code (ICD-9 or ICD-10)
FST_DGNS_E_CD	First Claim Diagnosis E Code
FST_DGNS_E_VRSN_CD	First Claim Diagnosis E Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_VRSN_CD1	Claim Diagnosis E Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_VRSN_CD2	Claim Diagnosis E Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_VRSN_CD3	Claim Diagnosis E Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_VRSN_CD4	Claim Diagnosis E Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_VRSN_CD5	Claim Diagnosis E Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_VRSN_CD6	Claim Diagnosis E Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_VRSN_CD7	Claim Diagnosis E Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_VRSN_CD8	Claim Diagnosis E Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_VRSN_CD9	Claim Diagnosis E Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_VRSN_CD10	Claim Diagnosis E Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_VRSN_CD11	Claim Diagnosis E Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
ICD_DGNS_E_VRSN_CD12	Claim Diagnosis E Code XII Diagnosis Version Code (ICD-9 or ICD-10)
CLM_HHA_LUPA_IND_CD	Claim HHA Low Utilization Payment Adjustment (LUPA) Indicator Code
CLM_HHA_RFRL_CD	Claim HHA Referral Code
CLM_HHA_TOT_VISIT_CNT	Claim HHA Total Visit Count
CLM_ADMSN_DT	Claim HHA Care Start Date
DOB_DT	Date of Birth from Claim (Date)
GNDR_CD	Gender Code from Claim
BENE_RACE_CD	Race Code from Claim
BENE_CNTY_CD	County Code from Claim (SSA)
BENE_STATE_CD	State Code from Claim (SSA)



## Home Health Agency (HHA) Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim

*\*PUBLICID should be used as the ID variable for NHIS and LSOA II.*

*SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.*

*PATNUM should be used as the ID variable for NHHCS.*

*RESNUM should be used as the ID variable for NNHS.*

***Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.***

## Home Health Agency (HHA) Condition Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.

*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.

*PATNUM* should be used as the ID variable for NHHCS.

*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Home Health Agency (HHA) Occurrence Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Home Health Agency (HHA) Revenue Center File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
CLM_LINE_NUM	Claim Line Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
REV_CNTR	Revenue Center Code
REV_CNTR_DT	Revenue Center Date
REV_CNTR_1ST_ANSI_CD	Revenue Center 1st ANSI Code
REV_CNTR_APC_HIPPS_CD	Revenue Center APC/HIPPS
HCPCS_CD	Revenue Center Healthcare Common Procedure Coding System
HCPCS_1ST_MDFR_CD	Revenue Center HCPCS Initial Modifier Code
HCPCS_2ND_MDFR_CD	Revenue Center HCPCS Second Modifier Code
REV_CNTR_PMT_MTHD_IND_CD	Revenue Center Payment Method Indicator Code
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
REV_CNTR_RATE_AMT	Revenue Center Rate Amount
REV_CNTR_PMT_AMT_AMT	Revenue Center Payment Amount Amount
REV_CNTR_TOT_CHRG_AMT	Revenue Center Total Charge Amount
REV_CNTR_NCVRD_CHRG_AMT	Revenue Center Non-Covered Charge Amount
REV_CNTR_DDCTBL_COINSRNC_CD	Revenue Center Deductible Coinsurance Code
REV_CNTR_STUS_IND_CD	Revenue Center Status Indicator Code
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
RNDRNG_PHYSN_UPIN	Revenue Center Rendering Physician UPIN
RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI

\*PUBLICID should be used as the ID variable for NHIS and LSOA II.  
 SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
 PATNUM should be used as the ID variable for NHHCS.  
 RESNUM should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Home Health Agency (HHA) Span Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_SPAN_CD_SEQ	Claim Related Span Code Sequence
CLM_SPAN_CD	Claim Occurrence Span Code
CLM_SPAN_FROM_DT	Claim Occurrence Span From Date
CLM_SPAN_THRU_DT	Claim Occurrence Span Through Date

