Table of Contents

Weights and Match Status

Variable Name	Variable Label
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
MEDICARE_MATCH_1921	Medicare Match Status
PROBVALID	Estimated Probability of Match Validity
FA_WGT_ADJ	Linkage-Eligibility Adjusted Weight - Final Annual
SA_FA_WGT_ADJ	Linkage-Eligibility Adjusted Sample Adult Weight - Final Annual
SA_L_WGT_ADJ	Linkage-Eligibility Adjusted Sample Adult Weight - Longitudinal
SA_P_WGT_ADJ	Linkage-Eligibility Adjusted Sample Adult Weight - Partial
ADJ_INTWT	Linkage-Eligibility Adjusted Interview Weight
ADJ_MECWT	Linkage-Eligibility Adjusted MEC Exam Weight
ADJ_4Y_MECWT	Linkage-Eligibility Adjusted 4 Year MEC Exam Weight
ADJ_4Y_INTWT	Linkage-Eligibility Adjusted 4 Year Interview Weight

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
CRNT_BIC_CD	Current Beneficiary Identification Code
STATE_CODE	SSA State Code
COUNTY_CD	SSA County Code
ZIP_CD	5-digit ZIP Code
STATE_CNTY_FIPS_CD_01	FIPS State-County Code: January
STATE_CNTY_FIPS_CD_02	FIPS State-County Code: February
STATE_CNTY_FIPS_CD_03	FIPS State-County Code: March
STATE_CNTY_FIPS_CD_04	FIPS State-County Code: April
STATE_CNTY_FIPS_CD_05	FIPS State-County Code: May
STATE_CNTY_FIPS_CD_06	FIPS State-County Code: June
STATE_CNTY_FIPS_CD_07	FIPS State-County Code: July
STATE_CNTY_FIPS_CD_08	FIPS State-County Code: August
STATE_CNTY_FIPS_CD_09	FIPS State-County Code: September
STATE_CNTY_FIPS_CD_10	FIPS State-County Code: October
STATE_CNTY_FIPS_CD_11	FIPS State-County Code: November
STATE_CNTY_FIPS_CD_12	FIPS State-County Code: December
AGE_AT_END_REF_YR	Age at the End of the Reference Year
BENE_BIRTH_DT	Beneficiary Date of Birth
VALID_DEATH_DT_SW	Valid Date of Death Switch
BENE_DEATH_DT	Beneficiary Date of Death
SEX_IDENT_CD	Sex
BENE_RACE_CD	Beneficiary Race Code
RTI_RACE_CD	Research Triangle Institute (RTI) Race Code
COVSTART	Medicare Coverage Start Date
ENTLMT_RSN_ORIG	Original Reason for Entitlement Code
ENTLMT_RSN_CURR	Current Reason for Entitlement Code
ESRD_IND	End-Stage Renal Disease (ESRD) Indicator
MDCR_STATUS_CODE_01	Medicare Status Code: January
MDCR_STATUS_CODE_02	Medicare Status Code: February
MDCR_STATUS_CODE_03	Medicare Status Code: March
MDCR_STATUS_CODE_04	Medicare Status Code: April
MDCR_STATUS_CODE_05	Medicare Status Code: May
MDCR_STATUS_CODE_06	Medicare Status Code: June
MDCR_STATUS_CODE_07	Medicare Status Code: July
MDCR_STATUS_CODE_08	Medicare Status Code: August
MDCR_STATUS_CODE_09	Medicare Status Code: September
MDCR_STATUS_CODE_10	Medicare Status Code: October
MDCR_STATUS_CODE_11	Medicare Status Code: November
MDCR_STATUS_CODE_12	Medicare Status Code: December
BENE_PTA_TRMNTN_CD	Part A Termination Code
BENE_PTB_TRMNTN_CD	Part B Termination Code
BENE_HI_CVRAGE_TOT_MONS	Hospital Insurance (HI) Coverage Months Count
BENE_SMI_CVRAGE_TOT_MONS	Supplemental Medical Insurance (SMI) Coverage Months Count
BENE_STATE_BUYIN_TOT_MONS	State Buy-In (SBI) Coverage Months
BENE_HMO_CVRAGE_TOT_MONS	Health Maintenance Organization (HMO) Coverage Months
PTD_PLAN_CVRG_MONS	Part D Contract Plan Coverage Months
RDS_CVRG_MONS	Retiree Drug Subsidy (RDS) Coverage Months
DUAL_ELGBL_MONS	Medicaid Dual Eligible Months

Variable Name	Variable Label
MDCR_ENTLMT_BUYIN_IND_01	Medicare Entitlement/ Buy-In Indicator: January
MDCR_ENTLMT_BUYIN_IND_02	Medicare Entitlement/ Buy-In Indicator: February
MDCR_ENTLMT_BUYIN_IND_03	Medicare Entitlement/ Buy-In Indicator: March
MDCR_ENTLMT_BUYIN_IND_04	Medicare Entitlement/ Buy-In Indicator: April
MDCR_ENTLMT_BUYIN_IND_05	Medicare Entitlement/ Buy-In Indicator: May
MDCR_ENTLMT_BUYIN_IND_06	Medicare Entitlement/ Buy-In Indicator: June
MDCR_ENTLMT_BUYIN_IND_07	Medicare Entitlement/ Buy-In Indicator: July
MDCR_ENTLMT_BUYIN_IND_08	Medicare Entitlement/ Buy-In Indicator: August
MDCR_ENTLMT_BUYIN_IND_09	Medicare Entitlement/ Buy-In Indicator: September
MDCR_ENTLMT_BUYIN_IND_10	Medicare Entitlement/ Buy-In Indicator: October
MDCR_ENTLMT_BUYIN_IND_11	Medicare Entitlement/ Buy-In Indicator: November
MDCR_ENTLMT_BUYIN_IND_12	Medicare Entitlement/ Buy-In Indicator: December
HMO_IND_01	HMO Indicator: January
HMO_IND_02	HMO Indicator: February
HMO_IND_03	HMO Indicator: March
HMO_IND_04	HMO Indicator: April
HMO_IND_05	HMO Indicator: May
HMO_IND_06	HMO Indicator: June
HMO_IND_07	HMO Indicator: July
HMO_IND_08	HMO Indicator: August
HMO_IND_09	HMO Indicator: September
HMO_IND_10	HMO Indicator: October
HMO_IND_11	HMO Indicator: November
HMO_IND_12	HMO Indicator: December
PTC_CNTRCT_ID_01	Part C Contract ID: January
PTC_CNTRCT_ID_02	Part C Contract ID: February
PTC_CNTRCT_ID_03	Part C Contract ID: March
PTC_CNTRCT_ID_04	Part C Contract ID: April
PTC_CNTRCT_ID_05	Part C Contract ID: May
PTC_CNTRCT_ID_06	Part C Contract ID: June
PTC_CNTRCT_ID_07	Part C Contract ID: July
PTC_CNTRCT_ID_08	Part C Contract ID: August
PTC_CNTRCT_ID_09	Part C Contract ID: September
PTC_CNTRCT_ID_10	Part C Contract ID: October
PTC_CNTRCT_ID_11	Part C Contract ID: November
PTC_CNTRCT_ID_12	Part C Contract ID: December
PTC_PBP_ID_01	Part C Plan Benefit Package ID: January
PTC_PBP_ID_02	Part C Plan Benefit Package ID: February
PTC_PBP_ID_03	Part C Plan Benefit Package ID: March
PTC_PBP_ID_04	Part C Plan Benefit Package ID: April
PTC_PBP_ID_05	Part C Plan Benefit Package ID: May
PTC_PBP_ID_06	Part C Plan Benefit Package ID: June
PTC_PBP_ID_07	Part C Plan Benefit Package ID: July
PTC_PBP_ID_08	Part C Plan Benefit Package ID: August
PTC_PBP_ID_09	Part C Plan Benefit Package ID: September
PTC_PBP_ID_10	Part C Plan Benefit Package ID: October
PTC_PBP_ID_11	Part C Plan Benefit Package ID: November
PTC_PBP_ID_12	Part C Plan Benefit Package ID: December
PTC_PLAN_TYPE_CD_01	Part C Plan Type Code: January
PTC_PLAN_TYPE_CD_02	Part C Plan Type Code: February
PTC_PLAN_TYPE_CD_03	Part C Plan Type Code: March
PTC_PLAN_TYPE_CD_04	Part C Plan Type Code: April

Variable Name	Variable Label
PTC_PLAN_TYPE_CD_05	Part C Plan Type Code: May
PTC_PLAN_TYPE_CD_06	Part C Plan Type Code: June
PTC_PLAN_TYPE_CD_07	Part C Plan Type Code: July
PTC_PLAN_TYPE_CD_08	Part C Plan Type Code: August
PTC_PLAN_TYPE_CD_09	Part C Plan Type Code: September
PTC_PLAN_TYPE_CD_10	Part C Plan Type Code: October
PTC_PLAN_TYPE_CD_11	Part C Plan Type Code: November
PTC_PLAN_TYPE_CD_12	Part C Plan Type Code: December
PTD_CNTRCT_ID_01	Part D Contract ID: January
PTD_CNTRCT_ID_02	Part D Contract ID: February
PTD_CNTRCT_ID_03	Part D Contract ID: March
PTD_CNTRCT_ID_04	Part D Contract ID: April
PTD_CNTRCT_ID_05	Part D Contract ID: May
PTD_CNTRCT_ID_06	Part D Contract ID: June
PTD_CNTRCT_ID_07	Part D Contract ID: July
PTD_CNTRCT_ID_08	Part D Contract ID: August
PTD_CNTRCT_ID_09	Part D Contract ID: September
PTD_CNTRCT_ID_10	Part D Contract ID: October
PTD_CNTRCT_ID_11	Part D Contract ID: November
PTD_CNTRCT_ID_12	Part D Contract ID: December
PTD_PBP_ID_01	Part D Plan Benefit Package ID: January
PTD_PBP_ID_02	Part D Plan Benefit Package ID: February
PTD_PBP_ID_03	Part D Plan Benefit Package ID: March
PTD_PBP_ID_04	Part D Plan Benefit Package ID: April
PTD_PBP_ID_05	Part D Plan Benefit Package ID: May
PTD_PBP_ID_06	Part D Plan Benefit Package ID: June
PTD_PBP_ID_07	Part D Plan Benefit Package ID: July
PTD_PBP_ID_08	Part D Plan Benefit Package ID: August
PTD_PBP_ID_09	Part D Plan Benefit Package ID: September
PTD_PBP_ID_10	Part D Plan Benefit Package ID: October
PTD_PBP_ID_11	Part D Plan Benefit Package ID: November
PTD_PBP_ID_12	Part D Plan Benefit Package ID: December
PTD_SGMT_ID_01	Part D Segment ID: January
PTD_SGMT_ID_02	Part D Segment ID: February
PTD_SGMT_ID_03	Part D Segment ID: March
PTD_SGMT_ID_04	Part D Segment ID: April
PTD_SGMT_ID_05	Part D Segment ID: May
PTD_SGMT_ID_06	Part D Segment ID: June
PTD_SGMT_ID_07	Part D Segment ID: July
PTD_SGMT_ID_08	Part D Segment ID: August
PTD_SGMT_ID_09	Part D Segment ID: September
PTD_SGMT_ID_10	Part D Segment ID: October
PTD_SGMT_ID_11	Part D Segment ID: November
PTD_SGMT_ID_12	Part D Segment ID: December
RDS_IND_01	Retiree Drug Subsidy Indicators: January
RDS_IND_02	Retiree Drug Subsidy Indicators: February
RDS_IND_03	Retiree Drug Subsidy Indicators: March
RDS_IND_04	Retiree Drug Subsidy Indicators: April
RDS_IND_05	Retiree Drug Subsidy Indicators: May
RDS_IND_06	Retiree Drug Subsidy Indicators: June
RDS_IND_07	Retiree Drug Subsidy Indicators: July
RDS_IND_08	Retiree Drug Subsidy Indicators: August

