

Outpatient Encounter Base Claims

Date Created: 18AUG2020

Number of Variables: 115

Variable Name	Variable (VAR) Label	VAR Type	Range of Values <sup>1</sup>	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	Beneficiary Enrollment Reference Year (YYYY)	Num	2014-2018	2016 NHCS has been linked to only 2016-2017 Medicare Data.
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY	Num		
CLM_TYPE_CD	Claim Type Code	Char	4012	Hospital Inpatient (covered by Medicare Part B – not Part A)
			4013	Hospital Outpatient
			4014	Hospital Laboratory Services Provided to Non-patients
			4022	SNF Skilled Nursing Inpatient (covered by Medicare Part B – not Part A)
			4023	SNF Skilled Nursing Outpatient
			4034	Home Health + Laboratory Services Provided to Non-patients
			4071	Clinic (RHC) Rural Health
			4072	Clinic (ESRD) Renal Dialysis Hospital Based or Independent
			4073	Clinic Freestanding

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NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data

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			4074	Clinic (ORF) Outpatient Rehab Facility
			4075	Clinic (CORF) Comprehensive Outpatient Rehab Facility
			4076	Clinic (CMHC) Community Mental Health Centers
			4077	Clinic (FQHC) Federal Qualified Health Center
			4079	Clinic - Other
			4083	Special Facility (ASC) Ambulatory Surgery Center
			4085	Special Facility (CAH) Critical Access Hospital
			4089	Special Facility - Other
CLM_FROM_DT	Claim From Date	Num		Date provided in SAS date (numeric) format.
CLM_THRU_DT	Claim Through Date	Num		Date provided in SAS date (numeric) format.
SRVC_MONTH	Service Month	Num		Date provided in SAS date (numeric) format.
CLM_CHRT_RVW_SW	Claim Chart Review Switch	Char		Record is not a chart review
			N	Record is not a chart review
			Y	Record is a chart review
NCHS_CLM_CNTL_NUM	NCHS CLAIM CONTROL NUMBER	Num		
NCHS_CLM_ORIG_CNTL_NUM	NCHS CLAIM ORIGINAL CONTROL NUMBER	Num		
CLM_FINL_ACTN_IND	Claim Final Action Indicator	Char		Subsequent adjustments to the claim exist or the final action was to void the claim

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			N	Subsequent adjustments to the claim exist or the final action was to void the claim
			Y	Final action and the claim is not voided
CLM_LTST_CLM_IND	Latest Claim Indicator	Char	N	Subsequent adjustments or resubmissions to the claim exist
			Y	Latest action and the record could be a chart review
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date	Num		Date provided in SAS date (numeric) format.
CLM_RCPT_DT	Claim Receipt Date	Num		Date provided in SAS date (numeric) format.
CLM_FAC_TYPE_CD	Claim Facility Type Code	Char	1	Hospital
			2	Skilled nursing facility (SNF)
			3	Home health agency (HHA)
			7	Clinic or hospital-based renal dialysis facility
			8	Special facility or ASC surgery
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code	Char	**OTHER**	Miscoded
			1	FAC_TYPE 1-6,9: Inpatient/FAC_TYPE 7: Rural Health Clinic (RHC)/ FAC_TYPE 8: Hospice (non-hospital based)
			2	FAC_TYPE 1-6,9: Inpatient or Home Health (covered on Part B)/FAC_TYPE 7: Hospital based or independent renal dialysis facility/ FAC_TYPE 8: Hospice (hospital based)
			3	FAC_TYPE 1-6,9: Outpatient (or HHA - covered on Part A)/FAC_TYPE 7: Free-standing provider based federally qualified health center (FQHC)/ FAC_TYPE 8: Ambulatory surgical center (ASC) in hospital outp
			4	FAC_TYPE 1-6,9: Other (Part B) -- (Includes HHA medical and other health services, e.g., SNF osteoporosis-injectable drugs)/FAC_TYPE 7: Other Rehabilitation Facility (ORF)/ FAC_TYPE 8: Freestanding bi