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Home Health Agency (HHA) Value Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
CLM_VAL_AMT	Claim Value Amount

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Hospice Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date
FI_CLM_PROC_DT	FI Claim Process Date
PRVDR_NUM	Provider Number
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
FI_NUM	FI Number
CLM_MDCR_NON_PMT_RSN_CD	Claim Medicare Non Payment Reason Code
CLM_PMT_AMT	Claim Payment Amount
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amount
NCH_PRMRY_PYR_CD	NCH Primary Payer Code
PRVDR_STATE_CD	NCH Provider State Code
ORG_NPI_NUM	Organization NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_TOT_CHRG_AMT	Claim Total Charge Amount
NCH_PTNT_STATUS_IND_CD	NCH Patient Status Indicator Code
CLM_UTLZTN_DAY_CNT	Claim Utilization Day Count
NCH_BENE_DSCHRG_DT	NCH Beneficiary Discharge Date
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD13	Claim Diagnosis Code XIII

## Hospice Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code XIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_VRSN_CD14	Claim Diagnosis Code XIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_VRSN_CD15	Claim Diagnosis Code XV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_VRSN_CD16	Claim Diagnosis Code XVI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_VRSN_CD17	Claim Diagnosis Code XVII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_VRSN_CD18	Claim Diagnosis Code XVIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_VRSN_CD19	Claim Diagnosis Code XIX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_VRSN_CD20	Claim Diagnosis Code XX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_VRSN_CD21	Claim Diagnosis Code XXI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_VRSN_CD22	Claim Diagnosis Code XXII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_VRSN_CD23	Claim Diagnosis Code XXIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_VRSN_CD24	Claim Diagnosis Code XXIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD25	Claim Diagnosis Code XXV
ICD_DGNS_VRSN_CD25	Claim Diagnosis Code XXV Diagnosis Version Code (ICD-9 or ICD-10)
FST_DGNS_E_CD	First Claim Diagnosis E Code
FST_DGNS_E_VRSN_CD	First Claim Diagnosis E Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_VRSN_CD1	Claim Diagnosis E Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_VRSN_CD2	Claim Diagnosis E Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_VRSN_CD3	Claim Diagnosis E Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_VRSN_CD4	Claim Diagnosis E Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_VRSN_CD5	Claim Diagnosis E Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_VRSN_CD6	Claim Diagnosis E Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_VRSN_CD7	Claim Diagnosis E Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_VRSN_CD8	Claim Diagnosis E Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_VRSN_CD9	Claim Diagnosis E Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_VRSN_CD10	Claim Diagnosis E Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_VRSN_CD11	Claim Diagnosis E Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
ICD_DGNS_E_VRSN_CD12	Claim Diagnosis E Code XII Diagnosis Version Code (ICD-9 or ICD-10)
CLM_HOSPC_START_DT_ID	Claim Hospice Start Date
BENE_HOSPC_PRD_CNT	Beneficiary's Hospice Period Count
DOB_DT	Date of Birth from Claim (Date)
GNDR_CD	Gender Code from Claim
BENE_RACE_CD	Race Code from Claim
BENE_CNTY_CD	County Code from Claim (SSA)
BENE_STATE_CD	State Code from Claim (SSA)



## Hospice Base Claims File

<u>Variable Name</u>	<u>Variable Label</u>
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.  
*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
*PATNUM* should be used as the ID variable for NHHCS.  
*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Hospice Condition Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.

*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.

*PATNUM* should be used as the ID variable for NHHCS.

