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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
**Number of Variables: 69**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
SURVEY	Survey Name	Base	Char	
PATIENT_ID	NHCS Patient ID	Base	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Base	Char	Public-use identifier for NHIS participants. For information on how to create PUBLICID from the public-use data, please see note in the Methodology and Analytic Considerations report.
SEQN	NHANES Respondent Sequence Number	Base	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Base	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Base	Num	Masked version of the CCW unique claim identifier (CLM_ID) assigned by NCHS for the linked files. This variable is necessary to merge FFS claims information across files.
NCH_NEAR_LINE_REC_IDENT_CD	NCH Near Line Record Identification Code	Base	Char	
NCH_CLM_TYPE_CD	NCH Claim Type Code	Base	Char	
CLM_FROM_DT	Claim From Date	Base	Num	Date provided in SAS date (numeric) format.
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Base	Num	Date provided in SAS date (numeric) format.
NCH_WKLY_PROC_DT	NCH Weekly Claim Processing Date	Base	Num	Date provided in SAS date (numeric) format.
CARR_CLM_ENTRY_CD	Carrier Claim Entry Code	Base	Char	
CLM_DISP_CD	Claim Disposition Code	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
**Number of Variables: 69**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
CARR_NUM	Carrier Number	Base	Char	
CARR_CLM_PMT_DNL_CD	Carrier Claim Payment Denial Code	Base	Char	Payment, in dollars.
CLM_PMT_AMT	Claim Payment Amount	Base	Num	Payment/Charged Amount, in dollars.
CARR_CLM_PRMRY_PYR_PD_AMT	Carrier Claim Primary Payer Paid Amount	Base	Num	Payment/Charged Amount, in dollars.
RFR_PHYSN_UPIN	Carrier Claim Referring Physician UPIN Number	Base	Char	
RFR_PHYSN_NPI	Carrier Claim Referring Physician NPI Number	Base	Char	
CARR_CLM_PRVDR_ASGNMT_IND_SW	Carrier Claim Provider Assignment Indicator Switch	Base	Char	
NCH_CLM_PRVDR_PMT_AMT	NCH Claim Provider Payment Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_CLM_BENE_PMT_AMT	NCH Claim Beneficiary Payment Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_CARR_CLM_SBMTD_CHRG_AMT	NCH Carrier Claim Submitted Charge Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_CARR_CLM_ALOWD_AMT	NCH Carrier Claim Allowed Charge Amount	Base	Num	Payment/Charged Amount, in dollars.
CARR_CLM_CASH_DDCTBL_APLD_AMT	Carrier Claim Cash Deductible Applied Amount	Base	Num	Payment/Charged Amount, in dollars.
CARR_CLM_HCPCS_YR_CD	Carrier Claim HCPCS Year Code	Base	Char	
CARR_CLM_RFRNG_PIN_NUM	Carrier Claim Referring PIN Number	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
**Number of Variables: 69**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code	Base	Char	
PRNCPAL_DGNS_VRSN_CD	Claim Principal Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD1	Claim Diagnosis Code I	Base	Char	
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD2	Claim Diagnosis Code II	Base	Char	
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD3	Claim Diagnosis Code III	Base	Char	
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD4	Claim Diagnosis Code IV	Base	Char	
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD5	Claim Diagnosis Code V	Base	Char	
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD6	Claim Diagnosis Code VI	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
**Number of Variables: 69**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD7	Claim Diagnosis Code VII	Base	Char	
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD8	Claim Diagnosis Code VIII	Base	Char	
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD9	Claim Diagnosis Code IX	Base	Char	
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD10	Claim Diagnosis Code X	Base	Char	
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD11	Claim Diagnosis Code XI	Base	Char	
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD12	Claim Diagnosis Code XII	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
**Number of Variables: 69**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
CLM_CLNCL_TRIL_NUM	Clinical Trial Number	Base	Char	
DOB_DT	Date of Birth from Claim (Date)	Base	Num	Date provided in SAS date (numeric) format.
SEX_CD	Sex Code From Claims	Base	Char	
BENE_RACE_CD	Race Code from Claim	Base	Char	
BENE_CNTY_CD	County Code from Claim (SSA)	Base	Char	
BENE_STATE_CD	State Code from Claim (SSA)	Base	Char	
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim	Base	Char	
CLM_BENE_PD_AMT	Carrier Claim Beneficiary Paid Amount	Base	Num	Payment/Charged Amount, in dollars.
CPO_PRVDR_NUM	Care Plan Oversight (CPO) Provider Number	Base	Char	
CPO_ORG_NPI_NUM	CPO Organization NPI Number	Base	Char	
CARR_CLM_BLG_NPI_NUM	Carrier Claim Billing NPI Number	Base	Char	
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number	Base	Char	
CARR_CLM_SOS_NPI_NUM	Carrier Claim Site of Service NPI Number	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Claims**  
***Number of Variables: 69***