Variable Name	Variable Label
RDS_IND_09	Retiree Drug Subsidy Indicators: September
RDS_IND_10	Retiree Drug Subsidy Indicators: October
RDS_IND_11	Retiree Drug Subsidy Indicators: November
RDS_IND_12	Retiree Drug Subsidy Indicators: December
DUAL_STUS_CD_01	State Reported Dual Eligible Status Code: January
DUAL_STUS_CD_02	State Reported Dual Eligible Status Code: February
DUAL_STUS_CD_03	State Reported Dual Eligible Status Code: March
DUAL_STUS_CD_04	State Reported Dual Eligible Status Code: April
DUAL_STUS_CD_05	State Reported Dual Eligible Status Code: May
DUAL_STUS_CD_06	State Reported Dual Eligible Status Code: June
DUAL_STUS_CD_07	State Reported Dual Eligible Status Code: July
DUAL_STUS_CD_08	State Reported Dual Eligible Status Code: August
DUAL_STUS_CD_09	State Reported Dual Eligible Status Code: September
DUAL_STUS_CD_10	State Reported Dual Eligible Status Code: October
DUAL_STUS_CD_11	State Reported Dual Eligible Status Code: November
DUAL_STUS_CD_12	State Reported Dual Eligible Status Code: December
CST_SHR_GRP_CD_01	Cost Share Group Code: January
CST_SHR_GRP_CD_02	Cost Share Group Code: February
CST_SHR_GRP_CD_03	Cost Share Group Code: March
CST_SHR_GRP_CD_04	Cost Share Group Code: April
CST_SHR_GRP_CD_05	Cost Share Group Code: May
CST_SHR_GRP_CD_06	Cost Share Group Code: June
CST_SHR_GRP_CD_07	Cost Share Group Code: July
CST_SHR_GRP_CD_08	Cost Share Group Code: August
CST_SHR_GRP_CD_09	Cost Share Group Code: September
CST_SHR_GRP_CD_10	Cost Share Group Code: October
CST_SHR_GRP_CD_11	Cost Share Group Code: November
CST_SHR_GRP_CD_12	Cost Share Group Code: December
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (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 Rltd Disorders or Senile Dementia EOY Flag
ALZH_DEMEN_MID	Alzheimer's Disease and Rltd Disorders or Senile Dementia Mid-Year Flag
ALZH_DEMEN_EVER	1st Occrrnce of Alzheimer's Dsease and Rltd 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

Variable Name	Variable Label
CANCER_BREAST	Breast Cancer End-of-Year Flag
CANCER_BREAST_MID	Breast Cancer Mid-Year Flag
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (YYYY)
BENE_ENROLLMT_REF_YR	Reference Year
ALZH	Alzheimer's Disease End-of-Year Indicator
ALZH_EVER	First Occurrence of Alzheimer's Disease
AMI	Acute Myocardial Infarction End-of-Year Indicator
AMI_EVER	First Occurrence of Acute Myocardial Infarction
ANEMIA	Anemia End-of-Year Indicator
ANEMIA_EVER	First Occurrence of Anemia
ASTHMA	Asthma End-of-Year Indicator
ASTHMA_EVER	First Occurrence of Asthma
ATRIAL_FIB	Atrial Fibrillation and Flutter End-of-Year Indicator
ATRIAL_FIB_EVER	First Occurrence of Atrial Fibrillation and Flutter
BPH	Benign Prostatic Hyperplasia End-of-Year Indicator
BPH_EVER	First Occurrence of Benign Prostatic Hyperplasia
CANCER_BREAST	Breast Cancer End-of-Year Indicator
CANCER_BREAST_EVER	First Occurrence of Breast Cancer
CANCER_COLORECTAL	Colorectal Cancer End-of-Year Indicator
CANCER_COLORECTAL_EVER	First Occurrence of Colorectal Cancer
CANCER_ENDOMETRIAL	Endometrial Cancer End-of-Year Indicator
CANCER_ENDOMETRIAL_EVER	First Occurrence of Endometrial Cancer
CANCER_LUNG	Lung Cancer End-of-Year Indicator
CANCER_LUNG_EVER	First Occurrence of Lung Cancer
CANCER_PROSTATE	Prostate Cancer End-of-Year Indicator
CANCER_PROSTATE_EVER	First Occurrence of Prostate Cancer
CANCER_UROLOGIC	Urologic Cancer (Kidney, Renal Pelvis and Ureter) End-of-Year Indicator
CANCER_UROLOGIC_EVER	First Occurrence of Urologic Cancer (Kidney, Renal Pelvis and Ureter)
CATARACT	Cataract End-of-Year Indicator
CATARACT_EVER	First Occurrence of Cataract
CHRONICKIDNEY	Chronic Kidney Disease End-of-Year Indicator
CHRONICKIDNEY_EVER	First Occurrence of Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease End-of-Year Indicator
COPD_EVER	First Occurrence of Chronic Obstructive Pulmonary Disease
DEPRESSION	Depression, Bipolar or Other Depressive Mood Disorders End-of-Year Indicator
DEPRESSION_EVER	First Occurrence of Depression, Bipolar or Other Depressive Mood Disorders
DIABETES	Diabetes End-of-Year Indicator
DIABETES_EVER	First Occurrence of Diabetes
GLAUCOMA	Glaucoma End-of-Year Indicator
GLAUCOMA_EVER	First Occurrence of Glaucoma
HF	Heart Failure and Non-Ischemic Heart Disease End-of-Year Indicator
HF_EVER	First Occurrence of Heart Failure and Non-Ischemic Heart Disease
HIP_FRACTURE	Hip/Pelvic Fracture End-of-Year Indicator
HIP_FRACTURE_EVER	First Occurrence of Hip/Pelvic Fracture
HLP	Hyperlipidemia End-of-Year Indicator
HLP_EVER	First Occurrence of Hyperlipidemia
HTN	Hypertension End-of-Year Indicator
HTN_EVER	First Occurrence of Hypertension
HYPTHYRD	Hypothyroidism End-of-Year Indicator
HYPTHYRD_EVER	First Occurrence of Hypothyroidism
ISCHEMICHEART	Ischemic Heart Disease End-of-Year Indicator
ISCHEMICHEART_EVER	First Occurrence of Ischemic Heart Disease

Variable Name	Variable Label
NONALZH_DEMEN	Non-Alzheimer's Dementia End-of-Year Indicator
NONALZH_DEMEN_EVER	First Occurrence of Non-Alzheimer's Dementia
OSTEOPOROSIS	Osteoporosis With or Without Pathological Fracture End-of-Year Indicator
OSTEOPOROSIS_EVER	First Occurrence of Osteoporosis With or Without Pathological Fracture
PNEUMO	All Cause Pneumonia End-of-Year Indicator
PNEUMO_EVER	First Occurrence of All Cause Pneumonia
PRKNSN	Parkinson's Disease and Secondary Parkinsonism End-of-Year Indicator
PRKNSN_EVER	First Occurrence of Parkinson's Disease and Secondary Parkinsonism
RA_OA	Rheumatoid Arthritis / Osteoarthritis End-of-Year Indicator
RA_OA_EVER	First Occurrence of Rheumatoid Arthritis / Osteoarthritis
STROKE_TIA	Stroke / Transient Ischemic Attack End-of-Year Indicator
STROKE_TIA_EVER	First Occurrence of Stroke / Transient Ischemic Attack
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (YYYY)
BENE_ENROLLMT_REF_YR	Beneficiary Enrollment Reference Year
ACP_MEDICARE	ADHD and Other Conduct Disorders
ACP_MEDICARE_EVER	ADHD and Other Conduct Disorders First Ever Occurrence Date
ALCO_MEDICARE	Alcohol Use Disorders
ALCO_MEDICARE_EVER	Alcohol Use Disorders First Ever Occurrence Date
ANXI_MEDICARE	Anxiety Disorders
ANXI_MEDICARE_EVER	Anxiety Disorders First Ever Occurrence Date
AUTISM_MEDICARE	Autism Spectrum Disorders
AUTISM_MEDICARE_EVER	Autism Spectrum Disorders First Ever Occurrence Date
BIPL_MEDICARE	Bipolar Disorder
BIPL_MEDICARE_EVER	Bipolar Disorder First Ever Occurrence Date
BRAINJ_MEDICARE	Traumatic Brain Injury and Nonpsychotic Mental Disorders due to Brain Damage
BRAINJ_MEDICARE_EVER	TBI & Nonpsychotic Mental Disorders due to Brain Damage 1st Ever Occurrence Date
CERPAL_MEDICARE	Cerebral Palsy
CERPAL_MEDICARE_EVER	Cerebral Palsy First Ever Occurrence Date
CYSFIB_MEDICARE	Cystic Fibrosis and Other Metabolic Developmental Disorders
CYSFIB_MEDICARE_EVER	Cystic Fibrosis & Oth Metabolic Developmental Disorders 1st Ever Occurrence Date
DEPSN_MEDICARE	TO10 Depression
DEPSN_MEDICARE_EVER	TO10 Depression First Ever Occurrence Date
DRUG_MEDICARE	Drug Use
DRUG_MEDICARE_EVER	Drug Use First Ever Occurrence Date
EPILEP_MEDICARE	Epilepsy
EPILEP_MEDICARE_EVER	Epilepsy First Ever Occurrence Date
FIBRO_MEDICARE	Chronic Pain Fatigue and Fibromyalgia
FIBRO_MEDICARE_EVER	Chronic Pain Fatigue and Fibromyalgia First Ever Occurrence Date
HEARIM_MEDICARE	Sensory - Deafness and Hearing Impairment
HEARIM_MEDICARE_EVER	Sensory - Deafness and Hearing Impairment First Ever Occurrence Date
HEPVIRAL_MEDICARE	Viral Hepatitis (General)
HEPVIRAL_MEDICARE_EVER	Viral Hepatitis (General) First Ever Occurrence Date
HIVAIDS_MEDICARE	HIV/AIDS
HIVAIDS_MEDICARE_EVER	HIV/AIDS First Ever Occurrence Date
INTDIS_MEDICARE	Intellectual Disabilities and Related Conditions
INTDIS_MEDICARE_EVER	Intellectual Disabilities and Related Conditions First Ever Occurrence Date
LEADIS_MEDICARE	Learning Disabilities
LEADIS_MEDICARE_EVER	Learning Disabilities First Ever Occurrence Date
LEUKLYMPH_MEDICARE	Leukemias and Lymphomas
LEUKLYMPH_MEDICARE_EVER	Leukemias and Lymphomas First Ever Occurrence Date
LIVER_MEDICARE	Liver Disease Cirrhosis & Oth Liver Cond (excl Hepatitis)
LIVER_MEDICARE_EVER	Liver Disease Cirrhosis & Oth Liver Cond (excl Hepatitis) 1st Ever Occur Date
MIGRAINE_MEDICARE	Migraine and other Chronic Headache
MIGRAINE_MEDICARE_EVER	Migraine and other Chronic Headache First Ever Occurrence Date
MOBIMP_MEDICARE	Mobility Impairments
MOBIMP_MEDICARE_EVER	Mobility Impairments First Ever Occurrence Date
MULSCL_MEDICARE	Multiple Sclerosis and Transverse Myelitis
MULSCL_MEDICARE_EVER	Multiple Sclerosis and Transverse Myelitis First Ever Occurrence Date
MUSDYS_MEDICARE	Muscular Dystrophy
MUSDYS_MEDICARE_EVER	Muscular Dystrophy First Ever Occurrence Date
OBESITY_MEDICARE	Obesity
OBESITY_MEDICARE_EVER	Obesity First Ever Occurrence Date

