Carrier (Physician/Supplier Part B) Fee-For-Service Line Items Date Created: 26JAN2022 **Number of Variables: 84**

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
PATIENT_ID	NHCS Patient ID	Char	ID	Patient Identifier assigned by NCHS. Researchers requesting linked NHCS-CMS data should use PATIENT_ID.
PUBLICID	NHIS Public Use ID	Char	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHIS/LSOA II-Medicare data should use PUBLICID.
SEQN	NHANES Respondent Sequence Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHEFS/NHANES III/NHANES-Medicare data should use SEQN.
RESNUM	NNHS Resident Record (Case) Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked 2004 NNHS-Medicare data should use RESNUM.
SURVEY	Survey Name and survey year/cycle	Char		
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Num	2016-2018	2016 NHCS has been linked to only 2016-2017 Medicare Data.
NCHS_CLM_ID	NCHS CLAIM ID	Num		
LINE_NUM	Claim Line Number	Num	1-13	
NCH_CLM_TYPE_CD	NCH Claim Type Code	Char		
CLM_THRU_DT	Claim Through Date	Num		Date provided in SAS date (numeric) format.
CARR_PRFRNG_PIN_NUM	Carrier Line Performing Provider ID Number (PIN)	Char		
PRF_PHYSN_UPIN	Carrier Line Performing UPIN Number	Char		

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NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data Carrier (Physician/Supplier Part B) Fee-For-Service Line Items Date Created: 26JAN2022

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
PRF_PHYSN_NPI	Carrier Line Performing NPI Number	Char		
ORG_NPI_NUM	Carrier Line Performing Group NPI Number	Char		
CARR_LINE_PRVDR_TYPE_CD	Carrier Line Provider Type Code	Char		
TAX_NUM	Line Provider Tax Number	Char		For value description please see website: https://www.resdac.org/cms-data/variables/line-provider-tax-number (accessed on 06/22/2020)
PRVDR_STATE_CD	Line Provider State Code (SSA)	Char		For value description please see website: https://www.resdac.org/cms-data/variables/ nch-provider-ssa-state-code (accessed on 06/22/2020)
PRVDR_ZIP	Carrier Line Performing Provider ZIP Code	Char		
PRVDR_SPCLTY	Line CMS Provider Specialty Code	Char		For value description please see website: https://www.resdac.org/cms-data/variables/ line-cms-provider-specialty-code (accessed on 06/22/2020)
PRTCPTNG_IND_CD	Line Provider Participating Indicator Code	Char		
CARR_LINE_RDCD_PMT_PHYS_ASTN_C	Carrier Line Reduced Payment Physician Assistant Code	Char		
LINE_SRVC_CNT	Line Service Count	Num	0.1-9999	
LINE_CMS_TYPE_SRVC_CD	Line CMS Type Service Code	Char		
LINE_PLACE_OF_SRVC_CD	Line Place of Service Code	Char		

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Carrier (Physician/Supplier Part B) Fee-For-Service Line Items Date Created: 26JAN2022

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
CARR_LINE_PRCNG_LCLTY_CD	Carrier Line Pricing Locality Code	Char		For value description please see website: https://www.resdac.org/cms-data/variables/ carrier-line-pricing-locality-code (accessed on 06/22/2020)
LINE_1ST_EXPNS_DT	Line First Expense Date	Num		Date provided in SAS date (numeric) format.
LINE_LAST_EXPNS_DT	Line Last Expense Date	Num		Date provided in SAS date (numeric) format.
HCPCS_CD	Healthcare Common Procedure Coding System (HCPCS) Code	Char		
HCPCS_1ST_MDFR_CD	HCPCS Initial Modifier Code	Char		
HCPCS_2ND_MDFR_CD	HCPCS Second Modifier Code	Char		
BETOS_CD	Line Berenson-Eggers Type of Service (BETOS) Code	Char		For value description please see website: https://www.resdac.org/cms-data/variables/ line-berenson-eggers-type-service-betos-code (accessed on 06/22/2020)
LINE_NCH_PMT_AMT	Line NCH Medicare Payment Amount	Num	0-78,400	Payment/Charged Amount, in dollars.
LINE_BENE_PMT_AMT	Line Payment Amount to Beneficiary	Num	0-6,700	Payment/Charged Amount, in dollars.
LINE_PRVDR_PMT_AMT	Line Provider Payment Amount	Num	0-78,400	Payment/Charged Amount, in dollars.
LINE_BENE_PTB_DDCTBL_AMT	Line Beneficiary Part B Deductible Amount	Num	0-200	Payment/Charged Amount, in dollars.
LINE_BENE_PRMRY_PYR_CD	Line Primary Payer Code (if not Medicare)	Char		
LINE_BENE_PRMRY_PYR_PD_AMT	Line Primary Payer (if not Medicare) Paid Amount	Num	0-57,600	Payment/Charged Amount, in dollars.