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			5	FAC_TYPE 1-6,9: Intermediate care - level I/FAC_TYPE 7: Comprehensive Rehabilitation Center (CORF)/ FAC_TYPE 8: Critical Access Hospital - Outpatient Services
			6	FAC_TYPE 1-6,9: Intermediate care - level II/FAC_TYPE 7: Community Mental Health Center (CMHC)
			7	FAC_TYPE 1-6,9: Subacute Inpatient (revenue code 019X required) (formerly Intermediate care - level III)/FAC_TYPE 7: Federally Qualified Health Center (FQHC)
CLM_FREQ_CD	Claim Frequency Code	Char	**OTHER**	Miscoded
			0	Non-payment/zero claims
			1	Admit thru discharge claim
			2	Interim - first claim
			3	Interim - continuing claim
			4	Interim - last claim
			5	Late charge(s) only claim
			7	Replacement of prior claim
			9	Final claim Final claim (for HH PPS = process as a debit/credit to RAP claim)
			A	Admission election notice (when hospice or Religious Nonmedical Health Care Institution is submitting the HCFA-1450 as an admission notice; this is to establish a hospice benefit period)
CNTRCT_NUM	Medicare Part C Contract Number	Char		
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number	Char		
CLM_MDCL_REC	Claim Medical Record Number	Char		Missing Value
			8	MAO is deleting the diagnoses on the record

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ORG_NPI	Organization NPI Number	Char		
ORG_TXNMY_CD	Organization Taxonomy Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/organization-taxonomy-code">https://www.resdac.org/cms-data/variables/organization-taxonomy-code</a> (accessed on 06/22/2020)
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI Number	Char		
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number	Char		
AT_PHYSN_NPI	Claim Attending Physician NPI Number	Char		
AT_PHYSN_TXNMY_CD	Claim Attending Physician Taxonomy Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/claim-attending-physician-taxonomy-code">https://www.resdac.org/cms-data/variables/claim-attending-physician-taxonomy-code</a> (accessed on 06/22/2020)
OP_PHYSN_NPI	Claim Operating Physician NPI Number	Char		
OT_PHYSN_NPI	Claim Other Physician NPI Number	Char		
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code	Char	01	Discharged to home/self care (routine charge).
			02	Discharged/transferred to other short term general hospital for inpatient care.
			03	Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care -- (For hospitals with an approved swing bed arrangement, use Code 61 - swi
			04	Discharged/transferred to intermediate care facility (ICF).
			05	Discharged/transferred to another type of institution for inpatient care (including distinct parts). NOTE: Effective 1/2005, psychiatric hospital or psychiatric distinct part unit of a hospital will n

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			06	Discharged/transferred to home care of organized home health service organization.
			07	Left against medical advice or discontinued care.
			08	Discharged/transferred to home under care of a home IV drug therapy provider. (discontinued effective 10/1/05)
			09	Admitted as an inpatient to this hospital (effective 3/1/91). In situations where a patient is admitted before midnight of the third day following the day of an outpatient service, the outpatient serv
			20	Expired (did not recover - Christian Science patient).
			21	Discharged/transferred to Court/Law Enforcement
			30	Still patient
			41	Expired in a medical facility such as hospital, SNF, ICF, or freestanding hospice. (Hospice claims only)
			42	Expired - place unknown (Hospice claims only)
			43	Discharged/transferred to a federal hospital (eff. 10/1/03)
			50	Hospice - home (eff. 10/96)
			51	Hospice - medical facility (eff. 10/96)
			61	Discharged/transferred within this institution to a hospital-based Medicare approved swing bed (eff. 9/01)
			62	Discharged/transferred to an inpatient rehabilitation facility including distinct parts units of a hospital. (eff. 1/2002)
			63	Discharged/transferred to a long term care hospitals. (eff. 1/2002)
			64	Discharged/transferred to a nursing facility certified under Medicaid but not under Medicare (eff. 10/2002)
			65	Discharged/Transferred to a psychiatric hospital or psychiatric distinct unit of a hospital (these types of hospitals were pulled from patient/discharge status code '05' and given their own code). (ef
			66	Discharged/transferred to a Critical Access Hospital (CAH) (eff. 1/1/06)
			69	Discharged/transferred to a designated disaster alternative care site (eff. 10/2013)
			70	Discharged/transferred to another type of health care institution not defined elsewhere in code list.
			71	Discharged/transferred/referred to another institution for outpatient services as specified by the discharge plan of care (eff. 9/01) (discontinued effective 10/1/05)