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only	Base	Char	
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code	Base	Char	
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code	Base	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
SURVEY	Survey Name	Line Items	Char	
PATIENT_ID	NHCS Patient ID	Line Items	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Line Items	Char	Public-use identifier for NHIS participants. For information on how to create PUBLICID from the public-use data, please see note in the Methodology and Analytic Considerations report.
SEQN	NHANES Respondent Sequence Number	Line Items	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Line Items	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Line Items	Num	Masked version of the CCW unique claim identifier (CLM_ID) assigned by NCHS for the linked files. This variable is necessary to merge FFS claims information across files.
LINE_NUM	Claim Line Number	Line Items	Num	
NCH_CLM_TYPE_CD	NCH Claim Type Code	Line Items	Char	
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Line Items	Num	Date provided in SAS date (numeric) format.
CARR_PRFRNG_PIN_NUM	Carrier Line Claim Performing PIN Number	Line Items	Char	
PRF_PHYSN_UPIN	Carrier Line Performing UPIN Number	Line Items	Char	
PRF_PHYSN_NPI	Carrier Line Performing NPI Number	Line Items	Char	
ORG_NPI_NUM	Carrier Line Performing Group NPI Number	Line Items	Char	
CARR_LINE_PRVDR_TYPE_CD	Carrier Line Provider Type Code	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**



**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
TAX_NUM	Line Provider Tax Number	Line Items	Char	
PRVDR_STATE_CD	Line NCH Provider State Code	Line Items	Char	
PRVDR_ZIP	Carrier Line Performing Provider ZIP Code	Line Items	Char	
PRVDR_SPCLTY	Line HCFA Provider Specialty Code	Line Items	Char	
PRTCPTNG_IND_CD	Line Provider Participating Indicator Code	Line Items	Char	
CARR_LINE_RDCD_PMT_PHYS_ASTN_C	Carrier Line Reduced Payment Physician Assistant Code	Line Items	Char	Payment, in dollars.
LINE_SRVC_CNT	Line Service Count	Line Items	Num	
LINE_CMS_TYPE_SRVC_CD	Line HCFA Type Service Code	Line Items	Char	
LINE_PLACE_OF_SRVC_CD	Line Place Of Service Code	Line Items	Char	
CARR_LINE_PRCNG_LCLTY_CD	Carrier Line Pricing Locality Code	Line Items	Char	
LINE_1ST_EXPNS_DT	Line First Expense Date	Line Items	Num	Date provided in SAS date (numeric) format.
LINE_LAST_EXPNS_DT	Line Last Expense Date	Line Items	Num	Date provided in SAS date (numeric) format.
HCPCS_CD	Line Healthcare Common Procedure Coding System	Line Items	Char	
HCPCS_1ST_MDFR_CD	Line HCPCS Initial Modifier Code	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
HPCPS_2ND_MDFR_CD	Line HCPCS Second Modifier Code	Line Items	Char	
BETOS_CD	Line NCH BETOS Code	Line Items	Char	
LINE_NCH_PMT_AMT	Line NCH Payment Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_BENE_PMT_AMT	Line Beneficiary Payment Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_PRVDR_PMT_AMT	Line Provider Payment Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_BENE_PTB_DDCTBL_AMT	Line Beneficiary Part B Deductible Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_BENE_PRMRY_PYR_CD	Line Beneficiary Primary Payer Code	Line Items	Char	
LINE_BENE_PRMRY_PYR_PD_AMT	Line Beneficiary Primary Payer Paid Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_COINSRNC_AMT	Line Coinsurance Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_SBMTD_CHRG_AMT	Line Submitted Charge Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_ALOWD_CHRG_AMT	Line Allowed Charge Amount	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_PRCSG_IND_CD	Line Processing Indicator Code	Line Items	Char	
LINE_PMT_80_100_CD	Line Payment 80%/100% Code	Line Items	Char	Payment, in dollars.
LINE_SERVICE_DEDUCTIBLE	Line Service Deductible Indicator Switch	Line Items	Char	
CARR_LINE_MTUS_CNT	Carrier Line Miles/Time/Units/Services Count	Line Items	Num	