Variable Name	Variable Label
OTHDEL_MEDICARE	Other Developmental Delays
OTHDEL_MEDICARE_EVER	Other Developmental Delays First Ever Occurrence Date
OUD_ANY_MEDICARE	Overarching OUD Disorder (Any of the Three Sub-Indicators) - Medicare Only Claim
OUD_ANY_MEDICARE_EVER	Overarching OUD Disorder (Any of the Three Sub-Indicators) - First Ever Occurren
OUD_DX_MEDICARE	Diagnosis and Procedure Basis for OUD - Medicare Only Claims
OUD_DX_MEDICARE_EVER	Diagnosis and Procedure Basis for OUD First Ever Occurrence Date - Medicare Only
OUD_HOSP_MEDICARE	Opioid-Related Hospitalization or ED - Medicare Only Claims
OUD_HOSP_MEDICARE_EVER	Opioid-Related Hospitalization or ED First Ever Occurrence Date - Medicare Only
OUD_MAT_MEDICARE	Use of Medication-Assisted Treatment (MAT) - Medicare Only Claims
OUD_MAT_MEDICARE_EVER	Use of Medication-Assisted Treatment (MAT) First Ever Occurrence Date - Medicare
PSDS_MEDICARE	Personality Disorders
PSDS_MEDICARE_EVER	Personality Disorders First Ever Occurrence Date
PTRA_MEDICARE	Post-Traumatic Stress Disorder
PTRA_MEDICARE_EVER	Post-Traumatic Stress Disorder First Ever Occurrence Date
PVD_MEDICARE	Peripheral Vascular Disease
PVD_MEDICARE_EVER	Peripheral Vascular Disease First Ever Occurrence Date
SCD_MEDICARE	Sickle Cell Disease - Medicare Only Claims
SCD_MEDICARE_EVER	Sickle Cell Disease First Ever Occurrence Date - Medicare Only Claims
SCHI_MEDICARE	Schizophrenia
SCHI_MEDICARE_EVER	Schizophrenia First Ever Occurrence Date
SCHIOT_MEDICARE	Schizophrenia and Other Psychotic Disorders
SCHIOT_MEDICARE_EVER	Schizophrenia and Other Psychotic Disorders First Ever Occurrence Date
SPIBIF_MEDICARE	Spina Bifida & Oth Congenital Anomalies Nervous Sys
SPIBIF_MEDICARE_EVER	Spina Bifida & Oth Congenital Anomalies Nervous Sys 1st Ever Occurrence Date
SPIINJ_MEDICARE	Spinal Cord Injury
SPIINJ_MEDICARE_EVER	Spinal Cord Injury First Ever Occurrence Date
TOBA_MEDICARE	Tobacco Use Disorders
TOBA_MEDICARE_EVER	Tobacco Use Disorders First Ever Occurrence Date
ULCERS_MEDICARE	Pressure Ulcers and Chronic Ulcers
ULCERS_MEDICARE_EVER	Pressure Ulcers and Chronic Ulcers First Ever Occurrence Date
VISUAL_MEDICARE	Sensory - Blindness and Visual Impairment
VISUAL_MEDICARE_EVER	Sensory - Blindness and Visual Impairment First Ever Occurrence Date
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (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
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

Variable Name	Variable Label
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Part D Prescription Drug Event (PDE) Claims

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Part D event (YYYY)
DOB_DT	Patient Date of Birth (DOB)
SEX_CD	Patient Sex
SRVC_DT	RX Service Date (DOS)
PD_DT	Paid Date
PRSCRBR_ID_QLFYR_CD	Prescriber ID Qualifier Code
PRSCRBR_ID	Prescriber ID
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
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
NCPDP_ID	NCPDP Proprietary Pharmacy Identifier
RX_ORGN_CD	Prescription Origin Code
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of MEDPAR claim (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 beneficiarys residence.
BENE_RSDNC_SSA_CNTY_CD	SSA standard county code of a beneficiarys 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 dsgntn excl.
SS_LS_SNF_IND_CD	Code indicating whether stay is short stay, long stay, or SNF
ACTV_XREF_IND	Active Cross-Refference 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 beneficiarys qualifying stay
SNF_QUALN_THRU_DT	Ending date of beneficiarys qualifying stay
SRC_IP_ADMSN_CD	Admssn to an Inp facility or, for newborn admssn, 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 beneficiarys 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	Beneficiarys liability for part A coinsurance for stay ($)
BENE_IP_DDCTBL_AMT	Beneficiarys liability for stay ($)
BENE_BLOOD_DDCTBL_AMT	Beneficiarys liability for blood deductible for stay ($)
BENE_PRMRY_PYR_CD	Primary payer responsibility code
BENE_PRMRY_PYR_AMT	Primry payer other than Medicare for covered Medicare chrgs for stay ($)
DRG_CD	DRG Code
DRG_OUTLIER_STAY_CD	Cost or Day Outlier code

Variable Name	Variable Label
DRG_OUTLIER_PMT_AMT	Addtnl 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_DSPRPRTNT_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 ($)
TOT_PPS_CPTL_AMT	Total payable for capital PPS ($)
IP_LOW_VOL_PYMT_AMT	Inpatient Low Volume Payment Amount.
TOT_CHRG_AMT	Total all charges for all srvcs 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 srvcs covered by claim ($)
ACMDTNS_TOT_CHRG_AMT	Total charge for all accommodations related to beneficiarys stay ($)
DPRTMNTL_TOT_CHRG_AMT	Total charge for all ancillary depts related to beneficiarys stay ($)
PRVT_ROOM_DAY_CNT	Private room days used by beneficiary for stay
SEMIPRVT_ROOM_DAY_CNT	Semi-private room days used by beneficiary for stay
WARD_DAY_CNT	Ward days used by beneficiary for stay
INTNSV_CARE_DAY_CNT	Intensive care days used by beneficiary for stay
CRNRY_CARE_DAY_CNT	Coronary care days used by beneficiary for stay
PRVT_ROOM_CHRG_AMT	Private room accommodations related to beneficiarys stay ($)
SEMIPRVT_ROOM_CHRG_AMT	Semi-private room accommodations related to beneficiarys stay ($)
WARD_CHRG_AMT	Ward accommodations related to beneficiarys stay ($)
INTNSV_CARE_CHRG_AMT	Intensive care accommodations related to beneficiarys stay ($)
CRNRY_CARE_CHRG_AMT	Coronary care accommodations related to beneficiarys stay ($)
OTHR_SRVC_CHRG_AMT	Other services related to beneficiarys stay ($)
PHRMCY_CHRG_AMT	Pharmaceutical costs related to beneficiarys stay ($)
MDCL_SUPLY_CHRG_AMT	Medical/surgical supplies related to beneficiarys stay ($)
DME_CHRG_AMT	DME related to beneficiarys stay ($)
USED_DME_CHRG_AMT	Used DME related to beneficiarys stay ($)
PHYS_THRPY_CHRG_AMT	Physical therapy services provided during beneficiarys stay ($)
OCPTNL_THRPY_CHRG_AMT	Occupational therapy services provided during beneficiarys stay ($)
SPCH_PTHLGY_CHRG_AMT	Speech pathology services provided during beneficiarys stay ($)
INHLTN_THRPY_CHRG_AMT	Inhalation therapy services provided during beneficiarys stay ($)
BLOOD_CHRG_AMT	Blood provided during beneficiarys stay ($)
BLOOD_ADMIN_CHRG_AMT	Blood storage and processing related to beneficiarys 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 beneficiarys stay ($)
CRDLGY_CHRG_AMT	Cardiology services and ECG(s) provided during beneficiarys stay ($)
ANSTHSA_CHRG_AMT	Anesthesia services provided during beneficiarys stay ($)
LAB_CHRG_AMT	Laboratory costs related to beneficiarys stay ($)
RDLGY_CHRG_AMT	Radiology costs (excluding MRI) related to a beneficiarys stay ($)
MRI_CHRG_AMT	MRI services provided during beneficiarys stay ($)
OP_SRVC_CHRG_AMT	Outpatient services provided during beneficiarys stay ($)
ER_CHRG_AMT	Emergency room services provided during beneficiarys stay ($)
AMBLNC_CHRG_AMT	Ambulance services related to beneficiarys stay ($)
PROFNL_FEES_CHRG_AMT	Professional fees related to beneficiarys stay ($)
ORGN_ACQSTN_CHRG_AMT	Organ acquisition or oth donor bank srvcs related to benes stay ($)
ESRD_REV_SETG_CHRG_AMT	ESRD services related to beneficiarys stay ($)
CLNC_VISIT_CHRG_AMT	Clinic visits related to beneficiarys 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

Variable Name	Variable Label
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
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 Diagnosis code
DGNS_2_CD	Diagnosis code II
DGNS_3_CD	Diagnosis code III
DGNS_4_CD	Diagnosis code IV
DGNS_5_CD	Diagnosis code V
DGNS_6_CD	Diagnosis code VI
DGNS_7_CD	Diagnosis code VII
DGNS_8_CD	Diagnosis code VIII
DGNS_9_CD	Diagnosis code IX

Variable Name	Variable Label
DGNS_10_CD	Diagnosis code X
DGNS_11_CD	Diagnosis code XI
DGNS_12_CD	Diagnosis code XII
DGNS_13_CD	Diagnosis code XIII
DGNS_14_CD	Diagnosis code XIV
DGNS_15_CD	Diagnosis code XV
DGNS_16_CD	Diagnosis code XVI
DGNS_17_CD	Diagnosis code XVII
DGNS_18_CD	Diagnosis code XVIII
DGNS_19_CD	Diagnosis code XIX
DGNS_20_CD	Diagnosis code XX
DGNS_21_CD	Diagnosis code XXI
DGNS_22_CD	Diagnosis code XXII
DGNS_23_CD	Diagnosis code XXIII
DGNS_24_CD	Diagnosis code XXIV
DGNS_25_CD	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
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

Variable Name	Variable Label
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
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

Variable Name	Variable Label
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
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

Variable Name	Variable Label
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_ORTHTC_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_DRSNG_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
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