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			81	Discharged to home or self-care with a planned acute care hospital readmission (eff. 10/2013)
			82	Discharged/transferred to a short term general hospital for inpatient care with a planned acute care hospital inpatient readmission (eff. 10/2013)
			83	Discharged/transferred to a skilled nursing facility (SNF) with Medicare certification with a planned acute care hospital inpatient readmission (eff. 10/2013)
			84	Discharged/transferred to a facility that provides custodial or supportive care with a planned acute care hospital inpatient readmission (eff. 10/2013)
			85	Discharged/transferred to a designated cancer center or childrens hospital with a planned acute care hospital inpatient readmission (eff. 10/2013)
			86	Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission (eff. 10/2013)
			87	Discharged/transferred to court/law enforcement with a planned acute care hospital inpatient readmission (eff. 10/2013)
			88	Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission (eff. 10/2013)
			89	Discharged/transferred to a hospital-based Medicare approved swing bed with a planned acute care hospital inpatient readmission (eff. 10/2013)
			90	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital with a planned acute care hospital inpatient readmission (eff. 10/2013)
			91	Discharged/transferred to a Medicare certified long term care hospital (LTCH) with a planned acute care hospital inpatient readmission (eff. 10/2103)
			92	Discharged/transferred to nursing facility certified under Medicaid but not certified under Medicare with a planned acute care hospital inpatient readmission (eff. 10/2013)
			93	Discharged/transferred to a psychiatric hospital/distinct part unit of a hospital with a planned acute care hospital inpatient readmission (eff. 10/2013)
			94	Discharged/transferred to a critical access hospital (CAH) with a planned acute care hospital inpatient readmission (eff. 10/2013)
			95	Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient readmission (eff. 10/2013)

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PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code	Char		
ICD_DGNS_CD1	Claim Diagnosis Code I	Char		
ICD_DGNS_CD2	Claim Diagnosis Code II	Char		
ICD_DGNS_CD3	Claim Diagnosis Code III	Char		
ICD_DGNS_CD4	Claim Diagnosis Code IV	Char		
ICD_DGNS_CD5	Claim Diagnosis Code V	Char		
ICD_DGNS_CD6	Claim Diagnosis Code VI	Char		
ICD_DGNS_CD7	Claim Diagnosis Code VII	Char		
ICD_DGNS_CD8	Claim Diagnosis Code VIII	Char		
ICD_DGNS_CD9	Claim Diagnosis Code IX	Char		
ICD_DGNS_CD10	Claim Diagnosis Code X	Char		
ICD_DGNS_CD11	Claim Diagnosis Code XI	Char		

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values <sup>1</sup>	Value Description
ICD_DGNS_CD12	Claim Diagnosis Code XII	Char		
ICD_DGNS_CD13	Claim Diagnosis Code XIII	Char		
ICD_DGNS_CD14	Claim Diagnosis Code XIV	Char		
ICD_DGNS_CD15	Claim Diagnosis Code XV	Char		
ICD_DGNS_CD16	Claim Diagnosis Code XVI	Char		
ICD_DGNS_CD17	Claim Diagnosis Code XVII	Char		
ICD_DGNS_CD18	Claim Diagnosis Code XVIII	Char		
ICD_DGNS_CD19	Claim Diagnosis Code XIX	Char		
ICD_DGNS_CD20	Claim Diagnosis Code XX	Char		
ICD_DGNS_CD21	Claim Diagnosis Code XXI	Char		
ICD_DGNS_CD22	Claim Diagnosis Code XXII	Char		

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values <sup>1</sup>	Value Description
ICD_DGNS_CD23	Claim Diagnosis Code XXIII	Char		
ICD_DGNS_CD24	Claim Diagnosis Code XXIV	Char		
ICD_DGNS_CD25	Claim Diagnosis Code XXV	Char		
CLM_1ST_DGNS_E_CD	First Claim Diagnosis E Code	Char		
ICD_DGNS_E_CD1	Claim Diagnosis E Code I	Char		
ICD_DGNS_E_CD2	Claim Diagnosis E Code II	Char		
ICD_DGNS_E_CD3	Claim Diagnosis E Code III	Char		
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV	Char		
ICD_DGNS_E_CD5	Claim Diagnosis E Code V	Char		
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI	Char		
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII	Char		