**For additional information on variables in FFS claims files, please see website:**  
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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
CARR_LINE_MTUS_CD	Carrier Line Miles/Time/Units/Services Indicator Code	Line Items	Char	
LINE_ICD_DGNS_CD	Line Diagnosis Code Code	Line Items	Char	
LINE_ICD_DGNS_VRSN_CD	Line Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)	Line Items	Char	
HPSA_SCRCTY_IND_CD	Carrier Line HPSA/Scarcity Indicator Code	Line Items	Char	
CARR_LINE_RX_NUM	Carrier Line RX Number	Line Items	Char	
LINE_HCT_HGB_RSLT_NUM	Hematocrit/Hemoglobin Test Results	Line Items	Num	
LINE_HCT_HGB_TYPE_CD	Hematocrit/Hemoglobin Test Type code	Line Items	Char	
LINE_NDC_CD	Line National Drug Code	Line Items	Char	
CARR_LINE_CLIA_LAB_NUM	Clinical Laboratory Improvement Amendments monitored laboratory number	Line Items	Char	
CARR_LINE_ANSTHSA_UNIT_CNT	Carrier Line Anesthesia Unit Count	Line Items	Num	Number of units (count)
CARR_LINE_CL_CHRG_AMT	Carrier Line Clinical Lab Charge Amount	Line Items	Num	Payment/Charged Amount, in dollars.
PHYSN_ZIP_CD	Line Place Of Service (POS) Physician Zip Code	Line Items	Char	
LINE_OTHR_APLD_IND_CD1	Line Other Applied Indicator Code 1	Line Items	Char	
LINE_OTHR_APLD_IND_CD2	Line Other Applied Indicator Code 2	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
LINE_OTHR_APLD_IND_CD3	Line Other Applied Indicator Code 3	Line Items	Char	
LINE_OTHR_APLD_IND_CD4	Line Other Applied Indicator Code 4	Line Items	Char	
LINE_OTHR_APLD_IND_CD5	Line Other Applied Indicator Code 5	Line Items	Char	
LINE_OTHR_APLD_IND_CD6	Line Other Applied Indicator Code 6	Line Items	Char	
LINE_OTHR_APLD_IND_CD7	Line Other Applied Indicator Code 7	Line Items	Char	
LINE_OTHR_APLD_AMT1	Line Other Applied Amount 1	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT2	Line Other Applied Amount 2	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT3	Line Other Applied Amount 3	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT4	Line Other Applied Amount 4	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT5	Line Other Applied Amount 5	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT6	Line Other Applied Amount 6	Line Items	Num	Payment/Charged Amount, in dollars.
LINE_OTHR_APLD_AMT7	Line Other Applied Amount 7	Line Items	Num	Payment/Charged Amount, in dollars.
THRPY_CAP_IND_CD1	Line Therapy Cap Indicator Code 1	Line Items	Char	
THRPY_CAP_IND_CD2	Line Therapy Cap Indicator Code 2	Line Items	Char	
THRPY_CAP_IND_CD3	Line Therapy Cap Indicator Code 3	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
**Number of Variables: 88**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
THRPY_CAP_IND_CD4	Line Therapy Cap Indicator Code 4	Line Items	Char	
THRPY_CAP_IND_CD5	Line Therapy Cap Indicator Code 5	Line Items	Char	
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1	Line Items	Char	
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2	Line Items	Char	
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3	Line Items	Char	
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4	Line Items	Char	
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5	Line Items	Char	
CARR_LINE_MDPP_NPI_NUM	Carrier Line Medicare Diabetes Prevention Program (MDPP) NPI Number	Line Items	Char	
LINE_RSDL_PYMT_IND_CD	Line Residual Payment Indicator Code	Line Items	Char	
LINE_RP_IND_CD	Line Representative Payee (RP) Indicator Code	Line Items	Char	
LINE_PRVDR_VLDTN_TYPE_CD	Line Provider Validation Type Code	Line Items	Char	
LINE_ADJUST_GRP_CD	Line Adjustment Group Code	Line Items	Char	
LINE_ADJUST_RSN_CD	Line Adjustment Reason Code	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Line Items**  
***Number of Variables: 88***