Variable Name	Variable Label
HRR_ADJSTMT_AMT	Hospital Readmission Reduction (HRR) Adjustment Amount
EHR_PYMT_ADJSTMT_AMT	Electronic Health Record (EHR) Payment Adjustment Amount
PPS_STD_VAL_PYMT_AMT	Claim PPS Standard Value Payment Amount
FINL_STD_AMT	Claim Final Standard Amount
HAC_RDCTN_PMT_AMT	Hospital Acquired Conditions Reduction Payment Amount (IPPS_FLEX_PYMT_6_AMT)
IPPS_FLEX_PYMT_7_AMT	IPPS Flexible Payment Amount II
PTNT_ADD_ON_PYMT_AMT	Revenue Center Patient/Initial Visit Add-On Amount
HAC_PGM_RDCTN_IND_SW	Hospital Acquired Conditions (HAC) Program Reduction Indicator Switch
PGM_RDCTN_IND_SW	Electronic Health Records (EHR) Program Reduction Indicator Switch
PA_IND_CD	Claim Prior Authorization Indicator Code
UNIQ_TRKNG_NUM	Claim Unique Tracking Number
STAY_2_IND_SW	Stay 2 Indicator Switch
CLM_SITE_NTRL_PYMT_CST_AMT	Claim Site Neutral Payment Based on Cost Amount
CLM_SITE_NTRL_PYMT_IPPS_AMT	Claim Site Neutral Payment Based on IPPS Amount
CLM_FULL_STD_PYMT_AMT	Claim Full Standard Payment Amount
CLM_SS_OUTLIER_STD_PYMT_AMT	Claim Short Stay Outlier (SSO) Standard Payment Amount
CLM_NGACO_IND_1_CD	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code 1
CLM_NGACO_IND_2_CD	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code 2
CLM_NGACO_IND_3_CD	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code 3
CLM_NGACO_IND_4_CD	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code 4
CLM_NGACO_IND_5_CD	Claim Next Generation (NG) Accountable Care Organization (ACO) Indicator Code 5
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
CLM_RP_IND_CD	Claim Representative Payee (RP) Indicator Code
RC_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code
ACO_ID_NUM	Accountable Care Organization (ACO) Identification Number
RC_ALLOGENEIC_STEM_CELL_AMT	Revenue Center Allogeneic Stem Cell Acquisition/Donor Services Amount
ISLET_ADD_ON_PYMT_AMT	Islet Add-On Payment Amount
CLM_IP_INITL_MS_DRG_CD	Claim Inpatient Initial MS-DRG Code
VAL_CD_Q1_PYMT_RDCTN_AMT	Value Code Q1 Payment Reduction Amount
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount
VAL_CD_QB_OCM_PYMT_ADJSTMT_AMT	Value Code QB OCM + Payment Adjustment Amount
CELL_GENE_THRPY_PRCDRS_TOT_AMT	Cell/Gene Therapy Procedures Total Charge Amount
CELL_THRPY_DRUGS_TOT_AMT	Cell Therapy Drugs Total Charge Amount
GENE_THRPY_DRUGS_TOT_AMT	Gene Therapy Drugs Total Charge Amount
LTCH_DPP_ADJSTMT_AMT	Long Term Care Hospital Discharge Payment Percentage Adjustment Amount
RC_NDC_1_CD	Revenue Center National Drug Code (NDC) 1
RC_NDC_2_CD	Revenue Center National Drug Code (NDC) 2
RC_NDC_3_CD	Revenue Center National Drug Code (NDC) 3
RC_NDC_4_CD	Revenue Center National Drug Code (NDC) 4
RC_NDC_5_CD	Revenue Center National Drug Code (NDC) 5
RC_NDC_6_CD	Revenue Center National Drug Code (NDC) 6
RC_NDC_7_CD	Revenue Center National Drug Code (NDC) 7
RC_NDC_8_CD	Revenue Center National Drug Code (NDC) 8
RC_NDC_9_CD	Revenue Center National Drug Code (NDC) 9
RC_NDC_10_CD	Revenue Center National Drug Code (NDC) 10
NO_PSTV_TEST_SW	No Positive Test Switch
EXPNDD_ACS_SW	Expanded Access Switch
CLNCL_TRIL_SW	Other Clinical Trial Switch
EMER_USE_SW	Emergency Use Switch
PPS_PRCR_VRSN_CD	Prospective Payment System (PPS) Pricer Version
DRG_GRPR_VRSN_CD	Medicare-Severity Diagnosis Related Group (MS-DRG) Grouper Version

Variable Name	Variable Label
HOSP_AT_HOME_CHRG_AMT	Hospital at Home Room and Board (R&B) Charge Amount
PRVDR_BASE_FAC_CCN_NUM	Provider Base Facility CMS Certification Number (CCN)
PRVDR_FULL_CCN_NUM	Provider Full CMS Certification Number (CCN)
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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	Claim Principal Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Claim Principal 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

Variable Name	Variable Label
DOB_DT	Date of Birth from Claim (Date)
SEX_CD	Sex Code From Claims
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
CLM_BENE_PD_AMT	Carrier Claim Beneficiary Paid Amount
CPO_PRVDR_NUM	Care Plan Oversight (CPO) Provider Number
CPO_ORG_NPI_NUM	CPO Organization NPI Number
CARR_CLM_BLG_NPI_NUM	Carrier Claim Billing NPI Number
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CARR_CLM_SOS_NPI_NUM	Carrier Claim Site of Service NPI Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Carrier (Physician/Supplier Part B) Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
CARR_LINE_CL_CHRG_AMT	Carrier Line Clinical Lab Charge Amount

Variable Name	Variable Label
PHYSN_ZIP_CD	Line Place Of Service (POS) Physician Zip Code
LINE_OTHR_APLD_IND_CD1	Line Other Applied Indicator Code 1
LINE_OTHR_APLD_IND_CD2	Line Other Applied Indicator Code 2
LINE_OTHR_APLD_IND_CD3	Line Other Applied Indicator Code 3
LINE_OTHR_APLD_IND_CD4	Line Other Applied Indicator Code 4
LINE_OTHR_APLD_IND_CD5	Line Other Applied Indicator Code 5
LINE_OTHR_APLD_IND_CD6	Line Other Applied Indicator Code 6
LINE_OTHR_APLD_IND_CD7	Line Other Applied Indicator Code 7
LINE_OTHR_APLD_AMT1	Line Other Applied Amount 1
LINE_OTHR_APLD_AMT2	Line Other Applied Amount 2
LINE_OTHR_APLD_AMT3	Line Other Applied Amount 3
LINE_OTHR_APLD_AMT4	Line Other Applied Amount 4
LINE_OTHR_APLD_AMT5	Line Other Applied Amount 5
LINE_OTHR_APLD_AMT6	Line Other Applied Amount 6
LINE_OTHR_APLD_AMT7	Line Other Applied Amount 7
THRPY_CAP_IND_CD1	Line Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Line Therapy Cap Indicator Code 2
THRPY_CAP_IND_CD3	Line Therapy Cap Indicator Code 3
THRPY_CAP_IND_CD4	Line Therapy Cap Indicator Code 4
THRPY_CAP_IND_CD5	Line Therapy Cap Indicator Code 5
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5
CARR_LINE_MDPP_NPI_NUM	Carrier Line Medicare Diabetes Prevention Program (MDPP) NPI Number
LINE_RSDL_PYMT_IND_CD	Line Residual Payment Indicator Code
LINE_RP_IND_CD	Line Representative Payee (RP) Indicator Code
LINE_PRVDR_VLDTN_TYPE_CD	Line Provider Validation Type Code
LINE_ADJUST_GRP_CD	Line Adjustment Group Code
LINE_ADJUST_RSN_CD	Line Adjustment Reason Code
LINE_RA_RMRK_CD	Line Remittance Advice Remark Code
LINE_POINT_OF_PCKP_ZIP_CD	Line Point of Pickup Zip Code
LINE_DROP_OFF_ZIP_CD	Line Drop Off Zip Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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	Claim Principal Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Claim Principal 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 Referring 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)

Variable Name	Variable Label
SEX_CD	Sex Code From Claims
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
CLM_BENE_PD_AMT	Carrier Claim Beneficiary Paid Amount
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Durable Medical Equipment (DME) Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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_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_PRMRY_ALOWD_CHRG_AMT	Line Primary Payer Allowed Charge 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
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
LINE_OTHR_APLD_IND_CD1	Line Other Applied Indicator Code 1
LINE_OTHR_APLD_IND_CD2	Line Other Applied Indicator Code 2
LINE_OTHR_APLD_IND_CD3	Line Other Applied Indicator Code 3
LINE_OTHR_APLD_IND_CD4	Line Other Applied Indicator Code 4

Variable Name	Variable Label
LINE_OTHR_APLD_IND_CD5	Line Other Applied Indicator Code 5
LINE_OTHR_APLD_IND_CD6	Line Other Applied Indicator Code 6
LINE_OTHR_APLD_IND_CD7	Line Other Applied Indicator Code 7
LINE_OTHR_APLD_AMT1	Line Other Applied Amount 1
LINE_OTHR_APLD_AMT2	Line Other Applied Amount 2
LINE_OTHR_APLD_AMT3	Line Other Applied Amount 3
LINE_OTHR_APLD_AMT4	Line Other Applied Amount 4
LINE_OTHR_APLD_AMT5	Line Other Applied Amount 5
LINE_OTHR_APLD_AMT6	Line Other Applied Amount 6
LINE_OTHR_APLD_AMT7	Line Other Applied Amount 7
LINE_RSDL_PYMT_IND_CD	Line Residual Payment Indicator Code
LINE_RP_IND_CD	Line Representative Payee (RP) Indicator Code
DMERC_LINE_FRGN_ADR_IND	Line Foreign Address Indicator
LINE_RR_BRD_EXCLSN_IND_SW	Line Railroad Board Exclusion Indicator Switch
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SRVC_LOC_NPI_NUM	Claim Service Location NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code
OT_PHYSN_NPI	Claim Other Physician NPI Number
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code
RFR_PHYSN_NPI	Claim Referring Physician NPI
RFR_PHYSN_SPCLTY_CD	Claim Referring Physician Specialty Code
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	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV

Variable Name	Variable Label
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
FST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
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 Admission Date
DOB_DT	Date of Birth from Claim (Date)
SEX_CD	Sex Code From Claims
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
CLM_MDCL_REC	Claim Medical Record Number
CLAIM_QUERY_CODE	Claim Query Code
FI_CLM_ACTN_CD	FI Claim Action Code
CLM_MCO_PD_SW	Claim MCO Paid Switch
NCH_BENE_DSCHRG_DT	NCH Beneficiary Discharge Date
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number
CLM_PRCR_RTRN_CD	Claim Pricer Return Code
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
FINL_STD_AMT	Claim Final Standard Amount
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch

Variable Name	Variable Label
PPS_STD_VAL_PYMT_AMT	Claim PPS Standard Value Payment Amount
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code
CLM_PRCR_VRSN_CD	Claim Pricer Version Code
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Fee-for-Service Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third 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
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code
REV_CNTR_DSCNT_IND_CD	Revenue Center Discount Indicator Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_PRVDR_PMT_AMT	Revenue Center Provider Payment Amount
REV_CNTR_PTNT_RSPNSBLTY_PMT	Revenue Center Patient Responsibility Payment
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2
REV_CNTR_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount
REV_CNTR_ADJUST_GRP_CD	Revenue Center Adjustment Group Code
REV_CNTR_ADJUST_RSN_CD	Revenue Center Adjustment Reason Code
REV_CNTR_RA_RMRK_CD	Revenue Center Remittance Advice Remark Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SRVC_LOC_NPI_NUM	Claim Service Location NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code
OT_PHYSN_NPI	Claim Other Physician NPI Number
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code
RFR_PHYSN_NPI	Claim Referring Physician NPI
RFR_PHYSN_SPCLTY_CD	Claim Referring Physician Specialty Code
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	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII

Variable Name	Variable Label
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
FST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
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)
SEX_CD	Sex Code From Claims
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
CLM_MDCL_REC	Claim Medical Record Number
CLAIM_QUERY_CODE	Claim Query Code
FI_CLM_ACTN_CD	FI Claim Action Code
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number
CLM_PRCR_RTRN_CD	Claim Pricer Return Code
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code