*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Hospice Occurrence Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date

*\* PUBLICID should be used as the ID variable for NHIS and LSOA II.  
SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
PATNUM should be used as the ID variable for NHHCS.  
RESNUM should be used as the ID variable for NNHS.*

***Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.***

## Hospice Revenue Center File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
CLM_LINE_NUM	Claim Line Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
REV_CNTR	Revenue Center Code
REV_CNTR_DT	Revenue Center Date
HCPCS_CD	Revenue Center Healthcare Common Procedure Coding System
HCPCS_1ST_MDFR_CD	Revenue Center HCPCS Initial Modifier Code
HCPCS_2ND_MDFR_CD	Revenue Center HCPCS Second Modifier Code
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
REV_CNTR_RATE_AMT	Revenue Center Rate Amount
REV_CNTR_PRVDR_PMT_AMT	Revenue Center Provider Payment Amount
REV_CNTR_BENE_PMT_AMT	Revenue Center Beneficiary Payment Amount
REV_CNTR_PMT_AMT_AMT	Revenue Center Payment Amount Amount
REV_CNTR_TOT_CHRG_AMT	Revenue Center Total Charge Amount
REV_CNTR_NCVRD_CHRG_AMT	Revenue Center Non-Covered Charge Amount
REV_CNTR_DDCTBL_COINSRNC_CD	Revenue Center Deductible Coinsurance Code
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
RNDRNG_PHYSN_UPIN	Revenue Center Rendering Physician UPIN
RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI

\*PUBLICID should be used as the ID variable for NHIS and LSOA II.

SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.

PATNUM should be used as the ID variable for NHHCS.

RESNUM should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Hospice Span Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_SPAN_CD_SEQ	Claim Related Span Code Sequence
CLM_SPAN_CD	Claim Occurrence Span Code
CLM_SPAN_FROM_DT	Claim Occurrence Span From Date
CLM_SPAN_THRU_DT	Claim Occurrence Span Through Date

\* *PUBLICID* should be used as the ID variable for NHIS and LSOA II.

*SEQN* should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.

*PATNUM* should be used as the ID variable for NHHCS.

*RESNUM* should be used as the ID variable for NNHS.

**Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.**

## Hospice Value Code File

<b><u>Variable Name</u></b>	<b><u>Variable Label</u></b>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
CLM_VAL_AMT	Claim Value Amount

*\* PUBLICID should be used as the ID variable for NHIS and LSOA II.  
SEQN should be used as the ID variable for NHEFS, NHANES III, and Continuous NHANES.  
PATNUM should be used as the ID variable for NHHCS.  
RESNUM should be used as the ID variable for NNHS.*

***Please refer to the instructions provided on the NCHS Research Data Center (RDC) website (<http://www.cdc.gov/rdc/index.htm>) when preparing the data dictionary for your research proposal.***

## Outpatient Base Claims Files

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code
NCH_CLM_TYPE_CD	NCH Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date
FI_CLM_PROC_DT	FI Claim Process Date
CLAIM_QUERY_CODE	Claim Query Code
PRVDR_NUM	Provider Number
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
FI_NUM	FI Number
CLM_MDCR_NON_PMT_RSN_CD	Claim Medicare Non Payment Reason Code
CLM_PMT_AMT	Claim Payment Amount
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amount
NCH_PRMRY_PYR_CD	NCH Primary Payer Code
PRVDR_STATE_CD	NCH Provider State Code
ORG_NPI_NUM	Organization NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
OP_PHYSN_UPIN	Claim Operating Physician UPIN Number
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OT_PHYSN_UPIN	Claim Other Physician UPIN Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
CLM_MCO_PD_SW	Claim MCO Paid Switch
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_TOT_CHRG_AMT	Claim Total Charge Amount
NCH_BENE_BLOOD_DDCTBL_LBLTY_AM	NCH Beneficiary Blood Deductible Liability Amount
NCH_PROFNL_CMPNT_CHRG_AMT	NCH Professional Component Charge
PRNCPAL_DGNS_CD	Primary Claim Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Primary Claim Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code XIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD14	Claim Diagnosis Code XIV