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
LINE_RA_RMRK_CD	Line Remittance Advice Remark Code	Line Items	Char	
LINE_POINT_OF_PCKP_ZIP_CD	Line Point of Pickup Zip Code	Line Items	Char	
LINE_DROP_OFF_ZIP_CD	Line Drop Off Zip Code	Line Items	Char	

**For additional information on variables in FFS claims files, please see website:**  
**<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>**

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Fee-For-Service Demonstration Codes**  
**Number of Variables: 10**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR FFS File Type	VAR Type	Value Description
SURVEY	Survey Name	Demo Code	Char	
PATIENT_ID	NHCS Patient ID	Demo Code	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Demo Code	Char	Public-use identifier for NHIS participants. For information on how to create PUBLICID from the public-use data, please see note in the Methodology and Analytic Considerations report.
SEQN	NHANES Respondent Sequence Number	Demo Code	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Demo Code	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Demo Code	Num	Masked version of the CCW unique claim identifier (CLM_ID) assigned by NCHS for the linked files. This variable is necessary to merge FFS claims information across files.
NCH_CLM_TYPE_CD	NCH Claim Type Code	Demo Code	Char	
DEMO_ID_SQNC_NUM	Claim Demonstration Sequence	Demo Code	Num	
DEMO_ID_NUM	Claim Demonstration Identification Number	Demo Code	Char	
DEMO_INFO_TXT	Claim Demonstration Information Text	Demo Code	Char	

**For additional information on variables in FFS claims files, please see website:**  
<https://www2.ccwdata.org/documents/10280/19022436/codebook-ffs-claims.pdf>

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
**Number of Variables: 70**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
SURVEY	Survey Name	Base	Char	
PATIENT_ID	NHCS Patient ID	Base	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Base	Char	Public-use identifier for NHIS participants. For information on how to create PUBLICID from the public-use data, please see note in the Methodology and Analytic Considerations report.
SEQN	NHANES Respondent Sequence Number	Base	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)	Base	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_ENC_JOIN_KEY	NCHS Encounter Join Key	Base	Num	Masked version of the CCW unique encounter join key (ENC_JOIN_KEY) assigned by NCHS for the linked files. This variable is necessary to merge MA encounter information across files.
CLM_TYPE_CD	Claim Type Code	Base	Char	
CLM_FROM_DT	Claim From Date	Base	Num	Date provided in SAS date (numeric) format.
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Base	Num	Date provided in SAS date (numeric) format.
SRVC_MONTH	Service Month	Base	Num	Date provided in SAS date (numeric) format.
CLM_CHRT_RVW_SW	Claim Chart Review Switch	Base	Char	
NCHS_CLM_CNTL_NUM	NCHS Claim Control Number	Base	Num	Masked version of the claim control number (CLM_CNTL_NUM) assigned by NCHS for the linked files.
NCHS_CLM_ORIG_CNTL_NUM	NCHS Claim Original Control Number	Base	Num	Masked version of the original claim control number (CLM_ORIG_CNTL_NUM) assigned by NCHS for the linked files.