Variable Name	Variable Label
CLM_PRCR_VRSN_CD	Claim Pricer Version Code
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Hospice Fee-for-Service Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third 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
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_STUS_IND_CD	Revenue Center Status Indicator Code
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2
REV_CNTR_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount
REV_CNTR_ADJUST_GRP_CD	Revenue Center Adjustment Group Code
REV_CNTR_ADJUST_RSN_CD	Revenue Center Adjustment Reason Code
REV_CNTR_RA_RMRK_CD	Revenue Center Remittance Advice Remark Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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 Amt
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amt
NCH_PRMRY_PYR_CD	NCH Primary Payer Code
FI_CLM_ACTN_CD	FI Claim Action 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
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code
OP_PHYSN_UPIN	Claim Operating Physician UPIN Number
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code
OT_PHYSN_UPIN	Claim Other Physician UPIN Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code
CLM_MCO_PD_SW	Claim MCO Paid Switch
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_PPS_IND_CD	Claim PPS Indicator Code
CLM_TOT_CHRG_AMT	Claim Total Charge Amt
CLM_ADMSN_DT	Claim Admission Date
CLM_IP_ADMSN_TYPE_CD	Claim Inpatient Admission Type Code
CLM_SRC_IP_ADMSN_CD	Claim Source Inpatient Admission Code
NCH_PTNT_STATUS_IND_CD	NCH Patient Status Indicator Code
CLM_PASS_THRU_PER_DIEM_AMT	Claim Pass Thru Per Diem Amt
NCH_BENE_IP_DDCTBL_AMT	NCH Beneficiary Inpatient Deductible Amt
NCH_BENE_PTA_COINSRNC_LBLTY_AM	NCH Beneficiary Part A Coinsurance Liability Amt
NCH_BENE_BLOOD_DDCTBL_LBLTY_AM	NCH Beneficiary Blood Deductible Liability Amt
NCH_PROFNL_CMPNT_CHRG_AMT	NCH Professional Component Charge
NCH_IP_NCVRD_CHRG_AMT	NCH Inpatient Noncovered Charge
NCH_IP_TOT_DDCTN_AMT	NCH Inpatient Total Deduction Amount
CLM_TOT_PPS_CPTL_AMT	Claim Total PPS Capital Amt
CLM_PPS_CPTL_FSP_AMT	Claim PPS Capital FSP Amt
CLM_PPS_CPTL_OUTLIER_AMT	Claim PPS Capital Outlier Amt

Variable Name	Variable Label
CLM_PPS_CPTL_DSPRPRTNT_SHR_AMT	Claim PPS Capital Disproportionate Share Amt
CLM_PPS_CPTL_IME_AMT	Claim PPS Capital IME Amt
CLM_PPS_CPTL_EXCPTN_AMT	Claim PPS Capital Exception Amt
CLM_PPS_OLD_CPTL_HLD_HRMLS_AMT	Claim PPS Old Capital Hold Harmless Amt
CLM_PPS_CPTL_DRG_WT_NUM	Claim PPS Capital DRG Weight Number
CLM_UTLZTN_DAY_CNT	Claim Utilization Day Count
BENE_TOT_COINSRNC_DAYS_CNT	Beneficiary Total Coinsurance Days Count
BENE_LRD_USED_CNT	Beneficiary LRD Used Count
CLM_NON_UTLZTN_DAYS_CNT	Claim Non Utilization Days Count
NCH_BLOOD_PNTS_FRNSHD_QTY	NCH Blood Pints Furnished Quantity
NCH_VRFD_NCVRD_STAY_FROM_DT	NCH Verified Noncovered Stay From Date
NCH_VRFD_NCVRD_STAY_THRU_DT	NCH Verified Noncovered Stay Through Date
NCH_ACTV_OR_CVRD_LVL_CARE_THRU	NCH Active or Covered Level Care Thru Date
NCH_BENE_MDCR_BNFTS_EXHTD_DT_I	NCH Beneficiary Medicare Benefits Exhausted Date
NCH_BENE_DSCHRG_DT	NCH Beneficiary Discharge Date
CLM_DRG_CD	Claim Diagnosis Related Group Code
CLM_DRG_OUTLIER_STAY_CD	Claim Diagnosis Related Group Outlier Stay Code
NCH_DRG_OUTLIER_APRVD_PMT_AMT	NCH DRG Outlier Approved Payment Amt
ADMTG_DGNS_CD	Claim Admitting Diagnosis Code
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
CLM_POA_IND_SW1	Claim Diagnosis Code I Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD2	Claim Diagnosis Code II
CLM_POA_IND_SW2	Claim Diagnosis Code II Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD3	Claim Diagnosis Code III
CLM_POA_IND_SW3	Claim Diagnosis Code III Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD4	Claim Diagnosis Code IV
CLM_POA_IND_SW4	Claim Diagnosis Code IV Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD5	Claim Diagnosis Code V
CLM_POA_IND_SW5	Claim Diagnosis Code V Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD6	Claim Diagnosis Code VI
CLM_POA_IND_SW6	Claim Diagnosis Code VI Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD7	Claim Diagnosis Code VII
CLM_POA_IND_SW7	Claim Diagnosis Code VII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD8	Claim Diagnosis Code VIII
CLM_POA_IND_SW8	Claim Diagnosis Code VIII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD9	Claim Diagnosis Code IX
CLM_POA_IND_SW9	Claim Diagnosis Code IX Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD10	Claim Diagnosis Code X
CLM_POA_IND_SW10	Claim Diagnosis Code X Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD11	Claim Diagnosis Code XI
CLM_POA_IND_SW11	Claim Diagnosis Code XI Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD12	Claim Diagnosis Code XII
CLM_POA_IND_SW12	Claim Diagnosis Code XII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD13	Claim Diagnosis Code XIII
CLM_POA_IND_SW13	Claim Diagnosis Code XIII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD14	Claim Diagnosis Code XIV
CLM_POA_IND_SW14	Claim Diagnosis Code XIV Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD15	Claim Diagnosis Code XV
CLM_POA_IND_SW15	Claim Diagnosis Code XV Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD16	Claim Diagnosis Code XVI
CLM_POA_IND_SW16	Claim Diagnosis Code XVI Diagnosis Present on Admission Indicator Code

Variable Name	Variable Label
ICD_DGNS_CD17	Claim Diagnosis Code XVII
CLM_POA_IND_SW17	Claim Diagnosis Code XVII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
CLM_POA_IND_SW18	Claim Diagnosis Code XVIII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD19	Claim Diagnosis Code XIX
CLM_POA_IND_SW19	Claim Diagnosis Code XIX Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD20	Claim Diagnosis Code XX
CLM_POA_IND_SW20	Claim Diagnosis Code XX Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD21	Claim Diagnosis Code XXI
CLM_POA_IND_SW21	Claim Diagnosis Code XXI Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD22	Claim Diagnosis Code XXII
CLM_POA_IND_SW22	Claim Diagnosis Code XXII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
CLM_POA_IND_SW23	Claim Diagnosis Code XXIII Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
CLM_POA_IND_SW24	Claim Diagnosis Code XXIV Diagnosis Present on Admission Indicator Code
ICD_DGNS_CD25	Claim Diagnosis Code XXV
CLM_POA_IND_SW25	Claim Diagnosis Code XXV Diagnosis Present on Admission Indicator Code
FST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
CLM_E_POA_IND_SW1	Claim Diagnosis E Code I Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
CLM_E_POA_IND_SW2	Claim Diagnosis E Code II Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
CLM_E_POA_IND_SW3	Claim Diagnosis E Code III Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
CLM_E_POA_IND_SW4	Claim Diagnosis E Code IV Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
CLM_E_POA_IND_SW5	Claim Diagnosis E Code V Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
CLM_E_POA_IND_SW6	Claim Diagnosis E Code VI Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
CLM_E_POA_IND_SW7	Claim Diagnosis E Code VII Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
CLM_E_POA_IND_SW8	Claim Diagnosis E Code VIII Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
CLM_E_POA_IND_SW9	Claim Diagnosis E Code IX Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
CLM_E_POA_IND_SW10	Claim Diagnosis E Code X Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
CLM_E_POA_IND_SW11	Claim Diagnosis E Code XI Diagnosis Present on Admission Indicator Code
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
CLM_E_POA_IND_SW12	Claim Diagnosis E Code XII Diagnosis Present on Admission Indicator Code
ICD_PRCDR_CD1	Claim Procedure Code I
PRCDR_DT1	Claim Procedure Code I Date
ICD_PRCDR_CD2	Claim Procedure Code II
PRCDR_DT2	Claim Procedure Code II Date
ICD_PRCDR_CD3	Claim Procedure Code III
PRCDR_DT3	Claim Procedure Code III Date
ICD_PRCDR_CD4	Claim Procedure Code IV
PRCDR_DT4	Claim Procedure Code IV Date
ICD_PRCDR_CD5	Claim Procedure Code V

Variable Name	Variable Label
PRCDR_DT5	Claim Procedure Code V Date
ICD_PRCDR_CD6	Claim Procedure Code VI
PRCDR_DT6	Claim Procedure Code VI Date
ICD_PRCDR_CD7	Claim Procedure Code VII
PRCDR_DT7	Claim Procedure Code VII Date
ICD_PRCDR_CD8	Claim Procedure Code VIII
PRCDR_DT8	Claim Procedure Code VIII Date
ICD_PRCDR_CD9	Claim Procedure Code IX
PRCDR_DT9	Claim Procedure Code IX Date
ICD_PRCDR_CD10	Claim Procedure Code X
PRCDR_DT10	Claim Procedure Code X Date
ICD_PRCDR_CD11	Claim Procedure Code XI
PRCDR_DT11	Claim Procedure Code XI Date
ICD_PRCDR_CD12	Claim Procedure Code XII
PRCDR_DT12	Claim Procedure Code XII Date
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT13	Claim Procedure Code XIII Date
ICD_PRCDR_CD14	Claim Procedure Code XIV
PRCDR_DT14	Claim Procedure Code XIV Date
ICD_PRCDR_CD15	Claim Procedure Code XV
PRCDR_DT15	Claim Procedure Code XV Date
ICD_PRCDR_CD16	Claim Procedure Code XVI
PRCDR_DT16	Claim Procedure Code XVI Date
ICD_PRCDR_CD17	Claim Procedure Code XVII
PRCDR_DT17	Claim Procedure Code XVII Date
ICD_PRCDR_CD18	Claim Procedure Code XVIII
PRCDR_DT18	Claim Procedure Code XVIII Date
ICD_PRCDR_CD19	Claim Procedure Code XIX
PRCDR_DT19	Claim Procedure Code XIX Date
ICD_PRCDR_CD20	Claim Procedure Code XX
PRCDR_DT20	Claim Procedure Code XX Date
ICD_PRCDR_CD21	Claim Procedure Code XXI
PRCDR_DT21	Claim Procedure Code XXI Date
ICD_PRCDR_CD22	Claim Procedure Code XXII
PRCDR_DT22	Claim Procedure Code XXII Date
ICD_PRCDR_CD23	Claim Procedure Code XXIII
PRCDR_DT23	Claim Procedure Code XXIII Date
ICD_PRCDR_CD24	Claim Procedure Code XXIV
PRCDR_DT24	Claim Procedure Code XXIV Date
ICD_PRCDR_CD25	Claim Procedure Code XXV
PRCDR_DT25	Claim Procedure Code XXV Date
IME_OP_CLM_VAL_AMT	Operating Indirect Medical Education (IME) Amount
DSH_OP_CLM_VAL_AMT	Operating Disproportionate Share Amount
DOB_DT	Date of Birth from Claim (Date)
SEX_CD	Sex Code From Claims
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
CLM_MDCL_REC	Claim Medical Record Number
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number
CLM_PRCR_RTRN_CD	Claim Pricer Return Code