## Outpatient Base Claims Files

<u>Variable Name</u>	<u>Variable Label</u>
ICD_DGNS_VRSN_CD14	Claim Diagnosis Code XIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_VRSN_CD15	Claim Diagnosis Code XV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_VRSN_CD16	Claim Diagnosis Code XVI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_VRSN_CD17	Claim Diagnosis Code XVII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_VRSN_CD18	Claim Diagnosis Code XVIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_VRSN_CD19	Claim Diagnosis Code XIX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_VRSN_CD20	Claim Diagnosis Code XX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_VRSN_CD21	Claim Diagnosis Code XXI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_VRSN_CD22	Claim Diagnosis Code XXII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_VRSN_CD23	Claim Diagnosis Code XXIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_VRSN_CD24	Claim Diagnosis Code XXIV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_CD25	Claim Diagnosis Code XXV
ICD_DGNS_VRSN_CD25	Claim Diagnosis Code XXV Diagnosis Version Code (ICD-9 or ICD-10)
FST_DGNS_E_CD	First Claim Diagnosis E Code
FST_DGNS_E_VRSN_CD	First Claim Diagnosis E Code Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_VRSN_CD1	Claim Diagnosis E Code I Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_VRSN_CD2	Claim Diagnosis E Code II Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_VRSN_CD3	Claim Diagnosis E Code III Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_VRSN_CD4	Claim Diagnosis E Code IV Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_VRSN_CD5	Claim Diagnosis E Code V Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_VRSN_CD6	Claim Diagnosis E Code VI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_VRSN_CD7	Claim Diagnosis E Code VII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_VRSN_CD8	Claim Diagnosis E Code VIII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_VRSN_CD9	Claim Diagnosis E Code IX Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_VRSN_CD10	Claim Diagnosis E Code X Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_VRSN_CD11	Claim Diagnosis E Code XI Diagnosis Version Code (ICD-9 or ICD-10)
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
ICD_DGNS_E_VRSN_CD12	Claim Diagnosis E Code XII Diagnosis Version Code (ICD-9 or ICD-10)
ICD_PRCDR_CD1	Claim Procedure Code I
ICD_PRCDR_VRSN_CD1	Claim Procedure Code I Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT1	Claim Procedure Code I Date
ICD_PRCDR_CD2	Claim Procedure Code II
ICD_PRCDR_VRSN_CD2	Claim Procedure Code II Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT2	Claim Procedure Code II Date
ICD_PRCDR_CD3	Claim Procedure Code III
ICD_PRCDR_VRSN_CD3	Claim Procedure Code III Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT3	Claim Procedure Code III Date
ICD_PRCDR_CD4	Claim Procedure Code IV
ICD_PRCDR_VRSN_CD4	Claim Procedure Code IV Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT4	Claim Procedure Code IV Date
ICD_PRCDR_CD5	Claim Procedure Code V
ICD_PRCDR_VRSN_CD5	Claim Procedure Code V Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT5	Claim Procedure Code V Date
ICD_PRCDR_CD6	Claim Procedure Code VI