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values <sup>1</sup>	Value Description
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII	Char		
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX	Char		
ICD_DGNS_E_CD10	Claim Diagnosis E Code X	Char		
RSN_VISIT_CD1	Reason for Visit Diagnosis Code I	Char		
RSN_VISIT_CD2	Reason for Visit Diagnosis Code II	Char		
RSN_VISIT_CD3	Reason for Visit Diagnosis Code III	Char		
ICD_PRCDR_CD1	Claim Procedure Code I	Char		
ICD_PRCDR_CD2	Claim Procedure Code II	Char		
ICD_PRCDR_CD3	Claim Procedure Code III	Char		
ICD_PRCDR_CD4	Claim Procedure Code IV	Char		
ICD_PRCDR_CD5	Claim Procedure Code V	Char		

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ICD_PRCDR_CD6	Claim Procedure Code VI	Char		
ICD_PRCDR_CD7	Claim Procedure Code VII	Char		
ICD_PRCDR_CD8	Claim Procedure Code VIII	Char		
ICD_PRCDR_CD9	Claim Procedure Code IX	Char		
ICD_PRCDR_CD10	Claim Procedure Code X	Char		
ICD_PRCDR_CD11	Claim Procedure Code XI	Char		
ICD_PRCDR_CD12	Claim Procedure Code XII	Char		
ICD_PRCDR_CD13	Claim Procedure Code XIII	Char		
PRCDR_DT1	Claim Procedure Code I Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT2	Claim Procedure Code II Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT3	Claim Procedure Code III Date	Num		Date provided in SAS date (numeric) format.

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PRCDR_DT4	Claim Procedure Code IV Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT5	Claim Procedure Code V Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT6	Claim Procedure Code VI Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT7	Claim Procedure CodeVII Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT8	Claim Procedure Code VIII Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT9	Claim Procedure Code IX Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT10	Claim Procedure Code X Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT11	Claim Procedure Code XI Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT12	Claim Procedure Code XII Date	Num		Date provided in SAS date (numeric) format.
PRCDR_DT13	Claim Procedure Code XIII Date	Num		Date provided in SAS date (numeric) format.
CLM_OBSLT_DT	Claim Obsolete Date	Num		Date provided in SAS date (numeric) format.

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CLM_BPRVDR_CITY_NAME	Billing Provider Address - City	Char		
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/billing-provider-address-usps-state-code">https://www.resdac.org/cms-data/variables/billing-provider-address-usps-state-code</a> (accessed on 06/22/2020)
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code	Char		
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City	Char		
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/medicare-subscriber-address-usps-state-code">https://www.resdac.org/cms-data/variables/medicare-subscriber-address-usps-state-code</a> (accessed on 06/22/2020)
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code	Char		
BENE_CNTY_CD	Beneficiary County Code from Claim (SSA)	Char		
BENE_STATE_CD	Beneficiary Residence (SSA) State Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/beneficiary-residence-ssa-state-code-encounter">https://www.resdac.org/cms-data/variables/beneficiary-residence-ssa-state-code-encounter</a> (accessed on 06/22/2020)
BENE_MLG_CNTCT_ZIP_CD	Beneficiary ZIP Code of Residence	Char		
GNDR_CD	Gender Code from Claim	Char	1	Male
			2	Female

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BENE_RACE_CD	Race Code from Claim	Char		Missing Value
			0	Unknown
			1	White
			2	Black
			3	Other
			4	Asian/Pacific Islander
			5	Hispanic
			6	North American Native
DOB_DT	Date of Birth from Claim	Num		Date provided in SAS date (numeric) format.
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code	Char		Missing Value
			10	Aged without ESRD
			11	Aged with ESRD
			20	Disabled without ESRD
			21	Disabled with ESRD
			31	ESRD only
TAX_NUM	Provider Tax Number	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/provider-tax-number">https://www.resdac.org/cms-data/variables/provider-tax-number</a> (accessed on 06/22/2020)
BENE_STATE	Beneficiary State Postal Code	Char		For value description please see website: <a href="https://www.resdac.org/cms-data/variables/state-beneficiary-postal-abbreviation">https://www.resdac.org/cms-data/variables/state-beneficiary-postal-abbreviation</a> (accessed on 06/22/2020)

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