Variable Name	Variable Label
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code
CLM_IP_LOW_VOL_PMT_AMT	Claim Inpatient Low Volume Payment Amount
CLM_CARE_IMPRVMT_MODEL_CD1	Claim Care Improvement Model Code 1
CLM_CARE_IMPRVMT_MODEL_CD2	Claim Care Improvement Model Code 2
CLM_CARE_IMPRVMT_MODEL_CD3	Claim Care Improvement Model Code 3
CLM_CARE_IMPRVMT_MODEL_CD4	Claim Care Improvement Model Code 4
CLM_BNDLD_MODEL_1_DSCNT_PCT	Claim Bundled Model 1 Discount Percent
CLM_BASE_OPRTG_DRG_AMT	Claim Base Operating DRG Amount
CLM_VBP_PRTCPNT_IND_CD	Claim VBP Participant Indicator Code
CLM_VBP_ADJSTMT_PCT	Claim VBP Adjustment Percent
CLM_HRR_PRTCPNT_IND_CD	Claim HRR Participant Indicator Code
CLM_HRR_ADJSTMT_PCT	Claim HRR Adjustment Percent
CLM_MODEL_4_READMSN_IND_CD	Claim Model 4 Readmission Indicator Code
CLM_UNCOMPD_CARE_PMT_AMT	Claim Uncompensated Care Payment Amount
CLM_BNDLD_ADJSTMT_PMT_AMT	Claim Bundled Adjustment Payment Amount
CLM_VBP_ADJSTMT_PMT_AMT	Claim VBP Adjustment Payment Amount
CLM_HRR_ADJSTMT_PMT_AMT	Claim HRR Adjustment Payment Amount
EHR_PYMT_ADJSTMT_AMT	Electronic Health Record (EHR) Payment Adjustment Amount
PPS_STD_VAL_PYMT_AMT	Claim PPS Standard Value Payment Amount
FINL_STD_AMT	Claim Final Standard Amount
HAC_PGM_RDCTN_IND_SW	Hospital Acquired Conditions (HAC) Program Reduction Indicator Switch
EHR_PGM_RDCTN_IND_SW	Electronic Health Records (EHR) Program Reduction Indicator Code
CLM_SITE_NTRL_PYMT_CST_AMT	Claim Site Neutral Payment Based On Cost Amount
CLM_SITE_NTRL_PYMT_IPPS_AMT	Claim Site Neutral Payment Based On IPPS Amount
CLM_FULL_STD_PYMT_AMT	Claim Full Standard Payment Amount
CLM_SS_OUTLIER_STD_PYMT_AMT	Claim Short Stay Outlier (SSO) Standard Payment Amount
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
CLM_RP_IND_CD	Claim Representative Payee (RP) Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch
CLM_IP_INITL_MS_DRG_CD	Claim Inpatient Initial MS DRG Code
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
LTCH_DSCHRG_PYMT_ADJSTMT_AMT	LTCH Discharge Payment Adjustment Amount
OWNG_PRVDR_TIN_NUM	Owning Provider Tax Identification Number (TIN)
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code
CLM_PRCR_VRSN_CD	Claim Pricer Version Code
MS_DRG_GRPR_VRSN_CD	MS-DRG Grouper Version Code
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Fee-for-Service Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
REV_CNTR_RATE_AMT	Revenue Center Rate 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
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SRVC_LOC_NPI_NUM	Claim Service Location NPI Number
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code
OP_PHYSN_UPIN	Claim Operating Physician UPIN Number
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code
OT_PHYSN_UPIN	Claim Other Physician UPIN Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code
RFR_PHYSN_NPI	Claim Referring Physician NPI
RFR_PHYSN_SPCLTY_CD	Claim Referring Physician Specialty Code
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	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X

Variable Name	Variable Label
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
FST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
ICD_PRCDR_CD1	Claim Procedure Code I
PRCDR_DT1	Claim Procedure Code I Date
ICD_PRCDR_CD2	Claim Procedure Code II
PRCDR_DT2	Claim Procedure Code II Date
ICD_PRCDR_CD3	Claim Procedure Code III
PRCDR_DT3	Claim Procedure Code III Date
ICD_PRCDR_CD4	Claim Procedure Code IV
PRCDR_DT4	Claim Procedure Code IV Date
ICD_PRCDR_CD5	Claim Procedure Code V
PRCDR_DT5	Claim Procedure Code V Date
ICD_PRCDR_CD6	Claim Procedure Code VI
PRCDR_DT6	Claim Procedure Code VI Date
ICD_PRCDR_CD7	Claim Procedure Code VII
PRCDR_DT7	Claim Procedure Code VII Date
ICD_PRCDR_CD8	Claim Procedure Code VIII
PRCDR_DT8	Claim Procedure Code VIII Date
ICD_PRCDR_CD9	Claim Procedure Code IX
PRCDR_DT9	Claim Procedure Code IX Date
ICD_PRCDR_CD10	Claim Procedure Code X
PRCDR_DT10	Claim Procedure Code X Date
ICD_PRCDR_CD11	Claim Procedure Code XI
PRCDR_DT11	Claim Procedure Code XI Date
ICD_PRCDR_CD12	Claim Procedure Code XII
PRCDR_DT12	Claim Procedure Code XII Date

Variable Name	Variable Label
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT13	Claim Procedure Code XIII Date
ICD_PRCDR_CD14	Claim Procedure Code XIV
PRCDR_DT14	Claim Procedure Code XIV Date
ICD_PRCDR_CD15	Claim Procedure Code XV
PRCDR_DT15	Claim Procedure Code XV Date
ICD_PRCDR_CD16	Claim Procedure Code XVI
PRCDR_DT16	Claim Procedure Code XVI Date
ICD_PRCDR_CD17	Claim Procedure Code XVII
PRCDR_DT17	Claim Procedure Code XVII Date
ICD_PRCDR_CD18	Claim Procedure Code XVIII
PRCDR_DT18	Claim Procedure Code XVIII Date
ICD_PRCDR_CD19	Claim Procedure Code XIX
PRCDR_DT19	Claim Procedure Code XIX Date
ICD_PRCDR_CD20	Claim Procedure Code XX
PRCDR_DT20	Claim Procedure Code XX Date
ICD_PRCDR_CD21	Claim Procedure Code XXI
PRCDR_DT21	Claim Procedure Code XXI Date
ICD_PRCDR_CD22	Claim Procedure Code XXII
PRCDR_DT22	Claim Procedure Code XXII Date
ICD_PRCDR_CD23	Claim Procedure Code XXIII
PRCDR_DT23	Claim Procedure Code XXIII Date
ICD_PRCDR_CD24	Claim Procedure Code XXIV
PRCDR_DT24	Claim Procedure Code XXIV Date
ICD_PRCDR_CD25	Claim Procedure Code XXV
PRCDR_DT25	Claim Procedure Code XXV Date
RSN_VISIT_CD1	Reason for Visit Diagnosis Code I
RSN_VISIT_CD2	Reason for Visit Diagnosis Code II
RSN_VISIT_CD3	Reason for Visit Diagnosis Code III
NCH_BENE_PTB_DDCTBL_AMT	NCH Beneficiary Part B Deductible Amount
NCH_BENE_PTB_COINSRNC_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)
SEX_CD	Sex Code From Claims
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
CLM_MDCL_REC	Claim Medical Record Number
FI_CLM_ACTN_CD	FI Claim Action Code
NCH_BLOOD_PNTS_FRNSHD_QTY	NCH Blood Pints Furnished Quantity
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number
CLM_PRCR_RTRN_CD	Claim Pricer Return Code
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code
CLM_OP_TRANS_TYPE_CD	Claim Outpatient Transaction Type Code
CLM_OP_ESRD_MTHD_CD	Claim Outpatient ESRD Method Of Reimbursement Code
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5

Outpatient Fee-for-Service Base Claims

Variable Name	Variable Label
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
OWNG_PRVDR_TIN_NUM	Owning Provider Tax Identification Number (TIN)
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code
CLM_PRCR_VRSN_CD	Claim Pricer Version Code
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider
ESRD_TRTMT_CHS_IND_CD	End-Stage Renal Disease (ESRD) Treatment Choices Demonstration Indicator Code
CLM_OP_PPS_IND	Claim Outpatient Prospective Payment System (OPPS) Indicator
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Fee-for-Service Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Fee-for-Service Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Fee-for-Service Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Fee-for-Service Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
HCPCS_4TH_MDFR_CD	Revenue Center HCPCS Fourth 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
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code
REV_CNTR_DDCTBL_COINSRNC_CD	Revenue Center Deductible Coinsurance Code
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2
RC_PTNT_ADD_ON_PYMT_AMT	Revenue Center Patient/Initial Visit Add-On Payment Amount
TRNSTNL_DRUG_ADD_ON_PYMT_AMT	Transitional Drug Add-On Payment Amount
REV_CNTR_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount

Variable Name	Variable Label
ORDRNG_PHYSN_NPI	Revenue Center Ordering Physician NPI
REV_CNTR_CRA_TPNIES_AMT	Rev Cntr Capital Related Assets Transitnl Add-on Pymnt Amt New and Innovtv Equip
REV_CNTR_THRPY_RDCTN_AMT	Revenue Center Therapy Reduction Amount
REV_CNTR_ADJUST_GRP_CD	Revenue Center Adjustment Group Code
REV_CNTR_ADJUST_RSN_CD	Revenue Center Adjustment Reason Code
REV_CNTR_RA_RMRK_CD	Revenue Center Remittance Advice Remark Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
FI_CLM_ACTN_CD	FI Claim Action 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
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code
OP_PHYSN_UPIN	Claim Operating Physician UPIN Number
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code
OT_PHYSN_UPIN	Claim Other Physician UPIN Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code
CLM_MCO_PD_SW	Claim MCO Paid Switch
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_PPS_IND_CD	Claim PPS Indicator Code
CLM_TOT_CHRG_AMT	Claim Total Charge Amount
CLM_ADMSN_DT	Claim Admission Date
CLM_IP_ADMSN_TYPE_CD	Claim Inpatient Admission Type Code
CLM_SRC_IP_ADMSN_CD	Claim Source Inpatient Admission Code
NCH_PTNT_STATUS_IND_CD	NCH Patient Status Indicator Code
NCH_BENE_IP_DDCTBL_AMT	NCH Beneficiary Inpatient Deductible Amount
NCH_BENE_PTA_COINSRNC_LBLTY_AM	NCH Beneficiary Part A Coinsurance Liability Amount
NCH_BENE_BLOOD_DDCTBL_LBLTY_AM	NCH Beneficiary Blood Deductible Liability Amount
NCH_IP_NCVRD_CHRG_AMT	NCH Inpatient Noncovered Charge
NCH_IP_TOT_DDCTN_AMT	NCH Inpatient Total Deduction Amount
CLM_PPS_CPTL_FSP_AMT	Claim PPS Capital FSP Amount
CLM_PPS_CPTL_OUTLIER_AMT	Claim PPS Capital Outlier Amount
CLM_PPS_CPTL_DSPRPRTNT_SHR_AMT	Claim PPS Capital Disproportionate Share Amount
CLM_PPS_CPTL_IME_AMT	Claim PPS Capital IME Amount
CLM_PPS_CPTL_EXCPTN_AMT	Claim PPS Capital Exception Amount