## Outpatient Base Claims Files

<u>Variable Name</u>	<u>Variable Label</u>
ICD_PRCDR_VRSN_CD6	Claim Procedure Code VI Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT6	Claim Procedure Code VI Date
ICD_PRCDR_CD7	Claim Procedure Code VII
ICD_PRCDR_VRSN_CD7	Claim Procedure Code VII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT7	Claim Procedure Code VII Date
ICD_PRCDR_CD8	Claim Procedure Code VIII
ICD_PRCDR_VRSN_CD8	Claim Procedure Code VIII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT8	Claim Procedure Code VIII Date
ICD_PRCDR_CD9	Claim Procedure Code IX
ICD_PRCDR_VRSN_CD9	Claim Procedure Code IX Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT9	Claim Procedure Code IX Date
ICD_PRCDR_CD10	Claim Procedure Code X
ICD_PRCDR_VRSN_CD10	Claim Procedure Code X Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT10	Claim Procedure Code X Date
ICD_PRCDR_CD11	Claim Procedure Code XI
ICD_PRCDR_VRSN_CD11	Claim Procedure Code XI Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT11	Claim Procedure Code XI Date
ICD_PRCDR_CD12	Claim Procedure Code XII
ICD_PRCDR_VRSN_CD12	Claim Procedure Code XII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT12	Claim Procedure Code XII Date
ICD_PRCDR_CD13	Claim Procedure Code XIII
ICD_PRCDR_VRSN_CD13	Claim Procedure Code XIII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT13	Claim Procedure Code XIII Date
ICD_PRCDR_CD14	Claim Procedure Code XIV
ICD_PRCDR_VRSN_CD14	Claim Procedure Code XIV Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT14	Claim Procedure Code XIV Date
ICD_PRCDR_CD15	Claim Procedure Code XV
ICD_PRCDR_VRSN_CD15	Claim Procedure Code XV Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT15	Claim Procedure Code XV Date
ICD_PRCDR_CD16	Claim Procedure Code XVI
ICD_PRCDR_VRSN_CD16	Claim Procedure Code XVI Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT16	Claim Procedure Code XVI Date
ICD_PRCDR_CD17	Claim Procedure Code XVII
ICD_PRCDR_VRSN_CD17	Claim Procedure Code XVII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT17	Claim Procedure Code XVII Date
ICD_PRCDR_CD18	Claim Procedure Code XVIII
ICD_PRCDR_VRSN_CD18	Claim Procedure Code XVIII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT18	Claim Procedure Code XVIII Date
ICD_PRCDR_CD19	Claim Procedure Code XIX
ICD_PRCDR_VRSN_CD19	Claim Procedure Code XIX Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT19	Claim Procedure Code XIX Date
ICD_PRCDR_CD20	Claim Procedure Code XX
ICD_PRCDR_VRSN_CD20	Claim Procedure Code XX Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT20	Claim Procedure Code XX Date
ICD_PRCDR_CD21	Claim Procedure Code XXI
ICD_PRCDR_VRSN_CD21	Claim Procedure Code XXI Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT21	Claim Procedure Code XXI Date
ICD_PRCDR_CD22	Claim Procedure Code XXII
ICD_PRCDR_VRSN_CD22	Claim Procedure Code XXII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT22	Claim Procedure Code XXII Date
ICD_PRCDR_CD23	Claim Procedure Code XXIII
ICD_PRCDR_VRSN_CD23	Claim Procedure Code XXIII Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT23	Claim Procedure Code XXIII Date
ICD_PRCDR_CD24	Claim Procedure Code XXIV
ICD_PRCDR_VRSN_CD24	Claim Procedure Code XXIV Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT24	Claim Procedure Code XXIV Date
ICD_PRCDR_CD25	Claim Procedure Code XXV
ICD_PRCDR_VRSN_CD25	Claim Procedure Code XXV Claim Procedure Version Code (ICD-9 or ICD-10)
PRCDR_DT25	Claim Procedure Code XXV Date
RSN_VISIT_CD1	Reason for Visit Diagnosis Code I
RSN_VISIT_VRSN_CD1	Reason for Visit Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)
RSN_VISIT_CD2	Reason for Visit Diagnosis Code II
RSN_VISIT_VRSN_CD2	Reason for Visit Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)
RSN_VISIT_CD3	Reason for Visit Diagnosis Code III
RSN_VISIT_VRSN_CD3	Reason for Visit Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)

## Outpatient Base Claims Files

<u>Variable Name</u>	<u>Variable Label</u>
NCH_BENE_PTBDCTBL_AMT	NCH Beneficiary Part B Deductible Amount
NCH_BENE_PTBCOINSRNC_AMT	NCH Beneficiary Part B Coinsurance Amount
CLM_OP_PRVDR_PMT_AMT	Claim Outpatient Provider Payment Amount
CLM_OP_BENE_PMT_AMT	Claim Outpatient Beneficiary Payment Amount
DOB_DT	Date of Birth from Claim (Date)
GNDR_CD	Gender Code from Claim
BENE_RACE_CD	Race Code from Claim
BENE_CNTY_CD	County Code from Claim (SSA)
BENE_STATE_CD	State Code from Claim (SSA)
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim

*\*PUBLICID should be used as the ID variable for NHIS and LSOA II.  
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PATNUM should be used as the ID variable for NHHCS.  
RESNUM should be used as the ID variable for NNHS.*

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## Outpatient Condition Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code

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*RESNUM* should be used as the ID variable for NNHS.

