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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC 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.
FI_CLM_PROC_DT	FI Claim Process Date	Base	Num	Date provided in SAS date (numeric) format.
PRVDR_NUM	Provider 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
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
CLM_FAC_TYPE_CD	Claim Facility Type Code	Base	Char	
CLM_SRVC_CLSFCTN_TYPE_CD	Claim Service classification Type Code	Base	Char	
CLM_FREQ_CD	Claim Frequency Code	Base	Char	
FI_NUM	FI Number	Base	Char	
CLM_MDCR_NON_PMT_RSN_CD	Claim Medicare Non Payment Reason Code	Base	Char	Payment, in dollars.
CLM_PMT_AMT	Claim Payment Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_PRMRY_PYR_CLM_PD_AMT	NCH Primary Payer Claim Paid Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_PRMRY_PYR_CD	NCH Primary Payer Code	Base	Char	
PRVDR_STATE_CD	NCH Provider State Code	Base	Char	
ORG_NPI_NUM	Organization NPI Number	Base	Char	
SRVC_LOC_NPI_NUM	Claim Service Location NPI Number	Base	Char	
AT_PHYSN_UPIN	Claim Attending Physician UPIN Number	Base	Char	
AT_PHYSN_NPI	Claim Attending Physician NPI Number	Base	Char	
AT_PHYSN_SPCLTY_CD	Claim Attending Physician Specialty Code	Base	Char	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
OP_PHYSN_NPI	Claim Operating Physician NPI Number	Base	Char	
OP_PHYSN_SPCLTY_CD	Claim Operating Physician Specialty Code	Base	Char	
OT_PHYSN_NPI	Claim Other Physician NPI Number	Base	Char	
OT_PHYSN_SPCLTY_CD	Claim Other Physician Specialty Code	Base	Char	
RNDRNG_PHYSN_NPI	Claim Rendering Physician NPI	Base	Char	
RNDRNG_PHYSN_SPCLTY_CD	Claim Rendering Physician Specialty Code	Base	Char	
RFR_PHYSN_NPI	Claim Referring Physician NPI	Base	Char	
RFR_PHYSN_SPCLTY_CD	Claim Referring Physician Specialty Code	Base	Char	
PTNT_DSCHRG_STUS_CD	Patient Discharge Status Code	Base	Char	
CLM_TOT_CHRG_AMT	Claim Total Charge Amount	Base	Num	Payment/Charged Amount, in dollars.
NCH_PTNT_STATUS_IND_CD	NCH Patient Status Indicator Code	Base	Char	
CLM_UTLZTN_DAY_CNT	Claim Utilization Day Count	Base	Num	Number of days (count)
NCH_BENE_DSCHRG_DT	NCH Beneficiary Discharge Date	Base	Num	Date provided in SAS date (numeric) format.
PRNCPAL_DGNS_CD	Claim Principal Diagnosis Code	Base	Char	
ICD_DGNS_CD1	Claim Diagnosis Code I	Base	Char	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
Number of Variables: 108