Variable Name	Variable Label
CLM_PPS_OLD_CPTL_HLD_HRMLS_AMT	Claim PPS Old Capital Hold Harmless Amount
CLM_UTLZTN_DAY_CNT	Claim Utilization Day Count
BENE_TOT_COINSRNC_DAYS_CNT	Beneficiary Total Coinsurance Days Count
CLM_NON_UTLZTN_DAYS_CNT	Claim Non Utilization Days Count
NCH_BLOOD_PNTS_FRNSHD_QTY	NCH Blood Pints Furnished Quantity
NCH_QLFYD_STAY_FROM_DT	NCH Qualified Stay From Date
NCH_QLFYD_STAY_THRU_DT	NCH Qualify Stay Through Date
NCH_VRFD_NCVRD_STAY_FROM_DT	NCH Verified Noncovered Stay From Date
NCH_VRFD_NCVRD_STAY_THRU_DT	NCH Verified Noncovered Stay Through Date
NCH_ACTV_OR_CVRD_LVL_CARE_THRU	NCH Active or Covered Level Care Thru Date
NCH_BENE_MDCR_BNFTS_EXHTD_DT_I	NCH Beneficiary Medicare Benefits Exhausted Date
NCH_BENE_DSCHRG_DT	NCH Beneficiary Discharge Date
CLM_DRG_CD	Claim Diagnosis Related Group Code
ADMTG_DGNS_CD	Claim Admitting Diagnosis Code
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
FST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI

Variable Name	Variable Label
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII
ICD_PRCDR_CD1	Claim Procedure Code I
PRCDR_DT1	Claim Procedure Code I Date
ICD_PRCDR_CD2	Claim Procedure Code II
PRCDR_DT2	Claim Procedure Code II Date
ICD_PRCDR_CD3	Claim Procedure Code III
PRCDR_DT3	Claim Procedure Code III Date
ICD_PRCDR_CD4	Claim Procedure Code IV
PRCDR_DT4	Claim Procedure Code IV Date
ICD_PRCDR_CD5	Claim Procedure Code V
PRCDR_DT5	Claim Procedure Code V Date
ICD_PRCDR_CD6	Claim Procedure Code VI
PRCDR_DT6	Claim Procedure Code VI Date
ICD_PRCDR_CD7	Claim Procedure Code VII
PRCDR_DT7	Claim Procedure Code VII Date
ICD_PRCDR_CD8	Claim Procedure Code VIII
PRCDR_DT8	Claim Procedure Code VIII Date
ICD_PRCDR_CD9	Claim Procedure Code IX
PRCDR_DT9	Claim Procedure Code IX Date
ICD_PRCDR_CD10	Claim Procedure Code X
PRCDR_DT10	Claim Procedure Code X Date
ICD_PRCDR_CD11	Claim Procedure Code XI
PRCDR_DT11	Claim Procedure Code XI Date
ICD_PRCDR_CD12	Claim Procedure Code XII
PRCDR_DT12	Claim Procedure Code XII Date
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT13	Claim Procedure Code XIII Date
ICD_PRCDR_CD14	Claim Procedure Code XIV
PRCDR_DT14	Claim Procedure Code XIV Date
ICD_PRCDR_CD15	Claim Procedure Code XV
PRCDR_DT15	Claim Procedure Code XV Date
ICD_PRCDR_CD16	Claim Procedure Code XVI
PRCDR_DT16	Claim Procedure Code XVI Date
ICD_PRCDR_CD17	Claim Procedure Code XVII
PRCDR_DT17	Claim Procedure Code XVII Date
ICD_PRCDR_CD18	Claim Procedure Code XVIII
PRCDR_DT18	Claim Procedure Code XVIII Date
ICD_PRCDR_CD19	Claim Procedure Code XIX
PRCDR_DT19	Claim Procedure Code XIX Date
ICD_PRCDR_CD20	Claim Procedure Code XX
PRCDR_DT20	Claim Procedure Code XX Date
ICD_PRCDR_CD21	Claim Procedure Code XXI
PRCDR_DT21	Claim Procedure Code XXI Date
ICD_PRCDR_CD22	Claim Procedure Code XXII
PRCDR_DT22	Claim Procedure Code XXII Date
ICD_PRCDR_CD23	Claim Procedure Code XXIII
PRCDR_DT23	Claim Procedure Code XXIII Date
ICD_PRCDR_CD24	Claim Procedure Code XXIV
PRCDR_DT24	Claim Procedure Code XXIV Date
ICD_PRCDR_CD25	Claim Procedure Code XXV
PRCDR_DT25	Claim Procedure Code XXV Date
DOB_DT	Date of Birth from Claim (Date)

Variable Name	Variable Label
SEX_CD	Sex Code From Claims
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
CLM_MDCL_REC	Claim Medical Record Number
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number
CLM_PRCR_RTRN_CD	Claim Pricer Return Code
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code
NCH_PROFNL_CMPNT_CHRG_AMT	NCH Professional Component Charge
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code
CLM_PRCR_VRSN_CD	Claim Pricer Version Code
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Demonstration Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
NCH_CLM_TYPE_CD	NCH Claim Type Code
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence
DEMO_ID_NUM	Claim Demonstration Identification Number
DEMO_INFO_TXT	Claim Demonstration Information Text
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Fee-for-Service Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)
NCHS_CLM_ID	NCHS CLAIM ID
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
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
REV_CNTR_RATE_AMT	Revenue Center Rate 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
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2
REV_CNTR_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Claim Principal 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 13
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code 13 Diagnosis Version Code (ICD-9 or ICD-10)
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City

Variable Name	Variable Label
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
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
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI Number
CLM_PLACE_OF_SRVC_CD	Claim Place of Service Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Carrier (Physician/Supplier Part B) Encounter Line Items

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
PRVDR_NPI	Line Rendering Physician NPI
PRVDR_SPCLTY	Line HCFA Provider Specialty Code
LINE_SRVC_CNT	Line Service Count
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
HCPCS_3RD_MDFR_CD	HCPCS Third Modifier Code
HCPCS_4TH_MDFR_CD	HCPCS Fourth Modifier Code
LINE_NDC_CD	Line National Drug Code
LINE_RX_NUM	Line RX Number
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
PRNCPAL_DGNS_VRSN_CD	Claim Principal 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 13
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code 13 Diagnosis Version Code (ICD-9 or ICD-10)
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City

Variable Name	Variable Label
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
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
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI Number
CLM_PLACE_OF_SRVC_CD	Claim Place of Service Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Durable Medical Equipment (DME) Encounter Line Items

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
PRVDR_NPI	DMERC Line Item Supplier NPI Number
PRVDR_SPCLTY	Line HCFA Provider Specialty Code
LINE_SRVC_CNT	Line Service Count
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
HCPCS_3RD_MDFR_CD	DMERC Line HCPCS Third Modifier Code
HCPCS_4TH_MDFR_CD	DMERC Line HCPCS Fourth Modifier Code
LINE_NDC_CD	Line National Drug Code
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_TXNMY_CD	Claim Attending Physician Taxonomy Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
CLM_ADMSN_DT	Claim Admission Date
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
BENE_DSCHRG_DT	Beneficiary Discharge Date
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX

Variable Name	Variable Label
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
CLM_1ST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
RSN_VISIT_CD1	Reason for Visit Diagnosis Code 1
RSN_VISIT_CD2	Reason for Visit Diagnosis Code 2
RSN_VISIT_CD3	Reason for Visit Diagnosis Code 3
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
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
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Encounter Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Encounter Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Encounter Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Encounter Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Home Health Agency (HHA) Encounter Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
REV_CNTR	Revenue Center Code
REV_CNTR_FROM_DT	Revenue Center From Date
REV_CNTR_THRU_DT	Revenue Center Thru Date
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
REV_CNTR_RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_TXNMY_CD	Claim Attending Physician Taxonomy Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
CLM_ADMSN_DT	Claim Admission Date
CLM_IP_ADMSN_TYPE_CD	Claim Inpatient Admission Type Code
CLM_SRC_IP_ADMSN_CD	Claim Source Inpatient Admission Code
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_DAY_CNT	Day Count (Length of Stay)
BENE_DSCHRG_DT	Beneficiary Discharge Date
CLM_DRG_CD	Claim Diagnosis Related Group Code
DRVD_DRG_CD	Derived MS-Diagnosis Related Group Code (MS-DRG)
ADMTG_DGNS_CD	Claim Admitting Diagnosis Code
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV

Variable Name	Variable Label
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
CLM_POA_IND_SW1	Claim Diagnosis Code I Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW2	Claim Diagnosis Code II Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW3	Claim Diagnosis Code III Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW4	Claim Diagnosis Code IV Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW5	Claim Diagnosis Code V Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW6	Claim Diagnosis Code VI Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW7	Claim Diagnosis Code VII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW8	Claim Diagnosis Code VIII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW9	Claim Diagnosis Code IX Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW10	Claim Diagnosis Code X Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW11	Claim Diagnosis Code XI Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW12	Claim Diagnosis Code XII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW13	Claim Diagnosis Code XIII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW14	Claim Diagnosis Code XIV Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW15	Claim Diagnosis Code XV Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW16	Claim Diagnosis Code XVI Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW17	Claim Diagnosis Code XVII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW18	Claim Diagnosis Code XVIII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW19	Claim Diagnosis Code XIX Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW20	Claim Diagnosis Code XX Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW21	Claim Diagnosis Code XXI Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW22	Claim Diagnosis Code XXII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW23	Claim Diagnosis Code XXIII Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW24	Claim Diagnosis Code XXIV Diagnosis Present on Admission Indicator Code
CLM_POA_IND_SW25	Claim Diagnosis Code XXV Diagnosis Present on Admission Indicator Code
CLM_1ST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
CLM_E_POA_IND_SW1	Claim Diagnosis E Code I Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW2	Claim Diagnosis E Code II Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW3	Claim Diagnosis E Code III Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW4	Claim Diagnosis E Code IV Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW5	Claim Diagnosis E Code V Diagnosis Present on Admission Indicator Code

Variable Name	Variable Label
CLM_E_POA_IND_SW6	Claim Diagnosis E Code VI Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW7	Claim Diagnosis E Code VII Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW8	Claim Diagnosis E Code VIII Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW9	Claim Diagnosis E Code IX Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW10	Claim Diagnosis E Code X Diagnosis Present on Admission Indicator Code
ICD_PRCDR_CD1	Claim Procedure Code I
ICD_PRCDR_CD2	Claim Procedure Code II
ICD_PRCDR_CD3	Claim Procedure Code III
ICD_PRCDR_CD4	Claim Procedure Code IV
ICD_PRCDR_CD5	Claim Procedure Code V
ICD_PRCDR_CD6	Claim Procedure Code VI
ICD_PRCDR_CD7	Claim Procedure Code VII
ICD_PRCDR_CD8	Claim Procedure Code VIII
ICD_PRCDR_CD9	Claim Procedure Code IX
ICD_PRCDR_CD10	Claim Procedure Code X
ICD_PRCDR_CD11	Claim Procedure Code XI
ICD_PRCDR_CD12	Claim Procedure Code XII
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT1	Claim Procedure Code I Date
PRCDR_DT2	Claim Procedure Code II Date
PRCDR_DT3	Claim Procedure Code III Date
PRCDR_DT4	Claim Procedure Code IV Date
PRCDR_DT5	Claim Procedure Code V Date
PRCDR_DT6	Claim Procedure Code VI Date
PRCDR_DT7	Claim Procedure Code VII Date
PRCDR_DT8	Claim Procedure Code VIII Date
PRCDR_DT9	Claim Procedure Code IX Date
PRCDR_DT10	Claim Procedure Code X Date
PRCDR_DT11	Claim Procedure Code XI Date
PRCDR_DT12	Claim Procedure Code XII Date
PRCDR_DT13	Claim Procedure Code XIII Date
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
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
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Encounter Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Encounter Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Encounter Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Encounter Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Inpatient Encounter Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
REV_CNTR	Revenue Center Code
REV_CNTR_FROM_DT	Revenue Center From Date
REV_CNTR_THRU_DT	Revenue Center Thru Date
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
REV_CNTR_RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_TXNMY_CD	Claim Attending Physician Taxonomy Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI