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## Outpatient Occurrence Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date

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*RESNUM* should be used as the ID variable for NNHS.

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## Outpatient Revenue Center File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
CLM_LINE_NUM	Claim Line Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
REV_CNTR	Revenue Center Code
REV_CNTR_DT	Revenue Center Date
REV_CNTR_1ST_ANSI_CD	Revenue Center 1st ANSI Code
REV_CNTR_2ND_ANSI_CD	Revenue Center 2nd ANSI Code
REV_CNTR_3RD_ANSI_CD	Revenue Center 3rd ANSI Code
REV_CNTR_4TH_ANSI_CD	Revenue Center 4th ANSI Code
REV_CNTR_APC_HIPPS_CD	Revenue Center APC/HIPPS
HCPCS_CD	Revenue Center Healthcare Common Procedure Coding System
HCPCS_1ST_MDFR_CD	Revenue Center HCPCS Initial Modifier Code
HCPCS_2ND_MDFR_CD	Revenue Center HCPCS Second Modifier Code
REV_CNTR_PMT_MTHD_IND_CD	Revenue Center Payment Method Indicator Code
REV_CNTR_DSCNT_IND_CD	Revenue Center Discount Indicator Code
REV_CNTR_PACKG_IND_CD	Revenue Center Packaging Indicator Code
REV_CNTR_OTAF_PMT_CD	Revenue Center Obligation to Accept As Full (OTAF) Payment Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
REV_CNTR_RATE_AMT	Revenue Center Rate Amount
REV_CNTR_BLOOD_DDCTBL_AMT	Revenue Center Blood Deductible Amount
REV_CNTR_CASH_DDCTBL_AMT	Revenue Center Cash Deductible Amount
REV_CNTR_COINSRNC_WGE_ADJSTD_C	Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount
REV_CNTR_RDCD_COINSRNC_AMT	Revenue Center Reduced Coinsurance Amount
REV_CNTR_1ST_MSP_PD_AMT	Revenue Center 1st Medicare Secondary Payer Paid Amount
REV_CNTR_2ND_MSP_PD_AMT	Revenue Center 2nd Medicare Secondary Payer Paid Amount
REV_CNTR_PRVDR_PMT_AMT	Revenue Center Provider Payment Amount
REV_CNTR_BENE_PMT_AMT	Revenue Center Beneficiary Payment Amount
REV_CNTR_PTNT_RSPNSBLTY_PMT	Revenue Center Patient Responsibility Payment
REV_CNTR_PMT_AMT_AMT	Revenue Center Payment Amount Amount
REV_CNTR_TOT_CHRG_AMT	Revenue Center Total Charge Amount
REV_CNTR_NCVRD_CHRG_AMT	Revenue Center Non-Covered Charge Amount
REV_CNTR_STUS_IND_CD	Revenue Center Status Indicator Code
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
RNDRNG_PHYSN_UPIN	Revenue Center Rendering Physician UPIN
RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI

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## Outpatient Span Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_SPAN_CD_SEQ	Claim Related Span Code Sequence
CLM_SPAN_CD	Claim Occurrence Span Code
CLM_SPAN_FROM_DT	Claim Occurrence Span From Date
CLM_SPAN_THRU_DT	Claim Occurrence Span Through Date

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*PATNUM* should be used as the ID variable for NHHCS.

*RESNUM* should be used as the ID variable for NNHS.

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## Outpatient Value Code File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
NCHS_CLM_ID	NCHS assigned Claim Identification Number
NCH_CLM_TYPE_CD	NCH Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
CLM_VAL_AMT	Claim Value Amount

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*RESNUM* should be used as the ID variable for NNHS.