**For additional information on variables in encounter files, please see website:**  
<https://www2.ccwdata.org/documents/10280/19022436/codebook-encounter-records.pdf>



**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
**Number of Variables: 70**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
CLM_FINL_ACTN_IND	Claim Final Action Indicator	Base	Char	
CLM_LTST_CLM_IND	Latest Claim Indicator	Base	Char	
EDPS_CREATE_DT	Encounter Data Processing System (EDPS) Create Date	Base	Num	Date provided in SAS date (numeric) format.
CLM_RCPT_DT	Claim Receipt Date	Base	Num	Date provided in SAS date (numeric) format.
CLM_FREQ_CD	Claim Frequency Code	Base	Char	
CNTRCT_NUM	Medicare Part C Contract Number	Base	Char	
CNTRCT_PBP_NUM	Medicare Part C Plan Benefit Package (PBP) Number	Base	Char	
CLM_MDCL_REC	Claim Medical Record Number	Base	Char	
ORG_NPI	Organization NPI Number	Base	Char	
ORG_TXNMY_CD	Organization Taxonomy Code	Base	Char	
RFRG_PHYSN_NPI	Claim Referring Physician NPI Number	Base	Char	
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code	Base	Char	
PRNCPAL_DGNS_VRSN_CD	Claim Principal Diagnosis Code Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD1	Claim Diagnosis Code I	Base	Char	

**For additional information on variables in encounter files, please see website:**  
<https://www2.ccwdata.org/documents/10280/19022436/codebook-encounter-records.pdf>

**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
**Number of Variables: 70**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
ICD_DGNS_VRSN_CD1	Claim Diagnosis Code I Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD2	Claim Diagnosis Code II	Base	Char	
ICD_DGNS_VRSN_CD2	Claim Diagnosis Code II Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD3	Claim Diagnosis Code III	Base	Char	
ICD_DGNS_VRSN_CD3	Claim Diagnosis Code III Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD4	Claim Diagnosis Code IV	Base	Char	
ICD_DGNS_VRSN_CD4	Claim Diagnosis Code IV Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD5	Claim Diagnosis Code V	Base	Char	
ICD_DGNS_VRSN_CD5	Claim Diagnosis Code V Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD6	Claim Diagnosis Code VI	Base	Char	
ICD_DGNS_VRSN_CD6	Claim Diagnosis Code VI Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD7	Claim Diagnosis Code VII	Base	Char	
ICD_DGNS_VRSN_CD7	Claim Diagnosis Code VII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	

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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
**Number of Variables: 70**

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Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
ICD_DGNS_CD8	Claim Diagnosis Code VIII	Base	Char	
ICD_DGNS_VRSN_CD8	Claim Diagnosis Code VIII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD9	Claim Diagnosis Code IX	Base	Char	
ICD_DGNS_VRSN_CD9	Claim Diagnosis Code IX Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD10	Claim Diagnosis Code X	Base	Char	
ICD_DGNS_VRSN_CD10	Claim Diagnosis Code X Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD11	Claim Diagnosis Code XI	Base	Char	
ICD_DGNS_VRSN_CD11	Claim Diagnosis Code XI Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD12	Claim Diagnosis Code XII	Base	Char	
ICD_DGNS_VRSN_CD12	Claim Diagnosis Code XII Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
ICD_DGNS_CD13	Claim Diagnosis Code 13	Base	Char	
ICD_DGNS_VRSN_CD13	Claim Diagnosis Code 13 Diagnosis Version Code (ICD-9 or ICD-10)	Base	Char	
CLM_OBSLT_DT	Claim Obsolete Date	Base	Num	Date provided in SAS date (numeric) format.