Variable Name	Variable Label
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
CLM_1ST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
RSN_VISIT_CD1	Reason for Visit Diagnosis Code I
RSN_VISIT_CD2	Reason for Visit Diagnosis Code II
RSN_VISIT_CD3	Reason for Visit Diagnosis Code III
ICD_PRCDR_CD1	Claim Procedure Code I
ICD_PRCDR_CD2	Claim Procedure Code II
ICD_PRCDR_CD3	Claim Procedure Code III
ICD_PRCDR_CD4	Claim Procedure Code IV
ICD_PRCDR_CD5	Claim Procedure Code V
ICD_PRCDR_CD6	Claim Procedure Code VI
ICD_PRCDR_CD7	Claim Procedure Code VII
ICD_PRCDR_CD8	Claim Procedure Code VIII
ICD_PRCDR_CD9	Claim Procedure Code IX
ICD_PRCDR_CD10	Claim Procedure Code X
ICD_PRCDR_CD11	Claim Procedure Code XI
ICD_PRCDR_CD12	Claim Procedure Code XII
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT1	Claim Procedure Code I Date
PRCDR_DT2	Claim Procedure Code II Date
PRCDR_DT3	Claim Procedure Code III Date
PRCDR_DT4	Claim Procedure Code IV Date
PRCDR_DT5	Claim Procedure Code V Date
PRCDR_DT6	Claim Procedure Code VI Date
PRCDR_DT7	Claim Procedure Code VII Date
PRCDR_DT8	Claim Procedure Code VIII Date
PRCDR_DT9	Claim Procedure Code IX Date
PRCDR_DT10	Claim Procedure Code X Date
PRCDR_DT11	Claim Procedure Code XI Date
PRCDR_DT12	Claim Procedure Code XII Date
PRCDR_DT13	Claim Procedure Code XIII Date
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
BENE_CNTY_CD	County Code from Claim (SSA)

Outpatient Encounter Base Claims

Variable Name	Variable Label
BENE_STATE_CD	State Code from Claim (SSA)
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Encounter Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Encounter Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Encounter Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Encounter Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Outpatient Encounter Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
REV_CNTR	Revenue Center Code
REV_CNTR_FROM_DT	Revenue Center From Date
REV_CNTR_THRU_DT	Revenue Center Thru Date
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
HCPCS_4TH_MDFR_CD	Revenue Center HCPCS Fourth Modifier Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
REV_CNTR_RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_FROM_DT	Claim From Date
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
SRVC_MONTH	Service Month
CLM_CHRT_RVW_SW	Claim Chart Review Switch
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number
CLM_FINL_ACTN_IND	Claim Final Action Indicator
CLM_LTST_CLM_IND	Latest Claim Indicator
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date
CLM_RCPT_DT	Claim Receipt Date
CLM_FAC_TYPE_CD	Claim Facility Type Code
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code
CLM_FREQ_CD	Claim Frequency Code
CNTRCT_NUM	Medicare Part C Contract Number
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number
CLM_MDCL_REC	Claim Medical Record Number
ORG_NPI	Organization NPI Number
ORG_TXNMY_CD	Organization Taxonomy Code
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI
AT_PHYSN_NPI	Claim Attending Physician NPI Number
AT_PHYSN_TXNMY_CD	Claim Attending Physician Taxonomy Code
OP_PHYSN_NPI	Claim Operating Physician NPI Number
OT_PHYSN_NPI	Claim Other Physician NPI Number
CLM_ADMSN_DT	Claim Admission Date
CLM_IP_ADMSN_TYPE_CD	Claim Inpatient Admission Type Code
CLM_SRC_IP_ADMSN_CD	Claim Source Inpatient Admission Code
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code
CLM_DAY_CNT	Day Count (Length of Stay)
BENE_DSCHRG_DT	Beneficiary Discharge Date
CLM_DRG_CD	Claim Diagnosis Related Group Code
DRVD_DRG_CD	Derived MS-Diagnosis Related Group Code (MS-DRG)
ADMTG_DGNS_CD	Claim Admitting Diagnosis Code
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code
ICD_DGNS_CD1	Claim Diagnosis Code I
ICD_DGNS_CD2	Claim Diagnosis Code II
ICD_DGNS_CD3	Claim Diagnosis Code III
ICD_DGNS_CD4	Claim Diagnosis Code IV
ICD_DGNS_CD5	Claim Diagnosis Code V
ICD_DGNS_CD6	Claim Diagnosis Code VI
ICD_DGNS_CD7	Claim Diagnosis Code VII
ICD_DGNS_CD8	Claim Diagnosis Code VIII
ICD_DGNS_CD9	Claim Diagnosis Code IX
ICD_DGNS_CD10	Claim Diagnosis Code X
ICD_DGNS_CD11	Claim Diagnosis Code XI
ICD_DGNS_CD12	Claim Diagnosis Code XII
ICD_DGNS_CD13	Claim Diagnosis Code XIII
ICD_DGNS_CD14	Claim Diagnosis Code XIV

Variable Name	Variable Label
ICD_DGNS_CD15	Claim Diagnosis Code XV
ICD_DGNS_CD16	Claim Diagnosis Code XVI
ICD_DGNS_CD17	Claim Diagnosis Code XVII
ICD_DGNS_CD18	Claim Diagnosis Code XVIII
ICD_DGNS_CD19	Claim Diagnosis Code XIX
ICD_DGNS_CD20	Claim Diagnosis Code XX
ICD_DGNS_CD21	Claim Diagnosis Code XXI
ICD_DGNS_CD22	Claim Diagnosis Code XXII
ICD_DGNS_CD23	Claim Diagnosis Code XXIII
ICD_DGNS_CD24	Claim Diagnosis Code XXIV
ICD_DGNS_CD25	Claim Diagnosis Code XXV
CLM_POA_IND_SW1	Claim Diagnosis Code 1 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW2	Claim Diagnosis Code 2 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW3	Claim Diagnosis Code 3 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW4	Claim Diagnosis Code 4 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW5	Claim Diagnosis Code 5 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW6	Claim Diagnosis Code 6 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW7	Claim Diagnosis Code 7 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW8	Claim Diagnosis Code 8 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW9	Claim Diagnosis Code 9 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW10	Claim Diagnosis Code 10 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW11	Claim Diagnosis Code 11 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW12	Claim Diagnosis Code 12 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW13	Claim Diagnosis Code 13 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW14	Claim Diagnosis Code 14 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW15	Claim Diagnosis Code 15 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW16	Claim Diagnosis Code 16 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW17	Claim Diagnosis Code 17 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW18	Claim Diagnosis Code 18 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW19	Claim Diagnosis Code 19 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW20	Claim Diagnosis Code 20 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW21	Claim Diagnosis Code 21 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW22	Claim Diagnosis Code 22 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW23	Claim Diagnosis Code 23 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW24	Claim Diagnosis Code 24 Diagnosis Present on Admission (POA) Indicator Code
CLM_POA_IND_SW25	Claim Diagnosis Code 25 Diagnosis Present on Admission (POA) Indicator Code
CLM_1ST_DGNS_E_CD	First Claim Diagnosis E Code
ICD_DGNS_E_CD1	Claim Diagnosis E Code I
ICD_DGNS_E_CD2	Claim Diagnosis E Code II
ICD_DGNS_E_CD3	Claim Diagnosis E Code III
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV
ICD_DGNS_E_CD5	Claim Diagnosis E Code V
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX
ICD_DGNS_E_CD10	Claim Diagnosis E Code X
CLM_E_POA_IND_SW1	Claim Diagnosis E Code 1 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW2	Claim Diagnosis E Code 2 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW3	Claim Diagnosis E Code 3 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW4	Claim Diagnosis E Code 4 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW5	Claim Diagnosis E Code 5 Diagnosis Present on Admission Indicator Code

Variable Name	Variable Label
CLM_E_POA_IND_SW6	Claim Diagnosis E Code 6 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW7	Claim Diagnosis E Code 7 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW8	Claim Diagnosis E Code 8 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW9	Claim Diagnosis E Code 9 Diagnosis Present on Admission Indicator Code
CLM_E_POA_IND_SW10	Claim Diagnosis E Code 10 Diagnosis Present on Admission Indicator Code
ICD_PRCDR_CD1	Claim Procedure Code I
ICD_PRCDR_CD2	Claim Procedure Code II
ICD_PRCDR_CD3	Claim Procedure Code III
ICD_PRCDR_CD4	Claim Procedure Code IV
ICD_PRCDR_CD5	Claim Procedure Code V
ICD_PRCDR_CD6	Claim Procedure Code VI
ICD_PRCDR_CD7	Claim Procedure Code VII
ICD_PRCDR_CD8	Claim Procedure Code VIII
ICD_PRCDR_CD9	Claim Procedure Code IX
ICD_PRCDR_CD10	Claim Procedure Code X
ICD_PRCDR_CD11	Claim Procedure Code XI
ICD_PRCDR_CD12	Claim Procedure Code XII
ICD_PRCDR_CD13	Claim Procedure Code XIII
PRCDR_DT1	Claim Procedure Code I Date
PRCDR_DT2	Claim Procedure Code II Date
PRCDR_DT3	Claim Procedure Code III Date
PRCDR_DT4	Claim Procedure Code IV Date
PRCDR_DT5	Claim Procedure Code V Date
PRCDR_DT6	Claim Procedure Code VI Date
PRCDR_DT7	Claim Procedure Code VII Date
PRCDR_DT8	Claim Procedure Code VIII Date
PRCDR_DT9	Claim Procedure Code IX Date
PRCDR_DT10	Claim Procedure Code X Date
PRCDR_DT11	Claim Procedure Code XI Date
PRCDR_DT12	Claim Procedure Code XII Date
PRCDR_DT13	Claim Procedure Code XIII Date
CLM_OBSLT_DT	Claim Obsolete Date
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code
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
SEX_CD	Sex Code From Claims
BENE_RACE_CD	Race Code from Claim
DOB_DT	Date of Birth from Claim (Date)
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code
TAX_NUM	Provider Tax Number
BENE_STATE	Beneficiary State Postal Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Encounter Condition Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence
CLM_RLT_COND_CD	Claim Related Condition Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Encounter Occurrence Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Encounter Span Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	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
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Encounter Value Codes

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence
CLM_VAL_CD	Claim Value Code
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE

Skilled Nursing Facility (SNF) Encounter Revenue Center

Variable Name	Variable Label
PUBLICID	PUBLIC USE ID
SEQN	SAMPLE SEQUENCE NUMBER (PUBLIC ID)
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY
CLM_TYPE_CD	Claim Type Code
CLM_LINE_NUM	Claim Line Number
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)
REV_CNTR	Revenue Center Code
REV_CNTR_FROM_DT	Revenue Center From Date
REV_CNTR_THRU_DT	Revenue Center Thru Date
REV_CNTR_UNIT_CNT	Revenue Center Unit Count
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
HCPCS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code
REV_CNTR_RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI
LINE_LTST_CLM_IND	Line Latest Claim Indicator
LINE_NUM_ORIG	Original Claim Line Number
SURVEY	SURVEY NAME AND SURVEY YEAR/CYCLE