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Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
ICD_DGNS_CD2	Claim Diagnosis Code II	Base	Char	
ICD_DGNS_CD3	Claim Diagnosis Code III	Base	Char	
ICD_DGNS_CD4	Claim Diagnosis Code IV	Base	Char	
ICD_DGNS_CD5	Claim Diagnosis Code V	Base	Char	
ICD_DGNS_CD6	Claim Diagnosis Code VI	Base	Char	
ICD_DGNS_CD7	Claim Diagnosis Code VII	Base	Char	
ICD_DGNS_CD8	Claim Diagnosis Code VIII	Base	Char	
ICD_DGNS_CD9	Claim Diagnosis Code IX	Base	Char	
ICD_DGNS_CD10	Claim Diagnosis Code X	Base	Char	
ICD_DGNS_CD11	Claim Diagnosis Code XI	Base	Char	
ICD_DGNS_CD12	Claim Diagnosis Code XII	Base	Char	
ICD_DGNS_CD13	Claim Diagnosis Code XIII	Base	Char	
ICD_DGNS_CD14	Claim Diagnosis Code XIV	Base	Char	
ICD_DGNS_CD15	Claim Diagnosis Code XV	Base	Char	
ICD_DGNS_CD16	Claim Diagnosis Code XVI	Base	Char	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
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Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
ICD_DGNS_CD17	Claim Diagnosis Code XVII	Base	Char	
ICD_DGNS_CD18	Claim Diagnosis Code XVIII	Base	Char	
ICD_DGNS_CD19	Claim Diagnosis Code XIX	Base	Char	
ICD_DGNS_CD20	Claim Diagnosis Code XX	Base	Char	
ICD_DGNS_CD21	Claim Diagnosis Code XXI	Base	Char	
ICD_DGNS_CD22	Claim Diagnosis Code XXII	Base	Char	
ICD_DGNS_CD23	Claim Diagnosis Code XXIII	Base	Char	
ICD_DGNS_CD24	Claim Diagnosis Code XXIV	Base	Char	
ICD_DGNS_CD25	Claim Diagnosis Code XXV	Base	Char	
FST_DGNS_E_CD	First Claim Diagnosis E Code	Base	Char	
ICD_DGNS_E_CD1	Claim Diagnosis E Code I	Base	Char	
ICD_DGNS_E_CD2	Claim Diagnosis E Code II	Base	Char	
ICD_DGNS_E_CD3	Claim Diagnosis E Code III	Base	Char	
ICD_DGNS_E_CD4	Claim Diagnosis E Code IV	Base	Char	
ICD_DGNS_E_CD5	Claim Diagnosis E Code V	Base	Char	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
ICD_DGNS_E_CD6	Claim Diagnosis E Code VI	Base	Char	
ICD_DGNS_E_CD7	Claim Diagnosis E Code VII	Base	Char	
ICD_DGNS_E_CD8	Claim Diagnosis E Code VIII	Base	Char	
ICD_DGNS_E_CD9	Claim Diagnosis E Code IX	Base	Char	
ICD_DGNS_E_CD10	Claim Diagnosis E Code X	Base	Char	
ICD_DGNS_E_CD11	Claim Diagnosis E Code XI	Base	Char	
ICD_DGNS_E_CD12	Claim Diagnosis E Code XII	Base	Char	
CLM_HOSPC_START_DT_ID	Claim Hospice Start Date	Base	Num	Date provided in SAS date (numeric) format.
BENE_HOSPC_PRD_CNT	Beneficiary's Hospice Period Count	Base	Num	Number of periods (count)
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	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
CLM_MDCL_REC	Claim Medical Record Number	Base	Char	
CLAIM_QUERY_CODE	Claim Query Code	Base	Char	
FI_CLM_ACTN_CD	FI Claim Action Code	Base	Char	
CLM_TRTMT_AUTHRZTN_NUM	Claim Treatment Authorization Number	Base	Char	
CLM_PRCR_RTRN_CD	Claim Pricer Return Code	Base	Char	
CLM_SRVC_FAC_ZIP_CD	Claim Service Facility ZIP Code	Base	Char	
CLM_NEXT_GNRTN_ACO_IND_CD1	Claim Next Generation Accountable Care Organization Indicator Code 1	Base	Char	
CLM_NEXT_GNRTN_ACO_IND_CD2	Claim Next Generation Accountable Care Organization Indicator Code 2	Base	Char	
CLM_NEXT_GNRTN_ACO_IND_CD3	Claim Next Generation Accountable Care Organization Indicator Code 3	Base	Char	
CLM_NEXT_GNRTN_ACO_IND_CD4	Claim Next Generation Accountable Care Organization Indicator Code 4	Base	Char	
CLM_NEXT_GNRTN_ACO_IND_CD5	Claim Next Generation Accountable Care Organization Indicator Code 5	Base	Char	
ACO_ID_NUM	Claim Accountable Care Organization (ACO) Identification Number	Base	Char	
CLM_BENE_ID_TYPE_CD	For CMS Internal Use Only	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
Hospice Fee-for-Service Base Claims
Number of Variables: 108