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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
**Number of Variables: 70**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
CLM_BPRVDR_CITY_NAME	Billing Provider Address - City	Base	Char	
CLM_BPRVDR_USPS_STATE_CD	Billing Provider Address - USPS State Code	Base	Char	
CLM_BPRVDR_ADR_ZIP_CD	Billing Provider Address - ZIP Code	Base	Char	
CLM_SUBSCR_CITY_NAME	Medicare Subscriber Address - City	Base	Char	
CLM_SUBSCR_USPS_STATE_CD	Medicare Subscriber Address - USPS State Code	Base	Char	
CLM_SUBSCR_ADR_ZIP_CD	Medicare Subscriber Address - ZIP Code	Base	Char	
BENE_CNTY_CD	County Code from Claim (SSA)	Base	Char	
BENE_STATE_CD	State Code from Claim (SSA)	Base	Char	
BENE_MLG_CNTCT_ZIP_CD	Zip Code of Residence from Claim	Base	Char	
SEX_CD	Sex Code From Claims	Base	Char	
BENE_RACE_CD	Race Code from Claim	Base	Char	
DOB_DT	Date of Birth from Claim (Date)	Base	Num	Date provided in SAS date (numeric) format.
BENE_MDCR_STUS_CD	Beneficiary Medicare Status Code	Base	Char	
TAX_NUM	Provider Tax Number	Base	Char	

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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Claims**  
***Number of Variables: 70***

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
BENE_STATE	Beneficiary State Postal Code	Base	Char	
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI Number	Base	Char	
CLM_PLACE_OF_SRVC_CD	Claim Place of Service Code	Base	Char	

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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Line Items**  
**Number of Variables: 24**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
SURVEY	Survey Name	Line Items	Char	
PATIENT_ID	NHCS Patient ID	Line Items	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Line Items	Char	Public-use identifier for NHIS participants. For information on how to create PUBLICID from the public-use data, please see note in the Methodology and Analytic Considerations report.
SEQN	NHANES Respondent Sequence Number	Line Items	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)	Line Items	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_ENC_JOIN_KEY	NCHS Encounter Join Key	Line Items	Num	Masked version of the CCW unique encounter join key (ENC_JOIN_KEY) assigned by NCHS for the linked files. This variable is necessary to merge MA encounter information across files.
CLM_TYPE_CD	Claim Type Code	Line Items	Char	
CLM_LINE_NUM	Claim Line Number	Line Items	Num	
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Line Items	Num	Date provided in SAS date (numeric) format.
PRVDR_NPI	Line Rendering Physician NPI	Line Items	Char	
PRVDR_SPCLTY	Line HCFA Provider Specialty Code	Line Items	Char	
LINE_SRVC_CNT	Line Service Count	Line Items	Num	
LINE_PLACE_OF_SRVC_CD	Line Place Of Service Code	Line Items	Char	
LINE_1ST_EXPNS_DT	Line First Expense Date	Line Items	Num	Date provided in SAS date (numeric) format.

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**Linked NCHS - 2019–2021 CMS Medicare Data**  
**Carrier (Physician/Supplier Part B) Encounter Line Items**  
**Number of Variables: 24**

**Document Version Date: September 25, 2025**

Variable Name	Variable (VAR) Label	CARR ENC File Type	VAR Type	Value Description
LINE_LAST_EXPNS_DT	Line Last Expense Date	Line Items	Num	Date provided in SAS date (numeric) format.
HCPCS_CD	Line Healthcare Common Procedure Coding System	Line Items	Char	
HCPCS_1ST_MDFR_CD	Line HCPCS Initial Modifier Code	Line Items	Char	
HCPCS_2ND_MDFR_CD	Line HCPCS Second Modifier Code	Line Items	Char	
HCPCS_3RD_MDFR_CD	HCPCS Third Modifier Code	Line Items	Char	
HCPCS_4TH_MDFR_CD	HCPCS Fourth Modifier Code	Line Items	Char	
LINE_NDC_CD	Line National Drug Code	Line Items	Char	
LINE_RX_NUM	Line RX Number	Line Items	Char	
LINE_LTST_CLM_IND	Line Latest Claim Indicator	Line Items	Char	
LINE_NUM_ORIG	Original Claim Line Number	Line Items	Num	

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