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## Medicare Part D Drug Event (PDE) File

<u>Variable Name</u>	<u>Variable Label</u>
SURVEY	NCHS Survey linked to CMS Medicare Data
PUBLICID*	NCHS Survey Identifier - Participant Identification Number
SEQN*	NCHS Survey Identifier - Sample Sequence Number
PATNUM*	NCHS Survey Identifier - Patient/Discharge Record (Case) Number
RESNUM*	NCHS Survey Identifier - Resident Record (Case) Number
FILE_YEAR4	Beneficiary Enrollment Reference Year (YYYY)
DOB_DT	Patient Date of Birth (DOB)
GNDR_CD	Patient Gender
SRVC_DT	RX Service Date (DOS)
PD_DT	Paid Date
RX_SRVC_RFRNC_NUM	RX Service Reference Number
PROD_SRVC_ID	Product Service ID
PLAN_CNTRCT_REC_ID	Plan Contract Record ID
PLAN_PBP_REC_NUM	Plan PBP Record Number
CMPND_CD	Compound Code
DAW_PROD_SLCTN_CD	Dispense as Written (DAW) Product Selection Code
QTY_DSPNSD_NUM	Quantity Dispensed
DAYS_SUPLY_NUM	Days Supply
FILL_NUM	Fill Number
DSPNSNG_STUS_CD	Dispensing Status Code
DRUG_CVRG_STUS_CD	Drug Coverage Status Code
ADJSTMT_DLTN_CD	Adjustment Deletion Code
NSTD_FRMT_CD	Non-Standard Format Code
PRCNG_EXCPTN_CD	Pricing Exception Code
CTSTRPHC_CVRG_CD	Catastrophic Coverage Code
GDC_BLW_OOPT_AMT	Gross Drug Cost Below Out-of-Pocket Threshold (GDCB)
GDC_ABV_OOPT_AMT	Gross Drug Cost Above Out-of-Pocket Threshold (GDCA)
PTNT_PAY_AMT	Patient Pay Amount
OTHR_TROOP_AMT	Other TrOOP Amount
LICS_AMT	Low Income Cost Sharing Subsidy Amount (LICS)
PLRO_AMT	Patient Liability Reduction Due to Other Payer Amount (PLRO)
CVRD_D_PLAN_PD_AMT	Covered D Plan Paid Amount (CPP)
NCVRD_PLAN_PD_AMT	Non-Covered Plan Paid Amount (NPP)
TOT_RX_CST_AMT	Gross Drug Cost
BN	Brand Name
GCDF	Dosage Form Code
GCDF_DESC	Dosage Form Code Description
STR	Drug Strength Description
GNN	Generic Name - Short Version
BENEFIT_PHASE	The benefit phase of the Part D Event
TIER_ID	Medicare Part D formulary tier identifier
STEP	Maximum Step Number
QUANTITY_LIMIT_YN	Whether or Not the Drug has Quantity Limits
PRIOR_AUTHORIZATION_YN	Whether or Not the Drug Requires Prior Authorization
CCW_PHARMACY_ID	CCW Pharmacy ID from Pharmacy Characteristics File
CCW_PRSCRBR_ID	CCW Prescriber ID from Prescriber Characteristics File
PDE_PRSCRBR_ID_FRMT_CD	PDE Prescriber ID Format Code
RX_ORGN_CD	Prescription Origin Code
FORMULARY_ID	Formulary ID. First Column of Composite Foreign Key to Formulary File
FRMLRY_RX_ID	Formulary Rx ID. Second Column of Composite Foreign Key to Formulary File
RPTD_GAP_DSCNT_NUM	Gap Discount Amount reported by the Submitting Plan
BRND_GNRC_CD	The Brand-Generic Code reported by the submitting plan
PHRMCY_SRVC_TYPE_CD	Pharmacy Service Type Code
PTNT_RSDNC_CD	Patient Residence Code
SUBMSN_CLR_CD	Submission Clarification Code



## Medicare Part D Drug Event (PDE) File

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