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
CLM_RSDL_PYMT_IND_CD	Claim Residual Payment Indicator Code	Base	Char	
PRVDR_VLDTN_TYPE_CD	Provider Validation Type Code	Base	Char	
RR_BRD_EXCLSN_IND_SW	Railroad Board Exclusion Indicator Switch	Base	Char	
CLM_MODEL_REIMBRSMT_AMT	Claim Model Reimbursement Amount	Base	Num	Payment/Charged Amount, in dollars.
CLM_ADJUST_GRP_CD	Claim Adjustment Group Code	Base	Char	
CLM_ADJUST_RSN_CD	Claim Adjustment Reason Code	Base	Char	
CLM_PRCR_VRSN_CD	Claim Pricer Version Code	Base	Char	
PRVDR_FULL_CCN_NUM	Full CMS Certification Number for Provider	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
Hospice Fee-for-Service Revenue Center
Number of Variables: 38

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
SURVEY	Survey Name	Revenue Center	Char	
PATIENT_ID	NHCS Patient ID	Revenue Center	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Revenue Center	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	Revenue Center	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Revenue Center	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Revenue Center	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.
CLM_THRU_DT	Claim Through Date (Determines Year of Claim)	Revenue Center	Num	Date provided in SAS date (numeric) format.
CLM_LINE_NUM	Claim Line Number	Revenue Center	Num	
NCH_CLM_TYPE_CD	NCH Claim Type Code	Revenue Center	Char	
REV_CNTR	Revenue Center Code	Revenue Center	Char	
REV_CNTR_DT	Revenue Center Date	Revenue Center	Num	Date provided in SAS date (numeric) format.
HCPCS_CD	Revenue Center Healthcare Common Procedure Coding System	Revenue Center	Char	
HCPCS_1ST_MDFR_CD	Revenue Center HCPCS Initial Modifier Code	Revenue Center	Char	

For additional information on variables in FFS claims files, please see website:
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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Revenue Center
Number of Variables: 38

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
HPCPS_2ND_MDFR_CD	Revenue Center HCPCS Second Modifier Code	Revenue Center	Char	
HPCPS_3RD_MDFR_CD	Revenue Center HCPCS Third Modifier Code	Revenue Center	Char	
REV_CNTR_UNIT_CNT	Revenue Center Unit Count	Revenue Center	Num	Number of units (count)
REV_CNTR_RATE_AMT	Revenue Center Rate Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_PRVDR_PMT_AMT	Revenue Center Provider Payment Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_BENE_PMT_AMT	Revenue Center Beneficiary Payment Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_PMT_AMT_AMT	Revenue Center Payment Amount Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_TOT_CHRG_AMT	Revenue Center Total Charge Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_NCVRD_CHRG_AMT	Revenue Center Non-Covered Charge Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_DDCTBL_COINSRNC_CD	Revenue Center Deductible Coinsurance Code	Revenue Center	Char	
REV_CNTR_NDC_QTY	Revenue Center NDC Quantity	Revenue Center	Num	The unit of measurement for the drug that was administered (e.g., grams, liters) is indicated in the variable called REV_CNTR_NDC_QTY_QLFR_CD.
REV_CNTR_NDC_QTY_QLFR_CD	Revenue Center NDC Quantity Qualifier Code	Revenue Center	Char	
RNDRNG_PHYSN_UPIN	Revenue Center Rendering Physician UPIN	Revenue Center	Char	
RNDRNG_PHYSN_NPI	Revenue Center Rendering Physician NPI	Revenue Center	Char	

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Revenue Center
Number of Variables: 38