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
LINE_COINSRNC_AMT	Line Beneficiary Coinsurance Amount	Num	0-20,000	Payment/Charged Amount, in dollars.
LINE_SBMTD_CHRG_AMT	Line Submitted Charge Amount	Num	0-100,000	Payment/Charged Amount, in dollars.
LINE_ALOWD_CHRG_AMT	Line Allowed Charge Amount	Num	0-100,000	Payment/Charged Amount, in dollars.
LINE_PRCSG_IND_CD	Line Processing Indicator Code	Char		
LINE_PMT_80_100_CD	Line Payment 80% / 100% Code	Char		
LINE_SERVICE_DEDUCTIBLE	Line Service Deductible Indicator Switch	Char		
CARR_LINE_MTUS_CNT	Carrier Line Miles/Time/Units/Services (MTUS) Count	Num	0.1-9999	
CARR_LINE_MTUS_CD	Carrier Line Miles/Time/Units/Services (MTUS) Indicator Code	Char		
LINE_ICD_DGNS_CD	Line Diagnosis Code	Char		
LINE_ICD_DGNS_VRSN_CD	Line Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)	Char		
HPSA_SCRCTY_IND_CD	Carrier Line Health Professional Shortage Area (HPSA) / Scarcity Indicator Code	Char		
CARR_LINE_RX_NUM	Carrier Line RX Number	Char		
LINE_HCT_HGB_RSLT_NUM	Hematocrit / Hemoglobin Test Results	Num	0-99	

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
LINE_HCT_HGB_TYPE_CD	Hematocrit / Hemoglobin Test Type Code	Char		
LINE_NDC_CD	Line National Drug Code (NDC)	Char		
CARR_LINE_CLIA_LAB_NUM	Clinical Laboratory Improvement Amendments (CLIA) monitored laboratory number	Char		
CARR_LINE_ANSTHSA_UNIT_CNT	Carrier Line Anesthesia Unit Count	Num	0-100	Number of units (count)
CARR_LINE_CL_CHRG_AMT	Carrier Line Clinical Lab Charge Amount	Num	0-88,400	Payment/Charged Amount, in dollars.
PHYSN_ZIP_CD	Line Place of Service (POS) Physician Zip Code	Char		
LINE_OTHR_APLD_IND_CD1	Line Other Applied Indicator 1st Code	Char		
LINE_OTHR_APLD_IND_CD2	Line Other Applied Indicator 2nd Code	Char		
LINE_OTHR_APLD_IND_CD3	Line Other Applied Indicator 3rd Code	Char		
LINE_OTHR_APLD_IND_CD4	Line Other Applied Indicator 4th Code	Char		
LINE_OTHR_APLD_IND_CD5	Line Other Applied Indicator 5th Code	Char		
LINE_OTHR_APLD_IND_CD6	Line Other Applied Indicator 6th Code	Char		
LINE_OTHR_APLD_IND_CD7	Line Other Applied Indicator 7th Code	Char		
LINE_OTHR_APLD_AMT1	Line Other Applied Amount for 1st Code	Num	0-68,100	Payment/Charged Amount, in dollars.

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
LINE_OTHR_APLD_AMT2	Line Other Applied Amount for 2nd Code	Num	0-20,000	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT3	Line Other Applied Amount for 3rd Code	Num	0-4,300	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT4	Line Other Applied Amount for 4th Code	Num	0-2,900	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT5	Line Other Applied Amount for 5th Code	Num	0-100	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT6	Line Other Applied Amount for 6th Code	Num	0-100	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT7	Line Other Applied Amount for 7th Code	Num		Payment/Charged Amount, in dollars.
THRPY_CAP_IND_CD1	Line Therapy cap Indicator 1 Code	Char		
THRPY_CAP_IND_CD2	Line Therapy cap Indicator 2 Code	Char		
THRPY_CAP_IND_CD3	Line Therapy cap Indicator 3 Code	Char		
THRPY_CAP_IND_CD4	Line Therapy cap Indicator 4 Code	Char		
THRPY_CAP_IND_CD5	Line Therapy cap Indicator 5 Code	Char		
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code - Population based payments (PBP)	Char		
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code - Telehealth	Char		
	Organization (ACO) indicator Code - reienealth			

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code - Post Discharge HH visits	Char		
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code - 3 day SNF waiver	Char		
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code - Capitation	Char		
CARR_LINE_MDPP_NPI_NUM	Carrier Line Medicare Diabetes Prevention Program (MDPP) NPI Number	Char		
LINE_RSDL_PYMT_IND_CD	Line Residual Payment Indicator Code	Char		
LINE_RP_IND_CD	Line Representative Payee (RP) Indicator Code	Char		
LINE_PRVDR_VLDTN_TYPE_CD	Line Provider Validation Type Code	Char		