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
RNDRNG_PHYSN_SPCLTY_CD	Revenue Center Rendering Physician Specialty Code	Revenue Center	Char	
REV_CNTR_IDE_NDC_UPC_NUM	Revenue Center IDE, NDC, UPC Number	Revenue Center	Char	
REV_CNTR_STUS_IND_CD	Revenue Center Status Indicator Code	Revenue Center	Char	
REV_CNTR_PRCNG_IND_CD	Revenue Center Pricing Indicator Code	Revenue Center	Char	
THRPY_CAP_IND_CD1	Revenue Center Therapy Cap Indicator Code 1	Revenue Center	Char	
THRPY_CAP_IND_CD2	Revenue Center Therapy Cap Indicator Code 2	Revenue Center	Char	
REV_CNTR_RP_IND_CD	Revenue Center Representative Payee (RP) Indicator Code	Revenue Center	Char	
RC_MODEL_REIMBRSMT_AMT	Revenue Center Model Reimbursement Amount	Revenue Center	Num	Payment/Charged Amount, in dollars.
REV_CNTR_ADJUST_GRP_CD	Revenue Center Adjustment Group Code	Revenue Center	Char	
REV_CNTR_ADJUST_RSN_CD	Revenue Center Adjustment Reason Code	Revenue Center	Char	
REV_CNTR_RA_RMRK_CD	Revenue Center Remittance Advice Remark Code	Revenue Center	Char	

For additional information on variables in FFS claims files, please see website:
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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Span Codes
Number of Variables: 11

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
SURVEY	Survey Name	Span Code	Char	
PATIENT_ID	NHCS Patient ID	Span Code	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Span 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	Span Code	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Span Code	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Span 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	Span Code	Char	
RLT_SPAN_CD_SEQ	Claim Related Span Code Sequence	Span Code	Char	
CLM_SPAN_CD	Claim Occurrence Span Code	Span Code	Char	
CLM_SPAN_FROM_DT	Claim Occurrence Span From Date	Span Code	Num	Date provided in SAS date (numeric) format.
CLM_SPAN_THRU_DT	Claim Occurrence Span Through Date	Span Code	Num	Date provided in SAS date (numeric) format.

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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Condition Codes
Number of Variables: 9

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
SURVEY	Survey Name	Condition Code	Char	
PATIENT_ID	NHCS Patient ID	Condition Code	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Condition 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	Condition Code	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Condition Code	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Condition 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	Condition Code	Char	
RLT_COND_CD_SEQ	Claim Related Condition Code Sequence	Condition Code	Char	
CLM_RLT_COND_CD	Claim Related Condition Code	Condition Code	Char	

For additional information on variables in FFS claims files, please see website:
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Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Value Codes
Number of Variables: 10

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
SURVEY	Survey Name	Value Code	Char	
PATIENT_ID	NHCS Patient ID	Value Code	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Value 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	Value Code	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Value Code	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Value 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	Value Code	Char	
RLT_VAL_CD_SEQ	Claim Related Value Code Sequence	Value Code	Char	
CLM_VAL_CD	Claim Value Code	Value Code	Char	
CLM_VAL_AMT	Claim Value Amount	Value Code	Num	Payment/Charged Amount, in dollars.

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
Hospice Fee-for-Service Occurrence Codes
Number of Variables: 10

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC File Type	VAR Type	Value Description
SURVEY	Survey Name	Occurrence Code	Char	
PATIENT_ID	NHCS Patient ID	Occurrence Code	Char	Identifier for NHCS patients.
PUBLICID	NHIS Public Use ID	Occurrence 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	Occurrence Code	Num	Public-use identifier for NHANES participants.
FILE_YEAR4	Year of Medicare Fee-for-Service Claim (YYYY)	Occurrence Code	Num	2019 NHCS has been linked to 2019-2020 Medicare Data.
NCHS_CLM_ID	NCHS Claim Id	Occurrence 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	Occurrence Code	Char	
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence	Occurrence Code	Char	
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code	Occurrence Code	Char	
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date	Occurrence Code	Num	Date provided in SAS date (numeric) format.

For additional information on variables in FFS claims files, please see website:
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**Linked NCHS - 2019–2021 CMS Medicare Data
Hospice Fee-for-Service Demonstration Codes
Number of Variables: 10**

Document Version Date: September 25, 2025

Variable Name	Variable (VAR) Label	HSPC 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>**